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## CASE COMMENTARY: RACHANA GANGU & ANR. V. UNION OF INDIA & ORS.


***~ Aditi Gautam***


**CITATION:** 2022 SCC OnLine SC 1125

**JUDGMENT DATE:** 10 March, 2026

**CORAM:** Justice Vikram Nath


**ABSTRACT:**

The emergence of the novel coronavirus (COVID-19) pandemic in Wuhan, China, towards the end of 2019 led to its rapid propagation worldwide. In order to overcome the public health crisis, states have been implementing mass vaccination drives. The case of Rachana Gangu & Anr. v. Union of India & Ors. is concerned with the constitutional concerns that arose due to deaths allegedly caused by vaccination and the lack of an integrated mechanism for compensation. The Supreme Court ruled that even though the scientific determination of the efficacy of vaccines is best left to the experts, it is the duty of the State to provide an effective redress mechanism as per Article 21 of the constitution.


**HISORICAL BACKGROUND & FACTS OF THE CASE:**

The petitioner, Rachna Gangu, had two daughters, of 18 and 20 years, respectively. Petitioner's younger daughter received her first dose of vaccine on 29$^{th}$ of May 2021. Her platelet count dropped, she got a severe headache, and her fingertips started to feel numb and tingle. In due course of time the condition of the daughter worsened, and the medical department told the petitioner that her daughter had been diagnosed with cerebral venous sinus thrombosis (CVST), which is a rare disease that occurs when a thrombus forms in dural venous sinuses, venous

drainage and causes intracranial hypertension, venous infarction, or hemorrhage.[1] Younger Daughter passed away on the 19th of June, 2021.

Petitioner's elder daughter got her first vaccine done on the 8th of June, 2021. Thereafter, she got a fever, arthralgia, headache, and myalgia. After a few days she was diagnosed with Multisystem Inflammatory Syndrome (MISC-C/A), a dysregulated autoimmune-mediated illness in genetically susceptible patients following COVID-19 [2] with an interval of 2–6 weeks, and eventually died on the 10th of July 2021.

The, petitioner, parents of the deceased, filed a writ petition before the Supreme Court invoking Article 32 of the Constitution, claiming that their children died after getting Vaccinated for COVID-19. The petition sought to inquire about the deaths caused by those vaccines, to formulate protocols to check for timely detection and treatment of adverse events following immunization (AEFI), and to grant compensation.

There were several writ petitions, i.e., W.P.(C) Nos. 13487/2022 [3], where the petitioner's wife, Mahima, who was 31 years old, received a vaccine on the 6th of August 2021; and passed away on the 20th of August 2021, she was pregnant bearing twins at that time, and the cause of death was reported to be AEFI; 13573/2022, 11276/2022 and 35180/2022[4] here Petitioner's wife was vaccinated on the 2nd of August 2021 and was declared dead on 23rd of August 2021. The medical report revealed that she had thrombosis, which is a complication of the *Covishield Vaccine*, 37055/2022[5]. Herein, husband of the petitioner took vaccine on the 13th of March ,2021, and eventually suffered from paralysis. The Neurologist reported that the patient developed paralysis due to Covishield 38961/2022 pending before the Kerala High Court, where similar relief for compensation was sought. All these petitions, and the current matter, were listed together for consideration, and for the ease of the Court, W.P.(C) No. 1220/2021, Rachana Gangu and another v. Union of India and others, was taken as the lead case; that means if this matter is disposed then all the connected matters will be disposed of as well.

**ISSUES TO ADJUDICATE:**

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[1] Singh J, Munakomi S, Baruffi S. Cerebral Venous Sinus Thrombosis. Available from: https://www.ncbi.nlm.nih.gov/books/NBK459315/

[2] Lee PI, Hsueh PR. Multisystem inflammatory syndrome in children: A dysregulated autoimmune disorder following COVID-19.

[3] Renjith R v. Union of India & Ors., W.P.(C) No. 13487/2022

[4] Ginu G Kumar v. Serum Institute of India Ltd. & Ors., W.P.(C) No. 35180/2022

[5] Ansaria AK v. Union of India & Ors., W.P. (C) No. 37055/2022

1. Whether the absence of a uniform policy governing compensation in cases of death or injury following administration of COVID-19 vaccination results in violation of Right to life. Protected under the Constitution?
2. If yes, can this court direct the respondents to frame a policy in that regard?

**CONTENTIONS OF BOTH THE PARTIES:**

**APPELLANTS:**

(i) The appellants stated that there were loopholes in the COVID-19 Vaccination Policy which violated their fundamental right to life under Article 21 as deaths due to vaccination pointed out lapses in government supervision and public health responsibility.

(ii) Appellants' second plea was that the restrictions imposed on unvaccinated persons made the vaccination procedure compulsory for which there was no consent from people and violated personal liberty.

(iii) The appellants argued that even when science proves the link between Covishield and death due to VITT/TTS (vaccine-induced thrombotic thrombocytopenia syndrome) and it was also restricted in many countries of Europe, the government had not disclosed the data of the causal link which violated informed consent.

(iv) The appellants argued that even when the respondents were well aware of the potential side-effects of the vaccine, they did not provide warnings to the public and medical professionals. Further, the appellants argued that by declaring the vaccines as "110%" safe, the DCGI denied informed consent.

(v) The appellants claimed that lack of transparency about vaccine risks and casualties violates Articles 14, 19(1)(a), and 21 and they sought compensation for the family members of deceased victims.

**RESPONDENTS:**

(i) The petitioners stated that COVID-19 vaccines have been approved by the CDSCO after going through a stringent statutory approval process with the involvement of experts including NTAGI, COVID-19 Working Group, NEGVAC etc.

(ii) The petitioners stated that the AEFI surveillance and causality assessment has been done by State and National AEFI Committees. They further claimed that the assessment report is available on public platforms, and beneficiaries have been

made aware of the benefits and risks associated with vaccines, while the awareness material is also displayed across India.

(iii) The petitioners argued that TTS is an extremely rare AEFI with only a 0.001 incidence per one lakh doses in India. The petitioners further argued that the present system of AEFI surveillance is quite adequate and transparent, while any independent assessment would affect the public confidence in the regulatory regime.

(iv) The petitioners have stated that compensation claim does not come within the writ jurisdiction of court. The petitioners have stated that the affected persons can file suit against the manufacturer or service provider, as the manufacturers of vaccines in India do not have immunity from law suits.

**JUDGMENT AND RATIO DECIDENI:**

Hon'ble Justice Vikram Nath gave the judgment and mentioned that the petition has raised serious questions of violation of fundamental rights, especially Right to Life (Article 21). The respondent in this case has contended that the appellant has the remedy that can be sorted out via Consumer Courts. The Court acknowledged that vaccine approval and causality assessments are technical matters best left to the executive and scientific experts, warranting limited judicial intervention.

***Extension of the Right to Health***

Article 21 that provides for the right to life also includes the smooth operation of the right to life. Containing the right to health and bodily integrity, for which the state bears a positive duty to safeguard the health of the nation and ensure this right is meaningful by the way of its fulfilment. For this, the court put emphasis on the case of ***State of Punjab v. Mohinder Singh Chawla***[6]***,*** wherein the right to health became an integral part of the right to life.

The Court reaffirmed that Article 21 encompasses the rights to health and bodily integrity, imposing a positive obligation on the State to safeguard public health and provide meaningful redress for serious harm arising from State-led interventions. While acknowledging scientific findings of ICMR and NCDC that found no direct causal link between COVID-19 vaccines and sudden deaths, the Court held that constitutional scrutiny extends beyond questions of causation and fault. Recognising that vaccine injury claims involve complex scientific

[6] (1997) 2 SCC 83

determinations and that ordinary civil or consumer remedies may impose an onerous burden on affected families, the Court ruled that the absence of an accessible institutional redress mechanism raises constitutional concerns under Articles 14 and 21. Consequently, it held that the State's duty in a mass immunisation programme extends beyond surveillance to ensuring institutional support and equitable compensation for grave adverse outcomes, however rare.

### *No-fault Compensation*

Invoking the principle of no-fault liability and drawing support from international vaccine compensation schemes, the Court held that India's lack of a uniform redressal framework for vaccine-related injuries creates a constitutional gap under Article 21. While affirming the adequacy of the existing AEFI surveillance mechanism and declining to order an independent scientific inquiry, it directed the union government to expeditiously formulate and publish a no-fault compensation framework for serious adverse events following COVID-19 vaccination. In ***Gaurav Kumar Bansal v. Union of India***[7], the court ordered framing of guidelines relating to ex-gratia compensation in relation to COVID-19 deaths, and while it observed that policy-making is the function of the executive branch of government, the lack of any systematic system of relief in situations that affect life and dignity may justify judicial intervention in a limited manner.

It was observed by the court that although the making of policy is the function of the executive branch, however, when there is no such policy, violation of fundamental rights justifies judicial intervention. Relying on ***Jacob Puliyel***[8], it expanded the State's obligation beyond mere AEFI surveillance to include fair compensation for vaccine-related injuries, while affirming the adequacy of the existing National and State AEFI Committees and rejecting the need for an independent expert body. Consequently, the Union Government was directed to formulate and publicly notify a no-fault compensation framework for serious adverse events following COVID-19 vaccination.

## CONCLUSION:

It was ordered by the court to frame a no-fault compensation policy for serious adverse events arising after vaccination against COVID-19 by the union government through the Ministry of Health and Family Welfare. Further, it was directed to maintain the ongoing system of adverse effects reporting and its publication. In light of the Jacob Puliyel case, no additional court-

[7] W.P.(C) No. 539/2021
[8] 2022 SCC OnLine SC 533

appointed committee is to be constituted, as the scientific system of assessing these issues was found to be satisfactory, and this policy will not preclude any other legal course of action or amount to admission of guilt or negligence.