

the hon Member feels that it must have stoppages there, then I have no objection in giving stoppages. But in that case, he should not blame that the train is slow.

श्री सत्यनारायण जटिया : अध्यक्ष महोदय, मैं आपको एक उदाहरण देना चाहता हूँ कि रेल विभाग किस प्रकार काम करता है। मैंने एक पत्र में कहा था कि गंजबासोदा पर सदरन एक्सप्रेस का स्टॉपेज किया जाए। उसके उत्तर में मुझे सूचित किया गया कि विदिशा पर सदरन एक्सप्रेस को नहीं रोका जा सकता, वह एक फास्ट ट्रेन है, इसलिए उसको वहाँ पर रोकना उपयुक्त नहीं है। आपको सुनकर आश्चर्य होगा कि वास्तव में विदिशा पर सदरन एक्सप्रेस रुकती है। मैंने पूछा था गंजबासोदा के बारे में और उत्तर मिला विदिशा के बारे में। मैं मंत्री महोदय से कहूँगा कि वह रेल विभाग को निर्देश दें कि वह ठीक तरह से काम करे।

यह जो साबरमती एक्सप्रेस चली है, इसके मार्ग और टाइम टेबल में परिवर्तन हुआ है। अगर इस गाड़ी को, डाउन ट्रेन को, रतलाम से विलम्ब से चला कर नागदा स्टेशन पर डीलक्स का कनेक्शन दें और अप ट्रेन को उज्जैन से जल्दी चला कर नागदा पर डीलक्स का कनेक्शन दें, तो दिल्ली आने-जाने वाले यात्रियों को बड़ी सुविधा होगी। अब नया टाइम टेबल आने वाला है। मैं जानना चाहूँगा कि क्या मंत्री महोदय यह परिवर्तन करके लोगों को सुविधा देने जा रहे हैं।

SHRI A.B.A. GHANI KHAN CHAUDHARY : All these questions do not arise out of the main question. If have to answer all this, I have to consult my Traffic Department...

अध्यक्ष महोदय : इनको आपके पास भेज देंगे।

SHRI BASUDEB ACHARIA : When the Neelanchal Express was introduced a few years back, Members from West Bengal demanded that train should be routed from Kharagpur...

MR. SPEAKER : That does not come in it.

SHRI BASUDEB ACHARIA : There is a proposal to increase the frequency of that train. May I know from the hon. Minister whether he will consider the demand of the Members of Parliament from West Bengal to run that particular train via Kharagpur ?

MR. SPEAKER : You can consider it but you are not obliged to answer it.

#### Present Medical Education System and need of Rural Areas

\*164. SHRI ARJUN SETHI :  
SHRI CHHITTUBHAI  
GAMIT :

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

(a) whether Union Government are aware that the present medical education system is not in a position to fulfill the needs of most of the people in rural areas;

(b) whether it is also a fact that the present medical education, which is based on western system of medicine, needs revamping to suit the needs of our country;

(c) if so, whether any review has been made in this regard; and

(d) if so, the details thereof and the plan of Government in this regard ?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND

**FAMILY WELFARE (KUMARI KUMUDBEN M. JOSHI) :** (a) to (d) The Government of India set up a Medical Education Review Committee in September, 1981 to review and to make recommendations for effecting necessary changes in the present medical education system. On receipt of the Report of the Review Committee, an Empowered Committee was appointed to take decisions on the recommendations of the Review Committee. The Empowered Committee has since completed its work.

**SHRI ARJUN SETHI :** Sir, my questions were very specific but the hon. Minister has just referred to the appointment of some committee by the Government to go into the details of these aspects. However, you know Sir that there is no depth of these committees being appointed by the Government. The only problem is how soon the needs of the people living in the remotest areas of the country are met, that is the main question. So, in the light of these problems, I would like to ask the hon. Minister how soon will the reports of the Review Committee and Empowered Committee be made available so that needs of the people living in the remotest areas of the country could be met?

**KUMARI KUMUDBEN M. JOSHI :** Sir, I have already replied that the Review Committee was appointed in September 1981 and the report of that Committee was received in September 1982. After that the Empowered Committee was appointed and in February 1984 we have received the suggestions from that Committee. The Ministry has received the suggestions and we will consider them.

**SHRI ARJUN SETHI :** The hon. Minister has stated that they have received the suggestions. May I know what are the main suggestions, whether this aspect is covered by their recommendations and if so, when is this aspect going to be implemented by the Government?

**KUMARI KUMUDBEN M. JOSHI :**

Sir, there are many suggestions made by the Empowered Committee. If the hon. Member is interested, we will have no hesitation to give him the details but it is not possible here to go into the details.

**SHRI ARJUN SETHI :** Only main suggestions, Sir.

**KUMARI KUMUDBEN M. JOSHI :** Keeping in view the requirements of the medical doctors in the rural areas is also one of the suggestions of that Committee.

**SHRI ARJUN SETHI :** Sir, .....  
(*Interruptions*).

**MR. SPEAKER :** It is a third supplementary?

**SHRI ARJUN SETHI :** No, Sir. You know the problem is very acute specially in the rural areas. In the light of that problem if this suggestion is implemented soon then the demands of the people can be met. So, in the light of this I would like the hon. Minister to categorically say by what time the doctors can be appointed in the primary health centres and the required medicines can be made available to the people there? Since this is an acute problem, I would like to have categorical answers to these questions.

**THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND) :** Sir, there seems to be a little confusion in the mind of the hon. Member because the question he has asked is about the medical education and now he is asking about the health care to the rural areas. The question was why this Medical Education Review Committee was appointed? The Medical Education Review Committee was appointed with a view to see that the medical education that is given to the doctors is relevant to the needs of the society. Now, how to make it relevant that was the purpose for which this Committee was appointed. The

have given their recommendations and perhaps those things will be taken up.

SHRI SATISH AGARWAL : Is it in order, Sir ? The hon. Member Mr. Sethi addressed the lady Minister as 'Mr. Minister'. Is it in order ?

MR. SPEAKER : Minister has got no gender, I think.

SHRI SATISH AGARWAL : So, they are without gender. Thank you very much, Sir, for the ruling from the Chair...*(Interruptions)*.

MR. SPEAKER : As we call a Chair Person, Minister is a Minister, that is all.

DR. A. KALANIDHI : Sir, I would like to know from the hon. Minister of Health and Family Welfare whether there is any proposal with the Government to evolve a uniform policy and a uniform pattern of medical education so that once they become full-fledged doctors, their services can be rendered in the rural areas ? If so, kindly let me know the proposal.

SHRI B. SHANKARANAND : This is one of the recommendations of the Committee. Steps would be taken in that direction.

SHRI A. R. MALLU : There are different types of medical education in India like allopathy, ayurvedic, homoeopathy, unani and so on. Is there any proposal to introduce an integrated system all over the country in one step ? Secondly,...

MR. SPEAKER : I think it is a very important question. What you have already asked is very important. Let us get an answer to it. In itself it is very big question. I hope the Minister will take notice of it.

SHRI B. SHANKARANAND : I

have already replied to the question about the uniform pattern of education.

MR. SPEAKER : He wants emphasis to be given to ayurved and homoeopathy.

*(Interruptions)\*\**

MR. SPEAKER : He is the Minister.

*(Interruptions)\*\**

MR. SPEAKER : That word is unparliamentary. It will not go on record.

DR. V. KULANNDIAIVELU : Our country is unique in the sense that we are catering to various disciplines of medicine. Apart from allopathy, we have the Indian systems of medicine like homoeopathy, ayurveda, siddha etc. I want to know from the Hon. Minister whether we are going to adopt a system, which is a unique system where we have incorporated the allopathy and the Indian systems of medicine in order to maintain a uniform pattern in the curriculum ? At present, we have variegated disciplines of medicine, each one claiming superiority to itself. Further, our politicians; and even Ministers, are making statements that the India systems of medicine are meant for the rural people and the allopathy system is meant for the urban people. What is your reaction to that.

SHRI INDRAJIT GUPTA : He has got the same reply to all the questions.

SHRI B. SHANKARANAND : Unfortunately, the question does not require any clarification, arising from the main question or the reply to the main question.

MR. SPEAKER : It is a doctor's query.

DR. A. KALANIDHI : Is there any proposal to integrate them ?

SHRI B. SHANKARANAND :

This suggestion or proposal will arise at the time when the recommendations of the Committee are examined.

### हानिकारक दवाओं का निर्माण

\*167. श्री रामलाल राही : क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या भारत में विदेशी दवा कंपनियों द्वारा हानिकारक दवाओं का निर्माण किया जा रहा है और उन्हें खुले आम बाजारों में बेचा जा रहा है;

(ख) क्या जो दवाएँ यहां बेची जा रही हैं, वह जहरीली समझी जाती हैं और उन पर पश्चिमी देशों में पहिले से ही प्रतिबंध लगा है; और

(ग) यदि हां, भारत में उन दवाओं पर प्रतिबंध न लगाने के क्या कारण हैं जो बीमार को ठीक करने के बजाय उसके मरने का कारण बन सकती हैं ?

SHRI BAPUSAHEB PARULEKAR: Sir, reply to part (a) of the question in the Hindi version is in the affirmative and in the English version it is 'No, Sir.', So, I would like to know which answer is authentic ?

MR. SPEAKER : Yes, Sir, and No, Sir ?

SHRI BAPUSAHEB PARULEKAR: Kindly see the answers in both the versions.

SHRI SATISH AGARWAL : Yes, Sir and No, Sir, have no gender, Sir.

SHRI BAPUSAHEB PARULEKAR : Sir, the question is very important. Supplementary will flow out of this question.

अध्यक्ष महोदय : दो ही चीजें हैं, ये सर और नो सर। दोनों गए हैं और आपको क्या चाहिए।

THE DEPUTY MINISTER IN MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI KUMUDBEN M. JOSHI) : (a) No, Sir.

(b) and (c) : Five drugs which are banned in certain countries are being marketed in India on the advice of technical experts, keeping in view the medical needs of the country.

श्री रामलाल राही : अध्यक्ष महोदय, इस प्रश्न के तीन खण्ड हैं और पहले खण्ड के उत्तर में माननीय मंत्री जी ने उत्तर जो हां में दिया है।

अध्यक्ष महोदय : न को हां समझो और हां को न समझो।

श्री रामलाल राही : मंत्री जी ने कह दिया कि जी नहीं। लेकिन माननीय मंत्री जी का ध्यान एक लम्बी अवधि से देश में प्रकाशित होने वाले विभिन्न समाचार पत्रों चाहे वे मासिक हों, साप्ताहिक हों या दैनिक हों, के माध्यम से इस सदन में और जगह-जगह विद्वान् लोगों द्वारा आकर्षित किया जाता रहा है। बहुराष्ट्रीय कंपनियां जो विदेशी कंपनियां हैं, वे कुछ ऐसी दवायें बना रही हैं, जो मानव मात्र के लिए नुकसानदेह हैं। यही नहीं इन दवाओं की बिक्री हो रही है। ऐसी दवाओं की बिक्री होती है, जिन की तारीख निकल चुकी होती है, उसके बाद भी ये दवायें बेची जाती हैं। ये दवायें दुकानों से बिक्री नहीं होती हैं, जो बनाने वाले कारखाने हैं, ये दुकानों को सप्लाई करते हैं। मैं माननीय मंत्री जी का ध्यान "रविवार" समाचार पत्र के हिन्दी