

स्वास्थ्य और परिवार कल्याण मंत्रालय के राज्य मंत्री (श्री दलित एजिलमलाई): (क) से (ड) इलेक्ट्रोपैथी चिकित्सा पद्धति भारतीय चिकित्सा परिषद अधिनियम, 1956, भारतीय चिकित्सा केन्द्रीय परिषद अधिनियम, 1970 अथवा केन्द्रीय होमियोपैथी परिषद अधिनियम, 1973 के क्षेत्राधिकार में नहीं आती है। इलेक्ट्रोपैथी अधिकारिक तौर पर मान्यता प्राप्त चिकित्सा पद्धति नहीं है, और इसलिए यह 5वीं नई चिकित्सा पद्धति कहलाने के योग्य नहीं ठहरती है। सरकार के पास इलेक्ट्रोपैथी चिकित्सा संस्थाओं की अद्यतन और सही सूचना उपलब्ध नहीं है क्योंकि यह पद्धति मान्यता प्राप्त नहीं है।

Proposal received from U.P. Government for establishing/expanding Hospitals

1878. SHRI RAJNATH SINGH 'SURYA':

SHRI RAM NATH KOVIND:  
DR. RANBIR SINGH:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) how many proposals from Uttar Pradesh Government for establishing or expanding hospitals have been received so far or are pending;

(b) details of their status separately and since when these are pending; and

(c) the reasons for not accepting/taking long time in considering these proposals?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) to (c) The following proposals of the Government of Uttar Pradesh for funding as Externally aided projects are pending:—

- (1) 500 bedded Hospital at Bareilly.
- (2) 500 bedded Hospital at Faizabad.
- (3) 300 bedded Hospital at Badaun.

The proposals at (1) & (2) above have been approved technically by D.G.H.S. The Uttar Pradesh Government was requested to intimate, inter-alia that the counter-part funding would be provided in the State Budget. As regards (3) above, after obtaining the technical ap-

proval of Director General of Health Services, the proposal has been forwarded in March, 1998 to the Department of Economic Affairs for posing for funding from OPEC funds.

A project Proposal, received from the Government of Uttar Pradesh under the State Health System Development Project, has been posed to the World Bank for assistance.

इलेक्ट्रोपैथी चिकित्सा पद्धति को मान्यता दिया जाना

1879. श्री नागमणि: क्या स्वास्थ्य और कल्याण मंत्री 18 मार्च, 1997 को राज्य सभा में तारांकित प्रश्न 321 के दिए गए उत्तर को देखेंगे और यह बताने की कृपा करेंगे कि:

(क) क्या इलेक्ट्रोपैथी चिकित्सा पद्धति को मान्यता देने के लिए सरकार को कुछ और दस्तावेजों और पेपरों की आवश्यकता है;

(ख) क्या मंत्रालय ने इस आशय का कोई पत्र इलेक्ट्रोपैथी संस्था को लिखा है; और

(ग) यदि नहीं, तो मंत्रालय द्वारा इस पद्धति को मान्यता देने के लिए क्या कदम उठाए जाने का विचार है और तत्संबंधी ब्यौर क्या है?

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Increase in cases of oral cancer

1880. SHRI BHAGABAN MAJHI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the cases of oral cancer have been increasing in the country;

(b) if so, the main reasons therefor;

(c) whether Government propose to take any steps for the proper treatment of cancer patients and also for eradicating oral cancer; and

(d) if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) and (b) According to the five urban population based Cancer Registries (Mumbai, Bangalore, Madras, Delhi and Bhopal), functioning under National Cancer Registry Programme of Indian Council of Medical Research for the last one decade, oral cancers have been more or less stable, except for men at Madras where it has shown a slight increase. Tobacco use in the major cause of Oral Cancer in the entire country.

(c) and (d) Yes, Sir. The following steps have been taken by the Government for treatment of cancer patients and eradication of oral cancer:

(i) Radiotherapy Surgery and Chemotherapy are the major modalities for treatment of cancer including Oral Cancers. There are 214 Radiotherapy units in the Country for Treatment of Cancer.

(ii) As per the Cigarettes (Regulation of Production, Supply & Distribution) Act, 1975, it is mandatory to display health warning on all cartoons/packets of Cigarettes.

(iii) Under the Prevention of Food Adulteration Rules, 1955, a warning 'Chewing of Tobacco is injurious to Health' is mandatory on chewing Tobacco Products.

(iv) Direct advertisement relating to Tobacco or Tobacco Products are prohibited on Doordarshan and All India Radio.

(v) The Government has advised the State Governments to discourage the consumption of products containing chewing Tobacco including Gutka. They have also been advised to ensure that Tobacco Products are not sold

around Educational Institutions such as School, Colleges.

(vi) Under the National Cancer Control Programme, emphasis is being given on awareness and early detection Cancer.

#### Disease Surveillance Programme (DSP) in Gujarat

1881. SHRI AHMED PATEL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Disease Surveillance Programme (DSP) has been started in some parts of Gujarat;

(b) if so, the details thereof;

(c) whether DSP is to be extended throughout the State; and

(d) if not, the reason therefor?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) Yes, Sir.

(b) Disease Surveillance Programme had been started in District Mehsana of Gujarat, and has been extended to the Districts of Banaskantha and Surat.

(c) and (d) At present there is no proposal to extend DSP to all the Districts of the State of Gujarat.

#### Pre-Medical Test for admissions in Maharashtra

1882. DR. SHRIKANT RAMCHANDRA JICHKAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that since a Pre-Medical Test has been suddenly declared in Maharashtra for medical admissions, the students who had prepared so hard for the 12th examination are now put to great difficulties;

(b) whether Government are also aware that Government have no expertise in conducting examinations and therefore the PMT is likely to be a great farce; and

(c) what would Central Government do to surmount this problem?