beds ready and stock pile essential drugs.

(f) Scientific data is not available to connect the nuclear explosions with present eqidemic.

बिरुती में शील स्वर

ा मिंदियां में सार हिये वो भी मेंद्र स्वाद्य के देव : भी मेंद्र स्वाद्य स्वाद्य स्वाद्य स्वाद्य स्वाद्य भी के क्षेत्र स्वाद्य स्वाद स्वाद्य स्वाद्य स्वाद स

क्या स्त्रास्थ्य मत्री यह बताने की कृपा करेगे कि :

- (क) बिल्लों में ज्ञीत ज्यर् से कुल कितने व्यक्ति रोग-प्रस्त हुए ;
- (स) क्या यह सच है कि सब रोगियों को दिल्ली के हस्पतालों में स्थान नहीं मिल सका:
- (ग) क्या इस रोग से प्रस्त व्यक्तियो के उपचार के लिये दिल्ली में हस्पताल शिविर कोने गये थे , भीर
- (घ) यदि हां, तो कितने रोगियो के सिये; यदि नहीं, तो किस कारण ?

The Minister of Health (Shri Karmarkar): (a) 88,070 cases were recorded in Delhi up to July 1957

(b) No case requiring hospitalization was refused admission

(c) Yes

(d) Two emergency hospitals were established, one with 100 beds at Shahdara Municipal Area and the other with 150 beds in the Tibbia College Two additional wards with 260 beds expandable to 300 were opened in the Irwin Hospital Provision was also made to admit 150 cases in the Bera Hindu Rao Hospital Influenza cases were also admitted in the 120 bedded Infectious Diseases Hospital.

Anti-Influenza Vaccine

*75. { Pandit D. N. Tiwary: Shri D. C. Sharma: Shri Raghunath Singh:

Will the Minister of Health be pleased to state

- (a) whether the anti-influenza vaccine prepared at the Pasteur Institute at Coonoor has been experimented and found successful.
- (b) the centres where it has been used on a large scale, and
- (c) the after effect, if any, of the vaccine on the health of a patient?

The Minister of Health (Shri Karmarkar): (a) and (b) Anti-influenza vaccine under preparation at the Government of India Influenza Centre, Coonoor, has not yet been experimented upon to assess its protective value.

- (c) The likely reaction from vaccimation against influenza are.
- (1) Local Slight redness, pain and swelling
- (11) General (2) fever, and (b) allergic reaction in individuals sensitive to eggs, if they have not been desensitised before immunisation

I should like to add that as this is a subject which is likely to interest a large number, we are circulating a small brochure on the subject

Shri Radha Raman: According to the statement that is handed over to us, we find that in the State of Madras, the total number of cases reported was 5,08,309 and in West Bengal 72,775. The deaths in these places is out of all proportion to the number of cases recorded, for instance in West Bengal the number of deaths is 211 against 72,775 recorded cases, and in another place the number of deaths is 145 against 3,25,724 recorded cases. May I know whether it was due to some

negligence on the part of the authorities who were concerned with this situation or something else?

Shri Karmarkar: No, Sir; I am satisfied that the arrangements both in West Bengal and Madras were amongst the most efficient according to the reports we have received so far. It is likely that variations in the figures which can never be predicted are due to local conditions. May be the patients come too late to be helped and casualties may be more because of that. One cannot be sure in giving adequate explanation about such things.

Shrimati Ila Palchoudhuri: May I know whether this question has been taken up with the World Health Organisation and any information has been received from them regarding the vaccinations etc.? If not, will the Government be pleased to do that?

Shri Karmarkar: The annual sessions of the W.H.O. are too crowded to admit detailed enquiries of such questions, which are so many. But regarding general health problems, we are in touch with the W.H.O. and they supply all the information necessary for us. For instance, they supplied information about Japan.

Shri V. P. Nayar: The hon. Minister has stated that the question whether radioactivity has anything to do with this has not been studied. From the statement laid by the hon. Minister, I find that all the coastal States have had a higher incidence whereas States like U.P. and Punjab have had comparatively lesser incidence. May I know whether this question has been investigated?

Shri Karmarkar: With regard to the last aspect of the question, which appears the most relevant, Punjab has been late in coming. It is also being affected; as for the other parts of India, some are affected now and some will be affected later. I understand that Kerala was quite bad, but that was by an accident, possibly because the passengers coming from the

sea came there first. That is one possible explanation in the case of Kerala and Madras. About radioactive reaction, I have said in the answer itself.

Shri Sadhan Gupta: Is it a fact that this disease was introduced into this country by passengers from the Far East, particularly Malaya and Singapore and if so, whether those passengers were quarantined and isolated, so that the epidemic might not extend into India?

Shri Karmarkar: The first two ships which arrived in Madras, I think, were quarantined. In fact, we have given all the detailed information. If after that, hon. Members want more information, I am prepared to accept a short notice question.

Shri Mohamed Imam: It is apprehended that this epidemic will come again in a very serious form soon. If so, what steps are being taken by the Government specially to provide the necessary medical facilities in the rural areas?

Shri Karmarkar: As I said in the answer, it is apprehended that second wave might come in; not that it will certainly come, but it might. With regard to the arrangements, we have alerted all the State Governments to keep their hospitals well-equipped with medicine and with sufficient number of beds if that is necessary.

Shri Keshava: I find that the disease is in a virulent form in Bihar. What are the steps Governmet are taking in this matter?

Shri Karmarkar: Unfortunately it is far too virulent in Bangalore also. I wish my friend takes the necessary precaution.

Mr. Speaker: So far as this matter is concerned, three questions have been answered together, all relating to influenza, its control, medical relief to rural areas, greater incidence in some places, etc. I would like to allow a full-dress debate on this matter, so that all hon. Members may give some

suggestions. I will allow one hour for this on Wednesday, i.e., tomorrow evening.

Shri Sadhan Gupta: Is it necessary to give notice of a motion?

Mr. Speaker: Any hon Member may give notice formally.

Rajkumari Sports Coaching Scheme

- *41. Shri Keshava: Will the Minister of Health be pleased to state:
- (a) whether it is a fact that Government have a proposal to enhance the expenditure involved in the Rajkumari Sports Coaching Scheme, and
- (b) if so, what is the amount and for how many years?

The Minister of Health (Shri Karmarkar): (a) and (b) There is no proposal before Government for increasing the grant-in-aid to the Rajkumari Sports Coaching Scheme during coming years

The Scheme was inaugurated in September 1953 with a grant-in-aid of Rs 75,000 Since then there has been a progressive increase in the yearly amount of grant-in-aid due to expanding activities under the Scheme During the year 1957-58 a provision of Rs 5 lakhs has been made. The amount of actual allotment every year depends upon the nature and scope of programmes that are drawn up for that period

Shri Keshava: May we know which are the places in which this scheme is put into operation and what are the itmes of sports that are involved

Shri Karmarkar: Perhaps, may I lay it on the Table? It is an one and a half paged list or may I read it?

Mr. Speaker: Can't he give an abstract?

Shri Karmarkar: It can be summarised. The itmes are athletics, tennis, table tennis, basket ball, volley ball, swimming and things like that. Permanent coaching camps are in pro-

grees at the following centres: Delhi, Bombay, Calcutta, Madras, Trivandrum, Bangalore—Bangalore for athletics and tennis—Hyderabad, etc. The universities covered are Andhra, Aligarh, Bombay, Calcutta,...

Mr. Speaker: The hon. Minister may lay it on the Table.

Shri Karmarkar: Only four more— Madras, Mysore, Osmania and Nagpur—that is all

Shri Jaipal Singh: May I know what are the reasons—there may have been reasons why these funds were allotted to the hon Minister's predecessor in office—why the handling of these funds should continue with the Ministry of Health, because the Ministry of Education handles all such matters?

Shri Karmarkar: Is that a suggestion or information or question for answer?

Shri Jaipal Singh: I want to know the reasons why there is duplication of this activity in the Government of India The Ministry of Education deals with all these matters of sports.

Mr. Speaker. The Minister has already allotted Rs 1½ lakhs. Whoever gives the money, let him have a control over that. It is a suggestion for action. The hon Minister may consider. Sports increases health more than knowledge.

Shri Jaipal Singh: I am not suggesting any action I want to know why this overlapping

Mr. Speaker: It cannot be an wered It is a matter of policy The hon Minister will consider this matter.

Export of Rice

*42. \begin{cases} Shri A K. Gopalan: Shri Kodiyan:

'Will the Minister of Foed and Agriculture be pleased to state:

(2) whether Government have recei-