

(c) and (d). There is no proposal under consideration at present to build up any separate buffer stock of sugar. The stock are being maintained by the sugar factories themselves in their godowns. During the last 1990-91 season, a quantity of 5.61 lakh tonnes was earmarked for export. As soon as the export of the aforesaid quantity is completed, further quantities would be made available for export keeping in view the production trends for this season.

[*Translation*]

Treatment of Cancer Patients

*5 SHRI B.L. SHARMA PREM:
SHRI PHOOL CHAND VERMA

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the estimated number of cancer patients during the last three years, State-wise;

(b) the places where hospital are situated for specialised treatment of such cancer patients;

(c) the number of patients treated cured and died in each of these hospitals during the last three years, State-wise; and

(d) the steps taken by the Government for better treatment of cancer patients during the Eighth plan period?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI M.L. FOTEDAR):

(a) It is estimated that at any point of time there are about 1.5 to 2 million cancer patients in the country. The State-wise number of cancer patients in the country is not available.

(b) The facilities for Surgical intervention and chemotherapy for treatment of cancer are available in almost all major hospitals in the country. The radio-therapy facilities for treatment of cancer patients are available at 77 places in the country as per the end set Statement-I. Central Government has recognised ten institution located at Ahmedabad, Bangalore, Bombay, Calcutta, Cuttack, Delhi, Guwahati, Gwalior, Madras and Trivandrum as Regional Cancer Centres which provide comprehensive diagnostic and treatment facilities for cancer.

(c) Statement-II showing the number of patients admitted and deaths in the Regional Cancer Centres is enclosed.

(d) A scheme for development of Oncology Wings of Government Medical Colleges/hospitals has been introduced during 1990-91 under the national Cancer Control Programme with a view to strengthening the cancer treatment facilities in the country. Simultaneously, a scheme for district projects for health education and early detection of cancer and pain relief measures has been taken up. Under these schemes, financial assistance is provided to the institutions/ State Governments. The scheme for financial assistance to Regional Cancer Centres and for setting up of Cobalt therapy units have been continued under the Programme.

STATEMENT-I

List of places where Radio-Therapy facilities for treatment of cancer are available in India State/U.T.wise

State/U.T.

Place(s)

Andhra Pradesh

Gunur, Hyderabad, Kakinanad, Kurnool, Warangal, Tirupati, Visakhapatnam

<i>State/U. T.</i>	<i>Place(s)</i>
Assam	Dibrugarh, Guwahati.
Bihar	Bokaro, Jamshedpur, Patna.
Chandigarh	Chandigarh
Delhi	Delhi
Gujrat	Ahmedabad, Baroda, Jamnagar, Rajkot, Surat.
Haryana	Rohtak
Himachal Pradesh	Shimla
Jammu and Kashmir	Srinagar, Jammu
Karnataka	Banglore, Gulbarga, Hubli, Mysore, Manipal.
Kerala	Trichur, Calicut, Kottayam, Trivandrum.
Madhya Pradesh	Bhopal, Gwalior, Indore, Jabalpur, Padmini, Raipur.
Maharashtra	Bombay, Nagpur, Solapur, Akola, Pune, Aurangabad, Miraj, Sangli
Manipur	Imphal
Meghalaya	Shillong
Orissa	Berhampur, Burla, Cuttack
Pondicherry	Pondicherry
Punjab	Amritsar, Ludhiana, Patiala
Rajasthan	Bikaner, Jodhpur, Udaipur
Tamil Nadu	Ambalikkai, Kancheepuram, Neyyoor, Thiruchirapalli, Coimbatore, Madurai, Madras, Vellore.
Tripura	Agartala
Uttar Pradesh	Agra, Aligarh, Gorakhpur, Allahabad, Bareilly, Kanpur, Lucknow, Varanasi.
West Bengal	Bankura, Calcutta.

STATEMENT-II

Statement showing the number of Patients Admitted and Deaths in the Regional Cancer Centres

<i>State/U.T. Institution</i>	<i>1988</i>		<i>1989</i>		<i>1990</i>	
	<i>Admitted</i>	<i>Deaths</i>	<i>Admitted</i>	<i>Deaths</i>	<i>Admitted</i>	<i>Deaths</i>
<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>
ASSAM						
Dr. B. Barooah Cancer Institute, Guwahati.	615	20	577	23	655	28
DELHI						
Institute Rotary Cancer Hospital, New Delhi.	3482	99	3745	73	4087	67
GUJARAT						
Gujarat Cancer and Research Institute, Ahmedabad.	6594	584	6554	520	5868	528
KARNATAKA						
Kidwai Memorial Institute of Oncology, Bangalore.	3117	290	3041	247	3226	180
KERALA						
Regional Cancer Centre, Trivandrum	3072	152	2877	174	3045	181

State/U.T. Institution	1988		1989		1990	
	Admitted	Deaths	Admitted	Deaths	Admitted	Deaths
1	2	3	4	5	6	7
MAHARASHTRA						
Tato Memorial Hospital, Bombay	9846	293	11015	355	11617	383
MADHYA PRADESH						
Cancer Hospital and Research Institute, Gwalior.	1590	36	2347	50	2931	66
ORISSA						
Regional Centre for Cancer Research and Treatment Society, Cuttack.	1932	65	1851	66	1627	70
TAMIL NADU						
Cancer Institute, Madras	4704	59	2723	42	4933	88
WEST BENGAL						
Chittaranjan National Cancer Institute, Calcutta.	1342*	214*	1456@	262@	1469£	230£

* Figures for 1988-89

@ Figures for 1989-90

£ figures for 1990-91

Priority to Cooperative/Public Sector in Sugar Industry

*6. SHRI PRABHU DAYAL
KATHERIA:
SHRI PANKAJ CHOWDHRY:

Will the Minister of FOOD be pleased to state:

(a) whether in view of scarcity of resources more emphasis is being given to the private sector in the new industrial policy;

(b) if so, the reasons for giving priority to the cooperative/public sector over the private sector in the revised guidelines issued for sugar industry recently;

(c) whether the production capacity of sugar mills in private sector is more than that of the mills in cooperative and public sectors;

(d) if so, whether the Government propose to review their policy in this regard; and

(e) if not, the reasons therefore?

THE MINISTER OF STATE OF THE MINISTRY OF FOOD (SHRI TARUN GOGOI): (a) In the new Industrial Policy, the requirement of various types of industrial approvals has been substantially reduced with a view to encourage all sectors of the industry, whether public, private or cooperative.

(b) In the sugar industry, preference has been given to the cooperative sector in licensing of new sugar factories in order to improve productivity by associating the farmers, who supply the basic raw material, in the management of the factory. Further, the Co-operative and Public Sectors have often to step in to set up factories in certain new areas and thereby promote the overall de-

velopment of such areas.

(c) No, Sir.

(d) and (e). No change in policy is contemplated at present in view of (b) above.

[English]

'Substitutes of Timber Fuel'

*7. SHRIMATI D.K. BHANDARI: Will the Minister of ENVIRONMENT AND FORESTS be pleased to state:

(a) whether various substitutes of timber have been developed in the country;

(b) if so, the details thereof;

(c) whether the Government propose to popularise the substitutes of timber to discourage deforestation;

(d) if so, the details of the proposals drawn up in this regard; and

(e) if not, the reason therefor?

THE MINISTER OF STATE OF THE MINISTRY OF ENVIRONMENT AND FORESTS (SHRI KAMAL NATH): (a) Yes, Sir.

(b) Among various substitutes of timber developed in the country, are products of PVC Steel, Aluminium, Reinforced Cement Concrete (RCC) and Medium Density Fibre Board (MDF) out of agricultural wastes.

(c) Yes, Sir.

(d) In order to popularise the use of wood substitutes, following steps have been taken.

Excise duty on Medium Density Fibre Boards (MDF) has been reduced;