Union cabinet approves ₹5 Lakh health cover for seniors 70+ under Ayushman Bharat

On 11th September 2024, The Union Cabinet, led by Prime Minister Narendra Modi, approved health coverage of ₹5 lakh per annum for all senior citizens aged 70 and above under the Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB PM-JAY). This decision, announced by Union Minister Ashwini Vaishnaw, aimed to benefit 4.5 crore families across India. Regardless of socio-economic status, senior citizens in this age group were eligible for the scheme, with a distinct card issued to avail benefits. Those already covered under AB PM-JAY received an additional ₹5 lakh top-up for senior family members, while those under other public health schemes like CGHS or ECHS could either continue with their existing plans or opt for AB PM-JAY.

Ayushman Bharat, the world's largest publicly funded health assurance program, provides ₹5 lakh annual coverage per family for secondary and tertiary care. The scheme had previously benefited 55 crore people, resulting in over ₹1 lakh crore in public healthcare savings. Initially covering 10.74 crore families, the beneficiary base was later expanded to 12.34 crore families. The government emphasized its commitment to accessible and affordable healthcare, marking this decision as part of the continued expansion of AB PM-JAY's reach to senior citizens nationwide.

Government introduces uniform marketing code for medical devices sector

The government implemented a uniform marketing code for the medical device industry on 6th September 2024 to curb unethical practices. The Department of Pharmaceuticals (DoP) issued a notification urging medical device associations to prohibit activities such as hosting workshops abroad for healthcare professionals or offering hotel stays and monetary grants. The notification required associations to establish an Ethics Committee for Marketing Practices in Medical Devices (ECMPMD) and link their procedures to the Uniform Code of Pharmaceuticals Marketing Practices (UCPMP) portal.

The code mandated that medical devices must not be promoted before receiving regulatory approval, and any claims of safety must be qualified. Companies were prohibited from offering gifts, cash payments, or travel arrangements for healthcare professionals and their families for attending conferences, seminars, or workshops. Hospitality services such as hotel stays, luxury cuisine, or resort accommodations were also banned.

The DoP further instructed companies to disclose expenses related to conferences, workshops, and distribution of evaluation samples. Medical device companies were required to upload the Uniform Code for Marketing Practices in Medical Devices (UCMPMD) 2024 on their websites, including detailed complaint procedures linked to the DoP's UCPMP portal. Earlier, the DoP had introduced a similar code for pharmaceutical companies.

MoHFW approves shorter, more effective treatment regimen for MDR-TB

On 6th September 2024, The Union Ministry of Health & Family Welfare approved the introduction of the BPaLM regimen, a novel and shorter treatment for multi-drug-resistant tuberculosis (MDR-TB), as part of India's National TB Elimination Programme (NTEP). The BPaLM regimen, which includes the anti-TB drug Pretomanid in combination with Bedaquiline, Linezolid, and Moxifloxacin, was validated after a thorough review by subject experts and a Health Technology Assessment to ensure safety and cost-effectiveness. Pretomanid had previously been approved for use in India by the Central Drugs Standard Control Organisation (CDSCO).

This new regimen offers significant advantages over traditional MDR-TB treatments, which can last up to 20 months and cause severe side effects. The BPaLM regimen can cure drug-resistant TB in just six months, with a higher success rate and fewer side effects. India's 75,000 MDR-TB patients would now benefit from this shorter, more effective treatment, reducing overall costs.

The government's approval of the BPaLM regimen is expected to accelerate the country's progress towards eliminating TB by 2025, five years ahead of the global target. A nationwide rollout plan was being prepared, with a focus on building healthcare capacity for safe administration.

Cancer drugs get GST relief, making treatment more affordable

On September 9, 2024, The GST Council, chaired by Finance Minister Nirmala Sitharaman, slashed the Goods and Services Tax on three key cancer drugs—trastuzumab deruxtecan, osimertinib, and durvalumab—from 12% to 5%. These drugs, which treat various cancers like HER2-positive breast cancer and non-small cell lung cancer, are expected to become more affordable for patients, potentially reducing monthly treatment costs by Rs 15,000 to Rs 20,000.

Experts welcomed this reduction, emphasizing its potential to alleviate the financial burden on patients, particularly those without insurance or with high out-of-pocket costs. Dr. Amit Upadhyay suggested that more expensive cancer drugs, such as pembrolizumab and nivolumab, should also be considered for GST relief to further support patients. This move follows previous efforts to reduce treatment costs, including the concession on the drug dinutuximab, which was introduced earlier in 2023 for treating neuroblastoma, a rare pediatric cancer.

Despite the reduction in GST, experts highlighted that cancer treatments in India still remain financially inaccessible to a large portion of the population. A study from the Tata Memorial Centre indicated that fewer than 3% of Indian cancer patients have access to advanced immunotherapies, which can cost as much as Rs 50 lakh annually. While the GST cut is a positive step, experts continue to advocate for broader measures to make cancer care more affordable and accessible.

Indian Immunologicals signs MoA with ICMR for zika vaccine development

On 13th September 2024, Indian Immunologicals Limited (IIL) signed a Memorandum of Association (MoA) with the Indian Council of Medical Research (ICMR) to advance the clinical development of a Zika vaccine. Under the MoA, ICMR agreed to fund the Phase I clinical trial, covering costs related to trial conduct, investigations, and monitoring at ICMR network sites across India.

Dr. K Anand Kumar, Managing Director of IIL, expressed enthusiasm about the collaboration, noting IIL's role in India's vaccine self-sufficiency and emphasizing the importance of affordable, effective vaccines for emerging diseases. Dr. Rajiv Bahl, ICMR DG, described the MoA as a significant step towards self-reliant and developed India, highlighting the operational Phase I trial sites that now allow for domestic safety studies of innovative medical technologies.

Dr. Priyabrata Pattnaik, Deputy Managing Director of IIL, mentioned the company's ongoing work on vaccines for other emerging diseases, including Zika, Kyasanur Forest Disease (KFD), Chikungunya, and a SARS-CoV-2 intra-nasal booster. The Zika vaccine, developed in partnership with Griffith University, Australia, had completed pre-clinical evaluations and received permission to produce GMP-grade materials for clinical trials.

Zika, a mostly mosquito-borne viral infection, can cause serious conditions such as microcephaly in infants if contracted during pregnancy. As of July 22, 2024, India had reported 537 Zika cases, with no existing vaccine for prevention.

NMC launches portal for unique doctor IDs registration

The National Medical Commission (NMC) initiated the registration process for all MBBS doctors eligible to practice in India through its newly launched portal on 15th September 2024. This process, which aimed to assign a unique National Medical Register (NMR) ID to each doctor, began immediately, as announced by NMC Secretary Dr. B Srinivas. The NMR, a dynamic database, would serve as a central repository of verified medical practitioners, with their authenticity confirmed via Aadhaar IDs.

Doctors registered on the Indian Medical Register (IMR) were required to re-register on the NMR. The portal interconnected medical institutions, state medical councils (SMCs), and the NMC. Some data would be accessible to the public, while other details were restricted to regulatory bodies like the Ethics & Medical Registration Board (EMRB) of the NMC.

To register, doctors needed Aadhaar IDs, digital copies of their MBBS degree and registration certificates. Once verified by respective SMCs and institutions, a unique NMR ID would be issued. The portal offered features like application tracking, adding qualifications, and issuing digital doctor certificates.

The NMR was expected to provide comprehensive data on India's 13 lakh doctors. Launched by Union Health Minister J.P. Nadda, the portal was described as a vital step in strengthening the digital healthcare ecosystem.

Shri J P Nadda urges hospitals to embrace digital technology for patient data management

On 17th September 2024, Union Health Minister J.P. Nadda urged hospitals to adopt digital technology for managing healthcare data during a virtual address at the patient safety conference organized by the National Accreditation Board for Hospitals (NABH) on World Patient Safety Day. He emphasized that digital solutions would enhance data security, interoperability, and accuracy, addressing challenges faced when patient information is transferred between hospitals. Nadda highlighted the government's efforts to promote innovations and expand digital healthcare, particularly through telemedicine and e-health services in remote areas, which have proven lifesaving for patients.

NABH, which runs accreditation programs for healthcare institutions, introduced India's first digital health standards for hospitals in September 2023. Rizwan Koita, Chairman of NABH, revealed that 275 hospitals had applied for certification, with 100 hospitals already receiving it. He noted that the standardization of Hospital Information Systems (HIS) and Electronic Medical Records (EMR) would foster a more efficient and interconnected healthcare system. NABH also launched several new initiatives, including the E-Mitra Chatbot, Mitra Physical Centres, entry-level certifications, e-skilling modules, and an architect empanelment system. Jaxay Shah, Chairperson of the Quality Council of India, added that these initiatives would make Indian healthcare more efficient, transparent, and patient-centric.

WHO calls for healthy diets and exercise to combat obesity in South-East Asia

On 18th September 2024, The World Health Organisation (WHO) urged South-East Asian countries to enhance policies promoting healthy diets and physical activity to address rising obesity and non-communicable diseases (NCDs). The WHO highlighted that rapid urbanization and economic growth in the region have led to unhealthy diets, reduced physical activity, and more sedentary lifestyles. Currently, nearly 74% of adolescents and 50% of adults in the region are not sufficiently active. Moreover, approximately 5 million children under five and 37.3 million children aged 5 to 19 are affected by overweight and obesity.

Saima Wazed, Regional Director of WHO South-East Asia, noted that the increase in overweight and obesity has contributed to a surge in NCDs, including cardiovascular disease, diabetes, and cancer, which now account for nearly two-thirds of all deaths in the region. Wazed emphasized that achieving healthier outcomes requires not just knowledge and behavior changes but also the creation of supportive environments. Major obstacles include inadequate multisectoral coordination, industry lobbying protecting commercial interests, and capacity gaps among stakeholders.

Indo-French Healthcare Conference 2024: Collaboration for better health

On 19th September 2024, Business France India hosted the 2024 Indo-French Healthcare Conference at the Embassy of France, gathering healthcare professionals, medical experts, and industry leaders from India and France. Organized in collaboration with the French Institute in India (IFI) and the Medical Technology Association of India (MTaI), the event highlighted the growing synergies between the two countries' healthcare sectors. The conference was inaugurated by France's Ambassador to India, H.E. Mr. Thierry Mathou, with chief guest Dr. Vinod K. Paul, member of NITI Aayog.

Dr. Paul emphasized the significance of Indo-French partnerships in healthcare, particularly in innovation and frontier technologies like artificial intelligence. The event, attended by 85 participants, received support from key organizations, including IFCCI, CEFIPRA, Invest India, the French Healthcare Association, and APHP.

Discussions focused on emerging opportunities in India's healthcare landscape, joint R&D, and innovations in pharma and biotech. Pavan Choudary, Chairman of MTaI, highlighted the collaboration between French MedTech pioneers and Indian healthcare providers. H.E. Thierry Mathou reiterated France's commitment to advancing healthcare cooperation.

Prominent companies such as 2PS, Inlog S.A.S, Peters Surgical, and BioMérieux showcased cutting-edge solutions. Topics included MedTech innovations, skill development, and global transformations in medical technology.

Indian pharma sector set for 8-10% revenue growth this fiscal: CRISIL

The Indian pharmaceutical sector is projected to achieve 8-10% revenue growth in the current fiscal year, following a 10% rise last year, according to a CRISIL study. The growth was expected to be driven by strong exports to regulated markets, recovery in semi-regulated markets, and steady domestic demand.

Operating margins were forecasted to improve by 70-80 basis points, reaching approximately 22.5%, due to easing pricing pressures in the U.S. generics market. The sector's solid cash generation and low financial leverage were anticipated to sustain stable credit profiles, despite acquisitions in key therapeutic areas.

The study, covering 190 drug manufacturers, revealed that revenue was split evenly between domestic sales and exports. Exports were primarily made up of formulations, with 58% sent to regulated markets like the U.S. and Europe. Formulation exports were expected to grow by 12-14% due to drug shortages and new product launches.

Domestic revenue was forecasted to grow by 7-9%, driven mainly by new product launches, particularly in the non-NLEM portfolio. Rising chronic diseases and increased health awareness were likely to boost revenue. Despite potential risks such as debt-funded acquisitions and regulatory delays, the sector's financial risk profile remained solid, with a stable working capital cycle and strong cash flows.

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