

As per the information received from various State/UT Drugs Controllers, the number of drugs samples tested, number of drugs samples cleared sub-standard and spurious/adulterated and percentage thereof during 2018-19 are as under:—

Year	No. of drugs samples tested	No. of drugs samples declared not of standard quality	% of drugs samples declared not of standard quality	No. of drugs samples declared spurious/ adulterated	% of drugs samples declared spurious/ adulterated
2018-19	76101	2549	3.35	205	0.27

Such data in respect of various Zonal/Sub-zonal offices of Central Drugs Standard Control Organisation (CDSCO) are as under:—

Year	No. of drugs samples tested	No. of drugs samples declared not of standard quality	% of drugs samples declared not of standard quality	No. of drugs samples declared spurious/ adulterated	% of drugs samples declared spurious/ adulterated
2018-19	10382	310	2.98	5	0.048

(c) The Government is committed to ensuring that the quality, safety and efficacy of drugs are not compromised. With this in view, the Government has taken a series of measures including strengthening of legal provisions, conducting workshops and training programmes for manufacturers and regulatory officials and measures such as risk based inspections.

#### **Labs for diagnosing cancer**

2610. DR. R. LAKSHMANAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has proposed to set up more cancer hospitals across the country in view of increasing number of cancer cases and also emerging types of various cancers, if so, the details thereof;

(b) whether Government has proposed to establish labs nearby all Primary Health Centres (PHCs) to undertake all types of tests pertaining to cancer, instead of referring them to tertiary care hospitals;

(c) if so, the details thereof; and

(d) if not, reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) The Government of India is implementing “Strengthening of Tertiary Care Cancer facilities Scheme” to assist States/UTs in setting up of State Cancer Institutes (SCI) and Tertiary Care Cancer Centres (TCCC) in different parts of the country. Till date, proposals for setting up of 16 SCIs and 20 TCCCs have been approved. State/UT-wise list is given in the Statement (*See below*).

27 Regional Cancer Centres were also set up under the erstwhile National Cancer Control Programme. Oncology in its various aspects has focus in case of new AIIMS and many upgraded institutions under Pradhan Mantri Swasthya Suraksha Yojana (PMSSY). Setting up of National Cancer Institute at Jhajjar (Haryana) and second campus of Chittaranjan National Cancer Institute, Kolkata has also been approved. All these will enhance the capacity for prevention and treatment of cancer in the country.

(b) to (d) “Public Health and Hospitals” being a State subject, the primary responsibility of ensuring sufficient supply of essential life-saving medicines, injections and other medical equipment in public health facilities including Primary Health Centres (PHCs) is that of respective State Governments. Cancer is diagnosed and treated at various levels in the Government health care system. Cancer is treated and managed mostly at tertiary care level. To support the States/UTs for interventions upto district level, the Government of India is implementing National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) under National Health Mission (NHM). The objectives of the programme include awareness generation for Cancer prevention, screening, early detection and referral to an appropriate level institution for treatment. For Cancer, the focus is on three Cancers namely breast, cervical and oral. Support is provided under the programme for strengthening of labs or outsourcing for diagnostic at Community Health Centre and District Hospital level as per State Programme Implementation Plan.

Under the NHM, support is being provided to the States to provide free essential medicines and diagnostic services under the Free Drugs and Diagnostic Services Initiative for their primary and secondary health care needs.

In addition, a population level initiative for prevention, control, screening and management for common Non-Communicable Diseases (diabetes, hypertension and cancer viz. oral, breast and cervical cancer) has been rolled out in over 215 districts of the country under NHM. as a part of comprehensive primary healthcare.

Under the Ayushman Bharat - Health and Wellness Centres component, screening of three common cancers - breast, cervix and Oral cancer for 30 years plus population are being carried out and suspected cases are being referred to the higher centres for confirmation and diagnosis. Further, the diagnostic tests lists has been expanded under the Ayushman Bharat - Health and Wellness Centres - Primary Health Centres to provide 63 tests under the hub and spoke model, which also includes Pap smear test (test for detecting cervical cancer).

**Statement**

*List of State Cancer Institutes (SCIs) and Tertiary Care Cancer Centres (TCCCs)  
approved under Strengthening of Tertiary Care Cancer facilities  
scheme of NPCDCS*

Sl. No.	States	Name of the Institute	SCI/TCCC
1	2	3	4
1.	Andhra Pradesh	Kurnool Medical College, Kurnool	SCI
2.	Assam	Guwahati Medical College and Hospital, Guwahati	SCI
3.	Bihar	Indira Gandhi Institute of Medical Sciences, Patna	SCI
4.	Delhi	Lok Nayak Hospital	TCCC
5.	Gujarat	Gujarat Cancer Research Institute, Ahmedabad	SCI
6.	Goa	Goa Medical College, Panaji	TCCC
7.	Haryana	Civil Hospital, Ambala Cantt	TCCC
8.	Himachal Pradesh	Indira Gandhi Medical College, Shimla	TCCC

1	2	3	4
9.	Himachal Pradesh	Shri Lal Bahadur Shastri Medical College, Mandi	TCCC
10.	Jammu and Kashmir	Sher-i-Kashmi Institute of Medical Sciences, Srinagar	SCI
11.		Government Medical College, Jammu	SCI
12.	Jharkhand	Rajendra Institute of Medical Sciences, Ranchi	SCI
13.	Karnataka	Kidwai Memorial Institute of Oncology (RCC), Bangaluru	SCI
14.		Mandya Institute of Medical Sciences, Mandya	TCCC
15.	Kerala	Regional Cancer Centre, Tiruvananthapuram	SCI
16.		Government Medical College, Kozhikode	TCCC
17.	Madhya Pradesh	G.R. Medical College, Gwalior	TCCC
18.	Maharashtra	Rashtrasant Tukdoji Regional Cancer Hospital and Research Centre, Nagpur	TCCC
19.		Government Medical College, Aurangabad	SCI
20.		Vivekanand Foundation and Research Centre, Latur	TCCC
21.	Mizoram	Mizoram State Cancer Institute, Aizawl	TCCC
22.	Nagaland	District Hospital, Kohima	TCCC
23.	Odisha	Acharya Harihar Regional Cancer Centre, Cuttack	SCI
24.	Punjab	Government Medical College, Amritsar	SCI
25.		Civil Hospital, Fazilka	TCCC
26.	Rajasthan	S P Medical College, Bikaner	TCCC
27.		SMS Medical College, Jaipur	SCI
28.		Jhalawar Medical College and Hospital, Jhalawar	TCCC

1	2	3	4
29.	Sikkim	Multispecialty Hospital at Sochyangang (Sichey), near Gangtok, Sikkim	TCCC
30.	Tamil Nadu	Cancer Institute (RCC), Adyar, Chennai	SCI
31.	Telangana	MNJ Institute of Oncology and RCC, Hyderabad	SCI
32.	Tripura	Cancer Hospital (RCC), Agartala	SCI
33.	Uttar Pradesh	Sanjay Gandhi Postgraduate Institute of Medical Sciences, Lucknow	TCCC
34.	West Bengal	Government Medical College, Burdwan	TCCC
35.		Murshidabad Medical College and Hospital, Berhampore, Murshidabad	TCCC
36.		Sagore Dutta Memorial Medical College and Hospital. Kolkata	TCCC

#### Vacant administrative posts at AIIMS, New Delhi

2611. SHRI C.M. RAMESH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the posts of Registrar and Chief Administrative Officer at AIIMS, New Delhi are lying vacant;

(b) if so, the details thereof and reasons therefor;

(c) the mode of recruitment for these said posts to be filled up on regular basis and whether any timeline has been fixed for filling up these posts; and

(d) when are the posts likely to be advertised for being filled up on regular basis?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) and (b) Yes. The eligibility criteria for promotion to the post of Chief Administrative Officer is Senior Administrative Officer with five years of regular service but no eligible candidate is available in feeder grade post *i.e.* Senior Administrative Officer. However, efforts were made to fill the vacancy on deputation basis but no suitable candidate was found in the last recruitment process.

(c) and (d) The method of recruitment of the post of Chief Administrative Officer is 100% by promotion failing which by deputation. Fresh recruitment action to fill up