Guillain-Barre Syndrome and Ayushman Bharat: Case Reports from a Tertiary Care Hospital of Himachal Pradesh, India

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ABSTRACT

Universal health coverage (UHC) is defined as ensuring that all people have access to needed health services (including prevention, promotion, treatment, rehabilitation and palliation) of sufficient quality to be effective while also ensuring that the use of these services does not expose the user the financial hardship. To achieve UHC Government of India has started Ayushman Bharat; Pradhanmantri Jan Arogya Yojana to provide free secondary and tertiary level care to 500 million socially and economically unprivileged population of country. Guillain Barre Syndrome (GBS) is a relatively rare disorder, with an incidence ranging between 0.5 to 1.5 cases per 100,000 individuals in the population of 0-17 years. Ayushman Bharat covers GBS but the package assigned to it was not sufficient to cover its actual cost of treatment. Like Guillain Barrie Disease there may be some other diseases which are either not covered at all or inadequately covered. All these lacunae should be reported to the Government and authorities should take series note on these problems and they should be solved at the earliest.

Key Words: Guillain Barre Syndrome, Universal Health coverage, Ayushman Bharat, Immunoglobulins

INTRODUCTION

Health is a human right. No one should get sick and die just because they are poor or because they cannot access the health services they need. Universal health coverage (UHC) is defined as ensuring that all people have access to needed health services (including prevention, promotion, treatment, rehabilitation and palliation) of sufficient quality to be effective while also ensuring that the use of these services does not expose the user the financial hardship. Universal health coverage is the basic pillar for attaining Goal 3 of Sustainable developmental goals; Ensure healthy life and well being of all at all ages. To achieve UHC Government of India has started Ayushman Bharat; Pradhanmantri Jan Arogya Yojana to provide free secondary and tertiary level care to 500 million socially and economically unprivileged population of country. Different diseases have been assigned different packages and health facilities are paid according to the package assigned to the patient by treating doctor. Every new scheme has some shortcomings and it is the responsibility of all the concerned persons especially the health care personal to identify and report these to the policymakers so that necessary corrective actions can be taken.

Guillain Barre Syndrome (GBS) is classically defined as an acute acquired sensitive-motor polyradiculoneuropathy post infectious, immunologically mediated, usually of demyelinating nature. It is the leading cause of acute flaccid paralysis in developed countries, in which polio has been eradicated. GBS is a relatively rare disorder, with an incidence ranging between...
0.5 to 1.5 cases per 100,000 individuals in the population of 0-17 years. [5–8] In most paediatrics patients evolution is good, although in 10% of cases sequelae is observed. The mortality is low (3-4%). The best outcome of GBS in children has been linked to the most appropriate management of critically ill patients and the use of intravenous immunoglobulin. [5–10]

Ayushman Bharat covers GBS but the package assigned to it was not sufficient to cover its actual cost of treatment. It is providing a package of Rupees 2000 to 3600 per day depending upon severity of disease. We came across two patients of GBS at pediatric ward of Indira Gandhi Medical College (IGMC) Shimla, Himachal Pradesh. First patient is six years old (Weight 20 Kg) and other one is 14 years old (Weight 40 Kg). Both the patients presented with progressive ascending weakness of body starting from lower limbs. After detailed investigations a final diagnosis of GBS was made. Required dose of immunoglobulins for the patients was calculated as 8 and 16 IU per day costing approximately 14000 and 21000 Indian rupees per day respectively. These patients were denied immunoglobulins at Ayushman Bharat counter of the hospital. We had also contacted Ayushman Bharat helpline number, but they also told that benefit of a disease package can not be increased. In the end one of the patient had purchased the immunoglobulins by paying himself (Out of pocket expenditure) while the other one didn’t have money to buy it. For that patient we had asked a private pharmacy and they agreed to provide them the immunoglobulins till money will be arranged. Then we had applied for relief money under chief minister relief fund and ultimately got money for both the patients from the CM relief fund. But during this process there was delay in administration of immunoglobulins to the children which could have proven to be fatal. Also this delay causes significant mental trauma to parents of children.

CONCLUSION
Like Guillain Barie Disease there may be some other diseases which are either not covered at all or inadequately covered under Ayushman Bharat Scheme. All these lacunae should be reported to the Government and authorities should take serious note on these problems and they should be solved as earliest as possible.

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