(4) आवश्यकता के स्तर के लिये अधिक उन्नत और व्यवस्थित प्रौद्योगिकियों को लागू करने और आत्मसात (अंगीकार) करने के लिये सर्वहारा वर्ग में कौशल और क्षमता को बढ़ाना।

(ङ) और (च) सामान्य सूचना के लिये अधिकाधिक प्रचार हेतु संस्तुतियां स्वरूप में केवल सुझाव थीं। तथापि, सरकार ग्रामीण क्षेत्र की समस्याओं से परिचित है और ग्रामीण क्षेत्र के लाभ के लिये पहले ही बहुत से उपाय, योजनाएं और मिशन प्रारंभ किये गये हैं। राष्ट्रीय विज्ञान और प्रौद्योगिकी ढांचा पूर्णरूप से इन कार्यक्रमों में संलग्न है।

"ट्रेडिशनल हैल्थ केयर स्टेप्स यूजफुल" शीर्षक के अन्तर्गत प्रकाशित समाचार

2224. **श्री राम जेठमलानी :**
सरदार जगजीत सिंह अरोड़ा :

क्या **स्वास्थ्य और परिवार कल्याण** मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या सरकार का ध्यान 28 फरवरी, 1989 के 'टाइम्स आफ इंडिया' में "ट्रेडिशनल हैल्थ केयर स्टेप्स यूजफुल" शीर्षक के अन्तर्गत प्रकाशित समाचार की ओर दिलाया गया है;

(ख) यदि हां, तो क्या सरकार देश में इस दिशा में कदम उठाने के लिए ईस प्रकार की किसी योजना पर विचार कर रही है; यदि हां, तो उसका ब्योरा क्या है; और

(ग) यदि नहीं, तो उसके क्या कारण हैं ?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (कुमारी सरोज खापर्डे) : (क) जी, हां।

(ख) और (ग) राष्ट्रीय स्वास्थ्य नीति में समग्र स्वास्थ्य प्रदान करने की प्रणाली में भारतीय चिकित्सा पद्धतियों और होम्योपैथी के महत्व पर बल दिया गया है। इसमें आधुनिक चिकित्सा पद्धति के साथ स्वास्थ्य परिचर्या में समन्वित दृष्टिकोण से भारतीय चिकित्सा पद्धति और होम्योपैथी के चिकित्सकों की विशालतम संख्या (लगभग 4 लाख) का पर्याप्त उपयोग करने की आवश्यकता पर जोर दिया गया है।

उपर्युक्त नीति के अनुसरण में राज्य सरकारों के समय समय पर प्राथमिक स्वास्थ्य परिचर्या, परिवार कल्याण और अन्य राष्ट्रीय कार्यक्रमों में भारतीय चिकित्सा पद्धति और होम्योपैथी के चिकित्सकों को पूरी तरह से शामिल करने के लिए कार्यक्रम/स्कीमें चलाने का अनुरोध किया गया है।

2225. [*Transferred to the 18th March*, 1989.]

Controversy on use of anti-RHD Vaccine

2226. SHRIMATI KANAK MUKHERJEE:
SHRI M. A. BABY:

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

(a) whether Government are planning to refer the controversy generated from the use of the anti-RHD vaccine to an expert Committee to know everything about the vaccine and its effect on human bodies; and

(b) if so, whether arguments put forward by the AIIMS, New Delhi and the Maharashtra Food and Drug Administration on the subject would also be subjected to scrutiny?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY

WELFARE (KUMARI SAROJ KHAPARDE): (a) and (b) These issues and the appropriate course for action have been considered at the meeting of experts chaired by Director General of Health Services.

The view points of AIIMS are summarised below:—

(i) ELISA test is highly specific. In a product like anti-D Immunoglobulin where the proteins are present in concentrate amounts, it can sometimes give false results. However, the expensive Western Blot Test is advanced and highly specific. The AIIMS subjected the concerned anti-D Immunoglobulin samples of batch 6/88 of M/s. Bharat Serum Vaccine Pvt. Ltd., to both. ELISA and Western Blot Tests. The results were absolutely and unequivocally positive. This indicated that the vaccine was derived from the blood of donors who were infected with AIDS virus. Recall of the vials of that particular lot of vaccines was therefore advised for further investigations.

(ii) The test called EIA was carried out to ascertain whether the vaccine samples contained AIDS virus. The results was negative. The interpretation of this was that although the original blood used for making the vaccines was AIDS virus infected, probably during the processing and purification process the AIDS virus get destroyed.

(iii) During 1981—85, many blood products including vaccines prepared in USA and Europe, found positive for HIV anti-bodies were administered to many patients. A large number of these were administered to many patients in Europe. A large number of patients were traced and tested. None of them had shown any features of AIDS infection.

(iv) Though the vaccine was derived from the blood of persons infected with AIDS virus there is no cause for panic because this vaccine is not likely to transmit AIDS virus infection. In future steps must be taken to ensure stringent quality control so that only clean blood from healthy persons is used for manufacturing blood products.

The Commissioner of Food and Drugs Administration, Maharashtra has drawn attention to the various technical issues raised by M/s. Bharat Serum and Vaccine Pvt. Ltd. These relate primarily to the suitability or unsuitability of ELISA and Western Blot Test for testing the final blood products for HIV antibodies and the inactivation of AIDS virus, in the process if manufacturing anti-D Immunoglobulin.

The arguments by the All India Institute Medical Sciences, New Delhi and Maharashtra Food & Drug Administration, have to be considered in the light of the following:—

(i) It is understood that the Cohn-Onclay fractionation process for manufacturing anti-D Immunogulobulin inactivities the AIDS virus. However, this process is not followed M/s. Bharat Serum and Vaccine Pvt. Ltd.

(ii) If EIA test for antigen gave a positive result, one can postively conclude that the product has AIDS virus. However the reverse is not true because a very low quantity of the virus in the products as a result of dilution may sometime remain undetected through testing.

(iii) In USA & Europe, testing of blood used for manufacturing of blood products, has been of high order. In case of M/s. Bharat Serum & Vaccine Pvt. Ltd. and some other local manufacturers, attempts were made to locate and tetest the blood donors whose blood was used for manufacturing anti-D Immunoglobulin. The blood of many such donors has been found to be positive for HIV anti-bodies.

Considering the various aspects of the matter the Experts meeting on 6-3-1989 came to the conclusion that, as a matter of abundant caution and considering that each blood was not specifically tested for HIV anti-bodies and many donors are found sero positive now, the products, which have been withheld from distribution should be destroyed.

Contract to U.K. firm for making Howitzer Turrets

2227. SHRI SUKOMAL SEN:

SHRI DIPEN GHOSH:

SHRI SURESH PACHOURI:

Will the Minister of DEFENCE be pleased to state:

(a) whether Government have given contract to U.K. firm for making howitzer turrets which in turn contracting an indigenous firm for the purpose; and

(b) if so, what are the terms and conditions of the contract with the U.K. firm?

THE MINISTER OF STATE IN THE DEPARTMENT OF DEFENCE PRODUCTION AND SUPPLIES IN THE MINISTRY OF DEFENCE (SHRI CHINTAMANI PANIGRAHI): (a) No, Sir.

(b) Does not arise.

Pay scales of assistants

2228. SHRI ANAND PRAKASH GAUTAM:

SHRI DHARAM PAL:

Will the PRIME MINISTER be pleased to state:

(a) what are the names of the recognised Unions|Organisations of the Central Government Employees who have submitted Memoranda|Representation to Government for the revision of Pay Scales of Assistants from 1400-40-1600-50-2300-EB-60-2600 to Rs. 1640-60-2600-EB 75-2900 during the last two years;

(a) what action Government have taken on their demand;

(c) whether this issue has been referred by Government to any other authority/agency;

(d) if so, what ae the details thereof;

(e) whether Government have received any recommendation to this effect from the above mentioned authority|agency; and

(f) if so, what are the details thereof and the action taken thereon ?

THE MINISTER OF STATE IN THE MINISTRY OF PERSONNEL, PUBLIC GRIEVANCES AND PENSIONS AND THE MINISTER OF STATE IN THE MINISTRY OF HOME AFFAIRS (SHRI P. CHIDAMBARAM): (a) Representations were received from the Central Secretariat Service Direct Recruit Assistants' Association, the Federation of Central Secretarial and Allied Offices Employees and the Central Secretariat Stenographers Service Association.

(b) The Government having already accepted the Fourth Pay Commission recommendation of replacement scale of Rs. 1400-2600 for Assistants, did not considered the demand of Association justified.

(c) to (f) The Staff Side have sought to raise the issue before the Anomalies