

From

SAHELI,  
WOMEN'S RESOURCE CENTRE,  
UNIT ABOVE SHOP 105 to 108  
SHOPPING CENTRE,  
DEFENCE COLONY BRIDGE (SOUTH SIDE)  
NEW DELHI 110 024.

DATE: MAY 1, 1986.

PRESS RELEASE

For the first time in India, the attempts of the Health Ministry and the ICMR to push a hazardous contraceptive for women has been challenged through a writ petition filed in the Supreme Court on the 7th of April 1986.

The Court to-day (1st May 1986) issued notice to the respondents to show cause as to why the petition should not be admitted and stay order granted on further trials of the contraceptive. In addition to the Health Ministry, the ICMR, and the State of Andhra Pradesh, the Drug Controller of India was also impleaded as a respondent. The notice is returnable on July 15, 1986.

The contraceptive in question is Norethisterone- Oenanthate (Net-Oen), an injectable form of the female hormone, progesterone, similar to the controversial drug Depo-Provera. Produced by Sehering, a West German firm it was first marketed in Peru in 1967. In 1971, it was withdrawn as rats tested with this drug developed pituitary and breast nodules. Thereafter, it was put back on the market and is now being propagated as the ideal contraceptive for third world women.

The ICMR is currently engaged in the last stage of trials and the government plans to introduce it into the mass Family Planning Programme in a big way. Far from sharing the optimism of the government and the ICMR, the petitioners contend that there are several reasons for grave concern.

The drug is a definite hazard to women's health and a potential hazard to their progeny. The high dose of Net-oen which is to be injected every two months, causes a complete disruption of the hormonal balance maintaining the reproductive system of women. Menstrual CHAOS, which is experienced by 90% of Indian women administered the drug, is just one of the ways in which this is manifested. Neither has the cause of this menstrual chaos been understood, nor has an effective treatment for it been developed so far.

WHO, though a proponent of Net-Oen, admits that the safety of the drug is yet to be established with regard to aspects such as: effect on lactation and progeny, cancer risk, long-term sequelae, effects on lipid metabolism and endometrial bleeding.

The drug has a long list of contraindications ranging from breast feeding in the initial six months since delivery, liver disease including jaundice, breast or genital cancer, undiagnosed vaginal bleeding, to suspected pregnancy. Women suffering from several other conditions such as diabetes and hypertension, need to be monitored closely. Given the present state of health services in India, the Primary Health Centres (through which the drug will be primarily be administered) are not equipped to screen women with these conditions, administer the injection in a careful and safe manner and deal with complications as and when they arise, Hence, under Indian conditions, the potential hazards of this drug do not justify its introduction into the mass Family Planning Programme.

All the same, in their eagerness to complete the trials on the drug, the centres chosen by the ICMR have been recruiting women through unethical publicity campaigns. Women are being lured by incomplete and biased information which is designed to conceal the experimental nature of the exercise and are led to believe that the drug is already tried and tested.

One of the major fears of the petitioners is that, once introduced, this contraceptive has a high potential for misuse and can recreate the Family Planning Scene of the Emergency era. Unlike then, the unwitting victims may not even be aware that they have become acceptors of this method of contraception because an injection can always be administered under false pretexts.

The petitioners therefore contend that all further experiments on Indian Women with this drug must be stopped and the drug be banned for use in India.

PETITIONERS

Stree Shakti Sanghatana	Women's organisation,	Hyderabad
Saheli	" "	Delhi
Chingari	" "	Ahmedabad

Dr. Shyama Narang, Dr. Kamala S. Jaya Rao, Dr. Davayani Dangoria,  
Dr. A.K. Vasudevan, Dr. Ramana Dhara, Ms. Vimal Balasubramaniam.

RESPONDENTS:

Union of India through its Secretary, Ministry of Health.  
Indian Council of Medical Research through its Director General.  
State of Andhra Pradesh through its Secretary, Department of Health and Family Welfare, Drug Controller of India.

ADVOCATES

Petition filed by Mr. Venkataramani;  
Appeared before Court: Mr. M.S. Ganesh.

# Saheli

Women's Resource Centre

Date..May.,1,1986.....

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Dr. Davayani Dangoria	
Dr. A.K. Vasudevan	
Dr. Ramana Dhara	
Ms. Vimal Balasubramaniam	Journalist

RESPONDENTS

Union of India through its Secretary, Ministry of Health.  
Indian Council of Medical Research through its Director General.  
State of Andhra Pradesh through its Secretary, Department of Health  
and Family Welfare.  
Drug controller of India.

ADVOCATES

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Appeared before court ; Mr. M. S. Ganesh

COUNTRIES WHERE NET-EN IS AVAILABLE

In 1983, Schering provided a list of 34 countries where NET-EN (Noristerat) was available.

AUSTRALIA	BAHAMAS	BARBADOS
BELIZE	BERMUDA	CARACAO
CENTRAL AFRICAN REPUBLIC		CENTRAL AMERICA
DENMARK	FRANCE	DOMINICAN REPUBLIC
GERMANY (FED.REP.)	HAITI	GUATEMALA
INDONESIA	KENYA	LIBERIA
PAKISTAN	PERU	PHILLIPINES
PORTUGAL	SINGAPORE	SIERRA LEONE
SOUTH AFRICA	SURINAM	THAILAND
TRINIDAD	ZAIRE	ZAMBIA

It is also being used in field studies in:

BANGLADESH	CUBA	EGYPT
PEOPLE'S REP. OF CHINA	TUNISIA	INDIA
IRELAND	SWITZERLAND	SWEDEN

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