- Massive raids were organised under the supervision of SDM/LHA as a result of which more than 869 samples have been lifted/ received from the general public, the police and hospitals till September 23, 1998.
- A notification was issued by NCT Delhi on 27th August, 1998 completely banning the exposure for sale, offer for sale of mustard oil in all forms, (loose or packed) in the light of the fact that adulteration was found in well-known brands.
- A notification was issued by NCT Delhi on 23rd September, 1998 under Essential Commodities Act permitting sale of all edible oils in packed condition provided the manufacturer/supplier certified that the quality of the oil conformed to PFA requirements.
- On 13th October, 1998, the NCT of Delhi issued another notification under Essential Commodities Act permitting sale of all edible oils other than mustard oil in loose form.

[Translation]

Pharmaceutical Research

*28. SHRI RAJENDRA AGNIHOTRI:

DR. ASHOK PATEL:

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

- (a) whether the position of India is disheartening at the international level in the sphere of the pharmaceutical research as the medicines formulated originally in India have not been patented;
- (b) if so, the details of medicines in which India has made research and formulation work during the last five years with the results thereof; and
- (c) the concrete action proposed to be taken by the Government in this direction?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) to (c) Medicines produced by the modern pharmaceutical industry in India have been found to be cost effective and easily available. This has been possible due to innovative processes adopted by Indian research and development efforts.

Pharmaceutical Research in India has been focussed on new process development rather than the discov-

ery of new molecules which is prohibitively expensive. There is no provision at present for registration of product patent under the Indian Patent Act 1970.

The Central Drugs Research Institute under the CSIR has reported that India has so far developed novel and cost effective processes for over 30 drugs and drug intermediates. These have been shown in Statement-I. During the last five years CSIR has developed 3 new drugs while ICMR has developed 2 new drugs. These have been shown in Statement-II. A new dosage form of amphotericin, developed by Delhi University, is under clinical research at KEM Hospital, Mumbai for treatment of Kala-azar fungal infection.

An inter-ministerial Group was set up by the Department of Chemicals and Petrochemicals to formulate strategies for Research and Development in the Pharmaceutical area which inter-alia recommended measures to provide an impetus to research and development. As a result of this, (i) the R & D units, both in public and private sectors would enjoy Modvat facilities for purchase of capital equipment, consumable etc.; (ii) the amount earmarked for joint collaborative research with the private sector has been recommended to be enhanced.

In addition to this:

- New drugs developed through indigenous R
 D are allowed to be kept out of price control in respect of the R & D based companies, for a period of 10 years.
- Price control exemption is also being given to bulk drug manufacturers if the drug is developed through indigenous R & D.
- A two-tier Committee has been set up by the Department of Science and Technology to promote and monitor R & D in the pharmaceutical sector.
- National Institute of Pharmaceutical Education and Research (NIPER) has been established at Chandigarh to promote original research in the field of pharmaceuticals.
- CSIR has mounted a major network programme on new drugs development from natural resources.
- Department of Ocean Development has an inter-organization coordinated programme to discover new molecules from sea.
- . The Department of Science and Technology

To Questions

has identified specific area of research and facilities to be supported on priority in the field of drug development.

Statement-I

CSIR has developed novel and cost-effective processes for over 30 drugs as well as four drug intermediates licensed and commercialised. These are: Anti - AIDS AZT (Azidothymidine) Cipla, Lupin, Labozen; Anti-viral Acyclovir Cipla, Lupin, Wockhard; Anti-cancer Etoposide Cipla Mitoxantrone Sun Pharma, Ondansetron Cipla, Leuprolide (LHRH agonist) Cipla, Anti-bacterials Norfloxacin, Ciprofloxacin, Cipla, Azithromycin, Torrent, Kopran, Sulbactam, Unichem Sultamicilin tosyiate, Unichem Torrent; Anti-malarial, Mefloquine, Unichem, Cipla; Cardio-Vascular-Enalapril, Cadila, New Land Labs, Dilitiazem, Lupin Nadolol, Lupin, Metoprolol, Lupin, Felodipine, Cadila; Lipid regulating, (lowering blood cholesterol), Gernfibrozil, Cadila, Analgesics & anti-inflammatory, Ketorolac, Lupin, Flurbiprofen, New Land Labs, SOL, Cadila FDC; Anti-allergic, Asternizole, Cadila, Citrizine, Sun Pharma; Anti-ulcer, Omeprazole, Cipla, Cadila, FDC, Lansoprozole, Dr. Reddy's lab, Lupin; Anti-glaucoma, Betaxolol, Cadila; Gastro-intestinal stimulant, Cisapride, Kopran; Anti-inflammatory, S-ibuprofen, Cipla; S-flurbiprofen, FDC; Antihypertensive, SS-enalapril, Cadila. Newland Labs; Anti-glaucoma, S-timolol, FDC.

The drug intermediates are: Semi synthetic penicillin, D-Phenyl glycine, Lupin, Cadila, SOL, 4-hydroxy phenyl glycine, Kopran; Ciprofloxacin, 2-4 dichioroflurobenzene, Cipla, Lupin, Norfloxacin, 3-chloro-4 fluro aniline. Navin Flourine.

Statement-II

New Drugs Discovered/Developed in India
during the last five years

Product	Year	Use	Institution
1. Chandonium lodide	1994	Neuromuscular Blocker	CDRI, Lucknow
2. Centpropazine	1997	Antidepressant	CDRI, Lucknow
3. Arteether	1997	Anti-Malarial	CDRI & CIMAP Lucknow
4. Thrombinase		Cardio-Vascular	ICMR
5. Cyclosporin		Immunology	ICMR

[Engilsh]

Crimes Against Women

*29. SHRI TARIQ ANWAR:

SHRIMATI RANEE NARAH:

Will the Minister of HOME AFFAIRS be pleased to state:

- (a) the number of incidents of crimes against women since January, 1998, State/UT-wise;
 - (b) the reasons for the increase of such crimes:
- (c) the number of cases solved and arrests made, State/UT-wise;
- (d) the steps taken/proposed to be taken by the Government for the rehabilitation of rape victims:
- (e) whether Delhi is the most insecure city for people particularly for women;
 - (f) if so, the reaction of the Government thereto;
- (g) the remedial measures being taken to check crimes against women;
- (h) whether the Government propose to amend the existing laws and to provide capital punishment to persons involving in crimes against women and child prostitution; and
 - (i) If so, the details thereof?

THE MINISTER OF HOME AFFAIRS (SHRI L. K. ADVANI): (a) to (i) Available information in regard to incidents of crimes against women since January'98, State-wise/UT-wise has been shown in the enclosed Statement

- 2. Available data in regard to crimes against women for the first six months of 1998 reveal that the Crime Rate (i.e., incidence of crime per lakh of population) is the highest in Rajasthan (11.85), followed by Madhya Pradesh (10.10), Delhi (9.70) and Andhra Pradesh (8.72).
- 3. Information relating to the number of cases solved and arrests made is not readily available.
- 4. 'Public Order' and 'Police' are State subjects as per the Seventh Schedule to the Constitution of India. The registration, investigation, detection and prevention of crimes is primarily the responsibility of the State Governments. However, the Central Government has been writing to the State Governments and UT Administrations, from time to time, stressing upon them the need to take preventive and punitive measures in connection with crimes against women. These measures include, inter alia, setting up of women police stations, creation of women police cells in police stations, recruitment of women in police, identification of atrocity-prone areas, hearing of rape cases in courts presided over by lady judges as far as