(व्यवधान)

ग्रध्यक्ष महोदय: आप बैठ जाइए । किसी के खिलाफ़ कोई सन्सर नहीं है।

PROF. SAIFUDDIN SOZ.: Sir, his logic was wrong. He did not allow Mr. Shastri because he was the second man from his party. Whereas I had given notice and also wanted to represent my party. He did not give me opportunity. (Interruptions)

MR. SPEAKER: There is no question of logic here. Please sit down. Nothing will go on record without my permission.

(Interruptions) **

SHRI ERA ANBARASU : Sir, 12,000 Tamilians have been rendered hom eless in Sri Lanka. Ask the Red Cross to take up relief work there.

(Interruptions) **

(Interruptions)**

MR. SPEAKER: Not allowed; nothing goes on record. Please sit down.

SHRI C. T. DHANDAPANI : I would submit that the party leaders in Tamil Nadu have given a call to observe independence day as a mourning day. It is not new to Indian politics. Even the former Chief Minister, Shri B. C. Roy, belonging to the Congress Party once gave a call to the people of West Bengal to observe the independence day as a mourning day on a particular occasion (Interruptions)

MR. SPEAKER: I want to say one thing. This is a party politics which you can do outside. Neither I subscribe to his views nor to yours. I am not going to appeal to any party members this way or that way. It is their business. You all sit down; we have already decided.

SUBRAMANIAM SWAMY: Have you changed the direction of the agenda? It looks like zero hour.

MR. SPEAKER: I have not changed anything except that I have been forced to do

SHRI K. MAYATHEVAR: We are grateful to you for giving permission to discuss this matter on the 21st, but it is too late. Everything has been destroyed; only five buildings are left (Interruptions).

MR SPEAKER: I have done it; I did not do it on my own. You were a party to that. I did it according to what you wished

ORAL ANSWERS TO QUESTIONS

Reduction in the Prices of Drugs

SHRI KA, RAJAN; Will the Minister of CHEMICALS AND FERTILI-ZERS be pleased to state:

- (a) whether prices of seven drugs have been reduced by Government; and
- (b) if so, the names thereof and extent of reduction in the price of each drug?

THE MINISTER OF CHEMICALS AND FERTILIZERS (SHRI VASANT SATHE): (a) and (b) A Statement is laid on the Table of the Lok Sabha.

Statement

(a) and (b) From 1st January 1984 to 31st July, 1984 the prices of four bulk drugs and 17 major formulations were reduced.

^{**}Not to be recorded.

3.

4.

Rifampicin Capsules

— do —

150mg/Capsule

Annexure-I attached shows the names of these bulk drugs and formulations along with the extent of price reduction. In addition, IDPL have also recently reduced the prices of 7 formulations. Annexure-II attached shows the names of these formulations along with price reduction.

Annexure-I

Details of Bulk Drugs and Formulations whose Prices Have Been Reduced After January 1984 to 31st July 1984

		31st July 198	4			
SI. Name of the bulk drug/ No. formulation		Earlier price Rs./Kg.		Revised price Rs./Kg.	Extent of reduction Rs./Kg.	
1	2	3		4	5	
BUI	K DRUGS					
I. Sulp	hamoxole	269.88		235.23	34.65	
2. Salb	outamol	35.65/gm.		19.63 gm.	16.02	
3. Chlo	oramphenicol Palmitate	806.00		733.00	73.00	
4. Etha	ambutol	750.00		681.00	69.00	
FOR	RMULATIONS					
	e of the ulation	Pack Size	Earliear price Rs.	Revised Price Rs.	Percentage reduction	
	picillin Trihydrate Syrup 250mg/ml.	40 ml. bottle	13.16	11.74	(-=) 10.79	
2. Nep	proxin Tabs-250mg/tab.	10's strip	20,24	14.50	() 28.36	

100's bottle

4's strip/

bottle

99.68

4.98

83.88

4.32

(-) 15 85

(-) 13.25

Oral Answers

1	2	3	4	5	6 ·
5.	Rifampicin Capsules 150mg/Capsule	12's bottle	12.76	10.86	(—) 14.89
6.	Rifampicin Capsules 300mg/Capsule	4,s bottle/ strip	8.28	7.02	(-) 15.22
7.	— do —	100's bottle/ strip	183.10	151.50	(—) 17,26
8.	Rifampicin Capsules 450mg/capsule	3's strip	8.16	6.73	(—) 17.52
9.	Trimethoprim+Sulphametho- xazole 40mg+200mg/5ml.	50 ml. bottle	6.16	6.02	() 2,27
10.	- do $-$ tabs $.80+400$ mg.	10×10 's	61.20	51 08	(—) 16.54
11.	Fluocort Ointment	15 gm. tube	7.35	3.91	(—) 46.80
12.	Fluocort N Skin Ointment	5 gm. tube	3.00	1.85	(—) 38 38
13.	— do —	15 gm, tube	18.18	3.77	(—) 53.91
14.	Fluocort H Ointment	5 gm, tube	7.92	2.91	(-) 63,26
15.	— do —	15 gm. tube	21.94	6.97	(—) 68.23
16.	Fluocort Skin Lotion 0.025%	15 ml, bottle	4.42	2.60	·(-) 41.18
17.	Fluocort Skin Lotion 0.025%	15 gm. tube	7.40	3.26	(-) 55.95

AUGUST 14, 1984

Annexure-II

Indian Drugs de Pharmaceuticals Limited (Corporate Office)

Statement Showing Reduction in Prices

SI.	Products	Packing	Existing Price Reduced Price		Extent of Reduction	
140	****		for Stockists and Hospitals (Rs.)	for Stockists and Hospitals (Rs.)	for Stockists and Hospitals (Rs.)	
1	2	3	4	5	6	
1.	Benzyl Penicillin Sodium salt IP 5 Lac IU		1.72	1.50	0.22 (12.79%)	

1	2	3	4	5	6		
2.	Benzyl Penicillin Sodium Salt IP 10 lac IU	1 vial	2.37	2.10	0.27 (11.39%)		
3.	Fortified Procain Benzyl Pencillin 4 lac IU	1 vial	1.57	1.35	0.22 (14%)		
4.	Tetracycline Caps. 250 mg.	10×10	41.48* 40.30**	35,00	6.48* (15.62%) 5.30**		
5.	Tetracycline Caps.	1000's	383.10* 320.75**	290,00	93.10* (24.30%) 30.75**		
6.	OTCIM Injection (Oxy, Tetracycline (Inj.)	10 ml	3,12	2.80	0.32 (10.25%)		
7.	Idimox Caps. 250mg. (Amoxycillim Caps.)	3's	4.96	4.50	0.46 (9.27%)		

^{*}Stockists

SHRIKA.RAJAN: According to the statement made by the hon. Minister, the prices of certain bulk drugs have been reduced to the extent of Rs.34.65 to Rs.69.00 per kg. and those of certain formulations have been reduced to the extent of 10.79 per cent to 55.95 per cent during the period from Ist January, 1984 to 31st July, 1984. As you know, the availability of essential drugs has become a big problem in this country. It is not only the question of scarcity of essential drugs, it is the question of price also, which is beyond the reach of a common man. It is common knowledge that a large number of drug units do not devote even 20 per cent of their capacity to the production of essential drugs.

Nearly 80 to 90 per cent of output of foreign drugs companies consists of simple household remedies and vitamin preparations, because they get a high profit margin for

these products. I would like to know from the hon. Minister whether instead of just piecemeal measures for reduction in the prices of essential drugs, he could bring in comprehensive measures regarding the whole drug affair. On July 19, in Hyderabad he made an announcement, in which, while expressing serious concern about the non-availability of drugs, he stated that he is going to bring a new policy whereby medicines for the masses would be aviilable at cheap rates. I would like to know from the hon. Minister as to what is the comprehensive policy which he has proposed to bring in. What concrete steps is he going to take to see that people get free medicines and essential drugs at cheap rates?

SHRI VASANT SATHE: As far as the present question is concerned, there is a slight confusion. The prices of the 7 drugs announced, were the prices of what is

^{**}Institution

known as ex-factory prices. This goes to the stockists or to the hospitals. But the stockists have their margin which they add to the prices, and that is 20 per cent. And then only the prices, come to the consumers. Therefore, as far as consumer is concerned, the price that was reduced also is prorata reflected in the consumer prices. Therefore, now there is no confusion as far as this part is concerned. The figure that was given by me is different from the figure that appeared in newspapers. The difference is because of the stockists' commission. So, the factual thing is that.

On the larger question Sir, we are present following the Drug Policy of 1978, where according to different categories of drugs, the BICP recommend the prices according to costings that come to their notice and prices are either reduced or increased according to the BICP's recommendations. Therefore, on every occasion when this report comes, the prices get reduced or increased. We cannot have a general policy of fixing the prices permanently. Otherwise there will be no possibility either of reduction or of increase.

Now Sir, in the new drug policy that is on the anvil, we are likely to get the report of the Steering Committee in a day or two. After that it will come to the National Drug Council. Then I will be able to come before the Parliament and present you the drug policy, the object of which is to ensure production of essential drugs for the masses and also ensure its quality.

shrik. A. Rajan: Unfortunately, there is little correlation between the disease pattern in the country and the types of drugs manufactured. If you look at the statistics as such, in a way, the multi-national companies are responsible for this state of affairs. According to one estimation, 30 per cent of the world's leprosy patients are in India and 10 million people suffer from tuberculosis. But what is the pattern of production? In contrast, vitamins, tonics and anti-biotics account to 47.3 per cent of the production. I would like to just remind the hon. Minister to see the correlation.

Unless he takes some concrete steps, taking the whole pattern into consideration, unless the multinational companies are brought to follow a pattern which is conductive to the health of the people, the situation is going to be worse. I would like to know as to what the Minister's thinking is on this behalf.

SHRI VASANT SATHE: Our thinking is that drugs which are essent all for diseases like TB and leprosy, their production must be encouraged and increased indigenously. If necessary we should also import the drugs which we do not manufacture to meet the need of these drugs.

We are encouraging the production of drugs like Rifampicin which is useful both as an anti-TB and anti-leprosy drug. We are encouraging its production. I may inform the House that we have recently reduced the price of this anti-TB and anti-leprosy drugs substantially.

SHRI CHANDRAJIT YADAV: 1 think that the Government has realized this fact that during the last few years, the prices of essential drugs have really increased to a very great extent. In order that the essential drugs are available to the people, prices of certain drugs have been reduced. But to-day, it is a fact that the common masses have to suffer a lot because of continuous rise in the prices of drugs. They are speaking only about essential drugs like anti-TB and anti-leprosy ones. The prices of medicines which the common people are using for fever, cold etc. and vitamins are continuously rising; and they are not available to the common man inspite of Government's best intentions. Does the Government consider that a time has now come when there should be a national health instrince policy so, that common people are insured not only for 56 or 7 essential drugs which they have categorized, but for those essential medicines which the common people are using to-day? Will the Government give consideration to this suggestion?

SHRI VASANT SATHE: As far as the question of price increase in the field of

drugs, as against the cost index of other articles is concerned, the position actually is that the price index of drugs and medicines from 1979-80 to 1982-83 increased from 135.2 to 176, whereas the price index of all commodities, taken together, increased from 217 to 288. So, as far as drugs and medicines are concerned, it cannot be said that they have increased in proportion to the general price index. (Interruptions) The base is the same: 1970-71: 100. (Interruptions).

As far as the general policy is concerned, this suggestion about insurance mainly concerns Health Ministry. But I agree that the matter should be taken into consideration. To-day, a large number of patients are treated under various health insurance schemes, like industrial workers etc. They are getting some benefit, but whether for the general public if any such scheme can be introduced, is a matter which deserves consideration.

PROF. P.J. KURIEN: There are reports in the Press about drugs which are banned in Western countries, especially U.S. but being introduced in our country. This is creating very serious health problems to the people who are using them. Has the Minister seen such reports? Has he taken note of them? If so, does he propose to take some action on it?

SHRI VASANT SATHE: This again is a question for the Health Ministry, because I do not control the drugs. I do not know whether they should be used, and whether they are health hazards or not. Therefore, it would be better if the hon. Member directs this question to the Minister of Health.

PROF. PJ KURIEN: Your Ministry should look into this and find out whether these drugs can be used here or not.

SHRI VASANT SATHE: I am sorry, I won't be able to help you.

DR. KRUPASINDHU BHOI: I congratulate the Minister for reducing the

prices of these drugs. What is the percentage of reduction of vitamins like Refamecin. Themibatal, Pynadinamide, and I.N.H. the cost varies from Rs 15 to Rs 21 ? Is he importing all these bulk drugs? Has he instructed any research agency to go into the details of this matter and produce the bulk drugs and investigate whether these can be made available in India so that the prices can be reduced to the maximum extent possible, according to the 20 point programme and the Alma Ata Declaration signed by the Prime Minister for 2000 AD and had been incorporated in the 20-point programme? What about T.B. and leprosy no. 13 and 14 health for all?

SHRI VASANT SATHE: I thank the hon, member for this suggestion. We will consider it.

SHRI SUNIL MAITRA: If the consumer price index based on the food articles is more than 40 per cent, what is the composition of these drugs indices and what is the weightage of essential drugs meaning thereby life saving drugs in the indices of drugs?

SHRI VASANT SATHE: I do not have the information what is the basis. I go by the base year of the index: that is government figure. I want to know what is the package, etc.?

श्री नीलाभाई: अध्यक्ष महोदय, मैं जानना चाहता हूं कि सरकार ने 1970 से लेकर अब तक जूग नीति में परिवर्तन वयों नहीं किया। दूसरा प्रश्न मेरा यह है कि भारतीय चिकित्सा। पढ़ित से बनाई जाने वाली दवाइयों का उपयोग बढ़ाने की दृष्टि से सरकार क्या कार्यवाही कर रही है, या उनको बढ़ावा नहीं देना चाहती।

श्राव्यक्ष म_ोदयः यह तो हैल्थ मिनिस्ट्री बतायेगी।

श्री वसन्त साठे: जहां तक ड्रग नीति में परिवर्तन का सम्बन्ध है, कोई भी नीति एकदम से एक या दो सालों में तो परिवर्तित नहीं हो सकती। उस के लिए देखना है कि अमुक दवाई का क्या असर है, तीन-चार साल उसको देखा जाता है। फिर मैंने पहले ही कहा कि नई ड्रग नीति लाने के लिए हमने नेशनल ड्रग कौसिल बनाई है, जिसमें सारी इंडस्ट्रीज और इस लाइन में विद्वान लोगों को लिया गया है। उनकी सलाह पर ही हम नई पौलिसी बनायेंगे। मैं इस बात से भी सहमत हूं कि भारतीय चिकित्सा पद्धित भी देश के लिए निहायत उपयोगी और आवश्यक है और उसको भी बढ़ाना चाहिए और हमारा यह प्रयास है कि उनको भी बढ़ाया जाए।

फ़िल्मों में छोटे बच्चों की मूमिकाएं

*335 श्री दलीप सिंह भूरिया: क्या सूचना और प्रसारण मंत्री यह बताने की कृपा करेंगे कि:

- (क) क्या सरकार को इस बात की जान-कारी है कि छोटे बच्चों को फिल्-ों में अभिनय करने के लिए भूमिकायें दी जा रही हैं;
- (ख) क्या इससे फिल्मों को देखने वाले बच्चों पर बुरा प्रभाव पड़ता है; और
- (ग) क्या सरकार इस प्रवृत्ति की रोकने के लिए कोई उपाय करने का विचार है?

THE MINISTER OF STATE OF THE MINISTRY OF INFORMATION AND BROADCASTING AND MINISTER OF STATE IN THE DEPARTMENT OF PARLIAMENTARY AFFAIRS (SHRI H.K.L. BHAGAT): (a) and (b) Yes, Sir, children of different ages are given roles for acting in some films. The mere fact that children have acted in films is not likely to

create bad impression on children seeing films. The films, however, do have a tendency to affect the impressionable minds.

(c) No Governmental measures are considered necessary.

श्री दलीप सिंह भरिया : अध्यक्ष महोदय, माननीय मंत्री जी ने अपने उत्तर के लास्ट में कहा है कि फिल्में देखने वाले बच्चों पर बरा प्रभाव पड़ने की संभावना नहीं है। तथापि फिल्मों में संवेदनशील मस्तिष्कों को प्रभावित करने की प्रवृत्ति अवश्य होती है। मैं इस सम्बन्ध में माननीय मंत्री जी से जानना चाहुंगा कि किसी फिल्म में अगर बच्चे जेब काटते दिखाये जायें, किसी फिल्म में बच्चों को भीख मांगते दिखाया जाए, यदि हमारे बच्चे इस तरह के बरे कामों में ज ते हैं, किसी का मर्डर करने में जाते हैं, किसी झगड़े में शामिल हो जाते हैं, तो इस तरह के कृत्यों का क्या हमारे देश के छोटे बच्चों पर असर नहीं पड़ता, उससे पढ़ने वाले बच्चे प्रभावित नहीं होते । उनके अंदर भी ऐसे कामों को करने की प्रवृत्ति बढ़ती जा रही है। इस प्रवृति को रोकने के लिए सरकार वया कार्यवाही करने जा रही है। मंत्रीजी ने कहा कि मस्तिष्क ठीक होता है, लेकिन मैं नहीं समझता कि उनका मस्तिष्क कैसे ठीक होता है, जब कि वे बुरे काम करने लग जाते हैं बूरे कामों को रोकने के लिए बहुत सी किताबों में भी और अखबारों तक में कई ऐसे लेख छपते हैं, जिनको पढ़कर हमारे बच्चे बिगड़ते जा रहे हैं। इसकी रोकथाम के लिए मंत्री जी ने का कार्यवाही की, मैं उसके सम्बन्ध में जानना चाहता हूं। उसके कारण हमारे बच्चे बिगड़ते जा रहे हैं उसकी रोकथाम के लिए मंत्री महोदय ने क्या क र्यवाही की है यह में जानना चाहता हूं ?

श्री एच.के.एल. मगत: अपने प्रश्न के उत्तर में मैंने स्बीकार किया है कि फिल्मों का