NOVEL CORONAVIRUS: COLLABORATE TO CONTAIN

A recent viral epidemic resulting in a cluster of pneumonia cases in Wuhan city in the Hubei province of China and its rapid spread has shocked the entire world. The deadly virus novel coronavirus (COVID-19) has infected more than 80,000 people across the globe and killed more than 3,000. With the rising number of confirmed and suspected cases, India, too, is gearing up to combat this threat.

The new virus comes from a family of viruses whose infection can cause illness, cold, and more severe disease. In the past, we've witnessed severe outbreaks of COVID-19 infections. The world had seen Severe Acute Respiratory Syndrome (SARS) caused by Coronavirus and another was Middle East Respiratory Syndrome (MERS). These coronaviruses are found in a variety of animal species. The world is still not sure where this new coronavirus came from.

There is a need for a unified response to arrest the cascading impact of COVID-19. The private sector is working with the government to ward off diseases caused by COVID-19.

Says Dr. N. Sudarshan Ballal, president, NAPHEALTH. “The healthcare industry will be happy to collaborate with the government to augment the diagnostics as was done in 2009 when H1N1 started spreading incessantly. There is no need to panic. The disease is surely more infectious compared to regular flu. However, it seems less fatal than some of the other epidemics that we have faced as a nation.”

A FEW BASIC PRECAUTIONS

While COVID-19 is now spreading from person to person, these viruses have been, initially, known to circulate among animals. Hence, avoid contact with live wild animals and birds. “COVID-19 is a common cause of cold and upper respiratory infections. It can affect certain animals, straight from one animal to another animal. It is restricted to humans partially if certain mutation occurs in the virus,” explains Dr. Sushant Chhabra, HOD, Emergency Medicine, Manipal Hospitals.

Following the detection of positive cases of COVID-19 in Delhi-NCR and other parts of India, Prime Minister Narendra Modi and Union Home Minister Amit Shah tweeted saying they would not play ‘Ro’i’ to avoid mass gatherings that can spread the virus. “Avoid crowded spaces and contact with people who are infected with flu or fever. Personal hygiene such as washing hands thoroughly and frequently can protect a person,” recommends Dr. Sandeep Nayar, Chest and Respiratory Diseases, BLK Super Specialty Hospital.

ROLE OF THE STATE

On their part, both the Union and state governments are undertaking measures to prevent the virus from spreading. The Centre has initiated some measures and build-up necessary reserves based on planned contingencies for critical medical supplies and reduce the cascading effect on human lives. These measures include thermal screening at airports, issuing travel-related guidelines, and reducing travel-related cases reported within India, and more. Measures such as community surveillance through Integrated Disease Surveillance Programme, early diagnosis, creating buffer stock and risk communication, have been proving effective in containing the virus. People are made aware of preventive public health measures to follow.

In a nutshell, experts say it is high time to be agile. We must prevent the spread through the government and citizen-led public health measures while putting in place a unified preparedness strategy to treat COVID-19 across India.

— Mail Today Bureau

BETTER STAY SAFE FROM CORONAVIRUS

Dr. Sandeep Nayar, director & HOD, Centre for Chest & Respiratory Diseases, BLK Super Specialty Hospital gives preventive measures.

- Immunocompromised individuals such as diabetics, heart and kidney patients, elderly and pregnant women need to be cautious.
- If you come in contact with anyone from affected geographies who have the symptoms, visit designated centres to get specimens collected from upper respiratory tract, lower respiratory tract and blood for a serology test.
- For those suffering, isolation is recommended.
- Wash hands thoroughly with soap or water for 20 seconds. You can use an alcohol-based hand rub.
- Avoid touching your face without washing hands.
- Maintain a distance of at least one metre from those coughing or sneezing.
- For cough, fever or breathing difficulty, consult a doctor. Antibiotics may not work. Take paracetamol if pain or fever persists.
- Have plenty of oral fluids.
- Travelling out of the country is not advisable.
Business Standard

LABS APLENTY, QUALITY QUESTIONABLE

Patients expensive for out-patient workarounds, lab and diagnostic tests

Expenditure grows into hospitalisation, lab and diagnostic tests

NUMBER OF LABS WITH NABL ACCREDITATION

1,039

873

1,00,000-110,000

TOTAL NUMBER OF LABORATORIES

3,500-4,000

TYPES OF TESTS PROVIDED BY TOP DIAGNOSTIC CENTRES IN INDIA

10%

41%

HOW DIAGNOSTIC LABS ARE FAILING PATIENTS IN INDIA

SUNI SUKANYA DUTTA | New Delhi

Between 2012 and 2019, there was a nearly 200 per cent jump in the number of diagnostic laboratories that have accreditation, a gold standard which offers assurance to patients of quality services and reliable reports.

While the figure gives hope, especially as it concerns a sector which has little to do with rules and regulation, the state of affairs on the ground remains grim. Of the nearly 1.1 lakh medical laboratories in the country, whose reports are valued for over 70 per cent of medical decisions, just about 1,039 are accredited.

The issue over diagnostic labs of questionable quality, which have mushroomed in every nook and cranny of our urban landscape, is so grave that even NATHEALTH-Healthcare Federation of India, an industry body, highlighted it recently through a report titled, "An Assessment of India's Laboratory Diagnostic Industry".

"Undesigned standards lead to varying levels of quality and compliance. Defining the minimum norm will help patients avail quality diagnostic services," noted the report released some weeks ago.

"It's a fact that the government is not aware of a complete lack of standards, a qualification standard for people employed at these labs and a necessary provision for a full record of these services centres where clinical biochemistry and clinical pathology; haematology; microbiology; and infectious disease criminology; histopathology; cytology and several imaging services are offered. In 2010, the Union government, through its Clinical Establishment (Regulation and Registration) Act, had sought to regulate the pathology and imaging laboratories and there was also a provision for asking these centres to get accredited with recognised bodies such as the National Accreditation Board for Testing and Calibration Laboratories."

However, 10 years on none of the states, including Uttar Pradesh, which implemented the Act, have made it mandatory for laboratories to get accreditation. On a visit to UP this correspondent met patients narrating horrific accounts of misdiagnosis by laboratories.

"The medical laboratory industry in the country is a jungle without any rules where every Tom, Dick and Harry can open a shop and play with the trust and lives of vulnerable patients," said Dr Nishad Dung, who runs a leading laboratory chain in the national capital region.

"Things won't change unless accreditation is made mandatory rather than voluntary," he added. His concerns are not unfounded as they are reflected in testimonies by helpless patients who bore the brunt of wrong reports by the laboratories. Soni Kumari, a 66-year-old woman in Ghazipur's Chhapiyana is one of them.

Three years ago, Soni, while working as a nanny in a day care centre, developed lump in her right breast. On the advice of a local physician, Dr Shrestha Mal, who suspected cancer, she got a blood test and a mammogram done at a diagnostic centre in the city. The test showed malignancy. The physician, who works as a consultant at a Delhi hospital, advised her to start a chemotherapy course at the earliest.

SUNDAY SPECIAL

A diagnostic laboratory in Ghazipur

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NO RAY OF HOPE FOR PATIENTS FROM DIAGNOSTIC LABORATORIES

CONTINUED FROM PAGE 1

“HOWEVER, after two rounds of chemotherapy, which made me feel sick in indescribable ways for nearly a month and cost me huge amount of money, another mammogram was performed. As it turned out, I had no cancer at all,” said Soni, who now works as a domestic help at a housing society in Ghaziabad.

Soni, whose family income is barely ₹16,000 per month, could not do much other than confronting the technician at the first laboratory. But that was that. “I had no means or energy to fight them,” she said.

Dr Dang recalls how four laboratories, where the blood samples of a 22-year-old girl, running persistent fever for nearly two months, were collected had failed to detect Leukaemia.

“It was beyond bizarre, as a simple complete blood count test ought to indicate something that is so clearly wrong. However, in her case, none of the labs could detect the obvious abnormality in her samples,” he said, hinting that it was possible that her samples were probably never examined at all.

Those in the healthcare industry are aware what a sink testing is. It is a form of medical laboratory diagnostics healthcare fraud where clinical specimens are discarded, via a sink drain, and fabricated results are reported, without the clinical specimen actually having been tested.

It’s a phenomenon long known but rarely ever addressed. Dr V K Paul, member (health) Niti Aayog and the chairperson of the Medical Council of India’s Board of Governors, admitted that lack of specified standards in infrastructure, qualification and transparency in case of laboratories is has been a “huge concern” for the government.

However, if the government is worried, it does not really reflect in its actions.

Only recently, nearly three years after the Supreme Court passed an order that all laboratories and diagnostic reports can only be signed by qualified pathologists, the Union health ministry, on the advice of MCI-BOG, passed an order to allow even non-doctors, with relevant degrees, to issue reports but without offering any medical opinion or interpretation.

This, said officials, was being done as the number of quality pathologists and radiologists in the country was only a small fraction of the total labs in operation.

Those pitching for reform in the sector, however, are agitated.

“It will further encourage and promote fraud in a sector where unqualified professionals, proxy signatories, sub-standard equipment and reagents are the norm,” said a senior executive in one of the most well known corporate laboratory chains in India, requesting anonymity.

In UP, where Soni and millions like her are suffering due to poor quality of diagnostic services, the state concedes it’s a long way before it can divert its focus to the issue.

“We are aware that it is important to ensure the highest standard at every step. It is important to eliminate any human or machine-made error as it’s a question of someone’s health and wellbeing,” state health minister Jai Pratap Singh said.

“However, the fact is that over 90 per cent of diagnostic services is in the private sector and at the moment, we are not in a position to govern them properly,” he added.
The first Union Budget of the third decade of 21st century was presented by the Finance Minister (FM) Nirmala Sitharaman on 1st February 2020. In order to achieve the holistic vision of healthcare that translates wellness of the citizen, about Rs 69,000 crore have been provided for healthcare in Union Budget 2020-21. It includes Rs 6400 crores for Prime Minister Jan Arogya Yojana (PMJAY).

“Presently, under PMJAY there are more than 20,000 empanelled hospitals. We need more in Tier-2 and Tier-3 cities for poorer people under this scheme. It is proposed to set up viability gap funding (VGF) window for setting up hospitals in the public-private partnership (PPP) mode. In the first phase, those aspirational districts will be covered, where presently there are no Ayushman empanelled hospitals. This would also provide large scale employment opportunities to youth. Proceeds from taxes on medical devices would be used to support this vital health infrastructure. Health authorities and the medical fraternity can target disease with an appropriately designed preventive regime using machine learning (ML) and Artificial Intelligence (AI), in the Ayushman Bharat scheme. Also, TB Harega Desh Jeetega campaign has been launched. I propose to strengthen these efforts towards our commitment to end Tuberculosis (TB) by 2025”, states Nirmala Sitharaman, Finance Minister.

She also announced to expand ‘Jan Aushadi Kendra’ scheme to all districts offering 2000 medicines and 300 surgicals by 2024. The budget also includes other key announcements focusing on startups, quantum technology, medical education and leveraging data.

Terming the Union Budget 2020 as a one based on vision and action oriented, Prime Minister Narendra Modi says, “The Ayushman Bharat programme has expanded the health sector in the country. This has expanded the scope for more human resources, whether of doctors, nurses or attendants, along with the need for manufacturing of medical devices in the country. And the government has taken several decisions in this direction. We have taken several policy initiatives with regard to smart cities, electronic manufacturing, data centre parks, biotechnology and quantum technology. With this India would become an integral part of the global value chain.”
Hailing the budget as a landmark, **Union Minister for Health & Family Welfare Dr Harsh Vardhan** says, “The budget estimates for the Department for Health and Family Welfare show an appreciable increase of 3.75 per cent, while there has been a 10 per cent hike in the allocation for the Department for Health Research. This indicates the strong focus of the government on the health sector. The focus in Budget 2020 is on medical infrastructure, human resources in the health sector, and holistic health & wellness. Also, ‘TB HaregaDeshJeetega’ campaign has received a boost in the Budget. This shall strengthen our resolve and commitment to end tuberculosis by 2025.”

The industry is lauding the constructive steps being taken by the government for enhancing the healthcare ecosystem in India. “The allocation of Rs 69,000 Crore for healthcare and opening of hospitals in tier 2 and tier 3 cities are certainly positive steps in ensuring better healthcare”, mentions **Dr Prasanna Deshpande, Deputy Managing Director, Indian Immunologicals Limited**.

On a similar note, **Alagu Subramaniam, MD, West India** says, “Last mile connectivity for healthcare services through AB-PMJAY scheme is a step in the right direction and will ensure that tier II and III cities now have access to proper hospitals. To achieve economic success, it is imperative that population is healthy. Access to health for all sections of the society as a key part of Aspirational India, one of the three prominent themes around which the budget was woven, will go a long way in achieving that. The proposed expansion of ‘Jan Aushadhi Kendra’ schemes to all districts will allow citizens access to drugs at affordable prices and help in propagating wellness across the country.”

**Dr H Sudarshan Ballal, President, NATHEALTH** further adds, “Union Budget 2020-21 has accorded priority on capacity building by improving health infrastructure in Tier II & III cities and rural areas. It is promising to note that the government paid serious attention to NATHEALTH’s recommendations on capacity building in these areas. Setting up hospitals on PPP mode with the provision of VGF in 112 aspirational districts in the country go a long way in creating a robust health infrastructure especially in that areas where Ayushman Bharat benefits have not reached yet especially to the weaker section. We hope to see more investments into primary care and digital health to achieve the goal of Health for All.”

Sounding equally convinced about the budget announcements, **Dr GSK Velu, Chairman & MD, Trivitron Healthcare** says, “The government is focused on creating the healthcare infrastructure and

**Key highlights of Union Budget 2020-21**

- Providing Rs 69000 crore for healthcare
- Including Rs 6400 crore for Prime Minister Jan Arogya Yojana (PMJAY)
- Providing Rs 3000 crore for skill development
- Launching TB Harega Desh Jeetega campaign
- Expanding Jan Aushadhi Kendra Scheme
- Supporting development of early stage startups
- Establishing technology clusters
- Facilitating seamless application and capture of IPRs
- Building data centre parks
- Outlaying Rs 8000 crore for Quantum Technologies
- Providing viability gap funding
- Designing special bridge courses
- Building National Forensic Science University
- Reforming medical devices import

**Leveraging Data**

Government will soon bring out a policy to enable private sector in building Data Centre Parks throughout the country, thus enabling firms to incorporate data in every step of their value chains. The government has also put emphasis on targeting diseases with an appropriately designed preventive regime using technologies such as ML and AI.

“The announcement to boost Artificial Intelligence is a great step to strengthen the usage of technology in the field of healthcare while intensifying the quality with accessibility and affordability.”

**-Haruto Iwata,**
Managing Director, Fujifilm India

“Setting up of strong digital infrastructure in the country could directly enable several technological innovations in healthcare like data analytics, AI and ML for better prevention and treatment of diseases.”

**-Joy Chakroborty,**
COO, P.D Hinduja Hospital and Medical Research Centre
Coronavirus: Crucial India be extra vigilant, public health experts say

3 min read . Updated: 29 Feb 2020, 03:09 PM IST

Neetu Chandra Sharma

- India yet to develop robust primary care, quality emergency response infrastructure
- The virus has infected over 85,000 people globally, with death toll at 2,924 as of Saturday

NEW DELHI: It has become crucial that India be extra-vigilant about the spread of COVID-19, commonly referred to as the novel coronavirus, after the World Health Organization (WHO) on Friday raised the global risk assessment of the outbreak to "very high."
Industry experts have called for deliberations for India to be prepared and have measures in place to mitigate any economic impact in case of an untoward situation, given the country's compromised health infrastructure and high dependence on China, the epicentre of the outbreak, for medical equipment and crucial raw materials meant for key sectors.

"The very high risk assessment by WHO for spread and impact of coronavirus at global level highlights that healthcare as a sector can have cascading effect on economies of nations and there is a need to reduce disparities of healthcare delivery standards not only within countries but also across countries," said Siddhartha Bhattacharya, secretary general, NATHEALTH, healthcare federation of India.

India is still struggling with an evolving public health system. Experts hold that with a modest 1.3% of GDP spent on health, India is yet to develop robust primary care, quality emergency response infrastructure, and a surveillance system that can easily detect infections. There is also a lack of strong case record management and care continuum integration backed by universal financing.

"Any shock to the health system triggered by a virus has the potential to fill up hospital beds, overwhelm the crowded public health infrastructure, drain healthcare medical workforce capacity and increase out of the pocket expenditure," said Bhattacharya.

"Many countries strategically stockpile life-saving drugs and medical countermeasures in preparation for an outbreak such as the Biomedical Advanced Research and Development Authority’s Project Bioshield in the United States. India may consider in future countermeasure options which make nations epidemic resilient."
India has a vast majority of health care delivered often by unlicensed, unregulated healthcare providers. “A strong community reliance on druggist and chemists will need to be factored in the first line of defence in local communities,” Bhattacharya added.

The government has stepped up screening at all major points of entry into the country to keep the virus at bay. It has initiated a number of critical measures to build up necessary reserves based on planned contingencies for critical medical supplies and reduce cascading effect on contracts by invoking the force majeure clause.

Bhattacharya argued that a resilient and robust healthcare system backed by strategic reserve of critical medical supplies with adequate financial protection of its citizens will boost India’s prospects of becoming a $5 trillion economy. The parallel handling of the COVID-19 crisis will only add to do that.

WHO has said the continued increase in the number of cases and the number of affected countries over the last few days are a cause of concern.

According to the apex health agency, there are now 4,351 cases in 49 countries other than China and 67 deaths. South Korea has become the new battleground, having reported a surge in cases - the most outside China.

Since Thursday, Denmark, Estonia, Lithuania, Netherlands and Nigeria have all reported their first cases. The virus has infected over 85,000 people globally, with death toll at 2,924 as of Saturday.
"COVID-19 is quickly turning into a pandemic situation. With its spread to Europe and Middle East, India’s exposure also increases due to the large presence of floating diaspora population and trade links. We will need to strengthen screening at is ports of entry as a first line of control," said Himanshu Sikka, chief strategy & diversification officer and lead – Health, Nutrition & Wash, IPE Global, a health consultancy.

"Internally, as a second line of control, India needs to quickly look at its lab capabilities to ensure effective and quick diagnosis if the virus spreads in-country. At least one hospital per city should be made ready with quarantine facility," he said.
Early recognition and immediate isolation can help us to combat Coronavirus: Dr N K Jairam

A new variant of the coronavirus- the novel coronavirus (nCoV) has infected over hundreds of people and continues to infect hundreds more and has also resulted in many deaths.

By Dr Nanda Kumar Jairam
Chairman, CEO and GMD at Columbia Asia hospitals, NATHEALTH Industry Leader

A recent viral epidemic resulting in a cluster of pneumonia cases in Wuhan city in Hubei province of China and its rapid spread shocked the whole world. It has raised serious concerns not only among Chinese medical authorities but health authorities and caregivers globally, including the World Health Organisation.

A new variant of the coronavirus- the novel coronavirus (nCoV) has infected over hundreds of people and continues to infect hundreds more and has also resulted in many deaths. It was initially believed that the nCoV is transmitted between animals only but now health authorities have confirmed that humans can also transmit the virus to one another. The nCoV is a species of virus that affects the respiratory tract, which can range from a minor cold to severe illnesses.

The ongoing infection is caused by a variant of the virus called novel CoV. Once the Chinese authorities confirmed that they had identified a new virus, it rang an alarm bell for the world. The new virus is a coronavirus, which is a family of viruses that include the common cold, and viruses such as Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS). This new virus was temporarily named “2019-nCoV and the disease caused is COVID Corona virus Disease.
India has also geared up to combat the threat. First of all, Indians in Wuhan were promptly evacuated and post evacuation from Wuhan, they were quarantined for 14 days. As a preventive measure, the government also issued the guidelines for those in-charge of the camps, health professionals, travellers and their family members.

It is time to adhere to the WHO guidelines which emphasize early recognition and immediate isolation of the suspect. Standard precautions for people include hand and respiratory hygiene such as frequent washing of hands, wearing the mask, covering mouth and nose while coughing and sneezing.

It is proven that Coronavirus can be transmitted from person to person. Apart from coughing and sneezing the infection can spread even when someone touches a contaminated surface like a door handle. The virus mainly infects the upper respiratory and gastrointestinal tract of mammals and birds. Hence, it is important to avoid unprotected contact with live wild animals and birds.

Symptoms usually include Runny nose, Headache, Cough, Sore throat, High fever, Difficulty breathing, Pneumonia and Bronchitis

**Treatment**
As of now, there is no cure for this infection with a vaccine. Medical researchers continue to study the effects of previous coronavirus outbreaks and are working on a vaccine which has not been developed yet. So, prevention is the key. We need to provide supportive and symptomatic treatment to the patients. As preventive measures, we recommend avoiding crowded spaces and contact with people who are infected with flu or fever. Personal hygiene such as washing hands thoroughly and frequently can protect a person.

Those who are poorly immunocompromised like, cancer patients, diabetics, elderly and sick persons are most vulnerable.
To prevent infection one should also cover his/her mouth when coughing or sneezing. Safe food practices can also prevent us from the infection. We need to avoid the consumption of raw or undercooked animal products. Under good food safety practices, it is recommended that one should handle milk, raw meat or animal organs with care to avoid cross-contamination with uncooked foods.

As on date there are 3 confirmed cases reported in India, with no deaths. The governments, health authorities and caregivers need to be on high alert. The Indian Health Ministry has begun screening procedures at all international airports especially for passengers coming in from affected areas. It is time to be alert and take all preventive measures. India, being a densely populated country, would have to make extra efforts and all healthcare stakeholders need to come together for combating the greatest threat by a novel virus.
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While the figure gives hope, especially as it concerns a sector which has little to do with rules and regulation, the state of affairs on the ground remains grim.

Of the nearly 1.1 lakh medical laboratories in the country, whose test reports determine over 70 per cent of medical decisions, just about 1,039 are accredited.
The issue over diagnostic labs of questionable quality, which have mushroomed in every nook and cranny of our urban landscape, is so grave that even NATHEALTH-Healthcare Federation of India, an industry body, highlighted it recently through a report titled, ‘An Assessment of India’s Laboratory Diagnostic Industry’.

“Undefined standards lead to varying levels of quality and clinical standards compliance. Defining the minimum norm will help patients avail quality diagnostic services,” noted the report released some weeks ago.

It’s not that the government is not aware of a complete lack of standards, a qualification required for people employed at these labs and a necessary provision for a regular audit of these centres where clinical biochemistry and clinical pathology; haematology; microbiology and infectious disease serology; histopathology, cytopathology and several imaging services are offered.

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However, 10 years on none of the states, including Uttar Pradesh, which implemented the Act, have made it mandatory for laboratories to get accreditation. On a visit to UP, this correspondent met patients narrating horrific accounts of misdiagnosis by laboratories.
"The medical laboratory industry in the country is a jungle without any rules where every Tom, Dick and Harry can open a shop and play with the trust and lives of vulnerable patients. This is essentially due to a complete lack of enforcement anywhere," said Dr Navin Dang, who runs a leading laboratory chain in the national capital region.

"Things won't change unless accreditation is made mandatory rather than voluntary," he added. His concerns are not unfounded as they are reflected in testimonies by helpless patients who bore the brunt of wrong reports by the laboratories.

Soni Kumari, a 32-year old woman in Ghaziabad’s Chhapraula is one of them. Three years ago, Soni, while working as a nanny in a daycare centre, developed a lump in her right breast.

On the advice of a local physician, Dr Suresh Mittal, who suspected cancer, she got a blood marker test and a mammogram done at a diagnostic centre in the city. The test showed malignancy.

The physician, who is also a consultant at a Delhi hospital, advised her to start a chemotherapy course at the earliest.

**No ray of hope for patients from diagnostic laboratories**

"However, after two rounds of chemotherapy, which made me feel sick in indescribable ways for nearly a month and cost me huge amount of money, another mammogram was performed. As it turned out, I had no cancer at all," said Soni, who now works as a domestic help at a housing society in Ghaziabad.

Soni, whose family income is barely Rs 16,000 per month, could not do much other than confronting the technician at the first laboratory. But that was that.

"I had no means or energy to fight them," she said. Dr Dang recalls how four laboratories, where the blood samples of a 22-year-old girl, running a persistent fever for nearly two months, were collected had failed to detect Leukaemia.

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form of medical laboratory diagnostics healthcare fraud where clinical specimens are discarded, via a sink drain, and fabricated results are reported, without the clinical specimen actually having been tested.

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However, if the government is worried, it does not really reflect in its actions. Only recently, nearly three years after the Supreme Court passed an order that all laboratories and diagnostic reports can only be signed by qualified pathologists, the Union health ministry, on the advice of MCI-BOG, passed an order to allow even non-doctors, with relevant degrees, to issue reports but without offering any medical opinion or interpretation.

This, said officials, was being done as the number of quality pathologists and radiologists in the country was only a small fraction of the total labs in operation. Those pitching for reform in the sector, however, are
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(The author has received support in the form of a grant from Thakur Foundation, USA to report a series related to the Clinical Establishment (Registration and Regulation) Act, 2010.)
03 March 2020  Last Updated at 8:52 Pm | Source: PTI

NATHEALTH calls for unified response to arrest coronavirus impact

New Delhi, Mar 3 (PTI) Apex healthcare industry body NATHEALTH on Tuesday called for a unified response to deal with the cascading impact of coronavirus.

The government has initiated a number of critical measures and built up necessary reserves based on planned contingencies for critical medical supplies to reduce cascading effects of coronavirus impact on human lives, it said in a statement.

"Private sector players will be happy to collaborate with the government to augment the diagnostics/ treatment capacity as was done in 2009 when H1N1 had started spreading incessantly," NATHEALTH President H Sudarshan Ballal said.

Though the disease is more infectious than the regular flu, it seems less fatal than some of the other epidemics the country has faced, he added.

NATHEALTH has also asked the government to include the private sector in contingency planning to potential scenarios at both central and state levels in India.

It also asked the government to consider creating a strategic pool of private sector hospitals, diagnostic labs, protective equipment supply, medicines and frontline workers and to demarcate their roles in different contingency scenarios. PTI AKT HRS
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NATIONAL

4 March 20


Business Standard

NATHEALTH calls for unified response to arrest coronavirus impact

Press Trust of India | New Delhi
Last Updated: March 3, 2020 20:54 IST

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The government has initiated a number of critical measures and built up necessary reserves based on planned contingencies for critical medical supplies to reduce cascading effects of coronavirus impact on human lives, it said in a statement.

"Private sector players will be happy to collaborate with the government to augment the diagnostics/treatment capacity as was done in 2009 when H1N1 had started spreading incessantly," NATHEALTH President H Sudarshan Ballal said.

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Combating Coronavirus

A new variant of the coronavirus- the novel corona virus (nCoV) has infected over hundreds of people and continues to infect hundreds more and has also resulted in many deaths.

ETHealthWorld  |  March 03, 2020, 08:14 IST

By Dr Nanda Kumar Jairam

A recent viral epidemic resulting in a cluster of pneumonia cases in Wuhan city in Hubei province of China and its rapid spread shocked the whole world. It has raised serious concerns not only among Chinese medical authorities but health authorities and caregivers globally, including the World Health Organisation.

A new variant of the coronavirus- the novel corona virus (nCoV) has infected over hundreds of people and continues to infect hundreds more and has also resulted in many deaths. It was initially believed that the nCoV is transmitted between animals only but now health authorities have confirmed that humans can also transmit the virus to one another. The nCoV is a species of virus that affects the respiratory tract, which can range from a minor cold to severe illnesses.

The ongoing infection is caused by a variant of the virus called novel CoV. Once the Chinese authorities confirmed that they had identified a new virus, it rang an alarm bell for the world. The new virus is a coronavirus, which is a family of viruses that include the common cold, and viruses such as Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS). This new virus was temporarily named “2019-nCoV and the disease caused is COVID Corona virus Disease.
India has also geared up to combat the threat. First of all, Indians in Wuhan were promptly evacuated and post evacuation from Wuhan, they were quarantined for 14 days. As a preventive measure, the government also issued the guidelines for those in-charge of the camps, health professionals, travellers and their family members.

It is time to adhere to the WHO guidelines which emphasize early recognition and immediate isolation of the suspect. Standard precautions for people include hand and respiratory hygiene such as frequent washing of hands, wearing the mask, covering mouth and nose while coughing and sneezing.

It is proven that Coronavirus can be transmitted from person to person. Apart from coughing and sneezing the infection can spread even when someone touches a contaminated surface like a door handle. The virus mainly infects the upper respiratory and gastrointestinal tract of mammals and birds. Hence, it is important to avoid unprotected contact with live wild animals and birds.

Symptoms usually include Runny nose, Headache, Cough, Sore throat, High fever, Difficulty breathing, Pneumonia and Bronchitis

Treatment
As of now, there is no cure for this infection with a vaccine. Medical researchers continue to study the effects of previous coronavirus outbreaks and are working on a vaccine which has not been developed yet. So, prevention is the key. We need to provide supportive and symptomatic treatment to the patients. As preventive measures, we recommend avoiding crowded spaces and contact with people who are infected with flu or fever. Personal hygiene such as washing hands thoroughly and frequently can protect a person.

Those who are poorly immuno-compromised like, cancer patients, diabetics, elderly and sick persons are most vulnerable.
To prevent infection one should also cover his/her mouth when coughing or sneezing. Safe food practices can also prevent us from the infection. We need to avoid the consumption of raw or undercooked animal products. Under good food safety practices, it is recommended that one should handle milk, raw meat or animal organs with care to avoid cross-contamination with uncooked foods.

As on date there are 3 confirmed cases reported in India, with no deaths. The governments, health authorities and caregivers need to be on high alert. The Indian Health Ministry has begun screening procedures at all international airports especially for passengers coming in from affected areas. It is time to be alert and take all preventive measures. India, being a densely populated country, would have to make extra efforts and all healthcare stakeholders need to come together for combating the greatest threat by a novel virus.

The author is the Chairman, CEO and GMD at Columbia Asia hospitals, NATHEALTH Industry Leader.

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Coronavirus Outbreak Highlights: PM Modi says no need to panic as new cases emerge in country, Navy cancels ‘Milan 2020’ exercise

Coronavirus in India: A private school in Noida has postponed exams and fumigated its premises after the father of a student tested positive for coronavirus, officials said.

Coronavirus Outbreak Highlights: Prime Minister Narendra Modi on Tuesday tweeted that he reviewed the situation of coronavirus and the preparedness of India to deal with the global pandemic, assuring citizens that there was no reason to panic. His tweet came a day after two cases of novel Coronavirus emerged in India. A Delhi-based man, who had recently returned from Italy, tested positive for COVID-19, while a man in Hyderabad was also found to have contracted the disease after he had gone to Dubai where he worked with his colleagues from Hong Kong. Apart from that, an Italian tourist in Jaipur was found to be infected by the virus on Monday.
On Tuesday, Hyatt Regency asked its staff to self-quarantine after a coronavirus-infected man had dined at the hotel restaurant on February 28. It told all staffers who were present in the restaurant on that day to quarantine themselves for 14 days. Apart from this, the hotel will also conduct daily temperature checks for all staffers and contractors upon entering and exiting the hotel, ANI reported the hotel administration as saying.

The Union Government also suspended all regular visas and e-visas, including visa on arrival, issued till March 3 for Italian, Iranian, South Korean and Japanese nationals who have not entered India yet.

Meanwhile, two schools in Noida have been shut for the next few days as one of the students is the child of the Delhi-based man who was tested positive for coronavirus. The exams in one of the schools have also been postponed and the premises have been fumigated.

Financial Express Online brings you latest updates on coronavirus. Stay tuned.

21:09 (IST) 03 MAR 2020
Coronavirus Latest Update: US Federal Reserve cuts interest rates
In response to growing economic risk due to Coronavirus outbreak, the US Federal Reserve on Tuesday implemented an emergency rate cut. In a unanimous decision, the Fed’s policy-setting committee cut its key interest rate by a half point to a range of 1.0-1.25. AFP reported.

21:03 (IST) 03 MAR 2020
Coronavirus Latest Update: NATHEALTH calls for unified response
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