

IPR & Innovation

'Make in India' and compulsory licensing, [Chronicle Pharmabiz - National](#)

Make in India is bound to succeed with the powerful global initiative by the Prime Minister of India and his team. The latest amendment notification it has become all the more closer and faster to success. The four distinct sectors or segments of the pharmaceutical industry in India are: MNCs who are members of **OPPI** (Organisation of Pharmaceutical Producers of India); Research-based larger Indian companies who are members of IPA (Indian Pharmaceutical Alliance); Small-medium companies (predominantly) who are members of IDMA (Indian Drug Manufacturers' Association); Very small and localized pharmaceutical companies who are members of local or state associations. The **Organisation of Pharmaceutical Producers of India** members are vociferously against the compulsory licensing (successfully supported by USTR and Super 301 conditions and cautions). The IPA has publicly announced that IPA members prefer the voluntary licence route and hence will not opt for compulsory licensing. The fourth group of tiny and small pharmaceutical companies as well as large majority of IDMA (99 per cent) are not concerned with WTO, TRIPs or Compulsory Licensing. What is left is a mere 1 per cent of one of the four groups as above. They have neither the financial muscle power to fight long drawn out legal battles for compulsory licensing nor the political clout.

Public health groups call for immediate halt to negotiations on US-led TPPA; call for human rights review of TPPA text, [Pharmabiz.com](#)

AIDS groups from the Asia-Pacific region have joined public interest and public health groups around the world in calling for an immediate halt to the negotiations on the US-led Trans-Pacific Partnership Agreement (TPPA) and for a human rights review of the text being negotiated. According to public health groups, leaked texts analysed by legal and human rights experts show that the TPPA will threaten access to affordable generic medicines in the TPPA countries. The US has announced that the TPPA will be a template for future trade agreements and the US is likely to pressure other developing countries to join the TPPA if it is signed. Leaked TPPA negotiation texts show that the US is pushing intellectual property provisions far in excess of what developing countries like Vietnam and Malaysia have agreed to in the World Trade Organization's (WTO) Agreement on Trade Related Aspects of Intellectual Property Rights (TRIPs). Known as 'TRIPs-plus,' these measures are contrary to the WTO's Doha Declaration which re-affirmed that TRIPs "can and should be interpreted and implemented in a manner supportive of WTO member's right to protect public health and, in particular, to promote access to medicines for all."

Access to Healthcare

97,000 children fully immunised in 24 days in Madhya Pradesh, [Hindustan Times](#)

Small innovations have propped up the special immunisation drive of the Madhya Pradesh health department under Mission Indradhanush with almost 97,000 children below the age of two years getting fully immunised in 15 districts within a short period of 24 days. Innovations, including simple incentives like distribution of balls, balloons and chocolates, cash rewards for fully immunised children selected through lottery, personalised invitation cards and use of battery-operated mega-mikes by Asha health workers to create awareness, are working well to pull in children for the special drive, health department officials have said.

Rise in drug resistant TB cases worries health officials [Hindustan Times](#)

Despite awareness programs about prevention of tuberculosis organised regularly by the state health department, the increased incidence of MDR (multiple drug resistant) TB, in the district has caused concern. According to department data the number of patients who have contracted this form of infection caused by bacteria that are resistant to treatment has risen to 45 till date.

Govt hospitals, clinics in dist lack basic facilities [The Times of India](#)

Maharashtra government's affidavit in Nagpur bench of Bombay High Court on Wednesday brought to fore shocking figures regarding sorry state of affairs of government hospitals and dispensaries in the district.

Filed by Medha Gadgil, additional chief secretary of Medical Education and Drugs department, it mentioned that Nagpur has 1,968 government hospitals and dispensaries, including primary health centres, under its jurisdiction, and a majority of them were in a bad shape. The government had conducted a survey of all hospitals and dispensaries under it across the state on diagnostics, equipment, medicines, ambulance, number of doctors, blood storage and post mortem facilities, buildings, water and drainage systems, and food service to the patients, among others.

Proposals sent to NRHM for implementation of schemes: MP, [The Hindu](#)

Lok Sabha MP R. Radhakrishnan on Wednesday said that proposals had been sent to the National Rural Health Mission (NRHM) for implementation of various schemes to the tune of Rs.70 crore in the current fiscal. Speaking at the District Vigilance and Monitoring committee meeting here, Mr. Radhakrishnan said the committee had also sent proposals to the tune of Rs.20 crore to centre under the Integrated Power Development Scheme (IPDS) and Deendayal Upadhyaya Gram Jyoti Yojana (DDUGJY).

Jan Aushadhi with 1000 stores!, [Pharmabiz.com](#)

Early this month, the Union minister of state for chemicals & fertilizers, Hansraj Ahir came out with an announcement in Delhi stating that the Centre would open 1000 more government generic stores to strengthen its Jan Aushadhi programme of promoting quality generic medicines in the country. Jan Aushadhi was an ambitious project launched by former Union chemicals minister Ramvilas Paswan to make available quality generic drugs in the country by opening at least one Jan Aushadhi store in each of the 630 districts. The government commenced the project on November 25, 2008 when it opened first Jan Aushadhi store at Amritsar in Punjab. Although 150 more such stores were opened subsequently over the years only 85 are working currently. Under the programme, 319 essential drugs were identified to be supplied through these stores, but only 85 drugs belonging to 11 therapeutic groups could be sold due to various reasons. The Bureau of Pharma Public Sector Undertakings of India has been designated as the nodal agency for running the programme. The programme, however, did not make much progress as expected even after seven years of its launch on account of the half-hearted approach of the main stakeholders.

Medical & Regulatory

Counterfeit medicines kill more people than terror: CBI chief, [The Times of India](#)

More people have died due to consuming counterfeit medicines than those who have died of terrorism in the last 40 years, CBI director Anil Sinha said on Wednesday, while quoting an estimate of international agency Interpol. CBI director, meanwhile, said that the problem of counterfeit medicines (all over the world) was 'alarming' and there was an urgent need to fight the growing menace. "According to an Interpol Report released in July, 2014, two 'types' of Organized Criminal Groups seem to dominate this crime area: highly organized, yet generally informal, international affiliate networks selling medicines via illicit online pharmacies as well as small groups, not yet well established, of between 3-10 members, involved in various aspects of pharmaceutical crime," said Sinha, adding that the scenario the world over is 'alarming'.

No dearth of funds in AYUSH sector for states, says Shripad Y Naik [The Economic Times](#)

JAIPUR: Union Minister of State for AYUSH Shripad Y Naik today said there was no dearth of funds for states wanting to expand medical care facilities in this sector.

AYUSH ministry had asked all states to submit their proposal, action plan, and funds requirement for AYUSH's (Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy) expansion and medical care, Naik said at a function while inaugurating the state's first Swasthya Kalayan Institute of Naturopathy and Yogic Science college here at Sitapura Industrial area.

Stormy Session on Anvil as Government Rejects Opposition Demand [Indian Express](#)

NEW DELHI: Union Home Minister Rajnath Singh on Wednesday rejected the Opposition demand for the ouster of External affairs Minister Sushma Swaraj and Rajasthan Chief Minister Vasundhara Raje, saying "this is not UPA Government but NDA Government."

Rajnath was responding to a question on how will the Monsoon session, which is set to get under way on July 21, will run smoothly as the Congress has been demanding resignation of Sushma and Raje over the Lalit Modi controversy. "Our ministers do not have to resign," he asserted.

Many health ministry consultants paid by foreign aid agencies [The Economic Times](#)

The government seems very wary of foreign funding for NGOs, but its own health ministry has hundreds of consultants, a large number of them on the pay of external aid agencies. Replying to an RTI application, the health ministry said 363 consultants worked with it.

The salaries of a large number of these consultants are being paid by external aid agencies such as the US Agency for International Development (USAID), the UK's Department for International Development (DFID) and the United Nations Population Fund (UNFPA).

Govt launches cluster development programme for pharma industry, [Business Standard](#)

Ananth Kumar, minister of chemicals & fertilizers, formally launched the cluster development programme for pharma sector (CDS-PS) on June 17, 2015 in New Delhi, with an aim to provide support to the pharmaceutical industry in becoming more capable, productive and competitive. Ananth Kumar said that for the common man, availability, quality and affordability of drugs and medicines is of utmost importance and the cluster development programme will be the key step in ensuring health security of the country. The government aims to set up six pharma clusters by the end of this financial year, of which three are likely to be greenfield projects. Ananth Kumar said, "These clusters will ensure adequate testing, training and affluent treatment facilities for pharmaceuticals industry. The government will also come up with the bulk drugs parks and the medical devices parks."

Rajasthan to set up more drug testing labs to ensure drug quality, [Pharmabiz.com](#)

As a major step towards revamping the drug testing infrastructure in the state, three more drug testing laboratories will be established in Rajasthan at Udaipur, Jodhpur and Bikaner soon. The labs have been constructed and will now sooner be equipped with the state-of-the-art testing technologies and methods. About Rs. 18 crore has been allocated by the state government for this purpose. According to a state drug control official, "The task of upgrading infrastructure will also entail recruiting skilled technical personnel for the same along with installing machines, which might take some more time. Currently, there is only one drug testing laboratory in the state which is located at Jaipur."

Other News on Pharma

M&A in contract research space gaining momentum, [Business Standard](#)

India's contract research sector has reported an uptick in mergers and acquisitions (M&A) in the past year. According to Venture Intelligence, there were eight M&A transactions involving pure-play contract research firms between January 2014 and May this year, compared with only five deals in three years prior to 2014. The clinical trials sector went through bad phase in the end of last decade, a phase that continued till the first few years of this decade. Regulatory clearances, which used to take six months from the date of filing, have now started to come within two months. He added that India, which has the advantage of availability of good doctors, vast pool of patients and disease profile, has regulatory systems in place on par with the international standards.

E-pharmacies may cause public health hazard: AIOCD [Business Standard](#)

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centres, under its jurisdiction, and a majority of them were in a bad shape.

Much ails our pharma industry, says report [Pune Mirror](#)

A study has found that several lacunae exist in industry's functioning, including shocking manpower shortages and lack of infrastructure; experts suggest caution in improvements

While 'Make in India' has been Modi's clarion call since he assumed power, part of the mandate has also always been to boost the indigenous pharma manufacturing sector. A task force was constituted last year to report on the way to growth for the industry. Now, however, it has become clear that much ails this sector —the force's recent report points to a host of lacunae in functioning, along with citing recommendations to improve on the same.

Cambridge Consultants reports innovation & technology key to pharma growth in emerging markets, [Pharmabiz.com](#)

Cambridge Consultants sees that emerging markets are predicted to account for a third of global pharmaceutical spend by the end of next year and seen as critical for the sustained growth of leading pharma companies. Innovation and technology will be important differentiators as pharma organisations try to drive growth in developing countries, stated the report findings by Cambridge Consultants. The report summarises the findings of a Cambridge Consultants workshop held in Mumbai, India, earlier this year. The product design and development firm brought together senior personnel from both Indian and multinational pharma companies to debate whether emerging markets can be an opportunity to drive sustainable growth.

Indian pharmacy education not up to global mark, thrust on research needed: Neha Dembla, [Pharmabiz.com](#)

Indian pharmacy education is not on par with standards of the western world. There is a need for key additions like research- based programmes in graduation courses and a syllabus revamp which is in sync with the current advances of the pharmaceutical industry, according to Neha Dembla, chairperson, 61st International Pharmaceutical Students' Federation (IPSF) World Congress. The current challenges faced by students is the existence of a huge gap between the knowledge acquired during the degree course and what is required by the industry, research lab and healthcare providers. The paucity of infrastructure like lab equipment and instruments required for the research activities in colleges add to the woes of the pharmacy candidate, said Dembla.
