

**NPPA/ Drug pricing****Publication: The Telegraph****Edition: Kolkata****Date: August 15, 2014****Opinion piece: G.S. MUDUR****Headline: [HOPE, SPELT OUT IN 72 WORDS](#)**

**Synopsis:** Health activists may not always be at loggerheads with the government. A set of 72 words tucked in multiple government orders issued last month that could impact households across the country in times to come has prompted sections of public health activists to assert their support for a new government initiative. The orders, issued on July 10 by the National Pharmaceutical Pricing Authority (NPPA) under the department of pharmaceuticals of the Union chemicals and fertilisers ministry, imposed price caps on 108 medical formulations used to treat cardiovascular diseases and diabetes. The move will add more medicines to the list of 348 drugs already under price control in India. But it is the 72 words in Paragraph 9 of the NPPA order that has stirred support from health activists.

**Publication: The Times of India****Edition: National****Date: August 15, 2014****Headline: [Policy changes slow down pharma hiring](#)**

**Synopsis:** The euphoria in the job market notwithstanding, pharma companies are staring at a bitter reality with regards to hiring, thanks to regulatory changes and a sluggish market which seem to have impacted profitability. Pharma companies are understood to be pressing the 'go slow' button on fresh hiring which, search firms said, could lead to this segment missing out on the opportunity of partaking in the recruitment drive that is expected to create 5-10 million jobs in the next three-four years. "Hiring is on freeze in certain companies, mainly on account of the price control announced last year. This could be making some product lines unremunerative," said a senior executive with an MNC, who did not wish to be named.

**Publication: Deccan Herald****Edition: Bangalore****Date: August 15, 2014****Headline: [Soaring medicine prices under Centre scrutiny](#)**

**Synopsis:** The Centre is examining the market prices of medicines for cancer, diabetes, heart diseases, tuberculosis and malaria besides prices of sera and vaccines with the objective of fixing their selling rates if their retail prices are too high for the consumers. The National Pharmaceutical Pricing Authority monitors the "intra-band price differences" for drugs outside the price control on the basis of monthly MRP-based data to check if the price difference between various brands exceeds 25 per cent. The government will intervene if difference is too high.

**Publication: The Telegraph****Edition: Kolkata****Date: August 18, 2014****Headline: [Lupin local market thrust](#)**

**Synopsis:** Lupin, the country's fourth-largest drug maker by sales, expects its domestic business to beat industry growth rates and rise 15-20 per cent annually over the next few years. Shakti Chakraborty,

group president (India region formulations), said the country would play a crucial role in charting the company's growth over the next four years. The optimism comes at a time things have not been going right for the local industry. Recently, the National Pharmaceutical Pricing Authority (NPPA) brought more than 100 drugs (cardio vascular and diabetes) under price control. It is believed that the NPPA will add more medicines, used in the treatment of cancer and HIV, to the list of controlled drugs.

### Patents/ Compulsory licensing/ Intellectual Property Rights

**Publication:** The Economic Times

**Edition:** National

**Date:** August 18, 2014

**Headline:** [Cipla seeks adoption of pragmatic IPR policy](#)

**Synopsis:** Pharma major Cipla Ltd has sought adoption of a pragmatic Intellectual Property Rights (IPR) policy including in-licensing within the present framework of its international obligations. "We have always believed that free competition is the only way to ensure fair prices and better availability of drugs. We strongly believe that there should be no monopolies in healthcare; and in that context, India should adopt a pragmatic Intellectual Property Rights (IPR) policy including in-licensing within the present framework of our international obligations," Cipla Chairman Y K Hamied said in its annual report.

#### Similar reports in-

**Business Standard-** [Cipla seeks adoption of pragmatic IPR policy](#)

**The Financial Express-** [Cipla seeks adoption of pragmatic IPR policy](#)

**The New Indian Express-** [Cipla Favours Zero Monopoly in Healthcare](#)

**The Pioneer-** [CIPLA SEEKS ADOPTION OF PRAGMATIC IPR POLICY](#)

**NDTV-** [Cipla Seeks Adoption of Pragmatic Intellectual Property Rights Policy](#)

**Blog:** Tapan Ray

**Edition:** Online

**Date:** August 18, 2014

**Headline:** [Patented Drug Pricing: Relevance To R&D Investments](#)

**Synopsis:** The costs of most of the new life saving drugs, used in the treatment of dreaded diseases such as cancer, have now started going north at a brisk pace, more than ever before. From the global pharma industry perspective, the standard answer to this disturbing phenomenon has remained unchanged over a period of time. It continues to argue; with the same old emphasis and much challenged details that the high drug price is due to rapidly escalating R&D expenses. However, experts have reasons to believe that irrespective of R&D costs, the companies stretch the new drug prices to the farthest edge to maximize profits. Generation of highest possible revenue for the product is the goal. Passing on the benefits of the new drug to a large number of patients does not matter, at all.

**Website:** Pharmabiz

**Edition:** Online

**Date:** August 16, 2014

**Headline:** [Patent controller issues revised "draft guidelines for examination of patent applications in the field of pharmaceuticals"](#)

**Synopsis:** The Indian Patent Controller has released the revised "draft guidelines for examination of patent applications in the field of pharmaceuticals" which will help the examiners and the controllers of the patent office in achieving consistently uniform standards of patent examination and grant of patents. On Section 3(d) of the Patent Act, the revised guidelines explains that the mere discovery of a new form of a known substance which does not result in the enhancement of the known efficacy of that substance or the mere discovery of any new property or new use for a known substance or of the mere use of a known process, machine or apparatus unless such known process results in a new product or employs at least one new reactant are not patentable inventions within the meaning of the Act.

**Website: Pharmabiz**

**Edition: Online**

**Date: August 16, 2014**

**Headline: [Pharmexcil invites nomination for 5th edition of patent awards from pharma cos](#)**

**Synopsis:** The Pharmaceuticals Export Promotion Council of India (Pharmexcil) has invited nomination for patent awards from all the pharmaceutical manufacturing firms and research institutes across the country. As part of its 5th edition of patent awards, the Council is seeking nominations for patent awards from all the pharma companies both from LSM and SME categories. The council is inviting applications under seven product groups which include Bulk drugs and APIs, formulations, biotech products and genomics. Nominations under herbal/ASU/nutraceuticals, medical devices/surgical/diagnostics, NCEs/drug discovery and other categories like excipients are also invited to claim for patent awards.

### Clinical trials

**Publication: The Hindu**

**Edition: Bangalore**

**Date: August 15, 2014**

**Headline: [Concern over decline in clinical trials](#)**

**Synopsis:** Experts at an interaction on clinical research in India on Wednesday expressed concern over the declining number of clinical trials in India in the last few years. Attributing it to widespread misconceptions and the uncertain and unpredictable regulatory environment, Suneela Thatte, president, Indian Society for Clinical Research (ISCR), said the number of approved trials reduced from 500 in 2010 to 262 in 2012.

**Publication: The Financial Express**

**Edition: National**

**Date: August 16, 2014**

**Headline: [Clinical trials picking up belies state of industry](#)**

**Synopsis:** Clinical trials are picking up pace with 76 trials having got a no-objection certificate till May 2014, more than three times the number in the corresponding period of 2013. Nevertheless, the approvals are coming in slowly and the numbers seen in 2010 and 2011, when 500 and 321 trials were approved, respectively, is unlikely to be reached. The Central Drugs Standard Control Organisation (CDSCO), India's apex drug regulatory body, had approved 24 trials till May 2013.

**Publication: The Financial Express**

**Edition: National**

**Date: August 15, 2014**

**Headline: [As Ebola's toll rises, drug makers race to test medicines](#)**

**Synopsis:** Because outbreaks are sporadic and mainly confined to Africa, the Ebola virus has not been a priority for profit-seeking pharmaceutical companies. But with the largest ever Ebola outbreak now having killed more than 1,000 people in West Africa, drug companies and doctors are scrambling to see whether any existing medicines or drugs under development can help stem the epidemic. Options include experimental treatments that have never before been tested on people and some of the world's most widely used drugs — statins like Lipitor, which are approved to lower cholesterol but might, some advocates say, also help with Ebola.

### Health ministry

**Publication: Deccan Herald**

**Edition: Online**

**Date: August 16, 2014**

**Headline: [Essential drugs under new health plan](#)**

**Synopsis:** Union Health and Family Welfare Minister Dr Harshvardhan, on Saturday, said as part of New

Health Assurance Plan to be rolled out from September, package of preventive medicines, diagnostic tools and few essential drugs would be provided. Inaugurating the Centre for Addiction at Nimhans, he claimed, this would make India disease free and towards reaching preventive and positive health care. State Minister for Health and Family Welfare U T Khader, said it would be made mandatory for all Primary Health Centres, Community Health Centres and District Hospitals to attend to mental health patients every Tuesday of the week.

**Publication: Mint**

**Edition: National**

**Date: August 15, 2014**

**Headline: [AIDS control dept to be merged with national health mission](#)**

**Synopsis:** The National Democratic Alliance (NDA) government has merged the country's AIDS control department with another department in the health ministry in a move that seems to be prompted by a desire to shrink government but which, activists claim, will dilute the focus and reduce the efficacy of the successful Department of Aids Control, better known as the National Aids Control Organization (Naco). The change will mean that India's HIV prevention efforts will now be implemented under the National Health Mission (NHM), and not by a specific department.

**Similar report in-**

**The Economic Times- [Department of AIDS Control to be merged with Health Ministry; decision riles activists](#)**

**Publication: The New Indian Express**

**Edition: Online**

**Date: August 18, 2014**

**Headline: [Health Assurance Plan is Being Worked Out: Vardhan](#)**

**Synopsis:** India will have to follow the middle path in healthcare, shunning both the American and the British models, Union Health Minister Dr Harsh Vardhan has said. Dr Vardhan, who was on a two-day visit to the city, spoke to Express on a range of health topics from insurance to drug resistant tuberculosis. He also spoke of the need to help the 350 million people who are below poverty line in India.

**Publication: The Hindu**

**Edition: Online**

**Date: August 17, 2014**

**Headline: [Harsh Vardhan bats for Ayurveda](#)**

**Synopsis:** Union Health and Family Welfare Minister Harsh Vardhan on Sunday said that the AIIMS-styled institutes that the Union government plans to set up in every State will have a department dedicated to Ayurveda and yoga. The future AIIMS institutes will have "all systems of medicine working in coordination," he said after inaugurating research laboratories at the Swamy Vivekananda Yoga Anusandhana Samsthana (SVYAS).

**Publication: The Economic Times**

**Edition: Online**

**Date: August 16, 2014**

**Headline: [No need to panic about Ebola: Union Health Minister Harsh Vardhan](#)**

**Synopsis:** Union Health Minister Harsh Vardhan today said there is no case of Ebola virus disease in the country and there is no need for panic about it. "Everything as far as Ebola is concerned is thoroughly well controlled in the country; as on today, to this moment there is no case of Ebola in India and I think there is no need for anybody to panic," Vardhan told reporters here.

**Publication: Mumbai Mirror**

**Edition: National**

**Date: August 16, 2014**

**Headline: [Shunted out of FDA, ex-boss opens a can of corruption worms](#)**

**Synopsis:** IAS officer Mahesh Zagade, whose crackdown on chemists had resulted in over 3,000 licences getting cancelled or surrendered, reveals threats and insults from within and outside department. Over the past 12 months, IAS officer Mahesh Zagade has emerged as enemy number one of chemists across Maharashtra. As commissioner of the state Food & Drug Administration (FDA), Zagade insisted on following the rulebook to the word, resulting in more than 3,000 chemists surrendering their licences, mainly because the FDA cracked down hard on those chemists selling medicines without recruiting full-time pharmacists to oversee the sale.

### Modi government/ WTO/ Indo- US ties

**Publication: Deccan Herald**

**Edition: Online**

**Date: August 17, 2014**

**Headline: [Government plans fresh legislation to rein in MCI](#)**

**Synopsis:** As the rift between the Health Ministry and Medical Council of India (MCI) increases, the government plans to come up with a new law to rein in the council, which regulates the cash-rich medical education sector. The proposed law will be a modified version of the National Commission for Human Resources for Health (NCHRH) Bill, 2011, which was discarded by Parliament in its original form, reliable sources in the Health Ministry told Deccan Herald. Still on the drawing board, the new law will do away with several contentious proposals in the NCHRH Bill, like abolition and disempowerment of state medical councils, and strong government involvement in the entire spectrum of medical education.

**Publication: The Economic Times**

**Edition: National**

**Date: August 15, 2014**

**Headline: [US has very high hopes for PM Narendra Modi's vision and ambition: Nisha Biswal](#)**

**Synopsis:** The US has "very high hopes" for the vision and ambition laid out by Prime Minister Narendra Modi but the two sides should "temper" themselves on the timeframe by which the expectations from the new Indian government are met, a top American official has said. "...These are also early days in the new (Modi) administration, all of us need to be cognizant that this is an administration that is two and a half months old. Let us both set high expectations but also temper ourselves on the timeframe within which we want to see those expectations met," Assistant Secretary of State for South and Central Asia, Nisha Desai Biswal, told reporters here yesterday at the Foreign Press Centre on 'US Foreign Policy Priorities in India'.

**Similar report in-**

**Deccan Chronicle- [High hopes for Modi's vision and ambition: US government](#)**

**Publication: New Delhi Times**

**Edition: Online**

**Date: August 16, 2014**

**Headline: [India's action in WTO](#)**

**Synopsis:** On January 1, 1995 when World Trade Organization (WTO) came into existence the entire economy of the world was affected in respect of international trade because WTO framed the new global trade rules for international trade. Although India had adopted the process of liberalization in 1991 but with the implementation of WTO in 1995 there was increased openness in trade at global level. WTO has been playing a very important role in India's foreign trade as both the growth rate of exports

and imports has risen after the WTO. The contribution of industrial sector to the nations international trade has been increased after the WTO agreements. Yet, despite the positives, some contentious issues remain between India and WTO and in the last decade , India has postulated itself more assertively as the voice expressing the concerns of the developing countries of the global South in the multilateral trade regime.

**Publication: The Economic Times**

**Edition: Online**

**Date: August 16, 2014**

**Headline: [India 'will honour' WTO trade deal pledge: Nirmala Sitharaman](#)**

**Synopsis:** India will keep a pledge to ratify a trillion-dollar global pact on easing trade restrictions, a minister told local media Saturday, adding negotiations with fellow World Trade Organisation members had not hit a "dead end". Commerce Minister Nirmala Sitharaman's remarks to a news channel marked a softer public tone to India's stance on the Trade Facilitation Agreement (TFA) -- a universal customs clearance deal which would mark the first big global trade liberalisation deal in two decades.

**Publication: The Economic Times**

**Edition: Online**

**Date: August 17, 2014**

**Headline: [PM Narendra Modi's push for GM crops faces tough opposition from Swadeshi Jagaran Manch](#)**

**Synopsis:** Bhagwati Prakash Sharma, national co-convenor of Swadeshi Jagaran Manch (SJM), is a busy man these days. On August 19, he will lead a meeting of national leaders of 35 mass organizations in Delhi, including farmers, traders and even the BJP's student wing. It's just the beginning. In October, between Dussehra and Diwali, a massive jamboree of over 100 groups will meet in an event styled Swadeshi Sangam. The agenda is wide — from genetically modified (GM) crops to foreign direct investment (FDI) to the World Trade Organization (WTO).

## FDI

**Publication: Mint**

**Edition: National**

**Date: August 15, 2014**

**Headline: [Insurance Bill sent to select committee](#)**

**Synopsis:** The Bharatiya Janata Party (BJP)-led National Democratic Alliance (NDA), which came to power with a landslide victory in the Lok Sabha elections, received the first setback to its legislative and economic reforms agenda when the opposition, on Thursday in the Rajya Sabha, blocked a Bill aimed at liberalizing the insurance sector. The Insurance Laws (Amendment) Bill, 2008, which proposes to raise the cap on foreign direct investment (FDI) in insurance joint ventures from 26% to 49%, was referred to a Parliamentary select committee for further scrutiny. The 15-member select committee will submit its report, which is binding on the government, on the last day of the first week of the next session of Parliament.

## Drug quality

**Publication: The Hindu Business Line**

**Edition: National**

**Date: August 18, 2014**

**Headline: [Indian drug regulator plugs quality gaps after drawing flak from USFDA](#)**

**Synopsis:** The Indian drug regulator, the Central Drugs Standard Control Organisation, is busy reforming itself and plugging all quality gaps by organising skills development programs for its officers and inspectors to make them more attuned to international standards. The Indian drug regulator has been in the spotlight over the issue of quality concerns faced by the domestic manufacturers. Recently, instances of the US Food and Drugs Administration (FDA) taking action against Indian drug makers have become

prominent.

**Publication: The Financial Express**

**Edition: National**

**Date: August 16, 2014**

**Headline: [The chain impact on retail drug markets](#)**

**Synopsis:** Millions of people die each year from infectious diseases like malaria, TB, HIV, and diarrhoea, many of which have drug therapies. We need effective medicine to confront the alarming burden of infectious disease in the developing world. However, many of the drugs for sale in developing countries are of poor quality. Counterfeiters sell ineffective products that imitate the appearance of established brands, while small manufacturers make and distribute substandard versions of common generics. A recent meta-analysis found that 28.5% of the drugs sampled in 25 primarily low-income countries were either counterfeit or substandard (Almuzaini et al. 2013). Poor-quality drugs are harmful because they deny therapy to patients and foster drug resistance.

#### Drug regulation

**Publication: Deccan Herald**

**Edition: National**

**Date: August 18, 2014**

**Headline: [Lax antibiotic laws raise killer disease fears](#)**

**Synopsis:** An Indian pharmacist swiftly pulls white boxes of powerful antibiotics from neatly stacked shelves behind him, and hands them over the counter without asking for a doctor's prescription. Faronem and Linospan, drugs used to fight acute bacterial infections such as severe pneumonia and bronchitis, are supposed to be remedies of last resort. Their sale is illegal without a prescription under a law introduced last year. But an AFP reporter easily bought them this week for about Rs 700 (\$12) from a busy pharmacy in an upmarket New Delhi suburb. Doctors and other health experts say such easy access to antibiotics in India, home to 1.2 billion people, is stoking bacterial resistance to drugs, a global problem that could see long-treatable diseases become killers once again. "Growing resistance to antibiotics is a terror for the health of our people," the country's chief drugs regulator G N Singh said.

#### Universal Health Coverage

**Publication: The Times of India**

**Edition: National**

**Date: August 18, 2014**

**Opinion piece: Varun Gandhi, Lok Sabha MP , BJP**

**Headline: [The Right Prescription](#)**

**Synopsis:** Healthcare in India is a story of insufficient resources and poor outcomes. Investment is well below WHO guidelines in both qualitative and quantitative terms. Bed density is low (less than 1.5 beds per 1000 persons as compared to WHO guideline of 3.5), doctors few (less than 1.8 per 1000 as compared to WHO guideline of 2.5), and out of pocket spend high (86% as compared to an average of around 40% for low income countries). Rural India lags even further behind, with around 30% of the rural population having to travel over 30 km for treatment. Significant inequality in access is worsened as the existing healthcare workforce is inadequate and under-utilised. With low salaries, insufficient incentives, lack of career growth, inadequate training and inconsistent policies, the majority of the medical workforce chooses not to practice in the formal sector. India's regulatory system hardly keeps up with the very diverse set of medical practitioners.

#### Access

**Website: Ministry of Public Affairs**

**Edition: Online**

**Date: August 16, 2014**

**Opinion piece: Murali Neelakantan, Global General Counsel, Cipla Limited**

**Headline:** [Indian Pharmaceutical Industry - Affordable Access to Healthcare for all](#)

**Synopsis:** There has been little news in the Information Technology (IT) sector around the world where, in some manner or form, India is not mentioned and as a result, India is now well known for its IT prowess. Thirty years ago, it was hard for most of us to imagine this. The story of the Indian pharma sector could well have been like the IT sector if only enough attention was paid to its achievements and the huge impact it has had on healthcare around the world. Unlike other manufacturing or heavy industries in India, the pharma sector is innovative, widely acknowledged as making a global impact in the treatment of diseases like HIV AIDS and also able to support the healthcare needs of the world.

**Innovation**

**Publication:** The Financial Express

**Edition:** National

**Date:** August 18, 2014

**Opinion piece:** Bhushan Patwardhan, professor at the University of Pune

**Headline:** [Fixing innovation ecosystem](#)

**Synopsis:** In India, innovation became part of the national policy when the government designated the decade from 2011-2020 as the decade of innovation. The government also constituted a high-profile National Innovation Council (NInC) to create an innovation culture across India. Few states like Karnataka and Maharashtra created their own innovation councils. Also, the central government approved a proposal by NInC to host annual innovation competitions by MPs in their respective constituency, enabling India to get at least 545 innovators every year through this initiative. India has a lot of potential but so far the progress has been relatively, largely due to inability to recognise true innovation. This is very much evident by a fact that the original Indian concept of Jugaad and reverse engineering has also been categorised under the innovation. In the recently released Global Innovation Index, India slipped 10 ranks to the 76th place in 2014 from 2013. It is also the only country among the BRICS nations to have witnessed a decline in the rankings. On the other hand, India also performed poorly in the GIPC IP Index released in January 2014. It has now become imperative to measure the country's poor performance against the global standards.

**General Industry**

**Publication:** The Times of India

**Edition:** National

**Date:** August 16, 2014

**Headline:** [Come and make in India, Modi tells investors](#)

**Synopsis:** The PM on Friday made a strong push for deepening the manufacturing sector to create jobs and gave a "come and make in India" call to investors. Narendra Modi urged the youth to embrace the spirit of entrepreneurship and help the country cut dependence on costly imports. "If we have to balance imports and exports, we'll have to strengthen manufacturing. If we have to put in use the education, the capability of the youth, we'll have to go for manufacturing. And for this, Hindustan will have to lend its full strength, but we invite world powers as well," Modi said. "I want to appeal to people the world over come, make in India. Come, manufacture in India". Sell in any country but manufacture here," he exhorted.

**Publication:** The Times of India

**Edition:** National

**Date:** August 15, 2014

**Opinion piece:** Bill Gates, Co-Chair & Trustee, Bill & Melinda Gates Foundation

**Headline:** [India's Health Is Its Wealth](#)

**Synopsis:** Despite its growing prosperity, India has the highest burden of malnutrition in the world. N Malnutrition is an underlying cause of almost half of all child deaths, and, for those children who survive, leads to cognitive impairment that prevents tens of millions of children from ever reaching their potential. As the economist Dean Spears has written, "Because the problems that prevent children from



growing tall also prevent them from growing into healthy , productive, smart adults, height predicts adult economic outcomes and cognitive achievement." In short, India's malnutrition crisis is not just bad for India's malnourished children; it also limits the country's economic progress.

**Publication: The Times of India**

**Edition: National**

**Date: August 16, 2014**

**Headline: [Hygiene in rural India: The dirty picture](#)**

**Synopsis:** PM Narendra Modi spent some time during his Independence Day speech on the lack of toilets in houses and of separate toilets for girls in schools. He pointed out how women often have to wait for the cover of darkness to go out to defecate or urinate because they don't have toilets at home. He also pointed out that the absence of separate toilets for girls was one of the factors behind their dropping out of school. So exactly how bad is the situation on the ground? TOI checked out the official numbers and they paint a grim picture. Data from census 2011 shows that over 53% of all Indian households do not have a latrine within their premises. In the rural areas, this figure is as high as 69.3%, that is more than two-thirds, and even in urban areas it is a substantial 18.6% or nearly one in every five.

**Publication: The Times of India**

**Edition: National**

**Date: August 16, 2014**

**Headline: [Looking To Make A Fresh Start](#) (first edit)**

**Synopsis:** Modi was very conscious of addressing all Indians as directly as possible. But he sent a message across the border too If our ancestors threw the coloniser out together, can't we just get along now? Instead of fighting each other, let's fight poverty together. This year, India's Independence Day speech is sure to get some attention in the neighbourhood too.

**Publication: Business Standard**

**Edition: National**

**Date: August 16, 2014**

**Headline: [On I-Day, PM Modi sounds financial inclusion bugle](#)**

**Synopsis:** In his maiden Independence Day address as Prime Minister to the nation from the ramparts of the Red Fort here on Friday, Narendra Modi proposed an ambitious financial inclusion plan, Jan Dhan Yojana, to enable the poor to open bank accounts, with an insurance cover of Rs 1 lakh. This, he said, would especially help the families of farmers who ended their lives after failing to repay loans. Ending speculation on the future of the Planning Commission, Modi said the body would be scrapped and an entity imbued with greater federal spirit would replace it. The new institution, he said, would have a new "sharir" and "aatma", in which state governments would have a greater voice.

**Publication: The Economic Times**

**Edition: Online**

**Date: August 17, 2014**

**Headline: [e-healthcare business to contribute 2% in healthcare sector soon: Experts](#)**

**Synopsis:** With internet penetration increasing rapidly, e-healthcare in India is fast catching public attention and is poised to contribute significantly to the overall healthcare market, industry experts said. "Currently the overall health care market in India is about \$150 billion. But the way internet penetration and awareness about health care is increasing in India, the e-health care services would grow at a very healthy rate. I expect that very soon, it would contribute about 2 per cent in the overall health care sector," Credihealth Managing Director Ravi Virmani told.

**Publication: The Hindu**

**Edition: National**

**Date: August 16, 2014**

**Headline: [Return of the family doctor](#)**

**Synopsis:** This weekend, general practitioners from around the world will participate in a two-day international conference on family medicine in the city. At a time when lifestyle diseases are becoming increasingly common, the family physician, who can be a guide and adviser to patients and their families, seems set to make a comeback. The Indian Medical Association and the College of General Practitioners are coming together to spread the message. World Organisation of National Colleges, Academies (WONCA) and Academic Associations of General Practitioners and Family Practitioners and World Organisation of Family Doctors and the IMA, are hosting the event in Chennai.

**Publication: The Hindu Business Line**

**Edition: National**

**Date: August 17, 2014**

**Headline: [Ebola emergency](#) (editorial)**

**Synopsis:** The deadly ebola virus has already claimed over 1,000 lives and infected about 2,000 people in the West African countries of Guinea, Sierra Leone, Liberia and Nigeria. The outbreak is a reminder of SARS in 2002-03, which claimed nearly 800 lives, and H1N1 (also called swine flu) which killed a colossal 18,000, but across 170 countries. While these three viruses have emanated from infected animals, ebola has mercifully not mutated to become an airborne disease. Ebola spreads through body fluids, which means that general circumspection can go a long way in containing its spread. The World Health Organisation (WHO) has been confident enough to say that restrictions on air travel are not warranted. However, ebola is especially lethal for two reasons: first, the body fluids of an infected person carry a much higher load of virus than, say, HIV, and therefore people in close contact such as care givers and health workers are very vulnerable; and second, there is no known cure. Fatality rates in ebola are higher than SARS (which, incidentally, resurfaced in some countries in May) and swine flu. India must be alert to even the remotest chance of the ebola virus entering the country.

**Publication: Business Standard**

**Edition: National**

**Date: August 17, 2014**

**Opinion piece: Janmejaya Sinha, Asia-Pacific chairman of the Boston Consulting Group**

**Headline: [Abolish cash to achieve financial inclusion](#)**

**Synopsis:** Over the last decade, while financial inclusion has been an important theme for the government and the regulator, the initiatives that have been taken have been mostly on the supply side. They have aimed at getting the banks to do more. The attempts have been akin to pushing a rope out harder: the banks have seen "inclusion" as an obligation and done what is required to comply. The results have been less than satisfactory. Even in 2014 more than half of Indian households continue to stay outside the ambit of formal finance. Two announcements made by the prime minister on Independence Day were important. The first was a move away from just pushing the rope harder to creating some pull on it, by offering an insurance policy of Rs 1 lakh to new account holders. The second was his focus on digital governance. E-governance, he said would be easy, effective and economical for Indians. Yet even with the prime minister's announcements, the full scope of what is possible is being missed out.

**Publication: The Hindu**

**Edition: National**

**Date: August 16, 2014**

**Headline: [Measures to improve ease of doing business](#)**

**Synopsis:** The eBiz project being implemented will create an investor centric hub-and-spoke based online single window model for providing clearances and filing compliances, says DIPP. The government, on Saturday, said it had taken a series of steps to improve ease of doing business that included having a timeline for clearance of applications, de-licensing the manufacturing of many defence products and introduction of e-Biz project for single window clearance. "The emphasis has been on simplification and

rationalisation of the existing rules and introduction of information technology to make governance more efficient, effective, simple and user-friendly," the Department of Industrial Policy and Promotion said.

**Publication: Deccan Herald**

**Edition: Hyderabad**

**Date: August 16, 2014**

**Headline: [Sun Pharma unit recalls multiple lots of Cephalexin from US](#)**

**Synopsis:** Caraco Pharmaceutical Laboratories , a unit of Sun Pharma, has initiated a recall of multiple lots of Cephalexin capsules from the US market. According to a notification by the USFDA, the recall of the 3,40,553 units of 500 mg and 1,13,677 units of 250 mg bottles is voluntarily initiated by the company through a letter to the regulator in June under 'Class-II' classification. Cephalexin is an antibiotic that belongs to the family of medications known as cephalosporins. It is used to treat certain types of bacterial infections.

**Publication: Daily News & Analysis**

**Edition: Hyderabad**

**Date: August 16, 2014**

**Headline: [Aurobindo to cut Actavis ebitda losses to 10 million euro](#)**

**Synopsis:** Hyderabad-based Aurobindo Pharma is expecting to bring down the Ebitda losses of its Dublin-based Actavis business to about 10 million euro in the current fiscal (2014-15). During the first quarter result earnings call with analysts, chief executive officer Arvind Vasudeva, said, "As we indicated last year when we got the business, the earnings before interest, taxes, depreciation and amortisation (ebitda) loss was 23 million euro. We estimate that we should be able to bring it down to about 10 million euro in the current financial year."