

V. *Goitre Programme*

For Iodization of edible salt, Iodine in the form of Potassium Iodate is essential.

VI. *E.P.I. Programme*

For EPI Programme DPT, DT, TT, BCG, Polio, Typhoid and Measles vaccines are used.

VII. *National Malaria Eradication Programme*

1. Chloroquin
2. Amodiaquin
3. Quinine Inj.
4. Combination of Pyrimethamine (25mg.) + Sulfametipyrozine (500mg.)
5. Paracetamol.

VIII. *FILARIA*

Diethylcarbamazine.

Drugs under purview of kelkar Committee

4200. SHRI DHARANIDHAR BASU-MATARI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Kelkar Committee is examining the representations and recommendations made to his Ministry on Category-I drugs;

(b) whether his Ministry has also made recommendations and suggestions in respect of Category-II drugs;

(c) what are the recommendations made in respect of each drug and to whom these have been made;

(d) when Category-II drugs fall within the domain of Kelkar Committee and what was the locus standi of your Ministry to make recommendations on Category-II drugs; and

(e) what was the interest of the officers concerned in the matter and whether Government propose to conduct any investigation in the matter and fix responsibility?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) to (c) Kelkar Committee is required to examine such representations as are received and recommended by the Min-

istry of Health and Family Welfare. This Ministry has recommended the exclusion of Diazepam and other tranquillizers from Category II of the Drug Prices Control Order, 1987.

(d) The reasons for making recommendations for categorisation is abundant availability and indigenous manufacture of essential drugs.

(e) No individual interest is involved.

Kelkar Committee's recommendations

4201. SHRI DHARANIDHAR BASU-MATARI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to answer to Unstarred Question 1065 given in the Rajya Sabha on the 3rd August, 1988 and state:

(a) whether it is a fact that Kelkar Committee was set up to identify Category-II drugs and the criteria, if adopted, were relevant for Category-II drugs only;

(b) whether it is a fact that the committee has stated in its reports that its recommendations would not apply to such drugs as are identified in Category-I by the Ministry of Health and Family Welfare;

(c) what is the rationale of Kelkar Committee's recommendations on Sera and Vaccines; and

(d) whether it is a fact that the list of Category-I drugs, recommended by the

Ministry of Health and Family Welfare was not shown to Kelkar Committee and whether for drawing this list, even the two experts in the Kelkar Committee were not kept in the picture?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) Although certain criteria adopted for Category II drugs would apply to various consideration of Kelkar Committee, there are drugs which figure both in category I and category II depending on its end use.

(b) No such specific recommendations have come to notice.

(c) The Ministry of Health and Family Welfare had recommended to the Department of Chemicals and Petrochemicals for inclusion of Sera and Vaccines under Category-I of the Drug Prices Control Order, 1987. The recommendation has been reiterated.

(d) The Ministry of Health and Family Welfare makes price control recommendations to the concerned Department of Chemicals and Petrochemicals. Two experts nominated by Ministry of Health were to participate in the deliberations of the Kelkar Committee and not for making any list.

Preference to hydrocortisone over batamethasone etc.

4202. **SHRI DHARANIDHAR BASUMATARI:** Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to answer to Unstarred Question 1081 given in the Rajya Sabha on the 3rd August, 1988 and state:

(a) whether it is a fact that the eye treatment preparations based on Betamethasone, Dexamethasone, Gentamycin and Framycin, are being prescribed extensively in AIIMS and other Hospitals in Delhi, in preference to preparations based on Tetracycline and Hydrocortisone;

(b) what are the reasons for which Betamethasone and Dexamethasone preparations are not having any added advantage over Hydrocortisone eye preparations and when this conclusion was arrived at;

(c) whether it is a fact that Hydrocortisone, in order to minimise its irritating properties, is being extensively used in combination with Gentamycin Framycetin, Polymixin and Flucinolone and as a single salt its use is restricted; and

(d) what steps have been taken to study the matter de-novo and include all the drugs required for Trachoma Control programme, under this Programme?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) No, Sir, Doctors select the drugs for treatment on the basis of the nature of disease, and its severity and individual suitability to drugs.

(b) Each individual drug has its own advantage in different diseases, their stage and severity. Hydrocortisone represents a commonly used effective steroid.

(c) Use of Hydrocortisone in continuation with other drugs is used as per requirement of the individual patients based on the judgement of doctors. The drugs are commonly available as single salts also.

(d) Commonly used effective drugs have been included for Trachoma control.

Drugs purchased under National Health Programme

4203. **DR. (SHRIMATI) SAROJINI MAHISHOR:** Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what are the names of the drugs which are purchased for the National Health Programme and what was the purchase of each during 1987-88;

(b) what are the reasons for which Iron preparations, Calcium preparations, most of the drugs required for STD programme, Vitamin A etc., were excluded from price control, against the criteria of his Ministry;

(c) what are the reasons for omissions and commissions in the recommendations of his Ministry; and

(d) what are the reasons for which the list of all the drugs required for the Na-