



The Nutrition of the Individual Is The Most Vital Factor In Prevention of Tuberculosis Disease – Discuss. (250 words / 15 M) (GS-2 Health)

Approach :

1. Mention the facts of TB disease in India.
2. Discuss the relation b/w poor nutrition and TB.
3. Measures to be taken to address the issue.
4. Conclusion

India reported a **19% jump** in the TB cases in **2021** over the previous year. Simultaneously, there is an **increase in the mortality rate** due to all forms of TB by **11% (2019-2020)**. According to **Global TB Report 2021**, the estimated incidence of all forms of TB in India stands at **188/1 lakh population**.

Despite several medicinal intervention, TB cannot be controlled. It is in this context, that the words of **American Medical Association** holds relevant – ***“it is most unlikely that drugs alone or drugs supplemented by vaccine can control TB, unless their nutritional status has not been raised to a reasonable level”***.

The **2019 global TB report** identified ***malnutrition as the single-most risk factor*** for the development of TB. TB mainly affects the poor, who are not only malnourished but are also less likely to go for treatment and even less likely to continue treatment. Few research pointed that **out of 1,695 pulmonary TB patients, men had an average body weight of 42.1 kg and BMI of 16; while for women, average body weight is 34.1 kg with BMI of 15**. With such levels of under nutrition, there has been **2-4 fold rise in mortality** associated with TB.

The fact is **90% Indians exposed to TB can remain dormant** if their **nutritional status and immune system are good**. In immunocompromised people, TB manifest in **10%** of the infected. India has around **2.8 million active cases now**.

“Undernutrition” and TB are “syndemics”. Intake of **adequate balanced food** is a sine qua non in preventing TB. **Protein rich diet** consisting of **eggs, milk, dal, grams, etc.** must be included. In this respect, the directives given in the **Health Ministry’s “Guidance Document – Nutritional Care and Support for Patients with Tuberculosis in India”** should be strictly adhered to. The **outreach of nutritional support, especially to the poor, must be extended by coupling it with various government schemes**. E.g. Chhattisgarh has initiated supplying **ground-nut, moong dal, soya oil under the Nikshay Poshan Yojana of the National Health Mission**. **All states are extending cash support of Rs. 500/month to TB patients to buy food**. However, this amount needs to be raised. Without **nutrition education & counselling support**, cash transfer alone will not give the desired outcome.

India aims to **eliminate TB by 2025** according to ***National Strategic Plan for Elimination of Tuberculosis (2017-25)*** and **18 states have committed to ending TB by 2025**. Although the



targets seem stark, yet, the **goals of reducing TB incidence & TB mortality** cannot be reached **without addressing undernutrition**.

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