

अध्यक्ष महोदय : वे कोआप्रेटिव सेक्टर की बात कर रहे हैं ।

श्री पी० शिवशंकर : कम्युनिटी बायोगैस प्लांट्स के लिए जहां-जहां कोआप्रेटिव सेक्टर वाले आगे आ रहे हैं या आगे बढ़ रहे हैं उनको सुविधाओं के बारे में मैंने स्टेट-मेंट टेबल पर रख दिया है । उनको भी वही सुविधाएं दी जा रही हैं ताकि कोआप्रेटिव भी बायो-गैस प्लांट्स स्थापित कर सकें ।

श्री राम लाल राही : मेरा अंतिम सवाल खंड (ड) है जिसमें मैंने पूछा था कि प्रयोगात्मक दृष्टि से हर विकास क्षेत्र में कोई दो गांव आप ऐसे चुनेंगे जहां पर कोआप्रेटिव बेसिस पर बायोगैस संयंत्र लगाये जाए ? इस दिशा में आप क्या कदम उठाने को तैयार हैं ?

श्री पी० शिवशंकर : इस किस्म की अभी योजना नहीं रही है ।

एक माननीय सदस्य : क्या इस बारे में आप सोचेंगे ?

श्री पी० शिवशंकर : जिन गांवों में आवश्यकता हो, जिन गांवों में सुविधाएं हों, जैसा कि मैंने निवेदन किया कि अभी योजना तो नहीं है लेकिन मैं उसके बारे में अवश्य सोचूंगा । अभी तक यह योजना नहीं रही है लेकिन मैं आपके सुझाव पर जरूर सोचूंगा । लेकिन जहां-जहां सुविधाएं हैं वहां-वहां हमने कोआप्रेटिव सेक्टर में भी काम करने की कोशिश की है ।

Availability of Essential Drugs for Major Diseases

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*189. SHRI SANAT KUMAR MANDAL :

SHRI NAWAL KISHORE SHARMA :

Will the Minister of CHEMICALS AND FERTILIZERS be pleased to state :

(a) whether several of essential drugs required for treatment of major diseases like high blood pressure, heart ailments, typhoid, Bronchitis etc., are either not available or are in acute short supply throughout the country;

(b) whether it is due to erratic supply of bulk drugs used for manufacture of these medicines or some other reasons.

(c) the steps Government propose to take in the matter and ensure production and sale of these medicines to the general public all over the country;

(d) whether there is a tussle going on between the manufacturers and retail chemists and the latter are either keeping these medicines underground or selling them at premium; and

(e) if so, how Government propose to control these retailers and make it mandatory on them not to hold back any such medicines and sell them at prescribed prices ?

THE MINISTER OF STATE IN THE MINISTRY OF CHEMICALS AND FERTILIZERS (SHRI R.C. RATH) : (a) to (e) A Statement is laid on the Table of the House.

Statement

(a) to (c) The overall availability position of essential drugs is satisfactory. However, brand shortages of drug formulations like Aldomat (for high blood pressure) of Merck Sharp and Dhome, Isordil (for heart ailment) of Geffrey Manners and Chloromycetin (for typhoid) of Parke Davis were reported to the Ministry, which reviews the availability position of all essential drug formulations. No shortage of drugs for bronchitis was reported. In

all those reported cases of shortages, equivalent formulations of other companies are reportedly available.

Shortage of Aldomat is due to industrial relations problem in the factory of M/s. Merck Sharp and Dhome since early August, 1983. On advice from my Ministry, Indian Drugs and Pharmaceuticals Ltd. and M/s. Dey's Medical Stores have substantially increased production of equivalent formulations Emdopa and Meldopa and have rushed supplies to reported areas of shortages. Indian Drugs and Pharmaceuticals Ltd. and State Trading Corporation of India Ltd. have also been advised to keep buffer stocks of Emdopa tablets and the bulk drug Methyl Dopa respectively.

The shortage of Isordil and Chlormycetin is of localised and temporary nature and their respective equivalents Sorbitrate of M/s. Nicholas and Entromycetin of Dey's Medical Stores are available in the market.

The availability position of the bulk drugs which go into the manufacture of the above mentioned formulations is satisfactory.

(d) and (e) It has come to the notice of the Ministry that some Chemists and Druggists have been boycotting drugs manufactured by some companies. The matter was considered by the Monopolies and Restrictive Trade Practices Commission. The Commission has directed such chemists and druggists to desist from boycotting the drugs of any producer.

Some psychotropic Schedule 'X' drugs are reportedly not available with all retail chemists. However, these are available in Super Bazars, Cooperatives and other chemists who have complied with the requirements of obtaining separate licences under the Drugs and Cosmetics Rule.

SHRI SANAT KUMAR MANDAL : May I know what were the medicines of day-to-day use which were taken off the controlled list sometime back,

apparently to appease the manufacturers and how did Govt. make sure that their availability to the general public will not be affected by this action and there was no price rocketing ?

SHRI R.C. RATH : There is no scope of shortage of medicines because as and when we get information about shortage of particular brand names, equivalent medicines are rushed to the area and the shortages are being monitored by my Ministry on weekly basis.

SHRI SANAT KUMAR MANDAL : Sir, may I know whether the Bombay-based multinationals manufacturing some of the life-saving drugs (who had even been resorting to excess production) are now seeking the re-endorsement thereof under the excess production capacity replenishment scheme ? If so, which are these drug companies and what control Govt. is exercising over the production and proper distribution of these drugs for use in Government hospitals and their sale to the general public through the retailers who generally hold back their stocks and sell them at a high premium to the needy people ? Further may I know whether the Military and Government hospitals are given preference in the matter of direct supply by the manufacturers of such medicines ? If not, why not ?

SHRI R.C. RATH : Sir, the Hon. Member has put a very lengthy question. I would like to inform him through you, Sir, and this House that as and when there is any report of non-availability of a particular brand of medicine, we immediately ensure that similar alternative drug is made available in that area. About the non-availability of certain drugs, I may submit that because of the non-cooperation between the Druggists and Chemists Association and some of the manufacturers, the matter was referred to the MRTP Commission and it has given its findings. I think this is a separate question and I do not want to go into it. Otherwise, I may inform the House that there is no question of non-availa-

bility of the medicine. The medicine referred to by him is available in adequate quantity. But I may inform the Hon. Member that there is a demand for particular brands of the medicine for which substitutes are being made available.

SHRI NAWAL KISHORE SHARMA : Mr. Speaker, Sir, this is a very important question. Certain drugs are not available. The Hon. Minister in his statement has said that though there is a shortage, we are trying to meet the shortage. That is what in a nut-shell the answer is. My submission in this regard is that it is a fact that drugs are not available. Even vitamin-C is not available in the C.G.H.S. Dispensary of North Avenue, not to speak of other dispensaries. Vitamin-C is in short supply to the M.Ps. We can very well imagine the plight of the general public. In view of this, I would like to know from the Hon. Minister—I understand he was the Member of the Hathi Committee and as a Minister who is competent to include the recommendations of the Hathi Committee in letter and spirit—what is it that is coming in the way of the Ministry to abolish this brand name? Why is it that the brand names are not abolished so that the multinationals could be prevented from the supply of these medicines who thrive on the basis of their advertisements and good name? Why is it being delayed?

With regard to the non-availability of Aldomat, I have a fear that Merck who are the manufacturer of this particular drug with this particular brand name, are in league with the Chemists and Druggists and its artificial short-supply is being created by them so that they can import bulk drug. This medicine is available in this country. In my constituency there is one Mr. Sunil Sachin, who is producing this bulk drug. But it is not being purchased from him. It is manufactured indigenously. But this bulk drug is being allowed to be imported by the parent organisation. May I know the reason for this?

Secondly, Sir, you would agree with me that the health of the country should be all right and the drug should be available. Now, Sir, he says that they have taken the matter with the MRTP Commission. I think there is a Drug Control Order and this Drug control order controls the suppliers, the commission agents and the traders. If it is a question of their negligence, why have you not take action against them?

SHRI R.C. Rath : The Hon. Member has mentioned about the non-availability of vitamin C through the CGHS hospitals. I would like to mention that there is abundance of vitamin C, but

it is for the hospitals to procure and supply the same. If the hospitals, in turn, do not procure and supply, my Ministry is not responsible. My Ministry is only responsible to the extent of production...*(Interruptions)*.

SHRI SATISH AGARWAL : It is a collective responsibility. It is a common experience of all Members of Parliament that drugs are not available and substitutes are given. How do you say that? ...*(Interruptions)*. You ask any Member of Parliament. Everybody is shouting for that.

श्री गिरधारी लाल व्यास : कोई दवाई सी०जी०एच०एच० डिसपेंसरीज में अवलेबल नहीं है ।

SHRI SATISH AGARWAL : Shri Ramavtar Shastri is a heart patient; he is not getting the required medicine, you can ask him...*(Interruptions)*.

SHRI SUNIL MAITRA : How can you shift the responsibility to the Health Ministry...*(Interruptions)*.

SHRI R.C. RATH : The Hon. Member's question was that vitamin C is not available in the Government hospitals and CGHS dispensaries. To that I say that my Ministry is looking to the production aspect and vitamin C is available in abundance. And if it is not avail-

lable in the hospitals, I am not aware of that aspect, but from the production point of view I say that vitamin C is available whatsoever. The other part I am not aware of.

PROF. N.G. RANGA : That is not the answer that you should give.

MR. SPEAKER : You say that production is not lacking and you have got abundance of supply. Now you have come to realise the position and the vociferous sentiments of the House that it is not available. You should take it up with them and ask them what is the reason and let us know.

SHRI R.C. RATH : In reply to the question of the Hon. Member, Shri Sharma, I said that vitamin C is available in abundance, but if it is not available in the CGHS dispensaries or other places, I am not aware of it; I will take care of it.

As regards the question about the brand names, in five selected items, we have dispensed with the brand names, and the matter is sub judice now in the Supreme Court. Hon. Members have complained about not getting some medicines, and one is Aldomat. There was some industrial unrest and labour problem in the unit, and so we saw to it that IDPL which is a public sector unit rushed Emdopa which is a very good substitute for Aldomat and also Meldopa which is manufactured by Dey's Medical Stores. And thus, immediately, the requirement was met. I am going a step further in giving the information that there was shortage of Chloromycetin of Parke Davis, and we saw to it that immediately Entromycetin of Dey's Medical Stores and Paraxin of Messrs. Boehringer Knoll was made available. Thus, as and when any essential life saving drug is not available, we ensure that similar drugs of other brand names are made available in the respective areas, and to ensure this my Ministry is having a monitoring of the situation every week. As and when information is received at our end,

we leave no efforts to see that the people do not suffer.

SHRI NAWAL KISHORE SHARMA : It is an important and national question. The import of bulk drugs is being allowed when such drugs are available in the country. That is my question. It has not been answered. I had put that question.

SHRI R.C. RATH : Some bulk drugs which are not available in the country, its actual users can directly import it. And in case of some bulk drugs where there is short supply, we clear the import through the STC. And if any such instance the Hon. Member brings to my notice....

SHRI NAWAL KISHORE SHARMA : I have said it on the floor of the House. You take care of it. Why do you allow import ?

SHRI SATISH AGARWAL : Why actual users should be allowed to import when it is available in the country ? Why ?

(Interruptions)

SHRI R.C. RATH : If it is available in the country, normally we do not import because our policy has been not to spend away our...

SHRI SATISH AGARWAL : Why abnormally ? Why abnormally ?

(Interruptions)

SHRI R.C. RATH : We do not allow import. There is no question of normally not allowing the imports. If an Hon. Member can give me a specific instance, I will look into it.

(Interruptions)

MR. SPEAKER : He will look into it.

(Interruptions)

MR. SPEAKER : There is no problem he can solve it. Now look here, Mr. Minister.

(Interruptions)

SHRI R.C. RATH : There is no import plan of the medicine which you have mentioned in 1983-84.

(Interruptions)

MR. SPEAKER : The Minister will look into the matter and settle it.

DR. A. KALANIDHI : Sir, I would like to know whether the Hon. Minister is aware of the fact that drugs like Garboyn and Gardinal are still not available to the common man? These drugs are used for epilepsy and till this date these drugs are not available in the market. I would like to know from the Hon. Minister whether it is a fact that because the drugs are cheaper and the manufacturers are not getting enough profit, they are not producing it?

SHRI R.C. RATH : We have varieties of essential and lifesaving drugs. And in the case of any essential drugs not being available, through our monitoring process we are trying to make it available. We do our monitoring based on the information that we get from the State Drug Control Authorities and also from the institutions and individuals as well. If the Hon. Member has any specific information and if he informs me, I will enquire and will see that the medicine which is not available or is in short supply could be adequately met. But there are varieties of medicines; and if the Hon. Members go on asking every individual medicine, it may be difficult off-hand to tell him without referring to the records.

SHRI HARIKESH BAHADUR : Sir, many drugs are not available in the market. It is true as the Hon. Member has said it is because the indigenous production of drugs is not being encouraged properly. I would like to know from the Hon. Minister what is the

policy of the Government? Whether it is to encourage the multinationals or indigenous production and whether Government is going to set up more industries like the IDPL in order to produce these drugs in the country itself or the Government has got some planning to import these from outside? Whatever production of the IDPL is there it is insufficient and is also sub-standard. Therefore, I would also like to know whether the Government is going to improve the quality also?

SHRI R.C. RATH : About IDPL Products, I would say it is neither insufficient nor sub-standard. Qualitywise the public sector production could be compared with any international drug.

And coming to the Government policy, which the Hon. Member has enquired, I would say always our effort has been to see that indigenous production improves and the public sector improves to compete with the international drug market. The Hon. Member would be happy to know—and I would also like to inform the House—that so far as our indigenous drugs production is concerned it can be equated with any of the standard product of any multinational company in any part of the world.

श्री राम बिलास पासवान: क्या मंत्री महोदय को जानकारी है कि मुजफ्फरपुर में पिछली 22 तारीख को आई०डी०पी० एल० मे ब्लास्ट हो गया जिसमें 1 करोड़ रु० की सम्पत्ति नष्ट हुई है ?

SHRI R.C. RATH : I need a separate notice for it.

SHRI SONTOSH MOHAN DEV: It is a fact that no vitamin tablets are available in the North and South Avenue. To look into that you have given your instructions to the Minister. But seeing the Zero Hour rhythm from the Hon. Members, will you kindly withdraw your order or instruction?

Otherwise there will be more trouble in the Zero Hour, because there is enough vitamin with the Members. No Member should be supplied with the Vitamins. Will you kindly reconsider it ?

SHRI SATYA SADHAN CHAKRABORTY : What are the tablets which he is taking ?

MR. SPEAKER : You ask him.

SHRI KRISHNA CHANDRA HALDER : He is taking vitamins A to Z.

श्री काली चरण शर्मा : अध्यक्ष महोदय, पूरा हाउस जानता है कि एलोपैथी में सारे रोगों की दवा नहीं है। क्या स्वास्थ्य मंत्री जी इस बात को भी देखेंगे कि दिल्ली के आस-पास कुछ कंपनियों ने ऐसे यूनिट बना लिये हैं जहाँ से आयुर्वेद की भी नकली दवाएं दी जाती हैं, जिनका असर नहीं होता है। मैं कहना यह चाहता हूँ कि अच्छी कंपनियाँ आपको दवाएं सप्लाई नहीं कर रही हैं। आपके अधिकारियों और इन गलत कंपनियों की मिलीभगत से ऐसी दवाएं सप्लाई हो रही हैं जिनका कोई असर ही नहीं है क्योंकि अच्छी कंपनियाँ कमीशन नहीं दे सकती इसलिये उनको पेमेंट में दिक्कत होती है। क्या सरकार ऐसी व्यवस्था करेगी कि जो अच्छी है कंपनियाँ दवाएं बनाती हैं उनकी दवाएं सीधी मिलें सीधा पेमेंट हो, और सही दवा लोगों को मिल सके ? क्या मंत्री जी ऐसा बोर्ड बनाने का विचार स्वास्थ्य मंत्री जी के साथ करेंगे ? एलोपैथी में ऐसी दवाएं हैं नहीं जो कि आयुर्वेद में हैं। क्या वे इस बारे में अध्यक्ष महोदय के साथ बैठकर विचार करेंगे कि अधिकारियों और कंपनियों की मिलीभगत से काम होता नहीं है।

रसायन और उर्वरक मंत्री (श्री वसन्त

साठे) : मैं सदस्य के विचार से पूर्णतया सहमत हूँ।

श्री काली चरण शर्मा : यह 100 परसेंट सही है।

श्री वसन्त साठे : केवल उनके साथ ही नहीं, अध्यक्ष महोदय के साथ भी इस विषय पर विचार-विमर्श करेंगे क्योंकि मैं स्वयं इसमें दिलचस्पी रखता हूँ।

श्री काली चरण शर्मा : दोनों मंत्री मिलकर करेंगे ?

श्री वसन्त साठे : सबके साथ, जो इसमें रुचि रखते हैं, उनके साथ मिलकर बात करेंगे।

अध्यक्ष महोदय : मेरे साथ विचार करेंगे तो सुखी रहेंगे।

अध्यक्ष महोदय : श्री राजनाथ सोनकर शास्त्री।

श्री राम विलास पासवान : शास्त्री जी सप्लीमेंटरी नहीं पृष्ठ सकेंगे।

श्री राजनाथ सोनकर शास्त्री : प्रश्न सं० 192.

उर्वरक कारखानों के कर्मचारियों के वेतनमानों में संशोधन

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*192. श्री राजनाथ सोनकर शास्त्री :
श्री जगपाल सिंह :

क्या रसायन और उर्वरक मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या यह सच है कि सरकारी क्षेत्र के पांच उर्वरक कारखानों के कर्मचारियों के