

1. [Right-Pricing Drugs](#) – Business Today

On August 2, 1997, a gazette notification had stated that "to streamline and simplify the procedure and to bring about a greater degree of transparency, an expert body should be constituted with the powers to fix prices of bulk drugs and formulations under the Drugs (Prices Control) Order". It pretty much summarised the raison d'être of the National Pharmaceutical Pricing Authority (NPPA).

Cut to 2016. NPPA's future looks unclear, at least in its present form. The pharma industry has no clue what lies ahead - it could be disbanded, it could get more powers, or may even cease to exist as an independent regulator and become a part of the government machinery. Apparently the goal is to refine the regulatory regime to facilitate ease of doing business and, as a corollary, pose fewer hurdles for the industry.

1. [Right-Pricing Drugs](#) – Business Today
2. [Access to Medicine Index shows most essential drugs out of reach of people](#) – The Financial Express
3. [Six months after HC refused to stay ban on drugs, 344 fixed-dose combos frozen](#) – The New Indian Express
4. [Major online pharmacies to have ombudsman panel](#) – Indian Express
5. [Doctor's tenacity nudges government to overhaul TB programme](#) – The Indian Express
6. [New HIV infections fall in India, but stigma remains: UNAIDS](#) – Hindustan Times
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9. [Burden of birth: Where a pregnancy costs a mother her life](#) – Hindustan Times
10. [Novartis acquires US pharma research firm Selexys Pharmaceuticals](#) – ET Health
11. [GlaxoSmithKline seeks U.S. approval for triple lung drug](#) - Reuters

2. [Access to Medicine Index shows most essential drugs out of reach of people](#) – The Financial Express

While India may be one of the fastest-growing pharma markets in the world—it is one of the world's leading generic producers—it still needs to do a lot in terms of research and pricing, especially if one were to go by the recently launched Access to Medicine Index, compiled by Netherlands-based Access to Medicine Foundation, funded by the Bill & Melinda Gates Foundation, the UK government and the Dutch ministry of foreign affairs. According to a report in the Business Standard, none of the the Indian pharma majors figured amongst the top 20 companies which attempted to make essential medicines, like those for malaria, HIV, tuberculosis, etc, that were affordable for those in low- and middle-income countries.

3. [Six months after HC refused to stay ban on drugs, 344 fixed-dose combos frozen](#) – The New Indian Express

Six months after the Madras High Court refused to stay the ban on 344 fixed-dose combination drugs, the Tamil Nadu State Drugs Control Department last week issued a circular to all drug inspectors to freeze the drugs falling in the category.

The Union government in March banned these 344 fixed dose combinations, citing the reason that these fixed drug combinations lacked therapeutic justification, and also could lead to antibiotic resistance in the population. Vicks Action 500, Saridon, Dart, Corex cough syrup, Codylex syrup and Tryglynase tablets for diabetic were some of the banned FDC drugs that are most commonly took as self-medication.

4. [Major online pharmacies to have ombudsman panel](#) – Indian Express

Major online pharmacies such as 1mg, Bigchemist, Medlife and Pharmeasy will soon appoint an ombudsman commission, comprising three reputed members of civil society, in order to address any queries or grievances that a customer may have against them.

“We would be setting up a ombudsman consisting of three members of civil society who are not at all involved in our businesses. All grievances against the e-pharmacies would be routed to them. They would be checking us and holding us accountable to the standards we claim to provide,” said Prashant Tandon, co-founder, 1mg.com, who is also the president of Indian Internet Pharmacy Association (IIPA).

As a part of voluntary code of conduct, all major e-pharmacies, which are IIPA members, will ensure that no schedule X and other sensitive habit forming medicines are processed through their platform. Moreover, the e-pharmacy players will partner with the government (Centre or state) for any recall of medicines and to collect adverse events of medicines (consumer reports). Such adverse events would then be submitted to National Centre for Pharmacovigilance.

Also appeared in [DNA](#) and [The Hindu Business Line](#)

5. [Doctor’s tenacity nudges government to overhaul TB programme](#) – The Indian Express

In the last six years, Haryana-based Dr Raman Kakar compiled a list of 5,300 cases where patients had a relapse of tuberculosis (TB) even after completing the full medication dose. He learnt that in several cases patients had completed full course of medication on six occasions but the disease still resuscitated, forcing them to seek another dose.

On Monday, he was vindicated when his PIL nudged the Central government to overhaul the entire TB programme and set a deadline for the new drug regimen. The new regimen will introduce daily dosage instead of intermittent dose that involves giving medicines thrice a week.

6. [New HIV infections fall in India, but stigma remains: UNAIDS](#) – Hindustan Times

New HIV infections are down in India, with the world’s second-most populous country accounting for an estimated 89,000 of the world’s 2.1 million people newly-infected with the virus that causes AIDS in 2015.

Globally, more than one million people started getting treated for HIV and AIDS over the past six months, up from 17 million by the end of 2015. Indian pharmaceutical companies played a huge role in boosting access to treatment by bringing down the price of HIV drugs. In 2001, Cipla introduced the world’s first 3-in-1 fixed dose ART combination (stavudine + lamivudine + nevirapine) at less than \$1 per day compared to the then market price of \$12,000 per patient per year.

The report warns of the risk of drug resistance and the need to reduce the costs of second- and third-line treatments. “New threats are emerging and if we do not act now we risk resurgence and resistance. We have seen this with TB. We must not make the same mistakes again,” said Michel Sidibé, executive director of UNAIDS.

7. [Cash crunch: Firms offer costly drugs, devices on EMIs](#) – Hindustan Times

Finding it tough to buy expensive medicines and medical devices due to the cash crunch? Worry not, help is at hand. Leading drug and medical device makers have found ways around the problem.

In January 2016, Mumbai-based drug maker Glenmark introduced easy monthly instalment (EMI) schemes on two of its cancer drugs, which treat prostate and breast cancer. With the ongoing demonetisation drive, the company is offering two more top-selling cancer drugs under the EMI scheme and may extend it to other drugs too.

8. [Antibiotics 101](#) – Mumbai Mirror

If there is a single drug that requires intelligent supervision, it is an antibiotic. Several studies tell us that patients with mild infection, particularly of the throat, do equally well without antibiotics. Nevertheless in this city patients buy their own antibiotics according to their choice, depending on what has worked for them in the past. Or they seek advice from the surrogate doctor: the chemist. Physicians are quick to dole out counsel on the phone, to keep patients' repeated requests out of their hair. There's no norm concerning how long one should use an antibiotic, but doctors feel they should be used for three to five days, or else the infection is not properly eradicated.

9. [Burden of birth: Where a pregnancy costs a mother her life](#) – Hindustan Times

The maternal mortality rate (MMR) -- deaths per 100,000 live births -- fell from 212 in 2007 to 167 in 2013 but too many women are dying still.

And as the maternal death rates remain the highest in the populous states of Assam, Bihar, Madhya Pradesh, Odisha, Rajasthan and Uttar Pradesh, the total number of women dying is also high.

To tackle this, Prime Minister Narendra Modi launched the Pradhan Mantri Surakshit Matritva Abhiyan two weeks ago to provide free antenatal – before childbirth - care to pregnant women on the 9th of every month at government health centres and hospitals across India's 687 districts.

Under the JSY, all services for the mother and her newborn are free and incentives are given to families to opt for institutional deliveries, yet corruption and apathy in the public health system make the poor hesitant in accepting services.

10. [Novartis acquires US pharma research firm Selexys Pharmaceuticals](#) – ET Health

Swiss-based pharmaceuticals giant Novartis said Monday it was acquiring Selexys Pharmaceuticals Corp., a US research lab in blood and inflammatory disorders, in a deal costing up to \$665 million (627 million euros).

Selexys specialises in sickle cell disease, an inherited form of anaemia that is most common among people of African descent.

In a statement, Novartis said it exercised rights to buy the company after seeing results from a large trial into a drug to treat pain for people with the disease.

The drug, called SelG1, aims at easing so-called vaso-occlusive pain crises, which happen when sickle-shaped red blood cells block the flow through blood vessels.

The prototype treatment has just completed the second phase of the three-phase process to test new drugs for safety and effectiveness.

11. [GlaxoSmithKline seeks U.S. approval for triple lung drug](#) - Reuters

GlaxoSmithKline said on Monday it had filed its new three-in-one inhaled lung drug for U.S. approval, putting it on track to reach the market ahead of rivals in 2017, assuming it wins a green light.

Britain's biggest drugmaker is vying with competitors including AstraZeneca and Novartis to develop so-called "closed triple" therapies, offering a single inhaler for patients with chronic obstructive pulmonary disease (COPD).