

SARDAR PATEL UNIVERSITY

BHMS Syllabus

6. **Syllabus for Direct Degree Course:** Following shall be syllabus for B.H.M.S. (Direct Degree) Course:-

INTRODUCTION

Basic objectives of education and training in a Homoeopathic institution is to prepare a competent Homoeopathic Physician who is capable of functioning independently and effectively under Rural and Urban set ups.

In order to achieve this, the following syllabus and curriculum has been designed:

A. Sound Foundation:-

To function effectively as a Homoeopathic physician a thorough grasp over the medical concepts is imperative. For this, the educational process shall be perceived as an integrated evolving process and not merely as an acquisition of a large number of disjointed facts.

A student shall have to pass through a Training procedure which encompasses the above well, right from 1st BHMS to IV BHMS and also during the internship period.

He shall undergo an education process wherein learning of **Facts** and **Concepts** right from 1st Year are **in a continuity, in an evolutionary & progressive pattern**. In 1st BHMS, student shall study the fundamental principles of Homoeopathy and will also learn more of applied anatomy than a multitude of minor anatomical details.

In IInd BHMS, a student shall be exposed to very vital concepts of **susceptibility** and **symptomatology** with **Analysis-Evaluation** and details of the Homoeopathic concepts, old logic of Homoeopathy. These will attain much deeper significance (if care is taken by teachers of pathology and Organon-Philosophy) when the current knowledge of INFLAMMATION, IMMUNITY, is correlated well with concepts of susceptibility.

In IIIrd BHMS, there is opportunity to fortify the foundation at the best by correlating between **Theory of Chronic Diseases** and the **Patho-Physiological** facts on the Gynecology, Surgery and Medicine. A student shall have to be taught the spectrums of various diseases in correlation with the spectrum of miasmatic manifestations. He will then be able to use a well concluded **EVALUATION ORDER OF Characteristics to derive an Operationally valid repertorial Totality**.

The knowledge gathered in this pattern will keep him constantly aware of his objectives and his role as a Homoeopathic Physician. The integration will eliminate the state of confusion. The Therapeutics Actions then will be right and complete, utilizing the full repertories of the Medicinal and Non-medicinal measures, keeping him up-to-date about all fresh scientific developments and inculcating values of continuous Medical Education.

B. Execution:-

Maximum emphasis shall be placed on the applied aspects of all the subjects. Thus teachings of Anatomy, Physiology and Biochemistry will demand greater emphasis on applied aspects of these sciences. Teaching of Pathology will demand sharp focus on general Pathology, while Regional Pathology will come up as an application. It shall require correlation with Medicine, Surgery and Gynecology. All these need to be studied from Homoeopathic perspective, hence emphasis on applied aspect of Organon Philosophy & Homoeopathic Therapeutics representing application to all other subjects.

C. Inter-Departmental Co-ordination:-

Essential, the entire approach becomes an integrated approach. All departments shall develop a cohesive well defined programme which demand marked inter-departmental co-ordination.

It is therefore desirable to have teaching programmes wherein, by rotation each department participates in the teaching co-ordinating well with the other faculties with constant updating and evaluation. The co-ordination has to be in the way as given in the text under each subject inside these Regulations. This will ensure fundamental and exceptional clarity.

D. Deductive-Inductive Teaching:-

While teaching, there shall be balance in designing deductive and inductive process in mind. There shall be less emphasis on didactic lectures. Major portion of the time of the students shall be devoted to demonstrations, group discussions, seminars and clinics. Every attempt shall be made to encourage students to participate in all these to develop his personality, character, expressions and to ensure the grasp over concepts rapidly.

E. Patient Oriented Teachings:-

In order to impart the integrated medical education PATIENT has to be in the Centre right from day one of the IInd BHMS.

Importance of social factors in relation to the problem of health and disease shall receive proper emphasis throughout the course and to achieve this objective, **the educational process shall be community as well as hospital based.**

Based on the above concepts the course of studies as laid down in these Regulations will help to fulfill these needs. While doing so, the need of the hour, past experience in learning and teaching is taken into consideration.

ORGANON OF MEDICINE AND PRINCIPLES OF HOMOEOPATHIC PHILOSOPHY & PSYCHOLOGY

FIRST B.H.M.S

INTRODUCTION TO SCIENCE OF HOMOEOPATHY

Organon-Philosophy is a vital subject which builds up the conceptual base for the Physician. It illustrates those principles which when applied in practice enable the Physician to obtain results, which he can explain rationally and repeats them in practice with greater competence. Focus of the Education and Training should be to build up the conceptual base.

Homoeopathy should be introduced as a **Complete Rational System of Medicine** with its **Holistic, Individualistic** and **Dynamistic** approach to life, Health, Disease, Remedy and cure.

In order to achieve this, study of logic, psychology and the fundamentals of Homoeopathic Science become quite important.

It is imperative to have clear grasp over Inductive-Deductive Logic, and its application and comprehending the fundamentals of Homoeopathic Science. Homoeopathic approach for the patients is a Holistic approach. Science demands from the Homoeopathic Physician, to comprehend his patient as a PERSON, his dispositional state of Mind (and Body), alongwith the disease process with its causes. Since we lay great emphasis on knowing the mind, knowledge of the psychology becomes imperative for a Homoeopathic Physician. Thus introduction to Psychology will assist Homoeopathic student to build up his conceptual base in his direction.

I. Fundamental of Homoeopathic Science.

Preliminary lectures on the evolution of medicinal practice by the ancients giving stress to rationalistic and vitalistics thoughts.

1. Short history of Hahnemann's life and contributions.
2. Brief life and contributions of early pioneers after Hahnemann.
3. Brief study of the early history of spread of homoeopathy & position of Homoeopathy in various countries.
4. Hahnemann's Organon of Medicine from aphorism 1 to 70.
5. Fundamental Principles of Homoeopathy.
6. Health: Hahnemann's and modern concept.
7. Introductory lectures on diseases, their classification, drug diseases, case taking and drug proving.

II. Logic.

The term 'Logic' means 'though' 'reason' 'Law' and is used to denote the totality of rules to which the process of thought is subjected, a process that reflects the reality. It is also used to denote the science of the rules of reasoning and the forms in which it occurs. As discussed earlier, to comprehend ORGANON-PHILOSOPHY, it is essential to acquaint with understanding of LOGIC in order to grasp inductive-deductive reasoning

III. Introduction to Psychology..

1. Definition of Psychology as a Science and its differences from other Sciences. Concept of Mind Contemporary schools of psychology with special reference to Behaviouristic and psychoanalytic approaches.
2. Scientific study of behaviour, intelligence, cause effect relation behaviouristic (Pavlov, Watson, Skinner) and dynamics of behaviour (Freud and Neo Freudians).
3. Basic concepts of sensation, perception, illusion, Hallucination, Delusion, Image, Intelligence, aptitude, attention, thinking and memory.
4. Emotion, motivation, personality, anxiety, conflict, frustration, psychomatic manifestations and dreams.

5. Developmental psychology normal developments since birth to maturity (both physical and psychological) and deviations its effects on later behaviour.

***The attempt should be made to make a student receptive to various terms in teachings of Materia Medica and Homoeopathic Philosophy.**

II. B.H.M.S.

IN THREE SECTIONS

SECTIONS 1

Hahnemann's Organon of Medicine Aphorism: 1 to 145

The purpose of Homoeopathic case taking is not merely collection of symptoms but comprehending the **PERSON IN WIDER DIMENSIONS** with the correct appreciation of the factors responsible for the genesis and maintenance of illness i.e. **Fundamental Cause, PREDISPOSING CAUSE, MAINTAINING CAUSE & ONE SIDED DISEASES.**

There should be compulsory case taking term for each student wherein he learns to 'build up PORTRAIT of the disease by undertaking:-

1. Evolutionary study of the patient comprising of well defined characteristics.
2. Studying individual in His life-span and in relation to his family environment and work.
3. Processing of the interview and the entire case so as to grasp the principles of MANAGEMENT of these patients.

He should be taught to classify various symptoms which he has elicited in his case taking. He puts down his evaluation of those characteristics. His capacity for analysis and synthesis should evolve. In appendix, Analytical paper for symptom classification and Evaluation is attached. If practiced properly, has potential to improve analytical faculty of the student.

Physician, Teaching Staff, R.M.O. and House Staff shall spend enough time with the students and interns and scrutiny of their written cases, discussing mode of interview and processing of the case.

There should be standardization in imparting training in **ANALYSIS AND EVALUATION**. Each Institute shall keep the standard guide lines of Case taking.

GUIDELINES ANALYSIS EVALUATION OF OBJECTIVES OF ANALYSIS EVALUATION OF SYMPTOMS.

1. (To individualize the case so as to prepare an effective totality which allows us to arrive at the SIMILIMUM, prognosis the case, and advise management and impose necessary restrictions on mode of life and diet.
2. To infer about state susceptibility by appreciating the quality of characteristics state of susceptibility and diagnosis about miasmatic state would allow physician to formulate comprehensive plan of treatment.
3. Order of evaluation of the characteristics, of the case would become stepping stone for the reportorial totality.

(iii) CLASSIFICATION OF SYMPTOMS: Their scopes and limitations in arriving as a totality.

Symptom should not be considered superficially at its face value. It should be analyzed and evaluated by taking into account following factors

1. Through grasp over the underlying dynamics. (Psychological, Physiological, Pathological aspects).
2. This would demand through comprehension over the evolution of DISEASE, taking into account FUNDAMENTAL, EXCITING & MAINTAINING CAUSES..
3. Knowledge of socio-cultural background is quite imperative for correct analysis and evaluation. Details regarding SYMPTOMATOLOGY can be comprehended by referring to the classical books in philosophy.

The Department of Organon & Philosophy while training in Case Taking shall co-ordinate with various other departments where student is sent for the pre-clinical and clinical training. This would ensure not only streamlining of the clinical Centres but also cultivate Homoeopathic perspective when student is attending other special clinics.

EVALUATION-EXAMINATION

1. Student's performance shall be evaluated periodically. There shall be periodical card tests and internal (theory and practical) examinations in each-academic year. The concerned teaching staff shall file his general report on the conduct of internal examinations and also on student's performance, which shall be discussed in departmental and interdepartmental meetings.
2. Each student appearing for II and III BHMS shall maintain one journal comprising of 20 cases (10 short and 10 long cases) with complete processing of the case material for each examination, which shall be evaluated by the head of the department.
3. There shall be provisions for the internal assessment of all these examinations and journal work in the Final II and III BHMS examinations respectively.

III. BHMS

When student enters third year, he has already grasped basic Sciences of Anatomy, Physiology, Pathology and has been introduced to Clinical Medicine, Surgery, Gynaecology and Obstetrics.

Organon including Philosophy is the subject which builds up the conceptual base for the physician. It illustrates those principles which when applied in practice enable physician to obtain results which he can explain rationally and repeats them in practice with greater competence. Focus of the Education & Training should be to build up this conceptual base. This can be delivered effectively if there is proper integration of various disciplines, various knowledge throughout the subject of ORGANON-PHILOSOPHY.

(I) HAHNEMANN'S THEORY OF CHRONIC DISEASE

Proper emphasis should be made on the way in which each miasmatic phase evolves and the characteristic expressions which are thrown off at various level. This will bring out characteristic PATTERN of each miasm. Definite attempt should be made to understand theory of CHRONIC MIASM in the light of our knowledge of basic sciences of ANATOMY, PHYSIOLOGY, PATHOLOGY & MEDICINE. This would demand CO-RELATION OF HOMOEOPATHIC PHILOSOPHY with allied sciences.

Teacher should bring out clearly therapeutic implications of THEORY OF CHRONIC MIASM in practice. This will demand comprehension of EVOLUTION OF NATURAL DISEASE from miasmatic angle. This will require to be correlated with applied Materia Medica. Here you demonstrate how various drugs would come up in Psoric, Sycotic and syphilitic state of the clinical diseases.

Thus ORGANON & PHILOSOPHY will bring out effectively integration of Anatomy, Physiology Psychology, Pathology, Clinical Medicine, Materia Medica and Therapeutics. This would demand greater interdepartmental co-ordination.

II. HAHNEMANN'S ORGANON OF MEDICINE VTH & VITH EDITIONS

(including Aphorism 1 to 294).

1. Kent's lectures, Robert and Stuart close works in Philosophy.
2. POSOLOGY.
3. DIET, ANCILLARY MODE OF TREATMENT.
4. INTRODUCTION OF REPERTORY.

Student should maintain journal of 20 cases wherein thoroughly worked out cases from their clinic attendance would be there.

Cases should demonstrate student's work on: CASE TAKING - CASE ANALYSIS-EVALUATION-DISEASE, DIAGNOSIS-MIASM- POSOLOGY-REMEDY SELECTION.

IV. BHMS

Here the focus is on applied aspect of Organon & Philosophy. Maximum emphasis shall be given on practice oriented teaching of Organon and Philosophy.

This can be effectively achieved by studying the various cases taken by students in OPD & IPD.

Case analysis, evaluation and synthesis takes into account the application of entire ORGANON from Aphorism 1 to 294 and all principles of Philosophy as illustrated in I, II, III BHMS.

More emphasis to be given on case taking, case analysis, evolution, posology miasmatic diagnosis, potency selection and repetition of doses, second prescription, diet, regimen and other pressures with principle of management during OPD and IPD visits, so that the students can have the practical knowledge of the treatment and management of the patient.

The following topics shall be taught during IV BHMS in depth:-

1. History of Medicine.
2. History of Homoeopathy, its spread to different countries.
3. Life and living environment.
4. Concepts of health and factors modifying it.
5. Concept of susceptibility and vital reaction.
6. Concept of disease and totality of symptoms.
7. Concepts of Drug, Medicine and remedy.
8. Concept of Cure and Disease and Drug relationship.
9. Scope and limitations of different modes of employing medicines in disease Antipathy, Allopathy and Homoeopathy.
10. Various methods of classification and evaluations of symptoms common and characteristic General and particular.
11. Concepts of incurable disease, suppression and palliation.
12. Prophylactics.
13. Scope and limitations of Homoeopathy.
14. Remedy response, prognosis after administration of a remedy.
15. Principles and criteria for repetition and selection of potency.

Paper I Topics from 1-15

Paper II- Topics from Kent's lectures, Stuart close and Roberts Philosophy, Case taking at beside.

APPENDIX

Purpose of the Homoeopathic Case taking is not merely collecting the symptoms but comprehending the person in wider dimensions, with correct appreciation of the causes for the illness.

The adequacy in Case Taking and Physical examination should be judged from the following angle:-

1. To carry out successful individualization of the case and to conclude about state of the susceptibility.
2. Finding out a simillimum with correct potency and doses.
3. Prescribing proper diet to the patient.
4. Advising the management of the case.
5. The pathology and homoeopathic prognosis.

Anatomy and Physiology

Study of normal man in pre-clinical period.

Human economy is the most difficult of all sciences to study. Man is conscious mentalised, living being and functions as a whole. Human knowledge has become so vast that for precise comprehension of man as a whole development of different branches of science like anatomy physiology and psychology was necessary. But such a division is only an expedient; man nevertheless remains indivisible.

Consciousness, life and its phenomena cannot be explained in terms of cell physiology or of quantum mechanics nor by physiological concepts which in their turn are based on chemico-physical concepts.

Though anatomy and physiology are hitherto being taught as entirely different subjects, a water-tight barrier should not be erected between them; structure (anatomy) and function (physiology) are but correlated aspects and the physio-chemical processes are but an external expression of an inexplicable phenomenon which is life.

So anatomy and physiology shall be taught with the following aims:-

- (1) To provide for the understanding of the morphological, physiological and psychological principles which determine and influence the organism of the living body as a functioning unit;
- (2) to co-relate and interpret the structural organism and normal physiology of the human body and thus to provide the data on which to anticipate disturbance of functions;

- (3) to enable the student to recognize the anatomical and physiological basis of the clinical signs and symptoms of disorders due to injury, disease and mal development;
- (4) similarly, to give the student to understand the factors involved in the development of pathological processes and the possible complications which may arise there from;
- (5) to give the student such knowledge on pre clinical subjects as will enable him ultimately to employ competently and rationally all the ordinary methods of examination and treatment (including surgery) that may involve such knowledge; and
- (6) for enabling the student to pick out strange, rare and uncommon symptoms from pathognomonic symptoms for individualization of patients and drugs for the purpose of applying the law of similar in Homoeopathic practice.

Anatomy

Instructions in anatomy shall be so planned as to present a general working knowledge of the structure of the human body. The amount of detail which he is required to memorize should be reduced to the minimum. Major emphasis should be laid on functional anatomy of the living subject rather than on the static structures of the cadaver, and on general anatomical positions and broad relations of the viscera, muscles, blood-vessels, nerves and lymphatic. Study of the cadaver is only a mean to this end. Students should not be burdened with minute anatomical details which have no clinical significance.

Though dissection of the entire body is essential for the preparation of the student for his clinical studies, the burden of dissection can be reduced and such saving of time can be effected, if considerable reduction of the amount of topographical details is made and the following points:-

1. Only such details as have professional or general educational value for the medical student should be presented to him.
2. The purpose of dissection is not to create technically expert prosecutors but to give the student an understanding of the body in relation to its function, and the dissection should be designed to achieve this end, for example, ignoring of small and clinically unimportant blood vessels results in such clearer dissection and a much clearer picture of the main structures and their natural relationships.
3. Much that is at present taught by dissection could be demonstrated as usefully through prepared dissected specimens.
4. Normal radiological anatomy may also form part of practical training. The structure of the body should be presented linking functional aspect.
5. Actual dissection should be preceded by a course of lectures on the general structure of the organ or the system under discussion and then its function. In this way anatomical and physiological knowledge can be presented to students in an integrated form and the instruction of the whole course of anatomy and physiology made more interesting, lively and practical.
6. A good part of the theoretical lectures on anatomy can be transferred to tutorial classes with demonstrations.

A few lectures or demonstrations on the clinical and applied anatomy should be arranged in the later part of the course. They should preferably be given by a clinician and should aim at demonstrating the anatomical basis of physical signs and the value of anatomical knowledge to the clinician.

Seminars and group discussions to be arranged periodically with a view to presenting different subjects in an integrated manner.

Formal class room lectures to be reduced but demonstrations and tutorials to be increased. There should be joint teaching-cum demonstration sessions with clinical materials illustrating applied aspect of Anatomy in relation to clinical subjects. This should be arranged once a fortnight and even form part of series of introductory lectures if be needed.

There should be joint seminars with the departments of Physiology and Bio-chemistry and should be organized once a month.

There shall be a close correlation in the teaching of gross Anatomy, Histology, Embryology and Genetics. The teaching of areas and systems in Anatomy, Physiology including Bio-chemistry shall be integrated as far as possible.

THEORETICAL

A complete course of human anatomy with general working knowledge of different anatomical parts of the body. **Emphasis should be laid down on the general anatomical positions and broad relations of the viscera, muscles, blood vessels, nerves and lymphatic, Candidates should not be burdened with minute anatomical details of every description** which has no clinical significance.

Candidates will be required to recognize anatomical specimen and to identify and answer questions on structures displayed in recent dissections, to be familiar with the bones and their articulations including the vertebrae, the skull and with the manner of classification of the long bones.

Emphasis will not be laid on minute details except in so far as is necessary to the understanding or in their application to medicine and surgery. Candidates are expected to know the attachments of muscles sufficiently to understand their action, but not be precise-details of the origin and insertion of every muscle. A knowledge of the minor details of the bones of the hand, foot, their articulations and details of the small bones of the skull will not be required.

The curriculum of Anatomy should be divided under the following headings:-

- I Gross Anatomy-to be dealt under the following categories:-
 - (a) Introductory lectures with demonstrations.
 - (b) Systematic series.

The study to be covered by deductive lectures, lecture, demonstrations, surface and radiological anatomy, by dissection of the cadaver and study of dissected specimen. Knowledge thus obtained together with co-relation of facts should be integrated into living anatomy. Details of topographical relation should be stressed for these parts which are of importance in general practice.

 - (i) Superior extremity, inferior extremity, head, neck, thorax, abdomen and pelvis to be studied regionally and system by system (special reference to be made to development and its anomalies, regional, innervations, functional groups of muscles in relation to joints of otherwise and Applied Anatomy).
 - (ii) Endocrine organs with special reference to development and applied anatomy.
 - II Development anatomy General principles of development and growth and the effect of hereditary and environment factors to be given by lectures, charts, models and slides
 - III Neuro-anatomy, Gross anatomy of brain and spinal cord and the main nerve tracts. The peripheral nerves. Cranial nerves their relations course and distributions.
Autonomic nervous system-Development and anomalies, applied Anatomy. The study to be covered by lectures, lecture-demonstrations of brain and cord, and clinical co-relation.
- N.B:-** The practical study should proceed the study physiology nervous system, Early co-relation with the clinical course desirable.
- IV Micro anatomy (Histology) Modern concepts of cell, epithelial tissue, connective tissue, muscular tissue, nervous tissue and systemic structure.
- Introductory Lectures:-
- (A) (a) Modern conception of cell-components and their functions, why a cell divides, cell division, types with their signification.
 - (b) Genetic individuality:-
Elementary genetics definition, health and diseases, result of interaction between organism and its environments, utility of knowledge from homoeopathic point of view.
Mandel's laws and their significances.
Applied genetics.
 - (B) Embryology.
 - (C) General anatomy & Micro-anatomy.
 - (D) Regional anatomy-Regional Anatomy shall be taught with emphasis on developmental anatomy, broad relationship, surface marking, Radiological anatomy, and applied anatomy
 - (a) Extremities:-
Skeleton, position and functions of joints.
Muscle groups, lumbar plexus,
Arterial supply, venous drainage, neuro vascular bundles, lymphatic and lymph nodes, relation of nerves to bones.
Joints with special emphasis on lumbo-sacral, hip, knee and ankle joints, muscles producing movement, results of nerve injury.
Radiology of bones and joints. Classification, determination of age.
Applied anatomy.
Surface marking of main arteries, nerves.
 - (b) Thorax:-

Skeleton of joints, of muscles, of chest wall-diaphragm, innervation of abdominal and thoracic respiration, different with age. The mammary gland, lymphatic drainage.

The pleura & lungs.

Arrangements structures in the mediastinum, heart, coronary artery great vessels, trachea, oesophagus, lymph nodes, thymus.

Radiology of heart, aorta, lungs, bronchogram.

Surface marking-pleura, lungs, heart-valves of heart, border, arch of aorta, superior venacava, bifurcation of trachea.

(c) Abdomen and pelvis:-

The abdominal wall-skin and muscles, innervation of fascia, peritoneum, blood vessels, lymphatics, autonomic ganglia and plexuses.

Stomach, small intestine, caecum, appendix, large intestine.

Duodenum, pancreas, kidneys, uterus, supra-renals.

Liver and gall bladder.

Pelvis, skeleton and joints, muscles of the pelvis, organs internal and external genitalia in male and in the female, lumbosacral plexus, vessels, lymphatics, autonomic ganglia, and plexuses.

Blood vessels and nerve plexuses of abdomen and pelvis, the portal venous system.

Applied anatomy of referred pain, portal systemic anastomosis, catheterization of the urinary bladder in the male and female.

Surface marking of organs and blood vessels.

(d) Head and neck:-

Scalp-Innervation, vascular supply middle meningeal artery.

Face-main muscles groups, muscles of facial expression muscles of mastication, innervation of skin and repair muscles, vascular supply, principles of repair scalp and face wrinkles.

The eyelids, eyeball, lacrymal apparatus, the muscles that move the eyeball.

The nasal cavity and nasopharynx, septum, conchae, paranasalsinus, Eustachian tube, lymphoid masses.

Oral cavity and pharynx.

Larynx and laryngeal part of Pharynx structure (No details) functions, nerve supply, laryngeoscopic appearances.

Cervical vertebrae, joints of head and neck.

Structures of neck, sternomastoid, brachial plexus, main arteries and veins, disposition of lymph nodes, areas of drainage, phrenic nerve, thyroid gland and its blood supply, para-thyroid, the trachea, oesophagus. The position of the Sub-mandibular and sublingual salivary glands.

Teeth and dentition.

The external, middle and internal ear.

Applied anatomy.

Surface marking: Parotid gland, middle meningeal artery, thyroid gland, common internal and external carotid arteries.

(e) Neuro anatomy:-

1. Meanings-functions of

2. Cerebrum-areas of localization, vascular supply basal ganglion, internal capsule.

3. Cerebellum-functions.

4. Pons, medullar midbrain, cranial nerves, palsies.

5. Cerebro-spinal fluid formation, circulation function, absorption.

6. Cranial nerves, origin, courses (with minimum anatomical details) areas of distribution;

7. The sympathetic and parasympathetic nervous system location, distribution, function.

Applied anatomy of lumbar puncture, referred pain, spinal anesthesia, increased intra cranial pressure.

(B) Histological study systemic

PRACTICAL

Demonstration of dissected parts/Dissection of the whole human body.

Identification of histological specimen of tissues and organs viz, liver, kidney, lungs, thyroid, pancreas, spleen, trachea, oesophagus, stomach, tongue, intestine, large intestine, testes, every bone, adipose tissue, spinal cord, suprarenal gland, parotid gland, anterior pituitary salivary glands, skin, parathyroid gland, cerebellum, cerebral cortex, cardiac muscle.

The written paper in Anatomy shall be distributed as follows:-

Paper I - Upper extremity, head, face, Neck, brain and Embryology

Paper II - Thorax, abdomen, pelvis, lower extremity and Histology.

PHYSIOLOGY INCLUDING BIOCHEMISTRY

The purpose of a course in physiology is to teach the functions, processes and inter-relationship of the different organs and systems of the normal disturbance in disease and to equip the student with normal standards of reference for use while diagnosing and treating deviations from the normal. To a Homoeopath the human organism is an integrated whole of body life and mind; and though life includes all the chemico-physical processes it transcends them. There can be no symptoms of disease without vital force animating the human organism and it is primarily the vital force which is deranged in disease. Physiology shall be taught from the stand point of description physical processes underlying them in health.

There should be close co-operation between the various departments while teaching the different systems. There should be joint courses between the two departments of anatomy and physiology so that there is maximum co-ordination in the teaching of these subjects..

Seminars should be arranged periodically and lecturers of anatomy, physiology and bio-chemistry should bring home the point to the students that the integrated approach is more meaningful..

THEORETICAL

Introductions

Fundamental phenomena of life. The cell and its differentiation. Tissues and organs of the body.

Bio-chemical Principles

Elementary constituents of protoplasm, Chemistry of proteins, carbohydrates and lipids, Enzymes.

Bio-physical Principles

Units of concentration of abluions, ions, electrolytes and non-electrolytes filtration, diffusion, ultrafiltration, dialysis, surface tension, absorption, hydrotrophy, domain equilibrium colloid, acid-base concentration.

Environmental Physiology

1. Skin-structure and functions.
2. Regulations of body temperature hypothermia.

Skelato-Muscular System

1. General introduction and classification of muscle fibers.
2. Excitation-construction coupling and molecular basis of construction.
3. Properties of skeletal muscles and factors affecting development of tension.
4. Energy metabolism of muscles.

Nerve

1. Structure and function of nerve cell.

2. Bioelectric phenomena in the nerve and muscle. R.M.P., Action and its propagation, neuromuscular transmission.
3. Classification and properties of nerve fibers.
4. Wellerian degeneration, regeneration and reaction of degeneration.

Blood

1. Composition and functions in general.
2. Physiology of plasma proteins, normal values, E.S.R. & other blood indices.
3. Physiology of R.B.C., W.B.C. and platelets formation, fate and physiological and functions of formed elements of blood.
4. Body fluid compartments, their measurements, blood volume and its regulation.
5. A.B.O. and RH Blood group systems.
6. Lymphatics and R.E. system.
7. Coagulation & haemostasis.

Cardio Vascular System: (C.V.S.)

1. Structure and properties of cardiac muscle.
2. Generation and conduction of cardiac impulse, E.C.G. (Normal).
3. Cardiac cycle with reference to pressure, volume changes, heart sounds etc.
4. Heart rate and its regulations.
5. Haemodynamics, B.P. and its regulation.
6. Nervous and chemical control of blood vessel.
7. Physiological basis of shock.

Respiratory System

1. Introduction, general organization.
2. Mechanics of respiration, compliance.
3. Pulmonary volumes and capacities.
4. Pulmonary and alveolar ventilation
5. Physical principles of gaseous exchange a transport of respiratory gases.
6. Nervous and chemical control of respiration.
7. Hypoxia, acclimatization, cyanosis, dyspnoea, asphyxia, abnormal respiration.
8. Pulmonary function tests.
9. Effect of high and low atmospheric pressure effect of respiration on circulation, artificial respiration.

Digestive System

1. General introduction, Organisation plan and evolutionary significance.
2. Composition, function and regulation of salivary, gastric pancreatic intestinal and biliary's secretions.
3. Movements of G.I. tract.
4. Absorption of G.I. tract.
5. Physiology of Liver and Gall bladder structure and functions.

Excretory System

1. General introduction, structure and functions of kidney.
2. Mechanism of formation of urine.
3. Mechanism of concentration and dilution of urine.
4. Physiology of micturation.

Endocrine

1. Physiology of pituitary, thyroid, parathyroid, pancreas adrenal cortex and adrenal medulla.

2. Regulation of secretion of endocrine glands.

Reproduction

1. Introduction in general and types of reproduction.

2. Physiology of testes and ovaries.

3. Physiology of menstruation, pregnancy and lactation.

4. Placenta and its function, foetal circulation and respiration.

Central Nervous System

1. General Organisation, structure and function of nerve cell and neuralgia.

2. Cerebrospinal fluid.

3. Physiology of synapse and receptor organs.

4. Physiology of reflex action-classification properties etc. of reflexes.

5. Sensory and motor tracts and effects of sections transaction & hemisection of the spinal cord.

6. Spinal, decerebrate and decorticate preparations and Regulations of posture and equilibrium.

7. Reticular formation.

8. Cerebellum and basal ganglia.

9. Sensory and motor cortex.

10. Physiology of voluntary movements.

11. Higher functions of cortex: sleep and wakefulness, EEG, memory, speech, learning.

12. Physiology of thalamus and hypothalamus and limbic system.

13. Physiology of autonomic nervous system, peripheral and central mechanism.

Special Senses

1. Physiology of taste and smell sensation.

2. Ear-General anatomy, conduction of sound waves through external, middle and internal ear.

3. Peripheral and central mechanism of hearing and auditory pathways.

4. General anatomy refractory media and protective mechanisms in Eye.

5. Formation, circulation and functions of aqueous humor.

6. Physiology of optics, Formation of image, accommodation errors of refraction, acuity of vision.

7. Physiology of retina photographer functions, dark and light adoption, photochemistry of vision, colour vision.

8. Visual pathway and effects of various levels.

Nutrition

1. Balanced diet and special dietary requirements during pregnancy, lactation and grown.

BIOCHEMISTRY

- Biochemical principles and elementary constituents of protoplasm
- Chemistry of proteins
- Chemistry of carbohydrates
- Chemistry of lipids
- Enzymes and vitamins
- Metabolism of proteins, fats carbohydrates, minerals, Biophysical process and their principles in relation to human body

LIST OF PRACTICALS IN PHYSIOLOGY

1. Method of Collection of Blood.

2. Haemoglobinometry.

3. The Microscope-Construction; Use & Care.

4. Total White Blood Cell Count.

5. Differential WBC count.

6. Packed Cell Volume.
7. Packed Cell Volume.
8. Calculation of Blood Indices.
9. E.S.R.
10. Bleeding Time.
11. Clotting Time.
12. Blood Groups.
13. History taking and General Examination.
14. Examination of Alimentary System.
15. Examination of the cardiovascular system.
16. Pulse.
17. Determination of Arterial Blood Pressure in Humans and effect of posture, exercise and Cold stress.
18. Clinical Examination of the Respiratory system, E.C.G.
19. Stethography.
20. Spirometry.
21. Examination of Higher Functions.
22. Cranial Nerves.
23. Motor Functions.
24. Reflexes.
25. Sensory system.
26. Recording of Body Temperature.

LIST OF DEMONSTRATION

1. Varieties of Stimuli: Faradic or induced and Galvanic or Constant Current Apparatus Used in the Laboratory.
2. Excitability of Muscle.
3. Effect of Graded Stimuli.
4. Simple Muscle Twitch, Effect of temperature on the muscle.
5. Effect of two successive stimuli on the Skeletal Muscle of Frog.
6. Genesis of Tetanus.
7. Fatigue.
8. Effects of Fee and after Loading on Frog's Gastrocnemius Muscle.
9. Heart Block.
10. Properties of Cardiac Muscle.
11. Perfusion of Mammalian Heart and effect of various ions on it.
12. Effect of stimulation of Vagosympathetic Trunk and Crescent on Frog's Heart.
13. Effect of Acetylcholine on Heart.
14. Effect of Adrenaline on Frog's Heart.
15. Action of Nicotine on Frog's Heart.
16. Photokinetic stimulation, Ophthalmoscopy and Tonometry.
17. Recording Mammalian blood pressure and respiration and study of factors influencing them.
18. Specific Gravity of Blood.
19. Gastric Analysis.

PRACTICAL IN BIOCHEMISTRY

1. Introduction to Biochemistry and familiarization with laboratory Instruments.
2. Study of Disaccharides- Lactose, Maltose & Sucrose.
3. Study of Polysaccharides Starch, Dextrin & Glycogen.
4. Introduction of Proteins.

5. Normal Urine report (Inorganic and Organic Constituents).

6. Unknown solutions Study.

7. Quantitative & Estimation of Glucose in Urine.

Paper-I

Elements of Biophysics, Biochemistry, Blood and Lymph, Cardiovascular system, Reticuloendothelial system, spleen, Respiratory system Excretory System, Skin, regulation of body temperature, sense organs.

Paper-II

Endocrine organs, nervous system, nerve muscles physiology, Digestive system and metabolism, Biochemistry of protein, carbohydrate and lipid, enzymes, Nutrition.

Practical Examination

1. Examination of Physical and chemical constituents of normal and abnormal urine (qualitative).
2. Enumeration of total cell count of Blood (R.B.C. or W.B.C.) or differential count of peripheral blood or estimation of percentage of HB.
3. Viva-voce on instruments and apparatus.
4. Biochemistry examination of proteins/carbohydrate/lipoid.
5. Experimental physiology.
6. Laboratory Note-Book.
7. Viva-voce on experiments

Homoeopathic Pharmacy

Theory

Instruction in Homoeopathic Pharmacy should be so planned as to present general working knowledge of an industry and dispensing various preparation. Major emphasis should be laid on evolution and relationship of Homoeopathic Pharmacy to Organon and Materia Medica, the concept of drug Proving and Dynamisation.

The curriculum of Homoeopathic Pharmacy should be divided under following headings :-

Part I:- Orientation to subject elementary history of Botany, Zoology and Chemistry with rules of their nomenclature and their respective terminologies.

1. (A) Explanation of terms like common names, synonyms, Hyponyms, typonyms, invalid names.
(B) Advantages and disadvantages of Commercial names and botanical names.
(C) Anomalies in the nomenclature of Homoeopathic Drugs.
2. Schools of Medicine: their discovery, principles pharmacology and Materia Medica, scope and limitations.
3. History of the art and science of Pharmaceutics.
4. Literature on Homoeopathic Pharmaceutics.
5. Sources of Homoeopathic Pharmacy.
6. Homoeopathic Pharmacy: its speciality and originality.
7. Importance of the knowledge of Pharmacy.
8. Sources of knowledge about curative powers of the technique of Drug proving in Homoeopathy.
9. Aspects of Pharmacy.
10. Relation of Pharmaceutics with other sciences.
11. Inter-relationship of different schools of Pharmacy with emphasis on relationship of Allopathic and Homoeopathic Pharmacy.
12. Properties of Drugs.
13. (a) Routes of Administration of drugs in general.
(b) Routes of Administration of Homoeopathic remedies.

a. Action of Drugs.

b. Uses of Drugs.

Part-II

Explanation and definitions of:-

1. Foods, Poisons, cosmetics.

2. Drug substance, Drug, Medicine, Remedy.
3. Pharmacy, Pharmacology and Pharmacopoeia, Pharmacodynamics and other related terms used in relation to the subject. Homoeopathic Pharmacopoeia,

Homoeopathic Pharmacy in relation to:-

1. Organon of Medicine Aphorism 264 to 285.
2. Materia Medica.
3. National Economy.

Pharmacy and Pharmacopoeia: esits Sourc and relation with other sciences. Classification of Homoeopathic Medicines according to their.

1. Botanical and
2. Zoological natural orders.

English name of each medicine.

Common names in Indian Languages like Assamese, Bengali, Hindi, Gujarati, Kannad, Konkani, Maithili, Malayalam, Marathi, Sanskrit, Tamil, Telgu, Urdu, Oriya etc. with emphasis on the students learning the common names of their region.

Posology

Homoeopathic Posology: Its logic, advantages and dis-advantages. Potentisation: Its logic, scientificity and evolution and scales.

Vehicles

Scales for preparation of drugs Pharmacological Action of Polychrest medicines (50 medicine list attached) Abbreviations used in prescription writing. Legal part: legislation in respect of Homoeopathic Pharmacy, Drug and Cosmetic Act, Poison Act, Pharmacy Act.

PRACTICAL

1. Identification, and uses of Homoeopathic Pharmaceutical instruments and appliances and their cleaning.
2. Identification of important Homoeopathic Drugs (vide list attached)
 - (i) Macroscopic study of 30 drugs substances and listed in Appendix I,
 - (ii) Collection of 30 drugs substances for herbarium.
 - (iii) Microscopic study of two triturations up to 3x potency.
3. Estimation of moisture content of one drug substance with water bath.
4. Purity test of ethyl alcohol, distilled water, sugar of milk, including determination of specific gravity of distilled water and alcohol.
5. Estimation of size of globule, its medication of milk sugar and distilled water making of doses.
6. Preparation and dispensing and dilute alcohol solutions and dilutions.
7. Preparations of mother tinctures of 3 polychrests.
8. Preparations of trituration of 3 crude drugs upto 3X.
9. Preparation of mother tinctures and solutions other than 10 percent Drug strength.
10. Potentisation of 3 mother tinctures upto 6 decimal scale and 3 centesimal scale.
11. Trituration of 3 drugs upto 6x and their conversion into liquid potencies.
12. Preparation of external applications one of each.
13. Writing of prescriptions and dispensing of the same.
14. Laboratory methods:-
 - (a) Sublimation
 - (b) Distillation
 - (c) Decantation
 - (d) Filtration
 - (e) Crystallization
 - (f) Percolation
15. Visit to a Homoeopathic Laboratory to study the manufacturing of drugs on a large scale.

APPENDIX:

PHARMACOLOGICAL ACTION

List of Drugs included the Syllabus of Pharmacy for study of Pharmacological action (30)

1. Aconite nap

2. Adonis vernalis

3. Allium cepa

4. Argentum nit

5. Arsenic alb

6. Belladonna

7. Cactus G

8. Cantharis

9. Cannabis ind

10. Cannabis sat

11. Cinchonna off

12. Coffea crud

13. Crataegus

14. Crotalus hor

15. Gelsemium

16. Glononie

17. Hydrastis Can

18. Hyoscynamus n

19. Kali bich

20. Lachesis

21. Lihium carb

22. Mercurius cor

23. Naja t

24. Nitric acid

25. Nux vomica

26. Passiflora incarnata

27. Stannum met

28. Stramonium

29. Symphytum

30. Tabacum

LIST OF DRUGS FOR IDENTIFICATION

1. VEGETABLE KINGDOM

1. Aegle folia

2. Ananardium Orientale

3. Andrographis penniculata

4. Calendula offic

5. Cassia sophera

6. Cinchonna off

7. Cocculus indicus

8. Coffea cruda

9. Colocynth citrallus

10. Crocus sativa

11. Croton tig

12. Cynodon

13. Ficus religiosa

14. Holerrhena antidysentrica

15. Hydrocotyle

16. Justisia adhatoda

17. Lobelia inflata

18. Nux vomica

19. Ocimum

20. Opium

21. Rauwolfia serpentine

22. Rheum

23. Saraca indica

24. Senna (cassia acutifolia)

25. Stramonium met

26. Vinca minor

II. CHEMICALS

1. Acetic Acid
2. Alumina
3. Argentum metallicum
4. Argentum nitricum
5. Arsenic alb
6. Calcarea carb
7. Carbo veg (charcoal)
8. Graphitis
9. Magnesium
10. Mercury (the metal)
11. Natrum mur
12. Sulphur

II. ANIMAL KINGDOM

1. Apis malefic
2. Blatta orientalis
3. Formica ruba
4. Sepia
5. Tarentula cubensis

HOMOEOPATHIC MATERIA MEDICA

1. Homoeopathic Materia Medica is differently constructed as compared to other Materia Medica. Homoeopathy considered that study of the action of drugs on individual parts or systems of the body or on animal or their isolated organs is only a partial study of life processes under such action and that it does not lead us to a full appreciation of the action of the medicinal agent; the drug agent as a whole is lost sight of.

2. Essential and complete knowledge of the drug action as a whole can be supplied only by qualitative synoptic drug experiments on healthy persons and this alone can make it possible to view all the scattered data in relation to the psychosomatic whole of a person and it is just such a person as a whole to whom the knowledge of drug action is to be applied.

3. The Homoeopathic Materia Medica consists of a schematic arrangement of symptoms produced by each drug, incorporating no theories for explanations about their interpretation or inter-relationship. Each drug should be studied synthetically, analytically and comparatively, and this alone would enable a Homoeopathic student to study each drug individually and as a whole and help him to be a good prescriber.

4. Polychrests and the most commonly indicated drugs for every day ailments should be taken up first so that in the clinical classes or outdoor duties the students become familiar with their applications. They should be thoroughly dealt with explaining all comparisons and relationship. Students should be conversant with their sphere or action and family relationship.

The less common and rare drugs should be taught in outline, emphasizing only their most salient features and symptoms. Rare drugs should be dealt with later.

5. Tutorials must be introduced so that students in small numbers can be in close touch with teachers and can be helped to study and understand Materia Medica in relation to its application in the treatment of the sick.

6. While teaching therapeutics an attempt should be made to recall the Materia Medica so that indications for drugs in a clinical condition can directly flow out from the proving of the drugs concerned. The student should be encouraged to apply the resources of the vast Materia Medica in any sickness and not limit himself to memorize a few drugs for a particular disease. This Hahnemannian approach will not only help him in understanding the proper perspective of symptoms as applied and their curative value in sickness but will even lighten his burden as far as formal examination are concerned. Otherwise the present trend produces the allopathic approach to treatment of diseases and it contradictory to the teaching of Organon.

Application of Materia Medica should be demonstrated from cases in the outdoor and hospital wards.

Lectures on comparative Materia Medica and therapeutics as well as tutorials should be as far as possible be integrated with lectures on clinical medicine in the various departments.

7. For the teaching of drugs the college should keep herbarium sheets and other specimens for demonstrations to the students. Lectures should be made interesting and slides of plants and materials may be projected.

8. A. Introductory lectures: Teaching of the Homoeopathic Materia Medica should include:-

1. Nature and scope of Homoeopathic Materia Medica.
2. Sources of Homoeopathic Materia Medica.
3. Different ways of studying the Materia Medica.

B. The drugs are to be taught under the following heads:-

1. Common name, natural, order, habitat, part used, preparation.
2. Sources of drug proving.
3. Symptomatology of the drug emphasizing the characteristic symptoms and modalities.
4. Comparative study of drugs.
5. Complimentary, inimical, antidotal and concomitant remedies.
6. Therapeutic applications (applied Materia Medica).

C. A study of 12 issue remedies according to Schusler's biochemic system of medicine

APPENDIX-I

1. Acontile nap
2. Aethusa cyan
3. Allium cepa
4. Aloe socotrina
5. Antimonium crud
6. Antimonium tart
7. Apis malefic
8. Argentum nit
9. Arnica Montana
10. Bryonia alb
11. Chamomilla
12. Cina
13. Colchicum autumn.
14. Colocynthis
15. Dulcamara
16. Ipecac
17. Ledum Pal
18. Nux vomica
19. Rhus tox
20. Calcarea flour
21. Calcarea phos

22. Calcareo sulph

23. Ferrum phos

24. Silicea

25. Euphrasia

APPENDIX-II

Syllabus of Materia Medica for the II B.H.M.S. Examination.

In addition to the list of drugs for the first B.H.M.S. Examination (Appendix I), the following additional drugs are included in the Syllabus of Materia Medica for the II B.H.M.S. Examination.

1. Acetic acid
2. Actea racemosa
3. Agaricus muscarius
4. Agnus castus
5. Alumina
6. Ambra grisea
7. Ammonium carb
8. Ammonium mur
9. Anacardium ori
10. Apocynum can
11. Arsenic album
12. Arsenic iod
13. Aurum met
14. Arum triph
15. Baptisia tinctor
16. Berberis vulg
17. Bismuth
18. Borax
19. Bromium
20. Bovista
21. Cactus g
22. Calcareo ars
23. Calendula
24. Camphora
25. Cantharis
26. Chelidonium maj
27. Conium mac
28. Digitalis per
29. Drosera
30. Ferrum met
31. Gelsemium
32. Helliborus
33. Hepar sulph
34. Ignatia
35. Kali brom
36. Kreosatum
37. Natrum carb
38. Nux moschata
39. Opium
40. Petroleum
41. Phosphorus
42. Phytolacca

43. Platina met

44. Sepia

45. Spongia tost

46. Veratrum alb

47. Kali mur

48. Kali phos

49. Magnesia Ph

50. Natrum sulph

APPENDIX III

In addition to the drugs mentioned in Appendix I&II, the following additional drugs are included in the syllabus of Materia Medica for the 3rd BHMS Examinations:-

1. Actea spicata

2. Adonis vernalis

3. Antimonium ars

4. Argentum metallicum

5. Asafoetida

6. Asterins rubens

7. Baryta carb

8. Belladonna

9. Benzoic acid

10. Bufo rana

11. Caladium

12. Calcarea carb

13. Cannabis indica

14. Cannabis sativa

15. Carbo vegetabilis

16. Causticum

17. Crotalus hor

18. Croton tig

19. Cuprum met

20. Cyclamen

21. Dioscorea villosa

22. Equisetum

23. Graphitis

24. Hyoscymus n

25. Hypericum

26. Iodum

27. Kali carb

28. Kali sulph

29. Kalmia latfolia

30. Lachesis

31. Lycopodium

32. Mercurius sol

33. Mercurius cor

34. Mercurius sulph

35. Moschus

36. Murex

37. Muriatic acid

38. Najat

39. Natrum mur

40. Natrum phos
41. Nitric acid
42. Onosmodium
43. Oxalic acid
44. Petroleum
45. Phosphoric acid
46. Physostigma
47. Picric acid
48. Plumbum met
49. Podophyllum
50. Pulsatilla
51. Secale cor
52. Selenium
53. Staphisagria
54. Stramonium
55. Sticta p
56. Sulphur
57. Sulphuric acid
58. Symphytum
59. Syphylinum
60. Tabacum
61. Taraxacum
62. Tarentula C
63. Teribinthina
64. Thalapsi bursa p
65. Theridion
66. Thuja
67. Thyroidinum
68. Vaccinum
69. Zincum met

APPENDIX IV

List of drugs included in the Syllabus of IV B.H.M.S. examination:-

1. Abies can
2. Abies nig
3. Abroma Augusta
4. Abrotanum
5. Acalypha indica
6. Anthracinum
7. Bacillinum
8. Baryta mur
9. Bellis per
10. Calotropis indica
11. Capsicum
12. Carbo animalis
13. Carboic acid
14. Carrica papaya
15. Cassia saphora
16. Caulophyllum
17. Cedron
18. Cicuta virosa

19. Clematis
20. Cocculus indica

21. Coffea cruda
22. Collinsonia
23. Condurango
24. Corallium
25. Crataegus
26. Crocus sativa
27. Eupatorium per
28. Ficus religiosa
29. Fluoric acid
30. Glonoine
31. Hellonius
32. Hydrastis can
33. Hydrocotyle as
34. Jonosia asoka
35. Justicia adhatoda
36. Lac can
37. Lac def
38. Liliium tig
39. Lithium carb
40. Lobelia inf
41. Lyssin
42. Magnesia carb
43. Magnesia mur
44. Medorrhinum
45. Melilotus a
46. Mephitis
47. Mercurius cynatus
48. Mercurius dull
49. Mezerium
50. Millifolium
51. Occimum sanct
52. Psorinum
53. Pyrogenum
54. Radium bromide
55. Rananculus bulb
56. Raphanus
57. Rathania
58. Rauwolfia serpentine
59. Rheum
60. Rhododendron
61. Rumex
62. Ruta G.
63. Sabadilla
64. Sabal Serulatta
65. Sabina
66. Sambucus
67. Sangunaria can
68. Sanicula

69. Sarasaparilla

70. Spigelia

71. Squila

72. Stannum met

73. Syzygium jambolanum

74. Trillium pendulum

75. Urtica urens

76. Vaccinum

77. Variolinum

78. Veratrum viride

79. Vibrinum opulus

80. Vinca minor

81. Vipera

II. B.H.M.S.

GENERAL PATHOLOGY AND MICROBIOLOGY (INCLUDING PARASITOLOGY, BACTERIOLOGY AND VIROLOGY)

Study of pathology must be in relation with concept of Miasm as evolved by Dr. Hahnemann and further developed by Kent, Boger, Robert and Allen.

Concept of Miasm in view of Pathology, Reference to Koch's Postulate.

Importance of susceptibility and immunity thereby homoeopathic concept of Disease and Cure.

- Characteristic expression of each miasm.
- Classification of symptoms/disease according to Pathology.
- Correlation of Miasm and Pathology for e.g. Psora inflammation etc.
- Natural evolution in Pathology.
- Resolution Inflammatory exudative.
- Degeneration, Suppurative
- Interpretation of Pathological report of all diseases and correlate the utility of it in Homoeopathic system of Medicine.

Similarly all the topics in General Pathology and Systemic Pathology must be co-related, at each juncture, so that the importance of Pathology is understood by a Under-Graduate student in Homoeopathy.

Topics of General Pathology in Relation with Miasms

- Inflammation Repair Healing Injury
- Immunity
- Degeneration.
- Neoplasm
- Thrombosis
- Embolism
- Oedema
- Disturbances of Pigment Metabolism
 - Calcium Metabolism
 - Uric Acid Metabolism
 - Amino Acid Metabolism
 - Carbohydrate Metabolism
 - Fat Metabolism

- Healing
- Hypertrophy
- Hyperplasia
- Anaplasia
- Metaplasia
- Ischaemia
- Haemorrhage
- Shock
- Atrophy
- Relaxation
- Hyperemia
- Infection
- Pyrexia
- Necrosis
- Gangrene
- Infarction

SYSTEMIC PATHOLOGY

In each system the important and common disease should be done. By keeping in view its evolution, mode of presentation, progress and outcome of the disease. For e.g.

In Alimentary System

- Tongue
- Ulcer, Tumour
- Oral Cavity
- Thrush, Tumour
- Oesophagus
- Inflammatory Disease, Tumour
- Stomach
- Inflammatory Disease
- Auto Immune Disease
- Tumour
- Duodenum
- Inflammatory Disease, Acid Pepsin
- Digestion
- Intestine Small and Large
- Ulcers, Infection,
- Tumour, Malabsorption
- Appendix
- Inflammatory Disease
- Liver
- Inflammatory Disease
- Tumours
- Cirrhosis
- Jaundice
- Gall Bladder
- Inflammatory Disease

- Tumour
- Pancreas
- Inflammatory Disease
- Tumour
- Cardio Vascular Disease
- Common Disorders
- Central Nervous Disease
- Common Disorders
- Respiratory Disorders
- Common Disease
- Kidneys
- Common disorders
- Tumours
- Urodynamics
- Genitals Male and Female
- Common Disorder
- Tumours
- Skeletal and Muscular Disease
- Common Disorders
- Skin
- Common Disorders, Melanoma, etc.
- Clinical Pathology
- Complete Haematology

Practical

Clinical and Chemical Pathology:-

Estimation of haemoglobin (by acidometer) Count of R.B.Cs. and W.B.Cs. staining of thin and thick films, differential counts and parasites.

Erythrocyte sedimentation rate, urine, physical, chemical microscopical, quantity of albumin and sugar, faeces-physical chemical (occult blood) and microscopical for ova and protozoa.

Methods of sterilization, preparation of a media, use of microscope. Gram and acid fast stains. Motility preparation. Gram positive and negative cocci and bacilli. Special stains for corynebacterium-gram and acid fast stains of pus and sputum.

Haeconkeys plate-sugar reactions-gram stain and motility of gram negative intestine bacteria, Widal and demonstration of Pasteur and of spirochetes by dark field illumination Fountain's strain-Lovaditt's stain. Demonstration of Methods of nacrobiolysis.

Histopathology

Common teaching side from each systems. Demonstration of gross Pathological specimen. Practical demonstration of Histopathological techniques i.e. Fixation, Embedding.

- Sectioning staining by common dyes and strain.
- Frozen section. Its importance.
- Electron Microscopy
- Phase contrast microscopy.

1. BACTERIOLOGY:

Morphology, biology, sterilization, chemotherapy, principles of artificial media, infection, defence reaction, immunity, hypersensitiveness, skin tests, systematic study of bacteria habits, importance morphological, cultural biochemical, serological and toxic behaviour of the common pathogenic and non-pathogenic species. Pathologic changes produced by diseases bacteria and their laboratory diagnosis. Staphylococci, streptococci, disphlococci, Neisseria, Mycobacterium tuberculosis (Types) mycobacterium leprae, names and differentiation of spirochetes from pathogenic mycobacterium corynebacterium diphtheria. Aerobic spore bearing bacteria-bacillus anthracis, anaerobes, general and special features of the pathogens. Names of some important non-

pathogens. Gram negative, intestinal bacteria classification, identification of the pathogen salmonella, vibrio, bacterium, pasteuria, general idea about haemophiles, pseudomonas, brucella, rickettsia, proteus, spirochaetes-general idea details of treponema palladium and leptospiraictero haemorrhagica.

Viruses-general characters, classification of disease, e.g. varicella, Rabies, bacteriophage. Koch's postulates

2. PARASITOLOGY:

Protozoa-classification names of important rhizopoda, ent. Histolytica, pathogenesis and pathogenicity, diagnosis, difference from ent. Coli, sporozoen species of plasmodia life history and pathogenesis differentiation of species.

Mastigophora-general broad morphological features classification, pathogenesis, vectors, pathology of Kala-Azar, important features source disease due to balantidium coli.

Helminths-definition of certain terms, simple classification, differences between nematodes cestodes and trematodes Broad differentiating morphological features and broad life history and pathogenesis of important species, Cestodes and Nematodes-infecting liver, lungs, intestines and blood-general differences between schistosomes and other trematodes.

3. VIROLOGY:

- Diagnosis of Infectious Diseases
- Host Parasite Relationship
- Disinfectants Mode of action
- Practical aspects of Immunology i.e. Application in diagnosis, Passive Immunization, Immunopathies in brief including AIDS.
- Bacteria Genetics (briefly)

4. KIDNEY BLADDER URETER URETHRA

- Glomerulo Nephritis
- Pyelonephritis
- Tubercular Pyelonephritis
- Nephrotic Syndrom
- Metabolic Diseases and Kidney
- Systemic diseases and Kidney
- Acute and Chronic Renal Failure
- Kidney Tumours
- Calculi
- Cystitis
- Ureteric Stricture
- Urethritis, Specific and Non Specific
- Renal Function Test in Relation to Homoeopathy

CARDIO VASCULAR DISEASES

- Ischaemic Heart Disease
- Rheumatic Heart Disease
- Valvular Heart Disease
- Hypertension
- Cardiomyopathy
- Infective Endocarditis
- Congestive Cardiac Failure
- Diseases of Pericardium
- Cardiogenic Shock

MALE AND FEMALE GENITAL DISEASES

- Testicular Tumors

- Acute and Chronic Prostatitis
- Prostatic Tumours
- Sterility
- CA Penis
- Ovarian Tumours
- Fibroids
- CA Cervix
- Infertility
- Endometriosis and Endometrium
- Breast Inflammation and Tumours

RESPIRATORY DISEASES

- Pulmonary function test
- Bronchial Asthma
- Bronchitis
- Bronchiectasis
- Emphysema
- Empyema
- Cor. Pulmonari
- Pneumonia
- Bronchogenic Carcinoma
- Interstitial Lung Diseases

GASTRO INTESTINAL DISEASES

- Tongue, Stomatitis, Ulcers, Tumours
- Oesophagus, Reflex Oesophagitis
- Tumour of Oesophagus
- Stomach, Gastritis, CA Stomach, Gastric Ulcers
- Liver Cirrhosis, Hepatitis, CA Liver
- Liver abscess.
- Liver Function Test
- Gall Stones
- Pancreas Acute and Chronic Pancreatitis, CA pancreas
- Intestines Ulcers, Duodenal colics, CA Colon and Rectum
- Tumours
- Mal absorption syndrome
- Infections
- Appendix, Acute Appendicitis

SKIN DISEASES

- Infection and Tumours

BONES DISEASES

- Sarcoma, Osteoma, Paget's diseases
- Osteomyelitis, Tubercular Osteomyelitis
- Rheumatoid Arthritis, Osteo Arthritis

GENERAL NERVOUS SYSTEM

- Meningitis Pyogenic/Tubercular

CEREBRO SPINAL FLUIDS

- Picture of various Diseases

ENDOCRINAL SYSTEM

- Thyroid, Diabetes Mellitus

Ist Paper General Systemic Pathology and Miasms

IInd Paper- Bacteriology, Parasitology and clinical Pathology

(Each divided into Two Sections)

Pathology Practical

Experimental/Microbiological Spots, Readings and Interpretation of Pathological Reports.

II. B.H.M.S.

FORENSIC MEDICINE AND TOXICOLOGY

The subject is of practical importance to the students of homoeopathic medicine as homoeopathic physicians are to be employed by Government in areas where they may have to handle medico-legal-cases, perform autopsies, apart from giving evidence in such cases. The training in forensic medicine at present conducted is inadequate to meet these needs.

The course consist of a series of lectures and demonstrations including

1. Legal Procedure:

Definition of medical Jurisprudence. Courts, and their Jurisdiction.

2. Medical ethics :

Law relating to medical registration and Medical relation between practitioners and the State. The Homoeopathy Central Council Act, 1973 and the Code of Ethics under it, the practitioners and the patients, Malpractices covering professional secrecy, the practitioner and the various legislations (Acts) Provincial and Union such as Workman's compensation Act, Public Health Act, Injuries Act, Child Marriage Registration Act, Brostal Schools Act, Medical Termination of Pregnancy Act. Lunacy Act, Indian Evidence Act etc.

3. Forensic Medicine:

Examination and identification of person living and dead: parts, bones, stains, etc. health, Medicolegal: putrefaction, mummification, saponification, forms of death, causes, agencies, onset etc. Assaults, wounds, injuries and death by violence. Asphyxial death, blood examination, blood stains, seminal stains: burns, scalds, lightning stroke etc. Starvation, pregnancy, delivery, abortion, Infanticide, sexual Crimes, Insanity in relation to the State life and accident insurance

Toxicology

A separate course of lectures dealing poisoning in general, the symptoms and treatments of various poisons, post-mortem appearance and test should be given, study of the following poisons:-

Mineral Acid, corrosive, sublimate, arsenic and its compound alcohol, opium and its alkaloids, carbolic acid, carbon monoxide, carbon dioxide. Kerosene oil, cannabis indica, cocaine, Belladonna, strychnine and nux vomica, aconite, oleander, snake poisoning, prussic acid, lead.

4. Medico legal post-mortem:

Recording post-mortem appearance, forwarding materials to chemical examiner: Interpretation of laboratory and chemical examiner's findings. Students who are attending a course of lecture in forensic medicine should avail themselves of all possible opportunities of attending medico-legal post-mortems conducted by the professors of forensic medicine. It is expected that each student should attend at least 10 post-mortems.

5. Demonstration:

1. Weapons,

2. Organic & Inorganic poisons
3. Poisonous plants
4. Charts, diagram, models, x-ray films etc. of medico-legal interest

PRACTICE OF MEDICINE

Homoeopathy has a distinct approach to the concept of Disease. It recognizes an ailing individual by studying him as a whole rather than in terms of sick parts. It emphasizes the study of the Man from his State of Health, till it travels to state of presenting illness, incorporating all major events and contributing factors in the process.

The individualization study as above needs following background so that the striking aspects which are characteristic to the individual become clear, In contrast to the common picture of the respective Health disturbances:

1. Primary correlation of the Health disturbances with basics of Anatomy Physiology-Biochemistry.
2. Knowledge of common evolution of study about its causation, manifestations, maintenance and prognosis details.
3. Knowledge about factors which will worsen and improve the disturbance, including various medicines and non-medical measures and respective possible response elucidation by application of measures.

The study obviously emphasizes more on:

- A. Comprehension of Applied part.
- B. Sound clinical training at bedside to be able to apply the learning accurately.

These can lead towards developing a Homoeopathic Physician who will not be deficient at the practical Science of Medicine. He should be trained in a manner in which he is not locked up in Rare syndromes as Theoretical Exercise. Exercises but as a sound clinician with adequate discrimination, sharp observation and conceptual clarity. He will then be able to mould an effective appreciation of the patients picture utilizing his knowledge of Medicine.

To evolve the above, following distribution of Theory and Practical Training in suggested so that there is gradual but clear and firm comprehension.

- Course of Study

- 3 years
- i.e. in II (Second) BHMS
- in III (Third) BHMS and
- in IV (Fourth) BHMS

Examination to be conducted at the end of the IV (Fourth) BHMS. Also in the side of the topics are suggested co-ordinations (with other department) which will improve the caliber of imparting training in Medicine. The distribution is made keeping in mind about other subjects in II, III and IV BHMS and the respective state of learning of student.

IIND BHMS

1. Clinical Methods of Examination of patients as whole:
2. Respiratory diseases - Respective portion in surgery
3. Alimentary Tract and Pancreas Disease- Respective portion in surgery

IIIRD BHMS

1. Genetic Factors - Chronic Diseases and Miasms Dept. of Organon & Philosophy
2. Nutritional diseases -Nutrition, Hygiene in Dept. of Community Medicine
3. Immunological Factors in Diseases -Epidemiology in Dept. of Community medicine
4. Climatic Factors in Diseases
5. Metabolic Disease
6. Endocrinal Diseases -Menstrual Disorder in Dept. of Gynaecology

The above all need follow up with respective Therapeutics Topics also.

IVTH BHMS

1. Liver and Biliary Tract Diseases

2. Hematological Diseases
3. Cardiovascular system Diseases
4. Kidneys & Urinary Tracts Diseases
5. Water and Electrolytes balance Diseases
6. Connective Tissue Disorders
7. Bones and Joints Disorders
8. Skin Diseases
9. CNS & peripheral nervous system-Mental Diseases
10. Acute Emergencies including poisonings
11. Paediatrics

The above in these terms will require a follow up of strong and emphatic training on Homoeopathic Therapeutics for the same.

It will be conducted in IV (fourth) BHMS at the end of 3 years of course of study in Theoretical and Practical aspects of Medicine.

Eligibility for examination shall include submission of 10 complete case histories, 5 each prepared in III and IV BHMS.

PRACTICAL & CLINICAL EXAMINATION

The examination procedure will include one case to be prepared and presented to the examiner. The examiners will put stress on

1. Comprehensive case taking
2. Bedside procedure Investigations for diagnosis
3. Principles of management

GENERAL GUIDANCE: THERAPEUTICS

Homoeopathy has a distinct approach to disease. Concept of individualization and concept of chronic miasm makes it distinct.

It recognizes an ailing individual by studying him as a whole rather than in terms of sick parts. It emphasizes that study of man from the state of Health i.e. DISPOSITION DIATHESIS DISEASE, taking into account all predisposing and precipitating factors i.e. **FUNDAMENTAL CAUSE, MAINTAINING CAUSE & EXCITING CAUSE.**

Hahnemann's theory of chronic miasm provides us an evolutionary understanding of the chronic disease: PSORA-SYCOSIS-SYPHILIS & acute manifestations of Chronic Disease, Evolution of the natural disease shall be comprehended in the light of theory or chronic miasm. How our current knowledge of Pathology and clinical medicine assist in defining this must be demonstrated.

Study of therapeutics does not mean simply list of specifics. For the clinical condition, but teaching of applied Materia Medica. Here we demonstrate how various drugs would come up in psoric, syctic, tubercular or syphilitic state of the clinical conditions. Thus emphasis would be in correlating pace of evolution of disease, peculiar, respectively and cluster of characteristics.

Thus teaching of therapeutics of Hypertension would demand delineation of various phases of hypertension taking into account what is happening to the STRUCTURE and what kind of forms are thrown off. Psoric phase would be characterized by LABILE hypertension which shoots up under stress especially with rise in systolic and manifesting flushes and emotional disturbances.

This would draw our attention to drugs like GELSEMIUM, GLONINE, FERRUM MET etc. This is the functional phase. Tubercular hypertension would be characterized by fairly high systolic and diastolic B.P. oscillating wildly at higher range, manifesting bleeding like epistaxis etc. with erratic mental state. This will draw attention to PHOSPHORUS, LACHESIS etc.

Syphilitic dimension would be characterized by immense destructive damage at target organs like heart, kidney and retina.

Thus teachings of THERAPEUTICS would essentially demand an effective correlation of:

1. Knowledge of clinical/medicine/Surgery
2. Appreciation of Natural disease its evolution in the light of Theory of chronic miasm. Thus correlation with Organon Philosophy.
3. Applied Materia Medica and Repertory:

Comprehending drug picture from the evolutionary angle- Boger's approach towards Materia Medica and its application for the study of various clinical patterns of Natural disease.

Correlation with MATERIA MEDICA and with REPERTORY.

PAPER I: As per syllabus of II & III BHMS

PAPER II: As per the syllabus of IV BHMS

PAPER III: Homoeopathic Therapeutic

SURGERY

Homoeopathy as a Science need clear application on part of the physician to decide about the best course actions required to restore the sick to health.

Knowledge about surgical Disorders is required to be grasped well so that the Homoeopathic Physician is able to:-

1. Diagnose common surgical cases.
2. Institute homoeopathic medical treatment wherever possible.
3. Organise Pre and Post-operative Homoeopathic medicinal care as total/partial responsibility. And
4. Organize a complete Homoeopathic care for restoring the susceptibility of the patient to normally.

The conceptual clarity and Database needed for above is possible only by an effective co-ordination of the care of the patients.

The study shall include training on :

1. Knowledge of causation, manifestation, maintenance and prognosis of Health Disorders related to Surgery with stress on miasmatic evolution.
2. Bedside clinical procedures.
3. Correlation of applied aspects, with factors which can modify the course of illness, including medicinal and non-medicinal measures.

The above can assist a Homoeopathic Physician who will be a Rational Physician not one locked up in whirlpools of rare conditions but one who can apply all the basics for an ailing individual.

It will also facilitate him for individualization of the patient, necessary for final Homoeopathic management.

The study will start in II (Second) BHMS and complete in III (Third) BHMS.

Examination will be conducted in III (Third) BHMS.

Following is a plan to achieve the above, it takes into account about the II (Second) and III (Third) year BHMS syllabus and respective stage of development. Some points are made co-ordinating with other departments (for a better training in Surgery, ultimately).

That the SURGERY as a subject will include:-

1. Principles of Surgery
2. Fundamentals of Examination of a patient with surgical problems.
3. Use of common Instruments for Examination of a patient, asepsis, antisepsis, Dressings, plaster, operative surgery etc.
4. Practical Instruments, Training in Minor surgical Methods.
5. Physiotherapy measures.
6. Include also applied study in Radiology, etc. Diagnostics.
7. Includes Orthopaedics, Ophthalmology, Dental Diseases, Otorhinolaryngology and Neonatal Surgery.

IV BHMS

1. What are surgical cases? Orientation towards case taking and Examination of Surgical patients (Details to be done as part of Practical Training).
2. Applied anatomy and physiology its importance demonstration with good examples.
3. Basics of general surgical procedures.
4. Inflammation, Infections (Specific and Non-specific) Suppuration, Bacteriology, Immunity.
5. Injuries of various kinds- wound healing and management including Ulcers, Sinuses, Gangrene, etc.
6. Hemorrhage, shock, their management
7. Resuscitation and support in emergencies.

8. Accidents and Warfare injuries management.
9. Burns Management.
10. Fractures and Dislocation: general principles.
11. Diseases of the bones: general principles including growing skeleton.
12. Diseases of the joints: general principles including Rheumatology.
13. Diseases of the muscles, tendons, Fascia, etc: General principles.
14. Diseases of the Arteries: general principles.
15. Diseases of the veins: general principles.
16. Diseases of the Lymphatic system: general principles.
17. Diseases of the nerves: general principles.
18. Immunology: general Organ rejection, Transplants, etc.
19. Oncology: Tumors, Cysts, etc. general principles of management.
20. Congenital disorders: orientation and correction procedures.
21. Lectures cum Demonstration on bandages, surgical appliances, etc.
22. Lecture Demonstrations on x-rays.
23. Surgical Diseases of the Infancy and Childhood.

The above has to be followed up with relevant systemic Surgery Topics so as to cover:

1. All common clinical conditions of various parts.
2. Their evolution, examination methods and diagnosis.
3. Their investigations and prognosis
4. Their management especially principles
5. Relevant minor surgical procedures
6. Preventive aspects

ORTHOPAEDICS: Study as above about injuries, inflammation, ulcer, sinus, tumors, cysts, etc. (related to common condition of all bones and joints including spine) with relevant management correlating with Physiotherapy etc.

OPHTHALMOLOGY: Knowledge of common diseases, accidents, injuries etc. of various parts of Eyes.
Clinical Examination of Eyes (various parts) using various instruments including Ophthalmoscopy.
Common Eye operations and relevant care of the patients.

OTORHINOLARYNGOLOGY (ENT): Study as above of Ears, Nose, Throat, Tracheobronchial Tree, Oesophagus.

Management Of Common SURGICAL PROCEDURES AND EMERGENCY PROCEDURES: To be taught in theory as practice.

1. Wounds, Abscesses, etc. Incision and Drainage.
2. Venesections
3. Dressings and plasters.
4. Suturing of various types.
5. Preoperative and post-operative care.
6. Management of post operative complications.
7. Management of shock
8. Management of Acute Haemorrhage.
9. Management of acute injury cases.
10. Management of a Head Injury case.

The above is utmost necessary for any physician.

The above basically consists of Mechanical skilled procedure, supplementation, etc., measures which in no way interferes with scope and application of Law of Similars.

EXAMINATION

It will be conducted in III (THIRD) BHMS at end of 2 years of Course of study in theory and Practical Training of Surgery.

Eligibility for examination will include submission of 10 complete case histories, 5 (five) each from the study in II and III BHMS.

Paper I: Inflammation; infection; haemorrhage; shock; burns; ulcers and gangrene; tumors; cysts; injuries and diseases of nerves, muscles, tendon burase; lymphatic system, vascular system, spleen; general diseases, Ophthalmology.

Paper-II: Head, Neck, Thyroid, Breast, Congenital anomalies, Abdominal Surgeries, Gastrointestinal system, Bones Joints, Spine, Thoracic Surgery, Otolaryngology, Dental Surgery.

Paper-III: Exclusively on Homoeopathic Therapeutics.

PRACTICAL AND CLINICAL EXAMINATIONS

The examination will include one case to be prepared and presented by the examinees. The assessing examiners shall stress on:

1. Comprehensive Case taking:
2. Bedside Training:
3. Adequate grasp over the process of Diagnosis:
4. Adequate grasp over principles of management.

GYNAECOLOGY AND OBSTETRICS INCLUDING INFANT CARE

The attitude towards study of this subject remains same as for Surgery. It will have to be emphasized that the Training in special clinical methods or investigation and treatment of local conditions will go a long way in managing Gynae & Obst. Cases.

There is a quite large part of the clinical territory of this subject which is amenable to Homoeopathic Treatment. Pregnancy and Development Phase of the foetus are very useful phases to treat a lot of familial dyscrasias. The problems studied herein constitute delicate phases of Female patients and have strong correlation with their general well being.

The study will start in II (Second) BHMS and complete in III (Third) BHMS, Examination will be held in III (Third) BHMS.

Following is the plan to achieve the above.

II BHMS

OBSTETRICS

1. A Review of the Applied Anatomy.
2. A Review of the Applied Physiology.
3. Development of the Intra Uterine Pregnancy.
4. Diagnosis of pregnancy.
5. Ante-natal care.
6. Abnormal Pregnancy: Introduction
7. Normal labour
8. Abnormal labour: Introduction.
9. Post natal care Puerperal
10. Abnormal Puerperal
11. Care of the New born

GYNAECOLOGY

1. Applied Anatomy and Physiology
2. Gynaecological Examination
3. Development abnormalities
4. Endocrinal Axis: abnormalities
5. Uterine displacements

III BHMS

OBSTETRICS

1. **Abnormal Pregnancies:** Abortions, Molar pregnancy, Extra Uterine, Diseases of placenta and membrane, Toxaemia of Pregnancy, Antepartum Hemorrhage, Disorders of Genital tract Retroversion, prolapse, Tumours, etc. Multiple Pregnancy, Protracted gestation.
2. Common disorders and systemic diseases associated with Pregnancy.
3. Labour Abnormal Position and Presentation, Twins, Prolapse of Cord and limbs, abnormalities in the action of the Uterus Abnormal condition of soft parts contracted Pelvis, obstructed labour, Complications of third stage of labour, injuries of birth canals.
4. Common Obstetrical operations.
5. Abnormal Puerperal: infections etc.

GYNAECOLOGY

Inflammation, ulceration and traumatic lesions of the female genital organs, Malignant/Non-malignant Growths, Common Gynaecological operations and radiotherapy.

- Infant Care
- Neonatal hygiene
- Breast feeding
- Artificial feeding
- Management of premature child
- Asphyxia
- Birth injuries
- Common disorders of new born

EXAMINATION

It will be conducted in III (Third) BHMS at the end of 2 years of Course of studying Theoretical and Practical aspects of Gynaecology and Obstetrics.

Eligibility for examination will include submission of 20 complete cases of different types (10 each in Gynaecology and Obstetrics).

Paper I: Obstetrics and Infant Care

Paper II: Gynaecology

Paper III: Exclusively for Homoeopathic Therapeutics

PRACTICAL & CLINICAL EXAMINATION

The Examinee will take and present one case. The examiners shall stress on:

1. Comprehensive Case Taking.
2. Bedside training.
3. Adequate grasp over Diagnostics.
4. Adequate grasp over Management Principles.

COMMUNITY MEDICINE

(including Health Education and Family Medicine)

Instructions in this course should be given in the Fourth year of medical studies by lectures, demonstrations and field studies. This subject is of utmost importance, and throughout the period of medical studies the attention of the student should be directed to the importance of preventive medicine and the measures for the promotion of positive health.

His function is not limited merely to prescribing homoeopathic medicines for curative purposes but he has a wider role to play, in the community. He has to be well conversant with the national health problems both or rural as well as urban areas, so that he can be assigned responsibilities to play as effective role not only in the filed of curative but also of preventive and social medicine including family planning.

1. Introduction to preventive and social medicine concept, man and society: aim and scope of preventive and social medicine, social causes of disease and social problems or the sick, relation of economic factors and environment in health and disease.

2. Physiological hygiene:-

1. Food and nutrition-food in relation to health and disease. Balanced diets. Nutritional deficiencies and nutritional survey. Food processing, pasteurization of milk. Adulteration of food and food inspection, Food poisoning.
2. Air, light and sunshine.
3. Effect of climate-humidity temperature, pressure and other meteorological
4. conditions-comfort zone, effect of overcrowding.
5. Personal hygiene- (Cleanliness, rest, sleep, work) Physical exercise and training care of health in tropics.

3. Environmental sanitation:

1. Definition and importance.
2. Atmospheric pollution-purification or air, air sterilization, air borne diseases.
3. Water supplies-sources and uses, impurities and purification. Public water supplies in urban and rural areas. Standards of drinking water, water borne diseases.
4. Conservancy-Methods in villages, towns and cities, septic tanks, dry earth latrines-water closets. Disposal of sewage, disposal of the deceased, disposal of refuse incineration.
5. Sanitation of fairs and festivals.
6. Disinfection disinfectants, deodorants, antiseptics, germicides. Methods of disinfection and sterilization.
7. Insects-insecticides and disinfection-insects in relation to disease. Insect control.
8. Protozoal and helminthic diseases Life cycle of protozoan and helminthes, their prevention.

4. Medical Statistics

Principles and elements of vital statistics

Preventive Medicine

1. General principles of prevention and control of communicable diseases. Plague, Cholera, Small Pox Diphtheria, Leprosy, Tuberculosis, Malaria, Kala-Azar, Filariasis, Common viral diseases e.g. Common Cold Measles, Chicken Pox, Poliomyelitis, Infective Hepatitis, Helminthic infections, Enteric fever, dysenteries and also animal diseases transmissible to man. Their description and methods of preventive spread by contact, by droplet infection by environmental vehicles, (water, soil, food insects, animals, foundries, prophylaxis and vaccination).
2. General principles of prevention and control of non-communicable diseases e.g. obesity, hypertension etc.

Natural history of disease

5. Maternal and Child Health, school health services, health education, mental hygiene-elementary principles: school medicine its aim and methods.
6. Family Planning Demography, channels of communication, National Family planning programme, knowledge, attitudes regarding contraceptive practices. Population and growth control.
7. Public health administration and international health relation.
8. Homoeopathic concept of prophylaxis, vaccination, Immunology and personal hygiene.

N.B: Field demonstration-water purification plant, infectious diseases hospital etc.

REPERTORY

IV BHMS

Repertorization is not the end but means to arrive to the simillimum together with Materia Medica based on sound principles of Philosophy. Homoeopathic Materia Medica is an encyclopedia of Symptoms. No mind can memorize all the symptoms or all the drugs with their characteristic gradation. The repertory is an index and catalogue of the symptoms of the Materia Medica, nearly arranged in a practical form and also indicating the relative gradation of drugs, and it greatly facilitates quick selection of indicated remedy. It is impossible to practice Homoeopathy without the aid of repertories.

Each repertory has been compiled on distinct philosophical base, which determines its structure. In order to exploit full advantage of each repertory it is important to grasp thoroughly its conceptual base and construction. This will help student to learn scope, limitations and adaptability of the repertory.

Case taking:

Difficulties of taking a chronic case. Recording of cases and usefulness of record keeping. Totality of symptoms, prescribing symptoms: uncommon peculiar and characteristic symptoms. Analysis of the case uncommon and common symptoms. Gradation and evaluation of Symptoms. Importance of Mental symptoms. Kind and sources of general symptoms. Concomitant symptoms.

Teaching of repertorisation should not merely be reduced to rubric hunting exercises. Patient is not a bundle of rubrics.

Logic of Repertory, is delivered from Organon of Medicine as such Repertory should not be taught in isolation. Due emphasis should be made to:-

a. Learning the language of repertory i.e. meaning of rubrics in correlation with Materia Medica and clinical experiences.

b. Correlation of Repertory with Therapeutics and Materia Medica.

1. History and development of repertories till date.
2. Types of repertories.
3. Explanation of terminologies used in various repertories.
4. Boenninghausen's therapeutic pocket book and Boger Boenninghausen's repertory.
5. Kent's repertory.
6. Introduction to card repertory.
7. Specific regional repertories ALLEN'S FEVER, BELL'S DIARHOEA with their comparison.
8. Brief introduction to puritan group of repertory as Knerr, Gentry, Robert in respect of their Clinic use.
9. Introduction to Computer Repertorization.

PRACTICAL

Students shall repertories:-

1. 10 acute cases on Kent.
2. 5 chronic cases on Kent.
3. 5 chronic cases on Boenninghausen.
4. 5 chronic cases on Bogar-Boeinninghausen.
5. 5 cases to be cross checked on computer.

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