

**DR CHANDRA SHEKHAR TRIPATHI:** More than a decade earlier, authorities on medicine, Dr Goodman and Gill Man had recommended to the world that no combined therapy should be encouraged any more. But I am sorry to say that in our country, most of the analgesic pain removing drugs, cold drugs and other drugs are still manufactured on the basis of combined therapy; they are having so many ingredients. Once a patient takes a drug, it becomes very difficult to detect from which ingredient the reaction has taken place. Why is the Government still encouraging manufacture of combined drugs in the country in spite of the recommendations made by an authority on drugs?

**SHRI P.V. NARASIMHA RAO:** I do not know that. I have got authorities by the dozens here with me; I have got articles and I have got magazines in which these things have been gone into. A number of countries, almost all countries in the world, are manufacturing these things and marketing these things. They have been used as pain killers. We know pain killers have been in this country for as long as we remember. If some medical authority has found that this is not correct, the overwhelming opinion in the whole world is that it is being used and it has been found to be rational in the sense that if there are three ingredients in a particular cold preparation this is because there is no specific treatment for cold. Cold formula has two or three ingredients. One is for fever, another for congestion. If three ingredients are combined in order to meet each of these three complaints and made into a capsule or a tablet, I do not see anything irrational; it is totally rational.

**SHRI HAROQBHAI MEHTA:** Sometimes when the Government is not alert, on the report of the Drug Controller, some combinations are banned or prohibited. Courts are giving stay orders with the result that the dealers are meanwhile free to sell those combinations. Is the Health Ministry

aware of such cases where courts have stayed Government orders banning such combinations and whether the Health Ministry has taken up the matter with the Law Ministry in order to shut out court jurisdiction from such health matters so that the court ceases to play with the health of the people.

**SHRI P.V. NARASIMHA RAO:** It is a very difficult and generalized question. It is a fact that courts give stay orders. It is also a fact that when a stay order is given against the Government decision, Government takes all possible steps expeditiously to see that those orders are vacated. It is also a fact that sometimes the orders are not vacated. Finally, if the court decision is against the Government, we have to fall in line with the court decision.

#### **Research on Utility and Efficacy of Tribal Herbs**

\* 398. **SHRI BALWANT SINGH RAMMOOWALIA †:**  
**DR. CHINTA MOHAN:**

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

(a) the results of the research conducted by various organisations on the utility and efficacy of tribal herbs and extracts of plants in the treatment and cure of different diseases; and

(b) the steps taken by Government to see that these herbs and plants or medicines based on them reach common people to alleviate sufferings?

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE):** (a) and (b). There is no separate category of tribal herbs. Many herbs used in Indian Systems of Medicine are also used by tribals in their areas. However, there are certain

herbs which are used by tribals but not much known in various systems of medicine. No large scale survey has been conducted on the drugs used specifically by tribals on all India basis. However, several agencies are carrying out studies on different aspects of medicinal plants being used by tribal population.

[*Translation*]

SHRI BALWANT SINGH RAMOOWALIA: Mr. Speaker, Sir, through you I would like to point out that....

MR. SPEAKER: Shri Ramoowalia looks very cheerful today.

SHRI BALWANT SINGH RAMOOWALIA: May I resume my seat, Sir. I only wanted to point out this much that the hon. Minister is not giving correct information. She has replied that -

[*English*]

"No large scale survey has been conducted on the drugs used specifically by tribals on all India basis."

[*Translation*]

This reply is before you. the fact is that -

[*English*]

There is an All India Co-ordinated Research Programme which is doing research. There is one laboratory at Jammu.

[*Translation*]

It is undertaking research work and there are 15 centres in the country. The co-ordinator is stationed at Jammu. There are centres at Lucknow and several other

places. A centre has been opened in Madhya Pradesh. I shall come to the main point later. First I would like to know the reason for giving such a vague reply? A lot is being done for the tribals and then why did the hon. Minister give this reply?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT AND THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI P.V. NARASIMHARAO): He is already confused. There is no question of confusing him further. The question is that.....

[*English*]

In the reply, it is stated:

"No large scale survey has been conducted on the drugs used specifically by the tribals on an All India basis. "This is the crucial sentence. It is in the nature of things impossible to have an All India survey as such because local names differ, local herbs differ and even the quality also differs depending on the quality of land where they grow. For instance, in Srisailam, it is said that we have medicinal herbs which are not found anywhere else in India. Therefore, to have a survey of these drugs on an All India basis and do research is not feasible. What is possible on a regional and local basis is being done. Maybe at some point of time we have to consolidate all this and prepare a literature, a full All India Literature, on the subject. Whatever is being done by the All India Co-ordinated Research Project on Ethno-Biology, is under the Ministry of Environment. This is not only about the drugs or herbs, but it is a total research programme about their habits, their language, about their diseases, may be about their ways of thinking, the social and economic factors. This is a much wider thing which they are undertaking in which there is an element of drugs and herbs also. But specifically on drugs and herbs, nothing has been so far

attempted on an All India basis. What has been attempted and what has been going on quite successfully is, regionally wherever you find such areas some agency goes there and does research there.

[*Translation*]

SHRI V. TULSIRAM: Mr. Speaker, Sir, just now the hon. Minister has given a reply to Q.no. 396 regarding allopathic medicines. Secondly, this question indicates that the Government is conducting research in Ayurveda. The medicines based on the herbs available in tribal areas are not harmful. Even if the patients do not get treated by those preparations they are in no way harmful to the patients. They have no side effects. Is the Government preparing any scheme to make good quality herbal medicines easily available to the common people in small villages?

Mr. Speaker, Sir, is it a fact that we are troubling you and that is why the hon. Minister is getting prepared such tablets by consuming which we will remain in our residences and will not trouble you? Is it a fact that such tablets are being manufactured?  
(*Interruptions*)

If you cannot furnish any reply about the tablets, you may please reply my first question.

SHRI BHAGWAT JHA AZAD: If you cannot reply about the tablets, you may please reply to the question.

[*English*]

SHRI P.V. NARASIMHA RAO: Sir, I would like to take this opportunity to inform the House that there is a very good programme undertaken by the Central Council for Research in Ayurveda and Siddha. Naturally, the subject falls in their purview because in Ayurveda, there are many prepara-

tions and medicines which are herbal based. There are eight tribal health care research units under the Central Council for Research in Ayurveda and Siddha and I can give the names of the places where these units are located. They are doing very good work in most of the diseases which are found in those areas including malaria, which is called 'Vishama Jwara', which of course, is prevalent in other areas also. As I had occasion to inform the House, this research institution has now developed a specific for malaria which has been found to be very successful. It is called 'Ayush-64'. I had occasion to answer a question on this and I am happy to say that this institution is doing very good work not only in the laboratory, but by applying the results of the laboratory, the findings of the laboratory in the field, and particularly in the tribal areas. Now, as I said, they are conducting research in malaria, also on leprosy, on malnutrition - which is very important - on allergic manifestations of the skin disease, on sexually transferred diseases and so on. They are conducting research studies on 'Udara Krimi' that is the worms which are found in the stomach, etc. It is quite a long list of areas in which they are working and this also has a bearing on the tribal areas as well as the herbs and medicines used in the tribal areas.

DR. KRUPASINDHU BHOI: I am very much glad to hear the answer given by the hon. Minister about the research programme in Ayurveda and Siddha medicine. I would like to know whether the Minister is aware of the fact that the Geological Survey of India under the Department of Mines have already surveyed the different geological formations and categorised them into four regions. Will he take cognisance of the regions categorised by the Geological Survey of India because in different geological formations, different types of herbs are grown?

SHRI P.V. NARASIMHA RAO: Yes Sir. That is possible. I take the information given

by the hon. member and we will see how to coordinate all this knowledge.

**Under utilisation of M.D., M.S.  
Doctors**

\* 399. DR. PRABHAT KUMAR MISHRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the specialized skills of some highly qualified doctors with post-graduate qualifications like M.D., M.S. etc. employed under Delhi Administration are not being utilised in hospitals with indoor facilities but are posted in dispensaries or primary health centres;

(b) if so, the number of such specialists with post-graduate qualifications posted in small dispensaries and primary health centres; and

(c) whether Government propose to review the position so that the specialists services are utilised fully and adequately?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) to (c). As per information given by Delhi Administration, the skills of all the doctors including those possessing post-graduate diplomas or degrees are properly utilised in all subcadres of the Central Health Service. There are 19 doctors of GDMOs sub-cadre, who possess Post-Graduate degrees like M.D., or M.S. and are posted outside the hospitals. For posting of doctors of GDMO's sub-cadre, who may at times possess Post-Graduate diplomas/degrees, a policy has been formulated by Delhi Administration to deploy them in such manner as to ensure balanced medical care to the community. Delhi Administration, has recently framed a policy according to which all GDMOs having Post-Graduate qualifications will be posted in hospitals by rotation.

DR. PRABHAT KUMAR MISHRA: I may kindly be explained about the words 'GDMO' and the 'balanced medical care to the community'. These are the technical words. What is the balanced medical care taken in the hospitals of Delhi Administration?

KUMARI SAROJ KHAPARDE: GDMO means General Duty Medical Officer. As regards balanced medical care...

*(Interruptions)*

Sir, I am not from the medical profession, but still I can answer him. Don't worry. Please have some patience.

PROF. MADHU DANDAVATE: Even the patients must have patience.

KUMARI SAROJ KHAPARDE: Sir, the Delhi Administration has formulated certain transfer policies.

1. All General Duty Medical Officers on joining duty before Secretary (Medical) may be posted in DHS. No representation for being posted in the hospitals may be entertained before such joining.

2. Such General Duty Medical Officers after joining may be allowed to represent for the posting in the hospitals along with their bio-data. A list of all such representations may be maintained by the Medical Department. The total number of vacancies in GDMO may be distributed among the various Medical Institutions in proportion to the number of posts in the institutions.

Sir, this is a long statement. If you say, I can submit to the House.

DR. PRABHAT KUMAR MISHRA: We welcome the posting of Post-Graduate doctors like M.S. or M.D. in the small dispensaries and out-door clinics. But are they sup-