

Assessment of Implementation of The Pradhan Mantri National Dialysis Programme in Hospitals, Delhi

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Abstract

Introduction: Annually 2.2 Lakh patients of End-Stage Renal Disease are added in India leading to demand of 3.4 Crore dialysis. To make Renal-care services affordable to APL and free to the BPL, Ministry of Health & Family Welfare launched Pradhan Mantri National Dialysis Programme (PMNDP) in Public Private Partnership mode in 2016. Aim of study is to assess the Implementation of PMNDP.

Material and Methods: The study was conducted in 4 randomly selected Hospitals in Delhi. In total, 170 respondents (enrolled in Dialysis Units) were interviewed. In depth Interviews of the healthcare providers and secondary data collection was done.

Results: The 4 dialysis centres became functional during 2018-21 with 35 Haemodialysis-machines providing services to 200 patients on an average. 40 Haemodialysis sessions were conducted daily in one centre with fixed days and timings for patients. Waiting time is less than one hour. Majority of respondents were BPL card holders, with no permanent source of income. More than half were uneducated or below metric. Majority of respondents are found to have significant improvement in quality of life. Majority of the beneficiaries came to know about this programme after multiple hospital-visits. 3 hospitals didn't have sign-boards mentioning dialysis programme. No healthcare-worker generated awareness in community. Dialysis centres are not being fully utilized for want of technicians, patients. For 100 % of beneficiaries one reprocessed dialyzer is being used on average 10 times. 3 Hospitals didn't have blood transfusion facilities for beneficiaries of this Programme. 70 % beneficiaries paid 3500 monthly medicine cost on average. More than half beneficiaries paid 14000 on average for vascular access placement. 45 % patients/attendants suffered monthly wage loss 12,000 on average.

Conclusion: Spread of awareness through IEC BCC is required in the community. Re-use of the dialyzer should not compromise the quality. None of the dialysis units had nephrologists at the time of dialysis for effective monitoring and to deal with any exigencies. Beneficiary travels on an average 15 km to reach Dialysis Centre. Hence, Dialysis centres with in 5 km radius with sample collection, free medicines blood transfusion facilities are required.