



## PROCEEDINGS OF GOVERNMENT OF KARNATAKA

**Subject:** Regarding Implementation of para 63 of Budget Speech of 2018-19, where in a grant of Rs.30 crore has been earmarked for transplantation of heart, kidney, liver etc., for poor patients.

**Read:**

- 1) Budget Speech of 2018-19 para 63.
- 2) File No.JDM/MDP/21/2018-19 from Commissioner, Health & Family welfare.
- 3) Cabinet note no. C 674/2018, Dated: 19/11/2018.


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### **Preamble:**

1. Hon'ble Chief Minister while presenting Budget for 2018-19, on 5<sup>th</sup> July, 2018 has announced at Para-63 has announced that "A grant of Rs.30 crore will be earmarked for transplantation of heart, kidney, liver etc., for poor patients". Many chronic illnesses related to heart, liver, pancreas, kidney, bone-marrow, lungs and small intestine are initially treated with non surgical procedures. But at the end stage, the transplantation of the affected organ becomes the last solution for saving the life of the patients and providing them with better quality of life. The organ is harvested either from a live donor or a brain dead patient. The cost of transplant surgeries is high, both in Government as well as Private hospitals. In post transplant, the recipient needs to take-immune-suppressants lifelong with regular follow up. The patients have to bear this expenditure from their own resources which is beyond the reach of the poor and even middle class patients, which affects the family as a whole.

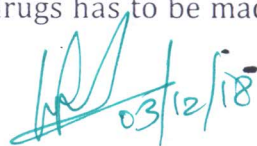
2. India's countrywide estimates suggest (no hard data available for the country or the state) that there are two lakh new patients with end stage kidney diseases every year. About 50,000 patients with heart failure need heart transplant annually and about 30,000 liver transplants are needed annually. However, only 8000 kidney transplants, around 1000 liver transplants and about 300-400 heart transplants are done across the country. The remaining patients cannot survive because transplantation is not affordable.

3. Similarly in Karnataka total number of patients registered for kidney transplants from cadaver is around 2000, for liver around 800, and about 200 for other organs. Out of this only around 200 kidney transplants and 50 liver transplants are occurring due to shortage of organs and high cost of transplant surgeries. In addition live related and live unrelated transplants account to another 300, where the cost of surgery is even higher. These patients also need to be financial supported.

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**Proposal:**

4. In Karnataka State, on an average 200 Kidney transplants and 50 Liver Transplants and around 10 Heart Transplants are being carried out every year. Among the hospitals, 3 Government Hospitals namely, the Institute of Nephro-Urology, PMSSY Hospital and Jayadeva Institute of Cardiology are conducting Kidney, Liver and Heart Transplants respectively. Presently about 30 transplants of kidney, 10 of liver and an occasional heart transplant are being conducted at these three Government Hospitals. Remaining transplants are being conducted at Private and Corporate Hospitals.
5. The budget allotment of Rs.30.00 Crore is proposed to meet the expenditure on transplant surgeries and post operative immune-suppression treatment for the recipients. The financial package for reimbursement to the hospitals may be based on the CGHS /KMA package rates for transplant surgeries to avoid overcharging by the private hospitals and resultant misuse of the scheme. Following amendment of KPME ACT and Rules 2018, Expert Committees will finalize the package rates for various transplant procedures and till such time CGHS/ KMA package rate will be adopted.
6. The Institute of Nephro-Urology in Bangalore, which is the only government hospital conducting kidney transplantation in the State, can carry out about 100 transplants in one year. Presently, only about 30 transplants are being conducted. As such all transplants involving live donors may be conducted at the Institute of Nephro-Urology for kidney, similarly, PMSSY hospital may handle liver transplant cases and Sri Jayadeva Institute of Cardiovascular Sciences & Research to handle heart transplants for the poor / BPL patients. However, if the capacity of these hospitals is exhausted, transplants may be pre-authorized in private hospitals.
7. In case, the donor is a brain dead person, the transplant can happen either in a government or private empanelled hospital as a single seniority list of the recipient is maintained by "Jeevasarthakathe" and that one has to wait for his or her turn for the organ. The private hospitals may be empanelled for transplant surgeries provided they agree to carry out transplants at the rates approved by the government for both deceased and live donor organ transplantation. The transplant from a cadaver donor is also permitted only for poor/BPL recipient under this scheme.
8. The recipients, who undergo transplantation, have to be on lifelong immunosuppression medication, the cost of which is about Rs. One lakh per patient per year initially which might reduce insignificantly over a period of time. Hence during subsequent years special provision for immunosuppressive drugs has to be made for all the beneficiaries every year continuously.

  
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