

**Drug pricing- NPPA issue****Website:** Tapan Ray.in (A Tapan Ray Website on Healthcare)**Edition:** Online**Date:** July 21, 2014**Headline:** [Cheaper Drugs: Happy Patients: Angry Industry](#)

**Synopsis:** Recent price reductions of a number of cardiovascular and diabetes drugs falling outside the National List of Essential Medicines 2011 (NLEM 2011), have attracted fury of the pharma industry . By a notification dated July 10, 2014, the National Pharmaceutical Pricing Authority (NPPA) has invoked Para 19 of the DPCO 2013 for these price changes, the implications of which would indeed be far reaching. NPPA has now decided to examine inter-brand price variation for single ingredient formulations in eight therapeutic groups, which, besides cardiovascular and diabetic drugs, would include, anti-cancer, HIV/AIDS, anti-TB, anti-malaria, anti-asthmatic and immunological (sera/vaccines). In these therapy areas, the Maximum Retail Price (MRP) of the brand(s) exceeding 25 per cent of the simple average price of all in the same molecular category having 1 percent or above market share, would be capped at the 25 per cent level.

**Website:** Pharmabiz**Edition:** Online**Date:** July 22, 2014**Headline:** [Maha FDA writes to NPPA to bring medical devices under DPCO to curb profiteering](#)

**Synopsis:** Maharashtra Food and Drug Administration (FDA) has recommended to the Drug Controller General of India (DCGI) and National Pharmaceutical Pricing Authority (NPPA) to bring medical devices including drug eluting stents (DES) under the Drug Price Control Order (DPCO) 2013 to make it affordable to the patients. Medical devices including drug eluting stents (DES) are notified as drugs under the Drugs and Cosmetics Act, 1940 but is not included under the DPCO. Therefore, the prices of medical devices cannot be monitored and controlled as of today.

**Website:** Moneycontrol**Edition:** Online**Date:** July 21, 2014**Headline:** [Updates In The Indian Pharma Sector](#)

**Synopsis:** Over the last week, significant developments have taken place in the Indian pharmaceutical sector. The National Pharmaceutical Pricing Authority (NPPA) has released certain draft guidelines for public comments, and a series of notifications expanding the scope of drugs covered under price control. The Khaitan news flash provides a brief overview of both these developments.

**Clinical trials****Publication:** Deccan Chronicle**Edition:** Online**Date:** July 22, 2014**Headline:** [Service tax on clinical trials faces objections](#)

**Synopsis:** The Indian Society for Clinical Research, bio-pharma and herbal drug companies have objected to the Centre's decision to levy service tax of 12.3 per cent on the clinical trial industry. The industry has witnessed a major decline in the last 18 months with approvals being very slow. Clinical trials on Indian patients are required because the efficiency of the drug differs from region to region. Suneela Thatte,

president, ISCR, said, "Research is needed for diseases like diabetes, cardio-vascular diseases and resistance to antibiotics, which no longer interest companies abroad. The misuse of antibiotics has compelled us to look at other options, and unless there are trials, we will not be able to find new drugs."

**Website:** Pharmabiz

**Edition:** Online

**Date:** July 22, 2014

**Headline:** [Centre insistence on 6 months time frame for trial approvals by DCGI helps to pick up clinical research in India](#)

**Synopsis:** Union government has taken steps to prove its support to the pharma, biotech and clinical trial companies by insisting that approval of clinical trials from the Drugs Control General of India's (DCGI) office should be granted within six months. The government has also levied a dialogue fee to be paid to the DCGI by companies if they needed to ascertain the status of submissions before the stipulated time of six months. It is also forming an expert committee to assess the new drug applications (NDAs). Earlier the approval process took a minimum two years and this latest effort from the Centre is seen as the biggest benefit for Indian and global clinical research companies as there is a time frame for approval and an opportunity to discuss with DCGI, said Prof Ranjit Roy Chaudhury, Chairman of the Expert Committee on Clinical Trials constituted by the Ministry of Health and Family Welfare.

**Website:** Pharmabiz

**Edition:** Online

**Date:** July 22, 2014

**Headline:** [DCGI sets up Independent Expert Committee on Oncology for trial deaths caused by cancer drugs](#)

**Synopsis:** The Drugs Controller General of India (DCGI) has constituted an Independent Expert Committee on Oncology for examination of reports of serious adverse events (SAEs) of deaths occurred during clinical trials in the country. Dr Arun Agarwal, Professor of ENT, Maulana Azad Medical College, New Delhi is the chairman of the expert committee. The committee will function under the provisions as specified in Appendix XII of the Schedule Y of the Drugs & Cosmetics Rules.

## Vaccines

**Publication:** The Indian Express

**Edition:** Online

**Date:** July 22, 2014

**Opinion piece:** Seth Berkley, medical epidemiologist and CEO of the Gavi alliance

**Headline:** [A shot in time](#)

**Synopsis:** Plans by Prime Minister Narendra Modi to introduce four new vaccines to India's Universal Immunisation Programme (UIP) have been welcomed across the globe as one of the most significant leaps in India's public health policy in 30 years, and rightly so. These vaccines are currently available in India only on the private market, beyond the reach of poor children living in unsanitary conditions. But some sceptics have labelled the move as both unnecessary and costly. This is a view that is not only wrong but also shortsighted. The addition of these new vaccines to India's existing immunisation programme is not just an example of great leadership but also makes good economic sense. Introducing new vaccines does not just prevent death and disease, it also maximises the lifetime potential of children and the economic health of families, and the communities and countries in which they live.

## Health Ministry

**Publication:** India Today

**Edition:** Online

**Date:** July 22, 2014

**Headline:** [Rahul Gandhi's constituency Amethi among 48 districts in the country without blood banks, says Health Ministry report](#)

**Synopsis:** More than 80,000 women die in the country every year for want of safe blood during childbirth. According to data provided by the Union Ministry of Health and Family Welfare, several districts in states like Uttar Pradesh, Jharkhand, Uttarakhand, Madhya Pradesh and Chattisgarh have no blood banks at all. What is most baffling is that even the VVIP constituency of Amethi, represented by Congress vice president Rahul Gandhi, has no blood bank. The health ministry data revealed that in all 48 districts in 13 states across the country have no blood banks at all. According to experts working in this field, the condition is "particularly pathetic" in UP. "We receive patients from UP who have had horrifying experience with blood transfusions. When we go to field work or for workshops in UP, we find that even in those districts that have blood banks they don't separate the blood components like blood plasma. They transfuse all the blood even though they don't require it," said Dr J.S. Arora, general secretary, National Thalassaemia Welfare Society.

**Website:** Silicon India News

**Edition:** Online

**Date:** July 21, 2014

**Headline:** [India's Healthcare Facilities Still Below Global Standards: Report](#)

**Synopsis:** As famously quoted, 'Health is Wealth,' there is nothing more important in this world than our health. Once health breaks down, that is the end of everything. Coming to Indian health scenario, it is still questionable whether every citizen enjoys the best healthcare infrastructure. Despite development in recent times, health infrastructure in the country remains below global standards with only 6.28 lakh hospital beds and 9.18 lakh allopathic doctors for more than 1.25 billion people in the country, according to the National Health Profile, 2013, recently released by Union Health Minister Harsh Vardhan.

#### FDA

**Publication:** Business Today

**Edition:** Online

**Date:** July 21, 2014

**Headline:** [US FDA to soon name permanent India head](#)

**Synopsis:** The US Food and Drug Administration (FDA) expects to name a permanent director for India in coming months and is in the final stages of hiring additional investigators for the country, a spokesman for the health regulator told Business Today. The spokesman said that Carl Sciacchitano, Senior Science Advisor in the FDA's Office of International Programs, is serving as acting director of the India Office since June 1. The move came after Altaf Ahmed Lal quit as the FDA's India head in May. Lal has since left the FDA.

#### Modi government

**Publication:** The Times of India

**Edition:** National

**Date:** July 22, 2014

**Headline:** [Modi may decide on India's stand at WTO today](#)

**Synopsis:** Prime minister Narendra Modi will take a final call on India's position on the ongoing talks at the World Trade Organization (WTO) as early as Tuesday even as New Delhi appeared unrelenting in its demand to finalize a deal that addresses its food security concerns in return for a trade facilitation agreement. While sources in the BJP government are blaming the UPA for its failure to ensure that the Bali deal took adequate care of the interests of developing countries such as India and the LDCs, they said India could not go back on its commitment despite a change of regime. At the same time, the Modi administration is keen to ensure that there is a single undertaking, which ensures that the trade facilitation agreement comes in return to finding a permanent solution for the food security problem faced by developing countries as well as the issues of concern to LDCs.

#### General Industry

**Publication: The Hindu**

**Edition: National**

**Date: July 22, 2014**

**Headline: [Double digit growth for pharma industry in June](#)**

**Synopsis:** The Indian pharmaceutical industry, grappling with the addition of more than a 100 formulations in the National List of Essential Medicines (NLEM), which caps the price of drugs, is encouraged by data that the industry grew in double digits in June 2014. AIOCD figures show the industry grew at 10.4 per cent, the first time it has grown in double digits in a year. Further, domestic pharmaceutical companies grew 12.8 per cent while multinational (MNC) pharma players grew at 2.8 per cent during the month. Interestingly, while Indian companies grew 15.3 per cent in the non-NLEM category, MNC pharma firms grew at 5.8 per cent.

**Publication: The Times of India**

**Edition: National**

**Date: July 22, 2014**

**Headline: [With 5.5L deaths, TB biggest killer](#)**

**Synopsis:** Fewer Indians might be dying of HIV/AIDS, tuberculosis (TB) and malaria, but it is still estimated that almost 5.5 lakh non-HIV positive people died of TB last year, making it the biggest killer among the three. Malaria is estimated to have killed about 1.2 lakh people out of over 6 crore cases that were recorded last year. Though India's fight against HIV/AIDS is said to have made progress, the disease still killed 78,600 Indians of which 50,000 were males. Over 31,000 new cases were recorded.

**Publication: Mint**

**Edition: Online**

**Date: July 22, 2014**

**Headline: [Decriminalizing sex work can avert HIV : Lancet report](#)**

**Synopsis:** Decriminalizing sex work will have the single greatest effect on the course of HIV epidemics across the world, and could avert at least a third of HIV infections among sex workers and their clients in the next decade through its immediate and sustained effect on violence, policing, and safer work environments, according to a seven-part series of research on HIV and sex workers published in medical journal The Lancet. The report is based on case studies from countries including India, Canada and Kenya. It provides the most comprehensive analysis till date of HIV and sex workers, and contains contributions from sex workers, academics, and legal and public health experts.

**Publication: The Indian Express**

**Edition: National**

**Date: July 22, 2014**

**Headline: [Top scientist stresses need for 'new, apolitical' education panel](#)**

**Synopsis:** Saying that there is an urgent need to have a roadmap in education created by bright people, eminent scientist and Bharat Ratna recipient Prof CNR Rao on Monday said that it should, however, be apolitical. "We should have a new education commission, which should be apolitical. And the roadmap must be written by scholars and not by an NDA or a UPA government. It's time for the present government to get bright people to write a roadmap. The manifesto, which is being produced, should mention that if we do this, there is no reason why India can't be a leader in the world," said Rao during a deliberation on a draft manifesto on the introduction of urgent reforms to improve science education and for India's all-round development, at the Observer Research Foundation (ORF) Monday.

**Website: International Business Times**

**Edition: Online**

**Date: July 21, 2014**

**Headline: [Oral Cancer Deaths Up in India: Expert](#)**

**Synopsis:** Every six hours at least one person loses battle with the deadly disease, according to Dr Ashok Dhoble, Secretary-General of the Indian Dental Association, Press Trust of India reported. Apart from this, an increase in this number can be expected as many cases still remain unreported. "Cases of the disease and deaths resulting from it in rural areas and among the poorer sections of society are hardly registered," he told PTI. Attributing about 40 percent of all cancer-related cases in India to oral cancer, he said smoking and popularity of chewable tobacco products contributed to an increase in oral cancer cases in the country during the last ten years. West Bengal, Andhra Pradesh, Gujarat and Tamil Nadu were the states that reported highest number of cases.

**Publication: Business Standard**

**Edition: National**

**Date: July 22, 2014**

**Headline: [Sun Pharma-Ranbaxy merger gets BSE, NSE thumbs-up](#)**

**Synopsis:** Sun Pharma, which has been awaiting various regulatory approvals for its \$4-billion merger deal with Ranbaxy, has received clearance from the stock exchanges. The National Stock Exchange (NSE) and the BSE issued letters on July 11, giving their approval for the Sun-Ranbaxy merger. Sun Pharma will now have to get clearance from other regulatory bodies such as the Competition Commission of India (CCI) and the Securities and Exchanges Board of India (Sebi), besides courts, shareholders, and creditors.

**Publication: The Hindu**

**Edition: Bangalore**

**Date: July 22, 2014**

**Headline: [Plan for open access to science research](#)**

**Synopsis:** Ever felt frustrated while reading a science research journal online, only to see the message "to continue reading, subscribe now"? That may soon change. The Department of Science and Technology and the Department of Biotechnology (DBt) under the Ministry of Science and Technology have drafted a policy that says publicly-funded scientific work published in science journals must adhere to open access (OA) norms, enabling anyone to read online content on science research for free. OA is an initiative of Open Archives Initiative (OAI), an organisation which works for greater reach and free access to online science research funded by public money.

**Publication: The Financial Chronicle**

**Edition: National**

**Date: July 22, 2014**

**Opinion piece: Rajgopal Nidamboor, wellness physician and author**

**Headline: [The bug paradox](#)**

**Synopsis:** The use of antibiotics is based on the paradigm that there is a battle in progress in the body and it must be resolved; and that the body is not capable of success without drug support. Antibiotics 'kill' microorganisms related to a given illness or disease, all right; they also impede their duplication. The downside is that disease-causing bacteria have the innate ability to resist drugs, or antibiotics, just like our bodies defy bacteria. This is one reason why your physician increases the dosage of your medicine even when the 'cause' or 'character' of infection is the same as before. Besides, antibiotics do not produce immune-stimulating effects; they lead to 'drug-dependence,' or cause side-effects — some of them serious — including dysbiosis, or microbial imbalance in the body.

**Publication: The Free Press Journal**

**Edition: Online**

**Date: July 21, 2014**

**Headline: [Biotech innovation to be available at 'one stop' in Gujarat](#)**

**Synopsis:** In an initiative to make available milestone biotech innovations in the field of marine,

pharmaceuticals, agricultural and industries under a one-stop facility, a state government run autonomous body has decided to compile all the achievements in the sector. As a part of the decadal celebration of Gujarat State Biotechnology Mission (GSBTM), it is publishing a compilation on 'Milestones of Biotechnology in Gujarat', according to its official website. The compilation will include major milestones in different sectors of biotechnology, which include business and industry, research and education, agricultural, marine, pharma and healthcare as well as industrial biotechnology.