38

THE MINISTER OF LABOUR (DR. SATYANARAYAN JATIYA): (a) to (d) Government is aware of the need for combating exploitation and harassment of women workers in their place of work.

A number of provisions have been included in the labour laws to prevent the exploitation of women workers and for their general welfare. These include maternity benefit, creche facilities, provisions for separate latrines and rest rooms, restricted time for employment etc. Equal wages for men and women workers are fixed under the Minimum Wages Act, 1948 in respect of workers working in employments given in the schedule to the Act. The Equal Remuneration Act, 1976 further provides for equal wages for same or similar work. The enforcement machineries set up in Centre as well as States, take necessary action in case of violations of the provision of these enactments.

The Hon'ble Supreme Court in the case of Writ Petition (Criminal) No. 666-70 of 1992 filed by Vishaka and Others against the State of Rajasthan and Others defined sexual harassment and laid down certain guidelines for prevention of such harassment. In compliance of the Supreme Court directives Government has circulated guidelines f action to Ministries/ Departments, States/UTs and \_\_ntral Public Sector Undertakings. A large number of responses have since been received, intimating action taken in accordance with the directives. These include wide dissemination of the guidelines, formation of Complaints Committees. modification of conduct rules etc. The Department of Personnel & Training has also amended the CCS (Conduct) Rules, 1964 with a view to implementing the guidelines. The guidelines issued by the Court have the force of law under Article 141 of the Constitution.

## Spurious Polio Vaccine

\*488. SHRI G. GANGA REDDY SHRI MOTI LAL VORA :

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

- (a) whether attention of the Government has been drawn to the newsitem captioned "Lakhon Shishuon ko polio ki nakli dava pila di gai" appearing in 'Rashtriya Sahara' dated June 21, 1998;
  - (b) if so, the facts thereof;
- (c) whether there is possibility of adverse effect on the health of those children to whom these drops were given;

- (d) the action taken by the Government to investigate the matter in this regard;
- (e) whether the Government have a proposal to set up a Central office for monitoring Polio Eradication Programme;
  - (f) if so, the details thereof:
- (g) whether the Government would ensure an early report on the laboratory thest of the polio drop vaccine and availability of better quality vaccine with the approved manufacturers: and
- (h) the reasons for importing the vaccine from Belgium?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) to (h) The newsitem in 'Rashtriya Sahara of 21 June, 1998 did come to the notice of Government of Indian alleging that lakhs of children had been given suprious polio vaccine in Ghaziabad. Uttar Pradesh. Government took immediate cognisance of the report and constituted a High Level Technical Committee on 25th June, 1998 with Head of the Department of Microbiology in All India Institute of Medical Sciences as the leader of the team and Additional Professor of Paediatrics in AIIMS. Assistant Commissioner in the Department of Family Welfare and Joint Director (Immunisation) Uttar Pradesh Government as members. The report of the Committee was received on 30th June. 1998. The Committee visited Ghaziabad and Lucknow in addition to making field enquiries in Ghaziabad.

- 2. The vaccine involved in this incident was out of the foreign made vaccine received as donor assistance from foreign donor agencies. The Technical Committee found that imported vaccine was received on 10.9.97 and stored at Medical Stores Depot, Karnal of Government of India. Before the vaccine was despatched from Karnal to Lucknow, it was tested at Central Research Institute, Kasauli and its quality was found to be good. From the Vaccine Store in Lucknow, the vaccine was issued to Ghaziabad District in March 1998 and during its storage in Ghaziabad, samples sent to National Institute of Communicable Diseases, Delhi in April-May 1998 were also found to be of good quality. Thus upto May 1998 the vaccine was potent.
- 3. It seems this vaccine lost its potency after May 1998 because the colour monitors affixed on the vials of polio vaccine showed change of colour to a degree

40

signifying loss of effectiveness when the team inspected this lot of vaccine in Ghaziabad during its enquiry. The Committee has found that the district and Field Officers of U.P. Government in Ghaziabad do not seem to have given attention to change in colour of vial monitors and they continued to administer the vaccine till the news items appeared in the newspapers. During 1996-97 all health functionaries were trained about proper handling of vaccine specially the use of Vaccine Vial Monitor.

Written Answers

- 4. The Committee has found that cold chain in both Ghaziabad and Lucknow was in good working condition. The Committee has stated that the Oral Polio Vaccine if administered to children even after it has lost its potency, does not cause any danger to the lives of the children nor does it directly contribute to any other harmful effects except that the child remains susceptible to the infection by polio virus and its consequences. This has since been confirmed by the Regional Adviser (Polio Surveillance) of W.H.O., SEARO, Delhi.
- 5. On the basis of report of the Committee, the Government of Uttar Pradesh has been advised to take the following remedial actions:
  - Children who were vaccinated with the OPV in question in Ghaziabad should be revaccinated immediately;
  - All health functionaries (medical and para medical) who handle vaccines must be reoriented for handling of vaccine vials which have Vaccine Vial Monitors imprinted on them
- 6. It would be clear from the foregoing, that no spurious vaccine has been used in the immunisation programme, nor has the health and well-being of children heen endangered. The State Government has been advised to re-immunise these children who might have been recently given in-effective polio vaccine during last two months in Ghaziabad. Other State Governments have also been alerted about taking safeguards against occurrence of such incidents.
- 7. Oral polio vaccine is a drug under the Drugs and Cosmetics Act, 1940. All polio vaccines, locally manufactured or received by way of commodity assistance are put to use under the programme only after they have been subjected to quality control test by Central Research Institute (CRI), Kasauli. Central Research Institute, Kasauli has been designated as the statutory National Quality Control Laboratory for testing of all vaccines by the Drug

Controller General of India, who is the National Drugs Authority.

- 8. Vial monitors in the form of labels put on the vials are being progressively used for easily ascertaining effectiveness of vaccine in the vial. The monitor has an outer circle of blue colour and inside this is a smaller square of white which slowly becomes blue as time passes. So long as colour of the inner square is lighter than the colour of the outer circle the vaccine in the vial is effective. Vaccine inside the vial should be presumed to have lost effectiveness and should not be used once the colour of inner square becomes as dark as in outer circle or darker. This easy mechanism to help health functionaries (ANM, LHV and PHC doctors) is intended to be in the interest of children's health.
- 9. A National Polio Surveillance Project has been in operation in the country since October 1997. The main objective of this Project is to identify areas with local transmission of polio virus and intensify activities for eradication of the virus from such areas. 59 trained Medical Officers have been posted throughout the country to assist States and Districts in polio surveillance work. Nine laboratories in different parts of the country have been equipped and strengthened for prompt and comprehensive analysis of stool samples.
- 10. The oral polic vaccine is administered to children under two programmes:
  - i. Universal Immunisation Programme
  - ii. Pulse Polio Immunisation Programme
- 11. The total quantity of polio vaccine used in both the programmes annually is about 5300 lakh doses. Substantial quantity of the vaccine use in PPI is received as commodity assistance from international donor agencies. Part of the vaccine received as commodity assistance in 1997-98 came from M/s. Smith Kline Beecham, Belgium. Government of India has been accepting commodity assistance due to inadequate availability of resources in the domestic budget.

## Ban on Sale of Common Salt

\*489. PROF P.J. KURIEN : DR. T. SUBBARAMI REDDY :

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