162 of the Rules of Procedure and Conduct of Business in the Rajya Sabha, I am directed to return herewith the Appropriation (No. 3) Bill, 1964, which was passed by the Lok Sabha at its sitting held on the 27th April, 1964, and transmitted to the Rajya Sabha for its recommendations and to state that this House has no recommendations to make to the Lok Sabha in regard to the said Bill.'

12.17 hrs.

COMMITTEE ON PRIVATE MEMBERS' BILLS AND RESOLUTIONS

FORTY-FOURTH REPORT

Shri Krishnamoorthy Rao (Shimoga): I beg to present the Forty-Fourth Report of the Committee on Private Members' Bills and Resolutions.

COMMITTEE ON PETITIONS

SECOND REPORT

Shri Thirumala Rao: I beg to present the Second Report of the Committee on Petitions.

12·18 hrs.

RE: NEXT SESSION OF LOK SABHA

Shri S. M. Banerjee (Kanpur): Before you take up other business, I wish to say this. The session is ending tomorow. Today the newspapers reported that we are meeting on 27th May, 1964. I do not know if that is the official version. I want to know whether it is correct and in that case whether there will be Question Hour or not.

Mr. Speaker: If there is a session, there would be question hour. In other respects, I am as ignorant as he himself is.

Shri S. M. Banerjee: In that case ten days' notice is required. The practice has been that summons are issued

after some time. We adjourn tomorrow and we want to know whether immediate orders will be issued.

Mr. Speaker: It is for the Government to say. If there is a session called, there will be question hour.

Shri S. M. Banerjee: The other day the other question was also raised about the talks with Sheikh Abdulla. Are we getting a statement?

Shri Hari Vishnu Kamath (Hoshangabad): We would request you to ask the Minister of Parliamentary Affairs to make a definite statement tomorrow about all these things.

Mr. Speaker: I shall find out if he is able to make a statement tomorrow.

12.19 hrs.

DRUGS AND COSMETICS (AMENDMENT) BILL—*contd.*

The Deputy Minister in the Ministry of Health (Dr. D. S. Raju): Mr. Speaker, while I introduced yesterday the Drugs and Cosmetics Bill of 1940 as approved by the Joint Committee and as passed by the Rajya Sabha, I made a few observations. Before I proceed further I would like to thank the Members of the Joint Committee and its chairman, Shri D. P. Karmarkar and express my deep gratitude for the Members for the very good work they have done. With infinite patience they sat several times. There were about 13 sittings and they received about 165 representations from various associations, institutions and from individual members. While formulating these proposals, the Select Committee had gone into the whole question and kept in view the very essential factors. The main consideration was the safety and welfare of the people and safeguarding their health from these injurious drugs which might be adulterated or may be substandard or misbranded. That was

[Dr. D. S. Raju]

the main consideration before the Select Committee. They had also kept in mind the interests of the trade and the interests of the profession. Through all these three angles they had discussed this problem and suggested or made their recommendations finally, and that Bill has been passed by the Rajya Sabha. and now I have the honour to bring it before the Lok Sabha.

The main change was the incorporation of the ayurvedic and unani drugs and they were brought within the purview of the Drugs Act. As I have said, the ayurvedic industry, though in its infancy, has made very rapid strides during the last few years. It was almost a cottage industry some ten years ago. Now it has developed into almost a big industry, the turnover being about Rs. 10 crores every year. Such being the case, it is naturally very incumbent on the Government that we should take adequate precautions to see that the ayurvedic drugs are prepared in a very scientific way and are distributed and sold in a proper way so that they are not injurious to the people.

The modern drugs also is indeed a major industry; the turnover is said to be Rs. 100 crores every year. In the manufacture of these modern drugs, both in the private and the public sectors—the turnover is about Rs. 100 crores a year. Obviously several lakhs of people are involved or engaged in it and millions of consumers are also affected by it. From time to time, both in this House and the other House and among the public also, there was anxiety that there is a considerable degree of adulteration of drugs which was causing injury to the people's health. So, there was a demand that punishment should be more deterrent and more stringent. That fact was also taken into consideration and in the amending Bill they have suggested that the minimum punishment should be one year's imprisonment and the maximum punishment should be ten years' imprisonment and with fine or both. That was the recommendation in the original Bill. But the Select Committee has said that the judiciary, the courts, have got the power to reduce the punishment to the extent necessary.

The Committee have made certain other recommendations also. Regarding the question of adulteration of drugs, for the first time, this term has been introduced, namely, "adulteration" of drugs. Formerely, the terms were "misbranded," "spurious" and "sub-standard" drugs. For the first time now, the name or the definition of the term "adulteration" has been introduced, and the maximum punishment was prescribed for the adulteration of drugs.

Shri Hari Vishnu Kamath (Hoshangabad): That Bill has yet to come in the next session.

Dr. D. S. Raju: Yes; but the term has been introduced in this. The most important change is in respect of the ayurvedic industry. As I have said, this has also become a major industry. Formerly, vaids and hakims used to make their own preparations for their patients. There was not much of danger in those days; they used to exercise great care because they were directly concerned with their own patients. It has been brought to our notice that so many ayurvedic drugs are being adulterated with modern drugs and sold as ayurvedic drugs, and that was the reason why we have to take adequate precautions; also, some costly ingredients such as gold, silver, copper and saffron went into the preparations of certain drugs. That is also another reason why adequate precautions have to be taken. This was also gone into by the Udupa Committee. While making these recommendations, we had to keep in mind the interests of the trade and of the profession of ayurveda also. It is after all an indigenous industry and it is essential that we should safeguard the industry also. So, only

a limited control has been prescribed for the manufacture, sale and distribution of ayurvedic drugs. In the Select Committee, opinion was expressed that there should be a separate Act for ayurvedic drugs. Ultimately it was agreed that for the time being, since there is no standard pharmacopoeia for ayurveda and Unani, they have recommended that a separate chapter be written in the Drugs Act called Chapter IVA, which has been incorporated in this Bill. They have recommended that only limited control should be imposed upon the manufacture of ayurvedic drugs. One is minimum sanitary conditions around the manufacturing unit. Secondly, they have said that the raw materials should be properly identified by the people employed there. Thirdly, the bottles should bear proper labels which indicate the contents. These are the only three minor conditions which have been imposed upon this ayurvedic industry.

The punishment also was not very stringent as was applied to modern drugs. The punishment, they said, should only be 3 months imprisonment or a fine of Rs. 500 or both, which again could be reduced by the courts.

Now it is compulsory that ayurvedic manufacturer should get a licence before he starts manufacturing drugs, whereas the dealers are not required to get licences. They can buy drugs only from a licensed manufacturer. These are the provisions which have been imposed upon ayurvedic and unani drugs.

So far as modern drugs are concerned, the punishment is much more deterrent. The punishment has been enhanced from 1 year to 10 years. For sub-stantard drugs, naturally it has been provided that the punishment should not be so deterrent as that. Sometimes the contents such as vitamins for instance deteriorate even under natural conditions, even though they are kept under proper hygienic conditions. So, the punishment is low for sub-standard drugs. The maximum punishment is only up to three years.

Confiscation of property has also been provided for. The same provisions apply to both the public sector undertakings as well as private concerns. We have made no distinction between Government departments and private manufacturers. The only difference is that in the case of Government departments, there is no confiscation of property; obviously Government cannot confiscate its own property, whereas in the case of private concerns, property can be confiscated. All the equipment that is used and all the material for transport, all these things can be confiscated. But in the case of Government departments, only the technical staff who are responsible for contravening the provisions of the Act will be taken care of.

These are some of the major changes incorporated in the Drugs Act. I hope hon. Members will consider this Bill and give their support. If they raise any points during the course of the discussion, I shall answer them.

Mr. Speaker: Motion moved:

> "That the Bill further to amend the Drugs and Cosmetics Act, 1940, as passed by Rajya Sabha, be taken into consideration."

Shri D. C. Sharma (Gurdaspur): Mr. Speaker, Sir, I welcome this Bill. So far as the Bills of our Government are concerned, they are always very noble in their intentions and they have very desirable social objectives in view. But the difficulty arises when we come to the question of implementation. It will have to be seen how far the desirable objectives set forth in this Bill are going to be put into effect by the Government as a result of the provisions contained in this Bill. To that I shall come later on. But I want to put one question. I am glad that ayurvedic medicines, unani medicines, ayurvedic cosmetics and unani cosmetics have been brought

[Shri D. C. Sharma]

within the purview of this Bill. After all, whether the Health Ministry and the Health Ministers may say. there is no doubt about the fact that the proportion of persons who use modern medicine to those who use ayurvedic medicines and unani medicines is not very very great. In fact, more persons use indigenous systems of medicine compared to the modern system of medicine which is so very expensive, so urbanised, so institutionalised and so organised as to shut out the common man and the average man from most of its beneficient operations excepting, of course, in the contributory health scheme and the employees' state insurance scheme. As time passes, the system of modern medicine is becoming more and more loaded in favour of perons in the top income bracket or persons who are a little lower down. I think a time will come when the Government will have to institute a scheme of national health service so that dwellers in jhuggies and jhompris, sleepers on pavements, persons who live in dark and dingy lanes in cities, persons who dwell in slums and persons whose income level is very low also get the benefit of this scheme. Therefore, whatever the prejudices of the Health Ministry may be, whatever the blindness—I am using the word metaphorically—of the Health Ministers may be to the ayurvedic and other indigenous systems of medicine, it cannot be denied that the indigenous systems of medicine are for the millions and the modern system of medicine is for the favoured few. Therefore, it is but natural that I should welcome this Bill, because I am myself a great believer in ayurvedic and unani systems of medicines—of course, I do take advantage of the modern system of medicine also as every human being does.

Now, I would request the hon. Minister to do one thing. This Ministry is very fond of producing model Bills—a model health Bill, a model self-government Bill, a model Bill of this kind and that kind. There was also a model municipal election Bill. I welcome that. All that kind of Bills have been thought of by this Ministry—it has perhaps very little to do so far as the health of the people is concerned and so it embarks upon all kinds of adventures. But I would ask the Minister, if I may be permitted to do so, to set up a model factory for the manufacture of ayurvedic medicines and also for the manufacture of unani medicines. It should be a pilot project. It should be a kind of example for other people to look upto. I do not want this Ministry to enter into trade. I do not want this Ministry to enter into competition with the private sector. But I do want that the Ministry should set up model factories for the manufacture of these things, so that people who are employed in the manufacture of these medicines can take lessons from there. In the Department of Education the British Government set up a central model school in Lahore. Even now there are some model schools so that other schools may be based on that specimen. In the same way, I would say, the government which is entering into so many fields of commerce, trade and manufacture should enter this field also; of course, not in a way to shut out the poor manufacturers of ayurvedic medicines but in a way to show them how the raw materials for the drugs can be procured, how they can be processed, how they can be bottled and labelled. I would not mind if, along with this model factory which the Government of India will set up, there were also some short-term training courses available to those persons who are going to engage in that line. After all, our government is not only a government for law and order; it exists for augmenting the wealth of the country; it is an educational government which teaches people how to do certain things and how not to do certain things. So, I think no harm will be done if the government embarks upon an adventure of that kind. I think this will do good to the practitioners of ayurvedic and unani systems of medicine. Of

course, it should be a pilot project to begin with. I hope these words of mine will be taken note of.

Then, one of the clauses of the Bill refers to the constitution of a Board. Our Government of India, unlike the governments in some other countries, cares more for prestigeous element of boards than for its operative element. It must have big names to make that board; big persons should constitute that board, even though they may not be able to find time to attend the meetings or to attend to the duties connected with that board, because they are already over-burdened with work; of course, I do not believe them when they say they are over-burdened with work; but I am told like that. Who are going to constitute the Board? The Director-General of Health Services, the Drug Controller, Directors of Central Drug Laboratories and so on. Of course, some poor professors are also taken. Some tenderness has been shown to teachers also in this Board.

I can tell you without being a prophet or a foreteller or a soothsayer that the Board, by virtue of the weight given to prestige and official dignity and the cumbersome designations of those persons, is not going to be workable. I would have thought that they would have a Board which would consist of men who could give more time to this kind of thing. Unfortunately, that has not been done. I am very sorry to say that this Board is not going to deliver the goods to which the hon. Minister, a very well-meaning gentleman has made reference in his introductory remarks. I, therefore think that the composition of this Board should be entirely overhauled, entirely revolutionised radically transformed so that it becomes a board more fit for operative purposes than for prestigeous purposes. It should not be a show-piece; it should be a workable board. The same thing applies to the Union Board also. Of course, what I have said about Ayurved applies to Unani also.

Another point that I want to make is that something has got to be done so far as these inspectors are concerned. I know that the qualifications of inspectors will be laid down in the rules, but I would be very jealous of these qualifications because on these inspectors will depend the good quality of our medicines, Unani and Ayurvedic. If these inspectors are not persons who have the requisite qualifications, I think, everything will go down.

Our experience of inspectors is not very happy. We have the food adulteration inspectors, inspectors who detect adulteration in milk, sodawater and other things. Our experience of these persons has not been very desirable. It is because these persons have not been able to bring down the incidence of adulteration so far as foodsstuffs and other things are concerned. What is the good of having inspectors if the incidents goes on rising? It reminds me of an Urdu couplet:

मर्ज बढ़ता गया ज्यों ज्यों दवा की ।

If these inspectors are going to be of that variety who will unknowingly or unwittingly make the adulteration of drugs and the substandard quality of drugs and other things more common, I thing, they will not be of much use. Therefore, I think, the qualifications of the inspectors should be laid down very carefully. I hope, that will be done when the rules are made and that these inspectors will be selected with due care and, at the same time, they will be given sufficient power. Sometimes these inspectors are only sightseers. They can see what is happening but they cannot do anything. They are the ineffectual witnesses of things which they do not want to observe. I hope, these inspectors will have sufficient power in order that they be able to do their duty properly.

Now I come to clause 15. It reads:—

"A person, not being the manufacturer of a drug or cosmetic or

[Shri D. C. Sharma]

his agent for the distribution thereof, shall not be liable for a contravention of section 18 if he proves....".

I may tell you one thing, Mr. Speaker. Of course, our system of justice is based upon the British system of justice and it wants that not a single innocent person will be punished. It is a good system and it has been working well or ill all these years. Here there are three exceptions given, namely,—

"if he proves—

that he acquired the drug or cosmetic from a duly licensed manufacturer, distributor or dealer thereof;

that he did not know and could not, with reasonable diligence, have ascertained that the drug or cosmetic in any way contravened the provisions of that section; and

that the drug or cosmetic, while in his possession...."

These three exceptions which are given may work to the advantage of the dealer but they may also work to the advantage of those persons who are selling spurious drugs, whether Ayurvedic or Unani, in this country. So, I would say that this clause should be so modified that no loophole is left for anybody to come to us and say, "I am not to blame; I got this from that man and now that man will have to prove". You know, Sir, when the big man has to prove something against the small man, you can take it from me that the small man will suffer and the big man will be let off.

Another point that I want to make is this. A whole list of books on Ayurveda and Unani has been given. I have a great deal of respect for these books. They are written by great practitioners of the art of Unani and Ayurveda. These are classic. But I want to ask this: Do we think that the Ayurvedic system of medicine is stagnant? Do we think that the Unani system of medicine will never progress? Do we think that new drugs and new combinations of old elements and compounds can, come into the market only when we think of modern medicine—unfortunately, combinations which are neither modern nor medicine?

Then, we have clamped the brains of all the practitioners and others from producing new drugs, new recipes, new formulas and new combinations of things. Of course, it can be said that they can take those combinations by applying for patents and all that kind of thing; but my feeling is that a definite clause should have been added in this Bill to show that this Bill is not going to put a brake upon the inventive, experimental and research potentialities of these Unani *hakims* and Ayurvedic practitioners and that given the proper facilities they can be expected to produce new sets of medicines.

Therefore I say that this Bill is a good Bill. It sanctifies the *status quo*. It puts its seal of approval on what exists; but I would request the hon. Minister to see to it that he opens to the Ayurvedic practitioners and the drug manufacturers, Ayurvedic or Unani, new vistas and new horizons which can alleviate the misfortune and the ills of mankind of which we are having new and new varieties every day.

Dr. U. Misra (Jamshedpur): Mr. Speaker, Sir, I support the Drugs and Cosmetics (Amendment) Bill which has now come after going to the Select Committee because a lot of lacunae that were there in the primary stage have been removed after the Select Committee's recommendations. But all the provision that is made here is for sub-standard and spurious drugs. In the use of modern medicine more than the sub-standard and spurious drugs the misuse of drugs is doing harm. The misuse of drugs is doing more harm than sub-

standard and spurious drugs and some sort of a provision should have been made for the proper use of drugs. I mentioned the misuse of antibiotics and its effect on the population when the Bill was introduced. Now, the misuse of such drugs, anti-biotics, sulpha and other drugs, is still continuing and it will continue and there is no provision to check this. On the other hand, drugs which are life-saving are not available even to the general practitioners because they are under some excise licence. Now, what I fear is this. My learned friend Mr. Sharma has given his apprehension regarding the powers of the inspectors. But what I fear is that instead of making the law effective against the manufacturers who may send their spurious or sub-standard drugs, the dealers may be prosecuted because there is this provision:

> "(b) that he did not know and could not, with reasonable diligence, have ascertained that the drug or cosmetic in any way contravened the provisions of that section;"

The medicines and cosmetics are packed. The pharmacy man or the dealer or the retailer will see only the licence and the packing and if something inside the packing is found as spurious or sub-standard—if with all his diligence he could not ascertain it —first of all he will be dragged to the law courts and harassed and the onus of the proof lies on him. Some sort of a safeguard should have been made to save these dealers. The provision of the licence, the packing and the registration could have been sufficient.

Regarding the storing of it, if some sort of a standard is imposed and those people can stock and sell medicines, then the work of the inspectors would have been easy. In the absence of that, any drug shop owner is liable to be harassed under this.

Another thing which I cannot agree with Mr. Sharma is that the Board should consist of the highest people. It is an advisory Board. It will not look into the day-to-day work or the analysis of the cosmetics and drugs. So, the highest authorities should be in the Board so that they can advise and judge the qualities of the drugs and for day-to-day analysis of the drugs there are laboratories and other methods also.

With these suggestions, I support the Bill.

Dr. Sarojini Mahishi (Dharwar North): Mr. Speaker, Sir, the Drugs and Cosmetics (Amendment) Bill, 1964 is before the House. This was referred to the Select Committee and the Select Committee after listening to not less than 150 representations made by different manufacturers of drugs and cosmetics and also other wholesale agents has prepared this Bill.

The main thing to be noticed in this particular Bill is that some part of section 19 in the original Act is being deleted. This is the main thing. When this particular Bill was introduced, the hon. Minister for Health said on the floor of the House that it is introduced because spurious, adulterated and misbranded drugs are coming to the market and the consumers are not able to get good quality drugs and cosmetics also. This Bill is being introduced with a view to exercising or imposing certain restrictions upon such of the sellers, such of the manufacturers, who are inclined to sell spurious, adulterated and misbranded drugs. The first thing is that because Ayurveda was not covered within the purview of the Drugs and Cosmetics Act, 1940, in the name of Ayurveda many spurious drug came to the market and this was for this purpose that this was introduced. In the original Act also, there were certain loopholes. While the drug was in the possession of a seller, that drug became sub-standard not due to some addition that he made or due to any fault of his but due to the defect in the storage or something of that kind for which he could plead that he was not responsible and that he should not be

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fined for the same. Such were the loopholes and in order to remedy some of these loopholes, in order to give better quality drugs and cosmetics to the consumer, this Bill was introduced. Therefore, in the original Act, we find section 19(3) which says:

> "(3) A person, not being the manufacturer of a drug or cosmetic or his agent for the distribution thereof, shall not be liable for a contravention of section 18 if he proves—
>
> (a) that he did not know and could not with reasonable diligence have ascertained, that the drug or cosmetic in any way contravened the provisions of that section and that the drug or cosmetic while in his possession remained in the same state as when he acquired it; or
>
> (b) that he acquired the drug or cosmetic from a person resident in India under a written warranty....."

Under these circumstances, that particular person was relieved and he was not fined. The result was that the consumer got sub-standard drugs. Now, in order to bring this person under the control of this particular Bill, this particular part of the section is being deleted and substituted by:

> "(3) A person, not being the manufacturer of a drug or cosmetic or his agent for the distribution thereof, shall not be liable for a contravention of section 18 if he proves—
>
> (a) that he acquired the drug or cosmetic from a duly licensed manufacturer, distributor or dealer thereof;"

This is due to the fact that sometimes the seller kept such drugs which he did not get from the licensed manufacturer. In the name of the licensed manufacturer or in the name that was similar to a well-established manufacturer, certain drugs were being kept by the seller and in order to put a restriction upon such a seller that this particular part of the section was deleted and this new clause is being substituted so to bring this person under the control of the Bill. The drug has been defined and that is whether it is Ayurveda or Allopathy, whatever it may be and that the drug is a medicine which is used either for the external application or internally for curing a human being. The drug, whether it may be under Ayurveda or Allopathy should be brought under the purview of the Bill and the original Act, as was introduced, never mentioned, so to say, in detail about the Ayurvedic things. Bringing Ayurveda under the control or the purview of this particular Bill by keeping a word or two therein may not be adequate to serve the purpose which is meant to be served.

13.00 hrs.

For, the way in which the Ayurvedic drugs and cosmetics are manufactured may be quie different. There is no standard pharmacopoeia in Ayurveda. Hence, the manufacturers of the Ayurvedic drugs will not be able to manufacture the drugs only according to the standard pharmacopoeia the formulation of which has been delayed for all these years. Further, for want of a drug research institute in the field of Ayurveda, the drugs which are manufactured cannot be tested also properly.

There is provision in this Act in regard to the imposition of restrictions, the implementation of the same and punishment for the violation of these restrictions, as far as the allopathic drugs and cosmetics are concerned. But there were no such provisions in the case of the Ayurvedic drugs. Therefore these three things were to be attended to when these Ayurvedic medicines were to be brought within the purview of this Act. The imposition of the restrictions in their entirety as in the case of allopathic drugs could not be done in the case of the Ayurvedic drugs because the Ayurvedic system does not have a standard pharmacopoeia yet, nor is there a

drug research laboratory so far, nor is there in Ayurvedic council or body proper to investigate into all these matters, nor do we have Ayurvedic inspectors who are qualified to inspect all these drugs. Further, the hygienic conditions under which the maufacture of Ayurvedic drugs is being undertaken also differ. Therefore, taking into consideration all these things, it was proposed to have same partial restrictions on the manufacture and sale of Ayurvedic drugs, at least for the time being. In course of time, restrictions will be imposed in their entirety upon the manufacture and sale of Ayurvedic drugs also. Therefore, a new chapter is being added in this Bill. Of course, it would have been much better if a separate Bill to impose restrictions on Ayurvedic drugs could have been brought forward before this House and I hope that the hon. Minister will bring forward such a bill, but, for the time being, the new chapter IVA is being added to provide for the imposition of partial restrictions as far as the hygienic conditions are concerned, as far as the exhibition of the contents of the medicine on the label put on the bottle or package is concerned. There are certain restrictions in this regard, whatever may be the standard book according to which the Ayurvedic drug might have been manufactured.

For the information of the House, I might point out that there is a schedule also attached to this Bill which contains a number of standard books, as far as the Ayurvedic (including Siddha) system is concerned, because these systems are in practice in certain parts of India; similarly, the standard books with reference to the Unani system also have been mentioned therein. Of course, there is scope for adding to the list of standdard books mentioned in the Schedule. Whether the drug is prepared according to Chyavana or according to Sharangadhara or according to any of the books mentioned under the Siddha system, the contents are to be written clearly upon the bottle or the package in which the manufactured Ayurvedic drugs are placed.

Now, I come to the question of implementation of the imposition of these have been enforced in the case of vedic drug manufacturing industry, the hygienic conditions could not be so far well enforced as they could have been enforced in the case of the allopathic drug manufacturing industry, because in the case of the Ayurvedic drugs, indigenous things are also utilised. So, it has been proposed to make parts of Schedule M attached to the Drugs and cosmetics Rules applicable to the Ayurvedic drugs, so far as the hygienic conditions which are to be observed in the case of their manufacture are concerned.

The sole intention of imposing these partial restrictions at least on the manufacture and sale of these Ayurvedic drugs and bringing quality drugs and medicines to the market is that the consumer should get better quality drugs and cosmetics.

The hon. Minister was kind enough to say that not less than Rs. 10 crores were being invested in the Ayurvedic drug manufacturing industry. Even then, as compared to the allopathic drug manufacturing industry which has developed to a great extent, we find that the Ayurvedic drug manufacturing industry is still in its initial stages. Therefore, the restrictions and the punishment for the violation of the restrictions imposed upon the manufacture and sale of these Ayurvedic drugs are also comparatively much less as compared with those that obtain in regard to the manufacture and sale of adulterated, spurious or misbranded drugs in allopathy.

Quite a commendable work has been done by the Joint Committee which has taken great pains to listen to so many representations and then make the necessary amendments in the original Bill. For instance, in the proposed section 17B, the details with regard to the adulterated and misbranded drugs have been laid down. Similarly, section 9B is being added after section 9A wherein the adulterated drugs are being described along with

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the misbranded ones. The slight distinction between all these things has been clearly brought out. The sole intention is that the manufacturer or seller or any agent of a seller should not go unpunished either under the one clause or the other if he sells spurious, adulterated or misbranded drugs. We have seen various examples of these kinds of spurious, adulterated or misbranded drugs. We have seen people who deal in such drugs and who exploit the ignorance of the illiterate folk in the country, in the urban as well as in the rural areas. Many cases have gone to the court also, but even the courts have found it difficult in certain cases to interpret some of these provisions on account of the loopholes existing in the original Act as a result of which they have been obliged to release the culprit unpunished.

This Bill seeks to plug those loopholes and to ensure that good quality drugs and cosmetics are made available to the people. I welcome the changes that have been introduced. I would specially mention the change made in section 19 of the original Act and also the change made in section 27 dealing with punishment and also the addition of the special chapter namely chapter IVA, which, I think, will be welcomed by the whole country.

Shri Mohsin (Dharwar South): This is a very welcome measure, which will go a long way in improving the health of the country. Many a time we have heard of instances of adulteration of drugs, and many a time in the Parliament also we have heard of instances of adulteration in milk and other foodstuffs; there were instances where flies were found in the milk bottles or butterflies, rats and such other creatures were found in food materials. Besides, there was an interesting instance of a fly being found in an injection tube also. That gave a rude shock to the whole country because the people had some belief in allopathic medicines and especially in injection tubes. The bringing forward of this measure itself shows how many spurious drugs have come into the market and what role they are playing in injuring the health of the country. From that point of view, I would submit that this Bill has been brought forward with a good intention, namely of checking the manufacture and sale of such spurious drugs.

Of course, nowadays, people are hankering for the allopathic medicines in preference to the Ayurvedic or Unani drugs. The educated people prefer to be treated by allopathic doctors rather than by the Ayurvedic or Unani doctors. But the present dearth of allopathic doctors is a difficulty in meeting the demands of the public. So, a major proportion of the population, nearly 80 per cent, have to depend upon the Ayurvedic or Unani doctors. So far there have been no restrictions on the preparation or sale of these Ayurvedic or Unani drugs, but this Bill contemplates to put some restrictions in that regard.

Coming to the constitution of the board referred to in the proposed section 5, I find that there are so many officials and non-officials represented on this board, but quite suprisingly, there is no representative from the All India Institute of Medical Sciences. It is a very big institute conferring degrees and diplomas and it is an institution of an all-India character, but it is very surprising that that is not represented at all on this board.

[DR. SAROJINI MAHISHI *in the Chair*]

Whereas there is one person from the Indian Medical Association and one person from the Indian Pharmaceutical Association, I do not know why no one from the All India Institute of Medical Sciences has been represented on this board.

Then I come to Clause 8 which deals with adulteration of drugs. Many a time we see that drugs are manu-

factured in sanitary conditions and they are also transported in a good manner. But sometimes they are not stored in a proper and sanitary manner; the pharmacies which are licensed do not, in many of the States, conform to all the requirements of law as at present. But Clause 8 makes it penel even for a man who stores such drugs which are injurious and which are spurious. But in the explanation to the clause, there is a loophole. It says:

> "For the purpose of clause (a), a drug shall not be deemed to consist, in whole or in part, of and decomposed substance only by reason of the fact that such decomposed substance is the result of any natural decomposition of the drug within the period, if any, specified on the label of the drug within which the drug is to be used."

When it is found to be decomposed, naturally the man who has stored it will say that it is natural decomposition and may escape the penalty. Thus the purpose of the clause would be rendered futile. I would have preferred some restrictions in connection with decomposition to get over this difficulty.

Now I come to Clause 18. It is very strange to see that normal legal jurisprudence or natural justice is denied. The clause say:

> "For section 27 of the principal Act, the following section shall be substituted, namely:—
>
> 'Whoever himself or by any person on his behalf manufactures for sale, sells, stocks or exhibits for sale or distributes—
>
> (a) any drug—
>
> (i) deemed to be misbranded under clause (a), clause (b), clause (c), clause (d), clause (f) or clause (g) of section 17 or adulterated under section 17B; or
>
> (ii) without a valid licence as required under clause (c) of section 18,
>
> shall be punishable with imprisonment for a term which shall not be less than one year but which may extend to ten years and shall also be liable to fine."

I have no quarrel with the maximum sentence of ten years because these drugs may prove to be very injurious and may take away so many lives. But I have definitely got objection to the minimum punishment prescribed. The minimum punishment enjoined upon the courts is not less than one year. I have not seen any law where the minimum punishment to be awarded is laid down. It is always left to the court to judge what punishment has to be given. This is the only Bill or one of the few Bills where I have seen the provision, stating that the minimum punishment shall be such and such. It appears to be a curtailment of the right of the judiciary. It limits their right to decide what shall be the minimum punishment. I do not think it is a very healthy convention in the democratic set-up we are having.

Shri Sonavane (Pandharpur): Such provisions are contained in other Bills also.

Shri Mohsin: It should be left to the courts to decide the minimum punishment, one year, two years or even ten years. Maximum punishments are mentioned but the minimum punishment should never be incorporated in any Bill.

Shri Bade (Khargone): That shows they have no confidence in the courts.

Shri Mohsin: It comes to that. It means that the legislature has no confidence in the court awarding the requisite punishment. But in such matters, the courts should have greater liberty in awarding punishment. There may be less serious offences.

Dr. D. S. Raju: The courts can reduce the punishment.

Shri Mohsin: But they will have to give some reasons. That is another aspersion on the courts. That means the courts are not awarding punishments with reasons. The courts always award punishments with reasons. So why should they give special reasons for awarding a sentence of less than one year? I cannot understand it.

Dr. D. S. Raju: Parliament is sovereign and supreme.

Shri Mohsin: The proviso says:

> "Provided that the court may, for any special reasons to be recorded in writing, impose a sentence of imprisonment of less than one year".

That means that the courts may not consider about the reasons if they award a sentence of more than one year. Somehow or other I do not think this is a healthy convention to put any kind of restriction on the courts in this matter.

Then I have something to say about unani and ayurveda. These systems of medicine need some encouragement. They cater for 80 per cent of our population, if I am not mistaken. We are now going to put some restrictions on these systems. May be that the whole Drugs Act is not made applicable to these systems. I do concede that, though in the original Bill it was intended to be applied. According to the Report of the Committee, a separate Bill is now intended to be brought forward. But in this Bill there is a separate chapter—chapter IVA—which proposes some kind of restrictions. These restrictions are not healthy for the advancement of either unani or ayurveda. They are contained in the proposed Sec. 33-D:

> "From such date as may be fixed by the State Government by notification in the official gazette in this behalf, no person shall himself or by any other person on his behalf manufacture for sale any ayurvedic (including Siddha) or unani, drug,
>
> (a) except under prescribed hygienic conditions"—To this I have no objection.
>
> "(b) except under the supervision of a person having the prescribed qualifications".

This is bound to affect adversely some of the medicinal preparations because we have got some hereditary ayurvedic and unani experts who have learnt through their ancestors since centuries past. If some such qualification is prescribed for them, I think many of the ayurvedic and unani preparations will have to be stopped.

Again:

> "except under and in accordance with the conditions of a licence issued for such purpose under this chapter."

So the Government take all the powers of putting the conditions for giving licence. This may also discourage the development of ayurveda and unani. Then there are items (d), (e) and (f). I do not think they will be congenial to the development of unani and ayurveda.

There is a loophole again. Suppose we want to put all these restrictions very honestly. The second proviso says:

> "Provided further that nothing in clauses (a), (b) and (c) shall apply to the manufacture, subject to prescribed conditions, of small quantities of any such drug for the purpose of examination, test or analysis."

If a manufacturer is caught, he will say that he prepared them only for

examination, test or analysis. What is a small quantity is a big question which is very difficult to determine. If any unani or ayurvedic drug is manufactured in a spurious way and if you want to put some restrictions on that and want to implement that restriction, how will you get over this loophole? I do not understand.

Then about the appointment of inspectors under clause 33G.

> "(3) No person who has any financial interest in the manufacture or sale of any drug shall be appointed to be an Inspector under this section."

The person may not have financial interest, but some other kind of interest. Some relative of his, son or nephew or son-in-law, may be manufacturing such a drug, and he may be appointed as Inspector. So, it would have been better if the word "financial" had been deleted from the clause, so that any man who has any interest in any selling or manufacturing firm should be debarred from being appointed as Inspector.

The new section 33-I says:

> "Whoever contravenes the provisions of section 33D or section 33E or section 24 as applied by section 33H or any rule made under this Chapter shall be punishable with imprisonment for a term which may extend to three months, or with fine which may extend to five hundred rupees, or with both."

I do realise that compared to Allopathy, it is a very lenient punishment, but is such a punishment warranted in today's circumstances where the Government has not provided any laboratories for them, where there are no institution to train these Ayurveda or Unani people? There is no standard pharmacopoeia for these systems. Government is not giving any encouragement. Research institutions are not opened anywhere, in spite of the fact that many States have asked for such laboratories. So, after you have made all these arrangements, you can put restrictions on the manufacture or sale of such Ayurvedic or Unani medicines penal. Otherwise I think it will be a discouragement to the Unani and Ayurvedic systems of medicine. First you have to provide all the necessary facilities. We do not have research institutions, we do not have good analysts also. So, how will you say that a preparation is not a standard medicine? You do not have the machinery to test the standard; and yet you want to have a penal clause.

I think such a clause will not be conducive to the development of these two systems of medicine. No doubt some kind of restriction is necessary, but that should come after we open the necessary institutions.

श्री गौरी शंकर कक्कड़ (फतेहपुर): उपाध्यक्षमहोदय, भारत स्वतन्त्र होने के बाद जब कभी कोई चीज आती है जिसमें यह कोशिश की जाती है कि अशुद्धता दूर की जाए, तो वह चीज मेरी समझ में नहीं आती कि अशुद्धता को दूर करने का प्रश्न कैसे उठाया जाता है जब कि हमारे जीवन के हर क्षेत्र में अशुद्धता आ गयी है ।

भारत सरकार ने और प्रान्तीय सरकारों ने अभी तक खाद्य पदार्थों की शुद्धता के लिए अनेकों कानून बनाये हैं, लेकिन क्या मैं पूछ सकता हूं कि क्या बाजार में जन साधारण को कोई खाद्य पदार्थ शुद्ध मिल सकता है । अशुद्धता रोज बरोज बढ़ती जा रही है, और उसे दूर करने के लिए जो कदम उठाए जाते हैं वे नाकाफी होते हैं, और उनसे अशुद्धता दूर होने के बजाय और भी बढ़ती जा रही है ।

जहां तक औषधियों की अशुद्धता का सम्बन्ध है, इसमें कोई सुबहा नहीं कि इन पर नियंत्रण होना चाहिए क्योंकि इनका जन स्वास्थ्य से जबरदस्त सम्बन्ध है लेकिन मुझे तो इस बात का सन्देह है कि वह सरकार

[श्री गौरी शंकर कक्कड़]

जिसने आज तक १७ वर्ष में तरह तरह की योजनाएं बनाने के बाद कहीं भी अशुद्धता को दूर करने में सफलता प्राप्त नहीं की है, उसे औषधियों की अशुद्धता दूर करने में कामयाबी मिल सकती है । मेरा तो यह कहना है कि जहां तक खाद्य पदार्थों की शुद्धता का सम्बंध है, जिससे जन स्वास्थ्य का गहरा सम्बंध है, उसके लिए भारत सरकार ने कोई ऐसा कानून समस्त भारत वर्ष के लिए नहीं बनाया जो कि सब जगह समान रूप से लागू किया जाता, जिससे सरकार का यह संकल्प प्रकट होता कि वह खाद्य पदार्थों की अशुद्धता को दूर करना चाहती है ।

श्रीमन्, बीमारी का सब से बड़ा कारण तो यह है कि हमें कोई खाने पीने की चीज शुद्ध नहीं मिलती और इस कारण समस्त राष्ट्र का जन स्वास्थ्य गिरता चला जा रहा है । मुझे तो इस बात का बड़ा खेद है कि एक तरफ़ तो सरकार आयुर्वेदिक और यूनानी दवाओं और उनके इलाज के साथ सौतेली मां का सा व्यवहार करती है, जैसा कि मैंने इससे पहले भी कहा है, और दूसरी तरफ इसको नियंत्रित करने का भी कानून ला रही है । अगर आंकड़े एकत्र किए जाएं तो पता चलेगा कि भारतवर्ष के ८० प्रति शत नागरिक निर्धन होने के कारण आयुर्वेदिक और यूनानी पद्धति से इलाज करवाते हैं तो जब यह दशा है तो क्या यह सरकार का कर्तव्य नहीं होता कि इलाज की इन पद्धतियों को प्रोत्साहन दे । जब इतनी बड़ी संख्या में लोग इन पद्धतियों से इलाज करवाते हैं तो आवश्यक तो यह था कि उसके लिए उचित व्यवस्था की जाती, लेकिन हम देखते हैं कि एलोपैथी के लिए जो व्यवस्था की जाती है उसके मुकाबले में इन पद्धतियों के लिए जो व्यवस्था की जाती है उसका कोई मुकाबला नहीं किया जा सकता ।

आज जो यह संशोधन विधेयक उपस्थित किया गया है उसके बारे में मुझे आपत्ति है । पहले तो सरकार आयुर्वेदिक और यूनानी पद्धतियों के प्रशिक्षण के लिए उस प्रकार की व्यवस्था लेबारेटरी आदि द्वारा नहीं करती जैसी कि ऐलोपैथी के लिए करती है, और फिर उन पद्धतियों की औषधियों के बनाने और उनकी अशुद्धता दूर करने के लिए और उन पर नियंत्रण रखने के लिए कानून बनाती है । यह बात मेरी समझ में नहीं आती । अभी तक हम उस नतीजे पर नहीं पहुंच पाए हैं कि आयुर्वेद और यूनानी की कौन सी औषधियां शुद्ध है और कौन सी आदर्श रूप से शुद्ध हैं । इनको बनाने का प्रशिक्षण सरकार द्वारा नहीं दिया जाता । उनके बारे में अभी तक कोई राय कायम नहीं की गयी है । ऐसी स्थिति में यह कहां तक वाजिब है कि उनके ऊपर नियंत्रण किया जाए । तथा उनके बनाने और बेचने के बारे में इस प्रकार के कदम उठाए जाए ।

मैं इस बात का स्वागत करता हूं कि जिन औषधियों का जन स्वास्थ्य से सम्बंध है वे शुद्ध होनी चाहिएं । परन्तु जैसा मैंने अभी निवेदन किया इससे पहले सरकार को आयुर्वेदिक और यूनानी पद्धतियों को पूरा पूरा प्रोत्साहन देना चाहिए । सरकार को उनके लिए पूरी सुविधाएं देनी चाहिए । सरकार की ओर से इन औषधियों के बनाने का भी वैसा ही प्रशिक्षण दिया जाना चाहिए जैसा कि एलोपैथिक औषधियों के लिए दिया जाता है । तभी सरकार इस प्रकार का नियंत्रण कर सकती है ।

मैं इसके पक्ष में हूं कि जो औषधियां अशुद्ध पायी जाय उनके लिए जो लोग जिम्मेवार हों उनको सजा दी जाए । अभी मेरे एक मित्र ने कहा कि यह तो जूडिशियरी पर कन्ट्रोल किया जा रहा है कि वह कम से कम एक साल की सजा अवश्य दें । मैं तो कहता हूं कि इसमें जो दस वर्ष की सजा

की व्यवस्था की गयी है वह भी कम है । अगर कोई अशुद्ध औषधि बनाता है जिसके कारण किसी की जान चली जाती है, तो उसके लिए यदि ऐसा भी कानून बनाया जाए कि उसे फांसी की या ट्रांसपोर्टेशन फार लाइफ की सजा हो तो भी उचित होगा ।

परन्तु बहुधा यह देखा गया है कि पहले तो जो कानून बनाए जाते हैं उनमें तरह तरह की बचने की गंजाइश रहती हैं और फिर उन कानूनों को ठीक तरह से बरता भी नहीं जाता । इसका कारण यह है कि हमारे जन साधारण के जीवन से अशुद्धि कहीं भी दूर नहीं हुई है । जब तो हालत ऐसी हो गयी है कि वह वायुमंडल जिसमें कि एक साधारण नागरिक सांस लेता है वह भी अशुद्ध हो गया है और यह अशुद्धि बढ़ती जा रही है ।

इसमें जो धाराएं दी गयी हैं उनके अनुसार जो यह व्यवस्था है कि लाइसेंस ले कर आयुर्वेदिक और यूनानी औषधियां बनायी जाए और यह जो एक बोर्ड की योजना है, इसके बारे में मेरा निवेदन है कि बोर्ड के जो सदस्य होंगे इनकी संख्या पैरा ४ में दी गयी है, इनका कार्यक्रम केवल यह होगा कि वह नियम बनाएं और इतना जबरदस्त खर्चा होगा । हर एक कानून जो बनता है उसमें एक बोर्ड की योजना पहले दी जाती है । उसकी क्या आवश्यकता है । अगर हम अपना कदम सही तौर पर इस तरह उठावें जैसे कि आयुर्वेदिक और यूनानी औषधियां सरकार द्वारा उनके बनाने में हमें खुद ही एक तरीके का प्रमाणपत्र दे दिया जाय, उनको प्रमाणित कर दिया जाय तो फिर कोई आवश्यकता किसी तरह के बोर्ड बनाने की अथवा इंसपैक्टर्स आदि बनाने की नहीं रहती है ।

बहुधा यह देखा गया है कि इस प्रकार के जितने कानून बनते हैं उनमें जहां भी इंसपैक्टर का नियंत्रण आ जाता है, इंसपैक्टरों द्वारा उनकी जांच पड़ताल का प्रश्न आ जाता है तो श्रीमन्, अगर मैं यह कहूं कि वह इंसपेक्टर खुद ही उन के साथ सहायक हो जाते हैं भ्रष्टाचार और अशुद्धता बढ़ाने में तो अनुचित नहीं होगा । बजाय इसके कि उनके द्वारा उसको खत्म किया जाय या नष्ट किया जाय उल्टे वे भ्रष्टाचार और अशुद्धता को बढ़ाने में सहायक हो जाते हैं । वही चीज मैं इस विधेयक में भी पाता हूं । इंसपैक्टर के बारे में प्रश्न उठता है कि क्या जानकारी उस इंसपैक्टर को विशेष तौर पर इन औषधियों की होगी उसके बारे में कहीं पर भी कोई प्रावधान नहीं दिया हुआ है ।

मुझे यह कहना है कि इस बिल का नाम ड्रग्स ऐंड कौसमैटिक्स (अमेंडमेंट) बिल है । मुझे यह समझ में नहीं आता कि इसमें यह कोसमैटिक्स का शब्द क्यों बढ़ाया गया और कौसमैटिक्स शब्द बढ़ाने से जो गवर्नमेंट की इसमें संशोधन लाने की मंशा थी वह किस तरीके पर हल होती है ? कौसमैटिक्स की दर हकीकत परिभाषा क्या है ? ज्यादातर देखा गया है कि इस तरह की चीजें जोकि कौसमैटिक्स होती हैं वह बाहरी इस्तेमाल के लिए हैं, उनका प्रयोग जिस्म के अंदर नहीं होता है । इसलिए मैं यह निवेदन करूंगा कि इस संशोधन विधेयक को लाकर और यह कौसमैटिक्स शब्द को बढ़ा कर उस की खिल्ली उड़ायी जा रही है । सही तौर पर इस बात का प्रयास नहीं किया जा रहा है कि जो औषधियां आयुर्वेदिक या यूनानी की बनें उनको देखा जाय कि वह शुद्ध औषधियां हों । मुझे इस बात की आशंका है कि अगर इसी प्रकार से वह बिल कानून हो कर पास हो जाता है तो बहुत सी सुविधाएं जोकि वैद्यों और हकीमों को अभी प्राप्त हैं जैसा कि मैंने अभी निवेदन किया एक बहुत बड़ी संख्या में नागरिकों की वह दवादारू करते हैं, उसमें जगह जगह पर उनको रुकावट होगी । मैं इसके विरोध में नहीं हूं । नियंत्रण अवश्य होना चाहिए परन्तु सरकार को वह पूरी पूरी सुविधाएं जोकि वह एलोपैथिक पद्धति को देती है, वह तमाम सुविधाएं आयुर्वेदिक और यूनानी वालों को मिलें ।

[श्री गौरी शंकर कक्कड़]

उसी प्रकार की लेबोरेटरीज और उनकी दवाइयों के परीक्षण की व्यवस्था हो। उसके बाद यदि सरकार इस प्रकार का क़दम उठावे कि वह शुद्ध औषधियां बन सकें तो ज्यादा उचित होगा।

Shri Chandrabhan Singh (Bilaspur): Mr. Deputy-Speaker, I have been astounded by the boldness of the Health Ministry in bringing out an amendment which includes ayurvedic drugs and unani drugs. It is very nice as far as allopathic drugs—cosmetics and chemicals are concerned but the moment you think about the ayurvedic medicines and unani drugs, the problem becomes tremendous. The problem becomes tremendous for one important reason, that so far you have not got a standard pharmacopoeia either for ayurveda or unani or for sidha or Tibb. In the complete absence of a standard pharmacopoeia which can deal with the various drugs, it becomes difficult for us to check. How will it be possible for us to check the drugs or select inspectors and send them for examination. That is why I feel that it has been a very bold step. A time may probably come when this must be done. But let us do first things first. Today we are putting the cart before the horse. In the absence of a standard pharmacopoeia, it becomes a very difficult problem. The work can be done as far as cosmetics and allopathic drugs are concerned as their chemicals, biochemical, physical and biophysical qualities are very well defined.

The Bill in its provisions mentions the names of two world renowned, standard bodies on page 20 for serum and toxin etc. The first is the International Laboratory for Biological Standards Stantans Serum Institute, Copenhagen and for future, lays down such further standards of strength, quality and purity as may be prescribed. For vitamins, hormones and analagous products, it refers to the standards maintained at the International Laboratory for Biological Standards, National Institute for Medical Research, London and, for future, such other standards of strength, quality and purity as may be prescribed. But when it comes ayurved, sidha and unani, the schedule says: 'Such standards as may be prescribed'. Thereby it has been proved beyond doubt that there is no such standard and in the absence of any such standard, how will the work be done?

Then, on pages 17—19, there are quite a number of books included in the list. Some of the books are ancient; some of them not so ancient; some of them not so modern and some of them, modern. Mark the words: ancient, not so ancient, not so modern and modern. All categories of books are included in this. It also shows that the framers of this legislation were not so sure about the standards. I have seen some of these books and feel that the books are very good. If you go through them, they are wonderful reading and after reading each one you feel as if you can prepare all these drugs yourself. What is the trouble? Most of them differ in their prescriptions. They give the same name but the prescriptions differ, quantities differ and qualities differ. That is the crux of the problem. Put in this context, ancient, not so ancient, not so modern and modern, how will the inspector or the laboratory go about trying to check these drugs. I will give you one instance. As an executive member of the Central Drug Research Institute at Lucknow, I know that when Dr. B. Mukerjee, a well-known physician and scientist was a director, we assigned the work of analysing Makaradhwaja, a very well-known and noted and potent drug, a cardio-vascular stimulant of ayurveda. It is a sort of a combination of mercury and gold. Shri Ramnath Chopra, the noted research worker, on Indian herbs and medicine declared it to be an inert

substance to the consternation of all of us. Dr. Mukerjee's first difficulty was to select a sample for analysis. To his surprise, he found that samples received from various noted firms and institutions varied in their qualities. Although his work also in the beginning confirmed the findings of Shri Ramnath Chopra, later on he reported some nascent qualities which may be responsible for its potency as a cardiovascular tonic. I am quoting this example because I want to invite the attention of this august House to the magnitude of the problem

The remark mentioned in respect of Makaradhwaj holds goods for many other drugs also. Then, there is the question of samples and analysis. Who will analyse all these things? The Schedule says: "such standard as may be prescribed". That means, so far, they have got no standard prescribed. By these deficiencies, shortcomings and gaps, you will let loose the inspectors to go about doing their jobs among the factories. This is an important point. In the absence of the prescribed standard, you have got inspectors who will go about. What will the inspectors do? When you think about them, I am reminded of the inspectors of excise; sanitary inspectors; revenue inspectors; boiler inspectors; factory inspectors food inspectors; chimney inspectors and what not. And then you have got the Drug Inspector. I will not mention the police inspector. I omit it deliberately.

Now, this is a very important point, and coming to the laboratories to test the samples. Where are the laboratories and who will test the samples? I can speak about a few dozen laboratories that I have known and seen. With this paraphernalia, how is the Government going to effectively perform the work of testing and screening? That remains a great problem.

I will give one example. As an administrator of the medical department, I was asked to have the potency of a so-called 'Tonic tablet'—*desi* one—manufactured by a big ayurvedic firm, tested. The tablets were sent to the CDRI, Lucknow, and after three months, the report came to the effect that "no report can be given about the organic component of the tablet". This is the report of the CDRI, which is the top-most and the best institution of its kind in the country. No laboratory in this country is so well equipped as the CDRI, Lucknow. It is entirely meant for Research, analysis, discovery—animal experiment and for testing drugs. Their report was "No report can be given about the organic component of the tablet." They said that about the inorganic component, "there were traces of iron and arsenic in the tablet". That was the report which was received from the CDRI. When this is the condition of testing by a world-renowned laboratory, where will the Government send the samples which they will collect from the various firms for examination and investigation? It is a very important problem. I am very serious about it. It is a very good thing, and it must be done, but who will do it?

I feel one thing. It is going to be like the prohibition policy in the country. I know people are allergic to this word "prohibition". But I am saying only a little and leaving a great deal more for the hon. Members to understand and find out. In this connection, I should like to make some suggestions, to make the scheme easy. Divide the main ayurvedic and siddha and tibb drugs into various classifications like (1) metal—precious, heavy and light, (2) herbs (3) *ras* and (4) miscellaneous. Then assign the work of testing them throughout the country in the national laboratories, the Central Drug Research Institute, Lucknow, the Indian Council of Medical Research, Delhi, the All India Institute of Medical Sciences, Delhi and various departments of pharmacology in the medical colleges of the country. Assign certain categories to each of these institutions. This is very important point, which I am making. I

[Shri Chandrabhan Singh]

request the hon. Minister to select these drugs and select them in respect of each of these departments and have them tested. It is a difficult problem. but it can be done well if the work is so divided, so that it may become possible to compile a scientific data and incorporate them in the so-called Indian pharmacopoeia, giving the details. If these drugs are found to be cheaper and more effective, they can be used by all the dispensaries, davakhanas and shafakhanas. . . . .

Members of Parliament are themselves using these things and I would like the hon. Minister to think about these things which are very important. What is our duty? It is a very important thing. We have got to devise measures and enactments which will be practicable and which will do good to the country and which will not be used as a sort of cloak for our deficiencies. It is a vast problem. I am all for its implementation, and I wish the hon. Minister all luck in this great task.

With these few words, I support the amendment to the Act which this Bill has brought forward, but those drugs for which there is no standard prescribed should be excluded. Otherwise, there will be great difficulties, and tremendous difficulties at that.

Here, I am reminded of the famous Japanese temple. In the Japanese temple, there are three monkeys; One of them with closed eyes and the caption "sees no evil" Another one with closed ears and the caption "hears no evil"; the third one with closed mouth and the caption "speak no evil". I find that we are more or less like that and the shepherd leading us no where when such Bills are brought in, we are all asked to support these Bills and say ditto. It is not a correct thing as far as I am concerned. I feel that there must be a proper schedule which brings in all the systems and then and then alone the Bill could be perfect, and hon. Members could put their seal on it. I request that the suggestions that I have made should be implemented, and then and then alone the ayurvedic and unani systems could be brought within the schedule. I thank you very much for the time you have given me to speak on this Bill.

Shri A. T. Sarma (Chatrapur): Mr. Deputy-Speaker, Sir, I am one of those who support the Bill, and I request the hon. Minister to see that so far as the ayurvedic system is concerned, a separate Bill is brought forward at an early date.

In this connection, I want to bring to the notice of the hon. House that first of all this Bill was originally introduced with three things in view; one, to have control over the ayurvedic medicines, secondly, to bring the adulterated medicines within the purview of the existing Act and thirdly, to enhance the punishment. So, far, as the control over ayurvedic medicines is concerned, there is no difference of opinion about it. All the Members agree that there should be control over the ayurvedic and unani medicines. How to control is very difficult, because there is a vast difference between the allopathic and the ayurvedic physician. All the doctors practising in allopathic medicine rely on the medicines prepared by the firms, but here the case is quite different. The ayurvedic and unani physicians prepare the medicines themselves and they never depend on the firms for their medicines.

Shri Chandrabhan Singh: And they all differ.

Shri A. T. Sarma: In case this Bill is enacted into law, all the physicians practising medicine would come under the purview of this Act, That means, they are the manufacturers of medicines. There is no question of ayurvedic or unani there.

Dr. D. S. Raju: They can prepare for their own patients.

Shri A. T. Sarma: I am coming to that point I am not leaving anything. This is the difference. The ayurvedic and unani practitioners prepare their medicines themselves. That is why they come under the purview of this Bill. In case the original Bill had been adopted, all the existing ayurvedic and unani practitioners might have gone to jail. There was no doubt about it. That is why the Members of the Select Committee....

Dr. D. S. Raju: The credit goes to them.

Shri A. T. Sarma: The Committee were not agreeable to the original Bill They unanimously were of the opinion that there should be a separate Act for controlling ayurvedic and unani medicines. In the Bill, it has been suggested in Chapter IVA that for the time being some measures should be taken for the purpose; a Board has been formed and some punishments have been suggested, and some sanitary conditions have been prescribed. Had this been satisfactory, I have nothing to say, but I am not satisfied with these temporary arrangements also. Because, first of all, the formation of the Technical Advisory Board is not genuine. It is called the Ayurvedic and Unani Technical Advisory Board. But, if we go to the depth of the composition of the Board, we see there is no proper representation of ayurvedists and unanists at all. The Board consists of 15 members out of whom nine are non-Ayurvedists. The Director General of Health Services, the Drugs Controller, India, the Adviser in indigenous systems of Medicines, Ministry of Health; the Director of the Central Drugs Laboratory—all these are *ex-officio* members. Then, one person holding the appointment of Government analyst under section 33 F to be nominated by the Central Government; one Pharmacognocist to be nominated by the Central Government; one Phyto-chemist to be nominated by the Central Government. All are nominated. There is no one elected in this board. The board itself is a nominated board. There is no representation for any prominent firms or associations. Then, there are two persons to be nominated by the Central Government from among members of the Central Council of Ayurvedic Research. It sounds well. They say this Council is Ayurvedic Research has been formed for the improvement of ayurveda. But the composition of this Research Council is also defective. It is not an ayurvedic council at all. It consists of 13 members, six of whom are neither doctors nor ayurvedists. Out of the remaining 7, only 3 are representing the so-called ayurvedists and the other three are MDs. In the name of ayurveda, huge amounts have been spent for reasons best known to them. From that Council, two members have been taken as members of this board. Whether doctors will be taken or non doctors will be taken, nobody knows. Government will nominate two of them. There are two prominent organisations called the All-India Ayurvedic Congress and the All-India Tibbia Congress. Not even a single man has been taken from those organisations. But in forming the Technical Advisory Board for allopathy, all representations have been made there. Here no representation has been made.

Then, there will be one teacher in Drayaguna and Bhaishajya Kalpana, to be nominated by the Central Government; one teacher in *Il mul-advia* and *taklis wa-dawasazi* to be nominated by the Central Government; two persons, one each to represent the Ayurvedic (including Siddha) and Unani drug industry, to be nominated by the Central Government. Here also a true ayurvedist may not be nominated at all, because the Government has full faith in the so-called ayurvedists, and have no faith at all in true ayurvedists. Then two persons—one so-called ayurvedic practitioner and one so-called unani practitioner will be nominated by the Central Government. So, I have no faith in this technical Advisory Board at all. It is called Ayurvedic and Unani Drugs Technical Advisory Board. But where is the technical advice, when there is no ayurvedist? It sounds well, but it is not expected to do any satisfactory work. That is why I oppose this.

Shri Bade: It may be called ayurvedic vanishing board.

Shri A. T. Sarma: You may call it by whatever name you like.

Then, there is a concession granted to the physicians. It says:

> "Provided that nothing in this section shall apply to Vaidyas and Hakims who manufacture such drugs for the use of their own patients."

Our Minister and Deputy Minister think that they have saved the Vaidyas, but it is only lip sympathy. Not even a single vaidya can be saved by this wording. A vaidya never prepares medicines for his own patients only. Sometimes he sells also medicine to others. In case he sells a medicine even worth four annas, he will be caught hold of and sent to jail. He cannot prove that it was for his own patient. So, there is no concession granted to them. If the inspectors are particular to book all the vaidyas, they can easily do so in spite of this proviso. All the vaidyas would be sent to jail and they have to undergo punnshment for 3 to 6 years.

The sub-committee instructed that a separate chapter should be there dealing with the ayurvedic and unani systems. But instead of bringing a separate chapter, they tried their best to apply the existing sections as far as possible. They were instructed not to apply any of the existing so rules so far as ayurvedic and unani systems are concerned. But in this Chapter IVA, sections 22 to 25 have been made applicable to ayurveda and unani also. These are the most dangerous sections. They talk about sanitary conditions. That sounds well, but so far as ayurvedic medicines are concerned, it is most harmful to them. First of all, the medicine must be prepared in an air-conditioned hall. None of the vaidyas have air-conditioned halls for manufacturing medicines.

Dr. D. S. Raju: We have not said that there must be an air-conditioned hall.

Shri A. T. Sarma: In the existing rules, that is one of the conditions. It is our intention that special rules must be framed for ayurvedists and unanists. If you are prepared to do that, I have nothing to say. That is my humble request. Please do something sincerely for the improvement of ayurveda and unani and I will be satisfied. In the name of sanitary condition, if you book all the vaidyas and send them to jail, that will be very harmful to them. We have this Act for improvement of our science and not for destroying it. That must be borne in mind.

In the case of import of medicines also, the existing sections have been made applicable to ayurvedic and unani medicines.

Shri Bade: The hon. Member himself is a vaidya; The Minister will not haul him up.

Shri A. T. Sarma: I would request the Deputy Minister to brnig a special Bill for controlling ayurvedic and unani medicines.

With these words I support the Bill.

श्री रामेश्वरानन्द (करनाल) :

सुमित्रिया न ओषधयः सन्तु
दुर्मित्रियास्तस्मै सन्तु
योऽस्मान्द्वेष्टि यंततयं द्विमः

उपाध्यक्ष, महोदय, इस विधेयक का मैं इस रूप में तो स्वागत करता हूं कि औषधियां देश के लोगों को विशुद्ध मिलनी चाहियें। मैं इसको अकंमण्यता ही कहूंगा कि इस विधेयक को देर में रखा गया है और इसको बहुत पहले रखा जाना चाहिये था। परन्तु सदेह इस बात का है कि आप किस प्रकार संदेश को विशुद्ध औषधियां खिला सकेंगे, किस तरह से आप नियंत्रण करेंगे और क्या नियंत्रण के द्वारा ही विशुद्धता आ सकेगी।

14.00 hrs.

आप का नियंत्रण दूध पर है। दूध विशुद्ध मिलना चाहिये। लेकिन उस में कहां

में पानी पड़ना शुरू हो जाता है । जब तक गाय भैंस के थन से निकल कर पीने वाले के गले के नीचे नहीं उतर जाता तब तक उस में पानी मिलाया जाता है । इसलिये केवल नियंत्रण द्वारा आप देश को विशुद्ध औषधि दिला सकेंगे, इस पर मेरा विश्वास नहीं है । आखिर आप को किन के द्वारा नियन्त्रण कराना है । इंस्पैक्टरों के द्वारा । आप जानते हैं कि आपके इंस्पैक्टर कितने ईमानदार हैं । जो व्यक्ति दूध बेचने वाले हैं सब उन से बंधे हैं । जिन लोगों ने माहवार कुछ बांध रखा है उसका गन्दे से गन्दा दूध भी पास हो जाता है, और जो नहीं देता है कुछ उस का विशुद्ध दूध भी फेल । यही स्थिति इस नियंत्रण की होगी । इसलिये मेरा निवेदन है कि अगर आप को देश को विशुद्ध वस्तुएं दिलानी हैं तो शिक्षा में परिवर्तन कीजिये । जब तक शिक्षा के द्वारा लोगों में ईमानदारी नहीं आयेगी तब तक हमारा काम नहीं चल सकेगा ।

आप ने बोर्ड बनाया है । इस बोर्ड पर तो मुझे बहुत ही संदेह है । जो बोर्ड आप ने बनाया है उस में के सारे के सारे व्यक्ति ऐसे हैं जिन का अलोपैथिक पर ही विश्वास है । जो इसी पद्धति के डाक्टर हैं । जो एक दो व्यक्ति आप ने दूसरे लिये हैं वे भी हैं जो उन से सम्बन्धित हैं और उन को सरकार ही नियुक्त करेगी । जब हमारे यहां प्रजातंत्र है और आप आयुर्वेदिक पद्धति के लिये बोर्ड बनाने जा रहे हैं तो आप इस बोर्ड को चुनाव पर छोड़ें और वैद्यों की राय इस के लिये ली जाये । वैद्य अपना बोर्ड बनायें और उन के प्रतिनिधि बोर्ड में होने चाहियें । इसका क्या प्रयोजन है कि आप अलोपैथिक पद्धति के लोगों का बोर्ड बनाये और उसको लागू करें वैद्यों पर । इस का मतलब तो यह है कि आप समझते हैं कि जो लोग अंग्रेजी पढ़े लिखे नहीं हैं उन को अक्ल है ही नहीं । आप के इस काम में मैं यह चीज देखता हूं कि आप वहां उन्हीं लोगों को ला कर घुसेड़ते हैं जो उस चीज़ को बिल्कुल समझते नहीं हैं। अगर कभी भगवान आप को बुद्धि दे और आप वैद्यों के उद्धार के लिये बोर्ड बनाने लगें तो शायद आप वहां भी ऐसे लोगों को ला कर खड़ा करेंगे जिन की आवाज इस मामले में साफ नहीं है । मैं आप से निवेदन करूंगा कि आप इस बोर्ड में केवल वैद्यों को रखें । वेदों में भी वैद्यों के लिये साफ लिखा है :

"चतुर्भिप्रकारैः विद्योपयुक्ता भवति, आगमकालेन, स्वाध्यायकालेन, व्यवहारकालेन प्रवचनकालेन च ।"

चार प्रकार से विद्या सफल होती है । एक तो गुरुजनों से उसे पढ़ना, फिर पढ़ने के पश्चात् एकान्त में बैठ कर अनुभव करना, उस का पुनः पुनः मनन करना और उसका अभ्यास करने के पश्चात् हाथ से कर के दिखा देना, अपने हाथ से सिद्ध करना, और सिद्ध करने के पश्चात् उस पर भाषण देना । मैं आप से पूछना चाहता हूं कि क्या आप इसके लिये कोई ध्यान दे रहे हैं । आप निश्चित समझें कि इस प्रकार के वैद्य आप को इस देश में अभी भी मिलेंगे । अब भी इस देश के अन्दर ऐसे वैद्य मिलेंगे जो अलोपैथिक दवाओं का कभी प्रयोग नहीं करते, और उनकी दवायें विशुद्ध दवायें होती हैं । उनके द्वारा पूरे देश को लाभ पहुंचता है ।

जब मैं देखता हूं वैद्यों के प्रति आप की अकारण अवहेलना को तो हृदय कांपता है । जो देशी वैद्य हैं उन की ओर आप की तरफ से ध्यान नहीं दिया जाता । अभी हाल में मैं ने एक प्रश्न किया था कि वैद्यों को डाक्टरों की अपेक्षा कम वेतन क्यों दिया जाता है । तो स्वास्थ्य मंत्री डा० सुशीला नायर ने कहा कि वे अपनी पढ़ाई पर बहुत पैसा खर्च करते हैं । जो अधिक पैसे खर्च करे क्या उस को इस आधार पर लूट मार का मौका मिलना चाहिये । यह कोई बात हुई । इसलिये मैं आप से कहना चाहता हूं कि वैद्यों और डाक्टरों का मुकाबला तभी हो सकेगा जब आप डाक्टरों के लि

[श्री रामेश्वरानन्द]

जितना पैसा खर्च करते हैं उस के बराबर पैसा आप वैद्यों के लिये भी खर्च करें और जो सुविधायें आप डाक्टरों को देते हैं वही सुविधायें आप वैद्यों को प्रदान करें। तब आप मिलान करके देख लें कि किन की औषधियों से लाभ होता है।

आप के नियंत्रण का एक और परिणाम होगा। आप की तरफ से जितने अस्पताल देहातों मे खुले हुए हैं—मैं कम से कम बतला रहा हूं, डर कर बतला रहा हूं कि ६०, ६० गांवों के बीच में एक अस्पताल है—उन को दवायें नहीं के बराबर मिलती हैं। लोगों को पानी मिला कर दवायें दी जाती हैं। डाक्टरों और नर्सों का वेतन दवाओं के दाम से चौगुना हो जाता है। वहां की दवाओं में पांचवां हिस्सा भी दवाओं का नहीं होता। इसका परिणाम यह होगा कि जो दवायें गांवों के लोगों को मिलती हैं इस नियंत्रण से उन बेचारों गांव वालों को दवायें नहीं मिलेंगी। पन्द्रह पन्द्रह कोस पर देहातों में एक अस्पताल होता है। आप भला बतलायें कि बीमार को पन्द्रह कोस कैसे ले जायेंगे। वहां सड़कें नहीं हैं, सवारियां नहीं हैं। जो गांवों में बैठे हुए वैद्य हैं, जिन्होंने परम्परागत वैद्यक पढ़ा है अगर उन का आधार न हो तो आप के डाक्टरों के पास तो केवल सुआ है। हर बात के लिए सुई लगा देते हैं। वैद्य लोग नाड़ी देख कर बतला सकेंगे कि आप को क्या रोग है और उस का कारण क्या है। किस लिये रोग हो गया। इसलिये आप के इस विधेयक का कहीं यह परिणाम न निकले कि जो पुराने वैद्य हैं उन को हानि पहुंच जाये और उन से जो लाभ आज देश की जनता को होता है कहीं उन ग्रामीण लोगों को आप उस लाभ से वंचित न कर बैठें।

आयुर्वेद में बड़ा स्पष्ट लिखा है कि जो वैद्य मिश्रित औषधि देता है वह यमराज का सहोदर है।

"यमराजस्य सहोदरः आयुंच वित्तं च हरति"

जो इस प्रकार के लोग हैं मैं आप से कहना चाहता हूं कि वे हमारा नाश करते हैं। जहां आप औषधि की विशुद्धता की बातें करते हैं वहां पर आप आयुर्वेद की दृष्टि से समय समय पर भाषण दिलाइये, अपने देश की जनता को ऋतुओं के अनुकूल भोजन के सम्बन्ध में उपदेश दिलाइये। आयुर्वेद का प्रसिद्ध सिद्धान्त यह है कि :

"मिथ्याहारविहाराभ्याम् रोगोत्पत्ति जीयते"

अनुचित खान पान के द्वारा रोग होता है। जो कुछ भोजन हम करते हैं पानी पीते हैं उन के सम्बन्ध में वेदों में लिखा हुआ है :

"अप्सु सर्वौषध यो इति,
मे सोमो अब्रवीत।"

अर्थात् जल में सारी औषधियां हैं। जहां आप औषधियों पर ध्यान दें वहां जनता के प्रति आप को अपना उत्तरदायित्व निभाना चाहिये। आप की तरफ से ऐसे उपदेशक होने चाहिये जो ऋतु के अनुकूल भोजन का उपदेश दें जनता को भोजन कैसा खाना चाहिये। चरित्र का उपदेश दें जनता को। इस तरफ आप का ध्यान नहीं है। आयुर्वेद में इस के लिये विशेष रूप से लिखा हुआ है मैं चाहता हूं कि आप इस तरफ आयें। लेकिन करें क्या। यह सरकार तो डालडा सरकार है।

श्री बड़े : १४ कैरट सरकार है।

श्री रामेश्वरानन्द : यह सरकार डालडा सरकार है इस लिये क्या आशा की जा सकती है। परन्तु मेरा अपना कर्तव्य है कि मैं आप को ध्यान दिलाऊं। आप इस तरफ ध्यान दें। अभी मेरे गुरुकुल में एक नौकर को खांसी थी। वह बहुत डाक्टरों के पीछे फिरता रहा। लगभग २५० बेचारे ने सुइयां लगवाने में दे दिये, फिर भी खांसी दूर नहीं हुई। वहां पर एक साधारण वैद्य हैं उन्होंने कहा कि इस के साथ सुई का क्या मतलब है। आप

हमारा च्यवनप्राश लीजिए । कोई व्यक्ति च्यवनप्राश और तरह से बनाता है, दूसरा व्यक्ति दूसरे तरह से बनाता है, लेकिन सभी उसको प्रमाणिक बतलाते हैं । लेकिन मैं कहना चाहता हूं कि च्यवनप्राश ऐसी औषधि है जिस में यदि पूरी औषधियां डाली जायें तो उस से पूरा लाभ होता है । लाभ हुए बिना नहीं रहता । वैद्यक में लिखा है कि बड़े साफ शब्दों में कि कौन औषधि किस ऋतु में किस को खाना है ।

श्री बड़े : मद्रास का च्यवनप्राश अलग है और महाराष्ट्र का च्यवनप्राश अगल है ।

श्री रामेश्वरानन्द : सारे के सारे अलग अलग हैं लेकिन सब अपने को प्रमाणित बतलाते हैं । इस लिये इस का विश्लेषण करना आप के लिये सरल नहीं होगा ।

मैं आप से कह रहा था कि औषधियां नियत समय पर खाई जांय । कुछ औषधियां ऐसी हैं जो पकने पर उखाड़ी जाती हैं कुछ औषधियां ऐसी हैं जो गदराते ही उखाड़ी जाती है । उन का नियम है कि यह औषधि कितने दिन तक चल सकेगी और इस का लाभ कितने दिन तक रह सकेगा । इस ढंग की औषधियों के सम्बन्ध में आयुर्वेद में विशेष रूप से लिखा हुआ है ।

आज बहुत से ऐसे कारखाने खुले हुए हैं तो चाहे जिस तरह कूट पीट कर दवा तैयार कर देते हैं । और बहुत से तो ऐसे हैं जो दुकान का कूड़ा कबाड़ एकत्र करके उसे दवा में मिला देते हैं, इसी लिये इन औषधियों से लाभ नहीं होता ।

मेरे देश के लिये तो आयुर्वेद बहुत ही महत्वपूर्ण है । मैं आप की सेवा में यह निवेदन करना चाहता हूं कि आप बताय कि अंग्रेजों के आने के पहले, जब कि यहांपर ऐलोपैथी का प्रयोग नहीं होता था, तो क्या इस देश के लोग औषधियां नहीं जानते थे या सदा बीमार रहा करते थे । दूसरे देशों की बनी हुई औषधिया मेरे देश के लिये उपयोगी नहीं हैं । जिस तरह से आप ने अंग्रेजों को निकाल दिया उसी तरह से उनके द्वारा जो कुछ इस देश पर लागू किया गया है उसका मोटासा विस्तर बांध कर उसको भी निकाल दीजिए । मेरे देश के लोगों के लिये वे ही औषधियां लाभदायक हो सकती हैं जो हमारे जलवायु और हमारे शरीर के अनुकूल हों और वे आयुवेदिक औषधियां ही हो सकती हैं ।

मैं एक बात और कहना चाहता हूं । औषधियों के निर्माण का एक विशेष प्रकार होता है, जिसको सब नहीं जानते । उसको कुछ वैद्य कुल परम्परा के कारण जानते हैं । अगर आपने इस प्रकार का नियंत्रण लगाया तो जो कुछ इस प्रकार की औषधियां उपलब्ध भी हैं वे हमारे हाथ से चली जायेगी । मैं पूछना चाहता हूं कि आयुर्वेद को जो थोड़ा बहुत प्रोत्सहन मिला है, उसमें सरकार ने क्या किया है । इसलिये मेरा निवेदन है कि आप आयुर्वेद को विशुद्ध रखें । मेरा तो कहना है कि उस के साथ आप यूनानी को भी न मिलाये, और ऐलोपैथी को तो कदापि न मिलाएं । इस तरह का समिश्रण करने से आयुर्वेद आगे नहीं आ सकेगा और लोग तरह तरह की दवा बना कर देते रहेंगे । इसलिये मेरा निवेदन है कि अगर आपको इन औषधियों में विशुद्धता लानी है तो आपको योग्य वैद्यों को आगे लाना चाहिये । आप इस काम की देख रेख के लिये ऐलोपैथिक डाक्टरों को कदापि न लाये क्योंकि उन्होंने इस बारे में कुछ पढ़ा नहीं है ।

औषधियां किस प्रकार बनानी चाहियें इस का वर्णन आयुर्वेद में काफी किया गया है, पर मैं उसको यहां इस समय नहीं बतला सकता । आप जो यह विधेयक लाये हैं यह बहुत अच्छा है, लेकिन अगर आपको इन औषधियों में शुद्धता लानी है तो यह काम तभी हो सकेगा जब आप आयुर्वेद के वैद्यों को आगे लावेंगे और इस काम को उनकी जिम्मेदारी पर छोड़ देंगे ।

श्री सिंहासन सिंह (गोरखपुर) : उपाध्यक्ष महोदय, मैं ने इस विधेयक को देखा। सन् १९४० से तीन बार इस का संशोधन हो चुका है। अब सन् १९६४ में यह संशोधन हो रहा है। इस बीच में जो पुराने एक्ट संशोधित हुए उन में भी यह सजा और जुरमाने की दफाएं बढ़ाई गई थीं। लेकिन यह नहीं बताया गया कि उन कानूनों के अधीन कितने मुकदमे चले, वह कानून किस हद तक नाकामयाब हुए। यह सदन यह जानना चाहता है। हर सत्र में एक नया संशोधन आता है। पर इन संशोधनों के कुछ कारण होने चाहिये और यह बताया जाना चाहिये कि उन के प्रयोग में क्या दिक्कतें हुईं। हम विधेयक पास कर देते हैं लेकिन उसका परिणाम क्या हुआ यह हम को पता नहीं चलता।

जहां तक मैंने देखा है, सजा की मिकदार बढ़ाई गई है, पर उस के साथ एक धारा ऐसी भी लगा दी गई है कि अगर अदालत चाहे तो उसे कम भी कर दे। तो जहां बढ़ाने की सूरत है वहां कम करने की भी सूरत रख दी गई है। ऐसा होने से मेरे खयाल में काम बनने के बजाय बिगड़ता ही है।

एक माननीय सदस्य : वकीलों को सुविधा है।

श्री सिंहासन सिंह : वकीलों को तो सुविधा हर हालत में होगी। आप चाहे कुछ रखें वे छुड़ा लाएंगे। लेकिन मुझे खेद है कि आपने यह अधिकार अदालत को दे दिया है कि मिनिमम सजा को भी कम कर सकती है।

जो इंडियन पीनल कोड है, वह सन् १८८८ का बना हुआ है। उसके अन्दर बहुत कम संशोधन हुए हैं। उसके अन्दर लोग छूट भी जाते हैं। पर उसमें छूटने की कोई गुंजाइश नहीं रखी गई है। किसी मुलजिम का छूटना न छूटना प्रासीक्यूशन की कुशलता पर आधारित होता है। अगर कुसूर साबित हो जाता है तो अदालत नहीं छोड़ेगी। लेकिन इस विधेयक में तो हर जगह यह पुछल्ला लगा दिया गया है कि अगर तुम यह साबित कर दो तो छूट जाओगे। अव्वल तो इस कानून में मुकदमा ही कम चलता है और अगर चलता भी है तो आपने छूटने का उपाय साथ साथ रख दिया है। अगर किसी पर केस साबित हो जाता है, तो वह यह कह सकता है कि मैं तो कलकत्ते में बैठा था, मेरे मैनेजर ने ऐसा कर दिया होगा। तो वह सेठ जी तो छूट जाते हैं और जो दवा खा लेता है वह मर जाता है। तो आप ने इस प्रकार इस कानून में छूटने के लिए खुद ही लूपहोल रख दिए हैं।

दूसरी चीज मुझे बहुत खेद के साथ यह कहनी पड़ती है लोगों को शुद्ध भोजन नहीं मिल पाता। इसी स्वास्थ्य मंत्रालय के जिम्मे यह कार्य है कि वह जनता को शुद्ध भोजन देने की व्यवस्था करे। इसके लिए इस मंत्रालय ने कई कानून भी बनाए हैं और उन में सख्त सजाएं भी रखी हैं, लेकिन क्या आज बाजार में कोई शुद्ध भोजन मिलता है? दुःख के साथ कहना पड़ता है कि इस देश में शब्द "शुद्ध" के अलावा और कोई चीज शुद्ध नहीं रह गयी है। यही गनीमत है कि इस शब्द में मिलावट नहीं हुई है।

आपने इंस्पेक्टर रखने की व्यवस्था की है। वह क्या काम करेगा, कैसे इसकी रोक थाम करेगा, इसके लिए रूल बनाए जाएंगे। यह पता नहीं कि उन को क्या अधिकार होंगे। जैसाकि मेरे पूर्व वक्ता डाक्टर साहब ने कहा, यह भी नहीं बतलाया गया कि कौन एनेलिस्ट होगा। अभी नाप जोख के बारे में कुछ निश्चित नहीं है। पता नहीं जो इंस्पेक्टर रखे जाएंगे वे क्या काम करेंगे और किस प्रकार वह अपने

अधिकारों का उपयोग करेंगे । आज दुःख के साथ कहना पड़ता है कि हर विभाग में अनेक इंस्पेक्टर हो गए हैं पर काम में सुधार नहीं होता । बचपन में हम एकाध इंस्पेक्टर देखते थे, पर आज तो हर विभाग के अनेकों इंस्पेक्टर हैं । हम देखते हैं कि इंस्पेक्टर का तो महल खड़ा हो जाता है पर जनता का दुःख दर्द दूर नहीं होता । यह विचार कर के मैं तो कहता हूं कि अगर सरकार इस कानून को पास करने के बाद अपना उद्देश्य प्राप्त कर सके तो मैं उस को साधुवाद दूंगा । लेकिन मुझे इस के कामयाब होने में बहुत शक है ।

इस में यह व्यवस्था सरकार ने अच्छी रखी है कि जो नियम अन्य लोगों पर लागू होंगे वे ही नियम सरकारी कारखानों में बनने वाली दवाओं पर भी लागू होंग । पहले यह नियम नहीं था । हमने देखा कि जो पेनिसिलिन बनी थी वह ठीक नहीं थी, बहुत से आदमियों को उससे नुकसान हो गया । लेकिन उस समय सरकारी कारखानों पर यह व्यवस्था लागू नहीं थी अब सजा की व्यवस्था उन के लिए भी है । पर इसमें भी छूट है । पर इस में भी सजा करने में बड़ी कठिनाई होगी । अगर दवा प्रस्क्रिप्शन क अनुसार नहीं बनी है तो इस की रिपोर्ट कौन करेगा ? जो दवा खाएगा उसको तो नुकसान हो जागया । जो बेचने वाला डाक्टर है वह कह देगा कि मैंने तो फलां कम्पनी से दवा ठीक समझ कर ली है, इस की जिम्मेवारी बनाने वाले पर है । डाक्टर नहीं कह सकता कि वह दवा गलत है या सही है । उस पर जो लेबिल लगा है उसके अनुसार वह बचता है । डाक्टर तो कह देगा कि मैंने फलां कम्पनी से दवा ली है । उस कम्पनी का मैनेजर कह देगा कि कारकुनों ने कोई गड़बड़ी कर दी होगी । उसको सजा नहीं हो सकती । तो इस तरह से इस में चारों तरफ से छूट की व्यवस्था की गई है, सजा किस को होगी ।

एक माननीय सदस्य : दवा खाने वाले को ।

श्री सिंहासन सिंह : उस की सजा तो मौत की हो जायगी ।

दूसरी बात बोर्ड की नियुक्ति के बारे में है । मुझे इस बोर्डके बारे में आपत्ति है । मैं चागला साहब को साधुवाद देता हूं कि उन्होंने आते ही शिक्षा विभाग की कुछ कमेटियों को कम किया । इस से शायद शिक्षा की प्रगति में कमी होगी ऐसी बात नहीं है बल्कि शायद इस से प्रगति कुछ बढ़ ही जाय ।

यहां दो तरह के बोर्ड बन रहे हैं । एक एलोपैथिक बोर्ड है और एक आयुर्वेदिक और यूनानी बोर्ड है । जैसाकि अभी कहा गया एलोपैथी बोर्ड में कोई हकीम या वैद्य नहीं है लेकिन इस के विपरीत हमारे आयुर्वेदिक बोर्ड में कुल ऊपर से ले कर नीचे तक डाक्टर्स हैं । यह कौन सा मेल है ? अगर आयुर्वेदिक बोर्ड में आप डाक्टर्स को रखते हैं तो उसी तरीके से एलोपैथिक बोर्ड में आयुर्वेदिक वालों को शामिल कीजिये । आयुर्वेदिक बोर्ड में एलोपैथिक डाक्टर्स को आपने रखा है, हालांकि उन्होंने आयुर्वेद की पुस्तकें नहीं पढ़ी हैं ताहम उस आयुर्वेदिक बोर्ड को कंसटीच्यूट करेंगे और वह बोर्ड हमारी सरकार को यह राय देगा कि यह आयुर्वेदिक दवा सही है अथवा नहीं और यह दवा ठीक बनी है या नहीं बनी है । आखिर वह यह एडवाइस किस आधार पर देगा । इस बिल को देखने से कुछ मालूम नहीं होता है सिवाय इस के जैसाकि एक आधार बन गया है कि जो हमारे आई० ए० एस० वाले या आई० सी० एस० के लोग हैं वह हर काम के लिए योग्य हैं, वह एडमिनिस्ट्रेशन के लिये योग्य हैं, वह तिजारत के लिए योग्य हैं, वह खनिज पदार्थों के बारे में योग्य हैं और हर एक बात के लिए योग्य हैं वैसी ही एक राय इस सरकार ने इन

[श्री सिंहासन सिंह]

एलोपैथिक डाक्टरों के वास्ते क़ायम कर ली मालूम पड़ती है कि यह अंग्रेजी डाक्टर्स आयुर्वेद के लिए भी योग्य हैं, यूनानी के लिए योग्य हैं और एलोपैथी के लिए तो योग्य हैं ही ।

बोर्ड जहां गवर्नमेंट को राय देगा वहां उस के साथ ही एक और संस्था भी हम ने क़ायम की हुई है जिस का कि नाम ड्रग्स कंसलटेटिव कमेटी है और वह भी हमें इन मामलों के बारे में राय देगी । अब यह दो-दो संस्थाएं आपने राय देने के लिए तो क़ायम कर ली हैं लेकिन क्या ख़ाली राय देने से आपका काम ठीक तरह चल पायेगा ? राय देने वाले तो दो हो गये लेकिन काम करने वाला कौन होगा ? काम करने वाली गवर्नमेंट है । उस को करने वाला कौन है ? मेडिकल हैल्थ इंस्टीच्यूट का डाइरैक्टर वह गवर्नमेंट का सलाहकार है, वह इस काम को चलाता है । वह एक्जीक्यूटिव आफिसर है । वह बोर्ड में राय देगा और गवर्नमेंट के सम्बन्धित अधिकारियों को हुक्म देगा । जब इस तरह की व्यवस्था मौजूद है तो फिर यह बोर्डों का सिलसिला ख़त्म किया जाय और बोर्ड की क्या आवश्यकता है ? मैं आप से कहूंगा कि आप इन बोर्डों को ख़त्म क । सलाहकार कमेटी रक्खें वह कहीं अच्छी है । बड़े-बड़े बोर्ड बनाना, साल में मुश्किल से यह एजुकेशन बोर्ड जोकि आल इंडिया बोर्ड है यह साल में मुश्किल से दो, चार बार मिलता है, साल में मुश्किल से एक बार ही मिलता है तो आप का ही बोर्ड साल में कै बार मिल सकेगा और क्या काम करेगा ? होना यह है कि दूर, दूर से लोग इस में आयेंगे, आकर लोग बैठ जायेंगे और चाय आदि पी कर उठ जायेंगे । इसको आप इतना कम्बरसम मत बनाइये । आप जो ऐक्ट बनाते हैं उस पर अमल कराने और उस की वर्किंग को देखने के लिए सही तरीक़ा निकालिये ताकि वह ठीक तरीक़े से चल सके । जितना ही आप बोर्ड आदि का प्रचलन करते जाइयेगा और नये नये क़ानून बनाते जाइयेगा उतना ही उसका दुरुपयोग होगा, गड़बड़ी बढ़ती जायेगी और दवा शुद्ध नहीं मिलेगी अलबत्ता खर्चा जरूर बढ़ जायेगा । प्रेसक्राइब्ड मेडिसन जोकि आज मिलती है वह भी महंगी हो जायगी ।

वैद्यों के बारे म मुझे यह कपना ह कि जो वैद्य अपने पेशेंट को दवाई देगा उसके लिए तो कोई बात नहीं है लेकिन हर वैद्य देहात का जोकि दवा बेचता है, उसको बना लेता है अगर कहीं उसने अपने मरीज को दवाई नहीं दीं और यदि किसी दूसरे के हाथ में बेच दी तो वह पकड़ लिया जायेगा ? अब वह गांव का वैद्य बेचारा हर एक पेशेंट के लिए रजिस्टर कहां तक रक्खेगा ? मेरे ख्याल में वैद्यों के साथ में यह ज्यादती होगी । चूंकि घंटी आप की दो मर्तबा बज चुकी है और फिर बज रही है इसलिए मैं और अधिक न कहते हुए अपनी बात को यहीं पर समाप्त करता हूं और चाहता हूं कि गवर्नमेंट इन तमाम बातों पर विचार करे । यह विधेयक ऐसा है जोकि अभी और भी संशोधन चाहता है ।

Shri Balakrishnan (Koilpatti): Mr. Deputy-Speaker, Sir, I rise to support the Bill to amend the Drugs and Cosmetics Act and would like to say a few words while supporting the Bill.

Indian medicine—Ayurvedic, Unani and Sidha—have got a great tradition because these medicines were discovered by our great sages, like Dhanwantri, Bogar and Pulippani. But, unfortunately, after the British regime came into existence the popularity of Indian medicine was dis-

couraged and our people were made to believe that allopathic medicines only were miraculous. Now it has become the habit of the people to go in for that. Even for the slightest headache people are going in for that. For anything, whether it is headache, stomach pain or anything else, people are accustomed to having it. If at all the people are going in for injections, it is not because that Indian medicines are not good; Indian medicines are the best medicines, but our Government is not encouraging Indian medicines. They are giving encouragement to allopathy and they are not giving encouragement to Indian medicines. Also, Government is not taking keen interest to control the manufacture of Indian medicines. Everybody has become a *vaidya*.

Tamilnad is very famous for the Sidha system and I come from a place which is very famous for the Sidha system, that is, Palani. You know, Sir, in newspapers advertisements come from Palani. There are a large number of Sidha *vaidyas* who are doing business. Of course, there are some good Sidha *vaidyas* whose medicines are the best and are miraculous, but many people are practising Sidha system of medicine on a commercial basis.

I want to cite a few pathetic instances here which took place in my village. Some years back a young man approached a native doctor. That doctor gave him some pills. That poor young fellow took that medicine and as soon as he took that medicine he had a lot of motions. He became unconscious and finally he died.

I want to refer to another instance. A *harijan* lady had some eye disease; so, she approached a native doctor. That native doctor put some medicine in her eye and put a bandage. The bandage was not removed for three days. After three days not only was the bandage removed but her eyesight was also removed. The poor lady became blind.

I saw a news only two days ago in a famous Tamil daily newspaper in our Parliament Library it was said that a poor young fellow, Mohan, by name, went to a native doctor complaining of stomach pain. The doctor gave some pills and soon after he took the pills that young fellow vomited like anything. He became unconscious. Fortunately, he was taken immediately to the General Hospital.

These are things which happen because there is not proper control on Indian medicine, but I can say that if it is properly controlled and if it is put to the laboratory test, our Indian medicines are second to none in the world. But there is not proper control. So, I am glad that according to this Bill Government is going to test them in the laboratory.

Regarding the Board, the President of the All-India Ayurvedic Association, hon. Member, Shri Sarma, said that there are mainly three categories of medicines, namely, Ayurvedic, Unani and Sidha but only two representatives are there. A Sidha drug manufacturer does not know anything about Ayurveda; similarly, the Ayurvedic medicine manufacturer does not know anything about Sidha. So, I request that for every category of medicine representation should be given. Unless you give representation for each category separately, it is no use giving them representation. So, it is my request that at least one representative of the Sidha system, another of Unani and a third of Ayurvedic system should be there.

Regarding the appointment of inspectors, I am glad, that a technical man is going to be appointed. But too much power should not be given to that inspector to harass unnecessarily the innocent people. Also, unless the medicines are tested by laboratories, licences should not be granted for manufacturing a particular medicine.

Regarding advertisements, I have not seen any provision about adver-

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tisements in the Bill. There are many bogus advertisements. Sometimes we see advertisements saying that a man has come down from the roof of the Himalayas with the blessings of gods and goddesses to remove human sufferings. Such advertisements which are coming should be checked. Otherwise poor people can be cheated.

Regarding homoeopathy—I am also a student of homoeopathy—unfortunately homoeopathy has not been brought under the purview of this Bill. At least a separate amendment with regard to homoeopathy should be brought to the Drugs Act. Because, homoeopathy is a poor man's medicine. It is cheap, in fact the cheapest. But even in homoeopathy bogus medicines are coming. I know of instances where people who do not know even the rudiments of homoeopathy also practise it. So I request that homoeopathy may also be brought under the purview of this measure.

I am glad to know that in Madras the Health Minister of Madras proposes to start a homoeopathic college in the near future. I would like to suggest that some homoeopathic colleges under the Central Government should also be started.

Rich people go for treatment even to Switzerland and other foreign countries. As regards the poor people, homoeopathy would be more useful to them. There are so many health centres in which doctors are not posted even for one or two years. Homoeopathy will be helpful in such places. I therefore submit that homoeopathy should also be brought under the purview of this Bill.

Shri Sonavane: I rise to support this amending Bill and I congratulate the Joint Committee on having made some good amendments and making the provisions of this Bill more strict and beneficial to the general public. But in my opinion the Committee should have considered the feasibility of including, homoeopathy so that, as my friend Shri Balakrishnan was saying just now, homoeopathic medicines might also be covered by this amending Bill.

As is well known, these three or four systems of medicine, namely, allopathy, ayurveda, unani and homoeopathy, are practised in the country very widely. Recently, for the last one or two years I have been myself a beneficiary of the good effects of these homoeopathic medicines, and I thought the Joint Committee should have taken good care to include this, one of the systems of medicine which is common in the country. Many people are taking advantage of it. Homoeopathic doctors are also practising here, and there are stockists of these medicines. Therefore it should have been thought proper by the Government at the initial stage itself to have included this system of medicine in the amending Bill. The Government did not do it.

But the Joint Committee should have considered this system of medicine, because many defects and malpractices prevail in the sale, manufacture, and even prescribing and dispensing of these medicines also. These medicines are so cheap, and a doctor charges hardly about twelve annas for a prescription. The curative effects of these medicines are very good, they are very effective. So I thought that the Joint Committee would have taken good care to include this also within the scope of this amending Bill. But as they have not done so, I felt that the Joint Committee has erred and has overlooked this system of medicine, that is the homoeopathic system of medicine.

Now, Sir, speaking generally of these medicines and prevention of adulteration and all these things, the machinery that has been provided in

the Bill is that of inspectors. As you know, inspectors are there to inspect, check and bring to book the defaulters or wrong-doers. But there are inspectors and inspectors. And whatever good law or whatever good measure is passed, it fails on the rock of implementation. Therefore I feel that to check all these evils, the heavier punishments like increasing it from five years to ten years or from two years to five years, would all be futile if these inspectors, human nature being what it is, do not carry on their duties properly and honestly, keeping in view the interests of the society as a whole. Then all those provisions which make the law stricter or prescribe heavier punishments become a nullity. And then, after having picked up a case by an honest inspector, and taken it to the court, there also a clever lawyer has all those extenuating circumstances placed before the magistrate trying the case....

श्री ओंकार लाल बेरवा (कोटा) : उपाध्यक्ष महोदय, हाउस में क्वोरम नहीं है।

Mr. Deputy-Speaker: The bell is being rung—Now there is quorum. The hon. Member may continue.

Shri Sonavane: Sir, I was referring to the appointment of inspectors and their discharging of their duties honestly. The appointment of such inspectors, even with the requisite qualifications as to the knowledge of the subject is good, but at the same time it depends on the temperament of the inspector that he should see to the interests of the society and should carry out his duties honestly. Of course, that type of measurement cannot be had, but this fact should be taken into consideration when these appointments are to be made. This factor is very very important, because it is only when the inspector does his duty with the best of his ability and in an honest manner that the good provisions of this Bill would be carried out.

Then, my friend over there was saying that one of the provisions included in the proposed new section 27 does tie down the magistrate or judge trying a case or awarding a punishment, because the provision says "shall not be less than one year". It has been said that the hands of the judiciary are bound and that no discretion has been left to the magistrate. I am sorry to say that the Member has not realised that so many cases have gone with paltry sentences and that the cost of appointing inspectors, taking the cases to the courts and doing investigation and analysis in the laboratories, all those things, go to waste. The society is held at ransom by such unsocial elements. If the courts give a paltry penalty, then I think the whole object is lost. Therefore, I am happy that the Joint Select Committee has fixed this minimum sentence and I think the Committee should have done so in all such cases as we know that the good medicines and the pure medicines are rarely to be found. I congratulate the Joint Select Committee and request the Minister that in future the one important system of medicine, that is, homoeopathy which has not been included would also be brought under control.

Dr. D. S. Raju: Mr. Deputy-Speaker, Sir, I would like to thank all the hon. Members who have participated in this discussion and contributed in such a large measure. Although they have expressed some doubts on certain provisions generally, I gather that they have given their support to the passing of this Bill. So, I think, the credit goes to the Joint Select Committee Members who have done such a good job and such a thorough job of the work.

Now, I would like to make a few observations on the comments made by some of the hon. Members. Shri D. C. Sharma has raised a good point. He said that the Government should also take up Ayurvedic industry in the public sector as a pilot project. Of course, we are doing it. Under the modern system of medicine, there are

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a few projects coming up very rapidly in some of these areas with Russian collaboration and independently also we are trying to develop some of the drugs in the public sector. So, that is a point worth considering, the point raised by Shri D. C. Sharma that the Government should take up a pilot project for the development of Ayurvedic drugs.

There are certain provisions in the Bill. In section 15, protection has been given to some of these people, traders and dealers, who are honest and who can prove that they got their goods from licensed manufacturers and that they stored the goods under proper conditions when they bought them. So, if they can prove to the satisfaction of the inspector these conditions, they are exempted. That means to say that the idea is not to inflict punishment upon innocent and honest dealers. The whole problem rests upon the drug inspectors. That is a very important aspect of the implementation of this Act. We know the difficulties, the shortcomings, in the implementation of this Act. We are now trying to improve the conditions of the drug inspectors. There are at present 150 drug inspectors in the country as against 122 last year. We are trying to improve their quality and efficiency. We are also giving them some training in the field of inspection. Last year, in Baroda, about 25 inspectors were given special training and we are also urging upon the State Governments to improve their scales of pay and their emoluments so that their efficiency also might be improved. Some of the States Governments have conceded to our request and they are improving the conditions of these drug inspectors.

One or two Members raised the question of laboratory facilities. It is true that the laboratory facilities are also not adequate. We have two national laboratories, one at Calcutta and the other at Lucknow. They are very big national laboratories and there are also 11 State laboratories where they are doing adequate work. But even then this number is not adequate. Recently, the States of Madras, Mysore and West Bengal are also currently building up their own analytical laboratories. Whenever a State requires our assistance, the facilities of the two national institutes are at their disposal. Some of the hon. Members have said that it is very difficult to analyse Ayurvedic drugs. It is not so bad. Some of the Ayurvedic drugs which contain some of these preparations, like, mercury, arsenic, copper and musk could be very easily analysed in the modern analytical laboratories. So, we are not so bad in respect of analysis. But we would like to improve the facilities for analysis in the laboratories.

A few Members have commented upon the utility of the Drugs Technical Advisory Board particularly with reference to Ayurvedic section. I would like to mention that this Board as constituted is the best we could do under the circumstances. It contains some of the experts on research and some representatives from the Ayurvedic trade and industry and also from the profession. But by experience if any changes are necessary, they might be effected later. But under the circumstances that is the best Board which we could constitute. It is supposed to be a technical advisory board in all such matters connected with the Ayurvedic drugs.

One or two Members have said about the restrictions imposed upon the judiciary. Perhaps, the hon. Member does not know that the Parliament is sovereign. In fact, the minimum punishment has already been provided under certain Acts, as the Railways Act and the Petroleum and Pipelines Act, etc. The minimum punishments have already been prescribed. Apart from this, they can reduce the punishment. The courts can reduce the punishment and reduce it to even one day if they want to but they are only requested to give reasons in writing.

One hon. Member said about homoeopathy. We are proposing to bring forward a separate Bill to cover this system also. A notification has already been issued in March last.

Sir, whatever has been done has been done with a very careful consideration and understanding and sympathy. Of course, the primary concern is the health of the people.

While that is the primary consideration, of course, we have got to take care of the industry also. If the industry is strangled or destroyed, then also people will suffer. Then, the profession has also to be taken care of. All these measures have been taken with this object namely that all these agencies should be supported, because the one depends upon the other, and they are all integrated. If the drugs are adulterated, it is not only the patients who suffer but the profession itself suffers, because the profession gets a bad name and people begin to condemn the system. If the doctors are bad, if the diagnosis is bad, if the medicines are bad, the whole system gets a bad name. We hope that these measures which we have proposed will definitely enhance the status of Ayurveda, the Ayurvedic industry and the Ayurvedic profession. There is no doubt about it. We are absolutely certain about it.

I am at one with the hon. Member who has suggested that Ayurveda is a great science. We agree. There is no dispute about it. It was there some thousands of years ago. But, unfortunately, just as we went down politically and otherwise the system also went under debris. It is our sacred duty now to renovate it and to remove that debris and bring it up to the level of our expectations.

Of course, the modern system of medicine has got the advantage of being practised all over the world. If there is any research, if there is any new drug or new method or new line of approach, it is broadcast all over the world. In a few days' time, its value is assessed in thousands of laboratories and thousands of hospitals all over the country. So, the modern system has got that advantage. We could not help it. So, if we accept Ayurveda to compete with the modern system, it will be a very difficult thing. That will take some time. But there is no doubt that there is some inherent worth and some inherent truth in Ayurveda. Otherwise, it would not have survived for all these thousands of years.

Shri Mohsin: What about the Unani system?

Dr. D. S. Raju: Whatever I have said about Ayurveda applies to the Unani system also. Unless there is some inherent worth and some inherent truth in a system it will die out automatically. So, the very fact of its survival is proof that there is inherent good in the Ayurvedic and Unani systems.

As regards the punishment, there has been a general demand all over the country and in both Houses of Parliament that the punishment should be enhanced. While I have brought forward this Bill, I hope hon. Members do not get the impression that everything is very bad in this country.

Shri Bade: The minimum punishment has been prescribed. That means that the magistrate's hands are tied down.

Shri Sonavane: The hon. Minister has already replied to that point.

Dr. D. S. Raju: There are about 1750 licensed manufacturing concerns in the modern system of medicine and about 250 to 300 ayurvedic and Unani manufacturing concerns. Not all of them are bad. Many of them are very good, very nice and very up-to-date. They are improving. But one bad medicine is like one drop of poison in a pot of milk which spoils the whole pot of milk. Similarly, one or two bad agencies here and there will bring a

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bad name to the whole system. Out of these 1750 licensed manufacturers, about 500 are concerns which have got loan licences and which are operating the firms on a loan basis. The rest are all licensed and most of them are very nice and are technically very sound and efficient. But we made a recent survey lately in a few districts, taking one district from each State, and we found that there were spurious drugs manufactured by about 30 unlicensed concerns. It is very difficult to trace these unlicensed manufacturers because they do not exist; they get the labels of some other well known firm and stick them on their own medicines. That is our difficulty. However long it may take and however difficult it may be, we must root out this evil. Otherwise, we cannot safeguard the health of the people.

I hope that these provisions which I have brought forward in this amending Bill will go a long way in coming to our rescue and in satisfying the requirements which we have today.

With these words, I move.

Shri Mohsin: Many a time when instances of adulteration in drugs were raised in this House, the hon. Minister of Health had said that the Centre had no control over the drug controllers and inspectors. So do the Central Government contemplate to bring the drug controllers and drug inspectors under the control of the Central Government so that this Act can be implemented effectively? Otherwise, again, they would only be expressing their inability that the adulteration cannot be stopped, as they have no direct control.

Dr. D. S. Raju: Actually, the Act has got to be implemented by the State Governments, at the moment. But we have also authority to employ some of our own inspectors from the Central agency. They can simultaneously go and inspect in the States, along with the agencies in the States.

Shrimati Renuka Barkataki (Barpeta): May I know when Government are proposing to bring forward a Bill for homoeopathy?

Dr. D. S. Raju: Very shortly; we shall try to bring it forward as early as possible.

Shrimati Renuka Barkataki: During the special session this month?

Dr. D. S. Raju: I cannot indicate the time, but we would like to bring it forward as early as possible.

With these words, I move.

Mr. Deputy-Speaker: The question is:

"That the Bill further to amend the Drugs and Consmetics Act, 1940, as passed by Rajya Sabha, be taken into consideration."

The motion was adopted.

Mr. Deputy-Speaker: We shall now take up the clauses. There are no amendments to the clauses.

The question is:

"That clauses 2 to 32 stand part of the Bill".

The motion was adopted.

Clauses 2 to 32 were added to the Bill.

Clause 1, the Enacting Formula and the Title were added to the Bill.

Dr. D. S. Raju: I beg to move:

"That the Bill be passed".

Mr. Deputy-Speaker: The question is:

"That the Bill be passed".

The motion was adopted.