

INTEGRATED DISEASE SURVEILLANCE PROGRAMME (IDSP)

Introduction:-

The Integrated Disease Surveillance Programme (IDSP) was launched in the year 2004 by Ministry of Health & family welfare GOI. In Jammu & Kashmir it was launched in 3rd phase of the programme i.e. in the year 2007. IDSP is a decentralized State Based surveillance programme. The diseases targeted for surveillance are Malaria, Cholera, Typhoid, Tuberculosis, Polio, Plague, Meningoencephalitis, Measles and road traffic accidents (Link up with Police Computers).

It also comprise of “Sentinel surveillance” of Sexually Transmitted diseases, Blood Borne & other conditions like HIV/HBV/HCV, water quality & other outdoor Air Quality.

Also Regular Periodic Surveys” comprising of Non Communicable Risk factors like Anthropometry, Physical Activity, Blood pressure, Tobacco, Nutrition, Blindness and “Unusual Clinical syndromes causing Death and Hospitalization”; and specific disease selected by the state in addition to above are being surveyed under the program.

Objectives/Aims of the programme:-

The IDSP program is intended to detect early warning signals of impending outbreaks and help initiate an effective response in a timely manner.

Infrastructure of IDSP:-

The infrastructure comprises of Surveillance units which have been established in six old districts of Jammu Division viz; Doda, Jammu, Kathua, Poonch, Rajouri & Udhampur. Besides, Surveillance units have also been established in Govt. Hospital Gandhi Nagar, Jammu & Govt. Medical College, Jammu. However, in order to establish the said units in the newly created districts of Jammu division viz; Kishtwar, Reasi, Ramban & Samba funds has been approved in the year 2013-14 and the units shall be established subsequently. Further, two laboratories have

also been approved in the year 2013-14 for district Rajouri & district Doda in a phased manner.

In addition, the MOU has been signed with the Govt. Medical College Jammu for establishing the State referral laboratory under the program.

Benefits of the program:-

The program is beneficial to control the spread of epidemic outbreak of Communicable Diseases in particular, due to constant surveillance & improved data reporting, which is collected on weekly basis from reporting units. The weekly data is analyzed by State & District level surveillance units for disease trends whenever there is rising trends of illness, it is cautiously investigated by the RRT to diagnose the outbreaks. At the same time disease surveillance is better because of better documentation.

Under the program 09 outbreaks were investigated in the year 2013-14 like Diarrhoea & Dysentery, HINI, Rheumatoid Spondylophyseal Dysplasia, Scabies, Gastroenteritis, Pyrexia (Typhoid), Dengue fever, Cough & Cold (Broncho Pneumonia) & Kala Azar (Leishmaniasis) was detected in village Bhagwa, District Doda for the first time in our state through the effort of IDSP.

NATIONAL VECTOR BORNE DISEASE CONTROL PROGRAMME

Introduction:-

National Vector Borne Disease control Programme (NVBDCP) Is a centrally sponsored scheme for the prevention and control of vector borne diseases i.e. Malaria, Dengue, Lymphatic Filariasis, Kala-azar, Japanese Encephalitis and Chikungunya in India. Initially it was named as “National Malaria Eradication Programme (NMEP)”in the year 1958 and renamed as “National Anti Malaria Program (NAMP)” in the year 1999.It came to be known as “National Vector Borne Disease Control Programme” in the year 2003 and at present comprises of the control of the following diseases:-

- 1. Malaria.**
- 2. Dengue.**
- 3. Chikungunya.**
- 4. Filaria.**
- 5. Kala-azar.**
- 6. Japanese Encephalitis.**

Since, J&K State is free from Chikungunya, Japanese Encephalitis and Filaria only Malaria, Dengue & Kala Azar cases are being reported from different quarters of the division.

Objectives/Aims of the programme:-

The main objective of the programme is to control and prevent the vector borne diseases existing in the State like malaria, Dengue & Kala Azar. To undertake Information, Education and Communication (IEC) activities constantly ,to spread awareness among people especially in the vulnerable seasons. It aims at close monitoring, vector surveillance, fever surveillance Focal Sprays and anti –larval measures undertaken from time to time.

Infrastructure of NVBDCP:-

A total of 06 Sentinel Surveillance Hospitals have been established in collaboration with State Health institutions viz; Dengue Sentinel Surveillance Hospital in Govt. Medical College, Jammu, DH Kathua, DH Udhampur, DH Rajouri, DH Poonch, DH Doda. Besides, three new SSH has been proposed for the same Govt. Hospital Gandhi Nagar, Jammu, Govt. Hospital Sarwal, Jammu and District Hospital Samba.

Benefits of the programme:-

In rural areas fever surveillance is undertaken, radical treatment to the malaria positive cases is provided. Focal spray is done where malaria Positive cases are detected. Anti –larval operations are carried out in Urban Areas throughout the year. Similarly fogging operations in urban areas are carried out during transmission seasons. Also Malaria Control measures are carried out under malaria Control Program in Jammu City. Larvivorous fish is put in stagnant water to eat larva of the mosquitoes in Jammu Urban. Intensive I.E.C activities are also undertaken throughout the year like “Micking, Phamphlet, handbills & Television” etc.

REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME (RNTCP)

Introduction:-

RNTCP or the **Revised National Tuberculosis Control Program** is the state-run tuberculosis control initiative of the Government of India. It incorporates the principles of directly observed treatment-short course (DOTS), the global TB control strategy of the World Health Organization. The program provides, free of cost, quality anti-tubercular drugs across the country through the numerous Primary Health Centre's and the growing number of private-sector DOTS-providers. RNTCP was implemented in District Jammu on 8th April 2005 and at present all the districts of Jammu division are being covered under the program.

Objectives/Aims of the program:-

The goal of RNTCP is to decrease mortality and morbidity due to TB and cut transmission of infection until TB ceases to be a major Health problem in India.

RNTCP aims to bring diagnosis and treatment services closer to the patient at the community level, notably through the network of ASHA and community Health workers.

Infrastructure of RNTCP:-

The infrastructure comprises of a State TB Control Society, 01 Intermediate Referral laboratory, 01 Dr. TB Ward, 06 District TB Centre's, 17 Treatment Units and 84 Designated Microscopic Center's. Also there are a total of 1274 DOT (Directly Observed Treatment) Centre's established in all the districts of Jammu division

Benefits of the programme:-

The program provides complete treatment of Tuberculosis to the patient free of cost. It also provides free transportation to the patient and the attendant. There is a provision of honorarium to DOT providers to ensure their sustained interest in the patient.

NATIONAL LEPROSY ERADICATION PROGRAMME (NLEP)

Introduction:-

National Leprosy Eradication Programme (NLEP) was launched in October 2000 in order to reduce the burden of leprosy in the state. The programme strives to provide high quality leprosy services for all persons affected by Leprosy through general health care system.

Objectives /Aims of the programme:-

1. Early detection through active surveillance by the trained health workers.
2. Regular treatment of cases by providing Multi-Drug Therapy (MDT) at fixed intervals or centre's a nearby village of moderate to low endemic areas/district.
3. Appropriate medical rehabilitation and leprosy ulcer care services.
4. Enhance Disability Prevention and Medical Rehabilitation (DPMR).
5. To strengthen the Monitoring and Supervision Component of the surveillance System.
6. To bring level of prevalence (PR) <1/10,000.

Infrastructure:-

District Leprosy Office is existing in the premises of Directorate of Health Services, Jammu .The District Nucleus Team consists of 01District leprosy Officer, 01Medical Officer,05 Para medical Assistants & Para Medical Supervisor

Benefits of the program:-

1. Under the program free MDT and other supportive drugs are being provided to the leprosy cases.
2. Free MCR footwear to disabled patients.
3. Reconstructive surgery to needy disabled/handicapped cases.
4. Organization of health camps (Skin) and distribution of free medicines.
5. IEC activities are carried out at District level and state level to ensure awareness among the community.
6. Family contact survey of all Multibacillary Cases in all districts of Jammu division.

NATIONAL PROGRAMME FOR PREVENTION AND CONTROL OF CANCER, DIABETES ,CARDIOVASCULAR DISEASES AND STROKE (NPCDCS)

Introduction:-

NPCDCS Scheme was launched on Pilot basis in 2 Districts of Jammu Division in September 2011. The Districts in which the scheme is being implemented are District Udhampur and District t Doda.

Objectives/Aims of the programme:-

1. Health Promotion through behavior change.
2. Prevention and early detection of Diabetes, hypertension, CVDs and common cancers.
3. Building capacity at various levels of health care facilities for prevention, early diagnosis, treatment, research and rehabilitation in respect of NCD's
4. Supporting development of database for NCDs through regular surveillance
5. Monitoring risk factors, morbidity and mortality associated with NCD's

Infrastructure:-

The Divisional level NCD cell has been established in the premises of Directorate of Health Services, Jammu. Similarly, NCD clinics have been established at District Hospital & CHC level. Physiotherapy Unit, Cardiac Care unit & District cancer facility has been established at District Hospital level.

Benefits of the programme:-

Persons less than 30 years of age are being screened for Diabetes and hypertension. People are being screened for Cancer. Persons are being provided with physiotherapy in Physiotherapy clinic. Patients are registered in cardiac care Unit. Chemotherapy is being administered at District cancer care facility.

NATIONAL TOBACCO CONTROL PROGRAMME (NTCP)

Introduction:-

National Tobacco Control Programme is envisaged to be implemented in the phased manner in 10 districts of Jammu Division. 3 districts (Udhampur, Doda and Rajouri) in 2014-15, additional 3 districts (Jammu, Kathua and Ramban) in 2015-16 and rest of the 4 districts viz. Samba, Poonch, Reasi and Kishtwar will be added in 2016-17.

Objective/Aim of the program:-

1. To reduce the prevalence of tobacco consumption.

Infrastructure to be created:-

1. To set up Tobacco Cessation Centre and District Tobacco Control Centre's in 10 districts of Jammu Division.

Benefits of the program:-

1. To train health and social workers so that they can play an active role in the implementation of the program.
2. To undertake IEC activities and mass awareness campaigns to make people aware of the bad effects of tobacco consumption and other risks associated with its consumptions

NATIONAL PROGRAMME FOR HEALTH CARE OF ELDERLY (NPHCE)

Introduction:-

NPHCE Scheme was launched on Pilot basis in September 2011 in 2 Districts (Udhampur and Doda) of Jammu Division.

Objectives/Aims of the programme:-

1. To provide an easy access to promotional, preventive, curative and rehabilitative Services to the elderly through community based Primary health Care approach
2. To identify health Problems in the elderly and provide appropriate health interventions to the community with a strong referral back up support.
3. To build capacity of the medical and paramedical professionals as well as care takers within the family for providing health care to elderly.

NATIONAL PROGRAMME FOR CONTROL OF BLINDNESS (NPCB)

- National Programme for control of Blindness (NPCB) was launched in the year 1976 at National level as a 100% Centrally Sponsored Scheme with the goal of reducing the prevalence of blindness from 1.4% to 0.3% by 2020. During the years 1991-94 District Blindness Control Societies were created all over India & Six in Jammu Division in the erstwhile districts as the functional controlling units of the NPCB. At present there are 10 District Blindness Control Societies (DBCS). The main objective of the Programme is to reduce prevalence of Blindness through identification & treatment of Blind at Primary, Secondary & Tertiary level.
- To enhance community awareness on Eye Care & lay stress on preventive measures.

Objective of the scheme:

1. To increase & enhance research for prevention of Blindness.
2. To secure participation of voluntary organization/private practitioners.
3. To strengthen the existing & developing additional human resources & infrastructure facilities for providing high quality comprehensive eye care.

NATIONAL PROGRAMME FOR PREVENTION AND CONTROL OF DEAFNESS (NPPCD)

DETAIL OF SCHEME

The National Programme for the prevention and Control of Deafness (NPPCD) was launched in January 2007 with the long term objective of reducing the total disease burden of hearing impairment & deafness by 25% at the end of eleventh 5-year plan. The said scheme was taken up in hand in three districts of Jammu province viz. District Jammu, District Rajouri and District Doda during the year 2011-2012.

The objectives of the programme are:-

1. To prevent available hearing loss on a/c of diseases or injury.
2. Early identification, diagnosis and treatment of ear problems responsible for hearing loss and deafness.
3. To medically rehabilitate persons of all age groups suffering from deafness.
4. To strengthen the existing inter sectoral linkage for continuously of the rehabilitation programme for persons with deafness.

BENEFITS: - In Jammu district 480 numbers of hearing aids were distributed amongst the beneficiaries.

National MENTAL HEALTH PROGRAMME (DMHP) JAMMU DIVISION

INTRODUCTION

There are presently four districts namely Jammu, Kathua, Udhampur & Rajouri where officially Mental Health Programme has been implemented as per the guidelines and the Grants / budget was provided for this purpose in the year 2008. In all the above mentioned four districts an independent Mental Health Unit has been made functional which is being run under the supervision of nominated Mental Health Programme Officers there by providing OPD services to the mentally ill patient as well as Psychological services in the form of Psychotherapy, Rehabilitation etc. through Clinical Psychologist & Psychiatric Social Worker where available.

There is likelihood of starting indoor services in the near future by earmarking three beds in each Govt. District Hospitals i.e. Govt. Hospital Gandhi Nagar, Jammu, Govt. Hospital Sarwal Jammu, Govt. District Hospital Udhampur, Kathua and Rajouri where acutely mentally ill / violent patient will be kept for proper observation & treatment who cannot be managed at home.

There are officially four doctors designated as District Mental Health Programme Officers who have done one year certificate course from NIMHANS Bangalore and are presently working as incharge of Mental Health unit in each district.

The Aims and Objectives of the District Mental Health Programme as under:-

- ✓ To provide basic Mental Health Care Services in the community.
- ✓ To identify and treat Mental Health Problem in the community.
- ✓ Proper & timely referral of Patients to Mental Health facilities in the community.
- ✓ Intensive education in the community to reduce stigma & for early reporting.
- ✓ Adequate psychological care of recovered mentally.
- ✓ School and colleges Mental Health Activities.
- ✓ Active public private partnership for various components of programme.
- ✓ Certain modifications of programme depending on geographical situation to be done accordingly.
- ✓ Both rural and urban districts to be covered.
- Training of Paramedics, village level workers, religious leaders etc in the community.
- Intensive supervision and monitoring of the programme in the community.
- Mental Health Activities in Schools and colleges. About more than 50% of schools and colleges to be covered in the programme.
- Adequate care of recovered from major Mental activities .
- Intensive education in the community and to reduce the stigma.
- Providing FREE MENTAL HEALTH DRUGS to the suffering patients in the community.

