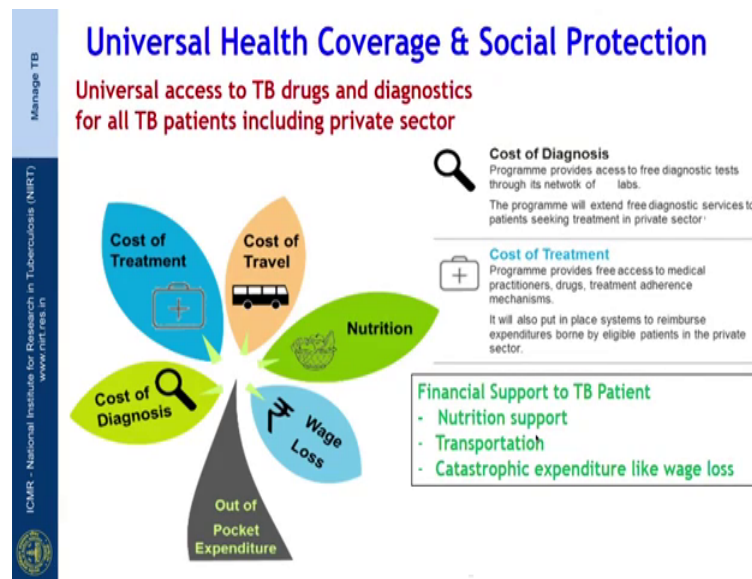**Manage TB**
Dr. Raghuram Rao
DGHS, Ministry of Health and Family Welfare Government of India, New Delhi

Lecture – 65
Services Offered by RNTCP
Session-04

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The program also provides you know tries to provide social protection by trying to make up for the out of pocket expenditure, that patient may encounter due to the cost for diagnosis of treatment or for travelling and coming and going to the health facility for taking treatment   and also incentivizing him for notification or providing nutritional support and also to try to compensate for any loss of wages.

So, the programme and not only from the program, but also the state initiatives and various district level initiatives are under various international programmes or under various other departments, you know like from the social welfare department or from the women and child department, there are various schemes for which the patient is linked to. so, that various issues can be addressed.

And these and the financial incentives like I said is going to be   transferred directly into the beneficiaries account through the DBT mechanism so, that transparencies also ensured and the patient is able to receive that money directly. This all these efforts are basically to provide you know universal access to all TB patients or including the private

sectors for drugs and diagnostics. And the various cost that is involved because for diagnosis or for treatment is taken care off.

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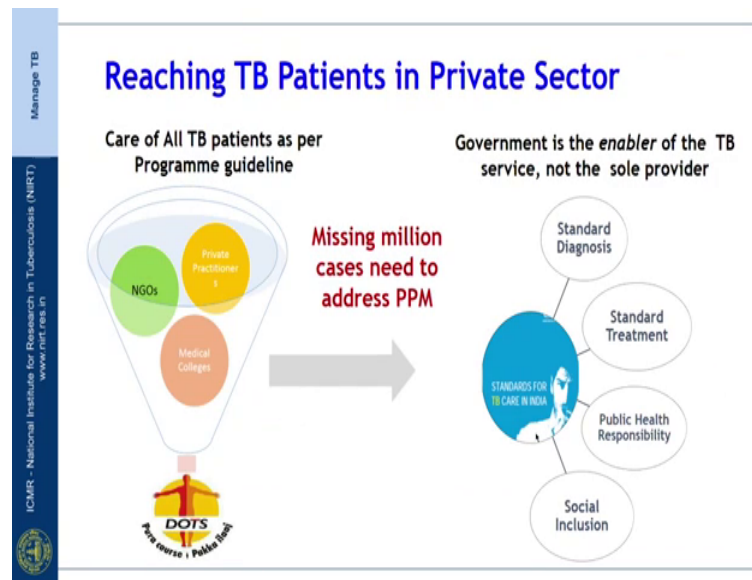

The program DBT which I just book off the incentives that are available under the program for the TB patients or for the treatment supporters or for the private practitioner for notifying or ensuring treatment compliance. These are provided through the system software, that we have for the programme which is called as the Nikshay.

The nikshay is linked to aadhaar and also linked to the bank account of the patient and the public financial management system, that is for the financial management system for the government. The soft the nikshay software is linked to all these three aspects and what is called as jan jan dhan yojana is basically is the account of the patient. Aadhaar and nikshay these this triad is what is used for providing and the systems have been built to provide seamless transfer of money from the government to patients account directly.

And the government of India has also issued the gazette to ensure that aadhaar is mandatorily entered in for providing this cash benefits, aadhaar is linked and also for notification of TB patients in the nikshay, the information of aadhaar is collected and entered into nikshay.

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The private sector is a big challenge that we have in this country. The health seeking behavior that we have in our country almost 60 to 70 percent from the patients seek the primary care at least for the first time, in the private setting in India.

And this has resulted in a huge number of TB patients, who are probably you know taking treatment in the private sector, but are not getting reported under programme and because they are not reported the programme does not know those patients, programme is unable to provide the ancillary services and the social protection measures or the support public administers that is required for a TB patient.

So, the programme has effectively developed mechanisms and systems to engage with the private sector and the initial concept of passive you know of any private practitioner coming to the programme is now changed to a very active mode where the programme is actively going at and engaging with the private sector.

There are standards for TB care in India that has been published by the government. So, the treatment protocols, the diagnostic protocols everything is available and standardized you know drugs, WHO qualified or pre qualified quality assured drugs are available under the programme and of the private sector is provided all these support free of cost so.

So, the patient seeking care in the private sector can also have access to free drugs and diagnostics and also the society can be benefitted by the public health measures and the social protection measures, that are available under the programme for the patient.

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The government has made the notification of tuberculosis as mandatory procedure and the private sector even if tuberculosis anybody (Refer Time: 05:31) is diagnosing tuberculosis private sector, he or she should notify that case and you know to the public health department.

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The programme has developed format. So, that the patient the provider in the private sector also can notify tuberculosis very easily, we can even just send an SMS or a Whatsapp message or emails or just give the information, to the nearest health care worker by over the phone.

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And these systems whatever information that is collected is then entered into nikshay, which is the softwares for MIS tool that we have under the programme.

All the activities and the services that are provided for table process right from diagnosis to treatment to adherence to follow up, everything is covered under these and is covered and linked into nikshay. The newer diagnostic tools like CB NAAT that is available is also linked to nikshay and the CB NAAT information is directly available and the message and the results everything can go seamlessly from the and patient based information is available in this system.

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The programme has productively taken certain initiatives. So, engage with the private sector, there are very good pilot models that the programme has demonstrated it is called the public private you know support agency and various schemes that are available for it is called the PPM schemes or the partnership schemes, where the private sector can be engaged and the district and the supervises that we have at the block level, are the ones who reach out to the private practitioner or for him all these schemers that are available through this.

I will just highlight on couple of pilots that we did, the pilot models on private sector interventions, we using the inter you know public private support agency, where an NGO was identified to actively go and reach out to the private sector and provide free drugs and diagnostics or subsidized drugs to the private sector and these models where these pilots were done in parts of Patna, in Mehesana and in Mumbai and you could see that the notification of cases almost doubled in Mehesana and in Mumbai.

Whereas in Patna we could the numbers increased more than three times. So, these models are now being skilled up to the entire country in based on case in scenarios different scenarios in different districts. The also the efforts the programme has you know taken to reach out to the pharmacies and the drugs like chemist and monitor the schedule H 1 drugs and since RNTCP the tuberculosis anti tuberculosis drugs are all schedule H 1 drugs and it is to be mandatorily maintained by the pharmacies.

The name of the copy of the prescription and the patient details are expected to be you know maintained by the private pharmacies. So, the programme has started monitoring and utilizing this information to identify the private practitioner or the patient and reach out, and provide them in the various services like and incentives that are financial support or social welfare support that is required for that patient.

So, these were various efforts of private sectoring engagement has in the national level, year on year over the last 3 years number of cases notified has increased from 1 lakh in the private sector, to almost 3 lakh, 2 lakhs and three lakhs in this subsequent years. So, in the last year we had more than three and half lakh tuberculosis cases notified by the private sector.

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So, to summarize in this session the I would like to stress upon that the TB is tuberculosis is a accruable disease and the programme is providing free drugs and diagnosis, the most important thing is that the patient has to and you know complete the duration of treatment and ensure adherence so, that an to the drug regimen various ice it tools are available to support patient, there are standardized diagnostic algorithms and treatment protocols that are made available and these are all following all guidelines that are prescribed by the WHO, and it ensures that the services that are provided are of quality assured services. The information of tuberculosis, here notifying that to the public health system is mandatory.

This message has to be reinforced to the private sector and so, it is essential that you take back this message and you remember that notification of TB is a mandatory activity in this country. The programme also provides support for addressing all the other you know requirement for a tuberculosis patient like, the social protection measures that would be required for nutrition or housing etcetera and you know these things are also important and TB providing free diagnosis and treatment is not going to help us eliminate disease infection in the country.

The tuberculosis can be addressed only when all these social determinants are addressed and hence it requires a multi sector. So, with these message I am sure you would have learnt the basics of tuberculosis diagnosis and the various treatment regimes and services I will give under this programme.

Thank you very much.