

श्री कल्पनाथ राय : तब आप बताइये कोसी नहर निकालने की योजना है। सहरसा जिला, मधेपुरा जिला, समस्तीपुर, दरभंगा होते हुए आगे पश्चिमी कोसी नहर जाती है। बीच में कमला नहीं है। नहर पूरी नहीं हुई है। पूरी होने की अभी 20 वर्ष तक कोई आशा नहीं है। लेकिन इसी बीच में कमला नदी पर दरभंगा जिले में एक काम्प्लेक्स की कल्पना है कि सायपन बनाकर पश्चिमी कोसी नहर पूरी होगी और तब इलाके में पानी जाएगा। नहर कहाँ है, उसका पता नहीं है। काम्प्लेक्स कहाँ है, उसका भी पता नहीं है लेकिन नहरों की उपशाखाओं की खुदाई शुरू हो गयी है। अगल-बगल के 50 हजार किसान इस चिन्ता में पड़ गये हैं कि अगर बारिश के पहले ये गड्डे खोदे गये तो हमारे लिये तो इससे खेती में कोई लाभ नहीं है। लेकिन हजारों-हजारों लोग इस खुदाई से नुकसान में पहुँच गये हैं। वहाँ विरोध हो रहा है कि जब तक नहर नहीं बनती, काम्प्लेक्स नहीं बनता, सायपन नहीं बनता तब तक इन उप-शाखाओं को खोदने का कोई अर्थ नहीं है। यह अन्धाधुन्ध ऐसी गड़बड़ी चल रही है कि जिसकी कोई योजना नहीं है, कोई कल्पना नहीं है। देश भर उठेगा तो वहाँ से उठेगा? इसकी भी चिन्ता नहीं है। वह तो इस बजट से और संकट में फँसता चला जा रहा है। ऐसे बजट का तो कोई मतलब ही नहीं है। आप पूरे वर्ष में एक बार जितना टैक्स बढ़ाना ही बढ़ाइये, जितना व्यय करना हो व्यय करिये, पूरे वर्ष का एक स्टेटमेंट सामने रखिये, तब तो बजट की मर्यादा होती है। विनियोग का कोई अर्थ है। आज विनियोग पास हो जाता है, बजट पास हो जाता है, एक महीने के बाद एक्जीक्यूटिव आर्डर से आप अचानक पाँच सौ करोड़ रुपये के टैक्स बढ़ा देंगे, फिर उसके बाद डेढ़ सौ करोड़ रुपये के टैक्स बढ़ा देंगे एक्जीक्यूटिव आर्डर से ही जब-जब आपकी तमन्ना जागे आप डेफिसिट फायनैसिंग करते चले जायें, टैक्स बढ़ाते चले जायें तो फिर बजट का अर्थ क्या है? न आप मुद्रास्फीति रोक पायेंगे और न विदेशी कर्ज के बोझ को रोक पायेंगे। आपने 1400 करोड़ रुपये लिये हुये कर्ज का केवल सूद चुकाने के लिये इसी साल के बजट में प्रावधान रखा है। सुब्रह्मण्यम स्वामी जी ने ठीक ही कहा था कि दो हजार ईसवी आते-आते हालत ऐसी

हो जायेगी कि आपका पूरा-का-पूरा बजट कर्ज और उसका सूद चुकाने में जाकर समाप्त हो जाएगा। अगर आज भी आप संभालना चाहते हैं तो जैसा मैंने पहले कहा था, आज विकेंद्रित व्यवस्था कीजिए। हर खेत के ऊपर छोटी छोटी योजनाएँ बनाइये उन पर खर्च कीजिए। थोड़ा थोड़ा खर्च करने के बाद हाथ में काम आ जाए, ऐसा आप कीजिए। केवल योजनाओं का आडंबर और विदेशी कर्ज लेकर आप देश के गले में फाँसी की जंजीर मत लटकाइए जिससे आर्थिक गुलामी का फंदा गले में पड़ गया है। इतना ही कहकर मैं अपनी बात समाप्त करता हूँ।

STATEMENT BY MINISTER

II. Death of Shri K. Vasudeva Panicker, MP

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): Mr. Vice-Chairman, Sir, the House is aware of the sad and untimely death of our colleague Shri K. V. Panicker on 3-5-1988. Shri K. V. Panicker was examined last week at the LNJP Hospital of Delhi Administration. The patient Shri K. V. Panicker was diagnosed as a case of tuberculosis of lymphnode. Dr. R. B. Singh, who is a private practitioner holding the degree of BIMS and also a personal physician of the deceased administered streptomycin injection.

At 10.00 P.M. on 2-5-1988, Shri K. V. Panicker was brought to the Casualty Department of LNJP Hospital by Dr. R. B. Singh. Shri K. V. Panicker was in an unconscious state. On examination, it was found that Shri Panicker had no spontaneous respiration, and peripheral pulses were absent heart sounds were absent and both his pupils were semi-dilated and fixed. He was immediately rushed to resuscitation ward. With provisional diagnosis of cardio-pulmonary arrest, resuscitative measures were carried out by

Dr D. D. Kulpati, Prof. M. Khalilullah and other doctors. Despite all possible efforts including intra-cardiac pacing, the patient could not be revived and was declared dead at 0.40 hours on 3-5-1988.

Police have registered a case —FIR No. 205/88 dated 3-5-1988 under Section 304/A IPC. The Police authorities have arrested Dr. R. B. Singh who administered the medicine on 3rd May, 1988 (AN) and subsequently he was released on bail. According to the Police authorities, the doctor had purchased 10 vials of medicine out of which 5 vials were manufactured by M/s. IDPL and 5 vials manufactured by M/s. Sarabhai Chemicals from Navjeevan Medicos, Hauz Kazi. One empty vial (IDPL manufactured) which was administered and the remaining vials were recovered from the doctor. The Police authorities are investigating the matter further.

THE VICE-CHAIRMAN (SHRI B. SATYANARAYAN REDDY): Now the Members will seek clarifications. Please be brief. Yes, Mr. Gopalsamy.

SHRI RAOOF VALIJULLAH (Gujarat): Is it a statement of the Hon. Minister or the samachar bulletin of All India Radio?

KUMARI SAROJ KHAPARDE: I am concerned only with my Ministry. I am not concerned with All India Radio.

THE VICE-CHAIRMAN (SHRI B. SATYANARAYAN REDDY): Mr. Valiullah, if you want to seek a clarification, send your name.

SHRI V. GOPALSAMY (Tamil Nadu): Mr. Vice-Chairman, Sir, I share the grief and sorrow of the bereaved family and I express my heartfelt condolences to them. Sir, what appeared in the morning newspapers has now appeared on a sheet of paper as a statement given by the Hon. Health Minister. The statement says that the patient Shri K. V. Panicker was diagnosed as a case of tuberculosis of lymph node. Then in that case

I would like to know that if that was the diagnosis, what treatment was suggested in the LNJP Hospital. In the statement it is not mentioned who examined and diagnosed the disease of Mr. Panicker and what prescription and what medical advice was given to him. It has also not been mentioned whether streptomycin or strepto-penicillin was prescribed to Mr. Panicker, because the newspapers have reported that strepto-penicillin was prescribed to him. So, I would like to know whether it is streptomycin or strepto-penicillin. I would also like to know whether the doctors in the LNJP Hospital who examined him, advised him to have a test dose of the injection before having it administered. If there is no follow-up action that means Mr. Panicker went to the LNJP Hospital and then for what reasons he went to the private practitioner, we do not know. These things we would like to know from the Government. These are the facts we are concerned with. But the statement is very blank. No details of all these things are given in the statement. It has been stated that the doctor was arrested and subsequently released on bail. Did the police oppose bail?

Mr. Vice-Chairman, Sir, due to the callousness and negligence on the part of doctors, both private practitioners and those in Government hospitals, thousands and thousands of cases suffer like this every day. Most of these cases do not even draw the attention of the Government or the public. But nowadays it is highly risky to go to a hospital. Syringes and needles without sterilisation are being used in Government hospitals. Therefore, whenever we discuss the functioning of hospitals, specially, the Central Government hospitals in the country, we stress the point that there should be a provision for accountability in the system itself. Because there is no accountability and because of the negligence and callousness or the part of the doctors, such things happen. I hope, the hon. Minister would give the details which I have asked

[Shri V. Gopalsamy]

for. Otherwise, I would say that the Minister should not have come forward with this statement.

श्री सत्य प्रकाश मालवीय (उत्तर प्रदेश) : उपसभाध्यक्ष महोदय, श्री पनिकर इस सदन के नौजवान सदस्य थे और बहुत ही रहस्यमय एवं दुखद परिस्थितियों में उनकी मृत्यु हुयी है। वह न केवल सांसद थे बल्कि सत्ता पार्टी के महासचिव भी थे। जब उनकी मृत्यु इस प्रकार से हो सकती है तो इस देश के जो साधारण नागरिक हैं, जो गरीब आदमी हैं उसकी क्या हालत होती है इसको सोचा नहीं जा सकता। जैसाकि मंत्री महोदयों ने अपने वक्तव्य में बताया कि दो तारीख की रात को स्ट्रेप्टोमाइसीन का इंजेक्शन लगने के बाद 10 बजे के करीब इनको लोकनायक जय प्रकाश अस्पताल में ले जाया गया। वक्तव्य में यह भी बताया गया है कि वह बेहोशी हालत में थे। उसके बाद मंत्री महोदय ने अपने वक्तव्य में कहा :

"On examination, it was found that Shri Panicker had no spontaneous respiration, and peripheral pulses were absent heart sounds were absent and both his pupils were semidilated and fixed."

फिर कहा जाता है 12 बंजर चालीस मिनट पर उनकी मृत्यु हो चुकी थी। मंत्री जी ने वक्तव्य में बताया कि श्री पनिकर की जिस प्रकार से हालत थी वह मृत व्यक्ति के लक्षण थे जीवित व्यक्ति के लक्षण नहीं। इसलिये इस मामले में बहुत ही गहन जांच की जरूरत है। मैं यह जानना चाहता हूँ कि नवजीवन मेडिकोस, हौज काजी जहाँ से दवायें खरीदी गयी थी वहाँ पर जितनी दवायें इस वक्त हैं क्या वह सारा स्टॉक जब्त कर लिया गया अथवा नहीं? यह भी हो सकता है कि ये दवायें ठीक दवायें न रही हों और इसी की वजह से मरीज की मृत्यु हो गयी हो। पहला प्रश्न यह है कि नवजीवन मेडिकोस के स्टॉक को जब्त किया गया या नहीं? दूसरे यह जो डा० आर० बी० सिंह की जमानत हुयी है वह पुलिस ने की या किसी मजिस्ट्रेट के हुक्म से जमानत ली गयी? सारा मामला संदेहास्पद है। मंत्री महोदय

के वक्तव्य में जो जानकारी दी गयी है, जैसा गोपालसामी जी ने कहा, इससे ज्यादा जानकारी आज सुबह के समाचार पत्रों से हम को मिल चुकी थी। इसलिये आपके माध्यम से मैं यह जानना चाहूंगा कि पुलिस तो केवल इस बात की जांच करेगी कि डा० आर० बी० सिंह अपराधी है तो भारतीय संविधान की धारा 304 के अन्तर्गत उन्होंने कोई अपराध किया या नहीं। पुलिस केवल इस बात की जांच करेगी लेकिन श्री पनिकर जिस समय से बीमार पड़े तब से लेकर उनकी मृत्यु तक की जांच तो पुलिस नहीं करेगी। यह पुलिस के अधिकार क्षेत्र में नहीं है। इसलिये मैं आपके माध्यम से यह मांग करना चाहता हूँ मंत्री महोदय घोषणा करें कि यह घटना जिस दुखद परिस्थिति में हुयी है उस को संसद की एक सर्वदलीय समिति जांच करेगी। मंत्री महोदय से मांग करूंगा क्योंकि यह बहुत ही रहस्यमय परिस्थिति में मृत्यु हुयी है इस पर सरकार भी नहीं चाहेगी कि पर्दा डाला जाये। इसलिये मांग करूंगा कि मंत्री महोदय को स्वीकार करना चाहिये इस जांच के लिये और घोषणा करनी चाहिये। यही मैं कहना चाहता हूँ।

SHRI V. NARAYANASAMY (Pondicherry): Mr. Vice-Chairman, Sir, I have gone through the statement made by the hon. Minister. The statement says: 'At 10.00 P.M. on 2-5-1988, Shri K. V. Panicker was brought to the Casualty Department of LNJP Hospital by Dr. R. B. Singh'. I am told, at the time when Mr. Panicker was brought to the hospital, there was no doctor available in the Casualty Department and twenty-five minutes elapsed before medical attention was given to him.

Secondly, Sir, there is some doubt in the minds of hon. Members of this House about this Streptomycin injection. Some doctors say that it will not cause damage, in one in a lakh cases such kind of damage will be there and some doctors say that test dose was required. There are contradictory views given by experts in this area. I would like to know whether test dose should have been given or not; whether the BIMS-degree is a recognised degree given by the Medical

Council; whether the doctors holding such degrees are authorised to give injection to the patients.

Finally, the hon. Minister said that the police are investigating the matter. Sir, it is a very serious matter in which a regular inquiry should have been ordered. Let the police investigate the matter in their own way, but regular inquiry should have been ordered for the purpose of finding out the truth.

श्री राम चन्द्र विकल (उत्तर प्रदेश) :

उपसभाध्यक्ष महोदय, श्री वासुदेव पणिकर की मौत एक बहुत ही दुखद घटना है। इसको अकाल मृत्यु भी कहते हैं। मंत्री महोदय ने जो वक्तव्य दिया है उसमें बताया गया है कि डा० आर० बी० सिंह की देखरेख में उनका इलाज चल रहा था। समाचार पत्रों में बताया गया है कि एक इंजेक्शन लगाने के बाद उनकी मृत्यु हो गयी। जब उनको अस्पताल में पहुँचाया गया तो जैसे ही डाक्टरों ने उनकी परीक्षा की तो उनको मृत घोषित कर दिया। सांस और नाड़ी सब कुछ उस वक्त तक बंद हो चुका था। सवाल यह उठता है कि डा० आर० बी० सिंह अगर प्रेक्टिस करते हैं तो कहां करते हैं? जो इंजेक्शन उनको लगाया गया, क्या उसका पहले टेस्ट कर लिया गया था या नहीं?

यह एक सामान्य बात है कि अगर कोई इंजेक्शन लगाया जाता है तो उसका पहले परीक्षण किया जाता है। जिस कम्पनी से वह दवा ली गई थी उस कम्पनी का नाम भी दिया गया है। दवा गलत थी या इंजेक्शन गलत था इसकी जांच तो आप कर रहे हैं। जैसा मालवीय जी ने कहा कि आर० बी० सिंह को जमानत पर छोड़ दिया गया है, यह गलत बात है। इस सम्बन्ध में मैं एक बात कहना चाहता हूँ कि पुलिस की जांच तो चल रही है, उससे सारी स्थिति सामने आयेगी, लेकिन मैं यह कहना चाहता हूँ कि इस सम्बन्ध में दोनों सदनों की एक संयुक्त समिति बनाई जाय और वह समिति सारी जांच करे और उस समिति को जांच करने के सब अधिकार प्राप्त हो। वह संयुक्त समिति उन के फैमिली मੈम्बरों से भी

जानकारी ले। उस समिति की रिपोर्ट जल्दी से जल्दी सदन के सामने प्रस्तुत की जाय। इन शब्दों के साथ मैं मांग करता हूँ कि यह बड़ी दुखद घटना है, हम उनके फैमिली मੈम्बरों के साथ अपनी समवेदना प्रकट करते हैं। वे हमारी कांग्रेस के जनरल सेक्रेटरी थे और बहुत शरीफ़ आदमी थे। एक साधारण घर में पैदा हो कर ऊपर उठे थे। यह हम सब के लिए और देश के लिये बहुत दुखद घटना है। इसलिए मैं कहना चाहूँगा कि इसके लिये एक संयुक्त संसदीय समिति बनाई जाय और उसको अपनी जांच रिपोर्ट जल्दी से जल्दी देने का अधिकार मिले।

श्री वीरेंद्र वर्मा (उत्तर प्रदेश) : माननीय उपसभाध्यक्ष महोदय, श्री के० बी० पाणिकर इस माननीय सदन के एक प्रतिष्ठित उदीयमान और युवा नेता थे। सभी को उनकी अकाल मृत्यु पर दुःख है। मैं माननीय स्वास्थ्य मंत्री जी से आपके माध्यम से कुछ प्रश्न करना चाहूँगा। पहले मैं यह जानना चाहता हूँ कि उनको इंजेक्शन कितने बजे लगा? यह बतलाया गया है कि उनकी मृत्यु 12.40 पर हुयी और उनको होस्पिटल में 10 बजे ले जाया गया। मैं यह जानना चाहता हूँ कि कितने बजे उनको इंजेक्शन लगाया गया जिससे यह बात साबित हो कि कहीं उनको विलम्ब से तो अस्पताल में नहीं ले जाया गया? उनको विलम्ब से वहां ले जाया गया अगर जल्दी ले जाया जाता तो शायद उनकी प्राणों की रक्षा हो पाती।

दूसरा बताया गया है कि फैमिली डाक्टर था। होगा जरूर। लेकिन वह बी० आई० एम० एस० डाक्टर था। तो क्या स्ट्रेप्टोपैनिसिलीन का इंजेक्शन लगाने के लिये वह क्वालिफाइड था? इसकी इजाजत क्या बी० आई० एम० एस० डाक्टर को है? बी० आई० एम० एस० की ट्रेनिंग के पश्चात् जिस प्रकार डाक्टर इंजेक्शन लगाते हैं तो क्या इसके लिये वह डाक्टर क्वालिफाइड था? बी० आई० एम० एस० आयुर्वेदिक डाक्टर होता है।... (व्यवधान) मैं स्ट्रेप्टोपैनिसिलीन की बात कह रहा हूँ, कम्पाउन्डर लगाते हैं मैं कहां ना कह रहा हूँ।

[श्री बीरेन्द्र वर्मा]

तीसरी बात यह है कि क्या श्री पनिकर को इससे पूर्व भी स्ट्रेप्टोपेनिसिलीन का इंजेक्शन लगा था और चौथा जब यह इंजेक्शन लगाने से पूर्व ट्रायल कर दिया गया था ? मुझे मान्यवर, अपने जिले की जानकारी है...

श्री सत्य प्रकाश मालवीय : एलर्जिक तो नहीं है क्या ऐसा टेस्ट किया गया था ?

श्री बीरेन्द्र वर्मा : क्या यह टेस्ट कर लिया गया था कि वे एलर्जिक नहीं हैं । महोदय, हमारे जिले में एक युवक को इंजेक्शन लगा और इंजेक्शन बाहर नहीं निकला कि उसकी डेथ हो गई । स्ट्रेप्टोपेनिसिलीन का इंजेक्शन था । इसका जितना शीघ्र असर स्वास्थ्य की रक्षा करने पर होता है उतना ही प्राण लेने में होता है । इसलिये मैं यह जानना चाहता हूँ कि क्या यह इंजेक्शन उन्हें पहले भी लगा था और क्या इंजेक्शन लगाने के पूर्व उसका ट्रायल उसको टेस्ट कर लिया गया था कि वे एलर्जिक तो नहीं हैं इस दवा के ? और मेम्बर ने भी कहा कि जिस प्रकार की क्वालिटी इंजेक्शन की थी क्या वह खराब तो नहीं थी ? यह भी जानना आवश्यक है और यह भी उतना ही आवश्यक है जितना यह जानना कि वे एलर्जिक तो नहीं थे । मान्यवर मैं चाहूंगा कि एक उच्च स्तरीय, कुछ माननीय सदस्य चाहते हैं कि दोनों हाउसों की कमेटी बने लेकिन मैं चाहता हूँ कि एक उच्च स्तरीय एक्सपर्ट कमेटी इसकी जांच करे जिससे तथ्यों की सही जानकारी प्राप्त कर भविष्य के लिये उचित कार्यवाही की जा सके । मान्यवर, यह बात जरूर दिमाग में रखनी चाहिये हेल्थ मिनिस्टर महोदय और महोदय को कि अगर इतने जिम्मेदारी आदमी की इस तरह की लापरवाही से प्राण लिये जा सकते हैं तो अस्पतालों में इस तरह के इंजेक्शन लगाकर कितने लोगों की हत्याएं होती होंगी इसलिये इसको रोकने की चेष्टा उन्हें करनी चाहिये और जो क्वालिफाइड

आदमी हैं वही उनका प्रयोग करें और अन-क्वालिफाइड उनका प्रयोग न करें, क्या इसकी व्यवस्था, मैं मंत्री महोदय से पूछना चाहता हूँ कि आप करेंगे ?

DR. G. VIJAYA MOHAN REDDY (Andhra Pradesh): Mr. Vice-Chairman Sir, at the outset, I would like to say that a very tragic incident has taken place. Medical science has advanced so much and yet in the heart of the city itself, we meet a case where after injection a patient died. There are certain things which have to be gone into very thoroughly because it was a case of tubercular lesion. If it was a very old lesion, most probably it may not require any treatment at all. Unless there is an active lesion in the chest, you do not pronounce such a treatment. We do not know what the doctor had diagnosed. If it was a very old lesion, what was the line of treatment, whether he had prescribed the injection at all? That has to be thoroughly examined.

Also in this paper, it is stated that the personal physician of the deceased administered the streptomycin injection. There is no time mentioned in this statement. It should not have happened. Because all the press in the country has spoken out that it is an after-injection allergy, the time of the injection is very necessary and, if it is not noted in the official paper that is presented, I think it is a big lapse. The time when the injection, has been given is important because, after the injection in minutes there will be a change, a shock with severity. And how was the injection given? Was it intramuscular or intravenous? That also has not been mentioned. The patient was brought to the hospital and was in the hospital between 10 p.m. and 0.40 hours, which means 2 hours 40 minutes before the doctors declared dead. We cannot say whether he was brought alive or not and that also has not been mentioned. This is also a point which has to be gone through very thorough-

ly, because a person aged 45 years has some resistance and if there was some kind of treatment he could have rallied. We have seen several cases happening and if the emergency kit is there in a position to give some emergency drug, there is no chance of life going out from the individual. This has to be thoroughly gone into and this is also very indefinite because "The Police authorities have arrested Dr. R. B. Singh who administered the medicine on 3rd May. According to the Police authorities, the doctor purchased 10 vials of medicine out of which 5 vials were manufactured by M/s. IDPL and 5 vials manufactured by M/s. Sarabhai Chemicals..." What was the necessity for the doctor to purchase the medicine from two different companies? Was it in his house or were these medicines kept in the house of the patient? Which is the vial that has to be examined? All these are very important to know the cause of the death, to know which particular injection caused the reaction. This is also very important.

Another particular thing which I want to mention is, why such incidents have occurred in several hospitals of Delhi? Recently, last month itself, there were reports in the press that a patient died in a big hospital after an injection. Why strict measures have not been taken by all the institutions as also all the practising doctors, that they must follow a certain procedure and whenever they give an injection a test dose has to be given? For all injections a test dose has to be given, because in some cases impurity can cause this kind of a shock and may cause death.

There must be a kit of emergency drugs with some ampoules of Adrenalin, Decadrom etc. If all these drugs are there and immediately if they are administered, say, within five minutes, the patient will revive. Why do not these instructions percolate to all the persons? When VVIPs are being treated

by the doctors, why was this particular procedure not there? This also has to be gone into.

I had also put a question in Parliament about the hospitals attached to the Parliament House Annexe and which are treating MPs. There, about the laboratory equipment, instruments and so many other things the doctors are complaining that they are not having stocks and that nobody is giving the stock. All this is necessary for the treatment of MPs. When I discussed with the doctors, they said they do not have any replenishment of stocks. All these have to be taken care of with regard to maintaining the health of Members of Parliament as well as the community at large.

SHRI GURUDAS DAS GUPTA (West Bengal): Sir, we should not have lost our colleague in the way we have done. It is tragic, it is unfortunate and it is really so because in the 20th century in the city of Delhi a Member of Parliament, a General Secretary of the ruling party dies as a result of an injection, and that could not be prevented. Therefore, it only indicates the standard, the level of the general health arrangement available in our country. When this is the arrangement even for the persons whom you describe as VIPs it is very well imaginable what standard of treatment is available for the common people.

Therefore, Sir, his death should cause more anger than anguish. It is a case of anger because human failure is responsible for the death. I do not know whether the allergy test was performed. I do not know whether the drug was substandard or spurious. I do not know if the doctor who administered the injection, was properly qualified. But what I know is this that it is shameful for a country that such a person should die in a condition like this, not in a remote village, but in the capital of the country. It is only a thoroughly lamentable commentary on the standard of performance of health in general.

[Shri Gurudas Das Gupta]

I do not blame only the Government arrangement. I blame the casual way in which even the private doctors treat common patients. Therefore, it is callousness and casualness and irresponsibility associated with the total system of health Government and non-government. Therefore, there must be a voice of protest to bring out a realisation in the mind of the common medical practitioner, whether he is attached with a Government hospital or he is a practising doctor, that this is not the way in which they should treat common patients in our country.

Therefore, Sir, I am not satisfied with the statement because it is just again I should use the words—a casual statement. His death reminds us of the need for urgent steps to revitalise the health systems of our country. If his death has been of any lesson for the people who are sitting in the House, it is that no more such incidents should take place. Not only should it not have happened in the case of Mr. Panicker but also in the case of X, Y, Z; a street pedlar; it should not happen. To ensure that it does not happen, what is the Government thinking about what is the Government going to do about it and will the Government take this death as a lesson for taking urgent steps to bring about improvement? That is my fundamental question.

The second question is this. There should be a thorough probe. No, not only by the police. We know what the police is. The police has seized the injection vials, and the Minister is satisfied. The police has arrested the doctor, and the Minister is satisfied. There should be a thorough probe by an agency in whom we have confidence. It means, expertise should be associated with the agency, not just a police man, not just a police officer, not just a person in whom the Minister may be having faith. We should have the thing investigated

by an agency in which we have some confidence because if a thorough investigation is done; then, such a death can be prevented and the standard of treatment can be improved, and the casualness on the part of medical practitioners can be prevented. In that case only. I believe, the sacrifice made by Mr. Panicker will be of value to the country.

SHRI P. N. SUKUL (Uttar Pradesh): Mr. Vice-Chairman, Sir, from the statement it is almost obvious, as per the condition described of Mr. Panicker when he was brought to the hospital, that he was dead when he was brought to the hospital. Although it is written that he was in an unconscious state, it is contradictory somewhat. On the one hand he was in an unconscious state, and on the other hand it is written that there was no respiration, no pulse, no heart sound and pupils were semi-dilated and fixed. All these go to show that he was dead. Now, the question is whether he was dead when he was brought to hospital or he died at 0.40 hours. No exact time has been given in the statement. As my friends have said it is also not known whether the injection of streptomycin was tested on him or not earlier. If it had been tested, it would not have been administered. It means it was not tested.

5.00 P.M.

Thirdly, why was he not taken to Ram Manohar Lohia hospital where the arrangement for the treatment of VIPs exists and which is not farther from the other hospital where he was taken? Why was he taken to Lok Nayak Jayaprakash Hospital and not to the Lohia hospital? Who took him to that hospital and why? Who is responsible for this thing.

Lastly, what was the actual cause of death? This statement does not convey anything on this point as to what was the exact cause of the death. So far as I understand a post-mortem was carried out. What was the report of the post-mortem? What does it say in regard to the actual

cause of his death? So, I would like the Government to give to the House information on these points.

PROF. C. LAKSHMANNA (Andhra Pradesh): I have to seek only two clarifications. The statement says that the patient was diagnosed as a case of tuberculosis of lymphnode. If that is the case what is this linkage for the particular drug to be administered to late Mr. Panicker in the night? Was it part of the treatment as prescribed by the doctor who had examined him earlier and stated this? If that is the case, was there to be a drug administered to him every night? Or was there a drug needed for a special purpose? This question would not have arisen, but for the fact that the Minister herself has brought this. Therefore, I would like to know why was a drug administered in the night? Was it part of the general treatment prescribed by the doctor who had examined him and who had declared a case of tuberculosis of lymphnode in the beginning?

Secondly, was it part of a package of medicines which was prescribed and was it exactly streptomycin or other medicine which has been pointed out by the Minister? If it had been other than the one prescribed by the doctor concerned, why did this particular doctor, his personal physician; change it to the medicine that has been supposed to be administered? Is it part of the investigation? This is what I wanted to know.

Thirdly, this private physician has administered from among the tenials of the medicine which was purchased by him. The point is Mr. Panicker is a Member of Parliament. As a Member of Parliament, he is entitled to the medicine as supplied by the CGHS or some such agency. Since this was a line of medicine which was prescribed, as stated by the Minister, by implication this must have been the medicine which have been

procured by Mr. Panicker from the CGHS. What was the cause for the private doctor to purchase privately and administer this, especially when the medicine is supposed to be administered in the house of Mr. Panicker? Did Mr. Panicker take from the CGHS the medicine that was prescribed in the morning? It has also to be found out from the private doctor whether he, as a private physician of late Mr. Panicker, knew what was the time lag and if the medicines were taken from the CGHS, why they were not taken?

The whole thing is being investigated by police authorities. I think after a lapse of 36 hours, if the Government did not think it fit to think in terms of a proper inquiry, I would like to know from the Minister, when will they think of it especially in the case of a very important person like Mr. Panicker, who is a declared VVIP? So, is the Government satisfied with the type of investigation which is being done by the police? Or if the Government is not satisfied, the Minister should have come forward with the statement as to what will be the nature of inquiry that will be conducted. There is no indication of it. Even if it were an indication on the part of the Minister that there will be a further inquiry by an appropriate expert team, I think it should have been all right. Therefore, I do not want to say that there is a certain amount of casualness on the part of the Government because that will be an accusation which they would not like to get. But non-the-less the facts do say that there is a casual approach for a very important problem. If this casualness is in the case of a very important person like Mr. Panicker, what will be the nature of attention that will be paid by the Government and the medical authorities towards the problems which are being faced by the common man? Therefore, I would like to know and I would like to seek an assurance from the Minister that there shall be a proper enquiry, a proper enquiry which is good for a case of this nature. Thank you.

SHRI BHUVNESH CHATURVEDI (Rajasthan): Mr. Vice-Chairman, Sir, I would like to be enlightened on three points. The hon. Minister has stated in the morning that an enquiry is being conducted; the results of the enquiry will be reported to the House. May I know whether this enquiry is different from the police investigation or a departmental enquiry or by somebody else?.. (Interruptions)....

KUMARI SAROJ KHAPARDE: I did not say that.

SHRI BHUVNESH CHATURVEDI You can tell me when I complete my speech. The second point is as reported in the morning's newspapers a post mortem was conducted on the body. If it is so, we are interested to know the results of the same.

The third point is, we would also like to know what was the exact time when he was admitted in the ward? In the statement it has been said that at 10.00 P.M. he was brought to the hospital. May I know what was the exact time when he was admitted in the ward? May I also know when resuscitative measures were carried out? Was it before 12.30? We would like to be enlightened on these points. Thank you.

SHRI VITHALRAO MADHAVRAO JADHAV (Maharashtra): Mr. Vice-Chairman, Sir, I am really shocked to know the tragic death of my friend, Mr. K.V. Panicker. I would like to join to elaborate the point which has been raised by my hon. colleague, Mr. P.N. Sukul as to why he was taken to LNJP Hospital? I understand that his family members were insisting that he should be taken to RML Hospital. But in spite of that he was taken to LNJP Hospital.

The other thing is that I never heard anywhere about BIMS medical degree. I do not know what type of degree is this. I do not know what type of doctors are those who have acquired BIMS degree to treat the patients. In this statement itself, it is stated "On examination, it was found that Shri Panicker had no

spontaneous respiration and peripheral pulses were absent, heart sounds were absent and both his pupils were semi-dilated and fixed. He was immediately rushed to resuscitation ward." That mean when the injection was given he was dead. It clearly indicates this. It was either injection of streptomycin or some poisonous injection which has to be verified.

The other important thing is that there are some malpractices and adulteration of drugs. There are so many adulterated drugs in the market. I will give you an example. A material which is produced in Ulhasnagar near Bombay is written on the label as "made in U.S.A.". So people think that it is made in U.S.A. and it is an original material. That means Ulhasnagar Sindhi Association. I do not know like this how many drugs are being manufactured under artificial stamp. This is a very important point to be taken note of by the Minister.

Another important thing is that my friend was given streptomycin injection. After giving that his pulse immediately stopped, respiratory system stopped, everything of the body stopped and the man was finally dead. After taking him to that hospital at 10.00 P.M., he was declared dead after 2 hours and 40 minutes. I don't understand this thing. I am also shocked to read the statement because there was no mention of a particular probe by expert people in this case. I really join my friends who have expressed to have a particular probe by expert people. In the death of Mr. Panicker we have lost a great patriot of this country. We have lost a great leader not only of our party but of the parliamentary system itself. He was a good speaker of this House. Sir, I request the hon. Minister, through you, to have a particular probe in this matter and also make the clarifications which I have asked for.

SHRI GHULAM RASOOL MATTO (Jammu and Kashmir): Mr. Vice-Chairman, Sir, I have only some small questions to ask. In the course of the statement of the Minister it has

been stated that Shri K. V. Panicker was examined in the Lok Nayak Jaya Prakash Hospital of Delhi Administration. Perhaps that is one of the reasons why he was taken to the LNJP Hospital again and not to the Ram Manohar Lohia Hospital. Mr. Sitaram Kesri who is a Member of this House had asked Mr. Panicker about his health. Mr. Panicker had told him that he was having bleeding about 2 O'clock. It might be due to sinus trouble. Mr. Sitaram Kesri says that Mr. Panicker was having blood pressure. So he told Mr. Panicker that the bleeding from the nose might be due to the high blood pressure and it was good. But he also told him that he must consult an ENT specialist because some infection might be there, and administration of drug might be necessary. So far as I understand, streptomycin is administered primarily for tuberculosis. In some papers it is given as streptopenicillin. I would like the hon. Minister to advise us as to whether it was streptomycin or streptopenicillin. There is another story also in the newspapers that the original doctor had actually prescribed some other thing, streptopyritin. But actually streptopenicillin was administered. This is another aspect on which I seek clarification.

There is another point. In the statement it is stated that according to the police authorities the doctors had purchased 10 vials of medicine. The doctor...

SHRI SATYA PRAKASH MALA-VIYA: It has been corrected.

SHRI GHULAM RASOOL MATTO: Then, lastly I make this point. I went twice to the residence of Mr. Panicker as he was living in my neighbourhood. There was definite information given to us, as Mr. P. N. Sukul has stated, that the post mortem was being conducted. That was why his body was brought about 12.30. I would like the hon. Minister to tell us what the result of the post mortem was.

SHRI KAPIL VERMA (Uttar Pradesh): I would be very brief. It appears from newspaper reports as well as from this statement that probably there was reaction from injection. I will not repeat what has been asked by other friends here. But I would like to know from the Minister whether there is any suspicion that the labels of injection vials were spurious because all kinds of duplicate things are being sold. There are good companies like IDPL and Sarabhai Chemicals. If it is adulterated, then it is clear danger to the city of Delhi. What will happen to the people? So, the Government must look into it immediately and the date of expiry and other things should be found out. The aspect whether the labels were spurious should be found out first. It might be spurious. Apart from the other things, the doctor should, before giving the injection, have tested it for reaction. It is always done and even a child knows that it is done. And everybody is afraid of penicillin. Some people do not take it at all. So, apart from the fact that the person was consulted or not; why these two kinds of injections, one from Sarabhai Chemicals and another from IDPL? Then I would like to join in the demand that an inquiry committee of experts should be deputed for the purpose. There should be high level experts. Police cannot deliver the goods. Police does not know what is what. It is stated that the police had taken away two vials. The Minister should tell us what the conclusion of the post-mortem report was. What exactly was found in the vials? The inquiry should be by high level experts; otherwise, we get the impression that there seems to be some kind of inquiry. And a police inquiry will not satisfy the House. Only some well-known experts should be deputed, experts well-known in the field. Human life is very precious and there is danger to the city of Delhi and other places. I hope the Minister will make some announcement in this regard.

THE VICE-CHAIRMAN (SHRI B. SATYANARAYAN REDDY): Mr. Panicker being our colleague in this House, naturally every honourable Member is keen to know the real cause of his death. The list of speakers is long but I do not want to prevent anyone from seeking clarifications. But at the same time I would request them to be very brief.

SHRIMATI BIJOYA CHAKRAVARTY (Assam): Sir, it is very unfortunate and shocking that one of our colleagues had to die an unnatural death because of the negligence and casual manner of treatment by the medical practitioners. So far as the report submitted by the Minister is concerned, it is not a complete one. It is silent on certain basic points. What type of inquiry does the Government want to institute? There is no mention of it in this report. Moreover, a sense of helplessness has gripped all of us. If death could occur of a person of Mr. Panicker's standing, if a person of Mr. Panicker's standing had to face such type of death, what will be the fate of the common people? It seems all is not well with our medical department. And that is why I want to assert here that the whole incident must be gone into thoroughly, a thorough high-level inquiry must be instituted so that we could get a precise finding on the cause of the death.

SHRI A. G. KULKARNI: (Maharashtra): Sir, I join my colleagues in expressing my grief over the sudden passing away of Mr. Panicker the young politician. I do not want to take more time by repeating things which have already been said. Many things have been suggested to the Minister and I hope due care will be taken of those things. I am raising two basic points in this connection. One is of late such incidents are on the increase. We have seen very recently in Bombay also in the Tata Cancer Research Institute three young kids were administered some injections and they died. We have known from the Lentin Commission Report

that 14 deaths took place at another place. It seems, therefore, that the administration concerned with prevention of food and drug adulteration both at the Centre and in the States has to be reviewed now. You should see whether any major improvements need to be made because in this country it is mostly the uneducated people who are administered drugs by the so-called doctors such as bare-footed doctors and others. I would request our friends Mr. Narasimha Rao, to think over this problem seriously. We have known of such deaths which are reported. But there may be many more such deaths which are not reported either because the poor people have no reporting value, or they have no means to get to a newspaper. How many poor people must be dying in this way can only be understood. Therefore, what I want to emphasise, Mr. Narasimha Rao, is this commercialisation of medical education...

AN HON. MEMBER: Mr. Narasimha Rao is not the Health Minister.

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT (SHRI P. V. NARASIMHA RAO): But I will convey it to the Minister concerned.

SHRI A. G. KULKARNI: Oh! I am sorry, you are not the Health Minister! Yes, then I address my young friend, Saroj Khaparde. I want to draw the attention of the Minister of State to the degree problem, the problem of commercialisation of medical education. There is commercialisation everywhere, whether it is engineering or whether it is medical education or something else. Huge amounts are accepted as 'speed money' or as deposits and so on and admissions are given. Because of this, the doctors who are produced in these institutions are below standard. The Indian Medical Council has complained about this time and again. But we in the States, we politicians, play a dirty role and allow these medical colleges or engineering colleges to flourish and now it has become a profession for certain people to start

such institutions and the result is what we see. Now there is this degree, BIMS, according to this statement. I do not know what that degree is. I have never heard of it. It may be a medical degree. But whether it is recognised or not, I do not know. In the context of the present case, I would like to draw the attention of the Minister to two things. One is review of the drug administration and the other is review of the policy of granting licences or giving permission on populist basis to start medical or engineering colleges, and in the present context, medical colleges. A review has to be made in respect of both these things.

Then, Sir, I was not present when my friend, Shri Sukul, spoke. It has been said that one doctor, Dr. Kulpati or somebody recommended streptomycin, but he was given streptomycin or something like that. I say this because this is what I read in the newspapers. Now, the police inquiry would be finding out what you call who is responsible and what wrong has been done. But a medical expert should be involved in this. Otherwise truth will not come out. I am saying this because the same thing happened in many cases. Even when our late friend, Shri Y. B. Chavan, died in the AIIMS, the same thing happened. So, what I would like to say is that the Delhi hospitals should not become death traps and they should be functioning as healthy organizations for the improvement of the health of the people. Thank you, Sir.

THE VICE-CHAIRMAN (Shri B. SATYANARAYAN REDDY): Now, Shri Sivaji Yelamanchili.

DR. YELAMANCHILI SIVAJI (Andhra Pradesh): Sir, while condoling the sudden demise of our friend, Shri Vasudeva Panicker, I share the views expressed by the honourable Members. But what I want to suggest is that this is clearly an iatrogenic disease or death, that is, disease or death caused by a doctor. Secondly I do not know what the BIMS

degree is? But what I want to bring to the notice of this House is that there are seven lakhs of quacks functioning in this country who are administering every kind of medicine in every system, allopathic, homoeopathic, unani, acupuncture and what not? I would like to suggest to the Government to take stern steps and see that this sort of quackery is abolished in this country. Unless there is safety and security for the people living in this country, more so in the villages where medical aid and facilities are lacking, it will be difficult for the people. Thank you, Sir.

THE VICE-CHAIRMAN (SHRI B. SATYANARAYAN REDDY): Prof. Asima Chatterjee.

PROF. (MRS.) ASIMA CHATTERJEE (Nominated): Sir, we are really shocked to hear about the tragic death of our honourable colleague, Shri Vasudeva Panicker. After the administration of streptomycin injection, he collapsed. I would like to know whether the streptomycin samples of the same batch have been analysed and whether it has been found to be really genuine or spurious. This is my first observation.

Secondly, after the doctors' diagnosis of cardio-pulmonary arrest, I would like to know whether attempts were made with the help of a pacemaker to restore the pumping of the heart. These are the two points on which I would like to have the clarifications from the honourable Minister. Thirdly, I would like to know whether all the streptomycin samples of that particular batch have been seized and the names of the companies which produced these have been recorded in order to take proper measures against them, if necessary.

KUMARI SAROJ KHAPARDE: Sir, since the beginning of these observations made by hon. Members, I have been listening to each and every observation made by them very carefully. Most humbly I would like to submit through you, Sir, to the hon.

[Kumari Saroj Khaparde]

Members that Shri K. V. Panicker was diagnosed to be suffering from tuberculosis antinitis. Of course, it is not in my statement. I gathered this information from LNJP Hospital which treated him in the past. On the basis of histological report, on 29th April, 1988, Shri Panickerji was examined by Dr. Kulpati of LNJP Hospital who advised him to take injection called streptomycin—not steptolina or streptopenicillin, but it was streptomycin, one gram per day, and along with that anti-tuberculosis drugs. No. 2 Sir, on 2nd May, 1988, at 9 P.M., Dr. R. B. Singh who is the personal physician of Shri Panickerji and also a private practitioner, administered an injection of streptomycin. Sir, immediately after he administered the injection to the patient, on his request—because he was personal physician of the family—Panickerji was taken to the LNJP Hospital.

Sir, many Members, specially Mr. Gopalsamy, Malaviyaji, Mr. Narayanasamy, Vikalji, Virendra Vermaji, Dr. Vijaya Mohan Reddy, Mr. Das Gupta, Mr. Sukul, Prof. Lakshmananna, Mr. Bhuvnesh Chaturvedi, Mr. Yadav, Shri Kapil Verma, Shrimati Chakravarty and Mrs. Chatterjee, and also very senior Member, Kulkarniji, have made many important observations. I will try my level best to answer them.

Sir, regarding the *post mortem* report, I would like to humbly submit through you to the Members that the result of the *post mortem* has been given to the police authorities. No. 2, Sir, these prescriptions were advised, as I mentioned, to Panickerji by Dr. Kulpati, after considering the report of gland biopsy and after examining Shri Panickerji. Immediately after the injection was administered, he was brought to the LNJP Hospital and he was rushed to the resuscitation ward. Sir, I fully agree with the hon. Members that before administering this injection, the doctor should have tested

it. Before giving this streptomycin injection, it is possible to test its reaction through skin test. One of the hon. Members wanted to know the timing of the injection. This streptomycin injection was given to Mr. Panicker at about 9.00 P.M. on 2nd May by Dr. R. B. Singh. A question was asked by one of the hon. Members. I would like to say that scientifically the patient cannot be declared dead just because of the absence of heart sound and other findings. One of our colleagues wanted to know how this injection was administered. Streptomycin injection was prescribed by Dr. Kulpati to be given through the intra-muscular route. The line of treatment was the anti-tuberculosis drugs which included streptomycin. One vial of injection was given at 9.00 P.M. on 2nd May, as I have mentioned.

Sir, investigation by the Drug Controller, Delhi Administration of the toxicity and sterility of the seized vial of streptomycin is under progress. Results will be available within 14 days. One of the hon. Members asked about the BIMS. I would like to say that BIMS is a degree called Bachelor of Indian Medicine and Surgery.

SHRI A. G. KULKARNI: Which university? Is it Delhi, Panipat or Kurukshetra?

KUMARI SAROJ KHAPARDE: In the country there are so many universities awarding this degree. I have not asked about this particular case.

DR. YELAMANCHILI SIVAJI: A BIMS doctor can only administer the Indian medicines and not allopathic medicines.

KUMARI SAROJ KHAPARDE: Dr. R. B. Singh who administered the injection is not a Government doctor.

SHRI K. MOHANAN (Kerala): He is a private practitioner.

KUMARI SAROJ KHAPARDE: Yes. He was very close to the family and to the deceased. Sir, I would just like

to say a few words that 5 vials of streptomycin manufactured by M/s. IDPL and 5 vials of streptomycin manufactured by M/s. Sarabhai Chemicals were purchased by Dr. R. B. Singh from M/s. Navjeevan Medicos, Fauz Kazi, on 2nd May, 1988. One used vial of streptomycin manufactured by the IDPL and the remaining 4 unused vials have been seized by the Police authorities. The seized samples of streptomycin are being subjected to toxicity and sterility tests by the Drugs Controller, Delhi Administration. The complete results, as I have already mentioned, we will be getting after 14 days. Rest of the things were mentioned by the hon. Members...

SHRI A. G. KULKARNI: What about the reviews of your organisation?

SHRI V. NARAYANASAMY: What? That is what I am saying. Sir, this is really something very unfortunate. Panickerji was really dear to all of us. My Minister is not here. He has gone to attend some important conference. As soon as he comes back, I will discuss the whole matter with him, and...

SHRI V. NARAYANASAMY: What does the post-mortem report say? (*Interruptions*)

SHRI VISHWA BANDHU GUPTA (Delhi): That is a public document. Would the Minister consider telling us the cause of the death? (*Interruptions*)

KUMARI SAROJ KHAPARDE: The report that I received, I sent to the police authorities. (*Interruptions*)

SHRI V. NARAYANASAMY: It has been received and sent to the police. It is a public document. What does it say? (*Interruptions*)

SHRI SANTOSH KUMAR SAHU (Orissa). Mr. Vice-Chairman, Sir, I would like to seek two clarifications

which are very vital. (*Interruptions*) Sir, we have lost a valuable life from this House. Many of the Members have spoken of the tragic death. I would appeal through you, Sir, to the hon. Minister that let her agree and say, in consultation with the Health Minister, that a Committee of Medical Experts will be constituted to know what is the immediate cause of death. That is one important point. We have lost a very valuable life and we are going to enquire. The second point which is very important is that in our country thousands of people die because of administering of spurious drugs and because of the wrong way of giving these injections. After this enquiry, will the Health Ministry consider on how to regulate this giving of dangerous drugs so that people do not die in this wrong way of administering drugs and we do not create artificial murders by the doctors, by those who are not real medical practitioners. These are the important issues before the House. I would appeal to the hon. Minister to take these points into consideration. Whatever be the police enquiry, we are not concerned with it. That is one aspect which she is telling us. But the important thing is that let the truth be revealed. What is the cause of the death of Mr. Panicker, whether it was the disease which he was suffering from or the injection? How to regulate the administration of spurious drugs, is an important issue. Let them consider these two important points.

KUMARI SAROJ KHAPARDE: Sir, I fully share the sentiments of the House. Regarding the post mortem report, I would like to submit to the House that the post mortem report is not available with me right now.

SOME HON. MEMBERS: Why?

SHRI SATYA PRAKASH MALAVIYA: Sir, I would like to know why the post mortem report is being suppressed. There was no mention about the post mortem report in the statement of the Minister. (*Interruptions*)

KUMARI SAROJ KHAPARDE: Sir, tomorrow I can assure the House when I...*(Interruptions)*

THE VICE-CHAIRMAN (SHRI B. SATYANARAYAN REDDY): Please sit down. Please listen.

KUMARI SAROJ KHAPARDE: Sir, there is no doubt that the post mortem report is a public document. I will get that post mortem report and I will place it before the House tomorrow. Secondly, Sir; whatever has been expressed by the hon. Members in the House, after my Minister comes back from his foreign tour, I can assure the House that whatever measures we should take we will definitely take so that precious lives are not lost in this way. *(Interruptions)*. Let the Minister come back.

SHRI GURUDAS DAS GUPTA: Sir, the reply of the Minister is totally unsatisfactory because she has rejected the demand made by all sections of the House that there should be an inquiry. She does not even assure the House that there is going to be an inquiry with proper experts. It is unfortunate. *(Interruptions)*.

KUMARI SAROJ KHAPARDE: By asking me several questions from all sides of the House at the same time, they are just trying to confuse me but I am not going to be confused on this issue. I am very firm and I am also equally concerned about the death of our dear colleague. Sir, I can assure the House... *(Interruptions)*

THE VICE-CHAIRMAN (SHRI B. SATYANARAYAN REDDY): Please sit down.

KUMARI SAROJ KHAPARDE: I shall not be confused like you because you are politicising the whole issue.

THE VICE-CHAIRMAN (SHRI B. SATYANARAYAN REDDY): Do not be angry.

SHRI V. GOPALSAMY: Mr. Vice-Chairman, Sir, the Minister has just now stated that Mr. Das Gupta is politicising the issue. *(Interruptions)*.

THE VICE-CHAIRMAN (SHRI B. SATYANARAYAN REDDY): The Members are concerned about an hon. Member of this House and they want to know the facts of the case. In no way do they want to harass you. They are only anxious to know about the cause of the death.

SHRI GURUDAS DAS GUPTA: Sir, she must withdraw the word that I am politicising the issue. *(Interruptions)*.

THE VICE-CHAIRMAN (SHRI B. SATYANARAYAN REDDY): Take your seat please.

SHRI GURUDAS DAS GUPTA: Most unfortunate.

KUMARI SAROJ KHAPARDE: Whatever concern the hon. Members have expressed about Panickerji, in that connection I may say that the moment the Minister comes back from tour, I will consult him and he will definitely appoint a committee. *(Interruptions)*.

SHRI P. V. NARASIMHA RAO: Sir, there is really no need for all these exchanges. We are really grief-stricken and in this condition what all we can say on behalf of the Government is that the reasons for the death will be ascertained by competent experts, that assurance we can give on behalf of the Government. Several points have been raised. The statement made by my colleague is in the nature of a first information report to Parliament, within 24 hours or 48 hours, of what has happened. So many points have been raised and all these will have to be answered. The answers will have to be found out in the course of the investigation and I am sure it will be done. The only thing is that the Members wanted to know from an expert level what is the reason of the death. That will be ascertained, there is no doubt about it.

श्री राम चन्द्र विकल : उपसभाध्यक्ष महोदय, एक मिनट, मैं जानना चाहता हूँ, एक शंका पैदा हो गयी है। माननीय राज्य मंत्री जी ने जो कहा है (व्यवधान)

उपसभाध्यक्ष (श्री बी० सत्यनारायण रेड्डी) : विकल जी आप बैठ जाइये। सब सवाल हो गये।

श्री राम चन्द्र विकल : मैं एक सेकेंड में बैठ रहा हूँ। पोस्टमार्टम की रिपोर्ट जो है वह दिल्ली में है वह क्यों नहीं लाई गई। दूसरा यह है कि यह कहती कि सीनियर मिनिस्टर आये तब मैं जवाब दूंगी, यह संतोषजनक नहीं है।

कुमारी सरोज खापर्डे : विकल जी मैंने यह नहीं कहा।

उपसभाध्यक्ष (श्री बी० सत्यनारायण रेड्डी) : विकल जी अब आप बैठ जाइये।

SHRI P. V. NARASIMHA RAO: Sir, the procedure is that the post-mortem report goes to the police. It is only a question of getting it and informing the House. There is no problem about that. Naturally, even if the Minister of State wants to do something, the order would have to be passed by Voraji. He will be coming back in two or three days. Nothing is going to be lost. Nothing is going to be hidden. Nothing is going to be concealed. Everything is under control because all the evidence has already been taken possession of by the police and on the basis of that evidence, whatever has been confiscated etc., investigations will be done at the expert level also. I would like to assure the House, on behalf of the Government, that no stone will be left unturned in this.

THE VICE-CHAIRMAN (SHRI B. SATYANARAYAN REDDY): Now, we resume discussion on the Appropriation Bill (Interruptions).

श्री सत्य प्रकाश मालवीय : उपसभाध्यक्ष जी, मेरा एक सबकमीशन है। आज तब ब्रेक भी नहीं हुआ था और सात

बजे से इंडियन पार्लियामेंटरी ग्रुप की मीटिंग है जिसमें माननीय सदस्यों को जाना है। हम लोगों को भी अपने घर जाना है कपड़े बदलने के लिये इसलिये मेरा निवेदन है कि आप सदन को अब स्थगित कर दें।

उपसभाध्यक्ष (श्री बी० सत्यनारायण रेड्डी) : मुझे मालूम है जो लोग बैठना चाहते हैं वे बैठेंगे, सदन सात बजे तक चलेगा।

THE APPROPRIATION (NO. 2) BILL, 1988—contd.

THE VICE-CHAIRMAN (SHRI B. SATYANARAYAN REDDY): Shri Gopalsamy.

SHRI V. GOPALSAMY: Mr. Vice-Chairman, Sir...

SHRI B. K. GADHVI: You are speaking about me?

SHRI V. GOPALSAMY: Do you want me to speak about you?

SHRI B. K. GADHVI: I wanted to note down your name.

SHRI V. GOPALSAMY: It is a noted name in your camp.

Mr. Vice-Chairman, Sir, when I speak on the Appropriation Bill, I would like to make it very clear that the Government is answerable, it is accountable, for every paise it spends. But we are distressed over the attitude of the Government in not furnishing information in regard to the expenditure under various heads, whenever we seek such information from the Government. For example, on the 28th April, Shri Upendra put a question to the Government on the expenditure as to how much money has been spent, in respect of the IPKF operations in Sri Lanka so far. But the hon. Minister stated that the Government is not in a position to inform Parliament about the actual expenditure. Such is the arrogant attitude, irresponsible attitude, which the Government is persisting in. When you are spending crores of rupees, deploying your armed forces