GOVERNMENT OF INDIA CHEMICALS AND FERTILIZERS LOK SABHA

UNSTARRED QUESTION NO:4511 ANSWERED ON:20.12.2012 PRODUCTION OF DRUGS Alagiri Shri S. ;Singh Rajkumari Ratna

Will the Minister of CHEMICALS AND FERTILIZERS be pleased to state:

- (a) the production of drugs by pharmaceutical Public Sector Enterprises during each of the last three years and the current year, company-wise;
- (b) the share of their drugs in the total production of drugs in the country during the said period;
- (c) whether the private drug manufacturing companies are charging higher prices of their products due to low production by Public Sector Enterprises;
- (d) if so, the details thereof; and
- (e) the steps being taken by the Government in this regard?

Answer

MINISTER OF STATE (INDEPENDENT CHARGE) OF THE MINISTRY OF STATISTICS AND PROGRAMME IMPLEMENTATION AND MINISTER OF STATE IN THE MINISTRY OF CHEMICALS AND FERTILIZERS (SHRI SRIKANT KUMAR JENA)

(a) The production value of drugs by pharmaceutical Public Sector Enterprises during each of the last three years and the current year, company-wise is as under:

(Rs. In crore)

Pharmaceutica Rajasthan Indian Drugs & Hindustan Bengal Karnataka Total

1 Public Drugs & Pharmaceutical Antibiotic Chemicals & Antibiotics & productio
Sector Pharmaceutical sLtd. sLtd. Pharmaceutical Pharmaceutical n of all
Enterprises [CPSEs] sLtd. (IDPL) (HAL) sLtd. sLtd. CPSEs

(RDPL) (BCPL) (KAPL)

2009-2010 82.88 108.12 123.15 40.67 218.75 573.57

2010-2011 83.80 55.24 84.92 37.51 239.27 500.74

2011-2012 82.26 50.76 53.85 29.09 251.00 466.96

2012-2013 35.70 34.02 (Upto 31.91 04.91 143.36 249.90 (Upto Oct. Nov. 2012) (Upto (Upto Oct. (Upto Oct. 2012) Nov.2012) 2012)

(b) The share of Central Pharmaceutical Public Sector Enterprises' [CPSEs] drugs in the total production of drugs in the country

during the said period is as under:-

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S.No. Year Total production of Indian Total production Share in % Pharmaceutical Industry of CPSEs (Rs. In crore)

1 2009-2010 106209.00 573.57 0.54%

2 2010-2011 119075.60 500.27 0.42%

3 2011-2012 Data not available 466.96 â€"

4 2012-2013 Data not available 249.90 â€"
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upto October/November-2012

(c), (d)&(e): There is a considerable difference in the prices of branded medicines manufactured by private manufacturers and sold in open market as compared to the prices being charged in the generic version of the same salt/molecule being manufactured and supplied by Phanma CPSEs. A comparative statement of some of the medicines, which are commonly used, is illustrated as under

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S.No. Generic name Pack size Jan Leading Leading Brand Therapeutic Aushadhi brand name segment (Rs.)
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- 1. Alprazolam 0.25 mg 10 tab 2.60 13.60 Triaka 0.25 mg. Anxiolytic
- 2. Atenolol 50 mg 10 tab 5.00 33.48 Aten 50 mg Cardio vascular
- 3. Losartan 50 mg $\,$ 10 tab $\,$ 9.40 $\,$ 57.30 $\,$ Losar 50 mg $\,$ Cardio $\,$ vascular
- 4. Levocetrizine 5mg 10 tab 5.80 41.30 Le-Zyncet 5mg Anti-allergic

The prices of 74 bulk Drugs, specified in the First Schedule of Drug Price Control Order [DPCO], 1995 and the formulations containing any of these scheduled drugs are fixed/revised by the National Pharmaceuticals Pricing Authority [NPPA]. Under the provisions of DPCO, 95, no person is authorised to sell any scheduled formulation (medicine) to a consumer at a price exceeding the price notified/approved by the NPPA/Government. In respect of non-scheduled formulations, for which prices are not fixed under DPCO, 1995, NPPA monitors their prices on a regular basis, not linked with production figure. As a part of price-monitoring activity. NPPA regularly examines the movement in prices of non-scheduled formulations. The monthly reports of IMS Health and the information furnished by individual manufacturers are utilized for the purpose of monitoring prices of non-scheduled formulations. Wherever a price increase beyond 10% per annum is noticed, the manufacturer is asked to bring down the price voluntarily failing which, subject to prescribed conditions, action is initiated under paragraph 10 (b) of DPCO, 1995 for fixing the price of formulation in public interest.