

**OPPI****Publication: The Economic Times****Edition: National****Date: August 13, 2014****Opinion piece: Ranjana Smetacek, Director-General, Organisation of Pharmaceutical Producers of India****Headline: [Random decisions in pharma pricing bad for India's health](#) (scan attached as well)**

**Synopsis:** On July 10, the National Pharmaceutical Pricing Authority (NPPA) arbitrarily fixed prices for all anti-diabetic and cardiovascular drugs outside the scope of the Drug Price Control Order (DPCO) 2013, with no warning to manufacturers. This action transgressed the mandate of DPCO 2013, which addressed pharmaceutical pricing based on the 'essentiality' criteria and clearly stated that the "intention of the policy is to bring essential medicines under price control and not to control the Indian pharmaceutical industry" — a position that has been enunciated by the Department of Pharmaceuticals in an affidavit before the Supreme Court. The drug pricing regulator invoked paragraph 19 of the DPCO 2013 which authorises it "in case of extraordinary circumstances" to fix the ceiling price or retail price of any drug in public interest "for such period" as it deems fit. Clearly, para 19 is a special power to be used only when an extraordinary circumstance arises and for a temporary period of time.

**Website: First Post****Edition: Online****Date: August 13, 2014****Headline: [Drug price control: Pharma sector seeks dialogue with govt on issue](#)****[(Tweeted by Gauri Kamath) @Apothecurry: Another decade-long talkathon? MT"@FirstpostBiz: Pharma seeks dialogue with govt on drug price control]**

**Synopsis:** After losing their petition in the Delhi High Court seeking a stay on the drug price control order, the industry has called for a dialogue with authorities, saying such issues are best ironed out through dialogues and not resolved in court rooms. "I think unless there is dialogue with the appropriate authorities, we are going to run into these kind of issues again. These issues are not to be settled in court rooms," a senior official of the Organisation of Pharmaceutical Producers of India (OPPI), who did not wish to be named, said on the sidelines of an event here over the weekend. It can be noted that the National Pharmaceutical Pricing Authority (NPPA) on July 10 had brought over 100 non-scheduled drugs under price control regime as per paragraph 19 of the DPCO (drug price control order).

**Patents/ Compulsory licensing/ IPR****Publication: The Hindu Business Line****Edition: National****Date: August 13, 2014****Headline: [Health Ministry continues to push for generic version of cancer drug](#)**

**Synopsis:** The Health Ministry has sent a fresh communication to the Department of Industrial Policy & Promotion (DIPP) on why there was an "urgent" need to allow copies of US-based Bristol Myer Squibb's anti-cancer drug Dasatinib to be made in India. "The Health Ministry has sent us a fresh proposal requesting grant of Compulsory License for Dasatinib. It has answered queries we had posed based on its previous submission as we were not satisfied that its arguments met the basic conditions needed for granting a CL," a DIPP official told BusinessLine.

**Website: Pharmabiz****Edition: Online**

**Date: August 13, 2014**

**Headline: [The Patent Settlements](#) (editorial)**

**Synopsis:** A new trend of collusion of multinational drug corporations with large Indian companies is emerging in the Indian pharmaceutical market to overcharge essential drugs which are under patent. After the amendment of Indian Patent Act in 2005 allowing product patents, MNCs started launching a number of 'patented drugs' in the Indian market at very high prices. Although many of these patented drugs are actually not new molecules, the MNCs have the exclusive rights to market these products in the Indian market. Large Indian companies realized this game and started challenging the grant of patents to MNCs fully realizing that they can easily get a verdict against the MNCs. In a situation like this, the best option for MNCs is to arrive at a settlement with the challenging Indian company to ensure that there is no judicial intervention. Some such settlements between MNCs and Indian companies have already taken place and many more are likely soon. With this, the Indian companies which came out to fight against profiteering of MNCs in patented drugs have turned into partners to the same MNCs. It is quite possible that these mutually beneficial deals may flourish in the Indian pharmaceutical market at the cost of millions of patients if there is no timely intervention by the government agencies.

### Clinical trials

**Publication: The Economic Times**

**Edition: Online**

**Date: August 12, 2014**

**Headline: [Centre, ICMR to produce files relating to cancer drugs licence](#)**

**Synopsis:** The Supreme Court today directed the Centre's competent authority to place before it the file relating to licences given for the administration of two vaccines for cervical cancer prevention. The apex court also directed the Centre to place before it the report of Parliamentary Standing Committee on Health and Family Welfare which has dealt with the issue of drugs relating to HPV vaccine for prevention of cervical cancer.

#### Similar reports in-

The Times of India- [SC seeks records of cervical cancer vaccine's clinical trials](#)

The Financial Express- [SC asks Centre to produce files related to grant of cancer drug licences to GSK, Merck Sharpe](#)

The New Indian Express- [SC Summons Anti-cervical Cancer Vaccine Nod Records](#)

The Pioneer- [Drug authority, ICMR to present files to SC](#)

Outlook- [Produce Files on Cancer Drugs Licence: SC to Centre](#)

### Health ministry

**Publication: The Times of India**

**Edition: National**

**Date: August 13, 2014**

**Headline: [National donation database top priority, health minister Harsh Vardhan says](#)**

**Synopsis:** Health minister Harsh Vardhan tells Durgesh Nandan Jha how he plans to expedite the process to put a national organ donation registry in place and streamline the process of body-pledging so that the massive gap between demand and supply can be breached.

**Publication: The Economic Times**

**Edition: Online**

**Date: August 12, 2014**

**Headline: [MCI asked to look into bribery charges against doctors](#)**

**Synopsis:** Amid allegations of some doctors' accepting bribes to prescribe branded drugs, Health Minister Harsh Vardhan today said Medical Council of India has been asked to look into the issue. Replying to a supplementary in Rajya Sabha regarding a sting operation allegedly showing doctors taking bribe to prescribe branded drugs, he admitted some doctors were engaged in unethical practices and accepting

indirect bribe.

**Similar report in-**

NDTV- [Doctors Caught Taking Bribes. NDTV Expose Raised in Parliament](#)

**Publication: Business Standard**

**Edition: National**

**Date: August 13, 2014**

**Opinion piece: Subir Roy**

**Headline: [Subir Roy: Who will police the doctors' policeman?](#)**

**Synopsis:** The new union minister for health, Harsh Vardhan, has some good news for all by declaring that his ministry is drawing up a panel of respected medical practitioners and consumer law experts to suggest ways of bringing in greater transparency and accountability in medical practices. This is vital in a poor country where people meet an inordinately high amount of their medical expenses (59.4 per cent) out of their own pockets. If public healthcare is highly non-functional, then private healthcare has to be properly regulated. The moves come after a TV channel, through a sting operation, revealed that doctors were routinely getting a commission - sometimes as much as 30-50 per cent - for prescribing costly diagnostic tests.

**Publication: The Asian Age**

**Edition: National**

**Date: August 13, 2014**

**Headline: [Give generic drugs, government tells CGHS](#)**

**Synopsis:** With an aim to bringing down healthcare costs, the Union health ministry has asked Central government-run hospitals and dispensaries (CGHS) to prescribe only "generic drugs" and not branded drugs. According to the health ministry, "proprietary" medicines will be reduced drastically from these hospitals and they will have only those items for which no equivalent generic preparations are available.

**Publication: The Times of India**

**Edition: Online**

**Date: August 12, 2014**

**Headline: [Ebola outbreak: No panic movement by Indians from west Africa](#)**

**Synopsis:** There is no panic movement out of west Africa by Indian nationals living in the region following the spread of the Ebola virus disease, officials of the Indian missions in Nigeria and Ghana have confirmed to IANS. The World Health Organization (WHO) has said that a total of 1,848 cases have been reported with 1013 deaths in Guinea, Liberia, Nigeria and Sierra Leone between Aug 7 and 9.

**Modi government/ Research**

**Publication: The Economic Times**

**Edition: National**

**Date: August 13, 2014**

**Headline: [Narendra Modi may announce R&D institutes for biotech, pharma & auto in partnership with private companies](#)**

**Synopsis:** State-funded research in areas such as biotechnology, pharmaceuticals and automobile manufacturing with the participation of the private sector may be among Prime Minister Narendra Modi's big announcements in his maiden Independence Day address from Red Fort on August 15. The idea began to take root after Biocon CMD Kiran Mazumdar-Shaw met Minister of State for Commerce Nirmala Sitharaman and said the biotech industry was willing to pitch in for this kind of research, the official said, adding that sovereign holding of patents was among the spurs to the concept.

**WTO/ Indo- US ties**

**Publication:** The Economic Times

**Edition:** Online

**Date:** August 13, 2014

**Headline:** [John Kerry, Chuck Hagel visits partly successful in putting Indo-US relations back on track](#)

**Synopsis:** Two big visits - Secretary of State and Defence Secretary - from the US in successive weeks have tried to set in motion the partnership that has been under stress since 2011. The two nations have realised that a lot of work is needed in defence, nuclear energy, migration issues and WTO matters as PM Narendra Modi prepares for his trip to the US next month. While Secretary of State John Kerry and Defence Secretary Chuck Hagel's hopes were raised with the Modi government inviting investments in key sectors, differences continue to persist on a range of issues that will shape bilateral ties in the years to come.

**Similar reports in-**

**Business Standard-** [India to stick to its stance at WTO talks](#)

**The Hindu-** ['Explore trade potential within BRICS'](#)

**Publication:** The Financial Express

**Edition:** National

**Date:** August 13, 2014

**Opinion piece:** Nilanjan Banik is with Mahindra Ecole Centrale, Hyderabad

**Headline:** [Column: The WTO imbroglio](#)

**Synopsis:** The recent India-US spat at the World Trade Organization (WTO) over signing trade facilitation agreements to ease worldwide customs rules has eroded the much-touted success of the Bali WTO ministerial meet. At the Bali ministerial (held in December 2013), world leaders focused on a small set of issues related to trade facilitation and food security, instead of the omnibus agenda that encompasses the original Doha Development Round. Negotiations on the full Doha Development Round have stalled over disagreement on a number of major issues, such as agriculture, industrial tariffs, non-tariff barriers (NTBs), services, and trade remedies. Trade punters thought the Bali WTO ministerial was successful as it focused on a subset of the larger trade agenda, with India initially going along with most breakthroughs. India is now declining to sign the trade facilitation agreement without a parallel agreement allowing developing countries more freedom to subsidise and store food, which are important from the welfare perspective. There are two aspects of this deadlock—trade facilitation and agreement on agriculture (AOA).

**Publication:** The Hindustan Times

**Edition:** Online

**Date:** August 12, 2014

**Opinion piece:** Devinder Sharma, food policy analyst

**Headline:** [We need to tick all the right boxes next time](#)

**Synopsis:** By refusing to ratify the protocol for amendments of the Trade Facilitation Agreement by July 31 unless linked to stockholding foodgrains and an assured income for farmers, India has used its bargaining power to seek a permanent exemption that enables it to protect the livelihood security of its 600 million farmers against the onslaught of cheaper and highly subsidised food. By refusing to compromise the livelihood of its huge farming population at the altar of trade, India has demonstrated that it means business.

#### Drug quality/ Drug regulation

**Website:** Pharmabiz

**Edition:** Online

**Date:** August 13, 2014

**Headline:** [Indian pharma industry needs to arm itself to be in perpetual audit mode: Dr Vinay Nayak](#)

**Synopsis:** Indian pharma industry needs to arm itself to be in perpetual audit mode. This is because of

the new stringent global regulatory norms that are being enforced and the frequent inspections by the international regulatory enforcement teams, said Dr Vinay G Nayak, president, technical operations, Alembic Pharmaceuticals. Since 2008, the US FDA issued 483s warning letters and imposed ban on production plants of Indian pharma companies following non adherence to quality standards and have put the sector under surveillance. The only way to gain confidence of the regulator, clear doubts and relax scrutiny would be to put in place systems to document practices, prevent microbial contamination of drugs, bring in reliability and integrity in procedures across laboratory and manufacturing systems, he added.

**Publication: The Wall Street Journal**

**Edition: Online**

**Date: August 12, 2014**

**Headline: [India Outlines Plan to Boost Inspections of Drug Facilities](#)**

**Synopsis:** As India grapples with concerns that its domestic drug makers are plagued by quality lapses, the national regulator has sent state authorities a list of practices that must be followed – or improved – in order to successfully inspect manufacturing facilities. The steps outlined in the Aug. 6 letter from the Central Drugs Standard Control Organization, which oversees drug approvals and clinical trials, among other things, calls for tightening inspection procedures, issuing reports more quickly and improving the process for qualifying inspectors.

#### FDI

**Publication: The Times of India**

**Edition: Online**

**Date: August 13, 2014**

**Headline: [Insurance bill headed for cold storage?](#)**

**Synopsis:** The controversial insurance bill is likely to be referred to the select committee of Parliament just before the session ends, amid receding hopes in government over convincing the opposition on supporting its first major economic reform initiative. Government sources said a decision has been taken to refer the bill to the select committee and an announcement could be made in Parliament within a couple of days, unless the session is extended by some days.

**Publication: The Financial Express**

**Edition: National**

**Date: August 13, 2014**

**Opinion piece: Devraj Singh, executive director, Tax & Regulatory Services, EY**

**Headline: [Column: Take FDI norms beyond symbolism](#)**

**Synopsis:** The change in government has created a buzz in the economy with major reforms announced or believed to be in the pipeline. All this has set a positive mood for foreign investors. Such investors, who were sitting on the side-lines and waiting for a stable government in India for long, are now willing to invest provided a conducive environment is created. It is high time that the new government assessed the situation and brought about more investor-friendly steps that showcase India as a mature economy to the world. The Budget announcements liberalising sectors like defence manufacturing, insurance, construction; the clarification on e-commerce for manufacturing entities; and the easing of conditions related to warrants and partly-paid shares—all are welcome steps in this regard. The issue of a list of defence items requiring industrial licence, phasing out the redundant NIC 1987 coding system and increasing the validity period of the industrial licence government signals how eager India is to improve its 'ease of doing business' rating.

#### Universal Immunisation Programme

**Publication: Business Standard**

**Edition: Online**

**Date: August 12, 2014**

**Headline: [Rotavirus can reduce 26,985 deaths in India: Report](#)**

**Synopsis:** The central government's decision to introduce rotavirus vaccine in India's Universal Immunization Programme can reduce as many as 26,985 deaths annually due to rotaviral diarrhoea, a study said. It also said the vaccine can also lead to 291,756 fewer hospitalizations. Rotaviral diarrhoea is the common cause of severe diarrhoea among infants and young children. The study by Vaccine journal "estimates 11.37 million episodes in India annually", according to a statement.

### General Industry

**Publication:** The Hindu Business Line

**Edition:** Online

**Date:** August 13, 2014

**Opinion piece:** Jacob Jacob, Chief People Officer, Apollo Hospitals

**Headline:** [Steering India's healthcare sector](#)

**Synopsis:** Most discussions about the health care sector these days are centred around its problems: spiralling costs, lack of access and disparate quality. Therefore, the new Government's 10- point agenda which included healthcare and education reform as one of the top-five issues on it, reflects a positive trend. It was, indeed, an encouraging start to a healthier tomorrow. There is ample conclusive evidence world over to prove that improved health leads to better economic performance and prosperity.

**Publication:** The Economic Times

**Edition:** Online

**Date:** August 12, 2014

**Headline:** [WHO approves use of experimental drugs as Ebola death toll tops 1,000](#)

**Synopsis:** The World Health Organization authorised the use of experimental drugs in the fight against Ebola on Tuesday as the death toll topped 1,000 and a Spanish priest became the first European to succumb to the latest outbreak of the virus. The declaration by the UN's health agency came after a US company that makes an experimental serum said it had sent all its available supplies to hard-hit west Africa.

**Similar reports in-**

Mint- [Canada to donate its own Ebola vaccine to WHO for use in Africa](#)

Business Standard- [WHO backs use of experimental Ebola drugs in West Africa epidemic](#)

The Times of India- [WHO backs use of experimental Ebola drugs in West Africa](#)

The Hindu- [Ethical to use untested Ebola drugs: WHO](#)

Deccan Chronicle- ['Ethical' to use experimental drugs in Ebola fight: WHO panel](#)

Reuters- [WHO hopes for more Ebola drug doses, vaccine progress by end of year](#)

**Website:** Pharmabiz

**Edition:** Online

**Date:** August 13, 2014

**Headline:** [Need to screen migrant populations to prevent outbreaks like Ebola in India; Prof Abhay Chowdhary](#)

**Synopsis:** In order to work towards prevention of outbreak of viral infections such as Ebola in some of the African countries, there is a need for regular screening of migrant populations reaching India to detect such possibilities. As of today, there are no referral regional centres in place to detect such kind of outbreaks, informs Prof. Abhay Chowdhary, director, Haffkine Institute (HITRT), Mumbai. A multidisciplinary regional centre for disease control has been planned to be set up at HITRT for Western India as a part of the institute's Vision -2020 programme for detecting infections and disease control.

**Publication:** The Economic Times

**Edition:** Online

**Date:** August 12, 2014

**Headline:** [PPP only solution to healthcare challenge in India: Dr Jagdish Prasad, DGMS](#)

**Synopsis:** Inviting active industry participation to provide healthcare services in India, Dr Jagdish Prasad, Director General of Health Services, today said that Industry should adopt one district in each state to upgrade the medical facilities in District and primary health centres. "Industry should adopt one district in each state, upgrading the medical facilities in District and primary health centres to provide the best possible quality healthcare services to the common man," he said at a conclave on 'NextGen Healthcare - Roadmap: Healthcare for All', organized by Confederation of Indian Industry here.