Myths Vs. Facts on COVID-19 mortality figures

Inferences drawn from comparison of HMIS and CRS data on Covid-19 deaths are fallacious and speculative

India has a robust system of recording Covid-19 deaths

There have been some speculative media reports claiming higher fatality figures due to COVID-19 based on data from National Health Mission’s Health Management Information System (HMIS). The report compares data from the Civil Registration System (CRS) and HMIS to draw erroneous inferences. Such reports are conjectures and speculation without any substantial basis.

Citing the death numbers reported in the HMIS, the media report goes on to say that “In the absence of other information, these deaths should all be considered as Covid-19 deaths”. As per the media report itself ‘over 2,50,000 deaths were from causes not known’. Attributing any death to COVID-19 without any basis than based on empirical data is fallacious and such inferences are mere figments of imagination.

It is reiterated that the Union Government has been transparent in its approach to COVID data management and a robust system of recording all COVID-19 related deaths already exists. All States and Union Territories have been entrusted with the responsibility to update the data in this particular system on a continuous basis. In order to avoid inconsistency in number of deaths being reported, Indian Council of Medical Research (ICMR) has issued ‘Guidance for appropriate recording of COVID-19 related deaths in India’ for correct recording of all deaths as per ICD-10 codes recommended by World Health Organisation (WHO) for mortality coding.

States and UTs have been urged through various formal communications, multiple video conferences and through deployment of Central teams for correct recording of deaths in accordance with the prescribed guidelines. Union Health Ministry has also regularly emphasized the need for a robust reporting mechanism for monitoring district wise cases and deaths on a daily basis.

It is a well-known fact that there shall always be differences in mortality recorded during a profound and prolonged public health crisis such as COVID pandemic and well conducted research studies on mortalities are usually done after the event when data on mortalities are available from reliable sources. The methodologies for such studies are well established, the data sources are defined as also the valid assumptions for computing mortality.

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