

2. Central Council for Research in Homoeopathy, Navyug Market, Gha-ziabad-201001.

3. Central Council for Research in Unani Medicine, 5, Panchsheel Shopping Centre, New Delhi-110017.

4. Central Council for Research in Yoga & Naturopathy, 68-Ashok Road, New Delhi-110001.

(c) All these Councils excepting Central Council for Research in Yoga & Naturopathy are housed in rented buildings and the amount of rent paid by the three Councils for their headquarters office located in Delhi is given below:—

Name of the Council	Rent paid per annum Rupees
1. Central Council for Research in Ayurveda and Siddha	1,88,700.00
2. Central Council for Research in Homoeopathy	58,644.00
3. Central Council for Research in Unani Medicine	1,38,000.00

Central Council for Research in Yoga & Naturopathy has been housed in the premises of the Vishwayathan Yogashram at New Delhi and it does not pay any rent for it.

(d) The erstwhile Central Council for Research in Indian Medicine and Homoeopathy was allotted by D.D.A. a piece of land measuring 2.25 acres in Janakpuri Institutional Area, New Delhi, for the construction of office complex. A proposal to construct a building on the said land for accommodating all the aforesaid four Councils is under consideration.

### Effectiveness of BCG Vaccination Against T.B.

6275. SHRI HARINATH MISRA: Will the Minister of HEALTH be pleased to state:

(a) whether specialists are divided so far as effectiveness of BCG vaccination against TB is concerned;

(b) if so, what are the names and designations of the specialists of each school of thought,

(c) whether Government have been laying great emphasis on BCG vaccination as a preventive measure against TB and if so, the reasons thereof; and

(d) whether any alternative and full proof measure for prevention of TB has been discovered and are sought to be put into use?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH (SHRI NIHAR RANJAN LASKAR): (a) and (b). The question regarding effectiveness of BCG vaccination against TB has been considered by the various specialists who were consulted by the Indian Council of Medical Research (Annexure I) who unanimously felt that "It would seem prudent not to disrupt the existing practice of BCG Vaccination in infancy and early childhood, so as not to deprive this vulnerable population of the possible benefits of BCG vaccine". The members of the Standing Technical Committee of T.B. Association of India (Annexure II) also have unanimously taken the following decision:—

"The Committee expressed the opinion that BCG vaccination of infants and young children should continue as heretofore and reiterated the views expressed in the statement already issued by the Association in the matter."

A copy of the above referred statement is enclosed at Annexure III.

(c) BCG Vaccination is known to prevent the incidence of other types of tuberculosis disease, which follow soon after primary infection like meningeal, miliary, bone and joint tuberculosis etc. and so it is being continued as a part of the Expanded Programme of Immunization.

(d) No alternative and fool-proof measure for prevention of TB has been discovered and is sought to be put into use.

#### **Annexure-I**

MINUTES OF THE EXPERT GROUP MEETING FOR EVALUATION OF THE FIRST REPORT OF THE TUBERCULOSIS PREVENTION TRIAL HELD ON 17TH JULY, 1979 AT 10.30 A.M. IN THE ICMR HQS. OFFICE, NEW DELHI.

#### *Members present*

##### *Chairman*

1. Dr. S. P. Pamra,  
Director,  
New Delhi T.B. Centre,  
New Delhi.
2. Dr. B. N. M. Barua,  
Adviser in Tuberculosis  
Directorate General of Health  
Services  
New Delhi.

##### *Rapporteur*

3. Dr. S. P. Tripathy,  
Director,  
Tuberculosis Research Centre,  
Madras-600031.

##### *Rapporteur*

4. Dr. G. V. J. Baily,  
Project Director,  
T.B. Prevention Trial,  
Madras.
5. Dr. S. Mayurnath,  
Assistant Project Director,  
TB Prevention Trial, Madras.

6. Dr. S. Radhakrishna,  
Deputy Director,  
Institute for Research in  
Medical Statistics,  
(Madras Chapter), Tuberculosis  
Research Centre,  
Spur Tank Road, Chetput,  
Madras-600031.

7. Dr. N. P. Gupta,  
Sr. Dy. Director-General,  
Indian Council of Medical Re-  
search, Ansari Nagar,  
New Delhi-110016.

8. Dr. A. D. Taskar,  
Deputy Director,  
Institute for Research in  
Medical Statistics,  
(Delhi Chapter),  
Indian Council of Medical Re-  
search, Ansari Nagar,  
New Delhi-110016.

9. Dr. N. D. Datta Banik,  
Assistant Director-General,  
Indian Council of Medical Re-  
search, Ansari Nagar,  
New Delhi-110016.

#### **Annexure-II**

#### THE TUBERCULOSIS ASSOCIATION OF INDIA

List of persons who attended the meeting of the Standing Technical Committee of the Tuberculosis Association of India held on 18th April, 1980.

#### *Technical Committee Members*

1. Dr. M. M. Singh,  
(Chairman, S.T.C.)  
Medical Superintendent,  
Rajen Babu TB Hospital,  
Delhi.
2. Dr. M. L. Mehrotra,  
Director-Professor,  
TB Demonstration Training  
Centre & Chest Institute,  
Agra (Uttar Pradesh).

3. Dr. R. Viswanathan,  
Emeritus Scientist,  
Vallabhai Patel Chest Institute,  
Delhi.
4. Dr. S. P. Pamra,  
Honorary Technical Adviser,  
TAI, & Editor,  
Indian Journal of Tuberculosis,  
New Delhi.
5. Dr. Tahir Mirza,  
State TB Officer & Honorary  
Secretary,  
TB Association of Jammu and  
Kashmir,  
Municipal Health Centre,  
Karan Nagar,  
Srinagar, (Kashmir).
6. Dr. K. V. Krishnaswami,  
Prof. & Head Dept. of TB &  
Chest Diseases,  
Madras Medical College &  
Consultant,  
I.C.M.R. Tuberculosis Research  
Centre & Director,  
Institute of TB and Chest  
Diseases, Madras-31.
7. Dr. S. Sivaraman,  
State TB Officer & Director, TB  
Centre & Honorary Secretary,  
T.B. Association of Kerala,  
T.B. Centre,  
Trivandrum.
8. Dr. S. P. Tripathy,  
Director,  
TB Research Centre,  
Spur Tank Road,  
Madras-31.
9. Dr. A. G. Patel,  
Medical Superintendent,  
S. P. Sanatorium,  
Baroda.
10. Dr. Jaswant Singh,  
Professor of Chest Diseases  
(Retd.)  
In-Charge Chest Diseases Hos-  
pital.  
Patiala.
11. Dr. P. A. Deshmukh,  
Chest Physician,  
Tata Main Hospital,  
Jamshedpur.

### Special Invitees

12. Dr. K. N. Rao,  
Ex-Director-General of Health  
Services,  
Government of India,  
New Delhi.
13. Dr. P. K. Sen,  
Director,  
B. C. Roy TB & Chest Research  
Institute, & Emeritus Editor,  
Indian Journal of Tuberculosis,  
99/5/4, Ballyganj Place,  
Calcutta-19.
14. Dr. N. L. Bordia,  
Emeritus Professor of Tuber-  
culosis & Tuberculosis Adviser,  
Government of Madhya Pra-  
desh, & Ex-TB Adviser to the  
Government of India,  
20, Yashwant Colony,  
Indore-452 003 (Madhya Pra-  
desh).
15. Dr. M. D. Deshmukh,  
Honorary Secretary,  
Maharashtra State Anti-TB  
Association,  
O.H.T. Clinic,  
Sewree,  
Bombay-15.
16. Dr. H. B. Dingley,  
Medical Superintendent,  
Lala Ram Sarup TB Hospital,  
Mehrauli,  
New Delhi.
17. Dr. G. V. J. Baily,  
Project Director,  
Tuberculosis Prevention Trial,  
Spur Tank Road,  
Chetput,  
Madras-600 031.
18. Dr. T. Manickam,  
Honorary Secretary,  
Karnataka State TB Association  
3, Union Street,  
Bangalore.
19. Dr. D. Umapathy Rao,  
Honorary General Secretary,  
TB Association of Andhra Pra-  
desh  
3-4-760, Barkatpura,  
Hyderabad.

20. Dr. M. S. Chadha,  
Director-General of Health Services (Retd.),  
Government of India and Vice-Chairman, Tuberculosis Association of India,  
3 Red Cross Road,  
New Delhi.

### Annexure-III

#### THE TUBERCULOSIS ASSOCIATION OF INDIA B.C.G. VACCINATION

BCG vaccination was introduced in 1921 as a protective measure against tuberculosis. Since then, millions of children have been vaccinated in many countries of the world including India. The protective effect of B.C.G. depends on a number of factors such as the degree of endemicity of infection and the size of infactor pool in the community; extent of non-specific sensitization induced by atypical (usually non-pathogenic) mycobacteria in the environment; epidemiological situation in any country or community etc. A number of controlled studies to determine the protective effect of BCG have been carried out in different parts of the world and because of the variation in the factors mentioned above, there has been considerable disparity in the findings of the various studies.

A scientifically controlled study was started in a population of approximately 360,000 in Chingleput District of Tamil Nadu in 1968. The findings of this study have shown that BCG did not protect against the bacillary form of pulmonary tuberculosis during the first 7 1/2 years of the follow up of the population. This factor has been given a lot of publicity in the lay press. Views expressed have often been inaccurate and incomplete. It may be pointed out that the applicability of these findings to other situations even within the country needs careful assessment of the epidemiological factors involved. Furthermore, the study does not provide evidence, one way or the other, regard-

ing the effectiveness of BCG vaccination in reducing the incidence of other types of tuberculous disease which follow soon after primary infection more particularly the meningeal type and the bone and joint type of disease etc. Since many studies carried out elsewhere have shown adequate protection by BCG vaccination against these types of disease, it would be imprudent to deprive the vulnerable population of infants and vound children of this protection.

Under the revised strategy adopted by the Government of India, BCG vaccination is being integrated with the expanded programme of immunization in rural areas so that all infants are vaccinated within 3 to 9 months of their birth. Vaccination of new borns and infants are being continued in urban areas in the maternity and other institutions as heretofore.

दानापुर डिब्बोजन के लेखा अधिकारी को  
मांग पत्र दिया जाना

6276. श्री रामावतार शास्त्री : क्या रेल मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या यह सच है कि आल इंडिया रेलवे एकाउन्ट्स एम्पलाइज एसोसिएशन्स की दानापुर ब्रांच ने 14 दिसम्बर, 1979 को पूर्व रेलवे के दानापुर डिब्बोजन के लेखा अधिकारी को एक चौदह-सूत्री मांग पत्र दिया था ;

(ख) यदि हां, तो मांगों का ब्यौरा क्या है; और

(ग) उस पर सरकार ने क्या कार्यवाही की है ?

रेल मंत्रालय में उप मंत्री (श्री मल्लिकार्जुन): (क) जी हां।

(ख) और (ग) एक विवरण संलग्न है।

#### विवरण

आल इंडिया रेलवे एकाउन्ट्स एम्पलाइज एसोसिएशन, पूर्व रेलवे, दानापुर शाखा द्वारा अपने 14-12-1979 के पत्र के माध्यम से प्रस्तुत मांगों के सम्बन्ध में स्थिति

(1) पंचवर्षीय संशोधन के परिणाम-