

PROGRESS OF HOMOEOPATHY IN OUR COUNTRY SINCE THE DAY OF INDEPENDENCE

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Only a few months after our independence a homoeopathic resolution put by the then ruling Congress Party was unanimously adopted by the Constituent Assembly of India (Legislative) on 17th February 1948. As per that resolution a Homoeopathic Enquiry Committee was formed which submitted its report in 1949, accepting the scientificity of Homoeopathy and recommending its full recognition by the government and formation of a Central Homoeopathic Council. The Planning Commission accepted 5 out of 7 proposals submitted by a Committee appointed by itself in 1951 and incorporated them in its report on the First Five Year Plan. The Government of India constituted an ad-hoc committee on Homocopathy in 1953 which was replaced by Homoeopathic Advisory Committee in 1956 with the Secretary, Ministry of Health as Chairman and the D.G.H.S., Director, Medical Research and six homoeopaths as members. An honorary Adviser in Homoeopathy to the Ministry of Health, with an honorarium of Rs. 1,000/-, was appointed in May 1962. Dr. K. G. Saxena was the first Adviser.

Homoeopathy received recognition of the Government of Bengal by an executive order even before independence in 1947. The regular Homoeopathic Act in West Bengal was, however, passed in 1963. Passing of regular legislative acts on Homoeopathy and institution of State Homoeopathic Councils/Boards took place in U.P., Bihar, Delhi and Bombay in 1947, 1953, 1956 and 1960 respectively, then followed by other States: and the process is still going on.

Soon after the institution of the Homoeopathic Advisory Committee various sub-committees were formed, the most important of which were as follows:

- (1) Research and Technical Sub-committee.
- (2) Rural Homoeopathic Medical Aid Sub-committee.
- (3) Education Sub-committee.
- (4) Homoeopathic Pharmacopoeia Committee.
- (5) Homoeopathic Sub-committee of the Drugs Technical Advisory Board.
- (6) Committee for Constituting a Central Homoeopathic Research Institute.
- (7) Central Council for Research in Indian Systems of Medicine and Homoeopathy.

The last and most culminating event was the passing of the Homoeopathy Central Council Act in December, 1973, soon followed by the institution of the Central Council of Homoeopathy.

From this brief mention of events it is quite evident that, so far as the Central Government is concerned there was no dearth of attention and initiative with respect to Homoeopathy. Still the fact remains that there was very little progress in any aspect of Homoeopathy, and with solitary exception of one or two States, like Kerala and U.P., hardly any State Government showed any concern about Homoeopathy; and the coldest in this respect was the Government of West Bengal, the premier and citadel of Homoeopathy in the whole country, where the State Faculty was formed and functioning since four years before the foreign rulers left India.

There were, of course, various reasons for this paradoxical situation, and it is not possible to go into them in the space of this article, but the following facts are self-evident:

(1) The money spared by the Central Government for the progress of Homoeopathy (which itself was far too inadequate for the barest necessity) was not spent in a well planned and productive way. Even a considerable part of the sanctioned money remained unspent. For example; one crore rupee was sanctioned for Homoeopathy in the Fourth Five Year Plan, but later, it was cut down to Rs. 58.3 lacs, only because very little of the initially sanctioned sum was spent in the first 3 years of the period.

(2) The authorities at the helm of affairs of Homoeopathy at the Centre lacked in prudence and circumspection. They did not even think of evolving a definite pattern of assistance to the various State Governments, and thus involve the latter in the task of developing Homoeopathy. The amount of money spent by the Central Government so long as ad-hoc grants frittered away without any palpable benefit to the progress of Homoeopathy.

In such an impasse some people like ourselves had long been trying to find out a person with deeper insight, wider outlook and foresight and more assertive in personality, to take up the key post of the Central Homoeopathic Adviser. And ultimately we selected Dr. Jugal Kishore for the same. But he was too much entrenched in his vast professional practice and literary work (preparing the latest edition of his monumental Card Repertory), drug proving research, etc. Still, failing to find any better man to save Homoeopathy in such a critical but opportune situation, with immense possibilities on either way (progress or retrogression) we prevailed upon Dr. Jugal Kishore to take this ponderous responsibility of topmost and all-covering importance. It was after more than two years pressure and persuasion that he was made to accept this assignment of basic and decisive significance, on which the fate of development of Homoeopathy in the country depended, at serious cost of all his other involvements, which were also of very high value. Ultimately, he had to yield to our pressure even against the resistance of his family on the ground of his indifferent health and of serious financial loss, and he accepted the post of Homoeopathic Adviser to the Ministry of Health and Family Planning by the end of the year 1972, that is, in the fag end of

the Fourth Five Year Plan, on absolutely honorary basis, declining to accept the honorarium of Rs. 1,000/- per month.

Not that we wholeheartedly approve of all the details of his activities as the Central Homoeopathic Adviser (and that is never possible in a democracy), and we have often to oppose many of his views and actions, but the obvious fact has become brightly patent even to the blind and prejudiced, that the progress of Homocopathy in the whole country has been raised to a much higher gear since Dr. Jugal Kishore's taking up the steering wheel. Some of his activities may be mentioned here.

I. Grant-in-aid in the teaching institutions: Just after taking the office his first task was to chalk out a pattern of Central assistance to the various State Governments, especially on the score of homoeopathic education, involving the latter in the matter of financial aid to the various homoeopathic colleges, existing in their respective States. By this most simple, but long overdue step, many homoeopathic colleges, all over the country, with a minimum prescribed standard of development, were enabled to procure sufficient non-recurring and recurring grants from both Central Government as well as their respective State Governments. *This step has definitely set Homoeopathic education on to a new gear of progress.*

II. Reconstitution and activation of some of the existing committees and sub-committees and formation of some new ones: Just after the first step, he started reconstituting the various functional committees and sub-committees for Homoeopathy with experts of various related disciplines, and in consultation with them, replanning the activities of each of them. On this score the following few may be mentioned as examples:

(1) Homoeopathic Pharmacopoeia Committee: This was in existence since as early as September 1962 and was moving in snail's pace, merely compiling facts from the various existing books, but failing to publish even the First volume in their long tenure of life. Dr. Jugal Kishore, just after taking up the Chairmanship of the Committee, not only reconstituted the same but formed several smaller Working Groups with high ranking experts in the different disciplines related with this subject with a view to yield higher quality output, with top speed. The first two volumes of the Homoeopathic Pharmacopoeia have long been published. The printing of the third volume is already complete and is just ready for publication. The preparation of the fourth volume is going on in good speed. All these works are, however, being immensely handicapped by gross inadequacy of clerical establishment in the department.

(1a) Pharmacopoeia Codex: Our materia medica contains a large number of insufficiently proved or totally unproved drugs, but have gained entrance into homoeopathic practice only on clinical indications. Essential information about these drugs should be highly useful. As they cannot be admitted in the official pharmacopoeia, they are being compiled in the form of a Codex.

(1b) Standardization of drugs and their finished products: One of the most important tasks of the Pharmacopoeia Committee should be to fix up the standard of the products. Without this, there cannot be any effective official control over the manufacture of homoeopathic drugs. But there existed no laboratory to perform this basic work until Dr. Jugal Kishore took up this task immediately after joining the office. In the initial stage this laboratory was working in a miniature scale accommodated in the narrow over-crowded premises of the Health Ministry itself (Nirman Bhavan, New Delhi). Later on, sufficient space was acquired at Ghaziabad, where it has developed into a fully equipped and manned, up to date laboratory, under the able directorship of Dr. P. N. Verma, drawing admiration of all, including the foreign pharmaceutical concerns. More than 180 drugs have been standardized so far. The works are continuing there with steadily increasing speed and efficiency. To effectively aid and complement this work, a library also has been set up.

As a matter of fact, the dynamic personality of Dr. Jugal Kishore has immensely activated not only all the members of the Pharmacopoeia Committee but the whole personnel of the same, and that is why the quantity and quality of output of this Committee are so much remarkable.

III. *Homoeopathic research*: In the previous phase, large amount of money was spent on this item in an ill-planned way, and that is why the output was practically nil. In the present phase, arrangements and methodology are getting more and more rationally planned, and consequently the efficiency and output in different items of research have been gathering momentum.

Previously homoeopathic research activities were tagged with those of Indian system of medicine under the common umbrella of the Central Council of Research in Indian Systems of Medicine and Homoeopathy. It is after prolonged ceaseless efforts that homoeopathic research has been freed from the common control; it can now develop itself freely, as per its own genius and requirements. A new Central Council of Research in Homoeopathy has been constituted in December 1978, followed by formation of a Research Advisory Board with top-ranking experts in the different aspects of Homoeopathy. It can now be expected that homoeopathic research will now proceed on with adequate quality and speed.

IV. *Homoeopathic teachers' orientation training course*: Proper homoeopathic education and training are the most basic requirements on which the fate of Homoeopathy in the country solely depends. But dire scarcity of efficient homoeopathic teachers has long been racking the heads of all people seriously bothering for this problem. In the previous regime, solution of this problem was attempted in a most thoughtless and planless manner, in the form of Travelling Lectureship Programme. That programme did nothing but provide an opportunity to some selected people like us to travel to the different distant cities of the country at government expense.

A far more rational and effective plan has been worked out by the present Adviser in consultation with various experts in the country, named as Homoeopathic Teachers' Orientation Training Course. It goes without saying that this arrangement can never be a thoroughly effective, radical and permanent solution of the problem. This is only a stop-gap measure, until a permanent solution can be achieved.

V. *The National Institute of Homoeopathy*: With a view to make a permanent and effective solution of this most basic problem, the National Institute of Homoeopathy has been established in Calcutta, mainly purported to yield sufficient number of well-trained teachers and research workers in Homoeopathy, regularly every year. This Institute has started its regular activities in October 1977, with immense scope for extension in the various related aspects of homoeopathic education and research. In the Fifth Five Year Plan Rs. 74 lacs have been set apart for this Institute out of the total Rs. 165 lacs for Homoeopathy.

VI. *Scientific evaluation of Homoeopathy and its utilisation in allopathic institutions and hospitals*: By prolonged negotiation and pressure the present Adviser has been able to persuade the authorities of the top national institution of Allopathy, the *All India Institute of Medical Science*, to open a homoeopathic unit there, under the supervision of himself. The senior experts of the Institute have already become thoroughly convinced about the scientificity of Homoeopathy and its utility in various conditions; and have already submitted a report to the Health Ministry to that effect, recommending continuation of the unit. This has great implication on the opening of homoeopathic wings in all the existing hospitals.

VII. *Appointment of special officers for Homoeopathy in different States*: Looking to the interests and development of Homoeopathy in any particular State needs some special Officer/Officers for the purpose. But most of the State Governments had remained indifferent in this matter. It is through continuous effort of the present Adviser that such Officers have been appointed in the following States:

- (1) Adviser and Director in Homoeopathy in West Bengal.
- (2) Deputy Director (Homoeopathy), U.P.
- (3) Deputy Director (Homoeopathy), Madhya Pradesh.
- (4) Adviser (Homoeopathy), Gujrat.
- (5) Adviser (Homoeopathy), Rajasthan.
- (6) Joint Director (Homoeopathy), Andhra Pradesh.
- (7) Upgrading of the post of Asst. Director (Homoeopathy) to that of a full Directorate in Kerala.

VIII. *Wide opening of job facilities for homoeopaths*: (1) Jobs under the various State Governments: As already mentioned, due to the active initiative and continuous persuasion by the present Adviser, the interest of many of the State Governments with respect to Homoeopathy has increased

considerably. They are now appointing steadily increasing number of qualified homoeopaths in their various health schemes.

There is a possibility of further increase of these facilities when homoeopathic wings will be opened in various existing hospitals, health centres and dispensaries.

(2) C.G.H.S. dispensaries: In the long period of the previous regime, only three C.G.H.S. dispensaries could be opened, all in Delhi. But the present Adviser induced the Central Government to adopt a new policy of opening homoeopathic wings in all the allopathic C.G.H.S. dispensaries in all the towns of the whole country. Through this policy 31 qualified homoeopaths have already been appointed, in a short period of three years.

(3) As the activities of the different departments of the Homoeopathy in the Central Health Ministry are steadily increasing, the more and more job opportunities for qualified homoeopaths are coming into existence.

(4) The gradually increasing government sponsored homoeopathic teaching institutions (from degree college up to the N.I.H.) are creating vacancies at all levels (*from demonstrators/research assistants to principals/directors*).

This outline narration should suffice to make us aware of how high level multifaceted development, with possibility of extension of each facet, Homoeopathy has been raised by the present regime, steered by our present Central Adviser, Dr. Jugal Kishore. Now it is high time to look seriously to the other side of the problem. And that is, whether the homoeopathic society, as it stands at present is prepared to fit in within this high stage of development in the various fronts. Have we got sufficient number of cadres to advance and extend the possibilities of development that have come into existence, or even at least to effectively fill up the vacancies, that have already been created and are steadily increasing from bottom to top, from lowest rank medical officers in various dispensaries, research assistants, demonstrators to the high rank officials, teachers, principals, research officers, directors, etc. We had occasionally been associated with the Public Service Commission and Interview Boards for filling up some vacancies at different levels. Our experiences were really alarming. If we fail to solve this problem very shortly, all the grand possibilities occurring today shall turn into veritable curse for Homoeopathy in our country. The only way this problem can be solved is by radically and quickly improving the standard of education and training in our teaching institutions. But very little light is visible in the general sphere of our so-called homoeopathic colleges. Much talk is going on in the field, but little palpable action as yet. The homoeopathic society should take this as an S.O.S. call.
