

SHRI V. TULSIRAM: I am proud of it some other chaps call me their father.

[*English*]

SHRI K.S. RAO: The hon. Minister need not feel shy in enquiring into the number of children of the various representatives, no matter whether they are Chief Ministers or Members of Parliament or the Ministers of the Government of India. No amount of discussion in this House or a great oratory on the platform will help solving this problem. Let the leaders of the representatives first implement that scheme. Then the people will automatically realise about it.

[*Translation*]

MR. SPEAKER: The time has passed. Nothing can be done now.

[*English*]

SHRI K.S. RAO: Let him take a stand and make out a list how many people have got how many children so that they will feel guilty and insulting—if it is published—and the rest of the people will follow suit.

MR. SPEAKER: There is nothing to reply.

Eye Polymer Lens

*1073. DR. G. VJAYA RAMA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether a new eye polymer lens has been developed by Soviet Scientists as reported in the Financial Express dated 27 January 1988; if so, the details thereof;

(b) whether similar technology is proposed to be developed or imported in India; if so, the details thereof; and

(c) the annual requirement of such lenses indicating cost involved and how this demand is being met at present in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE AND MINISTER OF CIVIL AVIATION (SHRI MOTILAL VORA): (a) to (c). A Statement is given below.

STATEMENT

The Government is aware of the news items published in Financial Express of 27th January, 1988.

Artificial lenses are used in the eyes as a part of treatment for cataract surgery. New silicon material has been developed in U.S.S.R., U.S.A. and in Europe and is being tested for Intra Ocular Lens implantation.

This technology has not been developed in India or imported so far.

Nearly one million cataract operations are performed in the country every year. Under the existing conditions in our country Intra-Ocular Lens implantation can be taken up for selected individuals who need very high quality vision for their specific jobs and in selected centres only. The cost of lens varies from Rs. 500/- to Rs. 3000/-. At present the I.O.L. are mostly imported either by individuals or agencies or through donations.

DR. G. VJAYA RAMA RAO: This new artificial polymer lens, which is the latest one, is being invented in USSR and USA. It improves vision as well we gives protection to the retina of the eye. The incidence of cataract is more in India than USSR and USA. For the patients who undergo an operation for cataract—later on they require these lenses for implantation in their eyes—in India we require for them this type of Intra-Ocular artificial lenses. Is there any proposal

to develop this technology for Intra-Ocular Artificial Lenses going on for the benefit of rural poor in our country; if not, what are the reasons?

SHRI MOTILAL VORA: These artificial lenses are used in the eyes as a part of treatment for cataract surgery. This technology has not been developed in India or imported so far. After this technology is imported we can think of making use of this technology.

DR. G. VIJAYA RAMA RAO: In the recent past we have got several computerised Systems like computerised telephone, computerised word processing system and computerised braille. Like that, are you proposing any computerised system for improving vision among the blind people in our country?

SHRI MOTILAL VORA: After the import of this technology, we will make the best use of it because about a million people every year go in for operation in our country. So, when this technology is imported in our country, we will definitely make full use of it.

DR. A. KALANIDHI: The Polymer lense is very costly, for implantation into the eyes today and for use in cataract operations. Will the hon. Minister of Health try to use his influence with the Ministry of Finance and get the lense totally free from excise duty so that the lense can be acquired at a cheaper cost and it can be utilised for cataract facilities in India?

SHRI MOTI LAL VORA: This lense is definitely very costly and till such time this technology is not adopted in our country, the question does not arise for the Government to minimise the prevailing rates, the rates are ranging from Rs. 500 to 3000 or so. It all depends when we get this technology in our country and if it is useful as has been experimented in our country, they have not yet

come to a final decision. So, let them come to a final stage and then after that we can come to some conclusion whether it is very useful for our country, because we have to undergo a million operations every year for cataract.

DR. A. KALANIDHI: Can you not get the exemption from excise duty till such time you get the technology imported and improvising it? Why do you not get exemption from excise duty for such type of lenses?

SHRI MOTILAL VORA: I have not gone through it.

Nutritional Studies on the Status of Neglected Tribals

*1073-A. **SHRI C. MADHAV REDDI:** Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether any nutritional studies have been conducted on the status of neglected groups such as tribals and self-employed women in Andhra Pradesh and other States; and

(b) if so, the details thereof and corrective steps taken/proposed?

THE MINISTER OF HEALTH AND FAMILY WELFARE AND MINISTER OF CIVIL AVIATION (SHRI MOTILAL VORA): (a) and (b). Yes, Sir. The National Institute of Nutrition, Hyderabad has carried out surveys in the tribal areas in Andhra Pradesh and some other States. The data indicated a high incidence of mal-nutrition both among children and adults. Bihar studies show that the diet of about 50% families were grossly deficient in calories. Studies in Orissa showed malnutrition in 14.4% cases in children in age group 0-14. The ICDS study in tribal areas among the preschool children has shown severe deorse of malnutrition of 8.1% (1984).