

दायक हो, इस दृष्टि से जो वहाँ पर बस आपरेटर्स थे, उनकी मांग न होते हुए भी कि हमारा किराया बढ़ाया जाय, किराया बढ़ाया इस आशा से कि राष्ट्रीयकरण होने पर उनको लाभ हो जायेगा ? ऐसी स्थिति में इस नीति से चलने का कंसिडरेशन जब कभी प्लानिंग में हो, तो क्या इस पर विचार करेंगे अथवा नहीं ?

श्री बी० आर० भगत : अभी तो यह मालूम नहीं है कि किराया कितना बढ़ता है...

श्री विमलकुमार मन्नालालजी चौरड़िया : सोचियेगा उस वक्त जब आप तय करें इसके बारे में ।

श्री बी० आर० भगत : आपने यह बताया है । इस बात पर भी विचार किया जायेगा ।

MR. CHAIRMAN: It is good to know.

SHRI G. RAMACHANDRAN: Has the hon. Minister any information which he can give us as to the extent to which Madras State has nationalised road transport and whether they have sent up any proposals for extending the areas of nationalisation of road transport?

SHRI B. R. BHAGAT: I want notice for this question. I will be happy to give this information if notice is given.

TETANUS INFECTION IN I.I.M.S.

\*621. SHRI RAM SINGH: Will the Minister of HEALTH be pleased to state:

(a) whether it is a fact that tetanus infection in the operations, performed at the Indian Institute of Medical Sciences, New Delhi, has recently been reported; and

(b) if so, the causes of this infection and whether some patients became victims to this infection; if so, the details thereof?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH (SHRI P. S. NASKAR): (a) and (b) Yes, Sir, one patient developed tetanus on the 5th day after the operation which was done on the 20th October, 1964. No cause of infection was found except that on investigation the sample of dust on a portable suction apparatus, which is sometimes taken out to the wards for emergency cases, was found positive for tetanus spore, and the fact that the patient had an operation on the perenium also might have resulted in endogenous infection.

SHRI RAM SINGH: Is it a fact that when there is tetanus infection anywhere, the entire building is demolished?

DR. SUSHILA NAY AR: No, Sir. There is no question of demolishing the building. Tetanus spore, are generally found in dust and in excreta, etc. Now, the whole building was thoroughly investigated as my hon. colleague stated, and no tetanus spore was found anywhere except in the dust on a portable suction apparatus that was taken out for some emergency cases. The dust on that apparatus disclosed some tetanus spores. That dust is most unlikely to have infected the patient. The operation was done on the perenium of the patient and it is quite possible that some spores from his own intestines might have infected him in the course of the operative procedures.

SHRI LOKANATH MISRA: May I know if some patients also develop jaundice because of this tetanus infection, and is it not a fact that the entire plaster on the operation table and roundabout is changed whenever there is an infection of tetanus anywhere?

DR. SUSHILA NAYAK: Sir, I do not know of any case of jaundice if the hon. Member gives me some more details, I shall try to find out. So far as the plaster is concerned, Sir, I do not know what plaster he is referring to if it is a reference to a plaster cast, or plaster on the walls. I do not know if the plasters on the walls are scraped when a case of tetanus occurs. If there is any case of tetanus in an operation theatre due to dust, etc., as things stand, the entire operation theatre is disinfected and is made free from any tetanus spores.

DR. M. M. S. SIDDHU: May I know from the hon. Minister whether human beings are carriers of tetanus spores?

DR. SUSHILA NAYAR: Yes, Sir, they definitely are; that is why the Deputy Minister stated that it might have been a case endogenous infection.

SHRI P. N. SAPRU: Is it a fact that the Soviet Union has discovered some medicine which acts as a preventive for tetanus? Has the Minister read somewhere that the Soviet Union has discovered such a pill? Will the hon. lady Minister say whether that is a fact?

DR. SUSHILA NAYAR: Sir, oral penicillin has been used on a large scale in many countries including our own country. It might have some prophylactic effect. But the truth is that in all these countries, Soviet Union included, a preventive inoculation is given to children against diphtheria, pertussis (whooping cough) and tetanus, what is usually called DPT, and they carry a certain amount of immunity throughout life, particularly when they are given booster doses later on.

SHRI SYED AHMAD: The cause given by the hon. Minister in this particular case about that man having been infected with tetanus seems speculative, so far as I could make out. May I know if the hon. Minister

has taken steps or care to get it checked that the instruments with which the operation was performed were thoroughly sterilized and that that was not the fault of the instruments?

SHRI P. S. NASKAR: All the instruments that were used in the operation and the other instruments in the operation theatre have been checked, and for the information of the hon. House, I may say that on the very day, 20 more patients were operated upon and 100 operations were done from the date of this case to the date of the detection of infection of tetanus. So, none of the other patients suffered any tetanus.

#### SEIZURE OF BLACK-MONEY IN CALCUTTA

/SHRI P. ABRAHAM: ' SHRI  
G. K. KAPOOR: f

Will the Minister of FINANCE be pleased to state:

(a) whether black money worth Rs. 19 lakhs was seized from a firm in Burra Bazar, Calcutta, on 7th November, 1964; and

(b) if so, what action has been or is proposed to be taken against the persons involved?

THE DEPUTY MINISTER IN THE MINISTRY OF FINANCE (SHRI RAMESHWAR SAHU): (a) On the 6th and 7th November, 1964 a search was conducted by the Income-tax Department with the assistance of the Detective Department of the Calcutta Police in the godown of a firm in Calcutta and the police seized a sum of Rs. 18,83,700 in currency notes.

(b) Four out of the five partners of the firm were arrested by the Police under the Defence of India

tThe question was actually asked on the floor of the House by Shri G. K. Kapoor.