



**DIRECTORATE OF HEALTH SERVICES**

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**Disaster management- Management of NCDs**

Considering the ongoing unfavourable climatic conditions in the state a disaster warning has been issued by the state authorities

- The disaster cycle consists of 4 phases
  1. The phase of preparedness
  2. The response phase following disaster
  3. The recovery phase
  4. Mitigation phase

Considering the current situation in Kerala both preparation phase and response phase are applicable, since the disaster that is expected is much more serious than that has occurred. Therefore along with the response activities for the current calamities, a structured preparatory activity for the unexpected major disaster has also to be planned. This included training of the first responders like Police, Fire force, Volunteers, on patient transportation, triage, first aid etc. Identification of suitable relief camps, procurement of essential drugs, consumables the identification of medical teams, the identification of transporting vehicles including Ambulances, Preparation of major hospitals for disaster management shall be done.

Simultaneously in the response phase for the already occurred disaster the following precautions may be observed.

1. The medical team has less significant role at the site of disaster and may be avoided
2. The role of medical team shall be more preventive than curative at the camps.
3. Recreating a General OP at the relief camp will not serve the purpose but instead will create overcrowding and resulting confusions
4. Blood Pressure and Blood sugar examination may be done at least once to all patients who claim the history of NCDs
5. Since many patients may be without their prescriptions of medicines and is less likely to remember the names of tablets they consume, adequate stock of antihypertensive and antidiabetic drugs may be stocked in the camp. The medicines shall not be issued for more than two weeks, since the exact medicines which they followed is unknown.
6. Patients on treatment for chronic illness (Renal, Cancer, Cardiac) shall be dealt with caution and may be transferred to higher centres
7. Patients on palliative care, morphine management shall be provided these services, seeking help from the concerned service provider.
8. Elderly patients and physically disabled patients shall be given priority and may be transferred to safe locations if possible.
9. Mental health camps shall be conducted periodically
10. Management of COPDs shall be done as per the guidelines in the relief camps.

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Dr.Bipin K Gopal  
State Nodal Officer NCD