

Expenditure Incurred on Eradication of Malaria

4580. SHRI DAULAT RAM SARAN: Will the Minister of HEALTH be pleased to state:

(a) when the malaria eradication programme was started and the total expenditure incurred thereon;

(b) whether it is a fact that malaria epidemic had been eradicated in the country and an announcement was made that a reward would be given on reporting an incidence of malaria; and

(c) the reasons for the spread of this disease again and the measures taken to check it?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH (SHRI NIHAR RANJAN LASKAR): (a) The National Malaria Eradication Programme was started in 1958. The total expenditure thereon from 1958 to March, 1980 was Rs. 494.03 crores approximately.

(b) No.

(c) Does not arise. However, in order to check the increase in the incidence of Malaria, a Modified Plan of Operations is being implemented with effect from 1st April 1977, salient features of which are given in the statement attached.

ANNEXURE-I

The Salient Features of the Modified plan of Operations are as Follows:

1. The existing NMEP units have been reorganised to conform to the geographical boundaries of the districts. Previously the Chief Medical Officers of the districts were not involved in the programme, but with the re-organisation of the units, they are primarily responsible for the programme in the districts.
2. Increased quantity of various insecticides viz. DDT, BHC, Malathion have been/are being supplied to the States.

Alternative, insecticides are also being provided to the units/districts where the vector has become resistant to DDT/BHC.

3. Insecticidal spray operations have been undertaken in all rural areas which have incidence of 2 or more cases per thousand population.
4. Adequate quantity of anti-malaria drugs have been/are being supplied to the State/Union Territory Governments. About 3.40 lakhs Drug Distribution Centres/Fever Treatment Depots have been established to make the drug freely available. In areas where resistance to chloroquine by parasites has been noticed, alternative anti-Malarials like quinine have been supplied.
5. Anti-larval operations under Urban Malaria Programme have been intensified. The Scheme has been extended to 12 more towns during 1979 besides the 103 existing towns. Seventeen more towns are proposed to be brought under the scheme.
6. Supervision of the field staff has been toned up.
7. Steps have been taken for undertaking both fundamental and operational research in the field of Malaria Eradication Programme. 14 research schemes i.e. 8 for operational field research and 6 for laboratory research on malaria has been sanctioned by Government of India to the I.C.M.R.
8. For early examination of blood smears and quick treatment of positive cases, laboratory services have been decentralised to the PHC level.
9. With a view to controlling the spread of plasmodium falciparum infection which accounts for death due to cerebral malaria, with the help of World

Health Organisation, an intensive programme was started in October, 1977 in 18 districts of the North Eastern Region of the country. It is being extended.

10. The following steps for imparting health education regarding the disease and seeking public co-operation and participation in controlling malaria have been taken.
 - (i) Panchayats and school teachers have been involved in the distribution of chloroquine tablets.
 - (ii) Drug Depots have been opened in inaccessible tribal areas. In some States this have been done in collaboration with the Tribal Welfare Departments.
 - (iii) A new film 'The Threat' was made and released all over the country in fourteen regional languages.
 - (iv) Posters in regional languages 'Fever May be Malaria: Take Chloroquine tablets' have been supplied to the States for display in Panchayat Ghars, Schools, Primary Health Centres and Sub-centres.
 - (v) A pamphlet in regional languages 'Malaria—What to do' given the signs, symptoms dose schedule of chloroquine, indication of contra-indication has been supplied to the States for distribution to Panchayats, school teachers and other voluntary agencies.
 - (vi) It is also proposed to orient the President and the Secretaries of the Panchayats on Malaria.
 - (vii) Folder on the role of Medical Practitioners has been supplied to the States for distribution to medical practitioners. Similarly, a pamphlet 'Why Malaria again' has been sup-

plied to the States for distribution to the Deputy Commissioners, Chief Medical Officers and Block Development Officers for apprising them about the existing problems of malaria and the action proposed to be taken.

(viii) To disseminate the anti-malaria message, special postal stationery has been released by Posts and Telegraphs Departments.

(ix) A. I. R and Doordarshan have started programmes to eradicate public on prevention and treatment of Malaria.

Indigenous control System

4581. SHRI RAMAVATAR SHASTRI: Will the Minister of RAILWAYS be pleased to state:

(a) whether it is a fact that an indigenous control system has been introduced in the Railways; and

(b) if so, the details thereof and the result thereof?

THE DEPUTY MINISTER IN THE MINISTRY OF RAILWAYS (SHRI MALLIKARJUN): (a) M/s. Electronics Corporation of India Ltd. have developed a thyristor convertor equipment for WAG-I type of electric locomotives of Indian Railways. Perhaps the Honourable Member of Parliament has in mind this equipment recently put in service in one electric locomotive at Electric Loco Shed at Tatanagar.

(b) The thyristor convertor equipment enables control of operation of electric locomotives at different desired speeds. The first prototype equipment is undergoing trials in Tatanagar area. Special instrumented trials on the first prototype locomotive have not yet been completed. Another nine sets of equipment are to be delivered and commissioned for intensive service trials as prototypes. On completion of these trials, evaluation of the equipment will be carried out. Based on service experience of the prototype equipments,