

**MINUTES OF THE 71<sup>st</sup> MEETING OF DRUGS TECHNICAL ADVISORY BOARD  
HELD ON 13<sup>TH</sup> MAY, 2016 AT CDSCO, HQ, FDA BHAWAN, KOTLA ROAD, NEW  
DELHI**

**PRESENT**

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| 1. Dr. Jagdish Prasad,<br>Director General of Health Services,<br>Nirman Bhawan, New Delhi.  | Chairman |
| 2. Shri C. Hariharan<br>Director in-charge,<br>Central Drugs Laboratory,<br>Kolkata-700016   | Member   |
| 3. Dr. A. K. Tehlan,<br>Director, Central Research Institute,<br>Kasauli (HP) -173205  | Member   |
| 4. Dr. Madhu Dixit,<br>Central Drugs Research Institute,<br>Chattar Manzil , P.B.NO.173,<br>Lucknow-226001   | Member   |
| 5. Dr. Nilima Kshirasagar,<br>Chair in Clinical Pharmacology, ICMR<br>1501-2, Datta Tower,<br>Dr. Vijay Kumar Walimbe Marg,<br>Mumbai – 400012                                     | Member   |
| 6. Shri O. S. Sadhawani,<br>Controlling authority & Joint Commissioner,<br>Food & Drugs Administration, Mumbai<br>Bandra Kurla Complex, Bandra (E)<br>Mumbai, Maharashtra - 400051 | Member   |
| 7. Dr. Rao V. S. V. Vadlamudi<br>Flat F-6, Vora Towers,<br>8-3 – 224, Yousufguda road<br>Madhuranagar, Hyderabad – 500038  | Member   |

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| 8. Dr. A. K. Tiwari<br>Indian Veterinary Research Institute,<br>Izatnagar                                 | Member           |
| 9. Prof. M. D. Karvekar,<br>#1449, Sector, 7, 4th Main<br>21st Cross, H.S.R. Lay Out<br>Bangalore, 560102 | Member           |
| 10. Dr. A. Marthanda Pillai,<br>Ananthapuri, Hospital and Res. Institute,<br>Thiruvananthapuram,          | Member           |
| 11. Shri Sheju Purushothaman,<br>Government Analyst, RDTL,<br>Kerala                                      | Member           |
| 12. Dr. G. N. Singh,<br>Drugs Controller General (India)<br>FDA Bhawan, New Delhi-110002                  | Member Secretary |

#### **INVITEES**

1. Dr. R. N. Chaudhuri  
Director,  
All India Institute of Hygiene & Public Health, Kolkata
2. Dr. R.K. Manchanda  
Director General of Central Council of Research in Homoeopathy  
New Delhi
3. Dr. S. R. Chinta  
Assistant Advisor  
Ministry of AYUSH

#### **CDSCO REPRESENTATIVES**

1. Dr. S. Eswara Reddy,  
Joint Drugs Controller,  
CDSCO, HQ, New Delhi

2. Shri Lalit Kishore  
Sr. TDA  
CDSCO, HQ, New Delhi
3. Shri R. Chandrasekhar,  
Deputy Drugs Controller (India)  
CDSCO, HQ, New Delhi
4. Shri Sudipta Dey,  
Deputy Drugs Controller (India)  
CDSCO, HQ, New Delhi

Dr. G. B. Gupta, Prof and Head, Department of Medicine, Pt. Jawahar Lal Nehru Memorial Medical College, Dr. B. Suresh, President, Pharmacy Council of India, Dr. H. G. Koshia, Commissioner, FDCA, Gujarat, Dr. Muzaffar Ahmad and Shri Sudhir Mehta, Chairman, M/s. Torrent Pharmaceuticals Ltd., Ahmedabad could not attend the meeting because of their other commitments.

Dr. G. N. Singh, Member-Secretary, DTAB welcomed the chairman and members and informed them about the various steps taken by the Government for strengthening the drug regulatory system in the country. He explained briefly about DTAB Agenda.

Thereafter, Dr. Jagdish Prasad, Chairman, DTAB welcomed all the members and desired that more frequent meetings of DTAB should be held to consider the important matter relating to Drug Control Administrator.

Thereafter, chairman started discussion on the agenda items one by one.

### **ACTION POINTS FOR 70TH DTAB MEETING ON 18TH AUGUST, 2015**

While discussing the members observed that the recommendations of the DTAB for amendment of the rules takes much longer time while these should be expeditiously complied and implemented. Further the notification for amendment when published should be intimated to the members also for their information. The member Secretary assured the members that the process of amendment will be expedited and members intimated about the finalization of the amendments.

Some members raised the issue of reuse of medical devices by the hospitals even though these are marked for single use only. The Chairman observed that the issue needs indepth deliberations and may be taken up in the next meeting and the concerned experts invited for having fruitful discussions.

The ATR was then approved by the Board.

## **AGENDA NO. 1**

### **CONSIDERATION OF THE PROPOSAL TO INCORPORATE OF A PROVISION UNDER THE DRUGS AND COSMETICS RULES, 1945 FOR LABELING OF CELLULOSE BASED CAPSULE WITH GREEN DOT TO INDICATE ITS VEGETARIAN ORIGIN TO DISTINGUISH FROM NORMALLY AVAILABLE CAPSULES WHICH ARE GELATIN BASED**

Members were briefed that representation was received by the Ministry of Health and Family Welfare that a provision under the Drugs and Cosmetics Rules, 1945 may be introduced for labeling of cellulose based capsules with green dot to indicate their vegetarian origin to distinguish them from normally available capsules which are gelatin based. This will help consumer to be well informed about the origin of the capsule.

The cellulose based capsules were permitted to be manufactured in the country on the basis of the permission granted for manufacture of such capsules as 'new drug' from the office of DCG(I). The proposal of inclusion of a monograph of cellulose based capsules in the Indian Pharmacopoeia is under active consideration by the Indian Pharmacopoeia Commission, and is in the process of finalization after considering the comments from various stakeholders.

It was proposed to label of cellulose based capsules with green dot to indicate its vegetarian origin while the gelatin based capsule will continue to be marketed as such without any additional labelling.

The members opined that unlike food drugs are not taken by choice but are prescribed by the doctors to save lives and marking them as vegetarian or non-vegetarian origin is not desirable. Some members also pointed out that HPMC capsules are basically of synthetic origin and as such cannot be considered as purely of vegetarian origin as in the case of food preparations.

The DTAB after deliberations did not agreed to the proposed amendment.

## **AGENDA NO. 2**

### **CONSIDERATION OF THE ISSUE OF BANNING OF PACKAGING OF PHARMACEUTICAL PRODUCTS IN PET / PLASTIC BOTTLES**

The members were briefed that the issue of prohibiting the use of plastic / PET containers in pharmaceutical products was earlier considered by the DTAB in its 65<sup>th</sup> meeting held on 25.11.2013 in view of reports of leaching of harmful chemicals from plastic bottles to the contents on long storage and it was recommended that in the first phase, the use of plastic / PET containers in liquid oral formulations for primary packaging of paediatric formulations as well as formulations meant for geriatrics, women in reproductive age group and pregnant women should be phased out and banned. However, the pharmaceutical industry may be given an adequate time of six months for smooth switch over.

Accordingly a Gazette notification G.S.R. 701(E) dated 29.09.2014 was issued by the Government of India for amendment under the Drugs and Cosmetics Rules, 1945 as under.

“Prohibition of use of Polyethylene Terephthalate in liquid oral formulations for primary packaging of drug formulations.—No manufacturer shall use the Polyethylene Terephthalate or Plastic containers in liquid oral formulations for primary packaging of drug formulations for paediatric use, geriatric use and for use in case of pregnant women and women of reproductive age group.

Penalty for contravention.—Any manufacturer who contravenes the provisions contained in rule 2 shall be liable to penalty under the provisions of the Drugs and Cosmetics Act, 1940.”

A large number of comments were since received by the Government on the draft rules especially from the PET manufacturers associations etc. raising objections the notification.

In view of large number of representations received on the notification, the Ministry of Health and Family Welfare constituted a committee under the Chairmanship of Prof. M. K. Bhan, Former Secretary, Department of Biotechnology, Ministry of Science and Technology to assess the health and environmental impact of the use of polyethylene Terephthalate (PET) or plastic containers for primary packaging of drug formulations.

The matter was again considered in the 70<sup>th</sup> meeting of DTAB held on 18.08.2015 in the light of a study was conducted at the All India Institute of Hygiene and Public Health in which samples of five different pharmaceutical preparations packaged in PET bottles were subjected to testing at National Test House, Kolkata. It was found that Antimony, Chromium, Lead and DEHP were present even at room temperature in all five samples. The concentration increased on exposure to higher temperature in the laboratory. The committee recommended that the issue of cumulative exposure need to be address through large scale toxicological / toxicokinetic studies. It however reiterated its recommendation that PET should be banned in vulnerable group as leaching is more than safety level even at room temperature. The findings of the committee were forwarded to the Government of India for its consideration in the matter.

Dr. R. N. Chaudhuri, Director, All India Institute of Hygiene & Public Health, Kolkata, who was invited to the meeting to present the detailed study conducted by in this regard, which was considered in the previous meeting, submitted the 'Report of Plastic Hazard Committee' of the All India Institute of Hygiene & Public Health, Kolkata which was prepared in collaboration with the National Test House, Kolkata. The study was conducted on pharmaceutical liquid preparations and it was observed that even at the room temperatures, the toxic substances were present in the contents of the samples tested and when these samples were exposed to higher temperatures there was increase in the concentration / level of the toxic substances in the content of the samples, which can be attributed to leaching / migration from the PET/ Plastic container used for the packaging. The study also took into consideration the recommendations of ICMR as well as the observations made by Dr. M. K. Bhan Committee seeking clarifications in respect of methods of estimation adopted, sample size etc. by the AIH&PH. It has been

clarified in the report that AIH&PH had used Optical Emission Spectrometry, Gas Chromatography, Mass Spectrometry and Atomic Absorption Spectrometer and the sample size consisted of three bottles of the product of same batch number at three different temperatures, Room temperature, temperature at 40°C, and temperature at 60°C after incubation of ten days.

The report concluded that extreme caution needs to be exercised for packaging of pharmaceuticals, especially for vulnerable sections of society i.e. infants, children, nursing and expectant mothers and elderly group. Copy of the report **annexed**.

The members agreed that leaching does take place in liquid oral preparations and it increases at higher temperatures. In India, there is wide variations of temperatures which may go as high as 45 to 46 °C centigrade and chances of leaching further increases. Even though small dosages may not show any immediate harm but continuous exposure especially to the vulnerable group is a matter of concern.

Dr. Nilima Kshirasagar further suggested that besides the four elements mentioned above, some other elements also leach, for which study should also be done.

DTAB agreed with the findings of AIHPS, Kolkata and also method of tests adopted by the National Test House, Kolkata. Based on these evidences DTAB after deliberations recommended that report may be forwarded to the Ministry of Health and Family Welfare for its consideration and finalization of the draft rules to prohibit the use of Polyethylene Terephthalate or plastic containers in the liquid oral formulations for primary packaging of drug formulations for pediatric use, geriatric use and for use of pregnant women and women of reproductive age group.

### **AGENDA NO. 3**

#### **CONSIDERATION OF THE PROPOSAL TO AMEND RULE 97 OF THE DRUGS AND COSMETICS RULES, 1945 TO INTRODUCE A PROVISION OF LABELING WITH THE SYMBOL NRx FOR DRUGS FALLING THE PURVIEW OF THE NDPS ACT, 1985 AND COVERED UNDER SCHEDULE H1**

The Drugs and Cosmetics Rules, 1945 were amended vide Gazette notification G.S.R. 588(E) dated 30<sup>th</sup> August, 2013 for introduction of new Schedule H1 containing certain antibiotics, anti-TB drugs and habit forming drugs in pursuance of the recommendations of the Task Force on antimicrobial resistance.

As Schedule H1 also contained certain drugs falling under the purview of the Narcotic Drugs and Psychotropic Substances Act, 1985 which were earlier in Schedule H and were required to be labeled with the symbols NRx which shall be in red and conspicuously displayed on the left corner of the label, it was proposed to have a similar provision under Schedule H1 for the drugs under the purview of the Narcotic Drugs and Psychotropic Substances Act, 1985 as is available for drugs falling under Schedule H.

DTAB after deliberations agreed to the proposed amendment.



## **AGENDA NO. 4**

### **CONSIDERATION OF THE PROPOSAL TO AMEND NOTE APPENDED TO SCHEDULE H OMITTING EXEMPTION FOR TOPICAL OR EXTERNAL USE FOR STEROID PREPARATIONS FROM THE PROVISIONS OF SCHEDULE H DRUGS**

The Indian Association of Dermatologists, Venereologists & Leprologists (IADVL) made a representation to the office of DCG(I) regarding the adverse effects induced by rampant misuse of creams containing corticosteroids alongwith antibiotics and anti-fungals causing damage to the skin of Indian citizens. Increasing numbers of cases of Topical Steroid Damaged Face (TSDF) and steroid modified recalcitrant and / or extensive tinea (fungal infection of the skin known as ringworm) have come to the notice of the dermatologists. These creams are purchased and used by the patients without any doctor's prescription as Schedule H provided exemption for topical or external use preparations from the purview of Schedule H and H1, in the Note appended to these Schedules.

In order to prevent over the counter sale of topical preparations containing steroids and antibiotics, it was proposed to amend the Note as under:

“The salts, esters, derivatives and preparations containing the above substances excluding those intended for topical or external use (except preparations containing steroids) are also covered by this Schedule.”

DTAB after deliberations agreed to the proposed amendment.

## AGENDA NO. 5

### **CONSIDERATION OF THE PROPOSAL TO AMEND RULE 96 OF THE DRUGS AND COSMETICS RULES, 1945 FOR MAKING IT MANDATORY TO LABEL RED VERTICAL LINE ON THE LEFT SIDE IN RESPECT OF SCHEDULE H1 DRUGS ALSO**

The Drugs and Cosmetics Rules, 1945 in rule 96 in sub-rule (1), in clause (xi) it is provided that a conspicuous red vertical line is required to be printed on the left side running through out of the body of the label for certain categories of drugs including Schedule G, H and X. The clause in the present state is not applicable in respect of Schedule H1 drugs which are also required to be labeled with the red vertical line.

It was therefore proposed to amend the phrase 'Schedules G, H and X' in rule 96 as under.

“Schedule G, H, H1 and X”

DTAB after deliberations agreed to the proposed amendment. The members however, further desired to know whether any survey has been conducted to know whether Schedule H1 drugs are properly regulated especially in respect of antibiotics to know the impact on antibiotics resistance.

The Chairman suggested that National Centre for Disease Control may be requested to conduct such survey.

## **AGENDA NO. 6**

### **CONSIDERATION OF THE PROPOSAL TO AMEND THE DRUGS AND COSMETIC S RULES, 1945 FOR UPWARD REVISION OF FEES CHARGED OF VARIOUS LICENSING ACTIVITIES UNDER THE RULES**

Members were briefed that the Drugs and Cosmetics Rules, 1945 specify various fees to be charged for various categories of licenses or permissions granted under the said rules. These permissions include grant of registration certificate and import licences for the import of drugs and medical devices, permissions for clinical trials and import of drugs for test, analysis and overseas inspections by the CDSCO. Fees are also charged for various manufacturing and sale licences granted by the State Licensing Authorities. The present fees were last upgraded in 2001 and 2003 only. The revision of fees was therefore considered necessary as the current fees were not upgraded since last thirteen years or so. Accordingly, the Ministry of Health and Family Welfare published the draft rules for comments from the public vide G.S.R. 1011(E) dated 29.12.2015 without consultation of DTAB whereas the Central Government proposed to consult the DTAB within six month of from the date of publication of these rules.

It will be observed that the proposed increased in fee is roughly six times of the existing fee structure except where very low fee had been specified for minor activities like grant of test licences etc.

The upward revision of the fees was necessitated because of the following factors.

1. In the 12th Five Year Plan, Drug Regulatory mechanism in terms of infrastructure; both physical and human resources at the Centre and the States is being strengthened. CDSCO is being strengthened by setting up of new offices, enhancing the drugs testing capacity, human resources development, introduction of E-governance etc. These activities however, necessitate exploration of more avenues for revenue generation and review of the existing fee structure etc. for achieving self sufficiency.

2. The cost of the registration in India is extremely low as compare to other countries. Concerns have been expressed over the import of Active Pharmaceutical Ingredients (APIs) from China which is over 60% of the total API requirement of the country. In India registration per product costs about \$1000 while similar registration costs about \$35,000 per product in China. This is having impact on Indian bulk drug industry.
3. The fees charged for grant of various manufacturing and sale licence by the State remained constant for well over ten years. This spite the fact that cost index in the country as increased manifold.

DTAB after deliberations agreed that in principle the fees are required to be raised for providing services under the rules. The quantum of increase may however be decided by the Government in consultation with the stakeholders.

## AGENDA NO. 7

### CONSIDERATION OF THE PROPOSAL TO MAKE A PROVISION UNDER THE DRUGS AND COSMETICS RULES, 1945 FOR PROVIDING EXEMPTION IN RESPECT OF PROVISIONS OF SCHEDULE M RELATING TO GOOD MANUFACTURING PRACTICES IN THE CASE OF MANUFACTURE OF DRUGS FOR EXPORT ONLY

The proposal to make a provision under the Drugs and Cosmetics Rules, 1945 for providing exemption in respect of provisions of Schedule M relating to Good Manufacturing Practices in the case of manufacture of drugs for export only was considered by DTAB in its 70<sup>th</sup> meeting held on 18.08.2015, in the light of recommendations of the Ministry of Commerce and Industry and request from certain manufacturers in the country for creating ease of business.

The DTAB had recommended to provide the following exemption under Schedule K in this regard.

<i>Class of drugs</i>	<i>Extent and conditions of exemption</i>
<i>Bulk drug or finished formulation manufactured for export only.</i>	<i>The provisions of Chapter IV of the Act and rules thereunder which require the licensee to conform to the provisions of Good Manufacturing Practices as prescribed under Schedule M subject to the condition that the manufacturing facilities have been inspected and registered by the regulatory authorities of the importing country in respect of compliance to the good manufacturing practices for the purpose of import into that country.</i>

On examination of the proposal for processing the amendment it was observe that the concerns regarding the quality of drugs exported from India are received now and then. Many of the importing countries take into consideration the mandatory requirements regarding Good Manufacturing Practices which are required to be followed by the manufacturers of drugs in the country. India is exporting to more than 200 countries and many countries of the third world do not have necessary infrastructure of testing and inspections of Indian exporters and depend upon the mandatory Good Manufacturing Practices followed by Indian manufacturers.

The DTAB after deliberations recommended that the proposed amendment need not to be pursued as it may in the long run prove to be counterproductive. The drugs produced in the country are required to comply with the mandatory provisions of Good Manufacturing Practices.

## AGENDA NO. 8

### CONSIDERATION OF THE PROPOSAL TO SIMPLIFY THE PROVISIONS RELATING TO REGISTRATION OF COSMETICS IMPORTED INTO THE COUNTRY UNDER THE DRUGS AND COSMETICS RULES, 1945

The proposal to amend the Drugs and Cosmetics Rules, 1945 to simplify the provisions relating to registration of cosmetics imported into the country and specifying limits of mercury were considered in the 70th meeting of DTAB on the basis of the report of the sub-committee. The proposal was considered in view of the difficulties expressed by certain importers in respect of compliance to the various provisions introduced under the Drugs and Cosmetics Rules, 1945 in respect of registration of cosmetics imported into the country.

The DTAB had agreed to the recommendations of the sub-committee for the amendment of the rules as under:

1. "Rule-129: Registration of cosmetic products imported into the country.- No cosmetic shall be imported into India unless the product is registered under the Rules by the licensing authority appointed by the Central Government under rule 21 or by any person to whom such powers may be delegated under rule 22 **or unless otherwise the products are complying with the standards specified in Drugs and Cosmetics Rules, 1945**"
2. "Rule 129H: Labelling and Packing of Cosmetics:- No cosmetic shall be imported unless it is packed and labelled in conformity with the rules in Part XV. Further the label of imported cosmetics shall bear registration certificate number of the product and the name and address of the registration certificate holder for marketing the said product in India **or in case the products are not registered, the importer shall give undertaking at the port entry that products are manufactured by the manufacturer stated on the label**".
3. "Rule 135A: Import of cosmetics containing mercury compounds prohibited.-No cosmetic shall be imported which contains mercury compounds. **Provided the presence of traces of unintentional mercury should not exceed 1 parts per million (ppm) in finished cosmetics. Provided further that for those cosmetics intended for use only in the area of the eye, level of mercury should not exceed more than 65 parts per million (0.0065 percent) of mercury, calculated as the metal, as a preservative**"

4. "Rule 145D: Prohibition of manufacture of cosmetics containing mercury compounds.-No cosmetic containing mercury compounds shall be manufactured. ***Provided the presence of traces of unintentional mercury should not exceed 1 parts per million (ppm) in finished cosmetics. Provided further that for those cosmetics intended for use only in the area of the eye, level of mercury should not exceed more than 65 parts per million (0.0065 percent) of mercury, calculated as the metal, as a preservative***"

The proposed amendments were processed and forwarded to the Legislative Department of Ministry of Law and Justice for their approval. The law Ministry did not agree to the proposed amendments as these were contradictory in nature.

In regard to the provision relating to presence of mercury in cosmetics, it was proposed to amend the rule 135A and rule 145D as under:

**"Rule 135A: Prohibition of import of cosmetics containing mercury.-** Cosmetics imported into the country shall not contained mercury more than-

- (i) in cosmetics intended for use only in the area of the eye, level of mercury should not exceed more than 65 parts per million (0.0065 percent) of mercury, calculated as the metal, as a preservative.
- (ii) In other finished cosmetic products unintentional mercury should not exceed 1 parts per million (ppm).

**"Rule 145D: Prohibition of use of mercury compounds in cosmetics.-** Cosmetic manufactured in the country shall not contained mercury more than-

- (iii) in cosmetics intended for use *only in the area of the eye, level of mercury should not exceed more than 65 parts per million (0.0065 percent) of mercury, calculated as the metal, as a preservative*
- (iv) In other finished cosmetic products *unintentional mercury should not exceed 1 parts per million (ppm).*

The DTAB after deliberations agreed to the amendment of rule 135A and 145D relating to presence of mercury compounds in cosmetics. In regard to the proposal of simplification of registration procedures it was recommended that the provisions for registration may be simplified making it easier for the importers to import cosmetics into the country without compromising the quality of the cosmetics imported into the country.



## **AGENDA NO. 9**

### **CONSIDERATION OF THE PROPOSAL TO INCLUDE CERTAIN DRUGS UNDER SCHEDULE H OF THE DRUGS AND COSMETICS RULES, 1945**

The proposal to amend the Schedule H of the Drugs and Cosmetics Rules, 1945 was considered in the 70<sup>th</sup> meeting of the DTAB held on 18.08.2015 and it was recommended that apart from the inclusion of the drug Etizolam in Schedule H the new drugs approved by the DCG(I) for marketing as Schedule H or Schedule H1 drugs should also be included in the respective Schedules.

Schedule H was last amended in 2006 and has over 500 drugs included under it. Since then a large number of drugs have been approved by the office of DCG(I) and at present more than 350 drugs are required to be added to the above list. It may be further mentioned that the grant of new drugs is a continuous process and large number of drugs are added to it every year. It is found to be very inconvenient and difficult to amend the Schedule H at sort intervals and monitor compliance of the rules for such a large number of drugs.

The DTAB after deliberations recommended that a provision may be introduced under the rules that the list of drugs notified by the DCG(I) or the Ministry of Health and Family Welfare shall be labeled as per provisions applicable for Schedule H or H1 drugs.

## AGENDA NO. 10

### CONSIDERATION OF THE PROPOSAL TO AMEND ENTRY NUMBER 27 OF SCHEDULE K RELATING TO ORAL REHYDRATION SALTS

The Drugs and Cosmetics Rules, 1945 under rule 23 provides that drugs specified in Schedule K shall be exempted from the provisions of Chapter IV of the Act and the rules made there under to the extent and subject to conditions specified in that Schedule.

The entry 27 provides exemption to in respect of oral rehydration salt with the following formula:-

- Sodium Chloride 3.5 g / litre:
- Trisodium citrate dihydrate 2.9 g/ litre.
- Potassium Chloride 1.5 g/litre.

May be replaced by Sodium bicarbonate (Sodium hydrogen Carbonate) 2.5 g/litre, when citrate salt is not available.

The ORS formulation was revised in I.P. addendum of 2005 to low osmolarity formulation and included in the I.P. 2014 wherein the quantities of Sodium Chloride and Dextrose are as under:

“Composition of the formulation in terms of the amount in g, to be dissolved in sufficient water to produce 1000 ml.”

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| • Sodium Chloride                                  | 2.6           |
| • Dextrose (anhydrous) or<br>Dextrose mono-hydrate | 13.5<br>14.85 |
| • Potassium chloride                               | 1.5           |
| • Sodium Citrate                                   | 2.9           |

The DTAB recommended amending the entry 27 of the Schedule K to be in line with the formulation of ORS provided under I.P.

## **AGENDA NO. 11**

### **CONSIDERATION OF THE PROPOSAL OF NOTIFYING NIB, NOIDA AS CENTRAL DRUG LABORATORY FOR TESTING OF VACCINES**

The proposal to amend rules 3-A of the Drugs and Cosmetics Rules, 1945 to notify NIB, Noida as Central Drug Laboratory for testing of the following vaccines which are presently tested as CDL, CRI, Kasuli, was considered the DTAB in its 70<sup>th</sup> meeting held on 18.08.2015.

- (a) BCG vaccine;
- (b) Live Attenuated Measles vaccine;
- (c) Live Attenuated Rubella vaccine;
- (d) Cell culture rabies vaccines.

DTAB after deliberations did not agree to the proposed amendment.

The Ministry of Health has now requested that the proposal may again be placed before DTAB for its reconsideration and the recommendations may include specific reasons or grounds to support the recommendations for the purpose of transparency.

The DTAB after deliberations agreed that CDL, CRI, Kasuali has been notified as Central Drug Regulatory for vaccines and is functioning satisfactorily and there is no need to notify another lab for the purpose at present.

## **AGENDA NO. 12**

### **CONSIDERATION OF PROPOSAL TO EXTEND VALIDITY OF FREE SALE CERTIFICATE TILL THE EXPIRY OF MANUFACTURING LICENCE UNDER THE PROVISIONS OF DRUGS & COSMETICS RULES, 1945**

Under the provisions of Drugs & Cosmetics Act, 1940, provisions regarding grant of manufacturing and sale licences are governed by the State Licensing Authorities. The said authorities grant Free Sale Certificates in respect of drugs manufactured by the manufacturers under their jurisdiction them for export purpose. At present there is no provision for grant of FSC for export purpose. However State Licensing Authority (SLA) issues Free Sale Certificate (FSC) with the validity of two years for export purpose to the manufacturer.

The grant of Manufacture for Drugs including medical devices with validity of 5 years is issued by the state licensing authority (SLA) after verification of Good Manufacturing Practices (GMP). Further Free Sale Certificate with validity 2 years for manufacture having valid manufacturing license is granted.

A concern was raised by Medical Devices Associations at various forums time to time to extend the validity of FSC for notified medical devices till the expiry of the manufacturing license. In order to address the concern and to ease the business, it was decided that State Licensing Authority may issue Free Sale Certificate with the validity of a manufacturing license. The office of DCG(I) has accordingly, written to all the State / UT Drug Controllers that in order to promote the export o the country, the State Licensing Authority may issue Free Sale Certificate to the manufacturer having the validity upto the expiry of the manufacturing license.

DTAB after deliberations agreed that the free sale certificate could be issued till the validity of the manufacturing licence to create ease of business. It also agreed that a fee of Rs. 5000 may be charged per application from the manufacturer for providing this service.

## **AGENDA NO. 13**

### **CONSIDERATION OF PROPOSAL TO CHARGE FEES FOR INSPECTION OF THE IMPORTED CONSIGNMENTS AND DRAWING OF SAMPLES OF DRUGS INCLUDING MEDICAL DEVICES FOR TEST ANALYSIS AT CUSTOMS UNDER THE PROVISIONS OF DRUGS & COSMETICS RULES**

Section 11 of the Drugs and Cosmetics Act, 1940 provides that the Customs Collector or any other officer of the Government authorized by the Central Government in this behalf, may detain any imported package which he suspects to contain any drug the import of which is prohibited under this Chapter and shall forthwith report such detention to the Drugs Controller, India, and, if necessary, forward the package or sample of any suspected drug found therein to the Central Drugs Laboratory.

In this connection, it is proposed to charge fees for providing the services of handling the consignments of drugs and medical devices imported into the country at the various designated ports. The officer posted at the port is required to examine each and every consignment imported into the country to ensure that it conforms to the provisions of the Drugs and Cosmetics Rules, 1945 and also draw samples for test, at random, to ensure that the drugs imported conform to the quality parameters.

For this purpose it is proposed to charge a fee of Rs. 500/- or so, for examination of each consignment of drug or medical devices imported under the licence granted a Form 10 or 10A of the Drugs and Cosmetics Rules, 1945. The fee shall be required to be deposited in the designated head of account by the importer and the challan submitted along with the bill of entry at the port.

The DTAB agreed in principle for charging of fees for examination of the consignments. However, the quantum of the fee may be decided in consultation with the stakeholders by the Government.

## AGENDA NO. 14

### **CONSIDERATION OF PROPOSAL TO AMEND RULE 65 OF THE DRUGS AND COSMETICS RULES, 1945 TO PROVIDE THAT THE CHEMIST MAY OFFER FOR SUPPLY A DRUG FORMULATION CONTAINING THE SAME INGREDIENTS BUT IN GENERIC OR OTHER CHEAPER BRAND NAME**

The Department of Pharmaceuticals has launched a country wide campaign for opening of Jan Aushadhi stores in the country under the Pradhan Mantri Jan Aushadhi Yojana. The drugs covered in this scheme would be generic drugs that would be available at lesser prices than the market price and this way people could have access to the expensive drugs at discounted prices. Generic medicines are those medicines which are not branded but have the same efficacy as that of their branded and expensive counterparts.

Under sub-rule 11A of rule 65 of the Drugs and Cosmetics Rules, 1945 it is provided that the Chemist shall not supply any other preparation whether containing the same substance or not in lieu thereof to the prescribed drug. The sub-rule reads as under:

*“11A. No person dispensing a prescription containing substances specified in Schedule H and Schedule H1 or X may supply any other preparation, whether containing the same substances or not in lieu thereof.”*

It was proposed to amend the clause as under to authorize the chemist to sell the matching salt of the branded medicines prescribed by the doctor to the patient especially at Jan Aushadhi stores which will be making available generic medicines at affordable prices.

“11A. Person dispensing a prescription containing substances specified in Schedule H and Schedule H1 or X may offer for supply another preparation, containing the same substances in generic or other brand name.”

As there is no guarantee that the bioavailability of the generic medicine so offered by the chemist will be the same as prescribed by the physician and the lack of same effectiveness of the generic medicine may lead to harmful effect on the patient, the DTAB did not agree to the proposed amendment.

## AGENDA NO. 15

### **CONSIDERATION OF THE PROPOSAL TO AMEND SCHEDULE D I AND D II OF THE DRUGS AND COSMETICS RULES, 1945 REGARDING THE GMP CERTIFICATION BY THE REGULATORY AUTHORITY OF THE COUNTRY OF ORIGIN FOR IMPORT OF DRUGS INTO INDIA**

The import of drugs in the country is regulated under the Drugs and Cosmetics Rules, 1945 through the system of registration and import licence. The manufacturers abroad who intend to export drugs to India are required to obtain registration certificates for facilitating the import of his products into India. For this purpose the applicant is required to furnish information and undertaking as specified in Schedule D-I and D-II of the Drugs and Cosmetics Rules, 1945. The specific clauses in the Schedules are as under.

#### SCHEDULE D I

“2.3 A copy of Good Manufacturing Practice (GMP) certificate, as per WHO-GMP guidelines, or Certificate of Pharmaceutical Products (CPP), issued by the National Regulatory Authority of the foreign country concerned, in relation to the bulk drugs or formulations or special products, meant for import into India.”

#### SCHEDULE D II

“1.4 GMP certificate in WHO formats or certificate of pharmaceutical products (CPP) issued by National Regulatory Authority of the country of origin (duly notarized).”

WHO under its guidelines for good manufacturing practices in respect of pharmaceutical products moving in the international market has provided a WHO Certification Scheme for quality assurance. The models of the certificates required to be issued have been specified in the WHO Technical Reports Series 908. The Certificate of Pharmaceutical Products (COPP) and WHO GMP Certificates are required to be issued by the National Regulatory Authority of the country.

It has been observed that the many of the manufacturers abroad are unable to obtain WHO certificates as prescribed in the WHO guidelines, but these facilities have been inspected and internationally imports from such units has been permitted on the basis of the approval of these facilities by the ICH regulators.



European Countries as per European Directive 2011/83/EC on the community code relating to medicinal product for human beings require Written Confirmation from the National Regulatory Authority of the country of origin for import. India is issuing such Written Confirmation to the manufacturers exporting their drugs to the countries under European Union.

The Schedule D I and Schedule D II of the Drugs and Cosmetics Rules, 1945 are therefore proposed to be amended to include the certificate of written confirmation for active substances for export to EU countries as well as certificate issued by USA, Japan, Australia, Canada or EU for the purpose of permitting import of drugs into their country.

The sub-clause 2.3 of Schedule D I is therefore proposed to be amended as under:

“2.3. A copy of Good Manufacturing Practice (GMP) certificate as per WHO – GMP guidelines or Certificate of Pharmaceutical Products (CPP) or written confirmation for active substances exported to European Union equivalent to GMP certificate as per WHO – GMP guidelines, issued by the National Regulatory Authority of the country of origin or a copy of the certificate equivalent to GMP certificate as per WHO GMP guidelines issued by USA or Japan or Australia or Canada or European Union for the purpose of marketing of the drugs in their country, in relation to the bulk drugs or formulations or special products meant for import into India.”

The sub-clause 1.4 of Schedule D II is also therefore proposed to be amended as under:

“1.4 GMP certificate in WHO formats or Certificate of Pharmaceutical Products (CPP) or Written Confirmation for active substances exported to European Union equivalent to GMP certificate as per WHO – GMP guidelines, issued by the National Regulatory Authority of the country of origin or a copy of the certificate equivalent to GMP certificate as per WHO GMP guidelines issued by USA or Japan or Australia or Canada or European Union for the purpose of marketing of the concerned drug in their country.”

DTAB after deliberations agreed to the proposed amendment.

## **AGENDA NO. 16**

### **CONSIDERATION OF THE PROPOSAL TO EXTEND THE DATE OF IMPLEMENTATION OF THE NOTIFICATION S.O. 237(E) DATED 25.01.2016 ON ABLATION DEVICE**

The proposal to notify ablation device under Section 3(b) (iv) of the Drugs and Cosmetics Act, 1940 as drug to regulate its quality under the Drugs and Cosmetics Rules, 1945 was considered in the 70<sup>th</sup> meeting of DTAB held on 18.08.2015 and on the recommendations of the DTAB the ablation device was notified under Section 3(b) (iv) of the said Act vide S.O. 237(E) dated 25.01.2016 with immediate effect.

Representations have since been received from the stakeholders regarding the difficulties faced by them in complying with the provisions of the Drugs and Cosmetics Rules, 1945. In view of this it has been proposed that in the larger interest of the patients and smooth availability of device. The date of implementation of the notification may be extended for six months from the date of publication of the notification.

The DTAB recommended that the period of one year may be given for the implementation of the notification from the date of notification instead of six months so as to ensure smooth availability of the devices belonging to this category. DTAB further recommended that the device may be notified as CLAA item to be licenced for manufacture for sale or for distribution by the Central Licence Approving Authority appointed by the Central Government.

## AGENDA NO. 17

### CONSIDERATION OF THE RECOMMENDATIONS OF THE SUB-COMMITTEE OF DTAB ON HOMEOPATHY

In the 70<sup>th</sup> meeting the Drugs Technical Advisory Board (DTAB) held on 18.08.2015 on the recommendations of the DTAB the sub-committee of DTAB on Homeopathy was constituted to deliberate technical matters relating to Homeopathy and to give its recommendations to DTAB for further consideration.

The sub-committee in its 15<sup>th</sup> meeting held on 14.12.2015 and 09.03.2016 have made certain recommendation for consideration of the DTAB. The salient recommendations are as under:

- i. The licence fee for manufacture of homoeopathic drugs is proposed to be increased from Rs. 100 to Rs. 1000 and registration of new drugs from Rs. 200 to Rs. 1500.
- ii. Exemption under entry number 31 of Schedule K may be amended to provide for biochemic tissue remedies tablet form from 20 g to 30 g and homoeopathic potentised medicine pills from 8 g to 30 g.
- iii. Amendment of rule 67D regarding qualification of competent person in homoeopathic medicines.
- iv. Amendment of rule 67F in respect of sale of homoeopathic medicines.
- v. Banning of loose sale of homoeopathic medicines under rule 67G.
- vi. Amendment of Schedule M I relating to Good Manufacturing Practices and requirements of premises, plant and equipment for homoeopathic medicines.

The specific amendments agreed to by the DTAB are as under.

1. In the Drugs and Cosmetics Rules, 1945 (hereinafter referred to be as the principal Rules), in rule 67-D of the principal Rules, the following proviso shall be inserted, namely, “[Provided that for exhibiting at stalls purely of temporary nature put up by existing license holders at exhibitions need not obtain a separate license].”

2. In sub-rule (1) of rule 67-F of the principal Rules, after the existing proviso of sub-rule (1) of Rule 67-F, the following shall be inserted, namely.—

“A. Provided that the qualification for competent person for the purpose of licence in Form-20C shall be:-

- (a) Graduate in Homoeopathy or
- (b) Graduate in Homoeopathic or allopathic pharmacy, or
- (c) Graduate in any field with atleast 1 year experience of dealing in Homoeopathic medicines in a Homoeopathic clinic run by a registered Homeopathic Medical practitioner or homoeopathic pharmacy licensed for the purpose under the rules.”.

3. In Rule 67-G of the principal Rules,

a. The sub-rule (2) of rule 67-G of the principal Rules, shall be substituted, namely,

“(2) The sale of Homoeopathic medicines shall be conducted under the supervision of a person, competent to deal in Homoeopathic medicines in case of licence in 20C.

b. After the sub-rule (5), the following sub-rule shall be inserted, namely, “(5a) Sale of Homoeopathic medicines to be done in manufacturers sealed packing only. However, dispensing of medicines in globules, water or milk sugar or as prescribed by physicians may be done by the person having license in form 20C.”.

4. After sub-rule 2 of rule 85E of the principal Rules, a new sub-rule shall be inserted, namely, —

“2A. (1) Certificate of award of Good Manufacturing Practices Homoeopathy Drugs.— The certificate of Good Manufacturing Practices (GMP) to manufacturers of Homoeopathy Drugs shall be issued for the validity of licence to licensee who comply with the requirements of Good Manufacturing Practices (GMP) of Homoeopathy drugs as laid down in Schedule M1.

5. In schedule K of the principal Rules, for item 31,

a. under the column, “Class of Drugs”, for the words, “The following Homoeopathic Medicines, namely”, the following shall be substituted, namely, “All Homoeopathic Medicines”.

b. under the column, “Class of Drugs”, the existing items “a’ to “e” shall be omitted.

6. Amendments to Schedule M-1

1. In clause I of the Schedule M-1 of Drugs and Cosmetics Rules, 1945. General Requirements, for the words, “There shall be no open drains inside or outside the

manufacturing premises”, the following words shall be substituted, namely, There shall be no open drains inside or the manufacturing premises.”.

2. In sub-clause 2.1 of clause 2 of the Schedule M-1 of Drugs and Cosmetics Rules, 1945, for the words, “There shall be separate arrangements for handling and warehousing of materials of different origins”, the following words shall be substituted, namely, “There shall be separate arrangements for handling and warehousing of materials of different types.”.

3. In Clause 3 of the Schedule M-1 of Drugs and Cosmetics Rules, 1945.—

a. in sub-clause 3.1, for the words, “stainless steel of grade 304” mentioned in items (v), (vi) and (ix) shall respectively be substituted, namely, “stainless steel of grade not below 304”.

b. in sub-clause 3.1, for the words and figures, “The area and facilities for manufacture of mother tinctures and mother solutions shall be separate and shall be 55 square meters for each for basic installations.” The following shall respectively be substituted, namely, “The area and facilities for manufacture of mother tinctures and mother solutions shall not be less than 55 square meters for basic installations.”.

c. in sub-clause 3.3, under the Note, in item (b), for the words, “Measures used shall be of neutral glass”, the following words shall be substituted, namely, “Measures used shall be of neutral glass or Stainless steel.”.

d. in sub-clause 3.4, for the words, “The following basic equipment and facilities shall be provided”, the following words shall be substituted, namely, “The following basic equipment and facilities shall be provided as per the requirement.”.

e. In sub-clause 3.6, for the words, “The following basic equipment and facilities shall be provided”, the following words shall be substituted, namely, “The following basic equipment and facilities shall be provided as per the requirement.”.

4. In sub-clause 4.3 of clause 4 of the Schedule M-1 of Drugs and Cosmetics Rules, 1945, for the item (ii) “(ii). Dissecting Microscope” the following item shall be substituted, namely, “(ii). Compound Microscope”.

5. In Clause 5 of the Schedule M-1 of Drugs and Cosmetics Rules, 1945,—

a. in sub-clause 5.1, for the sub-item (iv) of item (a), the following is substituted, namely, “(iv). the material shall comply with Pharmacopoeial standards”.

b. In sub-clause 5.1, in the sub-item (v) of item (a) the words “and should not be more than six months old” shall be omitted.

c. In sub-clause 5.1, for the sub-item (i) of item (b) the following sub-item shall be substituted, namely, “(i) the raw materials of plant origin shall be as per Pharmacopoeia.”.

d. In sub-clause 5.1, for the sub-item (vi) of item (b) “(vi) the materials shall be in open mesh bags or in suitable material which permits the passage of air inside” the following sub-item shall be substituted, namely, “(vi) storing of fresh herbs shall be in open mesh bags and for others, suitable closed containers.

e. in sub-clause 5.1, for the sub-item (vii) of item (b) the following sub-item shall be substituted, namely, “(vii) each consignment of the material shall be accompanied by a statement of the supplier’s name; name of the plant with description of the part supplied; the Pharmacopoeial reference, place of collection, date of packaging and weight.”.

6. In Clause 6 of the Schedule M-1 of Drugs and Cosmetics Rules, 1945, the sub-clause 6.4 shall be omitted.

7. In clause 9 of the Schedule M-1 of Drugs and Cosmetics Rules, 1945, a Note shall be inserted, namely, “Note: Not applicable to Homoeopathic dilutions and back potencies, if preserved under hygienic conditions.”.

The meeting ended with the vote of thanks to the Chair.

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