No. X-19013/1/06-D

From,

Drugs Controller General (India),
Directorate General of Health Services,

Nirman Bhawan, New Delhi
Dated the 10th January'2007

To,

All State Drugs Controllers,

Subject:- Forwarding of minutes of 37th Drugs Consultative Committee meeting.

Sir,

Please find enclosed herewith a copy of the minutes of 37th meeting of the Drugs Consultative Committee (DCC) held on 18th & 19th December'2006 at Scope Complex, Lodhi Road, New Delhi for information.

Yours faithfully,

(DR. D. ROY)
For Drugs Controller General (India)

Encl:- As stated above.

Copy to:-

All Zonal officers of CDSCO
All Port officers of CDSCO
All Directors of Testing Labs.

Minutes of 37th Meeting of Drugs Consultative Committee 18th & 19th December-2006 Convention Centre Scope Complex, Lodhi Road, New Delhi

CDSCO

Central Drugs Standard Control Organization
Directorate General of Health Services
Ministry of Health and Family Welfare
Nirman Bhawan, New Delhi-110011

MINUTES OF THE 37TH MEETING OF THE DRUGS CONSULTATIVE COMMITTEE HELD ON 18TH & 19TH DECEMBER-2006 AT CONVENTION CENTRE SCOPE COMPLEX LODHI ROAD, NEW DELHI.

(List of Participants Annexed)

Inaugural Dellberations

37th Drugs Consultative Committee meeting was inaugurated by Honorable Union Minister of Health and Family Welfare – Dr. Anbumani Ramdoss. Secretary, Health and FW – Shri Naresh Dayal, Director General of Health Services and Chairman DTAB – Dr. R.K. Srivastava, Chairman DCC- Dr. M. Venkateswarlu, Members of DCC and other distinguished individuals participated in the meeting.

Dr. M. Venkateswarlu, Chairman, DCC welcomed the Hon'ble HFM and senior officers and Members of DCC and explained the objectives of the DCC and the need to discuss on current issues such as medical devices, contractual manufacturing, counterfeiting drugs etc. He explained that unlike past years this year he has proposed to take up the summarized agenda instead of taking State wise agenda. He informed that agenda received from various states is divided into three categories. The first category is one wherein a debate is proposed; second category covers those items which have been, time and again, coming up for discussion in the past DCC meetings and these will be referrec to Sub-Committee of DCC constituted to deal with such problems. Some of the corrections suggesting amendment to the Drugs and Cosmetics Rules will be accepted and sill be processed by the Directorate to amend the Rules suitably.

Secretary, Health & FW in his address explained the current scenario of Indian pharmaceutical industry and talked about the challenges and opportunities for the Indian pharmaceutical industry in the global scenario. He advised regulators to improve the system for effective implementation of provisions of D&C Act and Rules made there under to bring the industry and regulatory system to that of global standard.

Dr. R.K. Srivastava, DGHS emphasized the need for an active participation in the DCC meetings by the States and adhere to the policy decisions arising out of such meetings, as uniformity is essential for a country like ours. He also advised that the DCC should meet more often and there should be effective cooperation and coordination between the States and States & Centre.

The Hon'ble Minister of Health and FW in his address apprised the DCC about the various initiatives that are being taken up by the Government of India to strengthen the drug regulatory system in the country through Capacity Building Project which is under progress. The States are being provided adequate funds to strengthen their basic infrastructure like laboratories, offices and computerization. He also explained about creation of Central Drug Authority as per the recommendation of Mashelkar Committee which will be created as per US FDA system i.e. it will be an individual approach creating various divisions so that adequate focus is given for each of the divisions. He also talked about the other current legislations under consideration like Drugs and Magic Remedies Act, Amendment to D&C Act for enhancing punishment for manufacture, sale, distribution, stock of counterfeit drugs, Schedule-K i.e. OTC drugs etc. He also emphasized the need to keep vigil on the movement of counterfeit drugs between the States and work as a single team in catching the culprits involved and prosecuting them. He talked about the challenges being faced by regulatory system due to globalization and suggested a need to train the regulators for updating their knowledge to meet the current requirements.

The Drugs Controller General (I) and the Chairman of DCC thanked the hon'ble Minister of Health and FW for finding time from his busy schedule to inaugurate the 37th meeting of DCC and for the encouragement that DCC gets by his gracious presence. He also promised that DCC will work to achieve the objectives.

Agenda items and Recommendations of 37th meeting of Drugs Consultative Committee held on 18th & 19th December-2006 at Convention Centre, Scope Complex, Lodhi Road, New Delhi.

The attention of DCC members is invited to the Gazette Notification No.GSR 578 (E) dated 23/7/83 in entry No. 14 which states that "fixed dose combination of corticosteroids with any other drug for internal use" is prohibited for manufacture and sale in the country.

Earlier the combination of corticosteroids with other drugs was banned to prevent indiscriminate use of corticosteroids in combination with other drugs taken by oral route. Later on various fixed dose combinations of Salmeterol + Fluticasone, Formoterol+ Budesonide etc. in Metered Dose Inhaler (MDI) and Dry Powder Inhaler (DPI) form were approved for the treatment of asthma based on scientific data and rationality of these products.

As the members of DCC are aware, number of such formulations is already available in the Indian market. Such combinations have also been approved internationally in developed countries like US, UK and in number of other countries. There is substantial medical literature in support of these formulations in the treatment of asthma. Moreover, these formulations are marketed in the from of MDI and DPI to avoid the adverse effects, as these drugs are not absorbed significantly from lungs into the systemic circulation when administered as MDI and DPI.

Recently, a view has been taken by State Drug Controller of Bihar that manufacturing and marketing fixed dose combination of Salmeterol + Fluticasone,Formoterol + Budesonide MDI and DPI and similar products fall under the category of banned drugs in view of above notification.

Although the issue raised by Bihar State Drug Controller is convincing, it should be noted that formulations of such FDC of drugs in MDI and DPI form are valuable therapeutic option in the treatment of asthma patients.

Therefore, the notification needs to be amended to be read as "fixed dose combination of corticosteroid with any other drug for **systemic** use " in the banned category of drugs to avoid this ambiguity. Meanwhile, such combination products in inhalation route may be allowed for continued marketing in the Country.

The members of DCC may examine and give their considered opinion in light of above mentioned facts.

Recommendations

Fixed Dose Combination (FDC) of Corticosteroid and the other drugs for internal use was prohibited under 26A vide notification No.1057 (E) dated Nov. 1988. An objection was raised by Drugs Inspector, Bihar with regard to FDC of Corticosteroid and other drug inhalers (Aerosols/Meter Dose Inhalers). The matter was explained by DCG(I), the Chairman of DCC, and it was agreed upon that the notification under Rule 26A is applicable for systematic absorption of this drug i.e. for doses form like oral liquids, tablets and capsules and Parenteral products and not applicable for tropical applications like Ophthalmic preparation, dermatological products and Metered-Dose- Inhalers (MDIs). The office of DCG(I) will send detailed letter to the Drugs Controller, Bihar for filing his submission in the Hon'ble Court in the subject matter and a clarification note or correction of the entry of Rule 26A will be initiated by the office of DCG(I).

It was clarified to all the DCC Members that the 26A prohibition of FDC of anti-tuberculosis drugs at serial number 29 and 30 of the notification was amended in the year 2003 vide GSR-100(E) dated 11.02.2003 to facilitate manufacture and sale of four-drug-combination of Refimpicin, INH, Ethambutal and Pyrazinamide. These combinations are permitted to be marketed under WHO guidelines as well as under the anti-tuberculosis programmes of Govt. of India.

Medical Devices:

Medical devices are considered as drug subject to the notification as per Section (b)(iv) of Drugs and Cosmetics Act and Rules made thereunder, vide notification No.GSR 109 (E) dated 22.2.1994. The above medical devices are notified as drugs and these were covered under State Licensing Scheme. Another 10 medical devices were notified as drugs vide notification SO 1468 (E) dated the 6th October, 2005 as given below:

1. Cardiac Stents
2. Drug Eluting Stents
3. Catheters
4. Intra Ocular Lenses
5. I.V. Cannula
6. Bone Cements
7. Heart Valves
8. Scalp Vein Set
9. Orthopedic Implants
10. Internal Prosthetic replacements.

Consequent to the Notification, import, registration as well as licensing of manufacturing of these medical devices are initiated and are particularly completed. Points of discussion on the subject matter are :

1. Clinical trial of medical device.
2. Is the notification is complete in all aspects?
3. Are there any requirements to be added? For example – nails, screws along with orthopedic implants.
4. The current status of licence with respect to sale and distribution of medical devices.
5. Whether the Schedule-M.III of D&C Rules is adequate for the new devices which have been notified as drugs.
6. Is there any need to bring all earlier notified medical devices under CLAA.
7. To gather information about the status of the medical devices. Are they all licensed or yet to be licensed and reasons therefore.
8. Standards for medical devices.
9. Notify laboratories for medical devices for testing.
10. Procedures for sampling by Drugs Inspectors.
11. Labeling requirements and information to be furnished along with product.

Recommendations

The debate on the medical devices reveal that many sales premises are yet to be licenced and number of applications received for grant of manufacturing licences are under examination. The Chairman has requested to expedite issuance of licences to manufacturing and sale establishments for medical devices. On the other issues, the DCC has opined that the current notification requires inclusion of additional items like stents for other purposes, accessory for orthopedic implants and other devices etc. The current M-III requirement for medical devices is to be reviewed keeping in view of the requirements for the newly notified medical devices.

The licensing procedures for non-CLAA medical devices require a review to bring those items under CLAA and the standards should be prescribed in consultation with BIS. One of the central laboratories shall be developed into a laboratory for testing of medical devices. Guidelines should be developed for clinical trials of medical devices & labeling requirements to be specified for medical devices.

In order to consider the above points a Sub-Committee, with terms of reference mentioned above, was constituted as under:

1. ***Mr. Kapil Bhargarva ADC(I), West Zone, ...convener***
2. ***Commissioner, FDA Maharasthra.....member***
3. ***Commissioner, FDA Gujarat.....member***
4. ***DDC (I),CDSCO (North Zone) .....member***
5. ***Member from BIS (MHD) .....member***
6. ***Parthajyoti Gogoi, RDTL Guwahati.....member***
7. ***Representative from Daman ----------member***

Recommendations:

The Chairman explained the initiatives of WHO under the banner of IMPACT for combating of counterfeit drugs wherein India is a member. He nominated Dr. D. Roy, DDC (I)I/c, CDSCO (NZ) as the nodal officer for the country and requested all the States to notify nodal officers and provide infrastructure like residential & office telephones, accessibility of internet for these officers and furnish these particulars tc DCG(I) for informing to WHO to make it available on the countries' Websites within four weeks i.e. by 19th January, 2007.

As regards the control over the movement of interstate commerce by wholesale and the need to regulate and control of supply of primary packing material, the issue will be examined by the Drugs Controller, Goa in consultation with the Drugs Controller of Andhra Pradesh and forward a proposal to DCG(I) for examination.

<u>WHO Certification scheme:</u>

It is informed by WHO that there is a need to submit inspection report of the firm along with Certificate of Pharmaceutical Product (COPP) to the importing countries. The consequences of the requirements to be discussed:

1. Variability in the reporting pattern of reports.
2. Variability in benchmarking.
3. Variability in procedures for additional products.
4. Variability in procedures for extensions.
5. Reviewing of reports of the Sub-committee prescribing benchmarks and time frame.
6. Identify officers for WHO inspections by States.
7. Issue of WHO GMP to Ayurvedic drugs.
8. On receipt of substandard report, action to be taken on COPPs/WHO certificate issued.

Recommendations:

Various other issues raised, were also debated and it has been agreed upon the need to harmonize the procedure for WHO GMP certification. Based on the recommendations of the earlier Sub-Committee report and identifying the minimum benchmarks, pattern of writing reports etc., Chairman also informed that Zonal Workshops will be conducted to train drug inspectors on the check list, acceptance, preparation of reports and recommendations etc. He has requested the States Drugs Controllers to nominate adequate number of drug inspectors, based on the workload of WHO GMP certification in the States and furnish details to DCG (I) Office before 19th January, 2007.

CLAA Scheme:

The CLAA scheme exists for more than 13 years. Major areas of concern:

1. Noncompliance but continue to be valid.
2. Loan licensing of CLAA product without CLAA approval.
3. Requirements for primalry inspections by State before seeking for joint inspection.
4. Judgement of Kolkata High Court in relation to the blood banks and consequencies.
5. Improper quality management in running a blood bank and thereby causing issuance of unsafe blood units to patients.
6. Information about notification of SLA.
7. Role of experts in the inspection.

Recommendations:

In the light of judgment of Kolkatta High Court, it was agreed upon to amend Rule 68A and 85(ii) of D&C Rules to explicitly provide powers to States for suspension and cancellation of licences in tune with Rule 122(O). Applications of blood banks received prior to notification GSR 733(E) dated 21.12.2005 will be considered for grant of licence.

The term "Hospital" will be explicitly defined for the purpose of considering applications for grant of licences to blood banks attached to hospitals.

The DCC expressed concern with continued noncompliance of Government blood banks and public undertaking. It was decided that DCG(I) will get a letter written by DGHS to all State DGs on the significance to the requirements. States were requested to carry out primary inspections of blood banks for grant of licence for their preparedness for inspections to be followed by a joint inspection.

As a principal decision was already taken to permit loan licensing for Large Volume Parenterals, the DCC has agreed to process a loan licensee application in 27D and recommend in 28D specifically mentioning that the application is for loan licence and mention the name of loan licensor and licensee pending creation of new form.

The experts joining the inspection under CLAA scheme may be persuaded to restrict their activities to the area of their specialization i.e. testing/manufacturing.

In case of Rajkot Blood Bank incidence which was run by charitable trust and their trusties are socially enjoying status of respected citizens. In case of gross violatios for running blood banks and if warrant prosecutions, the question arises as to who should be included as accused – trusties or the Chairman of trust or any individual. During the debate, it was pointed

out that majority of blood bank activities are run by charitable trust any act of prosecution of trusties will be disincentives for genuine trust to be in blood bank activities. It was agreed upon to seek an opinion from the Law Ministry whether the charitable trust can nominate a person to be responsible for all acts of running blood banks and he shall be liable for penal actions whenever they are contemplated for the offence.

Schedule-M:

The following points need to be debated in respect of Schedule-M:

1. Current status of compliance to Schedule-M.
2. Current Status on court matters.
3. Qualification of quality assurance personnel.
4. Qualification of manufacturing chemist for biotech products and APIs.
5. Requirement of Nasal/Ear drops.

Recommendations:

The points raised with regard to implementation of Schedule-M will be examined by the Committee as constituted at point-2 (Medical Devices). It was agreed upon to amend Schedule-M to facilitate manufacture of allied products by the new as well as old manufacturers subject to the satisfaction of the Licensing Authority that the allied product manufacturing activity will not adversely affect the quality of medicines manufactured by them.

The qualification under Rule 49A and 50 were also debated and the DCC recommends that it should be properly amended to ensure that the licensing authority has a requisite experience in enforcement of the provisions of the Drugs and Cosmetics Act and the Drugs Controller, Bihar and the Drugs Controller, UP have agreed to suggest suitable amendment to existing Rules in consultation with the legal experts.

The Committee (aforesaid Drug Controllers) will examine the requirements of Nasal and Ear drops.

Contract Manufacturing/Loan Licence:

The current practice followed by the industry to circumvent the contract manufacturing includes P to P arrangements and co-marketing. These activities are not controlled under the provisions of D&C Act and Rules made there under. The points of discussion on the subject are:

1. Do these activities require to be covered?
2. If we have to cover, does the conditions of loan licence will apply to them.
3. Do they require special labeling requirements?
4. Accountability for quality should it be restricted to manufacturer or should also to be to the person marketing as the case in the matter of loan licence.
5. Loan licence for APIs.

Recommendations:

The entire issue of contract manufacturing, co-marketing, P to P marketing will be examined by the Committee consisting of Mr. A.K. Pradhan, Technical Officer, CDSCO (HQ) and members nominated one each by FDA, Maharashtra, FDA, Gujarat and Drug Control Administration of Himachal Pradesh and West Bengal.

The TOR will be:–

i. ***Justification of many brands.***
ii. ***Steps to reduce proliferation of products.***

Till the recommendations are received, State Licensing Authorities may restrain by limiting the numbers.

Narcotic drugs:

Narcotics and psychotropic substances are controlled substances and their usage and requirements have to be monitored. Any additional requirements require a long time for procurement from Narcotics Commissioner. The points for discussion:

1. An approach to have a realistic estimate.
2. How to address sudden spurt in the increase due to export commitments.
3. Reallocation of unused quantity from States to other States requiring the same submission by 9 months utilization and committed utilization details.
4. Submission of information in form P, BP and C by States.

Recommendations:

The Chairman requested the Members of DCC to furnish the details of requirement of narcotic drugs for the year 2007 by 19th of January, 2007.

Cosmetics:

The issues related to cosmetics are discussed many times but no concrete decisions were taken and communicated to stakeholders. The following are the major issues:

1. Herbal, Ayurvedic, Homoeopathic cosmetics and their standards and acceptability.
2. Large scale import of cosmetics into the country and violation of Drugs and Magic Remedies Act.
3. Status of cosmoceutical – functional claims.
4. Standards for cosmetics.
5. Discussion on the Sub-Committee report.

Recommendations:

As regards the issue of identifying standards for ASU and Homeopathic cosmetics, the representative of Ayush Department clarified that there is no separate category like ASU and Homeopathic Cosmetics. In Ayurveda, there are classical ayurvedic drugs and patent or proprietary ayurvedic drugs. He further informed that the matter will be debated and discussed in their ASU-DTAB meeting. The Chairman informed that the draft notification for import/registration is ready for publication and till such time the authenticity of insisting for linked document with the manufacturer and compliance to Rule 148 and Schedule-S of D&C Act should be in place.

Labeling of drugs:

1. Package insert for medicines.
2. Bilingual labeling
3. Review of Rule 94 & 96.

Recommendations:

The Chairman said that there is a need to review the current labeling requirements for export as well as for local use, keeping in view of various constraints and limitations of labeling of drugs and also ensuring that minimum information for regulators is available. This will be examined by a Committee consisting of the following:

i) Shri P.K. Rastogi, ADC(I), CDSCO (HQ).....Convenor
ii) Representative of FDA, Maharashtra.....Member
iii) Representative of FDA, Goa.....Member
iv) Representative of Drugs Controller, Haryana...Member

Veterinary drugs:

During the recent discussion with European Veterinary Commission, it was agreed upon to examine the issue of residual of anti-biotic in the products derived from animals and consumed by humans. The points of discussion in this connection shall be around:

1. The status of the earlier circular issued by DCG(I) in the subject matter.
2. Identifying the leave period when animals were treated by antibiotics during which the products derived from such animals shall not be consumed by humans.

Recommendations:

The issue of leave period for utilizing food products derived from animals which were under treatment of veterinary drugs was discussed and it was also agreed upon that the Committee on Labeling will examine the required leave period from the European Commission's recommendations and recommend the labeling requirements for such veterinary drugs.

Schedule-K

1. Current status of Schedule-K. Amendment to V-A.
2. Status on OTC provisions.

Recommendations:

The Chairman explained the current status of Schedule-K and the DCC opined that the exemption from sale license should not be permitted to the hospitals.

Sale of drugs:

The following to be discussed:

1. Minimum area for wholesale.
2. Late submission of applications.
3. Correction/modification in Form 19, 20 & 21.

Recommendations:

DCC was agreed upon that status quo may be maintained i.e. the State Drugs Controllers will use their discretion in the matter shall be maintained.

As per the existing Rules necessary corrections in Form-19, 20 and 21 will be made by the office of DCG(I)

Licensing of Hospitals:

This issue was debated many times and consensus decision was taken to licence the hospitals for stock and sale. The following to be discussed:

1. Current status of licensing of hospitals in each State.
2. Are there any court matters?
3. Any other issue relating to licensing to hospitals.
4. Definition of hospitals for the purpose of blood banks.
5. Value of drugs/medical devices that can be stoked in the hospitals.

Recommendations:

It was agreed upon to constitute a Committee consisting of the following:

i) Dr. D. Roy, DDC(I) I/c, CDSCO(North Zone.....Convenor
ii) Representative of Karnataka Drugs Control Dept.....member
iii) Representative of Jharkhand Drugs Control Dept.....member
iv) Representative of Haryana Drugs Control Dept .....member
v) Representative of Punjab Drugs Control Dept.....member

The following will be the Terms of Reference:

a) ***To consider issues like requirement of licensing, quality of drugs stocked, distributed and sold by hospitals. If concessions are to be granted from any licensing, what shall be the concessions?***
b) ***Issues regarding licensing of hospitals.***

The Committee was constituted to review other Agenda Items which were brought before the DCC, time and again, with a view to finding solution and recommend, if required, suitable amendment to the existing Rules

Issue relating to Homeopathy:

The following needs discussion:

At present there is no provision for preventing the sale of Homoeopathic drugs to unlicensed dealer/unregistered doctors in the conditions of Manufacturing Licence in the D&C Rules. Hence it is suggested that the following insertion may be made on the body of the licences in Form 25-C as excluding in Form 25 & 25-A.

> "The licences authorize the sale by way of wholsale dealing and storage for by the licensee of the drug manufactured under the license subject to the conditions applications to licenses for sale."

Accordingly the following conditions is to be added in Rule 67-G also to prevent sale of Homoeopathic drug by a manufacturer to an unlicensed retailer/wholesaler "the supply of drug by wholesale shall be against a cash/credit memo bearing name & address of the licensee and his Lic. No. having following particulars need be entered:

1. The date of sale.
2. The name, address of the licensee to whom sold and sale Lic. No. in case of sale to an authority or behalf of govt. or to a hospital, medical institution educational or research institution or to a registered Homoeopathic practitioner, as the case may be.
3. The name of the drug, the quantity and the batch number. The name of the manufacture.

Recommendations: Issue relating to Homoeopathic was referred to the following Committee:.

i) ***Dr. D. Roy, DDC(I) I/c, CDSCO(North Zone.....Convenor***
ii) ***Representative of Karnataka Drugs Control Dept.....Member***
iii) ***Representative of Jharkhand Drugs Control Dept.....Member***
iv) ***Representative of Haryana Drugs Control Dept .....Member***
v) ***Representative of Punjab Drugs Control Dept.....Member***

Neutraceuticals:

Current status of neutraceuticals in the light of new composite food legislation.

Recommendations:

It was opinioned by the member of DCC that the matter may be left to the State Drugs Controllers to discuss the issue with respect to interpretation of definition of Drugs and Cosmetics Act but any therapeutic, prophylactic, functional claims and doses will make these dietary supplements as drugs.

Change of Constitution of Firms:

No definition as of now. Requires definition.

Recommendations:

FDA, Gujarat informed that there was a circular issued in the year 1992 defining change of constitution and has agreed to forward the same to DCG (I) for further examination.

Miscellaneous Recommendations:

If any manufacturer claim any pharmacopoeial standard which are not included in official pharmacopoeia shall not be permitted. The claim has to be as a in-house specification.

The Chairman desired that there shall be a plan approval system in all drug control Departments, like the one exists in Maharashtra, Gujarat etc. to ensure that the new facilities are created in compliance with both in spirit and verbatim of revised Schedule-M. Chairman emphasized the need to insist for stability studies whenever product permissions are granted.

The Chairman requested all the Drugs Controllers to adhere to the agreed procedures laid down by Sub-Committee of DCC for issuing various certificates.

List of participants of DCC Meeting held on 18th &19th December'2006.

A. List of participants from State Drugs Control Organisations

#	Name & Organisation of the Participants	Address	Phone No. & E-mail Address
1.	Mr. S.G. Prasad, Drugs Control Deptt., Uttar Pradesh	Swasthya Sewa Mahanideshalaya, Swasthya Kaksha, Lucknow-226006 (Uttar Pradesh)	0522-2621115, 09415142537 satguru49@gmail.com
2.	Mr. M.A. Khateeb, Food & Drugs Control Deptt., J&K	Drugs and Food Control Organisation, Patoli Magotrian, P.P. Janipur, Jammu Tawi-180001.	09419180734
3.	Mr. Bhag Singh, Drugs Control Deptt., Punjab	Sector-34-A, Parivar Kalyan Bhawan, Chandigarh-160034.	09872665192
4.	Mr. P.N. Saraswat, Drugs Control Deptt., Rajasthan	Dte. Of Medical Health Services, Swasthya Bhawan, Tilak Marg, Jaipur-302004 (Rajasthan).	0141-2211670 saraswatpri@hotmail.com
5.	Mr. R.M. Sharma, Drugs Control Deptt., Haryana	Directorate of Health Services, Civil Dispensary, Sector-20, Panchkula, Haryana.	2551081, 2551392
6. 7. 8.	Mr. P.K. Jaggi, Mr. A. Sen, Mr. A.K. Nasa	Drugs Control Department, Govt. of NCT of Delhi, Karkardooma, Shahadara, Delhi-32.	011-22393702, 22393701 Puneetjaggi1985@rediffmail.com
9.	Mr. Sher Singh, Drugs Control Deptt., Himachal Pradesh	Health and FW Department, SDA Complex, Block No. 4, Kasumpti, Shimla-171009 (Himachal Pradesh)	0177-2621842
10.	Mr. Dharam Singh, Drugs Control Deptt., Uttaranchal	O/O Directorate of Medical Health & F.W., 107, Chandar Nagar, Dehradun, Uttaranchal-248001.	09411530345
11.	Mr. Gurdip Singh, Drugs Control Deptt., Chandigarh Admn.	Sector-16, Chandigarh-160016.	0172-2768317(C). 0172-2780781(F) 09855021724

12.	Mr. M. Kodanda Ram, Drugs Control Admn., Andhra Pradesh	Drug Control Admn., Drug Control Bhawan, Vengalraonagar, Hyderabad-500038 Andhra Pradesh.	09441043414 Kram_meduri@rediffmail.com
13.	Dr. B. Sripathi Rao, Drugs Control Deptt., Karnataka	Drug Control Department, PB No. 5377, Palace Road, Bangalore-560001,Karnakata.	09448303685
14.	Mr. S.M. Thana, Drugs Control Deptt., Kerala	Public Health Laboratory Campus, Red Cross Road, Thiruvananthapuram-695035 Kerala.	09447074373
15.	Mr. K. Gopinath, Drugs Control Deptt., Tamilnadu	Drugs Control Department, 259/261, Anna Salai, Chennai-600006. Tamil Nadu.	09444043638
16.	Dr. S.P. Adhesara, Food & Drugs Administration, Gujrat	Food & Drugs Control Admn., Block-8, Dr. Jivraj Mehta Bhavan, 1st Floor, Gandhi Nagar-382010 Gujarat.	09427305054 comfdea@gujarai.gov.in
17.	Mr. Pramod Kumar Jain, Food & Drugs Admn., Goa	Dte. Of Food & Drugs Admn., DB Bandodkar Market, Near Municipal Market, Panaji-403001,Goa.	09960047495 dfdagoa@sanchar.net.in
18. 19	Smt. Saleena Singh Mr. D.M. Chincholkar, Food & Drugs Admn., Madhya Pradesh	Food & Drugs Admn., Idgah Hills, Bhopal-462001 Madhya Pradesh	
20.	Mr. Amitabh Chandra, IAS, Food & Drugs Admn., Maharashtra	Food & Drugs Admn, 341, Bandra Kurla Complex, Opp. RBI Building, Bandra (East), Mumbai- 51.	09819420255 ami_chandra@reciffmail.com
21.	Dr. Dharmesh Aggarwal, Drugs Control Deptt., Diu & Daman	Chief Medical Officer, Medical & Public Health Deptt., D&N Haveli, Silvassa-396230.	09824500345 dharmeshdrugs@yahoo.com
22.	Mr. P.C. Basumatery, Drugs Control Deptt., Assam	Hengrabari, Guwahati-781036 Assam.	09435101004

23.	Mr. Y.K. Jaiswal, Drugs Control Deptt., Bihar	Dte. of Health Services, 4th Floor, Vikas Bhavan, New Secretariat,Patna- 800015 (Bihar).	09431021087
24.	Mr. Madan Mohan Prasad, Drugs Control Deptt., Jharkhand	Dte. of Health Services. Jagannathpur, High School, Building, Sector-3, Dhurwa- Ranchi-834002 Jharkhand.	
25.	Dr. Rothangliawa Drugs Control Deptt., Mizoram	O/o Director, Health Services, Chaltlang Aizoal-796012 (Mizoram)	09936154558 dhsmizoram@sancharnet.in
26.	Mr. Devistone Swer, Drugs Control Deptt., Meghalaya	O/O Deputy Director, Health Services, Shillong-793001. (Meghalaya State)	09436103924
27.	Mr. R.F. Lotha, Drugs Control Deptt., Nagaland	Dte. of Health Services, Kohima-797001. (Nagaland)	09436005825
28.	Mr. J.P. Mishra, Drugs Control Deptt., Orissa	New Nandan Kanan Road, Bhubaneshwar-751017, Orissa.	0674-2300494 09437051189
29.	Dr. T.K. Rai, Drugs Control Deptt., Sikkim	Deptt. of Health & F.W. Govt. of Sikkim, Gangtok-737001. (Sikkim)	09932295575 drthrai@dr.com
30.	Dr. Sajal Kumar Roy, Drugs Control Deptt., West Bengal	Drugs Control Deptt. West Bengal, 141, AJC Bose Road, Kolkata-700014 West Bengal.	09433038710 sajal_rc@yahoo.com
List of participants from CDSCO and other Central Organisations			
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