

to be undertaken, the subjects of examination and the standard of proficiency to be obtained in Universities or medical Institutions for grant of recognized medical qualifications and makes regulations with the approval of Government of India for this purpose. It has made recommendations on Graduate Medical Education and Post-Graduate Medical Education which are being reviewed and revised by the Council from time to time keeping in view the latest developments in medical education and also the needs of the country. The medical institutions also enable their teachers to keep themselves abreast of the latest developments in the medical sciences through continuing medical education programmes.

#### **Setting up of Medical Institute at Nagpur**

6141. SHRI UTTAMRAO PATIL : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government have any proposal under consideration for the establishment of a Post-Graduate Medical Institute on the lines of the All India Institute of Medical Sciences, New Delhi, at Nagpur;

(b) if so, the details thereof; and

(c) if not, the reasons therefor ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE) : (a) to (c). There is no proposal in the Central Sector during the 7th Five Year Plan for the establishment of a Post-Graduate Medical Institute at Nagpur on the lines of All India Institute of Medical Sciences, New Delhi.

#### **Uniform Rate for Family Planning Incentives**

6142. SHRI MUKUL WASNIK : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether some State Governments have urged the Union Government to fix a uniform rate for all States in respect of the family planning incentives; and

(b) if so, the decision of Government in this regard ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE) : (a) Yes, Sir.

(b) Government of India gives no incentives to members of general public who accept family planning. However, these acceptors are given compensation for wage lost at a uniform rate. Some States, taking cognizance of their own situation, give incentives out of their own resources to such acceptors. On the request of some States to prescribe uniform rate of incentives, the matter was examined and a view taken that the States may continue giving incentives out of their own resources.

[*Translation*]

#### **Steps to make Unani System of Medicines Popular**

6143. SHRI SANTOSH KUMAR SINGH : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government's attention has been drawn to a seminar held on Unani Chikitsa, the news item published in the Hindustan dated 8 February, 1987 under the caption 'Unani Chikitsa Par Seminar';

(b) if so, the brief details of the proceedings of the Seminar; and

(c) the steps being taken by Government to make Unani system of medicines popular among the public ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE) : (a) Yes, Sir.

(b) A note on the proceedings of the Seminar is given below in the statement.

(c) The Government is committed to promote Unani System of Medicine as part of health care delivery programme, ensuring that it develops fully and according to its genius. The Ministry of Health and Family Welfare have set up the Central

Council for Research in Unani Medicine in New Delhi to promote research. This Ministry is also setting up a National Institute of Unani Medicine in Bangalore.

Drug standardisation and quality control of drugs of Unani system of medicine is also attended to by the Central Council for Research in Unani Medicine and Pharmacopoeial Laboratory for Indian Medicine, Ghaziabad. The Unani Pharmacopoeial Committee set up by the Government is engaged in preparing formulations of Unani Medicine and Pharmacopoeia of Unani Medicines. So far one volume of formulary containing 440 drugs has been brought out.

#### Statement

The First International Seminar on Unani Medicine was organised by the Central Council for Research in Unani Medicine in collaboration with World Health Organization from 13th to 15th February, 1987. The Seminar was inaugurated by the President of India, Shri Giani Zail Singh. The theme of the Seminar was Unani Medicine and the goal of Health for All by the Year 2000. Among others who spoke on the inaugural ceremony were Unani Minister for Health and Family Welfare, Shri P. V. Narasimha Rao and Minister of State for Health and Family Welfare, Kumari Saroj Khaparde. The key note address to the Seminar was delivered by Dr. C. O. Akerele, Programme Manager, World Health Organization, Geneva.

Over 500 delegates from various parts of India and 24 other countries attended the Seminar. The participants included experts of Unani Medicine, other traditional and modern systems of medicine and allied sciences. There were 17 Scientific sessions—15 for oral presentation and two for poster display in which 158 research papers were presented. The deliberations covered several applied and fundamental aspects of research in Unani Medicine and its allied sciences.

Under Clinical research, papers on various common and chronic ailments were presented, including cancer, vitiligo, diabetes, mellitus arthritis, bronchial asthma, malaria, infantile diarrhoea, liver

diseases, psychosomatic disorders, and diseases of digestive and urogenital systems. Usefulness of some special therapies of Unani Medicine, including cupping and venesection, in joint pain and hypertension, respectively was also discussed by a couple of researchers in their papers.

Papers relating to pharmacology and Clinical Pharmacology highlighted the biological effects of various plant products in different diseases. In sessions on Drug Standardisation, Chemistry and Pharmacognosy, papers on the evolution of standards for single and compound drugs of Unani Medicine were presented.

A few sessions were devoted to Survey and Cultivation of Medicinal Plants and ethno-botany. In two symposia the role of trace elements in the treatment of various diseases and their toxicity studies were discussed. A separate session took stock of antifertility effects of some Unani drugs and environmental pollution. Under fundamental research papers relating to history and importance of some Unani classics were presented.

An important feature of the Seminar was a Symposium—the meeting point—in which experts of Unani Medicine, Ayurveda, Siddha, Homeopathy and modern Medicine focussed their attention on how and in which areas all these systems can interact and collaborate in order to strengthen the primary health care delivery.

The valedictory address to the Seminar was given by Minister of Health and Family Welfare, Shri P. V. Narasimha Rao on 15th February, 1987.

The Seminar made following recommendations :

1. Supply, regulation and quality control of herbs and research support thereto.
2. Revision of strategy on the utilisation of Unani and other traditional system of medicine by delevation of their status.
3. Evolution of a separate service cadre of traditional systems of medicine at all levels in primary health care.

4. Creation of international bank of herbs and other raw material used in TSM.
5. Creation of herb consciousness for primary health care among the masses through mass media of regional languages.
6. Introducing fellowship exchange programme with regard to TSM at international level for sharing expertise.
7. Undertaking clinical trials, vetting and toxicity studies on drugs used in Unani and other TSM for their international acceptance.
8. Optimal utilisation of folk arts of healing wounds in situations calling for first aid.
9. Development of safe contraceptives by screening such drugs as are claimed to have anti-fertility effects in the literature of Unani and other TSM.
10. Exposure of Unani undergraduate and graduates to primary health care and their attachment during internship to family physicians.
11. Creation of computerised data bank for information relevant to Unani Medicine.
12. Upgrading of research facilities for developing new medicaments according to needs of time.
13. Usefulness of the Seminar and needs for follow-up.
14. Exposition of wholistic approach of Unani Medicine through international collaborative research.
15. Dovetailing of Unani dietary practices with international and other research.
16. Biological control of mosquito through herbal insect repellants.
17. Need for research on basic

theories of Unani e.g. humours, temperaments, elements.

18. Crash priority to developing strategies on five year basis, with regard to Unani and other TSM and their implementation for achieving Health for All by the Year 2000.
19. Increasing financial support for Unani and other TSM for their optimal utilisation in effective primary health care delivery.
20. Provision of best health care facilities and expertise of Unani and other TSM at village level.
21. Interaction of all systems of Medicine to strengthen primary health care delivery.

[*English*]

**Railway Bridge over Ganga near Hazipur and Gulzar Bag in Patna**

6:44. SHRI RAM BHAGAT  
PAWAN :  
DR. C P. THAKUR :

Will the Minister of RAILWAYS be pleased to state :

(a) whether there is a proposal to construct an over-bridge over Ganga near Hazipur and Gulzar Bagh in Patna; and

(b) if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF RAILWAYS (SHRI MADHAVRAO SCINDIA) : (a) and (b). Survey for construction of a rail bridge across Ganga, near Patna has been taken up to determine its financial implications.

**Development of Rajkot Airport**

6:45. SHRI DIGVIJAY SINH : Will the Minister of CIVIL AVIATION be pleased to state :

(a) whether a technical survey has been conducted of the Rajkot Airport for lengthening the run-way and enlarging the area limits;