

## HOMŒOPATHIC DIPLOMA COURSE OF TRAINING: 4 YEARS OR 3 YEARS?

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Homœopathic institutional training is a much-debated subject. It is long receiving the attention of the Central Government of India, The Homœopathic Advisory Committee, The Research and Technical Sub-Committee, etc. At last, more than a year ago, the Central Government formed an expanded Research and Technical Sub-Committee, co-opting a few from the Homœopathic Pharmacopœia Committee, Principals of Homœopathic medical institutions affiliated to Homœopathic State Faculties or Boards of different States, representatives of the different Homœopathic State Boards, etc. and asked them to submit a comprehensive scheme regarding the curriculum and syllabii for Homœopathic training on an uniform basis to be applicable to the whole of India. Accordingly the said committee, after a year's labour, have submitted such a scheme comprising the Diploma Course of 4 years duration and a Degree Course of 2 years duration in continuation of the Diploma course. This has been an unanimous report submitted by the said committee. The Homœopathic Advisory Committee in their meeting held in January 1965 decided to convene a meeting of the representatives of State Governments, State Homœopathic Boards/Councils, etc. The Diploma and Degree Course for Homœopathy, as formulated by the Advisory Committee will form the basis of discussions.

The expanded Research and Technical Sub-Committee took into consideration the different patterns of Homœopathic education as existing in the present-day world, viz.

- (1) Homœopathic training on a post-graduate level as existing in U.K. and the European continent.
- (2) Bicameral system in a common institution of modern medicine, i.e. common pre-clinical course of training for both the students of modern medicine and Homœopathy and bifurcation of training for them in the clinical course.
- (3) Teaching of Homœopathy as an elective course in an

institution of modern medicine, i.e. any students wanting to study Homœopathy may attend certain courses of lectures on Homœopathic subjects, delivered during the clinical course of training in an institution of modern medicine as existing in U.S.A.

(4) Completely separate institution for Homœopathy—a 4-year's diploma course in Homœopathy as existing in our country; and

(5) Completely separate Homœopathic institutions with a graded course of licentiate (4 years duration), graduate (2 years duration) and post-graduate standard (further 2 years course)—a scheme envisaged and unanimously accepted by the said committee.

The merits and demerits of each of the pattern of Homœopathic training have been discussed in full and our views have been expressed in unequivocal terms, many a time, through the press and the platform. So repetition of those discussions and arguments are not needed here. Out of all our deliberations a new concept of Homœopathic training has been evolved and because of its originality, novelty and extreme suitability in our country especially it will bear repetition and we need no apology for doing so. And this is the scheme of graded course in teaching Homœopathy.

Considering the vastness of our country, poor economic condition of the general mass, dearth of qualified physicians, wide gulf in the standard of living in the cities and villages, there should be graded medical service for the whole country to render medical help to all strata of society, both in towns and villages. From the academic point of view, this graded course is also desirable as intensive teaching in Homœopathic philosophy and Homœopathic Materia Medica with minimum working knowledge of the auxiliary sciences (also to avoid the danger of crowding out of Homœopathic subjects by the ever-expanding and progressive satellite so-called basic medical sciences) can be imparted in the licentiate standard of teaching. A student undergoing this course should be thoroughly orientated with the Homœopathic outlook regarding Materia Medica, in the beginning. Those who are desirous of acquiring maximum amount of knowledge in

matters medical with Homœopathy as a speciality may go up for graduate and post-graduate course of training.

In this system of graded-course-training we might solve the problem of how best to turn out complete Homœopathic physicians who will be able to hold their own in every field of medicine. This splitting-up of the course of training will also solve the problem of avoiding crowding out of Homœopathy at the cost of non-homœopathic subjects as well as the problem of how to safeguard Homœopathic orientation with regard to life, health, disease, treatment and cure. And this goal might be achieved in a better way if each and every Homœopathic student who desires to take up the degree course in Homœopathy, has got to pass through the Licentiate course but may break off their studies after securing the Licentiate Diploma to take up Homœopathic practice. This arrangement will serve two-fold purpose, viz. adequate supply of medical personnel for the teeming millions of Indian masses who reside mostly in villages as well as the maintenance of the standard of Homœopathic education to turn out full-fledged and complete Homœopathic physicians from amongst whom will come out Homœopathic teachers and Research-workers. This graded-course of teaching will also avoid unnecessary expenses due to duplication of training institutions in Homœopathy.

So we make our views clear and position unassailable. Through the scheme of Diploma and Degree-course types of education with curricula and syllabii based on the unanimous decision arrived at the Sub-Committee meeting, we hear some grumbling and suppressed resentment and difference of opinion regarding the length of the Diploma course—4 years or 3 years?

The most important argument put forward by the advocates of the three years' Diploma course is that this length of time is enough for drilling into a student's mind the fundamentals of Homœopathic principles and practice with a minimum working knowledge in so-called basic sciences and other non-homœopathic subjects. They rather, think that too much details in knowledge in non-homœopathic subjects will deviate a homœopathic student's mind away from the right homœopathic orientation with regard to homœopathic principles and practice. Further, this

shorter time will reduce the cost of training and will conserve the students' energy for fruitful purpose. And above all there is a psychological truth that it is easier to learn a new thing than to unlearn what has been once learnt. Some of the fundamental concepts of Homœopathy run so much counter to those of modern medicine and its practice that learning enough of these two schools of medical systems at a time might produce serious confusions of thought in a student's mind and would defeat the very purpose of institutional training in Homœopathy. Lack of synthetic spirit would produce a chaos in the brain. Instead of assimilating thoughts foreign to Homœopathy in their proper light this pattern of teaching would produce a physician who would be neither fish nor flesh, i.e. who would neither be a good Homœopathic prescriber nor a good modern medicine-man. The result would be a queer hodge-podge amalgam of a low grade eclectic variety.

On the other hand the advocates of a four-years' Diploma course in Homœopathy, like to dig deeper into the root-problems regarding the general educational background of a prospective medical student in general and a Homœopath in particular. The prospective doctor should receive a liberal and general education before embarking upon his special medical studies. To the prospective medical student the curriculum shall have time to learn all such subjects as together should form the general educational background of an ordinary cultured citizen. The physician should first of all be an educated man, that is required by his position in the community and his relation to the patient and patient's family or to the people at large. A prospective medical student will have to be trained to develop the scientific attitude, which includes a respect for objective truth, the elimination of prejudice and personal bias, the urge to make additional observations and to experiment when these promise help in the solution of a problem, and the ability to draw accurate inferences from observed data—in short, he must have acquired some amount of maturity of brain. A short-term curriculum fails to allow students time and opportunity for reflection, discussion and proper assimilation. Intellectual digestion needs also some amount of time like its physical counterpart. Some are of opinion that

better results would be obtained if the students were taught fewer facts, allowed to discover things for themselves and encouraged to reflect on what they have learned and discovered. In other words, the muscles of his mind ought to be exercised rather than jamming the brain with too many informative facts. The student must have leisure, both for relaxation and for reflection for proper assimilation of his intellectual food. Some are of opinion that a syllabus in which every minute is allotted to defined work or duties is to be condemned.

A learned student and colleague of mine (Dr. Jugal Kishore) writes in this connection: The doctor whose knowledge is confined to medical sciences alone is an imperfect doctor, no matter how well-versed he may appear to be in that science. What does he know of medicine who knows medicine alone? . . . "It must be realised that the proper subject for studying man is Man himself—the man with his threefold aspects, physical, vital and mental—and the spirit permeating, immanent and transcending his organism. A physician whose subject of study is this living man, man the unknown, must possess a wide and varied knowledge. Medicinal science might be a technology but it needs a man to study, help and cure a diseased man. Thus the increasing concentration on scientific technicalities has missed the wood for a tree and has led to virtual disappearance of scholarship amongst medical men. Study of human diseases leaves no time for humanities and the only culture we know now is the bacteriologist's broth." A physician with a fully developed personality will be able to establish a right type of doctor-patient relationship to bring about cure in maximum number of patients who flock to him for relief from all the diseases that human flesh is heir to.

Now if we want to turn out such a right type of physician we should not cut down his curriculum for medical studies to a minimum but should dilute his activities in time. He will be a better student and a better doctor if we give him enough time to reflect on what he has learned, to allow new facts to gain roots, time to develop his personality, time to learn other important branches of knowledge, suited to his purpose, and also time for devoting his energies to extra-medical interests and to the

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Lach., Medorrh., Phos. Sensation of heat of left leg: Acon, Graph. Rx. *Graphites* 200, one dose, with complete relief.

Case 4—Divorcée, aged 30, animated blond, woke from sleep with a sensation of being paralyzed, felt as if going to die, heart pounding. Same thing two weeks later. Sensation as if electric shock in her head on falling asleep. Three weeks later suddenly fell to the floor with vertigo, and thereafter 4 or 5 times fell to the left. (History of goitre, right side.) Vertigo on looking downward. Examined for brain tumor, negative. Terrified at suggestion of brain tumor. Eye grounds normal, ear and sinus examinations negative. Tentative diagnosis Menières disease. *As if electric shock*, Kent, page 230. Alumina, Cicuta, Phos. *Vertigo on looking down*, Kent, page 100: Phos. in high degree. *Complaints from fright*, page 49: Acon., Ing., Lyc., Nat. mur., Op., Phos-acid, Phos., Puls., Sil. *Goitre, right-sided*, Kent, page 147: Phos. Kent, page 99, *Falling to the left does not have Phos.*, in spite of which, because she is a chilly, volatile, scary, trembly type, I gave *Phosphorus* 1M, one dose. No trouble since.

—*Jourl. of the Am. Inst. of Homœopathy, Sept.-Oct., '60*

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corporate activities of a student so that he can win the life's Waterloo while within the college premises.

Considering all these factors we feel inclined to extend the term of the Diploma course to four years while framing the syllabii of medical subjects which might have been crowded in three years' intensive teaching through judicious pruning of items in different subjects.

—*The Homœo. Herald, July, '65*

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