



**News Updates: June 17, 2014**

**Health Ministry/ FICCI**

**Publication: Express Pharma**

**Edition: Online**

**Date: June 16, 2014**

**Headline: [FICCI presents pharma wish list to the Union Minister of Health & Family Welfare](#)**

**Synopsis:** A high level FICCI delegation led by the president Sidharth Birla met the Union Health and Family Welfare Minister Dr Harsh Vardhan recently. FICCI recommended a blended approach towards universal health coverage (UHC), one that strengthens the links of social health insurance to healthcare providers (both public and private) but ties funding to performance. "A new National Health Policy needs to be rolled out to support implementation of universal health coverage (UHC) over the next decade. To contain rising cost of healthcare, we also need to provide facilitating regulatory environment to promote innovative products and practices to make India a hub for medical technology", said Sidharth Birla, FICCI, President.

**Website: Pharmabiz**

**Edition: Online**

**Date: June 17, 2014**

**Headline: [FICCI seeks health minister's intervention to sort out issues arising out of implementation of DPCO 2013](#)**

**Synopsis:** The Federation of Indian Chamber of Commerce and Industry (FICCI) has sought the new Union health minister's intervention to sort out several issues arising out of the implementation of Drug Price Control Order (DPCO) 2013. FICCI also asked the minister to devise different guidelines for biopharmaceuticals that involve formulations based on biological products from chemical drugs. According to the FICCI, there are a lot of issues in implementation of DPCO 2013 and there is no clarity on inclusion of different dosage and different delivery system in the National List of Essential Medicines (NLEM) List. Slow process of price approval of new drugs and retail and wholesale margins to trade etc. is also an issue. NLEM list is expected to be further expanded which will create conflicting situations for drug manufacturers, importers, marketers and retailers and potentially lead to lack of access of medicines to the community at large.

**Drug pricing**

**Publication: The Hindustan Times**

**Edition: National**

**Date: June 17, 2014**

**Headline: [Regulator to chase drug cos on overcharging](#)**

**Synopsis:** Drug-price regulator, National Pharmaceutical Pricing Authority (NPPA) is set to chase drug majors for defaulting on penalties imposed for overcharging consumers. The defaulters include Cipla Healthcare, Lupin Limited, Dr. Reddy's, Cadila and Baxter Pharmaceuticals among many others. NPPA has issued a list of 1,018 cases, since its inception in 1997 up to March 2014, demanding Rs. 3,381 crore in penalties. So far it has recovered only Rs. 274 crore. NPPA has now decided to look at bigger violations. "We have expedited the legal process to recover the overcharging penalty amounts. Companies that have to pay penalty of over Rs. 10 crore are our major focus now," CP Singh, chairman, NPPA told HT. "Consumers get hurt when companies over-charge, which is why we are looking at the big price violations," Singh added.

**Drug regulation**

**Website: Pharmabiz**

**Edition: Online**

**Date: June 17, 2014**

**Headline: [D&C Act and FSSA unable to regulate prices due to unethical practices of manufacturing cos](#)**

**Synopsis:** Even though amendments have been made on Drugs and Cosmetics (D&C) Act to enable the common man to access quality drugs and the Food Safety and Standards Act (FSSA), 2006 has been implemented for good quality foods to the citizens in the country, both the Acts are often unable to regulate the prices of drugs and food items because of the unethical practices indulged in by manufacturing companies, commented M Rajendran, market analyst and former director of drugs control department, Tamil Nadu. So, this is time for the new government to contemplate on a new policy to regulate all kinds of drugs without leaving any loopholes to the manufacturers for evading the Drug Price Control Order (DPCO) 2013, and to explicate how nutraceuticals/food supplements could be controlled under FSSA. Though the word nutraceuticals is defined in the FSSA, no further rules, regulations or control has been prescribed, he said.

### Universal Health Care

**Publication: The Wall Street Journal**

**Edition: Online**

**Date: June 16, 2014**

**Headline: [Is Universal Health Care Possible in India?](#)**

**Synopsis:** "It's not something that can be done overnight," said India's new Health Minister Harsh Vardhan to The Wall Street Journal on the government's pledge to create a universally affordable health-care system in a country that struggles to provide even basic medical services to a large portion of its 1.2 billion population. Last week, India's new government pledged to remedy persistent shortcomings in basic infrastructure including health care but the speech did not offer details on how these projects would be financed or carried out. Dr. Vardhan, a medical doctor, did not give details either. Instead he offered a broad outline: "We are looking at the whole scenario," he said, and listed a host of issues that will need to be tackled over the next few years. Three experts interviewed said the biggest challenges would be maternal and child care, universal coverage and access to affordable medicines.

### Access and affordability

**Publication: Business Today**

**Edition: Online**

**Date: June 16, 2014**

**Headline: [Addressing drug affordability needs political will, says Pfizer V-P](#)**

**Synopsis:** Greg Shaw, Director, Corporate Relations at the International Federation on Ageing, said the population growth of this group is much faster in India than in many other countries. "A vast majority of the ageing population in India is in the rural areas where there is a real lack of healthcare infrastructure where they are unable to access healthcare facilities," said Christopher Gray, Senior Director, Global Institutions, International Public Affairs, Pfizer Inc. So is affordability a big issue? "Price should never come between the medicine and the people who need it. It is the government's responsibility and we (a corporate entity) can then partner with the government on how to make that accessible and that is a negotiation that goes on with the government," said Watters. One way to deal with this, according to Gray, is to have innovative financing models like that of the GAVI Alliance, a global public-private partnership of scientists, health experts, government leaders, businesspersons and philanthropic organisations. The polio vaccination drive has shown that access is not a big problem. India could reach to its remotest corners to eradicate polio. But affordability is. According to Watters, it has more to do with the political will. "A strong political will is very important to deal with any significant public health issue and there was a strong political will to eradicate polio as it was seen as a blight that had to be removed," he said.

### General Industry

**Publication: The Economic Times**

**Edition: National**

**Date: June 17, 2014**

**Headline: [MNC drug companies like Roche, Merck Serono, Novartis see top deck reshuffle](#)**

**Synopsis:** Multinational drugmakers including Roche, Merck Serono, Novartis and Bristol Myers Squibs are witnessing top-level changes in their management in India, with their chief executives exiting the country at a time when the Rs 72,000-crore market appears to be as challenging as it is potentially lucrative. Lawrence Ganti, India head of German drugmaker Merck Serono is moving to Brazil to take charge of the company's business in South America while American drugmaker Bristol Mayers Squibbs' Phiroz Khan is headed for the United States. Novartis' Anil Matai is leaving the company to go on a sabbatical and Roche's Meeta Guliyani is moving to Merck Serono in Boston.

**Publication: Mint**

**Edition: National**

**Date: June 17, 2014**

**Headline: [The significance of the Competition Commission of India](#)**

**Synopsis:** India's regulatory landscape continues to evolve with change being the only constant. It's been a legislative journey from the command and control mindset that prevailed at the time of Licence Raj to a more modern regulatory regime with the objective of enhancing consumer welfare by sustaining competition in the marketplace. In this globalized era, the business activities in any part of the world can impact the Indian market, and vice versa. This process of integration will only grow in the future. The Competition Commission of India (CCI) is empowered to take cognizance of such anti-competitive effects in the Indian market.

**Publication: The New Indian Express**

**Edition: National**

**Date: June 17, 2014**

**Opinion piece: P M Mathew, professor of economics at Christ University, Bangalore**

**Headline: [Weed Out Deviant Physicians](#)**

**Synopsis:** Unprecedented advancements in the art and science of medical practice have resulted in many challenges in the practice of medical profession. Medical ethics insist that the doctors' main obligation is to keep the patients' interest above everything else. But now, due to the technological dynamism in the medical field and with the entry of profit-motivated private investors in health care, the practice of modern medicine is becoming more and more impersonal and market forces tend to influence decision making by doctors. Health is a manpower-intensive sector. Health care does not rely on high-tech equipment or facilities alone. Health services' provision is mainly reliant on human beings, the professional manpower who deliver the services. In health manpower, doctors occupy the most prominent place since they lead the medical teams in hospitals.