

## RAJYA SABHA

Monday, the 12th March, 1984/  
Phalgun 22, 1905 (Saka)

The House met at eleven of the  
Slock Mr. Chairman in the Chair.

### ORAL ANSWERS TO QUESTIONS

\*201. [The questioner (Shri Hukmdeo Narayan Yadav) was absent. For answer, vide cols. 35-36 *infra*].

\*202. [The questioners (Shri V. Venka and Shri V. Gopalsamy) were absent. For answer, vide Col. 36 *infra*].

MR. CHAIRMAN; Question No. 203. Shri Sukomal Sen. He is not here. Shri Mohanan.

### Drug production target for the Sixth Plan period

\*203. SHRI SUKOMAL SEN:  
SHRI K. MOHANAN:†

Will the Minister of CHEMICALS AND FERTILIZERS be pleased to state the drug production target fixed

for the public sector, private sector, foreign and small scale sector, separately by the end of the Sixth Five Year Plan period?

THE MINISTER OF CHEMICALS AND FERTILIZERS (SHRI VASANT SATHE); A statement is laid on the Table of the House.

### Statement

The Sixth Five Year Plan (1980-85) document estimated the annual requirements of bulk drugs and formulations by 1984-85 at Rs. 815 crores and Rs. 2450 crores respectively. The indigenous production of bulk drugs and formulations by 1984-85 was expected to be Rs. 665 crores and Rs. 2450 crores, respectively. In the Public Sector, the production of bulk drug<sup>3</sup> and formulations by 1984-85 was expected to be Rs. 219 crores and Rs. 330 crores, respectively. The documents did not indicate the likely production in the other sectors.

However, the value of production in different sector by 1984-85 as expected by the Working Group on Drugs and Pharmaceuticals for the VI Plan is as follows: —

Sl. No.	Sector	Value of expected production during 1984-85 (Rs. in crores)	
		Bulk Drugs	Formulations
1.	Public Sector	215	330
2.	Indian Organised Sector	265	910
3.	FERA Companies	135	720
4.	Small Scale Sector	50	490
	TOTAL	665	2450

†The question was actually asked on the floor of the House by Shri K. Mohanan.

The Planning Commission in their mid-term appraisal have revised the overall targets of indigenous production for bulk drugs and formulations for the terminal year of the VIth Five Year Plan to Rs. 500 crores and Rs. 1950 crores respectively. Every effort will be made to reach these targets, which are achievable.

SHRI K. MOHANAN: Sir, from the statement, we find that the projected targets at the end of the Sixth Five-Year Plan were Rs. 815 crores worth of bulk drugs and Rs. 2,450 crores worth of formulations. This means, the targets are not going to be fulfilled. This is very clear. Moreover, the role of the public sector is lagging behind, as far as these projected targets are concerned. If I am correct, the share of the public sector in the production of bulk drugs is only 26.4 per cent and in the case of formulations it is 13.5 per cent only.

• In this connection, I would like to know, what was the installed capacity of the public sector in the drug manufacturing industry and what was the capacity utilisation in the Sixth Five-Year Plan? I would also like to know, what steps are taken by the Government for the full utilisation of the installed capacity in the public sector?

SHRI VASANT SATHE: I had tried to get figures in regard to the installed capacity. But I have given the figures in regard to the utilisation made. As can be seen from the statement, in the case of the public sector, the value of the bulk drugs expected to be produced by 1984-85 was Rs. 215 crores and the value of the formulations was Rs. 330 crores. The details have also been given in regard to the Indian organised sector and so on. The fact is that, even the Planning Commission's projections were made on the basis of the earlier demand. But unfortunately, the demand did not rise according to expectations.

MR. CHAIRMAN: But what is the time-lag?

SHRI VASANT SATHE: Between?

MR. CHAIRMAN: Between the demand and the effectuation. •

SHRI VASANT SATHE: As I said, these projections were made for the Sixth Five-Year Plan. In the Sixth Five-Year Plan, in the first three years, we found that the demand did not increase in the country as a whole for the drugs. Therefore, the Planning Commission itself revised the targets and the targets according to them for five years in the Sixth Five-Year Plan was, as I have said in the statement, in the last paragraph, Rs. 500 crores in the case of bulk drugs and Rs. 1,950 crores in the case of formulations. The targets having been brought down, the share of the public sector also will be lower in the case of formulations as well as in the case of drugs. The targets have not been fulfilled. But we have to take it in totality. The real question is, as I have said before in this House and I must say it today also, when we invested—so far in the Sixth Plan, the investment has been about Rs. 60 crores in the public sector—we invested in relation to those drugs which were anti-biotic and sulpham, wherein, the entire thing was being imported till then by the multi-nationals. No Indian company was coming forward to invest in the bulk drug. The country had to be made self-reliant to produce the bulk drugs from the basic stage itself. That is why, as I call it, this donkey's work was taken up by the Government and we made investments in the area. Heavy investments were made. In fact, the capacity is—I will try to get the figures—twice what we are at present producing both for bulk drugs and formulations, but because of the economical non-viability of production in terms of market etc. the public sector has not been doing well. Unless they were to go in for making popular formulations and compete

with other sector you won't see the results, but that we could not do because we had to make the country—as I said—self-reliant and it paid dividend in the sense that our national sector, both in small scale sector and Indian organised sector, could grow in competition with FERA. We could contain the foreign companies as you have seen from the percentage which I have given of the production. The average capacity utilisation is 50 per cent to 60 per cent. It differs from company to company, but this is the usual answer which I give, I must be frank with you.

MR. CHAIRMAN: You are working at half the speed.

SHRI VASANT SATHE: So, this is the reason, if that can satisfy my friend, why the public sector—I must be very honest—has not been able to keep pace as expected.

SHRI K. MOHANAN: I am not fully satisfied with the answer for my first question. My second supplementary is, whether the Government aware of the fact that the multinationals and national big business houses in this country, even though they have adequate quota and manufacturing ability for the essential drugs, hardly utilise 50 per cent of their production capacity to manufacture essential drugs? The essential drugs are less profit-oriented. So, they divert their production to the manufacture of marginal or useless drugs much in excess of their licensed capacity because they are more profit-oriented. On the one side they are not utilising their licensed capacity for the essential drugs and on the other they are producing useless marginal drugs over and above their licensed capacity. So, I would like to know what steps are being taken... *(Interruptions)*. That is a very specific question. On the one hand they are not utilising even 50 per cent of their licensed capacity for the manufacture of essential

drugs and on the other hand they are utilising over and above their licensed capacity for the marginal and useless medicines.

MR. CHAIRMAN: The idea, Mr. Sathe, is, why don't you get a mean division between the licensed capacities of the two different kinds of drugs so that the capacity may not be diverted to the smaller and easier manufacture of drugs? Some policy should be devised. That is what they are complaining of. Have I got you right that he must see that the different kinds of drugs, cheaper and easily manufactured drugs do not invade the capacity for more essential drugs?

SHRI VASANT SATHE: I have seen the point, Sir. As you probably know, the Hathi Committee had identified 117 drugs as, what are called, essential drugs, and according to our general policy—I do not have the break-up, I will try to see if I can get that done—particularly the multinational companies. The fact remains that because of our policy the multinationals or the erstwhile Fera companies have diluted. From 45 companies now they are only 18 or so, within the last three or four years. And of them, there are some more who are diluting. About eight are about to do that. What you will have on hand is about ten. But as I said, I have no direct method under the Act to withdraw their licence. In reply to another question, I had said that I am using other methods. When they come for regularisation, I say: "Nothing doing. Either dilute or come back to the ratio". Like that we are trying to do it. But still a few companies remain who are—(a) multinationals; (b) are not producing the bulk within the ratio of 1 : 5 which is mandatory for multinationals and, as my friend says, must be producing substantially, what are known as, non-essential drugs and making money on that. So, therefore..

MR. CHAIRMAN: And also competing with the small scale industry.

SHRI VASANT SATHE: Sir, from the figures ----

MR. CHAIRMAN: That was the charge from there.

SHRI VASANT SATHE: Actually that charge—let us not beat the drum too loud. I will tell you why. Because the figures which I have given... (Interruptions). I am a greater champion of small scale than you. I will show you. Can you see, the small scale production has jumped three times during this period from 24 crores to 65 crores? How could this be done? And Fera has remained where it is. So this will show that our policy has encouraged the small scale. And whom have they competed against? The Fera. And who has lost in the process? The public sector. Remember this. Because we have sacrificed to encourage the small sector and the Indian sector. The Indian sector also has grown. So, therefore, Sir, the charge, I am afraid, is not borne out.

**श्री जगदम्बी प्रसाद यादव :** श्रीमान्, माननीय मंत्री जी ने सारी बातें एण्टीवायटिक और सल्फा ड्रग्स के बारे में ही कही हैं। लेकिन बहुत सी ऐसी दवाइयाँ भी हैं जिनका संबंध आयुर्वेद से है, वे भी बाजार में बेची जाती हैं। ये दवाइयाँ भी जीवन रक्षा के काम में आती हैं। इन और आपने जो विचार किया है वह आज के विचार के साथ ही होना चाहिये। मैं माननीय मंत्री जी से यह जानना चाहता हूँ कि क्या यह सही है कि आज अमेरिका और रूस में भारतीय आयुर्वेदिक दवाइयाँ हर्ब्स के आधार पर बनाई जा रही हैं? ये दवाइयाँ कैन्सर और रेटिना के लिये उपयोगी बताई जाती हैं। इस प्रकार की दर्जनों दवाइयों का उपयोग वहाँ पर हो रहा है। लेकिन क्या भारत सरकार ने आयुर्वेदिक आधार पर, हर्ब्स के आधार पर, दवाइयाँ

बनाने के लिये, जिनका कोई साइड इफेक्ट नहीं होता है, विचार किया है और इस संबंध में कोई योजना छोटी पंचवर्षीय योजना में बनाई है? मैं यह भी जानना चाहता हूँ कि क्या सरकार की नीति भारतीय चिकित्सा पद्धति पर आधारित भारतीय दवाइयाँ आयुर्वेदिक पद्धति पर बनाने की छोटी पंचवर्षीय योजना में कोई योजना है या नहीं? क्या आप सातवीं पंचवर्षीय योजना में इस प्रकार की किसी योजना पर विचार कर रहे हैं जिसमें भारतीय चिकित्सा पद्धति के आधार पर हर्ब्स के माध्यम से विशाल पैमाने पर दवाइयाँ बनाई जा सकें? इसके साथ-साथ मैं यह भी जानना चाहता हूँ कि आयुर्वेदिक आधार पर प्राइवेट सेक्टर में जो दवाइयाँ बन रही हैं उनका कोई फार्माकोपिया या फार्माकोपिया नहीं बनाया गया है जिसके कारण उनका स्टैंडर्ड और खुराक निश्चित नहीं हो पाती है, इसलिये क्या आप इस पर ध्यान दे रहे हैं क्योंकि जब तक फार्मूलेशन नहीं होगा, इन दवाइयों का हिन्दुस्तान में या हिन्दुस्तान के बाहर जहाँ पर आयुर्वेद की करोड़ों रुपयों की दवाइयों की मांग है, वहाँ पर इनकी पूर्ति होने में कठिनाई पैदा हो रही है। क्या सरकार इस पर विचार कर रही है? क्या छोटी पंचवर्षीय योजना में या आने वाली किसी अन्य योजना में आप इस संबंध में विचार कर रहे हैं?

**श्री वसंत साठे :** सभापति जी, मैं स्वयं आयुर्वेदिक दवाइयों का समर्थक हूँ मेरी यह मान्यता है कि हमारे देश में ये जो दवाएँ बनती रही, जिनका उपयोग सदियों से चलता रहा जिसको बहुत बार, शिक्षित कहिए या कम शिक्षित लोग परम्परा से चलाते रहे, लेकिन उसका उपयोग दिनचर्या में हमें देखते रहे हैं जैसे तुलसी, सौंठ, लौंग आदि जिसे नानी का बटुआ कहते हैं। वह जो दवाइयाँ हमारी हैं उनका फार्माकोपिया स्टैंडर्ड भले ही हम न जानते हों लेकिन व्यवहार में उसका उपयोग हम देख रहे हैं।

आज हिंदुस्तान में जो हमारी ग्राम आबादी है, वह जिन दवाओं को लेकर जी रही है, वे बहुत अंश में हमारी ट्रेडेशनल दवाइयाँ ही हैं और देहाती, आदिवासी तथा अन्य क्षेत्रों में काम आ रही हैं। लेकिन बहुत बार यह देखा गया कि हमारे देश की बहुत सी दवाइयाँ जिने सर्पगन्धा कहते हैं, अब सरपोंना करके विदेशों में प्रयोग की जा रही है...

**श्री सनापति :** यंग सरपोंना बहुत जल्दी हो गई है ब्लड प्रेशर के लिये।...

**श्री वसन्त साठे :** यह आपने कहा, मैं भी जानता हूँ। एक दूसरी चीज है ईसव-गोल।...

**श्री सनापति :** अब आप डाक्टरी में मत जाइये। यह सब को मालूम है। सबाल यह है कि कोई रिसर्च होकर फार्मोकोपिया बने, इस पर आप रिसर्च करके कुछ इंतजाम कर रहे हैं क्या ?

**श्री वसन्त साठे :** मैं वही बता रहा हूँ कि जब परदेश में यह चीज चल जाती है तो फिर उसको कोमत 15 डॉलर वहाँ हो जाये और फिर वहाँ आ जाये तो चल जाती है। 8 घाने में यहाँ जब चलती थी तो कोई नहीं लेता था। आवश्यकता इस बात की है कि उसको वैज्ञानिक आधार पर माडर्नाइज किया जाये, इसके लिये रिसर्च को हम बढ़ावा दे रहे हैं, लैबोरेट्रीज सेट अप की गई है, हर तरह से इन्कुरेज कर रहे हैं। निजी क्षेत्र में भी हमने उनको इन्वाल्व किया है और जो नेशनल ड्रग बनी उसमें इन लोगों की सपरेट कमेटी बनी है कि वह रिपोर्ट दे कि किस तरह से हमारी आयुर्वेदिक दवाइयों को लोकप्रिय बनाया जाये और स्टैंडर्ड किया जाये।

**श्री जगदम्बी प्रसाद यादव :** सभापति जी, मेरा सवाल इतना ही है कि छठी पंचवर्षीय योजना में भारत सरकार ने भारतीय आयुर्वेदिक और यूनानी आदि जो देसी दवाइयाँ हैं इनकी प्रेपरेशन के लिये क्या प्रबन्ध किया है। आपने ऐंटी बायोटिक और

सल्फा ड्रग्स के लिये हजारों, करोड़ों रुपया लगाया है, इन दवाओं को तैयार करने के लिये क्या किया है या 7वीं पंचवर्षीय योजना में क्या करने जा रहे हैं। यह तो हमारे मंत्री जी ने अपने पर्सनल विचार देकर वास्तविक प्रश्न को अलग कर दिया है। इसलिये मैं आपसे सुरक्षा चाहता हूँ। मंत्री जी बतायें कि आयुर्वेदिक और यूनानी दवाओं को जिनको 70 प्रतिशत जनता प्रयोग करती है, उनको तैयार करने के लिये क्या प्रबन्ध किया है ?

**श्री सभापति :** उसका सीधा तरीका यह है कि वह टेबुल पर रख देंगे कि कितना खर्च होगा, कितनी रिसर्च होगी। इसकी डिटेल्स रख दीजिये आप।

**श्री वसन्त साठे :** आपका आज्ञा गिरो-धाय है। सचमुच में अगर कोई अलग रकम रखी होगी तो मैं सदन के पटल पर रख दूँगा क्योंकि हेल्थ मिनिस्ट्री और मेरी मिनिस्ट्री दोनों मिलकर यह काम करते हैं।

**श्री जगदम्बी प्रसाद यादव :** जब दवाइयाँ बनती हैं तो इसमें नहीं लिखा है कि ये ऐंटीबायोटिक बन रहे हैं, सल्फा ड्रग बन रहे हैं। जो दवाइयाँ भारतवर्ष में प्रचलित हैं उनके लिये क्या काम कर रहे हैं यह बताइये।

**श्री वसन्त साठे :** ये जानना चाहते हैं कि आई० डी० पी० एल० में कुछ दवाइयाँ बना रहे हैं कि नहीं, मैं जानकारी लेकर आप को बता दूँगा।

DR. JOSEPH LEON D'SOUZA; Mr. Chairman, Sir, the pertinent point here is this. I would like to draw the attention of the hon. Minister to a question that I had asked three sessions ago. And you had said that "you would give me a satisfactory reply. Sir, again this point has been brought up, why certain pharmaceutical companies—and some of them are multinationals—have got 15 to 18

licences. They are operating only eight, and out of the eight, they have gone in overproduction of those ones\* that are lucrative. Has the Minister also tried to find out why there is short supply of items like triple antigen for children, anti-rabies and anti-tetanus. The last two diseases, if you are affected and you do not have anti-doses, you are booked. The seriousness of that is not understood by the hon. Minister.

MR. CHAIRMAN: You asked this question three sessions back. You might wait for another three sessions, and they will give you a reply.

DR. JOSEPH LEON D'SOUZA: Sir, I doubt even then it will happen.

MR. CHAIRMAN: I think, Dr. D'Souza, it would be more helpful to you if you would sit with Mr. Sathe and bring to his notice these things. I am quite sure he will then be able to deal with these matters expeditiously. Through the House nothing can be done.

SHRI VASANT SATHE: Sir, I must say one thing. I have always tried to reply to whatever Dr. D'Souza has asked for, to the best of my ability. And I have offered not only to him, but this is an offer through you to every hon. Member that they can always come to me for any information because off-hand it is very difficult. He has asked about anti-tetanus and anti-rabies. I am not ready with that because that is not in the question. Therefore, you are right, Sir, anyone can come. I will get my officers to get the information and supply it to the hon. Members. There is nothing that we want to keep away from the hon. Members.

SHRI A. G. KULKARNI: You advised Dr. D'Souza that nothing would come out of this House. What does it mean. Sir? Is it a reflection on the House or the Government or the Opposition or the Government side?

MR. CHAIRMAN: It is neither a reflection nor any observation.. It is really this, that there are ways of getting the Minister to give the information. Through the House he cannot give you the information.

SHRI A. G. KULKARNI: Why then has the House been created at all or any parliamentary institution been created at all? Sir, your observations are really very bad for us.

MR. CHAIRMAN: There is no mention of anti-tetanus\_\_\_\_\_

SHRI VASANT SATHE: In my opinion, the House has been created to ask honest questions and get honest answers.

SHRI A. G. KULKARNI: Is it a reply, Sir? Honest question? Do you doubt what Dr. D'Souza has asked.

SHRI VASANT SATHE: Don't put words in my mouth. I have never said that.

SHRI A. G. KULKARNI: With due respect to Mr. Sathe, you should not cast aspersions either on Dr. D'Souza or Mr. Kulkarni from the Opposition for heaven's sake.

SHRI VASANT SATHE: Why do you put your ideas into Dr. D'Souza's mouth?

SHRI A. G. KULKARNI: You have to behave as a Minister and not as somebody on the road.

MR. CHAIRMAN: Sit down. I am standing. Nothing to be recorded. Listen to me. If you see the answer, there are 215 bulk drugs and 330 formulations. Similarly, if, for every one of the items, you begin asking about anti-tetanus, anti-rabies, anti-malaria, anti-plague, how is the Minister going to give you the information? It is absurd. You should ask him in his room about any particular drug. I am quite sure, Mr. Sathe will give every information.

SHRI A. G. KULKARNI: You yourself observed that for the last three sessions he has been asking the question, and you have advised him. (Interruptions).

MR. CHAIRMAN: You see, the difference is, I have great respect for Dr. Leon D'Souza; he would rather ask in the House but never ask the Minister in his chamber. (Interruptions).

श्री लाडलो मोहन निगम : सभापति महोदय, आपके चेम्बर में कोई जा सकता है, मंत्री के चेम्बर में नहीं।

श्री शिव चन्द्र झा : यहाँ पर जवाब देना चाहिये, मंत्री किन्तु लिये हैं ?

MR. CHAIRMAN: Please sit down. I think the reaction to what I said shows that the shot has gone home. (Interruptions).

SHRI VASANT SATHE: Yes, yes.

SHRI V. N. TIWARI: Sir, I am asking a general question, not a particular question about any drug. I want to know from the hon. Minister what steps are being taken by the Government to ensure the quality of drugs because the drugs which are coming in the market are rather harmful instead of being helpful to the patients.

SHRI VASANT SATHE: Sir, the quality of drugs is not controlled by my Ministry. Therefore, I shall not be able to answer this question with justice....

MR. CHAIRMAN: If any information is given to you....

SHRI VASANT SATHE: Then I will pass it on to the Health Minister whose Ministry controls quality.

MR. CHAIRMAN: I hope you will recommend their prosecution and very severe punishment.

SHRI VASANT SATHE: Yes, Sir, we will do all that.

श्री रामेश्वर सिंह : सभापति महोदय, आपके द्वारा, मैं मंत्री जी से कुछ सवाल पूछना चाहता हूँ। आप इसमें मेरी मदद करेंगे। मंत्री जी उधर भाग न जायें, आप वैध बनने की कोशिश न कीजिये मंत्री की हैसियत से जवाब दीजिये (व्यवधान) मैं यह सवाल पूछ रहा हूँ कि क्या आपको पता है कि आपने बड़ी कम्पनियों को लाइसेंस दे रखा है यह कम्पनियाँ सलाटर हाऊस में जो जानवर कटते हैं उनका खून बोतल में भर कर बाजार में बेचती हैं और इस तरह से करोड़ों रुपयों की इनकम होती है। यही नहीं है उसमें पता नहीं गाय का या सूअर का या किस जानवर का खून होता है। मैं दवाओं का नाम बोल रहा हूँ एक तो हेहोपागोलाबडीन... (व्यवधान)... यह दो दवाइयाँ हैं। क्या इन कम्पनियों के बारे में आपको कोई जानकारी है। यह कम्पनियाँ बाहर की कम्पनियाँ हैं और यहाँ आकर ऐसे काम करती हैं और सलाटर हाऊस से कटे हुए जानवरों का खून बेचते हैं। यदि आप कहें तो मैं कल या परसों या जब भी आप चाहें मैं इन दोनों बोतलों को आपको देने के लिये तैयार हूँ।

श्री वसन्त साठे : हमें ऐसी कोई जानकारी नहीं है। ऐसे सब गलत कामों की जानकारी हमारे श्रीमान् मित्र को अच्छी रहती है। मैं प्रार्थना करूँगा कि वे यदि कुछ प्रमाण के साथ मेरे ध्यान में ऐसी बात लायें तो मैं जरूर इसकी जाँच कराऊँगा।

श्री रामेश्वर सिंह : श्रीमान्, एक मिनट सुनिये... (व्यवधान)

श्री सभापति : सुनिये, ज्यादा खून खराबा मत कराइये। (व्यवधान)

श्री रामेश्वर सिंह : आप खड़े रहेंगे तो मैं नहीं पूछूँगा। (व्यवधान)

डा० रफीक जकरिया : काई ड्रग जा रामेश्वर सिंह का इलाज करे क्या आप तैयार कर सकते हैं ।

श्री वसन्त साठे : वह आयुर्वेद की ही दवाइयां लें ।

श्री रामेश्वर सिंह : श्रीमन्, एक मिनट ..... (व्यवधान)

श्री सनापति : आप रामानन्द जी से ही इलाज कराइये । (व्यवधान)

श्री रामेश्वर सिंह : मन्त्री जी ने तो कहा है कि उनको कोई जानकारी नहीं है । मैंने दो दवाइयों का नाम लिया है और यह कंपनियों कोई... (व्यवधान) यह कंपनियां लाख, दो लाख या 10 लाख की नहीं हैं यह तो 10-20, 50 करोड़ वाली कंपनियां हैं (व्यवधान) आयुर्वेदिक सिस्टम से यह कहते हैं कि खून पीने से, औरतों द्वारा प्रसव में खून पीने से उनका स्वास्थ्य मजबूत रहता है । क्या ऐसी दवा कंपनियों को आप बैन करायेंगे, उनके लाइसेंस वापिस लेंगे ?

श्री वसन्त साठे : मैंने तो कहा है कि जिन भयानक बीजों की जानकारी आपको है वह मेरे पास अभी तक नहीं आई । आप यदि, (व्यवधान)

DR. BHAI MAHAVIR: That is meant for pregnant women, he said. I don't think he qualifies for that.

श्री सनापति : अब मैं और मेम्बरों का नाम नहीं लेना चाहता ।

SHRI INDRADEEP SINHA: I would like to seek information or, maybe, clarification on three points: (1) Has the attention of the honourable Minister been drawn to a recent report published by Prof. S. K. Goel of the Indian Institute of Public Administration wherein he has found that

many of the so called small drug companies are really branches or subsidiaries of multinationals, and they are misusing the concessions given to the small sector, and they are exploiting the country and the drug industry? Secondly, is it a fact that recently a Minister of the Bangladesh Government complained that hundreds of drugs which have been banned in Bangladesh as harmful, are still circulating in India and they are being smuggled out from India to Bangladesh?..

MR. CHAIRMAN: Yes, I have also read it.

SHRI INDRADEEP SINHA: Thirdly, is it a fact that one of the causes for low utilisation of the installed capacity in the State sector drug plants is the shortage of cap-filling material, gelatine, and is it a fact that the State sector has not set up any plant for manufacture of its own gelatine so that that shortage is removed?

MR. CHAIRMAN: Two questions: some of the drugs are still being sold, and then about gelatine.

SHRI VASANT SATHE: As regards the first two questions which have been reported, we have noted them we are making inquiries. As soon as I have proper information, I will lay it on the Table of the House. As far as hard gelatine capsules are concerned, to my information there is no shortage of adequate machinery to produce these capsules. But if in a particular unit there is a shortage of machinery, I will go into it.

SHRI INDRADEEP SINHA: Is the machinery in the State sector?

SHRI VASANT SATHE: Yes, in the State sector, if you mean public sector by State sector; we have machinery.