

**GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA**

STARRED QUESTION NO:336
ANSWERED ON:13.08.2003
HIV/T.B. CASES
MANIKRAO HODLYA GAVIT;RATTAN LAL KATARIA

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether WHO while expressing serious concern over two lakh victims of HIV getting infected with T.B. in India has warned the Government that if concrete steps are not taken in the meanwhile, India may face a far greater crises of HIV and T.B. as reported in the Rashtriya Sahara dated July 21, 2003;

(b) if so, the facts thereof; and

(c) the concrete steps taken/being taken by the Government to deal with the crises?

Answer

MINISTER OF HEALTH AND FAMILY WELFARE AND PARLIAMENTARY AFFAIRS (SMT. SUSHMA SWARAJ)

(a)to(c): A statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 336 FOR 13.8.2003

In a press release dated 15th July 2003, the World Health Organization has called for widespread access to free anti- tuberculosis drugs and quality care for people living with HIV along with renewed efforts to increase anti-retrovirals (ARVs) in developing countries. Currently, tuberculosis is the biggest killer of people with AIDS. Anti tuberculosis drugs are a cocktail of medicines (isoniazid, rifampicin, pyrazinamide and ethambutol) that, when taken properly, are more than 95% effective in curing tuberculosis regardless of a person's HIV status.

India has the largest number of TB cases in the world. There are already 180,000 Indians living with HIV who are also infected with TB. The DOTS programme in India is one of the most rapidly expanding programmes in the world. Anti-tuberculosis drugs used through the DOTS strategy can prolong the lives of people living with HIV.

Recognizing the serious threat posed by the dual epidemic of HIV and TB, the Government of India has adopted the DOTS strategy being practiced under the Revised National Tuberculosis Control Programme(RNTCP) and has improved the management of both tuberculosis and HIV.

States with high prevalence of HIV infection have been prioritized for RNTCP coverage. A joint action plan on HIV / TB programme co-ordination was developed in November, 2001, between the National AIDS Control Organisation (NACO) and the Central TB Division (responsible for implementation of RNTCP). Although the initial focus was on the six high HIV prevalence states, this joint action plan is being gradually expanded in a phased manner, to cover other states.