

and all that, or that they do not get food, etc. etc. That is why we are determined to improve the matter.

**MR. CHAIRMAN:** The first step is the pantry car.

**SHRI A.B.A. GHANI KHAN CHAUDHURI:** Sir, I will read from here, if you want. For the whole of India, the total number of catering services available is 3,253. Out of these, 81 are in trains; that means, they are mobile. At stations, the number of those departmentally run is 71, and in trains, 54. Now at 38 stations catering is run partly by the Railways and partly by the contractors. Now what we are trying to do is that instead of the static ones we are introducing pantry cars. We think that pantry cars will be able to give more benefits to the passengers than the static ones.

**SHRI SHRIDHAR WASUDEO DHA-  
BE:** What about the Howrah-Ahmedabad Express which is a long-distance train?

**SHRI A. B. A. GHANI KHAN CHAUDHURI:** I cannot say about a particular train. But this is our general policy.

**श्री नत्थू सिंह :** श्रीमन्, आपके माध्यम से मैं माननीय रेल मंत्री जी से पूछना चाहता हूँ कि लम्बी गाड़ियों में बैठने की सुविधा, एयर कंडीशन चेयर की आप व्यवस्था कर रहे हैं, लेकिन हिन्दुस्तान की 80 फीसदी जो पब्लिक बैठती है, वह छतों पर बैठ कर जाते हैं। उनको सुविधायें देने के लिए माननीय मंत्री महोदय बतायें कि जो छतों पर बैठ कर सफर करते हैं उन के लिए क्या प्रबन्ध कर रहे हैं?

**श्री सभापति :** छतों पर बैठते क्यों हैं, सवाल यह है।

I do not think that can be answered by the Minister.

**Measles vaccine in baby clinic of Dr.  
R. M. L. Hospital**

\*324. **DR. (SHRIMATI) NAJMA HEPTULLA:** Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the measles vaccine has not been provided at the baby clinic of the Dr. Ram Manohar Lohia Hospital, New Delhi;

(b) if so, what are the reasons therefor; and

(c) by when Government propose to provide this vaccine to the needy children at this clinic?

**THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (MISS KUMUDBEN M. JOSHI):** (a) to (c) Measles vaccine is being tried out in the country on trial basis in specified medical colleges with a view to ascertain the feasibility of introducing this vaccine in the normal immunisation services. It is only after the results of these pilot studies are evaluated that the question of introduction of this vaccine in the Expanded Programme of Immunisation and in hospitals would be taken up.

**DR. (SHRIMATI) NAJMA HEPTULLA:** Sir, the Baby Clinic, the Child Welfare Clinic, in the Ram Manohar Lohia Hospital on Friday and Tuesday every week gives various vaccines for immunisation. This Hospital covers a large area coming up to the North Avenue and beyond that, and many children from rural areas come for vaccination. Is the Government thinking of using this vaccine, the measles vaccine, also to be tried in the Ram Manohar Lohia Hospital?

**MISS KUMUDBEN M. JOSHI:** Sir, I have already replied that on the trial basis we have selected some pilot projects. According to that in the country we have selected 36 institutions. In Delhi there are four institutions, the AIIMS, the Safdarjung Hospital, the Maulana Azad Medical College and the Kalavati Sarani

Children Hospital. So, the Ram Manohar Lohia Hospital as a voluntary institution should come up and apply to take up this project because it is under experiment now. We have not taken it up for regular immunisation programme up till now. The Ram Manohar Lohia Hospital has not come forward and it has not applied to take up this project. So, 36 institutions have taken up the project. We are awaiting the report.

**SHRI N. P. CHENGALRAYA NAIDU:** It is a Government hospital. Why can you not ask them?

**DR. (SHRIMATI) NAJMA HEPTULLA:** Sir, the Government should ask the dispensaries to take up this programme. This is one question. And secondly, as this hospital covers a large area, that is why, I say, if they utilise this vaccine even on a trial basis, it will be much better to give it to it than giving it to a medical college or giving it to the Safdarjung Hospital and others.

**MISS. KUMUDBEN M. JOSHI:** Sir, measles is not a notifiable disease. So, the experiment is going on a pilot basis. We are awaiting the report. As soon as we will get the report, we will see whether we should include it in the immunisation programme or not. If we can include this in the immunisation programme, then, naturally, it is the responsibility of the Government to provide the vaccine to all the hospitals and all the primary health centres. Sir, we are awaiting the report. So, we have appointed these pilot projects in 1980. So, it is not possible for us to supply the vaccines to the hospital.

**SHRI N. P. CHENGALRAYA NAIDU:** Because this is a private disease.

**SHRI G. VARADARAJ:** Mr. Chairman, Sir, this measles vaccine programme, the Rotary in Tamil Nadu and Kerala have taken up in a big way. Nearly 3.5 million doses are coming free of cost from the Canadian International Development Agency, and complete tests have been conducted there. The Chief Virologist in the Vellore Christian Medical Hospital, Jacob John, is an authority on this, and he has proved that measles is a very dangerous disease for children between 1

and 9 months old. This has to be done on a war footing. I do not know how the hon. Minister says that yet they have to conduct it on a trial basis.

**MISS. KUMUDBEN M. JOSHI:** Sir, the hon. Member rightly mentioned about the voluntary work of the Rotary particularly in Tamil Nadu. These people have taken up this project. Each project will have to cover a population of 5,000 with children. And they get this vaccine imported also. What I mentioned was that we have not included this in the immunisation programme and we are awaiting that report. Once we got the report and we include it in the immunisation programme, naturally it will be the responsibility of the Government to supply this vaccine.

**श्री लाडली मोहन निगम :** सभापति महोदय, मैं सिर्फ मंत्री महोदया से यह जानकारी चाहता हूँ कि क्या यह सच नहीं है कि जिन बच्चों को खसरा निकल आता है, खसरे की रोकथाम के लिये आप क्या व्यवस्था करती हैं, क्या इंतजाम करती हैं मुझे इससे कोई मतलब नहीं, लेकिन क्या यह जरूरी नहीं है कि खसरा की रोकथाम की जगह हामला खातूनों यानी गर्भवती महिलाओं को खसरे का इंजेक्शन उनके गर्भवती के समय, यानी जब वह हामला होती हैं उस अवस्था में महिलाओं को अगर दे दिया जाए तो इस समस्या पर काबू पाया जा सकता है ?

**श्रीमती कुमुदबेन मणिशंकर जोशी :** सदस्य जी ने जो सवाल किया है मैं उन्हें बताना चाहती हूँ कि यह सवाल मिजल्स के बारे में, इम्युनाइजेशन प्रोग्राम के बारे में है ।

**श्री सभापति :** यह मदर को इम्युनाइज कर रहे हैं ।

**श्री लाडली मोहन निगम :** मैंने हामला औरतों के बारे में पूछा है ।

**श्रीमती कुमुदबेन मणिशंकर जोशी :** यह मिजल्स का सवाल है। यह 6 से 9 महीने के बच्चों को दिया जाता है। उनकी मदर को देने से कोई फायदा नहीं होता है। आपने मदर के बारे में पूछा है तो इस प्रोग्राम का बच्चे से ताल्लुक है मदर से नहीं।

**DR. M. M. S. SIDDHU:** Some of the genetic defects are due to the measles virus and in order to protect the progeny, the mothers are to be protected

**MR. CHAIRMAN:** Is there any immunisation programme for the mothers? I don't think so.

**DR. M. M. S. SIDDHU:** There is no way to prevent genetic diseases which are caused through the measles virus other than to immunise the mother. There is no other way. Therefore, when you are talking of the infant, we have to think in terms of the foetus in the uterus also. That is where the protection of the child is necessary.

**श्री लाडली मोहन निगम :** हम मिनिस्टर साहब से जवाब चाहते हैं।

**श्रीमती कुमुदबेन मणिशंकर जोशी :** एम सी एच प्रोग्राम में औरतों को सुविधाएं दी जाती हैं। पर मैंने यह कहा है कि इस सवाल के बारे में हम बेट कर रहे हैं। पायलेट प्रोजेक्ट रिपोर्ट हमारे पास आने वाली है। उसमें देखेंगे कि उसका क्या रिएक्शन है, कैसे देना है कैसे करना है। बाकी जो फैसिलीटीज हमें देनी है वह हम इस प्रोग्राम के अंदर दे रहे हैं।

**श्री लाडली मोहन निगम :** सवाल क्या है और जवाब क्या दे रहे हैं। हम चाहते हैं मिनिस्टर साहब इसका जवाब दें।

**MR. CHAIRMAN:** Let me explain. There are two things which can be done. One is to immunise the mother when she is pregnant. The other is to immunise

the child when it is between one and nine months old. Dr. Siddhu is suggesting that there could be immunisation of a pregnant mother to protect the child. Is any enquiry or research being made on that? It is a suggestion worth considering.

**SHRI B. SHANKARANAND:** Sir, the hon. Member has asked a larger question of immunisation of mothers.

**MR. CHAIRMAN:** Not all mothers.

**SHRI B. SHANKARANAND:** Mother and the child—am I correct?

**MR. CHAIRMAN:** If the mother is 60 years old, there is no use in immunising her.

**SHRI B. SHANKARANAND:** Sir, a mother of 60 or 70 years still feels that her sons and daughters are children.

**MR. CHAIRMAN:** Expectant mother.

**SHRI B. SHANKARANAND:** Sir, Dr. Siddhu has asked a basic question of immunisation of expectant mothers. But the question relates to the immunisation of a child between one and nine months old. And the pilot study of immunising the child against measles has got two objectives. One is, the administrative feasibility of introducing measles vaccine in the routine immunization service. We have got the immunization service and Dr. Siddhu knows it very well. The second is the clinical observation on the importance of measles as a public health problem. On this a pilot study has been taken up by various medical colleges all over the country; about 36 of them are doing this pilot study. We are waiting for the results. (Interruption) He has opened an issue which is larger, regarding the genetic disease. This pilot project has nothing to do with that. It is a suggestion for action.

**MR. CHAIRMAN:** It is a suggestion that you might also consider...

**SHRI B. SHANKARANAND:** That is what I said.

**MR. CHAIRMAN:** I think after this the Question Hour is over.