SRAVANA 17, 1912 (SAKA)

Facilities for the Treatment of AIDS patients

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

(a) the number, names and location of hospitals in the country where facilities have been provided for treatment of AIDS patients;

(b) the nature of arrangements made in these hospitals:

(c) the financial assistance provided by Government for provision of facilities in each of these hospitals;

(d) the number of both admitted and outdoor AIDS patients treated by each of these hospitals;

(e) whether the above existing facilities are considered to be adequate; and

(f) the details of future programmes, if any, for expansion of the facilities?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI RASHEED MASOOD): (a) to (f) Thirteen institutions have been identified and strengthened for management of HIV infected patients and AIDS cases. The names of these institutions are -

- 1. K.G. Medical College, Lucknow.
- 2. A.I.I.M.S. New Delhi
- 3. S.M.S. Medical College, Jaipur
- 4. Sher-i-Kashmır Instt. of Medical Sciences, Srinagar.
- 5. Trivandrum Medical College, Trivandrum.

- 6. Osmania Medical College, Hyderabad.
- 7. Calcutta Medical College, Culcutta.
- 8. S.C.B. Medical College, Cuttack.
- 9. Madras Medical College, Madras.
- 10. J.J. Medical College, Bombay
- 11. J.N. Hospital, Imphal, Manipur.
- 12. Medical College, Bangalore.
- 13. Goa Medical College, Goa.

Only full blown AIDS cases require hospitalisation

Not all HIV infected persons require indoor treatment. Patients come to OPD with a wide range of complaints, for which symptomatic treatment is being given.

Funds have already been released to the above thirteen institutions for purchase of material and equipment for AIDS Unit.

However, Government of India has drawn up Medium Term Plan for prevention of AIDS in the Medium Term Plan, it has been decided to strenghten the existing facilities for treatment of AIDS infected patients at the above mentioned Medical Colleges and Hospitals in the country. The expansion of the facilities include:

- providing clinical care to patients with HIV infection.
- providing counselling to the patients and their spouses/relatives.
- providing continuous medical care to the out-patients.
- Collecting data on clinical profile,

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immunological profile, opportunistic infections and other manifestation of HIV infection.

 providing training facilities to medical and para-medical personnel in the management of HIV patients.

Import of Homoeopathic Medicines

252. SHRI UTTAM RATHOD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the names of Homoeopathic medcines that are being imported in the country in spite of the fact that they are not marketed in the country of origin:

(b) whether such imports violate the provisions of Drugs & Cosmetics Act, 1940; and

(c) if so, the reasons for such imports ?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI RASHEED MASOOD): (a) to (c). Homoeopathic Medicines in finished form or Homoeopathic drug (Single) in basic form and/or of any potency, including Sugar of Milk in bulk is allowed for import under open General Licence, Appendix-6, list-8, Part-II under entry No. 23 by all persons for actural use/stock and sale. These Homoeopathic medicines should conform to Homoeopathic Pharmacopocia of India, if there is monograph in Homoeopathic Pharmacopocia of India, or they should conform to the claims made on the lebel.

Cineraria Mantime Succus manufactured by Dr. Wellimar Schwabe Gmbh & Co., West Germany is being imported into the country for the last 3 decades. According to available information the same is not being marketed in the county of origin i.e. Federal Republic of Germany. Import of drugs, which are not marketed in the country of origin, does not violete any provisions of the Drugs & Cosmetics Act 1940. Under the provisions of the Drugs and Cosmetics Act as per Rule 30B the import of the drug whose manufacture, Sale or distribution is prohibited in the country of origin is not allowed.

Sickness in Jute Industry

253. SHRI SATYAGOPAL MISRA: Will the Minister of TEXTILES be pleased to state the details of the proposals of Government for the removal of the sickness of Jute Industries?

THE MINISTER OF TEXTILES AND MINISTER OF FOOD PROCESSING IN-DUSTRIES (SHRI SHARAD YADAV): Over the last few years a large number of jute mills became sick mainly due to imbalance and cost-price of structure as a result of adverse trading conditions. While cost of production has been increasing rapidly on account of escalation in post of raw material, power and direct inputs, sales realisation has not by and large matched rising post on account of sluggish demand. This is partcular due to shrinkage in demand both in the export and domestic markets for jute goods in the face of competition from synthetic substitutes.

A statement on the same is given below.

STATEMENT

With a view to rejuventing jute industry Government have initiated various assurances from time to time which include:

- (1) Introduction of Jute modernisation Fund Scheme of Rs. 150 crores.
- (2) Creation of Special Jute Development Fund of Rs. 100 crores for implementation various identified