

TUBERCULOSIS CONTROL PROGRAMME RENAMED, TO FOCUS ON ELIMINATION

Relevant for: Developmental Issues | Topic: Health & Sanitation and related issues

On January 1, 2020, India's TB control programme got a change of name. It is no longer known as the Revised National TB Control Programme (RNTCP), and has been rechristened as the National Tuberculosis Elimination Programme (NTEP).

The change in name is in line with the larger goal of eliminating the disease by 2025, five years ahead of the Sustainable Development Goals target. In March 2018, Prime Minister Narendra Modi had announced 2025 as the target year for ending TB.

On December 30, 2019, the Ministry of Health & Family Welfare sent a letter to Chief Secretaries of all States and Union Territories intimating about the change of name. "The Government of India has committed to achieve the Sustainable Development Goal of ending tuberculosis by 2025, five years ahead of the global targets. In view of this ambitious target, a change in name of the programme, representative of the ultimate goal of eliminating TB disease, was thought to be necessary," the letter says.

"Changing the name will help us in providing adequate advocacy required for achieving the goal," Dr. Raghuram Rao, Deputy Director (TB), Ministry of Health & Family Welfare told *The Hindu*. "TB is not just a disease but a socio-economic problem. So this requires every section of the society to be playing its part in fighting to end the disease."

The change in name is expected to give "huge thrust to the people working for elimination of tuberculosis from the top to bottom and the general population".

It might be recalled that both in the case of leprosy and polio, the national programme underwent a name change to align with the larger goal. In the case of leprosy, the name was changed from National Leprosy Control Program to National Leprosy Eradication Program in 1983. Similarly, for polio, the name of the programme was changed from National Program for Control of Poliomyelitis to Polio Eradication Program in India.

The goal to end TB by 2025 got a much needed boost with the World Health Organization stating that the indigenously developed molecular test (TrueNat MTB) for diagnosing pulmonary and extrapulmonary TB and rifampicin-resistant TB has high diagnostic accuracy. Being battery-operated, the diagnostic tool will be used in peripheral TB centres in India. This will help reduce the delay in diagnosis and enable early initiation of treatment to break the transmission cycle and achieve better cure rates.

As a first step, TrueNat MTB will be available at community health centres and would slowly be extended to primary health centres across the country. There are 5,500-6,000 community health centres and about 25,000 PHCs. While States will be procuring the diagnostic machine directly from the Goa-based manufacturer, the Central government is in the process of procuring 1,500 machines for the high-load TB microscopy centres.

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