1. **PPP model to be promoted for diagnostic facilities for poor: Union Health Minister** – Business Standard

Union Health and Family Welfare Minister Shri JP Nadda today urged the private sector to join hands with government’s Public Private Partnership (PPP) model for three areas: Prime Minister Dialysis Scheme, Free Diagnostics facilities to rural people and strengthening of National Institute of Pathology. Inaugurating a Scientific Symposium, organized by Dr Lal PathLabs to mark the 100th Birth Anniversary of its Founder, Dr (Maj) SK Lal, ShriNadda said, "The government is committed to take PM Dialysis Yojna to district level for free facility for BPL and 400 centres proposals on the PPP model from states have been approved. The government cannot do it alone and reputable & leading private players like Dr Lal PathLabs need to come together." Appreciating Dr Lal PathLabs’s immense contribution in the field of laboratory medicine, Union Health Minister said, "The government will provide full support to private players which have expertise, brand & credibility and can provide quality & affordable facilities to a large number of people."

2. **Here’s why health insurance must be provided at affordable rates in a group policies with NPS** – The Financial Express

The joys of being young—earning your own income, spending it on the latest gadget without having to explain it, feeling invincible. The idea of growing old and infirm without adequate support is just too far-fetched. Surely, we would do well in our careers or start-ups that we won’t end up like you, grandma. Any mention of retirement or pensions just induces a yawn amongst the millennial generation. This may be one of the many reasons why young people don’t consider saving in pension funds. It’s easy to accept this lack of investor awareness or maturity as the main reason why Indians don’t buy financial products. But as someone with a couple of decades in the finance industry, I still have issues with the Indian pension system. First, it’s confusing to be bombarded by many disparate lines of communication about financial products. There are mutual funds, insurance policies, pension systems ... all talking about similar topics of investing for various goals. At times, they contradict one another. Why can’t the finance industry sing from the same hymn book? Don’t they all have separate roles that complement one another? I know I should get a well-qualified,
experienced and fiduciary financial adviser who can explain all these, but since there so few of those around, that’s not an option for most.

3. **Pricing pressure on Indian drug companies to continue: Fitch Ratings** – Business Standard

Indian pharmaceutical industry will face pricing pressure in the US and domestic markets for some more time to come and the players have to focus their research and development (R&D) on speciality/complex drugs, said global credit rating agency Fitch Ratings. Giving a stable outlook for the Indian pharmaceutical industry, Fitch said: "We feel that speciality/complex drugs represent a key growth area, given the increasing shift towards speciality and more targeted therapies in the US." "We acknowledge the above-average level of associated risks, but feel that this shift in focus will be important for the Indian companies to move to the next level and sustain growth momentum," Fitch added. According to Fitch, rising competition in the pure generics segment has led many of the top Indian pharma companies to focus increasingly on speciality and complex generics through higher R&D spending.

Similar report –

- Indian pharma’s focus on acquisitions to limit deleveraging: rating agency Fitch – The Indian Express

4. **E-Pharmacies come under scanner after complaints of spurious drugs** – Mail Today

It’s been a normal practice for many among us to purchase medicines online. But are we sure that these medicines are not fake? It now appears that online sale and purchase has resulted in massive misuse of the drugs and not all drugs sold online are genuine. Besides, there are question marks on the authenticity of the prescriptions that are submitted online for purchase of the medicine. Now, the Central Drug Supervision Control Organisation (CDSCO) has taken note of the situation and submitted its report to the Drug Controller General of India (DCGI), with some amendments, on whether e-pharmacy should be allowed or not. Delhi's drug controller Dr Mrinalini Darswal told Mail Today: "As per the Drugs and Cosmetics Act 1940 and Drug and Cosmetics Rules 1945, online sale of drugs is prohibited in India. In our country, drugs are supposed to be sold over the counter with a prescription and the chemist selling the medicine should hold a pharmacy degree".

5. **Smart sourcing of comparators to reduce biosimilars development cost** – Business Standard

Since the advent of the pharma industry, the primary source of origin for drugs was synthetic chemicals. These were either derived from petrochemicals, plants or animals - primary process involved converting the active ingredient into a synthetic chemical to be used as tablets, capsules, injections etc. At the turn of the century, due to high instances of drug resistance such as antibiotic resistance, increased side effects and India reaching the threshold limit in synthetic chemistry, the R&D process started looking for the next ‘frontier’. The next ‘frontier’ was found in medicines derived from living cells, which were not synthetic chemicals but were derived from biological sources. This was the birth of the biologic industry which went on to produce some blockbuster multi-billion dollar drugs. One of these drugs is Humira - an all-time highest selling biologic drug with sales of over $ 8 billion per year. When a copy of a biologic is made (also called as a generic), it is called a biosimilar (bio - derived from biological sources; similar - because it’s a similar, not a copy). A biologic drug cannot be produced in an exact copy like a generic, but it can be made alike to produce similar effects as of the original drug.

6. **IMA to hold protest against govt’s proposal to dissolve MCI tomorrow** – The Times of India

The Indian Medical Association, representing over 2.5 lakh doctors across the country, will hold a nationwide protest on Wednesday against the government's proposal to dissolve the Medical Council of India (MC) and replace it with National Medical Commission (NMC). Calling it "undemocratic", IMA said the government's move will cripple the functioning of the medical profession by making it completely answerable to the bureaucracy and non-medical administrators. The Association plans to organise over 500 dharnas across the country. The protest in Delhi will be
held at Jantar Mantar. Raising concerns against the proposed National Medical Commission Bill that seeks the dissolution of the Medical Council of India, IMA said in a statement, "The government must consider introducing amendments to the existing MCI Act to make it transparent, accountable, robust and self-sufficient."

**Similar reports**
- [Indian Medical Association to hold protests across the country against NMC bill](#) – The Indian Express
- [Doctors’ nation-wide satyagraha today](#) – The Hindu
- [World Medical Association supports IMA against NMC Bill](#) – Business Standard
- ['Indian pharma's focus on acquisitions to limit deleveraging'](#) – Moneycontrol.com

7. **Sun Pharma, others ink pact for malaria project in Mandla** – The Economic Times
Drug major Sun Pharma today announced signing of tri-party agreement between Indian Council of Medical Research, Government of Madhya Pradesh and Foundation for Disease Elimination and Control of India (FDEC- India) to launch the malaria-free India demonstration project in Mandla district of Madhya Pradesh. FDEC-India has been established by Sun Pharma as part of its corporate social responsibility initiative. Commenting on the pact, Sun Pharma MD Dilip Shanghvi said: "The Public-Private-Partnership agreement signed today is an important step towards elimination of malaria from India by 2030." As per the pact, ICMR’s National Institute for Research in Tribal Health, MP Government and FDEC-India will accomplish the goals of malaria elimination from Mandla district and prevent re-introduction by use of vector control and case management as per national and/or WHO norms of malaria elimination, Sun Pharma said in a statement.

8. **Roche launches global initiative for cancer treatment research** – Business Standard
Roche has launched the global cancer immunotherapy Centers of Research Excellence (imCORE) network. This network brings together many of the world’s leading scientific and clinical experts in cancer immunotherapy to collaborate in investigating the most promising new treatment approaches. The goal is to rapidly initiate pre-clinical and clinical research based on the latest scientific discoveries and to aggregate and share data to accelerate the search for cures for people with cancer. The imCORE Network will focus on identifying approaches to expand the number of people who benefit from cancer immunotherapy by exploring new ways to activate a person’s immune system to fight their cancer.

9. **NPPA revises ceiling prices of 45 scheduled drugs, retail prices of 11 other products** – Pharmabiz.com
The national drug pricing regulator National Pharmaceutical Pricing Authority (NPPA) has fixed/revised ceiling prices of 45 scheduled formulations of Schedule-I under Drugs (Price Control) Amendment Order, 2016 and Retail Price of 11 formulations under DPCO, 2013 as per notification dated 10.11.2016.

Name of the 45 scheduled formulations for which ceiling prices have been revised are pralidoxime chloride (2 - PAM) injection, efavirenz tablet, imatinib capsule, folic acid capsule, benzoyl peroxide cream, clomiphene capsule, acetazolamide capsule, salbutamol capsule, paracetamol oral liquid, pheniramine injection, naloxone injection, lorazepam injection, phenytoin injection, ceftazidime powder for injection, artesunate + (sulphadoxine+ pyrimethamine) tablet, metoclopramide oral liquid, streptokinase injection, povidone iodine solution, betamethasone cream, tropicamide eye drop, cetrimide solution, mannitol injection, ranitidine injection, diclofenac injection, ciprofloxacin ointment, gentamicin drops, pilocarpine drops, timolol drops, atropine drops, homatropine drops, hydrocortisone injection, rifampicin tablet, fluconazole capsule, efavirenz capsule, ritonavir capsule, paracetamol suppository, paracetamol suppository, paracetamol oral liquid and carboxymethylcellulose drops.
Even after more than one year has passed since the Pharmacy Practice Regulations 2015 (PPR 2015) was released by the Pharmacy Council of India (PCI), the state pharmacy councils of both Andhra Pradesh and Telangana states have so far failed to comply with these regulations and these states are just running the show by mere conducting registrations and renewals of pharmacists.

Though the officials at the pharmacy council and drug control administration claim that things are getting streamlined and steps are being taken to incorporate the new pharmacy practice regulations, but the ground reality is that both the pharmacy councils have not taken any steps whatsoever to implement these regulations. According to Sanjay Reddy, president of Telangana Pharmacy Society, the main reason for the lackadaisical attitude of the officials for not complying the pharmacy regulation act is because the PCI is not strictly implementing its regulation on the state councils.