

**OPPI News Update**  
**Friday, October 17, 2014**

**Patent Locker Room Tactics**

**Publication:** [The Economic Times](#) (Opinion piece: **Bibek Debroy**) *(scan attached)*

In April, the United States Trade Representative (USTR) brought out a Special 301 report and India was placed on the Priority Watch List. There is a long litany of complaints about India's intellectual property rights (IPR) regime: enforcement, speed of dispute resolution, criminal remedies, speed of granting patents, Section 3(d) of the Indian Patents Act, compulsory licensing, trade secret protection and sundry other matters. Two sentences from that report should be quoted. "The US urges India to take specific actions to address the concerns raised, including by means of constructive bilateral engagement." And "to further encourage progress on IPR issues of concern, USTR will publish a Federal Register notice and initiate an Out-of-Cycle Review (OCR) of India in the fall of 2014, commencing an assessment of the progress in that engagement."

**No decision that will raise drug price: PM**

**Website:** [PTI](#)

Government will not take any decision that will effect a rise in the price of drugs, Prime Minister Narendra Modi today said. Modi gave this assurance to a Kerala ministerial delegation headed by Chief Minister Oommen Chandy which shared with him "apprehensions" that the cost of medicines required for treatment of diseases like cancer, HIV, TB, malaria and diabetes is likely to shoot up.

**Similar reports in-**

**The Economic Times-** [No decision that will raise drug price: PM Narendra Modi](#)

**Daily News & Analysis-** [No decision that will raise drug price: Narendra Modi](#)

**The Indian Express-** [Won't hike prices of non-essential drugs, assures PM](#)

**Deccan Chronicle-** [PM assures CM Oomen Chandy on drug prices](#)

**Manorama Online-** [No decision that will raise drug price: PM](#)

**AIDS Healthcare Foundation wants drug prices capped**

**Publication:** [The Hindu Business Line](#)

Officially, there are around 2.1 million HIV (human immunodeficiency virus) affected patients. HIV causes the dreaded acquired immunodeficiency syndrome (AIDS), and AIDS workers believe the reality the number of affected individuals at over 3.2 million. However, out of the official 2.1 million patients, only an estimated seven lakh people are covered under the Government's AIDS control programme. "The problem is that a huge population (of AIDs patients) don't go to Government centres for treatment due to fear of ostracisation. They seek treatment elsewhere and they need AIDs medicines to be affordable," said Nochiketa Mohanty, Country Programme Manager (India), AIDS Healthcare Foundation (AHF). AHF recently wrote to the Prime Minister seeking restoration of guidelines that would allow the National Pharmaceutical Pricing Authority (NPPA) to fix prices medicines for chronic diseases such as AIDS, cancer, heart diseases and others even if they are not in the list of essential medicines. The Government recently revoked the NPPA guidelines, issued in July, to fix prices of non-essential medicines following protests by pharmaceutical companies.

**Saving WTO**

**Publication:** [The Financial Express](#)

An editorial appearing in The Financial Express argues that India can't afford to be painted the black sheep. When the World Trade Organisation's General Council meets next week, India would do well to keep in mind this presents it one more chance to set the record straight, to prevent itself from being painted the black sheep in global trade negotiations. India's decision to block the trade facilitation agreement (TFA) okayed by 160 countries at Bali is being used by diplomats to argue they too need not stick to commitments made in earlier meets. This is unfortunate since, as is well known, India's best bets lie in a multilateral system—ironically, when the US said India's IPR

laws were not kosher, India pointed out they were WTO compatible. While India's position on food subsidies is well known, what is positive is prime minister Narendra Modi saying, when he was in the US, that he is hopeful of some solution.

### **India shoots unilateral USTR action down; Looks towards bilateral talks**

**Blog:** [Spicy IP](#)

In a very welcome and quick response to USTR's Special 301 Out of Cycle Review (OCR) process for India that opened for comments a couple of days ago (October 14th), the Government of India has told the American authorities that they will not be cooperating with this unilateral process, writes Nayanima Basu in the Business Standard. Pointing to the lack of any obligation to participate in the unilaterally held Special 301 process, Indian authorities have said that they would engage US in bi-lateral dialogue mechanisms under the new IP working group, rather than the unilateral process. This is a terrific move by India, given that the USTR Special 301 process is a degrading political pressure mechanism with no credibility. As per Business Standard, India also stated that the comprehensive IPR policy that India was coming out with soon would "settle the matter" forever(!) To me, that certainly is a strong indicator that the much talked about soon to be released national IPR policy will not be giving in to pressure to modify our IPR policy as per US demand.

### **Patients' informed consent for clinical trials to be captured on cam**

**Publication:** [Daily News & Analysis](#)

Experts feel the method will not be feasible in certain situations, open to discussions on making the process flexible. While the apex court ordered in favour of audio-visual recording of the informed consent process for patient participation in clinical trials, it may lead to problems in certain situations with specific communities, according to experts. Y K Gupta, professor and head, department of pharmacology, AIIMS, on the sidelines of DIA's 9th annual India conference, said, "If audio-visual comes in process, there will be problems in certain situations. Informed consent also mentions the process, i.e how it is done. There may be several situations where an informed consent will not be possible."

### **Ranbaxy to pay \$40 million to settle Texas litigation**

**Website:** [Reuters](#)

Generic drugmaker Ranbaxy Laboratories Ltd said it has agreed to pay \$39.75 million to settle litigation concerning its participation in Texas Medicaid, the U.S. federal-state healthcare program for people with low incomes. The litigation related to the manner in which Ranbaxy historically reported pricing data to Texas Medicaid for some drugs, Ranbaxy said in a statement on Thursday. The payments will be made in tranches through August 2015, it said.

#### **Similar reports in-**

**The Economic Times-** [Ranbaxy to pay \\$40 million to settle Texas Medicaid pricing litigation](#)

**The Times of India-** [Ranbaxy to pay \\$40m to settle US case](#)

**Mint-** [Ranbaxy to pay \\$40 million to settle Texas probe on drug pricing](#)

**Business Standard-** [Ranbaxy to pay \\$40 mn to settle Texas Medicaid litigation](#)