### Vayudoot service from Panagarh and Asansol

1119. SHRI RAMNARAYAN GO SWAMI; Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether there is any proposal under Government's consideration to operate Vayudoot service from Panagarh and Asansol; and

(fo) if so, when and if not, the reasons therefor?

THE MINISTER OF STATE OF THE MINISTRY OF CIVIL AVIATION (SHRI JAGDISH TYTLER): (a) and (b) Constraints of aircraft capacity and paucity of other resources do not permit of inclusion of these stations in the immediate expansion programme of Vayudoot.

## Construction of Double Rail Line Between Bongaigaon to New Jal. paiguri

1120. SHRI NARAYAN KAR: Will the Minister of RAILWAYS be pleas ed to state:

(a) whether any comprehensive survey made by the Railways regar ding construction of double rail line between Bongaigaon to New Jalpai guri to be extended upto Jalpaiguri own Station;

(b) if so, the details the'reof;

(c) whether it is a fact that after the survey the proposal was dropped; and

(d) if so, what are the reasons therefor?

THE MINISTER OF STATE OF THE MINISTRY OF RAILWAYS (SHRI MADHAVRAO SCINDIA): (a) No survey was done fo'r construction Of double line between Bongaigaon and New Jalpaiguri. Investigations were, however, done for diversion of existing Broad gaug main line through Jalpaiguri Station.

(fo) The diversion involved construction of 9 Kms. of new line costing Rs. 12 crores.

to Questions

(c) Yes Sir.

(d) High cost of the proposal coupled with operational disadvanta ges of traversing longer distance for through traffic and also Jalpaiguri being already served by B. G. branch link.

### Health for All in 3001 A.D.

1121. SHRI SANTOSH BAGRODIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what steps Government have taken to implement the programme "Health for all in 2001 A.D." successfully;

(b) the amount of money that has been allocated for this proposal; and

(c) whether physical education has been made compulsory in Schools and Colleges?

THE MINISTER. OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) The following steps have been initiated to achieve this goal:—

(i) A scheme for providing one Health Guide for an average of IOOO rural population;

(ii) A scheme for providing at least one trained dai in every village;

(iii) A Scheme for providing a subcentre with one male and one female Multipurpose Worker for every 5000 rural population in general and for every 3000 population in tribal and hilly areas;

(iv) A Scheme for upgrading existing rural dispensaries into Primary Health Centres and establishing new Primary Health Centres so as to ultimately have one Primary Health Centre for every 30.000 'rural population in general and for every 20,000 population in tribal and hilly areas;

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(V) treating tacilmes ior treatment in basic Specialities at upgraded Primary Health Centres/Community Health Centres to be esta-blishd in a phased manner for every one lakh rural population, serving as a referral institution for <sup>4</sup> Primary Health Centres;

(vi) Scheme for integrated health services covering among other things, maternal and child health, immunization family welfare services, control of malaria, blindness tuberculosis, leprosy and other communicable diseases, prohylaxis against Vitamin 'A' deficiency and anaemia, health education and patient care.

(b) An amount of Rs. 109635 Iakhs has been provided under the 7th Five year Plan by the Planning Commission for Minimum Needs programme in the Health Sector.

(c) Physical Education and Sports have been a compulsory subject up  $\bullet$ to class X in Schools. The New Policy further emphasises the role of physical education and sports in all round development of the children.

# Price control of the medicines under the National Health Programme

1122. SHRIMATI RATAN KUMARI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Gov. ernment are identifying drugs required for control of diseases under National Health Programme for price control;

(b) if so. name<sub>s</sub> of diseases covered under National Health Program, me;

(c) whether it is a fact that Government have set up a committee of medical experts to identify these drugs;

(d) if so, the names of its mem bers and by when the committee will finalise Uie list; (e) whether it is a fact that Government are not including antibiotics being used for STD diseases, corticosteroids and Vitamin preparations for control of blindness, dehydration salts fo<sub>r</sub> diarrhoel diseases, antidepressant, anti-epileptic and anti-anxiety drugs for National Mental Health Programme; and

(f) if so, the reasons thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) Yes, Sir.

(b) The names oi diseases covered the National Health Program under me are Malaria. Leprosy, TB. Blindness Goitre, Guineaworm, Fila AIDS, ria, STD, Cancer, Diabetes, Mental Health and Communicable diseases.

(c) to (f) Government  $i_n$  consulta tion with respective experts and Programme Officers propose  $t_0$  com pile such a list.

#### Drugs and vaccines permitted by Food and Drugs Administration in Maharashrra

1123. SHRIMATI RATAN KUMARI Will the Minister of HEALTH AND FAMILY WELFARE be pleas-ed to state:

(a) whether it is a fact that num ber of combination of drugs and vaccines have been permitted by Food and Drug Administration Ma| harashtra during the last two years I without examining the rationality;

(b) if so, what are the names of such combinations allowed by FDA, Maharashtra during the last two years, year-wise along with the basis of each;

(c) whether it is a fact that Medical professionals, consumers, voluntary health organisations and press  $ar_e$ criticising about the irrational combination of drugs and vaccines being marketed  $i_n$  the country;