

before this increase was detected. With all these facilities, there was an increase in 1987, by about 1,000 cases. But in 1986, Government have agreed, and the ICMR has even written to the local Government and the Medical College, Alleppey that there, they have decided to set up a filaria research unit in the T.D. Medical College, Alleppey. Even after that, when the cases have increased, Government have now gone back on their original decision. Government now says that they do not intend to set these up. I would like to know what is the reason for Government going back on their original decision, when the disease is spreading on a large scale, and there is an alarming situation.

SHRI MOTI LAL VORA: The Government is not going back, on what Government had said earlier. The hon. Member will be happy to know this. In addition to the Vector Control Project, ICMR is setting up a new chemotherapy centre to study this Ivermectin at the Alleppey medical college. Along with this, filariasis studies will be continued. So, what we have said in the past, we are going to fulfil.

I hope the hon. Member will be happy.

SHRI THAMPAN THOMAS : There are certain diseases, which were said to have been eradicated completely. One among them is this. There was a scheme by the Government to eradicate malaria, filaria and small pox. Now all these things are coming back, especially at this place which my friend mentioned, viz. Shertallai. That is a place where elephantiasis and filaria are there very much.

These diseases are communicated by mosquitoes. I would like to know whether you have done any investigation into it and all that. The mosquitoes are now very much on the increase. What is the method by which something is done not only in Alleppey and Kerala but even in Delhi? In the NDMC area, mosquitoes are there in great numbers and they are continuing to cause malaria. What is the scheme or what is the proposal

of the government to see that it is effectively contained ? Has the government got any scheme for that? Has anything been done on those lines?

SHRI MOTI LAL VORA: We are supplying to the State Governments all these drugs and the Larvicide also. If the hon. member wants to know about it, I can tell him that from 1985-88, we have made supplies to all the States whatever they needed to eradicate or to control elephantiasis. So, from our side, we are making all possible arrangement to eradicate and control this elephantiasis, Kala azar and other diseases also.

SHRI THAMPAN THOMAS: They are coming back.

SHRI SOMNATH RATH: Though the Question pertains to Kerala, I may point out that the situation in Orissa is equally alarming. What steps have been taken or are you going to take to eradicate this disease or to control this disease in Orissa?

SHRI MOTI LAL VORA: The Government is giving medical aid and drugs to other States. In the same way, for Orissa, we are supplying them to the State Government; and as and when the State Government requires anything from the Government of India, we will come to their help definitely.

Specialised Treatment Facilities in North Eastern States

*5. **SHRI N. TOMBI SINGH:** Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that the people of the North-Eastern States have to incur huge expenses for getting specialised treatment available to them only in metropolitan and other developed cities;

(b) whether Government are considering to expand medical facilities in the backward areas of the North-East in terms of number of beds and sophisticated equipments etc.; and

(c) if so, the hospitals and medical centres identified in this connection?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI MOTILAL VORA): (a) Yes, Sir.

(b) A Task Force appointed by the Government of India to recommend the upgradation of medical facilities in North Eastern States has recently submitted its report. The report of the Task Force has been forwarded to the Planning Commission for their consideration. The Planning Commission have intimated that the recommendations of the Task Force are technically sound and these will be kept in view while formulating Annual Plan in 1989-90 and the 8th Five Year Plan of Health sector programmes of North Eastern States depending upon the priorities of the problems and availability of resources. As a first step, the Planning commission have agreed to provide an additional sum of Rs. 4.25 crores during the year 1988-89 for strengthening the diagnostic and treatment facilities in Assam.

(c) The recommendations made by the Task Force for expansion of medical facilities in identified medical colleges and hospitals are given in the statement below:

STATEMENT

The Task Force appointed by the Government of India in August, 1987 submitted its report in July, 1988 and has recommended the expansion of various speciality departments in the existing medical colleges and provision of more specialised treatment facilities in the hospitals situated in North Eastern States. The institutions identified by the Task Force are as follows:

ASSAM

- (1) Medical College, Guwahati.
- (2) Assam Medical College, Dibrugarh.
- (3) Medical College, Silchar.

MANIPUR

- (4) Regional Medical College, Imphal

- (5) District Hospital, Imphal.

MEGHALAYA

- (6) Civil Hospital, Shillong.
- (7) Reid Chest Diseases Hospital, Shillong
- (8) Ganesh Das Maternity & Children Hospital, Shillong.

TRIPURA

- (10) G.B.Hospital, Agartala.
- (11) V.M. Hospital, Agartala.

MIZORAM

- (12) A new Hospital has been recommended.

SHRI N.TOMBI SINGH: I would like to appreciate what the Minister has done and express my gratefulness for the deep interest he has taken in the specialised treatment for the north-eastern areas. I am also happy to see the detailed and comprehensive answer given by him. As you know, north-east comprises so many small States; and Assam, of course, is in the north-east. Now the answer in part (b) on page 2 reads as follows:

"As a first step, the Planning Commission have agreed to provide an additional sum of Rs. 4.25 crores during the year 1988-89 for strengthening the diagnostic and treatment facilities in Assam."

I appreciate it. But he should be more concerned about the small States like Tripura, Mizoram, Manipur, Nagaland, Meghalaya and Arunachal Pradesh. Would you consider increasing medical facilities in these areas, as you have done in the case of Assam, because Assam is more or less an advanced sister among the seven sister States?

SHRI MOTILAL VORA: We have done in the case of Assam as this was a recommendation of the Secretary of the Planning Commission prior to the appointment of this Task Force. After we have received the Task

Force report, the whole thing is being examined and it is being considered by the Planning Commission. As the hon. Member has said, we will definitely consider all these steps in the North East region and I think the idea and the reason for the appointment of this Task Force was to strengthen the medical facilities in the North East region. So, I can assure the hon. Member that we will make efforts to fulfil what we have said.

SHRI N. TOMBI SINGH : There has been a protracted demand for a specialised treatment facility for the whole of North East region on the pattern of the All India Institute of Medical Sciences. Because of the very serious problem of communications the people from the North Eastern States have to go to different places for treatment in specialised fields and for that they have to incur a lot of expenses and face a lot of difficulties. In order to remove this ; there has been a prolonged demand for a specialised centre. May I know from the hon. Minister whether there has been any decision in this regard and whether the Task Force has made any specific recommendation in this respect ? If so, is the Government of India considering the demand made by the Regional Medical College, located in Imphal, which serves all the smaller States?

SHRI MOTI LAL VORA: The Regional Medical College has to be strengthened and the Task Force report which is being examined by the Planning Commission, as I have said, has examined it. In the Eighth Five Year Plan, to achieve the basic medical requirements the following specialist services/departments are going to be upgraded: medicine, surgery, ophthalmology, paediatrics, orthopaedics and psychiatry. Once these basic requirements are achieved the following additional specialised services may be created: cardiology, neurology, nephrology, cardio-therapeutic surgery. These things are under consideration for creating these specialised services in the North Eastern region. (*Interruptions*).

SHRI DINESH GOSWAMI: I do not know whether the hon. Minister is aware and

whether the Task Force has taken note of the fact that the incidence of cancer is the highest in the North Eastern region and particularly in Assam, not only in comparison to the other parts of India but compared to the whole world.

PROF. N.G.RANGA: Why is it so?

SHRI DINESH GOSWAMI : It may be because of taking raw betel-nut. There has been a persistent demand for having a full-fledged cancer institute. I would like to know whether the Task Force has taken note of it, and if so, the reaction of the Government to it, and whether the Government will go ahead with the creation of a full-fledged cancer institute.

SHRI MOTI LAL VORA: Regarding cancer, as the hon. Member has said, I also had been to Assam and I was given the same information there. Since the Task Force has submitted a report, it is being examined by the Planning Commission.

SHRI DINESH GOSWAMI: Has the Task Force taken note of it?

SHRI MOTI LAL VORA : I will see that. It is not included because I have not seen the report myself—and if there is no provision of a cancer institute we will make every possible effort to have the cancer institute or cancer centre there.

[*Translation*]

DR. CHANDRA SHEKHAR TRIPATHI : Mr. Speaker, Sir, the hon. Minister deserves our thanks for paying his attention towards the points his attention was drawn about providing specialised treatment facilities in North-eastern States, Gujarat and people living in rural and backward areas of the country. The problems of specialised treatment are prevalent all over the country. It is also seen that the facilities of specialised treatment have been made available at small places, experts have been appointed and modern equipments have been provided there. The equipments go out of order

after one or two months and it takes years to repair them. The specialists sit idle and thus the people do not get these medical facilities. I would like to know from the hon. Minister as to what steps the Ministry is taking to ensure that these equipments are repaired immediately and people continue to avail of the benefit of the facilities at the places where these modern and sophisticated equipments have been provided and specialised persons have been appointed.

SHRI MOTI LAL VORA : Mr. Speaker, Sir, the Government aims at achieving the goal of "Health for all by 2000". As regards the various equipment about which the hon. Member has drawn the attention of the august House, these things come under the jurisdiction of the State Governments. If the State Government find any difficulty in repairing these equipments, the Central Government will definitely extend all possible help. No matter if the equipments are being used in a primary Health Centre or in a Community Centre by the specialists, the Central Government is paying due attention towards them and keeping contact with the State Governments in this regard. Whenever this issue is taken up we consult them and take their views.

[*English*]

SHRI BHADRESWAR TANTI : Sir, this question relates to North Eastern States. You are aware that the North Eastern States are very much backward in all respects. So far as health is concerned, the people of the North Eastern States have to go to Bombay, Delhi, Madras, Vellore,, Patna and other places for specialised treatment. Till date the Government has failed to set up specialised hospital in the North Eastern States — for the people of Manipur, for the people of Mizoram, for the people of Arunachal Pradesh and other North Eastern States.

Our experience is that the hon. Minister is very much expert in assuring the House that the matter is under consideration. This phraseology which we have been hearing has got no meaning. The matter is under

consideration' is a very bad phraseology. He should answer it specifically when he is going to do.

Sir, last time I put a supplementary question regarding printing of immunisation card. The hon. Minister assured in the House that it will be looked into and the entire card will be printed in Assam. This time again the tender has been called to print it outside the State vicinity. What has happened to his assurance. I am asking the hon. Minister as to what he is going to do so far as the health of the people of the North Eastern States is concerned, where there is no hospital for specialised treatment.

SHRI MOTI LAL VORA : Sir, the hon. Member has reminded me. So, I would also like to remind the hon. Member that regarding immunization card, I assured the House and I had asked the hon. Member to come and meet me for a discussion and if there was any difficulty, we could sort it out. (*Interruptions*) Let me speak also... (*Interruptions*)

SHRI BHADRESWAR TANTI : The matter was raised in the House... (*Interruptions*)

SHRI MOTI LAL VORA: The hon. Member did not turn up. We had taken up this matter. I am not making any false assurance. If I make false assurance, then it will not give any result. We had taken up this matter seriously at that time and I again request the hon. Member that if he comes out with..... (*Interruptions*)

SHRI BHADRESWAR TANTI : I did not agree (*Interruptions*)

SHRI MOTI LAL VORA : Sir, moreover this question does not relate to immunization ..(*Interruptions*)

Sir, the task force recommended..... (*Interruptions*)

SHRI BHADRESWAR TANTI: Whether it is a task force or not, we are not concerned. We want that the things should materialise

as assured and it should be specific. (*Interruptions*)

SHRI MOTI LAL VORA : As I have said, the task force has recommended upgradation of various specialities/departments. This is going to be implemented in the Eighth Five Year Plan.

Supply of Spurious and Substandard Sterilizing Agent to Government Hospitals

*6. **SHRI E. AYYAPU REDDY:** Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Central Drugs Control Authorities have unearthed a large scale racket in which distributor of a pharmaceutical company made lakhs of rupees by supplying a spurious and sub-standard sterilizing agent to Government hospitals in the State of Tamil Nadu;

(b) if so, the details thereof; and

(c) whether any persons were arrested in this connection and if so, the follow up action taken in the matter?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI MOTI LAL VORA) : (a) to (c). A Statement is given below:

STATEMENT

On receipt of information that M/s. Aekay Pharmaceuticals, Madras was indulging in clandestine manufacture and sale of 'Lysol' to Government Hospitals in Madras, the Central Drug Inspector, South zone, Madras raided the premises of the said firm on 5.9.1988. Preliminary investigations have confirmed that M/s. Aekay Pharmaceuticals, who have only a Wholesaler's Licence were manufacturing Lysol without a Manufacturing licence. Investigations have further revealed that the firm had purchased only 15,000 litres of Lysol I.P. from M/s. Bengal Chemicals and Pharmaceuticals

Ltd., Calcutta but had supplied 70,000 litres of Lysol to various hospitals in Madras.

The Drugs Inspector immediately seized the blank labels found in the premises as well as stocks of Lysol available in the premises, Jerry cans, caps and other material used for clandestine manufacturing of the drug. As per the procedure laid down, samples of Lysol were sent for testing to the Central Drugs Laboratory, Calcutta on 15.9.1988. The test report has been received by the Deputy Drug Controller, Madras on 31.10.1988, confirming that the samples are not as per standard specifications, because of the presence of alkalinity and lesser content of cresol.

The Deputy Drug Controller, South Zone, Madras who is the Controlling Officer is now taking steps to launch prosecution against M/s. Aekay Pharmaceuticals Ltd, Madras under the relevant provisions of the Drugs & Cosmetics Act.

The State Drugs Authorities have been advised to suspend the wholesaler's Licence held by M/s. Aekay Pharmaceuticals Ltd., Madras pending completion of investigation and formal launching of prosecution.

Soon after the premises were raided by the Central Drug Authorities, a letter was addressed to the Assistant Commissioner of Police (Crime Branch) informing him of the illegal activity of the firm and requesting him to take necessary action in the matter under the Criminal Law. No arrest has been made by the Police so far.

SHRI E. AYYAPU REDDY: This is only a tip of the iceberg. The spurious drugs have assumed threatening proportions to the health security of India. The hon. Minister certainly knows that the consumption of drugs has increased by more than 500 per cent during the last decade. But with regard to the infrastructure which is available now both at the central as well as state levels for detecting spurious drugs, it has remained constant. It has not been increasing commensurate with the consumption of drugs.