CDC in India





The Center for Global Health and Prevention (CDC) collaborates with the Government of India, Indian institutions, and international organizations to address a wide range of infectious and non-communicable diseases. Together we work to strengthen India's health system to reach national and international goals. CDC opened the first India office in 2001 to support the Life Initiative for HIV/AIDS prevention and control. Today CDC maintains offices in New Delhi and Hyderabad with staff supporting initiatives of the Division of Global Health Protection, the Global Immunization Division, the Division of Global HIV and Tuberculosis, and the Influenza Program.



CDC office (physical presence)
11 U.S. Assignees
26 Locally Employed Staff



Population: 1,296,200,000 Per capita income: \$5,350 Life expectancy at birth women/men: 68/65 yrs Infant mortality rate: 44/1000 live births

Source: Population Reference Bureau World Population Data Sheet, 2014

Top 10 Causes of Death

- 1. Ischaemic heart disease
- 2. Chronic obstructive pulmonary disease 11%
- 3. Stroke 9%
- 4. Diarrheal disease 6%
- 5. Lower respiratory infections 5%
- 6. Preterm birth complications 4%
- 7. Tuberculosis 3%
- 8. Self-inflicted injuries 3%
- 9. Falls 3%
- 10. Road injury 2%

Source: WHO World Health Statistics, 2012



HIV/AIDS

In support of India's Ministry of Health and Family Welfare's National AIDS Control Organization, CDC has focused its efforts on preventing new infections, increasing access to services for persons living with HIV and tuberculosis (TB), and establishing a single monitoring and evaluation system. CDC provides technical assistance on a broad range of issues, including prevention of parent to child transmission of HIV, addressing HIV prevention and treatment needs of people who inject drugs, care and treatment of key affected populations, addressing comorbidities of TB and HIV, strengthening laboratory systems, and district-level capacity to address HIV and TB, and strategic information.

Tuberculosis

CDC has provided technical assistance for TB control efforts since 1997. Nationwide overage of Directly Observed Therapy (a leading TB control strategy) was achieved in 2006. Since 2007, CDC has provided guidance on expanding TB/HIV and TB infection control, provided technical assistance to multidrug resistant TB activities, and supported TB program strengthening, operational research and surveillance.

Immunization

Since 1993, CDC has assigned experts to WHO regional and country offices in India to support surveillance of vaccine-preventable diseases. CDC's technical support and leadership has been instrumental in developing and implementing polio eradication strategies, maternal and neonatal tetanus elimination strategies, strengthening the national immunization program, and supporting accelerated control of measles and rubella. In 2014 India was certified polio-free.



Global Disease Detection (GDD) Regional Center

With the Global Health Security Agenda as a central focus, the India GDD Regional Center works to build capacity within local and regional public health entities to rapidly detect, accurately identify, and promptly contain emerging infectious disease threats. GDD projects include strengthening surveillance networks and public health laboratory systems, providing technical assistance to improve outbreak response, and bridging the human-animal interface to detect emerging zoonotic disease threats.

Foodborne/Acute Diarrheal Disease Infections

CDC builds capacity for foodborne/acute diarrheal disease surveillance in India with the goal of controlling and reducing the number of acute diarrheal disease illnesses and related economic costs. This program brings multidisciplinary scientists together and conducts training to detect and respond to diarrheal disease outbreaks.

India Epidemic Intelligence Service (EIS)

In 2012, the GDD India Center, located at India's National Centre for Disease Control, established the India Epidemic Intelligence Service program (EIS) – a post graduate field training program modeled after the US EIS. CDC supports the Indian EIS Programme by providing technical assistance and a resident advisor. The majority of EIS officer graduates return to positions in district, state and national level programs where they lead surveillance and outbreak response efforts.

Influenza

CDC has supported capacity-building for surveillance since 2004, leading to improved characterization of circulating influenza viruses and rapid detection of

novel viruses. CDC-supported laboratory training and preparedness workshops have strengthened India's response measures against seasonal, avian, and pandemic influenza. The improved capacity has led to a better understanding of influenza epidemiology in India. CDC also collaborates with Indian partner organizations to research the influenza burden in India, evaluate the effectiveness of influenza vaccines, and identify optimal timing for influenza vaccination, all of which help inform national influenza vaccination policy. CDC Influenza Division also has an assigned influenza staff at the WHO regional office.

Non-communicable Diseases

CDC provides expertise and consultation on a number of critical non-communicable disease issues in India, including chemical and radiological contaminants, preparedness for environmental emergencies, and household air pollution. CDC also provides expertise and support to help India consistently implement the four surveys of the Global Tobacco Surveillance System, managed by CDC and WHO.

For more information please contact Centers for Disease Control and Prevention:

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Impact in India

- Reduced polio from 1,934 cases in 1998 to 1 case in 2011. India is now certified polio-free.
- Trained 886 staff from District AIDS Prevention and Control Units in 189 high-HIV prevalence districts between 2010 and 2011.
- Identified monsoon seasonality of influenza virus, leading to revision of recommendation to vaccinate during pre-monsoon period (April-May).
- Discovered the cause of a previously unexplained neurologic illness affecting children in Bihar.