1. **NPPA fails to fix prices of 98 drugs due to non-availability of data and information in the retail channel** – Pharmabiz.com

The national drug price regulator National Pharmaceutical Pricing Authority (NPPA) could not fix or notify the prices of 98 medicines included in Schedule--I of Drug Price Control Order (DPCO), 2013 as information was not available about these drugs.

So far, the NPPA has fixed ceiling prices of 530 formulations from the list of essential medicines included in Schedule--I of DPCO, 2013. However, it could not fix the ceiling prices of balance 98 formulations due to non-availability of data/information in the retail channel.

Now, the NPPA has sought data/information about these 98 formulations from all state governments/Union Territories, Drug Controller General of India (DCGI), drug controllers of states/UTs, IMS Health, Pharma Trac, pharma organisations like OPPI, IDMA, AIOCD, AISSPMA, CIPI, FICCI, CII, FOPE, AICDF, IPA, etc and trade associations. The NPPA has asked these stakeholders to provide related data, if available, in 30 days.

2. **Why pharma companies are no longer a defensive play** – Business Standard

Consumer goods and pharmaceuticals are generally considered to be the two defensive sectors where an investor can earn steady returns and park their money during volatile period. Not anymore, and especially not in the pharmaceutical space.

Some of the most volatile stocks in the market these days are in the pharmaceutical space, especially in the big pharma space where firms are competing with global players for a pie of the biggest market in the world, the United States. Over the years, the risk emerging from the American markets has increased as Indian players are now impacting earnings of so-called 'Big Pharma'.

Earlier, Indian companies would rush with their ANDA filings to take advantage of the small window of opportunity when a product goes off patent and the first company to file the their documents gets an exclusive period of 180 days to market the generic product along with the patent holder. Many Indian companies posted sharp growth based on this strategy. But as the number of drugs going off patent has fallen and competition increased, both within India and outside, this opportunity has shrunk.

3. **Dr Reddy's says new drug approvals will be delayed** - The Economic Times
The warning letter issued by the US Food and Drug Administration (USFDA) will impact Dr Reddy's new drug approvals, the company said in an analysts call on Monday.

Hyderabad based Dr Reddy's has come under the scanner of the USFDA for non compliance of good manufacturing norms in three of its manufacturing facilities located in Srikakulam, Duvvada in Seemandhra and Miriyalaguda in Telangana. These manufacturing facilities produce active pharmaceutical ingredients and cancer drugs for the US markets.

4. **U.S. top court allows Apotex to pursue generic version of Daiichi drug** – Reuters
The U.S. Supreme Court on Monday rejected appeals by Daiichi Sankyo Inc and Mylan Pharmaceuticals Inc seeking to stop Apotex Inc from trying to introduce a generic version of Benicar, a drug for treating hypertension.

The justices declined to review an April ruling by the U.S. Court of Appeals for the Federal Circuit in favor of Apotex.

The appeals court reversed a decision by the U.S. District Court of the Northern District of Illinois, which had dismissed Apotex's lawsuit asking for a declaratory judgment that its generic version of Benicar would not infringe upon one of two patents held by Daiichi, which manufacturers the drug.

5. **India's 'medicine man' brings pills to the poor** – Hindustan Times
It's early morning but already "Medicine Baba" Omkarnath Sharma is pounding the pavement in one of New Delhi's upscale neighbourhoods, collecting leftover pills, capsules and syrups from those who have plenty to spare. Sharma is hopeful his unorthodox service is making a difference, albeit small, in a country where 65% of the population lacks regular access to essential medicines, according to the World Health Organisation.

India spends just 1.3% of its gross domestic product (GDP) on health, according to a 2013 World Bank report, lower than war-torn Afghanistan on 1.7%. More than 60% of the population's out of pocket expenses for health are for medicines, according to government estimates. Prime Minister Narendra Modi, who swept to power at elections last May, promised in his poll manifesto to introduce an ambitious universal health care plan that assures free drugs and insurance for serious ailments.

6. **Why free medicines can transform TB management** – The Hindu
It is a well-established fact that a truly innovative intervention in disease control expands the reach of public health programmes, improves patient satisfaction and health outcomes, reduces patient costs and engages all stakeholders, especially the private sector. Yet, few such innovations appear, and when they do they are often overlooked because current health programmes are either too well-established or relatively inflexible. For better treatment outcomes, the national TB programme has come up with the transformational idea of providing free drugs to all patients in a district irrespective of whether they seek treatment in the public or the private sector.

7. **Centre sanctions US$ 150 bn to CDSCO for integrating e-governance across states with national portal** – Pharmabiz.com
The CDSCO has initiated a plan to strengthen its e-governance initiative by embarking on linking the existing system. To step up the initiative, the government has already sanctioned US$ 150 billion for the networking and other processes involved in it, informed Dr. G N Singh, Drug Controller General of India (DCGI).

In its first phase, the CDSCO plans to integrate the e governance system adopted across various state licensing authorities (SLAs) that are running successfully throughout the country. Taking the matters ahead, the Centre already had a high profile meeting with heads of SLAs from Gujarat, Maharashtra, Goa, Karnataka, Tamil Nadu, Orissa etc this week in Delhi.

Dr Singh further informed that they plan to complete the whole project within a span to 6 to 9 months. The linking of the e-governance system will ensure pulling of important data from each of the states like ADR reporting; import-export data; drug distribution data; drug approval data etc to be saved on the national portal, which can be easily accessed by patients.

8. **US regulator approves Gilead sciences' HIV drug cocktail** – Asian Age
   Gilead Sciences Inc said the US Food and Drug Administration had approved its HIV drug cocktail, Genvoya, to treat patients aged 12 and above.Genvoya, a combination tablet approved as a complete regimen, is designed to treat previously untreated patients weighing at least 35 kilograms (77 pounds), the FDA said on Thursday. The drug also aims to treat adults whose HIV-1 infection is currently suppressed due to antiretroviral therapy.

9. **IDMA urges DTAB to amend Sch V of D&C Act as it refrains nutraceutical cos from using vitamins in health supplement** – Pharmabiz.com
   The Indian Drug Manufacturers Association (IDMA) has urged the Drugs Technical Advisory Board (DTAB) to delete Schedule V of Drug and Cosmetics Act (D&C Act), 1945 or to amend the schedule in such a manner that it does not overlap with Recommended Daily Allowance (RDA) as it would refrain the nutraceutical manufacturers from including vitamins in their health supplements and would also affect the over the counter (OTC) sale of health supplements.

   Earlier, the DTAB sub-committee had proposed and it was later accepted by the DTAB in its 68th meeting held on June 12, 2015, that all vitamins incorporated in a product, and having a quantity as mentioned in schedule V (prophylaxis or therapeutic), will imply that the formulation concerned is a drug.

10. **Hanmi Pharm says got drug technology transfer contract from Janssen** – Reuters
    Hanmi Pharm Co Ltd
    * Says got $105 million in upfront payment from Janssen for technology transfer for diabetes, obesity drug
    * Says could get up to $810 million in additional payments from Janssen if certain milestones met