

# INDIAN COUNCIL OF MEDICAL RESEARCH

Department of Health Research – Ministry Health & Family Welfare Government of India

# Media report (29 December 2018 to 4 January 2019) (ICMR IN NEWS)

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Information Interface Officer

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**Experts call for replicating malaria tackling project in Odisha across India** January 3, 2019/ET Healthworld

# ICMR IN NEWS



#### Amid Govt's U-turn, ICMR to form task force on rare diseases December 29, 2018/the Pioneer

Days after the Union Health Ministry dumped its plan to set up Rs 100 crore fund for treatment of rare diseases, its research wing, the Indian Council of Medical **Research** (ICMR) is mulling formation of a task force to promote therapeutic research and expedite new drug development for the sector. However, Ministry's U turn after it had announced fund of Rs 100 crore under the National policy for the rare diseases has upset the patients and their families who cannot afford huge treatment cost. The Ministry recently decided to "reframe" the policy citing bureaucratic hurdles and financial shortage. Compounding the problem is the fact that there are some rare diseases like Gaucher, MPS, Pompe, Duchenne Muscular Dystrophy, Spinal Muscular Atrophy etc., for which treatment is available but is unaffordable due to exorbitant costs. In many cases, the treatment has been seen to drastically improve the quality of life of a patient. The high cost of treatment, thus, increases inequality with respect to access to treatment for rare disease patients. A senior official from the MInistry said that theI CMR's task force studies are national initiatives that are centrally planned, coordinated and implemented on a multi-centric basis.

# Zika warning: India asks US health agency to 'withdraw or modify' travel advisory

December 29, 2018/Scroll.in

India has asked the United States' public health agency, the Centers for Disease Control and Prevention, to "withdraw or modify" an advisory it issued on December 13 warning people against travelling to Rajasthan due to an outbreak of the Zika virus, The Indian Express reported on Saturday. "We have sent a rebuttal to CDC along with all research done on the Zika strain in India, the cases reported, measures taken, etc," said Secretary of Health Research Balram Bhargava. "We have told them to withdraw or modify the alert." Bhargava is also the director general of the **Indian Council of Medical Research**. The CDC had said the virus was endemic to India and pointed out "there is an unusual increase in the number of Zika cases in Rajasthan and surrounding states". It cautioned pregnant women against travelling to such areas. "This is because Zika infection during pregnancy can cause serious birth defects," the advisory said. The health agency classified its alert under Level 2, which requires "enhanced protection". Level 1 advises "usual precautions" and Level 3 advises against "non-essential travel".

#### Not so alarming, revise Zika alert: India to CDC

December 29, 2018/The Indian Express

In a strong rebuttal to US health monitor Centers for Disease Control and Prevention (CDC), the government has asked the body to "withdraw or modify" its Zika alert issued earlier this month against travel to India. In the alert on December 13, the CDC had said: "An outbreak of Zika has been reported in India. Zika is endemic (regularly found) in India. However, there is an unusual increase in the number of Zika cases in Rajasthan and surrounding states. Pregnant women should not travel to areas with risk of Zika." "We have sent a rebuttal to

CDC along with all research done on the Zika strain in India, the cases icma reported, measures taken etc. We have told them to withdraw or modify the alert," Secretary, Health Research, Balram Bhargava told The Indian Express. Sources said the government took strong exception to the use of the word "endemic" especially when Zika outbreaks in the country have been localised and contained within small areas, be it in Gujarat where three cases were reported last year, in Tamil Nadu or the more recent one in Rajasthan. However research by scientists at the Indian Council of Medical Research have shown that the Zika strains in India are less virulent than in Brazil and are not associated with microcephaly. National Institute of Virology in Pune have just finished a full genome sequencing of the zika virus spreading in India and concluded that the gene responsible for causing microcephaly in Brazil is absent in the Indian strain. The NIV research findings are among those that have been cited to CDC in the official communication from the government of India. "We have sent them a full dossier on all the research that we have on Zika in India," said Bhargava who is also the director general of the Indian Council of Medical Research.

### India Downplays Zika Virus Threat, Asks US Health Monitor to Modify Alert December 30, 2018/The Wire

India asked the US Centres for Disease Control and Prevention (CDC) to "withdraw or modify" an alert the latter issued cautioning pregnant women against travelling to India lest they risk a Zika infection. On December 13, the CDC had warned that "an outbreak of Zika has been reported in India" and that the disease is "endemic" in the country. It added, "Pregnant women should not travel to areas with risk of Zika. This is because Zika infection during pregnancy can cause serious birth defects." The CDC had classified the alert as 'Level 2', which requires 'enhanced protection'. Level 1 on its three-tiered list calls for 'usual precautions' and Level 3 advises against 'non-essential' travel. However, the Indian government has taken strong exception to the use of the term "endemic" because, it argued, Zika infections have been contained within small areas. Three cases of Zika infections had been reported in Gujarat last year, and many more in Rajasthan recently. Balram Bhargava, director of the Indian Council for Medical Research (ICMR), told Indian Express, "We have sent a rebuttal to CDC along with all research done on the Zika strain in India, the cases reported, measures taken, etc. We have told them to withdraw or modify the alert."

According to the CDC, Zika is a mosquito-borne virus for which there is no vaccine or medicine. A Zika infection during pregnancy can cause a birth defect in the child called microcephaly, and inflict other changes.

## India asks US health monitor to withdraw or modify Zika outbreak alert December 31, 2018/Business Standard

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## **<u>CSIR, DBT and ICMR enters mutual MoU for phytopharmaceutical products</u>** January 1, 2019/Biospectrum

India is known for its traditional systems of medicine for health care. The resource base to support delivery through such a system has been developed systematically over the years and is continuously being strengthened and positioned to attract the global attention. For the centuries, India has also been at the forefront for the use of medicinal and aromatic plants. The Gazette of India notification of guidelines for phytopharmaceutical drug development offers an opportunity to leverage traditional knowledge for drug development based on modern science and modern medicine principles. In order to leverage the effort, the Council of Scientific & Industrial Research (CSIR), Department of Biotechnology (DBT) and **Indian Council of Medical Research (ICMR)** have entered into Memorandum of Understanding (MoU) for inter-ministerial cooperation. The focus is on boosting innovative research on phytopharmaceuticals.

## About the MoU

The MoU amongst CSIR, DBT and ICMR is for mutual collaboration to develop phytopharmaceutical products for therapeutic use following international standards and norms for establishing safety, quality, standardization and efficacy. The effort would beto take forward the leads already existing with CSIR, DBT and ICMR and develop specific collaborative projects in the domain aiming at rigorous modern scientific testing and development of standard products to maintain global competitiveness.

## 3 agencies to develop drugs based on ancient texts

January 1, 2019/Deccan Herald

Three Indian science research agencies have joined hands to develop drugs on the basis of ancient Indian knowledge with the underlying objective of making such medicines acceptable to doctors. At the moment, the practitioners of modern medicine don't prescribe these drugs because they don't come through the rigorous, scientific drug development process— a reality that may change with the new linkage between CSIR, ICMR and the Department of Biotechnology (DBT). On the table are seven drug candidates— four from the Council of Scientific and Industrial Research (CSIR), two from **Indian Council of Medical Research (ICMR)** and one from a DBT-funded institute in Imphal— which would be evaluated though the standard drug development route of pre-clinical and clinical trials. These molecules have shown promise in laboratory studies on pain management, paediatric epilepsy, rheumatoid arthritis, gastric ulcer, neurodegenerative brain

diseases, diabetes and cognitive dysfunction. The source plants range from cannabis to brahmi and ashwgandha. "The CSIR will come out with the R&D breakthrough and do the pre-clinical studies, while DBT will fund part of the research as well as to prepare the Investigational New Drug dossier that needs to be presented to the Drugs Controller General of India (DCGI). ICMR will fund and conduct the clinical trials," Ram Vishwarka, who heads CSIR's Indian Institute of Integrative Medicine, Jammu, told DH. Four out of the seven leads to be taken up under this programme came from the CSIR's Jammu institute.

## **Environment ministry framed key policies, dealt with controversies in 2018** January 1, 2019/Financial Express

The environment ministry in 2018 finalised a nationwide plan to curb air pollution, notified new rules governing India's coastlines and proposed prohibition of use of animals in circuses besides engaging "constructively" in the crucial climate summit at Poland. It also unveiling a draft national forest policy and pledged to eliminate single use plastic by 2022 but had to grapple with the issue of human-tiger conflicts, an unprecedented deadly viral outbreak among Gir lions and tackling air pollution in north Indian cities especially Delhi. A huge controversy erupted over the way tigress Avni was killed in Maharashtra in November with the final report of the National Tiger Conservation Authority's (NTCA) fact-finding committee raising questions over it. The committee said there was no operational coordination among veterinary professionals and the team which killed the tigress on November 2 in Yavatmal and that the dart for tranquillising the feline was fired unauthorisedly. It also said the veterinary drugs were handled by unauthorised persons during the operation, in which sharp-shooter Asghar Ali Khan had shot the tigress.

The move came amid reports that the carcass of translocated tiger 'Mahavir', who died after falling into a trap laid by poachers, was found in an Odisha sanctuary. The **Indian Council of Medical Research (ICMR)** – National Institute of Virology (NIV) asked the government to shift healthy lions from Gujarat's Gir forest after samples of the wild cats tested positive for a virus, which had wiped out 30 per cent of lion population in East Africa, indicating "active disease transmission".

Till September 12, as many as 23 lions died in the sanctuary, at least 11 of them due to the CDV and Protozoa infections. With north India hit by severe pollution, the ministry finalised a pan India time-bound national level strategy – National Clean Air Programme (NCAP), which proposes multiple strategies to combat pollution in over 100 cities in the country with a total proposed budget of Rs 300 crore for its implementation for financial years 2018-19 and 2019-20.

#### Pact to develop herbal drugs

January 1, 2019/The Telegraph

Three government agencies on Monday signalled their intentions to jointly develop multiple plant-based medicines to treat arthritis, diabetes, epilepsy, gastric ulcers, and neurodegenerative brain disorders, taking forward research leads already establish by their laboratories. The Council of Scientific and Industrial Research (CSIR), the **Indian Council of Medical Research (ICMR)** and the department of biotechnology (DBT) signed a trilateral pact to develop plant-based drugs, or phytopharmaceuticals, through rigorous scientific assessments of safety and efficacy and human clinical studies. The CSIR has identified select promising compounds from Boswellia serrate (shallaki) for rheumatoid arthritis, cannabis for pain and epilepsy, Woodfordia fructicus (dhawai) for gastric ulcers and Withania somnifera (ashwagandha) for neurodegenerative diseases. The ICMR and the DBT have similarly identified compounds from Ficus cunia (khaina) for diabetes and Bacopa monnieri (brahmi) for cognitive dysfunction. "Each of these candidate compounds fits into a class of drugs called phytopharmaceuticals they will be assessed in exactly the same way as modern synthetic pharmaceutical compounds," Ram Vishwakarma, director of the CSIR's Indian Institute of Integrative Medicine, Jammu, told

### ICMR research confirms ideal strategy to beat malaria

January 2, 2019/Drug Today

The study was approved by the Institutional Ethics Committee of ICMR. National Institute of Malaria Research asserted that malaria incidence reduced in Odisha due to intensive intervention activities targeted at improved access to malaria diagnosis and treatment. Prof Balram Bhargava, director general ICMR, who released the study report, said, "Comprehensive case management programme (CCMP) is a sustainable model for improving access to malaria control tools in remote areas. Other states could take a cue from this and intensify efforts towards malaria elimination." He said, "ICMR has been carrying out research that has been relevant to the elimination of various diseases from the country and CCMP is an example of such research." The ICMR project was started in 2013 in pairs of intervention and control blocks in four districts namely Angul, Dhenkanal, Kandhamal and Dolangir with different transmission intensities and catered to a population of 9,00,000 people in Odisha. The project strictly implemented the World Health Organization's Test-Treat-Track initiative that advised malariaendemic nations to scale up diagnostic testing, treatment and surveillance for the disease. Dr. Neena Valecha, Director, National Institute of Malaria Research, told DTMT, "Improving surveillance and taking care of difficult to reach areas played a crucial role in controlling spread of the disease in Odisha." She said, "In Odisha, the five-year collaborative operational research programme with the state NVBDCP had served as a "living laboratory for the project of improved malaria case management."

# MALARIA CASES BROUGHT DOWN IN ODISHA USING THE ERADICATION PROGRAMME: REPORT

January 2, 2019/first Post

Involving ASHAs (Accredited Social Health Activists) in the malaria eradication programme has proved to be fruitful in bringing down the number of malaria cases in Odisha. Malaria control efforts in the state were intensified from 2008 onwards as Odisha is one of the worst-hit states due to malaria. In 2010, malaria services were expanded with the involvement of ASHAs. With scaling up coverage of interventions together with active programme management and better administration, the introduction of ASHAs led to a dramatic reduction in malaria burden in the state. The utilization of malaria services in the intervention areas improved as ASHAs and other service providers had required commodities and skills to diagnose and treat patients at the village level. Odisha had reported 89 deaths due to malaria in 2014. The number has come down to 4, as per October 2018 data. The state registered 85 percent decline in the malaria burden in the intervention blocks. "Various countries have followed this module though with variation in the approach and the outcomes. In India too, we have strengthened malaria case management system through community-based interventions," said

# Prof Balram Bhargava, Director General, Indian Council of Medical Research.



ASHAs were progressively involved in malaria control activities in Odisha. "They are the backbone of the programme. We trained them and then they trained more volunteers," pointed out Dr N Dhingra, Head of Malaria Division in the National Vector Borne Diseases Control Programme (NVBDCP). In addition to training with standardized modules designed by NVBDCP, ASHAs were equipped with rapid diagnostic kits and anti-malaria drugs.

**Experts call for replicating malaria tackling project in Odisha across India** January 2, 2019/PTI

Experts at the Indian Council of Medical Research (ICMR) and National Vector Borne Disease Control Programme (NVBDCP) have called for replicating across the country a model project in Odisha that resulted in 85 per cent decline in average monthly malaria cases in the state over one year. The malaria control approach project, termed 'Comprehensive Case Management Programme (CCMP)', was started in four districts of Odisha leading to 47 per cent decline in malaria cases between 2015 and 2017. A research paper, 'Improved access to early diagnosis and complete treatment of malaria in Odisha, India', on the outcome of the project was published in the PLOS ONE journal on Wednesday. CCMP, initially implemented in four districts of the state — Angul, Dhenkanal, Kandhamal and Dolangir — led to a sharp decline in malaria cases over five years through a control approach that involved mass screening and comprehensive case management. The project was a collaboration between the Indian Council of Medical Research-National Institute of Malaria Research (ICMR-NIMR), and the National Vector Borne Disease Control Programme (NVBDCP), Odisha. It was funded by the Medicines for Malaria Venture, Geneva.

### ICMR to launch programme for speeding up efforts to eradicate malaria from India by 2030

January 2, 2018/Business Standard

The Indian Council of Medical Research (ICMR), along with a number of national and international stakeholders, will launch a programme to accelerate efforts for eradicating malaria from India by 2030. The Malaria Elimination Research Alliance India (MERA India) programme will bring various stakeholders on a platform developing common for research strategies in speeding up malaria elimination efforts, said Dr Rajni Kant, Head of Department (HOD), Research Management, Policy, Planning and Coordination at ICMR.

He said special focus would be on finding better drugs, diagnostics and better vector control tools for curbing the disease. It will help in capitalising on the strengths of these partners and will reinforce trans-institutional research that will have an impact on policies, Dr Anup Anvikar, a scientist at ICMR-National Institute of Malaria Research, said. "The idea is also to avoid duplication of research and use the findings in developing policies that will have a tangible impact," he said, adding it would also try to address various gaps in the existing strategies to eradicate malaria from the country.



### Activists help reduce malaria cases in Odisha

January 2, 2019/Down to Earth

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#### Odisha's Malaria Eradication Initiative Can Be Emulated Nationwide: Experts January 2, 2019/Odisha Bytes

New Delhi: A comprehensive malaria eradication programme in Odisha which registered an 85 per cent decline in average monthly malaria cases, could soon be replicated across the country. Experts at the Indian Council of Medical Research (ICMR) and National Vector Borne Disease Control Programme (NVBDCP) have called for emulating the Odisha success across the country which has seen a rapid decline in malaria related cases. In 2018, the cases came down to 3.4 lakh, while it was 8.4 lakh and 11 lakh in 2017 and 2016 respectively. The malaria control approach project, termed 'Comprehensive Case Management Programme (CCMP)', was started in four districts of Odisha leading to 47 per cent decline in malaria cases between 2015 and 2017. CCMP, was initially implemented in four districts of the state — Angul, Dhenkanal, Kandhamal and Dolangir — led to a sharp decline in malaria cases over five years through a control approach that involved mass screening and comprehensive case management. The project was a collaboration between the Indian Council of Medical Research-National Institute of Malaria Research (ICMR-NIMR), and the National Vector Borne Disease Control Programme (NVBDCP), Odisha. It was funded by the Medicines for Malaria Venture, Geneva.



# India accounted for 6% of global malaria burden in 2016; highest number of cases reported in Odisha

Universal access to malaria diagnosis and treatment and follow-up of patients with enhanced surveillance can dramatically reduce the number of malaria cases. **'Live project'** 

This is according to a 'live project' — 'Comprehensive Case Management Programme (CCMP)' — carried jointly by the **Indian Council of Medical Research (ICMR)**-National Institute of Malaria Research, New Delhi; National Vector Borne Disease Control Programme (NVBDCP) and Medicines for Malaria Venture, Geneva, in four districts of Odisha. A research paper of this project, 'Improved Access to Early Diagnosis and Complete Treatment of Malaria in Odisha, India', has been published and was released here on Wednesday at ICMR.

"Already there has been significant progress in bringing down the caseload. The ICMR has been carrying out a research that has been relevant to elimination of various diseases from the country and CCMP is an example of such research. CCMP is a sustainable model for improving access to malaria control tools in hard-to-reach areas, and other states could take a cue from this, and intensify efforts towards malaria elimination," said Balram Bhargava, Secretary, Department of Health Research and Director General, ICMR.

# Odisha model can eliminate malaria, says Indian Council of Medical Research January 3, 2018/Hindustan Times

Improved access to early diagnosis and complete treatment of malaria in Odisha has resulted in a decline as high as 85% in the disease burden, according to an **Indian Council of Medical Research (ICMR)** paper published in PLOS (Public Library of Science) Wednesday. Of the total case reduction, experts at ICMR attribute 47% reduction to the comprehensive case management programme that was put in place in Odisha in 2013. "The recent numbers show there's been a decline of nearly 85%, and largely due to the intensified intervention programmes that were conducted in the state. If scaled up in other states, the strategies used can help reach the target of malaria elimination by 2030," says Dr Neena Valecha, director, National Institute of Malaria Research (NIMR). Initially, the programme was launched in four districts in Odisha but was extended to other districts. The project that was meant for 2013-16 was extended till 2017 because of the improved results. India reported nearly three million fewer cases of the disease in 2017, and is no longer among world's top three nations, according to World Malaria Report 2018.

# ICMR, NVBDCP call for replicating CCMP Model in Odisha to tackle Malaria January 3, 2019/Medical Dialogues

New Delhi: Experts at the **Indian Council of Medical Research (ICMR)** and National Vector Borne Disease Control Programme (NVBDCP) have called for replicating across the country a model project in Odisha that resulted in 85 per cent decline in average monthly malaria cases in the state over one year. The malaria control approach project, termed 'Comprehensive Case Management Programme (CCMP)', was started in four districts of Odisha leading to a 47 per cent decline in malaria cases between 2015 and 2017. A research paper, 'Improved access to early diagnosis and complete treatment of malaria in Odisha, India', on the outcome of the project was published in the PLOS ONE journal on Wednesday.

CCMP, initially implemented in four districts of the state — Angul, Dhenkanal, Kandhamal and Dolangir — led to a sharp decline in malaria cases over five years through a control approach that involved mass screening and comprehensive case management. The project was a collaboration between the Indian Council of Medical Research-National Institute of Malaria Research (ICMR-NIMR), and the National Vector Borne Disease Control Programme (NVBDCP), Odisha. It was funded by the Medicines for Malaria Venture, Geneva.

Dr Balram Bhargava, Secretary, Department of Health Research and Director General, ICMR said that 'the work of Sir Ronald Ross on malaria transmission was carried out in India. He stated that India is committed to malaria elimination by year 2030. Already there has been significant progress in bringing down the caseload. ICMR has been carrying out research that has been relevant to the elimination of various diseases from the country and CCMP is an example of such research. CCMP is a sustainable model for improving access to malaria control tools in hard-toreach areas, and other states could take a cue from this, and intensify efforts towards malaria elimination'.

# Experts call for replicating malaria tackling project in Odisha across India

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# **Replicate Odisha's Malaria Tackling Project Across India: Experts**

January 3, 2019/The Wire

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With regards,

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