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VEPACHEDU EDUCATIONAL FOUNDATION

The Andhra Journal of Industrial News

IP and Industry News

Contents:

Rivals Collaborate

Abuse of Medications

Artificial Lung

Doxorubicin's New Clothes

Big Pharma's Generic Interest

Stem Cells from Menstrual Blood

India's Demographics

Patent Monopoly in India is not Automatic

Indian Traditional Medicine Practitioners

Rivals Collaborate

As attempt after attempt to create new Alzheimer's medications have failed, in an unusual step, a dozen competing drug companies have agreed to share data on thousands of Alzheimer's patients in hopes that the extra information will spark new ideas for treatments. The database announced covers 4,000 patients and counting. It was created in consultation with government regulators and the National Institutes of Health. In pooling resources from clinical trials, scientists can hunt trends that may suggest what to study next. The database also will be available to brain researchers not affiliated with drug companies, to compare their own findings, and eventually will address other neurodegenerative diseases such as Parkinson's. Called the Coalition Against Major Diseases, the collaboration pairs patient-advocacy groups with such pharmaceutical giants as GlaxoSmithKline, Pfizer Inc. and AstraZeneca. It is led by the Critical Path Institute, a nonprofit partnership with the FDA that aims to speed discovery of new drugs.

Abuse of Medications

The top three most abused prescription pain drugs between 2004 and 2008 were:

- * Oxycodone, in which emergency room visits for nonmedical use rose 152 percent to 105,214.
- * Hydrocodone, in which emergency visits rose 123 percent to 89,051.
- * Methadone, in which emergency visits rose 73 percent to 63,629.



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VEPACHEDU EDUCATIONAL FOUNDATION

Issue 75

5112 [Kali Era](#), [Vikruthi Year](#), [Jyesta month](#)
2068 [Vikramarka Era](#), [Vikruthi Year](#), [Jyesta month](#)
1932 [Salivahana Era](#), [Vikruthi Year](#), [Jyesta month](#)
2010 AD, June



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Emergency visits involving the nonmedical use of pain drugs such as oxycodone rose to 305,885 in 2008, from 144,644 in 2004, according to a study by the Substance Abuse and Mental Health Services Administration and the Centers for Disease Control and Prevention.

Abuse of other drugs, such as morphine, fentanyl and hydromorphone, resulted in fewer visits to the emergency room. But they, too, have increased sharply, according to the study published in the CDC's weekly report on death and disease.

Artificial Lung

Two teams of researchers from New England have built living, breathing lung tissue in the laboratory - feats of engineering that could speed up the development of new drugs and bring researchers a step closer to the tantalizing dream of growing replacement lungs for patients. Both achievements, described in reports published by Harvard and Yale scientists, are part of broader efforts among researchers to build a range of organs, from the heart to the liver. Such research could provide powerful tools to test drugs and identify toxins, and eventually grow new tissue to repair damaged organs.

Harvard scientists re-created a critical area of lung tissue on a silicon rubber chip the size of a quarter, and found that it responded to bacteria and tiny particles carried in the air just like a living lung. Using a different approach, Yale University researchers regenerated lungs and transplanted them into rats, where they functioned successfully for up to two hours. It will still be many years yet before doctors reach the dream of regenerating lungs to help patients.

Doxorubicin's New Clothes

<http://drugdiscoverynews.com/index.php?newsarticle=3899>

Big Pharma's Generic Interest

According to industry estimates, approximately 50 percent of the current \$32 billion global market segment for asthma and COPD medicines is expected to lose patent protection in some countries by the end of 2016. That's when roughly half of this market will start to be open to generic competition, including key asthma medicines like GlaxoSmithKline PLC's Advair, AstraZeneca PLC's Symbicort and Boehringer Ingelheim GmbH's Spiriva. Novartis AG has bought Oriol Therapeutics, a privately



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2010 AD, June



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VEPACHEDU EDUCATIONAL FOUNDATION

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held, Durham, N.C.-based pharmaceuticals company, giving the Swiss pharmaceutical giant's generic arm, Sandoz, exclusive rights to asthma medicine candidates and inhalers, thus boosting its portfolio in the multibillion-dollar respiratory drug market. India is one of the world's fastest-growing pharmaceutical markets, due in large part to branded generics. The market will generate nearly \$8 billion in pharmaceutical annual sales this year, a number that is expected to more than double by 2015. For a \$2.12 billion up-front payment and \$400 annually for the next four years, Abbott, a giant in the pharm industry, is setting up to become a giant in India by striking a deal with Piramal Healthcare Limited to acquire full ownership of Piramal's Healthcare Solutions business. Abbott estimates the growth of its Indian pharmaceutical business with Piramal to approach 20 percent annually, with expected sales of more than \$2.5 billion by 2020. Piramal markets the products in its Healthcare Solutions business in India only and does not market traditional generic products. Already being a leader in the Indian branded generics market, the deal will give Abbott the No. 1 position in the Indian pharmaceutical market, advancing not only Abbott's goals in branded generics by also further accelerates Abbott's emerging markets growth strategy. That strategy has been highlighted recently with the recent acquisition of Solvay Pharmaceuticals and the recent announcements of Abbott's collaboration with Zydus Cadila and its creation of a new stand-alone Established Products Division to focus on expanding the global markets for its leading branded generics portfolio. Throughout the past decade, Abbott has built a leading portfolio of branded generics, through its own products as well as those acquired with the 2001 acquisition of Knoll's pharmaceutical business. In 2007, the company established a separate business unit within its international pharmaceutical division dedicated to established products. Additionally, a new geographic region focused on Russia, India and China was created, which resulted in the doubling of Abbott's growth rate in those countries. Piramal's Healthcare Solutions business employs more than 5,000 people in India. Abbott, which is celebrating its 100th year in India, has more than 2,500 employees across all of its businesses there.

Stem Cells from Menstrual Blood

Compared to umbilical cord blood, menstrual blood is far cheaper but rich source of pluripotent mesenchymal stem cells which can be harvested and modulated to treat a wide range of diseases. The availability of menstrual blood also makes it a much easier



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VEPACHEDU EDUCATIONAL FOUNDATION

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2010 AD, June



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VEPACHEDU EDUCATIONAL FOUNDATION

The Andhra Journal of Industrial News

IP and Industry News

source to collect and harvest stem cells. LifeCell International, a stem cell banking services provider from south Indian city of Chennai, is planning to expand its services to menstrual blood banking service as well in the country shortly, reports said. LifeCell has received approval from Indian drug regulator –the Drugs Controller General of India — to collect menstrual blood for banking so that it can be made available for research purposes. LifeCell would consider launching menstrual blood banking service in a lower cost compared to the current charges for umbilical cord blood banking, which is unaffordable for majority of people. Umbilical cord blood banking is limited to pregnant women which comprises only a mere two per cent of the Indian population, whereas the menstrual blood banking can encompass almost every woman of reproductive age.

India's Demographics

No country is better poised to take advantage of the demographic dividend than India. (See “**India's Demographic Moment**” (<http://www.strategy-business.com/article/09305?pg=all>) by Nandan Nilekani, s+b, Autumn 2009.) In 2020, the average age in India will be only 29 years, compared with 37 in China and the United States, 45 in western Europe, and 48 in Japan. Moreover, 70 percent of Indians will be of working age in 2025, up from 61 percent now. Also by 2025, the proportion of children younger than 15 will fall to 23 percent of India's total population, from 34 percent today, while the share of people older than 65 will remain around just 5 percent. China's demographics are not as rosy as India's, because the government's policies to limit population growth will have created an abnormally large cohort of people over age 60 by 2040. Other emerging nations, such as Pakistan, Indonesia, and certain countries in Latin America and Africa, will produce much larger workforces in the coming years. But their demographic dividends may be inhibited by political and social instability that impedes efforts to put this young population to productive use; a country with massive numbers of unemployed young people and no constructive economic outlet for their dynamism is headed for trouble.

The value of India's demographic dividend will depend in great measure on whether the public and private sector have the political will and foresight not only to create jobs but also to train the new workforce, encourage global trade, improve a failing education system, provide better housing, lure capital to support innovation, and implement policies

4



శ్రీ వేపచేదు విద్యా పీఠము

VEPACHEDU EDUCATIONAL FOUNDATION

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VEPACHEDU EDUCATIONAL FOUNDATION

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that engender confidence in the economy. Given India's relatively strong democracy, government institutions, and entrepreneurial sector, its attempts to grapple with these thorny issues would seem to offer learning opportunities for other countries that are still a step or two away from enjoying a demographic bounty. To explore India's prospects — what the country must do and what it must avoid; its possible economic weaknesses and how it can make the best use of its people, businesses, government, and creativity — *strategy+business* teamed with the World Economic Forum to host a roundtable of experts on India. (A separate s+b/World Economic Forum roundtable addressed a very different subject: the challenges presented by aging workforces in some regions, including Europe and Japan. See “**Facing Up to the Demographic Dilemma**” (<http://www.strategy-business.com/article/10105?pg=all> <http://www.strategy-business.com/article/10205?pg=all>)

Patent Monopoly in India is not Automatic

The case of *Asian Electronics Ltd. Vs. Jumbo Electric Company* 2010 (42) PC 99 (Del.)} a suit for permanent injunction was filed for the infringement a patent held in respect of a conversion kit to change fluorescent lighting units' inductive operation to electronic operation. The invention claimed by Asian Electronics Ltd was to the effect that their patented conversion kit enabled the fitting of a tube described as T12 to be used for a sleeker and shorter length tube called as T5.

Earlier an application moved for interim injunction had been granted, *ex parte*, in favour of Asian Electronics Ltd. restraining Jumbo Electronics from manufacturing, selling, distributing the conversion kit embodying Asian Electronics' patent. Jumbo Electric Co. thereafter moved an application under Order 39 Rule 4 CPC for vacation of the *ex parte* injunction.

Asian Electronics contended that Jumbo Electronics was manufacturing and selling identical conversion kits, and one such kit was purchased by Asian Electronics which was manufactured by Jumbo Electronics Company, from an electronic shop in Delhi .It was further stated that they had not granted any license to the Jumbo Electronics for the use of the said patent and therefore manufacturing of lighting units and conversion kits by Jumbo Electronics was unauthorized and amounted to infringement of Asian Electronics' patent rights.



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VEPACHEDU EDUCATIONAL FOUNDATION

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IP and Industry News

The court after perusal of the plaint concluded that by wording the pleadings deceptively, production of a product which is not violative of any patent cannot be stalled. In order to constitute violation of a patent, it is essential to show that the invention claimed involved some technical or scientific advancement as compared to the existing products of knowledge. Creating of a conversion device (adopter) is not an offence unless it involves copying of a unique electronic circuit invented by someone. Asian Electronics failed to establish how Jumbo Electronics had copied its invention and, the Court concluded that there is no bar in using the existing inventions by other persons. In this view, the ex parte injunction was vacated and application vide Order 39 Rule 4 CPC, with a concluding remark that getting a patent in respect of a conversion kit did not imply that Asian Electronics gets monopoly over its use.

http://www.mondaq.com/article.asp?articleid=103900&email_access=on

Indian Traditional Medicine Practitioners

The health department of Tamil Nadu state government has written to the state police that institutionally qualified and registered practitioners of ayurveda, siddha and unani could practice their respective systems with modern scientific medicine including surgery, gynaecology & obstetrics, anaesthesiology, ENT, ophthalmology, etc based on their training and teaching in the course.

The health department of Tamil Nadu, however, warned that if any of the practitioners trained in Indian systems of ayurveda, siddha, unani is found practising only modern scientific medicine and not the one he or she is qualified to practice will be debarred. Action will be initiated against ayurveda, siddha and unani medical practitioners Indian system practicing only modern system of medicine under the Tamil Nadu Siddha System of Medicine (Development and Registration of Practitioners) Act 1997, and Tamil Nadu Board of Indian Medicine Rules, according to reports.



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