fixed dose combinations were allowed to be marketed in the country, there was probably a demand from medical practitioners for such combinations for therapeutic convenience and also there were not many substitutes available. Adequate data regarding the toxicity of some of the drugs or their incompatability was not available. However, with the passage of time when reports of adverse reactions to some of these drugs came to be reported, a necessity was felt to screen such combinations from the angle of rationality as well as from safety point. While screening such combinations it was observed that some drugs individually may be specific for cure of certain disease, when it is combined with otrer drugs for various other indications, there is a possibility of indiscriminate use of such combinations, which may be harmful to the consumer at large. In certain cases it was felt that with the availability of broad spectrum drugs, there is no necessity of fixed dose combinations which were meant to broaden the spectrum of action. For certain combinations it was observed that although they are not strictly harmful, there was no adequate evidence for their rationality. The adverse reaction to certain drugs can only be known when the drug is in the market for many years and one cannot really predict such harmful effects of drug unless the drug is in the market for many years. The task of weeding out irrational formulations has to be continuous effort and the Drugs Consultative Committee which is a statutory body under the Drugs and Cosmetics Act has recommended that a Standing Sub-Committee should be constituted which would from time to time screen the formulations moving in the market with a view to weeding out those that are considered irrational harmful in light of current knowledge.

(c) The Drugs Controller (India) has forwarded to the State Drug Control Authorities the criteria that should be taken into consideration

before a combination product is licensed. The criteria suggested are:

- 1 Clinical documentation justifies the concomitant use of more than one drug;
- 2. Tre therapeutic effect is greater than the sum of the effect of each;
- 3. The cost of the combination product is less than the sum of the individual products:
  - 4. Compliance is improved:
- 5. Sufficient drugs ratios are provided to allow dosage adjustments satisfactory for the majority of the population.

## Assistance to voluntary organisations for popularising family planning programme

3248. SHRIMATI MADHURI SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state the assistance given by Government to the voluntary organisations working in the country for popularising family planning programme from 1 April, 1980 to 30 September, 1981 organisation-wise?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI NIHAR RANJAN LASKAR): The requisite information is being collected from the States and Union Territories who provide most of the assistance to Voluntary organisations and will be laid on the Table of the Sabha.

## Indian Medical Service

3249. DR. A. KALANIDHI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what is the significance in the changing the Union Public Service Commission advertisement for recruitment of doctors as "Combined Medical Services Examination" from the

original "Combine Examination for Recruitment to Medical Posts" which included C. H. S. and Railways:

- (b) is this a forerunner to formation of an Indian Medical Service;
- (c) if so, when will the Indian Medical Service be introduced.

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI NIHAR RANJAN LASKAR): (a) The Union Public Service Commission has changed the nomenclature of the Examination as the earliar name was lengthy and inconvenient for being mentioned in notes, letters etc.

- (b) No.
- (c) Does not arise.

Employment to women under 'Delivery of Social Services to Self-Employment women pilot Scheme'

3250. SHRI KEYUR BHUSHAN: Will the Minister of EDUCATION AND SOCIAL WELFARE be pleased to state:

- (a) whether it is a fact that a Women Development Agency has been set up in Madhya Pradesh with the aid of United Nations Voluntary Fund under the "Delivery of Social Services to Self-Employed Womens' Pilot Scheme";
- (b) if so, the number of rural women who were provided employment opportunities last year under this scheme; and
- (c) the targets set for the current year?

THE DEPUTY MINISTER IN THE MINISTRIES OF RAILWAYS AND EDUCATION AND SOCIAL WELFARE AND IN THE DEPARTMENT OF PARLIAMENTARY AFFAIRS (SHRI MALLIKARJUN): (a) Yes, Sir.

(b) and (c). The Project was started in January, 1981 This Project aims at generating capacities for women's self-employment by establishing a link-up with existing governmental and other agencies for training, raw materials, credit and marketing. The target for the current year is to cover 50 villages where survey has been taken up. Survey in 20 villages has been completed. So far 56 women have been assisted in obtaining loans for economic activities from Banks under Integrated Rural Development Programme.

11.54 hrs.

PROF. MADHU DANDAVATE (Rajapur): Sir, I have given a...

(Interruptions)

श्री राम विलास पासवान (हाजीपुर): दिल्ली में एसियाई खेलों के नाम पर मजदूर मारे जा रहे हैं। ... (व्यवधान)...

ग्राध्यक्ष महोदय: ग्राप सारे एक साथ बोल रहे हैं।

श्री राम विलास पासवान : दो बार ऐसी घटना हो चुकी है। ...(ब्यवधान)...

श्री ग्रंटल बिहारी बाजपेयी (नई दिल्ली): ग्रध्यक्ष जी, यह मेरे चुनाव क्षेत्र का मामला है। यह मेरी कांस्टी-टुएन्सी है। ... (श्यवधान) ...

MR. SPEAKER: Why should you all speak at one time? क्या हो गया है? Is it the way?

(Interruptions)

PROF. MADHU DANDAVATE: You ask us to make submissions one by one.