

## Government establishes National Task Force on Brain Health

On 20th April 2024, the Union Health Ministry established a 'National Task Force on Brain Health' to enhance the accessibility and quality of brain healthcare across primary, secondary, and tertiary levels. Brain health, recognized as a growing concept, encompasses preventive, promotive, and rehabilitative measures to ensure universal health coverage and achieve SDGs, as outlined in an office memorandum issued recently. Nervous system disorders constitute a significant global health burden, accounting for 9 million deaths annually and being the leading cause of disability-adjusted life years (DALYs).

Studies over the past three decades in India have highlighted a substantial disease burden, particularly in urban areas, with prevalent conditions including stroke, epilepsy, headache, Parkinson's disease, and dementia. Despite advancements in national healthcare accessibility, disparities persist based on socioeconomic status, geography, age, and gender. Recognizing the urgent need for effective strategies in surveillance, prevention, acute care, and rehabilitation, the memorandum emphasized the necessity for easily accessible neurological health services.

The National Task Force on Brain Health, comprising technical experts and relevant ministries will review existing gaps comprehensively and provide recommendations. The task force will also propose actions to strengthen diagnostic, treatment, and care systems, particularly within the Ayushman Aarogya Mandirs. Additionally, it will focus on developing supportive rehabilitation infrastructure and strategies for managing and preventing neurological disorders. The task force is expected to submit its report by 15th July 2024.





## **IRDAI lifts age limits for health insurance, includes pre-existing medical conditions and offers flexibility in premium payments**

The Insurance Regulatory and Development Authority of India (IRDAI) made a significant move by removing the age limit for purchasing health insurance policies, marking a fundamental shift towards inclusivity. As of April 1, 2024, individuals of any age can now acquire new health insurance policies, which expands coverage to a wider demographic and enhances flexibility.

A key aspect of this reform is the inclusion of pre-existing medical conditions, such as cancer, heart and renal failure, and AIDS, ensuring that all individuals receive comprehensive health coverage regardless of their health status. This amendment also encourages insurers to create specialized products catering to specific age groups, from seniors to children, providing a broader range of choices.

Another important feature of the new regulation is the flexibility it offers for premium payments, allowing policyholders to pay in installments, thus reducing the financial strain of healthcare costs. Additionally, the amendment provides unrestricted coverage for AYUSH treatments, embracing Ayurveda, Yoga, Naturopathy, Unani, Siddha, and Homeopathy, without capping coverage amounts.

The IRDAI has also introduced a channel specifically for handling senior citizen complaints and claims, emphasizing a more tailored approach to address their unique needs. This move was welcomed by industry experts, recognizing the benefits of broader health insurance options and the commitment to creating a more inclusive health insurance environment in India.

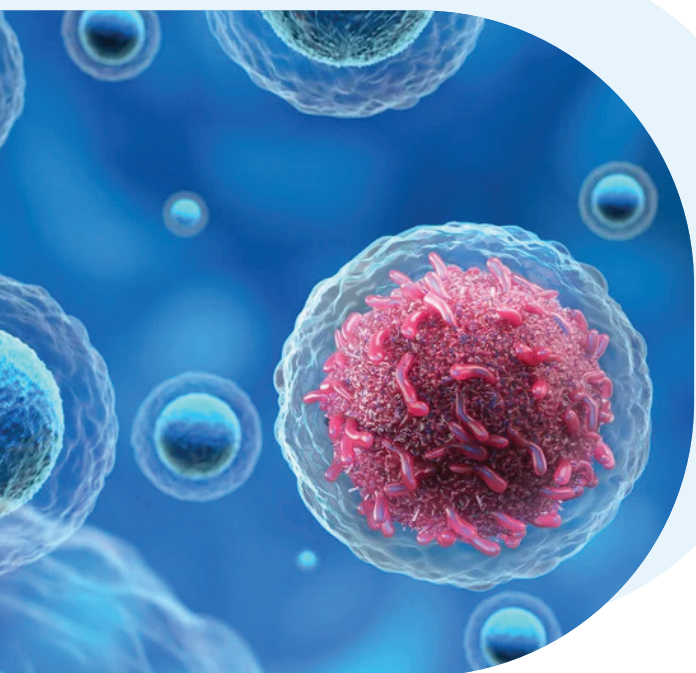




## **Government instructs e-commerce sites to recategorize beverages and remove them from “health drinks” category**

The Food Safety and Standards Authority of India (FSSAI) initiated an inquiry on 14th April 2024 in response to the report alleging Nestle’s inclusion of sugar in its infant food and Cerelac. The regulatory body vowed to take decisive action pending the investigation’s outcome, forming a committee to probe the matter. Nestle, in its defense, reaffirmed the nutritional integrity of its products and stressed adherence to both global standards and local specifications. Concerns arose from a Public Eye and IBFAN report revealing added sugar in Cerelac sold in India, contrasting with the absence of such additives in similar Nestle products in European markets. The discrepancy raised questions about public health implications and ethical considerations, prompting calls for tighter regulation in the infant foods sector. Experts advocated for clearer labeling, marketing restrictions, and product reformulation to reduce sugar content.

Currently, the Indian government intervened on April 14, 2024, instructing e-commerce platforms to reclassify beverages like Bournvita, removing them from the “health drinks” category. This decision followed an investigation by the National Commission for Protection of Child Rights (NCPCR), which found no legal definition for “health drinks” under relevant regulations. Earlier directives from FSSAI had urged e-commerce platforms to ensure accurate product categorization. It was noted that products like Bournvita, classified as “Proprietary Food” and falling under categories such as “Dairy-Based Beverage Mix,” were being misleadingly labeled as “Health Drinks.” The move aimed to enhance transparency and provide consumers with precise information about the products they were purchasing.



## India's cancer cases surpass global growth: Apollo report

Apollo Hospitals released the 4th edition of its flagship annual report, 'Health of the Nation' in India on 4th April 2024. The report highlights the concerning rise of non-communicable diseases (NCDs) like cancer, diabetes, and heart disease. The report finds these diseases are becoming increasingly common, with India having a particularly high rate of cancer.

The report also warns of a potential future surge in NCDs due to pre-existing conditions like pre-diabetes and mental health disorders affecting younger people. The report recommends regular health screenings to reduce the risk of these diseases. It found that while more screenings are needed overall, people are increasingly choosing more comprehensive health checks.

Apollo Hospitals believes there is a critical need to take action to prevent and reverse the growing NCD crisis. They emphasize the importance of public education, investment in health infrastructure, and promoting preventive healthcare measures.

Dr. Madhu Sasidhar, President of Apollo Hospitals, stressed that innovation in preventive healthcare is essential. Apollo is using technology to create personalized healthcare solutions and improve disease prevention. They also launched a free online tool to help people assess their health risks and make informed lifestyle choices.



## CDCSO releases pharma product distribution guidelines

On 19th April 2024, The country's drug regulatory body, the Central Drugs Standard Control Organisation (CDSCO), issued draft guidelines on good distribution practices to combat the infiltration of 'spurious,' 'adulterated,' and 'sub-standard' pharmaceuticals into the market, according to a report by PTI. Aligned with the WHO Technical Report Series (TRS), these guidelines aimed to regulate the storage and distribution practices of pharmaceutical products at every stage, from manufacturing facilities to the end user.

The draft emphasized the need for safeguarding public health and safety against non-standard products. It outlined measures to be implemented across the supply chain to prevent the entry of sub-standard products into the market. Key suggestions included incorporating self-inspections within a robust quality system and designating responsible individuals at distribution sites.

Furthermore, the document outlined procedures for handling returned products, stressing adherence to international, national, and local regulations. Detailed records of product dispatch were required to ensure traceability and accountability throughout the distribution process, encompassing essential information such as product description, batch numbers, and expiry dates.





## Quality Council of India and Health Ministry partner for better CGHS care

The Quality Council of India (QCI) and the Union Ministry of Health and Family Welfare announced a collaboration to improve the Central Government Health Scheme (CGHS) on 9th April 2024. This five-year partnership aims to transform the CGHS ecosystem and enhance the healthcare experience for beneficiaries.

The collaboration will focus on several key areas to create a more robust, efficient, and transparent CGHS system. Measures include supporting CGHS facilities in obtaining accreditation, improving the quality of healthcare providers, and leveraging technology for better service delivery. Additionally, the focus will be on ensuring quality drugs and storage facilities, modernizing procurement and inventory management systems, and establishing quality monitoring mechanisms.

This initiative also aims to expand the network of qualified healthcare providers and laboratories impanelled under CGHS. Officials from both QCI and the Ministry emphasized their commitment to this project, aiming to make CGHS a role model for healthcare in India. They believe this collaboration will empower beneficiaries with greater trust and confidence in the CGHS system.

## Union Health secretary introduces myCGHS App for iOS users

On 4th April 2024, The Union Health Ministry launched the myCGHS app for iOS devices, aiming to improve access to healthcare information and resources for Central Government Health Scheme (CGHS) beneficiaries. This app complements the existing Android version. Developed by National Informatics Centre teams, myCGHS offers various features to simplify healthcare experiences. Beneficiaries can book appointments, download CGHS cards, access lab reports, check medicine history, and track reimbursement claims. Additionally, the app helps locate nearby health centers, hospitals, and labs and provides news and contact information.

Security features like two-factor authentication and mPIN ensure user data confidentiality. The Health Secretary highlighted the app's significance, stating it empowers beneficiaries with convenient access to healthcare features and aligns with the government's vision of leveraging technology for improved healthcare accessibility. This launch marks a major step towards digital healthcare services for CGHS. The free app is now available on both iOS and Android platforms, encouraging beneficiaries to adopt it for a more seamless healthcare experience.





## **New Transplant Protocol: Unique IDs Required for Donors and Recipients**

The Rajasthan Medical Education Department mandated a unique National Organ and Tissue Transplant Organization (NOTTO) ID for both organ donors and recipients on 24th April 2024. This directive follows guidelines from the Union Health Ministry. Hospitals performing transplants, both government and private, must now generate this unique ID through the NOTTO website. The ID is mandatory for allocating organs from both living and deceased donors and needs to be generated within 48 hours of the transplant surgery.

This move aims to ensure complete transparency in human organ and tissue transplantation across the state. Hospitals will not be able to perform transplants without a valid ID. Dr. Rashmi Gupta, the designated authority for the Transplantation of Human Organs & Tissues Act (THOTA) in Rajasthan, informed medical superintendents and managing directors of authorized hospitals about this new requirement. The appropriate authority issued these guidelines to several institutions.



## Health Ministry cracks down on organ trafficking

The Union Health Ministry, in response to recent organ trafficking revelations, urged all states and Union Territories to investigate potential violations within hospitals conducting illegal organ transplants on 21st April 2024. Dr. Atul Goel, Director General of Health Services, highlighted concerns over an increase in organ transplants involving foreign nationals and emphasized the need for close monitoring. The directive, issued on 10th April, called for the appointment of appropriate authorities to investigate transplant cases involving foreigners as per the Transplantation of Human Organs and Tissues Act (THOTA), 1994. Hospitals were instructed to generate unique NOTTO IDs (National Organ and Tissue Transplant Organisation) for both donors and recipients through the NOTTO website, ensuring transparency in transplant procedures.

Furthermore, the ministry emphasized the importance of regular inspection of registered hospitals to maintain quality and monitor post-operative outcomes. Despite previous requests for data sharing related to organ donation and transplantation, complete information has not been consistently received by NOTTO. States and UTs were given a 15-day deadline to submit action reports on the instructions.

Earlier, authorities busted an organ trafficking racket in Gurugram and Jaipur, involving financial transactions for kidney transplants. A Bangladeshi national was discovered undergoing kidney removal under suspicious financial arrangements, prompting investigations into the illegal activities of private hospitals.



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