

complicated special cases admitted in the hospital. If so, will the Government take immediate measures to divert ordinary cases to other hospitals and also advise the State Government to have at least one super speciality wing in each city so that complicated cases requiring immediate attention are looked after well as dilution of the super hospitals will seriously affect all such serious diseases?

SHRI S. KRISHNA KUMAR : Sir, the difficulties of making this Institute a strictly referral hospital were earlier stated by me. About 30 per cent of the people came from outside Delhi and even within Delhi the people have the habit of visiting one hospital after the other. Almost 33 per cent of patients come to AIIMS after visiting at least two hospitals. This is the finding of a study. This is public issue. The public will be put to inconvenience. However, the suggestions of the hon. Member will be considered.

Supply of medicines for C.G.H.S. dispensaries

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*265. **SHRI BANWARI LAL BAIKWA :**

SHRI VIJAY N. PATIL :

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

(a) the budget provision for purchase of medicines for all systems of medicines for C.G.H.S. during 1985-86;

(b) how much actual expenditure has been incurred during the first nine months of 1985-86;

(c) the reasons for short supply of medicines in the C.G.H.S. dispensaries; and

(d) what remedial steps Government propose to take to meet such shortages of medicines?

THE DEPUTY MINISTER IN THE DEPARTMENT OF FAMILY WELFARE

(SHRI S. KRISHNA KUMAR) : (a) and (b) The budget provision for purchase of medicines of all systems for CGHS and actual expenditure incurred during the first nine months of 1985-86 is as under :—

Budget prov. 1985-86	Expenditure upto Dec., 1985
13,49,27,000/-	6,05,18,900/-

(c) and (d) CGHS is procuring all its medicines included in the CGHS Formulary from the Medical Store Organisation. By and large, the drugs and medicine listed in the CGHS Formulary are available in the dispensaries. In the event of non-availability of any specific medicine the same is procured from authorised Local Chemists M/s. Super Bazar and supplied to the Beneficiaries.

[Translation]

SHRI BANWARI LAL BAIKWA : The hon. Minister has replied to the question in a strange manner. He has not stated as to how many systems of medicine are being practised and how many medicines they are purchasing under different systems separately. The budget provision for purchase of medicines of all systems was rupees thirteen crores forty nine lakhs and twenty seven thousands and during the period of nine months they have purchased medicines worth rupees six crores five lakhs eighteen thousand and nine hundred only and thus an amount of Rs. 7.5 crores has been left for the remaining three months. I would like to know whether during this period the incidence of diseases has fallen leading to a lower demand for medicines or the medicines have become cheaper? They do have the medicines, but the funds have not been spent?

One thing I want to know, especially, is that the cases of reaction of allopathic medicines have become very common nowadays. The nature of these complaints is that the reaction takes place abruptly leaving no time for providing alternative medical facility.

MR. SPEAKER : You should take Ayurvedic medicines.

SHRI BANWARI LAL BAIRWA : *Hikmat* (Unani) is one such system of medicine which has no danger of any reaction, but there is no provision for its medicines under C.G.H.S. May I know the reasons therefor?

[English]

SHRI S. KRISHNA KUMAR : As regards the first supplementary, though the budget provision is for about Rs. 13.5 crores, only about Rs. 6 crores have been spent. This is only an accounting figure. There is a time lag between the use of medicines and the payment. I would like to assure the hon. Member that not only the budget provision would be fully spent by the end of the year, the expenditure is likely to exceed by Rs. 3 to 4 crores.

Secondly, there are very specific areas of demarcation within various systems of medicine depending on the diseases and therapeutic efficiency of the method and we have almost all the medicines. In allopathy 87 per cent of the medicines are available with us; in homeopathy 97 per cent, in Ayurvedic 95 per cent and in Unani 56.5 per cent. We are giving equal importance to all the systems of medicine to the extent to which they are relevant.

[Translation]

SHRI BANWARI LAL BAIRWA : I want to know the quantum of medicines purchased from foreign companies and that from the local companies separately?

[English]

SHRI S. KRISHNA KUMAR : There is a regular system of purchase through the Government Medical Stores and there is a prescribed procedure; they follow the DGSD rules. There is procedure for the registration of firms. Quality is checked. Also, hundred per cent quality test is done before the medicines are distributed to the CGHS dispensaries.

[Translation]

DR. PRABHAT KUMAR MISHRA : Through you, I would like to draw the attention of the hon. Minister to the fact that the number of cases of reaction on administration of medicines is high because the medicines purchased by the C.G.H.S. are not scientifically approved by the pharmaceutical concerns. As stated by you, more and more people are taking to Ayurvedic medicines because the incidence of reaction in the case of allopathic medicines is more. I would like to know if Government have any pharmacy of its own which can supply quality medicines so that the medicines accordingly to the prescribed norms could be made available to the people? I would also like to know whether the Medicines are purchased according to a set procedure and under some norms or whether these can be purchased from any medicine shop or pharmaceutical concern?

[English]

SHRI S. KRISHNA KUMAR : Sir, there is a Committee under the chairmanship of the Director General of Health Services in which specialists are included and they purchase the medicines after a great deal of technical deliberations. The insinuations are too general. If there is any spurious or sub-standard medicine in any dispensary, we will take not only corrective but also disciplinary action.

[Translation]

SHRI MOOL CHAND DAGA : Thank you for giving the name of the company and for setting up a committee. Now kindly tell whether medicines are not purchased from sub-standard companies for profiteering in spite of the fact that the quality medicines are available from the Standard Companies? It is not because of this that reaction takes place? Have you ever conducted any inquiry into it? It is a general complaint that though medicines in sufficient quantities are available with the standard companies, you do not make purchases from them just to earn profit.

Secondly, I would like to know the

composition of your committee and the names of its Members ?

SHRIMATI MOHSINA KIDWAI : I shall send the complete list of the companies to the hon. Member. The Committee is headed by the Director General with some doctors as its members. If Ayurvedic medicines are purchased, it is done on the advice of a panel of advisers. Similarly, there are advisers for Unani medicines also.

Medicines are purchased from standard companies registered with us. If you could give me a specific case, then I can tell you what was the reaction, it cannot be explained in general.

SHRIMATI KRISHNA SAHI : When she was not the Minister she was also of the view that the medicines were sub-standard.

MR. SPEAKER : Has she become inactive after becoming the Minister ?

SHRIMATI KRISHNA SAHI : Mr. Speaker, Sir, I have a medicine with me which carries no name on it. We are given thousands of such tablets from C.G.H.S. Dispensary, P.H. Annexe which carry no names on them. It is a fact. We complain there that it is wrong, but nothing happens. We complete the formality of discussing the matter here. I want to know whether the hon. Minister is aware that tablets carrying no names on them are given ? How dangerous it would be if such a tablet gets mixed up with some other tablets at home ! Will the hon. Minister make such an arrangement whereby only those tablets which carry their names on them are only issued from the dispensaries ?

SHRIMATI MOHSINA KIDWAI : The hon. Member's has asked a very good question. I want to tell her that when I assumed charge of my Ministry I had also raised this point that it was not proper to issue medicines which did not carry their names on them and that only those medicines should be issued which carry their names on them because it is not proper to issue medicine which neither carry its name on it nor any date of expiry. How can the

patient know about the date of its expiry. We have decided that most of the medicines should be issued in packages which have the date of expiry etc. on it.

PROF. MADHU DANDAVATE : Expiry date of the tablet or the patient ?

SHRIMATI MOHSINA KIDWAI : Why should the hon. Member say so ? Now, out of 93 items, we are issuing 46 items in sealed packages so that the patients could know about its date of expiry, etc. and they could get proper medicines. Some medicines are issued without any package. The second point raised by the hon. Member was about the standard medicines. In this regard, I would like to say that whenever such complaints are received, they are inquired into and every effort is made to ensure that such medicines do not find their way to C.G.H.S. dispensaries.

(Interruptions)

[English]

SHRI DINESH GOSWAMI : The hon. Minister has stated that instructions have been issued that only sealed medicines should be maintained. But even now, the dispensaries are keeping the medicines in a very disorderly manner and we have all experiences that after purchasing medicines from these C.G.H.S. dispensaries, later on we have to go to an approved medical chemist to get medicines. Therefore, may I know when these instructions are going to be effected because I do not think that the instructions have been properly effected as yet ?

SHRIMATI MOHSINA KIDWAI : Sir, from this year, we have instructed all the dispensaries that they should purchase only the sealed medicines. So you will get them in strips—the tablets.

(Interruptions)

[Translation]

SHRI P. NAMGYAL : Mr. Speaker, Sir, this is a fact that medicines are not available even for the M.P.s. and I can prove it. One has to take 4 to 5 rounds

to get medicines.

MR. SPEAKER : They are scared of it lest the medicine should produce reaction; that is why they do not issue medicines.

SHRI RAJ KUMAR RAI : Sir, even the M.Ps. do not get medicines so much so that many a times I have to go to Lucknow to get medicines.

MR. SPEAKER : Do you want that we should fall sick in Lucknow.

(Interruptions)

MR. SPEAKER : Enough of it; it is over now.

[English]

Allocation for Education in Seventh Plan

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*267. SHRI SOMNATH RATH :

SHRI N. VENKATA RATNAM:

Will the Minister of HUMAN RESOURCE DEVELOPMENT be pleased to state :

(a) whether the Education Ministers of Andhra Pradesh and Orissa asked for 15 per cent of the Education Budget in the Seventh Plan;

(b) the percentage of allocation made for these States; and

(c) what are the percentages of provision for Education made for other States, and the basis for higher/lower percentage in the case of these States ?

THE MINISTER OF STATE IN THE DEPARTMENTS OF EDUCATION AND CULTURE (SHRIMATI SUSHILA ROHATGI): (a) At the Conference of State Education Ministers held at New Delhi on January 23rd & 24th 1966, the Education Minister of Andhra Pradesh made a plea to the Centre to earmark at least 15% of its Budget on education.

(b) Outlays for education in the State plans of Andhra Pradesh and Orissa are 4.0 per cent and 6.5 per cent respectively of the total State Plan outlays for the Seventh Plan period.

(c) A statement showing percentages of the provisions for education made by the states is given below. State Plan provisions for education and other sectors are determined by the Planning Commission, in consultation with the States, in the light of available resource and the relative inter-sectoral priorities.

Statement

Percentage of Budget Quality on education of State Government

State	Percentage of allocation for Education in the total State Plan in Seventh Five Year Plan.
1. Andhra Pradesh	4.01
2. Assam	9.52
3. Bihar	6.29
4. Gujarat	1.75
5. Haryana	5.56
6. Himachal Pradesh	6.16
7. Jammu & Kashmir	5.90
8. Karnataka	3.71
9. Kerala	3.48
10. Madhya Pradesh	3.03
11. Maharashtra	3.09
12. Manipur	8.63
13. Meghalaya	7.50
14. Nagaland	6.50
15. Orissa	6.50
16. Punjab	3.41
17. Rajasthan	7.21
18. Sikkim	12.18
19. Tamil Nadu	5.35
20. Tripura	6.74
21. Uttar Pradesh	3.18
22. West Bengal	7.76