

**NATIONAL WORKSHOP
ON
HOMOEOPATHY FOR
HEALTHY MOTHER AND HAPPY CHILD**

**PROCEEDINGS
AND
RESOLUTIONS**

DATE: 5th and 6th NOVEMBER 2007

**VENUE:
INDIA ISLAMIC CULTURAL CENTRE
87- 88, Lodhi Road, New Delhi**

Organized by

Department of Ayurveda, Yoga and
Naturopathy, Unani, Siddha and
Homoeopathy (A.Y.U.S.H.)
Ministry of Health and Family Welfare
Government of India

Central Council for Research in Homoeopathy
*(An Autonomous Organization of the
Department of A.Y.U.S.H., Ministry of Health
and Family Welfare)*

NATIONAL CAMPAIGN ON HOMOEOPATHY FOR MOTHER AND CHILD CARE

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PREFACE

The different AYUSH systems have their particular strengths as far as the treatment is concerned. The Department of AYUSH has decided to launch National Campaigns so as to focus on the strengths of the different AYUSH systems relating to particular areas of concern. The National Campaign relating to Homoeopathy focuses on its potential for Mother and Child Health Care. The Campaign is being coordinated by the Central Council for Research in Homoeopathy.

At the start of Campaign, a “**National Workshop on Homoeopathy for Healthy Mother and Happy Child**” was held on 5th and 6th November 2007 at New Delhi. The objectives of the workshop were to sensitize the stakeholders, policy makers and physicians from other medical disciplines, pharmaceutical industry, NGOs etc. regarding the strengths of Homoeopathy in Mother and Child Care and to create greater awareness and avenues for coordination amongst the practitioners of different streams of medicine thereby benefiting the patients at large. The response from the medical profession and others was very encouraging.

Many eminent resource persons including the policy makers, professionals from modern medicine and homoeopaths from India and abroad have made valuable contributions in the national workshop.

The CCRH has compiled the proceedings of the workshop which contain summaries of the papers presented and resolutions adopted and plan to carry forward the National campaign to state, district and sub-district levels.

I am sure, the proceedings of the National Workshop will provide a valuable database for mainstreaming Homoeopathy in health care delivery system with a special focus on Mother and Child Care.

Smt. Anita Das
Secretary
Deptt. of AYUSH

FOREWORD

Homoeopathy has inherent advantages being safe, effective and useful for a wide range of diseases. Whilst specifically talking about Homoeopathy in mother and child care, it can be emphasized that homoeopathic medicines can be safely used in sensitive conditions like pregnancy, lactation, infancy and early childhood, without the possibility of adverse events. The use of single, simple substances in highly diluted forms (potencies), palatability of medicines and consideration of constitution in treatment of diseases are other advantages of Homoeopathy over other systems of medicine.

In India, the different systems of medicine (Allopathy, Homoeopathy and Indian Systems of Medicines) co-exist with the Governmental support and public acceptance. However, strategic approaches for integrated health care have not been undertaken markedly. With NRHM and its emphasis on greater outreach to the rural areas, it is now possible to take Homoeopathy to the grass root levels.

With this background, the **National Campaign on Homoeopathy on Mother and Child Care** was flagged off through the ***National Workshop on Homoeopathy for Healthy Mother and Happy Child***. This workshop was one small step towards sensitizing the policy makers, practitioners of different systems of medicine and the common man, on the potentials of Homoeopathy in addressing health related problems of the mother and the child.

The effort of Department of AYUSH is highly commendable for launching this National campaign. However, there is need for sustained and coordinated efforts, both from government and private sector, to effectively harness the potentials of homoeopathic system of medicine for the benefit of needy persons, specially women and children.

I extend my gratitude to all the resource persons, chairpersons, co-chair persons and participants, without whose co-operation and active participation, this workshop would not have been successful.

The combined skills and enthusiastic teamwork demonstrated by the CCRH staff, with the support of the Deptt. of AYUSH and collaborators, in organizing the workshop has been impressive.

I look forward to the active cooperation of all the stake holders to carry forward the campaign to state and district levels.

Prof. C. Nayak
Director
CCRH

INTRODUCTION TO THE NATIONAL WORKSHOP

The Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH), Ministry of Health and Family Welfare, Government of India decided to launch a National Campaign to propagate and promote AYUSH systems in public health needs of the country with due emphasis on their inherent strengths. Homoeopathy has been chosen for its role in Mother and Child Care.

To flag off the **National Campaign on Homoeopathy for Mother and Child Care**, the Department of AYUSH organized a **National Workshop on Homoeopathy for Healthy Mother and Happy Child**. A two-day intensive workshop on the model program was organized at India Islamic Cultural Centre at 87-88 Lodhi Road, New Delhi on 5th & 6th November 2007. The workshop was coordinated by the Central Council for Research in Homoeopathy, *an autonomous organization of the Department of AYUSH, Ministry of Health and Family Welfare*. The objective of the workshop was to sensitize all the stakeholders, i.e. policy makers, medical practitioners of the allopathic and homoeopathic systems of medicine, industries and NGOs regarding strengths of Homoeopathy in Mother and Child Care. The workshop aimed at providing a platform for the exchange of information and establishing linkages between these stake-holders so as to carry forward the national campaign.

The participants of the workshop included policy makers, allopathic physicians and homoeopathic physicians. Representation was also seen from homoeopathic pharmaceutical industry, homoeopathic publishers and non-governmental organizations dealing with health care. A total of 292 delegates from India and abroad, including 64 policy makers, 41 allopathic physicians and 163 homoeopathic physicians participated in the workshop. There were 12 representatives of homoeopathic industries and 12 from NGOs from all over India.

The resource persons at the workshop were representatives of these groups of participants. They included homoeopathic physicians from India and abroad, allopathic physicians, allopathic physicians who further studied Homoeopathy and are practicing Homoeopathy, Policy Makers including Health Secretaries and Mission Directors of National Rural Health Mission (NRHM) or their representatives.

The workshop was structured to maximize the exposure of the workshop participants to the strengths of Homoeopathy and sensitize them for better policy and program coordination and implementation in order to integrate the use of Homoeopathy with respect to Mother and Child Care at all levels.

The introductory session at the workshop was a plenary session which introduced Homoeopathy and its role in mother and child care to the audience. Also the concept of mainstreaming of AYUSH was introduced to the participants. The breakaway groups on the first day of the workshop gave emphasis on concept clarification and identification of group specific problems and issues. Resolutions were formed by individual groups taking into consideration the future role they are expected to play in carrying forward the National Campaign. On the second day of the workshop only plenary sessions were held where the resource persons shared specific success stories with the participants. The plenary sessions resulted in formation of resolutions whilst creating avenues for coordination and future cooperation.

The workshop also aimed to assist the participants in acquisition of practical knowledge that will lend them to the future capacity to replicate this workshop at state and district levels and become active participants in the women and child health programs in India, through Homoeopathy.

Specific resource material and literature were prepared for the workshop. This included:

1. *'Strategic development of Homoeopathy for mother and child care'* - a handbook specifically targeted at policy makers
2. *'Homoeopathy for Mother and Child Care: an overview'* - a handbook specifically targeted at allopathic physicians
3. *'Manual of National Workshop on Homoeopathy for Healthy Mother and Happy Child'*
4. Handouts on 17 disease conditions:
 - a. Vomiting of Pregnancy and Homoeopathic Management
 - b. Homoeopathy for Heartburn and Indigestion during Pregnancy
 - c. Homoeopathic Management of Constipation and Piles during Pregnancy
 - d. Backache during Pregnancy

- e. Homoeopathic Treatment of Anxiety and Fears during Pregnancy
- f. Homoeopathy for Common Breast Problems after Delivery
- g. Infant Colic and Homoeopathic Management
- h. Homoeopathic Management of Dentition Troubles in Children
- i. Homoeopathy for Bronchial Asthma in Children
- j. Homoeopathy for Acute Bronchitis in Children
- k. Homoeopathy for Common Cold in Children
- l. Homoeopathy for Sinusitis in Children
- m. Homoeopathy for Tonsillitis and Enlargement of Adenoids in Children
- n. Diarrhoea in Children and Homoeopathic Management
- o. Constipation in Children and Homoeopathic Management
- p. Behavioural disorders in Children and Homoeopathy
- q. Homoeopathy for Learning Disabilities in Children

5. Soft copy of all presentations in CD

6. *'Integrated Management for Pregnancy and Childbirth: Pregnancy, Childbirth, Postpartum and New Born Care: A guide for essential practice'* procured from World Health Organization, Geneva

7. Homoeopathic Medical Kit for common ailments of mother and child

The commitment of the Government of India was reflected through the presence of Union Minister for Health and Family Welfare and Union Minister of State for Health and Family Welfare at the workshop.

Homoeopathic system of medicine is growing fast with the government patronage in India but due to limited infrastructural resources, outreach of the system is limited. There is need for sustained and coordinated efforts both from government and private sector to exploit the benefits of homoeopathic systems of medicine for the use of needy persons specially women and children, the vulnerable sections of the society. There is need to co-locate different systems of treatment under one roof so that the patient has a choice to avail of the services of a particular system as per his/her requirement. A team of Allopathy and Homoeopathy experts working on cases where there is limitation of scope in either system can expand the

boundaries of therapeutic management in the best interest of the suffering patient. For this, a well placed information system is to be devised for the education of general masses.

It is hoped that through this national campaign on Homoeopathy for mother and child care, following objectives will be achieved:

1. Sensitizing the target group about the potential role of Homoeopathy in the management of Mother and Child Health problems.
2. Greater coordination among practitioners of all the systems of medicine resulting in an integrated health care approach for Mother and Child health.
3. Equipping homoeopathic practitioners to deal with mother and child diseases by utilizing the knowledge acquired from the campaign in the management of Mother and Child health matters.
4. A significant improvement in Mother and Child health as a result of homoeopathic treatment.

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With a special focus on health status of women and children, various initiatives had been taken by the Govt. of India. National Health Policy 2002 acknowledged the role of AYUSH systems in the health scenario of the country. The National Rural Health Mission also advocated mainstreaming of AYUSH systems of medicine in the health sector of the country. Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) has decided to launch National Campaigns in order to harness the potentials of these AYUSH Systems depending upon their strengths.

Homoeopathy has been chosen for its role in Mother and Child Care. There are many areas where Homoeopathy has an edge over other medical steams and can deliver its services for promotion of Mother and Child Healthcare.

A National Workshop on Homoeopathy for Healthy Mother and Happy Child was held at India Islamic Cultural Centre, New Delhi, on 5th-6th November, 2007. This was the beginning of a series of state level and district level campaigns proposed for propagating the strength of Homoeopathy in this sector.

Participation was seen from Policy makers including State Health Secretaries, Commissioners/Directors of ISM & H, Mission Directors of National Rural Health Mission (NRHM) or their representatives. Homoeopathic physicians from each and every state of the country and from four Union Territories also participated. In addition, homoeopathic physicians from abroad like Sri Lanka, Italy, USA and Nepal also participated. Allopathic physicians and professors, mostly belonging to the department of Obstetrics & Gynaecology or Paediatrics participated from various states. Participation was also seen from homoeopathic pharmaceutical industry, homoeopathic publishers and non-governmental organizations dealing in health care, from different parts of the country.

INAUGURATION - 5TH NOVEMBER 2007

1000 – 1115 Hours

- Garlanding of statue of Dr. Hahnemann and lighting of lamp
- Welcome address by Shri Verghese Samuel, Joint Secretary, Department of AYUSH
- Key note address by Guest of Honour, Dr. Diwan Harish Chand
- Address by Smt. Anita Das, Secretary, Department of AYUSH
- Inaugural Address by Chief Guest Smt. Panabaka Lakshmi, Minister of State for Health and Family Welfare, Government of India
- Release of publications
- Vote of thanks by Prof. C. Nayak, Director, CCRH

At the outset, Shri Verghese Samuel, Joint Secretary, Department of AYUSH welcomed the participants and dignitaries. Shri Samuel asserted that the integration of Indian systems of medicine and Homoeopathy with the mainstream medicine is one of the unfinished business of the health care system of India. A great deal has been said about it in the past but not much is being done. This campaign, 'Homoeopathy for Mother and Child Care' is organized particularly to highlight what is available, the depth and the usefulness of the AYUSH systems, especially their preventive aspect and their integration with the health care delivery system of the country. He highlighted that a very definitive intervention is to begin with the functional integration at the PHC level itself. He said that a series of national campaigns would be organized on this basis following this campaign, such as Unani for skin disorders, Ayurveda for geriatric disorders and yoga for mental health. These campaigns will create awareness among the public at large such that the Indian Systems of medicine could be used as mainline care in the Country. On this occasion, Shri Verghese Samuel welcomed the Hon'ble Minister and all the dignitaries and the participants to the workshop.

The workshop was inaugurated by the Hon'ble Union Minister of State for Health & Family Welfare Smt. Panabaka Lakshmi on 5th November, 2007. Addressing the workshop, Smt. Panabaka Lakshmi highlighted the growing acceptance and popularity of Homoeopathy all over the world and stressed for its focused development, as Homoeopathy has a definite role

to play in the delivery of healthcare to the people in the country. She observed that Homoeopathy being effective, safe and affordable has become very popular throughout the country. There is a proposal for upgrading the National Institute of Homoeopathy, Kolkata as 'Centre of Excellence in Homoeopathy' and setting up a North Eastern Institute of Ayurveda and Homoeopathy at Shillong.

Smt. Lakshmi stressed the need for developing adequate homoeopathic healthcare facilities in the country and said that the integration of AYUSH systems with main stream healthcare has been a long standing policy objective of the Government. She asked the State Governments to take immediate action to establish wider healthcare facilities under Homoeopathy and other Indian systems at the PHC, CHC and district level hospitals.

The Minister observed that Homoeopathy offers effective treatment for diseases and conditions affecting mothers and children. There is a need to generate public awareness about the effectiveness and availability of such homoeopathic treatments. She urged that the National Campaign on Homoeopathy must focus on generating awareness about the strengths of Homoeopathy in mother and child care and that it should pave the way for integration of Homoeopathy and other Indian systems of medicine into the main stream healthcare organization of the country.

On this occasion Smt. Anita Das, Secretary to Government of India, Ministry of Health and Family Welfare, Department of AYUSH, said that the Government proposes to increase awareness about the potential of Homoeopathy and strengthen healthcare services through this system for the mother and the child segment of our population. She stressed the need for a nation-wide campaign highlighting the strengths of Homoeopathy, especially in the treatment of women in reproductive stage and children, and said that Homoeopathy has a strong presence in parts of the country like Kerala, West Bengal and the North Eastern States. This system needs to be popularized in the rest of the country also.

In keeping with the objectives of the National Rural Health Mission (NRHM), she emphasized the need for integration of Homoeopathy and other Indian Systems of Medicine in the National Healthcare delivery system.

The Secretary observed that India has the best of education, research and healthcare facilities in AYUSH systems. She laid special emphasis on upgrading education in Homoeopathy and said that there is a need for organizing Continuing Medical Education (CME) and Re-Orientation Training Programmes (ROTP) for teachers and practitioners of Homoeopathy and other AYUSH systems frequently. She asked the students of these systems to feel pride in pursuing education and training in their respective systems.

At present, there are 183 colleges imparting Degree level education and 33 colleges offering Post Graduate education in Homoeopathy in the country. About 13000 graduates pass out every year. There are about 23 State Boards / Councils for Homoeopathy which have been established by State Governments to register persons possessing recognized medical qualifications. The country has 220858 registered practitioners of Homoeopathy. There are 228 homoeopathic hospitals having bed strength of 11099 besides 5770 homoeopathic dispensaries.

The Secretary urged the participants to develop on policy work, better program implementations as well as strengthening the services and developing effective cross referral linkages so that the patient can derive maximum benefit at affordable cost and least side effects.

Veteran Homoeopath and Chairman of Scientific Advisory Committee of Central Council for Research in Homoeopathy, Dr. Diwan Harish Chand, who was the Guest of Honour for the occasion, gave the keynote address to the workshop. He welcomed the initiatives of Deptt. of AYUSH for taking up the campaign of Homoeopathy for Mother and Child Care. In the beginning he cited the quotations of Dr. Ramalingum, Director of ICMR, that all systems are evolutionary and allopathic medicines provide only palliative relief, that too temporary. He highlighted the merits of Homoeopathy over other systems. He stressed that overuse of allopathic medicines can have poisonous effects on the body. Homoeopathic medicines can be safely instituted and provide freedom from iatrogenesis too. He further highlighted that homoeopathic medicines are cost effective and community can easily afford it. He stressed that in highly populated country like India health care may not be provided to all with expensive allopathic medicines even with the entire budget. He highlighted that Homoeopathy is better suitable in villages where laboratory facilities are not available and

also in the diseases where diagnostic labels are not required. And above all Homoeopathy is child friendly and is easily accepted by them.

Prof. C. Nayak, Director, CCRH, proposed the vote of thanks. On this occasion three publications related to the National Campaign on Homoeopathy for Mother and Child Care, namely '*Manual on National Workshop on Homoeopathy for Healthy Mother and Happy Child*', '*Strategic Development of Homoeopathy for Mother and Child Care*' and '*Homoeopathy for Mother and Child Care - An Overview*' were released.

**SPEECH OF THE HON'BLE MINISTER OF STATE FOR HEALTH & FAMILY WELFARE,
SMT. PANABAKA LAKSHMI, AT THE INAUGURAL CEREMONY OF THE NATIONAL
CAMPAIGN ON HOMOEOPATHY IN MOTHER AND CHILD CARE**

I am extremely happy to be with you this morning on the inaugural ceremony of the National Campaign on Homoeopathy for Mother and Child Care organized by the Department of AYUSH and the Central Council for Research in Homoeopathy. The National Workshop being organized today is the first step of this National Campaign. This is the beginning of a long and sustained campaign proposed by the Ministry to generate awareness about the usefulness of Homoeopathy for mother and child health care. After this the Campaign will go down to state and district level. I would advise the Department to organize a sustained campaign so that the general public can be made aware of the usefulness of Homoeopathy for conditions and diseases related to women and children. At the outset may I wish the workshop all success.

I am aware that Homoeopathy is gaining acceptance and growing in popularity all over the world. In India, after independence Homoeopathy has assumed prominence as a system of medicine and has become very popular throughout the country. Government of India has been according high priority for its development along with our traditional systems of medicine. In order to have focused development of these systems and to use them effectively in the health care system, the Department of AYUSH was established in 1995 in the Ministry of Health & Family Welfare. Since then the AYUSH systems have developed significantly.

Homoeopathy has a definite role to play in Indian health care system not only because its medicines are simple to administer but also because it is effective, safe and affordable. With the mounting price rise of the modern drugs and increasing incidence of adverse drug reactions people are using Homoeopathy and the homoeopathic institutions for the treatment of their ailments. The complexities of diseases are increasing all the time and new health problems are cropping up which are difficult to treat. In spite of concerted efforts Cancer, HIV/AIDS, Hepatitis, Tuberculosis, etc. remain major challenges. There is resurgence of interest in Homoeopathy all over the world.

In the 11th Plan, the outlay for the Department of AYUSH has been increased tremendously. There is a proposal to upgrade the National Institute of Homoeopathy, Kolkata as a Centre of Excellence in Homoeopathy. The Government is also proposing to establish a North Eastern Institute of Ayurveda and Homoeopathy at Shillong. The Government has already notified the G.M.P. for Homoeopathic drug units. We have already strengthened the Homoeopathic Pharmacopoeia Laboratory. Financial assistance has been given to establish model colleges in Kerala, Andhra Pradesh, West Bengal, Orissa and Madhya Pradesh. With all these steps, the homoeopathic system is going to expand enormously.

The objective of providing homoeopathic treatment for mother and child health care can be achieved only when adequate homoeopathic health care facilities are available in the country. The integration of AYUSH systems with mainstream health care has been a long standing policy objective of the Government of India. The simplest and most effective way to achieve such integration would be by setting up AYUSH in patient and out patient facilities in PHCs, CHCs and district level hospitals with the use of funds available under the Hospitals & Dispensaries scheme implemented by the Department of AYUSH. This Hospitals and Dispensaries Centrally Sponsored Scheme has now also been subsumed under the NRHM and this means that creation of AYUSH facilities can be proposed in the State PIPs. It must also be remembered that the integration of AYUSH systems with mainstream health care is one of the objectives of the NRHM. I would, therefore, request all the State Governments to take immediate action to set up homoeopathic facilities and indeed facilities under the other Indian Systems of Medicine in their PHCs, CHCs and district level hospitals, using the funds available with the Department of AYUSH.

Homoeopathy has a number of well-known treatments for diseases and conditions affecting mother and children. What is important now is to generate awareness among the general public about the effectiveness and the availability of such homoeopathic treatments. This National Campaign must focus on generating awareness about homoeopathic treatments for mother and child care and in doing so focus attention on the integration of Homoeopathy and Indian Systems of Medicine into the mainstream healthcare system in the country.

I have great pleasure in declaring the National Workshop open and I wish it and the National Campaign all success.

**SPEECH OF SECRETARY (AYUSH), SMT. ANITA DAS, AT THE INAUGURAL
CEREMONY OF THE NATIONAL WORKSHOP ON HOMOEOPATHY FOR HEALTHY
MOTHER AND HAPPY CHILD**

I on behalf of the Department of AYUSH, welcome you to this national workshop on Homoeopathy for “Healthy Mother and Happy Child”. This workshop inaugurates a nation-wide campaign on “Homoeopathy for Mother and Child Care”. It is proposed to increase the level of awareness and strengthening the health care services through Homoeopathy for this important segment of our population. While Homoeopathy has strong roots in parts of the country like Kerala, West Bengal, the North Eastern States, and has wide network of renowned physicians, its potential and strengths need to be popularized in the rest of the country. Hence, the felt need to have a nation - wide campaign showcasing the strengths of Homoeopathy, especially in the treatment of women in the reproductive stage and children.

Homoeopathy is a specialized method of treatment based on the theory of “Similia Similibus Curantur” i.e. like cures like. Homoeopathy is gaining acceptance and popularity all over the world because it is simple to administer, also effective, safe and affordable. Homoeopathy is found to be highly beneficial for many diseases related to women and children and can be used during child birth to contend problems associated with labour and is effective for post-delivery and lactational complaints.

At present, there are **182** colleges imparting B.H.M.S. education and **33** colleges are imparting PG education as well. About **13,000** graduates pass out every year. There are about **23** State Boards / Councils of Homoeopathy which have been established by State governments under Statutes which register persons possessing recognized medical qualifications. Registered Practitioners of Homoeopathy are 220858. *The number of homoeopathic hospitals is 228 with a bed capacity of 11,099. The number of homoeopathic dispensaries is 5,770.*

The National Institute of Homoeopathy was established on 1975 in Calcutta as an autonomous organization under the Ministry of Health & Family Welfare, Govt. of India, as a model Institute in Homoeopathy in the country. The main objectives of the Institute are to

develop high standard of teaching, training and research in all aspects of Homoeopathic System of Medicine.

The Central Council for Research in Homoeopathy (CCRH) was established on 30th March, 1978 to formulate, coordinate, develop and promote research in Homoeopathy.

The Homoeopathic Pharmacopoeia Laboratory was established in 1975 at Ghaziabad to workout standards and tests for homoeopathic drugs.

As you are aware with the launch of the flagship programme of the Union Government to provide quality health care services at the grass root level, there has been a massive effort to mainstream AYUSH systems by appointment of AYUSH doctors on contractual basis in every state, and setting up of AYUSH facilities and specialty clinics in the District Hospitals, Community Health Centers and Primary Health Centres. As the service provision is expanding, it is also time to focus on the strengthening of the AYUSH systems, upgrading the quality of therapies and therapists, and most of all making the people at large aware of the efficacy and strengths of these systems. It is in this context that the Department of AYUSH has decided in this year to initiate National Campaigns on select AYUSH themes like Homoeopathy for Mother and Child Care, Unani Medicine for Skin Diseases, Ayurveda and Siddha for Geriatrics Care and Yoga and Naturopathy for Mental Health. Each of these Campaigns will be kick started with the National Workshops followed by the State and Regional level Workshops and District and Sub-district level awareness campaigns. We have already involved all State Governments in the campaigns.

We have flagged-off the National Campaign on Kshar-Sutra, the time-tested and ICMR validated para-surgical procedure for ano-rectal disease conditions in August 2007 at the All India Institute of Medical Sciences. We have got an excellent response from 14 States for the Kshar-Sutra State level Campaigns to be held from this month onwards. Similarly, for the National Campaigns on Homoeopathy for Mother and Child Care, this workshop would focus on how to enhance popular awareness about the efficacy and strengths of Homoeopathy, and concurrently examine qualitative aspects of Homoeopathy related services at the district and sub-district level. I would like to mention here that the Workshop is not conceived of as an academic one with learned presentations, but as a platform for constructive discussions

on how to improve health care delivery through Homoeopathy to this most vulnerable segment of our population. What measures need to be taken at the policy level and at the programme level to operationalize good health care to the focused group of patients in the backward and remote parts of the country? I must say here that I was impressed with the work being done by the Dhawale Trust in Thane district in a tribal block wherein outreach services have been provided to the tribal women and children in a dedicated way. I do not know if there are any other such models developed elsewhere in other states but I think models like these need to be developed and sought to be replicated if Homoeopathy is to reach out to people at large. In the Department of AYUSH we would be happy to build on such models and provide support for their replication. In this workshop, we should deliberate on how to develop Centers of Excellence at the regional and state levels, at the district and sub-district levels. How to train our doctors, how to train the teachers, how to motivate students to strive for excellence in the field, how to build it into the continued medical education (CME), Re-orientation training programmes (ROTP), and how to constantly upgrade the delivery of services.

There are many issues both for practitioners, teachers and researchers and above all for policy makers to give the overarching policy support, to play the enabling role.

The structure of the workshop incorporates both technical sessions indicating scope for wider applications and policy related sessions for creating an enabling environment. As you will see the workshop strategically placed at the start of the national campaign, is for chalking out the way forward.

I understand that there are a large number of policy makers from different states, a large number of modern medicine practitioners as well as AYUSH experts present here. We are, therefore, looking into good deliberations on policy work, on better programme implementation as well as scientific discussions on how to strengthen and upgrade the services as well as how to develop the effective cross referral linkages so that the patient population can derive maximum benefit at affordable cost and least side effects. I am happy to note that some advanced medical care institutions in the country have already initiated work in cross disciplinary referrals and that they have provided Homoeopathy consultation alongside Allopathic facilities. But this needs to be developed in a very big way. As I

mentioned under NRHM, the Government is consciously trying to develop a Cafeteria approach at the level of district hospitals, CHCs and PHCs. We already have the example of Kerala and Tamil Nadu where not only does the patient have a choice of therapy to go for, but there is also an active cross referral system in place.

We have here the Ex-Commissioner of AYUSH from Tamil Nadu, Dr. Vijay Kumar who will give a brief presentation on the cross-referral practice in Government hospitals in Tamil Nadu. I am told that in China, as you enter a hospital, it provides Traditional Chinese Medicine in equal measure. So in the interest of reproductive and child health in the country especially in the remote and backward areas, it is essential, we feel, to give equal importance to the AYUSH systems of Medicine for patient care and to tap the vast potential contained therein. I am confident that in partnership with the State Governments, we will be able to carry this campaign forward through the length and breadth of the country. Needless to say, the close cooperation and support of friends in the media both at the national and the regional levels will deploy the tools and technologies in their command to further this developmental message in health care of our patient population who needed most, living in the backward and remote parts of the country.

I would like to express my thanks to the commendable work done by Dr. C. Nayak, Director, CCRH and his team of officers as well as the officers of the Department of AYUSH and the other Research Councils, whose support and hard work had enabled this workshop.

Once again a very warm welcome to all of you and I wish you fruitful deliberations.

DAY I OF THE WORKSHOP - 5TH NOVEMBER 2007

PLENARY SESSION - 1

1145 - 1345 Hours

Plenary session – 1: introduced Homoeopathy and its scope in Mother and Child Care to the diverse audience comprising of Policy Makers, Allopathic physicians and Homoeopathic physicians.

CHAIRPERSON

Dr. Diwan Harish Chand

Chairman

Scientific Advisory Committee

Central Council for Research in Homoeopathy and

Former Advisor (Homoeopathy), Government of India.

CO-CHAIRPERSON

Dr. Sohan Singh

Chairman

PG education Committee

Central Council of Homoeopathy

RAPPORTEUR

Dr. Divya Taneja

Consultant

Central Council for Research in Homoeopathy

New Delhi

THE BASIC TENETS OF HOMOEOPATHY

Dr. Vishpala Parthasarathy

MD (Hom.)

Chief Editor, National Journal of Homoeopathy, Mumbai

Dr. Vishpala Parthasarathy discussed the basic tenets of Homoeopathy. Particularly the laws of similia, single remedy, minimum dose, potentization, holistic and individualistic aspects of Homoeopathy were highlighted in her presentation.

She began the session by describing the meaning and origin of Homoeopathy, followed by a brief description of its cardinal principles. She further explained the basic differences between Homoeopathy and other systems of Medicine. She stressed that other systems of Medicine treat particular organs/systems/complaints while Homoeopathy treats the patient by considering him as a whole; a single unit.

Dr. Vishpala also spoke on the increasing demand of Homoeopathy not only in India but all over the world, as it is emerging as safe, successful and inexpensive mode of treatment. Homoeopathy is becoming a treatment of choice particularly in chronic problems such as arthritis, chronic headaches, recurrent infections, degenerative disease, of bone, blood or nerves, high blood pressure, epilepsy, asthma, menopausal syndrome and immune system deficiencies (allergy and auto-immune disorders) Even animals have benefited from its use and food crops have yielded better quality where the soil is treated with homoeopathic medicines.

She presented a case of a 5 year old child suffering from acute attack of Asthma and after administering symptomatically indicated homoeopathic medicine, repeated at short intervals, the child recovered in a short time. Once the acute attack of asthma was over, the child was given his Constitutional remedy after thorough case taking. Regular follow ups showed that the episodes of acute asthma gradually reduced and there has been not even a single acute attack since 1 year now.

Dr. Parthasarathy concluded her presentation by mentioning the duration for which patients require homoeopathic treatment in various illnesses. She believes that "Any imbalance that is deep-seated and chronic, will take longer to alleviate than a newly acquired illness. For chronic ailments, Homoeopathy needs to be continued for the longer time, sometimes even years."

POTENTIALS OF HOMOEOPATHY IN MATERNAL AND CHILD HEALTH

Dr. K. M. Dhawale

MD, DPM, MF (Hom.) (London)

Hon. Director, Dr. M. L. Dhawale Memorial Trust, Mumbai

Dr. K. M. Dhawale began his presentation by throwing light on the indicators of maternal and child health in India, which are, the maternal mortality, neonatal mortality, infant mortality and child mortality rates. He further elaborated the UN Millennium Development Goals and raised very pertinent questions such as, "Can any one medicinal system take care of the burden of morbidity and mortality especially in the urban slums and rural/tribal areas? Are there peculiar strengths of Homoeopathy which can address the concerns of UN Goals? Are there experiences to prove the efficacy of Homoeopathy to address these problems?"

He embarked on the strengths of Homoeopathy that, it corrects the internal imbalance and thus improves the susceptibility of the individual at all levels, resulting in better assimilation and adaptation by the individual.

Dr. Dhawale elaborated the common conditions for homoeopathic intervention in obstetric care. It included preterm labour pains, threatened abortions, non-progress of labour in primigravidae, post dated multigravidae, pregnancy induced hypertension and failure of induction with allopathic mode of treatment.

He enumerated some common gynecological conditions reporting for homoeopathic treatment in urban centers such as Cervicitis, Pelvic inflammatory disease, Fibroid uterus, Dysfunctional uterine bleeding, Menstrual irregularities, Polycystic ovarian disease, Fibroadenosis and Infertility. He also listed some common clinical conditions in children treated with Homoeopathy like injuries, infections, infestations, insect bites & scorpion stings, allergies, anemia, malnourishment and behaviour problems, etc.

He further detailed a study conducted in daycare centers in rural area to govern the efficacy of homoeopathic treatment in children less than 5 years of age, treated through the Constitutional approach, and the results were gathered from the teacher's observations at the end of one year of intervention. The results showed that the overall health and the development of children improved. Children escaped the usual epidemics that attacked other children in the village. Teachers also reported changes in the behaviour and nature of the children.

Another study was conducted on prevention of Chikungunya through Homoeopathy in school going children, where homoeopathic medicine *Eupatorium perfoliatum* 200/1dose was given as Genus epidemicus in more than 200 children. Regular follow-ups showed that no child developed Chikungunya, though two teachers were suffering from the disease initially and also the illness raged in an epidemic form in the surrounding areas.

In the end, Dr. Dhawale, shared another study of Homoeopathy in treatment of anaemia in school children, where after giving constitutional medicine, Hb level and overall health improved; rate of illnesses and infections dropped and performance improved in children.

STATUS OF HOMOEOPATHY IN INDIA

Dr. Eswara Das

MD (Hom), MBA (Health Care)

Deputy Advisor (Homoeopathy), Department of AYUSH, Ministry of Health & Family Welfare, Government of India

Dr. Eswara Das gave a brief review of status of Homoeopathy in India, the Government policies and infrastructure, homoeopathic practice and industry in India. He highlighted that Homoeopathy is recognized as one of the National Systems of Medicine and Government has taken steps in the sectors of Education, Research, Drug Development and Health Care Services to develop Homoeopathy.

The Central Council of Homoeopathy was constituted by the Government under the provisions of the *Homoeopathy Central Council Act*, of Parliament in 1973. The Council enforces various education regulations to maintain uniform standards and also maintains a Central Register of Homoeopaths. At present, there are 182 undergraduate (UG) colleges, 2 exclusive Post Graduate (PG) colleges, 31 UG Colleges with upgraded Departments for Postgraduate training, 7 Postgraduate specialties, 35 Government institutions, approximately 13000 admission capacity per year in UG colleges, approximately 659 admission capacity per year in PG colleges and 40 Universities conducting UG/PG courses in India. The doctors are trained in clinical examinations, investigations, diagnosis, prognosis, and to prescribe homoeopathic medicines and also to refer patients to other disciplines whenever required. They also impart health care activities at Primary and Secondary health centers. The academic institutions are financially assisted by Central Government through a Centrally Sponsored Scheme called "Development of Institutions" to improve and maintain the standards.

Research in Homoeopathy is encouraged through two routes, i.e., intramural and extramural routes. In the intramural route, the Central Council for Research in Homoeopathy is the apex Research Council constituted by the Government, which functions through 33 units across the country. It carries out Fundamental & Collaborative Research, Clinical Research, Clinical Verification, Drug Proving Research, Drug Standardization, Survey of Medicinal Plants used in Homoeopathy and Documentation. At present 97 research projects have been completed. In the extramural route, the Government extends funds to other organizations/Institutions to carry out research in identified areas and these projects are assessed by Technical Evaluation Committee and finally approved by a Screening Committee headed by Secretary (AYUSH). At present there are 32 research projects continuing and 11 projects have been completed.

Dr. Das highlighted that different State Governments have opened 228 hospitals with 11099 beds, 5770 homoeopathic dispensaries and 24 States have enforced Drugs and Cosmetics Act 1940 and 1945. There are 659 Manufacturing Units, Homoeopathic Pharmacopoeia Laboratory for drug quality control and about 150267 qualified homoeopathic doctors. Today, India is the biggest market for Homoeopathy due to its popularity and it is also exporting homoeopathic products to Sri Lanka, Bangladesh, Oman, Malaysia, Switzerland, USA, Mexico, UK, New Zealand and Nepal.

HOMOEOPATHY IN OBSTETRICS: THE UNITED STATES SITUATION

Dr. Joyce Frye

DO, MBA, MSCE,

Fellow, American College of Obstetricians and Gynecologists

Adjunct Scholar, Center for Clinical Epidemiology and Biostatistics, University of Pennsylvania, USA

Dr. Joyce Frye from USA shared her experiences of obstetric practice through Homoeopathy in United States. She embarked that the use of Homoeopathy has effectively helped in treating various conditions during pregnancy including nausea and vomiting, insomnia, malpresentation, delayed and dysfunctional labour; post-partum issues such as healing of tear of tissues, urinary retention, lactation difficulties, and depression. She stressed on the need to develop research collaborations to generate evidence to demonstrate the safety and cost-effectivity of Homoeopathy.

In USA, the primary growth in use of Homoeopathy in the field of Obstetrics is among the midwives, who either practice in birth centers or who offer home deliveries.

She further elaborated a study conducted in USA in 2002 to determine efficacy of *Pulsatilla* for breech presentation in pregnancy. The study was conducted for period of 5 years and the sub-lingual administration of one or more doses of *Pulsatilla* in 200c or 1M potency in pregnant women, having foetal breech presentation diagnosed after 36 weeks of gestation, was carried out. The outcome of the study showed correction in the breech presentation in 42 % of cases; thus, leading to normal delivery and avoidance of caesarean delivery which was commonly done in such cases. The results are interesting when compared to the medical literature which reveals that spontaneous version rate after 34 weeks of gestation without taking any treatment is 17 %. In addition, Dr. Frye suggested that such protocols should be put to a Randomized Controlled Trial (RCT) to further test the results of this study.

Dr. Joyce Frye highlighted on the scope of Homoeopathy in the field of obstetrics by saying that through individualized homoeopathic treatment of every pregnant woman we can minimize symptoms, perinatal morbidity, mortality and assure on-time delivery.

She concluded her presentation by emphasizing once again on the need of research in Homoeopathy in field of Obstetrics. She suggested RCTs should be conducted using keynote prescriptions accompanied by gathering personal data e.g. in studies like *Pulsatilla* for breech presentation, *Caulophyllum* for cervical ripening, *Arnica/Bellis perennis* for post-partum bleeding, and *Calendula* for perineal healing, etc. Simultaneously data should be collected regarding concomitant symptoms that can be used in future to better individualize treatment.

MAINSTREAMING OF HOMOEOPATHY: POINTERS FROM TAMIL NADU

Dr. R. Vijaykumar

Ph.D, IAS

CMD, Tamil Nadu Salt Corporation & Former Commissioner, ISM&H, Tamil Nadu

Dr. R. Vijaykumar shared his experiences on mainstreaming AYUSH systems in his state. He gave valuable suggestions focusing on priorities, induction of doctors and teachers, and focus on education and research in Homoeopathy.

He began his presentation with the description of origin and current status of ISM & H in Tamil Nadu. In 1970 an Integrated Hospital for Siddha, Ayurveda, Unani and Homoeopathy was formed with separate departments. He detailed the number of institutions of ISM & H in Tamil Nadu, out of which there are 27 Head Quarters hospitals, 7 Taluk Hospitals, 13 Primary Health Care Centres and 9 medical colleges of Homoeopathy in the state. In comparison to Homoeopathy there are large number of institutions of Siddha - 412 Primary Health Care Centres and 236 Taluk Hospitals. However, Allopathy is the first mode of choice of treatment in Tamil Nadu and many Vaidyas also continue to practice there. He said that there is lack of integration seen within ISM & H and larger hospitals are often found to ignore ISM & H doctors. In many places urban outreaching is missing and Veterinary medicine is provided through Tampcol. Regarding the financial support, about 3.7 % of total budget of Health and Family welfare is used by Department of ISM & H

He elaborated on the various interventions taken up by ISM & H in the area of Mother and Child Care such as MCH - Danida Project of 1998, Home Remedies Kit of GOI-2003, Episiotomy practice critiqued, Anaemia alleviation, Proliferation through RCH and one of the programme of RCH - 'Varumun Kappom' dealt with preventive medicine.

He detailed out valuable principles for mainstreaming of ISM & H including:

- Creating a demand in people
- Increase focus on the priorities and needs of people
- Focus on preventive care
- Create appropriate Institutions
- Supply of standard medicines
- Adequacy and convenience of medicines
- Create areas for compelling coordination
- Enter all areas in Allopathy & Veterinary
- Credibility and Clinical documentation
- Political acceptance, UPC, SPC plans
- Create awareness in schools – education, yoga etc.
- Focus on priorities, special skills – Nurse Therapist (Panchakarma), Yoga, MCH, Lifestyle disorders in urban areas
- Pharmacist trained in all systems
- Induction for doctors and teachers
- Supply drugs to suit poor patients
- Strong PSU given cost and quality problems
- Educational and research focus, clinical experience, internship in PHC
- Integrated ISM hospitals for region
- Standardisation and Enforcement.

SCIENTIFIC SESSION I – (BREAK AWAY-WORKING GROUPS)

1445 – 1545 Hours

After the lunch break, the participants were divided into three working groups for breakaway sessions namely:

WORKING GROUP I: Comprising of Policy Makers

WORKING GROUP II: Comprising of Allopathic Physicians

WORKING GROUP III: Comprising of Homoeopathic Physicians and NGO

WORKING GROUP- I

1445 – 1545 Hours

CHAIRPERSON

Shri Verghese Samuel, IAS

Joint Secretary

Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy
(AYUSH)

CO-CHAIRPERSON

Dr. V.T. Augustine

Former Advisor (Homoeopathy) to Government of India

RAPPORTEUR

Dr. Eswara Das

Deputy Advisor (Homoeopathy)

Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH)

MAINSTREAMING OF HOMOEOPATHY RELATED TO MOTHER AND CHILD HEALTH CARE WITH SPECIAL FOCUS ON CGHS

Dr. Ramesh Anand

Additional Director, CGHS, Delhi

Dr. Ramesh Anand elaborated on the structure of CGHS set up and specially discussed about interdisciplinary referral and cross-referral system. CGHS is a model example of cafeteria approach and suggested that this concept can be implemented at all health care delivery levels.

He gave an educating overview of Central Government Health Scheme (CGHS). It was initially launched in Delhi in 1954 and at present CGHS covers 24 cities of the country. As of the current data available CGHS has 9.12 lacs card holders and 33.01 lacs beneficiaries. Department of Ayurveda, Yoga, Unani, Siddha and Homoeopathy (AYUSH), was launched in Delhi, in 1967. It covers 15 cities at present in the country. In terms of dispensaries there are about 247 Allopathic dispensaries, 86 AYUSH dispensaries out of which there are 34 homoeopathic dispensaries in India. He gave a thorough city wise breakup of homoeopathic dispensaries, with Delhi having maximum number of dispensaries (13).

Dr. Anand further enumerated the facilities provided under CGHS and particularly the services provided in homoeopathic system which include OPD facilities, free supply of medicines against valid prescriptions and domiciliary visits to seriously ill patients.

Dr. Anand highlighted that in the area related to maternal and children health, there exists Reproduction and Child Health Programme (RCH) launched by CGHS. In Delhi it comprises of 80 dispensaries and 1 Maternity and Gynae Hospital. Its overall incharge under Additional Director, CGHS (HQ) is Joint Director (FW) for coordination, administration and management of the programme as per the guidelines from Directorate of Family Welfare, Delhi.

The facilities provided by CGHS through RCH services are as follows:

1.) Under Reproductive Health

Safe Motherhood - Antenatal care, Intranatal care and Post natal care

2.) Safe Abortion

3.) Family Planning Services - Cu -T insertion, distribution of oral contraceptives, nirodh distribution, emergency contraceptive pills and permanent methods like tubectomy (Laposcopic sterilization, Minilap sterilization and NSV)

4.) Prevention and management of RTI (Reproductive Tract Infections) and STI (Sexually Transmitted Infections).

5.) Child Health Care

- Immunization for infants & children under 5 years - through well baby clinics in which BCG, DPT, OPV, Hepatitis B, Measles, MMR, DT, Typhoid vaccine are given.
- Early diagnosis and treatment - Preventive care under 5 years of age for diarrhoea, acute respiratory tract infection, malaria and tuberculosis.

He concluded the session by saying that there is a large scope to bring homoeopathic system into mainstream particularly in the field of RCH services and CGHS would be happy to play a role in the mainstreaming of the system.

HOMOEOPATHY IN PRIMARY HEALTH CARE

Dr. V.K. Gupta

MD (Hom)

Former Principal, Nehru Homoeopathic Medical College and Hospital, New Delhi

Dr. V.K. Gupta began his presentation on various health initiatives taken up by the Government of India.

- Special vertical health programs were instituted to tackle major public health problems such as Malaria, Small Pox, Cholera, Tuberculosis, rapid population growth etc. to reduce the heavy morbidity and mortality within the shortest possible time to where they were no longer major public health problems.
- Major steps towards providing integrated health care taken during first five year plan where emphasis was given on the provision of a packet of integrated health, family planning and nutrition services to the vulnerable groups, i.e. children, pregnant women and nursing mothers.

He also stated that according to WHO, Homoeopathy is the second leading system of medicine for primary health care in the world and it is covered by national health care systems in many countries.

He talked about the foetal origin of many adult diseases. Slow growth in utero and during infancy is related to impaired glucose metabolism, raised blood pressure and altered liver functions in the adulthood. Neglect of the women during pregnancy is the major causative factor. There is need for multidisciplinary approach including food, nutrition, environmental and health security to improve the nutrition status of women.

Areas of strength in Homoeopathy for Mother and Child were also highlighted. Three major merits of Homoeopathy in Mother and Child care i.e. Acceptability, Accessibility and Affordability were stressed upon.

He made the following suggestions:

- Three “A” strategy – Awareness, Access and Affordability.
- Government policy for training and utilizing homoeopathic practitioners.
- Homoeopathic practitioners should be included in health system based on the need of the community.
- Their role in primary health care must be defined and clearly identified.
- The training should contain all the principles and elements of primary health care.

AN ATTEMPT TOWARDS SYMBIOSIS: HOMOEOPATHY, ALLOPATHY AND INDIAN SYSTEM OF MEDICINES IN PRIMARY HEALTH CARE UNITS OF GOVERNMENT OF DELHI – A STUDY

Dr. R. K. Manchanda

MD (Hom),

Deputy Director (Homoeopathy), Directorate of Indian System of Medicine & Homoeopathy, Govt. of Delhi.

Dr. R.K. Manchanda presented a study on evaluation of integration of Homoeopathy, Allopathy and Indian System of Medicine. Govt. of Delhi under cafeteria approach has setup homoeopathic clinics in allopathic primary health care units. Study also assessed the cost effectiveness of homoeopathic clinic in cafeteria set up.

In this study, field survey of homoeopathic clinics was conducted and interviews of patients from each clinic and staff were conducted.

Study concluded with the following observations:

- Both the studies have established that Homoeopathy is popular, affordable and efficacious system of medicine at PHC level.
- Homoeopathy has the potential to minimize health care expenditure substantially if promoted in PHC through the cafeteria approach.
- Other components of AYUSH are also very popular, affordable and acceptable to the Indian masses.
- The major advantages of symbiosis of AYUSH with Allopathy at PHC are that it reduces the cost of health care as well as improves patient's satisfaction level.
- The cafeteria approach of providing AYUSH and Allopathic services under one roof of the primary and secondary level health care for facilitating patient's preference and cross system referrals can go a long way in promoting symbiosis of these systems and equal growth amongst them.

WORKING GROUP- II

1445 – 1545 Hours

CHAIRPERSON

Dr. K.M. Nandgopal

Head of Department of Obstetrics and Gynaecology
Bowring & Lady Curzon Hospital, Bangalore Medical College
Bangalore

CO-CHAIRPERSON

Dr. Somen Adhikari

Director
National Institute of Homoeopathy (NIH)
Kolkata

RAPPORTEUR

Dr. Bipin Jethani

Medical Officer (Teaching)
Nehru Homoeopathic Medical College (NHMC)
New Delhi

HOMOEOPATHY FOR SAFE MOTHERHOOD

Dr. Syed Shams Babar

MBBS, MD, DGO, MF (Hom),

Head, Dr. Babar Medical and Research Centre Private Limited, Hyderabad

Dr. Syed Shams Babar, having 34 years experience in the field of Medicine, Obstetrics and Gynecology, highlighted the significance of integrating the knowledge of Obstetrics and Homoeopathy to ensure safe and healthy motherhood. He stressed upon the need to document evidence based knowledge.

He detailed the basic ideological differences between Allopathic and Homoeopathic system of medicine. He said that “the Conventional medicine is no doubt an excellent way of treatment along with management of emergencies and surgical facilities etc. But Homoeopathy is no way behind in managing many non-surgical obstetric problems and it is cost effective also”.

In light of his vast experience in the field of Obstetrics, he delineated the various conditions of gestation that can be safely treated by Homoeopathy. The list included anxiety, stress in primigravida, adjustment problems, recurrent chest infections; tuberculosis, complicating pregnancy, tuberculosis spine, chronic recurrent Urinary Tract Infection, chronic nephritis complicating pregnancy, thyrotoxicosis, recurrent abortions, including +ve TORCH test, cholecystitis or gall stones complicating pregnancy, hepatitis viruses A/B/C complicating pregnancy, ulcerative colitis, haemorrhoids, carpal tunnel syndrome, warts and condylomatas, tennis elbow, disc syndrome, polyarthritis.

Dr. Babar advocated that with the use of homoeopathic medicines he has successfully avoided caesarean of 500 patients, who had earlier gone through C/S delivery, performed due to non-repetitive causes, such as uterine inertia, cervical dystocia, placenta previa, accidental hemorrhage, breech in primigravida, large baby, transverse lie, brow presentation (abnormal presentations and positions) intrapartum sepsis due to premature rupture of membranes.

He also discussed the disorders of intra-partum and post-partum stage that can be managed with Homoeopathy. He also cautioned the homoeopathic physicians in dealing some conditions like eclampsia, missed abortion, incomplete abortion, medical termination of pregnancy, acute renal failure, septic abortions, Rh incompatibility, ante-partum haemorrhage including abruptio placenta, hemolytic diseases and hypofibrinogenemia.

He concluded his scientific paper by demonstrating the efficacy of Homoeopathy in various disease conditions with clinical cases. Cases presented were of a primigravida having nausea and vomiting of pregnancy, a multigravida with h/o repeated miscarriages and stillbirths, primigravida with large fibroid, acute psychosis in post partum period, a newborn with a large cephalohematoma and low APGAR score 4/10, and case of neonatal jaundice.

A NEW MOTHER'S CONFIDANTE: HOMOEOPATHY

Dr. Kusum Chand

MBBS, MD, MF (Hom.),

Hony. Professor of Medicine, Nehru Homoeopathic Medical College & Hospital, New Delhi

Dr. Kusum Chand elaborated upon the role of Homoeopathy in puerperial stage. She spoke on the challenges faced by the new mother at all levels – physical, emotional and mental. She specifically talked about physical exhaustion, after pains and lochia, trauma of surgery, uterine changes, realization of new life and lactation.

She highlighted that this stage assumes importance on account of decreased immunity and increased susceptibility to diseases which results in varied illnesses such as unbearable after pains, postnatal depression, fever, lactation problems, postpartum haemorrhage and pelvic venous thrombosis.

She discussed the morbidity profile of puerperial conditions and underscored the importance of Homoeopathy in such conditions. She highlighted the holistic philosophy of homoeopathic treatment and its ability to boost defense mechanism of the body as well as to prevent infections and complications. She quoted the homoeopathic law of similia and added that in the treatment of diseases use of similar medicines is more natural and effective.

She further highlighted the scope and limitations of Homoeopathy while treating puerperial problems. She explained the two levels of treatment plans in which:

1. Homoeopathy can be used alone in conditions such as cracked nipple, scanty breast milk, swelling feet, diarrhoea, post –partum depression, scanty milk, etc.
2. Homoeopathy can be utilized as a complement mode of treatment to conventional medicines.

She rounded up her discussion with some clinical cases. Summaries of cases presented are as follows:

- A case of Post - episiotomy neuralgia at 3 weeks after delivery showed tremendous improvement with 2 doses of homoeopathic medicine *Staphisagria 30*.
- Another case presented was of Acute mastitis with fever at 3 weeks after caesarean delivery. She improved with homoeopathic medicine *Phytolacca decandra 30* given frequently for few days.

WORKING GROUP- III

1445 – 1545 Hours

CHAIRPERSON

Dr. S. P. Singh

Advisor (Homoeopathy)

Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy
(AYUSH)

CO-CHAIRPERSON

Dr. B.N. Singh

Director (Homoeopathy)

Uttar Pradesh

RAPPORTEUR

Dr. Jasmine Sachdeva

Consultant

Central Council for Research in Homoeopathy (CCRH)

New Delhi

NATIONAL RURAL HEALTH MISSION: A COMMITMENT OF GOVERNMENT OF INDIA

Mr. Sanjeev Gupta

Deputy Director, Donor Coordination Cell, Ministry of Health and Family Welfare, Govt. of India

Mr. Sanjeev Gupta highlighted the commitment of the Government of India towards the **National Rural Health Mission**.

Vision: The vision of this rural mission is architectural correction in health care delivery; special focus on 18 states with weak indicators; improve availability of quality health care in rural areas; synergy between health and determinants of good health; mainstream the Indian Systems of Medicine; capacity building and involve the community in the planning process.

Goals: To have universal health care in terms of access, affordability, quality, equity, reducing IMR, MMR, TFR and improve disease control. It aims to provide overarching umbrella to the existing programmes of Health and Family Welfare including RCH-II, Malaria, Blindness, Iodine deficiency, Filariasis, Kala Azar, TB, Leprosy and Integrated Disease Surveillance. It also aims at convergence among the related social sector Departments i.e. AYUSH, Women & Child Development, Sanitation, Elementary Education, Panchayati Raj and Rural Development.

Outcomes: Reduction of IMR to 30/1000 live births, Reduction of MMR to 100/100,000 live births, Reduction of TFR to 2.1 by 2012 and envisages guaranteed service delivery at all health facilities and quantifiable deliverables for all national diseases control programmes.

Rural Health Setup: Rural population in India is about 740 million and there are total of 1,46,026 Sub Centres, 23,236 PHCs, 3346 CHCs, 1,33,194 ANMs, 61,907 Male Health Workers, 20,308 doctors at PHCs and 3,550 specialists in CHCs.

5 MAIN APPROACHES OF NRHM:–

Communitize: Hospital management, committee/PRI at all levels, untied grants to community/PRI bodies, funds, functions and functionaries to local community organizations, decentralized planning, village health and sanitation.

Flexible Financing: Partnership of state & community resources, untied grants to institutions, NGO sector for public health goals, NGOs as implementers, risk pooling – money follows patient and more resources for more reforms.

Monitor, Progress against Standards: Setting IPHS standards, facility surveys, independent monitoring, committees at block, district & state levels.

Improved Management: Block & district health, NGOs in capacity building, NHRM/SHSRM/DRG/BRG and continuous skill development support.

Innovation in Human Resource Management: More Nurses – local resident criteria, 24 X 7 emergencies by Nurses at PHC and AYUSH, 24 x 7 medical emergency at community health center and multi skilling.

MANAGING OBSTRETICAL PROBLEMS HOMOEOPATHICALLY

Dr. Latha Devarajan

MD (Hom),

*Consulting Homoeopathic Physician, Positive Health Care Centre, Bangalore
Charitable Clinic Coordinator, Dr. M.L. Dhawale Memorial Institute, Bangalore*

Dr. Latha Devrajan highlighted the role of homoeopathic management in various obstetric problems. She emphasized on the role of auxiliary healthcare that includes role of diet, nutrition, mental health, antenatal and prenatal exercises and importance of educating mothers on bonding and breast feeding to provide best integrated and holistic care for the mother and child.

She cited various cases from her clinical experience of Antenatal conditions like hyperemesis gravidarum, hypothyroidism and gestational diabetes, non-progress of labour, complaints of mother after delivery. These were effectively managed by homoeopathic treatment along with other auxiliary measures like diet, nutrition, exercise etc.

In the case of non-progress of labour where there was rigidity of os despite good contractions that was managed with a few doses of homoeopathic medicines and the patient delivered the baby normally. She also discussed various post natal complaints such as cracked nipples and hemorrhoids with recovery by few doses of homoeopathic medicines.

She also highlighted the strength of Homoeopathy such as cost effectiveness, safety and effectiveness in various complaints during pregnancy, for easy delivery and healthy lactation.

She stressed upon an integrated and holistic approach which uses remedial forces and working with team of O.B.G consultants, dieticians, antenatal and exercise specialist, besides counseling and preparing patient for motherhood, delivery, breast feeding and role of parenting.

OBSTETRICS: CARE AND CAUTIONS

Dr. S. K. Bhattacharya

MBBS, DGO, MO, FICS,

Honorary Guest Prof., Deptt.of Obstetrics & Gynaecology, National Institute of Homoeopathy, Kolkata

Dr. S. K. Bhattacharya spoke on the various causes of maternal mortality.

He talked about the various objectives of the obstetric care such as – to promote, protect and maintain the health of the mother, to detect high risk cases and give them special attention, to remove anxiety and fear associated with delivery, to reduce the maternal and infant mortality and morbidity, to teach the mother elements of childcare, nutrition, personal hygiene and environmental sanitation and care of the newborn, importance of breast-feeding and immunization.

He emphasized that maternal deaths are avoidable by timely intervention and a planned obstetric care needs to be evolved. He delineated that obstetric care from four aspects:

- **Preconception care:** Conditions like anaemia, diabetes and hypertension should be corrected or controlled before conception. Tests for various carrier states of specific abnormal gene may be required.
- **Antenatal care:** He emphasized on the importance of routine checkups and special investigations, advice regarding diet and nutrition, supplementation, personal hygiene, care of minor ailments of pregnancy such as nausea, heartburn, constipation, hemorrhoids and backache. He talked about the cautions to be taken during different stages of pregnancy and warned against the use of alcohol, smoking, exposure to radiations and use of certain allopathic drugs that produce harmful effects on the developing foetus.
- **Intra-partum care:** He discussed about the need of early detection of sign of obstructed and prolonged labour and timely episiotomy, cord clamping and resuscitation of baby.
- **Postnatal care:** He gave guidance about post partum management including early ambulation, breast feeding and sterilization.
He also highlighted the need to be cautious about feeding, jaundice, hemorrhage, vomiting, any infection and timely immunization of the newborns.

He concluded that the maternal death is not entirely a medical problem and main problems are low socioeconomic condition, malnutrition, superstition, illiteracy, etc. which may be remedied by concerted efforts of all members of society from every walk of life. Greater awareness is required by the practitioners of the various systems of treatment on the methodical follow up during the pregnancy to prevent complications.

SCIENTIFIC SESSION-II

1600 – 1730 Hours

WORKING GROUP – I

CHAIRPERSON

Smt. Anita Das, IAS

Secretary

Department of Ayurveda, Yoga and Naturopathy, Unani,

Siddha and Homoeopathy (AYUSH)

Ministry of Health & Family Welfare

Govt. of India.

IMPLEMENTATION OF THE NATIONAL CAMPAIGN AT THE STATE AND DISTRICT LEVELS

Shri Verghese Samuel, IAS

Joint Secretary, Department of Ayurveda, Yoga and Naturopathy, Unani, and Homoeopathy, Ministry of Health & Family Welfare

Shri Verghese Samuel informed about the basic objectives of the 'National Campaign on Homoeopathy for Mother and Child Care'. These objectives are as follows:

- Generating awareness about the strengths of Homoeopathy in mother and child care.
- Enabling exchange of information and creation of linkages with the other systems of medicine.
- Promoting integrated health care for women and children.
- Community based participatory approaches for mother and child care.

He elaborated on the main underlying objective:

- The provision of comprehensive preventive and curative health care by integrating Indian Systems of Medicine with the mainstream health care system.

He suggested activities at state and district levels to make the workshop successful. These activities include:

- Workshops at state and district levels as appropriate.
- Mass Media campaign.
- Exhibitions/fairs.
- Supply of medicine kits.
- Opening of homoeopathic facilities in existing hospitals.
- Appointment of homoeopathic physicians under the NRHM.
- Making homoeopathic medicines available.

There is a need for creating homoeopathic facilities in existing PHCs, CHCs and district hospitals which can be set up under the NRHM and also under hospitals and dispensaries.

HOSPITALS AND DISPENSARIES - CENTRALLY SPONSORED SCHEME

Shri Verghese Samuel informed the participants about the grant in aids for implementation of various schemes under Centrally Sponsored Scheme such as - establishment of AYUSH In-patient facilities, establishment of Out-patient facilities, establishment of AYUSH wings in district hospitals and supply of essential drugs which could contribute towards success of the national campaign.

WORKING GROUP-II

1600 – 1730 Hours

CHAIRPERSONS

Dr. Sarita Aggarwal

Director and Professor
Maulana Azad Medical College
Delhi

Dr. Niranjana Mohanty

Former Principal
Dr. A.C. Homoeopathic Medical College and Hospital
Bhubaneswar

CO-CHAIRPERSON

Dr. Kusum Chand

Medicine Specialist
Nehru Homoeopathic Medical College
New Delhi

RAPPORTEUR

Dr. Bipin Jethani

Medical Officer (Teaching)
Nehru Homoeopathic Medical College
New Delhi

CARING OF NEONATES AND INFANTS: THE HOMOEOPATHIC WAY

Dr. Rathin Chakraborty

MBBS, MD, MF (Hom)

Homoeopathic Consultant, West Bengal

Dr. Rathin Chakraborty elaborated upon the use of Homoeopathy in neonates and infants.

He began with highlighting the gradual acceptance of homoeopathic principles in modern medicine in light of technological advances.

He elaborated general management measures that should be adopted during ante-natal and peri-natal stages with importance of breast feeding. Care of new born includes giving adequate nutritional support, monitoring of growth and development, day to day care of minor ailments and early identification of serious problems followed by prompt management or referral services.

Further, Dr. Chakraborty highlighted the additional advantages that Homoeopathy offers in neonatal care - being free from side effects and for preventing the infant to fall prey to infections frequently. He referred to the 'Theory of Miasm' as a unique concept, where Master Hahnemann, in his time in 18th Century, tried to explain genetics, genetic pathology and integrated the relationship. Thus, the treatment of the expecting mother, considering miasmatic point of view, prevents the child from developing illnesses after birth.

He also discussed various clinical conditions of neonates and infants that are amenable to homoeopathic cure. These conditions can be considered by super specialty practitioners to be referred to Homoeopathy for a composite care.

The conditions include:

- Skin troubles like cradle cap, atopic dermatitis, urticaria, etc.
- Gastro intestinal troubles like recurrent diarrhoea, constipation, tendency of regurgitation of milk
- Respiratory tract troubles like allergic rhinitis, sinusitis, chronic pharyngitis, tonsillitis, asthma
- Dentition troubles
- Susceptibility to recurrent cold and cough
- Attention deficit hyperactive disorder
- Minor injuries

Dr. Chakraborty in the end of his presentation reiterated the need for intensive study and researches in the field of Homoeopathy in various clinical conditions.

CHILDHOOD CARE: WHAT HOMOEOPATHY CAN OFFER?

Dr. Harsh Nigam

MBBS, MD, MF (Hom),

Homoeopathic Consultant, Kanpur

Dr. Harsh Nigam elaborated upon the various ways in which Homoeopathy can be helpful while treating diseases of children. He emphasized upon the scope and limitations of homoeopathic system of medicine.

He elaborated upon the vital role that Homoeopathy can play in non surgical chronic diseases, prophylaxis in epidemic diseases, in recurrent illness and in incurable cases. He also included Homoeopathy as treatment of choice in behavioral disorders such as ADHD, stammering, tics, anxiety states, conversion syndromes, enuresis and breath holding spells *et al.*

He also discussed the advantage of Homoeopathy in the treatment of adverse reactions to vaccination and epidemics. He described the scope of randomized control trial in the context of Genus Epidemicus.

He gave insight of his clinical experiences with case presentations of children suffering from diseases such as Recurrent upper respiratory tract infections, Atopic dermatitis, Down's syndrome, Chorea with Cerebral palsy and Cardiomegaly. Summaries of cases presented are as follows:-

- A case of Recurrent upper respiratory tract infections, presented with tonsillitis, cough, dyspnoea every 2 months. After homoeopathic treatment for 1 year and 6 months, marked improvement was seen and no such attacks recorded since last 8 months.
- A case of Atopic dermatitis, presented with rash, itch, and foul smelling perspiration of scalp responded well to *Psorinum 1M* and no relapse is seen since 2 ½ years.
- Quality of life was improved in a case of Down's syndrome with constitutional homoeopathic treatment. Child began to accept education and responded positively.
- A case of Cardiomegaly in child with ECHO report showing enlarged globally hypo contractile LV with severe impairment of systolic function, endocardial thickening & strands compatible with EFE and LVEF 28%, improved remarkably with homoeopathic treatment in 1 ½ years. The ECHO done later showed LV/LA dimensions are on higher side of normal, no endocardial thickening and LVEF 50%.
- A case of Chorea with Cerebral palsy was presented with complaints that the child was unable to sit without support and having inordinate involuntary movements. He improved within 1 year of constitutional treatment; the child was able to sit without support and chorea much better.

WORKING GROUP-III

1600 – 1730 Hours

CHAIRPERSON

Dr. Arvind Kothe

Principal

Shri Kamakshi Devi Homoeopathic Medical College and Hospital

Shiroda, Goa

CO-CHAIRPERSON

Dr. M.R. Srivatsan

Member

Executive Committee

Central Council for Homoeopathy (CCH)

RAPPORTEUR

Dr. Jasmine Sachdeva

Consultant

Central Council for Research in Homoeopathy (CCRH)

New Delhi

SWEET PILLS FOR HAPPY CHILDHOOD: HOMOEOPATHY FOR SCHOOL CHILDREN

Dr. Chandrasekhar Goda

MD (Hom) (Mumbai)

Reader & Consultant, Deptt. of Pediatrics, Dr. M.L. Dhawale Memorial Homoeopathic Institute, Palghar (Maharashtra)

Assistant Director, Rural Health Services, Dr. M.L. Dhawale Memorial Trust, Mumbai

Dr. Chandrasekhar Goda, having 15 years experience of practicing Homoeopathy in tribal area near Mumbai, shared his knowledge regarding treating the school children.

Dr. M.L. Dhawale Memorial Trust had carried out a Project namely *Homoeopathic Healthcare for Ashramshala (Residential school) for tribal children* at 2 Taluka Places of Thane District, Maharashtra State.

Common health problems identified were:

- Injuries, infections, infestations, insect bites and scorpion stings, allergies, addictions, school drop outs, behaviour problems etc.
- Anemia and mal-nourishment tends to increase the intensity of infections and impaires the over all immunity of the child.

The objectives of the project were:

- To reduce the frequency of infections affecting the school children.
- To improve overall state of nourishment.
- To build a healthy general attitude in the school children.

Based on the objectives the strategies and activities evolved were:

- Orientation and Education camp: involving parents, teachers and students using audio-visual aids.
- Survey and data collection process: This was done on special formats developed from the angle of homoeopathic case taking.
- Case taking and Diagnostic camps: to evaluate data from the angle of its diagnostic and homoeopathic nature.
- Role of Team and Networking -Involving Community Health Worker (CHW), Multi Purpose Workers (MPW), senior physicians and consultants, NGOs, local school teachers, gram panchayats, Govt. PHC and Tata Institute of Social Sciences.
- Treatment schedule: included periodic monitoring and follow up and evaluation plans. Role of constitutional medicines, Genus epidemicus and homoeopathic first aid kits was explored. It was seen that constitutional medicines helped in boosting up the immunity and thereby preventing many illnesses.
- General activities planned to motivate children: to develop all round spirit of the child.
- Role of training the local school teacher as a 'Bare foot doctor': to teach him to identify his scope and limitations, basic do's and don'ts and to enable him identify when to refer the case and when to wait.
- Role of locally available indigenous health care system
- Role of locally available food items for correcting under-nourishment and mal-nourishment

- Role of assessing Mental health and instituting strategies to improve behaviour and attitude: where the clinical psychologists, pediatricians, social workers and the teachers came together to plan interventions.

It was observed that a holistic approach is necessary to tackle the school health issues at a grass root level. Thus, Homoeopathy is able to blend in this holistic approach and become one of the main cementing factors in improving the overall health of the school child.

HOMOEOPATHIC CARE: WHAT IT OFFERS IN CHILDREN

Prof. (Dr.) J. D. Daryani

MD (Hom.),

Principal & Medical Superintendent, Head, Deptt. of Repertory, Dr. M.P.K. Homoeopathic Medical College, Hospital & Research Centre, JAIPUR (Rajasthan)

Prof. Daryani highlighted the efficacy of homoeopathic medicines in common ailments of children from infancy to childhood. He also talked about the unnecessary use of antibiotics in children in many viral diseases, where they are not needed.

Superiority of homoeopathic medicines as regards their safety, no adverse effects, cost effectiveness, ability to build resistance against infections and easy acceptability by children were highlighted. He also discussed about the therapeutic utility of homoeopathic medicines in many common and uncommon conditions where conventional medicine has nothing to offer except prevention of secondary infections and complications.

He shared his clinical experiences and cited many cases of childhood complaints with their effective homoeopathic management such as infantile colic, earache, chronic diarrhoea, dysentery, lactose intolerance, breath holding spells and various skin conditions like atopic dermatitis, diaper rash, intertrigo and impetigo.

He quoted a case of an infant of 2 months of age who was having fever and distention of abdomen following vaccination. The baby didn't respond to any of the medicines prescribed by the paediatrician. The child responded well to a single dose of homoeopathic medicine selected on the basis of generalities.

At the end he, summarized that Homoeopathy can be safely used as first line of treatment for many common ailments of the children. Homoeopathy is not slow acting, unlike common belief and also works speedily in acute diseases of children.

PAEDIATRIC PRACTICE – CARE AND CAUTIONS

Dr. Ram Subramaniam

MD, DCH,

Paediatrician, Mumbai

Dr. Ram Subramaniam discussed about the various aspects of pediatric care and cautions. At the outset he made a note that each system of treatment has scope and limitations and therefore a practitioner of the concerned system must practice while taking into consideration the limitations particularly in pediatric cases. He highlighted the importance of knowledge of basic normal values such as weight, height, respiratory rate, pulse, blood pressure at different ages of a child's life and also discussed the normal milestones like social smile, head holding, walking, standing with and without support etc. He also gave basic idea of normal feeding schedule of an infant and rule of thumb for feeding the child.

He discussed various acute conditions like diarrhoea, acute respiratory infections, lingering cough, reactive airway diseases, pyoderma and care and cautions to be taken in diagnosing and managing them and need for emergency referrals.

He talked about various stages of dehydration and ways to manage them, important role of ORS, home made ORS and need for admission beyond grade 2 dehydration.

He discussed about the management of Acute respiratory infections – both URTI and LRTI's. He highlighted the need for knowledge of types of pneumonia at different ages, need for CBC and X-Ray chest to confirm diagnosis and need for good clinical knowledge of respiratory findings such as rhonchi, rales, harsh breathing, bronchospasm and coarse crepts.

He gave the criteria to diagnose respiratory distress and classification and management of acute respiratory tract infections in young infants.

He talked about the common conditions leading to lingering cough and basic investigations required to diagnose the cause.

He also gave the differential diagnosis of Reactive Airway Disease. He stressed upon the knowledge of differential diagnosis of Pyoderma and need for emergency treatment.

PLENARY SESSION - 2

1730 – 1830 Hours

CHAIRPERSON

Smt. Anita Das, IAS,

Secretary, Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha and
Homoeopathy (AYUSH)

Ministry of Health & Family Welfare, Govt. of India.

CO-CHAIRPERSON

Shri Verghese Samuel, IAS,

Joint Secretary, Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha and
Homoeopathy (AYUSH)

CHIEF COORDINATOR , NATIONAL CAMPAIGN

Prof. C. Nayak

Director

Central Council for Research in Homoeopathy (CCRH)

Chairperson – Representing Group II

Dr. Niranjana Mohanty

Former Principal

Dr. A.C. Homoeopathic Medical College and Hospital

Bhubaneswar

Co-Chairperson – Representing Group II

Dr. Somen Adhikari

Director, National Institute of Homoeopathy, Kolkata

Chairperson – Representing Group III

Dr. S. P. Singh

Advisor (Homoeopathy)

Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH)

Co-Chairperson – Representing Group III

Dr. M.R. Srivatsan

Member

Executive Committee

Central Council for Homoeopathy (CCH)

The session began with an open house discussion amongst the delegates and the Secretary AYUSH, Smt. Anita Das, regarding the future programmes of the national campaign. Various issues were raised during discussion, such as: popularizing usefulness of Homoeopathy in managing the epidemics; providing financial aid to the homoeopathic educational institutions to work for the national campaign on Homoeopathy for mother and child at state and district levels; providing adequate training to homoeopathic doctors to enable them to perform deliveries; create National Rural Health Mission (NRHM) awareness amongst the students of all AYUSH educational institutions and integration of AYUSH systems in the health care system of the country.

Chairpersons and co-chairpersons of all the 3 working groups shared their views regarding the further implementation of the national campaign; this was followed by an interactive session and formation of draft resolutions.

Shri Verghese Samuel, Joint Secretary (AYUSH), elaborated the recommendations made in the Working Group I, which comprised of all the policy makers. The recommendations made are as follows:

1. Homoeopathic medicines are effective for certain common diseases and conditions relating to mother and child care where no hospitalization or expensive investigation procedures are required and, as such, there is a strong case for popularizing and utilizing the system at the primary and secondary health care delivery system level.
2. A focused and carefully targeted awareness programme needs to be organized to inform and educate the public and practitioners of other systems of medicine about the strengths of Homoeopathy in the area of mother and child care.
3. Financial and technical support for the IEC activities should be provided to the State Governments by the Government of India.
4. The State Governments must set up more Homoeopathic Indoor and Outdoor treatment facilities in existing allopathic hospitals under the NRHM. Alternatively, the State Governments could obtain funds from the Department of AYUSH under the Centrally Sponsored Scheme (Hospitals and Dispensaries) for the purpose.

Dr. Niranjana Mohanty elaborated the recommendations made in the Working Group II, which comprised of all the allopathic doctors. The recommendations made are as follows:

1. The differentiation between surgical and non - surgical diseases should be done by experts and clear distinction should be laid down for all the doctors.
2. Research data should be available in 3 areas, i.e. results produced by allopathic medicines alone, by homoeopathic medicines alone and by combined intake of allopathic and homoeopathic medicines.
3. Ascertain the role of Homoeopathy as both preventive and curative medicine.

Dr. M. R. Srivatsan elaborated the recommendations made in the Working Group III, which comprised of all the homoeopathic doctors and NGOs. The recommendations made are as follows:

1. Educate the concerned government officials, parents, school administration and teachers about identifying virginal susceptibility and reducing the frequency of infections by understanding the physical, social and mental levels prevailing in the children.
2. Both government agencies and NGOs to popularize: the role of constitutional treatment to improve susceptibility; role of genus epidemicus to prevent and cure epidemics; holistic Homoeopathy for physical, mental and social health; envisage child as agent of change and train the teachers as 'barefoot doctors'.

DAY II OF THE WORKSHOP - 6th NOVEMBER 2007

PLENARY SESSION - 3

1000 - 1130 Hours

CHAIRPERSON

Dr. S.P.S. Bakshi

President

Central Council of Homoeopathy (CCH)

New Delhi

CO-CHAIRPERSON

Dr. R.D. Patel

Asst. Director (Homoeopathy)

Directorate of ISM & H

Gujarat

RAPPORTEUR

Dr. Anil Khurana

Research Officer

Central Council for Research in Homoeopathy

New Delhi

GLOBAL RESEARCH ON 'HOMOEOPATHY FOR MATERNAL AND CHILD CARE' – A REVIEW

Dr. Hari Singh,

B. Sc. (Hons.), DHMS,

Research Officer (Homoeo), Central Council for Research in Homoeopathy, Delhi

Dr. Hari Singh highlighted that in any country, mothers and children constitute a priority group. The various contributing factors for maternal deaths worldwide are severe bleeding (24%), indirect causes like anemia, malaria, heart disease etc. (20%), unsafe abortion (13%), infection (15%), eclampsia (12%), obstructed labour (8%), and direct causes like ectopic pregnancy, embolism, and anesthesia (8%). The leading causes of death in children of under five worldwide are neonatal causes such as pneumonia, diarrhea, pregnancy and birth-related complications, congenital conditions, and other infections, such as tetanus (37%), acute respiratory infections (19%), diarrhoeal diseases (17%), other diseases and injuries (12%) and malaria (8%).

He stressed that being the share holders in the health care system, homoeopaths have definitely specific role in the above mentioned global health issues. Homoeopathic literature has a rich repertoire of medicines that can be employed beneficially to mitigate most of the health related problems affecting the mother, infant and the child. Various homoeopathic clinical trials, meta analyses related to diseases of mother and child globally viz. postpartum haemorrhage, problems related to labour and lactation; recurrent acute rhinopharyngitis, acute otitis media, glue ear, ADHD, hyperactivity, upper respiratory tract infections, asthma and acute diarrhoea in children etc. show that Homoeopathy is efficacious in combating various ailments of the above mentioned vulnerable group i.e. the mother and child.

From this preliminary survey of the clinical research studies carried out globally it is found that the results of these trials vary from positive to negative and the number of such trials is very small, while in some there is poor design, sample size, control, methodological quality and subjective assessment of results. So the need of the hour is to constitute an apex research body by amalgamation of various research institutes to take care of various facets of Homoeopathy research, both retrospective and prospective, globally and to mainstream Homoeopathy in maternal and child care.

OUTCOMES FROM HOMOEOPATHIC THERAPY IN THE PUBLIC HEALTH SERVICE FROM 1998 TO 2005: AN OBSERVATIONAL STUDY

Dr. Elio Rossi

Teacher of homoeopathic courses at the University of Bologna and Ravenna, University of Florence, Polo Universitario di Empoli, University of Pisa, Italy

Dr. Elio Rossi discussed about the process of integration of CAM (Complementary and Alternative Medicine such as Acupressure, Homoeopathy, etc.) with the National Health System (1996-2007) by Tuscany region, Italy.

Following outcomes of the studies were recorded:

- Efficacy of Homoeopathy in children and younger age group.
- Cost-effectiveness of Homoeopathy.
- The adverse reactions to homoeopathic medicines are few, recognizable from the homoeopathic aggravation, but they are unusual and of slight account.

He also gave suggestions for improving the accessibility of Homoeopathy among general population.

He elaborated upon the integration of non-conventional medicine in the public regional healthcare system in the region of Tuscany in Italy. The aim of regional health plan is to guarantee definitive integration of various types of non-conventional medicines in the Regional Health Services which are known to present a sufficient level of scientific evidence and allowing them to be denied as forms of complementary medicine (Homoeopathy, Acupressure, Herbal medicine, etc.)

He enumerated several public clinics offering non-conventional medicine services. These have been set up and expanded in Tuscany's hospitals and currently they are 60 in number. Various studies such as a study of non-conventional medicine in Tuscany and a survey of the scientific and legislative documentation on the subject have been carried out. Other studies and research projects regarding non-conventional medicine have been financed and Regional centres of Acupressure, Chinese medicine, Herbal medicine and Homoeopathy have been established. A regional publication on non-conventional medicine has been set up.

He highlighted that the experience of integration of non-conventional medicine in Tuscany's healthcare programme not only represents an important reference point on a national level but has also achieved user satisfaction and has been generally well received. It has also helped to establish relationship with the association and scientific societies of the sector and helped gaining appreciation of the region's medical and academic circle.

HOMOEOPATHIC APPROACH TO ADHD CHILDREN – A CLINICAL STUDY

Prof. (Dr.) L. K. Nanda

Dip. NIH, MD (Hom),

*Principal-cum-Superintendent, Dr. A. C. Homoeopathic Medical College & Hospital,
Bhubaneswar*

Prof. Nanda presented his observations on ADHD (Attention Deficit Hyperactivity Disorder). This paper was a report of his experience in which the data are documented prospectively.

The study included 27 cases of ADHD who were diagnosed according to D.S.M. - IV criteria, were aged between 2-16 years and treated only with homoeopathic medicines.

Children with pervasive developmental disorder, schizophrenia, anxiety disorder, mental retardation, learning disability were excluded from the study. Detailed case was recorded to elicit minute details of the symptoms. Selection of the medicine was done according to homoeopathic principles with reference to miasmatic background and the medicine was given in 50 millesimal potencies with successive repetition in higher potencies when the patient was improving. After duration of 12 weeks, *3 cases showed marked improvement, 6 cases showed mild improvement and 11 cases showed variable degree of improvement.*

He also presented another case of a child who was diagnosed as having ADHD with Nephrotic syndrome and was on steroid for last 6 months. The patient was treated with the medicine selected on the basis of mental symptoms and given in 50 millesimal potencies with marked improvement both in Nephrotic syndrome and ADHD.

He categorised ADHD into four phases according to severity from mild to severe, each stage representing the deeper pathology. He highlighted the merits of Homoeopathy in treating ADHD. He emphasised that homoeopathic doctors can treat ADHD cases more effectively because in homoeopathic Materia Medica, medicines belonging to each type of ADHD based on classification and severity are available. This is unique in comparison to treatment of ADHD by modern medicine which is stereotype in all types of ADHD cases.

PLENARY SESSION – 4

1200 - 1315 Hours

CHAIRPERSON

Dr. P.N. Verma

Former Director

Central Council for Research in Homoeopathy (CCRH)

New Delhi and

Scientific Advisor

Willmar Schwabe India (W.S.I.)

Noida

CO-CHAIRPERSON

Dr. Nara Singh

Former Member

Central Council of Homoeopathy and

Consultant Homoeopath

Imphal (Manipur)

RAPPORTEUR

Dr. Girish Gupta

Member of Special Committee for Homoeopathic Pathogenetic Trial,

Central Council for Research in Homoeopathy (CCRH) and

Chief Consultant at Gaurang Clinic and Centre for Homoeopathic Research (GCCHR),

Lucknow.

ROLE OF HOMOEOPATHY IN ATTENTION DEFICIT HYPERACTIVITY DISORDER AND AUTISM

DR. PRAFUL BARVALIA

MD (Hom.),

Founder Director and Managing Trustee, Spandan Holistic Institute of Applied Homoeopathy, Mumbai

Dr. Praful Barvalia addressed the scope of Homoeopathy in Attention Deficit Hyperactivity Disorder (ADHD) and Autism.

The census of the cases of ADHD and Autism, who were registered, studied and managed at Spandan Holistic Institute are:

- 150 cases of ADHD from July 1998 to September 2007.
- 54 cases of Autism disorder from July 1998 to June 2003.
- 30 cases of Autism disorder under auspices of AYUSH funded extra mural research project from October 2006 to September 2007.

Dr. Barvalia gave a brief description of the occurrence, origin, causes, signs and symptoms of Autism disorder. He presented a video clipping of a case of a 2 ½ year old boy suffering from childhood autism disorder. His complaints were: limited eye to eye contact, limited social interaction; speech was nonsense, irrelevant, echolalia, self muttering; lack of response to verbal commands; stereotype, motor mannerisms, whirling movement and imitation. His psychological assessment report (VSMS & CARS) showed SQ-60 (Mental Retardation) and CARS-34. The case responded well to Borax given infrequently on the basis of totality of symptoms. After regular follow-ups for 4 years on the basis of modern parameter scale the child was declared normal and free from the disorder.

Dr. Barvalia also presented 5 other cases on ADHD and Autism. He concluded that 72% of cases who continued treatment for more than 6 months showed significant improvement in following order: Behaviour like restlessness and tantrums, abnormal sensory defenses, eye contact and lastly improvement in speech.

60% of cases with mild autism regained speech while 50% of cases which continued treatment for more than 2 years got rehabilitated in main stream schools.

The homoeopathic approach used to treat the case was as follows: Nosode to begin the process; treat any acute complaints by acute phasic medicines; treat chronic complaints by constitutional medicine.

He concluded his presentation by detailing the process of improvement with homoeopathic treatment as follows: Improvement is first seen at general level; child becomes calmer; improvement in sleep, appetite and general health; next is improvement in behaviour; reduction in hyperactivity, restlessness, tantrums and violence; obsessive behaviour takes long time to improve.

EFFICACY OF HOMOEOPATHY IN A PRETERM CHILD WITH FAILURE TO THRIVE

Dr. Parinaaz Humranwala,
MD (Hom.),
Consultant Homoeopath, Mumbai

Dr. Parinaaz Humranwala highlighted a case of a 28 - 30 weeks preterm delivered by LSCS, of an obese mother who was a known case of hypothyroidism and had developed severe pregnancy induced hypertension. Baby's birth weight was 1.190 kgs. and head circumference was 27.5 cms. The baby cried immediately after birth but developed respiratory distress in the Neonatal Intensive Care Unit (NICU). The baby developed many complications such as high serum bilirubin level, sepsis and fall in platelet count. He was given transfusion with whole blood and fresh frozen plasma, developed further complications and was put on ventilator. Echo report showed Atrial Septal Defect (ASD) and Pulmonary hypertension.

The baby was treated in NICU and was given antibiotics, anticonvulsants, immunoglobins, etc. The baby was discharged from the hospital with a weight of 1.300 kgs and the pediatrician labeled the baby as 'failure to thrive'.

Homoeopathic treatment was started on 60th day after birth and after detailed case taking *Calc phos.200* in single dose was given. Within 10 days of treatment the baby gained 300 gms weight. Thereafter, the baby started putting adequate weight every month. The ASD underwent closure and the baby did not require hospitalization. The baby's milestones thereafter continued to be near normal.

The above case proved the efficacy of Homoeopathy in acute and complicated cases.

MANAGEMENT OF CLINICAL OBSTETRICAL PROBLEMS THROUGH HOMOEOPATHY

DR. SUNIRMAL SARKAR

M.D (Hom.),

Reader, Deptt. of Materia Medica, National Institute Of Homoeopathy, Kolkata

Dr. Sunirmal Sarkar spoke on various obstetric problems and many issues related to them such as social and economic responsibilities, change of job pattern, poverty, illiteracy, early marriage, lack of knowledge regarding diet and myths regarding pregnancy producing lots of psychosomatic problems. He further said that prolonged use of OCPs (oral contraceptive pills), multiple MTPs (medical termination of pregnancy) may cause changes in metabolism such as cervix insufficiency and PID (pelvic inflammatory diseases).

He emphasized that every system of medicine has its role in handling obstetrical problems. Homoeopathic medicines can prevent irregular contractions thereby ensuring normal delivery and the constitutional treatment during pregnancy may even abort chronic familial disease trait of child. He stressed on the need of proper diet, life style, yoga, peaceful mental and physical environment for a pregnant mother.

He discussed about various psychological, mental and other common problems a woman may face during pregnancy and after delivery and their homoeopathic management and management of complaints of the newborn. He further highlighted that many difficult problems such as pseudo pregnancy, miscarriage, PID, sterility, etc. can also be managed by homoeopathic medicines.

He elaborated how the obstacles in obstetric practice can be removed by homoeopathic treatment.

PLENARY SESSION - 5

1410 - 1530 Hours

CHAIRPERSON

Dr. D.P. Rastogi

Former Director

Central Council for Research in Homoeopathy (CCRH)

CO-CHAIRPERSON

Dr. R. Shaw

Former Director In-charge

Central Council for Research in Homoeopathy (CCRH)

RAPPORTEUR

Dr. Hari Singh

Research Officer

Central Council for Research in Homoeopathy (CCRH)

New Delhi

SUCCESS STORIES IN THE MANAGEMENT OF OBSTETRIC PROBLEMS THROUGH HOMOEOPATHY

Dr. P. V. Venkatraman

MD (Hom.),

President, Tamil Nadu Homoeopathic Doctors' Association, Chennai

Dr. Venkatraman highlighted that Homoeopathy is immensely helpful in overcoming the discomforts and difficulties during pregnancy. He shared insight of his clinical experiences with case presentations of various obstetrical disorders such as morning sickness, retarded foetal growth, fibroid uterus complicating the pregnancy and foetal malposition.

Summaries of the success stories, presented by Dr. Venkatraman as video recordings, are as follows:-

- A case of a lady, married since 3 years, came with a history of fibroid uterus and a miscarriage of her first pregnancy on the 58th day of gestation. In her 2nd pregnancy the blood levels of HCG showed a lower trend and with a history of fibroids the obstetrician was forced to declare that this pregnancy may not be viable. She was given homoeopathic constitutional medicine *Apis mellifica 30* in water doses until the 4th month. The entire pregnancy went smooth. She had a full term normal delivery of a healthy child of 3.4 kg.
- A case of infertility came after taking treatment from various doctors. Even the attempts of artificial insemination had failed. She had hypothyroid, small ovarian follicles and thin endometrium. She conceived after taking homoeopathic treatment for 8 months.
- A case of nausea and vomiting continued even in the 3rd trimester of pregnancy, homoeopathic medicine *Symphoricarpus racemosa 200* gave instantaneous results.
- Another case of a lady, who had conceived 8 years after marriage, had undergrowth of foetus. Obstetrician felt that the foetal undergrowth is common in late pregnancy and suggested for an elective caesarean. The effectiveness of homoeopathic medicines was well established in this case with the help of homoeopathic medicines *Sepia*, *Cactus g.* and *Syphillinum*. She had normal delivery exactly on the expected date and child weighed 2.8 kgs.

He added that in various cases of recurrent abortions homoeopathic medicines like *Apis mellifica*, *Sepia*, *Syphillinum* etc. have been of great help in preventing the abortions. Anemia has become a national health problem, which prevails in majority of the population and mainly worst affected are women and children. Despite the efficacy of iron rich diet and iron supplements there are many people who need some medication to help in the tolerance and assimilation of iron. Homoeopathic remedies like *Sepia*, *Ferrum met.*, *Ferrum phos.*, *Lecithin*, *China officianalis* help in improving the iron storage and assimilation.

He concluded that there are innumerable general problems e.g. sinusitis, viral infections, gastritis (especially when the uterus expands in the 2nd trimester), during pregnancy which could be effectively dealt by homoeopathic medicines.

NEPHROTIC SYNDROME – HOMOEOPATHIC CONCEPT

Dr. T. Abdurahiman

MD (Hom), Ph.D

Principal, Government Homoeopathic Medical College, Kozhikode, Kerala

Dr. T. Abdurahiman elaborated on the effectiveness of homoeopathic treatment in the dreadful paediatric problem Nephrotic Syndrome.

He had begun with a short description of Nephrotic Syndrome, its salient features, occurrence, etiology, pathogenesis and clinical manifestations. He defined Nephrotic Syndrome as a clinical complex characterized by a number of renal and extra renal features, the most common being proteinuria, hypoalbuminemia, oedema, hyperlipidemia, lipiduria and hypercoagulability.

Dr. T. Abdurahiman gave a fine detail of the homoeopathic concept of pathology of Nephrotic Syndrome based on the chronic miasm. He said that the development and progress of diseases/pathological processes depends on the nature and proportion of the inherited and acquired miasm. Nephrotic Syndrome is only one of the manifestations of the miasmatic background of the patient. The basis of Nephrotic Syndrome is polymiasmatic and thus the patients must be treated with the polymiasmatic drugs. Prognosis will be good with cases having miasm psora in its background while miasm sycosis, syphilis, drug miasm and vaccinosis make the prognosis poor.

He laid down the management of Nephrotic Syndrome in 3 main steps which include treating the underlying cause, control of proteinuria and preventing the complications.

He gave insight of his clinical experiences with case presentations on the management of Nephrotic syndrome in children. Summary of cases presented is as follows:

- A child of 6 years of age complained of puffiness of face and eyelids, recurrent Upper Respiratory Tract Infections with fever and pain all over body since last 3 years. The child was diagnosed as having Nephrotic Syndrome and was taking steroid Wysolone 30 mg daily since 3 years. Under homoeopathic treatment the steroids were gradually withdrawn and patient showed improvement. Medicine was selected on the basis of the Constitution of the patient keeping the miasmatic background in account. Main medicine used was *Apis Mel*; *Streptococcinum* and *Tuberculinum* were used for URTI. As the patient had anemia Vanadium was given. The effect of *Vanadium* was shown in increase of blood Hb as well as total proteins. *Sulphur* was given as the anti psoric medicine to prevent the recurrence.
- Another case presented was of a 3 years old girl, suffering from Nephrotic Syndrome since 1 year and was taking steroid treatment for the same. The homoeopathic remedy was selected on the basis of the Constitution of the patient keeping the miasmatic background in mind. The remedy suited to the case was *Arsenicum album*. The potency of the medicine was gradually increased and the steroids were stopped simultaneously. *Arsenicum album* was followed by *Thuja occidentalis* and the case got cured under the homoeopathic treatment.

A CASE STUDY ON ERYTHROBLASTOSIS FETALIS

Prof (Dr.) S. M. SINGH

M.D. (Hom.)

*Director, Sri Sai Nath Postgraduate Institute of Homoeopathy
Allahabad*

Prof. S. M. Singh presented a case a newborn diagnosed to be suffering from Erythroblastosis fetalis, type of anaemia in which the red blood cells (erythrocytes) of a fetus are destroyed by the maternal immune reaction resulting from a blood group incompatibility between the fetus and its mother.

The case was well managed by homoeopathic treatment and Sulphur given in single dose proved very effective.

He further emphasized that *Sulphur* which has been found effective in this case needs further open clinical trial to make it evidence based research.

The presentation highlights the immense scope of Homoeopathy in the case of Mother and Child Care. Homoeopathy needs referrals of such and other cases having no chance of survival.

PLENARY SESSION- 6

1530-1630 Hours

CHAIRPERSON

Smt. Anita Das, IAS

Secretary

Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH)
Ministry of Health & Family Welfare, Govt. of India.

CO-CHAIRPERSON

Shri Verghese Samuel, IAS

Joint Secretary

Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH)
Ministry of Health & Family Welfare, Govt. of India.

Dr. S. P. Singh

Advisor (Homoeopathy)

Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH)
Ministry of Health & Family Welfare, Govt. of India.

Dr. S.P.S. Bakshi

President

Central Council for Homoeopathy
New Delhi

Prof. C. Nayak

Director

Central Council for Research in Homoeopathy
New Delhi

Plenary Session - 6

This plenary session headed by Smt. Anita Das, Secretary (AYUSH), was held prior to the valedictory session to discuss specific strategies to carry forward the National campaign at the state and district levels.

The participants came up with specific suggestions for conducting the campaign which were appreciated by all. Also, the possible problems and difficulties, which could arise, were expressed by the participants and were satisfactorily discussed by the panel comprising of Shri Verghese Samuel, Joint Secretary, Deptt. of AYUSH, Prof. C. Nayak, Director, CCRH and Dr. S.P.S. Bakshi, President, CCH, headed by Secretary (AYUSH). The Deptt. of AYUSH committed itself to provide technical and logistic support to conduct the campaign at the state and district levels. Emphasis was laid on coordination and communication between homoeopathic and allopathic professionals and the policy makers from the State Directorates.

Sh. Verghese Samuel, Joint Secretary (AYUSH), informed that the National Workshop would be followed by workshops in these states initially where Homoeopathy is credible and accepted by people. He informed that workshops would be organized by the Directorate of ISM and H of the concerned state. He suggested that involvement of medical colleges and other resources such as NGOs. working in the field of healthcare and even the corporate sector is necessary for successful implementation of the workshop plans.

Dr. S.P.S. Bakshi, President, CCH, suggested that the medical colleges should organize camps in association with the State government to bring about awareness about the scope and limitations of Homoeopathy.

Mr. Amarjeet Singh, Secretary (Health) and Mission Director (NRHM), Gujarat, complemented the efforts of the Department of AYUSH and practitioners of Homoeopathy for creating multi-sectorial awareness by calling the experts and administrators of different systems of medicine like Homoeopathy, Allopathy, Ayurveda, and Unani Systems of treatment together. He said that in his experience of working in the health sector for many years, this is for the first time that such an effort to reach out mass population of different

systems has been commendably made. He expressed that each and every paper read in the workshop and all the case studies presented were outstanding.

He stressed that Homoeopathy has a lot to offer for the issues relating to the mother and child and there is a need to create awareness about the merits of Homoeopathy. He said that the biggest problem faced by mothers of Gujarat is anaemia, which is prevalent amongst 48% of mothers' population and said that the State Govt. welcomes the potential of homoeopathic system for handling such issues. He further highlighted that there is a great opportunity for allopathic and homoeopathic systems to work together and save mothers and children dying every year. He stressed that systemic studies, RCT (randomized control trials), double blind control trials need to be conducted and Gujarat would be elated to work with homoeopathic practitioners.

Dr. Lata from JIPMER, Puducherry suggested that the research studies in Homoeopathy may be conducted in collaboration with Indian Council of Medical Research.

Prof. C. Nayak, Director, CCRH, while responding to a query highlighted upon the studies on HIV/AIDS conducted by CCRH. He informed that there have been encouraging results, which were published in journal of international repute i.e. British Homoeopathic Journal. Also studies on HIV/AIDS are being planned in association with National Institute of Communicable Diseases (NICD) and Safdarjung hospital, New Delhi.

Another issue raised was that there should be clear guideline about the potential areas of Homoeopathy and the areas where Homoeopathy has a limited role for the campaigns at grass root level to avoid any chaos or confusion.

Dr. R. K. Varshney from Delhi suggested that Homoeopathic associations like IIHP (Indian Institute of Homoeopathic Physicians) and HMAI (Homoeopathic Medical Association of India) should be involved in the Campaign for Mother and Child Care by organizing camps and CMEs.

Smt. Anita Das suggested that all the literature and publications of Central Council for Research in Homoeopathy may be sent to State Councils and Homoeopathic Associations so

that it can reach up to the grass root level. She further added that collaborative efforts from both sides i.e. Department of AYUSH and from the practitioners of Homoeopathy are required for mainstreaming of AYUSH systems including Homoeopathy. Discussions and interactions are very important media to highlight the potential areas of Homoeopathy. She further suggested that for State level workshops participation of NGOs, modern medicine practitioners is must and there may be adequate coverage by regional press and electronic media channels so that the merits of Homoeopathy especially relating to diseases of mother and child can be publicized. She added that all IEC material may be translated into regional languages and sent to the states and the awareness campaign should be conducted at district and sub-district level, by district health society, PHC (Primary Health Centre), CHC (Community Health Centre) and Associations of homoeopathic physicians.

Sh. Verghese Samuel concluded the session by adding that Homoeopathy has a definite role in Mother and Child Care. The need is to take it to the field level quickly and systematically for its proper implementation.

The participants expressed satisfaction for the smooth conduct of the workshop and committed themselves for the cause of the campaign.

VALEDICTORY SESSION

1630 – 1730 Hours

- Garlanding of statue of Dr. Hahnemann
- Welcome by Smt. Anita Das, Secretary (AYUSH)
- Presentation of resolutions by Shri. Verghese Samuel, Joint Secretary (AYUSH)
- Address by Guest of Honour, Dr. V.K. Gupta, former Principal, Nehru Homoeopathic Medical College and Hospital, Delhi
- Address by Guest of Honour Prof. N.K. Ganguly, Director General, ICMR
- Concluding remarks by Chief Guest, Dr. Anbumani Ramadoss, Union Minister for Health and Family Welfare, Govt. of India
- Release of Homoeopathic Kit for Mother and Child Care
- Vote of thanks by Prof. C. Nayak, Director, CCRH

Hon'ble Union Minister for Health & Family Welfare Dr. Anbumani Ramadoss, graced the valedictory session as Chief Guest.

He emphasized the need for integrating the various AYUSH Systems with the mainstream healthcare delivery in the country.

Delivering the valedictory address to the two-day National Workshop on Homoeopathy as part of the National Campaign on Homoeopathy for Mother and Child Care in New Delhi, the Minister observed that the integration of ISM & Homoeopathy services with mainstream healthcare has long been the stated policy of the Government but practically it has not taken place in most parts of the country. Such integration at the PHCs, CHCs and district level hospitals would enable the general public to obtain a wider range of treatments in different systems under one roof and this would definitely lead to better healthcare delivery.

He urged the State Governments to avail of grants from the Department of AYUSH to introduce AYUSH services and facilities in PHCs, CHCs and district level hospitals. He said that this would, besides enabling the general public to avail of additional healthcare services, increase the demand for AYUSH medicines, which in turn would generate greater production of AYUSH drugs.

Appreciating the Department of AYUSH's initiative for organizing National Campaigns on specific strengths of various Indian Systems of Medicine and Homoeopathy, Dr. Ramadoss observed that these systems of medicine had a definite role to play in the national healthcare delivery system as they offered safe, effective and affordable treatments for various diseases and conditions which are not amenable to treatment by conventional medicine.

Apart from the National Campaign on Homoeopathy, a National Campaign on Ksharsutra has already been launched and National Campaigns on Unani for Skin Diseases, Ayurveda for Geriatric Care and Yoga for Mental Health would be launched in the next four months.

On this occasion, Smt. Anita Das, Secretary, Ministry of Health and Family Welfare, Department of AYUSH emphasized that it was right time to popularize the strengths of the AYUSH systems of medicine and raising the general standards of healthcare delivery in the AYUSH sector. She said that mainstreaming of the AYUSH systems of medicine is a major

policy plan under NRHM. The Secretary lauded the outreach services of the Dr. M. L. Dhawale Trust on community health in rural and remote areas of Maharashtra and Gujarat, and said that the National Campaign on Homoeopathy for Mother and Child should replicate this model with modifications that suit the local conditions. She emphasized that homoeopathic practitioners in the country should be involved in the national campaign so that the message about the efficacious and affordable treatments in Homoeopathy is communicated effectively. The country has around 2.17 lakh registered Homoeopathic practitioners. Besides, there are 183 Homoeopathic Colleges in the country, of which 31 offer post graduate courses. She suggested using such vast infrastructure for the growth of Homoeopathy.

The Secretary stressed the need for upgrading the educational standards and quality of teaching in AYUSH educational institutions. She also urged to promote the revamped Re-orientation Training Programmes (ROTP) and Continuing Medical Education (CME) programmes and ensure supply of standardized drugs.

Referring to the recommendations of the workshop, Smt. Das said that Homoeopathy can play a useful role in preventive and promotive care of women and children. She said it would be useful while treating gynaecological and obstetric cases to give special hands on training to the homoeopaths who should also be allowed to conduct emergency delivery.

She said that clear policy directive for meaningful integration should be given to health administrators in the States including those involved with the NRHM and due emphasis should also be laid on training to the health personnel down the line on the role that the AYUSH systems.

The Secretary outlined the way to take the National Campaign forward to the states, district and sub-district levels. She said that the state level workshops would have to be organized by the State ISM & H Department involving all stakeholders. Thereafter the campaign would be taken to the district and sub-district levels. The Panchayats, Urban local bodies, homoeopathic practitioners, PHCs and CHCs etc. would be involved in this effort.

Mr. Amarjeet Singh, Secretary (Health) and Mission Director (NRHM), Gujarat, after listening to presentations expressed his views about the campaign and Homoeopathy. He was deeply inspired by the case presentations and success stories of the resource persons and expressed that he was amazed to see and hear the tremendous strength Homoeopathy has in dealing with complicated problems of the mother and child. He offered that the State of Gujarat would take the initiative for taking up the State level workshop.

Mr. Chandan Sinha, Special Secretary (Health) and Mission Director (NRHM), West Bengal, while expressing his views about the campaign, felt that Homoeopathy should be popularized extensively and strategic plan be given to State Governments. He focused on certain operational procedures to be adopted for successful implementation of the campaign.

Prof. N. K. Ganguly, Director General, ICMR, congratulated the Department for launching such awareness campaign among the stakeholders. He gave the reference of Ayurveda Workshop on Ksharsutra organized by the Department of AYUSH recently. He highlighted that Homoeopathy can tackle the problems like anemia where it can help in improving the absorption of iron in the body. Similarly it can enhance the absorption of zinc, which is an essential element for the cognitive growth in children. He gave the example of certain disease conditions like Psoriasis, Rheumatoid Arthritis, Allergies, Renal stone and other diseases where homoeopathic medicines work. There is scientific background behind this system, he asserted.

He further recommended that clinical trial facility should be created for Homoeopathy so as to generate real good data to make Homoeopathy a global science and people can opt for the system of their own choice. He highlighted that many allopathic doctors have taken to Homoeopathy due to their own experiences. He emphasized that not only CME programmes but capacity building is also very important and is to be taken up in the areas such as data handling, statistics, counseling, social sciences etc. He was delighted to inform that at National AIDS Research Institute, Pune, one homoeopathic drug has been screened to have high anti HIV activity. Since 'Prevention of diseases' is one of the focused areas of Homoeopathy and contribution of Homoeopathy in Public Health is vital, he, therefore, suggested to avail of its services in Disease Control Program. There is tremendous possibility of integration in some areas like MCH, Public health etc.

Dr. V.K. Gupta, former Principal, Nehru Homoeopathic College & Hospital, New Delhi, appreciated the endeavor of the Department of AYUSH for organizing such campaign at the national level. He stressed that the practitioners from different systems should know the scope and limitations of other systems for respectful referrals and should also make the people aware so that they can opt for their choice of treatment. He opined that Homoeopathy could not be fully vindicated as Evidence Based Medicine due to limited infrastructure and ICMR (Indian Council of Medical Research) could guide for scientific evidences. He highlighted that Homoeopathy is a global science and being practiced in more than 80 countries. He also informed Dr. P. Banerjee, the homoeopathic doctor from Kolkata was invited to USA to elaborate the scope of Homoeopathy in managing the complaints of the astronauts while in the space like headache, insomnia, osteoporosis, etc. He hoped that the national campaign and future programmes will go a long way to benefit the people.

During this session, the Chief Guest released the **Homoeopathic Kit** for the complaints of pregnant women and children. While proposing vote of thanks, Prof. C. Nayak, Director, CCRH, drew the kind attention of the Union Minister for Health and Family Welfare that the mainstreaming of AYUSH systems including Homoeopathy, which is an integral part of our National Healthy Policy and NRHM, will definitely contribute towards achieving the targets of reducing the MMR and IMR. He said that a force of more than two lakh homoeopathic doctors could join this endeavor of the Health Ministry to achieve the goals envisaged under NRHM.

**EXTRACTS FROM THE SPEECH OF THE HON'BLE UNION MINISTER FOR HEALTH
AND FAMILY WELFARE, DR. ANBUMANI RAMADOSS, ON THE VALEDICTORY
SESSION OF THE NATIONAL WORKSHOP**

Dr. Anbumani Ramadoss, Hon'ble Union Minister for Health and Family Welfare and Chief Guest of the valedictory session, complemented the Department of AYUSH for launching the National Campaign on Homoeopathy for Mother and Child Care.

He informed the audience that saving the mothers and taking care of children of the country, is the biggest challenge for him and the most important work to be done is to bring down the maternal and infant mortality rate. This is possible by the joint efforts of the professionals of all the systems of treatment including those from AYUSH Systems and the NGOs.

He stressed that maternal mortality and infant mortality are among the four vital issues that need to be addressed, other two being declining sex ratio and under-nutrition.

To tackle the issues of lack of adequate medicines, doctors and quality health care, etc. our Hon'ble Prime Minister had launched National Rural Health Mission (NRHM) in April 2005. This is one of the biggest programs ever in Indian Health Sector. Focus of NRHM is to:

- bring down maternal mortality
- bring down infant mortality
- bring down disease burden
- improve the sanitation
- ensure drinking water supply

He further said that he is happy to adopt any system – be it Indian, Traditional, Homoeopathic or Chinese, if it could save lives, save children and save the mothers of India. He stressed that Indian Systems of Medicine are our own systems founded by our fore fathers. These, including Homoeopathy, are all time tested systems. But the need of the hour is that *from time tested we need to go for the science tested.*

He highlighted that till about 130 years ago, Homoeopathy was the only system in USA but it has been replaced, to a great extent, by the modern system because adequate scientific validation could not be done. This is also required for Homoeopathy.

He further elaborated that efforts are being made for mainstreaming Homoeopathy with the health care delivery system and a few states have already materialized it. He gave the examples of success of health care services available in Tamil Nadu and Kerala due to their integrated approach. Tamil Nadu has Indian systems and modern system functioning together under one roof in PHCs. In Kerala, all systems are working together in one campus. He stressed that similar approach is required to be taken by the other states also.

He stated that most of the resolutions and recommendations made during the workshop can be accepted. He urged upon the Homoeopathy professionals to explore how the preventive and promotive care could be more focused through Homoeopathy.

He agreed to the opinion that emergency delivery services can be provided by the qualified homoeopathic doctors if they are given proper training.

Another major issue of concern is homoeopathic education, where new concepts need to be inculcated. Research attitude should be imbibed at undergraduate level. Concept of synergizing modern system with Homoeopathy can also be worked out in curricula by the joint effort of the Councils like CCH, MCI (Medical Council of India) and other Councils. IEC resources are needed for such campaigns and there will be no IEC resource constraints for such a wonderful campaign on Mother and Child Care.

He expressed his happiness to see such a huge participation and hoped that all the participants after going back to their respective states should start a mass movement to fulfill the aim of reducing maternal and infant mortality and save every mother and child of the country.

RESOLUTIONS

Shri Verghese Samuel, Joint Secretary (AYUSH) presented the following recommendations made in the workshop:

1. Homoeopathic medicines are effective for certain common diseases and conditions relating to the mother and the child where no hospitalization or expensive investigation procedures are required and as such, there is a strong case for popularizing and utilizing the system at the primary and secondary health care delivery system level.
2. A focused and carefully targeted awareness programme needs to be organized to inform and educate the public and practitioners of other systems of medicine about the strengths of Homoeopathy in the area of mother and child care.
3. Financial and technical support for the IEC activities should be provided to the State Governments by the Government of India.
4. The State Governments must set up more Homoeopathic Indoor and Outdoor treatment facilities in existing allopathic hospitals under the NRHM. Alternatively, the State Governments could obtain funds from the Department of AYUSH under the Centrally Sponsored Scheme (Hospitals and Dispensaries) for the purpose.
5. The administrative set up for Homoeopathy in the State Governments requires to be strengthened.
6. The Homoeopathic Medical Colleges, NGOs, working in the health sector and social service sector should be involved in the campaign.
7. There should be a National Task Force under the Department of AYUSH with a representative from the State Governments to plan and coordinate campaign.
8. The Panchayati Raj institutions and Urban self-government institutions should also be involved in the campaign.
9. Simple homoeopathic remedies for common ailments may be included in the School Health Programmes.
10. A core group should be set up consisting of experts of Allopathy and Homoeopathy to make recommendations regarding the specific conditions related to Mother and Child care which can safely and effectively be treated by Homoeopathy. The core group will also make recommendations regarding the manner in which PHCs and

CHCs in the public health care system and CGHS units will provide homoeopathic treatment for mother and child care.

11. There is urgent necessity to improve the quality of obstetric care and gynecological training given in homoeopathic medical colleges. Attachments to allopathic medical colleges for such training may be considered where the number of labor and gynecological cases is low in Homoeopathic medical colleges.
12. A CME programme for practitioners exclusively on mother and child care should be evolved and implemented at district level.
13. A dialogue with the Medical Council of India should be initiated to provide for admission of Homoeopathic graduates in PG courses of Preventive & Social Medicine and Community Medicine.
14. To set up Resource centers at central and state level.
15. Orientation modules on Homoeopathy for allopathic doctors should be prepared.
16. Need and demand outreach models of the kind used by the Dr. M.L. Dhawale Memorial Trust may be adopted in the states.

**OTHER ACTIVITIES RELATED TO NATIONAL CAMPAIGN
AND NATIONAL WORKSHOP**

- **Press Meet**

- **Exhibition during workshop**

- **Media Coverage**
 - **Print Media**

 - **Audio Visual Media**

PRESS MEET FOR THE NATIONAL CAMPAIGN

A pre-workshop press meet was organized by the Department of AYUSH and Central Council for Research in Homoeopathy on 30th October 2007. The media people interacted with Shri Verghese Samuel, Joint Secretary, Department Of AYUSH, Dr. S. P. Singh, Advisor (Homoeopathy), Prof. C. Nayak, Director, CCRH and Dr. Eswara Das, Deputy Advisor (Homoeopathy). Shri Verghese Samuel gave a brief introduction about National Campaign on Homoeopathy for Mother and Child Care. He briefed the role of Homoeopathy in various disease conditions of women and children. He said that National Campaign will facilitate in creating awareness about Homoeopathy and people will have option to avail of the system of their choice. He elaborated that the National Campaign for Mother and Child Care will go a long way and the Department of AYUSH will provide resources to improve health status of women and children. A presentation was made by Prof. C. Nayak, Director, CCRH highlighting the various activities to be taken up for the National Campaign. The objectives of the workshop and the operational strategies of the National Campaign at State and district level were briefed in his presentation.

Thereafter, the experts on the dais answered queries of media people particularly about the myths prevailing around Homoeopathy and the schemes of Government of India to support AYUSH systems. While answering to the queries, Joint Secretary informed the steps taken by the Dept. of AYUSH for integration of AYUSH systems with National Rural Health Mission. The Department of AYUSH has schemes to set up clinics where all therapies will be available under one roof. He emphasized that for creating a healthy nation, various professional institutes and registered practitioners must be involved. He apprised the media that distribution of homoeopathic dispensaries in country is patchy. Therefore the Department is encouraging State Governments to increase the number of homoeopathic units in primary and community health centres.

EXHIBITION DURING THE NATIONAL WORKSHOP

An exhibition was organized along with the national workshop on “Homoeopathy for Healthy Mother and Happy Child” at the same venue. The following Homoeopathic Drug Manufacturers and Homoeopathic Book Publishers participated besides the Department of AYUSH and Central Council for Research in Homoeopathy including:

1. S.B.L., Sahibabad, (U.P.)
2. Dr. Willmar Schwabe India Pvt. Ltd. Noida, (U.P.)
3. Bakson Drugs and Pharmaceuticals (P) Ltd., New Delhi
4. B. Jain Publishers Pvt. Ltd., New Delhi
5. Sir Ganga Ram Hospital, New Delhi
6. Sintex International Ltd., Kalol, Gujarat
7. Indian Books & Periodicals & Publishers, New Delhi

One stall was provided to each of the participants to display the exhibits and products related to Mother and Child care. CCRH and Department of AYUSH displayed various materials through the translites, scrollers and touch screens. There was free distribution of materials like posters of National Campaign, handouts, Information Education and Communication materials and informative brochure on AYUSH systems.

The pharmaceutical companies displayed the homoeopathic medicines that are commonly used in the ailments of pregnancy, childbirth and in children. The publishers displayed books focusing on the issues of maternal and children health. Sir Ganga Ram Hospital distributed free Information, Education and Communication materials.

The publishers displayed books focusing on the issues of maternal and child health. The delegates attending the workshop, from all over India and abroad, visited the exhibition. It was informative and the efforts made by the CCRH team for exhibition were appreciated.

**MEDIA COVERAGE OF THE NATIONAL WORKSHOP ON HEALTHY MOTHER
AND HAPPY CHILD**

PRE - WORKSHOP PUBLICATIONS

I. Newspaper Advertisement for the national workshop on “Homoeopathy for Healthy Mother and Happy Child” was published in following news papers:

S.No	Newspaper	Editions	Date of publication
1.	Hindustan Times (English)	Delhi Edition	5 Nov. 2007
2.	Hindu (English)	All Editions All Editions	3 Nov. 2007 5 Nov. 2007
3.	Dainik Jagran (Hindi)	Delhi Edition	5 Nov. 2007
4.	Hindustan Hindi	All Editions All Editions	4 Nov. 2007 5 Nov. 2007
5.	Tamil Osai	All Editions	4 Nov. 2007

II. Articles on the National Campaign prior to the workshop were published in following news papers:

S.No.	Newspaper	Date of publication	Article
1.	Malayala Manorma	19 th Oct. 2007	‘Homoeopathy workshop in November’

2.	The Hindu	28 th Oct. 2007	'Homoeopathy to be promoted'
3.	Virat Vaibhav	25 th Oct. 2007	'Homoeopathy ki meethi goli, ma – bachhe ki hamjoli'
4.	Rastriya Sahara (Urdu)	31 st Oct. 2007	'Matra evam shishon ke svasth ke liye Homoeopathy surakshit'
5.	Jagran City	2 nd Nov. 2007	'Kargar hai Homoeopathy chikitsa'
6.	Jagran City Delhi	2 nd Nov. 2007	'Ab pasandida padhty se hoga ilaaj'

III. List of various Journals, in which articles on the National Campaign of Homoeopathy for Mother and Child Care were published prior to the workshop are as follows:

1. Homoeopathic Forum – Volume X – Issue 09 - September 2007
2. Vital Informer – Volume 15 – Issue 09 – September 2007
3. Homoeo Revival – Volume I – Issue 09 – September 2007
4. Homoeo Times – Volume 4 – Issue 09 – September 2007
5. Homoeopathy For All – 2 issues – September 2007 and October 2007
6. Malanala Manorma – October 2007

PUBLICATIONS DURING THE WORKSHOP

I. Articles on the National Campaign during the workshop were published by various newspapers all over the Country. The list of newspapers is as follows:

1.	Hindustan (Hindi)	5 th Nov. 2007	'Aadhi abadi ke swasthay ki hakikat'
2.	The Asian Age	5 th Nov. 2007	'Medicine outlay hike sought by minister'
3.	Amar Ujala	6 th Nov. 2007	'Homoeopathy ko lokpriya banane

			ke honge pryas'
4.	Sahafat (Urdu)	6 th Nov. 2007	'Homoeopathy ke ratriya abhyan ka udghatan'
5.	Amar Ujala	6 th Nov. 2007	'Mahilaon ko barabari per lana hi hoga'
6.	Hindustan Sanachar (Urdu)	6 th Nov. 2007	'Panabaka Lakshmi : Homoeopathy ki vridhi ke liye drid hogi sarkar'
7.	Ratriya Sahara	6 th Nov. 2007	'Homoeopathy ko badava de rajya : kendra'
8.	Mathrubhumi Malayalam	6 th Nov. 2007	'Seminar declares that Homoeopathic treatment is effective for mother and children'

POST - WORKSHOP PUBLICATIONS

I. **Articles** on the National Campaign after the workshop were published in following news papers:

1.	Jagran City	7 th Nov. 2007	'Ma -bache ke liye Homoeopathy surakshit'
2.	The Hindu	7 th Nov. 2007	'Homoeopathy for healthy mother, happy child'
3.	Malayala Manorma	9 th Nov. 2007	'Homoeopathic treatment should be promoted'

AUDIO VISUAL COVERAGE OF THE WORKSHOP

I. The national workshop highlights were telecasted in various channels such as:

1. D. D. News
2. Channel No. 1
3. Aaj Tak Delhi
4. Shakti T.V.
5. Total T.V.
6. Metro Channel
7. ANI T.V.

II. Two **Video Spots** on Homoeopathy were made by National Film Development Corporation, namely 'MITHIGOLI' and 'ZUKKAM'. These video spots were telecasted in following channels:

- 1) Aaj Tak
- 2) Headline Today
- 3) Star News
- 4) CNN / IBN
- 5) Zee News
- 6) NDTV 24X7

The schedule information of the telecast of video spots was as follows:

Date	Video Spot 1. (MITHIGOLI)	Video Spot 2. (ZUKKAM)
07- 11- 2007	18.00 – 18.30 21.00 – 21.30	18.00 – 18.30 21.00 – 21.30
08- 11- 2007	18.30 – 19.00 19.00 – 19.30	18.30 – 19.00 19.00 – 19.30

	22.00 – 22.30 22.30 – 23.00	22.00 – 22.30 22.30 – 23.00
09- 11- 2007	19.30 – 20.00 21.30 – 22.00	19.30 – 20.00 21.30 – 22.00

STEERING COMMITTEE OF THE NATIONAL WORKSHOP

Dr. S. P. Singh,
Advisor (Homoeopathy), Deptt. of AYUSH

Prof. C. Nayak,
Director, CCRH

Mr. S.K. Chadha,
Director, Deptt. of AYUSH

Dr. Eswara Das,
Deputy Advisor (Homoeopathy), Deptt. of AYUSH

Dr. Somen Adhikari,
Director, N.I.H., Kolkata

Dr. V.K. Gupta,
Homoeopathic Consultant, Delhi

Dr. K.M. Dhawale,
Director, Dr. M.L. Dhawale Memorial Homoeopathic Institute, Mumbai

Prof. V. K. Chauhan,
Principal, Dr. B. R. Sur Homoeopathic Medical College, Hospital and Research Centre, Delhi

Dr. Kusum Chand,
Medicine Specialist and Visiting Faculty, Nehru Homoeopathic Medical college, Delhi

Dr. Asha Jain,
Gynaecologist & Obstetrician, Delhi

Dr. Ram Subramaniam,
Paediatrician, Mumbai

Dr. A.K. Seth,
Homoeopathic Consultant, Sir Ganga Ram Hospital, Delhi

RESOURCE PERSONS AT THE NATIONAL WORKSHOP

'In alphabetical order'

S.No.	Speaker	Designation	Contact Address
1.	Anand, Ramesh Dr.	Additional Director	CGHS (HQ) D-II/B-10, Moti Bagh, Delhi
2.	Babar, Syed Shams Dr. MBBS, MD, DGO, MF (Hom)	Homoeopathic Consultant	Dr. Babar Medical & Research Centre Pvt. Ltd., 8-2-413/8, Rd.No. – 4, Banjara Hills, Hyderabad-500034, Andhra Pradesh
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