



**News Updates: July 5-7, 2014**

**OPPI**

**Publication: Business World**

**Edition: Online**

**Date: July 4, 2014**

**Opinion piece: Ranjana Smetacek, Director General, OPPI**

**Headline: [Pharma Expects Clarity On Taxing For Doctors](#)**

**Synopsis:** OPPI represents the research-driven pharmaceutical companies in India and remains committed to supporting the nation's healthcare objectives by collaborating with the Indian government and other stakeholders to find sustainable healthcare solutions. A holistic approach is needed to expand healthcare in India and OPPI believes that there is a need to balance innovation with access and affordability, within a robust IP environment. The BJP manifesto had laid out the vision of universal healthcare that is not only accessible and affordable but also effective and reduces the OOP (out-of-pocket) spending for the common man. In his Pre-Budget meeting with States and UT Finance Ministers, Arun Jaitley, the Union Finance Minister had also emphasised the importance of healthcare access and quality. He recognised that not only do we need to improve healthcare access but also ensure a quantum jump in the quality of health services at an affordable price.

**Patents/ Compulsory licensing/ Intellectual Property Rights**

**Publication: Business Standard**

**Edition: National**

**Date: July 7, 2014**

**Headline: [Indian pharma's US tripping benefits MNCs](#)**

**Synopsis:** Regulatory trouble in the US for Indian drug makers seems to have helped big pharmaceutical companies, with the impact on generic competition. Import bans by the Food and Drug Administration (FDA) on products from Ranbaxy Laboratories' four domestic factories, for violation of manufacturing norms, prevented the company from launching in time at least three generic drugs in the American market which would have come with 180 days of exclusive sale rights. Hence, multinational drug companies were allowed to sell expensive products despite expiry of patent protection.

**Publication: Pharmabiz**

**Edition: Online**

**Date: July 7, 2014**

**Headline: [India's draft patent guidelines could lead to unnecessary bias against pharma patent applications: USIBC](#)**

**Synopsis:** The US-India Business Council (USIBC), the premier business advocacy organization comprised of America's and India's top-tier companies, has expressed concern that the draft 'Guidelines for Examination of Patent Applications in the Field of Pharmaceuticals', issued by the Indian Patent Controller recently, could lead to an unnecessary bias against pharmaceutical patent applications. Besides, the guidelines may impose unnecessary burden on pharmaceutical patents, driving up the costs and risks of innovation, the USIBC said

**Publication: Pharmabiz**

**Edition: Online**

**Date: July 7, 2014**

**Headline: [Inter-ministerial panel on pricing of patented drugs yet to meet even after 4 months of constitution](#)**

**Synopsis:** Even after more than four months of its constitution to fix the prices of patented drugs before

they are imported into country, the inter-ministerial committee of joint secretaries of different ministries formed by the Department of Pharmaceuticals (DoP) is nowhere near its task as the committee did not meet so far to thrash out the vexed issue. According to sources in the DoP, the committee constituted in February this year had an introductory meeting some time back and after that it did not hold any meeting so far. However, sources said that the committee will meet soon to discuss the issue, but did not give any specific date as it is yet to be finalised. A senior official of the committee was on long leave, so the committee could not meet so far, sources added.

### Modi government/ Budget expectations

**Publication:** The Economic Times

**Edition:** National

**Date:** July 7, 2014

**Headline:** [Budget 2014: Rashtriya Swasthya Bima Yojana may be shifted to Health Ministry](#)

**Synopsis:** With the aim of rolling out universal health coverage scheme in the country, the government is weighing the possibility of shifting Rashtriya Swasthya Bima Yojana (RSBY), the largest medical insurance programme globally which covers over 120 million poor people, from labour to health ministry. Pointing out that universal health coverage is the mandate of the health ministry, a recent letter from the Prime Minister's Office has sought an explanation from the labour ministry on why the RSBY programme should not be transferred to the health ministry, government officials told ET.

**Publication:** Business Today

**Edition:** Online

**Date:** July 5, 2014

**Headline:** [Budget 2014-15: Pharma sector calls for creating global capacities, says report](#)

**Synopsis:** Creating global capacities is the only way to win back ground lost to China is bulk drugs. This was a clear message from the Indian pharma industry on the eve of a fresh Union Budget. In its latest July 2014 report on the Indian Pharmaceutical industry, the Associated Chambers of Commerce & Industry of India (Assocham) urges the government to "promote the setting up of vertically integrated manufacturing facilities for essential drugs, at a competitive scale." This was a point made by the Indian Pharmaceutical Alliance (IPA), an association of some of the leading Indian pharma companies, earlier too when its president - and chairman of Dr Reddy's Laboratories - Satish Reddy called for setting up "industry clusters" where the government could provide a package of incentives and common utilities to make large scale production facilities at low cost possible.

**Publication:** The Times of India

**Edition:** Online

**Date:** July 7, 2014

**Headline:** [Big ask from Arun Jaitley's first Budget](#)

**Synopsis:** Finance minister Arun Jaitley will present his maiden Budget for 2014-15 on Thursday against the backdrop of a sluggish economy, weak public finances, gathering risks on the horizon and a huge burden of expectations. Apart from measures to promote growth and tame prices, Jaitley will need to articulate the government's policy stance on reviving infrastructure, urbanization, education, health and provide timelines for critical reform initiatives for the farm sector. "Liberalization of FDI in defence, railways, e-commerce would address funding constraints, improve efficiency and send a positive signal to foreign investors. Capital market reforms are likely to be promoted," said Samiran Chakraborty, regional economist at Standard Chartered Bank.

**Publication:** The Times of India

**Edition:** National

**Date:** July 7, 2014

**Opinion piece:** Gurcharan Das, bestselling author and former CEO of Procter & Gamble India

**Headline:** [After months of talk, it's go time for new PM](#)

**Synopsis:** Modi's landslide victory invites us to be more imaginative in thinking about the nature of human

dignity , to move from prejudice to a question. By electing a chai-wallah's son, who affirmed the aspirations of the millions who have pulled themselves up in the post-reform decades through their own efforts into the middle-class, we are forced to challenge our assumption that selling vegetables is socially degrading. If an upper-class zamindar, who takes time off from his idle life of breeding race horses to stand behind a counter in the belief that supplying people with good vegetables at a fair price, or driving them to their destination in a three-wheeler, is inherently worthwhile, the prejudice might give way to a fairer assessment of human worth.

**Publication:** Mint

**Edition:** National

**Date:** July 7, 2014

**Headline:** [Union budget 2014: Arun Jaitley's top challenges](#)

**Synopsis:** The expectations from finance minister Arun Jaitley's maiden budget are sky high, as is evident from the fact that Indian stocks are scaling new highs daily. For Jaitley, there is no easy way to meet these expectations given that the budget will be presented against the backdrop of sluggish economic growth, high inflation and the precarious state of government finances. The finance minister has to attack the core problems facing the economy.

**Publication:** Mint

**Edition:** National

**Date:** July 7, 2014

**Opinion piece:** Gita Gopinath, professor at the economics department of Harvard University

**Headline:** [The perfect Modi-Jaitley budget—simple, predictable and boring](#)

**Synopsis:** The first budget of the new government will be tabled on 10 July. It is keenly awaited as an important occasion for Prime Minister Narendra Modi and finance minister Arun Jaitley to establish their "growth" and "minimal government" credentials. Each year for weeks before the budget is released the markets and media feverishly debate and conjecture about the changes the budget will bring. My "hope" for the Modi-Jaitley budget is that it dials down the excitement so that the presentation of "the budget" is far less anticipated, even, boring. I say this because a dynamic economy requires a tax and regulatory environment that is not expected to change every year, that is not personality driven, but instead is based on sound economic principles that once chosen are not subject to frequent revisions. This will provide the environment for investors and businesses to go about doing what they are best at without having to guess what new taxes and rules lay around the corner.

### Clinical trials

**Publication:** British Medical Council

**Edition:** Online

**Date:** July 3, 2014

**Headline:** [Indian Supreme Court demands clarity on clinical trial approvals](#)

**Synopsis:** The Supreme Court of India has told the government that applicants seeking approval to conduct clinical trials must be asked to provide a risk-benefit assessment of the drug being investigated, its potential benefit to patients, and the advantages it offers over existing treatments. The order was passed during the hearing of a petition<sup>1</sup> filed by the non-governmental organisation Swasthya Adhikar Manch (Health Right Forum), which advocates issues related to health rights in India, seeking directions for the regulation of clinical trials involving new drugs and chemical entities.

### Union Health Ministry

**Publication:** Business Standard

**Edition:** National

**Date:** July 5, 2014

**Opinion piece:** Mitali Saran, Independent Writing and Editing Professional

**Headline:** [The flat earth society of sex education](#)

**Synopsis:** The most eminent person currently refusing to join the dots is Union Health Minister Harsh Vardhan.

The "Vision for a New Millennium Health" [sic] section on his website lists admirable objectives such as a "major offensive against major killers like tobacco, tuberculosis, malaria, AIDS and others". He foresees "population control (becoming) a big movement" with "effective family planning programme", and plans to safeguard public health with "education of people about alcohol, tobacco and drug abuse as well as threat of unsafe sexual behaviour". The same guy, on the same website, announces "'so-called' sex education to be banned" in schools. It's difficult to imagine how banning sex ed is going to advance the family planning programme or the major offensive on AIDS. When everyone jumped down his throat, he clarified that he is only opposed to "vulgar" sex education. Nobody has discovered what that means. Does that mean sex education that mentions sex? Is he worried that there will be classroom practicals? He also holds that abstinence beats condoms, because advocating condoms implies that it's okay to sleep with whomever you want as long as you're wearing a raincoat.

**Publication: The Times of India**

**Edition: National**

**Date: July 5, 2014**

**Opinion piece: Radhika Vaz, freelance writer**

**Headline: [Sex education in schools is about how to do it responsibly](#)**

**Synopsis:** You know the country that India is most beginning to resemble? The United States of America. Case in point, our health minister's opinion on how to handle sex education in schools. His idea is that we don't need it and should instead rely on teaching kids Indian values. Well, we have finally become a first world nation because in America many conservative politicians, including the brilliant-minded George W Bush, have been pushing for basically the same thing — abstinence-only education in schools. Great! I cannot wait for us to get our own Disneyland.

**Publication: The Hindu**

**Edition: Online**

**Date: July 6, 2014**

**Headline: [Levy at least 50% VAT on tobacco products, Centre tells States](#)**

**Synopsis:** Union Health Minister Harsh Vardhan on Friday wrote to Chief Ministers of all States (except Rajasthan) and Lt. Governors and Administrators of Union Territories to consider levying a VAT of at least 50 per cent on all tobacco products, including bidis. In addition, he has asked them to develop a tax policy to make tobacco products less affordable over time, according to an official statement on Saturday. These steps will go a long way in discouraging use of tobacco, help in improving the health of citizens and reduce avoidable public health costs, he said.

**Similar report in-**

**The Indian Express- [Vardhan pushes for 50% VAT on tobacco products](#)**

### Corruption in Indian Healthcare

**Publication: The Times of India**

**Edition: National**

**Date: July 6, 2014**

**Interview: Dr Samiran Nundy, chairman of the department of surgical gastroenterology and organ transplantation at Sir Ganga Ram Hospital and editor-in-chief of the journal, Current Medicine Research and Practice**

**Headline: [Patients have become consumers and they are the losers: Dr Samiran Nundy](#)**

**Synopsis:** Dr Nundy, chairman of the department of surgical gastroenterology and organ transplantation at Sir Ganga Ram Hospital and editor-in-chief of the journal, Current Medicine Research and Practice, stirred a hornet's nest with his recent editorial on corruption in healthcare in India in the British Medical Journal. The editorial exposed the widespread practice of doctors taking cuts for referrals and pre scribing unnecessary investigations and procedures for profit. Dr Nundy talks to Rema Nagarajan about the urgent need to fight this corruption to deliver trustworthy and quality healthcare to the people.

**Website: Niti Central**

**Edition: Online**

**Date: July 5, 2014**

**Headline: [Health care sector needs watchdogs to protect people's interest](#)**

**Synopsis:** Random checks reveal that most insurance companies do not want to accede to cash-free options for surgeries. Post-surgery, they release a nominal amount which is far less than what the patient had incurred. Usual argument is that the total annual cover is being saved for the benefit of the customer. Most people anyways usually have one big medical procedure in a few years, unless it's a chronic case. It means that the company tries to play safe and the customer is still as exposed to unpredictable eventualities as he was before the cover.

**Publication: The Indian Express**

**Edition: Pune**

**Date: July 5, 2014**

**Headline: Docs taking commission will be de-registered: IMA (link unavailable, scan attached)**

**Synopsis:** The Indian Medical Association (IMA) has strictly warned doctors of de-registration if they followed the unethical referral fee/cut practice. An anti-commission campaign to curb cut practice will be stepped up, state IMA president Dr Dilip Sarma told reporters on Friday. "The medical profession is already under attack for corrupt practices. Maharashtra Medical Council (MMC) is concerned about the image of doctors and due to a handful of such practitioners resorting to unethical practices, the profession is getting a bad name," Dr Arun Halbe, president of IMA city unit said.

#### Drug pricing/ NPPA

**Publication: The Hindustan Times**

**Edition: National**

**Date: July 7, 2014**

**Interview: Injeti Srinivas, Chairman, NPPA**

**Headline: 'We need to promote the concept of generic drugs in the country' (link unavailable, scan attached)**

**Synopsis:** The National Pharmaceutical Pricing Authority (NPPA), popularly known as the drug pricing watchdog is a government body appointed to fix or revise the prices of controlled bulk drugs and formulations. It also enforces prices and availability of the medicines in the country, under the Drugs (prices control) Order. It monitors the prices of de-controlled drugs in order to keep them at reasonable levels, under ministry of chemicals and fertilisers. Injeti Srinivas, its newly appointed chairman, spoke to HT on a range of issues.

**Publication: The Hindu Business Line**

**Edition: National**

**Date: July 5, 2014**

**Headline: [Pharma industry wants drug price control eased](#)**

**Synopsis:** The pharmaceutical industry has called for reducing drug price control, ahead of the Union Budget which will be presented on July 10. In June, the Government had set up a committee to take a re-look at the National List of Essential Medicines and the ambit of control is likely to rise. According to sources, the number of drugs listed in this essential medicines list, which are brought under price control, is likely to increase.

**Publication: The Hindustan Times**

**Edition: National**

**Date: July 7, 2014**

**Headline: Medical devices may get cheaper as govt plans to extend price control (link unavailable, scan attached)**

**Synopsis:** Stents, valves and catheters, among others, may get cheaper by at least 10-15% as the government is likely to extend price control over medical devices, the category that is currently not part of the National List of Essential Medicines (NLEM). The National Pharmaceutical Pricing Authority (NPPA), the body which has the power to fix, revise and regulate prices of drugs in India, is ready to place the proposal on medical devices before the health ministry's newly-formed NLEM panel.

#### FDA/ Drug regulation

**Publication:** The Times of India

**Edition:** Online

**Date:** July 6, 2014

**Headline:** [You can't buy certain drugs sans prescription any more](#)

**Synopsis:** The Food and Drug Administration (FDA) recently booked a Malad chemist for selling sedatives and anti-allergy drugs without prescription. The action comes after the introduction of a new schedule in the Drugs and Cosmetics Act. The schedule, H1, has made it almost impossible to buy antibiotics, anti-TB and habit-forming drugs without prescription from a registered medical practitioner. The FDA claims that nearly 75% of city chemists have tweaked their software to reflect the sale of H1 drugs, while others have started maintaining manual records.

#### R&D

**Website:** Reuters

**Edition:** Online

**Date:** July 4, 2014

**Interview:** Kiran Mazumdar-Shaw, CMD, Biocon

**Headline:** [Budget 2014: Biocon chief wants more R&D incentives, fewer essential drugs](#)

**Synopsis:** India's \$15 billion healthcare industry has taken hits on several fronts in recent years, from slow approvals for drugs in clinical trials to several run-ins with the U.S. Food and Drug Administration over the quality of its generic drugs. Biocon Ltd., led by entrepreneur Kiran Mazumdar-Shaw, is one company that has suffered along with other Indian pharmaceutical peers. Recently, the company had to restrict its clinical trials in India because of slower approvals, spiralling costs, stringent rules and regulatory uncertainty. Mazumdar-Shaw shared her thoughts for what India should do for its drug companies, including extending incentives for any costs incurred developing drugs overseas and raising the amount of money that foreign firms can invest in Indian companies to 100 percent.

**Similar reports in-**

The Times of India- [Budget 2014: Biocon chief wants fewer drugs on essential list](#)

Mail Today- 'Right to Healthcare not mindless populism (link unavailable, scan attached)

#### Public Health

**Publication:** Deccan Herald

**Edition:** Online

**Date:** July 7, 2014

**Opinion piece:** Gopal Dabade, Karnataka convener of the All India Drug Action Network

**Headline:** [WHO and conflict of interest](#)

**Synopsis:** During the initial tenure, WHO has delivered exemplary policy guidance on several important public health issues to its member countries across the world. Notable among them were the broad definition and understanding of health, with emphasis on public health rather than health being just drug and doctor centric, the importance of social determinants of health and the concept of essential medicines, guidelines of breast-feeding promotion and several others. Many of these health policies of WHO took a stand that were undoubtedly pro-developing countries but totally against the interests of big global multinational companies. Unfortunately, the public health concerns of WHO have slowly but definitely shifted to being more friendly with huge multinational companies. And this drift has had a negative impact

on global public health. And it was exactly this shift that was discussed at length during the recent WHA.

### Universal Immunization Programme (UIP)

**Publication:** The Times of India

**Edition:** Online

**Date:** July 7, 2014

**Headline:** [Are new, costly vaccines needed?](#)

**Synopsis:** If the recently announced introduction of newer, more expensive vaccines into the Universal Immunisation Programme (UIP) has to be implemented, the budget allocation for vaccine procurement will have to go up six times by over Rs 5,200 crore in the forthcoming budget, back-of-the-envelope calculation show. That's just to maintain the current level of immunization coverage of less than 75% of all the children who should be covered. The calculation also does not take into account the additional costs of boosting infrastructure and training personnel required for the delivery of these new vaccines.

**Publication:** Daily News & Analysis

**Edition:** Online

**Date:** July 7, 2014

**Headline:** [India adds three free vaccines for kids](#)

**Synopsis:** In a fresh bout of relief for parents of newborn babies and young children, the union health ministry announced on July 3, the introduction of three new vaccines for children. The ministry has said that it will roll out vaccines against rotavirus, rubella and polio virus under the universal immunization programme (UIP). This means that under the UIP, children will be administered the vaccines free of cost in government-run hospitals.

### Innovation

**Publication:** The Hindu

**Edition:** Online

**Date:** July 7, 2014

**Editorial:** K.T. Jagannathan

**Headline:** [Budgeting for innovation](#)

**Synopsis:** Ever since the NDA (National Democratic Alliance) returned to power at the Centre under the leadership of Narendra Modi-led BJP, there has been heightened expectation across the spectrum. With the new government's maiden budget just days away, the sense of anticipation has only increased. How will Modi's government balance the aspirations of so many constituencies? What will be the fate of the still-increasing wish-lists? No doubt, the climate has distinctly moved from one of pessimism to that of guarded optimism. But the new government has quite a task on hand to sustain this optimism.

### General industry

**Website:** Reuters

**Edition:** Online

**Date:** July 6, 2014

**Headline:** [How to fix a broken market in antibiotics](#)

**Synopsis:** The drugs don't work - and neither does the market, when it comes to antibiotics. When sophisticated bugs that medicines used to kill within days start to fight back and win, all of healthcare, and the people it keeps alive, is in trouble. Waking up to the threat, governments and health officials are getting serious about trying to neutralise it. It may seem like a question of science, microbes and drugs - but in truth it is a global issue of economics and national security.

**Publication:** Business Standard

**Edition:** Online

**Date:** July 4, 2014

**Headline:** [Chinese imports may harm pharma sector: Study](#)

**Synopsis:** A latest study has warned the pharmaceutical industry of a sudden disruption in drug supplies as well as price rise as the sector is heavily dependent on China for essential and large volume drugs. "One of the perceptible challenges before the Indian pharmaceutical industry is the gradual erosion of domestic manufacturing capacity for certain keys APIs (Active Pharmaceutical Ingredients) and their advanced intermediates", said a study conducted by Assocham.

**Publication:** The Hindu Business Line

**Edition:** Online

**Date:** July 4, 2014

**Headline:** [India must reduce controls on producing raw materials for pharma industry: Assocham](#)

**Synopsis:** India needs to reduce the controls on producing raw materials for the pharmaceutical industry, an Assocham study said on Friday. Over 60-70 per cent of active pharmaceutical ingredients (APIs) are currently being imported from China, since the ingredients are cheaper. This leads to a massive decline in domestic production, Umang Chaturvedi, Global Head (Corporate Affairs), Ranbaxy, said. Further, this dependence has a strong relation to international relations, the study said, while adding, since "any deterioration in relationships with China can potentially result in severe shortages in the supply of essential drugs to the country."

**Publication:** The Indian Express

**Edition:** National

**Date:** July 7, 2014

**Opinion piece:** K K Talwar, former director of PGI, Chandigarh, is advisor, health and medical education, to the government of Punjab.

**Headline:** [A sickly pallor](#)

**Synopsis:** The declining standards of medical education coupled with poor health service delivery continue to be major national concerns. The conditions of primary health centres (PHCs), community health centres (CHCs) and district hospitals, is dismal. About 30 per cent of PHCs are without doctors and nearly 70 per cent of specialist positions in CHCs are vacant. Though India has experts, most of them choose not to work in government hospitals. This results in a highly skewed distribution of healthcare services in favour of a small and relatively affluent segment of the population.

**Publication:** Mint

**Edition:** National

**Date:** July 5, 2014

**Headline:** [Life support](#)

**Synopsis:** While there are no stipulations on standards of practice or fees, well-established family physicians speak of a code of conduct and treatment that binds them. Ganesh Dhakappa, a general practitioner based in Bangalore who has been treating families for over 30 years, lists the requisites. "A family physician listens to the history and problems of patients, serves the community at an affordable cost, with minimal investigative modalities, and at all times without any appointment required. He/she can treat a range of different diseases with his/her experience. He/she is kind, patient, friendly and humane in his/her approach to sick patients. In short, he/she is part of the family of the sick, and also must counsel them to tide over their social, domestic, cultural problems which are not necessarily always medical." That's not a tall order, at all.

**Website:** Zee News

**Edition:** Online

**Date:** July 6, 2014

**Headline:** [Maharashtra govt plans ordinance on Clinical Establishment Bill](#)

**Synopsis:** Maharashtra government is planning to promulgate an ordinance to implement the draft Clinical Establishment Bill to make it mandatory for such establishments in the state to register themselves with a special authority to be created under the legislation. The bill, which has been pending since 2011 due to opposition from the Indian Medical Association, envisages regularising the standards of health care and establish certain basic norms. In view of the opposition, the public health department had set up a committee comprising doctors and NGOs to address issues coming in way of the implementation of the legislation.

**Publication:** The Times of India

**Edition:** Online

**Date:** July 6, 2014

**Headline:** [265 striking doctors sacked in Maharashtra](#)

**Synopsis:** The state public health department came down heavily on protesting doctors and sacked 265 ad-hoc appointees on Sunday as the strike entered its sixth day. One of their key demands is to regularize the services of these doctors. The Maharashtra Association of Gazetted Medical Officers (MAGMO), however, refused to relent and said that their agitation would continue till their demands were met.

**Publication:** The Hindu

**Edition:** Online

**Date:** July 6, 2014

**Headline:** [Health camp](#)

**Synopsis:** Around 850 people attended the medical health camp organised by Government Rajaji Hospital under the Chief Minister's Comprehensive Health Insurance Scheme here on Saturday. According to R. Balajinathan, Programme Coordinator, as many as 415 men and 382 women took part in the camp of which 128 outpatients were referred to Government Rajaji Hospitals for procedures, including surgeries. Meanwhile, 116 patients who required to undergo surgeries and free treatment, but did not possess a smart card that was mandatory for availing cashless medical benefits under the scheme, were referred to procedures.