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have, forgotten the Freedom Movement so quickly....I am surprised.

MR. SPEAKER: But this is a thing which we have to consider: whether at that given time the person in power or in so-called power—was he independent or was he under somebody's suzerainty or not. That we have to see.

DR. SUBRAMANIAM SWAMY: Tomorrow he will legitimise Mir Jaffer also. He invited the Britishers here.

PROF. RUP CHAND PAL: To the nonaligned countries also India has committed to bring it back.....

(Interruptions)

DR. SUBRAMANIAM SWAMY: You direct the Government to ask for the Kohinoor back. That is the demand of the whole country.

MR. SPEAKER: Next question—Mr. Amar Roy Pradhan.

SHRI KRISHNA CHANDRA HALDER: The Prime Minister should make a statement in this regard.

PROF. MADHU DANDAVATE: In the meantime you keep that word out of the record.

MR. SPEAKER: I will see.

MR. SPEAKER: Next question—Mr. Santosh Mohan Dev.

SHRI SANTOSH MOHAN DEV: Question No. 433.

SHRI K. LAKKAPPA: Question No. 441 and 433 may be clubbed together.

MR. SPEAKER: Can we take up question No. 441 also along with this?... No objection. All right.

SHRI K. LAKKAPPA: Because it is also of a similar nature.

Sale of Blood by poor

*433. SHRI SONTOSH MOHAN DEV: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether Government are aware that private blood banks and organisations are purchasing blood from people who are poor and innocent for a few rupees;
- (b) whether it is also a fact that a racket of touts is operating in several places in the country to bring these poor people to "donate" blood;
- (c) what is the legal standing of private blood banks and the rules to govern blood selling; and
- (d) whether Government propose to formulate a suitable law to check blood selling by the poor and if so, the details thereof?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI KUMUDBEN M. JOSHI): (a) to (d). The requirements of blood at present are being met through donors who are either voluntary or who accept payment for such donations. The operations of the Blood Banks are regulated by the Drug Controllers of the States and Union Territories under the Drugs and Cosmetics Act. The Government are considering measures for improving the functioning of the Blood Banks.

Malpractices Indulged in by Private Blood Banks

*441. SHRI K. LAKKAPPA:
SHRI MOHAMMAD ASRAR

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

AHMAD:

(a) whether Government's attention has been drawn to recent press reports about certain malpractices indulged in by private blood banks such as collecting blood from minors, poor donors at frequent intervals, sometimes more than once a day, and charg-

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ing exhorbitant rates for the blood bottles supplied by them to patients needing blood; and

(b) if so, measures being taken to arrest such majoractices?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI KUMUDBEN M. JOSHI): (a) and (b). Government are aware of the fact that the total blood requirements of the country cannot be met through voluntary donors alone and that these are required to be supplemented through donations received against payments. The operations of blood banks are regulated by the Drug Controllers of State Governments and Union Territories under the provisions of the rules framed under Drugs and Cosmetics Act. The Government are considering measures for improving the functioning of the blood banks.

SHRI SONTOSH MOHAN DEV: The hon. Lady Deputy Minister. . . .

(Interruptions)

MR. SPEAKER: The Minister is a Minister. . . . I will not allow any differentiation.

SHRI SATYASADHAN CHAKRABOR. TY: This is a sarcastic remark. It should be withdrawn.

MR. SPEAKER: Objection upheld.

SHRI SONTOSH MOHAN DEV: Mr. Chakraborty, you must have some courtesy to your colleague. Please don't say like that. ...

SATYASADHAN CHAKRA-SHRI BORTY: What you are saying is sarcastic. That is what I have pointed out.

SHRI SONTOSH MOHAN DEV: Because you are a lecturer and not a Professor, you can say like that.

SHRI SATYASADHAN CHAKRA-BORTY: I have never said it.

SHRI SONTOSH MOHAN DEV: My

second question is:

"Whether it is also a fact that a racket of touts is operating in several places in the country to bring these poor people to 'donate' blood."

Oral Answers

The hon. Minister has evaded answering that. According to a local newspaper, about a month ago 32 professional donors were arrested, and, when they are released from the jail, they refuse to go because, they say that again they will go about for this profession of donating of blood. A group of about 6,000 blood donors are operating in Delhi. According to the press report, there is one person who has donated 800 times his blood in a year and, in a day, on three occasions. This is the situation.

As regards the process of getting blood, there are three processes—one is from the replacement of the relatives, the other from the Red Cross and the third from the private blood-bank owners.

MR. SPEAKER: How do the professional people bring blood? Can one person be able to do that?

SHRI SONTOSH MOHAN DEV: Yes, Sir. This is the report. I think the Minister has seen it. It may be incorrect also. I am only trying to draw his attention. I am not saying that this is correct. I have put the question according to this paper report. Now, the total requirement of the country in a year is about 80,000 units but we are getting only 20,000 units. In a place like Tokyo where there is one crore of population, there are about 14 lakhs donors. Delhi is the only place where the number comes to 60,000. This is also lacking because the donors of blood should be from those who are well off and are in a position to donate. We must take this also into account.

I would like to know one thing. It is the private blood banks which are creating these touts and these touts are bringing the blood of the poor. What action is Government taking to stop the private blood banks from getting blood from the professional donors? And what is the legal standing of these private blood banks? This is my first question.

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KUMARI KUMUDBEN M. JOSHI: Sir, in this country, there are at present 543 blood banks out of which 467 are Government-owned and 76 are private run. The private-run blood banks are regula-· ted by the Drugs Controllers of the States within the framework of the Drugs and Cosmetic Act and the Indian Pharmacoepia Act. They have to obtain the licence before the private agency wants to start operating the blood banks. I do agree even otherwise also with the hon. Member that there is shortage of blood. There are three types of donors who donate bloodone is the voluntary donors, the second is the replacement and the third is the professional donors. I would not hesitate to give the figures to the Members. (Interruptions) I would like that even the hon. Members of this House can help us. We are quite aware and conscious about the problems which we are facing. Now, I would like to give you the figures.

DR. SUBRAMANIAM SWAMY: We are prepared to give clean blood to the ruling party Members!

MR. SPEAKER: I cannot object to that.

KUMARI KUMUDBEN M. JOSHI: The terms and conditions under which blood donor comes and donates the blood is that he has to go through some of the medical tests or whatever we may call it. Without the medical test, no blood bank will take the blood from the donors.

Sir, at present, the position in the country is that 25 to 30% of blood is from the voluntary donors who are donating it; the replacement is from 25 to 30% and the other donors whom we call the professional donors contribute from 40 to 50% of blood. This is the actual position. We are encouraging the voluntary donations and, the hon. Members can help us in this problem. We should educate the people of this country who sometimes have the wrong impression that if they donate blood, they will have other problems.

SHRI K. LAKKAPPA: Why are you asking us to do that? Why should not Government take action?

MR. SPEAKER: Your turn is also coming.

KUMARI KUMUDBEN M. JOSHI: Because the hon. Member asked me a specific question as to what is the Government going to do. Sir, we are going to have some infrastructure upto the District Levels also so that we can involve the voluntary donors who can themselves come forward to give us the blood. The second point which he raised was about the newspaper reports. I disagree that one man can donate blood so many times.

SHRI SONTOSH MOHAN DEV: Sir, the backlog in blood recruitment is quite heavy. The Minister has said that Government are considering measures for improving the functioning of blood bank. What steps have you taken against private blood banks who are getting blood from the professional blood donors who are from the poor society. You say that newspaper report is incorrect but this is the statement of the paper. They have given the name of one Shri Madan Lal and Mr. Roberts. They have given the statement that they have given blood six hundred times in a year and even two times a day. If it is a fact what action Government has taken against the blood banks so that these things do not happen in future?

KUMARI KUMUDBEN M. JOSHI: Sir, in this connection we have received the report from the Delhi Administration because these are people from Delhi. If the hon. Member is interested I can give the details. When they went for inspection and saw the name of the person, Sir, the name of the person was there but the name of the father was changed. We asked the Delhi Administration to give us the report and they have given us the report and if the hon. Member is interested I can give him all the details.

SHRI K. LAKKAPPA: Mr. Speaker, Sir, this is a serious matter that the Health Ministry or the concerned authorities cannot save the lives of the people in the country when we want to establish a welfare society. The hon. Minister has said that the press report is not correct whereas half of it has been conceded by the Minister

that certain racketeering is going on. Sir, I would like to point out that blood is being collected from minors and professional pool donors some of whom are even diseased. There is no checking system either through private or government agencies? Therefore, there is a complaint not only here but in various parts of the country about it. This is a serious matter and there are no rules and regulations controlling the discipline of taking blood. (Interruptions) No effort has been made by this Ministry to improve this kind of situation which is developing in the country and they are playing with the lives of the people in this country. Thousands of patients die without taking blood. (Interruptions) I would like to know what steps this Ministry has taken to improve the situation so that such things are stopped and also assure the House that situation will improve.

KUMARI KUMUDBEN M. JOSHI: Sir, I appreciate the emotion of the hon. Member. In the welfare state we are also equally serious and concerned that persons should get blood.

SHRI K. LAKKAPPA: You are not concerned. Tell us what steps you have taken? (*Interruptions*)

KUMARI KUMUDBEN M. JOSHI: Sir, I have explained that we are also equally concerned so far as this problem is concerned. (Interruptions)

SHRI K. LAKKAPPA: It is a serious matter. Thousands of patients die without taking blood.

KUMARI KUMUDBEN M. JOSHI: I would like to give some information on this subject and I hope, Sir, you will permit me to do that. The Ministry is seriously concerned about this problem and there was a meeting which was held by the Central Council of Health and Family Welfare in Delhi in 1982. The Health Minister is the Chairman and the Health Ministers of States are members. The Central Council has recommended that people should be educated and motivated about blood donation on voluntary basis, and there should be adequate encouragement for voluntary donation. The Conference also recommen-

ded that quality control of blood should be enforced at all stages-collection, storage and distribution. They have also recommended that adequate blood banking services at State and District levels should be built up including trained qualified manpower. The Ministry has set up a National Planning and Expert Group for this purpose and they have identified certain measures needed for improving the system. Under this recommendation, liaison officers are identified by the States for monitoring the activities in this area. They have also identified the equipment required for proper blood storage facilities and drawn up a list. These are the positive steps which we have taken and we have requested the State Governments to go into it in detail and thus we are trying to solve this problem.

SHRIK, LAKKAPPA: You have read out certain guidelines that you have given. But why is it that they have not taken any action? How many cases have been detected? In spite of these guidelines have they not taken adequate why steps in this direction? Why has punishment not been given to those found guilty, who are involved in this racketeering? There is connivance of these people with those working in the hospitals and they do all these things. Therefore I want to know what action has been taken in this respect. When there are some arrests, it shows, there must have been some mal-practices going on. Some diseased persons are donating blood. It is very dangerous. Therefore, my question is this: What positive action have you taken in this matter? How many of them have been arrested? What are the guidelines which have actually been followed? In respect of these guidelines also, what positive action has been taken so far ?

KUMARI KUMUDBEN M. JOSHI: I would like to bring to the notice of the hon. Member and the hon. House, that there are already instructions in respect of obtaining Whole Human Blood. We don't take blood from persons having TB. The blood is not obtained from a human subject—

- (i) who is known to be suffering from or have suffered from syphilis;
- (ii) whose blood has not been tested with

negative results for evidence of syphilitic infection;

- (iii) the haemoglobin value of whose blood is less than 85 per cent, and
- (iv) who is not (as far as can be ascertained by a qualified physician after inspection or simple clinical examination and consideration of his medical history) free from disease transmissible by blood transfusion.

MR. SPEAKER: They are asking, what positive steps have been taken to check before blood is taken.

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHAN-KARANAND): I respect and I share the concern of the House in regard to blood being taken, rather than given. In the blood is taken, all the problems arise. If the blood is given to save the life, no problem arises.

SHRIMATI PRAMILA DANDAVATE: I am one of the regular voluntary blood donor and I know that the blood is not taken from a person, the haemoglobin value of whose blood is less than 85 percent.

Now, in a Bombay hospital there was a case where the blood of a leper was administered to a patient and the patient died. There was a case like that in Bombay. There are cases where the blood of people suffering from infectious STD and other diseases is being taken by the private blood banks. I feel that the Government must come forward with a proposal to set up a machinery by which there should be some control on these organisations.

Further, are there any rules that in so far as the professional blood donors are concerned, they cannot give the blood before a particular period.

MR. SPEAKER: I think, they have already initiated action in this respect.

KUMARI KUMUDBEN M. JOSHI: The State Drug Controller is authorised to take action against such practice.

भी रामलाल राही: खून विकता भी है और खून की आवश्यकता भी पड़ती है। जब खून की आवश्यकता पड़ती है तो दूरदराज के अस्पतालों में खून की कोई व्यवस्था नहीं होती है।

Òral Answers

खून बिकता भी है। मंत्री जी जानते हैं कि खून को एकतित करने की दो व्यवस्थाएं हैं — एक सरकारी क्षेत्र में है और कुछ निजी संस्थाएं करती हैं।

मैं यह जानना चाहता हूं कि जो निजी संस्थाएं खून एकत्रित करती हैं अथवा खरीदती हैं या स्वेच्छा से लेती हैं, उन पर सरकार का क्या नियंत्रण है ? जब वह खून मरीज के लिए जाता है और उससे मरीज मर जाता है तो उसके जिम्मे- दारी किसकी आप निर्धारित करेंगे ?

अध्यक्ष महोदय : बता चुके हैं।

श्री रामलाल राही: नहीं बताया है।

क्या सरकार में यह क्षमता नहीं है कि वह हर डिस्ट्रिक्ट हस्पताल में ख़न एकत्रित करने के लिए खून-बैंक बनावे जिससे मरीजों को सुविधा मिले? इसमें कौनसी कठिनाई पड़ रही है जबकि खून देने वालों की, डोनेट करने वालों की हजारों की संख्या में लिस्ट बनी हई है?

KUMARI KUMUDBEN M. JOSHI.. These blood banks are run by the Government as well as the voluntary organisations. These blood banks are required to function under the Drugs and Cosmetics Act... (Interruptions).

MR. SPEAKER: Next question.

Scheme for Welfare of Children and Allocation for Orissa

- *436. SHRI HARIHAR SOREN: Will the Minister of SOCIAL WELFARE be pleased to lay a statement showing:
- (a) whether any scheme has been introduced by the Government for welfare of children in need of care and protection;