

India readies its Ebola action plan

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The union health minister, Dr Harsh Vardhan pointed out that India already has a highly rated integrated disease surveillance network. "We have removed all stops to constantly upgrade equipment and retrain staff and are in the process of further strengthening them," he said.

Dr Vardhan who held a meeting of officials from the health ministry, along with representatives of the ministries of defence, civil aviation, home, shipping, external affairs, some state governments, the Indian army, navy, and national disaster management authority, said all international airports and sea ports will soon be fitted with thermal scanners and other EVD detection equipment for 24x7 deployment. Officials of the WHO and the United States Center for Disease Control and Prevention were also present.

The use of thermal scanners, which has made Nigeria's success possible, is widely prevalent in most of the 15 major airports, often two to each. A further lot of scanners will be purchased and installed over the next few days at the minister's orders.

Dr Harsh Vardhan said, "These scanners, which resemble the radar guns used by police officers to catch speeding motorists, can detect high body temperature among people queued up before immigration counters. Fever is one of the most common symptoms of EVD. Our officials have already used thermal scanners when SARS broke out in Southeast Asia some years back."

He pointed out that a guidance paper produced by the United States Center for Disease Control and Prevention, Atlanta, has outlined all the facets of operating this hardware. "There is a need for constant maintenance, frequent calibration and carrying out of training of people using them," the minister said.

Health authorities of New Delhi's Indira Gandhi International Airport conducted a mock drill recently to test out the alertness of the Ebola detection center there. The minister has instructed similar tests be carried out at all airports in the country within a few days and at regular intervals.

The minister took detailed reports from representatives of all the ministries and discussed ways to strengthen the system. As of now, there has not been a single case of an EVD patient arriving in India.

A few people with high body temperature were quarantined and their blood samples sent to two designated laboratories in the country. Another 10 laboratories are being kept on standby in case of necessity. On being tested negative for EVD they were allowed to continue with their journey in the country albeit after leaving their future addresses with the authorities. They are tracked for the remainder of the incubation period of the virus (21 days).

Dr Vardhan said India had prepared early. "We held our first meeting on Ebola in early June, whereas WHO declared an international emergency in the last week of August. Our officials got to work by updating their skills in managing detecting systems, disseminating information, and preparing for all kinds of situations."

"We used a war-room approach to coordinate the outbreak response. Our strict procedures for screening all arrivals and communicating with the Indians living in the African continent are in tune with international standards," he explained.

The minister has however warned against complacency. "If a single case of Ebola is detected, we must have systems in place to treat such a patient. Therefore it is important to carry out training programs in all district hospitals across the country."