

Medical and Health Care

10.28 Technological improvement and increased access to health care have resulted in steep fall in mortality but the burden of diseases due to communicable and non-communicable diseases and nutritional problems continue to be high. Deteriorating urban and rural sanitation, poor liquid and solid waste disposal and over crowding have resulted in an increasing prevalence of communicable diseases. The re-emergence of diseases like Kala Azar and HIV has added to the existing diseases burden. Control of communicable diseases is becoming more difficult with emergence of drug resistant pathogens and development of insecticide resistant vectors.

10.29 For eradication of leprosy free Multi Drug Therapy (MDT) services are being provided in all the districts of the country. So far 8.3 million patients have been cured with MDT and prevalence rate has reduced from 57 per 10,000 in 1981 to 5.19 in 1999. The country is progressing towards the goal of elimination of leprosy *i.e.* to bring down prevalence rate to less than 1 per 10,000 population.

10.30 An enhanced malaria control project with the support of IDA to prevent and control the morbidity and mortality due to the vector borne diseases like malaria is under implementation in 100 districts of seven states, namely, Andhra Pradesh, Bihar, Gujarat, Madhya Pradesh, Orissa and Rajasthan.

10.31 According to World Health Organisation (WHO) estimates, there are 30 million people reported to be infected with HIV/AIDS in the World. Awareness of AIDS came rather late in India with an isolated case detected in Maharashtra in 1986. A multi-sectoral approach has been developed for AIDS prevention and control in which action plans have been formulated with various Ministries. Phase II of the National Aids Control Programme (NACP) at an estimated cost of Rs.1155 crore has been launched from November 1999 for a period of five years. The steps taken by India to control AIDS/HIV and components of NACP (Phase II) are given in Box 10.2.

10.32 An outlay of Rs.1160 crore for central sector health programmes has been provided

BOX 10.2 Controlling AIDS/HIV

- HIV infection reached the Asian continent only in the eighties.
- India initiated sero surveillance for HIV infection in 1985 before AIDS cases were detected.
- Based on the data from ICMR studies, the National AIDS Control Programme (NACP) was drawn up.
- India initiated the NACP in 1992 during the silent phase of the HIV epidemic.
- It is estimated that there are about 3.5 million HIV infected persons in the country.

Components of NACP (Phase II)

- Reducing HIV transmission among poor and marginalised section of community at the highest risk of infection by targeted intervention, STD control and condom promotion;
- Reducing the spread of HIV among the general population by reducing blood based transmission and promotion of IEC, voluntary testing and counselling;
- Developing capacity for community based low cost care for people living with AIDS;
- Strengthening implementation capacity at the National, States and Municipal corporations levels through the establishment of appropriate organisational arrangements and increasing timely access to reliable information and
- Forging inter-sectoral linkages between public, private and voluntary sectors.

during 1999-2000 (BE) as compared to actual expenditure of Rs.812 crore during 1998-99.

10.33 The new Department of Indian System of Medicine and Homeopathy (ISM&H) continues to make steady progress. Steps have been initiated to prepare a Traditional Knowledge Data Base for preventing patents in this area, encouraging industry to go in for certification of Indian system drugs to improve credibility and, supporting extra-mural research and clinical trials aimed at proving the therapeutic efficacy of Indian system drugs. Various steps have also been taken to improve medical research, standardisation of drugs, giving focussed attention to conservation, cultivation and propagation of medicinal plants for domestic use as well as for export purposes. Active/positive involvement of the ISM&H in the national health programme, family welfare programme and family health care is also being pursued.