

for sale or distribution as per provisions of Drugs and Cosmetics Rules, 1945. It is mandatory that every licensee shall get samples of every blood unit tested, before use for freedom from HIV I and HIV II antibodies either from laboratories specified for the purpose by the Central Government or its own laboratory.

**Government doctors under investigation**

436. SHRI SANJIV KUMAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the total number of cases in which investigations are under progress for doctors serving in the Central Government in the last three years;

(b) of the above, in how many cases have FIRs been registered against such doctors in the last three years; and

(c) in the context of review on the basis of Rule 56(j) of the Fundamental Rules, how many doctors have been retired in the last three years by Government?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) In six cases, investigations by CBI have been under progress for doctors serving in the Central Government in the last three years

(b) Out of the six cases, in two cases FIRs were registered during the last three years

(c) In the context of review on the basis of Rule 56(j) of the Fundamental Rules, none of the doctors have been retired in the last three years.

**Upgradation of Government Medical Colleges in Tamil Nadu**

437. DR. R. LAKSHMANAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government has not earmarked any Government medical college in the State of Tamil Nadu for upgradation in Phase IV of Pradhan Mantri Swasthya Suraksha Yojana (PMSSY);

(b) if so, the reasons therefor;

(c) whether Government will come forward to upgrade the Government Medical College in Villupuram District of Tamil Nadu in Phase IV of Pradhan Mantri Swasthya Suraksha Yojana (PMSSY);

(d) if so, the details thereof; and

(e) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) to (e) Yes. 13 Government Medical Colleges have been approved by Cabinet Committee on Economic Affairs on 03.08.2016 for the upgradation under Phase-IV of Pradhan Mantri Swasthya Suraksha Yojana (PMSSY). These GMCs are in the states of Bihar, Chhattisgarh, Delhi, Gujarat, Madhya Pradesh, Odisha, Rajasthan and Uttar Pradesh.

However, it may be mentioned here that following 4 Government Medical Colleges in Tamil Nadu have been approved for upgradation under different earlier phases of PMSSY:—

- (i) Government Mohan Kumaramangalam Medical College, Salem at the cost of ₹ 139.31 crore (Central share: ₹ 100 crore; State share: ₹ 39.31 crore) under Phase-I.
- (ii) Madurai Medical College at the cost of ₹ 150 crore (Central share: ₹ 125 crore; State share: ₹ 25 crore) under Phase-II.
- (iii) Thanjavur Medical College at the cost of ₹ 150 crore (Central share: ₹ 120 crore; State share: ₹ 30 crore) under Phase-III.
- (iv) Tirunelveli Medical College at the cost of ₹ 150 crore (Central share: ₹ 120 crore; State share: ₹ 30 crore) under Phase-III.

The identification of GMCs is based on the following considerations/objectives:—

- (i) Availability of tertiary health care services both in public and private sectors in the regions, and gaps thereof.
- (ii) To remove regional disparity in the availability of tertiary level healthcare facilities in the identified region/State, especially in the backward areas.
- (iii) NHM initiative particularly in the EAG States and other backward and vulnerable region will create the demand for affordable quality tertiary health care, as this continues to be largely unmet.
- (iv) There are many requests from the State Governments, representations of public representative etc. to improve the infrastructural facilities in the respective medical College institutions.
- (v) GMCs have been included across the country in different States to bring about uniform upgradation of tertiary health care services in the entire country in various phases of PMSSY.

The GMCs to be included for upgradation under Phase-IV of the PMSSY had been finalized in October, 2014 and the same also approved by the CCEA on 3rd August, 2016.

Inclusion of GMC at Villupuram District of Tamil Nadu in Phase-IV of PMSSY is not feasible at this stage.

**Expected rise in cases of MDR-TB**

438. SHRI MAJEED MEMON: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention is drawn towards the latest reports by Lancet that by 2040, 12.4 per cent of patients in the country will have MDR-TB;

(b) whether it is a fact that India shoulders the highest TB burden in the world, with over 2 of the 10 million reported cases;

(c) if so, the reasons of Indian cities being hotspots of MDR-TB transmission; and

(d) the reasons for Government inability to provide Bedaquiline and Delamanid (drugs) being used in Europe and the US for several years and why only 207 of the 79,000 patients have access to these drugs?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) Yes. The Ministry is aware of the mathematical modelling study published in Lancet which forecasts that by 2040, 12.4 per cent of patients in the country is expected to have MDR-TB.

The Study is based on the parameters prevailing in the year 2001 to 2012 in India. However, the programme in India has initiated use of the newer diagnostic technologies {like Line Probe Assay and Cartridge Based Nucleic Acid Amplification Test (CBNAAT)}, which has improved significantly access to diagnostic. Similarly, Drug Resistance TB treatment services has been expanded including newer drugs.

In the National TB Drug Resistance Survey conducted during 2015-16, drug resistance among TB patients was found to be 6.19% (5.54% - 6.90%). The programme has also rolled out Universal Drug Susceptibility Testing to address drug resistant among the new TB cases.

(b) Yes. India being a large and populous country accounts for 27.8 lakh estimated new TB cases annually, which is the highest in the world.

(c) The programme does not maintain any such data.