

taneous heating and in Handi Dhua, it was bursting of an electric cable. There was no loss of life in Talcher but one was killed in Hindi Dhua. The fire area in the Talcher mine has been sealed off, involving about 2/3rd of the mine. The Handi Dhua mine is completely sealed off. This has been done to bring the fire under control, prevent further spreading and finally to extinguish the fire. Extent of loss of property can be assessed only after the fire areas are reopened. Stricter vigilance has been enjoined on collieries to prevent the recurrence of such fires].

†DISTILLATION OF WINE BY GOVERNMENT

200. SHRI SITARAM JAIPURIA: Will the Minister of PETROLEUM AND CHEMICALS be pleased to state:

(a) whether Government have decided to distil wine in the country; and

(b) if so, where the factory for the purpose is proposed to be located and what will be the capital investment on the project?

THE MINISTER OF PETROLEUM AND CHEMICALS (SHRI HUMAYUN KABIR): (a) No, Sir.

(b) Does not arise.

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PAPERS LAID ON THE TABLE

NOTIFICATIONS UNDER THE MINES AND MINERALS (REGULATION AND DEVELOPMENT) ACT, 1957

THE MINISTER OF STEEL, MINES AND HEAVY ENGINEERING (SHRI C. SUBRAMANIAM): Sir, I beg to lay on

†Transferred from the 27th November, 1963.

the Table, under sub-section (1) of section 28 of the Mines and Minerals (Regulation and Development) Act, 1957, a copy each of the following Notifications of the Ministry of Mines and Fuel:—

(i) Notification G.S.R. No. 1595, dated the 24th September, 1963, publishing the Mineral Concession ((Eighth Amendment) Rules, 1963.

(ii) Notification G.S.R. No. 1685, dated the 15th October, 1963, publishing the Mineral Concession (Ninth Amendment) Rules, 1963.

[Placed in Library. See No. LT-2035/63 for (i) and (ii)]

ANNUAL REPORT (1962-63) OF THE OIL AND NATURAL GAS COMMISSION

THE MINISTER OF STATE IN THE MINISTRY OF PETROLEUM AND CHEMICALS (SHRI O. V. ALAGESAN): Sir, on behalf of Shri Humayun Kabir, I beg to lay on the Table, under sub-section (3) of section 23 of the Oil and Natural Gas Commission Act, 1959, a copy of the Annual Report of the Oil and Natural Gas Commission for the year 1962-63. [Placed in Library. See No. LT-2010/63].

STATEMENTS SHOWING ACTION TAKEN BY GOVERNMENT ON ASSURANCES, PROMISES AND UNDERTAKINGS GIVEN DURING VARIOUS SESSIONS

THE MINISTER OF PARLIAMENTARY AFFAIRS (SHRI SATYA NARAYAN SINHA): Sir, I beg to lay on the Table, the following statements showing the action taken by Government on the various assurances, promises and undertakings given during the sessions shown against each:—

(i) Statement No. VI—Thirty-sixth Session, 1961.

(ii) Statement No. X—Thirty-seventh Session, 1962.

(iii) Statement No. X—Fortieth Session, 1962.

[Dr. Sushila Nayar.]

could be given some special equipment in the form of X-ray, laboratory facilities, etc. I shall explain to him, Sir, through you, that it is not some whim on the part of the Government of India. What is aimed at, at the present moment, is not a haphazard treatment of occasional cases here or there. What we want is a systematic coverage of all the cases through domiciliary treatment of the tuberculosis patients. This domiciliary treatment can be effective if it is done in a systematic manner.

SHRI CHANDRA SHEKHAR: I may give one information. I did not question the giving of training to the doctors. But my point was that doctors who had been trained at the Sardar Patel Chest Institute, qualified people, were employed, and these doctors were again asked to go to the T.B. National Institute at Bangalore. Why was that?

DR. SUSHILA NAYAR: I had understood my hon. friend's point. He should have a little patience and hear me. The doctors who are trained at the Sardar Patel Chest Institute, are trained in tuberculosis and other chest diseases. These doctors with diplomas in tuberculosis and chest diseases are taken to the National Institute at Bangalore where we have an extensive set-up for the treatment of tuberculosis on a domiciliary basis. For the domiciliary treatment, a number of requirements are there. The doctors not only should know how to treat the patients but they should also be in a position to link up with some of the primary health centres, clinics and other agencies. Scientific epitomological investigation has to be carried out to check the spread of infection. In this and other scientific and important subjects, they are trained for three months. They are not trained for a year or two years. Further, the practice of medicine is no longer an

individual discipline. It is a team work that has assumed importance. Therefore, the National Tuberculosis Institute insists on the team consisting of a doctor, a public health nurse, a laboratory technician, an X-ray technician and a B.C.G. technician for training purposes. Very often it happens that the State Government wants to send only the doctor. We do not think that is enough. The doctor alone has been trained at the Patel Chest Institute or elsewhere but the team together has to be trained as to how they should take up the domiciliary treatment and control.

Further, Sir, it is not as if we are doing this as a whim of our own. We are getting some of the apparatus through the UNICEF and they are absolutely positive that unless we have a trained team and proper buildings in which to house the equipment, we cannot get the equipment. It is in view of this that we have been emphasising on the State Governments to do the needful. This has become necessary because in the First and the Second Plans equipment was supplied to some of the State Governments and after five years in some cases and in some cases for more or less period, the equipment was found lying unopened. I have seen this with my own eyes. Costly bottles meant for the laboratory and for culture work were found to be lying idle along with the rubbish heap in the store room, being kicked about by the people passing through. It is not proper, it is not good that we should fail to utilise these facilities in this manner. This is abuse of facilities. Therefore, it has been considered to be of utmost importance that when we supply these facilities, we should at the same time make sure that people who are going to use the facilities are competent to do so, have the background, the knowledge, the training and capacity to organise this type of campaign which we hope will check the further spread or