

Draft speech of Smt. D. Purandeswari MoS-HRD inaugurating
the NRI Heart Centre Research Institute and declaring open the
Cardio Thoracic Services at Chinakakani, Andhra Pradesh
On 31st October, 2006.

Sir,

It gives me great pleasure to come here this morning and inaugurate the NRI heart Centre and Research Institute and declare the Cardio Thoracic Services open for the public. It is a matter of great satisfaction that the group of 32 NRIs mostly hailing from the coastal Districts of Andhra Pradesh who are hosting the Heart Centre and Research Institute and opening the Cardio Thoracic Unit for the benefit of the poor and needy, already established three years back the NRI Medical College with an attached NRI General Hospital with 750 beds. It is a great feat of their achievement that with their sincere and untiring efforts they been able to give a practical shape and setup the Institute of making available Cardiac Services to the common man and good hospital services at affordable rates.

Cardiovascular diseases are a major cause of morbidity and mortality in the world today and will become the leading cause of death and disability worldwide by 2020. It is further estimated that 10 per cent of India's population suffer from heart related diseases. According to All India Institute of Medical Sciences, New Delhi, a recently released study by the Earth Institute of Columbia University, conducted with international collaborators in India, South Africa, Brazil and Russia warns that rising rates of death and disability due to cardiovascular diseases will seriously affect productivity and impose economic burden on these countries. India will be the worst hit due to early deaths and disability with productive life year losses due to deaths in the 35-64 years

age group rising from 9.2 million in 2000 to 17.9 million in 2030. As per another survey it is estimated that by 2015, as much as 60 percent of young Indians will suffer from it. Annually, over 1.4 million Indians require critical heart surgery. At present, however, only about 55,000 surgeries are performed. According to Dr. Prathap C. Reddy Chairman of the Apollo Hospitals The disease threaten the survival of the economy but there is little awareness in the country. According to the AIIMS, heart diseases especially coronary heart disease is on the rise and is also occurring in younger persons (below 40 years of age).

Not only this the incidence of heart diseases among children is also increasing at an alarming rate almost from their birth. According to AIIMS, the incidence of congenital heart disease is about 0.8/1000 live births. About 1,50,000 babies are born with congenital heart disease in the country. Many of them require specialized care by pediatric cardiologists and by cardiac surgeons who are specially trained in pediatric heart surgery. At present, there is no National Policy on congenital heart Disease for children in place. However, the government proposes to initiate and implement a National Programme for the Prevention and control of Cardio Vascular Diseases (CVD) and Diabetes to reduce the adverse health impact of heart disease, stroke and Diabetes. The benefits out of this programme would include reduction in the case of heart diseases, diabetes as well as their timely treatment avoiding further complication. But more focused attention is needed to address the congenital heart diseases of the new born babies.

All in all, the problem of cardio vascular diseases in India among the cross section of the population is serious enough and has to be tackled properly : otherwise the incidence of this disease may have an adverse impact on the growing

economy and set at naught the benefits of development and growth and seriously impair quantum and efficiency of the human capital.

In a spirit of optimistic empathy for the health needs of the people, particularly the poor and under-privileged sections of the community, the government of the day inaugurated the 'Health for All by the year 2000 AD', through comprehensive provision for health care services. However financial resources, development of adequate infrastructure and the lack of appropriate public health administrative capacity fell short and failed to achieve holistic goal of public health as contemplated.

India is a welfare country and as such the State has primary responsibility for the health care of its citizens. The government has therefore to strive for the attainment of health care for people through wide network of Health Care delivery system. We must not forget that the national Health care is more than 'medical care'. It embraces a multitude of the services provided to the individual or community by health personnel aiming at promotion, protection and restoration of the health of the people. The Common Minimum Programme of the present government proposes to devote focused attention on the subject.

Considering the economic restructuring under way in the country, and over the globe, in the last decade, the private sector must play its role faithfully in providing health care to the country. Currently, the contribution of private health care is principally through independent practitioners. Also, the private sector contributes significantly to secondary-level care and some tertiary care. It is a widespread perception that private health services are very uneven in quality, sometimes even sub-standard. Private health

services are also perceived to be financially exploitative, and the observance of professional ethics is noted only as an exception. With the increasing role of private health care, the implementation of statutory regulation, and the monitoring of minimum standards of diagnostic centres / medical institutions becomes an imperative duty of the State.

Historically, it has been the practice to implement major national disease control programmes through the public health machinery of the State/Central Governments. It has become increasingly apparent that certain components of such programmes cannot be efficiently implemented merely through government instrumentalities. A considerable change in the mode of implementation has come about in the last two decades, with the increasing involvement of NGOs and other institutions of civil society. It is to be recognized that widespread debate on various public health issues has, in fact, been initiated and sustained by NGOs and other members of the civil society. In this context I would like to refer one organization namely the Needy Heart Foundation which was set up in 2001 by a Group of renewed Heart Surgeons including Dr. R.C. Srivyas, Dr Joseph Xavier, and Dr. M.S. Devanand. The background inspiration came from S. Ramaiah, a Chartered Accountant, Rajendra Kotaria, an Industrialist and Mr. O. P. Khanna a social worker and activist. These team members observed that the cost of heart surgery was so high that the poor people suffering for cardiac disease had no option but to die a painful death.

The group therefore decided to provide help to the poor patients who could not afford surgery at cardiac hospitals. The task before them was indeed Herculean. They first had to identify such needy patients, win their trust, identify doctors who would be willing to work for such a cause, find donors for the surgery and equipment.

Just in four years, NHF organized heart surgeries for over three hundred patients, provided 32 pacemakers free of charge and reached out to various remote villages to identify the needy and provide them with appropriate cardiac care. Most of the patients treated come from Karnataka, Tamilnadu, Bangladesh, Maharashtra and Andhra Pradesh. Of the 170 patients treated last year, 96 were children. I wonder whether the foundation of the NRI Heart Centre and Research Institute could work in tandem with the authorities of NHF as their ideals are common and methodology similar. This will invariably benefit the poor and the needy.

It is a matter of great pleasure that the NRIs have of late started taking greater interest in the development of the land which they left years back. One reason, I believe is that the Western World has recognized India as a rising power, and the global superpower U.S.A has cultivated her as a nuclear partner. So, NRIs no longer consider themselves as impoverished immigrants fleeing a poor country but regard themselves as new bonds bringing emerging India nearer to the developed world. This I suppose is perfectly justified as the land of opportunity is now India. Its growth potential is limitless, with a billion consumers thirsting for good life, a booming economy showering riches on entrepreneurs, and young software engineers earning more money than their parents ever did

Instead of clamouring for green cards NRIs are applying for residency permits in India.

I welcome this change in the attitude of the Indian diaspora and hope that in years to come they will take a more proactive role in the development of their original motherland which reared them up and equipped them with the basic minimum qualification which served as a passport for them to go foreign land and look them to unprecedented heights of material prosperity.

With these words I inaugurate NRI Heart Centre and Research Institute and declare the cardio thoracic services open for the public.

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