Is Kerala Facing a Health Crisis?

Dr. B. Ekbal

 ${f I}$ n recent years, Kerala, a state renowned for its impressive health indicators, is currently grappling with a

rise in infectious diseases. Infectious diseases such as Dengue, Chikungunya, H1N1, diarrheal diseases, Leptospirosis, West Nile virus, Japanese Encephalitis, Scrub Typhus, Leishmaniasis, and Kyasanur Forest Disease have become endemic in the region, claiming many lives annually. Moreover, Kerala has faced outbreaks of Nipah and Zika viruses also. Cholera cases and deaths have also been reported. Furthermore, the incidence of rabies due to stray dog bites is on the rise. Alarmingly, a few individuals have succumbed to brain-affecting amoebiasis, a rare condition that current doctors are only familiar with through medical texts.

The Vicious Circle of Diseases

Kerala is grappling with a double burden of both non-communicable and communicable diseases. Chronic conditions like diabetes, hypertension, cancer, and lung diseases—often described as lifestyle diseases—are on the rise. This creates a vicious cycle, where infectious diseases exacerbate chronic conditions, and chronic conditions, in turn, increase susceptibility to infections. For instance, people with non-communicable diseases face a higher risk of severe illness and death from infectious diseases such as Covid-19. This intertwined relationship intensifies the overall health crisis in the region.

The Need for Coordinated Action

While the public should diligently follow the health department's guidelines for preventing and controlling infectious diseases, various government departments also need to take proactive measures. A clear and comprehensive action plan must be devised and implemented to address both communicable and non-communicable diseases in Kerala.

Strengthening Disease Prevention Measures

To prevent communicable diseases, it is essential to ensure effective mosquito and pest control, proper sanitation, and access to clean water. If the density of Aedes aegypti mosquitoes remains high, there is a risk of the deadly yellow fever reaching Kerala. Given the rising incidence of vector-borne diseases, the health and local self-government departments must collaborate to implement robust vector control programs. Additionally, tailored public health measures are necessary to control recurring diseases such as Nipah, scrub typhus, black fever, and monkey fever, considering their unique transmission modes. The increase in stray dog populations, largely due to the dumping of food waste in public places, also needs to be addressed with strict measures to prevent this practice.

Addressing Preventable Deaths and Water Safety

Despite the availability of the flu vaccine and antiviral medication, at least fifty deaths from H1N1 occur annually in Kerala, a situation that must be addressed. Encouraging flu vaccination is crucial. Similarly, deaths due to leptospirosis can be prevented through effective rat control and the use of preventive and treatment drugs.

Agricultural workers, cattle handlers, and others at risk should wear protective shoes and gloves to safeguard against leptospirosis. Additionally, the well water used by many Keralites is often contaminated with organic matter and Escherichia coli, the bacterium responsible for diarrheal diseases. This contamination is frequently due to faulty toilet construction. A detailed investigation into these construction defects is necessary to develop effective solutions and ensure safe drinking water.

Strengthen Sub-Centres

Kerala has made significant strides in advancing curative care and treatment facilities. As part of the Aardram Mission, primary health centres have been upgraded with special clinics for non-communicable diseases, mental illness, and respiratory diseases, along with the provision of essential medicines. Many of our taluk, district, and government medical college hospitals have developed remarkably in terms of modern technology and human resources, often surpassing private medium or large corporate hospitals and private medical colleges. Consequently, the number of people utilizing government hospital services has increased to 60-70 percent.

But we have not been able to utilize the potential we have at various levels in terms of public health activities aiming the prevention and control of diseases. The functioning of the lower-level sub-centres for health education and nutrition needs to be further improved. The state government is trying to expand the subcentres into Peoples' Health Centres, while the central government's plan for wellness clinics under the name of "Ayushman Arogya Mandir" has been proposed to be implemented at the subcentres. Whatever the name may be, the subcentres should not become adjuncts to the curative care treatment facilities of the primary health centres, but special care should be taken to make them to give more emphasis on disease prevention, health education and health promotion.

Public Health Interventions

In addition to enhancing medical facilities, effective public health interventions are essential to address Kerala's health crisis. We have not fully leveraged the expertise of public health experts in the Departments of Community Medicine in government and private medical colleges, the Achutha Menon Centre for Health Science Studies, and the Department of Public Health and Community Medicine at Kasaragod Central University. Their skills should be harnessed for conducting detailed studies and implementing public health interventions tailored to Kerala's unique challenges. Government and private medical colleges, along with public health institutions across districts, should investigate local health issues and provide solutions to the health department and local self-governing bodies. These institutions can also assist local governments in developing and executing public health projects at the community level.

Prevention, Monitoring, and Surveillance

In addition to prevention, effective monitoring and surveillance of diseases are crucial. The existing PEID Cells (Prevention of Epidemic and Infectious Diseases), in the medical colleges which focus on epidemic prevention, need to be made more efficient. The decision to establish a centre in Kerala modelled after the CDC (Centres for Disease Control and Prevention) in the United States, which excels in disease prevention and control, is a welcome move.

The Kerala University of Health Sciences should lead research initiatives to investigate the unique health problems faced by Keralites. The School of Public Health under the University should focus specifically on the state's public health issues and advise the government on policy-level interventions.

Health Indicators and Infectious Diseases

Based on recognized indicators such as infant mortality rate and life expectancy, Kerala is often considered on par with developed countries in terms of health achievements. However, it is important to note that Kerala still struggles with many infectious diseases that have been eradicated or controlled in developing countries like Cuba, Nicaragua, and Sri Lanka, which perform better in certain health indicators. If we account for the presence of these infectious diseases by giving negative weightage—well-controlled in both developed and some developing countries—Kerala might fall behind in the list of good health achievers compared to many other regions.

Dr Ekbal, a former Vice Chancellor, University of Kerala, is an internationally acclaimed health activist. He had served as professor and head, Department of Neurosurgery, Medical College, Kottayam and officiated as Member, Kerala State Planning Board.