

1. [PM Modi takes pledge to support AMR; economic cost could hit \\$100 tn by 2050](#) – Economic Times

Statement from Narendra Modi, Prime Minister of India:

The discovery of antibiotics had dramatically revolutionised the treatment of communicable diseases in the 20th century, but their indiscriminate use is now leading the world into a situation where life-saving formulations are progressively losing their efficacy. India recognizes anti-microbial resistance as one of the major global threats to public health. We are committed to prevent, contain and combat anti-microbial resistance. India has taken a number of steps to combat anti-microbial resistance. A national programme on containment of anti-microbial resistance is being implemented.

The National Centre of Disease Control and the Indian Council of Medical Research are engaged in anti-microbial resistance surveillance. We have

placed restrictions on the sale of antibiotics by making necessary statutory changes. A campaign has been launched to increase awareness regarding anti-microbial resistance, along with national treatment guidelines for antibiotic use.

The prevention and containment of anti-microbial resistance requires multi-sectoral and multi-stakeholder action. India is committed to fully support global efforts to prevent and contain anti-microbial resistance.

2. [Delhi High Court asks Roche to explain lawsuit over Avastin copy](#) – Economic Times

The Delhi High Court has once again asked Swiss biotech drug giant Roche to explain why it is suing the Drug Controller General of India (DCGI) and Hyderabad-based Hetero Drugs over the approval process for a biosimilar or copy of complex biotech cancer drug bevacizumab. The judge on May 24 charted out five issues that Roche's counsel would have to justify in order for the court to consider legal intervention in the approval process for Hetero's drug. He also asked Hetero's counsel, Abhishek Singhvi, to submit arguments in their defense. The court will hear the case next on June 2, 2016.

3. [Healthcare funding options needed](#) – Mint

Every investment in combating non-communicable diseases is a means of promoting development. In his article, Kenneth Thorpe highlights the issue of and increasing burden of

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8. [Drugs worth Rs 10 crore wasted at govt godown](#) – Deccan Herald
9. [Edit: Rising antimicrobial-antibiotic resistance will kill millions if nothing done to check it](#) – Financial Express
10. [Fighting drug resistance](#) – Pharmabiz.com
11. [Pharma battle: Indian Patent Office and MNC's should resist from the confrontational policy](#) – Firstpost.com

Non-Communicable Diseases causing more than 53% of all deaths in the country. Experts predict that more than 60 million Indians will succumb to NCDs by 2020. Clearly, the government must strive to avert the health crisis looming on the horizon. According to the World Health Organization's (WHO) World Health Statistics 2015, India spent 1.16% of its gross domestic product (GDP) on health, ranking 187 among 194 countries. In per capita terms, India ranked 157, spending just \$60 (purchasing power parity). The majority of Indians lack access to affordable, high-quality healthcare. Thirty per cent of identified illnesses in rural India and 20% in urban areas go untreated because of financial constraints.

Similar article in HT Syndication: [Healthcare funding options needed](#)

4. [Pharma sciences in vogue, experts say](#) – Times of India
Advent Of Foreign Firms, Research Organizations Have Increased Demand For Manpower Pharmacy courses are bound to see an increase in the number of students this admission season in Maharashtra, education experts say. With foreign pharmaceutical companies opening their research and development centers in and around Pune along with the availability of renowned research institutes like the National Chemical Laboratory and Serum Institute, Pune can be called a new hub of Pharma sector after Mumbai and Bangalore.
5. [Patently a missed opportunity](#) – The Hindu
The National IPR Policy is keenly concerned with generating “awareness” of intellectual property (IP) in the country. (So much so that the word “awareness” appears at least 20 times in the policy.) The policy calls for nothing less than a new gold rush towards IP — roping in everyone from university professors to people in “rural and remote areas”. On **IP and Innovation**: environment to encourage knowledge. The Indian government, as the largest funder of research in the country, could have mandated that this research be made accessible to scholars through open copyright licensing, but has chosen to abdicate this responsibility. Innovation is largely driven by forces other than IP law, and the policy shows no signs of understanding this tenuous connection. Conflating IP with innovation can be dangerous. IP signifies activity — the activity of producing IP. India's first IPR policy was an opportunity to embrace the spirit of India's innovative patent law, as well as the collective systems of knowledge we have fostered through millennia, which, taken together, emphasise innovation, access and openness. India's National IPR Policy fails to grasp this opportunity. Instead, it trots out the worn western fairy tale that more IP means innovation, encourages the pointless privatisation of indigenous knowledge, and egregiously fails innovation by doing nothing to make public research accessible to the people who pay for it.
6. [Caution against MNCs appropriating traditional knowledge](#) – The Hindu
This article is written by T Nandakumar – Correspondent at The Hindu from Thiruvananthapuram. On the IPR policy: “The move to include IPR in the educational curriculum is a step in the right direction,” says R.S. Praveen Raj, former Patent Examiner, Government of India. He, however, feels that creating monopoly rights on Traditional Knowledge (TK) and classifying it under IPR are fraught with danger in a country like India. “For example, it is detrimental to the interests of traditional healers if the knowledge possessed by them is documented in the Traditional Knowledge Digital Library (TKDL) and shared with patent offices. TKDL should be created only on traditional knowledge in public domain known to a large number of TK practitioners.” Dr. Raj, who is currently Senior Scientist at the CSIR- National Institute for Interdisciplinary Science and Technology here, said the policy statement on allowing access to TKDL for public research institutions would spur research activities. He concurs with the policy direction advocating caution in permitting private R&D institutions to access the data as it could lead to misappropriation of the knowledge. It is detrimental to the interests of traditional healers if the knowledge possessed by them is documented in the Traditional Knowledge Digital Library and shared with patent offices.

7. [Industries told to hold roadshows on IPR policy](#) – The Hindu
Industry bodies were asked by the Department of Industrial Policy and Promotion (DIPP) to inform by May 30 the locations where they can hold roadshows to promote the IPR policy, official sources said. The nearly 90-minute meeting was attended by around 15-20 industry bodies including CII, Ficci, Assocham, Nasscom (the information technology apex body) and Federation of Indian Micro and Small & Medium Enterprises (FISME), they said. The DIPP, which convened the meeting, informed the industry bodies that the road shows must begin next month itself, and must be held in industrial clusters as well as in Tier-2 and Tier-3 cities.
8. [Drugs worth Rs 10 crore wasted at govt godown](#) – Deccan Herald
A surprise inspection on the warehouse of the Karnataka State Drugs Logistics and Warehousing Society in the city late in the night on Tuesday by the Minister for Health and Family Welfare U T Khader revealed that drugs worth Rs 10 crores have been wasted as they were kept beyond their expiry period. The minister took note of the documents and medicine inventory and the transactions that have taken place in the past. The Warehousing Society was later directed to ensure proper computerisation of documents.
9. [Edit: Rising antimicrobial-antibiotic resistance will kill millions if nothing done to check it](#) – Financial Express
Rising antimicrobial resistance will kill nearly 10 million annually by 2050 if nothing is done to check it. There has been no new class of antibiotics discovered in the last couple of decades—certain strains of bacteria are already resistant to carbapenems, the most powerful available antibiotics against multi-drug resistant strains of bacteria—so there is a need to focus on that as a frontline measure. Overuse of antibiotics/antimicrobials, coupled with improper calibration of dosage and duration of drug administration, has led to previously curable diseases like TB becoming nearly impossible to cure as the pathogen mutates to beat the drug and leads to emergence of superbugs such as methicillin-resistant Staphylococcus aureus (MRSA).
10. [Fighting drug resistance](#) – Pharmabiz.com
Antibiotic resistance has been posing a major threat to public health both in developed and developing countries necessitating immediate action to stop the world heading towards a pre-antibiotic era which can ultimately reverse all achievements made in prevention and control of communicable diseases. Common infections and minor injuries which have been treatable for decades may once again kill millions of people if this dangerous trend is not stopped. The growing antibiotic resistance has resulted from injudicious and rampant use of antibiotics by prescribers, patients not completing full treatment courses, over-use of antibiotics in livestock and fish farming and poor control of infections in health care settings. The World Health Organisation already cautioned the member nations last year against the indiscriminate use of antibiotics for treating various ailments as it is increasingly leading to resistance to medicines and persistence of infections. Recommendation for granting of marketing approval for Zavicefta, the new combination drug for multi-drug resistant bacteria, by European Medicines Agency does give a hope to the health authorities in world. Perhaps among the developing countries, India has highest burden of drug resistant ailments with the outbreak of multi-drug resistant TB, malaria and hospital acquired infections in recent years.
11. [Pharma battle: Indian Patent Office and MNC's should resist from the confrontational policy](#) – Firstpost.com
The recent grant of 20 year patent by the Indian Patent office to the US drug company Gilead for its Hepatitis drug Sovaldi so soon after rejection in January 2015 raises many interesting issues. The Indian patent office has relented apparently because the US company agreed to give voluntary licenses to as many as 11 Indian generic drug companies which can sell the drug at \$900 per annum per patient as opposed to a whopping \$84,000 a US patient has to pay. Royalty payable by the generic Indian manufacturers as indeed manufacturers in 100 other countries would be 10%. Drug MNCs especially from the US have had a problematic relationship with the

Indian Patent office so much so that the US government has placed India in the list of patently unfriendly patent countries in the world. There are two niggling issues. First is section 3(d) of the Indian Patent Law that puts its foot down on ever greening. Did you say ever greening is a banking jargon? Well yes, bank managers and wily borrowers ever green the loan accounts through a simple trickery-- - pay off an earlier loan that runs the risk of attracting the NPA label with a fresh loan. The game goes on.