PARLIAMENT OF INDIA

RAJYA SABHA

THE HOMOEOPATHY CENTRAL COUNCIL BILL, 1971

REPORT OF THE JOINT COMMITTEE

(Presented on the 26th March, 1973)



RAJYA SABHA SECRETARIAT NEW DELHI MARCH, 1973

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COMPOSITION OF THE JOINT "OMMITTEE ON THE HOMOEO-PATHY CENTRAL COUNCIL BILL, 1971

1. Shrimati Purabi Mukhopadhayay-Chairman

MEMBERS .

Rajya Sabha .

2. Shri Sasankasekhar Sanyal

3. Shri Bhupinder Singh

4. Shri N. G. Goray

5. Dr. K. Nagappa Alva

6. Dr. Debiprasad Chattopadhyaya

7.Shri Sitaram Kesri

8. Shri Man Singh Varma

9. Shri T. K. Srinivasan

10. Shri K. C. Panda

11. Shri Manubhai Shah

12. Shri Sultan Singh

13. Shri N. P. Chaudhari

14. Shri T. G. Deshmukh

15. Shrimati Savita Behen

Lok Sabha

16. Shri Ziaur Rahman Ansari

17. Shri Vidya Dhar Bajpai

18. Shri Kushok Bakula

19. Shri Muhammed Khuda Bukhsh-

20. Shri A. M. Chellachemi

21. Shri Bhaoosahaib Dhamankar

22. Shri Hiralal Doda

23. Shri Nageshwar Dwivedi

24. Shri Pampan Gowda

25. Shri Madhuryya Haldar

26. Shri Chiranjib Jha

27. Shri Popatlal M. Joshi

28. Shri Ramachandran Kadannappalli

29. Shri B. R. Kavade

30. Shri T. S. Lakshmanan

31. Shri Mallikarjun

32. Shri Prasannbhai Mehta

33. Shri N. Sreekantan Nair

34. Dr. Laxminarayan Pandeya

35. Shri Janaki Ballav Patnaik

36. Shri S. L. Peje

37. Maulana Ishaque Sambhali

38. Shri M. Satyanarayan Rao

39. Shri Umed Singh Rathia

40. Shri K. Ramakrishna Reddy

41. Dr. Sankata Prasad

42. Shri Awdhesh Chandra Singh

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- 43. Shri Ram Deo Singh
- 44. Shri Rana Bahadur Singh
- 45. Shri A. K. Kisku.

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Representatives of the Ministries of Law and Justice

Shri P. L. Gupta, Additional Legislative Counsel. Shrimati V. S. Rama Devi, Deputy Legislative Counsel.

Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy. Shri P. V. Hariharsankaran, Deputy Secretary. Dr. D. P. Rastogi, Senior Research Officer.

Secretariat

Shri M. S. Panigrahi, Deputy Secretary. Shri M. K. Jain, Under Secretary.

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I, the Chairman of the Joint Committee to which the Bill* to provide for the constitution of a Central Council of Homoeopathy and the maintenance of a Central Register of Homoeopathy, was referred, having been authorised to submit the report on their behalf, present this their Report, with the Bill, as amended by the Committee, annexed thereto.

2. The Bill was introduced in the Rajya Sabha on the 1st December, 1971. The motion for reference of the Bill to a Joint Committee of the Houses was moved by Shri Jagdish Prasad Mathur on the 3rd April, 1972, and was adopted by the House on the same day (Appendix I).

3. The Lok Sabha discussed and concurred in the motion on the 24th May, 1972. (Appendix II).

4. The message from the Lok Sabha was reported to the Rajya Sabha on the 25th May, 1972.

5. The Committee held 26 sittings in all. Of these, five sittings were held at Calcutta (25th to 29th September, 1972), five sittings at Bombay (3rd to 7th October, 1972) and four sittings at Trivandrum (28th, 30th and 31st October, and the 1st November, 1972) with the permission of the Chairman, Rajya Sabha, to hear oral evidence from witnesses. The Committee also took the opportunity of visiting some Homoeopathic Colleges and Hospitals at these places. The rest of the sittings were held in the Parliament House. (For Minutes of the sittings of the Committee see Appendix V).

6. At their first sitting held on the 3rd June, 1972, the Committee decided that a Press Communique be issued inviting Memoranda on the Bill from individuals, associations and organisations interested in the subject-matter of the Bill by the 10th July, 1972. The Chairman also requested the members to suggest names of persons who might be invited for giving oral evidence before the Committee.

7. To facilitate the work of the Committee, five different questionnaires were issued to Private Homoeopathic Medical Practitioners, Professional Associations, Homoeopathic Institutions, State Homoeopathic Boards/Councils and the State Governments to elicit replies to the specific points contained in those questionnaires^{**}.

8. One hundred memoranda, containing views, comments and suggestions and replies to questionnaires from two hundred and forty-eight individuals, professional associations, institutions, State Boards and Councils, and State Governments on the various provisions of the Bill were received by the Committee (Appendix III).

9. The Committee heard evidence tendered by one hundred and two witnesses (Appendix IV).

10. The Committee decided that the evidence tendered before it should be laid on the Table of the Houses.

11. The Committee considered and adopted the Draft Report at its sitting held on the 8th March, 1973.

12. The principal changes effected by the Committee in the Bill and the reasons therefor are set out in the succeeding paragraphs.

Clause 2

The Committee feels that it is not strictly necessary for the purpose of identification of the Homoeopathic system of medicine to mention the name of its founder in the definition of 'Homoeopathy'.

^{*}Published in Part II, Section 2 of the Gazette of India Extraordinary, dated the 1st December, 1971.

^{**}Included in Volume I of the Evidence.

The Committee is also of the opinion that even though the Homoeopathic system of medicine includes the use of Biochemic remedies it is better to include the use of Biochemic remedies in the definition of 'Homoeopathy' to make the position clear.

The Committee has, therefore, revised the definition in paragraph (d) of sub-clause (1) accordingly.

Clause 3

The clause, *inter alia*, provides for election of a member by the members of the Homoeopathy faculty or department of each University for representing academic interest on the Central Council. The Committee understands that at present there is only one University in the country which has a Homoeopathic faculty and the Committee feels that till such time as some other universities start Homoeopathic faculties or departments, the representation of academic interest on the Central Council will be negligible. In order, therefore, to provide adequate representation of such interest, the Committee feels that so long as seven universities do not start Homoeopathic faculties or departments, the membership falling short of that number should be made good by nomination of members by the Central Government from amongst the teaching staff of the medical institutions within India. The Committee has, accordingly, added a proviso to paragraph (b) of sub-clause (1).

The Committee is also of the view that it is necessary to give greater representation on the Central Council to persons who have special knowledge or practical experience in respect of Homoeopathy or other related disciplines. The Committee has, therefore, enhanced representation of such persons from thirty per cent to forty per cent. of the elected members of the Council.

The other change in the clause is of a clarifying nature.

Clause 7

The Committee notes that in bodies like the Central Council same persons continue to hold office for a number of terms. The Committee considers that if there is no bar on the same persons continuing in office in the Central Council for unspecified terms, the Council may not be able to function effectively. The Committee has, therefore, amended the clause to provide that persons holding offices of the President and Vice-President are not eligible to hold such offices beyond two consecutive terms.

Clause 10

The Committee is of the opinion that Committee to be constituted by the Central Council should meet more often for the proper growth and development of the system and has amended the clause to provide that these Committees hold at least two meetings in each year.

Clause 11

The Committee feels that it would not be a healthy practice for the Registrar of the Central Council to act as the Treasurer also. The clause has been amended suitably.

Clause 14

The Committee considered the question of protecting the right of practice of those persons who possess degrees, diplomas or licences in Homoeopathy granted by institutions outside India. While clause 2(1) (e) defines the expression "medical institution" to mean any institution within or without India which grants degrees, diplomas or licences in Homoeopathy, no provision has been made in clause 14 for the recognition of any medical qualification granted by a medical institution outside India. In this connection, the Committee further notes that the second Schedule also does not enumerate any such medical qualification. The Committee feels that this gap should be filled up by according recognition

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to certain medical qualifications granted by medical institutions of standing outside India and for that purpose a separate Schedule, namely, the Third Schedule, should be added. The Committee has, therefore, modified the clause suitably and has also added a new Third Schedule to achieve this objective.

Clauses 21 & 26

The Committee notes that there is no provision in the existing clause 21 for enrolment on the Central Register of Homoeopathy of persons, who do not possess any of the medical qualifications recognised under the Bill, although they are enrolled on a State Register of Homoeopathy. Having regard to the contribution made by most of them for the cause of Homoeopathy, the Committee feels that they should not be totally debarred from practising in any State of their choosing. The Committee has, therefore, amended clauses 21 and 26 to provide for—

- (i) the maintenance of the Central Register in two parts—Part I to contain the names of all persons, who are for the time being enrolled on any State Register and possess any of the recognised medical qualifications and Part II to contain the names of all persons, other than those included in Part I, who are for the time being enrolled on any State Register of Homoeopathy; and
- (ii) the entitlement of persons enrolled on Part II of the Central Register to practise Homoeopathy in any State with the previous approval of the overnment of the State where they intend to practise.

Clause 33

The Committee feels that the qualifications of the Inspectors and Visitors to be appointed under the Act should be specified in the regulations to be framed under this clause and has amended paragraph (h) to that effect.

The Second Schedule

The Committee has added the Diplomas in Homoeopathic Medicine and Surgery granted by the Board of Indian Medicine, Hyderabad and the Orissa Board of Homoeopathic Medicine, Bhubaneswar to make the Schedule up-to-date.

The Third Schedule

The Committee has added this new Schedule, which contains particulars of the degrees, diplomas and licences in Homoeopathy granted by universities outside India and which are proposed to be recognised under the Act.

13. The other changes made in the Bill are of a consequential and drafting nature.

14. For convenience and also for reference purposes, an Annexure detailing the clauses in the Bill as introduced in the Rajya Sabha which have now been amended by the Joint Committee has been added.

15. The Committee recommends that the Bill, as amended, be passed.

New	Delhi;	PURABI MUKHOPADHYAY,
March 8,	1973.	Chairman of the Joint Committee.

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The Bill, at the inception, was just a concept of control through a pyramidical council. But from the very beginning the Joint Select Committee reflected unmistakable trends for enlarging the scope of the Bill into various progressive dimensions. The Chairman was readily encouraging; and the Minister did not hesitate to respond.

The Committee had a very profitable tour in course of which, as also in Delhi itself, a wide range of possibilities for improvement were explored and a good many cross sections of Homoeopathic Practitioners of vicarious talent and experience were examined.

It was a lesson to see how numerous Homoeopathy Institutions grew up in farflung areas of our great country as natural produce of the soil, aided, unaided and half-aided by Government. Pity indeed that they are not looked at or looked after on par with the traditional Allopathy! Gratifying and educative it has been to see that, by and large, the Homoeopath does not consider himself as a mutually exclusive rival to worshippers of other persuasions; but as a complementary entity, even though competitive.

We were simply amazed to find that hunger for Homoeopath treatment was mounting all over the country.

This is because the Homoeopath treats the patient as such, and not merely his or her pathology.

It is disappointing, however, that despite concern of the Government and the ebulliant expectation of the people we are nowhere near the goal.

National Health Scheme is yet a far and distant cry. Allopathic hospitals extend bed to a very very limited per cent of our patients.

In village areas 90 per cent of our fellow beings are sufferers from this or that chronic trouble. But they would neither leave their means of livelihood or even a search for it—nor would they be hospitalised. The pathological examinations cannot be had in their villages and for them to go to the town and get their blood, urine etc. examined in outdoor of a hospital or in a private clinic would be expecting something which cannot materialise.

Next to national health scheme, therefore, is to reach Homoeopathy Mobile Units to walk from village to village, so that our toiling people who cannot afford to lie in bed with their chronic troubles can continue their life and living undisturbed while at the same time can get the benefit of a regular treatment through these mobile units.

The third eye and the sixth sense of a real Homoeopath will, in course of a five years trial, as suggested above, will succeed in making our villages less depressed in body and mind, more encouraging as manpower and more useful as rational citizens.

In order to produce the required talents of a Homoeopath in this behalf their educational curriculum must include besides, Chemistry, Anatomy etc. a complete course of psychology and psychiatry.

> SASANKASEKHAR SANYAL, MADHURYYA HALDAR, ISHAQ SAMBHALLI.

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भारतीय चिकित्सा पढतियों के ग्राधारिक सिद्धान्तों में तथा होम्योपैथी के मूल सिद्धान्तों में भिन्नता होने के कारण होम्योपैथी के लिए पृथक केन्द्रीय परिपद की ग्रावश्यकता को ग्रनुभव करते हुए तथा उसके सुविकास के साथ उसे ग्रधिक प्रभावी, जनोपयोगी व सुसंगत बनाने की दृष्टि से होम्योपैथी केन्द्रीय परिषद् विधेयक 1971 संसद् के समक्ष ग्राया जिसे संसद के दोनों सदनों को संयुक्त प्रवर समिति के विचारार्थ भजा गया।

संयुक्त प्रवर समिति ने विभिन्न स्थानों पर जाकर जहां होम्योपैथी चिकित्सा के कार्य को चिकित्सा संस्थाग्रों में प्रत्यक्ष वेसा देखा वहां होम्योपैथी शिक्षण संस्थाग्रों का भी ग्रवलोकन किया। साक्ष्यों के ग्राधार पर होम्योपैथी की पिछले वर्षों की गतिविधि तथा भविष्य के बारे में भी मत प्राप्त किये विधेयक पर साक्ष्य के समय, सामान्य विचार के समय तथा खण्डशः विचार के समय बहुत से सुझाव मत व संशोधन प्राप्त हुए। जिन पर सामान्यतः विचार विमर्श हुग्रा ग्रीर कतिपय संशोधनों को स्वीकार भी किया गया। किन्तु कतिपय संशोधन ग्रस्वीकृत हए।

धारा (2) (घ) में जहां तक होम्योपैथी चिकित्सा पढति की परिमाषा का प्रधन है, उसे सुलझाया नहीं गया है। परिभाषा की ग्रस्पष्टता से चिकित्सा पढति के मूल रूप का बोध ग्रसंभव हो गया है ग्रत: इसकी परिभाषा स्पष्ट की जाना ग्रावश्यक है।

धारा 3(ख)में जहां नाम निर्दिष्ट किये जाने की व्यवस्था है उसकी दृष्टि में रखते हुए तथा होम्योपथी के म्राज भी सभी प्रदेशों में समान रूप से प्रचलित व विहित चिकित्सा प द्वति न होने तथा कवल 2 प्रदेशों में वहा के विश्वविद्यालयों में एतत् सम्वन्धी निकाय होने व शेष राज्यों के विश्वविद्यालयों में श्राज एतत् सम्बन्धी निकाय की ग्रावश्यकता इस दृष्टि से ग्रनुभव न की जाने से कि वहां उक्त चिकित्सा पद्धति जनता में भ्रपना स्थान भलीभान्ति नहीं बना पाई है जिसके कुछ कारण हो सकते है । केन्द्रीय परिषद् में जब तक कि ऐसे सभी राज्यों में जहां विश्वविद्यालयों में उक्त होम्योपैयी चिकित्सा निकाय नहीं स्थापित होते तब तक उन राज्यों से यदि उनमें माल्यता प्राप्त होम्योपैयी चिकित्सा महाविद्यालय या विद्यालय है तो एक-एक शिक्षक नाम निर्दिष्ट किया जाना युक्तिसंगत होगा ।

धारा 10(1) में ग्रधिवेशनों के वारे में कहा गया है ऐसे ग्रधिवेशन वर्ष में कम से कम तीन बार बुलाना ग्रावश्यक होना चाहिए ।

धारा (क) में केन्द्रीय परिषद् में रजिष्ट्रार यदि आवश्यक हुआ तो कोषपाल का भी काय कर सकेगा। इस रूप में यह स्वतः निर्धारित था कि कोपपाल की नियक्ति पृथक होगी किन्तु उसके श्रभाव में रजिष्ट्रार भी कार्य कर सकेगा। परिषद् में ग्रनावश्यक भ्रड्चनें खड़ी न हों तया कार्यवाही में ग्रनपेक्षित विलम्ब न हो इस दृष्टि से यदि उक्त व्यवस्था रहती तो कोई हानि न थी।

धारा 17 व 18 में निरीक्षकों व परिदर्शकों की नियुक्ति की व्यवस्था है किन्तु इसमें एसे व्यक्तियों की होम्योपैथी सम्बन्धी योग्यता की व्यवस्था नहीं है जो ग्रावश्यक है।

घारा 21 में होम्पोपैथी के केन्द्रीय रजिस्टर की व्यवस्था है किन्तु उसमें मान्यता प्राप्त चिकित्सीय ग्रहताग्रों की ग्रनिवार्यता भी रखी गई है। इससे विभिन्न राज्यों में रजिस्ट्रीकृत व्यक्ति जो अनुभव के ग्राधार पर रजिस्टर्ड हैं उन्हें उक्त रजिस्टर में दर्ज नहीं किया जायगा। यह उन चिकित्सकों के साथ न्याय नहीं होगा। व्यवस्था यह होनी चाहिए कि किसी भी राज्य में रजिस्टर्ड व्यक्ति केन्द्रीय रजिस्टर में भी दर्ज किया जावे फिर यदि ग्रावश्यक हो तो एसे रजिस्टर को 'क' 'ख' भाग करके चिकित्सीय ग्रहंता प्राप्त व ग्रनुभव प्राप्त इनको प्रथक किया जाना सकता है। किन्तु उनको दर्ज किया जाना जरूरी है। तथा यह व्यवस्था भी ग्रावश्यक है कि एक राज्य में रजिस्टर्ड चिकित्सक दूसरे राज्य में उस रजिस्ट्रशन के ग्राधार पर रजिस्टर्ड हो सके।

विशोष :----होम्योपैथी विकास की दृष्टि से प्रत्येक राज्य में एक होम्योपैथी कालेज होना ं भ्रावश्यक है ।

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डा० लक्ष्मी नारावरापाण्डेय

13 मार्च, 1973

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Third Schedule and Clause 14(2) (a) and (b)

As it is, in the Third Schedule, only three qualifications of D.F. Hom., M.F. Hom. and F.F. Hom. of the Faculty of Homoeopathy, London have been included. I feel the Schedule is incompletz as definitely some qualifications have been left out. I can understand this lapse on account of the short period or time that was before the Government to find out those persons with recognised foreign qualifications.

This can be easily done by including in the Third Schedule any other foreign qualification recognised already by any State Board in India. In this procedure there is no question of reciprocity or consultation with Foreign Institutions or Faculties.

2. To remove the ambiguity and in the larger interest of Homoeopathy education and profession, it is also necessary that clause 14(2)(a) and (b) should be worded as follows:—

"14(2) (a).—The Central Council may hereafter recognise other qualifications granted to Diploma or Degree holders from this country after a further study abroad and that an entry shall be made in the last column of the Third Schedule against such medical qualification and declaring that it shall be a recognised medical qualification only when granted after a specified date."

Explanation.—There cannot be a question of reciprocity as in all the other countries of the world excepting Mexica, Homoeopathy is studied and practised as post-graduate speciality after qualifying in Allopathic medicine. Hence, negotiations for reciprocity will not lead any where and it will come in the way of giving recognition to our Homoeopathy doctors who get the post-graduate experience abroad. Even in the case of Allopathic system of medicine, it was not actually reciprocity but it was the British Medical Council having had the right to recognise our medical colleges and their qualifications because of British Rule in India. Moreover Allopathic system of medicine is having the same standards all over the world.

14(2) (b).—Where the Council has refused to recommend any medical qualification which has been applied for by the holder of such qualification and that individual applies to the Central Government in this behalf, the Central Government after considering such application and after obtaining from the Council a report, if any, as to the reasons for any such refusal, may by notification in the Official Gazette, declare that such qualification shall be a recognised medical qualification and the provisions of clause (a) shall apply accordingly.

Explanation.—The authority or institution in another country will not have any interest in such recognition by the Homoeopathy Central Council of India whereas the holder of the qualification from that institution would have direct interest in the recognition of his qualification.

Other Suggestions

In the normal course, there is always a time lag between the passing of the Bill and the formation of the Council, preparation of the Registers etc. If the following suggestions are carried out during this period, it will go a long way for the proper growth, development and standards in Homoeopathy education and profession. This will also greately help in the process of speedy and effective implementation of the Act. The Committee has though of these suggestions in the light of the evidence collected from individuals and institutions all over India.

(i) A National Institute of Homoeopathy should be established in Delhi at the earliest possible time.

(ii) Each State should start at least one Goverment Medical College with all the prescribed departments and hospital facilities.

(iii) There should be a Faculty of Homoeopathy in an University of the State.

(iv) Soon after the Central Homoeopathy Council is formed, a specialist body should be set up to find out the real position of the Colleges which have been recognised by the State Governments and whose qualifications have been included in the Second Schedule and come to conclusions as to which of the colleges are much below par and which of the colleges deserve to be upgraded etc. which will enable the Central Government to give proper timely advice and guidance to the State Governments.

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(v) It is also necessary that certain specific guidelines should be given to the State Governments in the matter of establishing Homoeopathy Directorates, formation of State Boards of Homoeopathy and maintaining uniformity in standards, syllabus, text-books, pharmacopoea etc. keeping in line with the purpose and objectives of this Central Legislation.

K. NAGAPPA ALVA

THE HOMOEOPATHY CENTRAL COUNCIL BILL, 1971

ARRANGEMENT OF CLAUSES

CHAPTER I

PRELIMINARY

CLAUSES

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THE HOMOEOPATHY CENTRAL COUNCIL BILL, 1971

(As reported by the Joint Committee)

(Words side-lined or under-lined indicate the amendments suggested by the Committee; Asterisks indicate omissions)

A

BILL

to provide for the constitution of a Central Council of Homoeopathy and the maintenance of a Central Register of Homoeopathy and for matters connected therewith.

BE it enacted by Parliament in the Twenty-fourth Year of the Republic of India as follows:—

CHAPTER I

PRELIMINARY

5 1. (1) This Act may be called the Homoeopathy Central Council Act, 1973.

(2) It extends to the whole of India.

(3) It shall come into force in a State on such date as the Central Government may, by notification in the Official Gazette, appoint in this
10 behalf for such State and, different dates may be appointed for different States and for different provisions of this Act.

2. (1) In this Act, unless the context otherwise requires,—

(a) "Board" means a Board, Council, Examining Body or Faculty of Homoeopathy (by whatever name called) constituted by the State Government under any law for the time being in force regulating the

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Short title, extent and commencement.

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Definitions. award of medical qualifications in, and registration of practitioners of Homoeopathy;

(b) "Central Council" means the Central Council of Homoeopathy constituted under section 3;

(c) "Central Register of Homoeopathy" means the register main- 5 tained by the Central Council under this Act;

(d) 'Homoeopathy" means the Homoeopathic system of medicine and includes the use of Biochemic remedies;

(e) "medical institution" means any institution within or without India which grants degrees, diplomas or licences in Homoeopathy; 10

(f) "prescribed" means prescribed by regulations;

(g) "recognised medical qualification" means any of the medical qualifications, in Homoeopathy, included in the Second or the Third Schedule;

(h) "regulation" means a regulation made under section 33; 15

(i) "State Register of Homoeopathy" means a register or registers maintained under any law for the time being in force in any State regulating the registration of practitioners of Homoeopathy:

(j) "University" means any University in India established by law and having a Faculty of Homoeopathy and includes a University 20 in India established by law in which instruction, teaching, training or research in Homoeopathy is provided.

(2) Any reference in this Act to a law which is not in force in the State of Jammu and Kashmir shall, in relation to that State, be construed as a reference to the corresponding law, if any, in force in that State. 25

CHAPTER II

THE CENTRAL COUNCIL AND ITS COMMITTEES

3. (1) The Central Government shall, by notification in the Official Gazette, constitute for the purposes of this Act a Central Council consisting of the following members, namely:— 30

(a) such number of members not exceeding five as may be determined by the Central Government in accordance with the provisions of the First Schedule from each State in which a State Register of Homoeopathy is maintained, to be elected from amongst themselves by persons enrolled on that register as practitioners of Homoeopathy; 35

(b) one member from each University to be elected from amongst themselves by the members of the Faculty or Department (by whatever name called) of Homoeopathy of that University:

Provided that until any such Faculty or Department of Homoeopathy is started in at least seven Universities, the Central Government may nominate such number of members not exceeding seven as may be determined by the Central Government from amongst the teaching staff of medical institutions within India. so however, that the total number of members so nominated and elected under this clause shall in no case exceed seven.

Constitution of Central Council.

(c) such number of members, not exceeding forty per cent. of the total number of members elected under clauses (a) and (b), as may be nominated by the Central Government, from amongst persons having special knowledge or practical experience in respect of Homoeopathy or other related disciplines:

Provided that until members are elected under clause (a) or clause (b) in accordance with the provisions of this Act and the rules made thereunder, the Central Government shall nominate such number of members, being persons qualified to be chosen as such under the said clause (a) or clause (b), as the case may be, as that Government thinks fit; and references to elected members in this Act shall be construed as including references to members so nominated.

(2) The President and Vice-President of the Central Council shall be elected by the members of the Central Council from amongst themselves 15 in such manner as may be prescribed:

Provided that for two years from the first constitution of the Central Council, the President and the Vice-President shall be nominated by the Central Government from amongst the members of the Central Council and the President and the Vice-President so nominated shall, notwith-20 standing anything contained in sub-section (1) of section 7, hold office during the pleasure of the Central Government.

4. (1) An election under clause (a) or clause (b) of sub-section (1) Mode of of section 3 shall be conducted by the Central Government in accordance election. with such rules as may be made by it in this behalf.

(2) Where any dispute arises regarding any election to the Central 25 Council, it shall be referred to the Central Government whose decision shall be final.

5. (1) No person shall be eligible for election to the Central Council Restric_ unless he possesses any of the medical qualifications included in the Se-30 cond or the Third Schedule, is enrolled on any State Register of Homoeopathy and resides in the State concerned.

tion on elections and membership.

(2) No person may at the same time serve as a member in more than one capacity.

6. The Central Council shall be a body corporate by the name of the Incorpo-Central Council of Homoeopathy having perpetual succession and a comration of 35 Central mon seal, with power to acquire, hold and dispose of property, both mov-Council. able and immovable, and to contract, and shall by the said name sue and be sued.

7. (1) The President, Vice-President or a member of the Central Coun-40 cil shall hold office for a term of five years from the date of his election or nomination, as the case may be, or until his successor shall have been duly elected or nominated, whichever is longer.

(2) A person who holds, or who has held, office as President or Vice-President of the Central Council, shall be eligible for re-election to that office once, but only once.

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(3) Members of the Central Council shall be eligible for re-election or re-nomination.

(4) An elected or nominated member shall be deemed to have vacated his seat if he is absent without excuse, sufficient in the opinion of the Central Council, from three consecutive ordinary meetings of the Cen-5 tral Council or, in the case of a member elected under clause (a) of subsection (1) of section 3, if he ceases to be enrolled on the concerned State Register of Homoeopathy, or in the case of a member elected under clause (b) of that sub-section, if he ceases to be a member of the Faculty or Department (by whatever name called) of Homoeopathy of the Uni- IO versity concerned.

(5) A casual vacancy in the Central Council shall be filled by election or nomination, as the case may be, and the person elected or nominated to fill the vacancy shall hold office only for the remainder of the term for which the member whose place he takes was elected or nominated. IS

(6) Where the said term of five years is about to expire in respect of any member, a successor may be elected or nominated at any time within three months before the said term expires but he shall not assume office until the said term has expired.

8. (1) The Central Council shall meet at least once in each year at such ²⁰ time and place as may be appointed by the Central Council.

(2) Unless otherwise prescribed, one-third of the total number of members of the Central Council shall form a quorum, and all the acts of the Central Council shall be decided by a majority of the members present and voting.

9. (1) The Central Council shall constitute from amongst its members an Executive Committee and such other committees for general or special purposes as the Council deems necessary to carry out the purposes of this Act.

(2) (i) The Executive Committee (hereafter in this section referred to 30 as the Committee), shall consist of the President and Vice-President, who shall be members *ex-officio*, and not less than five and not more than seven members who shall be elected by the Central Council from amongst its members.

(ii) The President and the Vice-President shall be the President and 35 Vice-President respectively of the Committee.

(*iii*) In addition to the powers and duties conferred and imposed upon it by this Act, the Committee shall exercise and discharge such powers and duties as the Central Council may confer or impose upon it by any regulations which may be made in this behalf. 40

10. (1) The committees constituted under section 9 shall meet at least twice in each year at such time and place as may be appointed by the Central Council.

(2) Unless otherwise prescribed, one-third of the total number of members of a committee shall form a quorum, and all the acts of the com- 45 mittee shall be decided by a majority of the members present and voting.

Meetings of Central Council.

The Executive Committee and other committees.

Meetings of com-

mittees.

11. The Central Council shall-

(a) appoint a Registrar who shall also act as Secretary * * *

(b) employ such other persons as it deems necessary to carry out the purposes of this Act;

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(c) require and take from the Registrar or from any other employee, such security for the due performance of his duties as the Central Council deems necessary; and

(d) with the previous sanction of the Central Government, fix the remuneration and allowances to be paid to the President, Vicc-President and members of the Central Council and to the members of the committees thereof and determine the conditions of service of the employees of the Central Council.

12. No act or proceeding of the Central Council or any committee thereof shall be called in question on the ground merely of the existence
15 of any vacancy in, or any defect in the constitution of the Central Council or the committee, as the case may be.

Vacancies in the Central Council and committees thereof not to invalidate acts, etc.

CHAPTER III

RECOGNITION OF MEDICAL QUALIFICATIONS

13. (1) The medical qualifications granted by any University, Board 20 or other medical institution in India which are included in the Second Schedule shall be recognised medical qualifications for the purposes of this Act.

(2) Any University, Board or other medical institution in India which grants a medical qualification not included in the Second Schedule may apply to the Central Government to have any such qualification recognised, and the Central Government, after consulting the Central Council. may, by notification in the Official Gazette, amend the Second Schedule so as to include such qualification therein, and any such notification may also direct that an entry shall be made in the last column of the Second 30 Schedule against such medical qualification only when granted after a

specified date.

14. (1) The medical qualifications granted by medical institutions outside India which are included in the Third Schedule shall be recognised medical qualifications for the purposes of this Act.

(2) (a) The Central Council may enter into negotiations with the authority in any State or country outside India, which by the law of such State or country is entrusted with the maintenance of a Register of practitioners of Homoeopathy, for settling of a scheme of reciprocity for the recognition of medical qualifications in Homoeopathy, and in pursuance of any such scheme, the Central Government may, by notification in the Official Gazette, amend the Third Schedule so as to include therein any medical qualification which the Central Council has decided should be

recognised, and any such notification may also direct that an entry shall

Recognition of medical qualifications granted by certain medical institutions in India.

Recognition of medical qualifications granted by medical institutions in State or countries outside India.

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Officers and other employees of Central Council. be made in the last column of the Third Schedule against such medical qualification declaring that it shall be a recognised medical qualification only when granted after a specified date.

(b) Where the Council has refused to recommend any medical qualification which has been proposed for recognition by any authority 5 referred to in clause (a) and that authority applies to the Central Government in this behalf, the Central Government, after considering such application and after obtaining from the Council a report, if any, as to the reasons for any such refusal, may, by notification in the Official Gazette, declare that such qualification shall be a recognised medical 10 qualification and the provisions of clause (a) shall apply accordingly;

15. (1) Subject to the other provisions contained in this Act, any medical qualification included in the Second or the Third Schedule shall be sufficient qualifications for enrolment on any State Register of 15 Homoeopathy.

(2) No person, other than a practitioner of Homoeopathy who possesses a recognised medical qualification and is enrolled on a State Register or the Central Register of Homoeopathy,-

(a) shall hold office as Homoeopathic physician or any other 20 office (by whatever designation called) in Government or in any institution maintained by a local or other authority;

(b) shall practise Homoeopathy in any State;

(c) shall be entitled to sign or authenticate a medical or fitness certificate or any other certificate required by any law to be signed ²⁵ or authenticated by a duly qualified medical practitioner;

(d) shall be entitled to give any evidence at any inquest or any court of law as an expert under section 45 of the Indian Evidence Act, 1872 on any matter relating to Homoeopathy.

(3) Nothing contained in sub-section (2) shall affect—

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1 of 1872

(a) the right of a practitioner of Homoeopathy enrolled on a State Register of Homoeopathy to practise Homoeopathy in any State merely on the ground that, on the commencement of this Act, he does not possess a recognised medical qualification;

(b) the privileges (including the right to practise Homoeopathy) 35 conferred by or under any law relating to registration of practitioners of Homoeopathy for the time being in force in any State, on a practitioner of Homoeopathy enrolled on a State Register of Homoeopathy;

(c) the right of a person to practise Homoeopathy in a State in 4° which, on the commencement of this Act, a State Register of Homoeopathy is not maintained if, on such commencement, he has been practising Homoeopathy for not less than five years;

(d) the rights conferred by or under the Indian Medical Council Act, 1956 [including the right to practise medicine as defined in 45 1956. clause (f) of section 2 of the said Act] or the Indian Medicine Central Council Act, 1970 of persons possessing any qualifications included in the respective Schedules to the said Act.

Rights of persons possessing qua_ lifications included in Second or the Third Schedule to be enrolled.

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(4) Any person who acts in contravention of any provision of subsection (2) shall be punished with imprisonment for a term which may extend to one year, or with fine which may extend to one thousand rupees, or with both.

5 16. Every University, Board or medical institution in India which grants a recognised medical qualification shall furnish such information as the Central Council may, from time to time, require as to the courses of study and examinations to be undergone in order to obtain such qualification, as to the ages at which such courses of study and examinations 10 are required to be undergone and such qualification is conferred and generally as to the requisites for obtaining such qualification.

17. (1) The Central Council shall appoint such number of medical inspectors as it may deem requisite to inspect any medical college, hospital or other institution where education in Homoeopathy is given, or to attend 15 any examination held by any University, Board or medical institution for the purpose of recommending to the Central Government recognition of medical qualifications granted by that University, Board or medical institution.

(2) The medical inspectors shall no: interfere with the conduct of any 20 training or examination, but shall report to the Central Council on the adequacy of the standards of education including staff, equipment, accommodation, training and other facilities prescribed for giving education in Homoeopathy, as the case may be, or on the sufficiency of every examination which they attend.

(3) The Central Council shall forward a copy of any such report to the University, Board or medical institution concerned, and shall also forward a copy with the remarks of the University, Board or medical institution thereon, to the Central Government.

18. (1) The Central Council may appoint such number of visitors as it 30 may deem requisite to inspect any medical college, hospital or other institution where education in Homoeopathy is given or to attend any examination for the purpose of granting recognised medical qualification.

(2) Any person, whether he is a member of the Central Council or not, may be appointed as a visitor under this section but a person who is ap-35 pointed as an inspector under section 17 for any inspection or examination shall not be appointed as a visitor for the same inspection or examination.

(3) The visitors shall not interfere with the conduct of any training or examination, but shall report to the President of the Central Council on the adequacy of the standards of education including staff, equipment, ac 40 commodation, training and other facilities prescribed for giving education in Homoeopathy or on the sufficiency of every examination which they attend.

(4) The report of a visitor shall be treated as confidential unless in any particular case the President of the Central Council otherwise directs:

45 Provided that if the Central Government requires a copy of the report of a visitor, the Central Council shall furnish the same. Visitors at examinations.

Power to require information as to courses of study and examinations.

Inspectors at examinations. Withdrawal of recognition. 19. (1) When upon report by the inspector or the visitor, it appears to the Central Council-

(a) that the courses of study and examination to be undergone in, or the proficiency required from candidates at any examination held by, any University, Board or medical institution, or

(b) that the staff, equipment, accommodation, training and other facilities for instruction and training provided in such University, Board or medical institution or in any college or other institution affiliated to the University,

do not conform to the standard prescribed by the Central Council, the 10 Central Council shall make a representation to that effect to the Central Government.

(2) After considering such representation, the Central Government may send it to the Government of the State in which the University, Board or medical institution is situated and the State Government shall 15 forward it along with such remarks as it may choose to make to the University, Board or medical institution, with an intimation of the period within which the University, Board or medical institution may submit its explanation to the State Government.

(3) On the receipt of the explanation, or, where no explanation is 20 submitted within the period fixed, then, on the expiry of that period, the State Government shall make its recommendations to the Central Government.

(4) The Central Government, after making such further inquiry, if any, as it may think fit, may, by notification in the Official Gazette, direct that an entry shall be made in the Second Schedule against the said 25 medical qualification declaring that it shall be a recognised medical qualification only when granted before a specified date, or that the said medical qualification if granted to students of a specified college or institution affiliated to any University shall be recognised medical qualification only when granted before a specified date or, as the case may be, 30 that the said medical qualification shall be recognised medical qualification in relation to a specified college or institution affiliated to any University only when granted after a specified date.

Minimum standards of education in Homoeopathy. 20. (1) The Central Council may prescribe the minimum standards of 35 education in Homoeopathy, required for granting recognised medical qualifications by Universities, Boards or medical institutions in India.

(2) Copies of the draft regulations and of all subsequent amendments thereof shall be furnished by the Central Council to all State Governments and the Central Council shall, before submitting the regulations or $_{40}$ any amendment thereof, as the case may be, to the Central Government for sanction, take into consideration the comments of any State Government received within three months from the furnishing of the copies as aforesaid.

CHAPTER IV

THE CENTRAL REGISTER OF HOMOEOPATHY

21. (1) The Central Council shall cause to be maintained in the pres-The cribed manner, a register of practitioners of Homoeopathy to be known Central 5 las the Central Register of Homoeopathy which shall contain-Register

(a) in Part I, the names of all persons who are for the time Homoeobeing enrolled on any State Register of Homocopathy and possess any pathy. of the recognised medical qualifications;

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(b) in Part II, the names of all persons, other than those included in Part I, who are for the time being enrolled on any State Register of Homoeopathy.

(2) It shall be the duty of the Registrar of the Central Council to keep and maintain the Central Register of Homoeopathy in accordance with the provisions of this Act and of any orders made by the Central Counis cil, and from time to time to revise the register and publish it in the Gazette of India and in such other manner as may be prescribed.

(3) Such register shall be deemed to be a public document within the meaning of the Indian Evidence Act, 1872, and may be proved by a copy I of 1872. published in the Gazette of India.

20 22. Each Board shall supply to the Central Council three printed Supply of copies of the State Register of Homoeopathy as soon as may be after the copies of State commencement of this Act and subsequently after the first day of April Register of of each year, and each Board shall inform the Central Council without Homoeodelay of all additions to and other amendments in the State Register of pathy. 25 Homoeopathy made from time to time.

23. The Registrar of the Central Council may on receipt of the report Registraof registration of a person in a State Register of Homoeopathy or on tion in the Central application made in the prescribed manner by any person, enter his name Register of in the Central Register of Homoeopathy, provided that the Registrar is Homoeo-30 satisfied that the person concerned is eligible under this Act for such registration.

24. (1) The Central Council may prescribe standards of professional Profesconduct and etiquette and a code of ethics for practitioners of Homoeo- sional conduct. pathy.

(2) Regulations made by the Central Council under sub-section (1) 35 may specify which violations thereof shall constitute infamous conduct in any professional respect, that is to say, professional misconduct, and such provision shall have effect notwithstanding anything contained in any law for the time being in force.

25. (1) If the name of any person enrolled on a State Register of Removal 40 Homoeopathy is removed therefrom in pursuance of any power conferred of names by or under any law relating to registration of practitioners of Homoto- from the pathy for the time being in force in any State, the Central Council shall Register direct the removal of the name of such person from the Central Register of Homoeoof Homoeopathy.

Central pathy.

of

(2) Where the name of any person has been removed from a State Register of Homoeopathy on any ground other than that he is not possessed of the requisite medical qualifications or where any application by the said person for restoration of his name to the State Register of Homoeopathy has been rejected, he may appeal in the prescribed manner 5 and subject to such conditions, including conditions as to the payment of a fee, as may be prescribed, to the Central Government whose decision, which shall be given after consulting the Central Council, shall be binding on the State Government and on the authorities concerned with the preparation of the State Register of Homoeopathy. ¹⁰

26. (1) Subject to the conditions and restrictions laid down in this Act regarding practice of Homoeopathy by persons possessing certain recognised medical qualifications, every person whose name is for the time being borne on Part I of the Central Register of Homoeopathy shall be entitled according to his qualifications to practise Homoeopathy, in any 15 part of India and to recover in due course of law in respect of such practice any expenses, charges in respect of medicaments or other appliances or any fees to which he may be entitled.

(2) Subject to the provisions of sub-section (3) of section 15, any person whose name is for the time being borne on Part II of the Central ²⁰ Register of Homoeopathy, may practise Homoeopathy in any State, other than the State where he is enrolled on the State Register of Homoeopathy, with the previous approval of the Government of the State where he intends to practise.

Registration of additional qualifications.

Privileges of

persons

who are

enrolled on the

Central

Register of

Homoeo_

pathy.

27. (1) If any person whose name is entered in the Central Register of 25 Homoeopathy obtains any title, diploma or other qualification for proficiency in Homoeopathy, which is a recognised medical qualification, he shall, on application made in this behalf in the prescribed manner, be entitled to have an entry stating such other title, diploma or other qualification made against his name in the Central Register of Homoeopathy 30 either in substitution for or in addition to any entry previously made.

(2) The entries in respect of any such person in a State Register of Homoeopathy shall be altered in accordance with the alterations made in the Central Register of Homoeopathy.

Persons enrolled on Central Register of Homoeopathy to notify change of place of residence or practice. 28. Every person registered in the Central Register of Homoeopathy 35 shall notify any transfer of the place of his residence or practice to the Central Council and to the Board concerned, within ninety days of such transfer, failing which his right to participate in the election of members to the Central Council or a Board shall be liable to be forfeited by order of the Central Government either permanently or for such period as may 40 be specified therein.

CHAPTER V

MISCELLANEOUS

29. (1) The Central Council shall furnish such reports, copies of its minutes, abstracts of its accounts, and other information to the Central ⁵ Government as that Government may require.

(2) The Central Government may publish in such manner as it may think fit, any report, copy, abstract or other information furnished to it under this section or under section 18.

- 30. (1) Whenever it is made to appear to the Central Government that ¹⁰ the Central Council is not complying with any of the provisions of this Act, the Central Government may refer the particulars of the complaint to a commission of inquiry consisting of three persons, two of whom shall be appointed by the Central Government, one being a Judge of a High Court, and one by the Central Council, and such commission shall pro-
- ¹⁵ ceed to inquire in a summary manner and to report to the Central Government as to the truth of the matters charged in the complaint, and in case of any charge of default or of improper action being found by the commission to have been established, the commission shall recommend the remedies, if any, which are in its opinion necessary.
- 20 (2) The Central Government may require the Central Council to adopt the remedies so recommended within such time as, having regard to the report of the commission, it may think fit, and if the Central Council fails to comply with any such requirement, the Central Government may amend the regulations of the Central Council, or make such provision or 25 order or take such other steps as may seem necessary to give effect to the
 - recommendations of the commission.

(3) A commission of inquiry shall have power to administer oaths, to enforce the attendance of witnesses and the production of documents, and shall have all such other necessary powers for the purpose of any inquiry ³⁰ conducted by it as are exercised by a civil court under the Code of Civil Procedure, 1908.

5 of 1908,

31. No suit, prosecution or other legal proceeding shall lie against the Government, the Central Council or a Board or any committee thereof or any officer or servant of the Government or the Central Council or the 35 Board or the Committee aforesaid for anything which is in good faith done or intended to be done under this Act.

32. (1) The Central Government may, by notification in the Official Gazette, make rules to carry out the purposes of this Act.

- (2) Every rule made under this section shall be laid, as soon as may 40 be after it is made, before each House of Parliament, while it is in session, for a total period of thirty days which may be comprised in one session or in two or more successive sessions, and if, before the expiry of the session immediately following the session or the successive sessions aforesaid both Houses agree in making any modification in the rule or an bath Houses agree that the rule should not be made the rule shall there
- 45 both Houses agree that the rule should not be made, the rule shall thereafter have effect only in such modified form or be of no effect, as the case may be; so, however, that any such modification or annulment shall be without prejudice to the validity of anything previously done under that rule.

Information to be furnished by Central Council and publication thereof. Commission of inquiry.

Protection of action taken in good faith.

Power to make rules. Power to make regulations.

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33. The Central Council may, with the previous sanction of the Central Government, make regulations generally to carry out the purposes of this Act, and, without prejudice to the generality of this power, such regulations may provide for—

(a) the manner of election of the President and the Vice-5 President of the Central Council;

(b) the management of the property of the Central Council and the maintenance and audit of its accounts;

(c) the resignation of members of the Central Council;

(d) the powers and duties of the President and Vice-President; 10

(e) the summoning and holding of meetings of the Central Council and the committees thereof, the times and places where such meetings are to be held, and the conduct of business threat and the number of members necessary to constitute a quorum;

(f) the functions of the committees constituted under section 9; 15

(g) the tenure of office, and the powers and duties of the Registrar and other officers and servants of the Central Council;

(h) the qualifications, appointment, powers and, duties of, and procedure to be followed by, inspectors and visitors;

(i) the courses and period of study of practical training to be 20 undertaken, the subjects of examination and the standards of proficiency therein to be obtained, in any University, Board or medical institution for grant of recognised medical qualification;

(j) the standards of staff, equipment, accommodation, training and other facilities for education in Homoeopathy; 25

(k) the conduct of professional examinations, qualifications of examiners and the conditions of admission to such examinations;

(l) the standards of professional conduct and etiquette and code of ethics to be observed by practitioners of Homoeopathy;

(m) the particulars to be stated, and the proof of qualifications to $_{30}$ be given in applications for registration under this Act;

(n) the manner in which and the conditions subject to which an appeal under section 25 may be preferred;

(o) the fees to be paid on applications and appeals under this Act; and

(p) any matter for which under this Act provision may be made by regulations.

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THE FIRST SCHEDULE

[See section 3(1)(a)]

1. The Central Government shall, by notification in the Official Gazette. determine the number of seats allocated in the Central Council of ⁵ Homoeopathy in each State on the following basis, namely:— (a) Where the number of persons enrolled on a State Register of Homoeopathy system exceeds 100 but does not exceed 10,000 1 seat. • • (b) Where the number of persons enrolled on a IO: State Register of Homoeopathy system exceeds 10,000 but does not exceed 20,000 ... 2 seats. (c) Where the number of persons enrolled on a State Register of Homocopathy system exceeds 20,000 but does not exceed 30,000 .. 3 seats. (d) Where the number of persons enrolled on a ١, State Register of Homoeopathy system exceeds 30,000 but does not exceed 40,000 4 seats. . . (e) Where the number of persons enrolled on a State Register of Homoeopathy system exceeds 40,000 ... 5 seats.

20 2. For every subsequent election to the Central Council under clause (a) of sub-section (1) of section 3, the Central Government shall, by notification in the Official Gazette, determine the number of seats allocated in the Central Council of Homoeopathy on the basis laid down in paragraph 1 above.

THE SECOND SCHEDULE

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(See section 13)

Name of University, Board or 30 Medical Institution		Recognised medical qualification	Abbreviation for regis- tration	
	I	2	3	4
	ANDHRA PRADESH			
	 Andhra Provincial Homoeopa- thic Medical College, Gudi- vada. 	Diploma in Homoeopa- thic Medicine,	D.H.M.	April, 1949 to March, 1969.
35	2. Dr. Gururaju Government Homoeopathie Medical College, Gudivada.	Diploma in Homoeopa- thic Medicine and Sur- gery.	D.H.M.S.	From April, 1970 onwards.
40	3. Board of Indian Medicine, Hyderabad.	Diploma in Homoeopa- thic Medicine and Surgery.	D.H.M.S.	From October, 1971.

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<u> </u>	2	3	4	-
BIHAR	<u></u>			-
Bihar State Board of Homoe pathic Medicine.	o- Diploma in Medicine and Surgery.	d D.M.S.	Since 1961.	
	Diploma in Homoeopa- thic Medicine and Surgery.	D.H.M.S	. From 1971 on wards.	•
DELHI				
5. Board of Homoeopathic Syste of Medicine, Delhi.	m Diploma in Homosopa- thic Science.	D.H.S.	From 1965 to 1970-71.	
	Diploma in Homocopa- thic Medicine and Surgery.	D.H.M.S.	From 1971 onwards.	
CERALA	-			
6. Board of Examiners in Homo pathy, Government of Ker	ala, thic Medicine.		wards.	
7. Royal College of Homoeop thic Physicians, Ernakulam.	a- Licentiate of Royal Col. lege of Homocopathi Physicians.	- L.R.C.H ic	.P. Up to 1966-0	57
AADHYA PRADESH				
8. The Board of Homoeopath and Biochemic Systems Medicine, Madhya Prades	of and Biochemistry.	y D.H.B.	From 1960 on- wards.	•
AAHARASHTRA				
 The Court of Examiner of Homocopathic and Biocher mic Systems of Medicin Bombay. 			From Decembe. 1961 onwards	, r,
	Diploma in Homocopath and Biochemistry.	y D.H.B.	From October, 1955 onwards.	
10. Court of Examiners i Homoeopathy.	in Fellow of the Court of Examiners in Homoco pathy.		In May, 1958 only.	
DRISSA 11. Orissa Board of Homoeopa Medicine, Bhubaneswar.	thic Diploma in Homoco- pathic Medicine and Surgery.	D.H.M.S	. From 1973 onwards.	
UTTAR PRADESH				
12. State Board of Homoeopat Medicine, U.P., Lucknow.	hic Graduate of Homocopa thic Medicine and Surgery.	- G.H.M.	S. In 1961 to 196	i3
	Bachelor of Medicine and Surgery.	B.M.S.	From 1958 to 19 and from 1970 onwards.	
	Certificate of Homoeopa- thic Practice.	C.H.P.	••	
13. Agra University, Agra.	Graduate of Homoeopa- thic Medicine and Sur gery.	G.H.M.S.	From 1965 to 196	7.
14. Kanpur University, Kanpur.	Graduate of Homocopa- thic Medicine and Surgery.	G.H.M.S.	From 1967 on- wards.	

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	I	2	3	4
1	 National Homocopathic Medi- cal College and Hospital, Lucknow. 	•.	H.L.M.S.	From 1923 to 1936.
5	Lucknow.		н.м.д.	From 1925 to 1942.
			Н.М.В.	From 1924 to 1949.
			В. М.S .	From 1950 to 1957.
10	 Homocopathic Medical College, Lucknow. 		н.м.в.	From 19 31 to 1936.
.W	EST BENGAL			
]	7. The Council of Homoeopathic Medicine, West Bengal.	Diploma in Medicine and Surgery.	D.M.S.	From 1965 on- wards.
15 _	8. General Council and State Faculty of Homoeopathic Medicine, West Bengal.	Diploma in Medicine an Surgery,	d D.M.S.	From 1943 to 1964.
	9. Calcutta Homoeopathic Medi- cal College, Calcutta.	Bach. lor of Homocopathi Medicine.	ic H.M.B.	Up to 1936.
20		Bachelor of Medicine and Bachelor of Surgery.	B.M.B.S.	From 1936 to 1942.
2	o. Bengal Allen Homocopathic Medical College, Calcutta.	Bachelor of Homoeopathic Medicine and Surgery.		Up to 1942.
•		Master of Homoeopathic Medicine and Surgery.	M.H.M.S	. Up to 1942.
25		Licentiate in Homoeo- pathic Medicine and Surgery.	L.H.M.S.	Up to 19 <u>4</u> 2.
30 -	I. Dunham Homoeopathic Medi- cal College, Calcutta.	Member of Dunham College of Homoeopathy.	- M.D.C.H	. Up to 1942.
2	2. Ashutosh Homoeopathic Medi- cal College, Calcutta.	Practitioner of Rational System of Medicine.	P.R.S.M.	Up to 1942.
		Practitioner of Healing	P.H.A.	Up to 1942.
35 _2	Herring Homocopathic Medi- cal College, Calcutta.	Licentiate of the Rational Homocopathic Society.	L.R.H.S.	Up to 1942.
2/	4. Regular Homocopathic Medi- cal College, Calcutta.	Licentiate in Homoeopa- thic Medicine and Sur- gery.	H.L.M.S.	Up to 1942.
0 2	5Central Homoeopathic College, Calcutta.	••	H.L.M.S. H.M.B.	1910. 1910.
20	5 Bengal Homoeopathic Medi- cal College, Calcutta.	Bachelor of Homoeo- pathic Medicine.	H.M.B.	Up to 1942.
ł	THE 1	HIRD SCHEDULE		
	-	ee section 14)		
5	QUALIFICATIONS GRANTED I	BY MEDICAL INSTITUTIONS	OUTSIDE IN	DIA
	Name of University, Board or Medical Institution	Recognised medical qualification	Abbreviation for regis- tration	n Remarks
1-	I	2	3	4
0 1	Faculty of Homocopathy,	Diploma of the Faculty of Homocopathy.	D.F. Hom.	
2		Member of the Faculty of Homocopathy.	M.F. Hom.	••
5 3	Faculty of Homoeopathy, London.	Fellow of the Faculty of Homoeopathy.	F.F. Hom.	

ANNEXURE

(Vide para 14 of the Report)

CLAUSES OF THE BILL AS INTRODUCED IN THE RAJYA SABHA WHICH HAVE BEEN AMENDED BY THE JOINT COMMITTEE

Definitions.

Constitu-

tion of Central

Council.

2. (1) In this Act, unless the context otherwise requires,-

(d) "Homoeopathy" means the system of medicine founded by Doctor Samuel Hahnemann;

3 (i) The Central Government shall, by notification in the Official Gazette, constitute for the purposes of this Act a Central Council consisting of the following members, namely:—

(a) such number of members not exceeding five as may be determined by the Central Government in accordance with the provisions of the First Schedule from each State in which a State Register of Homoeopathy is maintained, to be elected from amongst themselves by persons enrolled on that register as practitioners of Homoeopathy;

(b) one member from each University to be elected from amongst themselves by the members of the Faculty or Department (by whatever name called) of Homoeopathy of that University;

(c) such number of members, not exceeding thirty per cent. of the total number of members elected under clauses (a) and (b), as may be nominated by the Central Government, from amongst persons having special knowledge or practical experience in respect of Homoeopathy or other allied medical disciplines:

Provided that until members are elected under clause (a) or clause (b) in accordance with the provisions of this Act and the rules made thereunder, the Central Government shall nominate such number of members, being persons qualified to be chosen as such under the said clause (a) or clause (b), as the case may be, as that Government thinks fit; and references to elected members in this Act shall be construed as including references to members so

nominated.

(2) The President and Vice-President of the Central Council shall be elected by the members of the Central Council from amongst themselves in such manner as may be prescribed:

Provided that for two years from the first constitution of the Central Council, the President and the Vice-President shall be nominated by the Central Government from amongst the members of the Central Council and the President and the Vice-President so nominated shall, notwithstanding anything contained in sub-section (1) of section 7, hold office during the pleasure of the Central Government.

Term of office of President, Vice-President and members of Central Council. 7. (1) The President, Vice-President or a member of the Central Council shall hold office for a term of five years from the date of his election or nomination, as the case may be, or until his successor shall have been duly elected or nominated, whichever is longer.

(2) An elected or nominated member shall be deemed to have vacated his seat if he is absent without excuse, sufficient in the opinion of the Central Council, from three consecutive ordinary meetings of the Cen-

tral Council or, in the case of a member elected under clause (a) of subsection (1) of section 3, if he ceases to be enrolled on the concerned State Register of Homocopathy, or in the case of a member elected under clause (b) of that sub-section, if he ceases to be a member of the Faculty or Department (by whatever name called) of Homoeopathy of the University concerned.

(3) A casual vacancy in the Central Council shall be filled by election or nomination, as the case may be, and the person elected or nominated to fill the vacancy shall hold office only for the remainder of the term for which the member whose place he takes was elected or nominated.

(4) Members of the Central Council shall be eligible for re-election or re-nomination.

(5) Where the sad term of five years is about to expire in respect of any member, a successor may be elected or nominated at any time within three months before the said term expires but he shall not assume office until the said term has expired.

10. (1) The committees constituted under section 9 shall meet at least Meetings. once in each year at such time and place as may be appointed by the of com-Central Council. mittees.

(2) Unless otherwise prescribed, one-third of the total number of members of a committee shall form a quorum, and all the acts of the committee shall be decided by a majority of the members present and voting.

11. The Central Council shall-

(a) appoint a Registrar who shall act as Secretary and who may Officers also, if deemed expedient, act as Treasurer:

and other employees

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(b) employ such other persons as it deems necessary to carry of Central Council. out the purposes of this Act;

(c) require and take from the Registrar or from any other em-" ployee, such security for the due performance of his duties as the Central Council deems necessary; and

...(d) with the previous sanction of the Central Government, fix the remuneration and allowances to be paid to the President, Vice-President and members of the Central Council and to the Members of the committees thereof and determine the conditions of service of the employees of the Central Council.

14. (1) (a) The Central Council may enter into negotiations with the Recogniauthority in any State or country outside India, which by the law of such tion of State or country is entrusted with the maintenance of a Register of prac- medical titioners of Homoeopathy, for settling of a scheme of reciprovity for the qualifirecognition of medical qualifications in Homoeopathy, and in pursuance cations of any such scheme, the Central Government may, by notification in the granted Official Gazette, direct that the medical qualification which the Central by Council has decided should be recognised medical qualification, shall be medical deemed to be a recognised medical qualification for the purposes of this institu-Act, and any such notification may also direct that such medical quali-itions in fication shall be so recognised only when granted after a specified date State or or before a specified date.

countries outside

(b) Where the Council has refused to recommend any medical quali-India. fication which has been proposed for recognition by any authority referred to in clause (a) and that authority applies to the Central Government in this behalf, the Central Government, after considering such application and after obtaining from the Council a report, if any, as to

the reasons for any such refusal, may, by notification in the Official Gazette, declare that such qualification shall be a recognised medical qualification and the provisions of clause (a) shall apply accordingly.

(2) (a) The Central Government, after consultation with the Council, may, by notification in the Official Gazette, direct that medical qualifications granted by medical institutions in any country outside India in respect of which a scheme of reciprocity for the recognition of medical qualifications is not in force shall be recognised medical qualifications for the purposes of this Act or shall be so only when granted after a specified date.

(b) In respect of any such medical qualification, the Central Government, after consultation with the Council may, by notification in the Official Gazette, direct that it shall be a recognised medical qualification only when granted before a specified date:

Provided that medical practice by persons possessing such qualifications shall be limited to the period specified in this behalf by the Central Government by general or special order.

15. (1) Subject to the other provisions contained in this Act. any medical qualification included in the Second Schedule shall be sufficient qualifications for enrolment on any State Register of Homoeopathy.

21. (1) The Central Council shall cause to be maintained in the prescribed manner, a register of practitioners of Homoeopathy to be known as the Central Register of Homoeopathy which shall contain the names of all persons who are for the time being enrolled on any State Register of Homoeopathy and who possess any of the recognised medical qualifications.

(2) It shall be the duty of the Registrar of the Central Council to keep and maintain the Central Register of Homoeopathy in accordance with the provisions of this Act and of any orders made by the Central Council. and from time to time to revise the register and publish it in the Gazette of India and in such other manner as may be prescribed.

(3) Such register shall be deemed to be a public document within the meaning of the Indian Evidence Act, 1872, and may be proved by a copy published in the Gazette of India.

26. Subject to the conditions and restrictions laid down in this Act re-**Privileges** garding practice of Homoeopathy by persons possessing certain recogof persons nised medical qualifications, every person whose name is for the time being borne on the Central Register of Homoeopathy shall be entitled according to his qualifications to practise Homoeopathy, in any part of India and to recover in due course of law in respect of such practice any expenses, charges in respect of medicaments or other appliances or any fees to which he may be entitled.

33. The Central Council may, with the previous sanction of the Central Government, make regulations generally to carry out the purposes of make rethis Act, and, without prejudice to the generality of this power, such gulations: regulations may provide for-

pathy.

Rights of

persons

possessing qua-

lification. The

Central

Register

Homoeo-

of

Central Register of Homoeopathy. Power to

who are

enrolled

on the

(h) the appointment, powers, duties and procedure of inspectors and visitors;

THE SECOND SCHEDULE

(See Section 13)

Recognised Medical Qualifications in Homoeopathy granted by Universities, boards or Medical Institutions in India

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Name of University Board or medical institution	Recognised medical qualification	Abbreviation for regis- tration	
I	2	3	4
ANDHRA PRADESH	•		•
I. Andhra Provincial Homoeopa- thic Medical College, Gudi- vada.	Diploma in Homoeo- pathic Medicine	D.H.M.	April, 1949 March, 1969.
2. Dr. Gururaju Government Homocopathie Medical College, Gudivada.	Diploma in Homoeopa- thio Medicine and Sur- gery.	D.H.M.S.	From April, 197 onwards.
BIHAR			
3. Bihar State Board of Homoco- pathic Medicine.	Diploma in Medicine and Surgery.	D.M.S	Since 1961
· · · · ·	Diploma in Homocopa- thic Medicine and Surgery.	D.H.M.S.	From 1971 of wards.
DELHI		•	-
4. Board of Homoeopathic System of Medicine, Delhi.	Diploma in Homocopa- thic Science.	D.H.S.	From 1965 to 1970-71.
	Diploma in Homocopa- thic Medicine and	1 A. 1 A. 1	From 1971 onwards.
KERALA	Surgery.		
5. Board of Examiners in Homo- copathy, Government of Kerala.	Diploma in Homocopa- thic Medicine.	D.H.M.	From 1962 on wards.
6. Royal College of Homoeopa- thic Physicians, Ernakulam.	Licentiate of Royal Col- lege of Homoeopathic Physicians.	L.R.C.H.P.	Up to 1966-67
MADHYA PRADESH			
7. The Board of Homoeopathic and Biochemic Systems of Medicine, Madhya Pradesh.	Diploma in Homocopathy and Biochemistry.	D.H.B.	From 1960 on wards.
AHARASHTRA	$\mathcal{A}_{i}^{\mathbf{r}}$.		
8. The Court of Examiner of Homoeopathic and Bioche- mic Systems of Medicine, Bombay.	Licentiate of the Court of ! Examiners in Homocopathy.	L.C.E.H.	From December 1961 onwards.
	Diploma in Homoeopathy and Biochemistry.	-D.H.B.	From October 1955 onwards.
Homocopathy.	Fellow of the Court of Examiners in Homoeo-		In May, 1958 only.
UTTAR PRADESH	pathy.		
10. State Board of Homoeopathic Medicine, U.P., Lucknow.	Graduate of Homoco- pathic Medicine and Surgery.	G.H.M.S.	In 1961 to 1963.
	Bachelor of Medicine and Surgery.		From 1958 to 1960 and from 1970 onwards
	Certificate of Homoeo- pathic Practice.	C.H.P.	

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	Name of University, Board or Medical Institution	Recognised Medical qualification	Abbreviation for registration	
	r	2	3	4
11.	Agra University, Agra.	Graduate of Homoeopa thic Medicine and Surgery.		From 1965 t 1967.
12.	Kanpur University, Kanpur.	Graduate of Homoco- pathic Medicine and Surgery.		From 1967 on wards,
13.	National Homoeopathic Medi- cal College and Hospital Lucknow.		H.L.M.S.	From 1923 t 1936.
•	Lucknow.		H.M.D.	From 1925, to 1942
			н.м.в.	From 1924 to 1949.
		•	B.M.S.	From 1950 to 1957.
¥4.	Homocopathic Medical Col- lege, Lucknow.		H.M.B.	From 1931 to 1936.
WE	ST BENGAL			
15.	The Council of Homoco- pathic Medicine. West Bengal,	Diploma in Medicine 1 and Surgery.	D.M.\$. 🛛 🗆	From 1965 oa- wards.
16.	General Council and State Faculty of Homocopathic Medicine, West Bengal.	Diploma in Medicine and Surgery.	D.M.S.	From 1943 to 1964.
17.	Calcutta Homocopathic Medical College, Calcutta.	Medicine.		Up to 1936.
		Bachelor of Medicine and Bachelor of Surgery.	B.M.B.S.	From 1936 to 1942.
18.	Bengal Allen Homoeopathic Medical College, Calcutta.	Bachelor of Homoeopa- thic Medicine and Surgery.	B.H.M.S.	Up to 1942.
	· .	Master of Homoeopathic Medicine and Surgery.	M.H.M.S.	Up. to 1942.
		Licentiate in Homoco- pathic Medicine and Surgery.		Up to. 1942,
19 4.	Dunham Homocopathic Medical College, Calcutta.	Member of Dunham College of Homoco- pathy,	M.D.C.H.	Up to 1942.
20.	Ashutosh Homoeopathic Medical College, Qulcutta.	Practitioner of Rational System of Medicine.	P.R.S.M.	Up to 1942.
		Practitioner of Healing Art. 3	P.H.A.	Up to 1942.
21.	Herring Homoeopathic Medical College, Calcutta.	Licentiate of the Rational Homoeopathic Society.	L.R.H.S.	Up to 1942.
22, [•]	Regular Homocopathic Medical College, Calcutta.	Licentiate in Homoeo- pathic, Medicine and Surgery,	H.L.M.S.	Up to 1942.
23.	Central. Homoeopathic College, Calcutta.	· · 2 ···· 2	H.L.M.S. H.M.B.	

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APPENDIX I

(Vide para 2 of the Report)

Motion in the Rajya Sabha for reference of the Bill to a Joint Committee

"That the Bill to provide for the constitution of a Central Council of Homoeopathy and the maintenance of a Central Register of Homoeopathy and for matters connected therewith be referred to a Joint Committee of the Houses consisting of 45 members; 15 members from this House, namely:--

1. Shri Sasankasekhar Sanyal

2. Shri Bhupinder Singh

3. Shri N. G. Goray

4. Dr. K. Nagappa Alva

5. Dr. Debiprasad Chattopadhaya

6. Shri Sitaram Kesri

7. Shri Man Singh Varma

8. Shri T. K. Srinivasan

9. Shri K. C. Panda

10. Shri Manubhai Shah

11. Shri Sultan Singh

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- 12. Shri N. P. Chaudhari
- 13. Shri T. G. Deshmukh
- 14. Shrimati Savita Behen, and
- 15. Shrimati Purabi Mukhopadhayay

and 30 members from the Lok Sabha;

that in order to constitute a meeting of the joint Committee the quorum shall be one-third of the total number of members of the Joint Committee;

that in other respects, the Rules of Procedure of this House relating to Select Committees shall apply with such variations and modifications as the Chairman may make;

that the Committee shall make a report to this House by the first day of the Eighty-first Session; and

that this House recommends to the Lok Sabha that the Lok Sabha do join in the said Joint Committee and communicate to this House the names of members to be appointed by the Lok Sabha to the Joint Committee."

APPENDIX II

(Vide para 3 of the Report)

MOTION IN THE LOK SABHA

"That this House do concur in the recommendation of Rajya Sabha that the House do join in the Joint Committee of the Houses on the Bill to provide for the constitution of a Central Council of Homoeopathy and the maintenance of a Central Register of Homoeopathy and for matters connected therewith, made in the motion adopted by Rajya Sabha at its sitting held on the 3rd April, 1972 and communicated to this House on the 4th April, 1972 and do resolve that the following 30 Members of Lok Sabha be nominated to serve on the said Joint Committee, namely:

1 · · · · · ·

- (1) Shri Ziaur Rahman Ansari
- (2) Shri Vidya Dhar Bajpai
- (3) Shri Kushok Bakula
- (4) Shri Muhammed Khuda Bukhsh
- (5) Shri A. M. Chellachemi

(6) Shri Bhaoosahaib Dhamankar

(7) Shri Hiralal Doda

(8) Shri Nageshwar Dwivedi

(9) Shri Pampan Gowda

(10) Shri Madhuryya Haldar

(11) Shri Chiranjib Jha

(12) Shri Popatlal M. Joshi

(13) Shri Ramachandran Kadannappalli

(14) Shri B. R. Kavade

(15) Shri T. S. Lakshmanan

(16) Shri Mallikarjun

(17) Shri Prasannbhai Mehta

(18) Shri N. Sreekantan Nair

(19) Dr. Laxminarayan Pandeya

(20) Shri Janaki Ballav Patnaik

(21) Shri S. L. Peje

(22) Maulana Ishaque Sambhali

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(23) Shri M. Satyanarayan Rao

(24) Shri Umed Singh Rathia

(25) Shri K. Ramakrishna Reddy 👘 👘

(26) Dr. Sankata Prasad

(27) Shri Awdhesh Chandra Singh

(28) Shri Ram Deo Singh

(29) Shri Rana Bahadur Singh

(30) Shri A. K. Kisku."

APPENDIX III

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(Vide Para 8 of the Report)

List of Individuals Associations etc. from whom Memoranda, Suggestions etc. were received by the Joint Committee.

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1. Dr. Resik R. Thakar, Bombay.
2. Shri Suresh Chandra Sharma, Homoeopath, Kaseroo-Khera, Meerut
3. Shri R. L. Sharma, Basti (U.P.).
4. Dr. Sultan Alam M. Bihari, Line Zazar, Purnea.
5. Dr. M. B. Kotian, Bombay.
6. Dr. M. C. Mohoot, 973, Ajay Bhawan, Sardarpura, Jodhpur.
7. Dr. K. B. Lal, General Secretary, 'Samvardhan Homoeo Kendra'
Gwalior:
8. Dr. R. Y. Thackeray, Bombay.
c 9. Dr. Baburao Patel, Bombay-50.
10. Dr. D. K. Dubey, Homoeo Medical Clinic, 70, Patel Marg, Thar, M.P.
11. Hahnemann Homoeo Mandiram, Jaipur.
12. Dr. P. S. Damodaran, Bombay.
² 13. Homoeo Uday Andolan Samiti, Bhopal.
'14. Dr. D. D. Bhatnagar, Model Town, Delhi.
15. Dr. A. N. Bhattacharya, Ujjain.
16. Shri B. K. Tewari, R.K. Puram, New Delhi.
17. S Shri T. N. Gupta and H. L. Bansal, R.K. Puram, New Delhi.
18. The Rajasthan Homoeopathy Association, Jaipur.
19. The Registered Homoeopathic Medical Practitioners' Association Madras.
20. Bhartiya Homoeopathy Protection Society, Hardwar, Saharanpur.
21. Delhi Homoeopathic Medical Association, Chandni Chowk, Delhi
22. Dr. Jai Chand Jain, General Secretary, All Haryana Homoeopathic Medical Association, Ambala Cantt.
23. S. Rly. Homoeo Medical Practitioners' Association, Tiruchchirapalli
24. Shri Shrish Chandra Tiwari, District Santhal Parganas, Bihar.
25. Shri S. M. Ibrahim, Balaganj, Hoshangabad.
26. Registered Homoeopathic Medical Practitioners' Association Hydera bad.
27. Comments of Dr. S. N. Saxena (Hahneman Homeo Mandiram Jaipur).
28. Comments of Dr. R. D. Sharma, Dewas.
29. Dr. T. N. Mahadevan, Bombay.
30. Dr. T. P. Kohli, Dr. R. R. Thakar, Dr. Om Almeda and Dr.H. R Mehta, Bombay.
31. Dr. J. M. Gor, Secretary, Homoeo Mission, Ahmedabad.
32. All India Homoeopathic Medical Association, Chandigarh.
33. Shri T. Seshachary, Hyderabad.
34. Dr. Shanti Dev, Medical Officer-in-charge, C.G.H.S. Homoeopathic Dispensary, Gole Market, New Delhi.
35. Dr. Lakshmi Chand Khanna, Amritsar.
36. Dr. S. D. Sircar, Calcutta.

- 38. Shri R. S. Pandiyan, Principal, A.H. Medical College, P.O. Sachivothamaparam, Kottayam District, Kerala.
- 39. Dr. E. Shahul Hameed, Tiruchy.
- 40. Dr. G. S. Nagar, Jaipur.
- 41. Dr. C. A. Rajagopalachari, Madras.
- 42. Dr. Ram Prakash Sharma, Chandigarh.
- 43. Dr. R. D. Dani, 173, Pratap Building Dady Seth Agiary Lane, Bombay and Dr. T. P. Kohli, 12, Sudarshan Bharadwadi, Andheri, Bombay.
- 44. Dr. R. P. Mathur, Jaipur.
- 45. Dr. Chandubhai R. Patel, Bagaidol, (Gujarat).
- 46. Dr. N. Krishna Rao, Hyderabad.
- 47. Shri K. S. Ramachandra, Murthy, Nalgonda.
- 48. Dr. D. N. Sinha, Secretary, Temple of Hahnemann Hospital and College, Monghyr.
- 49. Dr. S. B. Kar, Principal, Singhbhum Homoeopathic Medical College and Hospital, Jamshedpur.
- 50. Dr. Dashrath Pachhigar Founder Organiser-cum-Editor Incharge, Homoeopathic Chikitsak Jagat, Surat.
- 51. Dr. M. Satyanarayana, Chairman, Homoeopathic Standards Board, Hyderabad.
- 52. Shri K. Hari Prasada Rao, Secretary, The Visakhapatnam District Homoeopathic Medical Practitioners' Association, Visakhapatnam.
- 53. U.P. Homoeopathic Medical Association, Kanpur.
- 54. Dr. A. C. Uppal, Rohtak.
- 55. Homoeopathic Medical College, Poona.
- 56. Dr. G. B. Patel, Navsari.
- 57. Dr. A. V. R. Murty, Visakhapatnam.
- 58. Indore Homoeopathic and Biochemic Association.
- 59. International Homoeopathic Medical Association, Bombay.
- 60. Mihijam Institute of Homoeopathy, Mihijam, Bihar.
- 61. Dr. G. S. Choudhary, Indore.
- 62. Dr. R. K. Desai, Ahmedabad.
- 63. Dr. Ram Kishen Shangle, Delhi.
- 64. Dr. M. S. Chugha, Patiala.
- 65. Dr. D. Gouri Sankara Rao, Visakhapatnam.
- 66. Dr. S. Seal, Calcutta.
- 67. Dr. K. C. Sinha, Allahabad.
- 68. Dr. S. D. Bhayekar, Shewala (Maharashtra).
- 69. D.H.S. Medical Association, New Delhi.
- 70. Dr. B. B. Shukla, Lucknow:
- 71. Dr. S. K. Zutshi, Delhi.
- 72. Dr. R. P. Mishra, Muzaffarpur.
- 73. All India, Homoeopathic Medical Association, Bombay,

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- 74. Dr. N. Venkatarama Ayyer, Madras.
- 75. Directorate General of Health Services, New Delhi.
- 76. Shri Mohan Singh, Patiala.
- 77. Dr. A. S. Dhole, Amravati.
- 78. Dr. Veena Gupta, Hatim Serai, Sambhal (N. Rly.).
- 79. Council of Homoeopathic System of Medicine, Gujarat State,
- 80. All India Homoeopathic Medical Association, New Delhi.
- 81. Homoeopathic Medical Association, Ratlam.
- 82. Indian Homoeopathic Research Association, Calcutta.

- 27
- 83. Rajendra Homoeopathic University, Patna.
- 84. Dr. N. L. Sinha, Kanpur.
- 85. Shri Dayal Singh, Hardwar
- 86. Homoeopathic educational Society, Chirala (A.P.).
- 87. Palghat District Homoeopathic Association.
- 88. Mysore Pradesh Regd. Homoeopathic Medical Practitioners' Association, Bangalore.
- 89. Mir Asraf Hossain, Berhampore (W.B.).
- 90. Association of Homoeopathic Physicians, Bombay.
- 91. Court of Examiners of Homoeopathic and Biochemic Systems of Medicine, Bombay.
- 92. Nagpur College of Homoeopathy and Biochemistry.
- 93. Government of Assam.
- 94. Government of Andhra Pradesh.
- 95. Government of West Bengal.
- 96. Council of Homoeopathic System of Medicines, West Bengal.
- . 97, The Homoeopathic Education Society, Bombay.
 - 98. I.C.E.H. Doctors' Association, Bombay,
 - 99. Action Committee of L.C.E.H. Doctors' Association, Bombay.
 - 100. Dr. M. V. R. Swamy, Bangalore.

APPENDIX IV

(Vide para 9 of the Report)

LIST OF WITNESSES WHO GAVE ORAL EVIDENCE BEFORE THE JOINT COMMITTEE

_

S. No	Name of witness	Date of hearing
ı.	Representatives of the Ali India Homocopathic Medical Association, West Bengal Branch, Calcutta :	25-9-197
	(i) Dr. Asoke Paul, General Secretary.	
	(ii) Dr. Bhola Nath Mukherjee, Organising Secretary, A.I.H.M.A. Delhi.	
	(iii) Dr. Ananga Nath, Chakrabarti, Member, General Council, A.I.H.M.A. Delhi.	• • •
2,	Representatives of the West Bengal State Homocopathic Federation, Calcutta.	25-9-1972
	 (i) Dr. J. N. Kanjilal, Vice-President, All India Institute of Homoco- pathy West Bengal 	· • •
	(ii) Dr. S. K. Adhicari, Vice-President.	
	(iii) Dr. S. N. Chatterjee, General Secretary (iv) Dr. R. D. Mallick, Joint Secretary.	
3.	Representatives of the Homoeo Medical Club, West Bengal, Calcutta.	25-9-1972
	(i) Dr. Nitai Chandra Chakravarty, President. (ii) Dr. Nirmal Kumar Sarkar, Vice-President.	
4	Representative of the West Bengal D. M. S. Association, Calcutta.	25-9-1972
	Dr. N. P. Roy, Vice-President.	
5.	Shri A. K. Majumdar, Secretary to the Government of West Bengal, Department of Health and Family Planning, Calcutta.	25-9-1972
6.	Representatives of the All India Homocopathic Medical Association, Singhbhum Branch. Jamshedpur :	25-9-1972
	(i) Dr. T. S. Saggu, General Secretary.(ii) Dr. R. P. Singh, Assistant Secretary.	
7.	Representative of the Singhbhum Homocopathic Medical College and Hos- pital, Jamshedpur : Dr. S. B. Kar, Principal.	25-9- 1972
8.	Representative of the Calcutta Homoeopathic Medical College and Hos-	26 -9 -1972
	(i) Dr. B. K. Bose, Secretary, Calcutta. Homoeopathic Medical Society.	
	(ii) Dr. R. Ghoshal, Principal.	
	(iii) Dr. P. C. Paul, Vice-Pincipal. (iv) Dr. S. C. Ghosh, Administrative Officer.	
9.	Representatives of the All Orissa Homocopathic Medical Association, Puri :	26-9 -1972
	(i) Dr. Bhagwanprasad Das, General Secretary.	
	(ii) Dr. Devraj Rautary, Member Executive Committee.	
10.	Dr. Satchidananda. Das, Puri.	26-9-1972
11.	Dr. Bhupen Bijali. MLA, West Bengal, Bata Nagar.	26-9-1972
	Dr. Bibhas Roy, Calcutta.	

Serial No.	Name of witness	Date of hearing
13.	Representatives of the D. N. De. Homoeopathic Medical College and Hospital, Calcutta :	27-9-1972
	 (i) Dr. S. K. Nayak, Pincipal (ii) Dr. Samir Banerjee, Vice-Principal. (iii) Dr. J. N. Kanjilal, Head of the Department, Materia Medica. 	•
14.	Representative of the Mahesh Bhattacharyya Homocopathic Medical College and Hospital, Calcutta: Dr. J. N. Sircar, Princiapal.	27-9-1972
15.	Dr. S. D. Sircar, Calcutta.	27-9-1972
16.	Dr. B. K. Sarkar, Calcutta.	28-9 -1972
17.	Representative of the Patna Homoeopathic Medical College, Patna	28-9-1972
	Dr. S. C. Ray. Principal.	•
18,	Dr. Kameshwar Prasad, Patna.	28-9-1972
19.	Dr. S. Seal, Calcutta.	28-9- 1972
20.	Dr. B. N. Chakravarty, Adviser in Homoeopathy, Government, of West Bengal. Calcutta.	28-9 -1972
21.	Representatives of the Council of Homocopathic System of Medicine, West, Bengal. Calcutta. :	2 8-9 -1972
• •	(i) Dr. S. K. Nayak.	ر ما ا
	(ii) Dr. Dharam Das Banerjee	1
	(iii) Dr. N. K. Chakrabarty	, ,
	(iv) Dr. K. Pal	·
	(v) Shri M. K. Ganguli, Registrar.	
22.	Dr. Anil Chandra Debnath, Tripura.	28-9-1972
23.	Mir. Asraf Hossain, Berhampore. P. O. District Murshidabad.	28-9- 1972
24.	Representatives of	29-9-1972
• •	(i) the Assam Homoeo Research and Public Health Association, Dergac	n,
.'	(ii) the Board of Homosopathic System of Medicine, Assam, Shillong.	t;
. 1	, Dr. D. Bora.	
25.	Representative of the State Board of Homoeopathic Medicine, Bihar, Patna.	: 29-9 -1972
26.	Shri K.JK. Saran, President. Representative of the Government Homoeopathic Medical College and Hospital, Bhubaneswar.	29-9-197 2
	Dr. Narayan Rao, Principal and Superintendent of the Hospital.	
27.	Representatives of the Bombay Homoeopathic Medical College run by the Homoeopathic Education Society, Bombay :	3-10-1972
	(i) Dr. Edel Behram, Founder Principal.	, 1
	(ii) Dr. C. C. Desai. Officiating Principal.	· .
-	(iii) Dr. M. C. Batra, Honorary, Secretary, Homoeopathic Education Society.	
28.	Representatives of the Homoco Mission, Ahmedabad :	3-10-1972
	(i) Dr. J. M. Gor.	· ,

S1. No.	Name of Witness	Date of hearing
29.	Representatives of the Homocopathic & Biochemic Medical College, Amravati	3-10-1972
	 (i) Dr. A.S. Dhole, Frincipal (ii) Dr. Dhrmale, Vice-Principal 	
• •	 (iii) Dr. Bhalerao, Principal of the Wardha Homocopathic Medical College (iv) Shri Ghoghre (v) Dr. H.B. Kara Patel 	•
30,		3-10-1972
31.	Shri K.S. Ramachandra, Assistant Lecturer, N.G. College, Nalgonda (A.P.)	3-10-1972
32.	Representatives of the All India Homocopathic Medical Association, Maharashra Branch, Bombay	:- 4-10-1972
	(i) Dr. T.P. Kohli, Honorary Secretary (ii) Dr. A.V. Amonkar	. 1
	(iii) Dr. R.D. Dani (iv) Dr. H.B.Kara Patel	na in Na internationalista
,	(v) Dr. R.K. Phatak (vi) Dr. D.S. Umrootkar (vii) Dr. (Smt.) Kusum D. Umrootkar.	
33.	Representatives of the Homocopathic -Medical College, Poona	4-10-1972
	 (i) Dr. Y.V. Phatak, Principal (ii) Dr. S.A. Katekari, Vice-Principal 	4 ** *)/=
34-	Representatives of the L.C.E.H. Doctors Association, Bombay • • •	4-10-1972
	 (i) Dr. Behram Badhaniwala, President (ii) Dr. Prakash Vakil, Honorary Secretary (iii) Dr. K.R. Gala, Honorary Assistant Secretary 	
35.	Repesentative of the Nagpur College of Homocopathy and Biochemistry •	4-10-1972
•	Dr. (Smt.) Vinal Wazulwar	ι •
36.	Dr. K. Prahlad, Bombay	4-10-1972
37.	Dr. S.R. Wadia, Bombay	4-10-1972
38.	Dr. P. Sankaran, Bombay	4-10-1972
		5-10-1972
	(f) Dr. M.D. Phalnikar, President 👔 - Part - Das de astationen en meter	•
	(ii) Dr. M.L. Dhawale Vice-President	
40.		5-10-1972
	(f) Dr. Anil R. ⁱ Bhatia (for the and the form one state to the form of the f	
41 .	Representatives of the Principals of Homoeopathic Colleges in Vidarbha	5-10-1972
	(i) Dr. N.Z. Nandurkar, Yootmal (ii) Dr. R.G. Kawishar, Khamgaon	
42.	Representative of the action committee of L.C.E.H. Doctors Association Bombay	5-10-1972
•	Dr. D.K. Sahane	•
4 3·	Shri Baburao Patel, Bombay	6-10-1972

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Seria No.	al Name of witness	Date of hearing
44.	Dr. N.H. Barlas, Honorary Adviser in Homocopathy, Government of Maharashtra, Bombay	5-10-197
45-		5-10-197:
I	(i) Dr. S. Thirupamaiah, Honorary Secretary (ii) Dr. V. Radhakrishna Murti, Honorary Joint Secretary	
46.	Dr. N. Lakshminarayana, Hyderabad	-10-197
47.	Dr. T. Seshachary, Hyderabad · · · · · · · · · · · · · · · · · · ·	-10-197
48.	Dr. N. Krishna Rao, Hyderabad	-10-197
49.	Systems of Medicine, Bombay; and (ii) the Board of Homoeopathic and	-10-1972
	(i) Dr. J.K. Sanyal representatives of the Court	
	(iii) Dr. A.S. Dhole representatives of the (iv) Dr. M.C. Batra representatives of the (v) Dr. K. Prahlad Board. (vi) Shri S.B. Upadhye, Registrar J	
50.	mahan Damban n n n	10-1972
jI.	Dr. R.K. Lesai, Ahmedabad • • • • • 7-	10-1972
52.	Representatives of the Institute of Homocopaths, Kerala, Plamoodu, Trivandrum 28-	, 10-1972
	(f) Dr. R. Jayakumar, Chairman	
	(#) Dr. Ravi M. Nair, Joint Secretary	
	(iii) Dr. K.J. Isaac, Member	
1	(iv) Dr. K.N. Gopinath Pillai, Member	
3.	Dr. K.G. Manur, Bangalore • • • • 28-	10-1972
4.	Representative of the Mysore State Homoeopathic Committee, Bangalore 28-1	10-1972
•	Shrl T.N.S. Somayaji, Registrar	· 1
5.	Dr. A.R.A. Acharya, Bangalore 28-1	10-1972
б.	Dr. H.K. Srinivapa Rao, Bangalore 28-1	0-1972
7.	Dr. H.T. Rangaswami, Bangalore · · · · · · · · · · · · · · · · · · 28-1	0-1972
3 . .	Dr. M.V.R. Swamy, Bangalore	0-1972
	Representatives of the Royal College of Homoeopathic Physicians, Ernakulam 30-1	
((i) Dr. S.B. Pandiar, Principal (ii) Dr. S.N. Pandiar, Vice-Principal	
	Representative of the Homoeopathic Meaduical College Pappanamcode, 30-1 Trivendrum.	0-1972
э,		
	. Dr. M. K. Sivaramana Nair, Principal	
	Remarking of the De Commin Commune Western et is 14 th t	-1972

Scrial No.	Name of Witness	Date of hearing
62. R	epresentatives of the Students Union of the Athrasramam Homoeopathic Medical College, Sachivothamapuram, P. O. Kottayam	30-10-1972
•	(i) Sh-i N. I. Babu Chairman	
•	 (i) Shri E. N. Gopalakrishnan, General Secretary, All Kerala Homoeo Medical Students Federation at the College. 	, 1
63. R	epresentatives of the Athrasaramam Homoeopathic Medical College, Sachive thamapuram, P. O. Kottayam :	- 30-10-197
	(i) His Holiness Swami Athura Dasji, Founder of the College.	
	(ii) Shri T. K. Gopalakrishna Panicker, Director, College Committee.	· · ·
	(iii) Dr. R. S. Pandiyan, Principal.	
64. R	epresentatives of the Registered Homoeopathic Medical Practitioners Association, Madras :	31-10-1972
	(i) Dr. G. Rajamannar, President.	· F - V
	(ii) Dr. G. I. Abraham, General Secretary.	ı .
65. R	epresentative of the Southern Railway Homocopathic Medical Practitionern Association, Tiruchirapalli	31-10-1972
	Dr. K. M. Chidambaram, President.	
66. D	r. V. Sundara Varadhan, Madras.	31-10-1972
67. D	r. C. A. Rajagopalachari, Madras.	31-10-197
	al Cub	
		31-10-1972
69. Re	epresentatives of the All Kerala Homoeopathic Federation, Quilon:	1-11-1972
	(i) Dr. A. G. Nair, President.	
	(ii) Dr. A. K. George, General Secretary.	÷
,	(iii) Dr. K. V. John, Secretary.	
•	(iv) Dr. Philip Powlose, Publicity Officer.	
70. D	r. K. A. Joseph, Principal, Homoeopathic Medical College, Madurai.	1-11-1972
71. D	r. K. T. Thomas Pollachi.	I-II-1972
72. I	Dr. M. P. Parmeswaran, Assistant Director, State Institute of Languages, Kerala, Trivandrum.	1-11-1972
73. I	Dr. K. Z. George, Assistant Director (Homoeopathy), Government of Kerala, Trivandrum.	I-II-1972
74. I	Representatives of the All India Homocopathic Medical Association, New Delhi:	8-1-1973
	(i) Dr. H. L. Chitkara, General Secretary.	
	(ii) Dr. Som Dev, Joint Secretary.	
	(iii) Dr. Kripal Singi Bakhshi, Treasurer.	an An an A
75. I	Dr. Vishwanath Aggarwal, Amritsar	8-1-1973
76. I	Dr. Diwan Harish Chand, New Delhi.	8-1-1973

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Seria No.	Name of witness	Date of hearing
78.	Representatives of the All India Institute of Homoeopathy, Delhi	9-1-1973
	(i) Dr. K. G. Saxena, President.	1 A & 11
	(ii) Dr. J. P. Srivastava, General Secretary,	
	(iii) Dr. Shanti' Dev.	•
	(iv) Dr. K. N. Mathur. (v) Dr. N. N. Singh.	
	(vi) D. T. R. Chaddha.	and the second second
	'(vii) Dr. P. C. Mehta.	
	(viii) Dr. C. M. Grover.	at is a fit star
	(ix) Dr. K. K. Juneja. (x) Dr. Davendra Mohan.	+ + + + - + - + - + + + + + + + + + + + + + +
79·	Representative of the Tilakdhari Homoeopathic Medical College ar Hospital, Jaunpur : Dr. A. N. Singh, Principal	nd 9-1-197
80.	Dr. Jugal Kishore, Adviser in Homoeopathy, Ministry of Health and	d Ramily Art-ross
.	Planning, New Delhi.	a rainiy 9-1-19/3
81.	Representatives of the All Haryana Homoeopathic Medical Associat Ambala Cantt:	tion, 10-1-1973
	(i) Dr. Raja Ram Singh Arya, President.	
	(ii) Dr. Jai Chand Jain, General Secretary.	
	iii) Prof. Onkar Nath Sahore.	
	(iv) Dr. S. S. Chawle,	
32.	Representative of the Bhartiya Homoeopathic Protection Society, H Dr. B. Kaj, General Secretary.	Iardwar: 10-1-197
83.	Dr. Kashinath V. Chitte, Srinagar (J & K) • • •	- · 10-1-197
84.	Dr. Sultan Alam M. Bihari, Purnea (Bihar) • • •	• • 10-1-197
85.	Dr. C. P. Jhunjhunwala, Jaipur • • • • •	10-1-197
86.	Dr. P. L. Banerji, Jaipur · · · · · · ·	· · 10-1-197
87.	Representative of the Rajasthan Homoeopathic Medical College and I Jaipur :	Hospital, • • • 10-1-197
	Dr. Girendra Pal, Vice-Principal	
88.	Dr. Yudhvir Singh, Delhi · · · · · · ·	• • 411-1-197
39.	Dr. K. K. Bajpai, Registrar, U.P. Homoeopathic Medicine Board, La	ucknow 11-1-197
)0.	Representatives of the U.P. Homoeopathic Medical Association, Kanp	pur • II-I-197
	(i) Dr. Jagdish Chandra Nigam (ii) Dr. Prakash Chandra Srivastava, Secretary	
91.	Dr. Radha Krishna, Secretary, AIHMA, Himachal Pradesh Branch, S Nagar (H. P.)	Sunder 11-1-197
92.	Dr. B. N. Paul, Secretary, Aligarh Homoeo Academy, Aligarh •	• • 11-1-197
93.	Dr. S. S. Raza, Aligarh · · · · · · ·	· • 11-1-197
94.	Dr. B. B. Shukla, Chief Medical Officer, Moti Lal Nehru Homoe Hospital, Lucknow.	eopathic 11-1-197
95 .	Representatives of the Mysore Pradesh Registered Homocopathic Me Practitioners Association, Bangalore :	edical II-I-I97
	(i) Dr. A. N. Ratnam, President (ii) Dr. R. Gopinath, Secretary (iii) Dr. R. Vittobai, Vice-President	-

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•	e		and.	•	•	

34.

Serial No.	47-4 148344		Name	of wi	tness) ⁽¹	і л. 						Date of hearing
96.		yanarayana,		man,	Hom	ocopa	athic	Stand	ards	Board,	, Hyd	lerabad	11-1-1973
•97	Dr. S. K.	Zutshi, New	Delhi	i	•	•	•	. •	•	ب و،	. •		12-1-1973
98.	Dr. S. S. S	Sharma, Prin	ncipal,	The	Chha	tarpu	ır Ho	omoeoj	pathic	: Medi	cal (College	12-1-197
	and Hos	pital, Chhat	arpur	(M.P.)				,			•	1
99.		Lal, Gwalio	-	(M.P. •	.) •				•	•		2 2 3 9	12-1-1973
	Dr. K. B.		r	(M.P.	.) • •	•	•	•	•	• • •	•		12-1-197 <u>:</u> 12-1-197:
100.	Dr. K. B. Dr. D. K.	Lal, Gwalio	- 1 18	(M.P. • •	.) - -	•		•	•	•	•		

APPENDIX V

(Vide Para 5 of the Report)

MINUTES OF THE MEETINGS OF THE JOINT COMMITTEE

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12 1 6 1

First Meeting for the second of the

The Committee met at 10.10 A.M. on Saturday, the 3rd June, 1972.

PRESENT

. 1. Shrimati Purabi Mukhopadhyay—Chairman.

 $n \ge 0$ MEMBERS 44. **.** 1. **.** 11. Rajya Sabha 📃 and the second second 2. Shri Sasankasekhar Sanyal 3. Shri Bhupinder Singh 4. Dr. Debiprasad Chattopadhyaya 5. Shri Sitaram Kesri 6. Shri Man Singh Varma 7. Shri T. K. Srinivasan : 8. Shri Sultan Singh 9. Shri T. G. Deshmukh

10. Shrimati Savita Behen

1. 1

• 1

. Lok Sabha

11. Shri Ziaur Rahman Ansari

1.1.1.1

12. Shri Muhammed Khuda Bukhsh

13. Shri Bhaoosahaib Dhamankar

14. Shri Nageshwar Dwivedi

115. Shri Pampan Gowda

16. Shri Madhuryya Haldar

- 17. Shri Chiranjib Jha
 - 18. Shri Ramachandran Kadannappalli
 - 19. Shri B. R. Kavade and a structure of the structure of
 - 20. Shri N. Sreekantan Nair
 - 21. Dr. Laxminarayan Pandeya_

22. Shri S. L. Peje

23. Maulana Ishaque Sambhali

24. Shri Umed Singh Rathiagr transf

25. Shri K. Ramakrishna Reddy 26. Dr. Sankata Prasad

27. Shri Awdhesh Chandra Singh

28. Shri Rana Bahadur Singh. Content of the content

REPRESENTATIVES OF THE MINISTRIES

Ministry of Law

Shrimati V. S. Rama Devi, Deputy Legislative Counsel.

Ministry of Health and Family Planning

Shri P. V. Hariharsankaran, Deputy Secretary. Kumari Sathi Balakrishna, Under Secretary. Dr. Jugal Kishore, Adviser in Homoeopathy.

Secretariat

and all that Shri M. S. Panigrahi, Deputy Secretary.

Shri M. K. Jain, Under Secretary.

2. At the outset the Chairman welcomed the Members of the Committee,

3. The 'Committee thereafter held a detailed discussion about its future programme of work and sittings and took the following decisions: ---

- (1) That a Press Communique be issued inviting memoranda on the Bill from various associations, organisations and indivi-duals interested in the subject-matter of the Bill and advising them to send their memoranda so as to reach the Rajya Sabha Secretariat latest by the 10th July, 1972.
- (2) That witnesses be invited for giving oral evidence on the Bill and that the Chairman may, after examining all the memoranda, decide as to who might be invited to give evidence before the Committee.
- (3) That the Ministry of Health and Family Planning may prepare a draft questionnaire, which after approval by the Committee, be circulated to various associations, organisations and institu-tions connected with Homoeopathy for eliciting their replies to the specific points contained in the questionnaire.
- (4) That the Ministry of Health and Family Planning may, make available to Members copies of the Report of the Joint Commitee on the Indian Medicines and Homoeopathy Central Council Bill, 1968, and Evidence tendered before the said Joint Committee as also such other literature as may be useful in their deliberations.

4. The Chairman also requested the Members to suggest names of persons who might be invited for giving oral evidence before the Committee.

5. The Committee decided to hold its next meeting on Tuesday, the 20th June, 1972, to consider and approve the draft questionnaire mentioned in para 3(3) above. La juli

6. The Committee then adjourned at 11.50 A.M. to meet again at 11.00 A.M. on Tuesday, the 20th June, 1972

II.

<u>_____</u>_____

Second Meeting

11.01 The Committee met at 11.00 A.M. on Tuesday, the 20th June, 1972.

(1) 11 (1) (1) (1)

1. Shrimati Purabi Mukhopadhyay-Chairman.

MEMBERS

Rajya Sabha

2. Shri Sasankasekhar Sanyal

3. Shri Bhupinder Singh

- 4. Shri N. G. Goray
- 5. Dr. Debiprasad Chattopadhyaya
- 6. Shri Sitaram Kesri
- 7. Shri Man Singh Varma
- 8. Shri K. C. Panda
- 9. Shri Manubhai Shah
- 10. Shri Sultan Singh
- 11. Shri N. P. Chaudhari
- 12. Shri T. G. Deshmukh

Lok Sabha

- 13. Shri Ziaur Rahman Ansari
- 14. Shri Vidya Dhar Bajpai
- 15. Shri Bhaoosahaib Dhamankar
- 16. Shri Nageshwar Dwivedi
- 17. Shri Pampan Gowda
- 18. Shri Madhuryya Haldar
- 19. Shri Chiranjib Jha
- 20. Shri B. R. Kavade
- 21. Shri Mallikarjun
- 22. Shri Prasannbhai Mehta
- 23. Shri N. Sreekantan Nair
- 24. Dr. Laxminarayan Pandeya
- 25. Shri S. L. Peje

۰.

- 26. Maulana Ishaque Sambhali
- 27. Shri M. Satyanarayan Rao
- 28. Shri K. Ramakrishna Reddy
- 29. Dr. Sankata Prasad
- 30. Shri Ram Deo Singh.

REPRESENTATIVES OF THE MINISTRIES

Ministry of Law and Justice

Shrimati V. S. Rama Devi, Deputy Legislative Counsel,

Ministry of Health and Family Planning

Kumari Sathi Balakrishna, Under Secretary. Dr. Jugal Kishore, Adviser in Homoeopathy.

Secretariat

Shri M. S. Panigrahi, Deputy Secretary Shri M. K. Jain, Under Secretary

2. The Committee took up for consideration the five draft questionnaire on the Bill, furnished by the Ministry of Health and Family Planning to be issued to various Homoeopathic institutions, professional associations, State Governments, State Boards/Councils and private practitioners for eliciting their replies to the questions contained therein. As, however, some Members desired to give their suggestions on the aforesaid questionnaire, and wanted some time for the same, the Committee decided that Members desirous of giving suggestions for inclusion in the questionnaire may send them to the Secretariat within a week. The Committee also decided that after these suggestions are incorporated, the questionnaire may be issued to the various institutions, organisations, etc. requesting them to send their replies so as to reach the Secretariat by the 10th August, 1972. 3. The Committee decided to ask for extension of time up to the last day of the Eighty-second session of the Rajya Sabha for the presentation of its Report and authorised the Chairman or in her absence Shri Manubhai Shah to move the necessary motion in the House.

4. The Committee authorised the Chairman to fix its next meeting some time after replies to the questionnaire are recieved

5. The Committee then adjourned at 11.50 A.M.

III

· .

Third Meeting

The Committee met at 9.30 A.M. on Thursday, the 17th August, 1972.

PRESENT

1. Shri N. G. Goray—in the Chair

Members

Rajya Sabha

2. Shri Sasankasekhar Sanyal

3. Shri Bhupinder Singh

4. Dr. K. Nagappa Alva

5. Dr. Debiprasad Chattopadhyaya

6. Shri Man Singh Varma

7. Shri K. C. Panda

8. Shri N. P. Chaudhari

9. Shri T. G. Deshmukh

Lok Sabha

. ...

10. Shri Ziaur Rahman Ansari

11. Shri Muhammed Khuda Bakhsh

12. Shri Bhaoosahaib Dhamankar

13. Shri Hiralal Doda

14. Shri Nageshwar Dwivedi

15. Shri Pampan Gowda

16. Shri Madhuryya Haldar

17. Shri Chirar.jib Jha

18. Shri Ramachandran Kadannappalli

19. Shri B. R. Kavade

20. Shri Prasannbhai Mehta

21. Shri N. Sreekantan Nair

22. Dr. Laxminarayan Pandeya

23. Shri Janaki Ballav Patnaik

24. Shri S. L. Peje

25. Maulana Ishaque Sambhali

26. Shri M. Satyanarayan Rao

27. Shri K. Ramakrishna Reddy

28. Shri Awdhesh Chandra Singh

29. Shri Rana Bahadur Singh

30. Shri A. K. Kisku

REPRESENTATIVES OF THE MINISTRIES

Ministry of Law and Justice

Shrimati V. S. Rama Debi, Deputy Legislative Counsel

Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy

Shri P. V. Hariharsankaran, Deputy Secretary

Secretariate

Shri S. S. Bhalerao, Joint Secretary Shri M. S. Panigrahi, Deputy Secretary Shri Kashmiri Lal, Under Secretary

2. In the absence of the Chairman, Shri N. G. Goray was voted to the Chair.

3. At the outset, the Chairman apprised the Committee the work so far done with regard to the publication of the Committee's Press Communique in newspapers, etc., the circulation of the questionnaire to private practitioners, Governments and other bodies and the receipt of memoranda and replies to the questionnaire in the Secretariat. The Chairman directed that the factual position as explained by him to the Committee should be circulated to the members for their information. The Chairman informed the members that the material so far received will be circulated to the members in due course.

4. Some members desired that mere publicity should be given to the subject-matter of the Bill through the All India Radio and some more newspapers (names of which were supplied by some members) so that those interested in submitting their views on the Bill may still do so. The Committee directed the Secretariat to take appropriate action in this regard.

5. The Committee then considered its future programme of sittings and decided to hear oral evidence of witnesses at the following places:—

- (i) Bombay
- (ii) Calcutta
- (iii) Hyderabad
- (iv) Trivandrum
- (v) Bhopal

The Committee, accordingly, authorised its Chairman to obtain permission of the Chairman, Rajya Sabha, to hold its sitting at the places mentioned above, as required under the Rules of Procedure.

6. The Committee reiterated its earlier decision that the Chairman of the Committee may, after examining all the memoranda, select witnesses for tendering oral evidence before the Committee [vide paragraph 3(2) of the Miniutes of the meeting held on the 3rd June, 1972] and decded that only those, who have submitted memoranda may be invited for this purpose.

7. Members felt that the details of the programme of the meetings of the Committee may be worked out by the Chairman of the Committee, considering the availability of accommodation for Committee meetings and its members, number of witnesses who may be called, the memoranda submitted, etc. It was, however, the general desire of members that the meetings may preferably be held from the 20th September, 1972, onward.

8. The Committee then adjourned at 10.25 A.M.

Fourth Meeting

The Committee met from 10.00 A.M. to 1.00 P.M. and again from 3.00 P.M. to 4.10 P.M. on Monday, the 25th September, 1972, in the Council Chamber of the West Bengal Legislative Assembly Building, Calcutta.

PRESENT

1. Shrimati Purabi Mukhopadhayay-Chairman

Members

Rajya Sabha

- 2. Shri Sasankasekhar Sanyal
- 3. Shri Bhupinder Singh

4. Shri N. G. Goray

5. Dr. K. Nagappa Alva

6. Shri Man Singh Varma

7. Shri T. K. Srinivasan

8. Shri Sultan Singh

9. Shri N. P. Chaudhari

10. Shri T. G. Deshmukh

11. Shrimati Savita Behen

Lok Sabha

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12. Shri Ziaur Rahman Ansari

13. Shri Muhammed Khuda Bukhsh

14. Shri Bhaoosahaib Dhamankar

15. Shri Hiralal Doda

16. Shri Nageshwar Dwivedi

17. Shri Madhuryya Haldar

18. Shri Chiranjib Jha

19. Shri Ramachandran Kadannappalli

20. Shri B. R. Kavade

21. Shri Mallikarjun

22. Shri Prasannbhai Mehta

23. Shri N. Sreekantan Nair

24. Dr. Laxminarayan Pandeya

25. Shri Janaki Ballav Patnaik

26. Shri S. L. Peje

27. Maulana Ishaque Sambhali

28. Shri M. Satyanarayan Rao

29. Shri Umed Singh Rathia

30. Shri K. Ramakrishna Reddy

31. Dr. Sankata Prasad

32. Shri Rana Bahadur Singh

Representatives of the Ministries

Health and Family Planning

Dr. Jugal Kishore, Adviter in Homoeopathy

Secretariat

Shri M. K. Jain, Under Secretary.

WITNESSES

- (1) Representatives of the All India Homoeopathic Medical Association, West Bengal Branch. Calcutta.
 - (i) Dr. Asoke Paul, General Secretary
 - (ii) Dr, Bhola Nath Mukherjee, Organising Secretary, A.I.H.M.A. Delhi.
 - (iii) Dr. Ananga Nath Chakrabarti, Member, General Council AIHMA, Delhi.
- (2) Representatives of the West Bergal State Homoeopathic Federation, Calcutta.
 - (i) Dr. J. N. Kanjilal, Vice-President, All India Institute Homoeopathy, West Bengal.
 - (ii) Dr. S. K. Adhicari, Vice-President.
 - (iii) Dr. S. N. Chatterjee, General Secretary
 - (iv) Dr. R. D. Mallick, Joint Secretary
- (3) Representatives of the Homoeo Medical Club, West Bengal, Calcutta.
 - (i) Dr. Nitai Chandra Chakravarty, President.
 - (ii) Dr. Nirmal Kumar Sarkar, Vice-President.
- (4) Representative of the West Bengal D.M.S. Association, Calcutta Dr. N. P. Roy, Vice-President
- (5) Shri A. K. Majumdar, Secretary to the Government of West Bengal, Department of Health and Family Planning, Calcutta.
- (6) Representatives of the All India Homoeopathic Medical Association, Singhbhum Branch, Jamshedpur.
 - (i) Dr. T. S. Saggu, General Secretary
 - (ii) Dr. R. P. Singh, Assistant Secretary
- (7) Representative of the Singhbhum Homoeopathic Medical College and Hospital, Jamshedpur:

Dr. S. B. Kar, Principal

2. The Chairman welcomed the Members to the meetings of the Committee at Calcutta.

3. The Committee, therefore, heard the oral evidence tendered by the following witnesses:—

- (i) Representatives of the All India Homoeopathic Medical Association, West Bengal Branch-
- (ii) Representatives of the West Bengal State Homoeopathic Fedration.
- (iii) Representatives of the Homoeo Medical Club, west Bengal.
- (iv) Representative of the West Bengal D.M.S. Association

- (v) Shri A. K. Majumdar
- (vi) Representatives of the All India Homoeopathic Medical Association, Singhbhum Branch.
- (vii) Representative of the Singhbhum Homoeopathic Medical College and Hospital.

The representatives of the first four bodies appeared before the Committee together and the representatives of the last two also, appeared together.

A verbatim record of the evidence was kept.

4. The Committee then adjourned at 4.10 p.m. to meet again at 10.00 A.M. on Tuesday, the 26th September, 1972.

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Fifth Meeting

The Committee met at 10.00 A.M. on Tuesday, the 26th September, 1972 in the Council Chamber of the West Bengal Legislative Assembly Building, Calcutta.

PRESENT

Shrimati Purabi Mukhopadhayay-Chairman

Members

Rajya Sabha

2. Shri Bhupinder Singh

3. Shri N. G. Goray

4. Dr. K. Nagappa Alva

- 5. Dr. Debiprasad Chattopadhyaya.
- 6. Shri Man Singh Varma

7. Shri T. K. Srinivasan

- 8. Shri Sultan Singh
 - 9. Shri N. P. Chaudhari
 - 10. Shri T. G. Deshmukh

Lok Sabha

1.

11. Shri Ziaur Rahman Ansari

12. Shri Bhaoosahaib Dhamankar

13. Shri Hiralal Doda

14. Shri Nageshwar Dwivedi

15. Shri Madhuryya Haldar

16. Shri Chiranjib Jha

17. Shri Ramachandran Kadannappalli

18. Shri B. R. Kavade

19. Shri T. S. Lakshmanan

20. Shri Mallikarjun

21. Shri Prasannbhai Mehta

22. Shri N. Sreekantan Nair

23. Dr. Laxminarayan Pandeya

24. Shri Janaki Ballav Patnaik

25. Shri S, L. Peje

26. Maulana Ishaque Sambhali

27. Shri M. Satyanarayan Rao

- 28. Shri Umed Singh Rathia
- 29. Shri K. Ramakrishna Reddy
- 30. Dr. Sankata Prasad
- 31. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy.

SECRETARIAT

Shri M. K. Jain, Under Secretary.

WITNESSES

- (1) Representatives of the Calcutta Homoeopathic Medical College and Hospital, Calcutta:
 - (i) Dr. B. K. Bose, Secretary, Calcutta Homoeopathic Medical Society.
 - (ii) Dr. R. Ghoshal, Principal.
- (iii) Dr. P. C. Paul, Vice-Principal.
- (iv) Dr. S. C. Ghosh, Administrative Officer.
- (2) Representatives of the All Orissa Homoeopathic Medical Association, Puri:
 - (i) Dr. Bhagwanprasad Das, General Secretary.
 - (ii) Dr. Devraj Rautaray, Member Executive Committee.
- (3) Dr. Satchindananda Das, Puri
- (4) Dr. Bupen Bijali, MLA, West Bengal, Bata Nagar.

2. The Committee heard the oral evidence tendered by the following witnesses:---

- (i) Representatives of the Calcutta Homoeopathic Medical College and Hospital.
- (ii) Representatives of the All Orissa Homoeopathic Medical Association.
 - (iii) Dr. Satchnidananda Das

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(iv) Dr. Bhupen Bijali, MLA.

The representatives of the All Orissa Homoeopathic Medical Association and Dr. Satchidananda Das appeared before the Committee together.

A verbatim record of the evidence was kept.

3. The Chairman announced that in the afternoon Members of the Committee would visit the Calcutta Homoeopathic Medical College and Hospital and the D. N. Dey Homoeopathic Medical College and Hospital.

4. The Committee then adjourned at 12.20 P.M. to meet again at 10.00 A.M. on Wednesday, the 27th September, 1972.

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SIXTH MEETING

The Committee met at 10.15 A.M. on Wednesday, the 27th September, 1972 in the Council Chamber of the West Bengal Legislative Assembly Building, Calcutta.

PRESENT

1. Shrimati Purabi Mukhopadhayay-Chairman

MEMBERS

Rajya Sabha

2. Shri Bhupinder Singh

3. Shri N. G. Goray

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4. Dr. K. Nagappa Alva

5. Dr. Debiprasad Chattopadhyaya

6. Shri Man Singh Varma

7. Shri T. K. Srinivasan

8. Shri K. C. Panda

9. Shri Sultan Singh

10. Shri N. P. Chaudhari

11. Shri T. G. Deshmukh

Lok Sabha

12. Shri Ziaur Rahman Ansari

13. Shri Bhaoosahib Dhamankar

14. Shri Hiralal Doda

15. Shri Nageshwar Dwivedi

16. Shri Chiranjib Jha

17. Shri B. R. Kavade

18. Shri T. S. Lakshmanan

19. Shri Mallikarjun

20. Shri Prasannbhai Mehta

21. Shri N. Sreekantan Nair

22. Dr. Laxminarayan Pandeya

23. Shri S. L. Peje

24. Maulana Ishaque Sambhali

25. Shri M. Satyanarayan Rao

26. Shri Umed Singh Rathia

27. Shri K. Ramakrishna Reddy

28. Dr. Sankata Prasad

29. Shri Ram Deo Singh

30. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

1.

Dr. Jugal Kishore, Adviser in Homoeopathy

SECRETARIAT

Shri M. K. Jain, Under Secretary,

WITNESSES

(1) Dr. Bibhas Roy, Calcutta

(2) Representatives of the D.N. De Homoeopathic Medicai College and Hospital, Calcutta:

- (i) Dr. S. K. Nayak, Principal
- (ii) Dr. Samir Banerjee, Vice-Principal
- (iii) Dr. J. N. Kanjilal, Head of the Department, Materia Medica.

(3) Representative of the Mahesh Bhattacharyya Homoeopathic Medical College and Hospital, Calcutta

Dr. J. N. Sircar, Principal

(4) Dr. S. D. Sircar, Calcutta

2. The Committee heard the oral evidence tendered by the following witnesses:—

(i) Dr. Bibhas Roy.

- (ii) Representatives of the D. N. De Homoeopathic Medical College and Hospital.
- (iii) Representative of the Mahesh Bhattacharyya Homoeopathic Medical College and Hospital.
- (iv) Dr. S. D. Sircar.

The representatives of College mentioned at (ii) and (iii) above appeared together.

A verbatim record of the evidence was kept.

3. The Chairman announced that in the afternoon, Members of the Committee would visit the Central Research Institute (Homoeopathy) and the Mahesh Bhattacharyya Homoeopathic Medical College and Hospital.

4. The Committee then adjourned at 12.15 p.m. to meet again at 10.00 A.M. on Thursday, the 28th September, 1972.

VII

Seventh Meeting

The Committee met from 10.00 A.M. to 1.15 P.M. and again from 3.00 P.M. to 4.00 P.M. on Thursday, the 28th S-ptember, 1972 in the Council Chamber of the West Bengal Legislative Assembly Building, Calcutta.

PRESENT

1. Shrimati Purabi Mukhopadhyay—Chairman.

Members

Rajya Sabha

2. Shri Sasankasekhar Sanyal

3. Shri Bhupinder Singh

4. Dr. K. Nagappa Alva

5. Shri Man Singh Varma

6. Shri K. C. Panda

7. Shri Sultan Singh

8. Shri N. P. Chaudhari

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Lok Sabha

9. Shri Ziaur Rahman Ansari

10. Shri Muhammed Khuda Bukhsh

11. Shri Bhaoosahaib Dhamankar

12. Shri Hiralal Doda

13. Shri Nageshwar Dwivedi

14. Shri Madhuryya Haldar

15. Shri Chiranjib Jha

16. Shri B. R. Kavade

17. Shri Mallikarjun

18. Shri Prasannbhai Mehta

19. Shri N. Sreekantan Nair

20. Dr. Laxminarayan Pandeya

21. Shri Janaki Ballav Patnaik

22. Shri S. L. Peje

23. Shri M. Satyanarayan Rao

24. Dr. Sankata Prasad

25. Shri Ram Deo Singh

26. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy

Secretariat

Shri M. K. Jain, Under Secretary.

WITNESSES

- (1) Dr. B. K. Sarkar, Calcutta.
- (2) Representative of the Patna Homoeopathic Medical College, Patna

Dr. S. C. Ray, Principal.

- (3) Dr. Kameshwar Prasad, Patna.
- (4) Dr. S. Seal, Calcutta.
- (5) Dr. B. N. Chakravarty, Adviser in Homoeopathy, Government of West Bengal, Calcutta.
- (6) Representatives of the Council of Homoeopathic System of Medicine, West Bengal, Calcutta:
 - (i) Dr. S. K. Nayak
 - (ii) Dr. Dharam Das Banerjee
 - (iii) Dr. N. K. Chakrabarty
 - (iv) Dr. K. Pal
 - (v) Shri M. K. Ganguli, Registrar.

(7) Dr. Anil Chandra Debnath, Tripura.

2. The Chairman made a reference to the sad demise of Swami Ramanand Shastri, a Member of the Lok Sabha and a Member of the Study Group of the Joint Committee of the Houses on the Welfare of Scheduled Castes and Scheduled Tribes in the early hours of September 27, 1972, while the Study Group was on its tour of the Andaman and Nicobar Islands. The Committee observed one minute's silence, all members standing, as a mark of respect to the memory of late Shri Shastri.

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3. The Committee, thereafter heard the oral evidence tendered by the following witnesses:—

- (i) Dr. B. K. Sarkar.
- (ii) Representative of the Patna Homoeopathic Medical College.
- (iii) Dr. Kameshwar Prasad.
- (iv) Dr. S. Seal.
- (v) Dr. B. N. Chakravarty.
- (vi) Representatives of the Council of Homoeopathic System of Medicine, West Bengal.
- (vii) Dr. Anil Chandra Debnath.

A verbatim record of the evidence was kept.

4. The Committee then adjourned at 4.00 p.m. to meet again at 10.00 A.M. on Friday, the 29th September, 1972.

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Eighth Meeting

The Committee met from 10.00 A.M. to 12.00 Noon and again from 3,00 P.M. to 4.30 P.M. on Friday, the 29th September, 1972, in the Council Chamber of the West Bengal Legislative Assembly Building, Calcutta.

PRESENT

1. Shrimati Purabi Mukhopadhyay—Chairman,

MEMBERS

Rajya Sabha

- 2. Shri Sasankasekhar Sanyal
- 3. Shri Bhupinder Singh
- 4. Dr. K. Nagappa Alva
- 5. Shri Man Singh Varma
- 6. Shri K. C. Panda
- 7. Shri Sultan Singh
- 8. Shri N. P. Chaudhari

Lok Sabha

9. Shri Ziaur Rahman Ansari

10. Shri Muhammed Khuda Bukhsh

11. Shri Bhaoosahaib Dhamankar

12. Shri Hiralal Doda

13. Shri Nageshwar Dwivedi

14. Shri Chiranjib Jha

15. Shri B. R. Kavade

16. Shri Mallikarjun

17. Shri Janaki Ballav Patnaik

18. Shri S. L. Peje

19. Shri M. Satyanarayan Rao

20. Dr. Sankata Prasad

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy.

SECRETARIAT

Shri M K. Jain, Under Secretary.

WITNESSES

- (1) Mir Asraf Hossain, Berhampore P.O., District Murshidabad.
- (2) Representative of—
 - (i). The Assam Homoeo Research and Public Health Association, Dergaon.
 - (ii) The Board of Homoeopathic System of Medicine, Assam, Shillong.

Dr. D. Bora.

(3) Representative of the State Board of Homoeopathic Medicine, Bihar, Patna.

Shri K. K. Saran, President.

- (4) Representative of the Government Homoeopathic Medical College and Hospital, Bhubaneswar.
 - Dr. Naravan Rao, Principal and Superintendent of the Hospital.

2. The Committee heard the oral evidence tendered by the following witnesses:----

- (i) Mir Asraf Hossain.
- (ii) Representative of-
 - (a) the Assam Homoeo Research and Public Health Association; and
 - (b) the Board of Homoeopathic System of Medicine, Assam.
- (iii) Representative of the State Board of Homoeopathic Medicine, Bihar
- (iv) Representative of the Government Homoeopathic Medical College and Hospital, Bhubaneswar.

A verbatim record of the evidence was kept.

3. The Committee expressed its grateful thanks to the Speaker and Officers of the West Bengal Legislative Assembly for the excellent arrangements made for holding the meetings of the Committee.

The Committee also expressed its deep sense of gratitude to the Chief Minister, Minister of Health and Minister of State for Health and the Secretary to the Government of West Bengal, Health Department, the Adviser in Homoeopathy, Government of West Bengal and other Officers of the Health Department for the hospitality extended and the keen personal interest taken by them which contributed greatly not only to the successful completion of the Committee's work at Calcutta but also made the stay of members and others connected with the Committee quite pleasant and comfortable.

4. The Committee then adjourned at 4.30 P.M. to meet again at 10.00 . M. on Tuesday, the 3rd October, 1972, in the Council Hall (Maharashtra Legislative Building), Bombay.

Ninth Meeting

IX

The Committee met from 10.00 A.M. to 12.50 P.M. and again from 3.00 P.M. to 3.40 P.M. on Tuesday, the 3rd October, 1972, in the Congress Party Hall of the Council Hall, Bombay.

PRESENT

1. Shrimati Purabi Mukhopadhyay-Ohairman.

MEMBERS

Rajya Sabha

2. Shri Sasankasekhar Sanyal

3. Shri Bhupinder Singh

4. Shri N. G. Goray

5. Shri Man Singh Varma

6. Shri Debiprasad Chattopadhyaya

7. Shri K. C. Panda

8. Shri Sultan Singh

9, Shri N. P. Chaudhari

10. Shri T. G. Deshmukh

11. Shrimati Savita Behen

Lok Sabha

12. Shri Ziaur Rahman Ansari

13. Shri Muhammed Khuda Bukhsh

14. Shri Bhacosaharb Dhamankar

15. Shri Hiralal Doda

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16 Shri Nageshwar Dwivedi

17. Shri Madhuryya Haldar

18. Shri Chiranjib Jha

19. Shri Ramachandran Kadannappalli

20. Shri Mallikarjun

21. Shri Prasannbhai Mehta

22. Dr. Laxminarayan Pandeya

23. Shri Janki Ballav Patnaik

24. Shri S. L. Peje

25. Maulana Ishaque Sambhali

26. Shri M. Satyanarayan Rao

27. Shri Umed Singh Rathia

28. Shri K. Ramakrishna Reddy

29. Dr. Sankata Prasad.

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REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy.

Secretariat

Shri M. K. Jain, Under Secretary.

WITNESSES

- (1) Representatives of the Bombay Homoeopathic Medical College run by the Homoeopathic Education Society, Bombay:
 - (i) Dr. Edel Behram, Founder Principal.
- (ii) Dr. C. C. Desai, Officiating Principal.
- (iii) Dr. M. C. Batra, Honorary Secretary, Homoeopathic Education Society.
- (2) Representatives of the Homoeo Mission, Ahmedabad:
 - (i) Dr. J. M. Gor.
 - (ii) Dr. K. R. Thaker.
- (3) Representatives of the Homoeopathic & Biochemic Medical College, Amravati:
 - (i) Dr A. S. Dhole, Principal.
 - (ii) Dr. Dharmale, Vice-Principal.
- (iii) Dr. Bhalerao, Principal of the Wardha Homoeopathic Medical College.
- (iv) Shri Ghoghre.
- (v) Dr. H. B. Kara Patel.
- (4) Dr. Y. Satyanarayana Rao, Government Homoeopathic Dispensary, Nalgonda (A.P.).
- (5) Shri K. S. Ramachandra, Asstt. Lecturer, N. G. College Nalgonda (A.P.).

2. The Chairman welcomed the members to the meetings of the Committee at Bombay.

3. The Chairman referred to the letter signed by twenty-five members of the Committee and sent to the Chairman, Rajya Sabha requesting him to accord permission to the Committee to visit the State of Jammu and Kashmir. The members desired that the Chairman of the Committee may approach the Chairman, Rajya Sabha for obtaining his permission for the visit.

4. The Committee, thereafter, heard the oral evidence tendered by the following witnesses:---

- (i) Representatives of the Bombay Homoeopathic Medical College, Bombay.
- (ii) Representatives of the Homoeo Mission, Ahmedabad.
- (iii) Representatives of the Homoeopathic and Biochemic Medical College, Amravati.
- (iv) Dr. Y. Satyanarayana Rao.
- (v) Shri K. S. Ramachandra Murthy.

Dr. Y. Satyanarayana Rao and Shri K. S. Ramachandra Murthy appeared before the Committee together.

A verbatim record of the evidence was kept.

5. The Committee then adjourned at 3.40 P.M. to meet again at 10.00 A.M. on Wednesday, the 4th Octoiber, 1972.

Tenth Meeting

The Committee met from 10.30 A.M. to 12.50 P.M. and again from 3.00 P.M. to 4.30 P.M. on Wednesday, the 4th October, 1972, in the Congress Party Hall of the Council Hall, Bombay.

PRESENT

1. Shrimati Purabi Mukhopadhyay—Chairman.

MEMBERS

Rajya Sabha

2. Shri Bhupinder Singh

3. Shri N. G. Goray

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4. Dr. Debiprasad Chattopadhyaya

5. Shri Man Singh Varma

6. Shri K. C. Panda

7. Shri Sultan Singh

8. Shri N. P. Chaudhari

9. Shri T. G. Deshmukh

10. Shrimati Savita Behen.

Lok Sabha

11. Shri Ziaur Rahman Ansari

12. Shri Muhammed Khuda Bukhsh

13. Shri Bhaoosahaib Dhamankar

14. Shri Hiralal Doda

15. Shri Nageshwar Dwivedi

16. Shri Madhuryya Haldar

17. Shri Chiranjib Jha

18. Shri Ramachandran Kadannappalli

19. Shri B. R. Kavade

20. Shri T. S. Lakshmanan

21. Shri Prasannbhai Mehta

22. Dr. Laxminarayan Pandeya

23. Shri S. L. Peje

24. Shri M. Satyanarayan Rao

25. Shri Umed Singh Rathia

26. Shri K. Ramakrishna Reddy

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27. Dr. Sankata Prasad

28. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy

SECRETARIAT

Shri M. K. Jain, Under Secretary.

WITNESSES

- (1) Representatives of the All India Homoeopathic Med'cal Association, Maharashtra Branch, Bombay:
 - (i) Dr. T. P. Kohli, Honorary Secretary
 - (ii) Dr. A. V. Amonkar
 - (iii) Dr. R. D. Dani
 - (iv) Dr. H. B. Kara Patel
 - (v) Dr. R. K. Phatak
 - (vi) Dr. D. S. Umrootkar
 - (vii) Dr. (Smt.) Kusum D. Umrootkar.
- (2) Representatives of the Homoeopathic Medical College, Poona.

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- (i) Dr. Y. V. Phatak, Principal
- (ii) Dr. S. A. Katekari, Vice-Principal
- (3) Representatives of the L.C.E.H. Doctors' Association. Bombay:
 - (i) Dr. Bheram Badhaniwala, President
 - (ii) Dr. Prakash Vakil, Honorary Secretary.
- (iii) Dr. K. R. Gala, Honorary Asstt. Secretary.
- (4) Representative of the Nagpur College of Homoeopathy and Biochemistry:

Dr. (Smt.) Vimal Wazulwar.

- (5) Dr. K. Prahlad, Bombay.
- (6) Dr. S. R. Wadia, Bombay.
- (7) Dr. P. Sankaran, Bombay.

2. The Committee heard the oral evidence tendered by the following witnesses:-

- (i) Representatives of the All India Homoeopathic Medical Association, Maharashtra Branch.
- (ii) Representatives of the Homoeopathic Medical College, Poona.
- (iii) Representatives of the L.C.E.H. Doctors Association, Bombay.
- (iv) Representative of the Nagpur College of Homoeopathy and Biochemistry.

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- (v) Dr. K. Prahlad
- (vi) Dr. S. R. Wadia
- (vii) Dr. P. Sankaran

Dr. K. Prahlad, Dr. S. R. Wadia and Dr. P. Sankaran appeared before the Committee together.

A verbatim record of the evidence was kept.

3. The Committee then adjourned at 4.30 P.M. to meet again at 10.00 A.M. on Thursday, the 5th October, 1972.

Eleventh Meeting

The Committee met at 11.30 A.M. on Thursday, the 5th October, 1972, in the Congress Party Hall of the Council Hall, Bombay.

PRESENT

1. Shrimati Purabi Mukhopadhayaya---Chairman.

MEMBERS 1

Rajya Sabha

2. Shri Bhupinder Singh

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17. 3. Shri, N. G. Goray

4. Shri Man Singh Varma

5. Shri K. C. Panda

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6. Shri Sultan Singh.

7. Shri N. P. Chaudhari

8. Shri T. G. Deshmukh

9. Shrimati Savita Behen

Lok Sabha

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10. Shri Ziaur Rahman Ansari

11. Shri Bhaoosahaib Dhamanker

12. Shri Hiralal Doda

13. Shri Nageshwar Dwivedi

14. Shri Chiranjib Jha

15. Shri B. R. Kavade

16. Shri T. S. Lakshmanan , 🖉 🔅

17. Shri Prasannbhai Mehta

18. Shri S. L. Peje

19. Shri M. Satyanarayan Rao

20. Shri Umed Singh Rathia

21. Shri K. Ramakrishna Reddy

22. Dr. Sankata Prasad

23. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy.

Secretariat

Shri M. K. Jain, Under Secretary.

WITNESSES

(1) Representatives of the Homoeopathic Post Graduate Association Bombay:

(i) Dr. M. D. Phalnikar, President

- (ii) Dr. M. L. Dhawale, Vice-President.
- (2) Representives of the Gujarat Homoeopathic Medical College, Savli, Baroda:
 - (i) Dr. Anil R. Bhatia

(ii) Dr. V. C. Patel

- (3) Representatives of the Principals of Homoeopathic Colleges in Vidarbha region:
 - (i) Dr. N. Z. Nandurkur, Yeotmal
 - (ii) Dr. R. G. Kawishwar, Khamgaon
- (4) Representative of the action committee of L.C.E.H. Doctors' Association, Bombay:

Dr. D. K. Sahane

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2. The Committee heard the oral evidence tendered by the following witnesses:—

- (i) Representatives of the Homoeopathic Post Graduate Association, Bombay.
- (ii) Representatives of the Gujarat Homoeopathic Medical College.
- (iii) Representative of the Principals of Homoeopathic Colleges in Vidarbha region.
- (iv) Representative of the action committee of the L.C.E.H. Doctors' Association, Bombay.
- A verbatim record of the evidence was kept.

3. The Chairman announced that in the afternoon Members would visit the Bombay Homoeopathic Medical College and Hospital run by the Homoeopathic Education Society, Bombay.

4. The Committee then adjourned at 1.10 P.M. to meet again at 10.00 A.M. on Friday, the 6th October, 1972.

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Twelfth Meeting

The Committee met at 10.00 A.M. on Friday, the 6th October, 1972 in the Congress Party Hall of the Council Hall, Bombay.

PRESENT

1. Shrimati Purabi Mukhopadhayaya-Chairman.

MEMBERS

Rajya Sabha

- 2. Shri Sasankasekhar Sanyal
- 3. Shri Bhupinder Singh
- 4. Shri N. G. Goray

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- 5. Shri Man Singh Varma
- 6. Shri K. C. Panda
- 7. Shri Sultan Singh
- 8. Shri N. P. Chaudhari
- 9. Shri T. G. Deshmukh
- 10. Shrimati Savita Behen

Lok Sabha

- 11. Shri Ziaur Rahman Ansari
- 12. Shri Bhaoosahaib Dhamankar
- 13. Shri Hiralal Doda
- 14. Shri Nageshwar Dwivedi
- 15. Shri Madhuryya Haldar

16. Shri Chiranjib Jha

17. Shri T. S. Lakshmanan

18. Shri Mallikarjun

19. Shri N. Sreekantan Nair

20. Dr. Laxminarayan Pandeya

21. Shri Janaki Ballav Patnaik

22. Shri M. Satyanarayan Rao

23. Shri Umed Singh Rathia

24. Shri K. Ramakrishna Reddy

25. Dr. Sankata Prasad

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26. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy

Secretariat

Shri M. K. Jain, Under Secretary.

WITNESSES

- (1) Shri Baburao Patel, Bombay.
- (2) Dr. N. H. Barlas, Honorary Adviser in Homoeopathy, Government of Maharashtra, Bombay.
- (3) Representatives of the Registered Homoeopathic Medical Practitioners Association, Hyderabad:

(i) Dr. S. Thirupamaiah, Honorary Secretary

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(ii) Dr. V. Radhakrishna Murti, Honorary Joint Secretary.

(4) Dr. N. Lakshminarayana, Hyderabad.

2. The Committee heard the oral evidence tendered by the following witnesses:-

(i) Shri Baburao Patel

(ii) Dr. N. H. Barla

(iii) Representatives of the Registered Homoeopathic Medical Practitioners' Association, Hyderabad.

(iv) Dr. N. Lakshminarayana.

A verbatim record of the evidence was kept.

3. The Committee then adjourned at 12.30 P.M. to meet again at 10.00 A.M. on Saturday, the 7th October, 1972.

XIII

Thirteenth Metting

The Committee met at 10.00 A.M. on Saturday, the 7th October, 1972, in the Congress Party Hall of the Council Hall, Bombay.

PRESENT

1. Shrimati Purabi Mukhopadhayaya-Chairman.

MEMBERS

Rajya Sabha

2. Shri Bhupinder Singh

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3. Shri N. G. Goray

4. Shri Sitaram Kesri

5. Shri Man Singh Varma

6. Shri K. C. Panda

7. Shri Sultan Singh

8. Shri N. P. Chaudhari

9. Shri T. G. Deshmukh

10. Shrimati Savita Behen

Lok Sabha 👉

11. Shri Ziaur Rahman Ansari

12. Shri Muhammed Khuda Buksh

13. Shri Bhaoosahaib Dhamankar

14. Shri Hiralal Doda

15. Shri Nageshwar Dwivedi

16. Shri Madhuryya Haldar

17. Shri Chiranjib Jha

18. Shri B. R. Kavade

19. Shri Mallikarjun

20. Shri Prasannbhai Mehta

21. Shri N. Sreekantan Nair 🕚

. 22. Shri Janaki Ballav Patnaik

23. Shri M. Satyanarayan Rao

1 24. Shri Umed Singh Rathia

25. Shri K. Ramakrishna Reddy

26. Shri Rana Bahadur, Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr Jugal Kishore, Adviser in Homoeopathy

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	Secretariat	• 1 C
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WITNESSES

(1) Dr. T. Seshachary, Hyderabad

(2) Dr. N. Krishna Rao, Hyderabad.

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(3) Representatives of (i) the Court of Examiners of Homoeopathic and Biochemic Systems of Medicine, Bombay; and (ii) the Board of Homoeopathic and Biochemic Systems of Medicine, Bombay:--

(ii) Dr. R. M. Chincholkar
(i) Dr. J. K. Sanyal
(iii) Dr. A. S. Dhole
(iv) Dr. M. C. Batra
(v) Dr. K. Prahlad
(vi) Shri S. B. Upadhye, Registrar.

(4) Dr. H. I. Jhala, Director of Medical Education, Government of Maharashtra, Bombay.

. 56 (5) Dr. R. K. Desai, Ahmedabad.

2. The Committee heard the oral evidence tendered by the following witnesses:--

- (i) Dr. T. Sheshachary
- (ii) Dr. N. Krishna Rao
- (iii) Representatives of the Court of Examiners of Homoeopathic and Biochemic Systems of Medicine and the Board of Homoeopathic and Biochemic Systems of Medicine, Bombay.
- (iv) Dr. H. I. Jhala, Director of Medical Education, Government of Maharashtra.
- (v) Dr. R. K. Desai.

The representatives of the Court of Examiners, the Board of Homoeopathic and Biochemic Systems of Medicine and Dr. H. I. Jhala, Director of Medical Education, Government of Maharashtra appeared before the Committee together.

• A verbatim record of the evidence was kept.

3. The Committee expressed its grateful thanks to the Speaker, Maharashtra Legislative Assembly and the officers of the Maharashtra Legislature Secretariat for the excellent arrangements made for holding the meetings of the Committee.

The Committee also thanked the Chief Minister, the Minister of Health and Officers of the Government of Maharashtra for the assistance given by them to the Committee in its deliberations.

4. The Committee then adjourned at 1.40 P.M. to meet again at 10.00 A.M. on Saturday, the 28th October, 1972, at Trivandrum.

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XIV -

Fourteenth Meeting

The Committee met at 10.00 A.M. on Saturday, the 28th October, 1972, in the auditorium of the Kanakakkunnu Palace, Trivandrum.

PRESENT

1. Shrimati Purabi Mukhopadhayay—Chairman

MEMBERS

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Rajya Sabha

2. Shri Sasankasekhar Sanyal

3: Shri Bhupinder Singh and the set

4. Shri N. G. Goray

5. Dr. Debiprasad Chattopadhyaya

6. Shri Man Singh Varma

7. Shri K. C. Panda

8. Shri Sultan Singh

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9. Shri T. G. Deshmukh

10. Shrimati Savita Behen

Lok Sabha

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11. Shri Ziaur Rahman Ansari

12. Shri Vidya Dhar Bajpai

13. Shri Muhammed Khuda Bukhsh

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14. Shri A. M. Chellachemi

15. Shri Bhaoosahaib Dhamankar

16, Shri Hiralal Doda

17. Shri Nageshwar Dwivedi

18. Shri B. R. Kavade

19. Shri N. Sreekantan Nair

20. Dr. Laxminarayan Pandeya

21. Shri M. Satyanarayan Rao

22, Dr. Sankata Prasad

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary.

WITNESSES

- 1. Representatives of the Institute of Homoeopaths, Kerala, Plamoodu, Trivandrum—
 - (1) Dr. R. Jayakumar, Chairman
 - (2) Dr. Ravi M. Nair, Joint Secretary
 - (3) Dr. K. J. Isaac, Member
 - (4) Dr. K. N. Gopinath Pillai, Member
- 2. Dr. K. G. Manur, Bangalore
- 3. Representative of the Mysore State Homoeopathic Committee, Bangalore—

Shri T. N. S. Somayaji, Registrar

4. Dr. A. R. A. Acharya, Bangalore

5. Dr. H. K. Srinivasa Rao, Bangalore

6. Dr. H. T. Rangaswami, Bangalore

7. Dr. M. V. R. Swamy, Bangalore

2. The Chairman welcomed the members to the meetings of Committee at Trivandrum.

3. The Committee thereafter heard the oral evidence tendered by the following witnesses:----

(i) Representatives of the Institute of Homoeopaths, Kerala.

- (ii) Dr. K. G. Manur
- (iii) Representative of the Mysore State Homoeopathic Committee,

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- (iv) Dr. A. R. A. Acharya
- (v) Dr. H. K. Srinivasa Rao
- (vi) Dr. H. T. Rangaswami
- (vii) Dr. M. V. R. Swamy

Dr. A. R. A. Acharya, Dr. H. K. Srinivasa Rao and Dr. H. T. Rangaswami appeared before the Committee together.

A verbatim record of the evidence was kept.

4. The Chairman announced that in the afternoon members would visit the Homoeo Medical College, Pappanamcode, Trivandrum.

5. The Committee then adjourned at 12.20 P.M. to meet again at 11.00 A.M. on Monday, the 30th October, 1972.

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Fifteenth Mceting

The Committee met at 11.00 A.M. on Monday, the 30th October, 1972, in the auditorium of the Kanakakkunnu Palace, Trivandrum.

PRESENT

1. Shrimati Purabi Mukhopadhayay-Chairman

MEMBERS

Rajya Sabha

2. Shri Sasankasekhar Sanyal

3. Shri Bhupinder Singh

4. Shri N. G. Goray

5. Shri Man Singh Varma

6. Shri Sultan Singh

7. Shri N. P. Chaudhari

8. Shri T. G. Deshmukh

Lok Sabha

9. Shri Ziaur Rahman Ansari

10. Shri Vidya Dhar Bajpai

11. Shri Muhammed Khuda Bukhsh

12. Shri Hiralal Doda

13. Shri Nageshwar Dwivedi

14. Shri Madhuryya Haldar

15. Shri Chiranjib Jha

16. Shri Popatlal M. Joshi

17. Shri B. R. Kavade

18. Shri Prasannbhai Mehta

19. Dr. Laxminarayan Pandeya

20. Shri M. Satyanarayan Rao

21. Shri K. Ramakrishna Reddy

22. Dr. Sankata Prasad

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary.

WITNESSES

(1) Representatives of the Royal College of Homoeopathic Physicians, Ernakulam-

(i) Dr. S. B. Pandiar, Principal

(ii) Dr. S. N. Pandiar, Vice-Principal

(2) Representative of the Homoeopathic Medical College Pappanamcode, Trivandrum

Dr. M. K. Sivaramana Nair, Principal.

- (3) Representative of the Dr. Gururaju Government Homoeopathic Medical College and Hospital, Gudivada (A.P.).
 - Dr. M. Kutumba Rao, Principal of the College and Superintendent of the Hospital.

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- (4) Representatives of the Students Union of the Athrasramam Homoeopathic Medical College, Sachivothamapuram, P.O. Kottayam:—
 - (i) Shri N. I. Babu, Chairman

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- (ii) Shri E. N. Gopalakrishnan, General Secretary, All Kerala Homoeo Medical Students Federation at the College.
- (5) Representatives of the Athrasaramam Homoeopathic Medical College, Sachivothamapuram, P.O. Kottayam--
 - (i) His Holiness Swami Athura Dasji, Founder of the College
 - (ii) Shri T. K. Gopalakrishna Panicker, Director, College Committee
 - (iii) Dr. R. S. Pandiyan, Principal.

2. In the absence of the Chairman, Shri N. G. Goray was voted to the Chair.

3. The Committee thereafter heard the oral evidence tendered by the following witnesses:-

- (i) Representatives of the Royal College of Homoeopathic Physicians, Ernakulam.
- (ii) Representative of the Homoeopathic Medical College, Trivandrum.
- (iii) Representative of the Dr. Gururaju Government Homoeopathic Medical College and Hospital, Gudivada.
 - (At this stage the Chairman of the Committee took the Chair).
- (iv) Representatives of the Students Union of the Athrasramam Homoeopathic Medical College, Kottayam.
- (v) Representatives of the Athrasaramam Homoeopathic Medical College and Hospital, Kottayam.

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4. The Chairman announced that in the afternoon members would visit the Trivandrum Hospital and Dispensary. Trivandrum.

5. The Committee then adjourned at 2.10 P.M. to meet again at 10.00 A.M. on Tuesday, the 31st October, 1972.

Sixteenth Meeting

The Committee met at 10.00 Å.M. on Tuesday, the 31st October, 1972, in the auditorium of the Kankakkunnu Palace, Trivandrum.

PRESENT

19 1. Shrimati Purabi Mukhopadhayay—Chairman

MEMBERS

Rajya Sabha

- 2. Shri Sasankasekhar Sanyal
 - 3. Shri Bhupinder Singh
 - 4. Shri N. G. Goray
 - 5. Shri Man Singh Varma
- 6. Shri Sultan Singh
 - 7. Shri N. P. Chaudhari
- 8. Shri T. G. Deshmukh

Lok Sabha

9. Shri Ziaur Rahman Ansari

10. Shri Vidya Dhar Bajpai

11. Shri Muhammed Khuda Bukhsh

- 12. Shri A. M. Chellachemi
- 13. Shri Hiralal Doda
- 14. Shri Nageshwar Dwivedi
- 15. Shri Madhuryya Haldar
- 16. Shri Chiranjib Jha
- 17. Shri Popatlal M. Joshi
- 18. Shri B. R. Kavade
- 19. Shri Prasannbhai Mehta
- 20. Shri N. Sreekantan Nair
- 21. Dr. Laxminarayan Pandeya
- 22. Shri K. Ramakrishna Reddy
- 23. Dr. Sankata Prasad

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary.

WITNESSES

(1) Representatives of the Registered Homoeopathic Medical Practitioners Association, Madras-

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- (i) Dr. G. Rajamannar, President
- (ii) Dr. G. I. Abraham, General Secretary.
- (2) Representative of Southern Railway Homoeopathic Medical Practitioners Association, Tiruchirapalli—

Dr. K. M. Chidambaram, President

- (3) Dr. V. Sundara Varadhan, Madras
- (4) Dr. C. A. Rajagopalachari, Madras
- (5) Dr. Kumari R. Bragam, Madras

2. The Committee heard the oral evidence tendered by the following witnesses:---

- (i) Representatives of the Registered Homoeopathic Medical Practitioners Association, Madras.
- (ii) Representative of the Southern Railway Homoeopathic Medical Practitioners Association, Tiruchirapalli.
- (iii) Dr. V. Sundara Varadhan
- (iv) Dr. C. A. Rajagopalachari
- (v) Dr. Kumari R. Bragam

The last three witnesses appeared before the Committee together.

A verbatim record of the evidence was kept.

3. The Committee then adjourned at 12.05 P.M. to meet again at 11.00 A.M. on Wednesday, the 1st November, 1972.

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XVII

Seventeenth Meeting

The Committee met at 11.00 A.M. on Wednesday, the 1st November, 1972, in the auditorium of the Kanakakkunnu Palace, Trivandrum.

PRESENT

1. Shrimati Purabi Mukhopadhyay-Chairman.

MEMBERS

Rajya Sabha

2. Shri Sasankasekhar Sanyal

3. Shri Bhupinder Singh

4. Shri Man Singh Varma

5. Shri Sultan Singh

· 6. Shri N. P. Chaudhari

7. Shri T. G. Deshmukh

Lok Sabha

8. Shri Ziaur Rahman Ansari

9. Shri Vidya Dhar Bajpai

10. Shri Muhammed Khuda Bukhsh

11. Shri A. M. Chellachemi

12. Shri Hiralal Doda

13. Shri Nageshwar Dwivedi

14. Shri Madhuryya Haldar

15. Shri Chiranjib Jha

16. Shri Ramachandran Kadannappalli

17. Shri B. R. Kavade

18. Shri Prasannbhai Mehta

19. Shri N. Sreekantan Nair

20. Dr. Laxminarayan Pandeya

21. Maulana Ishaque Sambhali

22. Shri K. Ramakrishna Reddy

23. Dr. Sankata Prasad

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

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Dr. Jugal Kishore, Adviser in Homoeopathy

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary

WITNESSES

- (1) Representatives of the All Kerala Homoeopathic Federation, Quilon—
 - (i) Dr. A. G. Nair, President
 - (ii) Dr. A. K. George, General Secretary

(iii) Dr. K. V. John, Secretary

- (iv) Dr. Philip Powlose, Publicity Officer
- (2) Dr. K. A. Joseph, Principal, Homoeopathic Medical College, Madurai.

- (3) Dr. K. T. Thomas, Pollachi
- (4) Dr. M. P. Parmeswaran, Assistant Director, State Institute of Languages, Kerala, Trivandrum.
- (5) Dr. K. Z. George, Assistant Director (Homoeopathy), Government of Kerala, Trivandrum.

2. The Committee heard the oral evidence tendered by the following witnesses:—

- (i) Representatives of the All Kerala Homoeopathic Federation, Quilon
- (ii) Dr. K. A. Joseph
- (iii) Dr. K. T. Thomas
- (iv) Dr. M. P. Parmeswaran
- (v) Dr. K. Z. George

Dr. K. A. Joseph and Dr. K. T. Thomas appeared before the Committee together.

A verbatim record of the evidence was kept.

3. The Committee thereafter considered its future programme of sittings and decided to hold its next series of sittings at Delhi from the 8th to the 12th January, 1973, to hear further oral evidence on the Bill.

Members were of opinion that in case a visit by the Committee to the State of Jammu and Kashmir in pursuance of its earlier decision, was not found possible, some meetings of the Committee might be held at Chandigarh for recording oral evidence. Some members again desired to hold some sittings at Bhopal. The Chairman of the Committee was authorised to request the Chairman, Rajya Sabha, for necessary permission in this regard.

4. The Committee decided to ask for further extension of time upto the last day of the Eighty-third Session of the Rajya Sabha for the presentation of its report and authorised the Chairman or in her absence Shri Sasankasekhar Sanyal or Shri Man Singh Varma to move the necessary motion in the House.

5. The Committee expressed its grateful thanks to the Speaker, Kerala Legislative Assembly and officers of the Kerala Legislature Secretariat for the excellent arrangements made for holding the meetings of the Committee and the stay of members of the Committee at Trivandrum.

The Committee also expressed its deep sense of gratitude to the Chief Minister and the Minister of Health of Kerala, the Secretary to the Government of Kerala, Health Department, the Assistant Director (Homoeopathy), Government of Kerala and other officers of Health Department of the Government of Kerala for the hospitality extended and the keen personal interest taken by them which contributed greatly not only to the successful completion of the Committee's work at Trivandrum but also made the stay of members and others connected with the Committee quite pleasant and comfortable.

6. The Committee then adjourned at 1.55 P.M. to meet again at 10.00 A.M. on Monday, the 8th January, 1973 at New Delhi.

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Eighteenth Meeting

The Committee met from 10.30 A.M. to 12.25 P.M. and again from 3.00 P.M. to 4.35 P.M. on Monday, the 8th January, 1973.

PRESENT

1. Shrimati Purabi Mukhopadhyay-Chairman.

MEMBERS

Rajya Sabha

2. Shri Sasankasekhar Sanyal

3. Shri N. G. Goray

4. Dr. K. Nagappa Alva

5. Shri Man Singh Varma

6. Shri Sultan Singh

7. Shri T. G. Deshmukh

8. Shrimati Savita Behen

Lok Sabha

9. Shri Ziaur Rahman Ansari

10. Shri Vidya Dhar Bajpai

11. Shri Muhammed Khuda Bukhsh

12. Shri A. M. Chellachemi

13. Shri Nageshwar Dwivedi

14. Shri Pampan Gowda

15. Shri Madhuryya Haldar

16. Shri Chiranjib Jha

17. Shri Ramachandran Kedannappalli

18. Shri B. R. Kavade

19. Shri Mallikarjun

20. Shri Prasannbhai Mehta

21. Dr. Laxminarayan Pandeya

22. Shri Janaki Ballav Patnaik

23. Shri S. L. Peje

24. Shri M. Satyanarayan Rao

25. Shri Umed Singh Rathia

26. Shri K. Ramakrishna Reddy

27. Dr. Sankata Prasad

28. Shri Awdhesh Chandra Singh

29. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRIES

Ministry of Law and Justice

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Shri P. L. Gupta, Additional Legislative Counsel

Shrimati V. S. Rama Devi, Deputy Legislative Counsel

Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy

Dr. D. P. Rastogi, Senior Research Officer

Secretariat

Shri M. S. Panigrahi, Deputy Secretary

Shri M. K. Jain, Under Secretary

WITNESSES

- 1. Representatives of the All India Homoeopathic Medical Association, New Delhi:--
 - (1) Dr. H. L. Chitkara, General Secretary
 - (2) Dr. Som Dev, Joint Secretary
 - (3) Dr. Kripal Singh Bakhshi, Treasurer

2. Dr. Vishwanath Aggarwal, Amritsar

3. Dr. Diwan Harish Chand, New Delhi

4. Dr. Mohan Singh, Patiala

2. The Committee heard the oral evidence tendered by the following witnesses:—

- (i) Representatives of the All India Homoeopathic Medical Association, New Delhi.
- (ii) Dr. Vishwanath Aggarwal
- (iii) Dr. Diwan Harish Chand
- (iv) Dr. Mohan Singh

A verbatim record of the evidence was kept.

3. The Committee thereafter considered its future programme of sittings and decided to meet on the 27th, 28th and 29th January, 1973 and if necessary, also on the 30th January, 1973, for clause-by-clause consideration of the Bill.

4. The Committee also decided that members desirous of giving notices of amendments to the Bill should send them so as to reach the Rajya Sabha Secretariat by the 24th January, 1973 and that the Ministry's amendments should also be sent by the same date.

5. The Committee then adjourned at 4.35 P.M. to meet again at 10.30 A.M. on Tuesday, the 9th January, 1973.

XIX

Nineteenth Meeting

The Committee met from 10.30 A.M. to 12.30 P.M. and again from 3.00 P.M. to 5.00 P.M. on Tuesday, the 9th January, 1973.

PRESENT

Rajya Sabha

1. Shrimati Purabi Mukhopadhyay---Chairman.

Members

Rajya Sabha

- 2. Shri Sasankasekhar Sanyal
- 3. Shri N. G. Goray
- 4. Dr. K. Nagappa Alva
- 5. Dr. Debiprasad Chattopadhyaya
- 6. Shri Sitaram Kesri
- 7. Shri Man Singh Varma
- 8. Shri T. K. Srinivasan
- 9. Shri K. C. Panda

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- 10. Shri Sultan Singh

11. Shri N. P. Chaudhari

12. Shrimati Savita Behen

Lok Sabha

- 13. Shri Ziaur Rahman Ansari
- 14. Shri Vidya Dhar Bajpai
- 15. Shri A. M. Chellachemi
- 16. Shri Hiralal Doda
- 17. Shri Nageshwar Dwivedi
- 18. Shri Pampan Gowda
- 19. Shri Madhuryya Haldar
- 20. Shri Chiranjib Jha
- 21. Shri Ramchandran Kadannappalli
- 22. Shri B. R. Kavade
- 23. Shri T. S. Lakshmanan
- 24. Shri Mallikarjun
- 25. Shri Prasannbhai Mehta
- 26. Shri N. Sreekantan Nair
- 27. Dr. Laxminarayan Pandeya
- 28. Shri Janki Ballav Patnaik
- 29. Shri S. L. Peje
- 30. Shri Umed Singh Rathia
- 31. Shri K. Ramakrishna Reddy
- 32. Dr. Sankata Prasad
- 33. Shri Awdhesh Chandra Singh

REPRESENTATIVES OF THE MINISTRIES

Ministry of Law and Justice

Shri P. L. Gupta, Additional Legislative Counsel Shrimati V. S. Rama Devi, Deputy Legislative Counsel

Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy Dr. D. P. Rastogi, Senior Research Officer

Secretariat

Shri M. S. Panigrahi, Deputy Secretary Shri M. K. Jain, Under Secretary

WITNESSES

1. Representatives of the All India Institute of Homoeopathy, Delhi.-

- (1) Dr. K. G. Saxena, President
- (2) Dr J. P. Srivastava, General Secretary
- (3) Dr. Shanti Dev
- (4) Dr. K. N. Mathur
- (5) Dr. N. N. Singh
- (6) Dr. T. R. Chadda
- (7) Dr. P. C. Mehta
- (8) Dr. C. M. Grover
- (9) Dr. K. K. Juneja
- (10) Dr. Davendra Mohan

2. Representative of the Tilakdhari Homoeopathic Medical College and Hospital, Jaunpur—

Dr. A. N. Singh, Principal

3. Dr. Jugal Kishore, Adviser in Homoeopathy, Ministry of Health and Family Planning, New Delhi

The Committee heard the oral evidence tendered by the following witnesses:-

- (i) Representatives of the All India Institute of Homoeopathy, Delhi.
- (ii) Representative of the Tilakdhari Homoeopathic Medical College and Hospital, Jaunpur.
- (iii) Dr. Jugal Kishore.

A verbatim record of the evidence was kept.

The Committee then adjourned at 5.00 P.M. to meet again at 10.30 A.M. on Wednesday, the 10th January, 1973.

XX

Twentieth Meeting

The Committee met from 10.45 A.M. to 12.45 P.M. and again from 3.00 P. M. to 4.55 P. M. on Wednesday, the 10th January, 1973.

PRESENT

1. Shrimati Purabi Mukhopadhyay—Chairman,

MEMBERS

Rajya Sabha

- 2. Shri Sasankasekhar Sanyal
- 3. Shri N. G. Goray
- 4. Dr. K. Nagappa Alva
- 5. Dr. Debiprasad Chattopadhyaya
- 6. Shri Sitaram Kesri
- 7. Shri Man Singh Verma
- 8. Shri K. C. Panda
- 9. Shrimati Savita Behen

Lok Sabha

10. Shri Ziaur Rahman Ansari

- 11. Shri Vidya Dhar Bajpai
- 12. Shri Hiralal Doda
- 13 Shri Nageshwar Dwivedi
- 14. Shri Pampan Gowda
- 15. Shri Madhuryya Haldar
- 16. Shri Chiranjib Jha
- 17. Shri B. R. Kavade
- 18. Shri T. S. Lakshmanan
- 19. Shri Mallikarjun
- 20. Shri Prasannbhai Mehta
- 21. Shri N. Sreekantan Nair
- 22. Dr. Laxminarayan Pandeya
- 23. Shri Janaki Ballav Patnaik
- 24. Shri S. L. Peje
- 25. Shri K. Ramakrishna Reddy
- 26. Dr. Sankata Prasad
- 27. Shri Awdesh Chandra Singh

REPRESENTATIVES OF THE MINISTRIES

Ministry of Law and Justice

Shri P. L. Gupta, Additional Legislative Counsel Smt. V. S. Rama Devi, Deputy Legislative Counsel

Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser, in Homoeopathy Dr. D. P. Rastogi, Senior Research Officer.

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary

Shri M. K. Jain, Under Secretary

WITNESSES

1. Representatives of the All Haryana Homeopathic Medical Association, Ambala Cantt:---

(1) Dr. Raja Ram Singh Arya, President.

(2) Dr. Jai Chand Jain, General Secretary.

- (3) Prof Onkar Nath Sahore
- (4) Dr. S. S. Chawla

2 Representative of the Bhartiya Homoeopathic Protection Society, Hardwar:

Dr B. Kaj, General Secretary.

3. Dr. Kashinath V. Chitte, Srinagar (J&K).

4. Dr. Sultan Alam M. Bihari, Purnea (Bihar).

5. Dr. C. P. Jhunjhunwala, Jaipur.

6. Dr. P. L. Banerji, Jaipur.

7. Representatives of the Rajasthan Homoeopathic Medical College and Hospital, Jaipur: —

Dr. Girendra Pal, Vice-Principal.

2. The Committee heard the oral evidence tendered by the following witnesses:--

- (i) Representatives of the All Haryana Homoeopathic Medical Association, Ambala Cantt.
- (ii) Representative of the Bhartiya Homoeopathic Protection Society, Hardwar.
- (iii) Dr. Kashinath V. Chitte
- (iv) Dr. Sultan Alam M. Bihari
- (v) Dr. C. P. Jhunjhunwala
- (vi) Dr. P. L. Banerji
- (vii) Representative of the Rajasthan Homoeopathic Medical College and Hospital, Jaipur.

A verbatim record of the evidence was kept.

3. Thereafter Dr. Jugal Kishore explained the salient features of the Bill and Members discussed the provisions of the Bill generally.

4. The Committee then adjourned at 4.55 P.M. to meet again at 10.30 A.M. on Thursday, the 11th January, 1973.

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XXI

Twenty First Meeting

The Committee met from 10.45 A. M. to 12.50 P. M. and again from 3.00 P. M. to 4.25 P. M. on Thursday, the 11th January, 1973.

PRESENT

1. Shrimati Purabi Mukhopadhayay—Chairman

MEMBERS

Rajya Sabha

2. Shri Sasankasekhar Sanyal

3. Dr. K. Nagappa Alva

4. Dr. Debiprasad Chattopadhyaya

5. Shri Man Singh Verma

6. Shri K. C. Panda

7. Shri Manubhai Shah

8. Shri Sultan Singh

9. Shri T. G. Deshmukh

Lok Sabha

10. Shri Vidya Dhar Bajpai

11. Shri Muhammed Khuda Bukhsh

12. Shri A. M. Chellachami

13. Shri Hiralal Doda

14. Shri Nageshwar Dwivedi

15. Shri Pampan Gowda

16. Shri Madhuryya Haldar

17. Shri Chiranjib Jha

18. Shri Popatlal M. Joshi

19. Shri T. S. Lakshmanan

20. Shri Prasannbhai Mehta

21 Shri N. Sreekantan Nair

22. Dr. Laxminarayan Pandeya

23. Shri Janaki Ballav Patnaik

24. Shri S. L. Peje

11

25, Shri K. Ramakrishna Reddy

26. Dr. Sankata Prasad

27. Shri Awdhesh Chandra Singh

REPRESENTATIVES OF THE MINISTRIES

Ministry of Law and Justice

Shri P. L. Gupta, Additional Legislative Counsel Shrimati V. S. Rama Devi, Deputy Legislative Counsel Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy Dr. D. P. Rastogi, Senior Research Officer

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary Shri M. K. Jain, Under Secretary

WITNESSES

1. Dr. Yudhvir Singh, Delhi

2. Dr. K. K. Bajpai, Registrar, U.P. Homoeopathic Medicine Board, Lucknow.

3. Representatives of the U. P. Homoeopathic Medical Association, Kanpur:---

(1) Dr. Jagdish Chandra Nigam

(2) Dr. Prakash Chandra Srivastava, Secretary

4. Dr. Radha Krishna, Secretary, AIHMA, Himachal Pradesh Branch, Sunder Nagar (H.P.).

5. Dr. B. N. Paul, Secretary, Aligarh Homeo Academy, Aligarh

6. Dr. S. S. Raza, Aligarh

7. Dr. B. B. Shukla, Chief Medical Officer, Moti Lal Nehru Homoeopathic Hospital, Lucknow.

8. Representatives of the Mysore Pradesh Registered Homoeopathic Medical Practitioners Association, Bangalore:—

(1) Dr. A. N. Ratnam, President

(2) Dr. R. Gopinath, Secretary

(3) Dr. R. Vittobai, Vice-President

9. Dr. M. Satyanarayana, Chairman, Homoeopathic Standards Board, Hyderabad.

2. The Committee heard the oral evidence tendered by the following witnesses:--

- (i) Dr. Yudhvir Singh
- (ii) Dr. K. K. Bajpai
- (iii) Representatives of the U. P. Homoeopathic Medical Association, Kanpur
- (iv) Dr. Radha Krishna
- (v) Dr. B. N. Paul
- (vi) Dr. S. S. Raza
- (vii) Dr. B. B. Shukla
 - (viii) Representatives of the Mysore Pradesh Registered Homoeopathic Medical Practitioners Association, Bangalore.
 - (ix) Dr. M. Satyanarayana

Dr. B. N. Paul and Dr S. S. Raza appeared before the Committee together.

A verbatim record of the evidence was kept.

3. The Committee then adjourned at 4.25 P.M. to meet again at 10.30 A.M. on Friday, the 12th January, 1973.

XXII

Twenty-second Meeting

The Committee met from 10.30 A.M. to 12.30 P.M. and again from 3.00 P.M. to 4.00 P.M. on Friday, the 12th January, 1973.

PRESENT

1. Shrimati Purabi Mukhopadhayay-Chairman.

MEMBERS

Rajya Sabha

L

2. Shri Sasankasekhar Sanyal

3. Dr. K. Nagappa Alva

- 5. Shri K. C. Panda
- 6. Shri Manubhai Shah
- 7. Shri Sultan Singh
- 8. Shri T. G. Deshmukh

Lok Sabha

- 9. Shri Ziaur Rahman Ansari
- 10. Shri Vidya Dhar Bajpai
- 11. Shri Muhammed Khuda Bukhsh
- 12. Shri A. M. Chellachemi
- 13. Shri Hiralal Doda
- 14. Shri Nageshwar Dwivedi
- 15. Shri Pampan Gowda
- 16. Shri Madhuryya Haldar
- 17. Shri Chiranjib Jha
- 18. Shri Popatlal M. Joshi
- 19. Shri Prasannbhai Mehta
- 20. Shri S. L. Peje
- 21. Dr. Sankata Prasad
- 22. Shri Awdhesh Chandra Singh.

REPRESENTATIVES OF THE MINISTRIES

Ministry of Law and Justice

Shri P. L. Gupta, Additional Legislative Counsel. Shrimati V. S. Rama Devi, Deputy Legislative Counsel.

Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy. Dr. D. P. Rastogi, Senior Research Officer.

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary. Shri M. K. Jain, Under Secretary.

WITNESSES

- 1. Dr. S. K. Zutshi, New Delhi
- 2. Dr. S. S. Sharma, Principal, the Chhatarpur Homoeopathic Medical College and Hospital, Chhatarpur (M.P.).
- 3. Dr. K. B. Lal, Gwalior

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- 4. Dr. D. K. Sarkar, Agra
- 5. Dr. P. Pandey, Meerut
- 6. Dr. Sat Prakash, Chandigarh.
- 2. The Committee heard the oral evidence tendered by Dr. S. K. Zutshi.
 - A verbatim record of the evidence was kept.

3. At this stage, Shri T. G. Deshmukh sought, with the permission of the Chair, some clarifications from the representative of the Ministry in respect of the evidence tendered on the 9th January, 1973, by a witness, namely, Dr. K. G. Saxena, President, All India Institute of Homoeopathy, Delhi, with regard to Homoeopathic Colleges in Vidarbha. 4. The Committee thereafter heard the oral evidence tendered by the following witnesses:—

- (i) Dr. S. S. Sharma
- (ii) Dr. K. B. Lal
- (iii) Dr. D. K. Sarkar
- (iv) Dr. P. Pandey
- (v) Dr. Sat Prakash
- A verbatim record of the evidence was kept.

5. The Committee then adjourned at 4.00 P.M. to meet again at 10.00 A.M. on Saturday, the 27th January, 1973.

XXIII

Twenty-third Meeting

The Committee met from 10.00 A.M. to 1.00 P.M. and again from 3.00 P.M. to 5.05 P.M. on Saturday, the 27th January, 1973.

PRESENT

1. Shrimati Purabi Mukhopadhayay—Chairman.

MEMBERS

Rajya Sabha

- 2. Shri Sasankasekhar Sanyal
- 3. Shri Bhupinder Singh
- 4. Shri N. G. Goray
- 5. Dr. K. Nagappa Alva
- 6. Dr. Debiprasad Chattopadhyaya
- 7. Shri Sitaram Kesri
- 8. Shri Man Singh Varma
- 9. Shri T. K. Srinivasan
- 10. Shri K. C. Panda
- 11. Shri Manubhai Shah
- 12. Shri Sultan Singh
- 13. Shrimati Savita Behen

Lok Sabha

- 14. Shri Ziaur Rahman Ansari
- 15. Shri Vidya Dhar Bajpai.
- 16. Shri Muhammed Khuda Bukhsh
- 17. Shri Bhaoosahaib Dhumankar
- 18. Shri Hiralal Doda
- 19. Shri Nageshwar Dwivedi
- 20. Shri Pampan Gowda
- 21. Shri Madhuryya Haldar
- 22. Shri B. R. Kavade
- 23. Shri T. S. Lakshmanan
- 24. Shri Mallikarjun
- 25. Shri Prasannbhai Mehta
- 26. Dr. Laxminarayan Pandeya
- 27. Shri Janaki Ballav Patnaik
- 28. Maulana Ishaque Sambhali
- 29. Shri M. Satyanarayan Rag

30. Shri Umed Singh Rathia

31. Shri K. Ramakrishna Reddy

32. Dr. Sankata Prasad

33. Shri Awdhesh Chandra Singh

34. Shri Ram Deo Singh

35. Shri A. K. Kisku

REPRESENTATIVES OF THE MINISTRIES

Ministry of Law and Justice

Shri P. L. Gupta, Additional Legislative Counsel.

Shrimati V. S. Rama Devi, Deputy Legislative Counsel.

Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy.

Shri P. V. Hariharsankaran, Deputy Secretary.

Dr. D. P. Rastogi, Senior Research Officer.

Secretariat

Shri M. S. Panigrahi, Deputy Secretary. Shri M. K. Jain, Under Secretary.

2. In the absence of the Chairman Shri N. G. Goray was voted to the Chair.

3. The Committee took up clause-by-clause consideration of the Bill.

Clause 2

The following amendment was accepted:—

Page 2, for lines 5-6, substitute the following:-

'(d) "Homoeopathy" means the Homoeopathic system of medicine and include the use of Biochemic remedies.'

The Committee also considered the following amendment moved in respect of the clause:—

Page 3, lines 8-9, substitute the following:-

'(e) "medical institution" means any institution in India or other country recognised in this Act which grants degrees, diplomas and licences in Homoeopathy.'

After some discussion further consideration of the amendment was held over to enable Government to study the implication thereof and let the Committee have their considered views in the matter.

Clause 3

The following amendments were accepted:—

(i) Page 2, after line 35, add the following:-

"Provided that till the minimum number of University faculties are seven the deficiency will be made good by nomination by the Central Government from amongst the teaching staff of the recognised Homoeopathic institutions in India".

- (ii) Page 2, line 36, for the words "thirty per cent" substitute "forty per cent".
- (iii) Page 2, line 40, for the words "allied medical" substitute "related".

The Committee decided that the term of the President and Vice-President to be nominated at the time of the first constitution of the Central Council should be for not more than three years instead of their holding office for an unspecified period during the pleasure of the Central Government and asked the Legislative Counsel to submit a revised draft of the proviso to sub-clause (2) for its consideration.

Clause 4

The clause was adopted without any change.

Clause 5

The clause was adopted without any change.

Clause 6

The clause was adopted without any change.

Clause 7

The clause was adopted without any change.

Clause 8

The clause was adopted without any change.

Clause 9

The clause was adopted without any change.

Clause 10

The clause was adopted subject to the substitution of the word "twice" for "once" in line 21, page 4.

Clause 11

The Committee accepted in principle that Registrar should not be entrusted with the duties of the Treasurer of the Central Council and desired that a revised draft may be prepared by the Legislative Counsel to implement the decision, for its consideration.

Clause 12

The clause was adopted without any change.

Clause 13

The clause was adopted without any change.

Clause 14

The clause was adopted without any change.

(At this stage the Chairman took the Chair).

Clause 15

The Committee considered an amendment to the effect that the right of a registered Homoeopathic practitioner to practise Homoeopathy anywhere in the country should be protected. After some discussion the Committee decided that there should be two Central Registers, one for the registration of the institutionally qualified practitioners and the second one for those practitioners who were not so qualified so that practitioners registered in the latter register could, subject to the approval of a State Government, practise Homoeopathy in that State. The Legislative Counsel was asked to prepare a draft amendment to that effect for consideration by the Committee.

Clause 16

The clause was adopted without any change.

Clauses 17, 18 and 19

After some discussion further consideration of the clauses was held over.

3. The Committee then adjourned at 5.05 P.M. to meet again at 9.00 A.M. on Sunday, the 28th January, 1973.

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XXIV

Twenty-fourth Meeting

The Committee met at 9.30 A.M. on Sunday, the 28th January, 1973.

PRESENT

1. Shrimati Purabi Mukhopadhayay-Chairman.

MEMBERS

Rajya Sabha

2. Shri Bhupinder Singh

3. Shri N. G. Goray

4. Dr. K. Nagappa Alva

5. Dr. Debiprasad Chattopadhyaya

6. Shri Sitaram Kesri

7. Shri Man Singh Varma

8. Shri K. C. Panda

9. Shri Manubhai Shah

10. Shri Sultan Singh.

Lok Sabha

11. Shri Ziar Rahman Ansari

12. Shri Muhammed Khuda Bukhsh

13. Shri A. M. Chellachami

14. Shri Bhaoosahaib Dhamankar

15. Shri Hiralal Doda

16. Shri Nageshwar Dwivedi

17. Shri Pampan Gowda

18. Shri T. S. Lakshmanan

19. Shri Prasannbhai Mehta

20. Dr. Laxminarayan Pandeya

21. Shri Janaki Ballav Patnaik

22. Maulana Ishaque Sambhali

23. Shri Umed Singh Rathia

24. Dr. Sankata Prasad

25. Shri Awdhesh Chandra Singh -

26. Shri Ram Deo Singh

REPRESENTATIVES OF THE MINISTRIES

Ministry of Law and Justice

Shri P. L. Gupta, Additional Legislative Counsel.

Shrimati V. S. Rama Devi, Deputy Legislative Counsel.

Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy.

Shri P. V. Hariharsankaran, Deputy Secretary.

Dr. D. P. Rastogi Senior Research Officer.

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary.

Shri M. K. Jain, Under Secretary.

2. The Committee resumed clause-by-clause consideration of the Bill.

Clause 2

The Minister of State in the Ministry of Health and Family Planning informed the Members that he has given due consideration to the views expressed by Members with regard to the Homoeopathic Practitioners having certain foreign degrees/diplomas and he feels that some provision in this regard is required to be made in the Bill. On an assurance by him that suitable amendment will be put forward for Committee's consideration further consideration of the matter was held over.

Clause 3

The Committee reconsidered their earlier decision with regard to the term of office of the President and Vice-President to be nominated on the constitution of the first Central Council and agreed that no change in the existing proviso to sub-clause (2) of the clause should be made.

Clauses 17, 18 and 19

The clauses were further considered and were adopted without any change.

Clause 20

The clause was adopted without any change.

Clauses 21 to 32

The clauses were adopted subject to changes being made by the Legislative Counsel, consequent to the Committee's earlier decision with regard to the maintenance of two Central Registers of Homoeopathic Practitioners.

Clause 33

The clause was adopted subject to provision being made in paragraph (h) for prescribing the qualifications of the Inspectors and Visitors to be appointed under the Act.

The Legislative Counsel was authorised to make necessary changes in the paragraph.

The First Schedule

The Schedule was adopted without any change.

The Second Schedule

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The following amendments were accepted:-

(i) Page 13, under the heading "Andhra Pradesh", after item 2, insert the following:-

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I	2		3.		4

"3. Board of Indian Medi- Diploma in Homoco- D.H.M.S. From October, 1971. cine, Hyderabad. pathic Medicine and Surgery

(ii) Page 13, after the heading "Maharashtra" and the items relating thereto, insert the following:---

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	1			Č į.

"ORISSA

9A. Orissa Board of Diploma in Homoco- D.H.M.S. From 1972 onwards." Homocopathic Medicine, pathic Medicine and Surgery

The Schedule, as amended, was adopted.

Clause 1 and The Enacting Formula

The following amendments were accepted:-

(i) Page 1, line 1, for the words "Twenty-second" substitute "Twenty-fourth".

(ii) Page 1, line 6, for the figures "1971" substitute "1973".

The clause and the Enacting Formula, as amended, were adopted.

3. The Committee then adjourned at 10.40 A.M. to meet again at 2.00 P.M. on Monday, the 29th January, 1973.

XXV

Twenty-fifth Meeting

The Committee met at 1.30 P.M. on Monday, the 29th January, 1973. PRESENT

1. Shrimati Purabi Mukhopadhyay—Chairman.

MEMBERS

Rajya Sabha

- 2. Shri Bhupinder Singh
- 3. Shri N. G. Goray
- 4. Dr. K. Nagappa Alva
- 5. Dr. Debiprasad Chattopadhyaya
- 6. Shri Man Singh Varma
- 7. Shri K. C. Panda
- 8. Shri Manubhai Shah
- 9. Shri Sultan Singh

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- 10. Shri N. P. Chaudhari
- 11. Shri T. G. Deshmukh
- 12. Shrimati Savita Behen

Lok Sabha

- 13. Shri Ziaur Rahman Ansari
- 14. Shri Vidya Dhar Bajpai
- 15. Shri Kushok Bakula
- 16. Shri Muhammed Khuda Bukhsh
- 17. Shri A. M. Chellachami
- 18. Shri Bhaoosahaib Dhamankar
- 19. Shri Hiralal Doda
- 20. Shri Nageshwar Dwivedi
- 21. Shri Pampan Gowda
- 22. Shri Madhuryya Haldar
- 23. Shri Chiranjib Jha
- 24. Shri B. R. Kavade
- 25. Shri N. Sreekantan Nair
- 26. Shri Janaki Ballav Patnaik
- 27. Maulana Ishaque Sambhali
- 28. Shri M. Satyanarayan Rao
- 29. Shri K. Ramakrishna Reddy

30. Dr. Sankata Prasad

31. Shri Awdhesh Chandra Singh

32. Shri Ram Deo Singh

REPRESENTATIVE OF THE MINISTRIES

Ministry of Law and Justice

Shri P. L. Gupta, Additional Legislative Counsel

Shrimati V. S. Rama Devi, Deputy Legislative Counsel

Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy

Shri P. V. Hariharsankaran, Deputy Secretary

Dr. D. P. Rastogi, Senior Research Officer

Secretariat

Shri M. S. Panigrahi, Deputy Secretary Shri M. K. Jain, Under Sectary

2. The Committee resumed clause-by-clause consideration of the Bill.

I. The Committee first took up for consideration the clauses wherein amendments were necessitated consequent to its earlier decision for maintenance of two Central Registers.

Clause 21

The clause was adopted subject to the substitution of the following lines 32-35, page 8:-

"as the Central Register of Homoeopathy which shall contain-

- (a) in Part I, the names of all persons who are for the time being enrolled on any of the recognised medical qualifications;
- (b) in Part II, the names of all persons, other than those included in Part I, who are for the time being enrolled on any State Register of Homoeopathy."

Clause 26

The following amendments were accepted:--

- (i) Page 9 line 31, renumber clause "26" as "26 (1)";
- (ii) Page 9, line 34, after the words "being borne on", insert "Part I of";

(iii) Page 9, after line 38, add the following:-

"(2) Subject to the provisions of sub-section (3) of section 15, a person whose name is for the time being borne on Part II of the Central Register of Homoeopathy, may be entitled to practise Homoeopathy in any State, other than the State where he is enrolled on the State Register of Homoeopathy, with the previous approval of the Government of the State where he intends to practise."

The clause, as amended, was adopted.

(at this stage Shri N. G. Goray took the Chair)

II. The Committee, thereafter, took up for consideration the held over clauses of the Bill.

Clause 2

The Minister of State in the Ministry of Health and Family Planning informed Members that with regard to recognition of medical qualifications granted by medical institutions outside India, his Ministry was preparing a Third Schedule, which would contain the particulars of foreign qualifications to be recognised and would be appended to the Bill. The clause was, thereafter, adopted as already amended.

Clause 3

The Committee accepted the following revised draft of an amendment submitted by the Legislative Counsel in respect of an amendment ealier accepted by it:—

Page 2, after line 35, add the following:-

"Provided that until any such faculty or department of Homoeopathy is started in at least seven Universities, the Central Government may nominate such number of members not exceeding seven as may be determined by the Central Government from amongst the teaching staff of medical institutions within India, so however, that the total number of members so nominated and elected under this clause shall in no case exceed seven."

The clause, as amended, was adopted.

Clause 7

The Committee considered the term of office of the President and Vice-President of the Central Council and decided that there should be a bar on persons continuing in either of the aforesaid offices for more than two consecutive terms. The Committee authorised the Legislative Counsel to make necessary changes in the clause to give effect to its decision. Subject to this, the clause was adopted.

Clause 11

The Committee authorised the Legislative Counsel to make necessary changes in the clause necessitated by its earlier decision not to entrust the Registrar with the duties of the Treasurer of the Central Council. Subject to this the clause was adopted.

Clause 15

Consequent upon the amendments accepted in respect of clauses 21 and 26 to give effect to its earlier decision for the maintenance of two Central Registers, the clause was adopted without any change.

3. The Committee authorised the Legislative Counsel to carry out changes of minor and consequential nature, if necessary, in the Bill.

4. The Committee authorised the Chairman to fix its next meeting sometime during the ensuing session of the Rajya Sabha for consideration and adoption of the draft report and the Bill as amended.

5. The Committee then adjourned at 3.10 P.M.

Suggestions of Dr. K. Nagappa Alva, M. P. for the proper development of the Homoeopathy system of Medicine

1. A National Institute of Homoeopathy should be established in Delhi at the earliest possible time.

2. There should be a Faculty of Homoeopathy in an University of each State.

3. Each State should start at least one Government College with all the prescribed Departments and Hospital facilities, for having Homoeopathy Medical Education of standards.

4. Soon after the Central Homoeopathy Council is formed, an Expert Body should be set up to find out the real position of the Colleges which have been recognised by the State Governments and come to conclusions as to which of the colleges are much below par and which of the colleges deserve to be upgraded etc. and then give proper timely advice and guideance to the State Governments. 5. It is also necessary that certain specific guidelines should be given to the State Governments in the matter of establishing Homoeopathy Directorates, formation of State Boards of Homoeopathy and maintaining uniformity in standards, syllabus, Text Books, Pharmacopoea etc. keeping in line with the purpose and objectives of this Central Legislation.

XXVI

Twenty-sixth Meeting

The Committee met at 3.00 P.M. on Thursday, the 8th March, 1973.

PRESENT

1. Shrimati Purabi Mukhopadhyay-Chairman.

Members

Rajya Sabha

- 2. Shri Sasankasekhar Sanyal
- 3. Shri Bhupinder Singh
- 4. Shri N. G. Goray
- 5. Shri Sitaram Kesri
- 6. Shri Man Singh Varma
- 7. Shri K. C. Panda
- 8. Shri Manubhai Shah

Lok Sabha

- 9. Shri Ziaur Rahman Ansari
- 10. Shri Muhammed Khuda Bukhsh
- 11. Shri Bhaoosahaib Dhamankar
- 12. Shri Nageshwar Dwivedi
- 13. Shri Madhuryya Haldar
- 14. Maulana Ishaque Sambhali
- 15. Shri K. Ramakrishna Reddy
- 16. Dr. Sankata Prasad
- 17. Shri Rana Bahadur Singh
- 18. Shri A. K. Kisku

REPRESENTATIVES OF THE MINISTRIES Ministry of Law and Justice

3

Shri P. L. Gupta, Additional Legislative Counsel

Shrimati V. S. Rama Devi, Deputy Legislative Counsel

Ministry of Health and Family Planning

Dr. Jugal Kishore, Advisor in Homoeopathy

Shri P. V. Hariharsankaran, Deputy Secretary

Shri D. P. Rastogi, Senior Research Officer

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary

Shri N. K. Jain, Under Secretary.

2. The Committee considered the draft Report and adopted the same.

3. The Committee also adopted the Bill as amended by it with the following change:---

Page 14. item 11, in the entries relating to the State of Orissa, in column 4 for '1972', substitute '1973'.

4. The Committee decided that the whole of the evidence tendered before it may be laid on the Table in both the Houses.

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5. The Chairman announced that the Report would be presented to the Rajya Sabha on the 26th March, 1973 and that the evidence would be laid on the Table the same day.

6. The Committee decided that the Minutes of Dissent, if any, may be sent so as to reach the Rajya Sabha Secretariat by the 15th March, 1973.

7. The Committee authorised the Chairman or in her absence Shri N. G. Goray or Shri Man Singh Varma to present the Report on its behalf and to lay the evidence on the Table of the Rajya Sabha after the presentation of the Report.

8. The Committee authorised Dr. Sankata Prasad or in his absence Shri K. Ramakrishna Reddy to lay the Report of the Committee and the evidence on the Table of the Lok Sabha on the 26th March, 1973.

9. The Chairman thanked the Members of the Committee for the keen interest taken by them in the work of the Committee and the cooperation extended to her by them. The Chairman also expressed the Committee's appreciation of the good work done by Dr. Jugal Kishore, Adviser in Homoeopathy and other officers of the Ministry of Health and Family Flanning, the officers of the Ministry of law and Justice and the officers and staff of the Rajya Sabha Secretariat.

The Members also thanked the Chairman for the able manner in which she conducted the deliberations of the Committee and for the guidance given by her to the Members at every stage.

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10. The Committee then adjourned at 4.00 P.M.

PARLIAMENT OF INDIA

RAJYA SABHA

JOINT COMMITTEE on THE HOMOEOPATHY CENTRAL COUNCIL BILL, 1971

EVIDENCE

(Volume I)



RAJYA SABHA SECRETARIAT NEW DELHI FEBRUARY, 1973

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LIST OF MEMBERS OF THE JOINT COMMITTEE ON THE HOMOEOPATHY CENTRAL COUNCIL BILL, 1971.

Rajya Sabha

1. Shrimati Purabi Mukhopadhayay-Chairman.

2. Shri Sasankasekhar Sanyal

3. Shri Bhupinder Singh

4. Shri N. G. Goray

5. Dr. K. Nagappa Alva

6. Dr. Debiprasad Chattopadhyaya

7. Shri Sitaram Kesri

8. Shri Man Singh Varma

9. Shri T. K. Srinivasan

10. Shri K. C. Panda

11. Shri Manubhai Shah

12. Shri Sultan Singh

13. Shri N. P. Chaudhari

14. Sh Yr. G. Deshmukh

15. Shrimati Savita Behen

Lok Sabha

16. Shri Ziaur Rahman Ansari

17. Shri Vidya Dhar Bajpai,

18. Shri Kushok Bakula

19. Shri Muhammed Khuda Bukhsh

20. Shri A. M. Chellachemi

21. Shri Bhaoosahaib Dhamankar

22. Shri Hiralal Doda

23. Shri Nageshwar Dwivedi

24. Shri Pampan Gowda

25. Shri Madhuryya Haldar

26. Shri Chiranjib Jha

27. Shri Popatlal M. Joshi

28. Shri Ramachandran Kadannappalli

29. Shri B. R. Kavade

30. Shri T. S. Lakshmanan

31. Shri Mallikarjun

32. Shri Prasannbhai Mehta

33. Shri N. Sreekantan Nair

34. Dr. Laxminarayan Pandeya

35. Shri Janaki Ballav Patnaik

36. Shri S. L. Peje

37. Maulana Ishaque Sambhali,

38. Shri M. Satyanarayan Rao.

39. Shri Umed Singh Rathia

40. Shri K. Ramakrishna Reddy.

41. Dr. Sankata Prasad

42. Shri Awdhesh Chandra Singh

43. Shri Ram Deo Singh

44. Shri Rana Bahadur Singh

45. Shri A. K. Kisku

REPRESENTATIVES OF THE MINISTRIES

ii

Ministry of Law and Justice

Shri P. L. Gupta, Additional Legislative Counsel,

Shrimati V. S. Rama Devi, Deputy Legislative Counsel.

Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy.

Shri P. V. Hariharsankaran, Deputy Secretary.

Dr. O. P. Rastogi, Senior Research Officer.

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary.

Shri M. K. Jain, Under Secretary,

LIST OF WITNESSES WHO GAVE ORAL EVIDENCE BEFORE THE JOINT COMMITTEE

-

erial No.	Name of witness	Date of hearing
I.	Representatives of the All India Homceopathic Medical Association, West Bengal Branch, Calcutta :	25-9-197
(i) Dr. Asoke Paul, General Secretary.	
(i	i) Dr. Bhola Nath Mukherjee, Organising Secretary, A.I.H.M. A., Delhi.	
(i	ii) Dr. Ananga Nath Chakrabarti, Member, General Council, A.I.H.M.A., De	lhi.
2.	Representives of the West Bengal State Homoeopathic Federation, Calcutta :	25-8-
(i) Dr. J. N. Kanjilal, Vice President, All India Institute of Hemceophathy, West Bengal	
(i	i) Dr. S. K. Adhicari, Vice-President	
(iii) Dr. S. N. Chatterjee, General Secretary	
(i	v) Dr. R. D. Mallick, Joint Secretary.	
з.	Representatives of the Herrece Medical Club, West Bargal, Calcutta :	25-9-19
(i	i) Dr. Nitai Chandra Chakravarty, President	
(ii) Dr. Nirmal Kumar Sarkar, Vice-President	
4.	Representative of the West Bingal D.M.S. Association, Calcutta: Dr. N. P. Roy, Vice-President	25-9-19
5.	Shri A. K. Majumdar, Secretary to the Government of West Bengal, Department of Health and Family Planning, Calcutta.	25-9 -19
6.	Representatives of the all India Homoeopathic Medical Association, Singh- bhum Branch, Jamshedpur :	25-9-19
	(i) Dr. T. S. Saggu, General Secretary	
	(ii) Dr. R. P. Singh, Assistant Secretary	
7.	Representative of the Singhbhum Homecorathic Medical Collegeand Hospital, Jamshedpur:	25-9-197
	Dr. S. B. Kar, Principal	
8.	Representatives of the Calcutta Homoeopathic Medical College and Hospital, Calcutta :	26-9 -19;
	(i) Dr. B. K. Bose, Secretary, Calcutta Hemceepathic Medical Society.	
	(ii) Dr. R. Ghoshal, Principal	
	(iii) Dr. P. C. Paul, Vice-Principal	
	(iv) Dr. S. C. Ghosh, Administrative Officer	
9.	Representatives of the All Orissa Homoeopathic Medical Association, Puri :	26-9 -19
	(i) Dr. Bhagwanprasad Das, General Secretary	
	(ii) Dr. Devraj Rautaray, Member, Executive Committee.	

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Seri No.		Date of heating
10.	Dr. Satchidananda Das, Puri	26-9 -1972
II.	Dr. Bhupen Bijali, MLA, West Bengal, Bata Nagar	. 26-9-1972
12.	Dr. Bibhas Roy, Calcutta	27-9-1972
13.	Representatives of the D.N. De Homocopathic Medical College and Hospit Calcutta :	
	 (i) Dr. S. K. Nayak, Principal (ii) Dr. Samir Banerjee, Vice-Principal (iii) Dr. J. N. Kanjilal, Head of the Department, Materia Medica 	
14.	Representative of the Mahesh Bhattacharyya Homoeopathic Medical College and Hospital, Calcutta:	27-9-19 72
	Dr. J. N. Sircar, Principal	
	Dr. S. D. Sircar, Calcutta	27-9-1 972
16.	Dr. B. K. Sarkar, Calcutta	28-9-1972
17.	Representative of the Patna Homo sopathic Medical College, Patna .	· 28-9- 1972
	Dr. S. C. Ray, Principal.	•
18.	Dr. Kameshwar Prasad, Patna	· 28-9-1972
19.	Dr. S. Seal, Calcutta	· 28-9-1972
20.	Dr. B. N. Chakravarty, Adviser in Homoeopathy, Government of West Bengal, Calcutta	•
21.	Representatives of the Council of Homocopathic System of Medicane, Wo Bengal, Calcutta :	rst 28-9-1972
	(i) Dr. S. K. Nayak	
	 (ii) Dr. Dharam Das Banerjee (iii) Dr. N. K. Chakrabarty (iv) Dr. K. Pal (v) Shri M. K. Ganguli, Registerar 	,
22.	Dr. Anii Chandra Debnath, Tripura.	_
23.	Mir Asraf Hossain, Berhampore P. O., District Murshidabad.	²⁸⁻⁹⁻¹⁹⁷²
24.	Representative of	28-9-1972
	 (i) the A;sam H >moco Research and Public H:alth Assocatcistion, Dergoat (ii) the Board of Homocopathic System of Medicine, Assam, Shillong 	29-9-1972 n.
	Dr. D. Bora	
2,5.	Representative of the State Board of Homocopathic Medicine, Bihar, Pat	na 29-9-1972
	Shri K. K. Saran, President	
26.	Representative of the Government Homoeopathic Medical College and Hospital, Bhubaneswar	nd 29-9-1972
	Dr. Narayan Rao, Principal and Superintendent of the Hospital.	

Seri No.	al Name of witness	.Date of hearing
27.	Representative of the Bombay Hemceopathic Medical College run by the Homoeopathic Education Society, Bombay :	• 3-10-1 97
	(i) Dr. Edel Behram, Founder Principal	
	(ii) Dr. C. C Desai, Officiating Principal	
	(iii) Dr. M. C. Batra, Honorary Secretary, Honoreopathic Education Society	
z8.	Representatives of the Homoco Mission. Ahemdabad : 🚽 🖕 🖕	:3-10-197
	(i) Dr. J. M. Gor	
	(ii) Dr. K. R. Thakur	
29.	Representatives of the Homosopathic & Biochemic Medical College Amravati :	3-10-197
	(i) Dr. A. S. Dhole, Principal	
	(ii) Dr. Dhrmale, Vice-Principal	٠
	(iii) Dr. Bhaleras, Principal of the Wardha Homocopathic Modical College	:
	(iv) Shri Ghoghre	
	(v) Dr. H. B. Kara Patei	
i 0.	Dr. Y. Satyanaravana Rao. Government Homocopathic Diagramacy, Malgonda (A.P.).	3-10-197
31 .	Shri K. S. Ramachandra, Assistant Lecturer, N. G. College, Nalgonda (A.P.)	3-10-197
32.	Representatives of the All India Homoeopathic Medical Association, Maha- rashtra Branch, Bombay :	4-10-197
	(i) Dr. T. P. Kohli, Honorary Secretary	
	(ji) Dr. A. V. Amonkar	
	(iii) Dr. R. D. Dani	
	(iv) H. B. Kara Patel	
	(v) Dr. R. K. Phatak	
	(vi) Dr. D. S. Umrootkar	
	(vii) Dr. (Smt.) Kusum D. Umrootkar.	
33.	Representatives of the Homocopathic Medical College, Poong :	4-10-197
	(i) Dr. Y. V. Pathak, Principal	
	(ii) Dr. S. A. Katekari, Vice-Principal	
34.	Representatives of the L.C.E.H. Doctors' Association, Bernbay	4-10-197
-	(i) Dr. Behram Badhaniwala. President	
	(ii) Dr. Prakash Vakil. Honorary Secretary	
	(iii) Dr. K. R. Gala, Honorary Assistant Secretary	

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Serial No.	Name of witness	Date of hearing
35.	Representative of the Nagpur College of Hemoeopathy and Biochemistry :	4-10-1972
	Dr. (Smt.) Vimal Wazalwar	· 4
36.	Dr. K. Prahlad, Bombay.	4-10-1972
37.	Dr. S. R. Wadia, Bombay	4-10-1972
38.	Dr. P. Sankaran, Bombay	4-10-1972
39.	Representatives of the Homocopathic Post Graduate Association, Bembay :	5-10-1972
	 (i) Dr. M.D. Phalnikar President (ii) Dr. M. L. Dhawale, Vice-President 	
40.	Representative of the Gujarat Homocopathic Medical College, Savli, Barcda :	5-10-1972
	(i) Dr. Anil R. Bhatia(ii) Dr. V. C. Patel	
41	Representatives of the Principals of Homocopathic Colleges in Vidarbha region :	5-10-1972
	(i) Dr N. Z. Nandurkar, Yootmal (ii) Dr. R. G. Kawishwar, Khamgaon	
42 .	Representative of the action committee of L.C.E.H. Dectors' Association Bombay :	5-10-1972 j
	Dr. D. K. Sahane	
43-	Shri Baburao Patel, Bombay.	6-10-1972
4 4-	Dr. N. H. Barlas, Honorary Adviser in Homoecpathy, Government of Maharashtra, Bombay.	6-10-1972
45.	Representatives of the Registered Homeeopathic Medical Paractiticners Association, Hyderabad :	6-10-1972
	 (i) Dr. S. Thirupamaiah, Honorary Secretary (ii) Dr. V. Radhakrishna Murti, Honorary Joint Scretary. 	
46.	Dr. N. Lakshminarayana, Hyderabad.	6-10-1972
47-	Dr. T. Seshachary, Hyderabad.	7-10-1972
48.	Dr. N. Krishna Rao. Hyderabad.	7-10-1972
49	Representatives of (1) the Court of Examiners of Homoeopathic and Bio- chemic Systems of Medicine, Bembay; and (i) the Board of Homoeo- pathic and Biochemic Systems of Medicine, Bombay	7 70 7000
	(i) Dr. J. K. Sanyal	7-10-1972
	(ii) Dr. R. M. Chincholkar } Representatives of the Court	
	(iii) Dr. A. S. Dhole	
	(.v) Dr. M. C. Batra	-
	(v) Dr. K. Prahlad K cpresentatives of the Board	-
	(vi) Shri S. B. Upadhye, Registrar	

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erial No.		Date of hearing
50.	Dr.H.I.Jhala, Director of Mcdical Education, Government of Maharashtra, Bombay	7-10-1972 •
51.	Dr. R. K. Desai, Ahmedibid [7-10-1972
52.	Representatives of the Institute of Homocopaths, Kerala, Plemccdu, Trivandrum:	28-10-1972 -
	(i) Dr. R. Jayakumar, Chairman	
	(ii) Dr. Ravi M. Nair, Joint Secretary	• •
	(iii) Dr. K. J. Isaac, Member	
	(iv) Dr. K. N. Gopinath Pillai, Member	
53.	Dr. K. G. Manur, Bangalore	28-10-1972
54.	Representative of the Mysore State Homocopathic Committee, Bangalore-	28-10-1972
	Shri T. N. S. Somayaji, Registrar	
55-	Dr. A. R. A. Acharya, Bangalore	28-10-197 2
56.	Dr. H. K. Srinivasa Rao, Bangalore	28-10-1972
57.	Dr. H. T. Rangaswami, Bangalore	28-10-1972
58.	Dr. M. V. R. Swamy, Bangalore	28-10-1972
59	Representatives of the Royal College of Homeoopathic Physicians, Erna- kulam :	30-10-1972
	(i) Dr. S. B. Pandiar, Principal	
	(ii) Dr. S. N. Pandiar, Vice-Principal.	
60.	Representative of the Homoeopathic Medical College Pappanamcode, Trivandrum :	30-10-1972
	Dr. M. K. Sivaramana Nair, Principal	•
61.	Representative of the Dr. Gururaju Government Homoeopathic Medical College and Hespital, Gudivada (A. P.) :	30-10-1972
	Dr. M. Kutumba Rao, Principal of the College and Superintendent cf the Hospital	
62	Representatives of the Students Union of the Athrateramam Hemceopa- thic Medical College, Sachivothemapuram, P. O. Kettayam :	30-10-197:
	(:) Shri N. I. Babu, Chairman	
	 (ii) Shri E. N. Gopalakrishnan, General Secretary, All Kerala Ho- moeo Medical Students Federation at the College 	
63	. Representatives of the Athrasaramam Homoeopathic Medical College, Sachivothamapuram, P. O. Kottayam :	30-10-197
	(i) His Holiness Swami Athura Dasji, Founder of the College	

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Serial No.	Name of witnesses	Date o hearing
	(iii) Dr. R. S. Pandiyan, Principal.	
-64.	Representatives of the Registered Homoeopathic Medical Practitioners Association, Madras ;	31-10-197
	(i) Dr. G. Rajamannar, President	
	(ii) Dr. G. I. Abraham, General Secretary.	
65.	Representative of the Southern Railway Homoeopathic Medical Prac- titioners Association, Tiruchirapalli :	31-10-197
	Dr. K. M. Chidambaram, President	
66.	Dr. V. Sundara Varadhan, Madras	31-10-197
67.	Dr. C. A. Rajagopalachari, Madras	31-10-197
68.	Dr. Kumari R. Bragam, Madras	31- 10- 197
69.]	Representatives of the All Kerala Homocopathic Federation Quilon :	1-11-197:
	(i) Dr. A. G. Nair, P esident	
	(ii) Dr. A. K. George, General Secretary	
	(iii) Dr. K. V. John, Secretary	
	(iv) Dr. Philip Powlose, Publicity Officer	
70. 1	Dr. K. A Joseph, Principal, Homoeopathic Medical College, Madurai	1-11-1972
	Dr. K. T. Thomas, Pollachi	I-II-1972
72.]	Dr. M. P. Parmeswaran, Assistant Director, State Institute of Languages Kerala, Trivandrum	
73-]	Dr. K.Z. George, Assistant Director (Homocopathy), Government of Kerala, Trivandrum	I-II-I972

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QUESTIONNAIRE TO BE ANSWERED BY PRIVATE PRACTITIONERS

- 1. Name and address
- 2. Qualification degree/diploma held by you, giving the name of the authority.
- 3. Whether registered and when, indicating whether registered on the basis of qualification or on the basis of experience.
- 4. What should, in your opinion, be the basic qualifications for registration of Homoeopathic doctors on All India register?
- 5. What should be the qualifications of elected or nominated members of the proposed Central Council of Homoeopathy?
- 6. What is your opinion regarding banning Homoeopathic practice by persons who are not registered either on the State or the Central Register?
- 7. Is there any justification for allowing people to practice Homoeopathic medicine for charitable purposes even if they are not so far registered?
- 8. What should be the number of members of the proposed Central Council of Homoeopathy and what should be the ratio of representation from the registered Homoeopathic practitioners?
- 9. Are the certificates for sickness, death etc. isued by you accepted by State Govercnment? What is your opinion regarding giving such privileges to the Homoeopa-

thic practitioners in the Central Register?

- 10. Would you allow enlisted practitioners in some of the State Register to be registered in the Central register or any other register?
- 11. Whether is it not advisable that the Homoeo Practitioners should not be allowed to practise other than Homoeo Science? If any Homoeo doctor practices other than Homoeo Science, he should be penalised and his registration should be cancelled.
- 12. Why not those Homoeo doctors who possess the recognised qualifications from the recognised Institutions should be allowed to practise and those who do not possess the recognised qualifications and whose names have been registered on the basis of experience by paying prescribed fee should be prohibited.
- 13. When Homoeo doctor does not establish minimum prescribed Ho-Moeo library, and laboratory equipment, why should not his registration be withdrawn?
- 14. Why not the Homoeo doctors should invariably maintain case diary?
- 15. Why not every Homoeo dispensary should be equipped with minimum prescribed beds and clinical laboratories should be attached?

QUESTIONNAIRE TO BE ANSWERED BY PRIVATE PRACTITIONERS

- 1. Name and address
- 2. When established
- 3. What is your present membership?
- 4. What is the basis for admission as a member?
- 5. What is the subscription charged?
- 6. How many branches do you have and what is their membership?
- 7. What is the contribution of the Association in the field of education, research and propagation of Homoeopathic principles among the people?
- 8. What should be the basis of registration in the All India Register? Would you prefer and include those who are enlisted in the State Registers?
- 9. What should be the qualification of the elected or nominated members of the proposed Central Council?
- 10. What privileges should be given to those who are registered on the basis of experience and do not have institutional qualification?
- 11. What should be the ratio of nominated versus elected members of the Council?

12. Do you think that homoeopathic practitioners who are only practising this system part time should also be registered with Central Register?

(In some of the States the part time practitioners without any institutional qualifications are registered to enjoy all the privileges of a registered medical practitioner.)

- 13. Which are the other Associationsaffiliated to your organisation?
- 14. Does your Association want high standards of education and training maintained in our college?
- 15. What should be the functions of the Central Homoeopathic Council?
- 16. Does your Association feel that: the Central Council should consist of qualified Homoeopaths: only?
- J7. Persons of adequate and genuineknowledege of Homoeopathy should only be taken on Central Council in election. So also thenominated members should possess the same qualification in. Homoeo Science?

QUESTIONNAIRE TO BE ANSWERED BY HOMOEOPATHIC INSTITUTIONS

- 1. Name and address of the institution.
- 2. Whether State/Registered body/ or private individual institution.
- 3. Year of establishment.
- 4. Courses of study imparted and their duration, degree/diploma awarded,
- 5. To which body the institution is affiliated and to which body Degree/Diploma recognised—State Faculty, Board or Council.
- 6. Do you follow the four year Diploma course as recommended by the Homoeopathic Advisory Committee?
- 7. State the basic facilities available in your institution, in respect of the following:
 - (a) Does the college have its own building?
 - (b) What is the total area of the land?....
 - (c) What is the built up area?
 - (d) The number of lecture halls and the number of laboratories?
 - (e) Have you any museum; how many specimens have been collected in the Anatomy as well as Pathology Departments?
- 8. Have you an Indoor Hospital? If so what is the number of beds functioning? If not, what is the arrangement for training your students in clinical subjects?
- 9. What is the number of patients attending your Out Patients Department and how many doctors attend in the O.P.D.?

- 10. Do you have a library? If so, give the number of books in the Library. How much money do you spend annually in developing your library?
- In your Anatomy Department, do you have facility for dissection of a cadaver? How many models do you have in Anatomy Department? What are the arrangements for practical demonstration and experimentation by the Students in the Physiology De-
- partment?
- 12. Regarding staff, do you have permanent whole-time staff or parttime staff? Give the number of permanent staff. Is your staff institutionally qualified? If parttime what is the usual honorarium paid to them. Have you established any pay scale and allowances for your staff?
- 13. What are the financial resources of the institution? Do you get regular grant from the State or Central Government? Or do you get regular donations from charitable bodies or are fees from students the only source or major source of finances? What is the annual fee payable by a student? Is that fee sufficient to meet expenses of the institution?
- 14. What is the annual admission rate of the students? Do you have adequate facilities in the institution for training the number of students admitted by you every year? Do you run more than one shift of the studies in your institution if so, how many?
- 15. What is the basic qualification for admission in your institution? Do you admit only Science students or both art and science subjects.

- 16. What is the usual percentage of successes in your institution?
- 17. What is your annual budget?
- 18. What do you think should be the representation from educational : institutions in the proposed Central Council of Homoeopathy?
- 19. What sort of controls do you propose for the proposed Central Council of Homoscopathy in order to maintain proper standards of education by the various institutions?
- 20. Do you follow the D. H. M. S. course for the 4-year Diploma and the Degree courses as recommended by the Central Homoeopathic Advisory Committee and the Central Health Council?
- 21. What is the ratio of admission with the hospital beds in your institution?

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22. What are the qualifications with experience of the Principal and lecturers of your college?

SUPPLEMENT TO THE QUESTIONNAIRE TO BE ANSWERED BY HOMOEOPATHIC INSTITUTIONS

• •

- 1. Is your institution accepting donations or capitation fees for admission?
- 2. Have you any record about the students who have passed from your college? Whether they are

practising in Homoeopathy or in other systems of medicine or they are serving elsewhere? Can you tell us how the majority of these Homoeopaths adopt their future way of life?

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QUESTIONNAIRE TO BE ANSWERED BY STATE GOVERNMENTS

- 1. Name and address, giving the name of Health Secretary and Director of Health Services.
- 2. Do you have a separate Directorate, or Deputy Director/Assistant Director or Adviser to deal with Homoeopathy in your State?
- 3. How many colleges; hospital, Homocopathic clinics/dispensaries are run by the State Government or local bodies in your State, including private bodies.
- 4. Is there any pattern of State assistance to the Homoeopathic institutions? How much State aid given to Homoeopathic institutions?
- 5. Is there any proposal to start a Government Homoeopathic College in your State?
- 6. What budget has been provided last year and also this year for the development of Homoeopathic medical education?
- 7. Do you think it would be better to have a separate budget for Homocopathic instead of a common budget for ISM?
- 8. Are you aware that the Central Health. Council have passed a

number of resolutions about Homoeopathy during the last 10 years? What actions have been taken by the State Government regarding . these resolutions?

- 9. The Central Health Council recommended the starting of at least one hundred Homoeopathic Dispensaries in the rural areas by all State Governments. What action has been taken by your State in this regard?
- 10. Are you aware that the Central Government have passed a resolution recommending for utilisation of Homoeopathy alongwith Allopathy and Indian systems for the health services of the people. While planning the health programmes will the State Government include the registered practitioners of Homoeopathy also?
- 11. Why not Visitors and Inspectors should also possess degree qualification in Homoeo and experience should be the criteria for appointment to the above posts?
- 12. What should be the status of Homoeo dispensary and Doctors? Should it not be raised on par with that of Allopathy Doctors?:

SUPPLEMENT TO THE QUESTIONNAIRE TO BE ANSWERED BY STATE: GOVERNMENTS

- 1. How much you have provided for Allopathic system of medicine, in the last years and this year's budget?
- 2. How much you have provided for Ayurvedic system of medicine inthe last year's and this year's: budget?

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QUESTIONNAIRE TO BE ANSWERED BY STATE BOARDS/COUNCILS

- 1. Name and address, when established and under what Act?
- .2. Number of members of the Board/, Council-elected and nominated.
- 3. Do you think that a Board is able to establish proper control over the educational Institutions in your State? What power does the Board enjoy regarding the control of standards of education in the institutions in your State?
- -4. Do you have any supervisory control for inspecting the colleges and ensuring that they are maintaining .the standards?
- 5. What do you propose for the Central Council in respect of a supervisory machinery for inspecting the colleges, etc.
- 6. How many practitioners have been .registered by the Board during the _past and what is the average rate .of annual registration?
- 7. Is your Board/Council still allowing registration of practitioners without qualifications on experience basis?
- .8. How many institutions do you have in your State which are affiliated . to your Board and how many, . which are not affiliated,

9. Do you insist on an Indoor hospital as one of the criteria for affiliation of the institution to the Board/ Council. What is the minimum humber of beds insisted by you?

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- 10. Is Board financed by the State Government or depends only on the affiliation fee or registration fee from the Diploma holders.
- 11. What is the proportion of qualified with registered practitioners elected or nominated on your Boards/. Council?
- 12. What are the criteria for the recognition of a homoeopathic coliege in your State?
- 13. (a) Do you think that Homoeopathy system of medicine includes Biochemistry as founded by Dr. W. D. Schuessler?
 - (b) Do you have separate branch of Biochemic saits or its rescarch section?
 - (c) Is there any progress in diagnosis or Biochemistry in the art or science of Homocopathy system of medicine for the last five years? Is there any contribution from your Institution or Board or the students studied under your guidance?

THE JOINT COMMITTEE ON THE HOMOEOPATHY CENTRAL COUNCIL BILL, 1971

VERBATIM RECORD OF EVIDENCE GIVEN BEFORE THE JOINT COMMITTEE

Volume I

Monday, the 25th September, 1972.

(AT CALCUTTA)

PRESENT

1. Shrimati Purali Mukhopadhayay-Chairman

MEMBERS

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Rajya Sabha 🚏

2. Shri Sasankasekhar Sanyal		7. Shri T. K. Srinivasan
3. Shri Bhupinder Singh	1. 1. 1	8. Shri Sultan Singh
4. Shri N. G. Goray	r	9. Shri N. P. Chaudhari
5. ³ Dr. K. Nagappa Alva		10. Shri T. G. Deshmukh
6. Shri Man Singh Varma		11. Shrimati Savita Behen

Lok Sabha

12. Shri Ziaur Rahman Ansari	22. Shri Prasannbhai Mehta
13. Shri Muhammed Khuda Bukhsh	23. Shri N. Sreekantan Nair
14. Shri Bhacosahaib Dhamankar	24. Dr. Laxminarayan Pandeya
15. Shri Hiralal Doda	25. Shri Janaki Ballav Patnaik
16. Shri Nageshwar Dwivedi	26. Shri S. L. Peje
17. Shri Madhuryya Haldar	27. Maulana Ishaque Sambhali
18. Shri Chiranjib Jha	28. Shri M. Satyanarayan Rao
19. Shri Ramachandran Kadannap-	29. Shri Umed Singh Rathia
palli	30. Shri K. Ramakrishna Reddy
20. Shri B. R. Kavade	31, Dr. Sankata Prasad
21. Shri Mallikarjun	32. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING Dr. Jugal Kishore, Adviser in Homoeopathy.

SECRETARIAT

Shri M. K. Jain, Under Secretary.

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WITNESSES

(1) Representatives of the All India Homoeopathic Medical Association, West Bengal Branch, Calcutta.

(i) Dr. Asoke Paul, General Secretary.

- (ii) Dr. Bhola Nath Mukherjee, Organising Secretary, A I.H.M.A., Delhi.
- (iii) Dr. Ananga Nath Chakrabarti, Member, General Council, AIHMA, Delhi

(2) Representatives of the West Bengal State Homoeopathic Federation, Calcutta.

- (i) Dr. J. N. Kanjilal, Vice-President, All India Institute of Homoeopathic, West Bengal.
- (ii) Dr. S. K. Adhicari, Vice-President.
- (iii) Dr. S. N. Chatterjee, General Secretary.
- (iv) Dr. R. D. Mallick, Joint Secretary.
- (3) Representatives of the Homoeo Medical Club, West Bengal, Calcutta.
 - (i) Dr. Nitai Chandra Chakravarty, President.
 - (ii) Dr. Nirmal Kumar Sarkar, Vice-President.
- (4) Representative of the West Bengal D.M.S. Association, Calcutta. Dr. N. P. Roy, Vice-President.

(5) Shri A. K. Majumdar, Secretary to the Government of West Bengal, Department of Health and Family Planning, Calcutta.

(6) Representatives of the All India Homoeopathic Medical Association. Singhbhum Branch, Jamshedpur,

(i) Dr. T. S. Saggu, General Secretary.

(ii) Dr. R. P. Singh, Assistant Secretary.

(7) Representative of the Singhbhum Homoeopathic Medical College and Hospital. Jamshedpur:

Dr. S. B. Kar, Principal.

[The Witnesses (Representatives of the All India Homoeopathic Medical Association, West Bengal Branch, Representatives of the West Bengal State Homoeopathic Federation and $D\tau$. J. N. Kanjilal) were called in.]

MR. CHAIRMAN: Friends, on behalf of our Committee I welcome you heartily and we very much appreciate your presence here. You have already sent us your replies to our questionnaire. You are free to discuss the points which are there in the questionnaire and also if you have got any other suggestion to make, you should feel free to discuss openly. Let there be a free and frank discussion on this because we are all assembled here for the purpose of seeing if we can improve upon the Bill as it stands today Perhaps you know that the proceedings of the Select Committee are always kept confidential and it is not for the press and for any outsider also. Please bear it in mind.

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Now, will you please introduce yourselves.

DR. J. N. KANJILAL: I am J. N. Kanjilal, Vice President, All India Homoeopathic Medical Association, West Bengal Branch.

Dr. N. K. Roy, Vice -President, State Homoeopathic Federation.

Dr. S. K. Adhikari, Member of the Central Concil of the All India Institute of Homoeopathy, and editor of a paper Chikitsak Samaj.

Dr. A. K. Pal, General Secy., All India, Homoeopathic Medical Association, West Bengal.

Dr. B. N. Mukherjee, Organising Secy, West Bengal Branch of the All India Medical Association.

Nitai Chakravarty, Principal, Mahesh Bhattacharyya Homoeopathic Medical College.

N. K. Sarkar, Vice President of the West Bengal Homoeopathic Federation.

R. D. Mallick, Joint Secy. of the West Bengal Medical Federation.

S. N. Chatterjee, Joint Secy of the West Bengal State Homoeopathic Federation.

I have been deputed to speak on their behalf but of course, individuals can also reply.

MR. CHAIRMAN: Dr. Kanjilal, will you please start and give your observations generally that you want to make on this Bill.

WITNESS (DR. KANJILAL): Homocopathic medical practitioners in West Bengal do appreciate the wisdom expressed in the Bill and on fundamental points we have no serious objections. The most important task of this Council would be to alleviate the standard of homoeopathy education as well as the standard of homoeopathic practitioners. We think that there should be sufficient representation from homoeopathy educationsts i.e. from the principals of foreranking homoeopathic medical colleges all over India. You will also have to take into consideration that the institutions should be worthy of their standard. An institution worth the name should not be deprived of its representation in the Council. We have sufficient number of principals in our council and we find this absence in the Bill. Of course there are representatives of

homoeopathic faculties from different universities. Even now there is practically one university-Kanpur University-where there is Homoeopathic Faculty. University should be represented no doubt but that does not mean that principals of homoeopathic colleges should not be represented. Representatives of universities as well as principals of homoeopathic institutions should be included in this Bill. As regards percentage of representation we feel that one in five thousand would be better instead of one in ten thousand. Next, the Council, as stipulated in the Bill, should sit only once a year and the executive will also do the same. If the Council meets only once a year then the whole thing will devolve upon the officers appointed by the Council. We are, therefore, of firm opinion that the Council should sit at least twice a year and the executive should sit at least once in three months so that proper check can be made on the activities of the Council. I have nothing to add now and my colleagues here will be glad to answer your questions or make observations, if they so like, as it is my desire that nobody should feel that I want to gag them all.

DR. A. PAL: we have got to make certain observations. First, the name should be Central Council of Homoeopathy Bill. We have also got to say something as regards election.....

MR. CHAIRMAN: The procedure is that members will like to put some questions for ellucidation and after that you will be free to make your observation.

SHRI MAN SINGH VERMA; Could you please tell us the number of registered homoeopathic practitioners who are not otherwise qualified and would like them to be represented in the Council?

DR. KANJILAL: Though we think that those who have got at least fifteen years experience should be represented in it, for the time being we do not press it. We request that in the nominations—this is the sentiment of homoeopathic medical practitioners in West Bengal— experience should also be insisted upon.

SHRI K. R. REDDI: There are some homoeopathic practitioners who also practice in allopathic matters. Do you suggest that this should be stopped or you want to encourage them.

DR. KANJILAL: We do not encourage them but we do not believe that this can be stopped by law. As a matter of fact, if the Homoeopathic Association are active enough, if they preach and deliver lectures against this saying that pure homoeopathy of Hahnemann can deliver the good then that is the effective way to check this. We don't like to give any handle to the law to control the affairs of Homoeopathic Association.

SHRI J. B. PATNAIK: There are many persons qualified in allopathy who practise in Homoeopathy. But do those persons qualified in homoeopathy practise allopathy also?

DR. KANJILAL: There are very few such people.

SHRI K. R. REDDI: Why should you not like to enact or penalise those doctors who practice allopathy but who have got licence in homoeopathy?

DR, KANJILAL: Because we do not believe that by penalising you can change anybody's mind or anybody's prejudice or principles. Only that will create more foul play-they will do more clandestinely and surreptitiously. So, if we can preach or guide them properly then this can be stopped. We have experience in West Bengal. Here 10/12 years ago when there was no such opposition on this point it was the West Bengal State Homoeopathic Council raised opposition or rather started an open war against this sort of things and since then gradually these things have almost been ousted from even the remotest corner of the State.

SHRI K. R. REDDI: I find that you are not in favour of putting any restriction on them—you feel that only moral preaching will do. But I don't think it is possible to stop this only by preaching or lectures.

SHRI MUHAMMED KHUDA BUKHSH: My own reaction on this question is that what the people want is not any particular 'pathy' but they want 'curopathy'. Those doctors who are graduates or otherwise qualified in allopathic system, if they choose to practise homoeopathy they should be welcome. But those who have obtained degree in homoeopathy and want to practise in allopathy, they should be made to undergo proper allopathic training right from the beginning.

MR. CHAIRMAN: I also agree with what Mr. Khuda Bukhsh has said that when allopathy is a different type of medicine and it require a special training but homoeopathy is a separate branch of medicine, we should not mix up the two because when an homoeypath who is institutionally trained to be a homoeopathic doctor he should not exceed his limit and start practising allopathy-that will be undermining even homoeopathic system. And if the homoeopath himself does not believe in the curative value of homocopathy then how people will attach that sense of prestige to homoeopathy So, I will not mind even in punishing them or making a penal clause in our Act. Of course, that is my personal opinion and you are free to give your opinion.

SHRI B. DHAMANKAR: So far as I know, there is a clause in the Homoeopathic Act that one who is registered in homoeopathy, should not be allowed to practice in any other pathy --there is a panel clause.

ONE MEMBER: Mr. Kanjilal, whether your association has any member qualified in allopathy but practising homoeopathy?

DR. KANJILAL: I am an allopathic graduate but I do practise in pure homocopathy since 1940. ONE MEMBER: Mr. Chairman, there are some persons who are practising simultaneously in both homoeopathy and allopathy and there is no penal clause to punish them. So, I want a clarification as to why you want to introduce a penal clause in the Bill now?

MR. CHAIRMAN: Let me explain why I said that. The basic fundamental thing in the medical education is that an M.B.B.S. has some basic knowledge of therapy. Now. along with his experience and knowledge he also studies homoeopathy and so he gets the benefit of both the branches. Whereas an homoeopathy if he prefers to read also medical science in allopathy and qualifies himself in allopathy-both of them have acquired knowledge of both the sections and they can opt for any one section. There is no bar in it. But an homoeopathic doctor who does not have that specialised training of a medical college in the system of allopathy should not be allowed to practice in allopathy: I am told by many doctors that the use of antibiotics in India is far greatereven half-trained persons and quacks are using it after going through some literature. We are banning it. So also if a homoeopathy without having the institutional training in allopathy wants to practice in allopathy whether you will ban it?

MR. CHAIRMAN: But whether you will ban one against another that is upto you. But a medical graduate holding M.B.B.S. degree is not given that power to practise homoeopathy without undergoing that institutional training.

ONE MEMBER: I do not think that an MBBS doctor will practise homoeopathy. In the rural areas, the homoeopathic or ayurvedic doctors may be using the antibiotics. It is most essential to prevent this practice. In the rural areas many people adopt their father's practice may be that his father was a Hakim or an Ayurvedic practitioner. Therefore, prior to concluding it necessitates us to reflect and throw light on these rural prac-

titioners, as it is an obvious fact that in the rural areas many adopt their fathers' practices in Unani or Ayurvedic system. Madam, as we are thinking in terms of educational institutions which, should be the coordinator. So far as the allopathic practitioners are concerned they are being trained in anatomy, physiology, pathology and medicine and all these aspects of systematic training. On the contrary all these homoeopathic practitioners come in this line because their fathers were Hakims or Ayurvedic practitioners. They adopt certain things which their fathers taught them. Unfortunately, because of the registration or for whatever it is they indulge in using allopathic medicines. Therefore, in the light of these things about which they are all concious in rural areas also, you may kindly suggest any positive manner in order to protect the interest of the people at large.

MR. CHAIRMAN: Before that may I request Dr. Alva who has wide experience to make certain observations?

DR. K. NAGAPPA ALVA: The idea of having these enactments is to regulate the practice of the different systems of modicine particularly in the case of homoeopathy here, and it is also with the idea to have this practice to the satisfaction of the people and also it is necessary to have medical education of standards. It is again a question of promotion of the particular system of medicine. That is why we are here and getting the opinion of these experts in that particular line. The policv of the government is, and should be made very clear, that these different systems of medicine have been accepted by the people. The Government of India and all other State Governments have also accepted it and they thought it necessary that these systems of medicine should be developed, and developed independently because our friends and experts are very well aware of this quackery and bogus practice. We know all these but we are not blaming the practi-

tioners. But the position is such that in the rural areas and even in the towns medical facilities have not been provided to the people. So what has happened is that particularly in the Ayurvedic, homoeopathic and also in the Unani system the practice is only on injection. Leave the injection and you do not have the protection was the general belief. For this, these practitioners used modern system of medicine. But here it is not correct for one who has registered in a particular system to take another system unless he has got the requisite qualification. If one passes in both the systems he has got the freedom to practise but at the same time he can become the Member of the Council of a particular system and it will be upto him to select only one, and it is very much necessary. Incidentally, I must say that it must be left to the leaders of the profession from whom we will hear about this, and I am very much thankful to the Chairman for giving me the chance to say a few words. I would also thank the authorities for selecting this place because Calcutta is the place in India where homoeopathic system of medicine has taken a place of honour. We all know this. But here and there this kind of mixed treatment is going on. It will go on. It is for you to check it. You must be very frank in your opinion so that we may think that we might hear the views about 'Suddho Ayurvedic' or pure homoeopathic system.

If they have got faith in that they must practice that and modern use of medicine should not be allowed. That is why medical colleges are very much needed to maintain the educational standard in that particular branch. So it is upto you and we want you to take lead in this direction and give us your views so that it may be purified in every respect. This system itself is not only preparing the practice of homoeopathy but it is a question of promotion of the system of ... homoeopathy in this country. So, here the question which I put to is about the confusion from some of the opinions . you have gathered that the Biochemistry itself is being taken as a Homoeopathic system of medicine. It is true that there is some confusion, and this confusion must be clarified.

Then about the text books-good text books for the Homoeopathic system of treatment. Do we have any good and proper text books in the colleges by which the teachers and the students are really benefitted? Do we have the members of the staff of the Homoeopathic Colleges who are properly and institutionally gualified?. Do we have proper research arrangements in these institutions? Without research we cannot progress independently to develop this system. I know there are various defects in the colleges. In certain places, colleges are there just to issue certificates and in most of the cases postal certificates are issued. This must be stopped, Some people confuse in the systems of Biochemistry and Homoeopathy, Т would only request you to give in writing your clarification in this, and let there be no confusion for having practice in these two systems. You will have to give your suggestions also regarding how this can be developed because your work is to start soon after the Bill becomes an Act. We have to proceed with these things. As you have suggested and I for myself am in the opinion that the Central Council should meet once in a year and the Executive Committee should meet four times in a year, but at the same time it is your duty to say what are the deficiencies and defects you are having in the system, and in the colleges. Your suggestion is necessary to build up a good standard of homoeopathic education in medical colleges and to have good standard of medicine. You are facing with the difficulties and we should see how these can be overcome. Once again, I say that two important things are to be taken into consideration and these are about text books and research arrangements.

MR. CHAIRMAN: May I interrupt for a moment, Dr. Alva? The provision of the Bill is that the Central DR. K. NAGAPPA ALVA: Unless it is made compulsory how can we be sure of that?

MR. CHAIRMAN: Dr. Alva, there is an Act in this regard. This cannot be changed.

DR. K. NAGAPPA ALVA: Then I may say about the drugs. Drugs are to be prepared in best scientific manner. Dr. Kanjilal, may I know from where you are getting your drugs? Are the manufacturers qualified?

DR. J. N. KANJILAL: I am very much thankful to Dr. Alva for making these fundamental points. We have been fighting for these points year after year. As regards the text books we suggested some eight or ten years ago that there should be a committee or authority which should review the standards of the text books available in the market. Because we feel that unless the teachers in homoeopathic colleges have got sufficient knowledge in the homoeopathic principles it will not serve the right purpose. There are some Allopathic teachers who are not homoeopathic oriented, engaged in teaching in various ancillary subjects. In the beginning they made damaging remarks in their classes, but after the interference by our committee and by the college authorities they have now avoided these things.

As regards the manufacture of drugs my observation is that nobody controls the manufacture of drugs used in the homoeopathic system of treatment. This business is remaining under the care of X, Y & Z. I think, unless the Government takes up the drug manufacture in their own hands no useful purpose will be served.

SHRI N. G. GORAY: Are there any indigenous manufacturers?

SHRI KANJILAL: All the Indian medicines, there are many, are manufactured here. They are all private manufacturers.

MR. CHAIRMAN: Have you got any special pharmacopoeia in Homoeo-pathy?

SHRI KANJILAL: A pharmacopoeia is going to be prepared.

MR. CHAIRMAN: Is the main ingredient manufactured here or imported?

SHRI KANJILAL: Most of them are manufactured here.

SHRI JUGAL KISHORE: Some of the basic ingredients are manufactured here. There are certain foreign plants which we have to import. We can prepare and manufacture the potency here. But there are certain drugs which we have to import because we cannot manufacture them here.

SHRI GORAY: What is the percentage of indigenous drugs?

SHRI KANJILAL: We are carrying out research and the percentage will be about 13 to 15. In the field of chemics! compounds, all are available here.

MR. CHAIRMAN: Is there any spurious drug in Homoeopathy?

SHRI KANJILAL: No. That will not serve any useful purpose. There is another point. I am afraid. I have perhaps been misunderstood. We do not accept the position that Homoeopathy should be tagged on to Biochemistry. We do not agree to this. Homoeopathy and Biochemistry are two different things. Therefore, Biochemistry should be kept separately. We find that most of the members feel that by enactment this purpose can be served better. We have, therefore, no objection to inclusion of a penalising clause in the Act. Those who are without qualification should be penalised if they indulge in practising Homoeopathy.

MR. CHAIRMAN: Where anybody practising in a special type of medicine, i.e. Homoeopathy without having the special training in Homoeopathy, we are going to ban this. Whether any M.B.B.S.•practising Homoeopathy without proper degrees should be penalised —on this point we want, your specific suggestion.

SHRI KANJILAL: In the beginning, people following other systems feel inclined to take up homoeopathy and they start trying this and that medicine. As far as my own case is concerned, I was graduated in the year 1936. I started experimenting with this and that medicine and I could not find any Homoeopath at all. We feel, for practising homoeopathy without going through some proper training, there must be some penal clause. But this problem is always there. In the Central Government there is a scheme for creating rural doctors. Now, if you want to press that scheme into action you will have to accommodate these things. So, our view is that just now we need not make an Act.

MR. CHAIRMAN: Are we going to encourage MBBS practising Homoeopathy without having any institutional training in Homoeopathy in future?

SHRI KANJILAL: They are doing it, but if they want registration in Homoeopathy they must have a proper training. If they do it in an Smateurish way, you can ban it.

MR. CHAIRMAN: What about Homoeopaths practising Allopathy?

SHRI KANJILAL: We are very much against it.

DR. ADHIKARY: While speaking on my personal capacity I would like to make it clear that, in fact, in West Bengal what we want and what we are trying for is that Homoeopathy should stand on its proper merit. We do not tolerate any other system of medicine overriding Homoeopathy. Therefore. I feel that there must be some penal clause--MBBS or others must get themselves qualified first. before they practise this system. Otherwise, an MBBS would start practising without going through the fundamental tenets of Homoeopathy, spoil the whole thing. If a person qualified in one system of medicine wants to enter a different system of medicine, he must have proper qualification, must have proper education first.

DR. A. K. PAL: I support Dr. Adhikary. I fully agree with him.

MR.: CHAIRMAN: And about homoeopaths practising allopathy?

DR. PAL: On that point I also support Dr. Adhikary.

DR. B. N. MUKHERJEE: I also support the views of Dr. Adhikary that homoeopathic practitioners should be institutionally trained. That is why I think the members should be elected in the Central Council annually, We should represent true homoeopathy and homoeopaths in the Central Council. Again if allopath doctors practise homoeopathy, they should also be trained in some institution in Homoeopathy, otherwise they should he penalised.

DR. NITAL CHAKRAVARTY: I quite agree with the views of Dr. Adhikary.

DR. NIRMAL SARKAR: I also agree with Dr. Adhikary's views. In this connection I want to add one thing. Dr. Kanjilal has said that in the Council experienced registered homoeopaths may not be taken now but I think that persons, (homoeopaths) who are experienced for more than 15 years or at least graduates must be provided there because they are the persons who held the flag of homoeopathy fluttering in the homoeopathic world.

MR. CHAIRMAN: May I ask you, what is meant by experience?

DR. NIRMAL SARKAR: That is, those who are registered homoeopaths practising for more than 15 years and who are very popular. You know, when G.D.A. was converted into R.A., all the G.D.As became R.As and when the Mukthears System was abolished, all the mukhtears and others also became advocates.

MR. CHAIRMAN: You are confusing the issue. My specific question was one is institutionally trained, you are giving him registration and one who has no institutional training but has experience in homoeopathy, are you going to give him registration.

DR. NIRMAL SARKAR: Yes. registered homoeopath in Part B.

MR. CHAIRMAN: Who certifies about their experience. I am practising for ten years, how do you verify, what is the guarantee?

DR. NIRMAL SARKAR: The local government may verify it.

MR, CHAIRMAN: So you want both of them to be represented?

DR. NIRMAL SARKAR: Yes.

SHRI N. G. GORAY: One of the objects of this Bill is to discourage quackery. If that is admitted, what will be your position so far as those people who are practising for a long time are concerned? Will you not say that while issuing a certificate or a licence, whatever that may be, they will have to undergo some test. Tf they are experienced and they are practising homoeopathic medicine and very popular, why should there be an objection to undergo a simple test?

SHRI R. D. MALLICK: I fully agree with Dr. Adhikari but I think a new point has cropped up as pointed out by Mr. Chairman. She has put a specific question and wants a specific answer.

MR. CHAIRMAN: And along with that you please reply to Mr. Goray's point also. SHRI R. D. MALLICK: In West Bengal there are two types of homoeopaths—some are institutionally trained: they are registered in Part I. and there are some who on the basis of experience are also registered and they are being registered now on the basis of some examination. So we want that these types of people who are already registered should be given this facility on the basis of certain examination. And as Mr. Chairman said, what will the proof? The proof will be the date of his registration as to how long he is practising.

MR. CHAIRMAN: And about penalisation clause?

SHRI R. D. MALLICK: I fully agree with penalisation clause.

SHRI S. N. CHATTERJEE: We may agree with Dr. Adhikary, who is our Vice President of the West Bengal Homoeopathic Federation but in practice we have got a separate experience. People who are M.B.B.S. or graduates in allopathy, when they come to the field of homoeopathy, we usually seeit is our experience-that they are good homoeopaths. For that reason I must say that to penalise such a man should not be the matter of this Bill. It should be a question of ethics. To penalise a man if he wants to be an allopath, who is a homoeopath. it is absolutely unethical and similarly a person who is practising allopathy, if he wants to te a homoeopath, it is unethical to penalise him. If he gets so much experience that he can practice a particular type of medicine, there should be no question of penalising him.

SHRI N. G. GORAY: Have you got any objection to put a man to a test? Supposing a man. an allopath wants to be a homoeopath, let him be subject to a test and vice versa.

SHRI S. N. CHATTERJEE: Yes.

MR. CHAIRMAN: So if he passes through that test, he can practise?

SHRI S. N. CHATTERJEE: Yes.

WITNESS (Dr. A. Chakravorty, Head of the Department of Medical Jurisprudence, D.N. De Medical College and Representative of All India Homoeopathic Medical Council, West Bengal State Branch): The whole idea is that to be a medical man a person must be conversant with all branches of medical science. Under the Medical Code when a doctor takes the responsibility of a patient he should take it fully. Samuel Hahnemann in his book "Organon" has stated that a homoeopathic doctor can take up courses in case of emergency also. In case of emergency some course has to be taken. Generally mixopathy is not allowed. The important point is that the doctor should be institutionally trained after going through a full course.

SHRI B. DHAMANKAR: In an emergency situation is homoeopathic medicine not sufficient enough to meet it?

WITNESS: In the case of cholera dehydration saline is essential. Due to uraemia no doctor can wait for a long time and in that case a doctor will have to administer the course of allopathy to save the life of the patient.

SHRI B. DHAMANKAR: In the case of collapse of a patient do you expect to administer choramine?

WITNESS: In the case of collapse we have lots of homoeopathic medicines. But it the heart beats slowly then choramine is needed but not that we want to practice allopathy.

SHRI M. HALDAR: A homoeopathic practitioner should have freedom of using homoeopathic medicine in case of emergency also.

WITNESS: All doctors should and must be institutionally trained and must go through all branches of medical science otherwise he is not a medical man.

SHRI SASANKASEKHAR SANYAL: On a point of order, Madam Chairman. This Bill was violated by one of the Ministers. There are so many Ministers—State Ministers, Deputy Ministers. I find nobody in the Treasury Bench. Whose business it is to look into the work? It is disgraceful on the part of the Committee to go into it without any of them.

ONE MEMBER: We are so many members here and we are strong enough to add dignity to the deliberations of the Committee.

MR. CHAIRMAN: I heard the Minister was coming. He might not have reached Calcutta as yet but we expect him any moment.

श्री चिरंजीव झः : अध्यक्ष महोदय, मैं यह जानना चाहता हूं कि जव मेडिकल साइन्स के ग्नंदर प्रैक्टिस करने वाले लोगों के लिए हर तरह का इलाज है, हर तरह का साइन्स है, तो क्या यह एक होमियोपैथ के लिए संभव है कि ऐलोपैथी, आयुर्वेद, यूनानी, सब सिस्टम का पूरा ज्ञान हो तब वह प्रैक्टिम करे ?

दूसरी वात मैं ग्रपने इन प्रैक्टिशनर दोस्तों से जानना चाहता हूं कि क्या होमियो-पेथी में वह क्षमता नहीं है ? क्या एमरजेन्सी के मौक़े पर, एपिडेमिक के मौक़े पर होमियो-पेथी सिस्टम कामयाब नहीं हो सकता ? श्रीर ग्रगर उनकी बात मान लें तो यह कमेटी के गठन पर सोचना पड़ेगा । दरग्रसल होमियोपेथी के लिए जिस रूप में ग्राज हम विल लाना चाहते हैं उसमें इस तरह की वात लाना कहां तक उचित होगा ? मैं श्रभी इस वात को सुन कर थोड़ा कन्फ्यूजन में पड़ गया हूं कि क्या उनके कहने के मुताबिक होमियोपेथी में यह क्षमता नहीं है कि हमेशा ठीक से उसके माध्यम से सभी किस्म की प्रैक्टिस हो सके, हर मौक़े पर उससे इलाज किया जा सके ?

श्वीमती **स⁶वता बहिन : प्रघ्यक्ष महोदय,** हम यहां यह जानने के लिए बैठे हैं कि होमियो- पेथी बिल के ऊपर उनके व्हयज क्या है ? होमियोपेथी ग्रगर एलोपेथी के बिना चल ही नहीं सकती है तो फिर क्या फायदा है ? होमियोपेथी इफेक्टिव्ह हो ग्रौर विलकुल करेक्ट तरीके की बना कर चलायी जाए ताकि ज्यादा लोगों को सस्ते में फायदा पहुंच सके । उसको ग्रगर एलोपेथी के साथ जोड़ दें तो फिर ग्रलग से उसकी क्या अरूरत है ? मैं कहना चाहती हूं कि उसमें एलोपेथी का सिस्टम साथ साथ नहीं चले । उससे परपज सर्व नहीं होगा । इसलिए होमियोपे यी में क्या क्या ची कें ब्ररूरी हैं – - रिसर्च जरूरी है, ट्रेनिंग लेना जरूरी है, प्रेंटिस जरूरी है.

CMAIRMAN: Savita Behan, you have made it absolutely clear.

डा॰ संकटा प्रसाद : मैंडम चेयरमैन हम यह कहन चाहते हैं कि हो यो.थी : तनी स्ट्राना इतनी रिच कि उसे एसोपेयी का सहारा नहीं लेना है । कभी भी ज रत पड़ती है तो एलोपेथी को ह मियोपेथी का सहारा लेना पड़ता है । मैं समझता हूं, किसी भी होमियोपेथी को एलोपेथी की प्रैक्टिस प्रलाऊ नहीं होनी चाहिए । ग्रगर होमियोपेथी के बीच में एलोपेथी का सहारा लेना पड़ेगा तो हम होमियोपेथी के काख को कैसे डील करेंगे? कभी भी एक होमियोपथ को एलोपेथी में प्रक्टिस करने की इजाजत नहीं मिलनी चाहिए क्योंकि होमियोपेथी साइन्स इतना रिच है कि एलोपेथी को उसका सहारा लेना पड़ता है ।

श्वी चिरंजीव झाः रिच है या नहीं है, उनको कहना चाहिए ।

CHAIRMAN: He will give his reply.

मौलाना ईजाक सांभली : में समझता हूं इस बिल के स्कोप से बहुत दूर हम चले गये हैं । हमें तो यहां यह देखना है कि जो होमियोपेधिक सेन्द्रल कोसिल बिल धाया है

उसके वास्ते क्वश्चनायर मेज कर, श्रान्सर्स मांग कर क्रोपिनियन्स मालूम की क्रौर क्रव हम चाहते हैं कि जो हमारे ल डिंग प्रक्टिशनसं हैं या होमियोपेथी साइन्स के बारे में ज्यादा जानते हैं, उनके व्ह यूज इविडेन्स के तौर पर जानें। ग्रापको भी समझना चाहिए कि जो इसका स्कोप है वह लिमिटेड है, उसी के ग्रंदर हमको गाइड कीजिये । जहां तक मैं समझता हं, पहला सवाल यह है कि क्राज जो हर शख्स होमियोपथ वन वैठा है उसके वास्ते वेहतर एजु-केशन, प्रापर ट्रेनिंग, प्रापर एक्सर्परियेन्स क्या होना चाहिए । एक बहुत बड़ा प्रावलम जो ग्रपने यहां देखते हैं वह है होमियोपेथिक मेडिसिन्स का । ग्राज जिस तरह की मेडिसिन्स ज्याद।तर ब्रा रही हैं, शायद वही वजह है लोग ड्सकी तरफ से हटते हैं। जैसा ग्रभी डा० संकटा प्रसाद ने कहा होमियोपेथी साइन्स जितना रिच, जितना इफेक्टिव है, कामन मैन के लिए जितना यूजफुल है, शायद उसको वत-लाने की जरूरत नहीं है। जिससे म्रच्छी दवाएं, सही मेडिसिन्स ग्रवेलेवुल हों, मेहरवानी करके उसके वारे में हमें गाइड कीजिए, कि उसके लिए क्या शकल हो सकती है जिससे हम गवर्नमेन्ट को रिक्मन्ड कर सकें कि गवर्नमेन्ट ग्रपने सुपरविजन में इसके लिए कोई फैक्टरी खोले ? या ग्रापकी राय में कोई ऐसी चीच हो सकती है जिससे ग्रच्छी मेडिसिन्स ग्रवेलेवल हो सकें ?

धाखिरी बात मैं यह कहूंगा कि हम यह देखें कि 56 करोड़ की भावादी का हमारा मुल्क है, पुवर पीपुल के लिए हम कैंसे उसको मुफीद वनायें जिससे भ्रच्छी जिंदगी उसको मिल सके ? इस वास्ते होमियोपेथिक मेडिसिन्स के जरिए किस तरह से उनको फायदा पहुंचा सकते हैं, किस तरह से इसमें सक्सेसफुल हो सकते हैं। इन चीजों के बारे में भाप हम को एडवाइस करें जिससे इसको हम ज्यादा यूजफुल बना सर्के । CHAIRMAN: Mr. Sambhali, we are not going beyond the scope of the Bill,

भो के० रामकृष्ण रेड्डोः एलोपेथी डिग्री होने के वावजूद, होमियोपेथी डिग्री होने के वावजूद लोग प्रैटिस कर सकते हैं लेकिन ऐसी सूरत में उनको ग्राप्शन लेना चाहिए कि यूनानी सिस्टम में हो या होमियोपेथी सिस्टम आफ मेडिसिन्स में हो या एलोपेथी में हो, कौन से सिस्टम को वह इस्तेमाल करते हैं। एक तरफ हम होमियोपे्थी को इन्करेज करना चाहते हैं, उसको हम ग्रागे ला रहे हैं, दूसरी तरफ दवाएं ग्रच्छी नहीं हैं। तो उसको इम्प्रुव करने के लिए कौन से तरीके करने हैं ? होर्मियोपेथी में एलोपेथी को साथ लेकर मिक्स करके, होमियोपेथिक मेडिसिन्स प्लस एलोपेथिक मेडिसिन्स को लाना मैं समझता हं कोई दानिशमंदाना काम नहीं है । इसका मक़सद इम्प्रूव कर दीजिये । इसके अलावा क्या रजिस्ट्रेशन लाजमी होना चाहिए ?

MALLIKARJUN: Madam SHRI Chairman, the very fact is, as our doctor friends have mentioned that both the systems can be mixed up either during emergency or regularly, I would like to draw the notice of the honourable members to some points. Some honourable members as also some doctor friends have expressed the opinion that students acquiring MBBS degree must also acquire institutional qualification in homoeopathy if he wants to practice in homoeopathy. It is absolutely necessary. And in fact, if we want to do good to the people one should acquire perfection in any one of the systems. If I am a doctor in allopathy then only 6 months' refreshers course in homoeopathy will not do. That will be insufficient at the time of emergency and diagnosis. On the contrary if any doctor goes with that intention of giving medicine then he will kill the patient. Therefore. one should be perfect in any one of the systems and there should not be combination. There should be some central law. Even for other indigeneous medicines there should be separate degree. So, combination of two systems should be banned and penalised so that interest of the people by and large can be protected.

SHRI N. P. CHAUDHURI: Mr. Chairman, I want to put another question.

ONE MEMBER: On a point of order, Madam, we have come here to hear their views. We cannot express our views here all along.

MR. CHAIRMAN: Certainly we would hear them but the Members will also ask them questions.

SHRI N. P. CHAUDHURI: Is it not correct that in the name of emergency this mixopathy will come out to bring a catastrophe in the patient's condition?

(No reply)

SHRI N. P. ROY: Mr. Chairman, Sir. I am the Vice-President of West Bengal D.M.S. Association. I fully agree with the thought of Dr. Adhikary and the spirit laid down in the points of our President that one man must practise in one system. If he wants to go into another system he must educate himself to that system. Regarding penalisation. I think, penalisation should not be strictly followed but strict restriction should be laid down in the Bil. Now, Dr. Kanjilal will further explain.

DR. KANJILAL: We have had a plenty of discussion on this. According to Hanhneman to take emergency recourses it has got nothing to do with the therapeutics. Say in the case of haemmorhage whether saline transfusion should be given or not that also requires some training. The heart of such a patient has to be examined. It has to be seen whether there is any dehydration or not. If it is found in the examination of the heart that the first sound is missing and then if the doctor pushes saline then it will bring the catastrophe. Dealing

with an emergency by a person who is not adept in the science may help in killing the patient. There will not be any comprise in regard to such cases. Whoever may be person dealing with an emergency case if he could not do anything then he must say that he was failing and another party should be advised to bring in another expert in that line. So in principle I fully agree with complete prevension of any sort of mixed treatment. Wherever any particular system fails any other man adopt in the concerned system of medicine may be from this modern system of allopathy. homoeopathy, Ayurvedic or Unani must be brought in. Each system has got certain qualities to tackle particular situations wherever other systems may fail. So far the principle of this clause is concerned there should not be any mixture at any stage. That shou'd be provided and we have no objection.

DR. A. N. CHAKRABARTI; So far as qualification is concerned by the words 'basic science' I did not mean Unani. Ayurved or any such things. By the words' basic science 'I meant anatomy. physiology, medicine, pathology and etc. etc. So far emergency is concerned it has been explained already and I do always hold the idea that homoeopaths should always be homoeopaths.

MR. CHAIRMAN: Any other question?

SHRI BHAOOSAHIB DHAMANKAR: There are members in your profession who practise bio-chemistry. Are there any members in your association who actually use bio-chemic medicines? I would like to know whether you are of opinion that they should be included as homoeopaths?

DR. KANJILAL: I have already answered this.

SHRI PRASANNABHAI MEHTA: Whether you have got any suggestion regarding the 2nd Schedule? DR. KANJILAL: One diploma was given by one Institution upto 1943 viz Dunham Homoeopathic College. That was originally HMB. After that they gave DMS. MDCH. Last of all they have taken up DMS. HMB. The original diploma was also accepted by the Council of West Bengal Faculty. So we think that one addition should be made. HMB upto 1942. In 1919 it was named as Dunham Homoeopathic College and in 1920 it became a regular Medical College for Homoeopathy.

SHRI PRASANNBHAI MEHTA; Do you think that 15 years experience of practice is sufficient to be a representative of the Central Council of Homoeopathy? What should be proportion of being a representative?

DR. J. N. KANJILAL: As I have already said 30 per cent members are nominated and the rest are elected by the practitioners.

SHRIMATI SAVITA BEHEN: It is seen that the nominated seats are 30 per cent. so 30 per cent members of the whole council are nominated. We want to introduce that particular mention should be made about the number of representatives from different Homoeopathic Institutions, as also the number of representatives from the practitioners.

SHRI PRASANNBHAI MEHTA: 30 per cent has been reserved for the registered Homoeopaths who do not have any institutional training. Will you let us know number of such representatives?

DR. J. N. KANJILAL; We have not yet gone through this particular point.

MR. CHAIRMAN: The number of members not exceeding 30 per cent of the total members elected under class 'A' or 'B' who are nominated by the Central Government from amongst the persons who have practical experience in respect of Homoeopathy or allied medical branches—this is already in the Bill. DR. J. N. KANJILAL: We have nothing to say about this.

SHRI MALLIKARJUN: How many Institutions you have in your State?

DR. J. N. KANJILAL: In Calcutta there are already 3 institutions, and another one is going to be opened shortly. There is also one institution in the district of Midnapore.

SHRI MALLIKARJUN: What are the different degrees and diplomas given?

DR. J. N. KANJILAL: Diplomas in Medicine and Surgery are given.

SHRI MALLIKARJUN: We have an institution in Andhra Pradesh where D.H.M.S. certificates are given. Why do we not have a uniform all India faculty in Homoeopathy like the M.B.B.S. in Allopathy?

DR. J. N. KANJILAL: Already the Central Government have formulated a course of D.M.S., almost equivalent to the different diplomas issued by the different top ranking Homoeopathic institutions, but it has not yet been introduced here. I agree that there should be one uniform syllabus and curriculum for the diploma course. There should be one curriculum in all the States, in diploma, degree course and post-graduate course.

SHRI N. G. GORAY: I express our sense of gratitude to all of you for coming here and for narrating us on this particular subject. I may say that we are really grateful for your evidence, which will go a long way in giving an appropriate shape to this Bill. Thank you very much.

DR. J. N. KANJILAL: We are also really thankful to the Joint Committee on the Homoeopathy Central Council Bill. 1971 for taking this trouble of coming over here and for giving us opportunity to express our views

MR. CHAIRMAN: Thank you gentlemen.

[The witness then withdrew.]

[The witness (SHRI J. C. Majumdar, Secretary, Department of Health, Government of West Bengal) was called in.]

MR. CHAIRMAN: Mr. Majumdar, have you got any observation to offer on this Bill?

SHRI MAJUMDAR: We sent a memorandum. I am sorry, it was rather late. In the State of West Bengal we promulgated an Act on Homoeopathy as early as 1964 and as a result of that a Council was constituted. We have got a method by which we have proceeded with registration. This registration is in two parts. Those who have passed through institutions recognised are some entered into Part A. Along with these institutionally trained Homoeopaths there are others who have been in the profession for a pretty long time. Government of West Bengal enforced a very rigid test-so many years of practice to be duly certified by a Registered Homoeopath and also by local representatives. If all these are found to be correct, those practitioners who are found to conform to the standard. are entered into Part B. On the registration roll there are altogether 9.500 practitioners of whom 1600 are Part A registration holders.

The Council has been functioning for the last 8 years, but due to an injunction it was not possible to hold any election so long. The case has been disposed of and we hope a newly elected Council will be installed in the next year. We find that there is a very big demand of homoeopathic treatment all over West Bengal but compared to that the number of trained and registered physicians is exceedingly small. For the present 5 private medical colleges are functioning in this State. Another one has recently been added, bringing the total to 6 altogether. Though there is adequate demand for admission we find that arrangements in some colleges are not satisfactory. They do

require assistance for expansion of their buildings for proper care of patients, equipments for laboratories and libraries and other instruments. Government of West Bengal has been helping these institutions for the last 5 years. In fact, in the Five-Year Plan we have a provision for Rs. 12 lakhs major part of which is being deployed for setting up a State Homoeopathic College and Hospital, but for want of money it has not been possible to make any kind of headway.

As far as the recommendations of the Central Council of Health are concerned, the Council recommended that 100 dispensaries should be set up all over the country. Following that recommendation we have taken a decision to set up 16 dispensaries in the 4th Plan of which 8 should be set up this year and 8 in the last year of the 4th Plan. I am speaking of West Bengal's share. For the whole country the recommendation is 100 dispensaries.

SHRI JUGAL KISHORE: The recommendation is 100 dispensaries for each State.

SHRI MAJUMDAR: I am sorry according to my information from the office, it is 16. I stand corrected.

MR. CHAIRMAN: Is it for the whole plan period or is it for one year only?

SHRI JUGAL KISHORE: This was recommended in 1965 by the Rural Aid Committee that every State shou'd have at least one hundred dispensaries during the fourth plan period.

MR. CHAIRMAN: And from 1965 to 1972, what is the result?

SHRI JUGAL KISHORE: I do not have the figures, I can give that later.

SHRI MAJUMDAR: According to our information this decision was taken in the Central Council[®] of Health

where all State Health Ministers are represented and according to its recommendation-the information which I have got-there should be during the fourth five year plan period hundred dispensaries in the country. But if there is any discrepancy, I stand corrected. According to that pattern the decision which we have taken in the State is to set up 16 dispensaries in the plan period of which 8 will be set up this year and 8 during the next year. We have made already some headway on this. We have actually drawn up the staffings pattern and all that. Lot of home work had to be done in this connection as to what should be the scale and how these doctors should be fitted in the overall pattern. Along with that we have also to take into consideration other administrative matters, viz., prospects of promotion and all that. Unfortunately it took some time to make the whole thing ready and now it is ready and this is before our Finance Department and we expect green signal from that Department within the next few weeks or so. Meanwhile, we have made some headway so far as recruitment of administrative staff is concerned. We have appointed an adviser on homoeopathy. He has been going round and tentative selections have already been made regarding locations where we are going to set up these dispensaries. Once we get the green signal from our Finance Department, it may be possible for us to start work of these dispensaries in the near future.

MR. CHAIRMAN: May we have have your observation on the Bill?

SHRI MAJUMDAR: If I may be permitted to say so, in the Bill we do not find any provision of giving some recognition to those who are already in the field, who did not have any institutional training or who have no degree or diploma. They are the practitioners who have been working in the rural areas—they have experience of work in rural areas as well as in urban areas. They have no training from any institution but there are quite a large number of homoeopathic doctors who are in the field and are rendering very useful service to the community. Quite a number of them will not find entry in Part B of the Register. If we leave them out altogether from our consideration and if we want to make some rigid provision then the people who are being benefitted from their treatment will be hard-pressed. These doctors have been in the field for many years and they do require some kind of recognition. My humble observation will be that the West Bengal Government which promulgated that Bill about eight years ago, that same pattern may kindly be considered, whether that kind of recognition can be extended to the practising doctors who do come up to a certain standard regarding qualifications and experionce and also when they are duly certified by duly qualified doctors. Side by side if we take into consideration the allopathic practitioners, there is a big demand that those who have not been institutionally trained should be given recognition, that means, they must be registered. That, of course, is a bigger question and the problem is now being tackled by the Government of India. They have held meetings with the State Government and that matter is now under the consideration of the State Government. But here my humble suggestion is that following the provisions of the West Bengal Act, the homoeopathic, doctors who have not been institutionally trained, but who do come up to a certain standard having been in the field for the last twelve or thirteen years, they may also be taken into consideration while the question of enlisting them comes up.

MR. CHAIRMAN: Mr. Majumdar, can you give us a copy of the West Bengal Act. and if possible, to each member?

SHRI MAJUMDAR: Madam, for your information, I have got a copy. This I can hand it over to you and I shall find out whether we have got sufficient number of copies for supplying to the Members. In any case we shall make arrangements for supplying copies to all the members within a few days. If that is not possible, we shall arrange to send them over to Delhi.

SHRI JUGAL KISHORE: Madam. I give you the number of dispensaries. Andhra Pradesh—13 (existing capacity), Bihar 6, Kerala 58, and according to my latest information, 64, M.P. —33, Orissa 106, Rajasthan 9, U.P. 39, West Bengal 35, Tripura 7.

DR. K. NAGAPPA ALVA: There are dispensaries run by the State Governments?

SHRI JUGAL KISHORE: That is right.

SHRI N. G. GORAY: In other States there are no dispensaries?

SHRI JUGAL KISHORE: No.

SHRI MAJUMDAR: Madam, 1 think there is some discrepancy. Of course, we have got some private dispensaries which were previously aided by the now defunct district boards. Now their financing is being done by the Zila Parishads and also by the Government of West Bengal. Moreover, there are a number of the nongovernment privately-managed dispensaries. Their number is considerable and quite a number of them have been getting help from the Government of West Bengal. Now, when I mention the number 16, that number was of course in our mind with 12 lakhs that have been earmarked for development we want these dispensaries to be managed entirely by the Government. For the present we have got a large number of dispensaries, some managed by Zila Parishads, some are managed privately and getting aid from Government But these 16 dispensaries that are to be set up in course of the fourth five year plan are to be entirely financed and managed by Government. For that we have to set up a cadre of homoeopthic doctors in the same way as we have set up the cadre of West Bengal Health Service.

मौलाना ईग्राक सांभली : (सबसे पहले प्रापके जरिये से) यह मालू करना चाहता हूं कि बंगाल सरकार का इसके बारे में जवाब क्यों नहीं ग्राया, उनकी क्या डिफी-कल्टी है ? सिर्फ सारी कह देने से काम नहीं चलेगा । क्या जेनुयन डिफीकल्टीज थीं, क्या दिक्करों यीं जिनकी वहज से बंगाल गवनंमेंट ने ग्रान्ग रिप्लाई जोइन्ट सेलेक्टेड कमेटी को नहीं मेजा ।

नम्बर 2---मैं यह जानना चाहता हूं कि हम लोग यह समझते रहे हैं कि बेस्ट वंगाल में, ग्रीर खासकर कलकत्ता म्रीर उसके म्रासपास होम्योपैयी सिस्टम बहुत पापुलर है ग्रीर हमने भी देखा है जव बाहर इधर-उधर के मरीज ठीक नहीं हो पाते तब वे यह सोंबते ह कि कलकता चलना चाहिये, वहां होम्यो पैथिक प्रैक्टिशनसं बहुत ग्रच्छे हैं लेकिन सेक्रेटरी साहब की रिपोर्ट से मालूम होकर हमको वड़ी मायुसी हुई कि यहां पर डिस्नेंक्षरीज इतनी कम हैं और बार-बार उन्होंने फाइनेन्सेज का जित्र किया । म्राज होम्योपैथिक सिस्टम का यहां पर एक्सपीरिएन्स बहुत ग्रच्छा है, वप पापुलर है, पुवर पोपुल को बहुत ज्यादा फायदा पहुंचा रहा है, तो मैं नहीं समझता उसमें क्या दुशवारियां आ रही है कि उन डिस्पेंसरीज को म्रागे नहीं बढ़ाया जाता । मैं मालूम करना चाहता हं कि इस बैकग्राउन्ड में क्या गर्वनमेंट के सामने कोई प्रपोजल है कि वह यहां पर कोई श्रीर होम्योपैथिक कालेजज खोलेगी, उस सिस्टम को ज्यादा एक्सपैन्ड करेगी ग्रीर यहां पर होम्योपैथिक डिस्पेंसरीज को ग्रीर ज्यादा खोला जाएगा ?

ONE MEMBER: Let us confine to the subject only.

WITNESS: Report was sent on 19th September by State-Express telegram. 1648 RS-3. There was the question of getting information, compilation etc. Hence the delay which is regretted.

Regarding the other point, we have got sufficient number of homoeopathic dispensaries in West Bengal. As I said, 16 dispensaries will be State-managed. Decision has already been taken to start 8 of them in this financial year and the balance during the next financial year. Regarding coverage given by private dispensaries, some are aided by zilla parishads, some by Govt. of West Bengal and some by private organisations. There is already a wide coverage in West Bengal. In addition to that there are private practitioners who cover almost all the placesurban and rural. Quite a number of people in West Bengal is interested in having this kind of treatment. It is not a fact that there is insufficient number of homeopathic dispensaries in West Bengal. But I do admit that quite a big ground has yet to be covered. In regard to allopathic facilities even we have got to go a long way. The yardstrick which we have got in this State is to establish one health centre and two subsidiary health centres in each block and we are very near the target.

SHRI L. PANDE: Is there any proposal for a separate directorate of Homoeopathy?

WITNESS: We have got one Hony. Adviser in Homoeopathy who was taken in a few months back. As in the case of Ayurveda we have not got a separate directorate for Homoeopathy but the Health directorate looks after Homoeopathy as well.

SHRI NAYAR: Is the Adviser an IAS or a man coming from Administration?

WITNESS: Our Adviser in Homoeopathy is a qualified homoeopathic practitioner. He is also connected with teaching in an institution. We have got a duly qualified technical man. DR. N. ALVA: Whether any arrangement has been made to inspect these colleges, whether you are satisfied with the conditions for recognition, whether these colleges are having hospitals attached to them and the number of beds they are having and whether these colleges are having laboratories. On these lines what is the thinking of the Government so that the Act can be implemented.

WITNESS: Regarding inspection, we have got a Council of Homoeopathy. We have got a persident and other members. One of the functions of the Council, according to West Bengal Homoeopathic Development Act, is to have a regular inspection before affiliation is given. All the five colleges, as also the one recently added, are being regularly visited and their principals are taking note of it. These colleges have got hospitals attached to them. Govt. of West Bengal have been maintaining some beds in some of the hospitals. Calcutta Homoeopathic Medical College &. Hospital is getting a recurring expenditure of Rs. 33 thousand per year and Govt. is maintaining a number of beds there-I think the number is 30. In addition to this, Govt. have kept a few beds reserved there for which Govt. of West Bengal have been paying regular recurring expenditure to that extent.

Now, I can name another one, that is, Midnapore Homeopathic Medical College and Hospital. Four of course are in Calcutta and one is at Midnapore. Recently there has been one at Kharagpur which is also in Midnapore. There we have been maintaining 10 beds for Government and the Govt. of West Bengal have been paying the recurring expenditure of Rs 10.900. These two hospitals have got beds ear-marked for Govt. in addition to the beds which they have got. We do believe that a teaching institution must have adequate number of beds.

SHRI N. G. GORAY: What will be the total number of beds reserved for Govt. in these Homeopathic colleges? Will the number come to hundred?

WITNESS: No, Sir, because Govt. have reservation of beds in two hospitals. If I remember a right, Calcutta Homeopathic College have 30 beds and Midnapore College has 10 beds, reserved for Government. Now, the total number of beds in all colleges is 196. Out of 196, 40 beds are reserved for Government. Government bear the entire expenditure of those colleges. Regarding admission to Colleges it is leit to the authorities of the colleges. In the D. N. Dey college they have got 50 and in the Mahes Bhattacharya College, Howrah, there are 50 beds and in Mindnapore college there are 30, out of which 10 are earmarked for Govt. The total comes to 196.

Regarding laboratory facilities and research centres I may say that these hospitals have got such facilities although not adequate. I personally visited one of these colleges very recently and found that they do' require a number of equipment and also staff. In the same institution which I visited I found that they have been working with an out-dated X'ray machine. We then passed an order sanctioning purchase of a new machine. Regarding Research Centre, we have not been able to act up a research centre.

DR. JUGAL KISHORE: But there is a Central Research Institute run by the Central Council in Calcutta. Abart from that there are other 2 Research Centres organised by the Central Council. These 3 centres are already there. Of course, these colleges were earlier given grant-in-aid. But now the Central Council has taken up the Research Units and running the same with its own staff. I may also tell that this committee is going to visit the centres and the Director of the Council is also present here.

MR. CHAIRMAN: Whether there is any state owned centre?

DR. K. N. ALVA: Research Centre means centre attached to any hospital. Is there anything like that? DR. JUGAL KISHORE: Centres are attached to the hospitals of the colleges. The Central Research Institute has its own hospital run by the funds of the Council. State Govt. has not been involved in this.

SHRI N. SREEKANTAN NAIR: I would like to know whether it is mandatory for hospitals to have beds. And secondly, I want to know whether there is any type of surgical tuition given in those colleges.

WITNESS: Regarding beds, the Homeopathic Council insist before giving affiliation that the institution must have at least 30 beds. Regarding surgical instruments and all that these hospitals do maintain some surgical facilities. In fact, the other day while visiting a hospital I found that one patient was getting ready for a minor surgical treatment. I came to know from doctors accompanying me that they have been treating patients from surgical point of view, of course minor in nature, and they have some sort of operation theatre and other surgical arrangements.

श्री मार्नासंह थर्मा : डा० जुगल किशोर जी ने मभी बताया कि केन्द्र की श्रोर से यहां रिसर्च सेंटर है ग्रौर हमारे मा जुमदार जी ते जो रिरोर्ट दी है, उन दोनों वातों को देखकर ऐसा लगता है कि सेन्टर की तरफ से जो रिसर्च सेंटर यहां पर है ग्रौर स्टेट गवर्न मेंट के जो प्रस्पताल हैं, उन दोनों में आपस में कोई को प्राइनेशन नहीं है। मैं माजुमदार जी से पूछना चाहता हूं कि जो ग्रापके प्रस्पताल हे ग्रीर जो यह रिसर्च इस्टेंट रूशन हैं, उससे ग्राप फायदा क्यों नहीं उठाते हैं। प्रभी प्रापते वतलाया कि कि स्टेट सरकार इसमें इन्वाल्व नहीं है, तो मैं यह जानना चाहता हू कि ग्राप इन रिसर्ट सेन्टरों का फायदा क्यों नहों उठाते ?

DR. JUGAL KISHORE: I want to make it clear that Research is a central subject and State Govt. is not inwolved in it and the grants are given by the Centre. These colleges benefit because of research programmes. Students and staff also benefit by the research programmes. For example, B. N. Dey, College, Midnapore, have been doing discovery of new properties of some of the indigeneous plants.

MR. CHAIRMAN: Mr. Jugal Kishore, where do you get human research materials if you are not attached to a hospital?

DR. JUGAL KISHORE: Madam, the Central Govt, through the Central Council has been providing certain beds also. There again, that is a sort of additional facility for the institution.

I mean the State beds are entirely meant for the medical care whereas the research beds in colleges are specially earmarked for such programmes. There are two colleges, one at Midnapore and the other one is D. N. De Medical College, Calcutta. One was attached to the Calcutta Hospital. That has been discontinued now at their own request. Apart from this there is central Research Institute in homoeopathy. There we have a small hospital and you will be happy to know that institution is working satisfactorily although it has started functioning very recently. So far my experience goes the State governments have not been involved either in education or elsewhere and as far as the colleges are concerned I do not think that the West Bengal Government has given any money to the educational side. The Central Government gives 75 per cent for the development of these institutions and we expect that the State Government would come forward to pay the balance. This position is not only with regard to the State of West Bengal but the approach of other State Governments is not also encouraging.

ONE MEMBER: Is there any remarkable achievement of the Research Centre?

SHRI JUGAL KISHORE: This Centre is experimenting with some new drugs which are going to be very useful in the treatment of various chronic diseases, such as chronic amochiases, diabetes, asthma. Another indigenous drug has been found which is also very useful for the treatment entero colitis, and chronic amebiosis. This amebiosis is one of burning problems before us. As you know allopathic treatment cannot eradicate the amebiosis disease fully, it can only palliate to some extent. We have started experiments with three drugs. They are still in the infancy stage but after a few months you will surprised to see their worth.

SHRI JANAKI BALLAV PAT-NAIK: You are proposing to establish a college during the 4th Five Year Plan. How many beds do you propose to attach with the proposed college?

SHRI A. K. MAJUMDAR; Madam, before I start answering the question put by the honourable Member, I would like, with your permission, to refer to the remarks made just now by Shri Jugal Kishore that the State is not giving anything to this Homoeopathic Institutions apart from the question of paying grants-in-aid for maintenance of beds. Madam, this remark is not justified by facts. I can take up one institution viz. Calcutta Homoeopathic College. We have given them Rs. 15,00 in 1969-70, the same amount also in 1970-71 and in 1971-72 we gave them Rs. 20,000. Then we have given to D. N. De Homoeopathic College in 1969-70 Rs. 15,000, next year we have given them Rs. 20,000 and last year we gave them Rs. 30,000.

MR. CHAIRMAN: Is that for the college portion?

SHRI A. K. MAJUMDAR: Yes, Madam. From the point of view of the Government of West Bengal it is not possible to take up its entire management. Government is trying to do whatever is possible from out of their limited resources. We have not got a State managed college or a State managed hospital. When we have that State managed college or State managed hospital we shall certainly get ourselves involved in the research portion. For the present we are entirely dependent on the five private Institutions. From that point of view it is extremely difficult, if not, impossible, on the part of the Government of West Bengal to get involved in the research programme. Madam, these private colleges and hospitals are even getting help not only for the purpose of maintenance of their beds but for college portions as well. That expenditure which we give them runs to Rs. 20,000 per annum. So far as the State managed college or hospital is concerned it is still being worked out. In the 4th Five Year Plan we have not got the necessary finance to establish a State managed college or hospital. We have only 12 lakhs of rupees which would be required to meet the requirement of the existing institutions. After meeting their require- 1; ments there will be hardly any amount left to take up this ambitiious scheme of setting up a State managed college or hospital. We have made the provision to double the fund in the 5th Five Year Plan. The approach papers have already been made ready. Besides, for starting the State managed college or hopsital we have to acquire the land, start construction, get the necessary equipments, have staffing properly and get qualified people, and all these would take sufficient time. So within this one and a half years left in this 4th Five Year Plan we have neither got the resources nor we think it to be worthwhile to make an attempt to establish a State managed hospital or college knowing full well that it will not be possible to start the construction. So far as Shri Jugal Kishore's suggestion is concerned we welcome it. We have already visited some institutions and had with discussions them. But 85 these institutions are private institutions they have got their own patterns and naturally we have to consult them as to which portion of the building is to be dismantled and which portion is to constructed anew

there are various factors and Had these institutions been also. managed by the Government then there would not have any difficulty and we could have taken decisions straightaway. When we visited some of these institutions we requested them to prepare plans and estimates and, in fact, some of the papers have already come to us.

SHRI BHAOOSAHIB DHAMAN-KAR: What are the views of the West Bengal Government on point No. 12.

SHRI BHAOOSAHAIB DHAMAN-KAR: What should be the steps to raise the status of a homoeopathic doctors and dispensaries as per the alopathic doctors?

SHRI A. K. MAJUMDAR: We have already worked it out. There are several factors involved in it. When we take our doctors in our existing services i.e. the West Bengal Health Services, there we have got a wellknown prescribed channel. There is a basic grade, then selection grade and after that there is a special selection grade. Whenever an officer joins this service he knows the prospects of this comes into this service before he cadre.

MR. CHAIRMAN: Please refer about the homoeopathic doctors and dispensaries with that of alopathic—whether they get equal treatment from the Government of West Bengal.

SHRI A. K. MAJUMDAR: As far as the West Bengal Government is concorned, certainly they will get equal attention from the Government. Regarding the status, we find that they would get equal pay and equal rank commensurate to their qualifications and experience. We have taken a decision that they should be given gazetted status.

SHRI RANA BAHADUR SINGH: Will you please let us know what are the systems of recognition for issuing licences to the persons who are already in practice?

SHRI A. K. MAJUMDAR: The persons, as I have already said, who are already in practice for some time, must be considered for giving some sort of recognition because they have been, rendering a very useful services to the members of the community. We have got our enactment in West Bengal Homoeopathic Act, 1963 and there we have divided these practitioners into two groups-(1) those who have been institutionally trained are not difficult to identify because they have got degrees and diploma from recognised institutions and (ii) for the others, it is not also very difficult to identify them. The provision we have got in our Act and in our schedule is transcribed as follows "Regular practice of the homoeopathic system for a period not less than 3 years immediately before the recommencement of this Act subect to the passing of examination mentioned in the proviso of subsection 2 of Section XXI". That means those who have roughly practised for about 10 or 12 years, are duly certified by a registered practitioners as well as by the responsible persons of that locality over and above they have to undergo some sort of test before the Council so that the Council members may ascertain whether they can be allowed to run on with their practice.

श्रीमतो सविता बहिन : मैं यह कह रही हूं कि सेन्ट्रल गवर्नमेंट की तरफ से जो इस वारे में स्कीम है ग्रीर उनमें ग्रभी तक जो सहूलियतें दी गई हैं या दी जा रही हैं, उनके बारे में एक ब्रोक नोट ग्रा जाय तो मेम्बरों को सजेशन देने में फायदा हो जायेगा ।

DR. K. NAGAPPA ALVA: The present position is, for example, in Mysore State, there are two types of registration. The part I is for the persons who are institutionally trained and the part II is for the persons who are experienced in their practice. There is a Homoeopathic Medical Association in the State and they have already become members of this Association because they are practising in that system of medicine. It is necessary that such people also have to be included otherwise there will be difficulty. As the Central register is one and the State register is different there is also some difficulty. They must have co-ordination, and for those whom the State Government would agree the Central Government would also agree. After this enactment, it will be necessary for us to conduct examination or verify whether they are actually practising in this system or not.

SHRI MALLIKARJUN: What is mode of admission in the institutions in your State?

SHRI A. K. MAJUMDAR: Generally, there is a tremendous rush of students for admission into these institutions. Regarding selection for admission, there is a method of the authorities of their own—Government do not interfere into it. My presumption is that the admission is on merit basis. They generally invite applications and after getting applications the best suitable candidates are selected on the basis of examination or interview.

SHRI K. RAMAKRISHNA REDDY:¹ What is the best suitable person? What is the minimum qualification?

SHRI A. K. MAJUMDAR: The minimum qualification is Higher Secondary with science.

SHRI N. G. GORAY: Is there any capitation fee?

SHRI A. K. MAJUMDAR: No Sir.

MR. CHAIRMAN: Shri Majumdar, before you finish your evidence we would like to know on behalf of this Committee about the reaction if we introduce any penal clause for the doctors possessing M.B.B.S. degree but practising in homoeopathy without the requisite. institutional training in homoeopathy? My second point is, if the homoeopathic doctors without having the M.B.B.S. degree practise in allopathy what would be the reaction. of the State Government. You need not reply now. Please send us a note on that.

SHRI JANAKI BALLAV PATNAIK: I would like to thank the Health Secretary, Mr. Majumdar, for coming over here and giving us interesting information and answering the questions put by the members. I hope the Committee will be greatly benefited by the information given by him.

SHRI MAJUMDAR: My thanks are due to the honourable members and Chairman of the Committee for giving a pateint hearing. This has been a very, very interesting experience for me in appearing before this august body. I thank you all.

[The witness then withdrew.]

[The witnesses Dr. S. B. Kar, Principal, Singhbhum Homoeopathic Medical College and Hospital, Jamshedpur and Dr. T. S. Saggu, Secretary and Dr. R. P. Singh, Assistant Secretary of the Association were called in].

MR. CHAIRMAN: Gentlemen, please note that whatever evidence you give before this Committee are strictly confidential and should not be divulged outside before the proceedings of this meeting are placed before the Lok Sabha.

चेयरमैन : भ्रापको क्वेशनायर के जवाब में जो बोलना है वोलिये ।

डा॰ सग्गूः हम लोगों के एसोसिएभन की तरफ से म्रालरेडी रेप्रेजेन्टेशन दिया जा चुका है। हम लोग उसको पूरी तरह सपोर्ट करते हैं।

श्री के॰ रामकृष्णा रेड्डोः सेन्द्रल कौसिल का जो विल है क्या ग्रापने उसे ग्रच्छी तरह देखा है ? उसमें कुछ सुझाव करना है आपको ?

सःस्ती : जहां तक इस विल में रजिस्ट्रे-णन का सवाल है, जैसा स्टेट-वाइज चल रहा है उसी को अगर फेंटर मान लें तो ज्यादा अच्छा होगा। जैसे हर स्टेट में रजिस्ट्रेशन हो रहा है, उस स्टेट की रजिस्ट्रेशन की बेसिस पर अगर सेन्ट्रल रजिस्ट्रेशन हो जाए तो हम लोग ज्यादा बेहतर समझेंगे क्योंकि इससे दूसरे स्टेट्स में ग्रापस में झगड़े नहीं होंगे। एक वार रजिस्ट्रेशन हो जाने के बाद कुछ लिसिटेशन्स हम लोग डाल सकते है कि फर्दर रजिस्ट्रेशन एक पटिकूलर बेसिस पर होगा।

श्री के॰ रामकृष्ण रेड्डी ः ग्रापके स्टेट में गेडयूल 2 के मुताविक पूरे इन्स्टीट्यूजन दर्ज हो चुके हैं ?

सभापतिः देखिए, इस बिल के जेड्यूल 2 में कुठ इन्स्टोट्यू शन्स का नाम लिखा है, उन इन्स्टोट्यू जन्स के क्वालीफाई होने से भी वह मान्य होगा—इस के बारे में भी क्या ग्रापको कुछ बोलना है ?

.**साक्षी**ः नहीं ।

श्री लक्ष्मी नारायण पांडेय : यह बताइए, प्रापके स्टेट में कौन-कौन सी डिप्लोमा-होल्डसं को मान्यता दे रखी है रजिस्ट्रेगन के लिये? दूसरी बात यह है कि क्या उन लोगों को भी रजिस्ट्रेगन दिया जाता है जो डिप्लोमा-होल्डसं नहीं हैं—-उनको कितना तक लिमिट कर रहे हैं ? ग्राप क्या यह चाहते हैं ऐसे लोगों को रजिस्ट्रेगन दिया जाए जो 15 या 16 वर्ष से प्रैनिटस कर रहे हैं ?

DR. S: B. KAR: I was a member of the Bihar State Homoeopathic Medicine, Patna, and that is why I have got the knowledge that Bihar made certain limitation to accord registration.

SHRI'K. R. REDDI: What were the conditions for according registration?

DR. S. B. KAR: They must be matriculates and 3 years' practice before 1951. That was the condition in the State Act. Accordingly they accorded registration to about more than 10 thousand bomoeopaths in Bihar. There are about 33 thousand enlisted homoeopaths in Bihar—they are not registered but they are allowed to practise. Out of them 10 thousand are registered.

SHRI M. S. VARMA: And these 10 thousand are qualified?

DR. S. B. KAR: Before 1951 there was no institution in Bihar and after establishment of the Bihar State Board they only started recognising the institution.

SHRI M. S. VARMA: It is presumed that all of them are not institutionally gualified?

DR. S. B. KAR: No, there are certain persons who are institutionally qualified from West Bengal or from other States.

SHRI K. R. REDDI: That means, in some other states by paying 25 rupees they got registration.

DR S. B. KAR: It was 25 rupees in Bihar also but there was some limitation of period and after that period registration was stopped.

SHRI K. R. REDDI: Are there no doctors of that category in that state now?

DR. S. B. KAR: Yes, existing those who are enlisted practitioners but they have been placed in separate category.

SHRI K. R. REDDI: Are you of opinion that doctors who get the certificate on paying a sum of money should also continue in future?

DR. S. B. KAR: No. They should not because the institution is there to recognise those who are qualified.

SHRI K. R. REDDI: What kind of action should be taken against people who would continue practice?

DR. S. B. KAR: They should be penalised. There are certain provisions already made in the Act. SHRI K. R. REDDI: What action is being taken by your Government?

DR. S. B. KAR: No action is taken although provision is there in the Act.

SHRI K. R. REDDI: And you want the committee to recommend some action. If so, what action?

DR. S. B. KAR: The provisions in the Act should be strictly followed. In Bihar there is a provision that those who will practise without having the registration will be at the first instance fined Rs. 50 and for the second instance Rs. 100 as well as 6 months' imprisonment.

DR. S. B. KAR: If they are registered under the category of paying 20 or 25 rupees?

DR. S. B. KAR: I am talking about those who are not registered, but the registered practitioners are considered as ful-fiedged doctors. They are given all the facilities in the Act and as such they should enjoy the facilities.

DR. JUGAL KISHORE: Regarding registration fee Dr. Kar said that certain registration fee is to be paid by the candidates. Under the rules of the Board the candidates are to pay that fee and Dr. Kar is referring to that. But the honourable member is mentioning about buying certificates on payment of Rs. 20 or Rs. 25. So, there is a little confusion.

DR. S. B. KAR: Purchasing of Diplomas by Rs. 25—that is not in vogue in Bihar. That is not accepted by the Government.

SHRI J. B. PATNAIK: You have said in your reply to questionnaire that only registered practitioner should be included after careful scrutiny. What do you mean by careful scrutiny?

DR. S. B. KAR: 'There should be careful scrutiny because there are certain practitioners who are not registered and they are using their enlistment numbers as registration numbers.

DR. T. S. SAGGU: During the period of registration anybody who could pay a fee of Rs. 25 and show a certificate that he had 10 years' practice could be registered. That does not require even any training.

OFFICER, MINISTRY: Certificate from whom?

DR. T. S. SAGGU: From a gazetted officer.

SHRI PATNAIK: You say there are many fictitious practitioners. So how the Board will scrutinise them?

DR. T. S. SAGGU: Government should verify it through some sort of inspection to find out who is really practising.

SHRI GORAY: Supposing in this Bill we suggest that the doctors should submit themselves to a fresh examination and if they pass out then they will be registered. Of course, this will be done only for those who have no institutional training. What is your comment.

DR. T. S. SAGGU: Those who are practitioners and really practising should be debarred from submitting themselves to fresh examination but those who are not practising should be asked to do so.

SHRI GORAY: How do you know if they are practising or not?

DR. T. S. SAGGU: It is for you to find out.

SHRI K. REDDI: Do you support the view that a homoeopathic doctor should use allopathic medicine in case of emergency?

DR. SAGGU: Unless proper training is given he should not be allowed to do that. I can tell you in this connection that in certain colleges in Calcutta they teach side by side some of the methods of allowathy. MR. CHAIRMAN: Do you support homoeopathic doctor practising in allopathy?

DR. SAGGU: Certainly not.

MR. CHAIRMAN: Do you recognise that such homoeopathic doctors will give allopathic medicines in times of emergency *e.g.* when cholera breaks out?

DR. SAGGU: No, unless he is given proper training.

SHRI B. DHAMANKAR: May I know what a homoeopathic doctor will do in case, a cholera breaks out. Whether he will not administer saline.

DR. SAGGU: Giving saline is not necessarily allopathic treatment. It's an auxiliary method which can be employed by any pathy (with necessary training).

SHRI B. DHAMANKAR: Do the homoeopathic doctors not resort to it?

DR. SAGGU: Not necessarily. Their medicines are sufficiently potent.

MR. CHAIRMAN: To combat dehydration do you have homoeopathic medicine?

DR. SAGGU; Yes.

MR. CHAIRMAN: If we pass this Bill in both Houses of Parliament some colleges and institutions whose names do not appear in this schedule will not be allowed to issue certificates after the students pass their examinations. In that case you will be debarring your students from getting the certificates. Or, is it that those institutions which are recognised by the State Governments will be automatically recognised by the Council?

DR. KAR: Yes, that is the position. This has also been mentioned in the schedule.

SHRI K. REDDY: Is it not necessary that those institutions which are being recognised by the State Government should be included in Schedule No. 2—I am referring to two colleges in Andhra Pradesh.

OFFICER, MINISTRY: In Andhra Pradesh there is a peculiar situation. If you have to include them we will agree. There are two bodies and both the bodies are State bodies and they will have to be included in the Second Schedule.

MR. CHAIRMAN: It is not necessary. The Bihar State Board of Homoeopathic medicine is included and the diplomas or certificates which are issued by this board will automatically be recognised.

SHRI K. RAMAKRISHNA REDDY: But the State Board should find a place in the Bill

MR. CHAIRMAN: In the main body of the Bill it is written that whichever institutions are in the Bill they will be automatically recognised.

श्री चिरंजीव झा: मैं जानना चाहता हूं, अगर इनके पास कोई इस तरह का पेशन्ट पहुंच जाये जो दांत का वीमार है और उसको बड़ा दर्द है, दांत उखाड़ना जरूरी है, तो यह क्या करते है ।

साक्षी : डेन्टिस्ट के पास भेजते हैं ।

भी चिरंजीव झा: मान लोजिए उसका दांत उखाड़ना जरूरी है, वह दांत खराब हो गया है....

साक्षीः वह भी उखाड़ेंगे।

श्री चिरंजोव झा : तो क्या उनके भास इस सम्बन्ध की जानकारी है । क्या उनके क्लासेख में जो शिक्षण देते हैं उसके ग्रन्दर जैसे ऐलोपैथिक तर के में इंजेक्शन दिया जाता है, उस हिस्से को सुन्न करने के लिये, तो क्या ये लोग भी उसका इस्तेमाल करते हैं या नहीं करते हैं ? साक्षी : इन्स्टोटयू जन में जो ट्रेनिंग दी जाती है उसमें बताया जाता है कि किस किस्म का दांत उखाड़ने लायक है या नहीं है । इतनी जानकारी लग जाने के बाद उस केस को डेन्टिस्ट के पास मेजेंगे । वह डेन्टिस्ट तो नहीं है । उसका काम दांत उखाडने का नहीं है । ही इज फीजि-शियन ।

चेयरमैन : एलोर्गय डाक्टर के पास आप जार्वेंगे दह भीं कहेगा डेन्टिस्ट के पास जाग्री ।

श्री चिरंजीव झा: मैं यह जानना चाहता था कि क्या उनके यहां डेन्टिस्ट का ग्रलग डिपार्टमेंट है ?

साक्षी: डेन्टिस्ट का डिपार्टमेंट तो अभी तक अलग हुग्रा नहीं। न गवर्नमेंट ने किया, न सिलेवस में ही किया। हम प्रभी विचार कर रहे हैं डेन्टिस्ट को भी उसमें शामिल करेंगे। दैट इज्ञ इन फ्यूचर।

श्री चिरंजीव झा: ग्रापने कहा कि केस हम डेन्टिस्ट के पास भेजते हैं। लेकिन ग्रापके पास में उसका कोई डिपार्टमेंट नहीं है, क्या इस तरह की व्यवस्था नहीं है ? तब तो ग्राप ऐलोपैय डाक्टर के पास मेज . देते होंगे ।

साक्षी : नहीं, डेन्टिस्ट के पास भेजते हैं।

चेयरमैन : वह तो म्रलग से हैं। होम्यो-पैथ भी नहीं हैं, ऐलोपैथ भी नहीं ह ।

श्वी चिरंजीव झा : एक चीज में पूछ लू, फिर से श्राप जवाब दें। ग्रगर ग्रापको इन्जेक्शन देना पड़े, उसकी जानकारी ग्रापको हो जाए ग्रीर ग्रापको इंजेक्शन देकर सहू-लियत के साथ उसका दांत निकालना पड़े तो क्या ग्राप इसको ऐलोपैथी के प्रयोग से करेंगे या होम्योपैथी के प्रयोग से करेंगे ? (Interruptions)

WITNESS: Sir, I withdraw my words.

श्री चिरंजीव झाः प्राप जरा ग्रान्सर कीजिर इत प्रग्न का।

साक्षो : ग्रगर दांत का दर्द किसो को . है तो हमारे पास काफी साधन हैं, दर्द को हम दूर कर सकते हैं। दांत को उखाड़ना है तो डेन्टिस्ट के पास उस केस को भे जेंगे । दांत को उखाड़ने में जो दर्द होता है उसके लिये भी दवा का साधन हमारे पास है, जैसे इन्जेक्शन -देकर के एक हिस्से को सेन्सलेस कर देते हैं उस तरह का साधन हमारे पास है। रोगी को दर्द नहीं मालूम पड़ेगा। खुद मेरे दांत में दर्द हुग्रा था तो मैंने दवा लगाई ग्रीर ग्रपने स्टाफ को वोला कि दांत एक्स्ट्रैक्ट कर दी। मैं डेन्टिस्ट के पास नहीं गया। इस तरह मैंने अपने 8 दांत निकाल दिये हैं। ग्रभी मैं 60 साल का हूं।

श्री चिरंजीव झाः मैं यह जानना चाहता था कि ग्रापके पास क्या कोई ऐसी दवा है जो कि उस हिस्से को सेन्सलेस कर दे?

डा० जुगल किशोर (म्राफिशियल) : ग्रोरमी का ।

SHRI JUGAL KISHORE: I will try to explain some of the points raised by the honourable Members. These are very pertinent questions. It is that surgery, especially its mechanical technique is a different branch in itself. It is neither homoeopathy nor allopathy. Untimately medicine is one. Now, homoeopathy operates according to certain principles. Allopathy has also got certain tools for mechanically anaesthatising certain parts by using modern medicines. 1

In my opinion on the humanitarian ground local or general anaesthesia may be used for extraction of teeth, It can be developed by the Allopathic Doctors or by the Homoeopathic Doctors. I have seen that some Dental Surgeons use Arnica before and after the extraction of leeth to relieve the patients of their pains.

In this regard I like to state that my nephew, a qualified dental surgeon sometimes used Tetracycline after extraction. On several occasions he used Arnica before and after an extraction. He was surprised that the use of Arnica instead of Tetracycline gave better results. Healing is quicker. He has experimented with Arnica in 40 to 50 cases. These were, of course uncomplicated cases.

Regarding Pathology it is not an Allopathic subject. Whenever there is kidney failure because of Patholoyd kidney and there is a rise in blood urea, we are faced with a Pathological condition. Regarding virus and bacteria our treatment is not entirely based on the discovery of them and we do not try to kill them, but the homoeopathic treatment inproves the dynamic resistance of the host so that virus and bacteria say goodbye and disappear. Instead of Tetracycline we use Belladinne etc. for combating some of the common infections.

MR. CHAIRMAN: Dr. Kar have you got any suggestion on the points of Homoeopathic education?

DR. S. B. KAR: As regards institutions, I have something to say about the standardisation of education throughout India. A faculty should be formed under the control of the Central Council and that faculty should control examinations in all the States. If the State Boards are allowed to conduct the examinations, the standardisation is bound to differ. That is why I have already suggested that there should be one Central Homoeopathic Education Faculty and that should control the whole education system in India.

SHRI BHAOOSAHAIB DHAMAN-KAR: There are Allopathic doctors who are practising in Homoeopathy without having requisite institutional training. Do you suggest to penalise such doctors?

• DR. S. B. KAR: I do not think that there is any necessity of penalisation —they should not do it. Those who are already registered or enlisted in Homoeopathy should be allowed to practise.

MR. CHAIRMAN: Do you suggest to penalise the Homoeopaths who practice in Allopathy?

DR. S. B. KAR: In this case also I consider that they should not be allowed to do that.

SHRI T. G. DESHMUKH: वायरेंस श्रीर वैक्टेरिया को ग्राप होम्योपैयी में मानते है।

श्री मान सिंह वर्मा: अध्यक्ष महोदय, मैं ग्रापकी ग्राजा से होम्योपैथी एसोसिएशन सिंहभूम तथा दूसरे सदस्यों को धन्यवाद देता हूं। ग्राप लोगों ने यहां ग्राने का जो वष्ट किया श्रीर हम को ग्रपने विचारों से ग्रवगत कराया जिसके ढारा हम को होम्योपैथी के विषय में ग्रीर ग्रापके एसोसिएशन के वारे में विचार सुनने को मिले ग्रीर इन विचारों से सदस्यों को लाभ हगा।

मैं कमेटी की तरफ से फिर आप लोगों को यहां ग्राने के लिए घन्यवाद देता हूं। [The witnesses then withdrew.] [The Committee then adjourned.]

Thursday, the 28th September, 1972.

(AT CALCUTTA)

PRESENT

1. Shrimati Purebi Mukhopadhayay—Chairman.

.

Members

Rajya Sabha

2. Shri Bhupinder Singh	7. Shri T. K. Srinivasan
3. Shri N. G. Goray	8. Shri Sultan Singh
4. Dr. K. Nagappa Alva	9. Shri N. P. Chaudhari
5. Dr. Debiprasad Chattopadhyaya	10. Shri T. G. Deshmukh
6. Shri Man Singh Varma	

Lok Sabha

11. Shri Ziaur Rahman Ansari	21. Shri Prasannbhai <u>Mehta</u>
12. Shri Bhacosahaib Dhamankar	22. Shri N. Sreekantan Nair
13. Shri Hiralal Doda	23. Dr. Laxminarayan Pandeya
14. Shri Nageshwar Dwivedi	24. Shri Janaki Ballav Patnaik
15. Shri Madhuryya Haldar	25. Shri S. L. Poje
16. Shri Chiranjib Jha	26. Maulane Ishaque Sambhali
17. Shri Ramachandran Kadannappal-	27. Shri M. Satyanarayan Rao
li	28. Shri Umed Singh Rathia
18. Shri B, R. Kavade	29. Shri K. Ramakrishna Reddy
19. Shri T. S. Lakshmanan	30. Dr. Sankata Prasad
20. Shri Mallikarjun	31. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy.

5

SECRETARIAT

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Shri M. K. Jain, Under Secretary.

WITNESSES

(1) Representatives of the Calcutta Homoeopathic Medical College and Hospital, Calcutta:

(i) Dr. B. K. Bose, Secretary, Calcutta Homoeopathic Medical Society.

(ii) Dr. R. Ghoshal, Principal.

(iii) Dr. P. C. Paul, Vice-Principal.

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• 1.

(iv) Dr. S. C. Ghosh, Administrative Officer.

- (2) Representatives of the All Orissa Homoeopathic Medical Association Puri:
 - (i) Dr. Bhagwanprasad Das, General Secretary.
 - (ii) Dr. Devraj Rautaray, Member Executive Committee.
- (3) Dr. Satchidananda Das, Puri.
- (4) Dr. Bhupen Bijali, MLA, West Bengal, Bata Nagar.

[The witnesses (Representatives of the Calcutta Homoeopathic Medical College and Dr. B. K. Bose, Secretary, Calcutta Homoeopathy Medical College) were called in.]

MR. CHAIRMAN: Friends, let me tell you that whatever evidence you will tender before this Committee will be treated as strictly confidential and as such you must not discuss these things with anybody else nor should you publish them in any paper. We have received your memorandum. Now you can make your observation on any point you think best.

DR. GHOSAL: I am the Principal of Calcutta Homoeopathy Medical College for the last fifteen years and before that I was a teacher in that Institution for more than 20 years. So my service in the Institution comes to about 35 years. Ours is the best Homoeopathy institution in the whole of India and we consider we have been serving the cause of Homoeopathy in the best possible way and we claim recognition for that. As regards one point-excuse me, I am not a lawyer, I am a doctor-I have been under the impression that the Central Act should not go against the provincial Act which has already been passed. That is the basic point in law. This should not be contradictory. I find in this Bill such a contradiction is there. On my right side is Dr. B. K. Bose, Secretary of the Institution, who is a direct disciple of Dr. Kent, next only to Dr. Hannemann, the greatest authority on Homoeopathy. Dr. Bose is an M.D. of Amedican University. For over 50 years he is serving this Institution and I

should think he is the father of all homoeopaths all over India. All homoeopaths respect him. Then we have another teacher who is serving this Institution for over 40 years. I am a Graduate of Medicine of the Calcutta University, I am a Master of Science of the Calcutta University, I hold a Diploma in tropical Medicine from the Liverpool University and there I stood first. With this background I am serving this Institution and the Bengal Government in their Homoeopathy Medical Act of 1963 allowed my name to be retained in Schedule A which means you not only allow a person to practise homoeopathy but you are also allowing him to become a teacher in Homoeopathy. Dr. Bose's name is also retained in Schedule A but under this Bill we find we are hot allowed to work as teacher of an institution. That is very pathetic. Those who have been creating hundreds of D.M.S., B.M.S., HMBS, those who have been teaching them for over 50, 30 years are being debarred from remaining as teachers.

SHRI GORAY: Will you kindly explain your point?

WITNESS: Under section 15(2) (b) if your name is registered in Schedule A of a State you can practise homoeopathy. I should recommend that after the words "to practise homoepathy" in Section 15(2) (b), the words "and be appointed as a physician or as a profesor in any Government or other Institution" be added. They have been serving their for over 50, 30 years and suddenly by an Act if you deprive them that is not fair. West Bengal Government has allowed them to remain in Schedule

A. Therefore, this is the modification that I am recommending.

As regards the second point i.e. in regard to section 5(1), we should also be allowed to stand for election in the Central Council. We may not be D.Ms but we are producing D.Ms. I am an examiner of D.Ms since 1943. I was a member of the Faculty of Homoeopathic Medicine West Bengal, for so many years. I have examined thousands of students who have passed their D.M.s and other examinations. When they are allowed to get their right I am debarred beause I did not sit for D-M-s though I was producing D.M.S. when that course was introduced. So, teachers who are in service should be allowed to continue. These are the two basic points. Another point I request the honourable members to remember. Our college is the oldest college, established in 1881, we have erected it brick by brick, and its contribution is great. This afternoon we are all expecting you to receive in our college. You will see how we have suffered and how we have sacrificed for this college. Students from all over the world come here. We have 20/30 students from Kerala. We have students from Gujarat. Punab, U.P. and from Bihar we have about 200 students. Even we have students from Ceylon, Arabia, Egypt and from Central Africa-from all over the world I should say, and we teach them and send them as messenger, as homoeopaths, to their country. So, we expect that when you nominate the first Council one of us be nominated as a member of the Council. This is my prayer to you. With these words, Madam, I conclude.

DR. B. K. BOSE: First of all, I thank you for giving me this opportunity to speak. I am an old man but Homoeopathy is not old. Old people are not wanted because they have no power to stand but Homoeopathy is something different—it has power to help all—timid and the strong. Hehnemann said that Homoeopathy is

meant not for the animal but for human being, and Homoeopathy is a science like any other science. If you look to the history you will find what amount of sacrifice was there for improvement of this science. I should say that Homoeopathy is fighting the disease, fighting the mind of the people. In Homoeopathy we try to follow the principle of nature cure. Gandhiji believed in nature cure. C. R. Das said, "I have suffered a lot, but if I am ill I won't take any other medicine but homoeopathy." Swami Paramahansa Dev said that he would take homeopathic medicine and not anything else. There are thousands of people, ill-fed and fil-clad people, in India who depend on homoeopathy. In the filed of homoeopathy Bengal can be proud of its contribution. Even Gandhiji admitted this. Homoeopathy is the only solution to poor men's problem. I do not support that homoeopathy and allopathy should be mixed up together. These are two different kinds of theory and I believe in one theory. I believe in curing the disease. Let there be no disease, let there be no inequality and let there be fair play. Sir, it is a great pleasure that you have come here. I know that you are the law makers and you are the juror and saver and so I ask you, don't hang us, don't condemn us, but give us life, help us to stand. Let there be no hungry man, let there be no illness, and you can give a little blessings, a little medicine to them. I say that men must have human heart and human mind for solution of poor men's problem. In this vast country millions of people are suffering from diseases. What is the cause of the diseases? Education? Sanitation, hunger or unemployment? What is the cause and how to remove the cause and how to solve the problem. You are to find out the cause and then only the question of life will arise. Sir, I again appeal to you that do not deprive us from our kingdom from where we can serve our brothers and sisters in India. It is your bounden duty to help us to remove the cause of human sufferings. So, treat us as human being and be kind to us.

DR. K. N. ALVA: Have you got any specific point? We expect some specific suggestions from you.

DR. B. K. BOSE: Sir, Hahnemann said to Homoeopathic practitioners that they should follow word by word the books that he has written. It is a science to be studied like any other science and particularly the medicines are to be put to healthy man and not to animals. I may remind you that I have attended the Dhave Committee and Mudaliar Committee whose final recommendation was that homoeopathic practitioners should practice pure homoeopathy and they should not be allowed to mix up with any other system; good or bad it might be. Dhave has said that let there be fair judgment so that all homoeopathic doctors and homoeopathic institutions should be given equal chance by giving them proper monetary aids and proper education and all such things. Then after 20 or 30 years we shall come to know as to whether people homoeopathy or not. You wants have come because you know that we have done something for the cause of homoeopathy which has also touched the heart of Parliament and the Members of Parliament have come over here to take a final decision on the The matter is very simple matter. that the grievances of the homoeopaths should be recognised. My prayer to you is that you help my Institution and other Institutions also equally. Ask the Institutions to improve, ask them to give pure homoeopathy and I want pure homoeopathy and nothing else. You have asked me to give my suggestions. But what suggestions I will give? Can you change a man? Can you make a poisonous thing a non-poisonous one. You suggest yourselves when you have come to consi-. der our case. You must know what is homoeopathy and then you can certainly do justice to its cause.

MR. CHAIRMAN: Dr. Bose, you have gone through the Bill and you should not be misled or have any apnrehension in your mind with regard to any provision of the Bill. In this

Bill, nowhere we have suggested that those who are already practising homoeopathy and teaching in homoeopathic colleges are going to be disturbed in any way whatsoever. In the West Bengal Act also about which Dr. Ghosal has mentioned, there is also no such provision for laying down qualifications to be a teacher of a Medical College Just like that this does not preclude any person who is already teaching in a homoeopathic college from being recognised by the Council or to be debarred from becoming a teacher, that college being already recognised by the Govern-ment and by the Council. So who told you that we are going to debar you and not allow you to be continuing in the profession. There is no such restriction and so your amendment with regard to clause 5(1) and the extra clause that you have suggested, are not necessary. As a member when you are recognised as a registered homoeopath it means that you have qualification to have additional posts or positions that in future you can acquire. So, you should - not press that everything should be in the statutes. In the statutes there would be qualifications to be a registered practitioner in homoeopathy. And when you are recognised as a registered homoeopathic practitioner then you are qualified for other posts and positions subsequently.

SHRI N. SREEKANTAN NAIR: Their point is that they should be included in the Council. So Schedule II should be amended in such manner as to include these people who are already in the teaching profession.

MR. CHAIRMAN: They are already there.

SHRI SREEKANTAN NAIR: Technically speaking, a Principal who has not any degree but he may be teaching homoeopathy.

MR. CHAIRMAN: If the Principal does not have institutional training in homoeopathy or according to Registration list has no requisite experience then he should not have been appointed as the Principal. But since the college is recognised as an Institution for teaching homoeopathy so all the students coming out from that college and teachers teaching in that college will be recognised as homoeopathic practitioners.

SHRI PRASANNABHAI MEHTA: The question is for the teachers and not for the students. Students are certainly covered by section 5(1).

MR. CHAIRMAN: You want to lay down qualifications for becoming a teacher. Section 5(1) says, 'No person shall be eligible for election to the Central Council unless he possesses any of the medical qualifications included in the Second Schedule, is enrolled on any State Register of Homoeopathy and resides in the State concerned.' So, the first thing is that you must have a degree if you want to be a member.

DR. GHOSAL: We have been teachers before the Faculty of West Bengal since 1943.

MR. CHAIRMAN: You are there by virtue of the experience you have in homoeopathy.

DR. GHOSAL: I got the registration from the West Bengal Faculty.

SHRI PRASANNABHAI MEHTA: Their contention is that they do not hold any qualification and, therefore, under clause 5(1) they are not eligible to contest the elections of the Central Council. Am I correct? (Voices-Yes) So there should be a provision to include these teachers for making them eligible to contest the Council election.

MR. CHAIRMAN: They have suggested in writing about two points. One point is for the standard of teaching and the other for qualifications to be laid down. Now, teaching is covered by clause 15. And 15(2) states that no person other than a practitioner of homoeopathy who possesses a recognised medical qualification shall be appointed as a physician or Professor in any Government or other Institutions. They are allowed to contest for the membership of the Council under clause 5(1). That we find in their original memorandum. That is vital point. But nothing debars them.

SHRI ZIAUR RAHMAN ANSARI: While objecting certain provisions of this Bill probably Dr. Ghosal referred to Section 15(2) (a) which reads as follows-"No person, other than a practitioner of Homoeopathy who possesses a recognised medical qualification and is enrolled on a State Register or the Central Register of Homoeopathy, shall hold office as Homoeopathic physician or any other office (by whatever designation called) in Government or in any other institution maintained by a local or other authority". I suppose this is the objection which he submitted. He might have referred this in his memorandum on Section 5 also, but at this time his main objection was regarding this provision: According to this, those people who are having teaching profession for the last 40 or 50 years will be debarred by this provision to hold office as a lecturer in an educational institution.

DR. R. GHOSAL: If there is any loophole then there is a clause that these teachers will be imprisoned for one year or they will have to pay fine of Rs. 1,000.

DR. JUGALKISHORE: Perhaps you have not read the Section 15(3); (a) where the protection clause is given. The persons would enjoy every right which they are enjoying at present in the States.

MR. CHAIRMAN: The Section 15 (3)(a) reads—"Nothing contained in sub-section (2) shall affect the right of practitioners of Homoeopathy enrolled on a State Register of Homoeopathy to practise Homoeopathy in any State merely on the ground that, on the commencement of this Act, he does not possess a recognised medical qualification." Then in the same clause in (b) it reads "the privileges conferred by or under any law relating to registration of practitioners of Homoeopathy for the time being in force in any State, on a practitioner of Homoeopathy enrolled on a State register of Homoeopathy."

DR K. NAGAPPA ALVA: So the medical practitioners have been protected but what about the rights of the teachers?

DR. JUGALKISHORE: The privileges are there including the right of practice. No body are to be penalised.

MR. CHAIRMAN: Those who are already in the field have been protected by this proviso. This is a local thing. Nothing contained in subsection (a) shall affect the right of a practitioner of Homoeopathy. Subsection (2) will more or less apply to the new entrants but those who are already in the field they are not to be debarred. So, by this proviso their privileges and rights are protected.

DR. R. GHOSAL: Our right, only to practise homoeopathy, is protected.

MR. CHAIRMAN: Not only that. Even your right of teaching is protected in this proviso.

SHRI CHIRANJIB JHA:

में यह जानना चाहता हं कि :

"Whether the right of Practitioner or the right of teachers"

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ये शब्द हैं या नहीं ?

MR. CHAIRMAN: बही तो है

nothing contained in sub-section 2 shall affect the right of a practitioner of Homoeopathy nor as a teacher of Homoeopathy.

DR. JUGALKISHORE: If you read (a) and (b) together, you will find that a person has the right to practise 1648 RS-4. anywhere in the country. Now under the present law a person who has been given recognition may not be allowed to practise in other States. This Bill empowers him to practise anywhere in the country. In subsection (b) there are already some privileges conferred by the State Board about the right of practice, right of teaching and the right of examination. I think, there is no contrary provision in it.

SHRI K. C. PANDA: My suggestion is that we can discuss this thing later on.

MR. CHAIRMAN: There are principals, professors etc. of medical colleges. They should not go back with the apprehension that they will be debarred from the existing privileges. We want to tell them categorically that whatever we are doing under this Bill we are not going to debar the existing privileges which they are enjoying as teachers of the medical colleges.

DR. K. NAGAPPA ALVA: The difficulties that have been expressed here is about the teaching and these are clear now, but what about the conditions of election for Council. In fact I feel, if any candidate raises objection against his rival candidate that he does not possess requisite qualification he should certainly be disqualified—this should be made clear.

DR. JUGALKISHORE: Dr. Bose possesses foreign qualification and there are few others who have foreign qualification in their possession and this has also been mentioned by the State Board of U.P. There were some institutions which are now nonexistent. Unfortunately in the Ministry there was no competent technical body to go into this question. As soon as the Central Council is formed which will be a competent body, it will go into it, and include it in the schedule. The first Central Council will be a nominated one and in this CounThis question will be taken up so that qualified and experienced men like Dr. Bose may be given the right to: fight election. The difficulty was that the Health Ministry in consultation with Law Ministry decided that until the Central Council is formed it will not be advisable to go into that question.

MR. CHAIRMAN: In future whereever we go, the local Acts should be made available to us. Now we reserve our comments on this point.

DR. GHOSAL: I appeal to the Chairman that if Dr. Jugal Kishore says that this form should go to the Law Department and so on then....

MR. CHAIRMAN: You need not go through that. After I have ruled you need not go into that point. Now, you may give any other point that you have. I may tell you that we do 'not go by what the Secretaries of departments suggest. Is there any question from any member?

DR. GHOSAL: Our main points are the two points that I have already told you. There are other minor points which are not so important. But those two points are our life and death.

SHRI N. G. GORAY: On behalf of all the members here, I would like to express our deep gratitude to all of you who have taken the trouble of coming here and giving evidence before this committee. We are very happy to know that you belong to that institution which was started about 90 years back. We have listened to you with respect and all the points that you have raised are well taken and I can assure you that they will be given the best consideration. Thank you very much.

SHRI JANAKI BALIAV PATNAIK: Do you think that there should be a penal clause in the Bill for those practitioners who practise in allopathy. or for allopathic practitioners who practise in homoeopathy? DR. B. K. BOSE: The Bhabe Committee's decision is final. Homoeopaths should practise only homoeopathy and allopaths should practise allopathy only. Two things cannot be given to a man.

MR. CHAIRMAN: So you are in favour of introducing a penal clause?

SHRI RANA BAHADUR SINGH: What is the thinking of these gentlemen here on the point as to those practitioners of homoeopathy who are practising homoeopathy in the rural areas of our country, who do not have any degree at the moment and yet who are providing a very basic service to the community? What do they think would be the best method to bring them round into the fold of registered homoeopathic practitioners and so to continue their service to the rural community?

DR. B. K. BOSE: We have discussed acthis point with the Government be--- fore the West Bengal Act was passed. Government wanted that those who do not possess any institutional training should be debarred. But I told them that that was a bad thing because in the distant parts of the country where there is no light where human beings live, let there be something which is better than nothing. "We want some people to carry our message to the distant parts of the country. I appeal to you that they must not be debarred entirely. Give them some kind of training so that they can be of service to the community.

DR. GHOSAL: I think they should be included by some provision or other the practitioners who are practising in the villages.

SHRI MADHURYYA HALDAR: Dr. Ghosal, you are against mixopathy. I want to ask you one question. If a surgical case comes to you or an accident case comes to you, what will you do? And another question is, if your college teaches these things, please tell us.

DR. GHOSAL: We have told our students that if you get an accident case, you should not treat it only homoeopathically, it should be treated in the regular way as a surgical case. We also teach our students surgery and gynaecology and we teach them about appendicitis operation. Not that they will be able to do the operation but that they will be able to advise the patient what to do and up to what point medicine can be administered. It is said that failure of medicine is surgery. This is only statement. There figurative ате some cases where surgery is absolu-We ask our students tely necessary. not to be dogmagic in the form of treatment, that is, in the homoepathic way. We have told them that they must have that catholicity of mind.

SHRI M. SREEKANTAN NAIR: I have got a question. Whether Dr. Ghosal is aware that Dr. Jaysuryya who was an M.D. In allopathy took to homoeopathy and in such cases where an allopath doctor after getting some knowledge starts practising homoeopathy, whether such people can be allowed to do so?

DR. GHOSAL: There should not be absolute partition, there should be some relaxation.

DR. K. NAGAPPA ALVA: The idea of this Bill is to encourage this system, to have practitioners who know their job, who have faith in this system and to promote the system. I am not blaming anybody what has happened throughout is that using Dr. Hahnemann's name there has been no research, no text books are there, nor are there any standard drugs or any pharmacopoeia. I am only sug-"gesting to you that you must boldly give your suggestions to this Committee, if not now, some time later, in writing. I shall be happy if you do that suggesting how there can be uniformity in the courses of study. You can start with the text books. If you want to develop this system you must be very clear in your mind about research. Dr. Hahnemann'sidelogy must be added on and this system must be developed. Whatever suggestion you want to give, you must see that there is uniformity in books and standard.

MR. CHAIRMAN: We are here up to 29th of this month. Please send us a written memorandum by that time.

[The witness then withdrew.]

[The witnesses Dr. Sachidananda, Das, Dr. B. Das, Dr. D. R. Routara of all Orissa Homoeopathic Medical Association, Puri represented were called in.]

MR. CHAIRMAN: Gentlemen, I may tell you that the evidence you give here will all be recorded and treated as strictly confidential document. So, when you go out of this Chamber, please don't discuss it with anybody and don't give it to the press.

You have sent your reply to the questionnaire. Do you like to make any observation now on that?

DR. S. DAS: If any evidence is necessary to enlighten the members on our views I am prepared to do that.

MAULANA ISHAQUE SAMBHALI: मैंडम चेयरमेन, मैं मालूम करना चाहता हूं, मौर मुझे सबसे ज्यादा खुशी है कि उड़ीसा जैसे पूमर म्रो: बैकवर्ड एरिया में हमारे ये डाक्टर साहनान होमिय पेय की सर्विस वहुत भच्छो तरह कर रहे हैं। हम भो यह उम्मीद करते हैं कि होमिय पेनी सिस्टम से हमारे पूम्रर पीपुल मौर हमारी बैकवर्ड एरियाज को बहुत फायटा प्टूंचाया जा सकता है। मैं म्रापसे तीन सवाल करना चाहूंगा। पहला यह कि म्राप जे कुछ भीवहां होमियोपेयी के तजुर्वे वहां कर रहे हैं म्रापका इयके बारे में क्या खयाल है कि वहां की बैकवर्ड एरिया के पूम्रर पीपुल उससे कोई बेनिफिट पा रहे हैं या ज्यादातर पढ़े लिखे, मिडिल क्लास के लोग ही इससे फायदा उठाते हैं। नम्बर 2, ग्रापके यहां होमियोपेथी मेडिकल कालेजेज भी हैं, तो क्या प्रापने वहां पर फील किया कि इस तरह के होमियोपेथी कालेजेज, इस तरह के इंस्टीट्यूशन्स वहां पर ग्रौर ज्यादा बढ़ाने चाहिएं, चूंकि वहां की पढितक इतनी गरीव है कि एलोपेथी जैसे कास्टली सिस्टम को वर्दाधत करना उनके लिए बहुत मुध्किल है। नम्बर 3, क्या आपका यह खयाल है कि वहां पर ग्रापको जो मेडिसिन्स ग्रवेलेव्ल होतो हैं वे ग्रापकी राय में सही स्टेण्डर्ड की हैं या कि उनका स्टेण्डरं ग्रौर ज्यादा वढ़ाने की जरूरत है जिससे कि ग्रौर ज्यादा इफे-विटवली ग्राप काम कर सकें।

DR. S. DAS: Madam Chairman and Honoured House, I am going to answer the first question as to whether we extend our treatment to the poor and poorest classes of people or not. Of course, as we know, Homoeopathic system of medicine is the only economic system of treatment which is meant for that class who deem it. All the time we try to implement this scheme and extend the treatment in such a way as to reach the doors of all the poor people of the country About the second question, in the year 1949 Government of India appointed an Enquiry Committee, known as the Central Homoeopathic Enquiry Committee. According to the evidence and report of that Committee there was no particular and strict standard of education imparted at that time. Naturally, we welcome if such training or due training is imparted to all We do not know how the Government of India specified this or what the forum is. When a law enacted it has got some transitional provisions. In the profession there are men who are qualified and there are men who are practising but have no qualification. A discrimination has been made between these two categories-this is an act of discrimination as provided under article 326 of the Indian Constitution. We are already in the profession. We have sacrificed our blood. Let there be a committee; let that committee decides whether we are not up to the mark. Ostracising is never constitutional on national point of view.

SHRI N. P. CHOWDHURY: Could you tell us whether there should be some sort of training or minimum qualifications for the practitioners?

DR. S. DAS: Intermediate in Science with Biology should be the minimum qualification, for a candidate to come in for Homeopathic studies. Prime independence should be given to philosophy and psychology in due teaching of Homeopathy.

SHRI N. P. CHOWHURY: Any age limit?

DR. S. DAS: That is for the Committee to decide.

SHRI K. REDDY: Headquarters of your Association is in Puri or you are Secretary of the Puri Branch of the Association?

DR. S. DAS: I am the President on ad-hoc basis. My Secretary has come who represents the Association itself.

MR. CHAIRMAN: You can treat him as an individual.

SHRI K. REDDY: How many associations are there in Orissa and whether any of them is recognised by Govt.

DR. S. DAS: There are three or four associations in Orissa and no association is recognised by State Government. For the first time we have sent our application to the Home Department as also to Revenue Department for recognising and giving us registration.

SHRI K. REDDY: Is there any Homoeopathy Board and are you represented there?

DR. S. DAS: There is a Board but our association is not represented in it. We have filed a case praying that the Board is illegal. SHRI J. PATNAIK: How many registered and non-registered medical practitioners are there in Orissa?

DR. S. DAS: About 3500 both registered and non-registered.

SHRI J. PÁTNAIK: In regard to second Schedule have you got to make any comment?

DR. S. DAS: In Orissa there is a Government Homoeopathic Medical College at Bhubaneswar and another private Medical College at Berhampur but much before that Orissa had an Institution established in 1935, with late Dr. J. Choudhury as the Principal.

SHRI J. PATNAIK: Who is giving diploma?

DR. S. DAS: College is imparting education. It has not come up to the diploma stage. Naturally whether the college will award the diploma I do not know. Of course, recently a Faculty has been formed for regularising the curricula of education.

SHRI J. PATNAIK: What comment you are to make in regard to Second Schedule?

DR. S. DAS: when there was a college in Orissa with late Dr. J. Chowdhury as Principal, that college could not get recognition.

SHRI J. PATNAIK: Do you want that to be recognised in the Second Schedule?

DR. S. DAS: Yes, Sir.

MR. CHAIRMAN: May I declare that the honourable member is leading the witness.

(Laughter)

SHRI J. PATNAIK: How many Government Homoeopathic hospitals are there in Orissa?

DR. S. DAS: Only one.

SHRI J. PATNAIK: We were told yesterday that there are 108 Government managed homeopathic hospitals in Orissa.

OFFICER, MINISTRY: Some of them said about 110 Government sponsored dispensaries.

SHRI GORAY: Is there any Act passed by Orissa Government in regard to homoeopathy system of medicine?

DR. S. DAS: Yes, Orissa Government has got an Act since 1956.

[At this stage the Hon'ble Minister for Health, Government of India, Shri Debiprosad Chattopadhyay took his seat].

OFFICER, MINISTRY: There is a Directorate of Health in Orissa, there is a Government College in Orissa but unfortunately nobody from Orissa Government came here.

MR. CHAIRMAN: We should take note of this and express our displeasure.

DR. S. DAS: This is peculiar to Orissa. Orissa has not got yet a Technical Directorate.

MR. CHAIRMAN: Hon'ble Minister for Health, Government of India, is here. So you can explain your position fully.

DR. S. DAS: Honourable Members, you see Orissa has not yet got any Technical Director. Deputy Secretary. Government of Orissa, is the ex-officio Director of Homoeopathy Board and the President of the Board is a non-technical man and is also the President of the Faculty. How such tricky manner was done—I do not know.

MR. CHAIRMAN: Does he practice in homeopathy?

DR. S. DAS: No madam, he is a non-technical man. Then, about the

second schedule I may also enlighten you that these qualifications were recognised keeping us in retrospect that you are non-qualified. You come to section 15, clauses 2 and 3 where you will see, "No person, other than a practitioner of Homosopathy who possesses a recognised medical qualification and is enrolled on a State Register or the Central Register of Homoeopathy,-(a) shall hold office as Homoeopathic physicianetc." These are the privileges of qualified persons. But I am emphasising about non-qualified persons; Let them get proper training through Government in the way of refresher's course or something like that so that they can be recognised. In this connection I draw your attention to Advocates' Act which was passed. There were Mukhtears and pleaders. Basic qualification to become a Mukhtear was Matriculation and graduate to become a lawyer and advocate. But when the Act was passed it was said that all of them should be taken as Advocates. But in our case we are the worst sufferers.

MR. CHAIRMAN: This is your misapprehension—this has no basis. You please go through the Bill and then you will find that it is not there. You are imagining something.

श्वो मान सिंह वर्मा ग्रय्यक्ष महोदय, मैं ग्रापकी ग्राज्ञा से कमेटी के सभी सदस्य-गणों की तरफ से साक्षी को धन्यवाद देने के लिए खड़ा हूं। ग्राप इतना कप्ट करके यहां ग्राये श्रोर ग्रापकी होम्योपेयी के प्रति जो श्रद्धा है तथा ग्रापने इस सम्बन्ध में जो गिचार हमें भवगत करायों, उससे हम सब लोगों को लाम हुआ्रा। ग्राप भविष्य में भी होम्योपेथी के प्रति यही श्रद्धा रखगे, इन गब्दों के साथ मैं फिर ग्रापका यहां ग्राने पर धन्यवाद करता हं।

[The witness then withdrew.]

SHRI D. P. CHATTOPADHAYA: Madam Chairman and honourable, members, I really regret my inability to attend this meeting right from yesterday. I was held up due to some important business. I are really sorry and I hope honourable members will forgive me for my unintentional absence. I think your stay here is quite comfortable.

[The witness (Dr. Bhupen Bijali)' was called in.]

MR. CHAIRMAN: We welcome you Dr. Bijoli and may I at the outset tell you that whatever evidence you tender before third Committee will be treated as strictly confidential. These evidences will be on our record and as soon as you go out please do not discuss the points with anybody else. If you discuss the points that you place before this Committee then you will be doing some illegal thing. You have not sent to us any memorandum. Now, did you receive our questionnaire?

WITNESS: No, Madam.

MR. CHAIRMAN: Have you gone through this Bill?

WITNESS: Yes.

MR. CHAIRMAN: Do you want to make any observation on the Bill?

WITNESS: Yes, Madam. My first point is with regard to sec 3(1) (c). 10 per cent in addition to 30 per cent of total number of members, at least should be from amongst the practitioners connected with Homoeopathic Institutions. Secondly, the total number so enhanced *i.e.* 40 per cent should be nominated on state-wise basis. The heads of Institutions should also be included.

SHRI N. G. GORAY: You are suggesting that the percentage should be raised from 30 per cent to 40 per cent. But why?

WITNESS: 30 per cent seems to me to be very insufficient.

SHRI N. G. GORAY: Why it is insufficient?

WITNESS: there are many institutions in the country and if 30 percent is accepted then many Heads of the Institutions will not get chance.

SHRI MAN SINGH VARMA: Then there is no question of percentage. You want that Head of the Institution should be included in the Council.

WITNESS: Yes.

SHRI N. G. GORAY: If it can be adjusted within 30 per cent then you have no objection.

WITNESS: No objection.

MR. CHAIRMAN: It cannot be done Mr. Goray, because we have already specified the number there. Now, Mr. Witness, why do you want that all the Heads of Institutions to be represented.

SHRI N. G. GORAY: Actually it is the general practice that one set will come this year and another set will come in the next year.

WITNESS: (Spoke in Bengali) The main purpose of registration is to have a certain standard of education. If Heads of all the Institutions are included in the Council it will do better uniform work for the cause of homoeopathy.

MR. CHAIRMAN: Any other point?

WITNESS: My next point is with regard to sec. 3(1)(a). Number of seats allocated in Central Council in accordance with the First Schedule should be one for every 5000 Regd. Practitioners.

MR. CHAIRMAN: We got the same suggestion from others also. Have you got any other point:

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WITNESS: Yes regarding Section 15—Rights of Registered Practitioners (i) The rights of having equal status in the Central and State Health Services. I want equal status for Central and State Health Services.

ONE MEMBER: Would you please explain?

WITNESS (Spoke in Bengali): When they received the same Institutional training they should enjoy the same status both at the Centre and at the States.

DR. BHUPENDRA NATH BIJALI: Health Services means both the Central and State Health Services. There is no provision in the Bill about this.

MR. CHAIRMAN: In Clause 15 it is shown that the person possessing qualifications as included in the schedule be enrolled. This is for registration.

DR. BHUPENDRA NATH BIJALI: Yes Madam. In Clause 15(2) I see that no person, other than a practitioner of Homoeopathy who possesses a recognised medical qualification and is enrolled on a State Register or the Central Register of Homoeopathy shall practice in Homoeopathy. The Allopathic Practitioners must not be allowed to practice in Homoeopathy.

MR: CHAIRMAN: Suppose 1 am an M.B.B.S.: doctor and after my registration as an Allopathic doctor I decide to practise in Homoeopathic. If I do not go to the Registration Council to struck out my name from the M.B.B.S. register, may I be allowed to practise in Homoeopathy.

DR. BHUPENDRA NATH BIJALI: No Madam. The Allopaths must not be allowed to do so. The F.R.C.S., M.B.B.S. etc., cannot be converted into Homoeopathy degree. A person having M.B.B.S. or even higher qualification cannot be considered as a good Homoeopath unless he qualified himself Homoeopathy from a recognised institution, and he must have a registration from the Homoeopathic Council otherwise he should not be allowed to practise in Homoeopathy.

MR. CHAIRMAN: He can have his registration because he is practising in Homoeopathy.

SHRI BHAOOSAHAIB DHAMAN-KAR: Suppose he continues to be there and then uses a registration number of another homoeopath or manages to get him registered as homoeopath. What is your opinion about the Inspectors and Visitors?

DR. BHUPENDRA NATH BIJALI: In clause 17 (1) I find "The Central Council shall appoint such number of medical inspectors as it may deem requisite to inspect any medical college, hospital or other institution where education in Homoeopathy is given, or to attend any examination held by any University, Board or medical institution for the purpose of recommending to the Central Government recognition of medical qualifications granted by that University. Board or medical institution". The posts of Inspectors and Visitors simultaneously are deemed to be superfluous and might have caused complications in the administration-hence it is suggested that the post of one category either Inspectors or Visitors be maintained.

SHRI BHAOOSAHAIB DHAMAN-KAR: Do you feel that the Inspectors who are appointed to inspect of these Bodies should have Homoeopathic qualifications or the Alopaths also may be entrusted to do this function?

DR. BHUPENDRA NATH BIJALI: Sir, my suggestion is that the persons who are to be entrusted to inspect. these Bodies should be well conversant with the technicalities of that particular subject, and thus the Inspectors or the Visitors should have homoeopathic qualifications.

SHRI K. RAMAKRISHNA REDDY: Mr. Bijali you are telling that the Allopaths should not be allowed to practise in Homoeopathy, but do you suggest any penal clause for the Homoeopaths who practise in Alopathy?

DR. BHUPENDRA NATH BIJALI: The Homoeopathic education is rich enough to face any eventualities and it should not be mixed up with any other pathy and penal clause should be imposed on either side.

SHRI JANAKI BALLAV PATT-NAIK: Now on behalf of the Joint Committee of the Parliament, I thank you Mr. Bijoli for your valued evidence before this Committee.

DR. BHUPENDRA NATH BIJALI: I also thank you, the Chairman and all other members here as you have taken such trouble to come over here for recording our views on the Homoeopathic system of practice.

There is a Homoeopathic Council consisting of 19 members. They have got experience for long 40 years and a good record of practice, but they have not been invited to record their evidence before the Joint Select Committee.

MR. CHAIRMAN: Dr. Bijali, that is not our fault. We are to record the evidence of the eminent Homoeopathic practitioners and for doing this function perfectly we cannot summon them or persuade we them to come here and give their evidences. They should have come. We are sitting here from 10 O'Clock to 5 O'Clock only to record their evidences, who are very high up position in Homoeopathic. They should have done it voluntarily.

DR. BHUPENDRA NATH BIJALI: I think there is some misunderstanding about this.

SHRI N. G. GOREY: In fact, all the members here wanted to know the views of the eminent Homoeopaths of this State. Unfortunately, they are not coming forward.

DR. BHUPENDRA NATH BIJALI: I wrote a letter to Dr. Jugal Kisore and I have been given a reply by him.

MR. CHAIRMAN: That is why Dr. Jugol Kishore called you to give your evidence before this Committee. You better tell them, the members of the Council, that this is the way they are serving homoeopathy. We will be here up to the 29th and if they want to come let them inform us. So please carry this impression to them. Thank you.

[The witness (Dr. Bijali) then withdrew].

[The witness (Dr. Seal) was called in]. DR. SEAL: Madam, I appeal to you if you kindly give me some time on some other day because today I am not thoroughly prepared and moreover I have some other urgent business to attend.

MR. CHAIRMAN: Very well, we will send for you. I do not know whether we shall be able to call you tomorrow but by 29th we shall call you and give you a hearing. We shall manage and give you five or ten mintes because our programme is fixed hour-wise. Thank you.

[The witness then withdrew].

[The Committee then adjourned].

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Wednesday, the 27th September, 1972.

(AT CALCUTTA)

PRESENT

1. Shrimati Purabi Mukhopadhayay-Chairman.

MEMBERS

. Rajya Sabha

2. Shri Bhupinder Singh	7. Shri T. K. Srinivasan
3. Shri N. G. Goray	8. Shri K. C. Panda
4. Dr. K. Nagappa Alva	9. Shri Sultan Singh
5. Dr. Debiprasad Chattopadhyaya	10. Shri N. P. Chaudhari
6. Shri Man Singh Varma	11. Shri T. G. Deshmukh

Lok Sabha

12. Shri Ziaur Rahman Ansari	22. Dr. Laxminarayan Pandeya
13. Shri Bhaoosahaib Dhamankar	23. Shri S. L. Peje
14. Shri Hiralal Doda	24. Maulana Ishaqu e Sam bhali
15. Shri Nageshwar Dwivedi	25. Shri M. Satyanarayan Rao
16. Shri Chi ranjib Jh a	26. Shri Umed Singh Rathia
17. Shri B. R. Kavade	27. Shri K. Ramakrishna Reddy
18. Shri T. S. Lakshmanan	28. Dr. Sankata Presed
19. Shri Mallikarjun	
20. Shri Prasannbhai Mehta	29. Shri Ram Deo Singh
21. Shri N. Sreekantan Nair	30. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser, in Homoeopathy.

SECRETARIAT

Shri M. K. Jain, Under Secretary.

WITNESSES

(1) Dr. Bibhas Roy, Calcutta

(2) Representatives of the D. N. De Homoeopathic Medical College and Hospital, Calcutta:

- (i) Dr. S. K. Nayak, Principal.
- (ii) Dr. Samir Banerjee, Vice-Principal.

(iii) Dr. J. N. Kanjilal, Head of the Department, Materia Medica.

(3) Representative of the Mahesh Bhattacharyya Homoeopathic Medical College and Hospital, Calcutta.

Dr. J. N. Sircar, Principal.

(4) Dr. S. D. Sircar, Calcutta.

[SHRI N. G. GORAY was in the Chair].

[The witness (Dr. Bivash Roy. Calcutta was called in].

MR CHAIRMAN: I think we should start now.

Dr. Roy; I welcome you on behalf of this Committee, but before starting your evidence I would like to tell you that the proceedings of this meeting are strictly confidential. So, whatever you say here should not go out and should not be given to the press.

Have you submitted your memorandum?

DR. ROY: No.

MR CHAIRMAN: Then, you can say anything that you like on the subject.

SHRI MALLIKARJUN: Mr. Chairman, before the witness starts I would like Dr. Jugal Kishore to tell us what exactly the concept of Homoeopathy is according to Dr. Hahnemann.

MR. CHAIRMAN: I think we can discuss this issue afterwards and not when the witness is here Dr. Roy, you may start now.

DR. B. ROY: My first point is that unless a person is qualified as in item above and registered either on the State or Central register, his practice should be condemned. Those who are not qualified are not to be allowed to practice. Basic qualifications are to be clearly defined before admitting students inside any homoeopathic college or institution, A condensed course should be introduced for those who are already practising and registered with some other faculty. Practice by

persons who are not qualified or registered with any State or Central Council must be banned and there must be a link between the State and the Central Faculties. There is no. justification for allowing people to practice Homoeopathic medicine for charitable or any other purposes unless and until one is qualified as defined in Schedule II. There should not be any restriction in application of medicine in general, specially in cases of emergency where the discusses are acute: So, the students must be taughtemergency treatment and, therefore; there should not be any restriction to prescribing medicines other than homoeopathic. Surgical cases are also to be attended by these practitioners. So, I do not agree that there should be any provision in the Bill prohibiting practice of medicine other than homoeopathic science. If he does so, he should be penalised and his registration should be cancelled I question this because in an emergency case like diphtheria it is not desirable strictly to stick to homoeopathic medicines.only. So, the practitioners must be taught accordingly, so that they can prescribe acute cases like cholera and diphtheria-saline and anti-toxin, They must be taught, advised and allowed to prescribe those drugs, if necessary. As I have told you before, there must be a refresher course for those who are not qualified enough before they are registered. Those who have not passed from any recognised institution should not be allowed to practise. Despite of a faculty in this State we have found cases where people start practising Homoeopathy without having any requisite medical qualification. In fact, they do more harm than good. They cannot attend to cases properly or ameliorate the conditions of the patients. Rather, they. aggravate the conditions. These people

must be dealt with properly and strictly Those who are not registered should not be allowed to practise in any way for charitable or any other purposes.

About maintaining laboratory, etc., I do not think it is proper or advisable that every doctor should maintain a laboratory. But there should be a proper method and arrangement for clinical examination of cases and these things must be properly maintained in the hospitals under sufficient care. Doctors must be taught properly so that they can examine cases independently.

DR. B. ROY: Regarding qualification we find from schedule 2 that eleceted members must be qualified and registered and also the Central Council must have a direct control over the State Faculty. There must be a link between the State Council and Central Council, and there must be some control because we have found that in some cases the State Faculties are not functioning properly. The degrees and diplomas given by those Faculties must be challenged and corrected as soon as possible.

SHRIMATI PURABI MUKHOPA-DHAYAY: Dr. Roy, your point is not at all clear.

DR. B. ROY: There are institutions which give spurious certificates or degrees. We have found that they advertise that they will issue degrees and diplomas without any basic qualification. This must be stopped by legislation as early as possible. It is harmful for the society as well as for the homoeopathic science. We find people having no idea about the science come forward and treat cases and do more harmful good. There is a faculty and it is a matter of regret and shame that Government is taking no step to stop this kind of malpractice.

SHRI M. S. VARMA: I want one clarification. You say that to meet the emergency cases homoeopaths should be taught allopathy also. I do not follow this. Do you want that all homoeopaths should be taught allopathy or that every doctor should be allowed to give allopathic treatment.

DR. B. ROY: I am giving an example in support of my point. If you have got a diphtheria case what would you do? You would immediately recommend Tracheostomy and you know where to send the patient for that-If you have a case of extreme dehydration you must recommend saline.

SHRI M. S. VARMA: That means you have no medicine for them.

DR. B. ROY: These have got nothing to do with medicine. These require emergency treatment.

SHRI M. S. VARMA: Then those cases may be handed over to allopaths.

DR. B. ROY: I have already told that during student life homoeopaths must know what is tracheosmy and if necessary he will do it himself and must know how to apply saline. If he fails then he will hand over the cases. to others.

SHRI M. S. VARMA: You are in favour of an integrated course?

DR. B. ROY: Not exactly—I think all over the world the homoeopaths do this.

DR. K. N. ALVA: You see, mixing up the two systems of medicine is: doing harm to people. Half knowledge is always dangerous and this sort of emergent cases cannot betreated by little knowledge here and there. So, you will have to think over this thing and you have to be very clear about this. It is not proper torefer a case to allopaths when the case is becoming serious. So, my suggestion is that it is not good that you take up the responsibility. When the question of surgery case or emergency case comes if you cannot treat it is better to refer those cases to those who can treat.

DR. B. ROY: My point is that unless and until the homoeopaths are taught in fundamentals of medical science it is difficult for them to understand cases and evaluate symptoms.

DR. K. N. ALVA: Having the knowledge to diagnose is one thing. To that extent they know what diseases are there. But various diseases are there about which there is no clear mention in homospathy viz.. bactereological diseases and all that. In those cases only a general knowledge will not do and so it is better to refer them to doctors who can treat the cases properly.

SHRI RAMACHANDRAN KADAN-NAPPALLI: You have said that practice by persons without basic qualification should be stopped and specially those who are doing practice in homoeopathy for charitable purposes should also be stopped. May I know if you have anything to suggest in the nature of alternative to those people who are benefitted by such private practice doing for charitable purposes or you think that it is high time that all charitable institutions on homoeopathy should be stopped forthwith?

WITNESS: They must have to attend a refresher course and sit for an examination before they are allowed to practise any pathy whatsoever. Otherwise they will kill people instead of doing charity.

SHRI B. DHAMANKAR: Do you also suggest condensed course for those allopathy doctors who want to practise homeopathy?

WITNESS: They will also have to attend a refresher course. After all application of medicines in homoeopathy has changed since Hahnemann's time. Totality of symptoms have better and accurate scope of diagnosis with Clinical and pathological tests. Our duty is to see how best we can create properly trained physicians not untrained quacks.

SHRI H. DODA: May I know whether persons practising allopathy should have the same status as those practising homoeopathy and whether homoeopathic doctors registered under Bengal Act σ_{τ} those who passed from Institutions should have the power to issue physical fitness certificates.

WITNESS: Those who would give service to the people as well as to the Government as medical officers must come under the Second Schedule. They must be registered and they have attended the course as mentioned in Second Schedule. As regards status, those who have passed homoeopathy and those who have converted themselves into practising homoeopathic practitioners after passing MBBS must be put in the same status. But those who have got registered by virtue of their experience only. must not be allowed to render service as medical officers etc. They must not get the same status.

SHRI T. S. LAKSHMANAN: How do you desire to have control over private or charitable institutions.

WITNESS: Institutions must have Govt. control otherwise it will be very difficult to maintain them properly. The basic qualifications must be properly mentioned and the course must be of 4 years as defined here. I would rather say that all private institutions must be abolished.

MR. CHAIRMAN: If they are recognised by Govt.?

WITNESS: In spite of recognition there are struggles in their committees of private institutions. There must be direct control by Govt. otherwise there is every possibility of trouble brewing there. They may not also observe the proper curricula.

MR. CHAIRMAN: You have again and again insisted on having certain qualification before a man is allowed to take up homoeopathy practice. In order to tone up homoeopathy would you suggest that the qualification for new entrants should be at part with those who want to take MBBS Course?

WITNESS: I would like to bring them at par with the qualifications as defined in MBBS course. I prefer that there should be at least five-year course instead of four-years'.

SHRI K. REDDY: Whether an MBBS doctor after passing the refresher course is entitled to contest for the Central Council.

WITNESS: After passing, certainly.

SHRI L. PANDEYA: Do you suggest any degree course for Homoeopathy?

that.

SHRIMATI PURABI MUKHOPA-DHYAY: Do you think that the syllabus is adequate to combat any disease that may come to a homoeopathic doctor?

WITNESS: At present it is absolutely inadequate. There must be proper arrangement. Laboratory facilities are not adequate. Basic qualifications are lacking. Govt. must see to it. There must be proper Govt. control over these institutions.

MR. CHAIRMAN: You have a lot of experience in this field. Have you come across any institution in the whole of this country which comes to your expectation so far as homoeopathy education is concerned?

WITNESS: Of course, I am not at present attached to any institution but what I have seen is that Calcutta Homoeopathy Medical College imparts adequate training and proper arrangements are there.

OFFICER, MINISTRY: Regarding adequacy of the syllabus, I would like to ask Dr. Roy whether something is wrong with the planning of the syllabus or in its actual execution.

WITNESS: Execution is rather defective, arrangement is not proper and facilities provided are not adequate. So we can say that syllabus is inadequate in every respect.

MR. CHAIRMAN (SHRI N. G. GO-RAY): Whether you have come across any such institution which is upto the level?

WITNESS: No, I cannot find any homoeopathic institution at the present moment which is up to the mark.

SHRIMATI PURABI MUKHOPA-DHAYAY: That is true. That is how we have treated homoeopathy so long.

MR. CHAIRMAN: Do you want anybody to look after these Institutions?

WITNESS: I insist that government must take control and government must see to it that proper facilities. are arranged because these institutions are absolutely inadequate in every respect.

DR. K. NAGAPPA ALVA: Dr. Roy, we are very much thankful to you as you have taken the trouble of coming over here and giving the evidence. We are convinced that you have very keen interest on this system of medicine and you have also made it very clear that Government come out openly and help to build up these institutions so that in this system you can have medical practitioners of standard. We again thank you.

WITNESS: II also thank Mr. Chairman and all the Members of this Committee for calling me and giving me the chance to express my views here. Before I go, I must insist that the Committee must expedite the matter before it is too late. I must emphasize that it is not delayed and that Government must take up the .oase as early as possible. I thank you very much.

[The witness then withdrew:]

[The witness (Dr. J. N. Sarkar) was called in.]

MR. CHAIRMAN (SHRIMATI PUR-ABI MUKHOPADHYAY): You are Dr. J. N. Sarkar.

WITNESS: Yes.

MR. CHAIRMAN: Dr. J. N. Sarkar is present before you. Now, Dr. Sarkar, before we proceed we must let you know that whatever evidence you tender before this Committee that will be treated as strictly confidential and will go on record. So when you leave this chamber please do not let others know as to what were your viewpoints or what were the deliberations in this meeting because this is not the rule. Have you gone through our questionnaire?

WITNESS: Yes.

MR. CHAIRMAN: If you have any comments to make on this Bill then please proceed.

WITNESS: My only proposal is with regard to the persons who will be · eligible to be the members of the Central Council. I think 70 per cent should be qualified homoeopathic practitioners and 30 percent should be registered practitioners. Now, of this 30 percent, I think, only 10 per cent will be nominated from registered practitioners who have got brilliant experiences for many years, who are really learned and who have much contribution to homoeopathy in many Ways. Another 20 percent should - be nominated from other groups who, are highly qualified viz., doctorates in Chemistry, Physics or highly qualified in other sciences. They should be taken because their help will be necessary.

MR. CHAIRMAN: Do you think that they will come when they have got nothing to do with homoeopathy?

WITNESS: But we also require the experience of those people who are highly experienced in Chemistry, Biology, Bio-Chemistry and Physiology. Such persons will help us in the Council.

MR. CHAIRMAN: Any other points on the Bill itself?

WITNESS: This is the only suggestion that I like to propose in the Bill. I have already given other suggestions.

MR. CHAIRMAN: Any questions?

DR. K.: NAGAPPA ALVA: It is a well known fact that for developing the system it is very much necessary that we must have medical education of standard. What do you suggest regarding the qualifications for admission and also can you suggest anything regarding the syllabus of studies?

WITNESS: About qualification, so long it is diploma course, I think 'Higher Secondary is sufficient.

DR. K. NAGAPPA ALVA: What is the minimum qualification?

WITNESS: Higher Secondary with science.

DR. K. NAGAPPA ALVA: What is your opinion about having Degree Courses? Do you feel that only Diploma Courses will be enough for this system?

WITNESS: No, not at all. Degree ' Course should be started at the earliest convenience.

DR. K. NAGAPPA ALVA: What should be the duration of Diploma Course and that of Degree Course?

DR. J. N. SARKAR: 4 years for the Diploma Course and 5½ years for the Degree Course.

SHRI K. RAMAKRISHNA REDDY: The candidates who obtain first of all the Diploma and then enter the Degree Course, should be qualified in Higher Secondary Examination but in the case of students who are admitted directly to the Degree Course—what should be their academic qualification?

DR. J. N. SARKER: In the case of direct admission to the Degree Course,

the candidates should pass a Pre-Medical Course.

DR. NAGAPPA ALVA: In the Colleges Phyiscs, Chemistry, Bilology, Anatomy and Physiology are taught and to acquire knowledge in these subjects, I think, the command in the language itself is necessary. English, for example, is very useful to read the science books and to understand them. Do you not think, little higher education is necessary?

DR. J. N. SARKER: I feel so, but so long as the Diploma Course is there, I think, the minimum qualification can be minimised.

MR. CHAIRMAN: Dr. Sarker, you are representing from Dr. Mahesh Chandra Bhattacharyya Homoeopathy College. I think, you are the Principal of that College.

DR. J. N. SARKER: Yes Madam. I am the Principal of that College.

MR. CHAIRMAN: Then we may take the representatives of Dr. B. N. Dey Homoeopathy College, so that the questions will be more or less the same Let the representatives come.

[At this stage Dr. S. K. Nayak, Principal, Dr. J. N. Kanjilal, and Dr. Samir Banerjee from Dr. B. N. Dey Homoeopathy College entered the Committee Chamber and took their seats.]

SHRI BHAOOSAHAIB DHAMAN-"KAR: Dr. Sarker, have you submitted your Memorandum regarding election.

DR. J. N. SARKER: Yes, I have submitted.

DR. LAXMINARAYAN PANDEYA: मैं जातना चाहता हूं कि कुछ ड़ोम्योपैय ऐसे हैं जो गिक्ष ग संन्याभ्रों से डिप्लोमा प्राप्त किये हुए रजिस्टर्ड होम्योपैय हैं भ्रोर कुछ ऐसे हैं जो डिप्लोमा होल्डर नहीं हैं। तो क्या म्रापका यह मत है कि ऐसे लोगों को रजिस्टर किया जाना साहिये जो डिप्लोमा होल्डर नहीं हैं स्रौर उन्हें चिकित्सा करने को इजाजत दी जानी चाहिये ?

DR. J. N. SARKER: The candidates _ who have got at least 4 years institutional training should be considered.

DR. LAXMINARAYAN PANDEYA: Do you think the experienced Homoeopathic practitioners should be registered?

DR. J. N. SARKER: The Homocopaths who are already registered in the State and those who have got too much experience can be registered.

SHRI MALLIKARJUN: Are you satisfied with the present system of education in your institution?

DR. J. N. SARKER: No. We want to develop and improve the condition. The hospitals are required to be adequately improved and equiped.

SHRI MALIKARJUN: If in all the Colleges it is found that the syllabus and other arrangements are inadequate then do you think that instead of having a number of Colleges, Government should set up one good Homoepathic College, either by amalgamating or by abolishing some Colleges and should introduce new syllabus with new instruments and improved drugs, would be advisable?

DR. J. N. SARKER: If that College can sufficiently accommodate the demand of the people and can admit a large number of students, then of course we agree to this point.

MR. CHAIRMAN: Dr. Sarker, ' please forget for the moment that you are attached to a Homoeopathic institution. You are a pioneer in Homoeopathic, in other States also there are pioneer institutions in Homoeopathy. You are fighting for a cause—you are serving for a cause. For the fulfilment of that cause, do you think that all the existing colleges with inadequate syllabus, with inadequate instruments, inadequate bed position, should be done away with and a new College —a Government College—in each State should be set up with new syllabus, new instruments etc?

DR. J. N. SARKER: As I have already said, I welcome this proposal.

DR. S. K. NAYAK: As regards the Government College, one College in each State will be insufficient. In my opinion, it should be more, 2 or 3 in each State.

SHRI MALLIKARJUN: May I know from both the representatives, how many students you are admitting every year in your Colleges and what are the strength at present in your Colleges?

SHRI S. K. NAYAK: In Dr. D. N. Dey Homoeopathic College, due to pressure of the students we admitted 452 students last year—both in the day shift and night shift.

SHRI MALLIKARJUN: What is the total strength of students in your College?

DR. S. K. NAYAK: 'At present we have one thousand students.

DR. J. N. SARKER: As regards our College, I cannot definitely say about the number. This year we have restricted our admission to 100 during the day shift and 100 for the night shift although there are applications from 1300 students for admission.

SHRI MALLIKARJUN: Since you are all educationists, may I expect to know from you, what would be the approximate strength of students of 10 homoeopathic colleges which you have included in Schedule 2?

DR. NAYAK: The total strength in the affiliated colleges in West Bengal are—in D. N. Dey College—1000, in Calcutta Homoeopathic Medical College—about 1200, in Midnapore Homoeopathic Medical College—approximately 500 and in Mahesh Bhattacharya College,...

MR. CHAIRMAN: Mind you, we are asking the figures of admission this year and not the total capacity.

DR. NAYAK: In D. N. Dey College— 200 from this year, in Calcutta Homoeopathic Medical College so far as I know, 300, *i.e.* 150 in the day and 150 in the night, Mahesh Bhattacharyya College—125 in each shift.

SHRI MALLIKARJUN: If we restrict strictly to the figure of 200 or 250 in the entire State, what would be your reaction because your admission is not employment-oriented, your admission has nothing to do with the economy of the State.

DR. NAYAK: If we admit 250 students in a consolidated way naturally after the final year 200 might come out. In other words, for the entire State of West Bengal only 200 homoeopathic physicians will come out but that number will not be sufficient from the point of view of giving enough service to the country.

SHRI MALLIKARJUN: No, gradually along with the plan programme the number may be increased. And let me put one thing here. We have seen the number one college which is supposed to be the biggest college in Asia but I have a very poor opinion about that institution and this is the general assessment of the members. We do not blame you, there are various factors for this. But my point is that if all these institutions are amalgamated and if there be one institution in this State, would you adhere to that policy or not?

DR. NAYAK: As I have already said, one institution will not be able to cope with the requirement of physiclaims throughout West Bengal.

SHRI MALLIKARJUN: At present there is a proposal to set up 100 dispensaries throughout in this State. There are quite a number of teaching institutions and good and qualified professors. Then the colleges are run on their own lines, some are managed by boards of trustees, other are not and so on and so forth. Now all these things will be abolished and the doctors coming out of one central college will be accommodated properly and then others will also be given the right of private practice. So looking to the national interest, do you agree to have one homeopathic medical institution for the State?

DR. NAYAK: As this question is most pertinent, I request our senior colleague, Dr. Kanjilal, to speak on my behalf.

DR. KANJILAL: The question that has been raised is quite pertient from the point of view of an idealist but we must proceed on an objective and practical basis. If we look to the past history of allopathy, in allopathy there was only one medical college, namely, the Calcutta Medical College, and then at least two in the beginning and two later on were set up as non-official institutions. One was the National Medical College and the other was the Carmaichael Medical College sponsored by Dr. R. G. Kar and they were competing with the Government Medical College. But homoeopathic colleges are running on solely private people's -эcrifice as was done by Dr. R. G. Kar or the Carmachaeal Medical College and by Dr. Mahendra Lal Sarkar of the National Medical College, Even in diploma course there was only one Government Medical School, namely, the Campbell Medical School and another in Dacca, namely, the Mitford School and there were at least a dozen such medical schools run by private functionaries.

DR. KANJILAL: Of course, their resources are very poor. Even then, they produced physicians who are now really ruling medical circle. In all humility, I must say, I am also a product of the Carmchael Medical College. I appreciate the honourable member's contention, but we must have a broad outlook. We must not crush the resources that we already have. Government may take up all the institutions if they like as they are doing now. Many of the non-official colleges have become Government colleges. Let them have a separate Homoeopathic College. As you know, they are going to spend Rs. 8 crores 1 for construction of one building only. If they spend a few lakhs of rupees they can construct two or three medical colleges in Calcutta up to diploma courses in Homoeopathy and one college for degree course. It is not only a question of taking what we have, but you can improve the existing ones as well.

SHRI MALLIKARJUN: If Government of India decide to start an institute, would you like diploma course or degree course to be taught there?

DR. KANJILAL: We want both.

SHRI MALLIKARJUN: What will be the gap between the two courses how many years for diploma course and how many for degree course?

DR. KANJILAL: That is a thing to be decided by Government. My opinion is that both the courses should be there and the degree course should be for 5 years.

SHRI REDDY: What should be the duration for diploma course?

DR. KANJILAL: Personally, I feel that diploma course should not be for 4 years. It should be 3 years with 6 months' indoor training.

SHRI REDDY: Just now your colleague said, every year 200 people will come out. According to the proportion of the students, do you have the staff who are experienced, available?

DR. NAYAK: It is not available now, but if you like it may be made available.

MR. CHAIRMAN: Dr. Kanjilal, you should remember that each word you say here is recorded. Please be formal because this document will be placed before the Houses of Parliament. SHRI N. P. CHOWDHARY: What is your total strength?

DR. NAYAK: It is 900 to 1000.

SHRI N. P. CHOWDHARY: What is the number of teaching staff?

DR. NAYAK: 34.

SHRI CHOWDHARY: Is it enough?

DR. NAYAK: As regards the class allocation, as a Principal. I should say, it is more, as there is no wholetime teacher or part-time teacher.

MR. CHAIRMAN: You have two shifts. In each shift you have 500. Is it enough according to the ratio?

DR. NAYAK: 34 teachers are enough.

SHRI CHOWDHARY: What is the total expenditure of your college (annually?

DR. NAYAK: We already sent our copy of the 1970-71 budget. Yearly transaction is roughly Rs. 3 lakhs 25 thousand and odd.

SHRI REDDY: How are you meeting this expenditure?

DR. NAYAK: As regards the teachers—I, being the Principal, take only Rs. 50 as an honorarim—as ex-student of the college I have the proud privilege of doing something for the betterment of the institution—Vice-President and others take honorarira not exceeding Rs. 60.

SHRI CHOWDHARY: What about the rest of the expenditure?

SHRI CHOWDHARY: Do you teach any system other than Homoeopathy in your college? DR. NAYAK: No.

SHRI CHOWDHARY: Would you permit any of these Homoeopathic practitioners to practice Allopathy or any other system?

DR. NAYAK: No. On this point my conception and thinking is that Homoeopathic practitioners should not practice Allopathy or any other system. They should be loyal to their own system. An MBBS by virtue of his medical qualification could not practise Homoeopathy.

SHRI CHOWDHARY: Should it be penalised?

DR. NAYAK: Dr. Kanjilal is an MBBS....

MR. CHAIRMAN: When Dr. Kanjilal came here to give evidence he said that though he was an MBBS, he never practised Allopathy or gave any prescirption. Suppose people like Dr. Kanjilal and others who are MBBS and are practising both in Homoeopathy and Allopathy, would you like us to punish then by a penal clause

DR. NAYAK: Definitely.

SHRI CHOWDHARY: In emergency cases would you allow any Homoeopath using any other drug?

DR. NAYAK: The name itself is emergency. Emergency should be tackled in an emergent way.

MR. CHAIRMAN: He may move the other way.

DR. NAYAK: Yes.

श्री चिरंजीव झा: प्रध्यक्ष महोदय, एक सधारण प्रश्न है कि ग्रगर कोई ग्रदर सिस्टम प्रविटस नहीं करे होमियोपेथिक डाक्टर, तो क्या वायोकेमिक मेडिसिन भी ग्रदर सिस्टम माना जाता है या यह होमियो-पेथिक सिस्टम के ग्रन्दर है।

PR. NAYAK: For allied subjects like MRCOG and so on, we pay Rs. 2 as conveyance allowance and Rs. 200 per year for more than two lectures per week.

WITNESS: Bi-chemic system of medicine definitely differs with homoeopathy but as under that system of medicine there are certain similarities in symptom complexes, there is no harm if you practise it.

श्री चिरःजीव झाः : भया ग्रापके कालेज में वायीकेमिक सिस्टम ग्राफ मेडिसिन की शिक्षा भी दी जाती है ?

WITNESS: No.

श्वी चिरन्आव झाः तो अगर ग्राप जिक्षा नहीं देते फिर उसकी प्रैंक्टिस श्राप कैंसे ग्रलाऊ कर सकते हैं ?

WITNESS. Relationship between the two may be closer but as regards practice there should be scope of difference as an individual system.

श्री चिरःजीब झा: होमियोपेथिक सिस्टम श्रीर वायोंकेमिक सिस्टम को ग्राप सिमिलर बता रहे हैं। हमको जहां तक जानकारी है, यह सिमिलर का प्रथन नहीं है। वायोफेमिक में तो 12 तरह के साल्ट से इलाज करते हैं। उसका ग्रपना ग्रलग सिस्टम है। तो दोनों को ग्राप सिमिलेरिटी में ला रहे हैं, यह कैसे है?

WITNESS: The thing is that, say, for instance, Kali Phor 6 is both biochemic and homoeopathic. But the system of biochemic differs with homoeopathy.

SHRI B. R. KAVADE: Is there any biochemic doctor here?

WITNESS: There are a few biochemic doctors here.

SHRI K. REDDY: Suppose a doctor who has passed the MBBS also passes Homoeopathy examination. Is it not necessary for him to opt for one system?

WITNESS: Definitely.

SHRI K. REDDY: If he practises one system for which he has not opted, should he not be penalised?

WITNESS: Definitely.

DR. K. NAGAPPA ALVA: I would. like to know the following: (a) the bed-strength attached to your hospital; (b) whether you are having laboratory facilities necessary for diagnosing diseases or the methods by which you are diagnosing diseases; (c) whether staff member or any of the people connected with your college prepared any scientific papers; and (d) whether any attempt is made in the matter of research.

WITNESS: Your question is lengthy. As regards the first question, I would say that 38 bed-strength is maintained by us. As regards laboratory facilitics, we have the possibility of expansion as we have scope of amendment but due to paucity of funds this could not be done.

DR. N. ALVA: Are there any surgical facilities?

WITNESS: Yes, only in the case of minor surgery. There is a clear direction of course that there is no scope of using any machine in surgery cases. But arrangement is there to cut open small injury.

DR. N. ALVA: Whether your stall members produced any scientific papers?

WITNESS: We publish papers from our college though they are very limited.

DR. N. ALVA: Have you made any attempt regarding research?

WITNESS: We are at present working on drug proving under the Central Government.

MR. CHAIRMAN: You want Government to treat homoeopathy on equal footing with allopathy. If you attempt indiscriminately to produce

half-made doctors without having hedside teaching facilities-without having adequate number of beds for clinical materials-how do you expect a doctor trained in homoeopathy will be getting equal treatment from the Government? Do you think bed ratio to the student population is sufficent for adequate teaching because when a student comes out from your college Government will be giving him appointment, according to your desireon equal pay for equal work basis. though his education is not equal, his qualification is not equal. It is in your interest to see that admission system is made scientifically, your teaching syllabus is made adequate and training of the students is done on a very higher level.

DR. KANJILAL: That problem I have already explained. The problem is this. We want to improve the standard. Formerly for lack of prospect students of below standard were coming. Now, students find that some bright prospect is there and also the Calcutta University is going to have a Faculty so good students are coming. This year a large number of B.Sc. students have joined.

MR. CHAIRMAN; This Act was. passed in 1963 in West Bengal and the Council was formed right then, and you ought to have by now regulated the syllabus, training and everything. But in spite of that you are admitting 1200 students when you should not have admitted more than 300/400. How can you think that you can cope with the present day system of treatment? Secondly, as a Chairman of this Committee I ask if you have interest in homocopathy-some of you are members of the Homoeopathic Council-why haven't you replied to our questionnaire? Why haven't you asked our permission to come and record your evidence? Is that the way you are sympathising with the homoeopathic system? And you expect that Government will come forward and help you? We have got replies from each State Board-from Rajasthan Andhra, Mysore Haryana,

Assam and others-all of them have sent their replies and we have already sorted out whom we will be going to invite as witness. But you thought it best to by-pass the Central Joint Select Committee and you are thinking that you are doing enough for homoeopathy. We are going to write a strong note against the present Body and send a copy to the Government of West Bengal to supersede the Body as you did not care to reply. My members have every right to express dissatisfaction of everything. You claim to be the pioneer of homoeopathy not only in India but in Asia-that is how you have given your opinion before the members. You must explain why you have not thought it fit to reply to our questionnaire and after this why you should be allowed to continue as a Principal of that State Council. We will have a separate column in our report in order to restrict this kind of thing and a copy will be sent to Government of India and also to Government of West Bengal for taking proper action.

DR. NAYAK: As a Member of the Council—I am the Member of the Council as the Calcutta University's Vice Chancellor's nominee—I take a note of this and I regret very much for what the Council has done. I will put that note before the meeting of the Council to be held on the 30th. I am unhappy with this episode.

MR. CHAIRMAN: Somebody told us yesterday as to why we did not send invitation to the Council. That is not the code of function of the Council. We send questionnaire; they send reply; we go through them and sort out and select whom to invite and not because they are members of the Council they would be invited. We don't invite anybody. Invitation is sent on the basis of the reply that we receive. Because we did not receive their reply so we did not ask them to appear before this Joint Select Committee. And because they have failed to reply as the Chairman of this Committee I will personally take it up with Government of India and with Government of West Bengal and ask them whether this Homoeopathic Council or Board, whatever you call it, will continue to exist as they are now. On behalf of the Jt. Select Committee I say this, as its Chairman. In my personal capacity I would have taken it up with Government of West Bengal.

However, honourable members, have you got any more question to put?

(No body put any question)

SHRI M. S. VARMA: With permission of the Chairman, on behalf of this Committee I thank you very much. You have all taken the trouble of coming over here and giving us valuable suggestions and comments about this Bill, for which we are very much grateful. Thank you, gentlemen.

[The witness then withdrew.]

[The witness (Dr. S. D. Sircar) was called in.]

MR. CHAIRMAN: May I know your qualification?

DR. SIRCAR: I got my diploma from the General Council and State Faculty of Homoeopathic Medicine, West Bengal, which has now been transformed into Council of Homoeopathic Medicine. I was the Principal of D. N. De College, since retired.

MR. CHAIRMAN: As ex-Principal of Homoeopathic College may we have an idea about students who passed from your college and what are they doing after they got the requisite training?

WITNESS: It is very difficult to answer it. Of course most of them are doing practice. By this I do not mean that they are doing whole time practice. Some of them are doing part time practice also. Mainly the night department students who are enlisted as employees of other organisations, they are doing some sort of part time practice. MR. CHAIRMAN: Can you tell us and the Members of the Committee what is the general fee of a Homoeopathic Doctor here in Calcutta? What is the maximum fee and what is the minimum fee?

WITNESS: It is difficult to say what is the minimum fee. But about the maximum fee, so far as I know, it is not more than sixty four rupees.

MR. CHAIRMAN: How many will be in this category?

WITNESS: Of course they are very few in number. The number will not exceed 10.

MR. CHAIRMAN: Among these 10 persons how many are M.B.B.S.? How many are converted homoeopaths and how many are pure homoeopaths?

WITNESS: There are about three Heads who are converts. Of the remaining persons who are non-converts some have been trained in homoeopathic institutions and some have been trained in their own ways.

MR. CHAIRMAN: They are not M.B.B.S.

WITNESS: No.

MR. CHAIRMAN: Any questions please?

SHRI BHAOOSAHAIB DHAMAN-KAR: I would like to have a detailed clarification from you regarding your point No. 2 of your memorandum about the election.

WITNESS: So far as my experience in regard to organisational management is concerned, I feel, that five years' nonbreakable term of officewould induce a monotony, laxity and some sort of laziness which are not desirable in the interest of the organisation and for its proper development. There are very many institutions as also commercial houses. They get their business transacted, finished up and accounted annually to assess the merits and demerits and other things; this avoids the possibility of problems concretising sufficiently to log the wheels of speed and efficiency and that gives a yearly push and dynamicity to the organisation. They thus make every individual units conscious of the problems of the organisation by proper assessment of the merits and timely ideas that may be helpful.

SHRI BHAOOSAHAIB DHAMAN-KAR: You do not want General Election.

WITNESS: No.

SHRI BHAOOSAHAIB DHAMAN-KAR': But in your point No. 3 you have written, 'To make a ceiling of three months (12 weeks) for election or nomination of one or a few of profession individuals where the electors are obviously numberically limited indicates a slothy administrative movement; ...' Why?

WITNESS: That is for filling up a vacancy, 3 months would be too much.

SHRI BHAOOSAHAIB DHAMAN-KAR: In another point you have said that the expenses have to be borne by the Central Government, viz., your point No. 4. It reads, 'Since fixing the remuneration and allowance of the office bearers and employees of the Council virtually rests on the Govt. the learned Council need not expend its energies in a matter in which they have no discretion to use...' Do you feel that in fixing the remuneration the Central Council should be taken into consideration by the Government?

WITNESS: Of course, certainly.

SHRI BHAOOSAHAIB DHAMAN-KAR: Please say it very clearly.

WITNESS: The thing is that after the sanction of the Government is received there will be no problem. SHRI BHAOOSAHAIB DHAMAN-KAR: Should the Government ask for any recommendation from the Central Council?

WITNESS: I would rather say that the Central Council would be fixing up the remunerations and all other matters. They will be the decision making body. The sanction of the Central Govt. should be later event.

SHRI BHAOOSAHAIB DHAMAN-KAR: Sanction is needed. But do you recommend that Central Council's advice should be taken or should they recommend that it should be entirely left to the Government to fix up all the remunerations and grades etc.?

WITNESS: The wording in the Bill i not quite clear. If I have been able to understand it properly, I feel, that it should be modified to charge the Council to do this business of fixation of remuneration first and naturally, implementation and all other things will be subject to the control of the Central Government. But to give the entire matter of fixation of remuneration to the Central Government would be prejudicial to the interest of the Council itself, I think.

SHRI MAN SINGH VARMA: What are your views about the Registration clause?

WITNESS: I have put certain categories. First, diploma from an Authoritative Body after a specific course of Institutional training. This is No. 1. No. 2 is special knowledge as revealed through notable contribution in homoeopathic literature. No. 3 is Research work. No. 4 is practical experience in homoeopathy of not less than 10 years. These are the four catégories of persons who will be deemed to have the basic qualifications to be entitled to be registered in the Council.

. SHRI MAN SINGH VARMA: What is your opinion about those who have been practising for long years but have not yet registered their names? WITNESS: I have said that they should have experience of not less than 10 years.

SHRI MAN SINGH VARMA: You mean those who have been practising for more than 10 years and are not registered they should be registered.

WITNESS: If they are not registered in their own States then it will be difficult to get them registered because they had ample opportunities of getting them registered in their own States. So if they fail to do so it would not be proper at this stage to get them registered in the Council.

MR. CHAIRMAN: Any other questions

DR. K. NAGAPPA ALVA: Doctor Sircar, you are one of those who have great experience both in the medical education as well as practise. What is your contribution so far in the matter of literature and research?

WITNESS: As far as I feel these things are very meagre and humble. But I have written a book entitled, 'Organen Expositor' which is practically used all over India in the homoeopathic institutions and by people interested in Homoeopathic studies. I had been the Director of Research under the C.C.R.I.M.H.-D. N. De College Unit.

SHRI MAN SINGH VARMA: Has that been accepted as a text book?

WITNESS: As far as I know there has not been any proper procedure of selection of text books in institutions. Of course they have recommended my book as such.

DR. K. NAGAPPA ALVA: So your book has been accepted in this State and in other States also.

SHRI S. D. SARKAR: Yes Sir. All over India. I wrote articles in Homoeopathic Bulletin, in many Journals and in newspapers. I also made my contributions in the Amrita Bazar Patrika, Hindusthan Standard and some other papers in Calcutta and in Homoeopathic Sandesh in Delhi. I prepared a syllabus which was circulated already to the Syllabus Committee and I was encouraged by Dr. Jugal Kishore, Adviser on Homoeopathy, Government of India in this respect.

DR. K. NAGAPPA ALVA: About 200 years ago, the Homoeopathic system was actually put before the world by Dr. Hahnemanan. Afterwards it has been observed that very much advancement was made in the Medical Science all over the world. Naturally we expect that there should be some kind of advancement also in the Homoeopathic system. Do you think that in the light of this advancement in the Medical Science and research, the entire Homoeopathic system should be projected in such a way that the students who come out from the Homoeopathic institutions have got fullfledged knowledge in the advanced Homoeopathic system of medicine, I am saying about the infection by bacteira or virus where the question of Public Health and preventive medicine lies. Should you not suggest a syllabus by which the interested persons in Homoeopathy can develop a more modernised system?

DR. S. D. SARKAR: I feel everything is assessed on the merits of the modern medicine because modern medicine is taken as a standard with which the facilities or efficiencies of other medicines can be measured. Therefore, each system should develop in its own line, but since Homoeopathy has achieved a sponteneous development the idea of modernisation has not been thought of seriously. In fact, Dr. Kent suggested that in order to bring a full-fiedged healthy generation, the expectant mother should be given some sort of treatment so that the chlid that is going to be born will be a healthy child. Healthy child means, a healthy human generation. I do not think, any more advanced idea has been given in any other field. Now this shows that Homoeopathy is not, in any way, lagging behind the other system, but all these things could not be implemented because there are many difficulties.

DR. K. NAGAPPA ALVA: What is the minimum qualification that you think will be guite appropriate for admission to the Diploma Course. Degree Course and Post Graduate Course?

DR. S. D. SARKAR: As regards qualifications for admission, I personally feel that there shall not be any restriction because each and every institution will be going to admit students on the basis of certain pre-medicel test.

DR. K. NAGAPPA ALVA: I think you are confusing the point. Don't you think that definitely some minimum qualifications should be fixed?

DR. S. D. SARKAR: Not necessarily,

DR. K. NAGAPPA ALVA: Do you mean to say that academic qualifications should not be fixed for admission to these colleges?

DR. S. D. SARKAR: No. The admitting authority will be competent to judge the qualifications.

SHRI N. P. CHAUDHARI: Supposing a man has primary education only. Would you admit him?

DR. S. D. SARKAR: Yes. The thing is that there is a wise admitting authority and when they are going to admit naturally they will make the necessary examination.

DR. K. N. NAGAPPPA ALVA: Which is the authority?

DR. S. D. SARKAR: Either the Council or the institution.

SHRI K. RAMAKRISHNA REDDY: You know for admission to the qualification. A boy having that minimum qualification is entitled to apply for admission. You cannot expect everybody to be admitted just like my friend Chaudhuri suggested that a primary student can also apply.

DR. S. D. SARKAR: If a primary boy acquires qualifications fixed by the admitting authority, after the proper test, then, of course, I do not find there is any objection.

MR. CHAIRMAN: All right, you have made your position clear.

SHRI RANA BAHADUR SINGH: Dr. Sarkar, on behalf of this Committee I would like to extend to you our deep sense of gratitude for your taking the trouble of coming here and giving us your observations and knowledge. It seems that you have contributed very significantly to the science and we hope that you will continue to provide this science the benefit of your vast experience. We expect that you will have your knowledge and experience compiled and catalogued so that any person who is interested in the science can take benefit from your knowledge and experience. I think that from your own belief in the science you have got something in the nature of a fundamental truth which has not been properly developed and so put before the people. If I could simply put it, I would say that this science is almost like a Vedant which holds a very fundamental truth in its grasp but the unfortunate part of it is that it has not been brought down to the present generation. I hope you will continue to bring that truth down to the present generation for their benefit. Thank you very much and I hope that you will be granted a long term of service for this cause.

MR. CHAIRMAN: Thank you.

[The witness then withdrew.] ...

[The Committee then adjourned.]

Thursday, the 28th September, 1972.

(At Calcutta)

PRESENT

1. Shrimati Purabi Mukhepadh aya-Chairman.

MEMBERS

Rajya Sabha

2. Shri Sasankasekhar Sanyal
3. Shri Bhupinder Singh
4. Dr. K. Nagappa Alva
5. Shri Man Singh Varma

6.	Shri	K. C. Panda
7.	Shri	Sultan Singh
8.	Shri	N. ¹ P. Chaudhari

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Lok Sabha

9. Shri Ziaur Rahman Ansari	18. Shri Prasannbhai Mehta
10. Shri Muhammed Khuda Bukhsh	19. Shri N. Sreekantan Nair
11. Shri Bhaoosahaib Dhamankar	20. Dr. Laxminarayan Pandeya
12. Shri Hiralal Doda	21. Shri Janaki Ballav Patnaik
13. Shri Nageshwar Dwivedi	22. Shrì S. L. Peje
14. Shri Madhuryya Haldar	23. Shri M. Satyanarayan Rao
15. Shri Chiranjib Jha	24. Dr. Sankata Prasad
16. Shri B. R. Kavade	25. Shri Ram Deo Singh
17. Shri Mallikarjun	26. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY of HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy.

SecretAriat

Shri M. K. Jain, Under Secretary.

WITNESSES

(1) Dr. B. K. Sarkar, Calcutta.

(2) Representative of the Patna Homoeopathic Medical College, Patna. Dr. S. C. Ray, Principal.

(3) Dr. Kameshwar Prasad, Patna.

(4) Dr. S. Seal, Calcutta.

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(5) Dr. B. N. Chakravarty Adviser in Homoeopathy, Government of West Bengal, Calcutta.

(6) Representatives of the Council of Homoeopathic System of Medicine, West Bengal, Calcutta:

(i) Dr. S. K. Nayak.

- (ii) Dr. Dharam Das Banerjee.
- (iii) Dr. N. K. Chakrabarty.
- (iv) Dr. K. Pal.
- (v) Shri M. K. Ganguli, Registrar.
- (7) Dr. Anil Chandra Debnəth, Tripura.

(Witness (Dr. B. K. Sarkar) was called in.]

MR. CHAIRMAN: You are Dr. B. K. Sarkar.

DR. SARKAR: Yes.

MR. CHAIRMAN: You have got our questionnaire and you have sent your replies also. Do you want to make any further observation?

SHRI VARMA: Mr. Chairman, Dr. Sarkar may be requested to give an introduction of himself.

MR. CHAIRMAN: Dr. Sarkar, please let us have your details.

DR. B. K. SARKAR: I am an MBBS and am a Homoeopath too. I took my MBBS degree in 1925 and in 1952 I appeared for DMS Examination of the Calcutta Homoeopathic Faculty, going through it as a regular student-I sat in the examination with my own students in order to test my knowledge in Homoepathy. I am associated with several Institutions. I was Homoeopathic the D. N. Dey the **Principal** of Homoeopathic College for some time. Now I am the President of the D. N. Dey Homoeopathic College and Hospitals. I am also connected with Midnapur Homoeopathic College. I was the President of that College for some time. Now I am the President of the Trust Body of that College. I

am connected with one of the All Institutions. I India Homoeopathic All President of the was India Institute of Homoeopathy and I am a member of the Working Committee of that Institute till now. I am connected with some of the Government institutions also. I was Chairman of the Homoeopathic Pharmacopoeia Committee and member of the Committee of the Governing Body of the CCRI, H.M., and Chairman of the Scientific Advisory Committee under that body. I am connected with Homoeopathy in all its aspects, viz., teaching, professional and organisational. I am also connected with Government departments which control the destiny and welfare of Homoeopathy. So far as the questionnaire and my reply are concerned these are very clear. With regard to the question of basic qualification for registration of homeopathic doctors on all-India basis I wanted to impress in my reply that homoeopathic doctors should be recognised by the Homoeopathic Board, Council and Universities of different states of India-doctors who have undergone a minimum course of 4 years' institutional training. By this I mean they should be properly educated persons in homoeopathy and they should be complete physician as well. I want to stress the difference between a homeopath only and a complete physician. A physician is to look to many things. As a homoeopath he has got to be a therapeutist and as a general physician he has got to be a diagnostician, and he has got

to be a preventive officer having knowledge of medicolegal science and knowledge of public health. So, think institutional training is Ι essential for turning be a complete physician with speciality in homoenpathy which deals primarily with the selection of drugs in individual cases. That is why I stress that the basic qualification for persons who will be members of the highest Body of Homoeopathy viz., the Council, should be well-equipped with knowledge of all sides so that they will be able to discuss various matters conhomoeopathy—educational. cerning organisational etc. A complete physician will be able to hold their own in every field of medicine. That is why in the 4 year course in our syllabus we teach them mid-wifery, medical jurisprudence and everything. As a responsible man of the State they have got to discharge their functions severally and collectively. As a preventive officer, as a diagnostician and as a medico-legal jurist he is to look after the wellbeing of the patient individually as well as en masse. So, I stress on the basic qualification of persons who will be members of the highest Body. They should be well versed in all the subjects, both primary and auxiliary and so they should go through a 4 years' course of training in the diploma course which we have already started as DMS course which is going to be changed as DHMS. Those who have not gone through regular institutional training should not be accepted as a member of the highest body. There may be some persons whose knowledge is essentially necessary as a homoeopath and under exceptional circumstances he may also be included in the highest Body i.e., the central council, irrespective of party or anything else. We should look to the interest of homoeopathy and so there should be no other consideration. Persons who will be of some help, who will be an asset for furtherance of the cause of homoeopathy should be taken. This is my submission regarding basic qualification.

When homoeopaths are going to have some privileges associated with proper recognition of homoeopathy on the State level or all-India basis they have also some duty to discharge. They must be well-equipped in different branches of school and so we want that those who are already registered in this State although who partly undergone 4 years' have course of training but possess fairly comprehensive knowledge of the science and the arts specially in homoeopathy should be taken in the highest Body with the few exception as I have stated before. Here, there should be no other considerationonly best men should be taken for our interest, for the interest of the Government and also for the interest of our country men. And if you want to formulate the privileges of a physician you must look to those who are not qualified in any way and whose practice should be banned. Because you know medicine is such a subject and there are many people good or bad, quacks or otherwise, who get name, some has practical intuition. There are some people who have reputation and honour as a homoeopath. But that does not prove the rule. If you want to improve the standard of homoeopathy and the homoeopathic profession as well you must see that future entrants should come through a prescribed syllabus, curriculum in all fundamental of the medicinemedicinal, surgical and auxilia. I want to see a complete гy. homoeopath and so I insist on institutional training. Of course I admit that the institutions which we are running all over the country is far . from satisfactory because of want of fund, want of proper teaching men With Government patronage etc. proper facilities can be given I think better type of people would come, better type of students would come and in course of time we would have completely trained physician as we have got in our sister medical branch. That is why I insist that the highest Body should consist of thoroughly trained people so that we get proper

guidance through them in homoeopathy in future. And if those people are not properly trained then OUL very purpose will be defeated. Of course, those who are already registered they have been given the right of practice, right of giving fitness certificates and so on. We have not touched them. We only want those who will come to the highest Body should be picked up from people who have gone through 4 years' institutional course, however defective it may be at the present moment. That should be the minimum basic qualification for nomination to the General Council.

I am sorry to note here that though Government is slowly coming to recognise homoeopathy but certificates given by homoeopaths are not accepted by Government officials and also by private organisations. That anomaly should be removed as soon as possible. A man undergoes treatment under a homoeopath but his certificates are not recognised. In this matter I call for the same privileges to be given to the homoeopathic practitioners who have turned out from our colleges and got DMS or DHMS after 4 years' course as are given to allopaths. As soon as it is done the better.

WITNESS: As regards the last question—No. 50—to me it is not very clear. Are you referring to private or individual practitioner?

OFFICER, MINISTRY: This question has been included as some members of the Committee suggested it. The idea is that Government dispensaries should be equipped with laboratories as well as few beds. This does not refer to individual practising physician.

WITNESS: That should have been clearly stated. As regards No. 30, it is not possible to do this at this stage. In allopathy a private practioner is not called upon to maintain this standard. As regards other points, I have nothing more to add.

श्री मोंहन सिंह : डा० साहव, ग्रापने ग्रभी यह कहा कि रिजस्ट्रेशन उसी व्यक्ति का होना चाहिये जो फुनी क्वालिफाइड तो मैं इस फुनी क्वालिफाइड फिजीणियन्स का मतलब यह लगाऊं कि वह फुनी ग्रीर वेल क्वालिफाइडफिनीणियन बोना चाहिये । ग्राप उसके लिये क्या क्वालिफिकेशन्स चाहते हैं? क्या ग्रापका मतलव यह है कि जो मोडन मेडिकल साइन्स है, उसका उसके पास सटिफिनेट होना चाहिये ; टूसरे शब्दों में यह कह दूं कि उसे एनोपयी की भी डिग्रो लेनी चाहिये तब ही उस कम्पलीट माना जायेगा या फिर केवल होम्योपेयी की ही डिग्री लेकर उमे कम्पलीट माना जायेगा?

WITNESS: If you go through our syllabus, which is a four-year course, you will find that we have to learn this condition of disease. Where surgical interference is necessary we know when to do it. When we passed our MBBS we had to appear for this examination but we do not practise anything. If we get a case which requires special knowledge we hand over the case to a specialist. Nowadays we teach all this to students but there is want of facilities. We do not have a regular hospital. A fully-equipped doctor should know when other's intervention is necessary for the sake of safety of the patient.

SHRI MAN SINGH VARMA: Within the sphere of homoeopathy you want complete knowledge?

WITNESS: A homoeopathic doctor must be a complete physician. I say 'must'. He will be able to hold his hand in every department of medicine to remove the ailments.

DR. L. PANDEY: There was a suggestion for a condensed course. What is your opinion about this?

WITNESS: Yes, if they want to practise homoeopathy. Now that homoeopathy is going to be recognised by the Government they should also have a chance to learn homoeopathy. For them there, should be some sort of qualifying examination. Now that we are going to regularise, standardise the profession we must have some sort of arrangement by which their knowledge of homoeopathy tested by a faculty or a board constituted for this purpose so that people also know that there is a man who is an allopathic doctor but whose knowledge of homoeopathy has been tested by a faculty or a board.

SHRI MAN SINGH VARMA: When a man will be allowed to practise in both the systems once he opts for one?

WITNESS: When he has opted for one system, namely, to practise homoeopathy he should not be allowed then to practise in allopathy unless he is qualified for that system also.

DR. ALVA: Should there be a penal clause for that?

WITNESS: I do not want to punish a doctor for that as that would be too stiff specially when, for the first time, we are going to regularise the profession.

SHRI DHAMANKAR: What should be the duration of the condensed course?

WITNESS: One year for the new entrants only—not for the registered doctors.

SHRI DHAMANKAR: For those who are already practising and registered what would be your suggestion?

WITNESS: So far as West Bengal is concerned there are already registered doctors. Still there may be some who may not have formally taken a diploma or a degree. When I was the Chairman of the Executive Council of the Homoeopathic Faculty I sat for examination along with the students just to give them an impetus.

SHRI BHAOOSAHIB DHAMAN-KAR: Yesterday there was a suggestion by some witnesses here that those allopaths having M.B.B.S. degree practising as registered homoeopathic practitioners should have a condensed course training. Are you of that opinion also or you feel that those who are already practising as registered homoeopaths should be allowed to practise without having the training in that condensed course?

WITNESS: If they are practising homoeopathic practias registered tioners already then they should be allowed to do so, and it should apply to the new entrants when we are going to regularise the whole thing. But to apply this to those who are already practising as homoeopaths would not be proper. In fact in Calcutta there are 3/4 homoeopathic doctors who have earned all India reputation. One of my friends Dr. S. K. Das who died recently was an out and out homoeopath although he was a M.M. He had earned all India fame. Now, when he started practishomoeopathy there was no ing Homoeopathic Faculty. We cannot stop him from practising because he has shown by his practice that he knows homoeopathy by curing patients . But from now on with the enactment of this Bill and the formation of the Homoeopathic Council this new thing should be started. That is my view.

SHRI N. SREEKANTAN NAIR: You have suggested that gynaecology, surgery and other things will be taught in homoeopathy for obtaining Homoeopathic Diploma. Do you want they should be taught gynaecology, surgery and all these as they are taught in allopathy or do you want a different machinery other than the allopathic training.

WITNESS: Whenever we come to the medicinal side i.e. gynaecology, obstretics, and other conditions we should consider homoeopathic medicines. But as regards diagnosis, prognosis and such other things they should have training as the allopathic peoples. Say in the case of ovarian tumour a homoeopath ought to know whether operation is needed or not, upto what stage medicine has to applied and at what stage the patient is to be handed over to the specialist for operation. Knowledge of these subjects are essential as wrong decisions sometimes take valuable lives. We know that every system has its merits as well as limitations whether it is allopathy, homoeopathy, or Ayurved. We should be liberal enough but we must know what to do in which cases.

SHRI N. SREEKANTAN NAIR: From your explanation I understand that those homoeopaths who have been practising for 4/5 years will be given a preliminary training in gynaecology, midwifery, surgery and after that they should be allowed to practise and to act as a homoeopath.

WITNESS: The man who has the inclination in homoeopathy must be knowing the medical side of the treatment. If he is qualified otherwise while undergoing a training in surgery and other subjects why should he not operate when operation is wholly necessary for the sake of operation.

SHRI N. SREEKANTAN NAIR: Do you want them to be registered both as allophatic and homoeopathic practitioner if they know surgery and gynaecology?

WITNESS: If I have acquired allopathic qualification you cannot erase that out. I am a M.B. Shall I be deprived of writing my degree after my name? I can write M.B. as well as my homoeopathic qualifications. SHRI MAN SINGH VARMA: Are you practising in homoeopathy?

WITNESS: Yes.

SHRI MAN SINGH VARMA: Do you sometimes prescribe allopathic medicines?

WITNESS: No, not necessarily. Unless it is needed I can wait. I was a physician, I was a surgeon. I was Junior and Senior house physician.

MR. CHAIRMAN: You are a M.B. Have you ever prescribed allophatic medicine for your patient whom you were treating in homoeopathy?

WITNESS: No.

MR. CHAIRMAN: Do you know any member who is M.B. and who might be practising in homoeopathy ever practised allopathy side by side.

WITNESS: No, but sometimes auxiliary medicines like vitamines are given

DR. K. NAGAPPA ALVA: While speaking about this basic qualifications and four years' course you have not mentioned what should be minimum qualification and again while point out these things you made three different categonies, viz., preparation of homoeopathic doctorsone set to be homoeopaths that is the general medical practitioners and another full doctors as physians. I will add another thing that we want teachers also. I would like to know what is the basic minimum qualification for admission of the students to this homoeopathic course. Then I would also like to know in what way you will be able to prepare doctors i.e. full physicians. Should they not have degree courses and also should there not be degree courses for the teachers if they want. There should he postgraduate courses for the physicians also. What are your suggestions?

WITNESS: We want graded course at the present moment. Then Diploma Course, then 2 years' of Degree Course and then a year or two for the postgraduate course. The question of graded course was discussed threadbare for long time in the Government Advisory Committee, On the last occasion it was decided that there should be three courses in homoeopathy because our country is a vast country and it will not be supply doctors with possible to adequate proper and training villages all over India the in if there are not three courses. So for the majority there will be Diploma Course then so far as the teachers are concerned they should be more qualified and they should go for the Degree Course. In future we should also have the Post Graduate Course. So about the graded course we discussing. We have have been made a resolution in our meeting of the Homoeopathic Advisory Committee and that resolution stands.

DR. K. NAGAPPA ALVA: I am asking about the minimum qualification that is needed at the time of admission.

DR. B. K. SARKAR: When we started faculties in different State Boards and Advisory Committee was There was a lot of constituted. discussion and it was decided that the minimum qualification should be School Final. Our idea was that the candidates should be at least Higher Secondary Examination with But the standard of edu-Science. cation in certain States was so low that we could not enforce the minimum qualification as H. S. and ultimately we made in our curriculum that School Final would be the minimum qualification, and gradually it should be H. S. with science for entering even in the Diploma Course of Homoeopathy. In the past, most of the people did not care for any institutional training because of its weak prospect, but now the situation is changed and more boys are coming forward to have their Dip-So, in the chanlomas or Degrees. ged circumstances. the Advisory Committee should systematise the sylabii on an all India basis. I think, the minimum qualification should be Higher Secondary. If the School Final remains as minimum qualification we would have to teach them the elements of Physics, Chemistry and Biology in the Diploma Course.

MR. CHAIRMAN: What will be the minimum qualification for the students of the Degree course?

DR. B. K. SARKAR: The students who have passed the Diploma course they will take their admission in the degree course. I do not prefer any direct admission in the degree course.

DR. K. NAGAPPA ALVA: Dr. Sarkar you have explained about the minimum qualifications of the students who have passed the Diploma course and are going to be admitted in the degree course-in this case you prefer that the qualification should be S. F. examination and at a later stage the H.S. will be the minimum qualification. Now, I am telling that you are going to have Medical Colleges in Homoeopathy where the degree course will be taught -what should be minimum qualification for the students who seek direct admission in those colleges?

DR. B. K. SARKAR: In this case, Higher Secondary with science should be the minimum qualification for entering in the 5-year i.e. degree cour-This idea was agreed to by the se. Committee that Advisorv there should be a graded course or there should be a degree course from the beginning and that should be sponsored by the Government so that there may not be any difficulty of finance.

DR. K. NAGAPPA ALVA: There Homoeopathic physicians and practitioners get their knowledge of diagnosis from the institutions, but in the case of surgery they advice the patients to go to the specialists. So, is it not necessary to prepare text books to give them necessary knowledge in medicine, surgery and in other specialised treatment? As my learned friend, Shri Nair, has put a very relevant question that we cannot expect from these students knowledge of surgery, E. N. T. etc., do you not think it will be necessary to prepare such small text books to give them necessary knowledge? I like

to put you another question regarding the drugs—are you satisfied with the standard of drugs that are being used now a days? Kindly give your opinion about the text books that you are having at present and the system of medicines that are being used.

DR. B. K. SARKAR: I fully agree on this point. We are experiencing the lack of proper teachers in many of our institutions who can teach on medicine properly. Regarding surgery, we are to take the help of Allopathy teachers, but the difficulties we feel are that these Allopaths express their view points, perhaps unconsciously, in the Allopathic method of treatment on different diseases. Naturally the students cannot know the Homoeopathic method of treating diseases which are absolutely known as surgical treatment. It is true we feel all these difficulties and when we should have degree course or the post-graduate course we should have proper doctors, teachers and equipments and so on. In course of time, when homoeopathy is going to be regularised and when there will be prospects for homoeopathic doctors for appointment, certainly we should have better types of men and all the facilities.

SHRI UMED SINGH RATHIA: What do you think the medium of instruction should be—either Hindi, English or regional languages?

DR. B. K. SARKAR: At the moment instruction is carried on in English and I think it should continue for some time till we have sufficiciently developed books of local dialects. So it is not advisable to change everything into our mother tongue for teaching standard subjects 1648 RS-6 and books. Of course, time may come when we have to change but not now.

SHRI JANAKI BALLAV PATNAIK: You have spoken about representation in the Central Council and you said that those who have got four years' training in homoeopathic institutions should only be eligible for election. There are quite a large number of doctors who are registered and who do not have this requisite qualification. They have been practising homoeopathy in this State and other parts of the country-If the principle that you have suggested is accepted, then these people would be deprived from going to the Central Council. What have you to say on that?

DR. B. K. SARKAR: Eminent people should be taken in.

MR. CHAIRMAN: What do you mean by eminent people?

DR. B. K. SARKAR: Uuless we have a standard there is difficulty. A Tom, Dick or Harry or anybody everybody goes to the Central or Council the purpose for which this is being done will be defeated. Of course, all physicians are brothers but then when the matter comes to the question of education, those who are qualified to impart education, 'those who are registered in their States as homoeopathic practitioners should be taken jn.

SHRI M. SATYANARAYAN RAO: On behalf of the Committee I thank you Dr. Sarkar, for having accepted our invitation to come here and give your evidence. I think your evidence has been very useful. With your wide experience we have been very much benefited and we are very impressed by your answers to the various questions put by my colleagues. I once again thank you on behalf of this Committee.

DR. JUGAL KISHORE: Madam, I want to have one clarification from Dr. Sarkar, In the West Bengal Homoeopathic Council Act there is a provision that a registered homoeopath shall be entitled to give a medical or fitness certificate required by any law. So this clause is there his certificate is accepted.

DR. B. K. SARKAR: But in actual practice it is not being accepted. Before leaving, I want to say this that I am at the fag end of my life, I am over 70. We started this agitation for recognition of homoeopathy thirty years back. I may pass away but I want to see Homoeopathy to stand on proper platform with all the dignity that it deserves. I thank the Chairman and members of the Committee for allowing me to give this elucidation.

[The witness then withdrew].

The witnesses (Dr. S. C. Roy, Principal, Patna Homoeopathic Medical College, and Dr. B. K. Pandey, Professor, Patna Homoeopathic Medical College) were called in.]

MR. CHAIRMAN: We have got your reply. Have you got any further comments to make on our questionnaire?

DR. S. C. ROY: I have got a copy of your questionnaire. Shall I explain the points?

MR. CHAIRMAN: No, you do not have to repeat whatever points you have given in reply to your questionnaire. If you have got any new points, you may tell them.

DR. S. C. ROY: I have given almost everything in para 19. The Council should be above all anđ there should be State Councils under the Central Council. They will be guided by the Central Council to conduct examinations and all that. and not the Board. My contention is that in the present board all members are not qualified in teaching staff or anything connected with institutions. They may be taken from outside but if the State Council isMR. CHAIRMAN: That is clear. Is there any other point?

DR. S. C. ROY: Members of the State Councils of Faculty should be Principals of all colleges or their representatives.

MR. CHAIRMAN: A person who is (not connected with a recognised college should not be a member. That is your point.

DR. ROY: Yes.

DR. LAXMINARAYAN PANDEY: What should be the minimum qualification for admission to the Homoepathic Colleges?

DR. ROY: Minimum qualification should be Matriculation.

SHRI K. C. PANDA: What should be the qualification for admission to a Degree College?

DR. ROY: They should be at least I. Sc. with Biology. At present we are taking Matriculates, but the minimum qualification should be I. Sc. with Biology.

श्री चिरंजीव झाः : डाः सहब, श्राा ग्रपने कालेज में हौम्यो.पैशी मैडिशिन के सम्बन्ध में जो शिशा देते हैं? क्या इसके ग्रानावा वायो.कैमिक की भी णिक्षा देने है?

साझी : जी, देने है।

MR. CHAIRMAN: Do you teach Biochemistry in your college?

DR. ROY: Biochemistry is a part of Homoeopathy though there may be a little difference. Bichemistry deals with 12 salt remedies which replace the deficiencies of salts in human body. Whereas, Homoeopathy is similia similibus curentar. Biochemistry is also the same thing—with salt of some kind it cures. But it is a part of Homoeopathy. It is not separate.

SHRI MAN''SINGH VARMA: In Allopathy also salt is there.

DR. S. C. ROY: Fundamentals of Biochestry and Homoeopathy are same.

SHRI BHAOOSAHAIB DHAMAN-KAR: Are there some practitioners who restrict themselves to these 12 remedies?

DR. ROY: If they restrict themselves to Biochemistry only, and if they have no knowledge of Homoeopathy, they should not be called Homoeopaths.

SHRI MADHURYYA HALDAR: I would like to know whether the fundamentals of Homoeopathy and Bichemistry are same.

DR. ROY: There is a little difference. They are giving 12 salt remedies-a kind of food fulfils the deficient salts in the human body in potentised form. Whereas, Homoeopathy is similia similibus curanter-medicine is proved on human body and should be given in a potentised form. Biochemistry, in the same nature, fills up the deficiences of salts in the human body by 12 salts inpotentised form. So, thero is fundamental difference. Simple Biochemistry cannot be called Homoeopathy.

SHRI MADHURYYA HALDAR: If there is fundamental difference between Homoeopathy and Biochemistry, how can Biochemistry be called part of Homoeopathy?

DR. ROY: Dr. Schuler was also a Homoeopath, but found that there was a little different and every method to cure diseases by discovering only 12 Tissue Remedies. There are medicines in Biochemistry like Silecea, Natrum Sulph, etc. These are also used in Homoeopathy in potentised form. When Kali Mur is given in a potentised form it is Homoeopathy, Whereas, when it is given in Biochemic method of salt, triturated it becomes only Biochemic. So, it is a part of Homoeopathy and not a separate thing.

SHRI CHOWDHARY: Dr. Roy, you are aware that there are two types of

practitioners in Homoeopathy—people who are trained institutionally and others who are not so trained. Would you suggest that those who are institutionally trained should be allowed to practise?

DR. ROY: Those who are already in the field should be allowed to continue and from now on new comers should not be allowed.

SHRI CHOWDHARY: What period of practice would you allow for this purpose?

DR. ROY: It should be more than 10 years' practice and 5 years' experience.

SHRI CHOWDHARY: Will you permit any Homoeopath to practise Allopathy or any other system of medicine?

DR. ROY: I do not agree.

SHRI CHOWDHARY: Shrould an Allopath be allowed to practise Homoeopathy?

DR. ROY: If he is trained in Homeopathy he will take up cases as an Homoeopath and if there is a case where surgery is necessary he should refer the case to a Surgeon.

SHRI CHOWDHARY: If any Homeopath practises in Allopathy, would you like that there should be any penalty?

DR. ROY: Mixopathy is not to be tolerated. Homoeopathy should be pure.

SHRI CHOWDHARY: If any Homoeopath practises in Allopathy would you suggest any penal clause for it?

DR. ROY: I do not follow exactly how Homoeopaths can practise Allopathy.

MR. CHAIRMAN: Will you allow an homoeopath to practise allopathy?

WITNESS: I should not allow him. An homoeopath cannot be allowed to practise allopathy.

् भी विरंजीव झाः डा० साहव, क्या ग्राप ग्रपने कालेज में सर्जरीकी शिक्षा नहीं दते है;

साझी (डा॰ राय): सर्जरी की जिला जब करिकुलम में है तब देनी तो पड़ते है। लेकिन, एख ए नैटर ग्राह फैक्ट, हमारी अपनी ओपोनियन ग्रगर लोजिए तो—टेट गढ वी इनिमिनेटेड

(that should be eliminated), as surgery has no scope in Homoeopathy, excepting injuries, fractures etc.

SHRI DHAMANKAR: Why?

WITNESS: Surgery is rarely necessary in homoeopathy. As for instance, tonsile, appendicities-these are not surgery cases in homoeopathy. They should be absolutely eliminated. When such a condition arises let the homoeopathic doctor refer the matter to a surgon. In Organon of Homoeopathy it is stated that out side frauma should be treated from outside. So, excepting the local injuries, all other cases are internal diseases and they should be treated by internal medicines only in Homoeopathy.

MR. CHAIRMAN: Supposing you are treating a case of appendicities and at that time there was no sign of perculation but afterwards suddenly it appears. What exactly would you do at that stage?

WITNESS: I will administer homoeopathy medicine first and try my level best to subside it. At the later stage when immediate operation is needed I will refer it to a surgical specialist.

MR. CHAIRMAN: There is scope for further surgery?

WITNESS: Yes, even the MBBS is not a full course of surgery. They also do not undertake surgical cases; they refer those matters to surgical specialists. Surgery is quite a different thing. That is termed as M. S., FRCS. An allopath doctor refers the matter to an expert in cases of emergency. Similarly, an homoeopath should also refer the matter to expert in such an emergency. Both Allopathic and Homoeopathic practitioners are physicions and not surgeons.

श्री मानसिंह वर्षा. यह तो ठीक है, जो ग्राने कहा है कि उत केम को रेफर कर देना चाहिए लेकिंग दोमियोपेगी को इनना इकिशि रेन्ट तो होना चाहिए कि एक होमयोपैंग डाक्टर समझ रके कि रेफर करने क डिंगति में है। उनके लिए श्रापके यहां कु 9 न कुछ ट्रेनिंग होना चाहिए।

WITNESS: Yes Sir, That is why only general Surgery is necessary. Regional surgery is not needed in Homoeopathy.

SHRI BHAOOSAHAIB DHAMAN-KAR: In homeopathy also

CHAIRMAN: Is that enough?

WITNESS: I prefer that every doctor in homoeopathy or any pathy whatsoever should be given full training in first-aid and bandaging.

MR. CHAIRMAN: Is that enough that only first-aid training will be given?

WITNESS: Knowledge of first-aid and knowledge of general and minor regional surgery are required.

श्री जिरंजीइ झाः डाक्टर साहव, क्या आप यह आवश्यक नहीं समझते कि होमियो-पैथिक सिस्टम आफ मेडिसिन को कम्पलीट बनाने के लिए सर्जरी की शिक्षा भी उच्चकोटि की दी जाए ?

साक्षीः उसके वास्ते जो कोई चाहते हैं: एक्स्ट्रा ट्रेनिंग ले । Generally a doctor in homoeopathy should not undertake surgery cases. But let them have special training so that they can be called upon to undertake such cases also.

DR. L. PANDEYA: If some institutions in Homoeopathy make special arrangements for that?

WITNESS: We have no scope at this stage but we agree that there should be scope for that.

श्री जात देव सिंहः क्या होमियोपेयी में इंगैक्शन देते हैं ?

साक्षी : होमियोपेथी में इंजैक्शन कहां से देंगे ?

Injection is not at all necessary. Our homoeopathic medicine is so effective that it acts immediately on touching the mucous membrane or even by smelling. Thus effect is seen in the patients. So what is the use of injecting and giving him pain. Moreover when ampules are prepared heat should be given to seal the mouth of 'the ampule whereas in homoeopathy when heat is given the potency is lost or changed.

SHRI Z. R. ANSARI: When you say homoeopathic system of treatment is made on the basis of similarity of symptoms then why do you insist on having the knowledge of Biology for the students?

WITNESS: A doctor must have knowledge of the human body its different parts. If he does not know where the heart is and if he puts his stethescope on the head it will be ridiculous. Without the knowledge of Physiology and Anatomy he should not be a full-fledged doctor. Knowledge of Physiology and Anatomy is very very essential.

SHRI Z. R. ANSARI: You said just now that some sort of knowledge in first-aid is necessary for homoeopaths. But as far as our knowledge goes, firstaid means antiseptic injections, antitetanus injections etc. Do you have any such medicines in Homoeopathy?

WITNESS: First-aid does not include injection or anything else. If there is a fracture and the colour hone is broken or dislocated we must give bandage so that the bone is not separated and there should not be any pain and afterwards we will send him to hospital.

MR. CHAIRMAN: Please explain. Suppose, my hand is fractured won't you give me anti-tetanus as a first aid?

WITNESS: I will give him my own medicine—hypericum, which is more effective than anything else. It is harmless and has no after effects.

DR. K. N. ALVA: Doctor, we are really very happy that you have been very frank and clear in your mind. I would like to know from you some facts regarding your college-whether you have fully qualified teaching staff, whether they are in a position to teach students in all the subjects, whether you have any laboratory facility, whether you are having the text books which are necessary. Considering all those things we want your suggestion as to how we can improve those things to have medical education and homoeopathic practice to standard. Particularly, you have said that anatomy is very necessary. But generally we see that things are shown by charts and skeleton. Is it not necessary that dissected human body should be demonstrated to the students. Have you got any such thing in your college?

WITNESS: I don't fully agree with you that dissection is absolutely necessary. I think that can be eliminated. In my opinion snatomy in general is required not in detail for every doctor. Some sort of knowledge of anatomy we must have.

DR. K. N. ALVA: I am asking you, will it not be good for students is dissected bodies are shown to them so that they may have a first-hand information about bones, what is the nervous system, what is the artery system viz., all vital organs of the body. Otherwise, seeing a chart it will not be proper. So, there should be arrangement of showing dead body to students. That is my feeling—it is very necessary.

MR. CHAIRMAN: Shall I reply? It is not necessary in homeopathy because in allopathy they make localised treatment but in homeopathy they make treatment of the whole system.

DR. K. N. ALVA: My suggestion is that demonstration of dissected body will greatly help the students to increase their knowledge.

WITNESS: I fully agree with you. If the students are given demonstration of dead bodies that is certainly better. But generally very few institutions have such opportunities.

DR. K. N. ALVA: We have about 100 medical colleges where this advantage can be availed of.

WITNESS: If that is not possible then it can be done by demonstrating on skelton, by bones, by visceras separately with models and so on. We have tried to procure dead body but we have failed. So, we are giving demonstration with models. Medical colleges are not allowing us to take our students there to give demonstration with dead bodies. I have tried that.

DR. K. N. ALVA: But you think it desirable?

WITNESS: Yes.

SHRI RANA BHADUR SINGH: We are trying to remove those people who are not qualified, from practice. What is the best method also to remove the quacks? At the same time many people in this country practise homoeopathy on charitable purposes. Do you want to retain them in the line or you want to remove them also?

WITNESS: Quacks can be eliminated by introducing through colleges: a system of registration. For instance, now registration is stoppedoutsiders are not registered. Only those who are practising from long before, they are registered. Let them go on till they are automatically eliminated. Henceforth now comes qualification, without institutional should not be registered.

What about MR. CHAIRMAN: charitable dispensaries which the member wanted to know. Suppose, I don't have any institutional training in homeopathy but I sit in a charitable dispensary, don't charge anv fee and treat the patients, will you take away my right to sit in a charitable dispensary and prescribe homeopathic medicine and by that help poor people?

WITNESS: Yes. But you said that only qualified people should be in the charitable dispensary. What do you mean by the words 'only qualified'. Those who are practising for 10/15 years are they not qualified?

ONE MEMBER: Would they be allowed to practise?

WITNESS: Madam, they are better doctors than those who are coming out successfully in the homoeopathic examinations.

SHRI K. C. PANDA: Suppose I distribute medicines on charity from my home for the last 20 years although I have not got registered myself.

WITNESS: But there was scope for you to come in and have yourself registered. When it has been stopped there is no scope for giving charity. It was there even 2/3 years before. Only last year also they have been taken as registered homoeopaths,

SHRI RANA BHADUR SINGH: What do you suggest as to how these people be tested and allowed by the **Central Council to practise charitably although they are not institutionally qualified for registeration.** What do you think to be the best possible way to recognise them as practitioners who can practice?

WITNESS: There will be some Either the State Govdifficulty. ernment should take some kind of short examination and allow them to be registered or they can register them if they like giving another chance otherwise there will be difficulty as they are not registered doctors nor they are institutionally qualified. Then what is the proof that So there will they are practising. be some difficulty. If such persons are still left out then it is the discretion of the Central Council to consider that.

MR. CHAIRMAN: Suppose I took a box of homoeopathic medicines and began to treat my neighbours without charging any fee. Can I do that?

WITNESS: Legally you cannot.

SHRI SASANKA SEKHAR SAN-YAL: Is it not a fact that very highly qualified homoeopathic doctors and other (doctors can cure some patients and in some cases they fail? Similar is the case that those who are supposed to be underqualified or less qualified can cure some patients and may fail in some cases.

WITNESS: You mean that both should be treated in the same level.

SHRI SASANKASEKHAR SANYAL. There cannot be any trace.

MR. CHAIRMAN: Mr. Sanyal, you are not to express your opinion.

WITNESS: Why you are taking of homoeopathy alone. Even in allopathy they cannot cure all the patients.

SHRI ZIAUR RAHMAN ANSARI: Since the registration facilities and opportunities have been given to the homoeopaths to be registered as medical practitioners do you think that many such persons who have neither knowledge nor experience in homoeopathy are also being registered and that they are doing great dis-service to the whole country and practising like quacks?

WITNESS: What do you mean by quacks?

SHRI ZIAUR RAHMAN ANSARI: Those persons who have no knowledge either in homoeopathy or any system of medicine whatsover.

WITNESS: Then how they can be called doctors either in homoeopathy or in the allopathy or in both?

SHRI ZIAR RAHMAN ANSARI: They have no qualifications but they have registered themselves some how.

WITNESS: They should be eliminated as soon as possible.

SHRI ZIAR RAHMAN ANSARI: Since registration facilities have been given there may be persons who are institutionally trained and registered. On the other hand there are many persons who are not institutionally trained but they produce certain certificates that they are practising for such a long time and they were also given registration Now, out of the second facilities. category many quacks also enter the profession but they have no knowledge in homoeopathy. Do you prefer any test for those persons who are registered but who are not institutionally trained?

WITNESS: Certainly I would prefer this but this is the lacking of the Registration Department. Either in Bengal they have made it or it should have been thoroughly scrutinised before registration. In our State they have not made it. What can we do for that? In my opinion they should be eliminated.

SHRI BHAOOSAHIB DHAMAN-KAR: After this Act comes into force all these unregistered persons will be eliminated. Do you suggest that those who are practising for the last 10/15 years but have not registered should be given opportunity so that they can undergo a test and get themselves registered?

WITNESS: When they are already in practice for the last 10/15 years then they have already registered themselves.

SHRI BHAOOSAHIB DHAMAN-KAR: But I am speaking of those who are doing social service by charitable distribution of medicines. They are not registered or they have taken any training from any institutions. They started practising homoeopathy as a social service. After the Bill is enacted do you think that they should be allowed the opportunity to get themselves registered after passing certain tests?

WITNESS: They should be given the opportunity.

MR. CHAIRMAN: Practice legally means that where in lieu of that you get money. But if you do it voluntarily without any charge then why should you debar them? This Bill is to regulate practice but that is not practice.

SHRI N. P. CHAUDHARI: We have seen numerous quacks practising in the streets and foot-paths and they are treating patients and selling medicines. Would you allow them to do so.

WITNESS: I think, I have already given my answer on this point. The persons who have not yet got their registration I find no scope of their registration until and unless the Central Council makes rule for that purpose. I my opinion, now a days the registration should be given to those students who come through institutions after getting proper standard of education.

SHRI N. P. CHAUDHARI: My point is, whether the persons who are not properly educated in the Homoeopathic system or have got no education at all but are handling and selling the medicines should be allowed to continue this process.

WITNESS: Certainly not. This practice should be stopped immediately. Let the inspectors check all these malpractices.

श्री चिरंजीव झा : मैं यह जानता हूं कि क्या श्राप हे म्योभैंथी में पैथोलेजी एग्जा-मिनेशन को जरूरी समझते हैं या नहीं ग्रौर 1 इसकी लावश्यक्ता है या नहीं ?

साक्षी : कुछ है, एकदम नहीं है, यह मैं नहीं कहता हूं।

श्री चिरंजीव झा: तो क्या प्राप इस चीज के लिए विद्यार्थियों को शिक्षा देते हैं ?

साक्षी: वह तो केरिकुलम के ग्रन्दर है।

श्री चरंजीव झाः क्या कालेजों ; होम्यो-पैथी शिक्षा के श्रालावा वायोकैमिक की भी शिक्षा दी जाती है ?

साक्षी : जी हां होम्योपैथी शिक्षा के साथ वायोकैमिक की भी शिक्षी दी जाती हे ।

WITNESS: Pathology, Itiology etc. and prognosis and differential diagnosis should come within the purview of pathology. Only giving a name of any disease—we do not prefer. When we say about the totality of symptoms it includes the disease symptoms, but if we do not know the diseases and their symptoms, how can we know the disease symptoms. So, the totality of symptoms include everything and that is why knowledge in pathology is essential.

SHRI MADHURYYA HALDAR: Do you prefer the system of postal training in Homoeopathy?

WITNESS: Postal training in Homoeopathy should not be encoura-There are lots of practical ged. training, but the students who cannot have that knowledge properly through the training in institutions they must face difficulties in their service to the people. So, postal diplomas in Homoeopathy should not be entertained.

SHRI JANAKI BALLAV PAT-NAIK: I express thanks on behalf of the members of the Joint Committee on the Homoeopathic Central Council Bill and on behalf of myself for your valued suggestions.

(The Witness then withdrew.)

[The Witness (Dr. Kameswar Prasad, Prasad Homoeo Clinic, Daldali Road, Patna-3 was called in.]

MR. CHAIRMAN: Dr. Prasad, please introduce yourself as to how you have been trained, whether you have got a degree in Homoeopathy or in Alopathy, *i.e.*, regarding your qualification.

डा॰ कै॰ प्रसाद : मैंने ये डिग्रियां पास की हैं :

एम० ए० इन प्राकृतिक, विहार यूनिवर-सिटी से ।

डीं० एम० एस० : बिहार स्टेट बोर्ड श्राफ हतम्योपैथीथिक मेडीसिन, पटना :

साहत्यिालंकार : हिन्दी विद्यालय, देवधर से । साहित्यरत्न । हिन्दी विश्वविद्यालय, प्रयाग से ।

श्री मान सिंह वर्मा: यह तो साहित्य व्यौरा हुग्रा जो ग्रापने पेश किया, जव ग्राप होम्योगैथी की योग्यता के वारे में वतलाइये ?

साक्षी : मैंने दिहार स्टेट वोई ग्राफ हतम्योपैथिक मेडिसिन, पटना से डी० एम० एस० की परीक्षा 1964 थे पास की है ।

डा॰ लक्ष्मोनारायण पांड्या : म्राप किसी कालेज के मारल्त पढ़े हैं, या प्राइवेटली पास किया है ।

साक्षी : मैंने डी० एम० एस० (तीन साल का कोसं) पास किया है, लेकिन जव से सेन्ट्रल गवनंमेंट के आदेश हुये हैं, तव से पिछले तीन चार वर्षों से इस चीज की इन्फोर्स कर रहे हैं और ग्रव विहार में चार साल का डी० एच० एम० एस० का जो कोर्स है वह चल रहा है।

श्री मान सिंह वर्माः ग्राप् यहां किसी संस्था को त्रोर से ग्राये हैं या व्यक्तिगत रूप से ग्राये हैं ?

साक्षी: मुझे संस्थाकी ग्रोर से निमंत्रण मिला थाग्रौर व्यक्गित रूप से भी मिला था ग्रौर दोनों ही दृष्टिकोण से मैं यहां ग्राया हूं। वैसे निमंत्रण श्रापकी ग्रोर से ब्यक्ति-गत रूप से जिला हूं।

श्री मार्नासह वर्माः दया झाप होम्यो-पैथी की प्रैक्टिस कर रहे हैं ?

साझी: मैं यूनिवर्सल होम्योपैथी मैडिकल कालेज का प्राचार्य हूं ग्रौर प्रैक्टिस भी करता हूं।

भी मान सिंह वर्मा : म्रापने इस विल का भ्रघ्ययन किया है ?

साक्षी : जहां तक समय मिल पाया है, योडा अध्ययन किया है । श्री मार्नासह वर्मा: इस विल के बारे में ग्रापके कोई विचार किसी धारा के सम्बन्ध में हों, तो कृपया वतलाइये और उसके बाद सदस्य प्रश्न करेंगे ?

साक्षी : इस बिल की धाराग्रों के सम्बन्ध में कई वातें मन में प्रायी हैं ग्रौर कई सुझाव भी मन में ग्राये हैं ग्रौर उसके सम्बन्ध में मैं ग्रापसे निवेदन करना चाहूंगा कि बिल में कई जगह ऐसी हैं जो मुझे कांट्राडेक्टरी मालूम हुई ग्रौर कई जगह ऐसी हैं जो विवा-दाम्पद समझ में ग्राई ग्रीर उनके सम्बन्ध में मैं निवेदन करना चाहूंगा, ग्रगर ग्रापकी ग्रनुमति होगी तव ।

जैसे सेक्शन बन में जो प्रि. मिनरी चैप्टर है, उसके "ई" में देखा जाय

"Meddical institution means any institution within or without India which grants degrees, diplomas or licences on Homoeopathy.

इसके सम्ब घ में मुझे यह कहना है कि *यह* जो विल में लिखाहुप्राह" विदाउट इंडिंग, तो विदाउट इंडिंशा तो पूरा वर्ड के लिए द्रुषा।

• समापति : इंडिया के वाहर जितने भी इन्स्टीट्यूशन्स हैं ।

साक्षी : महोदया, बाहर के जो देण हैं वहां पर होम्योपैयी की जो पढ़ाई होती है ग्रौर भारत के ग्रन्दर जो होम्योपैर्था की पढ़ाई होनी है, अगर इन दोनों में तारतम्य नहीं हुग्रा, नो फिर सहयोग कैंसे होगा ?

हमारे देश के मन्दर होम्योपैयी शिक्षा पदनि के प्रति जो धारणा है, श्रदा है, क्या वहां के लोगों में भी वहीं भावना है ग्रीर प्रतिष्ठा है ? ग्रगर वैसी भावना ग्रीर प्रतिष्ठा नहीं है, तो फिर वाहर के देशों के साथ इस तरह का सहयोग करके, क्या यह कहा जा सकता है कि यह माऊूल चीज होगी ग्रीर उप-युक्त होगा ?

दूसरी वात चैप्टर सेकेण्ड में मेम्बरों के बारे में जो काइटेरिया रखा गया है, उनमें प्रस्पट काइटेरिया के बारे में सपप्ट उल्लेख नहीं हुमा है। हमारे यहां (बिहार) रजिस्टर्ड प्रैक्टिशनर्स डाक्टर हैं जिनमें बहुतेरे नान-मैट्रिक हैं। इसमें कुछ मैट्रिकुलेट भी हैं। भारन में ग्राप जो इतनी बड़ी संस्था सेन्ट्रल कोंसिल बनाने जा रहे हैं उसमें ग्रच्छे क**ालि-**फाइड लोगों को लीजिये। इस दृष्टि से मेरा मुझाद यह होगा कि इसमें एजू के जनल क्वालिफिकेजन, उस्त ग्रार दूनरे काइटेरिया का उल्लेख होना चाहिये; ग्रन्थथा इसमें श्रच्छे लोग नहीं ग्रा सकेंगे; ग्रीर जो को सिल वनेगी वह अच्छे लोगों की को सिल नहीं वन सकेगी। इसलिये मेरा मुझाब है कि इसमें काइटेरिया का उल्लेख होना चाहिये।

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इमके वाद ग्रागे सेक्शन 3(2) में प्रेमीडेन्ट ग्रांर वाइम प्रेसीडेंट के सुम्वन्छ में निखा "इन सच ए े है मैनर" । (in such a manner) एक जगह ग्रीर भी लिखा है कि ये नामिनेटिड होंगे। फिर वी**थ में लिखा है—**कि बाइर प्रेसीडेंट इने **टेड** होंगे । फिर यहां लिखा है ''दैमसेल्ब्स इन **सच** मैंनर ऐज मे वी प्रेसकाइटड'' (themselves in such manner as may be prescribed) तो यह "सच ए मैनर" ग्रगर प्रेस-काइब्ड नहीं किया जाता है तो कांस्टीट्**यूट** करने के बाद फर्स्ट वोई का पीरियड **अगर** फिक्स नहीं होगा तो इन्टेफिनिट पीरियड के लिये चल मकता है। ऐमी स्थिति में ह विल-कुं डमोकेटिक वे (Democratic way) में नहीं कहा जा सकता है इसलिये मेरा सुझाव है, इसमें "इन सच मैन[ु]" के बाद वह मैन**र** को भी प्रेस्काइव किया जाए या उसके लिए ग्रलग से (एनेक्सचर) (Annexure) या चैप्टर या रूल उस तरह का बनाया जाना चाहिये ।

सभापति : हां, वह तो जब विल पास होकर ऐक्ट हो जाएगा तव रूल वनेंगे । साथ--साथ रूल्स नहीं वनते ।

श्री मान सिंह वर्मा : ये घ्यान दिला रहे: हैं रूल जब बनायें तो इन्हा ख्याल रखें। साक्षी : ग्रध्यक्ष महोदया, मेरा निवेदन है कि ग्रभी जो ऐक्ट बनाने जा रहे हैं, उस ऐंक्ट के मुनाबिक, सेन्ट्रल कौसिल इस्टेक्लिश करने के लिये इसमें ग्रभी जो प्राविजन रखा गया है वह नामिनेटेड का है। तो नामि-नेटेड जो लोग होंगे, उनके लिये पीरियड फिक्म नहीं है।

SHRI JANAKI BALLAV PAT-,NAIK: It has been provided here for two years only.

समापति : दूसरा पौइंट लीजिये ।

साक्षो : मैं निवेदन करना चाहूंगा, मैं बहुत ही जल्दबार्जा में आया हूं और विगत कुछ दिनों से परेशान भी था इसलिये मुझे अगर कल समय दिया जाता, जैसा कि आपका कल के दिन भी प्रोग्राम है, तो मैं तैयार होकर ग्रा सकता हं।

SHRI M. SATYANARAYAN RAO: He may be allowed to give us in writing. He can send his comments later on.

सभापति : हमारा जो टाइम फिन्म है उसमें फिट करना बहुत मुझ्किल है। ग्रापको जो बोलना है लिख कर भी भेज सकते हैं।

साक्षी : ठीक है, मैं लिख कर मैं भेज दूंगा।

श्री एम॰ सः यन रायसा रावः डीटेल में स्टडी करके भीजिये ।

साक्षी : डीटेल में बहुत सारी बातें हैं। सेकेन्ड ग्रेड्पूल के ग्रन्शर डिग्री डिप्लोमा रिकगनाइज करने की बात रखी गई है ग्रौर इसी के ग्राधार पर ग्रागे चल कर होमियोपेथ डाक्टर रजिस्टर होंगे, गवर्नमेंट की ग्रोर से जो भी प्रिविलेजेज :गैरह दिये जायगे उसमें वे भी ग्रधिकारी होंगे ये सारी बातें होंगी। इसमें मेरा निवेदन है, जैसा एच० एम० डी० यौर एच० एम० वी०, ये सारी डिग्रियां इसमें रखी गई हैं, तो एच० एम० वी० विहार के अंदर रिकगनाइज डिग्री नहीं समझी जाती, उसके वारे में लोगों की धारणा है कि यह वाजारू डिग्री है। हो सकता है, दूसरे स्टेट्स में भी ऐसी ही धारणा होगी। अब सेन्ट्रल कॉसिल में इसकी मान्यता रखी गई है। इसलिए कुछ स्टेट्स में उसके वारे में कुछ अच्छी धारणा नहीं होगी।

उसके वाद शेंड्यल के 19 नंबर में देखें-डनहम होमियोपेथिक मेडिकल कालेज_न कलकत्ता का मेम्बर हो, यह तो कोई डिग्री या डिप्लोमा नहीं हग्रा। मेम्बर्गाप को इन्ट्रो-ड्यूस करके उसको क्वालिफिने जन की श्रेणी में रखना, में नहीं समझता यह बहत उपयुक्त होगा, या कोई बहुत दूर दृष्टि की बात होगी । इसलिए मेरा निवेदन है कि ऐसी जो डिग्रियां हैं उनको इसमें से निकाल करके विचार किया जाना चाहिए । फिर म्रागे कुछ इती तरह की वाते हैं, जैसे प्रैंक्टिशनर ग्राफ हीलिग आर्ट। यह कोई डिग्री या डिग्लोमा नहीं हुआ । शेड्यूल के झंतर्गत ग्रेजुएट भी रखे गये हैं और उसी श्रेणी में यह जो एम०डी०सी०एच० पी० ग्रार० एस० एम० सी० एच० पी०, ग्रोर पी० एच० ए० जो कोई डिग्री या डिप्लोमा नहीं है, उन्हें भी रखा गया है। मुझे नहीं मालूम कि यह मैट्रिकूलेट लोगों को दिया गया है या नान मैट्रिक लोगों को ? अगर मान लिया जाय कि नान मैट्रिक को भी यह डिग्री दी गई है तो उन्हें भी द्याप ग्रेजुएट की ही श्रेणी में मान लेंगे । इन प्रकार ध्राप एक ग्रेजएट को वही श्रेगी देते हैं झौर दूसरे नान मैट्रिकुलेट को भी वही श्रेणी देते हैं। यह उपयुक्त नहीं होगा ।

साक्षी : मेरा निवेदन है , इसमें नीचे लिखा हम्रा है, लास्ट में--1910 मीर प्रपटु 1942। मान लिया जाय कि 1910 में यह जिन्हें सटिफिकेट मिला होगा, वे कम से कम 18 वर्ष के जरूर रहे होंगे। तब से ग्राज तक जोड़ कर ग्रगर देखा जाये तो मेरा ख़याल है कि उनकी उम्र 60 वर्ष से ऊपर होगी। हमारे देश में रिटायरमेन्ट एज् 58 रखी गई है। मेरा ख़याल है जो 1910 में यह सटिफिकेट पाये होंगे, ग्रभी वह रिटायरमेन्ट के स्टेज में ग्रा गये होंगे, तो क्या उसके लिए कोई स्पेशल प्राविजन होगा ?

श्री जानको बल्तभ पटनायक : यह तो • र्बावस के वारे में नहीं है ।

साक्षी : यह प्रिवलेज हे । इसमें प्रिवलेज ंदिया गया है, जैसे रजिस्टर्ड डाक्टर को ग्राप कई प्रिवलेजेज देने जा रहे हैं। इसमें कुछ प्राविजन्स दिये हैं। ऐसी स्थिति में वह भी कुछ करोम करेंगे कि हमारा भी राइट है । ग्राप ही ने इसमें लिखा है---क्वालिफाइड होमियोपैय डाक्टर । क्वालिफाइड की परि-भाषा ग्रापने इसमें की है कि जो इन्स्टीट्यूशनली क्वालिफाइड होगा, डिप्लोमा होल्डर होगा या ग्रेजएट होगा, उनकी परिभाषा ग्रापने इसमें की है। लेकिन दूसरी जगह ग्रापकी परिभाषा ऐसी है जो उपयुक्त नहीं है। इन दोनों उपाधियों को जो एक ही है श्रेणी में मिला दिया गया है, मैं समझना हूं वह उपयुक्त नहीं है। ग्राने वाली पीढ़ी जब इस पर सोचेगी तो हम समझने हैं उनकी धारणा ग्रच्छी नहीं वनेगी ।

साक्षो : ग्रध्यक्ष महोश्य, मैं फिर ग्राप से निवदन करना चाहूंगा कि राइटिंग में वहुत सी चीजों के ऊपर ध्यान नहीं जाता है ग्रीर इसलिए मेरा निवेदन यह है कि मुझे कल कुछ समय दिया जाय ताकि मैं इसके सम्वन्ध में ग्रच्छी तरह से समझा सकूं ग्रीर ग्रापके समक्ष सव वार्ते रख सकूं । मैं जल्दी में विल का ग्रच्छी तरह से ग्रध्ययन नहीं कर सका ग्रीर इसीलिए चाहता हूं कि कल मुझे समय दिया जाय ताकि मैं माज इसमें समय लगाकर कल ग्रापके समक्ष सब बातें ग्रच्छी तरह से रख सकूं।

MR. CHAIRMAN: You were invited to come here to give your evidence. You ought to have come prepared. We cannot cut out anybody's time to accommodate you again tomorrow.

साक्षी : ठीक है, यह मेरी म्राप से व्यक्तिगत रिक्वस्ट है । फिर म्राप जसा उचित समझें ।

श्री एम० सत्प्रनारादण राव ः क्या ग्राप इन्हें कभी दिल्ली नहीं बुला सकते हैं ?

सभाषति : यह एक वैंड प्रसिडन्ट होगा ।

MR. CHAIRMAN: We have а packed programme tomorrow. We are meeting the representatives of the Assam Homoeo Research and Public Health Association, Assam, representatives of the Board of Homoeopathic System, of Oirectorate of Health Services, Shillong. Assam, representatives of the State Board of Homoeopathic Medicine, Bihar, Patna Government and Homoeopathic Medical College and Hospital, Kharvela Nagar, Unit III, New Capital, Bhubaneswar. So, it is not possible to accommodate you tomorrow.

श्री मान सिंह वर्मा : ग्राप ने ग्रभी जिड्यूल का जिक किया, तो क्या ग्रापके विहार में जो ' डिप्लोमा दिया जाता है, वह इसमें शामिल है ?

साक्षो : हन।रे िहार में जो डिप्लोमा दिया जाता है वह इसमें शामिल है । इसके ग्रतिरिक्त ग्रौर तरह के डिप्लोमा या डिग्री लेकर लोग प्रैक्टिस करते हैं जिन्हें बाजारू डिग्री कहते हैं तथा प्रोफशनल डिग्री कही जाती है । जैसा मैंने शुरू में कहा कि इस डिग्री को वहां पर बाजारू डिग्री समझा जाता है । सभाषति : स्राप ने ये बातें रिप्लाई में .लिखनी चाहिये थीं।

साक्षी : महं दया, पन्द्रह, वीस लिमिटेड स्वञ्चन किये गये थे श्रीर उन्हीं के ग्रनुसार मैंने जवाब दिया । ग्रव ग्रापने यहां गवाही देने के लिए बुलाया है, इसलिए मैं श्रावश्यक समझता हूं कि सब वात ग्रापके सामने रखू ।

भी मार्नासह वर्मा : आपके यहां कुछ एसे इंस्टीट्यू शन्स हैं जो फर्जी दिग्री देते हैं ?

साझी : पहले बहुत थे ग्रव कम, लेकिन ग्रव भी एक ग्राध हैं। एच० एम० डी० की जो - डिग्री है उसको लेकर लोग वहां पर प्रैक्टिस करते हैं ग्रीर इलाज करते हैं ग्रीर कुछ ऐसे हैं जो सब तरह के जहां तहां काम करते हैं। बहुत से लोग पार्ट टाइम प्रैक्टिस भी करते हैं। हमारे यहां एच० एम० बी० ग्रीर एच० एम० डी० की डिग्री के बारे में धारणा ग्रच्छी नहीं है ग्रीर इस तरह के लोग जो बाजारू डिग्री लेकर प्रैक्टिस करते हैं उनके प्रति स्टेट में ग्रच्छी धारणा नहीं है।

सभापति : ग्रापके यहां स्टेट बोर्ड एक्ट है ग्रौर जो डिग्रियां स्टेट गवर्नमेंट ग्रौर स्टेट बोर्ड द्वारा रिकगनाइज्ड की गई हैं उन्हें ग्राप को रिकगनाइज्ड करना पडेगा ।

साक्षी : मेरा निवेदन आप से यह है कि हमारे बिहार में एच० एम० डीं० और एच० एम० बी० डिग्रीज के सम्बन्ध में हैं जिसे विहार स्टेट बोर्ड आफ होमियोपेथी मेडिसन्स ढारा मान्यता नहीं मिनी टुई है । पहले वहां पर तीन वर्षीय डी० एम० एस० का कोर्स चल रहा था जिसे ग्रव चार साल का डी० एच० एम० एस० कर दिया गया है ।

श्री जियाउर रहमान क्रम्स रीः दूसरे शिड्यूल में विहार में दो डिग्नियों को रिकगनाइज्ड किया गया है । साक्षो : जी हां।

श्री अन्सारी : डी० एम० एस० ग्रापके विहार में नहीं हैं ग्रापने सेक्शन दो में देखा है, जिसमें लिखा है "granted by University Boards or medical institutions in India." जिसको हम रियमनाइल्ड करने जा रहे, फिर ग्राप डी० एम० एस० की वात क्यों करते हैं ?

साक्षी : माननीय सदस्य से मेरा निवेदन है कि वे मेरी बात पर फिर गौर करें। विहार स्टेट वोर्ड आफ होमियोपैयी मैडिसन्स का आर से डिप्लोमा इन मंडिसन्स एन्ड सर्जरी की डिग्री दी जाती है। पहले यह कोसं तीन साल का था, लेकिन केन्द्रीय सरकार की सलाह से चार साल का कोर्स कर दिया है जो इस समय इंफोसंड है । ग्रव विहार स्टेट वोडं आफ होमियोपथी ने ग्रपने स्टेट के सभी रि.ग-नाइज्ड इंस्टीट्यूशन्स में इसको इंफोर्स कर दिया है और ग्रब डी० एच० एम० एस० की डिग्री दी जाने लगी है । इसके ग्रतिरिक्त कोई रिश्गनाइज्ड डिग्री या डिप्लोमा बोर्ड की ग्रौर से वहां नहीं दी जाती है। ग्रव मेरा यह निवेदन है कि वहां पर रि**य्**गनाइज्ड डिग्री या डिग्लॅं.मा, दिया जाता है और दूसरे स्टेटों में जो ग्रन-रिकगनाइज्ड डिग्रियां या डिप्लोमा दिया जाता है, उसकी वजह से लोगों के वीच में झच्छी धारणा नहीं है और लोग उसे ग्रच्छी निगाह से नहीं देखते हैं । ग्रगर दुसरे स्टेट में इस तरह की डिग्री दी जाती है, तो यह अच्छी चीज नहीं है और उसे उपयुक्त नहीं कहा जा सकता है।

MR. CHAIRAMN: There is one confuion. Let me clarify. His point is that in Bihar they have only DMS and they are going to introduce DHMS from 1971. We are making a distinction. Please correct me if I am wrong. In this Bill we are making a distinction between those who are institutionally trained and those who hace no institutional training background. His point is that degrees like Licentiate in Homoeopathic Medicine and Surgery-LHMS, or MHMS, or Practiner of Healing Art and so on and so forth, have been stoped. Anybody can have a new degree from the Institutions. But who have got other diplomas or certificates, are taken under the new Act as institutionally trained people. As he says, they should not be recognised as institutionally trained persons and the privileges should not be offered to them. Am I correct in interpreting your point?

डा॰ प्रसाद (साक्षी) :...जी हां, मेरा अभिप्राय यही है । लेकिन ग्रेड्यूल में कुछ इंस्टीट्यूगन्स के नाम दिए हुए हैं जो मेम्बर-शिप का सर्टिफिकेट देते हैं ग्रौर कुछ एच॰ एम॰ बी॰ ग्रौर एच॰ एम॰ डीं॰ डिग्री देते हैं । ग्रौर ऐसी हो डिग्री प्राइवेट तौर पर विहार में भीं कुछ लोग देते हैं जिसकी मान्यता महीं है । तो सेकेण्ड ग्रेड्यूल में कई इंस्टीट्यू जन्म को लिस्ट दी हुई है । ऐसी ही लिस्ट विहार के ग्रन्दर कुछ लोगों ने दी है । ऐसे एच॰ एम॰ बी॰ या इस प्रकार के डिप्लोमा या डिग्रीधारी, वह तो वंचित हो जाते हैं ।

समार्थाते : नहीं, वंचित नहीं होते ।

साक्षी : अघ्यक्ष महोदया, जब लिस्ट में कोई डिग्री डिप्लोमा का समावेग किया गया ग्रीर उसको मान्यता दी जा रही है तो उसके ग्रितिरिक्त जो रह जाते हैं उनको तो मान्यता नहीं होगी ।

श्री मा सिंह वर्मा: ग्रभी तो भापने कहा कि ये जो डिप्लोमाज हैं ये प्रच्छी तरह से नहीं देखे जाते । ग्रभी श्राप कहने लगे कि विहार वाले इससे वंचित रह जाएंगे। तो ग्रगर बिहार वालों को रिक्गनिशन मिल जाए तो क्या यह श्रच्छी नजर से देखा जाने लगेगा ?

साक्षी: नहीं, मेरा दुष्टिकोण यह है, . इस सम्बन्ध में मेरा सुझाव था भौर जैसा कि मैंने पहले निवेदन किया, बिहार के ग्रन्दर तो . इस तरह की चीज को ग्रच्छी निगाह से नहीं देखा जा रहा है। तो फिर यही डिग्री लेकर के जो सेण्ट्रल गवनंमेंट की कौंसिल बनेगी, उसमें रिकगनाइज हो आएगा तो यह डिग्री लेकर जब बिहार के घ्रन्दर वे पहुंचेंगे तो उनके प्रति बही धारणा होगी । इमलिए L.R.C.H.P., L.H.E.H., F.C.E.H., H.I., M.S., H.M.B., H.M.S., L.H.M.S., M.D.) C.H., P.R.S.M., P.H.A., L.R.H.S., H.L.M.S.,

को सेकेण्ड भिडूल से हटा दिया जाय ।

ड . जुगल किझोंर : में एकपप्लेन करूंगा। एव० एम० बी० डिग्री जो विहार की है, वह दस-पन्द्रह रुपए में खरीदी जाती है। एस० एम० बी० कोई रेगुलर स्टडी कॉर्स की डिग्री नहीं थी लेकिन बंगाल में कुछ कालेजेज ऐसे थे जो एम० एम० डी० दिया करते थे यप टु सर्टेन ईयर—1941-42 तक। ये जो डिग्री डिप्लोमा दिए गए हैं ये बंगाल स्टेट की मान्यता से दिए गए हैं ग्रीर हमने जो इन्क्लूड किए बह विहार के नहीं किए। तो इसमें मुझाब कुछ न कुछ हो सकता है-कैसे किया जाए ? इनके कहने के लिहाज से ठीक भी है कि जो एम० एम० बी० बिहार की है उसका भी नुमायन्दा कौंसिल में जाएगा, जिसने डि लोमा खरीदा है।

समापतिः : नहीं । उनके ग्राने का कोई स्कोप नहीं है ।

डा॰ खुगल किझोर : नहीं, वे लिखते हैं...

सभापति : वह लिखते होंगे । लेकिन विहार गवनंमेंट ने ग्रोर विहार स्टेट वोडं जिसने मान्यता दिया, उनके रजिस्ट्रेगन का कोई स्कोप नहीं है ग्रीर उनको ग्राने की कोई परमिणन नहीं मिलेगी ।

डा० जुगल किशोर : इस शेड्यूल में नहीं ब्राएंगे। SHRI MANSINGH VARMA: They will not be included for registration in Bihar.

SHRI JANAKI BALLAV PAT-NAIK: It is for the Bihar Government to press the cases of such persons.

डा० जुगत किझोर: ये कहते हैं उनका उल्लेखन किया जाए क्योंकि ए० एम० डी० से समझा जाएगा कि क्यालिकाइड डाक्टर हैं।

साक्षीः यह सब मैं समझ रहा हूं। मेरा सुझाव या कि रेसिबोकल रिकगनिशन देते ई तो यूत्किर्धामर्टः होनी चाहिए। लेकिन वह व्यूतिकामिटी नहीं ब्राजी है। इसलिए शंका है।

भी मानसिंह वर्मा : ग्रागे हो गई है -यूनिकामिटी ।

श्री समागतिः वहजब हमारा सेण्ट्रल बोर्डवनेगा तव देखेंगे ।

साक्षी : अभी तो एक प्रकार का इण्डियन मेडिकल कौसिल तो बना दिया है ने किन हीमियोपेथी के क्षेत्र में ज्यादा काम नहीं हुग्रा । होना यह चाहिए कि सेप्ट्रल कौसिल एक यूनिफार्म स्टैण्डर्ड से रेग्लेटेड होना च हिए ।

श्री लक्ष्मी नारायण पांडरें: मैं जानना 'चाहता हूं, यदि कोई होमियोपेथिक प्रैक्टिशनर /एलोपेर्या में भी साथ-साथ प्रैक्टिस करे या /एलोपेर्या में भी साथ-साथ प्रैक्टिस करे या /एलोपेर्या को दवाई भी यूज करे तो क्या ग्राप 'सस पर प्रतिवन्ध लगाने के लिए कोई पीतल क्लाज सजेस्ट करते हैं ?

साक्षी : अश्यक्ष महोदया, माननीय सदस्य ने जो प्रश्न उठाया है, उसके सम्बन्ध में जो डी० एम० एस० कोर्स का सिलेबस चल रहा था विहार के अन्दर भोर दूसरी स्टट्स के प्रन्दर भी उसमें दो-सीन बाते ऐसी हैं जिनकी ओर ग्रापका ध्यान ग्राइब्ट करूंगा। जैसे, डिप्लोमा इन होमियोपेयिक मेडिसिन एण्ड स्वर्जरी---डी० एच० एम० एस० । यह जो

सजरी ग्रांर मेडिसिन, दो तरह की डिग्री सर्जरी ₹. इसमें दी जाती का . जो हे उसके ग्रन्तर्गत काम एनिस्थिसिया का प्रयोग होता है । होमियोप थी में एनिस्थिसिया नाम की कोई चीज नहीं है। ऐसी स्थिति में सर्जरी करने के लिए एनिस्थिसिया का सहारा लेना होता है। मझे जहां तक जानकारी है, प्रारम्भ में लोगों **ने यह वि**चार किया **कि थोड़ा बहु**त सहारा लिया जाए सर्जरी के काम में । इसलिये कुछ सर्जरी के मुताल्लिक एसी व्यवस्था रखी क्रींर छोटे-मोटे स्तर पर कुछ एन पथिक ड्रन्ज, मेडिसिन नहीं, क्योंकि [होमियोपेथी में ड्रग म्रौर मेडिसिन की म्रलग मलग परिभाषाएं हैं. उसके बारे में एसा था कि कलकत्ता होमियोपेथिक मेडिकल कालेज के जो डी० एम० एस० बिहार के ग्रन्दर गए हैं उनको भी यह जानकारी थी ग्रौर कहते हैं, वे कुछ एलोपेथिक डूग इस्तेमाल करते थे। होमियोपेथी को जहां तक मैं समझ पाया हूं इसके ग्रन्तगंत जो चिकित्सा की पद्धति है उसमें सर्जरी का बहुत बड़ा स्कोप नहीं । जब सर्जरी के लिए स्कोप नहीं है, तो एलो-पंथिक मेडिसिन इस्तेमाल नहीं किया जाना चाहिए । लेकिन ग्राधुनिक परिवेश में, बदलती हुई परिस्थिति में, म्रापने जो सिलेबस दिए उस सिलेबस के अन्दर जो सर्जरी की व्यवस्था की है, तो संजिकल ग्रापरेशन करने के लिए कुछ ड्रग्स की मावश्यकता हम जरूर महसूस करते हैं, फिर भी होमियोपथी के भन्तर्गत जितनी दवाइयां हैं उन्हीं दवाइयों के सहयोग से, उन्हों के ढारा, हम सर्जिकल टीटमेंट चलाने की कोशिश करते हैं। लेकिन बहां पर हमारी लाचारी हो जाती है जहां पर कोई एसा ग्रापरेशन करना है जिसमें एनिस्थिसिया देने की जरूरत पड़ती है वहां पर कुछ थोड़ा सा ड्रग्स की मावश्यकता महसूस होती है। वैसे किसी भी स्थान पर वैसे ड्रग्स की ग्रावत्र्यकता नहीं है । होमियोपथिक मपने माप में सक्षम है। जहां तक मेडिसिनल

ट्रीटमेंट का सवाल है, वहां एलोपेथिक ड्रम्स की कोई ग्रावश्यकता हमें प्रतीत नहीं होती । होमियोपथी की डाइजस्टि ह कंपेसिटी इतनी बड़ी है कि ऐलोपेथी, ग्रायुवेदिक या जितनी भी चिकित्सा पद्धतियां इस समय प्रचलित हैं उन सब पद्धतियों की दवाइयों को होमियो-पेथिक साइन्स में लाया जा सकता है । उनका मदर टिक्चर ग्रासानी से बना सकते हैं । तो ट्रू सेन्स में जहां होमियोर्गथिक ट्रीटमेंट की वात ग्रानी है वहां मेडिसिनल ट्रीटमेंट के स्थान पर एलोपेथिक ड्रगस की ग्रावश्यकता नहों होती है लेकिन जहां पर सजिकल ग्रापरेशन के लिए ग्राप ग्रादेश देते हैं वहां पर ग्रावश्यक है कि कुछ ड्रग्ज को सटेंन कंडि .न में एलाऊ कर देना चाहिए ।

श्री सक्ष्मी नमशयण पांडेय: मैडम चेयर-मैन, मेरा क्वेश्चन स्पेसिफिक था। उसका पेनेन्टो क्लाज होना चाहिए या नहीं होना चाहिए। जो होमियोपैथ रजिस्टर्ड प्रैक्टिशनर होने के बाद भी करते हैं।

साक्षी : माननीय सदस्य का जो प्रश्न है—होमियोपेथी में एलोपेथी प्रक्टि करना, इसको बैन किया जाना चाहिए, उनको प्रासोक्यूट करना चाहिए—मेरा भी सुझाव उसी ग्रोर है । चूकि ग्राप होमियोपेथी के ग्रन्दर डिग्री देते हैं, मेडिसिन एण्ड सर्जरी बोथ, तो मैंने निवेदन किया कि सर्जरी का कार्य करने के लिए, जो मेजर सर्जरी है, उसमें चिकित्सा का जो पैटर्न दया हुग्रा है, तो एलोपैथिक डूज का सहारा लेने की ग्रावण्यकता नहीं तो होमियोपैथी में कोई ऐसी दवा ईजाद की जाए जिससे वह काम में नाथा जा सके ।

श्री लक्ष्मी नारायण पांडेय : डाक्टर प्रसाद, ग्रापने जितने सजे शन्स दिए हैं, श्रीर ग्रायंदा भी ग्रापसे लिखित में प्रस्ताव लेने के लिए हमारी कमेटी तैयार है, उसके लिए मैं कमेटी की ग्रीर से ग्रापके प्रति धन्यवाद प्रकट करता हूं। साक्षी : मैं भी कृतज्ञतापूर्वक ग्रापका धन्यवाद करता हूं ग्रीर भविष्य में जव कभी मेरे सहयोग की ग्रावश्यकता होगी मैं उसके लिए हमेजा तैयार रहंगा ।

[The witnesses then withdrew.]

[This witness (Dr. S. Seal) was called in.]

WITNESS: Honourable Chairman and respected Members, my hearty thanks to you all for giving me this opportunity to speak before you on the proposed Bill. I am to submit that the aims and object of the Bill is for the benefit of the people. But does it fulfil the purpose? No, it will rather suppress people who are working fordevelopment of homoeopathy in a. scientific way. It is noted in this Bill that homoeopathy means the system of medicine founded by Dr. Samuel Hahnemann. Please note that Hahnemann has not furnished any definition of Homoeopathy. This bill is also peculiarly silent about the definition, and that the Indian Homoeopathic Pharmacopia has not been published. Definition can be found in the Homoeo Pharmacopia of the United States of America, Medical science is progressive and new remedies and new methods are being invented. This should be taken within the scope of the system of medicine. The proposed definition i.e., the system of medicine founded by Hahnemann does not fulfil the requirements as it does not include the progress and development made by modern science. In the absence of definition it is not possible to assess the good to be derived from the proposed enactment. So, my appeal to you all that avenue should be kept open for research in homoeopathy on scientific basis.

SHRI J. B. PATNAIK: Would you give your concrete suggestion. What is your proposed definition ?

WITNESS: Concrete suggestion is that there should be explicit definition. My proposed definition is that homoeopathic medicine includes any drug. which is recorded in homoeo-

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pathic proving or therapeutic efficacy which has been established through long clinical experience as recorded in authoritative homoeopathic literature in India and abroad and which is prepated according to required technique of homoeopathic pharmacopia and combines the ingredients of such homoeopathic medicine.

Now I refer to my answer to questionnaire No. 4. My answer is basic qualification should be the possession of a recognised medical qualification or enrolment on a State Register, provided that a person practising homoeopathy for not less than 5 years on the commencement of the Act, but still unregistered in a State Register should have the right to have his name registered in the State register within 3 years from the date of passing of the Act or within such further time as may be specified by the Central Council.

MR. CHAIRMAN: It appears that it is a printed thing. If so you give us a copy.

(A copy of 'Homoeopathic Research Bulletin' 1972, was handed over to the Chairman and Members of the Committee)

MR. CHAIRMAN: With regard to amendment your suggestions are there. But have you got any other point?

WITNESS: I have some points.

MR. CHAIRMAN: Dr. Seal, when you have got printed copies you need not read it again. Please come to your next point.

WITNESS: Madam Chairman there is dearth of physicians in our country. Statistics show that there are three and a half lakhs of homoeopaths. Out of this there are five thousand who have registerable qualifications. This is according to 1949 Enquiry Committee's Report. After that so many years have passed and many of the old practitioners have died. We have

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a very small number of colleges in West Bengal and other States. The number of passed doctors are only few to be added to the list. So we are losing the number of registered practitioners. So as proposed in the Bill 4/5 years' practitioners shall be given registration. That should be done for the benefit of the people of this vast country specially for those who live in remote villages. It will also strengthen the cause of homoeopathy as a whole.

`ÿ0u MR. CHAIRMAN; Dr. Seal, have written a book on Research in Homoeopathy in India. Whatever suggestions , you have got that you have printed and supplied to us. Now, let our Members ask you questions and you reply to those questions. Members, Dr. Seal seems to be a very enthusiastic homoeopathic practitioner who has written pamphlets and books. If you want to put any question about homoeopathy in West Bengal or if. you want to clarify any of his suggestions then you are at liberty to do so.

DR. K. NAGAPPA ALVA: Dr. Seal, we would like to know your opinion regarding the present position of research in homoeopathy and also your suggestions as to how we can develop this research in our country regarding homoeopathy.

WITNESS: So far my line of re search in homoeopathy is concerned I have established the value of combination of drugs for treatment according to symptoms and pathological findings and clinical investigations. It can be done by collection of symptoms of say 200 patients of a particular disease and by treating them as one patient. I have selected medicines as far as practicable to the nearest similarity for selection of medicines and the percentage of cure was taken. That will be more scientific and persons practising in the villages will get help out of this combination of remedies. Say in the case of cholera when _ the patient collapses a number of drugs are given by the village practitioners but with no result. In that case I prescribe a combination of homoeopathic drug which is to be administered by injection and seven out of ten patients will regain their pulse. We have reports from several thousand doctors who are using this combination medicine to their satisfaction. Hanhemann has done everything for the cause of homoeopathy but he had not the advantage of any research work on modern lines in his time. bacteriology In his time was known. He could not do not many things. From one of the literatures written by him it is known that in skin disease where there are severe itching he used to think that there are some worms in the skin and thought sulphur Vapour would kill the worms. In Section 94 of his book Organon he advocated to find out the cause of the disease in relation to occupation, usual mode of living, diet, domestic 'situation etc., the removal of which will cure the patient finally. In his time he described Malaria as marshy land fever. For its treatment he advised China (cinchona bark) to be given in repeated doses. He got the farsightedness and because of that he found that when a patient of malaria was brought to a dry and mountainous (i.e. free from mosquito) place the fever was abated. He suggested this when malaria parasite and its transmission were not known.

DR. K. NAGAPPA ALVA: We do not want these detailed suggestions but we want to know as to how we can proceed and how we can develop this system. That is all.

DR. S. SEAL: In Ahmedabad Conference, our Hon'ble Minister, Dr. Sushila Nayar invited applications from the Homoeopathic physicians to conduct the cases in the Allopathic Hospitals, such as serious diseases, cancer, asthma pepticulcer etc., I applied without any response.

MR. CHAIRMAN: Dr. Seal, you have circulated a bulletin and that bulletin is for the public and not for this August House. So, will you please write down your suggestions by to-morrow and send us. If it is not possible by to-morrow, you may send it any time to the Rajya Sabha Secretariat in Delhi because it will take another one or two months to make it finalised.

DR. S. SEAL: This is a very nice idea. I will do it.

SHRI N. P. CHAUDHARI: Dr. Seal, on behalf of the honourable Members and the Chairman I thank you very much for giving your valued suggestions before the Committee. We are confident that the views expressed by you will go a long way to help us in formulating this Bill. I once again thank you very much.

DR. SEAL: I also thank you from the very core of my heart.

[The witness then withdrew]

[The witness Dr. B. N. Chakrabarty, Medical Adviser on Homoeopathy Government of West Bengal was called in.]

MR. CHAIRMAN: Dr. Chakrabarty, you are the Adviser on Homoeopathy, Government of West Begal-please let our members know about how you are developing Homoeopathy in this State, then you will put your suggestions.

SHRI N. P. CHAUDHARI: Dr. Chakrabarty, I would like to know from you whether Homoeopathy is a complete system of practice in itself?

DR. B. N. CHAKRABARTY: So far as the natural diseases are concerned, I think Homoeopathy is a complete system of medicine,

SHRI N. P. CHAUDHARI: As regards Surgery is there any method in Homoeopathy?

DR. B. N. CHAKRABARTY: Surgery is everybody's business. It does not apply to any pathy. here is Salya Chikitsa' in 'Ayurvedh', in Allopathy, it is called Surgery and in 'Unani' also there is some sort of 'Salya Chikitsa'. Dr. Hanhemann also did not discard Surgery, but the idea of Surgery differs.

SHRI N. P. CHAUDHARI: Do you think that Patholojical test or any othe: test are essential in Homoeopathy system?

DR. B. N. CHAKRABARTY: Pathology and other investiations do not belong to any pathy. In Homoeopathy, we choose the uncommon and peculiar And to choose and symptoms. evaluate peculiar symptoms we have got to know what are the common symptoms and what are the implications on these common symptoms. To understand the disease and its common symptoms, knowledge of Anatomy, Physiology and Pathology is essential. Unless and until we know the disease, we cannot pick up any uncommon peculiar symptom of the patient.

MR. CHAIRMAN: Dr. Chakrabarty, let us have your suggestions now.

DR. B. N. CHAKRABARTY: In my suggestion I have placed, in Chapter II Clause 3(b) where it is said that the Faculty in Universities will nominate members, so long such faculty of Homoeopathy medicine in the Universities are not formed, 7 members are to be nominated by the Government of India from the existing teaching institutions,

As regards Clause 8(1), my suggestion is that the Central Council shall meet at least once in three months at such time and place as may be fixed by the Central Council.

- As regards Clause 10(1), my suggestion is that the Executive Committee constituted under Section 9 shall meet at least once in each month at such time and place as may be appointed by the Central Council.
 - As regards Clause 14(1) in Chapter III, my suggestion is that the

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Homoeopathy physicians who obtained Homoeopathic qualifications from abroad, which are not included in the second schedule should be included in the Central Register as schedule 'C'. Aother schedule must be added as for example M. D. of Kansas University, M.D. of Philladelphia University, F. F.Hom. and M. F. Hom. London and D.F.Hom., London must be taken into consideration. Otherwise, person like Dr. B. K. Basu an M.D. of Kansas University cannot get his name registered in any of the Schedule. So, there must be another schedule as Schedule 'C'. Then clause 21(2). The Central register must include names of all the homoeopathic physicians belonging to Part A of the Schedule to the West Bengal Homoeopathic Act, 1963 including persons whose names have been raised from Part B to Part A, as for instance, the name of R. Ghosal Calcutta Homoeopathic Principal, Medical College. He is an M.B.B.S. and his name is registered in Part B of the schedule and so he cannot be registered in the Central register. The State Council have raised his name from Part^B to Part A by the recommendation of the Homoeopathic Council. So these persons whose names have been raised from Part B to Part A should have the chance to be registered in the Central Register.

As regards additions to be made to the second schedule, I have a ready said that Dunham College's H.M.B. up to 1942, Regular Homoeopathic Medical College H.M.B. up to 1922 these are to be included in the schedule.

Last of all I want to place before you for your information that in emergencies homosopathic medicines work very nicely. Recently the Government of West Bengal opened a camp in Salt Lake during the last cholera epidemic when the influx of refugees was there and homosopathic doctors worked there and their percentage of cure was more than 92 per cent in acute cholera cases where there was complete dehydration and the cures were effected even without a drop of saline. This is the record which has been signed by the Director of Health Services, I am presenting this before you for your perusal.

SHRI CHIRANJIB JHA: And what is the percentage of success in allopathy?

DR. CHAKRABARTY: I cannot say, Sir.

MR. CHAIRMAN: That is good. We shall carry this information to the people so that they can have confidence.

Now, any questions from any member?

SHRI MAN SINGH VARMA: Have you ever thought of starting a State Homosopathic Medical College?

DR. CHAKRABARTY: We are intending to start one. Already we had a talk and most probably in the 5th five year plan we shall start a State Homoeopathic Medical College.

SHRI N. SREEKANTAN NAIR: As Advisor to the Government of West Bengal what steps do you take to ensure some kind of uniformity in the curriculum of these colleges and in the standard of education of respecive colleges ?

DR. CHAKRABARTY: In West Bengal there is a uniform standard in all the colleges because teaching is being conducted by a Council of Homoeopathic Medicine, West Bengal which is an elected body and the Council holds examination and standard teaching is being given to almost all the colleges and that is four years' diploma course in medicine and surgery. The Central Course of four years D.H.M.S. which has been prepared is more or less a very similar course like this D.M.S. course with only a little difference. Actually this course is being followed since 1944 and the course that the Government of India is forming, namely, the D.H.M.S. is almost a copybook of that D.M.S. and I think that is being introduced in every State of India, which we have in existence in West Bengal.

SHRI MAN SINGH VARMA: Is there a separate Directorate for Homoeopathy in West Bengal?

DR. CHAKRABARTY: No, but Government is thinking of making a separate directorate or cell for homoeopathy.

SHRI N. SREEKANTAN NAIR: As the major Advisor to the Government of West Bengal do you want the homoeopath graduates or doctors to have the same status and standard as allopaths and other doctors and ff so, would you prescribe a pre-medical course and higher standards for education of these doctors so that in future if they want to specialise in any branch of medicine, they may go in for higher studies in post-graduate course?

DR. CHAKRABARTY: That is a matter for the Syllabus Committee. But as far as my personal opinion is concerned, the standard must be raised and Government must come up to raise the standard up to the allopathic standard, i.e., M.B.B.S. and when that standard is adopted, then, of course, a pre-medical course is essential to give the fundamental knowledge of the basic sciences.

SHRI RANA BAHADUR SINGH: I would like to know what are you doing in the State to remove quackery from charitable homoeopathic dispensaries?

DR. CHAKRABARTY: In the State we have divided the practitioners into two categories—one, those who are institutionally trained, and two, non-institutionally trained, and we have invited the non-institutionally trained physicians to register their names. Ten thousand of them have been registered and they were registered on the basis of examinations. Tests are taken and if they pass those tests, only then they are registered. We have made a provision in the Act that those who are not having registration will not be allowed to practise.

SHRI N. SREEKANTAN NAIR: Yesterday some eminent people told us that on the basis of certificates and other recommendations some people were registered who are not fit to be registered and they have become the homoeopathic practitinoners in West Bengal. Do you think that they are fit to practise?

DR. CHAKRABARTY: There is no yardstick for measuring their knowledge but we can say that they had to give a serious test and if they anyhow can manage to go through that test, we have nothing to say.

SHRI N. SREEKANTAN NAIR: There was no question of test, there was only some certificate produced from some local and eminent people?

DR. CHAKRABARTY: Certificates given by eminent persons such as M.L.As. or M.P.s or registered practitioners belonging to A category won't be sufficient. These are needed only to enlist their names for examinations and ultimately they will have to undergo that examination.

MR. CHAIRMAN: We can confer honorary degrees on some of our members and the right to give certificates.

SHRI BHAODSAHAIB DHAMAN-KAR: There are certain allopathic post-graduates who practise homoeopathy and they have formed an association of their own. Do you feel that they should be given recognition and should have representation on the Central Council and should there be a special category for them?

DR. CHAKRABARTY: To be frank, if an Allopath takes up Homeocopathy

we should invite him to learn the subject and we must make a separate category for such practitioners so that they can be given charge of treating patients Homoecpathically. They should undergo a test in order to prove that they have acquired some knowledge of Homoeopathy. I do not think that by penalising somebody we can achieve any success. There is a panel clause in allopathic system of medicine, but so far as my information goes, there are 25 lakhs of Allopathic quacks practising in India. We could not stop their practice by penalising them. We can only stop it by raising the moral standard.

SHRI VARMA: Dr. Chakrabarty, you just now stated that West Bengal Government is thinking of starting a college of their own. Why don't you take up that oldest institution of which you had the privillege of being the President?

DR. CHAKRABARTY: That could be done but there are so many things stand in the way-i.e. whether they would like it to be handed over to Government and all that. Secondly, this college has developed to a certain extent Government will have to see what scope is there for its further development when it becomes a Government institution. There are many points which the Government will have to consider. If we have a college having a bigger area and scope we can develop different departments to prove its efficiency in every branch of medicine. I think these things are possible in a State College.

DR. K. NAGAPPA ALVA: There is a different feeling almost all over India that in Homoeopathy— and this applies to other systems also, i.e. Ayurved, Unani, etc.—giving of certificates becomes a licence for the people and quite a large number of people are only by using the moder system. As you said, there are allopathic quacks, these people also become quacks and they just make their living but don't have any real thinking over it. What is your opinion about this? Is it not necessary that such things should be stopped?

DR. CHAKRABARTY: I fully agree that there are many Homoeopaths and others who are practising the modern system of medicine. The reason is that their knowledge have not developed in their own system. So, they have to take recourse to other system to earn their livelihood. If they can be properly trained in their own system introducing refresher courses to show them cases which can be cured through this system and thus develop conviction in their mind—a day will come when they will never use Allopathaic system.

DR. ALVA: They are going on in that way. How can you give them this refresher course?

DR. CHAKRABARTY: Once we give them registration they are entangled. They cannot go out.

SHRI N. SREEKANTAN NAIR: Is it not a fact that prejudice of the common people rather than that of the practitioners themselves—a trained man in Ayurved goes out hanging a stetho just to show that he is a doctor and gets a few .rupees more as fee—don't you think that such prejudice among the masses is also responsible for such malpractices or pseudo practices?

DR. CHAKRABARTY: These are very ticklish questions. Actually we have got to make a show. If a doctor has not got a better chamber he will not fetch higher fees.

SHRI BHAOOSAHAIB DHAMAN-KAR: If you recommend a two year licentiate course in Homoeopathy, do you think you will get more doctors?

years' course is not sufficient to develop the required knowledge. To produce a licentiate it is essential to have a course of 3½ to 4 years. In the olden days there was L.M.F. for 3 years and 5½ years for degree course. Those who want to go from licentiate course to degree course, they may have another condensed course for 2½ years. I think that will be the best way of producing doctors.

MR. CHAIRMAN: Thank you, Dr. Chakrabarty. I also thank the Government of West Bengal for all the arrangements they have made for us-

[The witness then withdrew]

The WITNESS: (Dr. Pal. BMBS, Prof. Calcutta Homoeo Medical College, Dr. S. K. Naik, M.Sc. (Psychology) and DMS, Dr. D. Banerjee, DMS, Govt. nominee in the Council, Dr. Nabakumar Chakravorty, B.Sc. ex-Principal, D. N. De Homeo Medical College, Calcutta; Nominated Member on the Council of Homoeopathic Medicine, West Bengal, Dr. B. N. Mukherjee, Graduate of the Calcutta University, Diploma in Medicinal Surgery. Individually represented and Shri M. K. Ganguly, Registrar of the Homoeopathic Council-representatives of West Bengal Council for Homoeopathic Medicine) were called in.

MR. CHAIRMAN: I would like to tell you that proceedings of this Committee are strictly confidential and not a word of it is to be spoken or published outside this hall.

Now you can make your observations on any of the points you like.

DR K. PAL: In the Central Bill there is no provision for the registered doctors. If the Bill is passed as it is there will be no provision for B grade doctors and they will not be allowed to practise. I suggest that they should be included as in the case of West Bengal Act. Secondly, West Bengal Act also includes biochemic medicines introduced by Dr. Susley but in the Central Bill there is no mention of that. This medicine should also be included.

DR. B. N. MUKHERJEE: I want to tell something . MR. CHAIRMAN: In what capacity ou are representing?

DR. B. N. MUKHERJEE: As an individual member.

MR. CHAIRMAN: You have already stated your views as an individual member. I am sorry I cannot allow you again.

DR. NAIK: I am speaking on behalf of the Council. I suggest that there should be sufficient representation in the Council from educational sector and for that purpose principals of affiliated colleges should be nominated by the Union Govt. As regards meeting, Central Council sheet meet at least thrice a year and the Executive Committee six times in a year.

DR. BANERJEE: I agree with Dr. Naik that the principals of Institutions must be members of the Central Council. Now, with regard to a point that has arisen before this Committee i.e. whether an homoeopath can tackle emergency cases or when an epidemic breaks out, I want to say that this question is very vague.

MR. CHAIRMAN: No member in our Committee ever suggested that. Some homoeopaths raised this question in their memoranda and in course of their replies to questions put to them. Whatever deliberations took place here are strictly confidential according to rules of both the Houses of Parliament We are only recording your evidence. We do not form any opinion. It will depend upon your evidence. After recording your evidence we will sit together and discuss those points and form our opinion and then only we will make recommendations. There is no scope for any apprehension that this is our thinking. Nobody from our side-from the members of this Committeeever raised this question of dealing with emergency cases. That is in your memorandum and in the records we received from different sections of homoeopaths,

DR. BANERJEE: On the 5th June, 1971 when the refugees from Bangladesh came to Calcutta there were epidemics like cholera and small pox. The then Heatth Minister, Dr. Jainal Abedin was very much perturbed for coping with this epidemic. At that time we the members of the Council sat together and rendered our help.

SHRI BHAOOSAHIB DHAMANKAR: How this is related to the evidence before this Committee?

MR. CHAIRMAN: The point was raised whether homoeopathy can cope with emergency cases and epidemics They are stating that they were successful in coping with epidemic diseases when the Bangladesh Refugees came. Now have you got any other points?

DR. CHAKRAVARTI: In the Schedule of the Bill there are registered qualifications. In the case of Dunham Homoeopathic College it is written as M.D.C.H. But it is definite that there are other two qualifications H.L.M.S., and HM.B. These two qualifications should be added in my opinion. Apart from this we can more or less approve of this Bill. But the Council meeting should be held at least twice a year instead of once a year and the Executive Meeting should be held quarterly. Otherwise we can accept the Bill. There is another suggestion of mine. There are persons who practise homoeopathy although they have allopathic qualifications. Now, these persons sometimes prescribe allopathic medicines. That is not good, I think. These allopaths practise homoeopathy without having and training in homoeopathy. So there must be a ban in this respect.

MR. CHAIRMAN: You want a ban?

DR. CHAKRABARTI: Yes.

SHRI BHAOOSAHIB DHAMAN-KAR: You want to ban the allopaths. But we have allowed those allopaths who have got experience in homocopathy for the last 15/20/30 years. Should they not be allowed. How would you substantiate that?

DR. CHAKRABARTI: Unless they know homoeopathy fully how they can practise. There are many poisonous medicines in homoeopathy and without knowing the principles of homoeopathy how these allopaths be allowed to practise homoeopathy? Sometimes public feels that as he is an allopath he must be a good prescriber. But I do not think so. An allopath might be a M.S. or M.D. but he should have proper training in homoeopathy if he wants to practise homoeopathy. He must know the principles of both. That is my opinion. . .

SHRI MUHAMMED KHUDA BUKSH: There are some eminent homeopathic practitioner who were originally allopathic doctors.

DR. CHAKRABARTI: I know, but it should not be allowed.

SHRI MUHAMMED KHUDA BUKSH: My submission is that they have received institutional training in one particular system. Upto date no institutional education is being provided for and if some institutional education is provided for it is not upto the standard. Do you suggest that those who have systematic knowledge of one particular system or acquired the proficiency through self knowledge -in allopathy also mere obtaining of degree does not confer on a person the right to practise but when experience is gathered his name and fame spreads and he becomes a good physicianshould be excluded entirely from the purview of the Bill. I think that would not meet the ends of justice. That is my view. Will you kindly elucidate?

DR. CHAKRABARTI: I do not think so.

MR. CHAIRMAN: May I remind the members that they are not entitled to give their views? DR. CHAKRABARTI: So far as the Homoeopathic Council in West Bengal is concerred the allopathic doctors also shall have to take some training in affiliated homoeopathic colleges and they will have to appear in the final examination.

SHRI K. C. PANDA: Do you suggest that those allopaths who are practising for more than 4/5 years they will go through the four years' Diploma Course or any condensed course?

DR. CHAKRABARTI: Two years' condensed course.

MR. CHAIRMAN: It is in the West Bengal Act also.

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DR. NAYAK: Theer is provision that M.B.B.S. and kabiraji degree holders will read in homoeopathy subjects of medicine, clinical, organon, materia medica and pharmacy. They should read in Homoeopathic colleges and get the degree D.M.S.

DR. LAXMINARAYAN PANDEYA: You suggested representation from the Principals of Colleges. There are so many Colleges in India, so what should be the principle of representation throughout India? Do you like representation from West Bengal only or for some Colleges?

DR. D. B. BANERJEE: In this regard, the Principal of Dr. B. N. Dey College has already clearly mentioned that at least members from different Homoeopathic Colleges in West Bengal should represent.

SHRI MALLIKARJUN: Whenever any Allopath practises in Homoeopathy what measure do you suggest to check this? Should he be penalised or not?

DR. D. B. BANERJEE: If an Allopath practicing Homoeopathy, he must have training from an affiliated College for 2 years, but in absence of that he should penalised.

DR. K. NAGAPPA ALVA: We like to know from you about the Homoeopathic system of medicines. It is somewhat silent on some of the subjects i.e. preventive medicines and immunity measures. Lately we understand, most of the specific medicines, prepared and sold in the market, are being rused by some of the Doctors -- on what basis they have discovered the specifications? As regards bacterial and virus infections, in what way you will diagnose it and what will be the treatment. Do you not agree that there should be a unified syllabus all over India?

DR. D. B. BANERJEE: With regard to epidemic and preventive medicine, there are five factors-(1) disinfection, (2) quarantine, (3) isolation, (4) prevention and (5) immunisation. We the Homoeopaths do not discard the first four factors. With regard to the question of immunity, 3/4 has been fulfilled by us and only a controversy remains with regard to 1/4th. The honourable members has just now said about the specific medicine, practically we have no specific medicine. In our opinion, there is no specific epidemic disease nor any virus or any other bacterial diseases.

Actually, specification depends on each particular epidemic, *i.e.* under the circumstances of the local thing and general behaviour of the people. For example, in Calcutta. Cholera has developed in Shyambazar, Bhawanipur area or in central Calcutta, in all there places, the preventive medicines will be different.

In my opinion genus epidemic has got some contribution towards the preventive medicine. In Philipine and in America a measure of innoculation was discovered against the Small Pox and they declared before the world that they have completely eradicated small pox. Next year, Philipine suffered a great havoc due to small pox.

Now with regard to specification, 1 think that there remains the question

of research. In fact, our research has not come to that point. So far my knowledge goes and so far the existing books are concerned, genus epidemic may be taken as a contributing measure towards the prevntive medicine.

During the struggle for independence of Bangla Desh, lots of refugees came to Calcutta and in the Salt Lake area where we had to treat 23 thousand people by the side of the Allopathic camp set up by the Directorate of Health Services and as soon as we started our camp people flocked from the Allopathic camp to our camp and that has been seen and witnessed by the Health Directorate people. I have with me with original papers signed by the Director of Health Services. During the cholera epidemic there all the cases were treated by homoeopathic medicines and no saline was needed. That was in my field experiment and only a few cases had to be removed to the Infectious Diseases Hospital at Belighata. Most of the cases were successfully treated by us and ultimately the physician in charge of the other camp came to us for help. The same thing had hapepend with regard to small pox and chicken pox. Certain cases of chicken pox had to be removed to the Hospital but with regard to smallpox cases 80 to 90 per cent were treated by us homoeoparthically.

MR. CHAIRMAN: Dr. Banerjee, our members of this committee after seeing your college and other colleges are frankly of the opinion that you should have restricted the number of intakes in your colleges because you do not have sufficient number of beds, you do not have sufficient equipments, you do not have a large number of doctors and teachers. As a member of the Council don't you think that some restriction should be put on them and what are those restrictons?

DR. BANERJEE: Theoretically we are of....

MR. CHAIRMAN: Not theoretically but we want it practically.

DR. BANERJEE: There must be sufficient number of beds in each college.

MR. CHAIRMAN: Is there a system of inspection by this Council?

DR. BANERJEE: Yes, the colleges are inspected by the Council but then the question of funds is raised by the colleges.

MR. CHAIRMAN: Even for admission in Medical Colleges there is restriction on the number. Don't you feel that in your homoeopathic colleges there should be some sort of restriction?

DR. BANERJEE: Yes, but after the upliftment of colleges, there must be some restriction.

SHRI BHAOOSAHAIB DHA-MANKAR: Is it desirable that there should be shift systems in Calcutta colleges?

DR. BANERJEE: In Calcutta there is night and day shift in quite a good number of colleges and I admit that that is only to fulfil the people's desire for admission.

SHRI JANAKI BALLAV PAT-NAIK: As regards complaints of finance, we have visited the oldest college in Calcutta and they complained that they were not adequately financed. But it was found that they did not get the finance because of their own fault. The **Central** assistance did not come because they did not apply the proper procedure as a result of which they were financially handicapped. What have you to say on that point?

DR. BANERJEE: The question of the responsibility of the Council in the matter of getting Central assistance does not arise. The assistance comes directly from the Centre to the Colleges. The applications do not go through the Council.

MR. CHAIRMAN: That is all right but the standard of education must be the responsibility of the Council.

SHRI MAN SINGH VARMA: Does the Central Government take the advice of the Council?

DR. BANERJEE: The State Government has to take the advice.

SHRI MALLIKARJUN: To what extent the members of the Council are prepared to cooperate in order to evolve a proper system of educahomoeopathy? Don't you tion in think there should be restriction to admission and the number of institutions have to be channelised and a proper system of education has to be evolved? For that to what extent the Council is going to cooperate? You want these institutions to produce qualified doctors after four or five years but how are you going to protect the interests of the future generation? You might produce five thousand doctors at present but how are you going to protect their interests and also the interests of the future generation? Under the present circumstances, whatever the institutional methods be that you are having, do they satisfy you and is it not the responsibility of the Council members to chalk out a programme to safeguard the interests of future generation.

SHRI JANAKI BALLAV PAT-NAIK: Let the witness speak about the duties and responsibilities of the Council first. In this State what is the scope and purpose of the Council?

DR. BANERJEE: In a nut shell, to propagate homoeopahic system, regulate the profession, teaching and to affiliate the college with the con-. sent of the State Government.

MR. CHAIRMAN: Affiliate means to diaffiliate also.

DR. BANERJEE: Yes.

MR. CHAIRMAN: It means proper and constant supervision has to be maintained over the colleges.

DR. BANERJEE: Yes.

SHRI DHAMANKAR: If the State Government recommends reaffiliation of any institution, what happens?

DR. BANERJEE: There are certain conditions which are to be fulfilled and, then, we send our recommendations to the Government. If necessary, the State Government may re-inspect and give reaffiliation to any institution.

SHRI DHAMANKAR: Is there any inspecting body?

MR. CHAIRMAN: They are the final authority. They can hold examinations, provide for regulations, courses of studies, instructions for refresher course; they are to appoint examiners, grant scolarships; they have the power to offer honarary degrees collect fees exercise general supervision, recommend to the Government sanction of a grant to an affiliated institution teaching the Homoeopathic system; they are to advise the State Government in the matter of research in Homoeopathic system of medicine. They have statutory powers under the Act.

SHRI R. N. SINGH: Where does the Council draw its finances from?

DR. BANERJEE: We collect our finances through registration fees of

`.• general practitioners and examination fees.

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SHRI K. C. PANDA: Is there any State grant? 1

DR. BANERJEE: No.

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SHRI R. N. SINGH: How much do you collect from the practitioners and the colleges?

DR. BANERJEE: Rs. 80,000 by way of registration fees and Rs. 50,000 from - examination fees, perannum.

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MR. CHAIRMAN: In order to give Homoeopaths equal status as is enjoyed by the Allopaths, do you think mushroom production of colleges will go a long way in that respect?

DR. BANERJEE: Actually, from. the Council we do not advocate any mushroom growth of colleges. The criteria must be fulfilled. From the Council we are prepared to see that. for each student, at least, minimum two beds are provided. We also advocate that there must be an all India standard of education and teaching and, along with this there should be an all India standard of examination.

MR. CHAIRMAN: What should be the minimum qualification for a student seeking admission?

DR. BANERJEE: It should be Higher Secondary with Science,

SHRI MALLIKARJUN: You want to improve the standards of the students and to provide two beds per student. In one of the greatest colleges there are only 125 beds and there in the final year 500 students. are coming out. How are you going to provide two beds per student? Next thing is, is it employment oriented? What will be the fate of a student after securing a diploma? In the final year 500 students are coming out and there are 125 beds. How are you going to provide two beds per student?

DR. BANERJEE: There is some amount of pandemonium in the profession. We are thinking of stopping this pandemonium and as such this Bill has come up.

SHRI MALLIKARJUN: We appreciate that you are interested in this system, but let us have a planned approach. Are you prepared to ban certain things? Council is the highest body. Are you in .a. position to take into confidence members of other institutions, so that a particular system can be evolved-there should be some restriction on admission of students, say, up to 200 or 300 and not more than that should be taken in one institution. You have to direct all the institutions for a ratio. There must be proper co-ordination-to what extent you are going to help. ' It depends on the personal effort of everyone of us serving the interest - of the nation.

DR. BANERJEE: I fully agree with you. We are thinking of limi-....g admissions. We approached the institutions and requested them to limit their admission. But the institutions came saying, we must limit the admission, you must take up the other questions of the insti-You are well aware, in tution. Homoeopathic system a nurse is getting a salary which is much below the lower grade. If the Council had sufficient amount of money in its hands it would have been very difficult.

MR. CHAIRMAN: From the Council you impose the rules. It is for the Government and the institutions to find out their own resources or to close it down. SHRI PATNAIK: Have you ever thought of recommending to the Calcutta University for creating a separate faculty of homoeopathic medicine?

DR. NAIK: I am a member of one of the bodies of the Calcutta University and I can say that the University is going to open a faculty of homoeopathic medicine very shortly and the proposal was placed in the Syndicate meeting. Syndicate appointed an *ad-hoc* body and I am a member of that body also. That was passed by that body and will be placed before the Syndicate. I can swear that Calcutta University will be opening a faculty soon.

DR. ALVA: After this enactment it will become necessary that you will have to fall in line with the pattern of maintaining the standard. You will have to give a lead to others by strictly adhering to the principle that the number of admission should be fixed. That will be the only way of building up a standard.

SHRI R. N. SINGH: Gentlemen, on behalf of the Joint Select Committee I thank you all for taking the trouble of coming over here and for your valuable deliberations. We shall give due consideration to the points you have raised. You have to produce perfect students if you want them t obe accepted by the people and we hope you will give your mind to that. Once again on behalf of all of us I thank you.

(Evidence of Dr. Anil Debnath from Tripura)

DR. ALVA: Have you gone through the Bill?

WITNESS: Yes,

DR. ALVA: Have you got any suggestions to make beyond what you have stated in your memorandum? WITNESS: I have nothing further to add.

MR. CHAIRMAN: What would be the number of homoeopaths in Tripura?

WITNESS: I cannot tell you the exact number but there are many.

MR. CHAIRMAN: Is there any homoeopathic council or board from that?

WITNESS: No. Some of them are registered homoeopaths, some are

not. There are many medical practitioners who are MBBS but who practise homoeopathic system of medicine. There is no State Board and I do not think there is any control over that.

MR. CHAIRMAN: We thank you for coming over here from a very far off place and we will give due consideration to what you have stated in your memorandum.

(The witness then withdrew.)

(The Committee then adjourned).

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Friday, the 29th September, 1972.

(AT CALCUTTA)

PRESENT

1. Shrimati Purabi Mukhopadhayay-Chairman.

MEMBERS

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Rajya Sabha 👘

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2. Shri Sasankasekhar Sanyal	6. Shri K. C. Panda
3. Shri Bhupinder Singh	7. Shri Sultan Singh
4. Dr. K. Nagappa Alva	8. Shri N. P. Chaudhari
5. Shri Man Singh Varma	

Lok Sabha

9. Shri Ziaur Rahman Ansari	15. Shri B. R. Kavade
10. Shri Muhammed Khuda Bukhsh	16. Shri Mallikarjun
11. Shri Bhaoosahaib Dhamankar	17. Shri Janaki Ballav Patnaik
12. Shri Hiralal Doda	18. Shri S. L. Peje
13. Shri Nageshwar Dwivedi	19. Shri M. Satyanarayan Rao
14. Shri Chiranjib Jha	20. Dr. Sankata Prasad

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy.

Secretariat

Shri M. K. Jain, Under Secretary.

WITNESSES

(1) Mir Asraf Hossain, Berhampore P.O., District Murshidabad.

(2) Representative of-

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- (i) The Assam Homoeo Research and Public Health Association, Dergaon.
- (ii) the Board of Homoeopathic System if Medicine, Assam, Shillong: Dr. D. Bora.
- (3) Representative of the State Board of Homoeopathic Medicine, Bihar, Patna: Shri K. K. Saran, President.

(4) Representative of the Government Homoeopathic Medical College and Hospital, Bhubaneshwar:

Dr. Narayan Rao, Principal and Superintendent of the Hospital.

[Witness (Mir Asraf Hossain of Berhampore was called in.]

MR. CHAIRMAN: At the outset I want to tell you that whatever evidence you will give here is strictly confidential and no part of it should be divulged outside before the proceedings are placed before the Parliament.

Now you introduce yourself.

WITNESS: My name is Mir Asraf Hossain. I got the diploma from the Council of Homoeopathic Medicine, West Bengal, on the basis of experience, on July 21, 1944.

In reply to questionnaire No. 4 I want to tell that in my opinion the School Final or Higher Secondary with Biology and science or any equivalent examination is required as minimum qualification.

In reply to questionnaire No. 5 1 say that adequate homoeopathic degree, or practising experience of 10 years, or influential persons of good repute who are great lover of homoeopathy should be taken into consideration.

My reply to questionnaire 6 is—it should be banned but in rural areas this may be allowed to continue till sufficient number of registered practitioners can be produced or available.

Reply to questionnaire 7:— There is no justification, but in cases of unregistered practitioner of past age for appearing at homoeopathic examination for registration having practising experience of at least 10 . years, may be relaxed.

Reply to questionnaire 8: The number of members and ratio of representation etc. should be the same as fixed and maintained in the recognised Council of others states outside India where there is good culture. Reply to questionnaire 9: Government servants generally require medical certificates. I have given certificates of sickness and fitness to my patients and they have almost all been accepted. Such privilege may be given to homeopaths for the benefit of both the patiens

Reply to questionnaire No. 10: Enlistment in some State register is unavoidably necessary for record and convenience sake of any future reference.

and the practitioners, if there is no

objection under the rule.

Reply to questionnaire 11: It is not advisable and steps should be taken under the rules for such practitioner hereafter.

Reply to questionnaire 12: Henceforth such mal-practice ought to be discontinued and only the possessors of recognised qualifications in homoeopathy be eligible for registration. I do not deem it necessary to issue registration certificates to unqualified persons merely on the basis of the realisation of fees. The procedure was bad on the part of the previous Council.

Reply to questionnaire 13: To maintain library and laboratory equipment is not possible for every practitioner which is expensive and not within the reach of all. The Council's help to these institutions in procuring sufficient funds either from the State or from any other names sources is necessary. The and number of books ought to be mentioned and should find a place in a library and there should be mention of articles and apparatus necessary to equip a laboratory.

Reply to questionnaire 14: Yes, all practitioners should maintain a regular case diary.

Reply to questionnaire 15: This is not possible without the State's

whole-hearted sympathy and recognition and allotting sufficient funds in the hands of the Council of homoeopathy in order to give relief to some extent to the suffering humanity in these hard days. Most of the villages of India get insignificant medical aid in comparison to other villages of States outside India. Establishment of sufficient number of charitable or other well-equipped dispensaries is essential in every corner of the villages in India.

My conclusion: Many states of the Indian Union have placed homoeopathy bills before their respective legislatures and a few of them have passed the Bills.

On the whole the Act can be appreciated but it cannot be called a perfect one and as such it requires to be amended. The names of the then existing homoeopathic practitioners were registered by the appointment of Registration Tribunal. In the State of West Bengal the General Council and State Faculty of Homoeopathic Medicine, a statutory Body recognised by Government of West Bengal to regulate the study and practice of homoeopathy in the State and impart instructions in and out Homoeopathy colleges and hospitals with a four years' course of study including all basic subjects of modern medicine and award diploma or degree to the successful candidates.

The principal reason for the sad plight of homoeopathy in this country to-day is that the authorities concerned do not rate our colleges and hospitals and dictate requirements so onerous that no institution which is heavily endowed or affiliated with a University can survive. We see in our daily practice that the practitioners in the old school of Medicine generally hate the homoeopaths. It is long felt grievance of the homoeopath—say from 1832 (Germany, Hungary etc).

It is agreed with Bernard Shaw that "the medical profession is a conspiracy against the lality to hidetheir own shortcomings."

Only the desires of allopathicridden Health Department goes against the Bills (Late Dr. Roy).

Establishment of separate medical colleges in the Science of Homoeopathy in the Universities of all the States of India is essentially necessary empowering the authorities. concerned to grant diplomas, registration certificates to. the successful candidates, like other recognised degrees in vogue in India. The course of study should at least be of four years.

I am very thankful to this Committee for shouldering the crosses of the lives of so many neglected, desplsed and helpless existing Homoeopaths and the future younger generations of Homoeopaths for raising their status, rank, honour and dignity in the Society. States, and the suffering humanity amongst the rich, the poor and the destitutes of the Country.

SHRI SASANKA SEKHAR SAN-YAL: Mr. Mir Asraf Hossain, I will ask you one question. Do you think that there are some drugs, which, if not administered by properly trained and qualified doctors, may do longstanding harm to the constitution of patients.

WITNESS: Yes, say for instance Lycopodium. If we administer Lycopodium for a long time ignoring the adequate symptoms then it would be harmful and dangerous.

SHRI JANAKI BALLAV PATNA-IK: You have said that a number of homoeopathic colleges should be opened. Do you want that the standard should be set up by the Central Authority or by the State Authority for such homoeopathic colleges regarding the courses of studies and all other things. Do you think that the State Homoeopathic Board is adequate to set the WITNESS: The richer section of the people still do not recognise homoeopathy. It is better that the Central Authority should set the standard in the colleges.

SHRI ZIAUR RAHMAN ANSARI:

ग्रापने यहां ग्राकर जो व्यान किया, ग्रापके तजुर्वात से इस कमेटी को फायदा पहुंचा है । ग्रापने यहां आने की जो तकलीफ को उसके लिए यह कमेटी ग्रापकी बहुत मशकूर है । हम यह उम्मीद करते हैं कि ग्रापके ये तजुर्वात हमको एक ग्रच्छा सा होमियोपेयी सेन्ट्रल कौंसिल बिल पास करने में ग्रोर होमियोपेयी के काज को ग्रागे बढ़ाने में बहुत कुछ मददगार होंगे । एक वार फिर ग्रापका गुकिया करते हैं ।

[The witness then withdrew.]

[The Committee then adjourned.]

[The witness Dr. D. Bora, representing the Assam Homoeo Research and

... Public Health Association, and the Board of Homoeopathic System of Directorate of Health Services, Assam was called in.]

[SHRI BHAOOSAHAIB DHAMANKAR in the Chair.]

MR. CHAIRMAN: Dr. Bora, before you begin, let me make it clear that the evidence that you tender before this committee is strictly confidential and not for the press. When you go out please see that whatever you have said here does not get publicity and is kept strictly confidential.

You may please introduce yourself.

DR. BORA: I represent two bodies one, I am an elected member of the Assam Homoeopathic System of Medicine Board, Government of Assam, and another, the All Assam Homoeo Research and public Health Association.

DR. K. NAGAPPA ALVA: You are the sole representative representing this Association and also the Homoeopathic Board of the Government of Assam? DR. BORA: Yes. May I be permitted to speak in Bengali?

MR. CHAIRMAN: Yes, You may make your observations on the Bill.

DR. D. BORA: I am speaking on behalf; of the Assam Government which has formed a Homoeopathic Board. It came into existence in 1956 and the Assam Government has given recognition to all those who were practising at that time as class A and class B practitioners.

MR. CHAIRMAN: Did the Assam Government charge fees for registration of all the practitioners?

DR. BORA: Yes. There are two categories of registration fees. Rs. 20/for A class practitioners and Rs. 15/for B class practitioners.

DR. K. NAGAPPA ALVA: What is the difference between the qualifications of these two categories of doctors?

DR. BORA: Those who passed from Government recognised homoeopathic institutions in India after studying four year's course will get A class registration and those who are practising without requisite qualifications for a long time are given B class registration.

DR. K. NAGAPPA ALVA: What is the time limit of practising experience of the B class doctors?

DR. BORA: An Act was passed in the Assam Assembly in 1955 which provides that those who would complete five years' practice in 1955 will be given registration.

On behalf of the Board we made representations to the Government of India asking for rules and regulations and for the formulation of other things which might financially help the Board because the Assam Government on its own cannot go long. One philanthropic man in Assam started an institute known as the Assam Homoeo Research Institute but the Government has up till now not given it any aid.

MR. CHAIRMAN: Has that institute been registered with the Assam Government?

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DR. BORA: It has not been registered up till now. The institute has applied for affiliation but there are no rules and regulations to affiliate all the institutions in Assam and the Government made three or four subcommittees to frame rules and regulations and amendment of the existing Homoeopathic Act for giving recognition to the homoeopathic system of medicine in Assam.

DR. K. NAGAPPA ALVA: Are you speaking on behalf of the Board?

DR. BORA: Yes. I am speaking on behalf of Board and Association also.

- DR. K. NAGAPPA ALVA: And you also represent the Assam Homoeo Research and Public Health Association.

DR. BORA: Yes, I have been selected to tender evidence hereby that Institution also.

SHRI MAN SINGH VARMA: Mr. Chairman, he is speaking on behalf of the Board and also on behalf of the Assam Homoeo Research and Public Health Association. His views from the point of view of the Assam Homoeo Research and Public Health Association may not be the views of the Board.

MR. CHAIRMAN: All right, let him make his observations first.

DR. BORA: The Government of India sent us a questionnaire to our Board. May I read it?

MR. CHAIRMAN: You need not read it. You may give any new points that you would like to make.

DR. JUGOL KISHORE: It is not the Government who sent you the questionnaire but it is the Rajya Sabha.

DR. BORA: Yes, the Rajya Sabha Secretariat.

DR. BORA: The Board has sent its reply to the questionnaire sent by the Rajya Sabha. The Assam Homoeo Act was passed in 1955. The Board was established in 1956 with 11 members of whom 4 are elected and 7 are nominated. MR. CHAIRMAN: We have got your replies. Have you got anything more to say about the Board?

DR. BORA: The Board is preparing a syllabus and expecting and waiting for recognition by the Government. This will be circulated to all the institutions, but these things have not yet been done.

SHRI VARMA: Institution means colleges.

DR. BORA: Yes.

SHRI VARMA: How many colleges have you got there?

DR. BORA: There is one college since 1948 and another one has been started in 1968. There are two colleges. The first college was established in the name and style of the Assam Homoeo Research Institute at Golghat town. It was established in 1948. Another one was established in Naogan town in the name of Homoeopathic Medical College.

SHRI VARMA: Do you know anything about the Research Institute?

DR. BORA: One Dr. Bhogeswar Dutta, a local man, started an institute. He has been collecting herbs locally and trying to have medicines prepared through local research there. This has been inspected by Assam Government through their department, but no financial assistance has been made available from the Government. Dr. Bhogeswar Dutta has applied to the Assam Government Homoeopathic Board for affiliation of the Board and for grants and financial assistance. This is the first institution of its kind in Assam and people from various parts of the State come and take their education here, spread themselves all over the State, 🔍 give service to the people and earn their livelihood. Dr. Dutta has asked the Assam Government for giving help, but the Government said that unless he has brought the institute up to a certain standard Government of India cannot be approached and induced to render necessary aid that he needs and asks for, Government

was approached with the request that unless there are large number of dispensaries all along the area nothing can be done, but as the Assam Government was unable to find fund it was not possible to proceed further.

+ SHRI VARMA: By whom are these dispensaries to be opened?

DR. BORA: By Government to start with.

SHRI K. C. PANDA: Dr. Jugol Kishore is there. We would like him to enlighten us on this point.

DR. JUGOL KISHORE: I have not received any paper or application for grant from this Research Institute, or from Dr. Dutta during my tenure of office.

SHRI VARMA: Do you know that such a Research Institution exists there?

DR. JUGOL KISHORE: 1 know personally/officially.

DR. BORA: As President of the All India Homoeopathic Medical Association when Dr. Jugol Kishore attended the Hyderabad Session, a resolution was passed on this particular Institution asking for an aid of Rs. 1 lakh 50 thousand from Government. He knows it as Chairman of the All India Homoeopathic Medical Association. In 1948 an association was formed there and this had been affiliated to All India Homoeopathy Association. In all conferences of associations on an all-India basis this association has represented on behalf of the Assam State and has also requested this all India forum to take into account about what can be done in the Assam area. There has to be an independent directorate in regard to four-years course so that the matters may be implemented on the administrative side. Some have been recognised as a result of qualifications and some have been kept on the list and they are left themselves to look after their own practice and their patients. 1 *

अध्यक्ष महोदय, डाक्टर साहब, मैं यह जानना चाहता हूं कि म्राप के जो रिसर्च इस्टीट्यूशन्स है, उन्होंने इतने दिनों के म्रन्दर काम करने हुए कोई नया रिसर्च करके होम्योपैथी साइन्स को दिया या नहीं ?

साक्षी : जी हां ! होम्यापैथी में नई बनाने को कोई चीज नहीं है । हमारे देश में सब चीजें हैं, सव तरह के हर्क्स हमारे देश में सब चीजें हैं, सव तरह के हर्क्स हमारे देश में है । श्री योगेश्वर दत्त ने इप वारे में वहुत सारा रिसर्च किया है । वहां पर एक गादु जानी का झरना एँसा है जहां पर सब देश के लोग आकर स्नान करते हैं । उस पानी में सल्फर मिला हुया है । उसका पानी कलेर उन्होंन रिसर्च किया ग्रोर उसमें से एक दवा निकाली ग्रोर उहका एक नाम दिया जो स्किन वीमारी के लिए है। उन्होंने एक दवाई निकाली जिसको को एलोस्टोमिन कहते हैं । इस तरह से श्री दत्ता साहब ने एक दवाई किस्म बीमारियों के लिए निजालो है ।

इसी तरह से जो बड़ा केला होता है, उहमें भी रिसर्च करके श्री दत्ता साहव ने एक दवाई निकाली है जो बीमाकौल के नाम पुकारी जाती है।

उन्होंने मिर्च, प्याज झौर लहसुन में भी रिसर्च करके दवाई निकाली है। इस तरह से उन्होंने करीब 27 दवाईयां तैयार को हैं। ये जितनी दवाईयां उन्होंने निकाली हैं वे उनका प्रयोग कर रहे हैं मौर वे बड़ी लाभदायक सिद्ध हो रही है। मभी उनका इन्वैस्टोगेशन का काम जारी है मौर हम आशा करते हैं कि वे भौर भी इसी तरह की नई नई दवाईयां निकालेंगे।

SHRI CHIRANJIB JHA: में इस ाऊ जुगल किशोर जी से यह जानना चाहता हू कि इस तरह के जो रिसर्च हुए हैं, क्या उनके बारे में उग्हें जानकारी है या नहीं ? OFFICER, MINISTRY: I have not come across anywhere regarding plants mentioned by Dr. Bora and regarding preparation of drugs from onion and rasoon. This drug has already been proved in our materia medica. These drugs are well known and are being utilised by the homoeopaths every day in their practice. I do not know what drug has been prepared out of these basic materials but unless I get information about this from any journal or paper I cannot pass any opinion on this.

SHRI CHIRANJIB JHA: मैं प्राप से एक चीज यह जानना चाहताहूं कि ग्रभी आपने यह कहा कि दूसरे स्टेट के लोग प्राप के यहां प्राते हैं और वे भी आपकी दवाईयों का फायदा उठाते हैं। मैं ईोप से यह जानना चाहता हूं कि प्रासाम± होपोकैयी स्टेट बोर्ड को आपके इंस्टीट्यूशनय सेआ शिकायत है या नहीं ?

WITNESS: : ग्रभी तक तो नहीं हुई है। एक दफा सिविल सर्जन प्राया ग्रौर उसन इंस्टीट्यू भन की लैवारेटरी को देखा कि वहां पर होम्योपैथी के सम्बन्ध में जो रिसर्च किया जाता है वह साइन्टिफिक तरीके से किया जाता है या नहीं। वह बोला कि जिस तरह से एलीपैथी में हर तरह से के एक्वीपमेंट की जरुरत होती है उसी तरह से होम्योपैथी में भी एक्यू पमेंट रखे जाने चाहिए। हम वारे में बोला कि इस, एक्यमेंट के लिए कोन पे करेगा। तब वह बोला कि भवनमेंट पे

(SHRIMATI PURABI MUKHOPADHYAY was in the chair).

MR. CHAIRMAN: How many homoeopaths are there in Assam?

WITNESS: About ten thousand and there are about 1203 registered homoeopaths. MR. CHAIRMAN: You represent both Assam Homoeopathic Research and Public Health Association as also the Board of Homoeopathic System of Medicine?

WITNESS: Yes.

MR. CHAIRMAN: You have come 'here in dual capacity?

WITNESS: Yes.

MR. CHAIRMAN: When was the Board constituted?

WITNESS: In 1956.

MR. CHAIRMAN: You do not have any homoeopathic college?

WITNESS: There are private colleges not recognised by the Board by the Government.

MR. CHAIRMAN: What is the reason for this?

WITNESS: There are no rules and regulations in the Assam Government to give recognition to these Homoeopathic educational institutions.

MR. CHAIRMAN: You do not have any Act on Homoeopathy there?

WITNESS: Yes, an Act was passed in 1955. There is a provision to make rules and regulations. At present Government constituted a sub-committee for some rules and regulations.

MR. CHAIRMAN: We may take note of it. We have to write them about this.

SHRI J. B. PATNAIK: Dr. Bora, you must have read and studied the proposed Bill. Have you got anything to comment on the Bill with regard to representation?

WITNESS: Since there is no college in homoeopathy recognised by Government. So, there is no institutionally trained homoeopaths. So if you restrict it that only the homoeopathic doctors who have passed through an institution will be nominated or elected to the Central Council then you are debarring most of the homoeopaths in Assam.

SHRI J. B. PATNAIK: In Assam there are colleges which are already recognised and also colleges which are not recognised. You refer to second schedule you will see that Assam is not mentioned. That means, Assam would go unrepresented. So, what is your suggestion as to how Assam can be represented in the Council.

WITNESS: I like to suggest, there is no recognised college in Assam but has a Government recognised Board. Those who are registered under the Board, they should be authorised to represent in the Central Council.

MR. CHAIRMAN: The Board is recognised but the Board do not recognise any institution. So, whoever passes through unrecognised institution we cannot accept them as institutionally trained—that is the difficulty.

WITNESS: If Central Council will give due consideration. Then Assam can be represented in the Council. Question of unrepresentation cannot arise out. So there will be way; if the matter is considered by the Joint Committee, Assam will have chance for representation,

SHRI J. B. PATNAIK: What is the meaning of giving suggestion in your answer that the State Board should be authorised to give recognition only and not the Central Board. Your suggestion defeats its own purpose. When the State Boards are not active then the formation of Central Council will accelerate the process of giving recognition to institution.

WITNESS: There has been some activity of the State Board. But the difficulty is that there is no rules and regulation. So, local institution in the State could not be given recognition. Now rules and regulations are going to be framed and recognition will be given. Previously there was provision in the Act but no rules were framed. Now rules are to be framed.

DR. K. N. ALVA: Here the mistake is on the part of the Government rather it is a lapse on the part of the Government. The Act was passed in 1955, Board was formed in 1956 but even now there is no proper rules and regulations although colleges have been functioning and every year doctors are coming out. So, I think that the position should be made clear to Assam Government to frame rules immediately and at the same time I feel these doctors must be given a chance. But how to give them chance will be our job.

SHRI JANAKI BALLAV PAT-NAIK: Will Mr. Jugal Kishore pleease clarify this point?

SHRI JUGAL KISHORE: I have to make two points very clear. Possibly we get the impression that Assam State Board has not been represented in the Central Council. That is not so. There are 41 doctors in Assam State Homoeopathic Board who are fully qualified. They can send one from amongst them as the Representative to the Council.

MR. CHAIRMAN: These 41 persons are fully qualified but they were trained outside Assam. But what will be done in the case of those who have passed from unrecognised Institutions in Assam.

SHRI JUGAL KISHORE: That has to be looked into. The Assam State Board should have acted and formulated rules in this regard. As soon as it is done the Assam State Board would be represented.

DR. K. NAGAPPA ALVA: The name of Institution, as you said, in Research and Public Health Association. From that it is very clear that it functions as an Association as well as it is a Research Institute. If it is really a Research Institute then how many doctors are working there? What are the researches?

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WITNESS: (Spoke'in Bengali): Two bodies are there. One is the Governing Body of the Research Institute, that is colleges and the other is the Executive Body of the Assam Homoeopathic Association. According to the principles of different homoeopathic pharmacopocia Dr. Dutta has invented many drugs from the trees and plants of Assam, that is mineral, animal and forest resources.

DR. K. NAGAPPA ALVA: Madam Chairman, the witness is representing the State Board of Assam as well as the Assam Homoeo Research and Public Health Association. We want to know from him whether any work is going on in that Institution in the matter of research.

MR. CHAIRMAN: He has already said that the gentleman has invented some drugs out of the trees and plants of Assam according, to the standard pharmacopocia.

DR. K. NAGAPPA ALVA: Has he written or published any scientific article on research in any paper?

WITNESS: Yes, he has written in local language. BNOS Homoeopathic and Biochemic books and some articles published in local news papers.

DR. K. NAGAPPA ALVA: You have said that 50 dispensaries have been started by the Government.

WITNESS: That was the resolution of Board. It was only the proposal. Action has not yet been taken.

SHRI JANAKI BALLAV PAT-NAIK: Do you suggest all India standard of homoeopathic studies and common syllabus for all Institutes in the country?

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WITNESS: Yes.

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SHRI JANKI BALLAV PATNAIK: Have you recommended to the University of Gauhati for creating a Faculty of Homoeopathic Medicine?

WITNESS: I have thought it and I think the State Government will create a State faculty of Homoeopathic medicine separately.

MR. CHAIRMAN: What the Board has done?

WITNESS: It was discussed in the Board and it will also be discussed in the Board in future and we will consider all these when the rules and regulations are framed.

DR. SANKATA PRASAD: Dr. Borah, on behalf of the Committee I extend to you my deep gratitude for coming over here and tender evidence. We have been greatly benefitted by your valuable suggestions. Due consideration will be given to all your points. I thank you once again.

MR. CHAIRMAN: I thank you also.

WITNESS: I also reciprocate my thanks to all of you.

[The witness then withdrew.]

[The witness (Shri K. K. Saran, President, State Board of Homoeopathic Medicine, Bihar, Patna) was called in.]

MR. CHAIRMAN: Whatever you have got to say you may do so. Everything is strictly confidential and you should not divulge it to anytbody or publish in any paper.

WITNESS: Respected Chairman, at the outset on behalf of the State Board of Homoeopathic Medicine I beg to convey to you and through you to the members of the Joint Committee our gratefulness and appreciation for the steps taken by the Parliament and the Government of India to proceed with this legislation. Our representatives who appeared before the Joint

Committee in June 1969 in connection with the previous Bill now passed as Indian Medicine Central Act of 1970 earnestly pleaded for a separate council for homoeopathy. It is gratifying to note that our stand has been vindi-_ cated. Prior to Indian system of medicine homoeopathy did not get that attention and assistance from Central Government which was its due and which it deserved. Recognition of a though belated, separate identity, augurs well for the future.

The present Bill has been drafted on the lines of the Indian Medicine Central Council Act of 1970 which has been thoroughly scrutinised by the then Joint Committee. As such, its drafting is meticulous and there is hardly any scope for much comments. I have, however, on behalf of the Board, submitted certain amendments for the kind consideration and before I take up these amendments, which have been circulated to you now, I would seek your indulgence to permit me to make certain submissions.

Now this statutory council is proposed to be set up as a prerequisite for the proper growth and development of homoeopathy. This is meant to evolve a uniform standard of education in homoeopathy and to ensure that those who practise do observe the code of ethic sin the profession. My humble submission before this august body is who will impart that highest standard of teaching and training in homoeopathy?. As you all know, Governments—Central as well as Stateare reluctant to encourage private initiative and private institutions to impart teaching in allopathic system of medicine. But what is the case with regard to homoeopathy? It is left entirely in the hands of private practitioners. No State Government, to my knowledge, has come forward to establish colleges except perhaps Delhi, Orissa & U.P. I do submit that training in homoeopathy should not be left entirely to private enterprise whose motives are not Philenthropic but primarily to earn a little more money.

Therefore, my submission is that this matter should be brought to the notice of the Parliament and the Central Government that their approach, to the problem needs a little orientation. They should take more direct interest in the development of Homoeopathy. So far Central assistance is made available only to private institutions by way of recurring and nonrecurring grants. The matching grant is to be provided either by the State Government or by the institution itself. As the report of Advisor shows that very few State Governments have come forward who ensure to matching grants. I would submit that the same pattern of assistance may kindly be made available to the State Government also so that they are encouraged to open and maintain certain college up to a very high standard. Next I would like to submit for your consideration that the status of the President of the Central Council should be defined. Of course, it cannot be done by the Act but some sort of recommendation in the report may serve the purpose. Unless somewhere it is said that the status of the Chairman of the Central Council of Homoeopathy would be such and such I am afraid he will not be able to full his weight. Incidentally I may mention with apologies to Dr. Jugal Kishore that Government of India have been appointing eminent homoeopathic physicians top-ranking physicians as advisers. I would also respectfully submit in all humility that the status of the Advisers should be raised. Advisers should not be advisers to Ministry but advisers to Ministers. I need not dilate on this point because the implication is fairly well known.

I have circulated certain amendments. If they are appreciated by the Chairman and the members then those may be looked into. Otherwise the Bill is quite in order.

MR. CHAIRMAN: Your amendments need not be explained. If you have got any other point to make you are at liberty to do so. WITNESS' I would like to bring to your notice one or two points. Firstly, the Homoeopathic system as defined in Sec. 2 of the Act needs amendment. This has been stressed by the West Bengal Council as well as our Board, and that I may say this much that, "Homoeopathy" means the system of Medicine founded by Dr. Hahnemann or the allied system of Biochemistry founded by Dr. Schussler, and the expression "Homoeopathic" shall be construed accordingly.

SHRI B. DHAMANKAR: I want a clarification. Is there any Biochemist practitioner in Bihar who practises Biochemisry exclusively?

WITNESS: There is no physician who exclusively practises in biochemistry. It is our common experience both as a patient and as a man interested in homoeopathy that bio-chemic medicines are also prescribed by some homoeopaths, 52(c) of the Bihar Development of Homoeopathic System of Medicine Act 1953 itself says. "Homoeopathy" means the system of medicine founded by Dr. Hahnemann or the allied system of Biochemistry founded by Dr. Schussler, and the expression "Homoeopathic" shall be construed accordingly. I may submit further that in case high potency homoeopathic medicine does not suit a patient, then biochemic combinations are given and they are effective. So, some practitioners practise both and there is no distinction between a homoeopathic practitioner and practitioner of biochemic medicine as such,

DR. JUGAL KISHORE: You are talking of Bio-chemistry. But let us understand that biochemistry is different from the Biochemic system founded by Dr. Schessler. So, we should not confuse these two terms. Biochemic medicines or so-called to issue salts are different from biochemistry.

DR. K. N. ALVA: Is there anything like biochemistry in Homoeopathic system? SHRI JUGAL KISHORE: That is why I object to the term 'blochemistry' There is something which is called blochemic medicine.

SHRI B. R. KAVADE: In the Maharashtra Bill also it is written Diploma in Homocopathy and Biochemistry.

DR. JUGAL KISHORE: Sir, it is my duty to remove this confusion. This word is being misused. We should have mentioned biochemic system of medicine and not biochemistry.

DR. K. N. ALVA: There are doctors in homoeopathy who only use homoeopathic medicine and at the same time there are homoeopathic doctors who prescribe biochemic medicine. They form a group by themselves or are individually practising. Are they not entitled to become members of the Council or this profession?

DR. JUGAL KISHORE: We hardly know anybody who exclusively practise biochemic system of medicine. Most of the homoeopaths use both the systems of medicine. Actually there is not much difference. Biochemic medicines are limited to certain potency range whereas the potency of homoeopathic medicine used may be much higher. Secondly, there is another basis. Dr. Schussler, the founder, recommended this particular mode of giving medicine; if the body fluids need these salts for curative purpose. That is why Dr. Schussler had chosen 12 salts like Natrum Mur, Kali Sulph, i.e. Potassium Sulphate, then Kali Chlor, i.e. Potassium Chloride and his theory is that these salts are needed by the body for certain tissuer repair. But we have seen that the use of hese remedies is very helpful but that is not competent enough to cover the whole range of human sickness. These can be prescribed on homoeopathic principles and these remedies are used in higher potencies in homoeopathy and in lower potencies in Biochemic system.

-SHRI BHAOOSAHAIB DHAMAN-KAR: If there are practitioners who use only biochemic remedies, what will be their position?

DR. JUGAL KISHORE: I think homoeopathy should be all inclusive. We should not separate homoeopathy and biochemic remedies. That is why we have said that homoeopathy includes also biochemic system which is a branch of homoeopathy.

MR. CHAIRMAN: But then our definition as proposed in the Bill will be wrong because we have specifically said that only the system of medicine founded by Dr. Samuel Hahnemann will be taken into consideration. Then his suggestion is perfectly correct.

DR. JUGAL KISHORE: We could extend the definition to biochemic.

MR. CHAIRMAN: I know one Dr. Neogi, I was treated by him. I had my knee cut when I was a gist of nine and developed a sore which continued up to 16 years. Many exceriments were made on me by the modern medical science but without effect. Then that Dr. Neogi-he was practising in Dharamtala in Biochemic only-treated me and within six months I was cured. He used only biochemic medicines and he does not use homoeopathy. So we should be clear in our definition. If we want to include biochemic then the present definition is inadequate. However, we will keep it in our mind.

Your point is very well taken. What is your next point?

DR, K. NAGAPPA ALVA: We are dealing with a particular system. I think we will have to make one thir clear on the concept of homoeopathic system of medicine. I would like to suggest that it is better to mention here in the way we think best Dr. Schussler's name and also define that this forms part of the entire homoeopathic system. So let there be no confusion.

MR. CHAIRMAN: Now, Dr. Saçan. members would put to you certain questions and you may give your reply.

SHRI JANAKI BALLAV PAT-NAIK: I take up your first amendment that you have suggested. Won't you agree that there is an objecive part of the Bill which covers all these things, and so will it be necessary again after this objective is there in the Bill to put it in the first clause?

DR. SARAN: My submission in this respect is that the statement of objects and reasons indicates the line of thinking, the intention of the executive and the objectives that are expected to be achieved whereas this preamble which I want to be introduced in the Act will reflect the will of the legislature.

SHRI JANAKI BALLAV PATNAIK: That will be part of the Act itself. You cannot enunciate the whole thing. I think that is covered by the objective part. What is what I am suggesting it to you. And secondly, between the system of medicine introduced by Dr. Hahnemann and the system of medicine introduced by Dr. Schussler, should there be and' or 'or'? I think it should be 'and'.

DR. SARAN: Yes.

SHRI PATNAIK: Now, I want to ask you one question about the State Homoeopathic Board. How many colleges have been recognised by the State Board in Bihar and how many students after recognition have come out from these different colleges as recognised by the Board? Can you give the figures?

DR. SARAN: We have 7 permanently recognised colleges and there are 11 temporarily recognised colleges. Recognition of 2 temporarily recognised colleges expired by the end of June 1972 and the report of the Inspectors is awaited and when that is received the question of further extension. of recognition would be examined.

SHRI PATNAIK: Have you got any criteria for recognition?

DR. SARAN: The criteria have been laid in the Regulations framed under the Act. At present private institutions start admitting students and then they apply for recognition. We suggested to the State Government that the Act should be amended to provide that the college should first take. clearance from the Board before starting their work. Inspectors are appointed, who after inspecting the institutions submit their reports and on the basis of their reports the colleges are recognised.

SHRI PATNAIK: What is the minimum qualifications of the students for admission in the colleges?

DR. SARAN: Up till now it is matriculation.

SHRI PATNAIK: You are in favour of matriculation?

DR. SARAN: No. The educational qualification has to be raised because after all we are going to compete with the other systems of medicine.

SHRI PATNAIK: What should be the minimum qualification?

DR. SARAN: My personal view is that I.Sc. should be the minimum qualification.

SHRI PATNAIK: Are you in favour of an All India Board of Control for Homoeopathy?

DR. SARAN: Surely by all means and that is why you are taking the necessary steps.

SHRI PATNAIK: If the Board of Control of Homoeopathic System of Medicine on an all India level sends Inspectors to the colleges recognised by your Board and if it is found that the conditions of the colleges are not satisfactory and accordingly they derecognise the colleges, would you agree? DR. SARAN: Yes; of course. There is a similar provision in the State Act itself.

DR. SARAN: The Statement of Objects and Reasons is not a part of the Act nor it is published alongwith the Act. I have before me the A.I.R. Manual vol. 14. There are certain Acts, for example, the Minimum Wages Act, which says-An Act to provide for fixing minimum rates of wages in certain employments-it is in the first part of the Bill. Then, it says, whereas it is expedient to provide for fixing minimum rate of wages in certain employments, it is hereby enacted, and, if I am permitted to refer to the Indian Medical Degrees Act-here also it is said, an Act to regulate the grants of titles, etc.. and then if says whereas it is expedient to regulate the grant of titles enacted.

SHRI PATNAIK: Does your Board intend to recommend to the Patna University or the Universities in Bihar to create necessary Faculties in Homoeopathic Medicine?

DR. SARAN; In all humility I submit, that is my time of thinking. What I find is that these 19 diploma colleges functioning but we must have a Degree College. I had a mind to open a Degree College and I discussed the matter with the Central authorities but the difficulty is that this Board cannot grant a degree under University Grants Commission Act. Either the University Grants Commission or the State Government by a special enactment can allow the Board to do it. Opening a faculty in the Patna University will be a quicker and most effective way of proceeding in the matter. But that is my line of thinking and I am trying to persuade the Government to open a Degree College. As I have submitted, the State Government is really in a tight cornerwe know from the papers that our plan allocation has been slashed down because State Government is not in a position to find adequate resources. So, inspite of their best desire the

State Government is in difficult position to arrange funds for the encouragement of this system. The State Government is providing just a token help. Two States for instance Maharashtra and Andhra, explained that the standard of teaching was not up to the desired mark partly due to the paucity of fund. The policy decision is that up to undergraduate standard it is the responsibility of the State, but where are the resources? If I am permitted to refer to article 45 of the Constitution, it says, the State shall endeavour to have free and primary education within 10 years....

MR. CHAIRMAN: Dr. Saran, that is beside the point. Please concentrate yourself on the provisions of the Bill.

DR. SARAN: I was just trying to emphasise my point that as in the case of primary education so in the case of Homoeopathy, the State Governments in spite of their noble desire they have not been able to do much in that direction due to paucity of fund. I do not know whether under the present financial stringency they will be able to do much now. That is why I am making a request to the Committee to try to do something in this respect.

DR. K. NAGAPPA ALVA: What is the total number of doctors practising Homoeopathy who are registered?

DR. SARAN: The number of registered practitioners is 14026 of whom institutionally qualified are 860.

DR. ALVA: Are there doctors who have not registered themselves and practising?

DR. SARAN: I do not suppose so because we stopped the registration of institutionally not qualified practitioners in 1964. Naturally, it is presumed that everybody has been registered. DR. ALVA: Are you satisfied that these doctors are using standard drugs and are these drugs available from recognised firms, wherefrom are they getting their drugs?

DR. SARAN: They are available, but about the standard drugs there has been a difference of opinion whether the German drugs are standard, or the B. and T. drugs are standard drugs. But both these medicines are in use and are available in the local market. Drugs are also manufactured by some firms locally in India.

DR. ALVA: Are you having text books that are necessary for studying in the colleges?

DR. SARAN: Text books are available, of course, in English, not in Indian languages. That is why I was submitting that unless the initial standard is raised it is not possible to improve the standard of training.

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SHRI SASANKA SEKHAR SAN-YAL: The Hon'ble witness has mentioned standard drugs. I presume the standard drugs are subject to different effects on account of climatic variations. Symptoms remaining the same if there are two different inhabitants of different climatic conditions, e.g., Kashmire and Trivandrum, in that case, I am asking you and also the Adviser to the Government of India. what margin do you account for and whether to guard against such variations, other things being equal, it is necessary that as far as possible different climate conditions should have different research centres?

WITNESS: It is too technical a question for me to answer. Perhaps the Advisor will be able to throw some light on it.

OFFICER, MINISTRY: Shri Sarai is not a doctor as such. There have been some experiments regarding stability of potency—not in India but it was done in Great Britain. It was 'discovered homoeopathic potency has got one of the resistances in it. Our people used to believe that while smoking it evaporates. It is not so. They found the potency of the medicine which has to be given heat to the degree of 150 to 180 for two to three hours. We have to carry our research in our own country and the small research institute might one day do this experiment. But this is one of the basic fundamental researches which require lot of money, lot of elements before we can do this experiment. I agree with the honourable member that this experiment is vital. It is necessary that we do such experiments so that we can put our steps scientifically.

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SHRI KAVADE: Shri Saran, what is your attitude towards election. As you know some of them will be nominated and others elected.

WITNESS: Under section 3(1)(a) you have made no distinction between a registered practioner who has -been registered by virtue of his -eminent position in profession and practitioner instituregistered - 8 tionally qualified. But when we come down to section 5(i) we find a glaring discrimination between the two categories of registered practitioners. I would submit that those who are permanent in profession, practising are pioneers in this field and genuinely interested in the development and growth of homoeopathy should not be deprived of the right to stand for -the highest honour i.e., election to the Council. It is true that there is a provision under section 3(i) (c) for nomination depends on the secret will of the Government and all that it connotes. I further hope that my last two amendments will be given due consideration.

SHRI DHAMANKAR: We thank you for coming over here to make suggestions and we thank you for your cooperation.

[The witness then withdrew.]

[The wilness (Dr. Narayan Rao, Principal of Government Homoeopathic Medical College, Bhubaneswar) was called in.]

MR. CHAIRMAN: We have got your reply.—If you have got to make any more suggestions you may do so.

WITNESS: I would like to submit that those who have passed from University or those who are members of the Faculty of a university should be represented in the Council. Let not any faculty of any university is there in the Council. Teachers of recognised colleges—at least some percentage of them—should be there in the Council.

MR. CHAIRMAN: We have got your reply. Now honourable members will put questions to you.

DR. K. NAGAPPA ALVA: When was this college in Bhubaneswar started?

WITNESS: In July, 1969.

DR. K. NAGAPPA ALVA: What is the yearly admission?

WITNESS: Number of seat is 25.

DR. K. NAGAPPA ALVA: What is the minimum qualification for admistion?

WITNESS: P. U. science with Biology or Higher Secondary Certificate with Biology, Physics and Chenistry. The reason for keeping P.U. with Biology is that in those colleges the standard of teaching of science subjects is not up to the mark or raher it is not taught at all. As a resaut the students have not got any basic knowledge in physics, chemistry and biology,

MR. CHAIRMAN: That is very good.

DR. K. NAGAPPA ALVA: We have got four years' Diploma Course, and in addition we have made one year course in the Hospital.

MR. CHAIRMAN: Which hospital?

WITNESS: We have got our own Government Hospital attached to the college.

DR. K. NAGAPPA ALVA: How many beds are there?

WITNESS: 24.

MR. CHAIRMAN: You are the Principal of the college.

WITNESS: Yes and I am also the Superintendent of the Hospital from the administrative point of view.

MR. CHAIRMAN: Are you a M.B.B.S.?

WITNESS: No, I am a private practitioner at Lalbag, Cuttack, I am a D.M.S. of Calcutta. Then I took the D.F.H. degree from London. Then I had been to America to have iny post-graduate degree in homoeopathy. After that I got P.G.H. degree from Glassgow.

MR. CHAIRMAN: Are all the (legrees recognised?

WITNESS: Only D.M.S. (Cal.) is recognised in our State I got my self registered under the Orissa Homoeopathic Act, 1956.

MR. CHAIRMAN: Mr. Jugal Kishore, why is it that persons having qualifications from Britain, America and such other countries are not recognised or their degrees reciprocated?

SHRI JUGAL KISHORE: Madam, except in Britain these are not recognised degrees or qualifications. So far as these post-graduate degrees are concerned, in America or Gerinany or elsewhere there are only deries of lectures deliverd and students attend the lectures. In Britain some of our boys have attended a course of training and they are given D.F. H. viz., Diploma of Faculty of Homoeopathic Medicine. In Britain they do not allow our boys to practise and there is also no reciprocal arrangement in this matter. WITNESS: The reason is this. In Western countries nobody is recognised in any system of medicine unless he is a M.B.B.S. or M.B. That is the reason why they do not recognise us for registration in homoeopathy.

MR. CHAIRMAN: Now, as the Superintendent of the Government College and Hospital have you ever come across any case at Bhubaneswar which was an emergency case and also where question of surgery was: involved?

WITNESS: Yes.

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MR. CHAIRMAN: What did you do in these cases?

WITNESS: So far as emergency case is concerned we have admitted one eclampsia case in our hospital. This lady was the wife of one of our Demonstrators. We tackled the caseby giving homoeopathic medicinesand after that the lady gave birth toa child having only two hours' labour pain. Thus, we have avoided surgical interference in such cases. We do not have any surgeons attached to our hospital on permanent basis. Surgeons or specialists comehere and teach on a part-time basis.

MR. CHAIRMAN: What is the nearest hospital for rendering allopathic medicine in Bhubaneswar?

WITNESS: It is one mile from our hospital.

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MR. CHAIRMAN: So, at any timewhen you would not be able to tackleany case you could immediately shift the patient to the allopathic hospital.

WITNESS: Yes, but we can only personally request them to handlethe matter. There is no Government Order that they must take thosecases which will be referred to themby us.

SHRI JANAKI BALLAV PAT-NAIK: Dr. Rao, your college is the only government college of the State. You have said in detail about the functioning of your college. Did you find the funds allotted to your college by the State Government are adequate? Have you ever made any representation for funds from the Centre?

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WITNESS: No. We have been told that health is the responsibility of the State Government and the Central Government never gives any fund to these institutions. So far as these medical colleges are concerned they receive money from the U.G.C. from the fund under their disposal. We do not have such organisations in the Centre so that we can get more money from them and fully equip our college. We do not have X-Ray Plants or X-Ray departments as yet.

SHRI JANAKI BALLAV PAT-NAIK: I think, the State Government should better inform you about the Central aid given to these colleges. This is my suggestion to the State Government Homoeopathic Board that adequate help is given to these colleges by the Centre for various purposes. So you pass on this suggestion to the State Government.

WITNESS: I would rather be happy if the Hon'ble Chairman and the Hon'ble Members of this Committee take note of it so that the Central Government comes forward to our help.

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SHRI JUGAL KISHORE: The question of central aid has been restricted to voluntary organisations. It is correct that when the State runs a college, the Centre does not give anything. In that case the State makes provisions in its own budget while preparing the annual budget. But I may be permitted to mention one thing in this connection that we have made a proposal from the Ministry that in the next Five Year Plan these facilities should be offered to Government Colleges also and the Government should come forward to run the colleges. But for the present such pattern of assistance is applied only to the Private Organisations.

MR. CHAIRMAN: Dr. Rao, how many Homoeopathic Colleges are there in the State of Orissa?

WITNESS: There is another Homoeopathic College at Berhampore which is run by the Co-operative Homoeopathic Societies of Orissa. They started the college at Berhampore, but due to financial difficulties they have not yet got it at a proper standard.

SHRI JANKI BALLAV PATNAIK: Is that Homoeopathic College functioning at all there?

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WITNESS: Yes, it is functioning.

MR. CHAIRMAN: Can you tell me how much is the per capita expenditure for each bed in your hospital?

WITNESS: We have not yet calculated it.

DR. K. NAGAPPA ALVA: Dr Rao, as you are very experienced and qualified yourself aboard I like to know from you about your suggestion as to how we can improve the teaching methods in the Homoeopathic Colleges.

WITNESS: The first thing is this, every Homoeopathic College should have a fully equipped library, fully equipped laboratory and moreover Pathology Department is also to be added. Another factor is about the teaching staff. Our teaching staff, at present, are manned by the persons from different institutions. They have

to undergo training in the summer school just like the subjects on mathematics, biology and chemistry. The Summer Seminar should also be held for them so that they can refresh themselves in the method of teaching, and can formulate some sort of uniform method of teaching as otherwise the manner of teaching and the approach is likely to differ from one teacher to the other. I have an experience that for some years somebody has taught in the Meteria Midica method and some other teachers in some colleges have taught in different methods, but nobody adopted a single method of teaching. My suggestion, in this regard, is that there should be compulsory teaching in schematic method as also in the drug picture method. This would be convenient for them to prescribe independently. As regards organon also, many people have examples during their lectures. Sometimes it so happens that it has become obsolate. At present science has advanced, so it is better not to in a method which was being taught fifteen years back. The other processes of teachings and treatments are enjoying the better results of modern science, but it is not the same with the Homoeopathic system. Anatomy, 't physiology, etc., should be taught in the line of Homoeopathy. Anatomy should be taught in details from the clinical point of view, physiology should be taught from applied science and pathology can be taught from the clinical point of view.

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DR. K. NAGAPPA ALVA: It .. is almost 200 years back when Dr. Hahnemann started the Homoeopathic system of treatment. He had his own concept, he had his own approach and method of treatment. Now I understand, as you have said, that seminars at the national level and also at State level will be necessary forsthose teachers who want to improve the method of teaching in the light of the research in other countries to have a proper orientation in the method of teaching, am I correct?

WITNESS: Yes, I admit your views. Dr. Hahnemann wrote some 200 years back, but what is being taught now i.e. whether his interpretations are being correctly followed. After all we are physicians and the subjects with which we are connected should be taught from the applied point of view. This views had also been supported by Dr. Hahnemann.

MR. CHAIRMAN: Had it not developed after Dr. Hahnemann with the advancement of science?

WITNESS: I am just giving an example. Newton discovered gravitation force in the earth. What more development can be made to that phenomenon of Newton's law? Naturally, only a part of that law is being applied in science.

SHRI BHAOOSAHAIB DHAMAN-KAR: Are there any Alopathic Doctors practising in Homoeopathy in Orissa. If so, should they be allowed to represent in the Central Council of Homoeopathy?

WITNESS: There are two or three Allopathic Doctors practising in Homosopathy after their retirement from service......So, my suggestion is that the Committee should clearly put in the Bill that the Alopathic Doctors would not be required to forego their M.B.B.S. degree but have to forego or surrender their registration- in which they are previously qualified if they want to practise in Homoeopathy.

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¹ SHRÌ BHAOOSAHAIB DHAMAN-KAR: Do you suggest any condensed course for the practitioners in Homoeopathy? 100 A

WITNESS: There may not be any condensed course, but they should have proper training in Homoeopathy from the beginning.

... MR. CHAIRMAN: Dr. Rao, what is the control of the Homocopathic Board that is being exercised on all the colleges in Orissa?

WITNESS: The Homoeopathic Board has no control over them. Only a faculty has been formed in 1958 and after that, in the year 1972, we had our faculty on Homoeopathy.

MR. CHAIRMAN: Can the Board recognise the colleges?

WITNESS: The Faculty can recognise the colleges. The power of the Board have been dedicated through a statutory provision to the Faculty.

MR. CHAIRMAN: What is the power of the Board now?

WITNESS: Faculty is doing everything now. The Board have started making registration.

SHRI JANKI BALLAV PATNAIK: Whether the Faculty is a creation of the Homoeopathic Board or it is a separate Board.

WITNESS: It is a creation of the Homoeopathic Board with the approval of the Government.

SHRI PATNAIK: Has the Berhakpore College of Homoeopathy been given recognition by the Faculty?

DR. RAO: Yes.

SHRI PATNAIK: How many students have passed from that college so far?

DR. RAO: In the first year, 57. They don't have any limitation of seats in their college. In our college the seats are limited. First batch has come out in the month of July last.

SHRI PATNAIK: Are they from your college or from their college?

DR. RAO: From both the colleges.

SHRI PATNAIK: Their college did not function earlier.

DR. RAO: No.

SHRI PATNAIK: Since the students have appeared for the examination on behalf of your college, don't you think that they should be given recognition in the Second Schedule of this Bill?

DR. RAO: I am sorry, this didnot come to the limelight. I would request this Committee and the Parliament to include our college and the other colleges of the State.

SHRI PATNAIK: Do you want your college or the Faculty?

DR. RAO: I want our college and also the other colleges of the Faculty.

SHRI PATNAIK: What is your suggestion for representation though you have given it in your answer—in the Homoepathic Council —50 per cent of the colleges should be recognised? How are they to be selected.

DR. RAO: They can be nominated by the State Governments or the Central Government, or the Heads of the Institutions.

SHRI PATNAIK: What is your concrete suggestion? Are they to be Heads of Institutions or Professors?

DR. RAO: Anybody on the teaching staff.

SHRI PATNAIK: Power should be given to the Centre.

DR. RAO: Yes.

SHRI PATNAIK: According to the Bill the Centre would nominate and not the States. According to you, the Centre would nominate from amongst the members of the college, at least, one member from every college.

DR. RAO: The number of college that all the States should be represented on the Central Council. This 50 per cent may be divided among the States equally, no matter what the number of colleges is in one State: It has to be decided from the academic point of view and not from the point of view of a State Legislature or the Parliament, Legislature is a different set up. Here

tions. SHRI PATNAIK: So, you are in favour of nomination and not election.

we are dealing with academic ques-

DR. RAO: Supposing a State has to send two members. It does not matter whether they are elected or nominated, but the condition is that every State will have two members from the teaching staff.

SHRI PATNAIK: Now that your college is a fullfledged college and it is going to give diploma but it is not recognised by the University, it is only recognised by the Faculty, do you suggest that the University should its own Faculty? DR. RAO: Yes, but everything depends on the University and the State Government to amend the Act to expedite the thing.

SHRI CHAUDHARI: Doctor, we are really very pleased to have you, a qualified and learned witness, before this Committee for giving evidence. On behalf of the Hon'ble Chairman and my colleagues I extend a sense of gratitude to you. The piece of evidence that you have just now adduced before us will really lead us to a great extent to formulate the Bill that is before us. The views expressed by you will definitely be taken into consideration.

I thank you once again.

MR. CHAIRMAN: There is no other witness.

[The witness then withdrew.]

[The Committee then adjourned.]

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Tuesday, the 3rd October, 1972.

(AT BOMBAY)

PRESENT

1. Shrimati Purabi Mukhopadhayay-Chairman.

MEMBERS

Rajya Sabha

2. Shri Sasankasekhar Sanyal	7. Shrí K. C. Panda
3. Shri Bhupinder Singh	8. Shri Sultan Singh
4. Shri N. G. Goray	9. Shri N. P. Chaudhari
5. Shri Man Singh Varma	10. Shri T. G. Deshmukh
6. Shri Debiprasad Chatiopadhyaya	11. Shrimati Savita Behen

Lok Sabha

12. Shri Ziaur Rahman Ansari

- 13. Shri Muhammed Khuda Bukhsh
- 14. Shri Bhacosahaib Dhamankar
- 15. Shri Hiralal Doda
- 16. Shri Nageshwar Dwivedi
- 17. Shri Madhuryya Haldar
- 18. Shri Chiranjib Jha
- 19. Shri Ramachandran Kadannappalli
- 20. Shri Mallikarjun

21. Shri Prasannbhai Mehta
 22. Dr. Laxminarayan Pandeya
 23. Shri Janaki Ballav Patnaik
 24. Shri S. L. Peje
 25. Maulana Ishaque Sambhali
 26. Shri M. Satyanarayan Rao
 27. Shri Umed Singh Rathia
 28. Shri K. Ramakrishna Reddy
 29. Dr. Sankata Prasad

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy,

Secretariat

Shri M. K. Jain, Under Secretary.

WITNESSES

(1) Representatives of the Bombay Homoeopathic Medical College run by the Homoeopathic Education Society, Bombay:

- (i) Dr. Edel Behram, Founder Principal.
- (ii) Dr. C. C. Desai, Officiating Principal,
- (iii) Dr. M. C. Batra, Honorary Society, Homoeopathic Education Society.
- (2) Representatives of the Homoeo Mission, Ahmedabad:

(i) Dr. J. M. Gor.

(ii) Dr. K. R. Thaker.

(3) Representatives of the Homoeopathic and Biochemic Medical College, Amravati:

- (i) Dr. A. S. Dhole, Principal.
- (ii) Dr. Dharmale, Vice-Principal.
- (iii) Dr. Bhalerao, Principal of the Wardha Homoeopathic Medical College.
- (iv) Shri Ghoghre,
- (v) Dr. H. B. Kara Patel.

(4) Dr. Y. Satyanarayana Rao, Government Homoeopathic Dispensary, Nalgonda (A.P.).

(5) Shri K. S. Ramachandran, Asstt. Lecturer, N.G. College, Nalgonda (A.P.).

[The witnesses representing the Bombay Homoeopathic Medical College, Bombay were called in.]

CHAIRMAN SHRIMATI PURABI MUKHOPADHAYAY: Will you kindly introduce yourselves?

DR. M. C. BATRA: With your permission, Madam, I would say that we represent the Bombay Homoeopathic Medical College. The member on my left is the officiating Principal, Dr. C. C. Dessi, M.B., B.S., DMS (Cal), M.F. Hom. (London). On my right is the founder Principal, Dr. A. D. Edal-Behram, M.B., B.S., M.F: Hom. (London), DCHF, a learned man in his own right. I am now the Honorary Secretary of the Homoeopathic Education Society which governs the College. I have been the Principal of the Bombay Homoeopathic Medical College, I have been the Principal of the Lucknow Homoeopathic College and am also connected with the All India Institute of Homoeopathy as being its immediate past President. I am also a member of the Board and

Court here. You may ask any clarifications and my views may sometimes be reflecting my personal views because I am not supposed to come again. Is that all right?

CHAIRMAN: You will come again in your personal capacity. Now, you are representing your College. If you like, you may come later on. DR. BATRA: You have already fixed me for the 7th, at 3.00 p.m.

CHAIRMAN: You have any introductory remarks apart from what you have already told us in your reply to the questionnaire? Have you got anything more to say?

DR. BATRA: Yes, I have studied this.

CHAIRMAN: Please remember that whatever you are telling us will be treated as strictly confidential. The evidence that you give us, please do not disclose it when you go out because it is strictly confidential, till the Report of the Committee is placed on the Tables of both the Houses.

DR. BATRA: Hon. Members, we have studied this Bill. It is a complete Bill in itself except for some dots and dashes here and there. Some of my points I will place before you for your consideration.

On page 2, there is the definition of 'State Register of. Homoeopathy'. I presume that 'State' also includes the Union territories and the Centrallyadministered areas. Then in Chapter II, the number of representatives from amongst the electorate is 5, not exceeding 5. But in the First Schedule, there is a ratio maintained of one to ten thousand. Now I wanted to submit before you a few things. Maharashtra has, at the ¹ moment, 4,500 registered homoeopaths. There are two categories: one is the institutionally trained people numbering 2,688; the other is registered people, numbering 2,014. That is roughly the ratio between the two groups of people. The total is about 4,500. Now this will be augmented year by year by the people who pass out of the institutions. Their number will be roughly 250 per year.

CHAIRMAN: How many colleges and institutions are there?

DR. BATRA: There are seven institutions conducting a three-year diploma course, D.H.B., which used to be two years previously and which has recently been increased to three years. There are two colleges: one is the old existing college, the Bombay Homoeopathic College, which is conducting a four year course, and the other is the Poona Homocopathic College, Poona, which started last year. So, there are nine institutions which bring out on an average 250 people per year. The implication of my submission is that with 2,000 odd people on the roll and 250 coming up every year. it will take you 30 years to come up to your requirement of one representative. Not that I suggest that the Council should be a very crowded one. But at least there should be enough representation because otherwise it will become very difficult to represent all interests, all areas. My submission is that at least for the next few years, say five or ten or fifteen years, you might like to relax this ratio in favour of more representation.

Then sub-clause (b) of the same clause provides for at least one representative from each university. At the moment, there is only one college which is affiliated to the Kanpur University. Once it was affiliated to the Agra University, then it was affiliated to the Kanpur University; then it was disaffiliated, and now again it has been re-affiliated to the Kanpur University. My submission is that the entire Union of India has only one college which has a faculty worth the name, and that affiliated to the Kanpur University. Therefore, if you really wanted this type of people to be duly represented, then you might include a provision for nominating on your Council certain people who are competent enough to represent the interests of the science of Homoeopathy. You can nominate some teachers from the recognised institutions. So, in brief my submission is this. Till such time faculties come up in the universities and it is a long drawnout process; affiliation to a university means going through a lot of procedural formalities it would be worthwhile considering whether you might like to include on your Central Council some teachers from the recognised homoeopathic colleges. That should form a separate, distinct constituency here. Until such time that you do not have the faculties or the university affiliation, you might like to include the boards as an alternative to the faculty. But my suggestion regarding teachers is not a substitute for the provision of university representation. My suggestion for teachers representation and is independent of, and in addition to, what exists now. My suggestion for adding boards and courts is merely a substitute for the universities as long as you cannot have universities at least one in each State and one college affiliated to a university in each State.

Then, on page 3 of the Bill, the proviso to clause 3(2) says:

"Provided that for two years from the first constitution of the Central Council, the President and the Vice-President shall be nominated by the Central Government from amongst the members of the Central Council and the President and the Vice-President so nominated shall, notwithstanding anything contained in sub-section (1) of section 7, hold office....". Now the point that I want to lay before you for your consideration is the period of two years. It rather conflicts with the idea contained in clause 7(1) which provides,

"The President, Vice-President or a member of the Central Council shall hold office for a term of five years from the date of his election or nomination.."

SHRI K. RAMAKRISHNA REDDY: Clause 3(2) proviso is for nomination. Clause 7 applies after the elections.

CHAIRMAN: Mr. Reddy, let him finish. Then we can put questions.

DR. BATRA: So, I think there is a little conflict here. I do not say that it cannot be sorted out. If the wording is made clear, it can be sorted out. Once you appoint a person as President he will hold office under clause 7 for five years. Then if you say that he will hold office for two years, there is some contradiction here. In anv case, I also take this opportunity to submit that the first Council that will be constituted, obviously and presum-. ably will be a nominated one, no matter how much democratic minded we are. So, to give the President such a short life of two years would be really not grasping the requirements of his duties and responsibilities. A lot of powers and duties have been delegated to the President of the Central Council, whether nominated or constituted. To make his life as short as two years would be like changing horses in midstream. So my submission is this. At the bottom of page 2 it is provided:

"Provided that until members are elected the Central Government shall nominte.."; that is, the Central Government will nominate the first Central Council.

But "until members are elected" is a very uncertain term. It is not very specific. If you leave it to the members to sign their own death certificates, that they will form the rules and regulations for the elections, it would slow down the pace of your process. I submit that we should lay down that the first Central Council for the first five years shall be a nominated one, and the Central Government may, if it deems fit, extend the life of the Council for another period of five years or for a period not exceeding five years. Something like this your Legal Department is competent to deal with. I only wanted to submit for your consideration the possibility that if you extend and if you nominate the first Board and will not specify for how long it will be there, there is a possibility of elections being held and all your powers, the thinking, the composite thinking of the Council, might get distorted with the new members coming. It is just as you would like to have a Parliament for a fixed period. The idea is just that. On page 3 in section 2 of clause 6 sub-clause (2), it becomes a consequential change to my suggestion that representation should be given to teachers. To my earlier representation that representation should be given to the teachers of recognised college..

CHAIRMAN: You don't have to deal with consequential changes. If the first thing is accepted, the others automatically follow.

DR. M. C. BATRA: Agreed On page 4 the quorum required is onethird, the quorum of the council as well as committees. It is not always possible to have a multiple of this strength. So it will have to be onethird or the next complete number. It is just an ordinary thing. But sometimes these teachnicalities can be questioned. It may be the spirit but in the letter of the law, if it has to be one-third..

SHRI MALLIKARJUN: The number of the members of the Council, the constitution of the Council, is unknown at present. It may be 50 or 100 or whatever it is. The quorum will be one-third of it. That probably has to be decided according to Schedule.

DR. M. C. BATRA: That is not my problem. My problem is not how many members will constitute the council..

CHAIRMAN: Mr. Mallikarjun, let him please finish first.

DR. M. C. BATRA: On the same page section 2 of clause 9. The Executive Committee shall consist of the President, the Vice-President and not less than five members and not more than 7 members. I submit that to have an executive committee which will act on behalf of the Central Council, five is too small a number considering the vast number of States to be represented. In the light of the latest discussion that we have had about the minimum requirement for quorum, if supposing there are two plus five members in a committee, the quorum could consist of the president and the vice-president and that would be very harmful for the successful working of the institution. My submission is that this number should be increased to the minimum of seven and maximum of 9. That is not much to grant considering that there are so many areas and we, homoeopaths, are not sort of complete personalities.

CHAIRMAN: We have got your point. Instead of five you want to make the minimum 7 and maximum 9. Then next.

DR. M. C. BATRA: Then in clause 10(1) The committees constituted under section 9 shall meet at least once in each year. It does not matter. That is the barest minimum although it does not meet the requirement. But my emphasis is on the Central Council. If you want that the committee should meet according to the requirements and the order of the Central Council as it may so deem fit, you imply thereby that the Central Council will be meeting to decide even these petty issues. So I think the President will have to delegate that authority....

CHAIRMAN: All right, next point please.

DR. M. C. BATRA: Somewhere it is provided that registration shall be done by the Registrar. My submission is that if you leave it to not the registrar only but give it to the President and the Vice-President whosoever he may be, it will protect us against any type of possible malpractices.

Then on page 6, 5(3) (b), here I am only wanting you to consider the possibility that the privileges conferred by any other law relating to the registration of practitioners of homoeopathy for the time being in force in any State shall also ipso facto be enjoyed by them even though this Central Council Act will come into force. Now there is a possibility that the rights given under the State may not be in consonance with the rights given by the Centre. And we are going to have trouble on that account. I would like this clause to be reconsidered in the light of a specific example. In Maharashtra, a person who is registered under the Maharashtra Act, enjoys all rights enjoyed by any medical practitioner. That exists in theory. But it can be enforced and it can be implemented under that. That cannot be allowed under the Central Act. It is quite possible and, therefore, the right given to him under the State Act might conflict with the right under the Central Act. I would request that this clause should be reconsidered, otherwise, as I have explained, it would be of no use.

Then, there is, according to me, a slight omission in this Act. Although the powers have been delegated, the powers are to be delegated to the President, Registrar, etc. I submit that the powers of the President and the responsibilities, etc. expected of him must be statutorily defined because that might lead to some kind of friction, if they are not defined, and CHAIRMAN: That will be done under the Rules.

DR. M. C. BATRA: The rules will vary from Council to Council, and that would lead to complications.

CHAIRMAN: The rules, after they the framed, are to be placed on the Tables of both Houses of Parliament. So no rule can be changed without bringing it before Parliament. It does not depend on the sweet will of somebody.

SHRI N. G. GORAY: You refer to Article 32.

DR. M. C. BATRA: Similarly, I want to submit that the Registrar of the Council must be appointed by the Central Government and should not be at the whims and mercies of others, otherwise he will become a football in party politics. He is a full-time worker who is expected to give legal and regular advice as to what is permissible and what is not permissible And if he looks up to opportunities for patronage, it will not be fair.

CHAIRMAN: You were to come at 3 o'clock again. If you want to take up any extra point in your personal capacity, you can give those points and finish it up.

DR. M. C. BATRA: I have no extra points.

थी सान सिंह वर्माः मैं यह जानना चाहता हुं कि प्रापका कालेज, जो होम्थोपैथी एजूकेशन सोसाइटी द्वारा चलाया जा रहा है उसे महाराव्द्र सरकार से कहां तक इमदाद मिलती है ;

DR. M. C. BATRA: Sir, this college came into existence on the firm assurance given by the Government of Maharashtra that it will make up the deficit involved. Sir, that assurance was given in 1961. The central SHRI MAN SINGH VARMA: I do not want all these details.

DR. M. C. BATRA: They made good the deficiency in 1965.

श्री मान सिंह वर्मा : ग्रापने जो ग्रपना .परिचय दिया था उसमें बताया था कि ग्रापके लेफ्ट में जो बैठे है वे ग्रीकीशिएटिंग प्रिंसिपल हैं, वे एम० बी० बी० एस० है ग्रीर ग्रापके राइट में जो बैठे हैं वे भी एम० बी० बी० एम० हैं। तो मैं यह जानना चाहता हूं कि जो इस समय ग्रीकीशिएट कर रहे हैं एज प्रिंसिपल उनकी होम्यौर्यायक क्वाली-फिकेशनन्स क्या है ;

DR. M. C. BATRA: Dr. C. C. Desai, so far as this question is concerned, has been examined by the Faculty of Homoeopathy, West Bengal, and he has got his degree of D.M.S. He is also M.F. (Hom.) from Faculty of Homoeopathy; London.

DR. C. C. DESAI: I joined the Calcutta Medical College for one year and I was granted a diploma. Thereafter, I went to London and I was R.M.O. for one year at the Royal London Homoeopathic Hospital in 1955-56. There were no other qualifications available at that time and I got these two qualifications then.

SHRI MAN SINGH VARMA: Why did you prefer this line?

DR. C. C. DESAI: Before I joined the M.B.B.S., I had some idea of Homoeopathy and I had a keen desire to study it in a sytematic way. I studied Homoeopathy and immediately went to London.

भी मान सिंह कर्माः क्या ग्राप समझते है कि एलोपैयी झौर होम्योपैयी को मिल कर चलना चाहिये या भ्रलग ग्रलग डेवलप करना चाहिए ; DR. M. C. BATRA: Personally I think, Homoeopathy has got a very vast field. In Homoeopathy we do not bring in allopathy. I am practising full-fiedged homoeopathy.

SHRI M. SATYANARAYAN RAO: Do you suggest any penal provision for practising homoeopathy by those who are practising allopathy?

DR. C. C. DESAI: I would prefer that.

DR. M. C. BATRA: My personal opinion is that in its implementation you will find a lot of difficulties. We have got a clause in the State of Maharashtra for similar penalty. But it becomes difficult to prove them. There was a case which went up to the court.

SHRI MALLIKARJUN: Can you tell me what should be the number of the members of the Central Council in toto?

DR. M. C. BATRA: I imagine anything between 40 and 50 should be more than enough. More than that will really be...

SHRI MALLIKARJUN: I suggest even that will be more; it may be between 25 and 30 which will be more than satisfactory for the proper functioning of the Council. Do you agree with this?

DR. M. C. BATRA: It is a matter of discretion.

SHRI MALLIKARJUN: One more point and that is about collision between the rights of the States and the rights of the Centre. Do you agree to the point that if there is a uniform law for giving education to the students with employment opportunities and restricting registration of the experienced medical pratitioners further?

DR. M. C. BATRA: I beg your pardon; I have not completely followed the question. SHRI MALLIKARJUN: The fact is, you have got a State Board and you have got your own laws of dealing with homoeopathic practitioners. Now the Centre is going to have more and more laws. It is also mentioned that there may be some collision between the laws of the States and the laws of the Centre. So, do you agree to the point that there should be a uniform law for giving institutional training to the students plus putting further restriction on the registered medical practitioners who are experienced?

DR. M. C. BATRA: I have understood that the people should be trained in colleges. So far as the existing people who have interest in practice due to self-training are concerned, if you want to give them a life interest in continuing their practice, I have no objection to that.

SHRI MALLIKARJUN: What exactly should be the number of medical students that will come out every year? What exact number do you want?

DR. M. C. BATRA: I am sorry, this is impossible to be answered by me because it depends upon the number of colleges, how many colleges are to be established and so on.

SHRI MALLIKARJUN: Please tell me how many homoeopathic institutions are there in this State.

DR. M. C. BATRA: I have submitted that there are three institutions carrying on three-year courses and two institutions carrying on four year diploma courses.

SHRI MALLIKARJUN: Do youhave any idea of talking to the managements of all these institutions and evolving a particular system to be adopted for educational purposes to be taken in hand?

DR. M. C. BATRA: If I have understood your question, then I am too small a fry to carry on negotiations but there is a law in the State and there is a body statutorily constituted, and that is the Homoeopathic Board and the Court of Examiners, and the Centre's suggestion for a model uniform syllabus has been referred to them time and again. But there are people with different opinions—that it should be four years for diploma and two or three years for a diploma and so on.

SHRI K. RAMAKRISHNA REDDY: What should be the duration for a diploma?

श्रोमती सविता बहिन : मैं जानना चाहती हूं कि क्या प्रापकी श्रोपीनियम में यह ठीक है कि जो स्टुडेन्ट सीख कर निकलेंगे उसके बीच में जो गेप होगा उसमें जो डाक्टर इधर उधर से डिप्लोमा लेकर प्रेक्टिस कर रहे हैं उनको बेन किया जाय या ग्राप चाहते हैं कि उनको रिफ्रेश्र कोर्स वगरह देकर रेगु-.लराइज किया जाय ।

डा० एम०सी० बत्राः मेरी राय है कि जो एग्जिस्टिंग सेल्फ ट्रेन्ड होम्यौपेंथिक हैं उनको रिफेश्र कोर्स देकर प्रपटुडेट किया जाय ।

SHRI K. RAMAKRISHNA REDDY: What should be the duration?

DR. M. C. BATRA: That is a matter of detail; it may be three years or four years but one must first make sure of the standard of expectation.

श्री सुल्तान सिंह : अभी आपने बताया कि दो साल का कोर्स है. तीन साल का कोर्स है, चार साल का कोर्स है. रजिस्ट्रेगन में कोर्स क्वालीफिकेशन तो होनी चाहिए इसके बारे में आपकी क्या राय हैं ?

DR. M. C. BATRA: The word "qualification" is man-made. It is a man-made ideal but the concept is not. There is nothing divine about it. Qualification is a self-determined..... श्री सुलतान सिंह : ग्रापने चार साल का कोर्स किया रजिस्ट्रेशन के लिए। एक ग्रादमी ने इघर उघर से सटिफिकेट लिया, 'बह भी' रजिस्टर हो गया। तो इसके लिए यूनीफार्म क्वालीफिकेशन होनी चाहिए.।

DR. M. C. BATRA: According to me the qualification that we would be having is the ideal qualification. Today we are having centimetres and paise whereas till yesterday we were having annas and inches. So, this is man made. But I think, since the Homoeopathic Advisory Committee which is a body constituted by the Government of India consists of teachers and representatives of the various institutions and organisations has been invited and since the Central Health Council also has laid down four-year course, that would be the ideal course for the future. And is must also be remembered that this course of a duraton of four yours fits in comparatively well with parallel qualifications with other systems of medicine like Ayurveda and so on.

भी सुल्तान सिंह : इसके माने यह हुए कि चार साल का कोर्स होना चाहिए ग्रौर दूसरों को बेन करना चाहिए ।

DR. M. C. BATRA. This is not so. But I have said that the ideal is this. Therefore, everything else must come nearest to this ideal; everything that we can have nearest to that ideal should be our objective.

DR. LAXMINARAYAN PANDEYA: What should be the tenure for degree courses? Should there be a five year degree course or a four year course?

DR. M. C. BATRA: I have submitted that four years is the minimum for diploma course. If you want graduation I would suggest..... CHAIRMAN: You must give your precise suggestion; please do not argue. According to the Members, they want to know the duration for diploma courses, the duration for the degree courses and the duration for the shorterm courses, that is, refresher courses. You may give the precise reply; please do not argue.

SHRIMATI SAVITA BEHEN: The minimum educational gualifications.

CHAIRMAN: What should be the minimum qualification for a student to have admission in a degree course?

DR. M. C. BATRA: Intermediate Science.

CHAIRMAN: For diploma?

DR. M. C. BATRA: For the four year course Matriculation is the admission qualificaton.

CHAIRMAN: And refresher course?

DR. M. C. BATRA: That would be for three to six months.

CHAIRMAN: Thank you.

SHRI SULTAN SINGH: What is the criterion for admission in your college?

DR. M. C. BATRA: Its precise answer is difficult. The Court of Examiners have prescribed it as S.S.C. as the minimum qualification—equivalent to Matriculation.

SHRI K. RAMAKRISHNA REDDY: What is the present strength of your college?

DR. M. C. BATRA: We get so many applicants that we can afford to choose from Intermediate Science candidates. We have admitted for the last two years on merits.

SHRI K. RAMAKRISHNA REDDY: What is the present strength of your college? श्री तुलतान सिंह : श्राप एडमिंशन ट्रिक्टली ग्रान मेरिट करते हैं या ग्रोर कोई काइटेरिया सै ?

CHAIRMAN: Those Members who want to put questions, please raise your hands; otherwise it would not be systematic.

श्री न सतान सिंह : तो उसके लिए कोई रेकमेंडे शन चाहिए ?

श्वी इसहाक सम्भलीः यह बात तो किसी भी इंस्टीट्यू शन के वारे में कहनाठ.क नहीं हैं।

SHRI SULTAN SINGH: The basic qualification is matriculation. I am asking whether it is strictly based on merit or on recommendation.

CHAIRMAN: Do you go by the marksheet or by any other criteria?

SHRI BATRA: We used to have an entrance examination and interview. We still have the interview. We would like to admit students according to merit because there are more candidates than the number of seats available.

SHRI BHAOOSAHAIB DHAMAN-KAR: You know there are registered medical practitioners of homoeopathy who are graduates in allopathy. Do you want them to continue as registered homoeopaths or do you suggest any examination or refresher course for allowing them to continue as homoeopathic practitioners?

DR. EDAL BEHRAM: This is a very complicated problem. We have so many systems. Bio-chemical medicines and homoeopathy would be better for small towns and villages because they require less equipment. The teachers who are trained would be better useful. Those people should be encouraged in villages and small towns. In some of the big towns you can start

with homoeopathic colleges. Homoeopahty is an expanding science. We talk about allopathy. It cannot be said that the two standards are equal. Now, in a country where people are starving and not getting proper medicine, the biochemistry system would be all right for villages. Your Committee should encourage it and have a separate system for them. That can be done only by encouraging those institutions and by laying down certain rules. As for homoeopathic colleges we can have them in big cities. In cities we can provide for people coming from villages and who want to study homoeopathy. For that hospitals are needed and hostels are needed. Now, owing to financial difficulties there are not many colleges.

SHRI BHAOOSAHAIB DHAMAN-KAR: I have not asked you that. I have asked you specifically whether registered homocopathic practitioners who are qualified in allopathy and if they want to continue, should have some refresher course or should they be allowed to continue as they are without any such course.

DR. EDAL BEHRAM: I was a fullfledged allopath, but for thirty years I did not see anything in allopathy. Then I went to Europe. I studied homoeopathy in England-and excuse my personal singing-I studied in France and Germany and other places. I found that homoeopathy was better than allopathy. I was at one time giving forty to fifty injections per day. Now, for the past twenty years I have not used a single syringe. You should encourage homoeopathy of that type. You should not see allopathy from a coloured angle. Allopathy we are using in homoeopathy, for example, pathology. There are people who say that homoeopathy does not need hospitals.

CHAIRMAN: Please, Mr. Dhamankar wanted to know specifically whether allopaths require training in homoeopathy. Please reply to that. DR. EDAL BEHRAM: He should not be allowed to practise without training.

भी इसहाक सम्भली : मैं यह जानना चाहता हं कि यह देख कर हम को वडी खशी है कि हमारे तीन डाक्टर साहबान जो हैं वे इतने हाईली नगलीफाइड हैं और एम० वी० वी० एस० हैं झौर वे होम्योपेयी साइंस में काम कर रहे हैं। मैं यह जानना जाहता हं कि महाराष्ट्र स्टेट बस्ट बंगाल से कहीं प्रधिक बड़ी है. लेकिन हमको ग्राप ने जो वतलाया होम्योपयिक इंस्टीटयग्रन्स के वारे में, होम्योपेयिक प्रेक्टि-शनर्स के वारे में उन की तावाद वेस्ट बंगाल से बहुत कम है। तो जैसा अभी आपने बताया, यह सिस्टम एलोपथी से कहीं बहतर है तो फिर क्या वजह है कि यहा इतने बकवर्ड ऐरियाज होने के वावजुद ग्रीर इतने पुग्रर पीपूल होने के वावजुद यहां लोगों में इस में कम दिलचस्पी है । वजह पता होने से हम लोग इसमें क्या मदद कर सकते हैं हम सोचेंगे।

डा॰ झदमब्रम : वंगाल तो मदर स्टेट है.होम्योपयी की ।

It is only a question of time. Every system develops geometrically. Every science develops geometrically in popularity. Maharashtra introduced, homoepathy only of late and that is probably one reason. The other reasons prevail in all the States and all the countries. It is due to lack of patronage.

भी इसहाक सम्भली : इसी सिलसिले में मैं यह जानना चाहता हूं कि चूकि भाप एक कालेज चला रहें हैं, एक इतने बड़े एसोशियेसन से झाप ताल्लुक रखते हैं मापका पर्सनल एक्सपीरियेंस भीर माप, का तजुर्बा क्या बतलाता है कि क्या काफी तादाद में यहां ग्रेजुएटस भीर एजूकेटेड परसन्स की दिल-चस्पी होम्योपथिक सिस्टम में है ? मगर नहीं है तो क्या वजह है कि ग्रभी तक उन के पास यह साइंस नहीं पहुंच पायी है या सरकार की तरफ से कोई दिलचस्पी इस में नहीं ली जाती है या उस की तरफ से कोई इंकरेजमेंट

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नहीं मिलता है यह मैं जानना चाहता हूं क्योंकि ताज्जुब होता है यह देख कर कि इतनी बड़ी ग्राबादी है ग्रौर यहां होम्योपयी की फील्ड में इतनी कमी है।

डा० झदमबम : वजृहात तो वही हैं कि जो ग्राप ने बतलाया और वे सव ग्राप को मालूम हैं।

CHAIRMAN. Will you please confine yourself to questions only without preamble? Secondly, please do not repeat the questions already put by others.

SHRI JANAKI BALLAV PAT-NAIK: You referred to the ratio of representation. What, in your opinion, should be the ratio of representaion?

SHRI BATRA: I think 1 to 5,000 would be just right.

SHRI JANAKI BALLAV PAT-NAIK: My second question is this. I am told that you belong to the All India Homoeopathy Association, Bombay Branch. Has your Association ever felt the need to request the Bombay University for according a separate faculty for homoeopathy?

SHRI BATRA: Our College did it, but we were denied that facility.

SHRI JANAKI BALLAV PAT-NAIK: Is there any move for according recognition to such a faculty as homoeopathic medicine?

SHRI BATRA: No. We approached the University of Bombay and they refused it.

DR. BATRA: It is because you cannot be affiliated to Poona when you are in the jurisdiction of the Bombay University. Still we went to the extent of requesting the Poona University but we did not succeed.

SHRI JANAKI BALLAV PATNAIK: You have said in reply to the question No. 13 of the questionaire that the State Government has discontinued their grant because of the change in the policy. What was the policy change?

DR. BATRA; That question could be referred to the Ministry proper. But so far as we know, the question before the Central Ministry was that the under-graduate teaching institution should become the responsibility of the State Government and that the Centre would be interested only in post-graduate institutions. That is why institutions like ours who were running a four-year diploma course had to be told that hereafter you must approach the State Government for grants and that they take their hands off.

DR. LAXMINARAYAN PANDEYA: Have you got colleges attached?

DR. BATRA: Yes.

SHRI K. C. PANDA: Since you are a member of the Board, have you tried with the Maharashtra Government to open a homoeopathy college, either a degree college or a diploma college?

DR. BATRA; During the last two or three years, our ship has run on rough grounds so badly that we had to assure the Government of Maharashtra that should they be interested in taking over our institution (our assets are to the tune of Rs. 30 lakhs) and would be ready to develop it, we would surrender it without any conditions or on conditions to be prescribed by them. That has been repeated times without number and I repeat it here also.

डा० लक्ष्मीनारायण पांडेय : मैं जानना चाहता हूं कि ग्राप एक कालेज रन करते हैं तो ग्राप के कालेज के साथ एक वेल इक्विण्ड हास्पिटल भी होगा । तो वहां जो लड़के पढ़ते हैं उन को प्रक्टिकल के लिए कौन-कौन सी फैसिलिटीज हैं । एक्सरे मधीन; माइ-कासकोप या ग्रीर कोई दूसरी चीजें रिसर्च वर्क के लिए उन के पास हैं या नहीं ?

DR. BATRA: ग्रभी तक हम रिसर्च वर्फ उन को नहीं दे सके। हमारा जो ग्राब्जेक्ट है। As I submitted before, for the last three years it has been very difficult to run it as a teaching institution even and therefore we cannot afford research also.

DR. LAXMINARAYAN PANDEYA Have you all those facilities?

DR. BATRA: We have the minimum facilities.

DR. LAXMINARAYAN PANDEYA: What do you mean by 'minimum facilities'?

DR. BATRA: We have got microscope and X-ray facilities, one for every two students. We have the privilege of taking you there tomorrow.

DR. LAXMINARAYAN PANDEYA: What is the strength of your professors and lecturers?

DR. BATRA: We have got 40 to 45 teachers on our pay-roll. Generally, the student-teacher ratio is one to one for admission. Our admission is restricted to 50 every year.

CHAIRMAN: What do you mean by 'one to one ratio in admission?'

DR. BATRA: One teacher on an average for one new admission. That is there,

CHAIRMAN: How many teachers have you got?

DR. BATRA: About 40.

CHAIRMAN: What is the total strength?

DR. BATRA: It is related to the new admission. We have got 50 new admissions.

DR. SANKATA PRASAD: I want to know whether bio-chemistry should be allowed to be practised along with homoeopathy.

DR. BATRA: That should be allowed. In any case, whether you allow or not, they are practising both.

DR. SANKATA PRASAD: Is biochemistry part of homoeopathy?

DR. BATRA; It is complementary.

DR. SANKATA PRASAD: Therefore this should be included in the syllabus?

DR. BATRA: Yes, in Maharashtra it is included as a part of the sylly bus,

SHRI N. P. CHAUDHARI: What is the scope of surgery in homoeopathy?

DR. BATRA; Surgery is surgery and homoeopathy is a form of medicine. I mean to submit that after all, surgery involves some mechanical procedure (besides diagnosing a case.). which means surrendering the case to the surgeon. It involves a surgical technique, a workmanship, and homoeopathy is essentially a system of medicine.

SHRI N. P. CHAUDHARY: You do not teach surgery in your college?

DR. BATRA: We are teaching surgery. The border-line between medicine and surgery is so thin that it is very difficult to say where medicine finishes and where surgery begins. That is why I was going to submit that during the last few years, especially with the advancement of the surgical science and procedure and technique, medicine is yielding day by day to surgery. Surgery is encroaching upon fields. Why does the conflict new come? It is because homoeopathy has many times helped people who have been doomed to surgical techniques, the dangerous procedures. We have stepped in and we have saved them. That is why the impression that where there is homoeopath, there is no surgery. There may be occasions when surgery and homoeopathy may have to collaborate. But homoeopathy has a vast field, a much more vast field than any other type of medicine, whether it is disease of eye, tooth, this or that.

SHRI N. P. CHAUDHARY: Do you have adequate arrangement for surgery in your college?

DR. BATRA: We have got a 30bedded homoeopathy college hospital placed at our disposal by the Government of Maharashtra. We have to supplement it. It is a small hospital. It cannot have every facility or every speciality.

SHRI N. P. CHAUDHARY: I am talking of teaching.

DR. BATRA: Surgery we teach there. To supplement it, we send them to allopathic hospitals.

SHRI MALLIKARJUN: Kindly tell me what is the number of beds attached to your institution, what is the number of students admitted, what is the number of doctors you produce every year, what are the laboratories facilities you provide and what are your means apart from Government aid?

CHAIRMAN: They have already stated about the ratio of the new admission; they have replied to the whole question. No more questions please. And we are visiting the institution on the 5th.

SHRI N. G. GORAY: On behalf of the members of this Committee and the Chairman, I would like to extend a vote of thanks to you for the trouble you have taken to come here and explain to us your various points of view. I am quite sure that whatever you have said will be given the best possible consideration, and about the suggestions you have made, so far as the Bill is concerned, we shall try to accommodate them.

(The witnesses then withdrew.)

[The witnesses (Dr. J. M. Gor, Secretary, Homoeo Mission, Ahmedabad and Dr. K. R. Thakar, Homoeo Mission, Ahmedabad were called in.] CHAIRMAN: Will you please introduce yourselves?

DR. J. M. GOR: I am Dr. J. M. Gor, Secretary, Homoeo Mission, Ahmedabad, Gujarat State. My colleague is Dr. K. R. Thakar. He is also from the Homoeo Mission, Ahmedabad.

SHRI MAN SINGH VARMA: What i_s this Mission? Is this an association?

DR. GOR: This mission is an association rendering free and cheap medical service to humanity in the State of Gujarat and elsewhere.

CHAIRMAN: Dr. Gor, will you please let us know your qualifications?

DR. GOR: I am a certified scholar of the Grace Medical Mission and also a certified scholar of the Homoeo Mission.

DR. THAKAR: I shall introduce myself. I started practising homoeopathy as early as 1934 in Bombay. But unfortunately once I had the very unpleasant experience of hearing personally that there were so many quacks like Dr. Thakar. That induced me to rise up to blot out the idea of quackery, and I joined the National Medical College of Bombay and became a Licentiate of the College of Physicians and Surgeons, Bombay in 1939. I have participated in many all-India Congresses and I always kept up my best and enthusiasm for the cause and uplift of Homoeopathy. I have been practising purely homoeopathy. I have also worked as the Medical Officer in the Raj Bhavan in Ahmedabad. I have treated Mehdi Nawaz Jung, who was very much homoeopathic-minded, and Tera Begum also.

CHAIRMAN: Dr. Gor, you have said in your statement that all the privileges enjoyed by the practitioners in the State must the extended to the homoeopathic practitioners in the Central Register or any other Register. What are the privileges that you enjoy now?

DR. GOR: My submission to you is that in Bharat, homoeopathy came through lay homoeopaths, they were all self-trained. There are more than lakhs of three people practising homoeopathy to-day in India. My submission is that a very strict, hard and fast rule should not be thrust upon them whereby there will be a handicap for them in rendering such a cheap medical service which is most efficacious, most harmless and which has been appreciated by Mahatma Gandhi, out President, Rajaji, Sardar Vallabhbhai Patel and others.

SHRI N. G. GORAY: What are the privileges you enjoy? Your answer does not make that clear.

DR. GOR: We must be permitted to enjoy the same privileges which are extended to the allopathic physicians and ayurvedic physicians in the land, and there should be no discrimination.

Then there is a provision in the Bill that practitioners having more than five years' practice should be automatically registered. What I submit is that some States have registered in 1952, some States have registered in 1963. Now when the provision regarding five years' practice comes into force. I submit that the States which have not registered these homoeopaths must also be permitted to register them. And not only that, those States which have already registered them, must also be permitted to register all those who have got five years' practice and then close the chapter altogether thereafter.

SHRI MUHAMMED KHUDA BUKSH: All those who have only five years' practice, without any kind of test should be admitted in the Register?

DR. GOR: My submission is, yes. Let me submit that this institutional qualification is still not the last word. The so-called institutional qualifications are recognised in one State while they are refused recognition in an127

other. For instance, the D.M.S. is re cognised in the State of Bengal only. The Gujarat Legislative Assembly threw it away and they refused to register the D.M.S. and such other diplomas of Calcutta. It was only after an official notification issued by the State Government that this diploma was recognised after 1983. Similarly, Rajasthan which recognised recently homoeopathy, still refuses to recognise the D.M.S. and such other qualifications, though they have recognised 38 diplomas of other States. So to be guided only by certain diploma existing at present is not upto the mark. What I submit is that after the formation of the Central Council, the Central Council should be permitted to decide what diplomas or degrees deserve to be recognised for the whole of Bharat. I have seen that in the second schedule just now that the proposed Bill includes several diplomas of various States. Firstly it will not be advisable according to my view to recognise these diplomas at the Central level because on this ground even various States have refused to recognise such diplomas. If one or two States have recognised that diploma, it cannot be universally recognised by other States or the Centre.

SHRI MUHAMMED KHUDA BUKSH: That the Central Council should bring in all these things into one and then recognise it and after that recognition is obtained, it should have an all-India status....

DR. GOR: That is correct.

DR. K. R. THAKAR: I ask: What is DMS? I want to know this. I would like to be enlightened by the Parliamentary Committee as to what this DMS itself is. Is it a homoeopathy qualification or is it allopathy qualification or is it just a qualification having come into existence....

SHRI K. C. PANDA: We want your suggestions instead of giving an opinion.

DR. K. R. THAKAR: What is it, I do not know it myself. In Madras it

is an allopathy qualification. DMS now in Calcutta, most of the doctors practising homoeopathy who have always claimed. This is an allopathy qualification so far as I know. But somehow or other this has been given a colour of homoeopathy qualification and everywhere DMS, those holding DMS qualification, always think that everything superlative belongs to them, they are the only competent and only clever homoeopathy doctors, while a man of my status having been practising for the last 40 years exclusively homoeopathy, though I was a Government servant, but in my private practice I have always adored and admired and always loved to treat myself and to treat others and to make more people homoeopathy minded. That is how even today in my register in my State I am left in lurch, I am in the list of non-qualified doctors. What does this mean? I want to know myself what this DMS means.

SHRI MUHAMMED KHUDA BUKSH: Diploma in Medicine and Surgery.

DR. K. R. THAKAR: That is an allopathy qualification.

CHAIRMAN: Dr. Thakar, without osking Members any question, if you have got any new point to make. please do so.

DR. THAKAR: This is my point

CHAIRMAN: We have understood your point on DMS.

DR. K. R. THAKAR: This DMS is not particularly allopathy qualification of Calcutta.

CHAIRMAN: Don't be obsessed with Calcutta DMS. Have you got any other point?

DR. K. R. THAKAR: The point is this, so many diplomas that the present Bill proposes to recognise at the Central level, what I personally submit is that this very diploma was thrown away by the Legislature of GujaratCHAIRMAN: I do not think you are fit to reply to those points. We will close the evidence. If you do not have any new points, it is better to end the evidence, because I do not think you have come prepared and have gone through the Bill. Anyway, I do not want to shut out the Members. If they have any questions to ask, they may do so.

DR. GOR: My submission to honourable Members is....

श्रीमती सचिता बहिन : ग्राप दोनों डाक्टर साहवान ने कहा कि सेक्ट्रन कौसिल बो बने बह सारे रूल्स कौर रेगूलेशन्स को तय करे, तो उस सेन्ट्रल कोसिल के सामने रखने के लिए ग्राप दोनों के पास क्या सुझाब हैं यह हम जानना चाहते हैं।

CHAIRMAN: Savita Behenji, they have given their points. Do you want to elicit their opinion about any new point? If you want, you may do so.

DR. GOR: Another submission is as proposed in the Bill, only those holding institutional qualifications can become members of the Central Council. This is a serious injustice according to us because the so-called institutionally qualified practitioners are existing in a very microscopic minority, and if they are only to be included in the Central Council, the fate of homoeopaths and homoeopathy will not be safe. We are not only marred, but blackmailed as quacks. This wav only registered practitioners of homoespathy who have kept the banner of Homoeopathy fly flying in Bharat heavy odds should not be against made to suffer any more in the interest of justice. On behalf of 3 lokhs of homoeopaths of Gujarat I urg. honourable Members to bear this salient fact in mind that in a democracy it is the right of every practitioner and every individual to protect

his own rights and privileges So my submission is that it should not be the monopoly of the so-called institutionally qualified persons only to represent all these 3 lakhs of people in the Central Council Practitioners having 10 years practice must have a place in the Central Council whether they are qualified or not.

CHAIRMAN: Dr. Gor, may I remind you, in your reply you have stated— "It is advisable that all homoeopathy practitioners should not be allowed to practise other than homoeopathy system of medicine. Any homoeopathy practitioner who practises other than homoeopathy science should be penalised and his registration should be cancelled." This is your suggestion..

DR. GOR: Provided that if allopathy practitioners and other practitioners of ayurved, if they practise in homoeopathy also, then homoeopathy practi--tioners should not be penalised for practising allopathy or ayurved. The ultimate object of every pathy is to treat patients and to heal unhealthy people.

DR. LAXMINARAYAN PANDEYA: In other words, do you mean to say that homoeopaths should only practise homoeopathy and allopathic practitioners should only practise allopathy?

DR. GOR: Yes. I submit that homoeopathy should be pure homoeopathy and allopathy should be pure allopathy.

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Then, the proposed Bill states that so many members should be taken according to their number from each State. Some States have registered only 200 or 300, some have registered 10,000, some very few. Now, will that be a fair representation? I do not understand. According to my submission, it will be fair and just if each State is allotted a particular number, so that every State can be fully represented and there will be a fullifiedged Central Council. SHRI MUHAMMED KHUDA BUKSH: Numerical strength in the State should also come into the picture? Supposing, West Bengal has 'X' number of homoeopaths and another State has 'Y' number, do you think that there should be a parity between them?

DR. GOR: Certainly. This is democracy. If full representation is not given to one State, then there is likely to be partiality and lack of impartialiy. There are homoeopaths in all States. But they are not registered..

SHRI MAULANA ISHAQUE SAM-BHALI: Including Nagaland?

DR. GOR: Yes. In Gujarat there was registration in 1962. Many people have been left out.

Then, I draw the pointed attention of hon. Members to clause 15(2), which says:

"(2) No person, other than a practitioner of Homoeopathy who possesses a recognized medical qualification and is enrolled on a State Register or the Central Register of Homoeopathy,—

(a) shall hold office as Homoeopathic physician or any other office (by whatever designation called) in Government or in any institution maintained by a local or other authority;...."

The main condition put forward is that he must be qualified. I submit that who is to be treated as qualified? We are enacting a Central Act. But before enacting such an Act we have to understand and decide how and whom to recognize as qualified. According to my understanding, all these degrees and diplomas are in the lurch —not a final word. The Central Government has never approved any course or any degree or diploma so far. So before enacting the Central Act, all these degrees and diplomas mentioned in Schedule II deserve to be scrutinized and approved by the Central Government after formation of Central Council.

CHAIRMAN: Thank you. If you have got any other point, please write to us.

SHRI PRASANNBHAI MEHTA: On behalf of the Committee, I thank you for taking pains to appear before the Committee and give your evidence. The Committee will give due consideration to your considered views. Thank you.

DR. GOR: On our behalf and on behalf of all 3 lakhs homoeopaths of Bharat, all the State, and Homoeo Mission, we also thank all hon. Members. I sincerely thank the President and Hon'ble members for giving us a patient hearing.

(The witnesses then withdrew.)

CHAIRMAN: Since there is time and since the next witness has not come, may we have the benefit of the evidence of Dr. Jugal Kishore on the other points about bio-chemistry and chemistry.

SHRI MALLIKARJUN; First we want to hear what is the difference exactly between the two?

[The witnesses Dr. A. S. Dhole, Principal, H and B Medical College, Amravati, Dr. Dhumbe, Vice-Principal, Dr. Bhalerao, Shree Gogare, Dr. Kare Patel were called in.]

CHAIRMAN: Friends, the evidence which will be recorded will be treated as strictly confidential. So, please do not discuss the points about the meeting here outside.

DR. DHOLE: I am very thankful to the Committee because they have been entrusted with this very important Bill and they will see that it is enact-

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ed by Parliament for the whole of India in the interests of the sick and ailing humanity. The Bill is in the interests of the sick and ailing humanity. As such I am overjoyed and I am presenting the case of homoeopathy before your honour.

I submit that this is a moment which comes but rarely in history when we step out from the old to the new, when the age ends, and when the soul of a nation long-suppressed finds utterance. I have given in my memorandum the preamble. It is expedient to consolidate and make a law relating to the regulation of qualifications and registration of homoeopathic and biochemic practitioners in Federation of India, i.e., Bharat, with a view to encourage the study and spread of the H and B system of medicine on the principle of "Similia Similibus Curendown by Dr. Samuel ter as laid Hahnemann in his Organon V edition and for its propagation on the above, principle of therapeutics in the interests of the sick and ailing persons. There are three kinds of treatment only. That which is contrary to the cause. That which is contrary to the disease. That which works both against the cause and against the disease. . . .

SHRI MAN SINGH VERMA: On a point of order, will he be allowed to read the whole thing?

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CHAIRMAN: No. Dr. Dhole, since you have circulated the memorandum well in advance, we have got it already and your reply is also with us. Please do not read the whole of it. You only tell us the salient points, any new points which you have not mentioned in your memorandum.

DR. DHOLE: It is seen in the third, kind of treatment that vomiting is to be cured by that medicine which causes vomiting and diarrhoea by that medicine which causes purging. So also slight burn can be cured by heat; ing the burnt part on fire. This treat;

ment though not contrary to the disease works against the cause and also against the disease and this is homoeopathic treatment. Because the points involved, according to me....

CHAIRMAN: It is with us. We are already benefited by the suggestions you have given. If you have any new points to make, please do so. Do not read this whole thing. Many of the Members would also like to ask questions.

WITNESS; I have submitted this memorandum with the required corsections in the copy of the Bill, with all the other points. The qualification about homoeopathic education as required under the recommendations of the Homoeopathy Inquiry Committee are a degree course. The diploma courses, the so-called DHMS and all others-the principle 10 diploma courses-they are not acceptable to the generation, to the standards, to the approach and to the educational considerations. When there is a via media found out, when there are no degree institutions, when the diploma education is to be implemented and that foo the DHMS which makes a homoeopath an allopath is there, I say, the DHMS or the diploma education is not the requirement of the nation. That will make sub-standard people. So also, it is a very clear cut idea that Homoeopath is a physician and physicians only, and they cannot be surgeons. The outlook is different. When we become a physician, naturally we should become the best physician, with an up-to-date standard. For that, we must find out that the admission qualification should be the higher secondary stage with the science subjects taken to the four-year degree course. I say that hospital which have been accepted as the principal requirement for the allopathic school of thought are not the requirements for homoeopathy because we make ourselves the best physicians and the requirements of the hospital in homoeopathy are only for two thingsbed-side attendance and clinical

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observation. Emergency and epidemic patients are not allowed by law to be treated in any other hospital than the Government hospital. That is why in homoeopathy chronic cases do not require hospitalisation. We can treat chronic cases with hundred percent success. Homoeopathy has taken root from the time of Dr. Samuel Hahneman. It has been progressing without Government aid. Ours is the only Government which is bringing this Bill forward as а guiding principle to the world, which is creditable to us. Hospitals on allopathic pattern is not the requirement. Further more, Dr. Samuel Hahneman's system came first, hospitals came afterwards. Sir John Veer was a homoeopath. popular the hospital came later, Dr. Hering came first, the hospital came later. The crux of the thing is that hospital for homoeopathic patients is only the two things-bed-side attendance for and clinical observation. We should practise on the principle laid down by Dr. Samual Hahneman. I say that the adulteration in the considerations of principles of homoeopathy and medical science will not be beneficial to the sick, if we compromise on the principle of homoeopathy.

Thank you very much. I am ready to answer any questions.

श्री चिरंजीय झा: मैं जानना चाहता हूं कि क्या ग्राप वैक्सीनेशन के पक्ष का समर्थन करते हैं ?

WITNESS: Vaccine therapy and serum thereapy are Homoeopathic and it has been badly implemented. Wherever there is the homoeopathic principle, it is acceptable.

श्री चिरंकी कसा : दूसरी कात में यह जानना चाहता हूं कि होम्योपथी में बहुत सी इंजेक्सन्स की दवाइयां तिकली हैं। क्या भाष उनका समर्थन करतें हैं ?

WITNESS: Homoeopathic medicines are given on the principle of dynamic potentisation. Dynamic potentisation is the minimum dose, the minimum fraction of the molecule of a substance. Whether the materialistic world knows that fraction or admits it, it is a question under consideration. We do not want that consideration ' because we see its effect on the patient after the maximum fraction of a dose is administered to the patient. Unlike in respect of injections and any other medicines, repetition " of homoeopathic doses do well. Medicines administered by injection are not Homoeopathic ways of treatment: : .0.4

SHRI MALLIKARJUN: Kindly tell me the number of students you admit every year in your institution, the number of doctors you produce every year, the number of beds attached, and also how far you are justified in mentioning that acute and chronic diseases do not need any hospitalisation.

WITNESS: The number of students to be admitted every year, according to the Government order, is 50 in the first year. The course is of three years. These 50 students are deemed to pass from time to time in the first, second and third year and ultimately 50 students pass in the final year.

SHRI MALLIKARJUN: How are you justified in mentioning that an acute and chronic case does not need hospitalisation?

WITNESS: Acute and chronic cases, under the homoeopathic treatment, do not need hospitalisation. Acute diseases based on miasmatic conditions do not require hospitalisation and they are cured immediately by homoeopathy. Death and chronic diseases, incurable diseases, are only possible when stronger action on the body is done and when the body does not react or when it has a weakened reaction. If there is a weaker reaction, then death and incurable disease are possible. CHAIRMAN: It is a very good principle. In that respect, a chronic case continues with the life of man. It starts, it continues and it does not end. So, the chronic nature based on ancestral conditions, family heredity, living attitudes of man, all these things make a chronic patient and a chronic illness and man lives with Now curing the chronic element. that element is the factor which is required to be attended to by the doctor, and the doctor must have a Now chronic clear idea about it. cases are not cured by any system other than homoeopathy and homoeopathy has cured 100 per cent chronic cases because the basic consideration is psora, sycosis and syphilis. some of 'the' so called Because Homoeopaths, right from the beginning, have made such a mess of the whole thing telling people that psora is a representation of bacilli and parasites, in that case it is an alarming thing, that they are not ready to accept the science of homoeopathy. We hold that there are only six chronic diseases--psora, sycosis, syphilis, psora-sycosis, psychosissyphilis and syphilis-psora,-and they do not require hospitalisation. and the state 11.1

SHRI MALLIKARJUN: Kindly tell me whether you are satisfied with the present educational system in homoeopathy in your State in particular and in the whole: country in general.

DHOLE: Without Govern-DR. ment aid, people have started it with much sacrifice. For 12 years we did not receive any aid. There were diploma courses to begin with and we have started courses to extend homoeopathic aid to every, village. An allopathic doctor after spending so much money does not want to go to the villages. We go to the villages and the people are satisfied. The basic question is the regional language in the tutions in the course. The present system of education is in the regional language and is quite satis-factory. We can go from the threeyear diploma course to four years. There is no bar....

SHRI MALLIKARJUN: In the three-year diploma course, do you expect that all the subjects will be covered?

DR. DHOLE: Whatever subjects are required for a homoeopathic physician are covered. We want a physician's education in every respect and we are satisfied with it.

SHRI MALLIKARJUN: You are covering the organon principle also?

DR. DHOLE: Yes.

SHRI BHAOOSAHAIB DHAMAN-KAR: You know, in Maharashtra and other parts of the country, there are allopaths, graduates and post-gradudates,' who are practising homoeopathy. They have learnt homoeopathy by experience. Do you want this Bill to prohibit them from practising homoeopathy?

DR. DHOLE: Not only prohibited but their registration in the allopathic register should be cancelled. They have created such a mess in homoeopathy that they have proved dangerous to Homoeopaths.

SHRI BHAOOSAHAIB DHAMAN-KAR: The Bill provides for the experienced people to practise homocopathy without any institutional training. Do you feel that these allopaths who have knowledge of medical science are more dangerous than those who have no knowledge but who will be allowed by this Bill to practise because of their experience?

DR. DHOLE: Experience is best if it is based on principles. But if the experience is based on without principles, then it is dangerous.

CHAIRMAN: You are not replying specifically to Mr. Dhamankar's question.

SHRI BHAOOSAHAIB DHAMAN-KAR: My question is this. There are allopaths, graduates and post-

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graduates, who practise homoeopathy exclusively; they do not practise allopathy at all. Do you want them to be banned?

DR. DHOLE: Exactly. That is why I said in the beginning that homoeopathic medicines can be used by allopathic doctors also.

CHAIRMAN: That is no reply. You should say "yes" or "no". If an allopath practises homoeopathy without the requisite institutional training, are you going to ban it or not?

DR. DHOE: They must be banned.

SHRI BHAOOSAHAIB DHAMAN-KAR: If an allopath has the requisite training, still do you want him to be banned?

DR. DHOLE: If he de-registers himself from the allopathic register, then he is acceptable.

DR. LAKSHMINARAYAN PAN-DEYA: You have said that the D. H. M. S. course is not satisfactory. Why do you find it not satisfactory?

This D. H. M. S. DR. DHOLE: course has been drafted by an ad hoc committee. Dr. B. K. Sarkar was the originator of this course. There also to begin with and to end with, more stress has been given on those subjects which are not homoeopathic subjects. And in the end, the subjects which are to be taught in the final year lead the student to become an allopathic man, Furthermore, the insult is, Dr. Sarkar has said that this is not a scientific way of treatment, it is a methodology only. To say that homoeopathic science is a methodology only is an insult. Science is a thing which is based on experience and experience goes to make a scientific principle. As such if homoeopathy is not a science, well, then, say so and we are ready here to talk on merits. If it is a science then accept it on the merits. Furthermore, none of the States, even

those who are members of the Advisory Board, has accepted this course for tuition in their colleges. They have again made compromise while making any course for purposes of grant only and not for purposes of tuition in homoeopathy. This is my charge in my memorandum.

SHRI SHANTHA PRASAD: Botany, biology and surgery etc. are inoluded in the syllabus of homoeopathy. Is it not advisable if orgenism and anthropology are included?

DR. A. S. DHOLE: Biology is required not to the full extent. It is a requirement to the need of homocopathy, and to teach pharmacopoea. Botany is somethings. Surgery is not at all required. Whoever poses that there is surgery in the college, he is making some deception. It is not a requirement. I say we are physicians only. We should be physicians only and should be trained as physicians only and nothing else.

SHRI SHANTHA PRASAD: It means it should be more organica.

DR. A. S. DHOLE: Organica is the principle and materia medica is the practice. If this principal can prove the practice, let anybody say that the principle is useless.

श्री मान सिंह वर्मा : डा० साहब, प्रभी मापने वताया कि सर्जरी होम्योपैथी का रिक्वायरमेंट नहीं है। तो मैं यह जानना चाहता हूं कि ग्रापके वे स्टूडेंड जो ग्रापके कालेज से पढ़कर जा रहे हैं ग्रीर जिनको सर्जरी के विषय में कुछ नहीं वताया गया है, जब वे प्रैक्टिस करेंगे तो जब सर्जरी का केस प्राएगा, दबाग्रों से काभ नहीं हुआ है, सर्जरी पढ़ाई नहीं गई है, वे केस रिफर करेंगे लेकिन रिफर करना चाहिये इसको वे केसे जान सकते हैं जब कि उनको संजरी का नहीं होगा। DR. A. S. DHOLE: The diagnosis of the surgical diseases must be taught in the homoeopathy course and when the surgical case comes, he should, at the will of the patient be directed to go to the surgeon. I have included this in my memorandum.

SHRI K. C. PANDA: You have said about planning and all that. What is your opinion, whether you want us to have a Central Research Institute in the country and they should impart some post-graduate training so that those candidates will be made suitable for teachers in the country elsewhere?

DR. A. S. DHOLE: Right. The first lawyers were created by those people who were not lawyers. So also we are yet to become post-graduates and where will be the post-graduates? Allopathy graduate cannot be a graduate for homoeopathy....

SHRI K. C. PANDA: Cannot we foresee all those things later on and make rules?

DR. A. S. DHOLE: What is the necessity? When the urgency is not there, when the tuition is not there, when the man does not exist as a post-graduate? Make a graduate, open a graduate course and then open a research institute and postgraduate course. If you have no money, then please find out a viamedia.

SHRI K. C. PANDA: Is your College a Government College?

DR. A. S. DHOLE: It is a public trust. Government does not pay anything. Our Government has never cared to spare anything to this institution. Of course, we do not blame the Government.

SHRI K. C. PANDA: Don't you think that the State Government must manage at least one college in the State? DR. A.: S. DHOLE: When there are hundreds of colleges in Arts, Science and Commerce in every district, why should it be restricted?

SHRI MALLIKARJUN: You mentioned that homoeopathy medicine is based on some six principles or something like that--that I have for gotten. Can you tell me what are the causes of it? And do you believe in them?

DR. A. S. DHOLE: I have said that there are only six chronic diseases and I have said that the bacillus, the parasites, they are not the causes and bacille parasites comes to help, cure. You may not admit this now because the world is telling you that bacillus the creators of these diseases. are Homoeopathy can prove you that that bacillus are helpful to the cure of man. Bacillus are not the causes of disease. It is only a condition of the body taken from ancestry, developed into the man by his physical, financial, atmospheric and living conditions, all these things, to make a disease; thereby I should say that bacillus can never be a cause of any disease. On the contrary they exist the cures, they are the helpers to cure the diseases.

SHRI MALLIKARJUN: Do you mean to say that all the chronic diseases are due to....influences? Don't you believe that there is a cause for every disease? That means your homoeopathy medicine is....

DR. A. S. DHOLE: It has no relation with homoeopathy medicine. Homoeopathy medicines differ from individual to individual. Every individual has got his own individual record of his disease. When man differs from every body, medicine also differs.

SHRI MALLIKARJUN: Whether that particular condition is only due to ancestry or due to any cause? DR. A. S. DHOLE: The question is very nice. I would invite attention of respected Members to this. He says syphilis is only due to....organism.

DR. A. S. DHOLE: As far as this disease is concerned, it is a disease which has got nothing to do with organisation, it is a State.

CHAIRMAN: Do not reply to that question. It has got nothing to do with the Bill. The witness has already explained these points.

श्री झा: डा॰ साहब, ग्रभी ग्रापने जो कुछ कहा है उससे हमको यही लगा कि होम्योपैयी के ग्रन्दर होम्योपैयी लाइन को छोड़कर दवा की ग्रीर किसी पढति को ग्राप बर्दाक्ष्त नहीं करना चाहते, ग्राप चाहते है सिमुलस सिमुलाइ' के सिस्टम के मुताबिक दवा की जो पढति है उसी के ग्रमुकूल व्यवस्था हो । मैं ग्राप से जानना चाहता हूं कि वायोकेमिक मेडिसिन्स जो हैं वे भी इस सिद्धान्त के ग्रन्दर ग्राती हैं ?

DR. A. S. DHOLE: The question is very nice. He says that I am an advocate of homoeopathy. I have explained in my memorandum that if the cure is to be established, the cure can only be established on the principles of 'similia similibus curan-tur' and that is homoeopathy. If any medicine is given on any other, it either creates another disease or it suppreses the original disease. In that case, it does not mean that homoeopathic medicine can be used with allopathic system. If the cure is to be established for good health, for normal health, it is only the principle of homoeopathy which can do it.

श्री सा : क्या बायोकेमिक मेडिसिन्स मी इस सिद्धान्त के म्रान्दर माती हैं ?

DR. A. S. DHOLE: This system has been invented by Dr. Scnushulan who was a homoeopath with 12 constituents body salt. On that basis, he invented this system. really very interesting if a dialogue is held with him, but I find there is no time for that. As a layman, I would like to know something about epidemics. So far as smallpox is concerned, or so far as cholera is concerned, they are now diseases of the past. I heard now that you are perfectly right when you say that so far as the virus is concerned, homoeopathy has nothing to do with it. It does not recognize it. That is a moot question. But I do not want to enter into that guestion because it will take a long time. My concern, so far as the Bill is concerned, is, as you will see, that because of the very nature of this homoeopathy a lot of people who call themselves as self-trained and self-educated, have been practising homoeopathy in large numbers. It was only in Maharashtra State perhaps that we were told that the total number of registered and trained people is about 5000. But in West Bengal, in Bihar and other States the number was stated to be 30,000 or 40,000 or 50,000 or like that. As such there are thousands of people who call themselves as self-educated for practising homoeopathy.' Now what is to be done about that?. Do you make any difference between those who are properly trained, who have undergone a particular course, etc. and those who are practising homoeopathy as selftrained and self-educated? Do. you think that any training is necessary? If so, how would you eliminate this tendency of being self-trained and selfeducated?

DR. A. S. DHOLE: It is a very nice question. That's why, after Independence we have prepared Acts and Statutes for standardising education in all States.

Now, the point is about those who are self-trained and self-educated as homoeopath. Well, it is a credit that only those can be homoeopaths who will be in a position to practise. But that can be restricted only on the basis

of law. When the law comes into force, and that can be done. So law is the only thing that regulates everything.

But so far as the persons who are self-trained and self-educated, who have kept the flame burning, the Government has no right to blame them. They have kept the torch burning. They cannot be deserted only because of this. I think it is not a proper thing to do.

SHRI BHAOOSAHAIB DHAMAN-NAR: On behalf of the Committee, I thank you very much for having come here and given us such elaborate information. I am sure the Committee will give due consideration to your evidence. Thank you.

DR. A. S. DHOLE: May I request the hon. Members to go through our memorandum once again. The only thing is that there are some typograhical mistakes in it which has been prepared ______ in haste.

CHAIRMAN: We adjourn now till 3 p.m.

[The witness then withdrew.]

[The Witness (Shri K. S. Rama Chandra Murty, Lecturer, Nalgonda, A. P., Dr. Y. Satyanarayan Rao, Physician, Government Homoeo Dispensary, Nalgonda, A.P.) werz called in.]

SHRI K. S. RAMACHANDRA MURTY: My name is K. S. Ramachandra Murty. I am working as an Asstt. Lecturer in the College at Nalgonda, Andhra Pradesh, and having practice in homoeopathy for the last fifteen years.

DR. Y. SATYANARAYAN RAO: My name is Dr. Y. Satyanarayan Rao. I am working as a Physician in the Government Homoeo dispensary, Nalgonda.

CHAIRMAN: You are most welcome. Have you gone through our questionnaire and replied to it?

SHRI K. S. RAMACHANDRA MURTY; Yes, Madam, we did.

CHAIRMAN: Any other new points that you want to make? We have got your replies. Any other point that you want to tell us?

S. RAMACHANDRA SHRI K. MURTY: Well, hon, Members, at this juncture I hope I have to submit nothing more than what I have submitted earlier. However, I am to state since this Bill is going to shape the destinies of homoeopathy and the homoeopathic practitioners in India, in my humble opinion sufficient care is to be taken as regards the appointment of the officers, specially those who would guide and mould the destinies of homoeopathy. Why homoeopathy is to be patronised and all these things, I suppose are nothing new to you. It is purer and cheaper. That is why we have to patronise it but at the same time how to patronise and how to get it up has been the question, that is exercising my brain. The practice is that the officers who are at the helm of affairs with regard to homoeopathy and homoeopathic practitioners, аге. sometimes, if I may use the term, very frequently are persons without any knowledge of homoeopathy. That is why the homoeopathic dispensaries are not given proper treatment and encouragement. That is why the homoeopathic practitioners or the physicians have not been given sufficient encouragement in the sense that they have not been brought up to the level of the physicians in other systems of medicine. And for this, I suppose, the awarding of the diplomas by several institutions in India is one of the causes. In homoeopathy we do not have degree classes whereas in allopathy we have degree classes. Why not we bring up homoeopathy in colleges also to the level of other colleges with degree classes? Hon. Members will kindly make a note and see that degree classes are held for students also. The homoeopathy minimum qualification for getting into

a homóeopathic college shall be as that of the students who wish to admit themselves into the other systems of medicine, specially allopathic medicine. And about the registration of practitioners at the State level what I find is, generally it is a matter of formality, that is, paying the prescribed fees and getting the registration. That is all. Neither the Government nor the Physicians nor anybody else who is interested in homoeopathy is interested to know whether that person or that individual who has been awarded the registration certificate is really practising homoeopathy or any other system of medicine. So, if a person who is allowed or who has the permission or who is registered for homoeopathy is doing something other than homoeopathy he is committing a sin. As a homoeopath he is expected to practise homoeopathy just like an Allopath who is expected to practise allopathy. Well, if an allopath is registered for homoeopathy also he will be allowed and in the same way, if a homoeopath, is registered for other systems also, he may be allowed but onot otherwise. Homoeopathy is going down in the eyes of the public due to the very reason that a homoeopath who is registered for that system only is practising other systems of medicine also just for the sake of making a few chips; that is what I feel. That is why these practitioners who are registered for homoeopathy should be instructed or a law should be enacted to that extent that persons who are registered for homoeopathy should practise homoeopathy alone and nothing else. • -

Then about the colleges, as I told you earlier, unless and until the students who wish to get themselves admitted to the homoeopathic colleges are treated on par with those of other systems of medicine, homoeopathy will not find a suitable place in the society. And people generally have an idea that allopathic medicines cure more rapidly and more radically because homoeopaths are not able to

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assert themselves in the field in the sense that they are not able to think over, not able to take sufficient pains and administer the correct drug. So, in my humble opinion, first of all the officers who are to shape, who are to mould the destinies who are the people to guide the practitioners in their respective States should have sufficient knowledge. They must be masters in the system and they should be genuinely interested in homoeopathy. Unless this clause or condition is there, and a decision taken by the Committee and the law enacted to that extent I think nothing concrete or nothing valuable may be achieved. About the colleges, degree classes only should be held and admission to such classes shall be on the same qualification as that of MBBS students. Research institutions should form a part and parcel of these colleges. Every college in India should be provided with a research institute, so that the professors or lecturer's may have a chance of doing research. These are my views.

RAO: SATYANARAYANA DR. Madam Chairman and Respected Members of Parliament, I would like to express a few of my observations. The homoeopathic qualified doctors should be given the status of allopathic doctors with the minimum degree of MBBS in respect of issuing certificates of all kinds and to conduct medical examinations under the direction of Government authorities. In this way the homoeopathic doctors should be made eligible to exercise all the powers of an allopathic assistant surgeon or civil surgeon and superintendent of allopathic general hospital in respect of the following matters: ---

- 1. medical examination of the pupils and students of general educational institutions,
- 2. medical examination for proposals for life insurance.
- 3. medical examination—single or inedical board for the proposal

of commutation of pensions or in any other cases on par with allopathic doctors.

- 4. reimbursement of medicines to the Government servants, Central or State, who undergo medical treatment in a homoeopathic dispensary as done in the case of other systems of medicine.
- 5. the rates of fee should in no way differ.

Appointments and postings and sanction of leave, etc. as in other categories of posts in the Government homoeo dispensaries. If the above facilities are not given, the homoeopaths cannot maintain their standard merely as on their efficiency in healing diseases and they will not only be put to financial inconvenience but also they cannot establish status among the other co-practitioners of other systems.

CHAIRMAN: If you like, you can speak in your mother-tongue. We have Members from your State who can interpret your replies. I ask you whether your written speech is a long one.

DR. SATYANARAYANA RAO: That is over, but I have some three or four points more. Development of homoeopathic medicine should be done by upgrading the qualifications and opening of research centres. Diploma course should be for 44 years. The degree course should be for 51 years. Post-graduate course should be for 64 years. Research centres should be confined to finding new remedies. They must take up incurable diseases in other systems of medicine. They must also take up partially proved remedies.

[SHRI N. G. GORAY in the chair.]

CHAIRMAN: Members would like to put certain questions to you. SHRI K. RAMAKRISHNA REDDY: Would you allow homoeopathic practitioners to practise the allopathic system of medicine? Would you recommend it or would you penalise such persons?

DR. SATYANARAYANA RAO: Persons practising homoeopathy should not practise other systems of medicine. If they do so, they should be penalised just like in any other system of medicine.

SHRI' K. RAMAKRISHNA REDDY: What about the duration of the course?

DR. SATYANARAYANA RAO: Diploma course 41 years, degree course 51 years and for post-graduate course the period should be 61 years.

SHRI K. RAMAKRISHNA REDDY: Should the graduate course be after the diploma course or should be done straightway?

DR. SATYANARAYANA RAO: Graduate course should be taken up separately.

SHRI K. RAMAKRISHNA REDDY: What should be the qualification for admission to the graduate course?

DR. SATYANARAYANA RAO: At present intermediate in science is the minimum qualification for the degree course. It should be continued.

DR. LAXMINARAYAN PANDEYA: You are working in a State dispensary. I want to know whether there is any separate directorate for homoeopathy in your State.

DR. SATYANARAYANA RAO: There is no separate directorate, but there is one for Indian Medicines and Homoeopathy.

DR. LAXMINARAYAN PANDEYA: Is there a director for homoeopathy? DR. SATYANARAYANA RAO: No, But there is one director for Indian Medicines and Homoeopathy.

DR. LAXMINARAYAN PANDEYA: Is there any enactment in your State regarding homoeopathy?

DR. SATYANARAYANA RAO: There is a Board for Homoeopathy in Andhra Pradesh. It came into being in 1956. There are A class practitioners and B class practitioners of homoeopathy. A class practitioners are registered being themselves institutionally trained for four years. B class practitioners are registered after an experience of ten years and after passing a written examination conducted by the Board.

DR. LAXMINARAYAN PANDEYA: There is an Act to regulate homoeopathy in your State,

DR. SATYANARAYANA RAO: Yes. Sir.

श्वी चिरंबीद झा: : मैं माप से जानना भाहता हूं कि स्पा माप यह जानते हैं कि देश के अन्दर बहुत से ऐसे प्रैंदिटसनर्स हैं होम्यो-पैथी के जिनके पास किसी इस्टीट्यूयन की कोई डिग्री या कोई और स्वालिफिकेशन नहीं हैं लेकिन वे प्रैंदिटस करते हैं और उनकी प्रैंक्टिस मच्छी भी है और वे अभी तक रजिस्टर्ड नहीं हो सके हैं। तो ऐसे सोगों के लिये कौंसिल में क्या प्राविजन रखना चाहिये। आप क्या सोचते हैं कि उनको प्रैक्टिस करने का ग्रधिकार दिया जाय या नहीं दिया जाय ।

DR. SATYANARAYANA RAO: They must get themselves registered. On the basis of experience and after passing the written examination. The minimum period of experience should be for ten years. They must have 'B' class registration.

श्वी सा: दूसरा क्वेश्चन हमारा यह है कि बहत से ऐलोपैथ हैं जो ऐलोपैथी की प्रैक्टिस छोड कर होम्योपैथी की प्रैक्टिस करते हैं। उनके लिये ग्राप क्या सोचते हैं ?

WITNESS: They must have undergone a written examination conducted by the Board, in fundamental principles, etc.

SHRI N. P. CHAUDHARI: He has already replied to this question.

श्री झा : ऐसे प्रेक्टिशनर्स को चाहे वे ऐतोपैथी के प्रैक्टीशनर्स हों या जो होम्यो-पैथी की प्रैंक्टिस करते हैं या जो रर्एजस्टर्ड होम्योपेंथ हैं उनकी जांच पड़ताल करके ऐक्सपीरिएंस के स्नाधार पर या श्रोर किसी ग्राधार पर कौंसिल को उनको रजिस्टर करने का ग्रधिकार म्राप देना चाहते हैं ?

श्री एन॰ पी॰ चौधरी : वह भी इस प्रक्त को समझ नहीं पाये हैं ग्रीर हम भी समझ नहीं पा रहे हैं।

SHRI M. SATYANARAYAN RAO: In Andhra Pradesh, apart from Homoeopathy, are there the Unani and the Ayurvedic systems?

WITNESS: Yes, Sir. There are.

SHRI M. SATYANARAYAN RAO: If so, what is the percentage?. What is the percentage of the Homoeopathic, Ayurvedic and also the Unani practitioners there, registered practitioners?

WITNESS: More than two thousand in homoeopathy.

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CHAIRMAN (SHRI N. G. GORAY): If you have not got the exact figures, do not give them. Say, you do not have them.

WITNESS: I do not have the correct figure. ...

SHRI M. SATYANARAYAN RAO: Are you getting any help from the Government of Andhra Pradesh? Does the Andhra Pradesh Government courage the system?

WITNESS: I am the Government medical officer in Nalagonda. They have opened certain homoeopathic dispensaries, recently. There are 13 homoeopathic dispensaries and three hospitals, of the Government,

SHRI M. SATYANARAYAN RAO: How many colleges are there in Andhra Pradesh?

WITNESS: There are only three Government colleges; no private colleges at present recognised by the Government of Andhra Pradesh, - C

DR. LAXMINARAYAN PANDEYA: How many homoeopathic dispensaries are there run by the Government?

WITNESS: There are thirteen dispensaries run by the Government.

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CHAIRMAN: Do you want to add anything to what you have said? . . .

. 1 WITNESS: No Sir, I have already expressed my opinion.

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SHRI K. RAMAKRISHNA REDDY: On behalf of the Chairman and the members of the Committee I give my thanks to you. The Committee willkeep your suggestions in view and consider them; . . 1

. . [The witnesses then withdrew.]

[The Committee then adjourned.] ÷.,

Wednesday, the 4th October, 1972. (AT BOMBAY) . le

PRESENT

Shrimati Purabi Mukhopadhayay-Chairman.

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MEMBERS

Rajya Sabha

2. Shri Bhupinder Singh	7. Shri Sultan Singh
3. Shri N. G. Goray	8. Shri N. P. Chaudhari
4. Dr. Debiprasad Chattopadhyaya	9. Shri T. G. Deshmukh
5. Shri Man Singh Varma	10. Shrimati Savita Behen
6. Shri K. C. Panda	

Lok Sabha

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11. Shri Ziaur Rahman Ansari	20. Shri T. S. Lakshmanan
12. Shri Muhammed Khuda Bukhsh	21. Shri Prasannbhai Mehta
13. Shri Bhaoosahaib Dhamankar	22. Dr. Laxminarayan Pandeya
14. Shri Hiralal Doda	23, Shri S. L. Peje
7-15. Shri Nageshwar Dwivedi	24. Shri M. Satyanarayan Rao
16. Shri Madhuryya Haldar	25. Shri Umed Singh Rathia
17. Shri Chiranjib Jha	26. Shri K. Ramakrishna Reddy
18. Shri Ramachandran Kadannappal- li.	27. Dr. Sankata Prasad
19. Shri B. R. Kavade	28. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr., Jugal Kishore, Adviser in Homoeopathy.

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'Shri M. K. Jain, Under Secretary.

WITNESSES

(1) Representatives of the All India Homoeopathic Medical Association, Maharashtra Branch, Bombay.

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- (ii) Dr. A. V. Amonkar. . **. . .** . .
- (iii) Dr. R. D. Dani,

A DESCRIPTION OF A DESCRIPTION

- (iv) Dr. H. B. Kara Patel.
 - (v) Dr. R. K. Phatak.
- (vi) Dr. D. S. Umrootkar.
- (vii) Dr. (Smt.) Kusum D. Umrootkar.

(2) Representatives of the Homoeopathic Medical College, Poona.

(i) Dr. Y. V. Phatak, Principal.

(ii) Dr. S. A. Katekari, Vice-Principal.

(3) Representatives of the L.C.E.H. Doctors' Association, Bombay:

(i) Dr. Behram Badhaniwala, President.

(ii) Dr. Prakash Vakil, Honorary Secretary.

(iii) Dr. K. R. Gala, Honorary Assistant Secretary.

(4) Representative of the Nagpur College of Homocopathy and Biochemistry:

Dr. (Smt.) Vimal Wazulwar.

(5) Dr. K. Prahlad, Bombay.

(6) Dr. S. R. Wadia, Bombay.

(7) Dr. P. Sankaran, Bombay.

[The witnesses (Representatives of the All India Homoeopathic Medical Association, Maharashtra Branch) were called in.]

CHAIRMAN: On behalf of the Committee, I welcome the witnesses. I should tell you that the evidence that you will be giving will be treated as strictly confidential and when you go out, do not discuss the points that you have discussed here. Now, Dr. Kohli, if you have any points to make before the Committee, you can mention them.

DR. T. P. KOHLI: I have certain amendments to suggest. First, the Bill should be named as "The Homocopathic and Biochemic Central Council Bill of 1971", because in Maharashtra there are several members who are registered on the biochemic side. If this word is not added, then naturally they will be out of the Register.

Then there are two consequential amendments. In clause 1(1), this Act may be called as the "Homoeopathy and Biochemy Central Council Act, 1971". In clause 2(1)(a), line 17, it should read as "of Homoeopathy and Biochemy".

Then in clause 2(1)(d), the full name should be given as "Dr. Fredric Samuel Hahnemann". Also we should mention "and Biochemy by Dr. Schussler".

In clause 2(1)(e), the word "without" should be deleted, as otherwise" the three months course degrees of foreign countries will be equivalent to our exhaustive courses of about four years.

CHAIRMAN: Please explain the point as to why you want to delete the word "without".

DR. T. P. KOHLI; There are courses in England and America where by proxy people get certificates and registration. They have just to go and pay money and get the registration.

CHAIRMAN: You mean the postal courses?

DR. T. P. KOHLI: No, it is not only postal course. Actually these degrees or diplomas are not recognised in their own country. If these are not recognised in their own country, how and why should we recognise those certificates in our country?

CHAIRMAN: If it is recognised there, do you accept it? DR. T. P. KOHLI: Only if they come and have exhaustive training in pure Homoeopathy in our country, because the training that is given in the foreign country is not up to the mark perfect and complete.

SHRI N. G. GORAY: It is said that all that one has to do is to fly to London, take the degree and fly back, which means that there is no institutional training as such. If that is so, then we shall have to consider the matter. Without getting any education you can get a degree.

DR. T. P. KOHLI: Yes.

SHRI Z. R. ANSARI: There are certain certificates and degrees in foreign countries which are acquired by paying certain fees without any institutional training. The certificates and diplomas which are acquired thus in foreign countries are recognised in those countries as well....

CHAIRMAN: Please see on page 5 Clause 14: Sub-title reads—"Recognition of medical qualifications granted by medical institutions in State or countries outside India." At the beginning the reciprocity is there already.

"The Central Council may enter into negotiations with the authority in any State or country outside India, which by the law of such State or country is entrusted with the maintenance of a Register of practitioners of Homoeopathy, for settling of a scheme of reciprocity for the recognition of medical qualifications in Homoeopathy, and in pursuance of any such scheme, the Central Government may, by notification in the Official Gazette, direct that the medical qualification which the Central Council has decided should be recognised medical qualification, shall be deemed to be a recognised medical qualification for the purposes of this Act. and any such notification may also direct that

such medical qualification shall be so recognised only when granted after a specified date or before specified date."

Dr. Jugal Kishore will explain,

DR. JUGAL KISHORE: At the moment we have not purposely recognised all the foreign qualifications, whether they come from Britain or USA or Germany. And this has been left to the Central Council to go into the matter and then decide, in view of the idea of reciprocity. The duration of the course, etc. are to be taken into consideration. But it is not automatic.

DR. H. B. KARA PATEL: Honourable Chairman and Members of Parliament, the course which has been taken from...London is nothing but a bogus diploma. In this connection it is my humble request that the diplomas such as M.F. Hom. D.F. Hom. and MRHS which deceive Indians should be removed. Dr. A. Boman-Behram has written a letter dated 10-12-1970 to me. Dr. Boman-Behram is an eminent homoeopath in London. I shall read out that letter for the kind information of all the Members:

10-6-1970-

"Dear Dr. Karapatel,

Thank you for your letter of the 1st June. I have discussed the matter raised by you with Dr. Sharma and we reply to your questions point by point.

1. 'The Royal Homoeopathic Hospital is a well-established hospital and has been functioning for the last 100 years. It is now supported by the National Health Service.

2. There are about 200 beds, both surgical and medical.

3. The Faculty of Homoeopathy is the teaching body attached to the hospital. It has a legal status by an Act of Parliament equal to the Royal Colleges like the Royal College of Medicine.

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4. There are very few lectures given at the Faculty. Indian students are NOT welcome and the teaching has lapsed to week-end courses for local general practitioners. There is no consistent teaching which will occupy the students for the greater part of the day.

5. The diploma of the Faculty is not recognised by any medical body or any university. Homoeopathy is not taken as a serious study in this. country.

6. The teaching is done, by the faculty at the hospital and it is not. called a college.

7. The Faculty is run by hospital consultants.

8. I have answered this question. The Faculty are modest in their charges for teaching. The major part of expenses is travelling from India and maintenance in this country. I do NOT think that there is any robbery by the Faculty.

If any student wishes to gain additional and extensive experience in Homoeopathy, the Faculty is the wrong institute to apply. The Faculty courses are at present very elementary and of no consequence.

I may inform you that for admission to the Faculty, a student must have a medical qualification which is recognised by the General Medical Council of Great Britain."

Here it means that only allopaths can go to London to obtain this diploma.

What happens is that the students who go there try to show their superiority because they were.....

SHRI Z. R. ANSARI: Now the superiority is in the hands of the Central Council which is going to be set up by this Act, Therefore, we have not so far recognised any of the foreign degrees. That is a matter to be decided by the Council.

DR. PATEL: I have already mentioned that the whole paragraph should be deleted for the time being....

SHRI N. G. GORAY: That we shall see.

DR. PATEL: In no other countries is there such a provision, not even in U.S., France or England.

SHRI ZIAUR RAHMAN ANSARI: What about Germany?

DR. PATEL: Not even in Germany...

CHAIRMAN: You have made out that point already. You now come to the next point. Don't repeat the same point again and again.

DR. T. P. KOHLI: In section 2(1)(g). line 11, add the following after the words II Schedule: "and all practitioners registered in the State Register"....

CHAIRMAN: Schedule II is only for institutions. This is only for institutional qualifications, and personal experience is no qualification in institutions. So this clause deals exclusively with institutions. Come to the next point.

DR. T. P. KOHLI: Clause 2(1) (g) states: "recognized medical qualification" means any of the medical qualifications, in Homoeopathy, included in the "Second Schedule". We want to add: "and all practitioners...,"

CHAIRMAN: This is only for institutional qualifications and personal experience is no qualification in institutions. So this clause deals exclusively with educational institutions. Experience doesn't come under that clause.

Next point?

DR. T. P. KOHLI: We want to add: "..and all practitioners registered in the State Register"....

CHAIRMAN: It is already there.

DR. T. P. KOHLI: In (g) it is not

"'recognised medical qualification' means any of the medical qualifications, in Homoeopathy, included in the Second Schedule".

CHAIRMAN: As I have already told you, Dr. Kohli, this is about institutional qualifications and experience is no institutional qualification. So that cannot be included in (g).

DR. T. P. KOHLI: May I point out to you that the Second Schedule does not include all? Justice has not been done. Some names are not there.

AN HON. MEMBER: That is an-• other question.

CHAIRMAN: You can send a list and we will consider that. If one institute's name is not there....

c DR. T. P. KOHLI: Here there are "several. Some are no more. It is very difficult to find out throughout India "unless" a wide publicity is given. "People do not know about it at all.

CHAIRMAN: Any other point?

DR. T. P. KHOLI: In section 3(1)(c), line 40, delete the words.

"or other allied medical disciplines".

This is because all allopaths and others, without proper Homoeopathic qualifications, are entering into it.

CHAIRMAN: That is not intended here. This is to include blo-chemic medicines. If we include bio-chemic system in the definition, then it is automatically deleted.

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SHRI N. G. GORAY: You should not go into the amendments. That we will consider. If you have some general observations to make, then it would be better. You can submit the same to us and we can consider them.

DR. T. P. KOHLI: The most important is Schedule II. Now, here some have been left out. For example, most of them are from West Bengal, and other States. For example, in Bihar Dr. R. P. Misra, who was the President of All India Homoeopathic Association, founded his college. He continued to be the President of AIHMA for about five terms...

CHAIRMAN: You are talking about the institutes....

DR. T. P. KOHLI: Because Dr Mishra was President, the All India Homoeopathic Medical Association apart from so many. Even his institution Bapu Tirhut Homoeopathic Medical College Muzaffarpur has not been included in IInd Schedule and it should be included.

CHAIRMAN: Dr. Kohli, you are giving evidence to a very important Committee constituted by Parliament Please do not bring politics into it. If the Bihar State Board recommends any name, that can be accepted. Without understanding the implications of your remarks, please do not impute motives to it. This is not a political party. It is a very important Committee of Parliament. We are not here to hear whether you had got a President who was dabbling in politics or not. If you have get any new point, please state it, otherwise please do not confuse the issues. If the Bihar State Board accepts an institution, it will be accepted. So not only the diplomas and degrees have been included, not only the schools and colleges recognized by the Board have been accepted, but if the Board recognizes any institution, that will also be included in the Second Schedule. That is the meaning of the Second Schedule. You should not have said that. I am very sorry in pointing this out.

Next point?

DR. PATHAK: Many persons, after taking their degrees or diplomas, have been indulging in practising other branches of medicine for many years. For example, take allopathy. If this position is allowed from the point of view of homoeopathy it will be detrimental to the profession because 80 per cent of the institutionally qualified homoeopaths are indulging in practice of allopathy. So I propose for your that some provision consideration should be made that if a homoeopath unless he is qualified in allopathy also should be barred from practising allopathy and an allopath, unless he is qualified in homoeopathy should be barred from practising homoeopathy.

CHAIRMAN: Very good point.

DR. R. K. PATHAK: That is a very important point and that is our viewpoint.

CHAIRMAN: If you have got no other point, our Members will ask certain questions

DR. DANI: In the Statement of Objects and Reasons, one of the main objects is set out as "to evolve uniform standards of education " but there is no uniform standard regarding registration. The position is that in the different States the local heads of administration have different standards of registration and we are going to give the right of practice for persons who belong to one State in any other part of the country. This will create anomalies. Now a person with ten years' practice in Rajasthan, Punjab or Madras can practise all over India while persons with the same qualification in Maharashtra with more than twenty years, experience will not get any right outside Maharashtra. Not only that; we have forgotten one class of practitioners here. We have taken care of registered practitioners. But there is another class of practitioners. In Maharashtra and Madhya Pradesh

there are "enlisted practitioners". Actually it is a sort of registration with some limited rights. Now there is no mention of the enlisted practitioners in the Bill. In 1969 the provision was there in Maharashtra under which those who had put in ten years' practice—between 1959 and 1969—were f registered. Those who have put in less were enlisted with limited rights.

DR. LAXMINARAYAN PANDEYA: They get registered; after completing five or ten years as required by the Act they get their registration.

DR. DANI: It is not there.

DR. LAXMINARAYAN PANDEYA: I come from Madhya Pradesh; I know that. Enlisted persons are to be registered after due period.

DR. DANI: It is not so in Maharashtra.

DR. JUGAL KISHORE (Health Ministry): Now there are different standards and variations in enlistment. The criterion for enlistment in one State may not be the same in another State. We have provided that all the rights enjoyed by the enlisted practitioners in a particular State will be retained by them. In case the State Board agrees to register the enlisted practitioners automatically they will enjoy the same rights.

CHAIRMAN: They will become registered practitioners. So we need not keep the words "enlisted practitioners".

DR. DANI: Where is the provision here?

CHAIRMAN: In the clause tor 3 registration. There we will have provision for persons with institutional training to be registered or for persons having experience of practice. That will be the criterion for registration. Now if you are accepted as registered practitioners

in your State you will be accepted as registered practitioners in the Central Register also. Now your State does not accept you as registered practitioners; they have given you only "enlisted". This "enlisted" we are not going to keep. Either you have got to gain experience to get yourself registered or you should have institutional training to get yourself registered. Am I correct?

DR. KARA PATEL: In the Statement of Objects and Reasons it is mentioned "The registration of practioners on the Central Register of Homoeopathy will ensure that medicine is not practised by those who are not qualified in this system...." I would like to know what it means.

CHAIRMAN: Statement of Objects and Reasons in a Bill means you have to give a memorandum in which you have to state the reasons for introducing the Bill. That is the main purpose of this memorandum. Now about the aims and objects: the whole body of the Bill lays down rules and provisions for making registration; this Bill deals only with the provision of registration, uniformity of education, uniformity in certain drugs and research. This is the main purpose. Therefore, in the Statement of Objects and Reasons of a Bill you have to state the reasons why you are introducing this Bill. So, each Bill has to contain this Statement of Objects and Reasons for introducing the Bill. So there can be nothing new in the Statement of Objects and Reasons which is not in the body of the Bill. In the body of the Bill we are making statutes for registration. So, whatever you have got to say, you will please confine yourself to the body of the Bill, that is, the main statutes. Statement of Objects and Reasons, in a nutshell, what is the is to tell Parliament purpose for which the Minister in charge of the Bill is introducing a piece of legislation. I hope I am clear. Now you please reply to the questions of the Members; by that you will be helping us much more.

DR. LAXMINARAYAN PANDEYA: You have suggested that if one who is registered for homoeopathy practises allopathy and vice versa he should be debarred. Do you suggest any penal clause for those who indulge in such practices?

DR. KARA PATEL: I am not sure about the penal clause because the tendency is to reduce the number of penalties now-a-days. So what I would suggest is, at the most, cancellation of registration.

DR. LAXMINARAYAN PANDEYA: But those who are practising homoeopathy but are qualified in allopathy?

DR. KARA PATEL: Those who are qualified in allopathy and are practising homoeopathy, they should be on the register of homoeopaths, but they should first qualify themselves in Homoeopathy and get their names removed from the register of Allopaths to confirm singular fidelity.

भी मला हिंह वर्माः आपते शुरू में यह कहा था कि इसका नाम होम्योपैथी और बायोकैमिक सेन्टल कौंसिल होना चाहिये । ग्रापने यह कारण बताया कि महाराष्ट्र में बाबोक मिक सिस्टम ग्राफ मेडिसिन को काफी लोग प्रैक्टिस करते हैं। लेकिन यह जो सेन्टल कॉसिल बन रही है यह सारे देश के लियें बन रही है ग्रौर सारे देश में वह स्थिति नहीं है जो महाराष्ट्र में है। क्या म्राप यह जरूरी समझते हैं कि वायोकैमिक का नाम होम्योपैथी से ग्रलग किया जाय । ग्रव तक हम यह समझते रहे हैं कि होम्योपैथी के साथ बायोकैमिक ग्राटोमैटिली चलती है। इस तरह तो कल यह सवाल पैदा हो सकता है कि बायोकेमिक सिस्टम आफ मेडिसिन के लिये ग्रलग से कौंसिल बने । आप यह नया प्रक्त क्यों पैदा करना चाहते हैं ?

डा० कोहेंली : हम यह वताना चाहते हैं कि महराष्ट्र में कई लोग हैं जो होम्योपैयी में रजिस्टर नहीं हैं वहां लिखा हुग्रा है They have been practitioners of the biochemic system.

वायो कैमिक सिस्टम वाले कहते हैं कि 12 टिगू रेमेडीच की प्रैक्टिस करते हैं । ग्रगर यह नहीं रखा गया You will have to pass another Bill after five or ten years.

श्री मान सिंह वर्मा : आप एक एक्सपर होम्योपैथ हैं । आप यह वताइये कि वायो-केसिक सिस्टम आफ मेडिसिन होम्योपैथी से सम्वन्ध रखना है या नहीं रखता है ?

डा॰ कोहली : यह होम्योपैथी का पार्ट है।

श्री मान सिंह वर्माः जब होम्योपैथी का पार्ट है और इसी के साथ डेवनप करेगा तो ग्रापकी यह वात समझ में आने वाली नहीं है।

डा० को∷ली : वे ब्राटोमेटिकली सेन्ट्रल कॉसिल में नहीं जा सर्केंगे ।

श्री मात सिंह **वर्मा** : सेन्ट्रल कौंसिल देखेगी कि वे किस प्रकार रजिस्टर होंगे, यह वाद की वात है ।

डा० लक्ष्मीनारायण पांडेय : मै जानना चाहता हूं कि क्या महाराग्ट्र में होम्योपैयी के प्रैतिटसनसं का अलग रजिस्टर है ग्रीर ग्रीर वायोकेमिक के प्रैतिशीनसं का अलग है ?

डा० को हुली: इस चीज को मैं त्ताना चाहता हूं कि रजिस्ट्रेशन के समय लोगों ने डिक्लेयर किया कि वे वायोकेसिक की प्रैक्टिस करते हैं इसलिये वे रजिस्टर हो गए।

DR. LAXMINARAYAN PANDEYA: They are biochemic practitioners, not homoeopaths.

ड'० कहली : िर्फं महारष्ट्र में होम्यो-पथी पौर वायोकैमिक ऐक्ट है।

Regarding the DR. PHATAK: point raised whether there should be a separate definition for homoeopathy and 'biochemic', in Maharashtra it is done separately. There will be a separate battle waged by the biochemist. It is a different system. It has a separate ideology. While 🙏 homoeopathy was founded by Dr. Hahneiman, the biochemic system was founded by Dr. Schusler.

CHAIRMAN: We are already convinced on that point.

DR. KOHLI: I want to make some ten more points.

CHAIRMAN: You have already given us a memorandum. If you want to elaborate any one important point, you may do so, but you do not have to deal with all the points. It is already on record.

DR. PHATAK: I would like to touch on one point. At page 3 of the Bill, clause 5 (1) deals with elections. It says that a person medical possessing the necessary qualification should be included. I would submit that the RMPs who have been practising Homoeopathy for the last thirty or forty years and who are important in respect of practice and experience should not be debarred from standing for election to the Homoeopathic Central Council That is my point. I think homoeopathic practitioners who have been in the field for many years should be allowed. There is no reason why grandfathers should not be the allowed, while the grandsons are allowed to stand for election. It is restricted to those whose names are in Schedule II. I suggest that Schedule II and RMPs should be allowed to stand for election. We want to say "and/or". It says here:-

"No person shall be eligible for election to the Central Council unless he possesses any of the medical qualifications included in the Second Schedule, is enrolled on any State Register of Homoepathy and resides in the State concerned." If you can add the words "and/or", that will serve our purpose.

CHAIRMAN: We have noted it. Thank you. Friends, the memorandum which you have circulated, along with the further memorandum submitted by you, will be carefully studied and we shall incorporate the provisions as far as possible. So, you need not elaborate on those points.

SHRI N. G. GORAY: Is it your point that those who have the necessary medical qualifications and those who have not should be treated on a par? Do you want to include all of them?

DR. DANI: The present position of homoeopathy is such that a big majority consists of registered medical practitioners. They have got their qualifications even before they were recognised by the State. The State should recognise these and they should be included in Schedule II.

CHAIRMAN: Clause 3 is absolutely clear. Those people who have no academical qualifications or institutional training will not be included. They can also be nominated, from amongst persons having a special knowledge or practical experience, for nomination. We do not close the door for election. If it is only for election, then politics will come in. Therefore, we have got the door open for institutional training and others also who have experience as registered practitioners. I think that serves the purpose.

H. B. KARE PATEL: There DR. was the Bombay Homoeopathy Act of 1951 and also of 1959. At that time homoeopathic colleges were not in existence. They were not allowed to practise prior to the 1951 Act in terms of the Bombay Medical Act of 1937. and if anybody in spite of that was found practising he was fined upto Rs. 1000 and was also imprisoned. In spite of all this, the people demanded homoeopathic treatment and we carried on giving medicines to them.

The Homoeopathic colleges came into existence only after 1959. Those who were practitioners in 1951 and onwards, they were registered by a tribunal appointed by the Government of Bombay and those who were registered under the 1951 and 1959 Acts should not be excluded from the Central Council, from the nomination and election points of view.

CHAIRMAN: Why should they be excluded if they have the institutional training?

DR. H. B KARE PATEL: At that time homoeopathic colleges were not in existence. Otherwise, they would have taken the training.

CHAIRMAN: Their case is that the cases of the non-institutionally trained people should not be neglected. We will consider.

DR. R. K. PHATAK: Your worry, I believe, is that the academically qualified doctors will be excluded if the election is thrown open only to the registered medical practitioners, but it sometimes happens in democracy.

CHAIRMAN: We have made that provision also that each category will be able to come through election or nomination.

DR. R. K. PHATAK: We do not want nomination. As MPs you know the difference between election and nomination.

SHRI BHAOOSAHAIB DHAMAN-KAR (Spoke in Marathi-English translation): You are all people in the profession. You have given certain suggestions and views for which we thank you. We will consider them.

[The witnesses then withdrew.]

[The Witnesses Representatives of the Homoeopathic Medical College, Poona, 1. Dr. Y. V. Phatak, Principal, 2. Dr. S. A. Katekari, Vice Principal) were called in.]

CHAIRMAN: On behalf of the Committee, I welcome the witnesses.

They are from the Homoeopathic Medical College, Poona. I may tell you that the evidence that you will be giving before the Committee will be treated as strictly confidential and it should not be disclosed when you go out. Now, how many students do you have in your college?

DR. PHATAK: Our college started functioning in July 1971. We admitted 50 students. One of them left. Now there are 49 students on the rolls in the first batch. In the second year, our admission was restricted, and we admitted only 39 students. That was due to the Government recognition coming late and an advice being given to restrict our admissions. As such, there are 49 students in the first batch and 39 students in the second batch. We are admitting students who have passed inter-Science B Group examination or students of a higher level, i.e. B.Sc's. The total duration of the course will be 31 years.

DR. LAXMINARAYAN PANDEYA: Have you got any hospital facilities?

DR. PHATAK: At present we have no hospital facilities. We started only last year.

DR. LAXMINARAYAN PANDEYA: What are the arrangements for practical knowledge of the students?

DR. PHATAK: We have a dispensary conducted by our society, where two homoeopathic doctors from our college attend morning and evening, and the attendance is gradually increasing from 30 to 50 per day.

DR. LAXMINARAYAN PANDEYA: what is the number of beds there?

DR. PHATAK: The hospital is not ready yet. It is almost completed. We might start it soon, well before our first batch of students become entitled to have clinical training.

SHRI BHAOOSAHAIB DHAMAN-KAR: Do you think it is necessary that a candidate should be an intermediate-Science or a B.Sc. for doing a course in homoeopathy? DR. PHATAK: I feel it is absolutely necessary that he must have enough grounding in the basic subjects and he should be mature enough to have a comprehensive grasp of the various subjects that are taught, before he is made a full-fledged, pro-Maharashtra Board?

DR. LAXMINARAYAN PANDEYA: This college is recognised by the Maharashtra Board?

DR. PHATAK: It is recognised by the Maharashtra Government.

CHAIRMAN: What is the strength of your teaching staff?

DR. PHATAK: Thirteen.

CHAIRMAN: Out of these how many are allopathically trained or allopathy degree-holders?

DR. PHATAK: Five are homoeopaths.

CHAIRMAN: The rest are allopaths trained in homoeopathy or only allopaths?

DR. PHATAK: The only allopath who is registered as a homoeopath is myself. Others have no training whatsoever in homoeopathy.

CHAIRMAN: Do you think it would be desirable in future to have only allopathically trained people in the homoeopathic college?

DR. PHATAK: For certain subjects like anatomy, there is no question of allopathy and homoeopathy. In physiology, there is no division existing. In fact, homoeopathy does not live independently of allopathy.

CHAIRMAN: What about the treatment side?

DR. PHATAK: Homoeopathy will be more useful for the day-to-day work at the outdoor level. Wherever there is difficulty, an allopath will be required and will be available in the hospital.

CHAIRMAN: What is the fee that you charge from the students in your college? DR. PHATAK: It comes to Rs. 700 per annum. The tuition fee is about Rs. 500. There are other fees like library fee, laboratory fee and so on.

CHAIRMAN: Yours is degree course ; or diploma course?

DR. PHATAK: It is a diploma course.

CHAIRMAN: Your syllabus is for the diploma course?

DR. PHATAK: The syllabus is for the recognised four-year course-L.C.E.H. of the Bombay Government.

CHAIRMAN: What is LCEH?

DR. PHATAK: It is almost identical to DHMS.

CHAIRMAN: That is a licentiate course?

DR. PHATAK: Yes.

CHAIRMAN: Will there be any difference between your degree and diploma course holders with regard to these initial? What will be the initials?

DR. PHATAK: It should be quite different. Diplom_a i_{s a} diploma and degree is a degree. A degree should be awarded after two years....

CHAIRMAN: What do you call that degree?

DR. PHATAK: It becomes GCEH. But it is not existing now.

CHAIRMAN: Is your college recognised by any of the universities?

DR. PHATAK: No.

CHAIRMAN: Now you may make any general observations if you please.

DR. PHATAK: About choice of students I would say that they should not be below the prescribed standard. They should have a mature mind, with a proper scientific outlook in order to grasp such vast knowledge of diverse subjects as are included in the curriculum. If they are very young, with Secondary School Certificate qualifications, they may not be able to comprehend fully all that is taught and grasp the basic principles in treating diseases.

Duration of Course: As you are discussing now, 3½ years for diploma course (DHMS) and two years more for graduate course. Here I have suggested that if you cannot induce the universities to introduce graduate course, a course similar to the Fellowship by College of Physicians and Surgeons or a higher diploma, say, G.H.M.S. and F.H.M.S. similar to MCPS, MRCS and FCPS, FRCS of London. They have MRCS and FRCS. All those are diplomas and if the Central Council introduces higher degrees or diplomas, it will certainly draw betand intelligent boys towards ter homoeopathy. Until and unless there are higher courses, there is no incentive for the young boys to take up this as a career.

CHAIRMAN: Very good point Next.

DR. PHATAK: Duration of courses: Then syllabus for the diploma and degree, the syllabus is as good as DHMS in the present examination..

CHAIRMAN: Dr. Phatak, may I suggest one thing? As Principal of the homoeopathy college, why not you convene a conference or a seminar or a discussion among all or different heads of institutions in your place, a discussion about the syllabus, etc. and send your recommendations to the Government of India and to this Committee? Because, somebody must take the initiative.

DR. PHATAK: Then you take the initiative and I will do the needful. I am too small a person. I will bear my own responsibility in the matter of convening.

CHAIRMAN: Don't you feel that it is high time that you laid down your own rules for teaching institutions? DR. PHATAK: They are not uniform new. But as it happens homoeopathy in India has become a shortcut for becoming a doctor, just in two or three years.

CHAIRMAN: So it is only a part time job, a part-time profession, and you want to be satisfied with that kind of a job?

DR. PHATAK: Not at all.

CHAIRMAN: Then somebody has to take the initiative.

SHRI N. C. GORAY: Why not you give the lead?

DR. PHATAK: I have offered myself to start a modern homoeopathy college and if you think that my experiment is useful to the nation and the doctors produced by that college are more useful even than the presentday MBBS doctors, then certainly I would set an example. But I have no machinery to propagate this matter.

SHRI BHAOOSAHAIB DHAMAN-KAR: Do you think you will get the cooperation of all? Do you think there will be homogeneity for a conference because there are two sections of allopaths....

DR. PHATAK: They do not exist. They are only for political purposes, not for educational or for producing proper doctors.

SHRI BHAOOSAHAIB DHAMAN-KAR: Allopathy post-graduates who are practising homocopathy and others who are only registered homocopaths, what is your opinion, whether there will be a consensus of opinion or agreement amongst themselves to come together and prepare a syllabus?

DR. PHATAK: It means competidon. An allopathy doctor who knows something about homosopathy and another who does not know anything about allopathy, how can they come together? CHAIRMAN: You are utilising them.

DR. PHATAK: Naturally all those doctors may be allopathy doctors. They want to learn homoeopathy. We have suggested that there should be a diploma available for them.

CHAIRMAN: We are concerned about the teaching aspect of the thing when we deal with the college. You will still have to depend on the allopathy trained doctors and teachers to teach in your colleges. A time should come when you can depend entirely on the homoeopathy people to teach. Now, who is to take the initiative?

DR. PHATAK: I am taking initiative and my boys are so throughly taught now that these boys, when they get out with a diploma or a degree, will be competent enough to teach all subjects in homoeopathy colleges.

CHAIRMAN: Come to your point.

DR. Y. V. PHATAK: A proper grounding in basic subjects mentioned above is very essential because (a) it will help the Homoeopathis student to always keep abreast to the advances made in allopathy all over the world and give the benefit of it to patients where needed, simultaneously taking remedial action to make up the deficlencies in allopathic therapy, and (b) it will reduce the dependence of Homoeopathic doctors on Allopathic doctors for proper diagnosis of certain diseases. There is a good saying, which I happen to have here, by E.B. Nash:

"It seems like a folly to undertake to pose as either an exclusive pathologist or a symptometologist. Both pathology and symptometology are valuable and inseparable. Ncither can be excluded. Pathology is what the doctor can tell (sometimes). and symptomology is what the patient can tell."

Both of them are inseparable. If you produce a half-trained doctor, the patients will suffer. It would be a wrong practice. A basic training in all the subjects is essential—like Physiology, Anatomy, Pathology, etc.

SHRI N. G. GORAY: If I understood you correctly, you are advocating a sort of integrated approach.

DR. Y. V. PHA'TAK: My basic homoeopathy is not different from allopathy. Take them together....

SHRI N. G. GORAY: If I may say so, your approach is totally different from the approach advocated by some witnesses who considered that allopathy and hompeopathy are two different things, and that a man practising homoeopathy should not be allowed to practise allopathy and vice verse. According to them, these are two completely different things, whereas you advocating an integraled apare proach. Some of the homosopaths have stated that some of the allopaths are unnecessarily encroaching upon their field and that there should be an appropriate penal clause in this Bill which should penalise allopaths.

DR. Y. V. PHATAK: This view is all right for them. But when our Health Services are neing thought in terms of patients' coverage by doctors, and specially those who could reach the remote villages, we should not get anyway nervous or disappointed if a particular group preaches a particular type of view, because homoeopathy was not born through independent people. It was evolved by a leading allopath, Dr. Hahnemann, and all the big homoeopaths seem to have learnt that it is not a different thing, leaving aside a different approach.

So, my suggestions are that:

(a) The minimum qualification for candidates for admission to D.H.M.S. Course should be Pre-Professional or Intermediate Science with Biology. Such students are available in sufficient number all over the country. (b) The basic subjects like Physiology, Anatomy, Pathology, etc. should be taught in detail, up to the standards prescribed for M.B.B.S. students....

CHAIRMAN: Your memorandum deals with this. If you have to make any new point, you may do so.

DR. Y. V. PHATAK: My point is that my suggestions, though they may appear to be revolutionary to many of the present-day homoeopaths, may be implemented at last on an experimental basis. This experiment will be in the interest of the nation. This may increase medical facilities in our country, particularly in the villages. The authorities may feel hesitant to implement my suggestions straightaway as they may appear revolutionary to many of the present day Homoeopaths. They can choose some model colleges where my suggestions could be tried out on an experimental basis, to ascertain if they help to produce better Homoeopathic doctors. I will be happy if our college, where all the facilities will soon be available, is also chosen to carry out the experiexperiment will, in no ment. This way, reduce the present day standards of Homoeopathic medical education. In fact, in the larger interests of the nation, it may contribute to increase the medical facilities now available in our country, particularly in villages.

It is estimated "that in our country nearly 68 per cent of the physicians settle in urban areas leaving 80 per cent of the population in rural areas under insufficient medical care". One of the reasons for this situation may be that these doctors whose clinical training has been built around the framework of laboratory and other sophisticated investigations in a hospital feel utterly helpless" when they have to work in the villages. There is. therefore. no use in producing M.B.B.S. qualified doctors alone in larger numbers as such action will eventually create an unemployment. problem among doctors as is existing

among Engineers at present. If medical education "has to serve the purpose of the country, it should be need based". One of the ways to extend the nedical facilities to the millions who reside in villages is to produce a large number of Homosopathic doctors, trained in the manner suggested above. Such doctors will be competent to treat both acute and emergency cases by themselves referring only a few cases which require specialised treatment or major surgical operations to hospitals and who can, therefore, settle down in the villages with full selfconfidence.

DR. LAXMINARAYAN PANDEY: There is no need to read it out; it is there in the memorandum.

DR. PHATAK: Okay.

श्रोमान सिंह दर्मा : जैसा आपने कहा, यह तो सही है कि जहां ग्राप होम्योपैथी की शिक्षा देंगे तो सर्जरी का ज्ञान भी होना चाहिए, उसे एक्सेपर्ट होना चाहिए और उसके बाद कालेज से निकल कर आएगा तो उसको पूर्ण ज्ञान होगा । इसी संबंध में मैं यह जानना चाहता हूं, जो अभी तक स्पष्ट नहीं हुआ है, कि ग्रापके कालेज से ज्ञान प्राप्त करने के वाद जब वह होम्योपैथी की प्रैक्टिस शुरू कर देगा तो क्या ग्राप उसको एलाउ कर देंगे कि वह एलोपैथी की ड्रग भी दे और होम्योपैथी की भी प्रेक्टिस करे ?

DR. PHATAK: I have no objection if he responds to allopathic treatment.

CHAIRMAN: Any questions?

SHRI BHAOOSAHAIB DHAMAN-KAR: There are graduates and post graduates in allopathy-practitioners. We feel that they also should have the right to practise homoeopathy and allopathy simultaneously.

SHRI MUHAMMED KHUDA BUKHSH: His point is that they should be given equal facilities.

DR. PHATAK; The point is whether an allopath who is trained or on his own liking takes to homoeopathy should restrict himself to homoeopathy alone or whether he should practise both the systems. The student should have thorough grounding in basic subjects like anatomy, phisiology, pathology and so on so that he is competent enough to handle all types of cases and use the system which should be the best for the patient. For example, in the case of typhoid when the palient is having a temperature of 104 to 105 degrees the patient gets toxic let him start using chloromycetin and soon the temperature might come down.

DR. LAXMINARAYAN PANDEYA: No medicine in homoeopathy to control that fever?

DR. PHATAK: There was an open Bangalore in the last discussion in All-India Homoeopathic Conference where all the big homoeopaths were present. Do I name them? Dr. Batra was in the Chair. Dr. Prahlad asked, supposing there is a case of diabetic coma, how will you treat with homoeo? Then he said, find out the symptoms; somebody told me he cured a case of diabetic with homoeo and so on. Dr. Prahlad rose up and said, there are no symptoms; the patient is comatose; if coma deepens he might die. Will you resort to insulin or begin homoeopathy? Then Dr. Harish Chandra rose up and said: supposing outside this hall a patient is there deeply in diabetic coma. How will you proceed? Pin your answer down? Will you allow him to die by a homoeopathic drug to be found out which might prove useful or might not or will you resort to insulin? At this juncture I got up and said: homoeopaths need not be nervous in this particular case. Let an allopathy knowing the difference between allopathy and homoeopathy come in; let him start and inject insulin when the patient might come round; if the blood sugar declines he might come round. Here is just a chance; don't withdraw as a homoeopath. After he comes round you might

get a drug with which you can successfully pull him out.

DR. LAXMINARAYAN PANDEYA: In other words you want to say that homoeopathy is not a complete science.

DR. PHATAK: No science is complete. But there should be no prohibition. Ultimately you are helping a human being and you should have a human approach.

CHAIRMAN: I would like to know Dr. Katakari's clear opinion on this.

DR. KATAKARI: The only thing is proper training should be given in the hospitals to the students. Then they will be able to practise homoeopathic medicine. It is not due to any bias for getting education....

CHAIRMAN: Something is wrong with the acoustics of this hall. May I remind the Members, if they talk there we cannot hear the witness.

DR. KATAKARI: So homoeopathy as a science is complete but we are lacking in our knowledge and that is why we are not able to prescribe some conditions. But we should give full and proper training to the students in homoeopathic hospitals. Ι think homoeopathy is a complete science and we can prescribe many conditions including training in surgical cases also. We should give proper training to the students. We have to give proper training to the students. We have to show them the cases in hospitals so that they may be able to prescribe any homoeopathic medicine.

(Interruption)

DR. PHATAK: Homoeopathy also is a science such as Ayurveda and so on if properly treated. Old practitioners have seen cases and treated cases like typhoid, malaria and tuberculosis much before the invention of antibiolics. chlorymycin, insulin and so on and so forth. The results were equally miserable when treated by homoeopathy just as with Allopathy or AyurvedaSo to mention that homoeopathy today would be able to control these cases which it did not 25 years ago would not be acceptable to that extent. Our therapy in allopathy has gone definitely ahead. A patient with septic fever of 104 degrees was sure to die in the hands of a homoeopath, an Ayurvedic or an allopath previously. All these systems were equally good or equally bad about 25 years ago. Today it has to be changed in view of the latest drugs, antibiotics and other things. Today you won't allow a TB patient to die without streptomycin.

CHAIRMAN: Then you will not treat the cases. The homoeopath will hand them over to the allopaths. Thank you very much.

DR. KATAKARI: A radical difference is there between allopathy and homoeopathy. We think of the cause of the disease and they think of the result of the disease. This is the radical difference between allopathy and homoeopathy.

CHAIRMAN: Thank you.

SHRI N. G. GORAY: Both of you deserve our thanks for the trouble you have taken to come here and give evidence before the Committee. We are almost laymen and we try to understand the difference between allopathy and homoeopathy. This Bill is intended to give encouragement to homoeopathy. In framing the Bill and putting it before Parliament we will be greatly benefited by the evidence submitted by you. I can assure you that whatever you have said will receive our most earnest consideration. Thank you very much.

CHAIRMAN: Thank you, witnesses.

[The witnesses then withdrew]

The Witnesses

[Dr. Behram T. Badhniwalla (President), Dr. Pradesh Vakil (Hon. Secretary) and Dr. K. R. Gala (Hon. Ass.

Secretary)-Representatives of the LCEH Doctors' Association were called in.]

DR. BEHRAM T. BADHNIWALLA: Madam Chairman and Members, on behalf of the LCEH Doctors' Association I would like to present our case to you. You have been listening to people who have a knowledge of homoeopathy. We are from the same institution and we are facing major problems as general practitioners. We have a certain number or problems. I hope you have gone through the memonrandum. Would you like me to read it out?

CHAIRMAN: No, it is not necessary. You please tell u_s in detail what problems you are facing.

DR. BADHNIWALLA: Madam Chairman and Members, our approach to homoeopathy is thoroughly modern-As general practitioners we are faced with certain problems and it is not practicable to deal with them only by means of homoeopathy. We do not get one type of illness or disease. We have to tackle all situations. As a general practitioner one has to be a friend, philosopher and guide. He everything to the patient. We is handle not only the medical branch but also deal with surgical cases. I am practising in a very crowded locality of Bombay. We are practising in the redlight area.

CHAIRMAN: We understand it.

"DR. BADHNIWALLA: A number of people suffer from V.D. We also get cases involving fighting and stabbing. As a physician if I neglect this patient, it will affect my practice. I have to be a doctor and not a homoeopath. I have to treat the patient to the best of my ability and judgment. Cases of foreign bodies in the eyes, etc. come to us. In such cases surgical intervention is absolutely necessary. If we are not trained in this, we cannot do it. We are barred from doing certain things, which is not practicable. We have to be men of the world, sike our colleagues in the other systems of medicine. We have to be in line with them. It is a competitive world and we have to fight for our existence. If our hands are tied, we cannot progress. We should be free to use our knowledge. I hope you will read this a memorandum. Would you like to put some questions?

CHAIRMAN: Members may ask questions.

श्री सुल्तान सिंह : श्राप यह वताइए कि विल में क्या करना चाहिए, इसमें कौन सा प्रोवीजन करना चाहिए ।

DR. BADHNIWALLA: You must make some provisions in the Bill, so that we can practise in collaboration like all other doctors. We are in no way inferior to them. In our case medical bills signed by us are not accepted. I have taken training in some of the recognised hospitals locally.

SHRI N. P. CHAUDHARI; For how long have you taken training?

DR. BADHNIWALLA: For six months I have taken training in the Red Cross Hospital and other local hospitals in Bombay, in various departments. We have got institutional training. We feel that there is no difference between us and the other doctors. Yet we are barred from issuing certificates in the case of Air-India staff and other Government offices. We are treated as inferior. We want to have status on par with all other physicians of different faculties.

CHAIRMAN: You want that 'n the case of all doctors who are institutionally trained their certificates should be recognised by the State Government, by the Government of India and o'her allied organisations.

DR. BADHNIWALLA: Yes.

CHAIRMAN: We have got your point. Next point.

श्रो सुल्तान सिंह : ग्राप जिन इंस्टीट्-यूगन्स में ट्रेनिंग लेते हैं, डिप्लोमा लेते हैं वे एफीलिएट क्यों नहीं होने चाहिए, इसके बारे में ग्रापकी क्या राय है ?

DR. BADHNIWALLA, It should be affiliated to the university.

SHRI K. C. PANDA: Have you tried it in your State? Have you applied to any university?

DR. BADHNIWALLA: There is nobody to listen to us.

SHRI K. C. PANDA: What are the rates of fees charged by you?

DR. BADHNIWALLA; For consultation a general practitioner charges Rs. 10/-. Then, it will depend on the number of medicines and the number of days for which he treats the patient.

(BHRI K. C. PANDA: What is the muximum rate and the minimum rate charged by you in Bombay and Poona?

DR. BADHNIWALLA. My colleague here will be able to answer it better.

DR. PRAKASH VAKIL: I am Dr. Prakash Vakil. I am the Hon, Secretary of this Association.

CHAIRMAN: You earn Rs. 10,000/a month. Am I correct?

DR. PRAKASH VAKIL Yes, but 1 am paying income tax.

DR. BEHRAM T BADHNIWALLA: You are not taking the income-tax into account as evidence I hope.

DR. PRAKASH VAKIL: Madam, it all depends upon the experience. There are some homocopulus in Bombay who are charging Rs. 40 for consultation. But they are from the older age group.

SHRI K. C. PAND 1: How many in number, approximately:

DR. PRAKASH VAKIL: About 25 to 30.

SHRI K. C. PANDA: Have you any information whether they have got any institutional training or not.

DR. PRAKASH VAKIL: They are institutionally trained, but in the other systems of medicine.

SHRI MUHAMMED KHUDA BUKHSH: They want Rs. 40? Are they homoeopaths from the beginning or allopaths-turned homoeopaths?

DR. PRAKASH VAKIL: They are allopaths-turned homoeopaths. There are some who are trained in Ayurveda; they have also undergone training in homoeopathy. The new generation, they charge about Rs 20 for consultation for the first time and later on they charge for the medicine. Consultation takes from half-an-hour to threequarters-of-an-hour. During this period, if he has to do general practice, he will see many patients.

CHAIRMAN: By consultation, you mean the cases referred to you by other doctors?

DR. PRAKASH VAKIL. Including those cases and other cases of patients suffering from chronic ailments and they are cured by us.

DR. BEHRAM T BADHNIWALLA: We are a new generation, modern generation.

SHRI K. C. PANDA: Do you want that a certain fee to be prescribed for the homoeopaths according to qualifications?

DR. PRAKASH VAKIL: It is not fixed for the allopathy people, so why should it be for us?

CHAIRMAN: Your question is not understood by the Chairman.

SHRI K. C. PANDA: Beginning from Rs. 4, Rs. 8, Rs. 16 and so on, the allopaths charge according to the resolution of their Council or Association. Do these people want that like fees should be fixed? CHAIRMAN: Why-have you got like that fixed for the allopath doctors?

SHRI K. C. PANDA: I think it is so.

CHAIRMAN: The question is disallowed, no comment on that.

SHRI M. SATYANARAYAN RAO: In your State, apart from homoeopathy, have you got the Ayurveda and Unani system?

DR. BEHRAM T. BADHNIWALLA: About syllabus? I think it is one of the best syllabuses any medical college can have. We have a syllabus of complete homoeopathic therapeutics, the full range of homoeopathic syllabus, a part of Ayurveda and Unani and a part of the allopathic practice.

SHRI M. SATYANARAYAN RAO: Can you tell me the percentage?

DR. BEHRAM T. BADHNIWALLA: About 60 per cent homoeopathy, 40 per cent of all the other three.

CHAIRMAN: Dilution.

DR. BEHRAM T. BADHNIWALLA: What I feel is that if homoeopathy is to flourish, it has to be done in line with the other systems of medicine. Otherwise, there is no chance for homoeopathy because there is so much of tough competition. What was the status of a homoeopath before? He was either a man working in a mill or a beediwalla or a panwalla who had taken up this wonderful science and has put it in the wrong place. I do not blame intelligence, but he is not qualified in the sense that he has learnt it only through experience. But that would lead to the downfall or homoeopathy. I will give you the case of diptheria. I will not name the person concerned. A case of diphtheria was attended to by one of the unqualified men thinking that he would cure it, leading to the death of the patient because he did not know to distinguish between quinsy and diptheria. If he had known the distinction, he would have immediately referred the case to the hospital and saved the patient's life. We have gone through the institutional training, we have seen the cli-

CHAIRMAN; You are an unscheduled association. So, we cannot give you much time. There are other witnesses who are waiting. What you want from this Committee is: (1) Recognition of your certificates by the State Government, the Central Government and by the allied organisations. (2) You want facilities for work both as homoeopath and, if necessary, to set patients right by other systems of medicine. (3) You for want a strict syllabus not only homoeopathy but for other sciences also deal with emergency to cases. ک ہے۔

DR. BEHRAM T. BADHNIWALLA: Our doctors should be allowed to practise in Government hospitals. ESI should take us up and we should achieve things which are due to us.

- CHAIRMAN: No homoeopath doctors in the ESI? They have the right of employment by it. If it is not done anywhere, we will take it up with them.

DR. PRAKASH · VAKIL: On the Homoeopathic Council which is to be constituted, we are outnumbered because there are many homoeopaths who are registered on the basis of experience. We want special seats reserved for us,

CHAIRMAN: There is scope for nomination also.

DR. BEHRAM T. BADHNIWALLA: In the NB to our memorandum, we have said.

"Though it is not concerned with the above Bill, we humbly request the honourable Members to use their good offices to help us in making our alma matter. (The Bombay Homoeopathic Medical College, Irla, Bombay 56) thoroughly modern institution imparting education in Homoeopathy, and the pride of our country so that some day it will be imparting education not only to students in India but students coming from abroad. This can be achieved by liberal financial support from the Central Government."

श्वी देशमुल : म्राप यहां पर ग्राए ग्रौर जो म्रापने सुझाव दिए उनके लिए हम ग्रपना ग्राभार प्रकट करते हैं । धन्यवाद ।

DR. BEHRAM T. BADHNIWALLA: Our future depends upon you, Gentlemen, Thank you.

[The witnesses then withdrew]

[Witness (Dr. Smt) Vimal Wazulwar, Lecturer in the Nagpur College of Homoeopathy and Biochemy, was called in.].

साक्षी : सबसे पहली बात मैं यह कहूंगी कि मैं यहां पर हिन्दी में जवाब दूंगी । में नागपुर होम्योपैथीक कालेज में लेक्चरर हूं गायनोकोलोजी एंड मिडवाइफरी की ।

चेयरमैन ः म्रापके कालेज में कितने बेड हैं ?

🛶 साक्षी : बेड नहीं हैं ।

चेयरमन : स्टूडेन्ट कितने हैं ।

साक्षी : 125 स्टूडेन्ट हैं।

चेयरमैन : फर्स्ट इयर में कितने हैं ? साक्षी : 50। चेयरमैन : त्रापका काइटेरियन त्राफ एडमिशन क्या है ?

साक्षी : हम एस० एस० सी० या मैट्रिक विद फिजिक्स एंड केमिस्ट्री लेते हैं।

श्रो सभापति : ग्राप के यहां कैसे स्टूडेंट्स ग्राते हैं ? सब थर्ड डिविजनर्स ही ग्राते हैं या ग्रच्छे किस्म के स्टुडेंट्स भी ग्राते हैं ?

साक्षी ः ग्राम तौर पर सैंकिंड डिवोजन के स्टूडेंट्स ग्राते हैं ।

श्री सभापति : त्राप के यहां मरीजों के लिए बेढ्स रखने का कोई प्रस्ताव है क्या ?

साञ्ची : नहीं ।

श्री सभापति : बेड्स रखने का विचार अग्रप का क्यों नही है ।

साक्षी : क्योंकि जो पेसेंट्स ग्राते हैं उन को दिखा कर ही ग्रपने स्टूडेंट्स को हम बता सकते हैं कि किस बीमारी का कैसे ग्रौर क्या इलाज किया जा सकता है।

श्वी मुह्भ्मद खुवा वस्ता: ग्राप ग्रपने स्टूडेंट्स को क्या कहीं ग्रीर कुछ सीखने या पढ़ने के लिए भेजते हैं ।

साक्षी : जी नहीं ।

श्री मुहॅम्मद खुदा बरुश : गयनोकालोजी ग्रादि के बारेमें भाष उन को कैसे शिक्षा देते है ?

साक्षी : म्रपने यहां रख कर ही हम उन को सब बता देते हैं।

श्रीमती सविता बहिनः दूसरी मेडिकल पैकेलेटीज में जैसी प्रेक्टिकल ट्रेनिंग देना जरुरी होता है उस के लिए ग्राप के यहां क्या करते हैं? कैसे स्टूडेंट्स को ट्रेनिंग देते हैं?

साक्षी : जो पेशेंट्स झाते हैं उन को हम अपने यहां देखते हैं और उन का इलाज अपने यहां ही करते हैं। हम लोग कोई सर्जन नहीं हैं। अगर सर्जरी के केसेज झाते हैं तो उन को हम दूसरी जगह भेज देते हैं। श्री सुलतान सिंहः माप के यहां का कोर्स कितने साल का है?

साक्षी: तीन साल का।

श्री सुलतान सिंह : आप की क्वालिफि-केशन क्या है ?

साक्षी : मैं एम॰ ए॰ डी॰ एच॰ वी॰ ह ।

श्री सभापति : ग्राप के यहां एक्यूट केसेज जो भ्राते हैं उन के लिए ग्राप क्या करती हैं ? श्राप डेप्यीरिया के केसेज के लिए क्या करती हैं ?

साक्षी : होम्योपैथी में डिप्यीरिया के लिए दवाइयां हैं, डायविटीज के लिए भी दवाइयां हैं, ग्रौर हम उन को ठीक करते हैं।

श्री सभापति : ग्राप के यहां ग्रगर किसी वीमारी के लिए केसेज न हों तो ग्राप उन को या उन के वारे में स्टूडेंट्स को कैसे बताती हैं ?

साक्षी : ग्रो० पी० डी० में सव तरह के केसेज ग्राते हैं।

श्री सभापति : ग्राप के ग्रो० पी० डी० की ग्रटेंडेंस कितनी है ?

साक्षी : रोज 72 से 75 मरीज तक हो जाते हैं।

भी सभापति : भाप मरीजों से कुछ चार्ज करते हैं ?

साक्षी : हम रोज मरीजों से दस नया पैसा सेते हैं ?

श्री सभापति : तो दवाइयां कहां से देते हैं ? साक्षी : दवाइयां हम इंस्टीटयूशन की तरफ से देते हैं।

भीमति सविता बहिन : ग्राप दवाइयां फी देते हैं या उन से कुछ पैसा ले कर दवाइयां देते हैं ?

साक्षी : हम उन से केवल दस नया पैसा लेते हैं चाहे ग्राप उस को दवाई का दाम समझ लें या कुछ ग्रीर समझें ।

CHAIRMAN: Mr. Deshmukh, will you kindly visit this college and give us a note?

SHRI T. G. DESHMUKH: I have visited this college many times.

श्री सभापति ः ग्राप इस के बारे में ग्रपनी ग्रोपीनियन बताइये ।

श्री टी॰ जी॰ देगमुज : यह कालेज नागपुर में सब से बड़ा कालेज है ग्रीर बहुत पापुलर है ।

श्रीमती सविता बहिन : ग्राप की राय में क्या यह जरूरी है कि केवल एक्सपीरियस, तजुर्वे के ग्राधार पर ही होम्योपैथिक डाक्टरों को रजिस्टर किया जाय या उसके लिए उन के पास कोई डिग्री या डिप्लोमा होना जरूरी है ? होम्योपैयी की प्रेक्टिस के लिए जो उनका तजुर्वा है वह ही काफी है या उसके ालए उनके पास डिप्लोमा या डिग्री होनी चाहिए ?

साक्षी : जो पहले से पढ़ाई करके प्रेक्टिस कर रहे हैं उन को तो डाक्टर के तौर पर रजिस्टर करने में कोई हर्ज नहीं है ।

श्रीमती सविता बहिन उन दोनों में कौन सही हैं ?

साक्षी : मेरी राय में तो उन दोनों को रजिस्टर करना चाहिए । श्री दी० जी० देशमुख: ग्रनुम व ग्रौर डिग्री में श्राप किस को मच्छा समझती हैं ?

साक्षी : एक्सपीरियेंस के साथ में ग्रगर किसी के पास डिप्लोमा या डिग्री हो तो वह बहुत ग्रच्छा होगा । वह दूध में शक्कर के समान होगा, लेकिन खाली एक्सपीरियेंस भी हो तो उन को रजिस्टर करना चाहिए ग्रौर उनके लिए प्रेक्टिस करने में कोई वाधा नहीं होनी चाहिए ।

श्री एन० जी० गोरेः म्रमी म्रगर हम सब कुछ मनुभव पर छोड़ दें तो मनुमव में तो बहत कमी देशी हो सकती है, लेकिन इंस्टी-ट्यू मन की पढ़ाई के वाद सो कुछ स्टैंडई आ जाता है। अनुभव तो किसी के पास थोड़ा हो सकता है और किसी के पास बहुत हो सकता है। तो इस के मायने यह नहीं होने चाहिए कि वे सब समान व्यवहार के काविल हो जायें । इसी लिए हम इंस्टीट्यूशनल ट्रेनिंग की वात करते हैं। अगर अनुभव पर सब छोड़ देंगे तो नापना मुश्किल हो जायगा ।क कौन भ्रच्छा है श्रौर कौन वुरा । श्रगर इंस्टीट्यूशनल ट्रेनिंग के साथ ग्रनुभव हो तो वह दूध में शक्कर की बात हो सकती है लेकिन स्टैंडर्डाइजेशन के लिए इंस्टीटयुशनल ट्रेनिंग का होना जरूरी समझा जाता है ।

साक्षी : अनुभव को नापने में ग्राप को सकलीफ हो सकती है लेकिन जो हमारे पास पेशेंट्स ग्राते हैं वह डाक्टरों को सुरन्त नाप लेते हैं कि किस डाक्टर की दवाई से वह जल्दी ग्रच्छे हो सकते हैं । इस लिए अनुभव को नापना मुश्किल नहीं है ।

श्रीमती सविता बहिन : जिन डाक्टरों को पैशेंट्स ग्रपने अनुभव के ग्राधार पर समझ लेते हैं कि वे ग्रच्छे हैं ग्रौर वे पेशेंट्स के लिए ग्रच्छे साबित होते हैं तो फिर वे किसी टैस्ट से क्यों घबराते हैं । उन को तो किसी डिप्लोमा या ट्रेनिंग को लेने में कोई घबराहट नहीं होनी चाहिए ?

1648 RS-12.

साक्षी : एक्सपीरियेंस्ड आदमियों को धवराने की कोई जरूरत नहीं होगी !

डा० लक्ष्मी नारायएा पाण्डेय : झाप के कालेज में कोई विल्डिंग फीस भी ली जाती है या कोई एकमोडेशन फीस भी ली जाती है ?

साक्षी : बिल्डिंग फीस हम लेते हैं ग्रौर हम ग्रपने कालेज के लिए डोनेशन लेते हैं । ग्रपने कालेज के नाम से फीस लेते हैं ।

श्वी सभापति : उन को स्टेट गवनमेंट भी कुछ नहीं देगी श्रौर सेंटर भी कुछ नहीं देगा तो कोई कालेज चलेगा कैसे ग्रगर वह किसी से कुछ नहीं लेंगें। जरूर लेना चाहिए।

डा० लक्ष्मी नारायएा पाण्डेय : कितना पैसा लिया जाता है श्रीर किस नाम से लिया जाता है ?

श्री सभापतिः किसी भी नाम से लिया जाता हो, वह ठीक है।

श्री चिरंजीव झाः कुछ लोगों ने हम को यह वतलाया है कि डिप्पारिया या डायबिटी ख जैसे रोग होम्योपैयी से नहीं ठीक हो सकते। उन के लिए एलोपैथिक इलाज जरूरी है। इस वारे में ग्राप का क्या विचार है?

साक्षीः ग्राप को किस ने क्या वतलाया यह मुझ को नहीं मानूम, लेकिन होम्पोपैयी में सब तरह की दवाइयां हैं ग्रीर उनसे सभी वीमारियां ग्रच्छी हो सकती हैं। ग्रगर मर्ज ग्रच्छान हो पाये तो कसूर डावटर का हैं . दवाइयों का नहीं।

श्री चिरंजीव झा : जो एलोपैथी के डाक्टर हैं मौर होम्धोपैथी प्रेक्टिस करते हैं उन के सम्बन्ध में ग्राप का क्या विचार है ?

साक्षीः उनको ऐसा नहीं करना चहिए ।

स की नहीं, सजा तो नहीं दी जानी - चमहिए ।

भीमती सविता बहिन : कितने साल की प्रेक्टिस के वाद एक होम्योपैथिक डाक्टर + परफेक्ट हो. जाता है ?

1 7 4 mm साक्षीः कम से कम दस साल की प्रे क्टिस **के बाद** एक डाक्टर परफेक्ट हो जाता है ।

Sax.

CHAIRMAN: It does not make any-difference. Sometimes a person may not have any patient even in ten years while another person may have sufficient number of patients within only two months.

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Anyway, I find robust optimism in the replies given by the representative of the Nagpur College and I congratulate her on your behalf on giving such efficient replies to all the questions put. I invite her to the lunch that we will be having here at 1 O'clock.

[The witness then withdrew] 4

- . [The Witnesses Dr. K. Prahlad, Dr. S. R. Wadia and Dr P. Sankaran were called in.]

DR. PRAHLAD: Chapter II, clause 3(c) says:---11 2

"Such number of members, not exceeding thirty per cent of the total number of members elected under clauses (a) and (b), as may be nominated by the Central Government, from amongst persons having special knowledge or - practical experience in respect of homoeopathy or other allied medical disciplines". - 14

Now, I just want to ask what is the meaning of "special knowledge or practical/experience"?

CHAIRMAN: You do not ask us anything .- You are only to say something.

SHRI N. G. GORAY: You can give your suggestion

PRAHLAD: In regard to DR. "special knowledge", suppose a man has practised only for three or four years and he says he has special knowledge. Then he become eligible for election to the Central Council.

What is your sug-CHAIRMAN: gestion?

DR. PRAHLAD: My idea is that those who have had twenty years' experience and more and who have practical knowledge of it should be elected as members, not only those who have studied in an institution and practising just for five years. Now, he is taken as having special knowledge and he can be elected or nominated to the Central Council.

SHRI MAN SINGH VARMA: You want to define "special knowledge".

DR. PRAHLAD: Yes.

SHRI BHAOOSAHAIB DHAMAN-KAR: Does that include allopaths gualified in homocopathy?

DR. PRAHLAD: Please excuse me. If I may put forward my own case, I am an allopath and I have put in homoeopathic practice for the last forty years. My father who was allopathic doctor asked me to an take up homoeopathy and I did so. I have been practising homoeopathy for the last forty years, though originally I was an allopath. My friends know how much practice I am doing in homoeopathy

PAN-DR. LAXMINARAYAN DEYA: Have you not registered yourself as a homoeopath?

DR. PRAHLAD: I am registered as a Homoeopath. I · am a member of the task force under the Planning **Commission** of the Government of India. I am a member of the pharmacoepia. Still according to the provision in this Bill I am not eligible.

SHRI MAN SINGH VARMA: You are eligible for registration.

DR. PRAHLAD: I am talking of Maharashtra. They do not consider me to be eligible, although a man who has had institutional training for two years is eligible.

SHRI BHAOOSAHAIB DHAMAN-KAR: Allopathy is taboo to them.

SHRI MAN SINGH VARMA: Do you want election or nomination?

DR. PRAHLAD: I want nomination. I am a non-Maharashtrian.

CHAIRMAN: That is not the point. When we find that there is a person with vast experience and knowledge of the subject, the Government has every right under this statue to nominate him to the Council. If it is a question, we have to make certain provisions under the statue. If we are concentrating on vomination, there will be no diffialty. Next point.

DR. WADIA: While supporting my friend, Dr. Prah'ad, I would like to add this. In the case of "special knowledge", he must have been a lecturer. It is not enough if he has read some books. The basic foundation is missing. He must have practised for twenty years or more and he should have been a lecturer in a college.

CHAIRMAN; It is at the discretion of the Government of India. They will be the nominating body. The sentence reads:—

".....as that Government thinks"

Next point.

DR. SANKARAN: With your pernission I would like to mention four points. The first point is that in Chapter 7 there is a provision saying one member from each university is to be elected. At present we do not have many universities having the homoeopathic department. So, I request that till the universities have the homoeopathic department, the principles and teachers may be allowed to elect their representatives.

CHAIRMAN: May I suggest that you forget for a moment that provision in Chapter II. Would you please suggest what should be the character of the Council and who should be nominated and who should be elected for the improvement of the Central Council? What is your specific suggestion? You do not have to go by this.

DR. PRAHLAD: With your permission may I answer the question?

CHAIRMAN: Has Dr. Sankaran no suggestion to make?

DR. PRAHLAD: Perhaps he has not understood the question.

CHAIRMAN: I may explain it. We have suggested some clauses under the caption: Constitution of the Central Council. Please forget fur a moment the provisions which are already there in the Bill. You were asked to suggest how to constitute the Central Council? Who should be 'he members, who should be elected and who should be nominated and on what criteria?

DR. SANKARAN: I think 75 per cent should be elected and 25 per cent nominated.

CHAIRMAN: Elected by whom?

DR. SANKARAN: According to the register of practitioners maintained at the Union level. Twenty five per cent should be nominated

- CHAIRMAN: What category of people should be nominated?

DR. SANKARAN: Those who have rendered eminent service to the cause of homoeopathy. There are certain types of people who will not stand for election simply because they are very senior and they would not care to contest.

CHAIRMAN: The Government will have discretion.

SHRI N. G. GORAY: Just now one of your colleagues suggested that the man to be nominated should have the additional qualification of being a lecturer in some college. Do you agree with it?

DR. SANKARAN: I do not think is quite necessary. I believe that any person who is qualified and has rendered eminent service can be nominated. But the Government should take care that even in the nomination at least three-fourths of them are qualified persons.

DR. PRAHLAD: I corroborate his statement that election or nomination should be from the institutionally trained persons and not from persons who have simply registered themselves but who have been practising for a long time because this election or nomination is not only for the present, it is also for the future. It is the future that you have to see. Therefore only institutionally trained and qualified doctors should be taken.

CHAIRMAN: That is for nomination?

DR. PRAHLAD: For election also.

CHAIRMAN: Then you are not agreeing with Dr. Sankaran's suggestion that 75 per cent seats should be elected by the registered medical practitioners and 25 per cent should be through nomination.

DR. URAHLAD: Although we are friends, there can be a little difference of opinion.

CHAIRMAN: You tell us what kind of Council you visualise. DR. PRAHLAD: I would certainly prefer institutionally trained people.

CHAIRMAN: What is the proportion?

DR. PRAHLAD: I leave the proportion to the Government.

SHRI BHAOOSAHAIB DHAMAN-KAR: Allopath-trained homoeopaths should be disqualified?

DR. PRAHLAD: They are better off.

CHAIRMAN: Your reply should have been, if I were in your position I would have said, that when an allopath practises homoeopathy by getting registered as a homoeopathic practitioner and does not make even one single prescription in the allopathic system, he should be known as a homoeopathic practitioner, and we should forget his past, whether he has passed through it, whether he had had a degree in MBBS, in allopathy. Your reply to Mr. Dhamankar is that only person who are trained in homoeopathy and practising homoeopathy should be there.

DR. PRAHLAD: I quite agree. But there are certain things. We have to resort to other things also to save the life of a person, which is more important than seeing whether one is practising allopathy or homoeopathy. But one should have experience.

CHAIRMAN: Let the question be specific about the constitution of the Central Council. That is the very vital thing. What proportion do you want to have of the institutionally trained people? All?

DR. PRAHLAD: Yes, all, whether nominated or elected, should be institutionally trained. CHAIRMAN: What do you do with the registered practitioners who are not institutionally trained but who have the experience?

DR. PRAHLAD: They should be allowed to practise but they should not be allowed to be brought at the selm of the affairs.

SHRI N. G. GORAY: Your idea is that those registered but who are not-institutionally trained should be excluded?

DR. PRAHLAD: Automatically.

CHAIRMAN: You should give scope for the institutionally trained.

DR. WADIA: If the Government of India feels that homoeopathy should come forward, I strongly recommend that only qualified doctors should be allowed to come on the Central Council. Otherwise, the Council will be in trouble as it is in Maharashtra. And people like US are discarded and the progress of homoeopathy will be at a standstill as it is Maharashtra.

CHAIRMAN: The three witnesses —I conclude—are proposing that only institutionally trained homoeopaths should get the chance to be the members of the Central Council. Any question in this specific item because the Central Council and the Committee provision has to be recast by us and we should know the mind of the homoeopaths?

श्री मान सिंह वर्मा : डा० प्रहलाद, ग्राप ने यह कहा है कि केवस इंस्टीट्यू सनसी ट्रन्ड डाक्टर्स को ही मेम्बर बनाने का प्रधिकार होना चाहिए उस के संबंध में मैं यह जानना चाहूंगा कि क्या ग्राप बता सकते हैं कि संपूर्ण देश में इंस्टीट्यू शनली ट्रेंड डाक्टरों और जो - इंस्टीट्यू शनली ट्रेंड नहीं हैं उन दोनों में किन की तादाद ज्यादा है ?

डा॰ प्रहलाद : मन ट्रेंड डाक्टर्स मपने देश में बहुत ज्यादा हैं, लेकिन मगर इस में सुम्रार न किया जाय तो यही चलता जायगा म्रीर दूसरी बात यह है कि जैसा मेंने पहले मर्ज किया, हमारे लिए मादमी की नाइफ ज्यादा इंपार्टेंट है वन्स्पित किसी पैयी के। जो लोग नहीं जानते कि लीवर क्या है ग्रीर उस का इलाज कैसे होना चाहिए, उस का फंक्शन क्या है तो वह कैसे समझेंगे कि लीवर की बीमारी क्या होती है। हम ने केवल ग्राज की बात नहीं सोची है। चाहे हमारे प्रनटेंड आदमियों की तादाद भले ही ज्यादा हो, लेकिन हम को ग्रागे की बात सोचनी चाहिए ग्रीर उस में सुधार करना चाहिए क्योंकि हमारा मुकावला उन लोगों से है जो कि हम से ज्यादा ट्रेंड ग्रीर क्वालीफाइड हैं। ग्रीर इसी लिए हम को इस में ट्रेंड ग्रीर क्वालीफाइड ग्रादमी लेने चाहिए।

श्वी सान सिंह बर्मा : हमारे देस में प्रनट्रेंड होम्योपैथिक 'डाक्टर्स ही ज्यादा है मौर ऐसे ही लोगों द्वारा होम्योपैथी का प्रचार इस देश में हुम्रा है मौर जो इंस्टीट्यू शनस म्राज हम को नजर म्रा रहे हैं वे ऐसे ही लोगों द्वारा चलाये गए हैं मौर उन के द्वारा ही होम्योपैथी को उपर उठाने की कोशिश की गयी है। तो इस प्रकार के लोगों की संख्या मधिक है तो उन के लिए म्राप कह सकते हैं कि दुझ साल का या वीस साल का एक्सपी-रियेंस होना जरुरी है। लेकिन जो होम्योपैथी साइंस की म्रागे बढ़ाने वाले हैं क्या उन को एक दम डिवार कर देना डेमोकेसी में इस प्रकार ठीक होगा।

डा॰ प्रहलाद : हम कहते हैं कि उन को प्रेक्टिस करते का ग्राधकार रहना चाहिए प्रोर दूसरी वात यह है कि हमारी होम्योपैथी के वे टार्च वियरस जहर है लेकिन यह हमारी साइंस की सक्सेस है कि जिस की वजह से एक ग्रनएँजूकेटेड ग्रादमी भी ग्रगर ठीक दवा दे देता है तो बीमारी ठीक हो जाती है। जैसे किसी बज्जे के हाथ में बंदूक दे दी जाय गौर यह गोली चला दे, निशाना ठीक लग जाने से काम पूरा हो जाता है नहीं तो कोई बात नहीं। वही बाद इसमें है

مريغ**و**يد ويوغون م ग्राज कालेज से निकल कर ग्राया है ग्रीर ग्राप को इस में 40 वर्ष का मनुभव है तो आप ईमानदारी से बतलायें कि क्या आप उस को अपने से सुपीरियर मानेंगे ?

डा के प्रहलाद : प्रगर वह एलोपैथी में ट्रेंड है और एम० डी० है तो मैं उस को अपने से सुपीरियर मानने के लिए तैयार हूं । नालेज छोटे ग्रौर बड़े दोनों मैं मिल सकती है ।

-CHAIRMAN: We wanted their honest opinion about the formation of the Council. They have given their opinion. Whether we accept it or not is entirely for us to decide. We need not argue on that

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Now I want one clarification. Dr. Sankaran, you said that 75 per cent should be elected by the registered practitioners. Both Dr. Prahlad and Dr. Wadia have said that all should be institutionally trained people. Shall we put it like that?

DR. SANKARAN: I believe- that the register which will be maintained under the Act will only consist of qualified practitioners. That is my impression and when I say that the registered practitioners should elect, it will be from this group of qualified practitioners.

CHAIRMAN: It is not clear yet. Do you want to give some seats to the registered practitioners also or do you want to give all to the institutionally trained people only?

DR. SANKARAN: Seventy-five per cent should be institutionally trained. 13512 R.N. +

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CHAIRMAN: And 25 per cent may be for the registered people?

DR. SANKARAN: Yes.

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SHRI N. G. GORAY: I may suggest a via media. Suppose, in recognition of what these self-educated people have done for homoeopathy

•. • • we say that for the first 10 years we will give them some representation and after 10 years, only those who have been institutionally trained will be represented, so that they gradually fade out, what will be your reaction? It is not as if we derecognise the whole tribe immediately. Let them get this opportunity for the first ten years, and after 10 years, everybody should be properly trained.

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DR. SANKARAN: The question is, as far as we see, the functions of the Council will consist ot creating standards of education, examination, etc. We believe that institutionally trained persons are better qualified for this purpos.

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SHRI N. G. GORAY: I agree But for the sake of the work that they have done when there were no institutions at all-they have done some service for the cause of homoeoeopathy-we, can provide that for the next 10 years, until we provide for the necessary training, education, etc. these people will have certain rights.

and the second second - DR. SANKARAN: What is going to happen is, in course of time they will disappear · · · because in all the States only institutionally qualified practitioners are being registered. This problem will solve itself in 10 or 20 years. -----

SHRI N. G. GORAY: Till then we can provide something for them.

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DR. SANKARAN: I feel that 25 per cent should be given representation for this simple reasons that they are 1 lakh of people and the qualified people are only 9,000. In a democratic institution, we must give representation to them.

CHAIRMAN: The next point is about definition. Clause 2(1) (d) says that "Homoeopathy" means the system of medicine founded by Doctor Samuel Hahnemann. Is it all right?

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DR. SANKARAN: It is quite all right. ę٠ . .

CHAIRMAN: Dr Prahlad?

DR. PRAHLAD: It is all right

A CHAIRMAN: Dr. Wadia?

DR. WADIA: It is quite all right.

SHRI N. G. GORAY: What about biochemistry?

DR. WADIA: It is an integral part of homoeopathy. 5.11 ÷.

CHAIRMAN: You don't feel it neces. sary to 'include "and biochemistry founded by Dr. Schussler"?

DR. WADIA: Not necessary at all. It is an integral part of homoeopathy.

श्री मान सिंह वर्मा : प्रापका कहना यह 🕨 है कि डा० हनीमैन ही हो योपैथी के फाउ-न्डर है ब्रीर वायोकीमक को फाउण्डर दूसरे हे?

डा० वाडियाः उसके बाद तो कितने ही एडीशन हो गए। c:

डा० लक्ष्मी नारायन वाण्डेय : झाप इस डेफनीशन में कोई बदलाव नहीं चाहते ?

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DR. PRAHLAD: Even Schussler followed the same principle. But he found out 12 salts out of that.

CHAIRMAN: The next point is about the State Register of Homoeopathy. Now you have a system of "enlisted "homoeopaths". How do you provide for them, if we keep this definition of "State Register of Homoeopathy"?" · · · · ·

DR. WADIA: I can speak only about my own State; I have been Chairman of the Tribunal and President of the Board for a number of years. Here the enlisted practitioners have been taken

on the list-they are listed-just because they were practising on such and such date. No knowledge was required. no practice was required. These are unregistered practitioners.

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DR. PRAHLAD: If we come to the conclusion that those people who have put in more than 10 years' practice are registered practitioners and those who have still not put in practice for 10 years are enlisted practitioners, then when they complete 10 years, they will become registered practitioners.

CHAIRMAN: After we pass this Bill into an Act, there is no scope for enlisted homoeopathic practitioners. What do you do with them?

DR. SANKARAN: 1 think personally it is very unfair to a group of practitioners, because they were promised a kind of examination and that they would be registered after that. But they have not been registered. Although some of them have practised for so many years, they have not been registered. If the Parliament has the power, I think all those enlisted people should be made registered practitioners.

SHRI K. C. PANDA: I would like to know whether there should be a test or not. If there should be a test, what will be the criteria? 17

DR. WADIA: In the first Bombay Act of 1951, the examination was specified. But that examination was never held.

DR. P. SANKARAN: No," there was no examination held. The Government cancelled the clause and continued to treat them as enlisted men.

CHAIRMAN: It is not fair.

DR. P. SANKARAN: It is not fair because even today several States are registering new people while these people have already practised for fifteen to twenty years.

DR. PRAHLAD: Therefore, our request is these enlisted persons must be registered in Maharashtra aloite.

CHAIRMAN: That means without sitting for the examination automatically, or after sitting for an examination?

DR. PRAHLAD: Those who have put in more than a certain number of years.

DR. P. SANKARAN: There should be some kind of training given to them when they are asked to sit for an examination.

CHAIRMAN: Understood. Next question is about admissions to medical colleges. We find in Bombay except in one college there is no provision for any indoor beds. What is your reaction to it? Do you think to call a hospital means beds attached to it?

DR. P. SANKARAN: We believe that no medical college can be really called a medical college unless there is an indoor ward attached to it so that all kinds of cases can be treated there.

DR. PRAHLAD: Without a hospital, personally I feel, how can we give training to our students? There are certain cases which the homoeopaths can treat at home. That is not the end of it. We have got certain accidental cases, certain cases, where we have to keep the cases under observation. Unless we have observation, how can we treat them? We cannot play with the life of the patient.

DR. WADIA: This is a very very important question. This question has been sidetracked and people have been bamboozled into believing that homoeopathy is such a foolish science that there is no hospital required for it. Have you heard of a science college without a laboratory, an engineering college or a technical institution without a workshop? How can there be a homoeopathy medical college without a hospital? This is a must, and there should be a proportion of at least one bed to one student. And if you don't have a hospital, these colleges should not be given any recognition.

CHAIRMAN: Excuse me, Dr. Wadia, you were the chairman of the Board and the Board gives recognition. How can your colleges get recognition without the Board?

DR. WADIA: I am very happy that this question has been asked to me. Madam, the proportion of qualified doctors on the Board or in the State of Maharashtra is microscopic. The Director of Medical Services knows why I was sending a dissenting note. I sent a dissenting note. But decisions are taken by majority, and in the face of opposition the boys are turned out without any training. They are not homoeopaths in the real sense. They are not biochemists. They are not doctors in any sense. They only get a diploma. And after that 50 to 60 per cent are working office clerks, stenotypists, small shop-owners, etc. If you want to have this type of homoeopathic doctors in future, God alone can save us. I only recommend to this Parliament which is a highly qualified body that this is a must and there should be no exception to the rule.

CHAIRMAN: Friends, is it enough proof to show us that only qualified, institutionally qualified, people should be members of the Board?

SHRI N. G. GORAY: Because, otherwise what happens is this. I would like to ask one question. The point is if you insist that for proper training of a homoeopath hospitals are necessary, then the category of self-taught people is really finished. How can they teach themelves homoeopathy without even going to hospitals and attending patient?

DR. PRAHLAD: With due respect, I have already pointed out that unless we bring about persons who are institutionally trained, how are they going to know.....

SHRI N. G. GORAY: I. am. support-

DR. PRAHLAD: Therefore, institutionally trained persons are a necessity. They must be trained in the hospitals. At least in Bombay, I can say, we have got a hospital where we give them proper training.

SHRI BHAOOSAHAIB DHAMAN-KAR: Will you clarify, what is the ratio of beds you suggested?

DR. WADIA: One bed for every one student. That should be the minimum.

SHRI K. RAMAKRISHNA REDDY: What about the duration of the diploma course?

DR. WADIA: We are of the opinion that at least 4 years' institutional training must be given.

CHAIRMAN: For degree or diploma?

DR. WADIA: After teaching for several years I have come to the conclusion that the student who has passed intermediate science or learnt the basic principles of physics, chemistry biology, etc. is better suited, he understands medicine better, and he understands homoeopathy better. Here we have the example of Dr. Samul Hahneman. He was not an ordinary man. He would not have risen to these heights today otherwise. Today he is remembered all over the world His birthday is celebrated in America. Recently when I was in Washington, I saw Hahneman statute there. It is a land in which he was not born, a land which he never saw. But because of his knowledge of biochemistry, because of his knowledge of physics because of his knowledge of biology, because of his knowledge of philosophy, because of his great learning, he is remembered all over. So a student who is learning homoeopathy should have not only a School Final Examination but further two years of pre-medical in which he has learnt science well. This is my bonest opinion. · .

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SHRI K. RAMAKRISHNA REDDY: then what about degree courses?

DR. WADIA: Even for degree courses two years pre-medical is necessary. A degree course of 5 to 5½ years, with six months or one year internship, is very very necessary. We should not reduce it in any way.

CHAIRMAN: Do you think any student will come for 5 to $5\frac{1}{2}$ years with further internship to get a degree from a homoeopathy college instead of straightway going to MBBS course?

DR. WADIA: I am an allopath by qualification. But homoeopathy is my choice, If anybody wants the philosophy of homoeopathy and if he is impressed by the science, then he will go for it.

DR. PRAHLAD: With due respect. I think if homoeopathy is given equalstatus, then people will not go to allopaths. They will prefer to go to homoeopaths. The most highly qualified allopathy doctors in Bombay partconsult homoeopaths for their 17 children. I still maintain that homoeo. paths could have been even more successful, But we never advertise. It is without advertisement that we have achieved the success that you see today. Gradually people believe us that we are better qualified people. I am not taking of surgery.

SHRI RANA BAHADUR SINGH: What is your opinion about the basic fact that all people practising homoeopathy do it for charity purposes? Would you, like that somebody who wants to practise for charity purposes to be given some institutional training? Or would you like that he should be tested and given a certificate of practice?.

DR. PRAHLAD: My personal request to you is whether it is for charitable purposes or for private practice, the man must be a qualified man. We cannot afford to play with the life of the patient. The man must be qualified.

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DR. SANKARAN: May I submit one or two points?

CHAIRMAN: Yes.

DR. SANKARAN: Under Chapter II, in clause 5 there is a mention:

"No person shall be eligible for election to the Central Council unless he possesses any of the medical qualifications included in the Second Schedule, is enrolled on any State Register of Homoeopathy and resides in the State concerned."

1 think that if somebody is registered in West Bengal or Punjab or anywhere else and practices insome other State, he would not be eligible. It seems like that.

DR. JUGAL KISHORE: When this Bill becomes an Act, automatically the person who has got the qualification will be registered.

DR. SANKARAN: Is it not enough that he should be registered on the State Register? "He should reside..." —is it necessary?

SHRI JUGAL KISHORE: Another section of the Bill has given the rights of practice at any place.

CHAIRMAN: From the commonsense point of view any person whose name appears in the Central Register is always allowed to practise at any place in the country. Anyway, we will examine that point.

DR. PRAHLAD: Supposing one wants to shift to another State....

CHAIRMAN: We will examine it.

DR. SANKARAN: Then, on page 9, in section 26, there is a mention:

"...every person whose name is for the time being borne on the Central Register of Homosopathy shall be entitled according to his qualifications to practise Homosopathy, in any part of India and to recover in due course of law....." I believe that even if it is the State-Registrar, he should be allowed. At present, it is not so.

CHAIRMAN: We shall examine that.

DR. SANKARAN: In section 27, there is a mention that:

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"If any person whose name is entered in the Central Register of Homoeopathy obtains any title, diploma....".

I believe that the word "title" is not a good word because in medical qualifications I do not know of any title. Titles are generally conferred on account of public recongnition and on persons for public service, and that need not be put here....

CHAIRMAN: It means any special qualifications acquired.....

DR. SANKARAN: I will tell you the reason for my objection. In Rajasthan there is a title of the Fellow of the Rajasthan Homoeopathy Association, which has been recognized by the State Board, which it is not at all a 'diploma' or 'title'. It is just a membership of the Association.

Only one more point. In the Second Schedule, under 'Bihar' there is 'D.H.M.S.' diploma. You will notice that it is not appropriate. I was a member of the Homoeopathic Appellate Authority and we saw a number of persons having this diploma, but, who did not know the names of the colleges, and they still had the diploma. I think the Central Government should eaxmine this....

CHAIRMAN: Don't take away the morsel of food from their mouth.

DR. SANKARAN: I have no doubt that because of that there is the largest number of registered medical practitioners in Bihar. I know a number of people of Maharashtra who never went to Bihar but.....

CHAIRMAN: Is there any membr from Bihar? Mr. Jha, can you explain?

SHRI CHIRANJIB JHA: Dr. Jugal Kishore will explain

ACHAIRMAN: We will check up with the Bihar Government.

DR. JUGAL KISHORE: There are all sorts of colleges in Bihar-recogniz-, ed and unrecongized. Secondly there has been a brisk sale of diplomas....

CHAIRMAN: Please don't tell us that, otherwise we will have no faith in the system.

DR. JUGAL KISHORE; I think this can always be verified. Nobody is entitled to have any practice unless he or she has undergone four years' training....

DR. PRAHLAD: We must have institutionally trained people.

CHAIRMAN: Thank you very much.

SHRI RANA BAHADUR SINGH: On behalf of the Committee, I thank you for coming here and giving your evidence. We assure you that your views will be given due consideration.

> [The witnesses then withdrew.] [The Committee then adjourned]

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Thursday, the 5th October, 1972

(AT BOMBAY)

PRESENT

1. Shrimati Purabi Mukhopadhayay-Chairman.

MEMBERS

Rajya Sabha

Shri Bhupinder Singh
 Shri N. G. Goray
 Singh Singh State

4. Shri Man Singh Varma

5. Shri K. C. Panda

6. Shri Sultan Singh
 7. Shri N. P. Chaudhari
 8. Shri T. G. Deshmukh
 9. Shrimati Savita Behen

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Lok Sabha

10. Shri Ziaur Rahman Ansari	17. Shri Prasannbhai Mehta
11. Shri Bhacosahaib Dhamanker	18. Shri S. L. Peje
12. Shri Hiralal Doda	19. Shri M . Satyanarayan Rao
13. Shri Nageshwar Dwivedi	20. Shri Umed Singh Rathia
14. Shri Chiranjib Jha	21. Shri K. Ramakrishna Reddy
15. Shri B. R. Kavade	22. Dr. Sankata Prasad
16. Shri T. S. Lakshmanan	23. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING Dr. Jugal Kishore, Adviser in Homoeopathy.

Secretariat

Shri M. K. Jain, Under Secretary.

WITNESSES

- (1) Representatives of the Homoeopathic Post Graduate Association, Bombay:
 - (i) Dr. M. D. Phalnikar, President.
 - (ii) Dr. M. L. Dhawale, Vice-President.
 - (2) Representatives of the Gujarat Homoeopathic Medical College, Savli, Earoda:
 - (i) Dr. Anil R. Bhatia.
 - (ii) Dr. V. C. Patel.

(3) Representatives of the Principals of Homoeopathic Colleges in Vidarbha region:

(1) Dr. N. Z. Nandurkar, Yeotmal.

(ii) Dr. R. G. Kawishwar, Khamgaon.

(4) Representative of the action committee of L.C.E.H. Doctors' Association. Bombay:

Dr. D. K. Sabane,

[The Vitnesses: Dr. M. L. Dhawale, M.D., Homoeopathic Consulting Physician, Bombay and Dr. M. D. Pharnikar, M.D., F.C.P.S., President, Homoeopathic Post-Graduate Association, Bombay were called in.]

CHAIRMAN: Any observations that you want to make with regard to the Bill?

DR. DHAWALE: I have to bring before you one important point and that is in relation to the registration of practitioners. The Bill allows all persons who have been on Homoeopathic register of any State whether they hold medical qualifications or not, to be elected to the Central Council. And as far as the nomination to the Council is concerned there is a provision for persons who may not hold medical qualifications one of the functions of the Council is to lay down standards of education and to examine the institutions and to certify them as competent. What I feel is, the members of the Council should be those who have passed through certain minimum standards of medical education in order to judge whether the standards that are prevailing are of the right standard or not. That has not been ensured in the provisions of the Bill as has been circulated and I should very much like this particular aspect to be given some thought to.

[SHRI N. G. GORAY in the Chair.]

SHRI BHAOOSAHAIB DHAMAN-KAR: Please mention the clauses and the page number. I think it is or page 3.

DR. DHAWALE: On page 2 you have got a clause of nomination—section 3(c) "...may be nominated by the Central Government 'from amongst persons having special knowledge or practical experience in respect of Homoeopathy...." and that will run counter to the clause which is on page 6-clause 15(2). Certain qualifications which have been recognised in Schedule Two have been mentioned at the end of the Bill-which are the recognised qualifications for purposes of registration.

CHAIRMAN. So your argument is that clause 3(c) is contrary to the provision laid down in....

DR. DHAWALE: It provides for exclusion of persons on the Council, which person would not come on the Register—according to clause 15(2).

DR. JUGAL KISHORE (HEALTH MINISTRY): The point raised by the witness is that there is a clause that anybody who has to be on the Council must fulfil certain conditions, that is, institutional qualification and registration in the State. And in clause (c) where nomination is made a person who may fulfil this criterion for being elected to the Council has fulfilled regarding that there is another clause in the same section on page 3. That is again a modifying clause.

DR. DHAWALE: I have read that.

DR. JUGAL KISHORE (HEALTH MINISTRY): In that connection, that is a special nomination in which a person may not be on the register but may still be nominated by considering his experience. For example a man cannot come on the Register but still he has some special contribution to homoeopathy; he may be a practitioner of modern systems of medicine and still he can be nominated.

[THE CHAIRMAN, SHRIMATI PURABI MUKHOPADHYAY, in the Chair.] CHAIRMAN: Dr. Dhawale, forget for the moment the provisions of the Bill. What d₀ you think would be the structure of the Council and what are your suggestions?

DR. DHAWALE: In my reply what I have suggested is that the term "registered medical practitioner" should be restricted so that it is given to those persons who have undergone a medical training of a minimum standard whatever might have been the minimum standard that has been decided upon; I am not going into that question. But the information that I have is that the Central Council of Health has approeved the four year period as the minimum professional training in medicine after S.S.C. or equivalent examination and if that is accepted as the minimum standard of training then I feel that the term "registered medical practitioner" should be restricted to those persons who have undergone that type of training. The public require an assurance from the Government that a particular person, who is in medical practice, has undergone certain trainig in the sense that one could equate that with something like the ISI trade mark so that people are able to understand it. Most of them are illiterate and they can be exploited readily. I feel that this type of protection should be given so that a person who approaches a medical practitioner knows whether he has been qualified properly or not. At the same time. I am aware of the fact that a large number of medical practitioners in homoeopathy do not conform to the minimum period of four years. We can broadly categorise them into two, viz., those who have bad no medical training but who have been in practice and those who have had some training in an institution but who do not come up to the four-year standard. Now. I recommend that these two categories be enlisted under the Act as enlisted practitioners. They should have all the rights of practice, including the right to issue certificates, but they should not have unrestricted right for election to the Council.

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CHAIRMAN: • If you are accepting their certificate for all practical purposes, why should not give them representation on the Council?

A. DHAWALE: I have made a recommendation that restricted representation be given to them, so that their problems could be aired in the Council. Since the Council has laid down standards of medical education I feel that weightage in the Council should be given to those who are drawn from the teaching profession and those who have gone through the portals of a properly established medical institution.

CHAIRMAN: Out of 30 per cent, what would be the proportion which you would recommend?

OR. DHAWALE: In reply to the questionnaire no page 5, I have mantioned certain categories of membership. There I have suggested certain <u>ex-officio members</u>. Amongst the <u>ex-officio members</u> I have suggested some provision for these persons.

CHAIRMAN: That is there with us. About this 30 per cent who are Government nominees, what is your suggestion?

DR. DHAWALE: I have suggested that the Government nomination should be 30 per cent of the representatives from the RMPs general category and this nomination should be restricted to those who are in the register. I have also recommended that this clause about registration at page 6, sub-clause 2....

DR. JUGAL KISHORE: On a point of clarification, when you mentionregistered medical practitioners, do you mean those who do not have institutional qualifications.

DR. DHAWALE: I would like to explain it. I have recommended that sub-section (2) at pages.... - CHAIRMAN: I told you to forget about that page. You tell us about your proposal for the structure of the Central Council.

DR. DHAWALE: I have suggested a certain structure which departs from the provisions of the Bill. I have modified the term registered medical practitioner as far as the Bill is concerned. I have suggested that the registered medical practitioner should be a person who has undergone four years medical training and who is in homoeopathic practice, at the time the Bill comes into force as an Act. Amongst them there would be persons who have undergone training in homoeopathy for four years in an institution and who hold homoeopathic qualifications. They go automatically on to the register, but there are a number of practitioners who are registered under other medical Acts but who are already in homoeopathy practice. If they are able to submit satisfactory proof of practice by way of case records or by way of having contributed articles or written books they should have automatically the privilege to come on to the homoeopathic register. So, the category of registered homoeopathic medical practitioners would comprise those who have studied for four years or those who have got a similar qualification in any other system of medicine, but who can prove to our satisfaction that they have been in homoeopathic practice. For the purpose of proof they should be required to submit case records of patients/treated by them or they should have contributed articles to journals or written books. The existing clauses in homoeopathy Bill admit only those who hold qualifications mentioned in the Second Schedule and do not provide for the entry of persons who may have qualified themselves in other systems of medicine, viz., modern medicine or Ayurvedic medicine. I am aware of a number of practitioners who are otherwise competent in homoeopathy, who have established themselves in homoeopathy, who are practising only homoeopathy and nothing else, but who will not come on the

register if the Bill is maintained in its present form. Secondly, there are certain penal provisions in the Bill affecting a large number of persons practising homoeopathy and which will declare their practising homoeopathy as unlawful because of the protection that has not been given. Under the Indian Medical Council Act, the rights of allopathic practitioners are restricted to their practising modern, scientific medicine. In the Act the definition that is laid down would not cover homoeopathic practice.

CHAIRMAN: Please go to your next point.

DR. DHAWALE: The Council should have a constitution which will be heavily weighted towards the teaching profession in homoeopathic institutions. It should be restricted to those persons who have undergone approved medical training, whether it be in homoeopathy Ayurvedic medicine or the western medicine. In order to provide seats to the teaching elements I have suggested that the general representation should be curtailed from 5 to 3. The maximum that is provided in the Bill is 5. We have suggested that it be curtailed to 3, so that additional representation could be given to representatives of faculties from universities to representatives of principals and representatives of teachers.

CHAIRMAN: Yo go to the next point because you have elaborately dealt with it.

DR. DHAWALE: The other point I would like to make is about the prohibitory clauses that have been inserted in the Bill as regards practising by persons who are not registered in the register. I am referring to page 6, sub-section (2) read along with sub-section (3). What I find is that in the Act which prevails in the State of Maharashtra, charitable practice is not covered. in the sense that the Government has no objection to any lay person practising homeopathy, provided he does not charge money on it. I feel that the homoeopathi method of treatment employee medicines in such a manner that they are not excessively harmful as it happens in the case of modern medicine. What I appeal is that this kind of restrictive clause....

CHAIRMAN: No, we will not keep it. So long as we do not abolish quackery in the allopathic system we cannot abolish charitable dispensaries and other doctors practising.

WITNESS: If you will permit me, I would like to point out that adequate training facilities for homoeopathy are practically non-existent in the country. There are no State hospitals or dispensaries or State medical colleges except in one or two States. If you visit these institutions, you will find that they are not of the requisite standard because adequate allocations of funds are not there. This has been the sorry state of affairs even before the independence and even now and the demand for homoeopathic treatment far outstrips the supply. I know of many persons who have no pecuniary interest in homoeopathic work. For example, there are certain legal medical practitioners who practice it as a hobby and who give proper relief and who also maintain a library which would put the libraries of even the professional people, the homoeopathic physicians, to shame. I know of people who do homoeopathic practice but whose means of livelihood are different. They have no intention of exploiting the masses and the people flock to them. They would not be doing that if they were not able to give proper treatment I understand the necessity for putting down quackery. In allopathic treatment, the patients die as a result of inadequate administration of the drugs. My appeal to you is to permit this practice till we are in a position to supply properly qualified homoeopathic physicians.

Secondly, I would read out section 2 (f) on page θ of the Indian Medical Council Act referring to the protection given under that Act of 1956, including the right to practise medicine as defined in clause (f) of that Act.

"Medicine means modern scientific medicine in all its branches and includes surgery and obstetics but does not include veterinary medicine and surgery."

This definition, if it is adhered to in the usual sense that it is done, it would not give protection to a practitioner who is registered under this Act. That means, an M.B.B.S. or any other qualified man, if he were to practise homoeopathy after this Act ccomes into force, this practice of homoepathy would come under the prohibitory interpretation. of this section. That has been my problem. For example, in Maharashtra, as the Act obtains today, there are a large number of registered do homoeopathic practitioners who not hold any qualifications and who are not following the medical profession as the principal avocation also. else. I They are doing something know of a builder who is a registered homoeopathic practitioner. Of course, he has no pecuniary interest in that and he no longer practises. He was never practising it for gain. But there are a number of persons who are part-time homoeopathic practitioners. Some of them are doing it. either for gain or for charity. I have no objection to the charitable part of the practice. But when the Bill allows these practitioners who have notraining whatsoever but who happen to be on the Homoeopathic Register, I do not understand on what ground it would be right and proper for us to prohibit the practice of homoeopathy by a person who holds the proper medical qualification under the Indian Medical Council Act or any other Act dealing with the indigenous systems of medicine, because what. I fell is that once the State recognises a person as properly competent to practise medicine, the State assumes that he is a responsible character and that he fully understands the professional responsibility and he gives alsoan undertaking not to act in any manner prejudicial,

WITNESS: It accepts the right.

CHAIRMAN: No.

WITNESS: The right conferred under the Medical Act.

CHAIRMAN: "Nothing contained in sub-section (2) shall affect—" That is the guiding formula. Whatever you are enjoying now....

WITNESS: As far as I am concerned, I am enjoying the right, not under this but I am a registered homoeopathic practitioner under the existing Act. So, my practice is not disturbed. I am not pleading for me.

CHAIRMAN: Sub-clause (4) says— "Any person who acts in contravention of any provision of sub-section (2) shall be punished with imprisonment for a term which may extend to one year, or with fine which may extend to one thousand rupees, or with both."

WITNESS: He is not a homoeopathic practitioner. He is a legal practitioner of modern medicine. But the existing Act here does not prohibit a homoeopath whether he is registered or not. This Act when it comes into operation contains this penal clause which is non-existent in the present Act.

CHAIRMAN: When the Central Act will be there, either your State Act will have to be amended suitably or the Central Act will not apply in the case of Maharashtra State if the State Assembly passes a Resolution like that.

WITNESS: As stated here in the Bill, in (d), the right to practise medicine that is conferred on those registered under the Indian Medical Council Act is restricted to the practice of modern medicine. It is not a question of protecting that right. But I am 1648 R.S.-13. envisaging a position where there is an M.B.B.S. who is registered under the Indian Medical Council Act but who chooses to practise homoeopathy. That homoeopathic practice would come under the prohibitory clause. That is my interpretation because the register is closed to him.

CHAIRMAN: That is a good pointwhether you can allow them?

WITNESS: That is what I am pleading for.

SHRI N. G. GORAY: When you allow the practice of allopathy even though there is no certified institutional training, why not here also? Is that so?

WITNESS: That is what I am wanting. From 1951 onwards there is the Homoeopathic Act in Maharashtra. You are fully aware that the State has not started any educational facilicities for the last 20 years.

SHRI N. G. GORAY: Anybody who wants to practise homoeopathy should pass a particular test, as you have yourself prescribed.

WITNESS: I have not prescribed any test, I have prescribed the establishment of credentials of practice.

SHRI N. G. GORAY: If he establishes those credentials and if he is given registration, he can come?

WITNESS: I have no objection.

SHRI N. G. GORAY: That can be done by the Central Council.

DR. DHAWALE: I feel that this provision should be incorporated in the Act itself. It should not be left to the discretion of the Central Council.

CHAIRMAN: If we want to keep the provision as it is envisaged in the Bill, what is your objection?

DR. DHAWALE: My objection is, we have turned out certain students and they are practising homoeopathy.... CHAIRMAN: Let them get registered.

DR. DHAWALE: The registration is closed. There is no means available for them to get themselves registered.

CHAIRMAN: How can the registration be closed?

DR. DHAWALE: I will cite to you the case of one of my colleagues. He is an M.B.B.S. who joined our course and according to the provisions of the Act, he could not get registration as a homoeopathic practitioner, but he got enlistment. As an M.B.B.S. he is registered under the allopathy Act.

CHAIRMAN: For get about the M.B.B.S. degree. The question is whether he is practising homoeopathy.

DR. DHAWALE: He is practising homoeopathy. He was on the staff of the Bombay Homoeopathic Medical College. He had put in good work, but the local authorities objected to his continuation because he was not registered.

CHAIRMAN: The State Government did the right thing in making that objection.

DR. DHAWALE: I will point out another thing. He went to London and obtained membership, which is a recognised qualification for a teacher. But in spite of that, there is no provision for registration. And another point that I wanted to make was, the recognising authority had the discretion not to enforce the registration in case a person was found adequately qualified in other respects. At the time the Act came into force, those who had put in more than 10 years of practice, whether they were qualified or not, were registered. But a person who has obtained a qualification which is recognised as a qualification for a teacher in a homoeopathic institution is being persecuted because of a technicality whereby he cannot get registration, although he is enlisted and he has been in practice for more than 12 years.

SHRI N. G. GORAY: Registration is not open for them?

DR. DHAWALE: Registration is open only to those persons who obtained D.H.B. or L.C.H.

CHAIRMAN: Dr. Dhawale, the whole of the country cannot suffer for the inadequacy of your Act. So, either your Act, after the passing of this Bill, will have to be suitably amended, or you have to pass a resolution scrapping your Act and adopting the Central Act. There cannot be any via media. That is the legal position.

DR. DHAWALE: That is what I am trying to point out to you.....

CHAIRMAN: Then automatically registration will again be open.

DR. DHAWALE: Registration will be open only for those persons who hold the qualification.

CHAIRMAN: We cannot make any concession for those persons who want to practise homoeopathy, without having their registration in homoeopathy. This, I think, is the consensus of the Committee. Of course, we have not taken a decision yet.

DR. DHAWALE: I will point out to you....

CHAIRMAN: You have ably dealt with that point. Now please come to the next point.

DR. DHAWALE: There is another point which you have raised in the questions and that is about prohibition of other forms of practice by a homoeopathic practitioner. I have dealt with it as a general issue in reply to your questions. What I feel is, once the State recognises a person as fit to practise medicine, he is bound by the code of professional conduct which requires him to use the best possible means to help the patlent in recovery or cure. There are situa-

tions where a person can add to his knowledge of medicine without attending a regular course. He can indulge in self-study. And if he knows that a particular treatment is beneficial to the patient, he is bound by the code of professional ethics to employ it. If he wilfully witholds it from the patient, then that creates a problem of conscience for him. And this provision of prohibition will lead to that. Secondly, there are certain situations in medical practice where time cannot be lost, where immediate measures are required; otherwise, life cannot be saved. Sometimes these measures may fall outside the scope of homoeopathy. And if VOL are going to penalise a physician for using those methods for saving life. I think that type of provision would be unworkable. I am sure a physician would prefer to face legal proceedings rather than be responsible for killing a patient. Similarly I extend that logic to cover the Ayurvedic practitioners and practitioners • of the Western system of medicine.

CHAIRMAN: In all the Bills there is a saving clause that if anything is done in good faith, the person will not be penalised. If you can prove that you did it in good faith, you are safe.

DR. DHAWALE: I should very much like not to leave these things to the vagaries of interpretation. What I feel is that the responsibility of the State ends once you approve a man as fit for medical practice. Even in the modern system of medicine, a person may not be trained in certain methods which were introduced much later. He is required to do self-study and self-study can extend beyond the restrictive system in which he has been trained. Perhaps you would have heard about Mahinderlal Sarkar. He was an M.D. of Calcutta with no homoeopathic qualification. But he has been recognised as a pioneer in the field of homoeopathy.

SHRI N. G. GORAY: When a particular person is trained in a particular system of medicine, and he wants to depart from it entirely and go to another system of medicine, don't you think that he should go through some test?

DR. DHAWALE: The history of homoeopathy is replete with examples of stalwarts who have converted themselves from allopathy and have made a name in homoeopathy.

CHAIRMAN: Can you give one example where a homoeopath, without having any institutional training in the Western system of medicine, proved to be a stalwart in the Western system of medicine.

DR. DHAWALE: That is besides the point.

CHAIRMAN: If you allow one section, why debar other sections?

DR. DHAWALE: I am confining myself to what is happening in homoeopathy. To-day the leading people in homoeopathy are persons who have had no training in homoeopathy; they had no formal training in the sense of a medical qualification.

CHAIRMAN: Exception cannot be the rule.

DR. DHAWALE: It is not an exception. It has been the rule, because educational institutions giving proper diplomas have been lacking all over the world. Because the financial support has not been forthcoming.

SHRI N. G. GORAY: You would like to make a statement in a general way that homoeopaths should be allowed to practise allopathy and viceversa?

DR. DHAWALE: I am not confining it to allopathy. What I am generally saying is if he is qualified to practise medicine, what measures he employs should be his discretion. Whatever measures he employs, he is bound by

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the code of ethics, he is bound by the law. If he acts through negligence, he can be prosecuted.

CHAIRMAN: All right. Next point.

DR. DHAWALE: If things are taken for interpretation to the court of law a peculiar situation develops as has happened in the court in Okola where the DIP declared a drug in the Schedule as a poisonous drug and the pharmacists refused to dispense it on that ground. I have got the reference and I can give it to you. There the Judge has gone into an extensive discussion as to what is the meaning of modern system of medicine and he has classified homoeopathy as a modern system of medicine for purposes of treatment. It was in the court of Mr. M. S. Phatak, 5th Joint Civil Judge of Akola. Ultimately the court upheld that the pharmacist was wrong. What I feel is if the Bill is passed into an Act in the present form, it will needlessly promote litigation and I think that is not the purpose of any law, to encourage litigation. The law regulates the medical practice, to advise the people whether a particular person has been properly qualified or not. It is the public which requires protection and not the profession....

SHRI MAN SINGH VARMA: Properly qualified in that particular science, in which he wants to practise.

DR. DHAWALE: The whole thing is the science is changing and the man has to keep pace with the progress in science. By laying down these rigid rules you will make it more difficult for medical practitioners and you will make it more difficult for even research to take place because research does not recognise frontiers. And if you regard a person as a responsible man and a man of character, you are trusting human life in his hands. He is responsible not to the State, but to the human life. CHAIRMAN: But this sense of responsibility does not lead one to sit for an examination.

DR. DHAWALE: There have been no examinations for the last 25 years. I am speaking for Maharashtra, Even today in the whole of India there in no course where it is recognised....

SHRI BHAOOSAHAIB DHAMAN-KAR: In the whole world?

DR. DHAWALE: There is no recognition except in Mexico and Argentina. There is a five or six year course. In U.K., for example, homoeopathy practice is not dependent on recognition. An M.B.B.S. or a person who holds a registerable qualification with the General Medical Council can practise. If one wants to be called a specialist in the National Health Service or if one wants to be on the National Health Service Register, then he has got to have a qualification for which facilities are available. There is a one-year diploma course and a further course for special qualification of fellowship. Now, these provisions have been in existence under an Act of Parliament in U.K. We have no provisions here. We do not make any financial provisions and that way the practice or promotion of homoeopathy will be crippled.

I have got a certain pleasure in practising homoeopathy. In fact, I can practise in western system of medicine, but I do not practise it. My father was in the same category. And my father had the courage to use the homoeopathy system in the KEM Hospital demonstrating its efficiency. At the time of his retirement the Dean took an undertaking from the staff that they will not use any other medicine except the Allopathic. But this 4 was possible because there were no legal impediments. We do not have proper facilities and the policy at the level of the Planning Commission is not clear in respect of aid to homoeopathy. Aid to homoeopathy has been provided for post-graduate courses whereas there has been no provision

for graduate education. You may laugh at it. But that is a fact. As a result a very large amount of funds which were allocated for homoeopathy have been returned.

CHAIRMAN: All right. Any other point?

SHRI BHAOOSAHAIB DHAMAN-KAR: Are you advocating for homoeopathy practitioners who are registered only in homoeopathy to use allopathy medicines like injections, etc.?

DR. DHAWALE: Yes. They may use when necessary. But I am not canvassing for that.

SHRI BHAOOSAHAIB DHAMAN-KAR: I have seen many homoeopaths having syringe in their hands.

DR. DHAWALE: Why do they need it? They use it for two reasons. One is because they have not received proper training. Hence they do not have confidence in homoeopathy. Secondly, they find it an easy way of earning money.

SHRI BHAOOSAHAIB DHAMAN-KAR: Is it not allowing them to play with human life and is not the patient's life exposed to danger?

DR. DHAWALE: Yes. But if they create trouble, the law can take care of them.

SHRI BHAOOSAHAIB DHAMAN-KAR: When? After the life is lost?

DR. DHAWALE: Certain situations require a certain latitude because it is always necessary to give some disteretion to a person whom you consider a responsible person. If he misuses that discretion, you may haul him up before the court.

CHAIRMAN: Dr. Dhawale, your suggestions have been very interesting and we will surely give them due consideration. Thank you. DR. DHAWALE: Thank you.

[The witnesses then withdrew]

[The witnesses (Dr. Anil Bhatia, Principal, Gujarat Homoeopathy Medical College, Dr. Vasudeo C. Patil, Lecturer, Gujarat Homoeopathy Medical College) were called in.]

CHAIRMAN: Tell us something about your qualifications and your college.

DR. ANIL BHATIA: My qualification is DMS from Calcutta. I passed in 1962. The Gujarat Homoeopathy Medical College was established in June, 1970. It is a four-year course which has been done according to the syllabus of the Central.....

CHAIRMAN: Degree or Diploma?

DR. ANIL BHATIA: Four years' diploma. In our institution we have a rush for admission. People are coming in large numbers. The qualification is S.S.C. in Science and English.

In our college we have laboratories of Physiology, Anatomy and Pathology. We have our own dissection hall. We have a library, and a reading room, and we have started a 25 bed hospital for giving clinical training and the students are now engaged in training at the hospital. We have O.P.D. Savli is just 20 miles away from Baroda. This is useful in the sense that it serves rural areas. Students come to this college and from the very beginning they have a desire to serve the rural areas and a complete training is given. Departments have been set up in the hospital. We have an Operation Theatre, Labour Theatre, O.P.D., Dental and Gynaccology, etc.

CHAIRMAN: Have you gone through this Bill?

DR. ANIL BHATIA: Yes.

CHAIRMAN: Have you got any suggestions to make?

DR. ANIL BHATIA: About the election of members in the Central Council, in regard to those who do not possess qualifications, what I think is that they should be nominated by the Government, and not elected in the Council. The majority of them should be qualified practitioners who know this particular subject.

CHAIRMAN: Next?

DR. ANIL BHATIA: In the Second Schedule there are certain qualifications which have been mentioned which do not have four years' training. But they are being added in the Second Schedule. I would prefer that there should be a Third Schedule. In the Second Schedule there should only be those which have four years' training, and in the Third Schedule the other ones should be mentioned.

My third suggestion is that the number mentioned should be less than 10,000.

CHAIRMAN: Instead of 10,000 what should be the number?

DR. ANIL BHATIA: I think this should be 3,000.

SHRI N. G. GORAY: What will be the number of registered homoeopaths in Gujarat?

DR. ANIL BHATIA: There are two Registers in Gujarat, one having qualified and the other....

CHAIRMAN: How do you distinguish?

DR. ANIL BHATIA: 'Qualified' are those who have four years' diploma?

CHAIRMAN: Are they all registered or enlisted?

DR. ANIL BHATIA: They are all registered. There are two separate Registers. There are four members who are elected from the qualified group and there are three members who are elected from the registered group.

SHRI N. G. GORAY: How many of them are institutionally trained? DR. ANIL BHATIA: There are 90.

SHRI N. G. GORAY: How many registered?

DR. ANIL BHATIA: There are over 300.

SHRI K. C. PANDA: Is the Government running this college?

DR. ANIL BHATIA: It is a private trust, but the Government is very keenly interested and they have given a lump sum grant of Rs. one lakh to start the college.

CHAIRMAN: Do you have a State Board?

DR. ANIL BHATIA: We have a Council.

CHAIRMAN: Can you tell us the proportionate representation in the Council of institutionally trained people and experienced peole?

DR. ANIL BHATIA: There are four members of the Council who are institutionally trained. Three are not institutionally trained.

CHAIRMAN: Are they elected or nominated?

DR. ANIL BHATIA: Elected and nominated. Out of nominated four are elected, out of which three are not institutionally trained, and one is institutionally trained.

CHAIRMAN: Do you have any other point to tell us?

DR. ANIL BHATIA: I think the Central Council which comes into, force should have its own Sub-Committee known as Examination Sub-Committee....

CHAIRMAN: That is their function.

Members may please ask questions, if they have to ask any.

SHRI N. G. GORAY: Are there any really highly qualified homoeopaths?

DR. ANIL BHATIA: Yes, I know at least three of them. One is Dr. Apte, who is M.B.B.S., and who has practised for a total of 40 years. There is another Dr. Upadhyay, who has gone to U.K. to learn homoeopathy. The third is Dr. Dedhia who is practising in Kutch.

SHRI N. G. GORAY: Is homoeopathy very popular in your State?

DR. ANIL BHATIA: I am pretty new to Gujarat State, I was previously in Calcutta. I have been here for a year and a half. Here we have about a hundred cases per day. We have different departments and we have become popular.

SHRI BHAOOSAHAIB DHAMAN-KAR: Is there any proposal for a Faculty of Homoeopathy?

DR. ANIL BHATIA: Not now. But about fifteen days back I sent a proposal to the University for having a Degree course.

CHAIRMAN: Dr. Patel, have you any other points to make?

DR. VASUDEV PATEL: I have nothing more to add. But I would only like to suggest that the qualification should be S.S.C. for Diploma, and for the Degree course it should be Inter (Science).

CHAIRMAN: When were you appointed as Principal, and what was the manner of selection?

DR. ANIL BHATIA: They gave ar advertisement. I applied from Calcutta. I was interested in the academic field, and there were at least 15 applications for the same post. I was the one to be appointed.

CHAIRMAN: Very good. You are a young person and I hope you will be able to do something for the State. श्वीं मानं सिंह वर्मा : ग्राप के कालेज में क्या बेडस हैं ? ग्रगर हैं तो कितने ?

साक्षी (डां० भाटिया) : 25 बेडस हैं।

श्री मान सिंह वर्मा: आप बता सकते हैं कि सब से ज्यादा देर तक रुकने वाले रोगियों में से कितने रोगी ऐसे हैं जो 6 महीने से अधिक आप के यहां रहे ?

डा॰ भाटिया : हमारे अस्पताल को चालू हुए अभी 2 महीने ही हुए हैं। लेकिन आप के सवाल के उत्तर में वता दू कि एक haemophilia केस है वह हमारे यहां, डेढ़ महीने से है और रोज भी उस के सिम्टम लिए जायं तो वह कहता है कि मैं बीमार हूं। दूसरे, केस ऐपीलेप्सी का है। वह मरोज 1 महीने दस दिन रहा। उस को हर पांचवें दिन अटैक होता था। हमारे यहां रहने पर उस को कोई अटैक नहीं हुआ और अभी जब वह अपने घर चला गया है तो वहां उस को कोई अटैक नहीं हुआ !

श्री मान सिंह वर्मा : झाप के इन्डोर पेशेंटस जितने हैं उन में कानिक डिजीजेज के ज्यादा हैं या साधारण डिजीजेज के ?

छा० भाटिया : हमारे यहां एक्यूट केसेज ज्यादा हैं । जैसे मलेरिया है । एक्यूट केसेज की संख्या ज्यादा है ।

श्रीमान सिंह वर्माः मलेरिया के केस के लिए भी हास्पिटलाइजेशन क्या जरूरी है?

डा॰ भाटिया : वे लोग गांवों में दूर-दूर रहते हैं ग्रीर मलेरिया में हास्पिटलाइजेशन इस लिए जरूरी है कि उस में पेशेंट को दवा इस तरह दी जानी चाहिए कि पेशेंट को रिंगर्स ज्यादा न हों।

When the temperature is at the lower level then only medicine is given in homoeopathic treatment. झोर सिम्पटम जानने के लिए कि रोगी को किस वक्त क्या ीता है It is essential for a malaria patient.

श्री मान सिंह वर्मा : मलेरिया को ग्राप ब्लड टेस्ट से पहचानते हैं या सिम्पटम से ही जान लेते हैं ?

डा॰ भाटिया : दोनों तरह से हम देखते हैं।

SHRI K. RAMAKRISHNA REDDY: What is the strength of staff in the college please?

DR. ANIL BHATIA: At present we are having 18 on the list.

SHRI K. RAMAKRISHNA REDDY: Students?

DR. ANIL BHATIA: There are at present 120. Third year is running. In the fourth year it will be 160.

SHRI K. RAMAKRISHNA REDDY: Per year?

DR. ANIL BHATIA: Forty.

AN HON. MEMBER: Do you take any capitation fee or building fee?

DR. ANIL BHATIA: No; the only fee is the term fee of Rs. 250 for six months or Rs. 500 for one year.

SHRI K. RAMAKRISHNA REDDY: What is the pay of the Lecturers?

DR. ANIL BHATIA: To begin with it is Rs. 425. They get Rs. 100[|]- as allowance for demonstrations.

SHRI MAN SINGH VARMA: Do you advocate homoeopathy or any other system?

DR. ANIL BHA'IIA: Till now we have been advocating pure homoeopathy except that we use biochemy and... SHRI MAN SINGH VARMA: Biochemy is part of homoepathy.

DR. ANIL BHATIA: It has been used mostly in surgical cases. Recently in two cases a surgeon has said that he would not operate unless you do it. Those are the only two cases; only surgical cases.

SHRI N. G. GORAY: So far as formation of this Council is concerned, would you like to have some representation on behalf of the teachers?

DR. ANIL BHATIA: Yes, I myself was actually going to say that. Thank you very much. It is most important that persons from educational institutions are appointed on the Central Council because they know far more about it.

SHRI K. RAMAKRISHNA REDDY: What should be the proportion of representation?

DR. ANIL BHATIA: At least two from each State.

SHRI K. RAMAKRISHNA REDDY: Do you want any provision to be made in the Bill?

DR. ANIL BHATIA: It should be there in the Bill.

CHAIRMAN: You told us about Government grants to your institution. Do yoc get anything from the Government of India?

DR. ANIL BHATIA: Till now we have not received but all the formalitie; for reciprocal grants have been completed and we have just submitted to Delhi the scheme and we hope to get it within a short time,

CHAIRMAN: How much?

DR. ANIL BHATIA: Seventy-five per cent of the total expenditure in non-recurring is to be borne by the Central Government; 12½ per cent by the State Government and 12½ per cent by us. CHAIRMAN: So it is liberal.

DR. ANIL BHATIA: Recurring it is 50 per cent.

SHRI N. G. GORAY: Are you sure your Government has forwarded it?

DR. ANIL BHATIA: Yes.

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CHAIRMAN: Thank you very much.

[The witnesses then withdrew]

(The Witnesses: Dr. N. Z. Nandurkar, Yeotmal and Dr. R. G. Kawishwar, Khamgaon were called in.)

CHAIRMAN: You are the representative of the Principals' Organisation in Vidarbha. What does it really mean?

WITNESS: It is the Principals' Organisation. There are as many as seven colleges in Vidarbha

CHAIRMAN: All recognised by the Government?

WITNESS; All recognized by the Government.

CHAIRMAN: That is good.

- WITNESS: And for your information I submit that I happen to be the Chairman of the Council of Maharashtra and a Member of the State Board.
- ⁷ Today, of course, I am representing the Principals' Association. All these Principals formed an Association and on their behalf we represent?

CHAIRMAN: Have you gone through the Bill?

WITNESS: Yes.

CHAIRMAN: Please give us your

WITNESS: As regards the aims and objects of this Bill I have to submit that only the qualified practitioners are to be given registration under the Central Board. I think even those that have been registered on the basis of practice also should find a place in the Central Register. So this Bill envisages only admission of qualified practitioners on the Central Register. I do not know how far this can be done now.

CHAIRMAN: Will you please tell me and our Members why you prefer to come as the President of the Principals' Organisation instead of appearing as the Chairman of the Council of the Maharashtra Board?

WITNESS: They have chosen me as their representative and the date is earlier. Therefore, I am appearing for them.

CHAIRMAN: Many things we may know from you about the Council itself.

WITNESS: The Council desires that I appear before the Committee on the 7th. Due to my domestic difficultics I have to return today. If there are any questions concerning that office, I may answer them today.

SHRI K. RAMAKRISHNA REDDY: Are you coming here again on the 7th?

WITNESS: No. That is why I preferred this representation.

SHRI K. RAMAKRISHNA REDDY: You are representing the Principals' Association. What are the functions of the Principals' Association?

WITNESS: Just to look after the educational problems and difficulties in the case of those who pass out of the institutions.

SHRI BHAOOSAHAIB DHAMAN-KAR: Dr. Wadia is one of the members or he is the Chairman of the Court.

WITNESS: There are two bodies. One is the Board of Homoeopathy and Biochemic Systems of Medicine. The other is the Court in the nature of a faculty looking after educational matters. The Board looks after registration. SHRI K. RAMAKRISHNA REDDY: What are the functions of the Board and the Court?

WITNESS; The Board looks after registration and the Court after education.

CHAIRMAN: I am told that there is no Council for Homoepathy here.

WITNESS: There is no Council here.

CHAIRMAN: You are the Chairman of the Court examining students or the organisation which looks after educational matters.

SHRI MAN SINGH VARMA: Is the Board a part and parcel of the Court?

WITNESS: They are two independent bodies incorporated separately under the same Act.

CHAIRMAN: Another point. We are told that you have closed registration. You promised to hold some examination, but no examination was ever held. You were having a list of enlisted practitioners. You said that they may be given registration after they sit for some examination. Was there any examination ever held?

WITNESS: No.

CHAIRMAN: Why?

WITNESS: Personally I would like to say....

CHAIRMAN: Not personally, but on behalf of the Court.

WITNESS: There was no examination. The Court is of the view that there should not be any examination for those who are enlisted. There are two types of registration. One is on the basis of qualification and the other is on the basis of length of practice. The enlisted practitioners fall under the second category. They were enlisted because they were practising on a particular day. Those who are registered have to put in a specified period of practice.

CHAIRMAN: I am a practitioner to day. I have got experience for three years. You enlisted me when I acquired experience for ten years. Will you not give me registration?

WITNESS: They should be automatically registered. There should be no examination. Registration depends on the length of the period of practice.

CHAIRMAN: We got representations from many people saying that though you promised that there will be an examination, no examination was ever held. Why?

WITNESS: So far as the Court is concerned, the Court is of the view that as soon as they complete ten years practice and those who have been enlisted on that basis, should get registration.

CHAIRMAN: Have you notified them? How will they know it?

WITNESS: That depends on the Government. We have recommended it.

CHAIRMAN: My honest opinion is that the Homoepathy Board and Court here are absolutely in a mess. It does not come forward for helping the homoeopaths and they do not know their position. Will you hold an emergency meeting of your Court to finalise the whole thing and tell us that you have done so? I think there must be personal disputes among the members because of which you are not willing to face this problem at all.

WITNESS: So far as the Court 187 concerned, there are no personal disputes.

SHRI K. RAMAKRISHNA REDDY: Is there a dispute between the Court and the Board and amongst the members also? when the Government of India comes forward with every kind of help that the State needs for establishing incmoeopathy and every other kind of medicine. Why should not the State Government of Maharashtra take advantage of it and why do not the Court and Board come forward?

WITNESS: The Court is prepared to do anything for the upliftment of homoeopathy.

SHRI K. RAMAKRISHNA REDDY: You have said that the Court's fundamental duty is to conduct examinations, etc. When examinations are not being held and when you are of opinion that there is no need for it as after ten years they will be automatically registered, the need for the existence of the Court does not remain.

WITNESS: So far as examinations are concerned, there are syllabi prescribed for diploma courses listed in the Schedule. This is something additional and comes by way of suggestion only as to whether they should remain enlisted for ever.

SHRI BHAOOSAHAIB DHAMAN-KAR: That is the point. You have kept them out.

WITNESS: The Court's view is that they should automatically be registered after the lapse of ten years just as the other medical practitioners have been registered.

CHAIRMAN: Automatically registered means that somebody must open the pages of the register and write down their names. Has it been done?

WITNESS: Before that orders must be passed and action taken by the Government.

SHRI BHAOOSAHAIB DHAMAN-KAR: Somebody should recommend it to the Government. I think the Court is competent to do it. Have you recommended it to the Government? WITNESS: There is a recommendation.

SHRI MAN SINGH VARMA: Is it a fact that the Government has closed registration?

WITNESS: That is a fact, but the Board has recommended the registration of enlisted practitioners.

CHAIRMAN: Government does not register any where. It is the Board and it is the Court which are the authorities created by the State Government to deal with matters of homoeopathy. Now, if somebody has got some new ideas, it is up to him to bring it to the notice of the Government.

श्री मान सिंह वर्मा : झभी तक यह क्लियर नहीं हुम्रा कि बोर्ड प्रौर कोर्ट दोनों उन के हाथ में है ? क्या वे ही इसे कंट्रोल करते हैं ?

श्री सभापति : खाली कोर्ट उन के पास है।

भी मानसिंह वर्माः तो कोर्ट इज फार इक्जामिनेशन और बोर्ड इज फार रजिस्टेशन ?

CHAIRMAN: The Court is for examination. That is why I wanted to know from the Chairman of the Court whether they promised that they will hold an examination for the enlisted people to sit for that examination but that no examination was ever held and by that, the homoeopaths in Muharashtra are losing their faith in the Government; they even challenge our bona fides, whether we are not showing some kind of apathy towards them. If you want to put the responsibility on somebody, if it is the State Government, we can take it up with the State Government. If it is the Board and the Court, as the Chairman of the Court, we are taking it up with you. Let us know the position where we stand.

WITNESS: The position is that unless the syllabus is sanctioned and approved by the Government the Court is not competent to conduct any examination as such.

CHAIRMAN: Under which provision of the Maharashtra Act is the syllabus to be approved by the Government? When the University approves a .:yllabus, that is final. It does not need the approval of the Court of the Government.

WITNESS: This body is not so autonomous.

CHAIRMAN: You should have pointed out to the Government to amend the Act. There is no reason why you should show apathy to the enlisted people.

WITNESS: We sympathise with those colleagues.

CHAIRMAN: Do you promise us that you will take it up with the State Government and the Board? Right?

WITNESS: Yes, we will again pass a resolution in the Court of Examiners.

CHAIRMAN: Not only passing a resolution and keeping it on the file. You will meet the Health Minister, take the matter to the Government and do whatever is possible, from the side of the Court.

SHRI K. RAMAKRISHNA REDDY: You also invite the Chairman of the Board and both of you have a discussion and come to an agreement.

CHAIRMAN: Any other points?

WITNESS: Regarding the title of the Act. I think it should read "The Bio-chemic and Homoeopathic Central Council Bill.' Bio-chemistry should also have an independent mention to avoid any negligence of that subject.

The Court of Examiners hav examined the whole Act and a memorandum will be forthcoming regard. ing the Constitution of the Council. Here a distinction has been madebetween an elector and a candidate. Read clause 5. All those who are registered should have the right to stand for election. There should be no distinction between a candidate and a voter. Every voter should be entitled to offer himself as a candidate for the Council. This is an important point, according to me. Regarding representation, I refer you to the First Schedule. Here one seat has been allotted to registered practitioners numbering between 100 and 10000. If you will examine the number of registered practitioners or gualified practitioners in different States in the whole of India, you will not find ten, twenty or forty thousand registered practitioners at all. At the most the number of qualified registered practitioners is not more than 2500. That must be the highest number.

SHRI K. RAMAKRISHNA REDDY: If you choose like that, you will have more people on the Council.

WITNESS: Otherwise, it will not suffice. The number should be reduced from 10000 to 1000. I do not follow whether the present State Register of Homoeopathy includes enlisted practitioners or not.

CHAIRMAN: No. We have no provision for enlisted practitioners. That is why we want to see that the enlisted practitioners have some option.

WITNESS: For 1000 if you allow one seat at the most there will be at the most three representatives. I think one thousand will suit in the present corcumstances. I do not know the number constituting the proposed Council.

SHRI MAN SINGH VARMA: That is, you suggest one thousand instead of ten thousand. WITNESS: Yes. And this distinction between a qualified registered practitioner and others should be abolished so for as the constitution of the Council is concerned.

SHRI K. C. PANDA: You do not want that those people should be kept on the Council?

WITNESS: No, I want them also. Their disabilities are alarming and unjust. In services or in educational matters, it is a different thing. But in representation in the Council, their vast experience should be given due credit and the disabilities must 'be removed.

SHRI MAN SINGH VARMA: Their number is very large in comparison with the qualified persons.

WITNESS: Yes, but they cannot form a separate caste as such. The whole of homoeopathy is a fraternity, and it should be a big constituency consisting of both qualified as well as registered practitioners. I may submit that a review committee was appointed here which had made a distinction between a diploma and a diploma that two-year diploma holders should have this much representation, threeyear diploma holders should have this much representation and four-year diploma holders should have this much representation. That casteism is abolished altogether in this Bill and it deserves congratulations.

SHRI MAN SINGH VARMA: Then the institutionally qualified persons are the sufferers.

WITNESS: They cannot be sufferers. They form one fraternity. How can they suffer?

SHRI MAN SINGH VARMA: They cannot be elected with this meagre number.

WITNESS: If you presume that they are a separate entity, then it is different. But once you take it as a fraternity, then there is no difficulty.

CHAIRMAN: Thank you very much.

[The witness then withdrew]

(The witnesses: Representatives of L.C.E.H. Doctors' Association, Bombay —Dr. D. K. Sahane and Dr. G. G. Mallapur were called in.)

CHAIRMAN: Dr. Sahane, I may tell you that the evidence that you will be giving before the Committee will be treated as strictly confidential and it should not be disclosed outside. Now you may mention any points that you want to make.

DR. SAHANE: We have already submitted our memorandum. So we want to mention here only about the provision regarding banning of practice of other systems of medicine. Now, in Bombay it is all right because other facilities are available, and homoeopathically qualified people can practice only homoeopathy. But in the rural areas there are many things which are lacking.

CHAIRMAN: Do you want that you should be allowed to utilise the drugs of other systems of medicine whenever and wherever they are deemed essential?

DR. SAHANE: Yes.

CHAIRMAN: Provided the practitioner takes proper precautions while prescribing such drugs and the proper dose is administered?

DR. SAHANE: Yes.

CHAIRMAN: Any other point?

DR. SAHANE: This is the only point.

CHAIRMAN: Now who will decide what is the proper dose and what are the proper precautions?

DR. SAHANE: It is the physician himself.

CHAIRMAN: If the physician is not properly trained?

DR. SAHANE: If the physician is institutionally trained. .

SHRI BHAOOSAHAIB DHAMAN-KAR: In homoeopathy?

DR. SAHANE: Not in homoeopathy. For instance, when the patient is admitted in the hospital, we go through the whole case history so that we know what drugs have been given and how the patient has responded. imilarly in homoeopathic hospitals, we see what treatment has been given. In certain situations homoeopathy may not be able to control the patient's condition. For example, in the case of a severe burn the person may die due to shock if we do not give other drugs. At that time we may be required to give pythedene to relieve his pain.

SHRI MAN SINGH VARMA: The question is whether that doctor should b_e qualified in allopathy or not.

DR. SAHANE: If he is institutionally trained, then there is no question of any qualification.

CHAIRMAN: But he is not properly trained for using allopathic medicines.

DR. SAHANE: He is trained there.

CHAIRMAN: Where?

DR. SAHANE: In the Dr. Cooper Municipal General Hospital.

CHAIRMAN: Everybody is not being trained in that hospital. Since there are no beds in almost all the colleges in your State, how can you study the case history and administer allopathic drugs?

DR. SAHANE: For that all the colleges should have their own hospi-

tals and they can get training like other people.

CHAIRMAN: That cannot be done.

CHAIRMAN: Your second point was) in the case of practitioners in the rural areas where and when due tonon-availability of the proper homoeopathic drug (due to lack of homoeopathic pharmacies) you will administer other medicines. And the third point is you studied in Nanavati Hospital where you went through modern medicines, surgery, gynaecology & obstetrics, pathology including bateriology and parasitology, forensic medicine and texicology, preventive medicine and public health, anatomy, physiology, homoeopathic philosophy and organon and homoeopathic materia medica. How long did you study there?

DR. SAHANE: For medical surgery and gynaecology we had a two-year study.

CHAIRMAN: What did you do after two years?

DR. SAHANE: We attended the clinic in the hospital and lectures in the college, in the homoeopathy college.

CHAIRMAN: You were attached with the hospital, western medicine hospital, when you were a student of homoeopathy college? All right, thank you. We will consider your points.

[The witnesses then withdrew.]

[The Joint Committee then adjourned.]

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Friday, the 6th October, 1972.

(AT BOMBAY)

PRESENT

1. Shrimati Purabi Mukhopadhayay-Chairman.

MEMBERS

Rajya Sabha

2. Shri Sasankasekhar Sanyal 7. Shri Sultan Singh 3. Shri Bhupinder Singh 8. Shri N. P. Chaudhari 4. Shri N. G. Goray 5. Shri Man Singh Varma 6. Shri K. C. Panda

Lok Sabha

- 11. Shri Ziaur Rahman Ansari
- 12. Shri Bhaoosahaib Dhamankar
- 13. Shri Hiralal Poda
- 14. Shri Nageshwar Dwivedi
- 15. Shri Madhuryya Haldar
- 16. Shri Chiranjib Jha
 - 17. Shri T. S. Lakshmanan
 - 18. Shri Mallikarjun

►.

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19. Shri N. Sreekantan Nair

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy.

SECRETARIAT

Shri M. K. Jain, Under Secretary.

WITNESSES

(1) Shri Baburao Patel, Bombay.

(2) Dr. N. H. Barlas, Honorary Adviser in Homoeopathy, Government of Maharashtra, Bombay.

(3) Representatives of the Registered Homoeopathic Medical Practitioners Association, Hyderabad:

(i) Dr. S. Thirupamaiah, Honorary Secretary.

(ii) Dr. V. Radhakrishna Murti, Honorary Joint Secretary.

(4) Dr. N. Lakshminarayana, Hyderabad.

- 9. Shri T. G. Deshmukh 10. Shrimati Savita Behen
- 20. Dr. Laxminarayan Pandeya
- 21. Shri Janaki Ballav Patnaik
- 22. Shri M. Satyanarayan Rao
- 23. Shri Umed Singh Rathia
- 24. Shri K. Ramakrishna Reddy
- 25. Dr. Sankata Prasad
- 26. Shri Rana Bahadur Singh

[The Witness (Dr. Baburao Patel, Bombay), was called in.]

CHAIRMAN: Dr. Patel, as you know, the deliberations of this Committee are strictly confidential. If you have any suggestions to make, you may do so

DR. BABURAO PATEL: I have already sent two letters which, I hope, hon. Members must have read.

One of the objects of the Bill is that there should not any quacks in the profession. I may state here that there is not a single medicine in Homoeopathy which is poisonous. In allopathy there are medicines which are poisonous. Supposing Dr. Jugal Kishore wants to poison somebody, he has no drug which contain poison. This aspect must be borne in mind when transacting this business. It is very important, because even if we take certain persons who are not fully qualified, they are not in a position to poison anybody. In Homoeopathy there is not a single medicine like that.

Now, coming to the Bill as such, I have already suggested that biochemistry should be included. Biochemistry is linked with homoeopathy and it seems to have ween left inadvertently. It is a loophole....

CHAIRMAN: Do you think that specifically we have to mention 'biochemic'? Some experts who have given evidence before this committee were of the opinion that we should not mention 'bio-chemic' system here; this is a separate system. What do you think about it?

WITNESS: The trouble is that we have got separate 'bio-chemic' colleges in Vidarbha. They think themselves as separate. They think that this is a science separate from homoeopathy. There are doctors who treat their patients only by bio-chemic system. Unless you want to transact another law later on, in that case this should not be included here. Otherwise there is nothing wrong in adding a few words about this, because they are twin sciences. Just adding a few more words about this here would not make any difference.

CHAIRMAN: But others seemed to think that it would be superfluous! I want your opinion.

WITNESS: I don't think it is superfluous at all. It is actually necessary to add it here

Then, in clause 3(1) (a) it is mentioned:

"such number of members not exceeding five may be determined by the Central Government....".

My opinion is that 1,000 doctors should be represented by one person as the minimum, going up to 5 at the maximum for a State.

For instance, in Nagaland there n may be 100 such people but there must be at least one person from that to represent them.

DR. JUGAL KISHORE: For your information, there should be a minimum of 100 doctors and they can definitely send one representative from that State....

CHAIRMAN: It is not mentioned specifically.

SHRI MALLIKARJUN: In Schedule I it is being mentioned....

CHAIRMAN: The maximum limit is 10,000 for one representation. Do you want to keep the maximum limit at 10,000?

WITNESS: For one representative.

Then, in clause 5(1) it is mentioned:

"No person shall be eligible for election to the Central Council unless he possesses any of the medical qualifications included in the Second Schedule...." Here, people who have no formal medical degrees are being excluded. I think that would not be fair because quite a number of them are here. We do not have sufficient qualified people here with degrees because there are not colleges to produce them. At the same time we shall be losing the benefit of the experience of the old people.

CHAIRMAN: Will you please come to the next part?

WITNESS: I think the Government should not lose the right of taking someone whom they like by having this. Supposing there is an old man in the profession with 40 years' thorough experience and there is a youngman who has just passed out a year ago, the Government should have the liberty to take the older person, but if a particular clause is put in, Government won't have that liberty. The Government cannot exercise this discretion in taking whom they want. If the Government wants a person with a degree the Government may take one but at the same time supposing there is a man like Baburao Patel with 40 years' experience, whom would you take? So you should not forfeit that right by a sort of stumbling block here. Government should have that right to take anybody they like. That qualification for a number of years should be left open.

CHAIRMAN: But we want some strong representation from the people who have institutional qualifications because in another section....

WITNESS: I have noted that.

CHAIRMAN: You can have representation but there must be some restriction somewhere.

WITNESS: There are no colleges today to turn out educated people with a particular qualification

CHAIRMAN: The Central Council will be prescribing the syllabus and the courses of study.

WITNESS: That will take time. For some period it is in Government's hands.

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CHAIRMAN: That is for two years The whole Council will be nominated for two years v_r five years b_y the Government.

WITNESS: I come to that five year clause. If you have somebody elected for five years in the beginning, people are going to stagnate for five years. I suggest that the period should be three years.

Clause 9(2) provides for the President and the Vice-President to be represented on the Executive Committee. I suggest that the President should be kept out of it and he should be the man on the General Council while the Vice-President should be made the President of the Executive Committee so that the President remains a supervisory person in a supervisory capacity even over the Vice-President and the Executive Council. Once the President is on the Executive Committee it will be very difficult for him to take a different position in the Council; it will be very difficult because he is committed to the Executive Committee. Supposing the General Council has to be firm about the decisions of the Executive Committee the President himself will be committed. That is why the Vice-President should be made the President and the President should be kept away at the General Council level.

CHAIRMAN: You mean Chairman?

WITNESS: The Vice-President should be the Chairman. That is the physical thing. Otherwise he will be committed to the discretion and decisions of the Executive Committee and it will be very embarrassing in his work.

CHAIRMAN: But in all other Acts the President of the Council is the President of the Executive Committee also and the Executive Committee will be the highest policy-making body and the Council will have to approve of what the Executive Committee has done.

WITNESS: The Council may approve or may not approve. CHAIRMAN: Even if I take a position that whatever was done by the Executive Committee is nullified, if it is not accepted by the Council it does not matter.

WITNESS: That cannot be deferred....

CHAIRMAN: President is after all not a dictator.

WITNESS: I think we can put it.

CHAIRMAN, We can do a little but till it improves. WITNESS: I think it is an improvement.

CHAIRMAN: All right, it will be considered

SHRI N. G. GORAY: The General Council will be meeting once or twice a year while the Executive Council will be meeting often. Therefore, if you prevent the President from being the President of the Executive Council it will in fact amount to this that the Vice-President will be the highest body because the Executive Council will be working day to day and taking decisions and the General Council will be meeting only once in a blue moon and when the General Council meets the President will be there; otherwise the President will be a sort of defunct office.

WITNESS: It will be embarrassing to the President if any deliberations are made against the wishes of the General Council.

CHAIRMAN: We have noted your observations.

WITNESS: On page 6, clause 15(2) it is said:

"No person, other than a practitioner of Homoeopathy who possess a recognised medical qualification and is enrolled...."

That is a very touchy point. I think the present people should be allowed to hold office. If you can give them, the right to vote you can also give them the right to represent It is democracy; and they have been nominated for so many year. It will

be very unfair, very unjust and complete inequity not to allow then just because they do not have a few alphabetical letters behind their names. For some time at least, for the next five or ten years, these people who have built up homoeopathy in this country should be allowed because they will be of use and at the same time Government is not opposed to take any one. There should be a provision that Government can take or not take, but the provision should be there for elec-tion.

CHAIRMAN: What kind of Council do you visualise?

WITNESS: I visualise a Council with people of experience and knowledge.

CHAIRMAN: 5 What would be the reaction of the institutionally qualified people and people of long experience?

WITNESS: You can take both on the Council. Say, thirty per cent. The Government can nominate people who are old and experienced.

CHAIRMAN: Of this 30 per cent how much will be the representation of the institutionally qualified people

WITNESS: Half of it would be fair.

CHAIRMAN: Next point, please.

WITNESS: Here in clause 21(1) it says:-

"The Central Council shall cause to be maintained in the prescribed manner, a register of practitioners of Homoeopathy to be known as the Central Register of Homoeopathy which shall contain the names of all persons who are for the time being enrolled on any State Register of Homoeopathy and, who possess...."

Let that "and" go. CHAIRMAN: Do you want "and

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WITNESS: Yes, it should be "and or".

CHAIRMAN: Because somebody might interpret it...

WITNESS: A_s a supplement to it; that would be an additional thing.

SHRI SASANKASEKHAR SAN-YAL: Legal interpretation can be disjunctive and adjunctive.

CHAIRMAN: We should not keep anything vague and open to the Courts to interpret as they like. And advocates like you know how to justify it.

WITNESS: In the Second Schedule, in the names given there, some of the names of the colleges have not been given. 1 a - 1 ٠., · · · · ·

CHAIRMAN: No recognised institutions were left out.

WITNESS: The names from Vidarbha are not there; they are recognised by the State. • · · ·

CHAIRMAN: Are they recognised by the State Board?

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CHAIRMAN; You please supply us the names Dr. Jugal Kishore, Dr. Patel says some of the institutions of Vidarbha are not included in the second Schedule. and the **Vi**te of

DR. JUGAL KISHORE (Health Ministry): We have taken those which have been recognised by the, State Board. We cannot accept.....

WITNESS: These are recognised by the State Board in Vidarbha.

CHAIRMAN: In the column under Maharashtra, the name of the Board is there. So, whatever is recognised by the Board...

WITNESS: It is not clear.

CHAIRMAN: It is clear.

DR. JUGAL KISHORE: Where the Government has empowered a particular college to give the degree, then possibly there is no need to mention the Board. Where the Board is recognised for giving degrees or diplomas, the name of the Board is given.

CHAIRMAN: When the Board is recognised, any diploma given by the Board will be recognised.

WITNESS: I have finished. Shall I go? - ·

CHAIRMAN: No, no. Members will, ask you questions.

SHRI SASANKASEKHAR SAN-YAL: I have one question. You are an experienced doctor. After the witness has given his reply Dr. Jugal Kishore may also give guidance on it. Probably psychiatric cases are multiplying very much on account of high pressure of living, frustration and all that.

WITNESS: Also taxation.

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SHRI SASANKASEKHAR SAN-YAL: So far as the allopathic system is concerned, there is laboratory examination of stool, blood and all that. Pathological examination and X-Ray examination do not reveal any causefor such psychiatric trouble. It is a mental disease which cannot be Xrayed or diagnosed. It it possible for, homoeopathy to go in for specialisation in mental diseases and for drafting such specialists into lunatic asylums and the psychiatric wings of hospitals?

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- WITNESS: If you see the pharmacoepia of homoeopathy you will find that every drug is going into the human being. The reason is that all the drugs are put on human beings and not on guinea-pigs. Allopathic medicines are tested on different animals, whereas all the homoeopathic drugs are proved on human beings. Every drug acts on the human mind and the human process of thinking. For instance, obscenity in the case of a semi-mad person can be treated. He is obscene in his fits of madness. Psychiatry can be easily practised in

homoeopathy. Curative medicine can be given only in homoeopathy and not in any other science because all the medicines are proved originally on human beings.

SHRI SASANKASEKHAR SAN-YAL: This is a very important question. You have permitted the Adviser' to intervene before in many cases, will he throw some light on this?

CHAIRMAN: It is not relevant to this Bill.

SHRI MALLIKARJUN: Just now you have mentioned that homoeopathic medicines are not poisonous. Suppose a patient is under homoeopathic treatment and he is administered some allopathic which may show some contra-indication.

WITNESS: Quite possibly in some cases, but in most of the cases homocopathic drugs will not act well.

SHRI MALLIKARJUN: Consequently, do you suggest any penal provision to arrest all such practices.

WITNESS: That should be left to the individual member.

SHRI MALLIKARJUN: You possess a long experience of homoeopathic practice. Suppose an allopathic drug is administered to a patient who is under the treatment of homoeopathy. There may be some contraindication. Do you want some penal provision in the Bill?

WITNESS: That is in the Indian Penal Code already.

CHAIRMAN: It is not so clear. Shall I interpret it for you? He wants to know when a homoeopathic doctor is treating somebody under the homoeopathic system of medicine, if he is administered any allopathic medicine, should the doctor be punished? WITNESS: He should be punished.

SHRI MALLIKARJUN: Will you kindly tell me what should be the maximum number of members on the Central Council? About Schedule One, there is some dispute. What should be the number of members on the Central Council?

WITNESS: It should not exceed a hundred. It should be fully representative of all the eightcen States.

CHAIRMAN: That would depend on the number of homoeopaths available in each State for fixing the quota.

SHRI MALLIKARJUN; Will you please tell me what should be the educational training for the students and what pattern should it be? Are you satisfied with the present educational system?

WITNESS: This is a very valid question. At the moment, the education that is being given to a homoeopathic student is entirely allopathyoriented. We are completely obsessed with allopathy. We are being hypnotised by it for the simple reason that allopathy has been patronised by the Government right from the beginning Pathology is not at all needed in homoeopathy. We go purely by symptoms. Our treatment is entirely in a different way.

CHAIRMAN: Cannot a particular disease mislead you?

WITNESS: No. We give the patient's name. We go purely by symptoms. We do not give the names of diseases at all.

CHAIRMAN: Symptoms can be different.

WITNESS: Except in one case, we do not need pathology at all because pathology is the end-product of the disease. CHAIRMAN: I disallowed a question by Shri Sasankasekhar Sanyal and so I should not digress on this point, but since you are a doctor of long experience, may I ask you something? What would be the symptom for tumour in the brain and the symptom for malignant malaria?

WITNESS: I shall tell you of a recent case. A solicitor's wife was suffering from a terrible headache for three months. She was taken to a specialist who said that there was a tumour in the brain. And what was she eating? She was a salt-eater. I gave a CM dose and she was cured.

CHAIRMAN: Can you describe it as a malignant tumour?

WITNESS: Here it is a malignant tumour. I am telling you, healthy people like you and me if seen through the X-rays, there will be plenty of malignant tumours.

CHAIRMAN: No.

SHRI SASANKASEKHAR SAN-YAL: On a point of order.

CHAIRMAN: There cannot be a point of order in a Select Committee.

SHRI SASANKASEKHAR SAN-. YAL: When talking of X-rays, you know the Parliamentary Committee Chairman cannot declare that you cannot be X-rayed.

SHRI N. G. GORAY: It is specifically mentioned by some that bio-chemistry goes along with homoeopathy. I would like to know whether you Consider this as a separate science.

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WITNESS: Yes.

SHRI N. G. GORAY: Some witnesses have consistently said that this is nothing except an aggressive or symptomatic form of homoeopathy. WITNESS: That is wrong

SHRI N. G. GORAY: If it is wrong, then does homoeopathy have two disciplines?

WITNESS: There were two different systems of medicines and they were contemporary. One act_s on the entire body and the other acts on the blood. Biochemistry is a science of salt but because they happened to work at the same time they were combined and some biochemistry salts were adopted by homoeopathy.

SHRI N. G. GORAY: Some have pointed out that biochemistry cannot be treated as a separate science, it is only a branch of homoeopathy, a simplified form.

WITNESS: It is not a simplified form. There are people who get cured only by homoeopathy.

SHRI N. G. GORAY: So, these are two medical sciences?

WITNESS, Yes, Sir.

SHRI N. G. GORAY: So far as homoeopathy is concerned, there are colleges. But about biochemistry, are there any?

WITNESS: There are institutions, six, in Akola, Amraoti, Nagpur, etc.

DR. JUGAL KISHORE: There are seven colleges in Vidarbha where they impart training in homoeopathy as well as biochemistry. But there are no separate institutions

SHRI N. G. GORAY: I would like to know what policy, in your opinion, the Government should follow—whether the emphasis should be on the elimination of those people who have taught themselves and preference for those who have been through an institution.

WITNESS: Government should not encourage empirical type of people at all. But today we do not have enough colleges. We do not have enough graduates. Ultimately, we have to have some standard of education. But it would take a long time because the allopathic colleges are not more than a hundred and homoeopathy does not have many. But if we deprive of these persons of their right to practise or their right to represent their grievances in that case, there will be a vacuum for a number of cases and they would not be treated. This is the cheapest system of medicine and since it does not do any harm, one should not be very strict at this stage. But, as you see, ultimately it should be that only qualified people should be there,

SHRI N. G. GORAY: Otherwise, we shall be making it safe for the quacks.

WITNESS: Yes.

SHRI BHAOQSAHAIB. DHAMAN-KAR: There are allopaths who practise homoeopathy. Do you recommend a test or training for these homoeopaths, if they are to be allowed to practise?

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and the second time WITNESS: Some sort of test should be taken. But they should not sit on two stools at the same time. At the moment they are suffering from an allopathy-mania though they also get registered as homoeopaths.

CHAIRMAN: Should they take institutional training?

WITNESS: They should take. The therapeutics are entirely different.

SHRI N. G. GORAY: Why not also the self-taught? 1. A. 1. M.

WITNESS: He can be. ÷ . . ~ -6

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SHRI MADHURYYA HALDAR: As you say it is a treatment for the similarity of the symptoms. I think you wanted to say that the therapeutics or the Materia Medica are to be taught. If it is so, what should be the period of training for the students to learn homoeopathy?

WITNESS: Four years are normal for them.

SHRI MADHURYYA HALDAR: Why not less,

WITNESS: One year can be cut off. He has to study compounding after he has passed. At the moment even the compounder is being licensed by the Government for allopathy.

SHRI N. G. GORAY: Are hospitals necessary?

WITNESS: Hospitals do contribute to the medicinal effect. Rest is required, discipline is required, observation of the patient is required. The patient cannot do all this at home.

SHRI N. P. CHAUDHURI: Do you mean to say that at every college there should be a hospital?

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WITNESS: Yes.

SHRI N. P. CHAUDHURI. Can you tell me whether this modern surgery is essential in homoeopathy?

WITNESS: Surgery is necessary when there is an obstructive illness. The case becomes .. a surgeon's case then; the knowledge of a physician is: .not used there. The science of surgery is entirely different from allo-10 1 1 - 22 H 1 1 M pathy.

CHAIRMAN: Where surgery is needed; a surgeon is required not a doctor?

WITNESS: Yes. ٦.

CHAIRMAN: If the surgeon is not homoeopathically trained?

· · · · · · · · · · · · WITNESS: That is not necessary at all. · · · · · ·

DR. LAXMINARAYAN PANDEYA: Do you suggest any condensed coursefor those who are allopaths or vaidyas?

DR. LAXMINARAYAN PANDEYA: Can they practise in both the systems?

WITNESS: They should not. Otherwise, it would c:eate a mess.

SHRI'RANA BAHADUR SINGH: Mr. Patel what is the main reason for this particular science not developing sufficiently in our country? Looking to the prospects of a very cheap and effective method of treatment that it holds out, as witnesses have said before this Committee, why exactly is this science left behind and allopathy is taking over almost the entire field?

WITNESS: I think there are many reasons. One reason is that the treatment of homoeopathy is that of an individual and not that of mass medication as in the case of allopathy.

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SHRI RANA BAHADUR SINGH: What do you mean by mass medicade la constance tion? • • •

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WITNESS: For instance, if there i_S malaria, the medicine is the same for 300 persons in allopathy. The question of basic resistance of a particular individual does not come in at all. In homoeopathy the freatment is different for every human being Secondly, mass medication and commercialisation 'of medication has been responsible for this. The third aspect is the Government patronage. For a long time this ignorance was called medication and this made a lot of money for the manufacturers has well as for the Government. This man Hahnemann stumbled upon it. This is not a new science at all. In Ayurveda the minimum dose is given. He only rediscovered it. But in this field it was not paying for any doctor to practise unless he wanted to be a healer. It is very difficult to 'make'

money in homoeopathy Each case takes about two hours to note down the symptoms, and finding the drug, another two or three hours, or probably even a day. During this two hours, an' allopathic doctor prescribes medicines for 100 persons,

CHAIRMAN: What do you do in three hours?

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-**G** WITNESS: We take two hours to write down the symptoms from head to foot.

CHAIRMAN What is the average fee for these two hours?

WITNESS: We charge twenty to thirty rupees.

. CHAIRMAN: What is the average fee for this period charged by an allopath?

WITNESS: In two hours he may see about 50 patients and the fee will be Rs. 500.

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SHRI RANA BAHADUR SINGH: You mentioned that it is impossible to kill a man by homoeopathy. We were told by a particular person that he could take 200 pills before us and swallow them all together and survive -he did not mention the name of the medicine; I did not ask him-but that if I gave him the same medicine and asked him to take two pills every two hours, he would not be able to survive for 24 hours. Is that correct?

WITNESS: It is mere dramatics. It is wrong information. in at

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SHRI RANA BAHADUR SINGH: You said that it is difficult to be a dangerous quack in this science. I want to consider another aspect of it and that is, whether the passing of this Bill will reduce the chances of charitable homoeopathic treatment in the country.

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WITNESS: I think it should not be done. Charitable work is being done on an extensive scale. Otherwise, a lot of poor patients will be affected. In West Bengal, every third Bengali generally goes by the book of Bhattacharya and Company, takes medicines and gets cured.

SHRI RANA BAHADUR SINGH: Would you mention which part of this Bill is likely to affect charitable work?

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WITNESS: That part where you do not give recognition to people who are not qualified through an examination.

SHRI RANA BAHADUR SINGH: What is your suggestion?

WITNESS: I think for quite a number of years we should keep an open register.

SHRI N. G. GORAY: In Bihar, there are on an average 46,000 homoeopaths.

WITNESS: In Bihar there is some trouble regarding a couple of colleges which sell diplomas. But that we find in other educational institutions also.

SHRI RANA BAHADUR SINGH: This sort of mass production of doctors who are hardly qualified....

WITNESS: It is not good.

SHRI RANA BAHADUR SINGH: It will reflect on the stature of the science?

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WITNESS: It is bound to reflect. Some day or the other it must be restricted to people who come through the examinations but not immediately.

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SHRI K. RAMAKRISHNA REDDY: Do you want that allopaths should be given some training if they want to practise homoeopathy? WITNESS: Yes, I have said that.

SHRI K. RAMAKRISHNA REDDY: But by giving that, will it not become "mixopathy"?

WITNESS: Let us not go by terms like allopathy, homoeopathy or "mixopathy". If you want to cure a man, no matter what "pathy" it is, cure the man. If a person who has a basic knowledge of allopathy finds a good homoeopathic medicine, why can't he use it? The main purpose is to cure the person. Why stick to labels?

SHRI MADHURYYA HALDAR: There should not be any penal clause?

WITNESS: There should be no penal clause. If he commits a crime or is guilty of 'negligence, then, of course, there should be a penal clause.

· CHAIRMAN: Who judges it?

WITNESS: The court.

CHAIRMAN: So, if there is some provision in our Bill....

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WITNESS: There is no place for such a provision in the Bill.

CHAIRMAN: Why?

WITNESS: Where is the place unless you separate the three sciences to make them watertight compartments?

CHAIRMAN: Since we are having three separate Bills or three separate Acts for the three different systems, why should we mix up and allow everybody to prescribe any type of medicine he thinks fit?

WITNESS: From the general science and the spirit of it....

CHAIRMAN: No. that is not the point. Then you have to admit that homoeopathy system is still inadequate, still insufficient to tackle any case. And a doctor has to depend or take recourse to other systems of medicine....

WITNESS: Yes.

CHAIRMAN: And in that system, that particular doctor, who is trained in homoeopathy, is not trained and to allow that homoeopathy doctor to use that kind of medicine which is used only strictly in allopathy will be giving freedom to that doctor to use any kind of medicine he thinks best or he thinks fit, without having a proper educational qualification for that. We say that this should not be done. What is your opinion?

WITNESS: There is a practical case of mums which is incurable. There is no medicine for it in allopathy. But there is a first class medicine in homoeopathy. Should the allopathy doctor not prescribe that?

CHAIRMAN: The allopathy doctor should have the honesty to admit that he does not have any medicine to cure that in allopathy and he should suggest to the patient to go to a homocopath. Similarly, if a homocopathy doctor feels that there is no medicine for the disease in homocopathy, he should have the honesty to say so and ask the patient to go to an allopathy doctor. By that way we will be saving the patient.

WITNESS: Yes, you can put it so.

SHRI BHAOOSAHAIB DHAMAN-KAR: Dr. Baburao Patel, you are a man of experience and you have taken to homoeopathy for the last so many years. You are doing good service. You have been kind enough to come down and assist us in our deliberations. Your evidence here is valuable and the Committee will take note of it. I thank you on behalf of the Chairman and the Members of the Committee.

WITNESS: Thank you.

The witness then withdrew.

[The Witnesses (Dr. N. H. Barlas, Homoeopathy Adviser, Government of Maharashtra and Shri Upadhyaya, Register and Secretary Homoeopathy Board Maharashtra) were called in.]

DR. N. H. BARLAS: I have been appointed as Adviser for Homoeopathy for the Government of Maharashtra for the last 1-1|2 years. I have been practising homoeopathy since 1946. I am a registered medical practitioner. I am a diploma holder. I am also a member of the Board. I am on the panel of homoeopaths. I have passed my diploma from the Aligarh Electro Complex College which has not been recognised. I have done it by postal coaching and after that I have studied.... and I have been strictly following the principles of homoeopathy and have picked up the practice.

SHRI N. P. CHAUDHARI: What is the duration?

DR. N. H. BARLAS: Two years.

SHRI BHAOOSAHAIB DHAMAN-KAR: Has the Maharashtra Government submitted any memorandum answering our questionnaire?

DR. N. H. BARLAS: I have received the questionnaire and I have already submitted replies to the Under Scoretary....

SHRI BHAOOSAHAIB DHAMAN-KAR: State Government's memorandum to the questionnaire is a separate one. Several other Governments have replied. Has the Maharashtra Government sent any replies?

CHAIRMAN: Generally the State Government which has an Adviser in Homoeopathy sends its report through the Adviser. So we can accept the Adviser's reply as the reply of the State Government.

SHRI N. G. GORAY: Yesterday there was a question about the closing of the register; new people are not getting an opportunity to register themselves; there are so many administrative questions. Will you like to say something on that? SHRI K. C. PANDA: How does your Board function?

DR. N. H. BARLAS: We have got the Secretary of the Board here. He will be giving you the information.

SHRI MAN SINGH VARMA: We want to know the role played by the Government.

SHRI UPADHYAYA: In our Bombay Homoeopathy Act, 1959 there is a provision for two Boards. One Board is for registration, which registers practitioners, those who have acquired a qualification. It is meant only for those who have a qualification. The other body is called Court of Examiners dealing with academic matters. I have been working for the last three years. This is the only State where there are two separate Boards. And I am the common officer for both the Boards. The first Board has 15 members and the other-has 11 members. Actually there is no necessity for separating the two bodies. And the review committee which was appointed by the State Government to amend the Act has suggested already the integration of both the bodies. And from financial point of view integration is the best. Even in the whole of India there is no State where there

Now I am the common officer, the Registrar and the Executive Officer.

SHRI RAMAKRISHNA REDDY: What about the examinations?

SHRI UPADHYAYA: There are two examinations. One is D.H.B. Examination, and another is L.C.H. which is held by the Court of Examiners. There is one college in Bombay; and....

CHAIRMAN: You are the Secretary

of the institution. Why did you not reply to the questionnaire?

SHRI UPADHYAYA: No questionnaire was addressed to me as Secretary or Registrar. The questionnaire 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -

was sent for the views of the Board, and the Board's reply we have sent already. the Court's reply is being sent.

AN HON. MEMBER: What is the duration of D.H.B.?

SHRI UPADHYAYA: Three years.

DR. LAXMINARAIN PANDEYA: Do you think a common course would be useful?

SHRI UPADHYAYA: Yes. If that is done, people from one State can go from one State to another. It would be a good thing. People are diversified. There should be a uniform course—common course.

CHAIRMAN: Tomorrow at 11-30, the representative of the Board of Homoeopathic and Bio-chemic Systems of Medicines, Bombay, are coming. He is giving his opinion in his personal capacity. When they come, please make it a point to be present tomorrow along with them.

SHRI UPADHYAYA'. We are also coming tomorrow.

SHRI N. G. GORAY: There is a general impression here that so far as the State Government is concerned, they are not going to make any move to encourage homoeopathy. Will it be correct to say like that?

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DR. BARLA: I do not agree. The Maharashtra Government is doing something about it. They are giving help. There is no neglect from their side and the State Minister, Dr. Zakaria, is taking keen interest in homoeopathy. The Government is giving all help. I think they are sympathetic.

SHRI N. G. GORAY: But they are not giving any funds...

DR. BARLA: This is because they are not giving enough funds. There are no funds earmarked for Homoeo-

pathy as such separately. All the programmes are initiated by the Central Government and these are financed by them.

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SHRI N. G. GORAY: The Poona University is not having any course for Homoeopathy. Is it so?

SHRI UPADHYAYA: This is because we do not have any Degree course here. We have got only Diploma course. When Diploma courses are closed and Degree courses are started, we will request the University to take it up. The Poona University can take up Degree course in Homoeopathy.

श्री चिरंजीव झा: क्या ग्रापने अपनी सरकार को होम्योपैथी की य्टिलिटी, उसकी आवण्यकता, उसकी जो यहां उपेक्षा हो रही है उसके वारे में समय समय पर परामर्श दिया है ?

डा॰ घरला : जी हो । लिख कर भी भेजा गया है, ग्रोरली भी बताया गया है, हर तरह से गवर्नमेंट को बताया गया है, लेकिन गवर्नमेंट के पास बहुत से प्राबलम हैं।

श्री चिरंजीव झा : प्रावलम तो होल प्राफ इंडिया में हैं; हर स्टेट में हैं, लेकिन महाराष्ट्र में होम्योपैशी को जो गति है, जिस स्प में इसका काम यहां हो रहा है उससे इस कमेटी को यह लग रहा है कि शायद सरकार को इसके सम्बन्ध में जानकारी नहीं है सौर एक परामर्शदाता का हैसियत से यह प्रापका काम होना चाहिए कि आप इस सम्बन्ध में सरकार को उचित परामर्श दें स्रीर उस सोर खीच कर लाएं।

डा॰ बरसा : लेकिन बहुत सी चीजें ऐसी हैं कि एडवाइस के बावजूद भी

SHRI N. G. GORAY: This is for the benefit of the whole Committee. Please speak loudly. It is not a conversation. SHRI RANA BAHADUR SINGH: How long have you been the Adviser?

DR. BARLAS: About one year two months.

SHRI RANA BAHADUR SINGH: By being an Adviser do you hold an appointed post and draw salary?

DR. BARLAS: No, Sir. I am an honorary Adviser and whenever the Government wants they generally write to me or call me and take my advice regarding homoeopathy. I do not get any allowances or any sort of facility; it is just an honorary post.

SHRI RANA BAHADUR SINGH: At. the moment are you in regular practice?

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DR. BARLAS: Yes, Sir. I have established my own practice.

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DR. LAXMINARAYAN PANDEYA: What is your State's budget for homoeopathy?

DR. BARLAS: None; there is no budget from the Government side.

AN HON, MEMBER: How many colleges are there in Vidarbha?

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DR. BARLAS: Seven colleges.

AN HON. MEMBER: Throughout the State?

DR. BARLAS: Nine.

SHRI JANAKI BALLAV PAT-NAIK: What should be the minimum qualification for the students for degree course and for diploma course?

DR. LAXAMINARAYAN PANDEY: You said there is no budget provision in the State for homoeopathy. Is it definite? Is not there any kind of budget?

DR. BARLAS: No.

SHRI JANAKI BALLAV PATNAIK: What should be the minimum qualification for the students for diploma «course and for degree course?

DR. BARLAS: For diploma it should be S.S.C. or Inter Science and for degree it should be at least B.Sc.

Shri N. G. GORAY: B.Sc. or I.Sc.?

DR. BARLAS: B.Sc. for degree -course.

SHRI N. G. GORAY: It cannot be B.Sc.

DR. BARLAS: But homoeopathy also is a very difficult science to grasp.

CHAIRMAN: Before we leave Maharashtra we are going to meet all the Members; they have already talked on the subject.

SHRI BHAOOSAHIB DHAMAN-KAR: Now the homoeopaths are not to be allowed to practise other systems of medicine. What about allopaths? Do you feel that allopaths who practise homoeopathy should also be qualified in homoeopathy?

DR. BARLAS: It is a complicated question. But in my opinion they must get proper training in homoeopathy. But so far as homoeopaths are concerned, they are using antibiotics and very powerful drugs. Recently a homoeopathic injected a lady with some drug and she died. That matter has been referred to the Surgeon-General. That is already in the court. So I am against homoeopaths who do not have proper training using allopathic medicines.

SHRI BHAOOSAHAIB DHAMAN-KAR: Similar provision for allopaths could be done?

DR. BARLAS: That might be done.

CHAIRMAN: Thank you very much.

[The witnesses then withdrew.]

[The Witnesses (Shri Radhakrishna Murthy, Jt. Secretary, the Regd. Homoeopathic Medical Practitioners Association, Hyderabad and Shri Thirupamaiah—Secretary, Registered Medical Practitioners Association, Hy-

derabad) were called in.]

CHAIRMAN: Mr. Radhakrishna Murthy, you act as the Joint Secretary, along with your friend, who is the hon. Secretary of the Association. Tell us something about your difficulties, the difficulties that you face while you are practising in your State. Do you have any difficulties?

SHRI RADHAKRISHNA MURTHY: We do not have any difficulties. Any person who has got knowledge of the English language can study homoeopathy. There are so many books. We can sit for an examination and we can also work under a senior homoeopath and gain experience. I do not find any difficulty.

SHRI MAN SINGH VARMA: Have you gone through the Bill?

SHRI RADHAKRISHNA MURTHY: Yes

SHRI MAN SINGH VARMA: Have you got anything to say about the Bill?

SHRI RADHAKRISHNA MURTHY: We have submitted a memorandum. We have some points. The first thing is the Bill strikes at further registration of homoeopathic practitioners based on experience. Homoeopathy was brought 'to this country from Europe and there are so many practitioners who are very responsible persons and whose practice is such that their registration cannot be denied. My submission is that registration of persons who are already practising and qualified should continue till such time that we get institutionally trained practitioners in good number.

SHRI MAN SINGH VARMA: You want that the registration of selftrained persons should continue. SHRI RADHAKRISHNA MURTHY: Yes.

SHRI MANSINGH VARMA: For ever?

SHRI RADHAKRISHNA MURTHY: No. Till such time we have a good number of practitioners in the country.

CHAIRMAN: How many members are there in your Association?

SHRI RADHAKRISHNA MURTHY: About sixty members. It was only recently started.

CHAIRMAN: How many of them are registered practitioners?

SHRI RADHAKRISHNA MURTHY: All are registered practitioners. Some have been provisionally registered and in the case of others the registration has been confirmed.

CHAIRMAN: Was your name enlisted?

SHRI RADHAKRISHNA MURTHY: Yes, in the register of the Andhra Board for Homoeopathy.

CHAIRMAN: You said provisional registration. What is that?

SHRI RADHAKRISHNA MURTHY: I have already submitted that under the A'adhra Act a person who has been practising homoeopathy for ten years is provisionally registered.

CHAIRMAN: When will they get full registration?

SHRI RADHAKRISHNA MURTHY: When they pass the examination conducted by the Board within three years from the date of provisional registration.

CHAIRMAN: Are there regular examinations being held?

SHRI RADHAKRISHNA MURTHY: There are regular examinations being held, but only this year they could not hold any examination due to some troubles.

CHAIRMAN: What trouble?

SHRI RADHAKRISHNA MURTHY: I am not competent to tell you about that. The Board is not functioning.

CHAIRMAN: If it is political you. do not have to tell us.

SHRI RADHAKRISHNA MURTHY: A new Board has not been appointed.

CHAIRMAN Dr. Jugal Kishore, Adviser, has some question to ask.

DR. JUGAL KISHORE: Is thereany statutory limit put? For how- long will this kind of registration goon?

SHRI RADHAKRISHNA MURTHY: The Act was passed in 1956 and from then onwards registration is going on.

DR. JUGAL KISHORE: For how long will this continue? What is the policy laid down by the Government?

SHRI RADHAKRISHNA MURTHY: There was a convention held recently of homoeopathic and other practitioners by the Government of Andhra. Pradesh and the Minister replied on the floor of the House that registration would continue for a further time. No time-limit has been fixed.

SHRI M. SATYANARAYAN RAO:. How many associations do you have in Andhra Pradesh, apart from yourown, of Homoeopathy?

WITNESS: There are some associa--tions, but I do not know the number.

SHRI M. SATYANARAYAN RAO:. Roughly you can say.

WITNESS: The Andhra Pradesh Homoeopathic Association and ourassociation. There are a number of other associations also the details of which we do not have.

SHRI M. SATYANARAYAN RAO: When our Chairman put the question to you whether you are having any difficulties, you said, No. That means, you are getting sufficient aid from the Government?

WITNESS: Difficulties? I thought it was about difficulties in the sense But other difficulties of practising. are there. The Government is not spending as much as they should spend They must have on homoeopathy. more hospitals, more doctors, more colleges, they must organise more libraries. Even the existing colleges are not having proper facilities.

SHRI M. SATYANARAYAN RAO: If it is so, did you make any representation to the State Government that these are the difficulties and that you must be given sufficient attention. On behalf of your association, did you represent to your Government?

WITNESS: We have not taken up that aspect so far. We are just building up our association. 1.1.1.1

SHRI K. C. PANDA: How many colleges are there in Andhra Pradesh?

WITNESS: There are four colleges.

SHRI K. C. PANDA: What is the course?

WITNESS: They are having the four-year course in diploma. There is no degree course in any of the col-- leges there.

SHRI SASANKASEKHAR SAN-YAL: In you experience as a doctor, you must have occasions for treating top-ranking people, officials ministers, etc.?

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WITNESS: I have had occasion to treat an IAS officer and his family. He is the Collector of Warrangal at present.

SHRI SASANKASEKHAR SAN-YAL: My next question is relevant. Is it, a fact that these patients after having failed to get relief in allopathy, they come to you?

WITNESS: That depends upon the patients. But the general tendency of the public is first to go to allopathic doctors as they are available every-

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where and only when they do not get sufficient relief they come to other system_s like Ayurveda. Homoeopathy etc.

SHRI SASANKASEKHAR SAN-YAL: Will you kindly advise us as to how to inspire that faith and confidence in the minds of the people which will make them to go to homoeopathy without going to allopathy?

WITNESS: I suggest that the Government should come to the aid of the homoeopaths. They should bring forward the homoeopathic system and see that it is available to all the peo-If the registration is continued ple. and the number is increased, it would be good. These practioners than can go to any part of the country and serve the people.

DR. LAXMINARAYAN PANDEYA: You said that there are four colleges in Andhra Pradesh. Are they run by the State Government or by any private agency?

WITNESS: Three have since been taken over by the Government and I understand that there is a proposal to take over the other also.

SHRI N. P. CHAUDHARI: You are practising homoeopathy for some time. You must have some knowledge of allopathy also?

WITNESS: Basic knowledge.

' SHRI N. P. CHAUDHURI: It means, you have allopathic practice also.

WITNESS: I am not used to it.

SHRI N. P. CHAUDHARI: In certain cases, do you prefer to have allopathic practices.

· WITNESS: No.

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SHRI N. P. CHAUDHURI: What do you suggest about a person knowing allopathy also practising homoeopathy?

WITNESS: Nobody should be allow-ed to do it.

18.1 SHRI N. P. CHAUDHARI: Do you suggest any punishment?.

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WITNESS: It will not: be out of place to mention before this august body—I had a discussion with Dr. Sankaran on this. But he said that it will not be possible to do that.

SHRI N. P. CHAUDHARI: I am asking about your personal view. Do you like any penalty to be given?

WITNESS: I would definitely like that. But my fear is that it cannot be implemented.

SHRI M. SATYANARAYAN RAO: It will have to be implemented.

SHRI N. P. CHAUDHARI: You must be knowing some doctors who have faith in allopathy and homoeopathy and they may be practising homoeopathy. Do wou prefer that? Would you allow them to administer allopathic drugs also? 1. 2. 1. 7 . 1

۰. . WITNESS: Most of the original leaders in homoeopathy they have been allopathic practitioners. Even Dr. Samual Hahnemann was an allopathic practitioner only. They also qualify in homoeopathy. They have no. difficulty about homoeopathy.

and protocolar in El SHRI N. P. CHAUDHARI: Without qualifying in homoeopathy, they practise. They have got degree in allopathy. Would you permit them?:

11 J 1 WITNESS: Provided the system of allopathy does not pollute-the system of homoeopathy. . . i H

· 1 . . . - SHRI N. P. CHAUDHARI: There is one allopathic doctor. But he wants to practize homoeopathy simultaneously, Would you permit him? Say, yes or not. a second second a state of •

WITNESS; No. Without the basic knowledge, he should not be entitled ... to do so.

SHRI K. RAMAKRISHNA REDDY: There are four colleges in Andhra Prades-you said so. What are they?

WITNESS: 1. Dr. Gururaju Government Homoeopathic Medical College, Gudivada, 2. Amarajeevi Potti Sri Ramulu Government Homoeopathic Medical College, Hyderabad, 3. Dr. Jaisoorya Government Homoeopathic Medical College, Hyderabad and 4. The Homoeopathic Medical College, Rajahmundry.

(The Witness (Dr. N. Lakshminarayana, Registered Medical ractitioner, Hyderabad) "was called in.) 1.20

and the second CHAIRMAN: Please: introduce yourself.

WITNESS: I am a registered medical: practitioner from Hyderabad, Andhra Pradesh . ` • V.

CHAIRMAN: Registered on the basis of experience?

WITNESS: No. on a basis of a formal examination.

. . . CHAIRMAN: Have you any points to tell us? :

WITNESS: Yes, Madam. The main point is, the Bill mainly contemplates a supervisory and administrative body. I feel that it must be given an academic status to award degrees. diplomas, etc. The position of homoeopathy in India $\mathbf{f}_{\mathbf{S}}$ entirely different from allopathy or ayurveda. In homoeopathy, except in Bengal there is no State faculty and it takes a long time to establish State faculties or faculties in universities. So, it is necessary that this Council should be given the academic status. It should be known as "the Indian Homoeo-pathy Educational and Research Council". As it is envisaged in the Bill, it will function merely as a supervisory body without any academic status. So: if it is given this academic status, it will be fulfilling certain obligations and it will con-.

tribute to the advancement of homoeopathy also, whereas as a supervisory body it may not contribute to the desired extent.

SHRI MAN SINGH VARMA: You mean that the Council as it is envisaged may not be in a position to control the academic side of the science?

WITNESS: Yes, Sir. As a specific instance, I may refer to section 23 of the All India Institute of Medical Sciences Act which says the following degrees shall be recognised medical qualifications. Similarly there must be a provision here also to award degrees. If an academic status is given to the Council. it may be an all-India body affiliating all homoeopathic colleges and degrees may be awarded, under the direct supervision of the Council, by the respective colleges.

SHRI MAN SINGH VARMA: Have you given these points in writing?

WITNESS: No, Sir, I thought it may not come within the purview of the Act. Then on going through the Bill in detail, I felt it would be relevant.

SHRI MAN SINGH VARMA: You can submit these points in writing also.

WITNESS: Yes, I will do that.

The second point is about the bifurcation of homoeopathic education. In allopathy we are now saturated with physicians-cum- surgeons. In homoeopathy, surgery may be restricted to a few people who want specialisation in it, who have a special aptitudec for it. Otherwise there is no use in getting a diploma in surgery and being treated as sort of fourth grade or fifth grade. There can be Bachelor of Homoeopathy and Master of Homoeopathy, and after special training, Bachelor of Surgery and Master of Surgery. SHRI MAN SINGH VARMA: You want to keep surgery separate?

WITNESS: It is necessary only to a few people who have special aptitude. The skills are so diversified. A surgeon cannot become a good physican. A knowledge of medicine is necessary for surgeon, whereas the skills of a surgeon are not necessary for a physician.

SHRI SASANKASEKHAR SAN-YAL: Do you get your assistance from the Boards of the Government or from the universities or from both?

WITNESS: No, Sir. from the universities we are not getting any help. We are getting assistance from the Boards pnly and that, too, a very negligible amount.

SHRI SASANKASEKHAR SAN-YAL: Therefore, would you like to be affiliated to the universities?

WITNESS: No, Sir, because the climate is not favourable at present. We cannot get any justice from the universities because of the traditional attitudes. The faculty of homoeopathy in Calcutta is a specific example.

SHRI SASANKASEKHAR SAN-YAL: Don't you think that you will be better equipped and you will attract a better cadre of people to come as teachers or professors if your institutions get the help of the Centre through the University Grants Commission?

WITNESS: No. Sir, history shows that it is not possible. It is for that purpose that I have suggested that the Council should be given an academic status so that it fulfils the obligations of the University Grants Commission also. Whatever assistance the Government is willing to give for homoeopathy can be given to the Council and it can act in the proper manner. You cannot get justice from the universities as the position stands to-day.

CHAIRMAN: The Council has an academic side also.

WITNESS: It may have an academic status, but as it is contemplated in the Bill, specific powers to award degrees. diploma, etc., are not provided.

CHAIRMAN: It is provided.

WITNESS: It must be provided. It is not provided now. That is why I referred specifically to section 23 of the All ndia Institute of Medical Sciences Act. 'A National Institute of Homoeopathy may perhaps be created, but it is a prolonged affair. The Council itself can function as a sort of University Grants Commission or All India Homoeopathic University or whatever it is, and it can affiliate all colleges to it.

CHAIRMAN: That cannot be done under this Bill. Universities are set up under a different Act.

WITNESS: We are having the Indian Institute of Science, Bangalore, the Institutes of Technology, etc. There is nothing like whether it can be done or cannot be done. We need not be traditional in this respect. According to the needs and demands. we have to act.

М. SATYANARAYANA SHRI RAO: Registered medical practitioners are the institutionally trained persons. Are they practising in villages or are they practising in only cities?

WITNESS: Most of the people are practising in cities and towns because from the commercial point of view villages are not so attractive unless the Government takes interest in homoeopaths.

CHAIRMAN: Does your State Government appoint homoeopaths in medical colleges? 1.11 1648 R.S.-15.

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WITNESS: No. Though it will be unfair on my part to say, the Governments have a very step-motherly attitude towards homoeopathy and homoeopathy profession is treated as disgraceful and pitiable. But for the initiative of the Central Government we would not have even this registration. So

CHAIRMAN: Government colleges. dispensaries and hospitals, they have given the numbers here. There is a very good report from the State Government.

WITNESS: The number 1s all right. But you see the atmosphere there. We cannot just compare ourselves with allopaths. We are just like an ant before a mountain.

SHRI MAN SINGH VARMA: For that atmosphere you homoeopaths are also at fault.

SHRI M. SATYANARAYANA RAO: Is it a fact that the homoeopathy practitioners are also giving injections and they are also indulging in allopathy?

WITNESS: Yes.

SHRI M. S. RAO: When the patients demand it or to impress upon the patients that they are also practising allopathy?

WITNESS: There are certain factors. One is for want of confidence on the part of the patient; sometimes for want of confidence on the part of the physician himself because of certain difficulties in training; for want of proper atmosphere in the society. The atmosphere is not favourable. This is majnly due to want of proper patronage by the State Government. Something should be done material by establishing hospitals and colleges. Only then can the situation be improved. And the main reason for giving injections is commercial. What I would like to stress more is most of them are quite apathetic to homoeopathy because

they are not able to have financial security with homoeopathy treatment and so they are not so much willing to come and take up homoeopathy. Somebody asked as to what is the opinion of allopaths or why allopaths are not giving proper regard to the claims of homoeopathy. They have got great for the claims of homoeopathy, but they are not actually coming forward for practice in homoeopathy because homoeopathy cannot give them that much of financial security.

CHAIRMAN: When persons like you are fighting so much, how can the State Government afford to ignore you?

All right. Thank you.

WITNESS: I have got some more suggestions. Madam, Please read clause 3 on page 2: What should be the number of persons on the proposed Council? We suggested at least 100 persons should be there. Or, if you think it will be too unwieldly. You may have 20 members on the Executive Committee and about 100 members may be on the General Council. The General Council may meet once in a year or so and the Executive Committee can meet as frequently as possible. What should be the proportion for every one thousand or 10,000? This is too much. Where the number of person enrolled on the State Register of Homoeopaths exceeds 100 but does not exceed 10000...,-most of the States are not having them. They have started only recently. For instance, Madras and other places will be in a disadvantageous position. Some States started 20 years ago. Some States started only two or three years back. So it would be better if it is on population basis irrespective of the number of practitioners....

CHAIRMAN: That is not acceptable.

WITNESS: Then this can be reduced to 1000 practitioners subject to a certain minimum in each State.

Another thing is about nomination by Government. It is not clear as it is envisaged in clause (c) in Chapter II. It does not say whether, he is registered or qualified. So by this Government will be empowered to select even unregistered and unqualified people also. So it should be restricted only to the registered people...

SHRI K. RAMAKRISHNA REDDY: One is registered and the other is registered and qualified.

WITNESS: Qualified is generally institutionally qualified. The registered is a legal qualification. The other is an academic qualification.

SHRI K. RAMAKRISHNA REDDY: For members belonging to the Central Council you want the educational qualification or the registration or both?

WITNESS: One they are licensed to practise homoeopathy, they must be given equal status and there should not be any discrimination between the two till such time that sufficient number comes up.

SHRI K. RAMAKRISHNA REDDY: You do not want any difference between the two?

WITNESS: No. But some difference may be there. There are three distinctive categories. One is converts coming from MBBS; the second is institutionally trained; and the third is registered. There are three.

SHRI K. RAMAKRISHNA REDDY: What is your opinion, should an allopath be allowed on the Council without having been registered?

WITNESS: They can be allowed, but they must be registered. Some people are actually practising homocopathy, but they are not known as homoeopathy physicians. But things are going so. So there must be some restriction. SHRI K. RAMAKRISHNA REDDY: In that connection is there any condition for registration or any provision....

WITNESS: In Andhra Pradesh there is only registration. First an application for registration is made.

WITNESS: Thirty years back, they organised a sort of some institute like that on the lines of the Institute for Charatered Accounts or Cost Accountants or Institute of Engineers and, that should have elevated the position better than this. But for several special reasons, they could not do it.

Now there are four papers. It should be a duration of three years. The examination should be spread into six parts, on half-yearly basis, as has been done in the case of Works Accountants or Cost Accountants. There should be at least 10 to 12 papers. covering the entire syllabus, leading to a Degree in Homoeopathy. Similarly, Cost Accounts....

CHAIRMAN: This is not relevant. Have you got any other points to make?

WITNESS: Page 3, clause 7 Five years' period is too much for President or Vice-President. Of course, for political and other such institutions five years' period is all right. But in this case, three years' term is proper instead of 5 years. This is a sort of academical work.

Then, they should not be entitled to issue sickness or death certificates, because certain medical aspects are involved. Even MBBS doctors sometimes refuse to issue such certificates. because that involves certain medical and technical aspects and sometimes they have to appear in courts to give evidence.

Then I need not emphasize the points which I have already taken up in my reply to the questionnaire.

दीमती सबिता बहिन ः डा० लक्ष्मी नारायण, झाप का मैं कमेटी की तरफ से घन्यवाद करती हूं। आज ने बहुत अच्छी तरह से अपने केस को प्लीड किया और ऐसा भी लगा कि झाप का सब्देक्ट के ऊपर अच्छा गिप है और प्राप की अच्छी स्टेडी भी है। मैं एक बार फिर झाप को धन्यवाद देती हं।

(The witness then withdrew).

(The Committee then adjourned.)

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Saturday, the 7th October, 1972.

(AT BOMBAY)

PRESENT

1. Shrimati Purabi Mukhopadhayay—Chairman.

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- MEMBERS

Rajya Sabha

7. Shri Sultan Singh

8. Shri N. P. Chaudharl

9. Shri T. G. Deshmukh

10. Shrimati Savita Behen

Shri Bhupinder Singh
 Shri N. G. Goray

- o. Shiri N. G. Golay
- 4. Shri Sitaram Kesrl
- 5. Shri Man Singh Varma
- 6, Shri K. C. Panda

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Lok Sabha

11. Shri Ziaur Rahman Ansari	19. Shri Mallikarjun
12. Shri Muhammed Khuda Bukhsh	20. Shri Prasannbhai Mehta
13. Shri Bhaoosahib Dhamankar	21. Shri N. Sreekantan Nair
14. Shri Hiralal Doda	22. Shri Janaki Ballav Pat naik
15. Shri Nageshwar Dwivedi	23. Shri M. Satyanarayan Rao
16. Shri Madhuryya Haldar	24. Shri Umed Singh Rathia
17. Shri Chiranjib Jha	25. Shri K. Ramakrishna Reddy
18. Shri B. R. Kavade	26. Shri Rana Bahadur Singh

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy.

SECRETARIAT

Shri M. K. Jain, Under Secretary.

WITNESSES

(1) Dr. T. Seshachary, Hyderabad.

(2) Dr. N. Krishna Rao, Hyderabad.

(3) Representatives of (i) the Court of Examiners of Homoeopathic and Blochemic Systems of Medicine, Bombay; and (ii) the Board of Homoeopathic and Biochemic Systems of Medicine, Bombay:--- (i) Dr. J. K. Sanal.

(ii) Dr. R. M. Chincholkar.

representatives of the Court.

(iii) Dr. A. S. Dhole.

(iv) Dr. M. C. Batra.

(v) Dr. K. Prahlad.

(vi) Shri S. B. Upadhye, Registrar. representatives of the Board.

(4) Dr. H. I. Jhala, Director of Medical Education, Government of Maharashtra, Bombay.

(5) Dr. R. K. Desai, Ahmedabad.

[The Witness (Dr. T. Seshachary, Hyderabad was called in.]

CHAIRMAN: Dr. Seshachary, on behalf of our Committee, I express my thanks to you for coming here again. We were not here when you came to give your evidence yesterday. We had to go to Bhiwandi. And since you were the only witness, we thought that we could adjust our programme and hear you today. You have had inconvenience, we are sorry for it. Please introduce yourself.

DR. T. SESHACHARY: I am a retired IAS officer practising homoeopathy from 1940. It is a hobby. I was very ill and I had tried Allopathy, Ayurveda and Unani systems. I could not be cured by them. Then I turned to Homoeopathy and was cured and took to Homoeopathy as a hobby.

CHAIRMAN: I may tell you that the evidence that you tender here is strictly confidential and should not be disclosed till it is placed on the Tables of both the Houses.

WITNESS: Yes.

CHAIRMAN: Then, by 'hobby' you mean that you are not doing it professionally but that you are interested in it and you do it for charitable purposes? WITNESS: Certainly.

CHAIRMAN: Have you gone through our Bill?

WITNESS: Yes.

CHAIRMAN: Have you any comments to offer?

WITNESS: Yes. In Clause 2(1)(a), it should be 'and|or' registration of practitioners of Homoeopathy and then it would be better. Then you say that the 'Central Council would meet...." Which year? Calendar year or academic year or financial year? That should be clarified. Then, if we have one smaller body it will be useful I suggest, if we have one representative from each State and a nominated member of the Central Government to act as liason, if is a smaller body and it would be more useful.

SHRI MUHAMMED KHUDA BUKSH: Do you want that the meeting should meet twice?

WITNESS: It is said, at least once. It does not mean only once.

SHRI MUHAMMED KHUDA BUKSH: It is not making it mandatory. Should we not make it more than once. That may mean more than one. CHAIRMAN: Whether it is the calendar year or financial year or academic year, we should make it clear.

Then take Clause WITNESS: 15(3). It confers only the right to practise but no other privileges as specified in sub-clause (2) (a). Only those homoeopaths who are qualified and registered will get all those facilities i.e. "....shall hold office as Homoeopathic physician or any other (by whatever designation office called)...." I do not know the reason. I am supposed to be the honorary consultant to the Governor. Immediately the Bill comes into effect, I will have to ask the Governor to cancel my appointment as the honorary physician or face the penalty of prison and or fine,

CHAIRMAN: You are registered?

WITNESS: I am registered. But unless clause 15 (3) says 'he shall also hold office. I am liable for penalty as Clause (2)(a) says "shall hold office..... in any institution maintained by a local or other authority." 'Other authority' may mean also a private authority?

Sub-clause 27(a) excludes Homeopaths not having medical qualification and registered from holding office anywhere.

CHAIRMAN: Clause 15(3): "Nothing contained in gub-section (2) shall affect...."

WITNESS: Clause 15(2) says-

"No person, other than a practitioner of Homoeopathy who possesses as recognised medical qualification and is enrolled on a State Register or the Central Register of Homoeopathy shall hold office...."

This means, that, he must be qualified as well as registered. He shall not be holding any office if he is only registered as Sub-clause (3) specifically says-- "Nothing contained in sub-section (2) shall affect—

(a) the right of a practitioner of Homoeopathy enrolled on a State Register of Homoeopathy to practise Homoeopathy in any State merely on the ground that. on the commencement of this Act, he does not possess a recognised medical qualification."

That means, he can practise but he cannot hold office by whatever designation. This means that I will have to ask the Governor to cancel my position as his honorary consultant?

CHAIRMAN: The intention is to restrict the non-institutionally trained persons from getting into some posts. That is exactly the intention. If you differ, you are at liberty to say so with an open mind.

WITNESS: The unqualified but registered practitioners may be allowed to hold 'any honorary post. These people are experienced people, though not qualified, but they are doing social work.

CHAIRMAN: As an ex-JAS officer, you know the difference between 'honorarium' and 'honorary officer'.

WITNESS: Yes.

CHAFRMAN: But if they hold high office in the Government even in an honorary capacity, who will mould the education and practice in this? Who decides this?

WITNESS: If you think that a person is competent to save human life, I do not see any reason why you should stop him from getting an office.

CHAIRMAN: There is distinction between practice and allowing that person to hold even an honorary post. For holding a post there will be no bar for the existing persons like Dr. Seshachary, because clause 15(3) (b) will protect them. But what about

the future? We are legislating for the future also. In that case, the intention of this Bill is to stop such persons who are not institutionally trained from getting into posts. whether honorary or paid. You may ask, if a person is allowed to practise, what is the difficulty in giving him the post also? The difficulty is, in the Central Council you are to prescribe also the academic side of the whole thing. So, if a person has not been properly trained in an institution, he is not a fit person to lay down the syllabus, inspect the colleges and so on. Persons like you are protected by sub-clause (b) of clause 15(3) which reads:

"The privileges (including the right to practise Homoeopathy) conferred by or under any law relating to registration of practitioners of Homoeopathy for the time being in force in any State, on a practitioner of Homoeopathy enrolled on a State register of Homoeopathy;"

Now you are a registered practitioner and you are enjoying the privilege of holding a post. You will continue to enjoy that privilege of holding that post. If you are not a registered medical practitioner, then you will be debarred.

WITNESS: Unfortunately I am also a law graduate. So when a specific clause excludes the holding of office, the general privilege may be vetoed by it.

CHAIRMAN: You are also having the proviso. The proviso is as important as the main clause. You are mentioning clause 15(2). I am referring you to clause 15(3).

WITNESS: Well, if that is the intention, then it is all right. Anyhow I thought I should bring it to your notice.

CHAIRMAN: The proviso will protect persons like you who are registered. But this clause will affect those people who did not get themselves registered but who are doing work in an honorary capacity. The right course for such people is to get themselves registered.

WITNESS: Then on page 9, clause 24, there seems to be some omission here. I am not able to follow the clause.

CHAIRMAN: There is some mistake here. It has been corrected in the Corrigenda to the Bill.

WITNESS: Section 31-you read this section: it mentions in a general way- "....for anything done in good faith In Section 32 subsection (2) we have got another clause-"Every rule made under this section shall be laid, as soon as may be, after it is made, before each House of Parliament while it is in session for a total period of thirty days which may be comprised in one session or in two successive sessions and if, before the expiry of the session in which it is so laid or the session immediately following, both Houses....any such modification or annulment shall be without prejudice to the validity of anything previously done under that rule." When clause 31 protects generally acts done in good faith, if the protection clause is retained in section 32(2) it protects acts done in good faith, and it need not be explained also. It is practically bypassing Parliament.

CHAIRMAN: No, Section 31 specifically deals with protection of action done in good faith. Section 32 specifically deals with the cases under another section. We have got the rule making power. Who has got that power? The State Government or the Central Government as the case may be. When the rule making power has been vested with the Government, the Government may make any rules as it likes. You do not want that. You want the Parliament to go through those rules. So then those rules will be placed before both Houses of Parliament, Now suppose

any rule which has been made by the Central Government and placed before both Houses of Parliament, any Member wants to modify the rule and it is passed in both Houses of Parliament, the rule is changed But whatever action has already been taken previously under the rules that the Government had made, anything done before this modification by Parliament, will be saved. So this is nothing but a rule making power of the Government and the jurisdiction of Parliament in annulling or passing those rules. This is specifically for cases which may be instituted in the court of law, Section 31 is modification of the rules already made by the Government under this Statute.

WITNESS: Not modification. Government gets rule making power under Section 32(2) only.

CHAIRMAN: In case Parliament in toto disapproves the rules already made by the Government, it means action taken by the Government before the rules were disapproved by Parliament will still hold good. It is there in every Act.

WITNESS: Practically it means Government can act even without the approval of Parliament and need not give an explanation whether it was done in good faith or not.

CHAIRMAN: No. Then, next point?

SHRI M. SATYANARAYANA RAO: You started this practice during your service—you said you were an IAS Officer—or after retirement?

WITNESS: Even while in service.

SHRI M. SATYANARAYANA RAO: How many years of experience are you having?

WITNESS: I started in 1940

SHRI MAN SINGH VARMA: Why do you not prefer to sit for an examination? . WITNESS: My idea was not to make it a profession. It is a hobby. I was in service. I found this hobby interesting.

CHAIRMAN; All right. Thank you.

[The witness then withdrew]

[Witness (Dr. Krishna Rao Hyderabad) was called in].

CHAIRMAN: What are your qualifications?

WITNESS: I am a registered medical practitioner in homoeopathy and I have been Secretary of Jayasoorya Medical College. We handed over that college to the Government two months back.

We had financial difficulties initially because the State Governments were not able to spend funds on homoeopathy. The Central Government financial policy should be a bit more flexible in diverting funds for the ultimate improvement of an institution rather than earmarking funds for specific purposes.

Then, the spending of money on research by under-graduates is of ho benefit, for the simple reason that diploma holders are not able to take up research work. It is, therefore, better that only such people are entrusted with research work who are graduates. Only graduates should be entrusted with research work. And for that, the Government can think of starting a Central Institute to start a Degree Course or to finance any private management which is coming forward to start such Degree course of two years for diploma holders,

In our country, none of the hospitals are properly equipped, because finances are not coming forward and the Government of India's policy in certain cases is such that they give a matching grant if the State Government gives something. If the State Government does not give anything, the Government of India also does not give anything, with the result that the institutions are suffering. So the Government of India should adopt an independent policy in this regard.

So far as teachers are concerned, there should be one year's training for them, because that is an art by itself. Knowledge is different from the art of teaching. Both are quite different. So if these people are given at least one year's training, then we can have better lecturers.

Then, instead of giving them medicines—medicines of all the three systems—to the present registered medical practitioners, it would be much better if they are given the medicines of the system in which they are registered. In that case they will be able to do better justice.

In this country we have 90 per cent. registered medical practitioners and only 10 per cent institutionally qualified persons. In trying to establish a classless society, let us not create classes. While we can given different privileges for institutionally trained people the basic privilege of contesting for the Council must be given to both. We should not differentiate between the two. There will be a Central Council. Anyhow, sub-committees will be there. Where the subcommittees are intended only for institutions, we can have only institutionally trained people on that. In that way, it will not clash with the principles also.

The State Governments are not able to start a few dispensaries. So, by spending Government money entirely on institutions, without developing dispensaries and hospitals, we are creating unnecessary unemployment and bottlenecks. So there should be a planned programme of development for this.

Then, in rural areas, allopathic doctors are not willing to go. The higher the qualification, the farther they are from the rural areas. So these diploma holders and registered medical practitioners could advantageously be employed for rural areas. If you want to send only degree holders there, they do not go because, after studying for six years they are not mentally prepared to go to the villages. About the efficacy of the system of homoeopathy the question does not arise because of the simple fact that the Government of India has recognised the system. It is a question of how to develop the system of homoeopathic treatment by which the people at large would derive the maximum benefit. For a proper development of the system I personally feel that in every institution hospitals should be developed. Now it has to be seen that the funds that are allotted are not wasted. All the institutions do not have hospitals because the responsibility for hospitals rests with the State Government. So, if the State Government is not prepared to spend money it is not possible. The Government can have a more flexible policy. Ultimately I think the amount the Government of India is spending would go to the benefit of the students. And unless we have degree classes for homoeopathy our people will not be able to achieve their objective.

Now it is provided that after the diploma course of four years the degree course should be of two years' duration. I personally had discussions with the Vice-Chancellor of the Osmania University and generally the universities say that unless and until we have a six year degree course they are not going to recognise it. Now the Government of India will be running a four-year diploma course. I personally feel that it is waste of money. I think if a two year degree course is started after the four year diploma course, there would not be any bar for the universities to give recognition. But there are some difficulties. Ayurveda and Unani are recognised by so many universities but about homoeopathy as such I think hardly one university is having it. The universities are not taking it up for the simple reason that—1 do not attribute any motives—the Γ cans of the Faculties are not willing to take up the system.

CHAIRMAN: What is the difficulty?

WITNESS: So many hardship are there. I personally feel that if the Central Council could award the degrees to homoeopaths that would really be better.

CHAIRMAN: Do you want the Central Council to have academic studies?

WITNESS: Yes, and the power of recognising and awarding of degrees that would be better.

CHAIRMAN: Some such suggestion was made yesterday.

WITNESS: That would be better and till such time as the degree holders come, the diploma holders can continue as research workers.

Now the lecturers should be qualified people and they should have had some training in teaching because knowledge is one thing and the capacity to teach students is quite another thing. Now even if they are postgraduate people 90 per cent of the students will not be able to follow them. So, if training is given to lecturers...

CHAIRMAN: You mean refresher course?

WITNESS: Not refresher course. Now we have to find out who wants to take up teaching as profession and then some one year's coaching must be given to them; that would be better.

CHAIRMAN: When they are appointed as teachers there they can be trained; otherwise how to know who is going to be a teacher?

WITNESS: From aptitude. We can ask who would wish to become teachers and at least by that we can have 40 per cent or 50 per cent as lecturers to teach the students better.

SHRI MAN SINGH VARMA: You mean there should be teachers' training institutions?

WITNESS: Yes. Now regarding research funds, the funds are being utilised to purchase the latest equipment even without the knowledge of how to handle it. Now they should know about priority requirements and the funds could be diverted for other purposes like hospitals and dispensaries and it would help development at the undergraduate level; that is my personal opinion.

About the Bill I have some suggestions to make. Under the definitions if the term "registered medical practitioner" is also put it would be better. Otherwise 90 per cent of the practitioners would be completely eliminated.

SHRI MAN SINGH VARMA: What is your suggestion?

WITNESS: It is that the term "registered medical practitioner" should be defined for the purposes of the Bill. You can give more privileges to the institutionally trained people but the basic opportunity for representation must be equal.

CHAIRMAN. We have not given equal opportunities to them?

WITNESS: You may give better privileges and opportunities to institutionally trained men but the fundamental opportunity is to contest for the General Council; that should be there.

From each State at least a minimum of 2 people should be there subject to a maximum of five at the rate of one for every thousand people. In the Second Schedule it is given as one for every ten thousand; ten thousand is very high. The purpose of the Bill is to regularise the practice of homoeopathy and to registered homoeopathic practitioners. These are the two aims of the Bill. It is essential that there should be two members from each State. They will be in turn able to spread homoeopathy in their States. Instead of there being one seat for each ten thousand, it should be one seat for each five thousand practitioners. The maximum for a State should be five.

SHRI MAN SINGH VARMA: You want at least a minimum of two members from each State.

WITNESS: Yes, there should be a minimum of two from each State They should be able to assist the State Government in seeing that homoeopathy spreads throughout the State. They should be the spokesmen of the Government of India in each State. If two members are associated with the Committee, they will be able to coordinate it and they will see that there is no clash between the State and Central Register.

SHRI MAN SINGH VARMA: If we allow one member for every 5,000 registered, in a new State there may not be even 200 practitioners.

WITNESS: The minimum should be two from every State, subject to a maximum of 5 seats for a State.

SHRI MAN SINGH VARMA: In that case a new State will have two members, although there may not be many practitioners.

WITNESS: There should be a minimum of two members subject to a maximum of five members. Then the Central Council will be able to run better. Then, I come to nominations. Thirty per cent for nomination, I feel, is very high. If one-third of the seats are to be taken away by nomination, there will be a less number of seats I.

for election in a democratic way. It would be better if we reduce the number of nominated members. It is provided that the Government of India can nominate persons if they find that their services are useful. There is nothing wrong in nomination, but the less the number the better it would be.

SHRI MAN SINGH VARMA: The Government of India at their discretion can nominate such persons

WITNESS: Instead of fixing the percentage please fix the number. That would be better. Thirty per cent is too high a percentage. It should be reduced.

Clause 5 (1) says:-

"No person shall be eligible forelection to the Central Council unless he possesses any of the medical qualifications included in the Second Schedule...."

Ninety per cent of the practitioners: are agitated over the registration. If we change the definition regarding a registered medical practitioner, the majority of the RMPs would be covered. We should give opportunity to . young people.

Then, I come to clause 7. The Bill contemplates both the President and the Vice-President to be ex-officio members of the Executive Council. If any appeal is made against the executive's decision, the Vice-President will not be able to take an independent decision.

Clause 11 says;

"The Central Council shall-

(a) appoint a Registrar who shall act as Secretary and who may also, if deemed expedient, act as Treasurer;".

I would suggest that the Registrar and Treasurer may both operate the ac-. counts jointly. Clause 15(3) (d) reads:-

"The rights conferred by or under the Indian Medical Council Act, 1956 or the Indian Medicine Central Council Act, 1970 of persons possessing any qualifications included in the respective Schedules to the said Act."

This clause may be deleted and their names should be registered by the State Board.

SHRI MAN SINGH VARMA: You want this clause to be deleted. Why?

WITNESS: We are not closing the Central or State registers for some time. People who are already practising can register themselves with the State Board. They should be allowed to practise without getting their names enrolled in the register.

CHAIRMAN Any questions by Members?

SHRI JANAKI BALLAV PATNAIK: You suggested that this Council should be a teaching institution.

WITNESS: I said that the Council may start a teaching institution. They may start a central teaching institution. Professors and teachers who wish to get themselves trained may do so.

SHRI JANAKI BALLAV PATNAIK: For awarding degrees do you think there should be a body like the Central Institute of Science and Technology? Do you suggest that there should be a Central university for homoeopathy which should be under the control of the Institute of Science and Technology? The degrees are to be issued by them.

WITNESS: It is better if it is issued by the Institute of Science and Technology.

SHRI JANAKI BALLAV PATNAIK: Is there any improvement after the Government has taken over the college?

WITNESS: The Government have taken it over only two months ago. They have given certain assurances. In the last two years we used to pay the lecturers on the first or second. Because of some technical procedure adopted by the Government the lecturers are not able to get their salary promptly. As far as the college is concerned, we are prepared to hand it over to the Government at any time. Because the students have demanded that there should be a proper hospital established, we are waiting for it. They seem to have put the cart before the horse.

SHRI JANAKI BALLAV PATNAIK: How is this hospital run and how is the teaching done?

WITNESS: The Andhra Pradesh Government gave an assurance that they would start a hospital attached to the college, but they could not implement the promise. For that they require certain funds.

SHRI BHAOOSAHAIB DHAMAN-KAR: You may say, for the sake of policy that he should not be made the Chairman of the Executive Council. The Vice-President should be made the Chairman. How can the President be conversant with the constitution because the general body of the Council meets only once a year?

CHAIRMAN: The Governor is addressing the legislature once a year. About this there may be some difference in points of view.

WITNESS: When the Vice-President happens to perform some duties he works under it. The President is informed of the proceedings of the meeting,

CHAIRMAN: If I am the vicepresident of the Executive Council and if I choose not to inform the President of the Council?

WITNESS: You can have a rulemaking under the Act. SHRI M. SATYANARAYAN RAO: Your remark about the homoeopathic practitioners—about this, do you suggest that a homoeopathic doctor should be allowed to practise allopathy also?

WITNESS: It is the other way round.

[The witness then withdrew]

Representatives of the Board and the Court of Examiners of Homoeopathic and Biochemic Systems of Medicine, Bombay.

[The witnesses Dr. K. Prahlad, Dr. M. Batra, Dr. R. M. Chincholkar, Dr. J. K. Sanyal, Dr. A. S. Dhole, and Shri S. B. Upadhye—were called in.]

CHAIRMAN: Please introduce yourselves. Say, who is the member of the Board and or of the Court.

SHRI S. B. UPADHYE: Madam, Dr. A. S. Dhole, Dr. Chincholkar and Dr. Batra are the Board members. Dr. Barlas, the Adviser to the Government, who is sitting there, he is also a Board member. Then the Court members are: Dr. Chincholkar, Dr. Sanyal, Dr. Prahlad. I am the Registrar and Secretary to the delegation.

CHAIRMAN: Dr. Dhole, the Board is discussing this through you?

DR. A. S. DHOLE: Yes.

CHAIRMAN: Have you got anything to say with regard to the provisions of the Bill? You have replied to our questionnaire and we have also your circulars. Have you got any other points? And after that, our Members will examine you.

- DR. A. S. DHOLE: We have submitted our points and we are ready for questions.

SHRI BHAOOSAHAIB DHAMAN-KAR: I want to know whether Dr. Barlas who is the Adviser to the Government is also a member of the Board?

SHRI UPADHYE: Yes.

CHAIRMAN: So, he is the Adviser to the Government and he is also a member of the Board. Is he a member of the Board in his private capacity?

SHRI UPADHYE: Yes, in his personal capacity.

श्री मान सिंह वर्माः वोई का सरक र

से क्या सम्बन्ध है यह स्पष्ट रूप से बता दीजिए ।

DR. DHOLE: The Board is constituted by the Bombay Act of 1960, and the Court is a body constituted within that Act to take care of the academic side of it. The Board has been constituted and brought intoforce by the Act. The Board deals with the professional requirements of Homoeopathy, and the Court represents the academic side.

CHAIRMAN: Who gives the registration?

DR. DHOLE: The Board gives the registration under the Act.

CHAIRMAN: The Court holds examinations?

DR. DHOLE: Yes, it looks aftereducation, supervision of education and so on.

CHAIRMAN: Who recognises the college?

DR DHOLE: The recommending body is the Court of Examiners.

CHAIRMAN: The Board has nothing to do with the academic side of the thing.

DR. DHOLE: No, Madam.

SHRI JANAKI BALLAV PATNAIK: In regard to Point No. 2 of your supplementary memorandum, you have suggested that the words "Court of Examiners" should be inserted inclause 2(1) (a)—*i.e.* "..., means an Examining Body of Homoeopathy (by whatever name called)...." What is the point that you want to make?

DR. BATRA: I understand your point. You might like to substitute "any Faculty (by whatever name called)" as a synonym for the Board. But here there is a bit of anomaly. You do not have a substitute for the Board: there is something in addition to the Board, Where the Board does not exist and something exists in the place of the Board, by whatever name it is called, then you might substitute it for the Board. But in Maharashtra, for example, there is a peculiar position; both the Board and the Court exist and have their separate and distinct functions. In such cases it might be difficult to substitute for the Board the Court, because the Board is there in its own right and there is no substitute required. So, -either Maharashtra will have to fall in line with the rest of the country, -or the rest of India will have to provide for this kind of arrangement.

CHAIRMAN: I want to put a specific question to the Board and the Court. Here in Maharashtra you have a system of enlisted practitioners, who are not properly qualified. The provision is there in your Act also; I consulted your Act. Now when you enlist a person, you are under a statutory obligation to hold examinations for these enlisted persons after some time and give them proper registration. Have you fulfilled the statutory obligation expected of you?

DR. SANYAL: We tried, but the State Government turned down the proposal of taking them on the register. Then this matter remained idle for some time. Again the Court proposed that taking into consideration the period of their practice, those who have completed 10 years, they should be taken on the register. But the Government said that the matter was under consideration and since two years it is under consideration. CHAIRMAN: May I conclude then that though the State Government while legislating this Act promised, and kept a statutory provision in the Act, to give further scope to the enlisted persons, it is now withdrawing that facility and breaking the rules that are already there in the statute?

DR. SANYAL: Yes, Madam.

CHAIRMAN: Secondly, when this Bill is passed into law, the enlisted persons in Maharashtra will be debarred from practising. The enlisted persons do not come within this Bill. So, it is the obligation of the Court and also of the Board to see that they are not debarred and they are not penalised for no offence of their own.

DR. SANYAL: Yes, we sympathise with them.

CHAIRMAN: You only sympathise. It is a matter of life and death for the enlisted practitioners in your State. A_s the representatives of the Court, you have to convince us that you do your best to get them registered immediately or to take up the matter with the Government so that these people are not debarred from practising, because we are not going to keep the words 'enlisted practitioners' in the Central Register.

DR. SANYAL: We are trying our best and till now the Government has been saying that it is under consideration

SHRI BHAOOSAHAIB DHAMAN-KAR: How does the Government come into the picture when the authority vests with the court and the board?

CHAIRMAN: No, it does not vest with them.

Now gentlemen, please tell us frankly, we are going back with this impression that though the court had the power to do something for the enlisted people, though the State Government could come to their rescue, they all kept mum when their turn for action was there.

DR. DHOLE: At the outset I may inform you that there is no statutory provision for conducting any examination for the enlisted persons within the Act. So the question of their registration does not depend upon the examination. The only other thing is that the Board has recommended that the enlisted persons as they are enlisted by way of registration by way of practice during their tenure of practice, they should be within the completely specified period as provided for the registration of practitioners the Government should take up that thing and they should be given registration. Our Government has not done that.

CHAIRMAN: Is that the provision in the statute, in the Act?

DR. DHOLE: The provision has not been made that after their completion of the tenure of practice, they should be registered. This provision is not there.

CHAIRMAN: Then why did you enlist them, under which provision? Your provision for enlistment is in Section 20 and 21 read together. Please explain the provision.

DR. BATRA: In the Maharashtra Act there was a provision of two kinds. One was for people who were in practice for ten years from a specified date and the other was for another category of people who were practising on that specific date. So there is little difference. They actually took into consideration those people who were really practising on that particular date and instead of registering them, provided for them the right of practice minus certain other rights just to let them continue their practice. It is a peculiar advantage given to certain groups of people who were then considered.....

SHRI BHAOOSAHIB DHAMAN-KAR: You mean it is advantageous or disadvantageous?

DR. BATRA: I do not know. I consider it an advantage to those people because they wanted. It did not come only from the Government side. At that time in 1959 on 10th August when the Act came into force, nobody foresaw that the Government of India would come forward with an enactment like this. It became an anomaly in the light of the present development. There is no provision for registering them. They were allowed to continue as enlisted practitioners. That is number one. Number two: It is the board which is to register this kind of people and not the court. If at all you want a scapegoat it is the board which is to register people whomsoever they want to register and to amend the schedule for registration-So far as those people were concerned, we were sympathetic with them not even knowing that the Central Council Bill would come and it would become an anachronism to have this kind of people...

CHAIRMAN: Who were showing sympathy? You or the State Government?

DR. BATRA: Although ten years have passed, no person has yet been regularised in the register.

CHAIRMAN: I was talking about the board because the board passed a resolution.

DR. BATRA: That is because we can only recommend to the State Government for the amendment of the schedule. We as a homoeopathy board canont take it into our head to make any such changes. It is provided in the Act itself that these people are listed and they stand listed till the time of death and they will remain enlisted. CHAIRMAN: In section 20 subclause (c) there is no provision that it has to be referred to the State Government ...

DR. BATRA: There is no provision

CHAIRMAN: Why do you take the plea that the State Government did not do it. Everything is in a mess, I am sorry to say this.

DR. BATRA: I beg your pardon. I think the question has not been fairly understood.

CHAIRMAN: The question has not to be understood by me. The question has to be dealt with according to the provisions of the Act. And those provisions have not been implemented. I am very sorry to say this. As the chairman of this Committee I take note of this.

SHRI UPADHYE Madam kindly

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CHAIRMAN: I do not know who is really representing your case?

I want this specific thing: (1) What do you want the enlisted persons? (2) Do you want these enlisted persons to get the registration? If you want it, who is going to do that? The Board? The Court? Or the State Government? For heaven's sake take it up within two months and finalise the issue before this thing comes over their head, before the guillotine comes over their head. I am only interested in that. If we do not have that sincerity of purpose, we can take down your evidence and go back.

DR. DHOLE: The Board has no power. So the Board has done only in sympathy with the enlisted persons that they should be registered for making a dialogue and certain recommendations were made to the Government. CHAIRMAN: You have done that?

DR. DHOLE: Yes.

CHAIRMAN: And if the Government does not move?

DR. DHOLE: Then we have to finance another attempt.

CHAIRMAN: You go and tell them, meet them, speak to them, and tell them about your position and your difficulties.

DR. DHOLE: We have all sympathy for the enlisted persons because as they have completed their tenure of practice they must be registered automatically.

CHAIRMAN: Then they must be informed.

DR. DHOLE: There is one thing which I would like to say. There was the Homoeopathy Act of 1951. In this three categories of registration were there. There was groupism, groupism in this respect that those practitioners who were allopaths in the beginning and homoeopaths of something, they were given the main category. Then those practitioners who were homeopaths with some allopathy were given the second category. And those practitioners who were simply homoeopaths were given the third category. The Bombay Act 1951 was repealed by a new Act in 1960.

CHAIRMAN: This is the Bombay Act. I am looking in to the Maharashtra Act. Why do you confuse me? I have got a copy of the Bombay Homoeopathic Practitioners Act. Is this the only Act?

DR. A. S. DHOLE: This is the only Act in our State.

CHAIRMAN: In this Act, you have included portions which ultimately join Bombay and constitute the State of Maharashtra? DR. A. S. DHOLE: In this Act. ..

CHAIRMAN: Do not explain anything which has already been repeated in those sections.

DR. A. S. DHOLE: But it is the job of the Government to make a provision in the Act by amending the provisions. Such provision should be there in the Act. That provision is not there. We want that provision..

SHRI MAN SINGH VARMA: How did that happen?

DR. A. S. DHOLE: On one thing I would like to enlighten again. The Government must appoint a subcommittee to go through the amendments and rules in the previous years. They recommended....

CHAIRMAN: Section 20, sub-section (9) gives power both to the Board and also to the State Govern-Thent to appoint a committee to enquire into the claims of persons who are enlisted and their claims for registration. Have you appointed this committee?

DR. A. S. DHOLE: Yes, I was one of the members of that committee. * Further, the Government, by notification, appointed a District Judge and two new more members to go into

, the applications. The Appellate Tribunal heard appeals, and some people were registered.

CHAIRMAN: How many have already been given registration?

. . . .

DR. A. S. DHOLE: About 1100 people have been registered.

CHAIRMAN: Under which Act could you do that? Under which section of the Act?

DR. A. S. DHOLE: The applicants rejected for registration on the practice basis were heard by this committee....

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CHAIRMAN: You please read your own Act. There is a provision for having a committee for examining the claims for registration. There was no question of amendment.

DR. BATRA: 10 years ago this clause has already been implemented. As soon as the Act came into vogue, a committee of three members was formed for registering people whom they thought were suitable, and enlisted some people whom they thought fit. There were certainly some people who were dissatisfied because they were either not registered OT they were not enlisted. the So. tribunal....

CHAIRMAN: I am not asking about the tribunal. I am asking you about the functions of the committee.

DR. BATRA: Those functions have been performed. This is what I have stated. On the 10th of August 1959, whosoever was in practice in the State of Maharashtra for 10 years was registered...

CHAIRMAN: Let it be

DR. A. S. DHOLE: The position is clear....

CHAIRMAN: Listen. Specially I am telling the Government that the feeling of our Committee is that though there are very good registered and institutionally trained homoeopathic practitioners in your State, somehow or other the provisions of your Act have been in adequate. You have still not enlisted persons who are practising in Maharashtra. In the Central Act, we are not keeping any provision for enlisting persons. So the day this thing comes into force, these persons will be debarred from practice. Since most of them have already had ten years of experience according to the Rules of Procedure, you can straightway give them the registration and save them from this trouble.

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May I appeal, on behalf of the Committee, to you especially to take it up with the State Government and see that these people who are qualified for registration are given registration immediately under the provisions of your own existing Act?

SHRI BHAOOSAHAIB DHAMAN-KAR: That should be done immediately, without examining....

CHAIRMAN: And if you wait for any amendment of the Act, it will again take some years or some months. Meanwhile, there will be heart-burning.. I think I have conveyed the Committee's feelings correctly?

HON. MEMBERS: Yes.

CHAIRMAN: There is a provision for registered practitioners—not for enlisted practitioners.

SHRI UPADHYE: I do not agree. The registered practitioners have got the right to practise. But they have no rights to...

CHAIRMAN: When the Central Act comes into force, your State Act will have no value of that provision. If the Central Bill, as it is today is passed, then the practice of those enlisted persons will be prohibited. Even if you have it in your Act they will be prohibited. We have put it in the right of practice of registered practitioners, not enlisted practitioners; so please do not confuse the issue. Enlisted practitioners have no scope in the present Bill and we are not going to make any provision for that. So our advice to you will be to see that those persons who are enlisted, you register them as early as possible.

SHRI UPADHYE: Madam Chairman, it will be communicated to the Government and suitable action will be taken.

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SHRI JANAKI BALLAV PAT-NAIK: I want a clarification—it is about point 9. Is it your opinion that a minimum practice of 20 years should be there for a registered practitioner to be elected?

DR. DHOLE: About 20 years will be better.

SHRI JANAKI BALLAV PATNAIK: ' Twenty years should be the minimum? Is it your own opinion?

DR. DHOLE: Yes,

CHAIRMAN: Suppose you have five or ten years of standing and are a brilliant man; then you will be deprived if 20 years is fixed.

SHRI MUHAMMED KHUDA BUKSH: This enlistment was done 20 years ago—after several years of practice. That must also count.

DR. PRAHLAD: Qualified people along with those who have put in 28₇ years' practice.

SHRI JANAKI BALLAV PATNAIK: Please refer to 12: "..15(3) be deleted." Would you kindly explain the reasons why you want deletion of the clause?

DR. DHOLE: Twenty years is for those who have not been trained institutionally....

SHRI BHAOOSAHAIB DHAMAN-KAR: Twenty years will be rather too much.

SHRI JANAKI BALLAV PATNAIK: -It should be ten years-minimum. There are many who say 5 years are sufficient. What is your opinion?

DR. SANYAL: Already the teachers who are not qualified from the institution have the right to teach on the 20-year basis; those people should not be affected by the coming Act in their profession as teachers.

. . . .

SHRI BHAOOSAHAIB DHAMAN-KAR: You are putting teaching and representation on the Council on a par.

SHRI JANAKI BALLAV PATNAIK: It is not equal; it should be twenty years.

DR. R. M. CHINCHOLKAR: It will be too much.

CHAIRMAN: If you want less then why did you put 20 years?

SHRI MUHAMMED KHUDA BUKHSH: What is your opinion? Ten years?

DR. CHINCHOLKAR: Yes.

CHAIRMAN: What about the new people?

SHRI UPADHYE: They will be institutionally trained.

CHAIRMAN: Where will you give them training institutionally?

SHRI UPADHYE: We have got nine colleges. Enlistment we have stopped long ago.

DR. PRAHLAD: Those who do not have 20 years' practice they should be institutionally qualified.

CHAIRMAN: Do you know that you are running a college without a principal for more than 7 or 8 months?

SHRI UPADHYE: The Government does not run any college.

CHAIRMAN: You have recognised that college.

SHRI UPADHYE: The Court recommends the college, the State Government grants recognition. The State Government, on the basis of the recommendations made by the court after inspecting and due scrutiny gives...

CHAIRMAN: Then let the court explain. DR. DHOLE: Recognition of the court is under section 30 read with section 40...

CHAIRMAN: Have you not provided in the Act that the State Government may give—that they will give professional recognition?

DR. DHOLE: We have given professional recognition. The Act says the Government has only one power; that is to de-recognise.

CHAIRMAN: Then, Dr. Dhole, you are caught on the wrong foot; if it is absolutely within your jurisdiction to give recognition, then how i_S it that you have given recognition and did not think of recognition even though the college does not have a principal for seven or eight months?

DR. DHOLE: No, I do not represent the court.

CHAIRMAN: Dr. Batra, you are the General Secretary of the College.

DR. BATRA: If you are referring to the Bombay Homoeopathic Medical College, I submit that the college was not without a Principal for as long as seven or eight months. It was without a Principal only for two months, namely, July and August.

CHAIRMAN: Who is the Principal now?

DR. BATRA: Mr. C. C. Desai has been the officiating Principal.

CHAIRMAN: What do you mean by officiating and what is his status in the college as Principal?

DR. BATRA: He was working in an honorary capacity in the College. He was one of the applicants for the post of Principal.

DR. JHALA: The Act provides that within six months of a change occurring in the staff structure, a report must be made. Perhaps six months have not passed and so it has not come to their notice. DR. BATRA: It was a casual yacancy. No matter how many times we advertised the post, no suitable candidate has turned up. Then, for two months it remained vacant and then we made one of them the officiating Principal,

CHAIRMÁN: Why do you not appoint a permanent Principal;

DR. BATRA: We have advertised again and again to find out a suitable candidate who will fulfil the qualifications.

CHAIRMAN: Are you going to close down the college?

DR. BATRA: It was an ad hoc appointment. We have a procedure for selecting the person.

CHAIRMAN: Is there any time-limit for the procedure?

DR. BATRA: No.

CHAIRMAN: You can go on ad infinitum.

DR. BATRA: Theoretically it would be possible, but I would submit that it is practically not correct to say that we will do that *ad infinitum*.

CHAIRMAN: How is it theoretically possible to run a college without a Principal?

DR. PRAHLAD: It is the Governing Council which has to find a suitable candidate.

CHAIRMAN: Suppose no suitable candidate, according to your terms, is available.

DR. PRAHLAD: The next best possible we will do. Our next meeting is coming within a fortnight and we are going to finalise it.

श्रीमती संदिता बहिन : ग्रगर प्रिंसिपल नहीं है तो 6 महीने का टाइम क्यों रखा है गवर्नमेंट के पास रिपोर्ट करने के लिए ? एक महीना या दो महीना क्यों नहीं रखा ? डा॰ झःला : बाइलाज में 6 महीने प्रोवाइड किया है।

अीमतो तविता बहिन : 6 महीने हैं तो 5 महीने तक खाली रखेंगे और फिर एपोइन्ट करेंगे जिससे रिपोर्ट न करनी पड़े।

DR. JHALA: No vacancy has been reported so far either to the Court or the Board. The question has not arisen. Since this matter will come up, two questions will arise, viz., why the vacancy has continued for a long time? Whether the Principal is a registered practitioner or an enlisted person, whether he is homoeopathically qualified or not, it should be found out.

CHAIRMAN: Is there any proposal before the State Government for taking it over?

DR. JHALA: The College is run by the Homeopathy Society. It is for the Homeopathy Society to resolve on the terms on which it is prepared to give it to the Government.

CHAIRMAN: The Government suo mottu can do it.

DR. JHALA: The Government cannot interfere with their autonomy.

CHAIRMAN: The Government can always interfere. It is under the scope of the Homoeopathy Act to say that a good college gets recognition and the Government should be run by the Government.

DR. JHALA: They have yet to study terms for the college to be taken over from a society.

CHAIRMAN: You can pass a Bill for taking it over. No Central sanction is necessary.

DR. JHALA: In Maharashtra we have not taken over a college like that. Unless the governing body resolves and gives over the college unconditionally, it cannot be taken over. The staff position may also have to be considered, their seniority and other things. They may like to exercise their option to continue or not.

CHAIRMAN: Let them exercise their option, whether they want to remain under the existing terms and conditions and or whether they want to work under the new conditions.

DR. JHALA: It is for the Government to give the option.

SHRI BHAOOSAHAIB DHAMAN-KAR: Was any inspect on made of the college and was any report submitted to you? Are the Government and the Board satisfied with the working of the college?

DR. JHALA: So far as the report goes the Bombay Homoeopathy College is good: So far as the Court's and Board's reports are concerned, they do not say anything adverse about it. The reports which have come after the inspection have not said anything.

श्री माने सिंह वर्मा : क्या सरकार के सामने कभी ऐसा प्रपोजल ग्राया है कि सरकार उनके इस कालेज को अपने हाथ में ले ले ?

डा० स ला : मैं उनके कालेज की गवानग वाडी को रिप्रेजेंट करता हूं भौर वहां यह वात भी होती है कि इस कालेज को से लिया जाय । दूसरी तरफ यह वात होती है कि कैपिटेसन फीस ली जाय भोर इसी तरह से कालेज चलाया जाय । लेकिन कभें ऐसा मौका नहीं ग्राया है कि जिस में सरकार उस कालेज को ले ले ।

CHAIRMAN: You are représenting the State Government on the Committee?

DR. JHALA: Yes, on the governing body.

CHAIRMAN: Do you know what is the capitation fee charged?

DR. JHALA: I myself do not know about it.

SHRI BHAOOSAHAIB DHAMAN-KAR: Is the Government in favour of charging the capitation fee?

DR. JHALA: The Government have set up a Commission to enquire into it.

CHAIRMAN: You have appointed a Commission.

DR. JHALA: We have appointed a Commission with regard to the Sholapur Medical College, to find out whether capitation fee should be charged by medical colleges. The Commission is still on with its work.

CHAIRMAN: They charge capitation fee because they have to run the college without Government aid. From where do they find the money? Morally they are going to justify the capitation fee. When the capitation fee is levied, the question of meritorious students getting admission does not come in. If I have the paying capacity, I will be admitted. Even if he is a brilliant student, if he cannot pay the capitation fee, he cannot get admission to the college.

DR. JHALA: To some of the Medical colleges throughout India the Government of India is giving a grant. They reserve seats against the fees given. Therefore, it is a very difficult position. The question is if they are to run the college, someone has to pay for it. The Commission is going into all the facts. There is a thinking, that it will not be consistent with the socialist pattern of society.

SHRI BHAOOSAHAIB DHAMAN-KAR: Are Government aware that students with 70 per cent marks do not get admission, while students with 30 to 35 per cent marks are getting admission? CHAIRMAN: The Government of India is thinking of putting homoeopathy on an equal fooling with allopathy. In a homoeopathy college run by the Government, do you think that a student getting 30 or 35 per cent marks should get admission and not a student getting 80 per cent marks?

DR. JHALA: Even in the case of capitation fee we found that it was done according to merit. We do not give any money at all. We have no control except through the Board and Court.

CHAIRMAN: It is a very sorry state of affairs.

CHAIRMAN: This is a very sorry state of affairs. If your college are taking capitation fees and the State Government pleads ignorance and ignores the whole thing and allows you to do and the Government does not come forward to help the homoeopathic institution, this is a very sorry state of affairs.

DR. JHALA: You know how the Government machinery moves. It takes much time. We had no time since capitation fee was charged this year only. We are already examining in greater detail whether it is applicable to us.

DR. PRAHLAD: It is only 37 persons who were admitted. Their marks are under consideration.

CHAIRMAN: Shall we appoint a Sub-Committee? Let us do that,

DR. PRAHLAD: Those who have failed in the examination, their deposits will be returned to them when they leave the college.

SHRI T. G. DESHMUKH: What is the fee you have....

DR. PRAHLAD: It has not been prescribed.

DR. KARANDIKAR: What they have done is to take something. In Sholapur it is a fixed amount.

श्री मार्नासह वर्मा : उनके कहने का मतलब यह है कि प्रापने यह तो बड़ी ग्रासानी से कह दिया कि देना जो चाहते हैं वह दे सकते हैं और उनके लिए कोई एमाउन्ट फिक्स नहीं है लेकिन ग्राप खुद समझ सकते हैं कि ग्रगर मैं 5 हजार दे सकता हूं ग्रीर दूसरा कोई दस हजार दे सकता है तो क्या ग्राप दस हजार देने वाले को छोड़ देंगे ? वह तो ग्राप्शन हो जायगा।

CHAIRMAN: The hon. Secretary of the College will explain.

DR. BATRA: We were in a very sorry state at the beginning of this academic year. We were given the Central grant and as I referred to earlier we were given an assurance by the State Government that it will make good the deficit in the recurring expenditure in the institution if we fell short of funds. We have told the Government again and again to take it over or make good the deficit of the institution. Even at the beginning of the year, the first act that I did after taking over as Secretary, in April this year was this. They had no money in the college and the Governing Council of the College earlier passed a resolution on the recommendation of the parents and students' associations that they would raise the fee to 50 per cent of the existing pattern so that it would be one and a half times. It was recommended by the parents of the students of the college. Soon after taking over, I wrote to the Govrnment reminding them that either they should make up the deficit or we would be driven to take desperate action. meaning thereby that we might charge a capitation fee. All the adverse remarks that you have expressed, you are aware-it is against our conscience and it is against our socialistic intention to charge like this. But we had

no other alternative. We raised the fee by 100 per cent a year before. The Governing Council had some assurance which was vague.

SHRI BHAOOSAHAIB DHAMAN-KAR: Is it a fact that the fee of your college is double that of the allopathic • colleges?

DR. BATRA: I beg to submit that • every student who was admitted to a medical college is a drain on the exchequer to the extent of Rs. 80,000, which the Government of India and the State Government spends. If they are prepared to spend even 10 per cent of that, we will run the college without any difficulty.

SHRI BHAOOSAHAIB DHAMAN-KAR: I want to know whether the fees are not exorbitant.

DR. BATRA: As far as I know, the fee for the four-year diploma course started in Poons is much higher than what we have at present. Our fees have not changed.

SHRI BHAOOSAHAIB DHAMAN-KAR: Are your fees comparable with the other allopathic colleges?

DR. BATRA: I would submit that the tuition fee of our college is Rs. 40 per month and it was so from the days the college came into being. Only now we have made it Rs. 60. You can compare it with the medical colleges because I am not aware. I am not contesting it or admitting it.

SHRI BHAOOSAHAIB DHAMAN-MAR: The fee has been raised, but what about the parents?

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DR. BATRA: I would not deny it. I was submitting that we were in a difficult and peculiar situation at the beginning of this term and we asked the parents to kindly make note of our difficulties and sympathise with us

and to agree voluntarily to have the see raised to the extent of 50 per cent. They agreed. We could not manage the college. The parents knew it. During the last academic year we had reduced all our full-time and part-time staff to lecture-wise staff. But I admit, although with a little hesitation, that we had to do it because in the beginning of this term the situation was bad. We approached the Government again, and we reminded it. We are ready to hand over the college on conditions to be prescribed by the State Government, not only on their conditions but unconditionally also. I. submit on behalf of the Governing Body that our request and offer still stands. We are supposed to have got reserve funds. It is one of the conditions laid down by the Court of Examiners that every institution must have a reserve fund of Rs. 30,000. We had Rs. 25,000. We drew it quietly and we have spent it all. We had Rs. 63,000 of the membership fee of the body which controls this college of Homoeopathy on behalf of the Homoeopathic Education Society. I think it was a very unfair act against the members that their Rs. 60,000 also we have sunk in the running of the college, so that on the 31st March 1972 the college was in deficit to the tune of Rs. 1,38,000 having borrowed this money from the funds of the society. Sir, we were faced with such a situation. So, we appealed to the parents, we sent appeals to all the students also that you either grive us donations or give us interest-free refundable deposits. Now in practice it amounted to this that those who wanted to get in paid, and those who were already in, did not listen to our request. So far as the other part is concerned, regarding the selection of candidates, we get the comparative statement of the marklists of the candidates in the Intermediate Science examination. Then we call them for an interview. The Chairman of the Governing Council, the Secretary of the Council, the Principal of the College and a member of the staff sit in judgment over their interview performance.

CHAIRMAN: No question of money plays a role in your sub-conscious mind at that time?

DR. BATRA: Well, it is to be admitted that when the students came to us, the appeal that we have sent to our existing students was passed on to them also. But we had laid down that either they could give Rs. 1,000 as donation or they could give Rs. 2,500 as refundable deposit. But the selection-was based on merit and we selected 45 candidates on the basis of merit and we said we would admit five students on the basis of recommen_ dation. Accordingly the list was put up. Then, of course, there were some students who left because they got admission in the medical college or in the dental college and so on. But to the best of my knowledge, we have not tried to be hard. It is not a correct case that has been presented to you that a student who obtained 75 per cent has been denied admission just because he could not pay. I make bold to say-of course, all the record are not with me at present, but to the best of my knowledge I can say-that we have not rejected a candidate who had got 70' per cent marks by admitting another student who had scored 38 per cent. But if you like, I will submit to you the entire...

CHAIRMAN: We accept your statement.

SHRI BHAOOSAHAIB DHAMAN-KAR: Are the courses of training in Bombay and Vidarbha the same or are they different?

DR. PRAHLAD: They are different in Vidharbha and Bombay.

श्री मानरिंह वर्गा : डा० वला, यह तो श्राप ने ठीक किया है कि ग्राप ने सारी स्थिति का स्पन्न्टीकरण दे दिया, लेकिन ग्रामी तक यह समझ में नहीं ग्रा रहा है कि जब डाडरेक्टर महोदय स्वयं गवनिंग, बाडी के, मेम्बर हैं ग्रीर वह इस वात से भी इन्कार नहीं कर सकते कि ऐसी स्थिति ग्रा गयी थी कि जिस में कालेज बंद भी हो सकता था तो सरकार इस की सहायता के लिए क्यों नहीं आर्थ ?

DR. JHALA: To be fair to every one, it is not this college alone which is charging capitation fee. Every other institution is taking donations for supporting itself in one form or the other. This practice is prevalent throughout the State and throughout the country as well. The State Government only wanted them to stand on their own legs. But the Government is watching the position. Three months have passed now. We are considering the matter and we will consider the matter in greater detail. But we are quite aware of the financial crisis through which the college is passing. At first we thought that the takeover. would be under certain conditions. Now the Secretary has made it clear that it will be unconditional.

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CHAIRMAN: To sum up, our Members have no intention to undermine the good work that the college has done and is doing still now. What we wanted is a different thing; that is, if the Government does not take over this college, at least it should give them a liberal grant so that they can run their own affairs in a better way. We feel that each State must have one medical college run by the Government. Regarding this college, we were very much impressed by the way they were running the college. We felt that, either the Government must take it over or the Government colshould set up another medical lege of their own to teach homoeopathy on proper lines. And if the Government comes forward with liberal aid, then there would be no reason for the college authorities to take donations or loans or anything. It is high time that the State Government and the Government of India came forward to give liberal help for this institution:

DR. JHALA: We are taking a sympathetic view of all the matters. We will be recommending the Colleges of Poona and Bombay for Central assistance. But if we give grants to one college, then the question is we should give grants to all the colleges, and it becomes a wider question. So, whether it is take-over or giving of grants, the question has to be examined in greater detail. But if we go by the reports, I must say that the College of Bombay has been one of our best colleges in the State.

SHRI T. G. DESHMUKH: You have an Adviser in Homoeopathy. What are the terms and conditions of his appointment?

DR. JHALA: The Vishnuprasad Committee which was there recommended that there should be a Director of Homoeopathy. Pending this, an Adviser should be appointed in homoeopathy. Government accepted the advice. We have Adviser for rural health, one for family planning and one for homoeopathy. All these are honorary appointments. Advice is only taken where the Board and the Court have differing opinions. After all it is a democracy at work. We may have a difference of opinion. Then he can give us an opinion of his own. Where we have differing opinions before us, then we consider the advice of the Adviser.

CHAIRMAN: He does not have any administrative responsibility?

DR. JHALA: No.

CHAIRMAN: When there is a dispute between the board and the court you take his advice. You don't take the advice for medical education, for running the administration, planning and matters of homoeopathy?

DR. JHALA: In matters of homoeopathy education the court and the board are there already.

SHRI JANAKI BALLAV PATNAIK: We would like to know what the Maharashtra Government wants to do for the cause of homoeopathy in its Five-Year Plan, for expansion of homoeopathy education, etc. Do they ever think of amending this Act? Instead of two bodies the functions of which are almost overlapping, will they think of integrating them into one? Do they think of having one board for the whole State? Do they consider having any faculties of indigenous systems of medicine in the universities of Poona, Bombay. etc.? Do they consider any of these things so that we can take them up with the State Government?

DR. JHALA: These questions have been gone into by Vishnuprasad Committee. The question of integration of the boards has been accepted in principle by the Government. As regards opening more dispensaries of homoeopathy Government have advised all the zilla parishads in the area and the municipal councils to start functioning in accordance with the recommendations and the recommendations have been sent to all. As regards the ESIS the matter is being taken up with the ESI Corporation, whether homoeopathy can become IP of ESIS. These are the matters which have been recommended. Now as regards Vishnuprasad Committee there should be a four-year course. We took a decision in 1965 for affiliation.

In 1965 we recommended that certain conditions should be fulfilled by them. That also has not been fully implemented by the court or the board nor by the homoeopathy colleges. The Government of India may help set up a homoeopathy hospital in the rural areas ...

CHAIRMAN: The difficulty is there are contradicting statements. We invited three sections. Now you will find contradictions here. What the Government says differs from what the court says and what the court says differs from what the board says. What one says differs from what the other says. Now we have to amalgamate it and you should speak in one voice.

DR. DHOLE: There were sertain objections for the process adopted for implementation. Such conditions are not legal. So they should be corrected. But they have not been corrected yet. Then they gave the review committee. The Review Committee accepted the proposal that the course has to be of four years and it will be then accepted on conditions of financial assistance and help. But the Government said that they are not going to give any assistance. There was a long discussion on the issue of the financial assistance by Government. I have heard that every homoeopathy college wanted financial assistance. We definitely want financial assistance.

Then, it is naturally thought that we must have also four years course. Our chairman and all these people requested the Government to see that this course becomes a four year course. But the State Government rejected it.

We have provided medical help to the villages. Our men have the same qualifications, matric with Science subject. We have also the same qualification—matric with science subject. That course has the additional facility. There is no condition that the college should run a hospital...The matter is yet to be discussed...

CHAIRMAN: About Vidarbha, we entirely agree with you that all colleges will be helped by the State Government. Now they have taken up two cases. Let us hope that they will take up gradually all the cases of the colleges in Vidarbha...

DR, A. S. DHOLE: There is one obstruction. Education is a State subject \ldots

CHAIRMAN: It is for the Court to lay down the syllabus as early as possible . . . DR. A. S. DHOLE: It is for the State Government . . .

CHAIRMAN: The State Government does not lay down the syllabus.

DR. A. S. DHOLE: We made a request to the State Government, but they rejected it.

DR. JHALA: I have to clarify certain matters. Financial assistance from the Centre is possible only if there is four years' course. Now, G. R. 65 lays down . . .

CHAIRMAN: We know that . . .

DR. JHALA: Unfortunately, they have not complied with ...

CHAIRMAN: Let's stop here. We understand the problem. We also understand that there is some politics, some difference of opinion, some groupism in the world of homoeopathy in Maharashtra ...

SHRI BHAOOSAHAIB DHAMAN-KAR: Let us hope for homogenity in homoeopathy in Maharashtra.

CHAIRMAN: Thank you very much.

[The witnesses then withdrew.]

[The witness (Dr. R. K. Desai, Ahmedabad) was called in.]

CHAIRMAN: You please make your observations and then our members will ask some questions.

WITNESS: About the questionnaire issued by you, I have given my answers. But there are certain points which I would like to make.

About the constitution of the Council, there is a proposal for nomination of some members by the Central Government. I, would propose that there should be some definite direction in the Act that out of the number for nomination even, certain number of members must be from those having recognised qualification, otherwise we will be giving a long rope to the Government. This can be misused. I will give an instance in Gujarat...

CHAIRMAN: Don't give instances.

WITNESS: If we do not give any definite provision or direction to the Government, for nominations the Minister, by influence, do not go into the merits and just go on making nominations. That is how it is harmful.

CHAIRMAN: Do you want to put a ban on the Government's nominating?

WITNESS: Yes. For that I have a proposal and I have some amendments also along with the reply to the questionnaire. The Council must have institutionally trained and qualified persons through nominations also.

CHAIRMAN: Tell us about the nomination qualifications.

WITNESS: They should be members who are having institutionally recognized qualifications with four years training, and not as in the Bill.

Every State has its own legislation to provide for registration of practitioners and for reprimanding a registered practitioner. There is a difference between this work and that of imparting education, what I would 'propose is that we must increase the standard of homoeopathy through the Central Council and, therefore, it is necessary that all the members of the Central Council which is to deal with education must be having at least four years' institutional fraining

CHAIRMAN: You want institution-

WITNESS: Yes.

CHAIRMAN: Next point?

SHRI T. G. DESHMUKH: Do you mean to say that there should be nobody outside? SHRI MAN SINGH VARMA: He says that 'special knowledge' is a vague term. He must at least be an institutionally trained person,

WITNESS: There are certain points in the question about practice, whether unregistered practitioners should be allowed to practise homoeopathy. I think they should not be allowed even for charitable purposes; if somebody is doing it already he also should not be allowed.

SHRI MAN SINGH VARMA: We do not allow them.

SHRI BHAOOSAHAIB DHAMAN-KAR: What is the reason?

WITNESS: Quackery will increase. Now these persons who are practising for charitable purpose, after some time they will try to establish themselves as practitioners. Then you will have to reopen the question of registration. Thus this vicious circle will go on. Therefore this thing should be prohibited. Once the Act comes into force such practice should be stopped; those who are practising may be allowed to practise when Act comes into force so far and no further. That should be the policy.

Another question is whether registered homoeopaths should the be allowed to practise any other system of medicine. I do not agree there also because when we have Acts for homoeopathy and we give registration for homoeopathy, nobody who is registered as a homoeopath should be allowed to practise other than homoeopathy. Even allopaths, unless they have registration in homoeopathy . should not be allowed to practise homoeopathy. Qualified homoeopaths should be penalised if they practise other than Homoeopathy unless they are qualified to practise other systems.

Then there are some points about laboratory and library. I think laboratory and library cannot be made compulsory. It is a difficult job for every practitioner. Even allopaths cannot have laboratory and library. It does not come in the way of practice. Of course, for institutions, hospital and laboratory must be compulsory. So many institutions are recognised without having hospitals. And that is very bad, because, unless we have clinical training given to the students, it is no use giving them mere theoretical knowledge. Only when the student sees the case he will have more confidence in practice. Therefore, clinical knowledge must be provided from the very start of the college. If the college does not have a hospital it should not be recognised; no grant should be given.

Then I have some amendments to the Bill itself. If you do not include biochemy in the Bill, the biochemic practitioners would be asking for separation. After all biochemy is not a system of medicine; it is a therapy; it is a part of homoeopathy. Just as an allopath uses the vitamins, some twelve salts have been separated from homoeopathy and it is called biochemic therapy. But one cannot claim himself to be a registered medical or medical practitioner by simply practising those salts. Do not bring this controversy; we must include it in the definition clause that "homoeopathy includes biochemic therapy also."

Then in clause 3(1)(a)—line 31 you have said, "practitioners of Homoeopathy"; you should add "and possess a recognised medical qualification" because otherwise it is vague. Again when you say that only people with recognised qualification will be members on the Council it is vague because, there are two types of registered people on State Registers one having institutional training as well as those having many years of practice and experience. So we must clarify.

About the nomination, of the 30 persons to be nominated, at least 50 per cent of it, that is, 15 persons, must be having recognised medical qualification-recognised according to the Bill. Regarding recognition of a medical institution, the application per the Bill should be made to the Central Government for recognition. When the Central Council is there, let the application be made to the Central Council. It should scrutinise the application, inspect and find out whether the institution is fit for recognition. The application should not go to the Government directly but it should go through the Council.

SHRI MAN SINGH YARMA: The Central Council should have an academic side also.

WITNESS: Yes. Then I come to reciprocal conditions. Clause 14 deals with recognition of medical qualifications granted by medical institutions in State or countries outside India.

CHAIRMAN: Reciprocity means outside India.

WITNESS: The word "State" should be removed as it creates misunderstanding with "States" in Indian Union itself.

CHAIRMAN: It means a State outside India. Within the country there is no question of reciprocity.

WITNESS: Then about our privileges, I would like to add one word. What happens is that when people take homoeopathic medicines, Government servants and bank employees do not get reimbursement. Only if the employee takes allopathic treatment, he is given reimbursement. That is not proper. They are rejected and they are not given reimbursement.

CHAIRMAN: It is a question of taking a policy decision by the Government. In many States it is accepted, but it should be done in all the States, WITNESS: I am just mentioning it. When we recognise the system, then it must be given all the facilities. Now, you have provided two classes, inspectors and visitors. As far as I understand inspectors will be responsible to inspect the institution which has applied for recognition. Visitors are supposed to inspect those institu-

- tions which have already been recognised. For that some amendment is necessary. In the case of visitors it is
- * mentioned "hospitals or other institutions where education in homoeopathy is given." It is not mentioned whether it is homoeopathic education in a recognised college or in any other college. It should be clarified. I have said: "Institution where teaching and training leading to a recognised qualification is given." These words should be included.

CHAIRMAN: A college which may not now be recognised may be recognised later on. The visitor may say that it should also come within the purview of this Bill.

WITNESS: Is there no difference between the inspector and visitor?

CHAIRMAN: The inspector goes only to inspect a new institution, whereas the visitor goes to both, the old and new institutions.

WITNESS: Then it is all right. Then there is a clause which says that the Council may prescribe new standards. It should be made compulsory. The purpose is to regulate and improve homoeopathy. It should read "shall".

SHRI JANAKI BALLAV PATNAIK; 'May' includes 'shall'.

CHAIRMAN: I do not know why you want to make it binding. The Central Council may delegate its power to another body. Even if we take the dictionary meaning of 'may', it would include "shall".

WITNESS: The State Governments do not follow it. There should be some compulsion on them, if we really wish to control the education of Homoeopathy for a proper standard. CHAIRMAN: We may delegate it to another appropriate authority. Why do you prevent them from doing that. The points made by you are intelligent ones.

WITNESS: In clause 19(4) there is no provision which will give you power to withdraw recognition.

CHAIRMAN: Recognition must. mean derecognition also.

WITNESS: Clause 20 says:-

"(1) The Central Council may prescribe the minimum standards of education in Homoeopathy, required for granting recognised medical qualifications by Universities, Boards or medical institutions in India."

CHAIRMAN: That will come under the rules.

WITNESS: Then about financial assistance, there is a college which admits students who pay them Rs. 5,000 for admission. Now, according to the Constitution of India, it is an injustice and inequality.

CHAIRMAN: Discrimination.

WITNESS: A student with merit and interested in homoeopathy is not able to get admission because he is poor, whereas another student who has secured poor marks and if his father is an allopath will get admission. This is very bad. For this we must put some restrictions and this thing should be prohibited. If the Government wants to do away with such discrimination it should give proper financial assistance to such colleges. Otherwise, do not recognise the college. They should have a lakh of rupees as reserve fund. Before that do not recognise the college. Once you recognise a college, it should be given financial assistance. Otherwise, this sort. of discrimination will go on.

Thank you.

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CHAIRMAN: Thank you.

[The witnesses then withdrew.]

[The Committee then adjourned.]

Saturday, the 28th October, 1972.

. (AT TRIVANDRUM)

PRESENT

1. Shrimati Purabi Mukhopadhayay—Chairman.

MEMBERS

Rajya Sabha

2. Sbri Sasankasekhar Sanyal	7. Shri K. C. Panda
3. Shri Bhupinder Singh	8. Shri Sultan Singh
4. Shri N. G. Goray	9. Shri T. G. Deshmukh
5. Dr. Debiprasad Chattopadhyaya	10. Shrimati Savita Behen
6. Shri Man Singh Varma	•

Lok Sabha

11. Shri Ziaur Rahman Ansari	17. Shri Naggeshwar Dwivedi
12. Shri Vidya Dhar Bajpai	18. Shri B. R. Kavade
13. Shri Muhammed Khuda Bukhsh	19. Shri N. Sreekantan Nair
14. Shri A. M. Chellachemi	20. Dr. Laxminarayan Pandeya
15. Shri Bhaoosahaib Dhamankar	21. Shri M. Satyanarayan Rao
16. Shri Hiralal Doda	22. Dr. Sankata Prasad

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING Dr. Jugal Kishore, Adviser in Homoeopathy.

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary.

Witnesses

1. Representatives of the Institute of Homoeopaths, Kerala, Plamoodu, Trivandrum:

(1) Dr. R. Jayakumar, Chairman,

. . .

- (2) Dr. Ravi M. Nair, Joint Secretary.
- (3) Dr. K. J. Isaac, Member.
- (4) Dr. K. N. Gopinatha Pillai, Member.
- 2. Dr. K. G. Manur, Bangalore.

3. Representative of the Mysore State Homoeopathic Committee, Bangalore-

Shri T. N. S. Somayaji, Registrar.

4. Dr. A. R. A. Acharya, Bangalore.

5. Dr. H. K. Srinivasa Rao, Bangalore.

6. Dr. H. T. Rangaswami, Bangalore.

7. Dr. M. V. R. Swamy, Bangalore.

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[Representatives of the Institute of Homoeopaths, Kerala, were called in.]

CHAIRMAN: Please introduce yourselves.

DR. R. JAYAKUMAR: I am Chairman of the Institute and Lecturer in Trivandrum Homoeopathic Medical college for the last seven years. I am a holder of D.H.M. And now I am working as Medical Officer in Government Homoeo Dispensary.

DR. K. N. GOPINATHA PILLAI: I am K. N. Gopinatha Pillai. I have passed D.H.S. from Delhi. I am a First Class M.Sc. in Synthetic Drugs from Dharwar.

DR. K. J. ISAAC. The Institute has been started since one year and I am a Member from the very beginnig. I have passed D.M.S. from Calcutta and I have been teaching in three of the colleges for about five years and I have been in Government service for the last 11 years.

DR. RAVI M. NAIR: I am General Secretary of the Institute. I have passed the Diploma in Homoeopathy from A. H. Medical College, Kottayam in 1955. Now I am working as a Medical Officer in the Government Hospital, Trivandrum.

CHAIRMAN: Please tell us something about your Institute. Is it a teaching institution?

DR. RAVI M. NAIR: This is an organisation of the qualified homoeopaths in the State. CHAIRMAN: Now, whatever you give in your evidence will be strictly confidential. So my request to you is not to publicise what you have told us in your evidence because our records are strictly confidential. We have got your reply to the questionnaire. Have you got any further observations or comments to make on the Bill itself?

DR. ISAAC: We would like to suggest that postal tuition in homoeopathy should be banned in this State and in the country. Unauthorised training in homoeopathy should not be allowed. So many quacks are practising homoeopathy and our reputation is at stake. The real merit of the system is not understood by the public because of these quacks.

[The hon. Minister of State for Health arrives].

CHAIRMAN: On your behalf I welcome the Union Health Minister, Dr. D. P. Chattopadhyaya. He is taking a very keen interest in the deliberations of this Committee. He was present in the Calcutta and Bombay meetings and he is present here today in the Trivandrum meeting. The witnesses are from the Institute of Homoeopaths, Kerala. Have you any further observations?

DR. GOPINATHA PILLAI: Homoeopathy should be taught only to science graduates and those who have undergone four years academic training. CHAIRMAN: Do you insist that they should be taugh in the local language?

DR. GOPINATHA PILLAI: As long as the local language is not adequate, they should be tought in English. The name of the Council may be changed to the Indian Homoeopathy Council.

CHAIRMAN: What difference does it make?

DR. ISAAC: It sounds better. There should be larger representation from the State on the Council. Here it says one representative for every 5,000 qualified registered practitioners. It should be more.

CHAIRMAN: That you have said in your reply. Whatever you have given in writing will be considered.

SHRI N. G. GORAY: In your memorandum you have said in paragraph 7 that your Institute is conducting study classes and symposia every month and you are distributing stencilled copies of papers on important subjects in homoeopathic science. How many students are taking advantage of this?

DR. GOPINATHAN PILLAI: There are about hundred and fifty members. SHRI N. G. GORAY: Have you got any hospital attached to your institution?

DR. GOPINATHAN PILLAI: No. SHRI N. G. GORAY: How do you provide practical training?

DR. GOPINATHAN PILLAI: They are regular students.

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SHRI N. G. GORAY: Unless you have some patients, how can you impart them practical training?

DR. ISAAC: We are not giving any regular training, but we are giving some lectures on important subjects once a month. We submit papers on important topics and the papers are stencilled and distributed. SHRI N. G. GORAY: I think your raised objection to giving postal tuition.

DR. ISAAC: The members are all'. qualified and to qualified doctors we. are distributing papers.

SHRI N. G. GORAY: It is more in the nature of refresher courses.

CHAIRMAN: Dr. Jugal Kishore will throw light on this.

DR. JUGAL KISHORE: Madam Chairman, this is an organisation of qualified doctors who hold monthly meetings. It is more in the nature of a medical association. The name institute may be misleading. It is not a teaching institute as such. They also invite students from colleges to attend the meetings.

DR. LAXMINARAYAN PANDEYA: Are you saisfied with the work of the Kerala Government in promoting homoeopathy?

DR. ISAAC: For the past four years the Government of Kerala has done a lot for homoeopathy. There are more than 57 dispensaries and four hospitals in the State. Though it is satisfactory, we are not satisfied when compared with the other systems of medicine. They have been other giving encouragement to the systems of medicine for the last twelve years. We would suggest that at least 100 dispensaries must be started every year so that we will have 500 dispensaries in the course of a five year plan.

DR. LAXMINARAYAN PANDEYA: You want more attention to be paid to homoeopathy by the Government of Kerala.

DR. ISAAC: Yes.

CHAIRMAN: In column 14 you have suggested that no part-time practitioner should be included in the central register. What do you mean by this?

DR. JAIKUMAR: In Kerala there are two types of registration. They are A class practitioners and B class practitioners. The B class practitioners are not qualified, but they have been practising for the past five or Jix years. Most of them are in the Malabar area. The rule prohibits If we give them from practising. them registration in the Malabar area it will be violating the present rules. They cannot practise in the Malabar area, but this Bill gives facility of registration to those who are practising in the Malabar area. In Kerala there are sufficient qualified hands. academically qualified, more than 800 in number. Out of them 101 are employed in colleges and in Government service. More than 700 are unemployed. I suggest that registration may be limited to A class. No further B class registration should be made in homoeopathy.

CHAIRMAN: Why do you not use the words "category A and category B"? Some of the very good doctors practise homoeopathy only part time.

DR. JAIKUMAR: They may have undergone part-time training in homoeopathy. It should be full-time training for four years plus internship for six months or one year.

SHRI MAN SINGH VARMA: I presume you have got a copy of the Bill before you. Please refer to page 3, clause 5 (1), which says:--

"No person shall be eligible for election to the Central Council unless he possesses any of the medical qualifications included in the Second Schedule, is enrolled on any State Register of Homoeopathy and resides in the State concerned."

Have you any comments to make on this? Are you satisfied with this clause?

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DR, JAIKUMAR: The qualification must be in homoeopathy, a degree or diploma. In this Council we prefer that pure homoeopaths should be members. They should be fully qualified in homoeopathy.

SHRI MAN SINGH VARMA: It is quite all right that you want a degree. What about diploma-holders?

DR. JAIKUMAR: We want both diploma and degree holders.

SHRI MAN SINGH VARMA: Are you satisfied with the wording "is"? It says "is enrolled on any State Register. He should be a diplomaholder or degree-holder.

DR. JAIKUMAR: Both the diplomaholder and degree-holder must be registered.

SHRI M. SATYANARAYANA RAO: May I ask you whether in your State homoeopathic doctors are also practising allopathy?

DR. JAIKUMAR: Yes. Some of them are qualified both in allopathy and homoeopathy. But those who posses only a homoeopathic qualification and practise allopathy should be banned.

SHRI M. SATYANARAYANA RAO: Do you want any penal clause for prohibiting practice in homoeopathy by allopaths?

DR. JAIKUMAR: They must practise only Allopathy. They should not practise Homoeopathy.

SHRI BHAOOSAHAIB DHAMAN-KAR: Have you any allopathic graduates or post-graduates practising homoeopathy in your State?

DR. JAIKUMAR: Yes, they are many.

SHRI BHAOOSAHAIB DHAMAN-KAR: Do you want the allopaths who have taken to homoeopathy to continue or do you want any penal clause for them to ban their practice as homeopathic practitioners? DR. R. JAYAKUMAR: Yes. There should be a penal clause in the Bill to take action against allopath practising homoeopathy.

SHRI BHAOOSAHAIB DHAMAN-KAR: Are there any allopathic doctors having no diploma or degree but still practising homeopathy?

DR. R. JAYAKUMAR: Yes, Sir. They should not be encouraged.

DR. LAXMINARAYAN PANDEYA: I am an allopath practising homeopathic for the last twenty years. Can I continue homeopathic practice or not?

DR. R. JAYAKUMAR: There is no harm. But what I say is there should not be any provision in the Bill for an allopath to pratise Homeopathy.

SHRI K. C. PANDA: Have you any knowledge of allopaths practising homeopathy?

DR. R. JAYAKUMAR: Yes, but it should be banned.

CHAIRMAN: In your reply you have suggested certain measures, namely, the Council should take note of the science being manhandled by undeserving persons. Knowledge is being transferred to undeserving persons by unauthorised agencies and take necessary steps to control such miscreants. Will you please explain this?

DR. R. JAYAKUMAR: We mean postal tuition. It should not be allowed.

CHAIRMAN: Then instead of putting it in such a roundabout way you could have said that postal training should be banned.

DR. K. J. ISSAC: Our complaint is that without enough facilities some individuals have established institutions. Some have established regular courses. There have been institutions where two-year courses have been given and after completing their course they issued diplomas. Now they are trying to secure registration. And somehow they succeed also. This malpractice should be stopped.

CHAIRMAN: You have suggested? that the Central Council should be the sole authority for approving thesis and drugs in homeopathy. But do you know that there is the Central Council for Research in Indian Medicine and Homeopathy approved by the Government of India? Its main function is research into new drugs. Why do you want this authority to be vested only with the Council?

DR. RAVI M. NAIR: We want a separate Council for a research in Homeopathy.

CHAIRMAN: Though the name is Central Council for Research in Indian Medicine but it will be conglamoration of representatives both from the academically qualified people and also the registered people. Research is a highly technical subject. We do not think the Council can be the proper authority to do that. Your suggestion is for a separate Research Council. Eut we have already one such Council.

SHRI BHAOOSAHAIB DHAMAN-KAR: Are there any doctors who us? only biochemic medicines? There is the Mission dispensary in Kankanady. They use only biochemic medicines.

DR. K. J. ISSAC: All the homeopaths are practising homeopathy plus biochemic.

SHRI T. G. DESHMUKH: Is it not a fact that in your State Ayurvedic is more popular than homeopathy?

DR. K. J. ISSAC: Yes, Sir. That is true.

SHRI T. G. DESHMUKH: Do you also practise ayurvedic?

DR. K. J. ISSAC: No, Sir. Very few do that.

CHAIRMAN: Thank you for replying to our Questionnaire and for coming here to give evidence.

[The witnesses withdrew.]

[The witness (Dr. K. G. Manur, Principal, Karnatak Homeo College, was called in.]

CHAIRMAN: We welcome you to the Comitmttee. Kindly introduce yourself to the Committee. The proceedings of the Committee are confidential till they are placed on the Tables of the House.

DR. K. G. MANUR: I am D.H.S. from the Delhi Board and Principal of the Karnatak Homeo Medical College Hubli. I have been practising since 1948 and have come from the Mysore State.

CHAIRMAN: Have you got any further observations to make in addition to your reply to the Questionnaire?

WITNESS: I would like to state that degree course should be under the University and not under any private institutions as it is done now in some of the States. Secondly, an experienced, seasoned homeopaths, even if he is not a graduate of any college, should be taken on the teaching staff of the college to give pure knowledge of homeopathy; otherwise there will be a chaos. Institutionally we have persons but they are not up to the mark in homeopathy. They are more like allopathic physicians. Therefore, only seasoned persons in homeopathy, even if he is not a qualified homeopath, should be taken on the staff. Thirdly, each college should have a pharmacy attached to it to enable them to prepare genuine medicines. Forthly, the drugs should be proved by the Central Council. Presently many of the Indian herbs are not proved. They should be proved.

SHRI BHAOOSAHAIB DHAMAN-KAR: Has degree course been started by any University? WITNESS: I do not know.

SHRI T. G. DESHMUKH: How many beds are there?

WITNESS: In our hospital ten beds are there for Homoeopathy. It is very few. O.P.D. is there. We have got surgical department. I have got a poor complement of ten beds.

SHRI SULTAN SINGH: Have you got sufficient medicines?

WITNESS: We have got sufficient medicines,

SHRI M. SATYANARAYANA RAO: How many doctors are in mofussil in your State?

WITNESS: About 3,000 in the registered practitioners list including C class.

SHRI M. SATYANARAYANA RAO: Are they institutionally trained?

WITNESS: Institutionally trained are very few.

SHRI SULTAN SINGH: What is the criteria for admission of students?

WITNESS: It should be more than S.S.L.C. S.S.L.Cs are no use for Homoeopathy. They are sub-standards. It should be P.U.C. or a degree holder. My definition of degree is degree of a University. There is no University in our State which has got the faculty of Homeopathy. We have got hardly 400 students of homeopathy in our State.

SHRI K. C. PANDA: Have they applied for the introduction of this faculty?

WITNESS: We did approach. But they want more students and an affiliation fee of one or two lakhs of rupees.

SHRI K. C. PANDA: What is the contribution of the State till now?

SHRI MAN SINGH VARMA: What is your opinion about registered practitioners? They have been practising for long. Should they be included on the Central Register or not?

WITNESS: Definitely, yes. A registered practitioner having ten years practice is better than some of the fresh graduates.

SHRI M. SATYANARAYANA RAO: Dr., what is the strength of your staff?

WITNESS: For the present 26.

SHRI M. SATYANARAYANA RAO: Are they institutionally trained?

WITNESS: Majority of them are all institutionally trained. On homeopathy we have got four people whereas with allopathic qualifications we have got about 22.

SHRI M. SATYANARAYANA RAO: How many beds have you got in your college?

WITNESS: Ten. I have got seven students in the Final year. For each one student there is one bed prescribed. We are utilising the beds of other recognised hospitals which is about 150 beds.

SHRI MUHAMMED KHUDA BUKHSH: Will you please refer to your reply to questions No. 11 and 12? Many allopaths are practising homeopathy. You say that ever branch is essential. Do you want anybody to practise whatever he likes?

WITNESS: I want everybody to stick to his profession so that the person shines, otherwise it will be a chaos.

SHRI ZIAUR RAHMAN ANSARI: Would you suggest that some penal clause should be there both for homoeopaths practising allopathy and allopaths practising homeopathy?

WITNESS: Yes, definitely.

SHRI ZIAUR RAHMAN ANSARI: In your reply to question 12 you said Homoeopathy is getting organised now and hence any drastic steps taken will jeopardise the cause of its development". What do you mean by this?

WITNESS: It being a new science, if you compare it with other sciences which are already well in advance, then it will be putting certain hurdles in its development. So it should be given some chance to develop.

SHRI BHAOOSAHAIB DHAMAN-KAR: Are there any allopathy graduates or post-graduates practising homoeopathy in your State?

WITNESS: There are only two allopaths who are practising homoeopathy. One is from Bangalore. One is from Dharwar. About others, I do not know.

SHRI BHACOSAHAIB DHAMAN-KAR: Do you suggest that these allopaths practising homoeopathy should have some institutional training before they start practising homoeopathy?

WITNESS: I do not mind it. But if you look to the foreign countries, everybody is a post-graduate in allopathy...

SHRI BHAOOSAHAIB DHAMAN-KAR: My question is: Do you suggest that allopathy post-graduates or graduates practising homoeopathy should have necessarily an institutional training?

WITNESS: Definitely training should be given.

SHRI BHAOOSAHAIB DHAMAN-KAR: You know there are allopaths practising homoeopathy for the last 30 or 40 years. What do you suggest for them? Do you suggest that they should all be banned? WITNESS: I am sorry I cannot reply to that question, because I do not know whether the man is actually practising homoeopathy according to the principles of homoeopathy or whether he is practising mixopathy. There are so many ways of practising homoeopathy. So it depends upon what type of homoeopathy one is practising.

CHAIRMAN: You have very emphatically stated that "many allopaths are practising homoeopathy. So this punishment is not only to be enforced on homoeopaths. Purity in every branch is essential." That is your language. Now why do you fight shy?

WITNESS: I am not fighting shy. Everybody should practise his own branch. That is my basic reply. If one is an allopath, one should restrict oneself to allopathy and not poke one's nose in homoeopathy and vice versa.

DR. LAXMINARAYAN PANDEYA: There must be a degree course for homoeopaths. So do you suggest any duration for this course, say, four or five years?

WITNESS: The same duration as there is for other medical sciences. When we are standardizing education after Inter Science, as we are having training for allopathy, so can it be for homoeopathy.

CHAIRMAN: In your reply to question 15 you have said, "Any recognised diploma or reputed practitioner of over 20 years' practice...." What do you mean by 'reputed practitioner' in a court of law?

WITNESS: Reputed practitioner' means one who got reputation as a homoeopathy practitioner, but who may not be in the list of registered practitioners. One may be a reputed homoeopathy practitioner but may not be on the list of registered practitioners. CHAIRMAN: You mean to say any experienced practitioner, whether he is registered or not?

WITNESS: Yes. Then, Madam Chairman, I would like to suggest one or two things more. At present the physiology which is taught is only materialist *i.e.* physiology. We should switch on to ayurvedic physiology where all saptha rasas are given. That is the more realistic physiology. I personally feel that we should go to the more indigenous type of physiology where it has got more merits than the present physiology. That is one. Number two: We should stress on more lectures on organ on and materia medica rather than other subjects like pathology etc. Of course, for bacteriology lot of research needed. We can go more towards bacteriology. But we should not harp on the materialistic type of teaching in the homoeopathy schools and colleges. So if these things are done, our students will definitely be more homoeopathy minded and less allpoathy minded.

SHRI N. G. GORAY: On behalf of the Members and Chairman of this Committee I thank you for the views you have given. I am sure your views will be of great help to us in ultimately formulating the Bill.

WITNESSES: Thank you, Sir. [The witness then withdrew.]

[The witness (Shri T. N. S. Somayaji, Registrar, Mysore State Homoeopathic Committee was called in.]

CHAIRMAN: Whatever evidence you give is to be treated as confidential. Have you a State Council?

WITNESS: No, the Mysore State Homoeopathic Committee has been constituted tentatively in place of the Board.

DR. LAXMINARAYAN PANDEYA: How many registered medical practitioners in Homoeopathy are there in your State? WITNESS: We have got 1736 medical practitioners registered on experience basis.

DR. LAXMINARAYAN PANDEYA: Are there different classes like A Class, B Class etc.?

WITNESS: Yes.

DR. LAXMINARAYAN PANDEYA: How many classes are there?

WITNESS: In A Class we have got 1223, in B Class we have 27 and in C Class we have 468. The total number so far registered is 1736.

DR. LAXMINARAYAN PANDEYA: . What is this A, B, C?

WITNESS: A represents 10 years' practice before 1961, that is, the date from which the Act came into force and C. represents two years' practice before 1961. B represents integrated practice of allopathy and homoeopathy or ayurveda and homoeopathy or unani and homoeopathy.

DR. LAXMINARAYAN PANDEYA: Do you register all the persons who are practising in all the systems of medicine?

WITNESS: If anyone wants to get registration, he should apply saying that he knows homoeopathy and he wants to practise.

DR. LAXMINARAYAN PANDEYA: So they can practise both in homoeopathy and allopathy? There is no check?

WITNESS: No restriction; according to the Act, they should have registration in both.

SHRI T. G. DESHMUKH: Sometimes three also?

WITNESS: Yes. In the case of ayurveda there is integrated registration. They practise allopathy also. SHRI T. G. DESHMUKH: So one can practise ayurveda, homoeopathy and allopathy?

WITNESS: Yes; that is the State Act.

SHRI BHAOOSAHAIB DHAMAN-KAR: Do you insist on institutional training for allopaths or ayurveds?

WITNESS: I do not know much about ayurveda; I can only speak of homoeopathy. If they come forward for homoeopathy and satisfy the provisions of the Act we give them registration for integrated practice.

SHRI MAN SINGH VARMA: Suppose there is a vaid, an ayurved acharya and he wants to practise homoeopathy; would you allow him?

WITNESS: Yes. He should produce the certificate that he has been practising ayurveda as well as homoeopathy.

SHRI MAN SINGH VARMA: Even without having any qualification in homoeopathy?

WITNESS: So far we have gone only on experience basis.

SHRIMATI SAVITA BEHEN: What about allopaths?

WITNESS: He should also get registered.

SHRI T. G. DESHMUKH: According to your B Class two years training is enough?

WITNESS: B Class represents integrated practice. It is 10 years in the case of A Class and 2 years in the case of C Class. There is no time-limit in the case of B Class.

SHRI T. G. DESHMUKH: According to C Class two years' experience is enough?

WITNESS: Yes; but it should he before 1961. It is really a confusing situation and if I am permitted I will read out the provision. Part C says, persons who have been engaged in the practice of homoeopathic system of medicine for a period of not less than Ten years immediately before the date of coming into force of this Chapter and have this as principal occupation. Part B shall include medical practitioners who are registered under the Mysore Medical Registration Act, 1961 or the Mysore Ayurvedic and Unani Practitioners Registration and Miscellaneous Provisions Act. 1961 and who are engaged in the practice of homoeopathic system of medicine; and Part C shall include other persons who have been engaged in the practice of homoeopathic system of medicine for not less than two years as their principal occupation on the date of coming into force of this Chapter, that means, December 1961. If before 1961 one had a practice of two years he will come ^r under C.

SHRI K. C. PANDA: Have you got any institution in your State which imparts education in homoeopathy?

WITNESS: There is another thing with regard to Class C. The entries of the names of persons in Part C shall be provisional and their names shall be removed from the Register unless they pass the third and final examination in the subjects specified in Parts I and II for the Diploma.

SHRI K. C. PANDA: Perhaps you have not followed my question. I wanted to know . . .

CHAIRMAN: Mr. Panda, he is giving out the provisions of the Act. Let us see what they are.

WITNESS: I am reading from the Act. It says: Provided that the entries of the names of persons in Part C shall be provisional and their names shall be removed from the Register unless they pass the third and final examination in the subjects specified in Parts I and II for the Diploma GCEH in the Schedule within a period of seven years. So their registration is provisional till they pass the examination. If they do not pass the examina ion they will be removed from the Register.

CHAIRMAN: Since you passed that Act have you held any examination?

WITNESS: No.

SHRI K. C. PANDA: I wanted to know whether you have got any institution in your State that imparts education in homoeopathy.

WITNESS: Very recently we have recognised four private institutions.

SHRI K. C. PANDA: How many years' training do they impart?

WITNESS: Four and a half years.

SHRI K. C. PANDA: What is the minimum qualification for admission to those institutions?

WITNESS: The minimum for the Diploma is SSLC or Matriculation and for the Graduate course is PUC.

SHRI K. C. PANDA: Does your Act envisage to discontinue this C Class after the college students come out after their final examination?

WITNESS: I will read out the next. provision. The provision was to register unregis.ered practitioners on the basis of their practice and that was the business of the tribunal. It was for that purpose the tribunal was constituted. For subsequent registration the provision is this. After the constitution of the Board referred to in subsection (1) of section 19, a person shall on payment of Rs. 15 be entitled to have his name entered in the Register only if he possesses any of the qualifications in the Schedule. He should be qualified institutionally. Then only he will get registration.

SHRI K. C. PANDA: Do you have a provision that these people also will attend the institutions?

WITNESS: Only the youngsters will go to the institutions and qualify themselves. So far as old people are concerned we go on the basis of practice and experience.

SHRI K. C. PANDA: What is the contribution of the State for these institutions which have been recognised?

WITNESS: We have simply recognised them; we have not given them any grants.

SHRI K. C. PANDA: No aid has been given?

WITNESS: They have not come forward so far. According to the circular from the Government of India we have asked institutions to come forward but they have not applied.

SHRI K. C. PANDA: Have they got any hospitals attached to the institutions?

WITNESS: Yes; some of them. And some of them are now coming up. As I have said just recently we have recognised four of them.

SHRI K. C. PANDA: Does the State want to have a Degree college there?

WITNESS: Yes, of course. Government have sanctioned one college but it has not yet been started. We are going to start it shortly. We are going to have a Government college in Bangalore. These four colleges are private colleges which have been recognised by the Government.

SHRI K. C. PANDA: Have they applied to the University for affiliation?

WITNESS: No, no. We have not affiliated them to any University because the Act says there is to be a graduate course and we feel that it is not necessary to affiliate them to the University at this stage. SHRI K. C. PANDA: If you have a Degree college I think that will have to be affiliated to some University.

WITNESS: Generally it should be but in our Act itself it is mentioned that there will be a GCEH course. It i_3 Graduate Course of Education in Homoeopathy. It is included in the State Act itself.

SHRI MAN SINGH VARMA: You have stated that according to your Act after two years' practice one becomes eligible for registration.

WITNESS: Yes; but it is provisional.

SHRI MAN SINGH VARMA: For example, an M.B.B.S. starts practice today and after two years' practice he will be entitled to registration.

WITNESS: That is only within that period. That period is over now. As I have said before the tribunal was constituted to give registration on the basis of experience. That is over now and the subsequent registration is only on qualification.

DR. LAXMINARAYAN PANDEYA: This Committee is nominated by the Government?

WITNESS: I want to tell you one thing. This Committee is in place of the Board and that too tentatively. When the Board is regularly constituted that will take over. This Committee consists of members nominated by the Government but for all practical purposes it is the Board and it functions as the Board.

DR. LAXMINARAYAN PANDEYA: So it is not elected by the members of the profession?

WITNESS: Not elected. The provision is that notwithstanding anything contained in this Act pending the constitution of the Board for the first time under this Act the powers and functions of the Board shall be performed by the Committee appointed by the State Government and it will consist of the Director of Health and Family Planning, Mysore and four Members who shall be persons eligible to have their names entered in the Register.

DR. LAXMINARAYAN PANDEYA: So as a Rgistrar you are an administrative officer?

WITNESS: Yes.

SHRI BHAOOSAHAIB DHAMAN-KAR: Are any Members of the Committee institutionally trained in Homoeopathy?

WITNESS: Of the Members of the Committee two are institutionally qualified homoeopathically while the others are not.

SHRI MAN SINGH VARMA: Since you are connected with the legalities of this Bill, have you any comments to make on this Bill?

WITNESS: Nothing. So far as the statutory provisions are concerned I think everything is all right, except for one or two minor things. On page 2 sub-clause (e) it says "medical institution" means any institution within or without India....I think it would be better if it is said 'within or outside India' instead of saying 'within or without India'.

SHRI T. G. DESHMUKH: Both are same, is it not?

WITNESS: No, no.

SHRI N. G. GORAY: 'Without' is quite all right.

WITNESS: That is my view. Then on page 3 line 39. It is said here a casual vacancy in the Central Council shall be filled by election or nomination, as the case may be, and the person elected or nominated......Here I want to add one word 'so' and say 'and the person so elected or nominated . . .' "(5) Where the said term of five years is about to expire in respect of any member, a successor may be elected or nominated at any time within three months before the said term expires but he shall not assume office until the said term has expired."

It should read: "until the expiry of the term" or "until the term expires". This would be better wording. Then, I come to page 4, clause 11 (d) which reads:—

"with the previous sanction of the Central Government, fix the remuneration and allowances to be paid to the President, Vice-President and members of the Central Council and to the members of the Committee thereof and determine the conditions of service of the employees of the Central Council."

Instead of "determine the conditions of service", it should read "salary and conditions of service". At one of the meetings held by the Central Council of Homoeopathy they had resolved that the Director of Homoeopathy should be an administrative officer and there should be a technical adviser to the State but such a provision I do not find in the Bill.

CHAIRMAN: We shall look into that. Who presided over the meeting?

WITNESS: It was held in New Delhi on the 26th August, 1971. I have got an extract of the resolution passed at their meeting held on the 26th August, 1971. They had resolved that the Director in the State should be an administrative officer purely for efficient administration and there should be an adviser for technical matters. At page 6, clause 15 (2) (a) is not in consonance with that.

CHAIRMAN: We shall consider that.

WITNESS: It says here: ____

"or any other office (by whatever designation called) in Government or in any institution maintained by a local or other authority;".

This is not in consonance with that resolution. The Government officer may not be a homoeopath. Unless he is registered as a homoeopath, he may no. hold the office, but in the Central Council you have resolved in a different way.

CHAIRMAN: Dr. Jugal Kishore will explain it.

DR. JUGAL KISHORE: Regarding the point whether a homoeopath is required as an officer, the Government do realise that for administrative purposes any other person can be appointed by the State Government.

WITNESS: But under this rule it is not permitted.

DR. JUGAL KISHORE: It does not mention anything about administration. It is regarding the homoeopaths themselves. Wherever a homoeopathic doctor is appointed, these are the conditions which are laid down.

WITNESS: It should be made specific.

DR. JUGAL KISHORE: In the Health Ministry the Secretary is not a homeopath, but he is the Chairman of the Advisory Committee, as an administrative officer he should be connected with any department. There can be a non-technical director or joint director for the homoeopathic system. The technical officer or the homoeopathic doctor will advise him on the technical aspects of administration.

WITNESS: Can it be clearly mentioned by adding a note or footnote? CHAIRMAN: Under clause 15(2), no person, other than a practitioner of homoeopathy who possesses recognised medical qualification and is enrolled on a State Register or the Central Register of Homoeopathy shall hold office as homoeopathic physician. I think you have made your position very clear. You can come to the next point, if you have any.

WITNESS: Better there should be a note. That will clarify the position. Then, in the Schedule, our institutions have not been included. With regard to the qualifications mentioned in the Second Schedule, the names of our institutions have not been included.

DR. JUGAL KISHORE: If the State Board has not yet awarded any final qualification, if they have not recognised it we cannot include them in the Schedule. Until that time, we cannot include them in the Schedule. You have recognised these colleges only recently. Unless the first batch of students come out of the college, how can they be recognised? We have received no notification from the State Government regarding this. Has any batch of students come out from your college?

WITNESS: Yes. From the Belgaum college, one set of students have passed out. It is a recognised college. There is a research centre also for homoeopathy sanctioned by the Government of India.

CHAIRMAN: Did you notify the Government of India about that?

WITNESS: About ten or fifteen students have come out of the Belgaum college. We have not given any diplomas. The Government itself has given powers to conduct the examination tentatively.

CHAIRMAN: If any college has given any diploma, your State Committee has to approve that diploma. Then we can include it in the Schedule; otherwise, not. WITNESS: The Committee was not functioning then.

CHAIRMAN: Since you are functioning now, you have to do something to recognise the diploma.

WITNESS: We shall take up the ssue.

CHAIRMAN: Unless you take it up and recognise it, we cannot include it in our Schedule. The Schedule can be modified later on.

WITNESS: My request is that all the four institutions which we have recognised, at least the degrees or diplomas, should be included in the Schedule under the Central Act. They should find a place in the Bill.

CHAIRMAN: Under your Act you did not have any college. How can you recognise any diploma or degree?

WITNESS: Till last year these colleges did not come forward.

CHAIRMAN: How can we include it in our Schedule?

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WITNESS: The Act was brought into force in 1961, but these degrees and diplomas were not included.

CHAIRMAN: You have to recognise it first and then please let us know. Thank ou.

WITNESS: Thank you.

[The Witness then withdrew]

[The witnesses Dr. A.R.A. Acharya, 76, Gandhi Bazar, Bangalore 4, Dr. H. K. Srinivasa Rao, 280, 10th Cross, Wilson Garden, Bangalore 27, and Dr. H. T. Rengaswami, 22, 1st Main Road, Seshadripuram, Bangalore, 20) were called in.]

CHAIRMAN: The evidence that you tender before the Committee will be treated as confidential till it is laid on the Table of both Houses of Parliament. We have got your replies to our questionnaire, but if you have any further comments to offer on the Bill or any suggestions to make, please do so.

DR. A. R. A. ACHARYA: One point here is, you have excluded experienced and talented people from being members of the Council. Out of a lakh fifty thousand are experienced and only 9,000 odd are qualified. Even among the qualified persons we have got people with one-year diploma, two-year diploma and three-year diploma. There is no uniformity. Our claim is if people with merit and talent are put in the Council, that will be helpful in the beinning for the future of homoeopathy. We want that at least by nomination some of the old and talented people should come into the Council.

CHAIRMAN: That is at the discretion of the nominating authority. Next point.

DR. H. K. SRINIVASA RAO: I agree with my friends here. Education in our country at present is at a transitional stage. There is no uniformity in education. The homoeopathic system has survived in our country for the past 150 years. During this period we have built it up. It has been built up by devoted and talented people who have sacrificed their everything. If homeopathy has lived and spread in India today it is due to the dedicated effort of some individuals.

As regards the institutionally qualified people, it is very desirable that education-imparted, education-oriented people should be upgraded so that they may come up to a standard. Till such time as it is achieved the services of eminent homoeopaths should not be lost to the science. Their advice is very valuable. Those who have put in 10—15 years of service to the profession have done yeomen service to the cause of homoeopathy. They should be respected. DR. H. T. RANGASWAMI: I also concur with my friend, Dr. Acharya, In addition to this, I find in the qualidication there is four-year course everywhere in the country along with this there is two-year course also in one c_{Γ} two States. As also there is the Delhi correspondence course. Then there are others who appear privately They are also included in the same category. I think it is desirable to have some difference in the categories in the Schedule. The Bill, otherwise, is a good Bill.

DR. LAXMINARAYAN PANDEYA: You are an L.M.P. and an allopath. You suggest that an allopath can practise homoeopathy as well.

DR. H. K. SRINIVASA RAO: I am a retired Assistant Surgeon from Government service. In 1939 I suffered from virus infection. My best allopathic friends tried to help me but I was not cured. However, after eight months of intensive treatment I was better not cured. Then for the first time I met a homeopath. Before that I never knew anything about homeopathy. And I was completely cured. Then I took to homeopathy. As I side I was still in service, side by experimented in homeopathy. I do not talk with any prejudice. But by experience I can say that it is the best system of medicine. It is good for our country especially, a country which is poverty-stricken and far flung. In the remotest villages this system should be popularised and the best of the talents should be inducted into it.

As regards switching over from one system to another, there is no question of mixing up the two. Whatever is good one should be taken by the practitioner.

DR. LAXMINARAYAN PANDEYA: Do you mean to say that a homeopath can use allopathic medicines?

DR. H. K. SRINIVASA RAO: There is nothing like homoeopathic medi-

cine and allopathic medicine. If the symptoms agree the same medicine can be used for both,

SHRI BHAOOSAHAIB DHAMAN-KAR: Do you not agree that there are specifically homeopathic medicines and allopathic medicines?

DR. H. K. SRINIVASA RAO: No. Quinime which is used extensively by allopaths becomes a homeopathic remedy if the symptoms suit. Similarly, streptomycin which is widely used for tuberculosis may not be used on a patient who has allergy to streptomycin. But it can be used in homeopathy where the symptoms agree. So let us not go by just the label. Therefore, unless the symptoms indicate it should not be used in either system.

SHRI BHAOOSAHAIB DHAMAN KAR: Do you not think there is risk in allowing the homeopaths to use _injections?

DR. H. K. SRINIVASA RAO: With-N out a background it is dangerous.

SHRI MUHAMMED KHUDA BIKHSH: Do I understand that your suggestion is that whatever medicine is used it becomes homeopathic to a particular patient in relation to the theory of similia simibus curantur.

SHRI LAXMINARAYAN PAN-DEYA: In other words, homeopathic is not a different science.

DR. H. K. SRINIVASA RAO: Allopathic i_s not a science based upon experience. It i_s a speculative system. What is claimed good today may not hold good tomorrow.

DR. JUGAL KISHORE: There is some confusion here, but it is an interesting one. Dr. Srinivasa Rao says that a remedy can be called homoeopathy or allopathic according to its usage. For example, he says that streptomycin, if it is potentised, becomes homeopathic medicine. In the olden days same (allopathic) mixture could cure or relieve a person in five days, whereas another person would respond to the mixture i_n two or three doses and bring about a speedy cure or he may not respond to it at all. When it cured speedily it was homeopathic for that person. We give steptomycin according to the symptoms produced by it on healthy persons. Sometimes the toxic effects produced by the streptomycin in allopathic doses have been cured by streptomycin in potency.

DR. H. K. SRINIVASA RAO: For instance, the founder of Homeopathy himself experimented o_n cinchona. He had the inquisitiveness to find out how it worked Because cinchona was used by allopaths it was not barred for homeopaths. Therefore, there must be some principle behind it. If the symptoms correspond, penicillin too can be made use of in homeopathy. There is not limit in homeopathic pharmacopea.

SHRI BHAOOSAHAB DHAMAN-KAR: Are you members of the Homeopathic Committee of the Mysore State?

DR. H. K. SRINIVASA RAO: I am one of the members of the Consultative Committee, But it is not functioning now.

DR. H. T. RANGASWAMI: I am a member of the Homeopathic Committee. What I wanted to say Dr. Jugal Kishore has already explained.

SHRI M SATYANARAYAN RAO: What are the qualifications required for becoming a member of this Committee?

DR. H. T. RANGASWAMI: For becoming a member of the Board or a Committee there is no need for any qualifications. Any homeopathic practitioner who is registered can become a member of the Committee. Registration was stopped some years back in our State. For the first registration non-institutional people were also included. CHAIRMAN: Will you please explain what do you mean that for the time being all registered practitioners, qualified or not, should be treated on the same level when you say that there should be representation of one against every 5,000 practitioners?

DR A. R. ACHARYA: For want of facilities they could not register themselves. When the Mysore Homeopathic Act came ten years continuous practice was specified. It is equal to any other registration; ten years' experience or regular qualification. There is no difference in the registered practitioners position. When we have been registered as A class practitioners, it is just like any other qualification. Why should you differentiate? Moreover, there is no dearth of qualified doctors now.

CHAIRMAN: You do not want to make any difference between institutional training and experience.

DR A. R. ACHARYA: The Mysore Homeopathy Act treats them equally.

SHRI M. SATYANARAYAN RAO: You say if any person has got ten years' experience he can be recognised. How do you know that this person has got ten years practice because anybody can claim to have ten years experience?

DR. A. R. ACHARYA: A certificate from the magistrate or through public opinion it can be verified.

CHAIRMAN: You mean that there should be circumstancial evidence

SHRI BHAOOSAHAIB DHAMAN-KAR: In the reply you have given to item 11 homeopathic practitioners should stick to their remedy unless they are qualified to practise other systems. "If the practice is harmful to the people, then he should be penalised." Who is to decide all this?

DR. A. R. A. ACHARYA: My impression is this-I do not know about penicillin and other things; so I will not bother about them; I will stick to my knowledge—and I say that I practise that system by which the patient's life is safe.

SHRI MAN SINGH VARMA: You have said that elder homoeopaths have done a yeoman service to the cause of homoeopathy, but their interests have been ignored in this Bill. So what special clause do you suggest to protest their interests?

DR. A. R. A. ACHARYA: First of all, you will have to ascertain whether they have done anything for the cause of homoeopathy, institutionally or in association work or editing or publishing. If such people are available, although they have no qualification because they could not have an opportunity to get qualified, and if they have experience of about 30 or 40 years, they must be given a protective clause. If you find that they аге meritorious, they are of eminent use to the cause of homoeopathy, they should be entertained. And Parliament should find out ways and means of providing such a protective clause.

SHRI BHAOOSAHAIB DHAMAN-KAR: Do you suggest in regard to the representation on the Central Council that certain seats should be reserved for institutionally trained people and certain seats should be reserved for experienced people?

DR. A. R. A. ACHARYA: Yes, exactly. Suppose you have 30 per cent. It can be raised to 40 per cent or so and give chance to the elder people.

SHRI BHAOOSAHAIB DHAMAN-KAR: You all have taken pains to come over here and tender your advice and evidence. We find it very valuable and we hope it will be very useful to us in framing the Bill ultimately. We will make use of it. We thank you very much on behalf of the Chairman and this Committee for having come down here and given your cooperation. DR. H. K. SRINAVASA RAO: On behalf of our members I also thank the honourable Parliamentary Committee Members and the Chairman. Thank you.

[The witnesses then withdrew]

(The witnesses (Dr. M. V. R. Swamy 58, 13th Cross, Margosa Main Road, Malleswaram Bangalore-3) was called in].

CHAIRMAN: You may please introduce yourself.

DR. M. V. R. SWAMY: I am a Registered Medical Practitioner and general secretary of the All India Institute of Homoeopaths, Mysore State Branch. I am practising in Bangalore.

CHAIRMAN: Dr. Swamy, beforeyou tender your views I may inform you that the evidence or the views that you will be tendering before this Committee should be treated as confidential till the report is laid before the Houses of Parliament.

Now, you have just now circulated your suggestions for the amendment of the Bill. Since the Members do not have an opportunity to go through your memorandum, you will please explain the points if you like.

WITNESS: In Clause 3(1)(a)— Chapter II—it is said "Such number of members not exceeding five as may be determined by the Central Government in accordance with the provisions of the First Schedule from each State..."And the First Schedule's says "one for 10,000. It is very scanty. In many States you may not find them in thousands. In Mysore State you will find for the present 1700 odd on the Register in which case only one may be got. I have heard in some States the number will not reach 10000 In view of that my suggestion is that there should be not less than 150 members on the Council and from each State the number should be a minimum of 10. Please increase it from "five" to "ten' from each State.

SHRI BHAOOSAHAIB DHAMAN-KAR: Is it not irrespective of the number of practitioners? A State may have a small number but.

WITNESS: Suppose the State is having a very heavy population and in course of time it will be growing. "Therefore, let there be at least minimum number three a : of each State and a maxifrom mum number of ten. In places like Bengal and UP the number of practitioners is very heavy in which case I would suggest a maximum of 10. If the proportion is directly based on the number of practitioners according to the First Schedule, then it will not be all right. But irrespective of the number of practitioners J would suggest a minimum of 3 and a maximum of 10. Let it be on the basis of population, i.e. one member for each crore of population.

Again in the same clause, subclause (b) please add "or Government college" after "each University". In many States you will not find Universities for Homoeopathy. Only colleges are there. In such places let not the representatives of the educational institutions miss the opportunity in the absence of a University. Therefore, you may kindly add the words "or College" if you have no objection.

SHRI MAN SINGH VARMA: One from each Government College.

WITNESS: Yes.

SHRI MAN SINGH VARMA: Supposing the State has got five Government Colleges, you say there should be five members to be elected?

WITNESS: Yes. Or, you may limit the minimum number. Except in Calcutta, I do not find so many colleges in any other State of India especially Government colleges. It is hard to find one Government college in a State. That is my experience. If there is anything, I stand to be corrected.

SHRI MUHAMMED KHUDA BUKHSH: But we cannot rule out the possibility of Government colleges coming up.

DR. JUJGAL KISHORE (Ministry of Health): There are three Government colleges in Andhra Pradesh.

WITNESS: Then you can limit it to two. If there are a good number of colleges, you can limit it to two. I do not think one would be enough because as the number of institutionally trained practitioners increases, the problem will also increase.

Then in the same clause, sub-clause (c), change it from 30 per cent to 40 per cent in the first line of that subclause. The registered practitioners will have to be given proper representation. Thirty per cent is very small in my opinion. So I would request you to increase it from 30 per cent to 40 per cent.

SHRI N. G. GORAY: May I ask you one question? Increasingly the number of institutionally trained people would go up.

WITNESS: Yes,

SHRI N. G. GORAY: Now if we fix this proportion of representation and give representation on this basis to those who are self-taught, do you think it should remain there or it should also increasingly diminish?

WITNESS: Naturally the number of the registered practitioners who are without institutional training will automatically dwindle as days advence.

SHRI N. G. GORAY: Then should not the proportion of their representation be limited to their number? WITNESS: The number of registered medical practitioners without institutional qualification is higher now when compared to the institutionally qualified people. In view of that I am suggesting the number should be increased from 30 to 40.

SHRI N. G. GORAY: Should it increase or decrease?

WITNESS: I have no objection to increase it.

SHRI N. G. GORAY: What I am saying is this. Your argument is because the unqualified people are more in number and because of the fact that it is they who have popularised homoeopathy and done some much for it the representation given to them should be increased. But it is also admitted that with the passage of time such people who are self-taught will decrease in number when properly institutionally trained people come up. Then do you mean to say that this representation at 40 per cent should remain at 40 per cent or should it go down in proportion to the decrease in their numbers?

WITNESS: There are two aspects. What you have suggested is very good and I welcome it. But it is better that it is fixed at 40 per cent on a permanent basis. Even the Central Act is to be amended and if you fix it at 40 per cent the State Acts will automatically follow it.

SHRI M. SATYNARAYAN RAO: Would you agree to put in some period for it? This is meant to safeguard the interests of the older generation, is it not? If you fix this percentage for, say, 10 years or 15 years, would it not do?

WITNESS: Now I am past sixty but surely I know many who are in the thirties and I think they will have to get representation.

SHRI M. SATYNARAYAN RAO. But people of 30 years' age could not have sacrificed much for the system. You have sacrificed and because of your sacrifice this system has come up and that is why we want to safeguard the interests of people like you who have sacrificed for the system and I think 10 or 15 years' protection would do.

WITNESS: It is not a question, of higgling. We have to make use of our discretion and fix it at some level and I have no objection if it is somewhere between 15 and 20. You cannot take an average in such cases. You cannot make use of averages in crossing a river.

Now, in the same chapter under clause 5(1) in the third line after the second word Schedule, add the word 'or'. After adding the word it will read: No person shall be eligible for election to the Central Council unless he possesses any of the medical qualifications included in the Second Schedule, or is enrolled on any State Register of Homoeopathy and resides in the State concerned. Otherwise it amounts to depriving registered medical practitioners being elected to the Central Council. It is to safeguard against that I am suggesting the addition of this word 'or'.

In Chapter IV clause 21(1) in the last line of the para I want to add 'or' after the word 'and' after the word 'Homoeopathy'. Then the clause will read: The Central Council shall, cause to be maintained in the prescribed manner, a register of practitioners of Homoeopathy to be known as the Central Register of Homoeopathy which shall contain the names of all persons who are for the time being enrolled on any State Register of Homoeopathy and/or who possess any of the recognised medical qualifications.

CHAIRMAN: You come to more important points. These are all selfexplanatory. WITNESS: All right. In page 12, under First Schedule, I suggest that the number of minimum members from each State to the Council should be nothing less than two and the determination of the proportion of the number should be on the basis of population, i.e. something like one member for each crore of population of the State. The number of members of the Council should be nothing less than 150. These are my suggestions.

SHRI T. G. DESHMUKH: You are the Director of this Mysore Homoeopathy Training and Research Centre?

WITNESS: Yes, Sir.

SHRI T. G. DESHMUKH: This is your own?

WITNESS; Yes, personal.

SHRI T. G. DESHMUKH: What kind of research have you done? Can you tell us?

WITNESS: It will take some time. Anyway there are two aspects of research. Without searching no research work can start. Most of our students are not able to correctly evaluate what is contained in the literature that we are having. We have such vast literature on the subject. Even in the institutions sufficient attention is not being given to this. For example, the materia medica is such a vast thing and students are frightened by that. The medical people who are here will know that the entire group of symptoms are very helpful with reference to generals and with reference to particulars and that will greatly help us to select the right drugs. The standard in the MBBS course is of course very high and it is very difficult. But to study Homoeopathy it is not so difficult. Of course for everything you will have to devote time, energy and attention and certainly Homoeopathy is not difficult to be studied. That is my humble opinion. The research 1648 RS.--8

scholars must be requested to rewrite the literature on homoeopathy so that the whole approach will be easier. Therefore the first aspect is to rewrite the literature. The next aspect is making use of the experience of the stalwarts in the profession, both institutionally qualified and others. We have to make use of their experience, whoever they are. We must start research centres for typhoid, for diphtheria, for leprosy, etc.

SHRI T. G. DESHMUKH: My question was very specific. What have you done?

WITNESS: I am coming to that. I have been able to-I have not come here to boast about myself and that is why I have given this preamblecure cases of typhoid on the 11th or 12th day with Homoeopathic medicines only. In Typhoid, beyond a certain time limit they give chloromycin which is not necessary for us. There are many such things. If the homoeopaths are given aid they can start research centres, I have conducted experiments demonstrating cures relating to typhoid, leprosy and I have also been demonstrating to my students and friends how it is possible to do such things. I have also been writing literature on homoeopahty in Kannada. Such research work in writing literature must be started both in English as well as in vernaculars.

'SHRI T. G. DESHMUKH: When did you start your Centre?

WITNESS: 1964.

SHRI BHAOOSAHAIB DHAMAN-KAR: In your Memorandum with reference to Question No. 11 you have said homoeopathic practitioners should practise only homoeopathy; if not their registration should be cancelled. In that context I have to ask you your opinion. These allopaths are practising homoeopathy. Do you want them to continue practising homoeopathy or do you want them to be penalised also? WITNESS: May I know if you are asking me for my revised opinion on this?

SHRI BHAOOSAHATB DHAMAN-KAR: You have said that homoeopaths should not be allowed to practise any other system and if they do their registration should be cancelled.

WITNESS: I follow you; I remember my answer.

SHRI BHAOOSAHAIB DHAMAN-KAR: I want to know whether you are of the opinion that allopaths practising homoeopathy should also be penalised.

WITNESS: Why should they be banned? If they are practising homoeopathy, let them do it. Anyway that question does not deal with allopaths and so your question does not relate to No. 11. Anyway I will answer it. If allopathic practitioners are practising homoeopathy we will welcome it.

CHAIRMAN: Please see your answer to questionnaire No. 11. In reply you have stated that homoeopathic practitioners should practise only homoeopathy. If not, they should be penalised and the registration cancelled. This is your reply. The hon. Member wants to know from you about allopaths practising homoeopathy.

WITNESS: If allopaths are practising homoeopathy, we welcome them, provided they do not parctise allopathy.

SHRI MAN SINGH VARMA Will he be allowed to administer allopathic medicines also? Will an allopath who is practising homoeopathy be allowed to administer allopathic medicines?

WITNESS: We take it that he is interested in practising homoeopathy.

SHRI MAN SINGH VARMA: You, are not against an allopath practising i homoeopathy.

WITNESS: I am a staunch homoeopath. I am here to safeguard the interests of homoeopathy. Homoeopaths should practise homoeopathy. If anybody belonging to other systems of medicine wants to practise homoeopathy, I wish he practised homoeopathy exclusively. If he does not want to practise homoeopathy, let him resort to his own method.

SHRI MAN SINGH VARMA: Now, it is clear that you are in favour of pure homoeopathy and pure allopathy.

I thank you very much on behalf of the Chairman and Members of this Committee. You have taken the trouble of coming over here and you have offered your suggestions and comments on this Bill. We are very much thankful to you.

WITNESS: I thank each and everyone of you all.

CHAIRMAN: There are two other witnesses along with Mr. Swami, but they have not come. So, we adjourn till 10 a.m. on Monday.

(The witness then withdrew)

(The Committee then adjourned.)

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Monday, the 30th October, 1972.

(AT TRIVANDRUM)

PRESENT

1. Shrimati Purabi Mukhopadhayay-Chairman.

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MEMBERS

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Rajya Sabha

2. Shri Sasankasekhar Sanyal	6. Shri Sultan Singh
3. Shri Bhupinder Singh	7. Shri N. P. Chaudhari
4. Shri N. G. Goray	8. Shri T. G. Deshmukh
5. Shri Man Singh Varma	

.

Lok Sabha

9. Shri Ziaur Rahman Ansari	16. Shri Popatlal M. Joshi
10. Shri Vidya Dhar Bajpai	17. Shri B. R. Kavade
11. Shri Muhammed Khuda Bukhsh	18. Shri Prasannbhai Mehta
12. Shri Hiralal Doda	19. Dr. Laxminarayan Pandeya
13. Shri Nageshwar Dwivedi	20. Shri M. Satyanarayan Rao
14. Shri Madhuryya Haldar	21. Shri K. Ramakrishna Reddy
15. Shri Chiranjib Jha	22. Dr. Sankata Prasad

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy.

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary.

WITNESSES

(1) Representatives of the Royal College of Homoeopathic Physicians, Ernakulam—

(i) Dr. S. B. Pandiar, Principal.

(ii) Dr. S. N. Pandiar, Vice-Principal.

(2) Representative of the Homoeopathic Medical College Pappanamcode, Trivandrum;

Dr. M. K. Srivaramana Nair, Principal.

(3) Representative of the Dr. Gururaju Government Homoeopathic Medical College and Hospital, Gudivada, (A.P.):

Dr. M. Kutumba Rao, Principal of the College and SuperIntendent of the Hospital.

(4) Representatives of the Students Union of the Athrasrama Homoeopathic Medical College, Sachivothamapuram, P.O. Kottayam:—

- (i) Shri N. I. Babu, Chairman.
- (ii) Shri E. N. Gopalakrishnan, General Secretary, All Kerala Homeo Medical Students Federation at the College.

(5) Representatives of the Athrasaramam Homoeopathic Medical College, Homoeopathic Physician, Eranakulam)

(i) His Holiness Swami Athura Dasji, Founder of the College.

(ii) Shri T. K. Gopalakrishna Panicker, Director, College Committee,

(iii) Dr. R. S. Pandiyan, Principal.

[The witnesses (Dr. S. B. Padiar, Principal and Dr. S. N. Padiar, Vice-Principal, The Royal College of Homoeopathic Physician, Eranakulam) were called in.]

CHAIRMAN: Dr. Padiar, we welcome you here. But before we start it is customary to explain to the witnesses the procedure. The procedure is that whatever you say here is to be treated as strictly confidential. That is, we will not give it to the press nor are you to give it to the press. This is not a warning but a sort of suggestion which we give to all the witnesses who come before the Committee and the press.

Committee, and you have to observe that.

We have got your memorandum. But apart from the memorandum if you want to stress some points or to elucidate certain points you are welcome to do so.

DR. S. B. PADIAR: Sir, I have got only one suggestion to make with regard to the Bill which states that:--

"The Central Government shall, by notification in the Official Gazette, constitute for the purposes of this Act, A Central Council . . ." The Council has got to be constituted as early as possible. And under this you have got three caluses, (a), (b) and (c). Sub-clause (b) says:—

"One member from each University to be elected from amongst themselves by the members of the Faculty or Department (by whatever name called) of, Homoeopathy of that University:"

We do not have any faculties down here in my own State except perhaps one. That clause will prevent most of the institutions from sending out their representatives. Already there are three institutions in Kerala. There are going to come up more institutions elsewhere. Altogether there will be about 17, if I am correct. While only one faculty will be represented, - 16 We others will go unrepresented. would like to make an amendment to that to the effect that at least 25 per cent, of the existing institutions are represented, each institution to be represented by one individual. It is necessary that all the members that are elected as representatives should not come from one and the same institution. And if 25 per cent, is not possible, then 10-15 per cent. representation would be quite a happy

feature. So when it is constituted more things will have to be thrashed out with regard to the curriculum and the line of procedure which has to be adopted, the conduct of the examinations and all that. Therefore, this representation will be highly essential.

CHAIRMAN: What is your reaction to the Bill as drafted.

DR. S. B. PADIAR: It is a welcome feature and we were expecting that the Bill will be introduced soon.

DR. JUGAL KISHORE: As you know, Dr. Padiar, there are a number of doctors in our country who have not undergone any formal medical education in these institutions. What is your suggestion regarding their representation in the Council?

DR. S. B. PADIAR: With regard to the registration of candidates who have applied for registration, I am sorry to say that most of them do not possess the elementary knowledge of practising homeopathy but just want a licence so that they can practise not in homoeopathy but some other systems also. We cannot say that as a generalised rule because there are quite a few who by tradtition have taken to homoeopathy and who have been doing quite a good work. But the relative percentage of such individuals will be too low. Therefore, unless we want to help them we may have to go into the legal merits of the cases before we take any decision. That is what I feel.

DR. JUGAL KISHORE: The question is, do you want such people who are really learned to be nominated on the Council?

DR. S. B. PADIAR: Learned in the sense that they know sufficient to practise homoéopathy and will stick to homoeopathy. By my saying "knowledge" I mean they should have the knowledge as well as the faith in the system because a degree holder cannot be spoken of as so faithful since most of them go out from our institutions and practise malpractices in the name of homoeopathy. In absence of any legislation no code of ethics is prescribed which is of prime necessity. We insist on some ethics. This formation of a Council is a welcome feature.

DR. JUGAL KISHORE: Why do the students who pass out from your colleges take to other pathies?

DR. S. B. PADIAR: There are so many causes. One immediate cause is the lure for money. Injections give them some more money. The students take to other systems because that spirit is not imbibed by them. Unless that is done they will not have sufficient faith and they will be lured by other systems.

Secondly, the standard of academic education that is prescribed is too low. School final does not give sufficient knowledge of English while most of the institutions are teaching through the medium of English. Most of the Naturally, literature is in English. some of them find it very difficult. The students do not know proper grammer. They do not know the use of proper predicate. We give them marks if they give answer through figures and indicate something pro-perly. But this does not help. Lectures, in absence of sufficient knowledge of English, do not help them, they are not understood. And it is not possible for all lecturers to resort to vernacular all the time. Therefore, what is necessary is that the basic academic knowledge should be increased.

SHRI T. G. DESHMUKH: Do you suggest that those who practise allopathy should be restricted or should be panalised?

DR. S. B. PADIAR: In my personal opinion I would suggest that a homoeo path should strictly confine himself to the domain of homeopathy in the interest of development of homoeopathy. And if he finds some difficulty it is better for him to take consultations. But if he wants to use some allopathic

medicine he should do it under the guidance of an able allopathy. Just now as we have heen handling quite a number of maternity cases we depend on midwives for their opinion. For some such cases we depend on allopaths and sometimes we also pass on a case to him. It will be too much impertinence on the part of a homoeopath to straightaway prescribe allopathic medicine about which he may not have sufficient knowledge. For example, quite a number of M.B.B.S. ~ people come to me to take lessons in homoeopathy since they have been parctising homoeopathy and do it in a very capable manner. Similarly, a homoeopathy should also consult an allopath in case he feels the necessity of prescribing an allopathic drug. In the same way we can also go to them if there is a doubtful or emergent situation. But if a homoeopath does not do so and takes law into his own hands that he is competent to prescribe such and such a thing, then I definitely say that it is criminal negligence on his part and he should be penalised.

DR. LAXIMINARAYAN PANDEYA: If an allopath possesses a good knowledge of homoeopathy, then he may be allowed to practise in homoeopathy. Or do you say that he should be debarred too?

DR. S. B. PADIAR: If an allopath takes to homoeopathy seriously, then I think there is no harm in his prescribing homoeopathy.

DR. LAXIMINARAYAN PANDEYA: If he possesses a good knowledge of homoeopathy, then nothing should prevent him from prescribing homoeopathy. So registration is not necessary for him?

DR. S. B. PADIAR: Registration should be necessary. He can qualify himself...

DR. LAXMINARAYAN PANDEYA: He is registered already as an allopath. But he is not registered as a homoeopath, but is practising homoeopathy also. So, can he continue his practice in homoeopathy or not?

DR. S. B. PADIAR: Definitely he can. Nothing stands in his way. Our main difficulty is some of the basic subjects are not given too much of stress. And similarly he is unaware of the pharmacology side of the present day new modern drugs about which he is enamoured and he goes on prescribing. So there lies the fault. whereas an MBBS doctor possesses sufficient background of these new modern drugs and he attaches more significance to homoeopathy from his own experience because he has found that his own system of medicine is found useless. He finds attraction to study more of the pharmacological aspects and side and physiological then he makes a prescription, not in the casual way that a homoeopath does if he were allowed to practise allopathy.

DR. LAXMINARAYAN PANDEYA: That difference has to be taken into consideration.

SHRI POPATLAL M. JOSHI: When you say people that are more elemental, how should they be judged whether they have elementary knowledge or no knowledge? Is it by their body or buildings or how? Is the career chosen for the love of medicine or for money? I think you are not an exception-homoeopaths are not exceptions to this-after all, they have taken to homoeopathy because they want to earn something, they want to earn some extra money, they want something more and they want to go in for a career in this. In the present circumstances therefore how do you say that those people should be debarred or there should be some restriction that they should not get a chance? How do you explain it?

DR. S. B. PADIAR: That question leads me back to the old question of reputation, provided the homoeopath makes an earnest attempt to study it. Only then can we say he sufficiently possesses the kuowledge to use that and that knowledge is highly essential for him because most

of the cases that will come to him must have been spoiled cases from the allopath. He must have the knowledge of the medicines that the allopaths have been using and the way they have been treating these cases, how he can antidote them. If he is in a position to know that, I say he is qualified. But most of us are not. That is our difficulty. On the other hand when an allopath realises that his medicines have not been effective which he does from his own experience and application, he will naturally stick on with more faith to homoeopathy. That is what has been seen from history. There is the other side also. Now the Hahnemann College was there. Quite a number of other institutions were there. But today if you ask me what their state of affairs is, I must say it is a very pitiable state. Most of them started with the earnest hope that they would bring up the system. But finally it came down to allopathy only. We have to prevent such a catastrophe and do everything within our capacity to maintain the efficacy of the system.

SHRI POPATLAL M. JOSHI: When you are eulogising all the while so much, being an allopath yourself, at least you have to concur with me when I say that a doctor practising in a village, for 20 years or so, if he is not to prescribe medicines, do you think he is a greater quack than a homoeopath practising there?

DR. S. B. PADIAR: No, because our forefathers were far more given to medicine and I must say. more than we were practically because their practice was limited. They never used to promise cures for every disease. They had some knowledge about some conditions and people used to go to them. They used to prescribe medicines only for such conditions about which they knew. There were cases when they were helpless and they had to say They had the largeso frankly.

heartedness to tell the patients that they could not do anything. But that is not the trend as we find today.

SHRI K. RAMAKRISHNA REDDY: There is an MBBS doctor who has also passed a diploma, etc. as R.M.P. Is it then necessary for him that he should opt for any one of the two systems?

DR. S. B. PADIAR: That depends upon how he takes to it. I also know quite a few allopaths who have been a failure in their practice and on account of depression they must have taken to homoeopathy. Quite a few of them come for appointments in the homoeopathy colleges, not because they. 'really wanted it. But even then we homoeopaths have got to be on our guard to see that the students are given proper directions in the proper homoeopathy way. So naturally we keep off from the clinical subjects, etc. and we give them only the basic fundamentals like physiology anatomy and the pathological aspects involved, where they get an intensive course of study.

SHRI K. RAMAKRISHNA REDDY: My straight question was whether he should opt for allopathy or homoeopathy? Yes or not?

DR. S. B. PADIAR: That choice must be given to the man. It may not be advisable for homoeopaths to allow allopathy to be mixed or vice versa.

SHRI K. RAMAKRISHNA REDDY: If he opts for allopathy and then also practises homoeopathy, should he be withdrawn from the

DR. S. B. PADIAR: Provided he gets the basic qualification in both. because, there are instances where he is an MBBS...

CHAIRMAN: The question has been answered already. He said "if he is qualified in the other system..." DR. S. B. PADIAR: There are cases like that in Kerala. An MBBS doctor is there. He has taken his degree from foreign countries. He is also an Ayurvedic qualified man. He passed from the Kerala University itself. Actually he has studied homoeopathy. So nothing can prevent him from practising it. No legislation can be introduced against that because he is qualified in all.

SHRI SASANKASEKHAR SAN-YAL: There is one humble but puzzling question by me. Assuming that the diagnosis has been correct, and all other things have been done and the doctor prescribes a particular medicine and applies that. But that does not produce the desired effect. But when he applies the same medicine produced from another drug factory, it produces the desired effect. How do you explain this discrepancy and what is the remedy for that?

DR. S. B. PADIAR: For that the first thing that we will have to do is to introduce some legislation by which the manufacture of medicines is controlled to a standard quality, because this difficulty comes not only in allopathy, even in homoeopathy it is there. We get a drug from a particular factory and it may not be effective while the same drug obtained from another factory may be very effective. However, the main thing is the man must know the right drug to prescribe. Sometimes he may be wrong in his selection of medicine.

SHRI SASANKASEKHAR SAN-YAL: Don't you see that the same medicine, if it is prepared in Kerala, does not produce the same results in West Bengal as the medicine produced in West Bengal itself? Similarly, the climatic conditions also vary.

DR. S. B. PADIAR: That depends upon the pharmacological aspects, alkaloid contents, etc. SHRI SASANKASEKHAR SAN-YAL: Don't you see that it is desirable having different research centres and druggists' centres in different States according to the climatic conditions?

DR. S. B. PADIAR: It will be always a welcome feature provided research is directed in the proper way.

SHRI POPATLAL M. JOSHI: Patients go to a doctor in a village. He is an MBBS doctor. He does not take any pathological or radiological test. He just sees the hand and he diagnoses something and prescribes some medicine. But when a homoeopath also does the same thing by intution or by experience, don't you think the way differs from the way the allopath does?

DR. S. B. PADIAR: The difference comes in the understanding. One man may understand the case in a particular way and another man may understand it in quite a different way. I have my own judgment. Three people understand the same case in three different ways. That depends upon the observation, the knowledge and the assessment.

DR. S. B. PADIAR: Now the present effort, I think, is to encourage, uplift and make the system more and more popular. We do not want to stand in the way of the constitutional rights of an individual. Whether he is justified, whether he can give a particular drug, all these things fall within the rights of individuals. The patient also has his own right. He can choose any man he likes; nothing is there to prevent him from choosing any man. He may go to a qualified man, he may go to a quack who may. Give him something and he feels happy. Our main purpose I believe is to evolve some effective methods by which we can raise the general standards, uplift the system and place it on a sound footing.

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DR. JUGAL KISHORE: I think the point made by the hon. Member is not well understood. The idea he wanted to emphasise was that a graduate allopath practising medicine without all the paraphernalia of diagnosis is as good or as bad as the homoeopath who depends only on signs and symptoms, He is also depending upon signs and symptoms in a way. It may be a case of cancer of the lungs and he may think that is tuberculosis and-prescribe it streptomycin. It is not going to help the patient. But one thing I want to make clear is that a homoeopath has got an edge over his allopath brother because for him Nature has given him another approach and sometimes he can bypass the use of these diagnostic apparatus. There may be indications for him to prescribe the correct remedy without his even knowing whether it is typhoid, or whether it is appendicitis or whether it is dysentery. The constitutional symptoms of the patient might lead him to the correct remedy he might be cured. But and unfortunately this advantage is not available to the allopathic doctor.

DR. S. B. PADIAR: Well, this is a fact. Very often the diagnosis made by the allopaths have gene wrong and we have been brought into the picture. We depend more on the application aspect of the drugs and on a study of the drug picture we find such and such is the condition But that again depends on how the individual has made use of the knowledge that is available. This is the edge which homoeopathy possesses over allopathy, and that is why I fell homoeopathy has withstood the onslaughts of allopathy so far.

CHAIRMAN: I would like to ask you one question. I have tried to understand your approach, that is, the approach of the homoeopaths, and I find that the distinction between the allopathic approach and the homoeopathic approach is that you try to treat the patient and you try to understand him as a human being and his reactions. If that is so your treatment becomes not only somatic but psychosomatic. Therefore in the curriculum that is being prescribed for the homoeopathic students would you not like to teach them something about human psychology? If that is going to be so very important, to understand the man, would you not like to do that because vast researches are going on in the psychological field?

DR. S. B. PADIAR: That is a question which requires careful consideration. We have got the principles in Homoeopathy and the psychological approach was supported by Hahnemann and others, Long before Hahnemann introduced that, this was what was suggested by Peri but it. was pooh-poohed by allopaths everywhere but today they have come tothat same psychosomatic approach. which we have been doing all along .. All the same to introduce psychology as a subject in the already crowded. surriculum would not be advisable but the elementary aspects may be. included.

CHAIRMAN: But that is very im--portant, is it not?

DR. S. B. PADIAR: No doubt it is very important and it will be a welcome addition, I have no doubt about: it.

DR. JUGAL KISHORE: I think this has been a very relevant point raised. by Chairman regarding the need of giving the elements of psychology tothe students. Don't give them Degree in psychology but basic elements of psychology. From our homoeopathic point of view also, there are sometimes mental cases and if we were toprescribe remedies for those mental cases without a knowledge of psychology of the patient we are likely to go wrong. For example, a person who is a maniac wants to commit suicide but his symptoms are worse between four and eight P.M. At that he complains also of severe distension of

abdomen. In such cases these mental symptoms are not so much important, what is needed is to give greater evaluation to the flatulence between 4 and 8. That is a technical point. So it is necessary to know which symptom is to be properly evaluated and in what way and we must know what is the normal human psychology. I think therefore there is need in our colleges to give at least a few lectures on psychiatry what is schizophrenia, what is depression and such other things.

DR. S. B. PADIAR: Of course this is highly essential.

SHRI N. P. CHAUDHARI: You have been practising for 30 years or more. I want to ask your opinion. It is said about homoeopathy that it is not an advanced science; not only that but that it is used only in undeveloped countries like Africa, India , and others. What is your opinion about this?

DR. S. B. PADIAR: During my :35 years of practice I have handled all sorts of cases including schizophrenia of very virulent variety, of eminent personalities like naval officers. There was an instance. You must have heard about Capt. Mulla. His wife was my patient. She was suffering from schizophrenia. I handled the case. A case was pending against her when she jumped into the backwaters. She came to me for consultation. She had thrown her child into the backwaters. Some of the people had come and rescued her and she was kept un- der treatment, Because I had taken pains to go deep into the psychological aspects and study what schizophrenia is I was able to handle the case. I have gone through a number of works both allopathic and homoeopathic on this subject and because I happened to possess so much knowledge I could handle that case. Of course it will not be possible to have an extensive course of study in the ins-'titutions but just the clements of it **can** be given.

DR. LAXMINARAYAN PANDEYA: There is provision for institutionally trained people to get registration and also for people with experience. Do you think that this should be continued for a few years more or should it be checked?

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DR. S. B. PADIAR: That clause is already there and there we will have to make a distinction. People come up saying that they have five years of practice or experience. In Kerala it is for the Tehsildar of a village to certify that such and such a person has been in practice. And people who are already in some other professions get themselves certified for this also and that way teachers and business people have applied and some of them have been registered. When we are introducing regular courses of study spread over 41 years will this not act in a deterrent way? Will it not affect them if we encourage this type of recognition based on 4, 5 or 6 years? It will have a psychologically deterrent effect on the students and something will have to be done whereby we should look into the bona fides of such persons so that we can eliminate such of those who really do not have anything to do with the profession. It should be a matter of close scrutiny.

CHAIRMAN: That is all, I think.

SHRI N. P. CHAUDHARI: We are really very glad to have a very successful homoeopathic ' practitioner among us as a witness. On behalf of the hon. Chairman and Members of this Joint Select Committee I extend our deep sense of gratitude to you for the valuable information you have put forth before this Committee, I can assure you that the evidence that you have tendered before us will be fully taken into consideration when the Bill is considered by this Committee and I am confident that the views that you have expressed before us will go a long way to make this Bill perfect. I thank you once again

DR. S. B. PADIYAR: I would like to offer my thanks for giving me this opportunity to place my views before the Committee and we are extremely grateful to the Committee. I would also give you this assurance that all that has transpired here will be kept confidential and will not be passed on outside. I thank you all once again.

[The witness then withdrew]

The Witness Dr. M. K. Sivaraman, Principal, Homoeo Medical College, Chirakara Palace, Pappanamcode, Trivandrum was called in.

CHAIRMAN: Dr. Sivaraman is the Principal of the College which we visited the other day. Whatever you say here and whatever we discuss here should be treated as confidential. It should not be divulged to the press or shared with other people. Now, will you please say something about the Bill and any other points that you want to raise?

WITNESS: Regarding the Title of the Bill I have a suggestion to make. It is called "The Homoeopathy Central Council Bill, 1971". The title should be changed to read: The Indian Homoeopathy Medical Council. In the allopathic system of medicine, it is called the Indian Medical Council. Regarding Ayurveda it is called the Indian Council of Indigenous Medicines. For Homoeopathy it should be called the Indian Homoeopathy Medical Council.

CHAIRMAN: We shall consider that.

WITNESS: Regarding the qualifications of the members who are elected to the Council, they should possess a diploma or degree after attending a minimum of four-year course. According to the Bill it is written that a member can be elected if he is having the minimum qualification which is prescribed in the Second Schedule. In the Second Schedule there are diplomas having less than a four-year course. The Indian Homoeopathy Medical Council's membership should be given to a person having a minimum of four-year diploma course or a degree course.

SHRI MAN SINGH VARMA: Please give reference to the clause concerned

WITNESS: Regarding eligibility of a candidate to become a member, he should possess experience of five years of standing practice after registration. He should possess a diploma or a degree. A candidate who has come out of a college and has obtained a degree or diploma should not become eligible immediately. He should have at least five years' standing practice. After getting the diploma, he should practise for five years and then only he should be eligible to become a member of the Council.

Then there should be a central research institute for homoeopathy. It should be a separate central research institute. They should look after research. They should look after the training of teachers of homoeopathic colleges and give refresher courses to homoeopathic physicians.

CHAIRMAN: Next point

WITNESS: Regarding opening colleges, various States open a number of colleges. If colleges come up in this way, there will be the problem of unamong homoeopathic employment physicians. Admission to these colleges should be limited. The admission should be restricted by the Council every year. Then, there is the power with the Government for nominating members to the Council. These nominated members should also possess the minimum qualification that is prescribed for membership. In the case of States which have homoeopathic colleges representation to the colleges or the teaching staff of the colleges is not mentioned in the Bill. The teaching staff of the colleges should be given representation on the Council.

SHRI T. G. DESHMUKH: In what manner?

WITNESS: There should be a seat for all the colleges of a State. It would be impossible to give representation to each and every college. At least one seat for each State to represent the interests of the teachers of colleges should be given.

DR. LAXMINARAYAN PANDEYA: If there are 400 colleges in our country, should they all be given representation?

WITNESS: I said the opening of new colleges should be restricted.

CHAIRMAN: Do you not think in terms of having an electoral college? It should consist of all the homoeopathic colleges in a State. They should elect a certain number of representatives, not that every institute gets a representative.

WITNESS: All the colleges of a State should elect at least one member to the Council.

DR. LAXMINARAYAN PANDEYA: One member from each State

CHAIRMAN: That is reasonable.

WITNESS: Regarding membership, it is written here one member for every 10,000 registered medicial practioners. If such a pattern is adopted, certain States will not get their reasonable membership. A State will get one member, while another State will get more than one. A State having, only ten or fifteen members will also get one member. This should be changed.

CHAIRMAN: One hundred is the minimum.

WITNESS: For the first ten thousand, there should be two members and for the subsequent ten thousand, there should be one member each. Up to 10,000 members, two members should be there. That is my suggestion. CHAIRMAN: Any other general observations?

WITNESS: No, Sir.

SHRI K. RAMAKRISHNA REDDY: (You are suggesting restrictions on (the opening of new colleges. How do you expect to promote homoeopathy if there are not more and more colleges? You should have more and more colleges to promote the science of homoeopathy. What is your opinion?

WITNESS: I am suggesting the restriction of opening of new colleges in this State. There are three colleges. and they were started after 1958. Up to this time about 1,600 qualified homoeopathic medical practitioners have come out of the colleges, but the State is not in a position to provide jobs for all these persons. Homoeopathic medicines are cheap and the treatment itself is cheap, but the homoeopathic doctors should not be cheap. If a large number of doctors come out of the colleges, they will become cheap and their standard of practice will be low. Therefore, the opening of new colleges should be restriced. The number of seats every year should be limited, so that only properly qualified homoeopathic doctors are brought out from the colleges. Only good students should be admitted to the colleges. Now if 100 students apply for admission, all of them will be admitted. The existence of the college itself is based on the income from the students. They do not care for the quality of the students. If the seats are limited and the number of colleges is limited we can get very good students. After the training of these every good students, we will be able to bring out the best doctors in homoeopathy. That is my opinion.

CHAIRMAN: Your emphasis is more on quality than on quantity.

WITNESS: Yes.

SHRI K. RAMAKRISHNA REDDY: Is it not advisable that one homoeopathic college should be opened in each and every State? Every State should have one college at least.

WITNESS: It is better to open a Government college in every State. There are private colleges, but I think most of them are not maintaining proper standard. If a Government college is started it will introduce a proper standard. The college will have library and laboratory facilities that are required for a college. In the case of private colleges, they will build them up only according to their financial considerations.

SHRI K. RAMAKRISHNA REDDY: At present there are a number of registered redical practitioners who are experienced, but they are not fully educationally qualified. By merely having training for six months they become RMFs. Do you suggest that there should be some restriction on their practice? Do you advise any refresher courses for them?

WITNESS: It is a problem regarding homoeopathy. As their practice was not restricted so many homoeopathic practioners have come out throughout the State and they are practising homoeopathy only as a means of livelihood. They do not care for the status and standard of homoeopathy. They want to practise homoeopathy to meet their daily needs. Those who have got a few years experience, there or four years' practice, they can practise homoeopathy, but they cannot scientifically do so. After the introduction of this Act a man who comes out of an institution and practises homoeopathy 🛩 will practise it in a scientific manner. I think it is better to educate them in an institution.

SHRI K. RAMAKRISHNA REDDY: I do agree with your opinion that after the introduction of this Act only qualified hands will practise. But what about those registered practitioners who are already working today? What action do you suggest against them?

WITNESS: There is no question of a diploma or a degree for them since they are already empowered by virtue of their registration to practise as such.

SHRI K. RAMAKRISHNA REDDY: As per our knowledge in some States such practitioners have been given certification against some consideration and they are recognised as R.M.P. How to check them and how to enhance their knowledge?

WITNESS: A person with five or ten years experience but without any institutional qualification should be allowed to continue practice but he should be given some fundamental education of homoeopathy through a condensed course and allow them to sit for an examination

DR. LAXMINARAYAN PANDEYA: Do you suggest a refresher's course to train such people?

WITNESS: Such people should be asked to obtain a certificate from an authority and then alone they should be allowed to practise. It should not be necessary for these people to undergo a refresher's course. Even if they are given a refresher's course, an examination should not be insisted upon them as the examination is conducted in colleges. They may be examined for their fundamental knowledge in Homoeopathy and their knowledge in using the instruments required for practice.

SHRI K. RAMAKRISHNA REDDY: Do you suggest some laboratory and a library for the homoeopathic practitioner?

WITNESS: In absence of any specific standard this is a problem. But in order to practise homoeopathy in a reasonable manner a physician should possess a standard library consisting of at least 200 books. The possession of instruments like a stathescope or a thermometer or some such instruments which help in diagnosis should be insisted upon. Pocket light, a torch, a pair of scissors are absolutely necessary for a homoeopathic practitioner.

SHRI K. RAMAKRISHNA REDDY: Can you suggest any guidelines in that respect or what action do you suggest against defaulters

WITNESS: Such people also should be accommodated; they should be encouraged to use these things otherwise they will be a failure. The man who diagnosis the disease without proper instruments will be at a disadvantage as compared to the one who has all these facilities. Unqualified practitioners may be given refresher course.

SHRI K. RAMAKRISHNA REDDY: Do you suggest a penalty against a homoeopath who practises allopathy?

WITNESS: If one is a homoeopath it does not mean that he should not be allowed to practise other systems of medicine. But a homoeopathy should stick to homoeopathic system. One who practises other systems also is doing against the medical ethics and should be prosecuted because allopathic and ayurvedic systems of medicine are definitely under certain other principles which a homoeopathic physician does not know. The man who is actually in those fields should alone be allowed to practise them. That is my opinion,

SHRI MAN SINGH VARMA: Doctor, you just stated that a diploma holder should have at least five years experience before he is eligible for registration. What about the doctors who have not been trained by any institution? What should be the eligibility for them? WITNESS: He should possess the minimum qualification, diploma or degree with a minimum of four years coaching. How can a man by mere experience become a member of the Council? Representation in the Central Council is restricted for unqualified.

SHRI MAN SINGH VARMA: There are certain very famous and popular doctors who have been practising for the last 25 years but they do not possess any degree. They are the torch bearers of homoeopathy. What do you suggest about them?

WITNESS: They should be debarred from being a member of the council.

SHRI CHIRANJIB JHA: Do you think it is according to the theory of 'similia similibus curantur.'

WITNESS: We are following a syllabus approved by the Government, and according to this syllabus we ' have to teach about 40 homoeopathic drugs for the D.H.M.S. course together with 12 Tissue remedies If we do not follow the syllabus the diploma will not be recognised.

SHRI CHIRANJIB JHA: Mr. Principal, you teach your students biochemic medicines?

WITNESS: Yes.

CHAIRMAN: Do you think that this Bill which is named as the Homoeopathy Central Council Bill should also be prescribed as the Homoeopathy and Biochemic Central Bill?

WITNESS: Biochemic Medicine is a supplementary science to homoeopathy. Suppose a disease is produced by gross deficiency of some absolutely essential material for the body. There is no harm in giving harmless tissue remedies as substitute to homoeopathic medicines. Actually it should not be considered as medicine but as food. They act better than other food materials. They do not do any harm. Tissue remedies are used not only according to the symptoms but they are used in deficiency also.

SHRI MUHAMMED KHUDA BUKHSH: From whatever I have been able to understand by joining this Committee, I feel homoeopathy is based on the theory of the law of medicines being able to produce on a healthy body the symptoms that they are supposed to sure. Taking that into account, would you still suggest that these tissue remedies are homoeopathic in their application?

WITNESS: I told you that the tissue remedies are used not as medicines by me but as substitutes in case of deficiency in food. A homoeopathic physician observing the symptoms produced by the patient would suggest a Homoeopathic medicine. Suppose that medicine seems to be acting in a manner which is not satisfactory to the physician he will see whether there is some deficiency also in the patient. If there is deficiency that deficiency should be corrected by means of Schussler tissues,

DR. JUGAL KISHORE: The hon'ble Member has raised a very pertinent point. The so-called tissue remedies are being used as homoeopathic remedies because certain provisions have been made and they can be prescribed. directly as homoeopathic medicine. Apart from that Schussler said that if there is deficiency in the body and there are certain indications such as thick and yellow discharges in that condition you can give Kali Phos. We have come to the conclusion that the homoeopathic indications are also the same for any person suffering from thick yellow, tough discharges biochemic medicine does work. We find actually indications given by him are very much similar to the homoeopathic Indications.

DR. SANKATA PRASAD: I would like to know whether a homoeopathy practitioner should be allowed to use some of the allopathic drugs in prescribing medicines for his patients, such as, glucose, saline water, etc.

WITNESS: Regarding saline, glucose or such other substitutes that are used by the homoeopathy physicians, the method of application of these things should be studied by the homoeopathy physicians. I do not think that the saline, glucose or such other substitutes are allopathic. They are things that are absolutely necessary for the body in the case of dehydration. Supposing the homoeopath is treating his patients with homoeopathy alone, the cure of the case will be slow. But if he is able to substitute this saline giucose, or similar substance, that may not produce any harmful effects on the medicinal effect, that substitute should be used. by the homoeopathy physician. I do not think that the homoeopaths should use only the homoeopathy medicines. A homoeopath should apply his own knowledge according to his own intelligence, his own way of approach . to the case of the patient. This is my firm opinion Saline glucose, is not allopathic. X-Ray i_S not allopathic. Examining blood is not allopathic. Examining urine is not allopathic. A homoeopath can examine urine blood, sputum. He can read the X-Ray photos. He too should use all these things. He should be equipped with all these. types of modern things.

SHRI MAN SINGH VARMA: What is your opinion about the use of vitamines B Complex B1 B12? They are prepared by the allopathy system of medicine.

WITNESS. With regard to vitamin B1 or B2 or any vitamin, the first thing is there are diseases that are produced by the deficiency of vitamins B1, B2 or such other vitamins can be supplied without injection according to the homoeopathy principles. The medicines can be used without.

giving the least harm. It should not make any harmful effect on the patient. There are processes by which the vitamins can be given without injections. One may ask: What is your opinion regarding the administration of vitamin B? It is not necesrsary that vitamin B or A or C should be given in injections. Deficiency of vitamins is produced as a result of malnutrition or some other condition in which he is put. That can be subs-"tituted if the medicine is given in the form of vitamin itself. For the rescue of the patient it should be given in the form of vitamin. If a homoeopathy physician is able to cure the patient by substituting food materials containing sufficient vitamins, that is the best thing.

SHRI MUHAMMED KHUDA BUKHSH: The discussion is becoming extremely interesting. How does one potentise vitamins? The theory of homoeopathy is based on potency and potentisation. How does one potentise vitamins?

WITNESS: Regarding the potentisation of vitamins, certain things are produced by vitamin deficiency. We have not gone through the potentisation of vitamins so far.

SHRI MAN SINGH VARMA: On "behalf of the Chairman and the Members of the Committee I thank you very much for the trouble taken by you in coming over here and giving your views. Actually we have been examining you for the last two days. Your institution was the first we visited and the Committee has been very much benefited by that visit and by your suggestions here. I assure on behalf of this Committee that we will take into consideration all the suggestions and comments made by you I once again thank you very much.

WITNESS: Thank you all.

[The witness then withdrew]

The Witness (Dr. M. Kutumbarao, Principal & Superintendent, Dr. Gururaju Government Homoeopathic, Medical College & Hospital Gudiwada, Andhra Pradesh) was called in.

CHAIRMAN: You are welcome to this meeting. Please introduce yourself.

WITNESS: I am Dr. M. Kutumbarao, M.B.B.S. from Andhra University and D.H.M. from Gururaju Government College of Gudiwada. I am the Principal of the Gururaju Government Homoeopathic College at Gudiwada, Andhra Pradesh. I am the Superintendent of the Government Homoeopathic Hospital attached to the College. I am the honorary Homoeopathic Physician to the President of India I am a member of the Homoeopathic Advisory Committee of the Government of India. I am a member of the Scientific Advisory Committee and the Board. I am Adviser in Homoeopathy to the Government of Andhra Pradesh.

I have great pleasure in being present before this august Committee and I thank all honourable Members and the Chairman of this Committee for giving me this pleasant opportunity to be present before this august Committee.

CHAIRMAN: I may at the outset inform you that the proceedings of this Committee should be treated as confidential till the report of this Committee is laid before both Houses of Parliament.

Now, you may like to say something in the beginning in addition to what you have already submitted.

WITNESS: In addition to the points that I have already submitted, I would like to suggest these things: It is said in the Bill, "One member from the faculty or from the....." As is already known to the honourable Chairman and the Members, I think there is one faculty at present at the Kan-

pur University. I feel it is doubtful as to how much time it will take to get faculties in every State or in every University. And Until we get sufficient number of faculties in our country I submit that instead of 'faculties', one member from every recognised college of each State may be taken on the body of this Coundil-until sufficient number of faculties and universities are formed. And if the Committee feels that the number may become a little too big, one member from all recognised colleges each State may be taken. We may have five zones in the country and one fiom each may be taken, one member from every elected zone may be taken instead of from faculties. Another point I may like to say is there is much discussion going on in the country regarding A class and B class practitioners. And it may not be out of place if I say that the time has come for every science that certain qualifications are to be demanded both by the Government and by the public of our country. Now I may venture to say that there are not sufficient number of colleges in our country and the few colleges that are there in our country are not up to the required standard. They require a lot of support and encouragement both from the State and the Central Governments. Until that purpose is achieved, the registered homoeopathic practitioners should also be given their due place. With that view I submit that those people who have spent about 41 years in studying homoeopathy, those who know the basic subjects like preclinical or parachemical and clinical subjects may also be given encouragement, be given due place. As far as practice is concerned, all the registered practitioners should be on a par r with the allopathy qualified doctors of the same grade. Regarding the formation of the councils or the boards or other things, I may submit that those who come out of the institutions may be given more representation, at least of 75 per cent, on the bodies of the council that are to be elected or nominated, whatever it is. 1648 RS-19.

Now, if the Chairman and the honourable Members are pleased to ask any questions, I shall be happy to answer them.

SHRI N. P. CHAUDHARI: Doctor, I think you are M.B.B.S.?

WITNESS: Yes.

SHRI N. P. CHAUDHARI: Are you vet practising?

WITNESS: Yes, I am practising.

SHRI N. P. CHAUDHARI: Which 'pathy' are you "practising?

WITNESS: I am practising the homoeopathic system.

SHRI N. P. CHAUDHARI: No allopathy?

WITNESS: No sir.

SHRI N. P. CHAUDHARI: May I know the reason for your shifting from allopathy to homoeopathy?

WITNESS: The first thing is my father, the founder of the college, Dr. Gururaju, was also a graduate in allopathic system. He developed affinity towards homoeopathy, get postgraduate degree and started this college. When I was a student in the Andhra Medical College I have seen a number of cases tackled by him and many diseases which did not respond to the so-called modern system of medicine being successfully tackled by the homoeopathic system. I have observed all this with curiosity and even when I was a student I felt convinced that this homoeopathic system is based on sound principles. That does not mean that I belittle the other system. I only feel that this system is not only the best system but also it appeals to our intellect.

Another thing is in the allopathic system, especially on the medical side there is no doubt there is instant relief like pain and other sufferings but

real cure and eradication of the symptoms completely is very difficult to achieve with the help of allopathic therapeutics, whereas the homoeopathic system aims at complete cure. It has got a wide field for the display of one's intellect and talents. Take for example a case of typhoid. If you ask the allopathic practitioner which is the drug of choice to be adminishe will say chloromycetin tered. There is no other choice and there is no variation from individual to individual except in the matter of dosage. repetition and whether it should be given with vitamin B complex or vitamin C and so on and so forth, whereas in the homoeopathic system if you ask what is the drug for typhoid he will say there are no drugs for diseases but there are only drugs for diseased people. We do not treat typhoid but we treat the person suffering from typhoid. Hon. Members may esk me what is the difference between treating typhoid and people suffering from typhoid. When two persons suffer from the same disease their reactions and their manifestations will not be the same. When they are not same naturally you cannot administer the same drug in both cases. In certain typhoid cases the brain may be affected more, the man may become delirious while in another case the abdominal symptoms may be more predominant his abdomen may get bloated and so on. Homoeopathy takes into account all these factors and sees which part of the body is reacting in what way and then the necessary drug is administered.

Then the most valuable part in the human body is the nervous system. It is because of man's nervous system and it functioning that man is differentiated from the animal and it is the more developed tissue. Once that is damaged there is very little scope for regeneration of that part and what we find is the result of the treatment by allopathic drugs on the diseases of the nervous system is not very encouraging. I may venture to submit

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to this august assembly that the results of the treatment by homoeopathic drugs on the nervous system are quite encouraging. The nervous system is so fine and so delicate and very often the allopathic drugs are so crude or materialistic that they cannot reach deep into the human economy but the homoeopathic drugs being so fine and so potentised, they go deep into the economy and stimulate the cells and promote regeneration and the nervous system is maintained intact. I myself have seen and many of the homoeopathic physicians are themselves surprised by the spectacular results achieved by the homoeopathic drugs. In the light of this basic philosophy it is but natural that we got a feeling that there is full scope for the display of individual talents in the treatment of diseases with the help of this system of medicine.

Another point I would like to submit in this connection is this. Many people ask us, where is surgery in homoeopathy. I may submit to this august Committee that wrong notions are prevailing regarding surgery. Many people think that surgery means using the knife as in the case of peptic ulcer, appendicitis piles, abscess and so on. They seem to think that unless the knife is applied it cannot be cured. I might draw your attention to the after-effects of the knife being used in many of the surgical cases. Such cases are being treated by homoeopathic therapeutics not only without surgical intervention but they are eradicated altogether. In cases of gastriculcer where operation is done you find there is no complete cure as such and the ulcer develops again and again recourse has to be had to knife. But we have treated a number of cases of this nature with homoeopathic drugs without aftereffects of any kind and at the same time keeping the part in tact. Nature has provided different organs in the body with a purpose and they are not just to be cut off and taken out by

the surgeon ever for trivial involvements. They have to be kept in tact without damage. You will find that when a child gets some sore threat the child is taken to the ENT specialist who removes the tonsils. Nature has given the tonsils for a purpose. They are the bodyguards they are the sentinels at the threat. What relief can you get by removing them completely? Homoeopathy brings about an improvement in the condition of the tonsils by mere administration of drugs and also keeps the part in tact.

One more point I would like to submit if I am not taking too much time of the hon Members.

CHAIRMAN: Yo_{U} go on. We want to be educated also.

WITNESS: I have met a number of persons who ask, have you cured any case of cancer? I would say here cancer can be cured by homoeopthy definitely if it is tackled in the early stages of the manifestation of the disease. I have seen a number of cases where after the application of radium, cobalt and deep X-ray the results of irradiation are more painful than the disease itself. If the patient comes forward in the early stages it can be definitely be cured, or at least the growth can be controlled from spreading. Even in advanced stages of the disease complications like haemorrhage, pain, etc. can be completely controlled by administering homoeopathic drugs whereas under the allopathic system if there is pain they only give morphia or pethidin which has got attendency to develop addiction and that becomes a problem. These are the benefits and advantages of the homoeopathic system and these are the reasons for my switching on to this system of medicine.

DR. JUGAL KISHORE: Dr. Rao, how old is the college? WITNESS: Our institution was started in 1945.

DR. JUGAL KISHORE: I think it is one of the best and the oldest institutions in our country?

WITNESS: It is one of the oldest I can say but it is delicate for me to say it is the best, I being a member of the college.

DR. JUGAL KISHORE: But you have only 2,000 books. For the last 25 years or more your college has been running and you have collected only 2,000 books and you are spending only Rs. 1,500. Does not the Government give you more money for books? I think an institution like this deserved a larger and more useful library.

WITNESS: I fully agree with you. I may say the same point was submitted by me to our Health Secretary who has promised sympathetic consideration to our needs and I think our Government will give more money for this purpose. I agree with you fully in this suggestion.

DR. JUGAL KISHORE: How much would you like to spend on library every year?

WITNESS: If the choice is mine I would like to spend Rs. 5,000 to Rs. 10,000 every year for the library. Library is more important than the buildings.

SHRI N. P. CHAUDHARI: Doctor, would you like the homoeopeths to practise allopathy or the allopaths to practise homoeopethy or would you penalise them?

WITNESS: It is not desirable for the homoeopath to think of prescribing Allopathic drugs.

SHRI N. P. CHAUDHARI: Even in case of emergencies?

that WITNESS: I may submit there is a wrong notion prevailing that homoeopaths are not good for emergency cases. I may submit that in cases where the pain is suspected to be in the heart before the pills met in the tip of the tongue of the patient the patient has had relief, similarly in the case of convulsions of the child the moment the drug was administered there has been instant relief. Hence I may submit the more severe the case the quicker is the action of the homoeopethic remedies. So it is not correct to think that homoeopathic drug action is very slow in acting. It is only in chronic and deep-seated affections that the homoeopathic drugs take time to act and that is because it is not palliation that is aimed at but it is total cure or eradiction of the disease. For example, suppose reheumatism is there. Allopathy gives you some medicine and the pain is no doubt palliated but it does not eradicate the disease. The pain reappears and the pattent suffers still. What is attempted through homoeopathy is not only relief from the suffering but complete eradication of the disease so that there is no recurrence of the disease. In chronic cases it may take some time but in other cases it acts quickly. Therefore a homoeopath who has get full and correct knowledge of homoeopathic therapeutics need not resort to the allopathic drugs even in emergencies.

SHRI N. P. CHAUDHARI: Would you suggest some penalties for the person qualified in allopathy practising homoeopathy?

WITNESS: If the person qualified in allopathy genuinely practises homoeopathy then penalty is a matter which has to be thought of very carefully before it is decided upon because unless one has got conviction no doctor would resort to the administration of drugs of which he does not know anything. Legally speaking it may appear to be all right to impose penalities but it has to be viewed from the practical angle. The allopath mav feel convinced that in certain cases for particular diseases homoeopathic drugs can be used with advantage. But merely because he uses homoeopathic drugs once or twice or in selected cases to penalise him I think " would be too much. But if without studying the system, without full knowledge of the system, without any qualification he practises homoeopathy then penalisation may be thought of. It is a matter of discretion. Suppose in some cases the allopathic drug is not giving the desired effect and if he resorts to the use of homoeopathic drugs he should not be penalised, I think.

SHRI N. P. CHAUDHARI: Even if he does not have any qualification in homoeopathy?

WITNESS: If in some particular instance it is used and if one is to be penalised for that then many of the people in our country would require to be penalised for many things.

DR. LAXMINARAYAN PANDEYA: In case of perforation in typhoid would you go for allopathic treatment or would you prefer to have homoeopathic treatment?

WITNESS: If there is perforation it means, the disease has gone to such an extent as to cause structural damage to the tissue. And in such cases there is no question of any drug being administered. It is a surgical intervention which is needed and that is I submit a purely mechanical intervention. Neither allopathic drugs nor homoeopathic drugs can be effective. In the case of a fracture of a bone, the part is immobilised after correcting the fracture and he is given some bandage. If you call it allopathic treatment, I beg to differ. It is only a mechanical intervention. No doubt such training is given more to the allopaths. Allopathic drugs are useless in a case of perforation.

SHRI K. RAMAKRISHNA REDDY: The Second Schedule deals with only one homoeopathic medical college, whereas there are three colleges in Andhra Pradesh. As the Adviser to the Government of Andhra Pradesh, have you recommended the other two cases also?

WITNESS: Yes, Sir. Our Directorate has recently addressed a letter to include these two colleges. Our Directorate has sanctioned it. They were recently taken over by the Government of Andhra Pradesh.

SHRI K. RAMAKRISHNA REDDY: About the degree course and diploma course, how much period do you suggest?

WITNESS: For the diploma course a duration of four years after SSLC or matriculation with six months housemanship. For the degree course it should be 5½ years after I.Sc. That is my genuine suggestion.

SHRI K. RAMAKRISHNA REDDY: In some State there are only twoyear d ploma courses. Should we continue that course?.

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WITNESS: I submit that encouragement may be given to such institutions to develop themselves into institutions giving a four-year diploma course. These colleges have been running for some years. The two-year course is absolutely insufficient. Hence they may be encouraged or helped to be able to award the four-year diploma course.

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SHRI MAN SINGH VARMA: Your reply was not clear to me about allopathy and homoeoptahy. You are well-versed in both. You are an MBBS and you are fully qualified in homoeopathy. If a patient comes to you, would you like to administer both the medicines, allopathic as well as homoeopathic at the same time? Or, would you like to administer only homoeopathy? WITNESS: I prefer to administer homoeopathic drugs. Not only that. I would discourage the administering of both the systems. I may explain it. Suppose there is a case of headache. In allopathy Saridon or some analgesic is given. In the case of homoeopathy the patient is asked where he feels the headache, whether it is in the front part or back part, left side or right side, etc. In the case of allopathy it is the administration of a pain-killer. It is unscientific to administer both systems of drugs on a single patient at the same time.

SHRI MAN SINGH VARMA: It means that you say categorically that a homoeopath should not be allowed to practise allopathy and vice versa.

WITNESS: Yes.

DR. LAXMINARAYAN PANDEYA: On behalf of the Chairman and Members of the Joint Committee I thank you for having come over here and for having given your valuable evidence which will be beneficial to us when we consider this Bill. I again thank you.

WITNESS: Thank you very much.

(The witness then withdrew).

[The witnesses (Shri E. N. Gopalakrishnan, Secretary-General, All Kerala Homoeo Medical Students Federation at A. H. Medical College, Kottayam—Student Representative, Kerala Govt. Homoeo Advisory Committee and Shri N. I. Babu, Union Chairman, Athurasramam Homoeopathic Medical College, Kottayam) were called in.]

CHAIRMAN: The evidence that is given by you should be treated as confidential and should not be divulged till it is laid on both Houses of. • Parliament.

Have you submitted any memorandum to the Committee? CHAIRMAN: But not to the Committee.

SHRI GOPALAKRISHNAN: Yesterday we gave a copy of our memorandum to you.

CHAIRMAN: Would you like to further explain any of the points contained in the memorandum?

SHRI GOPALAKRISHNAN: We have certain suggestions to make to the Committee. (1) (a) The name of "The Homoeopathy Central Council" should be changed to read "The Indian Homoeopathic Medical Council". (b) Both elected as well as nominated members of the Council should be qualified homoeopaths only and they should possess either a diploma or a degree in homoeopathy, after having undergone a minimum of 41 years training in a recognised homoeopathic college. (c) The ratio between thc nominated and elected members of the Council should be 3:10. (d) One seat should be allowed for a State where a minimum of 100 and a maximum of 5,000 practitioners are there in the register. In the proposed Homoeopathic Central Council Bill, 1971, it is mentioned as one seat for every 10,000 practitioners in a State. This should be changed as suggested The Central Council herein. (e) should have the power to control the courses of homoeopathy which are run by unauthorised private agencies. (f) There should be a uniform syllabus and curriculum of studies in homoeopathy throughout India. (2) The present diploma course should be converted into a degree course. No undergraduate course should. he allowed. (3) All the teaching institutions in homoeopathy should possess high standards. The standard and the staff pattern to be maintained by these institutions should be fixed by the Council and should be subject to recognition by the Council. (4) Midwifery and surgery should also be included in the syllabus with more stress on their homoeopathic therapeutics and those who pass. the degree course may be allowed to practise midwifery and minor surgery also. (5) Homoeopathy should ha included in the medical aid scheme for the employees of the State and Central Government officers and thecost of such treatment should be made reimbursable to those employees. (6) Homoeopathy should be included inthe ESI scheme for the benefit of employees of both the private and public sectors. (7) Due to the financial stringency, the State Governments become unable to utilise the amounts provided for by the Central Government for the improvement of homoeopathy and the allotted amounts thus become get lapsed. To prevent this at least the unutilised portion of the above Central aid for homoeopathy should be divided among the States in proportion to the amounts already spent by the State Governments alone and that amount should be restricted to be utilised solely for the purpose of improvement of homoeopathy. (8) A separate Directorate should be established in every State for homoeopathy. Financial aid should be given to the State Governments by the Central Government for this purpose. (9) All the private homoeo medical colthe leges should be brought under public sector and new institutions started, if any, should be in the public sector only, (10) A planned scheme should be adopted and implemented to provide at least one homoeo doctor for every 15,000 of population in India. (11) A 25-bedded hospital for every taluk, a 10-bed hospital for every district and a dispensary for every Panchayat, as already suggested, should be established all over India under a special scheme to be implemented within a time-limit of next ten years.

CHAIRMAN: Are you reading from the printed memorandum or from something else?

SHRI GOPALAKRISHNAN: From something else. In conclusion, we request the Committee to recommend tc the Central Government to allot a lump sum to the Government of Kerala for the taking over of the Athurasramam Homoeopathic Medical College of this State where only there is scope for the immediate starting of a degree course in homoeopathy. The Kerala University Senate has already formed a faculty for homoeopathy and for the implementation of the same it is absolutely essential that the Central Government should allot such a lump sum for the State. The Government of Kerala has also accepted the pro-

posal for sanctioning a separate Directorate for Homoeopathy where also financial stringency stands in the way.

SHRI E. N. GOPALAKRISHNAN: These are the suggestions as regards the Homeopathy Central Council Bill and the suggestions on behalf of the students of Kerala. I have nothing more to add.

DR. LAXMINARAYAN PANDEYA: You have suggested that the title should be changed. Why do you want to change the name?

SHRI E. N. GOPALAKRISHNAN: To the other two systems the word "Medical" is added. Homeopathy is also a branch of medicine. Therefore, the word "Medical" should be added to this name also. It should be "Indian Homeopathic Medical Council Bill". There is no other reason for this suggestion. There should be no discrimination.

SHRI K. RAMAKRISHNA REDDY: You have recommended that the system of homeopathy should be spread all over India. Every State should have the branch of Medical Council, every district should have a homeopathic hospital and every panchayat amiti should be given a dispensary. How many beds should be there in a dispensary?

SHRI E. N. GOPALAKRISHNAN: Dispensary does not mean in-patients.

SHRI K. RAMAKRISHNA REDDY: If an allopathic doctor practises homoeopathy would you prescribe any penalty for him? Should there be a penalty clause in the Bill?

SHRI E. N. GOPALAKRISHNAN: Fractice of homeopathic system should be permissible to an allopath.

SHRI K. RAMAKRISHNA REDDY: Do you mean to say there is no difference between the two systems?

SHRI E. N. GOPALAKRISHNAN: We welcome an allopath to practise homeopathy. But a homeopath should not practice allopathy because homoeopathy is beyond allopathy.

(Shrimati Purabi Mukhopadhayay in the Chair)

If a allopathic doctor who is qualified as such practises homoeopathy there is no harm. But an allopath, who does not possess the necessary qualification, doe_S so he should be panalised.

SHRI K. RAMAKRISHNA REDDY: There are lakhs of medical practitioners in the country who have no either institutional qualification or educational qualification but still they are practising on the basis of experience. What do you suggest in regard to them? Should they be allowed to continue?

CHAIRMAN: Mr. Reddy, may I very humbly suggest that since they are students they do not know the implication of both the sciences at this stage. We need not pursue that question.

DR. LAXMINARAYAN PANDEYA: You are the Secretary of the Federation. Can you give the exact number of students at present studying in the various colleges of Kerala in homeopathy?

SHRI E. N. GOPALAKRISHNA: 983 students in the three homeopathic medical colleges. We are not aware of the number in the allopathic colleges.

DR. LAXMINARAYAN PANDEYA: Is there only one Federation?

SHRI E. N. GOPALAKRISHNA: Yes, there is no other union uniting all the three students' unions of all the colleges. SHRI CHIRANJIB JHA: In Rajasthan certain railway employees have been permitted by the railway administration to practise homeopathy. They gain knowledge of the medicine through books. Do you recommend such people should be permitted to participate in the Council elections and called registered medical practitioners? How would you consider that in your set of things?

SHRI E. N. GOPALAKRISHNA: We oppose practice of homeopathy without requisite qualifications. That is our stand. In the State Medical Practitioners Bill also there is provision for giving registration to those have been practising doctors who without qualification on the basis of their experience. We are opposing that too. But there is one difficulty in the Malabar area. There are a number of doctors who have experience of about 15-20 years, who are not registered, whereas in the Travancore Cochin area there are doctors who have got practice of about 8 years or who have got registered in the Malabar area. There is no provision for giving registration to them. Now they have to be given one chance.

CHAIRMAN: If I may inorm the Members a comprehensive State Council Bill is in the offing. It will be brought before the Kerala Legislature to remove this discrepancy. These students cannot reply on the all-India basis.

Friends, on your behalf I have one very simple and straight request to the make to the representatives of students as the Chairman of this Committee. You know this is the first time that the Government of India has very seriously taken up the cause of homeopathy. Nowhere in India homeopaths at the moment enjoy the same status as allopaths. It is to your interest to see that homeopathy gets equal treatment from the Government of India. If homeopathy gets equal. meatment from the Government of India the States will have to follow the same pattern. Secondly, if the

Government of India allocates larger sums of money towards homeopathy that means sharing that money by the State Governments also. If you launch a movement, before the Government of India does that, well, it isentirely up to you, you can do that. As soon as we submit our report we take off our hands from the problem. Presently we are taking personal interest as M.Ps. for the cause of homeopathy. Your strike is your own stirke, not our strike, and it does not matter for this Committee whether you go on strike or not. But as a person who has some knowledge about the functioning of the Government the Government has its own pattern of administration, payment to teachers, maintenance of laboratories and libraries. That means incurring additional expenditure. The State Government will not be in a position to incur that additional expenditure until and unless the Government of India also pays substantially towards this head. Our new Health Minister, Dr. Chattopadhyaya and the Cabinet Minister, Shri Umashankar Dikshit, have told this Committee to go ahead with any kind of suggestion that is considered necessary for the improvement of homoeopathy. Homoeopaths will get equal treatment from the Government of India. Therefore, please do not do anything that would jeopardise the cause of homoeopathy. I would not mind if you do it six months after the Bill passes through the Legislature, when the Government of India in its own budget allocates money under the head of Homoeopathy. Until and unless the Government of India allocates that money no State Government will be able to give you what you want. I do not hold brief for the Government of Kerala. I speak on behalf of the Members of the Committee to protect the interest of the homeopaths because we want equal treatment to be met to the homeopaths in the country. So your launching of the movement iS premature, untimely, and that will be affecting the cause of homeopathy. The Health Minister was here. He has just left. The Indian Health

Minister brought all nis officers with him to get first hand information and could have visited your college but for the strike threat. Dr. Jugal Kishore is still here. We visited only one college. The Union Health Minister did not go with us. We were impressed. We requested him too to go with us but he went in the night. He had no other time to visit that college. That shows the interest that he is taking. Even we were asked not to go to your college because the students are on strike. Now, tell me whose interest is suffering? Naturally, your interest, because you are the future homeopaths. You are not casual students that you will be homeopaths today and tomorrow you will be something else. So I request you to reconsider. Hold a meeting of your Federation and tell them-you can mention my name also as the Chairman of this Committee and our Members' opinion also-that any kind of movement at this juncture will be critical. So long they were sleeping. You did not do anything. No student union of homeopathic college did anything against the Government of India's callous attitude. Now you are launching a movement when the Government of India has taken such active interest. That means you are again shelving the cause to cold storage.

SHRI E. N. GOPALAKRISHNAN: Madam, we are grateul to the Central Government for giving more interest than the State Governments for the improvement of homoeopathy. In the last Five Year Plan we know the Central Government allotted about Rs. 115 lakhs for the improvement of homoeopathy in the States. But this amount the States were not able to absorb for the improvement of homoeopathy. In the Plan Schemes prepared by the State Governments they are not able to allot more amounts for homoeopathy development. The Central Government gives only а proportionate amount to the State Governments. Thus the State Government lost the amount given by the. Central Government. In the current

Five Year Plan the Central Government has allotted about Rs. 49 lakhs to this State. This is the third year of the current Plan. But upto this time the State Government has been able to spend only Rs. 6 lakhs and the remaining Rs. 43 lakhs remain unspent. Though the Central Government is giving more consideration for the improvement of homoeopathy, the State Government is not giving more attention to this.

SHRI K. RAMAKRISHNA REDDY: On behalf of the Chairman and the Members of this Committee I extend my hearty thanks to you for having attended this meeting and given valuable suggestions which will surely be considered while formulating the final Bill.

SHRI E. N. GOPALAKRISHNAN: Once again I say we are grateful to Madam Chairman especially for her motherly attitude towards us and we will reconsider the requests made by her.

We thank all Members of the Committee.

[the witnesses then withdrew].

[The witnesses: (Dr. R. S. Pandiyan Principal, Athurashram Homoeopathic Medical College Kottayam, His Holiness Athuradasji, Founder and Patron. Athurashram Homoeopathic Medical College, Kottayam and Shri D. K. Gopalakrishna Panikar, Member, Board of Director of the Athurashram Medical College, Kottayam) were called in].

CHAIRMAN: You introduce yourselves to the Committee.

DR. R. S. PANDIYAN: I am R. S. Pandiyan, Principal of the A. H. Medical College, a premier homoeopathic institution in South India. To my right is His Holiness Athuradasji, Founder and Patron of the A. H. Medical College. He is the heart and soul of the institution looking after the welfare of the institution. To my left is D. K. Gopalakrishna Panikar, an eminent personality from Kottayam. He is the Member of the Board of Directors of the A. H. Medical College.

CHAIRMAN: This is the college that we visited yesterday. Now, k adly note that whatever evidence you tender here is to be treated as confidential and is not to be publicised.

If you have any observations to make either on the Bill or if you have any suggestions for its improvement you can make them.

DR. R. S. PANDIYAN: As it is the Bill envisages that with the registration of practitioners in the Central Register for Homoeopathy it will ensure that medicine is not practised by those who are not qualified in the system and those who practise observe a code of ethics in the profession. The Central Homoeopathic Council as well as the Central Register should only contain qualified persons who are having the recognised qualifications. For this particular purpose we want to bring about a change in the proposed Bill in Chapter II. Clause 3(a) says such number of members not exceeding five as may be determined by the Central Government in accordance with the provisions of the First Schedule from each State in which a State Register of Homoeopathy is maintained, to be elected from amongst themselves by persons enrolled OD that register as practitioners of Homoeopathy. Now we find that in the State Registers even unqualified practitioners being registered. If we are going to take Members from out of them for the Central Council then the very purpose of the Bill would be upset. That is why we propose that even from the State Registers only those who possess recognised medical qualifications should be allowed to stand for election and they alone should be in the Council. The other unfortunate people even though they have been enrolled in the Registers may be allowed to give their votes but they should not be allowed to contest seats for the Central Council... That is our suggestion regarding this: point.

Another suggestion we would liketo make is this. In Chapter IV in clause 21 some change is needed. Theclause says: The Central Council shall cause to be maintained in the prescribed manner, a register of practitioners of Homoeopathy to be known. as the Central Register of Homoeopathy which shall contain the namesof all persons who are for the time being enrolled on any State Register of Homoeopathy and who possess any of the recognised medical qualifications. If it is put in this way then qualified and unqualified practitioners: will be included in the Central Register also and that will upset the main purpose of the Bill. Because the main purpose is to ensure that medicine is not practised by those who are not qualified in the system. Therefore we would like the words in clause 21 "which shall contain the names of all persons who are for the time being enrolled on any State Register of Homoeopathy and" to be deleted so that only those who possess any of the recognised qualifications are taken in the Register. That is our contention

CHAIRMAN: Won't it be too harsh on others?

SHRI H. H. ATHURADASJI: Thereare different courses of study in different States. In some States the course is for two years, in some it is three years and we have here a four-year course and six months of internship and that comes to 41 years. It is not mentioned here that there will be any classification or categorisation according to the courses of study. Four and a half years course people, 3-year course people and 2-year course people, all should not be put in one category and registered. We have a similar institution for modern medicine and here also we should follow that same set-up as you have for the modern medicine and that alone will give this body standard and dignity. So far as these unqualified people are concerned, so far as the 2-year course people, 3-year course people and 41 year course people are concerned, in which category they are to be registered should be specified clearly.

CHAIRMAN: Have you got any other suggestion?

SHRI H. H. ATHURADASJI: That has to be decided by the Committee.

CHAIRMAN: Not only with regard to their suggestions but because we have visited the college, if Members have anything to ask about the college also they can do so.

SHRI MUHAMMED KHUDA BUKHSH: You will recall that those who represented included the Secretary of the Federation of the Kerala Students Union and also the students of your institution, and they complained that the funds obtained from Government have been diverted for other uses. Would you be pleased to throw some light on that complaint?

DR. R. S. PANDIYAN: Regarding that allegation I want to say that the grants received from the Government have been utilised fully for the improvement of the institution to get equipment etc. and utilisation certificates and vouchers fully audited by the auditors have been submitted to the State and Central Government every year. In this connection I would like to distribute to all the personages assembled here some of the pamphlets that we have brought here. High officials are here, the Assistant Director, the Honorary Adviser and they all know very well how this institution has been utilising the money. We have been giving regular reports every now and then to the State and Central Government and we cannot be accused on the basis of such allegations by the students.

SHRI POPATLAL M. JOSHI: In the elections to the Council you said only qualified persons should be allowed to participate. Am I right?

DR. R. S. PANDIYAN: Yes; in the Homoeopathic Medical Council that is proposed to be formed only qualified homoeopaths should be selected.

CHAIRMAN: And by 'qualified' you mean institutionally trained people?

DR. R. S. PANDIYAN: Yes; institutionally trained people with a fouryear course diploma or degree.

SHRI POPATLAL M. JOSHI: You know in the elections it is only unqualified people who rule the roost everywhere and not necessarily the qualified people. So how can you disqualify the unqualified people for the Council if the State Government and the Central Government and other public institutions can be managed by the people who are not qualified for anything?

DR. R. S. PANDIYAN: The ungualified persons may be allowed to practise. That is an entirely different question. Because of their experience and practice let them be taken into one category but these unqualified persons should not be allowed to chalk out the programme of study and measures for improvement of homoeopathy or to make rules and regulations for homoeopathy nor should they be put in Government hospitals. If they become members of the Council, automatically there is the likelihood of their action also being taken into consideration. That is why in order to keep the Council pure, as Swamiji has said, like the allopathic council, this Council also should contain only qualified persons.

SHRI K. RAMAKRISHNA REDDY: When you are not allowing them to contest for election, do you think that the RMPs should be debarred from practising?

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DR. PANDIAN: They should not be debarred from the right of practising. 'They can be allowed to practise.

SHRI K. RAMAKRISHNA REDDY: When they are practising, they have a right to contest also.

DR. PANDIAN: But they should not be allowed to contest in the elections.

CHAIRMAN: I think you have made your position clear.

SHRI MAN SINGH VARMA: You have just now stated that proper accounts are maintained and that ihe balance-sheets and statements of a.counts are sent to the State Government and other authorities. Did you ever try to put these accounts before your students and make them understand the whole position clearly?

SHRI H. H. ATHURADASJI: Please understand the occasion. They are on strike. They want to give some cause for their agitation and make some sensation among the students and the public. This is the only thing they can bring forth as an allegation. It is a false allegation.

SHRI MAN SINGH VARMA: My specific question is whether the students of your college are in the know of your accounts and the balancesheet.

SHRI H. H. ATHURADASJI: They have not aproached us for any clarification. If they want, they or anybody else can clarify it, scrutinise it.

SHRI GOPALAKRISHNA PANIK-KAR: I am running it as the Director of Administration. There is no clause saying that the students should be shown the balance-sheet or details of the day-to-day administration. As far as the accounts are concerned, we are keeping and maintaining correct registers and vouchers. In respect of administrative matters the students have no position as far as accounts are concerned. As for the maintenance of accounts and other things they can approach us in the proper way and then, if it is necessary, we will show it to them. We have shown all the accounts to the auditors and to the Government and there was no query. There was no allegation saying that the funds were being misapropriated \neg

SHRI N. G. GORAY: I would like to ask what sort of library or laboratory you are maintaining, how much you spend yearly over it and what are the future plans for its expansion.

DR. PANDIAN: In the library at present we have got 1294 books. Last year we had a Central Government grant for equipment and to purchase some books also.

SHRI N. G. GORAY: What was the amount of the grant?

DR. PANDIAN: Last year we got Rs. 91,000 for equipment as well as for library books.

SHRI N. G. GORAY: Did you get anything from the State Government for this particular purpose? My object in asking this question is I would like to know what percentage of the total assistance that you are getting from the Central Government is being spent on equipping the library and laboratory. I would like to know what percentage of the total amount that you are getting from the Central Government is being spent on laboratory equipment and library.

DR PANDIAN: Out of this sum of Rs. 91,000 seventy-five per cent was utilised for the equipment.

SHRI GOPALAKRISHNA PANIK-KAR: I will answer that. What we are getting from the Centre is 75 per cent of the expenditure and 25 per cent is being met by the Board, the Seva Sangam, which is maintaining it. If it is Rs. 100, we get Rs. 75 from the Central Government. Our investment is 25 per cent and the Central Government's grant or contribution is 75 per cent. SHRI N. G. GORAY: This is not my point. According to your own statement you get about a lakh of rupees from the Central Government. I want to know what is the percentage of this amount that you epent on equipping your library and laboratory which play a very important part so far as a college is concerned.

SHRI GOPALAKRISHNA PANIK-KAR: We have spent 25 per cent more than what has been granted to us. It comes to Rs. 91,000 plus 25 per cent.

SHRI N. G. GORAY: I think you will appreciate it yourself. You are spending 25 per cent more of the total expenditure. That is understood, but the purpose in asking this question is I would like to know whether the discontent among the students is due to this fact also that the money that should really go in on equipping the laboratory and library is not being spent.

SHRI ATHURADASJI: That is not correct. It is a false allegation with an ulterior motive.

SHRI N. G. GORAY: Where is the motive here? I am asking you how much you spent on the laboratory and library. Where is the motive? There is no motive at all.

H.H. ATHURADASJI: Whatever we got we have utilised and the audited accounts have been sent to the Government.

SHRI N. G. GORAY: Was this amount earmarked? Was this assistance from the Centre earmarked saying that it had to be spent on a particular cause?

SHRI GOPALAKRISHNA PANI-KAR: It was earmarked. We can vouchsafe here that the entire amount plus 25 per cent has been spent. Unfortunately all the facts have not been brought out here. SHRI N. G. GORAY: Again, I amm not saying that you are not using it. I want to know how much money has. been spent on the library.

SHRI GOPALAKRISHNA PANIK-KAR: Not a pie has been misuse or misspent.

CHAIRMAN: Dr. Jugal Kishore would explain it. There seems to be some confusion somewhere.

DR. JUGAL KISHORE: This grantin-aid was specifically meant for your laboratory equipment plus library . books and also for the tubewells. Now, the Members want to know how much you have spent on the laboratory, how much on books and how much on tubewells. You know the division.

CHAIRMAN: Have you got the break-up?

H. H. ATHURADASJI: Library Rs. 5,500. Altogether it is Rs. 1,22,000 Rs. 9,000 is the grant-in-aid plus_25 per cent. We have spent altogether Rs. 1,22,000.

SHRI N. G. GORAY: Last year you added to the library and laboratory equipment worth Rs. 1,22,000.

SHRI K. RAMAKRISHNA REDDY: Just now Swamiji said that the boys due to some reason or other went on strike and to justify it they have said misappropriation, etc. They have submitted a patition to the Chief Minister and the Health Minister. After that was it not your duty to explain why such a petition has been given and tell them, these are the accounts and convince them?

DR. PANDIAN: The strike was started recently. We had a talk with them. We explained the position, but they were bent on organising a strike. When their motive is going in an antagonist manner, is it possible to pacify them in the present situation? The student population requested the university authorities. You may have seen them yesterday. CHAIRMAN: I think we can leave the matter there.

MUHAMMED SHRI KHUDA BUKHSH: Since you have ruled that we may leave the matter there, I am afraid I cannot ask my question. We saw your laboratory and we saw the speciments that you are maintaining in your college. Swamiji said that a -sum of Rs. 1,22,000 has been spent on the laboratory and the speciments are being preserved in your physics laboratory or pathological laboratory. I should be given the figures as to exactly how much was spent on equipment, how much money has been spent on the collection of all those specimens, etc. Since you have not got the break-up and since the Chairman has ruled it out, I do not know what to say.

CHAIRMAN: I did not rule it out, but the question about the interpretation of the strike. That is subjective. I am interpreting it in a different way. Let us not waste our time on that

SHRI MUHAMMED KHUDA BUKHSH: Would you be kind enough to furnish to the relevant department of the Government the break-up of the sum that you obtained from the Government and the money spent? The complaint yesterday was and the Principal would remember it that the moneys have been diverted. In fact, misappropriated' was the word used by them.

SHRI MUHAMMED KHUDA BUKHSH: I do not know if it is relevant at this stage to use that particular word to this transaction. Even if there is evidence that moneys were diverted that might be a legitimate ground for the students to be aggriev. .ed.

H. H. ATHURADASJI: All the statements and list of equipments purchased have been sent to the Central Government already.

CHAIRMAN: Please excuse me, Swamiji. Yesterday our members visited your college. Your Principal and some of the representatives were also there. You knew that we were told about this so-called misappropriation or the dissatisfaction of the students about the accounts. We do not accept anybody's views as the last word until and unless we examine the whole thing. But was it not proper for you to come prepared to reply to this fundamental question which the students raised about the utilisation of the money. You should have brought at least the break-up of what you receive from the Government and what did you spend on which items. I think without wasting the time of the House now, you may submit it to Dr. Jugal Kishore and to the State Government. Dr. Jugal Kishore will receive it on our behalf and the State Government as a matter of their duty. Please send it for three consecutive years. (Interruption by H. H. Athuradasji) I think there is some misunderstanding about our attitude. We are the representatives of the people. We have to face every kind of situation. Why do you take it that once we have been told something our minds are closed and a particular party will be unfair to any particular party in their approach to you. I am sorry to point out that you tried to give us your answers as if in defence. You could have utilised this opportunity to explain your point of view. But you make the confusion more confounded.

On behalf of this Committee we thank you for the trouble you took in coming here. We wish all success for the college.

SHRI D. K. PANIKKAR: We will submit to you the break-up of the accounts for two years.

SHRI K. RAMAKRISHNA REDDY: We are leaving on the 1st November. You may send it by that date if you can.

(The witnesses withdrew)

(The Committee then adjourned)

Tuesday, the 31st October, 1972.

(AT TRIVANDRUM)

PRESENT

Rajya Sabha

. . . .

1. Shrimati Purabi Mukhopadhayay—Chairman,

MEMBERS

2. Shri Sasankasekhar Sanyal	6. Shri Sultan Singh
3. Shri Bhupinder Singh	7. Shri N. P. Chaudhari
4. Shri N. G. Goray	8. Shri T. G. Deshmukh
5. Shri Man Singh Varma	

Lok Sabha

9. Shri Ziaur Rahman Ansari	17. Shri Popatlal M. Joshi
10. Shri Vidya Dhar Bajpai	18. Shri B. R. Kavade
11. Shri Muhammed Khuda Bukhsh	19. Shri Prasannbhai Mehta
12. Shri A. M. Chellachemi	20. Shri N. Sreekantan Nair
13. Shri Hiralal Doda	21. Dr. Laxminarayan Pandeya
14. Shri Nageshwar Dwivedi	22. Shri K. Ramakrishna Reddy
15. Shri Madhuryya Haldar	23. Dr. Sankata Prasad
16. Shri Chiranjib Jha	

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING Dr. Jugal Kishore, Adviser in Homosopathy.

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary.

WITNESSES

(1) Representatives of the Registered Homoeopathic Medical Practitioners Association, Madras-

(i) Dr. G. Rajamannar, President.

(ii) Dr. G. I. Abraham, General Secretary.

(2) Representative of the Southern Railway Homosopathic Medical Practitioners Association, Tiruchirapalli—

Dr. K. M. Chidambaram, President.

(3) Dr. V. Sundara Varadhan, Madras.

(4) Dr. C. A. Rajagopalachari, Madras.

·(5) Dr. Kumari R. Bragam, Madras.

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[The witnesses Representatives of the Registered Homoeopathic Medical Practitioners' Association Madras were called in].

CHAIRMAN: At the outset I may inform you that whatever you say here is strictly confidential and everything of the proceedings of this Committee should be treated as strictly confidential till the report of this Committee is laid before both Houses of Parliament.

Now, you may tell us about your qualifications, how many members you have in your association, and all those details.

DR. G. RAJAMANNAR: We have already submitted a memorandum. We are all homoeopathy practitioners in Madras. One Dr. M.S.V. Rao, D.M.S., B.H.M.S., Allen Homoco College, organised and started the Registered Homoeopathic Medical Practitioners' Association in 1945. And this Association has been approaching the Government pressing that homoeopathy must be recognised by the Government. Some how at the beginning the Government was not prepared to constitute a Board and due recognition was not given. But as a temporary measure they empowered the Collectors of the districts to register practitioners who have put in more than five years of service as practitioners....

CHAIRMAN: What was the purpose of that kind of registration? For giving some licence?

DR. G. RAJAMANNAR: No, it is not exactly a licence. Since there was prohibition there, the Health Department objected to practitioners being supplied with dilutions. But a number of practitioners could practise without dilutions using globules, titrition, tissue remedies, etc. That was not the main reason; but the subsidiary reason,

SHRI MOHAMMED KHUDA BUKHSH: May I ask you if originally private practitioners were banned from practising and then subsequently the Government relented and asked the District Magistrates to register those practitioners who have already put in five years of practice?

DR. G. RAJAMANNAR: Not exactly banned. Unless they are registered as such, they would not get dilutions from the pharmacies. Only the registered practitioners could purchase dilution_s or tinctures. Unregistered practitioners used to get only globules, tissue remedies and all that. That is the difference.

CHAIRMAN: It is clear.

DR. G. RAJAMANNAR: Later on they restricted it to only two fluid ounces. Formerly we used to get more. So many of the members of our Association, since there was no-State Board organised and constituted by a legislative measure registered themselves in adjacent States like Andhra and Bihar. They had to go there because they had an ambition to get themselves registered on a State Board. So they got registered in Andhra where they constituted a Board in 1956. So also in Bihar they constituted a Board in 1954. So they got registered there. And only in: 1966 a Bill was moved on the floor of the Madras Legislature for constituting a Board. But in the meanwhile the 1967 elections turned the tables and another party came into power. They also brought forward a Bill like that in 1969 and while the Select Committee was meeting, there was a general election in 1971 and the Madras State opted also to hold general elections along with Parliamentary elections. Therefore, the new Bill was introduced and it has been passed in 1971. And now they have constituted the Council, but they have not yet begun to function. That is the position in Tamil Nadu. In Tamil Nadu there are more than a lakh of practitioners. I consider these practitioners have served the cause of homoeopathy by creating an impression on the public that they could prefer homoeopathic treatment to

allopathic treatment. In fact many cases in allopathy were failures. The patients used to come to homoeopathic practitioners. Even allopathic practitioners, when they could not treat their patients to their satisfaction, also learnt some rudiments of homoeopathy and administered homoeopathic medicines, though they are not registered as such, because they are M.B.B.S They also used homoeopathic medicines when in some cases allopathic treatment fails. In fact after treatment in hospitals, even after hospitalisation, many cases come to us. There were many such cases. So gradually people have started believing that, though it has not got all the glamour, publicity, advertisement, Government patronage, as the allopathy has got, homoeopathy will ultimately cure the cases because the efficacy of this system is gradually being realised by the people. Even with globules many practitioners are treating their patients. That service the homoeopaths have done in spite of Government's indifference and all that. Many people have done it with a religious zeal. They believe that because of his intuition Dr. Hahnemann founded this system of medicine himself having been the Dean of Leipzig Hospital. Last year I had been to Leipzig and also to the Hospital there. Homoeopathy is flourishing there. It is flourishing even in Germany, England and other places and it is very popular. In percentage the advance or the progress of homoeopathy is more in India than in those advanced countries though it has been recognised there, especially in Germany where it was in fact founded. That is the impression which I carried during my tours last year to the Western countries and Russia, Of course, they have systematized the whole thing in those countries. But we are still at this primary stage. We have to do a lot. I have gone through the Homoeopathy Central Council Bill. While emphasis is laid more on the regulation of practice, I would also request or appeal that something effective should be done for the pro-

motion of homoeopathy system of medicine in the larger interests of the nation, of this underdeveloped and poor country. In this country homoeopathy is a system which will be of immense use and utility to the vast masses of the people. Of course, it may be stated that surgical treatment is only the monopoly of allopathy. It is not so. Whereas in foreign countries only the qualified medical practitioners such as equal to M.B.B.S. undergo post-graduate study in homoeopathy, and get qualified in homoeopathy, here though there is no Government patronage people, due to the encouragement and inspiration of some well intentioned and wellmeaning persons and leaders, have taken to homoeopathy and they have tried to impress upon the people the efficacy of this system. Surgical treatment is not the monopoly of allopainy alone. If the homoeopaths get the proper training, they can also do it. The only thing is some people are diffident or are reluctant to begin, to have faith in this, that they do not have these hospitals, these medical colleges, advertisements in the press, and the rest of it as we find. in the case of allopathy medicines. In the case of allopathic medicines everyday the name changes, new, varieties come, advertisements are given, publicity is made. But it is not so with homoeopathy. Of course, in spite of the lack of all the modern facilities and in spite of these disadvantages, homoeopathy is still gaining ground. Therefore, I would request the Committee to see if it is possible to make a provision in this Bill for the promotion of homoeopathy by starting colleges, by ecouraging homoeopathystudy, etc.

SHRI MAN SINGH VARMA: What: are your suggestions for the promotion of the system? What sort of provisions do you want to have here?

DR. G. RAJAMANNAR: I would suggest them.

CHAIRMAN: Now you come to the most important and salient points.

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DR. G. RAJAMANNAR: Clause 13 says that the medical qualifications granted by any University, Board or other medical institutions in India which are included in the Second Schedule shall be recognised medical qualifications for the purposes of this Act. It is true that there are some and from colleges in our country them a number of people have passed and they possess the qualifications. But my point is there are other medical institutions which have been conducting classes training people and issuing diplomas and other things and those qualifications are not recognised, . It is only the university here. In the universities there is no such subject or curriculum on homoeopathy. For instance, in Bihar there is the Bihar State Board which was constituted in 1954. With a qualifying examination they register persons and such registrations must also be recognised and brought under Schedule II. For instance there is the Sinha Homoeo Medical College which was started in 1929 and they have been conducting classes and training people. We were also sent there from Madras by Dr. M. S. V. Rao. After we have passed the qualifying examination we have been enlisted. There is no mention in this Bill about the registration of such people.

It is stated in clause 21 that the Central Register shall contain the names of all persons who are enrolled on any State Register of Homoeopathy and who possess any of the recognised medical qualifications. The process of recognising medical qualifications has got to be clarified and considered very deeply by the Council so constituted. That provision must be there, A number of members of our Association, because there is no State Board in Tamil Nadu, have registered themselves in Andhra State, in Bihar State and now by reciprocal arrangements they will get retransferred to Madras. Such registrations and enlistments in Andhra and Bihar States must also be recognised by the Central Council. This has got to be considered because CHAIRMAN: Just a minute. In Bihar and in Andhra what was the duration of the courses?

DR. G. RAJAMANNAR: Matriculation.

CHAIRMAN: No: what was the duration of the courses? You mentioned that they got their education there.

DR. G. RAJAMANNAR: They took their medical education there.

CHAIRMAN: You mean postal?

DR. G. RAJAMANNAR: No, no, through studies. There are postal institutions in Tamil Nadu also but we do not believe in them,

CHAIRMAN: Please explain this because we want to know clearly. You are wanting this Council to recognise and register these practitioners who passed there and who registered themselves.....

DR. G. RAJAMANNAR: Enlisted and registered themselves.

CHAIRMAN:who enlisted themselves either in Andhra or in Bihar on the basis of the education they got there. What is the duration of the course?

DR. G. RAJAMANNAR: Three years.

SHRI MAN SINGH VARMA: Are they institutionally trained?

DR. G. RAJAMANNAR: Yes, institutionally trained.

CHAIRMAN: Why did they gc out?

CHAIRMAN: Why did they go out?

DR. G. RAJAMANNAR: Because there was no facility.

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CHAIRMAN: You want us to recognise these practitioners and give them registration. I want to know the duration of the course they underwent.

DR. G. RAJAMANNAR: Three years.

CHAIRMAN: They had three years institutional training?

DR. G. RAJAMANNAR: | Yes; in Bihar.

CHAIRMAN: In Andhra?

DR. G. RAJAMANNAR: In Andhra registration is done in two classes A and B. B class is for those who have put in 10 years of practice; as practitioners they get registration.

CHAIRMAN: So you want us to give registration to all the people whether they were institutionally trained or whether they were enlisted on the basis of practice. Am I right?

DR. G. RAJAMANNAR: Yes. I am making this distinction.

CHAIRMAN: You want there should be no bar in giving registration to them?

DR. G. RAJAMANNAR: Yes.

CHAIRMAN: All right; what is your next point?

DR. G. RAJAMANNAR: It is stated in clause 15(3)(a): "the right of a practitioner of Homoeopathy enrolled on a State Register of Homoeopathy to practise Homoeopathy in any State merely on the ground that, on the commencement of this Act, he does not possess a recognised medical qualification." Are we assured that the right of the practitioners will continue even after this Act? SHRI N. G. GORAY: I would like to put a question. You said just now that there are a lakh of homoeopathic practitioners in Tamil Nadu?

DR. G. RAJAMANNAR: Yes.

SHRI N. G. GORAY: And that the State Government has not yet organised them into a Council or there is no institution in Tamil Nadu imparting homoeopathic training.

DR. G. RAJAMANNAR: There are some institutions imparting training, some of them postal training.

SHRI N. G. GORAY: The Government is not helping them?

DR. G. RAJAMANNAR: The Government, as I have already stated, has empowered the District Collectors to recognise them so that they could get their dilutions.

SHRI N. G. GORAY: That is so far as the supply of their material is concerned. That is not the point here.

DR. G. RAJAMANNAR: In 1971 they passed the Homoeopathic Medical Practitioners Act and this year in the month of June they have constituted a Homoeopathic Council.

SHRI N. G. GORAY: What I wanted to know from you was if there are institutions in Tamil Nadu which are imparting homoeopathic training to students, is not the Government supporting them financially?

DR. G. RAJAMANNAR: No, there is none. Probably after the constitution of the Council when the Council begins to function they may do something. As such the Government is not doing anything.

SHRI MAN SINGH VERMA: You have no Directorate or Board?

DR. G. RAJAMANNAR: A Board has only recently been constituted in the month of June as Dr. Jugal Kishore knows but it has not begun to function. In the meanwhile there is some political tussle there and there may be some further delay. That is the position now.

SHRI PRASANNBHAI MEHTA: How many homoeopathic colleges are working in your state and how many students take education in this system?

DR. G. RAJAMANNAR: I am sorry to say there is no college as such of homoeopathy. There are certain insitutions giving instruction to people either by post or personally.

SHRI PRASANNBHAI MEHTA: Do they give any certificate?

DR. G. RAJAMANNAR: Yes; they give certificates. For instance, our Association, the Raja Ram Mohan Roy Institute, is an association of registered homoeopathic medical practitioners. Dr. M. L. C. Rao was the Founder. He was D.M.S., D.H.M. and he was taking classes himself and having Nursing Home and all that. He died recently and there is no other institutions which is giving institutional instruction. The others are giving only postal tuition.

DR. LAXMINARAYAN PANDEYA: How many institutions are there in Tamil Nadu which are giving postal training?

DR. G. RAJAMANNAR: Mainly there are two, one in Thiruvaroor and the other in Kumbakonam

DR. LAXMINARAYAN PANDEYA: Are they recognised by the collector as you said just now?

DR. G. RAJAMANNAR: No, the institutions are not recognized. Only the persons who pass and prove to the satisfaction of the local authority that they have been practising for other five years are recognized, DR. LAXMINARAYAN PANDEYA: What is the duration of the course for postal training?

DR. RAJAMANNAR: One or two years,

SHRI POPATLAL M. JOSHI: May I ask you one question? You say there are certain institutions which impart postal tuition or which impart some training. I think you know there are many institutions in India which send such certificates on payment, for some consideration. Do you know of any such institutions which issue certificates for some consideration?

DR. RAJAMANNAR: I have no idea.

SHRI POPATLAL M. JOSHI: On my part I know that in Gujarat so many certificates are obtained by students on certain payment. Do you know anything about it?

DR. RAJAMANNAR: I have no idea.

CHAIRMAN: For your information I may tell you that the Tamil Nadu Act was passed in 1972. The Council is yet to be formed. Now, a nominated Council is functioning and in Chapter III, for the registration of practitioners they have made three systems: One is with regard to the qualification; two, on the basis of practice and three the Council will hold an examination and whoever will pass, will be registered. These are the three provisions in their Act. Now, there is no recognised Government college or any recognised college run by a private practitioner. In today's paper I find that your Health Minister has said that they are going to have one homoeopathic college. That is the main thing.

DR. RAJAMANNAR: That is what I have been saying. They will do so soon. SHRI B. R. KAVADE: You said that surgery should be a part of homoeopathy and it should be taught in the colleges, and it should not be the monopoly of allopathy only. The general view is that the diploma *course should be of four-years duration. Do you think that within these four years surgery could be taught? Is it your view that surgery should be taught along with homoeopathy?

DR. RAJAMANNAR: What I said is that that is the impression among the public. The claim of allopathy is that surgery is their monopoly. I believe surgery is not the monopoly of allopaths. It is the property of all. It is mere mechanical skill. In fact, our philosophy does not so much believe in surgery, unless it is unavoidable.

CHAIRMAN: Are you a member of the Council?

DR. RAJAMANNAR: No. It has been constituted only recently by the Government.

CHAIRMAN: There are private members in the Council, may be nominated by the Government. You are not one of them.

DR. RAJAMANNAR: I am not.

CHAIRMAN: Your Council has not met even once. Though the Council was nominated by the Government, I am told that your Council has not met even once.

DR. RAJAMANNAR: No.

CHAIRMAN: That shows your antipathy towards homoeopathy. I mean Tamil Nadu because you represent Tamil Nadu

DR. RAJAMANNAR: Not exactly that. I cannot say it is antipathy. They have already constituted the Council. It is rather their indifference. They lay great stress on what they call the Tamilian medicines or he Siddha system of medicine. Beluctantly they have passed this Act. They may go slow, because they do not fundamentally believe in it. Because so many people pressed them, they have got this Act passed.

SHRI PRASANNBHAI MEHTA: On behalf of the Chairman and Members of the Committee I thank you for taking the trouble of coming over here and giving your valuable suggestions. The Committee will give due consideration to your suggestions when the Bill is being considered. Thank you very much.

DR. RAJAMANNAR: Thank you.

[The witnesses then withdrew]

[The Witness (Dr. K. M. Chidambaram, President of the Homoeo-Medical Practitioners Association, Southern Railway Headquarters Trichinopoly Junction) was called in].

CHAIRMAN: Whatever you say will be treated as confidential till the report is laid on the Table of both Houses of Parliament. Please explain the position of your Association.

WITNESS: It has been registered under the Societies Registration Act.

SHRI MAN SINGH VARMA: It means that you have got recognition from the Railways.

WITNESS: We have been allowed to practise on a charitable basis during leisure hours.

SHRI N. P. CHAUDHARI: What is the strength of your association?

WITNESS: At present we have got 97 members.

SHRI N. P. CHAUDHARI: When was it registered?

WITNESS: It was registered during March, 1972.

DR. LAXMINARAYAN PANDEYA: So, all the doctors are not regular practitioners. WITNESS: They are part-time practitioners.

SHRI N. P. CHAUDHARI: How many members are institutionally qualified and how many of them are unqualified?

WITNESS: All are qualified institutionally. Some members are yet to be enrolled. We have been practising this for more than fifteen years and we have now registered our association.

CHAIRMAN: Have you gone through the Bill?

WITNESS: Yes.

CHAIRMAN: Have you any observations or suggestions to make?

WITNESS: Our Association has given its suggestions in writing.

CHAIRMAN: Whatever you have given in writting, we will go through. Besides that have you got any other point to make?

WITNESS: All the Committee members and office-bearers conducted a ed in our letter. Our views have been brought out in this letter.

CHAIRMAN: You have nothing more to add.

WITNESS: No.

CHAIRMAN: Then, our Members will ask you some questions.

SHRI POPATLAL M. JOSHI: You said that some 97 members have got training and got themselves registered. I know of railway employees, clerks and others, at different stations who, without any training, started learning homoeopathy, and started practising it. They are issuing certificates at small stations, flag stations and at big stations. Can you say that all of them got training? Yesterday I said that in our Wcstern Railway there are railway employees who are practising homoeopathy and it has been approved by the Railway Board, but they have got no training whatsoever. They started practising homoeopathy after reading some books. They are registered and they are giving certificates. Their certificates are recognised.

SHRI SULTAN SINGH: I think this I_S a national question and Dr. Jugal Kishore must answer it.

WITNESS: The Railway Board have authorised u_s to practise this system of medicine and we have been allowed to be in Government service. We are fighting for more than fifteen years.

CHAIRMAN: Dr. Chidambaram, there is a Government rule which says that every officer of the Government, who earns something extra should deposit forty per cent of it with the Government. Now, yours is hot a charitable practice. You earnsomething as your fee.

WITNESS: We practise it on a charitable basis. We are not getting any remuneration.

CHAIRMAN: No remuneration? Any bananas, plantains, etc?

WITNESS: No remuneration.

DR. JUGAL KISHORE: According to the directive of the Home Ministry no Government officer can practise homoeopathy even on a charitable basis, unless he is a registered homoeopathic medical practitionerand he has got recognised qualifications. This is the position so far as the Central Government is concerned and I do not know how the Railway Board has allowed it.

CHAIRMAN: This answers Mr. Sultan Singh's question. SHRI POPATLAL M. JOSHI: I think the people who make laws are the people who are authorised to break them.

SHRI MAN SINGH VARMA: I presume that all the 97 doctors are registered.

WITNESS: Yes.

SHRI MAN SINGH VARMA: With whom?

WITNESS: Registered with the collector. The Bill has just been passed in Tamil Nadu.

CHAIRMAN: You did not get this point. Your association is registered under the registration of Societies Act, 1867.

CHAIRMAN: When you are having even charitable practice are you registered medical practitioners?

WITNESS: Yes, registered with the Government.

SHRI K. RAMAKRISHNA REDDY: Have they passed any college examinations? Have they attended any college or taken any diploma course?

WITNESS: No.

SHRI K. RAMAKRISHNA REDDY: Is it by giving money to some institution?

WITNESS: No.

CHAIRMAN: We are thankful to Dr. Chidambaram for doing it on charitable basis. But what we need is even for charitable purposes a person must be properly qualified and properly experienced to do that.

WITNESS: Yes, we have got experience. That is why we are practising.

SHRI N. P. CHAUDHARI; What is the criterian for being member of your society?

WITNESS: There are ever so many institutions, educational and medical associations to give diplomas. We register only those who have got diploma. Railway employees are allowed to practise by the Railway Board. There is no registration fee.

SHRI N. P. CHAUDHARI: How many of them are practising allopa-thic medicines?

WITNESS: None.

SHRI N. P. CHAUDHARI: Are your members performing surgery?

WITNESS: No.

SHRI ZIAUR RAHMAN ANSARI: You seem to be a bit confused. You told us that you are registered medical practitioners. What do you mean by registered medical practitioners?

WITNESS: Our names are registered in the register maintained in the Collector's office. All of us are like that.

CHAIRMAN: Dr. Jugal Kishore will tell u_s what it means because there is no institution giving diplomas here.

DR. JUGAL KISHORE: So far as Tamil Nadu is concerned, I think they have not yet started any registration. As you know already, the Council has not met even. Although it has been nominated it has not yet met. So the question of registration does not arise.

Regarding institutions giving them training, there are no regular institutions either run by the State Government or the Central Government. There is one college but unfortunately that has not been able to function at all. I am not aware of any institutions giving diplomas. What are the institutions from which they are getting training or diplomas?

WITNESS: From local institutions. There are three institutions—Kumbakonam, Tiruvarur and Tiruchi which are giving diplomas.

DR. JUGAL KISHORE: We can accept they are institutions giving postal diplomas. SHRI SULTAN SINGH: Are these institutions recognised by your Government?

WITNESS: Yes, it should be.

SHRI MUHAMMED KHUDA BUKHSH: We have heard from witnesses that Collectors have been empowered in Tamil Nadu to register these practitioners on the basis of certain number of years of practice. How do we differentiate between other registered practitioners and these registered practitioners?

DR. JUGAL KISHORE: For certain purposes the Collectors register names of some members who were using mother tinctures because earlier they were prescribing alcohol, mother tinctures to some people. For purposes of control they have registered names of bona fide authorised medical practitioners of homoeopathy. This is for a limited purpose.

SHRI POPATLAL M. JOSHI: Do you issue certificates?

WITNESS: No. We are railway employees and we issue no certificates.

SHRI K. RAMAKRISHNA REDDY: On behalf of the Chairman and the Members of the Committee I thank you for taking the trouble to come over here.

WITNESS: May I give some suggestions given by our members?

CHAIRMAN: I asked you in the beginning and you said that you have given everything in your memorandum. You hand over the memorandum and we will go through it.

[The witnesses then withdrew]

(THE WITNESSES: (Dr. Kumarj R. BRAGAM, B.A., D.H.B.M., G.C.H.M., Dr. V. Sundaravaradhan, D.H.S. and Dr. C. A. Rajagopalachari, B.A., D.H.B.M., G.C.H.M.) were called in.) (Shri N. G. GORAY in the Chair) CHAIRMAN: We welcome you all. But before we start our work I would like to bring to your notice that whatever you say here or whatever discussions follow are to be treated as confidential. They should not be given to the press unless the report is placed before the Parliament. Will you now introduce yourself giving your qualifications etc.?

DR. V. SUNDARAVARADHAN: 1 am a diplomaholder from the Board of Homoeopathic System of Medicine, Delhi. I am working as a medical officer with the Simpson Group Companies, Union Homoeopathic Medical Centre, Madras and General Secretary of the Society of Homoeopathic Physicians, Madras.

DR. C. A. RAJAGOPALACHARI: I am Dr. C. A. Rajagopalachari from Madras. I am B.A. from the Madras University, a 3-year diploma holder (D.H.B.M.) of the Madras Presidency Homoeopathic Association and a graduate (G.C.H.M.) from the Hahnemannian College of Homoeopathic Medicine, Bangalore, recognised by the Karnataka Government.

I have been practising homoeopathy since 1944 when I was in Calcutta during the last war and learned homoeopathy there but did not take any degree or diploma at that time because we were busy with war work. I was a delegate at the International Homoeopathic Congress, 1967 at Delhi and was one of the representatives of India at the Athens Congress, 1969.

DR. KUMARI R. BRAGAM: I am Dr. Kumari R. Bragam, a graduate, D.H.B.M. and G.C.H.M. I am a graduate from the Madras University and I got my medical diploma and degrees from the Madras Presidency Homoeopathic Association and Hahnemannian College of Homoeopathy, Government of Mysore, respectively. I am practising for the last ten years. I am also an executive member of the Madras Presidency Homoeopathic Association. DR. C. A. RAJAGOPALACHARI: If I may be permitted to add one aspect of my life which I have forgotten, I have been actively associated with the Madras Presidency Homoeopathic Association for more than seven years during which I was Treasurer for two years, General Secretary for four years and now I am the Vice-President of the Association.

CHAIRMAN: So far as your memorandum is concerned, the Committee will go through it. Now we would like to know from you whether you want to add something to it or you would like to elucidate the points or you would like to say something about the Bill. If any of you wants to do so, you please do.

DR. V. SUNDARA VARADHAN: I had already answered the questionaire sent by the Committee. I would like to bring to the kind attention of the Committee the following aspects in the proposed Bill. Please read item 5 of the Bill on page 3-item 5(1). "No person shall be eligible for election to the Central Council ... and resides in the State concerned". Here I would like to say that there are practitioners who might have got registered after their qualification in a particular State. But for appointments or other reasons they are practising in another State. Now, if this present clause is retained in the Bill, he may not be eligible to participate as a candidate in the election in that. So I would request particular State. the Committee that by an amendment to the Bill these words "....and resides in the State concerned", should be omitted so that that particular candidate is not deprived of his eligi-+ bility to stand for election from any Particular State.

Now I will come to the Second Schedule. There are many qualifications mentioned. While that is appreciated, in India there are a large number of practitioners who are possessing the D.F. Hom. or M.F.Hom., etc. After their homoeopathy gradu-

ate course in India, many are there who obtained the D.F. Hom. by personally going to London, and some without having a homoeopathy qualification in India, and they are all registered in the particular State Register. So I would request the Committee to include the following diplomas of the Faculty of Homoeopathy, London: DOFM, FOFM, MOFM, M0FM diploma is given to allopathy graduates. In India there are more than 200 allopathy practitioners practising in homoeopathy. Many of them have obtained this MOFM diploma. According to the Schedule they are deprived of registration. So I would request that an amendment be made to include these three qualifications in the Schedule of Qualifications.

CHAIRMAN: May I draw your attention to Clause 14(1)(a): the title: "Recognition of medical qualifications" granted by medical institutions in State or countries outside India"? It will come later on. It is not necessary to put it in the Bill. The Central Council can make rules and regulations by which what you say can be met.

DR. V. SUNDARA VARADHAN: Item 3, Chapter IV of the Bill, Central Register of Homoeopathy:

"The Central Council shall cause to be maintained in the prescribed manner a register of practitioners of Homoeopathy to be known as the Central Register of Homoeopathy which shall contain the names of all persons who are for the time being enrolled on any State Register of Homoeopathy and who possess any of the recognised medical qualifications."

Here there is a slight clash. If you refer to item 3 of the same Chapter, it reads like this:

"The Registrar of the Central Council may on receipt of the report of registration of a person in a State Register of Homoeopathy or on application made in the prescribed manner by any person, enter his name in the Central Register of Homoeopathy, provided that the Registrar is satisfied that the person concerned is eligible under this Act for such registration."

This gives an impression that in addition to the list supplied by the various Boards and Councils some names will automatically enter into the Central Register. It also implies that a person possessing the qualifications mentioned in the Schedule may directly apply to the Registrar of the Central Council so that on satisfaction by the Registrar he can be enrolled. So this clashes with item 21(1). So I would request that an amendment be made to 21(1) as follows:

"The Central Council shall cause to be maintained in the prescribed manner, a register of practitioners of Homoeopathy to be known as the Central Register of Homoeopathy which shall contain the names of all persons who are for the time being enrolled on any State Register of Homoeopathy or Central Register of Homoeopathy and who possess any of the recognised medical qualifications."

Regarding the privileges of practitioners, the privileges given there are welcome. If we refer to the Tamil Nadu Homoeopathy Act which has been recently passed, it gives the following under Chapter IV Penalties which I shall just quote:

"No person other than a practitioner registered or deemed to be registered under clause (a) or clause (b) of sub-section (1) of section 15 or registered under clause (c) of that sub-section shall practise Homoeopathy in the State of Tamil Nadu. (b) No registered practitionerunless authorised by the Government in this behalf, shall be entitled to sign or authenticate a birth or death certificate or medical or physical fitness certificate...." Or

(c) Except with the special sanction of the Government no person other than the practitioner registered or deemed to be registered under clause (a) of subsection (1) of section 15 shall hold any appointment as a physician surgeon, etc. in any homoeopathy medical institution."

According to this provision, unless a particular homoeopathy practitioner, even though he may have been registered in a particular State, is authorised by the Government, he is not even fit to issue a physical fitness certificate or hold an appointment which is not the case in the various other States as you will find the provisions there if you go through those Acts. So the privileges as given in the Central Bill should be retained, and all the privileges as given to the other practitioners of other States should be given to the homoeopaths.

CHAIRMAN: That means you want, the Act of the Tamil Nadu Government to be brought on a par with the Acts of the other States?

DR. V. SUNDARA VARADHAN: Yes.

CHAIRMAN: That we cannot do.

DR. V. SUNDARA VARADHAN: I suppose it is sufficient if you give this privilege in the Central Act so that it covers the entire thing.

Then coming to the registration question, in India in this Central Register homoeopaths only, qualified or experienced, in various States have been included. I would like to bring to the notice of this honourable Committee that there are more than 200

allopathy practitioners who are practising homoeopathy. Some of these allopathy practitioners are M.D., F.R.C.S., etc. in allopathy, but they practising homoeopathy even are though they do not possess any recognised qualification in Homoeo-Many of them are even pathy. greater masters in homoeopathy than qualified homoeopaths themselves. But there is no provision in the Cantral Act or even in many State Acts for getting a registration for them. I would, therefore, request you kindly to include a clause to see that any practitioner of any other system of medicine, provided he or she possesses a working knowledge of homoeopathy, be enrolled in the State or Central Register. I think this is a must. Ι know there are doctors practising homoeopathy even they are M.S. or M.D.

CHAIRMAN: I don't see, except Mysore State, there is any other State which is enrolling allopaths as homoeopathy practitioners.

DR. V. SUNDARA VARADHAN: There is no provision. In Mysore there is a provision.

CHAIRMAN: Supposing an allopathy doctor were to approach the State Government and to say that he has been practising homoeopathy and he should be registered as such, does it mean that the State has no authority to do it?

DR. V. SUNDARA VARADHAN: I think that only by an amendment to that particular Act can the State Government do it.

CHAIRMAN: That means that amendment again has to be done by the State itself.

DR. V. SUNDARA VARADHAN: But if a clause to that effect is included in the Central Act itself, will it not be sufficient instead of approach_ ing the State Government to do that? CHAIRMAN: Do you mean to say that you have no hope that the Tamil Nadu Government can be persuaded. to do it?

DR. V. SUNDARA VARADHAN: Supposing an allopathy practitionerpractisiog in Tamil Nadu, if he wants to....

CHAIRMAN: Anyway, we will consider it. Then next point?

DR. V. SUNDARA VARADHAN: Coming to the last item of the questionnaire it is mentioned: "Whether enlisted practitioners can be enrolled in the Central Register?" Only in a few States there is enlistment of practitioners. But the enlistment has not yet been confirmed. So unless first that is regularised, in those States, there is no meaning in giving Central registration to enlisted practitioners. Unless a particular State grants recognition to the enlisted practitioners, it is not advisable to put it like that.

The next item is: "Whether any person other than qualified or otherwise experienced or possesses a qualification, such a person can be allowed to practise homoeopathy?" We are in a transitional stage and we arecoming to an end of that transitional stage. Almost all the States havepassed Homoeopathy Acts. There are 57 colleges and there are thousands of practitioners. Almost all thehomoeopaths have been registered on the basis of their experience of qualifications. And practising medicine is not a hobby. One has to learn moreand more even while practising. Hence it is not advisable to allow anybodyto practise even on a charitable basis, who do not fulfil the requirements of law either on the basis of a qualification or on the basis of a certain minimum number of years of experience. Simply any and every person cannot start practising by saying that he isdoing it for charity, especially when we have reached a mature stage now. Two points are striking at the very:root. "Whether a homoeopath should practise "homoeopathy only" or at times he can use allopathy or any 1 other thing?" It is expected and it is desirable that a homoeopath should practise only homoeopathy. But practically speaking, where the administration of certain other drugs becomes absolutely essential to save the life of the patient, a registered homoeopath should have the option, as decided by certain Court judgmentsfor instance, in Maharashtra it was held that the registered practitioner can practise any drug which is useful for his patient. So a registered Homoeopath should not be penalised and registration should not be cancelled if the practitioner administered a particular drug to save the life of the patient-to make use of medicines of other systems. Because, there may be instances where a qualified homoeopath may have the necessity to administer an emergency drug; especially for people practising in the rural areas where there are no good and proper facilities for a homoeopath are available. In those cases a homoeopath will have to use an emergency drug to save the patient. He cannot simply lay down the patient. In such cases, the homoeopath should not be penalised and his registration should not be · cancelled.

Then regarding a library and laboratory to be maintained by a homoeopath, it is quite strange that in the questionnaire it is mentioned "If a homoeopath does not maintain a library or does not hold a laboratory, why not we cancel his registration?" There is no such clause in any of the State Acts. Even the best M.D. or M.S. is not holding a library or a laboratory. It is ideal that any doctor of allopathy or homoeopathy or any other system should have a library and a laboratory. But in an economically poor country like India, it is not possible even for the foremost allopath, to have a library or a laboratory. So for this purpose a poor homoeopath should not be penalised.

CHAIRMAN: But that is not going to be part of the Bill.

DR. V. SUNDARA VARADHAN: These are some of the points that I wanted to submit for the consideration of this honourable Committee. Thank you very much.

DR. C. A. RAJAGOPALACHARI: Gentlemen, my answers to the questionnaire and my general comments on the Act have been fairly extensive and I have nothing much to aad but it is just a matter of bad luck that I have to be taken by the Committee along with Mr. Sundaravaradan some of whose expressed opinions I have to differ from. So he will excuse me and you will also excuse me. There is no intention to hurt anybody's feelings or to put forward anything in a wrong perspective.

The first and foremost thing is we are very happy and we welcome the constitution of a Central Council and a Central Register but we have to see that the States which are very tardy in the recognition of homoeopathy as a system of healing do not allow their practitioners to lose in the contract. For instance, Tamil Nadu has come into the picture very lately. I have been associated with homoeopathy since 1944 and have been actively trying to set it up on its feet in Tamil Nadu since 1961, when I retired from Railway service and came to Madras to settle down. Since then it has been my very earnest endeavour to place homoeopathy on its due pedestal. In fact when Mrs. Jothi Vencatachellum, the then Health Minister at Madras, sent up a Bill to the Central Government including all systems of medicine in it, I pleaded with her on different occasions to draft a separate Bill for homoeopathy. She expressed the excellent desire to give homoeopathy equal footing with all other systems of medicine and she said that that could be ensured only if all the systems were brought within the ambit of the same Bill; but I told her that she would be defeated in her object and that it what happened ultimately. Things got further procrastinated, but it came to a head during the last Health Minister M. Sadia Pasha's regime and I pleaded with He said, "We know nothing him. about homoeopathy; if all of you come with a single voice and tell us what to do we will do something". Well. gentlemen, the history of the world has shown us that there cannot be a single voice even in respect of God and so I told him we would try to do our best, and we went on struggling. Well, we restarted our college in Madras called the Madras Homoeopathic Medical College on the assurance of the previous Adviser nn Homoeopathy to the Government of India, Dr. K. G. Saksena that if an institution was started in Madras help would be forthcoming, but when I sent him a letter for help after the college starting work he told me something different, that unless the local Government made a recommendation they could do nothing about it. So I fell a victim to lalach-Hindi friends from the north will know this word-and I tried to keep the college going. And believe me, gentlemen, I refrained from recruiting and training more than in one set that was already attending classes because I did not want to misdirect the people and tell them that there was a profession to practise at the end. So it was only one set that I turned out and even that set could not take the examinations because of lack of recognition. So I had to affiliate the college with a college in Bangalore to get the students to take the G.C.H.M. Examination. I had been forced into a corner. I am now happy that the system has come to be recognized in Tamil Nadu. The schedule in the proposed Bill includes a list of recog-Karnataka has nised institutions. now recognised, three years after the passing of the Act, the Hahnemannian college of Homoeopathy, Bangalore, but that college has not found a place in this schedule. We in Madras formed an Association in 1936 as a registered body and we have been holding classes, personal classes, as distinct from many of the institutions in homoeopathy which have granted gold medals and certificates galore. We have held personal classes every Sunday afternoon for 3-1|2 hours for years together and granted certificates and diplomas. This was the second registered institution for homoeopathy in the whole of India and if such an institution and its validity do not get recognised, it will be a sad day for homoeopathy in this country.

CHAIRMAN: I hope you realise that it is for the State Government to recognise it and it will be difficult for us to extend recognition to you over the head of the State Government.

DR. C. A. RAJAGOPALACHARI:-I am not suggesting any bypassing at all. I am a retired Government offi-... cial and I am very conscious of theprocedure and believe me, I would. never make a suggestion to bypass any authority but it has always been delay, delay, delay in Tamil Nadu so. far as this is concerned. Tamil Nadua has taken almost half a century to recognise homoeopathy as a system of healing and its rights. Let us not have any more tardiness due to gov-You are the .. ernmental procedure. final authority today for anything in this country; the Parliament is the. highest authority and you are a parliamentary committee. If we gain your sympathies and if you feel that what t say is right, proper and just, then our task will become easy.

CHAIRMAN: We have understood your point. You come to your nextpoint.

DR. C. A. RAJAGOPALACHARI:-Thank you very much. Now I would only mention the salient points. You have asked in the questionnaire whether a charitable practitioner should be permitted to continue even without registration. Well, I am aware ofseveral persons who have given their-

life blood to set homoeopathy on its ilet. There is a doctor of Madras now in Hyderabad, retired from Government educational service, who has dedicated himself for the last fifty years to the service of homoeopathy. Even if you forced he would not go for registration; and if his help gets -denied to the people, it would be as good as murdering homoeopathy and murdering persons who go to him for helb. He is one of the staunchest homoeopaths and one of the very best. Therefore I have suggested in my answer that a time limit may be set, a particular relevant date and if there are persons engaged in the profession on that particular relevant date for some years and if you are satisfied that they are still capable of continuing to give help and succour to the people and if they apply for permission it should not be denied to them. This is very important. This is the case with every system. When the Allopathic Bill was passed, even the dispensers who were calling themselves doctors were allowed to register themselves. A transition period is always there and you should have such a transition period even in this are, instead of denying registration to people who deserve it. Let us give aid to a few people; it does not matter very much at all. This is one thing I want to stress.

Now it has been proposed to place on the Register anyone who enters the medical profession irrespective of the fact whether he proposes to practise Homoeopathy or not. It seems to me very strange that a person who is not keen to set up practice at any time, should be placed on a pedestal just because he has acquired theoretical knowledge and a Degree, while persons who have been practising for decades, just because they have not got the qualification, should be denied the right to practise. So I would suggest that only persons who are in the State Registers should be taken into the Central Register. Qualified persons especially should have a minimum of three years' experience before being taken into the Central Register. That is my submission. Let them register themselves in their States and let them show to the world that they are keen to practise the profession which they have taken up for three years. And then let us put them in a the Central Register. If you just put them there merely because they have got the qualification it will serve no purpose except that of swelling the Register and it is quite meaningless in my opinion

[SHRIMATI PUNJABLI MUKHOPADHYAY in Chair],

The next point I would like to make is about dispensaries and clin'cs possessing libraries 'Library' js а Very difficult word to connote. Different dictionaries give different meaning s but it is very essential for every homoeopath to have a minimum number of reference books because the totality of symptoms and individualisation cannot allow ≥n⊽ doctor to depend merely on his memory however powerful a memory he may possess. I have not yet seen any doctor even the best of them-Dr. Jugal Kishore, Dr. Diwan Harish Chand or Dr. Saksena or even doctors in England or Germany which I have visited—ever prescriptions giving things then I am afraid he is only fooling himself and fooling his patients.

Then there is the question laboratory. No allopathic doctor possesses a laboratory of his own because thy are very specialised things, pathological laboratory X-ray laboratory etc. A sphygmomanometer for reading the blood pressure the knee reflex tapper uring test euipment the tongue depresser. stethoscope, thermometer, these things one must possess but not beyond that. If a doctor thinks that he can do without even these basic things then I am afraid he is only fooling himself and fooling his patients.

The next point I would make is about homoeopaths being permitted to practise other systems of medicine. I would suggest that it may be allow-

ed provided he is registered in the system which he desires to practise. Generally without mentioning апу particular society or association or any institution I would like to tell you that in one case I have definitely known from a person who underwent withe course that they were taught in a personal class to do injections in this manner. Small pillows were made and given to them as also needless used for stitching gunny bags them at the mention of the word 'poke' they were asked to poke into the pillows. This is very authoritative and from a very reliable source. I am not prepare to quote it. Because you have mentioned that the proceedings will be confidential I am saying this here and opening my mind. I am 67 years old and I have very few years left. I want to see that justice is done in this matter and that is the reason why I am telling this before you. If anybody has pain, one may have to give morphia or any other injection but I do not think that such people are qualified to give injections unless they are trained properly in proper institutions with proper requipment Such a person may have a general registration certificate to cover himself with, but if he does the injection and if something goes wrong, his registration protects him but it does protect the patient from Lord Yama. So I would not for a moment allow such kind of things. If any doctor wants to give injections and practise any other system, things let him get himself registered under the concerned system under its statutory Rules and Regulations.

The next point I would like to talk about is education. We have had a very difficult time in our college in the matter of dissection training for students going up for graduate Degree. We approached the Madras Government for permission to send our students to the dissection classes in the General Hospital. We were refused permission because we were not a recognised body. We approached the Deans of Colleges. One Dean of a Medical College was kind enough to

allow our students to visit their museum but not the dissection classes. So I was compelled to make arrangements with the Baugalore Homoeopathic Medical College for one male body and for one female body to be purchased for our students. I took the entire batch of my students for 15 days in Bangalore training them in dissection from morning to evening, for 8 hours every day. That is how we discharge our duty. I may tell you even in allopathic medical colleges what happens is all students go into the anatomy dissection class. But each one does not himself use the scalpel. If he just present at the dissection class he gets the certificate. This is what is acutally happening. I am taking you into my confidence to the extent of my knowlege. I am not telling you any fibs. But in our classes dissection was done by all students with their own hands and I have here proof in the form of photographs that we took at the time. I would suggest for the sake of pure homoeopathy, dissection as such may be removed from the curriculum. I would suggest that good models may be exhibited. Nowadays a lot of plastic models are in the market. These can be produced just as in a museum and such education should be given. If this is done, then the temptation to indulge in pseudo-allopathic surgery will be removed. What we should try to do is to place homoeopathy on a high pedestal and make the practitoners practise pure homoeopathy as a system of medicine and not mixed homoeopathy. That is what I would like you to note from a person with about 28 years of practical knowledge of homoeopathy. Thank you.

DR. KUMARI R. BRAGAM: Madam Chairman and Members, I would like to suggest a few amendments to the Bill. I refer to Chapter I, clause 2(1) (d) 'definitions'. It says 'Homoeopathy means a system of medicine founded by Dr. Samuel Hahnemann'. When homoeopaths prescribe medicines they also prescribe biochemic medicines as remedies. Biochemic remedies are part and parcel of homoeopathy. According to the Bill if homoeopaths prescribe biochemic remedies it will be an offence. So, the definition should include: Homoeopathy means the system of medicine founded by Dr. Hahnemann and includes Schusler's system of biochemic remedies and the expression 'homoeopathy' should be construed accordingly. So, the definition should be amended accordingly.

My next point is this. Chapter II, clause 3(1)(a). It says:—

"such number of members not exceeding five as may be determined by the Central Government in accordance with the provisions of the First Schedule from each State in which a State Register of Homoeopathy is maintained, to' be elected from amongst themselves by persons enrolled on that register as practitioners of Homoeopathy;"

We have got several State Councils in which the President is the head of the Council. Out of the five members at least one should be the President or Vice-President of a State Council. I am suggesting it because there will be co-ordination between the State Councils and the Central Council. If there is to be proper coordination one among the five members should be the resident or Vice-President of a State Council.

Then, I come to Chapter II, clause 3(1) (c) which says: "or other allied medical disciplines." I want some clarification on this word 'allied'. It may mean any system other than homoeopathy. It should include only homoeopathy and not any other system of medicine.

SHRI MUHAMMED KHUDA BU-KHSH: It should include, of course, Dr. Suschler's tissue remedies.

DR. KUMARI R. BRAGAM: Then, I come to clause 3(2) which deals with

the term of Office of the President. and Vice-President. It says:—

"Provided that for two years from the first constitution of the Central Council, the President and the Vice-President shall be nominated by the Central Government from amongs, the members of the Central Counch and the President and the Vice-President so nominated shall, notwithstanding anything contained in sub-section (1) of section 7, hold office during the pleasure of the Central Government."

I do not want the President or the-Vive-President to continue for more than five years. The words "duringthe pleasure of the Central Government" should be deleted. They should not continue beyond five years. The President and Vice-President are eligible for re-election. They need not continue after five years.

CHAIRMAN: If they are elected again?

DR. KUMARI R. BRAGAM: They can come again, but not as nominees.

Then, I come to clause 5(2): It says:-

"No person may at the same timeserve as a member in more thanone capacity."

I need some clarification. In what sense have these words 'in more than one capacity' been used?

CHAIRMAN: He may be the chairman of a sub-committee. When he is the Chairman of the Central Council, he cannot be a member of any other committee.

DR. R. KUMARI BRAGAM: But it is not definite here.

DR. RAJAGOPALACHARI: May I be permitted to add something? The Central Council has been authorised to elect its executive from its own members. Does it make for a dual capacity or single capacity? Does an executive council member cease to be a Council member? CHAIRMAN: There is scope for registration from all three different heads. If the person comes from one category he will not be elected from a different category. He will function in one capacity only,

DR. RAJAGOPALACHARI: The President and the Secretary of the Central Council are ex-officio Member of the Executive Committee, but the other members are not ex-officio Members. So long as this difference exists there is the likelihood of somebody disputing it.

CHAIRMAN: They cannot be separately Chairman and Vice-Chairman.

DR. RAJAGOPALACHARI: I accept the Chairman's verdict.

DR. KUMARI R. BRAGAM: In the Second Schedule we have got some of the recognised qualifications, but we do not find here the Hahnemann College of Homoeopathy, which was recognised by the Government of Mysore in the year 1971. The Madras Presidency Homoeopathy College was affiliated to that college in that year. By passing the examination conducted by them we got the degree of G.C.H.M. That institution should find a place in the Second Schedule to the Act. The Madras Presidency Homoeopathy Association is conducting a threeyear diploma course. On every Sunday we conduct the classes and subjects like anatomy and gynaecology are taught by MBBS doctors and homoeopathic subjects are taught by eminent homocopaths. So, we have got some practical experience from the homoeopathic dispensary run by our Association. As we have got some institutional training that diploma should also be recognised and included in the Second Schedule to the Bill.

CHAIRMAN: Which institution?

DR.' KUMARI R. BRAGAM: The Madras Presidency Homoeopathic Association.

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CHAIRMAN: Has the Tamil Nadu Government registered it? I think registration in Tamil Nadu has not yet started. We cannot include it in the Second Schedule unless and until your Council has recognised that diploma. Then only we can include it in the Second Schedule.

DR. KUMARI R. BRAGAM: This is all that I want to say.

CHAIRMAN: Have you got any questions to ask?

SHRI N. P. CHAUDHARI: Dr. Sundaravaradhan, you said that your qualification is DFH or DFHS. This is a new thing for me. Will you please throw some light on this?

DR. V. SUNDARAVARADHAN: I said D.H.S. The Delhi Board confers D.H.S. diploma. It has been included in the Second Schedule. It has also been recognised by the UPSC. The Board of Homoeopathic System of Medicine, Delhi, has recognised the DHS qualification.

SHRI N. P. CHAUDHARI: What is the duration of the course?

DR. V. SUNDARA VARADHAN: It is a four-year diploma course. It was recently converted into four-year DHMS couse. From 1965 homoeopaths possessing practice for a minimum number of years were permitted to sit for the final examination privately and they were subjected to all the theoretical and practical examinations at the Maulana Azad Medical College, Delhi Irwin Hospital etc. On passing they have been given diploma. I am a DHS.

SHRI N. G. GORAY: I would like to ask some questions. I am putting my question to Dr. Rajagopalachari. The difficulty which the Committee is facing is this. While we want to promote homoeopathy, we do not want to do any thing that will promote quackery. Therefore, while drafting the Bill, ultimately we will have to take care to see that some sort of standard is introduced in the training

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of homoeopaths. " I would like to know from you what exactly should be done. There are hundreds and thousands of cases where because of the fact that homoeopaths do not give "any lethal doses, any body gets up and starts practising as a homoeopath. Just before you came here, there were some other people who gave evidence. They are serving in some Government departments out of good motives. 1 am not challenging their bona fiides. They want to be useful to the society and to community. They are also practising homoeopathy. They have got themselves registered. When we asked them what were their qualifications, we found that they had hardly any qualification, except their goodwill to do something good to the society. Now, if homoeopathy is accepted as a very sophisticated form of treatment, what is needed is more intelligence and a more sophisticated knowledge, but we seem to be faced with a situation where the most sophisticated therapy is being practised by persons who have no claim to having had any training at all. How do you solve this dilemma?

DR. RAJAGOPALACHARI: This is the dilemma that I have been facing in my own life because I am conscience-ridden.

SHRI N. G. GORAY: I sympathise with you in your terrible situation. What I would suggest is that during the transition period which is bound to be of some years because of the Government's apathy at the Centre and the States' inability to take up the problem at the proper time allowing three decades to go waste, they should go into the matter immediately. Even now I am worried about the Tamil Nadu Homoeopathic Act. Although the Act is on the statute book and the Council has been inaugurated. The Council has not yet and a single meeting because of the political situation in the State taking a different turn. I am not talking politics here but I must discuss it in the context of the present day situation. So you will permit me to that extent.

Now during the transition period it is absolutely inevitable that some quackery may take place, and it is taking place in respect of the Acts which have been on the Statute Book for decades. Today how many people prescribe pills that are only given to them by the sample dealer?

CHAIRMAN: That is true. But what Mr. Goray said is that they are not recognised by the Government here. What Mr. Goray said that the Government of India is giving recognition to that kind of quackery. That is the trouble.

DR. C. A. RAJAGOPALACHARI: I suggested in my answer to the questionnaire that the people who are known to be good homoeopaths, practical homoeopaths and who are charitably inclined, who have been practising for years, if they show you their intention to continue that kind of practice alone, then you allow them to be registered and not otherwise. I am not suggesting that anybody who calls himself a homoeopath should be placed on the Register. I am against quackery. They should be trained. The training will have to be institutionalised in the long run.

SHRI N. G. GORAY: It is quite true that there are certain practitioners who without any formal training are best of homoeopaths just as Shiva'ji was one of the best military strategists without undergoing any N.D.A. training. But does that mean that we should not have the N.D.A.? That is why you quoted the instance of one doctor about whom you said that he would never come up for registration. But these are rare exceptions. Therefore, the best thing is to see that the knowledge of homoeopathy gets institutionalised.

DR. C. A. RAJAGOPALACHARI: Absolutely. Colleges must be started immediately and the new registrations must be based on proper qualifications; there is no gainsaying that fact. I was talking about the exceptions to the general rule. I hope I have made myself clear. SHRI MAN SINGH VARMA: Dr. Sundaravaradhan, you said that allopaths possessing M.B., B.S. or higher qualifications having working knowledge of homoeopathy must be allowed to practise homoeopathy. What is your intention? Do you mean to say that without taking any training from any institution they should be allowed to practise homoeopathy?

DR. V. SUNDARAVARADHAN: There is a Homoeopathic Post-Graduate Association in Bombay which has been training several allopathic doctors. They do not take less than M.B., B.S. They are having a full nine months to one year course. Such hundreds of doctors are practising. But they do not have any Homoeopathic registration in their particular State. But they are top most homoeopaths. I suggest that if they possess working knowledge and if they desire to practise homoeopathy they should be allowed to have their registration; . otherwise, legally speaking they will not be allowed to practise homoeopathy.

SHRI MAN SINGH VARMA: I believe you believe in mixopathy.

DR. V. SUNDARAVARDHAN: It is not mixing the two medicines. He is a qualified allopath. If he feels that he should give homoeopathic medicines he should be at liberty to give it. There should be no legal hurdle in such a case.

SHRI MAN SINGH VARMA: You say an allopath who has working knowledge of homoeopathy should be allowed to administer allopathic as well as homeopathic treatment.

DR. V. SUNDARAVARADHAN: Yes, if he feels that the patient will have more benefit from the homoeopathic medicine.

SHRI MAN SINGH VARMA: This is mixopathy, nothing else.

DR. V. SUNDARAVARADHAN: In Calcutta there are allopaths who enter the D.M.S. course. But in other States it is not like that. While they possess working knowledge, have undergone homoeopathic course, they are not eligible for registration. Still they are practising more of homoeopathy than allopathy.

SHRI K. RAMAKRISHNA REDDY: He should opt. He should not practise other than the system which he has opted.

DR. V. SUNDARAVARADHAN: That means depriving him of his qualification and registration in the particular system in which he has graduated first.

SHRI K. RAMAKRISHNA REDDY: Then it is opportunism.

DR. V. SUNDARAVARADHAN: If I am allowed to mention a name, Dr. Annamalai—an allopath—asked me to treat cases. He said he would diagnose the case and I should give homocopathic treatment. So there should be no legal hurdle to prescribe medicine. My desire is that there should be opportunity for any allopath knowing Homoeopathy to have homoeopathic registration so that he can do justice by way of according permanent cure either in allopathy or in homoeopathy as the case may be.

SHRI K. RAMAKRISHNA REDDY: Unless and until you have some restrictions how can you improve the science of homoeopathy?

DR. V. SUNDARAVARADHAN: If an allopathic practitioner wants to practise homoeopathy let the Central or State Council conduct examination before allowing him to register as a homoeopath.

SHRI K. RAMAKRISHNA REDDY: You say that any one who wants to practise any pathy should be allowed to do so at the same time.

DR. V. SUNDARAVARADHAN: Yes, Sir, any doctor of any system. If I am again permitted to mention names, Dr. Mistry, M.S., Reader in Surgery, Sholapur Medical College, prescribes homoeopathic treatment. He has treated several cases using homoeopathic treatment. He has got wonderful cures to his credit. But I think he has got no registration in homoeopathy. He has just got knowledge in homoeopathy as in allopathy. Similara biochemist, Ramnath, lv. Prof. Stanley Medical College, Madras, is an allopathic medical practitioner. He has been practising Homoeopathy for several years. Therefore, if you analyse the all-India pattern you will find that allopaths are practising homoeopathy successfully. Therefore, they should have registration in the Homoeopathic Register; if they have knowledge of homoeopathy; there should be no legal hurdle for them to practise homoeopathy.

SHRI PRASNNABHAI MEHTA: You said that the doctor should be at liberty to practise homoeopathy when he finds it necessary in the interest of the patient. But suppose the patient says that he should be treated by allopathy what should the doctor do?

DR. V. SUNDARAVARADHAN: That depends upon the individual practitioner. The doctor would explain to the patient that he would derive more benefit from homoeopathic treatment.

DR. C. A. RAJAGOPALACHARI: If I am excused for my interruption, there have been cases in the United States of America where homoeopathy is a post-graduate course after the allopathic degree. Such practitioners have been called to courts for enormous damages by people who lost their relatives; they have been victimised for certain defects and deficiencies. They have been sentenced to pay heavy damages. Such a doctor is running a heavy risk. I know of an Assistant Director of Forensic Medicine who gave evidence before courts of law where homoeopaths had been challenged on the basis of their treatment and there have been cases in which they have been punished. So in my opinion any doctor would do well to stick to one system the system he is registered in. Wherever he considers in his innermost heart that his system is not going to do real benefit and that another system is likely to prove beneficial he should send the patient to practitioner of that system. It does not mean any disgrace. That is the best thing. For instance, any physician who thinks that surgery is necessary and puts the patient under sedative without knowing what to do about it will be committing a serious offence, although his registration protects him. This is not the kind of doctoring we expect from a true medical practitioner.

SHRI N. P. CHAUDHARI: Dr. Rajagopalachari, I would like to know your opinion as to whether biochemic system should be included in this Bill or not.

DR. C. A. RAJAGOPALACHARI: Absolutely. Biochemistry is very much allied in its basic philosophy to the philosophy of homoeopathy, except that it is restricted to the twelve tissue salts. The system of preparation and administration is the same and by practice over the last 20 years I have been able to decide that prescription of biochemic salts helps rapid recovery of the patient. Homocopathy starts the cure and continues it. I have been able to reduce the anticipated period of treatment considerably by helping homoeopathy through administration of suitable biochemic salts. One is not contradictory to the other. So in my opinion biochemistry should be included along with Homoeopathy in any statute.

DR. LAXMINARAYAN PANDEYA: Dr. Kumari Bragam, Dr. Varadhan and Dr. Rajagopalachari, on behalf of the Committee and on behalf of the Chairman, I thank you for having come here and given your views for the benefit and development of homoeopathy. Thank you, DR. C. A. RAJAGOPALACHARI: On behalf of all three of us, I am extremely grateful to the Committee for the opportunity given to us to be present here because our hearts have been palpitating for the last decade and more merely to see that homoeopathy gets its due right in the Statute Books of the country. And since this

is a very important step—the formation of a Central Council—I am extremely happy to associate myself in this effort. Thank you very much.

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(The witnesses then withdrew.)

(The Committee then adjourned.)

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Wednesday, the 1st November, 1972.

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PRESENT

Shrimati Purabi Mukhopadhayay -Chairman.

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MEMBERS

Rajya Sabha

2. Shri Sasankasekhar Sanyal	5. Shri Sultan Singh
3. Shri Bhupinder Singh	6. Shri N. P. Chaudhari
4. Shri Man Singh Varma .	7. Shri T. G. Deshmukh

Lok Sabha

8. Shri Ziaur Rahman Ansari -	16. Shri Ramachandran Kadannapalli
9. Shri Vidya Dhar Bajpai	17. Shri B. R. Kavade
10. Shri Muhammed Khuda Bukhsh	18. Shri Prasannbhai Mehta
11. Shri A. M. Chellachemi	19. Shri N . Sreekantan Nair
12. Shri Hiralal Doda	20. Dr. Laxminarayan Pandeya
13. Shri Nageshwar Dwivedi	21. Maulan a Ishaque Sam bhali
14. Shri Madhuryya Haldar	22. Shri K. Ramakrishna Reddy
15. Shri Chiranjib Jha	23. Dr. Sankata Prasad

REPRESENTATIVE OF THE MINISTRY OF HEALTH AND FAMILY PLANNING

Dr. Jugal Kishore, Adviser in Homoeopathy.

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary.

WITNESSES

(1) Representatives of the All Kerala Homoeopathic Federation, Quilon-

(i) Dr. A. G. Nair, President,

(fl) Dr. A. K. George, General Secretary.

(iii) Dr. K. V. John, Secretary.

(iv) Dr. Philip Powlose, Publicity Officer.

(2) Dr. K. A. Joseph, Principal, Homoeopathic Medical College, Madurai.

(3) Dr. K. T. Thomas, Pollachi.

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(4) Dr. M. P. Parmeshwaran, Assistant Director, State Institute of Languages, Kerala, Trivandrum.

(5) Dr. K. Z. George, Assistant Director (Homoeopathy), Government of Kerala, Trivandrum.

[The witnesses *kepresentatives* of the All Kerala Homoeopathic Federation, Quilon, were called in.]

CHAIRMAN: Friends, we welcome you and we hope that you will give us very good guidance. Before you have your say I ought to tell you that whatever you say, though it will go on record, is strictly confidential and it will remain confidential till the proceedings of the Committee are laid on the Table of the Houses of Parliament, and I hope you will take it as a trust for yourselves not to tell people outside what you have said here because that will be an infringement of the trust bestowed upon you by this Committee which is a Committee of both Houses of Parliament and which reflects the, oaths which are given to Parliament. . . · ·

Now, you have already given your memorandum. If you have any new things to say, or if you have to explain or expand what you have already stated or if you want to modify any of the statements which you have already submitted you are at liberty to do so.

Before you begin you may please introduce yourselves one by one with all the credentials that you have. et etcat

DR. A. G. NAIR: I am Dr. A. G. Nair, President, All Kerala Homoeopathic Federation, Quilon,

DR. A. K. GEORGE: I am Dr. A: K. George, General Secretary of the All Kerala Homoeopathic Federation and I am a registered medical practitioner.

DR. K. V. JOHN: I am Dr. K. V. John practising in Trivandrum. I am Secretary of the Federation. I am D.M.S. from Calcutta and I was in Government service as Medical Officer for 3 years. Now I am doing private practice in Trivandrum.

DR. PHILLIP POULOSE: I am Dr. Phillip Poulose. District Publicity Convency of the Federation,

DR. A. K. GEORGE: I have some amendments to suggest in the Homocopathy Central Council Bill,

Chapter II, clause 3(1)(a)-Practitioners registered with experience should be given representation by means of election among themselves and the ratio should be equal to the other categories of practitioners. (b) In those States in which there is no Faculty, one Member from the Examination Board should be elected. And in (c) I want the words "or other allied medical disciplines" to be deleted.

DR K. V. JOHN: Instead of that we can say "provided such persons are registered either in the Central or the State Register".

GEORGE: DR. A. K. Another point I have to make is with regard to Chapter IV, page 8, clause 21(1). There should be another Register for those practitioners who are eligible for registration on the basis of experience. e :

How do you define CHAIRMAN: experience?

DR. A. K GEORGE: Existing practitioners who are not qualified and who are having the practice as their vocation.

CHAIRMAN: What should be the time limit of this experience?

DR. A. K. GEORGE: Five years.

We also have to add one more clause that every practitioner in the Central Register should compulsorily attend refresher courses periodically at least S.12 . . once in five years.

KHUDA MUHAMMED SHRI BUKHSH: What should be the duration of the refresher course?

. DR. A. K. GEORGE: Three months.

CHAIRMAN: Don't you think that that will be the job of the Council?,

DR. A. K. GEORGE: The Council will have to recommend some institutions for these refresher courses.

DR. JUGAL KISHORE: At this stage we are concerned with the formation of the Central Council for Homoeopathy and we cannot mention these things here. It is the Council which will have to see and enjoin on the colleges that they should institute special courses. That will be the function of the Council as and when it is formed and so at this stage these things are not relevant.

DR. A. K. GEORGE: I want to add in The First Schedule that A Class practitioners shall elect their own candidates and B $Clas_S$ practitioners shall elect their own candidates from among themselves.

This is all the amendments I wished to place before you.

DR. K. V. JOHN: I would like to suggest a change in the name of the Bill. Instead of "The Homoeopathy Central Council Bill" I suggest that the name may be changed to "The Indian Homoeopathy Central Council Bill".

CHAIRMAN: Would you kindly further enlighten us? What difference does it make? Is there anything particular m your mind?

DR. K. V. JOHN: There is nothing particular in my mind but that name looks more fitting according to me.

CHAIRMAN. Why do you think that the existing name is not befitting?

DR. K. V. JOHN: That is my view.

CHAIRMAN: - Now, the Members of the Committee would like to put some questions and you. will kindly give your considered opinion and answers to them. SHRI MAN SINGH VARMA: Before putting some questions I would like to know something about your Association. Please throw more light on your Association.

DR. GEORGE: The All Kerala Homocopathic Federation is the biggest association in Kerala having 9 district associations athliated to it. It has got about 6,000 members. It is representing qualified and unqualified members. In the Malabar area some members are not registered. They are also included in our Association. In 1950 it was started. This is the oldest association existing. We have got members throughout Kerala and our governing body consists of 39 members from each and every district, qualified and unqualified. Our President, Vice-President and Secretary are all qualified people. In our Governing Body more than fifty per cent members are qualified. We are going on amicably.

SHRI MUHAMMED KHUDA BUKSH: Your association grants membership to people who are also not registered either with any Government or semi-Government body.

DR. GEORGE: Our association is a Federation affiliating nine associations. In Kerala in 3 districts this medical facility has not been extended. So, in those places we have no registered members. Only qualified doctors are registered as our members.

SHRI MAN SINGH VARMA: I presume that your association is registered by the Government.

DR. GEORGE: In 1953 we registered it.

SHRI MAN SINGH VARMA: Do you run some colleges also?

DR. GEORGE: The Athurasrama Homoeopathic Medical College and the Trivandrum Homoeopathic College were sponsored and brought into existence by the All Kerala Homoeopathic Federation. SHRI MAN SINGH VARMA: Can you give us the number of qualified and unqualified doctors?

DR. GEORGE: I can tell you that we have got in our association about 300 qualified doctors and about 5,000 unqualified doctors.

SHRI MAN SINGH VARMA: By unqualified you mean not institutionally trained.

DR. GEORGE: There were so many institutions. In some of them there was the one-year course, in some there was the two year course and in some institutions there was the threeyear course. Some of these institutions are not recognised by the present Government.

श्री इसहाक साम्भली : मिस्टर चैयरमैन, मैं ग्रानरेक्ल बिटनेस डा० जार्ज से जानना चाहता हूं कि वह मेहरवानी करके वतला ों कि केरल जो कि बहुत कांसेश ग्रीर एडवाल्स्ड स्टेट है, लेकिन साथ ही पूग्रर स्टेट है और यहां पर होम्ग्रोपैथी ज्यादा पोपूलर है, तो क्या मैं यह उम्मीद करूं कि यहां पर एलोपैथी से ज्यादा होम्ग्रोपैथी को लाईक किया जाता है ? ग्रगर ऐसी बात है तो क्या इस चीज को पौसीबिल्टी है कि इस चीज को यहां पर ज्यादा बढ़ाया जा सकता है ? मैं यह भी जानना चाहता हूं कि इस चीज को वढ़ाने के लिए क्या स्टैप्स लिये जा रहे हैं ताकि यह ग्रीर ज्यादा फैल सके ?

DR. GEORGE: Homoeopathy was introduced here by the missionaries from outside. Then, some of the teachers took the responsibility of promoting homoeopathy as a gospel to the poor people. So, the poor people are now getting the advantage of homoeopathy and they are having more belief in homoeopathy.

श्री इसहाक साम्प्रली : मिस्टर चेयरमैन, मैं एक ग्रीर सजेेशन चाहूंगा कि इस होम्यो-पैथिक कौंसल फिन में जो नौमिनेशन प्रोवाइड किया गया है, मापकी इस वारे में क्या राय है ? केरल को देखते हुए श्रौर यहां पर होम्पोपैथी के वर्क को देखते हुये, क्या यह पसन्द करेंगे कि इस विल में जो नौमिनेशन का सजेशन दिया गया है, उसकी जगह इलैक्जन रखा जाय ?

DR. GEORGE: I have already said that it should be election. Thereshould be no nomination. We desireonly election.

श्वी इसहा : साम्भली : मिस्टर चेयरमैन, मैं यह जानना चाहता हूं कि आपका क्या यह ख्याल है कि हमारे जो एजुकेटेड यंगमैन हैं, वे ग्राज होम्योपैयी की भ्रोर ज्यादा ग्रटुंक्ट हो रहे हैं और इस वजह से हमें होम्योपैथी सिस्टम को ज्यादा बढ़ाना चाहिये ताकि हमारे जो विलेजेज हैं, इंटिरियर एरियाज हैं, जहां मेडिकल एड नहीं पहुंच पाती है, वहां पहुंच सके । इसका नतीजा यह होगा कि यंगमैन को इनकरेंजमेंट मिलेगा, इम्पलायमेंट मिलेगा और इस चीज की भागे बढ़ाया जाः सकेगा । हमारे इंटिरियर में पूछर पीपूल्स रहते है और उनकी भी इस तरह की सहायता की उम्मीद हो सकती है खासकर के केरल की प्रघर हालत को देखते हुए । तो मैं जानना चाहनी हं कि इस बारे में झापका क्या-ख्याल है ?

DR. GEORGE: If the Central Government allows some more dispensaries, some more projects in homoeopathy in Kerala, several youngmen. can be provided with jobs.

श्री इसहाक साम्भली में जानना चाहता हूं कि जहां तक मेडिसिन्स का भवाल है, मैं केरल के बारे में नहीं जानता हूं, लेकिन जहा तक नार्थन इंडिया का सवाल हैं, वहां पर इम्पोडेड मेडिसिन्स यूज होती है-नो क्या ग्रापके स्थाल में यहां पर होम्योंपैयों मैडिसिन्स की इंस सरह से मैन्यूफिकचरिंग हो रही है दि वह इंग्पोर्टेड मैडिसिन्स की जगह ले सर्फे ?

DR. GEORGE: As soon as the import restrictions were put, we were getting medicines from Calcutta because the Calcutta Government had made some concessions in the duty on spirit. So, we were getting it from Calcutta. We are also manufacturing some of the medicines. The All Kerala Homoeopathic Federation is going to start a limited concern for manufacturing homoeopathic medicines.

SHRI PRASANNBHAI MEHTA: How many unregistered doctors are practising in Kerala State? . -- --

. . DR. GEORGE: About 5,000.

SHRI PRASANNBHAI MEHTA: Are they qualified? . -

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·· -• , DR. GEORGE: There are in addition 3,000 unregistered doctors.

SHRI PRASANNBHAI MEHTA: Are there any rules framed by your organisation to register or to give recognition to the newcomers who have not got any qualification?

DR. GEORGE: We are pressing the Government to bring such medical practitioners into our fold and for extending it to the Malabar area. The draft Bill is with the Government and a Select Committee has been formed. Further, we are conducting refresher courses for unregistered and unqualified doctors to get themselves more qualified. In all the dispensaries we have got refresher courses conducted once monthly.

SHRI PRASANNBHAI MEHTA: In your opinion, is it not desirable to prevent unqualied persons from coming into the sphere of homoeopathy?

DR. GEORGE: Yes, it is better to prevent unqualified practitioners from coming into this field. It is our desire and aim to bring all the existing gualified and unqualified into our fold and bring them under the control of Government's registration. Thev should be registered. .

MADHURYYA HALDAR: SHRI Gentlemen you are associated with some associations and you just now told us that there are some unqualified doctors. By this you mean that there are some people who have under oneyear training or two-year training. They are almost unqualified and quacks. I ask you whether a short course can be recommended for the benefit of the poorer people and for the benefit of the country as a whole. What do you suggest?

DR. GEORGE: I have already said that they may be qualified by having one-year course or two-year course. Some doctors can be employed in the villages to treat the poor people.

SHRI MADHURYYA HALDAR: My next point is this. You have seen the penal provision in the Bill. If a homoeopathic doctor or an allopathic doctor administers a medicine of a different system some sort of penal provision is in the Bill. What is your reaction to that?

DR. GEORGE: Some homoeopaths are using allopathic drugs. In the homoeopathic colleges they are treating through Materia Medica. But the other unqualified doctors study only symptoms: ... Homoeopathie ... college people treat through pathology. Unqualified doctors are not able to treat through allopathic medicines because they do not take the help of pathology. Those who do not take time to find out the symptoms do treat quickly and use allopathic drugs also. Therefore this whole question should be seriously thought over,

SHRI MADHURYYA HALDAR: We are a poor people particularly when we have got agricultural labourers and factory workers who want immediate cure to go to their work after some ailment. These go to homoeopathic or allopathic quacks. If a homoeopathic quack administers some allopathic drugs to bring quick relief to the patient he is liable to be punished

DR. GEORGE: Yes, he must be punished.

DR. JUGAL KISHORE: The question is in matters of health we should have some basic minimum course. We trannot have any short cuts that way. There has to be certain amount of basic education and experience. Our people can be looked after by people who need not go through the full course but they should have the basic knowledge and experience to treat. This is my submission.

SHRI MADHURYYA HALDAR: In today's papers I saw some advertisement about postal training. How do you react to postal training?

DR. JOHN: This should be stopped.

DR LAXMINARAYAN PANDEYA: May I know if all the 3,000 or 4,000 members who are registered with your Federation are full time members practising homeopathy?

DR. GEORGE: Yes, they are practising homeopathy full time.

DR. LAXMINARAYAN PANDEY: Do you think that biochemic system of medicine is part of homeopathic system or should it be a separate system?

DR. GEORGE: Usually biochemic and homoeopathic systems go hand in hand because the system of manufacturing is the same. In my opinion homeopathic system includes biochemic also.

CHAIRMAN: I have one question to ask. I find from my experience that mental tension cases are mounting up very much all over the country. It may be on account of political aspirations, political frustration, economic frustration, social disorder and many other things. But a_S a layman I find that the pathological examination undertaken by the allopathic system on the basis of which the treatment is administered, by and large, excludes mental tension unless, of course, tension borders on lunacy or insanity. But below insanity level mental tension is not taken into consideration by allopaths. Do you think that specialised psychiatric training should be given to homoeopaths so that the sub-insane cases' treatment may be more effective and broadbased? I have been a member of the Ranchi Asylum Committee. I know that people who could have been cured effectively, on account of imprisonment and closed-door habitation given to them and the treatment given to them, become confirmed lunatics while these cases could be treated at home had they been put under observation by some psychiatrist.

DR. GEORGE: For mental cases homeopathy is more effective than all other systems I believe. We have got special provision for mental diseases. In the Materia - Medica and other books more importance has been given to mental diseases.

DR. JOHN: In homoeopathy such mental cases can be treated more effectively. Some most chronic cases have been treated by us.

CHAIRMAN: I am myself a patient of that nature. I would ask our Adviser Dr. Jugal Kishore, to give us a reassuring position.

DR. JOHN: Sir, as you suggested, it may be a nice idea to give some special training to those who come out from institutions.

DR. JUGAL KISHORE: Mr. Chaizman, Sir, I agree whole-heartedly with your proposition that our homoeopathic graduates should be 'given some training in mental diseases. We are the pioneers so far as treatment of mental diseases is concerned. Before Hahnemann patients were chained and treated brutally. He was the first person to suggest more human approach to mental cases. Therefore, he was well known for his treatment of mental cases. The Materia Medica is full of remedies to be given in cer-

tain conditions on mental tensions. Mental tension these days is definitely increasing because of the tempo. We are living fast life. More problems have been created by speed, by ambitions of man today. There is tension from the physical to mental situations. But there are sometimes organic discases also of the brain which stimulate as mental diseases. For example, the tumour in the brain can bring you to a state of anxiety which may look incurable. First of all, we have to remove the cause. Apart from the cause, there are endogenous mental diseases, something inborn in your system. There are others that lie in the realm of drug therapy for exhaustion from mental strain and brain work. Arnica may be given. Kali Phos is given to students and tense children. For young girls during the puberty period homeopathy is very good. We have other set of remedies also for illusions and delusions. Of course, we have enormous range of remedies but we have to individualise each case of mental tension. That is why we have gone deeper into that. People have more faith in us because we study the whole organism.

SHRI MUHAMMED KHUDA BU-KHSH: May I ask one clarification? If I have understood Dr. Jugal Kishore is he thinking of evolving a specialised post-graduate curriculum stressing the psychological and psychiatric aspects of a patient? Does he think of including it in the normal curriculum of the courses that he has in view?

DR. JUGAL KISHORE: It can be done at both the levels. I feel when we start the degree courses we must have a few lecturers on psychiatry. That is very important. In the general scheme of things it is not merely giving of the drugs, you have to know the symptoms and other things. Then you have to treat accordingly. It is not a question of merely prescribing a drug but you have to remove the form complex that might have been produced in the early life. One experi-

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enced allopath Graduate developed frequent urination trouble. He could not control it whenever he went out... For five years he suffered like that. As the Chairman said, the pathological reports in the case did not give anything. Now the story goes that once he went for shikar somewhere in U.P. ' It was a very hot day and he felt the urge for urination. He sat down but there was no urination.

Being a doctor himself he felt that something serious has happened as towhy he was not passing urine. That came as a serious shock to him. After that episode this particular symptom. started. There was a physiological. reason. He said it was very hot and he had not taken rest for quite sometime. Possibly there was a lack of fluid in the body as a whole and therefore he did not pass urine. He came to me after five years of the onset of the symptoms. We have in our materia medica a particular drug for complaints from fright. It is called aconite. I gave it to him in single dose of 1000 potencies. Two or three years have passed since then and he did not have come to me again after using that medicine. Similarly there are cases of mental tension which none of the allopathic paraphernalia could cure.

SHRI N. P. CHAUDHARI: On behalf of the honourable Chairman and the honourable Members of this Joint Committee I extend my gratitude to you for having come over before this Joint Committee and giving your views on the Homoeopathy Central Council Bill. I assure you that when this Bill is considered by the Committee, the evidence tendered by you will definitely be kept in view. I thank you once again.

WITNESSES: Thank you very much, Sir.

(The witnesses then withdrew.)

[The witnesses: Dr. K. A. Joseph, Principal, Homoeopathic Medical College, 28. West Ponnagram 8th Street, Madurai 10 and Dr. K. T. Thomas, "Kirupa Nilayam", 90, Venkatesa Colony, Pollachi, Tamil Nadu were called in.]

DR. K. A. JOSEPH: I am the principal of the Homoeopathic Medical College, Madural. It is a college which is not so far recognised by the Government of Tamil Nadu, because the Council has only recently been formed and we have forwarded our application to the Council. The Council has not yet taken a decision on that. I am holding D.M.S. from Bengal. I am also a member of the Council of Homoeopathy, Tamil Nadu.

DR. K. T. THOMAS: I am also one of the Council members of the Tamil Nadu Homoeopathy Council

SHRI SULTAN SINGH: You have started a diploma course or a degree course?

DR. K. A. JOSEPH: A diploma course of 41 years.

(SHRIMATI PURABI MUKHOPADHYAY in the Chair).

DR. K. A. JOSEPH: In the proposed Bill it is provided that members of the Central Council should have a qualification. recognised Page 2, Chapter II Clause 3, Sub-clause (a) reads: "Such number of members not exceeding five to be elected from each State" and these members must have a recognised qualification and they also must be registered in the State. There is a practical difficulty. The voters are different practitioners in the State, some possessing qualifications and some without any qualification. There are voters who are qualified and with experience. There are also voters who are not qualified and who have only experience. The number of practitioners who are not qualified is much larger than those who are qualified and experienced. And the election of members will be according to the decision of the nonqualified people. The qualified people in this way cannot have a voice. They will not have any choice in the decision. This will definitely affect the 'system,

affect the qualified persons?

DR. K. A. JOSEPH: Yes. And the progress of the system also. In most of the States the number of unqualified practitioners is far higher than that of the qualified practitioners and thus the member elected is only the choice of the unqualified practitioners and even though he may be a qualified practitioner, still he will be interested more in the unqualified practitioners...

CHAIRMAN: We have got your point. Please come to the next point.

DR. K. A. JOSEPH: Hence separate representation should be given to the A Class practitioners and there should be a separate representation to the B Class practitioners or there should not be voting for the B Class practitioners. Or, if there is voting for them, there should be separating voting for the A Class practitioners. In the same clause it is said one Member from each University. This is to look after education but most of the States in India have no universities looking after homoeopathic education. In all these States regularly constituted Councils or Boards of Examiners are having the same powers as a university. If the Universities are given representation in the Central Council, why not the Boards and Councils in the States be given representation? If a University is there in a State with a faculty for Homoeopathy then the Council need not be represented. Wherever there is no University the Councils doing those functions should be represented. Clause 3(c) says 30 per cent may be nominated, These may be persons having qualifications as well as others and I suggest that B Class practitioners should also be separately elected. If there is such election then nomination need not be this much. If there is provision for election for them then the percentage of nomination could be reduced and it may be restricted to a few official members. If my suggestions are accepted then

provision will have to be made on page 3 in clause 5.

CHAIRMAN: These are consequential amendments.

DR. K. A. JOSEPH, I suggest there should be compulsory periodical refresher courses for both practitioners with experience as well as with qualifications. Once in five or ten years every registered practitioner must attend refresher courses for one or two months and this must be made compulsory. This will greatly help him to enlarge his own professional knowledge. Today we find even many of the trained practitioners are not aware of the recent developments in the system. Some sort of compulsion is necessary to give them more knowledge in the system; particularly those people who are in practice without any qualification will find it extremely useful but some amount of compulsion is necessary.

In this field I feel two aspects are there, education as well as paucity of medicine, the knowledge of the homoeopath as well as the availability of the medicine and the genuineness of the medicine. These are two important aspects for successful practice of homoeopathy. In the Bill many steps are envisaged to control education of the homoeopaths anđ improve their standards but nothing is done to control the manufacture of homoeopathic medicines. Today we find in the market some medicine is available for one rupee with one dealer while the same medicine of another manufacturer is available with the dealer for Rs. 5. What is the difference between them I cannot understand. One may be genuine and the other may not be genuine and sometimes both may not be genuine. I cannot decide which is the genuine medicine and which is not, the cheaper one or the costly one. Some kind of supervision over the manufacture of homoeopathic medicines is necessary. Power must be given to the

Central Council and the Central Council should see whether the particular manufacturer is competent to manufacture the particular medicine. There must be some sort of technical supervision. I feel that the Central Council is the competent body to do that and a fresh chapter has to be inserted in the Bill for the control ' over the manufacture of homoeopathic drugs and over the homoeopathic pharmacies just as we have a chapter for the control over homoeopathic education.

In the First Schedule of the Bill representation for each State is given depending upon the total number of practitioners with qualification as well as with experience. In most of the States there may be many practitioners and the number of A Class practitioners compared with B Class will be very few. In Kerala A Class number about 600 or so while B Class may be more than 5000. If both of them together formed the electorate (the decision will be mainly of the B Class practitioners and A Class practitioners will not have any voice. That is why I feel A Class practitioners should elect their own candidates and B Class practitioners should elect their own candidates. That is what is done in Tamil Nadu. In this way each class will have its own representation and there will not be any clash between the two categories of people. I feel this will be more democratic than what is provided in this Bill. A section of the people is given voting power but they are debarred from standing as candidate in the election and I feel this is undemocratic. Why can't they have some seats reserved for themselves and similarly people with qualifications can have some reserved seats for themselves and they can elect their 🔨 own candidates.

In the Second Schedule a number of qualifications are included. In Kerala the L.R.C.H.P. of the Royal College of Homoeopathic Physicians has been recognised, that is, the diplomas issued

up to 1966-67. This college was functioning for many years and in 1958 the Kerala Government passed a rule that the D.H.M. syllabus $4\frac{1}{2}$ years' duration is to be followed. That is the syllabus which all the colleges follow now but this particular college did not follow that syllabus and they went on with their two-year diploma courses. Then they applied for recognition. The Kerala Medical Council inspected the College and recommended that this is not a worthy qualification and the Government rejected their application for recognition. Then three Sub-Committees were sent to inspect the College. The first Committee said no, the second Committee said no but the third Committee said yes. The Governor at that time was transferred from here and the day previous to his departure he passed order that the above qualification is recognised in spite of the fact that the Medical Council had objected to it and two other Committees had objected to it. On the plea that the third Committee approved it the Governor passed the order. I feel that this qualification is not worthy of recognition after 1958 because it was in 1958 that the Kerala Government passed the rule. Similarly I find many other State Councils in Bombay, Delhi, Calcutta etc. conducting examinations and issuing diplomas. Usually a candidate has to sit for the examination only through a recognised college but these candidates were permitted to appear directly for the final examination and those who passed were given the diploma. They stopped the procedure after a few of them got the diploma. There are a number of persons like that in Bengal. In Delhi DHS many candidates got their diplomas like this without having a standard equal to the four and a half year diploma course. There difference between must be some these diploma holders and the regular diploma holders.

That is all. I think I have finished my points.

DR. K. T. THOMAS: Mr. Chairman, hon, Members, worthy Adviser to the Government of India in the Ministry of Health in the homoeopathic field, Dr. Jugal Kishore, I would like to thank the Central Government having set up the Select for Committee to consider the Homoeopathy Central Council Bill. I also appreciate the painstaking sittings of the Committee here for the last threeor four days to collect on the spot opinion about the formation of the Council. I quite agrée with Dr. Joseph's opinion regarding the constitution of the Central Council and I also feel that both the types of practitioners those with recognised qualifications as well as those registered on the basis of experience should have proper representation. The present position of giving voting power to them to elect only candidates with recognised qualifications is not a desirable one and I feel....

SHRI MADHURYYA HALDAR: I think the witness should mention only those points which the other witness has not touched upon.

CHAIRMAN: Members would like to tell you that you need not repeat the points over again, points already made by your colleague. If you have anything fresh to add you can do so.

DR. K. T. THOMAS: All right, Sir.

SHRI MADHURYYA HALDAR: Of course, if you differ from him you may mention.

DR. K. T. THOMAS: I fully endorse the views expressed by my colleague. Apart from that I would like to make it clear that in this matter Tamil Nadu rather stands alone in having qualified practitioners. The majority of the practitioners belong to the category of people who are going to be registered on the basis of experience. Of course there are people who are doing excellent work and to deprive them of their legal right I feel would be an injustice to them. They have taken up homoeopathy as a means. of their livelihood and I

strongly feel that so far as Tamil Nadu is concerned due representation should be given to the people who are to be registered in the B Register in the State Council and they should also get representation in the Central Council till such times, when we will have enough qualified practitioners.

CHAIRMAN: Both of you are members of the Council. Am I right?

DR. K. T. THOMAS: Yes.

CHAIRMAN: Both of you will have to explain why your Council has not met even once. The registration that you are mentioning now is the registration by the District Magistrate alcoholic for the purpose of using preparations. You do not have any registration yet whether of A Class, B Class or C Class or anything of the kind. So you first do your part of the job; otherwise as soon as this Bill gets through Parliament your practitioners will be put to unnecessary hardship. Some of them will be debarred; some of them will be denied the privileges which their brothers will be enjoying somewhere else. So I would not be rude when I say that you failed in your duty as members of the Council of your State. Yours is the only State-excuse me for saying so-which has done nothing for the cause of homoeopathy and you are advocating the cause of the people who are not at all trained. About experienced doctors we have given full representation to them. There is no category of enlisted or inexperienced or those who are going to be registered. I have gone through the Act. This will not be in the spirit of the Central Council when this Bill goes through Parliament. You first meet and very soon get your people registered. Thank you.

DR. THOMAS: As for the Tamil Nadu Council there are certain technical difficulties. Soon after that is got over we will be meeting. We have been in contact with the Health Minister as well as the Health Secretary. He has promised that he will see that it is arranged as early as possible.

In the same way, I would like to refer to question No. 12. Why should not those homoeopaths who possess the required qualifications from recognised institution be allowed to F practise and why should not those who do not possess the requisite qualifications and whose names have been registered on the basis of experience by paying the prescribed fee be prohibited from being registered? As far as Tamil Nadu is concerned, as I told you earlier, there are genuine homoeopaths. Though they are not holding any recognised qualifications as such, they are doing yeoman service to the needy, suffering and poor patients. If you deny them the right to practise as homoeopaths, you will be depriving the suffering, ailing public of their services. So, there should be some provision to allow them also to continue their humanitarian service until such time when we will have only recognise and qualified doctors. The older generation is, one by one. passing away and the new generation is coming up. We have got time to qualify enough people. Until that time we have got to consider the legal people. claim of these experienced People at the helm of affairs in the old Madras State, the late Mr. Justice Somayya, the late Chief Justice of India Mr. Patanjali Sastry, Dr. Savoor, who was the Director of Public Instruction, were doing excellent service to homoeopathy. Homoeopathy is a science. It is not something blind or something which can be practised by any Tom, Dick or Harry. So we have to recognise the merit of those people who are in the field. If we deprive them of their practice we will be doing an injustice to the suffering, needy people in Tamil Nadu and in any other part of the country.

SHRI MAN SINGH VARMA: Dr. Joseph, you want separate representation for the qualified and unqualified people. I want to know from you what should be the system of representation. You have said that there is only a negligible number of qualified persons in your State. You said something like 9, whereas unqualified persons are in thousands. In your obinion what should be the system to r safeguard the interests of these 9 persons?

DR. JOSEPH: I would rather say for each State let there be one member without any qualification. For each State, irrespective of the number of practitioners, let there be one member from each State. For persons who are having qualifications, the ratio can be fixed depending upon their number. The number of representatives will also increase.

SHRI MAN SINGH VARMA: You mean where the number is 5,000 there should be one representative and where the number is 9, then also one.

DR. JOSEPH: The future of homoeopathy depends on the number of qualified people and not on the number of unqualified persons. Ŧ want to give representation to B class doctors also, so that they should come under the control of the Central Council. Let there be representation for them.

SHRI MAN SINGH VARMA: What should be the percentage for qualified persons?

DR. JOSEPH: I would suggest for the first thousand there should be one member, for the next two thousand, one member, for the next three thousand one member. The more the number, the lesser the representation or larger the ratio.

SHRI MAN SINGH VARMA: Do the 9 qualified doctors come in line with 1,000 doctors?

DR. JOSEPH: No, in Tamil Nadu I am sure there are 100 persons.

SHRI K. RAMAKRISHNA REDDY: You were saying that on unqualified persons there should be no restriction at all and that in Tamil Nadu there is no qualified or unqualified regis-1648 RS-22 tration. As such, how do you recommend the unqualified persons to practise?

DR. THOMAS: People who have distinguished themselves in the field of healing, those treating the sick should be recognised. People who have had long experience and who have proved their merit should he treated as doctors. As our hon. Chairman has said, it is a dose to us. Our Council has not met even for once. Only we had the inauguration of our Council by our Chief Minister. We will be meeting soon and we will hurry up with the registration. When the registration opens such of those people who are recognised as genuine significant homoeopaths and doing service to the needy and poor will be taken into consideration. not any Tom, Dick and Harry. Those who have the required qualification.

SHRI K. RAMAKRISHNA REDDY: You were saying that anybody can practise. You gave the example of the late Shri Patanjali Sastry and others. Even though Shri Patanjali Sastry was the Chief Justice of India, he was not an expert in homoeopathy.

DR. THOMAS: I did not say that Mr. Patanjali Sastry was an expert in homoeopathy. They were the people who were patronising homoeopathy. They made the public know the merits of homoeopathy.

SHRI K. RAMAKRISHNA REDDY: You should also abide by the rules and regulations of the system. If you are to abide by rules and regulations, you have to be registered. You were advocating all the time without registration, without doing anything they should be allowed to practise, which is not correct. I think you will agree with me.

DR. THOMAS: I think you have misunderstood me. You did not understand me fully. I did not say recognition or registration of people without adequate and requisite knowledge, but only people with experience and people who have knowledge of homoeopathy. I do not mean people without any knowledge.

CHAIRMAN: Thank you, doctors, for having come from far away to give your evidence. Try to have a meeting of the Council as early as possible.

DR. JOSEPH: It is only a technical difficulty. The Government is insisting that before the Council's first meeting the rules should be framed. We cannot meet till the rules are approved. That is why there is some delay in the meeting of the Council. We are pressing the Government.

Thank you.

[The witnesses then withdrew].

The witness [Dr. M. P. Parameswaran, B.Sc. (Engg), Assistant Director, State Institute of Languages, Kerala, and Secretary, Kerala Sastra Sahiiya Parishad was called in].

CHAIRMAN: Please introduce yourself. Whatever you say here should be treated as confidential.

WITNESS: I have come here not as a representative of doctors, but as a representative of the patients and more as a representative of the scientific community. I am an engineer and writer by profession. My father was an Ayurvedic physician. I have several friends among homoeopathic and allopathic practitioners. Whenever an illness occurs in my family I make, based on my experience and knowledge, a selection of the best system of treatment and approach a suitable doctor. As far as amelioratory effects of treatment are concerned. I have found neither any superiority nor any inferiority of any one system as such over the other system. However, I know that the majority of diseases are self-limiting ones and that conclusions based on curative results alone cannot be fully relied upon. Further I also know with my elementary knowledge in chemistry that homoeopathic medicines above 12th potency cannot have a single atom of the so-called medicine. This makes one sceptic about the system. I have read 'Organon' once. From that I understand that 'proving' of medicines is the most crucial element in the development of homoeopathy. I also understand that proving experiments conducted on normal healthy human being give conclusive and positive proof about the efficacy of the medicine and the system.

However, it is strange to note that none of the institutions in Kerala imparting training in homoeopathy conduct or has over conducted a reproving experiment; perhaps, this may be the case with other institutions too in India.

I have been trying to make them organize a reproving experiment for the past many years, but without any success. An experiment, naturally a haphazard one, conducted by me failed. Myself, my wife, two children and a friend took Aconite-30, six dozes at one hour interval. Nothing happened. I firmly believe that no homoeopathic course should be recognised if it does not conduct reproving experiments, because it will tentamount to recognising an M.B..B.S. degree without anatomy and dissection.

I am also of the opinion that the antagonism now existing among the three systems is very much unscientific and anti-social. I suggest that proving experiments involving doctors from other systems, mathematicians, physicists chemists engineers etc. should be organised and that the scientific community should be made to take a view as to whether homoeo- . pathy is more psychology and quackerv or science.

Scientists in India, including allonothic and homoeonathic, should take up this challenge. Only after a series of successful proving experiments the homoeopathic Central Council Bill

should be finalised. Presently the attitude is to call only allopathy a medical science from the primary class or the child up to the last stage, allopathy alone is considered a scientific system. This creates in every child hence in the citizen, a dislike for other systems i of medicine and this deprives him of taking an intelligent decision, when the necessity arises, to make use of other systems. Scientific system against superstition is understandable. But it would be gross injustice if allopathy alone is considered scientific and other systems are considered superstitions. The scientific community should be made to accept that the homeopathic system also is a scientific system and the independence of the different Councils from each other should be taken as mutual indifference. On the basis of reproving and experimenting the scientific community should be forced to accept homeopathy as а science. We should teach our school children accordingly.

I have to tell you that for the past eight or nine years I have been bothered about this problem. I have been canvassing with my scientist brethren. I have been interviewing senior scientists in the Bhabha Research Commission finding out their opinion. The opinion of almost every one of them is that homeopathy is nothing but a psychological thing. My personal experience does not prove that. But my experience is based only on the curative value and not on proving. I have been trying to organise scientists not only here but in Bombay also but I have not succeeded so far.

The problem I want to pose before you is that unless we are able to convince the scientific community as a whole that homeopathy is a science we are not going to get any benefit out of this Bill because the people at large, taught as they are in a different educational atmosphere, think allopathy as science and they gradually develop a disbelief in all other systems and it is difficult to use the advantages of this system. Therefore, L submit berore you to consider this and make some arrangement-I do not know how-before the Bill is passed to create public opinion. Then the passage of a Bill in Parliament carries some respectability with it. The homeopathic community will be shielded from attacks because there will be a Central Council for Homeopathy. It will be good not only for the system but also for patients like me because I want the people to take to it more and more and not become sceptic. That is why I have come before you.

CHAIRMAN: Thank you, Dr. Parmeswaran, for your very valuable suggestions. We will give due consideration to your views; they will receive due consideration from our Members.

[The witnesses then withdrew].

[The witness Dr. K. U. George, Assistant Director (Homeo), Government of Kerala was called in].

CHAIRMAN; Dr. George, you are here as a witness on behalf of the Kerala State Government. Of course, by this time we all know what you are doing for the cause of homeopathy. Kindly give us a resume.

DR. K. Z. GEORGE: Madam Chairman, as is customary I may be allowed to introduce myself though I am very well known to all the hon'ble Members. Still, my name is K. Z. George, I graduated in Botany and Chemistry and then I took my diploma in homoeopathic medicine from Calcutta in 1959. After that I entered into government service in 1961 as Medical Officer. In 1962 I was promoted to the Chief Medical Officer's post and I was in charge of the Homoeopathic hospital which VOU have seen in Kurichi. I was in charge of that hospital for nearly seven years. I take a little bit of legitimate pride in saying that it was I who built up that hospital and brought it to this stage, of course, with the kind help of my Government.

In 1968 the Assistant Directorate was formed in the State and, naturally, as the seniormost person I was promoted as the Assistant Director of Homeopathy. The Assistant Directorate, though it is functioning as a separate office, it directly under the control of the Director of Indigenous Medicines. The Director of Indigenous Medicines is an Ayurved qualified man. Under him there are different sections. The one for homeopathy is being looked after by the Assistant Director (Homeo) while Siddha, Unani and some other sciences are placed under the same Director; there is no separate Assistant or Deputy Director for the other systems because there are very few institutions under these sections.

As far as the homeopathic section is concerned, we have got 57 dispensaries at present and 4 hospitals. Of the four hospitals one is a 100 bed hospital at Kurichi, the second a 50 bed hospital at Trivandrum, the third, a 25 bed hospital at Ernakulam and another 25 bed hospital is in the northern-most part of Kerala, namely, Nileswaram. The total number of beds comes to 200. By virtue of my office and even otherwise I have been asked to serve as a member representing Kerala State in the Central Homeopathic Advisory Committee. I am the Member-Secretary of the State Homeopathy. Being the Chairman of this is headed by our Health Minister. Ι have been the President of the Medical Council. There is the State Homeopathic Advisory Committee where the Chairman is the honourable Health Minister. Because of his interest in homeopathy and homeopathic medicines he wants to have first hand homeopathy. Being the Chairman of this Advisory Committee he himself has taken upon himself the responsibility.

I also happen to be the President of the Homoeopathic Medical Council. It is also a statutory body functioning in the State. There is the Examination Board which is regulating and supervising academic courses in the State controlling the three academic colleges which are under the private sector. By virtue of my position as Assistan: Director (Homoeo) I had been the Chairman of this Examination Board also. In fact, almost all the functions (that my Director is doing for Ayurveda I am doing for homeopathy. That, I think, gives a resume of the work done by me in this State.

Regarding institutions, as I told you. there are 57 dispensaries and 4 hospitals. The hospitals are under the charge of Chief Medical Officer assisted by a few Medical Officers, the number being regulated by the number of beds allotted and the work to be turned out by each institution. For example, in Kurichi where there is a 100 bed hospital there is one Chief Medical Officer, two regular Medical Officers and four partime honorary Medical Officers, In Trivandrum there is one Chief Medical Officer, one regular Medical Officer and 2 full-time honorary Medical 🔎 Officers. In Ernakulam there is only one Medical Officer and a Chief Medical Officer. In Nileswaram there is one Chief Medical Officer and one Medical Officer.

As I told you, I was representing the homeopathic section of this Department which is under the supervisory control of the Director of Indigenous Medicine though the immediate authority controlling and organising the section is the Assistant Director (Homeo). There are three teaching institutions in the State. All these teaching institutions are in the private sector, one run by charitable societies by registered under the Charitable Societies Act, the Athurasramam Charitable Trust runs the Kurichi hospital. Then there is the Trivandrum Homeopathic Medical Trust running a college. One salient feature which I would like to emphasise is the encouraging attitude taken by our State Government. The hospital for these colleges which forms the major part of expenditure is borne by the State Government. There is the 100-bed

hospital which you have seen at Kurchi. There is the 50-bed hospital which you have seen in Trivandrum. And there is the 25-bed hospital at Ernakulam. All these hospitals are Government institutions and the facilities for clinical studies for the colleges attached to these hospitals are being given to them. That means the Government is taking a good amount of interest in the working of these institutions and covering a major part of the expenses for homoeopathy education. These colleges are guided and controlled by a Board of Examiners, as I have indicated. And the body consists of nine members at present, all homoeopathy doctors headed by the Assistant Director as chairman and the principals of colleges and private practitioners, etc. are members. And this Examination Board supervises the college, inspects the college, sees that a definite syllabus is followed in the college, sees that the standards are maintained in the college, conducts examinations and awards diplomas. Sometime up to 1971 we were having State syllabus and we were giving D.H.M. diploma-diploma in homoeopathy medicine. And from 1971 onwards we have switched on to the Central syllabus, D.H.M.S. And our first batch will be coming out of the colleges next year completing the D.H.M.S. examination. That is all about the institutions.

Coming to the Medical Council, this that is a statutory body. I may say Kerala is divided into three parts for convenience. One is the former Travancore State; the second is the former Cochin State; and the third is the former Malabar area. This recognition of homoeopathy, we could date it back to 1943 when we were having a Travancore State here. Our Maharaja was well disposed towards homoeopathy and there was a Bill enacted in the Travancore Assembly recognising homoeopathy. Actually the Bill was known as the Travancore Medical Practitioners' Act. Registration was going on according to that Act and subsequently the merger of Travan-

core and Cochin took place and the Travancore-Cochin State was formed in 1953 and the purview of the Bill was extended to Cochin. So the Act Travancore-Cochin also became the Medical Practitioners Act. After the formation of Kerala State unfortunately we were not able to push a similar Bill covering all the parts of Kerala. Then fortunately a Bill covering all parts of Kerala including Malabar has been presented in this session of our Assembly and it has been referred to a Select Committee very recently and we are expecting that this Bill will also be shortly enacted. That means the Kerala Medical Practitioners Bill will be enacted to cover all Medical the parts of Kerala. The Council consists of five members representing various districts in the State. And the Assistant Director, as I have indicated is the President of this Medical Council. The main function of this Council is to control registration, to keep up the ethics of the medical practitioners. We have got at present, to be very precise, 703 A Class registered doctors—that is, institutionally trained-1489 B Class registered doctors-that is, they are not institutionally trained, but they have got experience of a certain number of yearsand 278 enlisted doctors. Till 1953 when the Bill was enacted the provision was that everybody who had five years of experience or practice was allowed to register himself in B Class. But there had been some people who did not complete the prescribed five years, but had some two years or one years or six months' practice, and such persons were allowed to enlist their names and they continued to be so because there was no provision for further registration. And these practitioners were called enlisted, but they enjoyed all the privileges of the B Class doctors. The only thing was they were not included in the voters' list which was given to the B Class doctors.

CHAIRMAN: Why are you not giving them proper registration if they 326

have finished the required period for **B** Class?

WITNESS: In 1953 when the Bill was enacted there was no provision for those who acquired this kind of qualification later on because the registration was started at that level.

CHAIRMAN: I understand that a Bill is in the Assembly. Did you give any provision for those people to get proper registration?

WITNESS: I understand that there will provision for these people also to get registered in the B Class this time.

1 Coming to the department side may say that my Government have been very helpful to us, especially the present Government which is a Coalition Government, and our honourable Member, Shri Sreekantan Nair's party also forms an active member of the Coalition Government. And they have been very helpful and considerate towards homoeopathy. I may cite one example. Recently the Budget sanction for us was only Rs. 8 lakhs for homoeopathy. Unfortunately those funds were not at all sufficient for us, and my Minister was kind enough to divert nearly Rs. 2.5 lakhs from other sources-I may put it plainly-from the Health Service Department for the use of homoeopathy Section and our expenditure exceeded the estimate and we were able to spend Rs. 2.5 lakhs, more than what was allotted to us.

T think I have given a short summary of the progress of homoeopathy in our State.

CHAIRMAN: Thank you. It was very clear.

SHRI MADHURYYA HALDAR: Dr. George, you have said so many things, but you have not mentioned about the amounts you have been spending for the education of homoeopathy, on the homoeopathy colleges. Can you tell us what the amount is?

WITNESS: Up to this time we were nut giving any money to the colleges except some ad hoc grants which were being sanctioned to certain institutions, say, Rs. 20,000 per year or some_ thing like that. But lately the present Cabinet have evolved a grant-in-aid scheme by which the Government will be taking a very active part in the educational facilities also. The scheme is like this. The institutions will submit an audit report of their expenditure. The source of income for the colleges is, after all, the fees collection, etc. So definitely some sort of deficit will always be there. On their part the Government have come forward to give two-thirds of this deficit and one-third of deficit should be met by the management themselves. And accepting the recommendation of the Advisory Committee the Government have almost expressed their willingness to give 85 per cent of the deficit to the management, and the management will have to find sources for the balance of 15 per cent deficit.

CHAIRMAN: Friends, I forget to tell you, you may remember that we wanted to know the figures from that college, Aruthrashramam: Within halfan-hour they found the papers in their file and they handed over that to me as soon as I reached the MLAs' Hostel. That I gave to the Health Ministry. So we wanted them to submit their report. And it was there in the file and they handed me over that file when I reached the MLAS' Hostel and I handed it over to the Health Ministry. If any of you are interested to see the break-up you are welcome . . .

SHRI MADHURYYA HALDAR: Madam, since you have made a mention to it, may I put a question to Dr. George in that connection?

CHAIRMAN: Yes.

SHRI MADHURYYA HALDAR: Dr. George, on last Sunday when we went to the college you remember the students were demonstrating and shouting slogans. They had some grievances and on that Madam Chairman and Members put some questions regard-''ing the expenditure or utilisation of money which they received as grants from the Central Government. And the students complained of misuse or

State Government. When some Members of this Committee wanted to know the utilisation of the ratio of different grants, they could not satisfy the Committee with their expenditure reports. And they always said that we had submitted our report to the State Government and the Central Government. And this was all their explanation. I want to know whether you have seen their report or not, their audited and accounts report or whether you want to go into the matter regarding the complaints of the students.

WITNESS: There had been complaints previously also. And the usual practice is that the college authorities will give an auditor's report to the Covernment and to the Directorate also, And we recheck it at random. Unless there is some gross irregularity noticed in the audit report, we cannot expect that there will be some sort of difficulty or anything like that. We take for granted that the accounts are all right. Some four years ago there was a similar allegation against that college and the departmental authorities enquired into the matter, but the departmental authorities were not able to find any gross irregularity except take for granted that the accounts are they were asked to correct. This time also since there is a very serious allegation, we had a discussion with the honourable Minister yesterday and the Health Minister said that if necesary the Government will be directing the officers to conduct an inquiry into the matter.

SHRI MUHAMMED KHUDA BUKHSH: You have mentioned before the Committee that you are in possession of papers relating to the questions that were raised and they were already in their file which they were not able to produce there, but later on the students reached the MLA's Hostel and handed them over to you and you have stated that you have forwarded the to the State Government.

CHAIRMAN: No, to the Health Ministry, because . . .

SHRI MUHAMMED KHUDA BUKHSH: So it has not been forwarded to the Health Department of this State?

CHAIRMAN: No, because we were anxious to know whether the money was spent properly or not. The State Government will have its own examination of records. We also want to know from the Centre whether it is being utilised properly. So I have handed over the papers to the Health Ministry.

MADHURYYA HALDAR: SHRI Madam, I have seen in different places that auditors also certify something which is not proper sometimes OL something which is not properly maintained. But they go on certifying okay, okay. In the case of utilisation of money the other day the Health Ministry staff-of the Central Government-mentioned that it was made for some instrument or equipment or Then physical something like that. verification of that item was necessary. I would request you to please convey this matter about physical verification to the State Government and see that the physical verification is done.

CHAIRMAN: Mr. Heldar, may I reply to your points? There are two things involved. One is the State Government and the other is the Government of India because the Government of India also gives money for the institutional training. So far as the Government of the State of Kerala is concerned, vou have just now heard from Dr. George, the Assistant Director, who is in charge of Homoeopathy, that the State Government will

institute an inquiry. And before that whatever enquiry they had, they were satisfied about the accountings. But there were certain procedural irregularities and they were not satisfied on that account. So they are going to institute an inquiry. So I think we should end the matter there because it is the State Government and also the college which are connected with it. Dr. George, will you please tell me? You are the Assistant Director of Homoeopathy. Your Directorate, you told us, is under the Indigenous system of medicine. So you are the absolute one person in charge of homoeopathy. Do you get a free hand about decision-making in regard to allotment of funds? If it is embarrassing to you don't reply but we would only like to know whether the decision of the one person who is responsible as Assistant Director is final.

WITNESS: Madam Chairman, I should say that my decisions are not final. I will have to convince my Director on many points.

CHAIRMAN: I understand your problem you do not have to reply any more. What about the staff? You have told us about the staff in colleges and dispensaries. Do you have enough Inspectors to inspect the colleges, hospitals_etc.?

• WITNESS: The staff allotted to me is insufficient and I have been requesting my Director and the Government to provide more staff.

CHAIRMAN: What about the pay scale? Do the MBBS doctors get a higher pay scale than the scale of the homoeopathic doctors?

WITNESS: The allopathic doctors are getting higher scale.

CHAIRMAN: What does your doc-'or get on his first entry?

WITNESS: First entrants get Rs. 225 as pay. Altogether he is getting nearly Rs. 398. CHAIRMAN: What are the other emoluments?

WITNESS: There is D.A.

CHAIRMAN: How much?

WITNESS: I am sorry I do not have the exact figures.

CHAIRMAN: THE total is?

WITNESS: The total comes to Rs 398.

CHAIRMAN: Anyway I am not concerned with the D.A. I am concerned with the basic pay.

WITNESS: It is Rs. 225 to Rs. 450.

CHAIRMAN: This is your first scale?

WITNESS: Yes, Madam.

CHAIRMAN: What is the next scale?

WITNESS: The next is Rs. 325 to Rs. 725.

CHAIRMAN: Is there any efficiency bar?

WITNESS: No, so far nothing like that.

CHAIRMAN: Now can you tell me the initial basic pay of a MBBS doctor here?

WITNESS: I think it is Rs. 300 to Rs. 600.

CHAIRMAN: See the difference. That means their second higher scale is the first initial scale for the MBBS.

DR. George, do you have any pharmacy here?

WITNESS: At present we do not have any large scale pharmacy. We have got a few small scale units manufacturing medicines. The Advisory Committee has recently passed a Resolution and have requested the Government to start a large-scale homeopathic pharmacy on a co-operative basis, in which 51 per cent of the shares will be taken by the Governpatent and the other 49 per cent will be distributed among homeopathic ctors, well-wishers of homoeopathy / Id others.

CHAIRMAN: Will you go through the evidence that was tendered just now by Dr. Parameswaran? In that he has given certain suggestions about these pharmacies, how to improve them and so on. You go through that and try to do something about this.

Now, Dr. George, for having given evidence before this Committee, on behalf of the Members present here I sincerely thank you for what you are doing for the cause of homoeopathy in the State of Kerala. Please convey our good wishes to the Kerala Government on this aspect because here we find that an attempt is being made to give homoeopathic coverage as far as possible to the rural areas. So the realisation is there about its importance and we are very grateful to the State Government for that.

Having said that, now have you to say anything about the Bill? You are an experienced officer and you can give us your views on the Bill.

WITNESS: I do not have much to say about the Bill except for one or two points. In the provisions of the Bill I do not see any representation given for the teaching staff and I submit that due representation may be given for the teaching staff of the colSHRI ZIAUR RAHMAN ANSARI: Not by election?

WITNESS: I feel that through nominations you will be able to get more competent people than by election.

CHAIRMAN: I think there is already provision for that. The Central Government has got discretion to nominate suitable persons.

SHRI MAN SINGH VARMA: Discretion is no provision.

WITNESS: Then we have representation for universities but unfortunately as has already been pointed out we do not have Faculties except at one University. Till such time when things improve, there should be nomination of teaching members from the colleges.

DR. JUGAL KISHORE: The question is, if we have representatives from the Boards and Councils unfortunately Boards and Councils are not uniformly constituted. You will find some of the people who are not competent as academic people are there like some lay Chairmen or Vice-Chairmen of the Boards. If these people come in the very purpose of having people from the academies is defeated.

WITNESS: There must be some representation for the teachers.

CHAIRMAN: Thany you, Dr. George.

The witness then withdrew The Committee then adjourned.

MGIPND - R.S. I-1648 RS- 5-3-73 -1200.

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Page 38, line 6, for "recieved" read "received".
Page 39line 22, <u>for</u> "mere" <u>read</u> "more". line 41, <u>for</u> "Miniutes" read "Minutes". <u>for</u> "decded" read "decided".
Page 41, line 16, <u>after</u> "Institute" insent "of" eighth line from the pottom, <u>for</u> "therefore" <u>read</u> "thereafter". fourth and third line from the bottom <u>for</u> "Fedration" <u>read</u> "Federation".
last line, for "Shri K.S. Rarachandra" <u>read</u> "Shri K.S. Ramachandra Murthy". last line, for "Octoiber" rend "October".
Page 53,line 6, <u>for</u> "Shrimati Purabi Mukhopadhayaya" <u>read</u> "Shrimati Purabi Mukhopadhyay". line 18, <u>for</u> "Shri Bhaoosahaib Dhamanker" <u>read</u> "Shri Bhaoosahaib Dhamankar". line 40, <u>for</u> "Representives" <u>read</u> "Representatives".
Page 54,line 21, <u>for</u> "Committee" <u>read</u> "Committee". line 28, <u>for</u> "Shrimati Purabi Mukhopadhayaya" <u>read</u> "Shrimati Purabi Mukhopadhayay".
Page 55,line 28, for "Dr. H.N. Barla" read "Dr. H.N. Barlas" line 36, for "Metting" read. "Meeting". line 40, for "Shrimati Putett Mukhoradhayay" 1923 "Shrimati Purabi Mukhopadhayay".
Page 56, line 8, <u>for</u> "Shri Muhammed Khuda Baksh" <u>read</u> "Shri Muhammed Khuda Bukhsh'.
Page 66, line 13, for "Shri Bamchanarın Kadannappaili" read "Shri Ramachandran Kadannappaili". line 20, for "Shri Ja «i Dallav Patnaik" read "Shri Janaki Ballav Fatnaik". fifth line from the bottor, for "Dr. T.R. Chadda" read "Dr. T.R. Chaddha".
Page 67, line 29, <u>for</u> "Shri Man Singh Verma" <u>read</u> "Shri Man Singh Varma". last line, <u>for</u> "Shri Awdesn Chandra Singh" <u>read</u> "Shri Awdhesh Chandra Singh".
Page 68, line 12, for "Ebmeobathic" "Sittlergeoletnic". "Chri Man Sinch Versel" Page 69, line 12, for "Shri Man Singh Verma "read "Shri Man-
Fage 72, line 35, for "Shri Bhaoosahaib Dhumankar" mai "Shri Bhaoosahaib Dhamankar". "Shri Bhaoosahaib Dhamankar". Page 75, line 18. for "Shri Ziar Rahman Ansari"/read "Shri
Page 76, line 14, for "Under Sechary" read "Under Secretary". line 24, after "any" insert "State Register of Homosopathy and possess any". Page 80, line 41, for "Shri N.K. Jain" read "Shri M.K. Jain".

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REPORT OF

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THE JOINT COMMITTEE ON THE HOMOEOFATHY CENTRAL COUNCIL BILL, 1971 •

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Page (v), line 23, for "overnment" read "Government".
Page (vii), line 8, <u>doleta</u> " वैसा " - lina 16, <u>lor</u> " अस्ता " <u>read</u> " उसको ". - lina 22, <u>for</u> " माल्यता " <u>read</u> " मान्यता " - lines 26 and 28, <u>for</u> " राजाप्टार " read " (जिस्ट्र्स ". - line 37, <u>for</u> " जाना " <u>read</u> " जा- ".
Page (viii), line 7, for "or time" read "of time". -sixth line from the bottom, for "though" read "thought".
Page 11, line 24, after "additions to" and "amendments in" insert ", ".
Page 13, sixth line from the bottom, after "aforesaid" insert ", ".
Page 14, line 13, for "threat" read "thereat".
Page 19, line 13, for "sad" read "said"
Page 20, in the marginal heading of clause 15, for "qualification" read "qualifications included in the Second Schedule to be enrolled".
Page 25, line 8, for "Line Zazar" read "Line Bazar".
Page 26, Line 1, for "Kanrup" read "Kamrup".
Page 27, line 18, for "I.C.E.H." read "L.C.E.H.".
Page_31-Sr. No. 60, for "Meadnical" read "Medical" and for "Trivendrum" read "Trivendrum".
Sr. No. 61, for "Representative" read "Representative" and for "Superitendent" read "Superintendent".
Page 32, Sr. No. 74, for "Dr. Kripal Singj Bakhahi" read "Dr. Kripal Singh Bakhabi"

RAJYA SABHA

JOINT COMMITTEE

ON

THE HOMOEOPATHY CENTRAL COUNCIL BILL, 1971

EVIDENCE

(Volume II)



RAJYA SABHA SECRETARIAT NEW DELHI MARCH, 1973

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COMPOSITION OF THE JOINT COMMITTEE ON THE HOMOEOPATHY CENTRAL COUNCIL BILL, 1971

1. Shrimati Purabi Mukhopadhayay-Chairman

Members

Rajya Sabha

- 2. Shri Sasankasekhar Sanyal
- 3. Shri Bhupinder Singh
- 4. Shri N. G. Goray
- 5. Dr. K. Nagappa Alva
- 6. Dr. Debiprasad Chattopadhyaya
- 7. Shri Sitaram Kesri
- 8. Shri Man Singh Varma
- 9. Shri T. K. Srinivasan
- 10. Shri K. C. Panda
- 11. Shri Manubhai Shah
- 12. Shri Sultan Singh
- 13. Shri N. P. Chaudhari
- 14. Shri T. G. Deshmukh
- 15. Shrimati Savita Behen

Lok Sabha

- 16. Shri Ziaur Rahman Ansari
- 17. Shri Vidya Dhar Bajpai
- 18. Shri Kushok Bakula
- 19. Skri Muhammed Khuda Bukhsh
- 20. Shri A, M. Chellachemi
- 21. Shri Bhaoosahaib Dhamankar
- 22. Shri Hiralal Doda
- 23. Shri Nageshwar Dwivedi
- 24. Shri Pampan Gowda
- 25. Shri Madhuryya Haldar
- 26. Shri Chiranjib Jha
- 27. Shri Popatlal M. Joshi
- 28. Shri Ramachandran Kadannappalli
- 29. Shri B. R. Kavade
- 30. Shri T. S. Lakshmanan
- 31. Shri Mallikarjun
- 32. Shri Prasannbhai Mehta
- 33: Shri N. Sreekantan Nair
- 34. Dr. Laxminarayan Pandeya
- 35. Shri Janaki Ballav Patnaik
- 36. Shri S. L. Peje
- 37. Maulana Ishaque Sambhali
- 38. Shri M. Satyanarayan Rao
- 39. Shri Umed Singh Rathia

- 40. Shri K. Ramakrishna Reddy
- 41. Dr. Sankata Prasad
- 42. Shri Awdhesh Chandra Singh
- 43. Shri Ram Deo Singh
- 44. Shri Rana Bahadur Singh
- 45. A. K. Kisku

REPRESENTATIVES OF THE MINISTRIES

Ministry of Law & Justice

Shri P. L. Gupta, Additional Legislative Counsel Shrimati V. S. Rama Devi, Deputy Legislative Counsel

Ministry of Health & Family Planning

Dr. Jugal Kishore. Adviser in Homoeopathy Shri P. V. Hariharsankaran. Deputy Secretary. Dr. D. P. Rastogi, Senior Research Officer.

SECRETARIAT

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Shri M. S. Panigrahi, Deputy Secretary Shri M. K. Jain, Under Secretary.

LIST OF WITNESSES WHO GAVE ORAL EVIDENCE BEFORE THE JOINT COMMITTEE

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Ser i: No.	al Name of Witness	Date of hearing
74-	Representative of the All India Homoeopathic Medical Association, New Delhi:	8-1-197
	 (i) Dr. H. L. Chitkara, General Secretary. (ii) Dr. Som Dev, Joint Secretary (iii) Dr. Kripal Singh Bakhshi, Treasurer. 	
75·	Dr. Vishwanath Aggarwal, Amritsar	8-1-1973
76.	Dr. Diwan Harish Chand, New Delhi	8-1-1973
77.	Dr. Mohan Singh, Patiala	-8-1-1973
78.	Representatives of the All India Institute of Homoeopathy, Delhi : •	-9-1-1973
	 (i) Dr. K. G. Saxena, President (ii) Dr. J. P. Srivastava, General Secretary (iii) Dr. Shanti Dev (iv) Dr. K. N. Mathur (v) Dr. N. N. Singh (vi) Dr. T. R. Chaddha (vii) Dr. P. C. Mehta (viii) Dr. C. M. Grover (ix) Dr. K. K. Juneja (x) Dr. Davendra Mohan 	,
79.	Representative of the Tilakdhari Homocopathic Medical College and Hospital, Jaunpur Dr. A.N. Singh, Principal	9-1 -197
80.	Dr. Jugal Kishore, Adviser in Homocopathy, Ministry of Health and Family Planning, New Delhi.	9 . [~1973
8r.	Representative of the All Haryana Homocopathic Medical Association, Ambala Cantt :	10-1-1973
	 (i) Dr. Raja Ram Singh Arya, President (ii) Dr. Jai Chand Jain, General Secretary (iii) Prof. Onkar Nath Sahore (iv) Dr. S. S. Chawla 	
82.	Representative of the Bhartiya Homoeopathic Protection Society, Hardwar:	10-1 -197 3
	Dr. B. Kaj, General Secretary	
83.	Dr. Kashinath V. Chitte, Srinagar (J & K)	10-1-1973
84	Dr. Sultan Alam M. Bihari, Purnea (Bihar)	10-1-1973

Serial No.	Name of Witness	Date of hearing
85.	Dr. C.P. Jhunjhunwala, Jaipur	10-1-1973
86.	Dr. P.L. Banerji, Jaipur.	10-1-1973
8 7.	Representative of the Rajasthan Homoeopathic Medical College and Hospital, Jaipur	10-1-1973
6	Dr. Girendra Pal, Vice-Principal	ň
88.	Dr. Yudhvir Singh, Delhi.	11-1-1973
89.	Dr. K. K. Bajpai, Registrar, U. P. Homoeopathic Medicine Board, Lucknow.	11-1-1973
90.	Representatives of the U. P. Homoeopathic Medical Association, Kanpur :	11-1-1973
	(i) Dr. Jagdish Chandra Nigam (ii) Dr. Prakash Chandra Srivastava, Secretary.	
91.	Dr. Radha Krishna, Secretary, AIHMA, Himachal Pradesh Branch, Sunder Nagar (H. P.).	11-1-1973
92.	Dr. B. N. Paul, Secretary, Aligarh Homoco Academy, Aligarh.	11-1-1973
93.	Dr. S. S. Raze, Aligarh.	11-1-1973
94.	Dr. B. B. Shukla, Chief Medical Officer, Moti Lal Nehrul Homoeopathic Hospital, Lucknow.	11- 1-1973
95.	Representatives of the Mysore Pradesh Registered Homoeopathic Medical Practitioners Association, Bangalore :	11-1-1973
	 (i) Dr. A. N. Ratnam, President (ii) Dr. R. Gopinath, Secretary (iii) Dr. R. Vittobai, Vice-President 	
9 6.	Dr. M. Satyanarayana, Chairman, Homeopathic Standards Board, Hydera- bad.	` 11-1-197 <u>1</u>
97-	Dr. S. K. Zutshi, New Delhi.	12-1-197
98.	Dr. S. S. Sharma, Principal, the Chattarou: Homoeopathic Medical Colleg and Hospital, Chattarpur (M. P.).	t 12- <u>1</u> -197
99	Dr. K. B. Lal, Gwalior	12-1 -197
100	, Dr. D. K. Sarkar, Agra · · · · · · · · · · · ·	12-1- 197
	Dr. P. Pandey, Meerut	12-1-197
101	. Dr. 1. Fanacy, McCruc	//

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THE JOINT COMMITTEE ON THE HOMOEOPATHY CENTRAL COUNCIL BILL, 1971

> VERBATIM RECORD OF EVIDENCE BEFORE THE JOINT COMMITTEE Monday, the 8th Januar, 1973

PRESENT

 Shrimati Purabi Mukhopadhayay— Chairman

Members

Rajya Sabha

2. Shri Sasankasekhar Sanyal

- 3. Shri N. G. Goray
- 4. Dr. K. Nagappa Alva
- 5. Shri Man Singh Varma
- 6. Shri Sultan Singh
- 7. T. G. Deshmukh
- 8. Shrimati Savita Behen

Lok Sabha

- 9. Shrj Ziaur Rahman Ansari
- 10. Shri Vidya Dhar Bajpai
- 11. Shri Muhammed Khuda Bukhsh
- 12. Shri A, M. Chellachemi
- 13. Shri Nageshwar Dwivedi

Shri Madhuryya Haldar
 Shri Chiranjib Jha
 Shri Ramachandran Kadannappalli
 Shri B. R. Kavade
 Shri Mallikarjun
 Shri Prasannbhai Mehta
 Dr. Laxminarayan Pandeya
 Shri Janaki Ballav Patnaik

23. Shri S. L. Peje

14. Shri Pampan Gowda

- 24. Shri M. Satyanarayan Rao
- 25. Shri Umed Singh Rathia
- 26. Shri K. Ramakrishna Reddy
- 27. Dr. Sankata Prasad
- 28. Shri Awdhesh Chandra Singh
- 29. Shri Rana Bahadur Singh

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Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy

Dr. D. P. Rastogi, Senior Research Officer

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary

Shri M. K. Jain, Under Secretary

WITNESSES

- - (1) Dr. H. L. Chitkara, General Secretary

(2) Dr. Som Dev. Joint Secretary.

- (3) Dr. Kripal Singh Bakhshi, Treasurer
- 2. Dr. Vishwanath Aggarwal, Amritsar
- 3. Dr. Diwan Harish Chand, New Delhi
- 4, Dr. Mohan Singh, Patiala

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[The Witness (Dr. H. L. Chitkara) was called in]

DR. CHITKARA: The memorandum which has just been circulated includes two or three minor additions.

CHAIRMAN: You may please explain the minor additions that you want to introduce in the Bill.

DR. CHITKARA: In the first memorandum we had suggested that representatives from the recognised Homoeopathic Medical Colleges should be nominated because we do not have any University Faculty of Homoeopathy and we had suggested the number as 5. In the new memorandum we have suggested 10 representatives, two for each administrative zone.

CHAIRMAN: What is the administrative zone?

DR. CHITKARA: I understand that the Government of India has some sort of zones. We can have the same zones or some other zones. It is a tentative suggestion. The Law Ministry can frame such a rule.

CHAIRMAN: I do not think that will be possible because the Committee will become too large to be handled. What is your next point?

DR. CHITKARA: The next point is about Section 5(1) relating to eligibility to the Central Council. It is mentioned in the Bill that a person who is on the State Register should be eligible. We now think that a person should be on the State Register for at least 5 years. This duration of 5 years was not given in the earlier memorandum. A person who is on the State Register for 5 years, should be eligible for election to the Central Council. These are the minor additions. Others have already been given and they have again been incorpo-

rated in the memorandum which has just been circulated.

SHRI SASANKASEKHAR SAN-YAL: May I put one question? There are emergent cases and chronic cases. In emergent cases, by and large people rush to the allopathy for immediate 💰 treatment because the crisis is ahead. But there are also chronic patients and for these patients the ordinary allopathic hospitals have very poor accommodation and the clients are large in number. Therefore, what do you think about having a National Health Service for Homoeopathy? It will be cheaper and it will be available to the poor people in greater number.

DR. CHITKARA: I want to clear one point. These questions will be answered in individual capacity and the Association will not be committed to them. Most of these questions are under discussion amongst us. About the National Health Service, my view is that there is no complete system of medicine, allopathy or homoeopathy or Ayurveda. If there is going to be a National Health Service, it should include all the three branches of medicine. For the information of hon. Members, homoeopathy is included in the National Health Service of the United Kingdom and it is being used very effectively although on a very small scale. I think this point of view should be acceptable to the Government.

DR. K. NAGAPPA ALVA: Yours is the All India Homoeopathic Medical Association in the capital of India. The very purpose of having this Bill is to have a system of medicine which will be properly controlled and developed. I would like to know your activities concerning education, practice and research of this medicine. I would also like to know your suggestions regarding the production of drugs, production of text-books which is of great importance and research connected with this system.

DR. CHITKARA: The hon. Member has asked about the activities of the All India Homoeopathic Medical Association regarding research, education, text-books and production of medicines. I would like to submit that the Association was formed in 1932 and for almost 30 years, the major task of this Association has been to fight for securing the recognition for homoeopathy. It is only in the last decade that various States have recognised homoeopathy as a system of medicine. There are still two or three States which have to recognise it. It is only for the last 6 or 7 years that we have focussed our attention on the desirability of having a uniform course of education, conducting research and establishing standards of practice. As you are all aware, it requires lot of funds and homoeopathic profession in the general being very poor, we have not been able to husband sufficient resources. Still, we have made a beginning. In the All India Homoeopathic Medical Association, we have two or three Standing Committees, for education, research and publicity and publications. Regarding education, we thought that in addition to what the State colleges are doing, we should start a refresher course for the unqualified people so that their standard of knowledge also rises and they are able to serve better. We had made some headway also, but because of certain organisational problems, it could not be done. There is another All India Association and we wanted to merge the two. We are trying our best for the last 6 months. Regarding research, we have already made some effort and under the guidance of our President, Dr. Jugal Kishore, we have already proved a drug known as Durva (Common Grass) which is found to be very efficacious. It is likely to be incorporated in the pharmacoepia.

DR. SOM DEV: It has already been incorporated in the French Pharmacoepia.

DR. CHITKARA: As regards textbooks, unfortunately, it is a very

difficult problem because, all along our education has been copied from the West. Here the system followed is as it is in the West but in England and the Continent, it is only the duly qualified allopaths who take up homoeopathy; there is no separate course of homoeopathy. It is an M.D. who gets converted to the practice of homoeopathy. So, we, having nothing else to fall back upon, have been copying the western method. We teach allopathic subjects and, side by side, homoeopathic subjects also. It does not produce a very good result because there are no homoeopathically oriented ready-made-textbooks in English and most of the education in homoeopathy is still being done in English. So, we do not have a very good store of text-books for us. It will be a great problem to write text-books which are basically, from the very beginning, oriented towards homoeopathy. That is a problem. I regret, we have not been able to do anything concrete as yet at the level of our Association.

As regards the standard of drugs, fortunately, there is a Pharmacopeia Committee of the Government of India headed by Dr. Jugal Kishore and it has been in existence for more than seven years now-and I happen to be a member of that Committee---and it has already prepared one volume which is in print. The other volume is being made ready and will be ready for printing shortly. The standardisation process, I think, is well under way. We have done a lot of work and in another five years we shall complete it. Our Association as such, except by way of giving our own talent from the Association, has not taken up that work independently.

I believe this covers the whole question.

भो मान सिंह वर्मा : आपने सेक्शन 5 (1) के अन्दर यह वसाया कि कम से कम 5 साल स्टेट रजिस्टर पर उसका नाम रहेतव--वह एलिजिविल समझा जाय । इसके सम्बन्ध में मैं जानना चाहता हूं कि 5 साल स्टट रजिस्टर पर उसका नाम रहेतो स्टेट रजिस्टर पर नाम ग्राने के लिए कोई प्रेक्टिस की अवधि की जरूरत है ?

डा॰ चितकारा : स्टेट रजिस्टर पर म्राने के लिए दो तरह के क्लाजेज हैं । एक तो एक्सपीरिएंस की वेसिस पर लिया जाता है, जिसका 10 साल या 5 साल का होल टाइम एक्सपीरिएंस हो । दूसरे जो क्वालीफाइड हो, जिसने कोई एग्जामिनेमन पास किया हो वह लिया जाता है । जिनका दस साल का एक्सपीरिएंस है, जो ग्रनक्वालीफाइड हैं वे विल के म्रनुसार नामिनेट हो सर्केंगे । जो क्वाली-फाइड हैं उन के लिए हमारा यह सजेंगन है कि एक मेम्बर कालेज से सीधा सैन्ट्रल कॉंसिल में म्रा जायगा तो उससे लाभ नहीं होगा, 5 साल का एक्सपीरिएंस होगा तो मेच्योरिटी होगी ।

श्री मान सिंह वर्मा : मैंने प्रथन पूछा कि किसी भी इंस्टीट्यूशन से क्वालीफाइड डाक्टर ग्राता है उसका नाम तो स्टेट रजिस्टर पर ग्रा जाता है श्रीर एक डाक्टर जिसको 10 वर्ष का ग्रनुभव है वह 5 साल के वाद एलिजिबिल होता है । जो दस साल वाला है उसको काफी समय लगा है । तो इस एनोमेली के विषय में ग्राप क्या कहते हैं ?

डा॰ चितकारा : सेक्शन 5(1) इलैक्टेड मेम्बर के बारे में है। जो 10 साल वाले हैं वे नामिनेट हो सकेंगे, वे इलैक्टेड नहीं हो सकेंगे। मेरा सजेशन इलैक्टेड मेम्बस के बारे में है। वह उन्हीं को एप्लाई करेगा जो कालेज से निकलते हैं।

श्री मान सिंह वर्मा: जिनको 15-20 साल का श्रनुभव है, जो वहुत क्वालीफाइट हैं, टार्च वियर्रस हैं होम्योपैथी के उनकी पोजीशन इस प्रकार की रखी जाय क्वालीफाइड के मुकाबले में, क्या इसे भ्राप ठीक समझते हैं ?

डा॰ चितकारा : विल में प्रावीजन है कि कुछ मात्रा में, कुछ संख्या में, वह नामिनेट हों ग्रोर मैं समझता हूं कि वह नामिनेट होने 🖌 चाहिए।

श्री मान सिंद वर्माः नामिनेशन रखा है, लेकिन फ्रैंचाइज तो उनको नहीं मिली। इसके बारे में प्रापकी क्या राय है ?

डा॰ चितकारा : इस विल का मान्जेक्ट बहुत सीमित है एजूकेशन एंड रजिस्ट्रेशन मान सेन्ट्रल रजिस्टर । जो एजू केट्ड श्रोर क्वाली-फाइड लोग हैं वही सिलेवस बनाने, कालेजेज को एफीलिएट करने में ज्यादा लाभप्रद होंगे श्रोर जो नामिनेटड मेम्बर हैं उनकी जनरल सहमति , सलाह भी काम देगी । मेरे ज्याल में जो बिल में प्रोवाइड किया गया है वह ठीक है ।

श्वी टी॰ जी॰ देशमुख : डा॰ चितकारा प्राप महत्वपूर्ण व्यक्ति हैं । श्रापको मालूम है कि 49 में इन्क्वायरी कमेटी बैठी थो ग्रीर एक एडवायजरी कमेटी होम्योपैथी की बनी थी जिस में दिल्ली वाले होम्योपैथ ज्यादा संख्या में प्राए थे । उस कमेटी के सामने प्रावलम यही था कि एजू केशन का स्टैंडडं बनना चाहिए । श्रापने बम्बई होम्योपैथिक कालेज को 14 लाख रुपया दिया ताकि उनका स्टैंडडं बढ़े, केरल में कई लाख रुपया दिया, यू॰ पी० में श्रापने लाखों रुपए दिए हैं, मिदनापुर कालेज के लिए भी दिया । क्या इससे उनका स्टैंडडं वढ़ा ग्रीर ग्रगर नहीं वढ़ा तो क्यों नहीं बढ़ा । मापने बताया कि रिसर्च श्रापने दूर्वा पर किया श्रीर भी कोई रिसर्च पेपर श्रापने दर्वा गत्मले ?

डा० चितकारा : ग्रानरेबिल मेम्बर ने यह पूछा है कि जो इन्क्वायरी कमेटी बैठी थी उसने रिकमंड किया था कि डिग्री कोर्स होना चाहिए, उस के बाद डिप्लोमा कोर्स ग्राया इतना पैसा खर्च किया गया. स्टेंडर्ड बढ़ा या नहीं भ्रौर ग्रगर नहीं वढ़ा तो क्यों नहीं बढ़ा । इस के बारे में मेरा नम्र निवेदन यह है कि यह बात गवनमेंट से पूछनी चाहिए जिन्होंने यह पैसा खर्च करवाया। एसोसिएशन विलिजैट जरूर थी लेकिन एक बात पहले भ्रजें कर चुका हूं कि हम इस क्षेत्र में नए हैं। हमारे सामने कोई मिसाल या प्रिसिडेंट नहीं है जिस से हम लाभ उठा सकें। हमने इंगलैंड की ज्यादा से ज्यादा कापी करने की कोशिश की है ग्रीर जैसा वहां था वैसा हमने यहां करने को कोशिश की है । लेकिन इसमें सब से बड़ा जो कारण है वह यह है कि होम्योपैयिक शिक्षा का विषय ग्रन्डर-ग्रेजुएट लेवल पर स्टेट्स का है, सेन्टर का नहीं है । हर एक स्टेट ने इसको रैंगुलेट करने के लिए ग्रलग-ग्रलग एक्ट बनाए ग्रौर वे एक एक्ट एक दूसरे से बहुत भिन्न हैं ग्रीर कहीं मेल नहीं खाते। कहीं पांच साल का एक्सपीरिएंस है, कहीं तीन साल का है, कहीं दो साल का कोर्स है, कहीं तीन साल का है, तो कहीं चार साल का [']। ग्रभी सिफ इतना ही कहना चाहता हूं सैन्ट्रल कौंसिल बनने का कारण यही है कि जितनी विभिन्नता, कमियां या जो ईफीशिएन्सीज हें उनको इस एक्ट के ढाराखत्म किया जाय। वह कमियां न तो किसी एसो-सिएशन की यीं, न सेन्ट्रल गवर्नमेंट की वह तो कांस्टीट्यू शन में है यह षीं. विषय भ्रन्डरग्रेजुएट लेबिल पर स्टेट का सबजेक्ट ^रहेगा ।

श्वी विवक गोपाल देशमुख : स्टेट का सब्जे कट रहने के बजाय धापने जो बाग्वे होम्योपैथिक कालेज के लिए कडी शन रखी कि डिग्री कोर्स बहां रखा जाय तो मापने उसको सैंक्शन कैसे किया । माप विजिलेन्स की वात बोलते हैं तो वह क्यों नहीं हुग्रा ।

डा० एव० एल० चितकाराः मैंने म्रज किया क यह गवनमेंट का कामथा कि वे देखे कि किस परपज के लिए रुपया दिया गया, उस के लिए वह व्यय हुग्रा या नहीं।

CHAIRMAN: The Health Ministry would like to explain something.

HEALTH MINISTRY OFFICER: The money that was given to the Bombay college was with a view that they would raise the standard to the degree level but the Council of Homoeopathy did not give permission to raise it to the level of Degree course. So, it was not possible. We are taking up this matter with the Bombay Homoeopathy Society and we are not giving any further grant to the Bombay college.

SHRI T. G. DESHMUKH: How much did you give?

HEALTH MINISTRY OFFICER: We have given Rs. 9 lakhs by now.

SHRI T. G. DESHMUKH: And there are seven colleges in Vidarbha; you have not given a single pie to them.

HEALTH MINISTRY OFFICER: That is because of the recommendations of the Council. It had recommended that we could give grant to the colleges who have 4-years course and none of these seven colleges has that. We had to give grant according to the fixed pattern and since they did not fulfil this pattern, it was difficult for us to give any grant to them. For hospitals also there is a condition that there should be a minimum of 25-bed capacity.

SHRI T. G. DESHM'JKH: You are giving money to a Bombay hospital.

FEALTH MINISTRY OFFICER: But this time, the Central Government is giving aid to under-graduate colleges as a very special case.

SHRI T. G. DESHMUKH: So, you find special cases only in Bombay.

HEALTH MINISTRY OFFICER: We have given to Midnapore, West Bengal college....

CHAIRMAN: He is asking about Vidarbha colleges. Anyway I think whatever we have got to do with the Ministry, we can take it up later on. Now we could finish with the Witness.

DR. CHITKARA: I have explained the thing. I have shifted the responsibility to the Ministry about this matter.

CHAIRMAN: Now, I would like to ask you a few questions. In your memorandum that you have circulated today, you have suggested certain penal measures after conviction. What does it really mean? Your language seems to be entirely wrong, here.

DR. CHITKARA: I am sorry, this was taken from an Act, a Madhya Pradesh Act. I do not claim to be a very expert in this matter. I mean that if there is conviction, there should be imprisonment and if there is no imprisonment then fine. In this respect, you can guide me. I am sorry, this is the substance of what I mean.

CHAIRMAN: All right. You are a General Secretary of the All-India Homoeopathy Medical Association. Your Association is an on all-India basis. If that is so, how is it that your membership is only 8,000?

DR. CHITKARA: I think I will have to say it again that as Homoeopaths, we are in fact a backward tribe. The profession contains all sorts of people from quacks to laymen. When we started the Association, there was no college and in fact Homoeopathy was not recognised. By and by we gathered some people of education. By and large, we are a poor class as compared to allopathy. Barring ิล dozen or so of brilliant practitioners, most of them are just average and because for membership of the Association nothing concrete is given in exchange, members are rather shy of joining our associations. It is only during the last five or seven to eight years that we have been able to build up a real-net-work. We have now 31 associations affiliated to us. When we filled in the questionnaire the figure was 26 and now it is 31. I have given a very conservative figure because it is likely to change from year to year.

CHAIRMAN: Is there any other all-India association of homoeopathy.

DR. CHITKARA: Yes, there is an all-India Institute of Homoeopathy. It is a smaller group, a narrower group confined originally to qualified people.

CHAIRMAN: Why don't you amalgamate?

DR CHITKARA: That is what I was submitting. We have been trying to do it for the last six months. We have now passed a resolution for amalgamation and talks are going on. We have drafted a constitution for a united Association and we hope that by the end of this year there will be one Association.

CHAIRMAN: Do you get any grantin-aid from the Ministry?

DR. CHITKARA: No, nothing.

CHAIRMAN: While dealing with point No. 17, you have suggested that nominated members should include persons with special knowledge and practical experience in Homoeopathy and allied sciences even though they may not have a recognised qualification. What do you actually mean by this? Even if they are not registered homoeopaths, do you want them to be nominated?

DR. CHITKARA: They should be registered. Registration is an essential condition. I can agree that it might not have been properly worded but the idea is this. There may be certain people who have studied homoeopathy on their own but they had some special knowledge of some other allied science. For instance, he is a botanist. He has studied homoeopathy. So he has got special knowledge of Botany along with homoeopathy. This knowledge could be used in pharmacopea. Similarly, there is a scientist. He has made some special study of any other subject of science; at the same time he is a good practitioner. Then his knowledge in addition to homoeopathy would be very

useful which would not otherwise be available from purely new blood, who have no study of any accessory subject, related subject. That is the idea.

CHAIRMAN: How does that serve your purpose if they do not have a recognised qualification and if they are nominated on the Homoeopathy Council? How does the Government choose? Does it serve the cause of Homoeopathy? Suppose, I am interested in Homoeopathy, can I get nomination according to your suggestion?

DR. CHITKARA: We leave it to the good sense and intelligence of the Ministry or whoever is at the top. Of course there is favouritism and such other things.

CHAIRMAN: Are you not giving a handle to the Government to nominate anybody that they want taking advantage of this clause?

SHRI CHITKARA: We have considered it; I think we have to compromise on certain things seeing the practicability of it because if we have elections and unqualified people come in it will be a much bigger problem. In fact some of the politicians who are not deserving might come forward and get elected.

CHAIRMAN: But you are giving them scope. Why don't you modify it like this that anybody who has special knowledge in any special subject or science allied with homoeopathy can be nominated?

SHRI CHITKARA: That would be fine; that is our object.

CHAIRMAN: Everything is your object but your language is entirely contrary. Then modify it like that.

SHRI CHITKARA: I am very grateful to you that you have guided us along the lines that we want.

SHRI RANA BAHADUR SINGH: How do you think that this Bill which is before us for consideration will affect thoso people who are practising homoeopathy on a charitable basis, whether they will be able to continue their practice and how do you think that they should be incorporated so that they are also recognised as practitioners of the science?

SHRI CHITKARA: The Association has thought over this matter and has come to this conclusion that if we want to have a profession of any respectability among ourselves or as compared to other systems of medicine, we will have to lay down certain standards at some time or the other. Where there is no registration as yet the Bill will not be enforced, hut where the registration has been completed, the question of charitable practitioners is already settled. They are not allowed. So the Association feels that in the interest of the upliftment of the science and for the status of the profession we will have to draw the line somewhere. It is for the Members to say whether this Act should be implemented in a particular place after 10 years or 20 years or whatever it is but at some time or the other we will have to say he is a practitioner and he is not a practitioner. We will have to lay down certain conditions. In the State Acts, it is already laid down that a person who has been practising for such and such time is a practitioner while others are not practitioners. Some of the States have been a little liberal; for example in the Rajasthan Act even a Government servant or a parttime practitioner is registered on the basis of three years' experience and that I think is going a little too far. My submission is the Act will affect those who are practising charitably but it will not affect them in their career or in their livelihood. It may affect their hobby and for hobby I do not think there will be much difficulty and much stringency, Even in England and France there are nonregistered practitioners even now who are practising homoeonathy. The law is not very harsh on them unless they dabble with human life too much or they become a nuisance,

SHRI RANA BAHADUR SINGH: What is your Association's thinking on this matter? The Rajasthan law is too lenient, some other State may be too harsh. What would your Association suggest as the proper thing in this respect?

SHRI CHITKARA: The matter was too delicate for formal deliberation by the Association and therefore I will not commit the Association to any view as such. I can only say that the general impression amongst us was that it was a little too liberal and it should have been a little more strict so as to be in line with other Acts on the subject in other States.

SHRI RANA BAHADUR SINGH: Like which State?

SHRI CHITKARA: All other States. For example we have 10 years in Delhi. In West Bengal we have five years. Three years has been particularly done in Rajasthan and this much part-time experience has been recognised for the first time in India to my knowledge.

SHRI RANA BAHADUR SINGH: What do you think is the proper mechanism to test these charitable practitioners in homoeopathy before they are put on the State Registers?

SHRI CHITKARA: It is for the Government to decide as a policy. If they are doing charitable practice the Government orders at present are that they should have registrable qualifications before they are allowed to practise charitably. If the Government or Parliament wants to liberalise it, then the question can be further studied. In some States even on the basis of experience registration was done after a little test, may be oral test or written test. In Andhra Pradesh for example a person can get himself registered if he is not above a certain age, not more than 40 and he will have to appear for a test within three years of his provisional registration. They are holding written tests and they may be having some oral examination also. These are the only methods by which we can test whether they are fit for practising homoeopathy; whether charitably or otherwise is not the question.

SHRI K. RAMAKRISHNA REDDY: What is the duration of the course in <u>1</u> Madhya Pradesh?

SHRI CHITKARA: Two years.

SHRI K. RAMAKRISHNA REDDY: Then you are recognising the pattern of other States?

SHRI CHITKARA: Up till the passing of this Act, this will be the position but once the Central Council comes into being the first function it will perform is to evolve a uniform pattern for all India.

SHRI K. RAMAKRISHNA REDDY: Have you suggested to extend the course to four years to the Government of Madhya Pradesh?

SHRI CHITKARA: The point is, as I submitted, the Acts are independent and it is the Government of the State which is the final authority whether it should be two years or three years. This Central Council Bill has come just for this purpose that there should be uniformity and there should be a little higher standard. Now at the Association level we have suggested it. It is a question of resources also and the Government of India I learn have withhold finance till they raise it to 4 years. This is the position at present.

SHRI JANAKI BALLAV PAT-NAIK: What do you think should be the minimum standard of education for admission to the Homoeopathy College?

SHRI CHITKARA: As I said we have not taken any decision at the Association level. In individual capacity I can give you my opinion and I will ask Dr. Kripal Singh here—he is a Professor in Medical College and he has experience—to give his views also. The consensus is that it should be not less than Higher Secondary and possibly one year more like pre-Medical for the M.B.B.S.

Now I will request Dr. Kripal Singh to give his views.

SARDAR KRIPAL SINGH: I agree with Dr. Chitkara that the basic qualification of the student should be at least higher secondary in science, with physics, chemistry and biology. If it could be a little higher, it would be still better. The course should not be for less than four years in any case, although the present syllabus could be run through in a shorter period of three years. To make the student more mature and make him homocopathy-minded and learn everything about the therapeutic and practical side of homoeopathy, we should allow him to stay in the college for at least four years. That is absolutely necessary.

SHRI JANAKI BALLAV PAT-NAIK: Do you think that there should be at least one faculty for homoeopathy in one of the State universities in every State? What is your opinion? At the university stage at least there should be one university in each State where the faculty of homoeopathy is taught.

SARDAR KRIPAL SINGH: There should be one faculty in each State to control and regulate the system of homoeopathic medicine.

SHRI JANAKI BALLAV PATNAIK: Do you think that the Government of India should set an example and start a Central university for the faculty of homoeopathy?

SARDAR KRIPAL SINGH: For example, in West Bengal there is a faculty of homoeopathic medicine and they are doing very well. They are regulating the system of homoeopathic medicine much better than the other States.

DR. CHITKARA: We propose that there should be a National Institute for Homoeopathy. There is a proposal with the Government. The Minister of Health has committed himself 9

to it. It is comparable to the All India Medical Institute. We suggest that this Institute should be examining body also for the degree and postgraduate courses. It is for the Government to agree to it.

SHRI JANAKI BALLAV PAT-NAIK: It should be treated as a Central University.

DR. CHITKARA; It would be an examining body throughout India for the degree and post-graduate courses. It will be also a teaching institution just like the All India Medical Institute. Though the All India Medical Institute is not a Centrally examining body, we propose, in the peculiar conditions through which homoeopathy is passing, the National Institute for Homoeopathy should be a teaching as well as an affiliating body. It should be an examining body for the whole of India for degree and post-graduate courses. I think the representatives of the Ministry will be able to tell you better about it.

SHRI JANAKI BALLAV PAT-NAIK: For the purpose of creating a university in the manner that you have proposed just now, do you think there should be a separate Bill for that? Will this Bill, in your opinion, support.

DR. CHITKARA: We suggest that a nucleus should be formed. Research and the therapeutic side are more important. In order to convince the public about the efficacy and superiority of homoeopathy, a research cumtherapeutic centre should be the nucleus before we can ask for a Central university. There are other problems, for example, personnel for teaching homoeopathy. Even if you sanction money, we will not be able to get proper personnel. There are many difficulties. These are details. For example, you can get a very good allopath for teaching for Rs. 2,000/-, but a good homoeopathic practitioner will not be available for teaching even if you pay him Rs. 10,000/-.

SHRI K. RAMAKRISHNA REDDY: While recommending that there should be an institute established on the same pattern as the All India Institute of Medicine at Delhi, will you not in the same way recommend homoeopathic colleges in every State?

DR. CHITKARA: In the resolutions passed at different conferences we have been urging for years that each State Government should not only open State colleges, but they should also set up well-equipped homoeopathic hospitals as well as a number of clinics and dispensaries. We have been pressing for it. We have been crying from many platforms, but unfortunately we find that they are not heeding it. Now that the Central Government is trying to give some subsidy in the form of a rural medical scheme, there may be some result. Otherwise, we have been passing resolutions. Now, the response is good. Andhra Pradesh has practically taken over all the colleges. Delhi administration has taken over the college. Similarly in other States they have taken over the homoeopathic colleges and they have made them Government colleges. There is good response now. Without Government finance a good homoeopathic college or any other medical college cannot work.

SHRI K. RAMAKRISHNA REDDY: Do you suggest the incorporation of this provision in the Bill?

DR. CHITKARA: I think it may be outside the scope of the Bill.

SHRI K. RAMAKRISHNA REDDY: There are allied subjects also. Suppose it is not outside the purview of the Bill, it may come in the 'allied subjects'.

DR. CHITKARA: I emphatically suggest that each State should have atleast one well-equipped homoeopathic college and hospital. If the population is more, there should be more colleges.

डा॰ सक्मीनारायण पाण्नेय : में यह जानना चाहना हूं कि हमारे देश में रजिस्ट्रेशन मम्बन्बी नियमों के उदार होने के कारण वहुत सारें लोगों को रजिस्टर कर दिया गया है जो न ग्रलोपैयी जानते हैं, न होम्योपैयी जानते है, न ग्रायुर्वेद जानते हैं । उनमें से वहुत से तो कपड़ा वेचने वाले हैं, कोई नाई को दुकान चलाने वाले हैं ग्रीर ग्राज वह रहिस्टर्ड होकर बैठे हैं ग्रीर इस व्यवसाय को इदनाम करते हैं । ग्राप उन लोगों के खिलाफ, ग्राया उनका रजिस्ट्रेगन केंसिल हो या बे वने रहे, इस बारे में, कोई मुझाव देना चाहेंगे ।

डा० चितकारा : ग्रादरणीय सदस्य ने ऐसा पांइट उठाया है जिसके वारे में हमारा विचार है कि णिक्षा की ग्रच्छी व्यवस्था न होने के कारण यह गडवड़ हमारे प्रोफेशन में जरुर है ग्रौर स्टेट एक्टस के ग्रधीन सटि-फिकेट्स वर्गरह लेकर वहुत**्सारे लोग वैठे** हैं जो रजिस्टर हो चुके हैं । उसके वारे में पोजीशन ज्यादा लीगल ग्रोर एडमिनिस्ट्रीटिव है। ग्रागे के लिए मैंने दो सझाव दिये है। एक तो यह है कि जो लोग या जो संस्था वोगस सटिफिकेट इण्यु करे या जो मनुष्य ग्रपने ग्राप को झूठा डाक्टर लिखे या पदवी लगायें, उसके लिए एक नियम जरूर बनाया जाए कि वह पनिशेवल होगा । जो लोग रजिस्टर हो चुके हैं उसके बारे में कोई प्रतिवन्ध हमारी ग्रीर से लगाया जाए यह कठिन है । कौन किस को जांच करेगा कि यह प्रविटणनर है या नहीं । इसके लिए जिम्मेदारी सीधे नौर पर हमारी प्रादेशिक गवर्नमेंट्स के ऊपर है । वह चाहेतो उस एक्ट को िट्क्टली लागु करेतो यह ज्यादा ग्रच्छा होगा । हमारा मुल्क वहत गरीब है श्रीर होम्योपैथी इसमें बहत कम कमाई है, इसलिए नागरिक की हैसियत से मैं कहुंगा कि इसमें इस बात पर इतनी कडाई करने की जरूरत नहीं है। इस बास्ते ऐसे लोगों को स्टेट ऐक्ट के अन्दर रजिस्टर्ड रहने दिया जाये।

डा० लक्ष्मीनारायण पाण्डेयः दूसरी वात में यह जानना चाहूंगा कि क्या ग्राप यह समझते है कि किसी प्रकार की ट्रेनिंग या रिफ्रेगर कोर्स उनको दिया जाएँ ताकि उनको सामान्य ज्ञान प्राप्त हो सके श्रौर वह उपयोगी सिद्ध हो सकें ?

डा॰ चिकारा : हमारे ऐसोशियेशन ने यह प्रोग्राम नाया है कि हम उनको वैसे भी ग्रीर कारस्पोंडेंस कोर्स नें ट्रेनिंग दें । जो लोग रजिस्टर हो चुके हैं उनको सामान्य जान दिया जाए । उसमें हमारा सेल्फिंश इंटरेस्ट भी है । इमारे जो साथी हैं वह ग्रच्छे दंजें के हों तो हमारी इज्जत वढ़ती है, उनका भी नाम होता है । इमारा प्रोफेशनल लास न हो इस के लिए हम चाहते हैं कि ऐसे लोगों की शिक्षा के लिए गवर्नमेंट व्यवस्था करे ग्रीर खर्च करे । नहीं तो ऐसोशियेशन तो जरुर करेगी ।

श्रीमती सविता बहन : कई तरह कें बोगस या अनट्रेंड लोग सटिफिकेट लेकर बैठते हैं, उनके इलाज करने पर मरीज के ऊपर क्या फर्क पड़ेगा ? क्या यह दवाई फायदा ही करती है, किसी को नुकसान नहीं करती ?

डा० चितकारा : ऐसा कहीं होना चाहिए कि जिसको कोई ज्ञान न हो, उसके हाथ में सर्टिकिकेट दे दिया जाएँ । साधारणतः होम्योपैयिक दवायें इतना नुक्सान नहीं करती जितना कि किसी और सिसटम की करती हैं श्रौर भ्राम तौर पर ये लोग ऐसी ववार्थे रखते भी नहीं है । ग्राम तौर पर होम्योपैयिक दवार्ये नुक्सान नहीं करती हैं । यही कारण है कि म्राज तक होम्योपैथिक दवा से नुक्सान होकर उसका मामला कोर्ट में गया हो, ऐसा कोई कैस नहीं हुआ। हां, कुछ स्प्रिट वचा हो या इन्जेक्शन लगावें, कोई ऐसी वात हो, उसमें कुछ नुकसान हो सकता हैं लेकिन होमियोपेथिक मेडिसिन से कोई खास नुक्सान इसी वास्ते नहीं होता क्योंकि उसमें माता इतनी कम होती हैं कि उसकी गुजाइ . नहीं ।

श्री मानसिंह वर्माः नहीं, अगर वड़ी मात्रा में दिया जाए तो नुक्सान हो सकता है। 1742 RS-2,

साक्षीः वड़ी माता होती नहीं ।

श्वी मानर्सिंह वर्मा : ग्रगर नहीं होती तो 30, 200, 1000, 2000 पोटेन्सी क्यों रखी गई है। देयर इज ग्र डिफरेन्स विटवीन वन् हन्ड्रेड एन्ड वन् थाउजेन्ड ।

श्रीमती सविता बहिन : एक वात यह भी है कि ग्रगर एफेक्ट करेगी तो दोनों तरह का ग्रसर हो सकता है, यानी ग्रगर ग्रच्छा एफेक्ट कर सकती है तो बुरा भी कर सकती है---इसका जवाव क्या है ?

साक्षी : यह दवाई ग्रच्छा तव करती है जव सिस्टम के साथ एग्री करती है । जो दवाई हम देते हैं, हम सिम्टम को देख कर देते हैं । दवाई जिलकुल थोड़ी ताकत की हो तो भी वह वाडी के रोग को टच करती है । उसके ग्रगेन्स्ट जो रिएक्शन होता है, देट इज काल्ड क्योर । वह ग्रगर सिम्टम से एग्री न करे तो—देट गोज वेंस्ट ।

भी मान सह वर्मा: एक पांइट क्लियर नहीं हुआ । डाक्टर साहव, झापने कहा है यह सिम्टम के साथ चलता है। झगर सिम्टम मिल जाता है तो झसर होता है। मेरा प्रज्न यह है कि जो 30 की, सौ की वन बाऊजेन्ड की पोर्टन्सी हैं....

डा॰ क्रुपाल सिंह : वह पावर जो है वह एक्चुम्रली ऐलोपेथी के सेन्स में नहीं है, क्योंकि उसमें वह कान्सन्ट्रेफ्रन से ऐक्ट करेगा लेकिन होमियोपेथी में डाइल्यू शन से ऐक्ट करेगा । जिसनी ज्यादा वह मेडिसिन डाइल्यू ट की जाती है उसनी ही उसकी पोटेन्सी का नम्बर बढ जाता है ।

भी मानले ह वर्माः उसके ग्रसर में तो फर्क पड़ता है ?

डा॰ कृपाल सिंह : उसके ग्रसर में बस इतना फर्क है कि जितनी उसकी पावर बढ़ती चली जाती है उतना सिस्टम के दायरे को कन्ट्रोल करने की कैपेसिटी दढ़ती चली जाती है । श्री मार्नासह वर्मा : मर्ज पर क्या असर

30 पोटेन्सी का ग्रीर 1000 पोटेन्सी का. पडता है, क्या फर्क पड़ता है वतलाइए ?

साक्षी : फर्क यह है कि :---

If you go on repeating it unnecessarily, it will harm the man. If a man goes on drinking glass after glass naturally it will harm him.

श्री मानसिंह वर्माः तो ग्रापका मतलव

यह है कि जितनी हाई पोटेन्सी होगी, वह नकसान नहीं करेगा ?

डा॰ क्रुपाल सिंह ः वह नुकसान नहीं करता है जब तक

WITNESS: You should not give an overdose to a man to whom the medicine is given. That is very wrong. If the patient is hypersensitive and the drug is repeated he may get damaged. Otherwise, if it is generally taken it is a harmless drug.

SHRI PRASANNBHAI MEHTA: It is found that some Homoeopathic practitioners prescribe allopathic treatment in the case of emergencies. What is your opinion? Should they be allowed to do so or should they be prevented from adopting the allopathic system alongside also in cases of emergency?

SHRI CHITKARA: No system of medicine is complete, as I said earlier. After a certain stage of proficiency, a registered homoeopathic doctor is a full-fiedged doctor; he is not merely confining himself to homoeopathy only and if he wants to take the service of any other system of medicine also, not only allopathy but Ayurveda also, he should be allowed to do so, and there is no bar, no law is yet against it. To my knowledge there is no law which prevents any practitioner from using any other system in the country.

SHRI PRASANNBHAI MEHTA: That is true, that is the position today. But what is your opinion? Should they continue this practice?

SHRI CHITKARA: This should be allowed because no system is complete in itself. If a very prominent and skilled physician can render better service to the patient with the addition of allopathic or Ayurvedic treatment, he should be allowed.

SHRI SASANKASEKHAR SAN-YAL: Don't you think that a doctor who is very well versed in one department will be a quack in another de- & partment?

SHRI CHITKARA: That again is a delicate question. To give an example, a person who had done his MA or Ph.D in Mathematics some 20 years ago will be absolutely unable to follow it now because the course has changed entirely and new discoveries in the subject have been made. But once one has reached a certain level of proficiency, he has the additional capacity to incorporate the good in other things also. So, a really qualified and skilled physician, well-versed in his own system, should have the necessary capacity to render aid through all other systems, from indigenous systems also.

ढा॰ लक्षमीनारायण पाण्डेय : डाक्टर साहत्र, ग्रभी ग्रापने कहां, किसी भी ला में इस प्रकार का प्रावधान नहीं है कि वह दूसरी मेडिसिन्स काम में नहीं ला सकता है लेकिन मैं वताना चाहता हूं मध्य प्रदेश में होमियो-पैथी की मेडिसिन में प्रेक्टिस करने थालों के लिए क्लियरली मेन्यन हूंग्रा है कि ग्रगर उस पैथी के प्रलावा दूसरी तरफ जाता है तो उसका रजिस्ट्रेशन कैन्सिल हो जाएगा । दोनों चीजें साथ साथ कैसे चल सकती हैं ?

श्री चितकारा : मध्य प्रदेश में शायद ऐसा हो लेकिन मेरा कहना यह था कि अगर सुप्रीम कोर्ट में दो या तीन केस भी जाएगे तो वह चीज स्टेन्ड नहीं कर पाएगी क्योंकि सव स्टेट्स में चिकित्सा का संबंध इंडियन कोंसिल श्रोफ मेडिसिन ऐक्ट से है श्रीर उसके श्रनुसार कोई भी पैथी है वह एक मेडिकल पैयी रह जाती है । तो ग्रगर यह केस कोर्ट श्राफ ला में जाएगा तो मेरा ख़याल है वह स्टेन्ड नहीं करेगा । SHRI PRASANNA MEHTA: The question is whether a person should be allowed to practise allopathy even though he is not qualified in allopathy.

DR. CHITKARA: We are only keeping silent over it. We are not taking any rigid stand this awy or that way because it is a very delicate question and it should be left at a delicate level. If we say one thing it will be misused, and if we say the other, again there is some trouble. So I personally feel that the Act should remain silent as it has remained silent in the case of Indian medical system and in the case of allopathic system. The law will take its own course if something happens. These will be exceptional cases and as the situation arises, I think the legislation can be modified for that purpose.

साक्षी (श्री चित्कारा) : मैंने यह कहा कि यह जो हमारा ऐक्ट है वह सिर्फ होम्योपैथ्स पर लागू होता है। इनके ग्रन्दर होम्योपैथ्स की क्वालिफिकेशन्स के बारे में है, होम्योपैथ्स का रजिस्ट्रेशन किस तरह से होगा, उसके बारे में है। जहां तक रजिस्ट्रेशन का सवाल है उसके बारे में यह वतलाया गया है कि या तो उस ग्रादमी को इस बारे में तजुर्वा होना चाहिये या फिर उसे किसी इग्तहान को पास करना चाहिये। ग्रगर वह इन दो शतों को पूरा करता है तब ही वह रजिस्टर हो सकता है।

DR. CHITKARA: He is qualified only in homoeopathy. What I said is that if he is qualified in homoeopathy and if he is really successful physician he can use allopathic medicine also at some stage.

शी मान सिंह वर्मा: जहां तक सर्जरी का सवाल है वह एलोपैथी में भी नहीं होती है ग्रोर न होम्योपैथी में है, यह तो एक ग्रलग विद्या है । लेकिन मेरे पूछने का ग्रभिप्राय यह है कि कोई डाक्टर जो एलोपैथी में डील करता है क्या वह होम्योपैथी की दवाई किसी को दे सकता है या फिर होम्योपैथ डाक्टर एलोपैथी की दवाई किसी को दे सकता है?

साक्षी : मैं ग्रापके सामने एक मिसाल देना चाहता हुं । मान लीजिये किसी होम्योपैय के पास डायबिटीज का केस ग्राता है जिसमें हाई लैवल शुगर है । हम यह सोचते हैं कि ग्रगर हम इसको होम्योपैथी की दवाई देते हैं तो उसका ग्रसर जल्दी होने वाला नहीं है और इस बीच स्थिति गम्भीर हो सकती है। तो स्थिति को काबू करने के लिए हम उसको इंसोलिन दे देते हैं ताकि जो हाई लैवल सुगर है वह कम हो जाय जो हमारे सामने गम्भीर स्थिति है वह कम हो जाय ताकि हम उस मरीज का इलाज हैम्योपैथी के ढारा कर सकें। ग्रगर हम इस तरह की वात नहीं करते हैं, तो केस हाय से बाहर चला जा सकता है । इंग्लैण्ड में भी इमरजैन्सी केसेज में इस तरह के इलाज के वारे में कोई प्रतिबन्ध नहीं है । वहां पर भी एक मैडिसन का डाक्टर <mark>दूसरी दवाई इमरजैन्सी</mark> केसेज में दे सकता है। यह तो सुविधा का सवाल है ग्रौर इस बारे में कोई ग्रापत्ति नहीं होनी चाहिये । इंग्लैण्ड में इस तरह का इलाज चल रहा है स्रौर वहां पर किसी तरह का कोई प्रतिबन्ध नहीं है ग्रौर इमरजेन्सी के वक्त इस तरह का ट्रीटमेंट चलता है ।

श्री मान सिंह धर्मा : तब तो फिर होम्योपैथी कौंसिल की कोई जरूरत नहीं है, सब संगठन एक है ग्रीर होम्योपैथ को ऐलोपैथी की डिग्री लेनी होगी ग्रीर ऐलोपैथी वाले को होम्योपैथी की डिग्री लेनी होगी ।

साक्षी: मेरे कहने का प्रयं ग्रीर है। जो ग्रादमी साइन्स को जानता है उसको दूसरी दवाई देने के बारे में प्रतिबन्ध नहीं होना चाहिये। तो मेरे कहने का मतलब यह है कि इमरजेन्सी के वक्त इस तरह के ट्रीटमेंट के बारे में इस एक्ट में कोई प्रतिबन्ध नहीं होना चाहिये।

CHAIRMAN: You say that in the emergency it does not matter what kind of medicine is used by the physician. The idea is that life should be saved. DR. CHITKARA: If he is skilful enough he should be allowed.

CHAIRMAN: But the lacunae remains and according to Mr. Varma the question that was put to you is whether you will be allowed to use both. Your reply was that a highly proficient person can do it. But while you are giving registration you are giving registration to the people who are not even adequately qualified. They are giving medicine on the basis of experience. In the eye of law there cannot be a provision that if one is proficient he is allowed to do that and if one is not proficient he is not allowed to do that. Law becomes equally applicable to all. There will be no question of picking and choosing as to who is qualified. Mr. Man Singh Varma wanted a categorical reply from you whether as a matter of rule you will allow it. Your reply should be that in the case of emergency it does not matter what type of medicine we should give; the patient must be saved.

DR. CHITKARA: As regards other things, there is the professional Association. We have our own ethics also. Everything cannot be decided by law. Our professional ethics can come in, in case a person is blatantly using allopathic medicines while he is registered as a homoeopath. It is for the professional body to see that such a thing is not allowed. If you make it into a law you will take away the physician's discretion and you will be doing some harm. Let us look into the whole thing from different aspects. Certain things can be done more appropriately through professional bodies. For example, there is the Indian Medical Association. They have their ethical standards. If certain people are doing unethical practices-in any case non-homoeopathic practice, as a rule, is non-ethicalour professional association should be vigilant enough to see that these people do not remain on the Homeopathic Register. But let us not be very strict in law.

CHAIRMAN: Thank you, Dr. Chitkara, and your colleagues for taking the trouble of coming and guiding us with your expert advice. We wish your association all success.

DR. CHITKARA: On behalf of my colleagues and the President. Dr. Jugal Kishore, who is not here, I thank you, Madam Chairman for giving us patient listening and sympathetic consideration.

(Witnesses withdrew)

CHAIRMAN: Friends, our next witness will come at 12 o'clock. We have a few minutes and you may take a short recess. Now I will be going away and I would request our lady Member Shrimati Savita Behn, to take the Chair in the forenoon. In the afternoon Shri Goray will take the Chair.

(Shrimati Savita Behen in the Chair) |The Witness (Dr. V. N. Aggarwal) was called in]

सभापति : ग्रग्रवाल जी, ग्राप ग्राए हैं, ग्रापका स्वागत है ग्रीर उम्मीद है कि जो ग्राप की राय है बह ग्राप देंगे । पहले ग्राप ग्रपनी राय विल के ऊपर दीजिए । उसके वाद हमारे माननीय मेम्बर ग्रापसे मवाल करेंगे जिनका ग्राप ग्रपनी राय के मुताबिक जवाव दीजिएमा । जितनी यहां की कार्यवाही होगी वह कान्फीडेंगियल रहेगी, वह प्रेस में नहीं जाएगी ।

साक्षी : मैं प्रमृतसर से श्राया हूं श्रीर मैं ग्राल इंटिया होम्योपैथिक मेडिकल एसोसिएगन की पंजाब स्टेट बांध का सीनियर वाइस प्रेजिटेंट ग्रीर ग्रमृतसर डिस्ट्रिवट एसोसिएगन का प्रेसिटेन्ड हूं । होग्योपैथिक लाइन में मैं 33-34 वर्ष से काम कर रहा हूं ।

श्री मान सिंह वर्मा : इस बिल के मुताल्लिक आप घ्रपनी राय बताएं ।

साक्षी : विल के मुताल्लिक जो कुछ श्राल इंडिया होम्पोपैथिक मेडिकल एसोसि-एणन ने कहा है यही हमारी राय है । यह विल्कूल ठीक है । भी मान सिंह वर्मा : ग्राल इंडिया एसोसिएशन वाले ग्रभी गवाही टेकर गए हैं, लगभग डेढ़ घंटे उनसे वातचीत हुई है। आपको कोई नई बात नहीं कहनी है?

साक्षी : म्राल इंडिया मीटिंग हुई थी, उसमें पूरे डिस्कशन के बाद जो राय हुई थी वह श्रापके सामने उन्होंने दी है, वह सफीशिएंट है।

DR. SANKATA PRASAD: You have personally nothing to say?

साक्षी : ग्राल इंडिया होम्योपैथिक मैडिकल एसोसिएशन को मैं सपोर्ट करता हूं। उसके बलावा जो योड़ी पर्सनल राय है वह कह देंगे।

SHRI MADHURYYA HALDAR: If you have any personal opinion, you may express it.

साक्षी : उसमें ऐसा है कि सैकेंड गैड्यूल के अन्दर बहुत से बैस्ट बंगाल के कालेजेख दिये हुये हैं थार उनके डिप्लोमा प्रप टू ए सर्टन लिमिट रिकगनाइज्ड होंगे । ऐसे सर्टन कालेजेख हैं जिन के डिप्लोमा थ्यू कारेस्पांडेंस होते हैं, लेकिन वे लिस्ट में नहीं हैं।

भी मान सिंह वर्माः वैस्ट बंगाल में जैसे रिकगनिशन मिला है वैसे पंजाब में नहीं है ।

साक्षी: पंजाब में वैसा नहीं है। वैस्ट बंगाल में भी सब नहीं लिये गये हैं। मेरा ख्याल है कि जितने कालेजेज हैं दे ग्राल ग्रार सयस्टैंडर्ड ।

SHRI MADHURYYA HALDAR: In the sense?

साक्ती : उनके पास जितना मैटीरियल होना चाहिये वह नहीं है। फर्ज करो किसी को एजुकेशन देने के लिए किसी कालेज में भेज दिया तो फिसी के पास फिजियालाजी, बनाटामी ले ली, किसी के पास कोई दूसरी चीज ले सी। बाकी प्रोफेसर्स जो हैं वे दो तोन कालेजों ने रखे हुये थे । उन्होंने चोड़े दिनों बाद पेपस ले लिये ग्रीर पेपस ले कर के डिप्लोमा या सटिफिकेट दे दिये ।

SHRI MADHURYYA HALDAR: Can you mention one name of such a homoeopathic institution of Calcutta which is sub-standard or, as you say, is not imparting proper training?

साक्षी : यह डनहम होम्योपैथिक मेडिकल कालेज है । इसका डिप्लोमा 1942 तक रिकगनाइज हुम्रा है । ग्रीर भी बहत से ऐसे कालेज हैं ।

श्री मान सिंह वर्माः डाक्टर साहव, अप के कहने का मतलब मेरी समझ में नहीं प्राया । क्या ग्राप थह चाहते हैं कि इसमें ग्रीर एडीगन हो ?

्र साक्षी : सर्टेनली एडींगन हो । यही मैं चाहता हूं ।

भी मान सिंह वर्माः यह सैकेंड गैड्यूल फाइनल नहीं है। इसमें बाद में एडी शन्स हो सकते हैं।

SHRI MADHURYYA HALDAR: Diplomas are recognized even now.

साक्षी : इसमें किसी का 1942 तक है, किसी का कुछ है। उसके बाद के बिल्कुल निगलेक्ट हो गये ग्रीर उनके डिप्लोमाज रिकगनाइज नहीं किये गये।

HEALTH MINISTRY: After 1942, this M.D.C.H. was changed to D.M.S. The General Council for Homoeopathic Medicine, West Bengal, was established in 1943. So after this came, D.M.S. was the title which was given. Dr. Aggarwal says that after 1942 this title was neglected. That is not the position.

साक्षी : लेकिन उसके बाद पोजीशन यह मा जाती है कि स्टैंडर्ड चेंज कर दिया । स्वास्थ्य मंत्रालय : एम०डी०सी०एच० को डी० एम० एम० कर दिया । उसके बाद स्टेट फैकल्टी हो गई

चेयरमैन : (श्रीमती सविता बहिन) : कालेज का नाम चेंग करने से क्या फर्क पड़ता है। पहले वाले विटनेस जो ग्रपनी बात कहना चाहते थे वह उन्होंने कह दी। उसके ग्रलावा ग्राप की ग्रपनी कोई पर्तनल बात हो तो वह ग्राप कहिये।

साक्षी : हमने क्वैश्चनेयर के जवाब में सारा लिख दिया है i

SHRI N. G. GORAY: Dr. Aggarwal, there are two or three questions which have confronted us all along, and I would like you to explain your position regarding these questions. Homoeopathy is being practised by any number of people. There are States where their number runs into thousands, and obviously they are not qualified; they are self-taught; they do not possess any qualification. Now, how would you like the Government to put a stop to this practice which is, in many cases, almost like quackery? They are not qualified to practise, and because homoeopathic medicines are freely available, to a certain extent their ill effects are not noticeable. There, how do you suggest that this quackery should be stopped?

I will put only three questions to you. Now, the other is about upgrading of homoeopathic education. We came across many people, practising homoeopaths, who were very emphatic in asserting that no hospitals are necessary so far as homoeopathy is concerned. We were rather surprised. We feel that if homoeopathy is to be upgraded, wherever it comes on par with other sciences, there may have to be well-equipped hospitals and other things which make it possible for you to diagnose the disease, to find out what is wrong, etc., etc. So, what steps do you suggest to upgrade the education? That is No. 2.

Number 3 is—and this question has also been asked every time—whether a doctor who is an allopath should be allowed to practise homoeopathy and vice versa. What is your opinion about it?

These are my three questions which, I suppose, this Bill will have to take into consideration, and I would like to know from you what your opinion about these is.

साक्षी : देखिये, सब से पहला ग्राप का जो सवाल है उसका जवाव यह है कि मेरा खयाल है कि everybody knows that this science has developed through all these private practitioners and hobbyists.

SHRI N. G. GORAY: Are you precise in what you are saying?

Has this science developed through practitioners?

WITNESS: No, no. Homoeopathy became popular through all these people.

SHRI N. G. GORAY: Popular; it was not developed.

WITNESS: You have put a guard against it. But the existing practitioners should not be debarred. In future you can put any bar.

SHRI N. G. GORAY: So all of them should be accepted?

WITNESS: Yes, certainly.

श्री एन॰ जी॰ गोरे : हमारे. दो क्वेण्चन ग्रीर हैं। ईक्वीपमंट चाहिये या नहीं चाहिये ग्रीर रिसर्च के लिए क्या होगा।

WITNESS: We want people of high calibre to be placed in the Central Council so that research work will continue.

DR. K. NAGAPPA ALVA: You are member of the All India Homoeopathic Association and your address given here is Shri Lakshmi Homoeopathic Store. That means you are having a store dealing with Homoco-pathic medicines.

WITNESS: Yes.

DR. K. NAGAPPA ALVA: While dealing with these drugs, I would like to know from your experience, do you have any stock of drugs of standard quality. I would also like to know what percentage of these drugs is imported and what percentage is locally manufactured in India. I will explain why I ask this question. There is today a dangerous trend in the country that in all systems of medicines spurious and sub-standard drugs are sold. For any system to be developed, we must have medicines of quality and standard. What suggestions would you like to give so that drugs of standard quality are made available to the people?

WITNESS: We have been getting the drugs from Calcutta and firms like National Homoeo Laboratories, N. P. Dutt and Co., etc. We get goods from Dehradun also. Their preparations are equally good. I have not come across any firm whose medicines have led to failure of my cases. For the last two or three years we have been getting goods from these firms. Considering the number of people who come to us for medicines, their number has gone up by three or four times.

Regarding spurious medicines, under the present system many Homoeopaths have started making combination medicines. To select a single suitable medicine, you have to use lot of your brain. Certain firms have developed combination medicines. Whenever my customers ask me whether they are efficacious, my reply is very simple. I tell them that if there is at least one correct medicine in a combination, then it will be efficacious. The others will pass out.

SHRI SASANKASEKHAR SAN-YAL: They will counteract? WITNESS: They are medicines which do not counteract. They are not added in this combination.

DR. K. NAGAPPA ALVA: We are all laymen in this field. But I would like to know whether they are allowed to follow this method of combination system?

WITNESS: They are very efficacious.

SHRI SASANKASEKHAR SAN-YAL: Then it becomes multi-purpose Homoeopathy.

WITNESS: There are Homoeopathic medicines and bio-chemistry medicines. About 28 numbers are there.

SHRI N. G. GORAY: That is where my question assumes relevancy. So far as allopathic system is concerned, whenever a new drug is developed, it is tried on certain number of patients and the result is announced. Is there such a system in Homoeopathy? Or, is there no need to watch the result at all? Is your medicine first tried in hospitals or on animals before it is put in the market?

WITNESS: That is the interest of the manufacturer concerned, whether they use it or not. There is no such institution which tries these medicines and then place them in the market.

SHRI N. G. GORAY: Do you think that it is necessary?

CHAIRMAN: What is the existing practice?

WITNESS: That is why we want a Central Council to frame rules and regulations.

श्री मान सिंह वर्मा : भ्राप के यहां जितनी दवाइयां ग्राती हैं वे सब टेस्ट हो कर ग्राती हैं ?

समापति : ग्राप की फार्मेसी का क्या तजुर्बा है ? उन दवाइयों में कितनी ग्रसर रहता है ? ग्राप उन को देख-समझ लेने के बाद्र बेबते हैं या उन को इम्माडियेटली बेच देते है ?

साक्षो : जितनी हमारे पास कांबिनेगन टेटनेट्स गौर मेडिकिन्स माती हैं उनका सेले बाकी दबाइयों के मुकाबले में 30 परसेंट है और उन के बारे में कभी कोई शिकायत हमारे पास नहीं ग्रायी ।

SHRI N. G. GORAY: Is that proof of your quality?

WITNESS: No.

SHRI N. G. GORAY: We are dealing here with science.

WITNESS: I am so sorry. I was replying to the other question. It is an off-shoot of that.

डा॰ संकटा प्रसाद : ऐभा कहा जाता है कि होन्योगैथिक दवाइयां किसी तरह की खुत्रवू से खराव हो जाती हैं। और त्राप की दबाइयों में एक स्पिरिट ग्राफ कैंकर भी होता है। तो ग्राप उस को कैसे इस्तेमाल करते हैं? ग्राप जब उस को डिस्ग्रेंन करते हैं तो कैमे करते हैं?

साक्षी : खुणवू के बारे में तो गेरा तज़ुर्वा यह है कि हम तो कह देते हैं मरीज को कि इजायनी या पान तक न खाइये, लेकिन मैं समझजा हूं कि यव वह दिन चले गये। सब तो यादमी के शरीर में ही पता नहीं कि कितनी बदबू है जो हमारी दवाई के यसर को इर्राइकेट कर देती होगी।

WITNESS: That is kept in a separate almirah and that is dispensed separately.

श्री चिरंजीव झाः श्रभी हमारे माननीय सदस्यों ने बहुत से प्रश्न किये थे कि ग्रापकी होम्योपैथी में बहुत से परिवर्तन चक्त रहे हैं। उन्होंने यह भी पूछा था कि इसके सम्ब ध में ग्राप जोग जांव पड़ताल करके उसके व्यक्तार में लाते हैं या यो ही कर रहे हैं, ग्रापने उसका कोई जवाव नहीं दिया। मैं जानना चाहता हूं कि अलग-अलग जो मेडिसंग हैं उनके अलग-अलग प्रभाव हैं अपनी-अपनी जगह प्रलग-अलग मीडाल्ज बेहतर हैं जैसे शहद, घी. मिला, ये तीनों चीजें घपनी ग्रपनी स नी रखती हैं लेकिन पलग इनको समान माला में मिला दिया आए और उसको व्यवहार करें तो वह विष होता है घोर उससे प्रादमी को फायदा पहुंचने के वजाय वह मर जाता है। क्या चापकी होम्योपैथी की दवार्ये जो धलग-धलग धपनी-ध्रपनी जगह ग्रच्छी हैं, उनको मिला देते है तो उसकी जांच पड़ताल महीं करते हैं ? ग्रगर नहीं करते हैं तो यह खतरत क है ।

साक्षी : इसमें पोजीशन यह है कि जो मेडिसन्स इनिमिकल हैं उनको नहीं देंगे। Those medicines which are inimical are not added to that.

हमारा अभी तक कोई रिसचंसेंटर नहीं है कोई ऐ रा प्रबन्ध नहीं है जिससे हम पहले उसका ऐक्सपैरिमेंट करें श्रौर फिर उसे मार्केट में दें हमारी मेटिसन सेलबटेड हैं। उसमें Rhumatism की 5-10 दवामें आती है, उनमें पेटेन्ट श्रपनी तरफ से रखकर मार्केट में प्लेस करते हैं। ग्रगर पता लगता है कि उसकी डिम ड मार्केट में होने लगी है तव वह एफिकेसिंगस होती है।

SASANKASEKHAR SAN-SHRI YAL: Dr. Agarwal, you are a doctor of experience and a citizen of eniinence in this country. Our country is by and large very poor and providing allopathic treatment is very costly and the availability of hospital treatment is also limited. But that ... does not apply to homoeopethy which extends its arms to the poor as much as to the rich. In that context, it is not possible and proper to have a National Health Service in the country in homoeopathy so that wo can have free hospitals everywhere?

साक्षी : इसमें यह है कि

Government should do something and the Government should arrange colleges and hospitals.

SHRI SASANKASEKHAR SAN-YAL; You have mentioned colleges and hospitals.

WITNESS: Yes.

SHRI SASANKASEKHAR SAN-YAL: But I want to enlarge it so as to make it a National Health Service.

WITNESS: Yes.

SHRI SASANKASEKHAR SAN-YAL: Do you want to emphasise it?

साक्षी : Certainly वह भी इसमें ग्रा जाएगा। जितने फी हास्पीटरूप हैं ग्रमृतसर में हैं। हर हास्पिटल में कम से कम सौ डेढ़-सौ पेशेंटस है।

You will find in every street a hospital. There are hospitals where not a single paisa is charged and there are hospitals where they charge only 10 p. and there are hospitals where they charge 20 p. daily and the daily number is about 150, 200 and so on.

CHAIRMAN: Thank you very much, Dr. Agarwal.

(The witness then withdrew)

The Committee then adjourned to meet at 3-00 P.M.

(Shrimati Purabi Mukhopadhyay in the Chair)

[The Witness (Dr. Diwan Harish Chand was called in]

CHAIRMAN: Would you please tell us what are your qualifications?

WITNESS: I qualified as M.B.B.S. in 1945. I have been in practice since 1949 when I returned from abroad after other post-graduate qualifications....

DR. K. NAGAPPA ALVA: What other qualifications in Homoeopathy? 19

WITNESS: I am a Fellow of the British Faculty of Homoeopathy Licentiate of the Royal College of Physicians of Edinburgh. I have a Diploma in Tropical Medicine and Hygiene from Liverpool and a Diploma in Homoeopathy erapeutics from USA.

CHAIRMAN: Have you gene through our Bill? Please note that the proceedings of this Committee are confidential.

WITNESS: Yes.

CHAIRMAN: Tell us something about the Bill. What are your observations on the Bill?

WITNESS: I have replied to the questionnaire which was sent to me. As far as the Bill is concerned, there are certain minor adjustments which may be necessary or desirable, to my mind.

One of the omissions is that in the Second Schedule, although you have got many of the recognized qualifications from this country, you have none of the qualifications from abroad, and more particularly from the British Faculty of Homoeopathy. This would be necessary, because, by and large, the people who have had post-graduate qualifications are in positions of great importance, both in the educational institutions and in practice in this country today.

CHAIRMAN: What do you think about registration of Homoeopaths? After how many years of practice they should be registered?

WITNESS: The list of persons registered on the basis of practising for more than 10 years should be closed. We in this country no longer suffered from lack of numbers; we are suffering from lack of quality. And, therefore, there is no question of keeping the list open for all times.

CHAIRMAN: Would you please explain a little your point No. 8? (of questionnaire) WITNESS: The idea is that the main function of the Central Council is two-fold. One is and which I consider subsidiary, to maintain an All-India Register. The other main function of the Central Council is to look after education and laying down of standards, having a uniform curricula all over India, and for this it is absolutely necessary that only those who have institutional qualifications should be there, and not the other people who have been registered on the basis of the length of their practice.

CHAIRMAN: Do you think that nobody should be registered without going through institutional training?

WITNESS: No. Not for future. That List should be closed. It is not for all time that people should be registered on the basis of the length of their practice. Those people who start today will also one day claim registration. That concession was given only initially for a limited period at the time of passing of the State Homoeopathic Acts and since then many of the Acts have already been passed. I would say that it should be minimum four years' training in an institution, because we are having varied standards and that is not conducive to the growth of proper homoeopathic knowledge.

श्री सुलतान सिंह : क्या ग्राप समझते हैं कि रजिस्ट्रेशन के वास्ते कोई स्टेट की तरफ से बाडी वननी चाहिए।

साक्षी: वसे तो यह स्टेट का सबजेक्ट है लेकिन मेरे ख्याल से नहीं बननी चाहिए।

Those institutions need not grow. That is happening is that because there is no Central legislation, and it is very unfortunate that this Bill was delayed.

श्वी सुलतान सिंह: कुछ स्टेटस के ग्रंदर 2 साल का ही कोस रख हुन्ना है...

साक्षी: यूनिफार्म कोर्स नही है क्योंकि सेन्ट्रल कौंसिल नहीं है। श्री सुलतान सिंह : ऐक्ट बनाते समय ध्यान में रखना चाहिए कि दो-दो तीन-तीन साल वाले रजिस्टर्ड हों झोर झगर 4 साल बाले रजिस्टर्ड होंगे तो वे तो सफर करेंगे।

साक्षी: कोन त कोई हर रोज सफर करेगा। साइन्स के लिए भगर किसी को किसी मामले में सफर करन: पडता है तो They should not take only on experience basis. There is provision that 30 per cent will be nominated by the Government. If there is anybody outstanding, he can be taken core of there.

श्री सुलतान सिंह : पहले तो जिनकी लम्बी विड़ी प्रैक्टिस थी वह रजिस्टर हो रहे थे, आगे हम ऐक्ट बना रहे हैं तो इस बीक में जो रह जाएंगे उनके लिए क्या करना होगा।

साक्षीः वीच में का सवाल नहीं। वह तो ग्रालरेडी ग्रागे के लिए registration वद हो जानी चाहिए।

SHRI K. RAMAKRISHNA REDDY: Do you mean to say that this should be stopped on the basis of experience?

WITNESS: It should be stopped for future. Those who have already been in practice should continue to practice; they should have the right of practice only. But they should not be taken on the Central Council, because they cannot plan for pattern of education.

SHRI K. RAMAKRISHNA REDDY: What penalty would you prescribe if a person practices without a licence?

WITNESS: That is for the Government to see. I think there are people all over the world who practise without any qualifications. There are such people in England, Switzerland and even in U.S.A. They practise all sorts of pathies. Some people is doing acupuncture others iridology relaxation bilinigres etc. In Switzerland, there is a place-a district (they call them Kanton) and everybody who wants to practise something, not fully accepted or orthodox goes there. If he has some brilliant idea, that idea is accepted. But he cannot practise outside that Kanton in the rest of the country.

SHRI K. RAMAKRISHNA REDDY: Why don't you give some sort of refresher course and then register them?

WITNESS: If they take the course and pass through an examination, it can certainly be done. But you cannot go on doing it for all times. Otherwise, what are the institutions meant for? We have 72 institutions and the idea is to improve these institutions.

SHRI K. RAMAKRISHNA REDDY: What is your opinion about opening a university?

WITNESS: Yes, it should certainly be there. But when there are so many institutions the better thing would be to upgrade them rather than opening new ones. 72 is not a small number and about 4,000 to 5,000 students pass out of them every year.

SHRI K. RAMAKRISHNA REDDY: If you are having colleges at the State level, is it not advisable to have a university at the national level?

WITNESS: Yes, it is highly desirable. Both the Centre and the States should share the responsibility. I have sometimes, in an unparliamentary language, said that we have a Government of the people and by the people, but not quite for the people. When 82 per cent of the people go in for non-allopathic treatment, why should the Government spend more than 99 per cent of the money only on *i* allopathic form of establishments?

CHAIRMAN: Maybe that is due to the negligence of the Homoeopaths . themselves.

WITNESS: Maybe they are not organised enough to make themselves a political force?

CHAIRMAN: Why do you blame the Government when there is no private initiative in homoeopaths? WITNESS: There was no private initiative in setting up the All-India Institute of Medical Sciences.

CHAIRMAN: All India Institute is only for research. It is the urge of the homoeopaths that counts. Is it not?

WITNESS: Also.

CHAIRMAN: Mainly.

WITNESS: I won't say mainly.

श्री सुल्तान सिंह : मैं यह जानना चाहता डू कि होम्योउँथं। ने लोगों पर विक्वास पैदा क्यों नहीं किया ?

साक्षी: मेरा ख्याल है कि काफी विश्वास पैदा किया है क्योंकि ग्राज देश में लाखों होम्योपैथस हैं जो रोटी खा रहे हैं ग्रोर टैक्स दे रहे हैं।

श्री सुलतान सिंह : मगर देश में तो एलोपैथी डाक्टरों की संख्या ज्यादा है इसके क्या कारण है?

साक्षी : आप एक सिस्टम को इनहैरिट कर रहे हैं जो बििंश सरकार यहां पर छोड़ , गई है आर उसी पैटनं को आप अभी तक चलाते आ रहे हैं प्रब स्वदेशी और दूसरे |सिस्टम की ओर सरकार का घ्यान गया है भौर मुझे साशा है कि सारे देश में होम्योपैथ्स की संख्या और ज्यादा हो जायेगी।

श्री मान सिंह वर्माः जव ग्राप ग्राना परिचय दे रहे थे तो ग्रापने कड़ा है कि ग्रापने दो तरह की डिग्री हासिल की है। तो मैं यह जानना चाहता हूं कि ग्राप दो प्रकार का इलाज करते हैं या एक ही प्रकार का इलाज बरते हैं?

साक्षीः दो प्रकार के इलाज की जरूरत नहीं पड़ती है।

श्री मान सिंह चर्माः विस किस्म का इलाज ग्राप करते हैं ?

साक्षाः मैं होम्योपैथी का इलाज करता हूं। श्री सान सिंह वर्माः ग्राप ऐलोपैशी से होम्योपैथी में कैसे ग्राये ?

साक्षी : बहुत से एम० वी० वी० एस० डाक्टरों को दूस यानि होम्योपैथिक इलाज करने का मौका नहीं मिलता है लेकिन

my father was a Deputy Director of Health Services. Subsequently, he practised homoeopathy. I was studying in M.B.B.S. course in Lahore. I saw a patient in hospital undergoing allopathic treatment. After some months, the same patients were with my father. I could see the difference and the kind of treatment and relief that was offered by homoeopathy. So, it carried conviction with me.

श्री मान सिंह वर्माः मैं ग्राप से यह जानना चाहता हूं कि होम्योपैयी डाक्टर को एलोपैयी दवाई देने की ग्राप इजाजत देये ग्रीर इसी तरुह से ऐसोपैयी डाक्टर को होम्योपैयी दवाई देने की इजाजत देंगे या नहीं। इस बारे में ग्राप का क्या ख्याल है?

साक्षी: यह तो सिस्टम की गहराई की वात है श्रीर इस चीज को को चार लपज में खत्म नहीं की जा सकती है।

श्री मान सिंह वर्माः में यह जानना चाहता हूं कि म्राप इस विल में इस तरह के इलाज करने की इजाजत चाहेंगे या नहीं।

WITNESS: The medicines are the same and the sources are the same. The same medicine would be allopathic or homoeopathic depending on the principle on which it is applied. Since the names are in Latins they are the same in allopathy and homocopathy. It is on the basis of the principle that it is decided whether the drug has been given allopathically or homoeopathically. One of the great misconception about homocopathy is that when you think of homoeopathy, you think of some small tablets. This is secondary, The primary thing for Homoeopathy is the principle of Similia similibus curunhu (Let likes be treated by likes).

श्वी मान सिंह वर्मा : जहां तक इस विल का सम्बन्ध है. मैं यह जानना चाहूंगा कि जो रजिस्टर्ड डोम्योपैथस है वे ऎलोपैथी की दवाई दे देते हैं। जहां तक ऐलोपेथ्म डाक्टर् ____ की ब.त है, उनके ब.रे में नहीं कह सकता ह स्यॉकि जहां तक होम्योपैथ्स डाक्टरों की वात है. उनके वारे में मुङ्गे तजुर्वा है कि वे लोग ऐलोपैथी की दवाई दे दे हैं। क्या आप इस बिल में इस तरह की वात पसम्द करेंग कि ए : होम्योपैथी वाला डाक्टर ऐलोपैथी का भी इलाज कर सकता है ग्रीर उसी तरह से एक एलोपैथी वाला डाक्टर होम्योपैथी क भी इलाज कर सकता है श्रीर उसी तरह से पक एलोपैथी वाला डाक्टर होम्योपैथी क भी इलाज कर सकता है ? क्या ग्राप इस सम्बन्ध में कोई रुकादट चाहते हैं या इम

साक्षी : जैसा मैंने पहिले एक वाइन्ट ब्तलाया, उसी प्रकार से दो प्वाइन्ट झौर हूँ। स्रापने यह देखा होगा कि 🗟 एलोपैथी में हर साल नई दबाई निकलती रहती हैं। जब मैं 1943 में एम॰ बी॰ बी॰ एस० की पढाई कर रहा था तो उस समय पेनसिलिन नहीं निकलती, थी ग्रौर जब मैं 1945 में इम्तहान दे रहा था तो पैनसिलन लोगों को दी जाने लगी थी। इसी तरह से पहिले 🔒 एन्टी-वायटिक दवाईयां नहीं थी, लेकिन ग्रन्ने दस से ज्यादा किस्म की एन्टी-वायटिक दवाईयां निकल गई है। इसी तरह से पहिले 🛀 वियटामिन बी-12, Falic aid नहीं निकली थी मोर प्रब ग्राप तरह तरह की वियटामिन टैव गैटस बाजार में देखेंगे 🕤 कालेजों में डाक्टरों को सौ या दो सौ दवाग्रों के नाम पहाये जाने हैं. लेकिन जो फामॉकोपिया (pharmacopoeia) की लिस्ट बनाई जा रही 🛒 है उसमें करीब 2000 व्वाइ में लिखी हुई हैं। भाजकल जो नई ई दवाईयां वीम।रियों की निकल रही हैं उन्हें ड.क्टर पढकर ही उनको मम ! सकते हैं ग्रौर उनका मरीजों पर प्रयोग सकते हैं । कर उसका मतलब

नहीं है कि ये सारी दवाइय¹ यह इस्तेम ल में भाती हैं, बहुत सारी इस्तेमाल में नहीं ग्राती 100-200 दवाइयां इस्ते-माल में ज्यादा ग्राती हैं। जब 200 पढ़ाई जाती हैं तो होई देखकर युक्स से न.लैज हासिल कर ्र**स**कता है। जिस ग्रादमी ने मे[े]डसिन ग्रच्छी तरह से पढ़ ली है, चाहे होम्योपैथीक इंस्टी र्युशन में या एलोपीथक इंस्टीटयणन में वह डिफरेंशियेट कर सकता है कि उसने आ इस्तेमाल करना है । एक फेमन काडियोलौजिन्ट-- ग्राप जानते हे रें- ह तम जान ब्कील, पदमश्री भी उनको मिली है---उन्होंने एक ग्रायुंदिक दवाई यूज की है, दो-बार एक्सपेरीमेंट्स करके । वह दवाई पिछने कई वर्ज ते डाइरेक:ली इन्डाउ रेक्टली युज हो रही है हाई ग्लड प्रैशर में । ग्रोरिजिन कहां से हग्रा था ग्रीर कहां पहुंच गया । वह प्रेसकाइत्र नहीं कर सकते, इसके मुत्तालिक छा गया है कि केई पीन्ल क्लाज होना चाहिए या नहों होना चाहिए । मैं समझना हूं कि पीनल क्लाज नहीं होना च िए । ग्रापको जव ग्रच्छो तरह से एक चीज का ज्ञान है तो वह र मझ सकता है।

श्वी भान सिंह वर्माः इसका मतलव यह है कि जो जिंग साइंस में क्वालीफाइड है उसी में क्टिस करे।

साक्षी : उसी में प्रेक्टिस करेगा और उसे करनी चाहिए । अगर विलकुल कोई ध्रदलबदल करता है और डेंजरस हो जात है तो शेक है उसके लिए क्लाजेज भी हो सकते हैं।

श्री मान सिंह वर्माः ग्र.पा भ्रपनी मिसाल रखी है कि श्राप एम०वी०वी०एस० हैं. होम्योपैशो भी पढ़े हैं, देनों श्कार वा ज्ञान श्र.पको है लेकिन कई बार हम जैसे होम्योपैय जिनको एफोपैथिक दवा प्रों का ान हो जाता है, देने लगो हैं, बैद्य भी देने लगो हैं उस प्रकार से हों तो दय उसको रोका जाना चाहिए साक्षी : जैसा मैंने कहा कि जो माजिनल चीज है उसमें मुक्तिल है कोई एक्सक्लूसिवली ऐसी प्रेक्टिस करता है जो परिलक के लिए डेंजरस हो जाय तब बैसा करना चाहिए । पीनल क्लाजैज सब प्रेक्टीशनर्स के लिए कामन होने चाहिए लेकिन मैं समझता हूँ कि पीनल क्लाज होना ही नहीं चाहिए ।

श्वी मान सिंह वर्मा: जिस साइंस में प्रेक्टिस करता है उसकी क्वालीफिकेशन उसके पास होनी चाहिए।

साक्षी : कोई एम० वी० वी०एस० डाक्टर श्रायुर्वेदिक पढ़ता है एक साहव एम० डी० थे, श्रायुर्वेदिक पढ़ी श्रीर जाम नगर रिसर्च इस्टीट्यूट में थे, डा० ग्राशुतोष मजुमदार मुखर्जी के लड़के है एम०बी०वी०एस० हैं, श्रायुर्वेदिक भी हैं, श्रीर एलोपैथ भी पढ़ा है। श्रगर वह उसको समझ सकता है तो दूसरा श्रादमी भी पढ़ कर समझ सकता है।

श्री मास सिंह वर्मा : ग्राप मिक्स ग्रप कर रहे हैं। समझ सकना तो ग्रोर वात है। जिस डाक्टर ने जिस साइंस क्वालीफिंकणन लो है उसी में उसको प्रैक्टिस करना चाहिए। दूसरी साइंस में वह तभी प्रक्टिस कर सकता है ग्रगर उसके पास ज्ञान है। ग्रगर डिग्री नहीं है, डिप्लोमा नहीं है तो वह एलाउड नहीं होना चाहिए।

साक्षी : यह तो ठीक है, लेकिन मार्जिनल केसेज में ग्रोवरलेपिंग (overlapping) होगी ।

श्वी मान सिंह वर्मा: गार्जिनल में ही तो गड़बड़ होती है।

साक्षी: होम्योपैथिक मैटेरिया में है कि यह सिम्प्टम हो तो यह दवाई दो, टिक्चर से लेकर हाई पोटेंसी हम यूज करते हैं। कई लोग---टिक्चर्स को कहेंगे कि एलोपैथी इस्तै-माल करते हैं। कुछ लोग इस्नेंमाल ही चे की करते हैं। इंडीवीजुग्रल्स ही न सारा कन्ट्री, फांस में 6th से ऊपर की पोर्ट हो है ही गहों । मैं उन की फार्मी कोपिया official है बे कहते हैं कि उससे ऊपर की बे जांच नहीं कर सकते, इपलिए वनावे की इ. ाजत नहीं । Anyone who has acquired medical qualification has been trained in this means to find out where he should use which medicine. There will be overlapping here and there and there cannot be a penal clause. It is right that they should be encouraged to practise that system only but it is not possible to put a penal clause.

DR. SANKATA PRASAD: Do you think that in cases of emergency the homoeopath should be allowed to prescribe some of the allopathic medicines or not?

WITNESS: What makes you think that emergency is exclusively in the purview of allopathy only? Emergency can be surgical; emergency can be medical. What an allopath may think is surgical emergency I may think it is medical emergency. The whole thing will depend on the discipline in which you practise. According to Hahnemann is very acute diseases or emergencies you have to sit by the bedside of the patient. Within two hours if he does not get better then your medicine is wrong.

श्री चिरंजीव झा: एक बात में पूछ त चाहता हूं कि ता होम्पोाँ कि मेडितिन इडिनैडेंडली, विना दूसरी नैंशे का सहारा लिए चलाई जा सकती है श्रीर क्या कभी दूसरी मैडिसिन की ग्रावज्यकता नहीं पड़ सकती है ?

साक्ती: ग्राप का कियी खास डिसीज में मनलब है ?

श्री चिरंजीव झा: मैं जनरल बात पुछ पड़ा हूं।

साक्षी : होम्योपेयी उन्क्वायरी कमेटी की रिर्पोट में एक चीज उन्होंने कापी की है वन आफ एईम आफ दि इंटरनेशनल प्रेसीडेंट्स । उसने जिनने मारे तरह के इलाज ग्रीर मैडीकन तरीके हैं उनकी लिस्ट बनाई है। ग्रगर ग्राप वह चाहने हैं तो ग्राफिस को 🗘 मुहैया कर दुंगा । उनमें उन्होंने कई मेडिकल ग्रौर हीलिंग साइन्सेज बताई है। उनमें एक तरीका होम्योपैथी भी है। ब्रव ब्राप नहीं कह सकने कि एक बादमी जो हौम्योथेयी की <mark>प्रेक्टिस करता है उतके पास माइक्या</mark>ट्रिक औसे नहीं या सकता । वह एसोरैबी मही है । गह ख्याल दिमाग में छा गया है कि फलां ची ग र्तोरैबी है । ब्तड प्रैंगर नापने का इंप्टूमेंट एउ होम्योपैश ने बताया था उसने यह तो नहीं कहा कि इसको ए रोपै गयुज नहीं कर सकता। इनी तरह एनैन्थिशिया का मास्क एक होम्योपैय ने बनाया था, बह गाइना-कोनोजिस्ट था, उसको स्किनर्स म.सा कहते हैं। उपने यह नहीं कहा कि रगोगैय <u> হূ</u>পকা य ज नहीं कर सबता । Anybody who gives anaesthesia will use that. Therefore it is not get domain of medical treatment of patients. Homoeopathy is a system of medicines or therapeutics and it is one of the good methods of treatment. हमारे यहां दिल्ती में एक डिपटी डाइरेस्टर हैन्थ सर्विमे न थे ने कहने लगे कि जो होम्यो वैथिक इ राज कराएग यह एक्सरे नहीं करा सकता. वह डेन्टिस्ट के पास नहीं जा सकता । मैंने उनसे कहा कि जिसने एक्सरे ईजाद किया था वह ग्राप का रिश्तेदार तो नहीं था, वह न ए नोपैंथ था, न होम्योपैंथ था, 'बह तो माई-टिस्ट था ।

He was a scientist. He was a physicist. He gave X-ray to the world.

यह ठीक है कि एकोपैय ज्यादा हैं, उनका नम्बर ज्यादा है, लेकिन उनकी एक्स रे की मानोपली कैसे हो गई। दवायों को जो ईजाद हुई है वह भी एलोपैंथ ने ही नहीं की है। सल्फा ग्रीर ऐसी दूसरी दवायों की ईजाद जिन्होंने की, वे केमिस्ट थे या वायोकेमिस्ट थे। तो इसका मतलब यह नहीं हुप्रा कि एलोपैंथ की मानोपली

। हो गई ।

There are many other methods of treatment. There are the electro therapy, radium therapy, hydrotherapy, mechano therapy. The pharmacopic therapy has got four branches. Allopathy is mostly palliative. There are occasions when we give only palliatives.

ऐसा नहीं है कि हम पैलिदेशन कर नहीं सकते हैं। यह ठीक है कि हमारे जिमिटेगंस हैं।

You will remember that there was a number of jaundice cases in Delhi around 1956 and then as M.P. died of it. We had a symposium and we offered to the Irwin Hospital that we could treat their jaundice cases as allopathy has no treatment for it. However we never got a chance to treat such cases. They let them die rather than take help from Homoeopathy. There may be other methods of therapeutics but for the curative method this is a very definite and good system of treatment.

यहां ऐमां भो होता है कि हडि्डयों को मल कर के गोग ठीक कर देते हैं जो मेडिकल साइंस के लोगों को सगझ में नहीं क्या रहा है। आज दुनिया क्रागे बड़ रही है। कोई दूसरी साइंस भी क्रागे क्या सकती है।

DR. K. NAGAPPA ALVA: The idea of having this enactment is to control the homoeopathic system of practice and to have practice of standard. For this medical education of standard is necessary. I am sure you will agree that it is necessary that we develop these systems independently, We should have not only national standards, but also we should rise to international standards in practising the homoeopathic system. What I find from my little experience is that it is

lacking to some extent in the preventive aspect and also on the research side. Keeping in view the advances made in science and the research findings, how will you develop the research side in homoeopathy? How will you improve your system and have a real preventive aspect in this system of medicine?

WITNESS: In regard to the preventive aspect there are two branches. One is hygiene, sanitation and a better standard of living. If it is stretched it may also include dietetics, vitamins, etc. The other aspect which the hon. Member has in mind is the giving of preventive inoculations. As far as the first aspect is concerned, research in the matter of how a disease is carried by different agencies like flies or mosquitoes must be taken advantage of.

DR. K. NAGAPPA ALVA: Immunisation.

WITNESS: No. This is prevention. We know that malaria is carried by the anopheles mosquito. You use a mosquito net or use DDT spraying. That is one aspect. The other aspect is immunisation by way of inoculation. This is a field which is very similar to homoeopathy. You are using the same principle as the homoeopathic principle. In homoeopathy you are using what is called a similar medicine-Here you are using the same. There is a lot of controversy about it, whether it remains the same after the different processes of pharmaceutical preparation, whether the vaccine is exactly the same or whether it should be considered to be slightly modified. Anyway, leaving that apart, it is very similar. Homoeopathy used vaccines before Pastour came into the long field. The only difference is in the method of administration, Allopathy uses it by inoculation. In homoeopathy it was given by mouth. It was felt much safer to do so. It has very little side effects. It will also not carry foreign bodies and contaminants which inoculation is likely to do. I would say there are reasonable claims for homoopathic medicine in the field

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of prophylactics. In fact where there are no prophylactics in allopathy with in measles Homoeopathic Prophylac-tic is being widely used. Before the polio vaccine was found out, polio was being presented successfully by the homoeopathic system. There was a doctor in 1949. He published an article in the British homoeopathic journal giving details of the medicine which he had used for the prevention of polio in South Africa. Still the Government patronises the dominant system (allopathy), therefore, the homceopaths could not put their medicines to a large-scale trial. There are in any American publications which published the use of 'Veriolinum' as a preventive for small-pox. If it is taken first and then a small-pox vaccination is made, the person is not likely to "take" the small-pox vaccination because he has already developed immunity. There was also an experiment where a doctor gave a certain plant medicine (Baptisiaincloria). After its administration the Widal Test became positive showing immunity to typhoid bacillus-being generated in the body. These findings are there, but I confess that only after large-scale trials these can be put out in the market. By and large the homoeopathic profession is against giving inoculations or giving injections. They would prefer to give similar vaccines orally. For instance, as mentioned before in the case of measles, we have a 'nosode' which is souivalent to a vaccination. Except for gama globulin, the allopaths have no preventive medicines for measles. If it is used in Government dispensaries and on a wide scale, it would be certainly worth while and if proper statistics are kept it could give us the true data about its efficiency. About research, it is being carried out, though it has not the backing of the pharmaceutical houses. In allopathy it is not being carried out by the doctors. because there the pharmaceutical houses have the means. One of my friends who was with me in M.B.B.S. course admitted to me that they are like the puppets in the hands of the pharmaceutical houses. He told me that if a Lederle Sales agents comes

he prescribed auriomycine and if a Squibbs man came he started prescribing tetramycine. I mean by their convincing sales talk the doctor becomes deflected from what he was used to give before. They are the people who are mostly doing research. Hahnemann also did not have the backing from the pharmaceutical houses. Ihave seen and I will also show you through some of my films that research is being carried on all over the world, in France a pharmacist on his it has its own initiative in doing research and they are utilising the drug called Alloxan. It was found during the Last World War that it had diahetogemic effect. They are doing research both on mica and on human beings and to see how it can be used as a potential homoeopathic remedy for diabetic and so on. We do not do research of the kind the allopaths do because the drugs are not replaced. they are not discarded. The drugs which Dr. Hahnemann found 170 or 180 years ago are not finished. It is still being used. Its method of use, of its sphere of artility and delineaindications, can be better tion, its understood and another drug can be introduced which may be given for the same disease state but more effectivelv. For instance, we do not have one drug for asthuma. There are still cases which may not quite respond-Therefore, you need more experimentation. Even then they do not discard the old drug. If an allopath were to rise from his grave, he will probably not be able to practise his system of medicine largely because that system has changed so fast, whereas if a homoeopath can still go on.

SHRI SASANKASEKHAR SANYAL: How many homoeopaths have gone to the grave?

WITNESS: If you believe in reincarnation, they have been rebosen

SHRI N. G. GORAY: You said something about foreign degrees and diplomas. But some of us were told in Bombay and at other places that many of these are bogus and they can be had almost for the asking.

WITNESS: That can certainly be found out because many of us both from the Governmental side and the professional side have gone abroad as disinterested people. I have myself gone to all these institutions to study. in some and see the others and we have an idea as to what kind of diplomas are there and which are the ones that can be had for the asking. You see some people using diploma which are, in fact, membership of certain associations and they make it sound like a diploma. There is the British Homoeopathic Association. It is a body of lay people, it is not a body of professionals and anybody can become a member because it is a body of laymen or sympathisers. It is a promoter of the system without being composed of professional people. There would be a person who would become a member of that association and put it up as a qualification. It is the actual thing, I am not stating anything hypothetically. A Homoeopath used the affix 'MBHA'-(London) Member of the British Homoeopathic Association, London. After his name-So they told me that they would admit lay people from Britain but only qualified doctors from outside because they found that this membership was being abused.

The point is, we are developing according to our own genius. There are only two countries in the whole world which have got this type of undergraduate homoeopathic institutions, one is India and the other is Mexico. All the other countries have got only postgraduate courses. Therefore the question of their issuing false diplomas does not arise.

DR. K. NAGAPPA ALVA: Do you mean graduate in modern medicine and post-graduate in homoeopathy?

WITNESS: Yes, so there cannot be bogus diplomas.

SHRI N. G. GORAY: Will it be correct to say that so far as the homocopaths in India are concerned, there are particularly two schools? One is of those who insist on a certain medical knowledge and on the establishment of laboratories and hospitals and the correct understanding of the medical system. The other school of thought seems to hold the view that so far as homoeopathy is concerned, there is no necessity of having hospitals and other paraphernalia because it is a science that can dispense with these things. We came across such practitioners who have said that hospitals are not needed, that no beds are necessary, that no experimentation is necessary. Would you say that there are two schools of thought like that?

WITNESS: I would say that there is only one sane school of thought. If anybody says like that, be no hospitals etc. are needed to my mind, he is suffering from a complex; and he must not have gone to an institution himself. I have also heard it said not only ordinarily, but in a court of law. that a homoeopath and-this was said by a homoeopath himself-does not need a stethoscope and all that. When I learnt about this, I wrote a 12-page article on the value of diagnosis to a homoeopath. The definition of the American Institute of Homoeopathy is that a homoeopath is one who adds to his knowledge of medicine a further knowledge of homoeapthy because they are all post-graduates. Many, includmyself, in this country do not ing entirely subscribe to this view because we cannot think of wasting so much of time (and we know that it is a burden parents) on a post-graduate on the study of Homoeopathy offer a long medical education (allopathic). He will spend another spell of time, two or three years, studying homoeopathy-Then again it is very difficult to swim against the current of an established system of treatment. If he is interested, if he has got that bent of mind, he should rightway study in that institution where he gets homoeopathic education. One such country is India and the other country is Mexico where such facilities exist. In Mexico there is one Government institution and also one private institution. One is under the Ministry of Education and the other is called the Homoeopathic Free School.

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SHRI N. G. GORAY: Your advocacy of homoeopathy does not depend so much on the cheapness of the medicine as on the soundness of the system.

WITNESS: It depends hundred per cent. on efficacy. Human life is far too precious. If it is known that something which is very expensive but is necessary and life-saving should be given it should be given even if it is expensive. And homoeopathy is, of course, admirably suited to the country also because of cheapness as an additional point. If it was not effective cheapness would not mean anything. And it is not very cheap to the practitioner as it is believed. In initially setting up his practice, the doctor has to spend a sizeable amount, say, about Rs. 7,000 on purchase of medicines. If he has to give a good medicine he has to get his own stock. In homoeopathy the recurring expenditure is not much.

CHAIRMAN: Thank you so much, Dr. Harish Chand for your coming and giving evidence before this Committee.

WITNESS: Thank you so much for giving me such a patient hearing and making me more enlightened than when I came.

(The witness withdrew.)

(Shri N. G. Goray in the Chair)

[The Witness (Dr. Lohan Singh) was Called in].

CHAIRMAN: Dr. Mohan Singh, you are most welcome to this meeting. If you can introduce yourself briefly, we shall be obliged.

WITNESS: I am not a trained doctor in the ordinary sense of the word. Fifty years ago, I was given up by the leading doctors of Punjab. They said I could not live for more than three months. And homoeopathy saved my life. That is why I am still living 50 years later. ;Although I am an old man, still I am able to work. That gave me an introduction to homoeopathy which I studied because I live in villages, far away from centres where one can get medical help. About 20 years ago, I took up this profession after retirement. This is my introduction.

CHAIRMAN: So far as this Bill is concerned, have you got any obscrvations to make? Before that I may tell you that the proceedings of this Committee are confidential and should be kept confidential still they are placed on the Table of the House.

WITNESS: The main objection that I and most probably other homoeopaths have is that people who are registered on the basis of their experience ought to be able to stand for elections. The barring of such people would be a handicap not only to themselves but to the profession also and to the guidance which one could get from them.

CHAIRMAN: Anything else? Is that the only objection that you have?

Well, this is the main WITNESS: one. The other is, my experience has been that we are merely attached to the tail of some allopath or scientifically trained man or somebody who may be called the Director of Health Services or the Health Department and so on. The result is that homoeopathy is always cast off and not encouraged; it is always discouraged. For example, the rules for the setting up of colleges or institutions or dispensaries or other paraphernalia practically bar us. The Head of the Department is not interested. And this has been our setback all along. If a man gets hurt and supposing there is a homoeopathic hospital and he goes there, the bleeding can be stopped in three minutes or at most five minutes, and consciousness can be restored in 20 minutes, one hour or two hours. What happens in an allopathic hospital? For days together, there is absolutely nothing known about the patient who has been hurt very much, seriously perhaps. And he is unconscious for 20 days or 30 days till he dies because they have no proper guidance for treatment. In some cases they give "tetracyclin" and in some cases they give opium to stop pain. But this

generalised thing done not help the patient. Some people die of shock. Sometimes people die of "medication" For example, a gentleman whom I very much revere met with an accident at Bombay. The main symptom that was reported to me about that person was that there was a constant urge for

stool but no passage of stool. What could the scientific medicine do about if? From the meagre information that was given to me, I found some medicine that should be given to him for four days and then the result be reported to me.

CHAIRMAN: Have you finished?

WITNESS: Yes.

CHAIRMAN: What would you suggest by way of upgrading the education so far as homoeopathic medicines are concerned?

WITNESS: My view is a bit different from what the orthodox view is. I want that a man should be trained in the homoeopathic way of treating a case, finding out the important symptoms, then finding out the causes of it and then finding out the remedies on the basis of the important symptoms. They should study from the materia medica in order to see which medicine would suit that person. Generally speaking, two or three medicines come through. You have to study from the materia medica in order to find out which are the medicines agreeing with the genius of the patient. This should be ingrained in the person berofe he is given any idea or any knowledge of the pathology anatomy or surgery. I am not against such knowledge I do not say that these should not be taught. They should be taught, but wen the student has got into his mind the genius of homoeopathy so that he is not bothered to guess what goes on inside.

CHAIRMAN' Would you agree that there should be some minimum education about the anatomy and other things and then he should be given the necessary knowledge and education in homoeothy?

WITNESS: You put the horse before the cart and not the cart before the horse. Education in homoeopathy is something psychological and it should precede all other education. I do not want that people who are treating patients should be ignorant of pathology or that they shoud not be able to diagnose what is wrong with their patients. They should be able to see and assess at once that the man is suffering from a very serious kind of appendicitis and not give him a purgative as was given by an allopath, an experienced allopath because he did not pay attention in order to find out the real trouble. And I am sure the patient would have died if the necessary medicine had not been given to him within five or ten minutes of that. I do not, therefore, want that they should be ignorant people. No, they should not be. They should be given all the education that is necessary in the basic sciences, in physics, in chemistry, in physiology in anatomy in biology and all that sort of thing. But those things are tails. They should not be allowed to crowd out the mind of the man.

श्री मान सिंह वर्मा : डाक्टर साहव, ग्रापने ग्रभी कहा कि जो होम्योपैथ इंस्टिट्य्श-नली क्वालिफाइड नहीं हैं और तजुबें के कारण से रजिस्टर्ड हैं उनको भी फेंनाइज का हक मिलना चाहिये। मतलब यह है कि वे भी इलेक्शन में हिस्सा ले सकें । यह शायद आपने कहा । उसी के साथ मुझे यह मालुम करना है ग्रापसे कि जहां तक मेरी जानकारी है इस किस्म के होम्योपैथस की तादाद ज्यादा है बनिस्वत उनके जो इंस्टिट्युशनली क्वालि-फाइड हैं। ग्रगर इस तरह से उनको चुनाव में भामिल होने का मौका दिया जायगा तो मैं समझता हुं कि उसी प्रकार के लोगों को उसमें चुना जायगा भौर इस बिल की जो मंशा है कि आगे ऐसे लोग ही इस काम को करें जो क्वालि-फाइड हों तो वह मंगा पूरी नहीं होगी । इसके लिए क्या म्राप वतायेंगे कि क्या किया जाय ।

साक्षी : देखिये बात यह है कि होम्योपैंची ने जो तरक्की की है वह इस बास्ते नहीं की है **30** ·

कि गवर्नमेंट ने उसकी कोई खासें मदद की है। इसकी सारी तरक्की जो हुई है वह कुछ लोगों की लियाकत ग्रीर सूझवूझ की वजह से हुई है। तो ऐसे ग्रादमियों को ग्राइन्दा होम्यो-पैथी से डिवार कर देना ग्रच्छी वात नहीं है। ऐसे ग्रादमी भी हैं जिनको बहुत कम ग्राता है और ग्रगर ऐसे ग्रादमियों को हम ग्रागे कर देंगे तो उससे नुकसान ही होगा। ऐसे ग्रादमी भी हों जो इंस्टिट्यू शनली ट्रेन्ड हैं।

श्री मान सिंह बर्मा : इसके लिए इस विल में यह प्राविजन किया जा रहा है कि उनका नामिनेशन किया जा सकता है। ऐसे लोग जो कारामद सावित हो सकते हैं इस साइंस के लिए उनके लिए इस विल में नामिनेशन का प्राविजन है।

साक्षो : जो ग्राप फरमा रहे हैं वह विल्कुल ठीक है । मगर जो कुछ तजुर्वा वतलाता है वह यह है कि हमारे साथ जो सलूक किया गया है वह सौतेली मां का सलूक किया गया है। ग्रगर ग्राप इसको किसी शख्सियत की तरक्की का सवाल समझते हैं तो वह गलत है। ग्रपने मुल्क के वह ग्रादमी जिनको कोई ग्राराम नहीं हो रहा है, जो जिन्दा हो सकते हैं, जो जिन्दा रह सकते हैं, जो कामकाज के काविल हो सकते हैं, ऐसे लोगों में एक नई जिन्दगी डालने का काम होम्योपैथी करती है, रोज करती है श्रीर कर सकती है। जो ग्रादमी नये ट्रेन्ड हो कर के ग्राते हैं उनमें यह हिम्मत कभी नही होती है । वे घवड़ा जाते हैं श्रौर टेटरासाइक्लिन जैसी दवाएं देने लगते हैं। हमारी जो इतनी बड़ी डैमोर्कसी है इसने कभी कोई ऐसी स्टेटिस्टिक्स हासिल नहीं की जिससे यह मालूम हो सके कि जो कुछ हम कर रहे हैं या जो कुछ हम करना चाहते हैं या जो कुछ होना चाहिये उसके मुताबिक होता है या नहीं ।

श्री मान सिंह वर्मा : वह श्रापका फरमाना सही है, लेकिन श्राप इस बात से ऐग्री करेंगे कि सरकार ने इस तरफ ध्यान दिया है, इस साइंस को रिकगनाइज किया है, एक सेंट्रल कोंसिल बनाई जा रही है श्रीर इसी सब के लिए यह बिल श्राया है। यह तो श्राप भी चाहेंगे कि आगे इसका सही ढंग से विकास हो सके । जहां तक सरकार का सम्वन्ध है वह भी इसी के लिए प्रयत्नशील हैं। आप भी इससे सहमत होंगे कि हमेशा यह नहीं हो सकता है कि केवल प्रैक्टिस के आधार पर रजिस्ट्रेशन होता रहे।

ऐसा लगता है कि एक जमाना ग्राएगा कि सब क्वालीफाइड डाक्टर ही रह जाएंगे ।

साक्षी : यह ठीक है, मगर एक कहावत है] फर्स्ट थिंग फर्स्ट । झगड़े झंझट जो हुकूमत के सामने हैं वे- हुकूमत ही समझ सकती है। में पोलीटीशियन नहीं हूं, मैं नहीं वतला सकता, मगर हैल्य के मामले में 25 साल के वाद जाग ग्राने लगी है। इस वास्ते यह जरूरी है कि तेजी से काम हो, तभी कुछ हो सकता है । श्रगर जेनुइनली यह ख्याल हो कि होम्योपैयी को तरक्की देनी है ग्रौर उसके जरिए लोगों की सेहत को ग्रच्छा बनाना है तो फिर ग्रापको कोई मुक्किल नहीं आएगी । मुझ्किल उसी वक्त होती है जब किसी पोलीटिकल म्रस्टेणन की वजह से एक ग्रादमी को ग्रागे किया जाता है चाहे वह इस बात के काबिल है या नहीं कि वह डाक्टरी कर सकता है या नहीं, वह लोगों को सेहत दे सकता है या नहीं दे सकता है।

CHAIRMAN: I would like to thank you for having taken this trouble to come here and given the Committee the benefit of your experience and knowledge. We are grateful to you and I might assure you that whatever you have told us today will be taken into consideration when the Bill is finally drafted.

WITNESS: May I have the privilege of presenting you a paper which I read long back in 1959 at Kanpur? If you like, I can give more copies, Hon. Members of this august Committee can read this at their leisure.

CHAIRMAN: Most welcome.

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WITNESS: I am also giving a booklet called ROZEGARR. This shows how Allopathy and other sciences are taught in this country practically. What is learnt in medical colleges must be forgotten after the examinations and therefore these people have to depend upon such things as this. CHAIRMAN: They are refresher courses. Thank you once again.

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WITNESS: I must thank you also.

(The witness then withdrew) (The Committee then adjourned)

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Tuesday, the 9th January, 1973

PRESENT

REPRESENTATIVE OF THE MINISTRIES

Ministry of Law and Justice

Shri P. L. Gupta, Additional Legislative Counsel Shrimati V. S. Rama Devi, Deputy Legislative Counsel

Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy Dr. D. P. Rastogi, Senior Research Officer

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary Shri M. K. Jain, under Secretary

WITNESSES

1. Representatives of the All India Institute of Homoeopathy, Delhi-

(1) Dr. K. G. Saxena, President

(2) Dr. J. P. Srivastava General Secretary

(3) Dr. Shanti Dev

(4) Dr. K. N. Mathur

(5) Dr. N. N. Singh

(6) Dr. T. R. Chaddha

- (7) Dr. P. C. Mehta
- (8) Dr. C. M. Grover
- (9) Dr. K. K. Juneja
- (10) Dr. Davendra Mohan
- 2. Representative of the Tilakdhari Homoeopathic Medical College and Hospital, Jaunpur.—Dr. A. N. Singh Principal.
- 3. Dr. Jugal Kishore, Adviser in Homoeopathy, Ministry of Health and Family Planning, New Delhi.

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(The Witnesses were called in)

- ((1) Dr. K. G. Saxena, President.
 - (2) Dr. J. P. Srivastava, Gen. Secretary.
 - (3) Dr. Shanti Dev,
 - (4) Dr. K. N. Mathur,
 - (5) Dr. N. N. Singh,
 - (6) Dr. T. R. Chaddha,
 - (7) Dr. P. C. Mehta,
 - (8) Dr. C. M. Grover,
 - (9) Dr. K. K. Juneja and
 - (10) Dr. Devendra Mohan.

CHAIRMAN: Welcome, Dr. Saxena. We will have the benefit of your expert advice. Have you gone through our Bill? What comments do you offer on the Bill? Please note that the proceedings of this Committee are confidential.

DR. K. G. SAXENA: Hon, Chairman and hon. Members of the Committee, we are grateful to you for extending an invitation to the All-India Institute of Homoeopathy for representing their views with regard to the Central Homoeopathy Council Bill,, which is being discussed by this august body.

· As you are all aware, the Rajya Sabha and the Lok Sabha had earlier discussed the Central Council for Indigenous Systems and Homoeopathy Bill in 1968. The Bill was referred to another Joint Select Committee with Dr. Bhargava as the Chairman and 36 Members of Parliament. Now that Committee also had taken the views of the different systems of medicine, namely, Ayurveda, Unani and Homoeopathy, and a large number of witnesses were also examined and a great deal of circulars, petitions and views of individuals as we'll as committees all over the country were also considered by that committee. That Committee decided two things. One, there should be separate Councils for indigenous systems and

The other most for homoeopathy. important point that was recommended by that Committee was that the Central Councils for Ayurveda, Unani and Homoeopathy should be constituted, of qualified practitioners. These were the two main recommendations of that committee. I would entreat and request the hon. Chairman as well as the hon. Members of this august Committee that while taking into consideration the draft Bill that is before us, they should also give due consideration to the observations and decisions of that Committee as That is all I wanted to imwell. press upon this Committee.

We have gone through the different details of this Bill that is before us. Our organization has also gone through the same and all of us are to the contents of this agreeable draft Bill. Actually, if I may say so, this Draft was approved by that Committee, and this draft was prepared on the lines of the draft that was recommended by the last Committee. At that time, I happened to be the honorary Homoeopathy Adviser to the Central Government, and I know that this draft was prepared at that time and this is the same draft which is before this august body. Well, you have every right and you have the privilege to give your comments and amendments to this draft. as are necessary according to your wishes.

We shall be very happy to give our views to any of you who would like to know on any point with regard to this Bill. Thank you.

SHRI N. G. GORAY: At the very beginning, I would like to put one question. Yesterday we had representatives of a similar All-India institution. I would like to know what is the basic difference betwen the two?

DR. K. G. SAXENA: The All-India Institute of Homoeopathy is an all-

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India organization of qualified practioners. I would like to emphasize that we have 90 per cent institutionally qualified members and 10 per cent registered practitioners in homocopathy as members. We have branches in all the States of India. We have about 20 branches, and the number of practitioners that are on our rolls is about 3,000.

SHRI N. G. GORAY: What is the break-up of the other institution? Do you mean to say that there are unqualified people? If so, what is the percentage?

DR. K. G. SAXENA: So far as I am aware, there is preponderence of unqualified people on that body,, while we have got a very large majority of qualified practioners.

CHAIRMAN: What do you mean by qualified practitioners.

DR. K. G. SAXENA: Those who have gone through regular recognised homoeopathic institutions and got diploma or degrees from these institutions.

CHAIRMAN: How many of your members are qualified medical practioners I mean, those who have gone through some institutional training.

DR. K. G. SAXENA: I have stated earlier that about 90 per cent of our 3,000 members are institutionally qualified.

CHAIRMAN: Why do you make a difference between institutionally trained persons and those who are regular practitioners?

DR. K. G. SAXENA: Madam, we have to make a distinction betwen the two because, after all, the people are to be served only by qualified people. My definite view is that in our great country we should have only those people who practise different systems of medicine; who should be institutionally trained.

CHAIRMAN: What has your institutions done about this? Have you had any agitational programmes, any seminars or any public metings?

DR. K. G. SAXENA: Well, the All-India Institute of Homoeopathy has been functioning since 1944, and, if I may say so, whatever progress has been made during the last 25 years or so, has been mainly due to the activities of the All-India Institute of Homoeopathy.

CHAIRMAN: If a homoeopathy who is not institutionally trained, applies to you for becoming a member, what advise do you give him?

DR. K. G. SAXENA: As I told you earlier, even though we have opened the door for even those who are registred practitioners, we want to have the majority of the qualified practitioners on our rolls. We have strict rules about unqualified people becoming members of our Association.

CHAIRMAN: You have told that you have kept the door open.

DR. K. G. SAXENA: Open for a few.

CHAIRMAN: That means that you are picking and choosing.

DR. K. G. SAXENA: Yes.

CHAIRMAN: You claim that yours is the only institution on the All-India basis whose membership is strictly restricted only to the institutionally qualified people.

DR. K. G. SAXENA: Yes, Madam.

डा० लक्मीनारायण पाण्डेय : अभी आपने वताया कि इस विल के आने के पहले ऐसे ही विल के वारे में विचार हो चुका है, इसलिए इस विल के वारे में आपको कुछ प्रधिक कहने के लिए नहीं है । वर्तमान बिल पर आपके कोई कमेंट्स नहीं हैं ? इस पर आप किसी प्रकार का संशोधन और कमेंट्स देना चाहते हैं ?

डा० के० जी० सःसेना जहां तक इसमें संशोधन का सवाल है, हमें इसमें कोई संशोधन नहीं करना है। हम इस बिल के साथ हैं जो कि इस कमेटी के सामने रखा गया है। DR. K. G. SAXENA: Well, it is a very difficult question. But I think there can be coordination provided the other Association keeps in mind that the standards of education are kept high.

SHRI SASANKASEKHAR SANYAL: My question is not whether there can be co-ordination. My question is whether at present there is coordination between the two.

DR. K. G. SAXENA: At present, there is not much coordination between the two.

SHRI SASANKASEKHAR SANYAL: Not much or not at all? Let us be clear. It is not at all.

CHAIRMAN: All India Medical Organisation is only one Association. What is the reason for your not amalgamating with the other institution. Is there rivalry for leadership?

DR. K. G. SAXENA: All India Medical Organisation is a body of only qualified allopathic practitioners. There is not a single unqualified man there.

SHRI K. RAMAKRISHNA REDDY: From your answer, we can presume that yours is the only Organisation where institutionally qualified people are allowed to become Members. In other associations, there are unqualified people.

DR. K. G. SAXENA: There is some percentage of qualified persons there also. As I told you earlier, there is a preponderance of unqualified people in that Association.

SHRI K. RAMAKRISHNA REDDY: What is the percentage?

DR. K. G. SAXENA: That is difficult for me to tell you. SHRI K. RAMAKRISHNA REDDY: When you do not know the percentage, how can you say that your organisation has more qualified people?

CHAIRMAN: In different branches, they have unqualified people as, President or Secretaries.

श्री मार्नासह वर्मा : ग्रापने ग्रभी वताय। कि धापका जो ग्रागंनाइजेशन है उसमें 90 परसेंट क्वालिफाइड है और 10 परसेंट अन-किमालिफाइड लोग हैं। यह तो स्राप मानते हैं कि ग्रापके यहां भी ग्रनक्वालिफाइड लोग 1:0 परसेंट हैं। दूसरी ग्रागंनाइजेशन में भी क्वालिफाइड श्रीर रजिस्टड जोग हैं । तो मिक्चर तो ग्रापके यहां भी हैं ग्रौर उनके यहां भी हैं। ग्रगर ग्राप केवल, क्वालिफाइड को लेते तो डिफरेंस हो जाता । इसमें ग्रडल्ट्रेशन कितना है यह देखने की जरूरत है। मैं यह समझता हं कि कल जो लोग ग्राये थे उन्होंने यह विश्वास व्यक्त किया कि हम दोनों आर्ग नाइजेगंस में वातचीत चल रही है श्रौर श्राशा है कि शीझ ही दोनों मार्गनाइजेणंस एक हो जायेंगी । होम्योपैयी के विकास के लिए यह वहत ग्रावश्यक है कि श्रापकी सब ग्रागनाइजेशंस एक होकर काम करें। क्या आप इसके वारे में विचार करने के लिए तैयार हैं?

दा० के० जी० सेक्सेनर : जहां तक मेरा प्रपना विचार है, मैं पहले ही धर्ज कर चुका हूं कि जब हमने संस्था गुरू की थी धौर जब मैं इस होम्योपैथी के विषय में।सेंट्रल लेजिस्लेटिव ऐसेम्बली घौर पालियामेंट के मेम्वरों से और लीडर्स से मिला करता था तो उन लोगों ने यही वताया कि सबसे वड़ी दिक्कत जो है आपको रिकागनाइज करने में वह यह है कि प्रापको सब लोग अनक्वालिफ़ाइड मानते हैं । हमने कहा कि हम लोग कलकत्ता या धौर जगहों से होम्योपैथी डाक्टरी पास करके आये हैं । उन लोगों ने मुझ यही बतलाया और एक बार मुझे याद है कि मैं जगजीवनराम जी से मिला तो उन्होंने कहा कि जब तक प्राप ग्रपनी संस्था क्वालिफाइड डाक्टर्स की नहीं बनाएंगे, गवर्नमेंट आपको मान्यता नहीं देगी । इसी दुष्टि से हमने माल इण्डिया होम्योपैथी इंस्टीट्य्ट बनाया। इसमें हमने 25 साल में काफी काम किया और हमने प्लार्नेग कमीशन को श्रप्रोच किया । उसकी वजह से हम काफी उनको अपने विचारों से झुका पांये । यह कहना कि एक संस्था हो जाने से ज्यादा कार्य होता है, में इसको मानने के लिए तैयार नहीं हूं। लेकिन मेरी तरफ से यह भी कोई ग्रड्चन नहीं है कि मैं सब लोगों से मिलू नहीं । मेरा जो बेसिक व्यू-पाइंट है वह यही है कि ग्रगर सब लोग इसी चीज को मान लें कि होम्योर्ग थी के भ्रन्दर स्टेंडर्डस होने चाहिएं, उनको मेडिकल ट्रेनिंग होनी चाहिए; तो मैं उस चीज को मानने के लिए तैयार हूं। लेकिन मेरा विचार है कि वह लोग लोवर स्टैंडर्डम में विलीव करते हैं कि तीन साल का कोर्स होम्योपैयो के लिए काफी है। मैं इस चीज के लिए विलकुल तैयार नहीं हं।

श्री मान सिंह वर्मा : मिस्टर सक्सेना, मैं म्रापसे यह पूछना चाहता था कि हमारे देश में वहत बड़ी तादाद तो रजिस्टर्ड डाक्टर्स की है. श्रीर यह भी ग्राप मानते होंगे कि बहुत से डाक्टर ऐसे हैं जो किसी इंस्टीट्युप्रन से योग्यता प्राप्त नहीं हैं परन्तु होमियोपंथी विज्ञापन के लिए उनकी बहुत बड़ी देन है और देश में जगह जगह पर इस प्रकार के डाक्टर्स हैं जिनके पास किसी प्रकार के डिग्री डिप्लोमाज ग्हीं ^jहै किन्तु वे बरुत बड़ें डाक्टर समझे जाते हैं ग्रीर उनके कारण से होमियोपैंथी साइन्स को वड़ा बल मिला है, तो इस प्रकार के जो लोग हैं, उनकी जो सेवाएँ ग्राज तक रही हैं, जो टार्च-बियर्स हें होमियोपैयी साइन्स के विकास में, उनके प्रति म्रापकी भी सद्भावना होगी कि उनको नजरग्रदाज न किया जाए---उनके विषय में श्रापकी क्या राय है ?

सःक्षी (श्री सग्सरेना) : इस संबंध में, जहां तक मुझे इस विल के बारे में कहना है वह यह है . कि इसमें 30 परसेन्टॉ्रुनामिनेशन होगे गवर्नमेंट ग्राफ इंडिया की तरफ से । तो प्रगर यह कमेटी

चाहे तो यह सिफारिश कर सकती है कि उस नुमाइंदगी के ग्रन्दर कुछ ऐसे लोगों को भी भुमाइंदगी दे सकती है। झब्बल तो मैं यह ग्रापसे वताना चाहुंगा कि मैं तो इस कोंसिल के लिए हन्ड्रेड परसेन्ट चाहता हं कि क्वालिफाइड ग्रादमी हो**ने चाहिएं ग्रीर उसका कारण यह है** कि इस कौंसिल ने होमियोपैयी स्टैन्डड्स, होमियोपैयी एजुकेगन, होमियोपैयिक मोड ग्राफ ट्रेनिंग ग्रीर **वे तमाम चीजें जो स्टै**न्डर्ड से डील करती हैं किसी भी साइन्स के, उससे उन्हें भी डील करना है, लिहाजा मेरी ग्रापसे प्रार्थना है कि ग्राप इसमें हन्ड्रेड परसेन्ट क्यालिफाइड डाक्टर्स लाएं, जो इंडियन मेडिकल कौंसिल है जो कि ऐसोपैयिक डाक्टर्स की कौंसिल है उसमें भी हन्ड्रेड परसेन्ट क्वालिफाइड डाक्टर्स हैं, ग्रौर इसी प्रकार जो इंडियन सिस्टम ग्राफ मेडिसिन्स की कौंसिल बनाई गई उसमें भी युनानी, ग्रौर ग्रायुर्वेद के ही सारे क्वालि-फाइड डाक्टर्स मौजूद हैं। तो मेरा ग्रापसे भी ग्रनुरोध यही है कि इसमें भी क्वालिफाइड डाक्टर्स ही होने चाहिए। लेकिन इसके बाद भी श्रगर ग्रापके पास कोई ऐसा रजिस्टर्ड प्रैक्टिश-**·** नर्स में ऐसा ही बहुत टाप का झादमी हो जैसा ग्रभी ग्राप कह रहे हैं तो एक नामिनेटिड मेम्बर की हैसिय<mark>त से उसकी नुमाइन्दगी की जा</mark> सकती है लेकिन में तो फिर भी यही चाहूंगा कि क्वालिफाइड डाक्टर्स ही नामिनेटिड हों, ग्रौर इजेक्टिड भी हों ।

(Shri Sasankasekhar Sanyal in the Chair)

SHRI MAN SINGH VARMA: Are you in favour of nomination?

DR. K. G. SAXENA: Well, we are absolutely in favour. We have already stated that 30 per cent of nominations of all the elected members from A and B classes must be there. That is what we have said.

डा० लक्ष्मीनारायण पांडेय : मैं यह जानना चाहता हूं कि कुछ लोगों ने घ्रपनी उदर-पूर्ति के लिए या किसी ग्रन्थ दृष्टि से होमियो-पैयी को केवल प्रपनी जीविका साधन का एक

योपैयी में रजिस्टर्ड हैं म्रौर कुछ स्टेट ने ऐसा प्रावधान कर रखा है कि भ्रगर होमियोंपैयो का प्रैक्टिजनर होमियोपैयो को छोड़ कर किसी टूसरी पैथी में काम करता है तो उसका रजिस्ट्रेंशन कैन्सल कर दिया जाता है, ग्रॉर हमारा विल इस मामले में साइनेन्ट है, तो क्या ग्राप इस प्रकार का प्रावधान चाहेंगे कि इसमें योंपैथिक प्रैक्टिजनर यदि किसी झदर पैयी में प्रैक्टिस करता है तो उसका रजिस्ट्रेंग्रन कैंग्सिल कर दिया जाए, या इस वारे में कोई पीनल जानते भी नहीं स्रौर वे होमियोर्पेथी की प्रेक्टिस के यत्तावा कभो आयुर्वेंद में तो कभी एलोपैथो में प्रैटिक्स करते हैं, वह इसलिए कि वे होमि-क्लियरली मेन्यन कर दिया जाए कि होमि-भी हैं जो होमियोपैथी की बहुत सारी वार्ते ख्पाय वना रखा है, उनमें बहुत से ऐसे लोग क्लाज रख दिया जाए ?

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뷮 कोई सीति नहीं है, वहां **मेडिसिन का कोर्स** पढ़ने पैयी भी प्रेटिक्स करता है श्रौर हमारे देश लगाएँ तो उसमें बहुत सी दिनकते होगी । यह मै जरूर कहूंगा कि इस विल के झन्दर एक पीनल क्लाज हो । एक विल को या एक ऐक्ट यायर्बेंट में प्रैटिक्स करनी चाहिए या ऐलो-वैथिक डाक्टर है तो उसे ऐलोपैथी में प्रैटिक्स भी सिविलाइण्ड कल्ट्रोज के <mark>ब्रान्दर, यू</mark>रोप <mark>धमरीका या यौर जगहों में है, बहां पर</mark> ऐसी के बाद होमियोपंथी भी प्रैटिक्म करता है, ऐलो-में जो इस वक्त होलत है वह इस किम्म की है कि हम उनको वाटर टाइप कम्पार्टमेंट में उनके खिलाफ हम कोई पीनल क्लाज भी संबंघ है, यह दष्टिकॉंण मेरा भी है कि एक आदमी जिमने कि होमियोपैथी की ट्रैनिंग चाहिए या किसी ने आयुर्बेद पढ़ा है तो उसको है कि क्या यह ठीक हो सकेगा। इस संतंध में मुझे इतना हो कहना है कि जहां तक ऐलो-नहीं कर सकतें---इट विल वी वेरी डिफिकल्ट । साक्षों : देखिए, जहां तक नौति का ली है उसको होमियोंपैथी की प्रैंक्टिस करनी करनी चाहिए । जहां तक नीति का संबंध है यह विल्कुल सहो है। लेकिन झव सवाल यह पैंथिक या होमियोपैंधिक <mark>प्रैक्सिशनर्स</mark>

SHRI K. C. PANDA; Quacks will be

created.

क्वैक्स बना कर ग्राप गांवों में भेलेंगे

या होमियोंपैंथी की 160 दवाईयां या ऐलो-र्वथों की इम्पार्टमेंट मेडिसिन्स या यूनानी की 50 दवाइयों सिखायेंगे जैसा कि हमारे क्वेक्स माई <mark>यमी मी गांवों में से</mark>वा करते हैं वैसे ही

सुना होगा कि हमारे गवमॅन्ट ग्राफ इभ्डिया की चाहिएँ या ऐमे उसमें क्लाज होने चाहिएँ जिसकी **दजह से कम से कम इतनी दिक्कत थ्रोर इत**मी मिलता-जुलता है कि एक तरफ तो गवमेंट यह चाहती है कि रिजस्टर्ड प्रैविटीशनर को चाहे वह रेरा थ्रापसे यह नम्र निवेदन है कि इस स्कीम रहेगा, न होमियौपैथी रहेगी,न यूनानी रहेगी **और ऐलेपैथी का ही वो**लवाला रहेगा । तो ठीक है कि कमेटी के सामने यह सवाल नहीं है लेकिन चूंकि यह धापने चीज रखी है, धाप 4 महीने के ग्रन्टर ग्रायुर्वे दिक की 50 दवाइयों को धाप कभी लागू न करें । इससे न धायुर्वेद इसलिए मेरी झापसे प्रार्थना है कि यह चीज कि गार्बो के झन्दर डिफोन्ट सिस्टम्स को वढ़ा कर जैसे झायूर्वेद, यूनानी, होमियोपैथी ऐलोपैथी सब सिस्टम्स को पढ़ाकर चार महीने के यन्दर तैयार करके उनको सावों में भेजेंगे ! उठाया है क्योंकि यह बहुत कुछ इस चीज से य्रायुर्वेद का हो, यूनानी का हो, होमियोपेंयो का हो, उन चारों सिस्टम्स की खिचही वनाकर देकर वे चाहते हैं कि गांवों में जाकर सेवा करें। **कुछ सहयोग है। पोनल क्लाज को लाने में को**ई से कम मै यही चाहूंगा कि कुछ ऐसे हालात होने यब में यह एक चीज धापके सामने मिसाल के तौर पर रखना चाहता हूँ थौर णायद वह याजकल बहुत कुछ गौर-तलव भी है । म्रापने तरफ से कुछ स्कीम बन रही है वह यह है यह थखबारों में भी क्या रहा है क्वौर इस पर काफी डिसकशन भी हुन्ना है । यह मेंने इसलिए म्रौर इसमें हमारी मिनिस्ट्री का भी बहुत ग्रापत्ति नहीं है लेकिन कहां तक वह इस्तेमाल हो सख्ती नहीं होनी चाहिए । कारण क्या है ? यह देखने की चीज है श्रौर कम

हो आता <mark>है कि वहां पीनल क्</mark>लाज होने चाहिएं को काफी स्ट्रिन्जेन्ट बनाने के लिए यह जरुरी

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WITNESS (DR. K. G. SAXENA): Yes. This is my definite view that we will be creating quacks out of these practitioners....

तो मेरी प्रार्थना है कि ग्राप पार्लियामेंट में इस चीज पर जोर डालें ग्रीर हमारे इंडिया के सामने इस

चीज को रखें कि उस तरह की चीज कभी कामयाव नहीं होगी लेकिन उसका एक रास्ता मौजूद है ग्रोर वह रास्ता यह है कि डिफरेन्ट सिस्टम्स के रजिस्टर्ड प्रैक्टिशनर्स, ग्रायुर्वेद के या युनानी के या होमियोपैथी के उनको ट्रैनिंग दी जाए ग्रौर उनको ट्रैनिंग देने के बाद उनको सिर्फ वही सिस्टम प्रैक्टिस करने की इजाजल दी जाए ।

CHAIRMAN: Dr. Jugal Kishore will tell us something on this.

DR. JUGAL KISHORE (MINISTRY OF HEALTH): Regarding this scheme, the idea is not to prepare a kitcheri or a mix-up of the systems and create something new. The idea is the registered medical practitioner at that particular level is not properly equipped in any of the systems. At the present moment be is doing a kitcheri. Sometimes he gives injections. Sometimes he precribes this, sometimes that....

CHAIRMAN: Multi-purpose quackery.

DR. JUGAL KISHORE; The idea was to train them specially in these own systems plus at the same time orienting them in the use of a few drug from one or two other system. Supposing in a particular village a particular plant may be growing which the villagers use for common cold and cough as the household remedy. We have no objection, whether it is used by allopaths or homoeopaths. That is number one. For example, malaria breaks out. We tell you to use such and such medicine for malaria which has broken out in your town. Now, you are not learnings a system or any such thing. Half a dozen or so drugs may be taken from other different systems. He would not have any labo-

ratory, library or consultant access to and still we have to see that he works as a unit, whether in Ayurvedic or in Homoeopathy. He is not beleft in lurk. These people will not be taught any such thing like injection therapy etc. This is the essential aspect of this scheme not to do certain things. This has not been properly projected, this has been misunderstood by many. In the modified scheme we have actually said that they will be trained in their own systems but my humble suggestion in this connection is that most of the allopathic doctors should also incorporate some of the homoeopathic remedy. For example, homoeopathic treatment could be specially useful in the diseases ofchildren. The drugs would be cheaper and the side-effect would also be nonexistent. Therefore, we want them to use some of the homoeopathy medicines also. I think, I have been able to make it clear.

DR. K. G. SAXENA: Mr. Chairman; so far as I am aware, I have gone through the whole scheme of the Ministry of Health I am not aware of any revised scheme which the Adviser hasjust now stated.

CHAIRMAN: What you wanted to say has been clarified.

DR. K. G. SAXENA: I shall be very happy....

CHAIRMAN: No, no, he has only clarified what you have said.

DR. K. G. SAXENA: All right. Isthere any other question?

DR. K. NAGAPPA ALVA: About the controversy that has just now started. I would like to say a few words.

CHAIRMAN: Why do you call it as controversy? Say it elucidation.

DR. K. NAGAPPA ALVA: Both areright.

A revised scheme is being evolved. In fact, a seminar was just held last week. This was the old story what Dr. Saxena has said. It is true, that was the idea, but now after the meetlings and particularly the seminar, a -scheme is being evolved and it will be finalised perhaps within the next one or two months and by that time all these loopholes or other things will be taken into consideration. The idea is not to make it a khichri of multipurpose projects. In fact, that scheme would give opportunities to the Ayurvedic system, the Unani system and the Homoeopathy system doctors to make the medical services and health care reach the people. That is the idea and this system does not interfere with the other programmes that are already in existence. The other programmes of health care and medical care will be strengthened and they will go on. Because almost 50 per cent of the rural population are not looked after, this arrangement has become ·Decessary.

Now, I would just ask you a few questions. The name of your association is All-India Institute of Homoeopathy. From the name it does not look to be an ordinary medical association. What we normally infer from the meaning of an 'institution' is that definitely takes up certain activiit ties for the building up of the medical education, or a particular system, other things. So my research and first question to you is: Are you having modern system, doctors with post-graduate homoeopathy qualification or allopathy qualification in your .association?

Then, about your activities, have you started refresher courses because I am very happy that you have made an attempt to have only qualified people? It is good as far as possible to pick up the so-called experienced people because it has become pucca bogus membership, I know. At this juncture, therefore, your attempt should be--opinions have also been expressed by many at least here and there--to stop registration of these 'experienced' doctors. Only educationally qualified persons from recognised institutions must be there. So, I am asking you. Have you been organising refresher courses, are you conducting regular meetings with demonstration of cases and what have you so far contributed in the matter of research?

Then my other question is: Have you made an attempt to put an end to quackary? Have you made an attempt to stop this postal conferring and postal sale of diplomas and degrees by advertisement in papers?

Lastly, we find that there are qualified doctors both in allopathy as well homoeopathy. They possess as in degrees in both the systems. I would like to know from you whether those doctors should have a right to enlist Homoeopathy themselves with the associations and also the Allopathy associations and to have the privilege of practising in both the systems because they possess regular qualifications in both.

DR. SAXENA: With regard to the first question about the Institute I would like to inform the hon. Member that the name All India Institute of Homoeopathy is rather a misnomer. Actually we had this name from the American Institute of Homoeopathy which is one of the oldest organisations in America. There they have this organisation of homoeopaths, of qualified doctors and on the same lines we also started this All India Institute of Homoeopathy. Now regarding our organisation we have got branches in the different States. We have also got branches in big cities where we hold seminars, lectures etc. and where we discuss about cases and exchange our experiences and try to benefit ourselves.

Regarding membership being open to allopathic doctors I may tell you that almost all the allopathic doctors practising homoeopathy are our members and we have got full co-operation between us. They give their knowledge and experience to us while we also do likewise. Apart from that they also happen to be—some of them members of the Indian Medical Association. So there is no denying the fact that mutually we have got lot of co-operation amongst us. Some of the topmost physicians are our members; for example Diwan Harish Chand is one of our members and is also the past President of the All India Institute. Dr. K. N. Mathur is here; he is an M.B.B.S. He belongs to the I.M.S.; he is a retired captain and he is practising homoeopathy for a number of

years and now he is a pure homoeopathic physician if I may say so. Then we have got here those who have got diplomas from London, people qualified in foreign countries. This is regarding our Institute.

Regarding quackery, the main object of organising and starting this All India Institute of Homoeopathy was to remove quackery. That has been my sole ambition in life and I have worked for it for 35 years and I think that is one of the objectives behind the setting up of this Central Council so that we may have better standards and eliminate quackery in the practice of homoeopathy. Now I am sorry to say that we have got 72 colleges in this country at present and every flow and then this mushroom growth of colleges is going on and our State Governments are absolutely silent on those things. Any Tom, Dick or Harry can start an institution without any arrangement for a proper homoeopathic medical college. I am sorry to say this; I have to bring it to the attention of this Committee. You have visited some of the major cities like Calcutta, Trivandrum or Bombay. My request to some of the Members of this Committee is, if the whole Committee is not able to do it. at least some of the Members should go and see some of the collges which are substandard, absolutely sub-standard, and which I would not call colleges at all.

SHRI N. G. GORAY: How do you know that we have not visited some of such institutions?

DR. SAXENA: That is my feeling because the Committee did not go there. But if some of you have visited such institutions I am very happy. This much I can tell you that they are absolutely sub-standard; for example in Vidarbha there are seven colleges which are absolutely sub-standard.

CHAIRMAN: For your benefit and for your information I may tell you that among the institutions the Committee visited some were of a very high standard and some sub-standard and so we have got a general idea of the shape of things.

DR. SAXENA: In Madhya Pradesh we have a three-year course. Apart from these we have got private colleges as for instance in Madras. Only recently the Tamil Nadu Government has passed a Homoeopathy Bill but they have not been able to do anything so far as institutions are concerned.

My friend asked about postal courses also. We have got postal courses too.

SHRI N. G. GORAY: While you are on this subject I would like to ask you one thing. You said that some of colleges-I do not mention the the States—are sub-standard and I think we have seen some of them. People there thought that so Tar as homoeopathy is concerned there was no need to have hospitals or any other aids for the colleges. Does it mean that so far as homoeopathy is concerned there are two schools of thought, some insisting that there must be hospitals and other equipment and the others insisting that there is no need for such aids at all?

SAXENA: In this regard I DR. would like to inform the hon. Member that this view that has been given by certain homoeopaths from Vidarbha that there is no need of a hospital, an indoor hospital, for a Homoeopathic mind is absurd. I College, to my would like to inform you all that this matter was considered at a meeting in Bombay while I was Honorary Ad-Central Government. viser to the There was a great deal of discussion at that meeting in Bombay; that was in December 1970 if I remember corquestion was discussed rectly. This there by the Maharashtra Government in the presence of the Union Health

Minister, Mr. K. K. Shah. The majority of the members said that there is absolute need for an indoor hospital for clinical training of homoeopathic For training in any practitioners. system of medicine it is absolutely essential that there should be clinical training and clinical training cannot be given without an indoor hospital. This was stated there but unfortunately for political reasons the Health Minister of Maharashtra did not agree to this because if he were to agree to it he had to give financial aid to these seven homoeopathic colleges and to avoid that he declared there was no need for an indoor hospital.

Regarding the question of quackery I would like to tell you that quackery has to be banned; quackery has to be eliminated from the country, and our citizens must have the services of only qualified people in this country. This is my earnest ambition and earnest wish.

DR. K. NAGAPPA ALVA: I would like to have your suggestion as to how to stop these correspondence courses and such other things. Even now we are seeing such advertisements.

DR. SAXENA: This has been stressed by me in the Ministry of Health-First of all, health being a State subject the Centre cannot interfere with the States working. The hon. Member was himself a Health Minister and I would like to know how much he has done on this matter.

CHAIRMAN: You cannot put questions; you have to answer questions.

DR. K. NAGAPPA ALVA: You know the real problem. You are a responsible person and you know the problem which the country is facing. I am asking you what attempt you have made and what suggestions you have to put a stop to these things.

CHAIRMAN: Please amend your question; you ask about the suggestion and not about the attempt. DR. K. NAGAPPA ALVA: If those who are the leaders in the profession do not make any effort, the Government will not do anything.

DR. SAKSENA: So far as I can understand it the Central Government must make some legislation in this regard. It is the Central y., Government that should make some legislation for banning quackery, for banning all these postal institutions and those who are awarding diplomas and selling diplomas in the open market. I know there are States where homoeopathy has been recognised, but then some people are selling even bogus degrees and diplomas in the open market and no action is being taken by the State Government. Either the Central Government should make some legislation or they should ask the State Governments to make some legislation. That is the only remedy that I can think of.

DR. K. NAGAPPA ALVA: What about research?

DR. SAKSENA: So far as I am concerned, we started some research work on behalf of the Central Government Some research centres were started for carrying out research on particular diseases and to find out homoeopathic medicines for them, as well as proving of drugs or experimentation on drugs in homoeopathy. This was done under the aegis of the Central Government. Now, privately, to my mind, it is difficult to do it. Even the Government could not give sufficient funds for research. How can individuals or organisations which are very poor conduct research? I agree with the hon-Member that we must have proper avenues for research, so that proper found out for various drugs are diseases as well as new drugs in order to build up our materia medica properly.

SHRI N. P. CHAUDHARI: I would like to know something about the biochemical system of medicine, According to you, is it a part of the homoeopathic system or is it a separate system altogether?

DR. SAKSENA: It is part of homeopathic medicine and it has been found that most of the homoeopaths use biochemic medicines along with homoeopathic medicines. A large number of bio-chemists practising bio-chemistry are also giving homoeopathic medicines along with bio-chemical medicines, with the exception of very few practitioners who exclusively practise biochemistry. I do not think there is any need for adding bio-chemistry in this Bill. Homoeopathy itself will convey the meaning as bio-chemists are included in homoeopathy.

SHRI N. P. CHAUDHARI: Then, the title of this Bill should be changed to read: The Homoeopathy and Biochemistry Central Council Bill.

DR. CAKSENA: No, Sir. I think the present title of the Bill is broad-based and correct.

SHRI N. SREEKANTAN NAIR: I would like to know whether the educational institutions should have laboratories and libraries as well. What is your idea? Should they have laboratories?

DR. SAKSENA: Sir, I am very happy the hon. Member has asked me this question. In all homoeopathic colleges there must be a proper library and a proper laboratory, also an indoor hospital attached, as well as, highly qualified teaching staff. These are the pre-requisities for any homoeopathic college, for a college which deals with medicine, whether it is homoeopathy or Ayurveda or allopathy. So, we must have a proper laboratory and a proper library. There should be an Indoor hospital attached to the college, whatever may be the views given to august body by fie Vidharba this homoeopaths.

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SHRI N. SREEKANTAN NAIR: Do you think that a detailed study of anatomy is also required?

DR. SAKSENA: Yes, Sir. In all the regular, recognised homoeopathic colleges all the different branches of medical sciences like anatomy, physiology, pathology, bacteriology, practice of medicine, gynaecology, obstetrics, jurisprudence, are taught, along with materia medica.

SHRI N. SREEKANTAN NAIR: What about psychiatry?

DR. SAKSENA: Psychiatry also has recently been added, along with all the other branches of medicine.

SHRI K. C. PANDA: You said registered medical practitioners, so far as homoeopathy is concerned, should be totally eliminated from representation. In my opinion there are three classes of practitioners. There are allopathic doctors who are prachomoeopathy. There are certising tain professionals who take a homocopathic degree or diploma by attending classes. Thure are certain officials working during day and attending sight classes and they get their diploma after attending such classes for four years. There are also registered practitioners who are doing certain other jobs. There is the third category of persons who have taken homoeopathy as a profession. They manage to get themselves registered. For those people who are quilified academically and if they want to have a regular course of study for either a diploma or degree, what is your suggestion in order to make them fit and get admitted into the cadre?

DR. SAKSENA: I could not follow the hon. Member.

SHRI K. C. PANDA: If the registered practitioners are academically qualified and if they want to have a diploma or a degree from a regular college, what is your suggestion? How long will they be educated and what will be the course?

DR. SAKSENA: I think such people will have to undertake some refresher courses.

SHRI K. C. PANDA: Whether it is a refresher course or a condensed course, what is your suggestion?

DR. SAKSENA: Some refresher course can be arranged.

CHAIRMAN: He has already said it in his inaugural speech. Dr. Saksena, may I put one question to you? Your institution is a classical institution, I should say not only from your point of view, but also from our point of view. You have got in your team so many doctors who gave up allopathy and took to homoeopathy. Have you prepared any list, a statistical list, to indicate and enunciate instances of very acute cases in which allopathy failed and the patients were almost taken to be lost and then homoeopathy cured them as if by a miracle? Do you keep such statistics?

DR. SAKSENA: Well, I have some such cases with me and I think some of my colleagues also must be keeping some such record. Dr. Mathur is here, he is also writing a book on that subject. He is giving therein specific cases, very important ones, like cancer or mental diseases or nervous diseases, details of such difficult cases where in modern medicine sometimes fails, and he is trying to publish that book.

CHAIRMAN: Would you forward the statistics to the Government?

DR. SAKSENA: We have not yet finished the book, but we shall certainly furnish them.

SHRI N. SREEKANTAN NAIR: Only one more question as an exception.

CHAIRMAN: Is it because the question has a new conception? All right, put it. SHRI N. SREFKANTAN NAIR: 1 have been informed by some eminent doctors—I could not name them—that for acute rabies wherein the patient becomes almost dead, you have got a cure. Is it a fact? If it is so, why should it not be widely publicised so that thousands of persons who are dying of mad dog bite can be cured?

DR. SAKSENA: Well, we have medicines. But so far as my personal experience is concerned, well, I have not seen a case of rables. To that extent, I must be very frank with you, but we have got treatment for rables; we have got a medicine—hydrophobinum—that we use for preventing the disease from going further. But I can assure you that we have got medicines. Unfortunately, proper experimentation has not been done. So, I am not going to give you a very definite reply to that.

DR. MATHUR: Dr. George Royal, has treated very many cases of rabies. He is one of the eminent doctors from the USA, he was a teacher of the Homoeopathic Institution there: and he has written a text-book on homoeomedica and he has illustrated so many of his own cases which he has treated. In my book, I am quoting all cases of such a peculiar nature, of a dangerous nature, so that the new generation of homoeopaths will find concrete cases and take advice from them and treat the cases very adequately. He has said that you can cure rabies; especially one of the remedies is, stramonium, another is arsenic alb and the third remedy is hyoscyamas. Eo, we cannot say that there is no cure for the rabies, and there has been cures definitely made by such doctors who have practised homoeopathy. If the patient gives proper symptoms, we have the remedy. Nobody says that he is suffering from such and such a disease. the patient comes and says that such and such symptoms he has got. The aim of homoeopathy is to treat the patient. And we are not so much concerned with the diagnosis of the disease.

DR. K. NAGAPPA ALVA: Do you mean to say that as homoeopaths you do not give the desired importance to the diagnosis of the disease? You are only treating the symptoms and not diagnosing the disease and then treating?

bR. MATHUR: Diagnosis has come out of the allopathic system of treatment, from the homoeopathy's point of view, diagnosis rests with the patient.

DR. K. NAGAPPA ALVA: Diagnosing the disease is the most important thing. I do not think the homoeopathy system of medicine—the doctors practising homoeopathy—will not give importance to diagnosis. Diagnoses and then treat the case. Do you treat the symptoms and then go to the disease? Is that the approach in homoeopathy?

DR. MATHUR: Disease comes when the symptoms, signs and the pathological nature in the body are fixed. Unless they are fixed in the body, you cannot say that such and such a disease is there and before the disease is fixed in the body you are not able to diagnose the case. Then what are you going to do?

CHAIRMAN: Then do not put the question now. Question and crossquestion are guillotined.

DR. MATHUR: We are giving our own point of view.

CHAIRMAN: Shri Man Singh Varma.

श्री मान सिंह वर्मा: मैं चेयरमैन महोदय को तरफ से, इस कमेटी की तरफ से आप सव का आभार प्रदर्शित करता हूं। कि आप ने प्रपने जो विचार प्रकट किये उनसे हम लोगों को वड़ा लाभ हुआ है और मैं समझता हूं कि मैं कमेटी की तरफ से आग्रवासन दे सकता हूं कि जो विचार आप के हमारे सामने आये हैं उन पर कमेटी पूर्ण रूप से विचार करेगी और यथा संभव उन को मानने की कोशिश करेगी।

[The witness (Dr. A. N. Singh) was called in].

CHAIRMAN: Dr. Singh, you are very much welcome. Before you give your evidence I may tell you that you are free to give any opinion you like and that what you say will be confidential till the proceedings of this Committee

are laid on the Table of the Rajya Sabha. You have given a memorandum. Have you anything more to say in addition to what you have not properly focused?

DR. A. N. SINGH: I have not given any memorandum. I have replied to the questionnaire.

CHAIRMAN: After you have said something hon'ble Members will ask questions. If you have nothing to say then the questions may follow.

SHRI N. P. CHAUDHARI: Dr. Singh. will you please tell me when your college was started.

WITNESS: 1st August, 1963.

SHRI N. P. CHAUDHARI: What is the present strength of students? And what is the diploma that you give?

WITNESS: 401. We are giving B.M.S. diploma for a four-year course.

SHRI N. P. CHAUDHARI: Have you got proper laboratory in your college?

WITNESS: Yes, Sir.

SHRI N. P. CHAUDHARI: What arrangements have you got for anctomy?

WITNESS: A small dissection shall having a capacity for two tables.

SHRI N. P. CHAUDHARI: Have you got any hospital attached to your college?

"WITNESS: Yes, a 25-bedded hospital and an outdoor dispensary and an operation theatre.

SHRI N. P. CHAUDHARI: What operations do you generally perform?

WITNESS: Miner hydrocele operations. We do not perform major operations. SHRI N. P. CHAUDHARI: Is it advisable to undertake any major operations in homoeopathy?

WITNESS: Major operations can be performed if sufficient facilities are available. That is not possible in our institution.

SHRI N. P. CHAUDHARI: What is the number of teaching staff in your college and what are their qualifications?

WITNESS: Fourteen. They are holding either a diploma in Homoeopathy or an M.B.B.S. Degree or an equivalent degree.

SHRI N. P. CHAUDHARI: What subjects the allopathic people are teaching in your college?

WITNESS: Physiology, practice of medicine, midwifery, gynaecology, pathology, surgery, E.N.T. and Opthelmology.

SHRI N. P. CHAUDHARI: Who performs these operations in your college?

WITNESS: An M.B.B.S. doctor is doing it.

श्री मानसिंह थर्माः इस विल के वारे में ग्रापको कुछ कहना है ?

साकी: जी नहीं।

श्री नानसिंह वर्गा: इनके सब कला जेज

से ग्राप ऐंग्री करते हैं ? साक्षो : जी हां ।

श्री मानसिंह वर्माः तो मुझे कुछ पूछना भी नहीं है।

SHRI K. C. PANDA: What is the grant that you are getting from the Government?

WITNESS: Very miner. In 1968-69 we got a non-recurring grant of Rs. 6,800.

SHRI K. C. PANDA: What about grant for the hospital?

WITNESS: It is a combined grant.

SHRI K. C. PANDA: Are you admitting also some of the registered people for further training?

WITNESS: No.

SHRI K. C. PANDA: Are the students fulltimers?

WITNESS: Yes, all of them $\mathbf{a} \in \mathbf{b}$

SHRI N. SRIKANTAN NAIR: What is the amount that you get for current expenditure?

WITNESS: A combined grant is allotted to us. It was Rs. 6,800 in 1968-69, Rs. 6,000 in 1969-70, Rs. 6,000 in 1970-71 and Rs. 13,700 in 1971-72.

SHRI N. G. GORAY: What are the qualifications you insist on when you admit a student to your college. As homoeopathic claims to be a very sophisticated science, the qualifications that are expected from these students must be higher. Then, what is it that you insist on. Should they be Inter-Science or S.S.C. or what?

WITNESS: The basic qualification prescribed by the State Board is High School (Sc.) or Intermediate (Arts.) We insist upon higher education.

SHRI N. P. CHAUDHARI: Are you charging any fee from the students.

WITNESS: Rs. 12 as tuition fee and Rs. 3 as admission charges.

SHRI N. P. CHAUDHARI: What is the total Budget?

WITNESS: Roughly about Rs. 60,000 to Rs. 65,000.

SHRI N. P. CHAUDHARI: How do you meet this expenditure?

WITNESS: From donations from other persons, not from the students

श्री ७िथाउरंहमान श्रंसारी : मैं इस कमेटी की तरफ से जो ग्रापने तकलीफ की ग्रीर ऐविडेंस दी है यहां पर, उसके लिए ग्रापका शुक्रिया ग्रदा करता हूं ग्रीर यह उम्मीद करता हूं कि जिस वक्त हम यह रिपोर्ट फाइनलाइज करेंगे तो जो ग्रापने महत्वपूर्णं राय दी है उसका हम लोग लिहांच रखेंगे । एक बार फिर हम ग्रापका गुक्रिया ग्रदा करते हैं ।

(The witness then withdrew)

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(Shrimati Purabi Mukhopadhyay in the Chair)

- [The Witness (Dr. Jugal Kishore) was called in]
- (WITNESS SHOWED SOME SLIVES ON THE SCOPE OF HOMOEPATHY)

CHAIRMAN: First let Dr. Jugal Kishore give us some general observations; then we can put questions.

WITNESS: Madam Chairman and hon. Members, during our tour and discussions with various witnesses, you must have already had some idea regarding the state of affairs of the homoeopathic profession, its institutions, training standards and so on. In a brief outline, I would like to bring to your kind notice that homoeopaths in our country to-day are a strange lot. We do not have one common of training, professional standard ethics or practice. This was bound to happen because there were no colleges, no institutions. There are three or four classes of homoeopaths in our country. The first class, which still has the largest number of homoeopaths. consists of people who studied homocopathy from a guru or teacher or by their own efforts. The number of such people in our country to-day runs into lakhs. But the number of those who are registered is 48,161. There is another class which is also not institutionally qualified; they are called 'enlisted people' in some of the States. Their number is 52,307. And the num-, ber of the so-called institutionally qualified people is 9,046. So you can see the ratio. Therefore, if anyone says, "Our association has so many qualified people", I am afraid I cannot give credence to that. Then there are the diploma holders who qualify from the colleges. I must again admit that the type of training that is

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given is not of the standard really required for making a competent doctor. Proper facilities are not available at all. The teachers are poor. Most of the teaching that is done is practically unrelated to the practical problems which they have to handle. The diploma-holder has no opportunities to learn at the bedside because there are no proper hospitals and no proper guidance is given. That is my observation. I do not have to give any disparaging remarks about our own institutions. We want to improve our standards. There has been a conflict right from the beginning. Those people who went to colleges thought that they were the qualified people and they were superior to the people who were practising homoeopathy without institutional training. And the man who is practising without institutional qualification but who has built up a clientele-he is known and he is respected-poses a challenge to the institutionally qualified man: you do not know the practical side of the problem; go to the bedside and see who superior. This sort of conflict is started right from the beginning. There are two all-India medical associations of homoeopathy-the Homoeopathic Medical Association which was started in 1932 and the other started in 1944. The former association was a composite association in which both the institutionally qualified people as well as those who were practising on the basis of experience were fullfledged members. . Dr. Younan was the first President. Then P. C. Majumdar and J. N. Majumdar were successive Presidents of the Association. Dr. Jaisurya of Hyderabad was also a President. In 1944, as already mentioned in the morning by Dr. Saxena. the All India Institution of Homocopathy was formed. They restricted the membership entirely to the qualified people. After so many years, we hardly have 9,000 qualified people. You can imagine how many qualified people would have been there at that time. So some of us thought at this juncture that it was not proper to divide the profession because the

major part of the profession still depends upon the people of experience. The best way to serve the profession was to take all together. But there were differences of opinion. I do not have to go into that. But on one side. some of us thought that it is better to raise the level of these lay homoeopaths who have no institutional qualification, give them refresher courses, disseminate knowledge, give them lectures and so on. And once they are registered, they have every right to be members of the professional organisation. Hence there was need for a unified professional body like the Indian Medical Association. You cannot have various associations in the scientific or medical field. That will not serve the interests of the profession. So, from various angles, from the political angle from their own need for upgrading themselves, it was highly desirable that there should be one all-India organisation for homoeopathy. But for some time there will be a polymorphic picture. The third class of homoeopathic practitioner consists of those who are allopathic graduates. Now once an allopathic graduate takes up homoeopathy, it means he is convinced about the efficacy of homoeopathy because usually he-would not give up the other system. Now the question arises-most of the people ask mewhether an allopathic graduate as a better homoeopath or not. Now there are two sides of the picture again. An allopathic doctor is a better practitioner; there is o doubt about it because he has a better educational background, he understands diseases better, he diagnoses better, and he knows how to take care of the case in a general way. But there is one difficulty. The mastery of the materia medica, the art of prescribing is again a very time-consuming task in homoeopathy. You spend a life-time. I have to admit before this august gathering that how my practice is about thirty years old and it took me about ten to fifteen years to be a little bit efficient in the sense that I could have self-confidence in prescribing.

(Dr. K. Nagappa Alva in the Chair)

So, what is required is more of the art than of the science. One has to go through practice, hard work and experience, before one can master it. Now in this group some of them are very good practitioners because they were able to do the mental work, the mental gymnastics. But there were others who could never prescribe competent ly. Some-how or other they could not adapt themselves. This is the difficulty. When we want to give teaching in homoeopathy to the allopathy graduates, some of them will simply not take it because the philosophy, the approach, will be very much different from the usual one. We can, of course, give them some idea of the use of homoeopathy medicines in certain situations. But to practise the system as a whole becomes very difficult. So you can see the various conflict between different types of doctors that we have in our ranks. This is why our problems are so complex. Now the question arises as to what should be done for the development of homoeopathy in future. One important thing which I have already emphasised is this that our teachers and our institutions must be upgraded immediately and as far, as possible they should be upgraded to the degree level and universities be asked to open faculties for homoeopathy Our homosopathy students are also not meek any more. They are dynamic-I have seen all over they are discontented now. They want to have the same, status as that of allopathy graduates or agurved graduates. In assurved there are 32 universities which have got faculties whereas we have only one and that too is not functioning, properly. And the second thing that I want to bring to your kind notice is that there should be one national, of central, college or institution homoeopathy where we should train our teachers and research workers. As we know, already we started a Central Research Institute in Calcutta. A lot of money is being spent on that. But we do not have the proper personnel for manning this institute. For example, we get sub-standard people. This is like putting the cart before the horse. We should have proper equipment for the colleges. We should also have at least one Central, Government, college. Research is very important. I think research can be started at various levels. The proper research will come only if we have proper people to man the institutions.

Now about potencies.

(Here the witness gave a detailed technical exposition on the development of homoeopathy by Hannemann.)

Now about potencies. Possibly most of the Hon'ble Member are familiar with what potency is. We use very small quantities of medicines. In the beginning when Dr. Hanemann took up the practice of Homoeopathy he gave medicines in comparatively larger quantities. Of course the medicines were selected on the basis of law of similus. For example, in a case of diarrhoea he gave a medicine called 'Veritum album. (White hellevore) in a dose of 10 drops at a time. The medicine was correctly indicated. As the complaint of the patient was similar to the effects produced by this drug on healthy persons. The patient instead of getting better became suddently worse and started purging more and more. This set Hannemann thinking as to why it was happening. He stopped the medicine on the second day. The patient become all of a sudden all right. So it occurred to Hannemann that possibly these 10 draps of the medicine were too strong a does for him and hence ít aggravated his condition. Later he divided the dosage from 10 to 2 but still there was aggravation. He went on dividing it further and further and found the medicine still worked but without aggravation. This is how he stumbled on the potency energy of aur medicines. This was one of the most wonderful discoveries in the realm of medicine or even science. Even now this potency energy has not been correctly understood even today. We do not know the exact nature of this quality of medicines. Possibly there are different frequencies of medicinal energy peculiar to each medicine. One of the commonest potency used by us

is 30 potency which means 10-50 of one drop of tincture. That much fraction of original drop of tincture of any particular medicine. You can well imagine the infinitescimal potencies involved in 200th, 1000th or C.M. potencies. It seems that beyond a certain potency there is no matter left but only energy of the original medicine is conveyed to the vehicle whether it is alcohol, water or sugar. This medicinal energy can remain stored in sugar globules for 20 years even, if the bottles have been properly stoppered and well-stored. One Dr. Boyd in Britain made certain experiments to discover the nature of this potency. He came to the conclusion that potency energy is not easily shaken off and to get rid of this energy the glass vial containing the particular medicine has to be boiled for every two hours before it is shaken off. He was the man who gave laboratory proof of this potency energy by conducting experiments in hydrolysis of starch by merucric chloride in potency of 30. There is an unknown but exciting field of research in this mysterious energies of potency. Nowadays that is very relevant as we all know that in diognosing the correct remedy for a patient we have to take a lot of time in studying the case history and all the signs and symptoms of the patient. There are many pitfalls in getting the correct remedy. There are so many subjective errors. These are the limitations of homoeopathic prescribing at present. In future we might stumble upon some objective way of finding the requirements of a partipatient without very much cular depending upon the subjective factors of the patient or the prescriber. In a case of unconsciousness we may sometimes be helpless because the patient does not give any symptoms or there are few other signs which lead us to the correct remedy. I think if you can spend a fraction of whatever is spent on allopathic research today I can assure you that we can develop Homoeopathy to an extent unimagined by us at this stage.

This is about potency because people have been asking me about this question of research in potency energy and why there should be research. In the field of research in our country what we need is provings. There is lot of herbal wealth in our country and there is already accumulated knowledge contained in the Ayurvedic literature about remedies from plants and herbs. This accumulated scientific knowledge can be used by Homoeopathy. Some of the Indian plants provide wonderful remedies to so many diseases. There is Doorba (Cynodin Dac) for instance and there is Asoka. In this case my wife has been the prover. There is a vast and exciting field for research and discovery.

Then what we need is proper clinical applications. Unless we have a reliable pathological report on a disease, we cannot accept the basis of that disease. Doctors of other schools also need this.

Another question that is often asked is about bio-chemic system and whether it should be included in the definition or not. In this connection I want to tell you that it was in 1873 S. Schussler wanted to abridge or simplify Homoeopathy. One of his essays was: published in 1873. He did not call it then as biochemic system. He called it abridged system of Homoeotherapeutic. A few years later he said that this was an important discovery and bio-chemistry was the basis of that.

He had said that the body needs so many inorganic salts and deficiency of each salt would be manifested in different forms or diseases. Lack of magnesia phos, would result in pain in the muscles, rheumatic or neurologic pains, etc. Later on Homoeopathic research workers verified some of his claims, by proving. So far there is no scientific basis for his theory. But we have used some of his remedies such as Magnesia phos in 6x. potencies. Here the proportion of original drug is only 1/1000,000. Even bio-chemical medicine in that small quantity can remove a particular deficiency or not, nobody knows. This is Schusslers system of bio-chemic remedies. Lots of pcople have asked me whether this should be included in Homoeopathy. I think we should include that. I am only giving you a scientific background of this system. Legally what will happen, I cannot say because you are the better judges so far as that aspect is concerned. My intention is to explain to you the origin of this so called system.

I have been asked many times about the place of diagnosis in Homoeopathy. Many people ask: Why should we worry so much about diagnosis when we are concerned only with the treatment? Even Hanneman had said that any good physician should know all about the diseases. It is necessary before you can go ahead with treatment based on the symptoms peculiar to a particular person. First of all he should know what are the common symptoms of diseases. Take, for instance, the Measles. In every case of Measles, rash is there, cough is there, fever is there and Koplik spots are there. But on the basis of these, we cannot prescribe. I will ask whether he has thirst or not, whether he is restless or drowsy or whether he has pain in the legs or whether he vomits. All these are peculiar to the person, although they are not part and parcel of the disease as such. But yet we must know about them before we go further. This is where a lay Homoeopath commits mistakes. Sometimes he is misled because he does not distinguish the symptoms of the disease from the symptoms ٥f We, Homoeopaths, the individual. ought to know the art of diagnosis better than others. This is very important.

Then comes prognosis as to what is going to happen. If it is a case of Tuberculosis, we should know that it is dangerous to others. If there is open cavity, it is dangerous to friends, relations, etc. and therefore we must take proper precautions. How will the case behave and how long is the course of treat-

These all come under progthe case of acute Take Appendicitis. Every physician should know that the patient in that condition should not be given purgative. If it is a case of Tumour of the brain, what you have to see is whether the patient's vision is thereby affected or not. If his vision is deteriorating

rapidly then you should not hesitate to call in a surgeon. Any physician belonging to any school must know signs and symdiagnostic 1he ptoms and he should be throughly familiar with the disease. On this there is no question of any two opi-But the point is that we nions. do not limit ourselves to that whereas an allopath stops there. An Allopathic Doctor immediately prescribes a drug. But we will go further. We have to go through two diagnosis.

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nosis.

DR. K. NAGAPPA ALVA: Which are those two?

WITNESS: One is the diagnosis of the disease and the other is the dia-There arê gnosis of the remedy. some common symptoms in cases We have to find such as Measles. out whether it is Measles, whether it is Chicken Pox or Small Pox. The other is: what is the remedy for this case of Measles or Chicken Pox? The remedy may differ from person to person.

SHRI SASANKASEKHAR SANY-Between two diagnosis, where AL: does prognosis stand?

WITNESS: That lies with the diagnosis of the disease. Homoeopathy is the only system which individualises patients. Now we are coming to the concept of individualisation which means that each case is a different entity. Even the modern physicians are quite conscious of treating the patient as a whole. In the case of neuro-dermatesis for example, they, prescribe some tranquilizer. will Thus they will just take care of the this factors of anxiety which case due trouble because this disease is

to anxities or mental tension. From the point of view of allopathic practitioners, the anxiety of the patient is to be removed and they think that. once that is done with the help of the patient will feel tranguilizers, better and ultimately recover. Now, we took care of these things muchearlier. Similarly, in the Ayurvedic system it is the individual, because each individual has to be given different diets, his pulse shows some different vanabous, Similarly, iπ. Unani system also, some of the Hakims used to give different things for the same kind of headache in different people. The idea is as to how to individualize? But one difficulty of individualisation is that it is not capable of mass application. We have often to treat different cases. So this is one difficulty for which the responsibility lies on us: How to adopt our systems for mass treatment so that we can also improve the health of the country? This is а great problem before us.

Then, coming from diagnosis, we came to pathology. What is pathology? Pathology me**ans** cert**ain** changes that occur. There are changes in the tissues before there is something wrong inside the body. That something wrong was not discovered by our present-day methods or means. But now medical science has progressed and is progressing. There are various tests now by means of which we can discern. For example, early discovery or detention of cancer. If we can find by means of which we can find whether a person is going to develop cancer, we can save the case. Unfortunately, some of our old practitioners said that we have got nothing to do with pathology. This is wrong. Only thing is that we have to keep it at proper place. We do not prescribe pathology, but we make use of it as a help in diagnosing.

Now, what are the provings? When we talk of provings, Homoeopathy is one school in the world in which the provings of drugs are done -

on human beings and not basically on animals. Our cure starts with the mind, with more vital organs, first, and then lesser vital and In any chronic disease, last skin. if your mind improves, you are on the recovery. But if your mind or your mental state is worse and your skin is better, then you are not go-There are many ing to be cured. amongst us who may have chronic Some of us are having diseases. constipation, recurrent headaches coupled with other aches and pains, for which no tablet of disease can be put. These types of diseases can be cured, if at all, by Homoeopathy. It is not a tall claim. I know our limitations. I know our strength also. People come to us after they have been treated more or less by the other systems. Hence I say this from experience. When real cure has taken place, in chronic diseases this has taken place only by homoeopathy. When cure takes place, it is in a very peculiar order, from within outwards. First, it is the mind, then other organs and the skin in the last.

I have myself experienced these things in my life. I was very des-I tried all sorts of perately ill. systems and treatments. But in spite of all that, my condition was going from bad to worse. I was losing half-a-pound every day. Nothing could be done. But a stage came when I must tell you when I realized that there was something wrong with my mind also. I became abnormally loquacious and developed clairvoyance which was quite foreign to me. I could foretell events. I became abnormally hypersensitive, hyper-perceptive with over-activity of brain. I found that my mind became very sharp. I could predict things. I said that so-and-so is coming to our house by rail today. The many did come. I said so many things, which did actually happen later on. I decided that I would earn so much money, and I did. At that time, somebody lent me a book on Homoeopathy. Ι

thought of making an experiment on myself. I read books in that stage. For one year, I kept reading while I was sick in bed. I joined a medical college before, but I could not study-I was trained for Civil Service. I actually took my examination in 1939, but it was my sickness which 0 dia not permit me to carry on complete it. Then for one year I read all about homoeopathy. I am just mentioning these things, because things are fresh in my mind even now after 30 years or more and to illustrate how chronic sickness developed and the order in which cure takes place.

A part of the sickness in my mind gradually went away, and later on my physical health returned. Later I felt better in every way. I saw the total cure taking place. When I took up homoeopathy, I was crusader for it and at the same time, I was keeping a level head.

AN HON. MEMBER: Is spiritual revelation also a part of homocopathy?

WITNESS: Whenever you have to really heal people, whether it is by allopathy, Ayurveda or homoeopathy, this element is very important. Everyday we have to attend to complex problems and because of this deep concentration or solving them the third eye develops. Now I can analyse difficult cases much quicker than I did a few years ago. This is accumulation of knowledge or intuition, whatever you may call it. Another point which has been raised by some of the members is about prophylaxis to use homoeopathic remedies as a prophylodic again. No. Hanemann was the first. He suggested belladona as a preventive for scarlet fever because he found that belladona had a typical picture of scarlet fever. When he gave belladona to one of his children, that particular child did not develop scarlet fever whereas the other children developed. He was a great genius. I

request that Chairman and Members should read the biography of Hancmann by Richard Hael. But unfortunately our schools were mostly run private organisations or indivibv . duals. There was no organised effort or resources to carry on research in the matter of prophylaxis. They could not carry out proper statistical analysis. Now take the case of variolinum as a prophylatic remedy against small-pox. We do not recommend people to have frequent vaccinations against smallpox. We tell them to take variolinum. This is expected to give them a short-term prophylexis. In one of the research units of Central Council of Research in I.S.M. and homoeopathy. variolinum has been tried experimentally in animals and results seem to promising. Further research on these lines must be encouraged.

(The witness handed over a summary of these findings to the Chairman)

Another experiment that is going on is about canlopythin which has been experimented on animals canlophythin in potency has suffered overlation in the experimental animals. It is too early, yet; to form any definite opinion about it. We hope that we may find something of great value in future.

As I have already mentioned, provings are done on healthy persons. My suggestion is that every homoeopathic medical college must insist that every student must undergo provings at least for B few months as a part of the curriculum. In American colleges, the students had to undergo provings for three months before they were allowed to graduate. We can have 3 months' or 6 months' provings. The main purpose is that this sort of thing should be included. We have such a manpower potential and we are not utilising it. If we had done it, I think by this time we could have discovered many good things of great value.

Regarding practice of homoeopathy by laymen, we are very keen that quackery should be stopped. There should be qualified people in future. The question arises whether somebody who uses homoeopathic medicines at home should be permitted to do so or not. I think there is no harm in it. The only thing is that he should not prescribe medicine for others professionally and set up his board as a doctor.

I can assure you, Sir, that your meeting at Bombay had a very salutory effect on the State Government. As a result of which, myself the Director of Health Services have had discussion on 2nd of January and I insisted that all these people should be given registration. He has taken it up very seriously and they are going to do something about it. Mysore Government is also doing something as a high power Committee appointed by the Mysore Government, is also making a serious study of the problem and going to give its recommendation. Otherwise, once this Bill comes into being, they will not be able to practise. After that, they can practise homoeopathy in their homes. But they will not be able to prescribe medicines for others or give a certificate of sickness, fitness or death, etc.

SHRI N. G. GORAY: After this warning has been given to the States what has been the sudden jump in the number of registered practitioners?

WITNESS: We will be able to supply the figures later.

SHRI N. G. GORAY: Because of this there is sudden rush to get registered before the Bill comes into operation and we find that thousands of people are posing as homoeopaths. So while trying to stop quackery it increases more and more.

WITNESS: That is one difficulty the solution of which we have to find but we have examined the question and we have recommended that there should be proper examination before

they are registered. But there are so many difficulties. There are some allopathic doctors who had been practising homoeopathy for several years and they are not registered. They are doing full time homoeopathy. Then there are people who have migrated from one State to another and they are not on the Register. There is no provision for them to be on the Register. It is about such people we have to keep in mind. Otherwise I think we should have some sort of examination. At least they must know well the materia medica. organon before they can be placed on the Register. It is not that every panwallah or bidiwallah should be able to get registered. I agree with you.

Another difficulty we are always afraid of is that our homoeopaths may take to allopathic practice and they become allopaths. The difficulty has been that we have not been able to convince them or give them convincing proof of the therapeutic efficacy of the system. That is the present state of affairs in the country. Once you have right type of student with better intellectual and educational background, and once he has shown results at the bedside, then he will not touch allopathy except in certain conditions in which we ourselves may say. That we are deficient. We may ourselves point out that they may prescribe auxilliary methods or remedy. There will be common consensus the Central Council that in in such and such aspects we are deficient and for that we can take to the other measure but that does not mean that he should become totally an allopathic practitioner. That is not at all our intention. What happens is some people somehow want to get registration and this they do under the garb of homoeopathy. We do not want such people on the Registers.

Now I do not think I will talk about Hahnemann's life any further. He was a great man. I feel all of us are already well informed about his life but I suggest that Life of Hahnemann should be read by everybody because that is the life of a great man. And now I am prepared to answer any questions and subject myself to an "ruelling that may be in store for me.

I am told by my senior Research Officer that the Committee might like to know what the Government has done for homoeopathy at least during my tenure. First of all we have tried to see that every State Government has got one homoeopathic doctor as a permanent officer. As a result of my efforts for example in Madhya Pradesh we have got one officer appointed. U.P. too has appointed one officer. In Kerala he is already there. In Mysore also I think they are going to sanction the appointment of one officer. Apart from that we have recommended the appointment of advisers wherever possible. We found the young adviser in West Bengal was very active-Dr. B. N. Chakravarti, Wherever possible I have met the Health Minister or the Health Secretary, discussed with them at above our problems needs and we have found that they are very enthusiastic and sometimes things have happened overnight. When we went to Calcutta we had thrree or four applications pending with the state Government and the Secretary there was good enough to sanction the applications overnight and I carried the files to Delhi. The position was in Bengal Government had not been giving a single penny to educational institutions. Though some money had been given to the hospitals nothing was being given for the colleges but this time West Bengal Government has given Rs. 12 lakhs. Similarly in Mysore there has been no homoeopathic dispensary but now the Government is very keen and alive to this problem and they are going to start a State Homoeopathic College and also a number of dispensaries. We have recommended 25 dispensaries to be started every year in the next year and also in the next five years of the Fifth Five Year Plan. In the first three years of the Fourth Five Year Plan the Central Government gave

just Rs. 6 lakhs for Homoeopathic education but now we are proposing to give Rs. 25 lakhs during the current year, Rs. 15 lakhs have already been given. In the beginning of the Fourth Five Year Plan there was a provision of one crore of rupees for homoeopathic education. I do not know why things were not done for three years with the result this figure was slashed down to Rs. 58 lakhs because sufficient funds were not utilised. But now we will be demanding more. In Gujarat they have set up a college and the Central Government is giving Rs. 10 lakhs this year. We have now formulated the pattern of assistance. The Gujarat Government will meet the deficit and the Central Government will be giving for developmental activities. Within two to three years if anybody goes to Gujarat he will find a very efficient college functioning in Gujarat; maybe it will become one of the model colleges. In Kerala we have been developing one college and now two more colleges are eligible for grants and their applications are awaited through the State Government. You remember when we were there in Trivandrum, I requested the college managements to send the applications but they have not so far sent their applications. I have written to the Government and I do not know what is happening.

SHRI N. SREEKANTAN NAIR: There is strike there by the students. They want all the colleges to be taken over by the Government.

WITNESS: My offer was they should develop the college_s and then ask the Government to take over

SHRI N. SREEKANTAN NAIR: The Government is ready to take over but the difficulty is the managers of one institution demand Rs. 2 lakhs for handing over the college. That is the difficulty. What is the pattern of assistance?

WITNESS: There is a definite pattern of assistance. Medical education is a State subject and the State Governments on their own are making provision. As a special case it has

been agreed both by the Planning Commission and the Finance that the Central Government will give some financial assistance to undergraduate medical colleges in homoeopathy. When I joined the Ministry the first thing I did was to formalise this pattern of assistance. Within three months a policy has been laid down and this pattern is for developmental purposes. Non-recurring grants to the tune of 75 per cent will be given by the Centre and 25 per cent will be contributed by the States or the priorganisation or both of them vate combined. This has been done so that wherever the State comes forward or the private organisation comes forward individually or jointly, they will be able to get this assistance. So we give them facility to develop the institution. Regarding recurring grants, that is, for the purpose of developing their faculties and for their staff we said we would give fifty per cent. The other fifty per cent has to be raised by the State Government or by the private institution. For example, if today you are spending Rs. 12,000 on staff and you want to start a new department, we will give you fifty per cent of the new department for that year. For maintenance, in future, the institution will depend on their own resources or grants from States: We are in the process of developing homoeopathy. To begin with, We asked the State Governments to help the private organisation so that they are eligible for a grant from the Centre. The State Government colleges are not eligible for it. It becomes a State subject. On my part, wherever I have gone I have offered them help. If I am not able to do something for medical education, I would not feel happy. To every institution which fulfils the criteria, we can give grant.

SHRI N. SREEKANTAN NAIR: May I ask a general question? I do not know anything about homoeopathy or medicine in general. I have found men of genius, but they are cranks. They have a certain notion any they de not deviate from it. Dr.

Jayasoorya was one like that. He took his M.D. and was an allopath. Then he gave it up and went in for homoeopathy. I have come across several eminent people, but I have also found them to be cranks in the sense that they stick to certain beliefs and they do not budget an inch. India is a poor country and we want some sort of integrated system of medicine so that the common man can be very easily cured. Without going to great experts and if it can be avoided, we want to system wherein a mediocre does not treat extreme cases. I should like to know whether you have a system of giving some symptoms and giving remedies of your own, by utilising some device. I should like to know whether it could be standardised. The ordinary man gives the symptoms and you prescribe the remedy, so that automatically for a particular disease there is a remedy, as in a computer. Is that kind of computerisation possible? This is the first question. Secondly, what are those diseases in which a team of homoeopathic doctors have found acknowledged medicines and those diseases can be easily cured by the homoeopathic system? They should be taught the other systems of medicine. The use of antiseptics and even minor surgical training should be imparted to students in a homoeopathic college -o that the man who is practising will be able to tackle almost all diseases in their initial or less complicated stages. If he is really a good homoeopath, he should be able to handle all diseases which have got sovereign remedies in homoeopathy and leave the others to other specialised doctors. Will you be able to evolve an integrated system with the co-operation of very eminent and unprejudiced allopathic, Ayurvedic and Unani doctors? Will you be able to evolve such a system so that the homoeopathic student who gets his degree will be in a position not only to demand and get in his own right equal treatment as for an allopathic doctor, but also be able to render benefit to the common people, poor people of the locality? I have found that it is the capacity of the individual doctor to go into the special aspects of the problem that ultimately decides how he succeeds. There should be some common symptoms and common remedies from which you choose. Use your experience and intelligence for a proper diagnosis of the disease. Will you be able to have some sort of generalised or stanardised treatment, so that much individual capacity or ability is not called for?

WITNESS: This is a very complicated question and I have certain ideas about it. I have already explained that to practise classical homoeopathy and really correctly, it requires a lot of experience and time. It is especially so in the case of chronic diseases. In the majority of the common, everyday and acute conditions we have more or less standardisation. For example, in this particular weather we use a particular medicine. In the next change of weather we may use arsenic. I think it is not difficult for a homoeopath to treat every day acute cases with certain remedies, when he does not go deep into the disease. When we take up chronic diseases and individual cases, no system except homoeopathy can give proper remedies. As yet we do not have objective methods of diagnosing remedies for an integrated approach we cannot provide all the three dispensaries at the village level. It is not possible to set up a homoeopathic dispensary, an Ayurvedic dispensary, an allopathic dispensary and a naturopathic dispensary. I suggested once that we should give him, first of all, training in his own basic system. If his basic system is homoeopathy, then it depends on his capacity. An intelligent person who is fully trained, has grasped homoeopathy and accumulated experience may be making thousands of rupees. Another poor fellow may be struggling. Unlike in allopathy, we cannot produce as yet a graduates who can give technical performance of standard uniform level. We want to see in future that there is a certain amount of equalisation and standardisation. This is my problem as an Adviser to the Ministry. I suggested it to the Health Minister that at the minimum medical aid level under the national health scheme we can do some integration as suggested by the Hon member. Basically he should be given Basic good training in his own system with specific directions for use of medicine from other

system. In case there is difficulty, he should refer the case to a hospital. For diploma if we try to teach them all the systems or two systems, they are likely to be confused, because the approach and philosophy is so different. I feel at that level it is not nossible to mix them. Let him graduate, know all his sciences and know the elementary tools of his trade. After that, when he goes to the post-graduate level, then he can enquire about certain things, he can use them. But apart from that, another type of integration shall be at the larger dispensary or hospital level. We want all the three systems to be working side by side. For example, there should be homoeopathy, allopathy, Ayurveda physicians and there can be a regular dialogué and not watertight compartments one should be complementary to the other. For example, blood urea, if it is high, there is no allopathic treatment, whereas by some simple homoeostathic medicine, it can be brought down. I have given medicine to cases in the hospital with high blood urea where other allopathic medicines were also given anti the blood urea has come down. Recently there was a case in a nursing home of burns, antihiotics were given, tranquillisers were given; but the patient was having nausea and vomiting with the result that the nourishment was very poor. The haemoglobin content was going down every day. It was six or seven. The patient was refusing diet. Colchium in high potency was given morning and evening: nausea had gone, she started eating felt a lot better. Then and she somebody says, "You are mixing it. I may tell you, these are the daily exigencies, and that will happen at my level, at the post-graduate level. And I had to take the permission of the doctor, "Doctor, if you will permit me, we might give this and she might improve." The whole process resulted in improvement because the patient started eating, nourishment was there. You cannot simply go on giving blood transfusion.

We are going to have degree courses, our boys will have knowledge of everything. But the only thing is that we will have it in our own way.

SHRI SASANKASEKHAR SANYAL: May I know what the Centre has done to provide a mobile dispensary or mobile dispensaries or homoeopathy for reaching the poor villagers?

WITNESS: We have already submitted a scheme to the Planning Commission in the Fifth Five Year Plan.

SHRI SASANKASHEKHAR SAN-YAL: Homoeopathic medicines are not costly and poor people will welcome cheap or free medicines which can be supplied by the Government.

WITNESS: Medicines are not costly but the medical paraphernalia, ductors, establishment, etc. are costly.

SHRI SASANKASEKHAR SAN-YAL What about the idea of sending scholars, research scholars, from here to foreign countries in order to improve their education and correspondingly bringing or inviting here scholars from there to make their study here?

WITNESS: Before we take up this programme, I think we should put our house in order. We should have people who really receive and imbibe these things. At the present stage, I am proud to say-in spite of what I have said before-that we have better anywhere homoeopaths here than else in the world. I say boldly, I feel that time will come when these people will come; I have received certain applications for admission into our colleges. But I dare not encourage them because I feel that they may carry wrong impressions about us. Till we have improved our institutions, we can wait. But I welcome the idea about interchange of schclars.

SHRI SASANKASEKHAR SA-NYAL: Do you think that in order to improve the standard further, it would be necessary for our homoeopathic colleges to have coordination with the universities, at least in the science courses in the universities?

WITNESS: Certainly, Sir, we would like them to do that as much as possible.

SHRI N. SREEKANTAN NAIR: Are there any universitics or colleges which have homoeopathy as one of the subjects?

WITNESS: In Britain, there is the Royal London Homoeopathic Hospital and there is the Faculty of Homoeopathy. They teach homoeopathy and give a short course in homoeopathy to the graduates of modern medicine. They have taken our boys also as a sort of undergraduate diploma holders. Now, this scheme has been stopped.

SHRI N. SREEKANTAN NAIR: Is it the post-graduate course?

WITNESS: It is not so; in that sense it is elementary course for the graduates of modern science who have to be initiated; an auxiliary course.

SHRI K. RAMAKRISHNA REDDY: Since the colleges are having only diploma courses, are you having sufficient graduates in homoeopathy to work as teachers in those colleges?

WITNESS: We have experienced diploma-holders. Even in allopathy when there was a paucity of teachers, some of them were LMS and the students were M.B., B.S. Any experienced diplomaholder, with 10 years' of practical experience, will be able to manage to teach in the college somehow or the other. In West Bengal they have started awarding degrees to some of these pcupie by holding a test among them in the Faculty of Homoeopathic Medicine. My friend, Dr. Rastogi, has already been there and taken that test.

WITNESS: Sir, I agree with you completely, personally, and I anticipated all these ideas. We have actually formulated a plan and sent it to the Planning Commission. I said, this pattern of assistance should be applied to the State Colleges also. But I can inform you that this is one of my recommendations that this pattern of assistance should be available to Stae (Government) colleges also and we should be able to give assistance for 25 beds to every homoeopathic medical college all over the country, whether Government or otherwise, over and above the present bed strength. Nowadays one of the difficulties in the private colleges is that < they are not able to maintain their beds properly. They do not have the money for it. There are not sufficient aid for lack of funds they are even fully occupied beds. The funds are not enough. I think at least for cne five year plan period this assistance should be available to the Colleges.

SHRI JANAKI BALLAV PAT-NAIK: What about a lumpsome from the State Government for the purpose?

WITNESS: We expect that the State Government to earmark some money.

SHRI JANKI BALLAB PATNAIK: I have one roint for elucidation. The roint is when you raise the present homoeopathic colleges to the degree standard, will it be sufficient? The State Government should be able to absorb them so that brilliant students are attracted towards homoeopathic education. All these things should be taken into consideration,

WITNESS: My suggestion would be that we should have co-ordinated

planning for the admissions to the allopathic, homoeopathic and ayurvedic colleges. I agree that there should be a proper plan made out before we go in for these things. I can assure you that the country wants nomocopathic system not only because it is cheap but because some of the disease complexes are covered only by homoeopathy. Apart from that, I am sure if the Government starts colleges the right type of boys with proper educational, cultural, and intellectual background will be attracted and ultimatery they will be able to hold their own in the competitive world. At the same time I must insist that we should not open up colleges unless they are fully equipped. What we have suggested is that in this Plan period every State Government should have at least one degree college Private colleges which are not up to the standard should either be closed down or they must be aided. For example, Bihar has 19 colleges, U.P. has 20. 1 am not in favour of multiplying their number. I would rather cut down the number. But unfortunately, these things are being managed at the lower level. We are writing to the State Government that they must intervene and see that right standards of medical education are developed.

SHRI MAN SINGH VARMA: You are aware that homoeopathic treatment is not reimbursible and government servants are handicapped. They cannot take the help of homoeopathic system. Are you doing something in that direction?

WITNESS: This has been discussed in the Ministry. Orders have been issued that a Central Government servant, where he is entitled to reimbursement, will be reimbursed the cost of homoeopathic medicines.

SHRI K. C. PANDA: Dr. Jugal Kishore, you are agreed that there should be at least one degree college in each State so far as homoeopathy is concerned. Can the Centre enforce this suggestion and persuade the States to have it established with

some Central grants?

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WITNESS: I have already explained that there is no pattern of assistance regarding any grant for State colleges by the Centre although from the Ministry level we have made this proposal

SHRI K. C. PANDA: My second question will solve your problem. Is it possible to have an institution of an University at the Central level which will affiliate these colleges? If the respective universities do not have homeopathic faculty, the proposed University will be entitled to get grants from the U.G.C. which can be distributed to the colleges.

WITNESS: We are not idle. We have suggested that there should be a National Institute of Homeopathy. That should be the highest educational body situated in Delhi for post-graduate, and under-graduate studies. That Institution should be also an affiliating body to and examining.

SHRI MAN SINGH VARMA: That is very essential.

WITNESS: We want your help also. Even the Health Minister has mentioned in Parliament that we are actually proposing an Institute like that under the Five Year Plan.

SHRI K. C. PANDA: And also have day to day running of the small dispensaries which we are going to open In certain States in certain places. they are already there. You will agree with me that there should be separate Directorate in each State under the Central Health Directorate. The proposal is to keep certain homeopathic and ayurvedic doctors under the control of the Primary Health Centres where there is an M.B., B.S. doctor. And I think you will agree with me that there should be a separate Directorate in Ayurvedic as well as Homeopathy in the States. Let them have a small number of employees.

WITNESS: I agree with this suggestion, most emphatically. Actually we are already having a Deputy or Joint Director of Homeopathy in same states and now we are insisting that there should be separate wings from Ayurved

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and allopathy. Recently the Health Minister of Kerala was requested that the Assistant Director (Homoco.) should be made independent of Ayurvedic system. There also there is lot of conflict because the proposals put forward by him may not be agreed to by the Joint Director Ayurved. This is why we are insisting on a separate officer for homeopathy and a separate directorate for homeopathy.

SHRI K. C. PANDA: Is it easy to do it from the Centre.

WITNESS: We can persuade them but not force them.

SHRI K. RAMAKRISHNA REDDY: Just now you have mentioned that in each State there should be a degree college and at the national level there should be a University. May I know what steps we have taken till now at the Health Ministry level in this behalf.

WITNESS: I have already explained that this is going to be in the Fifth Five-Year Plan. I have outlined the project. I a_{1n} distributing again my rationale for starting a National Institute of Humoepathy. The Health Ministry has already approved it. It has been sent to the Planning Commission. Now we are at the mercy of the Planning Commission. I think if you demand it, it is bound to come.

SHRI K. RAMAKRISHNA REDDY: How do you incorporate it in the Bill?

WITNESS The Bill has nothing to do with it. It is to lay down standards, even for the National Institute. But this Committee can recommend strongiy.

SHRI K. RAMAKRISHNA REDDY: There will be unanimous acceptance of that suggestion. There is no controversy about that here.

SHRI MADHURYYA HALDAR; Dr. Kishore, you are insisting that the States should have new colleges, at least one in each State. But I would like to know whether you are insisting also that there must be some stipend arrangement to attract the brilliant students to this system of medicine. This is my first question. Secondly, you have said that some research is being done in the Central Research Institute of Homoeopathy. You have said that variolinum has been proved successfully.

WITNESS: It is only a part project \succeq where variolinum has been experimented upon, not proved in the strict homoeopathic sense.

SHRI MADHURYYA HALDAR: I would like to know whether proving is going on regarding cholera, polio_etc.

WITNESS: Regarding stipends, we can take up the proposal regarding stipends once the colleges come into being. Let the stars the colleges and then we can take up the question of stipends also, at what level it should be done at the Central level or at the State level, and so on. There is no question of dearth of students. I know in Myore, where the standard of education is not high, in one of the colleges M.Scs. and B.Scs. are going. So, the only thing is that it should be a standard institution.

Regarding the second question, when we talk of proving some medicine, it means finding out properties of a particular drug. It is different from clinical provings. Here we have taken up certain diseases like rheumatic fever. post-rheumatic changes in the heart, etc. I might tell you that I have had private informal talks with the Director of All India Institute of Medical Sciences. I suggested to him that we should have a unit of homoeopathy in the Institute so that there will be some homoeopathic people who will look after some patients. For that purpose, it might be necessary to have some experimental enquiries. He has agreed to look into this proposal regarding experiments where they will take up subjects like asthma, tonsillites, Eczene defective hepatitis we will give the medicine and then they will see the results. If this succeeds, then homeopathy will have a place at that level

and we might in the beginning have at least one homoeopathic doctor in every hospital. That was my request to the Minister, Mr. Uma Shanker Dikshit, when I joined here—that there should be one at least homoeopathic doctor in every large Dispensary hospitals.

SHRI K. RAMAKRISHNA REDDY: In every PHC.

WITNESS: That we can do later on. The Director said, "Before you do it, the people should be convinced about it." Three experiments will be done, in the All India Institute, the Nehru College and the R. K. Puram Homocopathic Dispensary. If this scheme goes through, we shall have advanced our objective very much. As you know, any Government machinery moves slowly.

CHAIRMAN: We are all very much enriched and enlightened regarding the system of medicine. homeopathic During the last two hours, starting from your demonstration, you have convinced us that this system has so much of potentialities and that it has actually come to stay. As a doctor of the modern system of medicine, I must say we are proud of baving one like him, and that too, at this difficult period in our country's life. In fact, I had certain doubts about certain points in this system of medicine. But even those doubts have been cleared. I am sure this talk for two hours and our questions to him will help us to formulate this Bill in the proper way so that we can develop this system to its fullest stature. I thank you very much, Dr. Jugal Kishore.

The Committee then adjourned.

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Wednesday, the 10th January, 1973

PRESENT

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MEMBERS

1. Shrimati Purabi Mukhopadhayay— Chaiman

Rajya Sabha

- 2. Shri Sasankasekhar Sanyal
- 3. Shri N. G. Goray
- 4. Dr. K. Nagappa Alva
- 5. Dr. Debiprasad Chattopadhyaya
- 6. Shri Sitaram Kesri
- 7. Shri Man Singh Varma
- 8. Shri K. C. Panda
- 9. Shrimati Savita Behen

Lok Sabha

10. Shri Ziaur Rahman Ansari

11. Shri Vidya Dhar Bajpai

- 12. Shri Hiralal Doda 13. Shri Nageshwar Dwivedi 14. Shri Pampan Gowda 15. Shri Madhurya Haldar 16. Shri Chiranjib Jha 17. Shri B. R. Kavade 18. Shri T. S. Lakshmanan 19. Shri Mallikarjun 20. Shri Prasannbhai Mehta
- 21. Shri N. Sreekantan Nair
- 22. Dr. Laxminarayan Pandeya
- 23. Shri Janaki Ballav Patnaik
- 24. Shri S. L. Peje
- 25. Shri K. Ramakrishna Reddy
- 26. Dr. Sankata Prasad
- 27. Shri Awdhesh Chandra Singh

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REPRESENTATIVES OF THE MINISTRIES

Ministry of Law and Justice

Shri P. L. Gupta, Additional Legislative Counsel

- Smt. V. S. Rama Devi, Deputy Legislative Counsel Ministry of Health and Family Planning
- Dr. Jugal Kishore, Adviser in Homoeopathy Dr. D. P. Rastogi, Senior Research Officer.

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary Shri M. K. Jain, Under Secretary

WITNESSES

- 1. Representatives of the All Haryana Homoeopathic Medical Association, Ambala Cantt:-

 - Dr. Raja Ram Singh Arya, President,
 Dr. Jai Chand Jain, General Secretary.
 Prof. Onkar Nath Sahore.

 - (4) Dr. S. S. Chawla
- Representative of the Bhartiya Homoeopathic Protection Society, Hardwar: Dr. B. Kaj, General Secretary.
 Dr. Kashinath V. Chitte, Srinagar (J&K)
 Dr. Sultan Alam M. Bihari, Purnea (Bihar)
 Dr. C. B. Humbhroursele, Jaines

- 5. Dr. C. P. Jhunjhunwala, Jaipur. 6. Dr. P. L. Banerji, Jaipur 7. Representative of the Rajasthan Homoeopathic Medical College and Hospital, Jaipur:-

Dr. Girendra Pal, Vice- Principal,

(Shrimati Purabi Mukhopadhyay in the Chair)

[The Witnesses (Shri S. S. Chawla, Shri Onkar Nath Sahore, Dr. Raja Ram Singh Arya and Dr. Jai Chand Jain)were called in.]

CHAIRMAN: Welcome to the representatives of the Haryana Homoeopaths Association, Ambala Cantt. Friends, will you please introduce yourself?

SHRI S. S. CHAWLA: I am a lay healer. I am Chief Sub-Editor in the Tribune, Chandigarh.

SHRI ONKAR NATH SAHORE: I am Head of the Department of English in the S.D. College, Ambala Cantt. I have been dabbling in homoeopathy for the last twelve years. I am also a lay healer.

DR. RAJA RAM SINGH ARYA: I am President of the Haryana Homoeopaths Association. I am practising homoeopathy for the last several years.

DR. JAI CHAND JAIN: I am General Secretary of the Haryana Association.

CHAIRMAN: We have not your reply to the questionaire. Have you got anything else to suggest either on the Bill or any comments on: the Bill? Friends, before you start giving your evidence, I have to inform you that whatever evidence you tender before this Committee, the questions which Members of the Committee put to you and the replies you give, all this evidence is confidential and it should be treated confidential and it should not be divulged outside till the report of this Committee is placed before . the House of Parliament. •

Now you may begin.

SHRI S. S. CHAWLA: The very first thing that we want to add to our previous memorandum is that the wording 'unqualified homoeopath" as it is commonly used involves a value judgment. It is overloaded against us and it means some stigma. We are being treated as Harijans of the profession. We need a Gandhi to fight our case who could give us some distinction as Harijans and not say what was once used to be said. We want and demand that these persons who have been doing this very good service may be called 'lay-bealers' and this does not involve any value judgment against or too much in their favour. This is one of our requests and we lay much stress on this. We should not be called 'unqualified' or 'quacks'. We should be called 'lay-healers'. They are found not only in India, but all over the world including Germany, Britain and America. I have toured these countries and I have come across this term in several places and on several occasions.

People worship God in temples with flowers and incense, but 'lay-healers' worship God in the for mof patients with sweet pills. They are men who render the most useful service by catering to the needs of patients with simple remedies for acute ailments and thus considerably reduce the pressure and burden of the hardpressed Doctors in hospitals giving them more time to devote to complicated and surgical cases. We demand that we should be allowed registration facilities.

CHAIRMAN: Where do you find in the Bill the word 'unqualified'?

SHRI S. S. CHAWLA: This is the general term that is being used for those who are not institutionally qualified. The term should be considerably simple. CHAIRMAN: We have used the words "institutionally qualified" and "not institutionally qualified". We have never used the word "unqualified". It is used by the public. It is for your association to fight it out. Where do we come in?

SHRI S. S. CHAWLA: May I take you to a number of years back before Partition?

CHAIRMAN: We are concerned only with the provisions of this Bill. In the Bill we have not used the word 'unqualified'. If it is a question of nomenclature, it is for you to take it up through your papers, or public meetings or through other forums. As Members of Parliament or as Members of this Joint Committee, we never come into the picture because we have never used that word in the Bill.

SHRI S. S. CHAWLA: I thought this is also one forum where we can make this humble submission. "Layhealers" is a much preferable word than "not institutionally qualified" which is an involved construction. Sir C. Y. Chintamani once said that the non-co-'Non-violence expression operation" with double negative is an involved phrase. Similarly, the expression used in the Bill is an involved thing. Instead of using this negative expression, we are suggesting the use of a positive term such as "Layhealers".

SHRI PRASANABHAI MEHTA: In Chapter II, clause 3(c) says:

"Such number of members, not exceeding thirty per cent, of the total number of members elected under clauses (a) and (b), as may be nominated by the Central Government, from amongst persons having special knowledge or practical experience in respect of Homoeopathy or other allied medical disciplines".

We have never used 'unqualified'.

CHAIRMAN: Nowhere in the Bill we have used that word. SHRI PRASANABHAI MEHTA: On the contrary, this is quite a dignified language.

SHRI S. S. CHAWLA: All Homoeopaths registered in States may automatically be registered in the Central Register. The 'lay-healers' who have' somehow been left out at the time of registration for reasons of their being in service, may be registered in the Central Register after they retire from service. All registered Homoeopaths should have the democratic right to vote—this is most important—and to seek election to the State and Central Council, without any distinction.

CHAIRMAN: You do not want reservation to some specially qualified people who have undergone institutional training and have got degrees and diplomas.

SHRI S. S. CHAWLA: But by and large there should be a democratic procedure with some reservation for them. Thirty per cent of seats can be reserved for the institutionally qualified persons.

CHAIRMAN: That is what we have exactly provided in the Bill.

SHRI S. S. CHAWLA: That is weighted too much in their favour.

Clause 5(1) imposes a restriction. It says:

"No person shall be eligible for election to the Central Council unless he possesses any of the medical qualifications included in the Second Schedule, is enrolled on any State Register of Homoeopathy and resides in the State concerned."

; CHAIRMAN: Look at the Second Schedule.

SHRI S. S. CHAWLA: These are degree-holders and qualified Doctors.

CHAIRMAN: We accept those with these qualifications as eligible for election. SHRI S. S. CHAWLA: Our submission is that "lay-healers" and others who are not institutionally qualified should also have that democratic right.

डा॰ सक्ष्मीनारायए। पाण्डेय: ग्रापका मत है कि जो क्वालिफाइड लोग है उनको प्राथमिकता देना ग्रावश्यक नहीं है ग्रीर जो इंस्टीटयूशनली क्वालिफाइड नहीं है उनकी संख्या ज्यादा है। क्या ग्राप ऐसा समझते हैं कि होम्योपैयी को ग्रागे वढ़ाने के लिए उनको प्रतिनिधित्व देना ग्रावश्यक नहीं है?

श्वी एस॰ एस॰ चावला: इस सम्बन्ध में हमने ऐसा नहीं कहा। हम यह नहीं चाहेंगे कि जो क्वालिफाइड लोग हैं उनके लिए सीट्स न हों। हमने जैसा पहले ग्रर्ज किया, जैसे हरिजनों को स्पेशल वेटेज मिला हैं, ऐसे ही इन लोगों के लिए माप स्पेशल सीट्स रिजर्व कर दें।

CHAIRMAN: Excuse me, Doctor, your argument is fallacious. We do not make a distinction between a Harijan and a non-Harijan. Why should you compare yourself with a Harijan? A Harijan does not deal with the life and death of a person whereas you are dealing with the life and death of a person. Therefore, how can you compare yourself with a Harijan when the life and death of persons is in question?

SHRI ONKAR NATH SAHORE: I would like to submit that in such comparisons we should not take the things totally. I would request that the comparison should not be stretched too far and our submission is that just as the Harijans are backward and are neglected, similarly we belong to a class that is being ignored and neglected altogether. That is all.

CHAIRMAN: That is right. But you will accept that you must be properly qualified to deal with a life of a person. Otherwise, how can I ask you to treat my son?

SHRI ONKAR NATH SAHORE: Our submission is that paper qualification alone does not qualify a person really to render this kind of service. In the case of homoeopathy a good amount of intelligence and experience is required and there are people who have cured hundreds of cases without this sort of degrees or qualifications. I would request this august Committee to just take a lenient view of the whole case especially after listening to our arguments that are just to come, that is, that we lay healers are rending a service to the poorer sections of . the society. . . .

CHAIRMAN: And the poorer sections of the society are the charge of the Welfare State and you cannot expect the poorer section of the society to get the poor kind of medical care from the poorly qualified persons in the country. So, that argument we will never accept.

SHRI SASANKASEKHAR SANYAL: What is your objection to this that so long as you are not having a large number of qualified doctors to deal with both the rich and the poor we should permit those on the registered rolls to continue. But the approach of our State policy is to have a large number of doctors in a quick velocity so that in the foreseeable future each one is treated by a qualified doctor. What is your objection to that?

SHRI ONKAR NATH SAHORE: There is no objection to that.

SHRI SASANKASEKHAR SANYAL: That is the crux of the whole thing.

SHRI S. S. CHAWLA: Only last week the Prime Minister addressed the Diamond Jubilee of the Indian Science Congress at Chandigarh and there she said that in America where allopathic treatment has reached the high watermark treatment is there only for 15 per cent of the ailments and for 85 per cent of the ailments, physical, mental or emotional, there is no treatment in allopathy. That is the Prime Minister's statement. CHAIRMAN: Your argument is just opposite to that theory, because if allopathy cannot cure a person, homoeopathy claims that it can cure and that is why the Government wants to give equal status to homoeopathy also.

WITNESSES: Thank you.

CHAIRMAN: But we want the homoeopath to be a properly qualified one.

DR. K. NAGAPPA ALVA: Even that statement is wrong. I do not think that the Prime Minister has said so. No sensible person will say that.

SHRI S. S. CHAWLA: I think you have not read it. I can give you the cutting if you want.

DR. K. NAGAPPA ALVA: I do not think it can be correct.

SHRI SASANKASEKHAR SANYAL: Do you make the suggestion that increasing number of qualified doctors should always abdicate in favour of those who are not qualified?

SHRI S. S. CHAWLA: The Prime Minister has said that. She had a very big dig at the modern system of education, medical education and she said that most of the curricula or syllabi are weighted in favour of qualification to work in foreign hospitals and colleges and so most of them qualify and work abroad. Even the 15 per cent of cases of treatment do not belong to India.

SHRI MADHURIYYA HALDAR: I want to point out that we should not discuss the statement of the Prime Minister here.

SHRI S. S. SHAWLA: I am going to support my case with published record of her statement.

CHAIRMAN: But you are not going to support your case with her argument because her statement is just opposite to this. She would never have mentioned that the most unqualified persons should be entrusted with the precious lives of the people in our country.

SHRI S. S. CHAWLA: I am going to support my argument.

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CHAIRMAN: Please do not divert from your case. Please concentrate on your point only.

SHRI S. S. CHAWLA: But let me have my say first. Then you can find fault with the argument.

You will not agree with this. But she also pleaded that short-duration courses should be started and that allopathic doctors at present do much of the work which can be easily done in a routine manner by the dispensers, compounders and nurses, etc. This is what the Prime Minister stated in her speech and she had a dig at \cdot the system.

SHRI SASANKASEKHAR SANYAL: Do you think that she will accept treatment from an unqualified homoeopath?

CHAIRMAN: Let us not discuss the Prime Minister here.

SHRI S. S. CHAWLA: We are not discussing the Prime Minister here. But I just quoted her speech.

DR. K. NAGAPPA ALVA: But the context in which she spoke is quite different.

SHRI S. S. CHAWLA: She has also pleaded for three months' training to produce peasant doctors.

DR. K. NAGAPPA ALVA: This impression must go from their minds. I am clear that she never suggested that such and such course should be started that 85 per cent of the diseases cannot be cured by the allopathic system, etc.

SHRI S. S. CHAWLA: This may be your impression. This can be verified from published record of the Indian Science Congress. DR. K. NAGAPPA ALVA: I would request you to plead on your behalf only.

CHAIRMAN: You see, this is a Joint Select Committee and whatever you say goes on record. Every thing is recorded here.

SHRI S. S. CHAWLA: The record of the Diamond Jubilee speech is also there. It is also on record. I am not misquoting her or quoting her out of context, c[†]

DR. RAJA RAM SINGH ARYA: We want only a sympathetic consideration.

SHRI S. S. CHAWLA: When short courses are envisaged for "peasant doctors" on Chinese model you can train these "present doctors", in three months, why not then allow lay homoeo practitioners who have five or ten years of experience to practise actuated by the desire of alleviating human suffering and sorrow?

CHAIRMAN: Then that is also institutional training.

साक्षी (डा॰ राजा राम सिंह झार्य) : हमारा मतलव यह है कि जो हजारों की तादाद में होमियोपेयस पन्द्रह-पन्द्रह वीस-वीस साल से काम कर रहे हैं।

they should not be debarred from practising their professions and they should be given sympathetic consideration.

CHAIRMAN: Now you are coming to that.

SHRI PRASANNA MEHTA: You must make a positive approach first.

साक्षी : उनकी तादाद इतनी ज्यादा है, थाउजेन्डस में, कि ग्रगर ग्राप उनमें से कुछ थोड़े से लोगों को ही रजिस्टर करेंगे तो

You will not be encouraging homoeopathy, rather discouraging it. Homopathy should be encouraged. करेंगे तो जितना ज्यादा से ज्यादा आप रजिस्टर करेंगे उतनी ही होमियोपेथी इन्करेज होगी ।

श्री मान सिंह बर्मा: इसको यूं करेक्ट-कर लें कि जितना भी ज्यादा से ज्यादा प्राप् क्वालिफाइड बना सकें।

साक्षी : फ्यूचर में तो क्वालिफाइड हो जाएंगे।

श्री मान सिंह वर्गा: फ्यूचर के लिए ही यह बन रहा है, पीछे के लिए नहीं वन रहा है।

साक्षी: वीस-गीस साल से जो काम कर रहे हैं

थी मान सिंह वर्मा: ग्रापका कहना सही है लेकिन जो कोई कानून बनता है भविष्य के लिए बनता है, भूतकाल के लिए नहीं वनता है। ग्रब जब गवर्नमेंट ने रिक्गनाइज कर दिया है कि यह एक साइन्स हे इसको ईक्वल स्टेटस देना चाहिए तो इसमें वह भी चाहती हैं कि इसका स्तर ऊंचा हो भौर ज्यादा से ज्यादा लोग योग्य बन कर निकलें। मापका कहने का मतलब यह है कि जो ग्रालरेडी रजिस्टबें-हैं उनको नेगलेक्ट न किया जाए, नजर-ग्रंदाज न किया जाए।

साक्षी (श्री एस॰ एस॰ चावला') : _ इस वक्त कन्ट्री में 5 लाख होमियोपेथ्स हैं, उसमें से 80,000 रजिस्टर्ड हैं । ग्रीर इनमें केवल 16,000 क्वालिफाइड हैं ।

डा० लक्ष्मी नारायण पाण्डेय: मैं आप से यह जानना चाहता हू कि जो लोग ग्रभी तक रजिस्टर्ड नहीं हुए हैं. क्या ग्राप उनको स्पेशल ट्रेनिंग देना चाहेंगे, उनके लिए फ्रैंशर कोर्स शुरू करना चाहेंगे साकि वे झापने को रजिस्टर करवा सकें ? श्री एस॰ एस॰ चावलाः कोई न कोई ऐसी व्यवस्था करनी चाहिये ताकि इस तरह के लोग प्रपने को रजिस्टर करवा सकें।

CHAIRMAN: Have you gone through the Bill?

SHRI S. S. CHAWLA: Yes, Madam.

CHAIRMAN: Here you will find that we have protected the right of practice. We have given certain weightage to institutionally qualified people; there is no doubt about it and you can give your argument basing on the suggestion that we have put forward in the Bill. Instead of speaking at cross purposes let us concentrate on the Bill. The right of practice of the homoeopath has been amply protected. What is your next point?

SHRI S. S. CHAWLA: As you know on an average the homoeopaths are daily treating about 50 lakhs of people and if you debar them from alleviating human suffering and sorrow who loses? The nation loses and nobody gains.

SHRI MAN SINGH VARMA: That you have said. What is your next point?

SHRI S. S. CHAWLA: We suggest that the Government should arrange for refresher courses for a period of at least three months. I would suggest that there should be summer courses also after every five years. Institutionally non-qualified homoeopaths who are practising should be asked to attend these courses. They will greatly be benefited by such courses. Most of them are open to new ideas and they will be greatly benefited. There should be refresher courses annually and every five years everybody should be asked to attend them.

CHAIRMAN: May I introduce to the witnesses Dr. D. P. Chattopadhyaya, our Minister of Health?. He is also a Member of this Committee.

SHRI S. S. CHAWLA: Finally may I submit that in a democratic country swearing by socialism no invidious distinction should be made between two citizens on the basis of mers] paper qualifications in the matter of elections to the State and Central Councils of Homoeopathy. No restriction should be imposed on anyone to fight elections to these august bodies.

डा० सक्मी नारायरा पाण्डेय : क्या यह सही बात है कि कुछ लोग जो अपने आप को ग्रभी तक रजिस्टर नहीं करवा सके, वे केवल होम्योपैयी का सहारा लेकर ग्रौर विना किसी तरह की परीक्षा पास किये हुए अपने को मैडिकल प्रक्टिस्नर कहलाना चाहते हैं? इस तरह के लोग न तो होम्योपैयी की प्रैक्टिस करते हैं,न ही किसी तरह की उन्होंने कोई किताब पढ़ी है, न किसी इंस्टीट्यू जन ढारा क्वालीफाइड है ग्रोर इस तरह के लोग होम्योपैथी का सहारा लेकर ग्रपने को रजिस्टर कराना चाहते हैं तया अपने आप को होम्योपैथीस कहते हैं। क्या म्राप यह वात उचित समझते है, कि जहां जीवन-मरण का प्रम्न है, वहां पर ऐसे लोग जो न आयुर्वेदिक और न ही एलो-पैंथी में अपने को रजिस्टर करा सके हैं. वहां पर इस तरह के लोगों को प्रैक्टिस करने दिया जाय ग्रीर उन्हें रजिस्टर करने की इजाजत दी जाय?

श्री एस॰ एस॰ चावला : ग्रापने इस संवध में बहुत सी वातें कह दी हैं जिनका कांट्रेडिक्शन करना जरूरी हो जाता है। अ Homoeopaths can be beaten with any

यह जो एटीट्य ड है, वह ठीक नहीं है । होम्योपैथी के वारे में यह निवेदन करना चाहता हूं कि यह एक सेवा ऐसा सब्जेक्ट

stick by anybody,

है कि वगैर इसको म्रच्छी तरह से पढ़े हुए, मच्छी तरह से म्राध्ययन किये हुए, कोई इसकी प्रेक्टिस नहीं कर सकता है। लेकिन एलोपैथी ऐसी चीज है मौर इसके बारे में मैं फेनच डाक्टर एलेक्सिस कारोल का कोटेशन दे सकता हूं। उन्होंने कहा था कि ग्रगर किसी म्रादमी ने छः महीने तक किसी डाक्टर के यहां काम कर लिया, तो फिर वह एक डाक्टर का काम कर सकता है। उन्होंने था You are fit enough to work independently and deal with people

लेकिन होम्योपैथी में ऐसी नहीं है। होम्योपैथी इज ए लाइफ टाइम जौव म्रोर जो ग्रादमी पढ़ा लिखा न हो, इस चीज के बारे में ग्रध्ययन नहीं करता है. न किसी इस्टीट्यशन में शिक्षा लेता है, वह इस काम को नहीं कर सकता है। दो तीन किताव पढ़ने से हाम्योपैथी का काम नहीं चल सकता है। इसमें तो ऐसे ग्रादमी की ग्रावश्यकता है who are actuated by the highest of motives, not with the motive of making bundles of notes.

(Dr. K. Nagappa Alva in the Chair).

SHRI O. N. SAHORE: May I submit a simple question concerning myself? Where do I stand? I have been dabbling in homoeopathy for over a quarter of a century. I have been reading books and no homoeopath can afford to be without books. Without consulting books hobody can prescribe anything. Where do I stand? Can I be registered or not?

CHAIRMAN: Are you not enlisted now?

SHRI O. N. SAHORE: It has not started in Haryana and Punjab. And there is no college in the whole of India north of Delhi.

CHAIRMAN: It is better you have full information. You are responsible persons representing the cause. There are about 48,000 fully registered people in India and 52,000 people enlisted.

DR. RAJARAM SINGH ARYA: Not from our State. CHAIRMAN: There is nobody registered or enlisted in your State? SHRI S. S. CHAWLA: No, no.

डा० लक्ष्मी नारायण पाण्डेय : क्या पूरे हरियाणा में कोई होम्योपैयी डाक्टर रजिस्टर नहीं है ?

थी एस॰ एस॰ चावलाः कोई नहीं है।

SHRI K. C. PANDA: May I know whether the Homoeopathic Board was constituted in that State or not?

DR. RAJARAM SINGH ARYA: It has been constituted only recently.

CHAIRMAN: Dr. Jugal Kishore will explain the position.

SHRI JUGAL KISHORE: So far the Board has not started functioning in Haryana. There is a saving clause that in those States in which there is no registration all those homoeopaths who have been practising for the last five years at the commencement of the Act will continue to practise homoeopathy till they are registered or put on the register. There is a saving clause and I don't think there is anything to be afraid of with regard to your future practice. I hope within a few years you will have a complete Register.

श्वी एस**ं एस**ं चीवलां: सेन्ट्रल कोंसिल जो बनेगी उसमें उनको वोट देने का श्रधिकार नहीं होगा ने

DR JUGAL KISHORE: The question is, in the first instance the first Council will be nominated according to this particular draft Bill. By that time I hope you will see that your State has started registration, and by the time election starts you will be eligible for electing your Councillors.

डां० राजारामें सिंह धार्य : हमारे एसोसिऐशन के 7-8 सो रेगुलर मेम्बर हैं, उनमें एक भी रजिस्टर्ड नहीं है।

डा॰ जुगल किशोर : यह सारा काम

स्टेट गवनमेंट का है, पह कोशिश करिए।

डा॰ राजाराम सिंह मार्यः वहा हम बहुत कोशिश कर रहे हैं, लेकिन वहां बहुत डिले होगी ।

डा० जुगल किशोर : इसमें हम आपकी हेल्प कर सकते ।

श्री सक्मी नारायण पांडे : आपके मेम्वर्स में कितने इस्टीट्यज्ञनली क्वालीफाइड हे?

डा॰ जय चन्द जैन : हरियाणा में सिर्फ 15-20 क्वालीफाइड है, बाकी सारे अनक्वालीफाइड है।

श्री मानसिंह वर्मा: ग्राप लोग प्रेक्टिस कर रहे हैं उसमें सरकार की तरफ से कोई रूकावट है?

श्री एस॰ एस॰ चावला: जी नहीं।

श्वी मानसिंह वर्मा : ग्रापको कोई लाइसेंस लेना पड़ता है ?

श्री एस॰ एस॰ चावला ः जी नहीं।

श्री के सी पण्डा : ग्रापका वोर्ड में कोई मेम्बर है ?

भी एस॰ एस॰ जावला : जी नहीं।

SHRI OMKAR NATH SAHORE: We apprehend some kind of a....

DR. RAJARAM SINGH ARYA: None; no representative has been taken from us.

DR. JUGAL KISHORE: "15(3)(c) the right of a person to practise Homoeopathy in a State in which, on the commencement of this Act, a State Register of Homoeopathy is not maintained if, on such commencement, he has been practising, Homoeopathy for not less than five years;"

The only condition is that you must have been practising for the last five years. SHRI SASANKASEKHAR SANYAL: Who will assess the period of five years?

DR. JUGAL KISHORE: The State Government. In view of this criterion, there need be no apprehension.

डा० राजाराम सिंह पार्यः यह प्रेक्टिस र के लिये है लेकिन वोटिंग के लिये नहीं ।

डा० जुगल किशोर : वह तो जव रजिस्टर वनेगा तभी होगा ।

डा॰ राजाराम सिंह मार्यः वह रजिस्टर शायद 10 साल तक नहीं बनता तो । सुना है कि हमारे पास पैसा नहीं है, डाक खर्च के लिये पैसा नहीं है। हम ने कई वार इन्टरव्यू लिया है ।

SHRI S. S. CHAWLA: There should be an integrated approach to the problem of health services as the plans now envisage integration of rail, road and air services. Hakims, vaids, allopaths, dentists and homoeopaths should be part of an integrated health scheme and specialisation allowed to various pathies. Surgery, for example, should be confined to allopathic hospitals only. This is a very important suggestion. Homoeopaths need not be burdened with surgery except for first aid, that is, simple stitching and dressing first aid.

DR. LAXMINARAYAN PANDEYA: Why not in Ayurvedic and Homocopathic colleges?

DR. RAJARAM SINGH ARYA: We shall welcome it.

SHRI S. S. CHAWLA: Courses in homoeo colleges should be shorn of surplusages, that is, superfluous appendages. First-class matriculates with good I.Q. alone should be admitted to the homoeo colleges wherea two year instruction and training are given. It is far better than admitting third class matriculates and make them spend four years in a: Homoeo College. Courses should be for two years in anatomy and materia medica. A period of six months' internship should follow the two-year training course in theory.

Four-year courses are really the bane of the medical system and should be done away with immediately. As the hon. Prime Minister has suggested LSMF courses of short duration should Therefore, be revived. homoeo courses should not be prolonged and lengthened. They should be confined to two years. Middle-class parents can ill afford to pay Rs. 200 to 300 monthly for children for four years in a homoeo college, especially when their income after training is going to be so low; they do not make bundles of money like their esteemed brethern in the orthodox system of medicine.

श्री मानसिंह वर्मा: हम्योपैथिक का जो डाक्टर बनता है उसको कितना समय चाहिए एफीशिएन्ट बनने के लिये । आपने कहा कि चार साल का कोसं लम्बा होता है, नहीं होना चाहिए, दो साल का होना चाहिए । मैं यह पूछना चाहता हूं कि दो साल में वह एफीशिएन्सी येन कर लेगा ?

SHRI S. S. CHAWLA: Yes, Sir. A first-class matriculate with a good I.Q. should be the minimum qualification. There is no point in admitting thirdclass matriculates and giving them four years' training: they will be more useless.

श्री चिरंजीव झाः दो साल में डिग्री कोर्स हो जाये गा?

श्री एस॰ एस॰ चावला : डिज्लोमा कोर्स ?

भी चिरजीव झा : डिग्री कोर्स की जरूरत ग्राप समझते हैं ?

थी एस॰ एस॰ चावल : जी हां।

श्री लक्ष्मी नारायण याण्डेयः : क्या ग्राप चाहते हैं कि उस में सांइस स्टूडेंस विद वायोलोजी लिए जायें या ग्रार्टस्टडेंट्स लिए जायें जिन को सांइस का ज्ञान न हो ।

श्वी एस॰ एस॰ चावला : ज्राटं स्टू-डेंट्स भी लिए जाएं। उन को 6 महीने को ट्रेनिंग दी जा सकती है एनेटोर्म। वर्गरह की। सांइस वाले को प्रि फर किया जा सकता है।

He or she should be an intelligent, first-class matriculate with a good I.Q.

DR. RAJARAM SINGH ARYA: With science may be preferred.

SHRI K. C. PANDA: Don't you want that the institutionally trained homoeopaths should be on par with M.B., B.S. people?

DR RAJARAM SINGH ARYA: In future.

SHRI S. S. CHAWLA: When I suggested, I was prepared for that. You can restrict lay healers from issuing medical certificates. But you should permit them to alleviate human suffering. They are actuated by a nobler sentiments.

SHRI K. C. PANDA: It is a via media that you are suggesting.

SHRI S. S. CHAWLA: Yes.

SHRI K. C. PANDA: What about my question? Don't you want that the institutionally trained homoeopaths should be on par with the M.B., B.S. people?

SHRI S. S. CHAWLA: I have no objection to that.

SHRI K. C. PANDA: What is your suggestion for having degree colleges?

SHRI S. S. CHAWLA: Degree courses may be there after two years. After two years, when they get their diplomas, you may give them two years of further intensive training. CHAIRMAN (DR. K. NAGAPPA ALVA): Have you finished with your suggestions?.

SHRI OMKAR NATH SAHORE: Yes, Sir.

CHAIRMAN: No questions?

HON. MEMBERS: No.

CHAIRMAN: Friends, we are thankful to you for coming here as representatives of the Homoeopathic Association of Haryana and we are really benefited by your suggestions. There is only one thing which I want to say here and it is that you need not have any fear that you will be neglected and ignored. Provision is already there in the Bill for those who are practising in the homoeopathic system. I would only suggest to you and would request you, as believers in the homoeopathic system, to make every effort to see that you also impress on your Government the necessity of having a Board and something like that to register yourself because five years' practice in homoeopathy is enough to get yourself registered. That is most important. Kindly bear it in mind. And we are thankful to you, We will take into consideration the suggestions that you have given, while formulating the Bill finally.

DR. RAJARAM SINGH ARYA: We thank you for taking a very sympathetic view.

SHRI OMKAR NATH SAHORE: We offer our grateful thanks. You have been really very kind. We are very much obliged. As you all know, the great Einsten started his career as a clerk, and in his spare time he went on dabbling in physics. He was just an amateur. Later of course, he came to Physics as a full-time subject. My submission is that those intelligent and educated members of the community who have been studying and practising homoeopathy for many years should not be left out on some flimsy ground of non-qualification.... SHRI SASANKASEKHAR SANYAL: They won't be disturbed....

SEVERAL HON. MEMBERS: They won't be. Don't worry.

SHRI SASANKASEKHAR SANYAL: Don't worry, Carry on your practice.

SHRI OMKAR NATH SAHORE: We fear that theer are certain pressures being brought on the Government about this. We thought of troubling you here. We thought our voice would reach these corners through your good offices.

SHRI S. S. CHAWLA: Thank you also for your sympathetic attitude. May I ask a little question? Suppose, as is the situation today in Haryana in various fields, if we do not get a sympathetic hearing from our Government, does this Central legislation help? Will it cover us and protect us?

CHAIRMAN: That's why I told you to represent to your Government and to the Health Ministry....

SHRI S. S. CHAWLA: Since 1966, we have been doing this through the national press, letters, etc.

CHAIRMAN: We understand your difficulty. But it is for you to go ahead with your efforts. We will look into all this.

SHRI S. S. CHAWLA: Thank you very much.

The witnesses then withdrew.

[The Witness (Dr. B. S. Kaj) was called in.]

CHAIRMAN: Dr. Kaj, we are happy that you are General Secretary, and you are representing the Bhartiya Homoeopathy Protection Society, Hardwar. We are glad that you have come to give evidence before this Committee. We have to tell you that this evidence that you are giving, and the questions that will be put to you by the Members and the answers elicited, also are confidential in nature. You are not expected to give out these things to the press and to the public. We will take into consideration the suggestions that will be given by you.

Now, this is the first association with such a name as the Bhartiya Homoeopathy Protection Society, to protect the society and the system itself....

WITNESS: Not the society but homoeopathy itself.

CHAIRMAN: You have already given the representation. And if you want to emphasise any point, you can do that. You can also raise any fresh points and give your suggestions.

WITNESS: My first submission is about the definition. At page 2, in para (d) 'Homoeopathy' has been defined as 'the system of medicine founded by Doctor Samuel Hahnemann'. Since the practice is rather against the governing rules made by him throughout India and all over the world, it becomes very essential that it should be subjected to the 'Organon of Medicines, which is a compulsory subject of the syllabus also. The word 'Organon' signifies, like the rest of the sciences in the world, whose obedience is binding upon all those who follow it for success. The people may get proper results for which it was meant.

CHA!RMAN: What is your specific suggestion about the definition?

WITNESS: At the end of the definition I want an addition: "subject to organon of medicine." Organon is a compilation of governing rules laid down by Hahnemann and he also acted upon those points and succeeded. Unless we follow those laws, we cannot impart the benefits which were expected by practising these medicines.

त्री मार्नासह वर्माः वेसिक चीज तो वायलेट नहीं हो रही है। ग्राखिर इस बारे में ग्राप का सजेशन क्या है?

WITNESS: Almost in all practices of Homoeopathy, pharmacopea, etc. in everything it is being flouted there. The system founded by Dr. Samuel Hahnemann, the governing rules laid down by Dr. Samuel Hahnemann are not being followed. The fundamentalswhich have been entered into the organon of medicine are not changeable and they can only be changed unless they have been proved inadesomewhere on reasonable quate grounds. They are all adequate even today, they are as active as they were in Dr Hahnemann's days. Why should they be changed unless there is an evidence against it?. We cannot practise on the whims and fancies and suppositions unless it fails, it will not be reasonable.

CHAIRMAN: For your information, the organon materia medica is recognised in this system also.

WITNESS: Organon of medicine is a compilation of governing rules and materia medica is a data which Dr. Hahnemann extracted after proving upon the human beings.

CHAIRMAN: What exactly do you want to suggest?

WITNESS: Subject to organon of medicine, a compilation of rules.

CHAIRMAN: All right. Have you got any other point?

WITNESS: Yes, there are about five points.

The second point is about clause 3(1), i.e. formation of Central Council and Committees in part (a). It is not a proper method for the formation of the Council. It should not be formed on the criterion of State registration but from amongst the homoeopaths, as defined in clause 2(d) of the Bill; i.e. from amongst the homoeopaths who are practising for a long timeand have proved themselves to be virtual homoeopaths by experience, beelected or nominated. इस में मझे सिर्फ यह ग्रर्ज करना है कि रजिस्ट्रे-शन का काइटेरियन जो भी रहा है। ग्राप उन्हें देखें तो उन में दस परसेंट भी प्रापर होम्योपैय्स नहीं मिले पायेंगे, लेकिन ग्राल वयर रजिस्टर्ड ग्रगर उस वेसिस पर कुछ किया जाता है तो एप्रिहेंशन इस वात का ज्यादा है कि होम्योपैथी ग्रीर विगड़ती जायेंगी। ग्रगर मेरी डेफीनीशन को मान लिया जाय तो प्रापर होम्योपैथ्स हम लोग -पा सकगे:

श्री मार्नीसह वर्मा: तो ग्राप क्या चाहते हैं ?

साक्षी : ड्राफ्ट में स्टेट रजिस्टर काइ-टेरियम है जब कि होना चाहिए यह कि जो वर्चुग्रल होम्योपैय है उस को ही लिया जाय ।

श्री मानसिंह वर्माः क्या यही श्रापका सजेशन है ?

WITNESS: I want that the State registration should not be the criterion for election or nomination. Virtual homoeopaths only may be taken.

SHRI K. RAMAKRISHNA REDDY: What do you mean by 'virtual' and how do you decide, who would be the competent authority to decide at this juncture?

WITNESS: 'Virtual Homoeopaths' means those who are following the organon of medicine. They may be taken from amongst the homoeopaths, as defined in clause 2(1)(d).

यौर ऐसान होने के कारण ही होम्योपैयी जो कुछ कर सकती है या करने के काबिल है वह नहीं कर पाती ग्रौर ग्राज वह एक यहँ ग्रेड साइंस हो रही है।

SHRI MAN SINGH VARMA: Please suggest whether they should be judged by some institution or some examining body.

WITNESS: Of course, by an examining body. श्वी मानसिंह वर्मा: ग्रव तक जो होता रहा है वह तो होता रहा है, लेकिन ग्रव इस को डवलप होना चाहिए, इस का विकास होना चाहिए ग्रौर इस के लिए ही यह सेंट्रल कॉसिल वनायी जा रही है ग्रौर यह सारे नियम वनाये जा रहे हैं ग्रौर यह विधेयक लाया जा रहा है ताकि इस का भविष्य कुछ उज्जवल हो सके: ग्रागे ऐसा न हो ग्रीर क्वालिफाइड लोग ही इस प्रोफेजन में ग्रायें ज्यादा से ज्यादा इस के लिए ही यह सारा प्रयत्न हो रहा है।

साक्षी: फार दि लास्ट सिक्स इयसं बरावर यह सोसायटी गवनंमेंट से रेक्वेस्ट करती ही है कि मैडिसिन्स फ्ल्यूड फार्म में यहां न आयें क्योंकि फाउंडर ग्राफ होम्योपैयी के हिसाव से वे ग्रनफिट हो जाती हैं यूज करने के लिए। हम लोग इस के लिए प्रयत्न करते रहे हैं कि उन को ग्लोबल फार्म में ही ग्राना चाहिए। मेरा थई पवाइंट है, चैन्टर दो, पार्ट सी, सब-सेक्सन (1)। इसमें ग्राखिरी सेंटेंस है--

Nominations can be from allied medical disciplines.

इसमें मेरा सबमिशन यह है कि चंकि इसकी फण्डामेंटल तमाम पद्धतियों से ग्रलग हैं इसलिए ऐसे हालात में किसी दूसरे मेडिकल डिसिप्लेन से नामिनेशंस होम्योपैथी के लिए फायदे में नहीं जाएगा । इससे नुक्सान ही हो सकता है। मेरा सुझाव यह है कि ग्रलाइड मेडिकल डिसिप्लेन से कोई नहीं ग्राना चाहिए।

SHRI MAN SINGH VARMA: You want 'allied medical discipline' to be deleted?

WITNESS; Yes.

SHRI K. C. PANDA: In the colleges of homoeopathy I think we are required to teach them anatomy?

WITNESS: Of course we have to teach anatomy Physiology and disease. SHRI K. C. PANDA: For that don't you require the services of allopaths?

WITNESS: It means that we should suppose that the existing tutorial staff is not aware of anatomy and physiology. That is not correct.

SHRI K, C. PANDA: If we have got mino expert in the circle of homoeopathy can't we take the help of allopaths?

साक्षी: जहां हम उनकी हेल्प ले सकते हैं, वहां लेनी चाहिए । हमारे होम्योपेथिक ट्यूटोरियल स्टाफ जो यह दावा करता है कि वह ग्रनोटामी नहीं जानता ? वह होम्योपैंथी नहीं है ।

SHRI K. C. PANDA: In the present case if we are required to take the help of allopaths so far as that portion of the training is concerned what is your objection if a member of theirs is taken in the Council to examine that part of the studies in the colleges?

साक्षी : जहां तक मेरा ख्याल है, होम्यो-पैथ्स झनोटामी, फिजिश्रोलाजी झादि झच्छी तरह से जानते हैं। झगर वह नहीं जानते हैं तो दे झार नाट फिट फार दि जाब, दे झार नाट एट झाल फिजिशियेंस।

श्री मान सिंह वर्माः ग्रापका श्रीर कोई प्वाइंट है?

साक्षी : क्लाज 5(1) --- इसमें पावन्दी रखी गई है कि जो प्रेक्टिशनर्स किसी भी स्टेट में रजिस्टर्ड हैं वह उसी स्टेट में प्रैक्टिस करता है, वह इलेक्शन के लिए ऐलिजिवल होगा। हमारा देश एक है। इसको अगर नेशन-वायड होना चाहिए तो ठीक होगा। चाहे किसी भी स्टेट में वह रजिस्टर्ड है, किसी भी स्टेट में उसकी कन्वीनियन्स है तो वहां प्रेक्टिस करे। इलेक्शन के लिए उसे पूरा ग्राधिकार होना चाहिए।

ये मेरे चार पाइंट हैं, में समझता हूं कि इनको मान लिया जाए तो काी सुघार इसमें हो आएगा। 1742 R.S. 6. SHRI MAN SINGH VARMA: That is a very good suggestion you have made.

SHRI K. RAMAKRISHNA REDDY: You want the words 'and resides in the State concerned' to be deleted?

WITNESS: Yes.

CHAIRMAN: Thank you very much.

The witness then withdraw.

[The witness (Dr. Kashinath V. Chitte) was called in.]

CHAIRMAN: Dr. Chitte, we are glad that you have come before us to give evidence. We have to inform you that the suggestions that you will be giving, the representations that you will be making, the questions put by Members and the answers that will be given by you are all strictly confidential and they are not to be given to the press and the public. You will kindly remember this point.

You have submitted your replies to the questionnaire. If you have any points to be stressed you can do so and also make further suggestions if you have any.

WITNESS: Chairman and respected Members, I am very thankful to you for giving me an opportunity to speak on matters concerning homoeopathy. I have nothing more to add actually; I only want to emphasize the point that homoeopathy is an art and it should be treated as such. It requires a lot of sincerity on the part of the practitioners to follow the principles of homoeopathy. About those who are practising on the basis of their experience I would like to say that it should not be compulsory for all practitioners to have degree or diploma because all the States do not have facilities for giving education in homoeopathy. I come from Srinagar. It has not recognised homoeopathy. in the State of Jammu and Kashmir There are hardly four or five practitioners in Srinagar valley.

CHAIRMAN: What exactly is your suggestion? You say there are only four or five practitioners,

WITNESS: It is mentioned in the Bill that only diploma-holders should be allowed to practise.

CHAIRMAN: The present position is that there are doctors practising homoeopathy without having qualifications from any institution. They can practise, but they have to register themselves. Those who have got five years' experience can register themselves. The protection is already there.

WITNESS: But they will not be able to hold any position either in the Central Government or in the State Government or in the Council that is to be formed.

SHRI MAN SINGH VARMA: You are from where?

WITNESS: I am registered in Rajasthan.

SHRI MAN SINGH VARMA: You are allowed to practise in Jammu and Kashmir.

WITNESS: There is no restriction and no registration is there.

SHRI K. RAMAKRISHNA REDDY: There is a provision for nomination also. Important persons can be nominated.

SHRI MAN SINGH VARMA: Any other point?

WITNESS: I do not have much to say except that if I am asked any question I shall answer them within the limits of my humble knowledge.

SHRI K. C. PANDA: Have you got a homoeopathic board in your State?

WITNESS: No, Sir.

SHRI ZIAUR RAHMAN ANSARI: Do you mean to say that this practice of enroling unqualified doctors as registered medical practitioners should continue for all times to come?

WILLIESS: No, Sir.

SHR! ZIAUR RAHMAN ANSARI: Do ye i mean to say that those persons who are already practising, whether they are institutionally qualified or not, must be registered and given full chance to practise in homoeopathy?

WITNESS: Yes, Sir. I have mentioned the same in my answer.

CHAIRMAN: We thank you very much for coming before us and giving your suggestions. We will bear in mind your suggestions.

WI'NESS: Thank you.

(The witness then withdrew).

[The Witness (Dr. Sultan Alam M. Behari) was called in.]

CHAIRMAN: We are glad that you have come here to give evidence

We wish to make it clear to you that the proceedings are strictly confidential and you are not expected to give put these things. Now, I request you to give us your suggestions. Have you given already any representation?

WITNESS: I have sent two letters-

CHAIRMAN: You can emphasize any of those point or give other subgestions if you have got any.

WITNESS: In the original Bill I find there is no protection given for homoeopathic research. So, the Committee should do something about promoting homoeopathic research and for approving any new medicines that can be put under homoecpathy. There should be a committee for recognising the provings and confirm whether they are authentic or not. If anyone says that he has proved any drug, it should not be just accepted. There should be a committee to recognise it and it should be proved to be true.

SHRI ZIAUR RAHMAN ANSARI: You want a research centre.

WITNESS: It should be separated from any other system of medicine SHRI MAN SINGH VARMA: There is provision for research. It will come within the scope of the Bill.

SHRI ZIAUR RAHMAN ANSARI: We are going to estabish a Central Council under this Bill when it becomes an Act.

WITNESS: I do not find anything here.

SHRI ZIAUR RAHMAN ANSARI: One of the functions of the Council is to establish a research centre and to do everything for the development of homoeopathy.

WITNESS: Homoeopathic medical education is a separate thing. I am en M.Sc. in chemistry. While I was a student I suffered from colic and I went to about fifty or sixty doctors. Nobody could cure me. I went to Dr. Habibul Hag and he cured me. He just gave me a dose of nux vomica 30. I never had the colic again. Later on I jointed his college and studied homoeopathy. Homoeopathy should not be influenced by other system of medicine. For instance, on the manufacturing side also our drug controller is the same as for the other systems Our drug controller of medicine. should be a separate man.

SHRI MAN SINGH VARMA: Why do you apprehend that there is no such provision here and that it will be influenced by some other system of medicine?

WITNESS: Actually this has happened

SHRI MAN SINGH VARMA: What is happening?

WITNESS: This is my suggestion. Though there are so many colleges, some genuine colleges do not exist today and such colleges have not been included in the Second Schedule. For instance, the Prince Homoeopathic Science College, where I studied, has not been included in the Second Schedule. In the State of Bihar, examinations were conducted by the Board from 1960 onwards. The first batch came out in 1964. We were from the 1956 batch. If I could pass the M.Sc. of Patna University, I could have taken the Board examination also. When I wanted to study homoeopathy, such a thing did not exist at that time. My college, the Prince Homocopathic Science College, Patna, of which Dr. Habibul Haq was the Principal, has not been recognised.

CHAIRMAN: The position is, the State Governments must recognised and they must send the report. Only those that are given here, they are taken as recognised. That is the position. It is for you to see that the State Government recognises it. You want that their qualifications should be recognised?

WITNESS: Yes.

CHAIRMAN: It is for you to represent.

WITNESS: Nobody listens to us.

श्री चिरजीव झा: जैसा ये बतला रहे हैं, कि ये एम०एस०सी०पी० हुए हैं ग्रीर इन्होंने होम्योपैथी साइन्स की डिग्री कालेज से ली है, लेकिन ग्रभी तक ये रजिटर नहीं हुए हैं। इस तरह से जो पढ़े लिखे लोग हैं ग्रीर जो ग्रंब तक रजिस्टर नहीं हुए हैं, तो यह कोई ग्रच्छी बात नहीं है और यह एक, गलत चीज है।

SHRI MAN SINGH VARMA: Are you registered ?

WITNESS: I am only an enlisted homoeopath.

भी मान सिंह वर्मा : जितने ग्रनलिस्टेड है, उनके लिए वतलाया जाय कि वे किस तरह से रजिस्टर हो सकते हैं?

DR. JUGAL KISHORE: We have been asking the States. If he is qualified even at the time of passing the Bill, he is eligible. This is how we have been trying to request the States so that they can do it as early as possible.

CHAIRMAN: Therefore, you should also do something to protect them. DR. JUGAL KISHORE: Are you registered?

WITNESS: No, I am not registered even.

CHAIRMAN: How many of them are there from that college?

WITNESS: There must be about 2000 students like me who are practising, people who are not yet registered because it was the practice of Principal Habibul Haque not to get registered before ten years of study. So, we have followed his principle. I have been very much of an independent research worker in homoeopathy. I think that the homoeopathic philosophy can be explained only by classical Indian philosophy because the band of spectrum, according to the physicist's modecules, does not go beyond a particular limit, whereas in the Indian philosophy we have got five forms of matter and the Western philosophy says that there are three forms of matter and their spectrum is limited to the light spectrum only, We go beyond it, beyond the 21 c dilution. So, these things can be proved vice versa Homoeopathic dilutions versus Indian philosophy or Indian philosophy versus homoeopathic dilutions. Creation the of mind and the dilutions are, according to the Indian philosophy, the same. We are moving from the crude to the subtle. My book will be ready m about two or three weeks.

श्री चिरजीव झाः ग्रभी ग्रापने वतलाया कि ग्रापने कुछ नई चीज निकाली है, नो हम ग्राप से चःहने हैं कि ग्राप उनके वारे में वतलाइयें।

WITNESS: The human body is covered by a network of electrical circuits and these electrical circuits carry current. So, this human body has got a magnetic field and this magnetic, field, in collaborated coordination psyche maintains the structural solidarity. This body is just like an organo electric cell. The capacity to recharge the cell is what is life Depreciation in the capacity to recharge is ageing. When the cell is dead, the organism is dead. This could not be proved by any other way. Backmann in 1955 proved that nerves carry electrical current. That was proved by Beckmann by Beckmann's nerve meters. He found about current passing through the nerves. This can be ዿ proved by a unique process. Acording to the Indian philosophy, every particule of the body is made up of a number of protozoic cells. A combination of these protozoic cells can be called one single metazoic cell. As the metazoic cell develops it adds in appendages. This is also according to the Indian philosophy. So, if any portion of the body is detached, i.e., if a cut nail or a hair is taken and brought into contact with the medicine (Homoeopathic) by the process of transmission of psycho-electromagnetic waves. In England and other places, they are doing some work. If one single cell of the body is diseased, all the cells are also diseased. If the organism is diseased, the hair is also disased, so the hair are falling, they turn white, there is some form of de-There is formity, homoeopathic medicine for that also. You will find that hairs are split into two parts. That is cured by homoeopathy. Ι tried homoeopathic dilutions and other crude druggs for transmission through hair. For instance, a man is suffering from pain in the liver. I found that if mercsol is the suitable remedy. I gave sixth dilution to the hair there was no effect, 30 potency had no effect. With 200 potency transmitted through the hair the pain began to subside. Hair transmission is very useful in arriving at the correct potency. The medicine is 20 miles away from the patient, not at the place where he is suffering. He may also be 200 miles away. It is transmitted by tafimatric psychic electro-magnetic Waves. Tanmatric transmission is proof of Indian philosophy and system. We conceive that matter transmits, radiates, some sort of tanmatric waves. I have isolated the psycho-electric magnetic waves, which are just like radio

waves. When there is no carrier current for the psychic waves to function, there is death. That is why, my first request was for the protection of research in homoeopathy. I came to homoeopathy for research. I was employed in the Agricultural Department as a teacher. I am an M.Sc. I went to study homoeopathy. When I found that I could not sail two boats at the same time, I just left everything and came to homoeopathy and my practice.

श्री चिरंजोत झा: एक वाल में मापने दवा मिला दी, उससे उसके पेट के दर्द में म्राराम म्रा गया, वह कैसे ग्रलग है। मैं यह जानना चाहता हूं कि बह कैसे हुम्रा, इससे क्या सम्बन्ध है?

साक्षी : जैसे एक मैगनेट होता है वैसे ही यह भी है, मैगनेट से इसका फंक्शन सिमिलर है।

It has got a similarity. Similarly, it has got psychic relationship, which has is also seen among the relatives. For instance, I have cured a patient like this. The patient was two miles away. He was suffering from diarrhoea and vomiting. It gave a dose of 30 potency of arsenic to the hair extracted from the head of his cousin sister. And diarrhoea and vomitting were stopped. His condition was helpless. I went to see him; I gave him a dose of carboveg 30 to save his life.

There is another thing. There is so much money spent on other systems of medicine. If ample scope is given to homeopathy, homeopathy can reduce the financial burden on the country. There is operation for family planning. But an operation brings about deformity in the body. There is a break in the circuit and so there is change in the personality after some five years. There is depression. Man and woman both get some sort of ailment. For ladies there is vomitting. The symptom appeared four year later, I gave medicine to a lady and she was cured. A single does of

staphistaria was enough. If you give aconite 200 on the 11th, 12th, 13th and 14th day after the mensural period the heat period will go away. If she still conceives a simple doze of Pints Lam. 3 is enough to bring normal mense every month.

SHRI MAN SINGH VARMA: Do you want to say anything about the Bill?

WITNESS: Our qualifications must be protected.

CHAIRMAN: We will take you suggestions into consideration. We are very happy that you are going ahead with your research; work by yourself. We are glad you are so optimistic of the results. It is really beyond our imagination. We will bear in mind what all you have said. Regarding your registration, it is for you to try there in the State Government and see that you are registered.

WITNESS: That we will try. 1 am enlisted but not registered.

(The witness withdrew).

Record of oral evidence tendered by Dr. C. P. Jhunjhunwala, Jaipur.

[The witness (Dr. C. P. Jhunjhunwala) was called in].

CHAIRMAN: Dr. we are very happy that you have come here to give your evidence. I may tell you that whatever you say here will be treated as confidential till the record is placed on the Table of the House.

Now, I request you to give your points with reference to the representation that you have already given. and also give your further suggestions.

WITNESS: I would like to know from the hon'ble Members if they have read my supplementary memorandum which I sent through the Parliament Secretariat.

SHRI K. C. PANDA: You can presume that we have received it.

WITNESS: I want to stress one point, namely, representation in the Council, I think the representation from the States on the Council on the basis of numbers is not proper because just like India which is a federal structure every State is represented irrespective of its numbers. There must be one or two representatives in the Council from each State.

No, I meant one or two representatives, from each State irrespective of the number of homoeopaths in the States, i.e., equal number of representatives from each and every State, otherwise more number of representatives on their numerical strength from Bihar, West Bengal, U.P., etc. may subdue the voice, requirements and necessary demands of the smaller States like Delhi, Goa, Pondicherry, Haryana, Punjab, Rajasthan, Gujarat, etc., and backward States like Jammu and Kashmir, Himachal Pradesh, Nagaland, Meghalaya, etc., where it is more necessary to popularise Homoeopathy by means of teaching institution, easy examinations for private candidates, etc.

And even if some States make delay in starting registration of homeopaths after all the formalities of passing the Act and the Rules, etc., such State Governments should be asked to nominate representative homeopaths from their States, because I believe, even in States like Kashmir, Meghalaya, Nagaland, etc., there are Homoeopaths rendering service to the people as well as to some ministers and/or officers in the Government.

WITNESS: That is one point that I would like to emphasise again and again.

SHRI ZIAUR RAHMAN ANSARI: It is provided for in clause 3(1)(a). SHRI MAN SINGH VARMA: You want at least one from each State?

WITNESS: Yes.

DR. JUGAL KISHORE: There should be a minimum of 100 practitioners. If there is no homoeopath there, is it necessary to provide for representation? For example, in Nagaland they would not be able to send anybody. That is why we have, said that there should be a minimum of 100 practitioners.

WITNESS: In that case, I will quote the example of Tamil Nadu where there are a large number of homoeopaths although they are not yet registered. That is one State. Another State is Jammu and Kashmir. There is no Board as yet there; there is no provision for registration. The Central Council cannot ignore them. They should have representatives from those States also, more so from the backward States because they need a little more encouragement to have institutions there. Otherwise who will speak for that State in the Central Council? There must be some representation for them in the Central Council.

श्वी मान सिंह वर्मा : जब वहां डाक्टर ही नहीं हैं तो उनका रेप्रिजेंटेशन कैसे होगा।

साक्षी: डाक्टर नहीं हैं, ऐसा ग्रापने कैसे मान लिया। वहां रजिस्ट्रेशन का प्रावि-अन ही नहीं है।

श्री मान सिंह वर्माः तो ग्रापको यह कहना चाहिए कि जहां पर डाक्टर हैं ग्रीर उनका रजिस्ट्रेशन नहीं हुग्रा है, वहां पर उनका रजिस्ट्रेशन होना चाहिए।

साक्षी: रजिस्ट्रेशन का वन्दोवस्त तो बाद में होगा। लेकिन जहां पर ईस साइंसज की रेंज नहीं हैं वहां पर उनको पहुंचाना सेन्ट्रल गवनमेंट की ड्यूटी है। भी चिरंजीव झा: जिस स्टेट में रजि-स्ट्रेणन नहीं हुग्रा है वहां उनको रेप्रिजेंट कांन करेगा।

साक्षी: में मापको यह बतला दूं कि 🔺 मैं एक मैगजीन निकालता हूं ग्रीर मैं यह जानता हूं कि तमिलनाडु में घमी तक लोगों का रजिस्ट्रेशन नहीं हुआ है, लेकिन वहां पर हजारों ऐसे लोग हैं प्रौर उनमें बहुत कंचे-कंचे रैंक के हैं। जम्मू कश्मीर में भी तक कोई बोई नहीं बना हम्रा है ग्रभी ग्रीर बहां पर भी हमारे दस बारह रेग्युलर सब्मकाइबर हैं। इसी तरह से नागालैंड में मेंने खुद जाकर के देखा नहीं है, लेकिन मैं समझता हूं कि वहां पर जरूर होम्योपैथ्स होंगे। अगर ग्राप वहां पर रेप्रिजेन्टेशन देंगे तो वहां की स्टेट किसी न किसी को उसके लिए सजेस्ट करेगी । हर स्टेट का रेप्रिकेंटशन होना बहत जरूरी है।

दूसरी बात यह है कि बिहार में मान लीजिए भ्रभी 25 या 30 हजार का रजि-स्ट्रेगन हुग्रा है तो उसकी बेसिस पर उनका ज्यादा रेप्रिजेन्टेशन होने की ग्रावस्यकता नहीं है। न्यमेरीकल स्ट्रेंथ जहां ज्यादा है उसकी बेसिस पर रेप्रिजेंटेशन देने की ग्रावस्यकता नहीं है।

SHRI N. G. GORAY: This difficulty can be overcome by the Government writing to the various State Governments, "Now that this legislation has been passed and we have decided to have representation on the Council, if there is no provision for registration in your State, you better hurry up with it", so that the States can take the necessary steps.

WITNESS: I very much welcome the idea of the hon. Member. Whereever there are no homoeopaths according to the register, there are homoeopaths, and you have to go by that. So there should be provision for representation from each State. That is my point. SHRI N. G. GORAY: If you make a provision like that, then the possibility is there that there may not be any register of homoeopaths in a particular State. In that case, who will represent that State?

WITNESS: The State Government will find out about it and suggest some names.

SHRI N. G. GORAY: That is exactly what I am saying, i.e., the Central Government should write to the various State Governments that they must get their homoeopaths registered so that they can have representation in the Central Council.

WITNESS: Until that time, even if there is no provision for registration, the Central Council can give representation to them during the transitory period.

SHRI N. G. GORAY: Then who votes? There must be a voters' list. Otherwise, who will vote, who will stand for election, how will the election be held?

WITNESS: That is a question for a later period.

SHRI N. G. GORAY: Anyway you have made your point.

CHAIRMAN: Is there any other point that you wish to make?

WITNESS: I think I have given my replies quite exhaustively. I would, however, insist that there should be no ban on the practice of homoeopathy on charity basis. That provision is there in many of the State Acts. During the last 150 years or so, right from the time of Punjab's Ranjit Singh, when homoeopathy came to light, the lay practitioners and thereafter many missionaries have been helpful in treating many gems of our country like Pandit Motilal Nehru, the late Prime Minister Jawaharlal Nehru and others. Where the other system of medicine failed, homoeopathy saved many people. So, there

SHRI N. G. GORAY: Any legislation, whenever it is undertaken, will put certain bars. It is very natural; otherwise, there is no need for a legislation at all. Anybody can practise anything.

WITNESS: There are two sides. One side is to bar somebody through penal clauses from doing something. The other side is the registration can give them the benefit of issuing certificates, sickness certificate, fitness certificate, death certificate, and so on, and the authority and privilege of representing in courts of law and other things. Those who are not registered will not have the benefit of issuing certificates and other things. So there is the positive side and there is the negative side. We have to see that legislation can give them and what it can withdraw from them. These are the things I wanted to say. Let the legislation give them privileges. And those who are not registered, those whom you do not want to recognise at all as anything, please do not put any bar on their practice. That is what I want.

CHAIRMAN: Your suggestions are very clear. One is representation for every State in the Council. The other suggestion is there should be no ban on practitioners on charity basis. We will take your suggestions into consideration while formulating the Bill. We thank you very much for coming here and giving your evidence.

WITNESS: I also thank you all very much for giving me this hearing.

(The witness then withdrew.)

CHAIRMAN: We will met at 3 C' clock again.

(The Committee then adjourned).

Wednesday, the 10th January, 1973.

(Dr. K. Nagappa Alva in the Chair.)

[The Wilness (Dr. P. L. Banerji) was called in].

CHAIRMAN: You are welcome here and we are glad that you have come here to give your evidence. Before you proceed, one thing that you should know is that the discussion we hold here, the suggestions you give and the questions that will be put to you and the answers that will be elicited from you are all strictly confidential in the sense that these things should not be given out to the Press or anybody else.

WITNESS: Thank you.

CHAIRMAN: You must have already submitted a representation or memorandum. Now it is for you to cmphasize on some of the points contained in your memorandum and you can give fresh suggestions not contained therein. It is for you, Now you can go ahead.

WITNESS: I have given a detailed reply to the questions which I received. I think they are self-explanatory. Still if you want me to say something on any point you like, I shall speak.

In addition, I have to submit that the definition of 'Homoeopathy' as in Section 2(d) should be amplified to include the practice of using biochemic tissue salts as propounded by Dr. Schusslor.

As at present, we have no university in India, we should ask that at least ten persons (two from each of the five zones) should be nominated from amongst the teaching numbers of the recognized homoeopathic colleges in India till the time of establishment of at least five universities facilities in India, as required under Section 3(b).

The eligibility of election to Central Council should also include a condition that the persons who have been on the rol's of a State Register of Homoeopathy for five years vide Section 5(1) he taken. The following four provisions should be added in an appropriate place in the Bill:

- (i) Whoever wilfully or falsely assume or uses any title or description or any addition to his name implying that he degree, diploma, holds а licence or a certificate conferred or issued by the Board or that he is a registered practitioner or that he is entered in the list maintained under section....shall on conviction be punishable with fine which may extend to two hundred and fifty rupees for the first offence under this Section and to fine which may extend to five hundred rupees for every subsequent offence.
- (ii) No person other than a body or institution authorised under this Act shall confer, grant or hold himself out as entitled to confer, grant or issue any degree, diploma or licence which is identical with or is a colorable imitation of any degree, diploma or licence granted by any Board.

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- (iii) Whoever contravenes the provisions of Section above shall on conviction be punishable with fine which may extend to one thousand rupees and if the person so contravening is an association every member of such association who knowingly or wilfully authorises or permits the contravention be punishable with fine which may extend to one thousand rupees.
- (iv) No court shall take cognizance of any offence under this Act except on a complaint in writing by an officer empowered by the Central/State Government in this behalf.

No court other than the court of a Magistrate of 1st Class shall take cognizance or try an offence under this Act.

SHRI SRIKANTAN NAIR: You want only fine and not imprisonment?

WITNESS: That has to be considered by the House.

SHRI SRIKANTAN NAIR: I am asking your opinion.

WITNESS: Fine is quite sufficient for the present.

SHRI MAN SINGH VARMA: You want the definition to be amplified to include the practice of using biochemic tissue salts also. Is it not included in Homoeopathy?

WITNESS: Of course, it is. If it means that biochemic is part of homoeopathy, then it is all right.

SHRI MAN SINGH VARMA: Then, is there no necessity of adding?

WITNESS: The definition must be clear.

SHRI MAN SINGH VARMA: What do you think about clause 3(a) and (b)?

WITNESS: I have to submit that it should not be according to the number of homeopaths in each State. Because it will be difficult to take the number. I have written in my reply that from bigger States there should be 5, and from smaller States there should be 3.

SHRI K. C. PANDA: But there are States where there are no homoeopaths? What do you propose about that?

WITNESS: I do not think at present there are no homoeopaths in any of the State.

SHRI K. C. PANDA: But they are not registered,

WITNESS: Of course, registration will start by the time you pass this Act.

SHRI K. C. PANDA: Do you know what is the registered number of homoeopaths in Rajasthan?

WITNESS: Yes. About 2,500. Actually speaking, there are so many colleges. But they are not following the standards. They have not prepared the syllabus. One of the colleges in Rajasthan known as Rajasthan Homoeopathic College came into existence in the year 1965. It is running since then and it has got its affiliation with the Uttar Pradesh Board of Homoeopathic Medicine.

SHRI K. C. PANDA: Is there no board in Rajasthan?

WITNESS: There is one Board, but it has not yet finalised the syllabus.

SHRI K. C. PANDA: Are you associated with any college?

WITNESS: No. I am practising homoeopathy as a hobby since 1925.

SHRI K. C. PANDA: Are you in the category of qualified or registered practitioners?

WITNESS: I am in the category of registered practitioners for long practice. I was the Vice-Chairman of the Board, but I resigned because they were in the habit of making money and I did not like this.

SHRI K. C. PANDA: I think the whole Board is defunct.

WITNESS: Actually speaking, 8 of the Members including the Chairman announced that they have resigned. But the Chairman did not resign.

CHAIRMAN: How many colleges are there in Rajasthan?

WITNESS: There is only one regular college in Jaipur. It is recognised by the U.P. Board. It was started in 1965. It is carrying on 4-year syllabus regularly. DR. JUGAL KISHORE: They are not according registration now.

WITNESS: The last date for the application was 13th of November, 1971. It was on the basis of experience. No registration is being done now. They are not registering even the highest qualified people with D.M.S., D.H.M.S., M.H.M.S. Some persons who have been practising for 20-25 years, have been registered due to long service and experience. The Board is composed of unqualified people.

DR. JUGAL KISHORE: That means that so-called institutionally qualified people are not qualified for being registered. I also understand that membership of a particular association becomes a qualification for registration.

WITNESS: The Board is composed of 11 Members including the Chairman. Only two members were qualified. The rest of the members are dominating on the Board. They can do whatever they like. They have even issued titles like F.R.H.A. (Fellow of the Rajasthan Homoeopathy Association) for the purpose of registration.

DR. JUGAL KISHORE: Is the Government taking any steps against it?

WITNESS: Some enquiries were made but they are not taking any action. The Board is not meeting. The Health Minister is taking some action against them and they have been issued a notice to show cause against the Board.

CHAIRMAN: How many Homoeopathic Associations and there?

WITNESS: On the State level there are only two. Ours is known as Rajasthan Homoeopathic Medical Association which is a branch of the All India Homoeopathic Association and the other is the Rajasthan Homoeopathy Association affiliated with the All India Institute of Homoeopathy? DR. JUGAL KISHORE: At this juncture, I would like to say that yesterday the Association claimed that they had 90 per cent. of qualified people. But the so-called Rajasthon Homoeopathy Association is made up of people who are mostly lay people.

SHRI MAN SINGH VARMA: Are you in favour of any penal clause for people who falsely assume titles?

WITNESS: Of course, those who falsely assume such titles should be penalised and their practice should be stopped. Still, fake degrees are being sold in so many parts of India.

DR JUGAL KISHORE: Is the Rajasthan Board of Homoeopathy formed under the Registration of Societies Act or constituted by the State?

WITNESS: By the State Government.

(The witness then withdrew).

[The Witness (Dr. Girendra Pal) was called in.]

CHAIRMAN: Dr. Girendra Pal, we are very happy that you have made it convenient for you to come here and give evidence before this Committee. We are particularly happy because you are the Vice-Principal of the College. You can speak as the representative of the Hospital as well as of the College.

One point we always make clear to the witnesses as they come and give their evidence is that what we talk here, what we discuss here, the questions asked and the answers given, are confidential and should not be disclosed till the Report of the Committee is presented to Parliament.

Now I would request you to give your suggestions and, also, any special points you have.

WITNESS: Mr. Chairman, I would like to say something regarding the qualifications which are included in the second schedule. The CHP certificate of U.P. is merely a certificate obtained as a private candidate. There was no regular teaching. Therefore, the certificate obtained as а private candidate has no meaning as such. This certificate cannot be treated at par with other organised courses. This qualification should not be treated as at par with the GHMS or BMS qualifications which are 4-year courses. Similarly, the DHS of Delhi should also not be included. The Board of Homoeopathic System of Medicine, Delhi, has provided this diploma for the private candidates. If it were a regular 4-year course, it would have been all right but it has been provided for private candidate and, therefore, this should not be treated as at par with these qualifications. Then, the other certificates and diplomas, such as FCMH of Maharashtra, LRCHP of Kerala, HMB of West Bengal should be scrutinised before entering the same in the second schedule.

I have to make one more suggestion. The Rajasthan Homoeopathic Medical College and Hospital was started in September, 1965. Since then we have been training students for the DHMS diploma, 4-years regular course. It is a regular 4-year course according to the syllabus recommended by the Central Health Advisory Committee. The teaching is regularly done at the college level by fully qualified and experienced teachers. The faculty of the College examines the candidates both in theory and practice. This diploma is recognised by the Rajasthan Board of Homoeopathy Medicines also. After 1969 this college has been affiliated to the State Board of Homoeopathic Medicine, Uttar Pradesh. Then, we have started BMS diploma course and the examinations are conducted by the State Board of Homoeopathic Medicine, Uttar Pradesh. So, the D.H.M.S. of our institution should also be included in the second schedule.

First three batches have been examined by the faculty of the College. This college is provisionally recognised by the U.P. Government and the Rejasthan Government.

SHRI JUGAL KISHORE: Has the Rajasthan Board accepted this qualification?

WITNESS: The Board has passed a list of the Diplomas which are recognised. Now it is under consideration of the Government. They have given recognition to our College.

SHRI JUGAL KISHORE: If the State Government writes to the Ministry about this particular diploma, I do not think it would be difficult to include the same in the schedule. You may take up the matter through the State Board.

WITNESS: You know the Rajasthan Board is not functioning properly.

SHRI JUGAL KISHORE: If the Board is not functioning properly, then do it through the Government.

WITNESS: Already we have sent our application for the Central aid and it is lying with the Government for the last so many months. If you permit, we can now give a separate application directly.

SHRI MAN SINGH VARMA: We have heard many things about your State Board. So, the first thing is that it should be recognised by the State Government.

SHRI K. C. PANDA: May I know the qualifications of the teachers of your College?

WITNESS: As far as the teaching staff is concerned, we have the staff with the following qualifications:

MHMS (Cal.), D.F.Hom. (London), GHMS Lucknow, DMS Calcutta, BMS.

These are all 4-year diploma certificates. For the other subjects like anatomy, etc., we have an MMBS. At present we are having four to five MS, MD lecturers. All this staff is . highly qualified and experienced. SHRI JUGAL KISHORE: Do you have any beds attached to your college?

WITNESS: We are having 8 beds in Indore hospital and we are going toraise it to 25 beds by March or April.

SHRI K. C. PANDA: Do you get

WITNESS: No. Due to scarcity of funds, we are always told that there are no funds for Homoeopathy and, as you know, this Homoeopathy is under the Ayurvedic Department and the Director of Ayurvedic is not taking any interest in Homoeopathy. We have given that project to the Government. They say that they are not finding qualified homoeopaths. There are 8 or 9 State dispensaries. The Board is not functioning properly for the last 2 or 3 years. Prior to 1965, there was no Board.

SHRI K. C. PANDA: They are being controlled by the Directorate of Ayurvedic Medicines.

WITNESS: Vaids are giving treatment. They are not qualified homoeopathic doctors.

SHRI K. C. PANDA: Do they treat within homoeopathic medicines or Ayurvedic medicines?

WITNESS: Homoeopathic medicines are available. But they are not properly utilised.

Section 15 (2) states:

"No person, other than a practitioner of Homoeopathy who posseses a recognised medical qualification and is enrolled on a State Register or the Central Register of Homoeopathy,—

(a) shall hold office as Homoeopathic physician or any other office (by whatever designation called) in Government or in any institution maintained by a local or other authority;

(b) shall practice Homoeopathy in any State; (c) shall be entitled to sign or authenticate a medical or fitness certificate or any other certificate required by any law to be signed or authenticated by a duly qualified medical practitioner."

In this connection, I would say that in Schedule II, there are many qualifications included which do not make them properly qualified. How can they give these types of certificates? This authority should be provided only for the 4-year diploma holders. The qualified doctors holding diploma of 4 year duration shall only be entitled to give evidence in a court of law as experts. Therefore, the mention of 4year diploma course applies to Section 15(d) also. There is no doubt that some homoeopaths are reputed. I respect them. But there is nothing in the Bill to distinguish them from the quacks.

CHAIRMAN: Please tell us something about the functioning of the Board. We understand that it has become defunct and there is so much of bribery and corruption. They have given degrees which are all sorts of combinations. How actually that was done and is the Government silent over all these things?

WITNESS: When the Board was formed in Rajasthan, qualified homocopathic doctors were few and the quacks were much more in number. So far as the membership of the Board is concerned, they represent various sides, i.e., business side. quacks, clerks, trade upion leaders and other traders, etc. They entered the Board. Now the last date for registration was 13th of November. After that date, they had to find some way of registering people. So, they started giving all sorts of certificates for the purpose of registration. In the Board, there are 11 Members. Two of them are qualified and nine are unqualified. Our Institute is affilimated to the U.P. Board.

SHRI K. RAMAKRISHNÄ REDDY: Your college is a corporate venture cr an individual venture?

WITNESS: It is registered under the Societies Registration Act.

SHRI K. RAMAKRISHNA REDDY: How do you get the finances for it?

WITNESS: It is mostly fees from the students. As far as the teaching staff is concerned, teachers from S. M. S. Medical College are coming and teaching and we are giving them only honorarium and a conveyance allowance of Rs. 5/- per day. Some doctors are not even charging the conveyance allowance. The fee charged from student_s is Rs. 15/-. At present there are 98 students in all the 4 classes. The U. P. Board conducts the examination and we have to pay about Rs. 3000/- as examination centre fee. We have to pay about Rs. 40/- per student as examination fee. The Examination Superintendent comes from Lucknow to conduct the examinations. It is very costly. The students pay Rs. 40 to Rs. 50 extra as fee for the examination centre.

The other thing I want to say is the need for a uniform syllabus. A uniform syllabus should be prescribed for the four-year course throughout India and the minimum qualification should prescribed. It should be high be school science. The art students should not be accepted. It is not possible to teach them chemistry and other science subjects. High school science should be the minimum qualification. The Central Council should also prescribe the minimum apparatus, equipment, laboratory, library, etc. so that before starting an institution they must have certain things. Only then it should be allowed to start. The minimum planned outdoor and indoor hospital attached to the college should also be there. Without this the college should not be given permission to start. Panel inspection in the alternate year by the Central Council should be there, sothat the institution works properly.

The Central Council should lay down the pay scales and allowances of the teaching staff, so that the staff would be qualified and proper education is given in the institution.

SHRI MAN SINGH VARMA: For this purpose do you want some clause to be included?

WITNESS: If it can be included, it would be very nice, because everything should be done properly.

DR. JUGAL KISHORE: It is the function of the Council to lay down standards.

SHRI N. SREEKANTAN NAIR: Do you have a cardiogram and other appliances?

WITNESS: We have got no cardiogram facilities. Even for X-ray we send them to the radiological department of the SMS hospital.

SHRIMATI PURABI MUKHOPA-DHYAY: From what malady is homoeopathy suffering in your State? Homoeopathy seems to be suffering from some disease in your State. What kind of disease is it?

WITNESS: The problem is this-Everybody fights for his existence and qualified persons are suppressed. The Board is working for the last three years. Persons who are qualified and who are diploma-holders are not given registration up till now. Quacks and even my two compounders have got registration from this Board. I cannot apply for registration even. They have not got the form. How is it possible to tolerate such things? My compounders are given certificates and I am not given that.

SHRIMATI PURABI MUKHOPA-DHYAY: Dr. Jugal Kishore, it is a serious charge against your Ministry also. If this is allowed to continue in Rajasthan, there will be no homoeopathy there. Even institutionally educated people are not getting registration. DR. JUGAL KISHORE: I think the Board has laid down certain diplomas as qualification for registration and I do not know what happened later on.

SHRIMATI PURABI MUKHOPA-DHYAY: We assure you that we will take it up with your State Government.

DR. JUGAL KISHORE: Are the diplomas recognised by the Board? Is your degree or diploma included in it or not?

WITNESS: The Board has recognised 32 diplomas and in that list there were so many bogus institutions.

DR. JUGAL KISHORE: Is your diploma recognised or not?

WITNESS: That recognition is not in practice there. They have not been passed by the Government still.

SHRI JANAKI BALLAV PATNAIK: But your compounders have got the diplomas.

WITNESS: On the basis of three years' practice they have got certificates. It is attested by two gazetted officers and they got themselves registered.

DR. JUGAL KISHORE: One thing I want to get cleared. I understand they have recognised the diplomas, but according to the information given by my SRO, they have not applied for registration.

WITNESS: It is not the case.

SHRI K. RAMAKRISHNA REDDY: Dr. Banerji said that unqualified people have gone on the Board and they are rejecting the qualified people.

DR. JUGAL KISHORE: I have seen that they have recognised the diplomas, but later on they do not give registration. Did you apply for registration?

WITNESS: I applied for registration. The Registrar says that applications have been called for only from those who are practising for the last three years and not from the qualified per-' sons. They have not prescribed the form. SHRIMATI PURABI MUKHOPA-DHYAY: The Act only says on the basis of experience.

SHRI N. SREEKANTAN NAIR: Have they put in their rules that only those persons who have put in more than three years' practice on such and such date will be eligible?

WITNESS: Yes.

DR. JUGAL KISHORE: I think it happened like this. They have not been able to finalise the rules regarding the various diplomas. They have accepted that these will be the 32 diplomas they will be accepting for registration. In the meanwhile they accepted registration of people on the basis of experience. Possibly this was in that process. By that time the Board has become defunct.

WITNESS: The Board is working, but most of the members have tendered their resignation. The Board is still there.

SHRIMATI PURABI MUKHOPA-DHYAY: We will write the Report, we should get it done. CHAIRMAN: About certain associations and these $Board_S$ we have toseriously take up with them and our findings must be told to them.

WITNESS: The suggestion is that at least 50 per cent of qualified persons should be nominated to the Board.

SHRIMATI PURABI MUKHOPA-DHYAY: Even in Delbi, institutionally qualified people are against it.

WITNESS: Along with experienced persons, qualified persons should also be given priority for registration.

SHRI N. SREEKANTAN NAIR: You do not teach psychiatry and other branches of medicine?

WITNESS: Yes, Sir.

CHAIRMAN: We are very glad that you have given very good and constructive suggestions. We will bear them in mind. Thank you very much.

The witness then withdraw.

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Thursday, the 11th January, 1973. PRESENT

1. Shrimati Purabi Mukhopadhayay-Chairman

MEMBERS	13. Shri Hiralal Doda
Rajya Sabha	14. Shri Nageshwar Dwivedi
	15. Sbri Pampan Gowda
· 2. Shri Sasankasekhar Sanyal	16. Shri Madhuryya Haldar
3. Dr. K. Nagappa Alva	17. Shri Chiranjib Jha
4. Dr. Debiprasad Chattopadhyaya	18. Shri Popatlal M. Joshi
5. Shri Man Singh Varma	19. Shri T. S. Lakshmanan
6. Shri K. C. Panda	20. Shri Presannbhai Mehta
7. Shri Manubhai Shah	21. Shri N. Sreekantan Nair
8 Shri Sultan Singh	22. Dr. Laxminarayan Pend eya
9. Shri T. G. Deshmukh	23. Shri Janaki Vallav Patnaik
Lok Sabha	24. Shri S. L. Peje
10. Shri Vidya Dhar Bajpai	25. Shri K. Ramakrishna Reddy
11. Shri Muhammed Khuda Bukhsh	26. Dr. Sankata Prasad
12. Shri A. M. Chellachami	27. Shri Awdhesh Chandra Singh

REPRESENTATIVES OF THE MINISTRIES

Ministry of Law and Justice.

Shri P. L. Gupta, Additional Legislative Counsel Shrimati V. S. Rama Devi, Deputy Legislative Counsel

Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy Dr. D. P. Rastogi, Senior Research Officer

SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary

Shri M. K. Jain Under Secretary

WITNESSES

1. Dr. Yudhvir Singh, Delhi

2. Dr. K. K. Bajpai, Registrar, U.P. Homoeopathic Medicine Board, Lucknow

3. Representatives of the U.P. Homoeopathic Medical Association, Kanpur:-

(1) Dr. Jagdish Chandra Nigam

(2) Dr. Prakash Chandra Srivastava, Secretary

4. Dr. Radha Krishna, Se Sunder Nagar (H.P.).	cretary, AIHMA, -	Himachal]	Pradesh B	anch.
5. Dr. B. N. Paul, Secret	ary, Aligarh Homeo	Academy, A	ligarh.	
6. Dr. S. S. Raza, Aligarh		e in Arrien		54 J
7. Dr. B. B. Shukla, Chie Hospital, Luknow.	f Medical Officer, M	loti Lal Neh	ru Homoeo	Pathic
8. Representatives of the Practitioners Association	Mysore Pradesh Reg on Bangalore:	istered Home	eopathic M	edical
	President		:	•
(1) Dr. A. N. Ratnam				
(1) Dr. A. N. Ratnam (2) Dr. R. Gopinath, (3) Dr. R. Vittobai, Vi	Secretary		: •	

Singh) [The Witness (Dr. Yadhvir was called in.] परिचय दे सभापति : धव साप मपना द्वीजिए ।

1920 क्षे होम्योपैथिक प्रेक्टिस करता हूं ग्रौर मेरा साक्षी: मैं यहां पर, दिल्ली में नाम युद्धवीर सिंह है । क्षो लक्ष्मीनारायज पाण्डेय : इस विधेयक के संबंध में आप के क्या विचार हैं उन को पहले य्राप बताइए ।

ऐक्ट वन गए हैं वहां जो कुवालिफाइड नहीं सकता भ्रौर इस लिए रजिस्टंड लोगों में कोई ऊंच नीचे वहो कौंसिल का मेम्बर हो सकेगा यह नहीं होना <mark>चाहिए ।</mark> यव तो जहां तहां वो**र्ड व** क्वालिफाइड हो वही खड़ा हो सकता है म्रौर हुए डाक्टर में कोई फर्क नहीं रहना चाहिए । का, छुग्राछुत का भाव महीं रहना चाहिए । मुझे कहनी है रजिस्टर हो उसमें ग्रीर किसी डिग्री पाए जो इस में रखा गया कि जो इंस्टीट्यूशनली उन के बीच कोई भेटभाव नहीं बर्तना चाहिए । है वह तो मेम्बर हो ही नहीं बह यह है कि जब एक स्नादमी साक्षो : पहली वात जो यह मेरी पहली ग्रजं है। जाता हे तो

है कि उन झपड़ों को एशयह करने के लिए चेयरमैन को भामिनेट कर दे तो यह तमाम झगड़े नहीं होंगे । और इस लिए मेरी झर्ज था तो हम ने दिल्ली का ऐक्ट वनाया था <mark>ग्रौ</mark>र उस ऐक्ट में तजुर्वा यह हुम्रा कि ऐलेक्शन ग्रगर गवनैमेंट एलेक्शन जो धाप ने रखा है उस में मैं ने देखा है श्रौर मेरा यह तजुर्बा है कि उसमें झगड़े दूगरी बात यह है कि चेयरमैन का वहुत होते हैं। जब मैं दिल्ली में हेल्थ मिनिस्टर को नामिनेटेड होना चाहिए । में वड़ी गड़वड़ी होती है। चेयरमैन

चाहिए को वह मरीजों को दवाइयां दे सकें परपज के लिए मुफ्त दवाइयां बाटते हैं भौर सोगों से दवाई के लिए या सलाह के लिए कोई फीस नहीं लेते । ऐसे लोगों को इजाजत होनी हो <mark>आना चा</mark>हिए, लेकिन कुछ लोग <mark>च</mark>ैरिटेबिल तीसरी चीज यह हैकि जो लोग रजिस्टडं नहीं हैं उन के लिए तो प्रेक्टिस करना बैन प्रौर उन पर कोई बैन नहीं होना चाहिए ।

कि दिल्ली के ऐक्ट में जिस तरह का प्राविजन है उसी तरह का प्राविजन इस विल में भी के लिए या ऐसे इंस्टीट्यूशन्स के लिए इस विल में कोई प्रा-विजन मही है। उन के लिए मैं ग्रजे कल्गा ऐसे हैं कि जो डिप्रियां या डिप्लोमा वेचते हैं एक यर्ज यह है कि ग्रभी भी कुछ कालेजेज बूठमूठ के । ऐसे लोगों रहना चाहिए ।

न) क मैं यह क्या उसे मौका मिलना चाहिए ग्रौर क्या ऐसे को रजिस्टर करने की जरूरत है या जानना चाहता हूं कि क्या चीरटीबिल परपज े के लिए ग्रगर कोई दवाई बांटता •• भी लक्ष्मीनारायण पांडेय नहीं ? मोगी

्रम् क्रगर चीरटोबिल डिस्पॅसरी कोई चला रहा है बौर मुफ्त दबा दे रहा है तो उस को रजिस्टर को डाक्टर कहने लगेंगे ग्रोर प्रेक्टिस कर सकते हैं, लेकिन साक्षी : धनार ऐसे लोग रजिस्टर होने की जरूरत नहीं होनी चाहिए । ग्रपनी **तो वे** ग्रपने वे तो

<mark>अी पंपन गौडा</mark> : दिल्ली के ऐक्ट में

प्राविजन क्या है?

साकी : उस में यह प्राविजन है कि कोई डिप्री वेच नहीं सकता ग्रीर ऐसी बोगस डिप्री कं'लंट पर

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रजिस्ट्रार वोर्ड

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जा सकता

वैचने वालों को प्रापिक्यूट किया

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पुलिस उस के फिलाफ एक्शन ले सकती है।

भी मनुमाई शाह : इस प्राविजन की एक कापी ग्राप दे सकेंगे ?

साक्षी: दिल्ली का ऐक्ट है ग्राप रजि-स्ट्रार से मंगवा लीजिए ।

भो मान सिंह वर्मा: ग्राप ने वताया कि चेयरमैन नामिनेटेड होना चाहिए । तो · ग्राप के कहने का मतलव यह है कि वाकी के भ्राफिस वेयरसंका चुनाव हो सकता है ?

साक्षी : जी हां, ग्रीर उन इलेक्टेड लोगों में से गवर्नमेंट किसी को चैयरमैन नामिनेट कर दें ।

श्री लक्ष्मी नारायण पांडे : क्या चेयर-मैन को नामिनेट करना ग्रनडेमोकेटिक नहीं होगा ?

साली : यह ग्रनडेमोकेटिक तो है, लेकिन यह एक टेकनिकल चीज है। हर जगह डेमोकेसी नहीं चल सकती ! होम्यो-पंथी की भलाई के लिए ग्रौर मापस में झगड़े न हों इस के लिए ग्रीर काम ग्रच्छी तरह से चले इस के लिए भी चेयरमैन को नामिनेटेड ही होना चाहिए ।

श्री मान सिंह बर्माः इस में ग्राधी डेमो-केसी तो ग्रा ही जाती है क्योंकि मेम्बर्स तो इलेक्टेड होंगे ।

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साक्षी: जी हां।

SHRI JANAKI BALLAV PATNAIK: In your reply, you have said that professional practice should be banned. What do you mean by that?

WITNESS: The professional practice should be banned for those who practise homoeopathy for earning their livlihood. It should not be banned for those who practise homoeopathy for charitable purposes.

SHRI MANUBHAI SHAH: In his opinion, it is better that the Chairman is nominated out of the elected Members. Otherwise, you will have all sorts of lobbles. Even in democratic countries, the Chairman is nominated by the party. It is not necessary that the Council should elect its Chairman. In this way, there will be no reduction in democracy.

(The witness then withdrew)

[The Witnesses (Shri K. K. Bajpaie, Dr. N. P. Singh and Dr. K. P. Trivedi) were called in.]

CHARMAN: You can make your comments and observations on the Bill. It may be mentioned that the proceedings of this Committee are confidential and nothing should be disclosed to anybody outside.

थी के॰ के॰ वाजपेयी : प्रेजेन्ट विल में होम्योपैथी की एजुकेशन की रिकागनिशन के लिए जो प्राविजन बनाया गया है, उसमें इस बात का प्राविजन नहीं है कि यहां एक ही प्रकार की स्टंडर्ड शिक्षा दी जाए । हर स्टेट में अलग-मलग इयूरेशन के कोसज हैं मोर मलग-मलग सिलेबस प्रेस्काइव्ड है । एक समान की शिक्षा दी जा सके, इस प्रकार का कोई प्राविजन इसके मन्दर नहीं है । मेरा सुझाव है कि इस विल में ऐसी धारा लगाई जाय जिसके ग्रन्सर्गत में एक्जामिनिंग बाडी हो जो एक युनिफार्म सिलेवस के ग्राधार पर एक यूनिफाम करिकुलम तैयार करने के लिए सब्जेक्ट इत्यादि निर्धारित करे । जैसे एम० बी० बी० एस० में एक ही कोर्स है, उसी प्रकार होम्मोपैथी के लिए भी समानान्तर एक ही कोर्स होना चाहिए । क्योंकि वर्त-मान समय में कहीं पर दो साल, कहीं पर चार साल का डिप्लोमा कोर्स है मौर कहीं पर यूनिवर्सिटी से डिग्री देने का प्रावधान किया गया है । ये सभी डिग्री श्रथवा डिप्लोमा को समान रुप से रजिस्ट्रेशन के लिए योग्यता के झाधार माने गये हैं । दो साल वाले को भी ग्रीर चारसाल या पांच साल वाले डिप्लोमा प्रथवा डिग्री प्राप्त करने वाले को भी रजिस्टर किया जाता है । मेरा सुझाव है कि जो कोर्स रजिस्ट्रेगन का माधार हो, वह एक ही रखा जाए ।

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डा॰ सक्मोनारायण पांख्ये : वह कोसं चाहे दो साल का हो, चाहे ती न साल का हो, समान रूप से सब जगह लागू हो सके, इसके इसके लिए ग्राप कितनी ग्रवधि ठीक समझते हे ?

श्री के॰ के॰ वाजपेयी : च।र साल का डिप्लोमा कोर्स हो वह ग्रगर रखा जाए तो ठीक रहेगा। उसके लिए बेसिक क्वालि-फिकेशन हाई स्कूल के वजाय ग्रगर इंटर-मोडिएट रखा जाए तो वे होम्योपैयी में योग्यता प्राप्त करने के लिए ठीक है।

चार साल के कोर्स को डिग्री क्यों नहीं कहने डिप्लोमा के बजाए ?

श्वो के॰ के॰ बाजपेयो : चाहे डिग्री कहे चाहे डिप्लोमा कहें, चार साल के डिप्लोमा की शिक्षा के लिए इंटरमीडिएट सांडस के साथ लड़कों को ग्रगर उसमें लिया जाए तो वह रि.वजिट क्वालिफिकेंशन पा लेगा । हाई स्कूल के लड़के इस प्रकार के नहीं मिलते हैं कि उसको वह फोलो कर सकें । पहले उन्हें ग्रंग्रेजी पढ़ाई जाए ग्रीर फिर उसको ऐक्सप्लेन किया जाए । इसलिए इंटर-मीडिएट होना चाहिए ।

- डा॰ लक्मीनरायण पाण्डेय : डिप्लोमा दो, तीन या चार साल का रहे श्रौर डिग्री भी रहे तो क्या हर्ज है ?

श्वी के॰ के॰ वाजपेयी : मैं तो यह कह रहा रहा हूं कि एक ही कोसं होना चाहिए । जो प्रेजेंट पोजीशन है उसको बगैर खत्म किए टुए भी यह सेंट्रल यूनिट एक कोसं कर दे । ग्राज तो उसमें दो साल, तीन साल ग्रीर पांच साल वाले भी रजिस्टर होते हैं।

SHRI JANAKI BALLAV PATNAIK: Who is responsible for this distinction existing in U. P. between degree and diploma? I think that a University alone can give a degree and a_n institution can give only diploma. Your Medical Board is entitled to give only diploma and not degree. SHRI K. K. BAJPAI: There is a provision in the U. P. Homocopathic Act that the Board can award a degree also. Therefore, the Board is competent enough to award a degree I am sure about it. Previously, there was also a degree course. But the number of students in the degree course was less because there was no allurement for the degree holders. We have not given suitable scales of pay for the Homoeopaths.

साक्षी (श्री के० के० वाजपेया) : जो भी वच्चे या स्टूडेन्ट्स गार्जियन लोग भेजते हैं पढाने के लिए, उनके फ्यूचर प्राम्पेक्टस को देख कर भेजते हैं । हमारे पास कोई फ्यूचर प्रास्पेक्ट नहीं है जिसकी वजह से हम एम० वी० वी० एस० की तरह मे लड़कों को एट्रैक्ट कर सकें । हमारे यहां स्टेट गवर्न-मेंट ने 120-260 रु॰ कास्केल दिया है जो कि एक लोग्रर डिविजन क्लर्क से कम होता है। क्या एल्योरमेंट है। कोई एक बड़ा -स्राफिसर या काई जज म्रपने लड़के को क्या होमियोपेथी का डाक्टर बनाए ? ग्रन्लेस वी गिव दैम ए शफिशियेन्ट एन्ड सूटेवल स्केल, जब तक उनको एल्योरमेंट नहीं होगा क्यों चार-पांच साल का डिग्री कोर्स पढ़ाने के लिए भेजेंगे ?

श्री जानकी वल्लभ पटनायक : यह तो डिप्लोमा में भी हो सकता है । डिम्लोमा भी एटुक्टिव हो सकता है —

if there are sufficient avenues for him.

साक्षी : डिप्लोमा में, रीजन उसका यह है, हाई स्कूल बेसिक क्वालिफिकेगन रखी गई है । हाई स्कूल करने के बाद कोई सर्विस ग्रामानी से मिलती नहीं, कोई टेकनिकल ट्रेनिंग का एवेन्यू नहीं है । लिहाजा जिनकी सिर्फ हाई स्कूल बेसिक क्यालिफिकेगन है, तो गाजियन यह सोचता है कि चलो हाई-स्कूल के बाद चौथे दर्जे का कर्मचारी बनाने की बजाए डाक्टर बनने दो ।

श्री जानकी वल्लम पटनायक : डिग्री के लिए क्या वैसिक क्वालिफिकेशन है ?

साक्षी : वहां इंटरमीडिएट वायलोजी ग्रूप, साइन्स था। हमारे यहां करोब 3,500 स्टूडेन्ट्स हैं। हमारी मेन प्रावलम यह है कि बहां पर कानपुर युनिवसिटी से भी ग्रफि-लियेटिड हैं। लखनऊ वालों में फ़स्ट्रशन है कि हम छोटे डाक्टर हैं चार साल वाले, पांच साल बाले, यूनिर्वासटी वा ने, बड़े डाक्टर बन जा रेंगे । इसी बात को लेकर वहां हड़ताल हुई, यहां तक हुम्रा कि ग्राग लगा दी गई हाऊस में, एक बहुत वुरा सोन किएट कर दिया । उन लोगों के मन में फस्ट्रेशन है, वे समझते हैं बोर्ड में चैयरमैन ग्रोर रजिस्ट्रार मिल कर हमको छोटा डाक्टर बनाना चाहते ₹, डिग्री **वाला** डाक्टर नहीं वनने दे रहे हैं।

Therefore, there must be provision for one standard course of study whether it is diploma or degree.

डा० लक्ष्मोतःरायण पाण्डेय : वर्तमान में ग्रापकी कानपुर युनिवर्सिटी में फैकल्टी ग्राफ होमियोपैथी है ? वह डिप्लोमा है या डिग्री कोर्स है ?

साक्षी : युनिवर्सिटी में जो चला रखा है उसकी ग्रजीव हालत है। यू०जी०सी० ने ग्रभी तक उसको मान्यता नहीं दी भौर वह सिर्फ गवर्नमेंट चानू कर सकती है । हम प्राइवेट कालेज से उसको रन करना चाहें तो नहीं कर सकते । उसका रीजन यह है कि युनिवसिटी एक सर्टनसम ग्रौर स्टैन्डर्ड डिमाण्ड करती है। हमारे पास फंड्स है नहीं। गवर्नमेंट बिना यू०जी०सी० के ही रन कर सकती है श्रौर वह उसे रन कर रही है। बहां की फैकल्टी भी गवर्नमेंट टीचर्स की फैकल्टी है, रियल फैकल्टी नहीं है। ग्रपने को संतोष देने के लिए उन्होंने कानपुर युनि-वर्सिटी भी बना रखी है लेकिन एक्चुग्रली वह परपज सर्व नहीं होता । आप लोगों से यह ग्रनुरोध है कि यह जो बिल बना रहे हैं इसमें ग्रगर क्लाज थोड़ा सा जोड़ दें कि यह जो कमटी वनेगी सेन्टर की वह एक हिग्री ग्रवार्ड करेगी और उसका करिकूलम

ले डाउन करेगी और उन्हीं को ग्रलाउ कर दें जो सटेंन कंडिशन्स फुलपिल करते हैं। हमारे यहां 3500 लड़के हैं ग्रौर 16 कालिज रन कर रहे हैं।

SHRI JANAKI BALLAV PATNAIK: I can follow the answer. The Homoeopathic Board of Medicine, Uttar Pradesh, is constituted by the Government. When the Government is there and the Government is giving grants to the private colleges, why cannot the private colleges run on the same basis?

SHRI K. K. BAJPAI: The Government is giving very meagre grants------Rs. 3,000 or Rs. 4,000.

SHRI JANAKI BALLAV PATNAIK: You are on the Board.

SHRI K. K. BAJPAI: I. am on the Board but I am not in the Government. You should set a standard for private colleges. Whatever grants are decided by the Director of Medical Services, U. P.

SHRI JANAKI BALLAV PATNAIK: Is he a member of the Board?

SHRI K. K. BAJPAI: No; the Board is an autonomous body.

SHRI JANAKI BALLAV PATNAIK: On the Board there should be sufficient representation from the Government side also.

भी लक्ष्मीनारायण पाण्डेय : यू० पी० में जो डाइरेक्टर प्राफ हेल्य सर्विसेज हैं वह क्या एलोपेथी के लिए ग्रलग हैं, ग्रायू-वेंद के लिए ग्रलग हैं। क्या सब के लिए एक ही हेल्य सविस डाइरेक्टोरेट है?

साक्षी : हमारे यहां डाइरेक्टर झाफ मेडिकल हेल्थ तथा ग्रायुर्वेद का ग्रलग-ग्रलग है । रीसेन्ट्ली, डिपुटी डायरेक्टर भाफ होमि-ं योपेथी ग्रपाइन्ट हुग्रा है लेकिन उसको भी ग्रपनी इंडिपेन्डेट व्यू सबमिट करने का हक नहीं है ।

भी कै॰ सी॰ पण्डा : क्या माप यह सोच रहे हैं कि एक सेपरेट डाइकरेक्टर होना चाहिए ?

साक्षो : ग्रौफ कोर्स । मैं एक बात श्रीर कहूंगा जो मेडिकल कौंसिल है उसकी नकल तो जरूर करनी चाहिए लेकिन उसमें थोड़ा सुधार करने की भी जरूरत है। मेडिकल कोंसिल की वर्किंग सैकड़ों वर्ष से चली आ रही है जबकि ¦हम एक नयी चीज बना रहे हैं, हम उसकी लेबल पर होमियोपैयी को मान्यता देने जा रहे हैं। हमको उसकी ट्रू कापी नहीं करनी चाहिए, हमको कुछ एडी-भ्रन्स करने पड़ेंगे **भ्रौर होमियोपैयी के करि-**कुलम का स्टेन्डर्डाइजेशन करने के लिए एक एग्जामिनिंग बाडी वनाना जरूरी है जिससे एक स्टॅन्डबं कोर्स हर स्टेट में 1 चले; संन्टर उनको गाइड लाइन दे सके।, सिर्फ रजिस्ट्रेशन कर देने से ही स्टैन्डर्ड नहीं बन जाएगा ।

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श्री टी॰ जी॰ देशमुख : ग्रभी आपने बतलाया कि डिपुटी डाइरेक्टर के व्ह यूज को गवनंमेंट ने ग्रलाऊ नहीं किया । श्रापने एक कहानी बताई डिपुटी डायरेक्टर की । ग्रापने कहा कि उन्होंने यह बोला कि गवर्नमेंट ने मेरे व्ह यू को ग्रलाव नहीं किया ।

साक्षी: नहीं गवर्नमेंट ने नहीं। उनका यह कहना है कि :

- I have to submit my views in consultation with the Director.

उनके कुछ फन्डामेन्टलं पीइन्ट्स हैं जिसमें डाइरेक्टर एग्री नहीं करते । तो जब हमारे व्हयूज से सहमत नहीं हैं तो हमारे जाने से क्या फायदा है ।

DR. K. NAGAPPA ALVA: Doctor, you are the Registrar of the Board. We are very happy that a Registrar has come to give his opinion here. You also belong to the biggest State in India.

SHRI K. K. BAJPAI: Of course, Sir.

DR. K. NAGAPPA ALVA: And the position of the Registrar of the Board is not only important but also responsible.

SHRI K. K. BAJPAI: Yes, Sir.

DR. K. NAGAPPA ALVA: The idea behind the formation of a Central Council is to build up medical education, its standardisation in practice and quality. Because you show so much of enthusiasm and you speak with authority also, Members would like to know from you certain things. I will put certain questions.

There are diploma and degree holders, that is, institutionally trained people in the Register and then there are fully registered people. Then they are called enlisted members. I would like to know how many of the dilicrent categories-diploma and degree holders, fully registered and enlisted members-are there. We would also like to know as to how many homoeopathic medical associations are there-Why I am asking this question is, a number of associations have tried to influence the Boards and at certain times the Government also, when the very idea of the enactment is to put down quackery and bogus membership. What are your suggestions regarding these things? How to put down quackery? How to put down ruthlessly this bogus membership and avoid bringing in local politics and things like that. Then, the other question I would like to put to you is, how many Government colleges are there and how many private colleges are there? What are the conditions laid down to affiliate these colleges? Then, as you know, we have got the University and the UGC. Then the Directorate is there. Now I would like to elucidate further information from you about the way the Directorate has been functioning there and how the Government has been doing for the last few years to encourage this system of medicine and to have the people who are really deserving to be Homoeopathy practitioners, who have faith in that.

The last question is: How could the University and the UGC be useful in laying down uniform standards, what should be the part of the University and the UGC? Our idea also is to have uniform standards but to straightaway do it would be a difficult task because there are schools, colleges and then we must also have post-graduate courses.

WITNESS: So far as the question of stopping quackery is concerned. I may state that in my State the Homoeopathic Medicine Act was enforced in 1952 and the clause for registering the persons on the basis of length of practice was enforceable upto 1958-Since then, we are not registering any persons who have no educational qualifications. We simply register only those doctors who are duly qualified from the recognised Homoeopathic Medical colleges. So, the question or stopping quackery in the same way be possible in other States will also if they introduce such a Bill in their States. As soon as an respective enactment is legislated, the practice by unregistered and unqualified persons would be checked. So far as my State is concerned, there is no provision for registering unqualified persons.

Regarding the question of certain diploma and degree courses, prior to enforcement of this Act, I remember there had been an Enquiry Committee set up known as 'Dave Committee' by the Government of India. That Dave Committee visited almost all the States. They invited suggestions from various associations, colleges, boards and the State Governments. After doing all this base work, they collected the necessary data. On the basis of this data they have recommended certain degrees and the names of institutions, for example at Calcutta they have given certain names of the institutions. In this way we have also collected data and we have made a list of recognised degrees based on the recommendations of the Dave Committee. Therefore, we have recognised only those degrees where students are taught a regular course, particularly laid down by a State Board or by a Government or certain State Associations. Other degrees are not being recognised by our Board.

So far as the question of two-year, three-year or four-year diploma is concerned, prior to certain Acts that were prevailing in the State, on the basis of the Dave Committee those courses were recognised. That is why I am suggesting that now the time has come when the Government of India is thinking to introduce a Bill for the development of Homoeopathic science, to introduce a uniform standard course beyond which no institution can run any other course than the one laid down by the Govern-That is why I am ment of India. suggesting this thing.

SHRI MAN SINGH VARMA: But I think it would be the function of the Council.

WITNESS: There must be a provision for an examining body also so that we may also lay down a certain standard for examining.

श्वी मान सिंह वर्माः हम जो कौंसिल वना रहे हैं उस का यह फंक्शन होगा कि सारे देश में एक ही प्रकार का कैरीकुलम हो, एक ही कोर्स हो, ग्रीर स्टैंडर्ड ठीक रहे।

WITNESS: Of course, that will be the work of the Councils.

DR. K. NAGAPPA ALVA: My other questions are: How many private colleges and government colleges are there, what is the position of those colleges and how are these colleges affiliated?

WITNESS: In my State there is only one Government College situated at Cantonment Road in Lucknow. That too was taken over by the Government in 1968. Previously it was a private institution.

Then there are 13 private institutions. Out of them seven are affiliated and six are permitted by the Board. At first, we give them permission to start one-year course to see whether the management is in a position to run the institution on sound lines. Then we give them certain conditions to be fulfilled. Only after the compliance of those conditions, the question of affiliation is taken up by the Board; otherwise not. So far as the conditions, these are the standard ones for all the colsubmitted also a leges. We have draft rule for consideration of the Government to control the management of these colleges. The reason is that these managements initially have very good ideas and they show great love for the Homoeopathic science but afterwards they some of them have tried to make the fees of students a source of profit. If I stop that, I am the eye-sore of the management. I am one of the sufferers of this trouble. When I say why you are eating away the money, they feel it ill. I should like to point out here that a year before last I requested my State Minister to visit a particular college of the Kanpur. I showed him how an amount of Rs. 20,000/was given to a business firm by the manager and the Minister was satisfied about the same. After that when we came back, the political pressure was there. We-I mean the Boardwere put in an embarrassing position. We decided not to permit them for admitting students any more in future. But there is a stay order from the Government and the Gov-Yes, you can admit ernment says: students. At this place, technical board nothing, the Government is everything.

SHRI K. K. BAJPAIE: When our Chairman who is an MLA and Mr. Ravindra Varma, MLC and General Secretary of the UPCC said to the Minister, "You have spoiled our position", he said, "It is political pressure; I am not able to do anything". If there is a Central body like the Homoeopathic Council, local political pressures will not spoil our science, and the institutions formed for the benefit of the students the development of this science will work as we desire them to work. Therefore, I am suggesting that there must be Central control over the syllabus and standard of education in every institution.

SHRI K. C. PANDA: You have pleaded for degree colleges and all that.

SHRI K. K. BAJPAIE: I have not pleaded for degree colleges.

SHRI K. C. PANDA: What is your suggestion to convert the diplomaholders into degree-holders?

SHRI K. K. BAJPAIE: We may have a condensed course.

SHRI K. C. PANDA: But you have said that only matriculates are being taken for the diploma course.

SHRI K. K. BAJPAIE.: But when we talk of a condensed course, there may be a provision for teaching science as well as homoeopathic subjects. If we introduce a shorter course, then we can make them degree-holders. Otherwise, it is not necessary. Let them be registered only.

SHRI S. L. PEJE: Generally degrees are not awarded by holding condensed courses. It will be a fullfledged course. You want to award a degree by holding a condensed course. This is something strange.

SHRI K, K. BAJPAIE: The reason for that is our students who are diploma-holders are pressing every day that they should also be given the degree.

SHRI S. L. PEJE: The demand may be there, but it should be a fullfledged degree.

CHAIRMAN: I think he has made his position clear. Thank you, Mr. Bachan.

(The witnesses then withdrew)

(Shri Manubhai Shah in the Chair)

[The Witnesses (Dr. Prakash Chandra Srivastava and Dr. Jagdish Chandra Nigam) were called in.]

CHAIRMAN: Dr. Nigam, will you please introduce yourself?

DR. JAGDISH CHANDRA NIGAM: I belong to Kanpur. I passed my B.M.S. from the National Homeopathic College, Lucknow in 1957, and afterwards, I passed my diploma course from the Royal Homoeopathic College, London. Thereafter I started my practice in Kanpur.

CHAIRMAN: I may tell you that the proceedings of this Committee are confidential and it should not go out. Now you can give your comments on the Bill. Then the Members will put questions to seek clarifications.

DR. JAGDISH CHANDRA NIGAM: We have already commented UDOD the Bill. That is on behalf of the UP Homoeopathy Medical Association. I believe that if homocpathy is to be practised in a proper way in our country, then proper courses should be applied and proper training should be given. Then this system will definitely benefit the poor masses of this country and the incidence of disease will certainly come down at least by one-tenth. is science is not reaching the rural areas. If proper propaganda is done, if proper facilities are offered to this system, then definitely we can make the people very good in health. Homoeopathy should have an upper hand in the rural areas.

श्री मान सिंह वर्माः सरकारी क्षेत्र में होमियोपेयी का प्रचार ग्रधिक हो इसके जिए ग्रापका क्या सुझाव है ?

साक्षी : मैंने एक छोटी सी भपनी स्कीम रेस्पेक्टेड डा॰ जुगल किशोर के पास भेजी है, वह शायद ग्राप लोगों के पास ग्रा गई हो । एक पूरी थीसिस बना भर हमने भेजी थी ग्रोर उसमें हमने दिखाया है कि जो खर्चा गवर्न मेंट ग्रपनी हेल्थ स्कीम पर करती है उसका खर्च ही नहीं बच जाता है बल्कि 3,270 रुपये का लाभ होमियोपैथी के जरिए से ट्रैजरी को होगा । मैं चाहूंगा उस स्कीम पर विचार किया जाए, वह बहुत ग्रच्छी स्कीम है ग्रोर उससे मेडिकल साइन्स को भी लाभ होगा ग्रीर हमारी गरीव जनता का भी लाभ होगा । मैं उसमें से थोड़ा सा एक रेफरेन्स वता दूं कि सपोज कीजिए 1000 फेमिली का कस्वा है, उसके ग्रन्दर एक होमियोपैथी बैठा दिया जाए तो 1000 फेमिली का उसके पास डे-टु-डे डाटा होगा— क्या बीमारियां हैं क्या केस हिस्ट्री है— उसका प्रापर ग्ररेन्जमेन्ट है । ग्रगर कोई केस ख़राव होते हैं या ज्यादा आनिक केस हो जाते हैं तो हम उनको तहसील स्टेब में रेफर कर सकते हैं.....

श्री मान सिंह वर्मा : वह तो डा॰ साहब, श्रापकी बात मुनासिव है कि ग्रापने ग्रपनी स्कीम डाक्टर साहव को दे दी है--वी ग्रैल फोन्डर ग्रोवर इट । लेकिन ग्रभी तो सरकार की तरफ से नेगनल हेल्य स्कीम चल रही है, श्रापने सुना होगा, ग्रोर सरकार भी इस बात का प्रयत्न कर रही है कि जितने भी हमारे होमियोपेथ्स हैं ग्रोर वैद्य हैं, डाक्टर्स हैं, उनको भी काम मिले ग्रोर ग्रामीण क्षेत के लोगों को मेडिकल एड मिले । उसके लिए कोशिश कर रहे हैं.....

साकी : उसमें ग्रगर ग्राप इजाजा दें तो मैं कहूं पहले एक जगह पर कीजिए सपोज कीजिए एक तहसील है । उसमें ग्रगर कई सिस्टम के डाक्टसं एक ही कटघरे में बैठा दिए जाए तो ग्रापको कभी पता नहीं लग पाएगा कि कौन से मेडिकल साइन्स के जरिए कैसा रिजल्ट ग्रा रहा है ।

श्री माम सिंह वर्मा: ग्रभी गवर्नमेंट के पास इतने साधन नहीं हैं।

साक्षी : माप एक करने में एक-एक किस्म के डाक्टर रखें जो कि क्योरिटिव्ह भौर प्रिवेन्टिव्ह मेडिसिन में ढील करें क्योंकि होमियोपैथी में क्योरिटिव्ह भौर प्रिवेन्टिव्ह . मेडिसिन्स हैं ग्रौर जनरल कॉस्टिट्यूसन पर बेस करती है । तो ग्रगर ग्राप एक करबे में कर देंगे तो उससे स्टेटिस्टिक्स भी पता चलेंगे झौर यह मालूम हो जाएगा कि कीन से साइन्स से ग्रापको ज्यादा लाभ होता है ग्रीर किस तरीके से, किस स्टेज पर, किस साइन्स को ग्रपर हैन्ड मिलना चाहिए ।

श्वी मान सिंह वर्मा : मापने यह विल तो देख लिथा होगा। इस िल के संबंध में कोई संशोधन के वारे में ग्रापको कहना हो तो कहिए ।

सामी : मुझे होमियो थि। के डेफिनिशन के संबंध में एक मौलिक बात कहनी है । इसमें जो कहा है --- 🛓

"Homoeopathy" means the system of medicine founded by Doctor Samuel Hannemann;

Homoeopathy is the science of threapeutics based upon Nature's Law of cure Simitia Simitiless curantur.

श्री मान सिंह वर्मा: श्रीर भी किसी क्लाज के बारे में ग्रापको कोई सुझाव देने **ह** ?

साकी : ग्रमांमिएशन की तरफ से मैने मुझाव मेज दिए हैं। ज्यादा कहना नहीं है ।

थी चिरंजीव झा : डाक्टर साहूद ग्रापने यह नहीं बताया कि ग्रापकी स्काम से ट्रेगरी को पैसे कैसे मिलेगा।

साकी ; श्रगर श्राप इंग्राजत दें तो में थोड़ा सा उस पैराधाफ को पढ़कर सुना दूं।

CHAIRMAN: No, it is not necessarv.

DR. K. NAGAPPA ALVA: Medical education of standards is necessary to develop the system and to

have practice. You have to have undergraduates, then post-graduate medical education, and then research. Here the difficulty which we are experiencing in all the systems, even in the modern systems of medicine, is getting proper personnel, that is, staff. I would like to know your suggestion as to how we can get the best of persons who have faith in the system and who will be fit for this system. We need good staff for the colleges, for the schools, for the postgraduate education and then also for research.

DR. JAGDISH CHANDRA NIGAM: It is a very long question. It cannot be answered in a minute or two. If you give me a chance I can give you a good approach for it. I have mentioned it in my thesis also. We have our elders like Dr. Jugal Kishore. He has done a lot of research. He has good knowledge. He has got a very good practice in homoeopathy. He can give you a much better approch th**an I can. Even then if** you like to hear my view I may tell you there are in our country not less than a hundred homoeopaths. They can be called and you can have their opinion. They are qualified from institutions as well as from foreign countries and they will give you a definitely good approach. A get-together type of conference of Principals of Homoeopathic Colleges and eminent practitioners should be called to find ways and suggestions.

श्री मान सिंह वर्माः ग्राप के एसोसियेणन की किंतनी बेजेज हैं ?

श्री निगम । 47 affiliated branches.

श्री मान सिंह धर्माः ग्राप के कितने मेंवर्म हैं ?

श्री निगम : कोई 47 डिस्ट्रिग्टम।

भी मान सिंह वर्मा : ग्राप की कितनी स्ट्रेंथ है ?

श्री निगम : हमारी 14,000 की स्ट्रैंब है 🔄

DR. JUGAL KISHORE: Are they affiliated to any Central organization?

DR. JAGDISH CHANDRA NIGAM: Yes, previously they were affiliated to the All-India organisatoion. At present, I cannot say anything.

SHRI K. C. PANDA: Do you enrol members in the organization only after they produce certificates?

DR. JAGDISH CHANDRA NIGAM: We are a registered body and we only enrol registered practitioners. In U.P. there is no diploma or a layman's approach. We have passed a Bill.

SHRI K. C. PANDA: They are all certificate, holders or diploma holders?

DR. JAGDISH CHANDRA NIGAM: Yes. Those also who are registered on length of experience.

SHRI MAN SINGH VARMA: You register on the basis of experience also?

DR. JAGDISH CHANDRA NIGAM: Yes.

CHAIRMAN: Are there no unregistered practitioners?

DR. JAGDISH CHANDRA NIGAM: There is no unregistered homoeopath now.

श्री मान सिंह वर्मा: माथ के वोर्ड के जो रजिस्ट्रार साहब यहां ग्राये थे उन्होंने जो स्थिति बताई उस के ग्रनुसार बोर्ड में ग्रीर गवनं मेंट में कोई को प्राडिनेशन नहीं है । तो क्या ग्राप के एसोसियेशन की तरह से कोई ऐसा प्रयास किया जाता रहा है या किया जाना चाहिए, ऐसा श्राप महसूस करते हैं कि जिस से दोनों में सहयोग बढ़े?

श्ती निगम : दो वर्ष पहले श्रो धर्म दत्त वैध हमारे हेल्य के डिप्टी मिनिस्टर थे ग्रीर उन्होंने हमारी देवरिया की कान्फ्रेस को एड्रेस किया था ग्रीर उस समय हम ने उन के सामने ग्रपनी दिक्कतें रखीं थी तो उन्होंने कहा था कि हम भ्रमी श्राप को एक डिप्टी डायरेक्टर देने जा रहे हैं। इस प्रोसस में कुछ डिफिकल्टीज हो सकती है लेकिन धीरे धीरे इन फ्यूचर यह सारी डिफिकल्टीज खत्म हो जायेंगी। उन्होंने कहा था:

This is just a beginning. It might be that there is some difference of opinion in the practical approach.

श्री पोपट लाल एम॰ जोगी : कोई ग्रादमी ग्रगर दो तीन साल प्रेक्टिस करता है ग्रोर चाहता है कि रजिस्टर हो जाय तो क्या ग्राप उस लेंगे ? ग्रौर ग्राप के यहां कितने लोग हैं जो डिप्लोमा होल्डर हैं ?

श्वी निगम : ग्रव हम केवल डिप्लोमा-होल्डर को ही रजिस्टर करते हैं । 52 के पहले जो हो गया, हो गया, ग्रव ऐसा नहीं है ?

CHAIRMAN: The word 'Graduate' is used. It is not recognized by the UGC, but they call it 'graduate'...

DR. JAGDISH CHANDRA NIGAM: This is my personal knowledge.

DR. JUGAL KISHORE: From 1961 to 1963 the Board of Medicine granted G.H.M.S. (Graduate in Homoeopathy. Medicine and Surgery). The Agra University also has been granting the same degree from 1965 to 1967, and again this course has been started. Similarly, Mysore also. But the question is whether the U.G.C. accepts it. They say that they would not accept it as a degree unless this is approved by us. But some of the Universities, especially the Faculties of Ayurvedio Medicines in different Universities, have been granting degrees without the tacit approval of the U.G.C. Similarly, in U.P. other Boards are also doing this. But the question is whether we should accept any degree unless it is really approved by the U.G.C.

I have had discussions with the U.G.C. Secretary. They say that they cannot accept homoeopathy as a diffe-

rent discipline of medicine. They say there should be a composite faculty in the same University, which includes Anatomy, Physiology, Allopathyic medicines, Ayurvedic medicines, and so on. So far as this question is concerned, we have not really come to any agreement.

DR. JAGDISH CHANDRA NIGAM: There is a Faculty in Kanpur University. It never confers a Degree. The Degree is conferred by the Board.

CHAIRMAN: Unless the U.G.C. recognizes a faculty, no University can do that.

श्वी मान सिंह वर्माः नगवोई के डिग्रे कापर करने को पावर है ? यू० जो० सी० ने उसे मंत्र किया है ?

थो जुगल किशोर : जा नहीं ?

CHAIRMAN: Thank you very much.

(The witnesses then withdrew)

[The Witness (Dr. Radhakrishna) was called in.]

CHAIRMAN: You are welcome. The proceedings of this Committee are confidential. Whatever you say will have to be confidential.

WITNESS: I am Dr. Radhakrishna from Himachal Pradesh. I am the Secretary of the All India Homoeopathic Medical Association, Himachal Pradesh Branch. I am a private practitioner.

थी मान सिंह दर्माः विल के सम्बन्ध में ग्रापको कूळ कहना है ?

साक्षी : ंहम चाहते हैं कि जहां पर डेकनिणन होम्योपयी की दी हुई है, वहां पर इसमें वारोकमिस्ट्री भी ऐड होनी चाहिए ।

श्री मान सिंह वर्माः होम्योपयी वायो-मी को इज्वलुड करती है? साक्षा : इन्कलूड करनी है, फिर भी वहां पर साफ कर दिया जार तो ठीक रहेगा।

श्वी मान सिंह वर्माः कमेटी की ग्रोर से ग्राग्को धन्यवाद है कि ग्रापने यहां ग्राकर ग्रपनी राय देने का कथ्ट किया है। कमेटी - उन पर विचार करेगी।

(The witness then withdrew).

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[The Witnesses (Dr. B. N. Paul, Dr. S. S. Raza and Dr. M. C. Banerjee) were called in.]

CHAIRMAN: Dr. Paul, the proceedings of this Committee are confidential and they should be kept confidential till they are placed on the Table of the House. Now, have you any comments on the Bill?

DR. K. NAGAPPA ALVA: Before that, I would like to know something about their Academy. Is it something like an association?

DR. PAUL: We bring before our Academy the difficult and problem cases and we discuss about their diagnosis and treatment. We also take the very difficult cases left untreated from the medical colleges, we record them and treat them. This way we are keeping the people also educated about homoeopathy. We propose to have a hospital and some clinics.

SHRI MAN SINGH VARMA: Is it a personal affair?

DR. PAUL: No, certainly not, How will it be a personal affair?

SHRI MAN SINGH VARMA: Is it part and parcel of the medical college?

DR. PAUL: No, it is an association of qualified homoeopaths.

SHRI MAN SINGH VARMA: A private association?

DR. PAUL: Yes.

DR. K. NAGAPPA ALVA: We are happy that such an association is there. Have you taken up any research work also?

DR. PAUL: Yes, we are doing it especially in cancer and asthma cases.

DR. K. NAGAPPA ALVA: I would like to suggest to you one more subjuct, allergy.

श्री मानसिंह वर्माः इस विल के प्राविजन के वारे में आ को कोई ब्राट्जेक्शन है ?

DR. RAZA: In the definition of homozopathy, Biochemic system is not included.

CHAIRMAN: That is part of homoeopathy.

DR. RAZA: But it could be mentioned in the Bill.

श्री मान सिंह वर्मा: ग्राप उसको होम्गोपयी का हिस्पा समझते हैं कि नहीं?

डा॰ रज़ाः में तो समझताहूं, लेकिन ब्रडंगा बाजाता है ।

The second suggestion is that homoeopaths who are practising for a long time, though they may not have much of cducational background, should be included in the General Council or Committee. If you put in a clause like this, it will be helpful.

CHAIRMAN: Is there any other point that you wish to make?

DR. RAZA: Personally speaking, some people ask me, "What is the good of surgery in homoeopathy?" I wil explain this point briefly. First of all, what is surgery? Surgery is nothing but "zarrahi", and "zarrahi" has been there in India since a long time. And "zarrahi" is not the monopoly of a vaid or hakim. It is a separate art. Anyone who has got understanding or skill can adopt ... Similarly when a student does his M.B.B.S. he studies surgery also. But all M.B.B.S. students do not become surgeons They mostly become physicians. So much of surgery is taught to everybody, but only a few dare to do surgery. Therefore, my point is, do not say that surgery is away from homoeopathy. It depends on the skill, on the capability of the homeopath. Let us give a chance to them and then ask why surgery is there.

श्वीमान सिंह बर्मा: इस विल ने तो कोई बौन नहीं किया है ? यह नो ग्राप समझते हैं। एक प्रश्न यह है कि ग्राप प्राफेंगन में यूनिटी हो री चाहिए कि नहीं यह बनाइये।

डा॰ रजा : यूनिटी कहा नहीं होनी चाहिए ।

DR. JUGAL KISHORE: For your information, we are of the opinion that there should be a proper surgical department in our colleges also and that surgery and medicine cannot be entirely put in separate compartments. A medical case n become a surgical case within hours. So in any medical college, of this system or that system, facilities for surgery must be there so that if a case become a surgical case, it can be attended to immediately. Regarding the question of unity in the profession, there are so many associations now. Should there be different associations or one association at the national level?

DR. RAZA: One and only one.

DR. JUGAL KISHORE: Are you affiliated to any association?

DR. RAZA: 'We are affiliated to one of the best working associations—the All India Homoeopathic Medical Association. And we have started so many things in that refresher course to raise those of our colleagues who are having an inferiority complex because they are not institutionally qualified. Unfortunately there was no institution when they started their education in this system. We had, therefore, started such a refresher course. Like this we are trying to raise their standard also. And by the time their standard will go up, probably they may go because they are old people. So then the problem will not be for us. But we are trying that.

DR. JUGAL KISHORE: Recently some homoeopathy people came from U.P. They also said they have a U.P. organisation which covers so many branches. But they are not affiliated to any Central oragnisation. So, what relationship do you have with the U.P. Medical Association?

DR. RAZA: Our association is directly affiliated to the All-India Homoeopathy Medical Association. This U.P. association or other U.P. association, there may be so many associations. I want that there should be one association, one central association. There should be a Central association. There may be branches of it in all the States.

DR. K. NAGAPPA ALVA: Where. is the headquarters of your association, your All-India Association?

DR. RAZA: At Delhi,

CHAIRMAN: All right. Thank you very much.

(The witnesses then withdrew)

(Shri Man Singh Varma in the Chair)

[The Witness (Dr. B. B. Shukla) was called in.]

चेयरमंन : ग्राप ग्रपना परिचय दे दीजिये ।

श्री दी॰ वी॰ झुक्स : मेरा नाम वी॰ वी॰ युक्ता है पोर में मोनोलाल नेहरू होम्योपैथिक अस्पताल लखनऊ में चीफ मेडिकन याफिमर ह और

चेपरपंत : पूर्व इसके कि म्राप यहां पर गवाही दें, मैं ग्रापको यह वतना देना चाहता हूं कि यहां की सम्पूर्ण कार्यवाही गुप्त है । जब तक कि इस कमेटी की रिपोर्ट दोनों सदन के समक्ष न रख दी जाय ग्रांर उस समय तक ग्राप यहां को कियी भो कार्यवाही को न पब्लिसिटो दे सकती हैं ग्रोर न ही छाप सकते हैं। ग्रापके पास जो न्वत्रचनर भेते गये थे, उनका जवाब तो ग्रापने दे ही दिया है ग्रोर भी इसके म्रतिरिक्त कहना चाहते हैं, तो कह सकते हैं।

साक्षी: केवल एक दो वातों के सम्बन्ध में निवेदन करना चाहता हूं। पहनी वात यह है कि पेज 15 ग्राइटम नम्बर 4 पर दिया हुम्रा है

to evolve uniform standards of education in Homoeopathy

दूसरी बात यह है कि

The registration of practitioners on the Central Register of Homoeopath will ensure that medicine is not practised by those who are not qualified in this system, and those who practise, observe a code of ethics in the profession.

चेयरमैन : यह ग्राप कोन सा पेज वतला रहे हैं ?

साक्षी: पेज 15, ग्राइटम नम्बर चार में जो दिया हुया है उसके विषय में कहना चाहता ह ।

to evolve uniform standards of education in Homoeopathy and the registration of practitioners of Homoeopathy.

जहां तक होम्योपैथी की पापुलरटी का सवाल है श्रीर कामन मैंत को इसकी कितनी जरूरत है, इसके वारे में श्रभी लोग श्रच्छी तरह से जानते हैं श्रीर गवनैं मेंट भी इस सिस्टम को

to cover up a village-to-village distribution of medical treatment at a low cost, at the same time with efficacy. करना चाहनी है ।

इस सिस्टिम को ग्रच्छी तरह से लागू करने के लिए ग्रच्छे डाक्टरों की जरूरत होती है । इस सिस्टम द्वारा इनाज करने का दारोमदार ज्यादातर अच्छे डाक्टर के ऊपर निर्मर करता है ग्रौर इस वारे में श्रो हनोमैन ने जो कुछ कहा है वह इस प्रकार से है

The efficient utilisation depend upon the quality of physicians of HAHNE-MANNAN principle, which aims at a MISSION of CURE.

इनमें "रिया गोडिंग प्राफ प्रिसकाडवसं ग्राफ दिस सिस्टम" ग्राठ तरीकों में है, जो इस प्रवार हैं : ---

(i) The TOP grade of Hahnemannan design, who have recognition of only one disease—the name of the disease being "THE SICK MAN". (to CURE THE PATIENT)

(ii) Second grade: They prescribe for CHRONIC DISORDER as per ORGANON-Considering the FLOW of DISORDERS)

(iii) Third grade: Who treat for the force of life which is drawn in form the UNIVERSAL FORCES, connected with the material body at a point over the BRAIN. This is a treatment from the mental angle. This is Dr. KENT's design, where in Science of PSYCHOLOGY plays much.

(iv) Next grade are the prescribers on CONSTITUTION, introduced by Dr. HERRING. Life's force and Physical BODY are composed of various elements either in the finest form or may be gross. Such may be influenced or remain liable to certain group of sufferings. To remove these constitutional faults by adjusting them is their angle.

(v) Next to this come those who prescribe for the disease. Setting aside the picture of SICK MAN, image of sickness in the picture of problems is in their hend and they treat on disease similarly.

(vi) Common physicians dealing with ACUTE disorders.

(vii) Treating for the difficiencies is another variety. This method was designed by Dr. SCHUES-SLER. Theories of VITAMIN difficiencies, difficient calories etc., difficiencies of CLANDULAR secretions etc. are their angle.

(viii) **Prescribers** with basic knowledge, with knowledge of CLI-NICAL experience, emergency requirements, such as first aid, Hygienic adjustments, taking of preventive treatment etc. form the real elementary knowldge.

चेयरमंत्र : प्राप जो यह चीये के वारे में वतला रहे हैं, मैं इस चीज को समझ नहीं पाया हूं. कि चाप इसमें कोई संगोवन चाहते हैं, कोई चेन्ज चाहते हैं ?

साक्षी: मैं संगोधन चाहता हूं ग्रीर यह चीज जोड़ना चाहता हं :----

"Provided nothing contained in section 15(3) (b) & (c) shall be deem to prohibit any person from practising Homoeopathy on charitable basis."

समापति : किस प्रकार का एडीशन ग्राप चाहते हैं ?

साक्षी: मैं चाहता हूं कि एक प्रावीजन उन लोगों के लिए हो जाय जो चेग्टिविल वेसिस पर काम करते रहे हैं ग्रीर जो पाय-नियर रहे हैं ऐसे एमीनेन्ट लोग हैं जो रजिस्टर पर नहीं हैं, गवर्नमेंट सविस में हैं, उनके ग्रलग करने से पवलिक का 'वेगीफिट' नहीं हो पाएगा । मैं चाहना हूं कि एक प्रावीजन ऐसा हो जाय 15(3) (वी ग्रीर (सी) में---

"Provided that nothing contained in section 15(3) (b) and (c) shall be deemed to prohibit any person from practising homoeopathy on charitable basis."

इस विषय में 8 पोंइन्टस् बतला रहा था जि फरदर एजुकेशन.....

सभापति : में समझता हू कि इससे उसका कोई सम्बन्ध नहीं है, केवल इतना सम्बन्ध है कि ग्राप इसमें एक क्लाज ग्रौ चाहने हैं। ग्रापका सुझाव ग्रा गया है, उस पर कमेटो गोर करेगो। ग्राव श्राप किसी ग्रोर क्ताज के वारे में कुठ कहना जाहते है ।

साक्षीः मेरा मेमोरेडम में सब दिया हुप्रा है। ग्रोर मुन्ने कुछ नहीं कहना है।

समापति : मानतीय सदस्य प्रश्त करना चाहे तो कर सकते हैं।

श्वी शशांक शेखर सान्याल : ग्रान वड़ें डावर हैं। ग्रमो जो ग्रावाज उठ रही है सरकार की तरफ से ग्रीर जनता की तरफ से केमिनी प्तानिग के बारे में उाका सुकाबला करने के निर्होन्योपी के से कुछ कोणिश ही सकनी है ?

साक्षी : मैंने डेड़ वर्ग तक इस पर प्रे. किरस की है । 5 ड्रग्स से 80 महिलाग्रों पर डेड़ वर्ग तक प्रोग किया, कोई कन्सेप्जन नहीं हुग्रा हम निश्चित रूा से नहीं कह सफते क्योंकि डेड़ वर्य का समय इपके लिये यहुत थोड़ा है ।

श्री सुल्तान सिंह : मैं एक छोटो सी बात पूछना चाहता हूं। साइंश ने फेमिनी प्लानिंग के दो इंस्ट्रमेंट निकाले हैं लूप श्रीर निरोध । यह किमकी रिसर्व है, होम्योपैंगी की या ए गोपैंगी को ।

साक्षी : होम्पॉपैगे या एनॉपैगी का मवान उठना है थेरोफ्टिक्स ग्रांर यून याफ ड्रग्म के बारे में, लेकिन जो रिसर्च होनी है बह न होग्योपैंशी की है, न एनॉपैयी की है । भी सुल्तान सिंह : होम्पोप*र्था क्यें* नहों क्लेम करती है कि यह रिसर्च हमारी है ।

SHRI SASANKASEKHAR SANY-AL: By and large, scientific investigations are neither allopathic, nor homoeopathic....

श्री सुल्तान सिंह : इनोलिए तो मैं कहनाहूं कि एने पैनी काड़ने हम कैंपे मान ले ।

समापतिः मुल्ताासित् माहय कहते हैं कि होम्पोनैयी भी क्लेम कर सक री है।

साली : रिमन तो मनकी है ।

SHRI SASANKASEKHAR SANY. AL: Everybody is claiming.

DR. K. NAGAPPA ALVA: Has your hospital an attached college?

WITNESS: Not yet. It is an independent hospital.

DR. K. NAGAPPA ALVA: Have you taken up any subject for research in your hospital?

WITNESS: Not yet.

DR. K. NAGAPPA ALVA: Is it Government aided?

WITNESS: Yes.

साक्षी: उसमें क्रमी वेड्स नहीं है। 100 वेड्स के लिए विल्डिंग बन रही है, 50 परसेंट एनॉपैथिक वेड्स खोर 50 परसेंट होम्योपै-थिक वेड्स रखने का प्रावीजन है ।

श्री सुल्तान सिंह : इकट्ठा चलेगा तो अच्छा रहेगा ग्रापकों राय में ।

समापति : अरुगतात कव प्रारम्भ हुप्रा,यहम्म्रां से चल रहा है ?

साक्षी: 1954 से ।

समापतिः विल्डिग बननी ग्रंत णुरू हुई ? साक्षीः पहले से म्राउट-डोर काम कर रहे हैं ग्रत्र इत-डोर के लिए विल्डिंग वनती मुरू हुई है ।

. . .

श्री सुल्तान सिंह :: ग्रापका ग्रस्पताल होम्योपयिक है या एत्रोपयिक है क्योंकि श्रभो ग्राप कह रहे थे कि 50 परसेंट त्रेड्स होम्योपैथिक होंगो ग्रोर 50 परसट एलो-पैथिक होंगी ?

साक्षी : अस्पताल होम्योपैयिक का है, इसको मोती लाल मेमोरियल सोसाइटी चला रही है ।

DR. K. NAGAPPA ALVA: Now that you are having both the systems, which is, of course, a good thing, I would like to know whether there is any understnding or cooperation or coordination between the dotcors who are working in the homoeopathy hospital and the modern system hospitals in the matter of treatment? It is a all known fact that in treating certain diseases, the modern system doctors have failed. There are certain diseases where homoeopathy people also fail. In such cases, is there any coordination?

WITNESS: Cases, of course are referred to us unofficially, by Balram Hospital Medical College and Civil Hospital.

SHRI SASANKASEKHAR SAN-YAL: But how can you do that unofficially? You have to enter into your records.

साक्षी : वाइस वर्सी होता है । जव एनोपैय हमें रिफर करते हैं तो वे अपना इलाज वन्द कर देते हैं और हम उन रोगियों को एक नया रोगी समझ किर इलाज शुरू कर देते हैं जव हम रैफर करते हैं तो वह भी एसा ही करते हैं ।

SHRI SASANKASEKHAR SAN-YAL: You have stated that there are cases in which, without interrupting the present course of treatment, you can also apply the other treatment....

WITNESS: Bio-chemic therapy is used.

DR. K. NAGAPPA ALVA: You said that where the modern treatment failed, such cases have been sent to the homoeopathy hospital. Are there any cases referred to the modern system doctors where the homoeopathic treatment failed?

WITNESS: Of course, they have been referred. But in that case, we left the case....

DR. K. NAGAPPA ALVA: Once for all?

WITNESS: Yes, till the paitent comes back to us again.

DR. K. NAGAPPA: I am just suggesting that it would be better if you work in coordination.

भी टी॰ जी॰ देशमुख : होम्योपैथिक मेडिसिन्स में मेटीरियल सब्स्टस नहीं रहता, उसमें कुछ रहता नहीं है ऐसा मेरा कहना है ।

साकी : हम संबर्स्टेंस को पोटेन्टाइज करते हैं, स्टेन्नेन में ज्यादा फैला देते हैं । प्रगर उनमें सब्स्टेंस नहीं है तो फायदा ही नहीं होगा। एटम कितना छोटा होता है । छोटी सी चीज को भी हम अधिक फैला देते हैं ।

भी टी॰ जी॰ देशमुख : एनोपैथिक मेडिसिन्स में तो बहुत फर्क है ।

साक्षी : ड्रग्स वहीं है जो एलोपैथी में हैं, सिर्फ देने के ढंग में फर्क है। हम मदद टिक्चर्स को बना कर उन को पोटन्टाइज करते हैं। एलोपैथिक मेंडिसिन्स को सीधे पोटन्टाइज नहीं कर सकते ग्रौर करेंगे तो उस का फायदा नहीं होगा। सभापति : म्राप काफी समय से इस प्रस्पताल में काम कर रहे हैं तो क्या ग्राप वता सकेंग कि किस किस्म के केसेज होम्यो-पंथिक ग्रस्पताल में ज्यादा ग्राते हैं ?

साक्षी : हमारे ग्रस्पताल में सब तरह के केसेज ग्राते हैं। सीजनल केसेज भी ग्राते हैं। कैंसर से ले कर हर तरह के कोनिक केसेज ग्राते हैं?

समापति : मैं जरा स्पष्ट कर दूं । मेरा ग्राग्नप्राय यह है कि मैं एँसा मानता हूं कि एलोपैयो से निराग हो कर कुछ लोग होम्यो-पैथी की तरफ म्राते हैं ग्रीर होम्योपैयी में विजेयकर कोनिक केसेज म्राते हैं । एँसा कहा जाता है कि कोनिक केसेज में होम्योपैयी ज्यादा लामत्रद होतो है । तो यह वात कहां तक सही है ?

साक्षी : ग्राप का विचार सही है, लाभ इस हिसाव से होता है कि होम्योपैय कई रोग का लेविल नहीं लगाता । वह व्यक्ति का इलाज करता है, जिसमें टोटलिटी ग्राफ सिस्टम्स ही चिकित्सा का ग्रधार है । रोग के लक्ष्णों का दूर होना ही स्वास्थ्य लाभ है ?

चेयरभन : श्रीमान सिंह वर्मा : आप कुछ ग्रीर कहना चाहते हैं।

साक्षी : हमें दो प्वाइट्स पर कहना ग्रोर वह हम ने कह दिया ।

चेयरमैन : ठीक है, ग्राप का बहुत बहुत धन्यवाद ।

The witnesses then withdraw

DR. JUGAL KISHORE: So I gave him cofia 200 potency. The result was instantaneous. The pain was better. After ten days, he came again with the same complaint and I gave him another dose. He was better. The third time he came, I enquired whether he was taking coffee. He said that he was taking a cup of coffee every two hours. So, that was the main cause of his trouble. I asked him to stop taking coffee immediately and gave him another dose. After that he was cured. Therefore, diet is important in curing sickness. For example, in ignesia, we advise the patient not to take coffee. He is already excitable and with this he will be still worse.

[The Witnesses (Dr. A. M. Ratnam, Dr. R. Gopinath and Dr. R. Vittobai) were called in.]

CHAIRMAN: At the outset, I may tell you that the proceedings of thismeeting are considered confidential and we have not to discolse anything to the public or to the Press unless the report is placed before the House. Now, you can give your comments.

(As directed by the Chair, Dr. A. M. Ratnam, President, handed over the memorandum to the Committee).

ढा० ए० एम० रत्नम : मेरा इस संबंध में सुझाव है कि होम्योपैयी को घ्रपने देश में फैलाने के लिये उस की शिक्षा हिन्दी और रोजनल लैंग्वेजज में होनी चाहिए और कितावों का ट्रांसलेशन भी भारतीय भाषात्रों में होना चाहिए । ऐसा होने पर होम्योपैयी जर्मनी, ग्रमेरिका, इंग्लैंड ग्रीर जापान से ज्यादा यहां फैलेगी इसलिए कि हमारे देश में वुद्धिमान लोग ग्रधिक हैं ?

DR. R. GOPINATH: My suggestion is that homoeopathy should be kept pure. Pure homoeopathy depends only on symptoms. There is no necessity of elaborate study or institutional study of anatomy, physiology and pathology because in the course of the reading of the materia medica and in the course of his practice he comes into contact with all these subjects. Even Dr. Hahnemann did not emphasise on pathalogy as such; his empnhasis was on symptoms, study of symptoms. As such, an elaborate course for four years would be too much for these people to understand. Of course, if it is a question of surgery, then the study of physiology, anatomy, etc., is necessary. But homoeopaths need not .ake recourse to it; there are enough people to take care of it.

We want to improve the homoeopaths in India but unless and until these people gain enough experience, that objective is impossible to achieve. It is by experience that these people have to learn most. After all, institutions for homoeopathic training have not been established till recently. They have been opened only recently -in 1948 or 1949. As a matter of fact, I was born in the year 1911. I am more than 60 years old now. How can you expect me to acquire institutional qualifications now? My practice in this line is for abour 30 years and during this period I have learned a good lot of it. Therefore, theoretical education should not be a compulsory qualification for such experienced people. Such people have to be taken into consideration and given registration.

Regarding qualifications, students coming out of college these days are not much disciplined. They take to strikes and resort to violence. There is an instance of violence where such violence has resulted in the death of a Principal. No discipline, no obedience, nothing of the sort! They attend colleges just for the sake of acquiring degrees. They do not want to go to the villages to work. We are seeing many people who do not practise even after acquiring the degree because they do not study the subject properly. What is the use of our wasting resources over college education and other things by giving them long periods of instruction?

Further, 25 seats are allotted to each and every college. Thus it will take roughly 10 years to cater to the country's needs. The allopaths do not want to go to the villages. How to cater to the country's needs unless we encourage homoeopaths of practical experience?

Regarding training for the institutionally qualified people, if they are allowed to serve under these experienced people for some time, they can pick up experience, instead of wasting four years.

Regarding the question of opening hospitals, these experienced people can be put there and people coming out of the colleges can be put on probation for some time to serve under these experienced people.

Now, about the medium of instruction: Supposing a gentleman from Calcutta is being asked to come and teach in a college at Bangalore. What would be the language that he would like to teach in? He will prefer English, though his mother tongue is Bengali. He does not know Kannada. Of course, it would be better to teach in the vernacular, but since there are no standard text-books available in the regional languages, it is better that the medium of instruction is in English.

SHRI T. G. DESHMUKH: So you want English medium?

DR. R. GOPINATH: Certainly, because there is no availability of books. If books are available in the vernacular, we can have it.

SHRI T. G. DESHMUKH: When there are learned teachers like you, they would certainly express the whole thing in the regional language. Then why do you want English?

DR. R. GOPINATH: There is no other way. Of course, the medium should be the mother tongue. But supposing you want to open a college, where would you go for these people, B.A.s with Homoeo degrees and ten years' teaching experience? They are scarce.

CHAIRMAN (SHRI MAN SINGH VARMA): May I ask you a question? You have stated that students become indisciplined in the institutions and the standard of education has come down. Does it mean that we should close down all these institutions? You have been advocating the cause of those persons who are not institutionally qualified. Do_{es} it mean that we should close down all the institutions? Are you against qualified persons?

(Interruptions)

DR. R. GOPINATH: I am not against qualified persons; I am for qualified persons and for colleges in pure Homoeopathy.

DR. K. NAGAPPA ALVA: You said that four year course is not necessary. Now we are having 72 homoeopathic colleges in India. The period varies. But, whatever it is, the general opinion is that four years are very necessary to know the subject. You were also saying about anatomy, physiology and pathology. Should they not know the fundamentals of these things which are necessary?

DR. R. GOPINATH: While the minimum qualification is S.S.L.C. or P.U.C., there comes the question of science and hygiene. Unless and until the student has good knowledge of science and hygiene, it is impossible for him to understand the subject. Unless and until he has a good knowldge of science and hygiene, it is practically impossible for him. Once he has understood the elmentary science and hygiene, anatomy of the body and functions of the different organs, that is sufficient for him.

DR. K. NAGAPPA ALVA: What minimum qualification should be prescribed for admission into the homoeopathic colleges? They should have a particular standard of education.

DR. R. GOPINATH: It is good; even B.Sc.s find it difficult.

DR. K. NAGAPPA ALVA: Why I am asking you is, within a few minutes you went on saying certain things, not giving any concrete suggestions. The very idea of having this Council is to regulate the practice of homoeopathy, I mean, regulate practice and the standard of education. For that purpose, we must have a course. Whether we have under-graduates or post-graduates is a different thing but what exactly is your suggestion I want to know. I know the text books are not available at the vernacular level but we are to go on. For the present the teaching could be in English. We have to accept the reality of the situation.

DR. R. GOPINATH: That is correct. Till such time we can go ahead as it is.

DR. K. NAGAPPA ALVA: As representatives of this Homoeopathic system and representatives of an Association, I would like to know from you how many Homoeopathic medical associations are there in the Mysore State. Although I come from Mysore. I would like to have this information from you.

DR. A. M. RATNAM: I think there are five associations. The one association is of the registered practitioners, the other is of unregistered practitioners and then there is the third Karnatic Medical Homoeopathy Association. There is an all-India Institute of Homoeopathy Associations and also there is one more association in Hubli.

DR. K. NAGAPPA ALVA: I am asking you: Will it not be good to have one association for one State, amalgamate all the associations into one?

DR. R. GOPINATH: We want that. We can have them amalgamated into one so that all the grievances could be represented through one body.

डा० ए० एन० रत्नम : मेरा यह ख्याल है कि जो ग्रनक्वालिफाइड लोग हैं उन का ग्रजग से एसोसिएशन होना चाहिये ग्रीर जो क्वालि-फाइड लोग हैं उन का ग्रलग से एसोसिएशन होना चाहिए । मेरे मन में ऐमा लगता है कि ग्राल इंडिया वैंसिस पर दो एसोसिएशन इन तरह के होने चाहियें । मैसूर के ग्रन्दर तो है ग्रौर मेरा ऐसा ख्याल है कि इन तरह के दो एसोसिएशन जरूर होने चाहियें । ग्रगर एक ही एसोसिएशन होगा तो दोनों के मन में मनमुटाव रहंगा ग्रीर दोनों ग्रच्छी तरह से काम भी नहीं कर सकेंगे । इसलिए मेरा ग्रपना ख्याल है कि दो म्रलग-प्रलग एसोसिएशन होने चाहियें ।

श्वी पम्पन गौड़ा: ग्राग्के मैसूर स्टेट में कितने क्वालिफाइड ग्रीर कितने ग्रनक्यालि-फाइड डाक्टर हैं ?

साक्षी: करीव 10 हजार हैं।

चैयरमन : किउनों ने ग्रपने को रजिस्टई करा जिया है ?

साझी : मैं इन बारे में ठेक संख्या नहीं अतला मकता हूं लेकिन करीव 1700 ने रजिस्टर करवाया है । इन कना का कारग यह है कि वहां पर रजिस्ट्रेशन करने के लिए ममय धडुन कम दिया गया था त्रीर हम चाहते हैं कि बह समय और बढ़ा दिया जाना चाहिये ताकि जिन लोगों ने अपने भाप को रजिस्टर नहीं करवाया है उन्हें रजिस्टर करवाने का म्रवमर मिल जाय । जहां तक मेरा प्रपना इयाल है पहिले यह समय तीन महीने के लिए ही रखा गया था । हम चाहते हैं कि यह समय कम से कम छः महोने के लिए होना चाहिये । ताकि जो अभी तक नहीं करा सकें हैं उन्हें इन चीज का अवसर मिल जाये ।

चेयरमन : ग्रान के एकोसिएणन की संख्या कितनी है ?

साक्षीः लगमगा 1 हनार है। चेयरमनः ये क्या सब रजिस्टर्ड हैं ? साक्षीः रजिस्टर्ड करोव 100 हैं। श्री सुलतान सिंहः आप के एसोसिएशन के मेम्बर होने की काइटेरिया क्या है ?

साक्षी : जो लोग क्यालिकाइड प्रौर रजिस्टर्ड होम्योपैंथ होते हैं वे इस के मेम्बर बन सकते हैं ग्रीर जो ग्रन-त्वालिफाइड ग्रीर प्रन-रजिस्टर्ड होते हैं वे भी इप के मेम्बर बन अकते हैं। भी सुलतान सिह: मैं ग्राप से एक सवाल यह पूछना चाहता हूं कि ग्रगर कोई इंस्टीट् गूणनली क्वालिकाइड न हो, डिप्लोमा होल्डर न हो, डिप्रो होल्डर न हो, ग्रौर जिसका रजिस्ट्रेशन भी न हुन्ना हो, तो क्या वह भी ग्राप के एसोसिएणन का मेम्बर वन सकता है ?

साक्षी : सेम्पैयाइकर के नाम पर वह मेम्बर वन सकता है ।

श्री पम्पन गौड़ा : माप के एतोसिएशन में सेम्प्रैयाइजर मेम्बरों की संख्या कित्तती है ?

साक्षी : ज्यादा तादाद सेम्ते गइजरों को है ।

श्री सुलतान सिंह : वे लोग क्या कोई काम नहीं कर सकते त्रोर इस तरह के मेम्बरों के होते से ग्राप के एतांसिएशन का काम किस तरह से चलता है ?

साक्षी : वे कोई काम नहीं करते ।

श्री सुलतान सिंह : भाषण कर सकते हैं।

साक्षी : ग्रगर वे समझदार होंगे तो वोलेंगे ग्रोर ग्रगर समझदार नहीं होंगे तो नहीं बोर्जेंग ।

श्वी सुलतान सिंह : इस के माने यह हुए कि जितने रजिस्टर्ड प्रैंक्टी शनर्स हैं, ग्रगर जनके पास कोई मरीज जाता है, तो क्या उस को भी मेम्बर के रूप में रजिस्टर करते चले जाते हैं।

साक्षी: ऐसा नहीं होता है।

श्वी सुलतान सिंह : श्राप के एसोसिएभन के जो मेम्बर बनते हैं उन को सालाना कितनी फोस देनी पड़ती है ?

साक्षी: लाइ क मेम्बर ग्रीर पेंट्रनेन के लिए 101 काया। रजिस्टर्ड प्रैक्टीशनर्स के लिए सालाना फीस जो है वह 10 रुजया है मोर एक रुपया एडमिशन फोस है। जो सेम्पैयाइजर मेम्बर हैं, उन के लिए सालाना फीस पांच रुपया है झौर एक रुपया एडमिशन फी है।

श्वी सुलतान सिंह : ग्राप के एसोसिएशन में कितने मेम्बर हैं ?

साक्षी : करीव एक हजार मेम्वर हैं ग्रौर हम ने नोन कांफ्रन्स कर ली हैं।

चेयरमन : ग्रापको इस बिल के वारे में ग्रौर भी कुछ कहना है ।

साक्षी : जो कुछ वोल दिया है वह काफी है ग्रोर हम यह चाहते हैं कि जो हमने वोला है उस के ऊपर ख्याल किया जायेगा ।

चेयरमन : ग्राप यहां पर इतनी दूर से गवाही देने के लिए ग्राये, इस के लिये ग्राप को धन्यवाद ।

DR. GOPINATH: The Government is pleased to appoint Inspectors and Visitors to the universities and colleges and these Inspectors send their reports to the Government and the reports may be favourable or unfavourable. Do you have a mind to encourage or discourage such people?

CHAIRMAN: You cannot put questions. You can make whatever suggestions you want.

DR. GOPINATH: As a matter of fact I will tell you this. The Government should not run the college. There are of course individuals who can run the colleges provided those people have all these things like big teaching staff. building. library, models and other things. Of course dead body is difficult to be got but with other things if one were to run a college, and if the Inspectors have given a favourable report what makes the Government to stay recognition?

CHAIRMAN: It is for the State Government and you can make your representations to them. Now I think that is all. Thank you very much.

The witnesses then withdraw

[The witness (Dr. M. Satyanarayana) was called in.]

CHAIRMAN: I have to tell you that the proceedings of this meeting are confidential and you are not to disclose anything unless the Report of the Committee is placed before Parliament.

Now, introduce yourself to the Committee and give us something more about your background. What is this Homoeopathic Standards Board?

WITNESS: This is just a new institution started very recently but about six years back I had started a homoeopathic college in Hyderabad and now it has been taken over by the State Government.

CHAIRMAN: Are you on the staff ⁽³⁾ now or not?

WITNESS: I am not a member of the teaching staff.

CHAIRMAN: You have now formed this Homoeopathic Standards Board?

WITNESS: I just formed it because I wanted to do some service to homocopathy.

CHAIRMAN: What is the strength of the members of the Board?

WITNESS: It is just limited.

CHAIRMAN: How many?

WITNESS: Five; because I could not get any opportunity to get more eminent people. The number in- & cludes Honorary Advisers.

CHAIRMAN: What is the function of this Board?

WITNESS: We have not yet started functioning. It is only very recently I handed over my college; it was six months back and I would not devote much time to this. We are going to start a library, and to improve the standards of examinations. I feel that the curriculum is not given much thought. For example, so many allopathic subjects are being taught in homoeopathic colleges. They are not homoeopathy-oriented, like pathology, physiology, surgery etc.

CHAIRMAN: Have you gone through the Bill?

WITNESS: Yes.

CHAIRMAN: Any comments?

WITNESS: I have sent some comments.

CHAIRMAN: Yes, we have got it, Besides that, have you got anything to say?

श्री पम्पन सिंह गौडाः झाप हिन्दी में बोलना चाहते हैं तो बोल सकते हैं।

साक्षी : होमियोपेथी में बहुत से लोग वायोंकेमिक मेडिसिन्स इस्तेमाल करते हैं। वहुत से लोग यह कहते हैं कि होमियोपेथी का सिदांत प्रलग है धौर वायोकेमिक का नया सिदांत है मगर मैं नहीं मानता कि वह नया सिदांत है, वह भी होमियोपेथी सिदांत के प्रनुकूल ही काम करता है। ऐसा भनुभव से देखने में ग्राया है कि ग्रक्सर बहुत सी बीमारियां वायोकेमिक की 12 टिष्यू रेमेडीज से होमियोपेथ दूर करते हैं। मगर उसके बारे में इस बिल में कोई जिक नहीं किया है।

श्री मानसिंह वर्मा: इस बिल में हम यह मान कर चलते हैं कि होमियोपेथी ग्रौर वायोकेमी में कोई ग्रन्तर नहीं है।

साक्षी : दूसरी बात यह है कि हिन्दुस्तान में रूरल एरियाज के लिए मेडिकल फैसिलिटीज देना चाहते हैं लेकिन उसमें होमियोपेथ्स नहीं जा रहे हैं । 4 साल पढ़ने के बाद कोई विलेज में जाकर प्रैक्टिस करने के लिए तैयार नहीं है। इसलिए मेरा ख्याल है कि उसके लिए 12 टिग्यू रेमेडीज प्रैक्टिकली इनफ है। होमियोपेथी में एक शार्ट टर्म कोर्स के साथ उसको पढ़ाया जाये भौर शार्ट टर्म कोर्स में लिमिट करके पढ़ाया जाये तो भी वे कॉफिडेन्स के साथ रूरल एरियाज में काम कर सकते हैं। हमारे होमियोपेथी में लिटरेचर में वायो-केमिस्ट्री का जिन्न भ्रलग से किया जा रहा है— दीज रेमेडीज एज प्रोपाउन्डेड बाई शुभलर वोल रहे हैं—यानी विना प्रूविना के इस्तेमाल कर रहे हैं। इसलिए उसकी भी माइडेन्टिटी ग्रलग से रखी जाये मच्छा है।

चेयरमैन : माप चाहते हैं इस विल में उसको मलग से स्थान मिलना चाहिए ।

साक्षी : इसके मलावा शार्ट टर्म डिप्लोमा कोर्स वायोकेनिस्ट, पैथालाजी, सर्जरी के साथ होना चाहिए । हम लोग जो पैथालाजी, सर्जेरी, गाइनाकालाजी पढ़ रहे हैं वह सब एलोपेथिप मेडिकल साइन्स में जो लिखा है उसको हुबहु इस्तेमाल कर रहे हैं और इसलिए उसके बीच में कोरिलेशन नहीं होता । जो होमियोपेथी में मप्रोच है कि पैथालाजिकल कंडीशन्स से कैसे कोरिलेट करेंगे, उसके लिए भलग से इस बारे में टेक्स्ट बुक्स बनाने चाहिए । इसके मलावा होमियोपेथी की मैटीरिया मेडिका में कोई लिमिट नहीं है ड्रग्ज वनाने की । हर कोई ड्रग मैनुफेक्चरर होता जा रहा है। इसलिए गवनंमेन्ट की बनी हुई एक कमेटी बना कर इस चीज को <mark>देखा जाये मौर</mark> कोई भी प्रैक्टिशनर है उसके सामने परफेक्ट स्टडी करने के लिए एक ऐसा सर्किल होना चाहिए कि कोई भी मेडिसिन नयी निकले उसकी प्रविन्ग हो, उसका एक काइटेरिया होना चाहिए । इसके झलावा एलोपेथी में जैसे डेन्टल विग ग्रलग है, ई०एन०टी० झलग है, होम्योपेथी में यह नहीं है। इसलिए मेरा बयाल है कि इसमें ंभी कुछ स्पेशलाइजेशन पोस्ट-ग्रेजुएट इंस्टी-ट्यूट करना चाहिए डेन्टल एलांग विद होम ोन पेषी

whether it will be necessary for the preparation of teeth, etc. or surgery.

समापति : जो कुछ माप कह रहे हैं वह कौंसिल का काम होगा । यह बिल जो है इसके द्वारा कौंसिल बनाई जा रही है । कौंसिल का काम होगा कि किस प्रकार की एजूकेशन होनी चाहिए, किस प्रकार का करोकुलम होना चाहिए, किस प्रकार का करोकुलम होना चाहिए, किस प्रकार का सिलेवस होना चाहिए, प्रलग-अलग कौन से विंग होने चाहिए । वहरहाल जव सरकार ने मान्यता दी है और कौंसिल बनाई जा रही है तो जो वात ग्राप उठा, रहे हैं वह कौंसिल का कामहोगा और वह करेगी । ग्राप इस बिल से सम्बन्धित कोई और बात कहना चाहते हैं तो कहें ।

साक्षी : मेरे ख्याल से रजिस्ट्रेशन जारी रहना चाहिए, एग्जामिनेशन स्ट्रिक्ट बना देना चाहिए । कई स्टेट्स में एग्जामिनेशन स्ट्रिक्ट नहीं है, एक्सपीरिएंस के उसर रजिस्टर कर रहे हैं । ग्रान्ध्र प्रदेश में मेम्बर ने कह दिया फिट टू वी रजिस्टर तो रजिस्टर कर दिया । मेरा खयाल है ऐसा दूसरी स्टेट्स में भी हुगा होगा लेकिन दो-तीन साल के बाद भी कोई कोम्पीटेन्ट है तो उसका टेस्ट ले लें, कितना ही रिजिड टेस्ट करें लेकिन रजिस्टर करते रहेंगे तो होम्योपेयी के लिए ग्रच्छा है ।

समापति : ग्रापके कहने का ग्रमिप्राय यह है कि विना क्वार्लीफकेशन के, ग्रनुभव के प्राधार पर रजिस्टर करना चाहिए ।

साक्षी : अनुभव के ग्राधार पर तो है लेकिन उनका टेस्ट होना चाहिए, जैसे कालेज में रिटेन श्रौर प्रेक्टीकल टेस्ट होते हैं।

समायति : टेस्ट तभी होगा जय शिक्षण लेंगे ।

साक्षी : होम्योपेयी की प्राइवेट स्टही भी हो सकती है, एनेटोमी, फिजियोलोजी का प्रेक्टीकल टेस्ट हो सकता है । उसके लिए प्राप कह सकते हैं कि प्राइवेट कालेज में पहो, गयनमेन्ट कालेज में पहो, लेकिन टेस्ट जरूर होना चाहिए ।

DR. K. NAGAPPA ALVA: You have given here a suggestion that a diploma course should be started which will have only 12 tissue remedies. The present position, as you know, is that biochemic remedies have been actually included here and it is also to a large extent understood that these 12 tissue remedies do not by themselves form an independent system of medicine. They only form a part. It has been recognised. The only thing is that it has to be made clear in adequate words in the definition also. That, of course, will be taken into consideration. Now, while you say that there are 12 tissue remedies, there are other medicines which should be put separately. Do you not think that it will come in the way of the development of homoeopathy as an independent science? We appreciate the way you started pleading your case that you want standards in education, that you want standards in examination, that you also want people who are really qualified to practise homoeopathy, but for that, will it not be good to take it as a whole, including this? In spite of biochemic friends of Hyderabad forming an association, it would be a small number. Hereafter your suggestions should be to the Council.

WITNESS: Now that you have raised it I want to clarify the position. This is linked with my other suggestions that there must be a criterion for limiting the number of drugs in the homoeopathic materia medica. The number is becoming unlimited. That is why it is necessary to limit it. Just as you have got only a limited number of elements, but the compounds are inumerable, is the same should be the case in homoeopathy. It is common knowledge to every homoeopath that these 12 tissue remedies with difficult combinations are found in so many homoeopathic products. For example belladona may be having one of these things. It is just like this: There are a limited number of elements. You cannot manipulate them, but you can combine them. In the same way these homoeopathis drugs are there, they can be made potented. Even sand is there. In the same way you can limit these to the essential chemicals, through combinations. That is why I say that we can make a start with these 12 remedies. I did not try it as a different system of medicine. It is done for limiting the number of homoeopathic drugs and also to make a good combination so that the homoeopath knows his drugs. Tomorrow anybody can prove it. He is putting it in the market and people may say, I have not had any effect. The council should appoint a Committee to limit these drugs and unless and until it passes them, they should not be manufactured.

SHRI K. RAMAKRISHNA REDDY: Is yours a registered association?

WITNESS: This 'Biochemic Friends' is not registered. I am just representing it because I have been teaching them, some HMT. people, etc. They have taken an interest and they have formed this association, about 30 or 40 people, and they have invited me. In fact, I may also explain to you-they were under the impression that it is a completely different system of medicine, they did not want to learn anything about homoeopathy. I went to teach them homoeopathy. Don't be under the impression that it is a different system or a system working in a different way from Dr. Hahnemann's law of similars.

SHRI K. RAMAKRISHNA REDDY: How many?

WITNESS: 30 or 40 people.

SHRI K. RAMAKRISHNA REDDY: Only HMT people?

WITNESS: Yes, out of interest they are learning.

SHRI K. RAMAKRISHNA REDDY: It is not connected with homoeopathy?

WITNESS: Yes. They are doing free service etc. I have been going and teaching.

SHRI K. RAMAKRISHNA REDDY: I am asking you a specific question. Does it concern homoeopathy or not?

WITNESS: Homoeopathy in the sense that they deal in tissue remedies. It deals with tissue remedies.

DR. K. NAGAPPA ALVA: Only in these tissue remedies?

WITNESS: There are certain people who use only these tissue remedies. It is included in all materia medica:

SHRI K. RAMAKRISHNA REDDY: Do you think that this 'Biochemic Friends' Association with the biochemic techniques will over-rule the homoeopathic medicines?

WITNESS: They do not over-rule, it is only a practical solution for limiting the course, to make it a short-term course.

SHRI K. RAMAKRISHNA REDDY: What is the object if the homoeopathic system includes biochemistry?

WITNESS: That is true. In a shortterm course you cannot teach all the homoeopathic drugs, in two or three years you cannot teach everything. He said, 2000. Even if you have to teach for 200, pathology, etc., you cannot do it in two years. With this you can with confidence go to treat the patient.

DR. K. NAGAPPA ALVA: Can you select some remedy other than these 12 tissue remedies?

WITNESS: There are some drugs like sulphur, and arsentic. There are elements of the drugs. They can also be included because of their characteristics. But it should be limited.

चेयरमन : अच्छा डाक्टर साहव, भ्रापका बहुत बहुत धन्यवाद । भ्राप ने जो विचार व्यक्त किये उनसे बड़ा लाभ हुग्रा है भौर उनपर हम विचार करेंगे ।

(The witness then withdrew)

(The Committee then adjourned).

Friday, the 12th January, 1973 PRESENT

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Shrimati Purabi Mukhopadhayay-Chairman

MEMBERS

Rajya Sabha	12. Shri A. M. Cheilachemi
z. Shri Sasankas ekhar Sanyal	13. Shri Hiralal Doda
3. Dr. K. Nagappa Alva	14. Shri Nageshwar Dwivedi
4. Shri Man Singh Varma 5. Shri K. C. Panda	15. Shri Pampan Gowda
6. Shri Manubha i Shah	16. Shri Madhuryya Haldar
7. Shri Sultan Singh	17. Shri Chiranjib Jha
8. Shri T. G. Deshmukh	18. Shri Popatlal M. Joshi
Lok Sabha	19. Shri Prasannbhai Mehta
9. Shri Ziaur Rahman Ansarl	20. Shri S. L. Peje
10. Shri Vidya Dhar Bajpai	21. Dr. Sankata Prasad
11. Shri Muhammed Khuda Bu <u>khsh</u>	22. Shri Awdhesh Chandra Singh

REPRESENTATIVES OF THE MINISTERIES

Ministry of Law and Justice

Shri P. L. Gupta, Additional Legislative Counsel Shrimati V. S. Rama Devi, Deputy Legislative Counsel. Ministry of Health and Family Planning

Dr. Jugal Kishore, Adviser in Homoeopathy Dr. D. P. Rastogi, Senior **Research** Officer.

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SECRETARIAT

Shri M. S. Panigrahi, Deputy Secretary Shri M. K. Jain, Under Secretary WITNESSES

- 1. Dr. S. K. Zutshi, New Delhi
- 2. Dr. S. S. Sharma, Principal, the Chhatarpur Homoeopathic Medical College and Hospital, Chhatarpur (M.P.).
- 3. Dr. K. B. Lal, Gwalior
- 4. Dr. D. K. Sarkar, Agra
- 5. Dr. P. Pandey, Meerut
- 6. Dr. Sat Prakash, Chandigarh

(Shrimati Purabi Mukhopadhyaya in the Chair.)

[The Witness (Dr. S. K. vutshi) was called in.]

CHAIRMAN: Please introduce yourself giving your qualifications' and you experience.

WITNESS: I belong to Kashmir. Before partition I was at Lahore and after partition I migrated to Delhi. I was practising since 1940-41. Prior to that I qualified from the Lucknow Homoeopathic College. Prior to that I was in the Lahore Medical College. But due to circumstances I had to leave my M.B.B.S., course and join homoeopathy. From there I was sent In 1942 to Labore to organise the Quit India Movement, I was held up there and from there in 1947 I came to New Delhi and started my practice. Now I am practising in Connaught Place for the last 25-28 years.

I am practising homoeopathy though I know a lot of allopathy, I have not used it at all. In my opinion one should know all the medical sciences but until and unless one is perfect in one's own science one should not deal the other one. For that reason I do not use allopathic drugs or medicines at all. I totally believe in my pathy, homoeopathy. I take side assistance of biochemic medicines.

CHAIRMAN: Do you think that biochemic medicines should also be included in this Bill?

WITNESS: Yes, in my memorandum which I have sent, I have already mentioned in the third line that Dr. Schussler's biochemic medicines must be added because in some cases where homoeopath is not in a position to select the right drug and the case is complicated, then by giving biochemic medicines one can earily at least make the case in a better position. In my opinion biochemistry should go side by side with homoeopathy.

CHAIRMAN: What are your views on the Bill?

WITNESS: In Chapter I, clause 2 I have mentioned that the recognition and affiliation of colleges must be memtioned. The Board should recognise and affiliate those colleges which are functioning in that particular State.

I have already mentioned about biochemistry. In my opinion it should go side by side. Then in clause 5(1) of Chapter II, I have said that all registered medical practitioners should have the right to fight elections and must come on the body of the Central Coun-. cil. After all, in a secular State every one has got the right to vote and in my opinion homeopathy is alive mainly due to these R.M.Ps. and not due to other sets of homoeopaths who are mostly dealing in combinations. It is a double disqualification to first pass allopathy and then after going through a few books of homoeopathy one should be known as a homoeopath. Allopathic qualification should be a sort of double disqualification. should be perfect in his Опе In institutions alloown line. path should not be given priority in homeopathic colleges. Sir, I have been to Germany, France, England and a few more countries. I have seen that homeopathy is gradually degenrating because they are using Homoepathic and allopathic medicines side by side and the doctor does not know which medicine is doing good, allopathic or homoeopathic. So, it is better that allopathy should not be allowed in the homoeopathic institutions, colleges and hospitals. This is the cause why homoeopathy is degeneration in U.S.A., Germany and the U.K. which have been the homelands of homoeopathy. About fifty years back there about two dozen institutions. Were Now these institutions are one by one degenerating and allopathy is being added to the homoeopathic science.

CHAIRMAN: One clarification. You said that all registered practitioners must be allowed to exercise their franchise to elect members. of this Council. Again you said that no allopath should be allowed to practise homoeopathy or should be associated with any college unless he has had some institutional training in homoeopathy. By reading only a few books, one does not become a homoeopath. Is that right?

WITNESS: Yes.

CHAIRMAN: Then what is the justification for your first assertion that all registered practitioners should be allowed to vote? Many of them have not undergone any institutional training.

WITNESS: Well, the thing is, about 70 or 80 years ago homoeopathy came to India from Bengal and those who started this science were doing it wholeheartedly for the benefit of the masses. No doubt, they did not go through the preliminary sciences like anatomy and physiology. But they had the mastery of the pholosophy of homoeopathy, the organon of homoeopathy and the medicines of homoecpathy. These are the basic things which a homoeopath must know. Side by side, he must be aware of the surgical side of it. RMP means a person who has been in the line at least for five or ten years. A person who is doing it wholeheartedly for five or ten years, must be aware of the fundamentals of homeopathy. For that reason I have said that all should be eligible to vote. It should not be in the pocket of those few who are institutionally qualified. It should be meant for all.

CHAIRMAN: Next point.

WITNESS: One thing more. If I am not wrong, mostly we prefer allopaths in every sphere of life. If allopaths are given extra privileges in homoeopathic institutions, it means that the fate of homoeopathy will degenerates because they got certain biases and mental attitudes that they are superior. So they should not be given priority over the homoeopaths. They should be equal to pure homoeopaths in the colleges and institutions.

Then a member of the Central Council should hold office for a term of three years instead of five years, as otherwise it will become the mouthpiece of a few. In my opinion, if a person is in the Council for several years together, it becomes a monopoly and we in a secular State are against monopoly. I think a period of three there years is quite sufficient and should be no extra time at all. In fact, three years should be the maximum period. I would even suggest that it should be only one year so that new blood may come in.

SHRI T. G. DESHMUKH: What about people who are exeperienced?

WITNESS: Well, those people might be having political backing, political strength.

SHRI SASANKASHEKHAR SAN-YAL: What do you mean by political strength?

WITNESS: Well, supposing I belong to a party A, B or C, and I have got contacts with so many people in Parliament or outside, I can be in a position, with the help of the Memhers

SHRI SASANKASEKHAR SAN-YAL: Do you think that political persons who are themselves ill select their doctors only on a political basis?

WITNESS: Not on political basis, but certain approaches are always ' there.

CHAIRMAN: It is absolutely wrong. I can tell you that I have got only one son and the homoeopath who used to treat my son was a CPM leader. while I was a Congress Minister. We never go by party politics when choosing doctors. We go by their qualifications. And that is true for all the Members of Parliament. You should not cast aspersions on the Members of Parliament.

WITNESS: I am very sorry. I withdraw my words.

SHRI PAMPAN GOWDA: Do you think that in the teaching staff, only ' homoeopathically qualified people should be there?

WITNESS: No, for certain subjects we must keep allopaths also.

SHRI MAN SINGH VARMA: You have said that doctors other than homoeopaths should not be allowed in the homoeopathic institutions.

WITNESS: No, I said that they should not be given an extra position over pure homoeopaths.

SHRI POPATLAL M. JOSPI: Doctors well versed in allopathy will take to homoeopathy only when they find it better. Why should they be disgualified?

WITNESS: I am not saying that they should be disqualified. They get certain extra privileges. Those extra privileges should not be given to them.

SHRI POPATLAL M. JOSHI: An ordinary man takes to homoeopathy and practises for a number of years. Similarly an allopathic doctor takes a fency to homoeopathy and studies it. What is the objection?

WITNESS: We have sot no objection. But a person who is practising homoeopathy for so many years is certainly better than an allopathic person who has only read some books on Homoeopathy.

SHRI POPATLAL M. JOSHI: Am I to understand that efficiency in homoeopathy is based on experience only?

WITNESS: No, with experience there should be some knowledge and learning also. Experience also counts. SHRI POPATLAL M. JOSIII: Is it not possible that a young man of 25 taking training in homoeopathy will be a better homoeopath than a man of 50?

WITNESS: Well, a youngster has got a better capability of retaining things in mind. He can grasp things more easily than a person of 50 like me. If you give me a new science. I will not be able to memorise and retain things in memory so easily. So naturally a youngster will be in a better position to safeguard the interests of homoeopathy than a person who learns it at a later age.

SHRI POPATLAL M. JOSHI: So, you admit that experience has nothing to do with knowledge in homoeopathy?

WITNESS: Well, to a certain extent, but in medicine experience also counts.

SHRI POPATLAL M. JOSHI: You said that because homoeopathy has been spoiled by allopaths in France, England and the U.S.A., you have found it in a very bad condition in those countries. What do you propose in India? How to get it pure and not allow it to degenerate in India to the same condition as it has degenerated in foreign countries.

WITNESS: In foreign countries, firstly you must have the mastery of MBBS or FRCS, etc., whatever degrees are there. After that for six months or eight months or more a sort of post-graduate course is there for homoeopathy. You have been in one particular science for five years and naturally you cannot change six months or eight yourself in months. And then they will be thinking in terms of money and one can have easy income by doing allopathy practice. If he sits for a few hours a day, he can earn a lot. In that way in foreign countries allopathy took the better chance and homoeopathy has been eliminated from those places

gradually and systemetically. Here one must have got the basic sciences, anatomy, surgery, physiology, taught by allopaths who have perfect knowledge, And the most important thing on which homoeopathy is based is the philosophy, the medicine, or organic of medicine. That must be taught so that those who come out of those institutions must be well versed with the science of Homoeopathy.

SHRI POPATLAL M. JOSHI: For that when they know allopathy, what objection is there?

WITNESS: I told you my experience. When I started my practice in the beginning there were a few cases which were out of my control and there was a temptation that I must give some shock, giving quick allopathic medicine. But if I am not aware of those things, if I am not taught those things, if I am not taught those things then why should I use these and I stick to homoeopathy. I will do my best to find the right medicine to help the patient....

SHRI POPATLAL M. JOSHI: Nowadays the medicines, the inventions in medicines, are so stereotyped that almost all drugs are made by all the companies. The doctor has to see symptoms only. Today even a man who is well-versed in homoeopathy, who has passed MBBS course within two years. he gets out of date if he does not keep himself in touch with the modern trend of medical research. What objection can yeu have if such a man practises in homoeopathy?

WITNESS: Well, allopathy is ever changing. They have not got any basic standard law as in Homoeopathy. They change according to the circumstances, according to the environment and their needs. But homoeopathy is based on eternal principles. They have not changed for the last 100 or 150 years. Up till now nobody on earth has changed these laws, the principles. "Similie similibus curantor the fundamentals. So a changing medicine may do good in some respects somewhere, but it does more harm in another way. What about the anti-biotics or about the presentday allopathy drugs? You have seen on every one of these the word poison is omitted. They have started giving poison without knowing what that poison can do to the body. In India we have not got so much of resources. I have seen cases where for discases like leukemia-blood cancer where we may full testified of the patient after using the antibiotic as to know when to stop it; have misuse of the drugs antibiotic were given or misused till the patient dies of it. Take the case of typhoid. Terramycine capsules were given and the patient was all right. But there was a relapse. Again some more capsules. After some time more again the same thing happened. All the allopathy irugs have reaction. At least in that respect homoeopathy medicines are harmless. They do not create any bad effects on the body ...

SHRI POPATLAL M. JOSHI: In allopathy research has been done for hundreds of years and it is developed research and experience. When you say that homoeopathy has not changed for the last 100 or 150 years, do you think allopathy has changed?

SHRI SASANKASEKHAR SAN-YAL: Basically every science is changing for the better.

SHRI POPATLAL M. JOSHI: Why should you have an antipathy for allopathy? Why should not an allopath side by side practise homoeopathy

WITNESS: No. because when a person travels in two boats he does not know which boat will take him to the destination.

SHRI MAN SINGH VARMA: At least he will reach somewhere.

WITNESS: He may, but not to the destination.

SHRI T. G. DESHMUKH: It is said that homoeopathy is disappearing in its own home land. Not only that. Homoeopathy is disappearing everywhere except in underdeveloped countries like India and countries in Africa. What do you say?

WITNESS: Well, it is correct, because there the rule they have made that first of all they want that anybody who joins the medical line, he must pass through all those basic sciences for 5 years and then he can go for homoeopathy for 6 months. Naturally if I learn homoeopathy after long five years in basic sciences and When one year or six months of homoeopathy, I naturally will practise allopathy because my income in homoeopathy may not be as much as I can get in allopathy, as well as allopathy is easy to follow with set patent medicines. Through allopathy I might earn about 200 to 300 rupces a day and my income through homoeopathy may be bardly two or three rupees throughout the day.

DR. K. NAGAPPA ALVA: Dr. Zutshi, are you of the opinion that the homoeopathy system of medicine, as it is today, can cure all the diseases?

WITNESS: No science is perfect in this universe.

DR. K. NAGAPPA ALVA: And don't you know that some of the diseases have remedies in the modern system of medicine and for those diseases we do not have medicines in the homeopathy system?

WITNESS: Well you are correct. For that we should advise the patient that we are not in a position to give the right treatment and it is better that he should go to persons dealing in allopathy or in any other system.

DR. K. NAGAPPA ALVA: Therefore, you are of the opinion that when a homoeopathy doctor is not in a position to treat a case and give the cure, he has to, following the ethics of the profession, direct the patient to go to the other system.

WITNESS: Correct. I believe every science has a right to develop in its own way.

DR. K. NAGAPPA ALVA: You were saying things about medical education having this basic objective what we ly would be the duration of the course. I would like to know your concrete suggestions regarding the duration of the course, what should be the subjects and about the teachers, and so on.

WITNESS: The duration of course, first of all, should be the same as in allopathic science. It should be at least 4½ years and the degree should also be of the same type. It should be equivalent to that. Then we must have our own hospitals where we can give clinical and bed-side knowledge.

DR. K. NAGAPPA ALVA: What should be the minimum qualifications for admission?

WITNESS: The same as in modern system of medicine. Either 11th with Botany and Zoology or B.Sc. Until and unless the boy is a bit mature, a person who can understand, he should not be allowed to join.

DR. K. NAGAPPA ALVA: You were mentioning about Anatomy. Anatomy is the same for all. Were you suggesting that even the allopathic doctor who will become a teacher must also have the training in homoeopathy before he becomes a teacher?

WITNESS: No. A teacher may or may not be a homoeopath. A person who practises homoeopathy must have full, basic knowledge of homoeopathy along with the elementary knowledge of Anatomy, Pathalogy, physiology and surgery etc.

DR. K. NAGAPPA ALVA: I am asking about the particular subject in the homoeopathy college. Who will be the teacher there?

WITNESS: Who knows anatomy physiology, pathalogy, surgery with all the Homoeopathic systems very well. A B.Sc. should be allowed.

DR. K. NAGAPPA ALVA: What are the basic subjects you are suggesting for this course? WITNESS: We have ten papers as in modern system of medicine with more stress on Homoeopathic subjects.

DR. K. NAGAPPA ALVA: I am asking about Anatomy, Physiology, etc. Are you in favour of baving Pathology and Preventive Medicine?

WITNESS: Yes.

DR. K. NAGAPPA ALVA: As it is, we are not having that. What is your suggestion?

WITNESS: We have got preventive medicines. We should advise the patients to get this at the time of need.

DR. K. NAGAPPA ALVA: You made a remark that treating the typhoid disease with antibiotics the modern system doctors are doing immense harm to the patient. Do you stick to that?

WITNESS: I agree with that. Every action has got an equal opposite reaction. Sting drugs will have strong reactions and the body has to bear it.

DR. K. NAGAPPA ALVA: You are a doctor of great experience. Certain ideas that are fixed in your mind should go. But the doctor who prescribes medicines in such cases also looks to the quantity and regulates it so as to ensure that there is no adverse effect on the patient.

WITNESS: While it is correct, but, after all, poison will have some reaction somewhere and lack of facilities will hinder all tests allopathic doctor needs for his patients or a poor patient cannot afford the same, hence overdosing will do harm than doing good.

CHAIRMAN: No more academic discussion on the use of antibiotics.

DR. K. NAGAPPA ALVA: But you should not go to such extent. It is a recognized practice. That is a treatment.

CHAIRMAN: Do you have any more points?

WITNESS: I have a couple of more points.

I have mentioned that nomination should not be for more than one year. Or, from the very beginning there should be election, because it is written there that 10,000 doctors will have one representative. At some places as in Delhi we may not be having 10,000 to doctors throughout our life. This means that we cannot have more than one at all whereas world renowned Homoeopathic doctors are in Delhi, hence. Minimum should be two for each State.

DR. K. NAGAPPA ALVA: What is your suggestion?

WITNESS: My suggestion is that there should be two Members for every State. If the number of the homoeopathic doctors and more than 10,000, they may have three Members. U.P. is a big State and it may have more than two. Delhi has got 800 doctors and it should have two Members.

DR. K. NAGAPPA ALVA: If some State has only 100 doctors, how many Members do you propose for it?

WITNESS: They may have two. There is no harm in it. The minimum should be two.

D.H.S. doctors should also be considered as qualified doctors for the purpose of being nominated to the Council. D.H.S. are those homoeopaths who have been doing practice for the last several years, but they could not get recognition. We conducted an examination in those 10 papers which are prescribed for the medical college boys. The maximum period was 3 years. So, they could About 1000 people take 3 chances. appeared and about 250 or 300 people qualified. Those who have qualified should be known as qualified doctors and should be given representation at the Council.

We have got many R.M.P. doctors. When I came to Delhi in 1949-50, there were about 3 lakh homoeopaths. Out of these 3 lakhs, 40,000 were qualified and the rest were unqualified. I think they should be sent to the rural areas to look after the population there. We can utilise these people in Rural Health Scheme by giving them the minimum possible assistance.

In allopathy, I think there is only one registration. For homoeopaths also, we should have one registration instead of having two registrations, one at the State level and another at the Central level. Why should there be 2 registrations?

SHRI K. C. PANDA: Those who have not got any qualifications, must be registered in the States. So, there will be a second register in the States.

WITNESS: When allopathy was recognised, all of them were brought back to one register.

SHRI K. C. PANDA: All of them were institutionally trained for some time.

WITNESS: In homoeopathy, there were no institutions in the beginning. Institutions have come up only a few years ago.

SHRI K. C. PANDA: Do you agree that the R.M.P. doctors should sit in some examination?

WITNESS: If they want to be institutionally qualified, they can appear in that.

SHRI K. C. PANDA: What sort of education do you propose for them?

WITNESS: They can have a refresher course in body functioning, i.e. Anatomy, Physiology and homoeopathic subjects.

CHAIRMAN: Thank you.

(The witness then withdrew.)

[The witness (Dr. S. S. Sharma) was called in.]

CHAIRMAN: Dr. Sharma, we are glad that you have come over here to give your evidence. At the outset please note that all the proceedings of

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this Committee, the evidence that you tender before us, the questions put by Members and the replies you give, are all confidential and should be treated ~ so till the report of this Committee is placed before both Houses of Parliament.

Now, have you got anything to say about the Bill I presume you must have gone through the Bill.

WITNESS: We are affiliated to the All-India Medical Association. Our head office has sent this with our consent.

CHAIRMAN: You have been the principal of a college?

WITNESS: Yes.

CHAIRMAN: Have you gone through the Bill?

WITNESS: Yes. And I have sent my comments on that.

CHAIRMAN: Have you got anything more to say on that either by way of suggestions or by way of comments?

WITNESS: I have sent my comments and suggestions also.

SHRI T. G. DESHMUKH: Is there a hospital to your college?

WITNESS: There is only a dispensary. Hospital is going to be started soon. We have arranged for it. We are arranging for the building and as soon as it is available, the hospital will be started.

श्री टी॰ जी॰ देशमुख : गवनंमेन्ट ने कितनी ग्रान्ट मापको दी है ?

WITNESS: Government is giving no aid to us. It is giving aid to only one college in Gwalior and that is Rs. 700 per year.

DR. K. NAGAPPA ALVA: What is the total number of colleges in M.P.?

WITNESS: At present there are 18 colleges.

DR. K. NAGAPPA ALVA: Is there any Government college?

WITNESS: No. All are private colleges.

SHRI T. G. DESHMUKH: How many students are there?

WITNESS: At present there are 125 students. There is a two-year course in M.P. And there are 125 students in my college.

CHAIRMAN: You have got a twoyear course in your college?

WFTNESS: Yes, after matriculation.

CHAIRMAN: Even the college which is getting Government grant, is that also having a two-year course?

WITNESS: Yes.

DR. K. NAGAPPA ALVA: Are they taking failed matriculates or those who have passed SSLC or Matriculation?

WITNESS: Those who have passed High School Board examination, not the local examination.

श्री टी॰ जी॰ देशमुख : ग्रापने गवनंमेन्ट को लिखा है ग्रान्ट के लिए ?

WITNESS: We have written several times, but no....

श्री टी॰ जी॰ देशमुख : ग्रापने गवर्नमेन्ट स्राफ इंडिया को लिखा ?

साक्षी : गवनंमेन्ट ग्राफ इंडिया को नहीं लिखा, प्राविशियल गवनंमेन्ट को लिखा था। लास्ट इयर हैल्थ मिनिस्टर की मौजूदगी में मीटिंग हुई थी, उसमें तय हुत्रा था कि जो भी इयर कोर्स चालू करेंगे उनको एड होगी, लेकिन चूंकि इस साल सिरेवस तैयार नहीं हुग्रा इसलिए टू-इयर कोर्स रखना पड़ा।

श्री मान सिंह धर्मा : क्या श्राप स्वयं . महसूस करने हैं कि चार साल के मुकावले दो साल का कोर्स उचित नहीं है ? साक्षी : मेरी ग्रोपीनियन है कि तीन साल का डिप्लोमा कोसं होना चाहिए ग्रीर 5 साल का डिग्री कोसं होना चाहिए ।

श्रीमान सिंह वर्माः भ्राप इसके लिए प्रयत्न कर रहे हैं कि दो साल के वजाय तीन साल का कोर्स कर दिया जाय ?

WITNESS: We were all agreed on the subject and a committee has been formed. But the administrator, being an allopath. did not do anything about it.

श्री दी० जी० देशमुखः दो साल से तीन साल का कोर्स करना ग्रापके हाथ में है या गवनमंट के हाथ में है ?

साकी : शासन के हाथ में है।

धी मान सिंह वर्मा : इन्होंने लिख कर भेज दिया, लेकिन जव शासन एग्री नहीं करेगा तो ये क्या करेंगे ।

CHAIRMAN: I think you have got a governing body of your college.

WITNESS: Yes.

CHAIRMAN: Has the Governing Body suggested having a three-year course or five-year course?

WITNESS: We have sent it to the State Government.

CHAIRMAN: What is the State Government's reply to that suggestion?

साक्षी : गवनंमेंट ने यह किया कि कमेटी बना दी ताकि क्री-इयर कोसं 72 से स्टार्ट हो सके, लेकिन कमेटी जो बनाई गई थी....

CHAIRMAN: Dr. Juga' Kishore will explain that.

DR. JUGAL KISHORE (MINISTRY OF HEALTH): I have been to Bhopal in M.P. and seen things for myself. There is a two-year course, Unfortunately, I think I must admit that some of the colleges do not want to be upgraded themselves because they are proprietory colleges and in case they accept Government grants, they have to show their budget balance-sheet. This is the uning. 1 think Dr. Sharma also might agree that some of the colleges of this type themselves do not want upgradation.

SHRI MAN SINGH VARMA: When they can become doctors in two years, why should they have more number of years?

DR. JUGAL KISHORE: There are colleges, who according to my information, do not want to be involved, They say we are quite happy. We are making money. Why involve ourselves in problems?. Then, recently you may have read in the press, the Chief Minister of Madhya Pradesh announced that they are going to take over all the private colleges. I do not know how far they are going to. Regarding the local affairs now, the Board is not functioning, because members of the Board also, many of them, are running colleges. There is a lot of politics going on. And then the administrator who was appointed in place of the Board unfortunately happens to be an allopath-he was in charge of the hospital-and he is actually the Medical Superintendent. Since this is how things were happening, they appointed a committee to lay down standards for а three-year diploma course. Some additional suggestions were made. But nothing beyond has happened afterwards. After that I went there, and, through the Governor, saw the Health Minister and then the Chief Minister. They have agreed now to have one Indian homoeopathy practitioner as Deputy Director or of Homoeopathy. An interview has been held and I think the person might be appointed very soon....

WITNESS: Yes, he has been appointed. I have heard that one person has been appointed.

DR. JUGAL KISHORE: I think things will improve now. And the Health Minister is very, much impressed by this system and said that this system should be developed -specially in a State where they cannot afford to spend money on drugs, etc. Actually the Health Minister even asked me to give a scheme for that which I am doing already. I think we have to do lot of work for development. At the present moment things are not satisfactory.

DR. K. NAGAPPA ALVA: Is there a register of homoeopathy doctors in you. State?

WITNESS: Yes.

DR. K. NAGAPPA ALVA: How many categories of doctors are there on that?

WITNESS: There are three categories: enlistment, registered, those who were practitioners for more than 10 years. Now those persons who have got two-year diploma can be registered. At present there are 6000 registered practitioners.

CHAIRMAN: Thank you Dr. Sharma

WITNESS: Thank you, Sir.

(The witness then withdrew.)

[The witness (Dr. K. D. Lal) was called in.]

CHAIRMAN: Dr. Lal, the proceedings of this Committee are confidential and nothing should be revealed to anybody outside. You have sent your suggestions. If you want to elaborate something, you can do so.

WITNESS: I want to elaborate a few points. First of all, I would like to say that the definition of homoeopathy should include biochemic system of medicine also in Section 2(1).

CHAIRMAN: Don't you agree that biochemic is also a product of homeopathy?

WITNESS: It is a part of homoeopathy. But someone may exclude biochemic and it may create difficulties later on. It should be made clear that biochemic treatment will also be included in the homoeopathic treatment.

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CHAIRMAN: If a man has certain diploma or certificate for practising homoeopathy, he can practise biochemic system also.

WITNESS: Since there is no provision in law, somebody may question it.

CHAIRMAN: Do you mean to say that biochemic is a separate science?

WITNESS: No, it is not a separate science, but the founding principles are different.

SHRI MAN SINGH VARMA: Do you suggest that biochemic system should also be included in the curriculum?

WITNESS: Yes, biochernic system should be included in the curriculum also.

Then, Section 3(b) says that one member from each University should be elected. At present, we have got no University of Homoeopathy. Till the University of Homoeopathy is formed, the Members from the zones should be represented in the Central Council.

SHRI MAN SINGH VARMA: What do you mean by zones? Are there any zones like that?

WITNESS: We can form five zones in India and two members from each zone should be represented in the Central Council till the University is formed.

CHAIRMAN: Do you know that there are certain Universities which include Faculty of Homoeopathy?

WITNESS: Yes. Calcutta and Kaupur Universities have Faculties of Homocopathy. In other States there is no such University.

CHAIRMAN: Should they not send their representatives?

WITNESS: They can send their representatives. But there should be representation from all over India.

CHAIRMAN: According to some other clause, we are having representatives from the States. Is that not sufficient?

WITNESS: Yes, that is sufficient,

Then there is Section 5(1) indicating the qualifications for the Central Council Members. Here I want to say that a person who has been on the rolls in the State Register of Medical Practitioners for at least 5 years, should be eligible for being a Member of the Central Council.

SHRI MAN SINGH VARMA: Most doctors with 5 years' experience are registered.

WITNESS: My point is this that when he is registered. from that date he should be for 5 years on the State Register and he can be eligible only after 5 years from that date. He should get sufficient experience about law, public opinion, etc.

CHAIRMAN: It is a good suggestion.

SHRI PAMPAN GOWDA: If he has got five years' practice?

WITNESS: The registration is done on the basis of a five-year or ten-year practice. That is a separate issue. If he is registered, he teels the responsibility of a registered medical practitioner.

CHAIRMAN: Thank you very much.

WITNESS: I hope my suggestions will be kept strictly in view by the Committee—whatever I have already stated.

CHAIRMAN: That is all right. They will be taken into consideration when we discuss. Thank you.

(The witness then withdrew.)

(The Committee then adjourned.)

(AFTER LUNCH THE COMMITTEE MET AT 3 P.M.

(Shrimati Purabi Mukhopadhyaya in the Chair)

[The witness (Dr. D. K. Sarkar) was called in.]

CHAIRMAN: Dr. Sarkar, will you kindly introduce yourself?

WITNESS: I am Dr. Dilip Sarkar from Agra. I passed my D.M.S. from Calcutta in 1952. Then in 1961 I went to England for D.F. Now I am the Vice-Chairman, of the U.P. Homeo Medicine Board, since the last two terms.

CHAIRMAN: I might inform you that the views given by you before this Committee are confidential till they are placed before Parliament. May I know the reason why your State Board is recognising only medical practitioners? Have you not prescribed educational academical qualifications?

WITNESS: When the State Board was formed in 1957, they registered practitioners with five years' experience. Now we register only those people who have got four years' teaching diploma, either from U.P. or any other State. We do not recognise anybody who has got less than four years teaching diploma.

CHAIRMAN: Have you gone through our Bill? Any comments?

WITNESS: Yes, Madam. I think it is perfectly all right.

SHRI MAN SINGH VERMA: Have you any knowledge of the Faculty at Kanpur?

WITNESS: They have just now started degree course. Formerly the Faculty was with the Agra University. But when this new University at Kanpur was formed they shifted the Faculty to Kanpur. Formerly there was hardly one college giving G.H.M.S. DR. SANKATA PRASAD: There are many persons who are practising homeopathy but are not registered. Do you want to open registration for them or not?

WITNESS: I do not agree with you. Being a member of the Board people have been approaching me but we do not like unqualified people practising.

DR. SANKATA PRASAD: What about the people who are already practising?

WITNESS: We can start refresher courses. I personally started one condensed course for registered practitioners who have passed at least the High School examination or Intermediate. They can get the homoeopathic diploma from the U.P. Board. But I cannot say anything about those people who are not registered although they are eminent and all that.

DR. SANKATA PRASAD: You are the Vice-President of the U.P. Board. I am informed that some funds are lying with the U.P. medical college and they have not been utilised.

WITNESS: That is the Government medical college which is in Lucknow —the National Homoeopathic College. They are trying to acquire some land and then they will utilise those funds. But they have got nothing to do with the Board.

SHRI PAMPAN GOWDA: You have said that you have started a refresher course for those who ard registered. What is the duration of that course?

WITNESS: Two years.

SHRI PAMPAN GOWDA: Do you think it will be sufficient for them?

WITNESS: Those people who are already registered and who have sufficient knowledge about this system will be given training in allied subjects also. That is the objective. SHRI MAN SINGH VARMA: Yesterday your Registrar appeared before us and he said that the Board has the power to issue degrees. Is it correct?

WITNESS: Yes, it is correct. The Board has issued degrees previously also.

SHRI MAN SINGH VARMA: The Board gives the degree or the University gives the degree?

WITNESS: At present the degree is given by the University.

SHRI MAN SINGH VARMA: Formerly it was under the Board?

WITNESS: Yes. The Board can also start degree courses.

SHRI PAMPAN GOWDA: Without proper teaching and syllabus, how can a degree be awarded?

WITNESS: We have to change our syllabus. The diploma is a four-year course after the High School examination and the degree is a five-year course after Intermediate. We have to change our syllabus and all that.

SHRI K. C. PANDA: Dr. Sarkar, you said your Board is also issuing degrees. Can your Board affiliate other colleges outside the State?

WITNESS: Yes, we have done it. There is one college in Jaipur, one in Bharatpur and another in Gwalior.

SHRI K. C. PANDA: Degree colleges?

WITNESS: No, they are diploma colleges.

SHRI K. C. PANDA: You have also said that there may be some refresher course for registered homoeopaths to convert them into degree-holders. What is your view about having some examination or a short course of training for them?

WITNESS: Yes, that is what we suggest, not only to fresh people but to those who are already registered, those who are unqualified but who were registered in 1958 on the basis of their length of practice.

SHRI K. C. PANDA: What will be the duration of the course?

WITNESS: We have recommended two years for the refresher course.

SHRI K. C. PANDA: What will be the duration of the course for converting the diploma into a degree?

WITNESS: That we have not worked out as yet.

SHRI K. C. PANDA: Don't you feel the necessity?

WITNESS: Yes, we do. At present the Board is only giving diplomas, not degrees. The Kanpur University has just started the degree course.

DR. JUGAL KISHORE: You have a large number of enlisted practitioners in your State. What are you going to do about these people? In case this Bill becomes an Act, these people will not be allowed the right to practise.

WITNESS: I think enlistment was done only on the basis of an undertaking that when they start practising homoeopathy as a whole-time profession, they will be registered.

DR. JUGAL KISHORE: What steps are you going to take in seeing that these people are registered in the near future? You are the Vice-Chairman of the Board. So we expect that if they are fit for registration, they should be registered without any further delay.

WITNESS: The point is, in the beginning those people who were practising homoeopathy as a parttime job only were enlisted. And as soon as they stopped working anywhere else and took up homoeopathy as a whole-time job, they were supposed to be registered.

DR, JUGAL KISHORE: After this Bill becomes an Act, will you still keep this enlistment clause open?

WITNESS: Then we will take the Central Government's advice on that point,

CHAIRMAN: You know full well that this Bill when enacted will never recognise enlisted practitioners as J equal with the registered practitioners. Why don't you advertise through the press medium that the people who are cnlisted can, if they like, get themselves registered? The State Board may decide whether there should be any test before they are given registration. Otherwise, this Act will debar them from practising and they will hold you responsible for not creating opportunities for them to register themselves.

WITNESS: I think we will see to it. SHRI MAN SINGH VARMA: Should a doctor registered in a particular State be allowed to practise anywhere in the country or only in that particular State? What is your opinion?

WITNESS: I think once this Act comes into force, you have to allow everybody to practise anywhere in the country; but at present in U.P., we see whether the doctor registered in a particular State has got a fourydır diploma. There are certain States which have got a two-year diploma also. We only recognise people who have got a four-year diploma.

CHAIRMAN: I understand that you are recognising colleges and institutions which offer sub-standard education.

WITNESS: As far as my knowledge goes, I do not think there is anything like that. But, as you know, private colleges have got so many difficulties and there are so many parties and factions amongst them. There are factions in the managing committees.

CHAIRMAN: Those are private colleges, but recognised by the Board. Why do you recognise a sub-standard college? Production of doctors from a substandard college is not healthy.

this because we go to the colleges, annual inspections are done by our members. I personally have gone to so many colleges and the examination that we hold through the UP Board, I think, is very stiff and we are trying to avoid copying and approaching examiners and all that. This I\personally take care of.

CHAIRMAN: Quite right. That is about the examination. But what, about teaching? We do not want many students to fail because of bad teaching.

WITNESS: That depends mostly on the students also. Certain people enter these colleges only to get a diploma and to be called the so-called doctors. So they do not read and they try to use unfair means in the examinations.

CHAIRMAN: No, no. If the is a bad student, there is no reason why you should admit him. But if there is bad teaching in your homoeopathy college, how do you expect people to entrust you with their cases?

WITNESS: I do not know from where you got this report. I do not think there is any such substandard college.

CHAIRMAN: The Registrar himself stated that your colleges are substandard. That report your Registrar himself gave us. It is a very bad state of affairs of the homoeopathy colleges in your State ...

WITNESS: As far as financial conditions are concerned, they are actually substandard.

CHAIRMAN: Right. You are not to be blamed for the financial stringency of the State Government. That you can take up later on with the State Government. But whatever resources you have at your disposal, you have to see that they are channelised

in a proper way and that the money goes to the proper persons and proper institutions. If the colleges are substandard, Awhy do you recognise them?

WITNESS: Actually when we find that the college is substandard, then we dérecognise it.

CHAIRMAN: How many colleges have you derecognised, say, during the last five years?

WITNESS: Three.

CHAIRMAN: How many colleges have you recognised fresh?

WITNESS: Hardly three fresh; two in other States.

SHRI MAN SINGH VARMA: You must be having certain conditions for recognition. Unless those institutions fulfil those conditions you will not recognise them.

WITNESS: Yes, exactly. We do not recognise them otherwise. I myself personally made a list of minimum requirements for first year, second year, third year, and so on. And they have got to have their hospitals also.

DR. K. NAGAPPA ALVA: You have got certain criteria, certain conditions and minimum requirements that these colleges should fulfil. How many colleges, I would like to know, are there in UP altogether?

WITNESS: 11.

DR. K. NAGAPPA ALVA: Do these two or three derecognised colleges are also included in that number?

WITNESS: Yes, because unfortunately we disaffiliated these colleges but these people got a stay from the Ministry. That is the problem with the Board.

DR. K. NAGAPPA ALVA: Is there any examination board?

WITNESS: Actually the UP Board is the main examining board.

DR. K. NAGAPPA ALVA: The Homoeopathy Board is there formed by the Government, recognised by the Government. But have you formed any sub-committee of that?

WITNESS: Yes, the faculty of education. That is the examining body.

DR. K. NAGAPPA ALVA: Do you know whether any of these colleges are doing research on any of these diseases? Are you encouraging any research?

WITNESS: There is the National Homoeopathy College at Lucknow.

SHRI PAMPAN GOWDA: What were the subjects on which they were doing research?

WITNESS: I cannot tell you because it is not on the Board. It is under the University.

DR. K. NAGAPPA ALVA: In all how many years of course is it?

WITNESS: Four year course.

DR. K. NAGAPPA ALVA: What is the minimum qualification for admission?

WITNESS: High School with science.

SHRI MAN SINGH VARMA: Thank you, Doctor Sahib.

(The witness then withdrew).

[The Witness: (Dr. P. Pandey) was called in.]

CHAIRMAN: Dr. Pandey, please introduce yourself to all Members.

WITNESS: I am from Meerut. I have been practising homoeopathy for the last thirty years there at Meerut.

CHAIRMAN: Dr. Pandey, before you proceed with giving your evidence, I must tell you that whatever evidence you tender before this Committee, the questions Members put to you and the replies you give, everything is confidential and it should be treated as such till the report of this Committee is placed before both Houses of Parliament. Now we may proceed.

Are you attached to any institution, homoeopathy college or homoeopathy institution? Do you have any homoeopathy institution there?

WITNESS: None.

CHAIRMAN: Have you gone through our Bill?

WITNESS: Yes, perfectly.

CHAIRMAN: Have you any objections?

WITNESS: We have a few.

WITNESS: I have a few suggestions. In the definition Bio-chemistry system has not been included properly. It should be included because this is not very much different: from Homoeopathy.

CHAIRMAN: We also agree with you on that. Any more suggestions?

WITNESS: As regards nomination to the Central Council, as we have five zones, till we have the faculties developed, two or three should be nominated from the teaching staff belonging to the recognised Homoeopathic colleges in each zone.

CHAIRMAN: You are the only witness who has made such a suggestion. We do not have any administrative zones in this country. In the absence of zones, can-you think of some other alternative?

WITNESS: May be a list can be made of all recognised institutions in the country, and out of that on the basis of groups, such as Bombay, Calcutta, etc. two or three from each group can be nominated. But nomination can be only from the teaching staff of the recognised colleges. CHAIRMAN: That is what the have provided for in the Bill also Only Principals and professors of recognised colleges are eligible.

WITNESS: But that is a little different.

CHAIRMAN: Apart from at a basis, what should be the other basis for nomination? What should be their qualifications? What kind of people you want as nominees?

They should only be WITNESS: properly qualified people. We have a large number of unqualified but registered Homoeopathic Doctors in States where the registration facilities are there. As I have already indicated in my written memorandum. the percentage of nomination in respect of duly qualified Homoeopathic registered Doctors, unqualified but Doctors and Government nominees should be 60, 30 and 10 respectively. Further nomination should be from among those who have completed at least 5 years after passing out.

SHRI PAMPAN GOWDA: Should it be 5 years of practice or five years after: registration?

WITNESS: But then there are many States where there is no registration.

CHAIRMAN: Which are those States?

WITNESS: Punjab and probably Jammu and Kashmir.

CHAIRMAN: Probably Tamil Nadu also. What do you want us to do in respect of those cases?

WITNESS: You pass the Bill and control the whole country. Even in those areas there are associations. In consultation with them, duly qualified, people can be nominated.

CHAIRMAN: Any more suggestions?

WITNESS: The punishment for those who wilfully or falsely assumes or uses any title implying that he holds a degree or diploma

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or licence which is issued by the Board should be very deterrent. Rs. 250/- is nothing after all. The following two clauses should be added in the Bill at the appropriate place:

Wheever wilfully or falsely assumes or used any title or descr.iption or any addition to his ename implying that he holds a degree, diploma or licence or certificate conferred or issued by the N Board or that he is a registered practitioner or that he is entered in the list maintained under Section....shall on conviction be punishable with fine which may extent to Rs. 250/- for the first offence under this section and with fine which may extend to Rs. 500/for every subsequent offence.

I am of the opinion that the fine should be still more.

CHAIRMAN: Should the punishment be imprisonment and fine?

WITNESS: Yes, both. because there are lot of irregularities going on. Unless they are checked and deterrent punishments awarded, these will continue. There should be imprisonment also.

The other clause to be added is as follows:

No person other than a body or institution authorised under this Act shall confer, grant or hold himself out as entitled to confer, grant, or issue any degree, diploma or licence which is identical with or is a colourable imitation of any degree, diploma or licence granted by any Board.

I want the penalty for these offences to be very deterrent. In Meerut a long time back there was an institution giving 2 or 3 weeks coaching and giving M.D. degrees, for Rs. 100/or Rs. 200/~.

CHAIRMAN: Any more suggestions?

WITNESS: The other suggestions are in my written replies.

DR. K. NAGAPPA ALVA: What is your opinion about Doctors who are qualified in Homoeopathy in England? There are two classes of Doctors, in Allopathy. One is Doctors with MBBS degree obtained here gualifications with post-graduate obtained outside India. The other is Doctors who have got qualifications from other countries, particularly England. What position you would like to give to Homoeopathic Doctors who have obtained their qualifications from England? I am speaking about their position in the Central Council.

They should be treat-WITNESS: qualified registered ed as other Homoeopaths here. There should not be any difference.

DR. K. NAGAPPA ALVA: Their services will be of greater advantage to build up medical education here.

WITNESS: First of all we should know what courses they have undergone there. Personally, they should be treated on par with our own Doctors.

CHAIRMAN: Thank you.

(The witness then withdrew)

[The witness (Dr. Sat Prakash) was Called in.]

CHAIRMAN: Before you give your evidence, I want to inform you that the proceedings in this Committee are confidential. Now you can give your suggestions.

WITNESS: Before I give any suggestions, I want to say that I am al<o a member of the Executive Committee of All India Homoeopathic Medical Association and I have been responsible for organising the Branch of this Association in Chandigarh. We have considered this Bill in our Association and also we have submitted a memorandum. I had a talk with the members of the Executive Committee and they all agree with the suggstions I am going to offer.

We have suggested the addition of four provisions in the Bill in an appropriate place. No. 4 says:

No Court shall take cognisance of any offence under this Act except on a complaint in writing by an officer empowered by the Central/State Government for this purpose.

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This is not required to be added wand my other colleagues in the Executive Committee agree with me jeopardise because this will the future growth of Homoeopathy and mushroom type of institution would exploit innocent masses by awarding them diplomas and degrees for their own monetary benefit. We are facing this sort of difficulty in the Council at Chandigarh. There is already an Act there and this particular provision is there in that Act. The person who is empowered to take action under the Act of Punjab is sleeping over the matter. You must have read in the newspapes that a person, Dr. Chavan by name, is issuing diplomas. He is doing harm to the cause of Homoeopathy and to its good name. He is also giving a wrong impression to people about Homoeopathy by giving cheap degrees and diplomas, whereas Homoeopathy is scientific therapeutic aid to them whenever necessary and given by recognised physicians. Therefore, in the Central Bill at least this provision should not be inserted. If I am interested in Homoeopathy as an individual, and if I come across such instance, I should be in a position to bring it to the notice of the authority concerned. Now only the empowered officer can do it. I have discussed this point with my colleagues and they all agree with me that this should be deleted. If the empowered official is a man of weak moral character, he can be bribed by people so that no action can be taken by him against them. That will only encourage mushroom institutions and certain individuals because the steptaking person is bribed.

SHRI MAN SINGH VARMA: He says that if a particular person is a corrupt person, we do not have any remedy either from the court or from the person that is being appointed.

WITNESS: It is exactly so. I will just give an example. I am a Member of the Homoeopathic System of Administra-Medicine. Chandigarh tion. There is a person who is issuing false degrees to the innocent people. He is receiving money and there is enough evidence available. The person who has been appointed by the Chairman of the Council to Allopathic enquire into this is an Surgeon who is already so much engaged in his work that he has no time to enquire into this. That man is still advertising in Delhi papers, Trivandrum, Calcutta and Bihar papers and he is receiving money orders. He is selling diplomas for Rs. 5/-, Rs. 10/- and Rs. 100/-. We are unable to check that activity under the Puniab Act. I have brought a copy of that Act also. I do not want the same mistake to be repeated here in our Central Act. We must learn from our past experience. I am against the appointment of one person. Let the Act remain silent on this point. Let the law take its own course.

SHRI K. C. PANDA: Is there some such provision in the Central Act?

WITNESS: There is no such provision at all.

SHRI K. C. PANDA; Cases of Punjab State will be dealt with by the Punjab Act. In our Central Bill, we should keep a provision for that. But he has to get his remedy through his State Act.

WITNESS: The All India Homoeopathic Medical Association has sent a memorandum to the Joint Select Committee of Parliament requesting that the following four provisions should be added in an appropriate place in the Bill. I do not agree with the last provision.

CHAIRMAN: We are not accepting that.

DR. K. NAGAPPA ALVA: You also suggested that there should be a clause by which we can punish those culprits. We must make the penal clause very clear to put a stop to this mushroom growth of colleges. We must bear in mind that point.

CHAIRMAN: We shall make it absointely: clear. in our Bill:

DR. JUGAL KISHORE: How old is your Council at Chandigarh and have you done any registrations?

WITNESS: Our Council is 2½ years old: We are short of finances. This Council is made up of all the qualified people: Five people: are institutionally qualified and 3 members are taken on the basis of experience. Two of the doctors are allopathic doctors and the Chaitman is the Finance Secretary of

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Chandigarh Administration. Even then we are short of funds. Finance Secretary is not able to help us and we are where we were. The word/or "Union territory" should be added wherever the word "State" appear in the Bill.

DR. JUGAL KISHORE: How many doctors are there in Chandiarh?

WITNESS: There are about 200 doctors. Whole-time practitioners will be about 75. The majority of them are institutionally gualified.

CHAIRMAN: Thank you Dr. Satya X

(The witness then withdrew)

(The Committee then adjourned.)

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