1. **USFDA rejected 12,012 products since January 2011: Nirmala Sitharaman** – Economic Times

   For reasons including adulteration, misbranding, packaging, labeling, pesticides, unapproved products, the US health regulator has refused entry of 12,012 Indian products drugs in American markets between Jan 2011 and March 2016. Sitharaman said, the steps taken by the government include tightening labelling rules and making it mandatory for companies to clearly mention the dates of manufacturing, best-before use and expiry dates and improving pre-export inspection.

2. **'Pharma imports from China reaches $1.74 billion in April-December 2015'** – Economic Times

   India imports drugs and pharmaceutical products from China in the form of raw materials as well as finished products for both domestic consumption and exports. As per reports, in case of 12 essential drugs including Paracetamol and Amoxicillin "there is a significant dependence on imports of drug ingredients and substantial imports of these products are from China". There are also recommendations for improving the regulatory regime in the country, the minister said

3. **Five key facts on a planned US-EU** – Economic Times

   The aim of the Transatlantic Trade and Investment Partnership is to boost trade between the two sides so as to create wealth for business and, in theory, workers and the broader economy. The European Commission has published various summaries but the talks are held behind closed doors and many details under discussion remain confidential. That has led to criticism that officials are haggling in secret over matters of public importance such as the environment, health and consumer rights. The EU-US trade pact covers a vast array of commerce but can be broken down into three main areas: 1) Market Access, 2) Regulatory Co-operation, 3) Rules.

4. **India looking outwards** – Mint
   Except for a blip during the recession years, corporate India has been bullish on outbound M&A deals since liberalization. India Inc.'s appetite for acquisitions is reflected in the nearly 2,000 outbound merger and acquisition (M&A) deals since liberalization in 1991. After decades of limited activity, a solidly performing domestic sector, fuelled by the reforms, catalysed Indian firms' dormant ambition to establish a multinational presence. Another big spender on overseas acquisitions was the fast-growing, cash-rich healthcare sector. Indian pharmaceutical companies favoured M&A as a means to bridge the gap between their capabilities at the lower end of the pharma value chain with the front-end competencies of the acquired companies.

5. **IMF warns of growing inequality in India and China** - Mint
   The report stressed the need for broadening access to health, education and promoting financial inclusion. Highlighting the gap between the rich and the poor, the report pointed out that access to education is an important factor that explains inequality. It added that in countries including India, the percentage of people with less than four years of schooling is higher for the poor than for the rich. Similarly, there is a substantial gap in access to healthcare between high- and low-income households. It added that financial inclusion has promoted equality in India across states.

6. **FDI during Apr-Feb jumps to $37.53 bn: Nirmala Sitharaman** - Mint
   Foreign direct investment (FDI) in India increased to$37.53 billion during April-February period of the last fiscal. she said during the past three years, two applications for compulsory licensing (CL) under section 92 of the Patent Act 1970 have been received by the department of industrial policy and promotion (DIPP). Under the Indian Patents Act, a CL can be issued for a drug if the medicine is deemed unfordable by the government and grants permission to qualified generic drug makers to manufacture it. As per the World Trade Organization (WTO) agreement, a CL can be invoked by a national government allowing a company to produce a patented product without the consent of the patent owner in public interest. The US had raised concerns over issuance of the licence by India. New Delhi had so far issued only one such licence.

7. **Drug pricing regime needs to be predictable, transparent: Sanofi** – Business Standard
   Government must not place the entire burden of access to healthcare on the pharmaceutical industry alone, Sanofi India has said while hitting out at more medicines being put under price control. Any pricing regime must be predictable and transparent and must take into consideration the stringent requirements on the quality front that the manufacturers have to adhere to for patient safety, said Shailesh Ayyangar.

   Similar news in
   Sanofi wants fair drug pricing – Financial Chronicle
   Drug Pricing Regime Needs to be Predictable: Sanofi – Economic Times

8. **US watch list may hit affordable drug business –** Times of India
   The USTRs 2016 edition of 'Special 301 Report' targeting countries including India by putting these on a 'priority watch list' has been criticized by health activists, saying any change in India's patent laws will restrict the country's ability to product affordable medicines. India remains on the priority watch list and continues to be singled out for what the USTR considers to be inadequate protection of intellectual property for its pharmaceutical industry.

9. **SC clips MCI's wings, sets up ex CJI-headed panel to regulate medical education** - Times of India
   Saying the Medical Council of India (MCI) had "repeatedly" failed in its duties and the quality of medical education in the country was at its "lowest ebb", the Supreme Court on Monday appointed a high-powered committee headed by former CJI R M Lodha to clean up the system by taking over the functions of MCI. The order signals the end of the road for MCI that has been in the midst of controversies since its president Ketan Mehta was arrested in a corruption case.

The government has been actively considering scrapping MCI in its present form. The court asked the oversight committee, also comprising retired comptroller and auditor general Vinod Rai and eminent doctor Shiva Sareen, to oversee all statutory functions under the MCI Act and said policy decisions would require the panel's approval. The committee will function till the Centre puts in place a new mechanism for regulation by amending the statute or bringing a new legislation

10. **Govt gives nod for 50-bed Ayush Hospital in Mangaluru** - Times of India
    Minister for health and family welfare U T Khader said the proposed Ayush hospital will be constructed inside Wenlock Hospital campus at an estimated cost of Rs 9 crore with 60% funding from the central government under National Urban Health Mission. The new hospital will have blocks for Ayurveda, Unani, Homoeopathy and Yoga. The health department has identified 50 cents for the Ayush block. The new Ayush hospital will have medical superintendent, senior medical officers, medical officer, staff nurses, pharmacists, lab technicians and yoga therapists in addition to administrative staff.

11. **Indian doctors substitute Ayurvedic drugs for antibiotics during surgery** - Times of India
    A Meerut hospital has successfully substituted ayurvedic drugs for antibiotics during a prostatic surgery of an 83-year-old man. Usually, antibiotics are used before, during and after the surgery to prevent urinary tract infection and sepsis following endoscopic urologic procedures. Buoyed by the results, Dr. Yadav said he now plans to expand the application of ayurvedic formulations during similar surgical interventions. This is epoch making as ayurveda has the least side-effects, said Dr. Yadav.

12. **Second Pharma City mooted near Nakkapalli** – The Hindu
    According to projections of Pharmexcil, North Andhra poised to emerge as a major destination. Reliable sources in the government revealed that already 500 acres has been identified for developing a bulk drug manufacturing park near Nakkapalli. The Bulk Drug Manufacturers' Association have also said to have acquired a large parcel of land near Nakkapalli. An official of APIIC told The Hindu that both could be clubbed to make it a mega cluster for pharmaceutical units. Jawaharlal Nehru Pharma City (JNPC) has a total turnover of Rs.15,000 crore. It has provided direct and indirect employment to 15,000 most of them locals.

13. **Central Council of Health & Family Welfare appoints Rajendra Pratap Gupta as policy expert** – Financial Express
    The Government of India *vide* its gazette notification dated April 8, 2016 has nominated public policy expert, Rajendra Pratap Gupta as a member of The Central Council of Health and Family Welfare, Government of India. Gupta is the President of The Disease Management Association of India (DMAI) which focuses on Population Health Improvement Alliance. In 2015, the United Nations – ECOSEC conferred a Special Consultative Status to the DMAI, considering its work in the area of healthcare reforms.

14. **Task Force asks govt to create vision document with short & long term plan for plasma industry** – Pharmabiz.com
    A high-level Task Force on 'Development of Manufacturing Capabilities in each Medical Vertical in Pharmaceutical Production' has recommended to the government to create a vision document with short and long term plan for plasma industry in the country. In its report on policy support to biopharma, prophylactics and OTC verticals, the task force asked the government to create a vision document with short and long term plan for plasma industry in the country, as this industry is very challenging, demanding and has a very long-term effect on return on investments. It also asked the government to frame a policy to encourage the voluntary collection of plasma "Source Plasma" in India for plasma fractionation. Earlier in December 2014, the department of pharmaceuticals (DoP) had constituted this task force. The task force was asked to identify the gaps in domestic manufacturing in these verticals and suggesting ways to overcome them and also to identify the issues and support required from different government agencies and departments for achieving the manufacturing capabilities and filling the gap areas, if any, in each medical vertical.

15. **FIPO urges Union health ministry to ensure total compliance of notification of March 10** – Pharmabiz.com

    Even as the offices of the national drug regulator (DCGI) and of the state regulatory bodies are silent over enforcing the Gazette Notification of March 10 this year due to various court orders, the New Delhi based Federation of Indian Pharmacists' Organisations (FIPO) has urged the Union health secretary to take measures to ensure foolproof enforcement of the notification which prohibited manufacture and sale of 344 fixed dose combinations for human use. Stating that compliance of gazette notification is the bounden duty of both the regulators and traders/manufacturers, the Federation wanted the health ministry to make public the action taken reports of the DCGI and of the state enforcement agencies on the ban order, since the notified date of March 10.