

- Shortage of specialists, doctors and paramedics.
- (e) Steps taken for effective implementation of NRHM to reduce the infant mortality rate and maternal mortality ratio includes:
- (i) Upgrading and operationalizing the primary health centres (PHC) as 24X7 facilities and the community health centre (CHC) as First Referral Unit (FRUs) for providing basic and comprehensive obstetric and newborn care services.
  - (ii) Augmenting the availability of skilled manpower by means of different skill based trainings such as skilled birth attendance for Auxiliary Nurse Midwife/ Staff Nurses/ lady health visitors; training of MBBS doctors in Life Saving Anaesthetic Skills and Emergency Obstetric Care including caesarean section.
  - (iii) Janani Suraksha Yojana (JSY), a cash benefit scheme to promote institutional delivery with a special focus on Below Poverty Line (BPL) and SC ST pregnant women. This has resulted in significant increase in institutional deliveries.
  - (iv) Provision of Ante Natal and Post Natal care services including prevention and treatment of anaemia by supplementation with iron and folic acid tablets during pregnancy and lactation.
  - (v) Organizing Village Health and Nutrition Day in rural areas every month at Anganwadi Centers for provision of maternal and child health services.
  - (vi) Engagement of ASHAs to facilitate assessing utilization of health care services by the community.
  - (vii) Establishing Referral Systems including emergency referral transport, for which states have been given flexibility to use different models.
  - (viii) System strengthening of health facilities through flexible funds as Sub centres, Primary Health Centers, Community Health Centers and District Hospitals.

#### **Doctor-patient ratio in the country**

1321. SHRI RAASHID ALVI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the doctor-patient ratio in rural areas and in urban areas of the country;
- (b) what is this ratio in other countries; and
- (c) the steps taken by Government to increase the number of doctors?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DINESH TRIVEDI): (a) The doctor patient ratio varies from case to case depending upon various factors like type of diseases, nature of specialization, type of treatment required *i.e.* indoor /outdoor.

- (b) No specific data is maintained.
- (c) The Central Government has initiated the following measures to facilitate setting up of medical colleges to increase number of doctors/specialists in the country:
  - (1) Requirement for land, faculty, staff, bed/bed strength, other infrastructure, etc. has been relaxed.
  - (2) Maximum intake capacity at MBBS level has been increased from 150 to 250.
  - (3) Maximum age for appointment of faculty has been enhanced from 65 to 70 years.
  - (4) DNB qualifications have been recognized for appointment to various faculty positions.
  - (5) Teacher - student ratio has been relaxed to increase the seats at Postgraduate level.
  - (6) The Central Government under the scheme of 'Strengthening and Upgradation of State Government Medical Colleges' is providing financial support to State medical colleges to increase postgraduate seats in various disciplines or start new postgraduate medical courses.

**Instructions to withdraw medicines with same brand name**

1322. DR. K.V.P. RAMACHANDRA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether it is a fact that the Drugs Controller General of India has issued instructions to State Drug Controllers to withdraw three separate medicines used for different ailments with the same brand name;
- (b) if so, the estimated number of such medicines available in the market in various parts of the country; and
- (c) the steps proposed to be taken to prevent such incidents in future?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DINESH TRIVEDI): (a) Yes. The office of Drugs Controller General (India) had requested the State Drugs Controllers on 7.2.2011 to withdraw the permissions for the following different drug formulations with the same 'AZ' brand names under their jurisdiction:

- (i) Cetirizine, manufactured by M/s Sienna Formulations Pvt. Limited, Vadodara, Gujarat.
- (ii) Albendazole, manufactured by M/s Cure Quick Pharma, Karnal, Haryana.
- (iii) Azithromycin, manufactured by M/s Eugenics, Lucknow, Uttar Pradesh.