# Quarterly CMIS Bulletin April-Sept., 08



National AIDS Control Organisation (Department of AIDS Control) Ministry of Health & Family Welfare Government of India

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#### Foreword

National AIDS Control Program collects routine information on program components from all states and Union Territories from Blood Banks, Integrated Counseling and Testing Centres, STI/RTI Clinics, ART Centres, from NGO's implementing targeted interventions and Community Care Centres. This information is collected monthly in standard reporting formats across the country through a comprehensive software CMIS (Computerized Management Information System) which is installed in all State AIDS Control Societies. This routine data provides a wealth of information for decision making and day to-day management decisions for making program results more effective. CMIS is an important source of data which gives early warning on non-performances and issues.

The quarterly CMIS Bulletin aims to promote use of this information by the project directors and program managers of each component at National and state level for program management, strategy refinements and problem solving. This can also be used by SIMU at state and national level to closely monitor the program information, triangulate it with other data sources and facilitate evidence based programming.

There are issues associated with the routine data collection and limitations to what extent it can provide information. The analysis presented here also reflects some problems that need further inquiry through special studies and research. I am happy to mention that over a period of time, the information coming through CMIS has improved in terms of both quality and quantity. The work done by Strategic Information Management Unit at NACO in cleaning, analyzing and institutionalizing this bulletin is appreciated. I would like to specially acknowledge the contribution of Mrs. Pradnyz Paithankar, PO(M&E), Mr. Rajesh Kumar, TO(CMIS) and Ms. Sukhvinder Kaur, M&E Officer in bringing out this bulletin. I would also like to thank all divisional heads of NACO for critical review and feedback for improving the analysis.

(Dr. S. Venkatesh) Deputy Director General Department of AIDS COntrol

### List of Abbreviations

AIDS	Acquired Immunodeficiency Syndrome
ANC	Antenatal Clinic
ART	Anti Retroviral Therapy
AZT	Zidovudine
BS	Blood Safety
CMIS	Computerized Management Information System
CSW	Commercial Sex Worker
CCC	Community Care Centre
CD4	Cluster of Differentiation 4
CMV	Cytomegalovirus
d4T	Stavudine
DOTs	Directly Observed Treatment, Short-course (DOTS)
EFV	Effaviranz
FSW	Female Sex Worker
HBV	Hepatitis B Virus
HBC	Hepatitis C Virus
HIV	Human Immunodeficiency Virus
HRG	High Risk Group
ICTC	Integrated Counseling and Testing Centre
IEC	Information Education Communication
IDU	Injecting Drug User
IEC	Information Education Communication
LFU	Lost to Follow Up
M&E	Monitoring and Evaluation
MAC	Mycobacterium Avium Complex
MIS	Missed Treatment
MSM	Men Having Sex with Men
NACO	National AIDS Control Organization
NACP	National AIDS Control Program
NE	North East
NGO	Non Governmental Organization
NVP	Niverapine

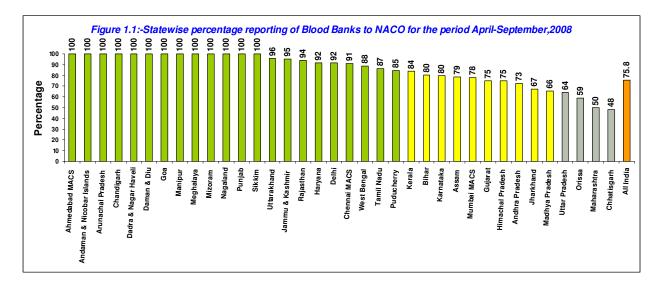
OI	Opportunistic Infections
ORW	Out Reach Worker
PCP	Pneumocystis Jiroveci Pneumonia
PE	Peer Educator
PPTCT	Prevention of Parent to Child Transmission
PLHA	Persons living with HIVAIDS
RTI	Reproductive Tract Infection
SACS	State AIDS Control Society
SIMU	Strategic Information Management Unit
STI	Sexually Transmitted Infections
TI	Targeted Intervention
TTI	Transfusion Transmissible Infections
UT	Union Territory
VDRL	Venereal Disease Research Laboratory Test
3TC	Lamivudine

#### Chapter-1

#### **Blood Safety**

#### Introduction

Blood safety program aimed at ensuring access to safe blood and blood products to all at a reasonable cost, adequate to meet the needs of all patients and transfused only when necessary. This is provided as part of a sustainable blood safety program within the existing health care system. Blood transfusion which is a crucial part of health delivery system, unfortunately can be a cause of dreadful transmissions of viruses like HIV. While the vast majority of HIV infections in India are attributed to the sexual route of transmission, transmission through infected blood product is a major preventable risk. Ensuring the widespread availability of safe and quality blood is a critical component of the National AIDS and Control Programme.

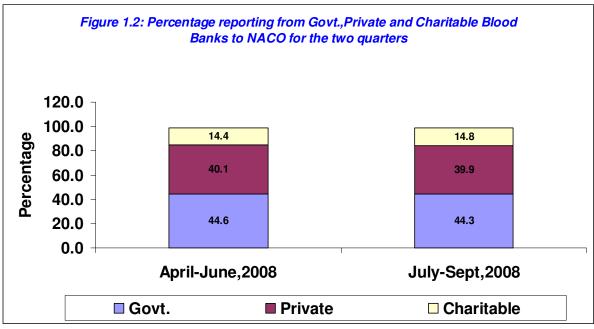


#### 1.1 Reporting Status

The all India reporting percentage of NACO supported as well other Blood Banks is 75.8 percent during the period April to September 2008(Number of total registered blood banks is 2213, including government, private and charitable. It is evident from the *figure 1.1* that All registered blood banks of Ahmedabad MACS, Andaman & Nicoabr Islands, Arunachal Pradesh, Chandigarh, Dadra and Nagar Haveli, Daman & Diu, Goa,

Manipur, Meghalaya, Mizoram, Nagaland, Punjab and Sikkim have reported during the period. The reporting from Lakshadweep and Tripura is yet to start.

The CMIS designated total number of blood banks includes Government (1081), Private (1053) and Charitable (361) blood banks. *Figure 1.2* highlights the proportion of reporting by type of blood bank among those reported in both quarters (April-June, 2008 and July-September, 2008).



\*NA is not highlighted the above figure

The All India Snap-shot of reporting is given in Table-1.1 below.

Type of Blood Bank	Total Registered	Total Reported	Percent Reporting
Government	1081	865	80.0
Private	1053	771	73.2
Charitable	361	289	80.1
Not available	69	19	27.5
Total	2,564	1,944	75.8

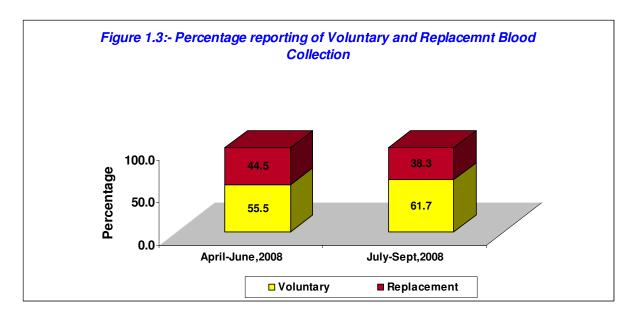
Table 1.1: Details of reporting units

Percentage reporting is highest among Government supported and charitable blood banks.

#### **1.2 Blood Collection: Voluntary vs. Replacement**

The total annual requirement of blood in India is 10 million units of blood while the total collection is about 6 million units. Voluntary donation is the considered to be safest form

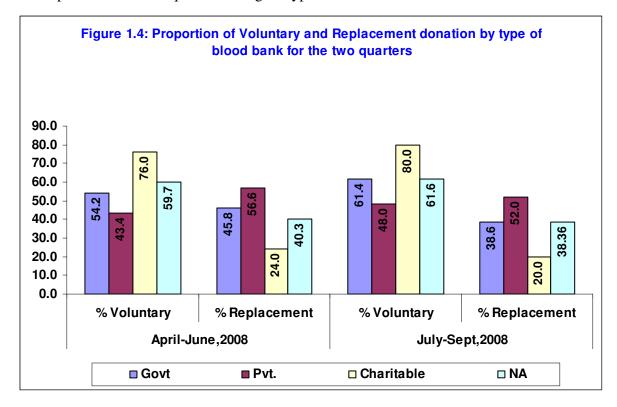
of the blood donation and thus systematically promoted through blood safety programme. Figure 1.3 shows the aggregated proportion of blood collection- Voluntary and Replacement



In the reporting period April to September 2008, total 34,07,673 units of blood is collected out of which 20,00,678 (58.7%) is through voluntary blood donation.

However, separate analysis for private, government and charitable blood banks shows variable performances. The percentage of voluntary blood donation is 57.97 percent in government blood banks, 45.70 percent in private blood banks and 78.14 percent in charitable blood banks (NA-Not available category is excluded from the analysis) for the period April-September, 2008. The performance of blood banks is given in Table 1.2.

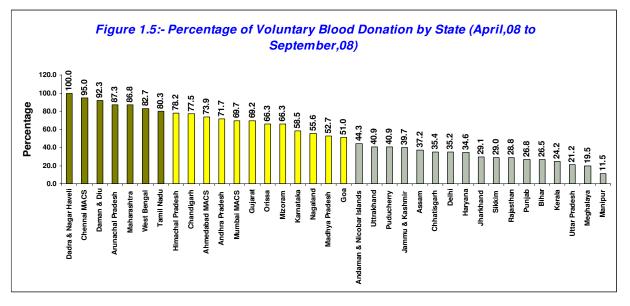
Table 1.2 : Performance of Blood Banks by type					
Type of Blood Bank	Total Reported	Total Collection	Percentage Voluntary Collection	Average Collection per Blood bank	
Government	865	1,414,218	57.97	1,635	
Private	771	1,154,923	45.70	1,498	
Charitable	289	825,182	78.14	2,855	
NA	19	13,350	61.88	703	
Total	1,944	3,407,673	58.71	1,753	



The quarter wise details of the same are shown in figure 1.4. Voluntary blood donation has improved in second quarter among all types of blood banks.

#### 1.3 Statewise distribution of Voluntary Blood Donation:-

The percentage of voluntary blood donation of all the states ranges from 11.5 percent in Manipur to 100 percent in Dadra and Nagar Haveli. The graph shows percentage of voluntary blood donation by states.



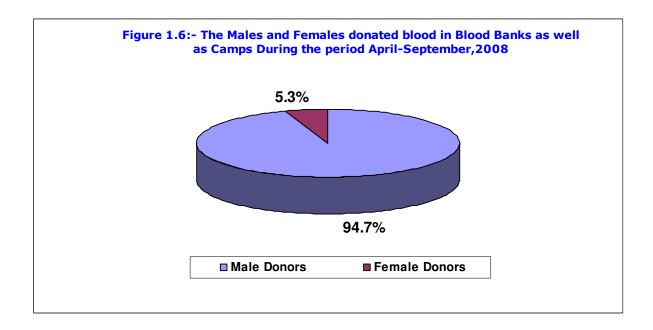
Apart from Chennai MACS, Daman and Diu, Arunachal Pradesh, Maharashtra, West Bengal and Tamil Nadu reported greater than 80 percent voluntary blood donation. Himachal Pradesh and Chandigarh have also achieved voluntary donation above 75 percent.

State-wise performance by state is given in table 1.3.

Table 1.3 : State wise details of blood collection				
State	Number of Reported BB	Total Blood Collection	Total units collected per blood bank	
Ahmedabad MACS	9	52,392	5,821	
Andaman & Nicobar				
Islands	2	3,294	1,647	
Andhra Pradesh	170	335,052	1,971	
Arunachal Pradesh	3	1,429	476	
Assam	52	68,934	1,326	
Bihar	49	35,243	719	
Chandigarh	4	37,470	9,368	
Chennai MACS	31	84,185	2,716	
Chhatisgarh	12	18,748	1,562	
Dadra & Nagar Haveli	1	1,694	1,694	
Daman & Diu	1	479	479	
Delhi	49	186,570	3,847	
Goa	8	7,398	925	
Gujarat	145	335,166	2,311	
Haryana	54	95,356	1,766	
Himachal Pradesh	13.5	5,066	375	
Jammu & Kashmir	20	25,299	1,265	
Jharkhand	31	53,102	1,713	
Karnataka	152	195,889	1,289	
Kerala	131.5	163,581	1,244	
Madhya Pradesh	82	110,124	1,343	
Maharashtra	153.5	275,875	1,797	
Manipur	3	10,321	3,440	
Meghalaya	6	3,287	548	
Mizoram	9	9,369	1,041	
Mumbai MACS	49	85,639	1,748	
Nagaland	8	2,982	373	
Orissa	51	62,020	1,228	
Puducherry	11	10,607	964	
Punjab	90	151,208	1,680	
Rajasthan	73	211,044	2,911	
Sikkim	3	1,278	426	
Tamil Nadu	239	264,734	1,108	
Uttar Pradesh	112	133,856	1,195	
Uttarakhand	23	28,793	1,252	
West Bengal	96	340,189	3,562	
All India	1944.5	3,407,673	1,752	

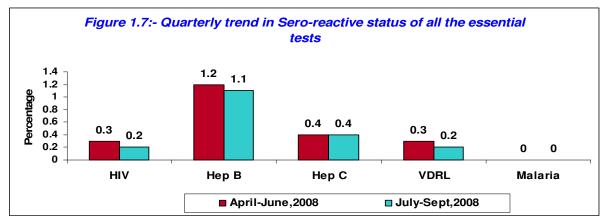
#### **1.4 Male-Female Distribution of Donors**

Figure 1.6 shows the gender distribution among donors during the period April-September, 2008. Number of female donors is very low at 5 percent.



#### **1.5 Sero - Reactive Status :**

The sero-reactivity status includes all transfusion transmissible Infections (TTIs) i.e. HIV, Hep. B, Hep. C, VDRL and Malaria. Figure 1.7 shows variations between the 2 quarters in the percentage reporting of all the essential tests performed at a blood banks for all the states

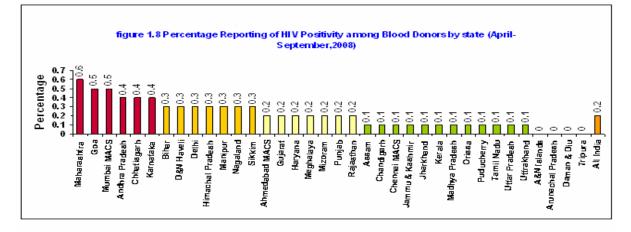


In the quarters, the positivity rates for HIV ranges between 0.3 to 0.2. High rates are reported from Hepatitis B between 1.2 to 1.1 followed by the rates of Hepatitis C and VDRL and Malaria reported no positivity at all India Level.

Out of total 195 A and B category districts, 180 districts have blood banks registered and reporting in CMIS. Positivity status on all markers for category A & B districts is in Annex-I.

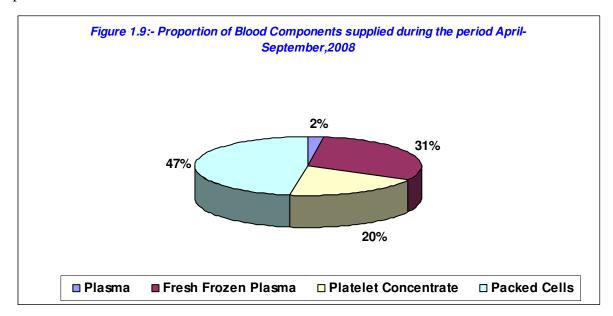
#### **1.6 The statewise Positivity trends:**

The statewise graph of HIV sero-reactivity shows all India sero-reactivity of 0.2 percent. Maharashtra has reported highest percent positivity of 0.6 percent in the reporting period. States having higher reactivity than all India are Goa, Mumbai MACS, Andhra Pradesh, Chhatisgarh, Karnataka, Bihar, D&N Haveli, Delhi, Himachal Pradesh, Manipur, Nagaland and Sikkim



#### **1.7 Proportion of Blood Components supplied**

The percentage of blood components supplied in the reporting quarter are 47 percent packed cells, 31 percent Fresh Frozen Plasma, 20 percent platelet Rich plasma and 2 percent Plasmas.



#### **Chapter-2**

#### **Integrated Counseling and Testing Centre**

#### Introduction

Integrated Counseling and Testing Center is a place where a person is counseled and tested for HIV on his/ her own freewill or as advised by a medical provider. These centers can be entry points for linking the diagnosed people to HIV Care services. The analysis is based on the 4,270 ICTC's out of 4,779 registered in CMIS during the period April-September 2008.

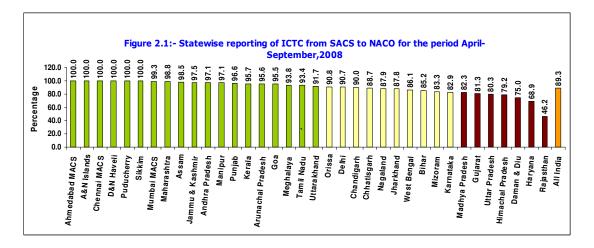
The all India details of clients undergoing Pre test, HIV Testing and Post test details at ICTC's for the period April-September, 08 are summarized in the table 2.1 *Table 2.1 : Service details at ICTC (April- Sept, 2008)* 

	Pre -Test	Testing for	Post test	Testing
	Counseling	HIV	Counseling	Positive
Client Initiated (GC*)	12,97,562	11,27,453	10,65,136	70,825
Provider initiated (GC)	15,10,248	14,13,474	13,50,439	69,108
Pregnant women (ANC)	22,61,158	20,74,582	19,25,171	9,790
Pregnant Women (Direct	16,55,536	1,26,556	1,16,622	628
Delivery)				
Total	67,24,504	47,42,065	44,57,368	1,50,351

\*GC- General Clients

#### **2.1 Reporting Status**

Overall reporting of ICTC is 89 percent for the period April-Sptember,2008. The states of Tripura and UT of Lakshadweep have not reported during the period. *Figure 2.1* shows the detailed percentage of reporting information from all the states and Union Territories of India.



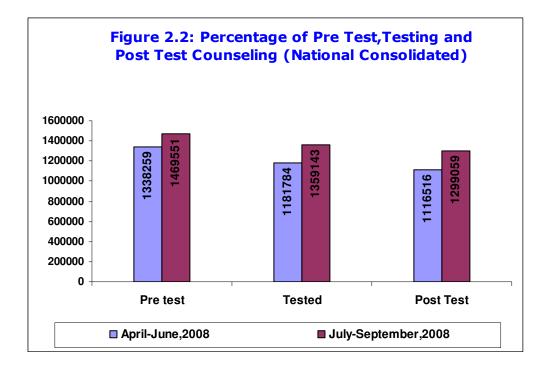
The reporting from Ahmedabad MACS, Andaman and Nicobar Islands, Chennai MACS, D&N Haveli, Puducherry and Sikkim is 100 percent. The lowest reporting is from Rajasthan (46.2%).

#### **2.2 ICTC General Clients**

ICTC data gives the trends in percentage positivity among the clients coming for HIV testing by gender, age, and type of clients (Client initiated or provider initiated) along with counseling details.

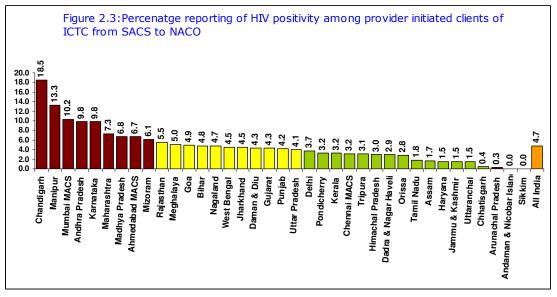
#### 2.2.1 Pre and Post test counseling

*Figure 2.2* shows the information related to pre test and post test counseling. The number of clients accessing the services shows almost similar trends in both quarters. Of all the clients accessing ICTC's who have undergone pre-test counseling, 90 percent have undergone testing and 95 percent of the tested clients received post-test counseling. The figures are slightly higher in second quarter.



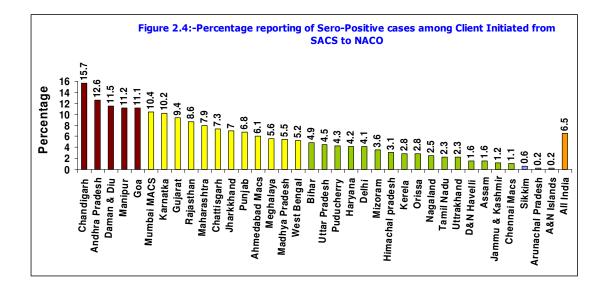
#### 2.2.2 Sero-positivity among clients of ICTC

Andaman and Nicobar Islands and Arunachal Pradesh have reported the lowest 0 percent and 0.1 percent sero-positivity respectively among ICTC clients who are referred by medical practioners (provider initiated clients). Manipur has reported the highest of 13.1 percent postivity followed by Mumbai MACS at 11.1 percent, Andhra Pradesh 10.7 percent and Karnatka 10.1 percent. Fifteen states showing positivity higher then the national average (5 percent) among provider initiated clients are shown in *Figure 2.3*.



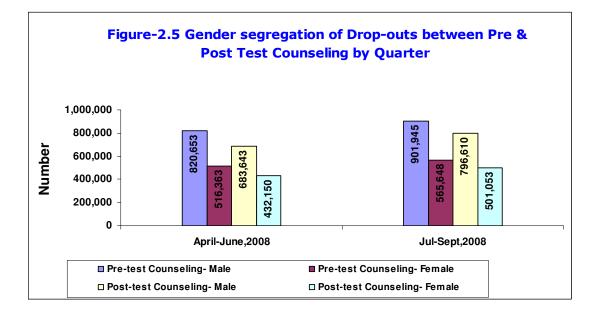
#### 2.2.3 Sero-postivity among direct walk-in

*Figure 2.4* highlights the Sero-positivity among direct walk-in (Client initiated) clients of ICTC of all the states and Union territories of India. These are the client who are self motivated ( Or are motivated by friend / relative/ media etc) to undergo HIV test at the ICTC. Overall positivity is higher among direct walk-in clients as compare to provider initiated clients.



#### 2.2.4 Gender wise accessibility of services for pre and post test counseling

Total 28, 04,609 general clients have undergone pre test counseling and 24,13,456 have availed post test counseling services of ICTC for the reporting period (April-September, 2008). *Figure 2.5* shows the male and female accessibility trends for the reporting period. Proportion of women accessing services at ICTC is about 38 percent in both quarters.



#### 2.2.5 Route of transmission-by gender

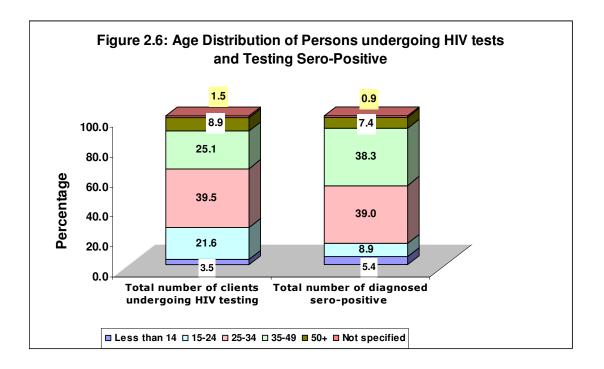
*Table 2.2* shows gender wise percentages of various routes of transmission among the reported HIV positive clients. it has been observed that the main route of transmission is through heterosexual contacts among both males (86 percent) and females (87 percent) followed by Parent to child transmission (for children) which is nearly 6 percent in each category.

Table 2.2: Route of Transmission of HIV Positive males and Females inApril-September,2008				
Route of Transmission	Males (%)	Females (%)		
Heterosexual	85.5	87.1		
Parent to child (for children)	5.6	6.4		
Not specified / unknown	4.6	4.3		
Homosexual/bisexual	1.5	0.5		
through blood and blood products	1.0	1.2		
Through infected needles and syringes	1.7	0.6		

#### 2.2.6 Age distribution among tested and positives

The following figure shows the composition of persons undergoing HIV tests and testing sero-positive by age.

As reported the highest numbers of clients who were tested (39.5) and found positive were (39 percent) among the age group 25-34 .Twenty five percent of the clients who had undergone HIV testing were in the age group of 35-49 years and 38 percent of them testing positive were in this age group.



#### 2.3 Services at PPTCT

Table 2.3 shows the percentage of ANC cases registered, Pre-Counseled, tested for HIV and receiving post test counseling among all the registered ANC cases at ICTC (Pregnant women)

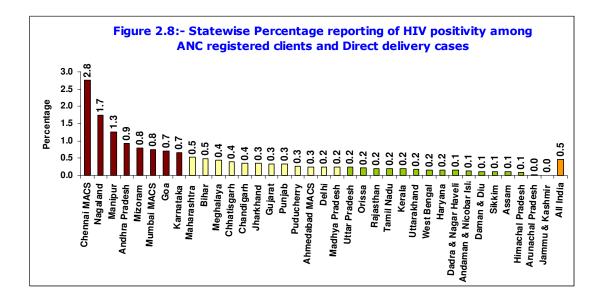
**2.3.1** Among reported, 30 states have 80 percent and above registered ANC cases undergoing HIV testing. Ahmedabad MACS, Andaman and Nicobar Islands, Chandigarh, Dadra and Nagar Haveli, Daman and Diu, Goa, Mizoram and Sikkim reported 90 percent registered cases undergoing HIV testing. The same is lowest in Uttar Pradesh.

#### Table 2.3 :- Percentage of ANC cases Pre test counseled, tested for HIV and receiving post test counseling among all registered ANC cases at ICTC (PPTCT) for the period April-September.2008

	Se	ptember,2008			
States	ANC registration	Pre test Counseled	% of ANC counseled among registered	New ANC accepted HIV testing	% of new ANCs accepted HIV test
Ahmedabad MACS	14,568	12,142	83	12,138	100
Andaman & Nicobar Islands	3,210	2,874	90	2,874	100
Andhra Pradesh	293,487	284,601	97	274,136	96
Arunachal Pradesh	3,789	3,674	97	3,204	87
Assam	44,784	38,153	85	34,020	89
Bihar	90,919	45,795	50	31,020	68
Chandigarh	11,403	10,642	93	10,679	100
Chennai MACS	26,193	26,193	100	25,801	99
Chhatisgarh	14,175	7,502	53	7,019	94
Dadra & Nagar Haveli	906	857	95	857	100
Daman & Diu	831	831	100	831	100
Delhi	138,819	67,909	49	63,457	93
Goa	5,918	5,588	94	5,563	100
Gujarat	118,496	105,650	89	101,185	96
Haryana	46,680	35,385	76	33,104	94
Himachal Pradesh	9,506	6,656	70	6,225	94
Jammu & Kashmir	63,151	10,924	17	10,659	98
Jharkhand	15,879	11,048	70	9,200	83
Karnataka	212,898	212,898	100	207,140	96
Kerala	53,728	49,680	92	49,341	99
Madhya Pradesh	86,025	31,731	37	24,824	78
Maharashtra	390,726	391,141	100	360,682	92
Manipur	22,686	19,052	84	17,721	93
Meghalaya	5,002	1,417	28	908	64
Mizoram	7,565	6,566	87	6,564	100
Mumbai MACS	53,068	51,638	97	49,814	96
Nagaland	6,478	5,964	92	5,725	96
Orissa	73,730	51,186	69	31,611	62
Puducherry	25,880	5,432	21	5,100	94
Punjab	42,496	29,637	70	28,643	97
Rajasthan	101,093	72,469	72	56,109	77
Sikkim	2,916	2,711	93	2,712	100
Tamil Nadu	478,981	477,253	100	466,977	98
Uttar Pradesh	64,547	48,941	76	28,673	59
Uttarakhand	37,400	13,357	36	12,003	90
West Bengal	142,544	110,258	77	88,195	80
All India	2,710,044	2,261,158	83	2,074,745	92

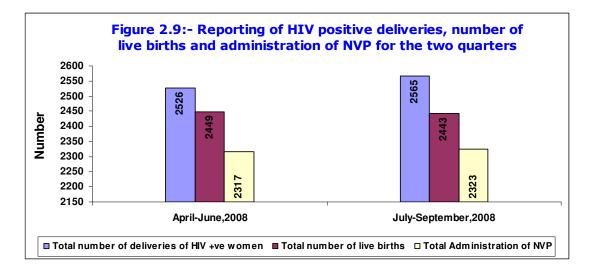
#### 2.3.2 HIV Positivity among PPTCT Clients:

The PPTCT clients are segregated in two categories ANC registered pregnant women and those who come directly in labour. *Figure 2.8* shows the overall percent positivity reported at ICTC (for both ANC and Direct delivery cases) as 0.5 in the reporting period. Chhennai MACS, Nagaland and Manipur, Andhra Pradesh, Mizoram, Mumbai MACS, Goa and Karnataka have reported positivity more than the national average.



## **2.3.3** Proportion of Positive deliveries, Live births and administration of Navirapine (NVP)

*Figure 2.9* shows the detailed percentage of reporting information fro all the states and union territories of India. Out of total reported positive deliveries at the institutions, 96 percent were live births and among the live births, 94.8 percent Mother –baby pair received Nivarapine. The number of pregnant women detected positive at ICTC during the reporting period were 10, 418. The gap is mainly attributable to deliveries at places other than the same institutions, including home delivery.



Proportion of Mother Baby pairs administered NVP is similar in both the quarters.

The HIV positivity among ICTC clients; general and pregnant women for category A and B districts are at Annex- II & III.

#### Average Monthly tests per ICTC:

The averages are calculated for General as well as Pregnant women for the period April-September, 2008.

Table 2	Table 2.4 State wise average monthly tests at ICTC					
S.NO.	Reporting unit State/UT/MACS	Number of ICTC	Total Tested	Average Monthly Tests per ICTC		
1	Ahmedabad MACS	16	22,574	1,411		
2	Andaman & Nicobar			889		
	Islands	13	11,551			
3	Andhra Pradesh	660	558,563	847		
4	Arunachal Pradesh	33	10,901	335		
5	Assam	66	61,616	934		
6	Bihar	179	97,207	543		
7	Chandigarh	9	20,124	2,236		
8	Chennai MACS	42	86,804	2,067		
9	Chhatisgarh	47	22,017	468		
10	Dadra & Nagar Haveli	1	3,301	3,301		
11	Daman & Diu	3	1,266	422		
12	Delhi	78	147,798	1,895		
13	Goa	11	13,233	1,260		
15	Gujarat	234	216,685	926		
16	Haryana	57	79,087	1,400		
17	Himachal Pradesh	19	16,063	845		

18	Jammu & Kashmir	20	25,953	1,331
19	Jharkhand	43	24,329	566
20	Karnataka	472	400,260	849
21	Kerala	101	92,341	919
22	Madhya Pradesh	65	50,183	772
23	Maharashtra	598	700,673	1,173
24	Manipur	50	27,320	552
25	Meghalaya	8	1,519	203
26	Mizoram	20	16,200	810
27	Mumbai MACS	74	123,213	1,676
28	Nagaland	55	25,941	476
29	Orissa	119	83,435	701
30	Puducherry	7	16,784	2,398
31	Punjab	57	74,942	1,315
32	Rajasthan	72	117,281	1,629
33	Sikkim	13	7,040	542
34	Tamil Nadu	741	1,320,184	1,782
35	Uttar Pradesh	151	95,705	634
36	Uttarakhand	33	28,672	869
37	West Bengal	109	141,300	1,302
	All India	4,270	4,742,065	1,111

#### **Chapter-3**

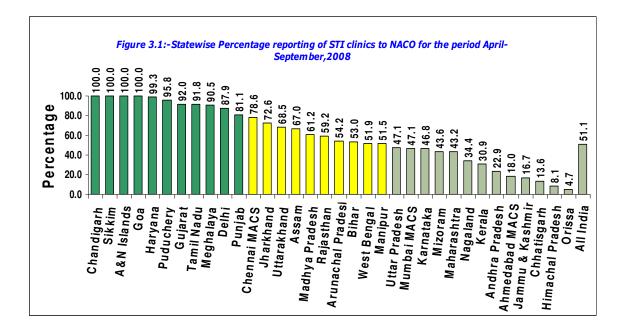
#### Sexually Transmitted Infections/Reproductive Tract Infection

#### Introduction

Early diagnosis and effective treatment of STI/RTI can significantly reduce the transmission of HIV. Treatment seeking behavior in case of STI/RTIs forms an important component in the over all STI/RTI management and also towards the significant curb of HIV/AIDS.

#### **3.1 Completeness of reporting:**

This analysis is based on all STI clinics numbering 621 registered in CMIS for the states and Union territories of India for the period April-September, 2008.Overall reporting from STI clinics is comparatively low at 51.1 percent in the reporting period. The reason for this may be that states like Tripura and UT of Dadra and Nagar Haveli, Daman and Diu, and Lakshadweep have not reported in CMIS during the reporting period and the states such as Andhra Pradesh, Ahmedabad MACS, Jammu & Kashmir, Chatisgarh, Himachal Pradesh and Orissa reported low percentage of less than 30 percent.



#### 3.2 Utilization of STI/RTI Clinic Services:

Eighty percent of the patients who accessed and availed STI/RTI clinic services were from the clinics located at 9 states and MACS-Uttar Pradesh, Gujarat, Tamil Nadu,

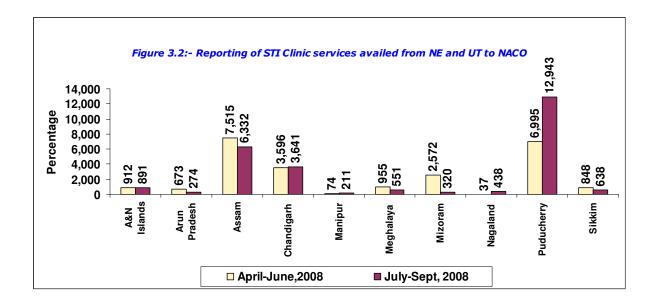
Jharkhand, (Mumbai MACS), Haryana, Maharashtra (Chennai MACS), Kerala, Punjab and Rajasthan

UTs)	or STERT Chine Se	er vices in muta (Exclu		
States	No. of Persons April-June,2008	States	No. of Persons July-Sept, 2008	
Uttar Pradesh	2,77,608	Uttar Pradesh	1,35,087	
Tamil Nadu	49,984	Gujarat	99,810	
Gujarat	28,660	Tamil Nadu	63,716	
Jharkhand	18,131	Jharkhand	24,775	
Mumbai MACS	17,699	Maharashtra	16,882	
Chennai MACS	12,656	Haryana	15,689	
Haryana	12,223	Mumbai MACS	14,222	
Maharashtra	10,542	Chennai MACS	12,453	
Kerala	9,811	Kerala	8,215	
Bihar	8,022	Punjab	8,065	
Punjab	7,284	Rajasthan	7,466	
Rajasthan	6,408	Madhya Pradesh	6,887	
Himachal Pradesh	6,321	West Bengal	5,484	
West Bengal	5,593	Himachal Pradesh	5,430	
Madhya Pradesh	5,236	Uttarakhand	4,070	
Delhi	4,037	Bihar	3,714	
Karnataka	2,601	Karnataka	3,700	
Ahmedabad MACS	1,075	Delhi	3,305	
Uttarakhand	908	Ahmedabad MACS	1,005	
Goa	475	Goa	540	
Chhatisgarh	308	Orissa	309	
Jammu & Kashmir	291	Chhatisgarh	308	
Orissa	216	Andhra Pradesh	231	
Andhra Pradesh	0	Jammu & Kashmir	227	

Table 3.1 Utilization of STI/RTI Clinic Services in India (Excluding NE and

The clinics at Uttar Pradesh have reported the highest utilization of services at STI/RTI designated clinics in both the Quarters. Forty four percent of utilization of clinic services across the country is reported by Uttar Pradesh. The utilization of services of clinics at Gujarat, Tamil Nadu, Jharkhand, Maharshtra, Haryana, Mumbai MACS, Chennai MACS, Punjab, Rajasthan, Madhya Pradesh, Uttarakhand, Karnataka, Goa, Orissa, and AP states have shown an increase during second quarter (July-Sept,2008) when compared with first (April-June,2008). While other states have shown a decrease in utilization of services of STI/RTI clinics during second quarter (July-Sept, 2008) when compared with first (April-June,2008)

Among North East states and union Territories of India, Puducherry and Assam have shown the highest reporting in utilization of STI/RTI Clinic services. Due to non reporting Dadra and Nagar Haveli, Daman and Diu, Lakshadweep and Tripura are excluded from the analysis.



### **3.3** Proportion of symptomatic patients among total new attendees at STI/RTI/RTI Clinics

Not every STI/RTI clinic attendee has an STI/RTI, many have phobia (Venerophobia) and seek consultation. It restores confidence, reduces self and quackery treatment and make them aware about not only STI/RTI/RTI but also on HIV/AIDS and about safer sexual practices.

If the community has confidence on the quality of services offered by clinic then it is directly reflected in the number accessing the services. Observing the proportion of symptomatic among the new attendees reflects how well the clinic is oriented towards STI/RTI services and the confidence of patients attending the clinics.

The national average of symptomatic tends to be about 40 % (2003-06) and slowly it is declining and currently it is 36 percent. This may be due to reducing infection among reservoir or increased condom usage or behavior change and safe sex practices.

Chhatisgarh and Jammu & Kashmir reported that 100 percent of clinic new attendees were symptomatic for the period April-September; 2009.It could be due to selective reporting or poor quality of data.

quarters of 2008-09	April-	
States	June,2008	July-Sept,2008
Chhatisgarh	100.0	100.0
J&K	100.0	100.0
Manipur	100.0	97.3
Nagaland	100.0	68.9
Ahmedabad MACS	90.6	42.1
Chennai MACS	90.4	92.8
Rajasthan	87.4	74.0
Chandigarh	85.6	84.9
Madhya Pradesh	84.5	91.1
Karnataka	83.1	82.3
Mizoram	81.7	91.9
Assam	81.2	83.3
Bihar	80.1	73.5
Punjab	77.3	54.1
Orissa	67.8	86.1
A&N Islands	60.0	64.2
Meghalaya	60.0	77.8
Puducherry	57.9	62.4
Goa	53.1	59.3
Gujarat	52.8	17.0
Tamil Nadu	50.7	48.3
Haryana	48.1	35.6
Mumbai MACS	47.9	39.4
Sikkim	47.9	77.7
Himachal Pradesh	46.2	51.0
Arun Pradesh	42.4	100.0
Delhi	33.5	37.5
Uttarakhand	32.3	41.4
Jharkhand	<mark>27.5</mark>	23.3
Uttar Pradesh	<mark>25.9</mark>	27.0
Maharashtra	<mark>26.0</mark>	<mark>18.8</mark>

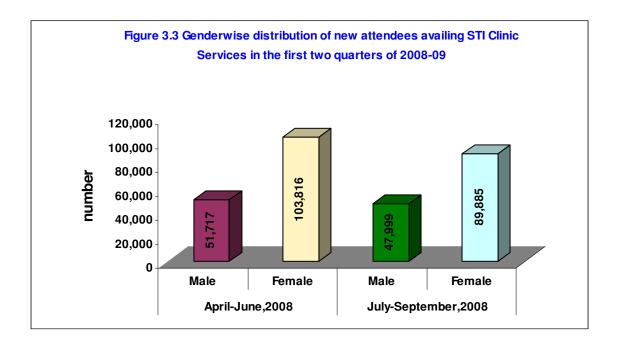
 
 Table3.2: State- wise proportion of symptomatic cases out of new
 attendees at STI/RTI/RTI clinic during each of the first two

Kerala	<mark>3.0</mark>	<mark>3.5</mark>
Andhra Pradesh	<mark>0.0</mark>	<mark>63.4</mark>
All India	37.4	33.9

Jharkhand, Uttar Pradesh, Maharshtra and Kerala reported less than national average in both the quarters of 2008-09 and Delhi and Uttarakhand did so in the first quarter of 2008-09

#### 3.4 New Male and Female attendees at designated STI/RTI Clinics:

The number of new male and female STI/RTI clinic attendees has been shown to be sensitive indicator of sexual transmission trends. Figure 3.3 shows less number of males and females attending the STI/RTI clinics in second quarter as compared with the first quarter, however number of females are exceeding in accessing the clinics as compared to males in both the quarters



Male STI/RTIs are typically of acute onset and frequently symptomatic. Male STI/RTI patients frequently report contact with sex workers, thus male STI/RTI incidence is an indirect measure of the effectiveness of targeted prevention efforts

clinics during the period April-September,2008		
States	April-June,2008	July- September,2008
Uttar Pradesh	23,668	15,342
Gujarat	6,749	6,560
Tamil Nadu	5,753	<mark>8,484</mark>
Bihar	2,051	1,160
Assam	1,424	1,210
Maharashtra	1,193	<mark>1,391</mark>
Punjab	1,141	<mark>1,265</mark>
Chennai MACS	963	1,077
Madhya Pradesh	948	<mark>1,507</mark>
Rajasthan	945	985
Haryana	901	1,207
Jharkhand	873	<mark>1,656</mark>
Mumbai MACS	809	435
Karnataka	578	730
Himachal Pradesh	556	729
West Bengal	545	830
Delhi	486	417
Chandigarh	418	520
Ahmedabad MACS	280	188
Andaman & Nicobar Islands	214	191
Meghalaya	162	163
Kerala	144	116
Sikkim	139	217
Jammu & Kashmir	133	103
Goa	124	236
Uttarakhand	123	396
Puducherry	87	203
Arunachal Pradesh	83	87
Orissa	70	169
Mizoram	68	69
Chhatisgarh	64	85
Manipur	14	62
Nagaland	11	128
Andhra Pradesh	0	81
All India	50,495	47,999

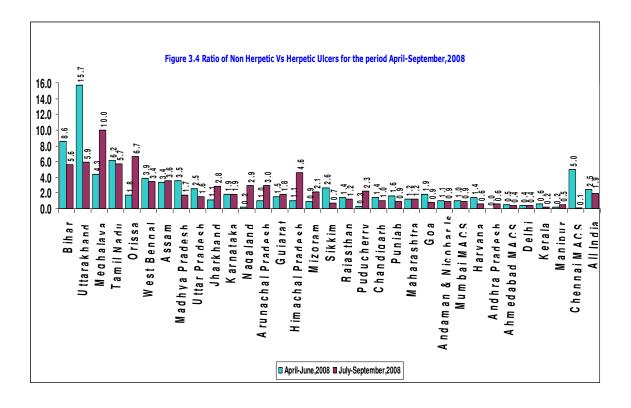
 Table 3.3 State-wise number of new male attendees at the STI/RTI clinics during the period April-September,2008

Uttar Pradesh has reported the highest number of new male attendees in both the quarters. During the second quarter (July-September,2008) male patients visits increased phenomenally at Tamil Nadu, Jharkhand and Madhya Pradesh. In rest of states, there is not much wide variations between first and second quarter

#### 3.5 Ratio of Non-Herpetic Vs Herpetic Genital Ulcer

Figure 3.7 shows the ratio of Non Herpetic Genital Ulcer (bacterial genital ulcer) Vs Herpetic Genital ulcer (Viral ulcer) for all the states and union territories of India. National average signifies high bacterial genital ulcers which is typical of low HIV prevalence settings. Meghalaya, Orissa, Assam, Jharkhand, Nagaland, Himachal Pradesh, Mizoram, Puducherry and Manipur states are showing high viral ulcers as compared to bacterial ulcers. While Bihar, Uttarakhnad, Tamil Nadu, West Bengal, Madhya Pradesh, Uttar Pradesh, Sikkim, Rajasthan, Chandigarh, Punjab, Goa, Haryana, Kerala are showing increasing prevalence of bacterial genital ulcers.

Chhatisgrah and Jammu and Kashmir are reporting zero in both the quarters are not reflected in the figure.



#### 3.6 Ratio of Non-Herpetic Genital Ulcers VS Urethral Discharge

Table 3.4 highlights the ratio of Non-Herpetic Genital Ulcer Vs Urethral Discharge among new male attendees in STI/RTI clinics in different states. The National Average of 1:1 points to possible inadequacy of IEC efforts, low condom usage, and low adoption of safer sexual practices.

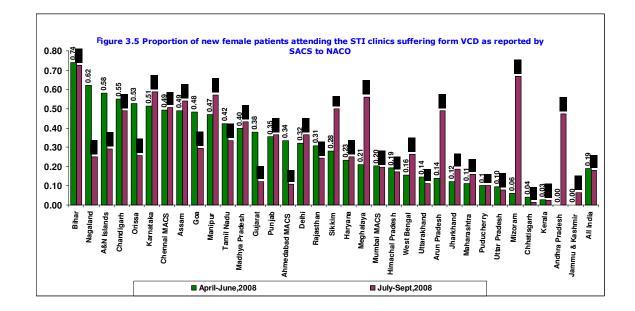
The table shows that in the states like Tamil Nadu, Karnataka, Rajasthan, Haryana, Assam, Kerala, Orissa, Uttarakhand, Madhya Pradesh, Delhi, Bihar, Mizoram, Puducherry, Arunachal Pradesh, Andhra Pradesh and Nagaland have more bacterial genital ulcers among males than urethral discharge, but in these cases the true bacterial ulcers or mixed infections need to be looked into. Rest of the states showed high prevalence of short incubating urethral discharge than bacterial genital ulcers.

Table 3.4: State-wise ratio of Non Herpetic Genital Ulcer Vs Urethral				
Dischar	Discharge among new male STI/RTI clinic attendees.			
S. No.	States	April-	July-	
5.110.		June,2008	September,2008	
1	Tamil Nadu	4.3	4.5	
2	Maharashtra	2.4	2.3	
3	Karnataka	2.2	3.0	
4	West Bengal	2.1	1.7	
5	Ahmedabad MACS	1.9	1.6	
6	Sikkim	1.9	0.4	
7	Himachal Pradesh	1.9	0.7	
8	Rajasthan	1.8	2.1	
9	A&N Islands	1.7	1.6	
10	Punjab	1.7	1.4	
11	Haryana	1.6	2.6	
12	Meghalaya	1.4	1.0	
13	Assam	1.4	1.7	
14	Kerala	1.1	1.8	
15	Mumbai MACS	1.0	1.1	
16	Uttar Pradesh	1.0	1.0	
17	Orissa	1.0	4.0	
18	Uttarakhand	0.8	1.7	
19	Madhya Pradesh	0.8	1.3	
20	Delhi	0.7	0.9	
21	Bihar	0.6	0.7	
22	Chandigarh	0.6	0.3	
23	Mizoram	0.3	1.0	
24	Jharkhand	0.3	0.2	

25	Manipur	0.3	2.0
26	Puducherry	0.2	0.9
27	Arunachal Pradesh	0.2	0.3
28	Gujarat	0.2	0.2
29	Goa	0.2	0.1
30	Chennai MACS	0.1	0.1
31	Andhra Pradesh	0.0	1.0
32	Chhatisgarh	0.0	0.0
34	Jammu & Kashmir	0.0	0.0
35	Nagaland	0.0	2.3
	All India	1.0	0.9

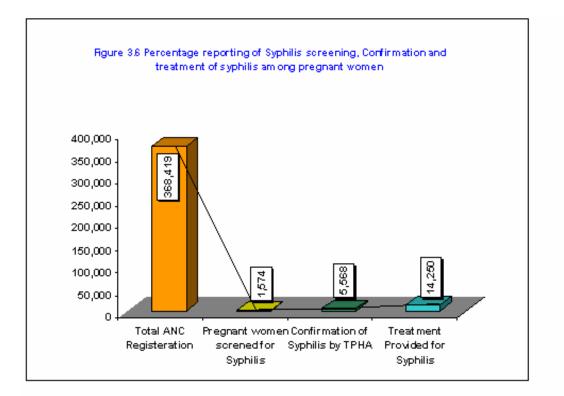
### **3.7** Proportion of Females suffering from Vaginal Cervical Discharge out of the total new females attending STI/RTI Clinic

Figure 3.5 shows the proportion of new female patients suffering from Vaginal Cervical discharge and attending the designated STI/RTI clinics for the period April-September, 2008. There is no significant trend among the two quarters. About 20 percent females are suffering with VCD during the reporting period. It may mean that providers are missing many cases due to not conducting detailed internal exams.



#### 3.8 Syphilis Screening, Confirmation and Treatment among Pregnant Women

Figure 3.10 shows the total ANC Registration of Pregnant women, number of women who underwent RPR/VDRL screening, confirmation with TPHA and Treatment for syphilis for the period April-September, 2008. It is very evident from the figure that the women are missing their syphilis screening and diagnosis and are directly going for treatment of syphilis.



#### Chapter-4

#### **Chapter 4**

#### **Targeted Intervention**

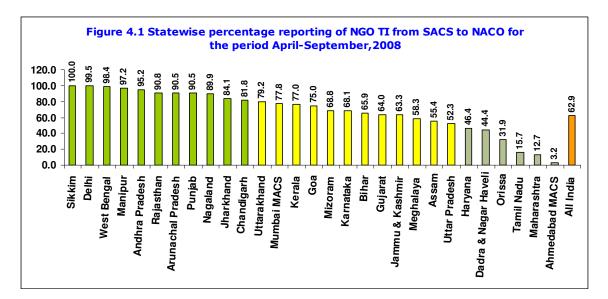
#### Introduction:

The HIV epidemic in the India has been categorized as a concentrated form of an epidemic. HIV prevalence among high risk population has been observed to be persistently high in comparison to the general population. Therefore one of the objectives of NACP III is proposed to be achieved through Prevention of new infections in high risk groups and general population through:

a) Saturation of coverage of high risk groups with targeted interventions (TIs)

b) Scaled up interventions in the general population

Targeted Intervention (TI) is one of the activities undertaken for high risk groups through NGOs. The following analysis is based on the monthly reports submitted by 560 NGO's implementing targeted intervention through SACS during the period April-Spetember, 2008.



#### **4.1 Reporting Status:**

The figure 4.1 shows the detailed percentage reporting from NGO (TI). The overall reporting from NGO (TI) is 63 percent for the period April-September, 2008. The reporting percentage ranges from 100 percent in Sikkim to 12.7 percent in Maharshtra.

Delhi, West Bengal, Manipur, Andhra Pradesh, Rajasthan, Arunachal Pradesh, Punjab and Nagaland have achieved reporting percentage of 90 percent and above. Among low reported are the states like Orissa (31.9 percent), Tamil Nadu (15.7 percent), Maharashtra (12.7 percent), Ahmedabad MACS (3.2) and zero reporting from Chhatisgarh, Himachal Pradesh, Madhya Pradesh, Puducherry and Tripura for the period April-September, 2008.

#### 4.2 Outreach Coverage:

This section deals with the extent to which identified core groups i.e : FSW, MSM and IDU and bridge population like truckers and migrant labourers were registered or contacted by the outreach worker and peer educators to reduce their vulnerability to HIV/AIDS through use of various methods of prevention..

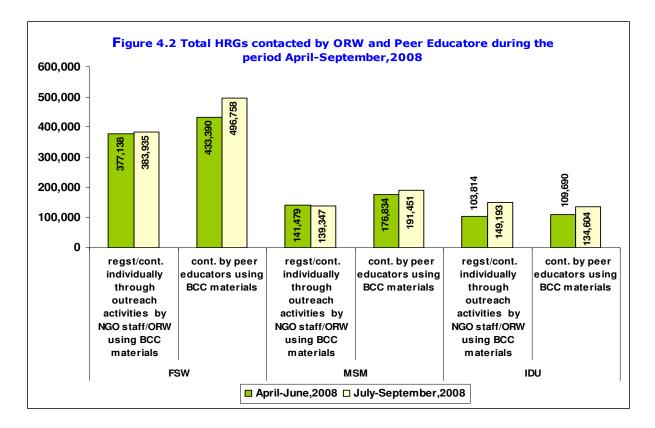
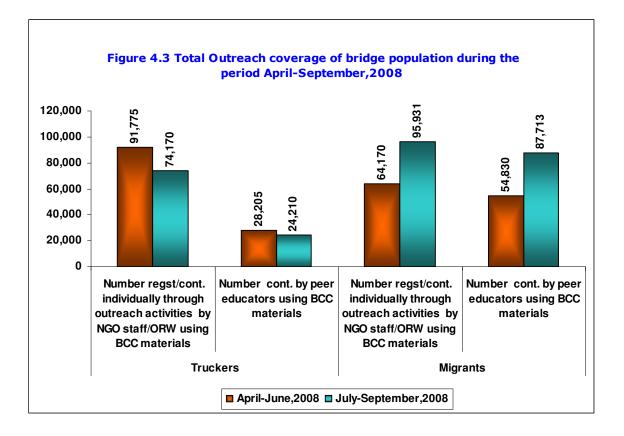


Figure 4.2 highlights the total number of core groups- FSW, MSM and IDU contacted through outreach activities contacted by the ORW and peer educators are the same in the two quarters.

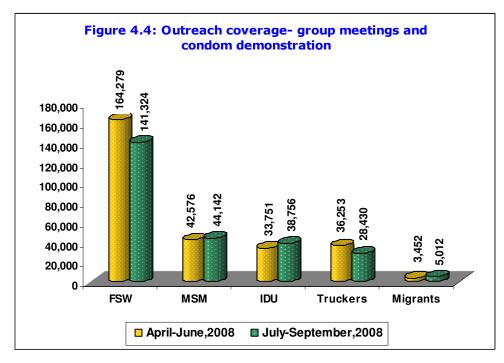


The outreach coverage in case of bridge population is shown in figure 4.3. In case of truckers reported contacts by ORW are higher in number than by peer educators. The number of HRG contacts/registrations by ORW and peer educators are segregated as new and repeat contacts/registrations which is shown in the table 4.1 for the two quarters (April-June, 2008 and July-September, 2008)

Table 4.1:-Outreach Coverage									
	April-June	e,2008	July-September,2008						
Type of HRG	Number of new registrations/contacts of individually through outreach activities by NGO staff/ORW using BCC materials	Number of new registrations /contacts by peer educators using BCC materials	Number of new registrations/contacts of individually through outreach activities by NGO staff/ORW using BCC materials	Number of new registrations /contacts by peer educators using BCC materials					
	April-June,	,2008	July-Sept,2008						
FSW	60,867	43,387	45,478	55,099					
MSM	14,881	19,609	10,984	15,950					
IDU	10,924	11,192	11,736	12,942					
Truckers	70,280	24,271	60,746	21,918					
Migrants	34,824	13,095	56,379	18,067					

### 4.3 Group meetings and condom demonstration

The figure 4.4 shows the number of meetings held with communication aids and condom demonstration for FSW, MSM, IDU, Truckers and Migrants for the two quarters.



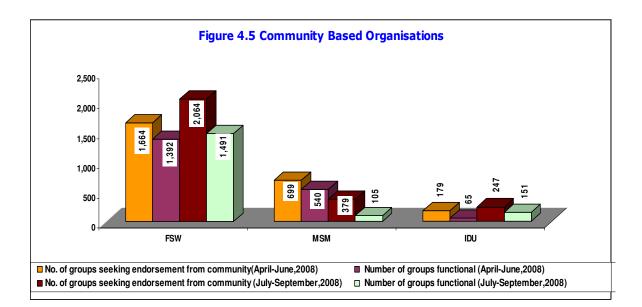
### 4.4 IEC Activities undertaken by NGO TI

Table 4.2 highlights the various IEC activities carried out by NGOs (TI) towards FSW, MSM, IDU, Truckers and Migrants for the two quarters. Total 10,350 events were conducted during April-June, 2008 and 11,886 events during July-September, 2008 in which 782,472 (360,282 during first quarter and 422,191 during second quarter) FSW, MSM, IDU, truckers and migrants participated at HRG locations.

Table 4.2 IEC activities conducted during the period April-September,2008								
	April-	June,2008	July-Se	ptember,2008				
Activities	Number of events	Number of participants attended	Number of events	Number of participants attended				
Awareness Camps	2,569	91,691	2,630	84,616				
Health Camps	674	29,745	1,145	43,123				
Street Plays	699	48,470	688	37,940				
Dramas/Songs	403	16,914	347	16,765				
Exhibitions	578	88,824	815	118,269				
Advocacy Meeting	3,957	47,003	4,251	51,216				
Others	1,470	37,635	2,010	70,262				
Total	10,350	360,282	11,886	422,191				

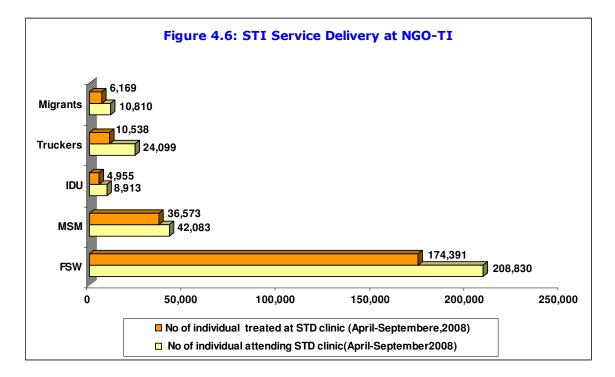
#### 4.5 Community Based Organization

Community based organization is a key strategy for creating sustainable and effective target intervention programmes for HRGs. Following figure 4.5 highlights the number of HRG groups seeking endorsement from communities and functionality of CBOs for the two quarters.



### 4.6 Number of STI cases detected and treated

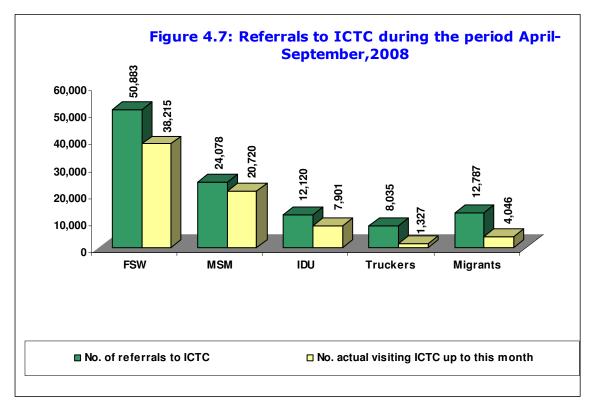
The figure 4.6 shows the number of target group individuals attending STI clinics and treated by the period April-September, 2008. The percentage of cases treated among attending ranges from 86.9 percent for MSM to 43.7 in case of truckers



#### 4.7 Referrals from Targeted Intervention

The targeted intervention projects are referring the clients to various facilities including

ICTC (general clients and pregnant women)



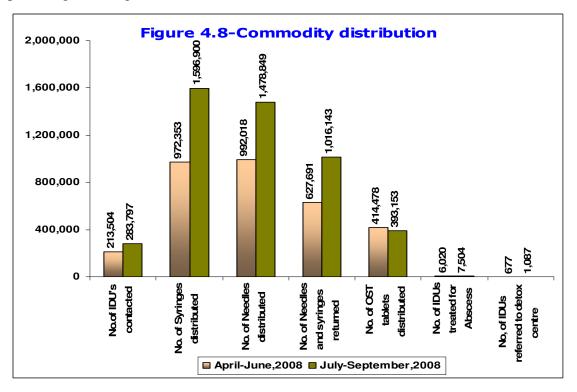
### 4.8 Condom Distribution reported by NGO-TI

The table shown below shows the number of condom reported to be distributed by TI's across the country through free distribution and social marketing. These are consolidated figures for all the states (for distribution among HRG's and distribution through outlets).

Table 4.4:- Condom distributed by NGO's implementing TI during the two quarters									
Quarter	Free Dist	ribution	Social Ma	arketing	Total				
	HRG	Through	HRG	Through	HRG	Through			
		outlets		outlets		outlets			
April-	208,14,298	86,57,932	26,60,828	744,452	234,75,126	94,02,384			
June,2008									
July-	236,48,259	90,69,335	34,57,607	904,968	271,05,866	99,74,303			
Sept.,2008									

## 4.9 Commodity distribution-IDU

The figure 4.8 shows the Needle Syringe Exchange Program among IDU's for the period April-September,2008. The state-wise details of Needle and Syringe distribution and their percentage coverage is in Annex-IV.



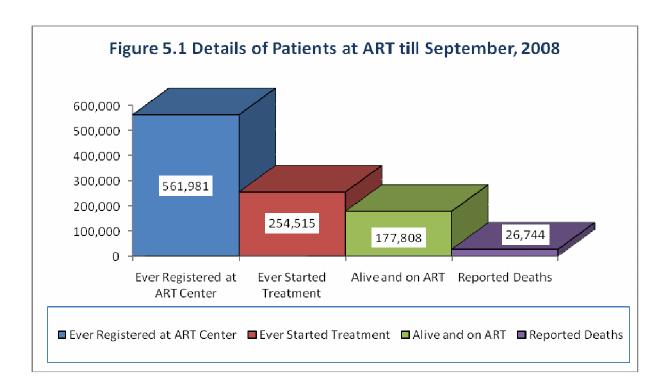
## **Chapter 5**

# Anti Retroviral Therapy Programme (ART)

### Introduction

Free drugs are being provided through ART Centers to people living with HIV/AIDS and some are availing private facilities. The NACP-III target is to scale up the ART mission to 250 centers by 2011-12 to provide free ART to 3,00,000 adults and 40,000 children.

The analysis is based on the report received from 179 ART centers till September, 2008

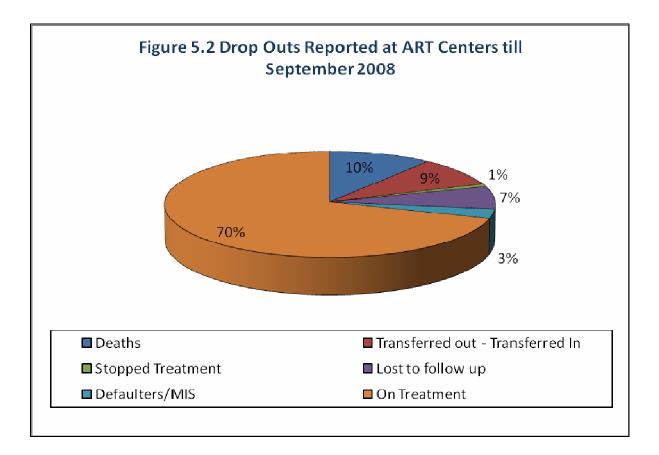


### 5.1 Proportion of Patients Ever Started and on ART as against Registered

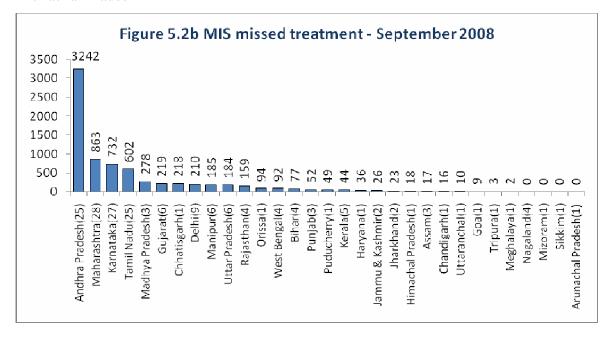
Till the end of September, 2008 total numbers of patients ever registered at ART center are 561,981. Among registered 45 percent (254,515) patients were ever started treatment on ART based on eligibility, till September, 2008. Out of the patients ever started the treatment, 70 percent (177,808) are alive and on ART. Till September, 2008, since inception of the ART program, total 26,744 deaths are reported among patient registered at ART center.

#### **5.2 Details of Patients Dropped Out:**

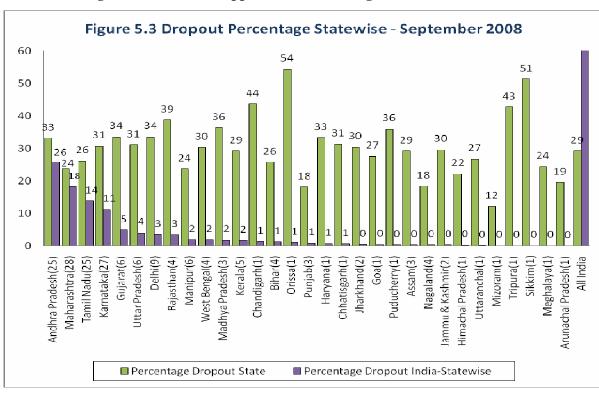
The details of patients dropped out due to LFU, MIS, death, and the difference (transferred out - transferred in) is shown in the following chart.



Cumulative cases of Lost to follow up cases at all India level since 2004 is 17,357 (7% approximately) and out of which 1231 are reentered and total death 26,744 (10% approximately). Transferred out cases are 23,941 (9% approximately). Highest deaths are reported by ART Center at Govt. Medical College, Guntur (1,187) followed by KIMS ART Centre, Hubli (1,178), Govt. Hospital for Thoracic Medicine, Chennai (851), Sir J. J. Hospital, Mumbai (783) and Govt. MC (King George Hospital), Visakhapatnam (777). Highest Lost to follow up cases are reported by Govt. Hospital for Thoracic Medicine, Chennai (770), GGH Kakinada, East Godavari (702), Banaras Hindu University, Varanasi (658), Sir J.J. Hospital, Mumbai (622), Govt. MC (King George Hospital), Visakhapatnam (609).



States with highest MIS (missed treatment) are Andhra Pradesh (3242), Maharashtra (863), Karnataka (732) and Tamil Nadu (602). No MIS reported in Nagaland, Mizoram, Sikkim and Arunachal Pradesh



#### 5.3.1 Percentage of Patients on dropped out ART among those ever started - state-wise

The state wise percentage of dropout (Lost to follow-up, MIS missed treatment, Death & Transferred Out - Transferred In) for state and all India state wise shows higher dropouts in Andhra Pradesh (38533), Maharashtra (43869), Tamil Nadu (28972), Karnataka (18667), Gujarat (7197), Uttar Pradesh (6610), Delhi (5026) & Rajasthan (3961).

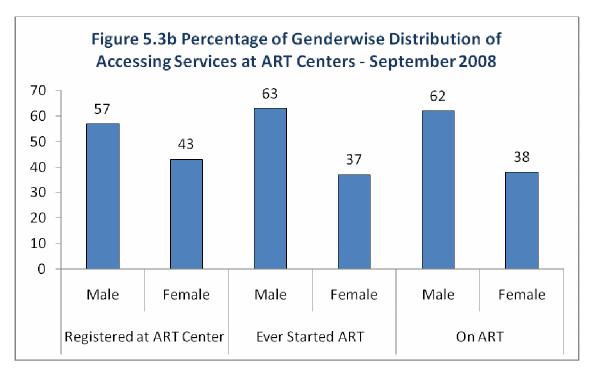
Dropout percentages are higher in Orissa, Sikkim, Chandigarh & Tripura.

Fewer dropouts are reported by Arunachal Pradesh, Meghalaya, Sikkim & Tripura.

### **5.3.2 Details of patients accessing ART : Gender-wise**

While 14 percent less women are being accessing ART centers (registration), the number ever started on ART differs by 26 percent.

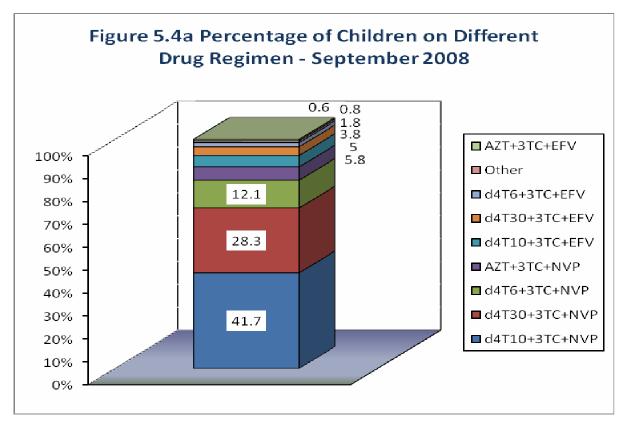
The figure 5.3b below shows the gender differential in registration, starting ART and living on ART.



Out of total patients on ART, only 7 % are children and 0.2 % are TS/TG.

### 5.4 Percentage of Patients on Various Drug Regime

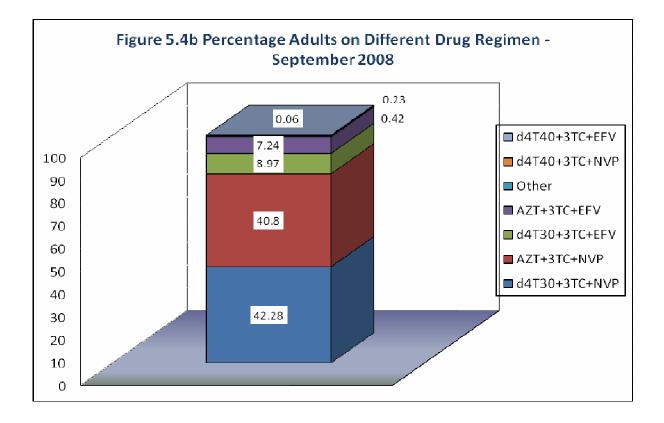
5.4 1 Percentage of Children on Various Drug Regime



Highest number of children on ART are reported to be on drug regimen d4T10+3TC+NVP (41.7 %) followed by d4T30+3TC+NVP (28.3) and d4T6+3TC+NVP (12.1). The proportions of children on various regimens are shown in the figure 5.4a.

### 5.4.2 Percentage of Adults on Various Drug Regime:

As seen from figure 5.4b, maximum percentage of adults are on the regimen d4T30+3TC+NVP (42.4 %) followed by AZT+3TC+NVP (39.8%).



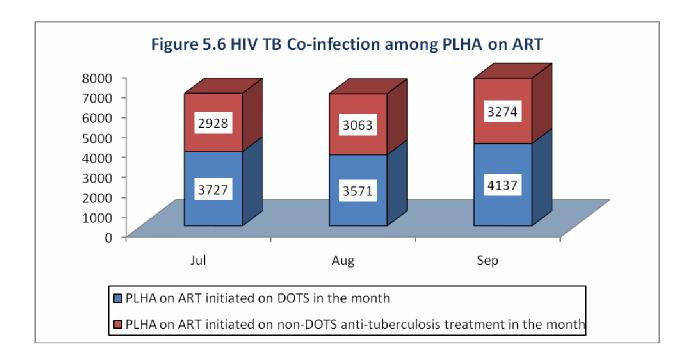
#### 5.5 Drug Adherence

Out of the reported ART centers, 15 have reported 100 percent patients with 95% drug adherence and 18 centers have not reported any data for drug adherence. The centers with good adherence rates are District HQ Hospital, Adilabad; Medical College Allepy; Govt. District Headquaters Hospital, Krishnagiri; District hospital, Bijapur; BILT, Chandrapur; ICH; Govt. District Headquaters Hospital, Dindugal; District Hospital, Karur; Civil Hospital, Nashik; District Civil Hospital, Ratnagiri; Govt. Medical College, Solapur; Vithal Sayanna General Hospital, Thane; District Hospital, Udupi; District Hospital, Karwar; ART Centre Civil Hospital, Wardha

Out of the reported ART centers, 18 have not reported drug adherence. The centers are Victoria hospital; J L N Medical Collge,Bhagalpur; District Hospital, Bidar; RIMS, Kadapa; Dharbhanga Med col,Laheriasarai,Darbhanga; Ditrict Hospital, Dimapur; District hospital, Gulburga; District HQ Hospital, Mehboobnagar; BLY Nair Hospital; District Head Quarters Hospital, Nizamabad; Medical Collage, Patiala; Bajaj auto ltd YCM Hospital ART centre; SAFDARJUNG HOSPITAL; District Head Quarters Hospital, Srikakulam; Civil Hospital, Tuensang ;District Hospital, Tumkur; District Head Quarters Hospital, Eluru & Agartala

### 5.6 HIV TB Co-infection

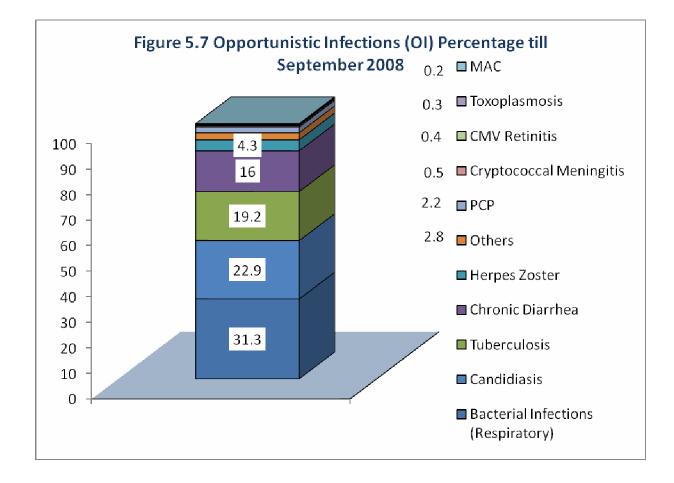
The PLHA on ART initiated on DOTS and non-DOTS anti-tuberculosis treatment is increasing. The trend is shown in the graph:



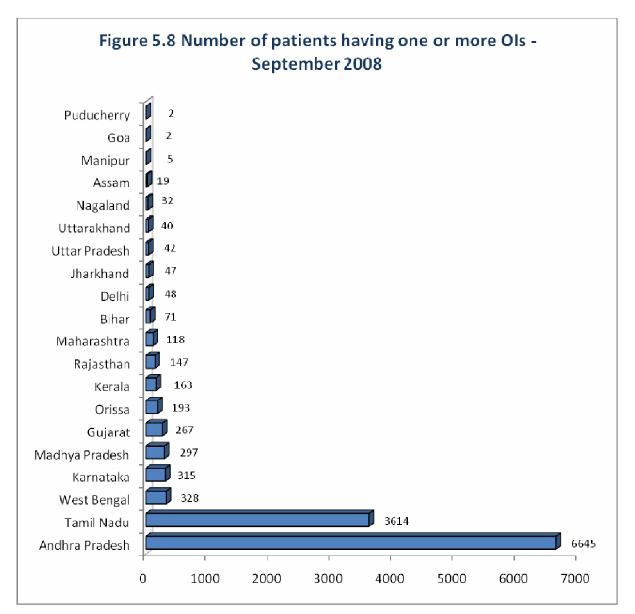
PLHA on ART initiated on DOTS in the month in the descending order for are as follows: KIMS ART Centre, Hubli, Dharwad, Karnataka (863); Govt. Hospital for Thoracic Medicine, Chennai, Tamil Nadu (607); District Civil Hospital, Satara, Maharashtra (207); Madras Medical College, Chennai, Tamil Nadu (203); Govt. Medical College, Guntur, Andhra Pradesh (181); Vellore Medical College, Tamil Nadu (174); & Medical College, Warangal, Andhra Pradesh (134).

PLHA on ART initiated on non-DOTS anti-tuberculosis treatment in the month in descending order are as follows: KGMC, Lucknow, Uttar Pradesh (199); District Hospital, Udupi, Karnataka (126); District Headquarter Hospital, Medak, Andhra Pradesh (97); District Hospital, Tumkur, Karnataka (93); Govt. Medical College, Guntur, Andhra Pradesh (88); Govt. District Headquaters Hospital, Cudallore, Tamil Nadu (74); BLY Nair Hospital, Mumbai, Maharashtra (67); & District HQ Hospital, Mehboobnagar, Andhra Pradesh (53).

#### 5.7 **Opportunistic Infections (OI)**



The number of PLHAs diagnosed with Opportunistic Infection were found maximum at GGH, Kakinada , East Godavari, Andhra Pradesh (6192); followed by Government Medical College, Madurai, Tamil Nadu (1642); Medical College, Salem, Tamil Nadu (1159); Govt. District Headquaters Hospital, Dindugal, Tamil Nadu (400), North Bengal Medical College, Siliguri, Darjiling, West Bengal (328); M Y Hospital, Indore, Madhya Pradesh (275); Government Hospital, Namakkal, Tamil Nadu (233); Government District Hospital, Ongole, Prakasam, Andhra Pradesh (229); B.J. Medical College, Surat, Gujarat (217), MKCG Medical College and Hospital, Berhampur, Ganjam, Orissa (193); District hospital, Belgaum, Karnataka (175); & Christian Medical College, Vellore, Tamil Nadu (134).



Statewise number PLHA having one or more OIs are shown in the figure 5.8 below:

It is evident from the figure 5.8 that maximum emphasis is required for Bacterial Infections (Respiratory), Candidiasis, Tuberculosis & Chronic Diarrhea and in the states of Andhra Pradesh & Tamil Nadu.

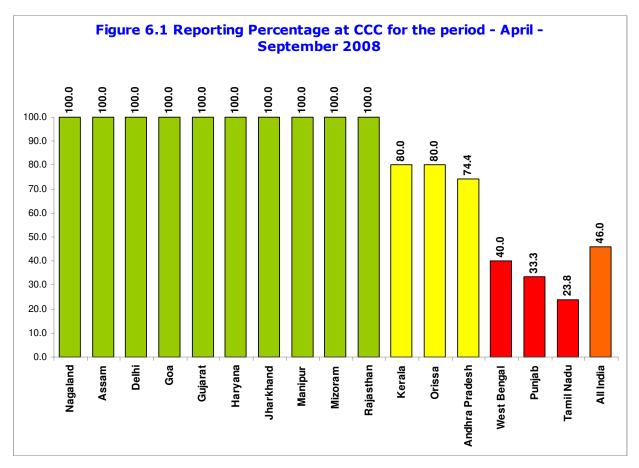
#### **Chapter-6**

#### **Community Care Centre**

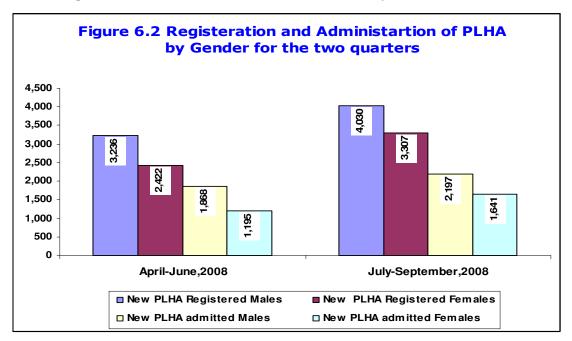
Community Care Centre (CCC) is implemented by NGO's. The report is based on about 213 CCC Reporting Units out of 83 CCC Reporting Units across 26 states.

### 6.1 Reporting Status:-

Figure 6.1 shows the state-wise percentage reporting of CCC for the period April-September, 2008.



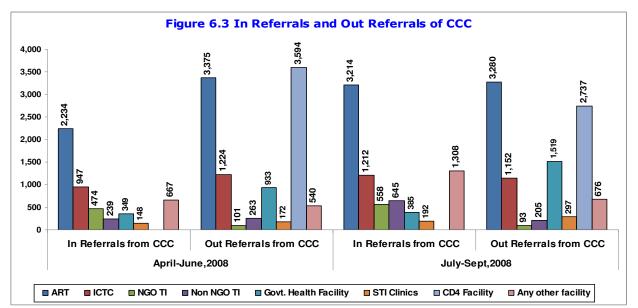
100 percent reporting is achieved by Nagaland, Assam, Delhi, Goa, Haryana, Jharkhand, Manipur, Mizoram and Rajasthan. Though high percentage reporting is also achieved by Kerala, Orissa & Andhra Pradesh. The overall reporting percentage is 46 which is very low because of the zero reporting by the states like Bihar, Chhatisgarh, Himachal Pradesh, Karnatka, Madhya Pradesh, Maharashtra and Uttar Pradesh.



### 6.2 Registration and Admission of PLHA at CCC by Gender

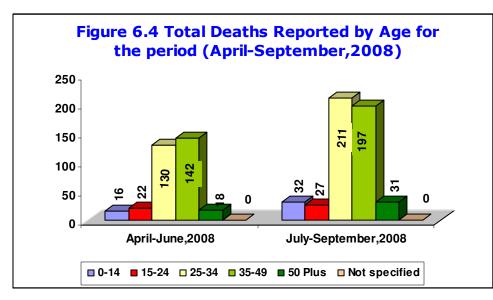
Fifty eight percent of registered males & 49 percent of registered females are admitted in April-June 2008 and 55 percent of registered males & 50 percent of registered females are admitted in July-September 2008.

There is 11 percent points increase in male registration and 15 percent points increase in female registration and at the same time the male and female admissions increased by 8 percent and 16 percent in the quarter July-September 2008 as compared with first quarter April-June 2008.



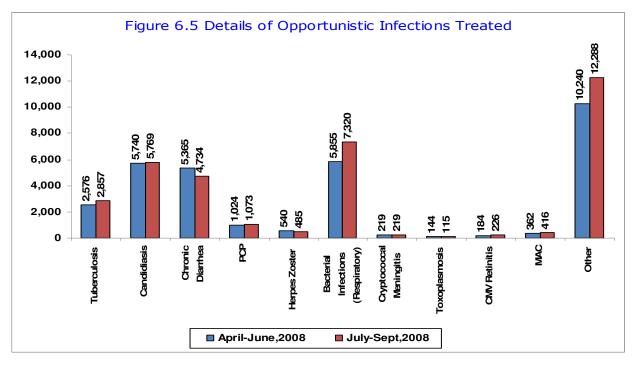
### 6.3 In Referrals and Out Referrals of CCC

The figure 6.3 shows that 44 percent of the in referrals are from ART and 33 percent out referrals are to ART in the two quarters April-June, 2008 & July-Sept, 2008. The out referrals are 35 & 27 percent to CD4 Facility in the two quarters respectively. In referrals are 5058 & 7514 for the two quarters and out referrals are 10,202 & 9,959 in the two quarters. Next in referrals & out referrals are followed by the ICTC. There is significant out referrals from CCC to Govt. Health Facility in the second quarter July-Sept, 2008. Still the in referrals from other facilities are also increasing as can be seen from the figure 6.3.



### 6.4 Total Deaths of PLHA Reported by CCC in year

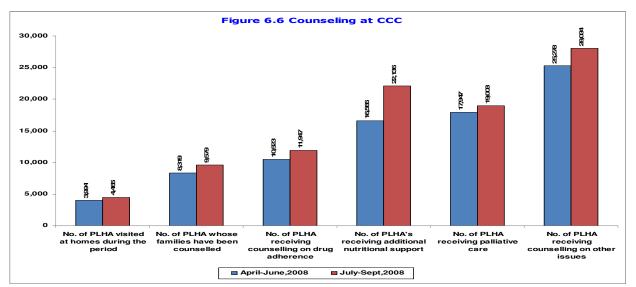
The maximum death reporting is 43 percent in the age group 35-49 followed by 40 percent in the age group 25-34 for the quarter April-June 2008. The maximum death reporting is 42 percent in the age group 25-34 followed by 40 percent in the age group 35-49 for the quarter July-September 2008. It is clearly seen in the figure 6.4 that death ratio is maximum in the age group of 25-34, hence more emphasis may be required for this age group.



### 6.5 Details of Opportunistic Infections Treated

Total Opportunistic Infections (OI) Among PLHA visiting CCC is 32,249 in the quarter April-June 2008 & 35,502 in the quarter July-September 2008.

There is increasing trend in Other, Bacterial Infections (Respiratory), Candidiasis, Tuberculosis, PCP, Herpes Zoster, MAC, CMV Retinitis & Toxoplasmosis. The number remains same for Cryptococcal Meningitis. There is a decreasing trend in Chronic Diarrhea. Emphasis is required for Other, Bacterial Infections (Respiratory), Candidiasis, Tuberculosis.



### 6.6 Counselling at CCC

The counselling is increased in the second quarter as compared to the first one.

PLHA visiting homes increased by 5.6 percent, PLHA whose families have been counselled increased by 7 percent, PLHA receiving counselling on drug adherence increased by 6.3 percent, PLHA's receiving additional nutritional support increased by 14.4 percent, PLHA receiving palliative care increased by 2.9 percent & PLHA receiving counselling on other issues increased by 5.2 percent in the second quarter July-Sept, 2008 as compared to the first quarter April-June, 2008.

Annex-I

	Sero-reactivity in ca	tegory A &	B Districts	s for the	five TTI m	arkers		
State	District	District	No of		Se	ero-reactivity		
State	District	Category	Reporting Unit	нιν	Hepetitis B	Hepetitis C	VDRL	Malaria
Ahmedabad MACS	Ahmedabad	В	9	0.2	0.9	0.3	0.6	0.9
Andhra Pradesh	Adilabad	А	4	0.2	0.9	0.1	0.5	0.9
Andhra Pradesh	Anantapur	А	6	0.4	2.6	0.2	0.5	2.6
Andhra Pradesh	Chittor	Α	11	0.7	2.5	0.3	0.1	2.5
Andhra Pradesh	Cuddapah	Α	6	0.4	1.7	0.1	0.3	1.7
Andhra Pradesh	East Godavari	Α	9	0.6	1.9	0.2	0.6	1.9
Andhra Pradesh	Guntur	Α	14	0.6	1.6	0.7	0.1	1.6
Andhra Pradesh	Hyderabad	Α	67	0.3	1.3	0.4	0.1	1.3
Andhra Pradesh	Karimnagar	Α	9	0.3	0.8	0	0.1	0.8
Andhra Pradesh	Khammam	Α	10	0.3	0.7	0	0	0.7
Andhra Pradesh	Krishna	Α	14	0.4	1.6	0.3	0.1	1.6
Andhra Pradesh	Kurnool	Α	7	0.5	2.2	0.3	0.3	2.2
Andhra Pradesh	Mahbubnagar	Α	3	0.3	1.7	0.2	0.4	1.7
Andhra Pradesh	Medak	А	4	0.3	2.3	0.2	3.9	2.3
Andhra Pradesh	Nalgonda	А	5	0.3	1.9	0.1	0.1	1.9
Andhra Pradesh	Nellore	Α	4	0.5	2.1	0	1.3	2.1
Andhra Pradesh	Nizamabad	Α	4	0.2	1.6	0	0.3	1.6
Andhra Pradesh	Prakasam	Α	4	0.5	2.8	0.7	0	2.8
Andhra Pradesh	Rangareddi	Α	11	0.2	0.8	0.1	0.1	0.8
Andhra Pradesh	Srikakulam	Α	2	0.7	4.3	0.1	0	4.3
Andhra Pradesh	Visakhapatnam	Α	14	0.3	2.3	0.3	0.3	2.3
Andhra Pradesh	Vizianagaram	Α	6	0.5	3.6	0.6	0.1	3.6
Andhra Pradesh	Warangal	Α	8	0.2	1.4	0.1	0.1	1.4
Andhra Pradesh	West Godavari	Α	12	0.2	1.6	0.2	0	1.6
Assam	Kamrup	Α	16	0.2	0.8	0.7	0.8	0.8
Assam	Sonitpur	А	4	0	0	0	0	0
Bihar	Katihar	В	2	0	0	0	0	0
Bihar	Lakhisarai	Α	1	0	0	0	0	0
Bihar	Purnia	В	2	0	0	0	0	0
Chandigarh	Chandigarh	В	4	0.1	0.8	0.6	0.1	0.8
Chennai MACS	Chennai	А	34	0.1	1.3	0.3	0	1.3
Delhi	Central	В	4	0.2	1.6	0.9	0.4	1.6
Delhi	East	В	5	0.6	1	0.6	0.5	1
Delhi	North	В	7	0.4	1.1	0.7	0.3	1.1
Delhi	North East	В	2	0.4	1.9	0.6	2.7	1.9
Goa	North Goa	А	4	0.5	0.8	0.4	0.1	0.8
Goa	South Goa	В	4	0.5	1	0.9	0.2	1
Gujarat	Ahmedabad	В	31	0.2	0.8	0.2	0.5	0.8
Gujarat	Banaskantha	А	11	0.1	0.4	0	0.2	0.4
Gujarat	Bhavnagar	В	9	0.1	1.1	0.1	0.1	1.1
Gujarat	Dahod	А	6	0	0.4	0	0	0.4
Gujarat			9	0.0	0.5	0.0	0.0	0.5
	Mensana	A	9	0.2	0.5	0.2	0.2	0.5
Gujarat	Mensana Navsari	A	3	0.2	1.6	0.2	0.2	1.6

### Sero-reactivity in category A & B Districts for the five TTI markers

		District	No of		Se	ero-reactivity	,	
State	District	Category	Reporting Unit	нιν	Hepetitis B	Hepetitis C	VDRL	Malaria
Gujarat	Surat	Α	9	0.2	1	0.2	0.1	1
Gujarat	Surendranagar	Α	8	0.2	0.9	0.1	0	0.9
Gujarat	Vadodara	В	9	0.2	0.8	0.1	0.2	0.8
Haryana	Bhiwani	Α	2	0.2	0.9	0.2	0.1	0.9
Karnataka	Bagalkot	А	4	1	2.9	0.4	0	2.9
Karnataka	Bangalore	А	76	0.3	1	0.3	0.1	1
Karnataka	Belgaum	А	6	0.5	1.3	0.1	0.1	1.3
Karnataka	Bellary	А	6	0.5	2.4	0.3	0.5	2.4
Karnataka	Bidar	Α	2	0.3	2.3	0	0.1	2.3
Karnataka	Bijapur	А	7	2.1	3.5	2.2	0	3.5
Karnataka	Chikmagalur	А	3	0.3	0.8	0	0.1	0.8
Karnataka	Dakshina Kannada	А	14	0.1	0.6	0.3	0.1	0.6
Karnataka	Davanagere	А	5	0.4	1.8	0.1	0.1	1.8
Karnataka	Dharwad	А	10	0.3	1.7	0	0	1.7
Karnataka	Gadag	А	2	0.2	0.7	0	0.2	0.7
Karnataka	Gulbarga	Α	4	0.3	1.3	0.1	0.3	1.3
Karnataka	Hassan	А	2	0.2	0.5	0	0	0.5
Karnataka	Haveri	А	2	0	3.8	0	0	3.8
Karnataka	Kodagu	Α	2	0.3	2.1	0	0	2.1
Karnataka	Kolar	А	5	0.1	0.9	0	0.3	0.9
Karnataka	Mandya	А	3	0.3	1.3	0.1	0.2	1.3
Karnataka	Mysore	А	12	0.4	0.9	0.2	0.1	0.9
Karnataka	Raichur	А	5	0.2	1.7	0.2	0.1	1.7
Karnataka	Shimoga	А	7	0.3	1.3	0.1	0	1.3
Karnataka	Tumkur	А	6	0.6	0.7	0.4	0.5	0.7
Karnataka	Udupi	А	2	0.1	0.4	0	0.1	0.4
Karnataka	Uttara Kannada	А	2	0.2	0.2	0	0	0.2
Kerala	Ernakulam	В	23	0.1	0.3	0.4	0.1	0.3
Kerala	Kozhikode	В	12	0.1	0.6	0.2	0	0.6
Madhya Pradesh	Balaghat	А	2	0.1	0.4	0	0	0.4
Madhya Pradesh	Bhopal	В	13	0.1	2	0.4	0.2	2
Madhya Pradesh	Dewas	А	1	0.2	1.3	0	0.4	1.3
Madhya Pradesh	Harda	A	1	0	0	0	0	0
Madhya Pradesh	Indore	В	26	0.1	1.4	0.1	0.1	1.4
Madhya Pradesh	Mandsaur	В	4	0.5	1.6	0.2	0.7	1.6
Madhya Pradesh	Panna	A	1	0	1.1	0	0	1.1
Madhya Pradesh	Rewa	А	1	0	0	0	0	0
Maharashtra	Ahmadnagar	A	14	0.6	1.8	0.3	0.1	1.8
Maharashtra	Akola	А	13	0.4	1.1	0.1	0.1	1.1
Maharashtra	Amravati	А	5	0.3	1.4	0.3	0.2	1.4
Maharashtra	Aurangabad	А	7	0.6	1.7	0.3	0.1	1.7
Maharashtra	Beed	А	4	0.7	2.5	0.3	0	2.5
Maharashtra	Bhandara	А	2	0.3	0.7	0	0.5	0.7
Maharashtra	Buldana	А	8	0.3	1	0.3	0.1	1
Maharashtra	Chandrapur	А	6	0.6	0.7	0	0.1	0.7
Maharashtra	Dhule	А	7	0.3	1.7	0.1	0.1	1.7

<b></b>	<b>D</b>	District	No of		S	ero-reactivity	,	
State	District	Category	Reporting Unit	ніх	Hepetitis B	Hepetitis C	VDRL	Malaria
Maharashtra	Gadchiroli	Α	3	0.2	1.3	0.1	0.4	1.3
Maharashtra	Jalgaon	А	8	0.4	1.8	0.3	0.1	1.8
Maharashtra	Jalna	А	4	0.3	1.9	0.1	0.1	1.9
Maharashtra	Kolhapur	А	11	0.7	1.7	0.3	0	1.7
Maharashtra	Latur	А	4	0.3	2.3	0.3	0.4	2.3
Maharashtra	Mumbai	А	55	0	0	0	0	0
Maharashtra	Nagpur	А	20	0.8	1.4	0.5	0.3	1.4
Maharashtra	Nanded	А	4	0.9	3	0.1	0	3
Maharashtra	Nandurbar	А	2	1	2.2	0.6	0	2.2
Maharashtra	Nashik	А	11	0.2	1.6	0.1	0.1	1.6
Maharashtra	Osmanabad	А	2	1	1.1	0.5	0	1.1
Maharashtra	Parbhani	А	3	0.2	1.1	0	0.2	1.1
Maharashtra	Pune	А	29	0.3	1.4	0.3	0.1	1.4
Maharashtra	Raigarh	А	5	0.4	0.9	0.1	0	0.9
Maharashtra	Ratnagiri	А	3	0.1	1.4	0.2	0.1	1.4
Maharashtra	Sangli	А	9	0.5	1.4	0.3	0.2	1.4
Maharashtra	Satara	А	12	0.5	1.6	0.7	0.2	1.6
Maharashtra	Solapur	А	10	1.2	2.6	0.9	0.3	2.6
Maharashtra	Thane	А	31	0.7	1.7	0.8	0.6	1.7
Maharashtra	Wardha	А	3	0.6	1.8	0.8	0.5	1.8
Maharashtra	Yavatmal	А	6	0.9	1.9	0	0.2	1.9
Manipur	Churachandpur	А	1	0.6	0.9	1.5	0	0.9
Manipur	Imphal East	А	1	0.4	0.6	1.4	0.1	0.6
Manipur	Imphal West	А	1	0.2	0.4	1.4	0.4	0.4
Mizoram	Aizawl	А	2	0.3	1.4	2.1	0.2	1.4
Mizoram	Champhai	А	1	0.8	0.3	2.9	0	0.3
Mizoram	Kolasib	В	1	0.3	1.7	0.5	0.2	1.7
Mumbai MACS	Mumbai	А	63	0.5	1.6	1	0.3	1.6
Nagaland	Dimapur	А	1	0.5	0.1	0.2	0.5	0.1
Nagaland	Kohima	А	1	0.2	1.1	0.7	0.1	1.1
Nagaland	Mokokchung	А	1	0	1.4	0.5	0	1.4
Nagaland	Mon	А	1	0	0	0	0	0
Nagaland	Phek	А	1	0	0	0	0	0
Nagaland	Tuensang	А	1	0	0	0	0	0
Nagaland	Wokha	А	1	0	0	0	8.3	0
Nagaland	Zunheboto	А	1	0	1.2	2.4	0	1.2
Orissa	Anugul	А	4	0	0.3	0.1	0.1	0.3
Orissa	Balangir	А	3	0.4	0.2	0	0	0.2
Orissa	Baleshwar	В	4	0	0.4	0	0	0.4
Orissa	Bhadrak	А	1	0	0	0	0	0
Orissa	Ganjam	А	4	0.2	0.7	0.3	0.1	0.7
Orissa	Khordha	В	8	0	0.6	0.1	0	0.6
Orissa	Koraput	В	6	0.4	1.4	0.3	3.5	1.4
Pondicherry	Pondicherry	В	7	0.1	2.5	0.1	0.2	2.5
Punjab	Bathinda	В	5	0.2	0.8	2.3	0.3	0.8
Punjab	Ludhiana	А	13	0.2	0.9	1.5	1.1	0.9

		District	No of		S	ero-reactivity	1	
State	District	Category	Reporting Unit	HIV	Hepetitis B	Hepetitis C	VDRL	Malaria
Rajasthan	Ajmer	В	7	0.2	1.7	0.1	0.2	1.7
Rajasthan	Alwar	В	2	0.3	0.5	0.6	0	0.5
Rajasthan	Barmer	В	2	0.1	1.4	0.2	0.9	1.4
Rajasthan	Ganganagar	А	3	0	0.8	0.3	0.2	0.8
Rajasthan	Jaipur	В	13	0.3	1.8	0.4	0.3	1.8
Rajasthan	Tonk	В	1	0.2	5.2	0	0	5.2
Rajasthan	Udaipur	В	4	0.4	1.7	0.1	0.4	1.7
Tamil Nadu	Chennai	В	54	0.1	1.2	0.3	0	1.2
Tamil Nadu	Coimbatore	А	27	0.1	0.6	0.1	0	0.6
Tamil Nadu	Cuddalore	А	7	0	0.8	0.3	0	0.8
Tamil Nadu	Dharmapuri	А	6	0.1	0.6	0	0	0.6
Tamil Nadu	Erode	А	10	0.4	0.8	0.4	0.4	0.8
Tamil Nadu	Kancheepuram	В	13	0.1	2.2	0.4	0.1	2.2
Tamil Nadu	Kanniyakumari	А	14	0.2	0.2	0	0	0.2
Tamil Nadu	Karur	А	3	0	0.4	0	0	0.4
Tamil Nadu	Madurai	А	17	0.1	0.6	0.8	0	0.6
Tamil Nadu	Namakkal	Α	4	0	0.2	0	0	0.2
Tamil Nadu	Perambalur	Α	2	0	0.6	0.6	0.6	0.6
Tamil Nadu	Pudukkottai	Α	2	2.2	2.6	2.5	2.1	2.6
Tamil Nadu	Ramanathapuram	Α	3	0	0	0	0	0
Tamil Nadu	Salem	Α	20	0.1	0.6	0	0	0.6
Tamil Nadu	Sivaganga	Α	3	0	0.4	0.2	0	0.4
Tamil Nadu	Thanjavur	В	15	0	0.4	0	0	0.4
Tamil Nadu	The Nilgiris	Α	3	0.2	0.2	0.2	0	0.2
Tamil Nadu	Theni	A	3	9	10.3	9.6	9.9	10.3
Tamil Nadu	Thiruvallur	Α	2	0.1	1.2	0.2	0	1.2
Tamil Nadu	Tiruchirappalli	А	13	0.1	0.7	0.3	0.1	0.7
Tamil Nadu	Tirunelveli	В	11	0.1	0.5	0.1	0	0.5
Tamil Nadu	Tiruvanamalai	A	2	0	0	0	1.8	0
Tamil Nadu	Toothukudi	Α	6	0.1	0.4	0.2	0.1	0.4
Tamil Nadu	Vellore	A	10	0.3	1.8	0.5	0.7	1.8
Tamil Nadu	Viluppuram	A	6	0.4	0.8	0.5	0.5	0.8
Tripura	West Tripura	А	2	0	0	0	0	0
Uttar Pradesh	Allahabad	A	7	0.4	0.7	0.5	0.5	0.7
Uttar Pradesh	Banda	А	1	0.5	2.1	0	0	2.1
Uttar Pradesh	Deoria	А	1	0	1	0	0	1
Uttar Pradesh	Etawah	A	2	0.3	1.5	0.4	0.7	1.5
West Bengal	Bardhaman	А	14	0.2	0.7	0.2	0.5	0.7
West Bengal	Darjiling	В	9	0.6	1.7	0.7	1	1.7
West Bengal	Jalpaiguri	В	4	0.3	0.7	0.2	0.8	0.7
West Bengal	Kolkata	Α	32	0.6	2	0.8	1.2	2
West Bengal	Medinipur	В	4	0.2	1.3	0.5	0.2	1.3
West Bengal	Murshidabad	В	4	0	0.9	0.1	0	0.9
West Bengal	Puruliya	Α	2	0.2	1	0.2	0.2	1
West Bengal	Uttar Dinajpur	Α	2	0.1	1.2	0.1	0.2	1.2

S.NO.	State	District	District Category	Tested for HIV	Found Positive	HIV positivity (Percentage)
	Ahmedabad					
1	MACS	Ahmadabad	В	9,846	610	6.20
2	Andhra Pradesh	Adilabad	Α	7,195	354	4.92
3	Andhra Pradesh	Anantapur	Α	12,883	1,080	8.38
4	Andhra Pradesh	Chittor	А	9,796	1,127	11.50
5	Andhra Pradesh	Cuddapah	А	14,448	820	5.68
6	Andhra Pradesh	East Godavari	А	16,019	3,348	20.90
7	Andhra Pradesh	Guntur	А	15,925	2,947	18.51
8	Andhra Pradesh	Hyderabad	A	15,738	2,709	17.21
9	Andhra Pradesh	Karimnagar	Α	11,555	1,080	9.35
10	Andhra Pradesh	Khammam	Α	10,578	880	8.32
11	Andhra Pradesh	Krishna	Α	16,401	2,593	15.81
12	Andhra Pradesh	Kurnool	Α	10,090	1,052	10.43
13	Andhra Pradesh	Mahbubnagar	А	11,560	597	5.16
14	Andhra Pradesh	Medak	Α	7,641	680	8.90
15	Andhra Pradesh	Nalgonda	Α	8,865	962	10.85
16	Andhra Pradesh	Nellore	А	9,020	923	10.23
17	Andhra Pradesh	Nizamabad	A	9,957	791	7.94
18	Andhra Pradesh	Prakasam	A	13,784	1,837	13.33
19	Andhra Pradesh	Rangareddi	Α	11,748	676	5.75
20	Andhra Pradesh	Srikakulam	A	10,402	915	8.80
21	Andhra Pradesh	Visakhapatnam	A	13,796	1,709	12.39
22	Andhra Pradesh	Vizianagaram	A	8,738	791	9.05
23	Andhra Pradesh	Warangal	A	11,937	1,170	9.80
24	Andhra Pradesh	West Godavari	A	16,883	3,537	20.95
25	Arunachal Pradesh	Lohit	A	500	2	0.40
26	Assam	Kamrup	В	4,376	141	3.22
27	Assam	Sonitpur	В	916	10	1.09
28	Bihar	Araria	A	541	6	1.11
29	Bihar	Katihar	В	1,412	64	4.53
30	Bihar	Lakhisarai	A	927	11	1.19
31	Bihar	Purnia	В	1,549	44	2.84
32	Chandigarh	Chandigarh	В	8,743	626	7.16
33	Chennai MACS	Chennai	A	60,514	1,146	1.89
34	Delhi	Central	B	2,367	257	10.86
35	Delhi	East	B	6,770	72	1.06
36	Delhi	North	B	9,058	339	3.74
37	Delhi	North east	B	3,350	331	9.88
38	Goa	North Goa	A	5,306	372	7.01

39	Goa	South Goa	В	2,364	131	5.54
40		Ahmedabad	B	15,044	796	5.29
40	Gujarat Gujarat	Banaskantha	A	5,731	276	4.82
41	0		B	,	403	7.38
	Gujarat	Bhavnagar		5,460		
43	Gujarat	Dahod	A	1,951	72	3.69
44	Gujarat	Mehsana	A	5,284	333	6.30
45	Gujarat	Navsari	A	3,077	113	3.67
46	Gujarat	Rajkot	В	5,586	819	14.66
47	Gujarat	Surat	A	8,309	1,435	17.27
48	Gujarat	Surendranagar	A	3,997	184	4.60
49	Gujarat	Vadodara	В	3,896	385	9.88
50	Haryana	Bhiwani	А	2,175	46	2.11
51	Karnataka	Bagalkot	А	8,505	1,923	22.61
52	Karnataka	BANGALORE	Α	13,249	1,467	11.07
53	Karnataka	Bangalore Rural	Α	7,344	352	4.79
54	Karnataka	Belgaum	Α	13,446	2,255	16.77
55	Karnataka	Bellary	А	6,643	1,110	16.71
56	Karnataka	Bidar	Α	4,358	289	6.63
57	Karnataka	Bijapur	А	4,193	792	18.89
58	Karnataka	Chamarajanagar	А	4,646	228	4.91
59	Karnataka	Chikmagalur	А	3,772	212	5.62
60	Karnataka	Dakshina Kannada	А	6,986	383	5.48
61	Karnataka	Davanagere	А	7,625	809	10.61
62	Karnataka	Dharwad	А	4,981	706	14.17
63	Karnataka	Gadag	А	2,596	381	14.68
64	Karnataka	Gulbarga	А	5,423	613	11.30
65	Karnataka	Hassan	А	8,163	478	5.86
66	Karnataka	Haveri	А	3,775	245	6.49
67	Karnataka	Kodagu	А	2,739	103	3.76
68	Karnataka	Kolar	А	11,401	461	4.04
69	Karnataka	Koppal	А	3,646	815	22.35
70	Karnataka	Mandya	А	7,414	489	6.60
71	Karnataka	Mysore	А	12,342	971	7.87
72	Karnataka	Raichur	А	4,827	831	17.22
73	Karnataka	Shimoga	А	7,041	412	5.85
74	Karnataka	Tumkur	А	12,096	695	5.75
75	Karnataka	Udupi	A	7,429	587	7.90
76	Karnataka	Uttara Kannada	A	4,922	230	4.67
77	Kerala	Ernakulam	B	3,338	58	1.74
78	Kerala	Kozhikode	B	2,799	144	5.14
79	Madhya Pradesh	Balaghat	A	220	35	15.91
80	Madhya Pradesh	Bhopal	B	742	87	11.73
81	Madhya Pradesh	Dewas	A	148	14	9.46
82	Madhya Pradesh	Harda	A	202	8	3.96
83	Madhya Pradesh	Indore	B	2,609	498	19.09

84	Madhya Pradesh	Mandsaur	В	208	53	25.48
85	Madhya Pradesh	Panna	A	278	2	0.72
86	Madhya Pradesh	Rewa	A	917	68	7.42
87	Maharashtra	Ahmadnagar	A	11,592	1,359	11.72
88	Maharashtra	Akola	A	6,780	346	5.10
89	Maharashtra	Amravati	A	9,533	302	3.17
90	Maharashtra	Aurangabad	A	8,931	947	10.60
91	Maharashtra	BEED	A	10,066	1,040	10.33
92	Maharashtra	Bhandara	A	10,107	343	3.39
93	Maharashtra	Buldana	A	6,130	229	3.74
94	Maharashtra	Chandrapur	A	11,468	603	5.26
95	Maharashtra	Dhule	A	7,342	899	12.24
96	Maharashtra	Gadchiroli	A	6,645	80	1.20
97	Maharashtra	Hingoli	A	2,156	127	5.89
98	Maharashtra	Jalgaon	A	11,850	924	7.80
99	Maharashtra	Jalna	A	4,470	200	4.47
100	Maharashtra	Kolhapur	A	13,326	1,573	11.80
101	Maharashtra	Latur	А	9,367	922	9.84
102	Maharashtra	Nagpur	А	19,170	1,434	7.48
103	Maharashtra	Nanded	А	8,855	785	8.87
104	Maharashtra	Nandurbar	А	5,098	275	5.39
105	Maharashtra	Nashik	А	14,153	1,297	9.16
106	Maharashtra	Osmanabad	А	4,976	505	10.15
107	Maharashtra	Parbhani	А	4,082	485	11.88
108	Maharashtra	Pune	А	31,456	2,165	6.88
109	Maharashtra	Raigarh	А	8,626	432	5.01
110	Maharashtra	Ratnagiri	А	5,225	377	7.22
111	Maharashtra	Sangli	А	11,967	1,928	16.11
112	Maharashtra	Satara	А	13,796	1,057	7.66
113	Maharashtra	Solapur	А	8,515	1,479	17.37
114	Maharashtra	Thane	А	23,724	1,878	7.92
115	Maharashtra	Wardha	А	8,536	230	2.69
116	Maharashtra	Yavatmal	А	12,959	1,080	8.33
117	Manipur	Bishnupur	А	1,144	58	5.07
118	Manipur	Chandel	А	289	48	16.61
119	Manipur	Churachandpur	А	816	190	23.28
120	Manipur	Imphal East	А	836	156	18.66
121	Manipur	Imphal West	А	2,358	334	14.16
122	Manipur	Senapati	А	935	34	3.64
123	Manipur	Tamenglong	А	481	9	1.87
124	Manipur	Thoubal	А	1,197	90	7.52
125	Manipur	Ukhrul	А	514	74	14.40
126	Mizoram	Aizawl	А	3,827	259	6.77
127	Mizoram	Champhai	А	1,153	26	2.25
128	Mizoram	Kolasib	В	1,260	23	1.83

129	Mumbai MACS	Mumbai	А	72,214	7,786	10.78
130	Nagaland	Dimapur	А	2,424	335	13.82
131	Nagaland	Kiphire	А	197	8	4.06
132	Nagaland	Kohima	А	3,554	135	3.80
133	Nagaland	Longlen	А	237	0	0.00
134	Nagaland	Mokokchung	А	4,237	89	2.10
135	Nagaland	Mon	А	2,145	9	0.42
136	Nagaland	Peren	А	304	8	2.63
137	Nagaland	Phek	А	578	4	0.69
138	Nagaland	Tuensang	А	2,890	110	3.81
139	Nagaland	Wokha	А	1,796	15	0.84
140	Nagaland	Zunheboto	А	1,196	15	1.25
141	Orissa	Anugul	А	1,148	40	3.48
142	Orissa	Balangir	А	2,913	46	1.58
143	Orissa	Baleshwar	В	1,050	21	2.00
144	Orissa	Bhadrak	А	850	23	2.71
145	Orissa	Ganjam	А	6,996	570	8.15
146	Orissa	Khordha	В	2,362	66	2.79
147	Orissa	Koraput	В	2,435	57	2.34
148	Pudducherry	Pudducherry	В	9,743	376	3.86
149	Punjab	Bathinda	В	1,595	51	3.20
150	Punjab	Ludhiana	А	7,206	188	2.61
151	Rajasthan	Ajmer	В	4,481	228	5.09
152	Rajasthan	Alwar	В	660	46	6.97
153	Rajasthan	Barmer	В	267	28	10.49
154	Rajasthan	Ganganagar	А	2,255	15	0.67
155	Rajasthan	Jaipur	В	6,595	834	12.65
156	Rajasthan	Tonk	В	3,509	39	1.11
157	Rajasthan	Udaipur	В	1,690	534	31.60
158	Tamil Nadu	Chennai	В	23,692	400	1.69
159	Tamil Nadu	Coimbatore	А	43,158	829	1.92
160	Tamil Nadu	Cuddalore	А	16,656	343	2.06
161	Tamil Nadu	Dharmapuri	А	51,431	1,110	2.16
162	Tamil Nadu	Erode	А	35,775	803	2.24
163	Tamil Nadu	Kancheepuram	В	34,211	3,086	9.02
164	Tamil Nadu	Kanniyakumari	А	21,719	125	0.58
165	Tamil Nadu	KARUR	А	22,004	275	1.25
166	Tamil Nadu	Madurai	А	35,619	1,031	2.89
167	Tamil Nadu	Namakkal	А	33,404	859	2.57
168	Tamil Nadu	Perambalur	А	19,939	291	1.46
169	Tamil Nadu	Pudukkottai	А	20,247	221	1.09
170	Tamil Nadu	Ramanathapuram	А	20,071	121	0.60
171	Tamil Nadu	Salem	А	39,993	1,246	3.12
172	Tamil Nadu	Sivaganga	А	21,383	288	1.35
173	Tamil Nadu	Thanjavur	В	32,958	499	1.51

174	Tamil Nadu	The Nilgiris	А	17,370	62	0.36
175	Tamil Nadu	Theni	А	23,746	660	2.78
176	Tamil Nadu	Thiruvallur	А	32,189	285	0.89
177	Tamil Nadu	Tiruchirappalli	А	42,863	985	2.30
178	Tamil Nadu	Tirunelveli	В	38,728	545	1.41
179	Tamil Nadu	Tiruvanamalai	А	30,941	300	0.97
180	Tamil Nadu	Toothukudi	А	32,848	227	0.69
181	Tamil Nadu	Vellore	А	29,539	1,006	3.41
182	Tamil Nadu	Viluppuram	А	25,672	319	1.24
183	Uttar Pradesh	Allahabad	A	2,663	226	8.49
184	Uttar Pradesh	Banda	А	38	0	0.00
185	Uttar Pradesh	Deoria	А	1,496	99	6.62
186	Uttar Pradesh	Etawah	A	445	4	0.90
187	Uttar Pradesh	Mau	A	585	22	3.76
188	West Bengal	Barddhaman	A	3,569	120	3.36
189	West Bengal	Darjiling	В	5,075	312	6.15
190	West Bengal	Jalpaiguri	В	2,156	48	2.23
191	West Bengal	Kolkata	A	15,943	1,112	6.97
192	West Bengal	Medinipur	В	1,332	43	3.23
193	West Bengal	Murshidabad	В	1,333	41	3.08
194	West Bengal	Puruliya	А	1,263	9	0.71
195	West Bengal	Uttar Dinajpur	А	838	99	11.81
				1,901,161	116,735	6.14

Table 2.6:- HIV Positivity in A and B category districts among ICTC (Pregnant women-ANCand Direct Delivery) for the period April-September,2008						
S.NO.	State	District	District Category	Tested for HIV	Found Positive	HIV positivity (Percentage)
	Ahmedabad					(I ci centage)
1	MACS	Ahmadabad	В	12,728	32	0.25
2	Andhra Pradesh	Adilabad	A	6,460	30	0.46
3	Andhra Pradesh	Anantapur	A	10,017	61	0.61
4	Andhra Pradesh	Chittoor	A	11,861	87	0.73
5	Andhra Pradesh	Cuddapah	A	10,130	49	0.48
6	Andhra Pradesh	East Godavari	A	17,684	234	1.32
7	Andhra Pradesh	Guntur	A	15,742	194	1.23
8	Andhra Pradesh	Hyderabad	A	30,695	210	0.68
9	Andhra Pradesh	Karimnagar	A	5,759	93	1.61
10	Andhra Pradesh	Khammam	A	10,031	85	0.85
10	Andhra Pradesh	Krishna	A	15,141	222	1.47
11	Andhra Pradesh	Kurnool	A	10,191	91	0.89
12	Andhra Pradesh	Mahbubnagar	A	11,858	80	0.67
13	Andhra Pradesh	Manouonagar Medak	A	8,650	82	0.95
14	Andhra Pradesh	Nalgonda	A	8,050	86	1.07
15	Andhra Pradesh	Nellore	A	8,002	98	1.19
10	Andhra Pradesh	Nizamabad	A	12,877	102	0.79
17	Andhra Pradesh	Prakasam	A	12,877	102	1.07
18	Andhra Pradesh	Rangareddi	A	11,222	92	0.82
20	Andhra Pradesh	Srikakulam	A	9,171	53	0.58
20	Andhra Pradesh	Visakhapatnam	A	17,846	166	0.93
21	Andhra Pradesh	Vizianagaram	A	10,688	66	0.62
22	Andhra Pradesh	Warangal	A	16,371	99	0.60
23	Andhra Pradesh	West Godavari	A	14,778	248	1.68
25	Arunachal Pradesh	Lohit	A	358	1	0.28
25	Assam	Kamrup	B	9,995	26	0.26
20	Assam	Sonitpur	B	1,987	0	0.00
27	Bihar	Araria	A	311	0	0.00
20	Bihar	Katihar	B	775	2	0.00
30	Bihar	Lakhisarai	A	1,025	4	0.39
30	Bihar	Purnia	B	896	4	0.45
31	Chandigarh	Chandigarh	B	11,381	40	0.45
33	Chennai MACS	Chennai	A	26,290	727	2.77
33	Delhi	Central	B	3,129	11	0.35
35	Delhi	East	B	5,132	9	0.18
36	Delhi	North	B	7,423	18	0.18
37	Delhi	North east	B	7,423	17	0.24
38	Goa	North goa	A	3,326	23	0.69

39	Goa	South Goa	В	2,237	16	0.72
40	Gujarat	Ahmedabad	B	18,191	52	0.29
41	Gujarat	Banaskantha	A	3,134	7	0.22
42	Gujarat	Bhavnagar	B	4,198	10	0.24
43	Gujarat	Dahod	A	2,520	5	0.20
44	Gujarat	Mehsana	A	5,104	20	0.39
45	Gujarat	Navsari	A	3,792	11	0.29
46	Gujarat	Rajkot	B	8,334	42	0.50
47	Gujarat	Surat	A	11,081	92	0.83
48	Gujarat	Surendranagar	A	3,875	5	0.13
49	Gujarat	Vadodara	В	6,683	20	0.30
50	Haryana	Bhiwani	Α	1,198	3	0.25
51	Karnataka	Bagalkot	Α	8,737	174	1.99
52	Karnataka	Bangalore	Α	10,435	84	0.80
53	Karnataka	Bangalore Rural	Α	8,750	37	0.42
54	Karnataka	Belgaum	Α	18,401	190	1.03
55	Karnataka	Bellary	А	7,790	64	0.82
56	Karnataka	Bidar	А	7,060	69	0.98
57	Karnataka	Bijapur	А	7,207	76	1.05
58	Karnataka	Chamarajanagar	Α	3,515	44	1.25
59	Karnataka	Chikmagalur	А	3,461	17	0.49
60	Karnataka	Dakshina Kannada	А	8,699	21	0.24
61	Karnataka	Davanagere	А	11,935	33	0.28
62	Karnataka	Dharwad	А	10,702	86	0.80
63	Karnataka	Gadag	А	5,213	46	0.88
64	Karnataka	Gulbarga	А	13,270	71	0.54
65	Karnataka	Hassan	А	7,431	25	0.34
66	Karnataka	Haveri	А	6,916	37	0.53
67	Karnataka	Kodagu	А	2,814	7	0.25
68	Karnataka	Kolar	А	11,846	68	0.57
69	Karnataka	Koppal	А	4,308	32	0.74
70	Karnataka	Mandya	А	8,492	28	0.33
71	Karnataka	Mysore	А	15,522	72	0.46
72	Karnataka	Raichur	А	4,383	23	0.52
73	Karnataka	Shimoga	А	6,072	18	0.30
74	Karnataka	Tumkur	А	11,209	41	0.37
75	Karnataka	Udupi	А	1,999	13	0.65
76	Karnataka	Uttara Kannada	А	3,568	16	0.45
77	Kerala	Ernakulam	В	2,352	2	0.09
78	Kerala	Kozhikode	В	4,794	2	0.04
79	Madhya Pradesh	Balaghat	А	884	3	0.34
80	Madhya Pradesh	Bhopal	В	2,565	4	0.16
81	Madhya Pradesh	Dewas	А	378	2	0.53
82	Madhya Pradesh	Harda	А	121	0	0.00
83	Madhya Pradesh	Indore	В	2,521	23	0.91

84	Madhya Pradesh	Mandsaur	В	392	1	0.26
85	Madhya Pradesh	Panna	A	425	0	0.00
86	Madhya Pradesh	Rewa	A	1,962	0	0.00
87	Maharashtra	Ahmadnagar	A	15,126	87	0.58
88	Maharashtra	Akola	Α	8,702	32	0.37
89	Maharashtra	Amravati	Α	13,943	48	0.34
90	Maharashtra	Aurangabad	A	11,455	43	0.38
91	Maharashtra	Beed	A	11,207	39	0.35
92	Maharashtra	Bhandara	A	9,416	54	0.57
93	Maharashtra	Buldana	А	11,406	17	0.15
94	Maharashtra	Chandrapur	А	10,396	62	0.60
95	Maharashtra	Dhule	А	9,147	33	0.36
96	Maharashtra	Gadchiroli	А	4,459	8	0.18
97	Maharashtra	Hingoli	А	3,279	7	0.21
98	Maharashtra	Jalgaon	А	15,604	55	0.35
99	Maharashtra	Jalna	А	7,245	34	0.47
100	Maharashtra	Kolhapur	А	14,033	103	0.73
101	Maharashtra	Latur	А	12,082	65	0.54
102	Maharashtra	Nagpur	А	27,422	167	0.61
103	Maharashtra	Nanded	А	8,594	51	0.59
104	Maharashtra	Nandurbar	А	8,982	22	0.24
105	Maharashtra	Nashik	А	22,098	80	0.36
106	Maharashtra	Osmanabad	А	7,731	41	0.53
107	Maharashtra	Parbhani	А	4,656	29	0.62
108	Maharashtra	Pune	А	24,533	131	0.53
109	Maharashtra	Raigarh	А	7,799	36	0.46
110	Maharashtra	Ratnagiri	А	4,064	36	0.89
111	Maharashtra	Sangli	А	7,544	84	1.11
112	Maharashtra	Satara	А	8,535	43	0.50
113	Maharashtra	Solapur	А	16,926	186	1.10
114	Maharashtra	Thane	А	32,842	225	0.69
115	Maharashtra	Wardha	А	9,778	38	0.39
116	Maharashtra	Yavatmal	А	9,525	68	0.71
117	Manipur	Bishnupur	А	2,002	36	1.80
118	Manipur	Chandel	А	279	14	5.02
119	Manipur	Churachandpur	А	1,444	16	1.11
120	Manipur	Imphal East	А	1,118	25	2.24
121	Manipur	Imphal West	А	7,987	44	0.55
122	Manipur	Senapati	А	1,523	10	0.66
123	Manipur	Tamenglong	А	654	56	8.56
124	Manipur	Thoubal	А	2,757	11	0.40
125	Manipur	Ukhrul	А	986	23	2.33
126	Mizoram	Aizawl	А	3,503	30	0.86
127	Mizoram	Champhai	А	459	5	1.09
128	Mizoram	Kolasib	В	827	5	0.60

129	Mumbai MACS	Mumbai	А	50,999	384	0.75
130	Nagaland	Dimapur	А	1,345	26	1.93
131	Nagaland	Kiphire	Α	43	1	2.33
132	Nagaland	Kohima	Α	1,070	44	4.11
133	Nagaland	Longlen	Α	142	0	0.00
134	Nagaland	Mokokchung	А	1,107	10	0.90
135	Nagaland	Mon	Α	708	4	0.56
136	Nagaland	Peren	А	192	2	1.04
137	Nagaland	Phek	А	272	2	0.74
138	Nagaland	Tuensang	А	375	19	5.07
139	Nagaland	Wokha	А	327	0	0.00
140	Nagaland	Zunheboto	А	802	3	0.37
141	Orissa	Anugul	А	1,280	3	0.23
142	Orissa	Balangir	А	722	1	0.14
143	Orissa	Baleshwar	В	289	0	0.00
144	Orissa	Bhadrak	А	704	0	0.00
145	Orissa	Ganjam	А	6,828	23	0.34
146	Orissa	Khordha	В	1,311	3	0.23
147	Orissa	Koraput	В	1,617	6	0.37
148	Pudducherry	Pudducherry	В	3,818	14	0.37
149	Punjab	Bathinda	В	1,806	1	0.06
150	Punjab	Ludhiana	А	3,757	8	0.21
151	Rajasthan	Ajmer	В	7,851	15	0.19
152	Rajasthan	Alwar	В	2,708	1	0.04
153	Rajasthan	Barmer	В	712	1	0.14
154	Rajasthan	Ganganagar	А	835	0	0.00
155	Rajasthan	Jaipur	В	7,221	11	0.15
156	Rajasthan	Tonk	В	3,726	1	0.03
157	Rajasthan	Udaipur	В	2,776	13	0.47
158	Tamil Nadu	Chennai	В	15,043	34	0.23
159	Tamil Nadu	Coimbatore	А	25,050	66	0.26
160	Tamil Nadu	Cuddalore	А	19,819	32	0.16
161	Tamil Nadu	Dharmapuri	А	29,938	79	0.26
162	Tamil Nadu	Erode	А	14,238	46	0.32
163	Tamil Nadu	Kancheepuram	В	22,918	6	0.03
164	Tamil Nadu	Kanniyakumari	А	8,703	10	0.11
165	Tamil Nadu	Karur	А	8,521	12	0.14
166	Tamil Nadu	Madurai	А	23,760	51	0.21
167	Tamil Nadu	Namakkal	А	10,048	43	0.43
168	Tamil Nadu	Perambalur	А	9,575	26	0.27
169	Tamil Nadu	Pudukkottai	А	13,497	18	0.13
170	Tamil Nadu	Ramanathapuram	А	10,744	11	0.10
171	Tamil Nadu	Salem	А	26,677	76	0.28
172	Tamil Nadu	Sivaganga	А	9,967	15	0.15
173	Tamil Nadu	Thanjavur	В	21,142	30	0.14

174	Tamil Nadu	The Nilgiris	А	4,554	1	0.02
175	Tamil Nadu	Theni	A	9,816	34	0.35
176	Tamil Nadu	Thiruvallur	А	19,880	31	0.16
177	Tamil Nadu	Tiruchirappalli	Α	21,365	62	0.29
178	Tamil Nadu	Tirunelveli	В	21,934	26	0.12
179	Tamil Nadu	Tiruvanamalai	А	22,739	43	0.19
180	Tamil Nadu	Toothukudi	А	14,228	27	0.19
181	Tamil Nadu	Vellore	А	32,855	103	0.31
182	Tamil Nadu	Viluppuram	А	23,149	35	0.15
183	Uttar Pradesh	Allahabad	А	1,093	6	0.55
184	Uttar Pradesh	Banda	А	130	0	0.00
185	Uttar Pradesh	Deoria	А	454	0	0.00
186	Uttar Pradesh	Etawah	А	615	1	0.16
187	Uttar Pradesh	Mau	А	279	1	0.36
188	West Bengal	Barddhaman	А	8,728	9	0.10
189	West Bengal	Darjiling	В	2,600	27	1.04
190	West Bengal	Jalpaiguri	В	1,422	1	0.07
191	West Bengal	Kolkata	А	32,929	47	0.14
192	West Bengal	Medinipur	В	2,529	7	0.28
193	West Bengal	Murshidabad	В	3,143	2	0.06
194	West Bengal	Puruliya	А	1,184	2	0.17
195	West Bengal	Uttar Dinajpur	А	900	7	0.78
				1,655,631	9,084	0.55

## Annex IV

Annex IV- TotalNumber of Syringes and Needles distributed and percentage coverage during the period April-September,2008							
	Total coverage	No. of Syringes distributed	No. of Needles distributed	No. of Needles and syringes returned			
AllIndia	504,699	2,683,927	2,581,821	1,720,281			
Ahmedabad MACS	0	0	0	0			
Andhra Pradesh	0	4	2	2			
Arunachal Pradesh	2,215	28,711	29,837	11,480			
Assam	3,155	16,594	30,588	4,208			
Bihar	12,780	50,703	25,955	43,162			
Chandigarh	13,591	7,259	7,728	14,031			
Chhatisgarh	0						
Dadra & Nagar Haveli	0	0	0	0			
Delhi	28,047	88,181	152,026	94,667			
Goa	2,181	14,412	0	6,332			
Gujarat	0	0	0	0			
Haryana	2,504	2,602	5,220	1,894			
Himachal Pradesh	0						
Jammu & Kashmir	625	130	130	89			
Jharkhand	1,867	4,810	6,777	4,190			
Karnataka	302	225	10	179			
Kerala	2,822	736	1,130	1,267			
Madhya Pradesh	0						
Maharashtra	0						
Manipur	46,186	129,208	11,575	73,262			
Meghalaya	314	0	0	0			
Mizoram	59,178	687,378	617,336	450,286			
Mumbai MACS	24,118	17,300	60,566	9,156			
Nagaland	128,390	890,201	866,376	475,611			
Orissa	6,262	11,714	4,059	9,289			
Pondicherry	0						
Punjab	9,788	46,254	73,426	29,197			
Rajasthan	1,339	9,577	6,854	355			
Sikkim	5,658	56,906	224	14,883			
Tamil Nadu	0			,			
Tripura	0						
Uttar Pradesh	56,432	284,475	300,420	187,412			
Uttaranchal	1,588	11,509	9,593	1,447			
West Bengal	95,357	325,038	371,989	287,882			