

1. [14 more drug majors get HC relief from Centre ban on FDC meds](#) – PTI

Fourteen more healthcare majors, including Cipla, Lupin, Wockhardt, Glaxosmithkline and Mankind Pharma, were today granted interim relief by Delhi High Court which stayed till March 21 the ban imposed by the Centre on sale of some of their fixed dose combination (FDC) drugs.

Apart from these five, Justice Rajiv Sahai Endlaw also provided relief to Dr Reddy's, Laborate Pharmaceuticals, Alkem Laboratories, Ajanta Pharma, Khandelwal Laboratories Pvt Ltd, Micro Lab Ltd, FDC Ltd, Coral Laboratories Ltd and Eris Lifesciences Pvt Ltd.

The court passed the same order as was issued in the pleas filed by the eight other companies, including Pfizer, Procter and Gamble (P&G), Glenmark and Reckitt Benckiser in the past three days.

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2. [Drug ban: Wockhardt and Laborate gets interim stay from Delhi high court](#) – Mint

Two more drug makers—Wockhardt Ltd and Laborate Pharmaceuticals—have won stay order from the Delhi high court against the government ban on 344 fixed dose combination (FDC) drugs.

Cipla Ltd, Alkem Laboratories, Dr.Reddy's Labs and Micro Labs too are likely to move the court on Thursday for a stay.

The government banned FDC drugs, extending to about 6,000 brands, on 10 March, citing health risks. The move was based on a report by a six-member committee headed by Chandrakant Kokate. An FDC is a cocktail of two or more active drug ingredients in a fixed ratio of doses.

3. [Lobby groups of pharmaceutical companies considering petition against drug ban](#) – The Economic Times

Lobby groups of pharmaceutical companies are leaving no stone unturned to get the health ministry's ban on 344 fixed-dose combination (FDC) drugs revoked.

Industry groups that were fighting the ban from the sidelines are considering joining the long queue of companies that have approached courts seeking relief. Among them, the Federation of South Indian Pharmaceutical Manufacturers Association (FOSIPMA) is contemplating a petition in the Madras High Court, seeking a stay on all the drugs that were banned, according to a representative of one of the groups who did not want to be named.

4. [We've been fair in assessing banned drugs, says Chandrakant Kokate](#) – The Economic Times

The ban on over 300 drugs with two or more active ingredients in one dose was effected in the interest of public health and imposed after responses submitted by drug companies, according to Chandrakant Kokate, the head of the consultative committee that recommended the curbs on irrational combinations.

The affected drug companies approached the Delhi High Court and obtained temporary injunctions against the ban — announced last week — on the medicines, known as fixed dose combinations in industry parlance.

5. [Doctors on drug ban: Govt moving in right direction](#) – Business Standard

Several committee reports have time and again pointed at a large number of harmful drugs in the market. Doctors believe that government's step - even though it may give a jolt to the pharma sector's corporate fortunes - is meant to correct the situation.

"These drugs have been proven to be harmful for us. Most of the countries worldwide have already banned them. Moreover, this toxicity - proven in many of these drugs - decreases the body resistance to fight any disease," said a senior AIIMS doctor.

6. **Editorial Comment:** [Knee-jerk reaction](#) – Business Standard

The government's decision to ban 344 fixed-dose combinations may be well-intentioned but the way it has been implemented leaves a lot to be desired. The notification for the ban was issued by the health ministry on March 10, a day before the Supreme Court was supposed to hear a plea by well-known whistle-blower Dinesh Thakur that the country's drug regulators had failed to enforce rules on product safety. It's a different matter that the Supreme Court threw out Mr Thakur's plea, questioning his locus standi - Mr Thakur is an overseas citizen of India.

7. [Shops get more time to remove banned medicines](#) – The Hindu

The Kerala High Court on Thursday directed the State government not to take coercive steps against druggists and chemists for not removing banned medicines from their shops, for two weeks.

Justice A. Muhammed Mustaque issued the interim order on a petition filed by Thomas Raju, secretary, All Kerala Druggists and Chemists Association (AKDCA). The association sought more time to return over 300 medicines banned by the Central government last week.

According to the petitioner, the Drug Control Department had asked chemists to remove the banned drugs from their shops and return them to the distributors by March 21.

8. [80% of doctors prescribed banned drugs: survey](#) – The Hindu
Nearly 80 per cent of Indian doctors prescribed drugs from the recently banned list of 344 drugs, revealed a survey conducted by eMediNexus, a doctor's network.

The survey, conducted to gauge the sentiment of 4,892 doctors, also concluded that up to 40 per cent of doctors disagreed with the government's justification for the ban.

The survey further revealed that a quarter of doctors felt their reputation would be negatively impacted.

Also appeared in [Indian Express](#)

9. [Regulator set to ban 1,200 more drugs, chemists warn of shortage](#) – Hindustan Times
The Drug Controller General of India (DGCI) has sent a new list of 1,200 fixed-dose combinations (FDCs) for a probe to the panel which banned about 350 drugs earlier this week.

FDC medicines combine two or more drugs in a single pill. When multiple drugs from the same therapeutic group, for example antibiotics, are clubbed together, it may lead to resistance, according to experts. In India, many pharma companies obtain licence from a state to make FDCs, and sell them without the consent of the Central government.

The Kokate Committee has reviewed about 6,600 FDCs so far and classified them under four categories — irrational, require further deliberations, rational and require additional data generation.

10. [Ban on drugs like Vicks and Corex: Nothing sudden about it](#) – Indian Express
From bewilderment of patients to the outrage of pharmaceutical companies threatening to drag the government to court, the March 12 notification banning 337 combination of drugs has caused a flutter in the country. However, the ban is neither sudden nor irrational as many would have us believe. It is in fact, the logical conclusion of a long pending demand of the votaries of rational use of drugs for a ban on Fixed-Dose Combinations (FDCs), some of which have been approved by state drug administrations without a clearance from the Centre and have little therapeutic justification.

11. [Over Dose](#) – The Financial Express
India's ban on 344 fixed drug combinations (FDCs)—believed to cause drug-resistance and organ failure—is a positive step, as far as the intention is to curb the indiscriminate consumption. FDCs, often casually bought off the counter, contribute to needless consumption, given the patient may only need one compound from the combination and not the others. While many of the 344 drugs are banned in the US and the UK, India has allowed these drugs to be manufactured and sold despite the lack of approval from the Central Drug Standard Control Organisation (CDSCO). A 2015 study by PLOS Medicine shows that of 175 FDC formulations across 4 categories marketed in India, only 60 (34%) were approved by CDSCO with unapproved ones accounting for more than 50% sales in FY12 in certain categories. The findings also show that the sale of unapproved products was higher than that of approved ones, with the 175 FDC formulations appearing in the market as 4,000 products. This would, no doubt, justify the government's drug ban.

12. [Hope to restart India-EFTA trade talks, says Swiss envoy Linus von Castelmur](#) – The Economic Times
Emphasising that it is time for action, Swiss Ambassador Linus von Castelmur today expressed hope of resuming the talks on India-EFTA free trade pact.

The trade talks between India and Europe Free Trade Association (EFTA) -- the grouping of Switzerland, Iceland, Norway and Liechtenstein -- have been stalled on a host of issues.

13. [Generic drug can reduce treatment cost for cancer patients](#) – The Times of India
Patients suffering from chronic myeloid leukemia (CML)-- a rare form of cancer -- can get huge financial benefits if they start using the generic form of drug Gleevec, the patent of which expired in January this year, a study said.

"If we start all patients on the generic form of Gleevec and it works, then they are on a generic for the rest of their lives," said lead author William V. Padula, an assistant professor at the Johns Hopkins University. "This amounts to a huge cost savings for them and their insurers," he added.
14. [US No. 1 in international patent filings; Huawei filed most in 2015: WIPO](#) – The Times of India
America continued its lead in international patents filings in 2015 with 57,385 international patent applications, according to World Intellectual Property Organization (WIPO). The country remains the largest user of Patent Cooperation Treaty (PCT) despite an annual drop of 6.7% in 2015. India had filed 1,423 PCT applications in 2015.
15. [‘Healthcare must evolve to cope with impact of ageing populations’](#) – The Times of India
An editorial in the International Journal for Quality in Health Care published on Wednesday warned of an impending tsunami of aging populations that will present significant planning and budgetary challenges for healthcare systems worldwide.

Professor Rene Amalberti, head of the Innovation Group of The International Society for Quality in Health Care (ISQua), has advised that healthcare systems must adapt in order to cope with ageing populations worldwide.

Professor Amalberti pointed out that in low and middle income countries there was a growing awareness of the impact of aging on healthcare. "However, this is seen as a longer term issue when considered against the current priorities of expanding access to care and paying for costly new treatments within limited budgets," he added.
16. [Why has MSF chosen India to challenge Pfizer's patent on a pneumonia vaccine](#) – DNA
International not-for-profit Medecins Sans Frontieres (MSF) has taken on US pharma giant Pfizer, challenging the latter's patent for a pneumonia vaccine priced at \$100 a vial, in the Indian Patent Office. If the patent is granted, Pfizer's monopoly on the drug could stop the production of generic, affordable version of the vaccine, making patients pay dearly from their pockets.

MSF's opposition is to stop this from happening. MSF, also known as Doctors Without Borders, has not only given a direct challenge to Pfizer, but taken a stand against the growing the big pharma lobby pressure in India.
17. [Bayer wins U.S. FDA approval for hemophilia A therapy](#) – The Economic Times
The U.S. Food and Drug Administration approved Bayer's BSE 0.21 % AG's therapy for the most common form hemophilia, the company said on Thursday, about three weeks after the treatment was cleared for use in Europe.

The therapy, Kovaltry, is designed to reduce bleeding in patients with hemophilia A when infused prophylactically two or three times per week, and was approved by the European Commission on Feb. 22.
18. [Biocon, Mexican firm in pact to make rh-insulin](#) – The Hindu Business Line
In an effort to address the rising demand for insulin, Biocon SA, the subsidiary of Biocon, has entered into an agreement with Mexico-based Laboratorios PiSA.

As per the partnership Biocon will manufacture rh-insulin, a substance that goes into the insulin, while PiSA will manufacture drug product at its facilities in Mexico. Further, the insulin will be commercially sold in the US market.

In a conference call, Kiran Mazumdar-Shaw, Chairperson and MD, Biocon, said that this is extremely important as the company is focussed on globalising its insulin portfolio. Add to that the demand for generic rh-insulin is estimated at \$2 billion annually, which is 40 per cent of the global demand.

19. [MCI Reform Must to Improve Medical Edu](#) – Indian Express

A parliamentary committee has demanded reforms in the organisation and functioning of the Medical Council of India (MCI), the premier body which controls medical education. Though the MCI is funded by the government, the latter has virtually no control over it. Once appointed to the council, members cannot be removed easily even when proved to be corrupt. The council enjoys autonomy. When a group of corrupt people exercise autonomy, it degenerates into autocracy. Also, the Council does not represent medical science in all its aspects. For instance, only a physician or a surgeon can become a member of the council.