

The reward for a good deed
is to have done it.

—Elbert Hubbard.

Founder : Late Shri Ramgopal Maheshwari

EDITORIAL

EC Obstnacy on EVM

Despite strong opinion against the use of EVM on election voting the Chief Election Commissioner Mr. OP Rawat is obstinate on keeping the EVM process as it is in the coming elections. In Delhi all registered parties meeting with the Chief Election Commissioner and at Bhopal except ruling Bhartiya Janata Party all other parties wanted that the system of EVM should be scrapped and Commission should revert back ballot papers system.

Many countries after going through the process of Electronic Voting abandoned it and return to ballot paper system. For the first time the BJP stalwart Mr.LK Adwani demanded that EVM system was not reliable and Commission should go back to ballot paper voting system. Later after last Lok Sabha polls other prominent parties and leaders Mayawati and Mr.Akhilesh Yadav also doubted the fairness through the EVM. Now except BJP and Biju Janata Dal all other parties are dead set against the EVM system.

They apprehend that these EVM could be hacked and they expressed doubts that in election to Lok Sabha and Vidhan Sabha in Uttar Pradesh something of that sort happened. There is a saying "when doubt – leave it out".

The Commissioner has said that he would clear all the doubts about the EVM and safe against hacking, unless he did it EVM should not be used in the elections. It is said

Indore-Manmad Rail Line

A four party agreement is signed to lay down a new rail line between Indore and Manmad. It will reduce the distance between the two stations by 171 kilometer and travel time will cut short by four hour from 13 to 9 hours. It will connect the North and Central India with Mumbai, Pune, Bangalore and Chennai in a straight rail line. At present travelers go by zig zag routes from Indore-Ratlam as Western Railway Delhi-Mumbai Section. It will speed up not only the passenger but goods movement also.

Beside time it will provide less fair and time in this new route. It will be a bypass travel in less cost and

that honesty should be visible also. In a democracy the elections should be beyond doubt. If itself it is a big doubt that first of all it was BJP, who questioned the fairness of EVM system when it was in opposition. Now it is in power and turned volte face to support it.

Mr.TN Seshan established the independence of the Commission in its decision and working. During the Gujarat Vidhan Sabha General elections the Commission announced the dates of election schedules of other states going to polls but delayed the announced the Gujarat election. The Congress said that not the Commission but Mr.Narendra Modi would decide the Gujarat dates. It was as aspersion and doubt on the independence of Election Commission. The same type of situation has emerged in the use of EVM.

The Chief Election Commissioner is not taking into account the whole hog opposition to the EVM and adhering to the wishes of ruling Bhartiya Janata Party and on this issue even its sincerity is in doubt. There are lurking doubt about the free and fair elections in Uttar Pradesh. On the issue of EVM the BJP is minority opinion and opposition parties are majority opinion. Mr.Advani is maintaining the silence on this issue. It is his moral obligation to speak out what where the grounds and reasons on which he had opposed the use the EVM and wanted that it should be given up.

time. Presently the travel Indore to Mumbai is via Ratlam and Delhi-Mumbai section distance is 815 kilometers. The new line will reduce it to 644 kilometer.

The new line will be 176 kilometer in Madhya Pradesh and 186 kilometer in Maharashtra. The cost of the project the share of Jawaharlal Nehru Port Trust will be of 55 per cent and 15 per cent each of Indian Railway, Government of Madhya Pradesh and Maharashtra Government.

The Madhya Pradesh will contribute Rs.500 crore in the new line project but by way of cost of land and royalty the State will get back 400 crore rupees.

Will SimpliTB make TB treatment simpler?

Shobha Shukla, CNS

Taking the encouraging results of its N-005 study one step forward, TB Alliance has initiated SimpliTB a pivotal clinical study to evaluate the efficacy, safety and tolerability of a novel and potentially shorter 4 drug regimen for patients with drug-sensitive (DS) as well as multi drug-resistant (MDR) pulmonary TB.

The new drug regimen BPAmZ comprising four different antibiotics Bedaquiline (B), Pretomanid (Pa), Moxifloxacin (M) and Pyrazinamide (Z) will be administered for 4 months to patients of DS-TB, and for 6 months to patients with MDR-TB with mono-resistance to rifampicin or isoniazid.

What is SimpliTB?

SimpliTB is a pivotal, multi-centric, open-label partially randomized clinical study targeting at least 26 centres in 10 countries in Africa, Asia, Europe and South America. A total of 450 participants (150 per treatment group) will be enrolled and assigned to the following treatment arms:

- Participants with DS-TB will receive BPAmZ daily for 4 months;
- Participants with DS-TB will receive HRZE/HR combination tablets daily for 6 months; and
- Participants with DR-TB (MDR-TB as well as mono-resistance to isoniazid or rifampicin) will receive BPAmZ daily for 6 months.

The study would evaluate if an all-oral BPAmZ regimen has the potential to shorten and simplify treatment for both DS-TB and MDR-TB. It will test and compare the efficacy of a 4 month treatment with the BPAmZ regimen, in people with DS-TB, to that of the current 6

month treatment regimen of isoniazid, rifampicin, pyrazinamide and ethambutol (HRZE), to determine whether BPAmZ can shorten the duration of therapy. The study will also assess BPAmZ's potential to treat DR-TB (with mono-resistance to rifampicin or isoniazid) in 6 months. Currently, treatment for MDR-TB is complicated, expensive, and lengthy- lasting for 9 to 24 months- involving a wide variety of medicines that have debilitating side-effects.

THE N-005 STUDY

The study is expected to enrol 450 people with TB, (including 150 who are mono-resistant to isoniazid or rifampicin) across 26 centres in 10 countries in Africa, Asia, Europe and Latin America. It will examine the time to culture negative status over 8 weeks, as well as durable cure, through 12 and 24 month follow-ups. The first patients have already been enrolled at the National Centre for Tuberculosis and Lung Disease in Tbilisi, Georgia. The study is slated to end in 2021, with the potential for making interim results available earlier.

As mentioned earlier, the BPAmZ regimen has been previously studied in a 2 month long Phase 2b N-005 clinical study conducted on 240 patients (180 patients with DS-TB and 60 patients with DR-TB) at 10 sites in 3 countries (Uganda, South Africa, and Tanzania). Study results showed that the best regimen was a combination of all four drugs- BPAmZ-, that resulted in the highest level of bactericidal activity among all its four parallel treatment arms.

At the end of 2 months, participants receiving BPAmZ cleared TB bacteria from their sputum 3 times faster than

those on the standard (HRZE) treatment regimen, with almost all of them having culture conversion after 2 months of treatment. The study also found that a daily dose of Bedaquiline (200 mg) is at least as active and safe as the labelled dose. This could lead to a simpler daily dosing with fewer pills and an overall less complicated treatment for patients.

How is SimpliTB different from N-005?

SimpliTB will build on the encouraging results of N-005. While NC-005 only

examined BPAmZ in multi drug-resistant TB (it also looked at other combinations of B, Pa and Z in DS-TB), SimpliTB will test BPAmZ regimen in both, drug-sensitive and drug-resistant TB patients, over a longer period of time, with many more participants, and with a much larger geographic scope.

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According to the World Health Organization's most recent WHO Global Tuberculosis Report, there is growing resistance to available TB drugs, which means the disease is becoming more deadly and difficult to treat. WHO estimates that in 2016 there were 600,000 new cases with resistance to rifampicin – the most effective first-line drug—of which 490,000 had MDR-TB.

"As resistance to current TB treatments continues to grow, we need to introduce all-oral drug regimens that can treat every person with TB in 6 months or less, regardless of their resistance profile. If proven successful in SimpliTB, the BPAmZ regimen would represent a major step toward this goal by bringing down the treatment duration for the vast majority of TB patients to as less as 3-4 months, thus reshaping the treatment landscape of TB, especially for people with MDR-TB, who currently face an arduous 9-24 month treatment journey that is too often unsuccessful", said Mel Spigelman, President and CEO of TB Alliance.

If successful, the all-oral BPAmZ drug regimen tested in SimpliTB will shorten TB treatment to a duration that would be more easily manageable by patients and public health services, and provide a more effective, safer and affordable treatment for the growing number of patients suffering from drug-resistant TB, bringing us nearer to the goal of ending TB by 2030.

BIPASA — Gene or Opportunity ?

Kajal Chatterjee

Bipasa. No this is a fictitious name. But the girl is indeed real of flesh and blood. She is aged just 12 — a jewel in our residential complex.

Right from her just 6 or 7 years of age, she used to speak extremely fluent English with absolute correct grammar. Not only she excels in examination results, Bipasa possesses lot of General Knowledge also. Be it elocution contest, painting, singing, dancing, swimming or Computer skills; Bipasa is unparalleled. Even in racing to karate to badminton, she resides way above her peers. Moreover ever smiling Bipasa is gentle friendly and always courteous to her elders.

Her father is a reputed sincere Doctor holding one of the topmost positions in a Cancer Research hospital in Kolkata, her mother being a full-fledged degree engineer. Both of them are very civilized humble persons with values ethics and knowledge, also pursuing various cultural activities.

So this is the genesis of all round talent of Bipasa! She is bound to excel in whatever field she indulges in! Just look at the genes she is carrying! Sheer blood will do all the talking! Innumerable gene-conscious people will attest to it. Rather the supporters of this theory form the overwhelmingly majority in the society.

So genes and blood are the be-all and end-all of individuals; isn't it! Now let me humbly inform that Bipasa's parents are not biological, rather just official! Bipasa is

nothing but an adopted daughter of the couple! So exactly in which position this overhyped "gene theory" now resides! Just gone for a toss! Despite ignorance of most of their acquaintances including Bipasa herself about her adopted status, the hard fact or closed secret remains that she is not carrying a single gene of her official parents! We all are absolutely dark

So this gene theory is nothing but a myth as far as one's success or failure in life is concerned! And the very gentle sober humble courteous qualities of Bipasa are nothing but the direct result of the cultured environment in her home and noble moral teachings that her official parents are imbibing on her psyche! Thus not blood or genes, but only opportunities and proper guidance and environment do all the talking in our lives. All things inheritance of intelligence and merit are nothing but bogus.

about her inherited genes which might be of "highly educated" well-established couples, "mediocre" biological parents both in terms of degree or occupation and might be of "uneducated" illiterate labour class! Yet so much talent is embedded within Bipasa!

However "gene-addicted" brigade might still not concede defeat! They will say that Bipasa surely carries the genes of "high quality" couples who are unknown to us! And this is the mystery behind her exceptional intellect and skills in all spheres!

Then so be it! But then I

will also raise a counter question — "Would the genes of Bipasa still done all the talking had she did not got adopted by such truly educated cultured socially highly established couple"! Bipasa is actually a very very lucky soul that the little baby in her landed in a reputed responsible orphanage whose authorities had given her for adoption to such nice parents. She

lowly. And then our "gene-conscious" society might have concluded that this sales girl has not shined in life because of "low quality" genes!

At the end of the day the stark reality remains that behind Bipasa's such stupendous success in all spheres, lie the best of opportunities coaching guidance and education that her official parents are handing over to her. And obviously Bipasa's credit lies in the fact that she is utilising such opportunities to its full.

But how could she have succeeded in utilising those opportunities had she not received it first of all!

Ending with an anecdote involving Harsh Mander — the brave upright righteous former IAS Officer who had resigned in protest against the Gujarat pogrom in 2002.

The highly educated Mander delivers lectures at various universities. Now once while lecturing at IIM Ahmedabad, Mander boldly addressed the class (consisting of students considered to be creamiest of creamy in terms of "talent" and "brilliance") in the following lines :— "Don't think yourself to be special. I am standing here and you are sitting here only because we are privileged. Had all Indians been as privileged as us, I would not have been found to be lecturing here"! What Mander meant to say is that had all Indians been privileged enough to gain best of educational opportunities, he as well as his students might not have gained access to IIM because of resultant extremely steep competition.

Magnifying glass needed to read name of medicine on medicine-strip: Make it compulsory to print strips with name of medicine coming on every tablet-capsule

Madhu Agrawal

Recently I purchased in emergency four tablets cut from a strip of ten of the medicine Zolfresh-5. But I was shocked that the name of medicine printed on side of the cut-strip was printed in so tiny letters that I had to use magnifying-glass to confirm name of the medicine. It may be that the total strip of ten might have Zolfresh-5 printed once on the strip in readable size. But problem arises in case of remaining tablets to be

used later in need when the cut-strip is left either without name of the medicine or name printed in unreadable size.

It should be made compulsory to print name of the medicine on complete strip over every tablet-capsule. Moreover, it should also be compulsory to print-emboss name of the medicine individually on each tablet-capsule. Alternatively, system

can be formulated wherein name of medicine is printed all over on back-ground of the packing-foil, with all other details printed in a darker tone over the packing-foil with name of medicine all over the strip in background like once used to be for Crocin. Metric-system of packaging in medicines in true spirit should be introduced by making it compulsory to pack medicines in units of 1, 2, 5,

10, 20, 50, 100, 200 or 500 gms-mltrs-kgs-litres units unless exemption is sought for some dose-wise administration. Many drug-manufacturers pack even commonly used cough-lozenges in strips of eight instead of normal ten because consumers judge price per strip rather than a lozenge.

Opinion

Please send your letters and articles to
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