

sional conduct and etiquette for the practitioners of the Indian Systems of Medicine and the code of ethics to be observed by them in their professional conduct. This would enable a certain amount of control to be exercised over the practitioners indulging in such advertisements.

**Confirmation of Director CNCRC,  
Calcutta**

1521. SHRI DIPEN GHOSH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the present incumbent in the post of Director of Chittaranjan National Cancer Research Centre, Calcutta was confirmed in the post by the Central Government as she claimed to have developed a biochemic mixture—"SICAFEK"—as panacea for cancer;

(b) if so, whether Government have got the effectiveness of the said drug assessed by an expert committee before giving credence to such claim; and

(c) if so, what are the details of the observations of the said committee?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (MISS KUMUD BEN M. JOSHI): (a) No.

(b) and (c) Do not arise.

1522. [Transferred to the 6th August, 1982].

**Intensive care unit of NDMC hospital  
Motibagh**

1523. SHRIMATI MONIKA DAS: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the use of Intensive Care Unit in New Delhi Municipal Committee Hospital, Moti Bagh,

as a V.I.P. Ward, where friends and relatives of V.I.P's. are admitted irrespective of the disease;

(b) whether Government are aware that there are no qualified doctors to man the I.C.U. in that hospital; and

(c) if so, what steps Government are taking to make the I.C.U. a genuine unit where patients who require intensive care are properly looked after by qualified doctors?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (MISS KUMUD BEN M. JOSHI): (a) It is not correct.

(b) and (c) The services of qualified doctors are available in I.C.U. The Hospital has 1 Medical Specialist, 1 Surgeon and 3 Anaesthetists with P.G. qualifications and also 3 Resident Medical Officers of G.D.O. II for I.C.U. on its strength. In addition to this, services of other specialists viz. Gynaecologist, Eye specialist, Radiologist and Medical Supdt. are also available. The patients are looked after properly by these Medical Specialists.

**Statutory obligation on cigarettes  
advertisements**

1524. SHRI JAGANNATH SITARAM AKARTE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that there is a statutory obligation on manufacturers to print a warning in every advertisement relating to cigarettes that 'cigarette smoking is injurious to health';

(b) if so, whether it is a fact that the said warning is written in very small letters which cannot be easily read;

(c) whether Government have taken any notice of this blatant ridicule of the statutory obligation; and

(d) if so, what action has been taken in the matter?

**THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (MISS KUMUD BEN M. JOSHI):** (a) to (c) Yes.

(d) The Government of India have requested the State/UT Governments to ensure the proper implementation of the Cigarettes (Regulation of Production, Supply and Distribution) Act, 1975 and the rules made thereunder so that the defaulters can be brought to book and suitably punished.

#### Education to check population growth in slum areas

1525. **SHRI SHRIDHAR WASUDEO DHABE:**  
**DR. BHAI MAHAVIR:**

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

(a) whether Government have taken steps for imparting education to check the growth of population in slum areas in the various metropoli-

tan cities, State capitals and district towns including New Delhi; and

(b) if so, what are the details thereof and the results in the last two years i.e. 1980-82?

**THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (MISS KUMUD BEN M. JOSHI):** (a) and (b) Yes. For popularising family planning in the Urban Areas, educational and motivational programmes are being organised through mass media like posters, hoardings, exhibitions, films, radio, T.V. and interpersonal communication. Opinion Leaders Camps are also being held in slum areas. Urban Family Welfare Centres run both by Government and voluntary agencies are engaged in educating the urban masses and in delivery of family welfare services.

Performance statistics are not maintained separately for slum areas. These are maintained on Rural-Urban basis. The Rural-Urban break-up of sterilisations and I.U.D. insertions for the year 1979-80 and 1980-81 is given below:

Year	Rural	Urban	Break-up not available	Total	Percentage of rural of total (%)
<i>Number of Sterilisations</i>					
1979-80	941,781	433,561	402,582	1,777,924	68.5
1980-81*	981,933	602,187	444,394	2,028,514	62.0
<i>Number of I.U.D. insertions</i>					
1979-80	375,558	203,219	55,732	634,509	64.9
1980-81*	324,949	228,453	69,684	623,086	58.7

\*Provisional.

†Percentage of Col. 2+3 to the total figures for which rural-urban break-up is available.

The figures showing rural-urban break-up of sterilisation and I.U.D. acceptors for 1981-82 have not yet been computed.