

**Drug pricing/ NPPA****Website: Pharmabiz****Edition: Online****Date: September 2, 2014****Headline: ['Govt should frame clear rules to fix separate MRP for generic drugs'](#)**

**Synopsis:** The efforts to promote generic drugs by central and various state governments may not bring the desired result to the general public unless there is a government rule to fix the reduced prices on MRP on the label for generic products, commented G.Koteshwar Rao, former assistant director of Sipra Labs, Hyderabad and an enforcement officer of Telengana. "At present the MRPs of the branded drugs and of the generic ones are the same. Some shops sell the generics at 10 per cent discount, some other shops will sell it at 20 per cent discount. In most of the cases 30 per cent discount on MRP is allowed. Since different prices are charged for similar products in different shops, the consumer get confused why the variation in prices happens from shop to shop. So, the government should frame a rule to fix separate MRP for generic drugs and clear all confusions with regard to price variations", said Rao who has experience in drugs manufacturing, sales, testing and enforcement of drug acts. He was responding to Pharmabiz on the varied programs introduced by central and various state governments to provide generic medicines at cheaper rates to the public by establishing exclusive shops and encouraging private pharmacies.

**Website: Reuters****Edition: Online****Date: September 1, 2014****Headline: [Pricing is key for new heart drugs challenging cheap generics](#)**

**Synopsis:** Doctors looking at highly encouraging clinical trial results for new heart drugs at the world's largest cardiology meeting this week are missing one piece of data that will be critical to their success - the price. While new treatments on show in Barcelona are certainly moving cardiovascular medicine forward after a series of setbacks in recent years, cardiologists say that cost will be key in determining how widely they are used. "We are entering a new era of treatment and, of course, it will cost a lot of money, which is a problem," said Michel Bertrand, emeritus professor at the University of Lille and a past president of the European Society of Cardiology (ESC).

**Patents/ IPR/ Compulsory licensing****Publication: The Economic Times****Edition: National****Date: September 2, 2014****Headline: [Lack of initiative in drug discovery ails India: Dhaval Kumar Patel, Novartis](#)**

**Synopsis:** Dhaval Kumar Patel, 53, is a brutally honest scientist and speaks his mind. Born in Anand, Gujarat, and educated in Nadiad till the age of 8, Patel heads the world's largest drug maker Novartis Europe's drug discovery unit. In a wide-ranging conversation with ET, he does a reality check on what's holding up science in India, patent cliffs and the future of drug discovery.

**Website: Mondaq****Edition: Online****Date: September 1, 2014****Headline: [India: Bombay HC Upholds India's First Compulsory License](#)**

**Synopsis:** The Bombay HC in this case has upheld the order of the IPAB, which affirmed the order of the Controller of Patents to grant Compulsory License to NATCO for Bayer's Indian patent on Sorafenib Tosylate (Nexavar). NATCO's application for Compulsory License of Patent was the first in India. This case is significant as it gives certain new interpretation to the conditions that needs to be met under the Indian Patents Act, 1970 for grant of Compulsory License. The Bombay HC held that in respect of medicine the adequate extent for meeting the demand of the drug has to be 100%. The Bombay HC held that dual pricing can be applied to meet the requirement of the public and not for making available the drug under reasonably affordable price. The Bombay HC held that the sale by the patent infringer can be taken into account to meet the reasonable requirement of the public only when the patentee has granted a defacto license i.e. has not filed a patent infringement suit against the infringer.

### Clinical trials

**Publication:** The Economic Times

**Edition:** National

**Date:** September 2, 2014

**Headline:** [Government may exempt critical drugs from local clinical trials](#)

**Synopsis:** The government has decided to draw up a list of serious and life-threatening diseases, and ailments that are particularly relevant to India, for which a new drug can be considered for exemption from local clinical trials if it has already been approved and marketed safely in developed countries such as the United States, UK, Canada, Japan and Australia. The decision, officials said, was taken at a recent meeting of the technical committee set up under the health ministry to supervise clinical trials on experimental drugs - new chemical entities or new biological entities.

**Similar reports in-**

The Asian Age- [No drug trials for fatal diseases](#)

Deccan Chronicle- [No local test for crucial drugs](#)

**Website:** Pharmabiz

**Edition:** Online

**Date:** September 2, 2014

**Headline:** [Health ministry considering clinical trial waiver for cancer drugs Aflibercept & Trastuzumab emtansine](#)

**Synopsis:** The Union health ministry is considering a proposal for providing local clinical trial waiver for two cancer drugs Aflibercept and Trastuzumab emtansine on the plea that there is an unmet need for these drugs in the country. While Aflibercept is indicated for patients with metastatic colorectal cancer (MCRC) Trastuzumab emtansine is indicated for the treatment of patients with HER2-Positive. According to sources, the new drug advisory committee (NDAC) of the ministry has already given their approval for manufacture/import for marketing these drugs in the country without any local clinical trial. The NDAC has given its recommendation to the technical committee, another high-level panel formed by the ministry on clinical trials.

**Publication:** The Financial Chronicle

**Edition:** National

**Date:** September 2, 2014

**Headline:** [Stringent regulations halt research on ayurvedic drug](#)

**Synopsis:** New proprietary drugs have stopped coming into the market after government-mandated clinical trials for ayurvedic medicines. Even drug control authorities do not have clarity about the clinical trial procedures for ayurveda. Before 2010, when the central government introduced allopathy-modeled clinical trials for ayurveda, the companies had to present documented research about the new product and its efficacy before the state-level drug controller to get a licence. "After the new regulation, no ayurvedic company has got any new proprietary drug licensed and very few have undertaken the clinical trial procedures," said D Ramanathan, general secretary of Ayurvedic Medicine Manufacturers

Health ministry

**Publication: The Hindu**

**Edition: Online**

**Date: September 1, 2014**

**Headline: [Health Minister calls for transparency in organ donation](#)**

**Synopsis:** National Organ and Tissue Transplantation Organisation (NOTTO) web portal will be fully operational in the first phase to cover kidney cases within the next 10 days. Union Health Minister Dr. Harsh Vardhan on Monday called for Information Technology-guided transparency in the interface between organ donors and recipients when the National Organ and Tissue Transplantation Organisation (NOTTO) becomes operational. The Minister said there will be no VIP quotas and no recommendations from officers will be entertained. "Every life is worth protecting and the spirit of the movement is not to be mocked," he said after a visit on Monday to Safdarjung Hospital, where NOTTO is housed.

**Similar report in-**

**The Indian Express- [No VIP quotas: Health Minister calls for transparency in organ donation](#)**

**Publication: Business Standard**

**Edition: National**

**Date: September 2, 2014**

**Headline: [Modi's industry conference in US to attract pharma, IT players](#)**

**Synopsis:** Prime Minister Narendra Modi will address Indian and American industry through video conferencing during his visit to the US later this month. The interaction is being organised by the US-India Business Council (USIBC) and participants from various industry segments are likely to join the call, it is learnt. While declining to disclose the programme's details immediately, USIBC's acting-president Diane Farrell said: "The USIBC is very pleased to be actively involved in planning for upcoming visits by India's Prime Minister Narendra Modi, as well as Finance and Defence Minister Arun Jaitley."

**Publication: The Times of India**

**Edition: Online**

**Date: September 2, 2014**

**Headline: [Centre makes a big splash with tax hike on tobacco](#)**

**Synopsis:** The biggest achievement of the new government in its first 100 days has been in imposing the largest-ever hike in excise duty on cigarettes — from 11% to 72%. The government also substantially raised taxes on pan masala, gutka and other tobacco products. Health minister Harsh Vardhan, who has taken on this issue on campaign scale, has been shooting off letters to chief ministers of all states seeking to increase VAT on tobacco products. Public health experts believe this'll not only boost revenue generation but also help reduce the nation's disease burden, particularly cancer, by dissuading people from using tobacco products. About 275 million Indians (35% adult population and 14% children aged 13-15 years) are tobacco users, mainly smokeless tobacco.

**Publication: The Times of India**

**Edition: Online**

**Date: September 2, 2014**

**Headline: [No taint on ex-AIIMS vigilance officer Sanjiv Chaturvedi: Environment ministry](#)**

**Synopsis:** In a significant development concerning the removal of AIIMS ex-chief vigilance officer Sanjiv Chaturvedi, the ministry of environment and forests (MoEF) has written to the Union health ministry stating that the officer 'is clear from vigilance angle'. In an office memorandum dated August 28, the MoEF, which is the appointing authority, Cadre Controlling Authority and Repository of all complaints

against Chaturvedi said, "As per the vigilance division of this ministry, Sanjiv Chaturvedi, IFS (HR:2002) is clear from vigilance angle."

### Modi government

**Publication: The Hindu Business Line**

**Edition: New Delhi**

**Date: September 1, 2014**

**Headline: [India to seek China's support on food security at WTO](#)**

**Synopsis:** India will try to convince China to back its stand on securing an agreement on food security at the World Trade Organisation simultaneously with a trade facilitation pact, when talks resume this month. Commerce Minister Nirmala Sitharaman is likely to do so when she meets her Chinese counterpart Gao Hucheng after the Joint Economic Group in that country on Tuesday. New Delhi has refused to back an agreement on trade facilitation, strongly pushed by developed nations, including the US and the EU, till measures are taken to legitimise its subsidies for food procurement. India will also seek further Chinese investments. It will ask China's state health body to source generics from the country and press for tariff reduction on carpets and diamonds at the Joint Economic Group meeting.

**Publication: Daily News & Analysis**

**Edition: Online**

**Date: September 1, 2014**

**Headline: [Supreme Court issues notice to Narendra Modi government on curbing leprosy in country](#)**

**Synopsis:** The Supreme Court on Monday expressed concern over prevalence of leprosy in the country despite the disease being curable and sought explanation from Centre and state governments for their alleged failure to curb it. A bench headed by Justice Dipak Misra issued notice to governments asking them to file their response within four weeks after it was alleged that leprosy affects over 1.25 lakh people annually in the country. The court passed the order on a petition filed by Pankaj Sinha who alleged that governments have failed to eliminate the disease despite medical treatment available since 1981.

**Publication: The Financial Express**

**Edition: National**

**Date: September 2, 2014**

**Headline: [Quarterly review of govt performance: Narendra Modi Meter 8.5/10](#)**

**Synopsis:** Reflections of last 90 days: We start a quarterly review of the performance of the new Indian government. We have devised a performance metric based on (i) Economics, (ii) Foreign policy, (iii) Governance and (iv) State relations/ Parliament productivity/Politics. Based on this metric, the government has scored a healthy 8.5 out of 10.

**Publication: The Times of India**

**Edition: Online**

**Date: September 1, 2014**

**Headline: [Tokyo Declaration for India — Japan Special Strategic and Global Partnership](#)**

**Synopsis:** The two Prime Ministers noted with satisfaction the recent productive Ministerial discussions in the fields of education, culture, sports, and science & technology, and recognized that the two Governments can truly harness the full potential of their relationship by seizing the vast opportunities for collaborating in science & technology, innovation, education, skill development, health, and information and communications technology to create new opportunities for their talented people, transform lives and address global challenges.

**Publication: Mint**

**Edition: Online**

**Date: September 1, 2014**

**Headline: [India, Japan strengthen strategic ties](#)**

**Synopsis:** India and Japan moved their relations up a notch on Monday to signal closer economic and defence ties, seemingly unmindful of the reactions the move could draw from Asian giant China. Both sides made veiled references to China, implying that the deepening of the relationship had also assumed a geostrategic overtone, especially since they emphasized the importance of Japan and India in jointly influencing the future of Asia and the world.

## FDA

**Website: Pharmabiz**

**Edition: Online**

**Date: September 1, 2014**

**Headline: [Wockhardt's two anti infective drugs get QIDP status from US FDA](#)**

**Synopsis:** Wockhardt has received the coveted Qualified Infectious Disease Product (QIDP) status from US FDA for two anti infective drugs viz., WCK 771 and WCK 2349. QIDP status is granted to drugs which act against pathogens which have a high degree of unmet need in their treatment and are identified by Centre for Disease Control (a top US government health and safety body). QIDP status allows for fast track review of the drug application by US FDA paving way for an early launch. This is the first instance of an Indian pharmaceutical company receiving a QIDP status.

**Similar reports in-**

**Business Standard- [Wockhardt gains as USFDA grants QIDP status to two drugs](#)**

**The Hindu Business Line- [Wockhardt gains after USFDA agrees to fast track approval for two novel drugs](#)**

**The Financial Chronicle- [Wockhardt gets QIPD status for anti-infectives](#)**

**Website: Pharmabiz**

**Edition: Online**

**Date: September 1, 2014**

**Headline: [US FDA grants fast track status to Pfizer's clostridium difficile vaccine candidate](#)**

**Synopsis:** The US Food and Drug Administration (FDA) has granted Fast Track designation to the Pfizer's investigational Clostridium difficile (C. difficile) vaccine candidate (PF-06425090). Currently in phase 2 clinical development, the vaccine candidate is designed to prevent C. difficile-associated disease, which can include life-threatening diarrhoea and pseudomembranous colitis. "C. difficile is a growing, difficult-to-treat healthcare-associated infection," said Dr. Emilio Emini, senior vice president of vaccine research and development for Pfizer. "No vaccine is currently available to prevent the infection-associated disease. In the United States alone, there are approximately 250,000 cases of C. difficile-associated disease, resulting in approximately 14,000 deaths each year."

**Website: Pharmabiz**

**Edition: Online**

**Date: September 2, 2014**

**Headline: [Maha FDA plans massive crackdown on illegal cord blood banks in state](#)**

**Synopsis:** Maharashtra Food and Drug Administration (FDA) is planning to launch a massive crack down on illegally operating cord blood banks in the state following an inspection on Sangli based cord blood bank Stem Plus Biotech. The cord blood bank found was operating without a license and lack of facilities in contravention to provisions of Drugs and Cosmetics Act. FDA is now planning to lodge an FIR against the unauthorised cord blood bank for illegally operating for two years and cheating 48 customers. According to FDA officials, Sangli based Stem Plus Biotech was operating without a license in contravention to Section 18 C of Drugs and Cosmetics Act based on the inspection carried on August 23,

2014. There are three registered cord blood banks in the state as of today.

**Publication: The Times of India**

**Edition: Online**

**Date: September 2, 2014**

**Headline: [Clean-up task awaits new transport chief](#)**

**Synopsis:** Experts say the new transport commissioner, **Mahesh Zagade**, who cracked a whip on corruption during his FDA tenure, will have a lot of cleaning-up to do at his new posting. While all regional transport offices (RTOs) across the state will now come under his purview, he will also play a key role in the Mumbai Metropolitan Regional Transport Authority, which is a transport planning body for the region. Zagade told TOI he has received orders, but is yet to take charge.

#### FDI Insurance

**Publication: The New Indian Express**

**Edition: Vellore**

**Date: September 2, 2014**

**Headline: [Left Protest Against FDI in Insurance](#)**

**Synopsis:** Around 100 cadre of the CPM and CPI staged a hunger-protest before the Collectorate here on Monday, condemning the Central and State governments over price hike and corruption. The Left parties criticised the BJP government's decision to allow foreign direct investment in railways, defence and insurance sectors. Privatisation and other issues were also raised during the agitation.

**Publication: The Hindu**

**Edition: Vijayawada**

**Date: September 2, 2014**

**Headline: [LIC staff unions oppose hike in FDI in insurance sector](#)**

**Synopsis:** Employees and agents of the Life Insurance Corporation (LIC), India's leading public insurance company, have vehemently opposed the Union government's move to hike Foreign Direct Investment (FDI) to 49 per cent in the sector. At the 58th formation day celebrations held on the premises of Branch-1 at Arundelpet, LIC branch manager B.R Kishore Singh, employees' union divisional secretary V.V.K. Suresh said that the NDA government was keen on introducing the Insurance Bill in the winter session of Parliament and vowed to build a public opinion against the move.

#### Public Health

**Publication: The Hindu**

**Edition: National**

**Date: September 2, 2014**

**Opinion piece: Soumya Swaminathan, director, National Institute for Research in Tuberculosis, Chennai**

**Headline: [Taking healthcare to India's remote tribes](#)**

**Synopsis:** The right to good healthcare must be addressed using modern technology, innovative approaches and by involving tribals in developing solutions for their problems. In his address to the nation on Independence Day, Prime Minister Narendra Modi spoke about inclusive development, with food security, safe housing and sanitation being the rights of every citizen. Health is intimately linked to these essentials of living. The health status of India's tribal communities is in need of special attention. Being among the poorest and most marginalised groups in India, tribals experience extreme levels of health deprivation. The tribal community lags behind the national average on several vital public health indicators, with women and children being the most vulnerable.

**Publication: The Indian Express**

**Edition: National**

**Date: September 2, 2014**

**Opinion piece: Reetika Khera, associate professor, Economics, at the Indian Institute of Technology, Delhi**

**Headline: [Bitter pill to swallow](#)**

**Synopsis:** Rajasthan Chief Minister Vasundhara Raje's decision to "target" free basic primary level healthcare is baffling. The proposal is ill-advised on at least four grounds. One, it moves towards the discredited approach of "targeting" benefits, with its divisive effects and inevitable exclusion errors. Two, appointments and absenteeism were the weak link in the 2013 Rajasthan survey. Curtailing primary level healthcare will not resolve that issue. Three, while political posturing is to be expected (for example, in the election campaign in Rajasthan, Raje reportedly said that the free medicines were "poisonous"), her proposal reeks of pettiness; it will end up punishing people by reducing their access to essential health services. Four, the supply of free medicines is very much on her party's agenda. Gujarat, which already provides free medicines and diagnostics, was studying Rajasthan's system. The Centre also plans to adapt it. Most importantly, the National Health Policy 2002 (formulated in Atal Bihari Vajpayee's time) noted that public health facilities functioned better in the southern states "because some quantum of drugs is distributed through the primary health system", and "patients have a stake in approaching public health facilities."

### General Industry

**Publication: The Hindu Business Line**

**Edition: National**

**Date: September 2, 2014**

**Opinion piece: Siraj Dhanani, founder of InnAccel Consulting Services**

**Headline: [India can be more than a pharma hub](#)**

**Synopsis:** Every year, over 12 lakh infants die within a year of being born in India, while more than 50,000 mothers die during or just after childbirth — statistics worse than that of Bangladesh or Nepal. But the truly shocking fact is that a majority of these deaths could have been prevented with the development and use of five or six simple medical devices. Medical technology (devices, diagnostics, equipment, etc.) is one of the three key components of any healthcare system, the others being pharmaceuticals and services. India has created the world's lowest-cost pharmaceutical industry, through 'genericisation' of medicines. A similar 'indigenization' of medical technology (MedTech) is needed to replicate the pharmaceutical miracle. Today, high-priced western imports comprise over two-thirds of our MedTech market — imports which are not affordable, or appropriate, for the vast majority of our citizens. As David Kelso, a professor at Northwestern University, says: "If people began designing devices specifically for resource-poor settings, they could come up with much better solutions."

**Publication: The Economic Times**

**Edition: Online**

**Date: September 2, 2014**

**Headline: [Government's role important as pharmaceutical companies hesitate to invest on tropical disease research](#) (Print headline- Letter from London - Pouring Ice-Cold Water Over Ebola)**

**Synopsis:** What's the connection between a stunt for an obscure neural disease, which mostly (according to Wiki) affects Americans, and an equally (to most people) unknown African disease that is now an international health crisis? They're both rare diseases and affect a minor fraction of overall population. Short circuit in brain moment. Neither disease has a large and chronic customer base, so there's no gravy train at the end for Big Pharma. Unlike diseases like cancer, there's no big government money poured into buying the produce from the Big Pharma labs. So, does the private sector, the types who complain about patent protection, do any research on them? Of course not. It does not make market sense. What ticks me off is that people accept that theory as the "right" way to do things, just like they accepted subprime mortgages.

**Publication: Business Standard**

**Edition: National**

**Date: September 2, 2014**

**Headline: [Pharma MSMEs in North India outpace their peers](#)**

**Synopsis:** CRISIL has studied the performance of 216 micro, small, and medium enterprises (MSMEs) that it rated in 2013-14 (financial year April 1 to March 31). The sample was chosen from MSMEs engaged in manufacturing pharmaceutical products across India. The study indicates that the average sales of these MSMEs showed a compound annual growth rate (CAGR) of 23 per cent between 2010-11 and 2012-13, with MSMEs in North India clocking the highest CAGR - 26 per cent - in the analysis period.

**Publication: Mint**

**Edition: Online**

**Date: September 1, 2014**

**Headline: [Cipla targets US with Glaxo's Advair, anti-AIDS medicines](#)**

**Synopsis:** Cipla Ltd shot to prominence a decade ago by selling AIDS drugs for \$1 a day in Africa. Now the Indian generics maker is seeking a bigger slice of the US market with cheaper medicines for asthma and HIV. "Cipla's top target is a version of GlaxoSmithKline Plc's asthma treatment Advair. It plans to submit an application to the US Food and Drug Administration (FDA) this year for an aerosol version," chairman Yusuf Hamied said in an interview. While the US patent on the drug expired in 2010, Glaxo still has protections on the inhalers used to deliver it, and the US is making generic drug makers prove that their devices are as good. "Generic Advair—if Cipla gets it through—it will change the face of Cipla," Hamied said, without specifying when he expects to start selling his version in the US or if his company could be the first to do so. Hamied's goal is to make Cipla a significant player in the US by 2020, with 20% of sales coming from there, compared with about 9% now. In the HIV market, he plans to bring cheaper copies of top-selling Gilead Sciences Inc. medicines to the US Mumbai-based Cipla had global sales of about \$1.6 billion last fiscal year.

**Publication: The Free Press Journal**

**Edition: National**

**Date: September 2, 2014**

**Opinion piece: Amit Kapoor, Chair, Institute for Competitiveness & Editor of Thinkers and Sankalp Sharma, Senior Researcher at the Institute for Competitiveness, India**

**Headline: [Competition panel: Able regulator](#)**

**Synopsis:** The Competition Commission of India (CCI) is one such regulator, which looks to eliminate practices having adverse effect on competition, promoting and sustaining competition, protecting the interests of consumers and ensuring freedom of trade in Indian markets. The Commission was established in 2003 after the passing of the Competition Act in 2002. It was in the news recently for three specific cases. These cases were pertaining to three different industries namely real estate, automotive and pharmaceuticals. The CCI has, for the first time, subjected to public scrutiny the merger of Sun Pharmaceutical Industries Ltd and Ranbaxy Laboratories Ltd. The deal is under the scanner, as it could harm our 'national interests.' It will most likely lead to significant market domination by the combined entity. The deal may cause prices of essential life-saving drugs to rise due to monopolisation. The CCI had issued a show cause notice in July to the companies concerned asking why there should not be a public investigation of the merger.

**Publication: Business Standard**

**Edition: National**

**Date: September 2, 2014**

**Headline: [Nifty crosses 8,000: Auto, pharma shine in 1,000-point journey](#)**

**Synopsis:** Stocks of the automobile, pharmaceutical, information technology (IT), metal and realty sectors have been among the top gainers in the National Stock Exchange's benchmark Nifty index's

1,000-point journey to the 8,000 mark during the past 78 days. The CNX Auto and CNX Pharma index surged more than 25 per cent each. The CNX Realty, CNX Metal and CNX IT indices gained 18-25 per cent this 1,000-point rally. The 50-share CNX Nifty crossed 8,000 points for the first time on Monday, after data issued after market hours on Friday had showed the economy expanded in the April-June quarter at its fastest pace in a little over two years, of 5.7 per cent. After an intra-day high of 8,035 on Monday, the Nifty closed at a fresh all-time high of 8,027.70. It has gained 14.4 per cent or 1,013 points from May 12, when it hit the 7,000-mark for the first time. And, has rallied 12.7 per cent or 905 points after the Lok Sabha election result on May 16 when the Narendra Modi-led Bharatiya Janata Party won a clear majority.

**Website: Moneycontrol (appeared in Mint)**

**Edition: National**

**Date: September 2, 2014**

**Headline: [Will take 2-2.5 yrs for phase-3 clinical trials: Wockhardt](#)**

**Synopsis:** After Wockhardt received qualified infectious disease product (QIDP) status from the US health regulator, the stock surged almost 6 percent intraday today. Speaking to CNBC-TV18, founder chairman and group CEO Habil F Khorakiwala says it is too early to comment on the market opportunity for the company. This is the first time QIDP status is given to an Indian company, says Khorakiwala. The two drugs that received the QIDP status include WCK 771 and WCK 2349. The company will take another 2-2.5 years for phase-3 clinical trials, he adds. The QIDP status will allow fast tracking of the drug application from the USFDA and 5-year extension for the drug patents in the US. Meanwhile, Khorakiwala shrugs off any possibility of selling stake in the company.

**Publication: The Financial Express**

**Edition: National**

**Date: September 2, 2014**

**Headline: ['Most exciting ever' Novartis drug points to huge sales](#)**

**Synopsis:** Sales forecasts for Novartis' new heart failure drug are being ramped up by analysts after strikingly good clinical trial results for a medicine doctors expect to transform treatment of the deadly disease. Shares in the Swiss drugmaker jumped over 3% to a record high on Monday as data for LCZ696 released at the weekend beat expectations, showing the medicine slashed deaths and hospitalisations, worked across all groups of patients, and had no serious side effects. David Epstein, Novartis' head of pharmaceuticals, said the launch of the drug next year promised to be the company's most exciting ever and profit margins on the medicine would be good. Investigators working on the study and the company itself believe it has potential to replace drugs that have been central to treating heart failure for a quarter of century, opening up a multi-billion dollar sales opportunity. "It will be possibly the most exciting launch the company has ever had," Epstein said.

**Similar report in-**

**Reuters- ['Most exciting ever' Novartis drug points to huge sales](#)**

**Publication: Mint**

**Edition: Online**

**Date: September 1, 2014**

**Headline: [Novartis Japan admits concealing drug side effects](#)**

**Synopsis:** The Japanese unit of Swiss pharma giant Novartis AG has admitted it did not report more than 2,500 cases of serious side effects in patients using its leukaemia and other cancer drugs, reportedly including some fatalities. The revelations, which marked the latest in a string of scandals at the company's Japanese subsidiary, come after local authorities slapped the firm on the wrist, saying it had to clean up its operations. On Friday, Novartis issued a statement saying it had failed to report to regulators at least 2,579 cases where patients had suffered serious potential side effects from its drugs.

