

# STATE OF TB IN INDIA - DOCTORS' VIEW

With more than 275,000 doctors, Docplexus is India's largest and fastest growing digital platform of doctors practicing modern medicine.

[www.docplexus.in](http://www.docplexus.in)

# TABLE OF CONTENTS

<b>About Docplexus</b>	<b>3</b>
<b>Note from the CEO</b>	<b>4</b>
<b>About the Survey</b>	<b>6</b>
<b>The State of TB in India</b>	<b>7</b>
<b>Docplexus Partnership</b>	<b>10</b>
<b>Survey Findings</b>	<b>11</b>

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# ABOUT DOCPLEXUS



## INDIA'S LARGEST ONLINE COMMUNITY OF DOCTORS

Docplexus, founded in 2014, is the largest online network of doctors in India. At present, there are 275,000+ doctors registered on this platform and growing by 15,000+ new doctors every month. Docplexus focuses on peer-to-peer exchange of patient cases, dialogue and interdisciplinary learning to improve medical outcomes. It is a trusted and secure platform accessible exclu-

sively for medical practitioners, offering real-time dialogue, exchange and interactions in clinical and non-clinical forums, knowledge centers, treatment guidelines, certified educational resources and latest medical news.

It is also the most trusted marketing partner of pharma and medical devices companies. In the new-age digital era, Docplexus serves as a

platform for the industry to meaningfully engage with doctors through digital content marketing solutions, bridging the gap between the two.

**275,000 +**  
DOCTORS  
ON DOCPLEXUS



**1500 +**  
CITIES WE ARE  
PRESENT IN



**94**  
THERAPEUTIC  
AREAS



**2000 +**  
DAILY  
ENGAGEMENT



**5.21** MINS  
AVERAGE TIME DOCTOR  
SPENDS ON DOCPLEXUS



# CEO'S NOTE

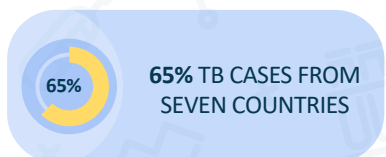


**PHANISH CHANDRA**  
*Founder & CEO, Docplexus*

India has been battling TB for decades. But, becoming a TB-free country still looks like a lofty goal. Efforts from the government, healthcare providers and private partners have yielded some results, and with the Revised National Strategic Plan (NSP), we should be hopeful of realizing the dream by 2025.

Tuberculosis (TB) has been a magnanimous problem across the globe since long. Its severity was realized back in 1993 when the World Health Organization (WHO) declared it as a global emergency. Today, around one-third of the world's population is infected with Mycobacterium tuberculosis, and every year nearly 10 million new TB patients are identified. The mortality rate due to TB is 1.6 million per year.

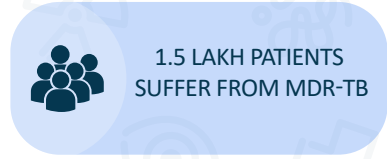
Many developed countries have taken significant steps to reduce the incidence and mortality associated with this epidemic. However, the problem lies in the high burden countries which account for nearly 65% of the world's TB cases.



India is one among them. For a fast-developing nation, losing nearly 4.5 lakh people every year to a social issue is an unparalleled loss. These 4.5lakh people, if healthy, would have significantly added value to the economy, society and the growth of the country as

a whole. The NSP 2012 – 17 is the world's largest DOTS (Direct Observed Treatment Short Course) programme, having impacted nearly 15 million TB patients, and saved more than 2.5 million lives. The success rate of India's NSP has been more than 85% since 2001. Aiming to make India a TB-free country, the government has launched the latest version of the NSP (2017 –2025).

To be able to achieve this goal, we have to understand the challenges that we face in TB Care. One major impediment is multi-drug resistant (MDR) TB. India has the second-highest burden of MDR TB in the world with one out every five TB patients being resistant to at least one major anti-TB drug.



MDR TB is a consequence of poor patient compliance to the treatment process. Research has proved that quitting the drug course mid-way makes patients develop resistance towards the drug. The major reasons for poor patient compliance is unaffordability of drugs and inaccessibility to quality healthcare.

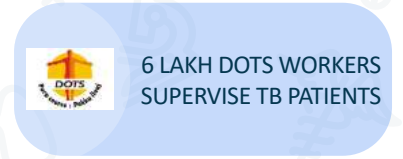
A large section of the 3 million TB patients in India are from the low socio-economic strata, having little access to healthcare and poor awareness of the disease. They become victims of delayed diagnosis and are subjected to poor quality healthcare. Lack of timely detec-

tion increases severity and prolongs treatment. It can also cost lives.

The Government has attempted to address the issue of unaffordability by providing free medicines at public hospitals. However, there is another issue that fails the treatment process - undernutrition. The nutritional status among the TB patients from the weaker socio-economic strata is observed to be poor.

It is obvious that to become completely TB-free, India has to adopt a multi-pronged approach. Efforts from both public and private sector stakeholders are necessary in our march towards attaining TB-free status.

The high-quality DOTS programme has more than 6 lakh healthcare workers committed to supervising patients and ensuring they follow the treatment process completely. It is critical that we unitedly work towards battling TB. At the same time, we should also celebrate the milestones during the journey. A rewarding system for the primary healthcare workers who strive towards reducing the TB burden should be introduced.



The Government in the latest Union budget has announced ₹500 per patient per month for nutritional care, a step that should

# CEO'S NOTE



address undernutrition. Like the efforts to improve patient compliance, adequate nutritional intake will also need constant push from primary healthcare workers.

A robust screening programme based on the alarming symptoms of TB will lead to immediate detection of the disease. Simultaneously, India needs to work towards identifying new diagnosing techniques for MDR TB. A PPP model can be approached to execute this.

To increase awareness among the people, state and Union governments should take to television, newspapers and radio and reach out to the people. Campaigns should be carried out in the form of role plays, especially in the rural areas. TB should be included in the

students get inspired and work towards identifying solutions.

Healthcare providers play a crucial role in the fight against TB and should be empowered. Capacity building exercises to enable them to combat the menace could be organized. Digital media can be used for conducting CME (Continuing Medical Education) and other academic activities to train healthcare providers on TB management. Docplexus, India's largest online community of doctors, recently tied up with the Maharashtra State TB Cell (MSTC) with a mission to take MSTC's message to over 250,000 doctors on our platform and help MSTC achieve its goal of TB-free Maharashtra.

On this World TB Day, we bring to you a survey report on the state of

TB in India, which highlights the challenges and possible solutions for India's TB Care as perceived by doctors. We sincerely wish the survey helps in developing policies and strategies to make India a TB-free country.

# ABOUT THE SURVEY

## Tuberculosis worldwide

An estimated 2-3 billion people are infected with the bacillus *Mycobacterium tuberculosis*, only 5-15% will develop the disease

**In 2015**

**10.4 million cases**

**1.8 million deaths**

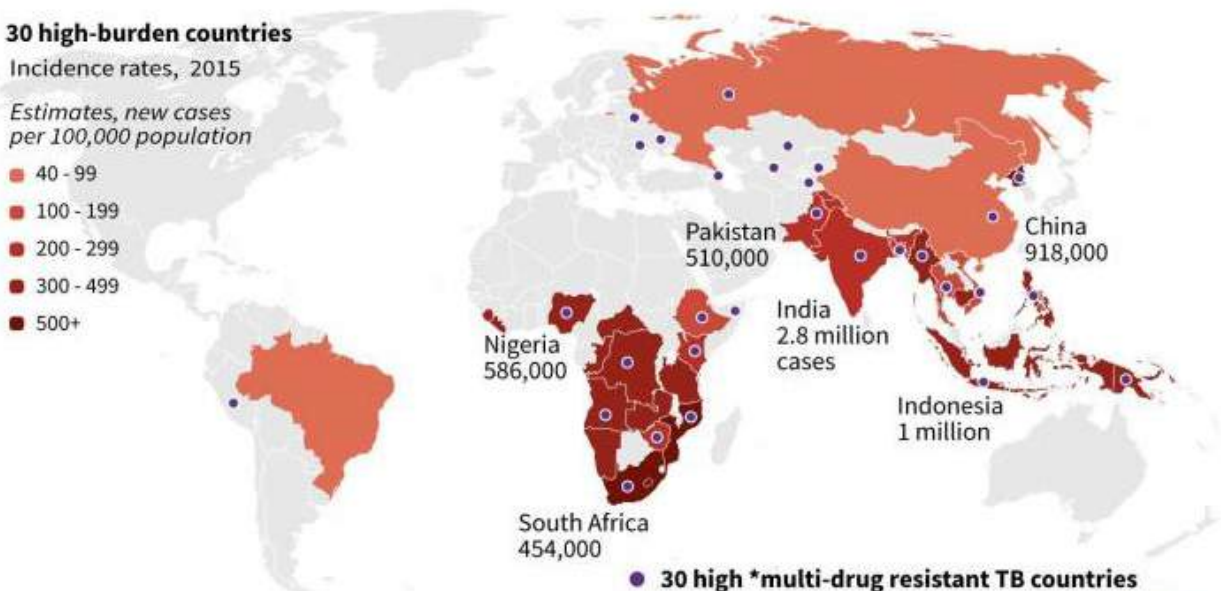
**480,000 \*MDR-TB cases**

### 30 high-burden countries

Incidence rates, 2015

Estimates, new cases per 100,000 population

- 40 - 99
- 100 - 199
- 200 - 299
- 300 - 499
- 500+



Source : WHO global tuberculosis report 2016

© AFP

Tuberculosis- a disease that is not just a healthcare issue but, a social menace across the globe. Around seven nations bear nearly 65% of the burden, and unfortunately India is one among them. Despite persistent efforts, our country continues to reel under the dreadful disease. While there are umpteen case studies and reports that bring out the problems faced by the patients, society and the policy makers, little does anyone speak about the challenges of the healthcare providers – the doctors who dedicate their lives treating thousands of people.

This World TB Day, Docplexus, India's largest online community of doctors, and a proud stakeholder of modern healthcare, brings to you a survey that puts forth the challenges and problems faced by the doctors in delivering TB Care. Team Docplexus conducted an online survey of 7 questions on 343 pulmonologists who form nearly 10% of the total number.

# SURVEY REPORT

## THE STATE OF TB IN INDIA 2018 - DOCTORS' VIEW



India is home to nearly 30 lakh tuberculosis patients at any given time, and the country loses an average of 4.5 lakh people every year to this deadly disease. According to a 2016 report of the World Health Organization (WHO), India along with six other countries, Pakistan, Nigeria, South Africa, China, Philippines and Indonesia, account for 65% of world's TB patients.


Many have been working on reducing the TB mortality rate. Nearly 30% global healthcare expenditure is on TB Care. India too has increased its focus on TB Care and has recently launched the National Strategic Plan (NSP) 2017-2025. The programme has a clear vision, but the aim of consistently decreasing the mortality rate is impeded by many challenges.

This World Tuberculosis Day, Docplexus, India's largest online community of doctors, has come out with a survey identifying the problems for TB Care in India and the possible solutions for them. The survey was conducted online, targeting nearly 2,700 pulmonologists (there are nearly 3,500 pulmonologists in India) on the Docplexus platform. Of this, a total of 343 doctors responded to the survey and provide suggestions.

### SURVEY FINDINGS

#### PATIENT COMPLIANCE - THE BIGGEST WORRY

Out of the 3 million people affected with TB, half of them fall in the public healthcare set up. Doctors on Docplexus feel that many patients do not comply with the

 **22% DOCTORS OPINED THAT PATIENT COMPLIANCE IS THE BIGGEST WORRY**

treatment process. For complete cure, sticking to the drug regimen is crucial, they note. About 22% doctors responded that patient compliance is worrisome.

According to the chairman of Indian Institute of Health Management & Research, Jaipur, Dr S D Gupta, the lack of adherence to treatment is a bigger worry among patients in the rural areas. "Patients are provided with the treatment regimen and are informed about the availability of free medicines at government hospitals. But, a large section of the patients from the rural areas

# SURVEY REPORT

do not stick to the regimen. While many patients delay the diagnosis, those who start treatment stop the course mid-way. As the medicines begin to show effect, patients feel that they have been cured and stop the treatment,” Dr Gupta said.

Discontinuing from the treatment process increases the risk of developing drug resistance. If patients do not stick to the treatment, the bacteria develops resistance towards the particular drug. And, if this is left untreated, it could lead to death.

## CONSTANT MONITORING BY HEALTHCARE WORKERS

To achieve better treatment outcomes, doctors feel that healthcare workers should constantly monitor TB patients. If healthcare workers keep a track of the patients’ treatment regimen and keep prompting them to follow the treatment process, a large number of TB deaths can be prevented.


Since the problem of patient compliance is observed among patients from rural areas, doctors feel that primary healthcare workers should conduct personal visits and and talk to patients about the

importance of following the treatment process and seeing their doctor regularly.

Besides monitoring by primary healthcare workers, it is also suggested that awareness campaigns must be conducted through television and newspaper advertisements. In the era of internet, doctors also opine that patients can be reached out through SMS, Whatsapp and phone calls.

## LACK OF ACCESS TO HEALTHCARE

One of India’s biggest healthcare needs is access to hospitals and doctors. The ratio of doctors to patients in India is 1: 1700, while the WHO standard is much less. There are about 1 million registered allopathic doctors in India, of whom only 3,500 account for pulmonologists. And every year, India has about 3 million TB patients. This means that there is only one pulmonologist for every 850 TB patients.



**20% DOCTORS FEEL THAT LACK OF ACCESS TO HEALTHCARE IS THE HURDLE**

In the survey, 20% doctors have responded that lack of access to healthcare is their biggest concern. While the lack of doctors is a glaring issue for TB care, poor access to hospitals is equally worrying. Again, the issue is pertinent for the population in rural areas. Inaccessibility to healthcare increases the chances of patients ignoring the disease or quitting from the treatment process.

According to Dr Garg, there are several things to be tackled while identifying solutions for TB in India. “TB highlights multiple aspects of society- socio-economic status, location, cultural differences and environment.Heterogenicity in healthcare institutions across India is the problem.Standardization of practice will help. This will promote homogeneity in diagnosis and overall treatment,” he observes.

## UNDERNUTRITION- CHALLENGE FOR TB CARE

Undernutrition or malnutrition is in itself a large social issue for India. Like other diseases, it is a major cause for TB in the country.The survey reveals that 18%



“A large section of the patients from the rural areas do not stick to the regimen. While many patients delay the diagnosis, those who start treatment stop the course mid-way. As the medicines begin to show effect, patients feel that they have been cured and stop the treatment.”

- Dr. S D Gupta | CHAIRMAN OF INDIAN INSTITUTE OF HEALTH MANAGEMENT & RESEARCH, JAIPUR



“Patient Compliance is definitely an issue in TB control and treatment. But more importantly, it highlights another major issue - Patient Communication. If the doctors/medical community were to verbalize and spend adequate time emphasizing the importance of following the treatment program; we would observe better treatment results overall.”

- Dr. Himanshu Garg | THE HEAD AND DIRECTOR OF ARTEMNIS, GURGAON



# SURVEY REPORT



doctors feel that undernutrition is the challenge for TB Care in India.



**₹500 PER PERSON FOR NUTRITION**

The Government of India has announced a INR 500 per month per person financial aid to improve nutritional status among TB patients. The move was announced in the Union budget 2018 presented last month. With free medicines already available at government hospitals across the country, 59% doctors on Docplexus feel that INR 500 per month is sufficient for the nutritional care of a TB patient.

## APPROACHING THE DOCTOR ON TIME

Early diagnosis is key for good treatment, irrespective of the disease. According to the survey, 53% doctors say that their patients

do not approach them at the right time, thus making the treatment prolonged and intense. Medical reports and experts suggest that the symptoms of TB are apparent by the end of six weeks. Doctors feel that patients, especially in the rural areas, have to be sensitized about this.



**53% DOCTORS FEEL THAT PATIENTS DO NOT APPROACH THEM ON TIME**

Patients in the urban areas, those with access to hospitals and doctors are able to be diagnosed on time. It is the rural population that needs to be informed about the symptoms and the need for approaching the doctor on time. More than half of TB deaths in India are due to delayed diagnosis. Government of India has taken many steps to sensitize people about the diseases and its symptoms. Such constant efforts are needed to inform every individual.



## NATIONAL STRATEGIC PLAN (2017-2025)

India, aiming to eradicate TB by 2025, launched the National Strategic Plan (NSP) in 2017. The programme, given its vision and plan, should be successful, provided India manages to gather the required funds (USD 2.5 billion) for its implementation.

Doctors and other healthcare experts feel that India has the resources and will to eradicate TB, and if the NSP is implemented appropriately, India will be a TB-free country by 2025.

# OUR PARTNERSHIP

## DOCPLEXUS PARTNERS WITH MAHARASHTRA STATE TB CELL



### STATE TUBERCULOSIS CELL

Revised National TB Control Programme, Maharashtra  
Department Health Services, Govt. of Maharashtra  
*"Pura course, Pakka ilaaj"*

According to a latest report by the Maharashtra Chief Minister Devendra Fadnavis, the state had reported 2.14 lakh TB cases in 2017, of which 9,172 were of MDR TB.

Maharashtra State TB Cell recently forged a new partnership with Docplexus to fulfil the common objective of reducing the burden of TB in India and promoting population's overall health.

The collaboration will focus on implementing Revised National Tuberculosis Control Partnership as per NSP 2017-2025 and dissemination of its critical information to relevant stakeholders - healthcare professionals. Program includes initiatives like prompt diagnosis (for both TB and drug-resistant TB), free and complete treatment services, preventive medicine and other medico-social support.

Dr. Sanjiv Kamble, Joint Director and TB Officer - Government of Maharashtra, said, "This new association with Docplexus will give us a digital platform to maximize our efforts in spreading awareness about the disease within the medical community;

promoting better health and well-being in the population."

Chief Minister Fadnavis also mentioned that Maharashtra is one of the first states in the country to introduce the nutritional support scheme. The Maharashtra Government has set aside ₹15 crore to provide nutritional support to TB patients across 22 municipal corporations. The government will be providing jaggery, peanuts, pulses, rice and wheat flour to TB patients, the chief minister had said. The state has also decided to provide cash incentives to treatment providers and supporters.

Other than its partnership with Maharashtra State TB cell, Docplexus is also in association with nation's other medical bodies such as National Centre for Disease Control such as National Centre for Disease Control and Indian Public Health Association to educate physicians. The aim of building a collaborative front being resolution of serious health problems plaguing India, effectively.

Phanish Chandra, CEO, Docplexus,



"This new association with Docplexus will give us a digital platform to maximize our efforts in spreading awareness about the disease within the medical community; promoting better health and well-being in the population."

-Dr. Sanjiv Kamble  
JOINT DIRECTOR AND TB OFFICER -  
GOVERNMENT OF MAHARASHTRA

said, "At Docplexus, we firmly believe in the power of united efforts in solving healthcare issues. Therefore, we have created the largest community of allopathic doctors, standing firm in its resolve of improving medical outcomes. To fight the menace of Tuberculosis, it is time all stakeholders join forces, and that would truly be possible only when the community is empowered with latest updates and upgrades happening in the fraternity. That's what the partnership stands for."

# SURVEY FINDINGS

## STATE OF TB IN INDIA - DOCTORS' VIEW

Every year about 30 lakh people in India are found to be affected with TB, and 4.5 lakh succumb to the disease. On this World TB Day, Docplexus brings to you doctors' opinions on the problems impeding TB Care in India, and some solutions.

### DELAYED DIAGNOSIS

**53%** Doctors feel their patients do not approach them **on time**



### INACCESSIBLE HEALTHCARE

**20%** Doctors suggest **lack of access** is the hurdle



### UNDER NUTRITION

**18%** Doctors think **undernutrition** is biggest worry



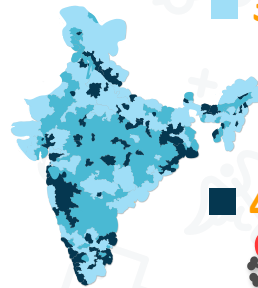
### POOR PATIENT COMPLIANCE

**22%** Doctors opine **poor patient compliance** is India's major concern



TB Infects

■ **30 LAKH PEOPLE** every year



■ **4.5 LAKH PEOPLE** DIE every year

**1.5 LAKH PATIENTS** suffer from **MULTIDRUG RESISTANT TB**

## TOWARDS A TB-FREE INDIA

### NUTRITIONAL CARE

Indian Government to provide **₹ 500** PER MONTH to each **TB patient**

**59%** Doctors feel it is sufficient to address **UNDER-NUTRITION**



### ACCESSIBLE HEALTHCARE



**Good execution** of **TELEMEDICINE** can help

### BETTER PATIENT MONITORING



**50%** Doctors feel that **MONITORING** by healthcare workers is needed

### AFFORDABLE HEALTHCARE



**81%** Doctors say that their patients are aware about **FREE MEDICINES** at Govt. Hospitals