

dubious language should have been avoided in this Bill. Thank you, Sir.

3 P.M.

**MOTION REGARDING THE SECOND  
ANNUAL REPORT OF THE ALL-  
INDIA INSTITUTE OF MEDICAL  
SCIENCES**

DR. SHRIMATI SEETA PARMA-  
NAND (Madhya Pradesh; Mr. Deputy  
Chairman, I move:

"That the Second Annual Report of the All-India Institute of Medical Sciences, New Delhi, for the period 1st August, 1957 to 31st March, 1958, laid on the Table of the Rajya Sabha on the 24th November, 1958, be taken into consideration."

Sir, the reason for my making this motion is that an institute of the nature of the All-India Institute of Medical Sciences, started with such colossal expenditure, which has gone or is expected to go to the tune of almost Rs. 11 crores—already it is about Rs. 5% crores—which was started, Sir, because to begin with, there was a donation of a million pounds from the New Zealand Government, should stand the test of the highest principles of public administration and fulfil the goal which it has set out for itself. Sir, I would here refer to the speech of the then Health Minister, Rajkumari Amrit Kaur, when the Bill connected with this Institute was introduced on 3rd May, 1956. This is what she said:

"I should probably never have been able to get our Government to give me that amount of money to start with. This is not a new scheme. It has been before both Houses because money for it has been budgeted over the last four years. There have been some delays in starting it but there was no question ever of this Institute being anything except one for developing sciences which are allied to modern medicine."

Sir, I would say again at the end of my speech, something with reference to this amount of money and what was necessary for the Ministry to see and for the House to be aware of, after dealing with the different paragraphs set out in this Report, paragraph by paragraph, with the different matters dealt with in this Report.

I would begin by saying that this Report should have been presented in August, 1958 so as to allow sufficient time, because it deals with the period up to 31st March, 1958, and there is no reason why it should have taken six months to be laid on the Table of the House. Here para 2 deals with the teaching staff, and the position regarding the teaching staff on 31st March, 1958 is that there are 25 professors and there are 27 assistant professors. In addition, there are 5 associate professors and . . .

DR. W. S. BARLINGAY (Bombay). They are only sanctioned posts.

DR. SHRIMATI SEETA PARMA-NAND: Yes, that is true. They are sanctioned posts. For biochemistry there is one post, for bacteriology one, for preventive medicine one and for surgery and its branches eight, and associate professor one. That means that the posts filled are 4 and posts of associate professors and assistant professors there are 7. I would like to point out here something with regard to the way in which the posts are filled or the way they should be filled. These are posts in an institute over which the Government spends such a lot of money. The present budget is for Rs. 23½ lakhs and the next year's is estimated to be Rs. 35 lakhs, in addition to the expenditure already incurred. For various reasons and in order not to give room for any criticism of partiality or nepotism and things of that sort, these posts should be referred to the Public Service Commission. I would like here to point out the way in which it is done. It is an autonomous institute and Government-

[Dr. Shrimati Seeta Parmanand.] ment directly cannot be responsible, but still, as they give so much mon> they have to take a certain responsi- j bility, and that is why the hon. Minister is here.

The professor of biochemistry resigned because, he said, his allowance of Rs. 400 was discontinued. Then again it was continued. Again a reference was made. I would like to know when the staff is so small at present where was the need I first to discontinue this compensatory j allowance and then to restore it? That i does introduce a certain element of, I j would say, more or less, indiscipline, i which later on may permeate in to the | lower levels. Even though this allow-ance was allowed again, that professor ; did not rejoin.

I would also like to ask how many I of these posts have been given |o women? That is one point. I am men- I tioning this subject because it is | known that women of very high qua- \ lifications, women who have been invited to go abroad, outside the country, to take up academic work, who have been invited by foreign countries to take up some important posts, say in Pondicherry and other places, were not even called for interview. And what was the reply given on the floor of the House by the then Health Minister, Rajkumari Amrit Kaur? It was that when the application was sent the ag'e of the candidate was one month below 55, and when the interview time ! came, it was a few months above 55. It may be so. It was also admitted by her and everybody that when it is a question of technical knowledge, age need not be necessarily detrimental, and as a result, even in this institute, as in many other places, persons with technical knowledge aged 58 and above, have been and are invited to join again and are allowed to continue also. With that nobody will have any quarrel. The quarrel is only when on such grounds no chance of even an interview is given, when there are such persons in other institutes and in Government insti-

tutions. Into these and their reasons I have no time to go now.

There are also complaints of the nature of elements of provincialism coming in in these selections. It may be argued, and it may be explained away that whatever may be done by Government, it will always be open to criticism. But if we ourselves feel satisfied that there is no scope for that type of criticism, then we need not worry about that criticism. I would like to give only one instance. There may be many others to be brought to the notice of the hon. Minister, and the House. There have been cases of relations of the staff of the selection committee having been selected, without their having even the qualifications of other candidates, as far as experience and academic qualifications went. Sir, such things happening in an institute, which is said to be the highest institute is something that should not happen, and requires to be seen into.

Then I come to the next para and there also I may have to say something about the staff. Let us go to para 2. There we find that the T.C.M. have agreed to lend the services of an expert in preventive and social medicine. I would like to

point out here that of our country today there are as many as 300 to 350 students in England alone, qualifying for F.R.C.S. and other examination : of similar standards. And when they come back they are employed here on Rs. 250 and Rs. 300. They are disgruntled. The boys come back after passing at the first shot these examinations and some with five or six years' medical experience, and they have to take jobs here on Rs. 250. I know for a fact the way the T.C.M. allowed a candidate, Dr. Birch, in the Lady Hardinge College, who was only an ordinary M.B.B.S.

But then when somebody from outside comes, distance lends enchantment to the view. She was appointed as if she had some exceptional qualifications. though

several others were here with the same qualifications. Sir, while I am thankful to the T.C.M. for such help, I think here we should follow the example of other countries when we have qualified people here, not only for giving them a fair chance, but in order not to create an inferiority complex in their minds and some diffidence, and also in order not to under-rate the merits of our own people. After all, they have also got the qualifications and they have also acquired the experience and they are available in plenty and so we need not employ people of this type from outside.

This idea of having an Institute was mooted ten years ago. I have here got the report of the Medical Education and Research Committee submitted as long ago as 1944. Two officer-', Major Hans and Dr. Pandit, were sent by the Government of India to study the scope and extent for a future institution for Medical Sciences. We could have sent in these years the type of officers or people who would be required to man this Institute. They could have been sent during the last four or five years for purposes of specialisation. As mentioned by the then Health Minister, Government had to send somebody to specialise in preventive and social medicine. I think the time has now come, apart from the question of the foreign exchange involved,—even if we do not pay the foreign exchange, that need not explain away this attitude—when we should cry halt to this system of employing foreign personnel where it would be quite easy to get people from our own country. The present Director of the Institute, Dr. Dikshit, I am told, was one who had served there for ten years and would not have come here, had he not been specially invited by the then Government of Bombay. Similar people could have been found. There is one Mr. Subba Rao who, I think, invented Aureomycin or Streptomycin) • ■ -ver it is called techni-

cally. He is in America and he could have been got here for this job. He could not get any job here and so he went to America and was employed there. We have people here who have not been given proper opportunities. You get people from outside and pay them. Even if the T.C.M. paid, it does not matter, because the question is that the salaries paid to those people are very high compared to the salaries paid to the others.

I come to the next point about the budget. The present budget stands at Rs. 25,62,000 and the estimates for the next year stand at Rs. 35 lakhs because of certain officers who will be appointed as is evident from the fact that the sum of two lakhs of rupees provided for this year has been increased to four lakhs for next year. I would here like to refer to the question of expenditure over this Institute. Judging from the way in which the figures of expenditure are increasing, it appears that we have come, to a state where the Ministries treat lakhs as if they were five or ten rupee notes at the most. We just go on adding figures and that makes no difference. That is the reason why on this Institute which was to start because of the gift of the Australian Government, the generous gift—I am not looking the gift horse in the mouth— . . .

THE! MINISTER OF HEALTH (SHRI D. P. KARMARKAR): New Zealand.

DR. SHRIMATI SEETA PARMA-NAND: ... of one million pounds sterling, we are spending about ten or eight times that amount. We have already reached the figure of six million or so. When we are increasing the expenditure like this, whatever may be the reason, one has to say other things. I would here like to refer especially to the step-motherly treatment meted out to a women's institution, the Lady Hardinge College. It was run by a Trust and that has been taken over by the Government because of the fact that the original

[Dr. Shnmn<sup>1</sup>: Seeta Parmanand.J estimated expenditure of five to seven lakhs of rupees reached a figure of about twenty-six lakhs of rupees. Even though this figure of Rs. 26 lakhs included also the expenditure on the Contributory Health Scheme, this was considered to be something extraordinary and also because of this, Government had to take over the Institution and could not allow it to remain under the control of an administrative body, as it was put. In the case of this Institute, even if it requires ten times that expenditure, it must be kept autonomous and Government need not touch this Institute and that is why I say that the spectacles for looking at both the institutions have got to be the same and that is also why I repeat that the administration has to be tested on the touchstone of public standards.

I have to finish within the time allotted and so I have to hurry through. I come now to undergraduate teaching. It is said that by the end of the second academic year, there would be 121 students. Fifty students were admitted originally; fifty more came in on account of the composite college for the Lady Hard-inge College\* and 21 students more were admitted at the request of the Government of India, thus making a total of 121 students. Here I would like to read from page 10 of the Medical Education and Research Committee's Report:

"....their standards were to be M.B.B.S. of the Delhi University.

It is considered that under-gradu-ate students of the proposed Institute should be required to obtain the degree of M.B.B.S. of the Delhi University and be members of the Medical Faculty of that University."

That would have not been very much better because for one thing, this Institute being an autonomous body, though recognised by an Act would not have had its education supervised by the Indian Medical Council. It

was supposed to be something super-first class even among the ordinary Universities and yet, out of these 121 j students, quite a large number of them were not of first class qualifications. Even though this is an all-India Institute, the students are not from all over India and they are very disproportionately admitted as was bound to be in the case of the first selection. Some were of even lower qualifications, the reason being—I am anticipating the Minister and am making things easy for him—that examinations of the Universities for the Intermediate course from which standard the students are taken are held in August or so, that the admission examinations cannot be held earlier and so, only the remainder of the students, those who cannot get admission in the colleges come here. For that thing, what was lacking was enough of publicity in regard to this type of a new Institute which would have attracted the best type of students and they would have come even after they had gained admission to the other colleges and schools. This is with regard to under-graduate teaching.

There is the question of the lack of adequate seating arrangements for all the students but I think that is a minor matter. That depends on the ability of the able Director who can see to •these things but I want to tell you that this Institute which started with aH the preparation for ten or fourteen years, with experts being sent out to decide the scope and functions of this Institute, with the aid of a Bill rushed through Parliament, has started with all the handicaps. Freeships, if I may be permitted to use and be excused for using that expression, are niggardly. After all the expenditure of crores and crores of rupees, the free-ships given to these 121 students number only seven, seven students of the first year and five students of the second year class of M.B.B.S. If you want the best material to come forward, you must increase this number. When you are getting lecturers and other peoples on extraordinary sala-

xies, when you are giving money for even the air-conditioning of the hospital, why is it that the students who are the main material of the Institute are given only seven freeships or seven plus five, twelve freeships between two years?

I now come to the teaching programme. Leaving aside the technical part of it, anatomy, physiology biochemistry and all that—it is mentioned in paragraphs 3:3 and 3:4 of the Report—that though the students were admitted, because of lack of beds in the hospitals, teaching could not be done properly. He had said that they had adopted some new system. That may be so and they are doing that in many institutions. They give pass marks out of the results but also are giving 30 per cent, more according to ! the nature of the work done in the class.

I now come to the question about the non-availability of hospital beds. Here I would like to point out, Sir, that when we are trying to practise economy, when we are appointing various committees to see how economy can be effected in the different Ministries of Government, in this place, Sir, the Ministry could have itself gone to the help and seen that the existing hospital at Safdarjang was utilised by this Institute. I do not want to be told that this hospital is meant for the Contributory Health Scheme. It is only 25 per cent Contributory Health Scheme which is part of this hospital. This hospital has nearly 350 beds available and for 125 students even if you were to give them 250 beds, that would have been quite adequate to carry out the type of research that is required. The progress report has the word 'unfortunately' in many places. It says, unfortunately this was not done; unfortunately that was not available, at least three or four times. When so much money is to be spent, why should there be this difficulty in giving ordinary facilities?

I would like to point out that when the Delhi State agreed to hand over the Safdarjang hospital to the Health Ministry, it was in writing, on a written condition that this hospital was to be used for the future of the Institute. In spite of that, in- hospital has been able to give only sixty meagre beds out of 350 beds, to which strength it has been raised. Even then the Director has said why it is so. Because I am told there are differences in the Ministry and it appears also in the managing body of the Institute about the adjustment of the personnel from the Ministry—whether they are to be taken here or there. So, with these internal differences, the country's money is being wasted. Opportunities are being lost. And students who have been brought to this Institute with such promises are perhaps already feeling frustrated about what the Ministry tells us would be the best in the whole country. And for that reason it was not agreed by the Ministry then to open this Institute as a beginning, until the place was ready, either in Bombay or, I can tell this to the Minister in confidence, Madhya Pradesh. He must be knowing it, I may tell him in confidence, that the Madhya Pradesh Government was prepared to give the biggest hospital in Asia built in Nag-pur for this Institute—and even then it was not accepted, when it would have been the most central place. Yet, it was said it would be air-conditioned, and so on, as if all the hospitals are air-conditioned . . .

MR. DEPUTY CHAIRMAN: There are three more speakers.

DR. SHRIMATI SEETA PARMA-NAND: I can take half an hour.

MR. DEPUTY CHAIRMAN: The Minister has to answer and you have to reply.

DR. SHRIMATI SEETA PARMA-NAND: If I may carry on with my speech, I will deal with the report, with regard to post-graduate teaching.

MR. DEPUTY CHAIRMAN:      close at 3.30.

You to

even more money are being given to the Institute? Why so much money is being spent?

DR. SHRIMATI SEETA PARMA-NAN D:  
With regard to post-graduate teaching and under-graduate teaching, it has been stated that only three new post-graduate students were admitted, and the others were from among the staff. So, that is the equipment, that is the promise that the Institute has fulfilled with regard to post-graduate teaching.

Now, I would like also to refer to the research, referred to in para 3'12, on page 7. It gives the subjects of research, three or four. I do not want to read them out before you. I would like to have some sort of assessment as to how far the results have shown any promise, by contributing to knowledge. There is a Professor of Orthopaedics appointed there, who was appointed because he had some research to his credit when he was in John Hopkins, or somewhere. But during the last six years, to this country and to the Ministry, it would be interesting to know what research he has produced. If that is the standard of research from professors, it would be interesting to know why this is so.

Now, the question is why the Ministry is not able to give more beds in the Safdarjang hospital to this Institute, when it wants to open a surgical wing, a third wing in the Lady Hardinge Medical College against the advice of the Medical Council, whose advice they prize so much, that there should be only two wings. Whatever the Ministry may have wanted to do with regard to co-ordinating, that is no argument, when the Council has pointed out that the distance and time involved in covering that distance from the Lady Hardinge to the Safdarjang hospital for their clinical work are not justified. It was on that ground at that time it was sought to use the Irwin Hospital. If those beds are available even today for the Lady Hardinge Medical College, I should like to know—why these beds and j

With regard to teaching block and other things, all that goes out. They say that 400 nurses' quarters are ready. But it will be found—and I would give it for the information of the hon. Minister—that though this report says that the Nurses' Home is ready, even today about 100 nurses every day are going backwards and forwards five or six miles for their training, which is hardly justified after the money spent on this building.

Sir, I would like now to refer to the air-conditioning portion of this building, as referred to in paragraph 5"1, that the hospital will be air-conditioned. I would request the Minister that, in view of the fact that money is really short at present, we should rather use that money in building hospitals in other places. It would be better even today to expand the present Safdarjang hospital, which is to be expanded by about 100 or 200 beds. When the Institute is fully developed it will require 600 beds or ultimately 1200 beds. Use those 600 beds for this Institute and stop the proposed expenditure altogether on the hospital which is to be air-conditioned. I would like to know with regard to air-conditioning of the wards, as to how many hospitals in our country are air-conditioned? How is it commensurate with the wealth in the country? Under present conditions the people cannot have shoes even. They cannot pay for it. Even for protection from sun and rain and even to walk on stony roads they have no shoes. Eighty per cent of the people or 70 per cent of the people are in that condition. For us to talk of air-conditioning in your big hospital in Delhi is something about which we should think. I would like, therefore, with these remarks to say that everything is not quite all right either from the point of view of expenditure or from the point of view of teaching. Though the best is being done, the effect, the result, in spite of the staff that has been appointed, etc., is not at all com-

mensurate with either the expenditure or the expectations. Also, judging from the result and the way in which people are appointed, judging from the rumours that are afloat, there is rank provincialism with regard to the appointments. Judging from the fact that people are not satisfied, that there should be only.... (Time *bell rings*)... a body of the Institute for making appointments, as Government is giving so much money. Government should make a condition in the rules that appointments should be through the U.P.S.C. Something is radically wrong and I hope, by the time the next report is presented—which should be very soon after the financial year is over—that most of the grounds for complaint will be removed and the Institute will gain praise from all concerned. Thank you.

MR. DEPUTY CHAIRMAN: Motion moved:

"That the Second Annual Report of the All-India Institute of Medical Sciences, New Delhi, for the period 1st August, 1957 to 31st March, 1958, laid on the Table of the Rajya Sabha on the 24th November, 1958, be taken into consideration."

Shri Sapru.

SHRI P. N. SAPRU (Uttar Pradesh): Mr. Deputy Chairman, I think, Dr. Seeta Parmanand has spoken with a wealth of detail which I cannot command on this matter. There are certain aspects, however, of this report to which I should like to invite your attention.

MR. DEPUTY CHAIRMAN: Just a minute. Is there anybody else who wants to speak on this motion? (After a pause) Dr. Barlingay and Dr. Subba Rao—then fifteen to twenty minutes each.

SHRI P. N. SAPRU: I shall be within time, Sir.

I have gone through this report, and what I have felt about it is that it lacks what we in English call character. There is nothing striking about

this report, it does not give us information about the institution. It does not give us enough information about the way the institution is being run, about the ideals that inspire the teachers or professors who run this institution, and about the goal that they have in view. I think some such paragraphs or some such remarks in a report of this character are desirable.

This institution was suggested, as you will remember, Sir, by the Health Survey and Development Committee, popularly known as the Bhore Committee, of which I had the honour to be a member, and we conceived this institution to be something different from an ordinary medical institution. It was not intended to add to the number of medical colleges that we have in this country. It was really to be in the nature of a teachers' college. It was to be an institution which would provide the highest training in all branches of medicine and surgery in our country. It was to be an institution which would make it unnecessary for our young men and our young women to go for post-graduate training to British or American or German or French universities. If I may be permitted to quote from the Bhore Committee, I would invite your attention to what their conception of this institution was. In volume II, page 431, they say:

"The objects of the institution should be to bring together in one place educational facilities of the highest order for the training of all the more important types of health personnel and to emphasise the close inter-relation existing between the different branches of professional education in the field of health; to promote research of the highest type in all the branches of study for which this Institute will be responsible; to co-ordinate training and research; to provide postgraduate training of an advanced character"—

not only of an ordinary character but of an advanced character—

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"in an atmosphere which will foster a true scientific outlook and a spirit of initiative, and to inspire all persons who undergo training, under-graduate or post-graduate, with the loftiest ideals of the profession to which they belong, and to promote in them a community of outlook and a high degree of culture in order that they may become active apostles of the progressive spirit in whatever field they may be called upon to serve, whether it be teaching, research, general health work or administration."

Now, Sir, we are entitled, in considering a report of this character, to enquire whether, and if so to what extent, the objectives which the Bhore Committee had in recommending the establishment of this Institute and which the Parliament had in implementing that recommendation by passing a special Act for the constitution of this Institute, have been kept in view. If you read this report, you will hardly get an idea of the purpose for which this institution was intended. A disappointing feature of the progress so far made is that it has functioned more or less as an institution for the training of under-graduate students. It is precisely this thing that the Bhore Committee did not want it to be for. It did not want to be another medical college. But what I note is that the Institute has not been able to start post-graduate instruction in most subjects. The reason given is that of lack of accommodation and hospital facilities.

Another distressing feature of the report is that post-graduate teaching has to be combined with under-graduate teaching. I think we attach importance to the separation of undergraduate teaching from post-graduate teaching. It was intended that there should be special laboratories for postgraduate students. Unfortunately the report says that post-graduate teaching laboratories had to be shared with under-graduate teaching laboratories.

Now, it was not necessary for us to have another medical college. With

the amount of Rs. 11 crores, we could have established a number of other medical colleges, we could have established even post-graduate courses in those colleges. We have the M.Sc. degrees and post-graduate diplomas in the post-graduate departments of our universities which have medical faculties. This was to be a particular type of institution, and I think it is a legitimate criticism to offer that the purpose which was sought to be achieved by the establishment of this institution is being lost sight of, is not being kept in view.

Then, it is disappointing to note that for the post-graduate teaching, there are no students from States other than the Delhi State, in the institution. It has been practically a Delhi college, but it was intended that there would be students and there would be teachers of medicine who would come to this institution from all parts of this country. Apparently that is not the case, because what we are told is that the post-graduate students are mainly employees of the Institute. That is not saving very much for the way in which the institution is at present being run.

Then, we have been told that there are a number of subjects in which post-graduate, instruction is being given. Those subjects are anatomy, physiology, pharmacology, pathology, bacteriology, orthopaedics, etc. It has also been said that some research has been done in the departments of anatomy, physiology, bio-chemistry and orthopaedic surgery. Research is a term which is very much misused in this country. Every university teacher or every university professor claims to be a researcher in this country. I do not know what the quality of their research is. Personally I am not satisfied with the quality of research that is turned out by our teachers and our professors in many of our institutions. What we would have liked in this Report is—and I hope when the Report comes to be presented next year this fact will be borne in mind—I



repeat, some indication of the character of the research that was done in the institutions, if any research papers have been published by the teachers or the students who are supposed to be doing research in these institutions, what has been the reception that these papers or these thesis or these books have had in medical journals of standing and reputation in the world outside India. I think that our reputation for medical scholarship cannot be built up in a sound way unless our research standards equal those of European and other western countries. I do not say that two years is a good enough time for all these things to be done. But we should have liked to have some indication of the progress made in this direction. It is possible for any one who is working in the Institute, who is doing research, to give some information. But we are entitled to know something more than that. We are entitled to know what is your research, how has that research been received by those who are competent to judge the value of that research, how far is that research of value to the community generally.

Mr. Deputy Chairman, there has been addition to the library and it is heartening to note that residential quarters for the employees of the Institute have been built and that the nurses' home is also ready for occupation. We have in this Institute, I think, a Nursing College, and I would like the hon. Minister when he replies, to give us an indication of the appeal which this Nursing College has made for the women of this country. We want some nurses of the highest professional standards. But I do not know whether we are getting the right type of material in this institution. Then the Report frankly admits that the construction programme has been painfully slow and for this reason, the post-graduate students admitted to the various departments have yet to be restricted. I think an endeavour should be made to go ahead with this construction programme because the Institute should be made to function

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in a way in which it was expected to function and as early as possible.

I would like to say one or two words about the teaching staff. The Bhore Committee was of the view that we should recruit our teachers from the world market and that we should have the highest type of teachers in our institutions. Now, a man may be an excellent physician; he may be an excellent working surgeon. But that does not make him, in my view, an excellent professor of medicine or surgery. From an academic point of view, we want doctors who are devoted to the science of medicine as a science. The Bhore Committee hoped that this would be something like the Medical Faculty of the John Hopkins University. The Medical Faculty of the John Hopkins University revolutionised the science of medicine—the method of teaching of medicine—in the United States. It was hoped that this Institute would do something of that kind. Therefore, it is desirable that the professors who teach in this Institute should be of the highest standard possible. I would like to say that it was for this reason that we suggested that the appointments should not be made by the Union Public Service Commission. We suggested it because we wanted this Institute to be an autonomous body and we wanted it to develop into a sort of Inns Court—if I may refer to the counter-part of a medical college in the legal profession. We would like it to be an institution which would co-opt. teachers and would regulate its own standards and would make its own appointments. We wanted it to function as a truly autonomous institution. I cannot, therefore, share as a member of the Bhore Committee the view of Dr. Mrs. **Par-manand** that the Union Public Service Commission, for which I have a very high regard, should be consulted in regard to appointments to this institution. At the same time, it is essential to ensure that in recruiting our teachers, the highest importance is attached to quality and merit because we want teachers of outstanding ability for this Institute.

[Shri P. N. Sapru.] Thank

you very much.

DR. A. SUBBA RAO (Kerala): Mr. Deputy Chairman, I find that Dr. Seeta Parmanand has put forward her arguments very nicely. Of course, I do not profess to have that amount of knowledge and information which she has got. I will, therefore, deal only with what I feel about that Institute.

Sir, the main objects of this Institute, when the Act was introduced, were said to be, a post-graduate study and achievement of a high standard in medical education and research. Great emphasis was laid on post-graduate studies and specialisation. Now, Sir, if we see the Report, we will find that in the matter of post-graduate education the Institute has not at all been able to do any justice to the objects for which it had been set up. Even after a period of two years we are having only 23 post-graduates and out of that number there is hardly anybody from outside the Institute. They are mainly the employees of the Institute itself. Why is it that we are unable to attract students from all over the country? What is it that is lacking? I am sure that there are many graduates who would like to undergo post-graduate training, and in fact, Sir, the main object of the Institute was to provide for post-graduate studies. Have all the facilities that are necessary in this connection been provided or not? Sir, a large amount of money has been allotted to that Institute. Therefore it should necessarily be able to attract post-graduate students. Why is it that it has not been able to do that so far? This question has, therefore, got to be looked into. I want to know whether enough facilities have been provided to the post-graduate students who are undergoing that training. I cannot say that the professors who are appointed there are inefficient. But I would certainly like to know whether they have enough qualifications for teaching those postgraduate students.

In this connection, Sir, I may point out that there were certain questions in the other House, but the replies given by the Health Minister did not prove that those professors had the requisite post-graduate degrees. How can you expect those people to be able to impart training to the post-graduate students, if they have no requisite qualifications themselves? Well, I do not know it. I might have been misinformed. But this is the information that I gathered from the replies to questions.

SHRI P. N. SAPRU: Even the history of medicine on which great emphasis was laid by the Committee has not been established as yet.

DR. A. SUBBA RAO: Let us now see the coaching facilities for the postgraduate students. What are the laboratory facilities provided for them? They are very inadequate. A postgraduate student has to share the laboratory with under-graduates. How can you expect such post-graduate students to be quite efficient, if that is the condition there? Then, Sir, you had to restrict certain admissions. You cannot admit post-graduate students to the clinical side. You had to restrict students getting into the postgraduate course. You do not have proper facilities for those students who are already undergoing this postgraduate training. Well, that is not a nice thing to continue.

Then, Sir, the second objective is high standard of medical education. We were told that there will be a revolutionary change in the curriculum, which will facilitate the progressive realisation of a steadied development of improved methods of medical education. As far as I can understand and as far as my information goes, I think the present mode of education for the under-graduates in the institution is much better than the education given in other institutions. It might be wrong, but after all my education was in the integrated School of Indian Medicine. We have studied, however,

the same books and other things. That compartmental system of studying only anatomy, studying only physiology which, of course, in the general practice has its value, has not got too much of a value. I think this led rather to a student mugging up those subjects. I know about these examinations. We at times mug up only one or two chapters and if we are lucky and if questions on those chapters come, we pass. Here, there is reorientation of education and I think that that is definitely a very good thing. Let us, Sir, look at the facilities I think they do not have enough library facilities. They do not have a lecture hall, at least the main building has not yet been completed yet. They have, of course, got books. You cannot by any stretch of imagination say that there books are too many but even in regard to the books that they have got, the space is very cramped up. The whole thing is in a small room. Therefore, the main difficulty is lack of accommodation as we find mentioned in the Report. Construction has lagged behind.

Coming to the research side, I find that they are doing some good work, especially in the pharmacology department. There they are having certain researches done on certain indigenous drugs. I think the Health Minister referred, in his speech at the Indian Medical Council of Research, to the researches being done on Jatamamari and also to the research done in Sarpagandba, the serpentina group and other things. I would like more and more researches to be undertaken in regard to more and more indigenous drugs. As it is, it is unfortunate that we are not made aware of the achievements in the various drug research institutes and hence I would request that more and more publicity should be given for successful drug research. Even here, Sir, according to me, the facilities for research workers are not enough. I here beg to differ from Dr. Seeta Parmanand when she said that air-conditioning was not necessary.

Of course, it is very costly but, at the same time, I would think that for certain researches.

DR. SHRIMATI SEETA PARMANAND:  
That is meant for the entire hospital. That is what I said.

DR. A. SUBBA RAO: I think they are doing fundamental physiological researches on certain monkeys, study of the hypothalamic centres in the brain. I think that during the very hot season, specially from April and May onwards, if they are allowed to work in the room temperature, I do not think that our experiments will be so successful. Again for the research people, for those who do research, I don't think the present climate—you might be of opinion that the whole site of the institute should have been somewhere else—Delhi's climate, will be so conducive to the research work which requires a certain amount of comforts and other facilities.

SHRI H. P. SAKSENA (Uttar Pradesh):  
Can you say anything about the treatment of cancer in the research section which you are dealing with now?

SHRI D. P. KARMARKAR: He is speaking on the report, not on cancer,

DR. A. SUBBA RAO: I have to high-light specially with regard to the appointment of staff. When we bring this matter here it must not be misunderstood that we are alleging that you are partial or anything, but why give place for that type of allegation? Why should you not have certain regulations and adhere to them? According to my information many of the professors who have been appointed there do not possess requisite post-graduate qualifications.

DR. W. S. BARLING AY: What are the regulations that are being violated according to you?

DR. A. SUBBA RAO: I don't know. As a matter of fact, when you are expected to post a professor for a post-graduate study, we expect that he should possess certain post-graduate qualifications. My information is that those who are appointed there do not possess post-graduate qualifications. If I am wrong, I may be corrected.

DR. W. S. BARLINGAY: You are surely wrong.

DR. A. SUBBA RAO: I don't know. That is the information I gathered even according to some replies given by the Health Minister, perhaps in February. I beg to be corrected.

Again, with regard to this, I was told—I might be wrong—that a professor for surgery was appointed—of course I have great regard for that gentleman—he was an able administrator in Madras, I was told so, in the Madras Medical Department, but to appoint him as a professor, will it be all right? You have only that qualification. I am not saying that he should not have been appointed. This gives room in certain quarters to say that the appointments made there are on the basis of favouritism. Those things have to be gone into. But I am not very sure about my ground. I am just bringing it forward just for my information only.

With regard to the actual building of the Institute, I think, when all is said and done, we don't have a proper plan of it at all. No proper priority has been given. So many residential quarters have been constructed but the main building was not given equal importance. Why is it so? I was told that the Nursing Home and the Nursing College are ready. As far as my information goes, we have **not** yet started nursing training but

we have already started cluneal training and the students are there who have passed their pre-clinical and who are under-going clinical studies. The hospitals were absolutely necessary. Why was it not thought that the hospital buildings should have priority in construction? I entirely agree with Dr. Parmanand who said that more beds, even as an interim arrangement, could have been allotted in the Safdarjung Hospital. What prevented us? After all only some technical objections have to be met. That institute is there and we have to look after it very well. What prevents us from allotting more beds? Is it enough to have 60 beds for 42 students and do you expect anything out of it? I was told that 100 beds have been sanctioned in the Nursing Hostel or so. Well and good, but already from January till now the time has been lost and we could have allotted more beds. Even with regard to construction, I was told that some of these residential quarters have been rented out to Government servants. That means that the residential quarters were not necessary at that time. Those funds could have been diverted towards completing the Northern Wing which has not yet been completed. The target date was December 1957 and it is not yet complete. There is something to be desired. Of course, with all these limitations and difficulties I think the team is doing their level best and the only thing is, the managing body has to be more careful and they will have to carry on their administration still more nicely to justify the main objects for which this Institute has been established.

DR. W. S. BARLINGAY: Mr. Deputy Chairman, I have read the second annual report of the All India Institute of Medical Sciences with some amount of care and I have also had an occasion personally to visit the institution. I have taken some inte-

rest in the development of this institution because I have got a natural interest in these medical matters and I would say that I would be the last person to say anything which would tend to hinder the progress of this institution, the development of this institution in a proper way. But Sir, there are certain matters to which I must draw the attention of the hon. Minister of Health, not in a spirit of censure but in a constructive spirit.

I would immediately draw his attention to paragraph 3 (vi) to which attention has already been drawn by several Members in this House.

THE VICE-CHAIRMAN (SHRI P. N. SAPRU) in the Chair.

It is very clearly stated and frankly admitted by the Director of the Institute that although facilities for lectures and laboratory work for the students were adequate, the same cannot unfortunately be said about hospital facilities. I am glad that he is very very frank about it. But then in the very next sentence, he says:

"In the absence of Institute's Hospital, the Government of India had very kindly allotted sixty beds (30 medical and 30 surgical) in the Safdarjang Hospital in February, 1956, for the teaching of 42 students."

Now, unless I have misunderstood the Report, it is obvious that the facilities afforded, so far as the hospital facilities are concerned, are almost ridiculous. I believe that according to the standards laid down by the Indian Medical Council, against every one student you ought to have at least 10 beds, if I am not wrong. So it follows that for the teaching of 42 students you would require about 420 beds. Now compare these 60 beds with 420 beds. The whole thing appears ridiculous unless I have misunderstood the whole Report. In one of

I the reports which I have submitted to the hon. Minister, I have said that there are several governmental institutions as also private institutions here. Take for instance, Sir Ganga-ram Hospital. I do not see why the facilities afforded, for instance, in the Sir Gangaram Hospital should not be made available to these students. Why put a sort of taboo on these private institutions? After all, there are extremely good surgeons connected with hospitals of that sort. There is Sir Gangaram Hospital and there are other hospitals also in Delhi which I have visited. I do not see why the medical experience gained in the various medical institutions should not be made available to these students of the All-India Institute of Medical Sciences. Sir, it seems to me that the only thing that bars such a thing is something psychological. There is nothing logical about it. I feel that the persons connected with the All-India Institute of Medical Sciences should begin to think about these matters in a new spirit, in a new way and get rid of their traditional prejudices against private institutions. I feel that if they got rid of their traditional prejudices, the medical facilities afforded in Delhi alone would be found to be tremendous, and I do not see any reason why these facilities should not be afforded to the students. Actually so much medical experience is going to waste. It is all being wasted. Why should not that be utilised? Sir, that is first point which I wanted to make.

The second point that I wish to make with regard to the development of this Institute is this. It was pointed out long ago in the Bhole Committee Report, long before we got our independence, and if I am right, Sir, you were one of the members of the Bhole Committee.

THE VICE-CHAIRMAN (SHRI P. N. SAPRU): Yes.

DR. W. S. BARLINGAY: And they suggested in their report that in every

LDr. W. S. Barlingay.] such institution there ought to be a Chair of the History of Medicine. And I would like to quote . . .

THE VICE-CHAIRMAN (SHRI P. N. SAPRU) : There is a very educative passage there.

DR. W. S. BARLINGAY: Yes, and if the hon. Minister . . .

SHRI D. P. KARMARKAR: Yes, you may read it, there is an eloquent passage there.

THE VICE-CHAIRMAN (SHRI P. N. SAPRU) : There is a very beautiful passage. I wanted to read it out, but I could not get the time.

DR. W. S. BARLINGAY: Yes, it is on page 432 in Chapter XX of volume 2 of the Health Survey and Development Committee's Report. They say:

"We suggest that in the beginning" Please mark the words, it is for the beginning and not for something at the end.

"We suggest that in the beginning, the Institute should aim at providing only medical training in all branches and also the training of nurses. The Institute must, therefore, have as an integral part of it, a medical college with its teaching hospitals and laboratories as well as a college to provide the highest type of nursing education. Later on, provision should be made for the training of all higher types of health workers. We have in mind particularly dental education."

And then they say:

"We believe that the contribution which the proposed Institute can make to promote the cultural value of medical education will be greatly enhanced by the provision of a

Chair of the History of [JM.ecu.edu.au](http://JM.ecu.edu.au). The humanising influence of a study of the history of medicine has been well described by Prof. Henry E. Sigerist in a recent publication."

And this is what Prof. Sigerist said:

"Instruction in medical history if properly conducted could greatly contribute to the training of an educated physician. It would teach the student the history of his own country and also the history of the world, with a bias on medicine, that would bring the subject much closer to him. It would teach him to look at modern medicine from the perspective of history and to see it in all its economic, social, religious and philosophic implications, as the result of a long development, as a dynamic process. He would soon find that scientific medicine has a philosophy also. We too look at the human body as a microcosm in the midst of the macrocosm."

Well, I do not want to go on reading this further. It shows how important it is to establish, especially in an institute of this type which is meant primarily, as you said a moment ago, for doing the highest kind of research in medicine, a Chair for the History of Medicine and how extremely important it is that we should lose no time in doing it.

Sir, I did raise this point pointedly when the Bill regarding this Institute came before this House. At that time I had drawn the attention of the Health Minister, Rajkumari Amr Kaur, to the fact that a Chair of History of Medicine was absolutely essential in this Institute. And she very readily promised—I could read out that promise, Sir, but that would only be a waste of time now; she in so many words specifically made the promise on the floor of the House—that she would lose no time in having a Chair of the History of Medicine in this Institute. I would therefore urge that she should

Minister will see to it that this sort of a Chair is instituted in this Institute as soon as practicable. That is *my second point*.

The third point that I wish to make is this. If I may say so with great respect to the hon. Minister, every hon. Member of this House including myself has been greatly disappointed at the policy that has been and is being followed by the Government with regard to the development of homoeopathy and Ayurved. I must make that quite plain in spite of the fact that I know that the hon. Minister personally has got a great deal of sympathy for both these systems. But what has been done in a practical way? This point was also raised by me at the time the Bill in connection with this Institute came up before this House. Rajkumari Amrit Kaur, who was then the Minister of Health conceded the point in so many words. I would read out only a sentence or two from the speech of Rajkumari Amrit Kaur which she made on that occasion. This is what she said:

"I say, you can have not only drug research but fundamental research in Ayurveda, Unani and Homoeopathy in this Institute but that must come later on as it develops. There is nothing to ban it. I have already said that one of the things that I am going to do—let the College begin—is to have a Chair for the History of Medicine . . .

This she has said in so many words—

"... which will include the history of Ayurveda so that our students may understand what Ayurveda stood for, what it was, what it gave in the past, what it might give in the future, or indeed should give. The same with Unani. As I said, there will be no objection to this whatever later on when the Institute has developed. After all, a teaching institution cannot develop overnight. It takes at least five years to send our undergraduates out, it will take seven years to send

our postgraduate students out. I also said that when the post-graduate studies in Jamnagar develop, there will be no objection whatever to have fundamental research, and even a Professor for Ayurveda to teach our students the therapeutics of Ayurveda and Unani in this Institution as well."

This was a very definite promise made by the hon. Minister. I want to draw the pointed attention of the hon. Minister to this very definite promise made by his predecessor with regard to the development of Unani, Ayurveda and Homoeopathy. I am one of those who believe in truth and truth alone. I am not fond of Homoeopathy, or Ayurveda because it has come to us through tradition or because some people say or have a predilection in favour of Ayurveda. It is not that. I am one of those who say that if there is no truth in these systems, then the sooner we get rid of these systems the better it is for us, whether it is Ayurveda, or whether it has come to us traditionally or not That does **not** matter at all. The point is that if there is truth in Ayurveda, then we should develop it. It is very unfortunate—and I say this quite frankly and I feel in my heart of hearts, I have expressed it several times—that our Allopathic friends unfortunately have not got a receptive mind with regard to Homoeopathy and Ayurveda. I say this on the floor of this House and I have said this a hundred times. I am not afraid of saying this because this is in the interest of truth and truth alone. I am not against Allopathy or any other 'pathy'; wherever there is truth, I am for it and there is no objection whatever, it seems to me, for developing the Ayurvedic and Homoeopathic sciences in this institution in a proper scientific way. Why should these sciences of Homoeopathy and Ayurved be shut out from this institution? This is the third point I wanted to make.

There is one other thing which I should like to say with regard to this institution and that is in **respect** of

[Dr. W. S. Barlingay.]

the building. I have gone round this institution as carefully as I could and I find that so far as the planning of this building is concerned, it appears to me to be somewhat defective. I would pointedly draw the attention of the hon. Minister to one or two facts. Formerly, most of these buildings were built in such a manner that air-conditioning had to be a necessary part of it. For instance, the-roofs, as I found them, are low and in these rooms where the roofs are low, unless you have air-conditioning I suppose it will be very difficult to work but now I am told on good authority that all this is going to be changed, that all these air-conditioning structures that are there already are going to be removed. If that is so, what is going to happen there? I really do not know. All this means so much waste of money. I now find that in some of the rooms they have put in fans when actually there is no room for putting fans there. I am really surprised that that sort of planning should go on under our very eyes. At the same time, I hold that intellectual research does require some amount of comfort. For instance, in the Supreme Court or even here, you cannot go on working if the atmosphere is not congenial; it does seem, therefore, that it is necessary to give the research workers all the necessary facilities so that their bodies and their brains may function in a proper manner.

DR. SHRIMATI SEETA PARMA-NAND: Is the whole hospital building of 600 beds to be air-conditioned?

DR. W. S. BARLINGAY: I am not at all either in favour of air-conditioning or against it. I say that once you have planned for air-conditioning, then there is no reason on earth why the same thing should not go on. There is no social crime in being in favour of air-conditioning if you for instance air-condition your house or your office. As a matter of fact, the air-conditioning begins the moment you have built a house. As soon as

you build a house, you live not in a verandah or beneath the sky and there is air-conditioning in a way.

SHRI B. K. P. SINHA (Bihar): May I know what facilities the 18th century and the 19th century scientists who laid the basis of modern science had? May I know what facilities Sir J. C. Bose had and Sir C. V. Raman had in the beginning of his career?

DR. W. S. BARLINGAY: From what my hon. friend says, Sir, does it really follow that there should be no air-conditioning, that just because formerly there were no good latrines, no flush latrines when you and I were children, we should not have flush latrines now? I think that sort of argument would be absolutely absurd. After all, the world is developing and growing every day and facilities which were not available to Emperors formerly are being now made available to us today and there is no reason why they should not be made available to us but my point was different.

THE VICE-CHAIRMAN (SHRI P. N. SAPRU) : I do not wish to interfere but we have to close the debate at 5. Mr. Karmarkar and Dr. Parmanand will have to reply. The hon. Member has already exceeded his time.

DR. W. S. BARLINGAY: I shall take only one or two minutes.

SHRI D. P. KARMARKAR: What time do you propose to give me, Sir?

THE VICE-CHAIRMAN (SHRI P. N. SAPRU): Twenty minutes.

DR. SHRIMATI SEETA PARMANAND: I will take about ten minutes at the most.

DR. W. S. BARLINGAY: I will not waste more of your time. I will sit down in a minute or two.

I was not pleading for air-conditioning. What I was saying was that once you have begun air-conditioning, please do not stop it in the middle and waste the time, energy and money of the Government.



THE VICE-CHAIRMAN (SHRI P. N. SAPRU) : If you can give air-conditioned Houses to your Secretaries, I do not see any reason why you should not give some air-conditioning to your patients.

SHRI D. P. KARMARKAR: That is the point, Sir.

DR. W. S. BARLINGAY: Exactly, Sir, but that is another point. What I say is this: If you do not want any air-conditioning, you need not have planned for air-conditioning at all. That is all my point. I am not anxious that there should be air-conditioning. Of course, I do not mind it because I feel, Sir, as you very rightly pointed out a moment ago, if you can have air-conditioning for the patients, where is the harm in that?

I would add only one point and then sit down.

SHRI BHUPESH GUPTA (Wesl Bengal): Dr. Barlingay, there is only one difficulty. If you start having air-condidoning for the patients, ther foreign exchange will not be available for air-conditioning for the rich men.

DR. W. S. BARLINGAY: Well, thai is with regard to 'yoga'- When I visited this institution, I was very happy to find that some experiments of a physio-logical nature were being made wit? regard to the 'yogte' system. I was very very happy to find that, because tha means that people in the institutioi and those who are responsible for research in the institution are trying to have a broader mind about these matters. I was really very glad to see that and I do feel that they will bring to bear this broader mind not merely on the 'yogic' system, but also on other systems of medicine such as Ayurveda and Homoeopathy. Thank you very much.

SHRI D. P. KARMARKAR: Mr. Vice-Chairman, I am deeply appreciat've of the observations made by our distinguished colleagues who preceded me. To take in the order from the last,

because apart from the observations that you made, I was rather impressed hy the points that Dr. Barlingay made, and perhaps the relevance of those observations also lent strength on account of the fact that he has based his inference not only on the report circulated to the House but also on his own observations. He has taken care to go round the Institute and tried to understand what the work is like. He appears to have also devoted a little time to go into the details and, therefore, naturally under the circumstances his observations approached realism. If I might say so, without offending my other colleagues, they are imbued with a sense of purpose and realism. The first point that he made was about the hospital beds. In fact, nobody is happy about the inadequacy of beds to any teaching institution. Now, the earlier idea was for this Institute to base their operation on the Safdar-jang hospital. Earlier they thought of the Irwin hospital. Then, they thought of the Safdarjang hospital. Then, when the contributory health scheme came into the picture, in 1954 I think, they had to give another thought to the subject and they decided to have a hospital of their own— 650 bedded hospital, naturally which could be developed later on to suit their requirements. But unhappily for us in Delhi we have no adequate hospital arrangements and in spite of the fact that we are doing our best in between the Government of India and the Delhi administration and the private hospitals, I must confess that the hospital accommodation in Delhi is inadequate, to say the least. And if anyone were to casually visit anyone of our hospitals, run either by the Delhi administration or the private ones or the Government of India's, he will find them flooded with out patients and inpatients . . .

THE VICE-CHAIRMAN (SHRI P. N. SAPRU): And the standard of cleanliness is not good.

SHRI D. P. KARMARKAR: This is a reflection on Delhi city and I want to be spared of it. But about the

[Shri D. P. Karmarkar.] hospitals also, the crowds have become so great that it sometimes breaks the heart, if only to say 'yes' because the accommodation is insufficient. It made me very much depressed when I visited the Lady Hardinge hospital, thanks to the inadequacy of maternity beds in Delhi. The misery of the doctors is, if they say 'no', they are refusing aid, even though to some little extent, to a maternity patient running there for help. If they say 'yes', then the only place where they can accommodate them are the verandahs and the space on the ground below two cots and things like that. I do hope that now that the Corporation has come into existence, these things will be better and the pressure on the hospitals will be less and less.

With regard to these beds also, the whole difficulty is that we could not, for some time to come, muster up a sufficient number of beds for the All-India Medical Sciences Institute and, as I said, also for the treatment of the common patient. Therefore, we came to a sort of understanding. They were moderate in their demands which we were able to fulfil. As a matter of fact, it was a question of give and take. Ultimately, when we could not have adequate supply of beds, we had to be content with the arrangement that could be made. Therefore, we spared the beds. For instance, on the 20th January, 1958 the Director of the All-India Institute of Medical Sciences intimated: "Although for the present, the clinical teaching could be carried on with sixty beds promised to be allotted in the Safdarjang hospital ..." That is what he said, because no more beds were available. The number of beds required for the purpose year to year based on a minimum of two beds per student was as follows:

1958: 100 beds for 50 students admitted in 1956.

1959: 242 beds for 121 students  
admitted in 1956-57.

1960: 342 beds for 171 students  
admitted in 1956, 1957 and 1958.

Now, both the Government and the Institute took a realistic view of the situation and we had to make something out of the available resources. During 1958 what they asked for was additional 100 beds. Now, I find, for instance, again on the question of accommodation, the following beds have been placed at the disposal of the Institute for the clinical teaching of students: Orthopaedics—70 beds; Surgical—30 beds; Medical—30 beds. In the case of Orthopaedics, they have appointed a Professor of Orthopaedics as the Surgeon-in-charge of Orthopaedics and he has 70 beds under him. Now, the other beds, as I mentioned, were made available in January 1958, sixty beds as they required. Then, the Medical Consultant in-charge, Colonel M. S. Rao, who has been taken on for a couple of years as a Professor also; he has about 42 beds. Now, in addition, we decided to make 53 more beds available to the Institute. Well, we have tried to make the best of a bad job. There is no gainsaying the fact that the Institute requires more beds. And pending the putting up of the hospital full-fledged, between us we arranged—the Institute requested and the Government readily agreed—to make straightway 100 beds available to them of their own, apart from these beds in the Safdarjang. They are building a temporary hospital. They are accommodating a hospital in the building in the space that is already available. That is to say, they are utilising the teaching portion of a part of the building built for the nursing college. For the purpose of this temporary, improvised hospital, 100 beds will be there. We have also agreed that during the next year we shall make resources available to them for another 100 beds. So, they will have about 250 beds of their own, under their direct control and we shall continue to help them from the Safdarjang hospital to

the best possible extent that we can. It is nobody's desire that we should starve the Institute of these beds. Ultimately as an institution dealing with post-graduate studies, it should be very efficient, first class in its character. But in the meantime this is the arrangement that has been made and I am happy to say that the Institute is doing its best even with these limited resources. They appreciate the fact that the resources are limited. We cannot work wonders in a day. Instead of postponing the Institute till it could have a full-fledged hospital of its own, we have made arrangements in the Safdarjang hospital. Till now it has proceeded like that and as I indicated, before the next year is over, they will have about 200 beds of their own, in addition to whatever we can make available from the Safdarjang hospital.

The second point that Dr. Barlingay made was about utilising private institutions; it makes for more complications, sending students to distant places, some students here and some students there. I feel that the best arrangement they could devise in the circumstances was to work in close co-operation with the hospital that is next door, that is, the Safdarjang hospital. Then, on the plan of the building Dr. Barlingay had to say something. The whole difficulty was that owing to extraneous causes beyond their control—rising costs, increase in specification, increase in demand by experts,—for an institution of this kind the budgeted amount was not sufficient for the whole scheme. Last year, as you know, was a bad year for us, both in internal finances and external finances. Therefore, though it was our hope, though the institution hoped and Government hoped that we would be able to keep up to schedule, it was not possible to do so, and it was not possible for us to think in terms of allotting sufficient finances in view of the then existing conditions. Now it has been possible for the Finance Ministry to have them assured on their site a permanent hospital with about

250 beds in the first instance. I am saying in the first instance, because the hospital they are going to build on that will be so devised—the first two storeys—as to serve the beginnings of a bigger hospital to come. The Finance Ministry recently kindly made available Rs. 40 lakhs in addition to the resources that are already there, to the Institute, and the Institute is making the best possible effort to have that hospital also come into being as early as possible.

Now, regarding the planning about the residential quarters and all that, for residential quarters the C.P.W.D. had a plan *pro forma*. They knew how to build houses.

With regard to the main hospital and clinical blocks and other things, what happened was that the architects came into the picture. They asked for indents and for maps from the architects to be put up. They put up a prize competition. They accepted the plans after the architects' plans had been given for the hospital and the clinical blocks. Then the C.P.W.D. came in, the estimates came in, the sanctions had to arrive. That is how, because building residential quarters was a fairly simple matter, it went straight ahead; and because this matter necessarily required time, therefore it took time. In fact the architects' plan for the hospital proper has been recently in our hands. Now it will require processing. That is how, oddly enough, we found the quarters first and then the other buildings followed. I do not think there has been any error in the planning of it.

Now, regarding air-conditioning also, I do not know, after the long discussion and after the exchange of views on the floor of the House, whether my friend Dr. Barlingay is of the view that air-conditioning should be there or should not be there. I think for myself, what I gathered was that he thought that air-conditioning was good, because some comfort was necessary, and I think also that he did not only think that air-conditioning

[Shri D. P. Karmarkar.] was necessary for the hospitals, but I am quite sure he thinks that wherever possible air-conditioning should be there, because these days we do And comfort in that. New discoveries and new inventions are there to add to human comfort. When we, the representatives of the people, in the Houses of Parliament like this comfort, I do not see why a place like a hospital in Delhi, where at least the poor patients can find the same comfort as we find here, should not have it. I do not like to apply one standard here and another standard in a hospital, especially in a hospital much more than anywhere else. I do not mind if the offices are deprived of air-conditioning, but I think we should set up a high standard for our Hospitals. We go here and there, to Russia and China, and say that such and such things happen there. I do not see why in an egalitarian society we should not be given by insisting wherever it is possible, on deprivation of air-conditioning everywhere else by giving it to the hospitals first. Ultimately the whole of our structure depends on the health of the people of our country.

Sir, there was one point I am reminded about—with all respect to any professor who may be in the House. A professor chose to be his own architect and he got a new nice building made, and it struck his fancy that he would sit in meditation on the first floor of the house and not on the ground floor. But he forgot only one detail, and that detail was the staircase to the first floor. Ultimately when somebody pointed out to him "how will you go up?", he said "it never struck me; I will have a ladder outside the house leading to the first floor". I can assure my friend, Dr. Barlingay, that this aspect of planning was not something of that kind. They did want to have air-conditioning. But we found suddenly that owing to difficulties of foreign exchange, air-conditioning plants could [ not be ordered. We could not afford ]

either the money or the external finances to order air-conditioning. So the idea of air-conditioning . . .

SHRI BHUPESH GUPTA: The hon. Health Minister should know that some licences have been granted in favour of certain very big people in the country to import air-conditioning plants. He should prevent it. We shall be supporting him.

SHRI D. P. KARMARKAR: I think my hon. friend knows that the observations that he has made are not exactly relevant to the subject under consideration, namely the Second Annual Report of the All-India Institute of Medical Sciences. I was saying that because we could not afford in terms of money and because we could not 'afford in terms of external foreign exchange, we had to postpone the thing. Not that it is dropped.

SHRI BHUPESH GUPTA: I dispute that. Hospitals have been deprived . . .

SHRI D. P. KARMARKAR: I can stand speeches, but I cannot stand running interruptions when I am speaking.

SHRI BHUPESH GUPTA: Then you sit down. I will tell you.

SHRI D. P. KARMARKAR: I cannot sit down because my time is up, whereas there is infinity of time for my friend. My time is limited to fifteen minutes.

Coming back to the point, what we have done is we have simply postponed the idea of air-conditioning to a little better time. In the meantime, my friend Dr. Barlingay knows what Delhi is like in summer, in mid-summer, in late summer, in early summer. Therefore, in order to save expense, because these buildings were going to be air-conditioned, to save a little in the volume of space, they shortened by one or two feet the height of the rooms. Therefore, if there were absolutely no fans at all,

those rooms would be intolerable for occupation. And hence this surprising intrusion of the fans at a place pending air-conditioning.

DR. W. S. BARLINGAY: The fans will begin to strike your head.

SHRI D. P. KARMARKAR: I think he should take care when he goes against the fans. That is a matter only for his own decision, and I do not want to interfere with his fundamental right to hurt himself against a fan. That is not my responsibility. Now, there were two ways. One was to make the roof go up by two feet. Obviously that was not possible. Therefore, the second alternative was to bring a little fresh air into the rooms and put up the fans there. The fans are not permanent fixtures. They will run away as soon as air-conditioning comes. Anyway, I must congratulate Dr. Barlingay, and I hope he will be satisfied with the explanation. Only I hope that he will take greater measures for safety when he goes into buildings of this kind.

Then, I think he took a very good opportunity of bringing in our policy with regard to indigenous medicines, Yoga and homoeopathy. I am very happy to say that I entirely agree with his point of view that it is not for some 'pathy' that he fights for or that anyone fights for. I always give myself the pleasure of saying that really it is not the 'pathy', it is not the system, it is not the man that fights for allopathy or homoeopathy or nature cure, that is important, but all these methods are for the man and they serve the essential purpose of saving man from disease or curing him of that. I am quite sure that my predecessor's assurance will be kept. I think that the Institute will take steps in terms of that assurance to devote as much attention also to researches in Ayurvedic system as in other systems. I have no doubt in my mind about that, because when an assurance is given in this House, it has to be kept. And my friend observed

that they are making researches in respect of Yogic exercises at the present moment.

Those were the principal points that my friend, Dr. Barlingay, had made.

Then, I must congratulate my friend Dr. Subba Rao on the sobriety of his presentation, because when my friend Dr. Barlingay asked him what were the reasons that were behind his observations, he said "I do not know". I must say that that was an honest confession. Frankness comes out from very few Members. I must say that speaking in the absence of facts, personal knowledge of facts, he made a very good presentation so far as his observations were concerned. Only not knowing the facts, he went wrong obviously. That is a small matter. Now as soon as he finds out what this post-graduate qualification is—he did not know—he stands absolutely excused. And it is no great glory on my side to bring facts to the House because I happened to possess those facts, and there is no great virtue in being able hundred per cent to refute what he and others have said regarding post-graduate qualifications. Though for myself I do not hold the view that a surgeon or a physician is competent in teaching by his experience, if I were at the head of an educational institution, be it in the medical field or any field, I would not insist upon a post-graduate qualification in order to teach post-graduate men. But still, we have to have some standard. The public may not accept a lower standard. A man will be a very good doctor and they will insist not only that he should be so, but also seem to be so. I will not tire out the House with all the post-graduate qualifications. I will read out only a few;

1. Dr. P. K. Duraiswami: M. S. (General Surgery), Madras, M.Ch. Orth. (Liverpool), Ph. D. Orth. (Liverpool), F.R.C.S. (England).

- [Shri D. P. Karmarkar.J  
2. Dr. B. K. Anand, M. D. (Punjab), R. F. Foundation fellowship in U.S.A.  
3. Dr. (Miss) L. W. Chacko. M.Sc. (Anatomy) (Madras). D. Phil. (Oxford).  
4. Dr. N. H. Keswani, F.R.C.P. Ph.D. (Minnesota) U.S.A.  
5. Dr. V. Ramalingaswami. M.D. D.Phil. (Oxford). Pathology.  
6. Dr. R. B. Arora, M.D. (Medicine), M.D. (Pharmacology).  
7. Dr. V. S. Waravdekar, M.S.c, Ph.D.

and so on and so forth. I find that there are some M.R.C.P., D.T.M. and H., qualified people also. It is possible that there might be a solitary case which I do not find in this list.

THE VICE-CHAIRMAN (SHRI P. N. SAPRU) : How, may I ask, are these superior to those who are holding appointments in other medical colleges, for instance, the King George's Medical College? We have two F.R.C.S's. there.

SHRI D. P. KARMARKAR: Sir, I do not like to join issue with you. It might as well be possible that some other institutions in India have some better teachers than this. I am not prepared to say that these are the best in the whole world, that these are the best-selected and picked. We have been able to pick up from the available resources. Our Selection Committee goes into the matter. Something was said about regionalism. I should say that I very strongly dissociate myself from regionalism. Allegations of partiality and allegations of regionalism were made. I think. Sir, it is the standard of the House that unless a Member has got a specific instance in mind of any case or cases that have happened about which he or she is absolutely convinced and on the facts of the case feels that there is a case for allegation, normally he or she does not make an allegation

of a loose character like 'I have heard', 'there are rumours', etc. Sir, there are many kinds of rumours. I know of a case where a husband who had married only once thought he had married more than once. He suffered from that. If anyone cared to ask him, he would say, "Well, gentlemen, if you had only asked me, I would have just told you that I am a monogamist, strict and simple" and things like that. It is no use depending upon rumours when one makes an observation in a responsible House on what is the report of a responsible institution. Only for satisfying the House, I thought I can point out the *bona fides* of the way in which these matters are dealt with. I would just like to read the names of the Committee so that they can judge for themselves whether the Institute has not done its best. Here, they have got the composition of the Selection Committee for Class I and Class II which are the higher posts:

1. Dr. A. L. Mudaliar, Vice-Chancellor of the Madras University.
2. Dr. Jivaraj Mehta, who has had a whole life-time experience as the Dean of the V. J. College in Bombay.
3. Dr. M. M. Gilder, Member of Parliament and an hon. colleague of this House.
4. Lt-Col. Jaswant Singh who happens to be the Director General of Health Services. He is the top-most man in the service of the Health Ministry.
5. Lt. Col. Amir Chand who has a distinguished record.
6. Dr. R. M. Kasliwal of Rajputana.
7. Dr. B. B. Dixit. He is a Director.

Now, I fail to see the reason for criticism. Maybe, anybody may be in the wrong once in a while. If this Committee were swear and tell me that in their life-time they had **not**

committed one error, I would say that they are something more than human. When one makes observations regarding their choice, one can say that in a particular case, the choice was wrong. Nobody can vouch cent per cent, accuracy in their judgment. A man comes up before me. I put him a question. He might not know the answer. May be that the man might be more competent than myself. I am the selector. That was the point that was made about these selections for posts.

Now, I am very happy that my friend there . . . (*Interruptions.*) Let him not make a mistake. I am complimenting him. I do not think that he was associating himself with the allegations of partiality.

THE VICE-CHAIRMAN (SHRI P. N. SAPRU) : I am very sorry. You have exceeded the twenty minutes time. Then there is Dr. Mrs. Seeta Par-manand to speak.

SHRI D. P. KARMARKAR: I will take only five minutes more. (*Interruptions.*) If you like it, Sir, I will not proceed. Otherwise, the House should not complain, because I want to keep the House informed.

THE VICE-CHAIRMAN (SHRI P. N. SAPRU) : Shall we sit for some more time?

SHRI D. P. KARMARKAR: I think the Members are very kind and they will show some indulgence.

(*No Hon. Member dissented.*)

Then, Sir, you had occasion to make some very relevant observations. You have had the experience of the Bhore Committee and that Committee was the first effort. I am proud that a member of that Committee is with us in this House, at the moment in the Chair. I must say that that Committee was the first to lay the foundations of health work in this country. In fact, when I studied this Committee's Report, I found that whereas it is a

pleasure to find that in some matters we have far exceeded the expectations of the Bhore Committee, for instance in malaria eradication, in some other respects like the primary health centres, we have rather fallen short of its expectations.

Then, Sir, you said about postgraduate teaching. The one factor which was missing was that this Institute, so far as its work is concerned, had just passed a period sufficient for carrying on one term of about eighteen months of under-graduate-training. They are fixing up their staff; they have not fixed them up there fully. There were other very relevant points, Sir, you started making those observations about the history of medicine. That is a very important subject. Now, the Committee went into the matter. They are anxious to appoint a professor of medicine. They once gave their attention to the matter. They found at that time that it might not be possible to find an adequately qualified teacher for the history of medicine because that is relatively a new subject. And the Government of India are encouraging some of these colleges to put up posts for history of medicine. I am quite sure that they will give due regard to the suggestions made in this House and try to select a Professor of History of Medicine because ultimately, »we do not want our education to be lopsided.

About medical research, you had occasion to make very good remarks which are very relevant. I am quite sure that the Institute will pay attention to them.

About the nurses also I would say that the standard is of the highest. I am quite sure that you will be happy to know that during the last ten years, the nursing profession has received a very great fillip and various opportunities for training are there. About the College of Nursing, it has been doing very good service for the last ten years. I am quite sure that the Institute also will pay due attention to this matter.

[Shri D. P. Karmarkar.]

Then, I come back to some of the earlier observations of my friend, Dr. Mrs. Seeta Parmanand. I have no right to comment upon what she said. But I think, judging from the fact that not a single important paragraph escaped her attention, that she must have made up her mind to make some observations on every one of them in the Report and possibly, that has been one of the reasons for the ill-informed criticism she made—rather uniformed criticism; 'ill-informed' is much stronger. She has suffered from the handicap of not having sufficient and adequate information about this matter and therefore, she has allowed herself to say something which is not correct. One of the questions she asked was, how many members of the staff are ladies? Sir, we are not lady-haters in the All-India Institute of Medical Sciences. We invite applications from everybody and we do not specially believe that because it is a lady who has applied, so we should give her ten marks more as in other subjects.

SHRIMATI T. NALLAMUTHU  
RAMAMURTI (Madras): We do not want it.

SHRI D. P. KARMARKAR: No, no. My friend does not want it. I do not want it. I am trying to explain that we are maintaining an even level with regard to these appointments.

DR. SHRIMATI SEETA PARMANAND:  
Not even one woman in the Selection Committee.

SHRI D. P. KARMARKAR: My friend wants women everywhere. I do not think that ladies will accept if . . .

DR. SHRIMATI SEETA PARMANAND: Read article 15 of the Constitution.

SHRI D. P. KARMARKAR: It does not say that for everything you should always associate a lady with your

venture. I do not think the article J says that. Take the U.P.S.C. I am not I sure whether the U.P.S.C. has a lady member. I do not think they have i any. They are not offending against ! the Constitution in the fact that there is not a lady member amidst them. If at any time they are found suitable, they are welcome. Sir, the whole basis appears to be this that because it is the men that are there, therefore, they are not appointing women. As soon as suitable lady candidates come in, we will be proud to have them—at least half a dozen—as Professors. There is no question of that. As a matter of fact, there are about nine ladies. One of them is a professor. She is serving the college and it is open to ladies to apply and if they are found fit enough, surely they will be appointed.

DR. SHRIMATI SEETA PARMANAND: I think there is a lady in the . . .

SHRI D. P. KARMARKAR: I do not look upon my critics' observations as vague or irrelevant. I do not judge the relevance of their observations because they are men or they are ladies. To me, they are all the same. If they are relevant, we learn something; if they are not, then it is no loss.

DR. SHRIMATI SEETA PARMANAND: Will you kindly say for what subject this lady has been appointed.

SHRI D. P. KARMARKAR: I will give the information, but it will take half a minute. I will pass on the whole information to my friend.

SHRIMATI YASHODA REDDY  
(Andhra Pradesh): In questions like health and social welfare, at least one woman should be represented. She does not mean that the Constitution has not given equality. That she does not dispute. What she wants is . . .

SHRI D. P. KARMARKAR: I very much appreciate that another esteemed lady Member has taken up ladies' cause. I am quite sure that I will be benefited by these observations.



THE VICE-CHAIRMAN (SHRI P. N. SAPRU): She is very moderate lady.

SHRI D. P. KARMARKAR: I do not want to say anything because if one lady is moderate, then the implication is that the other is extremist.

Sir, some of the points which my friends have made have already been covered in these observations of mine. Dr. Shrimati Seeta Parmanand said something about documents after which much water has flowed under the bridge. She knows that 5 P.M. this hon. House has passed a law. She knows, I think, that this hon. House or the Houses of Parliament, have passed the law and they have made this All India Institute an absolutely autonomous body, autonomous to such an extent that except in extreme cases, we the Government also, have not reserved to ourselves the power of issuing any directives. Excepting when there is an emergency or an extreme case which has not occurred, which I hope will never occur, we have not kept to ourselves any power. It is as autonomous as any university. The power of even giving degrees is with them. They are not subject to the Delhi University nor even the purview of the Medical Council. Their degrees, as soon as they are given, will have the same status as any other degree.

About free-ships, I would like to say, lest some misunderstanding be created, about 10 per cent, of the seats have been reserved for free-ships, it is because earlier the number was 50, free-ships were 5. Now the number is 70 and the free-ships are 7.

DR. SHRIMATI SEETA PARMANAND: Very small.

SHRI D. P. KARMARKAR: Well, I think they will consider the observations made in this House. Ultimately it is a small matter either way. I am quite sure that if there is need, they will increase the number of free-ships.

There are some other points that are remaining. But these, to my mind, were the rather important points arising.

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I would like to request the House not to be anything but censorious about what they consider undesirable developments in any institution, whatever be the institution, but to look upon the efforts of this institution with a little more indulgence, not from the angle of what is scheduled to come 10 years hence but its achievements now. They are just in the beginning. I must say that so far as the Government are concerned, we have every reason to appreciate the work of the Institute, of the Director and his other colleagues in the Governing Body. It is a very difficult thing to build up an institution and much as they would welcome, much as we in the Government would welcome the observations made containing the suggestions which will be given careful consideration so far as it is possible, and we shall also be happy to accept them, but then subject to these observations, I would really like the House to study the matter more. Nobody disapproves of these good suggestions—either the Government or the Institute.

I must once again express my thanks for the various observations that have been made which are bound to be helpful to the Institute in its working.

THE VICE-CHAIRMAN (SHRI P. N. SAPRU) : Is it your desire that we should sit for another ten minutes? I suggest that we should sit for ten minutes.

SHRI BHUPESH GUPTA: She should answer. I am prepared to sit for an hour.

SHRI H. P. SAKSENA: Two minutes.

DR. SHRIMATI SEETA PARMANAND: Mr. Vice-Chairman, I will not take long. I would begin with making my observations from the end of the speech following the example of the hon. Minister and I would start with the remarks that he passed at the end first and go backwards. The hon. Minister's reply was in a way,

[Dr. Shrimati Seeta Parmanand.] in a tone of self-complacency and the object in bringing this motion before this House was to point out that something more has to be done and I do not think even the people in the Institute themselves, would mind such critical interest in their Institute which is meant to really encourage their efforts to do better; otherwise they would think that 'we are here in a corner and nobody is interested in what our difficulties are'. The object of the motion was to point out the difficulties also, for instance, with regard to the beds. There too, I was sorry to find that the attitude was of self-complacency for the simple reason that the effort was to point out that so much expenditure at present, looking to the country's finances and the need to curtail expenditure in every case, was not at all necessary in view of the fact that 25 per cent, of the Safdarjung Hospital was quite adequate for the needs of the Contributory Health Scheme; and if the Minister had said that instead of at present developing the institute's hospital in the present condition of the financial resources as also foreign exchange, more Safdarjung Hospital beds would be given to it, if he had also pointed out that instead of the 70 beds given to orthopaedics, as said in the report as the under-graduates were not at present being able to make use of them and in post-graduate class there were only three students, and so, some of the beds could be diverted so as to give them the 100 beds that would be required later, if all those things had been taken into consideration by the Minister, it would have really, in my opinion, served the purpose as one would have been sure that Government's attention was really directed to economy as the Members feel.

With regard to another point—because I don't want to detain the House—the House is seized of the "real" situation from the discussion that took place here, but about one point over which the hon. Minister dwelt, I would say that it is not only to see women there for the sake of seeing. We too

are, in anything, more conscious of their qualifications being the first consideration but we are also seeing every day particularly what is happening in the Lady Hardinge College and everywhere, how our absolute rights are not always taken into consideration, with equal qualification and how men are being given preference. If the hon. Minister wants to set up, let him set up an Enquiry Committee and we will lead evidence before it and prove that this is being done. There is no need for any allegation to be made against any Selection Committee. We are all aware, we are all human beings and there is bound to be some mistake in judgment but there are sometimes cases where certain things may have happened. That also I am prepared to take it that way that it is not with any intentions, but as it appears, the qualifications have been ignored and I had given that particular instance.

To come back, article 15 of the Constitution does not say about equal rights but article 15 of the Constitution does provide that in spite of the fact that all citizens are equal and women and men have equal rights, because women have been kept as backward people, in the case of women and children, in order to give them greater facilities to go ahead on this onward march towards progress, they will be given preferential treatment and that is the point I am referring to. Under that head, it was quite necessary, in order not to create an inferiority complex, first to take one woman on the Selection Board when there are women here who are competent equally according to the names of the persons mentioned in the selection list. That should have been done. In all the universities or in Madras . . .

SHRI D. P. KARMARKAR: Perhaps she is aware that a lady is at the head of the Institution. My distinguished predecessor is at the head of this Institute.

DR. SHRIMATI SEETA PARMANAND: Maybe but I am talking of medical people and people with scienc-

tilic knowledge. That is beside the point anyway but if I may point out, if article 15 is to be respected, there is nothing wrong in whatever we are demanding. I do hope he will consider it in spite of the fact that the hon. Minister was not even pleased to take notice of the fact that I had moved the motion and he chose to reply to my points in the end. I don't mind that, that is also in keeping with things, in the fitness of things. I should like to request him again, because it is the people's cause, it is not my personal cause, I don't care at all whether he says that the points were not worth considering so long as Members in this House and people outside know what was raised and they know that we do feel that women's rights in the Health Ministry or in the Colleges and in the Services are ignored. Because he is asking, I would like to ask him this. When the W.M.S. and I.M.S. were disbanded, men in the I.M.S. had been provided for even in the C.H.S. and in many other places but women in the W.M.S. who were relegated to the different States have not been given chances to act as Civil Surgeons. You would be surprised that in one of the medical colleges or in rather two medical colleges, when the Principal's posts in the mixed colleges, were advertised recently, there was a clear advertisement 'Women need not apply'. That is equality, that is equal citizenship.

SHRI D. P. KARMARKAR: Where was that?

DR. SHRIMATI SEETA PARMA-IS! AND: Where that was does not matter. I have told you and I don't want to name any State . . .

SHRI D. P. KARMARKAR: I would like to say that it did not happen in the Government of India nor in any institution under the Government of India . . .

DR. SHRIMATI SEETA PARMA-NAND: Maybe something else may happen. Why are not posts advertised once, twice and thrice if you are really anxious that women should get chances

of getting experience in teaching institutions. People are just waiting to get a chance on every side. Enough applications may not come because of the intriguing atmosphere that goes round the institutions. If women do not apply, then at once there is the advertisement saying that men may apply. Women in the first instance, but then otherwise, men would be taken. And that has been done in the first advertisement for the post of Biologist in the Lady Hardinge College. I did not want to raise this, but the hon. Minister said that these are not relevant points. He went to the extent of making remarks which were not anyway, justified, I would say. If I had longer time, I could have proved it, but then I may be forced to keep the House longer. This question of relevancy when speaking lies in the hands of the Minister. The Minister always has the last word. Only now I am in the happy position to have these few words after him. Otherwise in the case of all Bills, everyday, the Minister has the last word and gets off with it. Today I am glad I am having the opportunity of speaking after the Minister.

SHRI D. P. KARMARKAR I must congratulate the hon. Member.

DR. SHRIMATI SEETA PARMA-NAND: Whatever does not suit the Minister is irrelevant. For instance, Mr. Gupta spoke about air-conditioning.

SHRI BHUPESH GUPTA: I may tell Dr. Seeta Parmanand that I treated his remarks as frivolous.

DR. SHRIMATI SEETA PARMANAND: Whatever suits him is relevant. Take Dr. Barlingay and naturopathy or homoeopathy. I may have my own opinion about homoeopathy. But because it suits the hon. Minister and because he spoke in a pleasant voice and did not criticise him, it was very relevant.

SHRI D. P. KARMARKAR: Sir, this is an aspersion that I like Dr. Barlingay better than I like Dr. Seeta Parmanand. I entirely degree and . . .

I SHRI D. P. KARMARKAR: Not today.

DR. SHRIMATI SEETA PARMA-NAND: Anyway, I am thankful to the hon. Members for throwing so much light on this matter and also I am thankful to the House for having shown me the indulgence of sitting a little longer. And if this motion serves the purpose of raising the standard of the Institute to a much higher level and if it serves the purpose of making the Ministry of Health accommodate the All-India Institute of Medical Sciences by giving it the best facilities immediately and not hold them back on some bargaining or other grounds, I would be satisfied, because I want to see this Institute the best in the country.

THE VICE-CHAIRMAN (SHRI P. N. SAPRU) : The House stands adjourned till 11 A.M. tomorrow, the 12th December, 1958.

The House then adjourned at thirteen minutes past five of the clock till eleven of the clock on Friday, the 12th December 1958.