

**GOVERNMENT OF INDIA  
MINISTRY OF HEALTH AND FAMILY WELFARE  
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA  
STARRED QUESTION NO. 370  
TO BE ANSWERED ON THE 13<sup>TH</sup> DECEMBER, 2019  
KIDNEY PATIENTS**

**†\*370. SHRIMATI ANNPURNA DEVI:  
SHRI SADASHIV KISAN LOKHANDE:**

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

- (a) whether the kidney related diseases are increasing rapidly in the country;
- (b) whether the number of kidney patients have doubled during the last twenty-five years, if so, the details thereof and the reaction of the Government thereto;
- (c) whether the Union Government keeps the year-wise record of the number of kidney patients in the country;
- (d) if not, the strategy adopted by the Union Government to prevent kidney diseases in the absence of the above record; and
- (e) the corrective measures taken by the Government in this regard?

**ANSWER  
THE MINISTER OF HEALTH AND FAMILY WELFARE  
(DR. HARSH VARDHAN)**

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

**STATEMENT REFERRED TO IN REPLY TO LOK SABHA  
STARRED QUESTION NO. 370\* FOR 13<sup>TH</sup> DECEMBER, 2019**

(a) to (e): As informed by Indian Council of Medical Research (ICMR), Disability Adjusted Life Years (DALY) related to chronic kidney disease has increased by 12% between 1990 to 2016, as per the Global Burden of Disease – India Study. However, it is anticipated that with increase in cases of Diabetes & Hypertension as well as awareness about kidney diseases, more cases are getting reported in hospitals. The ICMR conducted a prevalence study of CKD in the Indian population with centres at Delhi, Jaipur, Hyderabad, Bhubaneswar, Kolkata, Guwahati and Mumbai. The initial trends of data indicates a community prevalence of CKD on first screening ranging from 5.5% - 18.2% with an average prevalence of 11.4% on first screening.

Public Health is a State subject. However, the Central Government supplements the efforts of States/UTs through technical and financial support. The Government of India is implementing National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) for interventions up to District level under the National Health Mission (NHM). It focuses on awareness generation for behaviour and life-style changes, screening and early diagnosis of persons with high level of risk factors and their referral to higher facilities for appropriate management of common Non-Communicable Diseases (NCDs) including diabetes and hypertension, which are two known causes of kidney diseases. For early diagnosis, population-based screening for common NCDs including diabetes and hypertension has been initiated by Government of India by utilizing the services of the frontline health-workers under existing Primary Healthcare System.

Under Pradhan Mantri National Dialysis Programme (PMNDP), State Governments are supported for providing dialysis services free of cost to the poor under the Umbrella of the NHM. Such support is based on the proposals received from States in their annual Programme Implementation Plans (PIPs). A total of 465 Districts have been covered with 798 Centres having 4,727 machines with a combined capacity of performing approximately 56.11 Lakhs Haemodialysis Sessions under PMNDP.

