

1. [Fear of duty hike raising drug prices unfounded](#) - The Times of India

The withdrawal of customs duty exemption on 76 drugs has led to a hue and cry with many doctors and multinationals claiming that this would make these life-saving drugs costlier. A closer look suggests the concern is unwarranted as 61 of these are bulk drugs attracting just 5% extra duty, which will translate into a negligible 2-3% increase in the cost of the finished drugs. The remaining 15 are finished drugs and will attract 35% duty, but these have several Indian generic versions selling at a fraction of the imported cost.

1. [Fear of duty hike raising drug prices unfounded](#) - The Times of India
2. [Patient challenges patent on two key HIV drugs](#) – The Times of India
3. [Special 301 review: Indian pharma's bid to allay US concerns over IPR regime](#) – Business Today
4. [Is the removal of import duty waiver on drugs ill-timed?](#) – The Hindu Business Line (Also appeared on Feb 10)
5. [The medical practice should be based on patient's health priorities and not targets: Dr. Satish K. Tiwari](#) – ET Health
6. [Superbug review says more vaccines needed to reduce antibiotic use](#) – Reuters
7. [Make in India is also about Make for India: Nirmala Sitharaman](#) – The Financial Express

Also appeared on [ET Health](#)

2. [Patient challenges patent on two key HIV drugs](#) – The Times of India

Patient suffering with HIV has opposed patent applications for two important HIV medicines, dolutegravir and cabotegravir, thwarting an attempt by ViiV Healthcare (a joint venture by Pfizer and GlaxoSmithKline) to obtain monopoly rights on the drugs, in India.

International medical humanitarian organisation, Medecins Sans Frontieres (MSF) supports these patent oppositions, it said in a statement, adding the company has so far failed to make dolutegravir available in India for patients who have run out of other treatment options. Cabotegravir is still in clinical trials.

ViiV Healthcare acquired exclusive global rights to several integrase inhibitor compounds, including dolutegravir from a Japanese company, Shionogi. The patent application filed jointly by GSK and Shionogi, is at a critical stage of examination before the Kolkata Patent Office. Shionogi receives ongoing royalties and has 10% equity in ViiV Healthcare.

3. [Special 301 review: Indian pharma's bid to allay US concerns over IPR regime](#) – Business Today

On Friday, February 5, 2016, the last date for the making written submissions before the US Trade Representative (USTR), the Indian Pharmaceutical Alliance (IPA) made a representation. This is important as India has so far averted any downgrade under the Special 301 even though the USTR has kept India on a list of countries that present concerns regarding IPR laws.

There is pressure by some sections within the US to downgrade India from 'watch list' to 'Priority foreign country'. Such a downgrade could have trade impact for India as it would mean imports from such countries (that are downgraded) into the US do not enjoy trade preferences.

4. [Is the removal of import duty waiver on drugs ill-timed?](#) – The Hindu Business Line (Also appeared on Feb 10)
Rupal Panchal hopes Prime Minister Modi would do for people with haemophilia what Chief Minister Modi did in Gujarat years ago.

As Gujarat's Chief Minister, Narendra Modi had made a state budgetary allocation for haemophilia, making medicines to treat the blood-disorder more accessible, says Panchal, with the Haemophilia Society. The organisation is now unhappy with a recent government move that adversely affects the supply of two core haemophilia medicines.

Last week, the Centre removed customs duty waivers on 76 imported drugs, ostensibly with an eye on encouraging local producers to 'Make in India'.

The list included cancer and HIV drugs, some of which are locally produced. But, that was not the case with antihæmophilic factor (AHF) concentrate (VIII and IX), that has a single company importing it and two others making it locally.

5. [The medical practice should be based on patient's health priorities and not targets: Dr. Satish K. Tiwari](#) – ET Health
Dr. Satish K. Tiwari, Medico - Legal Consultant, Hirapure Hospital, Amravati, talks to ETHealthworld about the major problems in the healthcare system that is slowly weakening the doctor-patients relationship.

In our country government in most of the states have promoted private medical college. The teachers are not there in the colleges, they are only on the paper and on the day of inspection. If we look at the patients point of view, most doctors are now disposable doctors, they will go to one hospital or doctor in the morning and by the evening if there is no response they feel that this doctor is not competent and they change the doctor. The patient will go on changing the doctor for getting expected result which many times is not possible. The pharma and the doctors are two sides of the same coin and both are interdependent. We agree there has to be some relationship between the pharma and the doctors but again this relationship has to be ethical, unbiased and should work for the benefit of the community and not the company or doctors individually. At present what we are seeing in the community is just the opposite. The doctors and pharma are working for each other and not for the benefit of the community or the patient. Pharma companies try to give inducement to the doctors and the doctors go on writing medicines, vaccines which are not even required.

6. [Superbug review says more vaccines needed to reduce antibiotic use](#) – Reuters
More use of vaccines would reduce the need to use antibiotics and help fight the rise of drug-resistant superbug infections, according to a British government-commissioned review of the threat.

In the latest report on so-called antimicrobial resistance, published on Thursday, the head of the review, British treasury minister Jim O'Neill, said more focus should be put on using existing vaccines and developing new ones.

Vaccines can combat drug resistance because they reduce cases of infection and lessen the need for antibiotics. Any use of antibiotics promotes the development and spread of multi-drug-resistant infections, or superbugs, he said.

7. [Make in India is also about Make for India: Nirmala Sitharaman](#) – The Financial Express
As the government sets out to observe the Make In India week in Mumbai, starting February 13, commerce and industry minister Nirmala Sitharaman says the programme is aimed at promoting manufacturing for both exports and domestic requirements, as opposed to apprehensions from

some quarters that the government may incentivise manufacturing only for outbound shipments. Even RBI governor Raghuram Rajan had in 2014 suggested that only an incentive-driven, export-led growth strategy may not work well for the country in the current context and that Make for India is equally important. Sitharaman says the Centre is working closely with states in ensuring the ease of doing business for which as many as 300 additional issues, including those on environmental clearances and export-import documents, are being addressed. In an interview with Banikinkar Pattanayak, she also affirms that India has a robust intellectual property (IP) rights regime and court verdicts in certain cases have reinforced the government's position, a day after the US Chamber of Commerce put India second from the bottom in its international IP index.

On IP issues, we have had consultations and appointed a thinktank to formulate a policy. They submitted a draft report, after which we have been engaged in discussions with stakeholders. There are many universities, thinktanks, lawyers etc discussing this issue, both inside and outside India. In fact, some decisions of courts in certain cases have proved how India has a robust legal framework which protects IP. The respective ministry is also seized of the matter.