

HOMOEOPATHY (DEGREE COURSE) B.H.M.S. REGULATIONS, 1983 (AS AMENDED UPTO MARCH, 2016)

CENTRAL COUNCIL OF HOMOEOPATHY

**PRINCIPAL REGULATIONS
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HOMOEOPATHY (DEGREE COURSE) B.H.M.S. REGULATIONS, 1983 (As Amended upto March, 2016)



JANAKPURI, NEW DELHI

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CENTRAL COUNCIL OF HOMOEOPATHY

NOTIFICATION

In exercise of the powers conferred by clauses (i), (j) and (k) of section 33 and sub-section (1) of section 20 of the Homoeopathy Central Council Act, 1973 (59 of 1973), the Central Council of Homoeopathy, with the previous sanction of the Central Government, hereby makes the following regulations, namely:-

PART-I

Preliminary

1. **Short title and commencement:** (1) These regulations may be called the Homoeopathy (Degree Course) Regulations, 1983.
(2) They shall come into force on the date of their publication in the Official Gazette.

²**N.B.:-** The amendments notified in these Regulations on 14th July, 2015 shall apply to students admitted in BHMS (Degree Course) from the commencement of the academic session (2015-2016).

2.

Definitions: In these regulations, unless the context otherwise requires:-

- (i) "Act" means the Homoeopathy Central Council Act, 1973 (59 of 1973);
- (ia)² "Clinical work" means case taking and treatment of patients in the hospital;
- (ii) "Courses" means the course of study in Homoeopathy, namely:-
 - (a) D.H.M.S. (Diploma in Homoeopathic Medicine and Surgery) and
 - (b) B.H.M.S. (Bachelor of Homoeopathic Medicine and Surgery) Course;
- (iia) "Demonstration" means an educational activity conducted to explain by way of experimentation to show practically or clinically, the process of explaining whatever taught in the class;
- (iii) "Diploma" means a Diploma in Homoeopathy as defined in clause (iii) of regulation 2 of the Homoeopathy (Diploma Course) Regulations, 1983;
- (iv) "Degree" means a Degree in Homoeopathy provided in regulation 3 of these Regulations or a Degree as defined in clause (iv) of regulation 2 of the Homoeopathy (Graded Degree Course) Regulations, 1983.
- (v) ¹"Homoeopathic College" means a Homoeopathic College affiliated to a University and recognized by the Central Government;
- (vi) "Inspector" means a Medical Inspector appointed under sub-section (i) of section 17 of the Act;
- (via)² "Local Body" means the development authority, municipal committee, municipal corporation and panchayat;

- (vii) “President” means the President of the Central Council;
- (viii)² “Seminar” means a session or sessions of discussion on a particular topic or topics related to the course involving interaction amongst the teaching faculty and the students;
- (ix) “Second Schedule” and “Third Schedule” means the Second Schedule and Third Schedule respectively of the Act;
- (x) “Syllabus” and “Curriculum” means the Syllabus and Curriculum for different courses of study as specified by the Central Council under these Regulations,

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the Homoeopathy (Diploma Course) Regulations, 1983 and the Homoeopathy (Graded Degree Course) Regulations, 1983;

- (x) ¹“Teaching experience” means teaching experience in the subject concerned in a Homoeopathic College and includes teaching experience in the subjects of Medicine, Surgery, Obstetrics and Gynaecology, gained in the Medical Colleges recognised by the Central Government;
- (xi)² “Tutorial” means a regular meeting in which a teacher and a small group of students discuss a topic as a part of the course;
- (xii) “Visitor” means a Visitor appointed under sub- section (1) of Section 18 of the Act;
- (xiii)¹ “Post Graduation in Homoeopathy” means a Post Graduate qualification in Homoeopathy recognised as per the provisions of the Act.

PART-II COURSES OF STUDY

3. (i) The Degree Course of B.H.M.S. (Degree) shall comprise a Course of study consisting of Curriculum and Syllabus provided in these regulations spread over a period of 5½ years, including compulsory Internship of one year duration after passing the Final Degree Examination;
- (ii) ¹Every candidate after passing the final BHMS examination, shall undergo compulsory internship for a period of twelve months as per the procedure laid down in Annexure ‘A’ attached to these regulations.
- (iii) ¹On successful completion of the internship and on the recommendation of the Principal of the Homoeopathic College concerned, the concerned University shall issue the Degree to such candidates.
- (iv)² Every candidate shall complete the course including the passing of examination in all subjects and complete the compulsory internship training within a period of eleven years from the date of admission in First B.H.M.S. Degree Course in the college concerned, failing which his name shall be removed from the rolls of the college;

PART-III ADMISSION TO COURSE

²4. Eligibility criteria.- (i) No candidate shall be admitted to B.H.M.S Degree Course unless he has passed—

- (a) the higher secondary examination or the Indian School Certificate Examination which is equivalent to 10+2 Higher Secondary Examination after a period of twelve years’ study, the last two years of study comprising of Physics, Chemistry, Biology with Mathematics or any other elective subjects with English at a level not less than core course of English as prescribed by the National Council of Educational Research and Training after the introduction of the 10+2+3 years educational structure as

recommended by the National Committee on Education;

or

- (b) the intermediate examination in science of an Indian University or Board or other recognised examining body with Physics, Chemistry and Biology which shall include a practical test in these subjects and also English as a compulsory subject;

or

- (c) the pre-professional or pre-medical examination with Physics, Chemistry and Biology, after passing either the higher secondary school examination, or the pre-university or an equivalent Examination, which shall include a practical test in Physics, Chemistry and Biology and also English as a compulsory subject;

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or

- (d) the first year of the three years' degree course of a recognised University, with Physics, Chemistry and Biology including a practical test in these subjects provided the examination is a University Examination and candidate has passed 10+2 with English at a level not less than a core course;

or

- (e) any other examination which, in scope and standard is found to be equivalent to the intermediate science examination of an Indian University or Board, taking Physics, Chemistry and Biology including practical test in each of these subjects and English as a compulsory subject;

(ii) No candidate shall be admitted to B.H.M.S Degree Course unless he has attained the age of 17 years' on or before 31st December of the year of his admission to the first year of the course.

(iii) No candidate shall be admitted to B.H.M.S Degree Course if he is blind (including colour blindness), deaf, dumb, deaf and dumb.

²4A. Criteria for selection of students.– (i) The selection of students to the college shall be based solely on merit of the candidate and for determination of merit, the following criteria be adopted uniformly throughout the country, namely:-

- (a) In States, having only one Medical College and one University or examining body conducting the competitive examination, marks obtained at such qualifying examination shall be taken into consideration.
- (b) In states, having more than one University or examining body conducting the competitive examination or where there is more than one medical college under the administrative control of one authority, a competitive examination shall be held so as to achieve a uniform evaluation.
- (c) Where there are more than one college in a State and only one University or examining Board conducting the competitive examination, then a joint selection board consisting of the Principals of all the colleges and a representative from the faculty of University or examining Body, as the case may be, shall be constituted by the State Government for all colleges to achieve a uniform method of competitive examination.
- (d) The Central Government itself or any other agency notified by it shall conduct a competitive examination in the case of institutions of an all India character.

(ii) A candidate shall be eligible for the competitive examination if he has passed any of the

Provided that a candidate who has appeared in the qualifying examination the result of which has not been declared, he may be provisionally permitted to take up the competitive examination and in case of selection for admission to the B.H.M.S Degree Course, he shall not be admitted to that course until he fulfils the eligibility criteria under regulation 4.

PART IV

THE CURRICULUM

²5. Subjects.– Subjects for study and examination for the B.H.M.S (Degree) Course shall be as under, namely:–

Sl.No	Name of the Subject	Subject taught during	Holding of examination
1.	Anatomy	First B.H.M.S.	At the end of First B.H.M.S.
2.	Physiology	First B.H.M.S.	At the end of First B.H.M.S.
3.	Organon of Medicine with Homoeopathic Philosophy	First B.H.M.S, Second B.H.M.S, Third B.H.M.S and Fourth B.H.M.S.	At the end of Second, Third and Fourth B.H.M.S.
4.	Homoeopathic Pharmacy	First B.H.M.S.	At the end of First B.H.M.S.
5.	Homoeopathic Materia Medica	First B.H.M.S, Second B.H.M.S, Third B.H.M.S and Fourth B.H.M.S.	At the end of Second, Third and Fourth B.H.M.S.
6.	Pathology	Second B.H.M.S.	At the end of Second B.H.M.S.
7.	Forensic Medicine and Toxicology	Second B.H.M.S.	At the end of Second B.H.M.S.
8.	Practice of Medicine	Third B.H.M.S and Fourth B.H.M.S.	At the end of Fourth B.H.M.S.
9.	Surgery	Second B.H.M.S. and Third B.H.M.S.	At the end of Third B.H.M.S.
10.	Gynecology and Obstetrics	Second B.H.M.S. and Third B.H.M.S.	At the end of Third B.H.M.S.
11.	Community Medicine	Third B.H.M.S and Fourth B.H.M.S.	At the end of Fourth B.H.M.S.
12.	Repertory	Third B.H.M.S and Fourth B.H.M.S.	At the end of Fourth B.H.M.S.

	B.H.M.S.	B.H.M.S.”.
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PART V

²6. Syllabus for Degree Course. – The following shall be the syllabus for B.H.M.S (Degree) Course.

ANATOMY

Instructions:

I (a) Instructions in anatomy should be so planned as to present a general working knowledge of the structure of the human body;

(b) The amount of detail which a student is required to memorise should be reduced to the minimum;

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(c) 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 lymphatics and study of the cadaver is the only means to achieve this;

(d) Students should not be burdened with minute anatomical details which have no clinical significance.

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

(1) Only such details as have professional or general educational value for the medical students.

(2) The purpose of dissection is to give the student an understanding of the body in relation to its function, and the dissection should be designed to achieve this goal.

(3) Normal radiological anatomy may also form part of practical or clinical training and the structure of the body should be presented linking functional aspects.

(4) 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 and more interesting, lively and practical or clinical.

(5) A good part of the theoretical lectures on anatomy can be transferred to tutorial classes with the demonstrations.

(6) Students should be able to identify anatomical specimens and structures displayed in the dissections.

(7) Lectures or demonstrations on the clinical and applied anatomy should be arranged in the later part of the course and it should aim at demonstrating the anatomical basis of physical signs and the value of anatomical knowledge to the students.

(8) Seminars and group discussions to be arranged periodically with a view of presenting these subjects in an integrated manner.

(9) More stress on demonstrations and tutorials should be given. Emphasis should be laid down on the general anatomical positions and broad relations of the viscera, muscles, blood vessels, nerves and lymphatics.

(10) There should be joint seminars with the departments of Physiology and Bio-Chemistry which should be organised once a month.

(11) There should be a close correlation in the teaching of gross Anatomy, Histology, Embryology and Genetics and the teaching of Anatomy, Physiology including Bio-chemistry shall be integrated.

A. Theory:

(a) A complete course of human anatomy with general working knowledge of different anatomical parts of the body.

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The curriculum includes the following, namely:-

1. General Anatomy:

- 1.1. Modern concepts of cell and its components; cell division, types with their significance.
- 1.2. Tissues.
- 1.3. Genetics.

2. Developmental anatomy (Embryology):

- 2.1. Spermatogenesis
- 2.2. Oogenesis
- 2.3. Formation of germ layers
- 2.4. Development of embryogenic disk
- 2.5. Placenta
- 2.6. Development of abdominal organs
- 2.7. Development of cardio vascular system
- 2.8. Development of nervous system
- 2.9. Development of respiratory system
- 2.10. Development of body cavities
- 2.11. Development of uro-genital system

3. Regional anatomy:

This will be taught under the following regions:-

- 3.1. Head, Neck and Face, Brain
- 3.2. Thorax
- 3.3. Abdomen
- 3.4. Upper and Lower Extremities
- 3.5. Special Senses

Each of the above areas will cover,-

- (a) osteology
- (b) syndesmology (joints)
- (c) myology
- (d) angiology

- (e) neurology
- (f) splanchnology (viscera and organs)
- (g) surface anatomy
- (h) applied anatomy
- (i) radiographic anatomy

4. Histology (Microanatomy):

B. Practical -

1. Dissection of the whole human body, demonstration of dissected parts.
2. Identification of histological slides related to tissues and organs.
3. Students shall maintain practical or clinical journals and dissection cards.

C. Examination:

1. Theory:

The written papers in anatomy shall be in two papers, namely:—

1.1. Paper-I

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- a. General Anatomy,
- b. Head, face and neck, Central nervous System, upper extremities and Embryology.

1.2. Paper-II

- a. Thorax, abdomen, pelvis, lower extremities and Histology (micro-anatomy).

2. The Practical including viva voce or oral examination includes the following:—

2.1. Marks: 200	
2.2. Distribution of marks-	<u>Marks</u>
2.2.1. Knowledge of dissected parts-	20
2.2.2. Viscera	20
2.2.3. Bones	20
2.2.4. Surface Anatomy	10
2.2.5. Spotting (including Radiology and Histology)	20
2.2.6. Maintenance of Practical record or journal and dissection card	10
2.2.7. Viva Voce (Oral)	100

Total	<u>200</u>

PHYSIOLOGY

Instructions:

I (a) 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;

(b) 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;

(c) 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;

(d) Physiology shall be taught from the stand point of describing physical processes underlying them in health;

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(e) Applied aspect of every system including the organs is to be stressed upon while teaching the subject.

II (a) There should be close co-operation between the various departments while teaching the different systems;

(b) 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;

(c) 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.

A. Theory:

The curriculum includes the following, namely:—

I. General physiology:

1. Introduction to cellular physiology
2. Cell Junctions
3. Transport through cell membrane and resting membrane potential
4. Body fluids compartments
- 5 .Homeostasis

II. Body fluids:

1. Blood
2. Plasma Proteins
3. Red Blood Cells
4. Erythropoiesis
5. Haemoglobin and Iron Metabolism
6. Erythrocyte Sedimentation Rate
7. Packed Cell Volume and Blood Indices
8. Anaemia
9. Haemolysis and Fragility of Red Blood Cells
10. White Blood Cell
11. Immunity
12. Platelets
13. Haemostasis
14. Coagulation of Blood
15. Blood groups
16. Blood Transfusion
17. Blood volume
18. Reticulo-endothelial System and Tissue Macrophage

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19. Lymphatic System and Lymph
20. Tissue Fluid and Oedema

III. Cardio-vascular system:

1. Introduction to cardiovascular system
2. Properties of cardiac muscle
3. Cardiac cycle
4. General principles of circulation
5. Heart sounds
6. Regulation of cardiovascular system
7. Normal and abnormal Electrocardiogram (ECG)
8. Cardiac output
9. Heart rate
10. Arterial blood pressure
11. Radial Pulse
12. Regional circulation- Cerebral, Splanchnic, Capillary, Cutaneous & skeletal muscle circulation
13. Cardiovascular adjustments during exercise

IV. Respiratory system and environmental physiology:

1. Physiological anatomy of respiratory tract
2. Mechanism of respiration : Ventilation, diffusion of gases
3. Transport of respiratory gases
4. Regulation of respiration
5. Pulmonary function tests
6. High altitude and space physiology

6. High altitude and space physiology
7. Deep sea physiology
8. Artificial respiration
9. Effects of exercise on respiration

V. Digestive system:

1. Introduction to digestive system
2. Composition and functions of digestive juices
3. Physiological anatomy of Stomach, Pancreas, Liver and Gall bladder, Small intestine, Large intestine
4. Movements of gastrointestinal tract
5. Gastrointestinal hormones
6. Digestion and absorption of carbohydrates, proteins and lipids

VI. Renal physiology and skin:

1. Physiological anatomy of kidneys and urinary tract
2. Renal circulation
3. Urine formation : Renal clearance, glomerular filtration, tubular reabsorption, selective secretion, concentration of urine, acidification of urine
4. Renal function tests

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5. Micturition
6. Skin
7. Sweat
8. Body temperature and its regulation

VII. Endocrinology:

1. Introduction to endocrinology
2. Hormones and hypothalamo-hypophyseal axis
3. Pituitary gland
4. Thyroid gland
5. Parathyroid
6. Endocrine functions of pancreas
7. Adrenal cortex
8. Adrenal medulla
9. Endocrine functions of other organs

VIII. Reproductive system:

1. Male reproductive system- testis and its hormones; seminal vesicles, prostate gland, semen.
2. Introduction to female reproductive system
3. Menstrual cycle
4. Ovulation
5. Menopause
6. Infertility

7. Pregnancy and parturition
8. Placenta
9. Pregnancy tests
10. Mammary glands and lactation
11. Fertility
12. Foetal circulation

IX. Central nervous system:

1. Introduction to nervous system
2. Neuron
3. Neuroglia
4. Receptors
5. Synapse
6. Neurotransmitters
7. Reflex
8. Spinal cord
9. Somato-sensory system and somato-motor system
10. Physiology of pain
11. Brainstem, Vestibular apparatus
12. Cerebral cortex
13. Thalamus
14. Hypothalamus
15. Internal capsule

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16. Basal ganglia
17. Limbic system
18. Cerebellum – Posture and equilibrium
19. Reticular formation
20. Proprioceptors
21. Higher intellectual function
22. Electroencephalogram (EEG)
23. Physiology of sleep
24. Cerebro-spinal fluid (CSF)
25. Autonomic Nervous System (ANS)

X. Special senses:

1. Eye : Photochemistry of vision, Visual pathway, Pupillary reflexes, Colour vision, Errors of refraction
2. Ear: Auditory pathway, Mechanism of hearing, Auditory defects
3. Sensation of taste : Taste receptors, Taste pathways
4. Sensation of smell : Olfactory receptors, olfactory pathways
5. Sensation of touch

XI. Nerve muscle physiology:

1. Physiological properties of nerve fibres
2. Nerve fibre- types, classification, function, Degeneration and regeneration of peripheral

nerves

3. Neuro-Muscular junction
4. Physiology of Skeletal muscle
5. Physiology of Cardiac muscle
6. Physiology of Smooth muscle
7. EMG and disorders of skeletal muscles

XII. Bio-physical sciences:

1. Filtration
2. Ultra filtration
3. Osmosis
4. Diffusion
5. Adsorption
6. Hydrotropy
7. Colloid
8. Donnan Equilibrium
9. Tracer elements
10. Dialysis
11. Absorption
12. Assimilation
13. Surface tension

B. Practical:

I. Haematology:

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1. Study of the Compound Microscope
2. Introduction to haematology
3. Collection of Blood samples.
4. Estimation of Haemoglobin Concentration
5. Determination of Haematocrit
6. Haemocytometry
7. Total RBC count
8. Determination of RBC indices
9. Total Leucocytes Count (TLC)
10. Preparation and examination of Blood Smear
11. Differential Leucocyte Count (DLC)
12. Absolute Eosinophil Count
13. Determination of Erythrocyte Sedimentation Rate
14. Determination of Blood Groups
15. Osmotic fragility of Red cells
16. Determination of Bleeding Time and Coagulation Time
17. Platelet Count
18. Reticulocyte Count

II. Human experiments:

1. General Examination

2. Clinical Examination

2. Respiratory System- Clinical examination, Spirometry, Stethography
3. Gastrointestinal System- Clinical examination
4. Cardiovascular System- Blood pressure recording, Radial pulse, ECG, Clinical examination
5. Nerve and Muscle Physiology- Mosso's Ergography, Handgrip Dynamometer
6. Nervous System- Clinical examination
7. Special Senses- Clinical examination
8. Reproductive System- Diagnosis of pregnancy

BIO-CHEMISTRY**A. Theory:**

1. Carbohydrates: (Chemistry, Metabolism, Glycolysis, TCA, HMP, Glycogen synthesis and degradation, Blood glucose regulation)
2. Lipids: (Chemistry, Metabolism, Intestinal uptake, Fat transport, Utilisation of stored fat, Activation of fatty acids, Beta oxidation and synthesis of fatty acids)
3. Proteins: (Chemistry, Metabolism, Digestion of protein, Transamination, Deamination, Fate of Ammonia, Urea cycle, End products of each amino acid and their entry into TCA cycle)
4. Enzymes: (Definition, Classification, Biological Importance, Diagnostic use, Inhibition)
5. Vitamins: (Daily requirements, Dietary source, Disorders and physiological role)
6. Minerals (Daily requirement, Dietary Sources, Disorders and physiological role)
7. Organ function tests

B. Practical:

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1. Demonstration of uses of instruments or equipment
2. Qualitative analysis of carbohydrates, proteins and lipids
3. Normal characteristics of urine
4. Abnormal constituents of urine
5. Quantitative estimation of glucose, total proteins, uric acid in blood
6. Liver function tests
7. Kidney function tests
8. Lipid profile
9. Interpretation and discussion of results of biochemical tests.

C. Examination:**1. Theory:**

(1) No. of Papers: 02

(2) Marks: Paper I- 100**(3) Paper II- 100****1.1. Contents:****1.1.1. Paper-I:**

General Physiology, Biophysics, Body fluids, Cardiovascular system, Reticuloendothelial system, Respiratory system, Excretory system, Regulation of body temperature, Skin, Nerve Muscle physiology

1.1.2. Paper-II:

Endocrine system, Central Nervous System, Digestive system and metabolism, Reproductive system, Sense organs, Biochemistry, Nutrition.

2. Practical Including viva voce or oral:

2.1. Marks; 200

2.2. Distribution of marks;

Marks

2.2.1. Experiments 50

2.2.2. Spotting 30

2.2.3. Maintenance of Practical
record/Journal 20

2.2.4. Viva Voce (Oral) 100

Total 200**ORGANON OF MEDICINE WITH HOMOEOPATHIC PHILOSOPHY****Instructions:**

I (a) Organon of Medicine with Homoeopathic Philosophy is a vital subject which builds up the conceptual base of the physician;

(b) It illustrates those principles which when applied in practice enable the physician to achieve results, which he can explain logically and rationally in medical practice with greater competence;

(c) Focus of the education and training should be to build up the conceptual base of Homoeopathic Philosophy for use in medical practice.

II Homoeopathy should be taught as a complete system of medicine with logical rationality of its holistic, individualistic and dynamistic approach to life, health, disease, remedy and cure and in order to achieve this, integration in the study of logic, psychology and the fundamentals of Homoeopathy becomes necessary.

III (a) It is imperative to have clear grasp of inductive and deductive logic, and its application and understanding of the fundamentals of Homoeopathy;

(b) Homoeopathic approach in therapeutics is a holistic approach and it demands a comprehension of

patient as a person, disposition, state of his mind and body, along with the study of the disease process and its causes;

(c) Since Homoeopathy lays great emphasis on knowing the mind, preliminary and basic knowledge of the psychology becomes imperative for a homoeopathic physician and introduction to psychology will assist the student in building up his conceptual base in this direction.

IV The department of organon of medicine shall co-ordinate with other departments where students are sent for the pre-clinical and clinical training and this will not only facilitate integration with other related departments, but also enhance the confidence of the students when they will be attending specialty clinics.

FIRST B.H.M.S.

A. Theory:

1. Introductory lectures

- 1.1. Evolution of medical practice of the ancients (Prehistoric Medicine, Greek Medicine, Chinese medicine, Hindu medicine and Renaissance) and tracing the empirical, rationalistic and vitalistic thoughts.
- 1.2. Short history of Hahnemann's life, his contributions, and discovery of Homoeopathy, situation leading to discovery of Homoeopathy
- 1.3. Brief life history and contributions of early pioneers of homoeopathy like C.V. Boenninghausen, J.T. Kent, C.Hering, Rajendra Lal Dutta, M.L. Sircar
- 1.4. History and Development of Homoeopathy in India, U.S.A. and European countries
- 1.5. Fundamental Principles of Homoeopathy.
- 1.6. Basic concept of:
 - 1.6.1. Health: Hahnemann's concept and modern concept.
 - 1.6.2. Disease: Hahnemann's concept and modern concept.
 - 1.6.3. Cure.

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- 1.7. Different editions and constructions of Hahnemann's Organon of Medicine.

2. Logic

To understand organon of medicine and homoeopathic philosophy, it is essential to be acquainted with the basics of LOGIC to grasp inductive and deductive reasonings.

Preliminary lectures on inductive and deductive logic (with reference to philosophy book of Stuart Close Chapter 3 and 16).

3. Psychology

- 3.1. Basics of Psychology.
- 3.2. Study of behavior and intelligence.
- 3.3. Basic concepts of Sensations.
- 3.4. Emotion, Motivation, Personality, Anxiety, Conflict, Frustration, Depression, Fear, Psychosomatic Manifestations
- 3.5 Dreams.

4. Aphorisms 1 to 28 of organon of medicine

5. Homoeopathic Prophylaxis

B. Examination: There shall be no examination in the subject in First B.H.M.S.

SECOND B.H.M.S.

A. Theory:

1 Aphorisms 29-104 including foot notes of Organon of Medicine (5th & 6th Editions translated by R.E. Dudgeon and W. Boericke).

2 Homoeopathic philosophy:

2.1. Chapters of Philosophy books of J.T. Kent (Chapters 1 to 17, 23 to 27, 31 to 33), Stuart Close (Chapters- 8, 9, 11, 12) and H.A. Roberts (Chapters 3, 4, 5, 6, 8, 9, 11, 17, 18, 19, 20), related to Aphorisms 29-104 of Organon of Medicine

2.2. Symptomatology:

Details regarding Symptomatology are to be comprehended by referring to the relevant aphorisms of organon of medicine and chapters of the books on homoeopathic philosophy.

2.3. Causations:

Thorough comprehension of the evolution of disease, taking into account pre-disposing, fundamental, exciting and maintaining causes.

2.4. Case taking:

The purpose of homoeopathic case taking is not merely collection of the disease symptoms from the patient, but comprehending the patient as a whole with the correct appreciation of the factors responsible for the genesis and maintenance of illness. Hahnemann's concept and method of case taking, as stated in his Organon of Medicine is to be stressed upon.

2.5. Case processing: This includes,

(i) Analysis of Symptoms,

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(ii) Evaluation of Symptoms,

(iii) Miasmatic diagnosis,

(iv) Totality of symptoms

B. Practical or clinical:

-

1 Clinical posting of students shall be started from Second B.H.M.S onwards.

2 Each student shall maintain case records of at least ten acute cases

C. Examination:

1. Theory

1. No. of papers - 01

2. Marks: 100

3. Distribution of marks:

1.3.1. Logic – 15 marks

1.3.2. Psychology – 15 marks

1.3.3. Fundamentals of homoeopathy and aphorisms 1 to 104 – 50 marks

1.3.4. Homoeopathic philosophy – 20 marks

2. Practical including viva voce or oral:

2.1. Marks: 100

2.2. Distribution of marks:

Marks

2.2.1. Case taking and Case processing

40

2.2.2. Maintenance of practical

record or journal

10

2.2.4. Viva voce (oral)

50

Total

100

THIRD B.H.M.S.

A. Theory:

In addition to revision of Aphorisms studied in First B.H.M.S and Second B.H.M.S, the following shall be covered, namely:–

1. Hahnemann's Prefaces and Introduction to Organon of Medicine.
2. Aphorisms 105 to 294 of Hahnemann's Organon of Medicine, including foot notes (5th and 6th Editions translated by R.E. Dudgeon and W. Boericke)
3. Chapters of Philosophy books of J.T. Kent (Chapters- 28, 29, 30, 34 to 37), Stuart Close (Chapters- 7, 10, 13, 14, 15) & H.A. Roberts (Chapters- 7, 10, 12 to 19, 21, 34) related to 105-294 Aphorisms of Organon of Medicine.

B. Practical or clinical:

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Each student appearing for Third B.H.M.S examination shall maintain records of 20 cases (10 acute and 10 chronic cases).

C. Examination:

1. Theory:

1. Number of papers - 01

2. Marks: 100

3. Distribution of Marks:

1.3.1. Aphorisms 1 to 294 : 60 marks

1.3.2. Homoeopathic philosophy: 40 marks

2. Practical including viva voce or oral:

2.1. Marks: 100	
2.2. Distribution of marks;	<u>Marks</u>
2.2.1. Case taking and case processing	40
2.2.3. Maintenance of practical record or journal	10
2.2.4. Viva voce (oral)	50

Total	<u>100</u>

FOURTH B.H.M.S.

A. Theory:

In addition to the syllabus of First B.H.M.S, Second B.H.M.S and Third B.H.M.S, the following shall be covered, namely:–

1. Evolution of medical practice of the ancients (Prehistoric Medicine, Greek Medicine, Chinese medicine, Hindu medicine and Renaissance) and tracing the empirical, rationalistic and vitalistic thoughts.
2. Revision of Hahnemann's Organon of Medicine (Aphorisms 1-294) including footnotes (5th & 6th Editions translated by R.E. Dudgeon and W. Boericke).
3. Homoeopathic Philosophy:
Philosophy books of Stuart Close (Chapters- 1, 2, 4, 5, 6, 8, 17), J.T. Kent (Chapters - 18 to 22) and H.A. Roberts (Chapters- 1 to 5, 20, 22 to 33, 35), Richard Hughes (Chapters- 1 to 10) and C. Dunham (Chapters- 1 to 7).
4. Chronic Diseases:
 - 4.1. Hahnemann's Theory of Chronic Diseases.
 - 4.2. J.H. Allen's The Chronic Miasms – Psora and Pseudo-psora; Sycosis
- (a) Emphasis should be given on the way in which each miasmatic state evolves and the characteristic expressions are manifested at various levels and attempt should be made to impart a clear understanding of Hahnemann's theory of chronic miasms.
- (b) The characteristics of the miasms need to be explained in the light of knowledge acquired from different branches of medicine.
- (c) Teacher should explain clearly therapeutic implications of theory of chronic miasms in practice and this will entail a comprehension of evolution of natural disease from miasmatic angle, and it shall be correlated with applied materia medica.

B. Practical or clinical:

- (a) The students shall maintain practical records of patients treated in the out patient department and inpatient department of the attached hospital.
- (b) The following shall be stressed upon in the case records, namely:–
 - 1 receiving the case properly (case taking) without distortion of the of patient's expressions;
 - 2 nosological diagnosis;
 - 3 analysis and evaluation of the symptoms, miasmatic diagnosis and portraying the totality of symptoms;
 - 4 individualisation of the case for determination of the similimum, prognosis, general management including diet and necessary restrictions on mode of life of the individual

- management including diet and necessary restrictions on mode of life of the individual patients;
- 5 state of susceptibility to formulate comprehensive plan of treatment;.
 - 6 order of evaluation of the characteristic features of the case would become stepping stone for the repertorial totality;
 - 7 remedy selection and posology;
 - 8 second prescription.

Note: (1) Each student has to maintain records of twenty thoroughly worked out cases (ten chronic and ten acute cases).

(2) Each student shall present at least one case in the departmental symposium or seminar.

C. Examination:

1. Theory:

- 1.1 Number of papers - 02
- 1.2 Marks: Paper I: 100, Paper II: 100
- 1.3 Distribution of marks:

Paper I: Aphorisms 1-145:-	30 marks
Aphorisms 146-294:-	70 marks
Paper II: Chronic diseases –	50 marks
Homoeopathic philosophy –	50 marks

2. Practical including viva voce or oral:

2.1. Marks: 100

2.2. Distribution of marks;

	<u>Marks</u>
2.2.1. Case taking and case processing of a long case	30
2.2.2. Case taking and case processing of a short case	10
2.2.3. Maintenance of practical record or journal	10
2.2.4. Viva Voce (oral)	50

Total	<u>100</u>

HOMOEOPATHIC PHARMACY

Instructions:

Instruction in Homoeopathic Pharmacy shall be so planned as to present ,–

- (1) importance of homoeopathic pharmacy in relation to study of homoeopathic materia medica, organon of medicine and national economy as well as growth of homoeopathic pharmacy and research;
- (2) originality and speciality of homoeopathic pharmacy and its relation to pharmacy of other recognised systems of medicine.

- (3) the areas of teaching shall encompass the entire subject but stress shall be laid on the fundamental topics that form the basis of homoeopathy.

A. Theory:

I. General concepts and orientation:

1. History of pharmacy with emphasis on emergence of Homoeopathic Pharmacy.
2. Official Homoeopathic Pharmacopoeia (Germany, Britain, U.S.A., India).
3. Important terminologies like scientific names, common names, synonyms.
4. Definitions in homoeopathic pharmacy.
5. Components of Pharmacy.
6. Weights and measurements.
7. Nomenclature of homoeopathic drugs with their anomalies.

II. Raw Material: drugs and vehicles

1. Sources of drugs (taxonomic classification, with reference to utility).
2. Collection of drug substances.
3. Vehicles.
4. Homoeopathic Pharmaceutical Instruments and appliances.

III. Homoeopathic Pharmaceutics:

1. Mother tincture and its preparation – old and new methods.
2. Various scales used in homoeopathic pharmacy.
3. Drug dynamisation or potentisation.
4. External applications (focus on scope of Homoeopathic lotion, glycerol, liniment and ointment).
5. Doctrine of signature.
6. Posology (focus on basic principles; related aphorisms of organon of medicine).
7. Prescription (including abbreviations).
8. Concept of placebo.
9. Pharmaconomy – routes of homoeopathic drug administration.
10. Dispensing of medicines.
11. Basics of adverse drug reactions and pharmaco-vigilance.

IV. Pharmacodynamics:

1. Homoeopathic Pharmacodynamics

2. Drug Proving (related aphorisms 105 – 145 of organon of medicine) and merits and demerits of Drug Proving on Humans and Animals.

3. Pharmacological study of drugs listed in Appendix -A

V. Quality Control:

1. Standardisation of homoeopathic medicines, raw materials and finished products.
2. Good manufacturing practices; industrial pharmacy.
3. Homoeopathic pharmacopoeia laboratory – functions and activities, relating to quality control of drugs.

VI. Legislations pertaining to pharmacy:

1. The Drugs and Cosmetics Act, 1940 (23 of 1940) {in relation to Homoeopathy};
2. Drugs and Cosmetics Rules, 1945 {in relation to Homoeopathy};
3. Poisons Act, 1919 (12 of 1919);
4. The Narcotic Drugs and Psychotropic Substances Act, 1985 (61 of 1985);
5. Drugs and Magic Remedies (Objectionable Advertisements) Act, 1954 (21 of 1954);
6. Medicinal and Toilet Preparations (Excise Duties) Act, 1955 (16 of 1955).

B. Practical:

Experiments

1. Estimation of size of globules.
2. Medication of globules and preparation of doses with sugar of milk and distilled water.
3. Purity test of sugar of milk, distilled water and ethyl alcohol.
4. Determination of specific gravity of distilled water and ethyl alcohol.
5. Preparation of dispensing alcohol and dilute alcohol from strong alcohol.
6. Trituration of one drug each in decimal and centesimal scale.
7. Succussion in decimal scale from Mother Tincture to 6X potency.
8. Succussion in centesimal scale from Mother Tincture to 3C potency.
9. Conversion of Trituration to liquid potency: Decimal scale 6X to 8X potency.
10. Conversion of Trituration to liquid potency: Centesimal scale 3C to 4C potency.

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11. Preparation of 0/1 potency (LM scale) of 1 Drug.

12. Preparation of external applications – lotion, glycerol, liniment, ointment.

13. Laboratory methods – sublimation, distillation, decantation, filtration, crystallisation.
14. Writing of prescription.
15. Dispensing of medicines.
16. Process of taking minims.
17. Identification of drugs (listed in Appendix B)-
 - (i). Macroscopic and Microscopic characteristic of drug substances- minimum 05 drugs;
 - (ii) Microscopic study of trituration of two drugs (up to 3X potency).
18. Estimation of moisture content using water bath.
19. Preparation of mother tincture – maceration and percolation.
20. Collection of 30 drugs for herbarium.
21. Visit to homoeopathic pharmacopoeia laboratory and visit to a large scale manufacturing unit of homoeopathic medicines (GMP compliant). (Students shall keep detailed visit reports as per proforma at Annexure- 'B').

C. Demonstration

1. General instructions for practical or clinical in pharmacy.
2. Identification and use of homoeopathic pharmaceutical instruments and appliances and their cleaning.
3. Estimation of moisture content using water bath.
4. Preparation of mother tincture – maceration and percolation.

APPENDIX-A

List of drugs included in the syllabus of pharmacy for study of pharmacological action:-

1. Aconitum napellus
2. Adonis vernalis
3. Allium cepa
4. Argentum nitricum
5. Arsenicum album
6. Atropa Belladonna
7. Cactus grandiflorus
8. Cantharis vesicatoria
9. Cannabis indica
10. Cannabis sativa
11. Cinchona officinalis
12. Coffea cruda

14. *Crotalus horridus*
15. *Gelsemium sempervirens*
16. *Glonoinum*
17. *Hydrastis canadensis*
18. *Hyoscyamus niger*
19. *Kali bichromicum*
20. *Lachesis*
21. *Lithium carbonicum*
22. *Mercurius corrosivus*
23. *Naja tripudians*
24. *Nitricum acidum*
25. *Nux vomica*
26. *Passiflora incarnata*
27. *Stannum metallicum*
28. *Stramonium*
29. *Symphytum officinale*
30. *Tabacum*

APPENDIX-B

List of drugs for identification

I. Vegetable Kinngdom

1. *Aegle folia*
2. *Anacardium orientale*
3. *Andrographis paniculata*
4. *Calendula officinalis*
5. *Cassia sophora*
6. *Cinchona officinalis*
7. *Cocculus indicus*
8. *Coffea cruda*
9. *Colocynthis*
10. *Crocus sativa*
11. *Croton tiglium*
12. *Cynodon dactylon*
13. *Ficus religiosa*
14. *Holarrhena antidysenterica*
15. *Hydrocotyle asiatica*
16. *Justicia adhatoda*
17. *Lobelia inflata*
18. *Nux vomica*
19. *Ocimum sanctum*
20. *Opium*
21. *Rauwolfia serpentina*
22. *Rheum*
23. *Saraca indica*
24. *Senna*
25. *Stramonium*
26. *Vinca minor*

II. Chemicals or Minerals

1. *Aceticum acidum*

2. Alumina
3. Argentum metallicum
4. Argentum nitricum
5. Arsenicum album
6. Calcareo carbonica
7. Carbo vegetabilis
8. Graphites
9. Magnesium phosphorica
10. Natrum muriaticum
11. Sulphur

III. Animal kingdom

1. Apis mellifica
2. Blatta orientalis
3. Formica rufa
4. Sepia
5. Tarentula cubensis

Note:

1. Each student shall maintain practical or clinical record or journal and herbarium file separately.
2. College authority shall facilitate the students in maintaining record as per Appendix-C.

E. Examination:

1. Theory

- 1.1 Number of paper - 01
- 1.2 Marks: 100

2. Practical including viva voce or oral

2.1. Marks: 100	
2.2. Distribution of marks;	<u>Marks</u>
2.2.1. Experiments	15
2.2.2. Spotting	20
2.2.3. Maintenance of practical records or journal	10
2.2.4. Maintenance of herbarium record	05
2.2.5. Viva voce (oral)	50

Total	<u>100</u>

HOMOEOPATHIC MATERIA MEDICA

Instructions:

- I (a) Homoeopathic Materia Medica is differently constructed as compared to other Materia Medicas;
- (b) Homoeopathy considers 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 substance, the drug substance as a whole is lost sight of.

II Essential and complete knowledge of the drug action as a whole can be ascertained only by qualitative drug proving on healthy persons and this alone can make it possible to elicit all the symptoms of a drug with reference 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.

III (a) 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;

(b) 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.

IV (a) The most commonly indicated drugs for day to day ailments should be taken up first so that in the clinical classes or outdoor duties the students become familiar with their applications and they should be thoroughly dealt with explaining all comparisons and relationship;

(b) Students should be conversant with their sphere of action and family relationships and the rarely used drugs should be taught in outline, emphasizing only their most salient features and symptoms.

(V) 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.

(VI) (a) While teaching therapeutics an attempt should be made to recall the Materia Medica so that



- (3) Sphere of action.
- (4) Symptomatology of the medicine emphasizing the characteristic symptoms (mental, physical generals and particulars including sensations, modalities and concomitants) and constitution.
- (5) Comparative study of medicines.
- (6) Therapeutic applications (applied Materia Medica).

FIRST B.H.M.S.

A. Theory:

General topics of Materia Medica :- (including introductory lectures)

(a) Basic Materia Medica –

- 1. Basic concept of Materia Medica
- 2. Basic construction of various Materia Medicae
- 3. Definition of Materia Medica

(b) Homoeopathic Materia Medica

- 1. Definition of Homoeopathic Materia Medica
- 2. Basic concept and construction of Homoeopathic Materia Medica.
- 3. Classification of Homoeopathic Materia Medica.
- 4. Sources of Homoeopathic Materia Medica.
- 5. Scope and Limitations of Homoeopathic Materia Medica

Note: There shall be no examination in First B.H.M.S.

SECOND B.H.M.S

A. Theory:

(a) In addition to syllabus of First B.H.M.S. Course, following shall be taught, namely:-

- (i) Science and philosophy of homoeopathic materia medica.
- (ii) Different ways of studying homoeopathic materia medica (e.g. psycho-clinical, pathological, physiological, synthetic, comparative, analytical, remedy relationships, group study, portrait study etc.)
- (iii) Scope and limitations of homoeopathic materia medica.
- (iv) Concordance or remedy relationships.


(v) Comparative homoeopathic materia medica, namely:-

Comparative study of symptoms, drug pictures, drug relationships.

(vi) Theory of biochemic system of medicine, its history, concepts and principles according to Dr. Wilhelm Heinrich Schuessler. Study of 12 biochemic medicines. (tissue remedies).

(b) Homoeopathic Medicines to be taught in Second B.H.M.S as per Appendix –I.

APPENDIX-I

1. Aconitum napellus
 2. Aethusa cynapium
 3. Allium cepa
 4. Aloe socotrina
 5. Antimonium crudum
 6. Antimonium tartaricum
 7. Apis mellifica
 8. Argentum nitricum
 9. Arnica Montana
 10. Arsenicum album
 11. Arum triphyllum
 12. Baptisia tinctoria
 13. Bellis perrenis
 14. Bryonia alba
 15. Calcareo carbonica
 16. Calcareo fluorica
 17. Calcareo phosphoric
 18. Calcareo sulphurica
 19. Calendula officinalis
 20. Chamomilla
 21. Cina
 22. Cinchona officinalis
 23. Colchicum autumnale
 24. Colocynthis
 25. Drosera
 26. Dulcamara
 27. Euphrasia
 28. Ferrum phosphoricum
 29. Gelsemium
 30. Hepar sulph
 31. Hypericum perforatum
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36. Ledum palustre

