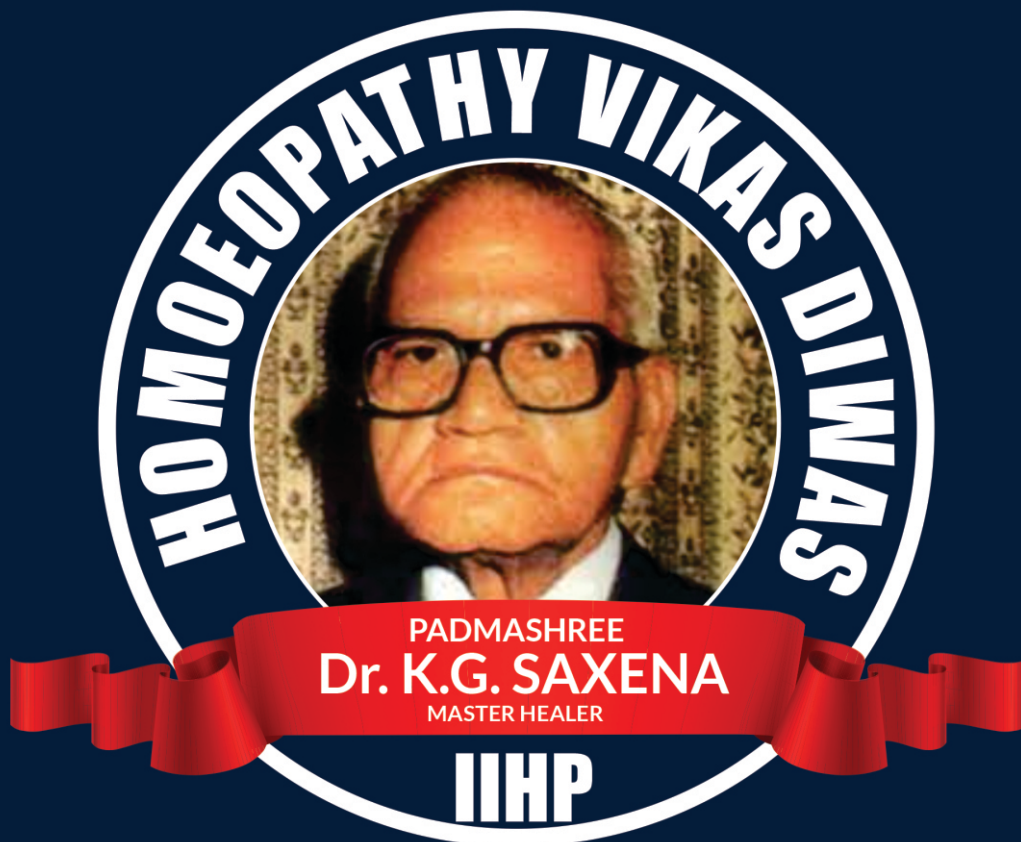
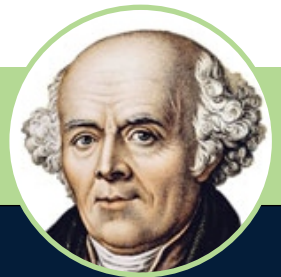




RATIONAL PHYSICIANS

A FREE PDF QUARTERLY SCIENTIFIC AND NEWS JOURNAL
INDIAN INSTITUTE OF HOMOEOPATHIC PHYSICIANS



- DR K G SAXENA : LIFE SKETCH
- HOMESICKNESS AND HOMOEOPATHY
- MOOD DISORDERS
- MEDICAL ETHICS
- BOOK REVIEW
- QUIZ

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IIHP : The Professional Association of the Institutionally Qualified Homoeopaths

www.iihp.in

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KEY NOTES

The Editorial

Dr Sudhanshu Arya
Managing Editor
homoeospan@yahoo.com

Dr K G Saxena is a founder member of the IIHP and his birthday is an occasion that deserves special celebrations. Recently his 110th birthday was celebrated by IIHP with fanfare as Homopathy Vikas Diwas on 25th September. Already conferred with Padmashree, he must be recognised as Homoeopathy Vikas Purush as well for his endeavours to develop and uplift homoeopathy.

Taking homoeopathy to newer heights on international levels LMHI recently held its session at Istanbul, Turkey. There were many participants from India among others and social media is awash with their photos in testimony. Our Prof Dr Niranjana Mohanty not only participated in a big way but has contributed a report on it as well.

On the international front IIHP has added another feather to its cap. In Canada, IIHP recently signed a MOU with Manitoba Homoeopathic Association for the development of homoeopathy. This will help us spread quality homoeopathy to more places as is evident by the several webinars organized under the joint venture of IIHP and Ontario Homoeopathic Medical Association.

On the other side we are preparing for the new National Congress to be held at Panchkula Haryana during **11-12 February 2023**. Hope you are motivating many doctors to register and participate in it.

Ayush is no more an acronym; news in the CCRH newsletter confirms it.

Every organization needs dynamic people to facilitate achieve its objectives and realize its vision. IIHP has initiated a 'STAR' programme for its members to recognise and promote dynamic members so that the association and homoeopathic fraternity at large get benefited. You can read the details of this programme on the IIHP website.

We hope you will find this issue of Rational Physicians informative and useful. Waiting for your feedback.

Dr Sudhanshu Arya
Managing Editor
homoeospan@yahoo.com



Padmashri Prof Dr V K Gupta
Patron
homeovkgupta@gmail.com

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Chief Editor: Dr M A Rao
raocghs@gmail.com

Communication

Editor
Rational Physicians
403, C-06 Pioneer Regency
K T Nagar NAGPUR – 440013
Maharashtra, India
raocghs@gmail.com

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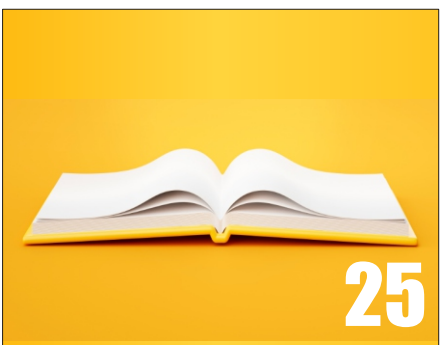
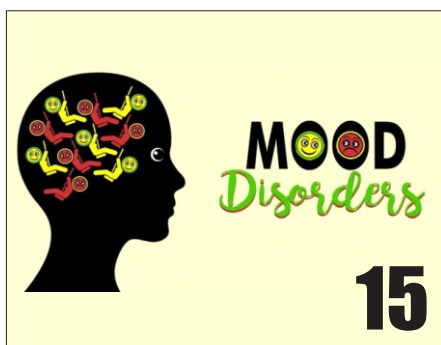
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NEWS & UPCOMING EVENTS



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Ayush, No More an Acronym

For many years the AYUSH represented alternative systems of medicine as an acronym but now it has become more democratic by becoming a noun, no more who leads or who trails.

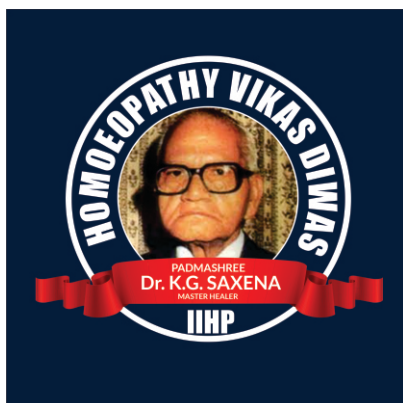
In a recent newsletter by CCRH this change has been recognised and established by the Government of India. We are sharing with you a screen-shot from the journal.

Ayush is Now Single, Comprehensive Entity

- As per a notification published in the Gazette of India on 13th April 2021, the Ministry of AYUSH (Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy), will now be known as the Ministry of Ayush. The meaning of word Ayush is defined as “Traditional & Non-Conventional Systems of Health Care and Healing Which Include Ayurveda, Yoga, Naturopathy, Unani, Siddha, Sowa-Rigpa and Homoeopathy etc.” The Ministry of AYUSH includes the seven traditional systems of healthcare, namely, Ayurveda, Yoga & Naturopathy, Unani, Siddha, Sowa-Rigpa and Homoeopathy.



Dr K G Saxena 110 th Birthday



Anybody conversant with the history of homeopathy will be well aware of the name Dr K G Saxena and his importance in establishing homeopathy on an official footing especially in India. Dr K G Saxena was one the founder member of IIHP and his contribution to the growth of homoeopathy both qualitatively and quantitatively is immense. His birthday is celebrated by IIHP with much fanfare all over the country and now internationally. In recognition of his important contributions he has been conferred Padmashri but IIHP feels he must be recognised as Homoeopathy Vikas Purush a title very apt for a man of his stature. Glimpses of this day's celebrations are available in the pictures section of IIHP website. <http://iihp.in/photo-gallery.html>

NEWS & UPCOMING EVENTS



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LMHI



Apex body of homeopathy, the Liga Medicorum Homoeopathica Medicorum Internationalis had its 75 th world convention held at Istanbul, Turkey recently. The theme of the year was 'A bridge between past and future'. There were more than 475 delegates from about 40 countries and some 257 papers were presented. We have a report, in this very journal, about this event by Prof Dr Niranjana Mohanty. Dr Mohanty is National Vice President of India to LMHI. Next world congress is being planned in Bogota in 2023.

IIHP Star Programme



Every organization needs dynamic people to progress so does IIHP but the real problem remains how to recognize such people among the members. There are various officials doing their bit in their capacity but there are many more people are doing a lot remaining behind the scene. Just to recognize & promote such people IIHP has started this IIHP STAR programme. One and all who are contributing towards the upliftment of homeopathy, more so using the IIHP platform, are requested and encouraged to participate in this programme. If you think you know someone who needs to be promoted please encourage him or her to participate in it.

For all the information related to this programme and how to participate in it and what is the use of this programme please visit the page www.iihp.in/star.html

IIHP 26 th National Congress



Save your dates [and more if you love the nature and travel] as we plan to meet and celebrate the hugely awaited big congregation of homeopaths during the 26 th National congress of IIHP on 11 th and 12 February 2023 at Panchkula, Haryana.

The theme of the congress is Homeopathy for Wellbeing & Mental Resilience – Post Covid scenario. A good number of national and international collaborations make it a very important event for homeopaths.

With the Venue nestled in the foothills of the Shivalik Ranges you are welcome to explore and enjoy the nearby places namely Kasauli, Shimla but there are local sightseeing as well - Sukhna Lake, Rock Garden, Rose Garden, Chandi devi temple and may more.

You will continue to get information about this hugely important programme of homeopathy through various channels. IIHP national and regional groups will carry information so will our own publication the Rational Physicians plus other print and social media. However the best and easiest source of information is the national website of IIHP www.iihp.in



Indian Institute of Homoeopathic Physicians
Council for Homoeopathic System of Medicine, Haryana
Jointly Organizes

HOMOEOWORLDVISION-HARYANA 2023

XXVI National Homoeopathic Congress of IIHP
Golden Jubilee Celebration of CHSM, Haryana
Panchkula (Chandigarh) Haryana

Theme
Homoeopathy for Wellbeing & Mental Resilience – Post Covid Scenario

In academic collaboration with

- *Liga Medicorum Homoeopathica Internationalis
- *Ontario Homoeopathic Medical Association, Canada
- *Manitoba Homoeopathic Association, Canada
- *Indian Organization for Rare Diseases
- *All India Association of Vice-Chancellors & Academicians

Technical Support by
National Commission for Homoeopathy
Central Council for Research in Homoeopathy

Dates: 11th & 12th February 2023
Venue: Inderdhanush Expocenter Sector 5, Panchkula

INFORMATION BROCHURE

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Website: www.homoeoworldvision.com | www.iihp.in



LETTERS TO THE EDITOR



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**The Readers of
the
Rational Physicians
are
BUSY....**

R O A D M A P **January-March 2023 Issue**

The editorial team of the Rational Physicians solicits advertisements, articles, news and photos related to homoeopathy to be published in the forthcoming issue to be released in October 2022.

G U I D E L I N E S

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The Editor, Rational Physicians

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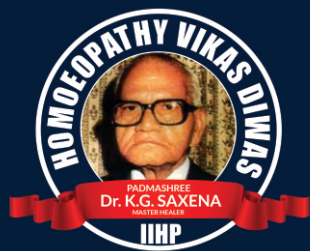
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LAST DATE OF SUBMISSION
15.12.22

For the January-March 2023 Issue



A TRIBUTE TO LATE PADMASHREE DR. K.G. SAXENA – THE MASTER HEALER ON HIS 110TH BIRTH ANNIVERSARY

History of recognition of Homoeopathy in India dates way far back to 1937 when an young and dynamic Homoeopathic graduate from Calcutta Homoeopathic Medical College came out of the College to start Homoeopathic practice in Delhi. He is none other than late Padmashree Dr. K.G. Saxena who had spent his whole life struggling for the cause and development and recognition of Homoeopathy in the country. This great personality was the champion for the Homoeopathic profession, and instrumental in getting recognition for Homoeopathy by laying the road map for the success of Homoeopathy in India.

He was born on 25th September 1912 in Delhi. At the instance of his father, Dr. K.G. Saxena took admission in the prestigious Calcutta Homoeopathic Medical College Calcutta in Bengal.

Dr. Saxena got his leadership qualities during his studies in Calcutta. He fought for the quality education and good facilities when he found that the standards of Homoeopathic education were not up to the mark in the institute.

When Dr. Saxena came out from the college after completing his graduation in Homoeopathy, he could realize that the Homoeopathic system was not recognized in the country by the Government, he decided to take this onerous task of getting the recognition from Govt. on him.

The real struggle in his life started after his arrival in Delhi with a degree in Homoeopathy. He had set up his private practice in Delhi in real earnest. By this time, he came to know the attitude of the Govt. towards Homoeopathy as it was considered that this system of medicine was an unscientific method and needs no encouragement. He felt that convincing the govt. about the efficacy of Homoeopathy was more a difficult task than convincing the political set up. Hence, he had focused his attention at the members of Central Legislative Assembly, the highest decision making political body at that time. He had studied the functioning of this political body and how an unofficial Resolution could be brought to the Legislative Assembly. For this task he was needing the support of at least 20 Legislators to sign and move the private (unofficial) resolution in the Assembly.

He contacted several Legislators and explained them about the efficacy of Homoeopathy. With the support of some Legislators the resolution was moved in the Assembly and fortunately it was accepted for discussion. This was his first success towards his ultimate goal. The Legislative Assembly authorized Mr. Ghiasuddin the honourable Legislator from Punjab province to move the resolution in the Central Legislative Assembly. Though Mr. Ghiasuddin was not knowing much about Homeopathy he had agreed to move the resolution after being thoroughly convinced by Dr. Saxena about the merits of Homoeopathy.

The Congress party at that time was not in favour of this resolution and their leaders bluntly told Dr. Saxena that they would not support the resolution. Dr. K.G. Saxena had a surprise when Mr. Mohammad Ali Jinnah, the then leader of the Independent party in the Central Assembly told him that his party would support the resolution. At the end, the resolution was passed by a narrow margin. That was the second biggest achievement for Dr. Saxena. This entire episode indicates the narrow mind of some of the political parties and their non progressive mentality towards public health.

As per the rules the health was a state subject, and this resolution needs the ratification from all state Governments. Hence this resolution was forwarded to all the states. Bengal was the first state to adopt this resolution and it was the first state to recognize Homoeopathy as a system of medicine in the year 1943. In the year 1944 after the passing of the Homoeopathic resolution by Central Legislative Assembly a group of dedicated Homoeopaths consisting of stalwarts like Dr. A.N. Mukherjee, Dr. Dewan Jaichand, Dr. Dayashankar Kayastha, Dr. J.P. Srivatsava, Dr. S.P. Asthana and our Dr. K.G. Saxena formed a group to establish a Homoeopathic professional group to fight for the scientific development of Homoeopathy in India. They named this group as "All India Institute of Homoeopathy" with its central office at Delhi. Dr. K.G. Saxena was made the first General Secretary of this Institute.

The Institute under the leadership of Dr. Diwan Jaichand and Dr. K.G. Saxena submitted its first memorandum to the Coalition Govt. at the Centre in the year 1946 for recognition of Homoeopathy by the Central Govt. With India getting its independence on 15th August 1947 a new era was ushered in the country.

Rajkumari Amrit Kaur became the first Health Minister of independent India. Dr. Saxena met her several times and impressed upon her the importance of Homoeopathy in the health care delivery system. In spite of immense lobbying by the Homoeopathic stalwarts the authorities at that time were indifferent towards Homoeopathy. Again Dr. Saxena took the mantle on him and started contacting the Members of Parliament to get the support for another resolution to be put up in the Parliament again. He met Shri. S.C. Samanta, Shri. Pattabi Sitaramaiah, Shri Mohan Lal Saxena and Lala Deshbandhu Gupta the Parliamentarians of independent India and sought their help in introducing a new resolution on Homoeopathy. With untiring efforts of Dr. K.G. Saxena the new resolution was put before the Parliament On 17th February 1948. The resolution was debated thoroughly in the House and adopted unanimously.

However a rider was attached to this resolution by the Govt. that the resolution would be implemented by the Govt. provided a Govt. appointed Enquiry Committee, to be set up at a later time confirms and guarantees that the Homoeopathic system of medicine is a Scientific System of medicine. Ultimately a Homoeopathic Enquiry Committee was appointed on 30th September 1948 with its terms of reference. With the active support and advise from Dr. Saxena the Committee members were chosen. The Enquiry committee made the report and it was finally published in the year 1949 recommending Homoeopathy is a Scientific System of Medicine and govt. should recognize Homoeopathy as the Scientific system of treatment. The Enquiry report was very exhaustive and it has gone in to all aspects of the science and made exhaustive recommendations.

During those days the Director General of Health Services and Ministry of Health were responsible to implement the resolutions of Parliament. As the DGHS and Ministry of Health was in the hands of Allopathic doctors, the resolution encountered a stiff opposition from these quarters and started to abandon the resolution on Homoeopathy. When Dr. Saxena came to know about this plan he immediately started the fire fighting. Using his popularity and links at higher level he compelled the Health Ministry to form Homoeopathy Adhoc Committee and later Homoeopathy Advisory Committee in the year 1952 with the support of Rajkumari Amrit Kaur the Health Minister. The Adhoc Committee was consisting of Dr. J.N. Majumdar, Dr. L.D. Dhawale, Dr. Diwan Jaichand, Dr. M. Guru Raju and Dr. K.G. Saxena and Dr. Col. Lakshmanan the DGHS as Chairman. Initially Dr. Lakshmanan the DGHS was not in favour of including a member from South India, reasons best known to him only. But with persuasion from Dr. K.G. Saxena, Dr. M. Guru Raju's name was included.

Dr. Lakshmanan's annoyance to Homoeopathy was exhibited when Dr. K.G. Saxena came to know that the Adhoc Committee recommendations that were submitted to DGHS were never brought to the notice of the Shri. V.K.B. Pillai Secretary Health in the Health Ministry and was kept in the cold storage, and on the contrary he had informed the Secretary that nothing need to be done for Homoeopathy. This had infuriated Dr. Saxena and he immediately approached Health Minister Rajkumari Amrit Kaur and Health Secretary and requested them to form another Committee with Secretary Health as Chairman. His request was considered and a new Committee with Secretary Health as Chairman was constituted and retained the other members. This Committee was rechristened as Homoeopathy Advisory Committee in the year 1956.

With Mr. Pillai as Chairman of the Advisory Committee and his full support to Homoeopathy, the antagonistic attitude of DGHS was subdued paving the way for the implementation of recommendations made by Advisory Committee. It was indeed another major achievement for Dr. K.G. Saxena. In the year 1962 Dr. Saxena was appointed as first Hon. Homoeopathic Advisor to Govt. of India. He was also entrusted with the responsibility of Secretary of Homoeopathic Advisory Committee. His responsibility as Secretary of Advisory Committee was to advise the Govt. on matters and issue pertaining to Homoeopathic Education, Research, Regulation of practice, Pharmacopoeia, Rural Medical Aid, Drug Manufacturing and their regulations, Family Planning, Financial Aid to Homoeopathic Colleges, Homoeopathic Dispensaries and Hospitals and cooperation with International Homoeopathic Medical League.

Being Homoeopathic Advisor, Dr. Saxena used to attend all official meetings of Govt. of India including Parliament Consultative Committees and meetings called by State Govt. for the development of Homoeopathy. In 1967 Dr. Saxena requested the Central Govt. to establish a Central Council for Homoeopathy, Ayurveda and Unani on lines of Medical Council of India to regulate its Education and Practice and put up a comprehensive draft bill for all Indian Systems of Medicine. This bill was piloted in Rajya Sabha and later discussed in Lok Sabha. After a thorough discussion in both houses of Parliament it was decided to appoint a joint Parliament Committee to consider and report on the establishment of a separate Indian System of Medicine and Homoeopathic Councils. This Parliament Committee had recommended the establishment of these Councils. Later the Health Ministry had constituted another Parliamentary Committee in the year 1973 for the establishing a separate Council for Homoeopathy. The Homoeopathic Central Council bill was passed in the Parliament and the President of India gave his assent on

19th December 1973. The Health Minister Dr. Karan Singh finally gave a nod to establish Central Council for Homoeopathy in December 1974 and put the proposal before Union Cabinet for final approval. The Cabinet was presided over by Smt. Indira Gandhi the Prime Minister of India gave the approval. With the establishment of CCH the Govt. had abolished the Homoeopathic Advisory Committee.

The Mission that has been embarked in the year 1937, passing through various obstacle, up and downs ultimately reached to a semifinal stage in the year 1974 when Govt. of India has established the Central Council for Homoeopathy. Walking through this inhospitable terrain Dr. Saxena encountered many obstacles, faced humiliation at the hands of some Legislators and was ridiculed by our Allopathic brothers, but never gave up his passion for developing Homoeopathy in the country. During his entire journey, he could understand the power of politicians and thought that only political power could counter the onslaught by Allopathic minded bureaucrats. To achieve this he thought that through Homoeopathic treatment he could reach Political power. Having an advantage of staying in Delhi he frequented Political VIP'S when ever and where ever possible by providing them Homoeopathic treatment. He became family physician to some of the top politician. His accurate prescriptions made the politicians his admirers and supporters.

During his journey on the path to Homoeopathy Dr. K.G. Saxena came across closely with various powerful political leader before and after Independence. The notable among them are Dr. Rajendra Prasad the first President of Independent India, Shri. Lal Bahadur Sastry the Second Prime Minister of India, Rajkumari Amrit Kaur the Health Minister, Dr. Sushila Nayar, Dr. Chandrasekhar, Dr. Satya Narayana Sinha, Dr. S. Radha Krishnan the President of India, Dr. Zakir Hussain the President of India, Shri. V.V. Giri the President of India, Shri. Fakhruddin Ali Ahmed the President of India, Shri. Sanjiva Reddy the President of India and Shri. Jaiprakash Naryan the great socialist and many more. He was a close family associate of Dr. Rajendra Prasad and family Physician to many VVIP's in those day. He proved his mettle with Homoeopathic treatment to common man to VVIP's. He used his Homoeopathic Knowledge to get the recognition for Homoeopathy in the country in spite of stiff opposition from Allopathic brothers, Bureaucrats and some vested interest politicians. You will know his style of getting the works done for the cause of Homoeopathy when you go through his Auto Biography.

Govt. Committees for the development of Homoeopathy in the country. Notable among them were the Pharmacopoeia Committee, Education Committee, Research Committee, Rural Homoeopathic Medical Aid Committee, Drugs and Technical Advisory Board, Family Planning Committee, primary Health Centres and CGHS Homoeopathic Dispensaries. His major initiative to provide Homoeopathic treatment to Central Govt. Employees and other beneficiaries through CGHS encountered stiff resistance from Secretary Health, DGHS and Director CGHS. The proposal was pending with Health Ministry for over 3 years with out any decision. Fortunately for him when he had successfully treated Dr. Sushila Nayar the Health Minister in the year 1965 She ordered the DGHS to open a CGHS Homoeopathic Dispensary in Delhi. The first ever CGHS Homoeopathic Dispensary was inaugurated by Dr. Chandrasekhar who succeeded Dr. Sushila Nayar in the Health Ministry. So the first CGHS Homoeopathic Dispensary was started in Gole Market in New Delhi. During his tenure as Advisor to Govt. 3 more CGHS Dispensaries were opened in Delhi and as on day every major city is having a CGHS Homoeopathic Dispensaries in the country. Homoeopathic Doctors working in CGHS and enjoying the status at par with their Allopathic counterparts should be grateful to this noble soul. National Institute of Homoeopathy is another brain child of Dr. K.G. Saxena. He persuaded Govt. to establish a higher Educational Institute on lines with All India Institute of Medical Sciences. With his efforts the NIH under Ministry of Health Family Welfare was established in Calcutta in the year 1975

Nanda the then Deputy Chairman of Planning Commission in the year 1952 for several times for inclusion of Homoeopathy in their planning of Medical relief. Though there was no allocation of funds for Homoeopathy in first five year plan, the second five year Plan Homoeopathy could get some allocation. Subsequently regular grants were allocated in various Plans. Dr. Saxena found a great support in Shri. Shriman Narain an influential member of Planning Commission in getting recognition for Homoeopathy by the Planning Commission.

Dr. K.G. Saxena was the Hon. Homoeopathic Physicians to several Presidents of India and he was also a personal Physician to their family members before and after their tenure in Rashtrapathi Bhawan. Even after relinquishing from various Govt. Committees he was rendering his services and advise to various Autonomous of Govt. for the development of Homoeopathy. He served as Hon. Homoeopathic Advisor to Govt. of India from 1962 to 1971 and performed yeomen service to uplift the Homoeopathic system of Medicine in India. In recognition of his outstanding contribution to Homoeopathy Govt. of India had honoured him with its highest civilian Award Padmashre on 26th January 1969. He was the first Homoeopathic doctor to receive this civilian award.

Dr. K.G. Saxena was a born leader and a great achiever. He had not left a single stone unturned to get the recognition for Homoeopathy. He had cornered the Govt. from all angles. To achieve his goal he started an Association named All India Institute of Homoeopathy in the year 1944 with Dr. J.N. Majumdar, Dr. B.K. Sarkar, Dr. L.D. Dhawale, Dr. M. Gururaju, Dr. Diwan Jaichand, Dr. J.N. Hazra, Dr. A.N. Mukherjee and others. The Institute was aimed at maintaining high standards in Homoeopathic education and research. Later the All India Institute was converted in to Indian Institute of Homoeopathic Physicians (IIHP) and got it registered under Society's registration act 1860. This Institute was formed keeping the interest of institutionally qualified Homoeopathic graduates, as there were number of Homoeopathic doctors practicing the system without any valid qualifications and they had become contenders for Govt. appointments. In the mean while some Homoeopathic Doctors consisting of qualified and unqualified people have started another organization at all India level and gave membership to all qualified and unqualified people. But IIHP stuck to its commitment for Institutionally qualified doctors. IIHP had established its branches all over India and institutionally qualified doctors from different states became the members of this Institute.

In the history of its 60 years existence, IIHP conducted 24 National Conferences as on 2016. These conferences are held in every two years in different states. IIHP is known for organizing quality seminars by inviting best resource persons from India and abroad. For IIHP Dr. Saxena is its vital force.

After achieving his goal for recognition and development of Homoeopathy in India, Dr. K.G. Saxena focused his attention on WHO and International arena as he found that the status of Homoeopathy in America and Europe was declining gradually due to jealous Allopathic Practitioners that down played Homoeopathy. Dr. Saxena always felt that a united fight for the recognition of Homoeopathy from all the countries would definitely help in achieving the goal. He had seen number of International Homoeopathic conferences taking place in various countries. He decided to attend the same and extend what ever help he could render. In the year 1965 he participated in an International Homoeopathic League Conference in London as a representative of Govt. of India. In 1969 again had attended another Conference abroad. In these two Conferences he told the delegates about the efforts he made to get Govt. recognition to Homoeopathy in India. His success stories inspired many delegates from other countries.

In the year 1967 an International Homoeopathic Congress was held under the banner of LMHI at New Delhi. Dr. K.G. Saxena personally requested Dr. Zakir Hussain the President of India to inaugurate this Convention. The International Congress awarded "President of Honour" to Dr. Saxena.

Dr. Zakir Hussain invited all the delegates to Rashtrapathi Bhawan. Such was the influence of Dr. Saxena in those days. In 1987 Dr. Saxena was specially invited to Washington DC USA to attend the LMHI Congress. Again in the year 1989 the International Congress held in Calcutta, presented him with "President of Honour" Award.

After relinquishing from various positions in Government due to his age, Dr. Saxena continued his ambition to develop Homoeopathy through Indian Institute of Homoeopathic Physicians (IIHP) for which he was the founder and mentor. In 1994 Dr. Harsh Vardhan the then Health Minister of Delhi State had made him the Advisor of Homoeopathy for Delhi administration to oversee the overall development of Homoeopathy in the capital city. Though he was reluctant to take up another assignment, yet he took up the assignment due to sheer love for Homoeopathy and his association with Dr. Harsh Vardhan.

Dr. K.G. Saxena was responsible in unveiling the statue of Dr. Samuel Hahnemann in the posh Defense Colony in South Delhi. Shri L.K. Advani ji the then Home Minister of India had unveiled the statue in the presence of Late Dr. K.G. Saxena whose name was also inscribed on the plaque of the statue. Dr. Saxena was a true philanthropist. He donated generously from his limited resources to set up a Homoeopathic Research unit in the Amarjyoti Research and Rehabilitation centre a NGO based in East Delhi to help children suffering from post-polio paralysis and neurological defects in the year 1994. He guided IIHP till his last breath and made the organization a powerful institute for graduate Homoeopathic Physicians.

Dr. K.G. Saxena passed away in New Delhi on 23rd October 2003 after a remarkable journey of 91 years. His extraordinary efforts in laying foundation of Homoeopathy in this country and helping the science to achieve its present status here and abroad constitute his magnificent legacy. He was a great nationalist and always stood by honest and truth.

The vision of this great missionary has yet to be completely seen through. It is now our responsibility to take forward his legacy and establish Homoeopathy as first line of treatment in the primary health care delivery system in the country and also make sustained efforts to unfold the full potential of Homoeopathy including secondary and tertiary health care. His prediction that one day India would be the nucleus and citadel for Homoeopathy had come true.

One day before he departed to for his heavenly abode he sent a message to his Homoeopathic fraternity through one of his close associate by pointing out the last sentences of the preface of his biography 'Struggle for Homoeopathy in India' where he mentioned – "I wish and pray Homoeopathy will serve suffering millions of India and the world"

Homesickness and Homeopathy

Dr. Rachna Srivastava M.D.(Hom.)
The Healthy Way Homeopathic Clinic
Indira Nagar, Lucknow - 226016



Image Credit: www.freepik.com

Homesickness is most prominent amongst the teenagers who leave their home for studies. It is very common among first-year students who never had any previous experience of staying away from home.

Though college life brings lot of dreams and expectations for the students, most of them soon start feeling homesick. The main reason for the development of such a feeling is change. Sometimes, students feel it when they change their college and join a new one. When students enter college, they leave behind the comfort that their home and parents provided them. In a place where everything is new, right from their room to the faces that they see in their surroundings, it is natural to feel lonely and isolated. They miss the support they received back at home from their family and friends and find it difficult to share their feelings.

Some people may only feel a little loneliness, sadness, or anxiety. Others may also suffer from physical symptoms. Physical symptoms range from constant or frequent crying, difficulty sleeping, and changes in appetite, to nausea, dizziness, stomachache or headache. Mental symptoms include depression, anxiety and lack of concentration. The feelings that are mostly identified with homesickness are nostalgia, grief, depression, anxiety, sadness, withdrawal, and adjustment disorders.

Most of the time, once the new surroundings and people become more familiar, feelings of homesickness go away. But sometimes the symptoms are overwhelming. Though homesickness is not a very serious issue

if not handled at the proper time, it can lead to dangerous circumstances. Students, who do not learn to deal with homesickness, may go into depression and sometimes may lean towards alcohol and drugs. In such severe cases, apart from counseling homeopathy can serve a big deal.

Homeopathic remedies: There are 52 remedies mentioned in Robin Murphy under the rubric MIND, Homesickness, nostalgia. Of these 7 are first-grade remedies namely: Bryonia, Capsicum, Carbo-animalis, Ignatia, Mag-mur, Merc-sol and Phos-acid. Some of the frequently used remedies are described as under.

Bryonia: Stupid, drowsy condition during fever, where the patient has the delusion that he is somewhere else and "wants to go home". When delirious, Bryonia patients will, in addition to talking of business, often express the wish to go home, even if they are already in their home. The origin of this delirious request is the feeling of security they enjoy when they are in their own place. Desires to leave home and talks about home.

Capsicum: Homesickness or nostalgia often prevents them from fully engaging in their daily lives. The classic symptom picture for this remedy is of low vitality. These people are fat, indolent, opposed to physical exertion, become more familiar, feelings of homesickness go away. But sometimes the symptoms are overwhelming. Though homesickness is not a very serious issue

averse to go outside of their routine, get homesick easily. General uncleanliness of body. Excessive peevishness; Homesickness with sleeplessness, red cheeks and disposition to suicide. Wants to be left alone. They have heat in the throat and fauces. They may also experience bursting headache; worse, coughing.

Carbo-animalis: 'Feels as though abandoned and full of homesickness in the morning' (Hahnemann). They feel the homesickness especially in the morning, while Hepar feel it the most in the evening. Carbo animalis patients are always wondering how their parents were doing. They are thinking about how beautiful their childhood was together with their parents and their siblings in the village. It is a romantic way to think of the past. Carbo animalis weeps because of this homesickness. In the rubric "weeping while eating" (p93), there is only one remedy; Carbo animalis. Pain in the heels; homesickness; and the desire for vegetables, these symptoms indicate it.

Clematis: People for whom Clematis is best suited tend to be peevish, dissatisfied, and prone to melancholy or homesickness. Despite apathy toward friends, they generally fear being alone. They often feel confused in stuffy rooms, and improve in open air. The right side of the body is usually particularly affected. Clematis may also be given for a toothache that is worse for hot drinks, better for the cold. In general, there is an aggravation at night; for cold air; for bathing in cold water; for the heat of the bed; for touch; for movement; during a new moon.

Helleborus: Helleborus is prescribed for mental states that feature sluggishness and stupefaction. It is best suited to those who feel stupefied and have slow mental processes. They commonly experience anguish, irritability, apathy, and depression. These people frequently feel as though their brains are in turmoil, and do not understand what is going on around them. Although they may beg for help, they are generally inconsolable. Physical symptoms generally worsen between 4 p.m. and 8 p.m., and improve in warmth and when lying covered up.

Ignatia: Ignatia is used to treat the initial impact of grief, esp. in women. Fainting, crying and laughing simultaneously, or hysterical behavior due to an inability to express emotions. Prone to mood swings and feelings of self-pity, often laughing and crying at the same time. Suppressing their emotions can lead to hysteria. Contradictory physical symptoms are typically treated with Ignatia, such as indigestion that is relieved by eating, or a sore throat that is better for swallowing solid food. There is often great sensitivity to pain, with a tendency to yawn and sigh frequently.

Magnesium Mur: Mag. mur is most suitable for people who feel deep distress on witnessing arguments and crave peace and harmony. Reserved, sad, and self-pitying, they often show a long-suffering face to the world. Nervous oversensitivity is typical, with restlessness in bed: they find it hard to sleep well, waking unrefreshed and needing a long time to recover each morning.

Digestive complaints such as nausea, indigestion, and constipation are all strongly associated with the remedy. In general, there is an aggravation at night; for noise; for touch; for lying on the right side of the body; for swimming in the sea; for eating, especially salt; and for milk.

Merc sol: People who benefit most from Merc sol are anxious and restless. In trying to restrain an inner sense of urgency, they become insecure, introverted, and suspicious, appearing detached and even arrogant in their dealings with people. They bottle up feelings of conflict until they explode in a blind rage. Illness may bring on confusion, a weak memory, hesitant speech, and weepiness. Constant hunger is typical, with cravings for bread, butter, and cold drinks such as milk or beer, but aversions to other alcoholic drinks, coffee, meat, and sweet foods. Typical physical symptoms include abscesses, ulcers, fever, swollen glands, and copious sweating. Bodily discharges, such as sweat, saliva, urine, and stools, are often foul-smelling. Symptoms are worse at night, and are aggravated by extremes of heat or cold.

Natrum Mur: Nat Mur is most suitable for sensitive people who are easily wounded by criticism. They keep a tight rein on emotions, but this can lead to moodiness and self-absorption. Despite a desire for company, they feel awkward in social situations and isolate themselves to avoid being hurt. Therefore, easily feel homesick when they leave their well-known environment. Inhibition and self-awareness may restrict them: for instance, they may be unable to urinate in a public toilet. Suppressing strong emotions such as depression, anxiety, or grief is often a cause of illness.

Phosphoric acid: Phosphoric acid is especially suited to mild, calm, gentle people who tend to be sensitive and emotionally dependent on others. Phosphoric acid is used in the treatment of grief associated with great exhaustion. They can be full of sadness when alone. When in grief, they are unable to respond. They become very weak physically and only want to lie down. Apathy, lethargy, and total indifference, brought on by emotional trauma. They become dead emotionally. They can also suffer from chronic diarrhoea.

Senecio: Usually indicated in young girls. Senecio is best suited to those who are restless, nervous, low-spirited, and unable to concentrate. Delayed or absent menstruation, accompanied by a thick vaginal discharge, appetite loss, excitability, and insomnia may also respond well to the remedy. The remedy is typically prescribed for hemorrhaging in the mucous membranes. Symptoms are better for menstruation, and worse for dampness; for cold air; for sitting; during puberty; for sexual excitement.

Bach Flower Remedy: Honeysuckle: Lack of interest group. This is the essence for those who live in the past, attached to 'happier times'. Whatever they feel they have lost, be it through bereavement, divorce, loss of material possessions etc. it keeps them locked in the past. They do not expect further happiness such as they have had. Taking honeysuckle will help deal with this grief and help them to happily live in the present.

HOW TO IMPROVE MOOD DISORDERS WITH HOMOEOPATHY

Dr. Rakhi

Assistant Professor, Department of Physiology including
Biochemistry, Homoeopathic Medical College and Hospital Chandigarh, Punjab
University, India
dr.rakhimalik94@gmail.com

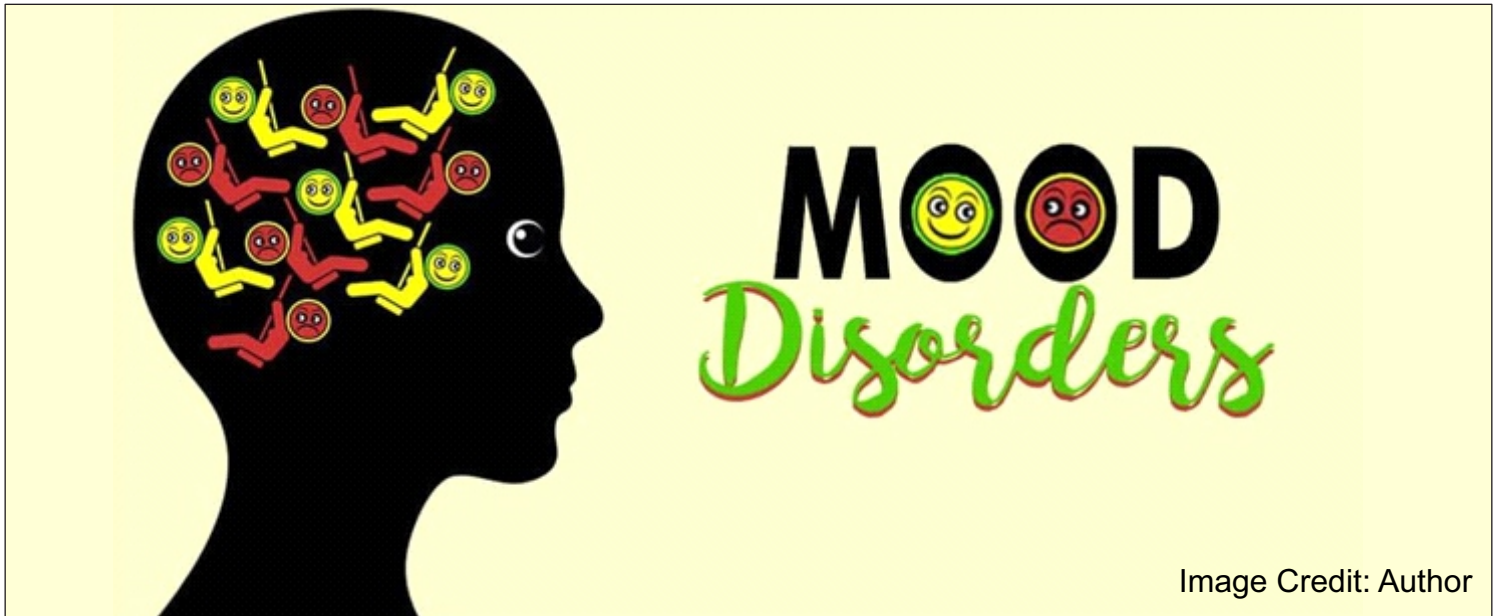


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“Many so-called disorders of the mind are simply disorders of thought.”

— Vironika Tugaleva

ABSTRACT

According to Diagnostic and Statistical Manual (DSM-IV-TR) Mood disorder is a broad category of mental health illnesses that describe all types of depression, mania and bipolar disorders. Mood can be normal, cheerful, depressed, irritable, anxious etc and in context of psychiatric illness the term mood is describe as Emotions and Feelings. It is a type of mental health disorder that primarily disturb emotional state of a person by persistent sadness, elation or anger and affect physical, perceptual, social, and mental thought processes. It is common in all age groups like children, teens, and adults. However children and teens don't always have the same symptoms as adults, even children aren't always able to express what they are feeling so it's harder to diagnose mood disorders in them. Mood disorders are the common psychiatric illness with biological origin and they can controlled with conventional medicines and treated with Homoeopathic treatment following by psychotherapy. In this article, we discussed the effectiveness of Homoeopathic treatment to improve mood disorders along with self care, mental support and psychotherapies.

KEYWORDS

Mood disorders, Homoeopathic Treatment, Psychotherapies.

INTRODUCTION

The term Mood is commonly used to mean Frame of Mind, Temper etc and in mood disorders, the fundamental disturbance is change in feeling, emotions or affect. A mood disorders refer to a group of diagnosis which primarily disturb the emotional state of a person. It's a disorder in which a person experience long periods of extreme cheerfulness, extreme sadness or both. Certain mood disorders involve persistent emotions, such as irritability and anger. It's normal to change in mood according to the situation. However, for a mood disorder diagnosis, symptoms must be present for several weeks or longer. Mood disorders can cause changes in person's behavior and can affect their pervasive or socio-occupational functioning. Mood disorders can affect anyone, including and relatively common in children and adults, with depression, mania and bipolar disorder being the most common. Approximately 15% have any type of mood disorder & 7% of adults in the United States have depression, while about 2.8% have bipolar disorder.

Mood disorders are manifestation of a group of disorder and to treat the manifestation it is necessary to find the cause.

Homeopathy offers very good treatment possibilities for all types of mood disorders with marked prognosis. There are a lot of medicines which can be used to treat mood disorders and the selection of medicine depends not only on the symptoms but also on underlying causes. The success of treatment in such cases often depends on the art of a homeopath to find out the cause and the selection of medicine depends on proper case taking of patient. Like all other health diseases psychological disorders, depressive illness also requires complete case taking and continuous monitoring. Homoeopathic Treatment cured the patient as a whole along with Psychotherapies and needed mental & physical support to the patient.

CAUSES

- Mood disorders are very common mental health burden globally and researchers believe several factors contribute to the development of mood disorders, including:
 - Genetic factors: Mood disorders are partly genetic/inherited. People with a strong family history of a mood disorder are more likely to develop these disorders.
 - Biological factors: Amygdala and orbitofrontal cortex are responsible for controlling feelings and emotions, people with mood disorders have been shown to have an enlarged amygdala on brain imaging tests.
 - Environmental factors: Stressful life, sudden loss such as the death of a loved one; childhood abuse chronic stress and traumatic events; are major risk factors for the development of a mood disorder later on in life, especially depression. Depression has also been linked to systemic illnesses, such as diabetes, heart disease and 'Parkinsons disease .

CLASSIFICATION

- According to International Classification of Diseases (ICD - 10) mood disorders are classified under section F30 – 39. The most common mood disorders are depression, mania and bipolar disorder. Mood disorders also include as:
 - Manic Episode
 - Depression & its subtypes.
 - Bipolar Affective disorder & its subtypes.
 - Disruptive mood dysregulation & Premenstrual dysphoric disorder.

Depression

It is a common mental health ailment, Depressive patient may suffer with symptoms of feeling hopeless or sad with difficulty of thinking, eating ,memory and sleeping. Depressive disorder can be mild, moderate & severe, for a diagnosis of clinical depression, symptoms must last for at least 2 – 3 weeks.

There are other different types of depression :

- **Persistent depressive disorder:** This is a chronic type of depression that must last for at least two years. It's less severe than major depressive disorder, but it's ongoing.
- **Seasonal affective disorder:** This is a type of depression which occurs during certain seasons of the year. It typically starts in the late autumn or early winter and lasts until spring or summer. Symptoms of winter seasonal affective disorder may resemble those of major depression. They tend to disappear or during spring and summer.
- **Postpartum depression/ Peripartum depression:** This is a type of depression that only occurs during pregnancy or after the end of a pregnancy in women and people assigned female at birth. They experience hormonal, physical, emotional, financial and social changes after having a baby & these changes cause symptoms of postpartum depression.
- **Depression with psychosis:** This is a type of depression which combined with psychotic episodes, such as hallucinations or delusions. People who experience depression with psychosis have an increased thought about suicide.

Bipolar disorder

Bipolar disorder is a lifelong mood disorder and mental health condition that causes intense shifts in mood, energy levels, thinking patterns and behavior. There are a few types of bipolar disorder, which involve experiencing significant fluctuations in mood referred to as hypomanic/manic and depressive episodes.

There are four basic types of bipolar disorder, including:

- Bipolar I disorder
- Bipolar II disorder:
- Cyclothymia disorder or Other specified & unspecified bipolar disorders.

•Other mood disorders

- Premenstrual dysphoric disorder
- Disruptive mood dysregulation disorder

SYMPTOMS

According to International Classification of Diseases (ICD - 10), each mood disorder has different pattern of symptoms. Mood disorders typically have symptoms that affect your mood, sleep, eating behaviors, energy level and thinking abilities

- In general, depressive symptoms include:
 - Feeling sad most of the time or nearly every day and feeling a lack of energy.
 - Difficulty concentrating or focusing and Sleeping.

- Loss of appetite or overeating.
- Feeling worthless or hopeless.
- Loss of interest in activities that formerly brought enjoyment.
- Thoughts about death or suicide.

In general, symptoms of manic or hypomanic episodes include:

- Feeling extremely energized or elated.
- Insomnia or trouble sleeping & Racing thoughts.
- Risk-taking behavior, such as spending more money than usual or driving recklessly.
- Rapid speech or movement.
- Agitation, restlessness or irritability.

DIAGNOSIS AND TESTS

According to Diagnostic and Statistical Manual (DSM-IV-TR) Mood disorder is a group of mental health illnesses that describe all types of depression, mania and bipolar disorders. If you or your child are experiencing symptoms of a mood disorder, a clinician may ask about time duration of symptoms, perform a physical examination to rule out physiological causes for symptoms, such as thyroid disease, other systemic illnesses or a nutritional deficiency. He will ask about your medical history, any medications you're taking and whether you or any family history with a mood disorder. They may refer you to a psychiatrist or psychologist also. A mental health professional, like as a psychiatrist or psychologist, will conduct an interview, asking questions about your symptoms, sleeping and eating habits and other behaviors. They use criteria in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders to make diagnoses of mood disorders.

Generally, a mood disorder is diagnosed when sadness, elation, anger or other emotion is excessive intense and persistent. Significantly impairs the person's capacity to function and accompanied by other mood disorder symptoms, such as sleep changes or activity level changes.

TREATMENT & MANAGEMENT

• Treatment for mood disorders depends on the specific condition and presenting symptoms. Usually, treatment involves Homeopathic medicines, combination of conventional medication, psychotherapy and brain stimulation therapy. Treatment consist of two parts

- Medicinal treatment
 - Homeopathic Treatment
 - Conventional Treatment

- Therapies

Medicines include in Conventional Treatment-Antidepressant

- Mood stabilizers
- Anticonvulsants
- Antipsychotics
- **Therapy includes-**
- Behaviour therapy
- Interpersonal therapy
- Cognitive behaviour therapy

HOMOEOPATHIC TREATMENT

Homoeopathy offers very good treatment possibilities for mood disorders with good results. There are large numbers of medicines which can be used to improve mood disorders and the selection of medicine depends not just on the symptoms but also on the cause. Mood disorders are manifestation of various disorder and to treat the manifestation it is necessary to find the cause. The success of treatment in such cases often depends on the ability of a homeopath to find out the underlying cause. The selection of medicines depends a lot on it, like all psychological disorders, depressive illness also requires detailed case study and continuous monitoring by a competent homoeopath. One should not try any form of self-medication. Always consult to a qualified and experienced homoeopathic physician to get complete cure and good prognosis in these conditions.

Some of the commonly indicated medicines are Ginkgo Biloba, Withania Somnifera, Aconite, Coffea Cruda, Anacardium, Arsenic-alb, Aurum-met, Natrum-mur, Sepia, Antim-crud, Naja, Nux-vom, Stann, Psorinum, Ignatia, Acid-phos, Kali brom, Pulsatilla, Staphysagria, Stramonium, Hyoscyamus and Bacopa Monnieri.

Ginkgo Biloba

It is an effective homoeopathic medicine that is widely recommended for many types of neurological problems such as depression, dementia, alzheimer's disease and ageing problems. Helps in concentrating and symptoms of autoimmune diseases. Treats multiple-sclerosis and reduces Platelet Activating Factors

Anacardium

It is a most suitable homeopathic medicine for mood disorder Fixed ideas. Hallucinations; thinks he is possessed of two persons or wills. Anxiety when walking, as if pursued. Brain-fag. Impaired memory. Absent mindedness. Profound melancholy and hypochondriasis, with tendency to use violent language. Very easily offended. Malicious; seems bent on wickedness. Clairvoyant, hears voices far away or of the dead. Lack of confidence in himself or others.

Ignatia

One of the best Homeopathic medicine for mood disorder that has Sensitiveness of feeling, delicate conscientiousness. The slightest contradiction irritates. Intolerance of noise. Taciturn, with continuous sad thoughts; still, serious melancholy, with moaning. Fearfulness, timidity. Irresoluteness; anxious; to do now

this, now that. Anger, followed by quiet grief and sorrow. Inclination to grief, without saying anything about it ; keeping it to inside of mind.

Arsenic album

Arsenic album is a effective homeopathic medicine for mood disorder There is a tendency to rush of blood to the head with these melancholic states. Tendency to self mutilation; feeling of worthlessness and despair; memory is weak; anger or dispute makes the patient furious. Fear of death, fear of being alone.

Belladonna

Derangement of the will faculty; amorous mania with sexual excitement. Wants to touch everything and everyone; irritable curses horrible; wants to drawn himself, or that somebody else should kill him; despondency and indifference. Senseless talk with staring; protruding eyes; merry craziness; gives offense without any cause.

Natrum Muriaticum

Depressed, particularly in chronic diseases. Awkward, hasty in nature, wants to be alone to cry. Apprehension for the future. Hypochondriacal, tired of life. Joyless, indifferent, taciturn. Hurriedness. Passionate vehemence ; gets angry at trifles. Difficulty of thinking ; absence of mind, weak memory. Psychic causes of disease; ill effects of grief, fright, anger, etc.

Hyoscyamus

It is a good remedy for the bad effects of extreme jealousy, fright, disappointed love, etc. Patient acts silly and idiotic; is lascivious and lewd. here is a condition of depression found under Hyoscyamus with debility and prostration.

Kali Brom

Homeopathic medicine for mood disorder that has profound, melancholic delusion; feeling of moral deficiency; religious depression; delusions of conspiracies against him. Fear of being poisoned. Horrid illusions, Amnesic aphasia; can pronounce any word told, but cannot speak otherwise. Active delirium & Night terrors.. Imagines he is singled out as an object of divine wrath. Loss of memory. Must do something-move about; gets fidgety.

Bacopa Monnieri

It is a great homoeopathic medicine that is used to enhance memory and concentration. It is used to improve overall brain activity and also relives throbbing pain in the head. It improves intelligence and reduces stress. It helps in enhancing fertility in women and also helps with depressive symptoms.

Psychotherapy for mood disorders

Psychotherapy is a term for a variety of treatment techniques like as Psychoeducation, Counseling, Supportive Psychotherapy and Interpersonal Social Rhythm Therapy that aim to help a person identify and change unhealthy emotions, thoughts and behaviors and psychotherapy done with a trained, licensed mental health professional, such as a psychologist or psychiatrist. These can provide support, guidance and education to patient and/or their family to help in improving of quality of life.

Some of the more common types of psychotherapy include:

Psychodynamic therapy: This type of therapy is based on the idea that behavior and mental well-being are influenced by childhood experiences and problematic persistent repetitive thoughts or feelings that are outside of your awareness (unconscious).

Dialectical behavior therapy (DBT): DBT is a type of Psychotherapy that's based on cognitive behavioral therapy and it's specially adapted for people who experience emotions very intensely.

Cognitive behavioral therapy (CBT): This is a structured, goal-oriented type of psychotherapy. Psychiatrist or Psychologist use it to treat or manage mental health conditions and emotional disturbance.

Other treatments for mood disorders

Other treatments for mood disorders include:

- Electroconvulsive therapy (ECT)
- Transcranial magnetic stimulation (TMS)
- Light therapy

COMPLICATIONS

Depression and bipolar disorder may recur (come back after initial treatment) or be ongoing and, therefore, may require long-term or lifetime treatment. About one-third of people with a mood disorder develop psychotic disorders, and another one-third develop a lifetime anxiety disorder. Children and adults with a mood disorder have an increased risk of suicidal behavior. People with mood disorders also have an increased risk of the following:

- Disability ranging from mild to complete inability to care for oneself and maintain social interactions.
- Suicide, Behavioral disorders, Schizophrenia, Psychotic disorder & Alcohol use disorder, Substance use disorder & Neurotic group of disorder.

CONCLUSION

It's important to remember that Homoeopathy gives great importance to mental health illnesses. The

homeopathic understanding of health is intimately connected to its understanding of the mind. It assumes that body and mind are dynamically interconnected and that both directly influence each other. Homeopathy works very effectively on mood disorders & gives satisfactory results. At this time, there's no known way to avoid mood disorders but mood disorders can be preventable, treatable and curable by awareness, Psychoeducation, Counseling, early diagnosis, Supportive Psychotherapy and Interpersonal Social Rhythm Therapies along with proper Homoeopathic treatment.

REFERENCE

- A short Textbook of Psychiatry, Niraj Ahuja, 4th ed, 1999, Jaypee
- A Concise Repertory of Homeopathic Medicines, S.R.Phatak, 3rd ed, B. Jain
- Carson, R.C., Butcher, J.N. & Mineka Susan (2000). Abnormal Psychology and Modern Life. Allyn and Bacon
- Davison, Gerald C. & Neale, J.M (2004). Abnormal Psychology (8th Ed.) John Wiley & Sons Inc, USA
- Davidson's Principles and Practice of Medicine, 17th ed, 1996, Churchill Livingstone

Harrison's Principles of Internal Medicine, 14th ed, McGraw-Hill

- Image- <https://mind.help/topic/mood-disorders/>
- Merck Manual: Professional Version. Overview of Mood Disorders. (<https://www.merckmanuals.com/professional/psychiatric-disorders/mood-disorders/overview-of-mood-disorders>)
- National Institute of Mental Health. Bipolar Disorder. (<https://www.nimh.nih.gov/health/topics/bipolar-disorder/index.shtml>)
- New Manual of Homeopathic Materia Medica & Repertory, William Boericke, 2nd revised ed., 2001, B. Jain
- Practical Homeopathic Therapeutics, Dewey, reprint ed, 1993, B. Jain
- Sekhon, S, Gupta, V. Mood Disorder. (<https://www.ncbi.nlm.nih.gov/books/NBK558911/>) [Updated 2022 May 8]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls.
- Sadock BJ, Sadock VA (2007): Kaplan & Sadock's Synopsis of Psychiatry : Behavioural Sciences / Clinical Psychiatry, 10th Edition, Lippincott Williams & Wilkins.

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IIHP for Homoeopathy

“Knowledge, Attitude and Practice of Medical Ethics and Medico-legal Issues (MLCs) by clinicians: A cross-sectional study at a tertiary healthcare centre”

(Second Author)

Dr. Tej B. Chhetri,

Assistant Professor cum HOD, Department of Forensic Medicine, Dr. Vasantrao Pawar Medical College, Hospital & Research Centre, Nashik, India.

(First Author)

Prof. Dr. Sunil Raghunath Patil

M.D. (Hom), Ph.D.(Scholar)

Associate Professor in Anatomy.

Government Homoeopathic Medical

College & Hospital Jalgaon, Maharashtra



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Abstract:

Background: Medicine is a noble profession, but there is also growing anxiety both within the profession and in the community regarding increasing trends of complaints and lawsuit against clinicians. A clinician/physician must uphold dignity and honour of his profession. Knowledge about medical ethics and medico-legal issue is as fundamental to the practice of medicine as clinical skills. The trainee period is an important time for fostering ethical reasoning in clinicians. Health care providers are at high risk for litigations. Being aware about medico-legal aspects, performing the duties ethically can be a safe side for oneself against risks of litigations.

Objective: To assess Medico- legal knowledge, ethics, attitude and awareness in interns, postgraduate student's and Casualty Medical Officers (CMOs).

Material and Methods: Institutional Cross-sectional study was conducted, using questionnaire based study among the practicing, CMOs, PG residents and interns in a tertiary care centre in Nashik.

Result: Total 120 participants were included in our study. We found that 108 (90%) intern, 7 (5.83) and 5 (4.17%) post graduate students had no proper knowledge in handling medico legal cases independently. (45%) participants were of opinion that the present current overall knowledge of medico legal cases is appropriate not sufficient for them to tackle medico legal cases.

Conclusion: Large numbers of medical professionals were detected to have gap between their knowledge and practice. Most of the interns were unaware about medical legal issue such as incomplete reporting, did not know exactly how to deal with relatives, lack of knowledge how to handle document medico legal cases and therefore many of them were of opinion that Medico Legal aspects to be incorporate and make compulsory at every level with updating as a skill based practical knowledge.

Key words: -Medico legal cases, Knowledge, Ethics, Attitude and awareness Interns, Casualty Medical Officers (CMOs), PG residents

Introduction

A medical practitioner's primary responsibility is to save a patient's life. At the same time, bound by ethical and legal obligations, he needs to abide by the laws of the land while discharging his duties. Health care decisions should be based on clinical, technical and ethical grounds [2]. It is essential for the attending doctors to maintain a proper medical record of the patient, especially in 'medico-legal' cases in accordance with the law of land [1]. Forensic practitioners have the necessary expertise in the area of documentation, description, analysis of the degree of causation, the timing of assault, identifying the causative agent/instrument and the manner of infliction. But, it is difficult to have a forensic doctor present at every hour in a hospital or clinic to address the medico-legal cases. This responsibility of recognizing such medico-legal issues then lies with the attending physicians. Patient information confidentiality should be strictly adhered to while conducting history and examination [3]. With an increase in the awareness about medical negligence in India, hospital managements are now frequently facing complaints against the facilities, standards of professional competence, and the appropriateness of their therapeutic and diagnostic methods. Since the Consumer Protection Act, 1986 has come into force, some patients have filed legal cases against doctors and have established that the doctors were negligent in their medical service [4]. Since an expert opinion is required from doctors in medico-legal issues in the court, it is important for them to have sufficient knowledge [5]. It is necessary that doctors be aware of the legal aspects to their profession and take the needful measures to protect themselves and their patients from legal traps. Knowledge, medical ethics and attitude and medico legal issues are as fundamental to the practice of medicine as clinical skills [6]. The increasing trends of medico-legal issues encountered at trauma centres or casualty emphasize the need to have physicians who are equipped to deal with such situations. It's well known that in an era of escalating crime, litigation and gap in doctor-patient relationship, ignorance of law would lead to pitfalls in practice [7]. This study was filled the gaps in the available literature on the prevalence of knowledge, attitude and practice among clinicians (medical officers, PG residents and interns) involving medico-legal issues.

Methodology:

This study was a cross-sectional, institutional, questionnaire based study among the practicing medical officers, PG residents and interns in a tertiary care centre in Nasik District of India. The duration of this study was 6 months from May 2021 to Nov 2021. The sample size of the participants included all the target population actively engaged in the hospital during this

period. A complete enumeration method was used to select the sample population by using the records from the attendance register kept in the casualty and the respective clinical departments. An informed consent was taken from the participants in the beginning of the study before the distribution of the questionnaire. The questionnaires were distributed via Google Forms to the participants. A structured, close-ended, rating scale (Liker model), pre-designed, pre-validated and standardized questionnaire was used to collect the data from the sample population.

Inclusion Criteria

- All the participants who were either casualty medical officers, post graduate residents and interns were included in the study

Exclusion Criteria

- All those who would not like to be a part of this study
- Any participants who have been on a long term leave during the study were not included.

Results

Table 1- The socio demographic characteristics of the participants are summarized

Socio demographic Character		Frequency (n)
Gender n=(120)	Male	55 (45.83%)
	Female	65 (54.17%)
Medical Professionals n=(120)	Interns	108 (90%)
	Casualty Medical Officers CMO	7 (5.83%)
	Post Graduate (PG)	5 (4.17%)

Total 120 medical professionals completed Google questionnaire which resulted in a response rate of 100%. Among the respondents, majority are females n= 65 (54.17%). The majority of participants are interns n=108 (90%).

Table 2- Attitude of Casualty medical officer, Post Graduate students and Interns on Medico-legal problems encountered in their current workplace

Sr.no	MEDICO-LEGAL PROBLEMS	Always %	Often %	Sometimes %	Rarely %	Never %
1	Instruments (camera) and requirements needed for photographic documentation are available and used when required:	50	40.8	6.2	3	00
2	Specified protocol about collecting evidence from a medico-legal case (clothes, swabs, bullet, remnants of foreign bodies, etc.) is followed:	67.5	24.2	6.3	2	00
3	There is availability of sexual assault kits for evidence collection which is utilized when required:	40.8	31.7	20	6.5	1

The majority of 50 % Medical Professionals always want to Instruments (camera) and requirements needed for photographic documentation are available and used when required. Out of 120, 75.5% always and 24.2% required Specified protocol about collecting evidence from a medico-legal case (clothes, swabs, bullet, remnants of foreign bodies, etc.) is followed. Among the total 40.8% always with there is availability of sexual assault kits for evidence collection which is utilized when required. (Table-2)

Table 3- Attitude and Knowledge of Casualty medical officer, Post Graduate students and Interns on Medico-legal problems encountered in their current workplace

SR. NO		STRONGLY AGREE	AGREE	UNDECIDED	DISAGREE	STRONGLY DISAGREE
4	A training program brochure is provided for evidence collection in Medical departments	34.2	48.3	11.7	3.8	2
5	The workplace is equipped with a well- organized chain of custody for evidence collection until delivery to police authority:	41.7	46.7	8.3	2	1.3
6	You have a keen interest in the regularly organized training program such as writing medico-legal reports in ER	31.7	49.2	15.8	3.3	00
7	Is the current overall knowledge of medico legal cases appropriate?	7.7	1.5	22.5	23.3	45
8	More training programs on management of medico-legal cases at medical practice will be beneficial:	51.7	44.2	3.8	0.7	0.3
9	It is important for clinicians to observe punctuality during their working hours in the healthcare facility.	55	40	5	5	00
10	Patient privacy and confidentiality is of utmost importance while dealing with a medico-legal case in the workplace	75.8	19.2	5	00	00

Out of 48.3 % agree and 34.2 strongly agree to “A training program brochure is provided for evidence collection in Medical departments”. Among participants 41.7 % agree and 47.7% strongly agree that “The workplace is equipped with a well- organized chain of custody for evidence collection until delivery to police authority:” among 49.2 % agree that “You have a keen interest in the regularly organized training program such as writing medico-legal reports in ER”. Majority of participants 45% disagree that “Is the current overall knowledge of medico legal cases appropriate?”

In the present study 51.7% participants strongly agree that “More training programs on management of medico-legal cases at medical practice will be beneficial:” Among all doctors 55% strongly agree that “It is important for clinicians to observe punctuality during their working hours in the healthcare facility.” 75.8% participants are strongly agreed that “Patient privacy and confidentiality is of utmost importance while dealing with a medico-legal case in the workplace” (Table 3)

Table 4- Knowledge of medico- legal problems of Casualty medical officer, Post Graduate students and Interns on Medico-legal problems encountered in their current workplace

SR. NO	MEDICO LEGAL PROBLEM	Strongly agree %	Agree %	Undecided %	Disagree %	Strongly disagree %
1	The current knowledge of Forensic Medicine and Toxicology is enough for a clinician to deal with any medico-legal issues in the hospital.	25	46.7	18.3	8	2
2	Only 5 years keep the records of a patient if it is a medico-legal case?	2	3.9	17.5	28.3	48.3
3	Informed consent from the victim or relatives is crucial before photographic documentation in medico-legal cases	45	45	6	2	2
4	Photography for evidence collection by medical staff can have a role or usefulness in managing physical and sexual assault victims before referral to forensic Medicine expert.	46.7	42.5	9.2	0.8	0.8
5	Photographic documentation could protect the medical staff from remote legal consequences	42.5	50	7	0.5	00
6	Should you at least on one occasion attend a coroner's inquest or magistrate court or a district court in a medico- legal case to gain experience?	40.8	42.5	16.7	00	00
7	In case of criminal suspicion of living or dead victims, the physician must notify the police authority immediately through an official procedure:	49.2	49.2	1.6	00	00
8	The workplace should provide a unified protocol about management of sexual abuse and physical abuse cases	52.5	45	00	2.5	00
9	In the same context, should you notify the relatives about your suspicion prior police notification	22.5	46.7	11.7	8.1	11
10	Do you think that proper documentation for each medico- legal case including (full description of wound, Measurement, timing of injury and photography	24.2	42.5	20	8	5.3

All of this medical staff 46.7% were agree that “The current knowledge of Forensic Medicine and Toxicology is enough for a clinician to deal with any medico-legal issues in the hospital.” Out of which 48.3% medical doctors strongly disagree for Only 5 years keep the records of a patient if it is a medico-legal case, 45% participants strongly agree and agree that “Informed consent from the victim or relatives is crucial before photographic documentation in medico - legal cases.” 46.7% strongly agree that “Photography for evidence collection by medical staff can have a role or usefulness in managing physical and sexual assault victims.” 42.5 % strongly agree and 50% agree that “Photographic documentation could protect the medical staff from remote legal consequences.”

Majority of the participants are 42.5% agree and 40.8% strongly agree that “Should you at least on one occasion attend a coroner's inquest or magistrate court or a district court in a medico- legal case to gain experience”. All of this 49.2% strongly agree and agree that “In case

of criminal suspicion of living or dead victims, the physician must notify the police authority immediately through an official procedure". Out of 120 participants 52.5% strongly agree that "The workplace should provide a unified protocol about management of sexual abuse and physical abuse cases." In the same context, should you notify the relatives about your suspicion prior police notification? 46.7 participants were agreeing for this statement. 42.5 agree that "do you think that proper documentation for each medico- legal case including (full description of wound, Measurement, timing of injury and photography". (Table No.4)

Discussion

In accordance with the law of the land, by law enforcement agencies is essential to establish and fix responsibility for a MLCs of an injury/illness, eliciting history and examining the patient where the attending doctor thinks that some investigation in the case is required [1]. Due to questions by police personnel, harassment by the lawyers, attending the court, and unwarranted laws and regulations, many doctors are apprehensive in handling such MLC because of fear [8]. The immediate issue is concern to all medical fraternity is that there are more cases against doctors with an increase in awareness among public on subject of ethical conduct of medical practitioners with the increase in use of internet and social media. Hence all medical practitioners must be aware of their clinical practice & legal and ethical implications.

Therefore we have carried out a study to determine the Practice of Medical Ethics and Medico-legal issues, Attitude and Knowledge by clinicians: A cross-sectional study at a tertiary healthcare centre. In our study of 108 (90%) interns, 7 (5.83%) CMO and 5 (4.17%) PG students we noticed that PG students were more aware about MLCs than that of interns may be because they are exposed to more MLCs during their post-graduation. This is in accordance with the study by Dash S.K. in 2010 [9]

Most of interns (48.3 %) agree and 34.2% strongly agree that a training program brochure is provided for evidence collection in medical department's workplace and along with 49.2% health professional agree that

writing medico-legal reports in emergency room (ER). But 49.2% of health professional participants strongly agree that in case of criminal suspicion of living or dead victims, the physician must notify the police authority immediately through an official procedure: or Informed consent from the victim or relatives is crucial before photographic documentation in medico legal cases. Some emergency physicians have found to be compatible with collecting physical evidences from a suspected criminal act, whereas others of a view that this practice as incompatible with the best interests of their patients.[10]

While dealing with a medico-legal case in the workplace, patient privacy and confidentiality is of utmost importance. Between the doctor and his patient a confidentiality term contract is implied [11]. In the course of his professional work the doctor is obliged to keep secret, everything he comes to know concerning the patient. There are situations where doctors of a treating team must know all details about the patient even if it is about HIV or Hepatitis [12]. For legal consequences of the medical staff from remote photographic documentation could protect. A Physicians or a treating clinician should act respectfully with patient consent in condition where collecting evidence, including photographing and recording, is part of treatment of victims. [13] Few studies on health care workers thought that managing of forensic cases was problematic due to the aggressiveness of the patients' relatives. All intern students received training in ER during their internship as per their curriculum. However, their practical approach of forensic cases was inadequate as only 14.5% of them had been previously involved in photographic documentation. [14]

All the health professionals' (67.7%) strongly agree that specified protocol about collecting evidence from a medico-legal case (clothes, swabs, bullet, remnants of foreign bodies, etc.) is followed. Regarding knowledge of Clinical Forensic Medicine, as very few were familiar collection of evidences in sexual assault cases. We also observed that very few interns and postgraduates knew exactly about the details about injury certificate. Medical council of India (MCI) has recommended that it is desirable and compulsory for MBBS graduates and post graduates to know about reporting of injury, collection of biological material and all aspects of medico-legal cases. [1, 15]

Most of the Interns and PG students were well aware about written informed and valid consent but less was aware about medico legal record keeping in hospital. Most of them were of opinion that there is no specified time limit after which the Medico Legal reports can be destroyed; hence, they have to be preserved. In view of the multitude of cases against the doctors under the Consumer Protection Act, it is advisable to preserve all the inpatient records for a period of at least 5 years and outpatient department records for 3 years [1]. This was known to fewer participants. These finding are similar to study conducted by Rai JJ, et al among interns and postgraduates about medical law and negligence in Vadodara in 2016 [16]. Written records, which include medical history, chart notes, radiographs, and photographs, must be meticulous, and it is necessary for the documents to be signed and dated with time. Legally, physician written records carry more weight than patient's recollections [17]. In our study 48.3% strongly disagree and 28.3% disagree only 5 years keep the records of a patient if it is a medico-legal case because record keeping and maintenance that records of medico-legal cases must be maintained till the judgment of the case.

Conclusion

Knowledge, Attitude and Practice of Medical Ethics and Medico-legal Issues by clinicians study was prepared for future practice and good knowledge and positive attitude to the medico legal problems. Large number of interns were detected gap between their knowledge and practice. Interns were unaware about medical legal issue such as incomplete reporting, they did not know exactly how to deal with relatives, lack of knowledge how to handle document medico legal cases and did not distinguish the necessity of taking informed consent from patients or their families. Therefore we recommended that unavoidable rotatory posting in Forensic Medicine Department should be introduced in their training period to increase the awareness and knowledge about Medico Legal issues. Should try to organise seminars, case discussions, MLCs Simulation programme and CME's for interns and post graduates to increase awareness and to update them about Medico Legal issues in medical practice.

References.

1. Meera T. Medico legal cases: What every doctor should know. J Med Soc N J. 2016;30 (3):133.
2. Organization WH, Others. Module for teaching medical ethics to undergraduates [Internet]. WHO Regional Office for South-East Asia; 2009. Available from: <https://apps.who.int/iris/handle/10665/205534>
3. Zaki MK, Estanboli HM, Alduhailib H, Bossi AA, Sultan I. Final year medical students' knowledge, attitude and practice of medico-legal problems: a cross sectional study at IBN Sina National College in Jeddah. International Journal of Pharma and Bio Sciences [Internet]. 2019;9(2). Available from: <http://dx.doi.org/10.22376/ijpbs/lpr.2019.9.2.p16-23>
4. Gutorova N, Zhytnyi O, Kahanovska T. Medical negligence subject to criminal law. Wiad Lek. 2019; 72(11 CZ 1):2161–6.
5. Rao GV, Hari N. Medico-legal knowledge assessment of interns and post graduate students in a medical institution. IAIM (International Archives of Integrated Medicine). 2016;3(10):105–10.
6. Tabitha Elizabeth Thomas¹ MJ. Awareness of Medico-Legal Issues among Medical College Health Professionals. MLU. 2020 Apr 9;20 (1):505–9.
7. Ropmay A.D., Bhattacharyya H, Slong D., Marak A.R. A study to Evaluate Knowledge of Handling Medico-Legal Cases among Interns in a Teaching Institution. Indian Journal of Forensic Medicine and Pathology. 2018;11(2):65–69.
8. Siddaaramanna, T. C., Dileep Kumar R., Yogesh C, Study of Awareness of Medico legal Aspects Among Medical Professional. Indian Journal of Forensic Medicine & Toxicology. Jan-Jun 2016, 10(1); 18-20.
9. Dash S. K. Medical Ethics, duties and medical negligence awareness among the practitioners in a Teaching Medical College, Hospital- A Survey. J. Indian Acad Forensic Med. 2010; 32(2):153-6

The Classical Homeopathic lectures of Dr. Vassilis Ghegas

Dr. Vassilis Ghegas

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Translation & Production: Dr. Fons Vanden Berghe

Rene Otter, Lutra Services, The Netherlands

rcotter@planet.nl



Photo credit to Freepik

This series of volumes is the best written course on Classical Homeopathy that is available, both for the beginning and the experienced Homeopath; reason enough to buy the complete series.

George Vithoulkas: "As far as I have seen, Vassilis has given a correct presentation of what I have taught him over the years. I think he has produced a very well done and informative series of books which will be of great help to the homeopathic community.

Roger Morrison: "Vassilis Ghegas is one of the foremost homeopaths in the world. His teaching is direct and always based on the fact and experience – never theory or conjecture. These books contain thousands of the most useful pearls of knowledge of homeopathy. All practitioners and serious students of homeopathy should study these books."

Dr. Vassilis Ghegas M.D. was born in 1948 in Greece. During his medical studies, he came into contact with George Vithoulkas, who aroused his interest in classical homeopathy. After obtaining his doctor's degree he started a specialization, but after some time he left the hospital to study homeopathy with George Vithoulkas at the Athens School of Homeopathy. Vassilis Ghegas was one of the first and best students in the Athens School, while playing an active role in its organization.

He treated his patients almost exclusively with homeopathy since 1974, first in his teacher's center and then in his own practice. After more than 40 years of practice and 20 years of teaching, Vassilis Ghegas is now retired.

As mentioned by Dr. Fons Vanden Berghe in the general preface of the volumes: Vassilis Ghegas has given international seminars since 1984, first in London and later also in the Netherlands, Germany, Greece, Switzerland, the USA etc. From 1987 to 1992, he started a systematic course, organized by the School for Homeopathy in Bloemendaal, Netherlands. The course was continued from 1989 to 1992, but this time organized by Stichting Homeopathische Opleidingen (SHO) in Wageningen, Netherlands. From 1993 on he continued the seminar series in Enschede (Netherlands) and at other places. Every lecture of Dr. Vassilis Ghegas is highly recommended to be heard "live". All lectures complement each other. His style of teaching is very typical, humorous, and surprising, and his simple English is also easily understandable to non-native English-speaking homeopaths.

Dr. Fons Vanden Berghe was born on 4th April 1948 in Roeselare (Belgium). In 1985, after 8 years working in a conventional group practice, he followed a 3-year homeopathic training in the Athens School in Hechtel

(Belgium) under Dr. Alfons Geukens, one of the first and best students of Prof.

Vithoulkas. In 1988 he started his own training center in Genk (Belgium) where he trained 11 homeopaths including his two sons Tom and Koen. He gave many lectures and seminars at homeopathic schools in Belgium (V.S.U.) and the Netherlands (S.H.O.). He attended many seminars of George Vithoulkas and Vassilis Ghegas. In order not to lose the information taught by Vassilis Ghegas, he decided to publish all lectures based on his own notes and audio recordings of the lectures, and additional communication with Dr. Ghegas, this has been done with all lectures since 1984. After 40 years he has stopped the practice in Genk at the end of 2016. He translated 'The Science of Homeopathy', the best basic work on homeopathy by George Vithoulkas. He also translated Christiane Maute's book on homeopathy for plants: 'Homoöopathie für Pflanzen' He uses his extensive homeopathic experience to help both his sons Dr. Tom Vanden Berghe and Koen Vanden Berghe who work as homeopaths and to teach homeopathy at 'The School of Life'.

This series of books chronically follows Vassilis' seminars so that the keen reader can take advantage of this evolution. For that reason, this series is the best written course in Classical Homeopathy. Beginning student homeopaths can, via this series, practically learn how to use Kent's repertory and Boericke Materia Medica and also understand the practical application of The Organon and The Chronic Diseases by Dr. Hahnemann.

In these particularly didactic and systematic seminars, Vassilis gives us an enormous diversity of subjects from homeopathic practice. Overview of these volumes may be seen from www.lutrashop.com web shop – “All volumes topic summary.”

In all the above, Vassilis carefully follows the Materia Medica of James Tyler Kent and William Boericke and Kent's Repertory.

Vol D: This volume does not contain much Materia Medica, you will find information that is necessary for the practice of homeopathy. Vassilis calls it: How to take the case, how to handle the patient. Homeopathy is a science and an art. This book is about the art of obtaining good homeopathic information from our patients and the art of guiding the patient homeopathically to his cure.

Other volumes contain: The Essence of polychrests remedies (70), Differential diagnosis between polychrests, Complementary remedies of many remedies, Small Remedies, Remedies and their

characteristic symptoms in specific diseases, Follow-up, Long-term follow-up, Philosophy and theory, The newborn, babies and children, Children remedies (more than 40), Discussion of clinical topics, Differential diagnosis of rubrics of the repertory and Golden tips.

In April 1997, four volumes of this lecture series A, B, C and D were sent by Dr. Fons Vanden Berghe to me, on my direct request to Dr. Vassilis Ghegas, since then I am using with confidence the information given in these volumes and afterward E, F, G, H, I and J volumes were received as soon as they published, On the occasion of the 10th anniversary of Homeo-Study run by Dr. Fons Vanden Berghe after a long delay Volume H and I were published in October 1999. In the year 2020, volumes K to R have been published but due to COVID19, these could be sent on 31st December 2020 reaching in India at my address in the first week of February 2021.

Upto now, 18 volumes from A to R translated from Dutch into English language and checked by Vassilis himself are available. Remaining two volumes S and T will also be published in English. After the publication of Volume J in English in August 2000, further publication of English volumes was in pending. I am thankful to Dr. Fons Banden Berghe for considering my request to publish further K to T volumes in English. So in 2019, he entrusted the publication work of these volumes to Rene Otter partner of Radar opus, Homeopathic Software.

Presently, Volume K to R have been published by Rene Otter of Lutra Services (Lutrashop.com) Netherlands. He has collected material, arranged and also finish proof reading task besides keeping full watch on contents and layout. I appreciate and congratulate him for his time and labour in producing such precious volumes to English language readers. Already published volumes (A to J) are also being published one after another in the new format and layout. The printing on fine art paper, fonts, binding and layout all are of excellent quality.

I highly recommend these A to R volumes of 'The Classical Homeopathic Lectures of Vassilis Ghegas' to students, teachers and seasoned Homeopathic practitioners. Price of each of these volumes is around 20€ (Euro).

Reviewed by: Dr. U. K. Srivastava, Jhansi
homeopath_lib@yahoo.com

Report of the International Council Meeting & 75th LMHI Congress 2022

Prof.(Dr.) Niranjan Mohanty
National Vice President
of India to LMHI

It reminds me in February 2019, I was given the responsibility to be the National vice-president of India to LMHI at Greater Noida in Bokshi Homoeopathic medical college by replacing Dr Bakshi, it was a stupendous task for me & I was little shaky to this great responsibility as a hard core IIHP member. The responsibility as a leader of the Homoeopathy could not be conceptualized in my mind. Other associations were not ready to accept me as their representative at initial stage although there was no overt resentment. Now I feel all have accepted me as NVP of India to LMHI

However, I knew that now Homoeopathy has made important stride in National flora. It is necessary to achieve the global excellence through competitiveness, social cohesion and access, certain core values, ethics and healthy practices into the system to make it attractive in global platform.

For which we have to encompass equality and democratic access, cultural and linguistic diversity, International quality culture, synergy between teaching and learning in our hand and research and scholarliness in the other hand, establishing alliance to achieve perfection.

In September 2021 there was 74th LMHI congress at Sorrento, I could spearhead into the matter and established that India is the possessor of largest human resource in health care delivery system in the world and now India is the power house of Homoeopathy. 5th September 2022, Istanbul, Turkey was my second appearance as NVP of India to LMHI. This time majority were my known face. I tried to participate in most of the agenda. I pointed out the mistakes crept, in the financial report and emphasized that the International auditor's report in exact form should be placed before us for total transparency. It was appreciated. Similarly I raised that we deposited at Sorrento the membership fees of 100 doctors Why the certificates are not issued ? Immediately they agreed to issue it.

I brought an appraisal to the house that in India, we promised the delegates participated in 2021 Global colloquium that all will be exempted from that year membership fees of LMHI. Hence there is no delegation fees for Indian Doctors for 2021-2022.

Under the agenda item Activities of NVP/NCP's participation report got the chance to speak few words, which were as follows.

India is not a country alone but a sub continent with a population of 1.4 billion which is 18% of world population with land area of 2% of the world. India is having the largest youth population of world, around 66% of total population.

There are about two hundred & fifty colleges with BHMS degree course i.e. 5 & 1/2 yrs and around 50 colleges are having MD(H) post graduate (3 yrs) course available for 7 subjects. There is provision for PhD courses in many universities. There is full patronize to Homoeopathy in our country. Hence there are govt. run teaching Institutions with attached hospitals in the country. Apart from that Research organizations, health care delivery system, pharmacopoeia laboratory, teaching Institutions & manufacturing unit etc are their under national & state govt. opportunity are there in our country for employment at central government/the state & salary are equal with our counterpart (Allopathy).

There are over 200,000 regd. homoeopathic doctor. Salary of doctors/private practice earning ranges between Rs 0.4 lakh to 7.2 lakhs per month. There are around 250 colleges over India. Homoeopathy under graduate courses providing admission for more than 10,000 students, for P.G. around 1500 students in 7 P.G. departments.

For BHMS doctors, there are various options for higher study to do i.e. P. G. in Anatomy, Physiology, Biochemistry, Microbiology, Hospital management, Business management, Public health management etc. Entire homoeopathy and its positions were unfurled by me.

It is felt necessary to give a brief knowledge about the structural pattern of LMHI to all of my friends.

The International council is constituted of following/positions

- 1) President
- 2) Vice president
- 3) Past president
- 4) General Secretary
- 5) Treasures
- 6) Secretary pharmacy
- 7) Secretary Research
- 8) Secretary of information and communication
- 9) Secretary education
- 10) Secretary of the LMHI Newsletter & Homeopathic Physician
- 11) Special Secretary for Dentistry
- 12) National vice presidents of different countries.

It was a very well organized congress, some say, it was one of the best, if is decided that the next congress will be , in Bogotá, Colombia, on October 24-28th, 2023.

The International Council meeting will be on the 22nd of October, 2023, and the Working group meetings, for those of you with the passion or desire to participate in developing homeopathy in your respective countries, and around the world, will be on the 23rd or October, 2023.

During the International Council, the new Executive Committee was elected and is now composed of: following persons:

President: Altunay Agaoglu
Vice-President: Bernardo A Merizalde
Past president: Gustavo Cataldi
General Secretary: Bernhard Zauner
Treasurer: Monika Kölsch
Secretary of Information and Communication: Raj Manchanda
Secretary of Research: Ashley Ross
Secretary of Education: Claudia Garn
Secretary of Pharmacy: Dirk Bettenworth
Secretary of the LMHI Newsletter & Homeopathic Physician: Andrea Flores Sanchez
Special Secretary for Dentistry: Gloria Feighelstein

Congress was organized at Hotel Hilton, maslak Istanbul a seven star hotel. Scientific presentations were in three parallel halls. There were around 150 scientific papers presented for oral presentation. For poster

presentation there were around twenty presentations. There were number of stall pertain to books, medicines

various software's in Homoeopathy, new innovative medical instruments. Food were available from morning to evening.

From India there were about 50 delegates and from I.I.H.P. 1) Prof(Dr) Kochar & his wife 2) Dr Tanvir Hussain 3) Prof(Dr) L. K. Nanda & myself. Prof(Dr) Nanda presented one paper that was on "An experimental study on effect of Homoeopathic medicine administered based on constitutional medicine and location specific medicines in cervical Spondylosis"

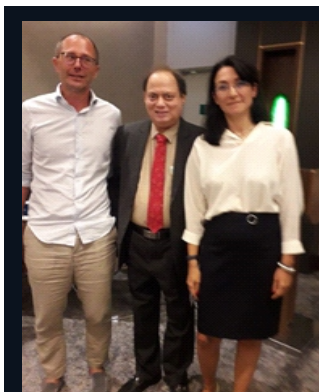
Prof (Dr) Niranjana Mohanty myself presented two papers, those were on :

a) Effects of Individualized Homoeopathic medicament in psoriasis- a single blind randomized controlled study"

b) A case study on Psoriasis

Prof(Dr) Mohanty also was moderator for one session too.

There were about 25 oral presenters from India which is a giant share of entire globe.



Prof (Dr.) Niranjana Mohanty National vice president of India to LMHI with newly elected president and general secretary of LMHI (World Homeopathic association



Prof(Dr.) Niranjana Mohanty presenting his scientific papers at 75th LMHI Congress on 8th September 2022.



Prof (Dr.) Niranjana Mohanty is acting as moderator to one scientific session on 9th September, 2022

QUIZ-HOMOEOPATHY FOR CHILDREN

Dr. A. Kaumudi Padma Mala
M. D.

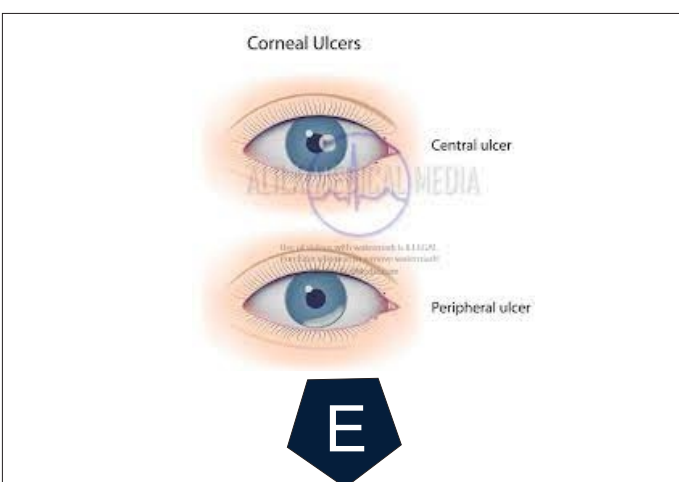
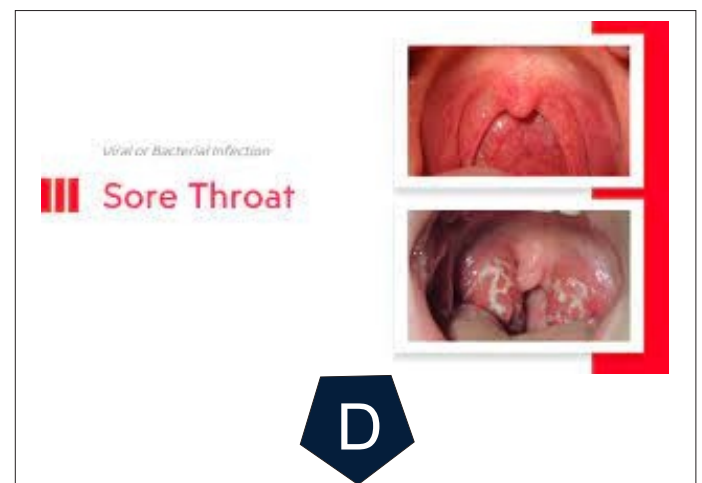
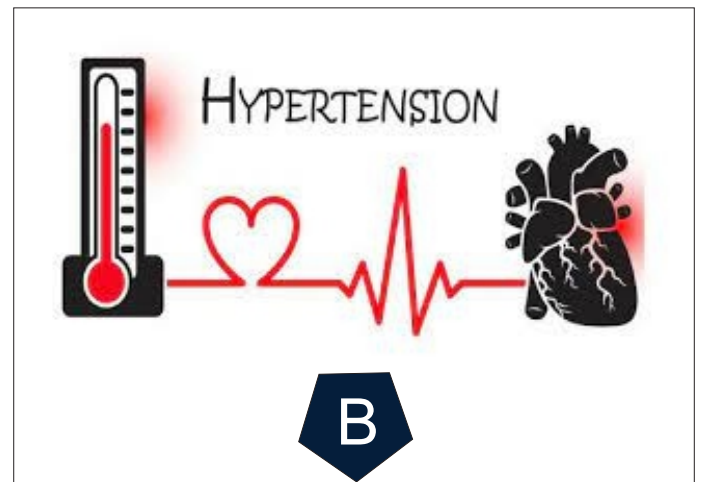
Secretary, Scientific Committee-IIHP National
Sirivennela Homoeo Clinic

Visakhapatnam, A.P.

Ph: 9247177528

kaumudi_rhom@yahoo.com

Find the remedies in the puzzle--arranged in various directions -below upwards,above downwards, left to right or vice versa-from the clues given in pictures(hint-single remedy rubrics)



HEMORRHOIDS



G

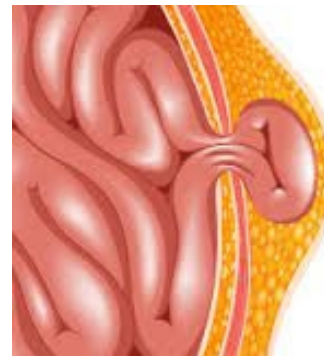


H

Fissure in ANO



I



Hernia

J



K

High Sexual Drive In Children: Watch These Foods



L

Quiz Hints

C	C	R	T	H	B	R	A	C	A	T	Y	R	A	B	B	J	M	N	P
O	R	E	N	M	B	R	V	N	G	U	I	Y	M	V	B	J	I	F	O
R	R	E	C	M	D	H	D	B	O	Y	G	N	V	B	S	J	F	G	K
T	G	I	T	A	C	G	R	E	A	C	C	S	A	B	O	N	A	D	H
I	Z	W	O	A	C	I	D	P	H	O	S	Y	Q	N	E	T	G	C	R
S	J	L	X	F	G	R	C	Z	B	H	E	R	I	B	T	O	P	E	W
O	Q	E	R	T	Y	U	U	I	O	P	A	C	S	D	F	G	H	K	S
N	M	Z	X	C	V	B	S	N	M	V	R	C	A	Q	W	R	E	T	O
U	E	T	B	Q	D	F	G	H	B	A	C	Z	V	L	N	A	V	M	H
M	U	R	I	A	T	I	C	A	C	I	D	X	V	B	C	S	G	Y	P
S	B	Q	P	Y	C	L	C	I	M	T	T	M	K	C	I	A	T	U	A
D	C	R	I	U	T	I	L	M	N	O	M	X	D	E	O	V	R	P	E
G	F	Y	G	I	A	L	L	I	M	O	M	A	H	C	E	R	O	E	R
F	H	U	B	K	A	I	A	L	C	R	O	G	K	Y	Q	W	P	U	A
K	W	O	C	D	I	C	A	C	I	R	U	H	P	L	U	S	S	N	C
U	B	P	Y	B	T	L	F	O	T	N	J	V	O	Y	P	T	Q	Z	L
M	F	J	U	U	M	E	S	R	W	V	U	T	J	O	W	Q	U	Y	A
N	Y	G	I	A	N	D	R	O	G	E	U	M	G	O	P	B	S	A	C

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Send your bio-data with a brief description of work done for homoeopathy/IIHP. Last date of submission is 7th January 2023. A committee will review the submissions and reward a select few. Your old work is important but the work done in the 4 months is decisive - September 2022 to December 2022. Offer open to IIHP members only, if you are not a member already, become one.

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Creating Awareness - About IIHP/ Homoeopathy – Campaigns

Motivator - Influencing People to join IIHP [Making more members]

Creative Work – Books/ Articles / Talk-shows/ Seminars

Social Work – Medical Camps

Breakthrough – Start IIHP in unrepresented area

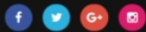
Send personal Bio-data/ details of the team/photos and video clips/ newspaper snippets supporting your claim.

Communication: raocghs@gmail.com



An Opportunity to Become a Star





IIHP STATES' WEBSITES



**Indian Institute Of
Homoeopathic Physicians
National**



DR RAVINDER KOCHHAR
Secretary General
dr.ravinderkochhar@yahoo.in
+91-981522221



DR M A RAO
National President
iihp.rao@gmail.com
+91-9422105250

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Padmasri Dr. K.G. Saxena

1912-2003

Founder of Indian Institute of Homoeopathic Physicians

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Dr C. F. Samuel Hahnemann

1755-1843

Inventor and Founder of Homoeopathy

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Everything About IIHP – Online

www.iihp.in

Join Indian Institute of Homoeopathic Physicians

APPLICATION FORM FOR LIFE MEMBERSHIP

To

The National Secretary General

Indian Institute of Homoeopathic Physicians

Dear Sir,

I would like to join in IIHP as a Life Member. I am here with furnishing my details for your perusal.

Name of the Doctor : _____

Qualification : _____ Regn. No. _____

Name of the Board / Registering Council _____

Name of the College _____

Mailing Address with PIN Code _____

Contact details : Land Line _____ Mobile No. _____ Email ID _____

Introduced by : Dr. _____ Place _____

I am here with enclosing the Membership fees of Rs. 3000/- (Rupees Three Thousand only) by Cash / DD/ Cheque / Bank transfer towards Life Membership fees. All the cheques & DD's must be drawn in the name of "Indian Institute of Homoeopathic Physicians", payable at Nagpur

IIHP Account details

Name of the Account : Indian Institute of Homoeopathic Physicians

Account Number : 34824686375 : IFSC Code: SBIN0009060 : Bank : State Bank of India

Branch : Coal Estate, Civil lines, Nagpur, Maharashtra

I here by undertake to abide by the Bye-laws, rules and regulations of IIHP

Signature of the Applicant

Signature of the introducer : _____

Date : _____

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Why Join IIHP

<http://iihp.in/why-join-iihp.html>

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