

1. **Opinion:** [Intellectual property rights: when it's broken, fix it!](#) – Mint

A significant part of healthcare costs is the cost of medicines. The state has been fighting a losing battle to reduce the prices of medicines, even essential medicines. Price controls are resisted by producers, and by advocates of free markets, as troublesome government interference. The Indian government has been pressed by health activists to prevent large foreign pharmaceutical companies from taking over Indian generic drug producers: they fear the foreign companies will suppress the production of generics or increase their prices to reduce competition to their own expensive medicines. These health activists, and some wings of the Indian government, are also fighting a losing ideological battle against foreign companies, foreign governments, and also with other wings of the Indian government, to stall the imposition of an intellectual property (IP) regime that they say will increase prices and reduce the availability of medicines that the poor need.

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2. [Biosimilars could be a pot of gold or just a few coins for Indian cos: Utkarsh Palnitkar](#) – Business Standard

Though Indian pharmaceutical companies are fairly successful in growing their global generics business, the technology skills and the cost advantage may not firmly remain on their side as they seek to replicate a similar performance in the much more complex biosimilars field, according to Utkarsh Palnitkar, Partner, Head of Advisory, Health-Life Sciences Practice of KPMG India Private Limited.

As the IPR regimes gets further strengthened, the confidence of global players to set up R&D centers in India will rise and that will have a ripple effect in terms of rapidly increasing technology skills. You are looking at a 10-15 year pathway by which you can expect outstanding biotech products discovered from India as well.

3. [Let drug cos sell old stocks at old prices: NITI Aayog](#) – The Times of India

In what could come as a reprieve for major drugmakers like Cipla, GlaxoSmithKline Pharma and Novartis, the NITI Aayog has suggested changes to the drug price control order (DPCO), 2013 to allow companies to sell existing stocks of medicines (which were made before May 2014) at a retrospective price. Now, the NITI Aayog has intervened and held meetings with NPPA as well as Department of Pharma (DoP) to discuss a way to resolve the issue. In its recommendations to DoP, the government's policy think tank has suggested an amendment to DPCO, 2013 making the new price caps applicable to only fresh batches. "The government wants to ensure an environment with ease of doing business. The consensus is to do away with unnecessary regulations and litigations with the industry and instead facilitate them to manufacture products in India," an official said.

4. [Bold Pilot Project Helps India To Achieve Universal Health Coverage](#) – Business World

Kerala has achieved impressive health targets despite lower per capita income than several other Indian states and many developed countries, but there is still room for improvement, particularly in primary healthcare. Analysis of how public healthcare institutions are used reveals low use of resources at the primary care level, and high utilization of secondary and tertiary care facilities. Sixty to seventy percent of primary care services in Kerala are provided by private secondary and tertiary care hospitals. Even though patients report to primary care facilities - the first port of entry into the healthcare system - staff members routinely refer patients to secondary and tertiary care facilities without any attempt to treat them at the primary care centers.

Other state governments could learn from the Kerala example. Strengthening the primary healthcare system improved the health of the local population and freed up expensive resources from secondary and tertiary care.

5. [In 10 years, government aims 25% cut in premature cancer deaths](#) – The Economic Times

The health ministry has chalked out an overarching National Multi-Sectoral Action Plan with the aim to reduce premature deaths from cancer, diabetes and heart diseases by 25% in the next 10 years (by 2025).

The plan, which includes initiatives and measures from at least 27 government departments including ministries like environment, women and child development, urban development, industries etc, is in the final stage and will soon be drafted into a policy statement, a senior official said.

The idea is to tackle rising burden of non-communicable diseases (NCDs), which account for 55% of the premature mortality in the age group of 30-69 years, which represents the economically productive segment of the population. Government estimates show diseases like cancer, diabetes and cardiovascular diseases account for a socio-economic loss of 2-8% of GDP.

6. [Pharma companies hopeful on US biz](#) – Business Standard

Pharmaceutical companies are expecting higher growth from the American market in 2016-17, with quicker product approvals and launch of well-selling products.

Over the past several months, drug makers from India have faced a slowing in their US business as inspections by the regulator there, the Food and Drug Administration (FDA), led to import alerts (stoppage) and product withdrawals. While the regulatory overhang persists, there are signs of growth in the market there for drug majors here. Earlier this month, Sun Pharmaceutical Industries launched the generic version there of Novartis' anti-leukemia drug, Gleevec. The product had total annual sales of \$4.5 billion globally and \$2.5 bn in the US, according to IMS data. Sun Pharma has a 180-day exclusivity period to distribute the product in the US.

7. [**Sandoz Inc, Macleods Pharma recall two drugs made in India**](#) –The Economic Times
US drug firm Sandoz Inc is recalling over 2,70,000 bottles of hypertension tablets, manufactured by Hyderabad-based Mylan Laboratories, from the American market, a report by USFDA has said.

Also, unspecified number of bottles of tablets used to treat Parkinson's disease manufactured by Macleods Pharmaceuticals are also being recalled, according to the USFDA.

As many as 277,267 bottles of Candesartan Cilexetil tablets manufactured by Mylan Laboratories are being recalled by Sandoz Inc, for whom they were made, in an ongoing recall due to "failed impurities/degradation specifications; 9 month stability time point," the report said.

8. [**Chemists to strike on Feb 28 over licence fee hike**](#) – The Times of India
Chemists across Uttar Pradesh would observe a day-long strike on February 28 to protest against Drug Controller General of India's (DCGI) decision to hike registration fees for licences from Rs 3,000 to Rs 30,000.

Confirming the move, Diwakar Singh, president of Chemist Drug Federation Uttar Pradesh (CDFUP) said while all chemist shops would remain closed on Sunday, they would stage a protest at Vidhan Sabha in Lucknow on Monday.

Terming the hike, which is yet to be implemented, as "unjustified and unacceptable", Singh said it would hurt their business further, as online pharmacies and e-chemist shops are already adversely impacting them.

9. [**Budget 2016 expectations: Expand social health insurance ambit**](#) – The Financial Express
Last budget didn't impact the medical devices sector as there was no change in taxation or healthcare spending. It will be heartening to see the government present a growth oriented budget this year that sets a clear direction to ensure long-term optimism.

Relax import duties – Any increase in import duties will be detrimental to the health care sector. 70% of the medical devices today are imported. The increase can be an impediment towards providing quality patient care in India. Reduction in import duty on medical devices would also likely reduce the overall cost of treatment.

Expand and institutionalize the ambit of social health insurance to ensure that the population accessing public healthcare facilities is able to avail services free of cost beyond those being provided by the national health programs associated with communicable diseases.

Innovation, science and technology budget allocation – to enable creation of public platforms to promote better linkages between industry and academia and R&D labs by encouraging CoEs for research and education

10. [**Not enough facilities to ensure quality of medicines**](#) – The Times of India
Lack of facilities and manpower to regulate the manufacture and sale of ayurveda drugs and products in the state have cast a shadow over the quality and efficacy of the conventional medicines available in the market.

The state has just four drug inspectors to conduct periodical examinations and just one government ayurveda drugs testing laboratory (out of the eight posts at the lab, which include one senior drug inspector and seven drug inspectors, four seats are lying vacant) to take care of a whopping 877 licensed manufacturers of ayurveda drugs and products.

11. [Sanofi says US FDA accepts diabetes drug application](#) – The Economic Times
French drugmaker Sanofi said the US Food and Drug Administration (FDA) had accepted its application for the use of insulin and its lixisenatide drug in combination for the treatment of adults with Type 2 diabetes.

Sanofi expects the FDA to make a decision on the drug in August, the company said in a statement on Monday.

Sanofi added that it was on track to submit the fixed-ratio combination treatment to regulators in Europe in March.
12. [No hike in drug prices due to hike in import taxes: JP Nadda](#) – The Financial Express
Union Minister of Health and Family Welfare JP Nadda has ruled out the possibility of any increase in drug prices due to hike in import taxes and assured that medicines would be made available at cheaper rates. The Minister made this statement while laying the foundation stone of the Rs 150-crore super speciality block for the Government Tirumala Devaswom (TD) Medical College. HLL Infra Tech services, a subsidiary of HLL Lifecare (HLL), will construct the 14,100 sq m block.
13. [Health Minister gives go ahead for the expansion of AIIMS Trauma Centre Health Ministry committed to improve Public Health infrastructure in the country: Shri J P Nadda](#) – Business Standard
In a bid to strengthen the public health infrastructure and medical education in the country, the Union Minister of Health and Family Welfare Shri J P Nadda gave a nod for the expansion of AIIMS Trauma Centre attached to AIIMS New Delhi, today. As part of this expansion, AIIMS has also been allotted 15 acres of the land by Delhi Development Authority. The expansion plan includes a Centre for Digestive Diseases, Centre for Endocrinology, Centre for ENT, a Spine Centre, a Bone Marrow Transplant Centre and Kidney Transplant Centre.
14. **Opinion:** [India is an outlier in its tax policy](#) – Mint
The celebrated French economist Thomas Piketty's recent visit to India caused much consternation for his remarks. He proclaimed that 1) inequality in India is widening, 2) India's tax-to-gross domestic product (GDP) ratio is abysmally low and 3) the Indian state spends too little on health and education. This sounded like cacophony or harmony to India's commenting class, depending on one's ideological fancies. Regardless of one's views on India's inequality, it is irrefutable from empirical evidence that India has a "twin deficit" issue in its taxation policy. That is, India taxes its citizens much lower in proportion to its GDP vis-à-vis other comparator economies and a substantive portion of such taxes are collected through largely regressive and distorting indirect rather than direct means.