



News Updates: June 25, 2014

Patents/ Compulsory licensing/ Intellectual property rights

Publication: The Pioneer

Edition: National

Date: June 25, 2014

Opinion piece: Akanksha Mehta, student at RML National Law University, Lucknow

Headline: [When IPR seeks to deny patients care](#)

Synopsis: About 14 million people die every year from infectious diseases, many of which are curable and preventable, such as acute respiratory infections, diarrhoeal diseases, malaria and tuberculosis. The death toll is unacceptably high especially in developing nations. This health crisis is largely due to the lack of economic accessibility of life-saving medicines. Many life-saving drugs are also beyond the reach of the common man. High prices of such drugs and medicines can be attributed to the patenting system which allows the drugs companies to gain a monopoly over the production and marketing of pharmaceutical products and processes, permitting them to fix prices at high rates to maximise profits. Patent rights are extended around the world through the provisions of WTO agreement on Trade-Related Aspects of Intellectual Property Rights which is based on the presumption that patents and other intellectual property rights are highly imperative to encourage innovation and research. Yet, there is scant evidence to prove that the introduction of TRIPS-compliant framework of IPR protection has ensured transfer of technology, research & development and innovation in developing countries, especially in context of life-saving medicines and human health.

Clinical trials

Publication: Pharmabiz

Edition: Online

Date: June 25, 2014

Headline: [Stonewalling trials](#)

Synopsis: Clinical trial approvals are on hold in India for nearly two years with very few applications being cleared by the Drug Controller General of India and there is no indication when the normalcy will return. The situation is a result of growing criticism on the way trials were being conducted in India by certain pharma companies and contract research organisations for some years now. The office of DCGI has to, therefore, act with extreme caution while clearing applications for trials.

Union Health Ministry

Publication: Business Standard

Edition: National

Date: June 25, 2014

Headline: [Health minister to meet US counterpart on first tour abroad](#)

Synopsis: Health Minister Harsh Vardhan began a five-day US visit on Tuesday. He will meet his counterpart and explore scope for cooperation and collaboration. Vardhan, on his first official tour abroad since he assumed office, will meet the new US Secretary of Health and Human Services, Sylvia Mathews Burwell, to evaluate the progress of the US-India Health Initiative, launched in 2010. He will attend meetings to discuss steps to consolidate the collaboration between the Indian government, United States Agency for International Development, United Nations Children's Fund and others in ensuring an Acquired Immune Deficiency Syndrome (AIDS)-free generation.

Similar reports in-

The Economic Times- [Harsh Vardhan off to US on first official tour; to meet Sylvia Mathews Burwell](#)
The Indian Express- [Minister Harsh Vardhan holds talks with US Health Secretary Sylvia Mathews](#)
Daily News & Analysis- [Health Minister Harsh Vardhan leaves for US](#)

Publication: The Indian Express

Edition: Online

Date: June 25, 2014

Interview: Harsh Vardhan, Union Health Minister

Headline: [With mass movement, we can wipe out measles, kala-azar](#)

Synopsis: In an interview, Health Minister Harsh Vardhan speaks about his vision for India, corruption in the MCI, implementing schemes like the NRHM, campaign against polio in Delhi and wider access to health care facilities.

Publication: Outlook

Edition: Online

Date: June 24, 2014

Headline: [India, US, Ethiopia Join Hands to Tackle Maternal Deaths](#)

Synopsis: India, the US and the African nation of Ethiopia have joined hands to address the global challenge of child and maternal deaths in particular in the third world countries. Union Health Minister Dr Harsh Vardhan would be among a host of global leaders including World Bank President Dr Jim Young Kim and USAID Administrator Raj Shah to attend the important international meeting in Washington tomorrow. Co-hosted by India, US and Ethiopia in collaboration with UNICEF and Bill & Melinda Gates Foundation, the 'Acting on the Call: Ending Preventable Child and Maternal Deaths' will unveil new efforts to save an unprecedented number of women and children by 2020 in 24 priority countries.

Publication: India Today

Edition: Online

Date: June 24, 2014

Headline: [Combat AIDS with Indian culture, not condoms, says Dr Harsh Vardhan](#)

Synopsis: Union Health Minister Dr Harsh Vardhan has said that to prevent AIDS, promoting condom usage is not enough. "The thrust of the AIDS campaign should not only be on the use of condoms. This sends the wrong message that you can have any kind of illicit sexual relationship, but as long as you're using a condom, it's fine," Dr Harsh Vardhan was quoted as saying.

Similar report in-

The Economic Times- [Don't wear a condom, wear values to fight Aids: Dr Harsh Vardhan, Health Minister](#)

Drug pricing

Website: Reuters

Edition: Online

Date: June 25, 2014

Headline: [Exclusive - India likely to extend price caps to more drugs - sources](#)

Synopsis: India is likely to raise the number of drugs deemed essential and therefore subject to price caps to improve affordability, said people directly involved in the process. A panel convened by India's health ministry met for the first time on Tuesday to consider adding more drugs to the list of essential medicines, all of which would then come under price caps, one of the people said. The move

would make the drugs more affordable in a country where 70 percent of the 1.2 billion people live on less than \$2 a day and less than 20 percent are covered by health insurance.

Similar reports in-

The Economic Times- [Health ministry may extend price caps to more drugs: Sources](#)

Mint- [India may extend price caps to more drugs](#)

Business Standard- [EXCLUSIVE - India may extend price caps to more drugs: sources](#)

The Times of India- [Govt may extend price caps to more drugs](#)

The Hindustan Times- [More medicines to see price dip by 10-15%](#)

The Hindu Business Line- [More drugs to be brought under price control regime](#)

The Indian Express- [Govt likely to extend price caps to more 'essential' drugs](#)

The Financial Chronicle- [Govt likely to extend price control to more drugs](#)

The New Indian Express- [India May Extend Caps to More Drugs-Sources](#)

Drug regulation

Website: Pharmabiz

Edition: Online

Date: June 25, 2014

Headline: [Indian pharma needs to invest in operational excellence to ensure regulatory compliance: AG Raghu](#)

Synopsis: Indian pharma industry needs to move towards operational excellence to predict and prevent shortcomings in production practices. This would be the only way to ensure operational excellence which is the ultimate strategy for regulatory compliance, said AG Raghu, technical director, Gland Chemicals Pvt. Ltd. A string of warning letters has put the pharma industry into microscopic scrutiny of regulators especially in India. In fact, the major findings by the regulators have been the inadequate laboratory systems together with the improper implementation of corrective action and preventive action (CAPA.) The companies will need to plan for zero defect product development and invest in achieving total quality not just in manufacturing but supply chain management, he added. Traditionally, the pharmaceutical industry functions in a highly regulated environment and the regulators have taken the responsibility for product quality.

Universal Health Coverage

Publication: The Economic Times

Edition: Online

Date: June 25, 2014

Headline: [Rs 18,000 crore required to extend health insurance coverage](#)

Synopsis: Investing about Rs 18,000 crore or 0.2% of the GDP efficiently can help India extend basic health insurance coverage to almost 80% of the population, a CII healthcare subcommittee has estimated. The CII study, which recommends a roadmap for Universal Health Coverage (UHC), assumes an average annual premium of Rs 900 per family, where each family is taken to have five members and excludes administrative costs. The health ministry is currently consulting stakeholders including states and development agencies to evolve the most suitable 'health assurance for all' plans for the country.

Cancer

Publication: The Indian Express

Edition: Online

Date: June 25, 2014

Headline: [Cancer surgeries top procedures under Jeevandayi Health Scheme](#)

Synopsis: Cancer is high on the list of surgeries that beneficiaries of the state health insurance scheme floated for people earning below Rs 1 lakh a year, and to meet health expenditure of

beneficiaries, the government has spent Rs 606 crore for 2.30 lakh surgeries, reveals data. Two years since the state government launched the Rajiv Gandhi Jeevandayi Arogya Yojana to provide cashless hospitalisation and treatment of beneficiaries of the scheme, health officials said there has been an increase in cancer, kidney and cardiac surgeries. Cancer surgeries are high under the scheme, says Piyush Singh who is in charge of the health scheme.

Public Health

Publication: The Economic Times

Edition: Online

Date: June 24, 2014

Opinion piece: Jack Watters, Vice President for External Medical Affairs, Pfizer

Headline: [Public health- The ageing imperative: India needs to act now](#)

Synopsis: An Indian born in 1950 could expect to live for a mere 37 years. Today, India's life expectancy at birth has risen to 65 years and is projected to be 74 years by 2050. Indians are living longer — that's the good news. The bad news is the number of older Indians who will be affected by long-term, chronic conditions will increase, leading to serious economic, social and healthcare policy consequences. By 2030, non-communicable diseases (NCDs) will account for almost three-quarters of deaths in India and the years of life lost due to coronary heart disease will be greater than in China, Russia and the US combined. In a study conducted by the Harvard School of Public Health, the economic burden of NCDs in India will be close to \$6.2 trillion during 2012-30.