OPPI

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1. **Mumbai workshop on drug delivery technologies: 'Researchers, industry must work together to bridge gap between discovery, delivery' – The Indian Express**

RESEARCHERS IN the field of drug discovery and the pharmaceutical industry must work together to bridge the gap in the existing drug development process. This emerged as the central theme at a workshop here on Saturday. The workshop was the first such event held by IIT-B in association with the Indian Drug Manufacturers' Association (IDMA) and the Organisation of Pharmaceutical Producers of India (OPPI). The one-day workshop was held to identify the challenges in drug delivery technologies and to share the recent innovations in the field. "One of the biggest challenges in the pharmaceutical industry is to deliver the right amount of drugs at the right time," said Mitragotri, adding that the existing methods of administering drugs need to be upgraded.

2. **We have a dysfunctional healthcare system: Amartya Sen – Mint**

Amartya Sen, winner of the 1998 Nobel Prize in economics, says China outperforms India in providing access to healthcare and education. In New Delhi for the relaunch of his 1970 book, Collective Choice and Social Welfare, the 83-year-old also spoke in an interview about inequality in India, which he described as particularly vicious because it involves a lack of healthcare and education for a lot of people, and why these issues never translate into big political issues in India. The book is not about India but it has implications for India as it has for the United States and Europe. In the book, I discuss the importance of public reasoning and why democracy is not just a matter of votes, but also of people arguing with each other. Some of these issues which I discuss in the book apply critically to India. The space for public reasoning has tended to shrink a lot in India. I also discuss the importance of

understanding that majority rule is not the same thing as plurality rule (the government has a plurality—nowhere near a majority). Perhaps even more importantly, we must not forget that citizens are not just voters but (are) also participants in public discussion, and anything that shrinks the space for public discussion takes the society away from democratic rule.

3. **USFDA raises concerns on efficacy of drugs sold in India – The Times of India**
Drug regulator, USFDA on Friday raised concerns on the quality and efficacy of medicines being sold in India, throwing the issue back into spotlight. This is the first instance perhaps that a foreign drug regulator has spoken about quality of medicines sold in the country. Over the last few years, many domestic majors, including Sun Pharma, Dr Reddy's, Cipla, Zydus Cadila and Wockhardt have faced regulatory ire over quality of medicines exported from here and sold in US and other overseas markets. Post the Ranbaxy fiasco, some of the biggest companies in India came together two years ago with industry body Indian Pharmaceutical Alliance to form a 'quality forum' to navigate ''complex'' quality-related issues, helped by global management consultancy McKinsey. Speaking at the forum's annual conference here on Friday, USFDA India director Mathew Thomas urged the industry "to start showing results'' in terms of improving quality issues and detecting data integrity problems on their own, at manufacturing plants.

4. **Government must scale up production of active ingredients of drugs, says survey – The Indian Express**
The Centre should scale up the production of active ingredients used in drugs to meet the country's need, a government institute has said after it found that over 95 per cent of the samples examined during a survey were sourced from China. The Noida-based National Institute of Biologicals (NIB), outlining the findings of the country's largest ever drug quality survey, has said that over 90 per cent of nearly 5,000 samples picked up from airports and seaports were from China. The NIB, an autonomous organisation under the Ministry of Health and Family Welfare, has also asked the government to consider setting up a training academy in drug regulatory sciences to create skilled manpower which will help realise the objective of India becoming the 'pharmacy of the world'. The drug survey had found that over 10 per cent of drugs in the government supply chain were 'Not of Standard Quality'. "In the drug survey over a period of three months, 4,987 samples were drawn at the airports and seaports. It was observed that 98.51 per cent of these samples were that of Active Pharmaceutical Ingredients (APIs) of which 91.87 per cent were from China.

5. **Another US warning on Indian drugs – Business Standard**
The US Food and Drug Administration (FDA) wants Indian drug manufacturers to get their act together, citing instances of sale of drugs which lack the stated content and complaints of medicines not delivering desired results. FDA's India office director Matthew Thomas highlighted his concerns at an Indian Pharmaceutical Alliance (IPA) gathering herre. "I had the opportunity to test some of the products with a rapid test tool. I got a blister pack of paracetamol and the test showed there was no drug in it," he stated. Thomas said he occasionally got samples from the US embassy's health unit in Delhi and the complaints are usually about the medicines not giving the desired results. "I do not think any one of us wants to take such drugs which lack efficacy," he said. He said further tests would be required in laboratories to ascertain whether these drugs are non standard. Adding: "What we are telling Indian companies is that they need to take the onus of developing quality products, and investigate and follow up on complaints." IPA general secretary D G Shah said the FDA's observation was an illustration to explain the issue of investigation of complaints. It was by no means a reflection of the state of Indian pharma.

6. **Minimal invasive diplomacy – The Times of India (Blog)**
An essential ingredient of what is called "improvement" in all processes and interactions is to make them, even if seemingly so, simpler, shorter, targeted, and what is generally termed as "less painful". Though, the phenomenon is well understood, and must be part of upgrading any system

over the years, the truest terminology that may now apply to diplomacy, politics, and corporate systems may come from some evolving and emergent practices in medicine, “Minimally invasive procedures”. To be precise, medicine has always acknowledged, as procedures and processes in other spheres may accept, that the more you swerve beyond the targeted tissue, the more the exercise of excising of “what comes in the way”. In general, it takes away some important preservatives from what one yearns as optimum outcomes. Presently that may be bound by biological limitations. To give a literary flashback, while withholding the brilliant legalities which give a final spin to the great plot of Shakespeare’s, Merchant of Venice, if only a pound of flesh could be retrieved without a drop of blood more or a drop less, it would have been a perfect procedure. Perfect in the medical sense that would apply to any pound, pound and a half, or quarter, flawed, malicious, malignant, no matter where it was placed, if that could save a human life.

7. **Government set to put Rs 1,000 cap on pharma companies' gifts for doctors – The Times of India**
In a move to curb the unethical practice of pharma companies seeking to influence doctors and chemists through expensive "gifts", the government is set to impose a ceiling of Rs 1,000 on the value of such giveaways. The government is also considering a blanket ban on expensive freebies such as cruise or vacation tickets and sponsored educational conferences and seminars that can be means of making payments and offering benefits. The Rs 1,000 cap is considered sufficient for drug manufacturers to offer items intended to ensure brand recall. The department of pharmaceuticals (DoP) is in the final stages of issuing an executive order making Uniform Code for Pharmaceutical Marketing Practices (UCPMP) mandatory for the drug manufacturing industry. The order will cover doctors, chemists and hospitals and the states. The health ministry and Medical Council of India have been consulted on the decision. Once the executive order is issued by DoP, the code will be binding on all the stakeholders and any violation of the norms will attract punishment and penalty. "It can vary from a warning to cancellation of licence depending upon the extent of violation," the official said.

8. **Corporate hospitals making 'unethical, criminal' profits: docs – Business Standard**
Questioning claims of corporate hospitals that imported stents are better, a group of doctors today alleged these hospitals have formed a "grand alliance" to subvert the Centre's recent decision to cap prices of lifesaving stents. Alliance of Doctors for Ethical Healthcare (ADEH) said the decision by National Pharmaceutical Pricing Authority (NPPA) to cap the prices of lifesaving stents will hit the profits of these hospitals which were absolutely "unethical and criminal". ADEH also urged Prime Minister Narendra Modi to ensure that the decision is implemented without any obstacles by such people and the compliance is ensured, saying if foreign companies are refusing to supply the stents to Indian hospitals, then there is a need to give full support to Indian companies to increase their production. "ADEH questions the claims of the corporate hospitals that the imported stents were in anyway better than the ones manufactured in India. "The corporate hospitals seem to have formed a grand alliance to subvert the revolutionary decision of the NPPA to cap the prices of life saving stents as it will hit their profits which were absolutely unethical and criminal and are doing medical corruption," G S Grewal and Arun Mitra of the core committee of the ADEH said.

9. **Pharmaceutical firms have quietly enlisted leading professors to justify expensive drugs – Scroll.in**
Over the last three years, pharmaceutical companies have mounted a public relations blitz to tout new cures for the hepatitis C virus and persuade insurers, including government programs such as Medicare and Medicaid, to cover the costs. That isn’t an easy sell, because the price of the treatments ranges from $40,000 to $94,000 – or, because the treatments take three months, as much as $1,000 per day. To persuade payers and the public, the industry has deployed a potent new ally, a company whose marquee figures are leading economists and health care experts at the nation’s top universities. The company, Precision Health Economics, consults for three leading makers of new hepatitis C treatments: Gilead, Bristol-Myers Squibb, and AbbVie. When AbbVie funded a special issue of the American Journal of Managed Care on hepatitis C research, current or

former associates of Precision Health Economics wrote half of the issue. A Stanford professor who had previously consulted for the firm served as guest editor-in-chief.

10. **Torrent Pharma: Good medicine – The Hindu Business Line**
    Even as the Sensex recorded double-digit return over the past year, many pharma stocks underperformed the broad market. The weakness has been on two counts. First, concerns over regulatory tightening and action by the US regulator — the Food and Drug Administration. Next, growth slowdown in the US on account of regulatory action and competition-led price erosion. Companies with a good product pipeline and geographically well-diversified business may be better placed to weather this. Torrent Pharma has a strong presence in branded generic markets — India and Brazil and other regulated markets such as Germany besides the US. The sharp correction of nearly 25 per cent in the stock price over the last six months was largely on account of erosion in the price of generic version of anti-depressant Abilify. Growth pick-up in the domestic market, coupled with steady growth in markets such as Brazil and Germany, should more than compensate for the slow growth in the US.

11. **68 per cent urban Indians don't practice preventive healthcare: study – Deccan Chronicle**
    As many as 68 per cent of urban Indians do not practice preventive healthcare at an early stage, when they do not suffer from lifestyle disorders, a new study has found. The first survey to understand wellness trends in India revealed that less than a third urban Indians take steps to proactively adopt preventive wellness. The survey was conducted to bring out the trends and perceptions about 'wellness' amongst urban adults in three key markets - Mumbai, Delhi and Bengaluru. A sample size of 896 urban and semi-urban people belonging to the age group of 20-55 years was interviewed to draw insights to understand the perception of wellness in India. The survey conducted by drug company Himalaya and market research firm IMRB revealed that respondents from Mumbai perceived themselves to be healthier compared to the other two cities. The survey also found that 61 per cent of people have acknowledged facing some health issue, with joint pains (27 per cent), low immunity (19 per cent) and obesity (12 per cent) being the top among it. Out of this, females and elderly are more prone to having a higher incidence of any health issues.

12. **It said that the issue of newer high-end stents being – Daily News and Analysis**
    "The clause 15 of the Drug Price Control Order (DPCO) clearly states that any manufacturer should apply about the new product with evidence for its superiority to fix the ceiling price."The clause 15 of the Drug Price Control Order (DPCO) clearly states that any manufacturer should apply about the new product with evidence for its superiority to fix the ceiling price. Moreover, the capping has not affected the companies but the profit margin of the parties involved in the supply chain," it said. Noting that the doctors across the country had welcomed the NPPA decision, ADEH said only the select few for whom the profits matter more than affordable health care for the common masses, are "crying wolf" without any reason or scientific evidence. ADEH also expressed shock that Indian Medical Association has not come out with an open stand on this issue.

13. **GOP proposal aims to end insurance mandate in 'Obamacare' – ETHealthworld.com**
    A draft Republican bill replacing President Barack Obama's health care law would end its Medicaid expansion, scrap fines on people not buying insurance and eliminate taxes on the medical industry and higher earners. Instead, it would create tax credits worth up to $4,000, allow bigger contributions to personal health savings accounts and impose a new levy on expensive health coverage some employees get at work. The 105-page measure largely tracks talking points that House Speaker Paul Ryan, R-Wis., unveiled last summer and a similar outline that GOP leaders recently gave lawmakers. The document is 2 weeks old, and GOP aides said it is subject to change. Still, it provides some new details of Republican thinking and reaffirms others, such as blocking federal payments to Planned Parenthood for a year. It also shows Republicans have begun

translating their ideas into legislative language, even as they continue their seven-year struggle to unify their party behind a bill repealing Obama's 2010 overhaul.

14. **WHO supported govt report reveals growth of Indian medical device market at CAGR of 16% in 2020 – Pharmabiz.com**

    The Indian medical device market will grow to US$ 8.16 billion (Rs.53,053 crore) in 2020 at CAGR of 16 per cent, as per the key findings of a government led study in collaboration with World Health Organisation (WHO) and Andhra Pradesh MedTech Zone (AMTZ). India is one of the top 20 global medical device markets and the 4th largest medical device market in Asia. The report further reveals that diagnostic imaging is the largest segment within Indian medical device market in 2015. It constitutes US$ 1.18 billion (Rs.7,650 crore) in 2015 and will grow to US$ 2.47 billion (Rs.15,561 crore) in 2020.