

AN OVERVIEW
ACTIVITIES AND
ACHIEVEMENTS
2021

**CENTRAL COUNCIL FOR RESEARCH
IN HOMOEOPATHY**

New Delhi

AN OVERVIEW

ACTIVITIES AND ACHIEVEMENTS 2021



CENTRAL COUNCIL FOR RESEARCH IN HOMOEOPATHY

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Preface

The strong foundation and firm establishment of Homoeopathy in India is phenomenal. Central Council for Research in Homoeopathy (CCRH), being the primary research organization has played a pivotal role in research-based activities since inception. This updated edition of Activities & Achievements 2021 aims to foster the activities of the Council and highlight its achievements.

The Council endeavours at strengthening its infrastructure and creating an atmosphere favourable for outreach in scientific research and its dissemination. It focuses on the discovery of new drugs, cultivation of new exotic plant species and propagation and maintenance of germplasm. The Council has carried out pharmacognostical, physico-chemical and pharmacological studies on various drugs and undertook the revision and upgradation of the HPI. It has introduced two new scales, MYMOP and ORIDL to measure the clinical outcomes in various research studies. CCRH has been a front-runner in creating awareness and conducting various field trials and preventive studies for the control of Dengue, Chikungunya, Japanese Encephalitis and Malaria. In

the current COVID scenario, Ministry of AYUSH along with the Council issued the advisory recommending Arsenicum album 30 as a prophylactic medicine. Its nationwide distribution by the Council turned out to be the biggest drive during COVID. The year 2020-2021 witnessed a boon in clinical research, where the Council coordinated with various Allopathic hospitals and actively conducted studies on COVID and POST-COVID symptoms. The Council has been organizing World Homoeopathy Day and World Integrated Medicine Forum to work towards advancing scientific collaboration and linking research with education and clinical practice. Keeping in view the COVID surge, CCRH conducted an online webinar on World Homoeopathy Day 2020. Since 2017, CCRH has collaborated with 30 homoeopathic medical colleges in India and has signed MoUs with various foreign institutions. The year 2018 has been the year of online success for the Council with the creation of Facebook page 'AYUSH Homoeopathy' and implementation of A-HMIS. The year 2020 saw the genesis and surge of webinars on various topics. CCRH through its digital library, archives, documentation & publication section



provides access to the multitude of homoeopathic journals. The digitization and sharing of resources online has been a revolutionary development in this advanced era.

CCRH has worked with full exuberance and zeal and has added evidences on integrated managements of Covid 19, with the support from Ministry of AYUSH. We hope this edition will highlight the

research methodologies, multitude of collaborations and development in the field of Homeopathy, bringing it at par with the scientific world.

New Delhi

Dr. Anil Khurana
Director General



Acknowledgement

The Central Council for Research in Homoeopathy (CCRH) appreciates the inputs of all the contributors in updating the information related to the functioning of various sections of the Council.

We acknowledge the efforts of our Director General and Dr. Bindu Sharma, Assistant Director (H) for the content planning of this valuable publication of the Council.

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Abbreviations

ADMIN	: Administration
AIIMS	: All India Institute of Medical Sciences
APR	: Anu Photo Rheography
AYUSH	: Ayurveda, Yoga & Naturopathy, Unani, Siddha & Homoeopathy
AIDS	: Acquired Immune Deficiency Syndrome
BARC	: Bhabha Atomic Research Centre
BESU	: Bengal Engineering and Science University
BMI	: Body Mass Index
BHMS	: Bachelor of Homoeopathic Medicine and Surgery
BFV	: Blood Flow Variability
CAM	: Complementary and Alternative Medicines
CCH	: Central Council of Homoeopathy
CME	: Continued Medical Education
CGHS	: Central Government Health Scheme
C/CM	: Centesimal Potencies
CNS	: Central Nervous System
CR	: Clinical Research
CRI	: Central Research Institute
CRU	: Clinical Research Unit
CIP	: Central Institute of Psychiatry
CIMAP	: Central Institute of Medicinal and Aromatic Plants
COLL	: Collaborative
CCRAS	: Central Council for Research in Ayurvedic Sciences
CCRH	: Central Council for Research in Homoeopathy
CCRUM	: Central Council for Research in Unani Medicine
CDC	: Center for Disease Control
CCRYN	: Central Council for Research in Yoga & Naturopathy
CFA	: Circulating Filarial Antigen
CHC	: Community Health Centre
CHLAS	: Current Health Literature Awareness Services
CPCSEA	: Committee for the Purpose of Control & Supervision of Experiments on Animal



CVU	: Clinical Verification Unit
CCRIMH	: Central Council for Research in Indian Medicines and Homoeopathy
DIS. R, GA	: Disease Related General Areas
DP	: Drug Proving
DRGA	: Drug Related General Areas
DRTA	: Drug Related Tribal Areas
DS	: Drug Standardization
DOC	: Documentation
DNA-P	: Deoxyribo Nucleic Acid-Polymerase
DPRU	: Drug Proving Research Unit
DSU	: Drug Standardization Unit
DIPAS	: Defense Institute of Physiology and Allied Sciences
ENMH	: Escuela Nacionalde Madicinary Homeopatia
EMR	: Extra- mural Research
ESR	: Erythrocyte Sedimentation Rate
ESTT.	: Establishment
FA	: Financial advisor
FOH	: Faculty of Homoeopathy
FY	: Five Year
GA	: General Area
GDV	: Gas Discharge Visualization
GERD	: Gastroesophageal Reflux Disease
H	: Homoeopathy
HDRI	: Homoeopathic Drug Research Institute
HTC	: Homoeopathic Treatment Centre
HRF	: Homoeopathic Research Foundation
HBV	: Hepatitis B Virus
HIV	: Human Immunodeficiency Virus
HRV	: Heart Rate Variability
HSADL	: High Security Animal Disease Laboratory
IPN	: Instituto Politencnico Nacional
I.A.	: Internal Audit
ISM & H	: Indian Systems of Medicine & Homoeopathy
ISC	: Internal Scrutiny Committee
ICMR	: Indian Council of Medical Research
IEC	: Information, Education and Communication
IIT	: Indian Institute of Technology
IPG	: Impedance Plethysmography



IPR	: Intellectual Property Rights
IVRI	: Indian Veterinary Research Institute
JIPMER	: Jawaharlal Institute of Postgraduate Medical Education and Research
LMHI	: Liga Medicorum Homoeopathica Internationalis
LM	: Fifty millesimal potency
MA	: Medical Analyzer
MCH	: Mother & Child Health
NACO	: National AIDS Control Organization
NICD	: National Institute of Communicable Disease
NGO	: Non-Government Organization
NIH	: National Institute of Homoeopathy
NPCDCS	: National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke
NRHM	: National Rural Health Mission
OPD	: Out Patient Department
PEC	: Project Evaluation Committee
PG	: Post Graduate
PHC	: Primary Health Centre
RBC	: Red Blood Cells
RCT	: Randomized Control Trials
R & D	: Research & Development
ROS(H)	: Research Officers (Homoeopathy)
RO (P)	: Research Officer (Pharmacognosy)
RLHIM	: Royal London Hospital for Integrated Medicine
RRI	: Regional Research Institute
SAC	: Scientific Advisory Committee
CMPRH	: Center of Medicinal Plants Research in Homoeopathy
SMPCU	: Survey of Medicinal Plants Cultivation Unit
SPSS	: Statistical Package for Social Sciences
STM	: School of Tropical Medicine
STSH	: Short Term Studentship in Homoeopathy
SC	: Screening Committee
SPYM	: Society for Promotion of Youth & Masses
TA	: Tribal Area
TNF	: Tumor necrosis factor
UT	: Union Territories
USA	: United States of America
UCLA	: University of California Los Angeles



Overview

Dr. Samuel Hahnemann, a German physician discovered Homoeopathy, the system of medicine based on the principle of 'Similia Similibus Curentur', in the late 18th century. Homoeopathy set its foot in India in the early 19th century in Bengal. Government of India recognized Homoeopathy through the Homoeopathy Central Council Act, 1973 and thereafter, Central Council of Homoeopathy (CCH) was established to regulate the education and practice in Homoeopathy. Based on the cardinal principles of 'Similia', 'Simplex', 'Minimum', 'doctrine of drug proving', 'drug dynamization', 'theory of chronic diseases' and 'theory of vital force', Homoeopathy today is the second most popular method of medical treatment in India.

Central Council for Research in Homoeopathy (CCRH) was formally constituted on 30th March 1978 and registered under the Societies Registration Act XXI, 1860, as an autonomous organization and started functioning as an independent organization since January 1979. It is an apex research organization, which undertakes, coordinates, develops, disseminates and promotes scientific research in Homoeopathy. Since its establishment, it is engaged in bringing

best of research activities and thereby enhancing the global acceptance of Homoeopathy in promoting safe and cost effective treatment in the national health care delivery system through its strong network of 22 research institutes/units and 3 extension research centres spread across the country. Drug standardization, drug proving, clinical research, clinical verification, fundamental & collaborative research, epidemic research and survey, collection and cultivation of medicinal plants are the basic areas of research of the Council.

The Council has created massive infrastructure, shifting its focus to have its own building for the development of the Institutes. The Council has developed the impressive technology-aided virology lab at Dr. Anjali Chatterjee Regional Research Institute for Homoeopathy, Kolkata, West Bengal, India. Zebra-fish laboratory, Chemistry, Pharmacology, Microbiology and Molecular labs have been established at DDPRCRI(H), Noida. The reputed institute, National Homoeopathy Research Institute in Mental Health (NHRIHM), Kottayam is imparting psychiatric care to the patients. It has been a torchbearer in the field of research, and gained permission to be affiliated as a Post-Graduate Institute in



Homoeopathy providing MD (Psychiatry) and MD (Practice of Medicine).

Drug standardization studies are based upon the availability of authentic medicinal plants, which amounts to 70 percent of Homoeopathic Materia Medica. The Council has a Unit in the Nilgiri District of Tamil Nadu namely, Survey of Medicinal Plants and Collection Unit (SMPCU), which conducts surveys, collection and cultivation of medicinal plants used in Homoeopathy. SMPCU supplies the raw drug material to the Drug Standardization Units of the Council and also to the homoeopathic industry for commercial use. The Council has undertaken pharmacognostical studies

has till date methodically proved 120 drugs comprising 90 drugs of plant origin, 09 of animal origin, 19 of chemical origin, 01 sarcode and 01 nosode. The pathogenetic symptoms of the drugs elicited from drug proving are clinically verified to determine the therapeutic usefulness of these drugs. Clinical verification of 118 such drugs which includes 78 remedies of plant origin, 27 remedies of chemical origin, 10 remedies of animal origin, 02 nosodes and 01 sarcode, has been carried out.

Clinical research programme, by the Council evaluates the effectiveness of homoeopathic medicines in various disease conditions. The Council has so

The year 2014 has been a landmark year in development of Homoeopathy with the formation of Ministry of AYUSH (Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy) under Govt. of India. Since then, Homoeopathy has flourished in terms of colleges, education, infrastructure and laboratories, further enhancing the quality works.

on 352 drugs, physico-chemical studies on 387 drugs and pharmacological studies on 151 drugs. All three aspects of 149 drugs have been studied till date. The standards laid down are included as monographs in the Homoeopathic Pharmacopoeia of India.

Drug Proving, also known as Homoeopathic Pathogenetic Trial (HPT) forms the basis of Homoeopathy and has therefore, been an intensive activity of the Council. The objective of this programme is to find out the homoeopathic symptomatology of indigenous and partially proven homoeopathic drugs on healthy human volunteers. The Council

far conducted 187 studies on various diseases; amongst which 145 studies have been concluded, (116 were observational studies and 29 randomized clinical trials). Research projects were undertaken in diverse clinical conditions comprising of infectious diseases, respiratory disorders, dermatological disorders, endocrinological disorders/life style disorders, gastrointestinal disorders, rheumatological disorders, mental disorders and gynaecological disorders.

Collaborative Research, another arena of research taken up by the Council with other institutes of excellence aims to undertake evidence-based studies



in order to validate the concepts of Homoeopathy on scientific parameters. The Council has collaborations with more than 20 institutes of repute to conduct various research projects. Till date 29 national and 03 international studies have been completed under such collaborations and 16 national and 18 international peer reviewed publications have been published.

The Extra-Mural Research (EMR) Scheme, a central sector scheme of Ministry of AYUSH, is being coordinated by the Council for implementation of the projects related to Homoeopathy since 2016. Till date, it has completed 36 such studies, and 05 studies are under progress.

Homoeopathy for Healthy Child was initiated in February 2015 to sensitize target audiences about the benefits of Homoeopathy for common diseases like diarrhea, respiratory illnesses, dental conditions, skin conditions, behavioural problems, developmental delays, etc. in children. The project is being implemented at 6 centres across Delhi, NOIDA, Mumbai, Guwahati, Puri & Lucknow.

National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke (NPCDCS) is another program initiated to promote healthy life styles, early diagnosis and management of diabetes, hypertension, cardiovascular diseases & common cancers.

Government of India planned to link the Swachh Bharat Abhiyan as launched by Hon'ble Prime Minister, Shri Narendra Modi on 2nd October 2014, with Swasthya Rakshan Programme (SRP) through its national and research institutes to protect

and promote health in rural villages/ urban cities. This campaign aims to generate awareness and provide health education regarding personal, household and environmental sanitation facilities. It also focuses on public health and environmental outcomes for all their citizens with a special focus on hygienic and affordable sanitation facilities for the urban poor and women for preventing, identifying and treating the diseases related to poor hygiene and sanitation. The Council initiated this programme in 2015 through 11 institutions, including 02 Central Research Institutes and 09 Regional Research Institutes, by adopting 55 villages to provide the benefit of Homoeopathic treatment.

The studies conducted in these diverse research areas are documented in the form of publications. The Council publishes periodical research journal and newsletter for dissemination of its research activities and achievements. Indian Journal of Research in Homoeopathy (formerly known as CCRH Quarterly Bulletin) is the peer reviewed Open Access Online journal published by the Council. The online manuscript system of IJRH is just a click away at www.journalonweb.com/ijrh, which has made the functioning of the journal convenient for the authors, editors and the reviewers. Another applaudable feature is the official website of the journal at www.ijrh.org where in all the previous issues of the journal can be viewed. The Council also publishes priced publications in the form of books and monographs and non priced publications in the form of handouts, booklets etc. Till date Council has published 77 issues of CCRH Newsletter, 27 volumes of



Current Health Literature Awareness Service (CHLAS), 14 volumes of IJRH with 54 issues and 66 other publications. The online purchase of these books is facilitated by the integration of payment gateway. To reach out to public, the council has prepared 4 documentary films, 4 AV spots and 2 radio jingles.

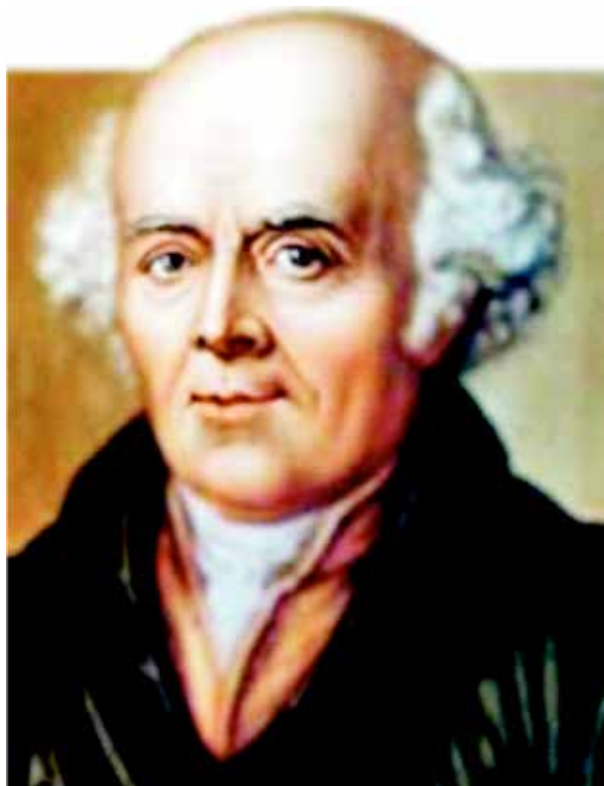
The research work of the Council is disseminated to create awareness among masses in the form of IEC material like handouts etc. which are distributed free of cost in Ayogya melas, health

camps etc. Also CMEs & workshops are organized from time to time in different parts of the country for disseminating the research work done in various fields.

All the activities and achievements of the Council projecting an overview of the work done by the units and institutes of the Council is depicted on the website of the Council, www.ccrhindia.nic.in showcasing the important highlights and the latest developments in the field of Homoeopathy in general and the Council in particular.

Homoeopathy

Homoeopathy, compared to other medical systems, is of recent origin, dating about 200 years back. Dr. Christian Friedrich Samuel Hahnemann, Founder of Homoeopathy, was a reputed German physician, a great pharmacist and linguist. He was dissatisfied with the state of medical practice at that time and took to experimentation in Chemistry and translation of scientific literature. He contributed regularly to Crell's Annals of Chemistry (the first journal devoted to Chemistry in Germany) from 1787 to 1794. While translating a prevailing *Materia Medica* by Dr. William Cullen, from English to German in 1790, he came upon the idea of experimenting with Cinchona bark (a drug used for treatment of intermittent fevers in those times) on himself. He found that when taken in a healthy state, Cinchona produced symptoms similar to those of intermittent fever. Over a span of six years, Dr. Hahnemann conducted many such experiments with known medicinal substances and deduced the principle of *Similia Similibus Curentur* i.e., 'let likes be treated by likes'. He concluded in 1796 that the therapeutic activity of any substance in a sick individual is dependent on its capability of producing a similar diseased state in a healthy individual.



Dr. Hahnemann identified this new system of therapeutic application of drugs for treatment of patients as 'Homoeopathy' derived from the Greek words 'Homoios' meaning 'similar' and 'pathos' meaning 'suffering'. He also coined the term 'Allopathy' (Greek words 'Allos' meaning 'different' and 'pathos' meaning 'suffering') for the prevailing medical system. The word Allopathy first appeared in 1816 in the preface to the first edition of the second volume of *Materia Medica Pura*, where



Dr. Hahnemann described medicines “which stimulate the healthy body as illness different (Allopathic) from the one that is to be cured”.

Homoeopathic medicines are cost effective, agreeable, devoid of adverse side effects and can be administered easily. Thus, toxicity, side effects or drug resistance is not encountered during the course of treatment and the medicines are truly simple – both in form and application. The process of individualization builds up a doctor-patient relationship allaying natural fears and apprehensions of a sick individual. In few cases, medicines are prescribed based on symptom-similarity, without depending upon the cumbersome and costly diagnostic modalities.

Homoeopathy has added to its credentials the successful treatment of psychosomatic disorders, autoimmune diseases, geriatric and paediatric disorders, ailments during pregnancy, obstinate skin diseases, life style disorders and allergies etc. It also has a positive role in improving the quality of life in incurable chronic diseases like cancer, HIV/AIDS, terminally ill

patients and incapacitating diseases like rheumatoid arthritis, etc. As such, Homoeopathy is gaining popularity and momentum all over the globe.

Since its introduction to the humanity, the basic principles of Homoeopathy have not changed; as it is primarily a specialized system of rational therapy based on fixed and definite laws of nature, which give inherent strength to the system. Even after 200 years, the philosophy as laid down by Dr. Hahnemann forms the guiding force of homoeopathic practice for physicians around the world.

Homoeopathy is one of the most popular systems of medicine, sought after by suffering patients.

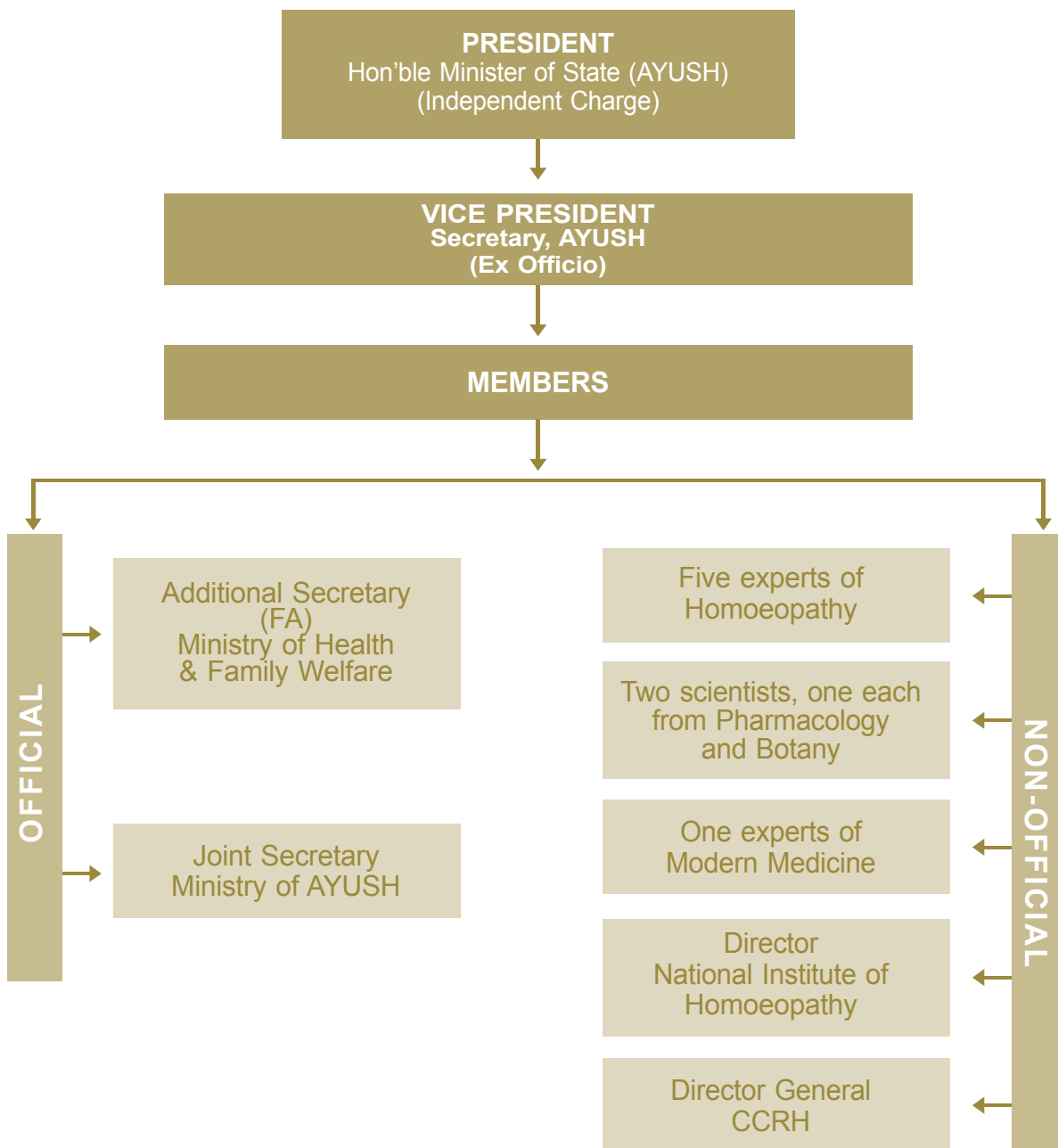
It is playing a major role in the integrated public healthcare delivery system of India due to its wide acceptance by people at large. This acceptance is mainly due to its safety, simplicity, holistic approach and affordability.

Governing Body

The policies, directions and overall guidance for the activities of the Council are regulated by the Governing Body.

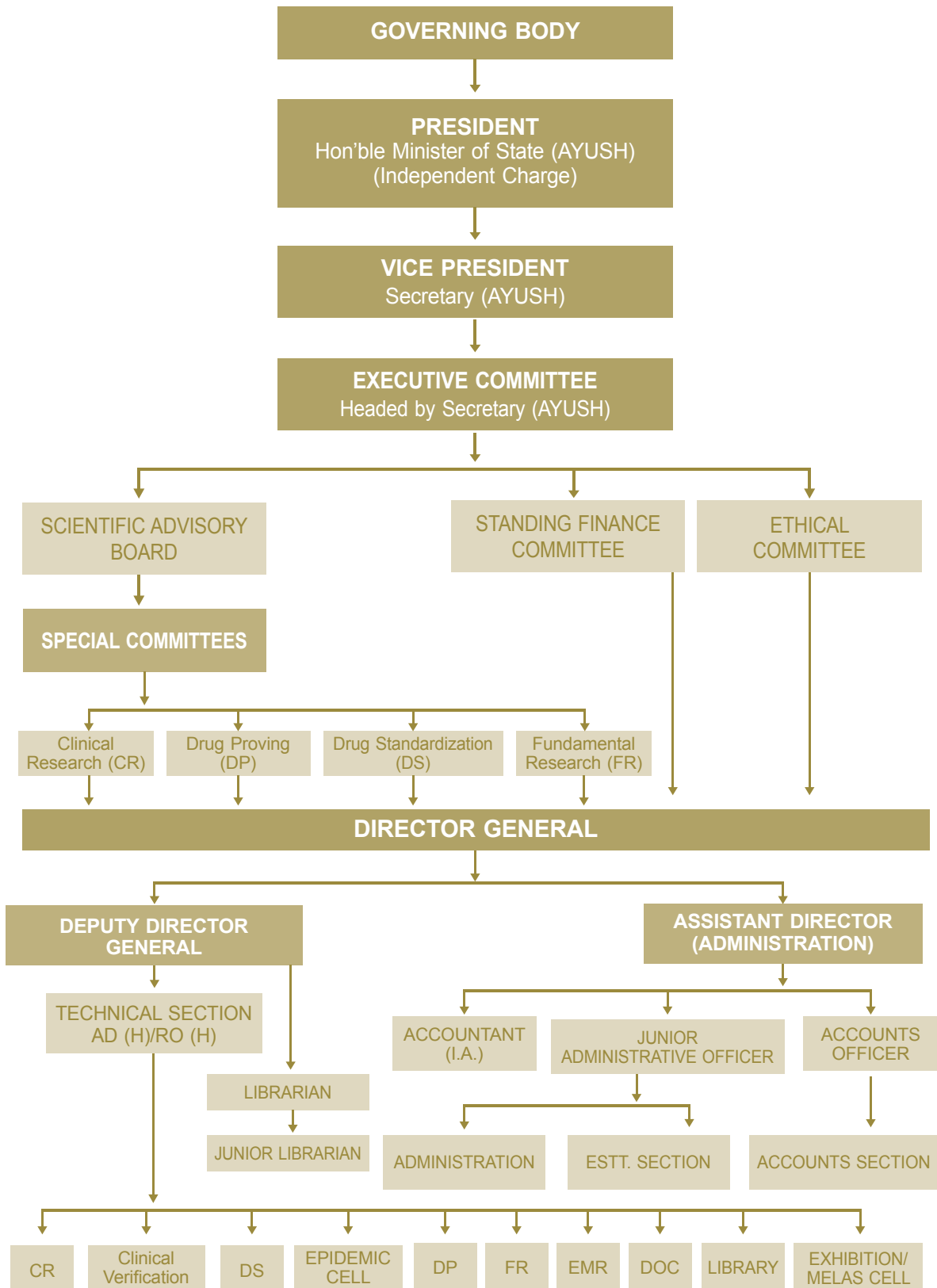
Hon'ble Minister of AYUSH (Independent

Charge) is the President of the Governing Body and has general control on the affairs of the Council.





Organizational Setup



Budget

Statement of BE/RE Actual Expenditure from 1978-79 onwards excluding amount received for Training Programmes, NACO, WHO and Conferences etc.

S. No.	Year	PLAN			NON-PLAN			Total Expendi.
		Budget Estimate	Revised Estimate	Actual Expendi.	Budget Estimate	Revised Estimate	Actual Expendi.	
1	1978-79		6.41	6.96				6.96
2	1979-80		17.02	15.78		13.65	13.54	29.32
3	1980-81		13.75	13.00		14.50	15.11	28.11
4	1981-82		15.17	19.64		13.35	13.03	32.67
5	1982-83		26.11	30.59		17.81	17.89	48.48
6	1983-84		40.01	36.60		21.06	20.18	56.78
7	1984-85	40.00	38.00	48.88	21.35	23.60	23.78	72.66
8	1985-86	55.00	20.00	20.80	51.63	74.50	74.57	95.37
9	1986-87	50.00	50.00	64.88	76.50	69.80	69.80	134.68
10	1987-88	70.00	52.47	58.54	73.00	77.25	78.26	136.80
11	1988-89	70.00	69.55	86.41	89.90	85.30	86.34	172.75
12	1989-90	76.00	77.00	80.69	85.03	89.50	89.95	170.64
13	1990-91	100.00	114.00	124.83	98.00	107.00	106.68	231.51
14	1991-92	100.00	119.00	127.59	99.50	100.00	107.80	235.39
8th FY Plan								
15	1992-93	70.00	120.00	130.50	105.50	130.75	140.59	271.09
16	1993-94	135.00	154.18	143.76	140.00	140.00	159.56	303.32
17	1994-95	170.00	170.00	188.92	148.00	155.00	155.47	344.39
18	1995-96	180.00	180.00	186.31	160.00	170.00	177.93	364.24
19	1996-97	180.00	180.25	186.71	187.00	187.00	194.32	381.03
9th FY Plan								
20	1997-98	210.00	250.00	262.79	190.00	284.00	296.55	559.34
21	1998-99	325.00	360.00	377.64	290.00	322.00	344.58	722.22
22	1999-2000	360.00	379.00	367.84	335.00	357.00	375.33	743.17
23	2000-2001	399.00	363.10	342.20	355.00	381.90	377.50	719.70
24	2001-2002	400.00	400.00	388.46	400.00	395.30	398.70	787.16
10th FY Plan								
25	2002-2003	400.00	400.00	393.17	440.00	440.00	433.68	826.85
26	2003-2004	400.00	423.30	412.45	450.00	455.00	456.53	868.98
27	2004-2005	604.00	719.00	727.52	480.00	520.00	544.43	1,271.95
28	2005-2006	1,100.00	910.00	905.55	490.00	500.00	550.03	1,455.58
29	2006-2007	1,200.00	1,176.00	1,169.29	540.00	560.00	573.44	1,742.73
11th FY Plan								
30	2007-2008	1,155.00	1,155.00	1,155.89	560.00	720.00	736.46	1,892.35
31	2008-2009	1,343.00	2,075.00	2,089.24	750.00	915.00	921.25	3,010.49
32	2009-2010	3,087.00	2,987.00	3,017.99	1,400.00	1,365.00	1,385.01	4,403.00
33	2010-2011	3,087.00	3,392.00	3,471.16	1,200.00	1,480.00	1,499.81	4,970.97
34	2011-2012	3,200.00	3,220.00	3,287.31	1,670.00	1,670.00	1,715.40	5,002.71
12th FY Plan								
35	2012-2013	3,658.00	4,986.00	5,003.51	1,780.00	1,908.10	1,978.92	6,982.43
36	2013-2014	6,200.00	6,200.00	4,745.37	1,769.00	1,673.78	1,754.48	6,499.85
37	2014-15*	5,800.00	2,924.56	4,868.29	1,920.00	2,058.45	2,089.66	6,957.95
38	2015-16	5,800.00	6,000.00	6,397.94	2,000.00	2,300.00	2,301.47	8,699.41
39	2016-17	6,500.00	5,292.53	5,636.89	2,600.00	2,600.00	2,648.88	8,285.77
40	2017-18	9,550.00	11,250.47	10,695.92	-	-	-	10,695.92
41	2018-19	10,950.00	10,913.50	12,039.40	-	-	-	
42	2019-20	11,853.00	12,883.00	13,698.25	-	-	-	
43	2020-21	13,850.00	13,050.00		-	-	-	



Vision, Mission & Research Areas



10

VISION

To promote research that contributes towards the development of Homoeopathic System of Medicine globally.

MISSION

Conducting effective, scientific and ethical health research on prioritized areas with Homoeopathy and thereby enhancing the global acceptance of Homoeopathy, maximizing potential for promotion of this safe and cost effective treatment in the National Health Care Delivery System.

OBJECTIVES

- To formulate the aims and patterns of research on scientific lines in Homoeopathy.
- To invest in Drug research for standardization, safety and quality of homoeopathic medicines.
- To take up Fundamental/Basic research studies intramurally or through Collaboration.
- To propagate research findings to the profession and public.
- Strengthening of infrastructural development of Institutes for quality research.

RESEARCH AREAS

Broad research areas pursued by the Council are-

- Clinical Research (Intramural & Extramural)
- Clinical Verification
- Drug Proving
- Drug Standardization
- Centre of Medicinal Plants Research in Homoeopathy
- Literary Research
- Fundamental & Basic Research

OTHER ACTIVITIES

- Dissemination Activities
- Professional Outreach Activities
- Collaborations
- Linking Research with Education
- Online Activities
- Health Melas/Exhibitions
- Public Health Initiatives
- Swatch Bharat Abhiyan
- Rashtrya Poshan Mah Abhiyan (National Nutritional Mission)
- Vigilance Awareness Activities
- Activities to promote official language Hindi





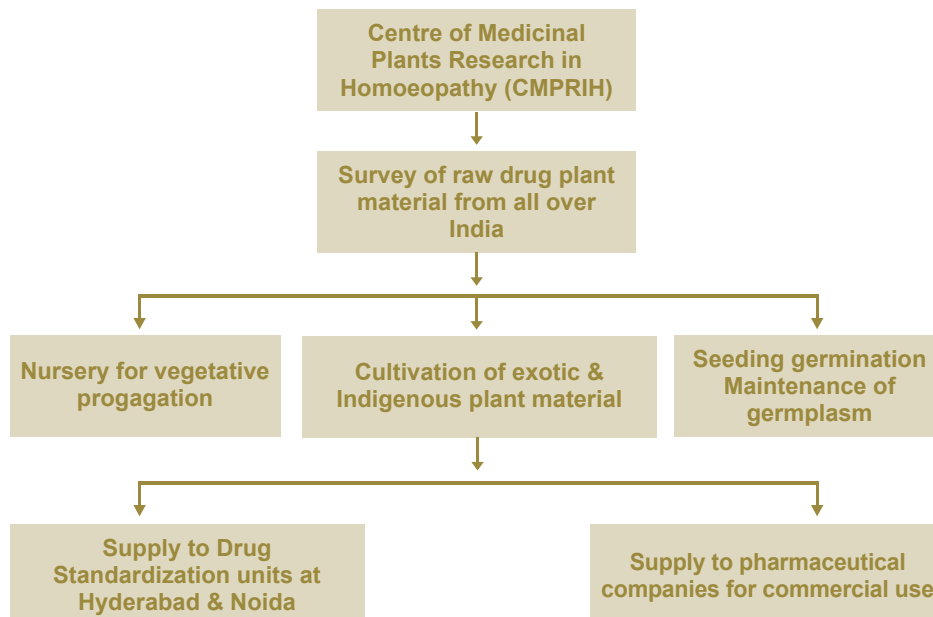
Activities





ACTIVITIES

Survey, Collection & Cultivation of Medicinal Plants



Medicinal plants are widely used in the production of homoeopathic medicines. They are the sources of about 70% of the Homoeopathic drugs. Survey and collection becomes the essence of the research activities, as it is the only way to identify the raw drug materials and the suitable geographical condition. Keeping in view the quality of the drug, the source material either is collected from wild occurrence or is cultivated in the gardens under expert supervision. “Centre of Medicinal Plants Research in

Homoeopathy” at Indira Nagar, Emerald Post, Nilgiri District in Tamil Nadu has been established for maintaining authentic plant source material in fresh condition. This research garden and a ‘Survey of Medicinal Plants and Cultivation Unit’ collects raw drug plant material from areas surveyed from all over India. This Research Centre also cultivates both exotic and indigenous plant material for supply as and when required for drug standardization or drug preparation, both for in-house

research and for homoeopathic drug manufacturers. It is frequently visited by students and visitors to explore the raw material and widen their horizons in the field of cultivation and preservation of germ plasm of both indigenous and exotic plants. Currently 76 plant species (65 exotic plants and 11 indigenous) are being cultivated under experimental cultivation. The different species are under conservation cum germplasm collection at demonstration plots for further multiplication or seed production to continue as next generation and being maintained as reference species useful in Homoeopathy. In addition, the laboratory for carrying out drug standardization research studies is also planned to be established here in future, bringing all aspects of research in medicinal plants under one umbrella. The Centre has conducted 305 surveys and supplied 624 raw drugs to Units for carrying out standardization studies, 9885 herbarium sheets have been accessioned and

mounted with their voucher specimen number till date.

A unique rigid poly house constructed of polycarbonate sheet has been constructed for the process of seedling germination, vegetative propagation of cloves, and maintenance of germ plasm, mass production of plantlets for internal usage and supply of raw drug-to-drug standardization units under the Council and for commercial purpose.

Nursery has been developed for vegetative propagation of *Rosmarinus officinalis* and *Cineraria maritima*. The seeds of *Apium graveolens*, *Geranium graveolens*, *Petroselinum crispum*, *Digitalis purpurea* and cuttings of *Rosmarinus officinalis* and *Pyrus malus* have been sown in nursery bed. The raised seedling of *Digitalis purpurea* and *Apium graveolens* have been transplanted from nursery to field. The raw drugs have been supplied to total 22 manufacturing units for commercial use and generated a revenue of Rs. 79500.

Bird eye view
of CMPRIH





Tropaeolum majus

Rosmarinus officinalis



Chrysanthemum leucanthemum

Plectranthus fruticosus



Datura stramonium

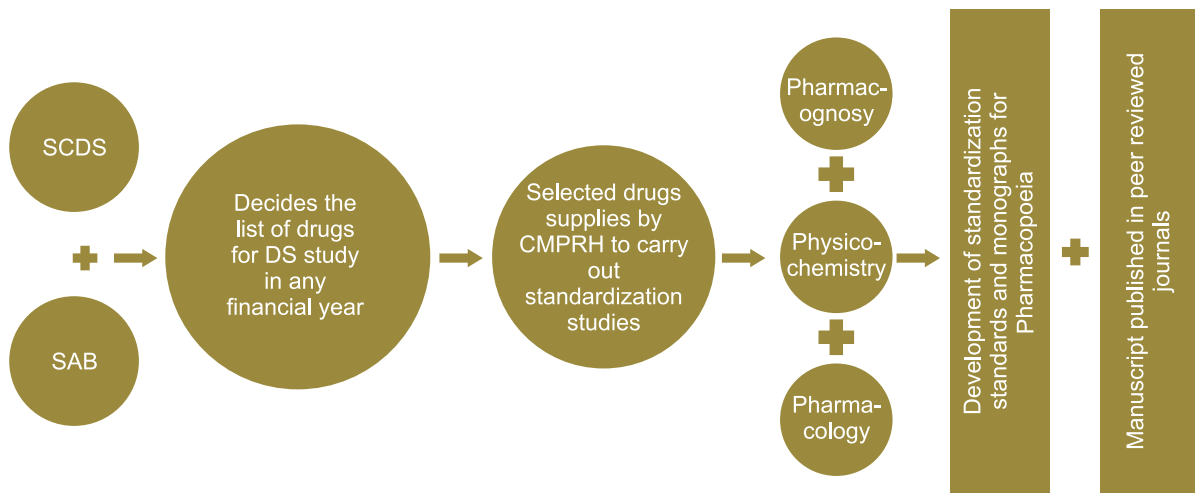
Herbarium sheets



Maintenance of seedlings of medicinal plants and germ plasm at Poly House, Ooty



Drug Standardization



Drug standardization is one of the most significant tasks undertaken by the Council. It encompasses a comprehensive evaluation of the homoeopathic drugs in respect of their pharmacognostical, physico-chemical and pharmacological profiles in order to study the various qualitative and quantitative characteristics of drugs. The pharmacognostical studies of raw drug plant material include study of the gross morphology of the raw drug, its macro and microscopical characteristics and after suitable processing enumeration of characteristic structures of cells, tissues and organs under the microscope and determining their essential bio-statistical dimensions. The physico-

chemical parameters of the raw drug and prepared mother tincture include moisture content, ash value, extractive value, presence of active constituents in raw drug and organoleptic characteristics, carrying out specific tests and TLC, UV spectrophotometry of the mother tincture. These can be used as a benchmark standard against any commercial sample to be compared with in future or as reference whenever there is a necessity. The pharmacological spectrum of a drug is ascertained through experimental trials on laboratory animals under standard laboratory conditions, which include preliminary estimation of dosage, evaluation of efficacy and safety and the mode of action of homoeopathic drugs.

The studies are being carried out at the Dr. D. P. Rastogi Central Research Institute (H), Noida and Drug Standardisation Unit (H), Hyderabad for Pharmacognostical and Physico-chemical evaluation of homoeopathic drugs.

A.) Standardization work undertaken:

The council has undertaken pharmacognostical studies on 352 drugs, physico-chemical studies on 387 & pharmacological studies on 151 drugs from plants, minerals, chemical and animal sources. 149 drugs have been studied in all the three aspects. The standards of the drugs worked out by the Council are definite gains and are important for preparation of quality homoeopathic medicines.

B.) Homoeopathic Pharmacopoeia of India- Revision/Up-gradation:

The revision and up-gradation of the Homoeopathic Pharmacopoeia of India (Vol. I to X) has been initiated to bring it at par with other international pharmacopoeias as per Essential Drug List (EDL), since 2014. The drugs which are used by the profession have been taken up first for revision of their profile at:

1. Drug Standardization Unit (H), Hyderabad, Telangana
2. Dr. D. P. Rastogi Central Research Institute (H), Noida, U.P
3. Homoeopathic Pharmacopoeia Laboratory, Ghaziabad, U.P

Till date the revision work on 54 drugs of plant origin, 17 of chemical origin and 17 of animal origin have been undertaken with

respect to pharmacognostic and physicochemical aspect and Finished Product Standards (FPS) studies.

C.) Studies undertaken for updation of Homoeopathic Pharmacopoeia of India (HPI):

There are ten volumes of HPI consisting of 1111 drugs till date. Council has undertaken the new work (11 drugs of plant origin and 06 drugs of chemical origin) for XI Volume with all the standardization parameters i.e. Pharmacognostic, Physico-chemical and FPS studies and the monographs have been prepared as per new template of Pharmacopoeia Commission for Indian Medicine & Homoeopathy (PCIM & H) for inclusion in XI Volume of HPI.

All 17 Monographs have been vetted during the monographs review meetings with respect to pharmacognosy and physico-chemical aspects and corrected as per suggestions of subject experts.

D.) Studies undertaken for HPTLC ATLAS work of Homoeopathic drugs:

The chemo-profiling work of homoeopathic medicinal plants have been initiated in 2018 with the aim to create a database of homoeopathic plants with respect to marker compounds and other phytoconstituents present in the plants. Using modern analytical techniques including chromatographic ones, the well-developed quality standards will be achieved through systematic



evaluation of the plant material.
Preparation of HPTLC ATLAS with
the chromatographic parameters

have been completed for 26
homoeopathic medicinal plants.

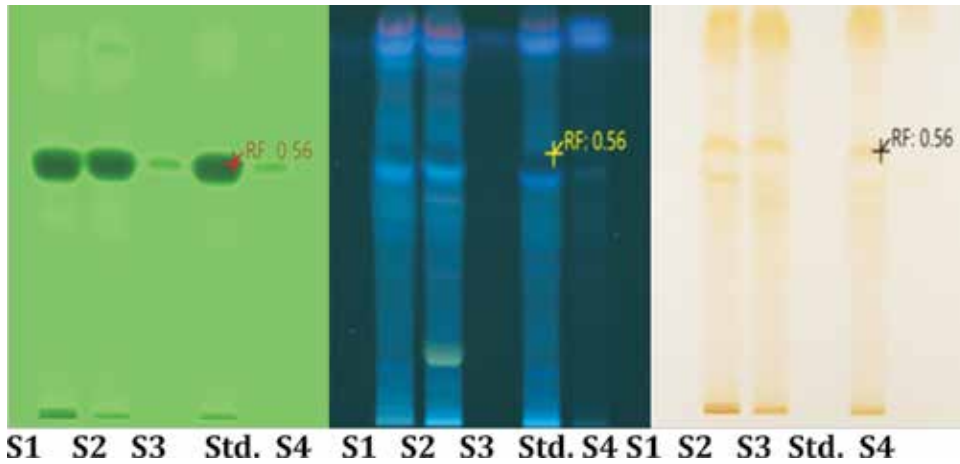


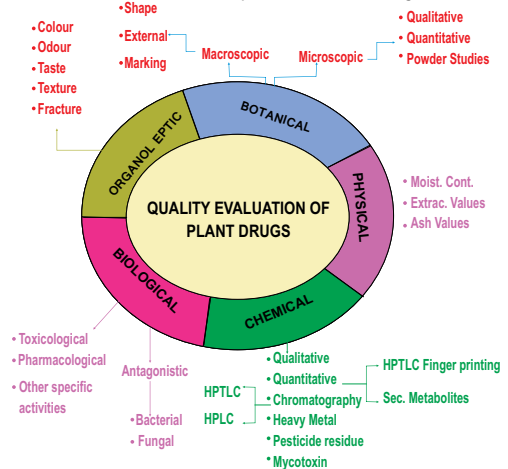
Fig. HPTLC of
Coffea cruda in
house HT, standard
caffeine and
commercial market
samples

UV 254 nm UV 366 nm After derivatization

Homoeopathic Drugs

Standards for homoeopathic drugs have been laid in terms of their pharmacognostical, physico-chemical and pharmacological profiles of plant origin, chemical, animal and microbial drugs.

Standardization & Quality Evaluation of Plant Drugs



IDENTITY AUTHENTICITY OF THE PLANT MATERIAL
(Plant anatomy, Marker and Finger printing)

1. Plant anatomy

- Morphology
- Microscopy
- Stomatal Number
- Stomatal Index
- Trichome

IDENTITY AUTHENTICITY OF THE PLANT MATERIAL
(Plant anatomy, Marker and Finger printing)

Transverse Section of Bark Showing Secretory Vessels

Transverse Section of Bark showing Medullary Rays

Transverse Section of Bark Showing Striated Phloem Fiber

Authenticity Purity
Quality Safety
Efficacy

Department of Pharmacognosy



Histological Sectioning and Staining of Plant Origin Homoeopathic Raw Drugs



Raw Drug Repository, Mounting and stitching of Herbarium sheet



Department of Pharmacognosy helps in proper identification/authentication of genuine raw drug from its adulterant by undertaking macro and microscopic study of raw plant. The parts and powders of the raw plant are used for preparation of Homoeopathic drugs.

Department of Chemistry ensures purity and quality of drug (Plant, Animal and Chemical) by determination of moisture content, extractive value, ash value, pH value, appearance, colour, odour, chemical constituents, TLC and HPTLC studies of raw drug materials as well as finished products used in Homoeopathy.



Histological sectioning and studying of section of plant origin homoeopathic drug. Department of Chemistry



Mother tincture preparation, pH and UV spectrophotometric analysis of homoeopathic drugs



Microbiology & Molecular-biology Laboratory



Counting of Microbial Colonies at Colony counter

Microbial isolation and drug sensitivity assay of homoeopathic drugs



Pharmacology Laboratory at DDPCRI (H), NOIDA



Zebra fish laboratory



Isolation of larva of Zebra fish.



Zebra fish is a popular model in scientific research for *in vivo* as well as *in vitro* studies. Council has established Zebra fish lab at DDPCRI(H), NOIDA to find out the therapeutic value as well as safety of homoeopathic medicines.



Zebra fish breeding set-up and evaluation of embryo and larvae developmental stages.



F.) Pharmacological work: Standardization models for the studies to be undertaken in respect of pharmacological activity of seven homoeopathic medicines on Zebrafish and the embryo toxicity have also been developed.

Antimicrobial study “Evaluation of antifungal activity of 15 Homoeopathic medicines on the growth of human pathogenic strain *Candida albicans*, *Microsporium canis*

and *Aspergillus niger* in SDA media” and “Evaluation of antibacterial activity of 04 homoeopathic medicines on the growth of human pathogenic Bacteria *E. coli*”, *Proteus mirabilis* and 03 homoeopathic medicines on *K. pneumonia* has been completed.

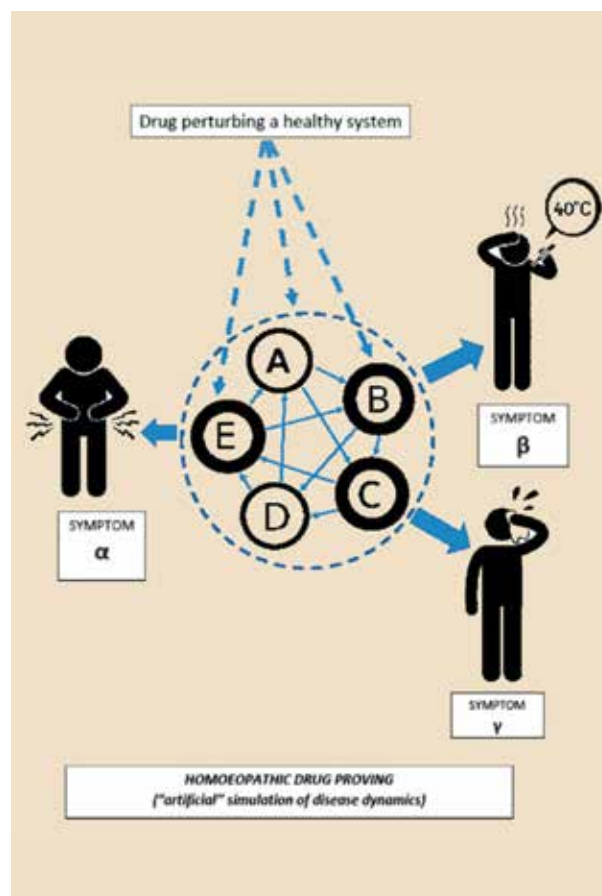
The Drug Standardization Section of the Council has published 23 research papers, 04 books and 05 Drug Monographs from 2017 onwards.

Drug Proving Research Programme (Homoeopathic Pathogenetic Trial)

The challenge of finding a simple drug substance to treat complex diseases in a dynamic living system is incredible. The very foundation of Homoeopathy is based on the action of drug substances on the living systems and therefore, the earliest experiments conducted in Homoeopathy were those of Drug Proving. Trials conducted on healthy human beings elicit the finer symptoms of the drug as compared to the gross toxicological symptoms evident from animal studies. These more subtle subjective and objective symptoms form the profile of the drug recorded in the Homoeopathic Materia Medica.

These studies are similar, but not identical to Phase 1 trials conducted in Allopathy. The latter also involve testing of the drug substance on healthy human volunteers. However, the stark contrast between the two systems is highlighted here. On one hand, the Phase I trial is designed primarily to reduce the risk of serious (drug) toxicity and avoid confounding pharmacologic and adverse effects; and also to assess pharmacokinetics, whereas in Homoeopathic drug proving, sub-material or ultra-molecular doses of potentially toxic or pathogenic substances are given to healthy human beings to produce symptoms and generate new indications for clinical use of the homoeopathic

medicine. Drug proving process is unique to Homoeopathy wherein as per law of similia, symptoms are collected through proving of drug substances on healthy human beings on a predecided protocol. The symptoms so generated through experimentation are clinically verified forming the basis of Homoeopathic Materia Medica thereby enriching homoeopathic armamentarium.





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Drug provings have been an important activity of research in India. Various authorities in Homoeopathy have proved drugs, native to India and drugs used by other Indian systems of medicine have been adopted in Homoeopathy, following derivation of their symptomatology as per the Homoeopathic Drug provings.

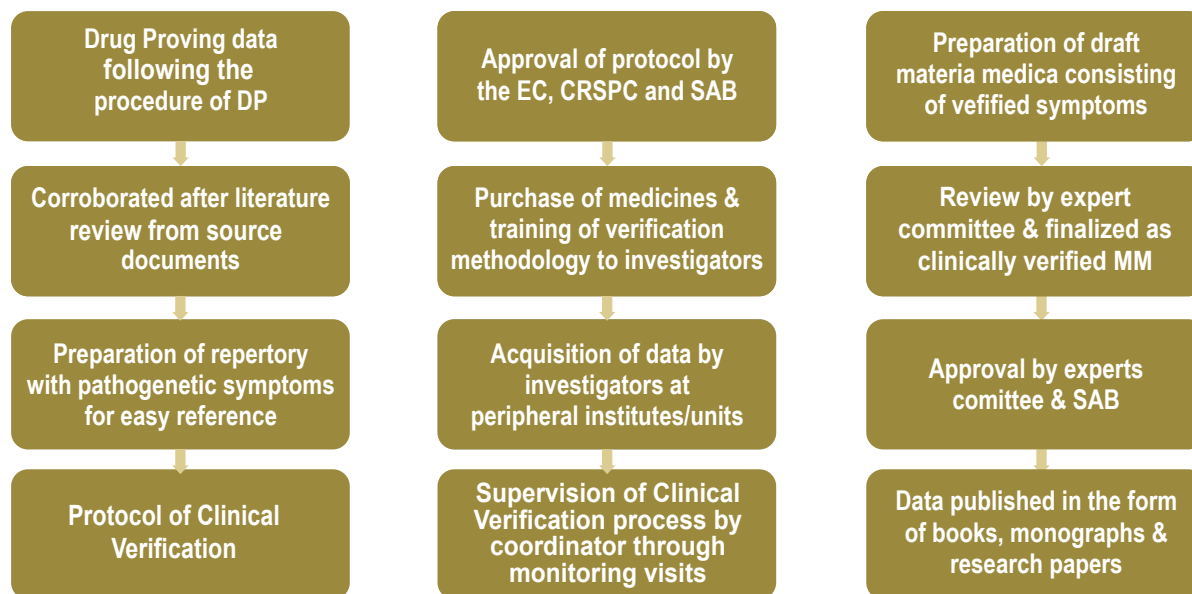
The Central Council for Research in Homoeopathy (CCRH) has undertaken it as a continuing research programme since its inception with its focus on proving of fragmentarily proved drugs and indigenous drugs whose standardization studies (physico-chemical and pharmacognostic parameters) has been completed. The objective of the programme is to find out the homoeopathic symptomatology of indigenous and partially (proved) homoeopathic drugs on healthy human volunteers. The Council has roped in various homoeopathic medical colleges for Drug Proving Programme by involving students and faculty to insure transparency & accuracy in the work. It also provides guidelines to homoeopathic colleges for their drug proving programme, Recently it has been proposed that homoeopathic dilutions of

commonly used allopathic drugs whose toxicological studies have been done and have known side effects should be taken up for drug proving research trials.

Till now, the CCRH has methodically proved 120 drugs, out of which 90 drugs are of plant origin, 09 are of animal origin, 19 are prepared from chemicals, 01 Sarcocolla and 01 is a Nosode. Out of these 120 drugs, 19 new drugs have been proved by the Council. The Council is collaborating with 13 Homoeopathic medical colleges and has provided technical support to 03 Homoeopathic colleges for conducting drug proving.

The CCRH prepared a Drug Proving Protocol on double blind technique, taking positive leads from protocols followed by different international homoeopathic organizations. The protocol was published in the British Homoeopathic Journal. The re-proving of *Tarentula hispanica* validated this protocol wherein about forty symptoms as mentioned in the original proving appeared in the re-proving. These were also verified clinically under the clinical verification programme.

Clinical Verification



The Clinical Verification of homoeopathic drugs implies actual application of these drugs on persons with disease to eiterate the similia principle of Homoeopathy and to compile an evidence base of actual action of drug substance on individuals with diseases. The Council is conducting clinical verification of symptomatic data of homoeopathic medicines, including those proved by the Council and some fragmentarily proved drugs that have been observed to be clinically useful. The verification involves verifying the drug proving data clinically to determine reliable indications of the drugs, on which prescriptions can be based.

Verification of drug symptoms give more reliability and helps us in

creating an authentic Materia Medica. CCRH has been conducting clinical verification studies of indigenous, rare and fragmentarily proved drugs since its inception in 1975. Some of these drugs are first proved by CCRH. The programme is multicentric, as per open clinical trial design in which patients are enrolled from O.P.D. as and when they come, on confirmation of inclusion criteria in accordance with the protocol. The homoeopathic medicines are prescribed on the basis of symptom similarity. The individualistic symptoms of each case are evaluated as per the Materia Medica & repertorial index especially devised for the programme from the proving data.

Clinical Verification of symptomatic data of 118 drugs have been conducted

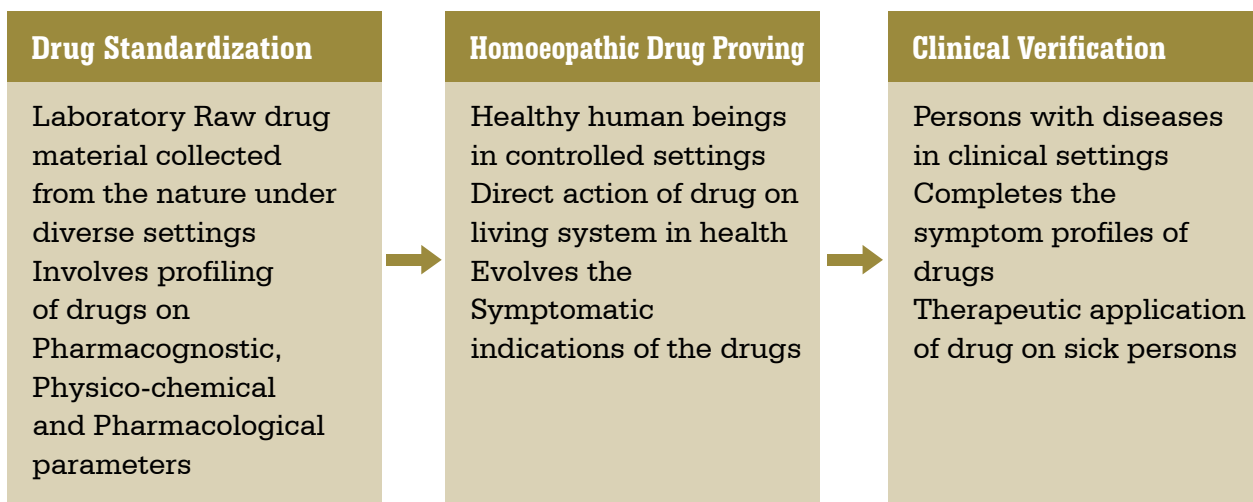


so far. It includes 78 remedies of plant origin, 27 remedies of chemical origin, 10 remedies of animal origin, 02 nosodes and 01 sarcode.

Thousands of proving symptoms have been verified multicentrically in atleast 09 to 16 centres in over 20,000 study participants in this flagship programme of the Council. Currently 08 more drugs proved by the Council are being verified.

The drug development process in Homoeopathy, therefore, moves from standardization of a drug substance to ascertaining its therapeutic potential followed by its verification in clinical settings.

The Clinical Verification Section of the Council has published 02 research papers, 01 book and 05 Drug Monographs from 2017 onwards.



Some of the plants of Indian origin whose Drug Standardisation homoeopathic pathogenetic trials and clinical verification studies have been completed are as under:



Calotropis gigantea

Botanical name: *Calotropis gigantea* (L.) R. Br.

Common names:

English: Gigantic madder, Swallow-wort

Hindi: Madar, Akanda, Ark, Akond, Aak, Lalak,

Lalmadar, Safedak.

Clinical conditions verified:

Anorexia, Arthritis, Backache, Conjunctivitis, Constipation, Headache, Ringworm, Sore throat, Tonsillitis.



Carica papaya

Botanical name: *Carica papaya* L.

Common names:

English: Papaya, Papaw.

Hindi: Papeeta, Popaiyah, Arandkharbuza, Papita.

Clinical conditions verified:

Backache, Conjunctivitis, Constipation, Coryza, Cough, Depression, Difficulty in concentration, Dyspepsia, Fever, Headache, Sore throat, Toothache, Urinary tract infection, Vertigo.



Curcuma longa

Botanical name: Curcuma longa L.

Common names:

English: Turmeric.
Hindi: Haldi, Halda.

Clinical conditions verified:

Arthritis, Conjunctivitis, Cough, Dyspepsia, Headache, Toothache, Urinary tractinfection, Vertigo



Hydrocotyle asiatica

Botanical name: Centellaa siatica (L.) Urban

Common names:

English: Indian pennywort, Centella.
Hindi: Brahma manduki, Khulakhudi, Brahmibuti.

Clinical conditions verified:

Acne, Anorexia, Arthritis, Backache, Dandruff, Dropsy, Dyspnoea, Eczema, Laryngitis, Psoriasis, Ringworm, Scabies, Urticaria.



Juglans regia

Botanical name: Juglans regia L.

Common names:

English: Walnut
Hindi: Akharot, Akhroot, Akor, Khor.

Clinical condition verified:

Acne, Boils, Constipation, Headache, Indigestion, Stye, Toothache, Urticaria.



Mangifera indica

Botanical Name: Mangifera indica L.

Common names:

English: Mango Tree
Hindi: Aam, Amba, Kairi.

Clinical condition Verified:

Anorexia, Aphthous ulcer, Arthritis, Coryza, Epistaxis, Forgetfulness, Glossitis, Headache, Haemorrhoids, Insomnia, Sore throat, Tonsillitis, Toothache, Varicose veins, Vertigo.



Digitalis purpurea

Botanical name: *Digitalis purpurea* L.

Common names:

English: Fox glove, Purple fox glove

Clinical uses:

Hypertension, Hypertrophy and valvular diseases of heart, Jaundice, Rheumatism



Echinacea purpurea

Botanical name: *Echinacea purpurea* (L.) Moench

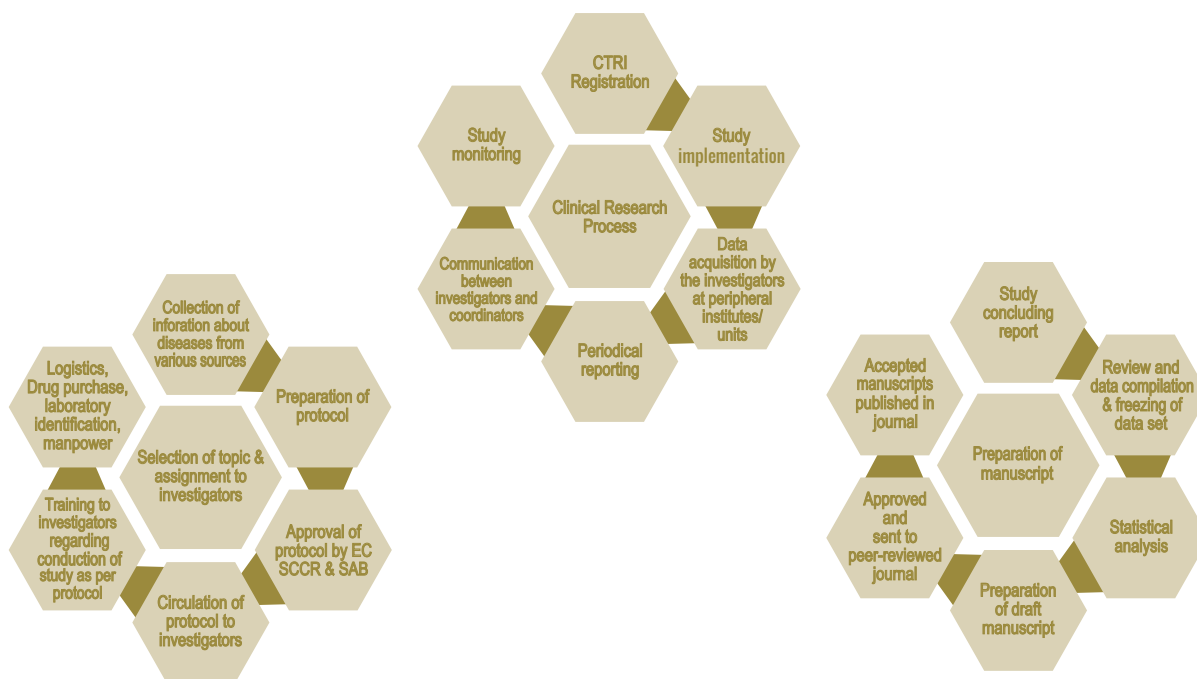
Common names:

English: Purple corn flower

Clinical uses:

Acidity, Blood poisoning, Boils, Diarrhoea, Goitre, Headache, Septic conditions.

Clinical Research



The Clinical Research in Homoeopathy helps in generating, validating and consolidating scientific evidences (in terms of safety, efficacy and effectiveness) of homoeopathic medications, procedures and treatment regimes. This may be used in prevention, treatment of various diseases, decision making for stakeholders thus improving clinical care.

The Council has traversed a path from prospective observational studies to Gold Standard Randomized Controlled studies. Various studies were concluded and new studies were initiated from time to time as per the guidance of Scientific Advisory Board (SAB). Multicentric clinical studies were conducted to ascertain therapeutic utility of a smaller group of medicines on

the protocols developed in consultation with the experts in respective fields from All India Institute of Medical Sciences (AIIMS), Indian Council of Medical Research (ICMR), National Institute of Communicable Diseases (NICD), National AIDS Control Organization (NACO), eminent homoeopathic educators and researchers. Presently as per the need of the hour, randomized controlled trials (RCT) are being conducted. Research is conducted on modern scientific parameters without violating the doctrines of Homoeopathy. Emphasis was laid upon the clinical evaluation of homoeopathic medicines in disease conditions of national health importance, where no curative treatment is available



in conventional medicine, diseases, which are endemic in certain parts of the country, and the so-called surgical diseases. The main objectives of CCRH in Clinical research are clinical confirmation of drug-pathogenesis, to identify a group of useful medicines & their clinical indications in the areas where Homoeopathy has strength. The studies were conducted with formulated protocols and identified laboratory parameters for outcome assessment. The results of some of these studies have been published in the National, International journals as well as in the Council's Quarterly Bulletins and Indian Journal of Research in Homoeopathy which is a peer reviewed journal for the dissemination.

Till date Council has undertaken 187 studies on various diseases, out of which 145 studies are concluded (116 were observational studies and 29 randomized clinical trials) and 19

studies were withdrawn. The Council is currently undertaking 23 studies at its various research institutes/units across the country. The salient achievements in clinical studies have been in Acute encephalitis syndrome, Simple and mucopurulent bronchitis, Benign prostatic hyper plasia, Urolithiasis, Menopause and Adenolymphangitis.

The system wise distribution of studies commonly undertaken is shown in figure 1: Infectious diseases, 35 (18.8%); Respiratory disorders, 24(12.9%); Dermatological disorder, 21 (11.3%); Endocrinological disorders/ life style disorders, 18 (9.7%); Gastrointestinal disorders, 15(8.1%); Rheumatological disorder, 12 (6.5%); Mental disorders, 10 (5.4%); and Gynaecological & Obstetric disorders, 9 (4.8%). The detailed list of conditions on which studies undertaken are given at table 1.

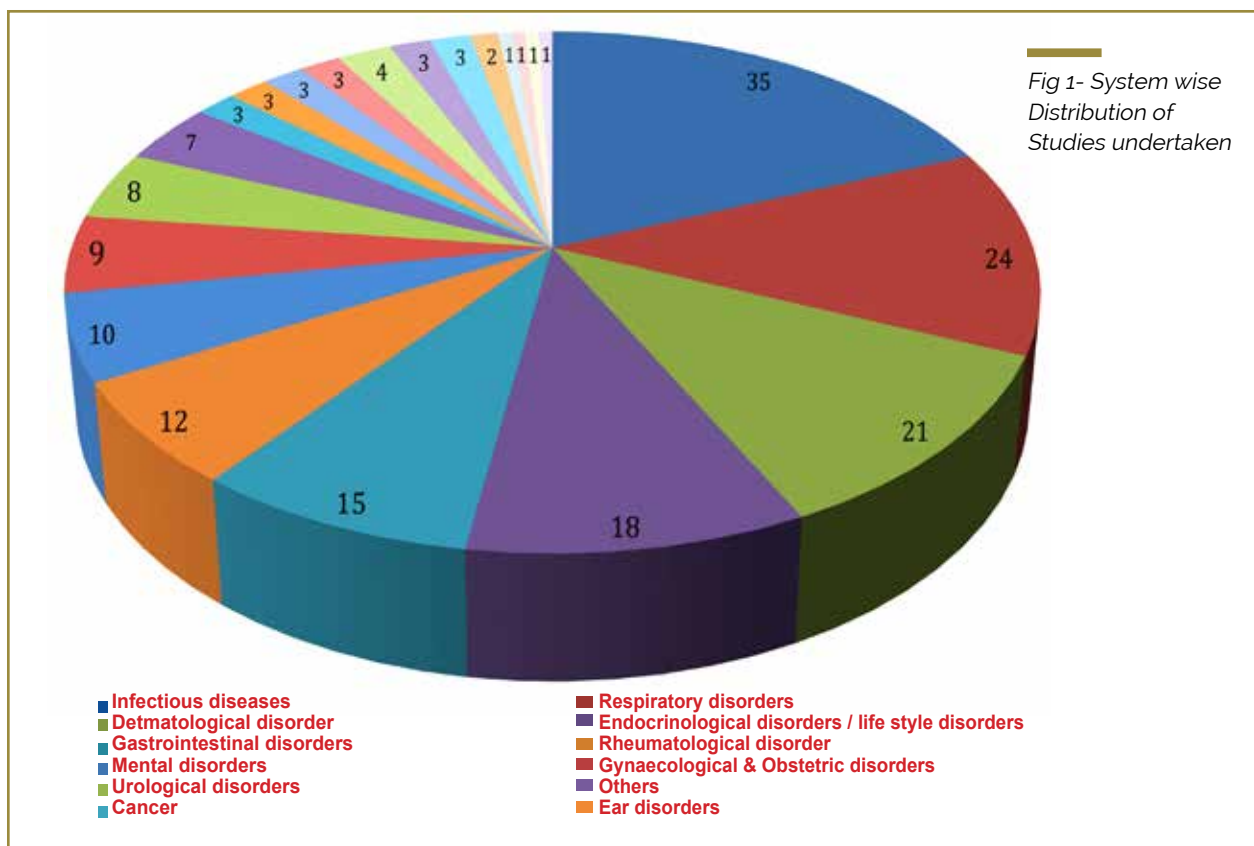


Table 1: STUDIES UNDERTAKEN

Sl. No.	Sl. No.	Name of Disease	Period of Study
Mental Disorders			
1.	1.	Autism (RCT)	2012-2017
2.	2.	Treatment resistant Schizophrenia (RCT)	2012-2017
3.	3.	Attention Deficit Hyperactivity Disorder (Pilot RCT)	2009-2011
4.	4.	Depressive Episode (Observational study)	2005-2010
5.	5.	Schizophrenia (Observational study)	2005-2010
6.	6.	Behavioural disorders (Dis.R, GA)	1984-2005
7.	7.	Mental retardation (Dis. R, GA)	1991-2001
8.	8.	Behavioural disorders (DR GA)	1990-2000
Nervous System Disorders			
9.	1.	Migraine (Validational Observational Study)	2016-2020
10.	2.	Epilepsy (Dis.R, GA)	1980-2003
Eye Disorders			
11.	1.	Cataract (DR TA)	2003-2005 (Study withdrawn)
Ear Disorders			
12.	1.	Acute Otitis Media (RCT)	2014-15-2018
13.	2.	Acute Otitis Media (RCT)	2009-2010
14.	3.	Middle ear infection(DR TA)	2003-2005
Oral Disorders			
15.	1.	Oral disorders(DR TA)	2003-2005 (Study withdrawn)
16.	2.	Periodontitis (Dis. R, GA)	2003-2005
17.	3.	Flurosis (STOBS)	2003-2005
Throat Disorders			
18.	1.	Adenotonsillar hypertrophy (Observational Study)	2017-2020
19.	2.	Tonsillitis (Dis. R GA)	1995-2003
20.	3.	Tonsillitis(DR TA)	1988-2003
Respiratory Disorders			
21.	1.	Bronchial Asthma (Validation)	2016-2020
22.	2.	Drug validation acute and chronic cough (phase I study)	2016-2018
23.	3.	Chronic Rhinosinusitis (RCT)	2012-2014
24.	4.	Influenza Like Illness	2009-2010
25.	5.	Chronic sinusitis (Observational study)	2005-2010
26.	6.	Simple and mucopurulent chronic bronchitis (Observational study)	2005-2010
27.	7.	Tropical eosinophilia	2005-2006 (Study withdrawn)



Sl. No.	Sl. No.	Name of Disease	Period of Study
28.	8.	Respiratory Infections (DR TA)	2003-2005
29.	9.	PNS (Para nasal sinusitis)(DR TA)	2003-2005
30.	10.	Tropical eosinophilia (Dis.R, GA)	2003-2005
31.	11.	Bronchitis(Dis.R, GA)	2001-2005
32.	12.	PNS (Para nasal sinusitis)(DR TA)	1985-2005 2005-2006 (Study withdrawn)
33.	13.	Upper Respiratory Tract Infection (Dis.R, GA)	1995-2004
34.	14.	Bronchitis (DR TA)	1991-2003
35.	15.	Rhinitis (DR TA)	1989-2003
36.	16.	Bronchial Asthma (DR TA)	1988-2003
37.	17.	Sinusitis (DR TA)	1988-2003
38.	18.	Sinusitis (Dis. R, GA)	1984-2003
39.	19.	Bronchial asthma (Dis.R, GA)	1978-2003
40.	20.	Bronchial asthma (DR GA)	1991-2000
41.	21.	Allergic Rhinitis (Dis. R, GA)	1989-1994
Gastro Intestinal Disorders			
42.	1.	Functional Dyspesia (Validational Observational Study)	2016-2020
43.	2.	Haemorrhoids (Validational Observational Study)	2016-2020
44.	3.	Non-Erosive Gastroesophageal Reflux Disease (Observational study)	2014-2015
45.	4.	Hemorrhoidal disease	2009-2010
46.	5.	Gastroenteritis (Observational study)	2005-2008
47.	6.	Cholera/Gastroenteritis(DR TA)	2003-2005
48.	7.	Jaundice (DR TA)	2003-2005 (Study withdrawn)
49.	8.	Irritable bowel syndrome (Dis.R, GA)	1998-2005
50.	9.	Gastritis (Dis.R, GA)	1987-2005
51.	10.	Dysentery (Dis.R, GA)	1988-2003
52.	11.	Dysentery (DR TA)	1988-2003
53.	12.	Gastroenteritis (DR TA)	1988-2003
54.	13.	Peptic ulcer (DR TA)	1988-2003
55.	14.	Cholelithiasis (DR GA)	1990-2000
Endocrinal Disorders/ Life Style Disorders			
56.	1.	Sub clinical hypothyroidism follow up	2016-2018
57.	2.	Dyslipidaemia (RCT)	2013-2018
58.	3.	Hypertension (RCT)	2013-2018
59.	4.	Pre-diabetes (RCT)	2013-2018
60.	5.	Diabetic Foot Ulcer (RCT)	2014-2017
61.	6.	Diabetic Distal Symmetric Polyneuropathy (RCT)	2013-2015

Sl. No.	Sl. No.	Name of Disease	Period of Study
62.	7.	Diabetic Distal Symmetric (primarily sensory) Polyneuropathy (Observational study)	2005-2009
63.	8.	Diabetic Foot Ulcer (Observational study)	2005-2009
64.	9.	Diabetic neuropathy/ Diabetic Foot Ulcer (Dis. R, GA)	2003-2005
65.	10.	Goiter (DR TA)	2005-2009 (Study withdrawn)
66.	11.	Hypertension (DR TA)	2003-2005
67.	12.	Hypothyroidism (DR,TA)	2003-2005 (Study withdrawn)
68.	13.	Low-density-lipoproteinemia (Dis.R, GA)	1992-2003
69.	14.	Hypertension (Dis.R, GA)	1990-2003
70.	15.	Diabetes mellitus (DR TA)	1988-2003
71.	16.	Cephalandra indica in hyperglycemia (DRGA)	1986-2003
72.	17.	Diabetes mellitus (Dis.R, GA)	1974-1993
Gynecological and Obstetric Disorders			
73.	1.	Breast fibroadenoma (RCT)	2014-2018
74.	2.	Polycystic Ovarian Syndrome (PCOS) (RCT)	2014-2015
75.	3.	Sepia in Menopause (RCT)	2012-2014
76.	4.	Uterine fibroid	2009-2011
77.	5.	Distressing during Climacteric Years (Observational study)	2005-2009
78.	6.	Menstrual disorders/Menopausal Syndrome (DR TA)	2003-2005
79.	7.	Cervicitis & Cervical Erosion (Dis.R, GA)	1981-2004
80.	8.	Malposition of human foetus (DR GA)	1985-2003
81.	9.	Menorrhagia (DR GA)	1985-2003
82.	10.	Cervicitis & Cervical erosion (DR TA)	1994-2003
Urological Disorders			
83.	1.	Benign Prostatic Hyperplasia (RCT)	2012-2015
84.	2.	Urolithiasis (RCT)	2012-2015
85.	3.	Benign Prostatic Hyperplasia (Observational study)	2005-2010
86.	4.	Urolithiasis (Observational study)	2005-2010
87.	5.	Benign Prostatic Hyperplasia (Observational study)	2003-2005
88.	6.	Prostatic enlargement (Dis.R, GA)	1996-2003
89.	7.	Renal calculi (Dis.R, GA)	1986-2003
Rheumatic Disorders			
90.	1.	Adhesive capsulitis (Observational Study)	2019-2020
91.	2.	Non Specific Low Back Pain (RCT)	2017-2019
92.	3.	Osteoarthritis Knee (Double blind RCT)	2015-2018
93.	4.	Cervical spondylosis (Double blind RCT)	2012-2013
94.	5.	Cervical spondylosis-pain management (Open label RCT)	2009-2010
95.	6.	Traumatic arthritis (Dis.R, GA)	2003-2005



Sl. No.	Sl. No.	Name of Disease	Period of Study
96.	7.	Osteoarthritis (Dis.R, GA)	1984-2005
97.	8.	Osteoarthritis (DR GA)	1994-2005
98.	9.	Arthritis (DR TA)	1988-2003
99.	10.	Cervical spondylosis (DR GA)	1998-2003
100.	11.	Osteoarthritis (DR TA)	1988-2003
101.	12.	Rheumatoid arthritis (Dis.R, GA)	1988-2003
Dermatology Disorders			
102.	1.	Psoriasis follow up study	2019-2020
103.	2.	Vitiligo follow up study	2019-2020
104.	3.	Acne (Validation Observational Study)	2016-2020
105.	4.	Psoriasis follow up study	2017-2019
106.	5.	Vitiligo follow up study	2017-2019
107.	6.	Psoriasis (Observational study)	2015-2018
108.	7.	Vitiligo (Observational study)	2014-2018
109.	8.	Vitiligo (Observational study)	2005-2010
110.	9.	Furunculosis (Observational study)	2005-2008
111.	10.	Leucoderma (DR, TA)	1993-2003
112.	11.	Skin disorder (Atopic dermatitis, scabies) (DR, TA)	1987-2003
113.	12.	Vitiligo (DR GA)	1987-2003
114.	13.	Scabies/Furunculosis	2003-2005 (Study withdrawn)
115.	14.	Corns (Dis.R, GA)	1981-1985
116.	15.	Warts (Dis. R, GA)	1981-1985
117.	16.	Alopecia areata (Dis.R, GA)	1978-1985
Infectious Diseases			
118.	1.	Acute Encephalitis Syndrome (Case control observational study)	2016-2017
119.	2.	Acute Encephalitis Syndrome (RCT)	2013-2015
120.	3.	Leptospirosis (RCT)	2012-2015 (Study withdrawn)
121.	4.	Lymphatic Filariasis (RCT)	2012-2014
122.	5.	Acute encephalitis syndrome (AES) (observational comparative study)	2012-2013
123.	6.	Kala azar	2010-2011 (Study withdrawn)
124.	7.	Leptospirosis (Observational study)	2009-2010
125.	8.	HIV infection (Observational study)	2008-2010
126.	9.	HIV infection (DR)	2005-2008 (Study withdrawn)
127.	10.	HIV infection(Dis. R)	2005-2008 (Study withdrawn)
128.	11.	Malaria	2005-2006 (Study withdrawn)
129.	12.	Communicable diseases (Dis. R, GA)	2003-2005

Sl. No.	Sl. No.	Name of Disease	Period of Study
130.	13.	Fevers(DR TA)	2003-2005
131.	14.	Giardiasis (Dis. R, GA)	1998-2005
132.	15.	HIV/AIDS (Multicentric study) (Dis. R, GA)	1989-2005
133.	16.	Leprosy (Dis.R, GA)	2003-2005 (Study withdrawn)
134.	17.	HIV/AIDS (DR GA)	1998-2004
135.	18.	Amoebiasis (DR TA)	1988-2003
136.	19.	Amoebiasis (Dis. R, GA)	1982-2003
137.	20.	Amoebiasis (DR GA)	1987-2003
138.	21.	Filariasis (Dis. R, GA)	1979-2003
139.	22.	Filariasis (DR GA)	1982-2003
140.	23.	Filariasis (DR TA)	1999-2003
141.	24.	Helminthiasis (DR GA)	1980-2003
142.	25.	Helminthiasis (DR TA)	1988-2003
143.	26.	Intermittent fever (Dis.R, GA)	1989-2003
144.	27.	Japanese encephalitis (DR GA)	1988-2002
145.	28.	Malaria (Dis.R, GA)	1979-2003
146.	29.	Malaria (DR TA)	1987-2003
147.	30.	HIV/AIDS (Double blind placebo control trial) (Dis. R, GA)	1995-1997
148.	31.	HIV/AIDS (Pilot study) (Dis.R, GA)	1989-1991
149.	32.	Poliomyelitis (Dis.R, GA)	1986-1988 (Study withdrawn)
150.	33.	Mumps (Dis.R, GA)	1980-1986 (Study withdrawn)
Geriatric Disorders			
151.	1.	Geriatric disorders (Dis.R, GA)	2003-2005
Paediatric Disorders			
152.	1.	Acute otitis media (Pilot RCT)	2009-2010
153.	2.	Acute Diarrhoeal Diseases in Children (Observational study)	2005-2008
154.	3.	Acute Rhinitis in children (Observational study)	2005-2008
155.	4.	Acute tracheobronchitis (Observational study)	2005-2008
156.	5.	Paediatric problems (Dis. R, GA)	2003-2005
157.	6.	Paediatric diarrhea (Dis. R, GA)	1998-2003
Cancer			
158.	1.	Oral mucositis due to side effects of chemotherapy/radiotherapy in cancer patients	2016-2019
159.	2.	Side effects of Cancer (Observational study)	2012-2017
160.	3.	Malignancy (DR GA)	1984-1993
161.	4.	Malignancy (Dis. R, GA)	1988-1991
Nutritional Disorders			
162.	1.	Iron deficiency anemia (Observational study)	2015-2017



Sl. No.	Sl. No.	Name of Disease	Period of Study
163.	2.	Marasmus(DR TA)	2003-2005 (Study withdrawn)
164.	3.	Iron deficiency anemia (Dis. R, GA)	1995-2000
Substance Abuse Disorders			
165.	1.	Alcohol Dependence (RCT)	2012-2014
166.	2.	Drug de-addiction(Dis.R, GA)	1988-1994
Others			
167.	1.	Paronychia (Observational Study)	2019-2020
168.	2.	Calendula for burn injury	2017-2018
169.	3.	Flourosis (DR, TA)	2003-2005 (Study withdrawn)
170.	4.	Rheumatic heart disease(Dis. R, GA)	2003-2005 (Study withdrawn)
171.	5.	Sickle cell anemia(Dis. R, GA)	1987-2004
172.	6.	Tuberculinum (linical proving) (Dis. R, GA)	1979-1988

The various aspects of clinical research can be broadly divided into two types, viz., observational and experimental. The basic difference between these two types is that in the earlier studies the effects of a risk factor, diagnostic tests, treatments or other interventions in a natural environment without any experimental manipulation, whereas in an experimental

study, the investigator administers an intervention to patients and the effect of this intervention is documented. Council contributes to both the study designs. Till date, Council has undertaken 136 observational studies and 35 randomized controlled trials. Figure below shows the breakup of it.

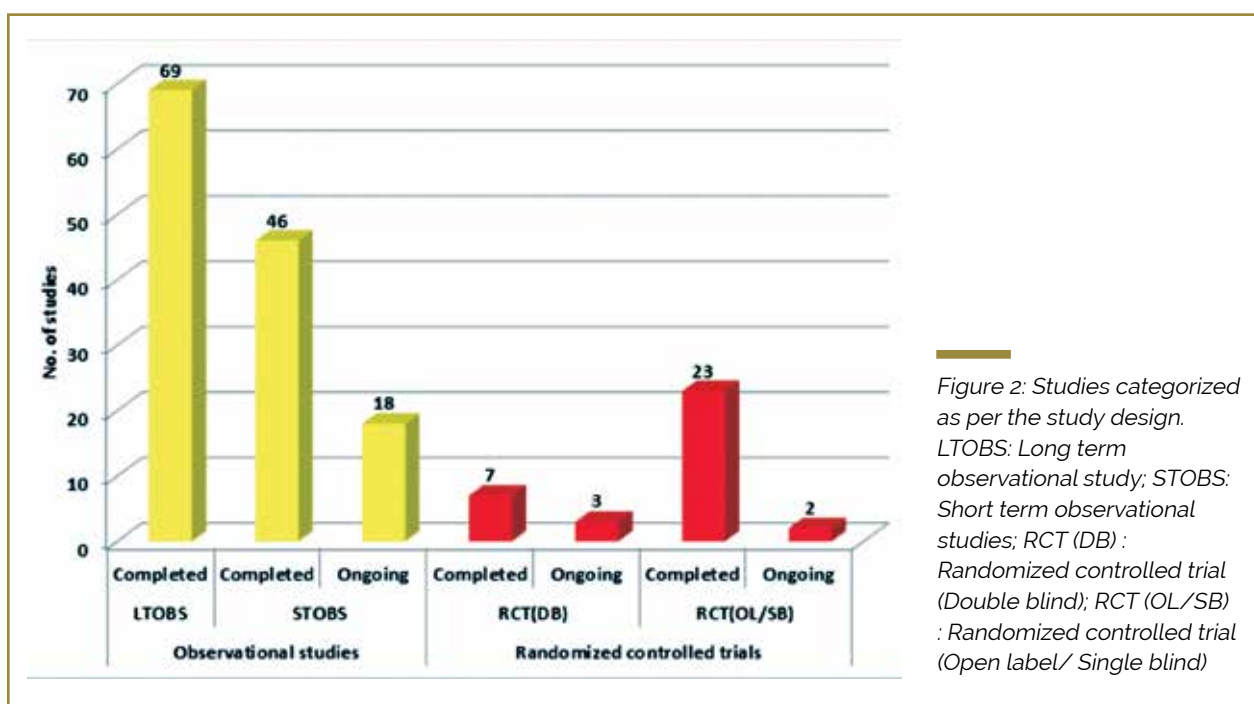


Figure 2: Studies categorized as per the study design. LTOBS: Long term observational study; STOBS: Short term observational studies; RCT (DB) : Randomized controlled trial (Double blind); RCT (OL/SB) : Randomized controlled trial (Open label/ Single blind)

Presently Council is conducting clinical research studies on conditions like trigeminal neuralgia, adjustment disorders, hemophilia, warts, adenotonsillar hypertrophy, lymphatic filariasis, rheumatoid arthritis, sub clinical hypothyroidism, urinary tract infection, validation studies on acne, dyspepsia,

asthma, cough, migraine, and haemorrhoids etc. These studies are aimed at conducting research on modern scientific parameters without compromising the doctrines of Homoeopathy. The details of the research projects and study centers are given below:

Sl. No.	Short Study Title	Place of work indicating State/U.T.
1.	Prognostic factor Assessment of homoeopathic medicines for cough: Explorative prospective study.	1. Uttar Pradesh, Dr. D. P. Rastogi Central Research Institute(H), Noida
		2. Kerala, National Homoeopathy Research Institute in Mental Health (NHRIMH), Kottayam
		3. Telangana, Drug Standardization Unit, Hyderabad
		4. Maharashtra, Regional Research Institute (H), Mumbai
		5. West Bengal, Dr. Anjali Chatterjee Regional Research Institute (H), Kolkata
		6. Tripura, Regional Research Institute (H), Agartala
		7. Odisha, Regional Research Institute (H), Puri
		8. Odisha, Extn. Unit of RRI(H, Puri at Bhubaneswar)
		9. Rajasthan, Regional Research Institute (H), Jaipur
		10. Andhra Pradesh, Regional Research Institute (H), Gudivada
2.	Warts (Observational study)	1. West Bengal, Dr. Anjali Chatterjee Regional Research Institute (H), Kolkata
		2. Andhra Pradesh, Regional Research Institute (H), Gudivada
		3. Odisha, Regional Research Institute (H), Puri
		4. Kerala, National Homoeopathy Research Institute in Mental Health (NHRIMH), Kottayam
3.	Warts-RCT	1. Uttar Pradesh, Dr. D.P. Rastogi Central Research Institute(H), Noida
		2. Rajasthan, Regional Research Institute (H), Jaipur
		3. Maharashtra, Regional Research Institute (H), Mumbai
		4. Tripura, Regional Research Institute (H), Agartala
4.	Rheumatoid Arthritis	1. Uttar Pradesh, Dr. D. P. Rastogi Central Research Institute(H), Noida
		2. Maharashtra, Regional Research Institute (H), Mumbai
		3. Kerala, National Homoeopathy Research Institute in Mental Health (NHRIMH), Kottayam
		4. Andhra Pradesh, Regional Research Institute (H), Gudivada



Sl. No.	Short Study Title	Place of work indicating State/U.T.
5.	Lymphatic filariasis	Odisha, Regional Research Institute (H), Puri
6.	Patient Reported Outcome Study	1. Uttar Pradesh, Dr. D.P Rastogi Central Research Institute(H), Noida
		2. Kerala, National Homoeopathy Research Institute in Mental Health (NHRIMH), Kottayam
		3. Manipur, Regional Research Institute (H), Imphal
		4. Himachal Pradesh, Regional Research Institute (H), Shimla
		5. Uttar Pradesh, Homoeopathic Drug Research Institute (H),Lucknow
		6. Tripura,Regional Research Institute (H), Agartala
		7. Assam,Regional Research Institute (H), Guwahati
		8. Odisha, Regional Research Institute (H), Puri
		9. West Bengal,Clinical Research Unit(H), Siliguri
		10. Andaman & Nicobar Islands,Clinical Research Unit (H), Port Blair
		11. Odisha, Ext. centre of Regional Research Institute (H), Puri
		12. Telangana,Drug Standardization Unit(H), Hyderabad
		13. Andhra Pradesh, Clinical Research Unit(H), Tirupati
		14. Mizoram, Clinical Research Unit(H), Aizwal
		15. Puducherry (UT),Clinical Research Unit(H), Pudducherry
		16. Bihar, Clinical Verification Unit (H), Patna
7.	Adjustment Disorders	1. West Bengal, Dr. Anjali Chatterjee Regional Research Institute (H), Kolkata
		2. Sikkim, Clinical Research Unit (T), Gangtok
		3. Kerala, National Homoeopathy Research Institute in
		4. Mental Health (NHRIMH), Kottayam
		5. Odisha, Regional Research Institute (H), Puri
		6. Jharkhand, Clinical Research Unit (H), Ranchi
		7. Bihar, Clinical Verification Unit (H), Patna
8.	Urinary Tract Infection	1. West Bengal, Dr. Anjali Chatterjee Regional Research Institute (H), Kolkata
		2. Kerala, National Homoeopathy Research Institute in
		Mental Health (NHRIMH), Kottayam
		3. Uttar Pradesh, Dr. D. P. Rastogi Central Research Institute(H), Noida

Sl. No.	Short Study Title	Place of work indicating State/U.T.
9.	Sub-clinical Hypothyroidism-RCT	Dr. B. R. Sur Homoeopathic Medical College, Hospital and Research Centre, New Delhi
10.	Adenotonsillar Hypertrophy	1. Telangana, Ext. Unit of Drug Standardization Unit, Hyderabad
		2. Himachal Pradesh, Regional Research Institute (H), Shimla
		3. Uttar Pradesh, Dr. D. P. Rastogi Central Research Institute(H), Noida
		4. Kerala, National Homoeopathy Research Institute in Mental Health (NHRIMH), Kottayam
		5. Tripura,Regional Research Institute (H), Agartala
11.	Validation study on Migraine	1. West Bengal, Dr. Anjali Chatterjee Regional Research Institute (H), Kolkata
		2. Assam, Regional Research Institute (H), Guwahati
		3. Puducherry (UT), Clinical Research Unit (T), Puducherry
12.	Validation study on Acne	1. Kerala, National Homoeopathy Research Institute in Mental Health (NHRIMH), Kottayam
		2. Maharashtra, Regional Research Institute (H), Navi Mumbai
		3. Uttar Pradesh, Homoeopathic Drug Research Institute, Lucknow
		4. Tripura,Clinical Research Unit (T), Agartala
13.	Validation study on Asthma	1. Uttar Pradesh, Dr. D. P. Rastogi Central Research Institute(H), Noida
		2. Kerala, National Homoeopathy Research Institute in Mental Health (NHRIMH), Kottayam
		3. Telangana,Drug Standardization Unit (H), Hyderabad
14.	Validation study on Haemorrhoids	1. Manipur, Regional Research Institute (H), Imphal
		2. Andhra Pradesh, Regional Research Institute (H), Gudivada
		3. West Bengal, Clinical Research Unit (H), Siliguri
		4. Homoeopathic Treatment Centre, Safdarjung Hospital, New Delhi
15.	Validation study on dyspepsia	1. Odisha, Regional Research Institute (H), Puri
		2. Andaman & Nicobar Islands,Clinical research Unit (H), Port Blair
		3. Tamil Nadu, Homoeopathic Research Institute for Disabilities, Chennai

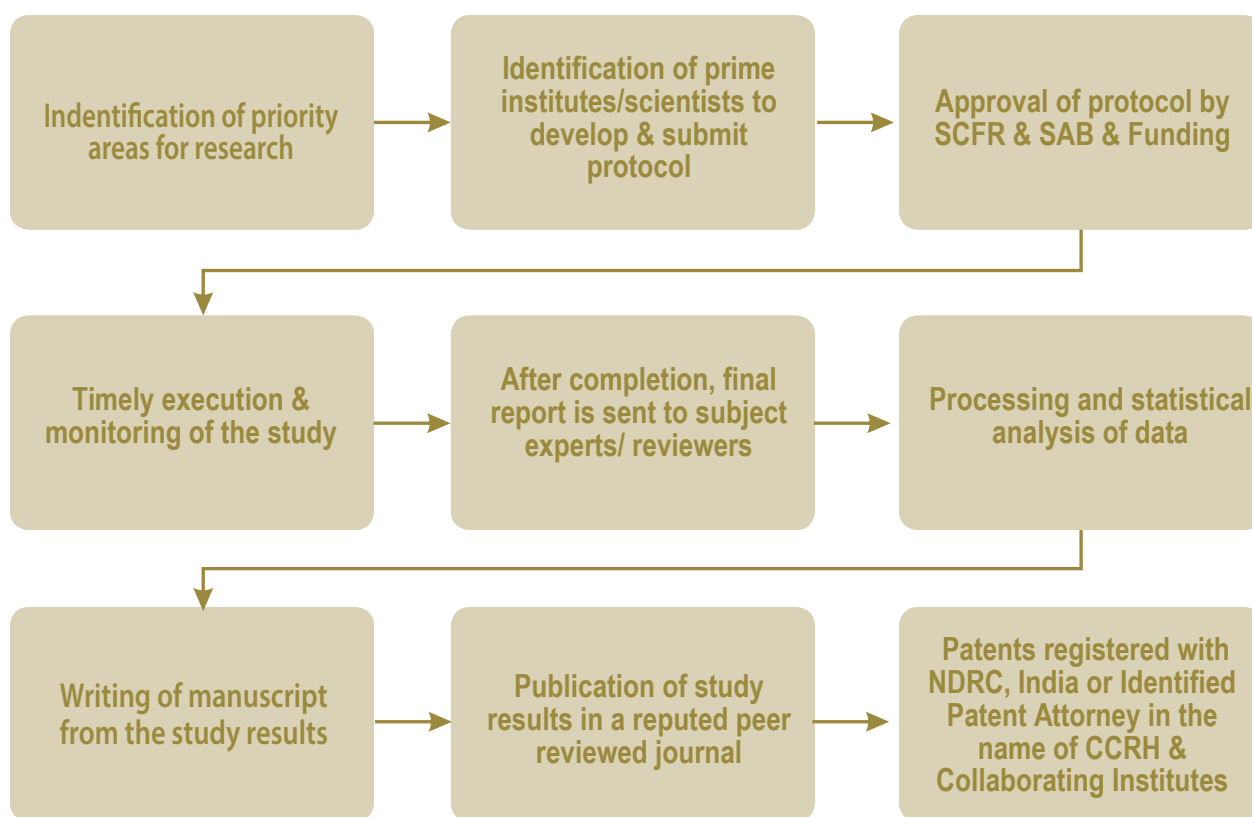


Sl. No.	Short Study Title	Place of work indicating State/U.T.
16.	Vithoulkas Compass	1. Odisha, Regional Research Institute (H), Puri
		2. Uttar Pradesh, Dr. D. P. Rastogi Central Research Institute(H), Noida
		3. Sikkim, Clinical Research Unit (T), Gangtok
		4. West Bengal, Clinical Research Unit (H), Siliguri
		5. National Homoeopathy Research Institute in Mental Health (NHRIMH), Kottayam
		6. Assam, Regional Research Institute (H), Guwahati
		7. Manipur, Regional Research Institute (H), Imphal
		8. West Bengal, Dr. Anjali Chatterjee Regional Research Institute (H), Kolkata
		9. Telangana, Drug Standardization Unit, Hyderabad
		10. Maharashtra, Regional Research Institute (H), Mumbai
		11. Bihar, Clinical Verification Unit, Patna
17.	Haemophilia	Maharashtra, Motiwala Homoeopathic Medical College and Hospital through Regional Research Institute, Mumbai
18.	Adhesive capsulitis	West Bengal, Clinical Research Unit (H), Siliguri
19.	Paronychia	West Bengal, Clinical Research Unit (H), Siliguri
20.	Trigeminal Neuralgia	Janakpuri Super Specialty Hospital, New Delhi
21.	Intellectual disabilities	Tamil Nadu, Homoeopathic Research Institute for Disabilities, Chennai
22.	Comparison of Conventional; Homoeopathic paradigms for infants	Telangana, JIMS Homoeopathic Medical College and Hospital, Hyderabad

Publications:

The Council has published 407 studies in peer reviewed journals since inception till date.

Fundamental and Collaborative Research

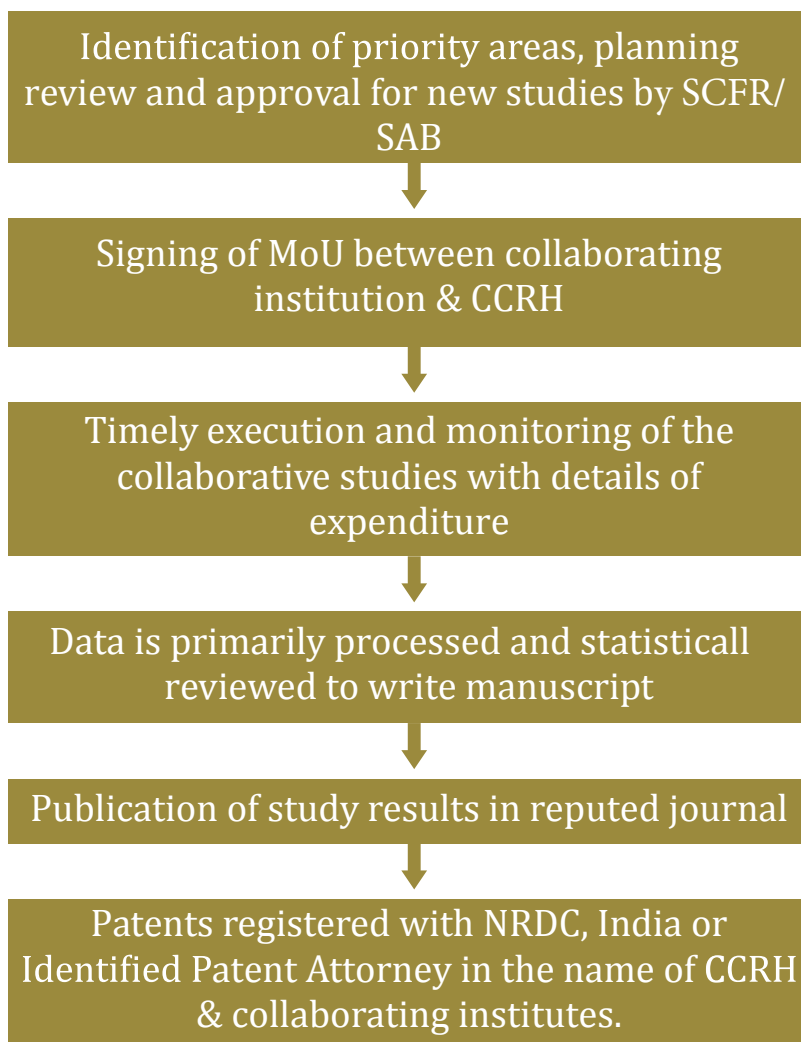


Fundamental Research

In the past few decades, homoeopathic system of medicine has been able to spark scientific minds to explore the plausibility, action and nature of this system especially on basic and fundamental aspects. This increase in research activity is attributed to clinical efficacy & safety of homoeopathic medicines. Scientists are now keen to

undertake experiments to learn the basic nature and action of Homoeopathic medicines, which is evident from the growing number of publications every year from various countries.

Although few studies were taken up prior to 2005 (Effect of Homoeopathic medicines on ovaries; as an infertility effect; in combating hepatitis B virus,



Collaborative Research

drug addiction etc.). Special focus was made from 2005 onwards on fundamental and basic research. Though collaborations taken up prior to 2005 has been published in “Collaborative Studies in Homoeopathy”.

Since 2005, Council has collaborated with best of intellectual minds to undertake state of art research in fundamental and clinical aspects. Till date the section has concluded 29 national and 03 international studies with more than 20 institutes of excellence and published 16 national and 18 international peer reviewed publications. This liaison has opened a new era of

research in Homoeopathy. During the past decade the understanding of various phenomenon of Homoeopathy have been ventured into. For example, we now know that homoeopathic medicines have nano structure of source substance; homoeopathic medicines like *Calcarea carbonicum*. and *Thuja occidentalis* are capable of inducing apoptosis in cancer cells via genetic pathway (p53). Two homoeopathic preparations of *Syzygium jambolanum* and *Cephalandra indica* exhibited antidiabetic effects by favouring glucose uptake and oxidation through improvement in insulin secretion and expression of insulin signaling molecules;

homoeopathic medicines like *Lycopodium clavatum*, and *Mercurius solubilis* have pharmacological actions on mice and are safe, non-toxic and effective on certain parameters even in potencies beyond avogadro's (unpublished data); *Belladonna* in high potency (200C) is capable of halting Japanese encephalitis infection in chorio-allantoic membrane of chick, and also induced immunity to suckling mice when mother mice was administered with it. There are many more studies which have earned high acclaims in scientific world.

The Council aims to undertake evidence-based, inter-disciplinary, translational research studies to validate the efficacy/concepts of Homoeopathy on scientific parameters, and to establish the hypothesis/concepts generated from studies done in past. Keeping this mandate in mind, the Council plans to undertake research studies in key areas like epigenetics, physical structure & nature of homoeopathic medicines, diagnostic and prognostic biomarkers for homoeopathic medicines, veterinary, agrohomoepathy etc. CCRH has now taken a vital step to promote scientists for undertaking fundamental and basic research in collaboration by inviting them to submit proposal on pre-defined priority areas through expression of interest. This will facilitate the researchers to come forward and work to explain Homoeopathy scientifically. The Council in collaboration with 13 institutes of excellence has conducted the following studies.

1. Physicochemical studies of homoeopathic drug formulations by using volumetric, acoustic, viscometric, optical and conductometric measurements. Dyal

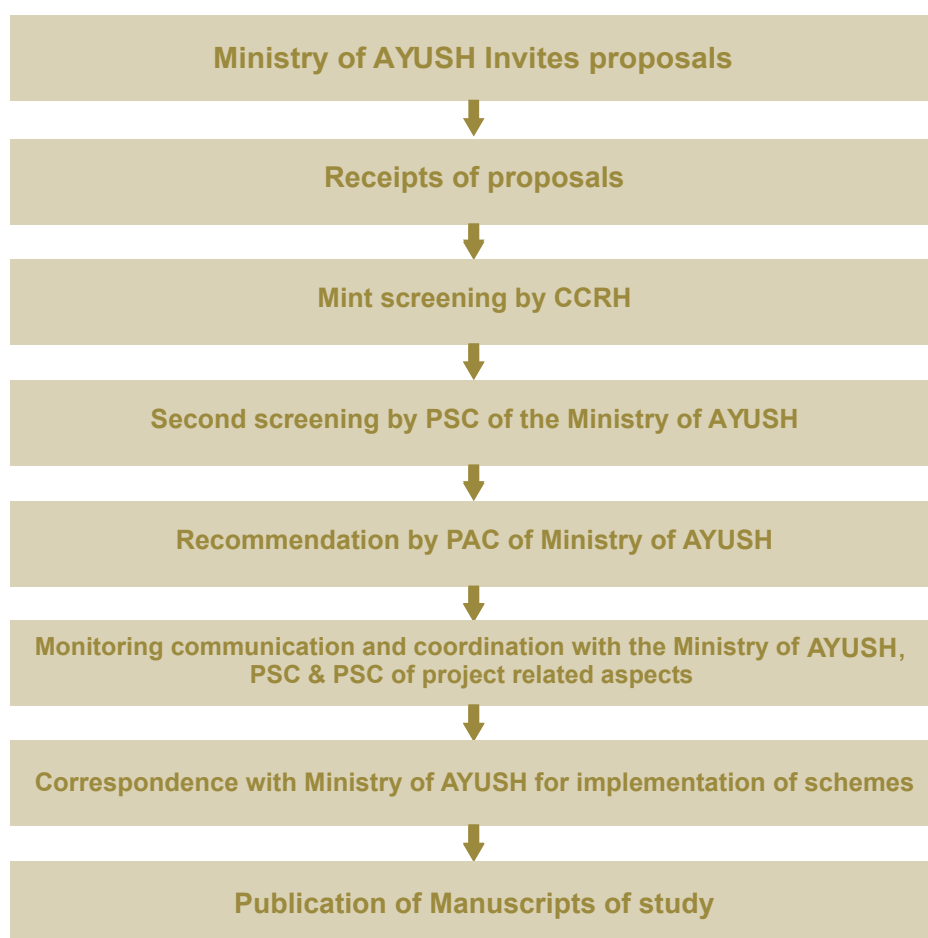
Singh College, New Delhi.

2. In vitro approaches to investigate the efficacy and mechanism of action of homoeopathic medicines against hormone dependent and independent Breast and Prostate Cancer, AMITY University, Noida.
3. Preparation of NOSODE from *Escherichia coli* and *Vibrio cholerae*: their preclinical effectiveness and safety evaluation. NICED, Kolkata.
4. A pilot research proposal to explore the mechanism of action by anti-dengue homeopathic medicine, *Eupatorium perfoliatum*, ICGEB, New Delhi.
5. Evaluation of anti-fungal activity of certain Homoeopathic medicines on growth of human pathogenic fungi "Candida albicans" using in-vitro assays. DDPRCRI(H), Noida
6. Evaluation of anti-fungal activity of certain Homoeopathic medicines on growth of human pathogenic fungi "Aspergillus niger" using in-vitro assays. DDPRCRI(H), Noida
7. Evaluation of anti-fungal activity of certain Homoeopathic medicines on growth of human pathogenic fungi "Microsporum canis" using in-vitro assays. DDPRCRI(H), Noida.
8. Screening of antibacterial activity of certain homoeopathic medicines on the growth of human pathogenic Gram-negative bacterial strain *Escherichia coli* in-vitro models, DDPRCRI(H), Noida.
9. Screening of antibacterial activity of certain homoeopathic medicines on the growth of human pathogenic Gram-negative bacterial strain *Klebsiella pneumonia* in-vitro models, DDPRCRI(H), Noida.
10. Screening of antibacterial activity



- of certain homoeopathic medicines on the growth of human pathogenic Gram-negative bacterial strain *Proteus mirabilis* in-vitro models, DDPRCRI(H), Noida.
11. Efficacy of the Homoeopathic preparation of *Berberis vulgaris* to alleviate acute oxalate toxicity: An insight into lithogenic events with special reference to crystallization and inflammation, ALMPGI, Madras University.
 12. Safety studies and pharmacological screening of Homoeopathic Drugs-Dengue Nosodes developed from Dengue virus. AIIMS, New Delhi.
 13. Understanding the Mechanism of action of homoeopathic medicine at molecular level in nano domains in-vivo and in-vitro systems, CIRE, Kolkata.
 14. Effect of homoeopathic medicines on dengue virus infection on mosquito cell line and in suckling mice, DACRRI(H), Kolkata. (Jan. 2015)
 15. Estimation of viral load and immune response in JE virus infected adult and suckling mice treated with *Belladonna*, DACRRI(H), Kolkata. (Jan. 2015)
 16. Elucidation of molecular mechanism of action of *Belladonna* – *Calcarea Carbonica* – *Tuberculinum Bovinum* (BCT) during Japanese Encephalitis Infection, CCMB, Hyderabad (KGMU, Lucknow). (March 2015)
 17. Understanding the Mechanism of action of homoeopathic medicine at molecular level in nano domains in-vivo and in-vitro systems, CIRE, Kolkata. (March 2015)
 18. A randomized double-blind placebo controlled multicentric trial on the efficacy of homoeopathic medicine on sub-clinical hypothyroidism (RCT). (June 2015)
 19. Follow up cross sectional study of Subclinical Hypothyroidism children post three years of treatment. (June 2015)
 20. Effects of Potentized Homoeopathic medicines in Agriculture (Agro-Homoeopathy): An eco-friendly alternative solution for synthetic fertilizers and pesticides, IMMT, Bhubaneshwar. (May. 2015)
 21. To study the effect of homeopathic drugs on ultra-structure of mid-gut cells derived from *Aedes albopictus*, DACRRI(H), Kolkata. (Jan. 2015)
 22. Prophylactic effect of Homeopathic anti-malaria drugs on malaria - A prevention effectiveness study in Odisha, Odisha. (Dec. 2016)
 23. To evaluate the anti-leishmanial potential of some homoeopathic drugs in experimental visceral leishmaniasis Panjab University, Chandigarh. (Aug. 2016)
 24. Evaluation of antimalarial efficacy of some homeopathic drugs against *Plasmodium falciparum* in vitro and against *Plasmodium berghei* in vivo Panjab University, Chandigarh. (Aug. 2016)
 25. Pharmacological screening of Homeopathic drugs used in rheumatoid arthritis, AIIMS, New Delhi. (Feb. 2017)

Extra Mural Research Scheme of Ministry of AYUSH



The Ministry of AYUSH supports scientists in the country to conduct research in Homoeopathy. The scheme encourages research in high priority areas to ascertain efficacy of treatment, better understanding of homoeopathic principles and respond to various public health concerns.

Objectives of the scheme:

- To support research and development in Extra Mural mode for treatment of prioritized diseases.
- To standardize/validate and develop scientific evidence for safety, efficacy and quality of



AYUSH drugs & therapies.

- To make scientific exploration of AYUSH system with interdisciplinary approaches.
- To achieve need-based outcome in a priority areas.
- To develop the potential of human resource in AYUSH system specially to inculcate aptitude and expertise to AYUSH systems.

The Extra-Mural Research scheme of the Ministry of AYUSH is designed to encourage R&D in priority areas based on disease burden in alignment to National Health Programmes. It also aims to utilize the vast research infrastructure available

within the country for standardization and validation of classical drugs. This scheme is meant for focused outcome in tandem with the needs of AYUSH sector and also encourages young scholars of AYUSH system, to use their wisdom and energy in research of AYUSH system on modern scientific parameters.

CCRH is providing technical expertise in scrutinizing new projects relating to Homoeopathy, received for grant-in-aid under this scheme of the Ministry of AYUSH.

Epidemic Research

There is increasing incidence of infectious diseases during past decade. In majority of these diseases there are no therapeutic or preventive measures available. The new virus, identified as novel coronavirus, first detected in Wuhan, is another contagious epidemic which has spread globally. To worsen the situation, there is increase in resistance strains to existing antibiotics. Further, due to changes in biodiversity, international human movement, urbanization, this situation escalates disease spread. India is worst affected from all categories of emerging infectious diseases. Currently, Dengue, Ebola and Influenza are included in top ten global threat disease list by World Health Organization. Government of India also had given emphasis to control AIDS, tuberculosis, malaria and neglected tropical diseases etc. by 2030.

Homoeopathy historically has been used successfully in prevention of infectious diseases. There are anecdotal evidences of use of Homoeopathy in prevention of epidemic diseases since its inception; these need further exploration on scientific grounds. Keeping in view the current state of epidemic disease management, Council took a step forward and initiated various preventive studies for control of diseases like Dengue, Chikungunya, Japanese Encephalitis (JE)

and Malaria etc. during recent years.

Council has further planned to utilize preclinical evidence for undertaking field trials both in public health and clinical settings for efficacy of the homoeopathic interventions as preventive as well as curative in epidemic diseases respectively. Homoeopathy offers prevention in epidemic diseases through its concept of genus epidemicus, which means a remedy which is found to be curative in most cases of the same disease is also the most likely preventive for that disease.

Central Council for Research in Homoeopathy, through its network of 24 Institutes/ Units all over India is conducting medical relief camps in communicable diseases since its inception. Council had taken a randomized control trial on Chikungunya in 2007 and Influenza like illness in 2010. The various communicable diseases on which CCRH has conducted medical camps are conjunctivitis, dengue, Japanese encephalitis, bacillary dysentery, yellow fever, jaundice, typhoid, measles, meningitis, cholera, viral fevers, kalaazar, plague, malaria, chikungunya and recent past swine flu and chikungunya. Homoeopathic medicines were distributed for various disease conditions as mentioned above as per the genus epidemicus for preventive purpose.



Similarly, homoeopathic medicines were given for treatment purpose after a person was infected with the said disease tailored to the patient as per individualization.

From time to time Council has issued advisories to make the public aware about Dengue, Chikungunya and various epidemic disorders.



INFLUENZA LIKE ILLNESS

Influenza is one of the most common infectious and highly contagious airborne disease that occurs in seasonal epidemics and manifests as an acute febrile illness with variable degrees of systemic symptoms, ranging from mild fatigue to respiratory failure and death. Following researches are conducted by CCRH on influenza:

1. Effectiveness of *Influenzinum* in prevention of Influenza like Illness (ILI) – A comparative cohort study-2018
2. Efficacy of *Influenzinum* in Influenza like Illness (ILI) as a function of illness severity- A prospective double-blind placebo control trial
3. Effectiveness of *Influenzinum* in prevention of Influenza like Illness (ILI) – A comparative cohort study.

VECTOR-BORNE DISEASES

Evidence that Homoeopathy may be

effective in prevention of the vector-borne diseases, as well as an add-on therapy, especially in reducing the intensity of the disease and decreasing the duration of stay at hospital is enough to invoke more studies on this front, with better methodology and compliance levels.

With the increasing understanding of role of Homoeopathy in epidemics and more rigorous trials, future epidemics, it is hoped, will be tackled with better strategies and management plan.

1. CHIKUNGUNYA

There is no specific treatment for chikungunya. Supportive therapy that helps ease symptoms, such as administration of non-steroidal anti-inflammatory drugs, and getting plenty of rest, may be beneficial. Homoeopathy has been effective in various kinds of fever including chikungunya. The

data present in literature mentions several medicines like *Belladonna*, *Eupatorium perfoliatum*, *Bryonia alba*, *Phosphorus* etc. as effective medicines for the disease. Trials conducted on this disease have been able to validate a few of the medicines which are usually prescribed in Chikungunya. In 2006, a homoeopathic preventive *Eupatorium* 30C was distributed to 1061 people with significant prevention ($p < 0.0001$). Another preventive trial was conducted by CCRH in 2007 where homoeopathic medicine *Bryonia* 30C was distributed as a preventive to 19, 750 people in

Kerala and *Bryonia alba* 30C was found to be better than placebo in decreasing the incidence of chikungunya in Kerala. Further, a prospective observational study was conducted on 126 patients of Chikungunya in Chikungunya Fever (CF) and in Post-Chikungunya Chronic Arthritis (PCCA) in a Delhi Government Homoeopathic Dispensary for a period of 6 months. A single homoeopathic medicine was prescribed for each patient after case taking with the help of *Materia Medica* and/or *Repertory*. The study resulted in complete recovery in 84.5% CF cases in a mean time of 6.8 days. 90%

Name of the Epidemics/ Calamities	Place of occurrence	Period of camp organized by CCRH	Genus Epidemicus identified
Chikungunya	Islands of Androth, Kalapani, Lakshwdeep	11 th -17 th December, 2006	<i>Bryonia alba</i> 200
	Hyderabad (Andhra Pradesh)	June-Sept. 2006	<i>Eupatorium perf.</i> 200
	Gudivada	June-Oct., 2006	<i>Rhus toxicodendron</i> 200
	Kerala	14 th Sept.-25 th Oct. 2006	<i>Bryonia alba</i> 30

Sl. No.	Disease condition	Study design	Sample size studied	Outcome Evidence grade	Evidence Grade
1.	Chikungunya	Randomized double blind placebo controlled trial	38247	The findings showed that 2525 out of 19750 persons of <i>Bryonia alba</i> 30C group suffered from chikungunya, compared to 2919 out of 18479 in placebo group. Cluster analysis showed significant difference between the two groups [rate ratio = 0.76 (95% CI 0.14 - 5.57), P value = 0.03]. The result reflects a 19.76% relative risk reduction by <i>Bryonia alba</i> 30C as compared to placebo.	A
2.	Chikungunya Fever and Post-Chikungunya Chronic Arthritis	Observational study	126	A single homoeopathic medicine was prescribed for each patient after case taking with the help of <i>Materia Medica</i> and/or <i>Repertory</i> . Complete recovery was seen in 84.5% Chikungunya Fever (CF) cases in a mean time of 6.8 days. 90% cases of Post-Chikungunya Chronic Arthritis (PCCA) recovered completely in a mean time of 32.5 days. Homoeopathic therapy may be effective in CF and PCCA.	B



cases of PCCA recovered completely in a mean time of 32.5 days.

These results suggest the possible role of Homoeopathy in both prevention

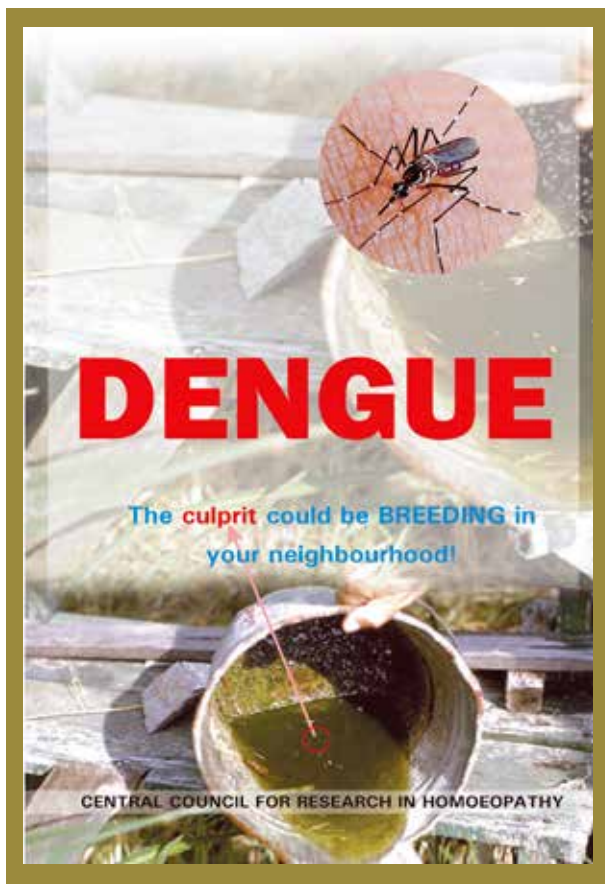
2. DENGUE FEVER

The dengue epidemic is not a country-specific health problem, but a global burden, with most parts of world trying to find ways to fight it, especially so when the dengue vaccine is not existing yet. Homoeopathic literature mentions several medicines for treatment of dengue fever. Out of which *Eupatorium perfoliatum* is one of the most frequently indicated medicines. Even the cases that Council collected through its online data recording software during the last year epidemic, pointed towards *Eupatorium perfoliatum*. Further, the clinical

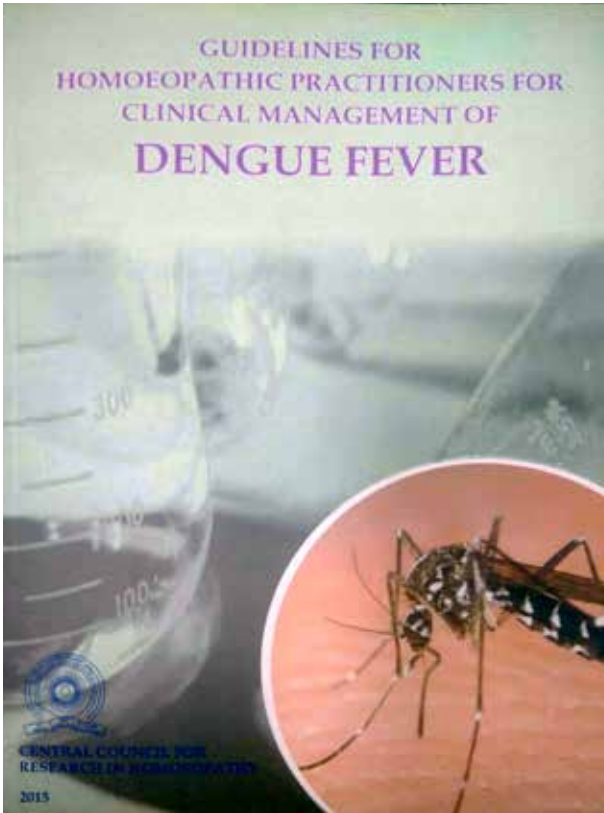
and treatment and call for more studies on this condition with better designs and larger sample size.

presentation reflected through 72 cases of dengue fever observed by the team deputed at one of the hospitals of Delhi again suggests *Eupatorium perfoliatum* as a key drug. Moreover, most studies carried out on dengue have validated the use of *Eupatorium* as the only or one of the drugs. Based on these observations and facts, Council announced *Eupatorium perfoliatum* 30 as the preventive drug for the ongoing outbreak in an Advisory through Ministry of AYUSH. The Council also creates awareness among the public by distributing IEC material in the form of handouts of the Dengue.

Studies carried out for evaluating the role of homoeopathic treatment of dengue fever have been encouraging, with evidence reported from Brazil and Cuba. In Brazil, in May 2001, a single dose of the homoeopathic remedy *Eupatorium perfoliatum* 30C decreased the incidence of dengue by 81.5%. Again in early 2007, a homoeopathic complex against dengue containing Phosphorus 30C, *Crotalus horridus* 30C and *Eupatorium perfoliatum* 30C decreased the incidence of the disease by 93%, whereas in the rest of the state there was an increase of 128%. Further, in 2012, a double blind, placebo-controlled randomized trial was conducted on dengue patients using the same homoeopathic complex, to evaluate the effectiveness of homoeopathic intervention in dengue epidemic. The intervention group showed improvement in most symptoms including headache, fever and myalgia. In Cuba, 25,000



IEC material to create awareness among the public



Guidelines for Homoeopathic Practitioners

patients who tested positive for dengue were treated with homoeopathic complex containing medicines *Bryonia alba*, *Eupatorium p.*, *Gelsemium s.* and Dengue nosode with significant improvement in clinical condition and reduction in days of stay at hospital.

For information and education of a homoeopathic practitioner dealing with dengue cases, Guidelines for Homoeopathic Practitioners for Clinical Management of Dengue have been developed by CCRH.

These guidelines aim to present all relevant details to a practitioner in daily clinical practice for management of cases diagnosed or suspected to be of dengue and are available at the Council's website. Council has also created an online data recording software for organized data management and subsequent analysis of dengue cases treated with Homoeopathy;

link: <http://www.ccrhdengueinfo.org>
Following researches have been conducted by CCRH:

1. Effectiveness of *Eupatorium perfoliatum* vis- a-vis health awareness in preventing dengue & chikungunya fever during outbreak – An open cluster level study-2018
2. Effect of add on *Eupatorium perfoliatum* 30 with health awareness in preventing dengue and chikungunya fever during outbreak- A comparative cohort study
3. Effectiveness of *Eupatorium perfoliatum* vis-à-vis health awareness in preventing dengue & chikungunya fever during outbreak – an open cluster level study



Health awareness in preventing dengue & chikungunya fever during out break– An open cluster level study-2018

4. Effectiveness of *Eupatorium perfoliatum* as preventive in dengue fever outbreak – A cluster randomized, double blind, parallel arm, placebo controlled trial
5. Effectiveness of *Eupatorium perfoliatum* as preventive in dengue fever outbreak – A cohort study
6. To assess the effect of public health advisory on use of homoeopathic medicines for prevention of dengue - population based study



Name of the Epidemics/ Calamities	Place of occurrence	Period of camp organized by CCRH	Genus Epidemics identified
Dengue	Delhi	1982; 1996	<i>Denguinum 30</i>
	Kottayam, Kerala	2012	<i>Nux vomica 30</i>
	Delhi	2012	<i>Eupatorium perfoliatum 30</i>

Sl. No.	Collaborating Institute	Title of the Article	Model	Outcome (s)
1.	Dr. Anjali Chatterjee Regional Research Institute for Homoeopathy, Kolkata	An observation on direct changes in <i>Aedes albopictus</i> midgut cells by <i>Rhus tox 6C</i> in relation to dengue virus infection	In-vitro (Cell culture from <i>Aedes albopictus</i> midgut)	<i>Rhus tox 6C</i> could increase cell size and help organization of cells on the solid surface as observed under scanning electron microscope although the total number of cells was decreased. Moreover, <i>Rhus tox 6C</i> treated cells were healthier as indicated by less number of deformed clump and diploform cells.
2.	Dr. Anjali Chatterjee Regional Research Institute for Homoeopathy, Kolkata	Increased NS1 Antigen Expression By Dengue Virus Infected Vero Cells Under Influence of Ultra Diluted Timber Rattle snake Venom (<i>Crotalus 6C</i>)	In-vitro (Vero cell line)	Ultra diluted Timber rattle snake (<i>Crotalus horridus</i>) venom extract increases NS1 antigen significantly in comparison to the controls.
3.	Department of Microbiology, St. Xavier's College, Kolkata, West Bengal Department of Microbiology, Institute of Post Graduate Medical Education & Research, Kolkata	Increased NS1 Antigen Expression By Dengue Virus Infected Vero Cells Under Influence of Ultra Diluted Timber Rattle snake Venom (<i>Crotalus 6C</i>)	In-vitro (Vero cell line)	<i>Eupatorium perfoliatum</i> extract is used frequently to treat dengue fever. Quercetin, a plant polyphenolic flavanoid is an important constituent of <i>E. perfoliatum</i> . Quercetin has been found to possess potent antiviral property against many viral diseases including Flavi viruses. This study, explored

Sl. No.	Collaborating Institute	Title of the Article	Model	Outcome (s)
	Dr. Anjali Chatterjee Regional Research Institute of Homoeopathy, Kolkata			its effect and role on proinflammatory cytokines in HepG2 cells infected with wild virulent dengue viruses of NS1 antigen positive patients' sera, and compared their regulation with respect to the house-keeping gene Beta-Actin. With quercetin cell aggregates were less, Although there were no statistically significant change of TNF- α and IFN- α , but there was significant down regulation of IL-1 β in quercetin treated virus challenged HepG2 cells.

3. JAPANESE ENCEPHALITIS (JE)/ACUTE ENCEPHALITIS SYNDROME (AES)

In India, until August 2015, 5294 cases of AES/JE had been reported with 839 deaths. Maximum cases have been from Uttar Pradesh, West Bengal, Tripura, Tamil Nadu and Assam. Homoeopathic literature mentions several medicines for treatment of AES/JE like *Belladonna*, *Calcarea carbonica*, *Tuberculinum bovinum*, *Veratrum viride*, *Stramonium* etc. Validation of some of these medicines has been conducted and the results are inconcurrence with the literature on these medicines.

Central Council for Research in Homoeopathy carried out research studies for prevention and treatment of JE during its epidemics in eastern parts of U.P. in 1989, 1991 and 1993. *Belladonna* 200, single dose was distributed as preventive to 3,22,812 persons in 96 villages in three districts of U.P. In a follow up of 39,250

persons, none of them reported any signs and symptoms of Japanese encephalitis. During the year 1999-2003, the government of Andhra Pradesh adopted *Belladonna- Calcarea carbonica-Tuberculinum bovinum* (BCT) regimen as preventive and the response was encouraging. The death rate was nil in the BCT distributed areas. Council has also conducted preclinical studies in collaboration with School of Tropical Medicine, Kolkata in both in vitro and in vivo models. Homoeopathic medicine *Belladonna* could inhibit JE virus infection in both the models significantly. Another exploratory observational study was undertaken by the Council in IPD setting (epidemic ward) of Baba Rhaghav Das (BRD) Medical College and Nehru Hospital, Uttar Pradesh (July to November 2012) using convenience sampling, with successful reduction in mortality and morbidity rate. Council is continuing the JE treatment study at BRD Medical College to acquire more data on larger sample.



Name of the Epidemics/ Calamities	Place of occurrence	Period of camp organized by CCRH	Genus Epidemicus identified	Other medicines used for treatment
Japanese Encephalitis	Midnapore, West Bengal	1984	<i>Gelsemium 30</i>	<i>Apis mellifica 30, Arsenicum album 30, Gelsemium 30</i>
	Tripura, (Agartala) Gudivada, Hyderabad, (Andhra Pradesh) Diphu (Assam)	1986	<i>Opium, Stramonium, Hyoscyamus, Belladonna</i>	<i>Arsenic alb. Antim. tart., Belladonna, Bryonia, Gelsemium, Rhus tox.</i>
	Gorakhpur, Basti, Maharajganj (Uttar Pradesh)	1989, 1990	<i>Belladonna 200</i>	<i>Belladonna, Bryonia, Causticum, Cicuta virosa, Gelsemium, Helleborus, Rhus tox.</i>
	Gorakhpur, UP	28 th Dec –4 th Jan. 1992	<i>Belladonna 200</i>	
	Gorakhpur, UP	Sep.-Oct. 2005	<i>Belladonna 200</i>	
	Muzzafarpur (Bihar)	June 1995	<i>Belladonna 200</i>	<i>Arsenic alb. 30, Helleborus 30</i>
	Imphal	July 2010	<i>Belladonna 200</i>	

Sl. No.	Collaborating Institute	Title of the Article	Model	Outcome (s)
1.	School of Tropical Medicine, Kolkata.	Decreased intensity of Japanese encephalitis (JE) virus infection in chick chorioallantoic membrane under influence of ultra diluted <i>Belladonna</i> extract.	Chorioallantoic membrane of chick embryo	<i>Belladonna</i> in 3C, 6C, 30C and 200C significantly decreased pock count in Chorioallantoic membrane in comparison to JE virus control and could inhibit JE virus infection in the membrane.
2.	School of Tropical Medicine, Kolkata	Suckling mice of <i>Belladonna 200C</i> fed mothers evade virulent Nakayama strain Japanese encephalitis virus infection	Suckling mice	Average survival of suckling mice of mother fed with <i>Belladonna 200C</i> was significantly higher compared to control group.

Sl. No.	Collaborating Institute	Title of the Article	Model	Outcome (s)
3.	Department of Livestock Product Technology, College of Veterinary and Animal Sciences, Sardar Vallabhbhai Patel University of Agriculture and Technology, Meerut, Uttar Pradesh, India	Changes in viral load in different organs of Japanese Encephalitis virus infected chick embryo under the influence of <i>Belladonna</i> 200C	Chick embryo	The control group showed visible pocks over the CAM; brains were liquefied due to haemorrhagic liquefactive necrosis and white patches were found over the liver. However, the medicine-treated group was apparently normal; there were no visible changes in the brain and the liver was healthy like control. Real-time-PCR results showed high viral load in CAM and brain with absence of viral RNA in liver of the virus infected group. Pretreatment with <i>Belladonna</i> 200C significantly reduced the overall load ($P < 0.05$) in CAM and brain which correlated with the morbid pathological changes of the organs.

Further, Council has undertaken a study in results of preclinical and earlier uncontrolled collaboration with Centre for Cellular and studies indicate that Homoeopathy can offer a molecular Biology, Hyderabad to understand preventive aid to reduce the incidence

of the action of BCT medicines on JE. Council is JE/AES and also treat the patients to reduce also conducting some preclinical studies on JE the mortality and sequel of the disease in at its virology laboratory in Kolkata. The endemic region.

4. LYMPHATIC FILARIASIS

India loses about 1.2 billion-man days due to Lymphatic Filiariasis (LF) and annual economic loss is estimated to be nearly 0.65% of Gross Domestic Product. Homoeopathy is known to be effective for filariasis, and frequently indicated medicines include *Bryonia alba*, *Natrum muriaticum*, *Apis mellifica*, *Pulsatilla nigricans*, *Thuja occidentalis*, *Rhus toxicodendron*, *Rhododendron*, *Hydrocotyle*, *Silicea* etc. Clinically, role of

some of these homoeopathic medicines have been validated in treatment of filariasis.

CCRH conducted a multicenter study during 1980-2003 to assess role of Homoeopathy in clinical filariasis with recurrent adenolymphangitis and lymphoedema using various indicated medicines with encouraging results. Further, a comparative single blind, placebo controlled study carried out during 1986-1988, observed an



improvement of 40.54% in the group treated with *Rhus tox*, *Apis mel.* or *Rhododendron* depending on their symptomatic presentation. Another observational study was carried out during the period April 1985-March 1989, which found *Rhus tox.* to be the most effective medicine. The overall improvement with homoeopathic medicines was 70.7%. In another single blind follow-up study in an endemic village in Odisha, homoeopathic treatment could effectively reduce the frequency of filarial fevers by 20 per cent ($p < 0.05$) among amicrofilaraemic cases, with a higher reduction in cases with genital involvement (36%) and mastitis (57%).

Further, a study undertaken to show usefulness of homoeopathic therapy in preventing development of irreversible lymphedema concluded that treatment in early stage helped in restricting the further advancement of the disease and improved the quality of life of the patients. The medicines found effective were *Rhus toxicodendron*, followed by *Sulphur*, *Bryonia alba*, *Natrum muriaticum*, *Apis mellifica*, *Pulsatilla nigricans* and *Thuja occidentalis*. Recently, Council has concluded a comparative study on treatment of

acute adenolymphangitis with either Homoeopathy or allopathy. Though data is still under analysis, it can be concluded that Homoeopathy is as effective as allopathy in treatment of the condition.

5. MALARIA

It is estimated that about 2,00,000 people die of malaria in India each year. Homoeopathic literature mentions several medicines for treatment of Malaria. These include *Cinchona officinalis*, *Chininum-sulph.*, *Carduus mar.*, *Malaria officinalis* etc. Many drugs have been scientifically tested on in-vitro/in-vivo models in recent studies with promising results, with significant antiplasmodial efficacy against various species of plasmodium parasite. CCRH has undertaken initiatives to prevent and treat malarial cases in endemic and/or epidemic regions. Preclinical studies on in vitro and in vivo models on 'Evaluation of antimalarial efficacy of some homoeopathic drugs against malaria will soon be initiated. Further, a proposal has been drafted for conducting a preventive trial on 'Prevention and effectiveness of homoeopathic medicine on malaria – an interventional cluster study' in Odisha covering a spectrum of 12,000 people.

Name of the Epidemics/ Calamities	Place of occurrence	Period of camp organized by CCRH	Genus Epidemicus identified	Other medicines used for treatment
Malaria	Distt. of Jaipur, Bikaner, Jodhpur, Barmer, Jaisalmer (Rajasthan)	25 th -30 th Oct., 1994	<i>Arsenic alb.</i> 30	<i>Arsenic alb.</i> , <i>Alstonia constr icta</i> , <i>China ars.</i> , <i>China sulph.</i> , <i>Eupatorium perf.</i> , <i>Veratrum album</i>
	Barmer, Jaisalmer (Rajasthan)	8 th -15 th Oct., 2004		

Sl. No.	Title	Model Article	Outcome (s)
1	Antimalarial potential of <i>Malaria nosode</i> 30 and 200 against <i>Plasmodium berghei</i> infection in BALB/c mice.	Mice	<i>Malaria nosode</i> 30 possesses considerable in vivo antiplasmodial activity against <i>P. berghei</i> infection as compared to <i>Nosode</i> 200 as evident from the chemosuppression obtained using Peter's 4-day test. Further, studies on the drug can be carried out to establish its antimalarial potential in monotherapy or in combination with other homoeopathic drug formulations.
2.	Antimalarial potential of <i>China</i> 30 and <i>Chelidonium</i> 30 in combination therapy against lethal rodent malaria parasite: <i>Plasmodium berghei</i> .	Mice	The combination of <i>China</i> 30 and <i>Chelidonium</i> 30 exhibited complete parasite clearance by the 28 th day post inoculation which was similar to the positive control group. Both the groups exhibited enhanced mean survival time (MST) 28 ± 0 days, whereas, the mice of infected control group survived up to 7.6 ± 0.4 days only. The combination had a significant preventive activity ($p < 0.0005$), with 89.2% chemo suppression which was higher than the standard drug, pyrimethamine (83.8%). It also showed a moderate curative activity with complete clearance of parasite in 50% of surviving mice, and enhancing the MST of mice up to 26.8 ± 2.8 days. These findings point to the significant antiplasmodial efficacy of the combination of these homoeopathic drugs against <i>Plasmodium berghei</i> .

6. HIV

To assess the usefulness of Homoeopathy in management of HIV through routine treatment data collection Council has signed MoU dated 04.10.18 with JSPS Homoeopathy Medical College, Hyderabad to undertake data collection

study on Homoeopathy management of HIV cases. Study initiated in December 2018. Till 31st March 2019, total 16557 cases of HIV were registered & provided Homoeopathy consultation at JSPS HIV clinic; which includes 1701 new cases and 14,796 old cases.

Name of the Epidemics/ Calamities	Place of Occurrence	Period of camp organized by CCRH	Genus Epidemicus identified	Other medicines used for treatment
Cholera	Jeypore (Orissa), Gonda, Bharuch (Gujarat) & Calcutta (West Bengal)	1985-86	<i>Antim. tart. 200</i>	<i>Bryonia 200, Camphor 200, Carbo veg. 200, Nux vomica 200, Podophyllum 200, Veratrum alb. 200</i>
	Delhi	July-Sept. 1988	<i>Camphor Q</i>	- -
Bacillary Dysentery	Gonda (Uttar Pradesh)	June, 1985	-----	<i>Kali mur., Kali phos., Nux vomica, Merc. sol., Merc. cor., Pulsatilla</i>
	Shimla (Himachal Pradesh)	August 1985	-----	<i>Aloe soc., Merc. cor., Mag. phos. 6X</i>



Name of the Epidemics/ Calamities	Place of Occurrence	Period of camp organized by CCRH	Genus Epidemicus identified	Other medicines used for treatment
Conjunctivitis	Gudivada, (Andhra Pradesh) Hyderabad, (Andhra Pradesh)	Sep-Oct. 1985	<i>Argentum nitricum</i> 200	<i>Argentum nitricum</i> 200, <i>Belladonna</i> 30, 200, <i>Euphrasia</i> eye drops <i>Rhus. tox.</i> 30, 200
	Bahadurgarh, (Haryana) Ghaziabad, (Uttar Pradesh)	1986-87	<i>Belladonna</i> 200	<i>Argentum nitricum</i> 200 <i>Belladonna</i> 200, <i>Euphrasia</i> eye drops <i>Rhus. tox.</i> 200
	Delhi	July - Sept. 1988	<i>Belladonna</i> 200	<i>Argentum nitricum</i> , <i>Belladonna</i> , <i>Euphrasia</i> , <i>Rhus. tox.</i>
Epidemic fever	Kerala	July 2001	<i>Bryonia alba</i> 30 followed by a dose of <i>Sulphur</i> 200	
Viral Fever	Delhi	1987 -1988	-	<i>Arsenic alb.</i> 30, 200 <i>Belladonna</i> 30, 200, <i>Bryonia</i> 30, 200, <i>Pulsatilla</i> 30, 200
Yellow fever	New Delhi	1987-1988	- -	<i>Arsenic alb.</i> , <i>Bryonia alba</i> , <i>Belladonna</i> , <i>Pulsatilla</i>
Flu like illness	All over India	July 2010	<i>Arsenic album</i> 30	—
	All over India	2012	<i>Arsenic album</i> 30	<i>Belladonna</i> 30, 200, <i>Gelsemium</i> 30, 200, <i>Natrum muriatum</i> 30, 200, <i>Phosphorus</i> 30, <i>Rhus. tox.</i> 30, 200.
Jaundice	Surat, Rajkot (Gujarat), Kolkata (West Bengal), Jaipur (Rajasthan), Hyderabad (Andhra Pradesh)	1984-85	<i>Chelidonium majus</i> 6 <i>Malandrinum</i> 200C	<i>Bryonia</i> 6, 30 <i>Nux vomica</i> 6, 30 <i>Chelidonium majus</i> 6
	Delhi	1987-1988,	<i>Chelidonium majus</i> 6	<i>Bryonia</i> 30, 200, <i>Sulphur</i> 30, 200, <i>Pulsatilla</i> 30,200
	Bhopal (Madhya Pradesh)	May-June 1988	<i>Chelidonium majus</i> 200	<i>Ars. alb.</i> 30, <i>Chelidonium</i> 200, <i>China</i> 200, <i>Lycopodium</i> 200, <i>Nux vomica</i>
Kala Azar	Burdwan & Hooghly (West Bengal)	1988-1989	- -	<i>Andro. panic.</i> Q, <i>Ceanothus</i> Q, 30, 200, <i>China ars.</i> 30, 200, <i>China off.</i> 30, 200, <i>Gelsemium</i> 30,200, <i>Nux vomica</i> 30, 200
	Burdwan & Hooghly (West Bengal)	1990-1991	-	<i>Andro. panic.</i> Q, <i>Bacillinum</i> 3X, <i>Ceanothus</i> Q, 6, <i>Chinaars.</i> 200, <i>China sulph.</i> 3X, <i>Nux vomica</i> 30, 200, <i>Sulphur</i> 30, 200
	Muzaffarpur (Bihar)	1991-1992		<i>Arsenic alb.</i> 30, 200, <i>Apis</i> 30,200, <i>Andro. panic.</i> Q, 6, 30, <i>Ceanothus</i> Q, 30, 200, <i>China ars.</i> 30, <i>China off.</i> 30 <i>Chelidonium</i> Q, <i>Ferrum ars.</i> 30, <i>Gelsemium</i> 30, 200, <i>Natrum ars.</i> 30, <i>Tuberculinum</i> 200, 1M, <i>Tinospora cordifolia</i> Q, <i>Sulphur</i> 30, 200

Name of the Epidemics/ Calamities	Place of Occurrence	Period of camp organized by CCRH	Genus Epidemicus identified	Other medicines used for treatment
Measles	Gonda (Uttar Pradesh) Hyderabad (Andhra Pradesh)	1985-86	<i>Arsenic alb. 30, Kali mur., Pulsatilla 30</i>	<i>Aconite 30, Antim. tart. 30, Arsenic alb. 30, Apis. 30, Carbo veg. 30, ulsatilla 30, Ferrum phos 6X, Gelsemium 30, Sulphur 30</i>
	Jaipur (Rajasthan)	1985-1986	-	<i>Calc. carb. 200, Crotaallus hor. 30, Drosera 200, Merc. sol. 200</i>
	Bhopal (Madhya Pradesh)	1986-87	<i>Ipecac.</i>	<i>Ipecac., Pulsatilla, Sulphur</i>
	Bharuch (Gujarat)	1997-1998	-	<i>Arsenicum alb. 30, 200, Bryonia 30, 200, Belladonna 30, 200, Gelsemium 30, 200, Euphrasia 30, 200, Sulphur 30, 200</i>
Meningitis	Delhi	April, 1985	<i>Belladonna 200</i>	-
	Jagdapur (Madhya Pradesh)	1992	<i>Argentum nit. 200</i>	-
	Jeypore (Orissa)	1987-1988	-	<i>Aconite 200, Belladonna 200, Bryonia 200, Cicuta virosa 200</i>
	Vijayawada (AP)	1989-90	<i>Belladonna 200</i>	--
	Sagar (Madhya Pradesh)	1987-1988	<i>Argentum nit. 200</i>	<i>Arg. nit. 200, Belladonna 200, Gelsemium 200,</i>
		1990-91	<i>Argentum nit. & Meningococcinum 200</i>	<i>Argentum nit. 200, Bacillinum 200, Belladonna 30, 200, China 30, 200, Gelsemium 30, 200, Helleborus 30, 200, Hyoscyamus 30, 200, Meningococcinum 200, Tuberculinum 200</i>
	Vijianagaram (Andhra Pradesh)	1989-90	<i>Belladonna 200</i>	-
	Surat, (Gujarat)	25 th -30 th Sep. 1994	<i>Phosphorus 30</i>	--
	Beed, Solapur (Maharashtra)	1994	<i>Belladonna</i>	----
	Vijayawada (Andhra Pradesh)	1994	<i>Ignatia 200</i>	----
	New Delhi	1987-1988	<i>Typhoidinum 200</i>	-----

7. SARS-COV2 VIRUS INFECTION

Keeping in view the positive results of the Genus epidemicus as prophylactic during epidemic outbreaks of various diseases, and at the insistence of Ministry of AYUSH, Scientific Advisory

Board of the Council in its meeting held on 28.01.2020 discussed and analyzing the symptomatology of COVID-19 cases of Wuhan city of China published in Journal Lancet for the possible genus epidemicus.

After recommendation of Scientific Advisory Board of Council, Ministry



of AYUSH published public health advisory for using *Arsenicum album* 30C as immune booster and could be prophylactic for SARS-Cov2 virus infection dated 28.01.2020, 29.01.2020 &

03.02.2020 in Press Information Bureau (<https://pib.gov.in/PressReleasePage.aspx?PRID=1600895>). Subsequently revised on 6th March 2020.

The Council has undertaken basic prophylactic and clinical research studies on COVID-19 which have given below:

Sl. No.	Basic Prophylactic and Clinical Research Studies on COVID-19
1	Homoeopathy as an adjuvant to standard treatment protocol in management of COVID-19 infection: a randomized, placebo-controlled, open label exploratory study.
2.	Comparative effectiveness of pre-identified homoeopathic medicine in asymptomatic COVID-19 individuals receiving standard treatment protocol- An open-label, randomized, placebo-controlled trial
3.	Effectiveness of <i>Arsenicum album</i> 30C in prevention of COVID-19 in individuals residing in hotspots residing in hotspots of Red Zones in Delhi- A prospective, cohort study
4.	<i>Arsenicum album</i> in prevention of COVID-19 quarantined individuals- a data collection
5.	Effectiveness of <i>Arsenicum album</i> 30C in prevention of COVID-19 in individuals residing in hotspots of red zones- A multicentric, randomized, cluster level controlled trial.
6.	Effectiveness of individualized homoeopathy as an add-on to standard treatment of COVID-19: A multicentric, randomized, parallel arm, single-blind, placebo-controlled trial
7.	Development of Nosodes of SARS-CoV-2 virus antigens for prevention and management of COVID-19
8.	Study on the effect of homoeopathic medicines in modulating the interaction between haemoglobin and SARS-CoV-2 antigens
9.	A study on the efficacy of homoeopathic medicines on cytokine storm induced by SARS-CoV-2 virus proteins in cell line and in mice
10.	Retrospective cohort study in recovered COVID-19 patients
11.	<i>Arsenicum album</i> 30C in prevention of COVID-19- Health Advisory
12.	<i>Arsenicum album</i> 30C as mass prophylaxis medicine. Around 6.7 lacs individuals received the medicines
13.	Post prophylaxis analysis of impact of <i>Arsenicum album</i> 30C in frontline workers (Maharashtra Police)
14.	Mass prophylaxis against COVID-19 using Homeopathic medicine <i>Arsenicum album</i> 30 to the inmates, staff and family members of the Delhi prison complexes at Tihar, Mandoli and Rohini
15.	Evaluation of COVID-19 treatment with adjuvant homeopathy in Gujarat state
16.	Master protocol for open label exploratory multi-centric studies on homoeopathic treatment of post COVID -19 illness
17.	Developing coronavirus based nosodes and exploring anti-COVID-19 efficacy
18.	Development of homoeopathic nosode from COVID-19, its evaluation and efficacy against COVID-19 infections in humans
19.	Single blind, randomized, placebo-controlled trial to compare efficacy of conventional management alone and in combination with homoeopathic treatment of COVID-19 patients with moderate to severe intensity
20.	Effectiveness of <i>Rhus tox.</i> 30C, as a homoeopathic prophylactic medicine for prevention of SARS-CoV-2 in high risk population- a double-blind, randomized controlled trial
21	The role of homoeopathic health supplement Alfa-Avena Biocetical on the Post-COVID fatigue cases during convalescent stage
22	Homoeopathic treatment of respiratory sequelae of Post-COVID cases: An open label prospective, interventional pilot study

DISSEMINATION ACTIVITIES

Documentation & Publications

Preparation of Journal	Preparation of Annual Report	Preparation of Newsletter	Preparation of Books/Monographs	Preparation of IEC Material
<ul style="list-style-type: none"> IJRH receives papers through MMS Double blinding done Peer-review, revision, re-revision by the authors Final acceptance by reviewers Editorial inputs Language editing Translation of abstracts into five languages Laying out every issue for online & print publishing IJRH print copy sent to subscribers through post for dissemination for research outcomes 	<ul style="list-style-type: none"> Compilation of Annual Activities of Council Audit conducted by CAG SAR received from CAG Preparation of draft report Hindi Translation of report Approval by SAB Approval of Ministry of AYUSH for final printing Report printing Report placed in the Parliament of India both houses of Parliament within nine months from the end of previous financial year 	<ul style="list-style-type: none"> Monthly compilation of activities of Council Development of quarterly Newsletter Editing & printing of Newsletter 	<ul style="list-style-type: none"> Identification of priority area Literature review Compilation of research activities Development of draft manuscript Review of Manuscript Editing & Designing of manuscript Publication of Books/Monographs 	<ul style="list-style-type: none"> Identification of areas Literature review Transliteration of research outcomes Development of drafts Review of drafts Editing & designing of handouts Printing of IEC material Translation in multiple languages Printing in multiple languages Distribution of IEC material

DOCUMENTATION CENTRE-THEN

Effective communication channelizes information exchange and spreads awareness on scientific and technical issues among general public, researchers and professionals. The Documentation Section was established as apart of Headquarters' office of the Central Council for Research in Homoeopathy with effect from 1st April, 1980 with the objective of dissemination of knowledge concerning Homoeopathy. The other objectives identified for the section were

- To prepare complete documentation on subjects of interest to the Council and

provide them to the Scientists of the Council to update their knowledge.

- To prepare bibliographies, reference lists and abstracts of scientific articles on Homoeopathy and allied subjects.
- To keep the records of the scientific seminars, symposia, workshops etc. organised by the Council.
- To provide copies of scientific papers of interest of the Council, according to their availability, to the scientists.
- To undertake various publications of the Council.

Its Multifarious activities included-

- Library services



- Documentation work on the Homoeopathic drugs with reference to their origin, history, habitat, botanical & pharmacognostical characteristics etc.
- Preparation of reference lists on Clinical Research problems assigned to various Clinical Research units/Institutes.
- Collection of data in respect of partially proved drugs assigned to Tribal Units under drug related Clinical Research projects.
- Preparation of Bibliographic services.
- Providing Indexing and abstracting services.
- Providing Information Services to readers about technical queries related to Homoeopathy and allied topics.
- Reprographic Services i.e. furnishing photocopies of the selected technical articles to scientists.
- Procuring, classifying and placing on record all the newspaper clippings with write-ups on Homoeopathy and Allied Subjects.
- Imparting Training to research workers under in-service Training Programme through audio visuals, development of video library of scientific activities of congresses, seminars, workshops, discussions etc.
- Publications, being the backbone of the section, are the major medium of dissemination of the research outcomes. The periodical publications then were:
 - Quarterly Bulletin wherein scientific activities and achievements of the Council were highlighted.
 - CCRH News wherein Council's technical and administrative activities were published.
 - Books/Monographs which were published from time to time

In the period from 1980-84, Documentation Centre acquired 3546

books, 25 foreign and 28 Indian Journals in Homoeopathy. Documentation on 170 Homoeopathic Drugs with reference to their origin, history, habitat, botanical and pharmacognostical characteristics etc. were completed. During this period, 24 issues of CCRH Newsletter and 22 volumes of Quarterly Bulletin were published.

By 1990, the Documentation Section had acquired 5000 books related to Homoeopathy and allied sciences and had subscribed to 43 journals and periodical including 6 WHO periodicals. Cataloguing, preparation of index cards and bibliographies had been initiated. A bibliographic list entitled "Current Health Literature Awareness Services" was released quarterly containing the citation from journals (both Homoeopathy and Allied Sciences) and was sent to the scientists working in various institutes/Units of the Council. Twelve (12) such lists were released. The list of abstracts on articles on AIDS, Cancer and Dermatology published in Indian and Foreign journals both in Homoeopathy and Allied Sciences subscribed by the Council were prepared. Twelve volumes of Quarterly Bulletin, 17 issues of CCRH Newsletter and 7 books/Monographs had been published.

By the year 2000, the Library of CCRH had been upgraded and categorised under category III of Govt. Rules. "Medico abstracts on Bronchial Asthma" were compiled in collaboration with British Homoeopathic Library, Glasgow, Scotland. Till this time, Council had 20 publications to its cart and the publications of the periodicals were continued.

DOCUMENTATION SECTION- NOW

Being the mirror of the Council's

activities and achievements, the Documentation and Publication Section aims to produce all the publications in a presentable, reader friendly language without distorting the actual image of the research work. Dissemination of research work of the Council to the stakeholders such as clinicians, researchers, teachers, students, industry and common man is one of the mandate of the Council and this section is the medium of such propagation. The work done by the Council in the areas of Drug Standardisation, Drug Proving, Clinical Verification and Clinical Research etc. is documented and brought out in the form of various publications for the scientific community and the general public.

PUBLICATIONS OF THE CURRENT TIMES

The Council publishes periodical research journal and newsletter for dissemination of its research activities and achievements. The publications of the Council include periodicals and non periodicals:

Periodical publications include CCRH Newsletter, a quarterly publication

providing up-to-date information about the conducted activities of Council; Indian Journal of Research in Homoeopathy, which is accessible online since July 2013. The journal is registered with the following abstracting partners since July 2013: Baidu Scholar, CNKI (China National Knowledge Infrastructure), EBSCO Publishing's Electronic Databases, Ex Libris – Primo Central, Google Scholar, Hinari, Infotrieve, National Science Library, ProQuest, TdNet, Wanfang Data. The journal is included in, the following since July 2013: Index Copernicus, Scimago Journal Ranking. The journal is indexed with DOAJ since January 2017 and Scopus since November 2019. The Journal publishes evidence-based articles on homoeopathic research which has positive impact globally. The content of the journal is available at the journal's website: www.ijrh.org. The popularity of IJRH is increasing worldwide with visitors frequently visiting the journal website. Annual Report is another periodical publication, published yearly, detailing the administrative and technical updates of the Council.





Website of IJRH with previous and current issues:<http://www.ijrh.org/>

Non-priced publication: Council publishes many non-priced publications, to name a few are as follows:-

a) Dossier - “Homoeopathy -Science of Gentle Healing”: It is one of the most valuable publication of Ministry of AYUSH comprising within itself a bird’s eye view of Homoeopathy starting from a brief introduction to the science, to its

network, infrastructure and status in various parts of the world, with special emphasis to India. It is the compendium of all the research work taken up in India, particularly of CCRH with its outcomes and evidence levels. Realising the strategic and international significance of this publication, the book is translated in various foreign languages like Spanish and Japanese.

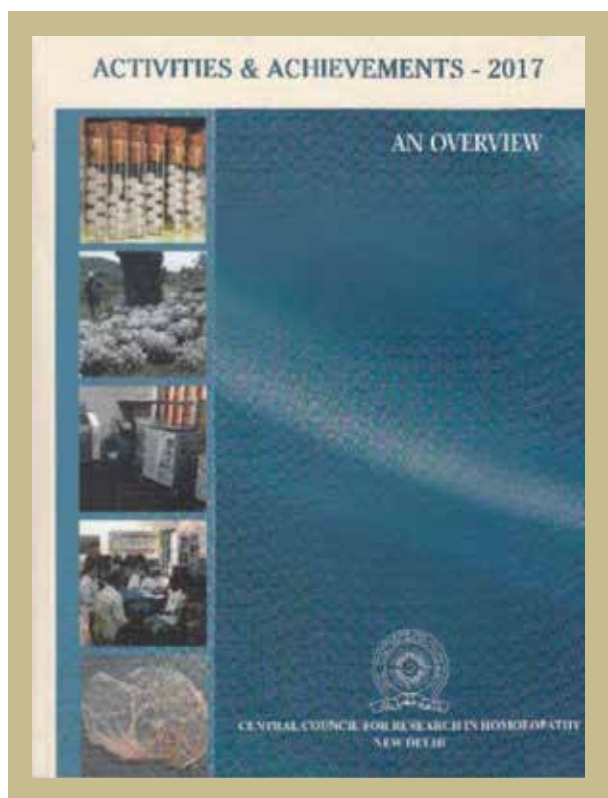


"Homoeopathy -Science of Gentle Healing" in international languages

b) Activities and Achievements

(An Overview & Pocket book): This publication gives a detailed overview about the activities and achievements of the Council in the different research areas and an insight into the public health programs initiated by the Council.

c) IEC material: Handouts and various other publications on Homoeopathic research are produced and released

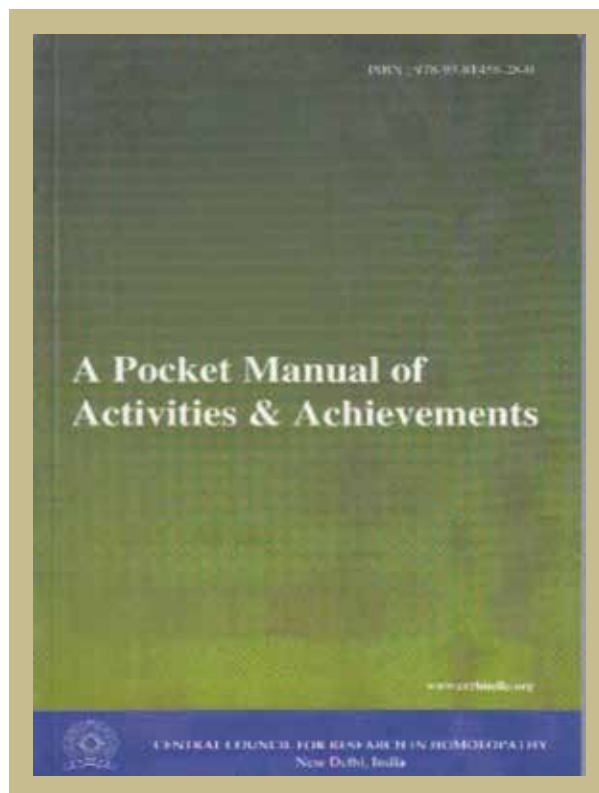


by the section from time to time. For creating awareness, IEC material is being developed and disseminated among the masses free of cost in Arogyas, Exhibitions etc.

To get the highlights of the overview of all such activities and achievements of the Council, a pocket book was developed which is easy to carry and reader friendly

AUDIO VISUAL ADVANCEMENTS

Documentaries: The audio-visual



source to bring awareness among the public is in the form of Documentary films. The Council has developed three Documentary films one on "Homoeopathy: The Science of Gentle Healing' which was released in 2015 targeting general masses; other on 'Drug Development in Homoeopathy' which was released in 2016 targeting homoeopathic pharmaceutical industry and another on 'Research in Homoeopathy' which was released in 2017 targeting researchers and academicians. Another Documentary film 'Homoeopathy for Healthy Child' was inaugurated by Hon'ble Vice President of India in 2018 at the international convention organised by CCRH at Vigyan Bhawan, New Delhi. Translites & Posters: For creating awareness among the public.

Audio- Visual Spots on

- Healthy Mother
- Infant care
- Homoeopathy, safe, effective and natural
- Homoeopathy, viral fever



Radio Programmes and Jingles

Radio Programmes

1. Homoeopathy: Myths and Facts
2. Lifestyle Disorder
3. Menopause
4. Arthritis
5. Depression
6. Allergies
7. Headache

8. Substance Abuse
9. Female Diseases (Fibroadenoma)
10. Female Diseases (PCOS)

Radio Jingles

1. Homoeopathy for Infant Care
2. Homoeopathy for Healthy Mother

The Council has also designed its advertisements for publicity of various publications.

Homoeopathic Research Work of the Council
An ensemble of valuable and quality publications

1. Drug Monograph
2. Disease Monograph
3. Drug Proving
4. Clinical Research
5. Mother & Child Health (MCH)
6. Clinical Verification
7. Drug Standardisation
8. Literary Research

Notes:

- For copyright of articles, authors are requested to send their acceptance & all of pages copy to the Council.
- The use of language for speed and better reception shall be followed by the Council.
- The authors will be notified by Council & shall be informed of the date of issue of JCRH, published in New Delhi.
- Weight of 'soft copy' to be provided to the Council in the speed post along with the article.
- Books will be given free of charge to the authors.
- Website - www.ccrh.org Email - ccrh@ccrh.org

CENTRAL COUNCIL FOR RESEARCH IN HOMOEOPATHY
Ministry of AYUSH, Govt. of India
Jawahar Lal Nehru Bhawan Library, Central Homoeopathy Anusandhan Bhawan,
8746, Connaught Place, New Delhi-110088, Tel. 91-11-26102625 Fax: 91-11-26127198
E-mail: ccrhpublishing@gmail.com, ccrhp@ccrh.org

Indian Journal of Research in Homoeopathy

Indian Journal of Research in Homoeopathy IJRH

- Covers theoretical and clinical studies related to health, clinical and social issues in the field of Homoeopathy research
- A peer-reviewed online journal published quarterly
- Open access available at <http://www.ijrh.org>
- Double blind review system for articles
- Permits authors to self-archive final accepted version of the articles
- No charge for submission, processing or publication of manuscripts and even for colour reproduction of photographs.
- ORS code to support metadata retrieval systems for URL redirection.

Currently indexed with the following abstracting journals:

CNKI (China National Knowledge Infrastructure), EBSCO Publishing's Electronic Journals, PubMed - PubMed Central, Google Scholar, Mean, Informaworld, Journal Gate, National Science Library, Scopus, ProQuest and Taylor.

Published by Waters Khawar - Member for
CENTRAL COUNCIL FOR RESEARCH IN HOMOEOPATHY
Ministry of AYUSH, Govt. of India
Jawahar Lal Nehru Bhawan Library, Central Homoeopathy Anusandhan Bhawan

Creation of advertisements for publicity

Library



The inception of this Library and Information Centre dates to 1979. With the passage of time, the library grew at a fast pace, and, in order to cater to the ever increasing R&D information needs of the professionals, it systematically and gradually grew as a collection of specialized reading materials such as books, periodicals, reference works, serials in the areas of Homoeopathic Research and Drugs & Pharmaceuticals.

Presently it has a collection of 11267 books and 2470 bound volumes of Indian and Foreign Journals. It is also subscribing 12 foreign Journals (Print & Online issue) every year. The center publishes value added Current Awareness Periodicals, besides providing services to the in-house staff as well as to academia and industry from within the country.

The wealth of this highly specialized



The library at CCRH Hqrs.

library now began to draw attention of the academic and R&D workers of other institutions in the city like Nehru Homoeopathic Medical College and Hospital, B. R. Sur Homoeopathic Medical College, Hospitals and Research Centre etc. and outside the city from Homoeopathic Medical Colleges and research scholars.

R & D activities in CCRH are supported by a fully automated library with a rich collection of relevant books, in the field of Homoeopathy and Allied sciences.

OBJECTIVES

- To collect, collate and disseminate information related to Homoeopathy in general and homoeopathic research.
- To provide indexes and abstracts of

Homoeopathy literature to the members of the professionals of the Council.

- To be a professionally managed technical support organization for Homoeopathy and facilitate creative and innovative environment for homoeopathic research.
- To strengthen the inter-library linkages by establishment of some medical libraries and supporting resources/ referral libraries.

LIBRARY SERVICES

The Council's library is providing following services to its users: -

Online public access catalogue (OPAC) services

The collection of books, bound journals, theses available in Library, which can be searched through Library OPAC Search.



E-journals service

Library is subscribing 11 online e-journals in the field of Homoeopathy and complementary medicine from the reputed publishers. The researchers can access the e-journals from remote locations.

E-Consortia

The library has developed e-consortia for sharing of resources pertaining to AYUSH Systems with approx. 90 research Councils/Institutes/Units who are the member of the consortia.

Digital library

This collection comprises of old journals which have been inactive and not readily available through the internet. The Council has access to it as the Council has been subscribing to such journals since 1979 for our research scholars. All the back volumes of homoeopathic journals are digitized and made available to the research scientist of the Council through Council's website.

Institutional Research Repository

In 40 years of its existence, the Council has achieved success in its various programs - Drug Proving, Clinical Verification, Drug Standardization Clinical Research and Fundamental Research. It has several archival documents like Indian Journal of Research in Homoeopathy, CCRH Newsletters, CCRH Quarterly Bulletin, Officials records of Council and minutes of the meeting Scientific Advisory Committee, Standing Finance Committee and General Body meetings which project history of Council. These documents are part of institutional research repository.

Current awareness service

The service was started in 1988 in the form of Current Health Literature Awareness Services (CHLAS) quarterly publication. 28 Volumes of CHLAS were published. To improve the visibility and accessibility of the index of articles CCRH Library has taken an initiative to provide the service as e-index on monthly basis as "e-CHLAS". To widen our horizon the Council has also initiated one more service where in the abstracts of the publications related to AYUSH systems shall be compiled and shared among all the research Council's. This service shall be named as "Research at a Glance".

- **e-CHLAS**

To keep the users abreast of latest scientific articles published in various journals/magazines subscribed by the Council's library brings out e-CHLAS.

- **Research at A Glance**

The library of the Central Council for Research in Homoeopathy has introduced a new service in the year 2017-18 called "Research at a Glance". The main objective is to disseminate precise information/citation about scientific articles published in various journals/magazine other than the journals subscribed by this Council. The scope of the publication is articles on Homoeopathy, Ayurveda, Unani, Yoga. This service is also a monthly service and 12 issues released every year.

CCRH quarterly bulletin-a cumulative index, vol. 1-28 (1979-2006)

The library has also compiled a cumulative index of articles published in



CCRH Quarterly Bulletin. The objective of this service is to provide the information about articles published by the Council's Scientists to users at a glance.

DIRECTORY OF UNITS/INSTITUTE UNDER CCRH

The library has compiled a directory of Units/Institute under CCRH with an aim to provide information related to ongoing research studies, concluded research studies, laboratory facilities of a Unit/Institute.

Bibliographic services

Subject bibliographies are compiled on request, according to the requirement of users.

Medico Abstract

Exhaustive literature compilations on various diseases of major relevance have been made, indexed and abstracted and published in the form of Medico Abstracts considering an abstracted article from point of view of its information, characteristics and use. It is designed to meet the needs, with the help of abstracts one is able to get some idea of the information/content of each of the items included.

The purpose of Medico Abstracts is to create awareness and to improve the effectiveness and efficiency of clinician through the identification of good clinical

practice and desired clinical outcomes. The Medico Abstracts on Renal Disorders, Diabetes Mellitus, Psoriasis, Bronchial Asthma, RA, Cancer & Eye disorders.

Theses index: The library has undertaken a project to develop a database of theses submitted by the P.G. students under various Homoeopathic Medical College and Hospitals in India with aim to provide help to homoeopathic fraternity. The work is in progress.

Reference services

Library responds to the queries received from Units/Institute under CCRH as well as Homoeopathic professionals of the country through post, in person, phone and/or mail.

Document delivery service

The library attends to photocopy requests about its resources and provides backup services to the potential users.

Inter library loan

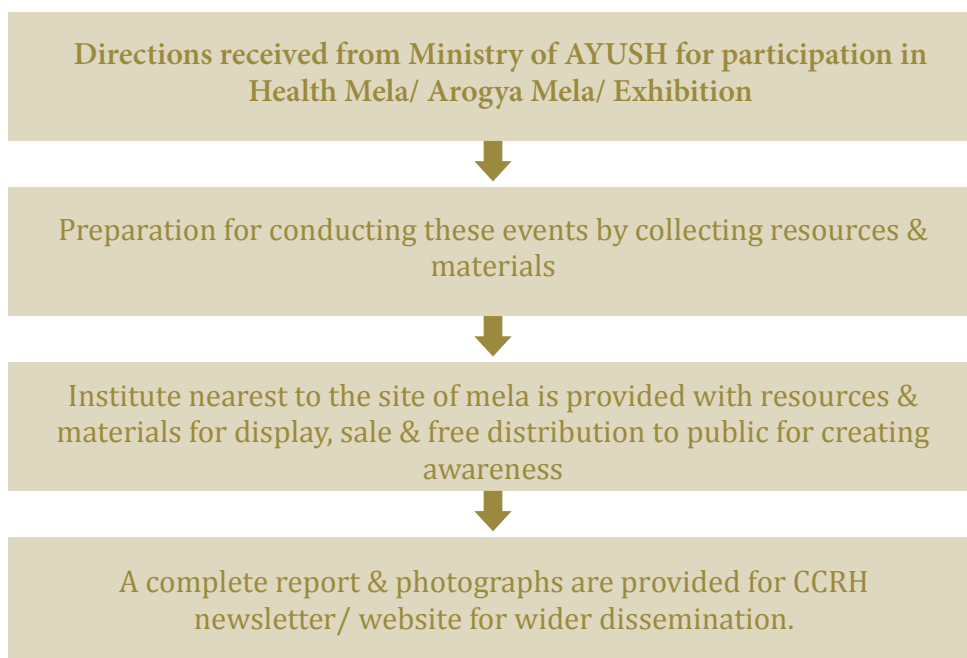
The Library facilitates inter Library loan services for other medical Libraries.

Homoeopathic fraternity database

Library is compiling a database of clinicians, researchers, students, practitioners, teachers in the field of Homoeopathy in India.

Health Melas & Exhibitions

PROMOTION AND AWARENESS PROGRAMS (AROGYA / EXHIBITIONS)



2017-18

The Council participates in Health/ Swasthya Melas, Arogya and Exhibitions sponsored by Ministry of AYUSH, Govt. of India with an aim to promote Homoeopathy and create awareness among masses for Homoeopathy. The Council also organizes free medical check-up camps and provide homoeopathic consultation and medicine during these melas. In this reporting period, Council had organised /participated in 35 Arogya/ health melas/ exhibitions.

2018-19

The Council participates in Health/ Swasthya Melas, Arogya and Exhibitions sponsored by Ministry of AYUSH,

Govt. of India with an aim to promote Homoeopathy and create awareness among masses for Homoeopathy. Council showcases the strengths and potential of Homoeopathy and Research & development efforts in Homoeopathy. As a part of awareness campaign, the general population visiting these melas is sensitized about the role and scope of Homoeopathy in various diseases conditions through pamphlets, handouts, and publications. The Council also organizes free medical check-up camps and provide Homoeopathic consultation and medicine during these melas. In this reporting period, Council had participated in 39 Arogya/ health melas/exhibitions.



Professional Outreach Activities

Formulation of guidelines for conducting CMEs/Seminar to update the professionals & public at large



Selection of topics, resource persons (both Homoeopathy & conventional medicine experts), & participants according to the guidelines



Budgeting & logistics identification



Approval of the proposal by the Competent Authority



Preparation of CME resource material



Invitation to experts and participants



Conduct of CME/seminar



Submission of report of the CME/Seminar to CCRH



Feedback obtained from participants for future planning



With the aim of educating about latest research developments to the professionals, doctors, teachers and students & exchanging information with other research and educational institutions, professional associations and societies of international and national repute, with similar research objectives council organizes various professional outreach activities such as Seminars, Workshops, Conferences, Training programmes and CMEs along the length and breadth of the country.

These activities help the profession by updating knowledge of homoeopathic fraternity regarding current trends in R&D activities; trains the doctors in emerging trends of healthcare and scientific outcomes for keeping up the standard to health care delivery & research activities; in encouraging the young talents to take up various research activities in this field to further strengthen the scientific database of Homoeopathy. For capacity building of the researchers Council has been participating in different national and international seminars.

In the period of 2017-18 Council has organized and participated in the International and National Seminars, Workshops, Conferences and CME programmes.

2018-19

One of the objectives of the Council is dissemination of its research findings, sensitization of professionals, and exchanging information with other research and educational institutions, professional associations and societies of international and national repute, with similar research objectives as that of the Council.

This helps in sharing and updating the knowledge of the homoeopathic fraternity at large and giving a world view of cutting-edge research to the practitioners, teachers and students. Moreover, such activities help in idea exchanges and open doors for a multitude of interdisciplinary research activities which is the need of the hour to the science of Homoeopathy. For capacity building of researchers and to educate the profession about recent advancement in homoeopathic research, research methodology, scientific writing Council has been organizing CMEs/ Seminars and participating in different national and international seminars. In the period under report Council had organized and participated in the following International and National Seminars, Workshops, Conferences and CME programs.



PUBLIC HEALTH INITIATIVES

Homoeopathy for Healthy Child Programme

Central Council for Research in Homoeopathy under directions from Ministry of AYUSH developed a pilot program on “Homoeopathy for Healthy Child” with a targeted approach to promote healthy dentition in children, treating the associated ailments like diarrhoea, fever/URTI etc. with other identified conditions and to sensitize audience about the benefits of homoeopathic medicines.

The program was initiated in 2015. Presently the program is being implemented through 07 institutes/units of CCRH in 07 districts in 10 pre-identified blocks.

ANM/ASHA have been trained to identify dentition related problems in teething children and are being provided home based care for common diseases like diarrhea and URTI in coordination with homoeopathic physicians who have been sensitized about the program. A training manual in local language has been developed which details the dentition pattern in children, the requirement and importance of oral hygiene and home based care of common dentition related problems. A kit comprising of six most frequently used medicines for dentition

and related complaints viz. *Calcarea phosphoricum* 6X, *Ferrum phosphoricum* 3X, *Magnesium phosphoricum* 6X, *Belladonna* 30, *Chamomilla* 30, and *Podophyllum* 30 was made to be used by ANM/ASHA. Data of these children is maintained through proper documentation and regular follow ups. Monthly review meetings and open interactions are held with the ANMs/ASHAs and with the parents of children who may have any concerns about their child.

During the reporting year, the enrollment was stopped at 05 centres except Jaipur & Ranchi. The enrolled children were followed up in quarterly held review meeting for their dentition patterns diseases related to dentition. The date is as follows:



Homoeopathy Kit

Swasthya Rakshan Programme

Swasthya Rakshan Programme is ongoing in 55 identified villages/ colonies by 11 Institutes of the Council. The objective is to provide homoeopathic treatment, screening, identification of risk factors and early diagnosis of diseases, Health promotion, assessment of health status and creating awareness about

Homoeopathic system of the medicine.

ACTIVITIES UNDERTAKEN

A. Health Survey :

Family and Individual Health Surveys were initiated in April 2016 to assess hygiene measures adopted by the people in the households as a routine activity and to educate them in this regard. Under the survey the data of post family survey shows that there is change in behaviour of the people in adopting hygiene measures especially washing of hands, covering of food articles, use of toilets and use of clean water to drink. 38517 families have been covered and health screening of 50389 persons have been conducted.

B. Medicare services:

During the reporting year, 2128 Swasthya Rakshan Camps/OPDs have been organized and 101006 patients have been benefitted with homoeopathic treatment.

C. SRP Awareness Campaigns/ Rallies

Mass campaigning through rallies for promotion of healthy lifestyles and hygiene were organized in school of identified villages. Nukkad Nataks and public lectures were also organised focussing on personal, environmental & social hygiene in the villages involving school children. Under Poshan Abhiyan in September 2018 special lectures on



Doctors and paramedic staff communicating with the people during Swasthya Rakshan Survey conducted at household level



diet, iron deficiency anemia, deworming, hygiene, menstrual hygiene, maternal health were delivered. Public awareness lecture on importance of nutrition during pregnancy, post natal period, childhood and adolescence were also delivered. More than 1500 people were sensitized. Under Swachhata Pakhwada in October 2018 special lectures on benefits of cleanliness and hygiene were delivered. Awareness lectures on Swachhata and waste management, safe disposal were also delivered.

Outcomes:

- A substantial impact has been noted in all 5 adopted villages. Higher numbers of population were benefitted in the prevention of common ailments arising due to unhygienic living conditions.
- No. of beneficiaries: 101006 people have been provided treatment.
- No. of camps conducted: 2128 Parikshan

camps have been conducted in the adopted villages. Mass campaigning through rallies, nukkadnataks and public lectures are also conducted in identified villages.

- Common prevalent diseases in the identified villages are upper respiratory tract infections, cough, dermatitis, myalgia, headache, cervical and lumbar spondylosis, gastritis, diabetes mellitus and osteoarthritis.
- Increased awareness is noticed among the population coming in the screening camps by adoption of healthy lifestyle and hygienic measures owing to massive health promotion campaigns done before and during conducting camps and OPDs.
- Concept of using homoeopathic medicines has been popularized in a massive way and a significant number of people are opting to Homoeopathy and were benefitted.

Homoeopathic treatment being provided at Swasthya Rakshan Camps / OPDs



RRI(H) Gudivada



RRI(H) Mumbai

D. Poshan Abhiyaan

Poshan Abhiyaan (National Nutrition Mission) is India's flagship programme to improve nutritional outcomes for children, pregnant women and lactating mothers. Launched in March 2018, the programme, through use of technology, a targeted approach and convergence, strives to reduce the level of stunting, under-nutrition, anemia and low birth weight in children, as also, focus on adolescent girls, pregnant women and lactating mothers, thus holistically addressing malnutrition.

The Council through its 23 institutes has undertaken activities under the abhiyan for promoting health and nutrition. The activities have been undertaken for patients in the OPD and speciality clinics, schools, villages during health camps. The participants were patient at OPD of the institutes and health camps in villages, mainly women, adolescents, school going children.

S.No.	Areas Covered	Numbers	Participants
1.	Villages	79	1755
2.	OPD and specialty clinics	47	3775
3.	SC dominated areas	28	2038
4.	Schools	27	3062
5.	Homoeopathy for Healthy Child, Child friendly clinics,anganwadi and ICDCS	5	295
6.	Poshan Rally	2	130
	Total	188	11055

Activities undertaken under the program

- Display of posters, charts in the OPD related to nutrition, healthy food and diet
- Development of IEC material [banners, posters] related to Poshan Abhiyan in regional languages.
- Organization of rallies for creating awareness
- Health talks delivered in OPD and during health camps in villages.

S.No	Name of activity	No.	Participants
1.	Awareness lectures on Poshan Abhiyan, diet, anemia, deworming, hygiene, malnutrition, recipedemonstration and role of Homoeopathy, non-communicable diseases and lifestyle disorders, menstrual hygiene, girl's education, right marriage age and adolescence period, antenatal care, breast feeding and nutrition during pregnancy, child health, yoga and exercise and herbal plants.	182	10995



SC Health Camps under Schedule Caste Sub-plan Component

For the benefit of the SC population, Council has undertaken a programme to conduct health camps in the villages having more than 40% SC population. Under this programme, 53 villages have been adopted by the 19 institutes/Units to undertake the activity. The objective of the programme is to provide free medical facilities to the people at their doorstep and create awareness/educate people about the healthy lifestyle through health promotion activities.

During the year 2019-20, 29 villages by 09 Institutes/ Units have been adopted to undertake the activity of SC health camp having more than 40% of SC population. A new project under the SC camp has been incorporated namely 'Public Health Intervention in Geriatrics Healthcare', in which screening of elderly population above 60 years of age for their psychosocial need using predefined questionnaire and sensitizing community at the doorstep.

Activities undertaken:

- Screening of the elderly population by conducting door to door survey using ICET(BREIF) Integrated tool to assess their psycho-socio-medical need using predefined questionnaire.
- Symptomatic treatment of all the elderly persons above 60 years in the population visiting SC health camp.
- Providing free Medicare health services to the SC population.
- Identification of common prevalent disease in the villages.
- Health promotion & health education.

SC Awareness Campaigns/Rallies:

Under Swacchta Pakhwada in October 2018, special lectures on residential environment cleanliness and hygiene were delivered. Mass campaigning through rallies, seminars, workshops, pamphlet distribution and street plays for promotion of healthy lifestyles and hygiene were organized in schools of identified villages of SC health camp. Activities like tree plantation, hand washing technique and use of sanitizers were promoted. Under Poshan Abhiyan in September 2018, special lectures on diet, iron deficiency anemia, deworming, hygiene, menstrual hygiene, maternal health were delivered at 28 SC dominated areas in which 2038 participants were sensitized.

In 2019, the theme of Poshan Abhiyan is "Importance of Nutrition during antenatal care, postnatal care



& lactating phase” and “Importance of Nutrition camp and poshan diwas and importance of nutrition for optimal growth of children”. The various activities undertaken by the institutes at 30 villages of SC camp, SRP camp and others which benefits 3069 patients, 50 OPDs at the institute level & specialty clinics which benefits 6622 patients and 39 different schools all over the India which benefits 3983 children and adolescents in colleges.

Achievements:

- No. of camps held : 5826
- No. of total patients benefited : 634213

Common diseases identified:

Osteoarthritis, Dermatitis, Acute Upper Respiratory Tract Infection, Cervical/ Lumbar Spondylosis, Gastritis/ APD/ GERD, Diabetes Mellitus Type-1, Hypertension, Common Cold/Allergic Rhinitis, Polyarthritis, Myalgia.

Common Geriatric diseases:

Osteoarthritis, COPD, Benign Hyperplasia of Prostate, Insomnia, Gastritis, Vision and Hearing loss.

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Activities undertaken:

- Providing free Medicare health services to the SC population.
- Identification of common prevalent disease in the villages.
- Health promotion & health education.

SC Awareness Campaigns/Rallies:

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Achievements:

- No. of camps held : 3364
- No. of total patients benefited : 104355
- Common diseases identified:
Osteoarthritis, Dermatitis, Acute Upper Respiratory Tract Infection, Cervical/ Lumbar Spondylosis, Gastritis/ APD/ GERD, Diabetes Mellitus Type 1, Hypertension, Common Cold/ Allergic Rhinitis, Polyarthritis, Myalgia.



Integration of AYUSH (Homoeopathy along with Yoga) in the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke (NPCDCS): A Pilot Project

National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke (NPCDCS) was launched by Ministry of Health & Family Welfare, Govt. of India in July 2010. Keeping in view the increasing burden of NCDs in India, it covered 21 states across the country by 2012. NPCDCS aims to promote healthy life styles, early diagnosis and management of diabetes, hypertension, cardiovascular diseases & common cancers e.g. cervix cancer, breast cancer & oral cancer.

Integration with AYUSH is one of the mandates of the NPCDCS programme. After several meetings between stakeholders of Ministry of Health and Family Welfare, Ministry of AYUSH and Research Councils under AYUSH, it was decided to integrate Homoeopathy in NPCDCS program and utilize the services of the homoeopathic doctors and yoga experts in Krishna (Andhra Pradesh) and Darjeeling (West Bengal) districts at first instance. Further, it has extended to two more districts from May 2017 i.e., Sambalpur (Odisha) and Nashik (Maharashtra).

Objectives of Integration of Homoeopathy/Yoga in NPCDCS Program

- Health promotion of masses through behaviour change

- Disease prevention through early diagnosis of NCDs
- Reduction in NCD burden and their risk factors
- Early management of NCDs through homoeopathic treatment alone or as add on to standard care

The programme shall cover prevention and control of Diabetes, Cardiovascular Diseases, Cancer, Chronic Obstructive Pulmonary Diseases and Stroke during the first phase.

Strategies of Integrated NPCDCS Programme

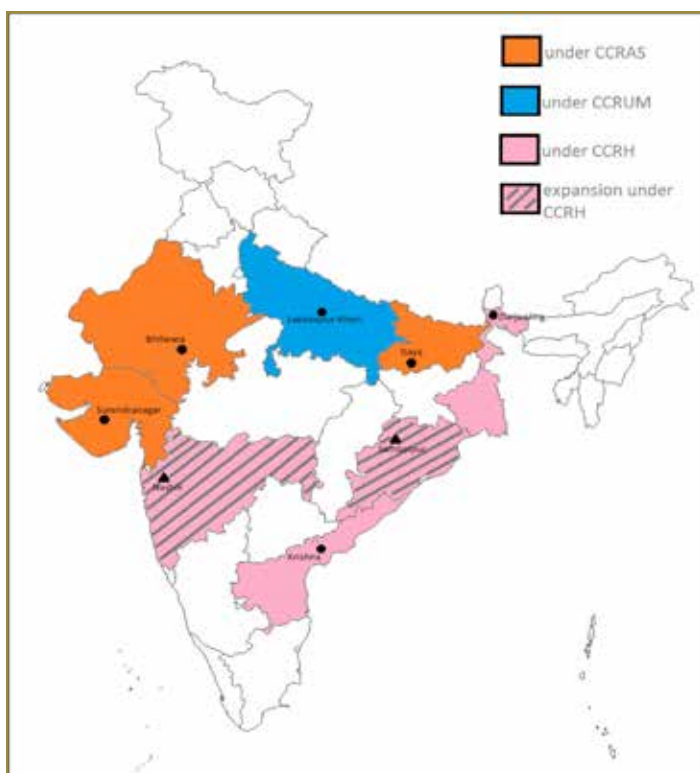
- Outreach activities: Screening for timely detection of various NCDs at the level of PHC and CHCs/CHNCs/BPHC on regular basis.
- Yoga classes for the general masses at the level of PHC and CHCs on regular basis.
- Advise on diet and lifestyle management
- Treatment cum follow up of population under homoeopathic treatment alone or as add on to standard care along with therapeutic lifestyle changes.
- A team of homoeopathic doctors, yoga instructors, yoga volunteers along with multitask workers shall provide health care services to the masses at the ground level and thus help in optimizing the use of scarce resources.

Expected outcomes

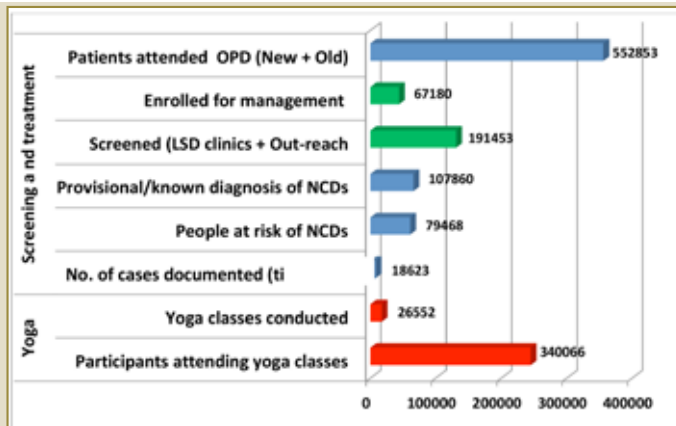
Integration of Homoeopathy along with Yoga would enable in prevention and control of NCDs through health education, promotion, behavioural change, early detection and to avoid complications.

Operationalization:

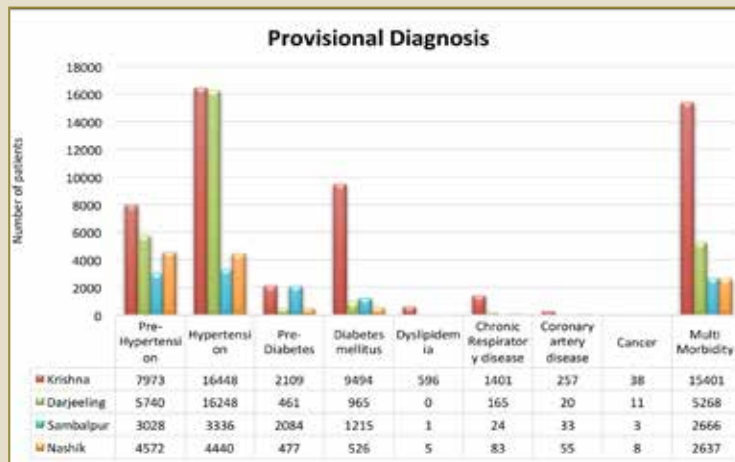
1. Field surveys are conducted for identification of CHCs at identified districts.
2. A two-day training programme cum workshop was organized by RRI (H), Gudivada at Krishna district, (A.P) on 14th to 15th September 2015.
3. Workshop to review of NPCDCS was held on 22nd Dec 2015 at Krishna district.
4. The launching of program was formally inaugurated by Hon'ble Minister of AYUSH, Shri Shripad Yesso Naik at Gudivada, Krishna District, Andhra Pradesh on 16th February 2016.
5. A two-day training programme cum workshop was organized by CRU (H), Siliguri on 8th to 9th March 2016.
6. Field surveys at Sambalpur district are conducted for identification of CHCs at identified districts on 13th June 2017.
7. A training programme cum workshop was organized at Sambalpur district on 14th to 16th June 2017.
8. Field visit at Nashik district has already been conducted on 18th and 19th January 2017.
9. A training programme cum workshop was at Nashik district on 25th July 2017.
10. Awareness rallies/activities and screening camps have been organized on the occasion of World Diabetes Day, Cardiac diseases prevention and Breast Cancer Awareness program and International Yoga Day.
11. Camps are being conducted at 21 Life style disease (LSD) clinics for mass screening of NCDs.



Activities undertaken so far:
District covered:



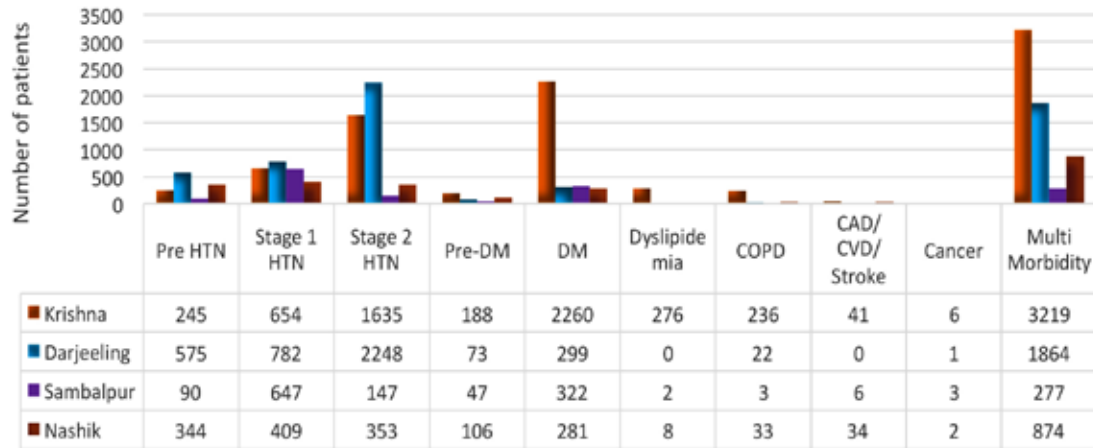
Consolidated achievements from September 2015 -January 2020



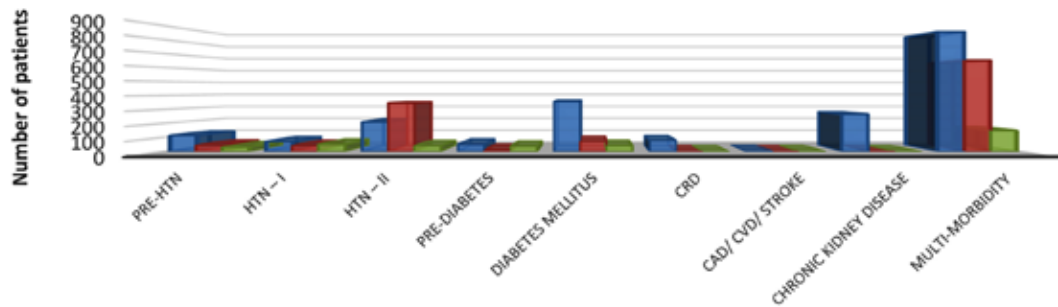
Technical resource material developed:

- Operational Guidelines for the integrated NPCDCS -pilot project.
- Training manual for yoga instructors/ volunteers and multi-task workers in English and Telugu.
- Screening card for patients attending CHNCs/BPHCs.
- Lifestyle clinic questionnaire for patients attending CHNCs/BPHCs.
- Spread-sheet for data capturing of patients attending CHNCs/BPHCs.
- Concept proposal for undertaking the integration in research mode.
- Training manual for Medical Officers is under process.
- Expansion of the programme in other districts is in pipeline.

Cases documented with patient reported outcome measures



Cases with proper documentation



	Pre-HTN	HTN - I	HTN - II	Pre-Diabetes	Diabetes Mellitus	CRD	CAD/ CVD/ Stroke	Chronic Kidney Disease	Multi-morbidity
■ Krishna	115	72	211	52	357	79	2	267	855
■ Darjeeling	45	42	346	10	74	0	0	0	651
■ Nashik	32	51	41	37	42	0	1	0	151



Launch of the programme at Krishna District



Yoga session at Darjeeling district, West Bengal



Camps conducted at Nashik district, Maharashtra



Screening of patients at Sambalpur district, Odisha

The first central monitoring visit was conducted in the Krishna District, AP, during 7th & 8th January 2019

Monitoring visits:



The first monitoring visit was conducted in the Darjeeling District, West Bengal, during 19th to 23rd February 2018

COLLABORATIONS

National Collaborations

National Collaboration with Homoeopathic Medical Colleges

Under the initiative of - 'Linking research with education' few years back, the Council launched the Short Term Studentship in Homoeopathy Scheme (STSH) for undergraduate Students (<http://ccrhscholarship.in/STSH2016/>) and CCRH Scholarship Scheme for MD/ PhD Students (<http://ccrhindia.org/pdf/MDScheme.PDF>) as a step towards capacity building and encouraging research aptitude among undergraduate, post graduate & PhD students. Since inception of program in 2014, many students have been awarded scholarship with a continuous increase in number of awardees each year.

In a step forward, the Council has signed Memorandum of Understanding (MoU) with 30 interested PG homoeopathic medical colleges for collaboration in training & research in identified areas of interest since 2016 till date. The vision behind the agreement is to inculcate research aptitude amongst students & faculties by providing technical support for capacity building through training workshops, webinars etc; provide impetus to research infrastructure in the college; establish

joint/ collaborative research OPDs in the premises of homoeopathic colleges/ institutes; tap the clinical data in research mode in a methodical manner and further take up specific projects as/where feasible.

Collaborations with 5 colleges in 2017-18, 23 colleges in 2018-19 & 2 colleges in 2019-2020 was established under the National collaboration with homoeopathic medical colleges.

Various activities have been undertaken with these colleges, a brief of which is given below:

I. Orientation Programs:

- A one-day training cum orientation workshop in Research methodology & Biostatistics to sensitize the colleges about the research needs and creating a research conducive environment, attended by 46 faculty/nodal officers from 28 colleges in the year 2018. (Fig 1)
- Orientation training programme in Research methodology & Biostatistics by CCRH officers in various states at 8 collaborating colleges which has benefitted approx. 800 participants in the years 2018 & 2019.
- Scientific convention on the World Homoeopathy Day 2019 organised by



CCRH, themed “Linking education and clinical practice with research: Advancing Scientific Collaborations” in which focused scientific sessions were organized for the students/

faculty of homoeopathic medical colleges. Sessions were attended by 328 students from 42 colleges across India.



One-day training cum orientation workshop in Research methodology & Biostatistics at CCRH

II. Research OPDs /Joint Research Projects

- Collaborative research OPDs opened in the area of Dermatology/ Rheumatology/ Respiratory Diseases/ Paediatrics/Ophthalmology in some collaborating colleges across India where data of patients captured in research mode on structured formats. Around 7000 patients seen at these specialty OPDs.

Ongoing Research Studies:

- Collaborative research studies on Haemophilia titled ‘Homoeopathy as adjuvant therapy to standard medical management in persons with Haemophilia (PWH)- An exploratory comparative study’ and ‘Homeopathy as adjuvant therapy given along with standard medical management in persons with Haemophilia and other

bleeding disorders-A pragmatic cohort study’ at Motiwala Homoeopathic Medical College, Nashik.

- First collaborative research study under the MoU between India (CCRH, Ministry of AYUSH) and Israel (CICM, Share Zedek Medical Centre, Jerusalem) titled ‘Comparison of Conventional and Homeopathic Paradigms in Treating Children aged 0 to18 Months: A Pragmatic, Randomized Clinical Trial’ being undertaken at JIMS Homoeopathic Medical College, Telangana.
- Drug proving research projects as per CCRH drug proving protocol at 10 collaborating colleges.

In pipeline:

- Molecular research study in Psoriasis and clinical research study in Periodontitis.

International Collaborations

Council is committed to enhance international cooperation for global promotion of evidence-based Homoeopathy through more international interactions, exchange of MoUs and organising international conferences.

MoUs signed by the Council with Foreign Institutions in this reporting year

ISRAEL

Centre for Integrative Complementary Medicine, Shaare Zedek Medical Center Jerusalem

Signing date: 15th January 2018

OBJECTIVES:

- a) Participation in joint research projects: International projects; meta-analysis, randomized, pragmatic multi centric and basic research studies, in areas of mutual interest;
- b) Exchange of research materials, publications, educational literature, teaching aids, information, documentation and scientific publications;
- c) Joint organization of conferences, seminars, educational opportunities, workshops and symposia;
- d) Exchanging experts for training of





practitioners, scientists, teaching professionals and students;

- e) Cooperating with interested scientists, practitioners and students in institutions or research, educational and training programmes.

During the year 2018-2019, the protocol of the first identified project: 'Comparison of Conventional & Homoeopathic paradigms in treating children aged 0-18 months: A pragmatic Randomized clinical trial' was finalised in April 2018 after meeting with the expert group and the biostatistician of the study. JIMS Homoeopathic Medical College, Hyderabad (JIMS, Hyderabad) was finalized as the study site for the project after site visit of Dr. Menachem Oberbaum, Director, Centre for Integrative Complementary Medicine, Shaare Zedek, Dr. VK Gupta, Member Governing Body & Chairman, SAC, CCRH, Dr. Anil Khurana, Deputy Director General, CCRH and Dr. Anupriya, RO (H), CCRH in August 2018. After completion of pretrial preparation, visit of study team to site in August 2018 & CTRI registration, the study has now been initiated at JIMS Homoeopathy Medical College, Telangana (where CCRH has opened its research unit in Sept'18).

The children paradigm study was initiated in September 2018, following recruitment and training of the complete study team. Achieving the target by January 2019, 108 (Homoeopathy group-54 and Conventional group-54) participants have been enrolled after screening 218 participants which are being followed up as per protocol. The progress of the study was recently monitored by site visit of Director General, CCRH in March, 2019.

BRAZIL

Federal University of Rio De Janeiro (FURJ)

Signing date: 14th July 2017

OBJECTIVES:

Basic research projects will be developed in partnership between Universities and Research Centers belonging to both countries (Brazil and India). Exchanging of students and researchers of Brazil and India; Exchange of technical and scientific knowledge between Brazilian and Indian Homoeopathic Pharmacopoeia; Clinical research with biotherapeutics (nosodes) and homoeopathic medicines; Development of specific projects characterizing priority subjects for both countries, such as Dengue; Chikungunya; Zika; Malaria; HIV; Hepatitis etc.

Status:

CCRH has developed a dengue nosode and conducted its safety evaluation study. Similarly, FURJ has also developed a nosode and conducted its safety study. The data from both the parties will be exchanged for drawing further plan of taking up a joint study in dengue.

GERMANY

Scientific Society for Homoeopathy (WissHom)

Signing Date: 15th June 2017

OBJECTIVES:

To encourage and promote co-operation in joint research projects, exchange of information, documentation and scientific publications, joint organization of conferences, seminars, workshops and symposia, exchanging experts for training of practitioners, scientists, teaching professionals and students.

Following Joint research projects have been proposed:

- Replication of models of Basic research
- Replication of model of Dichromat, Frass
- Systematic review of meta-analysis of controlled homoeopathic studies
- Development and independent replication of some RCTs
- Other clinical research projects of mutual interest

Systematic review of meta-analysis of controlled homoeopathic studies (All Indian/ English) was reviewed by CCRH; Non-English database was reviewed by Council (through translation into English) and German side. The manuscript of this work is under preparation.

GERMANY

Institute for the History of Medicine, Robert Bosch foundation
Signed on: 15th June 2017

OBJECTIVES:

Development of Museum on AYUSH system in India, archives on Homoeopathy in India, on similar lines as of Institute for History of Medicine, Stuttgart, Germany, Exchange of information, documentation and scientific publications; Joint organization of conferences, seminars etc., Fellowship programme for research scientists of CCRH.

Status:

- For the development of museum on AYUSH and Archives on Homoeopathy, Dr. Martin Dinges, Deputy Director, Institute for History of Medicine, Stuttgart, Germany and an Archivist visited CCRH Hqrs. on 7th February 2017, National

Institute of Indian Medical Heritage, Hyderabad on 8th February and on 9th and 10th February to National Homoeopathy Research Institute in Mental Health(NHRIMH), Kottayam

- As per the advice of Dr. Martin, Librarians should be involved and trained on Archives and therefore accordingly, Librarian at Headquarters has completed a “Certificate course in Records management” organized by National Archives of India, New Delhi for a period of 4 weeks in September, 2017. She also attended an extended course for this in February 2018.
- Council is in process for identifying literature/ objects which may be a part of the archives, for which official call outs have been circulated in colleges and on social media.

Status of MOUs signed by the Council with Foreign Institutions before this reporting year

USA

Homoeopathic Pharmacopoeia Committee of the United States (Triparty MoU of CCRH & PCIM & H with HPCUS)

Signing date: 23rd February 2017

Central Council for Research in Homoeopathy (CCRH) and Pharmacopoeia Commission of Indian Medicine and Homoeopathy (PCIMH) jointly signed a MoU with The Homoeopathic Pharmacopoeia Convention of the United States (HPCUS) on cooperation in the field of homoeopathic medicine in recently concluded event “World Integrated Medicine Forum (WIMF): National and Global Strategies” on 23rd -24th February 2017 at Hotel Ashok, New Delhi on drug laws and regulations. The objective given



in the MoU is as under:

- (a) Revision and harmonization of pharmacopoeias of US and India;
- (b) Exchange and development of drug monographs;
- (c) Harmonisation of protocols for homeopathic Pathogenetic Trials (Drug Proving);
- (d) Harmonisation of protocols for Drug Validation;
- (e) Harmonisation in standardization of Homoeopathic Drugs;
- (f) Exchange of data pertaining to the above objectives.

Status:

In addition to the previous meetings, during 2018-19, 2nd HPCUS Annual Convention was attended by Dr. Raj. K. Manchanda, Director General, CCRH, Dr. S.R. Chinta, Deputy Advisor (H), Ministry of AYUSH & Dr. Binit Dwivedi, R.O. (Chemistry). The technical sessions for Council on Pharmacy (CoP) Committee, Standards & Controls (S&C) and Toxicology & Safety (T&S) Committee meeting was convened on 13th April, 2018 to address the perspective from AYUSH side which was assessed for the preparation for HPUS Convention going to be held on dated 15th April, 2018. The technical deliberations were made during these sessions and future plans were also decided for the harmonization of Pharmacopoeias. Third teleconference meeting was held on 24th September' 2018 to discuss the combined excel sheet of HPI + HPUS Pharmacopoeia for comparative study, the inputs from team HPI specially on chemical drugs in terms of chemical formula, molecular weight and source of the chemical drug were discussed. There were so many queries on the monographs of plant, chemical,

animal, hormones and nosodes which were discussed broadly and desire was expressed to discuss in the next meeting at Goa under the separate agenda.

A meeting of HPCUS & CCRH was held on 23rd & 25th January 2019 on the sidelines of International Forum 'Regulation of Homoeopathy Medicinal Products'. 50 Monographs from both sides were identified fewer than one of the agenda to harmonize the Pharmacopoeia. The Monographs of both the Pharmacopoeias were discussed at the length and out of 50 Monograph, total 18 Monographs were discussed during the meeting. Besides this, general notice of both the Pharmacopoeias were also discussed under another agenda. The compilation of both the monographs and general notice is going on. Rests of the monographs are also being harmonized as well.

Signing of MoU with HPUS during WIMF- 2017

ARGENTINA

Universidad Maimonides

Signing date: 26th August 2016

OBJECTIVES:

Encourage & promote co-operation in joint research projects; exchange of documentation & scientific publication; organization of conferences, workshop etc.; exchange of experts for training programmes; co-operation in education activity, courses, seminars etc.

Status:

- A multi-country study: "Prevalence of selected objective signs of the muriatic family of homeopathic medicines" has been designed. The study has been initiated in India in 05 institutes/units of Council (Noida,

Kolkata, Port Blair, Agartala and Gudivada).

- Skype meetings and conference calls have been held to share the progress of the study in the countries so far.
- Following this, data has been recorded in a uniform spreadsheet and skype meetings have been held with the international investigators to share the progress of the study at all the centres.
- In India, 6293 patients from general population have been screened as per protocol and 188 patients have been prescribed a Muriatic remedy since inception.
- The data obtained so far is under analysis and discussion with the international investigators.

ARMENIA

Yerevan State Medical

University, Government of Armenia

Signing date: 09th April 2016

OBJECTIVES:

Establishment of an “Academic Chair” in Homoeopathy in institute to undertake academic & research activities, design academic standard, improvement in curriculum development, provide academic leadership to the institute, explore feasibility of collaborative research, conduct workshops, seminars & advocate safe use of Homoeopathy in Armenia

Status:

As per the MoU, a Chair of Homoeopathy was to be developed and accordingly, Ministry of AYUSH has deputed to the University, Prof. Dr. Alok Kumar, Former Advisor, Ministry of AYUSH, Govt. of India.

CANADA

College of Homeopaths of Ontario (CHO)

Signing date: 09th April 2016

OBJECTIVES:

Co-operation in the field of Research & Education in Homoeopathic Medicine

Status:

- Joint Working group has been constituted.
- A delegation of Joint Secretary, P. N. Ranjit Kumar, Ministry of AYUSH and Dr. Raj K. Mandranda, DG, CCRH visited the institute during international conference organized by CHO on 25th April 2017.
- A Workshop on 26th April 2017 on evidence-based Homoeopathy in Dermatology was conducted by CCRH in which Director General, CCRH addressed 20 homoeopathic doctors along with few Council members.
- Skype meeting was held by Director General, CCRH on 25th October 2017 with officials of CHO for further action plan
- Prof. Bhupinder Sharma, President, CHO recently visited CCRH, New Delhi on 19.03.2018 and its institutes (20-22.03.2018) at Kottayam & Kolkata to discuss possibilities & strategies in respect of tools relating to the work done by India in the areas of evidence-based research.
- In November 2018, College of Homeopaths of Ontario (CHO) organised a Canadian Homeopathic Conference at Niagara Falls, Ontario from November 16-18, 2018. The conference theme was “Managing Lifestyle Disorders: Homoeopathic Integration- A Multifaceted Healthcare Approach”. Dr. Anil Khurana, Deputy



Director General, CCRH participated in the conference and gave presentation to showcase activities and achievements of the Council.

- Meeting was held between College of Homoeopaths of Ontario (CHO), Canada and CCRH to discuss progress of MoUs on 19th Nov. 2018 at Toronto. It was attended by Dr. Bhupinder Sharma, President and Dr. Basil Ziv, Registrar from CHO and Dr. Anil Khurana, Deputy Director General from CCRH. The terms of MoU were reviewed during the meeting with possibilities of joint research in areas of ADHD and Autism. Further, discussions about status of education policy in both countries, Canada and India were made.
- Subsequent to the meeting held on 19th Nov. 2018 in Toronto, two publications (Standard treatment Guidelines and Dossier) of the Council were sent to CHO for exchange of information. Also, a follow up email regarding the next steps in pursuing the objectives of the MoU has been sent by Council recently.

UK

Royal London Hospital for Integrated Medicine (RLHIM)

Signing date: 11th November 2015

OBJECTIVES:

- To strengthen and develop the co-operation in the field of Research and Education in Homoeopathic Medicine. Joint Research may include: randomized, double-blind control trial in Acute Otitis Media (AOM).
- Systematic review & meta-analysis of HPT
- Prospective, observational study

to validate prescribing indications for commonly used Homoeopathic medicines.

Status:

In order to give international visibility to Council's work, following activities are being undertaken:

- A Systematic review of provings published during 1995-2015 is being undertaken.
- Four (04) manuscripts to project Homoeopathy in Public Health with Indian Perspective are being prepared. Of these, one article on 'Effectiveness of homeopathic medicines as add-on to institutional management protocol for acute encephalitis syndrome in children: an open-label, randomized, placebo-controlled trial' has been published. Other papers Homoeopathy in Dengue and Situation of Homoeopathy in Public Health in India have been accepted for publication. Other manuscripts on Homoeopathy for Healthy Child and on multi-drug resistant tuberculosis are being prepared.
- In October 2018, a representative from CCRH, Dr. Harleen Kaur, Research Officer, CCRH, presented a talk on the role of India in global collaborations in Homoeopathy during 98th Faculty of Homoeopathy (FoH) Congress. She also discussed the next steps of the MoU with FoH President, who is also a representative of RLHIM.
- She further interacted with other Homoeopathy researchers from Queen Mary University of London, UK, following which they visited India in February 2019 to explore possibilities of joint work. In April 2019, the Scientific Convention on World Homoeopathy Day was organized by

Council, where Faculty of Homeopathy, UK (of which RLHIM) was an association partner.

- FoH has proposed a lot of scope for joint work on Homoeopathy between India and UK, and the talks are in progress for drafting further action plan.

MEXICO

Instituto Politecnico Nacional through the Escuela Nacional De Medicina Y Homeopatia

Signing date: 17th October 2012

OBJECTIVES:

- Setting up of an Academic Chair in Homoeopathy in the National School of Medicine and Homoeopathy of the IPN
- Joint research projects, organization of studies, seminars, conferences, courses, exchange of information, documentation and scientific publications.

Status:

- MoU has not been signed with Mexico yet; only Letter of Intent was signed.
- On November 2012 – Council had exchanged its 33 publications with IPN.
- A dossier on 'Homoeopathy for Gentle Healing' has been translated in Spanish
- 2015 – Invitation was sent for joint research work along with invitation to visit India.
- Communication with IPN has been revived after Council pursued the matter intensely. A letter from Director General, was sent dated 23rd April 2019, extending his interest in collaborating and contributing support for the above work has evoked response from Director, National Polytechnic Institute,

National School of Medicine and Homeopathy, who has shown interest for the cooperation between the Mexico & India in the strengthening of traditional medicine and homoeopathy and would like to contribute in:

- a) Participation in research projects
 - b) Common participation in international project for international cooperation
 - c) Organization of seminars, courses and studies in common interest areas
 - d) Exchange of information, documentation and scientific publications
 - e) Common organization of conferences, seminars, workshops and symposia
 - f) Participation in drug proving program.
- Further, a letter from Director General, was sent dated 23rd April 2019, extending his interest in collaborating and contributing support for the above work.

RUSSIA

Status:

Dr. S. Gopinadhan, Scientist-4, National Homoeopathy Research Institute in Mental Health (NHRIMH) Kottayam, Kerala was deputed to participate and showcase the activities of the Council in International Convention on World Homoeopathy Day held in Moscow, from 8th-11th April 2018. The convention was jointly organised by Liga Medicorum Homoeopathica Internationalis (LMHI) with collaboration between Russian homeopathic association and Russian homeopathic Society associated with National Homeopathic Council and Association of Professional Alternative Medicine.

It was dedicated to commemorate birth anniversary of Dr. Samuel Hahnemann and 230-years celebration



of Semeon Korsakov, - Russian homoeopathist who worked closely with Hahnemann and whose name is called special Korsakoff's scale of homeopathic dilutions.

A meeting was held between Dr. Raj K. Manchanda, Director General, Central Council for Research in Homoeopathy (CCRH) and Prof. (Dr.) Leonid Kosmodemyanskiy, Professor Chair of Homeopathy Peoples' Friendship University of Russia (RUDN) on 28th Sep. 2018 over Skype at DG's chamber, CCRH Hqrs, New Delhi. The meeting was also attended by Dr. Svetlana Smirnova, Professor, RUDN University, who helped in translating the dialogues and Dr. Deepti Singh, Research Officer (H), CCRH.

The status of Homoeopathy in both the countries was shared along with discussion about translation of publications in India & Russia which can be utilised for benefit of Homoeopathy globally. Further, Dr. Leonid apprised that RUDN has signed a MoU with Ministry of AYUSH for cooperation in field on Ayurvedic sciences; similarly an agreement can be signed in field of Homoeopathy. It was also discussed that IJRH abstracts can be translated in Russian language by Dr. Leonid and Dr. Svetlana to start with.

AUSTRALIA

Dr. Issac Golden presenting MoU to Director, NIIM, Australia

1. Rejoinder to the Australian Interim Report on "Review of Pharmacy Remuneration and Regulation", wherein it was proposed that Homeopathy and homeopathic products should not be sold in PBS-approved pharmacies, was made on 22nd July 2018 by Director General, CCRH. It was submitted that the sale

of homoeopathic medicines should not be stopped in PBS-approved pharmacies and be made easily available to patients in Australia, as is the case in several other countries.

2. Talks on an agreement between Central Council for Research in Homoeopathy (CCRH) and National Institute of Integrative Medicine (NIIM), Australia for co-operation in field of Research in Homoeopathy are in process.
3. Dr. Isaac Golden, Research Member, National Institute of Integrative Medicine (NIIM) and Director, Australasian College of Hahnemannian Homoeopathy visited CCRH hqrs. On 12th and 13th April 2018; had discussion and meeting with scientists of the Council.
4. One of the outcomes of meeting with Dr. Isaac Golden was sharing of information on Homoeoprophylaxis (HP). Dr. Golden shared some of his published papers on HP.
5. Given his expertise in epidemics and public health, Dr. Golden is providing his expertise to the Council in the research projects and protocols related to epidemics.
6. An information paper on Homoeopathy by National Health and Medical Research Council (NHMRC) has received lot of criticism for being biased and methodologically flawed. It has led to misrepresentation and negative impact on Homoeopathy. An official rebuttal to NHMRC report has been sent to CEO, NHMRC. It was gathered that NHMRC conducted the review twice and first report was never made public, a campaign has been launched to demand release of first report by NHMRC. The Council has supported this campaign.

Visits of foreign resource persons/ delegations

International Delegation:

Many international delegations often visit India to enhance international cooperation for global promotion of evidence based Homoeopathy through more international interactions, exchange of MoUs & organizing international conferences.

CCRH has been a host to several guests and delegations.

INTERNATIONAL SEAT

- Dr. Raj K. Manchanda, Director General, CCRH is Secretary for Research of renowned international body Liga Medicorum Homoeopathica Internationalis since June 2012.
- Dr. Bindu Sharma, Research Officer, CCRH, is the Editor-in-Chief of the international journal, Homoeopathic Links, since July 2018.





Linking Research with Education

CCRH is an apex research organization facilitating scientific research in Homoeopathy. It also facilitates linking research with education. As a step forward in capacity building and encouraging research aptitude among undergraduate, postgraduate & PhD students, the Council has initiated schemes for providing scholarship to selected medical undergraduates & graduates/postgraduates pursuing MD/ PhD programmes in Homoeopathy through recognized medical institutes/ Universities.

Short Term Studentship in Homoeopathy (STSH) Programme

This scheme is primarily aimed at promoting good quality research in homoeopathic medical colleges through students as well as improving the visibility and accessibility of their research work to larger research audience. The Council, through this scholarship schemes to medical graduates/ postgraduates, will procure the dissertations/thesis in its library and the salient highlights of each dissertation/ thesis will also be posted on its website.

Quality MD Dissertation in Homoeopathy

The Scholarship for Quality MD Dissertations in Homoeopathy was

initiated in the year 2012. It is primarily aimed at promoting good research in Homoeopathy as well as improving the visibility and accessibility of the research work of young postgraduate doctors to a larger research audience. The selected candidates are awarded a scholarship of Rs. 25,000/- (twenty-five thousand only) after submission of final reports.

In the year 2017, the scheme was revised, thereafter which applications are invited only once in a year between 1st to 31st December. Medical postgraduates in Homoeopathy who completed their MD (Hom.) course in first attempt through recognized College/University included in the Second Schedule of Homoeopathy Central Council Act, 1973 can submit their dissertations and manuscripts within 1 year of declaration of result of their MD course. Applicants are then shortlisted by the Internal Review Committee of the CCRH and shortlisted candidates are invited for a short presentation of their work before the panel of experts for final selection of the awardee. The details of guidelines, methodology and timeline of scheme are available at the URL: www.ccrhindia.nic.in.

The selected candidates give their presentation before the panel experts & the winners are awarded with the scholarship of Rs. 25000/-

Academic Activities: National Homoeopathy Research Institute in Mental Health (NHRIMH), Kottayam

National Homoeopathy Research Institute in Mental Health (NHRIMH), Kottayam, Kerala is one of the reputed institutes under the Central Council for Research in Homoeopathy (CCRH) spread across 1.7 acres of land. The main thrust and mandate of this Institute is Psychiatry Care apart from the usual medical care to general population and various community health services. The quality care and facilities provided by this Institute attracts more than 300-400 patients per day in General OPD and there is an average of 86% of IPD intake daily. Research activities have been a frontrunner of this Institute and as a result were able to publish several publications in peer reviewed journals. Considering its repute in the field of research and patient care, Ministry of AYUSH accorded permission to start academic activities in this Institute in

the year 2016 and it now stands as one of the Post Graduate Institute in Homoeopathy providing MD(Psychiatry) and MD(Practice of Medicine). This course is affiliated to Kerala University of Health Sciences, Thrissur, Kerala. Giving thrust into research and academic action plans, this Institute became a rare breed in the field of Homoeopathy nurturing and integrating education and research to enhance the quality and evidence based care to the patients. The academic activities include innovative and inquisitive research studies motivating the young minds through a classical Homoeopathy approach to IPD patient care. In order to disseminate the activities, NHRIMH conducts regular CMEs and seminars for the profession and for the students of Homoeopathy. Leaping into the world of research and education this Institute is aiming at being elevated to an Institute of National Importance in Homoeopathy.

Table 1: The annual intake summary of students in MD course:

Subjects	Annual Sanctioned intake of MD students by Ministry of AYUSH	Annual sanctioned strength approved by KUHS	Admission taken in the year 2017-2018	Admission taken in the year 2018-2019
Psychiatry	10	6	5	6
Practice of Medicine	10	6	6	6
Total	20	12	11	12



Awards Scheme

CCRH with direction from Ministry of AYUSH in 2017 initiated a scheme for giving Awards, which are as follows:

BEST RESEARCH PAPER AWARD IN

HOMOEOPATHY: The Research Paper Award is in recognition of the importance of published research papers for developing, promoting quality contribution to research and writing among scholars and disseminating knowledge for the benefit of current and future practice of Homoeopathy. The Award aims to celebrate individual excellence in research.

YOUNG SCIENTIST AWARD IN

HOMOEOPATHY: The Best Young Scientist Award is for promoting excellence and recognizing outstanding contributions made by research scientists for their work in the field of Homoeopathy during last five years preceding the year of the award. The Award aims to celebrate individual excellence in research.

LIFETIME ACHIEVEMENT AWARD

IN HOMOEOPATHY: The Life Time Achievement Award bestows to work that have contributed significantly in unique or innovative findings, theoretical constructs, educational approaches or practices and/or have made exceptional practical application(s) of others' research. The Award recognises distinctive and exemplary contributions in Homoeopathy research/practice.

BEST TEACHER AWARD: The purpose of the award is to give recognition to the eminent teacher who has contributed significantly for enhancing homeopathic knowledge and practices. The award is to be given to the best teacher in the field of Homoeopathy for contributing a great deal of service in different spheres of activities in Homoeopathy in clinical, literary and drug research, separately.

Other Awards

Council's scientific article titled 'Comparative Standardization study for determination of reserpine in *Rauwolfia serpentine* homoeopathic mother tinctures manufactured by different pharmaceutical industries using HPTLC as a check for quality control', published in Indian Journal of Research in Homoeopathy 2017;11;109-17 won 2nd Prize at Dr. P. D. Sethi National Memorial Award function. The prize carries a reward of Rs. 12,500/- and a certificate to each author. The authors of the paper are Binit Kumar Dwivedi, Manoj Kumar, Anil Khurana, Bhopal Singh Arya, Echur Natarajan Sundaram and Raj K. Manchanda.

Dr. P. D. Sethi's Annual Award Instituted by KONGPOSH Publication, publishers of the Pharma Review and Indian Pharma Reference guide in honor of Dr. P. D. Sethi, Eminent Pharma Analyst is given for the best research papers published in the field of pharmaceutical analysis every year.

ONLINE ACTIVITIES

Council's Website:
www.ccrhindia.nic.in



The official website (www.ccrhindia.org) of Central Council for Research in Homoeopathy was launched on, 8th September 1999 during inauguration of “Mystique India” organized by Dept. of ISM & H at Pragati Maidan, New Delhi. Since then by a collaborative effort of CCRH headquarters, its units and institutes across India, the website had been functioning as the “face of

the Council” outlaying information pertaining to findings in various facets of homoeopathic research carried out by the Council, disseminating the research findings in the form of publications. Its universal accessibility has been always been ensured irrespective of device in use, technology or ability. As a result, the website has been viewed from a variety of devices, such as web-enabled mobile



devices, VOIP phones, desktops etc. Websites have been the most important medium for 'electronic governance' by the Govt. anytime, anywhere delivery of Government services. In our endeavor to continue the enhancement and enrichment of the Council's website in terms of its content, coverage, design and technology etc. the Council revamped its static website as per GIGW compliance (Govt. of India Guidelines for websites) in the year 2016. The Council's new dynamic website (www.ccrhindia.nic.in) was officially launched by Sh. Shripad Yesso Naik, Hon'ble Minister of State (Independent charge) at the World Integrated Medicine Forum, organized by the CCRH at Hotel Ashok, New Delhi on the 23rd and 24th February 2017.

The new dynamic bilingual website of the Council presently hosted on the NIC server, has been developed in compliance with GIGW guidelines and has a more contemporary, user-friendly appeal. Development of a portal on Homoeopathy archives (a part of the Council's website) is also underway which shall serve as a digital repository of homoeopathic knowledge, accumulating documents

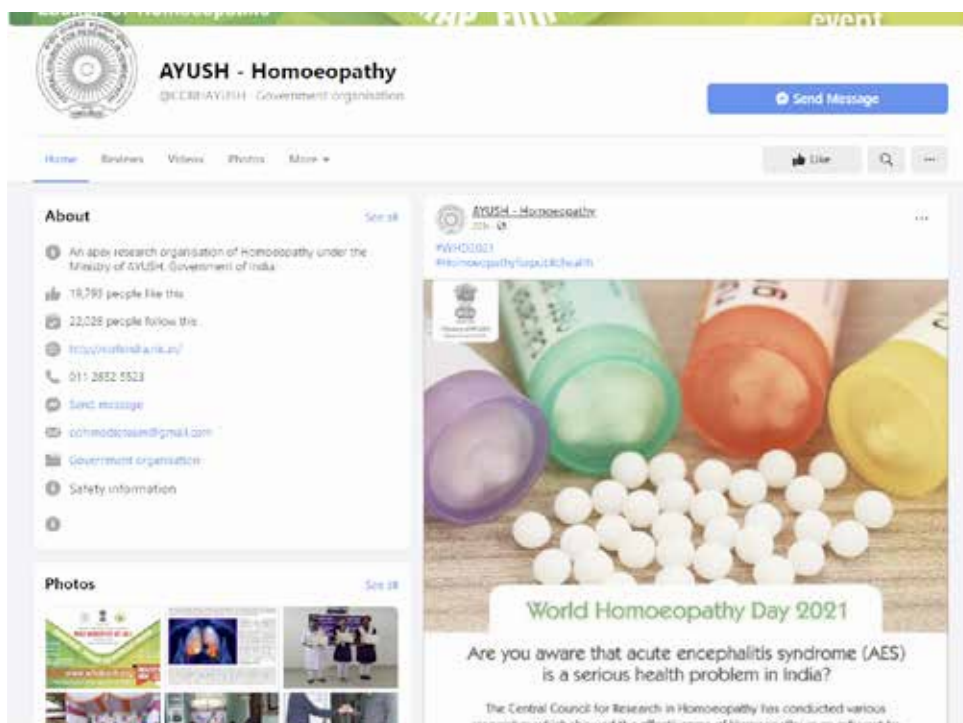
from all corners of world under one roof for the purpose of public and professional consumptions.

The website in itself is a complete reserve of information about the organization, infrastructure, manpower, functioning, research projects, and career opportunities etc. of the Council and its network of Institutes / Units all over India. The taskbar of the website includes: "About us", "Our Network", "Research Activities", "Publications", "Library", "Media Gallery", "Citizen Charter", "RTI" and "Contact Us". The various programs mentioned in the website are: "Intramural Research", "International cooperation/ MoUs", "National Collaborations with Homoeopathic Colleges/ National MoUs", "Expression of Interest for Collaborative Research", "Extra Mural Research", "Indian Journal of Research in Homoeopathy", "Online Book shop", "Dissemination and Communication", "Recruitment", "Tenders", "Research across the globe and success stories", "Scholarships", "CCRH Awards Scheme", "Homoeopathic Pharmacopoeia of India" and "Homoeopathic archives of India".

Social Media Page

In addition to the website, the Council's social media team is maintaining the 'AYUSH Homoeopathy' facebook page, which was created in the month of February 2018 with a vision to disseminate knowledge about Homoeopathy to the public at large. In the current year, through continued innovative efforts of the team, the page has been able to witness a tremendous outreach of its self-designed/ original posts/factual information from print media etc. going as far as 113.9 K . The page also achieved its landmark 10K likes this year.

Council has its own dedicated You Tube channel with 1.4K subscribers which is updated with videos of documentaries on Homoeopathy, talks from scientific convention on World Homoeopathy Day; seminars on scientific and technical writing etc. from time to time.





Webinars: Connecting Digitally

As mandate of the Council is to promote and conduct scientific & ethical research and disseminate the significant research findings to profession and public, it was desired that Council adopt new learning technologies and organize webinars for capacity building, enhancing research aptitude in homoeopathic students, practitioners and clinicians. The Council started conducting Webinar from World Homoeopathy Day in April 2020 onwards.

Background: Homoeopathy needs to progress by utilising internet based continuing education. Also, considering the prevailing situation of digital transformation and virtual conferences being the new normal, webinars have become a widely popular medium of learning and interacting among

academicians, UG/PG/PhD scholars, budding researchers in India and across the globe. As science is advancing each day, the scientists of the Council must also keep themselves abreast with latest trends in research and Homoeopathy, these webinars will help scientists of the Council to enhance their technical skills and expertise.

Advantages: Participants can login from anywhere and on any device over the internet and can learn while sitting at home or office/clinic from acclaimed experts in the field of Homoeopathy. These webinars will be held throughout the year, each will feature different expert and topic. The salient features of webinars highlighted in figure 1 & webinar participants in figure 2.



Figure 1 Salient features of Webinars



Figure 2 Webinar participants

Achievements: Council has organized 6 webinars from 10th April 2020 till date on various topics focussing on the topics of interest of students, practitioners, and clinicians. The details of webinars are given in figure 3.

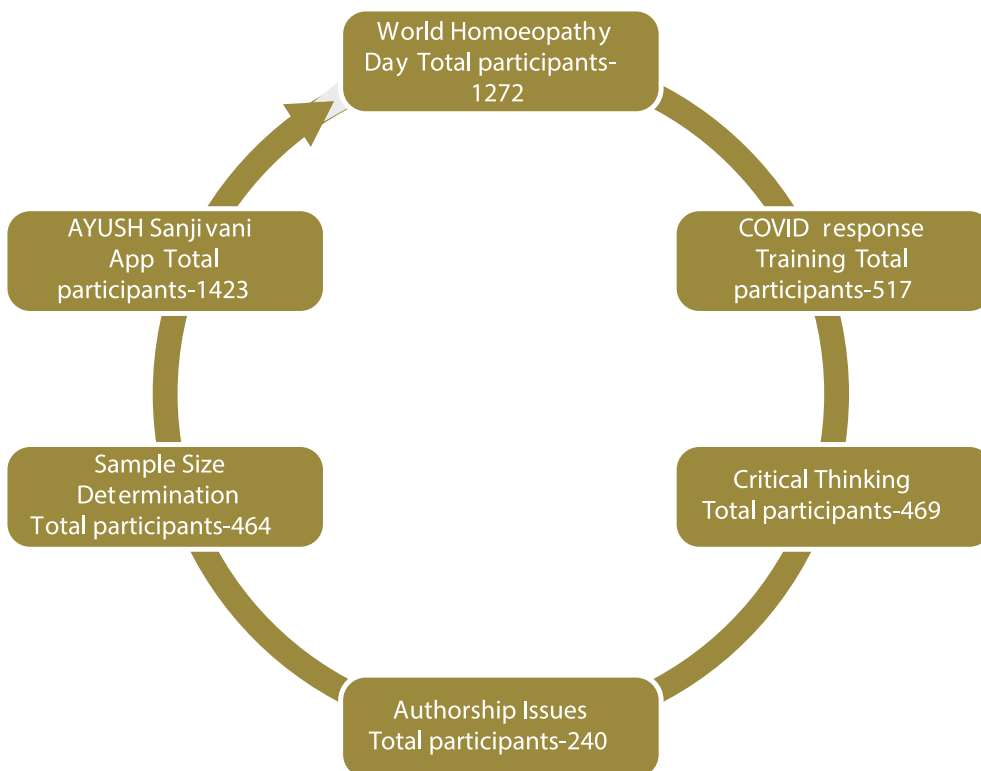


Figure 3 Details of webinars



CONNECTING DIGITALLY ON WORLD HOMOEOPATHY DAY

“World Homoeopathy Day” which is celebrated every year on 10th April to commemorate the birth anniversary of the founder of Homoeopathy, Dr. Samuel Hahnemann by organising scientific convention with large gathering of global homoeopathic fraternity under one roof with deliberations and presentations by renowned speakers was celebrated digitally this year.

Highlights:

The webinar was inaugurated by Sh. Shripad Yesso Naik, Minister of State (IC), Ministry of AYUSH; Vaidya Rajesh Kotecha, Secretary; Sh. PK Pathak, Additional Secretary; and Sh. Roshan Jaggi, Joint Secretary from the Ministry of AYUSH, also graced the occasion with their live addresses. Keynote speaker Prof. George Vithoukas, Director, International Academy of Classical Homeopathy, Dr. Robbert V. Haselen, Member, Homoeopathic Pharmacopoeia of United States; and Prof. Aaron To,

Director, Living Homoeopathy, Hong Kong, also joined in as valued speakers. Significant deliberations were also made by Dr. V. K. Gupta, Chairman, Scientific Advisory Board, CCRH, Dr. Anil Khurana, Director General In-charge, CCRH; Dr. Raj K. Manchanda, Director, Directorate of AYUSH, Government of Delhi; Dr. S. R. K. Vidyarthi, Director, Ministry of AYUSH; and Dr. Subhas Singh, Director, National Institute of Homoeopathy, Kolkata. The webinar was successful in outlining the possible options of Homoeopathy in the management of COVID 19 and areas to focus for the overall development of Homoeopathy and providing a platform for discussing both conceptual and policy guidelines, with practical experiences from the Ministry officials.

The webinar on “COVID-19 Response and Containment Measures: Training of COVID warriors (Homoeopathic doctors and workers)” was also held on 10th April 2020, for Homoeopathy practitioners. Highlights of the webinar content (Figure 4).



Figure 4 COVID warrior training for Homoeopaths

WEBINAR FOR CAPACITY BUILDING

Students and aspiring researchers need to undergo training to conduct clinical trials as per guidelines of WHO/ICMR and various steps to improve methodological quality of studies need to be promoted. It is known to us that there is no dearth of effectively treated cases and remarkable cure as seen by many homoeopathic practitioners on day-to-day basis. However, capturing this clinical expertise in form of research evidence is limited. Thereby, CCRH can provide appropriate training to budding researchers through webinars. In view of above, three webinars were held on Sample Size determination, Authorship issues and Critical Thinking.

- The webinar on “Critical Thinking as Applied to the Art and Science of decision making in homeopathy: Reflections on The Role of Reason and Intuition” was held on 23rd April 2020 by Dr. Robbert Van Haselen, Senior homoeopathic consultant, director, WIMF. Dr. Haselen deliberated on definition of critical thinking, biases, Heuristics, intuition; Introduction to the main biases affecting decision making in homeopathy along with interactive session on role of intuition and rationality in decision making during the webinar. In Q & A session, many questions were answered live by Dr. Robbert.
- The webinar on "Authorship criteria in publishing research work, and issues surrounding it" was held on 27th April 2020 where in Dr. Lex Rutten, MD, Netherlands shared his experience and views on Authorship and issues around it. The webinar covered a highly sought attribute Authorship

which is associated with recognition for innovation, intellect, and creativity.

- The webinar on “Sample size determination in clinical trials” which was held on 7th May 2020 by Dr. R. M. Pandey, Professor & Head in the Department of Biostatistics, All India Institute of Medical Sciences (AIIMS), New Delhi. It was an insightful webinar on critically important aspect of any study i.e. determining and calculating the appropriate sample size to answer the research question.

WEBINAR FOR SENSITIZATION

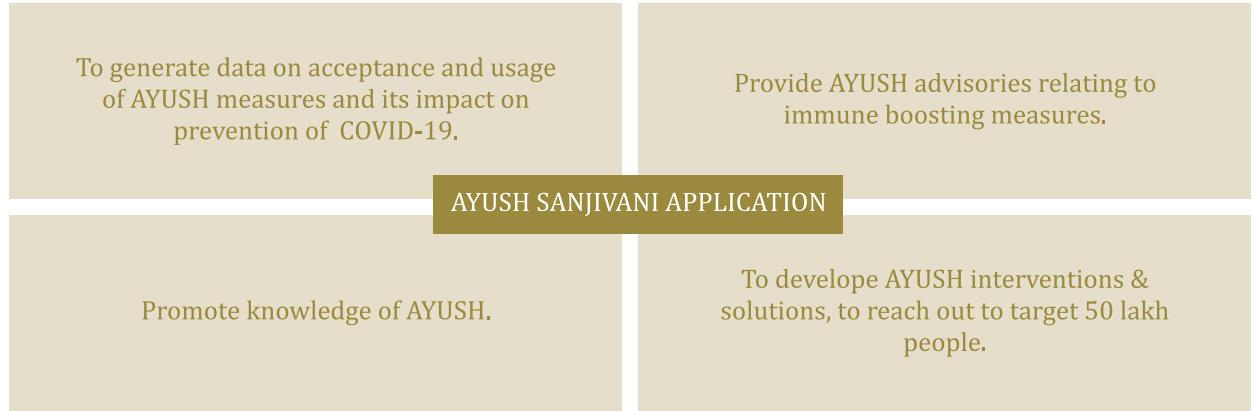
Ministry of AYUSH launched “AYUSH SANJIVANI” mobile application for understanding the measures adopted by public for enhancing immunity and keeping themselves healthy in the difficult COVID-19 situation. In this sequence, the Council planned a series of webinars for the Homoeopathic medical officers (State-wise) and Homoeopathic medical colleges to sensitise them toward AYUSH Sanjivani application based study.

The Institutes Incharges were directed to contact Principals, faculty, students, private practitioners, Homoeopathic medical officers, or district AYUSH Officers in their respective states and encourage them to participate in these webinars. The webinar schedule with unit wise date and time were prepared and shared with incharges, keeping in view that one webinar each day. In this regard a ToT (Training of Trainers) program was organized for all unit officers on 6th July wherein Mr. O.P. Verma, I.T. Manager, C.C.R.H., New Delhi and Dr. Deepti Singh, R.O.(H)CCRH Hqrs, Webinar Coordinator, oriented all attendees about various online platforms like MICROSOFT TEAMS,



GOOGLE MEET and CISCO WEBEX. Demo was given explaining the steps to conduct webinar through these platforms and how to schedule the webinar and details about the “AYUSH SANJIVANI

APP” were also explained. Subsequently, 23 units conducted the webinar which was attended by more than 1400 participants.



Implementation of AYUSH Hospital Management Information System (A-HMIS)

A-HMIS is a comprehensive IT platform to effectively manage all functions of health care delivery systems and patient care in AYUSH facilities. A-HMIS is one of the components of the AYUSH Grid Project which is envisaged as the IT backbone of the AYUSH sector by the Ministry of AYUSH. Real time patient information is collected on a cloud-based software platform in a usable format primarily aimed at understanding the morbidity pattern of patients visiting the OPD facilities of the Council. It is also aimed at efficient management, documentation and data retrieval of AYUSH hospital systems to derive comprehensive data of all hospitals which would help in research as well as the development of an effective AYUSH Health Policy. The software has registration, OPD and IPD consultation and pharmacy modules. After the implementation of A-HMIS in November 2018 in a phased manner, it has been functional in 20 health facilities of the Council where 3,20,903 patients have been registered and 1,79,543 patients have been consulted in the A-HMIS till date. The Council has fully equipped these Institutes with respect to installation of specific hardware requirements. The

AYUSH Grid cell of CCRH monitors the functionality of A-HMIS and reports to Ministry on the weekly basis. The following trainings have been imparted to the Research officers of CCRH and Medical officers of C.G.H.S dispensaries:

i. Trainings conducted by the Ministry of AYUSH-

- Two-day training at National Institute of Siddha & Hospital (NIS), Chennai on 22nd and 23rd October 2018 and one day training at CCRS, Chennai on 21st Jan 2019 where 03 officers were trained.
- Two-day training at Central Council for Research in Siddha (CCRS), Chennai on 24th & 25th January 2019 where 04 officers were trained.

ii. Trainings conducted by CCRH-

- Two-day workshop at DDPRCRIH, Noida on 7th and 14th November 2019 for CGHS AYUSH Doctors posted in Delhi on A-HMIS).
- In-house training workshop for 'Implementation of AYUSH-Hospital Management System(A-HMIS)' for 09 Nodal Officers of CCRH on 5th December 2019.



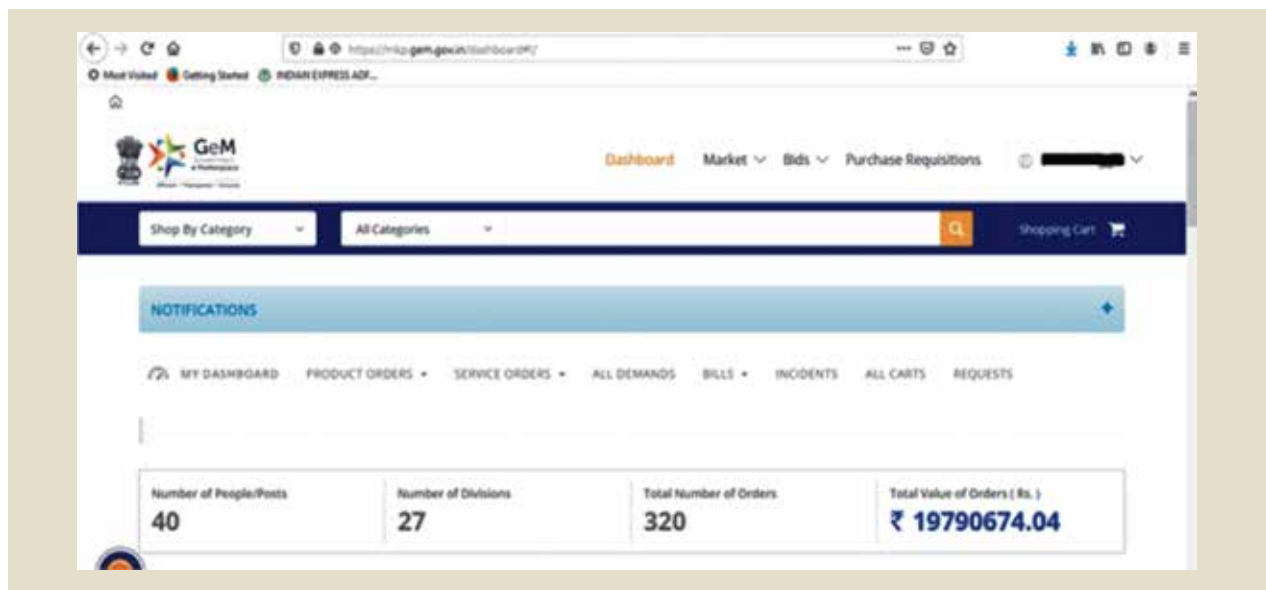
Implementation of E-Commerce Government e-Marketplace (GeM Portal)

A meeting was organised on 18th May 2017 at 11:00 am in the committee room of CCRH Hqrs, New Delhi to create awareness among the staff members about purchasing goods through Government e-marketplace (GeM). Sh. Hari Om Kaushik, Asstt. Director (Admin.), made a presentation and explained to all, the GeM, launched on 9th August 2016, is a one-stop e-Market place to facilitate on-line procurement of common use Goods & Services required by various Government Departments/Organizations/PSUs. He explained the benefits of using GeM in govt. organisations. GeM will enhance transparency, efficiency and speed in public procurement while facilitating the

government users in achieving the best value for the money. He emphasize that, one of the key aspects of using GeM is to minimize government's human transactional interface, others being minimum pricing with maximum ease, efficiency and transparency.

Central Council for Research in Homoeopathy has implemented online method of procurement for every product and services. The Council prioritize the Government e-Marketplace as a medium for purchase of all the product and services since 2017. In the event that the items are not available on GeM portal, the bids are received through e-Procurement portal developed by NIC.

Total number of orders	Total value of orders (Rs.)
320	19790674.04



Archives on Homoeopathy

'Archives on Homoeopathy', a CCRH initiative, has been developed for capturing, digitizing & online sharing of the library resources in order to support scientific/research/teaching communities of Homoeopathy. It is a digital repository of accumulated knowledge in Homoeopathy, having collection of old and valuable books, old journals, research articles, popular articles, event impressions, success stories, case studies, annual reports, newsletters, bulletins and other grey literatures spread all

over the world. India has had a rich history in Homoeopathy and the archive aims to bring forth the work of Indian Homoeopaths along with their global counter parts. It acts as a meeting point of research institutional repository, digital library and further collections of Homoeopathic research material of national and global significance. It is a result of passion towards Homoeopathy and knowledge management. The Archives on Homoeopathy is available on <http://aohindia.in/jspui/>





AYUSH Research Portal

Ministry of AYUSH has developed AYUSH Research Portal for disseminating research information related to all AYUSH systems of medicine (Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy). The portal provides collection of good quality research articles published in various peer-reviewed and other journals.

The information provided is categorized into individual AYUSH medical systems against a standard set of medical conditions, based on WHO disease classification ICD-10 and navigation is according to ICPC's (International Classification of Primary Care) 17 categories. It permits search of research articles with title, authors, scholars, guide, co-guide, designation, department, institution, address, journal, university, abstract key words, body system and disease.

Clinical Research is further classified into evidence grade-A, B, C based on general guidelines for methodologies on

research and evaluation of traditional medicine published by World Health Organization (WHO).

Clinical Research	: 678
Pre- Clinical Research	: 144
Drug Research	: 436
Basic and Fundamental Research	: 1070

The Council has attributed in selection and uploading of 2328 research articles on the said portal, in the form of abstracts and full texts (whenever available free of cost). In case of paid articles, links have been provided to access full text articles. The portal (accessible through <http://ayushportal.nic.in>), will create awareness and would provide evidence regarding the research conducted by AYUSH systems of medicine, thereby generating wider acceptance among practitioners, policy – makers, researchers, authors, students and general public worldwide.



OTHER ACTIVITIES

Swachh Bharat Abhiyan (SBA) or Clean India Mission

Under 'Clean India Campaign' or 'Swachh Bharat Abhiyan' an initiative of Government of India to make India clean and healthy and as per the direction received from Ministry of AYUSH regarding Swachhta Abhiyan, Swachhta Pakhwada was observed at CCRH Headquarters and peripheral institutes/units. Several activities emphasizing the role of 'Cleanliness' in office premises and nearby as well were conducted and received a great response from each and every member of the Council. Under Swachhta Abhiyan administrative buildings, units, research centres, office premises along with surrounding areas were examined for cleanliness. Importance of sanitation to keep the environment and surroundings healthy was realized and this resulted in sensitization of officials and staff about importance of cleanliness.

Objectives of the 'Swachh Bharat Abhiyan'

- i. Bring about an improvement in the general quality of life in the rural areas, by promoting cleanliness, hygiene and eliminating open defecation.

- ii. Accelerate sanitation coverage in rural areas to achieve the vision of Swachh Bharat.
- iii. Motivate Communities and Panchayati Raj Institutions to adopt sustainable sanitation practices and facilities through awareness creation and health education.
- iv. Encourage cost effective and appropriate technologies for ecologically safe and sustainable sanitation.
- v. Develop wherever required, Community managed sanitation systems focusing on scientific Solid and Liquid Waste Management systems for overall cleanliness in the rural areas.

Activities Under 'Swachhata Abhiyan'

A committee was constituted by the Director General of the Council to initiate and monitor activities under Swachhta Abhiyan. The committee visited different sections and surrounding area of the office on various occasions and requested all the section-in-charges to practice cleanliness at the office and working premises on regular basis.



Activities carried out during Swachh Bharat Abhiyan

- i. Some of the unwanted plants were uprooted, garbage material was transported for composting that will enhance the fertility of the soil through organic composting.
- ii. Waste and useless items found in the office were identified and removed. Files and registers were arranged properly in the racks.
- iii. Fodder trees planted around the office premises were properly pruned, cleaned, watered and watering channel was provided. Area was completely cleaned.
- iv. Weeds were removed and area was properly cleaned. The tree leaves that fall regularly in the premises were cleaned.
- v. 'Cleanliness Walkway Rally' (Swachhta Padyatra Rally) was carried out to create awareness among council's staff and other people. Waste was collected and transported for making it compost. The slogan of the rally was- 'Swachhta Hi Sewa Hai'.
- vi. Different types of dustbins for disposal of dry/wet waste materials were demonstrated to the Council staff for proper disposal, as dry/wet waste can also serve as the biodegradable waste for further use.
- vii. The importance of cleanliness while cooking and serving food was also explained to the Councils staff.
- viii. Old and open wirings, electrical waste and other hazardous waste material was shown to be dangerous to the working staff and their proper disposal was warranted.
- ix. Cleanliness in the office, outside office, personal hygiene, sanitation importance in staff and particular in

- women was focused. It was a great success in terms of sensitization to Council staff for keeping the community clean.
- x. A Swachhta pledge was taken together where each staff of Council staff participated and motivated to keep the hygiene not only at office but also outside, home, on the shops, roadsides, etc. Importance of cleanliness for children, women and adults and also for animals were discussed and everyone was motivated.
 - xi. It was felt that the efforts made towards this movement will continue to spread the awareness of the cleanliness in future.

Tree Plantation as a way for Clean Environment

Council organized a tree plantation programme in office premises at CCRH Headquarters and peripheral institutes/ units. It was decided by the Council that during monsoon; a huge drive for tree plantation will be implemented. This not only helps in increasing the green cover, but also improves soil quality, soil conservations and controls all climate related issues.

Achievements of Swachh Bharat Abhiyan

'Swachh Bharat Abhiyan' activities by the Council under the guidance and supervision of Ministry of AYUSH has resulted in achieving the following:

- i. Staff of Council and various units/ Institutes under it, have started understanding the importance of swachhta more than earlier.

- ii. It has created awareness among staff that they could clean not only their home and office but also the surrounding areas as well to be cleaner and healthier.
- iii. The response from staff on swachhta is much more than expected and now cleanliness is noticed in their every move.
- iv. The Staff feels proud being a part of this campaign in making India clean and healthy.
- v. The Staff is coming with ideas and innovation to make office, home and surrounding area cleaner.
- vi. Now they are more aware of improper sanitation and unhealthy daily habits.
- vii. It has created awareness about using right resources for the right cause and more carefulness while using resources.
- viii. The garbage disposal has got attention of everyone. Now everyone disposes off garbage keeping in mind that it can be further processed for use.

The cleanliness campaign was also taken up enthusiastically at the institutes and units of CCRH. Banners, pamphlets and posters were developed to emphasize the importance of cleanliness in and around the office premises, maintenance of good sanitation and hygiene, proper drainage, importance of washing hands, demerits of defecation, in open areas are displayed in the OPDs of all the institutes. The patients were also sensitized about the importance of cleanliness by the attending doctors. Swachhta rallies were organized at Agartala to make the public aware about cleanliness with the slogan of 'Swachhta Ki Jyoti Jaagi Re'.

Activities to Promote Official Language Hindi: Hindi Pakhwada

Hindi Diwas is celebrated by the Central Council for Research in Homoeopathy on 14th September 2017 every year at Council

Headquarters and its peripheral institutes and units.

Sl. No	Year	Hindi Liaison Officer	Activities	Achievements
1.	2017	Dr. Bindu Sharma	Hindi Workshop and Hindi Pakhwada	AYUSHI Magazine, Nibandh Pratiyogita, Hindi Lekhan Pratiyogita, Hindi Vyakaran and Antakshri Pratiyogita, Vaad Vivad Pratiyogita
2.	2018	Dr. Bindu Sharma	- do -	Swara Magazine
3.	2019	Dr. Subhash Kaushik	- do -	Aarohi Magazine
4.	2020	Dr. O. P. Verma	Hindi Online Workshop	Manika Magazine

1. Hindi Workshop: A Hindi workshop was organized by the Council at Hotel Holiday Home, Shimla on 3rd & 4th May 2018. The theme of the workshop was “Hindi Language: effect and importance” and the aim was to ponder on the problems which occur in the offices while working in Hindi. Officers/Staff from units of Council located in North India had participated in the workshop. During the workshop a Hindi Patrika ‘Swara’, published by Hindi section, CCRH was also released. Presentations were given on the topics such as ‘Relevance of Indian Languages, Official Languages: Policy, Regulation and Rules; Hindi language teaching problems & remedies in India’; ‘Hindi Noting and Drafting’; ‘Dissemination of scientific literature through Rajbhasha Hindi; Hindi Language : origin and Development’; ‘Hindi Language: Dishaur Dasha’; ‘Role of Hindi in Administrative and Rural Development’.

Hindi Workshop on Diabetes and

Homoeopathy: A two-day Hindi Workshop on Diabetes and Homoeopathy was organized from 17th -18th December 2018 at DDPRCRI(H), Noida. In this Hindi workshop, officers and employees from different institutes/units of the Council participated.



Release of Hindi Patrika 'Swara' during the Workshop



Hindi Patrika AYUSHI, Swara, Aarohi and Manika

Rashtriya Poshan Maah Abhiyaan (National Nutrition Mission)

Rashtriya Poshan Abhiyaan (National Nutrition Mission) is India's flagship programme to improve nutritional outcomes for children, pregnant women and lactating mothers. Launched in March 2018, the programme, through use of technology, a targeted approach and convergence, strives to reduce the level of stunting, under-nutrition, anemia and low birth weight in children, as also, focus on adolescent girls, pregnant women and lactating mothers, thus holistically addressing malnutrition.

As desired by Ministry of AYUSH, Council through its 23 institutes has undertaken activities under the abhiyan for promoting health and nutrition. The activities have been undertaken for patients in the OPD and speciality clinics, schools, villages during health camps. The

participants were patient at OPD of the institutes and health camps in villages, mainly women, adolescents, school going children.

S.No.	Areas Covered	Numbers	Participants
1.	Villages	79	1755
2.	OPD and speciality clinics	47	3775
3.	SC dominated areas	28	2038
4.	Schools	27	3062
5.	Homoeopathy for Healthy Child, Child friendly clinics, anganwadi and ICDCS	5	295
6.	Poshan Rally	2	130
7.	Total	188	11055

S. No.	Name of activity	No.	Participants
1.	Awareness lectures on Poshan Abhiyan, diet, anaemia, deworming, hygiene, malnutrition, recipe demonstration and role of Homoeopathy, non-communicable diseases and lifestyle disorders, menstrual hygiene, girl's education, right marriage age and adolescence period, antenatal care, breast feeding and nutrition during pregnancy, child health, yoga and exercise and herbal plants.	182	10995

Activities undertaken under the program

- Display of posters, charts in the OPD related to nutrition, healthy food and diet.
- Development of IEC material [banners, posters] related to poshan abhiyan in regional languages.
- Organization of rallies for creating awareness.
- Health talks delivered in OPD and during health camps in villages.



Vigilance Awareness Programme

The Central Council for Research in Homoeopathy, New Delhi and its Institutes/Units located in various parts of the country has observed Vigilance Awareness Week as per the instructions issued by Central Vigilance Commission, New Delhi during the period from 2017 to 2019. The Council has conducted various programmes during the Vigilance Awareness Week with the details as under: -

During the programme, the Council has focused on the theme allotted by CVC and made efforts to keep highest standard of ethical conduct, transparency and good governance in personal life and office work. It was also stressed that everyone has to promote accountability, fairness and discipline while working in the office and public life.

Year	Period	Theme	Pledge taken by employee/ citizens/ students	Banners and posters displayed	Debate lecture/ Seminar/ sensitization programme	Awareness programme in Gram Sabhas and Colleges	Photography
2017	30.10.2017 to 04.11.2017	My Vision- Corruption in India	850 approx.	yes	yes	yes	yes
2018	29.10.2018 to 03.11.2018	Eradicate corruption Build a new India	900 approx	yes	yes	yes	yes
2019	28.10.2019 to 02.11.2020	Integrity - A way of life	515 approx	yes	yes	yes	yes



Achievements





ACHIEVEMENTS

Infrastructure (Institutes & Units under CCRH)

In 1969, the Govt. of India established Central Council for Research in Indian Medicines and Homoeopathy for conducting systematic research in respective fields and in 1978, the CCRIMH was dissolved to pave way for the constitution of four separate research Councils, one each for Homoeopathy (CCRH), Ayurveda and Siddha Medicine (CCRAS), Unani Medicine (CCRUM) and Yoga & Naturopathy (CCRYN). Such independent set-up of the Councils facilitated the promotion of research in the respective disciplines, on their own strengths.

The Central Council for Research in Homoeopathy (CCRH) was formally constituted on 30th March 1978, as an autonomous organization and was registered under the Societies Registration Act XXI of 1860. It was, however, in January 1979, that the Council started functioning as an independent organization.

The Council had been running a network of 51 Institutes/Units functioning in different parts of the country prior to the reorganization and re-structuring of the Council. Twenty nine (29) units (including 3 Units in NE Region viz., Aizawl, Dimapur

and Shillong) have since been merged with major Institutes reducing the number to 22 Units/Institutes. However, the Unit at Aizawl has since been reopened by appointing contractual staff and the Units at Dimapur and Shillong are also likely to be reopened soon. Thus, at present, apart from 1 Research-cum-PG Institute and 23 Research Centres, Council has set up 03 Extension Centres and 03 Homoeopathic Medical OPDs.

Until 2005, all the Institutes/Units of the Council were functioning in rented buildings/accommodation provided free of cost by the concerned State Govts., when the Council shifted its focus to have its own buildings for the development of the Institutes. In the year 2007, CRI(H), Noida shifted to its own building constructed on the land provided by the U.P. State Govt. free of cost. Now, the Council has its own buildings for CRI(H), Kottayam (now upgraded as NHRIMH), RRI(H), Gudivada, Kolkata, Agartala and Puri. The buildings for Mumbai and Jaipur are under construction and land has been acquired for Siliguri, Lucknow, Imphal, Guwahati and Shimla.



Central Council
for Research in
Homoeopathy,
New Delhi



National Research
Institute of Homoeopathy
in Mental Health,
Kottayam



Dr. D.P. Rastogi Central Research Institute for
Homoeopathy, Noida



Regional Research Institute (H),
Gudivada



Regional Research Institute (H), Agartala



Central Research Institute (H), Jaipur



The Council has also developed an impressive Virology Lab at Dr. Anjali Chatterjee Regional Research Institute for Homoeopathy, Kolkata, West Bengal, India.



Real time PCR for the detection of viral copy number in JE infected embryo



Detection of Dengue NS1 antigen level in patient sera and cell supernatant by ELISA reader



Cryo-storage of tissue samples in -80°C freezer



A view of Chemistry Laboratory at Drug Standardization Unit, DDPRCRI(H), Noida

State of the Art Zebra Fish, Chemistry, Pharmacology, Microbiology and Molecular Lab have been developed at DDPRCRI(H), Noida. The Council has proposed to develop DDPRCRI(H), Noida as National Homoeopathic Drug Research Institute (NHDRI).



Monitoring Zebrafish (*Danio rerio*) ovulation at DDPRCRI(H), Noida



Preparing culture media, DDPRCRI(H), Noida

The Council has also developed an impressive Virology Lab at Dr. Anjali Chatterjee Regional Research Institute for Homoeopathy, Kolkata, West Bengal, India State of the Art Zebra Fish, Chemistry, Pharmacology, Micorobiology and Molecular Lab have been developed at DDPRCRI(H), Noida. The Council has proposed to develop DDPRCRI(H), Noida as National Homoeopathic Drug Research Institute (NHDRI) The Council has developed highly advanced and technically equipped infrastructure of Virology laboratory at Dr. Anjali Chatterjee Regional Research Institute(H), Kolkata to carry out molecular biological works. The Virology laboratory at DACRRI (H), Kolkata presently conducts research on the mosquito borne viral diseases like Dengue and Japanese encephalitis which have become a severe life threat to human beings. Thus, the laboratory has been designed to have two

major parts: the Cell culture part and the Molecular Biology part. The laboratory has instruments, equipments, reagents and other miscellaneous requirements for the smooth execution of the preliminary works on cell lines which include facilities for Growth, Maintenance and Cryopreservation culture cells and cell lines such as a -80°C facility for long term storage of cells, reagents such as DMEM/or other nutrient media depending on the nature of the cell line used, FBS, water bath, centrifuge for pelleting of cells, hemocytometer for cell counting, PBS stocks, 1X trypsin-EDTA, culture flasks, cryovials, 37°C CO_2 incubator for attaining confluency of cells, cell culture plates, culture hoods etc. Apart from this, PBMC cells are also cultured in this laboratory. Other molecular biology studies are performed using Real-time PCR for quantification of viral load and for performing cytokine gene expression studies.

Virology Lab



Pre PCR room with PCR instruments



Microscope installed in Culture room of Virology lab



Scientists working in the Virology Lab at Kolkata



Histological Sectioning and Staining of Plant Origin Homoeopathic Raw Drugs at Noida Lab

Mother tincture preparation, pH and UV spectrophotometric analysis of homoeopathic drugs at Noida Lab





Organizing International Events

1. National Convention on World

Homoeopathy Day: A two-day convention was organized in New Delhi by CCRH on World Homoeopathy Day on 10th -11th April 2018 at Vigyan Bhawan, New Delhi. CCRH organized this scientific convention on World Homoeopathy Day to commemorate to 263rd birth anniversary of Dr. Hahnemann. Since this year also marked 40 years of establishment of CCRH, the theme of this convention was “Innovate: Evolve; Progress: Exploring Science for 40 years”. The Hon'ble Vice President of India Sh. M. Venkaiah Naidu along with Sh. Shripad Yesso Naik, Hon'ble Minister of AYUSH(I/C), Dr. Manoj Rajoria, Hon'ble Member of Parliament

inaugurated the Convention. The highlights of the convention were: Release of Council's Publications by Vice President of India, signing of MoUs with Homoeopathic Colleges, launch of WHD CCRH Mobile App and Short Documentary on Homoeopathy for Healthy Child, awarding Scientists through CCRH Awards and young minds through STSH & MD Scholarship besides the various technical sessions which were attended by scientists, educationists, doctors and students from different countries and states. An Exhibition was also set up by CCRH showcasing the research activities of the Council undertaken in different research areas in these 40 years.

Inauguration of World Homoeopathy Day



2016



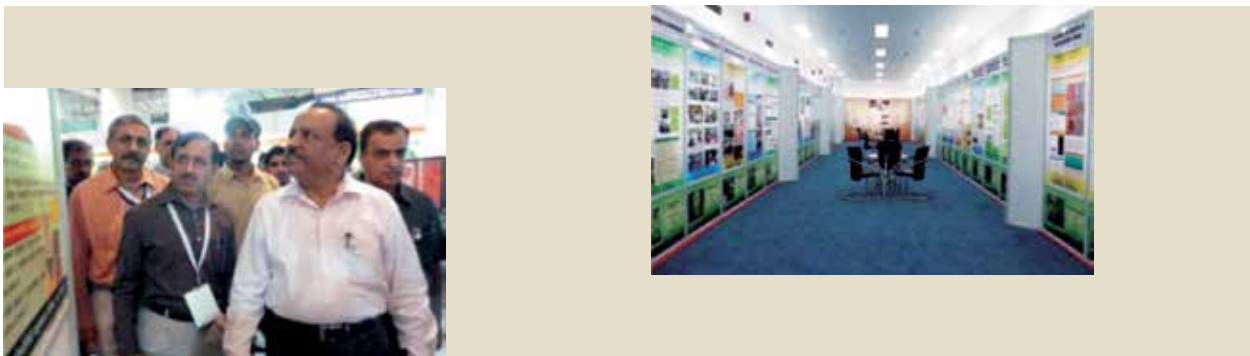
2017



2018



2019



Views of Exhibition



2. World Integrated Medicine Forum:

The World Integrated Medicine Forum on regulations of homoeopathic medicinal products opened on 23rd February 2017 at Hotel Ashok, New Delhi. The two-day forum, organised by Central Council for Research in Homoeopathy in collaboration with Dr. Robbert Van Haselen, Director, World Integrated Medicine Forum, was inaugurated by the Hon'ble Minister of State, Sh. Shripad Yesso Naik, Ministry of AYUSH, Government of India in the presence of 50 delegates from 24 countries. Sh. Naik congratulated the Council for arranging such a forum and said that the regulation of homoeopathic medicinal products (HMPs) is an important requirement for the worldwide promotion of Homoeopathy. In today's era, when the demand for traditional and integrated medicine systems is on the rise, it is important that quality assured HMPs are made legally accessible, which is only possible via a well developed regulatory framework. While appreciating

the effort of CCRH and WIMF, Minister of AYUSH in his inaugural address remarked that there is clearly a need for a high-level strategic exchange platform, where stakeholders can meet outside their immediate work related context, and this forum could address that need.

The inaugural ceremony was also graced by Sh. Ajit M. Sharan, Secretary, Ministry of AYUSH, Sh. A.K. Ganeriwala, Joint Secretary, Ministry of AYUSH and Prof. (Dr.) S. S. Handa, Chairman, Scientific Body, Pharmacopoeia Commission for Indian Medicine & Homoeopathy.

A milestone was achieved by signing of a Memorandum of Understanding (MoU) on cooperation in the field of Homoeopathic Medicine between the Homoeopathic Pharmacopoeia Convention of the United States (HPCUS) and Indian bodies – Pharmacopoeia Commission for Indian Medicine & Homoeopathy (PCIM&H) and Central Council for Research in Homoeopathy (CCRH). It is hoped that this agreement will be a



benchmark for many more agreements to follow with the aim to develop and harmonise homoeopathic pharmacopoeias of various countries and to strengthen and/or enable regulatory provisions for Homoeopathy worldwide.

It is with the aim of bringing the homoeopathic industry and regulatory sector on a common platform for strategic discussion that this 'World Integrated Medicine Forum on the Regulation of Homeopathic Medicinal Products: National and Global strategies', was conceived jointly by Central Council for Research in Homoeopathy, Ministry of AYUSH, Govt. of India and by World Integrated Medicine Forum (WIMF), an international firm that organizes, and provides consultation for arranging such fora. The event was supported by Ministry of AYUSH, Government of India, as well as other government organizations, Pharmacopoeia Commission for Indian Medicine & Homoeopathy (PCIMH) & Central Drugs Standard Control Organization (CDSCO).

Through this forum, regulators from more than 15 countries including France, Germany, Switzerland, Sri Lanka, Bangladesh, India etc. shared the current status, challenges and outlook with regard to the regulation of homoeopathic products. At least 15 international industries manufacturing homoeopathic medicines and more than 30 Indian industries participated and interacted with the drug regulators and controllers. Sh. Ajit M. Sharan expressed his delight that the Ministry, through CCRH, could demonstrate global leadership by hosting this unique event at Ashok Hotel in Delhi. He said that in view of the efficacy of Homoeopathy especially in non-communicable and lifestyle-based

diseases, there is a need to address the challenges pertaining to regulations and/or distribution of homoeopathic medicinal products.

In his interaction with the delegation, Sh. A. K. Ganeriwala opined that it is important that such meets are organised more frequently as strategies for strengthening regulatory provisions for homoeopathic medicines deliberated upon in such platforms, would ensure wider and easier access to quality homoeopathic medicines, which, in turn, would mean a healthier world through the gentle touch of Homoeopathy.

Dr. Raj K. Manchanda, Director General, CCRH hoped that this forum could provide impetus to further dialogues for strengthening regulatory framework worldwide, to assure that the users of Homoeopathy could have wide access to quality-assured homoeopathic medicines.

Dr. Robbert Van Haselen, Director of the WIMF and the international consultant for the forum, thanked the Government of India for spearheading this challenging task of bringing together the regulators and homoeopathic industrialists from so many countries on a common platform to exchange their concerns and issues. Dr. Anil Khurana, Deputy Director General, CCRH, wrapped up the inaugural ceremony of the forum by expressing gratitude to the Ministry of AYUSH, dignitaries, resource persons and delegates on behalf of CCRH, for making this forum a global event by their participation and hoped that the two-day interactions will be the opening platform for more regulations-oriented interactions in future.

The Forum had eight interactive sessions, followed by panel discussion on second day. These sessions were:

1. Setting the scene: Practitioners' perspectives
 2. Regulators' perspectives
 3. Pharmaceutical Industry perspectives
 4. Regulatory status and outlook in various countries
 5. Homoeopathic pharmacopoeias: Status in main countries
 6. Monograph/regulatory requirements: Strategic aspects
 7. Homoeopathic Drug Development, Regulatory innovation
 8. Enhancing synergies with traditional and conventional medicine systems
- Various presentations on the above topics during the two days explored how the regulation of homoeopathic medicines can be further modernized and advanced.

This included exploring the possibilities of synergies with other traditional and integrated systems of medicine. The latter discussion also included the WHO traditional medicine strategy. Further forum discussions explored the possibilities and limitations with regard to harmonization and collaboration among countries and the future strategic priorities with regard to the regulation of homoeopathic medicines. The Indian industrialists hoped that the forum would deliver direct benefits for the regulation of homoeopathic medicines in India, via increased co-operation and adoption of best practices developed elsewhere. Promotion of exchange between the private and public sector and fostering



Two-days forum, organised by CCRH in collaboration with Dr. Robbert Van Haselen, Director, World Integrated Medicine Forum, was inaugurated by the Hon'ble Minister of State, Sh. Shripad Yesso Naik, Ministry of AYUSH, Government of India



Hon'ble Minister of State, Sh. Shripad Yesso Naik, lighting the lamp during inauguration ceremony



Sh. Shripad Yesso Naik, Hon'ble Minister of State, Ministry of AYUSH with AYUSH officials and others during the inauguration ceremony of WIMF- 2017



increased trade between India and the rest of the world is expected to be another lateral outcome of the forum.

The unanimous recommendations that were made during the concluding forum session included: Harmonisation, or at least, collaboration, convergence and reliance on regulations of HMPs; Encouraging Good Pharmacopoeial Practices; Exchange of information for harmonisation and for collaborating for research on mapping the diversity in pharmacopoeial standards, and Finding out ways to evaluate and compare points of convergence and divergence across various countries, in terms of: HMPs regulations, pharmacopoeia and industry standards.

Exchange of more MoUs among countries on the lines of the one signed among HPCUS and Indian bodies CCRH and PCIMH. All countries agreed to meet more often to discuss further on specific areas related to drug regulations and harmonisation of pharmacopoeias.

The World Integrated Medicine Forum on the regulation of Homoeopathic Medicinal Products with the theme 'Advancing Global Collaboration' was inaugurated by Sh. Shripad Yesso Naik, Hon'ble Minister of State (I/C), Ministry of AYUSH, Govt. of India. The three-day forum was organized by Central Council for Research in Homoeopathy (CCRH), with the support of Ministry of AYUSH, Homoeopathic Pharmacopoeia Convention of the United States (HPCUS) and European Coalition on Homeopathic & Anthroposophic Medicinal Products (ECHAMP), Pharmacopoeia Commission of Indian Medicine and Homoeopathy and Central Drugs Standard Control Organization (CDSCO) at Hotel JW Marriot, Goa from 23rd-25th January 2019 at Goa.

The forum had participation of key public and private sector stakeholders, such as representatives from World Health Organization (WHO) and drug regulatory authorities, as well as Pharmacopoeia

Hon'ble Minister of AYUSH, Sh. Shri Pad Yesso Naik, Sh. Roshan Jaggi, Dr. Raj K. Manchanda, Dr. Anil Khurana, Dr. Robbert Van Haselen, Dr. Helene Rannoux, Sh. Swapnil Naik, Dr. Binit Dwivedi, Ms. Renu, Sh. Digvijay Verma, Ms. Megha and Ms. Swati Tomar during release of the book "A ready recknor of Homoeopathic Medicines in different Pharmacopoeias"



experts and industrialists from different countries. Among the delegates were present veterinary experts and regulators and drug controllers of various states of India. The forum was organized with the objective of illustrating how Homoeopathy can be further regulated and integrated into the healthcare system in countries that have adopted the use of Homoeopathy since long, also to bring countries to the table where homoeopathy has only been recently introduced. Issues related to Drug Standardisation and regulatory aspects with representative of manufacturers and regulatory affairs from different countries were discussed.

3. 3rd International Conference on Homoeoprophylaxis A Worldwide choice for disease prevention "EVIDENCE AND EDUCATION - THE KEYS TO CHANGE"

Central Council for Research in Homoeopathy, an autonomous organisation under Ministry of AYUSH, Government of India and Homoeoprophylaxis- a Worldwide Choice

(HPWWC) a not-for-profit organisation working to promote disease prevention and Homeoprophylaxis jointly organised the 3rd International Conference on Homoeoprophylaxis, "EVIDENCE AND EDUCATION - THE KEYS TO CHANGE" highlighting role of homeopathic non-toxic alternative to disease prevention at hotel, The Radisson Blu, Dwarka, New Delhi, on 11th -12th January 2020. The conference was also supported by Directorate of AYUSH, Delhi Government.

The eminent speakers at the conference were Dr. Raj K. Manchanda, Dr. Anil Khurana, Dr. Isaac Golden, Dr. Gustavo Bracho, Dr. Martin de Munck, Dr. Srinivasa Rao Nyapati, Prof. Surinder Singh, Dr. Shailendra Saxena, Dr. Debadatta Nayak, Ms. Kate Birch, Dr. Varanasi Roja and Dr. Kavita Kukunoor. The conference was attended by 200 delegates from several countries like United Kingdom, Australia, Greece, USA and different parts of India, including renowned experts from different dimensions within Homoeopathy.



Souvenir being released at 3rd International Conference on Homoeoprophylaxis



Patents Filed

In this new era, knowledge is the most important factor that is driving development and modern economy. Knowledge manifests itself in the form of invention, which is intellectual property. To protect inventors, govt. gives intellectual property rights to them, which is called patent. The Council has filed patents for the following.

1. Indian Patent Application No. 201811009598 filed on March 15, 2018-novel nosode from a protozoon of the genus plasmodium and the process of preparation thereof.
2. Indian Patent Application No. 201811009785 filed on March 16, 2018 - novel nosode from a protozoon of the genus leishmania and the process of preparation thereof.
3. Indian Patent Application No. 201811013370 filed on April 7, 2018 - A novel formulation for use in therapy and prevention of Japanese encephalitis virus induced acute encephalitis syndrome (AES).
4. Indian patent application no. 201821006924 with complete specifications filed on 27th March 2019- New Process for potentization of Homoeopathic Medicines in the name of CCRH and IIT Bombay.
5. Indian Provisional Patent Application No. 201911022739 filed on June 7, 2019 - "A therapeutic formulation for tissue regeneration in therapy of tissue injury and cellular loss".

Productivity and Employment Generation

Details of Employment Generation for the Year 2016-17, 2017- 18 & 2018 – 19

Year	Employment Generation		Total
	Regular	Contractual	
2016-17	36	15	51
2017-18	29	45	74
2018-19	48	110	158
Total	113	170	283





Gender Employment

GENDER BUDGET

Most of the research studies conducted by the Council are gender neutral. There are two specific clinical research studies 'Breast Fibroadenoma' & 'Polycystic Ovarian Syndrome' for women. In all the other clinical verification and Drug proving studies, the gender distribution is random.

Council has also constituted a Gender Budgeting Cell as per direction from Ministry of AYUSH to monitor gender specific issues.

Council has been conducting Mother and child Health Clinics since 2009- 10 at various Institutes/Units after National Campaign on Homoeopathy for Mother & Child care in the year 2007.

Details of the number of female patients came for treatment in general/ special OPDs/IPD at Institutes of the Council, Swasthya Rakshan Programme (SRP), National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke (NPCDCS) and Homoeopathy for Healthy Child is given below:

GENDER BUDGET 2018-19			
Programme	Total	No. of Female patients	% of Female patients
OPD/IPD	632203	366173	57.92
Swasthya Rakshan Programme	101006	61524	60.91
Healthy Child	6043	3202	52.98
Health Camp under SCSP	104355	58672	56.22
NPCDCS	195650	117046	59.82
TOTAL	1039257	606617	58.37



Council's ISO 9001-2008 Certification

Management System Audit Surveillance –1 was done by auditors from Vexil Business Process Services Pvt. Ltd. The surveillance audits assure ongoing conformity, determine whether the management system remains effective, and encourage

continual improvement, thereby helping to enhance performance. An ISO 9001-2008 Certification has been awarded to the Council.





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