

to genuine and needy passengers taking into account factors like status of the passengers travelling, nature of urgency like Government duty, bereavement, sickness etc. This criteria is followed regularly.

Medical Supplies to Primary Health Centres

939. SHRIGEORGE FERNANDES: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state the steps taken by the Government to provide adequate medical supplies and drugs to the hospitals particularly to primary health centres in various States, State-wise?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D.K. THARA DEVI SIDDHARTHA): The Central Government, under the National Family Welfare Programme, provide Central assistance to the States for the purchase of medicines at the rate of Rs. 2,000/- per annum per sub-centre. As regards Primary Health Centres and hospitals, the medicines and other supplies are provided by the State Governments. Certain medicines are also provided to the States free cost, like anti-TB drugs, anti-Leprosy drugs, drugs and vaccines for Maternal and Child Health-Care programme etc.

Sale of Banned Drugs

940. SHRI SHANKARRAO D. KALE:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether some drugs have been banned by W.H.O. and Indian Government;

(b) if so, the details thereof;

(c) whether these drugs are being sold in the market; and

(d) if so, the reasons therefor and preventive measures proposed to be taken by the Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D.K. THARA DEVI SIDDHARTHA): (a) to (d). W.H.O. has so far intimated that some countries at different period of time have preferred to withdraw 44 drugs. Out of these 44 drugs, 26 drugs were never approved for marketing in the country. 11 drugs were banned and 7 were allowed for continued marketing with 'cautions' in some cases in consultation with experts and expert bodies like Indian Council of Medical Research.

The names of drugs banned by Government of India and the names of drugs allowed for continued marketing in consultation with experts along with the reasons is given in the Statement attached.

STATEMENT*Drugs Banned by Govt. of India: Reporting Source W.H.O.*

1. Nialamide
2. Practolol
3. Sodium Borate (Borax)
4. Dugyron, Secrodyl, etc. - hormonal Pregnancy testing Preparations
5. Amidopyrine
6. Phenacetin
7. Methapyrilene
8. Tetracycline liquid oral dosage preparations
9. Mothequalone
10. Propanidid
11. Methandianone

Drugs Allowed for Confined Marketing by Govt. of India: Reporting Source W.H.O.

<i>Sl. No.</i>	<i>Name of the drug</i>	<i>Reasons for continued marketing</i>
1	2	3
1	Hydroxyquinoline (clioquinol, enteroquinol, etc.)	The experts considered that the drug is very cheap and effective for treatment of amoebic diarrhoea/dysentery.

Reasons for continued marketing

Name of the drug

3

2

1

which is prevalent in the country. The incidence of 'SMON' leading to optic neuropathy and blindness as reported in Japan was never seen in India.

The experts have opined that metabolic lactic acidosis due to this drug as reported in the West is not common in Indian population and considered this drug as an effective oral antidiabetic drug.

The experts considered the drug very effective for treatment of gastroenteritis which is very common in the country.

The experts considered the topical cream of nitrofurazone

Phenformin (D.B.I.)

Nitrofuran compound

a) Furazolidone

b) Nitrofurazone cream

2.

3.

Sl. No.

Sl. No.	Name of the drug	Reasons for continued marketing
1	2	3
4.	Lynestronol	zone as useful for superficial wounds, burns and skin infections.
		The experts considered the drug very useful for menstrual disorders.
5.	Piperazine	The experts considered the drug cheap and very effective for treatment of roundworm and thread worm infestations which are so common in India. The drug had figured in WHO's Essential Drug List.
6.	Oxyphenbutazone/Phenylbutazone	The experts considered the drug quite safe and effective for short-term inflammatory disorders. The experts considered the drugs as the first drug of choice in ankylosing spondylitis and gouty arthritis.
7.	Analgin (Dipyrone)	The experts considered this drug as a very effective non-addicting pain killer which can be given both by oral and injectable route. Boston University studies

Sl. No.	Name of the drug	Reasons for continued marketing
1	2	of monitoring ADR had ruled out any "extra" incidence of bone marrow depression as a result of short term therapy due to the drug compared to other pain killer moving in the market.
3		