

Minutes of the 11th Meeting of the Central Supervisory Board (CSB) constituted under the Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994 held on 23rd September 2004

The list of participants is annexed.

The meeting was presided over by Shri Anbumani Ramadoss, Hon'ble Union Minister for Health and Family Welfare and Chairperson of the Central Supervisory Board.

Joint Secretary (Policy) welcomed the members of the Board. The agenda-wise discussion was thereafter initiated, as follows :

Agenda -I Confirmation of the Minutes of the 10th Meeting of the Central Supervisory Board (CSB) held on 24.12.2003

The minutes of the last meeting of the CSB held on 24.12.2003, earlier circulated to the members for their perusal, were confirmed by the Board.

Agenda -II Action Taken Report on the Decisions taken/Recommendations made in the 10th Meeting of Central Supervisory Board held on 24.12.2003

The members noted the action taken on various decisions/recommendations of the last meeting. The following points were discussed in detail:

1. Amendment of Section 2(m) of the PNDT Act for permitting Homoeopathic and Ayurvedic doctors having proper training to use ultrasound/imaging machines for diagnosis.

JS(P) informed that the first phase of the survey carried out by PRCs to find out as to how many 'untrained' and non-specialist doctors (both allopathic &

non-allopathic disciplines) were using ultrasound machines had been completed. The second part of the survey was investigative and would attempt to determine the extent of use/misuse of machines. This part of the survey was ongoing and the final survey reports would be available in two months time.

2. Accreditation/recognition of institutions for imparting training in ultrasonography/image scanning.

JS(P) informed the members that the Department had taken up the matter with the MCI, which had expressed its reservation on the proposal of conducting short-term training in ultrasonography/image scanning. A meeting was thereafter held with MCI, officers from the DteGHS and other experts, and a decision was taken to take a final view on the issue only after the results of the survey of ultrasound centres were available from PRCs.

HFM pointed out that the main issue was the identification of institutes where training in ultrasonography could be imparted to the doctors so that they were able to register their clinics as per the Act. Col. (Dr.) C.S. Pant, President, Indian Radiological and Imaging Association was of the view that a short-term training in ultrasonography was not adequate to equip the trainee with a complete understanding of the complications of the technique. Dr. Bela Makheeja, Sr. Consultant, Gyne & Obst. Batra Hospital, opined that the misuse of ultrasound technique was mainly done by unqualified, basically non-specialist, doctors only, since qualified doctors were reluctant to undertake sex selection due to fear of legal action. To the query of Dr. Mittal, in respect of number of unregistered machines, Director (PNDD) clarified that all States/UTs had given affidavits in the Hon'ble Supreme Court that all machines in their States/UTs had already been registered after the Court's directions in 2001 that any machine found being used at unregistered place should be seized and sealed. After the amendments to the Act, no manufacturer of ultrasound machines could sell them to any unregistered clinics. Therefore it was presumed that in the country all

ultrasound machines are registered and are used at registered places. The possibility of misuse was primarily of mobile ultra sound machines being taken to unregistered places.

On the question of accreditation/recognition of training institutes for imparting training in ultra sonography, it was clarified that prior to the amendment of the Act, MBBS doctors having an experience of conducting 100 ultra sonography procedures were qualified for registration. But after the amendment to the Act in 2003, six months training or one year experience in ultrasonography was required for carrying out ultrasonography procedure. The question, however, was of identification of institutions that would be recognized for the purpose of imparting such training and experience. An Expert Group under the chairmanship of DGHS had already suggested that only MCI recognized institutes/hospitals with bed strength of 500 or more should be recognized for purposes of imparting training. Dr. S.P. Aggarwal, DGHS clarified that only the duration and curriculum of training of doctors was to be decided by MCI in consultation with IRIA (Indian Radiological and Imaging Association), and thus should be expedited.

HFM desired that a comprehensive and holistic view, keeping in view the potential of misuse of the techniques needed to be taken. He directed that the Department of Family Welfare would take a view in the matter expeditiously in consultation with DGHS, MCI and IRIA.

Agenda-III Presentation on PC&PNDT Act and role of Central Supervisory Board

A presentation on the PNDT Act, role of Appropriate Authorities, the Central Supervisory Board, district-wise mapping of Child Sex Ratio (CSR) in age group 0-6 years, details of cases filed against the violators of the Act, and difficulties faced in the implementation of the Act was noted by the members.

Agenda-IV Survey of PRC – on Untrained doctors using ultrasound machines

JS (P) informed the members that the survey results from 15394 registered centres were available, out of which 3430 (22%) had been registered by MBBS doctors and 3964 (26%) by Gynaecologists. The number of Centres registered by BAMS/AYUSH doctors was 494 (3%) and those by Radiologists was 2540 (16%). Secretary (AYUSH) pointed out that the number of registered clinics by ISM&H doctors was very less in comparison to those registered by allopathic specialists, which clearly indicated that the use of ultrasound machines would not be confined to any one discipline of medicine only. Col. (Dr.) Pant emphasized that only radiologists be allowed to use the ultrasound machines - this was necessary to keep a check on the misuse of machines for sex determination by doctors of various disciplines. Dr. S.P. Aggarwal, DGHS was of the view that ultrasound machines were used by specialists of different disciplines for various ailments. For checking its misuse for sex determination, strict monitoring would be required in those cases where the scan is done on pregnant women who have two or more daughters.

Dr. Suneeta Mittal, HOD, Gynecology, AIIMS said that doctors themselves should be motivated not to misuse the technique, and only abortions done in second trimester of pregnancy be investigated. Dr. R.P. Soonawala was of the view that until 14-16 weeks after conception, the sex of the child could not be deciphered, so the ultrasound done before this duration would be mostly misleading. Secretary (AYUSH) said that preventive aspects should be given more prominence by using a multi-pronged approach as per cultural sensitivities in different reforms of the country. JS(P) informed that a National Surveillance Cell to strengthen the enforcement through intensive monitoring of the functioning of the district level authorities was being contemplated by DoFW. He further said that the reported violations of PNDT Act mostly centered around non-compliance of prescribed procedures rather than the more substantive issue of sex selection and foeticide.

Dr.(Mrs.)J.K. Shukla said that the issue be tackled from a gender sensitive perspective and could be looked at as medico-socio issue. A basic amendment in the laws to give property rights to females would definitely solve/minimize the problem of female foeticide, she felt.

Agenda-V National Advocacy Strategy

The National Advocacy Strategy on "Ending the Practice of Pre-birth Elimination of Females - Changing the Mind Set" was placed before the Board. Comments on the same from the members of the Board were invited so as to reach to Department of Family Welfare within two weeks time, so that the strategy could be finalized thereafter.

Agenda VI Reports on the visits of National Inspection Monitoring Committee (NIMC)

The reports of the NIMC were circulated as a part of the Agenda along with a summary of the observations/findings of the Committee. The Board noted the same. It was felt that the reports of the Committee presented a disappointed picture of the implementation of the Act in various States/UTs. JS(P) informed the members that these reports have been sent to the States for taking necessary action. He pointed out that all states have constituted Multi-member State Appropriate Authorities and Supervisory Boards except the States of Jharkhand and Tamil Nadu.

After the formal agenda was over, the members raised the following issues :

Dr. Suneeta Mittal pointed out that in Govt. hospitals where the number of patients for ultra sound diagnosis was very large, filling up of forms etc. was proving to be very time consuming. No useful purpose was being served through

maintenance of such detailed records. It was very difficult to catch the doctors who are misusing this technology for the purpose of sex determination only through scrutiny of records. She desired that this problem in hospitals like AIIMS should be attended to.

Col. (Dr.) C.S. Pant, President, Indian Radiology and Imaging Association, (IRIA) Pant desired that a uniform format be given for centres/clinics to send monthly report to the Appropriate Authority on the ultrasound done on pregnant women. He informed that the registered clinics were harassed for minor mistakes in filling up the forms etc. He requested to make due provisions in the Act allowing for upgradation of the ultrasound equipment with a clause for manufacturing companies to buy back, as they were presently reluctant to do so in view of the legal formalities. The redressal mechanism of the State i.e. State Supervisory Board should also meet periodically, he stressed.

HFM concluded by saying that the female foeticide was a serious issue particularly in the rich States like Punjab and Haryana, where people could afford diagnostic techniques; and should be dealt with strictly. He desired to have a meeting with members of the CSB shortly to have more detailed discussion on the various issues.

The meeting ended with vote of thanks to the Chair.

LIST OF PARTICIPANTS

1. Shri Anbumani Ramadoss,
Union Minister for Health and Family Welfare In Chair
2. Shri P. Mohandas,
Secretary,
Department of AYUSH.
3. Dr. S.P. Aggarwal
Director General of Health Services,
Dte. General of Health Services.
4. Shri N.S. Kang,
Joint Secretary(Policy)
Department of Family Welfare. Member Secretary
5. Shri B.K. Sinha,
Principal Resident Commissioner,
Gujarat.
6. Dr. S.K. Sharma,
Adviser(Ayurveda)
Department of AYUSH
7. Dr. Suneeta Mittal,
HoD, Gynaecology and Obst.,
AIIMS, New Delhi
8. Dr. Madhulika Kabre,
Addl. Professor,
Pediatrics, AIIMS
9. Dr. Bela Makhija,
Sr. Consultant (Gyne. & Obst.)
Batra Hospital, New Delhi
10. Dr. R.P. Soonawala,
Gynaecologist, Mumbai
11. Col. (Dr) C.S. Pant,
President, IRIA.

12. Dr. (Mrs) Jyoti Kiran Shukla,
Faculty – In-charge,
Institute of Labour Department,
Jaipur
13. Smt. Savithri,
Dy. Secretary,
Department of Women & Child Development
14. Shri M.K. Sharma,
Dy. Legal Adviser,
Ministry of Law and Justice
15. Smt. Madhu Bala,
Director(PNDT)
Department of Family Welfare
16. Smt. Sushama Rath,
Under Secretary(ID/PNDT)
Department of Family Welfare