

**GOVERNMENT OF MIZORAM
HEALTH & FAMILY WELFARE DEPARTMENT
SECRETARIAT BUILDING, NEW CAPITAL COMPLEX, KHATLA
MIZORAM, AIZAWL-796001**

NOTIFICATION

Dated Aizawl, the 23rd March, 2026.

No. M-36011/1/2026-HFW : Whereas snakebite envenoming is a potentially life-threatening disease following the bite of a venomous snake. Venomous snake bites can result in medical issues which can be deadly or lead to permanent impairment if timely and appropriate treatment is not given. Majority of snakebite envenomation deaths and catastrophic sequelae can be avoided with prompt availability to safe and effective antivenoms, timely transport and referral.

Whereas as per World Health Organization data, global snake bite incidences stand at around 5.4 million with about 1.8 to 2.7 million accounting to snake envenoming annually resulting in approx. 8000-1.3 lakh deaths and triple the number of amputations and permanent disabilities. WHO listed snakebite envenoming as a priority neglected tropical disease in 2017 and advocates developing a global strategy to halve the number of snakebite-induced deaths and disabilities by 2030.

Whereas in order to address the issue of snakebite, Ministry of Health & Family Welfare Department, Government of India launched the 'National Action Plan for Prevention and Control of Snakebite Envenoming (NAPSE)' (A strategic approach to halve the deaths and disabilities due to snakebite envenoming by 2030). One of the main objectives under NAPSE is to strengthen the surveillance of snakebite cases and deaths in India and that a robust surveillance system is essential for accurately tracking snakebites incidents and deaths, which will provide valuable data to inform and evaluate the effectiveness of intervention.

Whereas the Ministry of Health & Family Welfare Department, Government of India issued a D.O. No. ISCP/57155/06/DZDP/NCDC dated the 27th November, 2024 wherein it is stated that a mandatory notification of all snakebite cases and deaths is required to strengthen snakebite surveillance that will help the stakeholders gauge accurate burden, high risk areas, factors responsible for deaths of snakebite victims etc. resulting in improved clinical management of snakebite victims and further, notification of snakebite cases and deaths will also improve reporting from private health facilities.

And whereas the Ministry of Health & Family Welfare Department, Government of India in its D.O. No. ISCP/57155/06/DZDP/NCDC dated the 27th November, 2024 requested all States/UTs to make snakebite cases and deaths a 'Notifiable Disease' making it mandatory for all government and private health facilities (including medical colleges) to report all suspected probable Snakebite Cases and deaths.

Now therefore, for compliance of the request of the Ministry of Health & Family Welfare Department, Government of India vide D.O. No. ISCP/57155/06/DZDP/NCDC dated the 27th November, 2024 and for effective implementation of the 'National Action Plan for Prevention and Control of Snakebite Envenoming (NAPSE)' to halve the deaths and disabilities due to snakebite envenoming by 2030, the competent authority hereby declares 'Snakebite' as a 'Notifiable Disease' within the state of Mizoram in the interest of general public health and safety with immediate effect and until further order to strengthen the surveillance of snakebite cases and deaths, for accurately tracking snakebites incidents and deaths and to improve clinical management of snakebite victims and timely treatment and intervention.

Instructions for Compliance:

All government and private healthcare facilities, including all healthcare providers, public and private hospitals, nursing home, clinics etc. (including Medical College), are mandated to-

1. Report all confirmed and suspected snakebite cases and related deaths to the IDSP IHIP platform within 24 hours without fail.
2. Accurate line-list records of snakebite cases and deaths shall be maintained at all health facilities, capturing demographic details, clinical presentation, treatment outcome and to monitor ASV stocks and other essential supportive medicines.
3. All health facilities will submit a periodic (monthly) report to the Chief Medical Officer of the concerned district, who shall compile and forward it to the State Nodal Office for submission to the concerned programme division.

Sd/-K.LALRINZUALI
Commissioner & Secretary to the Govt. of Mizoram
Health & Family Welfare Department

Memo No. M-36011/1/2026-HFW

:

Dated Aizawl the 23rd March, 2026.

Copy to:

1. P.S to Governor of Mizoram.
2. P.S to Chief Minister, Mizoram.
3. P.S to Speaker, Mizoram.
4. P.S to Minister, Health & Family Welfare Department.
5. Sr. P.P.S. to Chief Secretary, Govt. of Mizoram.
6. All Administrative Departments.
7. Principal Director, Health & Family Welfare Department.
8. All Deputy Commissioners, Mizoram.
9. Director of Hospital & Medical Education.
10. Director of Health Services.
11. Director, Zoram Medical College & Hospital.
12. Mission Director, National Health Mission.
13. All Sr. Medical Superintendents/ Medical Superintendents/District Medical Superintendents, Mizoram.
14. All Sr. Chief Medical Officers/ Chief Medical Officers, Mizoram.
15. Controller, Printing & Stationery with six (6) spare copies for publication in the Official Gazette.
16. All concerned members.
- ✓ 17. Web Manager, IT Section, Directorate of Health Services.
18. President, Non-Government Hospital Association of Mizoram.
19. Guard File.



(H.LALHRUAILTUANGA)
Under Secretary to the Govt. of Mizoram
Health & Family Welfare Department