

The Printed Word

newsclippings on health and medicine, july - september 1984

Health Policy and the Health System

Deccan Herald, 21 July: A 58-year old man was electrocuted at Ram Manohar Lohia Hospital, New Delhi when the metallic stand for hanging the glucose drip came into contact with the overhead light, which had been known to be giving 'shocks'.

Business Standard, 2 Aug.: USAID has offered to develop basic infrastructure (buildings for health institutions, residential complexes) and to improve the health delivery system, (including family planning and maternal and child health) in Bhiwani Mahendragarh and Sirsa district of Haryana. In phase I the USAID has released Rs. 7 crores.

The Daily, 15 Aug.: Yet another patient of the ESIS hospital at Kandivili in Bombay leapt to her death from the third floor. The patient had been considered 'rowdy' apparently because she was not able to bear the pain due to acute appendicitis, for which she had been admitted a month previously but had not been operated upon. The reasons for the delay in operating remain unclear.

The Hindu, 30 July: The Working Group of the Central Council of Health and Family Welfare has made the following recommendations: (1) The creation of mobile ophthalmic units in all districts and stringent action against unauthorised persons conducting eye camps; (2) A whole-time trained TB officer

with supporting staff at the directorate level for proper supervision and monitoring of the national TB control programme (3) All hyperendemic districts to be covered with multi-drug regimen projects during the 7th plan period; and (8) All states to repeal the Leper's Act of 1888.

Financial Express, 18 Sept.: The government has sanctioned a budgetary allocation of Rs. 547.46 crores for the central sector health programmes for 1984-85 as against Rs. 482.02 crores in the previous year.

The Telegraph, 19 Sept.: In the WHO regional committee for southeast Asia, India has offered its 'vast reservoir of trained medical manpower' to neighbouring countries for meeting their immediate requirements and in organising training programmes for their medical personnel.

The Hindu, 25 Sept.: The Eighth Finance Commission has recommended a monthly allowance of Rs. 400 for doctors serving in rural areas.

Hindustan Times, 28 Sept.: A steering group appointed by the planning commission has proposed the allocation of Rs. 13936 crores for health and family welfare in the 7th Plan. It represents 8.3 per cent of the total public sector outlay of Rs. 180,000 crores envisaged for the period. The health sector's share in the 6th plan was just 3.3 percent. Out of this, Rs. 10457 crores (about three

fourths) will go to the family welfare sector.

Medical technology and developments in medical practice

The Hindu, 12 Aug.: By the end of 1984-85 three medical colleges in Tamil Nadu, all district headquarter hospitals and 22 hospitals at the taluk level in the state would be equipped to deal with accident and emergency cases.

Financial Express, 20 Aug.: A production of Rs. 350 crores is envisaged in the 7th plan for the manufacture of medical electronic equipment. The Department of Science and Technology has estimated that a tentative investment of Rs. 60 crores would have to be made during the plan. During 1982, the total production was of order of Rs. 13 crores but is expected to rise to Rs. 20 crores in 1984. But the demand is estimated to be Rs. 45 crores worth. In 1976-77 20 MEE products termed 'life saving equipment' had been exempt from customs import duty. The list has now risen to 47 items.

Protests, Strikes and Agitations

Times of India, 8 July: 7,000 medical personnel of the Government and municipal hospitals - 4,000 resident doctors, 1,500 post graduates, and 1,500 interns will go on an indefinite strike to protest against the Maharashtra government's decision to start private medical colleges accepting capitation fee. (Contd. on page 147)

March 1985

to the public. Unfortunately the confusion was further intensified by our 'experts' who issued absurd and incorrect statements. And those who could have provided relevant information were instructed to be silent. In fact, by dramatising operations like the 'neutralisation' of MIC, scientists further complicated the situation. Rather than providing information and assurances backed by facts, our scientist-politician combine preferred to dramatise the situation and mystify technology. A demand for information and public access to records and to data is an important component of the demands put forward by a number of people's groups working on environmental and health issues. We have to work to pursue and support these demands.

— anurag mehra

405/B-39
Yogi Nagar
Boriwili (W)
Bombay 400 092

Here is a brief list of references which might yield information.

1. Toxicity of MIC and its quantitative determination in air (German) *Arch. Toxikol.* 20 (4) 235-41, 1964
 2. *Packet guide to chemical hazards.* U. S. Department of Health (lists properties, symptoms, first aid etc.)
 3. *Industrial Hygiene and Toxicology* Second edition, Patty, Clayton and Clayton (for other isocyanates like toluene di-isocyanate — TDI)
 4. *High Polymers.* David and Staley, Vol XVI. John Wiley 1969 (for TDI)
 5. (For experimental work on isocyanates) *Ann. Occup. Hyg* 8. 1965
 6. *The dictionary of organic compounds.* Chapman and Hall
- Poss-Bhopal reports/studies published to far :
1. *Bhopal City of Death.* Eklavya, El/208, Arera Colony, Bhopal Rs. 3/- 62 pp
 2. *Bhopal Gas Tragedy.* Delhi Science Forum, B-1, 2nd floor, J Block, Saket, 48 pp New Delhi 110 017 Rs. 5/-
 3. *Human responses to isocyanate exposure* by R. V. S. V. Vadlamudi and V. A. Shenai of Department of Chemical Technology, University of Bombay in *Science Age*, January 1985. The same issue carries three other articles on Bhopal.

(Contd. from page 145)

The Telegraph, 18 Aug. : About 6,000 junior doctors in all the 7 medical colleges in U. P. are on indefinite strike in protest against the alleged police assault on doctors of the Swaroop Rani Hospital in Allahabad.

Professional bodies in health care

Times of India, 25 July : Should doctors working full-time as medical advisors to pharmaceutical companies be allowed to hold office in professional associations of physicians? The issue is being hotly debated following attempts by two doctors from multinational companies to seek election as presidents of two such bodies. The issue is of particular relevance in view of the coming

election of the Association of Physicians of India, the largest organisation of medical specialists with a membership of 4,000. The post of president is being contested by two professors of medicine from Bangalore and Bhopal respectively and by Dr. Paul Anand, a full-time director of medical research of Glaxo Laboratories. Six months ago Dr. A. S. Kochar from the same company had sought elections as president of the American College of Chest Physicians (ACCP), but the attempt had failed on procedural grounds.

Indian Express, 21 Aug : A complaint has been registered against an alleged quack who was operating as a qualified medical practitioner. His credentials

were first suspected by the manager of a bank which had granted the 'doctor' a loan. The Maharashtra Medical Council sources say that for each such case detected many others may go unnoticed.

Free Press Bulletin, 7 Sept : A doctor who is a Congress (I) MLA and the chairperson of the Maharashtra Small Scale Industries development Corporation has had his name struck from the registers of the Maharashtra Medical Council for negligence and violation of medical ethics a year ago, continues to practice. The complaint had been registered by a patient whose left leg had been crippled following a wrongly administered injection in the knee cap.

Compilation : AJ, PP

The news items have been compiled from the files of the Centre for Education and Documentation, Bombay. We request readers to send us relevant items, especially from the regional press.

March 1985