Fighting The White Plague

India with its population of 550 million has 2 million infectious cases of TB. Moreover, at least 190 million persons have been infected at some time ; of these, 2 million active cases are spreading TB to others every minute of the day. Fifty per cent of those persons with untreated infectious cases of TB will be dead in 5 years. Under ideal conditions 90 per cent of these people could have been cured with modern drugs in treatment that takes about a year. Using inexpensive modern methods, the National Tuberculosis Institute in Bangalore and Chemotherapy Centre in Madras have shown that TB can be controlled. In accordance with the Government of India, WHO has played an active role from the very outset of these programmes in 1959.

The basic problem is to reach the large number of men, women and children who live scattered through the towns and villages of India. At the moment, there are at least about 2 million sick persons actively spreading TB in the 3,000 towns and urban areas and 600,000 villages of India.

Conventional methods of treating TB patients could never treat more than a small proportion of those who need care because they involved diagnosis by highly specialized tuberculosis physicians using sophisticated tools such as large X-ray pictures. Treatment was confined to hospitals and sanatoria and took a long period of time. This form of treatment could only cover a small proportion of the population, mostly in the cities and towns, perhaps not more than 10 per cent of India's population.

The National Tuberculosis Institute in Bangalore and the Chemotherapy Centre in Madras, in collaboration with WHO and UNICEF, pioneered simple methods which offer the possibility of diagnosis and treatment for the entire population. Though a communicable disease, tuberculosis is not as highly infectious as smallpox, cholera or measles. Simple sputum tests can detect it ; modern drugs can treat it successfully. BCG vaccination can prevent it.

Ignorance of the disease is less than was supposed. Only 5 per cent of infectious TB patients are unaware of any symptoms. Careful studies show that the majority are aware of their illness and that 50 per cent of those suffering from TB will receive treatment at one time or another.

Quick detection

The queue of people waiting for treatment at health centres is too long and the doctor too busy to allow for complicated diagnosis. However, if a patient admits having a cough for more than three weeks, the physician should order a sputum test on the spot. This quick test will turn up most of the contagious population who can then be treated.

TB can be treated at home if the patient takes his drugs regularly. An unexpected shortage of drugs to treat TB in 1969 was overcome by an emergency supply provided by WHO and UNICEF. However, steps have been taken subsequently to ensure a regular and adequate supply.

Since patients are more likely to continue treatment until cured if they have local health centres available to them, the National Tuberculosis Institute has pressed for complete coverage. In fact, in the absence of doctors or even public health nurses, treatment organizers trained at the National Tuberculosis Institute can do valuable work. To staff district programmes, the National Tuberculosis Institute has already trained 324 district officers, 403 treatment organizers, 360 laboratory technicians, 380 X-ray technicians, 298 statistical

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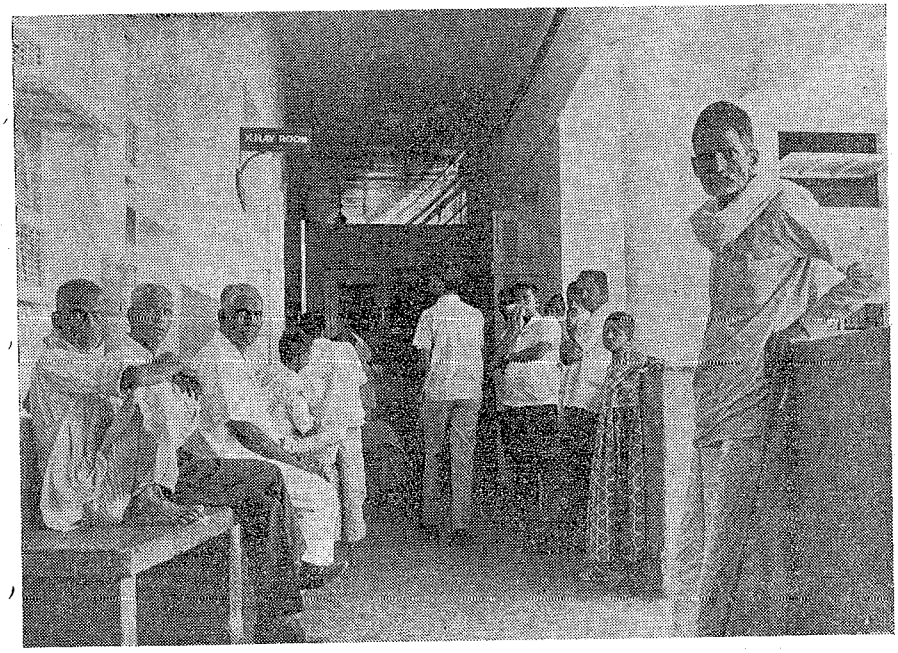

X-rays are still in use as shown here in a specialised TB Hospital near Bangalore