# A Rational Study of Analgesics and Antipyretics

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Rational Drug Cell Medico Friend Circle



Published by Kerala Sastra Sahitya Parishad

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## A RATIONALITY STUDY OF ANALGESICS AND ANTIPYRETICS

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Pain is a universal phenomenon and the development of drugs to relieve pain must be looked upon as one of the few real accomplishment of western medicine. The minor and major analgesics are important drugs in any formulary and are widely prescribed. Fever is another common symptom of disease and antipyretics are also used extensively, especially for children. In order to study what drugs are available and used for pain and fever it is useful to study the Monthly Index of Medical Specialities (MIMS), which contains many of the standard preparations and the combinations currently being promoted by the pharmaceutical industry. Before the results of this study of the analgesics and antipyretics in MIMS are presented, a few introductory comments are needed.

A World Health Organization Expert Committee has established a list of essential drugs for all countries. The list includes the following analgesics and antipyretics:

Aspirin (acetylsalicylic acid, ASA) tablets and suppositories Paracetamol (acetaminophen) tablets and suppositories Codeine : Phosphate tablets, Pethidine : Injection, Morphine : Injection. Major to to books of medicine and surgery recommend the use of these listed drugs almost exclusively. 6, 7.

Notably absent from this list are three drugs that are found in MIMS. They are the widely used analgesic analgin (metamizol, dipyrone), and the opioid analgesics dextropropoxyphene and pentazocine.

Analgin is a minor analgesic/antipyretic that enjoys widespread popularity in India. It is an unnecessary and dangerous drug for which there are safe and inexpensive substitutes.'II Analgin is not inexpensive; even generic preparations are usually five items the price of aspirin and double the price of paracetamol. It has been implicated in many cases of agranulocytosis and has been deleted from the formularies of most countries.'I Analgin should also be banned in India. If its manufacture and sale continue to be allowed, then it should only be used when no alternative is available'1. Because most countries have banned analgin, studies have not been performed on combinations of analgin and other analgesics. These combinations cannot be recommended for use.

Dextropropoxyphene is an opioid analgesic that has relatively low addictive potential but little analgesic activity either. One study found it to be no better than placebo in the relief of moderate pain'1. In combination with aspirin for the relief of mild pain, it was found to be only as effective as aspirin and codeine'5. The combination of dextropropoxyphene and paracetamol has been proven to be ineffective; the combination is only as effective as paracetamol alone'2.

Pentazocine is a newer opioid analgesic. It is an extremely expensive drug that offers no advantages over the well-known and proven major analgesics pethidine and morphine'3. Pentazocine tablets are thirty times more expensive than pethidine tablets. Pentazocine should be classified as a narcotic, as there is potential for drug abuse.'10

Bearing in mind the recommendations of standard textbooks, the findings of studies published in periodicals, and the recommendations of the World Health Organization, it is possible to classify the preparations found in MIMS. The fiftynine preparations listed as analgesics and antipyretics in the July 1984 issue of MIMS India were studied; the results were graded :-

- A: use of the product is justified— 14 preparations.
- B: the combination is not proven to be superior to single ingredient preparation; and hence not recommended—
  16 preparations.
- C: the combination has deen proven to be inferior to single ingredient preparation; and should be withdrawn— 11 preparations.
- D: the preparation contains analgin; and should be banned - 18 preparations.

Manu- facturer's name	Grade	Ingredients	Cost of treatment (usually 5 days	Refe- rences
1	2	3	4	5
ANADEX (Concept)		nalgin 250 mg extropropoxypl –65 mg	hene	1, 2

**Comments**: This combination is of unproven efficacy. Analgin should not be used when alternatives are available; and dextropropoxyphene is no better than a placebo in combinations.

		6 -		
1	2	3	4	. 5
APIDIN (IDPL.)	С	aspirin 300 mg caffeine 30 mg codeine- phosphate 6 mg	Rs. 5.92	1, 12

Addition of caffeine or a subtherapeutic dose of codeine to Aspirin adds nothing to its effectiveness; caffeine does not potentiate the analgesic activity of aspirin but codeine can do so, if used in proper desage.

AVAFORTON (Khandelwal)	D	avapyrazone 24 mg metamizol- analgin 240 mg per ml	Rs. 5.32 two in- jections	1
		avapyrazone 60 mg metamizol 210 mg analgin per tab		

This analgesic-antispsmodic combination is of unproven effectiveness, and should not be entered in the analgesic/antipyretic section of any formulary. Avapyrazone is a little-used drug and analgin should never be used when substitutes are avaitable.

02

AVAMOL	В	avacan substa	nce 50 mg	Rs. 6.
(Khandelwal)		systral	5 mg	fora
		paracetamol	100 mg	bottle
		per ml		

Like the previous preparation, this is a combination of unproven value. Avacan is a little-used drug, and analgin should never be used when substitutes are available.

1	2	3	4	5
ARALGAN oechst)	D	analgin 500 mg p-piperidinoethoxy carbmethoxybenzo diphenyl-piperidin	phenone 5 mg oethy-	1
		lacetamidbrom-o-r ; per tablet	nethylate 01 mg	
19.2.10		analgin 500 mg second ingredient	Rs. 2.17 for one injec-	
i numero el		as above 2 mg; third ingredient as	tion	
		above 0.02 mg. per ml.		

7

This is an analgesic-antispasmodic preparation of unproven value. Analgin should never be used when substitutes are available.

BESEROL	В	Paracetamol 450 mg	Rs. 45.50	1, 5
(Win-Medicare)		chlormezanone 100 mg		

This is a very expensive unproven combination. Chlormezanone is a minor tranquilizer that is outdated and adds nothing to the effectiveness of paracetamol.

BETAFLAM	C Paracetamo	I 400 mg	Rs. 9.79	2
(Vilco)	dextroprop	oxyphene 65 mg		
	oxyphenbut			
		100 mg		
	diazepam	2 mg		

The combination of paracetamol and dextropropoxyphene has been proven to be inferior to single ingredient preparation. Oxyphenbutazone has to be used only for very specific purposes and never to be included in fixed dose combination.

8	9
1 2 3 4 5	1 2 3 4 5
BRAL B identical ingredients Rs. 11.13 1 (Microlabs) to Baralgan	CORBUTYL C dextropropoxyphene Rs. 7.63 2 (Roussel) -65 mg
This preparation is identical to Baralgan that has been reviewed above.	paracetamol 650 mg The combination of paracetamol and dextropropoxyphene has been proven to be inferior to single ingredient prepara-
CAFIASPIRINB aspirin300 mgRs. 3.601,5(Bayer)caffeine30 mg	tion.
The addition of a small dose of caffeine to the effective anal- gesic/antipyretic aspirin does not add to its therapeutic effect.	DOLOPAR PLUS C dextropropoxyphene Rs. 22.92 2 (Micro Labs) -65 mg acetaminophen -
CALPOL A paracetamol 500 mg Rs. 8 1, 5, (Wellcome) tabs. 6, 7, paracetamol 120 mg Rs. 12.23	(paracetamol) 400 ,, diazepam : 2 ,,
Rs. 48.90 for 5 days depending on age.	The combination of dextropropoxyphene and paracetamol has been proven to be not superior to individual drugs given alone. Addition of minor tranquilizer to this combination does not make it more effective.
Paracetamol has excellent analgesic/antipyretic activity. The only problem with this preparation is its high price.	EQUAGESIC B ethoheptazine- Rs. 13.95 1,5 (Wyeth) citrate 75 mg meprobamate 150 mg
CODOLSIC D analgin 500 mg Rs. 10.26 1	aspirin 250 mg
(FDC) clidinium bromide 2.5 mg diazepam 2.5 mg	This combination is of unprove effectiveness. The addition of the minor tranquilizer to aspirin and ethoheptazine adds
This combination is of unproven effectiveness. The addition of an antispasmodic and a minor tranquilizer to this analgesic does not add to its effectiveness. Analgin should never be used when substitutes are available.	nothing to its effectiveness. The use of this minor tranqui- lizer, meprobamate, has been replaced by the use of newer and safer ones. Meprobamate is an addicting drug hence the use of this combination should be restricted.

1	2	3	4	5
FORTAGESIC B (Win-Medicare)		amel 500 mg Izocine 15 mg	Rs. 62.76	1, 5, 10

Addition of 25 mg of pentazocine creates a more effective combination. But addition of 15 mg has not proved to be of any value. This is an extremely expensive combination. Pentazocine can cause addiction.

FORTWIN (Ranbaxy)	A	Pentazocine 30 mg injection	Maximum Rs. 39.84 per day	
		Pentazocine 25 mg tablet	Rs. 102.40	

This extremely expensive drug is not necessary to replace the WHO-recommended major analgesics, morphine and pethidine. Because of its addictive potential, pentazocine should be added to the narcotic formulary. Its use should be restricted to severe painful condition where other drugs are ineffective.

CROCIN (Duphar)	A	paracetamol 500 paracetamol 125	-	Rs. 8.00 Rs. 2.57 to	
		per 5 ml.	F	Rs. 10.30	
			day ser i	(depending	
				on age)	

Paracetamol has excellent analgesic/antipyretic activity. Its toxic effects are less as compared to other agents. It can be safely given in pregnancy.

CUREPAR	A paracetamol 500 mg	Rs. 7.28	1,5,
(Curewel)	The second second second		6, 7.

a etamol has excellent analgesic/antipyretic activity.

		11		
1	2	3	4	5.
CYCLOPAN (Indoco)	B dicyclo paracet diazepa	amol 500 mg	Rs. 4.00	1,5
This combinati of a minor tran paracetamol's a	quilizer and ar	ven effectivene n antispasmodic	ess. The add adds nothi	dition ing to
DISPIRIN (Reckitts)	A Aspirin calcium citric ac	n carbonate 105	Rs. 7.20 mg	1,5
Buffered aspiri treatment of p patients with g	ain and fever	ntages over pla . However, it	in aspirin fo can be give	or the en in
DOLOPAR (Microlabs)	D analgin paraceta caffeine per tab	amol 250 mg 25 mg	Rs. 14.68	1
	analgin paraceta per 5 m	62.5 mg amol 62.5 mg	Rs. 20.19	
This combination never be used w not be combine	hen substitute	ren effectivenes es are available gents.	s. Analgin sl . Analgin sl	nould
NORGESIC CIPLA)	C dextropro paracetan	poxyphene 32. nol 325	5 mg <b>Rs.</b> 9.4 5 mg	5 2

This combination of dextropropovyphene and paracetamol has been proven to be no more advantageous as compared to single ingredient.

12	13
1 2 3 4 5	1 2 3 4 5
NEOGENE (AFD)D analgin paracetamol codeine phosphate codeine phosphate scaffeine200 mg Rs. 7.50 1,5 gcodeine phosphate , caffeine 30 mgThis combination with 5 ingredients is totally irrational; it mixes one useful analgesic/antipyretic drug with another, major antipsycotic with a minor opiate; and adds a small dose of caffeine.	MAZETOL A carbamazepine 200 mg Rs. 8 to 3 (SG Pharma- ceuticals) This drug has no intrinsic analgesic/antipyretic activity and is only indicated for the specific treatment of trigeminal neuralgia and some types of seizures. It should not be included with analgesics/antipyretics in this formulary. Its indication should be clearly spelt.
NOVALGIN (Hoechst)D analgin tablets analgin injection500 mg mg/mlRs. 10.88 ng/ml1This expensive minor used when alternatives are available.This expensive minor analgesic/antipyretic analgesic.NOVALGIN mgNOVALGIN mgNOVALGIN mgNOVALGIN mgNOVALGIN mgNOVALGIN mgNOVALGIN mgNOVALGIN mgNOVALGIN mgNOVALGIN mgNOVALGIN mgNOVALGIN 	MICROPYRIN B microfine aspirin 350 mg Rs. 2.37 1,5 (Nicholas) caffeine 20 mg This is an inexpensive combination of aspirin and caffeine. Caffeine adds nothing to the analgesic/antipyretic activity of aspirin.
NOVALGINE D metamizol quinine QUININE 100 mg Rs. 6.95 1 (Hoechst) metamizol calcium 150 mg The minor analgesic/antipyretic analgin should never be used when alternatives are available. The addition of quinine adds	MOLINA paracetamol 125 mg/5 ml Rs. 11.701,5(Pharmasyrup6.7Research)Paracetamol has excellent analgesic/antipyretic activity. Can be given to infants, children and pregnant women safely.
nothing to its effectiveness.     MALIDENS   paracetamol 250 mg Rs. 15.15 1,5     (Nicholas)   salicylamide 250 mg caffeine 25 mg     This combination is not proved to be superior to paracetamol alone. This combination of two analgesic/antipyretic drugs with similar actions in one tablet is not rational as it does not increase the effectiveness of either drug. Caffeine does not add to the combination's effectiveness.	OPTALIDONBbutabital50 mg.Rs. 7.841,5with paracetamolaspirin200 mg(Sandoz)paracetamolcaffeine40 mgThe combination of these two analgesic/antipyretic drugs withsimilar actions in one tablet is not rational, and the addition ofa minor tranquilizer and the amount of caffeine found in half acup of tea does not add to its effectiveness. Butabarbitalshould be removed from the combination.

1	5	
	-	

	,			
1	2 3	3	4	5
PAMAGIN (Alkem)	D analgin diazepam tablet	500 mg , 5 mg	Rs. 3.27	1
	analgin diazepam injection	500 mg 5 mg	Rs. 30.50	

The minor analgesic/antipyretic, analgin should never be used when an alternative is available. The addition of a minor tranquilizer to this drug does not increase its effectiveness. The injectible form is very costly.

PARACIN	A paracetamol	500 mg	Price not	1,5
(Stadmed)	tablet		quoted	6,7
	paracetamol 125 m syrup	ig/ml.	17,	

Paracetamol has excellent analgesic/antipyretic activity.

PARVON A dextropropoxyphene 65 mg Rs. 9.26 1,2 . (Jagson Pal)

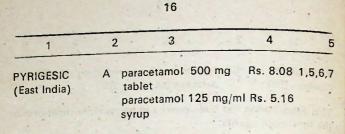
This synthetic analgesic of relatively low addictive potential has limited usefulness in the treatment of moderate pain. It is three times more expensive than the WHO-recommended major analgesic, pethidine.

PARVON-N	С	dextropropoxyphene 32 mg Rs	s. 9.26 2
(Jagson Pal)		paracetamol 350 mg	
		diazepam 2 mg	

The combination of dextropropoxyphene and paracetamol has been proven to be no more superior than individual agents used alone. The addition of a minor tranquilizer adds nothing to analgesic effectiveness, and has been prohibited by Govt. of India (see below).

1	2	3	4	5
PARVON-P (Jagson Pal)	с	dextropropoxyphen paracetamol	e 32 mg Rs. 9. 350 ,,	26 2
This combinatio the individual a		been proven to be	no more superio	or than
PREDIMOL (Uniloids)	A	paracetamol 50	00 mg Rs. 6.64	4 1,5 6,7
is the least exp	ensiv	ellent analgesic/anti e of the paracetamo three timesmore exp	I tablets availa	able in
PROMALGIN (Uniloids)	D	analgin .250 n paracetamol 250 caffeine 25	, and an alter a	¥ 1,5
tion of two anal	gesic	of unproven effectives s/antipyretics with as it does not incre	similar actions	in one
PROXYVON (Wockhardt)	a	lextropropoxyphene cetaminophen- paracetamol 4 liazepam	65 mg Rs.11.0 100 mg 2 mg	4 1,5
been proven to lizer adds nothin	be ine	extropropoxyphene effective. The additi analgesic effect ar he Govt. of India;	on of a minor trand such addition	anqui- n has

not enforced.



Paracetamol has excellent analgesic/antipyretic activity,

PYRISPAM (Biddle Sawyer)	В	dicyclomine paracetamol 5 chlodiazepoxio tablet;	500 ,,	Rs. 10.52	1,5
		dicyclomine paracetamol 13 sýrup		Rs. 18.90	-

These combinations are of unproven effectiveness. The addition of an antispasmodic and a minor tranguilizer to this analgesic adds nothing more to the analgesic effect. Chlordiazepoxide should be removed from the combination: as per Govt, of India decision.

RALCIDIN paracetamol 300 mg Rs. 3.87 1,5 (Rallis) 16 mg caffeine chlorpheniramine 1.6 mg phenylephrine 5 mg

The analgesic/antipyretic activity of paracetamol is not enhanced dy the addition of a vasoconstrictor, an antihistamine & caffeine. This combination is irrational as an analgesic. It will be effetive in allergic cold. Phenylephrine can act locally and not reliably absobed orally.

1 2	3	4 5
I , Et A in	home address of a	. ICarization
SEDYN-A-FORTE D (MM Labs)	analgin 375 mg diazepam 2.5 mg diphenhydramine 20 mg	Rs. 2.51 1,5 per injec- tion

17.

This combination is of unproven effectiveness. The addition of a minor tranquilizer and an antihistamine to the minor analgesic/antipyietic, analgin, does not add to its effectiveness. Drowsiness will be added disadvantage of this combination. The Govt. of India has banned. The combination of tranquilizer with analgesics. But brands like Sedyn-H-Forte containing a tranquilizer combined with an analgesic are still being sold.

100		Support and and	attanta "		69.05
SOSEGON	А	Pentazocine	30 mg	maximum	1,3
(Win-medicare)		injection	Surger State	Rs. 49.08	5,10
		De la comencia		per day	
1000 10 0 21 0 21 0 0		pentazocine	25 mg	Rs. 105.18	
and a state of the state of the		tablet	and the second	for 5 days	

This extremely expensive drug is not necessary to replace the WHO-recommended major analgesics, morphine and pethidine. The tablets are 30 times more expensive than pethidine and the injections are 10 times more expensive than pethidine. Because of its addictive potential pentazocine should be added to the narcotic formulary.

1. 1.	2	3	4 5
SPASMIZOL (IDPL)	D	homatropine methyl bromide 2.5 mg analgin 500 mg	Rs. 4.93 1
1 70 5-200		phenobarbitone 10 mg	and they be
The summer	D	tablet homatropine methyl- bromide 2.5 mg	price indeter- minable
		analgin 100 mg phenobarbitone 5 mg injection per ml.	nestronio e ta nestronio e ta
	D	methscop. 0.5 mg analgin 500 mg injection per ml.	· · · · · · · · · · · · · · · · · · ·
modio and a tr	angui	combinations. The additio lizer to the minor analg d to its effectiveness.	on of an antispas- gesic/antipyretic,
SPASMO- PROXYWON	С	dicyclomine 10 mg dextropropoxyphene 65	Rs. 12.57 2 mg

18

The combination of dextropropoxyphene and paracetamol has been proven to be ineffective. The addition of a minor tranquilizer and an antispasmodic adds nothing to its effectiveness.

TUXYNE	В	noscopiñe	15 mg	Rs. 4.77	1,5
(Griffon)		aspirin	300 ,,		
Aline in state		caffeine	30 ,,		
		chlorophenira	mine 2 ,,		

Aspirin has excellent analgesic/antipyretic activity, but the addition of an anticholinergic, an antihistamine, and caffeine adds nothing to its effectiveness. It may add to the cost of the preparation.

1	2		24	3	1	4	5
TYLENOL	A	acetar	ninopl	nen—		-	
(Ethnox)	- Bang	(parac	etamo	1) 120	) mg	5ml Rs. 4.80	1,5
		syrup		1.10	1.1	(One Yr)	6,7
and Chaster dings	1.		100.1	and the	1	Rs, 16.10	
indimense a li	The al			in the	1 -	(Six Yrs)	
The analgesic/ but these are	antipy cheap	retic ac	tivity parati	of p ons d	arace	etamol is exce aracetamol sy	llent

ULTRAGIN (Manners)

D

analgin 250 mg Rs. 9. 72 paracetamol 200 mg caffeine 25 mg (same as Promalgin)

1,5

This combination is of unproven effectiveness. The combination of two analgesic/antipyretic drugs with similar actions in one tablet is not rational as it does not increase the effectiveness of either drugs. Analgin should never be used when alternatives are available.

ULTRAGIN	D analgin 62.5 mg.	Rs. 6.23 1
Syrup	paracetamol 625 mg	(infants)
(Manners)	per 4 ml	Rs. 20.55
	in Dia Suchatiga	(children)

This combination is of unproven effectiveness. The combination of two analgesic/antipyretics drugs with similar actions in one preparation is not rational as it does not increase the effectiveness of either drug. Analgin should never be used when alternatives are available.

0720	21
1 2 3 4 5	1 2 3 4 5
SUDHINOL-N COMPOUND (Ranbaxy)C dextropropoxyphene 100 mg Rs. 12.86 2 paracetamol diazepam325 mg 2This combination of dextropropoxyphene and paracetamol has been proven to be inferior to single ingredient preparation. The addition of a minor tranquilizer does not add to its anal- gesic effectiveness. Paracetamol alone will be cheaper and better.	ULTRAGIN D analgin 500 mg Rs. 2.22 1 INJECTION lignocaine 10 mg per injection (Manners) Analgin is a minor analgesic/antipyretic that should never be used when alternatives are available. The addition of ligno- caine to analgin does not add to its analgesic/antipyretic acti- vity, and may simply cause allergic reactions in sensitive patients. No drug should be combined with analgin.
TAPALBAspirin500 mgRs. 13.121,5(Win-Medicare)caffeine30 mgAspirin has excellent analgesic/antipyretic activity ; but the same amout of caffeine is found in one third of a cup of tea and adds nothing to its analgesic/antipyretic act ivity. This preparation is very expensive.TAPAL-JUNIOR A aspirin75 mgRs. 1.211,4,5(Win-medicare)(1-2 yrs)Rs. 9.70(8-12 yrs)Aspirin has excellent analgesic/antipyretic activity, and this	VEGANINBaspirin250 mgRs. 8.501,5,(Warner)paracetamol50 ,,12codeine phosphate 5 mgThis combination is not proven to be better than aspirin alone. The combination of two analgesic/antipyretic drugs with similar actions in one tablet is irrational; but aspirin can be com- bined with codeine in proper dosage to get enhanced effect.WALAGESICCdextropropoxyphene 65 mg Rs. 16.502(Carter- paracetamol400 mgWallace)diazepam2 mgThe combination of dextropropoxyphene and paracetmolhas been proven to be no more effective than single ingredient alone.The addition of a minor tranquilizer does not add to
preparation is in expensive and effective for young children.	its analgesic effect, and such addition has been prohibited by Govt.
TREUPELBaspirin375 mgRs. 8.401,4,5(Germancaffeine50 mgRemedies)codeine phosphate10 mg	ZIMALGIN-A A analgin 250 mg Rs. 27.36 1 (Rallis) paracetamol 250 mg caffeine 15 mg
The combination of aspirin and codeine in proper doses i.e. 60 mg of codeine, is superior to aspirin and is a safe combi- nation for fever and pain. The caffeine adds no hing to its effectiveness – it is about the same amount found in half a cup of tea.	codeine phosphate 5 mg. This combination is of unproven effectiveness. The combina- tion of two analgesic/antipyretic drugs with similar actions in one tablet is irrational as it does not increase the effectiveness of either drug. Analgin should not be used when safer alter- native are available. COM JUNITY HEALT, I CELL 47/1, (First Floor) St. Marks Read
	Bangalore - 560 001.

### Comparative Prices for Equivalent Quantities of Drugs

Aspirin	generic 300 mg	Ps. 2				
1	cafiaspirin (also has caffeine)	6				
2	Micropyrin (also has caffeine)	7				
3	Dispirin (also has citric acid, calcium carbonate)	10				
4	Apidin_(also has codeine, caffeine)	. 14				
5	Tapal (also has caffeine)	19				
6	Treupel (also has codeine caffeine)	. 22				
Paracetamol generic 500 mg - 5.50						
1	Predimol -	16				
2	Curepar —	.18				
3	Crocin —	20				
3	Pyrigesic — Calpol —	20				
3	Calpoi -	20				
Paracetamol	syrup generic 150 mg Rs	. 1.20				
(enough for a One year old baby for 3 days)						
1	Crocin					
2	Pyrigesic	4.12				
3	Tylenol -	4.13				
3	Calpol	5.00				
4	Molin	5.10				
15 Me 1 2 2 1 2 1	and the shall be seen in the					

Generic prices quoted above are samples only, cheaper prices for generic preparations may be available.

Barenteline : 560 661.

It should be noted that several drugs from the WHO essential drugs list are not found at all in MIMS. Aspirin and paracetamol suppositories are not listed. Plain aspirin tablets, codeine tablets and pethedine and morphine injections are also not in the current MIMS, but are available by their generic names in the market. One combination that is notable by its absence in MIMS, is paracetamol and codein. Like the combination of aspirine and codein, paracetamol and codein is another combination that has been shown to be more effective than either drug alone. Although there are serious omissions of essential drugs from MIMS, some of the nineteen preparations listed as 'justified' can be recommended for use. Aspirin for children is available as Tapal-Junior. The least expensive paracetamol preparations are Predimol tabs and Crocine syrup-Apidine and Treupel are aspirin, codeine and caffeine preparations that can be recommended for mild to moderate pain.

A Government policy for provision of all essential analgesics and antipyretics at low-cost and the banning of ineffective preparations and analgin would be a 'healthy first step' in forming a 'Rational Drug Policy for the country.'

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#### Kerala Sastra Sahitya Parishad Demands

- Urgent steps for production and distribution of Essential and life saving drugs at low cost.
- Immediate ban on the imports and production of non essential and hazardous drugs.

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- Strict quality control of drugs.
- Implimentation of the Hathi committee recommendations.
- Implimentation of a People's Drug Policy.

### All India Drug Action Network....

This Study is a part of the work of the All-India Drug Action Network (AI-DAN). AI-DAN is a loosely knit network of more than ten groups/organizations from different parts of the country committed to oppose the irrationalities in the production and use of drugs in India and to foster a Rational Drug Policy.