



PrepAlpine

— Preparation Meets Precision —

CURRENT AFFAIRS

For UPSC Civil Services Examination Aspirants



RESEARCH-DRIVEN
CONTENT



DAILY COVERAGE
WITH MAINS FOCUS



EXAM-READY
APPROACH

Stay **Informed**. Stay **Ahead**. Succeed.

Copyright © 2025 PrepAlpine

All Rights Reserved

No part of this publication may be reproduced, distributed, or transmitted in any form or by any means—whether photocopying, recording, or other electronic or mechanical methods—without the prior written permission of the publisher, except in the case of brief quotations embodied in critical reviews and certain non-commercial uses permitted by copyright law.

For permission requests, please write to:

PrepAlpine

Email: info@PrepAlpine.com

Website: PrepAlpine.com

Disclaimer

The information contained in this book has been prepared solely for educational purposes. While every effort has been made to ensure accuracy, PrepAlpine makes no representations or warranties of any kind and accepts no liability for any errors or omissions. The use of any content is solely at the reader's discretion and risk.

DAILY CURRENT AFFAIRS DATED 04.08.2026

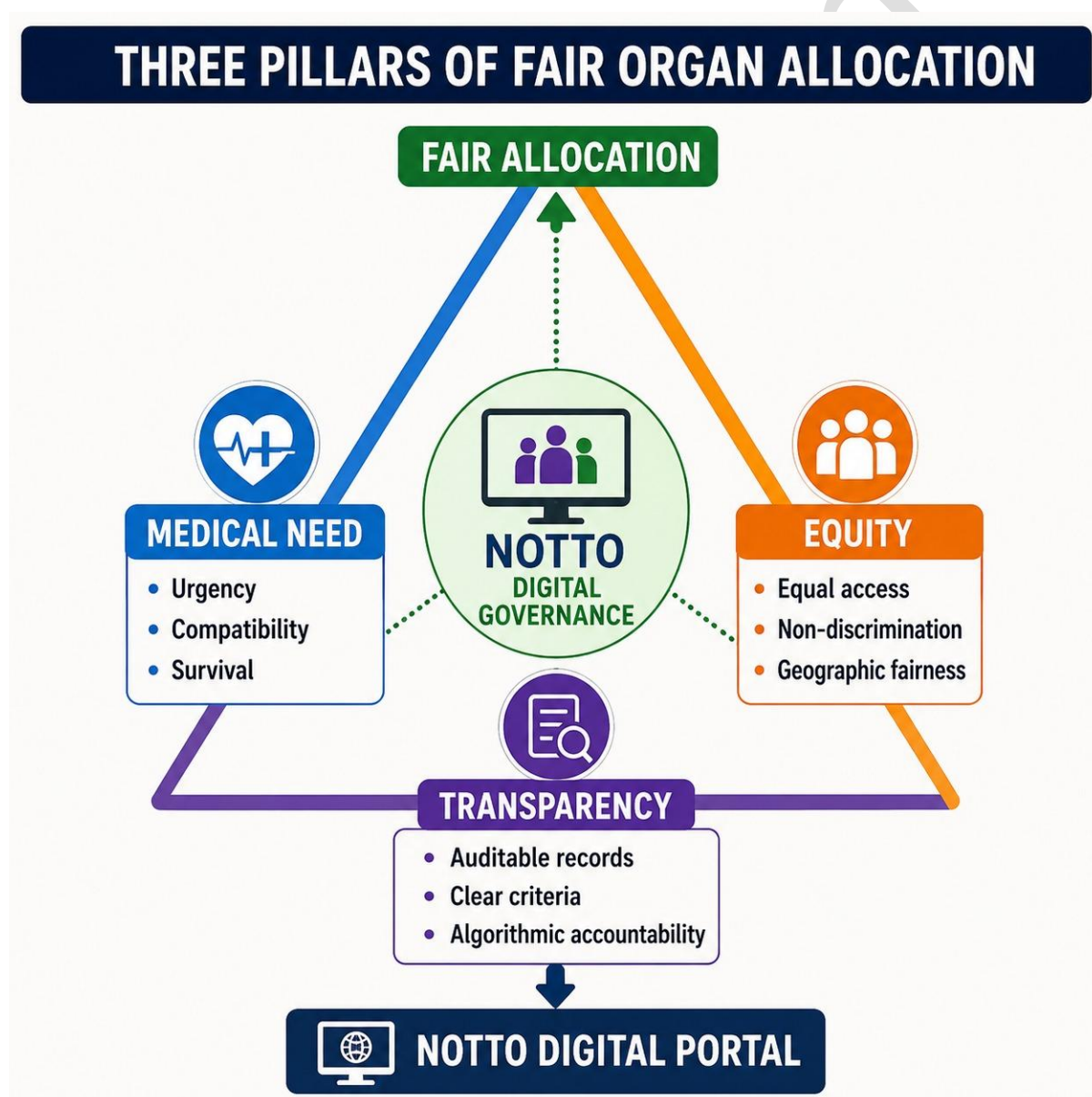
GS Paper II: Current Affairs

1. National Real-Time Organ Transplant Portal – Digital Health Governance

a. Introduction

The National Organ and Tissue Transplant Organisation (NOTTO) has launched a dynamic national portal and mobile application for organ transplantation. It seeks to create a unified country-wide waiting list, enable real-time allocation tracking, facilitate nationwide swap-donor matching and improve transparency and equity in access to organs.

NOTTO is the apex national body coordinating organ and tissue procurement and transplantation. Organ transplantation in India is governed primarily by the Transplantation of Human Organs and Tissues Act, 1994. Organ transplantation involves a fundamental governance challenge: fair allocation of an extremely scarce life-saving resource.



b. Key Features

Reform	Significance
Unified waiting list	Hospital → State → regional → national integration
Real-time tracking	Greater transparency in allocation and movement of organs
Super-urgent requests	Prioritisation based on critical medical need
National swap matching	Larger pool for incompatible donor-recipient pairs
Outcome tracking	National data on post-transplant outcomes
Aadhaar-linked pledges	Clearer record of individuals' donation wishes
Digital regulatory approvals	Registration/renewal of transplant centres and committees

c. Analysis/ Observations

From fragmented lists to integrated governance

Earlier, hospitals and States relied substantially on their own systems. A unified digital architecture can create a single information ecosystem, improving coordination among hospitals, States and NOTTO.

This can reduce:

- duplication and information gaps;
- delays in identifying recipients;
- administrative discretion and opacity; and
- wastage of organs due to coordination failures.

This is especially important because donated organs are time-sensitive public-health resources.

Transparency can strengthen distributive justice

Organ allocation involves competing claims over a scarce resource. Real-time recording of allocation can create an auditable trail, improving accountability and public trust.

However, digitisation alone cannot guarantee fairness. The underlying allocation algorithm and criteria must themselves be equitable, transparent and medically justified.

National swap-donor matching: network effect

A major reform is expansion of kidney-swap matching beyond individual hospitals.

Small hospital donor pool → Low probability of compatible match

National donor pool → More possible combinations → Higher matching probability → More transplants

Thus, digital integration creates a network effect, where the usefulness of the system increases with the size of the participating pool.

Outcome tracking enables evidence-based policymaking

India lacks a comprehensive national database on post-transplant outcomes. Longitudinal data can help:

- compare transplant-centre performance;
- identify complications and survival trends;
- improve clinical protocols; and

- strengthen evidence-based regulation.

The portal therefore moves beyond allocation towards life-cycle governance of transplantation.

Major Challenge: Federal Fragmentation

States currently use different criteria for determining recipient priority—some use scoring systems, others waiting time, regional zoning or availability of living donors.

Consequently:

A unified waiting list does not automatically create a unified allocation system.

For now, allocation priority will continue to follow State guidelines. This can create differential treatment of similarly situated patients depending on geography.

The challenge is therefore to harmonise minimum national principles while retaining flexibility for legitimate regional requirements—a classic issue of cooperative federalism in healthcare.

Other Concerns

- **Digital divide:** Access must not become biased towards better-equipped hospitals or digitally connected patients.
- **Data protection:** Aadhaar linkage and longitudinal medical records involve sensitive personal data requiring robust cybersecurity and purpose limitation.
- **Algorithmic transparency:** Criteria governing priority and “super-urgent” status must be transparent and independently auditable.
- **Supply constraint:** Better allocation cannot by itself solve India’s shortage of donated organs.
- **Inter-State coordination:** Efficient allocation must be complemented by rapid organ transportation and green-corridor logistics.

d. Way Forward

- Develop consensus on minimum national allocation criteria based on medical urgency, compatibility, waiting time and equity.
- Ensure transparent and independently auditable allocation algorithms and digital records.
- Establish strong privacy and cybersecurity safeguards for health and Aadhaar-linked data.
- Use outcome data for performance benchmarking and evidence-based regulation of transplant centres.
- Expand awareness, counselling and deceased-donor programmes to increase the organ donor pool.
- Strengthen inter-State transport and hospital coordination to minimise organ wastage.

Conclusion:

The NOTTO portal can transform organ transplantation from a fragmented hospital- and State-based system into an integrated national allocation ecosystem. However, technology can improve transparency only when accompanied by uniform principles of fairness, strong data protection, cooperative federalism and expansion of organ donation.

Reader's Note — About This Current Affairs Compilation

Dear Aspirant,

This document is part of the PrepAlpine Current Affairs Series — designed to bring clarity, structure, and precision to your daily UPSC learning.

While every effort has been made to balance depth with brevity, please keep the following in mind:

1. Orientation & Purpose

This compilation is curated primarily from the UPSC Mains perspective — with emphasis on conceptual clarity, analytical depth, and interlinkages across GS papers.

However, the PrepAlpine team is simultaneously developing a dedicated Prelims-focused Current Affairs Series, designed for:

- factual coverage
- data recall
- Prelims-style MCQs
- objective pattern analysis

This Prelims Edition will be released separately as a standalone publication.

2. Content Length

Some sections may feel shorter or longer depending on topic relevance and news density. To fit your personal preference, you may freely resize or summarize sections using any LLM tool (ChatGPT, Gemini, Claude, etc.) at your convenience.

3. Format Flexibility

The formatting combines:

- paragraphs
- lists
- tables
- visual cues

—all optimised for retention.

If you prefer a specific style (lists → paras, paras → tables, etc.), feel free to convert using any free LLM.

4. Monthly Current Affairs Release

The complete Monthly Current Affairs Module will be released soon, optimized to a compact 100–150 pages — comprehensive yet concise, exam-ready, and revision-efficient.

PrepAlpine