

India doctor shortage drives rise in superbugs, report warns

By

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A critical shortage of healthcare professionals in India is hampering access to lifesaving antibiotics and contributing to a rise in antibiotic resistance, a report has warned.

The research, [published by the Centre For Disease Dynamics, Economics & Policy \(CDDEP\)](#) shows there is just one doctor for every 10,189 people in the country, nowhere near the World Health Organization's recommendation of one doctor per 1,000 inhabitants.

In order to satisfy its public health requirements, India needs to hire a further 600,000 doctors, the report says.

“Many of the doctors and nurses trained in India do not stay here,” said Dr Isabel Frost, a fellow at CDDEP and one of the authors of the report.

“This is for multiple reasons – in poorly-funded settings resources may not be available to provide

high standards of care to patients, hospitals are overcrowded and staff are overworked.

“In West Bengal, there are outpatient clinics with just one doctor but up to 800 patients needing attention in one day,” she said.

The report warns that the shortage of doctors and other staff is driving antimicrobial resistance as patients are being given antibiotics incorrectly. But they are also unable to get the drugs when they are needed, leading to high rates of preventable deaths.

The shortage of trained doctors has led to a proliferation of unqualified quacks - just 19 per cent of people in rural India who call themselves doctors actually have a medical degree.

These quacks are usually trained in alternative remedies, such as homeopathy, but advertise themselves as qualified medical professionals to patients desperately seeking help.

They are seen as big drivers of antimicrobial resistance as they often dole out antibiotics when patients do not need them.

The research found that staff shortages are also affecting supply of medicines, with public health facilities in India regularly running out of essential medical stocks due in part to shortages of staff in

supply chains. This forces patients to purchase high-cost, poor-quality antibiotics from uncertified vendors.

In some states antibiotic availability is as low as 50-60 per cent and patients often cannot afford to travel elsewhere to purchase what they need.

The report also found that the cost of healthcare in India is pushing 57 million people into poverty every year.

The introduction of [Modicare in September 2018](#) – the provision of 500,000 rupees (£5,545) worth of health insurance for the 100 million lowest-income families – is expected to reduce this number.

However, should the cost of any healthcare exceed this amount, a family must pay for their own treatment.

Around 65 million Indians still live below the poverty line on less than \$1.90 per day (£1.40) and with a shortage of doctors a private consultation alone can now cost up to \$15 (£11.50).

In order to address the huge deficit in the number of doctors, the Indian government has proposed allowing quacks to legally practise as conventional doctors if they take a short conversion course.

But this move has been met by fierce opposition from already practising doctors.

“The government is giving sanction to quackery,” the Indian Medical Association said. “If those doctors make mistakes and people pay with their lives, who is going to be held accountable?”

CDDEP has instead advised the Indian government to retain its doctors by improving salaries and local working environments.