India’s disease burden and mission

What is the issue?

- Since August 2019, India has embarked on a large-scale plan to screen all children for leprosy and tuberculosis.
- The existing Rashtriya Bal Swasthya Karyakram (RBSK) infrastructure will be used for the screening.

How the screening will be done?

- An estimated 25 crore children below the age of 18 will be screened for these two infectious diseases.
- If a person is suspected to have either of the two, s/he will be sent to a higher centre for confirmation.

Why is the screening necessary?

- **Leprosy** is a chronic infectious disease caused by Mycobacterium leprae.
- It usually affects the skin and peripheral nerves but has a wide range of clinical manifestations.
- It is a leading cause of permanent physical disability.
- Timely diagnosis and treatment of cases, before nerve damage has occurred, is the most effective way of preventing disability due to leprosy.
- **Tuberculosis infection**, caused by Mycobacterium tuberculosis, is one of the most common communicable diseases in India.
- Its transmission is fueled by unhygienic, crowded living conditions.
- It is said that most Indians carry the bacterium and the infection flares up when their immunity levels are low.
- India’s tuberculosis burden is the highest in the world.
- Children tend to be more prone to catching infectious diseases from their peers because of long hours in confined spaces and more bodily contact than in adults.

What could be the solution?

- Addressing the problem early would ensure that the infection cycle is broken.
- In the case of leprosy, it could mean the prevention of disability.

- The programme would also give preventive medication to people who have come in contact with the confirmed cases.
- For TB, India's malnutrition burden is an additional risk factor which should be addressed soon.
- As per the National Family Health Survey (NFHS)-4 (2015-16), 35.7% children below age five are underweight, 38.4% are stunted (low height for age) and 21% are wasted (low weight for height) in the country.

What is the burden in India?

- India eliminated leprosy in 2005 — WHO defines elimination as an incidence rate of less than one case per 10,000 population.
- All states except Chhattisgarh and the Union Territory of Dadra and Nagar Haveli have eliminated leprosy.
- However, 1.15 lakh to 1.2 lakh new leprosy cases are still detected every year, Health Ministry officials said.
- TB kills an estimated average of over 1,300 Indians every day.
- India also has more than a million "missing" cases every year that are not notified.
- Most remain either undiagnosed or unaccountably and inadequately diagnosed and treated in the private sector.
- The problem is that many of these patients do not complete the full course of the antibiotic.
- This exposes the bacterium to the medicine without fully killing it, which is more than enough for the bacterium to evolve resistance to that particular drug.

What is the mission focus?

- Launched in 2013 under the National Health Mission, RBSK is focused on preventing disease and disability in children.
- "Child Health Screening and Early Intervention Services" refer to early detection and management of a set of 30 health conditions prevalent in children less than 18 years of age.
- These conditions are together described as 4Ds and they are defects at birth, diseases in children, deficiency conditions and developmental delays including disabilities.
- Until now, neither leprosy nor TB was a part of the programme.
- In 2017, India had set a target of elimination of leprosy by 2018.
- The deadline has passed but leprosy remains a challenge in a country that launched the National Leprosy Eradication Programme way back in 1955.
- For tuberculosis, the global Sustainable Development Goal target is to end the disease is 2030.

- However, there is a new urgency in India’s TB control efforts since 2018, when Prime Minister Narendra Modi suo motu advanced the deadline for India to end TB to 2025.

Source: The Indian Express

