

# Goitre Elimination : A Matter Of Re 1 Only

GOITRE is a nutritional disease resulting from a lack of iodine. In India, it affects nearly 40 million people and another 80 million live at risk of developing the disease. The majority of those afflicted with goitre live along the southern slopes of the Himalayas, although pockets of Maharashtra, Tamil Nadu, and Delhi are also areas where goitre is a major health hazard.

In every age group, women fall victim to goitre more often than men. Moreover, women remain susceptible to it longer than do men. Many women suffer the tragic consequences of goitre well into middle age.

Goitre is most familiar in the form of a large neck swelling. This results from a lack of iodine in the thyroid gland. But goitre, or iodine deficiency disorder, as it is medically called, has multiple manifestations. In women, iodine deficiency, results in high rates of infant mortality and induced abortion. In the entire, population, iodine deficiency causes feeble-mindedness, deaf-mutism, and extreme lassitude and loss of energy.

This is especially sad because the remedy for goitre is simple and inexpensive. At a cost of between 50 to 90 paise per person per year, iodine can be added to ordinary table salt. This will prevent goitre. In the USA and other countries, iodisation of salt is compulsory and this has virtually eliminated goitre.

In India, a major factor preventing the successful implementation of a salt iodisation programme has been a lack of awareness at all levels, from the union government down to local health officials, doctors, social action groups, and

consumers. According to a report sponsored by the Nutritional Foundation of India, a doctor in Himachal Pradesh thought that goitre was a natural stage of adolescence through which people must pass. In parts of Kashmir, a swollen neck is considered a beautiful trait in a young woman, making her more marriageable. But there are reports of women being thrown out of the house when the swelling became too large. Despite the fact that women as a group are the primary victims of this disease, it has not been identified as a women's issue.

In earlier times, 90 percent of a person's iodine requirement was available in food but the combined effects of deforestation, flooding, and poor water have changed this. Therefore, in 1954, the union government undertook the National Goitre Control Programme (NGCP), primarily by committing itself to subsidise the construction and operation of iodisation plants throughout the country.

Ambitious in its aims, the NGCP was never actively pursued. A failure of communication between the union and state governments, bureaucratic bungling and inattention to the need to correct iodine deficiency left the NGCP in a shambles. As a recent report of the journal World Health Forum reported: "More than 50 percent of the installed production capacity remains idle. According to Dr C.S. Pandar, a goitre expert at the All India Institute of Medical Sciences, Didwana Chemicals, a private manufacturer of salt, built an iodisation plant in Rajasthan which remains idle because government will not issue it a license for salt production. Meanwhile, with both public and private

salt iodisation moving at a snail's pace, for no obvious reason other than governmental indifference, millions of lives are being wrecked."

On August 10, 1986, the minister for industries announced that Rs 28 crores are being allocated by the central government to revitalise the NGCP. But it is a sign of the ignorance attending this issue that a survey of most of the major English language press on August 11 and 12 revealed that only *The Economic Times* recorded the announcement, despite the fact that it was broad-cast on television and radio.

A woman advocate in the supreme court has filed a petition on behalf of public interest advocates, New Delhi, asking that the court issue an order requiring the state governments to implement goitre control schemes. The court's decision is pending although it is expected to issue an order sympathetic to the plight of the 120 million people who live in goitre endemic areas and therefore require iodised salt.

But if the government's latest allocation of Rs 28 crores is to be used effectively, more is needed than: the issue of a judicial order from the supreme court in Delhi. Incentives and subsidies to salt makers could solve the problem in one year. Consumers, their advocates, health personnel and others desperately need to be educated as to the necessity of iodised salt. Otherwise, large numbers of women, men and their children, born and unborn, will continue to be crippled and their lives wasted by this nutritional disease which can so easily be prevented. □