

Annual Report

2020-2021



CENTRAL COUNCIL FOR RESEARCH IN HOMOEOPATHY

CONTENTS

PRELIMINARY

- Executive Summary 1-3
- Abbreviations 4-8
- Objectives, Vision and Mission 9-12

ADMINISTRATIVE REPORT

13-54

- Organizational Setup 15-16
- Governing Body 17-18
- Executive Committee 19-20
- Scientific Advisory Board 21-22
- Standing Finance Committee 23
- Ethical Committee 24-25
- Special Committee for Clinical Research 26-27
- Special Committee for Drug Standardization 28-29
- Special Committee for Homoeopathic Pathogenetic Trial (Drug Proving) 30
- Special Committee on Fundamental & Basic Research 31-32
- Representation of SC/ST in the Council Services 33

Budget 34

Right to Information Act 2005 35

Public Grievance Cell 36

Pharmacovigilance Program 37-38

Infrastructure 39-52

Gender Budget 53

TECHNICAL REPORT

55-142

Research Activities

- Survey, Collection & Cultivation of Medicinal Plants 57-66
- Drug Standardisation Research 67-80
- Homoeopathic Pathogenetic Trial (Drug Proving) 81-83
- Clinical Verification Research 84-87
- Clinical Research 88-92
- Research on Epidemic Diseases 93-98
- Fundamental & Collaborative Research 99-107
- Extra-mural Research 108-109

International & National Collaborations

110-113

Public Health Programmes in Research Mode

114-142

- Integration of AYUSH (Homoeopathy with Yoga) in the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke (NPCDCS) 114-116
- SC Health Camps under Schedule Cast Sub-plan Component 116-142

Publications & Library	143-182
• Publications	145-175
• Library	176-178
• Council's Website & Social Media Page	179-181
• AYUSH Research Portal	182
Miscellaneous Activities	183-220
• IEC Activities of the CCRH	185-220
Linking Research with Education	221-226
• Short Term Studentship in Homoeopathy (STSH)	223
• Quality MD Dissertation in Homoeopathy	224-225
Accounts	227-282
Subjects	
• Balance Sheet for General Account	229-230
• Schedules for Balance Sheet	231-237
• Income & Expenditure Account	238-239
• Schedules for Income & Expenditure Account	240-249
• Statement of Advances to Employees	250
• Statement of Last Year Advances Adjustment	251-253
• Significant Accounting Policy	254-256
• Statement of Surplus stock of Publication and IJRH	257
• Receipt & Payment Account	258-261
• Schedules for Receipt & Payment Account	262-271
• Receipt & Payment Account for General Provident Fund	272
• Balance Sheet for General Provident Fund	273
• List of STDR	274
• Receipt & Payment Account for Pension Fund	275
• Balance Sheet for Pension Fund	276
• Receipt & Payment Account and Balance Sheet for New Pension Scheme	277
• Balance Sheet for New Pension Scheme	278
CAG Report	279-281
• ANNEXURE	282

EXECUTIVE SUMMARY

Central Council for Research in Homoeopathy, an apex autonomous research organisation under Ministry of AYUSH, Govt. of India undertakes, coordinates, develops, disseminates and promotes scientific research in the field of Homoeopathy through its centres spread all over India since its inception. The Council provides health care in the rural and urban areas besides formulation and conduction of research programs/projects in collaboration with national and international institutes of excellence to undertake evidence-based research in fundamental and applied aspects of Homoeopathy. The findings of the various research carried out with modern scientific parameters are broadcasted through monographs, journals, newsletters, IEC materials, seminars/workshops/health melas etc.

The administrative and technical wings of the Council manage the whole setup of the organization. The administrative wing supervises the organisational set up, core committees that regulate research activities of the Council in different spheres. The policies, directions and overall guidance for the activities of the Council are regulated by the Governing body. Hon'ble Minister of AYUSH, GOI presides over the governing body and has general control on the affairs of the Council. The Council is undertaking research activities through a network of 24 institutes/units, 3 extension centres and 6 OPD's in the premises of Allopathic Hospitals. In its endeavor of strengthening its infrastructure and creating an environment favorable for scientific research in the homoeopathic field with the support of Ministry of AYUSH, construction of building of RRI (H), Mumbai is presently completed, while constructions of the buildings of HDRI, Lucknow, CRU(H), Siliguri and PG Student Hostel at NHRIMH, Kottayam are in progress and lands has been acquired for RRI(H), Shimla.

The technical part of the report focuses on the scientific aspire of the Council in introduction of new drugs, strategy adopted to select thrust areas of the research as per the national needs, undertaking studies to broaden the scientific basis of homoeopathy both as preventive medicine as well as a therapeutic option, its use for health promotion as a cost-effective system. Special efforts have been made in Public Health Research related to SARS-COVID-19, Dengue, AES, Childhood health, School health programme, SC Health camps under schedule caste sub-plan component and NPCDCS programme. The Centre for Medicinal Plants Research in Homoeopathy (CMPRH) located at Emerald, Ooty is engaged in cultivating and supply of raw drugs to Drug Standardization Units of the Council at Noida and Hyderabad besides the revision of drug monographs of Homoeopathic Pharmacopoeia Laboratory. During the reporting period 35 raw drugs were supplied for standardisation to NOIDA, 4 drugs were supplied to Hyderabad. 03 to Kolkata & 04 plant material to Homoeopathic Pharmacopoeia Laboratory (HPL), Ghaziabad. The CMPRH sold the raw drug plant material in fresh & dry form worth Rs. 66,930/-.

During this period, the Council has laid down standards for 31 drugs on Pharmacognostic and physio-chemical parameters. The revision of 14 monograph out of which 12 drugs of plant origin, and 02 drugs of chemical origin in Homoeopathic Pharmacopoeia of India was undertaken to bring it at par with International Pharmacopoeias. Chromatographic parameters of 10 drugs have been added in HPTLC Atlas. Under Drug Proving Programme, 02 coded drugs were proved at 01 centre involving 35 Healthy volunteers. In the area of clinical verification, we have tried to focus on our mandate of verification of symptoms produced in drug proving by including scales like MYMOP2 (Measure Yourself Medical Outcome Profile) and ORIDL (Outcome in relation to Impact on Daily Living) to measure the clinical outcomes. Homoeopathic Questionnaire is also being used for

assessing the important changes caused by illness and modified Naranjo Criteria to assess patient and remedy reactions. The Clinical verification of 8 drugs was continued at 14 centres. During the reporting year, 08 clinical research studies continued from previous years while 05 studies have been concluded. Further 03 new studies were initiated. The, screening and follow up of all the studies continued during the reporting year at the Institutes/units.

In this year of pandemic, on publication of public health advisory has been issued by Ministry of AYUSH. Council in containment of COVID-19 has undertaken 02 prophylactic studies using Arsenic album 30C as genus epidemicus from May 2020 to August 2020. Data analysis showed positive effect of medicine in prevention of COVID-19. For add on homoeopathy treatment of COVID-19, 05 clinical trials were undertaken with various allopathy institutes of repute all over India. These add on homoeopathy studies showed earlier recovery of COVID-19 patients by 2 days and a smaller number of deaths reported in add on homoeopathy group as compared to standard of care alone. CCRH has also undertaken preclinical studies to understand the role of homoeopathy medicine in COVID-19 prevention & management.

The Council is committed to enhance international cooperation for global promotion of evidence-based Homoeopathy through international interactions, exchange of MoUs and organising international conferences. During the reporting year, as a joint initiative under the Memorandum of Understanding (MoU), Central Council for Research in Homoeopathy (CCRH), New Delhi, India and College of Homeopaths of Ontario (CHO), Toronto, Canada, jointly organized a webinar for building research aptitude, enhancing knowledge about present and future research and improving clinical practice of practitioners and researchers on 27th November, 2020 on the topic “Clinical practice guidelines for evidence-based research in Homoeopathy”. The Council has integrated Homoeopathy with Yoga on a pilot basis and implemented and executed the Integration of AYUSH (Homoeopathy with Yoga) in the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke with AYUSH (Homoeopathy along with Yoga) project on pilot basis at two identified districts i.e., Krishna (AP) since September 2015 and at Darjeeling district (WB) since February 2016 with 9 and 7 Lifestyle disorder clinics (AYUSH LSD) respectively, in the premises of the State Government health facilities i.e., CHC and above.

As per the direction of Ministry of AYUSH, Council has a mandate to undertake health programme for the benefit of Schedule caste population under the Schedule caste Sub Plan Programme. Under the plan, the programme is to be undertaken in the rural/urban areas having SC population more than 30%. During the year 2020-21 the Council has undertaken the programme through its 09 Institutes/ Units by adopting 28 villages having SC population more than 30%.

The program on Health Care Awareness and Management with Capacity Building of general population linked with Swachh Bharat in areas predominantly identified as Scheduled Caste Areas was undertaken in pre-identified areas with a high percentage of Scheduled Caste population to enhance the program outreach to this section of the society. This program was intended to propagate use of homoeopathy in the target population and ensure accessibility to treatment. The health care workers (HCW) in coordination with trained homoeopathic practitioners were involved in delivery of services, sensitization of people, and aware about Homoeopathy along with health and hygiene practice. The program was undertaken through 17 institutes/unit of the Council by adopting 26 villages.

The Council's Professional outreach and promotional activities are also reported inside. The number of patients in the OPD of the Council reached 447304 comprising of 54.08 % women. Under

the initiative of 'Linking research with education' few years back, the Council launched the Short-Term Studentship in Homoeopathy Scheme (STSH) for undergraduate Students and CCRH Scholarship Scheme for MD/ PhD Students as a step towards capacity building and encouraging research aptitude among undergraduate, post graduate & PhD students. The Council brings out quality periodical and non-periodical publications for disseminating the outcomes of research to academicians, researchers and common man. In the reporting year, Council has published 04 issues of Indian Journal of Research in Homoeopathy and 03 volumes of CCRH Newsletter. The Separate Audit Report is appended along with Annual Accounts. During the last financial year inspite of adversities due to COVID-19, we have tried to achieve most of our performance targets. All these achievements are only possible through hard work of our scientists, other support staff, and particularly strong support of Special Committees of Clinical Research, Drug Proving, Drug Standardization, Fundamental Research, Ethical Committee and Scientific Advisory Board. Studying Finance Committee and Ministry of AYUSH have supported through out for achieving our goals.



Dr. Anil Khurana
Director General

ABBREVIATIONS

AA	Alopecia Areata
ADE	Antibody-Dependent Enhancement
ADE	Adverse Drug Event
ADHD	Attention Deficit Hyperactivity Disorder
ADL	Acute adenolymphangitis
ADME	Absorption, Distribution, Metabolism, and Excretion
ADR	Adverse Drug Reaction
AES	Acute Encephalitis Syndrome
A-HMIS	AYUSH- Hospital Management Information System
AIIMS	All India Institute of Medical Sciences
AIDS	Acquired Immuno Deficiency Syndrome
ALA	Australasian Lymphology Association
ANGRAU	Acharya N G Ranga Agricultural University
ANM	Auxiliary Nursing & Midwifery
AOM	Acute Otitis Media
ASHA	Accredited Social Health Activist
ASU&H	Ayurveda, Siddha, Unani and Homoeopathy
AYUSH	Ayurveda, Yoga, Unani, Siddha & Homoeopathy
BCOM	Both Constitutional and Organopathic Medicines
CAC	Community Awareness Camps
CCH	Central Council of Homoeopathy
CCRH	Central Council for Research in Homoeopathy
CDRI	Central Drug Research Institute
CCRUM	Central Council for Research in Unani Medicine
CCRYN	Central Council for Research in Yoga & Naturopathy
CFA	Complete Freund's Adjuvant
CGHS	Central Government Health Scheme
CGI-SCH	Clinical Global Impression-Schizophrenia
CHC	Community Health Centre
CHIKV	Chikungunya virus
CHLAS	Current Health Literature Awareness Services
CHNC	Community Health Nutritional Center
CHO	College of Homeopaths of Ontario
CIMAP	Central Institute of Medicinal and Aromatic Plants
CIP	Central Institute of Psychiatry
CME	Continuing Medical Education
CMPRH	Centre for Medicinal Plants Research in Homoeopathy
COLL	Collaborative studies
COOS	Clinical Ordinal Outcomes Scale
COVID-19	Coronavirus disease
COX-2	Cyclooxygenase-2
CPCSEA	Committee for the Purpose of Control and Supervision of Experiments on Animals
CPGRAMS	Centralized Public Grievances Redressal and Monitoring System
CR	Clinical Research
CRI (H)	Central Research Institute for Homoeopathy

CRU (H)	Clinical Research Unit for Homoeopathy
CSIR	Council of Scientific and Industrial Research
CV	Clinical Verification
CVU	Clinical Verification Unit
DACRRI (H)	Dr. Anjali Chatterjee Regional Research Institute for Homoeopathy
DARPG	Department of Administrative Reforms and Public Grievances
DDPRCRI (H)	Dr. D. P. Rastogi Central Research Institute for Homoeopathy
DGDGHS	Director General, Directorate General of Health Services
DLQI	Dermatology Life Quality Index
DNA	Deoxyribonucleic acid
Doc.	Documentation & Publication
DOP&T	Department of Personnel and Training
DP	Drug Proving
DPE	Directional Preference Exercise
DPRU	Drug Proving Research Unit
DPSRU	Delhi Pharmaceutical Sciences and Research University
DPU	Drug Proving Unit
DS	Drug Standardization
DSU	Drug Standardisation Unit
Dte.	Department
EC	Effective concentration
EDL	Essential Drug List
ELISA	Enzyme-linked Immune Sorbent Assay
EMEA	European Medicines Evaluation Agency
EMR	Extra Mural Research
ENT	Ear Nose and Throat
ESRS	Extra-pyramidal Symptoms Rating Scale
Extn. C	Extension Centers
FPS	Finished Product Standards
FR	Fundamental Research
GAF	Global Assessment of Functioning
GAGS	Global Acne Grading System
GES	Global Exhibition on Services
GMP	Good Manufacturing Practice
GOI	Government of India
GOS	Global Overall Symptom
H+ IMP	Homoeopathy + Institutional Management Protocol
HDRI	Homoeopathic Drug Research Institute
HIV	Human Immuno Deficiency Virus
HOD	Head of Department
HOPD	Homoeopathic Out Patient Department
HPC	Homoeopathic Pharmacopeia Committee
HPI	Homoeopathic Pharmacopoeia of India
HPL	Homoeopathic Pharmacopoeia Laboratory
HPT	Homoeopathic Pathogenetic Trial
HPTLC	High Performance Thin Layer Chromatography
HQ	Headquarters
HRID	Homoeopathic Research Institute for Disabilities

HTC	Homoeopathic Treatment Centre
IA	Internal Audit
IC	Inhibitory Concentration
ICMR	Indian Council of Medical Research
IDRS	Indian Diabetic Risk Score
IEC	Information Education & Communication
IHBAS	Institute of Human Behaviour & Allied Sciences
IIPH	Indian Institute of Public Health
ILI	Influenza like Illness
IMP	Institutional Management Protocol
IPD	Inpatient Department
IPvCCs	Intermediary Pharmacovigilance Centres
IJRH	Indian Journal of Research in Homoeopathy
ISM&H	Indian Systems of Medicine and Homoeopathy
JE	Japanese Encephalitis
JEV	Japanese Encephalitis Virus
JIPMER	Jawaharlal Institute of Postgraduate Medical Education and Research
JSSHS	Janakpuri Super Specialty Hospital Society
KMDA	Kolkata Metropolitan Development Authority
LSM	Lifestyle Modification
MCH	Mother & Child Health
MD	Doctor of Medicine
MDNIY	Morarji Desai National Institute of Yoga
MH&FW	Ministry of Health & Family Welfare
MMRDA	Mumbai Metropolitan Region Development Authority
MoU	Memorandum of Understanding
MYMOP2	Measure Yourself Medical Outcome Profile
NACO	National AIDS Control Organisation
NCCS	National Centre for Cell Science
NCD	Non Communicable Diseases
NER	North East Region
NEGERD	Non Erosive Gastro Esophageal Reflux Disease
NGO	Non-Governmental Organization
NGRI	National Geophysical Research Institute
NHDRI	National Homoeopathic Drug Research Institute
NHRIMH	National Homoeopathy Research Institute in Mental Health
NICED	National Institute of Cholera and Enteric Diseases
NIH	National Institute of Homoeopathy
NIHFW	National Institute of Health and Family Welfare
NIV	National Institute of Virology
NHMC	Nehru Homoeopathic Medical College
NO	Nitric oxide
NPCDCS	National Programme for prevention & control of Cancer, Diabetes, Cardiovascular diseases and Stroke
NPvCC	National Pharmacovigilance Centre
NRS	Numeric Pain Rating Scale
NSIC	National Small Industries Corporation
NSLBP	Non Specific Low Back Pain

OBC	Other Backward Class
OECD	Organisation for Economic Co-operation and Development
OLP	Oral Lichen Planus
OPAC	Online Public Access Catalogue
OPD	Out Patient Department
ORIDL	Outcome in Relation to Impact on Daily Living
PANSS	Positive and Negative Syndrome Scale (Schizophrenia)
PCIM&H	Pharmacopoeia Commission for Indian Medicine & Homoeopathy
PEC	Project Evaluation Committee
PHQ-4	Patient Health Questionnaire for Anxiety and Depression
PILEX	Punjab International Trade Expo
(P) Ltd.	Private limited
PMO	Prime Minister's Office
P.O.	Post Office
PPvCC	Peripheral Pharmacovigilance Centres
Prof.	Professor
P. S.	Police Station
PSUs	Public Sector Undertakings
PTU	Propylthiouracil
PTZ	Pentylene-tetrazole
PWH	Persons with Haemophilia
QoL	Quality of Life
RAV	Rashtriya Ayurveda Vidyapeeth
RCT	Randomised Controlled Trial
RDT	Rapid Diagnostic Test
ReDCROSH	Reporting Observational Studies in Homoeopathy
RTPCR	Real-time Polymerase Chain Reaction
Retd.	Retired
R&I	Receipt & Issue
RNA	Ribonucleic acid
RO (H)	Research Officer (Homoeopathy)
RO (P)	Research Officer (Pharmacognosy)
RRI (H)	Regional Research Institute for Homoeopathy
RTI	Right to Information Act
SAB	Scientific Advisory Board
SAC	Scientific Advisory Committee
SADQ	Severity of Alcohol Dependence Questionnaire
SARS-CoV-2	Severe Acute Respiratory Syndrome Coronavirus-2
SC	Scheduled Castes
SCH	Sub-Clinical Hypothyroidism
SCCMP	Survey, Collection and Cultivation of Medicinal Plants
SEPC	Services Export Promotion Council
SMPCU	Survey of Medicinal Plants & Collection Unit
SMPRGH	Survey of Medicinal Plants Research Garden & Herbarium
SODA	Score and Severity of Dyspepsia Assessment
SPADI	Shoulder Pain and Disability Index
SRP	Swasthya Rakshan Programme
ST	Scheduled Tribes

STGs	Standard Treatment Guidelines
STSH	Short Term Studentship in Homoeopathy
SUBI	Subjective Well-Being Inventory
TME	Terminal Medical Examination
TNF- α	Tumor Necrosis Factor- α
TLC	Therapeutic Lifestyle Changes
UCLA	University of California, Los Angeles
UK	United Kingdom
U.P	Uttar Pradesh
UT	Union Territories
UTI	Urinary Tract Infection
UTISA	Urinary Tract Infection Symptom Assessment
VC	Vithoukias Compass
VL	Visceral Leishmaniasis
VSMS	Vineland Social Maturity Scale
WHD	World Homoeopathy Day
WHO	World Health Organisation
WHOQOL	World Health Organization Quality of Life

OBJECTIVES, VISION AND MISSION



OBJECTIVES, VISION AND MISSION

OBJECTIVES

The Central Council for Research in Homoeopathy (CCRH) was established on 30th March, 1978 under the Societies Registration Act XXI of 1860 with the following main objectives: -

- To undertake research programs in Homoeopathy on scientific lines
- To propagate knowledge and disseminate information pertaining to research in Homoeopathy
- To undertake experimental studies in connection with causation, mode of spread, prevention and treatment of diseases
- To initiate, aid, develop and co-ordinate scientific research in different aspects of Homoeopathy: fundamental and applied
- To exchange information with other institutions, associations and societies interested in the objectives similar to those of CCRH

VISION

To promote research that contributes towards the development of homoeopathic system of medicine globally.

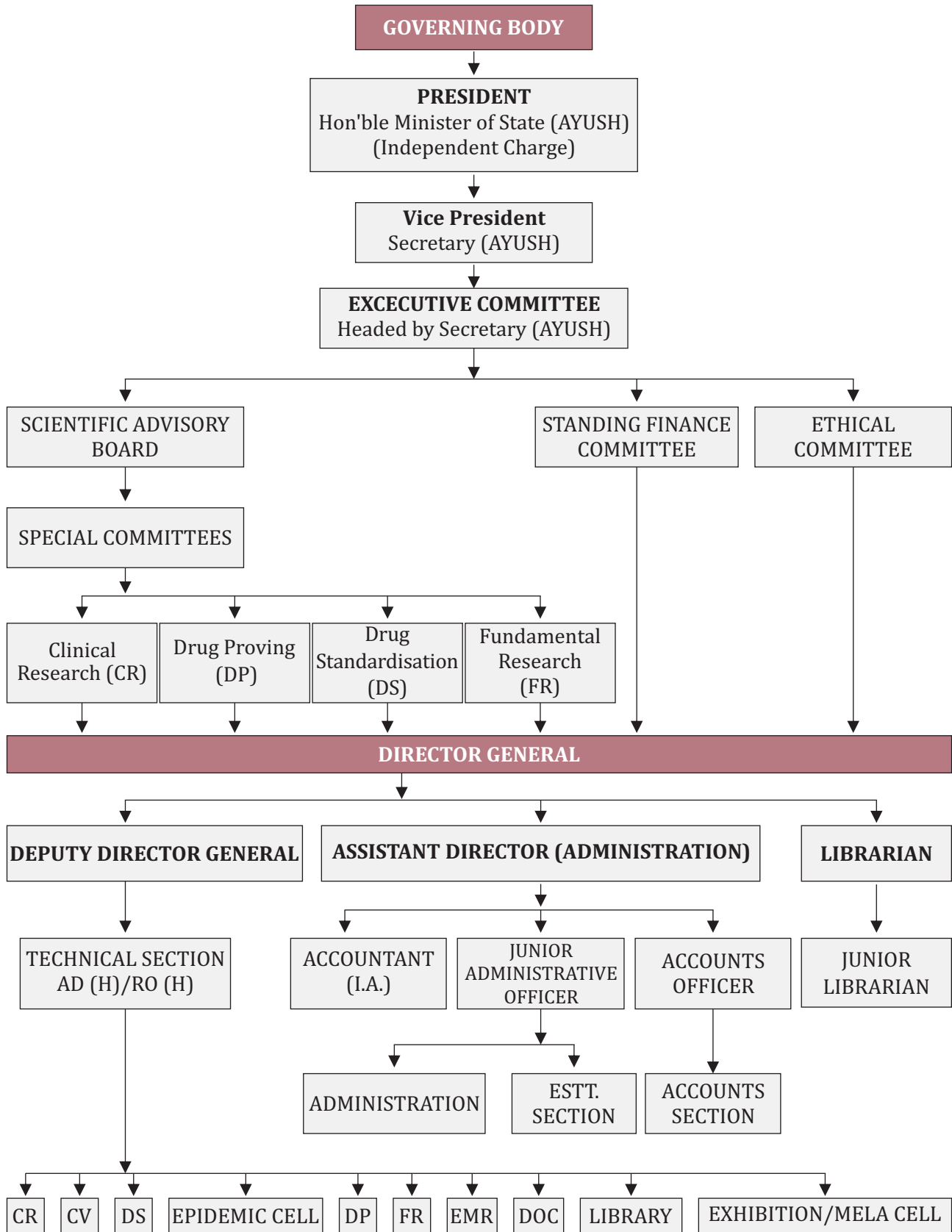
MISSION

Conducting scientific and ethical research thereby enhancing success rate of clinical practice, promotion of safe, efficient and effective treatment in health care delivery and ensuring global acceptance of Homoeopathy.

ADMINISTRATIVE REPORT



ORGANIZATIONAL SETUP



Abbreviation: (CR) Clinical Research; (CV) Clinical Verification; (DS) Drug Standardization; (DP) Drug Proving; (FR) Fundamental Research; (EMR) Extra Mural Research; (DOC) Documentation



Figure 1: Network of Institutes and Units of CCRH in the country

GOVERNING BODY

The management of the affairs of the Council is entrusted to a regulatory body, the 'Governing Body' (GB) of the Central Council for Research in Homoeopathy. The Governing Body of the Council has been reconstituted on 31.03.2018.

Members of GB are as follows:

- | | |
|---|-----------------|
| 1. President: Minister In-charge of AYUSH – | Chairman |
| 2. Vice President: Minister of State/Deputy Minister, Government of India (if any) under Minister In-charge of AYUSH, otherwise Secretary, Ministry of AYUSH | Member |

Official Members

3. **Additional Secretary (Financial Adviser)**, Ministry of Health & Family Welfare.
4. **Joint Secretary**, Ministry of AYUSH.

Non-official members

- | | |
|---|---------------|
| 1. Padma Shri Prof. (Dr.) V.K. Gupta
C-3/29, Rajouri Garden,
New Delhi-110027 | Member |
| 2. Prof. (Dr.) Chaturbhujaya Nayak
Flat No. J-108, 2nd Floor (Near Community Centre),
RBI Enclave, Paschim Vihar, New Delhi-110063 | Member |
| 3. Dr. Rathin Chakravarty
Consultant Homoeopath, 5-Subal Koley Lane,
P.S. Shibpur, Howrah – 711101 | Member |
| 4. Dr. Nandini Sharma
Member, Extra Mural Research Scheme, Ministry of AYUSH
E-14, Gitanjali Enclave-Malviya Nagar, New Delhi – 110017 | Member |
| 5. Dr. Eswara Das
Souparnika, KRWA 47, Kattachal Road, Thirumala PO,
Trivandrum, Kerala - 695006 | Member |
| 6. Dr. Surender Singh
Professor, Department of Pharmacology,
A.I.I.M.S., Ansari Nagar, New Delhi- 110029 | Member |
| 7. Dr. A.K. Bhatnagar
Former Professor (Department of Botany),
University of Delhi, JA/4B, Ashok Vihar - I, Delhi - 110052 | Member |

- | | |
|---|-------------------------|
| 8. Prof (Dr.) Kanjaksha Ghosh
Former Director,
National Institute of Immunohaematology,
13 th FL, KEM Hospital, Mumbai- 400012 | Member |
| 9. Director
National Institute of Homoeopathy,
Kolkata | Member |
| 10. Director General
Central Council for Research in Homoeopathy,
61-65, Institutional Area, Opp. D-Block, Janakpuri,
New Delhi-110058 | Member Secretary |

EXECUTIVE COMMITTEE OF THE COUNCIL

The Executive Committee of CCRH was constituted on 25/06/2019 for the period of three years.

The members are as under:

- | | |
|---|--------------------|
| 1. Secretary, Ministry of AYUSH | Chairperson |
| 2. Financial Advisor, Ministry of AYUSH | Member |
| 3. Joint Secretary, Ministry of AYUSH | Member |
| 4. Advisor (Homoeopathy), Ministry of AYUSH | Member |

Non-Official Members

- | | |
|---|------------------------|
| 5. Padma Shri Dr. V. K. Gupta
Member Governing Body &
Chairman, Scientific Advisory Board of CCRH,
C-3/29, Rajouri Garden, New Delhi-110027 | Member |
| 6. Dr. Nandini Sharma
Member, Governing Body of CCRH,
E-14, Block-E, Geetanjali Enclave,
Malviya Nagar, New Delhi-110017 | Member |
| 7. Dr. Eswara Das
Member, Governing Body of CCRH,
Souparnika, KRWA 47, Kattachal Road,
Thirumala, Thiruvananthapuram, Kerala - 675006 | Member |
| 8. Dr. A.K. Bhatnagar
Former Professor, Department of Botany,
University of Delhi, JA/4B, Ashok Vihar-I, Delhi-110052 | Member |
| 9. Dr. Kanjaksha Ghosh
Former Director,
National Institute of Immunohaematology (ICMR),
13 th FL, KEM Hospital, Mumbai-400012 | Member |
| 10. Director
National Institute of Homoeopathy, Kolkata-700106 | Member |
| 11. Dr. Rajesh Shah
Director, Life Force Homeopathy,
411, Krushal Commercial Complex, GM Road,
Chembur, Mumbai-400089 | Special Invitee |
| 12. Dr. Rama Jayasundar
Professor, Department of NMR,
All India Institute of Medical Sciences,
Ansari Nagar, New Delhi-110029 | Special Invitee |

13. Dr. Mitali Mukerji

Senior Principal Scientist,
Genomics and Molecular Medicine,
Institute of Genomics and Integrative Biology,
Lab 607, Mall Road, New Delhi-110007

Special Invitee

14. Director General

Central Council for Research in Homoeopathy,
61-65, Institutional Area, Opp. D-Block,
Janakpuri, New Delhi-110058

Member Secretary

SCIENTIFIC ADVISORY BOARD

The Hon'ble Minister of AYUSH, Govt. of India in his capacity as President of Governing Body of CCRH has reconstituted Scientific Advisory Board (SAB) on 31.01.2019 for the period of three years. Members of SAB are as follows:

- | | |
|---|-----------------|
| <p>1. Padma Shri Dr. V.K. Gupta
Former Principal,
Nehru Homoeopathic Medical College & Hospital,
C-3/29, Rajouri Garden, New Delhi-110027</p> | Chairman |
| <p>2. Dr. N. Radha
Former Adviser (Homeopathy)
Ministry of AYUSH, Govt. of India
Souparnika, KRWA 47, Kattachal Road, Thirumala,
Thiruvananthapuram, Kerala-675006</p> | Member |
| <p>3. Dr. M.P. Arya
Homoeopathic Consultant
Oberoi House, 1st Floor, Nal Stop, Karve Road,
Pune (Maharashtra)- 411004</p> | Member |
| <p>4. Advisor (Homoeopathy)
Ministry of AYUSH, Govt. of India, B-Block,
GPO Complex, INA, New Delhi-110023</p> | Member |
| <p>5. Dr. K.M. Dhawale
Dr. M.L. Dhawle Memorial Trust's
BMC's Mother and Child Care Centre,
801, Horizon Apartment, 285, Fifth road,
Chembur, Mumbai - 400071</p> | Member |
| <p>6. Dr. Alok Pareek
Consultant Homoeopath
4/11, Bagh Farzana, Civil Lines, Agra,
Uttar Pradesh -282002</p> | Member |
| <p>7. Dr. Rathin Chakravarty
Consultant Homoeopath
5-Subal Koley Lane, P.S. Shibpur, Howrah – 711 101</p> | Member |
| <p>8. Dr. Nandini Sharma
Member, Extra Mural Research Scheme, Ministry of AYUSH
E-14, Gitanjali Enclave, Malviya Nagar,
New Delhi – 110017</p> | Member |
| <p>9. Dr. Ashvini Kumar Dwivedi
Professor & HOD (Physiology & Biochemistry)
22A, Sector-B, Bakhtawar Ram Nagar,
In front of Tilak Nagar Post Office, Indore-452018</p> | Member |

10. Prof (Dr.) Kanjaksha Ghosh

Former Director,
National Institute of Immunohaematology,
13th FL, KEM Hospital, Mumbai- 400012

Member

11. Director General

Central Council for Research in Homoeopathy
61-65, Institutional Area, Opp. D-Block,
Janakpuri, New Delhi-110058

Member Secretary

STANDING FINANCE COMMITTEE

The Hon'ble Minister of AYUSH, Govt. of India in his capacity as President of Governing Body of CCRH has reconstituted Standing Finance Committee (SFC) on 10.10.2019. Members of SFC are as follows:

- | | |
|--|-------------------------|
| <p>1. Joint Secretary
Ministry of AYUSH, AYUSH Bhavan, B-Block,
GPO Complex, I.N.A, New Delhi-110023</p> | Chairman |
| <p>2. Additional Secretary-cum-FA
MH&FW, Nirman Bhavan
New Delhi or his nominee not below the rank of Deputy Secretary</p> | Member |
| <p>3. Padma Shri Dr. V.K. Gupta
Former Principal,
Nehru Homoeopathic Medical College & Hospital,
C-3/29, Rajouri Garden, New Delhi-110027</p> | Member |
| <p>4. Prof (Dr.) Kanjaksha Ghosh
Former Director
National Institute of Immunohaematology,
13th FL, KEM Hospital, Mumbai- 400012</p> | Member |
| <p>5. Dr. Nandini Sharma
E-14, Geetanjali Enclave,
New Delhi- 110017</p> | Member |
| <p>6. Director General
Central Council for Research in Homoeopathy
61-65, Institutional Area, Opp. D-Block,
Janakpuri, New Delhi-110058</p> | Member Secretary |

ETHICAL COMMITTEE

The Hon'ble Minister of AYUSH, Govt. of India in his capacity as President of Governing Body of CCRH has reconstituted Ethical Committee (EC) on 31.01.2019 for the period of three years. Members of EC are as follows:

- | | |
|---|-----------------|
| <p>1. Prof (Dr.) Kanjaksha Ghosh
Former Director
National Institute of Immunohaematology,
13th FL, KEM Hospital, Mumbai- 400012</p> | Chairman |
| <p>2. Justice G.S. Singhvi
Former Judge, Supreme Court of India;
Bungalow No. 81, New Moti Bagh, New Delhi-110023</p> | Member |
| <p>3. Dr. Tulika Seth
Additional Professor, Department of Hematology,
All India Institute of Medical Sciences, Ansari Nagar, New Delhi- 110029</p> | Member |
| <p>4. Dr. Rajesh S. Sharma
Shraddha General Hospital, Katju Nagar,
Ratlam –MP. 457001
Res: 102, New Road, Ratlam (M.P.)</p> | Member |
| <p>5. Dr. V. K. Khanna
Former Principal,
Nehru Homoeopathic Medical College & Hospital, New Delhi
C-759, New Friends Colony, New Delhi- 110025</p> | Member |
| <p>6. Dr. Mridula Pandey
Deputy Director (Homoeopathy), Dte. of AYUSH,
Convenient Shopping Centre-3, Block B, 1st Floor,
Preet Vihar, New Delhi-110092</p> | Member |
| <p>7. Dr. Monika Datta
Consultant
DDPRCRI (H), Noida, Sector – 24, Noida, U.P.</p> | Member |
| <p>8. Mr. Kuldeep Jain
B. Jain Publishers (P) Ltd.
D-157, Sector 63, Noida-201307, U.P.</p> | Member |
| <p>9. Sh. SC Poddar
Former Secretary, Govt. of Delhi
194, Sukhdev Vihar, New Delhi-110025</p> | Member |
| <p>10. Dr. Tapasya Srivastava
Assistant Professor, Department of Genetics,
Room 257, Biotechnology Center, University of Delhi,
South Campus, Benito Juarez Road,
New Delhi-110021</p> | Member |

11. Director General

Central Council for Research in Homoeopathy
61-65, Institutional Area, Opp. D-Block,
Janakpuri, New Delhi-110058

Member Secretary

SPECIAL COMMITTEE FOR CLINICAL RESEARCH

The Hon'ble Minister of AYUSH, Govt. of India in his capacity as President of Governing Body of CCRH has reconstituted Special Committee for Clinical Research on 31.01.2019 for the period of three years. Members of Special Committee for Clinical Research are as follows:

- | | | |
|-----------|---|-----------------|
| 1. | Dr. L. K. Nanda
Former Principal-cum-Superintendent,
Dr. A. C. Homoeopathic Medical College and Hospital,
Plot No. 409-B, Paika Nagar, Delta Square,
Post-Baramunda, Bhubaneshwar-751003 | Chairman |
| 2. | Dr. Kalyan Banerjee
Homoeopathic Physician
1691, Block 1, Chittaranjan Park,
New Delhi – 110019 | Member |
| 3. | Dr. K. S. Sethi
Advisor (Homoeopathy)
Ministry of AYUSH, Govt. of India, B-Block,
GPO Complex, INA, New Delhi-110023 | Member |
| 4. | Director, NIH, Kolkata
National Institute of Homoeopathy
Block - GE, Sector - III, Salt Lake, Kolkata - 700 106
West Bengal | Member |
| 5. | Dr. Arvind Kothe
Homoeopathic Consultant
81, Laxminagar, Nagpur- 440022 | Member |
| 6. | Dr. Naval Kumar Verma
Consultant Homoeopath,
Hon. Advisor to MOS (I/C) AYUSH,
Ministry of AYUSH,
J,13/34, Patel Market, Near IDBI Bank,
Rajouri Garden, New Delhi-110027 | Member |
| 7. | Dr. Sangeeta Duggal
Joint Director, AYUSH,
CGHS HQ, Sector 12, R.K. Puram,
New Delhi-110022 | Member |

8. Prof. (Dr.) Niranjan Mohanty

Former Principal –cum- Superintendent,
Dr. Abhin Chandra Homoeopathic Medical College & Hospital,
Bhubaneswar, Odisha
Plot No.92, Dharma Vihar
(Behind Khandagiri Square Police Station),
Bhubaneswar - 751030 (Odisha)

Member

9. Director General

Central Council for Research in Homoeopathy
61-65, Institutional Area, Opp. D-Block,
Janakpuri, New Delhi-110058

Member Secretary

SPECIAL COMMITTEE FOR DRUG STANDARDIZATION

The Hon'ble Minister of AYUSH, Govt. of India in his capacity as President of Governing Body of CCRH has reconstituted Special Committee for Drug Standardization on 31.01.2019 for the period of three years. Members of Special Committee for Drug Standardization are as follows:

- | | | |
|-----------|--|-----------------|
| 1. | Dr. S.P. Singh
Former Director, CCRH & Advisor (Hom.),
Ministry of AYUSH, Govt. of India
68/C, Shipra Rivira, Sucheta Kriplani Marg,
Indrapuram, NCR, Dist. Ghaziabad- 201001, U.P. | Chairman |
| 2. | Dr. P.V. Venkataraman
Visiting Professor, Hahnemann Homoeopathy Medical College,
No. 33, 1 st Main Road, Lake Area, Nungambakkam.
Near Valluvar Kottam., Chennai-600034 | Member |
| 3. | Dr. D. S. Bhar
Managing Director, Hahnemann Publishing Company Pvt. Ltd.,
165, Bipin Behary Ganguly Street, Kolkata-700012 | Member |
| 4. | Dr. Rajesh Shah
Director, Life Force Homeopathy
411, Krushal Commercial Complex,
GM Rd, Chembur, Mumbai- 400089 | Member |
| 5. | Dr. Govind Singh
Assistant Professor (Pharm.)
Department of Pharmaceutical Sciences,
Maharshi Dayanand University,
Rohtak-124001 | Member |
| 6. | Dr. Suman Lakhnarpal
Professor, Delhi University,
EG 119, UGF, Inderpuri,
New Delhi-110012 | Member |
| 7. | Dr. Surender Singh
Professor,
Department of Pharmacology, A.I.I.M.S.
Ansari Nagar, New Delhi- 110029 | Member |
| 8. | Dr. Rakesh Shukla
Professor of Pharmacology in AcSIR
Former Chief Scientist & Head, Division of Pharmacology,
CSIR-Central Drug Research Institute, Lucknow-226001 | Member |
| 9. | Dr. M.M. Gore
Scientist G, National Institute of Virology,
5/1B, Krutika Complex, Tejas Nagar,
Kothrud, Pune-411038 | Member |

10. Prof. Rajamani Nagarajan

Professor,
Department of Chemistry, B007,
University of Delhi, New Delhi-110007

Member

11. Director General

Central Council for Research in Homoeopathy
61-65, Institutional Area, Opp. D-Block,
Janakpuri, New Delhi-110058

Member Secretary

SPECIAL COMMITTEE FOR HOMOEOPATHIC PATHOGENETIC TRIAL (DRUG PROVING)

The Hon'ble Minister of AYUSH, Govt. of India in his capacity as President of Governing Body of CCRH has reconstituted Special Committee for Drug Proving on 31.01.2019 for the period of three years. Members of Special Committee for Drug Proving are as follows:

- | | |
|---|--------------------------------|
| <p>1. Dr. J.D. Daryani
Former Principal at Dr. MPK Homoeopathic Medical College,
Hospital & Research Center, Jaipur
C-VI-101, Kamal Apartments No.2,
Bani Park, Jaipur, Rajasthan - 302006</p> | <p>Chairman</p> |
| <p>2. Dr. Anil Kumari Malhotra
Director Professor & Principal,
Nehru Homoeopathic Medical College, New Delhi (Retd.)
J-27, Lajpat Nagar III, New Delhi – 110024</p> | <p>Member</p> |
| <p>3. Prof. (Dr.) Neeraj Gupta
Professor, Department of Organon of Medicine,
NHMC & H, B-Block, Defence Colony, New Delhi-110024</p> | <p>Member</p> |
| <p>4. Dr. Rajesh Shah
Director, Life Force Homeopathy,
411, Krushal Commercial Complex,
GM Rd, Chembur, Mumbai -400089</p> | <p>Member</p> |
| <p>5. Prof. V. K. Vimal
Director, Homoeopathy, UP Govt.,
8th floor, Indira Bhavan, Ashok Marg,
Lucknow-226001, U.P.</p> | <p>Member</p> |
| <p>6. Dr. R. Gnanasambandam
Homoeopathy Expert and Editor, Homeo Times,
Lloyds IInd Lane, Royapettah, Chennai-600014, Tamil Nadu</p> | <p>Member</p> |
| <p>7. Dr. S.K. Bhattacharya
Former Director, NIH, Kolkata,
139 Swami Vivekananda Road,
P.O. Birati, Kolkata-700 051</p> | <p>Member</p> |
| <p>8. Dr. S. K. Tiwari
Homoeopathic Consultant & Former Principal,
Fr. Muller Homoeopathic Medical College,
Kankanady, Dev Plaza, 105, Kadri Temple Road,
Mangalore – 575 002</p> | <p>Member</p> |
| <p>9. Director General
Central Council for Research in Homoeopathy,
61-65, Institutional Area, Opp. D-Block, Janakpuri,
New Delhi-110058</p> | <p>Member Secretary</p> |

SPECIAL COMMITTEE ON FUNDAMENTAL & BASIC RESEARCH

The Hon'ble Minister of AYUSH, Govt. of India in his capacity as President of Governing Body of CCRH has reconstituted Special Committee on Fundamental & Basic Research on 31.01.2019 for the period of three years. Members of Special Committee on Fundamental & Basic Research are as follows:

- | | |
|---|-----------------|
| <p>1. Prof. (Dr.) C. Nayak
President,
Homoeopathy University Saipura, Sanganer,
Jaipur - 302029 (Rajasthan)</p> | Chairman |
| <p>2. Dr. Renu Pandey
Principal Scientist,
Mineral Nutrition Laboratory, Division of Plant Physiology,
Indian Agriculture Research Institute, Pusa Road, New Delhi-110 012</p> | Member |
| <p>3. Dr. Alok Chandra Bharti
Professor,
Department of Zoology,
University of Delhi (North Campus)
New Delhi - 110 007</p> | Member |
| <p>4. Prof. (Dr.) Subhendu Ghosh
Professor & Head, Department of Biophysics,
University of Delhi South Campus, Benito Juarez Road,
New Delhi-110021</p> | Member |
| <p>5. Prof. Shantaram G Kane
Former Adjunct Professor, Department of Chemical Engineering,
Indian Institute of Technology, Bombay, Mumbai</p> | Member |
| <p>6. Dr. Satadal Das
Consultant Pathologist, DACRRI(H), Kolkata
76, Satyen Roy Road, Kolkata – 700 034</p> | Member |
| <p>7. Dr. Sandeep R. Mathur
Associate Professor, Department of Pathology,
AIIMS, New Delhi - 110029</p> | Member |
| <p>8. Dr. Y.K. Gupta
Former Professor & Head, Department of Pharmacology,
House no. 116, Sector 37, Arun Vihar,
Opp. Botanical Garden Metro Station,
Noida-201301 (U.P.)</p> | Member |
| <p>9. Dr. D.S. Nauriyal
Professor & Head, Department of Veterinary Medicine,
College of Veterinary Science & A.H.,
Anand Agricultural University,
Anand-388001 (Gujarat)</p> | Member |

10. Prof (Dr.) Kanjaksha Ghosh

Former Director
National Institute of Immunohaematology,
13th FL, KEM Hospital, Mumbai- 400012

Member

11. Director General

Central Council for Research in Homoeopathy,
61-65, Institutional Area, Opp. D-Block, Janakpuri,
New Delhi-110058

Member Secretary

REPRESENTATION OF SCHEDULED CASTES / SCHEDULED TRIBES IN COUNCIL SERVICES

The Council is following the orders and guidelines, issued from time to time by the Government of India in respect of reservation and representation of SC/ST in the services of the Council. The number of sanctioned posts, filled up posts during the last financial year, SC/ST and OBC employees working in the Council as on 31.03.2021 were as under: -

Table 1

S. No.	Group	Total No. of sanctioned posts	Total No. of filled up posts 2020-21	Categories			
				SC	ST	OBC	General
1	Group A	127	109	18	08	31	52
2	Group B	52	39	08	02	05	24
3	Group C	279*	158	35	14	32	77
Total		458	306	61	24	68	153

*53 posts filled up on Contract/Outsource basis.

BUDGET

The following table shows the budget of the Council for the year 2020-21

Table 2

(Rupees in Crore)

Budget Allocation for the Year 2020-21									Total
	Grant-in-Aid General Area	Grant-in-Aid SAP	Grant-in-Aid Salary	Grant-in-Aid Creation of Capital Assets	Grant-in-Aid Special Component Plan for Scheduled Caste	Tribal Area Plan	Medical Education, Training & Research (NER)	NER (Capital)	
Budget Estimate	45.38	0.12	72.00	17.00	2.00	--	2.00	--	138.50
Final Estimate	45.38	0.12	64.00	17.00	2.00	--	2.00	--	130.50

RIGHT TO INFORMATION ACT 2005

The Right to Information Act (RTI) is an Act of the Parliament of India "to provide for setting out the practical regime of right to information for citizens". The Act also requires every public authority to computerize their records for wide dissemination and to pro-actively publish certain categories of information so that the citizens need minimum recourse to request for information formally. This Act was passed by Parliament on 15th June 2005 and came into force on 13th October 2005. The Indian Parliament gave a powerful tool to the citizens to get information from the Government as a matter of right. The basic object of the Right to Information Act is to empower the citizens, promote transparency and accountability in the working of the Government contain corruption, and make our democracy work for the people in real sense. It goes without saying that an informed citizen is better equipped to keep necessary vigil on the instruments of governance and make the government more accountable to the governed. The Act is a big step towards making the citizens informed about the activities of the Government.

Dr. O. P. Verma, Librarian has been nominated as the Central Public Information Officer (CPIO) to receive the requests from the citizen under RTI Act, 2005. The Council has placed all obligatory information pertaining to its office, under Section 4(1) (b) of the RTI Act, 2005 on its Website. The facility of online submission for seeking the information from CPIO and 1st Appeal under RTI Act, 2005 has been introduced by DoPT. RTI applications from public are being received through this facility. Besides, applications and appeals, under the RTI Act, are also being received through post or by hand forwarded from the Ministry of AYUSH.

During the period i.e. from 01.04.2020 to 31.03.2021, 213 RTI applications and 09 RTI appeals have been received and disposed through RTI Web portal.

PUBLIC GRIEVANCE CELL

Public Grievance Redressal mechanism is functioning in the Council under the Ministry of AYUSH for implementation of the various guidelines issued from time to time by the Government of India through the Department of Administrative Reforms & Public Grievances. Dr. Anil Khurana, Director General, Central Council for Research in Homoeopathy has been designated as Nodal Officer for Public Grievances relating to the Council.

Dr. O. P. Verma, Librarian has been functioning as Public Grievances Officer of the Council. Pursuant to the instructions of the Govt. for creation of Sevottam Complaint System to redress and monitor public under Results Framework Documents for 2010-11 and implementation of Centralized Public Grievances Redressal and Monitoring System (CPGRAMS) in the Ministries/ Departments. CPGRAMS has been implemented in the Ministry of AYUSH and extended to Autonomous Bodies/PSUs. It is a web-based portal, and a citizen can lodge his grievances through this system directly with the concerned Departments. The number of written grievance petitions received/ disposed of and pending are as under below: -

Table 3

Grievance source	Brought Forward	Receipt during period	Total receipt	Cases disposed during period	Closing balance	Yet to assess	At our office (Hqrs.)	With subordinate Institutes/ Units
DARPG	0	1	1	1	0	0	0	0
Local/ Internet	16	19	35	35	0	0	0	0
President Secretariat	0	0	0	0	0	0	0	0
Pension	0	1	1	1	0	0	0	0
PMO	18	109	127	127	0	0	1	0
Total	34	130	164	164	0	0	1	0

PHARMACOVIGILANCE PROGRAM

Introduction

Ministry of AYUSH has introduced new Central Sector Scheme for promoting Pharmacovigilance (WHO definition of Pharmacovigilance: The science and activities relating to the detection, assessment, understanding and prevention of adverse effects or any other medicine related problem. It is required to improve the patient care and it is useful to assess the risk benefit ratio of the medicines) of ASU&H drugs. Prime objective of the scheme is to develop the culture of documenting adverse effects and undertake safety monitoring of AYUSH drugs and surveillance of misleading advertisements appearing in the print and electronic media.

The Standing Finance Committee chaired by Secretary (AYUSH) approved the scheme on 01/11/2017. This Central Sector Scheme was rolled out for implementation in the country near the end of financial year 2017-18. The scheme intends to facilitate the establishment of three-tier network of National Pharmacovigilance Centre (NPvCC), Intermediary Pharmacovigilance Centres (IPvCC) and Peripheral Pharmacovigilance Centres (PPvCC).

As per the policy set under the above scheme, in the homoeopathic system of medicine, National Institute of Homoeopathy, Kolkata is the Intermediary Pharmacovigilance Centres (IPvCCs) which reports to All India Institute of Ayurveda, New Delhi which is the National Pharmacovigilance Centre (NPvCC). Under National Institute of Homoeopathy (NIH), Kolkata, 14 different homoeopathic institutes having clinical facilities are placed, which act as Peripheral Pharmacovigilance Centres (PPvCC) and report to NIH, Kolkata. Out of these 14 Peripheral Pharmacovigilance Centres (PPvCC), eight institutes are of CCRH, New Delhi. The Annual Report of Pharmacovigilance activities for year 2020-21 for these 8 institutes are mentioned in the table.

Aims:

- To improve patient care and safety in relation to the use of medicines and all medical and paramedical interventions;
- To improve public health and safety in relation to the use of medicines;
- To contribute to the assessment of benefit, harm, effectiveness, and risk of medicines, encouraging their safe, rational, and more effective (including cost-effective) use;
- To promote understanding, education, and clinical training in pharmacovigilance and its effective communication to the public.

Activities undertaken:

1. Detecting misleading advertisements, adverse drug reactions and adverse drug events and documentation of the same.
2. Reporting of misleading advertisements, adverse drug reactions and adverse drug events to Intermediary Pharmacovigilance Centre (IPvCC), NIH, Kolkata.
3. Conducting training programs/webinars for effective communication regarding activities of Pharmacovigilance program amongst the medical professionals and publics.

Achievements:

- Total number of reported misleading advertisements: 272
- Total number of adverse drug reactions detected: 23
- Total number of adverse drug events detected: 43
- Total number of training programs/webinars conducted for effective communication regarding activities of Pharmacovigilance program amongst the medical professionals and public: 12

- Due to Pharmacovigilance program the number of misleading advertisements regarding homoeopathic drugs have seen a reduction in their numbers.

The Institute wise details are placed below:

Table 4

S. No.	Name of the Peripheral Pharmacovigilance Centre (Institutes of CCRH)	Number of misleading advertisements	Number of ADR	Number of ADE	Number of training programs / webinars attended	Number of training programs / webinars conducted	Number of trainees in the training Programs / webinars conducted	Financial Expenditure (in rupees)
1.	DDPRCRI(H), Noida, Uttar Pradesh	17	04	00	09	01	51	3,05,627
2.	NHRIMH, Kottayam, Kerala	01	00	23	03	02	95	3,03,860
3.	DACRRI(H), Kolkata, West Bengal	226	01	08	16	01	50	3,08,235
4.	RRI(H), Gudivada, Andhra Pradesh	00	00	00	06	01	80	2,99,194
5.	RRI(H), Mumbai, Maharashtra	08	00	00	04	01	50	1,52,827
6.	RRI(H), Guwahati, Assam	09	00	12	03	02	277	2,72,918
7.	RRI(H), Imphal, Manipur	07	02	00	11	03	33	1,13,465
8.	RRI(H), Agartala, Tripura	04	16	00	10	01	25	1,26,892
Total		272	23	43	62	12	661	1,893,018

INFRASTRUCTURE

In 1969, the Govt. of India established Central Council for Research in Indian Medicines and Homoeopathy for conducting systematic research in respective fields and in 1978, the CCRIMH was dissolved to pave way for the constitution of four separate Research Councils, one each for Homoeopathy (CCRH), Ayurveda and Siddha Medicine (CCRAS), Unani Medicine (CCRUM) and Yoga & Naturopathy (CCRYN). Such independent set-up of the Councils facilitated the promotion of research in the respective disciplines, on their own strengths.

The Central Council for Research in Homoeopathy (CCRH) was formally constituted on 30th March, 1978, as an autonomous organization and was registered under the Societies Registration Act XXI of 1960. It was, however, in January 1979, that the Council started functioning as an independent organization.

The Council had been running a network of 51 Institutes/Units functioning in different parts of the country prior to the reorganization and re-structuring of the Council. Twenty nine Units (including 3 Units in NE region, viz., Aizawl, Dimapur and Shillong) have since been merged with major Institutes reducing the number to 22 Units/Institutes. Thus, at present, apart from one Research-cum-PG Institute and 23 research centers, Council has set up 03 Extension Centers and 06 Homoeopathic Medical OPDs.

Table 5: Institutes/Units of the Council currently functioning:

S. No.	Institutes/Units	Centres	Place
1.	Head Quarters		<ul style="list-style-type: none"> • New Delhi
2.	National Homoeopathy Research Institute in Mental Health (NHRIMH)	01	<ul style="list-style-type: none"> • Kottayam (Kerala)
3.	Central Research Institute (H)	02	<ul style="list-style-type: none"> • Noida (Uttar Pradesh) • Jaipur (Rajasthan)
4.	Homoeopathic Drug Research Institute	01	<ul style="list-style-type: none"> • Lucknow (Uttar Pradesh)
5.	Regional Research Institute	08	<ul style="list-style-type: none"> • Guwahati (Assam) • Gudivada (Andhra Pradesh) • Imphal (Manipur) • Mumbai (Maharashtra) • Puri (Odisha) • Shimla (Himachal Pradesh) • Kolkata (West Bengal) • Agartala (Tripura)
6.	Clinical Research Units	09 + 03 Extension Centers	<ul style="list-style-type: none"> • Aizwal (Mizoram) • Chennai (Tamilnadu) • Dimapur (Nagaland) • Gangtok (Sikkim) • Port Blair (A&N Islands)

S. No.	Institutes/Units	Centres	Place
			<ul style="list-style-type: none"> • Puducherry • Ranchi (Jharkhand) • Siliguri (West Bengal) • Tirupathi (Andhra Pradesh) • Hyderabad (Andhra Pradesh) Extension Centre of Drug Standardization Unit • Gorakhpur (Uttar Pradesh) Extension Centre of H. D. R. I., Lucknow • Bhubaneshwar (Odisha) Extension Centre of RRI(H), Puri
7.	Clinical Verification Unit	01	<ul style="list-style-type: none"> • Patna (Bihar)
8.	Drug Standardization Unit	01	<ul style="list-style-type: none"> • Hyderabad (Andhra Pradesh)
9.	Centre for Medicinal Plants Research in Homoeopathy (CMPRH)	01	<ul style="list-style-type: none"> • Ooty (Tamil Nadu)
10.	Homoeopathy Treatment Centers	06	<ul style="list-style-type: none"> • Safdarjung Hospital, New Delhi • Lady Harding Medical College & Hospital, New Delhi • Delhi Cantonment General Hospital, New Delhi • AYUSH Wellness Clinic, Rashtrapati Bhawan, New Delhi • Delhi State Cancer Institute, Delhi • Integrated AYUSH Clinic, All India Institute of Ayurveda, New Delhi

Until 2005, most of the Institutes/Units of the Council were functioning in rented buildings/ accommodation provided free of cost by the concerned State Govts. The Council shifted its focus to have its own buildings for the development of the centres. In the year 2007, CRI(H), Noida shifted to its own building constructed on the land provided by the U.P. Govt., free of cost. Now, the Council has its own buildings for NHRIMH, Kottayam, CRI(H), Jaipur, RRIs(H) at Gudivada, Kolkata, Agartala, Puri & Mumbai. Construction of building for CRI (H) at Lucknow, RRI (H) at Siliguri and PG Students Hostel at NHRIMH, Kottayam is in progress and lands have been acquired for centres at Imphal and Shimla.



Central Council for Research in Homoeopathy Hqrs., New Delhi



National Homoeopathy Research Institute in Mental Health, Kottayam, Kerala



Dr. D. P. Rastogi Central Research Institute for Homoeopathy, Noida, Uttar Pradesh



Regional Research Institute (H), Gudivada, Andhra Pradesh



Regional Research Institute (H), Agartala, Tripura



Central Research Institute (H), Jaipur, Rajasthan

Figure 2: Centres of CCRH having own buildings

The details of institutes/units with their status of accommodation and assignments being carried out are given in Table 6

Table 6: Assigned projects to Institutes/Units

Sl. No.	Name of the State/U.T.	Name & Address of the Institutes/Units	Name of the project
1.	Andaman and Nicobar	Clinical Research Unit (H), M.B. 31, Middle Point, Mahatma Gandhi Road, Port Blair-744101	a) Clinical Research <ol style="list-style-type: none"> 1. Patient Reported Outcome Measure Study 2. NCD: A data collection study 3. Vithoukias Compass b) Clinical Verification Research on 08 drugs c) Specialty clinics: <ol style="list-style-type: none"> 1. Rheumatology clinic 2. Lifestyle disorder clinic d) Public Health activities: <ol style="list-style-type: none"> 1. Mother & Child Health Care
2.	Andhra Pradesh	Regional Research Institute(H), Dr. GGH Medical College Campus, Eluru Road, Krishna Dt., Gudivada-521301	a) Clinical Research <ol style="list-style-type: none"> 1. Rheumatoid Arthritis 2. Vithoukias compass b) Clinical Verification Research on 08 drugs c) Drug Proving Research d) Epidemic: <ol style="list-style-type: none"> 1. Prophylactic study (cluster trial) for <i>Arsenicum album</i> 30C in COVID-19 2. Retrospective study on recovered COVID-19 patients e) Specialty clinics: <ol style="list-style-type: none"> 1. Dermatology Clinic 2. ENT Clinic 3. Rheumatology Clinic f) Public Health Activities <ol style="list-style-type: none"> 1. Integrated NPCDCS Program 2. Swasthya Rakshan Program (up to September, 2020) 3. SC Health Camps 4. Mother & Child Health Care
3.		Clinical Research Unit (H), Old Maternity Hospital Campus, Tirupathi-517507	a) Clinical Research <ol style="list-style-type: none"> 1. Patient Reported Outcome Measure Study 2. NCD: A data collection study 3. Vithoukias Compass b) Epidemic: <ol style="list-style-type: none"> 1. Retrospective study on recovered COVID-19 patients c) Specialty clinics: <ol style="list-style-type: none"> 1. Lifestyle disorder clinic

Sl. No.	Name of the State/U.T.	Name & Address of the Institutes/Units	Name of the project
			d) Public Health Activities 1. SC Health Camps
4.	Assam [N.E.]	Regional Research Institute (H), NEIARI (Ayurvedic Hospital Campus), Barsojai, Bhetapara, Guwahati-781028	a) Clinical Research 1. Patient Reported Outcome Measure Study 2. NCD data collection study 3. Vithoukas Compass b) Clinical Verification Research on 08 drugs c) Epidemic: 1. Retrospective study on recovered COVID 19 patients d) Specialty clinic 1. Dermatology Clinic 2. Lifestyle Disorder Clinic e) Public Health Activities 1. Swasthya Rakshan Program 2. Mother & Child Health Care
5.	Bihar	Clinical Verification Unit (H), Guru Govind Singh Hospital Patna City - 800008	a) Clinical Research 1. Adjustment Disorder 2. Vithoukas Compass b) Clinical Verification Research on 08 drugs c) Public Health Activities: 1. Mother & Child Health Care 2. SC Health Camps
6.	Himachal Pradesh	Regional Research Institute(H), C-5, Phase - 1, Sector - 2, Main Road, New Shimla-171009	a) Clinical Research 1. Patient Reported Outcome Measure Study 2. Vithoukas Compass b) Clinical Verification Research on 08 drugs c) Public Health Activities: 1. SC Health Camps 2. Mother & Child Health Care
7.	Jharkhand	Clinical Research Unit (H), Arsunday, Boreya Road, P.O. Boreya, Ranchi-835240	a) Clinical Research 1. Adjustment Disorders 2. Vithoukas Compass 3. NCD: A data collection study b) Epidemic 1. Retrospective study on recovered COVID-19 patients c) Specialty Clinic: 1. Lifestyle Disorder Clinic d) Public Health Activities: 1. Homoeopathy for Health Child 2. Mother & Child Health Care

Sl. No.	Name of the State/U.T.	Name & Address of the Institutes/Units	Name of the project
8.	Kerala	National Homoeopathy Research Institute in Mental Health (NHRIMH), Sachivothamapuram, Kottayam - 686532	<p>a) Clinical Research</p> <ol style="list-style-type: none"> 1. Urinary Tract Infection 2. Adjustment Disorder 3. Cough Validation 4. NCD Data Collection study 5. Vithoulkas Compass <p>b) Clinical Verification Research on 08 drugs</p> <p>c) Drug Proving Research</p> <p>d) Epidemic</p> <ol style="list-style-type: none"> 1. Retrospective study on recovered COVID-19 patients <p>e) Specialty Clinics:</p> <ol style="list-style-type: none"> 1. Dermatology Clinic 2. Lifestyle Disorder Clinic <p>f) Public Health Activities:</p> <ol style="list-style-type: none"> 1. SC Health Camps 2. Mother & Child Health Care 3. Swasthya Rakshan Program
9.	Maharashtra	Regional Research Institute (H), MTNL Hall No. 4 Shopping Centre, Sector - 9, CBD Belapur, Navi Mumbai - 400614	<p>a) Clinical Research</p> <ol style="list-style-type: none"> 1. Rheumatoid Arthritis 2. Warts (RCT) 3. Warts (Observational) 4. Cough validation 5. Vithoulkas Compass <p>b) Drug Proving Research</p> <p>c) Clinical Verification Research on 08 drugs</p> <p>d) Epidemic</p> <ol style="list-style-type: none"> 1. Prophylactic study (cluster trial) for Arsenicum Album 30C in COVID-19 2. Retrospective study on recovered COVID-19 patients 3. Post-Prophylaxis analysis of impact of Arsenic album 30 in frontline workers 4. Homoeopathy as adjuvant to standard treatment of corona virus infection (Ruby Hospital, Pune) 5. Compare efficacy of Standard of care alone and in combination with homoeopathic treatment of COVID-19 patients 6. Covid study with St. George Hospital <p>e) Fundamental Research</p> <ol style="list-style-type: none"> 1. New method of potentization, IIT, Mumbai

Sl. No.	Name of the State/U.T.	Name & Address of the Institutes/Units	Name of the project
			<p>f) Collaborative research</p> <ol style="list-style-type: none"> 1. Collaborative Research study with Motiwala Homoeopathic Medical College & Hospital, Nashik on Haemophilia <p>g) Specialty clinics:</p> <ol style="list-style-type: none"> 1. Dermatology Clinic 2. Rheumatology Clinic 3. HIV OPD <p>h) Public Health Activities:</p> <ol style="list-style-type: none"> 1. SC Health Camps 2. Mother & Child Health Care 3. Integrated NPCDCS Program - Nashik
10.	Manipur [N.E.]	Regional Research Institute (H), New Checkon, Maring Land. Opp. Trival Colony, Imphal- 795001	<p>a) Clinical Research</p> <ol style="list-style-type: none"> 1. Patient Reported Outcome Measure Study 2. NCD data collection study 3. Vithoulkas Compass <p>b) Epidemic</p> <ol style="list-style-type: none"> 1. Retrospective study on recovered COVID 19 patients <p>c) Clinical Verification Research on 08 drugs</p> <p>d) Specialty clinic:</p> <ol style="list-style-type: none"> 1. Lifestyle Disorder Clinic <p>e) Public Health Activities:</p> <ol style="list-style-type: none"> 1. SC Health Camps
11.	Mizoram [N.E.]	Clinical Research Unit (Homoeopathy), AYUSH Building, Civil Hospital, Dawrpui, Aizwal - 796001	OPD services
12.	Nagaland	Clinical Research Unit (Homoeopathy), Medical Colony, Dimapur, AYUSH Building, Opp. Office of the Chief Medical Officer, Nagaland - 797112	OPD services
13.	Odisha	Regional Research Institute (H), CCRH Building, Marchi Kote Lane, Labanikhia Chaak, Puri - 752001	<p>a) Clinical Research</p> <ol style="list-style-type: none"> 1. Adjustment Disorders 2. Patient Reported Outcome Measure Study 3. Warts (observational) 4. Lymphatic filariasis 5. Cough Validation

Sl. No.	Name of the State/U.T.	Name & Address of the Institutes/Units	Name of the project
			6. Vithoukas Compass 7. NCD Data Collection study b) Clinical Verification Research on 08 drugs c) Epidemic: 1. Retrospective study on recovered COVID-19 patients d) Specialty clinics: 1. Dermatology Clinic 2. Lifestyle Disorder Clinic e) Public Health Activities: 1. Integrated NPCDCS Program 2. Mother & Child Health Care 3. Swasthya Rakshan Program
14.		Extension Centre of RRI(H), Puri at Bhubaneswar Dr. Abhin Chandra Homoeopathy Medical College & Hospital Campus, Unit- III, Kharaveka Nagar, Bhubaneswar - 751001	a) Clinical Research 1. Patient Reported Outcome Measure Study 2. Cough Validation 3. Vithoukas Compass b) Clinical Verification Research on 08 drugs c) Epidemic 1. Retrospective study on recovered COVID-19 patients d) Collaborative research 1. Efficacy of Homoeopathic medicine on thyroid rat 2. Mechanism of anti-malarial and anti-leishmanial action of homoeopathic formulation
15.	Puducherry	Clinical Research Unit (T), 1 st Cross, Mangalakshmi Nagar, (Behind New Bus Stand), Puducherry - 605013	a) Clinical Research 1. Patient Reported Outcome Measure Study 2. NCD Data collection study 3. Vithoukas Compass b) Epidemic 1. Retrospective study on recovered COVID-19 patients c) Specialty clinics: 1. Lifestyle Disorder Clinic d) Public Health Activities 1. SC Health Camps
16.	Rajasthan	Central Research Institute (H), Sector-26, Near NRI circle, Pratap Nagar Housing Board Colony (Beside AYUSH Bhawan), Jaipur - 302006	a) Clinical Research 1. Warts (RCT) 2. Warts (Observational) 3. Cough Validation 4. Vithoukas Compass b) Drug proving Research

Sl. No.	Name of the State/U.T.	Name & Address of the Institutes/Units	Name of the project
			<p>c) Epidemic</p> <ol style="list-style-type: none"> Retrospective study on recovered COVID-19 patients <p>d) Specialty clinics:</p> <ol style="list-style-type: none"> ENT Clinic Rheumatology Clinic Dermatology Clinic <p>e) Public Health Activities</p> <ol style="list-style-type: none"> SC Health Camps Mother & Child Health Care
17.	Sikkim[N.E.]	Clinical Research Unit (T), Opp. Samphel Hotel, Near Sangram Bhawan, Development Area, Gangtok - 737101	<p>a) Clinical Research</p> <ol style="list-style-type: none"> Patient Reported Outcome Measure Study Vithoukas Compass <p>a) Public Health Activities</p> <ol style="list-style-type: none"> Mother & Child Health Care
18.	Tamil Nadu	Homoeopathic Research Institutes for Disabilities Room No. 136, N.I.E.P.M.D. Campus, ECR Road, Muttukadu, Chennai-603112	<p>a) Clinical Research</p> <ol style="list-style-type: none"> Intellectual Disability ADHD Vithoukas Compass <p>b) Epidemic</p> <ol style="list-style-type: none"> Prophylactic study (cluster trial) for Arsenicum Album 30C in COVID-19 Retrospective study on recovered COVID-19 patients <p>c) Collaborative study</p> <ol style="list-style-type: none"> Collaborative study on cancer (Tautopathy) with Apollo Hospital, Chennai <p>d) Public Health Activities</p> <ol style="list-style-type: none"> SC Health Camps
19.		Centre for Medicinal Plant Research in Homoeopathy 3/126, Indira Nagar, Emerald Post, Ooty, Nilgiri Distt.-643209	<p>a) Survey, Collection & Cultivation of Medicinal plants:</p> <ol style="list-style-type: none"> Supply of assigned drugs to various Drug Standardization units of the Council for regular assignment and for HPI revision work Cultivation of medicinal plants in Homoeopathy specially exotic and not easily available
20.	Telangana	Drug Standardization Unit (H), Q.U.B. 32, Room No. 4, Vikram Puri, Habsigunda, Hyderabad -500007	<p>a) Clinical Research</p> <ol style="list-style-type: none"> Patient Reported Outcome Measure Study NCD Data Collection study Cough Validation

Sl. No.	Name of the State/U.T.	Name & Address of the Institutes/Units	Name of the project
			<p>4. Vithoukass Compass</p> <p>b) Epidemic</p> <p>1. Prophylactic study (cluster trial) for Arsenicum Album 30C in COVID-19</p> <p>c) Drug Standardization Research</p> <p>d) Collaborative study</p> <p>1. Comparison of two paradigm with JIMS Homoeopathic Medical College</p> <p>e) Specialty clinic</p> <p>1. Lifestyle Disorder Clinic</p> <p>f) Public Health Activities</p> <p>1. Mother & Child Health Care</p> <p>2. SC Health Camps</p>
21.		D.S.U. Extension Unit, Princess Durra Shehvar Children Hospital, Purani Haveli, Hyderabad - 500002	Center is closed and merged with DSU (H), Hyderabad
22.	Tripura (N.E.)	Regional Research Institute (Homoeopathy), Joykrishna Kobra Para Road, Khumulwng, Jirania, Agartala - 799045	<p>a) Clinical Research</p> <p>1. Patient Reported Outcome Measure Study</p> <p>2. Warts(RCT)</p> <p>3. Warts(Observational)</p> <p>4. Cough Validation</p> <p>5. Vithoukass Compass</p> <p>b) Clinical Verification Research on 08 drugs</p> <p>c) Epidemic</p> <p>1. Retrospective study on recovered COVID-19 patients</p> <p>d) Specialty Clinic</p> <p>1. Rheumatology Clinic</p> <p>e) Public Health Activities</p> <p>1. Mother & Child Health Care</p> <p>2. SC Health Camps</p>
23.	Uttar Pradesh	Dr. D.P. Rastogi Central Research Institute of Homoeopathy, A-1/1, Sector 24, Noida, Gautambudh Nagar - 201301 UP.	<p>a) Clinical Research</p> <p>1. Rheumatoid Arthritis</p> <p>2. Patient Reported Outcome Measure Study</p> <p>3. Warts (RCT)</p> <p>4. Warts (Observational)</p> <p>5. Cough Validation</p> <p>6. Urinary Tract Infection</p> <p>7. NCD Data Collection study</p> <p>8. Vithoukass Compass</p>

Sl. No.	Name of the State/U.T.	Name & Address of the Institutes/Units	Name of the project
			b) Drug Proving Research c) Clinical Verification Research on 08 drugs d) Epidemic 1. Retrospective study on recovered COVID-19 patients e) Specialty clinics 1. Dermatology Clinic 2. Lifestyle Disorder Clinic f) Public Health Activities 1. SC Health Camps
24.		Homoeopathic Drug Research Institute(H), Campus of National Homoeopathic Medical College and Hospital, 1, Viraj Khand, Gomti Nagar, Lucknow-226010	a) Clinical Research 1. Adjustment disorder 2. Vithoulkas Compass b) Drug Proving Research c) Clinical Verification Research on 08 drugs d) Epidemic 1. Retrospective study on recovered COVID-19 patients e) Public Health Activities 1. Mother & Child Health Care 2. SC Health Camps
25.		Extension Centre of HDRI, Lucknow at B.R.D. Medical College, Room No. 9/10, Private ward, Gorakhpur- 283013	General OPD
26.	West Bengal	Dr. Anjali Chatterjee Regional Research Institute (H), 50, Rajendra Chatterjee Road, Kolkata-700035	a) Clinical Research 1. Urinary Tract Infections 2. Adjustment Disorders 3. Patient Reported Outcome Measure Study 4. Warts (RCT) 5. Warts (Observational) 6. Cough Validation 7. NCD Data Collection study 8. Vithoulkas Compass b) Drug Proving Research c) Clinical Verification Research on 08 drugs d) Epidemic 1. Prophylactic study (cluster trial) for <i>Arsenicum album</i> 30C in COVID-19 2. Retrospective study on recovered COVID-19 patients

Sl. No.	Name of the State/U.T.	Name & Address of the Institutes/Units	Name of the project
			<p>e) Fundamental Research</p> <ol style="list-style-type: none"> 1. Effect of homoeopathic medicines on Dengue virus infection 2. Estimation of viral load and immune response in JE virus infected mice treated with Belladonna 3. Development of Nosodes of SARS-CoV-2 virus antigens 4. Homoeopathic medicines in modulating the interaction between haemoglobin and SARS-CoV-2 antigens 5. Homeopathic medicines on cytokine storm induced by SARS-CoV-2 virus proteins in cell line and in mice 6. Effect of homoeopathic medicines on chikungunya virus (CHIKV) 7. Development of Japanese Encephalitis virus Nosode 8. Crotalus horridus and Phosphorus in antibody dependent enhancement (ADE) of Dengue virus <p>f) Collaborative study</p> <ol style="list-style-type: none"> 1. Role of Silicea in cancer regression: A mechanistic study (BOSE University, Kolkata, West Bengal) <p>g) Specialty Clinic</p> <ol style="list-style-type: none"> 1. Lifestyle Disorder Clinic <p>h) Public Health Activities</p> <ol style="list-style-type: none"> 1. SC Health Camps 2. Mother & Child Health Care
27.		Clinical Research Unit (T), Gokhel Road (Near Matri Bhandar), Arobindopally, Siliguri - 734006	<p>a) Clinical Research</p> <ol style="list-style-type: none"> 1. Adjustment Disorder 2. Patient Reported Outcome Measure Study 3. Vithoulkas Compass <p>b) Epidemic</p> <ol style="list-style-type: none"> 1. Retrospective study on recovered COVID-19 patients 2. Impact and management of COVID-19 pandemic on patients with Non-communicable disease: a cross sectional study <p>c) Specialty Clinic:</p> <ol style="list-style-type: none"> 1. Rheumatology Clinic

Sl. No.	Name of the State/U.T.	Name & Address of the Institutes/Units	Name of the project
			d) Public Health Activities: <ol style="list-style-type: none"> 1. SC Health Camps 2. Integrated NPCDCS Program
28.	Delhi (through CCRH hqrs.)	Central Council for Research in Homoeopathy (CCRH), 61-65, Institutional Area, Opp. D-Block, Janakpuri, New Delhi - 110058	a) Clinical Research <ol style="list-style-type: none"> 1. Sub-clinical Hypothyroidism (Dr. B. R. Sur Homoeopathic Medical College, Hospital & Research Centre) 2. Trigeminal Neuralgia (Janakpuri Super Specialty Hospital) 3. Study on oral lichen planus (Cantonment Hospital, Delhi) b) Epidemic <ol style="list-style-type: none"> 1. Treatment study on COVID-19 with add on Homoeopathy (GHMC and Chirayu Hospital, Bhopal) 2. Asymptomatic COVID-19 treatment study (GHMC Bhopal) 3. Real time effect of <i>Arsenicum album</i> 30C in prevention of COVID-19: a mass level Pan India observational study 4. Prophylactic study for <i>Arsenicum album</i> 30C in COVID-19 5. Prophylactic study (cluster trial) for <i>Arsenicum album</i> 30C in COVID-19 6. Retrospective study on recovered COVID-19 patients 7. Mass Prophylaxis study inmates, staff and family of Delhi Prison 8. Post - Prophylaxis analysis of impact of <i>Arsenic album</i> 30 in frontline workers (Mumbai Police) 9. COVID-19 treatment study (AIIMS, Jhajjar) 10. Effectiveness of Influzenium in prevention of ILI 11. Development of homeopathic nosode from COVID-19 (AIIMS, Jhajjar) 12. Evaluation of adjuvant homeopathic treatment in COVID-19 patient in Gujarat State c) Fundamental Research <ol style="list-style-type: none"> 1. Physicochemical studies of homeopathic drug formulations (Dyal Singh College, New Delhi) 2. Osteogenic effect of <i>Symphytum</i>

Sl. No.	Name of the State/U.T.	Name & Address of the Institutes/Units	Name of the project
			<p>officinale using human bone marrow derived mesenchymal stem cells (AIIMS, New Delhi)</p> <p>3. Pharmacological screening of Homoeopathic drugs used (AIIMS, New Delhi)</p> <p>4. Anti-neuropathic efficacy of Homeopathic Dilutions of Toxicodendron Pubescens, (DPSRU, New Delhi)</p> <p>5. Impact of homoeopathic medicines on Breast E Prostate cancer (AMITY University)</p>

GENDER BUDGET

Gender wise employee's breakup-

Research Personnel employed in the Council:

Table 7

Category	Male	Female
Regular	107	76
Contractual	103	137
TOTAL (423)	210	213
Percentage	49.64%	50.35%
Supportive Staff (Admin./Accts.)		
Category	Male	Female
Regular	77	27
Contractual	254	112
TOTAL (470)	331	139
Percentage	70.42%	29.57%

Women centric research / projects of CCRH – Council has undertaken research projects specific to females since its inception on the following clinical conditions- Cervicitis and cervical erosions; Malposition of human foetus; Menorrhagia, Menstrual disorders; Distress during climacteric (menopausal) years; Uterine fibroids; Sepia in distress during climacteric years; Breast fibroadenoma; Polycystic Ovarian Syndrome; Iron deficiency Anaemia and Dysmenorrhoea.

Council has developed three volumes of Standard Treatment Guidelines (STGs) on 55 disease conditions of which Menopause, Polycystic Ovarian syndrome, Uterine fibroids and Breast fibroadenoma are specific to females. The third volume of STGs was published in the reporting year having 20 disease conditions of which breast fibroadenoma is specific to females.

The sexual awareness programs: The sexual awareness programs could not be conducted during the reporting year due to COVID-19 pandemic situation.

Table 8: Details of General OPD, IPD and Special OPDs:

S. No.	Programme	Total Patients	Female	Female %
1.	General OPD	431403	264073	61.21
2.	IPD	194	103	53.09
3.	NPCDCS	44687	26589	59.5
4.	SCSP program	51400	27243	53.00
TOTAL		527684	318008	60.26

TECHNICAL REPORT



RESEARCH ACTIVITIES

The Council has undertaken research activities in the following areas during the year 2020-2021

- Survey, Collection and Cultivation of Medicinal Plants
- Drug Standardization Research
- Drug Proving Research
- Clinical Verification Research
- Clinical Research
- Research on Epidemic Diseases
- Fundamental Research
- Extra-Mural Research

SURVEY, COLLECTION AND CULTIVATION OF MEDICINAL PLANTS

CENTRE OF MEDICINAL PLANTS RESEARCH IN HOMOEOPATHY (CMPRH), EMERALD, OOTY

The survey of medicinal plants and collection unit, located at Emerald, Nilgiris district, Tamil Nadu has been renamed in 2015 as “Centre of Medicinal Plants Research in Homoeopathy (CMPRH)”. The fundamental activities of the unit are given below.

Raw drug samples supplied to the Drug Standardization centres at-

1. Dr. D. P. Rastogi Central Research Institute for Homoeopathy, Noida (U.P.)

The following 31 raw drugs plant materials have been supplied to the Officer In-charge DDPRCRI (H), Noida for carrying out Drug Standardization Research work & Drug Proving: -

Table 9: Raw drugs plant material supplied to DDPRCRI (H)

S. No.	Botanical Name	Part Used	Quantity	Source	Supplied for/ Allotted to
1.	<i>Kalanchoe pinnata</i> (Lam.) Pers.	Leaves	400 grams	Field collection	Potency preparation
2.	<i>Matricaria chamomilla</i> L.	Flower heads	50 grams	Cultivated at CMPRH, Emerald	Pharmacology
3.	<i>Rosa damascena</i> Herrm. Mill.	Flowers	30 grams	Cultivated at CMPRH, Emerald	Pharmacognosy
4.	<i>Yucca filamentosa</i> L.	Flowers	400 grams	Field collection	Chemical profiling
		Inflorescence axis	250 grams		
5.	<i>Abrus precatorius</i> L.	Seeds	900 grams	Commercial	Pharmacognosy and Physico-Chemical studies
6.	<i>Anamirta cocculus</i> (L.) Wight & Arn. (Syn. <i>Cocculus indicus</i> Royle)	Fruits	1100 grams	Field collection	Pharmacognosy and Physico-chemical studies
7.	<i>Centella asiatica</i> (L.) Urb. (Syn. <i>Hydrocotyle asiatica</i> L.)	Whole plant	1050 grams	Field collection	Pharmacognosy and Physico-chemical studies
8.	<i>Galinsoga parviflora</i> Cav.	Whole plant	700 grams	Field collection	Pharmacognosy and Physico-chemical studies

S. No.	Botanical Name	Part Used	Quantity	Source	Supplied for/ Allotted to
9.	<i>Digitalis purpurea</i> L.	2 nd Year Leaves	1100 grams	Cultivated at CMPRH	Pharmacognosy & Physico-chemical
10.	<i>Achillea millefolium</i> L.	Whole plant	1 Kg	Cultivated at CMPRH	Pharmacognosy & Physico-chemical
11.	<i>Datura ferox</i> L.	Seeds	1 Kg	Field collection	Pharmacognosy & Physico-chemical
12.	<i>Lycopodium clavatum</i> L.	Cones & spores	150 grams	Field collection	Pharmacognosy & Physico-chemical
13.	<i>Symphytum officinale</i> L.	Rhizome & roots	800 grams	Cultivated at CMPRH, Emerald	Pharmacological studies
14.	<i>Rumex crispus</i> L.	Rhizome	800 grams	Field collection	Pharmacological studies
15.	<i>Smilax aspera</i> L.	Rhizome & roots	300 grams	Field collection	Pharmacological studies
16.	<i>Heliotropium arborescens</i> L. (Syn. <i>Heliotropium peruvianum</i> L.)	Young aerial part	650 grams	Cultivated at CMPRH, Emerald	Pharmacognosy & Physico-chemical
17.	<i>Fumaria officinalis</i> L.	Whole plant	700 grams	Field collection	Pharmacognosy & Physico-chemical
18.	<i>Cucumis sativus</i> L.	Seeds	1 Kg	Field collection	Pharmacognosy & Physico-chemical
19.	<i>Vitex negundo</i> L.	Leaves	750 grams	Field collection	Pharmacological studies
20.	<i>Nyctanthes arbor-tristis</i> L.	Leaves	900 grams	Field collection	Pharmacological studies
21.	<i>Syzygium cumini</i> (L.) Skeels (Syn. <i>Syzygium jambolanum</i> (Lam.) DC.)	Seeds	950 grams	Commercial	Pharmacological studies
22.	<i>Matricaria chamomilla</i> L.	Whole plant	600 grams	Cultivated at CMPRH, Emerald	Pharmacological studies
23.	<i>Saraca asoca</i> (Roxb.) Willd.	Bark	1 Kg	Commercial	Pharmacological studies
24.	<i>Calendula officinalis</i> L.	Whole plant	750 grams	Cultivated at CMPRH, Emerald	Pharmacological studies

S. No.	Botanical Name	Part Used	Quantity	Source	Supplied for/ Allotted to
25.	<i>Cytisus scoparius</i> (L.) Link (Syn. <i>Sarothamnus scoparius</i> (L.) W.D.J.Koch)	Flowers	750 grams	Field collection	Pharmacognosy & Physico-chemical
26.	<i>Zingiber officinale</i> Roscoe	Dried rhizomes	1050 grams	Commercial	Pharmacological studies
27.	<i>Clitoria ternatea</i> L.	Leaves	450 grams	Field collection	Pharmacognosy & Physico-chemical
28.	<i>Cassia fistula</i> L.	Stem bark	1200 grams	Field collection	Pharmacognosy & Physico-chemical
29.	<i>Hibiscus rosa-sinensis</i> L.	Flowers	450 grams	Field collection	Pharmacognosy & Physico-chemical
30.	<i>Sambucus nigra</i> L.	Leaves & flowers	1200 grams	Field collection	Pharmacological studies
31.	<i>Desmodium gangeticum</i> (L.) DC.	Leaves	150 grams	Commercial	Pharmacognosy & Physico-chemical

2. Drug Standardisation Unit, Hyderabad

The following 13 raw drugs plant materials were supplied to the DSU, Hyderabad for carrying out Drug Standardization research work: -

Table 10: Raw drugs (plant material) supplied to DSU, Hyderabad

S. No.	Botanical Name	Part used	Quantity	Source	Supplied for/ Allotted to
1.	<i>Justicia adhatoda</i> L.	Leaves	550 grams	Field collection	Pharmacognosy
2.	<i>Nigella sativa</i> L.	Seeds	300 grams	Commercial	Pharmacognosy
3.	<i>Sigesbeckia orientalis</i> L.	Whole plant	400 grams	Field collection	Pharmacognosy
4.	<i>Rosmarinus officinalis</i> L.	Leaves and stem (WP)	650 grams	Cultivated at CMPRH, Emerald	Pharmacognosy
5.	<i>Solanum nigrum</i> L.	Whole plant	450 grams	Field collection	Pharmacognosy
6.	<i>Plectranthus fruticosus</i> L. 'Her'.	Leaves and aerial parts	500 grams	Cultivated at CMPRH, Emerald	Pharmacognosy
7.	<i>Lycopersicon esculentum</i> Mill.	Whole plant	250 grams	Field collection	Pharmacognosy

S. No.	Botanical Name	Part used	Quantity	Source	Supplied for/ Allotted to
8.	<i>Taraxacum officinale</i> (L.) Weber ex F H Wigg.	Whole plant	200 grams	Field collection	Pharmacognosy
9.	<i>Verbascum thapsus</i> L.	Whole plant	500 grams	Field collection	Pharmacognosy
10.	<i>Cassia auriculata</i> L.	Flowers	300 grams	Field collection	Pharmacognosy
11.	<i>Leucas aspera</i> (Willd.) Link	Flowers	200 grams	Field collection	Pharmacognosy
12.	<i>Sambucus nigra</i> L.	Leaves	100 grams	Field collection	Pharmacognosy
		Flowers	200 grams		
13.	<i>Hippophae rhamnoides</i> L.	Fruits	300 grams	Commercial	Pharmacognosy

3. Dr. Anjali Chatterji Regional Research Institute for Homoeopathy, Kolkata

The following 20 raw drugs plant materials have been supplied to the Officer In-charge, Dr. Anjali Chatterji Regional Research Institute for Homoeopathy, Kolkata for carrying out Drug Standardization Research work: -

Table 11: Raw drugs (plant material) supplied to DACRRI (H), Kolkata

S. No.	Botanical Name	Part used	Quantity	Source	Supplied for/ Allotted to
1.	<i>Yucca filamentosa</i> L.	Flowers	400 grams	Field collection	Chemical profiling
		Inflorescence axis	250 grams		
2.	<i>Justicia adhatoda</i> L.	Leaves	650 grams.	Field collection	Physico- chemical Studies
3.	<i>Nigella sativa</i> L.	Seeds	300 grams	Commercial	Physico- chemical Studies
4.	<i>Sigesbeckia orientalis</i> L.	Whole plant	650 grams	Field collection	Physico- chemical Studies
5.	<i>Lycopersicon esculentum</i> Mill.	Whole plant	380 grams	Field collection	Physico- chemical Studies
6.	<i>Plectranthus fruticosus</i> L. 'Her'	Whole plant	500 grams	Cultivated at CMPRH	Physico- chemical Studies
7.	<i>Rosmarinus officinalis</i> L.	Whole plant	850 grams	Cultivated at CMPRH	Physico- chemical Studies
8.	<i>Solanum nigrum</i> L.	Whole plant	500 grams	Field collection	Physico- chemical Studies
9.	<i>Achillea millefolium</i> L.	Whole plant	1 Kg	Cultivated at CMPRH	Pharmacological studies

S. No.	Botanical Name	Part used	Quantity	Source	Supplied for/ Allotted to
10.	<i>Digitalis purpurea</i> L.	2 nd Year Leaves	1 Kg	Cultivated at CMPRH	Pharmacological studies
11.	<i>Sambucus nigra</i> L.	Leaves	250 grams.	Field collection	Physico-chemical Studies
		Flowers	300 grams		
12.	<i>Leucas aspera</i> (Willd.) Link.	Flowers	500 grams	Field collection	Physico-chemical Studies
13.	<i>Cassia auriculata</i> L.	Flowers	550 grams	Field collection	Physico-chemical Studies
14.	<i>Hippophae rhamnoides</i> L.	Fruits (Berries)	500 grams	Commercial	Physico-chemical Studies
15.	<i>Taraxacum officinale</i> (L.) Weber ex F H Wigg.	Whole plant	350 grams	Field collection	Physico-chemical Studies
16.	<i>Verbascum thapsus</i> L.	Whole plant	1 kg	Field collection	Physico-chemical Studies
17.	<i>Erigeron canadensis</i> L.	Whole plant	850 grams	Field collection	Pharmacological studies
18.	<i>Coccinia indica</i> Wight & Arn. (Syn. <i>Cephalandra indica</i> (Wight & Arn.) Naudin)	Leaves	800 grams	Field collection	Pharmacological studies
19.	<i>Echinacea purpurea</i> (L.) Moench	Whole plant	300 grams	Cultivated at CMPRH	Pharmacological studies
20.	<i>Wrightia tinctoria</i> R. Br.	Seeds	400 grams	Field collection	Physico-chemical Studies

4. Homoeopathic Pharmacopeia Laboratory, Ghaziabad

The following 01 raw drug plant material was supplied to the Homoeopathic Pharmacopeia Laboratory, Ghaziabad for carrying out HPI revision work.

Table 12: Raw drugs (plant material) supplied to HPL, Ghaziabad

S. No.	Botanical Name	Part used	Quantity	Source
1.	<i>Majorana hortensis</i> Moench Syn. <i>Origanum majorana</i> L.	Whole plant	200 grams	Field collection

Cultivation of medicinal plants in the experimental garden of CMPRH:

Homoeopathic medicinal plants research garden activities: -

Currently 104 plant species (92 exotic and 12 indigenous) are being cultivated in large scale, on

experimental cultivation. The different species are under conservation cum germplasm collection in demonstration plots for preservation, multiplication, seed production, to promote plantation. These species are being maintained as reference species useful in Homoeopathy:

a). The following exotic homoeopathic medicinal plants are cultivated/maintained as germplasm collection at our research garden:

- | | | |
|---------------------------------------|------------------------------------|--|
| 1. <i>Achillea millefolium</i> | 31. <i>Digitalis purpurea</i> | 62. <i>Plantago ovata</i> |
| 2. <i>Agave americana</i> | 32. <i>Echinacea angustifolia</i> | 63. <i>Prunus persica</i> |
| 3. <i>Agropyron repens</i> | 33. <i>Erigeron canadensis</i> | 64. <i>Psidium guajava</i> |
| 4. <i>Agrostemma gethago</i> | 34. <i>Exogonium purga</i> | 65. <i>Punica granatum</i> |
| 5. <i>Ammi majus</i> | 35. <i>Fagopyrum esculentum</i> | 66. <i>Raphanus sativus var. niger</i> |
| 6. <i>Ammi visnaga</i> | 36. <i>Ficus carica</i> | 67. <i>Rosa damascena</i> |
| 7. <i>Anagallis arvensis</i> | 37. <i>Fragaria vesca</i> | 68. <i>Rosmarinus officinalis</i> |
| 8. <i>Anthemis nobilis</i> | 38. <i>Fumaria officinalis</i> | 69. <i>Rumex acetosella</i> |
| 9. <i>Apium graveolens</i> | 39. <i>Ginkgo biloba</i> | 70. <i>Saccharum officinarum</i> |
| 10. <i>Argemone ochroleuca</i> | 40. <i>Hedera helix</i> | 71. <i>Salvia officinalis</i> |
| 11. <i>Armoracia rusticana</i> | 41. <i>Heliotropium peruvianum</i> | 72. <i>Sambucus nigra</i> |
| 12. <i>Artemisia annua</i> | 42. <i>Hibiscus rosa-sinensis</i> | 73. <i>Santolina chamaecyparissus</i> |
| 13. <i>Artemisia dracunculus</i> | 43. <i>Iris florentina</i> | 74. <i>Sarothamnus scoparius</i> |
| 14. <i>Asclepias curassavica</i> | 44. <i>Iris germanica</i> | 75. <i>Sigesbeckia orientalis</i> |
| 15. <i>Asparagus officinalis</i> | 45. <i>Lolium temulentum</i> | 76. <i>Silybum marianum</i> |
| 16. <i>Borago officinalis</i> | 46. <i>Lycopersicon esculentum</i> | 77. <i>Smilax aspera</i> |
| 17. <i>Beta vulgaris</i> | 47. <i>Magnolia grandiflora</i> | 78. <i>Solanum nigrum</i> |
| 18. <i>Bryophyllum calycinum</i> | 48. <i>Majorana hortensis</i> | 79. <i>Solanum pseudocapsicum</i> |
| 19. <i>Camellia sinensis</i> | 49. <i>Melissa officinalis</i> | 80. <i>Stellaria media</i> |
| 20. <i>Cannabis sativa</i> | 50. <i>Mentha piperita</i> | 81. <i>Symphytum officinale</i> |
| 21. <i>Catharanthus roseus</i> | 51. <i>Mentha spicata</i> | 82. <i>Taraxacum officinale</i> |
| 22. <i>Cheiranthus cheiri</i> | 52. <i>Mirabilis jalapa</i> | 83. <i>Thymus serpyllum</i> |
| 23. <i>Chenopodium ambrosioides</i> | 53. <i>Nerium oleander</i> | 84. <i>Thymus vulgaris</i> |
| 24. <i>Chrysanthemum leucanthemum</i> | 54. <i>Mimosa pudica</i> | 85. <i>Trifolium repens</i> |
| 25. <i>Chrysanthemum parthenium</i> | 55. <i>Oenothera biennis</i> | 86. <i>Tropaeolum majus</i> |
| 26. <i>Cinchona officinalis</i> | 56. <i>Origanum majorana</i> | 87. <i>Urtica urens</i> |
| 27. <i>Cineraria maritima</i> | 57. <i>Papavar rhoeas</i> | 88. <i>Vaccaria hispanica</i> |
| 28. <i>Cnicus benedictusL.</i> | 58. <i>Papaver somniferum</i> | 89. <i>Verbascum thapsus</i> |
| 29. <i>Datura arborea</i> | 59. <i>Pastinaca sativa</i> | 90. <i>Viola odorata</i> |
| 30. <i>Delphinium ajasis</i> | 60. <i>Petroselinum crispum</i> | 91. <i>Viola tricolor</i> |
| | 61. <i>Plantago lanceolata</i> | 92. <i>Yucca filamentosa</i> |

b) The following indigenous homoeopathic medicinal plants are cultivated at our research garden.

- | | | |
|-----------------------------|-----------------------------------|----------------------------------|
| 1. <i>Acorus calamus</i> | 5. <i>Coleus forskohlii</i> | 9. <i>Polygonum punctatum</i> |
| 2. <i>Adhatoda vasica</i> | 6. <i>Datura stramonium</i> | 10. <i>Syzygium cumini</i> |
| 3. <i>Centella asiatica</i> | 7. <i>Gymnema sylvestre</i> | 11. <i>Vetiveria zizanioides</i> |
| 4. <i>Citrus aurantium</i> | 8. <i>Plectranthus fruticosus</i> | 12. <i>Zingiber officinale</i> |

c) Nursery development:

To develop/grow more plants, over the entire area, making it a cultivable one, larger number of plant materials are required. Accordingly, we have developed nursery for 3500 numbers of vegetative

propagation of *Rosmarinus officinalis* (V.P. clones) and 2000 numbers of *Cineraria maritima* (V.P. clones) cuttings, filled with polythene bags.

The newly built rigid poly house has been used for raising seedlings of various homoeopathic medicinal plants for further extension of areas as cultivable and maintenance of germplasm. The following seeds have been sowed inside the nursery bed; *Apium graveolens*, *Calendula officinalis*, *Chrysanthemum parthenium*, *Cineraria maritima*, *Digitalis purpurea*, *Rosmarinus officinalis*, *Echinacea purpurea*, *Delphinium ajacis*, *Urtica urens*, *Lolium temulentum*, *Cheiranthus cheiri* and *Ammi majus*. All seeds which are germinated are recorded with the date of germination and growth condition.



Figure 3: Transplantation of *Hyoscyamus niger* L. seedlings in Experimental Bed

d) Transplanting of seedlings in the Field:

To develop/extend the areas as cultivable field, more areas are cleaned and the 500 seedlings of *Achillea millefolium* transplanted, 1500 rooted cuttings of *Cineraria maritima*, 1500 seedlings of *Thymus* and 3000 rooted cuttings of *Rosmarinus officinalis* and 500 seedlings of *Cymbopogon* are transplanted. In the expectation of monsoon, the seedlings and saplings are transferred to field there by cultivation areas are further extended.

Further, transplanted 1000 seedlings of *Digitalis purpurea* to cover more areas are under cultivation. The old plantlets are also removed and new seedlings are planted in the same area to increase the yield and get quality of raw drug plant materials.

The raised seedlings of *Matricaria chamomilla*, *Hyoscyamus niger*, *Echinacea purpurea* and *Echinacea angustifolia* have been transplanted from nursery to the field. The other seedling germination was appreciable as compared to earlier open seed sowing. All the other germinated seeds are healthy and ready to transfer to field.

The following exotic & indigenous homoeopathic/AYUSH medicinal plant seeds (for germination)/seedlings/cuttings are introduced to CMPRH garden for germplasm conservation.

- | | | |
|---------------------------------|---------------------------------------|---------------------------------|
| 1. <i>Agrostemma githago</i> L. | 4. <i>Cannabis sativa</i> L. | 6. <i>Cheiranthus cheiri</i> L. |
| 2. <i>Ammi majus</i> L. | 5. <i>Catharanthus roseus</i> (L.) G. | 7. <i>Cnicus benedictus</i> L. |
| 3. <i>Anthemis nobilis</i> L. | Don | 8. <i>Nerium oleander</i> L. |

- | | | |
|-----------------------------------|--|--|
| 9. <i>Papavarhoeas</i> L. | 14. <i>Echinacea angustifolia</i> DC. | 18. <i>Psidium guajava</i> L. |
| 10. <i>Papaver somniferum</i> L. | 15. <i>Ficus carica</i> L. | 19. <i>Vaccaria hispanica</i> (Mill.)
Rauschert |
| 11. <i>Plantago lanceolata</i> L. | 16. <i>Hibiscus rosa-sinensis</i> L. | 20. <i>Urtica urens</i> L. |
| 12. <i>Plantago ovata</i> Forssk. | 17. <i>Muehlenbeckia platyclados</i>
(F. Muell.) Meisn. | 21. <i>Lolium temulentum</i> L. |
| 13. <i>Delphinium ajacis</i> L. | | |



Figure 4: Experimental Cultivation of *Delphinium ajacis* L.



Figure 5: *Ammi majus* L. - Flowering



Figure 6: *Calendula officinalis* L. - Flowering



Figure 7: *Ricinus communis* L. - Flowering and Fruiting



Figure 8: *Datura stramonium* L. - flowering



Figure 9: Separation of seeds from fruits of *Wrightia tinctoria* R. Br. Raw drug



Figure 10: Germplasm collection of *Viola tricolor* L.



Figure 11: Separation of leaves and flowers from twigs of *Sambucus nigra* L.



Figure 12: Raw drug collection of *Sambucus nigra* L. - flower and leaves



Figure 13: A bird eye view of CMPRH

SALE OF RAW DRUG PLANT MATERIALS

Total the raw drug plant materials fresh and in dry form were sold during the period for Rs. 66,930/- (Rupees sixty six thousand nine hundred thirty) only.

VISITORS TO RESEARCH GARDEN

A.) Medico-botanical cum raw drug plant material collection tour

Total twenty-three (21+2) medico botanical exploration cum raw drug plant collection tours have been undertaken in Nilgiri district and other districts of Tamil Nadu during the above period.

B.) Visitors

- I. M. Sivaji, 6th Mile, Adigaratty, Nilgiri district, visited the herbal garden on 6.6.2020 to see various medicinal plants and their cultivation.
- II. B. Vinoth Babu, Ethalar Village, Nilgiri district, visited this herbal garden on 29.09.2020 to see various medicinal plants and their cultivation.
- III. M. Arjun, (Bio – technology), Nilgiri district, visited this herbal garden and homoeopathic medicinal plants herbarium on 19.01.2020.
- IV. Team of 12 members skilled supporting staff of Indian Institute of Soil and Water Conservation and Research Centre (IISWC -ICAR), Ooty visited this centre on 26.02.2021 to see the nursery techniques and various homoeopathic medicinal plants cultivation.



Figure 14: Herbarium specimens preparation in the Field



Figure 15: *Rosmarinus officinalis* seedlings (cuttings) being developed outside the polyhouse

C.) Herbarium consultation cum literature survey tour

1. Total 455 herbarium sheets were mounted, stitched and labelled;
2. Total 455 herbarium sheets containing 288 species were identified and confirmed;
3. Total 455 herbarium sheets were accessioned bringing the total number of herbarium specimens present in accession register to 10744.

D.) Herbarium specimen collected

Two major and 21 one day botanical explorations cum raw drug plant material collection tours have been carried out and total 316 field numbers have been collected out of which 177 species are used in homoeopathic system of treatment. These were preserved and processed for preparation of herbarium.

DRUG STANDARDISATION RESEARCH

The standardization of drugs includes external (macroscopy/microscopy) as well as internal examination (ash values, extractive values and many other parameters) to identify, authenticate and their study chemical compositions. Standardization of the drugs will ensure indirectly that the drugs are conserved for their medicinal and nutritive value. Such standardization studies confirm the safety of medicines, but efficacy has to be judged clinically or in the laboratory. WHO has set up guidelines for standardization of these drugs, which are used as standards by the majority of countries.

It encompasses a series of factors/measures which influence the quality of homoeopathic medicines. Drug standardization ensures quality, safety, and efficacy of a drug. Pharmacognostic and physico-chemical studies are conducted to study the diagnostic, qualitative and quantitative characteristics of drugs.

The pharmacognostic studies include the macro and microscopical characteristics of raw drugs of vegetative origin. The physico-chemical analysis helps to determine the physical and chemical constituents of the drug.

The drug standardisation studies are being carried out at the Dr. D. P. Rastogi Central Research Institute (H), Noida, Drug Standardisation Unit (H), Hyderabad and Dr. Anjali Chatterjee Regional Research Institute (DACRRI), Kolkata for pharmacognostical, physico-chemical and pharmacological evaluation of homoeopathic drugs. The Council has so far established pharmacognostical standards of 361 drugs, physico-chemical standards of 348 drugs and pharmacological standards of 151 drugs which include plants, chemicals, minerals and animal sources. One hundred forty nine drugs have been studied in all the three aspects.

The details of work done under the drug standardization program pertaining to pharmacognostical, physico-chemical and finished product under taken during the financial year are given below.

A.) Drug standardization work undertaken

The Council has undertaken studies on laying down the standards for following 31 (30 plants + 1 animal origin) drugs under Drug Standardization program of Council during the year 2020-21 for standardization of parameters i.e. pharmacognostical, physico-chemical and finished product standards (FPS) studies, which are stated below:

1. Plant origin drugs

Table 13

S. No.	Name of Plant Drug	Botanical	Physico-chemical
1.	<i>Abrus precatorius</i>	Completed	Completed
2.	<i>Achillea millefolium</i>	Completed	Completed
3.	<i>Buxus sempervirens</i>	Completed	-
4.	<i>Cassia fistula</i>	Completed	-
5.	<i>Celastrus paniculatus</i>	Completed	-
6.	<i>Clitoria ternatea</i>	Completed	Completed
7.	<i>Cocculus indicus</i>	Completed	Completed
8.	<i>Collinsonia canadensis</i>	-	Completed
9.	<i>Cucumis sativus</i>	Completed	Completed
10.	<i>Cytisus scoparius</i>	-	Completed
11.	<i>Damiana</i>	Completed	Completed

S. No.	Name of Plant Drug	Botanical	Physico-chemical
12.	<i>Datura ferox</i>	Completed	Completed
13.	<i>Digitalis purpurea</i>	Completed	Completed
14.	<i>Dioscorea villosa</i>	-	Completed
15.	<i>Dolichos</i>	Completed	-
16.	<i>Echinacea angustifolia</i>	-	Completed
17.	<i>Fumaria officinalis</i>	-	Completed
18.	<i>Galinsoga perviflora</i>	-	Completed
19.	<i>Heliotropium peruvianum</i>	-	Completed
20.	<i>Hibiscus rosa-sinensis</i>	-	Completed
21.	<i>Hydrocotyle asiatica</i> (<i>Centella asiatica</i>)	Completed	Completed
22.	<i>Justicia adhatoda</i>	-	Completed
23.	<i>Lycopersicum esculentum</i>	-	Completed
24.	<i>Nigella sativa</i>	Completed	Completed
25.	<i>Rosmarinus officinalis</i>	Completed	-
26.	<i>Sambucus nigra</i>	Completed	-
27.	<i>Senna auriculata</i>	Completed	-
28.	<i>Siegesbeckia orientalis</i>	-	Completed
29.	<i>Solanum dulcamara</i>	Completed	Completed
30.	<i>Verbascum thapsus</i>	Completed	-

2. Animal origin drugs

Table14

S. No.	Name of Animal Drug	Zoological	Physico-chemical
1.	<i>Apis mellifica</i>	-	Completed

B.) Homoeopathic Pharmacopoeia of India-Upgradation/Revision

- The revision and upgradation of the Homoeopathic Pharmacopoeia of India (Vol. I to X) have been initiated to bring it at par with other international pharmacopoeias as per Essential Drug List (EDL) and medicines in high demand by the profession.
- The prioritization of 344 drugs which are much used by the profession have been taken up for revision work through following Institutes/Units:

1. Drug Standardization Unit (H), Hyderabad, Telangana
2. Drug Standardization Unit (H), Dr. Anjali Chatterjee Regional Research Institute, Kolkata.
3. Dr. D. P. Rastogi Central Research Institute (H), Noida, U.P.
4. Homoeopathic Pharmacopoeia Laboratory, Ghaziabad, U.P.

The HPI revision work was initiated in 2014; the following 25 drugs, of plant origin, have been completed in this year with respect to pharmacognostic and physico-chemical aspect and FPS studies.

3. Plant origin drugs

Table15

S. No.	Name of Plant Drug	Pharmacognostic studies	Physico-chemical studies
1.	<i>Cimicifuga racemosa</i>	Completed	Completed
2.	<i>Cocculus indicus</i>	-	Completed
3.	<i>Conium maculatum</i>	-	Completed

S. No.	Name of Plant Drug	Pharmacognostic studies	Physico-chemical studies
4.	<i>Damiana</i>	Completed	-
5.	<i>Dulcamara (Solanum dulcamara)</i>	Completed	-
6.	<i>Echinacea angustifolia</i>	Completed	Completed
7.	<i>Echinacea purpurea</i>	Completed	Completed
8.	<i>Equisetum hymale</i>	-	Completed
9.	<i>Eriodictyon glutinosum</i>	Completed	-
10.	<i>Eupatorium perfoliatum</i>	-	Completed
11.	<i>Eupatorium perpureum</i>	-	Completed
12.	<i>Euphrasia officinalis</i>	-	Completed
13.	<i>Fucus vesiculosus</i>	Completed	-
14.	<i>Gaultheria procumbens</i>	-	Completed
15.	<i>Grindelia robusta</i>	-	Completed
16.	<i>Guaicum officinale</i>	-	Completed
17.	<i>Hamamelis virginica</i>	-	Completed
18.	<i>Hydrastris canadensis</i>	Completed	Completed
19.	<i>Iris versicolor</i>	-	Completed
20.	<i>Lilium tigrinum</i>	-	Completed
21.	<i>Lycopodium clavatum</i>	Completed	-
22.	<i>Lycopus virginicus</i>	Completed	Completed
23.	<i>Marsdenia cundurango</i>	-	Completed
24.	<i>Pilocarpous jaborandi</i>	-	Completed
25.	<i>Sabal serrulata</i>	-	Completed

C.) Studies undertaken for XIth Volume of Homoeopathic Pharmacopoeia of India (HPI)

There are ten volumes of HPI consisting of 1111 drugs till date after revisions. Council has undertaken the work on entirely new 14 (12 plant origin and 02 chemical origin) drugs for XIth Volume with all the standardization parameters i.e. pharmacognostic, physico-chemical and finished product standards (FPS) studies and the monographs have been prepared as per new template of PCIM&H for inclusion in XIth Volume of HPI.

All 14 Monographs have been vetted during the monographs review meetings with respect to pharmacognosy and physico-chemical aspects and corrected as per suggestions of subject experts. List of 14 drugs is given below:

Table 16

S. No.	Plant Origin Drugs	
1.	<i>Buxus semipervirens</i>	7. <i>Bryonopsis laciniosa</i>
2.	<i>Citrus limonum</i>	8. <i>Ficus carica</i>
3.	<i>Datura ferox</i>	9. <i>Plectranthus fruticosus</i>
4.	<i>Heliotropium arborescens</i>	10. <i>Quassia amara</i>
5.	<i>Juniperous virginiana</i>	11. <i>Rosa damascena</i>
6.	<i>Lobelia erinus</i>	12. <i>Syzygium jambolanum</i>
S. No.	Chemical Origin Drugs	
1.	<i>Zincum arsenicum</i>	
2.	<i>Plumbum iodatum</i>	
Total	14	

D.) Studies undertaken for HPTLC ATLAS work of homoeopathic drugs

The chemo-profiling work of homoeopathic medicinal plants have been initiated in 2018 with the aim to create a database of homoeopathic plants with respect to marker compounds and other phyto-constituents present in the plants. Using modern analytical techniques including chromatographic ones, the well-developed quality standards will be achieved through systematic evaluation of the plant material. Preparations of HPTLC ATLAS with the chromatographic parameters have been completed for 10 homoeopathic medicinal plants, the list are given below:

Table 17

S. No.	Name of Plant Drug
1.	<i>Aegle folia</i>
2.	<i>Azadirachta indica</i>
3.	<i>Bixa orellena</i>
4.	<i>Capsicum annum</i>
5.	<i>Citrullus colocynthis</i>
6.	<i>Emblica officinalis</i>
7.	<i>Holarrhena antidysenterica</i>
8.	<i>Hygrophilla spinosa</i>
9.	<i>Hydrocotyle asiatica</i>
10.	<i>Verbascum thapsus</i>

The book containing 50 drugs have been published and released by the Council on the occasion of World Homoeopathy Day-2021.

E.) Antioxidant study

Estimation of Phytochemical Content, HPTLC analysis, FT-IR analysis and evaluation of antioxidant potential of *Coffea cruda*, *Thuja occidentalis*, *Pyrus malus*, *Hydrastis canadensis* and *Thea chinensis* mother tinctures and their dilutions (6C,12C,30C and 200C) have been done by Ultraviolet Spectroscopy method. The list of 05 completed plants is given bellow:

Table 18

S. No.	Name of Drugs	Pharmacognostic studies	Physico-chemical studies
1.	<i>Coffea cruda</i>	Completed	Completed
2.	<i>Pyrus malus</i>	Completed	Completed
3.	<i>Thea chinensis</i>	Completed	Completed
4.	<i>Thuja occidentalis</i>	Completed	Completed
5.	<i>Hydrastis canadensis</i>	Completed	Completed

F.) Comparative study work

The Council has undertaken a pilot study on comparative study of five raw drugs to understand the quality and authenticity of raw drugs available in the market. The drugs were selected from three raw drug suppliers and concluded studies in all pharmacognostic and physico-chemical aspects. The list of 05 drugs studied are as follows:

Table 19

S. No.	Name of Drugs	Pharmacognostic studies	Physico-chemical studies
1.	<i>Guaicum officinale</i>	Completed	Completed
2.	<i>Hydrastris canadensis</i>	Completed	Completed
3.	<i>Ledum palustre</i>	Completed	Completed
4.	<i>Lycopus virginicus</i>	Completed	Completed
5.	<i>Sabal serrulata</i>	Completed	Completed

G.) Pharmacology Work

DDPRCRI(H), Noida and DACRRI (H), Kolkata had developed animal house which has been approved by Committee for the Purpose of Control and Supervision of Experiments on Animals (CPCSEA). There is also a well-furnished Zebrafish laboratory to carry out the pharmacological studies of homoeopathic medicines. Following pharmacological studies have been done during this year.

Project 1: Evaluation of anti-epileptic and antioxidant properties of selected homoeopathic medicines in Pentylene-tetrazole (PTZ) induced convulsions in Zebra fish

Table 20

S. No.	Name of Drugs	Pharmacological Study
1.	<i>Belladonna (Bell.)</i> - Φ, 6C and 30C	Completed
2.	<i>Cicuta virosa</i> -30C	Completed
3.	<i>Cuprum metallicum (Cuprum met.)</i> -6C, 30C	Completed

Project 2: Evaluate the effect of assigned homoeopathic medicines on zebra fish embryo development

Table 21

S. No.	Name of Drugs	Status
1.	<i>Strychnos nux-vomica</i> Φ, 12X, 30C	Completed
2.	<i>Justicia adhatoda</i> Φ, 12X, 30C	Completed
3.	<i>Nyctanthes arbor-tristis</i> Φ, 12X, 30C	Completed
4.	<i>Achillea millefolium</i> Φ, 12X, 30C	Completed
5.	<i>Syzygium jambolanum</i> Φ, 12X, 30C	Completed
6.	<i>Rumex crispus</i> Φ, 12X, 30C	Completed
7.	<i>Sambucus nigra</i> Φ, 12X, 30C	Completed
8.	<i>Taraxacum officinalis</i> Φ, 12X, 30C	Completed
9.	<i>Vitex negundo</i> Φ, 12X, 30C	Completed
10.	<i>Zingiber officinale</i> Φ, 12X, 30C	Completed
11.	<i>Erigeron canadensis</i> Φ, 12X, 30C	Completed

Project 3: Evaluation of antinociceptive and anti-inflammatory effect of homoeopathic medicines in adult zebra fish (*Danio rerio*).

Standardisation studies of following medicines were completed:

- 1) Acetic acid induced nociception
- 2) Glutamate induced nociception
- 3) Formalin induced nociception

Microscopic studies of *Achillea millefolium*

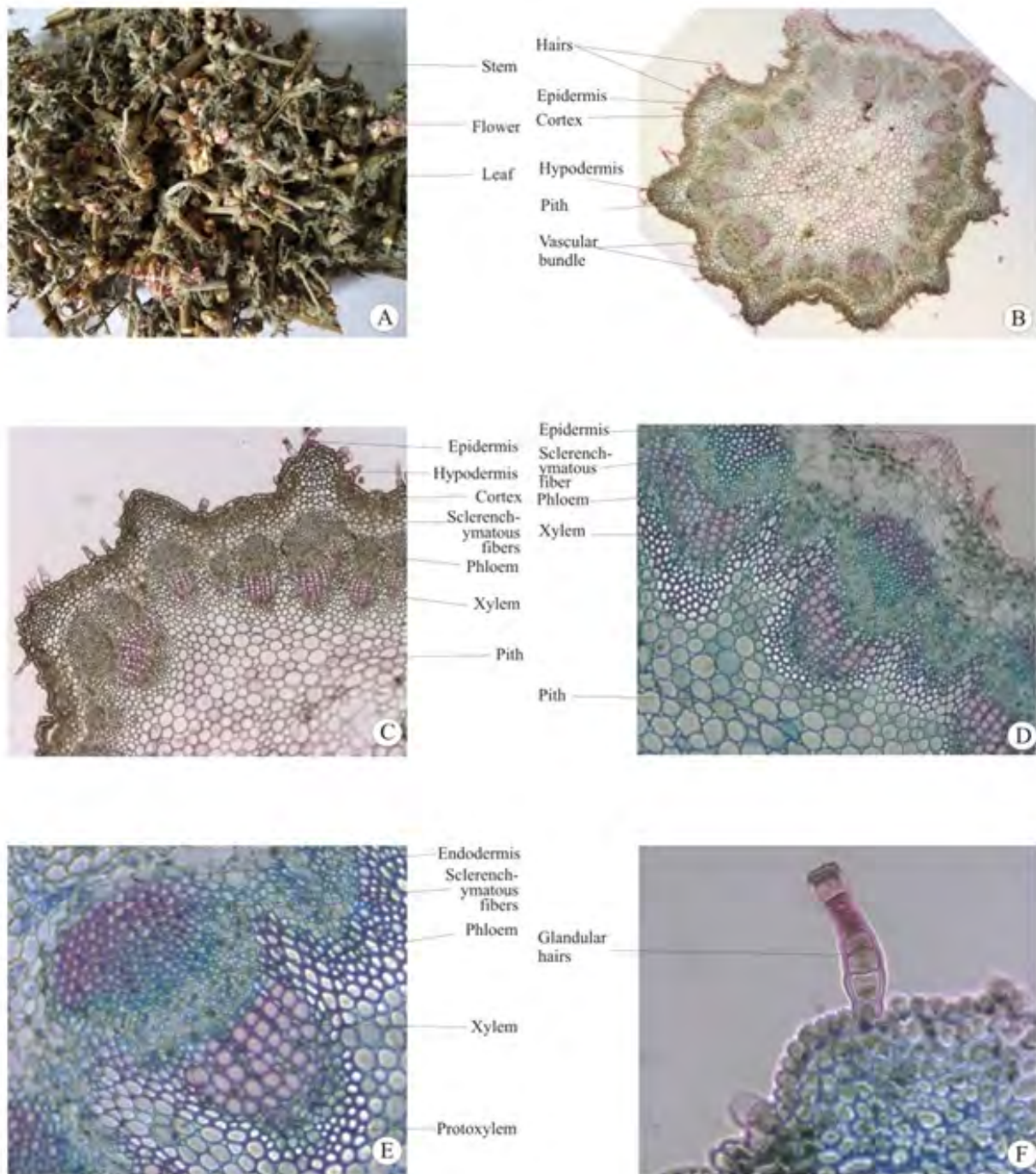


Figure 16

Plate 1

Achillea millefolium L. A. Raw drug; B. Transection of stem shows ridges and furrows, hairs, epidermis, collenchymatous hypodermis, cortex, vascular bundles in ring form and large pith; C & D. Enlarged view of transection shows numerous hairs, epidermis, cortex, sclerenchymatous fiber, xylem and phloem; E. Enlarged view of vascular bundle shows endodermis, sclerenchymatous fiber, phloem, xylem and protoxylem; F. Enlarged view of uniseriate, glandular hair.

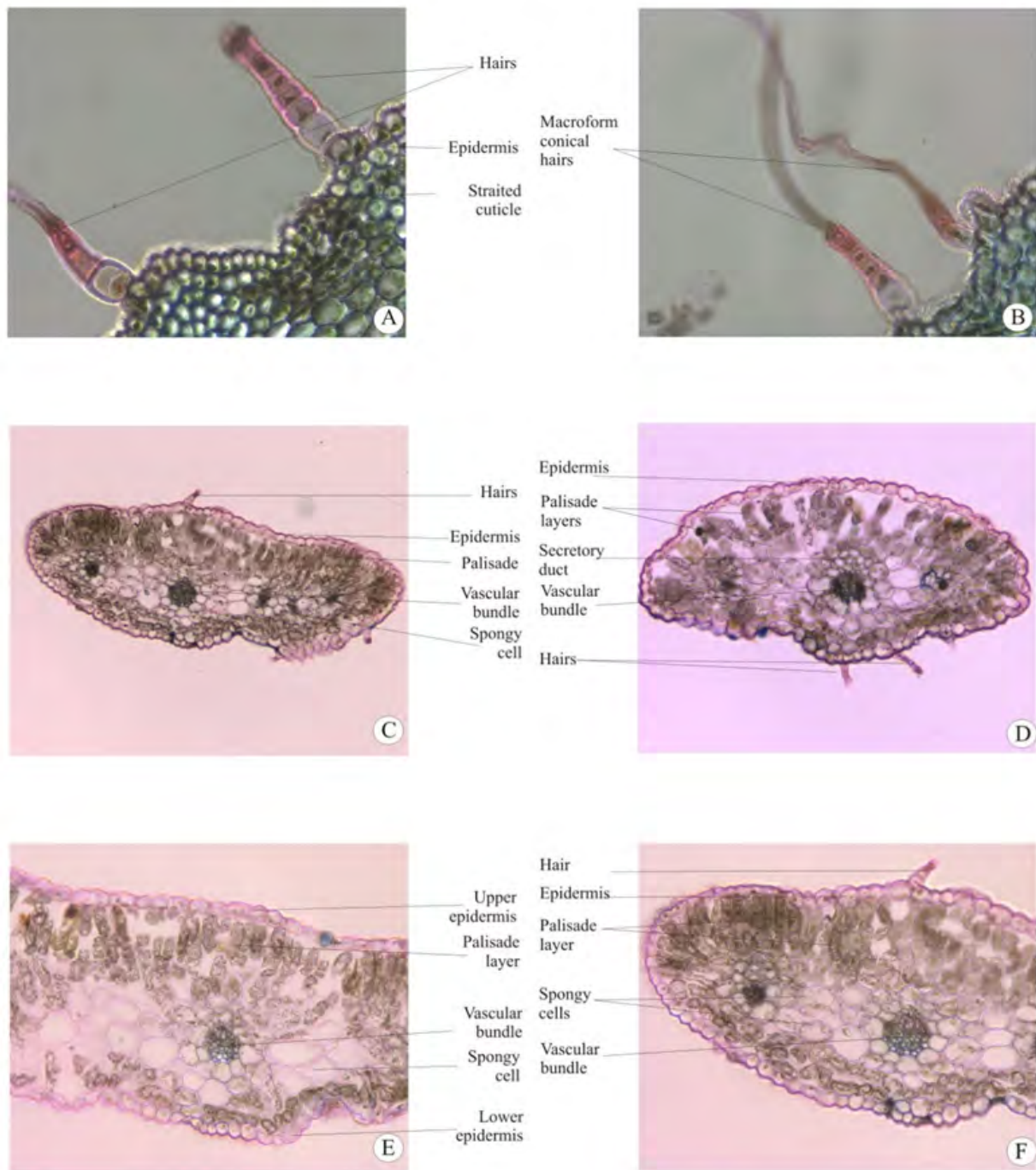


Figure 17

Plate 2

Achillea millefolium L. A & B. Enlarged view of glandular and uniseriate macroform conical hairs; C & D. Vertical section of leaf shows epidermis, palisade layer, spongy region, vascular bundle and secretory duct; E. Enlarged view of leaf section shows epidermis, palisade layer, spongy cells, vascular bundle; F. Enlarged view of leaf section shows lateral side, palisade layers, spongy cells, vascular bundles and hair.

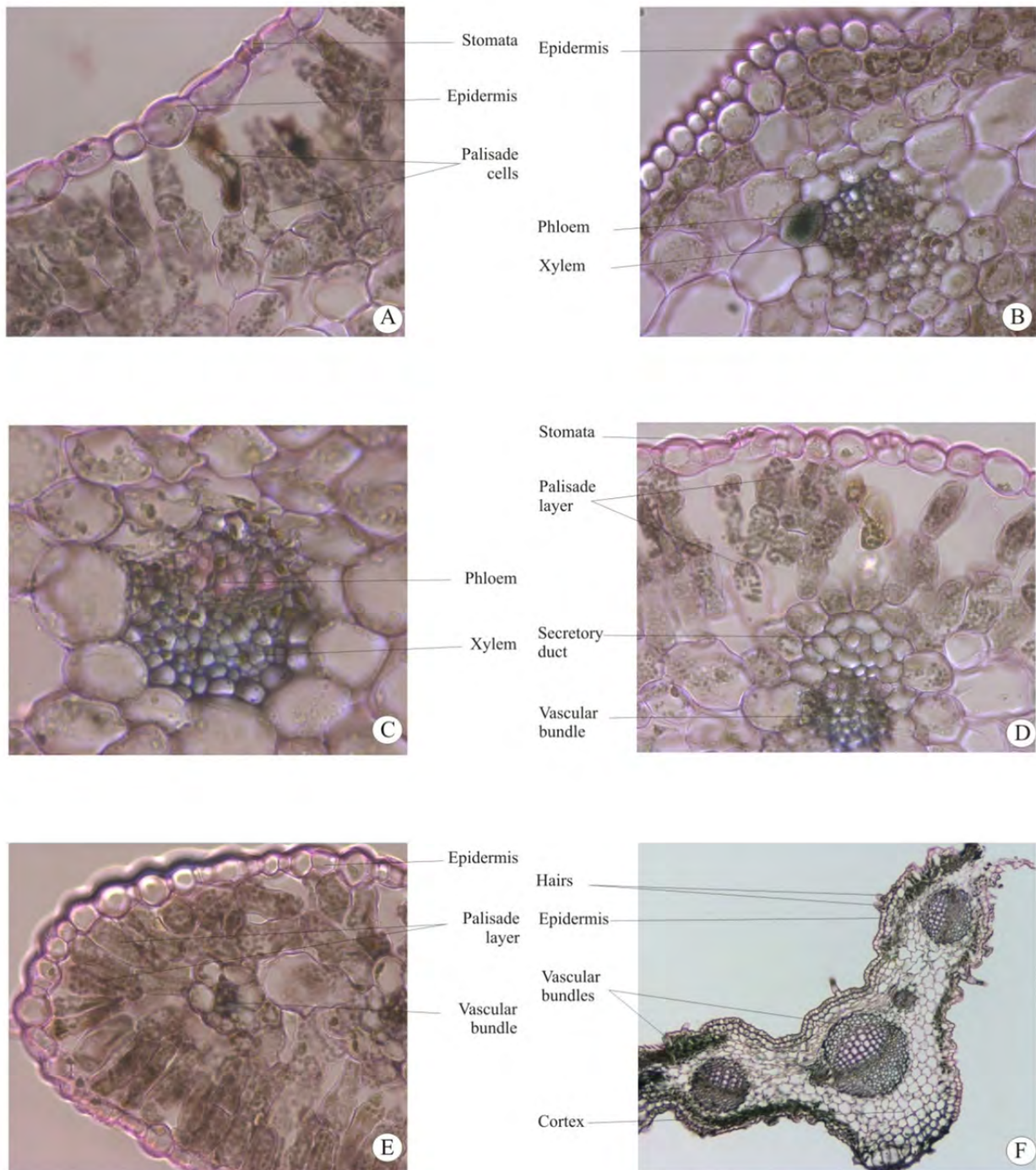


Figure 18

Plate 3

Achillea millefolium L. A. Enlarged view of epidermis interrupted by stomata and palisade cells; B. Enlarged view of leaf section shows epidermis, spongy cells and vascular bundle; C . Enlarged view of lamina vascular bundle shows abaxial side xylem and adaxial side phloem; E. Enlarged view of leaf section shows secretory duct above the vascular bundle; E. Enlarged view of leaf lateral view shows epidermis, palisade layer and lateral vascular bundle; F. Transverse section of petiole shows hairs, epidermis, vascular bundles and cortex.

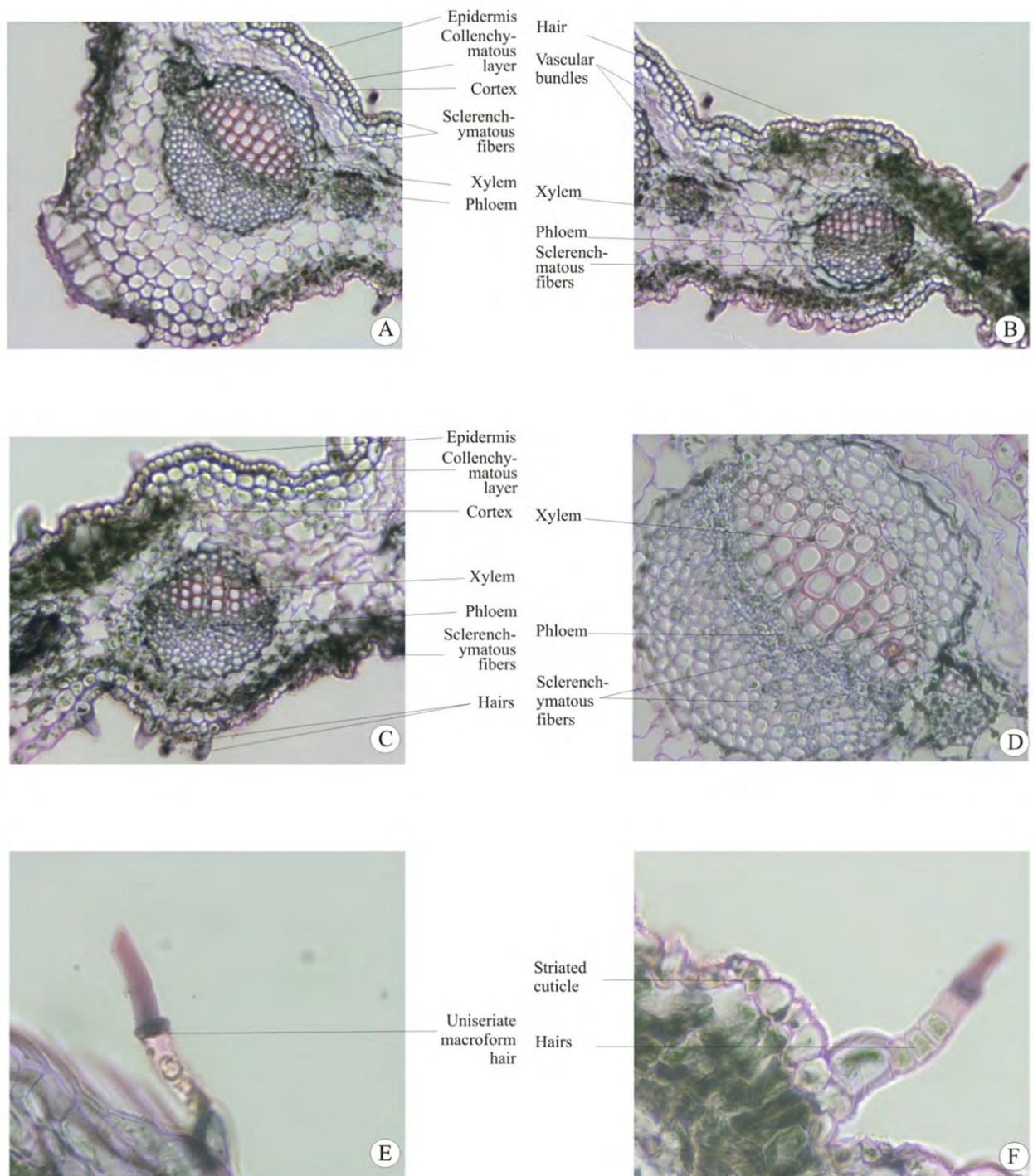


Figure 19

Plate 4

Achillea millefolium L. A. Enlarged view of petiole section shows epidermis, collenchymatous hypodermis, parenchymatous cortex, sclerenchymatous fiber, xylem and phloem; B & C. Enlarged view of lateral side of petiole shows hairs, epidermis, collenchymatous hypodermis, cortex, sclerenchymatous fiber, xylem and phloem; D. Enlarged view of vascular bundle shows sclerenchymatous fibers on both the side of vascular bundles, xylem and phloem; E & F. Enlarged view of hairs.

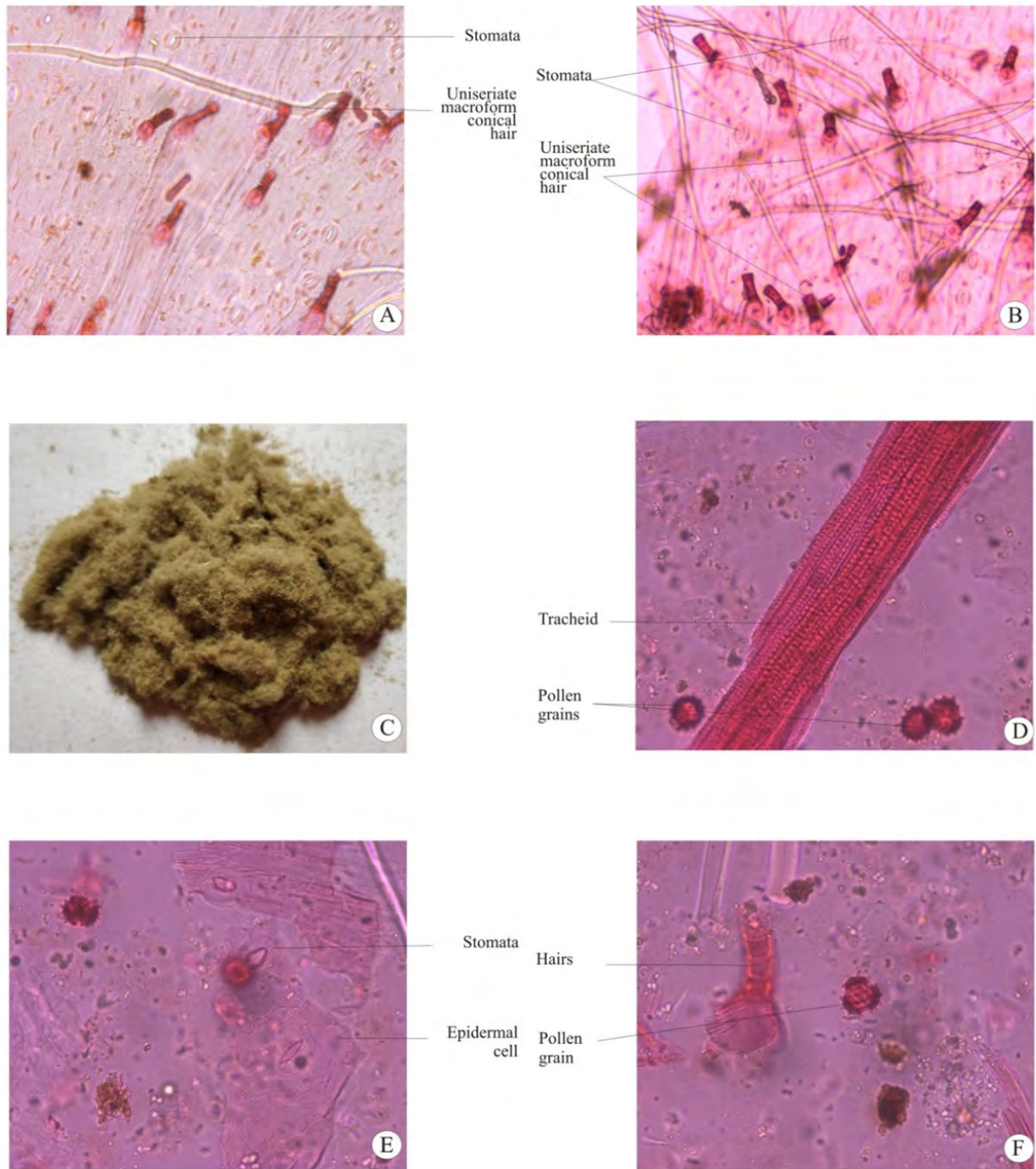


Figure 20

Plate 5

Achillea millefolium L. A & B. Leaf peel shows distribution of stomata, epidermal cells and uniseriate macroform conical hairs; C. Powder of raw drug; D. Powder microscopy shows fragments of tracheids and pollen grains; E. powder microscopy shows fragment of epidermal cells with stomata, pollen grains; F. Powder microscopy shows fragment of hair and pollen grain.

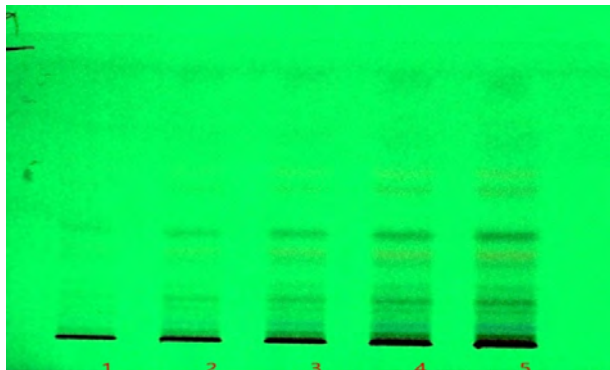
Figure 21: HPTLC of *Achillea millefolium*

Figure 22: Under UV 254 nm

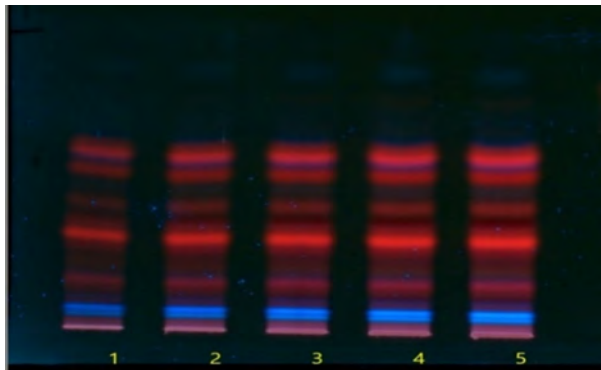
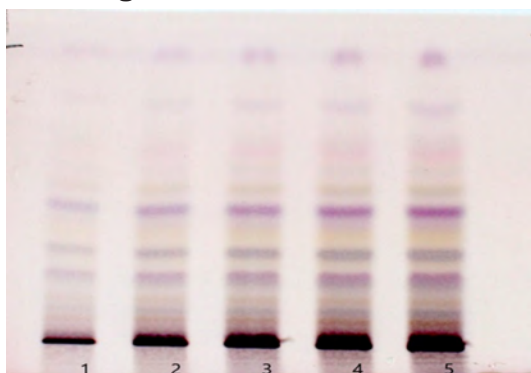


Figure 23: Under UV 366 nm



After derivatization with Anisaldehydesulphuric acid reagent
Track 1-5 Inhouse mother tincture

HPTLC of *Achillea millefolium* in-house MT and commercial market samples

Publications:

I. Books Published by the Council:-

1. Drugs of Animal Sources Used in Homoeopathy.
2. Agro-techniques of Medicinal Plants Used in Homoeopathy
3. A Compendium of Modern Nomenclature of Medicinal Plants commonly used in Homoeopathy.
4. HPTLC Atlas of Medicinal Plant Drugs used in Homoeopathy.

II. Papers Published in National & International Journals: -

1. Patel S, Biswas B, Rambabu K, Sundaram EN, Arya R. Pharmacognostical studies of *Smilax aspera* Linn. - A herbal drug. published in Indian Journal of Research in Homoeopathy 2020; vol-14(4); Pp 260-266.
2. Mahima Sharma, Suneel Prajapati, Arun Kumar, Ashish Tripathi, GV Narasimha Kumar, Pankaj Gupta. Safety Evaluation of *Syzygium jambolanum* on the development of Zebrafish Embryos. published in Indian Journal of Pharmaceutical Education and Research 2021; vol-55(1); Pp 198-204.
3. Monika Singh, Shilpi Singh, Digvijay Verma. Morphological and Pharmacognostical Evaluation of *Moringa oleifera* Lam. (Moringaceae): A Plant with High Medicinal Value in Tropical and Subtropical Parts of the World. published in Pharmacognosy Reviews 2021; vol-14(28); Pp 138-145.
4. Prajapati S, Kumar NGV. SARS-CoV-2 pandemic: an opportunity for Indian traditional medicines

- (AYUSH). published in International Journal of Complementary and Alternative Medicine. 2020; vol-13(3); Pp 103–105.
5. Suneel Prajapati, Mahima Sharma, Arun Kumar, Ashish Tripathi, GV Narasimha Kumar, Shilpi Singh, Monika Singh, Digvijay Verma, Pankaj Gupta. AYUSH Preparations as Immunity Boosters in the Management of SARSCoV-2: A Review. published in Current Traditional Medicine 2021; vol-(7); Pp 1-100.
 6. Suneel Prajapati, Aarti Bhardwaj, Pankaj Gupta. Anatomical And Phytochemical Standardization Of *Terminalia Chebula* and *Syzygium Jambolanum*: A Highly Used Medicinal Plant In India. published in Plant Cell Biotechnology and Molecular Biology 2020; vol-21(43&44); Pp 31-41.
 7. Suneel Prajapati, Aarti Bhardwaj, Pankaj Gupta. Antioxidant and anti-candida activity of selected medicinal plants of Indian origin. published in International journal edited by the Institute of Natural Fibres and Medicinal Plants. 2020; vol- 66(3); Pp 1-12.
 8. S Prajapati, M Sharma, A Kumar, P Gupta, NK GV. An Update on Novel COVID-19 Pandemic; A Battle between Humans and Virus. published in European Review for Medical and Pharmacological Sciences. 2020; vol- 24(10); Pp 5819-5829.
 9. G.V. Narasimha Kumar, Arun Kumar, Mahima Sharma, Ashish Tripathi, Shilpi Singh, Digvijay Verma, Pankaj Gupta and Suneel Prajapati. Self-Protection of Medical Workers in Traditional Hospitals and Clinics against SARS-CoV-2 Infection”. published in Coronaviruses, 2020; vol-1; Pp 1-5.
 10. Sharma M, Prajapati S, Kumar A, Tripathi A, GVN Kumar, Gupta P. Safety Evaluation of *Syzygium jambolanum* on the Development of Zebrafish Embryos. published in Indian Journal of Pharmaceutical Education and Research. 2021; vol-55(1); Pp 198-204.
 11. Kumar GV, Chitra V, Gupta P, Biswas B, Arya R. Preclinical updates of the homoeopathic medicines used in diabetes mellitus: A narrative review. published in Indian Journal of Research in Homoeopathy. 2021; vol-15; Pp 31-40.
 12. Prajapati S, Narasimha KGV. Assumption of Herd Immunity against COVID-19: A Plausibility and Hope or a Terrible Thought in Modern-Day to Save the Life. published in Journal of Infectious Diseases and Epidemiology 2020; vol-6:147.
 13. Narasimha Kumar GV, Suneel Prajapati and Chitra V. Retrospective Analysis of Total COVID-19 Cases and Comparison of Case Fatality and Recovery Rates Among States of India After First and Second Phases of Lockdown. published in Research and Reviews on Healthcare: On Open Access Journal. 2020; vol. 5(3); Pp 492-499.
 14. S Mugendhiran, B.D Sheeja, J Shashikanth, P Saranya and Renu Arya. Invasive Alien Species of Asteraceae and their Economic Importance in Nilgiri District, Tamil Nadu, India. published in Research Review International Journal of Multidisciplinary. 2020; vol-05(6); Pp. 5-12.
 15. S. Mugendhiran, M Manikandan, B.D Sheeja, and J Shashikanth. Impact of Different type of Plantations on the diversity of Asteraceae in Doddabetta, Nilgiris District, Tamil Nadu. published in International Journal of Botany Studies. 2021. vol. 06(2): Pp. 421-426.
 16. Satish Patel, Pragati, Shradha Devi Dwivedi, Krishna Yadav, Jagat R. Kanwar, Manju Rawat Singh, and Deependra Singh. Pathogenesis and Molecular Targets in Treatment of Diabetic Wounds. In: Faintuch J., Faintuch S. (eds) Obesity and Diabetes. Springer, Cham. 2020.

Papers submitted/accepted in National & International Journals:

1. S. Mugendhiran, J Shashikanth, Renu Arya and Digvijay Verma. 2021, Asteraceae Plants used in Homeopathic system of Medicine, Cultivated in the Center of Medicinal Plants Research in Homeopathy (CMPRH), Emerald, The Nilgiris, Tamil Nadu. *International Journal of Pharmacognosy & Chinese Medicine*. (Accepted).
2. Binit Dwivedi, Manoj Kumar, Rakhi Mishra, “HPTLC Fingerprinting and Antioxidant Study of *Mangifera Indica* Mother Tincture.” IJRH. (submitted)
3. Submitted the review article entitled “Adjuvant approach using Homeopathic medicines for adverse effects of cancer treatments (Review)” in well-established journal for publication.

Participated in scientific seminars:

1. Dr. J. Shashikanth S.O. participated in National level One Week online short-term course on “Plant Taxonomy” during 03rd – 8th August, 2020, Organized by Department of Botany, Nizam College, Osmania University, Hyderabad, Telangana.
2. Mr. Digvijay Verma, R.O. (Pharmacognosy) attended webinar and delivered a lecture on “Agrohomoepathy: Opportunities and challenges” organized by DDPRCRI(H), Noida on 29th September 2020.
3. Dr. J. Shashikanth, S.O., Dr. Satish Patel, ARO (Pharmacognosy), Dr. Shilpi Singh, SRF participated in DNA Barcoding Webinar entitled "Application of DNA Barcoding in Indian Pharmacopoeia Monographs: Special Emphasis on Herbal and Phytopharmaceutical Drugs" on 4th March 2021 organized by Indian Pharmacopoeia Commission, Ghaziabad.

Book Released by the Council

The Drug Standardization Section of the Council has released four books during World Homoeopathy Day celebrations on 10-11 April, 2021 at Vigyan Bhawan, New Delhi. These books were released during inaugural session in virtual presence of Shripad Yesso Naik, Hon'ble Minister, AYUSH (Independent In-charge), Ministry of AYUSH, Govt. of India.

1. Drugs of Animal Sources Used in Homoeopathy.



Figure 24: Release of book by Padma Shri Dr. V. K. Gupta, during World Homoeopathy Day, 2021

2. A Compendium of Modern Nomenclature of Medicinal Plants commonly used in Homoeopathy.



Figure 25: Release of Book by Shri Roshan Jaggi, Joint Secretary, Ministry of AYUSH on the occasion of World Homoeopathy Day, 2021

3. Agro-techniques of Medicinal Plants Used in Homoeopathy



Figure 26: Release of Book by Sh. Roshan Jaggi, Joint Secretary, Ministry of AYUSH on the occasion of World Homoeopathy Day, 2021.

4. HPTLC Atlas of Medicinal Plant Drugs Used in Homoeopathy.



Figure 27: Release of Book by Shri Pramod Kumar Pathak, Special Secretary, Ministry of AYUSH on the occasion of World Homoeopathy Day, 2021.

HOMOOPATHIC PATHOGENETIC TRIAL (DRUG PROVING)

The Central Council for Research in Homoeopathy (CCRH) since its inception in 1978 has undertaken drug proving studies as a continuing research programme with its focus on proving of fragmentarily proved drugs and indigenous drugs whose standardization studies (physico-chemical and pharmacognostic parameters) have been completed. Recently it has been proposed that homoeopathic dilutions of commonly used allopathic drugs whose toxicological studies have been done and have known side effects should be taken up for drug proving research trials.

The first drug proving protocol was developed by Council in 1987, based on double blind, randomized, multicenter design. Since then, the research protocol for drug proving has been revised taking into consideration positive leads from protocols followed by different international homoeopathic organizations. Till now, the CCRH has methodically proved 121 drugs which include 90 drugs of plant source, nine of animal source, 20 of chemical source, one sarcode and one nosode.

The Drug Proving Research programme is being conducted at the following eight centres of the Council involving homoeopathic medical colleges:

1. Dr. D. P. Rastogi Central Research Institute (H), NOIDA (Uttar Pradesh)
2. National Homoeopathy Research Institute in Mental Health, Kottayam (Kerala)
3. Homoeopathic Drug Research Institute, Lucknow (Uttar Pradesh)
4. Dr. Anjali Chatterjee Regional Research Institute (H), Kolkata (West Bengal)
5. Regional Research Institute (H), Gudivada (Andhra Pradesh)
6. Regional Research Institute (H), Navi Mumbai (Maharashtra)
7. Extension Unit of Regional Research Institute (H), Puri at Dr. A. C. Homoeopathic Medical College & Hospital, Bhubaneswar (Odisha)
8. Central Research Institute (H), Jaipur (Rajasthan)

In the current financial year, the regulatory committees of the Council recommended to include two more units/institutes of the Council as Drug Proving Research Centers and initiate drug proving research trials in association with one homoeopathic medical college near each centre. The two new drug proving centres are:

1. Regional Research Institute of Homoeopathy, Guwahati (Assam)
2. Drug Standardisation Unit of Homoeopathy, Hyderabad (Telangana)

Apart from this, the Council has extended technical support in form of sharing the Drug Proving Research protocol, conducting orientation lectures/workshops, providing coded investigational drug substances to the homoeopathic medical colleges for conducting Homoeopathic Pathogenetic Trials independently at their respective institutes.

RESEARCH STUDIES DONE

In the year 2020-21, countrywide lockdown was declared from 25th March 2020 and the educational institutions did not open throughout the year. Thus, the work related to the ongoing Drug Proving

Research Trials came to a standstill.

During the current financial year, two batches were formed at only one centre and two coded drugs – 141 and 142 were assigned involving 35 provers. Status of the homoeopathic pathogenetic trials for the coded drugs assigned in reporting year and previous years is mentioned in Table 22.

Drug proving trials of eight coded drugs (assigned in 2018-19 and 2019-20) were carried forward in the reporting year and out of these eight, trial of one (01) coded drug was completed. Proving data of *Omeprazole* was approved in 67th meeting of SAB and the details are given in Table 23.

In the 67th meeting of Scientific Advisory Board (SAB), various agendas related to drug proving research programme were discussed. The important recommendations and decisions are mentioned in Table 24.

As per the recommendations of the 64th meeting of SAB, an online workshop on “A pilot study on sensitivity of provers” to sensitize all the Proving Masters/Site Investigators and the Proving Associates of the Colleges where the drug proving trials are being carried out was conducted on 5th February 2021 at 11am – 1pm. The workshop was attended by 30 participants.

Table 22: Status of the drug proving trials during 2020-21

Sl. No.	Drug code	Fresh assignment/ Repeating/ Carried forward	Year of completion	Status
1.	Omeprazole	2017-18 (Carried forward)	2019-20	Compiled proving data was approved in 67 th meeting of SAB in 2020-21
2.	133	2018-19 (Carried forward)	2020-21	Proving data under compilation and will be placed in the next committee meetings
3.	134	2018-19 (Carried forward)	On-going	Concluded at 2 centres and TME pending at 1 centre.
4.	135	2018-19 (Carried forward)	On-going	Concluded at 1 centre and TME pending at 2 centres.
5.	136	2018-19 (Carried forward)	On-going	Concluded at 2 centres and TME pending at 2 centres.
6.	137	2018-19 (Carried forward)	On-going	Concluded at 2 centres and TME pending at 1 centre.
7.	138	2019-20 (Carried forward)	On-going	Ongoing at 3 centres
8.	139	2019-20 (Carried forward)	On-going	Ongoing at 3 centres
9.	142	2019-20 (Carried forward) 2020-21 (Fresh assignment)	On-going	Ongoing at 3 centres Initiated at one centre
10.	141	2020-21 (Fresh assignment)	On-going	Initiated at one centre

Table 23: Details of drug whose proving data have been approved during reporting year

S. No.	Name of the Drug (Drug code)	Name of centres	Number of provers (Male and Female)	Pathogenetic symptoms
1.	<i>Omeprazole (132)</i>	NHRIMH, Kottayam; DDPRCRI (H), Noida; DACRRI (H), Kolkata; DPU, Bhubaneswar	64 (M=19, F=45)	205

Table 24: Important meetings held in reporting year

Meeting	Salient outcomes
67 th Meeting of Scientific Advisory Board, held through Virtual platform on 6 th March and 12 th March 2021.	<ul style="list-style-type: none"> The Board was informed about procurement of -80 degree refrigerator at NOIDA. The Board recommended that -80 degree refrigerator should be procured for two more centers, namely RRI (H), Navi Mumbai and RRI (H), Gudivada. <p>The serum samples may be transferred from the nearby drug proving centers in liquid nitrogen or the medium used so that the samples can be preserved well and used for carrying out immunological/biomarker investigations etc. at a later stage.</p> <ul style="list-style-type: none"> The Board recommended that Drug standardization studies as done for a chemical drug should be carried out and then first safe dose to be worked out following OECD guidelines for Vincristine sulphate. This may be taken up by the Drug Standardisation Section. <p>The Chairman also recommended that the proving data of <i>Catharanthus roseus</i> trial gathered by the Council and the previous published proving data may be considered for publication and may be taken up for clinical verification study.</p> <ul style="list-style-type: none"> The Board noted that a checklist has been suggested instead of the questionnaire based on Naranjo's ADR criteria. It was recommended that the checklist may be finalized and also validated by applying it on proving data of the drugs already compiled and approved.

Publications:

Research article: Homoeopathic Pathogenetic Trial of *Cuprum aceticum*: A multicentric, double-blind, randomized, placebo controlled trial has been submitted to IJRH for publication.

CLINICAL VERIFICATION RESEARCH

Verification of drugs give more reliability and helps us in creating an authentic Materia Medica. Central Council for Research in Homoeopathy has been conducting clinical verification studies of indigenous, rare and fragmentarily proved drugs since its inception in 1975. Some of these drugs were first proved by CCRH. The programme is multicentric, as per open clinical trial design in which patients are enrolled from O.P.D. as and when they come, after confirmation of their inclusion criteria as per a standard. The primary objective of the study is to clinically verify the symptomatology of the drug as observed during proving or as mentioned in other literature. The secondary objective is to ascertain the clinical symptoms that did not appear during the proving but were improved in the patients after its administration, either completely or partially. The homoeopathic medicines are prescribed on the basis of symptom similarity. The individualistic symptoms of each case are evaluated as per the Materia Medica & Repertorial index especially devised for the programme from the proving data.

Clinical Verification of symptomatic data of 118 drugs have been conducted so far. It includes 82 remedies of plant origin, 24 remedies of chemical origin, nine remedies of animal origin, two nosodes and one sarcode.

Thousands of proving symptoms have been verified through multicentric studies, at 09-16 centres, on more than 20,000 subjects in this flagship programme of the Council. Currently, eight more drugs proved by the Council are being verified.

Recent advances in clinical verification programme

The Council has revised its Clinical Verification protocol in 2018 by including scales to assess patient and remedy reactions. The notable inclusions was the 1. MYMOP2 (Measure yourself medical outcome profile) for assessing clinical changes among literate homoeopathic patients who present with a variety of symptoms and clinical conditions. 2. ORIDL(Outcome in Relation to Impact On Daily Living)to measure patients views of the outcome of their medical care by asking about changes and relating this to impact on daily life. 3. HOMOEOPATHIC QUESTIONNAIRE for assessing the important changes caused by illness. 4. Revised Modified Naranjo Criteria as proposed by the HPCUS Clinical Data Working Group (status December 2015) for assessing the causal attribution of changes (i.e., attribution of observed changes to a particular remedy) after homoeopathic prescriptions in conformation with international standards. The classification of result following the above scale will be done if a causal relationship is likely. The clinical verification of eight drugs is ongoing from 2018 as per this improvised protocol.

Ongoing Studies

The ongoing study titled 'A Multicentric Clinical Verification Study on eight drug proved by the Council with Prognostic Factor Research – An open clinical trial' was approved in 61st Scientific Advisory Committee meeting of CCRH and was initiated in October 2018 in 14 study sites. It is an open label clinical verification trial with sample size of 3840 with 34 cases to be enrolled per drug per centre. The primary objective of the study is to clinically verify the proving symptoms of eight drugs (Table 25) who have completed drug proving conducted by the Council. and the secondary objective is to ascertain the clinical symptoms found in response to these respective drugs.

Table 25: Enrollment Status of eight drugs at different centres

Drug list	RRI (H), Puri	CRU (H), Portblair	CVU (H), Patna	HDRI, Lucknow	NHRIMH, Kottayam	DACRRI (H), Kolkata	RRI (H), Gudivada	DPU (H), Bhubaneswar	CRU (H), Agartala	DDPRCRI (H), Noida	RRI (H), Guwahati	RRI (H), Mumbai	RRI (H), Imphal	RRI (H), Shimla	TOTAL
1. <i>Acorus calamus</i>	10	3	4	11	25	6	11	20	11	29	15	1	27	0	173
2. <i>Apium graveolens</i>	6	1	19	3	22	2	2	0	2	7	13	1	10	5	93
3. <i>Brassica oleracia</i>	7	2	20	4	9	5	3	4	1	22	21	1	15	16	130
4. <i>Cochlearia armoracia</i>	6	0	19	0	4	0	0	0	1	5	5	0	5	0	45
5. <i>Datura arborea</i>	3	0	8	3	12	0	1	0	1	11	3	0	9	15	66
6. <i>Datura metel</i>	5	0	18	3	35	9	4	2	5	17	16	2	25	11	152
7. <i>Leucas aspera</i>	7	0	29	0	22	3	1	2	5	9	16	0	24	8	126
8. <i>Withania somnifera</i>	11	2	12	1	23	3	9	4	9	18	14	0	25	11	142
Total	55	8	129	25	152	28	31	32	35	118	103	5	140	66	927

Table 26: Characteristic symptoms of the ongoing 08 drugs that have been clinically verified at least in 02 patients.

Sl. No.	Name of Medicines	Characteristic Symptoms
1.	<i>Acorus calamus</i>	<ul style="list-style-type: none"> • Throbbing pain in frontal region of head > rest. • Pulsating headache in vertex with nausea extending to temples and forehead, <sun exposure, crying, noise. • Desire spicy and sour food, multiple black eruptions on the whole body and back. • Pain in the right side of foot & heel <morning, walking >pressure.
2.	<i>Apium graveolens</i>	<ul style="list-style-type: none"> • Bursting headache in forehead with heaviness of head, along with nausea and dizziness during headache <noise, hard pressure. • Obstructive sensation in the nostrils with itching in both nostrils. • Watery fluent coryza with sneezing & obstruction of right nostril < morning. • Intolerance of cold weather with weakness • Eruption dried up leaving hyperpigmented spots
3.	<i>Brassica oleracea</i>	<ul style="list-style-type: none"> • Bursting pain in frontal head > pressure . • Burning sensation in epigastrium > drinking cold water. • Flatulence & heaviness in abdomen < afternoon. • Semisolid, yellowish, offensive stool. • Scanty menses with backache and lower abdominal pain. • Dysmenorrhoea with vomiting. • Pain in cervical region extending to right shoulder and right arm > pressure.
4.	<i>Cochlearia armoracia</i>	<ul style="list-style-type: none"> • Reddish eruption on upper lip with burning sensation < eating. • Dull pain and sore feeling in mouth with salivation. • Dry cough with hoarseness of voice <morning. • Pain with burning sensation in both soles <covering >cold water washing,. walking. • Soreness and cramping pain in calf muscle > pressure.
5.	<i>Datura arborea</i>	<ul style="list-style-type: none"> • Bursting pain in right temple region <motion of head >closing eyes, pressure. • Nasal blockage alternate nostrils < lying on affected side, nasal obstruction alternate with watery discharge <morning. • Profuse and protracted menses.
6.	<i>Datura metel</i>	<ul style="list-style-type: none"> • Pain in the left knee joints < walking • Hammering pain in right temple; agg. Night, exertion; amel. Open air, after sleep.
7.	<i>Leucas aspera</i>	<ul style="list-style-type: none"> • Reeling of head < walking >rest. • Aching pain in whole head < evening . • Soreness in throat< during swallowing . • Dry cough with sore throat <night. • Aching pain in extremities < evening . • Itching without eruption all over the body, especially over the thighs, palms >rubbing, vertigo.

Sl. No.	Name of Medicines	Characteristic Symptoms
8.	<i>Withania somnifera</i>	<ul style="list-style-type: none"> • Watery coryza with sneezing and bodyache. • Aching of all the joints. • Itching and redness of left eye < morning.

Publications

Books:

The book 'Study of Homoeopathic Medicines through Clinical verification – A New Perspective Volume V' having data on 16 clinically verified drugs have been drafted , vetted by subject experts and under print for publication.

CLINICAL RESEARCH

Clinical research in Homoeopathy helps in generating, validating and consolidating scientific evidences (in terms of safety, efficacy and effectiveness) of homoeopathic medications, procedures and treatment regimes. These researches are useful in prevention, treatment of various diseases, decision making for stake holders and thus help in improving clinical care. The aim is to carry out evidence-based trials based on modern scientific parameters (double blinding; objective assessment criteria, statistical analysis, etc.) without conflicting with the doctrines of Homoeopathy. By taking part in clinical trials, participants not only play a more active role in their own health care, free of cost, but they also can access experimental treatments and help others by contributing to medical research.

During the reporting year, eight clinical research studies continued from previous years and five studies were concluded. Further three new studies were initiated. The screening/follow up of all the studies continued during the reporting year at the Institutes/units. Due to COVID-19 pandemic and lockdown, there was delay in screening and enrollment of patients.

The details of ongoing, concluded and newly initiated studies are as follows:

A. ONGOING STUDIES (08)

1. Management of Rheumatoid Arthritis with individualized Homoeopathy- An observational study.

The study was initiated in 2018 at three centres RRI(H), Gudivada (January 2018), DDPRCRI(H), Noida (June 2018), RRI(H), Mumbai (January 2019) and discontinued at NHRIMH, Kottayam (August 2019) due to non-enrollment of cases. Since inception, 465 cases have been screened and 131 cases have been enrolled. In the reporting period, 32 cases were screened, and 11 cases enrolled. So far, 66 cases have completed the follow up as per protocol. The medicines commonly prescribed are: *Rhus toxicodendron*, *Pulsatilla*, *Staphysagria*, *Causticum*, *Bryonia alba*, *Natrum muriaticum*, *Actaea spicata*, *Medorrhium*.

2. Usefulness of individualized Homoeopathy versus standard allopathic treatment in acute uncomplicated Urinary Tract Infection (UTI): A randomized comparative trial.

The study was initiated on a pilot mode in the year 2018 at DACRRI (H), Kolkata and NHRIMH, Kottayam in 2018 and later at Dr. DPRCRI(H), Noida in 2019. In the reporting year, after the completion of CTRI in July 2020, the trial was initiated. In the trial phase, out of 230 screened cases, 40 cases were enrolled (21 cases under the homoeopathic arm and 19 cases under the allopathic arm). Based on initial observation, most commonly prescribed homoeopathic medicines are: *Natrum muriaticum*, *Pulsatilla*, *Cantharis* and *Mercurius solubiliis*.

3. Effect of Homoeopathic medicines in the management of morbidity associated with grade III and grade IV lower limb lymphoedema due to lymphatic filariasis – A prospective clinical trial.

This study is being conducted at the RRI(H), Puri, since October 2018. Since inception, 178 patients have been screened, 71 enrolled and 18 patients completed follow-up as per protocol. During the reporting year, 36 patients have been screened, 25 have been enrolled. So far, 18 cases have

completed the follow-up. The frequently prescribed medicines are *Rhus toxicodendron*, *Nat muriaticum*, *Lycopodium*, *Silicea*, *Sulphur*.

4. **Management of Adjustment Disorders with homoeopathic intervention- A single arm interventional prospective study.**

The study was initiated in 2019 at NHRIMH, Kottayam, DACRRI(H), Kolkata; RRI(H), Puri; CRU(H), Gangtok; CRU (H), Ranchi; CVU (H), Patna; CRU (H), Siliguri. However, due to non-feasibility of study at CRU(H), Gangtok, it was assigned to HDRI, Lucknow. Since inception, total 257 cases have been screened and 95 cases enrolled. During the reporting year, 201 cases were screened and 76 cases were enrolled. Most commonly prescribed homoeopathic medicines are *Sepia*, *Natrum mur.*, *Sulphur*, *Ignatia* and *Lycopodium*.

5. **Effectiveness of Homoeopathy in children with Intellectual Disability**

The study was initiated in February 2020 at HRID, Chennai wherein the children between 5-18 years of age of both genders diagnosed with borderline intelligence or mild to moderate intellectual disability are being enrolled. Since inception and during the reporting period, 74 cases were screened, 11 were enrolled and are being under follow-up. Most commonly prescribed Homoeopathic medicines are: *Natrium muriaticum*, *Calcarea carb.*, *Phosphorus*, *Argentum nitricum* and *Hyocyamus*.

6. **Prognostic factor assessment of homoeopathic medicines for chronic cough: An exploratory prospective study.**

This multicenter, observational study on chronic cough is being carried out at 10 institutes/ units of the Council since May 2018. Since inception, a total of 2397 cases have been screened, and 857 enrolled. During the reporting year, a total of 902 cases have been screened, and 479 enrolled. Homoeopathic medicines prescribed are: *Arsenicum album*, *Phosphorus*, *Pulsatilla*, *Bryonia alaba*, *Nux vomica*, *Sulphur*. Two manuscripts from preliminary results of pre-trial phase were published in peer-reviewed journals during the reporting year.

7. **Management of Trigeminal Neuralgia with Homoeopathic Intervention as an Add-On to the Standard Treatment – A Double Blind Randomized Controlled Trial.**

The study was initiated at Janakpuri Super Specialty Hospital, New Delhi in February 2020. The aim is to evaluate the effectiveness of homoeopathic treatment as an adjuvant to the standard treatment viz-a-viz the standard treatment alone in trigeminal neuralgia. In the standard treatment group, the conventional treatment along with placebo is being given. In the adjuvant group, individualized homoeopathic medicines, in varied potencies are prescribed additionally. During the reporting period, 163 cases were screened, out of whom 28 cases were enrolled. Out of these, 13 have completed follow-ups.

8. **Double Blind Placebo Controlled Study to Evaluate the Efficacy of Pre-defined Homoeopathic Medicines in the Treatment of Warts**

This double blind placebo controlled randomized trial is being conducted at five centres viz. CRI(H), Jaipur; DDPRCRI(H), Noida, RRI(H), Mumbai and RRI(H), Agartala and DACRRI(H), Kolkata since

September 2018. Since inception, 528 patients have been screened and 199 patients enrolled. During the reporting period, 311 patients have been screened; out of whom 82 cases have been enrolled and 60 cases are under follow-up and 26 cases have completed the follow ups as per the protocol.

B. CONCLUDED STUDIES (05):

1. Evaluation of Homoeopathic treatment in the non-Communicable diseases: A Data Collection Study

The Life style disorder clinics/NCD clinics were set up in the year 2018 and the systematic documentation was done in phased manner to assess the role of homoeopathic medicines in reducing the complaints associated with non-communicable diseases (diabetes mellitus, Hypertension, CKD, Anxiety and Depression). The study was undertaken at: DDPRCRI(H), Noida, NHRIMH(H), Kottayam, RRI(H), Mumbai, RRI(H), Puri, RRI(H), Imphal, HDRI, Lucknow, RRI(H), Gudivada, CRU(H), Port Blair, DSU(H), Hyderabad, CRU(H), Siliguri and CRU(H), Ranchi. Since its inception a total of 2921 patients were enrolled, who were suffering from the, on following disease diabetes, hypertension, COPD, cardiovascular diseases, anxiety, depression, obesity, cancer, and hypothyroidism. The study was concluded in September 2020 due to discontinuation of patients for follow-up in view of COVID-19 pandemic. Data verification is under process.

2. Evaluation of Homoeopathic treatment in the Out Patient Department – A patient reported outcome study.

The patient reported outcome study was initiated in August 2017 with the following objectives: To assess what sort of chronic patients are being treated in OPD of homoeopathic institutes/units and to assess the overall outcomes through patient reported outcome measures and overall quality of life. The study was implemented at institutes/units under CCRH. Since inception of the study data of 12999 OPD patients were captured. Due to COVID-19 pandemic and nationwide lockdown, the study was concluded in September 2020. Data verification is under process.

3. Efficacy of Homoeopathic treatment in Sub-Clinical Hypothyroidism in school going children: A randomized double-blind placebo controlled parallel arm trial

A randomized double blind placebo-controlled parallel arm trial was initiated in June 2015 to assess the efficacy of Homoeopathy in children with Sub-clinical hypothyroidism. The study was conducted at Dr. B.R. Sur Homoeopathic Medical College, Hospital and Research Centre, New Delhi. The objective of the study is to evaluate the efficacy of individualized homoeopathic treatment on TSH level in sub clinical hypothyroidism. Since inception, 2479 children have been screened, out of whom 143 children were enrolled and have completed 18 months' follow-up. The study was concluded in April 2020. Data verification is completed and analysis is under process.

4. Assessment of most frequently used rubrics and medicines in the homeopathic treatment of acute conditions by Indian homoeopathic practitioners / researchers (CCRH) with the aid of Vithoukias Compass (VC).

The scientists of CCRH faces challenges for data recording and assessment of a considerable footfall of patients reporting in its 24 research centres including extension units across India initiated in

November 2019. Use of a Homoeopathy software that can record this data quickly before prescription can solve the problem of huge amount of important clinical data remaining unanalysed. Through Vithoulkas Compass (VC), investigators analyzed their cases; while, in turn, the symptoms/rubrics entered by them for remedy selection are assessed by VC for validation. This study was concluded in December 2020. Since inception, 2192 cases were enrolled under this project and 2167 cases, out of these, have consistent entries, with regular follow ups. The most frequently prescribed drugs are: *Sulphur*, *Rhus toxicodendron*, *Natrum muriaticum*, *Arsenic album*, *Pulsatilla*. The manuscript is under preparation.

5. **A Multicentric observational study to evaluate predefined homoeopathic medicines in treatment of Warts.**

An observational study on warts was undertaken with the objective to evaluate response of nine pre-defined homoeopathic medicines and to validate the symptoms. The pre-defined homoeopathic medicines used were: *Antimonium crudum*, *Ruta graveolens*, *Natrum muriaticum*, *Thuja occidentalis*, *Acidum nitricum*, *Sulphur*, *Causticum*, *Calcarea carbonicum* and *Dulcamara*. The study was initiated in 2018 at six centres, viz. Dr. Anjali Chatterjee Regional Research Institute (H), Kolkata, Regional Research Institute(H), Gudivada, Regional Research Institute (H), Agartala, National Homoeopathy Research Institute for Mental Health, Kottayam, Regional Research Institute(H), Puri and Regional Research Institute(H), Mumbai. A total of 491 patients were screened and 228 patients enrolled. The study was concluded in July 2020. The medicines found useful are: *Dulcamara*, *Thuja occidentalis*, *Sulphur*, *Natrum muriaticum*, *Causticum*, *Carcinocin*, *Silicea*. The manuscript is under preparation.

C. **STUDIES NEWLY INITIATED (03)**

1. **Phase II study to assess safety and efficacy of using potentized (tautopathy) form of chemotherapy at Apollo Hospital, Chennai**

This is a single centre, explorative, prospective, observational study, with the primary objective to assess the reduction in the pre-identified side effects of non-potentised chemotherapy drugs cisplatin and docetaxel on cancer patients through CTCAE version 3 and Naranjo ADR Probability Scale. Patients of 18 years or above in age, any gender getting chemotherapy with cisplatin and/or docetaxel are being included in this study. The study is registered under CTRI: CTRI/2020/05/025045 and was initiated in January 2021. During the reporting year, a total three cases were screened and all three cases were enrolled.

2. **Management of polycystic ovarian syndrome with homoeopathic intervention versus standard conventional treatment**

The study titled “Management of polycystic ovarian syndrome with homoeopathic intervention versus standard conventional treatment –A non-randomised comparative study” is being carried out at DSU, Hyderabad (since December 2020) and DDPRCRI(H), Noida. The primary objective of the study is to evaluate the efficacy of homoeopathic intervention as compared with standard conventional treatment in PCOS in establishing the menstrual regularity with either ultrasonological improvement of PCO or improvement in acne. Female aged 18 to 36 years, with Oligomenorrhoea/amenorrhoea (two years after menarche), Ultrasound findings of Polycystic ovaries, Clinical evidence of acne (acne global severity scale score 1 and above) and giving written

informed consent shall be included. One arm will be homoeopathic intervention and standard conventional treatment (comparator) and the other arm is standard conventional treatment alone. The study is registered at Clinical Trial Registry-India. (CTRI): CTRI/2020/10/028282. The duration of study is for two years. The study is ongoing. So far, 47 cases have been screened and 15 cases enrolled.

3. **An Open Label, Interventional, Prospective, Pilot Study to Evaluate Response to Individualized Homoeopathic Treatment in Case of Oral Lichen Planus**

An open label, interventional, prospective, pilot study to evaluate response to individualized homoeopathic treatment in case of Oral Lichen Planus (OLP) was initiated at Cantonment General Hospital, Delhi Cantonment, New Delhi in October 2020 with the following objectives:

Primarily to study the utility of Homoeopathic medicines in treating Oral Lichen Planus using established scales like VAS scale and Escudier Disease Severity Score and secondarily to assess the overall general outcome and evaluate changes in oral health related Quality of Life (QoL) of the patient through OHIP- 14, MYMOP2 and ORIDL score. Patients of both sexes above 18 years of age diagnosed with OPL clinically and histopathologically were enrolled in the study. Patients on any other mode of treatment; and the patients suffering from life threatening illness or congenital defect, malignancy eps. oral cancer or the patients not willing to give informed consent were excluded from the study. The study is registered at Clinical Trial Registry-India (CTRI): CTRI/2020/08/027217. The individualized homoeopathic medicines based on totality of symptom as per the principles of Homoeopathy are given and the patients are followed up for a period of 12 months. Since inception, total seven cases have been screened and five cases enrolled.

Other activities

1. **Effectiveness of Individualized homoeopathic treatment in Children with Attention Deficit Hyperactive Disorder (ADHD)– Pragmatic single-blind Randomised Control Trial**

This pragmatic single-blind randomized control trial on attention deficit hyperactivity disorder were wherein one group will receive homoeopathic treatment along with standard non-pharmacological care and the control group will receive only standard non-pharmacological care. Non-pharmacological care includes occupational therapy, speech therapy, clinical psychological assessment, behavioural modification to be provided by the consultant/ clinical psychologist. The primary objective of the study is to evaluate response to homoeopathic treatment in children with ADHD i.e., symptom reduction when compared to the control group. Secondary objectives are to evaluate response to homoeopathic treatment in ADHD with respect to sleep patterns and family/school functioning; to evaluate the relation between ADHD development and pregnancy ailments and to evaluate the incidence of common co-morbid conditions with ADHD. During the reporting year, pre-trial preparation included approval by the Central Ethical Committee during the 24th meeting held on 25th August 2020. The approved protocol was shared with the site investigator for taking up at the HRID, Chennai and clinical psychologist under the study. A total of 25 cases (20 males and five females) were enrolled as per the pre- trial protocol. The remedies commonly used in the trial are *Natrum muriaticum*, *Phosphorus*, *Nux vomica* and *Baryta carbonica*.

RESEARCH ON EPIDEMIC DISEASES

The entire mankind across the globe is suffering from COVID-19 outbreak and searching for definite vaccine or treatment for it. Looking at the infectivity and severity of COVID-19, Ministry of AYUSH (Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy), Government of India recommended use of homoeopathic medicine '*Arsenic album 30C*', Ayurveda preparations such as 'Kadha' (Ginger, curcumin, cloves, honey, fennel seeds, cumin seeds) and lukewarm water as an immunity booster via public health advisory.

During reporting year, after publication of public health advisory, Council has undertaken two prophylactic studies using *Arsenic album 30C* as immune booster from May 2020 to August 2020. Data analysis in containment zones of COVID-19 showed positive effect of *Arsenic album 30C* in prevention of COVID-19. For add on homoeopathy treatment of COVID-19, five clinical trials were undertaken with various allopathy institutes of repute all over India. These add on Homoeopathy studies showed earlier recovery of COVID-19 patients by 2 days and a smaller number of deaths reported in add on Homoeopathy group.

CCRH has also undertaken preclinical studies to understand the role of homoeopathic medicines in COVID-19 prevention and treatment.

AWARENESS AND RESEARCH ACTIVITIES

Guidelines for Homoeopathy practitioners for prophylaxis and symptomatic management of COVID-19 patients in home isolation

- **Prophylactic measures for healthy population**

The recommended dose is – *Arsenicum album* in 30C potency, 4 globules of size 30, once daily in morning, preferably on empty stomach for three days and to be repeated in the same manner after three weeks.

- **Asymptomatic COVID-19 positive individuals**

Arsenicum album 30C, 4 globules twice daily for seven days.

- **Mild COVID-19 positive cases**

Indicated medicine as per totality of symptoms is to be given.

Commonly indicated medicines according to results of clinical studies are: *Aconitum napellus*, *Arsenicum album*, *Belladonna*, *Bryonia alba*, *Eupatorium perfoliatum.*, *Ferrum phosphoricum.*, *Gelsemium*, *Phosphorus*, *Rhus toxicodendron*, etc. The dose and repetition of the medicine is to be determined by the treating physician as per homoeopathic principles.

- **Asymptomatic immediate contacts of infected persons**

Arsenicum album 30C, 4 globules once daily for seven days.

ONGOING STUDIES

1. A comparative cohort study to evaluate effectiveness of *Influenzinum* in prevention of Influenza like Illness (ILI)

The comparative cohort study was initiated in January 2020 in four JJ colonies of New Delhi. The study was approved by the Ethical Committee Chairman and ratified in 64th Scientific Advisory Board meeting dated 28.01.2020. Total 36 health workers along with four supervisors were recruited for distribution of medicines and data collection. In medicine cohort, 23000 population was enrolled and administered *Influenzinum* 30 once in week for 10 weeks and in 6000 population only Information, Education and Communication was given for prevention of influenza like illness.



Figure 28: Record checking by doctors at study site

The study was extended for one year till 30th April 2021 keeping in view the rising incidence of COVID-19 & ILI during pandemic. Total 4109 (19.5%) fever cases reported in medicine cohort and 2780 (46.3%) fever cases reported in non-intervention cohort.

2. To assess the effectiveness of Homoeopathy in management of HIV through routine treatment data collection

Council has signed MoU with JSPS Homoeopathy Medical College, Hyderabad and undertaken data collection project on Homoeopathy management of HIV cases. Data collection was initiated in December 2018. In reporting year, (April 2020 to March 2021), total 5160 cases of HIV were registered and provided Homoeopathy consultation at JSPS HIV clinic, which included 415 new cases and 4745 old cases. JSPS college HIV unit was closed from March 2020 to October 2020 due to COVID-19 lockdown. Establishment of HIV clinical laboratory is in progress.

CONCLUDED STUDIES

1. Effectiveness of Homoeopathic intervention vis-à-vis health awareness in preventing dengue, chikungunya & influenza like illness fever during outbreak - comparative cohort study 2019

Dengue, Chikungunya, and influenza like illness preventive study was initiated in July 2019. Total 31 health workers at 03 JJ colonies were recruited for medicine distribution and data collection. Total 16514 population was enrolled in medicine cohort and 6448 population in IEC cohort. 10.9% of fever cases reported in medicine and 18.4% fever cases reported in IEC cohort. Study was concluded in June 2020. Data compilation and verification is ongoing.

COVID-19 STUDIES

Council had undertaken total 14 studies during the reporting year in prevention and treatment of COVID-19. Out of these, 13 studies have been concluded.

CONCLUDED STUDIES

1. Effectiveness of *Arsenicum album* 30C in Prevention of COVID-19 in Individuals Residing in Hotspots of Red Zones in Delhi- A Prospective Cohort Study

Total 10180 population from 11 containment zones of Delhi was enrolled in the study, 6590 participants in intervention cohort and 3590 in non-intervention cohort. The population has been followed up till 30th August 2020. The interim analysis shows that the medicine was able to protect about 76% population from COVID/COVID like illness compared to control group, over a period of nine weeks. Only 0.50% developed COVID like illness as per standard definition of COVID-19 in the intervention group and 3.03% in the control group. Manuscript has been submitted to journal for publication.



Figure 29: Doctors team at containment zones

2. Effectiveness of *Arsenicum album* 30C in Prevention of COVID-19 in Individuals Residing in Hot Spots of Red Zones- A Multicentric, Randomized, Cluster Level, Controlled Trial

Total 32,198 individuals were enrolled in the study, which include 22703 in intervention group and 9495 in control group. The study was conducted in the containment areas of Delhi, Chennai, Mumbai, Hyderabad, Kolkata, Surat and Machilipatnam. The interim analysis shows that the medicine was able to protect about 81% population from COVID/COVID like illness compared to control group over a period of 3 weeks. 0.15% of study population had COVID like illness (As per standard definition of COVID-19) in the intervention group and 0.70% in the control group. Manuscript has been submitted to a journal for publication.

3. Homoeopathy as an adjuvant to standard treatment protocol in management of corona virus infection- a randomized, placebo controlled, open label study

The study was undertaken in collaboration with an NGO Prana. The study was conducted at Ruby Hall Clinic, KEM hospital and YCM hospital in Pune. Total 300 patients were enrolled in the study. Analysis of the study reflects significant decrease in COVID-19 deaths in add on homoeopathy group as 1.33% patients died in add-on homoeopathy group compared to 8% COVID-19 deaths reported in only standard care group. Study is concluded and data analysis is in progress.

4. Effect of adjuvant Homoeopathy with standard treatment protocol in management of COVID-19: a randomized, open label, placebo controlled, parallel group study

Study was initiated at F. H. Medical College, Agra on 01.05.2020. Total 49 cases were enrolled in the study, but required sample size could not be achieved as more cases were not available in the hospital. Hence, study was discontinued.

5. Effectiveness of individualized Homoeopathy as add on to standard treatment of COVID-19 - a randomized, parallel arm, single blind, placebo, controlled study

The study was undertaken in collaboration with Chiryu Hospital, Bhopal and Govt. Homoeopathic

Medical College and Hospital, Bhopal. The study was concluded in October 2020. A total of 300 patients were enrolled in the study. Analysis shows that there is earlier resolution of symptoms in add on Homoeopathy group by two days, compared to standard care group. Manuscript has been submitted to a journal for publication.

6. Homoeopathy as adjuvant to standard treatment protocol in management of coronavirus infection- a randomized, placebo controlled, open label study.

This study was conducted from October – December 2020 in AIIMS, Jhajjar, with the aim to evaluate the effect of homoeopathic treatment when given as an adjuvant in moderate and severe cases of COVID-19. Primary outcome was identified as virus clearance time (in days) through RT-PCR for COVID-19. Secondary outcomes were change in score of Clinical Ordinal Outcomes Scale (COOS) of WHO and patient- oriented Measure Yourself Medical Outcome Profile (MYMOP) scale and change in laboratory parameters. 556 patients were screened and 150 were enrolled in the study. This study produced statistically significant evidence in favor of using Homoeopathy as an add-on treatment for moderate and severe COVID-19 patients. *Veratrum viride*, *Arsenic album* and *Bryonia alba* were among the most used homoeopathic medicines in the study. Manuscript has been submitted to a journal for publication.

7. Comparative Effectiveness of Pre-Identified Homoeopathic Medicines in Asymptomatic COVID-19 Individuals Receiving Standard Treatment Protocol–An Open Label, Randomised, Placebo Controlled Trial

This pilot study was conducted in collaboration with GHMC, Bhopal. Two hundred patients were enrolled in 4 groups and concluded in November 2020. The Kaplan Meir test found early conversion of RTPCR from positive to negative with homoeopathic medicine *Arsenicum album* 30C along with standard care (10.6 ± SE 0.5 days; 95%CI 8.2 to 11.7 days), *Camphora* 1M (11.1 ± SE 0.5 days; 95% CI 10.0 to 12.2 9), *Bryonia* (11 days ± SE 0.5 days 95%CI 10.0 to 11.9 days), compared to placebo along with standard care (11.7 ± SE 0.5 days ; 95% CI 10.6 to 12.7 days) in asymptomatic COVID-19 individuals, but was statistically insignificant. Manuscript has been submitted to a journal for publication.

8. Evaluation of Adjunct Homoeopathy treatment in COVID-19 hospitalised patients in Gujarat State Dedicated COVID Hospitals: A multicentric, single-arm retrospective study

The objective is to evaluate role of Homoeopathy in the clinical course of disease by retrospectively analysing the data collected during the treatment of COVID-19 patients with adjuvant Homoeopathy along with standard recommended treatment protocol of the Gujarat State government dedicated COVID hospitals (DCH). The outcome measure was the time to clinical improvement of symptoms, worsening of symptoms, recovery/discharge or death in hospitalized COVID-19 patients, response in patients with co-morbidities, the requirement of Ventilator support, duration of homoeopathic medicines taken and most indicated homoeopathic medicines. Data of 6868 cases were received from June 2020 to December 2020, out of which 4287 cases were excluded due to missing and incomplete information and retrospective analysis was done of 2581 cases after data cleaning. The initial analysis shows the clinical recovery time after adjuvant homoeopathy along with standard recommended treatment was 5 days (IQR: 3-7). At day 7, following start of adjuvant homoeopathic medicine, 79.9% (2061/2581) patients were discharged out of which 20.3% even had any one comorbidity. The data highlighted that adjuvant

Homoeopathy might have potential in an early relief of clinical symptoms, and less progression into severity in risk group of elderly with co-morbidities. Analysis of data and manuscript preparation are in progress.

9. Real time effect of *Arsenicum album* 30C in prevention of COVID-19: a mass level Pan India observational study

Across India approx.100 colleges enthusiastically distributed the declared COVID-19 preventive homoeopathic medicine by the Ministry of AYUSH, Govt. of India to almost 1.71 cr. people (Feb to Dec,2020). With objective to measure the incidence of COVID-19 among persons who consumed the preventive was undertaken to observe the protective effect of *Ars. album* 30, CCRH had undertaken a retrospective analysis from data received from 50 Homoeopathic Medical Colleges. The study titled "Homoeopathic medicine *Arsenicum album* in COVID-19 –a retrospective analysis from mass level data" also assessed the effect of risk factors on the incidence of disease; clinical presentation of the COVID-19 population along with the duration of suffering. Data of 669726 individuals (0.67 million) who met study criteria was subjected to analysis and incidence of COVID-19 in the population cohort was found to be 12.9 per 10000-person weeks. Also, a statistically significant decreasing trend of COVID-19 incidence was seen in the population cohort over time. Manuscript has been submitted to a journal for publication.

10. Association Between Prophylactic AYUSH interventions and Disease Outcome in COVID-19 Positive Patients: A Retrospective Cohort Study

The study was undertaken with objective to observe the level of awareness and usage of AYUSH prophylaxis in recovered COVID-19 positive patients. Also, to compare in recovered COVID-19 positive patients stratified by a history of intake of AYUSH prophylaxis: Clinical profile/outcome, time to recovery, duration of hospital stay, severity of disease in high-risk persons, post recovery residual complaints, health related quality of life. Information from 5000 COVID-19 recovered persons was collected through telephonic or through personal interactions. Collated data are under verification and analysis.

11. Mass Prophylaxis against COVID- 19 using Homoeopathic Medicine *Arsenicum album* 30C to the inmates, staff, and family members of the Delhi Prison Complexes at Tihar, Mandoli and Rohini

A prospective field level study was conducted at the Delhi prison complexes of Tihar, Rohini and Mandoli by distributing the homoeopathic prophylactic medicine *Arsenicum album* 30C to the inmates, jail staff and their family, in three schedules from 1st June 2020 to 10th September 2020. The cohorts were followed up on weekly basis for development of any COVID positivity or COVID like symptoms to understand the possible role of *Arsenicum album* 30C in mitigating the spread of COVID-19 infections in the vulnerable prison population of Delhi.

Out of 24,215 inmates who have been distributed *Arsenicum album* 30C, 31(0.22%), 17(0.12%) respectively, in three prisons and nil tested COVID positive and 1041(7.54%), 1421(10.35%) and 524(3.56%) recorded COVID like symptoms respectively during the three schedules of distribution and follow-ups. From amongst the prison staff population of 3654 who have taken the intervention, 05 (0.13%) tested COVID positive and 08 (0.21%) developed COVID like symptoms at the end of follow-ups. The COVID positivity and incidence of COVID like symptoms (except in Phase II) showed

a progressively declining trend amongst the inmates in the three phases when compared to the incidences in the UT of Delhi during the study period.

12. Post -prophylaxis analysis of impact of *Arsenic album* 30 in frontline workers (Maharashtra Police Personnel)

The study aimed to analyse the data of police personnel who received *Arsenic album* 30 as prophylactic medicine for COVID-19, recorded on a predesigned follow up form. Amongst the data of 8677 police personnel who received the preventive, an analysis has been taken up for police personnel posted in containment zone keeping in view their chances of getting infected were higher as compared to police personnel posted in other zones. Out of 1870 police personnel posted in the containment zone, 1108 got themselves tested for COVID-19 and 283 became positive (25.5%). Data analysis and manuscript drafting are in progress.

13. Impact and management of COVID-19 pandemic on patients with non-communicable disease: A cross sectional study at AYUSH LSD Clinics of Krishna and Darjeeling District

To determine the impact of COVID-19 in managing their conditions during the pandemic, their current awareness of COVID-19, perception of the seriousness of its threat, level of worry and concern related to contracting the virus; whether it was affecting their daily routine or existing plans, management of chronic condition; and if affected with COVID-19, how they have managed. A total of 499 participants were surveyed. Manuscript was submitted to a journal.

ONGOING STUDY

1. Single blind, randomised, placebo-controlled Trial to compare efficacy of Standard of care alone and in combination with homoeopathic treatment of COVID-19 patients with moderate to severe Intensity, St. George Hospital, Mumbai

This study was initiated in January 2021 with the primary objective to compare time required for weaning of oxygen support in moderate or severe category of COVID-19 patients receiving adjuvant homoeopathic intervention, with those receiving conventional treatment alone as per institutional management protocol (IMP). Up till 31st March 2021, 77 cases were enrolled in the study, while 121 were screened. The interim result was encouraging and in favour of using Homoeopathy as adjuvant for faster weaning of oxygen support.

FUNDAMENTAL & COLLABORATIVE RESEARCH

In the past few decades, homoeopathic system of medicine has been able to spark scientific minds to explore the plausibility, action, and nature of this system especially on basic and fundamental aspects. Since 2005 the Council has been collaborating with various institutes of excellence to utilize the potential of the best of the brains, in order to yield maximum results. The main aim of the collaborative studies of the Council is to conduct evidence-based trials based on modern scientific parameters, inter-disciplinary research studies and to validate the efficacy/concepts of Homoeopathy on scientific parameters without conflicting with the doctrines of Homoeopathy.

CCRH has now taken a vital step to promote scientists for undertaking fundamental and basic research in collaboration with the Council. They are invited to submit proposal on pre-defined priority areas through expression of interest. Scientists are now keen to undertake experiments to explore the basic nature and action of homoeopathic medicines, which is evident from the growing number of publications every year from various countries. Council has concluded 51 collaborative studies and made 62 publications in reputed journals till 2021.

During the reporting year 2020-21, eight studies were initiated, 11 studies are ongoing out of which three studies were concluded with five publications. The screening/follow up of all the studies continued during the reporting year at the Institutes.

A brief account of the work done on fundamental & collaborative studies during year 2020-21 is as follows:

INITIATED STUDIES (08)

1. Mechanism of anti-malarial and anti-leishmanial actions of the homoeopathic formulation of nanocurcumin in a susceptible host, KIIT University, Bhubaneswar; September 2020.
2. Development of Nosodes of SARS-CoV-2 virus antigens for prevention and management of COVID-19, DACRRI(H), Kolkata; December, 2020.
3. Development of Homeopathic Nosode from COVID-19, its Evaluation and Efficacy against COVID-19 infections in Humans. AIIMS, Jhajjar; December, 2020.
4. Clinical Evaluation of some Homoeopathic Medicine Against Mites induced Dermatitis in Dogs. DUVASU, Mathura; January, 2021.
5. Identification of Homoeopathic formulations with Anti-Cervical Cancer and Anti-HPV Activity: Phase-1 in vitro Study. University of Delhi, (North Campus), Delhi; January, 2021.
6. Testing and measurement of Homeopathic medicine Potency using their Colligative properties. CIIRC, Bengaluru; March, 2021.
7. Potential of Homoeopathic Drugs against Neonatal Calf Diarrhoea. IVRI, Izatnagar, Bareilly, U.P.; March, 2021.
8. Investigation of the anti-neuropathic efficacy of Homeopathic Dilutions of Toxicodendron pubescens using preclinical models, DPSRU, Delhi; January, 2021.

CONCLUDED STUDIES (03)

1. Evaluation of antimalarial efficacy of some homeopathic drugs against Plasmodium falciparum in vitro and against Plasmodium berghei in vivo. Panjab University, Chandigarh.

2. To evaluate the anti-leishmanial potential of some homoeopathic drugs in experimental visceral leishmaniasis. Panjab University, Chandigarh.
3. New Scientific Method of Potentization of homoeopathic medicines. IIT Bombay.

ONGOING (11)

1. Physicochemical studies of homoeopathic drug formulations by using volumetric, acoustic, viscometric, optical and Conductometric measurements. Dyal Singh College, New Delhi; Oct. 2017.
2. Efficacy of Homoeopathic medicines (30C) on Propylthiouracil (PTU) induced hypothyroid rat. Utkal University, Bhubaneswar; Feb. 2019.
3. Effect of homoeopathic medicines on dengue virus infection on mosquito cell line and in suckling mice. DACRRI (H), Kolkata; Jan. 2015.
4. Deciphering the osteogenic effect of *Symphytum officinale* using human bone marrow derived mesenchymal stem cells in vitro and rodent model. AIIMS, New Delhi; Sept. 2019.
5. Pharmacological screening of Homoeopathic drugs used in rheumatoid arthritis. AIIMS, New Delhi; Sept. 2019.
6. To study the impact of homeopathic medicines on key genes and proteins controlling cell proliferation and cell death in Hormone Dependent and Independent Breast and Prostate Cancer. Amity University, Noida; Aug. 2019.
7. Role of Silicea in cancer regression: A mechanistic study. BOSE Institute, Kolkata; June 2019.
8. Effect of homoeopathic medicines on chikungunya virus (CHIKV) induced pathogenicity in suckling mice. DACRRI(H), Kolkata; Sept. 2019.
9. Development of Japanese Encephalitis virus Nosode and to study its Efficacy in Animal Model. DACRRI(H), Kolkata; July. 2019.
10. Role of *Crotalus horridus* and phosphorus on antibody dependent enhancement (ADE) of Dengue virus infection leading to complications. DACRRI(H), Kolkata; Sept. 2019.
11. Agro-homoeopathy: Potential of Homeopathy as a tool to manage phytopathogen/nematode complex for a sustainable agriculture. Acharya N G Ranga Agricultural University (ANGRAU), Hyderabad; Jan. 2019.

ANNUAL PROGRESS OF RESEARCH WORK CARRIED OUT IN THE VIROLOGY LABORATORY OF DACRRI(H), KOLKATA**ONGOING PROJECTS**

1. Development of Japanese Encephalitis virus nosode and to study its efficacy in animal model
2. Role of *Crotalus horridus* and *Phosphorus* on antibody dependant enhancement ADE of dengue virus infection leading to complications.
3. Effect of homoeopathic medicines on Chikungunya virus (CHIKV) induced pathogenicity in suckling mice.
4. Effect of homoeopathic medicines on dengue virus infection on mosquito cell line and in suckling mice.
5. Development of Nosodes of SARS-CoV-2 virus antigens for prevention and cure from COVID-19

1. Development of Japanese Encephalitis virus nosode and to study its efficacy in animal model (July 2019)

To increase the viral pool for nosode preparation, passaging of Japanese encephalitis virus (JEV) Nakayama strain upto 5th time (P5) was done in 1-2 day old BALB/c suckling mice brain by intracerebral (I/C) challenge with 5 µl of reconstituted JE virus stock with neurosyringe (Hamilton, 32G). For JEV prototype strain, passaging was done upto 6th time (P6) among the BALB/c suckling mice. A total of 198 mice were utilized for this purpose as per approval from institutional animal ethical committee. In-house breeding was done at the animal house of the Institute to achieve the required number of suckling mice. After passaging, viral load was determined from the infected suckling mice brain by extraction of total RNA by Trizol method followed by real time PCR kit (Geno Sen's) on CFX96 Real Time System (Bio-Rad, USA) following manufacturer's instruction.

Maximum viral load achieved after in-vivo passaging in suckling mice brain:

Sl. No.	Passage	Viral load /gm
1.	JEV Nakayama : P-5 (Suckling mice brain)	11.57 log, (3.75x10 ¹¹)
2.	JEV Prototype : P6 (Suckling mice brain)	9.74 log, (5.54x10 ⁹)



Fig. A

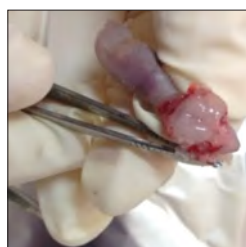


Fig. B



Fig. C



Fig. D

Figure 30: Representative photographs of mice showing

- Sign of sickness after I/C inoculation of live JEV. Hind limb paralyses, loss of righting reflex, hunch back posture, absence of milk spot etc. were observed 48hr. post inoculation of the virus.
- Collection of mice brain after death/ euthanasia (48hr. Post inoculation).
- Healthy mice showing presence of milk spot, pinkish body colour.
- Day 1 old healthy (Control) litter.

The viral suspension after quantification of copy number was inactivated with 30% H₂O₂ followed by detection of microbial contamination via microscopic observation by Gram staining and culture in nutrient agar. No such contaminant was detected. These inactivated suspensions were stored at -80°C for mother tincture preparation of nosode.

2. Role of *Crotalus horridus* and *Phosphorous* on antibody dependent enhancement (ADE) of Dengue Virus infection leading to complications, Sept. 2019

To increase the viral titre, DENV 2 was collected from patient sera with proper consent and propagated on C6/36 cell line. The stock viral conc. was 1.5×10⁸ copies/ml as determined by Real time RT-PCR. In general, after 5days, the infected cells were freeze thawed for 3 times and filtered with 0.22µm syringe filter and kept in -80°C supplemented with 23% FBS. Both DENV1 and 2 were passaged in C6/36 cell line.

Viral copy number after in-vitro passaging:

	DENV 1	DENV 2
Internal passaging no. 1	8.16×10 ⁸ Copies/ml	8.04×10 ⁸ Copies/ml
Internal passaging no. 2	7.79×10 ⁸ Copies/ml	5.49×10 ⁸ Copies/ml
Internal passaging no. 3	0	1.41×10 ⁹ Copies/ml
Internal passaging no. 4	0	9.64×10 ⁸ Copies/ml

THP1-1 and Jurkat E6.1 cell lines were procured from National Centre For Cell Science, Pune on 08th October, 2020. Standardization of Co-culture procedure of THP1 and Jurkat E6.1 cell line was done.

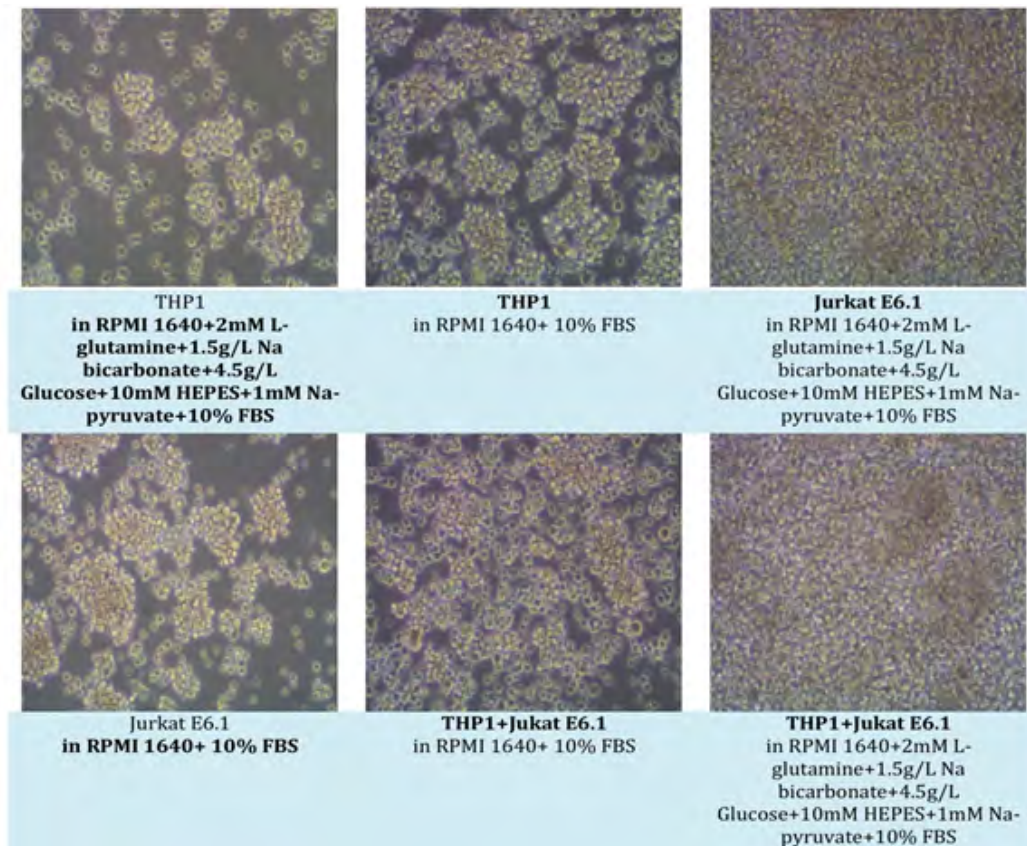


Figure 31

Treatment of DENV 2 antisera (Patient sample) with DENV 1 virus in co-cultured cell line:

DENV 2 antisera, collected from NS1 positive patient and filter sterilised. After sterilisation, it was applied to THP 1 cell line co cultured with Jurkat E6.1 at different dilutions followed by transfection with DENV 1 virus.

Publications:

Anirban Kool, Mousumi Chakravarty, Urmita Chakraborty, Moonmoon Sinha, Suraia Parveen & Dr. Satadal Das (2021): Molecular Pathogenesis Of Antibody-Dependent Enhancement In Dengue Virus Infection. *Int Aca. Res. J Int. Med. Pub. Hlth.* 2(2)32-39

3. Effect of Homoeopathic Medicines on Chikungunya Virus (CHIKV) Induced Pathogenicity in Suckling Mice, Sept. 2019

Procurement of Chikungunya Virus: Collected from Dr. Soma Chattopadhyay, Scientist-E, Institute of Life Science, Bhubaneswar on 11th February, 2020. RNA extraction was done using Qiagen QiaAMP viral RNA isolation kit and quantitative RT PCR was performed using Geno Sen's® Chikungunya RG quantitative kit and the viral load was found 4.2×10⁸ copies/ml.

Passaging of Chikungunya Virus: The virus was adapted and propagated in 3 different cell line

Viral load in Vero cell line	1.71×10 ⁹ copies/ml
Viral load in C6/36 cell line	8.5×10 ⁸ copies/ml
Viral load in BHK-21 cell line	8.57×10 ⁹ copies /ml

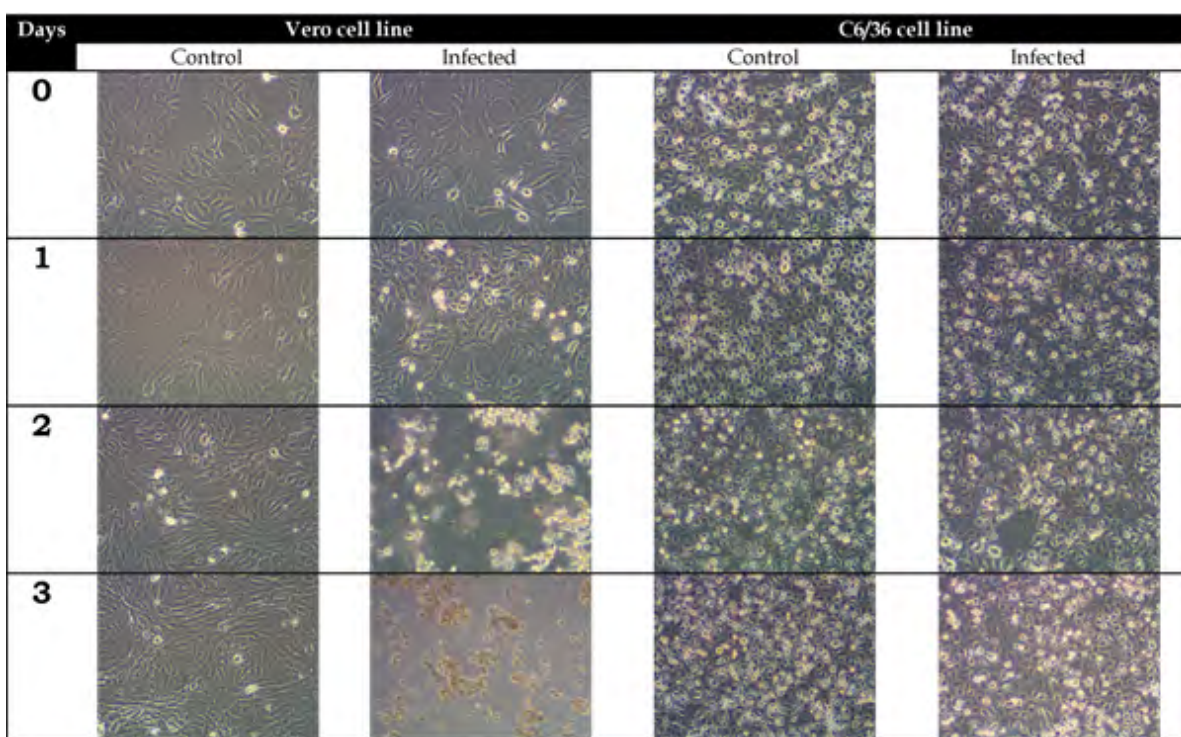


Figure 32

MTT assay was done using 4 homoeopathic medicine to determine cell cytotoxicity (using EZcount™ MTT Cell Assay Kit, HiMedia): *Bryonia 6C*, *Rhus toxicodendron 6C*, *Polyporus pinicola 6C*, *Eupatorium perfoliatum 6C*.

Pre and Post treatment of homoeopathic medicine: BHK21 cell line was infected with chikungunya virus and treated with homoeopathic medicines to determine curative and preventive role of those medicines. The study is under progress.

Publication: Das Mousumi, Chakraborty Urmita, Sinha Moonmoon, & Kool Anirban, Parveen Suraia, Das Satadal. (2021). Newer Conventional and Nonconventional Treatment Strategy of Chikungunya Fever along with a Review of its Virology and Epidemiology. *Acta Scientific Pharmaceutical Sciences*. 5. 13-23. 10.31080/ASPS.2021.05.0675.

4. Effect of homoeopathic medicines on dengue virus infection on mosquito cell line and in suckling mice, Jan 2015

Passaging of DENV in suckling mice (BALB/c) as approved by IAEC. Determination of the effect of homoeopathic medicines *Eupatorium perfoliatum*, *Crotalus horridus*, *Phosphorus*, and *Ipecacuanha* 6C on DENV infected human PBMC cell. Determination of CC₅₀ dose of *Eupatorium perfoliatum*, *Crotalus horridus*, *Phosphorus* and *Ipecacuanha* 6C on vero cell line. The role of homoeopathic medicines *E. perfoliatum*, *Crotalus horridus*, *Ipecacuanha* and *Phosphorus* 6C and 30C against dengue virus pathogenesis in Vero cell line has been studied by estimation of viral load using Real-Time PCR. Effect of these homoeopathic medicines were studied in DENV infected mosquito midgut cell (primary culture).

5. Development of Nosodes of SARS-CoV-2 virus antigens for prevention and cure from COVID-19. December 2020

Submission of Form C1 to the Review Committee on Genetic Manipulation was done for approval to conduct the study. The committee has approved the study. The fund for the project was approved in November 2020 and was received on December 2020. Initiation of procurement of necessary materials was started in December 2020. Procurement of recombinant SARS CoV-2 S and N antigen completed. Preparation of SOP and standardization of methods for the preparation of nosode have been done.

Preparation of mother tincture of S antigen has been completed. Physical characteristic of the mother tincture was studied. In-house preparation of nosode with S antigen up-to 200C has been done and storage of the nosode for further use.

PUBLICATIONS (05)

- 1. Dark Classics in Chemical Neuroscience: An Evidence-Based Systematic Review of *Belladonna*. Maurya VK, Kumar S, Kabir R, Shrivastava G, Shanker K, Nayak D, Khurana A, Manchanda RK, Gadugu S, Kar SK, Verma AK and Saxena SK. ACS Chemical Neuroscience. December 2 2020, Volume 11, issue 23, pages 3849-3992. Available from: <https://doi.org/10.1021/acscchemneuro.0c00413> (Published on 14 July 2020).**

Abstract:

Belladonna has diverse pharmacotherapeutic properties with a shadowy history of beauty, life, and death. Alkaloids present in Belladonna have anti-inflammatory, anticholinergic, antispasmodic, mydriatic, analgesic, anticonvulsant, and antimicrobial activities, which makes it widely applicable for the treatment of various diseases. However, because of its associated toxicity, the medicinal use of Belladonna is debatable. Therefore, an evidence-based systematic review was planned to elucidate the pharmacotherapeutic potential of Belladonna. A comprehensive literature search was performed in PubMed, MEDLINE, the Cochrane database, Embase, and Clinical Trials. gov using the keywords “Belladonna”, “Belladonna and clinical trials”, and “safety and efficacy of Belladonna”. Articles published from 1965 to 2020 showing the efficacy of Belladonna in diverse clinical conditions are included. The quality of evidence was generated using the GRADE approach, and 20 studies involving 2302 patients were included for the systematic review. Our analyses suggest that Belladonna treatment appears to be safe and effective in various disease conditions, including acute encephalitis syndrome, urethral stent pain, myocardial ischemia injury, airway obstructions during sleep in infants, climacteric complaints, irritable bowel syndrome, and throbbing headache.

However, better understanding of the dosage and the toxicity of tropane alkaloids of Belladonna could make it an efficient remedy for treating diverse medical conditions.

2. ***Calcarea carbonica* treatment rescues lipopolysaccharide-induced inflammatory response in human mononuclear cells via downregulation of inducible cyclooxygenase pathway.** Kumar S, Maurya VK, Nayak D, Khurana A, Manchanda RK, Gadugu S, Bhatt. MLB, Saxena SK. *Journal of Integrative Medicine* 2020 September; Volume 18, issue 5, pages 441-449. Available from doi:10.1016/j.joim.2020.06.001. Published on 8 June 2020).

Abstract

Objective: Prolonged use of nonsteroidal anti-inflammatory drugs is associated with severe side effects and toxicity. Therefore, we studied the anti-inflammatory role of *Calcarea carbonica* which had minimal toxicity at the low doses.

Methods: THP-1 human mononuclear cells were treated with *C. carbonica* to evaluate the 50% cytotoxicity concentration (CC50) and 50% effective concentration (EC50). Cell survival was evaluated in lipopolysaccharide-stimulated *C. carbonica*-treated cells. Nitric oxide (NO) and tumor necrosis factor- α (TNF- α) were measured to evaluate the anti-inflammatory activity of *C. carbonica*. Cyclooxygenase-2 (COX-2) protein expression was determined by Western blotting analysis, and the interaction of *C. carbonica* with the COX-2 protein was evaluated using molecular docking simulation.

Results: The CC50 and EC50 of *C. carbonica* were found to be 43.26 and 11.99 $\mu\text{g}/\text{mL}$, respectively. The cell survival assay showed a 1.192-fold ($P = 0.0129$), 1.443-fold ($P = 0.0009$) and 1.605-fold ($P = 0.0004$) increase in cell survival at 24, 48 and 72 h after initiating *C. carbonica* treatment, respectively. *C. carbonica*-treated cells showed a reduction in NO levels by 2.355 folds ($P = 0.0001$), 2.181 folds ($P = 0.0001$) and 2.071 folds ($P = 0.0001$) at 24, 48 and 72 h, respectively. The treated cells also showed a reduction in TNF- α levels by 1.395 folds ($P = 0.0013$), 1.541 folds ($P = 0.0005$) and 1.550 folds ($P = 0.0005$) at 24, 48 and 72 h, respectively. In addition, a 1.193-fold reduction ($P = 0.0126$) in COX-2 protein expression was found in *C. carbonica*-treated cells. The molecular docking showed interaction of *C. carbonica* with the phenylalanine 367 residue present in active site of Cox-2.

Conclusion: *C. carbonica* exhibited anti-inflammatory properties in lipopolysaccharide-stimulated cells by significantly reducing NO production and TNF- α level through downregulation of the COX-2 protein. This effect is probably mediated through interaction of *C. carbonica* with the phenylalanine 367 residue present in active site of Cox-2.

3. **Antiviral Activity of Belladonna during Japanese Encephalitis Virus Infection via Inhibition of Microglia Activation and Inflammation Leading to Neuronal Cell Survival.** Kumar S, Maurya VK, Kabir R, Nayak D, Khurana A, Manchanda RK, Gadugu S, Shanker K and Saxena SK. *ACS Chemical Neuroscience*. 2020, Volume 11, issue 21, pages 3683–3696. Available from: <https://doi.org/10.1021/acscemneuro.0c00603> (Published on October 15, 2020)

Abstract

Japanese encephalitis virus (JEV) is the main cause of viral encephalitis resulting in more than 68000 clinical cases every year with case fatality rate as high as 30–40% for which no specific

treatments are available. We have recently exhibited Belladonna may be widely applicable for the treatment of various neurological disorders. Therefore, we developed a hydroalcoholic formulation of belladonna (B200) consisting of atropine and scopolamine and showed its antiviral efficacy against JEV infection. B200 treatment increases neuronal cell survival by reducing JEV induced cytopathic effects which were evident from significant reduction in necrotic cell population by flow-cytometry analysis and caspase 3 and 8 enzymatic activities. B200 treatment was found to reduce the intracellular JEV level observed by significant reduction in JEV-fluorescein isothiocyanate (FITC) expression in both neurons and microglia. Because microglia plays a crucial role in JEV pathogenesis, we further investigated the anti-JEV effects of B200 on human microglia cells and elucidated the mechanism of action by performing whole-transcriptome sequencing. Gene expression analysis revealed that B200 reduces the pro-apoptotic and inflammatory gene expression observed by significant reduction in BAD, BAX, CASP3, CASP8, IL1B, and CXCL10 and increase in IL10 responsive gene expression. Interestingly, our molecular docking analysis revealed that atropine and scopolamine interact with the His288 residue of NS3 protein, a crucial residue for RNA unwinding and ATPase activity that was further confirmed by degradation of NS3 protein. Drug likeness, ADME (absorption, distribution, metabolism, and excretion), and toxicity analysis further suggests that atropine and scopolamine both cross the blood-brain barrier, which is crucial for effective treatment of Japanese encephalitis (JE).

4. **The Effect of *Iodium* 30C on Experimental Visceral Leishmaniasis. Joshi J, Bandral C, Manchanda RK, Khurana A, Nayak D, Kaur S. Homeopathy. 2020 Nov;109 (4):213-223. Available from doi: 10.1055/s-0040-1713361. (Published on 21 August 2020).**

Abstract

Background: Leishmaniasis is one of several neglected tropical diseases that warrant serious attention. A disease of socio-economically poor people, it demands safer and cheaper drugs that help to overcome the limitations faced by the existing anti-leishmanials. Complementary or traditional medicines might be a good option, with an added advantage that resistance may not develop against these drugs. Thus, the present investigation was performed to evaluate the anti-leishmanial efficacy of an ultra-diluted homeopathic medicine (*Iodium* 30C) in experimental visceral leishmaniasis (VL).

Methods: Compliant with strict ethical standards in animal experimentation, the study was performed in-vivo in inbred BALB/c mice which were injected intravenously with 1×10^7 promastigotes of *Leishmania donovani* before (therapeutic) or after (prophylactic) treatment with *Iodium* 30C for 30 days. In other groups of mice ($n = 6$ per group), amphotericin B served as positive control, infected animals as the disease control, while the naïve controls included normal animals; animals receiving only *Iodium* 30C or *Alcohol* 30C served as sham controls. The anti-leishmanial efficacy was assessed by determining the hepatic parasite load and analysing percentages of CD4⁺ and CD8⁺ T cells. Biochemical analysis and histological studies were performed to check any toxicities.

Results: *Iodium*-treated animals showed a significantly reduced parasite load (to 1503 ± 39 Leishman Donovan Units, LDU) as compared with the infected controls (4489 ± 256 LDU) ($p < 0.05$): thus, the mean therapeutic efficacy of *Iodium* 30C was 66.5%. In addition, the population of CD4⁺ and CD8⁺ T cells was significantly increased ($p < 0.05$) after treatment. No toxicity was observed, as evidenced from biochemical and histopathological studies of the liver and kidneys. Efficacy of *Iodium* 30C prophylaxis was 58.3%, while the therapeutic efficacy of amphotericin B was 85.9%.

Conclusion: This original study has shown that *Iodium* 30C had significant impact in controlling parasite replication in experimental VL, though the effect was less than that using standard pharmaceutical treatment.

5. **In Vitro Assessment of Homeopathic Potencies of *Hydrastis canadensis* on Hormone-Dependent and Independent Breast Cancer.** Khan S, Nayak D, Khurana A, Manchanda RK, Tandon C, Tandon S. *Homeopathy*. 2020 Nov;109(4):198-206. Available from doi: 10.1055/s-0040-1709668. (Published on 1 July 2020).

Background: Breast cancer is the second leading cause of cancer-related deaths in women. Conventional treatment such as chemotherapy, hormonal therapy and radiotherapy has decreased the mortality rate among cancer patients but has also revealed long-term side effects. Drug resistance and toxicity to normal cells compound the problems associated with the use of modern medicines. Hence, complementary or alternative treatment options are being explored. The current study, using different homeopathic potencies of *Hydrastis canadensis*, was conducted to distinguish between any effects they might have on hormone-dependent and independent breast cancer.

Materials and methods: The cytotoxic effect of homeopathic medicine *Hydrastis* on hormone-dependent (MCF 7) and hormone-independent (MDA-MB-468) breast cancer cells was assessed using viability and colony-forming assays after 48 or 72 hours of treatment. Flow cytometry-based Annexin V-PI (propidium iodide), caspase 3 and cell cycle analysis was performed following treatment of cells with mother tincture or various potencies of *Hydrastis* (1C, 2C, 30C, 200C).

Results: Different potencies of *Hydrastis* displayed selective cytotoxic effects against MCF 7 cells, but only marginal effects against MDA-MB-468. The maximum cytotoxicity was established in the case of 1C following 72 hours of treatment. Treatment of breast cancer cells revealed an increase in the G0/G1 cell population, along with an increase in the caspase 3 levels and induction of apoptosis.

Conclusion: *Hydrastis* may have a selective cytotoxic effect against hormone-dependent breast cancer MCF 7 cells, leading to cell cycle arrest in the G0/G1 phase, which could be the plausible reason for the induction of apoptosis. The results need to be validated *in vivo*.

EXTRA-MURAL RESEARCH

The Extra Mural Research Scheme of Ministry of AYUSH is designed to encourage R&D in priority areas based on disease burden in alignment to National Health programme. It also aims to utilize the vast research infrastructure available within the country for standardization/validation of classical drugs. In this scheme, grant-in-aid is provided to organizations/institutions and scientists to conduct specific time-bound research studies. Research is encouraged on pre-defined priority areas including fundamental concepts, basic principles & theories of AYUSH systems, standardization/validation of safety, efficacy & quality different AYUSH classical drugs, therapies, intervention & approaches/treatment modalities, AYUSH pharmaceutical research (new drug development), clinical trials, scientific exploration & operational research of metallic compounds, other herbo-mineral preparations, drug interaction, bioavailability & dose determination studies, AYUSH intervention in public health career, Epidemics diseases & genus epidemicus, geriatric health care, mental health & cognitive disorders, Anaemia nutritional disorders, Maternal & Child health etc., Systemic review and meta-analysis of AYUSH research studies, literary research & scientific documentation and development of data base, health economics related to AYUSH, role of AYUSH interventions in veterinary health, development of software & bio instrumentation related to AYUSH etc. The details of the scheme are available on the website of Ministry of AYUSH and on the website of the Council.

Details of studies during reporting period are as follows.

New study initiated: 06

Studies concluded: 02

Progress report has been reviewed and submitted to Ministry for the following projects:

Table 27

S. No.	Name of the Institute & Principal Investigator	Title of the study
1.	Sarada Krishna Homoeopathic Medical College, Kulasekharam, Kanyakumari District – 629161 Dr. Sugathan. N. V.	Clinical trail of selected Homoeopathic medicines in prevention and management of COVID-19 like illness in selected quarantine hotspots of Kanyakumari District – A prophylactic approach.
2.	D. N. De Homoeopathic Medical College and Hospital, Govt. of West Bengal, Kolkata Dr. Shyamal Kumar Mukherjee	Prophylactic effects of homoeopathic medicines in Kolkata during COVID-19 pandemic: Double-blind, randomized, placebo-controlled trial

Ongoing studies: 04

Table 28

S. No.	Name of the Institute & Principal Investigator	Title of the study
1.	National Institute of Homoeopathy, Kolkata An Autonomous Institute, Ministry of AYUSH, Govt. of India Dr. Subhas Singh	A community-based cluster randomized controlled field trial to evaluate the effectiveness of Homoeopathic Prophylaxis against COVID-19

S. No.	Name of the Institute & Principal Investigator	Title of the study
2.	School of Public Health, SRM Nagar, SRM University, Kattankulathur, 603203. Dr. Alex Joseph	Efficacy of Homoeopathic prophylaxis Arsenicum Album against COVID-19 (EPAC): A multicentric Cluster randomised controlled trial in Southern India.
3.	Mahesh Bhattacharyya Homoeopathic Medical College & Hospital, Govt. of West Bengal, Howrah Dr. Malay Mundle	Homoeopathic medicines in the prevention of COVID-19 among high risk individuals: A community based, double-blind, randomized, placebo-controlled trial
4.	Amity University Postal address: Amity Road, Sector-125, Noida, Uttar Pradesh Dr. Kamal Rawal	To evaluate the effect of homeopathic medicines on clinical features, biochemical, radiological and immunological measurements of COVID-19 patients.

Studies Deferred: 01

Table 29

S. No.	Name of the Institute & Principal Investigator	Title of the study
1.	M.N. Homoeopathic Medical College and Research Institute, Jodhpur Bypass, Near Garden City, Bikaner-334001 Dr. Aijaz Aziz Sulemani.	Efficacy of <i>Arsenic album</i> as prophylaxis in suspected quarantine cases of COVID-19 randomized double-blind placebo-controlled trial

Special PAC meetings held online through video conferences:

Table 30

S. No.	Meeting	Date
1.	3 rd Special Project Approval Committee Meeting for SARS COV-2 and COVID-19, Ministry of AYUSH	24.8.2020
2.	19 th Meeting of Project Approval Committee, Ministry of AYUSH	09.09.2020
3.	12 th Meeting of Project Screening Committee, Ministry of AYUSH	08.01.2021 11.01.2021
4.	4 th Special Project Approval Committee Meeting for SARS COV-2 and COVID-19, Ministry of AYUSH	11.06.2021

Due to ongoing pandemic in the year 2020-21, COVID-19 has been identified as priority area of research by Ministry of AYUSH under EMR scheme.

INTERNATIONAL AND NATIONAL COLLABORATIONS

INTERNATIONAL CO-OPERATION

Council is committed to enhance international cooperation for global promotion of evidence -based Homoeopathy through more international interactions, exchange of MoUs and organising international conferences/webinars which will conclusively help in enhancing the international cooperation. As of now, MoUs for undertaking collaborative research/academic collaboration have been signed with foreign institutes/universities in Germany, Malaysia, Cuba, Brazil, Mexico, USA, UK, Israel, Argentina, Australia and Canada. Various activities as defined under the mandate of MoUs are being undertaken regularly.

CANADA

As a joint initiative under the Memorandum of Understanding (MoU), Central Council for Research in Homoeopathy (CCRH), New Delhi, India and College of Homeopaths of Ontario (CHO), Toronto Canada jointly organised a webinar for building research aptitude, enhancing knowledge about present and future research and improving clinical practice of practitioners and researchers on 27th November 2020 at 09:00 AM Eastern Time (Canada); 07.30 PM Indian Standard Time (India). The topic of the webinar was "Clinical practice guidelines for evidence-based research in Homoeopathy". Around 150 national and international participants comprising homeopaths from CHO from all over Canada and scientists/officers of the Councils in India attended the webinar.

NATIONAL COLLABORATION WITH HOMOEOPATHIC MEDICAL COLLEGES

The Council has signed Memorandum of Understanding (MoU) with 30 interested PG Homoeopathic medical colleges for collaboration in training & research in identified areas of interest since 2016 till date. The vision behind the agreement is to inculcate research aptitude amongst students and faculties by providing technical support for capacity building through training workshops, webinars etc; provide impetus to research infrastructure in the college; establish joint/collaborative research OPDs in the premises of homeopathic colleges/institutes; tap the clinical data in research mode in a methodical manner and further take up specific projects as/where feasible.

In year 2016-17, MoU was signed with Homoeopathy University, Jaipur for Dr. MP Khunteta Homoeopathic Medical College while in year 2017-2018 MoUs were signed with Govt. Homoeopathic Medical College, Bhopal, R.B.T.S Homoeopathic Medical College, Bihar and Motiwala Homoeopathic Medical College, Nashik and Dr. M.L. Dhawale Trust, Maharashtra.

During the Scientific convention on the auspicious occasion of World Homeopathic Day 2018 CCRH exchanged MoUs with 23 homoeopathic colleges and during reporting year on World Homeopathic Day 2019 CCRH further extended this collaboration by exchanging MoUs with 2 more homoeopathic medical colleges to guide them in the area of research & training.

Table 31: State wise details of collaborating homoeopathic medical colleges are:

S.No.	Name and address of the College	State
MoU signed in 2016-18		
1.	R BTS Govt. Homoeopathic Medical College	Bihar
2.	Motiwala Homoeopathic Medical College and Hospital	Maharashtra
3.	Dr. M.L. Dhawale Trust, Palghar	Maharashtra
4.	Govt. Homoeopathic Medical College	Madhya Pradesh
5.	Dr. MP Khunteta Homoeopathic Medical College	Rajasthan
MoU signed in 2018-19		
6.	Dr. Gururaju Govt. Homoeopathic Medical College	Andhra Pradesh
7.	JIMS Homoeopathic Medical College and Hospital	Telangana
8.	G.D. Memorial Homoeopathic Medical College and Hospital	Bihar
9.	Ahmedabad Homoeopathic Medical College	Gujarat
10.	Anand Homoeopathic Medical College & Research Institute	Gujarat
11.	Dr. V.H. Dave Homoeopathic Medical College	Gujarat
12.	Smt. A.J. Savla Homoeopathic Medical College and Research Institute	Gujarat
13.	Baroda Homoeopathic Medical College	Gujarat
14.	A.M.Shaikh Homoeopathic Medical College	Karnataka
15.	Father Muller's Homoeopathic Medical College & Hospital	Karnataka
16.	Bharati Vidyapeeth's Homoeopathic Medical College & Hospital	Maharashtra
17.	Dhondumama Sathe Homoeopathic Medical College	Maharashtra
18.	SNJB's Smt.Kanchanbai Babulalji Abad Homoeopathic Medical College	Maharashtra
19.	Foster Developments Homoeopathic Medical College	Maharashtra
20.	Panchsheel Homoeopathic Medical College & Hospital	Maharashtra
21.	Sonajirao Kshirsagar Homoeopathic Medical College	Maharashtra
22.	Shri Ganga Nagar Homeopathic Medical College	Rajasthan
23.	Sarada Krishna Homeopathic Medical College	Tamil Nadu
24.	Vinayaka Mission's Homoeopathic Medical College & Hospital	Tamil Nadu
25.	Bakson Homoeopathic Medical College	Uttar Pradesh
26.	Naiminath Homeopathy Medical College, Hospital & Research	Uttar Pradesh
27.	D.N.De Homoeopathic Medical College & Hospital	West Bengal
28.	The Calcutta Homoeopathic Medical College & Hospital	West Bengal
MoU signed in 2019-20		
29.	Jawaharlal Nehru Homoeopathic Medical College	Gujarat
30.	Swasthya Kalyan Homoeopathic Medical College	Rajasthan

Activities in the reporting year:

I. Orientation Programs:

- Scientific convention webinar on the World Homoeopathy Day 2020, 10th and 11th April 2020 themed “Connecting digitally during the adversities of COVID-19 lockdown.” The webinar was attended by 1272 participants and 11 speakers with a total duration of 181 minutes which focused scientific sessions covering topics related to Homoeopathy in COVID-19 evidences, challenges and opportunities in India and its global situation, Role of Homoeopathic prophylaxis, Reforms in Homoeopathic education etc. The webinar was also streamed LIVE on Facebook, which had a reach of around 7000 people and around 1000 people watched the complete webinar and many UG & PG students/ faculty from various Homeopathic Medical colleges across India attended the same.
- Online Orientation-cum-training programs were conducted at various time points during Feb.-Aug. 2021 to sensitize faculty/ students/staff of colleges to undertake mass prophylaxis program as per advisory of Ministry of AYUSH of distributing *Arsenicum album* 30 as potential prophylactic against COVID-19 with subsequent post distribution monitoring, follow-ups and data capturing on structured format.

II. Research OPDs /Joint Research Projects

- Collaborative research OPDs opened in the area of Dermatology/Rheumatology/Respiratory Diseases/Paediatrics/Ophthalmology opened in some colleges like Government Homoeopathic Medical College, Bhopal, R.B.T.S Homoeopathic Medical College, Muzaffarpur, Bihar and Dr. MP Khunteta Homoeopathic Medical College, Jaipur since 2017/18 where data of patients around 7000 captured in research mode on structured formats.

III. Collaborative Research Project

A. Concluded Studies

- Research study titled '*A study of conventional and homoeopathic paradigms in treating children aged 0-18 months*' initiated in Sept. 2018 at JIMS Homoeopathic Medical College, Telangana was concluded in 2020 and data is under analysis. Primary objective of the study was to compare the health status of children treated homoeopathically ('homoeopathic treatment group') for acute illness episodes from birth to 18 months with a matched group of children treated conventionally ('conventional treatment group' while the secondary objectives included comparison between the groups for growth and development, episodes of diarrhoea, respiratory diseases, economic burden etc. 108 neonates fulfilling the eligibility criteria were enrolled after screening 218 neonates. Data of 94 neonates who completed the 2 years' follow-up period is under analysis.

B. Ongoing Studies

- Ongoing collaborative clinical research study on Haemophilia a prospective, open label, exploratory, double arm study was initiated at Motiwala Homoeopathic Medical College, Nashik, in October 2019. The primary objective of the study is to compare the effect of adjuvant homoeopathic treatment given with standard medical management and standard medical management alone, in

persons with Haemophilia(PWH) with respect to annualized bleeding rate and the secondary objectives include comparison of groups w.r.t joint health; health-related quality of life; requirement of clotting factor concentrates etc. 173 cases have been screened out of which 52 have been enrolled till date which are under follow up.

- “A Clinical and Molecular study to explore the effect of Homoeopathy in Psoriasis” has been formulated as a collaborative study between CCRH; AIIMS, Bhopal & Govt. Homoeopathic Medical College, Bhopal. Pretrial preparations & logistics for initiation of the studies are underway.
- Clinical research study titled “Comparison of Homoeopathy and Allopathy given as adjuvant therapy to nonsurgical periodontal treatment (NSPT) in patients with chronic periodontitis: A randomised double arm study” has been developed as a collaborative study between CCRH & Dr. V.H Dave Homoeopathic Medical College, Gujarat. Pretrial preparations & logistics for initiation of the studies are underway.

IV. Participation of the colleges in other research Programs

- Council has been conducting drug proving research projects with various homoeopathic medical colleges across India (through its Institutes/Units). Further, after signing of MoUs, technical support for conducting drug proving projects has been extended to four collaborating colleges namely JIMS Homoeopathic Medical College and Hospital, Dr. V.H. Dave Homoeopathic Medical College, Bakson Homoeopathic Medical College, Sarada Krishna Homoeopathic Medical College.
- Some colleges across India have been submitting research proposals under the EMR scheme of Ministry of AYUSH seeking support in the form of grant-in-aid. 26 proposals have been received from collaborating colleges and 3 proposals were accepted since the year 2016. During the reporting year, 02 collaborating colleges namely Sarada Krishna Homoeopathic Medical College and D. N. De Homoeopathic Medical College & Hospital have submitted research proposals under EMR scheme of Ministry of AYUSH.

V. COVID-19 activities/studies with colleges

- Approx. 100 colleges across India enthusiastically distributed the declared preventive homoeopathic medicine by the Ministry of AYUSH, Govt. of India to almost 1.71 cr. people. A retrospective post-prophylaxis analysis of data approx. 7 lakh persons captured by 50 colleges (including 19 collaborating colleges) who consumed the preventive was undertaken to observe the protective effect of *Ars. album* 30. Manuscript is under preparation.
- CCRH has conducted 2 studies in collaboration with Govt. Homoeopathic Medical College, Bhopal. The first one titled “Effectiveness of individualized homoeopathy as an add-on to standard treatment of COVID-19 - a multicentric, randomized, parallel arm, single blind, placebo, controlled trial” was successfully completed on 300 COVID-19 hospitalized patients in December 2020 and the data is under compilation. The second one titled “Comparative effectiveness of pre-identified homoeopathic medicines in asymptomatic COVID-19 individuals – an open label, randomised, placebo-controlled trial was also successfully completed and the manuscript is under preparation.

The details of the studies have been reflected under activities of Epidemic Cell.

PUBLIC HEALTH PROGRAMS IN RESEARCH MODE

Integration of AYUSH (Homoeopathy with Yoga) in the National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke (NPCDCS)

Central Council for Research in Homoeopathy under Ministry of AYUSH has integrated Homoeopathy with Yoga on a pilot basis and implemented such integration of AYUSH (Homoeopathy with Yoga) in the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke, at two identified districts i.e., Krishna (AP) since September 2015 and at Darjeeling district (WB) since February 2016 with 9 and 7 Lifestyle disorder clinics (AYUSH LSD) respectively, in the premises of respective State Government health facilities i.e., CHC and above.

Further, the program was extended to two more tribal districts since May 2017 i.e., Sambalpur (Odisha) and Nashik (Maharashtra) with 03 Lifestyle disorder clinics (AYUSH LSD) in each district, in the premises of respective State Government health facilities i.e., CHC and above. The LSD clinics at the two tribal districts have been closed since May 2020.

Objectives of integration of Homoeopathy & Yoga in NPCDCS Programs

- Health promotion of masses through behavior change
- Disease prevention through early diagnosis of NCDs (prevention and control of Diabetes, Cardiovascular Diseases, Cancer, chronic obstructive pulmonary diseases and Stroke during the first phase)
- Reduction in NCD burden and their risk factors
- Early management of NCDs through homoeopathic treatment alone or as add on to standard care

Strategies of integrated NPCDCS Program

- Outreach activities: Screening for timely detection of various NCDs at the level of PHC and CHCs/CHNCs/BPHC on regular basis.
- Yoga classes for the general masses
- Advice on diet and lifestyle management
- Treatment cum follow-up of population under homoeopathic treatment alone or as add on to standard care along with therapeutic lifestyle changes.

Expected outcomes

Integration of homoeopathy with Yoga would enable in prevention and control of NCDs through health education, promotion, behavioral change, early detection and to avoid complications.

Achievements

The aforesaid programme is functional at 16 identified LSD clinics in Krishna & Darjeeling districts. The LSD clinics at Sambalpur and Nashik districts have been closed since 31st May 2020. The overall achievements so far since inception and the reporting year from 1st April 2020 to 31st March 2021 (for Krishna & Darjeeling districts) are as follows:

Table 32

Benefits extended	Achievements since inception till 31 st March 2021 (No. of patients)	Achievements from 1 st April 2020 to 31 st March 2021 (No. of patients)
Patients given homoeopathic treatment in the LSD clinic and benefitted	616452	44687
Patients screened for NCDs (as per screening criteria)	197182	3902
Patients treated for NCDs	81200	2415
Patients' data documented on structured format	18627	0
Yoga classes conducted	30128	2588
Number of persons who attended yoga classes	381642	26418
Outreach camps conducted	1186	5
Provisional/known diagnosis of NCDs	115165	3562
Pre-Hypertension	22052	440
Hypertension	42304	1242
Pre-Diabetes	5307	145
Diabetes Mellitus	12615	370
Dyslipidemia	605	3
Chronic Obstructive Pulmonary disease	1752`	70
Coronary artery disease/CVD/Stroke	373	8
Cancer	65	4
Multi morbidity (patients suffering from more than one NCD mentioned above)	27531	1280

The aforesaid program is functional at 16 identified LSD Clinics. The overall achievements so far since inception are as follows: 1,97,182 have been screened for selected non-communicable diseases and 1,186 out-reach camps were conducted at the four identified districts out of which 81,200 patients with NCDs were being enrolled and treated. A total of 30,128 classes have been conducted and 3,81,642 persons attended the yoga classes. Overall including follow ups a total of 6,16,452 patients have been benefitted from Integrative Homoeopathic treatment and Yoga.

The district wise details (Krishna & Darjeeling districts) for the reporting period (1st April 2020 to 31st March 2021) are given below:

Table 33

Benefits extended	Krishna	Darjeeling	Total
Patients given homoeopathic treatment in the OPD of LSD clinic and benefitted	33685	11002	44687
Persons screened for NCDs (as per screening criteria)	3902	0	3902
Patients treated for NCDs	1405	1010	2415
Patients treated with documentation	0	0	0
Yoga classes conducted	833	1755	2588
Persons who attended yoga classes	13554	12864	26418
Outreach camps conducted	5	0	5

Benefits extended	Krishna	Darjeeling	Total
Provisional/known diagnosis of NCDs	2552	1010	3562
• Pre-Hypertension	321	119	440
• Hypertension	715	527	1242
• Pre-Diabetes	142	3	145
• Diabetes Mellitus	349	21	370
• Dyslipidemia	3	0	3
• Chronic Obstructive Pulmonary disease	70	0	70
• Coronary artery disease	8	0	8
• Cancer	4	0	4
• Multi Morbidity (patients suffering from more than one NCD mentioned above)	940	340	1280

Research achievements:

A lifestyle disorder case recording format has been developed for capturing data of the cases that are enrolled and documented in this integrated pilot project. During the reporting period (1st April 2020 to 31st March 2021), no new cases have been documented.

SC HEALTH CAMPS UNDER SCHEDULE CAST SUBPLAN COMPONENT

As per the direction of Ministry of AYUSH, Council has a mandate of undertaking health programme for the benefit of Schedule caste population under the Schedule caste Sub-Plan programme. Under the plan, the programme is to be undertaken in the rural/urban areas having SC population more than 30%.

During the year 2020-21, the Council has undertaken the programme through its 09 Institutes/ Units by adopting 28 villages having SC population more than 30%, details of which are given Unit wise in Table 35 below.

OBJECTIVES

- Survey for identification of COVID positive cases in 28 adopted villages.
- Distribution of *Arsenic album* 30 as immunobooster to the people of 28 adopted villages.
- Follow up of persons who have been distributed *Arsenic album* 30.
- Creating awareness about preventive measures to be adopted for prevention of COVID-19 to the people by means of hoardings which are to be placed at such places for mass education regarding hygiene, wearing masks, use of alcohol-based sanitizers, ways for enhancing the immunity etc.
- Encouraging the people to follow home isolation guidelines
- Providing free medicare health services to the SC population.
- Identification of common prevalent diseases in the villages.
- Health promotion & health education.

PROJECTS UNDERTAKEN

- A. Mass prophylaxis by distribution of *Arsenic album* 30 during the COVID-19 pandemic
- B. Conducting general mobile health camps in the adopted villages.
- C. Health care awareness and management with capacity building of general population linked with Swachh Bharat in areas predominantly identified as Scheduled Caste Areas (Jan.- March 2021)

- A. Mass Prophylaxis COVID-19** - Survey for identification of COVID positive cases was done along with distribution of *Arsenic album* 30 as immunity booster to the people 141206 beneficiaries in 28 adopted villages to and regular weekly follow up for 03 months, creating awareness about preventive measures to be adopted for prevention of COVID-19 and encouraging the people to follow home isolation guidelines, as summarized in table 34.

Table 34: Beneficiaries from June to September 2020 in Mass Prophylaxis activity

S.No.	Name of state	Institute/Unit	No. of Camps	No. of COVID-19 Positive Cases	No. of persons distributed <i>Arsenic album</i> 30	No. of beneficiaries
1.	Uttar Pradesh	DDPRCRI(H), Noida	90	3	11091	8160
2.	Bihar	CVU(H), Patna	48	0	10960	10960
3.	Rajasthan	CRI(H), Jaipur	16	0	5982	5982
4.	Andhra Pradesh	RRI(H), Gudivada	88	52	36249	36249
5.	West Bengal	CRU(H), Siliguri	17	13	16742	15822
6.	Maharashtra	RRI(H), Mumbai	51	39	9219	9032
7.	Puducherry	CRU(H), Puducherry	32	63	16576	16433
8.	Odisha	DPU(H), Bhubneshwar	40	0	15254	15254
9.	Andhra Pradesh	CRU(H), Tirupati	57	22	19133	19133
TOTAL			439	192	141206	141006

- B. Mobile health camps** were organised in SC predominated villages having more than 30-40% of SC population with the objective of providing free homoeopathic medicare health services and symptomatic treatment by door-to-door screening, improvement in morbidity data due to behavioural change while maintaining cleanliness and creating awareness about Homoeopathy are summarised in Table 35.

Table 35: Beneficiaries from October- March 2021 in Mobile Health Camps

Sl. No.	Name of state	Institute/ Unit	Area coverage	Name of villages	No. of Camps	No. of beneficiaries	Common diseases identified
1.	Uttar Pradesh	DDPRCRI(H), Noida	03	Khairpur Gurjar RozaYakubpur Salarpur	37	352	Osteoarthritis – 70 Dermatitis & Eczema – 54 Cough – 42 Dyspepsia/GERD– 31 Myalgia - 23

Sl. No.	Name of state	Institute/ Unit	Area coverage	Name of villages	No. of Camps	No. of beneficiaries	Common diseases identified
2.	Bihar	CVU(H), Patna	02	Jagmal Bigha Rohan Tola	15	585	Dermatitis & Eczema - 54 Headache - 28 Abdominal & pelvic pain - 28 Stiffness of joints - 27 Myalgia - 18
3.	Rajasthan	CRI(H), Jaipur	02	Vijayvara Chandlai	13	584	URTI - 44 Osteoarthritis - 26 Tinea Cruris/ Corporis - 22 Headache - 21 Dermatitis - 21
4.	Andhra Pradesh	RRI(H), Gudivada	05	Hanuman Junction Penjendra Manikonda Gudlalleru China Origala	62	725	Osteoarthritis - 384 Sciatica/ Low Back Pain/Backache - 116 Gastritis/Acid Peptic Disease/GERD - 105 Spondylosis - 79 Myalgia - 72
5.	West Bengal	CRU(H), Siliguri	04	Chhota Pathuramjote Gossainpur Chhota Fapri Ghokhla Jote	22	212	Ringworm/Tinea Corporis/Cruris/Tinea infections - 27 Benign Neoplasm - 28 Diseases of the nervous system - 19 Gastritis/Acid Peptic Disease / GERD - 21
6.	Maharashtra	RRI(H), Mumbai	04	Govandi Ghatkopar Asalpha Chembur	37	432	Arthralgia - 113 Gastritis - 43 Lumbago - 43 Osteoarthritis - 27 Myalgia - 24
7.	Puducherry	CRU(H), Puducherry	02	Nellithope Abhisega-pakkam	17	245	Non-insulin dependent diabetes mellitus - 70 Osteoarthritis - 57 Arthralgia - 37 Sciatica/LBP/Backache - 29 Nutritional Anemia - 16

Sl. No.	Name of state	Institute/ Unit	Area coverage	Name of villages	No. of Camps	No. of beneficiaries	Common diseases identified
8.	Odisha	DPU(H), Bhubaneswar	03	Bhusandpur Balipatapur Manglajodi	23	485	Dermatitis & Eczema – 147 Arthralgia – 78 Acute Upper Respiratory Tract Infection- 76 Osteoarthritis – 66 Cough - 62
9.	Andhra Pradesh	CRU(H), Tirupati	04	Narayanvanam Puttur Chandragiri Renigunta	32	361	Osteoarthritis – 56 APD – 24 Lumbago – 13 Type 2 Diabetes mellitus – 9 Polyarthritis - 8
TOTAL			29		258	3981	

C. Health care awareness and management with capacity building of general population linked with Swachh Bharat in areas predominantly identified as Scheduled Caste areas

This program was undertaken from January 2021 to March 2021 in pre-identified areas with a high percentage of Scheduled Caste population so as to enhance the program outreach to this section of the society. This program was intended to propagate use of Homoeopathy in the target population and ensure accessibility to treatment. The health care workers (HCW) in coordination with trained homoeopathic practitioner were involved in delivery of services, sensitization of people, and creating awareness about Homoeopathy along with health and hygiene practice. The program was undertaken through 17 institutes /units of the Council by adopting 26 villages to undertake the activity.

Objectives

- Promote health care management of general population through Homoeopathy.
- Create awareness with capacity building of general population of Scheduled Caste areas.
- Promote Swachh Bharat in identified areas.
- To provide medicines through the home remedy kits given to the HCWs for 11 common ailments amongst general population.
- To identify the most commonly prevalent diseases in the villages.
- To maintain the follow-ups of the patients.

Table 36: TARGET AREAS

Name of Centers	Name of Area	Households as given by Centers
DACCRI(H), Kolkata	South Dumdum (municipality) Ward No. 1	3200
	South Dumdum (municipality) Ward No. 2	2900
CRU(H), Siliguri	Gossainpur Gram Panchayat	Approx. 5500
RRI(H), Imphal	Lamshang	2894
DPU(H), Bhubaneswar	Umadei Brahmapur	1500
	Pratapsasana	2500
RRI(H), Guwahati	Patarkuchi Guwahati - 29	3500
RRI(H), Agartala	Jirania Nagar Panchayat 1	2000
NHRIM(H), Kottayam	Kurichi	1097
	Ettumanoor	717
RRI (H), Gudivada	Telaprolu	2392
	Kanumolu	2384
CRU (T), Tirupati	Chandragiri Rural	2930
HRID, Puducherry	Moolakum	8142
HRID, Chennai	Kovalam	2031
DSU(H), Hyderabad	SC basti, Mallapur division	1000
	Subhash Nagar Mallapur division	1000
CRI (H), Jaipur	Jhotwara	1996
	Kanota	3000
RRI (H), Mumbai	Ghatkopar	14482
	Chembur	3820
DDPRCRI(H), Noida	Bishrakh	1780
	Chipyana Buzurg	5000
HDRI, Lucknow	Natkur	1400
	Kasba Bijnour	2000
RRI(H), Shimla	Pujarali	766
	Rajhana	348

ACTIVITIES UNDERTAKEN

1. Providing free Medicare health services to the SC population through health camps.



Figure 33: Gram Panchayat, Pujarali, Shimla



Figure 34: OPD at SCSP Camp, Hyderabad



Figure 35: OPD at SCSP Camp, Kolkata



Figure 36: OPD at SCSP Camp, Lucknow



Figure 37: SCSP Camp, PV PET, Moolakulam, Puducherry

2. Conduction of lab tests at the SCSP camps



Figure 38: Conduction of lab tests at SCSP Camp, Siliguri



Figure 39: Conduction of lab tests at SCSP Camp, Hyderabad

3. Demographic survey of the households

- Identification of common prevalent disease in the villages.
- Providing home based care for common ailments through HCWs
- Health promotion & health education



Figure 40: Demographic Survey at SCSP Camp, Hyderabad



Figure 41: Demographic survey by HCW at SCSP Camp, Puducherry



Figure 42: Demographic Survey at SCSP Camp, Guwahati



Figure 43: Demographic Survey at SCSP Camp, Siliguri

4. RESOURCE MATERIAL DEVELOPED

I. Operational guidelines



Operational Guidelines

CENTRAL COUNCIL FOR RESEARCH IN HOMOEOPATHY

Health Care Awareness and Management with Capacity Building of general population linked with Swachh Bharat in areas predominantly identified as Scheduled Caste Areas

II. Home remedy kit for 11 most common ailments



III. Home remedy kit for 11 most common ailments with user manual translated in-English, Hindi, Malayalam, Odia, Bengali, Assamese, Manipuri and Marathi.

सामान्य आजारोंसाठी घरगुती उपचार किट

HOME REMEDY KIT FOR COMMON AILMENTS

“मुलत लक्ष्यनि धार्ग अरुण विभावे चिहित अरुणतमित इणु कावळेर पाशापाणि साधारण उमणनेर माधा धाहा सेवा साळेतनता, सध्मता वृधि एवा रेमिड पाथि चिक्किंमार बावधाना”
बावधान उमण

Under

साधारण असुखतार जना होम रेमिडि किट

“पामुख्याने अनुसूचित जाती क्षेत्र म्हणून ओळखल्या जाणा-या भागात स्वच्छ भारत अभ्यानांतर्गत जोडलेल्या सामान्य लोकसंख्येच्या क्षमता वाढीसह आरोग्य सेवा जागरूकता आणि व्यवस्थापन”

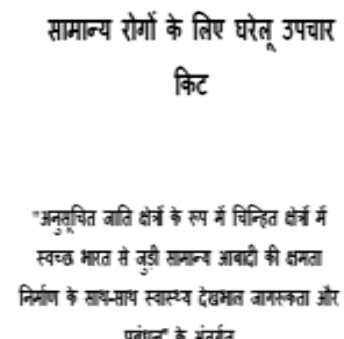
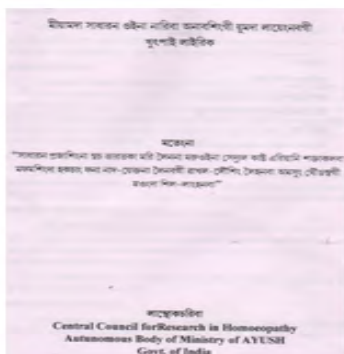
“Health care awareness and management with capacity building of general population linked with Swachh Bharat in areas predominantly identified as Scheduled Caste areas”

सेंट्रल काउन्सिल फर होमिडि ईम रेमिडि पाथि कावळेर सध्मतेर जावुवुक्तेर उमण एमिडि बावधि वधान

Home remedy kit manual in Marathi

Home remedy kit manual in English

Home remedy kit manual in Bengali



Home remedy kit manual in Manipuri

Home remedy kit manual in Assamese

Home remedy kit manual in Hindi

ଅରୁସୂଚିତ ଜାତି ବହୁଳ ଅଞ୍ଚଳରେ ସ୍ୱଳ୍ପ ଭାରତ ସହିତ ଜଡ଼ିତ ସାଧାରଣ ଜନତାଙ୍କ ଦକ୍ଷତା ବୃଦ୍ଧି ସହ ସ୍ୱାସ୍ଥ୍ୟ ସେବା ସଚେତନତା ଏବଂ ପରିଚାଳନା କାର୍ଯ୍ୟକ୍ରମ

ଆରୋଗ: ବେଶ୍ୱାର ହୋମିଓପାଥି ଅବୁବଣାଟ ଚରିତ୍ତ ଅସ୍ତ୍ରଣ ମହାବର ଭାରତ ସରକାରକ ଅଧିକର ସ୍ୱରାଣିତ ଅବୁବଣାଟ

ସାଧାରଣ ରୋଗ ଚିମକ୍ତେ ପରୋକ ହୋମିଓପାଥି ଜପଚାର

Home remedy kit manual in Odia language

ഹോമിയോപ്പതി നിയന്ത്രണ വ്യവസ്ഥാനിരക്കൽ



Home remedy kit manual in Malyalam language

IV. Formats developed (attached at the end of the document)

- Annexure 1- Demographic data format to be filled by HCW
- Annexure 2- Format of cases seen by HCW
- Annexure 3-OPD case recording and follow up format for the JRF
- Annexure 4- Weekly reporting format

V. IEC material hoardings/banners/posters in different languages- English, Hindi, Malayalam, Bengali, Manipuri and Marathi



Figure 44: IEC Banner in Odia language



Figure 45: IEC Banner in Assamese language



Figure 46: IEC Banner in Bengali language



Figure 47: IEC Banner in Marathi language



Figure 48: IEC Banner in Hindi language



Figure 49: IEC Banner in Malayalam language

Table 37 : Trainings Conducted for Nodal officers/JRF/HCW/ HCWs

Date of training	Conducted by	Topic	Participants
15/01/21	CCRH, Headquarters	To identify the SC dominant areas, approximate no. of households in each area, and no. of HCWs required at each centre	<ul style="list-style-type: none"> • All the Nodal Officers of 17 field units
03/02/21	CCRH, Headquarters	<p>To discuss future course of action for implementation of the project at field unit</p> <ul style="list-style-type: none"> • Interview of HCWs • Appointment of HCWs • Roles of JRFs • Roles of Pharmacist • Roles of DEO • Roles of MTS workers 	<ul style="list-style-type: none"> • All the Nodal Officers of 17 field units

Date of training	Conducted by	Topic	Participants
18/02/21	CCRH, Headquarters	Actions to be taken by the Field Unit <ul style="list-style-type: none"> All the field officers are to be given UID number and photo identity card to be issued at FU level with signature of the Officer Incharge. All PMUs to send a copy of the IEC handout to CCRH Hqrs. The expenditure statement on monthly basis to be sent by FU to PMUs and PMUs to headquarters. 	<ul style="list-style-type: none"> All the Nodal Officers of 17 field units
17/02/21 & 20/02/21	DPU(H), Bhubaneswar	Training of HCWs <ul style="list-style-type: none"> Explained about the demographic survey format Use of home remedy kit 	<ul style="list-style-type: none"> 8 HCWs of village pratapsasan & Umadeibrahmapur
13/02/21	CRU(T), Tirupati <ul style="list-style-type: none"> Dr. G.R.C. Reddy Dr. S. Pradeep, (JRF) 	Training of JRFs <ul style="list-style-type: none"> Obtaining demographic data Prescription of commonly indicating homoeopathic medicine Filling up of participant records and other reports How to train HCWs 	<ul style="list-style-type: none"> 2 JRFs
18.02.21	<ul style="list-style-type: none"> Dr. H.M. Shruthi, (JRF) 	Training to the HCWs <ul style="list-style-type: none"> Home care medicines How to do household survey and how to record survey form How to record case recording format and how to prescribe home care remedies 	<ul style="list-style-type: none"> 5 HCWs
19.02.21 27.02.21 & 17.03.21	HRID, Chennai <ul style="list-style-type: none"> Dr. Kolli Raju, Officer in Charge, RO(H), S-4 Dr. Karthikeyan, RO(H), S-2, Nodal Officer Dr. Siva Prasad Goli, RO(H), S-1 	Training of JRFs, DEO, Pharmacist, HCWs <ul style="list-style-type: none"> Roles of JRF's, DEO, Pharmacist and MTS in Camps. How to Collect Demographic data through survey. Training on Homeopathy kit usage How to minimize wastage of medicine during distribution. Dosage of homoeopathic medicine 	<ul style="list-style-type: none"> 2 JRFs 1 DEO 1 Pharmacist 1 MTS 4 HCWs
07.04.21		Training of staff on AYUSH 64 <ul style="list-style-type: none"> Distribution of Ars alb as immunity booster medicine. General Preventive measures of COVID-19 Awareness among the community on health and hygiene. 	<ul style="list-style-type: none"> 2 JRFs 1 DEO 1 Pharmacist 1 MTS 4 HCWs

Date of training	Conducted by	Topic	Participants
08/02/21	HRID, Puducherry • R.O Incharge	Training of JRFs • Explained the study protocol	• 2 JRF
12/02/21	• Lab Tech., and JRFs of SCSP camp	Training of Pharmacist, DEO, MTS and HCWs • How to conduct demographic survey in the field • Basic diagnosis of common day to day ailments. • Home- kit drugs and its indication • Assessing the severity of the complaints and criteria for JRF and higher centre referrals • Explained procedure of blood investigations.	• 10 HCWs, 1 DEO, 1 MTS and 1 Pharmacist
15/02/21 16/02/21 17/02/21 18/02/21 19/02/21 02/03/21 03/03/21 04/03/21 05/03/21 08/03/21	RRI(H), Mumbai • Dr. Tejaswini Patole RO(H), S-2, Ghatkopar & Chembur	Training of JRFs, Pharmacist, MTS, HCWs • Protocol study • Case taking Performa • HCW booklet and medicine kit • HCW survey form and patient form • Working on excel sheet for data update • HCW survey form and patient form (in OPD & field)	• 2 JRFs
12/02/21 15/02/21 16/02/21 26/02/21	NHRIMH, Kottayam • Dr. K.C. Muraleedharan, (Officer in Charge) • Dr. Arun Krishnan. P, RO(H), S-1	Training of JRFs, DEO, MTS, HCWs • Roles of SRF/JRF/DEO and MTS in Camps. • How to Collect Demographic data through survey. • Training on Homeopathy kit usage.	• 1SRF • 2 JRF, • 4 HCWs • 1 MTS, • 1 DEO
09/02/21, 11/02/21, 15/02/21, 16/02/21, 17/02/21, 18/02/21, 19/02/21, 20/02/21, 22/02/21, 23/02/21, 26/02/21	CRI(H), Jaipur • Dr. Pratibha Shivhare, RO(H), S-1	Training of the JRFs • Operational guidelines of SCSP-21 HCAM • Minutes of Meeting • Role of JRFs & HCWs. • Demographic data collection and filling of JRFs & HCWs Performa • Guiding HCWs about use of Home Remedy Kit & • Demonstration of conducting Health Camp on field.	• 2 JRFs
04/03/21, 05/03/21, 08/03/21	• Dr. Pratibha Shivhare, RO(H), S-1 • Dr. Dinesh Sura, JRF(H)	Training of HCWs • Homoeopathy, SCSP 21 HCAM, Role of HCW, Home Remedy Kit, Filling of HCWs Survey form, HCW case	• 7 HCWs

Date of training	Conducted by	Topic	Participants
	<ul style="list-style-type: none"> Dr. Reteka Sexena, JRF (H) 	treatment form	
22/02/21	RRI(H), Imphal <ul style="list-style-type: none"> Dr .Renu Bala, RO (H), S-1, Nodal Officer 	Training of HCWs <ul style="list-style-type: none"> How to create awareness and sensitize the public about the health camp. How to fill the details of the format given How to give medicine from the home remedy kit 	<ul style="list-style-type: none"> 5 HCWs
22/02/21		Training of JRF <ul style="list-style-type: none"> Case taking and recording –How to verifying and cross checking the entries made by the health workers. Data entry on the Google form. Investigations on field as per requirement. 	<ul style="list-style-type: none"> 2 JRF
04/03/21		Training of MTS: <ul style="list-style-type: none"> Demonstrating how the MTS will be the supporting staff at the field. How to arrange & managed the patients line /sequence in the camp. 	<ul style="list-style-type: none"> 1 MTS
10/03/21	<ul style="list-style-type: none"> Dr. Renu Bala, RO (H), S-1 	Training of pharmacist <ul style="list-style-type: none"> How to maintain the stock register. How to dispense medicine in the field. Enrollment of the patient for OPD. Refilling of medicine kit for the HCW with records. 	<ul style="list-style-type: none"> 1 Pharmacist
15/03/21		Training of DEO <ul style="list-style-type: none"> Maintaining of data's of HCW in excel sheet. Maintaining of dats of OPD cases in excel in the required format. 	<ul style="list-style-type: none"> 1 DEO
12.02.21, 15.02.21, 18.02.21, 19.02.21, 24.02.21	DACCRI(H), Kolkata <ul style="list-style-type: none"> Dr. Suraia Parveen, RO(H), S-3 Dr. Madhumita Sadhukhan, RO(H), S-1 	<ul style="list-style-type: none"> Regarding the functioning of Camp and duties of the staffs Sensitizing about house visits Use of medicines kits and direction of follow ups 	<ul style="list-style-type: none"> 1 SRF 2 JRF, 2 DEOs, 1 Pharmacist 1 MTS 12 HCWs
18.02.21, 22.02.21	RRI(H), Agartala <ul style="list-style-type: none"> Dr. Ratan Chandra Shil, RO (H)/S-1, O.I.C 	Training of JRFs <ul style="list-style-type: none"> Treatment of patient at peripheral OPD. Refer of the patient to higher centres if 	<ul style="list-style-type: none"> 2 JRFs

Date of training	Conducted by	Topic	Participants
	<ul style="list-style-type: none"> Dr. Abhijit Chakma, RO (H)/S-1 Dr. Lajjun Nahar, RO (H)/S-1 	<p>patient's condition does not improve</p> <ul style="list-style-type: none"> Training, Coordination and communication with HCW Verification of the data provided by the HCWs 	
18/02/21, 22/02/21		<ul style="list-style-type: none"> To create awareness about the role of Homoeopathy in common illnesses along with health and hygiene in daily basis. Compile information about the household members and usual treatment modes. How to fill up survey formats. How to use of medicines from the kit provided. When to refer the patients to the JRF. Compile information about the household members and usual treatment modes. 	4 HCWs
09/02/21, 15/02/21, 22/02/21, 26/02/21, 05/03/21	DSU (H) Hyderabad <ul style="list-style-type: none"> Dr. EN Sundaram, Officer In-charge Dr. P Prasad, RO (H), S-4 Dr. P Hima Bindu, RO (H), S-3 Dr. RGR Kiranmayee, RO (H), S-1 Mr. Naga Raju, Lab Technician 	Training of the JRFs, MTS and HCWs <ul style="list-style-type: none"> HCW training manual introduction. Home Remedy Kit Usage and details of house survey and referral of patients to the Camp. Usage of Haemoglobinometer and Glucometer. 	<ul style="list-style-type: none"> 2 JRFs 2 MTS 4 HCWs
17/02/21, 18/02/21, 20/02/21		Training of DEO, Pharmacist <ul style="list-style-type: none"> Dispensing of medicines Maintenance of stock registers for medicines as well as house survey Maintenance of records and entry of data into Excel sheets Training on SCSP Rough Excel proforma filling to JRFs and DEO 	<ul style="list-style-type: none"> 1 DEO 1 Pharmacist
18/02/21, 19/02/21	RRI(H), Shimla <ul style="list-style-type: none"> Dr. Sunil S. Ramteke, RO(H), S-4 	Training of the JRFs <ul style="list-style-type: none"> How to prescribe commonly indicated homoeopathic medicine. Coordination & communication with HCWs 	<ul style="list-style-type: none"> 2 JRF
19/02/21, 20/02/21,		Training of the HCWs <ul style="list-style-type: none"> Distribution of medicines from home 	2 HCW

Date of training	Conducted by	Topic	Participants
26/02/21, 27/02/21		remedy kit for common ailments <ul style="list-style-type: none"> • Identification of serious illness requiring immediate • Coordination & communication with JRF. 	
16/02/21	RRI(H), Gudivada <ul style="list-style-type: none"> • Dr. BSJ Raja Kumar RO (H), • Dr. Kishan Banoth RO (H), S – 3 	Training of the JRFs <ul style="list-style-type: none"> • Training on SCSP – SBM program Study Protocol to JRFs. 	2 JRFs
24/02/21, 27/02/21		Training of the HCWs, DEO, MTS and Pharmacist <ul style="list-style-type: none"> • How to conduct demographic survey in the field • Procedure of blood investigations. • Explained the Home-kit drugs and its indication, dispensing the home-kit remedies to the patients, the dosage and repetition of the prescription. • Criteria for JRF and higher center referrals. 	<ul style="list-style-type: none"> • All the 4 health care workers, 1 DEO, 1 MTS and 1 Pharmacist
12/02/21, 01/03/21, 06/03/21, 10/03/21	RRI(H), Guwahati <ul style="list-style-type: none"> • Dr. Ranjit Sonny, RO(H), S-1 • Dr. Liyi Karso, RO(H), S-1 	<ul style="list-style-type: none"> • Training on Manual of SCSP project • Training on Use of Medicine kit and Data Collection for SCSP project • Training on data entry for weekly reporting • Training on Use of Medicine kit and Data Collection for SCSP project 	<ul style="list-style-type: none"> • 2 JRFs • 1 DEO • 1 MTS • 1 Pharmacist • 5 HCWs
15/02/21, 22/02/21, 23/02/21	<ul style="list-style-type: none"> • CRU(H), Siliguri 	Training of HCWs <ul style="list-style-type: none"> • Orientation program for HCWs • How to dispense homeopathic medicines. 	<ul style="list-style-type: none"> • 11 HCWs
20/02/21, 08/03/21		Training for JRFs <ul style="list-style-type: none"> • Workshop for filling up the annexures, operating google forms. • Laboratory training for using glucometer, haemoglobinometer. • How to monitor the HCAM project and evaluating the feedback from field. 	<ul style="list-style-type: none"> • 2 JRFs

Date of training	Conducted by	Topic	Participants
12/02/21 and 15/02/21, 09/03/21	DDPRCRI(H), Noida • Dr. Padmalaya Rath, RO(H), S-3	Training of JRFs, DEO, Phramacist and MTS • How to take case in the OPD and maintainance of the follow ups • Prescription of most commonly indicated medicines on field • Dosage and repetition of the medicine • Maintainance of records in the excel formats	• 2 JRFs • 1 DEO • 1 Pharmacist • 1 MTS
27/02/21, 01/03/21,	DDPRCRI(H), Noida • Dr. Jyoti Chhikara, JRF(H) • Dr. Ashutosh Kumar, JRF(H)	Training of the HCWs • How to conduct the household survey • How to give the commonly indicated medicines from the home remedy kit • When to refer the patients to the JRFs	• 5HCWs
22/02/21, 25/02/21, 26/02/21, 01/03/21, 02/03/21, 08/03/21, 09/03/21, 19/03/21	HDRI, Lucknow • Dr. K.K. Avinash, RO(H), S-1	Training of the JRFs, Phramacist, DEO, MTS, HCWs • Duties of employees concerned with SCSP camp as per booklet provided by Hqrs. • Training imparted to the JRFs regarding prescription of the commonly indicated medicines on field, maintaining record of the data. • Training imparted to the HCWs regarding how to fill the demographic survey format, when to refer the patients to the JRFs	• 2 JRF • 1 DEO • 1 MTS • 1 Pharmacist • 6 HCWs



Figure 50: Training of the HCWs, Bhubaneswar



Figure 51: Training of the HCWs, Guwahati



Figure 52: Training of the Staff, Hyderabad

5. MANPOWER ENGAGED

- **Doctors**
Research Associates, Senior Research Fellow, Junior Research Fellow - 37
- **Other staff**
Pharmacist, Data entry operator MTS- 38
- **No. of Health care workers involved** -115

ACHIVEMENTS

- ✓ Numbers of health Camps: 696
- ✓ Household Survey conducted: 49410
- ✓ Number of patients benefited in health camp OPD - 8480.
- ✓ Number of Patients given medicine by HCW for common ailments:18010
- ✓ Number of Patients Referred by HCW to SRF/JRF -4391
- ✓ Commonly identified diseases in OPD- Osteoarthritis, low back pain, arthralgia, dermatitis and eczema, gastritis, Lower Respiratory Tract Infection, Upper Respiratory Tract Infection, Cervical and lumbar spondylosis.
- ✓ Commonly identified disease in the Household survey- Upper Respiratory Tract Infection, gastritis, injury, stress/ difficulty in sleeping, teething troubles in children.

Table 38 :Institute wise details are placed below: -

Name of the Institute/Unit	No. of households surveyed	No. of family members	Treatment Provided			
			Allopathy	Homoeopathy	Other AYUSH modalities	Home based care
DACRRI(H), Kolkata	5190	18744	6926	943	48	13
CRU(H), Siliguri	5616	25197	8391	8089	42	0
DPU(H), Bhubaneswar	3730	14048	4203	245	73	0
RRI(H), Guwahati	1818	6161	440	32	5	0
RRI(H), Imphal	1667	6625	1075	3	0	25
RRI(H), Agartala	2565	7950	2985	243	41	0
NHRIM(H), Kottayam	1085	4305	808	39	8	0
RRI(H), Gudivada	3647	9769	2757	96	6	0
HRID, Chennai	1998	7120	196	3	1	0
HRID, Puducherry	7954	28238	3861	30	15	0
DSU(H), Hyderabad	2340	8757	156	0	0	0
CRU(T), Tirupati	2606	7879	3646	25	11	0
RRI(H), Shimla	1017	1238	2	5	0	0

Name of the Institute/Unit	No. of households surveyed	No. of family members	Treatment Provided			
			Allopathy	Homoeopathy	Other AYUSH modalities	Home based care
RRI(H), Mumbai	730	1343	66	4	0	0
DDPRCRI(H), Noida	3253	14781	747	21	4	0
HDRI, Lucknow	1668	6704	1056	34	25	80
CRI(H), Jaipur	2526	4410	1268	41	46	0

Table 39: Unit wise details of the patients seen in OPD

Name of the Institute/Unit	Name of Village	No. of Camps	No. of Patients benefitted	Commonly identified diseases
DACRRI(H), Kolkata	<ul style="list-style-type: none"> • Ward No. 1 • Ward No. 2 	46	910	<ul style="list-style-type: none"> • Dermatitis and eczema-110 • Osteoarthritis- 76 • Upper Respiratory Tract Infection - 57 • Arthralgia- 46
CRU(H), Siliguri	<ul style="list-style-type: none"> • Gossainpur gram panchayat 	35	526	<ul style="list-style-type: none"> • Low Back Pain- 40 • Dermatitis and eczema-35 • Gastritis-25 • Osteoarthritis- 17 • Arthralgia-17 • Ringworm-15
DPU(H), Bhubaneswar	<ul style="list-style-type: none"> • Pratapsasana 	30	513	<ul style="list-style-type: none"> • Arthralgia- 69 • Osteoarthritis- 66 • Gastritis- 57 • Dermatitis and eczema- 16 • Bronchial asthma – 14
RRI (H), Guwahati	<ul style="list-style-type: none"> • Bhaskar Nagar 	45	512	<ul style="list-style-type: none"> • Arthralgia- 80 • Osteoarthritis- 65 • Gastritis-46 • Dermatitis-30 • Upper Respiratory Tract Infection-21 • Backache-17
RRI(H), Imphal	<ul style="list-style-type: none"> • Lamshang 			<ul style="list-style-type: none"> • Osteoarthritis- 39 • Arthralgia-23 • Backache-13 • Gastritis- 15

Name of the Institute/Unit	Name of Village	No. of Camps	No. of Patients benefitted	Commonly identified diseases
RRI(H), Agartala	<ul style="list-style-type: none"> • Jirania Nagara panchayat 	47	348	<ul style="list-style-type: none"> • Gastritis-37 • Upper Respiratory Tract Infection-27 • Dermatitis 24 • Osteoarthritis- 23 • Arthralgia-16 • Injury-19 • Fever-18 • Pain in back-14
NHRIM(H), Kottayam	<ul style="list-style-type: none"> • Kurichi • Ettumanoor 	43	206	<ul style="list-style-type: none"> • Upper Respiratory Tract Infection -26 • Lower Respiratory Tract Infection-22 • Dermatitis-19 • Chronic Obstructive Pulmonary Disease-16 • Spondylitis-13 • Varicose veins-12
RRI(H), Gudivada	<ul style="list-style-type: none"> • Telaprolu • Kanumolu 	41	1262	<ul style="list-style-type: none"> • Osteoarthritis- 291 • Arthralgia- 81 • Low Back Pain- 78 • Upper Respiratory Tract Infection-76 • Chronic Obstructive Pulmonary Disease -36 • Cervical spondylitis- 28 • Sciatica- 21 • Lumbar spondylitis- 12
HRID, Chennai	<ul style="list-style-type: none"> • Kovalam 	44	413	<ul style="list-style-type: none"> • Osteoarthritis- 118 • Lumbago- 53 • Upper Respiratory Tract Infection -39 • Hypertension- 33 • Myalgia- 35 • Diabetes Mellitus – 14 • Cervical Spondylosis-11 • Lumbar Spondylosis- 6

Name of the Institute/Unit	Name of Village	No. of Camps	No. of Patients benefitted	Commonly identified diseases
HRID, Puducherry	<ul style="list-style-type: none"> • Moolakum 	46	422	<ul style="list-style-type: none"> • Upper Respiratory Tract Infection-35 • Diabetes Mellitus - 35 • Gastritis- 37 • Osteoarthritis- 41 • Hypertension-37 • Migraine- 14
DSU(H), Hyderabad	<ul style="list-style-type: none"> • Mallapur 	40	431	<ul style="list-style-type: none"> • Upper Respiratory Tract Infection -49 • Myalgia-26 • Osteoarthritis-48 • Gastritis- 33 • Diabetes Mellitus - 20 • Hypothyroidism -17
CRU(T), Tirupati	<ul style="list-style-type: none"> • Chandragiri Rural 	45	789	<ul style="list-style-type: none"> • Osteoarthritis- 208 • Gastritis- 49 • Arthralgia-50 • Lumbago-27 • Cervical Spondylosis- 20 • Lumbar Spondylosis- 41 • Diabetes Mellitus-49 • Upper Respiratory Tract Infection-29 • Dermatitis-27 • Hypothyroidism -9
RRI(H), Shimla	<ul style="list-style-type: none"> • Pujarali • Rajhana 	44	164	<ul style="list-style-type: none"> • Upper Respiratory Tract Infection-18 • Arthritis- 16 • Hypertension-7 • Myalgia-6 • Migraine-4 • Pyrexia-4
RRI(H), Mumbai	<ul style="list-style-type: none"> • Ghatkopar • Chembur 	41	357	<ul style="list-style-type: none"> • Osteoarthritis-31 • Gastritis-14 • Myalgia-12 • Sciatica-11 • Cervical Spondylosis- 8 • Lower Respiratory Tract Infection -8 • Lumbar Spondylosis-7 • Poly Cystic Ovarian Disease-5

Name of the Institute/Unit	Name of Village	No. of Camps	No. of Patients benefitted	Commonly identified diseases
DDPRCRI(H), Noida	<ul style="list-style-type: none"> • Bisrakh • Chipyana Buzurg 	41	359	<ul style="list-style-type: none"> • Gastritis- 35 • Arthralgia-30 • Lower Respiratory Tract Infection -19 • Osteoarthritis-19 • Diabetes Mellitus-15 • Migraine-9 • Hypothyroidism- 8 • Lumbago-7
HDRI, Lucknow	<ul style="list-style-type: none"> • Natkur • Kasba Bijnor 	31	325	<ul style="list-style-type: none"> • Gastritis-49 • Mylagia-29 • Sczema-28 • Injury-18 • Arthralgia-18 • Headache-14 • Osteoarthritis-8
CRI(H), Jaipur	<ul style="list-style-type: none"> • Jhotwara • Kanota 	35	638	<ul style="list-style-type: none"> • Gastritis-71 • Dermatitis-60 • Headache-59 • Hairfall-55 • Lower Respiratory Tract Infection-29 • Arthralgia-28 • Low Back Pain-16

Table 40: No. of cases seen by HCW (Disease wise data with Outcome)

Name of the common ailments	Total No. of cases	Improved	Worse	Status Not known	Referred
Minor injury	65	59	0	6	5
Injury	315	242	26	47	43
Fever	403	364	10	29	42
Cold	2501	2266	124	111	75
Diarrhoea	79	71	4	4	15
Indigestion/ Acidity	435	373	27	35	12
Nausea / Vomiting	47	44	0	3	9
Teething Problem	67	64	0	3	3
Stress/ Difficulty in sleep	176	111	32	33	28
Pain	104	27	6	71	87
Joint Pain	1197	825	102	270	94
Ringworm	733	333	359	41	28
Total	6122	4779	690	653	441

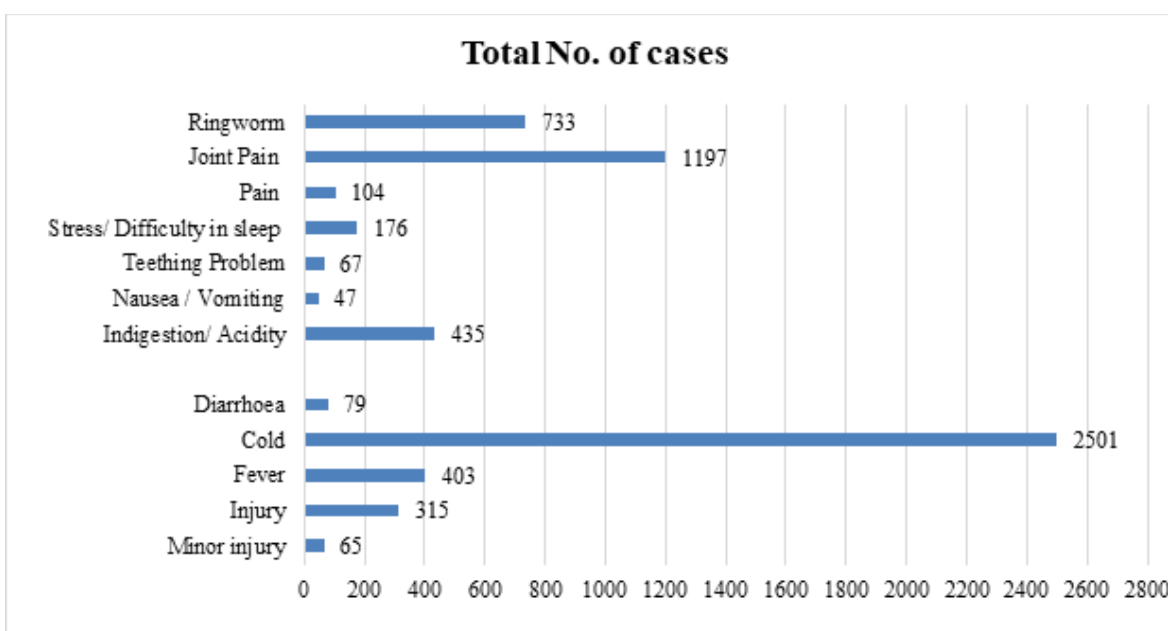


Fig 53: Graphical representation of the disease wise data

Table 41: Details of the medicines provided by the HCWs

Name of the Medicine	No. of Patients	Name of the disease	Outcome				
			Improved	Worse	Same	Status not known	Referred
Arnica montana 30	160	<ul style="list-style-type: none"> Minor injury and sprains 	139	0	2	19	0
Arsenic album 30	1682	<ul style="list-style-type: none"> Upper respiratory tract infections 	1606	3	9	26	38
Belladonna 30	576	<ul style="list-style-type: none"> Headache Upper respiratory tract infections 	558	0	3	15	0
Calcarea phos 6X	70	<ul style="list-style-type: none"> Teething troubles in Children 	33	0	0	36	1
Calendula 30	41	<ul style="list-style-type: none"> Cut injury 	30	0	0	10	1
Chamomilla 30	7	<ul style="list-style-type: none"> Diarrhea-greenish 	5	0	0	2	0
Ferrum phos 6X	167	<ul style="list-style-type: none"> Fever 	130	0	0	37	0

Name of the Medicine	No. of Patients	Name of the disease	Outcome				
			Improved	Worse	Same	Status not known	Referred
<i>Ipecac 30</i>	38	<ul style="list-style-type: none"> Nausea and vomiting 	38	0	0	0	0
<i>Kali phos 6x</i>	55	<ul style="list-style-type: none"> Stress and difficulty in sleeping 	37	1	1	5	12
<i>Magnesia phosphorica 6X</i>	606	<ul style="list-style-type: none"> Painful menses Backache Toothache Bodyache Pain in abdomen 	583	0	6	11	6
<i>Natrum phos 6X</i>	242	<ul style="list-style-type: none"> Indigestion Acidity Vomiting 	230	0	10	2	0
<i>Nux vomica 30</i>	764	<ul style="list-style-type: none"> Indigestion Acidity Burning in chest Pain in abdomen Diarrhea 	660	0	28	32	3
<i>Podophyllum 30</i>	94	<ul style="list-style-type: none"> Diarrhea – yellowish 	72	0	0	19	3
<i>Rhus tox 30</i>	1786	<ul style="list-style-type: none"> Pain in body Pain in joints 	1214	0	193	295	84
<i>Tellurium 30</i>	271	<ul style="list-style-type: none"> Ringworm 	195	38	19	16	3

Table 42: Unit wise details of the cases seen by HCW

Name of the Institute / Unit	Name of the Village	No. of Patients to whom medicine is given	No. of cases referred to JRFs/SRFs	Commonly identified ailments
DACRRI(H), Kolkata	<ul style="list-style-type: none"> Ward No. 1 Ward No. 2 	776	521	<ul style="list-style-type: none"> Minor injury-42 Injury-54 Fever-20 Cold-90 Diarrhoea-5 Indigestion- 437 Nausea-2

Name of the Institute / Unit	Name of the Village	No. of Patients to whom medicine is given	No. of cases referred to JRFs/SRFs	Commonly identified ailments
				<ul style="list-style-type: none"> • Teething troubles-2 • Difficulty in sleeping- 1 • Pain-4 • Jointpain- 82 • Ringworm-31
CRU(H), Siliguri	• Gossainpur Gram Panchayat	6004	191	<ul style="list-style-type: none"> • Minor injury-43 • Injury-276 • Fever-266 • Cold-1843 • Diarrhoea-64 • Indigestion -233 • Nausea -24 • Teething troubles-0 • Difficulty in sleeping-93 • Pain-89 • Jointpain- 298 • Ringworm-703
DPU(H), Bhubaneswar	• Pratapsasana	1565	40	<ul style="list-style-type: none"> • Minor injury-0 • Injury-9 • Fever-18 • Cold-250 • Diarrhoea-2 • Indigestion -261 • Nausea- 5 • Teething troubles-3 • Difficulty in sleeping- 1 • Pain-102 • Jointpain- 283 • Ringworm-28
RRI(H), Guwahati	• Bhaskar Nagar	354	179	<ul style="list-style-type: none"> • Minor injury-30 • Injury-4 • Fever-16 • Cold-39 • Diarrhoea-1 • Indigestion - 6 • Nausea - 2 • Teething troubles - 2 • Difficulty in sleeping - 48 • Pain-23 • Jointpain- 104 • Ringworm-4

Name of the Institute / Unit	Name of the Village	No. of Patients to whom medicine is given	No. of cases referred to JRFs/SRFs	Commonly identified ailments
RRI(H), Imphal	• Lamshang	562	229	<ul style="list-style-type: none"> • Minor injury-10 • Injury-10 • Fever-23 • Cold-98 • Diarrhoea- 3 • Indigestion -17 • Nausea- 11 • Teething troubles -47 • Difficulty in sleeping- 1 • Pain-139 • Jointpain- 118 • Ringworm-0
RRI(H), Agartala	• Jirania Nagara Panchayat	693	157	<ul style="list-style-type: none"> • Minor injury-0 • Injury-54 • Fever-37 • Cold-91 • Diarrhoea- 7 • Indigestion -103 • Nausea -4 • Teething troubles-0 • Difficulty in sleeping-3 • Pain-56 • Jointpain- 132 • Ringworm-49
NHRIM(H), Kottayam	• Kurichi • Ettumanoor	179	280	<ul style="list-style-type: none"> • Minor injury-0 • Injury-9 • Fever-92 • Cold-16 • Diarrhoea- 2 • Indigestion -2 • Nausea -0 • Teething troubles - 0 • Difficulty in sleeping- 3 • Pain-41 • Jointpain- 30 • Ringworm-9
RRI(H), Gudivada	• Telaprolu • Kanumolu	15	914	<ul style="list-style-type: none"> • Minor injury -2 • Injury-15 • Fever-2 • Cold-3 • Diarrhoea-0

Name of the Institute / Unit	Name of the Village	No. of Patients to whom medicine is given	No. of cases referred to JRFs/SRFs	Commonly identified ailments
				<ul style="list-style-type: none"> • Indigestion -0 • Nausea-6 • Teething troubles -0 • Difficulty in sleeping- 0 • Pain-92 • Jointpain- 38 • Ringworm-2
HRID, Chennai	• Kovalam	1263	335	<ul style="list-style-type: none"> • Minor injury -2 • Injury-2 • Fever-150 • Cold-516 • Diarrhoea- 0 • Indigestion -7 • Nausea - 1 • Teething troubles-50 • Difficulty in sleeping- 0 • Pain-196 • Jointpain- 352 • Ringworm-7
HRID, Puducherry	• Moolakum	1808	319	<ul style="list-style-type: none"> • Minor injury -0 • Injury-4 • Fever-115 • Cold-418 • Diarrhoea- 16 • Indigestion-0 • Nausea - 0 • Teething troubles -5 • Difficulty in sleeping-13 • Pain-401 • Jointpain- 325 • Ringworm-41
DSU(H), Hyderabad	• Mallapur	1251	43	<ul style="list-style-type: none"> • Minor injury -0 • Injury-14 • Fever-136 • Cold-276 • Diarrhoea- 12 • Indigestion -44 • Nausea -6 • Teething troubles -2 • Difficulty in sleeping- 11 • Pain-254

Name of the Institute / Unit	Name of the Village	No. of Patients to whom medicine is given	No. of cases referred to JRFs/SRFs	Commonly identified ailments
				<ul style="list-style-type: none"> • Jointpain- 157 • Ringworm-43
CRU(T), Tirupati	<ul style="list-style-type: none"> • Chandragiri Rural 	2333	790	<ul style="list-style-type: none"> • Minor injury - 0 • Injury - 73 • Fever-23 • Cold-302 • Diarrhoea-0 • Indigestion -66 • Nausea -14 • Teething troubles -0 • Difficulty in sleeping- 1 • Pain-490 • Jointpain- 292 • Ringworm-1
RRI(H), Shimla	<ul style="list-style-type: none"> • Pujarali • Rajhana 	64	6	<ul style="list-style-type: none"> • Minor injury -0 • Injury-1 • Fever-1 • Cold-10 • Diarrhoea-0 • Indigestion -4 • Nausea -0 • Teething troubles -0 • Difficulty in sleeping- 0 • Pain-4 • Jointpain- 0 • Ringworm-0
RRI(H), Mumbai	<ul style="list-style-type: none"> • Ghatkopar • Chembur 	151	357	<ul style="list-style-type: none"> • Minor injury -0 • Injury-1 • Fever-4 • Cold-35 • Diarrhoea-0 • Indigestion-12 • Nausea-0 • Teething troubles -0 • Difficulty in sleeping- 0 • Pain-44 • Jointpain-33 • Ringworm-0
DDPRCRI(H), Noida	<ul style="list-style-type: none"> • Bisrakh • Chipyana Buzurg 	618	12	<ul style="list-style-type: none"> • Minor injury -0 • Injury-5 • Fever-18

Name of the Institute / Unit	Name of the Village	No. of Patients to whom medicine is given	No. of cases referred to JRFs/SRFs	Commonly identified ailments
				<ul style="list-style-type: none"> • Cold-41 • Diarrhoea-1 • Indigestion -35 • Nausea -1 • Teething troubles -3 • Difficulty in sleeping- 7 • Pain-40 • Jointpain- 133 • Ringworm-58
HDRI, Lucknow	<ul style="list-style-type: none"> • Natkur • Kasba Bijnor 	227	4	<ul style="list-style-type: none"> • Minor injury -0 • Injury-2 • Fever-5 • Cold-1 • Diarrhoea- 2 • Indigestion -0 • Nausea -0 • Teething troubles -0 • Difficulty in sleeping- 0 • Pain-6 • Jointpain- 14 • Ringworm-0
CRI(H), Jaipur	<ul style="list-style-type: none"> • Jhotwara • Kanota 	147	14	<ul style="list-style-type: none"> • Minor injury -0 • Injury-3 • Fever-6 • Cold-0 • Diarrhoea- 1 • Indigestion -2 • Nausea -4 • Teething troubles -0 • Difficulty in sleeping- 4 • Pain-37 • Jointpain- 9 • Ringworm-23

PUBLICATIONS AND LIBRARY



MONOGRAPH ON
HOMOEOPATHIC DRUG
TINOSPORA CORDIFOLIA
(Opoy)

Clinical Research Studies
Series - III

MONOGRAPH ON
HOMOEOPATHIC DRUG
BELLIS PERENNIS

DRUGS OF ANIMAL SOURCES
USED IN HOMOEOPATHY

BRONCHIAL ASTHMA

NEW DRUGS
PROVED
BY
CCRH

MONOGRAPH ON
HOMOEOPATHIC DRUG
ABROMA AUGUSTA FOLIA

MONOGRAPH ON
HOMOEOPATHIC DRUG
ATISTA INDICA

Agro-techniques of
Medicinal Plants
Used in Homoeopathy

GOOD CLINICAL
PRACTICE
GUIDELINES FOR
CLINICAL TRIALS IN
HOMOEOPATHY

Thea chinensis

STANDARDISATION OF
HOMOEOPATHIC DRUGS
VOLUME - 4

STANDARDISATION OF
HOMOEOPATHIC DRUGS
VOLUME - 1

Drug Proving

Standardisation of
Homoeopathic Drugs

HOLARRHENA ANTIDIYENTERICA

Handbook of recent trends in
HOMOEOPATHY FOR INFECTIOUS DISEASES
India and abroad

Clinical Research Studies
SERIES - I

MONOGRAPH ON
HOMOEOPATHIC DRUG
HYDROSCYLE ASDRIDGE
(Almond)

PUBLICATIONS

Research in different arenas of Homoeopathy conducted by CCRH is propagated and disseminated worldwide through apt documentation and publications. Documentation and Publication section plays a major role in aiding the publishing of all research findings thereby enriching the knowledge pool of homoeopaths.

The periodicals published by the Council include CCRH Newsletter and Indian Journal of Research in Homoeopathy. CCRH Newsletter is published quarterly giving a glimpse of the activities carried out in all the Units/Institutes of the Council in that quarter. IJRH, an open access peer-reviewed journal of the Council publishes the research outcomes of the practitioners, researchers, and students. Authors world over submit their manuscripts on www.journalonweb.com/ijrh which undergo a double blind peer-review process to get them published in IJRH.

Periodical publications

1. Indian Journal of Research in Homoeopathy (IJRH)

In its endeavour to reach out globally, the Council made its journal IJRH, an open access online journal in July 2013. It focuses on original research and is an important platform for publishing the research outcomes of various studies conducted by Council and outside. There are 832 authors and 374 reviewers registered with the journal at present. During the reporting period, 110 submissions and 43 rejections were done in the journal portal. The acceptance rate for the year 2020 was 36%.

During the reporting period, the Council has published four issues: IJRH Vol 14 No. 2, Vol 14 No. 3, Vol 14 No. 4 and Vol 15 No. 1. In these four issues, 23 publications were by the Council's officials and 12 were others'.

2. CCRH Newsletter

CCRH Newsletter, a quarterly publication that provides up-to-date information about the conducted activities of Council in various areas of research, participation in and organization of conferences, seminars, arogya fairs etc. It provides information about the meetings and conferences, participation in Arogya Melas, seminars, medical conferences, workshops, new research publications of the Council and national/ international recognition of the scientists. During the last one year, volumes 92, 93, 94, 95, 96 & 97 were published by the CCRH.



3. Annual Report (2019-2020)



Annual Report highlights major achievements, success stories, new initiatives undertaken during the year 2019-2020. It also showcases, human resource development activities, important scientific and academic program and IEC activities during the year.

4. Books/Magazines

The Council disseminates its research outcomes to researchers and medical/ homoeopathic fraternity in the form of books. During the reporting period, the CCRH has published 01 magazine.

Table 42: Research studies published by CCRH with brief outcomes

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
1.	A Multidisciplinary Management Framework for the Treatment of Benign Prostatic Hyperplasia with Focus on Homoeopathy: A Review	Homoeopathic Links E first, 2020	The review offers a holistic framework for management of BPH that is inclusive of modifiable lifestyle factors alongside homoeopathic treatments. It further underscores that the condition may be cost-effectively managed through homoeopathy to bring about better QoL among people with BPH. Lifestyle optimisation and management of metabolic risk factors may reduce the progression of BPH.
2.	Psychometric Assessment of Morbid Fear for COVID-19 and its Homoeopathic Management - a treatment perspective through case reports	Homoeopathic Links Volume 3, Issue 2, Page No.235-40, 2020	Fear of an infection is posing a major threat in the current coronavirus disease 2019 (COVID-19) crisis. Fear of infection in any pandemic crisis remains the same even after the advent of modern medical advancements. This morbid fear of risk of infection has more traumatic effect psychologically than reality of succumbing to an infection and its recovery. Nevertheless, the cause of the fear and its management is very important in this COVID-19 crisis situation. Homoeopathy system of medicine offers a safe, palatable, economical and an eco-friendly management solution to tackle this morbid fear. Two cases of morbid fear of COVID-19 infection treated homoeopathically with positive outcome are presented in this study.

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
3.	To study the miasmatic analysis in the clinical presentation of the Type 2 Diabetes mellitus(t2dm) patients	International Journal of Homoeopathic Sciences Volume 4, Issue 3, Page no. 291-297, 2020.	In these 30 cases of T2DM, 12 cases (40%) were mixed miasmatic diseases, 9 cases (30%) were psora-syphilitic, 7 cases (23.33%) were psoric, 2 cases (6.67%) were Psora -sycotic. Wilcoxon signed rank test showed a statistically significant improvement different between the before and after treatment ($Z = -4.963$, $p < 0.001$). So, the result is showing that treating the T2DM with an understanding of the Miasmatic analysis shows much efficacy.
4.	Optimising the use of polar symptoms in Homoeopathy: Introduction to a pilot study of prognostic factor research in chronic cough	Homoeopathic Links Volume 14, Issue 3, Page no. 200-210, 2020.	At the fourth follow-up, three medicines with >10 cases having good result were identified: <i>Phosphorus</i> ($n = 20$), <i>Pulsatilla</i> ($n = 19$) and <i>Sulphur</i> ($n = 13$). For this introductory article, some results were compared with the existing data, reflect on discrepancies between the existing data and research outcome and reflect on future use, especially in respiratory tract infections (RTIs). It can be concluded that in improving the homoeopathic method and its practical use, priority should be given to polar symptoms, especially related to RTIs.
5.	Hemorrhagic ovarian cyst treated with constitutional Homoeopathy: A case report	International Journal of Homoeopathic Sciences. Volume 4, Issue 4, part C, Page no. 143-147, 2020.	Homoeopathy proved as painless, safe and cost-effective treatment for Hemorrhagic Ovarian cyst.
6.	Anatomical and Phytochemical Standardization of Terminalia Chebula and Syzygium Jambolanum: A Highly Used Medicinal Plant in India.	Plant Cell Biotechnology and Molecular Biology Volume 21, Issue 43 44, Page No. 31-41, 2020.	Microscopic study of <i>S. jambolanum</i> reveals the presence of scattered vascular bundles, tegmen consisting brachysclereids and macrosclereids with broad and narrow lumen. Whereas <i>T. chebula</i> shows the fragment of epidermis with epicarp, fragments of parenchymatous cell fragment of rosette crystal. Preliminary phytochemical screening detects the different compounds viz., carbohydrates, proteins, amino acids, steroids, glycosides, alkaloids, tannins and phenolic compounds. HPTLC 3D densitogram at 270 nm shows comparative Rf value of comparable to samples with standard value and derivatization with sample as that of standard at Rf value 0.78 for gallic acid equal to <i>T. chebula</i> and Rf value 0.41 gallic acid equal to <i>S. jambolanum</i> extract.

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
7.	Adverse events and Homoeopathy	Homoeopathic Links Volume 46, Issue 7, Page no.43-45, 2020.	Adverse events in homoeopathic practise including those that are interpreted as homoeopathic aggravations are common. This demonstrates how important it is for clinicians to include the concept of adverse events in their theory and clinical practise. Adopting safety precautions will improve the reliability of the homoeopathic profession and enhance patient safety. Consequently, a surveillance program is recommended and a criterion needs to be framed.
8.	Molluscum Contagiosum and Homoeopathy	Advancement in Homoeopathic Research Volume 5, Issue 2, Page no.16-20, 2020	Homoeopathy has an effective solution for a range of viral infections which includes molluscum contagiosum also. It is to be remembered that the medicines chosen will be based on the individual symptoms of the patient and not on the pathological entity of molluscum. One such documented case report of a 17 years male patient is illustrated in the following article, where <i>Silicea</i> 200 was prescribed on the constitutional framework after consideration of generalities and particulars. Improvement was documented by photographs and dermatology life quality index (DLQI) was also assessed during every follow-ups. Within 4 months all lesions of molluscum contagiosum on face and hand were annihilated.
9.	A Review on Coagulopathy in COVID-19 and its Homoeopathic Management	International Journal of Homoeopathic Sciences Volume 4, Issue 3, Page 369-375, 2020.	The COVID-19-associated coagulopathy (CAC) are distinct from those seen with bacterial Sepsis-Induced Coagulopathy (SIC) and disseminated intravascular coagulation (DIC). The CAC usually shows increased D-dimer and fibrinogen levels with minimal abnormalities in Prothrombin time and platelet count. Homoeopathic remedies are proved to be effective in thrombolysis can be thought of primarily as an adjuvant to conventional treatment for an early recovery.
10.	Antiviral Activity of Belladonna During Japanese Encephalitis Virus Infection via Inhibition of Microglia Activation and Inflammation Leading to Neuronal Cell	ACS Chemical Neuroscience Volume 11, Issue 21, Page no. 3683-3696, 2020.	A hydroalcoholic formulation of belladonna (B200) consisting of atropine and scopolamine was developed and showed its antiviral efficacy against JEV infection. B200 treatment increases neuronal cell survival by reducing JEV induced cytopathic effects which were evident from significant reduction in necrotic cell population by flow-cytometry analysis and

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
	Survival		caspase 3 and 8 enzymatic activities. B200 treatment was found to reduce the intracellular JEV level observed by significant reduction in JEV-fluorescein isothiocyanate (FITC) expression in both neurons and microglia. Because microglia plays a crucial role in JEV pathogenesis, we further investigated the anti-JEV effects of B200 on human microglia cells and elucidated the mechanism of action by performing whole-transcriptome sequencing. Gene expression analysis revealed that B200 reduces the proapoptotic and inflammatory gene expression observed by significant reduction in <i>BAD</i> , <i>BAX</i> , <i>CASP3</i> , <i>CASP8</i> , <i>IL1B</i> , and <i>CXCL10</i> and increase in <i>IL10</i> responsive gene expression. Interestingly, our molecular docking analysis revealed that atropine and scopolamine interact with the His288 residue of NS3 protein, a crucial residue for RNA unwinding and ATPase activity that was further confirmed by degradation of NS3 protein. Drug likeness, ADME (absorption, distribution, metabolism, and excretion), and toxicity analysis further suggests that atropine and scopolamine both cross the blood-brain barrier, which is crucial for effective treatment of Japanese encephalitis (JE).
11.	The Effect of Iodium 30C on Experimental Visceral Leishmaniasis	Homeopathy Volume 109, Issue 4, Page 213-223,2020.	<i>Iodium</i> -treated animals showed a significantly reduced parasite load (to 1503 ± 39 Leishman Donovan Units, LDU) as compared with the infected controls (4489 ± 256 LDU) ($p < 0.05$): thus, the mean therapeutic efficacy of <i>Iodium</i> 30C was 66.5%. In addition, the population of CD4 ⁺ and CD8 ⁺ T cells was significantly increased ($p < 0.05$) after treatment. No toxicity was observed, as evidenced from biochemical and histopathological studies of the liver and kidneys. Efficacy of <i>Iodium</i> 30C prophylaxis was 58.3%, while the therapeutic efficacy of amphotericin B was 85.9%.
12.	In Vitro Assessment of Homeopathic Potencies of <i>Hydrastis canadensis</i> on Hormone-Dependent and -Independent Breast Cancer	Homeopathy Volume 109, Issue 4, Page no 198-206, 2020.	Different potencies of <i>Hydrastis</i> displayed selective cytotoxic effects against MCF 7 cells, but only marginal effects against MDA-MB-468. The maximum cytotoxicity was established in the case of 1C following 72 hours of treatment. Treatment of breast cancer cells revealed an increase in the G0/G1 cell

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			population, along with an increase in the caspase 3 levels and induction of apoptosis.
13.	Self care practices and psychological distress among diabetic patients in Manipur during COVID-19: A scenario from the North East	Diabetes & Metabolic Syndrome: Clinical Research & Reviews Volume 15, Issue 1, Page no 93-98, 2021.	The study enrolled a total of 108 subjects with the mean age being 56.3 years. The everyday healthy eating plan was followed by 76.85% (N = 83) subjects and daily physical activity for at least 30 min performed by 50% (54) subjects. Only 12.04% (13) subjects tested their blood sugar and 6.48% (7) respondents checked their feet daily. There was no significant difference found between the SDSCA and psychological distress based on socio-demographic variables. Participants in this study typically reported a good level of self-care behavior particularly for diet followed by exercise whereas the self-care behavior was not adequate for foot care and blood-glucose testing. People were not too anxious about COVID-19. This study highlighted the fact that people with diabetes should monitor their blood sugar levels more often along with their foot care.
14.	Pathogenesis and Molecular Targets in Treatment of Diabetic Wounds. (Book Chapter)	Obesity and Diabetes Page no.747-758, 2020.	Wound healing in diabetes is remarkably delayed due to various underlying pathological processes. Diabetes alters all the stages of wound healing such as remodeling, proliferation, hemostasis, and inflammatory phases. In diabetic patients, minor skin lesions may lead to unhealed chronic ulcers, and ultimately result in infection, gangrene, even amputation. Physiological factors responsible for the delay of wound healing include impaired growth factor and cytokine production, angiogenic response, macrophage and neutrophil function, collagen accumulation, and variation in the ratio of collagen types leading to weakened healing response. Key molecular targets for the local / pharmacologic treatment of wound healing include growth factors and other molecules, absorbable biomaterials, and cell regeneration therapy.
15.	Curative Evidence of Individualised Homoeopathic Treatment in a Case of Alopecia Areata	Homœopathic Links eFirst,2020.	Individualised homoeopathic intervention may be a potential alternative in treatment of alopecia, though further research with better methodology is suggested.

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
16.	Homoeopathic management of depression with comorbid eczema: A case report	International Journal of Homoeopathic Sciences Volume 4, Issue 4, Page no.212-215, 2020.	In this case, prominent mental symptoms considered were ailments from death of loved one, weeping, involuntary sighing, reserved, <i>Ignatia</i> 200 was prescribed based on the basis of symptoms similiarity. got marked improvement in depressive symptoms within 2 months duration. Skin symptoms were treated symptomatically by selecting <i>Natrum Muriaticum</i> 200, it is chronic of first given remedy. Within 1 month, showed general improvement in mental and physical plane.
17.	Homoeopathic treatment of chronic urticaria – A case series	Indian Journal of Research in Homoeopathy Volume 14, Issue 4, Page no.267-278, 2020.	This is a case series of five patients suffering from chronic urticaria having erythematous lesions, intense itching, redness and swelling treated at the Dermatology outpatient department of Dr. D. P. Rastogi Central Research Institute for Homoeopathy, Noida, Uttar Pradesh, India. The patients were prescribed indicated constitutional Homoeopathic medicines. Changes in haematological and serological tests, Measure Yourself Medical Outcome Profile 2 and Urticaria Activity Score summed over 7 days at baseline and at the end of treatment showed reasonable improvement in disease as well as in the quality of life. Homoeopathic medicines such as <i>Apis mellifica</i> , <i>Calcarea carbonica</i> , <i>Rumex crispus</i> , <i>Pulsatilla</i> and <i>Histamine</i> were found useful.
18.	Homoeopathic Treatment of Viral Warts with <i>Calcarea phosphorica</i>	Indian Journal of Research in Homoeopathy Volume 14, Issue 4, Page no.279-286, 2020.	A 4 year old girl responded well to individualised homoeopathic treatment, i.e. <i>Calcarea phosphorica</i> 200 in single dose with complete recovery within 1 month without subsequent relapse. Even though the medicine is mentioned in the fourth grade against the rubric 'Face – Warts' in the Complete Repertory and is not used commonly in the cases of warts, it acted beneficially. Hence, this case emphasises the importance of individualised homoeopathic treatment based on characteristic general symptoms.
19.	Prevalence of Stress and Anxiety among the Bank Employees in India during Lockdown due to Covid-19	International Journal of Research and Analytical Reviews Volume 7, Issue 3, Page no.719-730, 2020.	This study shows that stress and anxiety was highly prevalent among bank employees during COVID-19, irrespective of the bank in which they are working. A sensible idea to prevent this avoidable anxiety and stress is to provide awareness classes and counselling by professionals. Only 12.9% of the respondents

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			have taken immune booster. We suggest that the use of immune booster from AYUSH systems may also help people to get rid of stress and anxiety along with proper precautionary.
20.	Evaluation of outcome of Homeopathic treatment in Probable Menieres disease - case series	International Journal of Ayush case reports Volume 4, Issue 3, Page no.176-188, 2020.	<p>Out of the 16 cases, 7 cases had complete control of vertigo episodes [Category A] and TFI score became 0; 4 cases had complete control of vertigo episodes and clinically meaningful reduction in TFI score [13-point reduction between the before and after treatment score]; 3 cases had complete control of vertigo episodes but there was no clinically meaningful reduction in TFI score after 2 years of Homeopathic treatment. 2 cases had no improvement for either vertigo or tinnitus and were classified under category D and category F respectively as per the guidelines. Shaipro-Wilks Test showed a significant departure from normality. The median score reduced from 61.58 to 28.95. There was statistically significant change in TFI scores at baseline and end.</p> <p>Most improvements were seen in patients being treated with <i>Pulsatilla nigricans</i> [4 cases], <i>Causticum</i> [4 cases] and <i>Calcarea carbonica</i> [3 cases].</p>
21.	Anatomical And Phytochemical Standardization Of Terminalia Chebula And Syzygium Jambolanum: A Highly Used Medicinal Plant In India.	Plant Cell Biotechnology and Molecular Biology Volume 21, Issue 43-44, Page No.31-41, 2020.	Various pharmacognostical characters were observed in this study can be an evidence of the effective and standardized method of HPTLC analysis which is simple, rapid, precise and accurate to further research these medicinal plants. Meanwhile, the results of this paper deal with pharmacognostical and HPTLC finger print analysis on the <i>T. chebula</i> and <i>S. jambolanum</i> in an attempt to mitigate the adulteration of the crude drug.
22.	Homoeopathic Management of Acute Alcohol Withdrawal Syndrome: A Retrospective Cohort Study	Journal of the American Institute of Homoeopathy Volume 113-4, Page No.17-27,2020.	Out of the 53 cases chosen for the study, 32 cases were of moderate withdrawal and 21 cases were of severe withdrawal. A paired sample t test showed that there was a statistically significant difference in the Mean CIWA score ($t=7.76, p<0.001$) after 12 hours of treatment, with a mean difference of 5.96 ± 5.59 with CI (4.42,7.5). Among the 53 cases, Delirium Tremens (DTs) was present in

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			12 (22.6%) cases. Seizures were absent in all 53 cases and all cases were treated only by homoeopathic medications and method. Homoeopathic medications used and found to be effective were <i>Arsenicum album</i> , <i>Ranunculus bulbosus</i> , <i>Nux vomica</i> and <i>Sulphur</i> . All cases completed the stipulated follow-up period and no cases were referred out due to adverse drug reactions. This retrospective cohort study demonstrates that homoeopathic medications were found to be effective in the safe management of Acute Alcohol Withdrawal Syndrome. The results should be further confirmed by conducting randomized controlled trials.
23.	Pathogenesis and Molecular Targets in Treatment of Diabetic Wounds	Obesity and Diabetes Page no.747-758,2020.	In diabetic patients, minor skin lesions may lead to unhealed chronic ulcers, and ultimately result in infection, gangrene, even amputation. Physiological factors responsible for the delay of wound healing include impaired growth factor and cytokine production, angiogenic response, macrophage and neutrophil function, collagen accumulation, and variation in the ratio of collagen types leading to weakened healing response. Key molecular targets for the local/pharmacologic treatment of wound healing include growth factors and other molecules, absorbable biomaterials, and cell regeneration therapy.
24.	An Observational Study in Manipur State, India on Preventive Behavior Influenced by Social Media During the COVID-19 Pandemic Mediated by Cyberchondria and Information Overload	Journal of Preventive Medicine and Public Health Volume 54, Issue 1, Page no.22-30.	The study recruited 767 participants with a mean age of about 45 years. Most of the participants (>90%) engaged in preventive behaviors, which were influenced by the extent of information received through social media platforms ($\beta=3.297$; $p<0.001$) and awareness of infection when a family member tested positive ($\beta=29.082$; $p<0.001$) or a neighbor tested positive ($\beta=27.964$; $p<0.001$). The majority (63.0%) of individuals often searched for COVID-19 related news on social media platforms. The mean±standard deviation scores for cyberchondria and information overload were 9.09 ± 4.05 and 8.69 ± 2.56 , respectively. Significant and moderately strong correlations were found between cyberchondria, information overload, and perceived vulnerability to COVID-19.

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
25.	Safety Evaluation of Syzygium jambolanum on the Development of Zebrafish Embryos	Indian Journal of Pharmaceutical Education and Research Volume 55, Issue 1, Page no 1-7,2021.	Results suggest the safety of Syzygium jambolanum mother tincture at low concentrations (1% and 5%) on development of zebrafish embryos. The embryo toxicity induced by 10% concentration of Syzygium jambolanum may be attributed to the ethanol. Further developmental toxicity studies on animals need to be carried out to validate the results obtained followed by clinical validation.
26.	A review on prevention of diseases through homoeopathy	International Journal of Homoeopathic Science Volume 4, Issue 2, Page no 104-109, 2020.	Available literature stimulates ideas for future research studies to confirm the effectiveness of homoeopathic medicines in prevention of acute and chronic diseases in humans, plants as well as animals. No adverse events were reported in any of the homoeopathic studies making them safest method of treating and preventing illnesses. Key limitations are found in few of the included studies, in particular methodological inconsistencies, failure to conduct intention-to-treat analysis and selective reporting, which have to be overcome in future studies. Further Meta analyses and Systematic reviews of preventive trials are warranted. Role of Homeopathy in Prophylaxis will become more unequivocal with further rigorous research with high quality clinical trials, experimental epidemiological studies, in vitro and in vivo research studies based on appropriate study designs along with integration of the fundamental principles.
27.	Pseudochronic Disease & Its Homoeopathic View	International Journal of Advance Research Vol.10, Issue 4, 2020.	The growing health care consciousness among the people and planners both globally and more specifically in India have also shown its impact. The life expectancy of an average Indian has been systematically, but gradually going up. In 1947, during India's independence days the life expectancy of an average Indian was merely 50 years (fty) only. It has gone up to 64.5 years in 2005, 66.5 years in 2010, 67.7 years in 2013 and in 2014 it was 68 years. Japan at present is at the top with 83.6 years in 2014 with 83.3 in 2013. The improved access to health care facilities and nutritional care has largely contributed. The imposition of strict legal measures yet another mile-stone. The various health awareness programmes and vaccines for different infectious diseases have also started reducing the disease burden.

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			Various health care facilities for the world mothers, infants and children have also contributed a lot. Last but not the least, the growing demand for homoeopathic medicines in India and even abroad is an ample testimony of its role in health care delivery system especially in true chronic diseases, our approach to take care of the pseudo chronic related diseases on an individual typology system maintaining our prescription protocols is the take-home message of this assignment.
28.	A Case of BCG Vaccine Induced Eruption Treated with Homoeopathic Medicine	International Journal of Advance Research Vol. 10, Issue 4, 2020.	<i>Thuja</i> 30 was selected after considering the mental generals, physical generals and particular symptoms of the patient. On reportorial analysis <i>Thuja</i> has scored highest score (8), covering 5 out of 5 symptoms. Next to <i>Thuja</i> the medicine was <i>Silicea</i> but <i>Silicea</i> is thermally chilly and <i>Thuja</i> is thermally hot and the patient thermal matched with the <i>Thuja</i> along with totality. So <i>Thuja</i> was selected and it yields good result. Hence <i>Thuja</i> in 30C potency was prescribed 6 doses, 4gls. twice a day for 3 days and then after Placebo - 4gls. twice a day for next 12 days. The case was again followed-up after 15 days and found marked improvement, so again Placebo is given for next 15 days. The 2 nd , 3 rd and 4 th followed-up was done after 1 st month, 2 nd months and 3 rd months in which a marked improvement was found and i.e. prescribed Placebo 4 gls to be taken twice a day. There was progressive improvement in the condition of the patient so placebo was continued till complete cure. This is a case, which speaks about the success of Homoeopathy in the management of BCG induced skin eruption.
29.	Effects of individualised homoeopathic intervention in Stage I essential hypertension: A single-blind, randomised, placebo-controlled trial	Indian Journal of Research in Homoeopathy Vol. 14, Issue 1, 2020.	Repeated-measure ANOVA between the groups showed statistically significant difference (Wilk lambda 0.85, $F = 12.12$, $df = 213$, $P = 0.0001$), in both SBP and DBP favouring Individualised Homoeopathy (IH) along with LSM. <i>Post hoc</i> independent <i>t</i> -test showed a significant mean reduction in SBP (mean difference 7.12 mm Hg, 95% confidence interval [CI] 4.72-9.53, $P = 0.0001$) and DBP (mean difference 5.76 mm Hg, 95% CI: 4.18-7.23, $P = 0.0001$) favouring Homoeopathy plus LSM group. <i>Sulphur</i> ($n = 24$), <i>Natrum</i>

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			<i>muriaticum</i> (n = 21), <i>Lycopodium</i> (n = 16), <i>Nux vomica</i> (n = 12) and <i>Phosphorus</i> (n = 10) were the most useful medicines. IH in LM potency along with LSM was found effective over placebo along with LSM in the patients suffering from Stage I HTN. Further trials in rigorous setting are warranted.
30.	Holistic treatment of chronic myeloid leukaemia with adjuvant homoeopathic therapy : A case report	Indian Journal of Research in Homoeopathy Vol.14, Issue 1, Page no.50-56,2020.	This is a case of a 28-year-old female having CML for 1½ years, on regular allopathic medication. The patient was suffering from ulceration in the oral cavity, frequent offensive loose stools with melena and prolonged menstrual cycle with heavy bleeding for 3 weeks. After analysing the constitutional make-up of the patient, <i>Platinum metallicum</i> 200C was prescribed. Over a period of 3 months, the patient reported improvement in weakness, nausea, sleeplessness, irritability, heavy menstruation, loose black stools and backache. Until the last follow-up while submitting this report, the patient was on the maintenance dose of Imatinib along with homoeopathic medication.
31.	Homoeopathic drug proving researches (1996–2018): A scoping review	Indian Journal of Research in Homoeopathy Vol.14, Issue 1,Page no.24-49,2020.	One hundred and forty-seven eligible records (74 peer-reviewed [PR] and 73 non-peer-reviewed [NPR]) of HPTs of 214 drugs were identified and subjected to the extraction of data. Majority of the drug proving records were contributed by the Central Council for Research in Homoeopathy which included 86 records (24 PR and 62 NPR) with the data of 24 and 63 drugs, respectively, and by Riley, one book (NPR) with data of 68 drugs. Heterogeneity was encountered in all aspects – design, conduct, participants and outcome reporting. Conclusion: This preliminary study is the basis for data recovery and for the forthcoming program of systematic review and meta-analysis, which may include the HPTs published in other languages.
32.	A case report of prurigo nodularis responsive to Homoeopathy	Indian Journal of Research in Homoeopathy Vol.14, Issue 1,Page no.64-69,2020.	A diagnosed case of PN of an 18 year old female with a history of 1 year old eczematous lesion is presented. On the basis of the totality of symptoms, homoeopathic medicine <i>Natrium muriaticum</i> was prescribed and gradually the patient showed stable improvement in the domain of signs and symptoms and reached

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			remission by the end of 4 months. There was no recurrence over the next 1 year. This case report evidently suggests that Homoeopathy can serve as a possible treatment option for the management of PN cases.
33.	Thlaspi Bursa Pastoris in Treatment of Urinary Stones: A Case Series	Homeopathy 2020.	<p>There was full recovery of all five patients and post-treatment ultrasonography showed no calculi remaining. The Modified Naranjo Criteria total score for each patient was either +8/13 or +9/13.</p> <p>It was concluded that TBP was observed to be effective in eliminating renal stones within a short span of time and without any complications.</p>
34.	Chronic Cholelithiasis treated with Homoeopathic medicine in 50 th millesimal potency: A case report	Indian Journal of Research in Homoeopathy Vol.14, Issue 1, Page no.57-63,2020.	A 32-year-old female patient presented with the symptoms of dull pain in the right hypochondrium, sour eructations and regurgitation of food. The ultrasonography (USG) report confirmed the presence of multiple stones in the gallbladder of varying sizes, from 3 mm to 11 mm. Although she was advised for cholecystectomy, she was reluctant to undergo any surgery. Detailed case was taken, case was analysed, totality was formed, repertorization was done and <i>Lycopodium</i> was prescribed in fifty millesimal potency. Her symptoms were alleviated within a short span of time, and USG reports revealed that there were no stones after 3 months of treatment. Homoeopathic medicine <i>Lycopodium</i> , selected on the basis of totality of symptoms, was found effective in this case.
35.	Prevalence of Stress in Patients Attending Homeopathic General Outpatient Department in Government Dispensaries at Siliguri, West Bengal, India: A Multicentric Cross-Sectional Observational Study	Research & Reviews: A Journal of Bioinformatics Vol. 7, Issue 1, Page no 14-22, 2020.	The objective of this study was to determine the prevalence of stress among patients attending the homeopathic dispensaries of five Government hospitals. In the present study, prevalence of moderate-to-severe stress in PHQ-9, GAD-7 and AUDIT scale was 68.6%, 63.3%, and 10.8%, respectively; and in case of PCPTSD, the affirmative respondents were 40.3%. The respondents among the female, married person and unemployed reported an increased prevalence of stress. This study did not find any significant association between age, gender, marital status and employment status with mental stress. However, those

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			respondents who were residing at rural places were more likely to have stress.
36.	Place, Personnel & Recollection- Three Modalities on Antenatal and Newborn Care Messages for Recently Delivered Women in Uttar Pradesh, India.	International Journal of Trend In Scientific Research And Development (IJTSRD) Vol. 4, Issue 3, Page 957-966, 2020.	The results showed that the profile of the messages on ANC, birth preparedness and newborn care services of RDWs vary a lot across the districts. The process of percolating the message is also done poorly as shown through the data of use of IEC materials in this study. The dissemination process either at home or at an outreach center should also focus on involving all the stake holders. The messages on ANC, birth preparedness and newborn care services of RDWs should represent not only three modalities as mentioned in this study but also all the various modalities optimally so that the heterogenicity of messages regarding these cares are better accepted and understood by the communities. This will help RDWs to be in focus so that maternal health also get priority. Data should be collected in large scale surveys on these parameters of ANC, birth preparedness and newborn care services of RDWs exclusively as they can give crucial information regarding maternal health. The inclusion of role of not only ASHA but any type of health personnel regarding messages on these three services will help in designing better outreach services regarding maternal health. All these efforts would lead to reduction in the level of impact indicators mentioned above for maternal & child health through MMR, IMR in UP & as a result in India as well.
37.	An observational study to ascertain the role of a group of predefined homoeopathic medicines in the management of Malaria.	Indian Journal of Integer Medicine Vol. 2, Issue 1, 2020.	The total mean Malaria symptom scores (MSS) evaluated at baseline and end were 13.2 ± 1.9 and 5.9 ± 4.4 , respectively. The difference in the mean scores was found to be statistically significant ($P=0.001$, <0.05 ; CI: 5.7-8.9). Most frequently prescribed medicines as per indications were <i>Arsenicum album</i> (n=12, 38.7%), <i>Natrum muriaticum</i> (n=8, 25.8%), <i>China Officinalis</i> (n=4, 12.9%), <i>Rhus Toxicodendron</i> (n=3, 9.7%), <i>Ipecac</i> (n= 2, 6.5%), <i>Gelsemium</i> (n=1, 3.2%), <i>Nyctanthus</i> (n=1, 3.2%). It was observed that the <i>Arsenicum album</i> was the most useful and frequently indicated medicine in the treatment of malaria. The outcome of the study shows

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			that homeopathic medicines are useful in managing malaria. This study infers that homeopathy has a positive role in the treatment of malaria but needs further study with larger samples.
38.	Genus Epidemicus: A Research Review	Homeorizon (E-Journal) Vol. 1, Issue 1, 2020.	Use of Genus epidemicus remedies or homoeopathic specific remedies chosen appropriately after considering common symptoms of epidemic can help in medicinal management of an epidemic with both preventive and healing actions and that too with minimum side-effects and at a low cost.
39.	An update on novel COVID-19 pandemic: a battle between humans and virus	European Review for Medical and Pharmacological Sciences Vol. 24, Issue 10, Page no. 5819-5829, 2020.	COVID-19 pandemic imposes a heavy socio-economic burden on all societies. Hospital admission, treatment and ICU are more often necessary in high-risk individuals such as the elder age people, pregnant ladies and children all around the globe. However, the impact of COVID-19 cannot be neglected even in young adults. COVID-19 is highly contagious in nature, which makes it more lethal and threat for public health. The rapid spread of the disease requires intense surveillance and isolation protocols to prevent further community transmission. Current treatment strategies are based upon anecdotal data, chloroquine or hydroxychloroquine. Moreover, antiviral drug remdesivir along with oxygen therapy is currently recommended for treatment of hospitalized COVID-19 patients in several countries. No specific medication or vaccine has been developed so far. Hence, a new and specific antiviral chemoprophylaxis is required and may be helpful to reduce the morbidity and mortality allied to COVID-19. Apart it, prophylactic vaccination is urgently need for the future prevention of SARS-COV2 related pandemic.
40.	Homoeopathic Management in a case of Infertility with PCOS	Homoeopathic Links 2020.	Homoeopathy has been found to be effective by several other works in such cases. The present case report clearly reiterate the role of individualized homeopathic treatment in the management of PCOS with secondary infertility.
41.	Gall Stone During Pregnancy With	International Journal of Advance	Healthy life style and Homoeopathy can prevent formation of gallstone, management of

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
	Homoeopathic Management	Research Vol. 10, Issue 5, 2020.	biliary colic, and dissolves small and medium sized gallstone during and after pregnancy.
42.	Dietary practices of recently delivered women during pregnancy in Uttar Pradesh, India.	International Journal of Academic Research and Development (IJARD) Vol. 5, Issue 3, Page no. 8-11, 2020.	The above results showed that the profile of the dietary practices of RDWs vary a lot across the districts. A study on evaluation of ASHA program in eight Indian states that included the state of UP in 2012 suggests that beyond provision of cash incentives, greater support be given to the provision of competency based training, health rights dimension, adequate supply of medicines, mentoring and motivation to the ASHAs (Sundararaman et.al,2012). The process of mentoring and motivation should also focus on involving all the stake holders like the ASHA Sanginis. Involvement of the Sanginis, who are the supervisors of ASHAs would lead to effective home visits to follow up the RDWs during pregnancy. This will help improve the health of RDWs so that maternal health also get priority. Data should be collected in large scale surveys on these parameters of dietary practices and frequencies as they can give crucial information regarding maternal nutrition. The inclusion of role of ASHA, AWW, Sanginis and ANM regarding ANC services like maternal nutrition will help in designing better outreach services regarding maternal health and nutrition.
43.	Post Natal Care Visits of Recently Delivered Women in Uttar Pradesh, India.	Advance Research Journal of Medical and Clinical Science (ARJMCS) Vol. 6, Issue 5, Page no. 120-126, 2020.	The study results showed that except for Saharanpur district, rest of the three districts lagged behind in the postnatal visit profiles mentioned in this article. The dissemination process for the universalization of focus on postnatal visits in all pregnancies are very critical especially for home deliveries which gets the least postnatal visits as mentioned above. The effectiveness of postnatal visits leads to adaption of safe delivery practices. The visits are a part of the gamete of MCH & these should be planned & done for each pregnancy. All these efforts during the stage after delivery can significantly reduce the cultural obstacles & help improve maternal, neonatal, infant health & child health. As a result, reduction in MMR, NMR & Life Time Risk in UP & India will follow eventually as a process. As already mentioned above, there is a direct link between

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			visits during postnatal period and reduction in post-natal deaths as half of maternal deaths occur during the first month after delivery. That's why there is a need to reinforce the benefits of these visits through studies.
44.	Recommendations for Designing, Conducting and Reporting Observational Studies in Homeopathy	Homeopathy 2020.	Within the conventional medical research field, two types of arguments have been employed in favor of observational studies. First, observational studies allow for a more generalizable and robust estimation of effects in clinical practice, and if cohorts are large enough, there is no over-estimation of effect sizes, as is often feared. We argue that observational research is needed to balance the current over-emphasis on internal validity at the expense of external validity. Thus, observational research can be considered an important research tool to describe "real-world" care settings and can assist with the design and inform the results of randomised controlled trails. We present recommendations for designing, conducting and reporting observational studies in homeopathy and provide recommendations to complement the STROBE Statement for homeopathic observational studies.
45.	Janani Surakhya Scheme and Recently Delivered Women in UP, India.	Journal of Medical Case Reports and Reviews (JMCR) Vol. 3, Issue 5, Page 668-672, 2020.	<p>The above results showed that except for Saharanpur district, rest of the three districts lagged behind in the dual strategy or actions related to JSY scheme in this article. It is to be noted that because of cultural reasons, home deliveries will stay even after full emphasis on scaling up of JSY or Maternal Protection Scheme to increase institutional deliveries (Ved R et.al, 2012). The two JSY related Activities were seen in relation to the recent delivery of the respondents. The dissemination process for the universal uptake of JSY scheme in all pregnancies are very critical especially for home deliveries where the skilled personnel frictions out against the socio-cultural practices that act as barriers of uptake of the benefits of JSY scheme.</p> <p>The triad of activities on safe delivery practices as replied by RDWs should represent the gamete of MCH & these should be planned & done for each pregnancy. All these efforts can</p>

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			significantly reduce the cultural obstacles & help improve maternal, neonatal, infant Health & child health. As a result, reduction in MMR, NMR & Life Time Risk in UP & India will follow eventually as a process. As already mentioned above, direct link between JSY scheme benefits and reduction in peri & post-natal deaths needs to be reinforced through studies.
46.	Randomized trial on weight and lipid profile of obese by formulation from <i>Garcinia cambogia</i>	International Journal of Medicine Vol. 24, Issue 103, Page 1000-1009, 2020.	The present study shows that there is a significant reduction in weight in obese patient following administration of <i>Garcinia cambogia</i> 3x and 6c along with placebo. A significant reduction in total cholesterol, triglycerides, LDL and VLDL levels in after treatment group than before treatment group with appropriate Placebo. It was observed that the effect of <i>G. cambogia</i> 6c was more as compared to its 3x potency. The effects of the same medicine needs to be tested in other potencies and may be compared with the other sub species prepared homeopathically such as <i>Garcinia morella</i> with higher sample size.
47.	Homoeopathic nosodes, a neglected approach for epidemics: A critical review	Indian Journal of Research in Homoeopathy, Vol. 14, Issue 2, Page no. 129-135, 2020.	Research evidence for use of the nosodes as prophylactics and for the treatment of various infectious and non-infectious diseases is emerging. Nosodes such as <i>Meningococcinum</i> , <i>nosolep</i> and <i>Malaria officinalis</i> have been used successfully in controlling meningitis, leptospirosis and malaria, respectively. The use of nosodes as isopathy is somewhat acceptable in the mainstream medicine due to its similarity to vaccination. Although it is feasible to use nosodes in a short span of time and can be administered easily, the method of preparation and the safety issues are of much concern and therefore, should be used with utmost care. The safety issues outlined by the World Health Organization should be satisfied before their application in public health.
48.	An online cross-sectional survey on knowledge, attitudes, practices and perspectives of homoeopathic practitioners towards COVID-19	Indian Journal of Research in Homoeopathy, Vol. 14, Issue 2, Page no. 90-99, 2020.	Out of 3901 responses received over 2 days, 3595 were included for analysis. Knowledge scores significantly differed with qualification (graduates – 8.60 ± 1.38 , post-graduates – 8.84 ± 1.29 and other qualifications – 8.56 ± 1.31) and years of practice (<10 years – 8.57 ± 1.38 and >10 years – 8.84 ± 1.30). Gender was not identified as a variable to affect knowledge

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			<p>scores significantly. Attitudes and practices were also identified to be more favourable in participants with more than 10 years' experience. It can be concluded that homoeopathic physicians have largely been able to maintain a high level of currency of knowledge, purely on their own accord. Specific aspects related to patient care and practices need to be further enhanced. Practitioners affirmed that homoeopathic medicines need to be validated on a group of patients before mass treatment/prevention can be identified for which immediate access to patients is required.</p>
49.	Psychological implications during the outbreak of COVID-19 and its homoeopathic management	Indian Journal of Research in Homoeopathy, Vol. 14, Issue 2, Page no. 136-142, 2020.	<p>Based upon the symptoms collected from the previous studies, repertorisation outcome was analysed to evolve a group medicine which can be used in the scenario. The medicines <i>Arsenic album</i>, <i>Calcarea carbonica</i>, <i>Lachesis</i>, <i>Ignatia</i> and <i>Pulsatilla</i> obtained the highest marks in the analysis. The symptoms of these medicines were collected after referring the Hering's <i>Guiding Symptoms of Materia Medica</i> and <i>Desktop Guide to Keynotes and Confirmatory Symptoms</i> by Roger Morrison and are presented in the paper.</p> <p>We hope that these medicines will prove to be beneficial for prescription to those suffering from the psychological impacts of COVID-19.</p>
50.	A review on the role of Homoeopathy in epidemics with some reflections on COVID-19 (SARS-CoV-2)	Indian Journal of Research in Homoeopathy, Vol. 14, Issue 2, Page no. 100-109, 2020.	<p>Scientific evidence in various epidemics clearly showcase that Homoeopathy can be used both therapeutically and /or as prophylactic with success using approaches like Genus epidemicus, nosodes etc. Its greatest successes have been recorded in the prevention & treatment of flu like illnesses.</p>
51.	Homoeopathy in the management of infectious diseases: Different facets of its use and implications for the future	Indian Journal of Research in Homoeopathy, Vol. 14, Issue 2, Page no. 110-121, 2020.	<p>The literature search of two decades (1999–2019) gathered 86 articles: Meta-analysis ($n = 1$), systematic reviews ($n = 4$), randomised controlled trials ($n = 30$), comparative cohort/observational studies ($n = 16$), cohort/observational studies (single arm) ($n = 25$), case series ($n = 7$) and case reports ($n = 3$). The review demonstrated the beneficial evidence of homeopathy in infectious diseases is large. Both controlled and uncontrolled</p>

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			studies reported positive results, early recovery, reduction of hospital stay, less use of antibiotics and satisfaction of patients. Prophylactic studies on dengue, chikungunya, Japanese encephalitis/acute encephalitis syndrome and leptospirosis have shown the potential role of homeopathy in preventing the disease outbreaks. Homeopathy as an add-on treatment for these conditions has shown added benefits in reducing mortality, morbidity and sequelae. Homeopathy has a possible and viable role as standalone and as an integrative medicine for different infectious diseases.
52.	Homoeopathic treatment of Atopic Dermatitis in an infant: A case report	Homoeopathic Links VII, 2020.	Homoeopathic medicines are effective in the treatment of Atopic dermatitis, which has been proved and demonstrated in different studies and case reports. Rational prescription and repetition of doses are also important aspects of homoeopathic prescribing, which has to be taken special care of. Therefore, future reporting of similar scenarios is very important.
53.	Keynote Prescription in homoeopathy:A prospective series of fifteen consecutive case series	Homoeopathic Links Theime Vol.33, Issue 2, Page no. 109-115, 2020.	The results reflected improvement in ORIDL scale (+2 and +3). MYMOP-2 for Symptom 1 showed reduction in mean score from 5.60 (standard deviation [SD]: 0.63) to 2.67 (SD: 0.72) after a treatment period of 6 weeks. The reduction was statistically significant (mean difference 2.93 with 95% confidence interval: 2.6-3.2, <i>t</i> -score 19.1382, <i>p</i> < 0.001, paired <i>t</i> -test). The score of Modified Naranjo criteria ranged from 6 to 9. Thus these 15 cases derived the adequate subjective evidences in favour of keynote prescription. Further documentation and studies are warranted.
54.	Homoeopathic management of obesity: a short review	International Journal of Homoeopathic Sciences Vol.4, Issue 3, Page no.70-75, 2020.	Sixteen papers relating to obesity management using homoeopathy were identified. Out of seventeen papers, six were randomized controlled trials, two were quasi experimental studies, one was case report, one was case series, four were preclinical studies, one paper was review article and one was systematic analysis of randomized controlled trials of homoeopathy in obesity. Various studies showed the efficacy of homoeopathic medicines in the management of obesity and

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			other symptoms related to obesity especially when individualized constitutional homoeopathic medicine was prescribed. Further research through prospective observation and randomized controlled trials with individualized homoeopathic medication is warranted to strongly support the effectiveness of homoeopathic medicines in the management of obesity.
55.	Chronic sebaceous cyst resolved homoeopathically	International Journal of Homoeopathic Sciences Vol.4, Issue 3, Page no.11-13,2020.	This is the beauty of homoeopathy that if we consider the totality it will cure diseases even when it is surgical. So we should give space to the literatures of homoeopathic medicines which describes about many surgical conditions and should be tried out keeping view of totality.
56.	Individualised homoeopathic treatment of Balanitis: A case report	International Journal of Homoeopathic Sciences Vol.4, Issue 3, Page no.272-274, 2020.	Even though for the most part, balanitis is a self limiting disease in children, spontaneous or natural resolution of balanitis is not a possibility in this case, because the patient was suffering even after the conventional allopathic treatment and responded rapidly with sulphur, also his overall wellbeing was improved like appetite and anger and anxiety along with the particulars. In future more cases of balanitis treated with homoeopathy are required to know the median time of recovery. In order to exclude chances of spontaneous recovery or resolution due to delayed response to allopathic treatment randomized controlled trials are required for validation of the effects of homoeopathic treatment. This case again signifies the similar, single, individualistic and holistic concept of homoeopathic treatment.
57.	Verruca vulgaris amenable to individualised homoeopathy: A case report.	International Journal of Homoeopathic Sciences Vol. 4, Issue 3, Page no. 87-91, 2020.	In consonance to its reputation homeopathic medicine acted successfully in case of Verruca vulgaris. Although three medicines were applied as per demand time to time but ultimately it was Natrum muriaticum in high potency which resolved the inveterate looking warts. It shows whatever may be the name of the disease symptoms similarity is the only way to follow. From homeopathic point of view wart having pathology deep inside the defective vitality can only yield to treatment modality when dynamic pathology is corrected by dynamic homeopathic medicine prescribed

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			on the basis of symptom similarity after individualisation taking care of the underlying miasm.
58.	Calcarea carbonica treatment rescues lipopolysaccharide-induced inflammatory response in human mononuclear cells via downregulation of inducible cyclooxygenase pathway	Journal of Integrative Medicine Vol.18, Issue 5, Page 441-449, 2020.	The CC50 and EC50 of <i>C. carbonica</i> were found to be 43.26 and 11.99 µg/mL, respectively. The cell survival assay showed a 1.192-fold (P = 0.0129), 1.443-fold (P = 0.0009) and 1.605-fold (P = 0.0004) increase in cell survival at 24, 48 and 72 h after initiating <i>C. carbonica</i> treatment, respectively. <i>C. carbonica</i> -treated cells showed a reduction in NO levels by 2.355 folds (P = 0.0001), 2.181 folds (P = 0.0001) and 2.071 folds (P = 0.0001) at 24, 48 and 72 h, respectively. The treated cells also showed a reduction in TNF-α levels by 1.395 folds (P = 0.0013), 1.541 folds (P = 0.0005) and 1.550 folds (P = 0.0005) at 24, 48 and 72 h, respectively. In addition, a 1.193-fold reduction (P = 0.0126) in COX-2 protein expression was found in <i>C. carbonica</i> -treated cells. The molecular docking showed interaction of <i>C. carbonica</i> with the phenylalanine 367 residue present in active site of Cox-2.
59.	Counting Polar Symptoms: How to Represent Results?	Homoeopathic Links 2020.	At the fourth follow-up, three medicines with more than 10 cases with good results were identified: 20 <i>Phosphorus</i> , 19 <i>Pulsatilla</i> and 13 <i>Sulphur</i> . The mean value of the frequency distribution of some symptoms in the whole sample was considerably different from the neutral value. Comparing a medicine population with the remainder of the respective population can give results that differ from polarity analysis. For some symptoms, the 'distance' (Leverage) between the CoMs of the medicine population and the remainder of the population was clearer than the likelihood ratio (LR). If the LR value is not clear about the prognostic value in PS, notions from mechanics such as CoM and Leverage can clarify how to interpret a polar symptom.
60.	Role of Homoeopathy in Management of Post traumatic Stress Disorder (PTSD) Post COVID-19	Advancements in Homoeopathic Research Vol.5, Issue 2, 2020.	COVID-19 infection not only causes severe physical morbidity but also has a negative impact on mental state of the individual. It has created an environment of stress and anxiety in all health workers and persons who are in close contact of infected individuals due to

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			continuous work without rest and separation from family for work or quarantine purpose. Moreover there is also fear and stress in COVID-19 patients due to uncertainty of treatment. Also general public also succumbing to mental agony due to lockdown and social impact of this pandemic. All these conditions may lead to Post traumatic stress disorder (PTSD). As mental well-being of a person is very important for productive life of a nation, so it is important that we also focus our attention towards long term effect of this outbreak like post COVID-19 PTSD. Homoeopathy can offer a better alternative for various psychiatric disorders including PTSD. This is an attempt to understand the scope of homeopathy in the management with a therapeutic guide of PTSD post COVID-19.
61.	Obsessive compulsive disorder symptom exacerbation during COVID-19 related lockdown managed with homoeopathy: A case report	International Journal of Homoeopathic Sciences Vol.4, Issue 3, Page 172-176, 2020.	Baseline Y-BOCS score of 24 (Severe OCD) turned gradually to subclinical range of seven within 6 months. Patient had excellent relief for next six months and was functionally well. A comparatively milder exacerbation of symptoms (Y-BOCS-17) during lockdown could be managed effectively with the repetition of similimum resulting in subclinical score of five quickly within a month. So it can be concluded that Homoeopathic medicine is useful in the management of OCD and also symptom exacerbation due to stressful life events like lockdown.
62.	Emerging evidence of homoeopathy in treating COVID-19 pandemic: An overview	International Journal of Homoeopathic Sciences Vol.4, Issue 3, Page no.160-166, 2020.	Homoeopathy from the time of its inception contributed immensely to public health and epidemics are not the exception. It has a very rich history of combating, curtailing, and treatment of epidemic and pandemic diseases. Across the globe, several Homoeopathic practitioners diligently recording and reporting their successful treated COVID-19 positive cases which represent the scope of Homoeopathic treatment in this newly emerging pandemic. These successful treatment can help in finding Genus Epidemicus which can act as a probable prophylaxis in the disease. As per the media report Naimi Nath Homoeopathic Medical College & Hospital, Agra has conducted RCT and reported positive results in this pandemic. Homoeopathic medicine works as an immuno-

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			booster and shown its efficacy in upregulating the level of immune markers and there by effective in controlling the epidemic or pandemic. To show the more concrete evidence for homoeopathy as medicine or prophylaxis in COVID-19 several rigorous randomized controlled trial is needed, which can only be possible if homoeopathic approach must be integrated with the modern medicine in the management of patients. More than evidence homoeopathic medicine will save the lives of millions if integrated with modern medicine in the treatment, what it has proved earlier on several occasions when needed.
63.	Standard Operating Procedure to Derive Homoeopathic prophylaxis in covid 19 through prophylactic clinical trial- a perspective	Homoeopathic Links Vol.33, Issue 3, Page no. 222-227, 2020	In the present era of evidence-based medicine, usefulness of therapeutic agent as prophylaxis is recognised only after obtaining significant result in prophylactic clinical trial. Claims of usefulness of certain homoeopathic medicine as prophylaxis or GE of COVID-19 can be used to generate research hypothesis and can be tested through prophylactic clinical trial. In this article, outbreak investigation procedures are highlighted, necessity of epidemic preparedness with engagement of community is emphasised, several recent developments in clinical trial regulations for an outbreak are pointed out, among which online submission of research protocol, expedition of ethical review procedure, virtual meeting of the ethics committee, Good Participatory Practice Guidelines for Trials of Emerging (and re-emerging) Pathogens are mentioned. Standard operating procedures are discussed to conduct a comparative effectiveness research using cluster randomisation in a multidisciplinary approach to investigate the effectiveness of the homoeopathic medicine as a prophylaxis for COVID-19 which can be used by the policy makers as an effective public health intervention to stop transmission and prevent community spread of this highly infectious disease.
64.	A Multidisciplinary Management Framework for the Treatment of Benign Prostatic Hyperplasia	Homoeopathic Links 2020.	The review offers a holistic framework for management of BPH that is inclusive of modifiable lifestyle factors alongside homoeopathic treatments. It further underscores that the condition may be cost-

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
	with Focus on Homoeopathy: A Review		effectively managed through homoeopathy to bring about better QoL among people with BPH. Lifestyle optimisation and management of metabolic risk factors may reduce the progression of BPH. Homoeopathic medicines are not only useful in effective management of BPH but also cost-effective, safe and non-surgical. However, randomised controlled trials and double-blind studies can be further taken up in future for more precise authentication.
65.	Understanding the role of homoeopathic preparation of <i>Berberis vulgaris</i> in mitigation of sodium oxalate- induced hyperoxaluria: An experimental approach	Indian Journal of Research in Homoeopathy Vol.14, Issue 4, Page no.251-259,2020.	<i>Berberis vulgaris</i> significantly reduces hyperoxaluria-induced oxidative stress and restores antioxidant enzyme activities in kidney tissue. Histological analysis depicted that <i>Berberis vulgaris</i> treatment decreases renal epithelial damage and inflammation and restored normal glomerular morphology. Furthermore, immunoblotting analyses of NADPH oxidase revealed significant increased activity in the renal tissue of hyperoxaluric rats when compared to that of control rats. This has been brought back to normal by <i>Berberis vulgaris</i> treatment. Thus, our results emphasised that the Homoeopathy drug <i>Berberis vulgaris</i> has been effective in ameliorating sodium oxalate-induced acute hyperoxaluria in Wistar rats by modulating mitochondrial oxidative stress through the inhibition of NADPH oxidase.
66.	Calendula mother tincture vs normal saline for ulcer dressing as an add-on to Individualized Homoeopathic Intervention in the management of Diabetic Foot Ulcer: A Randomized Controlled Pilot Study	Indian Journal of Research in Homoeopathy Vol.14, Issue 4, Page no.233-241,2020.	The mean time (Group I= 12 weeks, Group II= 11 weeks) of ulcer healing in both groups showed no statistically significant difference, thus calendula Q used for dressing did not have any added benefits (p= 0.0521). <i>Arsenicum album</i> (n= 14, 23.3%), <i>Lycopodium</i> (n= 8, 13.3%), <i>Silicea</i> (n= 7, 11.7%), <i>Sulphur</i> (n= 6, 10%), <i>Phosphorus</i> (n= 5, 10%) and <i>Sepia</i> (n=5, 10%) were found to be effective medicines. IHI, along with wound hygiene and conventional diabetic management, proved to be effective, irrespective of whether Calendula Q or normal saline was used for wound hygiene, thus leading to early, complete epithelialisation of Wagner's first and second stages of DFUs. Further studies comparing IHI with standard care are warranted.

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
67.	Pharmacognostical studies of <i>Smilax aspera</i> Linn.- A herbal drug.	Indian Journal of Research in Homoeopathy Vol.14, Issue 4, 2020.	The root was longitudinally wrinkled, about 3 mm in diameter with numerous branching, rootless, tough and flexible. Cortex consisted of 18–20 rows of parenchymatous cells; xylem and phloem were arranged in a radiate manner. Rhizome was wrinkled, hard and brown externally and white or light-yellow internally. The outer cortex consisted of polygonal parenchymatous cells. The findings of physicochemical determination of raw drugs including maximum extractive values in alcohol were 5.67% w/w, 0.1% w/w foreign matter, 8.90% w/w moisture content, 10.60% w/w total ash, etc., and finished product parameter showed pH near to 7, total solid 1.07% w/v and 50% v/v alcohol content. The data represented in this article may be used as distinctive diagnostic characters for proper identification, authentication of raw drug to ensure purity, quality and efficacy of drug <i>S. aspera</i> .
68.	Homoeopathy therapy in CS pain management : a randomised double blind placebo controlled trial.	Indian Journal of Research in Homoeopathy Vol.14, Issue 4, Page no.242-250, 2020.	Sixty-seven cases were enrolled in the Homoeopathy group and 69 in the placebo group. One hundred and thirty-four cases that completed the follow-ups were analysed. The improvement in pain was 56.18% in the Homoeopathy group and 46.45% in the placebo group, as per CSPMS. The mean improvement between the groups was not significant: 60.36% in the Homoeopathy group and 48.66% in the placebo group. The mean score of quality of life, assessed using the 'Patient's Global Impression of Change Scale,' was 2.29 ± 1.90 quality of life in the Homoeopathy group and 2.93 ± 2.28 in the placebo group. There was 27.95% more improvement in the Homoeopathy group, as compared to the placebo group. Among the most used medicines were <i>Rhus toxicodendron</i> ($n = 19$) 28.8%, <i>Calcarea carbonica</i> ($n = 7$) 10.6%, <i>Kalmia latifolia</i> ($n = 7$) 10.6% and <i>Paris quadrifolia</i> ($n = 8$) 12.1%. Homoeopathic medicines are effective in management of acute pain due to cervical spondylosis.
69.	Efficiency of Homoeopathic Potentized Medicine in Treating Chronic	International Journal of Homoeopathic Sciences	During the study it was observed that almost in all cases the Homoeopathic potentized medicine responded well except one case. So it can be concluded that Homeopathic

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
	Rhinosinusitis	Vol.5, Issue 1, Page No.82-84,2021.	potentized medicine is very effective in treating of Rhinossinusitis.
70.	A review of the effectiveness of homoeopathy in the management of chronic leg ulcers.	International Journal of Homoeopathic Sciences Vol.5, Issue 1, Page 16-20,2021.	Out of these 5 studies, 3 are case studies & one is a prospective observational study and one is a randomized clinical trial and it shows that chronic leg ulcers have marked improvement by the use of Homoeopathic medicine both internally and externally.
71.	Homoeopathic portrait of conduct disorder	International Journal of Homoeopathic Sciences Vol.5, Issue 1, Page no. 221-236, 2021.	Conduct Disorder is most frequently diagnosed childhood behavior disorder with symptoms of aggressiveness, violence, theft and violation of rules. The CD has to be diagnosed at early stage to avoid the progression of disease into other adult psychiatric disorder like personality disorder, substance abuse, pervasive psychosexual disorders which end in antisocial behavior. Although the symptoms like violence, aggression and impulsivity and other acute emergency conditions are well managed with conventional system, the complete recovery of illness needs prolonged medication without adverse medication effects. Homoeopathy the personalized medicine with ultra-diluted potentised medicinal substances will be effective to bring complete remission of illness on prolonged medications. Based on the disease symptoms remedies like <i>Hyos</i> , <i>Bell</i> , <i>Stramonium</i> , <i>Nux vomica</i> , <i>tarantula</i> portraits towards effective homoeopathic management in conduct disorder.
72.	Role of homoeopathic specific medicines in sport related injuries	International Journal of Homoeopathic Sciences Vol.5, Issue 1, Page no. 197-200, 2021.	A homoeopathic physician needs to understand the type of injury, its pathology, extension and the proper diagnosis. Then only he will be able to assess the scope and limitation of Homoeopathy in the condition and select the simillimum. Physician can classify an injury according to Hahnemannian classification and that helps in selection of medicine easier that is whether it is coming under indisposition, surgical disease or pure miasmatic classification. In surgical diseases use of Homoeopathic medicine along with surgical correction helps in speedy recovery. Homoeopathic medicines can help an athlete for his better performance. The relief of tired, achy, overused and injured muscles and joints of a

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			sporty man can be obtained through our simple potentized medicine.
73.	Role of homoeopathic medicines in the treatment of migraine	International Journal of Homoeopathic Sciences Vol.5, Issue 1, Page no. 229-233, 2021.	Among the 30 samples, 14(46.67%) patients showed marked improvement, 12(40%) patients showed moderate improvement and 4(13.33%) patients showed no improvement. The result shows that there is broad scope for homoeopathy in the treatment of migraine.
74.	A systematic review on the pathogenesis of death due to COVID-19	International Journal of Homoeopathic Sciences Vol.5, Issue 1, Page no. 201-219, 2021.	Ground glass opacity is the common finding in chest imaging, virus like particles is seen in the lung parenchyma and the prevalent pathogenesis is found to be Diffuse Alveolar Damage (81.93%) of the lung tissue. Arsenicum album is found to be the leading remedy. The prevalent pathological finding is found to be Diffuse Alveolar Damage in the lungs which is a feature consistent with fatal viral infection leading to Acute Respiratory Distress Syndrome.
75.	Homoeopathic Approach of Hyperkinetic Disorder with Eeczema: A case report	International Journal of Homoeopathic Sciences Vol.5, Issue 1, Page no. 286-290, 2021.	Homoeopathy is a wholistic system of medicine and treating the patient based on totality of symptoms. In this case, <i>Tuberculinum</i> 1M was prescribed as similimum by considering prominent mental symptoms such as restlessness, impulsivity, difficulty in concentration and artistic ability. Patient got improvement in hyperkinetic symptoms, but old skin symptoms re-appeared which were covered by <i>Sulphur</i> 1M followed by marked improvement in both the symptoms of hyperkinetic disorder and eczema.
76.	Web-Based Survey on Depression and Anxiety during COVID-19 Pandemic in View of Homoeopathic Perspective	Homœopathic Links 2021.	It was found that the overall proportion of depression and anxiety was 34.4 and 31.21% respectively. About 23.9% of participants had both depression and anxiety. The proportion of depression and anxiety was more in males and age group of 21 to 30 years. Healthcare providers reported more depression and anxiety as compared with other occupations. Among the influencing factors, regular Yoga practice and adequate sleep of 7 hours in the day had good effects in controlling depression and anxiety. Spending time in social media for more than 3 hours a day regularly was also an influencing factor for more depression and

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			anxiety. It was also found that people who frequently got worried about their own health and of near and dear ones had developed more anxiety. The participants who had taken homoeopathic medicines during last month reported less depressive symptoms in comparison to others.
77.	Preclinical updates of the homoeopathic medicines used in diabetes mellitus: A Narrative review	Indian Journal of Research in Homoeopathy Vol.15, Issue 1, Page no.31-40, 2021.	Fifteen studies were included in the review. Twenty medicines were evaluated for their antidiabetic efficacy either <i>in vivo</i> or <i>in vitro</i> . Most of the preclinical research on diabetes was carried out on <i>Syzygium jambolanum</i> and <i>Cephalandra indica</i> in mother tincture form and potencies, substantiating their effectiveness in the management of diabetes. Apart from the medicines discussed in the current review, there are many other medicines in Homoeopathy which are used to treat diabetes and these also should be validated scientifically for global acceptance by the scientific fraternity.
78.	Obliteration of Ranula with Homoeopathic Treatment: A Case Report	Indian Journal of Research in Homoeopathy Vol.15, Issue 1, Page no.48-54, 2021.	This is a case of a female child with a painless, cystic swelling in the right side of the floor of the mouth of 3-month duration and another smaller painless cystic swelling on the inner side of the right lower lip. Clinical diagnosis reveals the cystic mass in the floor of the mouth as a simple ranula. After individualising the case, homoeopathic medicine <i>Ambra grisea</i> 30 was prescribed, and within 2–3 months, ranula obliterated. The other smaller cystic swelling also disappeared simultaneously.
79.	Usefulness of individualised homoeopathic medicine in Manic episode - A case report	Indian Journal of Research in Homoeopathy Vol.15, Issue 1, Page no.41-47, 2021.	A patient reported in the Out Patient Department with symptoms of increased delusions for 3 weeks. The consultant psychiatrist diagnosed it as a case of bipolar affective disorder, current episode manic with psychotic features. Young mania rating scale (YMRS) scored 38 at the time of admission. <i>Lachesis mutus</i> 200 was prescribed initially and later <i>Lycopodium clavatum</i> 200 was prescribed, as the symptom picture changed. Overall improvement was noticed clinically and in YMRS after treatment. In this case, individualised homoeopathic treatment has shown a positive role for the remission of manic episode with psychotic features without

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			the support adjunctive therapy or conventional medication in the current episode.
80.	Homoeopathic treatment of women with polycystic ovarian syndrome: A prospective observational study	Indian Journal of Research in Homoeopathy Vol.15, Issue 1, Page no.12-23, 2021.	The comparison of PCOSQ from baseline to 12 months in 34 patients using the paired <i>t</i> -test showed significant improvement in the overall PCOSQ of the patients (mean increase \pm standard error: -2.3 ± 0.5 ; 95% confidence interval CI: -3.2 to -1.3 $P = 0.001$). The number of cysts in both ovaries reduced with a statistically significant difference. There was a mean reduction of two cysts on each side of the ovary. The most prescribed medicines were <i>Calcarea carbonica</i> (38.24%) and <i>Lycopodium</i> . (26.47%) accounting to 64.71% of the total medicines.
81.	Homoeopathy for management of type 2 Diabetes mellitus in a patient of major depressive disorder - A Case report	Indian Journal of Research in Homoeopathy Vol.15, Issue 1, Page no.55-61, 2021.	A case of T2DM is reported in a 38-year-old woman suffering from major depressive disorder who was treated successfully with individualised homoeopathic medicines. The patient reported to the Lifestyle Disorders clinic of Homoeopathic Hospital, Noida, with recently diagnosed diabetes of 8 months. After individualised homoeopathic treatment, the patient's fasting plasma glucose, postprandial glucose, HbA1c levels, fasting plasma insulin and Hamilton Depression Rating Scale score were reduced within 6 months. The findings in this case report are encouraging and provide evidence in supporting the effectiveness of individualised Homoeopathy in reducing hyperglycaemia in a patient with major depressive disorder.
82.	A critical review on causation of migraine and its homoeopathic perspective	Indian Journal of Research in Homoeopathy Vol.15, Issue 1, Page no.329-333, 2021.	After Repertorizing the common symptoms of Migraine <i>Phos, Silicea, Bryonia, Lachesis, Ignatia</i> as the top five remedies, the second method showed <i>Phos, Ign, Nux. V, Chin</i> as the top-scoring Remedies and <i>Ignatia, Phos, Nat. m</i> in the third method of Repertorization.
83.	Miasmatic perspective in nutritional deficiency disorders	Indian Journal of Research in Homoeopathy Vol.15, Issue 1, Page no.351-356, 2021.	Understanding the miasmatic perspective of various nutritional deficiencies is necessary for every Homoeopath. Apart from Psoric Miasm, Tubercular Miasm also plays a vital role in most of the nutritional deficiencies. Sycosis, Syphilitic trait, and some deficiencies like vitamin A, copper deficiency disorders mixed

S. No.	Title	Journal (Name, volume, issue, pages, year)	Outcome
			<p>Miasm causes the diseases. This type of miasmatic manifestations will develop because of the inability to assimilation; the results present various clinical presentations and will continue to be corrected through a healthier diet and natural way of living like active exercise and exposure to sunlight, and so forth. The indicated ultra-dilution of the miasmatic remedy would be alleviating the signs and symptoms of the nutritional disorders. Even after giving nutrients that are deficient through diet or directly, the respective miasmatic treatment is necessary to remove the fundamental cause of illnesses, the Miasm, to establish the cure.</p>

LIBRARY

The inception of this Library and Information Centre dates back to 1979 when a small library was set up with a small collection of about 500 Publications to start primarily to meet the information needs of the research scientists of the Council. With the passage of time, the library grew at a fast pace, and, in order to cater to the ever-increasing R&D information needs of the professionals, it systematically and gradually grew as a collection of specialized reading materials such as books, periodicals, reference materials, serials in the areas of homoeopathic research and drugs & pharmaceuticals.

Books: Library procures the books on recommendations of Book Selection Committee and on the basis of suggestions received from the research scholars. Library also receives complementary books from Govt. organizations. In the year 2020-2021, library added 23 books and the total no. of books as on 31.03.2021 is 11290.

Journals: Library subscribes foreign and Indian journals on Homeopathy as well as allied medical sciences to help the research scholars with latest updates in the medical field especially in the field of Homoeopathy. Library subscribed the following 14 journals during the calendar year 2021.

- **Foreign Journals**

Elsevier

1. Complementary Therapies in Medicine
2. Complementary Therapies in Clinical Practice
3. EXPLORE: The Journal of Science and Healing
4. European Journal of Integrative Medicine
5. The Lancet

Karger Publishers

6. Complementary Medicine Research

Mary Ann Liebert, Inc.

7. Alternative and Complementary Therapies
8. Journal of Alternative and Complementary Medicine

Thieme Medical Publishers

9. Homeopathy
10. Homoeopathic Links

- **Indian Journals**

1. The Homoeopathic Heritage
2. New Approaches to Medicine & Health
3. Homoeo Times
4. Homoeopathy for All

- **e-journals:** Following 10 journals are available online:

1. Complementary Therapies in Clinical Practice

2. Complementary Therapies in Medicine
3. European Journal of Integrative Medicine
4. Explore: The Journal of Science & Healing
5. The Lancet
6. Homeopathy
7. Journal of Alternative and Complementary Medicine
8. Alternative and Complementary therapies
9. Forschende Komplementarmedizin
10. Homoeopathic Links

Web OPAC Search: The collection of books, bound journals and theses available in Library, are computerized and maintained on Web OPAC (Online Public Access Catalogue). OPAC helps to the users in finding out the availability of books in the library.

Online Union Catalogue of Books & Journals: In order to promote resource sharing among libraries under CCRH, the library conceptualized the project and developing Union Catalogue of Books & Journals. Managing all aspects of development process including customization of software & other technical support, providing training to staff, content optimization and migration of data.

Consortium: Developed consortium of e-journals for providing access to electronic journals in the field of AYUSH medicine to all Units/Institutes and headquarter libraries of CCRH, CCRAS & CCRUM nationwide.

Digital Library: Library also contains 2470 number of bound journals, and all the back volumes of homoeopathic journals are digitized and are available at: <http://aohindia.in/jspui/handle/123456789/3> for access to all scientists of the Council.

Research Repository: In order to preserve and provide access to Council's research work, Council library conceptualized and developed research repository. Available at: <http://aohindia.in/jspui/handle/123456789/1197>

Archive on Homeopathy: CCRH library has been supporting research and development of Homeopathy with its different services. In 40 years of its existence, the Council library has provided several services in its mission to propagate research findings. Taking the next step towards the development of Homeopathy in India, the Council's library has built a hub of homoeopathic knowledge, accumulating documents from all corners of world under one roof for the purpose of public and professional consumption.

'Archive on Homeopathy' is a digital repository of accumulated knowledge in Homeopathy, having collection of old and valuable books, old journals, research articles, event impressions, annual reports, newsletters, bulletins and other grey literatures spread all over the world and total no. of archives as on 31.03.2021 is 4219.

Library Services

The Council's library is providing following services to its users: -

Reference Services: Library responds to the queries received from Units/Institutes under CCRH as well as homoeopathic fraternity of the country.

Current awareness service: The Library and Information Centre used to bring out the Current Health Literature Awareness Services (CHLAS), a quarterly publication, to keep the users abreast of latest scientific articles published in various journals/magazines subscribed by the Council. This was started in 1988. It covers original articles of homoeopathic and allied subjects, which are broadly classified under various subjects. To improve the visibility and accessibility of the index of articles, CCRH library has taken

an initiative to provide the service as e-index on monthly basis as "e-CHLAS" and 12 issues have been released during the year 2020.

Research at a Glance: The library of the Council has introduced a new service in the year 2017-18 "Research at a Glance". The main objective is to disseminate precise information/citations about scientific articles published in various journals/magazines other than the journals subscribed by this Council. The scope of the publication is articles on Homoeopathy, Ayurveda, Unani, Yoga. Twelve issues have been released during the year 2020-2021.

Selective dissemination of information

Bibliographic services: Specific bibliographies are compiled on request, according to the requirement of users.

Digital Database of Theses: The library has undertaken a project to develop a digital database of theses submitted by the P.G. students of various Homoeopathic colleges in India with the aim to provide help to homoeopathic fraternity and total number of theses included in the database as on 31.03.2021 are 812.

Document Delivery Service: The library attends to photocopy requests about its resources and provides backup services.

COUNCIL'S WEBSITE & SOCIAL MEDIA PAGE (www.ccrhindia.nic.in)

The Council's website (www.ccrhindia.nic.in) has been functioning as the “Mirror of the Council” outlaying updated information about various facets of homoeopathic research carried out by the Council. It provides access to information relating to policy, strategy and operational guidelines under the program and the status of the facilities and program interventions. Job advertisements, tender documents, updated status notes and proceedings of important events are regularly updated on the website.

During the reporting year, above information has been updated and uploaded from time to time and new features have been added to enhance visibility and make it more user friendly. In compliance with the GIGW guidelines, the website is also being developed in Hindi language as well, and much information has already been made available. To inform the end user about its network of 26 Institutes/Units across India, individual microsites are being developed within the main website which are being updated with information of the respective Institutes/Units. In addition to the website, much impetus has been given to social networking as per the directions of the Ministry of AYUSH with the common vision to disseminate about the AYUSH systems to the masses. Social media content development training has been imparted to a selected group of officers and CCRH has been posting the informative and educational events on its Facebook page – 'AYUSH Homoeopathy' regularly. More officers are being trained at regional level to join hands to promote Homoeopathy.

Following initiatives have been taken under website maintenance:

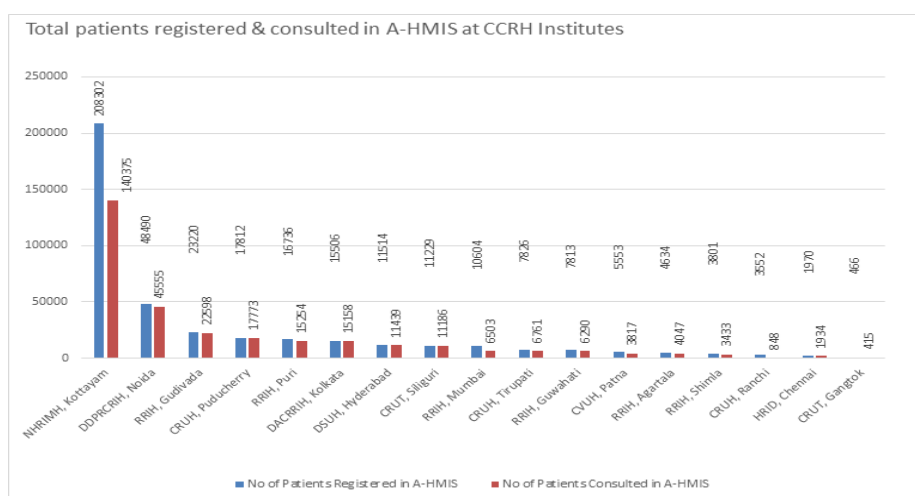
- The official website of CCRH is updated regularly;
- CCRH related information is updated regularly;
- Contact details of all CCRH officials are provided;
- Tender, procurement and vacancy related advertisements are uploaded;
- Training manuals, publications & guidelines related to various component of research activities are updated;
- The contents of the website are reviewed monthly by the concerned section;
- The banners related to COVID-19 behavior are uploaded;
- Competition on the topic “Myths in Homoeopathy” uploaded;
- Results of Award winner of Studentship program are announced.

AYUSH HOSPITAL MANAGEMENT INFORMATION SYSTEM (A-HMIS)

- A-HMIS is a comprehensive Electronic Health Record System developed under AYUSH Grid initiative of Ministry of AYUSH, Government of India. A-HMIS is a single point of contact for citizens of India to seek health care services from AYUSH medical systems across India. It is a technological revolution in the field of AYUSH healthcare system where IT platform is being efficiently utilised to manage all functions of health care delivery systems and patient care in AYUSH facilities. Real time patient information is captured on a cloud based software platform in a usable format primarily aimed at understanding the morbidity pattern of patients visiting the OPD facilities of the Council. It is also aimed at efficient management, documentation and data retrieval of AYUSH hospital systems to derive comprehensive data of all hospitals which would help in research as well as development of an effective AYUSH health policy. The software has registration, OPD and IPD consultation and pharmacy modules.
- After the implementation of A-HMIS in November 2018 in a phased manner, it has been fully functional in 17 health facilities of the Council and under implementation in 04 Institutes, where 3,99,028 cases were registered and 3,13,386 consulted from April 2020 to March 2021. The AYUSH Grid cell of CCRH monitors the functionality of A-HMIS and reports to Ministry on a weekly basis.

Table 43: Total patients registered and consulted in A-HMIS at CCRH Institutes

S. No.	Name of Institutes/Units	No. of patients registered in A-HMIS	No. of patients consulted in A-HMIS
1	National Homoeopathy Research Institute In Mental Health, Kottayam	208302	140375
2	Dr. D.P. Rastogi Central Research Institute (H), Noida	48490	45555
3	Regional Research Institute (H), Gudivada	23220	22598
4	Clinical Research Unit (H), Puducherry	17812	17773
5	Regional Research Institute (H), Puri	16736	15254
6	Dr. Anjali Chatterji Regional Research Institute (H), Kolkata	15506	15158
7	Drug Standardisation Unit (H), Hyderabad	11514	11439
8	Clinical Research Unit (H), Siliguri	11229	11186
9	Regional Research Institute (H), Navi Mumbai	10604	6503
10	Clinical Research Unit (H), Tirupati	7826	6761
11	Regional Research Institute (H), Guwahati	7813	6290
12	Clinical Verification Unit (H), Patna	5553	3817
13	Regional Research Institute (H), Agartala	4634	4047
14	Regional Research Institute (H), Shimla	3801	3433
15	Clinical Research Unit(H), Ranchi	3552	848
16	Homoeopathy Research Institute For Disabilities, Chennai	1970	1934
17	Clinical Research Unit (T), Gangtok	466	415
	TOTAL	399028	313386



MEDIA ACTIVITIES OF CCRH

- The Ministry of AYUSH proactively launched its social media campaign and strategy in 2018 whereby Council's were sensitised to promoting the brand AYUSH. The Facebook page – 'AYUSH Homoeopathy' was launched by CCRH in 2018 with an aim to create awareness about Homoeopathic system and its strengths amongst the masses and has an organic 20,179 likes and 22,678 followers as on today.
- During the reporting period, 162 posts were created in face book page with 28,970 cumulative organic likes and 795963 reach to the public.
- As per directions from Ministry of AYUSH from time to time, the CCRH has participated in various campaigns like the three month AYUSH for Immunity (AFI) campaign against COVID-19 pandemic and the Jan Andolan Campaign for COVID-19 Appropriate Behaviour as per Government of India guidelines from Ministry of Information and Broadcasting.
- CCRH Social media coverage of AFI campaign and Jan Andolan Campaign through 74 facebook posts had an organic reach of 1,72,057 and 13,455 engagement respectively.
- The Council continued innovative efforts to create self-designed/original posts/posts with information from print media/videos/infographics etc..
- Council has its own dedicated YouTube channel with 1.77 K subscribers which is updated with videos of documentaries on Homoeopathy, talks from scientific convention on World Homeopathy Day; seminars on scientific and technical writing etc., from time to time.
- The twitter handle of CCRH has 1612 followers.

AYUSH RESEARCH PORTAL

Ministry of AYUSH has developed AYUSH Research Portal for disseminating research information related to all AYUSH systems of medicine (Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy). The portal provides collection of good quality research articles published in various peer- reviewed and other journals.

The information provided is categorized into individual AYUSH medical systems against a standard set of medical conditions, based on WHO disease classification ICD-10 and navigation is according to ICPC's (International Classification of Primary Care) 17 categories. It permits search of research articles with title, authors, scholars, guide, co-guide, designation, department, institution, address, journal, university, abstract, keywords, body system and disease.

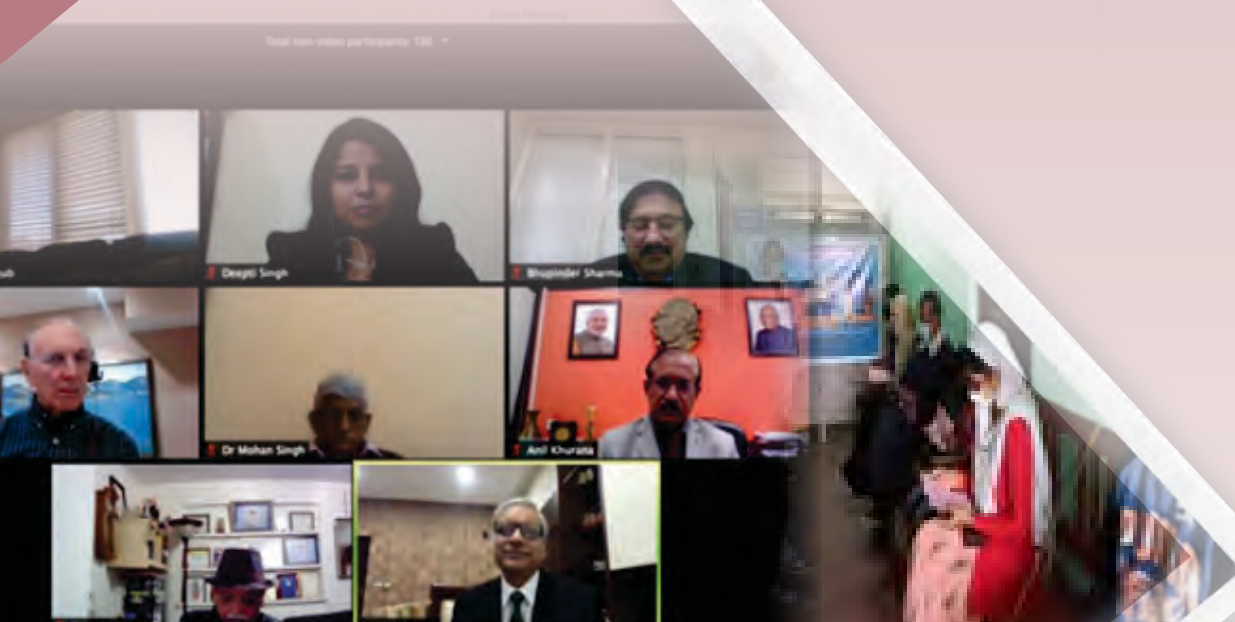
Clinical Research is further classified into evidence grade - A, B, C based on general guidelines for methodologies on research and evaluation of traditional medicine published by World Health Organization (WHO).

Clinical research	:	5751
Pre- clinical research	:	13181
Drug research	:	7961
Basic and fundamental research	:	5091

The Council has attributed in selection and uploading of 31984 research articles on the said portal, in the form of abstracts and full texts (whenever available free of cost). In case of paid articles, links have been provided to access full text articles.

The portal (accessible through <http://ayushportal.nic.in>), will create awareness and would provide evidence regarding the research conducted in AYUSH systems of medicine, thereby generating wider acceptance among the practitioners, policy – makers, researchers, authors, students and general public worldwide.

MISCELLANEOUS ACTIVITIES



IEC ACTIVITIES OF THE CCRH

WEBINARS: CONNECTING DIGITALLY

Over the past year, digital transformation has enabled researchers to connect through the virtual medium for the exchange of information and dissemination of the latest research findings. Webinars create opportunities for both educators and learners to experience a different level of online interaction for enhancing their research abilities as well as upgrading their skills.

As the mandate of the Council is to promote and conduct scientific & ethical research and also disseminate the significant research findings to the profession and public, it was desired by the Director General, Dr. Anil Khurana, that Council should adopt the new learning technologies and organize webinars for capacity building, enhancing research aptitude in homoeopathic students, practitioners, and clinicians. The Council started this new initiative keeping in sync with the latest advancements by conducting a Webinar from World Homoeopathy Day in April 2020 on the role of Homoeopathy in COVID-19. The webinar was inaugurated by video message from the Hon'ble Minister of State, Independent Charge, Sh. Shripad Naik and graced by live addresses from Secretary, Additional Secretary, and Joint Secretary from Ministry of AYUSH, besides internationally acclaimed speakers.

During the reporting year, 199 webinars were conducted wherein approximately 15619 participants attended. These webinars focused on a diverse range of participants including Scientists, Research Officers, Research Associates, Research Fellows and Data Entry Operators/Office Assistants under research projects along with homoeopathic faculty, students, scholars, clinicians and public as well.



The broad categories under which these webinars were conducted are Capacity building and continued learning of research scientist for upgrading skills, dissemination of latest information, generating awareness and popularizing Homoeopathy etc. Another highlight was a joint webinar organised as part of MOU between CCRH and College of Homeopaths of Ontario (CHO), Canada for building research aptitude and enhancing knowledge about present and future research as well as improving clinical practice of practitioners, UG/PG/PhD scholars, and researchers in Toronto, Canada on 27th November 2020 on the theme “Good Clinical Practice guidelines for clinical research in Homeopathy”.

A series of four days Virtual Workshop on “Data Analysis using Microsoft Excel” for providing hands-on training on Basic and advanced levels of Microsoft Excel was organised in four batches for all the administrative and technical staff of the Council. Workshop dedicatedly helped to unleash the power of excel and provided tips and solutions for analysis of data to the next level as well as creating dashboard that can help in turning raw data into actionable information.

The digital learning platform was also utilised for conducting ‘Induction Training Program’ for newly recruited Research Officers, besides an exclusive three-day workshop was held on Webinar on “Registration of Clinical Trials and Publishing the Outcomes in a Suitable Journal”

Table 44: The following 34 capacity building webinars were conducted during the reporting year as given in the following table:

S.No.	Topic	Type of participants	Number of participants	Date
1.	International Webinar on World Homoeopathy Day 2020	Researchers, practitioners, medical officers, postgraduate students, faculty, and representatives of pharmaceutical industries. The participants were from India, United States of America, Germany, Greece, United Kingdom, Afghanistan, Netherlands, Hong Kong, Bangladesh, Saudi Arabia, and Philippines	1272	10.04.2020
2.	Webinar Series on Capacity Building Critical Thinking as Applied to the Art and Science of Decision Making in Homoeopathy: Reflections on the Role of Reason and Intuition	All Researcher officers, practitioners, medical officers, postgraduate students, and faculty	469	23.04.2020
3.	Webinar Series on Capacity Building “Authorship Criteria in Publishing Research Work, and Issues Surrounding It”	All researcher officers, practitioners, medical officers, postgraduate students, and faculty	240	27.04.2020
4.	Working with Reference manager	Doctors of CRU(H), Siliguri and few doctors of other unit	20	06.05.2020
5.	Plagiarism: A research misconduct	Doctors of CRU(H), Siliguri and few doctors of other unit	20	13.05.2020
6.	Webinar on Boenninghausen Therapeutic Pocket Book	Practitioners, doctors, Medical Officers, PGTs of Kottayam	70	13.05.2020
7.	Webinar on Schizophrenia Day	PGTs from different colleges, under graduates, Doctors of Kottayam	70	24.05.2020

S.No.	Topic	Type of participants	Number of participants	Date
8.	Webinar Series on Capacity Building "Sample Size Determination in Clinical Trials"	All Researcher officers, practitioners, medical officers, postgraduate students, and faculty	427	07.05.2020
9.	Tuberculosis and Homoeopathic Perspective	Ayush doctors, Homeopathy Students and PGs, Medical Officers of Kottayam	50	15.06.2020
10.	Capacity Building Webinar on Neurological examination	Homoeopathy Practitioners, UG/PG Homoeopathic medical students, college faculty of Kottayam	100	29.06.2020
11.	Webinar on Clinical Laboratory- An Overview	Homoeopathy Practitioners, UG/PG Homoeopathic medical students, college faculty of Kottayam	55	27.07.2020
12.	Online meeting for Ethical approval of survey protocol	MO, RO, SRF, JRF, RA, Other HCW of Noida	10	28.07.2020
13.	Training of AYUSH doctors on Research Methodology	AYUSH doctors and professionals of Aizawl	12	07.09.2020
14.	Capacity Building Webinar on Mood Disorders	Homoeopathy Practitioners, UG/PG Homoeopathic medical students, college faculty of Kottayam	19	29.09.2020
15.	Webinar on Meniere's Disease & its management	Homoeopathy Practitioners, UG/PG Homoeopathic medical students, college faculty of Kottayam	88	28.10.2020
16.	Webinar on Reorientation training program for Govt AYUSH Medical Officers on post-COVID management	Faculties, Staffs and Student of Chennai	150	27.11.2020
17.	Webinar on 'Improving Success Rate in Clinical Practice, Case Reporting Guidelines', under IC MOU with CHO Canada	All Research Officers	157	27.11.2020
18.	Webinar on Role of radiology in	Homoeopathy	59	27.12.2020

S.No.	Topic	Type of participants	Number of participants	Date
	day-to-day clinical practice	Practitioners, UG/PG Homoeopathic medical students, college faculty of Kottayam		
19.	Webinar on the Scope of Homoeopathy in Psychiatric Disorders and Multiple Disabilities	HOD's, faculties and students of NIEPMD, Muttukadu, Chennai	55	24.12.2020
20.	Webinar for Capacity Building of Council Scientists "Clinical Aids to manage COVID-19"	All Research Officers and Scientists of the Council	95	17.12.2020
21.	Web based workshop on "Data Analysis using Microsoft Excel"	CCRH Scientists, technical and Administration staff (Research Associates, Research Fellow and Data Entry Operators/Office Assistants under research projects).	240	18 th Jan. 2021-18 th Feb. 2021 (4 Batches)
22.	Online training of EBSCO databases demonstration	Research officers, RA, SRF, JRF of CCRH	70	05.02.2021
23.	Online training of BMJ: How to access BMJ Resources.	Research officers, RA, SRF, JRF of CCRH	92	22.02.2021
24.	Online Introduction and demonstration on How to use Up-To-Date Clinical Decision Support Resource	All Research officers, RA, SRF, JRF	147	24.02.2021
25.	Webinar on "Registration of Clinical Trials and Publishing the Outcomes in a Suitable Journal"	College Faculty, CCRH Headquarters, DDPRCRI(H), Noida	250	26.02.2021
26.	Induction training Program for newly recruited Research Officers	All Research officers and Scientists of the Council	1050	Jan.-Feb. 2021 (Total 21 days)
27.	An online workshop on "A pilot study on sensitivity of provers"	Medical Professionals of Noida	30	05.02.2021
28.	Online training program for on <i>Arsenic album</i> 30 Distribution	Medical Officer(Homoeo) of Agartala	18	09.02.2021
29.	Capacity Building Webinar Online Demonstration of Software Statcraft	Research officers, SRF / JRF of CCRH	90	18.03.2021
30.	Two-days web-based CME on	MO, RO, SRF, JRF, RA of Dr	85	22.03.2021

S.No.	Topic	Type of participants	Number of participants	Date
	importance of human psyche in Homoeopathic research 1. Strength of Homoeopathy in Mental disorder. 2. Prescription on mental symptoms from Homeopathic Repertory	Dr. D.P. Rastogi Central Research Institute for Homoeopathy, Noida		
31.	Two-days web-based CME on importance of human psyche in Homoeopathic research 1. Diabetes and Homoeopathy 2. Research updates on Homoeopathic managements of PCOS with emphasis on mental symptoms 3. Mental symptoms in Homoeopathic Drug proving	MO, RO, SRF, JRF, RA of Dr. D.P. Rastogi Central Research Institute for Homoeopathy, Noida	85	23.03.2021
32.	Capacity Building Webinar on Eliciting symptoms of Mind: Rare Rubrics	Medical officers, Practitioners, Faculty members, Post graduate scholars, Students of Kottayam	78	09.03.2021
33.	Capacity Building webinar on Clinical examination of Dermatological disorders	Medical officers, Practitioners, Faculty members, Post graduate scholars, Students of Kottayam	100	29.03.2021
34.	Capacity building webinar on protocol development	Technical team of Principal of Sri Ganaganar Homoeopathic Medical College, Hospital & Research Institute, Tania University, Sri Ganganagar for developing Research project on Allergic Bronchitis- PG Scholar of above said College & Research Institute, Jaipur	30	20.03.2021

Table 45: The following 23 webinars were conducted related to COVID-19 during the reporting year as given in the following table:

S.No.	Topic	Type of participants	Number of participants	Date
1.	COVID-19 Response and Containment Measures: Training of COVID Warriors	All Researcher officers, practitioners, medical officers, postgraduate students, and faculty	517	10.04.2020
2.	COVID-19 preparedness, response, and containment	Doctors, Students & Practitioners, Patna	60	17.04.2020
3.	COVID-19 preparedness, response, and containment	AYUSH doctors and professionals from Aizawl	65	15.04.2020
4.	COVID-19 Online Training for COVID Warriors	COVID Warriors (Doctors) from CRU(H), Tirupati.	26	16.04.2020
5.	Communication for Response and Containment Measures	Faculty, Medical officers, Junior doctors (Post Graduate students & Internees) from Gudivada.	55	20.04.2020
6.	Online training programme for COVID Warriors (AYUSH)	BHMS/MD (Hom.) qualified Private Practitioners, Govt. Employees, Staffs of NHM/RBSK of Tripura.	37	16.04.2020
7.	Online training program for COVID Warriors on COVID -19 preparedness, response and containment	AYUSH practitioners from Imphal	92	17.04.2020
8.	COVID-19: Response and Containment measures, training of COVID-19 Warriors (AYUSH Students)	Homoeopathy Practitioners from Tamil Nadu state	100	16.04.2020
9.	COVID-19 Training program for COVID Warriors (AYUSH)- Response and containment measure for COVID-19	Staff of CRI(H), Jaipur	15	11.04.2020
10.	Online Training program on COVID-19	College faculty, students, private practitioners, homoeopathic medical officers from Kolkata.	157	20.04.2020
11.	Online Training program of AYUSH COVID warrior	AYUSH practitioners from Siliguri	48	14.04.2020

S.No.	Topic	Type of participants	Number of participants	Date
12.	COVID-19 Response and Containment Measures Training of COVID Warriors (Homeopathic Doctors and Healthcare worker)	Homoeopathy Doctors, Health Worker and Students from Ranchi	72	18.04.2020
13.	COVID-19 Response and Containment Measures Training of COVID Warriors (Homeopathic Doctors and Students)"	Homoeopathy Practitioners, UG / PG Homoeopathic medical students, college faculty from Kottayam	86	17.04.2020
14.	Training on COVID-19	Homoeopathic students/ doctors/clinicians/health workers and staff of Shimla	50	16.04.2020
15.	COVID-19: Response and Containment measures, training of COVID-19 Warriors (AYUSH Students)	Students/Staff of KKC Homoeopathic Medical college and Hospital, Puttur, Andhra Pradesh	200	30.05.2020
16.	COVID-19: Response and Containment measures, training of COVID-19 Warriors (AYUSH Students)	Students/Staff of Vinayaka Missions Homeopathic Medical College and Hospital, Salem, Tamil Nadu.	250	20.06.2020
17.	Webinar on World Mental Health Day 2020	Homoeopathy Practitioners, UG / PG Homoeopathic medical students, college faculty of Kottayam	86	10.10.2020
18.	Webinar for Capacity Building Recent Advances in Medical & Allied Sciences Research - Ample Scope for Homoeopathic Research with a Special Focus on COVID-19	All Research Officers	95	07.10.2020
19.	Webinar for Capacity Building Pandemic Novel Coronavirus Disease 2019 (COVID-19): The unseen and unsaid.	All Research Officers	90	29.10.2020
20.	Webinar on AYUSH for Immunity and Jan Andolan "Importance of Nidra for healthy life" & "Jan Andolan Campaign on COVID-19"	Govt. Senior Secondary School Kotgeha (Shoghi), Shimla	20	07.11.2020

S.No.	Topic	Type of participants	Number of participants	Date
21.	Webinar on AYUSH for Immunity and Jan Andolan "Importance of Nidra for healthy life" & "Jan Andolan Campaign on COVID-19"	Shimla Public School khalini, Shimla	100	25.11.2020
22.	Two-days Web-based CME programme on "Scope of Homoeopathy in management of post COVID-19 complication"	Homoeopathic students/ doctors/clinicians/health workers and staff of Shimla	146	17.03.2021
23.	Web based CME on Scope of Homoeopathy in management of post COVID-19 complication	Homoeopathic students/ doctors/clinicians/health workers and staff of Shimla	101	18.03.2021

Overall, 104 webinars were conducted under various theme-based webinars were also conducted by all Units/Institutes under the Council on AYUSH sanjivani app, Poshan Mah, Hindi Pakhwada, Jan Andolan, AYUSH for Imunity, International Day of Yoga (IDY) etc. as directed by Ministry of AYUSH, which are given in the following table:

Table 46

S.No.	Topic	Type of participants	Number of participants	Date
1.	Online webinar for sensitization of Ayush practitioners & public for participation in Impact assessment of effectiveness, acceptance and usage of AYUSH advisories & measures in prevention of covid-19 through AYUSH Sanjivani Mobile Application based impact assessment study	BAMS/BHMS/MD (Hom.) /MD (Ay) qualified Private Practitioners, Govt. Employees, and Staffs of NHM/RBSK of Tripura	45	23.06.2020
2.	Webinar for sensitization of AYUSH Practitioners and Public on using AYUSH Sanjivani Mobile App	AYUSH practitioners & Yoga Instructor of CRU(H), Siliguri	54	04.06.2020
3.	International Yoga Day	Doctors, Medical Officers, PGTs, BHMS students and interns of Kottayam	100	21.06.2020
4.	ToT (Training of Trainers) program to oriented all attendees about various online platforms like Microsoft teams, Google Meet and Cisco Webex etc	Researcher officers of all units	50	06.07.2020
5.	Webinar on "Sensitization of AYUSH Practitioner in impact assessment of effectiveness" of AYUSH Sanjivani App Study.	College, Teachers, Students of Gangtok	30	15.07.2020

S.No.	Topic	Type of participants	Number of participants	Date
6.	Sensitization of AYUSH Practitioners & Public on AYUSH Sanjivani Application	Practitioners & students of RBTS college, Patna	49	22.07.2020
7.	Sensitization program on AYUSH Sanjivani app	AYUSH doctors and professionals from Aizawl	8	16.07.2020
8.	Sensitization of AYUSH Practitioners and Public for participation in the Impact assessment of effectiveness	Doctors and Students of Tirupati	53	14.07.2020
9.	Sensitization Meet on "AYUSH Sanjivani Mobile App" for Homoeopathic practitioners	Homoeopathic Practitioners, College faculty, Medical Officers, PG students of Hyderabad	200	22.07.2020
10.	Sensitization of AYUSH Practitioners & Public on AYUSH Sanjivani App	Faculty, Medical officers, Junior doctors (Post Graduate students & Internees) of Gudivada	189	10.07.2020
11.	Sensitization of Ayush Practitioners and Public on Ayush Sanjivani Mobile App	Ayush Doctors and Public of Puducherry	36	21.07.2020
12.	Webinar on AYUSH Sanjivani App based impact Assessment study	Ayush practitioners from Imphal	23	15.07.2020
13.	Webinar on sensitization of AYUSH stakeholders for propagation of AYUSH Sanjivani App based impact assessment study	Students/Staff of Vinayaka Missions Homeopathic Medical College and Hospital, Salem, Tamil Nadu	75	15.07.2020
14.	Webinar on sensitization of AYUSH stakeholders for propagation of AYUSH Sanjivani App based impact assessment study	Students/Staff of KKC Homoeopathic Medical College and Hospital, Puttur, Andhra Pradesh	75	28.07.2020
15.	Webinar on Sensitization of AYUSH Sanjivani App	Doctors, Practitioner, AYUSH Students & General Public of Bhubaneshwar	90	23.07.2020
16.	Webinar on Sensitization of AYUSH Practitioners and Public for participation in the Impact assessment of effectiveness, acceptance and usage of AYUSH advisories & measures in prevention	Common Public, AYUSH practitioner from Navi Mumbai	41	07.07.2020

S.No.	Topic	Type of participants	Number of participants	Date
	of COVID-19 through AYUSH Sanjivani App			
17.	Webinar on Sensitization of AYUSH Practitioners and Public for participation in the Impact assessment of effectiveness of AYUSH Sanjivani App	Faculty of homoeopathic medical colleges in Rajasthan	50	13.07.2020
18.	Webinar on Sensitization of AYUSH Practitioners and Public for participation in the Impact assessment of effectiveness of AYUSH Sanjivani App	College faculty, students, private practitioners, homoeopathic medical officers of Kolkata	28	13.07.2020
19.	Webinar on Sensitization of AYUSH Sanjivani App	District Homoeopathic Medical Officer, Homoeopathic Medical Officer and AYUSH doctors under the Directorate of AYUSH, Govt. of Odisha	85	20.07.2020
20.	Webinar on Sensitization of AYUSH Sanjivani App	Homoeopathy Doctors, Healthy Worker, Students and Common Citizen of Ranchi	112	17.07.2020
21	Webinar on Sensitization of AYUSH Sanjivani App	All AYUSH Doctors of Kottayam	92	14.07.2020
22.	Sensitization of AYUSH practitioners and public on AYUSH Sanjivani Mobile App.	Homoeopathic students/ doctors/clinicians/health workers and staff of Shimla	55	08.07.2020
23.	Webinar on Sensitization of AYUSH Sanjivani App	MO, RO, SRF, JRF, RA, Other HCW of Noida	80	06.07.2020
24.	Webinar on Nutritional Health Talk Under Poshan Maah	School Students & Teachers of Patna	38	21.09.2020
25.	Webinar on Nutritional Health Talk Under Poshan Maah	School Students & Teachers of Patna	18	23.09.2020
26.	Webinar on Importance of Healthy food/diet for healthy life	K.K.R. Gowtham School, Tirupati- School Children, Teachers and Parents	43	18.09.2020
27.	Webinar on Importance of Healthy food/diet for healthy life	Silver Oaks School, Tirupati- School Children, Teachers and Parents	87	18.09.2020

S.No.	Topic	Type of participants	Number of participants	Date
28.	Webinar on Importance of Healthy food/diet for healthy life	Kendriya Vidyalaya, Tirupati- School Children, Teachers and Parents	53	19.09.2020
29.	Webinar on Importance of Healthy food/diet for healthy life	Geetham Public School, Tirupati- School Children, Teachers and Parents	32	19.09.2020
30.	Webinar on Importance of Healthy food/diet for healthy life	Venkateswara Spring Dales Public School, Tirupati- School Children, Teachers and Parents	96	22.09.2020
31.	Webinar on Importance of Healthy food/diet for healthy life	Little Angles High School, Tirupati- School Children, Teachers and Parents	97	25.09.2020
32.	Webinar on Role of balanced diet for healthy life	5 th to 9 th class students at St. Joseph's High School, Hyderabad	80	21.09.2020
33.	Webinar on Balanced Nutrition & Healthy Life	8 th to 10 th class students at Global Indian International School, Hyderabad	60	29.09.2020
34.	Webinar on Importance of healthy food and diet in improving immunity	Students of Gudivada	27	16.09.2020
35.	Webinar on Healthy India - Wealthy India : Micro Nutrients & their importance	Students of Gudivada	230	30.09.2020
36.	Webinar on Importance on healthy foods and diet, nutritional deficiency diseases, deficiencies and ways to correct them with locally available foods, role of homoeopathy in overcoming deficiencies	10 th std students-Girls of Puducherry	26	23.09.2020
37.	Webinar on Importance on healthy foods and diet, nutritional deficiency diseases, deficiencies and ways to correct them with locally available foods, role of homoeopathy in overcoming deficiencies	10 th std students-Boys of Puducherry	34	24.09.2020
38.	Webinar on Online health talk on nutrition	Class IX students of Eklavya Model Residential School, Khumulwng, Tripura	44	23.09.2020

S.No.	Topic	Type of participants	Number of participants	Date
39.	Webinar on Online health talk on nutrition	Class XI (Science) students of Monfort Higher Secondary School, Champaknagar, Tripura	86	29.09.2020
40.	Webinar on Poshan Abhiyaan Importance of nutrition, Nutrition in adolescents, Deficiency diseases, Homoeopathy in Deficiency diseases, Concluding lecture on Nutrition with special emphasis on homoeopathic approach in diseases of children	Students between age group 13-15 year, Pitambara English School, Kwakeithel, Imphal	88	25.09.2020
41.	Webinar on Poshan Abhiyaan Importance of nutrition, Nutrition in adolescents, Deficiency diseases, Homoeopathy in Deficiency diseases, Concluding lecture on Nutrition with special emphasis on homoeopathic approach in diseases of children	Students between age group 16-18 year, Pitambara English School, Kwakeithel, Imphal	72	26.09.2020
42.	Online Nutritional Health talk/lecture for staff and students of NIEPMD	Staff and Students of NIEPMD, Chennai	38	23.09.2020
43.	Online Nutritional Health talk/lecture for Divyangjan and their parents	Divyangjan (Person with Disability) and their parents from Chennai	49	25.09.2020
44.	Webinar on Poshan Abhiyan: Importance of good nutrition	Students & Teachers of Alok English Medium School, Bhubaneswar, Odisha	46	19.09.2020
45.	Webinar on Importance of good nutrition	Students & Teachers of Sri Satya Sai High School, Kharavela Nagar, Bhubaneswar, Odisha	41	19.09.2020
46.	Webinar on Poshan Abhiyan: Importance of good nutrition	Students & Teachers of Saraswati Sishu Mandir, Bhubaneswar, Odisha	52	24.09.2020
47.	Webinar on Poshan Abhiyan: Importance of good nutrition	Dr. Abhin Chandra Homoeopathic Medical College, Bhubaneswar	12	25.09.2020
48.	Online Debate Competition for Poshan Abhiyan	Students at Sri Satya Sai High School, Kharavela Nagar, Bhubaneswar, Odisha	27	25.09.2020

S.No.	Topic	Type of participants	Number of participants	Date
49.	Webinar on Poshan Abhiyan: Balanced Diet	3 rd standard students of Navi Mumbai	10	26.09.2020
50.	Online Nutritional Health Talks in Sankardev Sishu Niketan,	School students, Teachers, Parents from Guwahati	50	14.09.2020
51.	Online Nutritional Health Talks in Sankardev Vidya Niketan, Betkuchi	School students, Teachers, Parents of Guwahati	65	14.09.2020
52.	Online Nutritional Health Talks in Sankardev Sishu Niketan, Maligaon	School students, Teachers, Parents of Guwahati	90	15.09.2020
53.	Online Nutritional Health Talks in Sankardev Sishu Niketan, Hengrabari	School students, Teachers, Parents of Guwahati	80	18.09.2020
54.	Online Nutritional Health Talks in Bikash Academy, Hatigaon	School students, Teachers, Parents of Guwahati	104	19.09.2020
55.	Online Nutritional Health Talks for Karyakartas of Sewa Bharati Purbanchal NGO	Karyakartas of Sewa Bharati Purbanchal NGO of Guwahati	50	21.09.2020
56.	Online Nutritional Health Talks	School students, Teachers, Parents of Guwahati	130	26.09.2020
57.	Online Nutritional Health Talks	School students, Teachers, Parents of Guwahati	50	28.09.2020
58.	Webinar on Poshan Abhiyan: Importance of Nutrition and Healthy Food	Students, Teachers and Parents of Lucknow	30	21.09.2020
59.	Webinar on Poshan Abhiyan: Healthy food and its importance	Students, Teachers and Parents of Lucknow	40	22.09.2020
60.	Webinar on Poshan Abhiyan- its aim and mission	Students, Teachers and Parents of Lucknow	45	23.09.2020
61.	Webinar on Poshan Abhiyan: Importance of Nutrition and Healthy Food	Students, Teachers and Parents of Lucknow	35	24.09.2020
62.	Webinar on Poshan Abhiyan: Concept of nutrition to enhance the awareness in common people	School Teachers, Students, Health workers of Kolkata	45	29.09.2020
63.	Webinar on Poshan Abhiyan: Healthy diet	Std. X and XI (age group 15 - 16 yrs.) Students from Kendriya Vidyalaya School, Puri	58	23.09.2020

S.No.	Topic	Type of participants	Number of participants	Date
64.	Webinar on Poshan Abhiyan : Vitamins	Std VIII (age group - 13yrs) Students from Kendriya Vidyalaya School, Puri	36	23.09.2020
65.	Webinar on Poshan Abhiyan : Balanced diet	Std. X and XII (15 -17 yrs.) Students from Kendriya Vidyalaya School, Puri	67	24.09.2020
66.	Webinar on Poshan Abhiyan : Nutritional anaemia during adolescence	Dept. of Veda and Jyotirvigyana (1 st and 2 nd) (age group 22- 24yrs.) Shri Jagannath Sanskrit Vishvavidyalaya, Puri	48	25.09.2020
67.	Webinar on Poshan Abhiyan: Health and Nutrition	Std. VIII and IX (age group 13 - 14 yrs.) Students from Kendriya Vidyalaya School, Puri	67	26.09.2020
68.	Webinar on Poshan Abhiyan : Role of Diet and Nutrition for School going Children	Students at Kids Garden School, Ranchi	35	19.09.2020
69.	Webinar on Poshan Abhiyan : Role of Diet and Nutrition for School going Children	Students of Sachidanand Gyan Bharti Model School, Doranda, Ranchi	81	26.09.2020
70.	Webinar on Poshan Abhiyan : Poshan Mah, Agro-Homoeopathy	Homoeopathy Practitioners, UG/PG Homoeopathic medical students, college faculty of Kottayam	100	24.09.2020
71.	Webinar on Poshan Abhiyan Importance of healthy food & diet; Foods to be incorporated in daily diets taking care of local foods available; Role of Homoeopathy in overcoming deficiencies. Role of Homoeopathy in overcoming deficiencies.	Students & teachers at DAV Senior Secondary Public School, New Shimla	70	24.09.2020
72.	Webinar on Poshan Abhiyan Nutrition deficiency diseases in Children like Anaemia, PEM, Vitamin deficiency disease; How deficiency can be achieved with improvement in diet.	Students & teachers at DAV Senior Secondary Public School, New Shimla	70	24.09.2020

S.No.	Topic	Type of participants	Number of participants	Date
73.	Webinar on Poshan Abhiyan Importance of healthy food & diet; Foods to be incorporated in daily diets taking care of local foods available; Role of Homoeopathy in overcoming deficiencies.	Students & teachers at Govt. Senior Secondary School, Lalpani, Shimla	30	28.09.2020
74.	Webinar on Poshan Abhiyan Nutrition deficiency diseases in Children like Anaemia, PEM, Vitamin deficiency disease; How deficiency can be achieved with improvement in diet.	Students & teachers at Govt. Senior Secondary School, Lalpani, Shimla	30	28.09.2020
75.	Webinar on Poshan Abhiyan Importance of healthy food & diet; Foods to be incorporated in daily diets taking care of local foods available; Role of Homoeopathy in overcoming deficiencies.	Students & teachers of Govt. Senior Secondary School, Junga, Shimla	30	29.09.2020
76.	Webinar on Poshan Abhiyan Nutrition deficiency diseases in Children like Anaemia, PEM, Vitamin deficiency disease; How deficiency can be achieved with improvement in diet.	Students & teachers at Govt. Senior Secondary School, Junga, Shimla	30	29.09.2020
77.	Webinar on Poshan Abhiyan Importance of healthy food & diet; Foods to be incorporated in daily diets taking care of local foods available; Role of Homoeopathy in overcoming deficiencies.	Students & teachers of Convent of Jesus & Mary Chelsea, Shimla	80	30.09.2020
78.	Webinar on Poshan Abhiyan Nutrition deficiency diseases in Children like Anaemia, PEM, Vitamin deficiency disease; How deficiency can be achieved with improvement in diet.	Students & teachers of Convent of Jesus & Mary Chelsea, Shimla	40	30.09.2020
79.	Webinar on Poshan Abhiyan 2020	MO, RO, SRF, JRF, RA, Other HCW of Noida	40	18.09.2020
80.	Webinar on Poshan Abhiyan 2020	School students and Teachers of Gangtok	20	30.09.2020
81.	Webinar on Poshan Abhiyan : Benefits of VIHARA (Exercise) for adolescents	Students and teachers of Sarswati Sishu Vidya Mandir & Sri Sathya Sai	53	15.10.2020

S.No.	Topic	Type of participants	Number of participants	Date
		High School, Bhubaneswar		
82.	Webinar on Swacchta Pakhwada: Hand hygiene in response to COVID-19	All AYUSH staff and students of Kottayam	28	23.10.2020
83.	Webinar on Role of Yoga in Reducing Stress	Unit officer/staffs and OPD Patients of CRU(H), Ranchi	15	09.10.2020
84.	Webinar on Role of Yoga in Joint Disorder	Unit officer/staffs and OPD Patients of CRU(H), Ranchi	25	27.10.2020
85.	Online Health Talk - AYUSH for Immunity	Officers / Staffs of NIEPMD, Chennai	26	13.10.2020
86.	Online Health Talk - AYUSH for Immunity	Officers/Staffs for Divyangjans and their parents of NIEPMD, Chennai	32	16.10.2020
87.	Webinar on AYUSH for Immunity	Students, staffs, and faculties of Venkateswara Homoeopathic Medical College, Porur, Chennai	100	28.10.2020
88.	Webinar on AYUSH for Immunity	Students, staffs, and faculties of KKC Homoeopathic Medical College, Puttur	55	29.10.2020
89.	Webinar on AYUSH for Immunity "Importance of Vihaara (exercise)" by emphasizing specifically on the benefits of various types of Yoga to maintain health & boost up immunity.	Residents of Shimla	25	21.10.2020
90.	Webinar on AYUSH for Immunity "Importance of Vihaara (exercise)" by emphasizing specifically on the benefits of various types of Yoga to maintain health & boost up immunity.	Students & teachers at Uma International Public School Mehli, Shimla	16	23.10.2020
91.	Webinar on AYUSH for Immunity and Jan Andolan "Importance of Vihaara (exercise)" by emphasizing specifically on the benefits of	Students & teachers at Govt. Senior Secondary School, Junga, Shimla	20	26.10.2020

S.No.	Topic	Type of participants	Number of participants	Date
	various types of Yoga to maintain health & boost up immunity.			
92.	Webinar on AYUSH for Immunity and Jan Andolan "Importance of Vihaara (exercise)" by emphasizing specifically on the benefits of various types of Yoga to maintain health & boost up immunity.	Students & teachers of Convent of Jesus & Mary Chelsea, Shimla	40	27.10.2020
93.	Webinar on AYUSH for Immunity and Jan Andolan "Importance of Vihaara (exercise)" by emphasizing specifically on the benefits of various types of Yoga to maintain health & boost up immunity.	Students & teachers at Govt. Senior Secondary School Naldera, Shimla	30	28.10.2020
94.	Webinar on AYUSH for Immunity and Jan Andolan "Importance of Vihaara (exercise)" by emphasizing specifically on the benefits of various types of Yoga to maintain health & boost up immunity.	Students & teachers of JCB Senior Secondary Public School, New Shimla	30	29.10.2020
95.	Webinar on AYUSH for Immunity and Jan Andolan "Importance of Vihaara (exercise)" by emphasizing specifically on the benefits of various types of Yoga to maintain health & boost up immunity.	Officers and officials of RRI(H) Shimla	7	30.10.2020
96.	Webinar on 5 th Ayurveda Day Celebration.	Staff of RRI(H) Guwahati, RARI, Others	30	13.11.2020
97.	Webinar on AYUSH for Immunity	Staffs and Students of Vinayaka Mission's Homoeopathic Medical College, Salem, Chennai	101	06.11.2020
98.	Webinar on AYUSH for Immunity	Faculties, Staffs, and Students of Chennai	100	11.11.2020
99.	Webinar on AYUSH for Immunity and Jan Andolan	10 th std students of Puducherry	17	18.11.2020
100.	Webinar on AYUSH for Immunity and Jan Andolan	11 th std students of Puducherry	64	23.11.2020

S.No.	Topic	Type of participants	Number of participants	Date
101.	Webinar on "Sleep and COVID-19"	PGT of Shri Jagannath Sanskrit University, Puri	27	06.11.2020
102.	Webinar on Jan Andolan program	Scientists, Officers and Staff of National Informatics Centre, Ministry of Electronics and Information Technology, Govt. of India, Rajaji Bhavan, Besant Nagar, Chennai	59	10.12.2020
103.	Webinar on Jan Andolan Awareness Program and distribution of Homoeopathy Immune boosting Medicine <i>Arsenic album 30</i>	Divyangjans children of NIEPMD and their parents, Muttukadu, Chennai	28	23.12.2020
104.	Webinar on Poshan Abhiyan 2021	Teachers, Research officers of Dr. D. P. Rastogi Central Research Institute for Homoeopathy, Noida	22	31.03.2021

Table 47: Thirty six webinars were conducted under themes like Swachta Pakhwada, Hindi Pakhwada and Vigilance Awareness Program, which are detailed in the following table:

S.No.	Topic	Type of participants	Number of participants	Date
1.	Hindi Webinar	Researcher Officers, Practitioners, Medical Officers, postgraduate students, and faculty	250	29.07.2020
2.	Webinar on celebration of Hindi Pakhwada 2020	Officers/staff of HRID, Chennai	12	11.09.2020
3.	Webinar on Hindi Pakhwada	Officers/staff of HRID, Chennai	12	25.09.2020
4.	Webinar on Hindi Annual Programme	All office staff of RRI(H), Navi Mumbai	15	29.09.2020
5.	Webinar on Hindi Diwas "Rajbhsha ke roop me hindi"	All office staff of RRI(H), Navi Mumbai	15	29.09.2020
6.	Hindi Pakhwada Samapan Samaroh (Online) and Kabita Path Competition	Office Staff of RRI(H), Guwahati	20	23.09.2020
7.	Webinar on Hindi Pakhwada	Officers and Officials of HDRI, Lucknow	20	26.09.2020

S.No.	Topic	Type of participants	Number of participants	Date
8.	Webinar on Hindi Pakhwada	Officers and Officials of HDRI, Lucknow	20	26.09.2020
9.	Online competition on Hindi Pakhwada - "Sambhasan" and "Kabita Path" was organised. Judges and participants were connected virtually over the video conferencing app.	Office staff of DACRRI(H), Kolkata	47	26.09.2020
10	Webinar on Hindi Pakhwada Udghaton samaraho	Officers and staff of CRU (H), Siliguri and all staff working at LSD Clinics under CRU (H), Siliguri	35	10.09.2020
11.	Webinar on Hindi Pakhwada Samapan Samaraho	Officers and staff of CRU (H), Siliguri and all staff working at LSD Clinics under CRU (H), Siliguri	25	22.09.2020
12.	Webinar on Hindi Pakhwada- Rules and Bylaws of Official Language	Homoeopathic Practitioners, UG & PG Homoeopathic medical college students, college faculty of Kottayam	96	28.09.2020
13.	Webinar on Swacchata Pakhwada	All AYUSH staff and students of Kottayam	48	27.10.2020
14.	Webinar on Swacchata Pakhwada: "Safai agar Rahi to Rog Nahi"	Officers and staff of CRU (H), Siliguri and all staff working at LSD Clinics under CRU (H), Siliguri	35	28.10.2020
15.	Webinar on AYUSH for Immunity and Jan Andolan Residential Environment, Cleanliness & hygiene for prevention of COVID-19; AYUSH for Immunity campaign" by focusing on importance of Vihaara (exercise) in maintaining health, boosting immune system of body & prevention of infection.	Residents of Shimla	25	21.10.2020
16.	Webinar on AYUSH for Immunity on curbing the use of single-use plastic and discouraging the use of plastic	Officers and staff of RRI(H), Shimla	8	22.10.2020
17.	Webinar on AYUSH for Immunity and Jan Andolan	Students & teachers of Uma International Public	16	23.10.2020

S.No.	Topic	Type of participants	Number of participants	Date
	<ol style="list-style-type: none"> 1. School Environment & Cleanliness & hygiene for prevention of COVID-19 2. Jan Andolan Abhiyan on COVID-19 3. "AYUSH for Immunity campaign" by focusing on importance of Vihaara (exercise) in maintaining health, boosting immune system of body & prevention of infection. 	School, Mehli, Shimla		
18.	Webinar on AYUSH for Immunity and Jan Andolan <ol style="list-style-type: none"> 1. School Environment & Cleanliness & hygiene for prevention of COVID-19 2. Jan Andolan Abhiyan on COVID-19 3. "AYUSH for Immunity campaign" by focusing on importance of Vihaara (exercise) in maintaining health, boosting immune system of body & prevention of infection. 	Students & teachers of Govt. Senior Secondary School, Junga, Shimla	20	26.10.2020
19.	Webinar on AYUSH for Immunity and Jan Andolan <ol style="list-style-type: none"> 1. School Environment & Cleanliness & hygiene for prevention of COVID-19 2. Jan Andolan Abhiyan on COVID-19 3. "AYUSH for Immunity campaign" by focusing on importance of Vihaara (exercise) in maintaining health, boosting immune system of body & prevention of infection. 	Students & teachers of Convent of Jesus & Mary Chelsea, Shimla	40	27.10.2020
20.	Webinar on AYUSH for Immunity and Jan Andolan <ol style="list-style-type: none"> 1. School Environment & Cleanliness & hygiene for prevention of COVID-19 2. Jan Andolan Abhiyan on COVID-19 3. "AYUSH for Immunity campaign" by focusing on importance of Vihaara (exercise) in 	Students & teachers of Convent of Jesus & Mary Chelsea, Shimla	40	27.10.2020

S.No.	Topic	Type of participants	Number of participants	Date
	maintaining health, boosting immune system of body & prevention of infection.			
21.	<p>Webinar on AYUSH for Immunity and Jan Andolan</p> <ol style="list-style-type: none"> 1. School Environment & Cleanliness & hygiene for prevention of COVID-19 2. Jan Andolan Abhiyan on COVID-19 3. "AYUSH for Immunity campaign" by focusing on importance of Vihaara (exercise) in maintaining health, boosting immune system of body & prevention of infection. 	Students & teachers of Govt. Senior Secondary School, Naldera, Shimla	30	28.10.2020
22.	<p>Webinar on "AYUSH for Immunity and Jan Andolan campaign" by focusing on importance of Vihaara (exercise) in maintaining health, boosting immune system of body & prevention of infection.</p> <ol style="list-style-type: none"> 1. School Environment & Cleanliness & hygiene for prevention of COVID-19 2. Jan Andolan Abhiyan on COVID-19 3. "AYUSH for Immunity campaign" by focusing on importance of Vihaara (exercise) in maintaining health, boosting immune system of body & prevention of infection. 	Students & teachers of JCB Senior Secondary Public School, New Shimla	30	29.10.2020
23.	<p>Webinar on AYUSH for Immunity and Jan Andolan</p> <ol style="list-style-type: none"> 1. School Environment & Cleanliness & hygiene for prevention of COVID-19 2. Jan Andolan Abhiyan on COVID-19 3. "AYUSH for Immunity campaign" by focusing on importance of Vihaara (exercise) in maintaining health, boosting immune system of body & prevention of infection. 	Officers and officials of RRI(H), Shimla	7	30.10.2020

S.No.	Topic	Type of participants	Number of participants	Date
24.	Webinar on AYUSH for Immunity and Jan Andolan 'Satark Bharat, Samridh Bharat'	Officers and officials of RRI(H), Shimla	22	31.10.2020
25.	Webinar on Swachhata Pakhwada	Teacher, Students, Guardians of Guwahati	15	20.10.2020
26.	Webinar on Vigilant India, Prosperous India	School Students- (IX Std.) of Navi Mumbai	30	31.10.2020
27.	Webinar on Swachhata Pakhwada, importance of Swachhata Pakhwada	School Students- (X Std.) of Navi Mumbai	30	29.10.2020
28.	Webinar on Swachhata Pakhwada, importance of Swachhata Pakhwada and disadvantages of plastic.	School Students- (IX Std.) of Navi Mumbai	30	31.10.2020
29.	Webinar on Pharmacovigilance	BHMS students/Interns/ Practitioners of Mumbai	200	24.11.2020
30.	Webinar on "Satark Bharat, Samriddh Bharat" & "Importance of Nidra for healthy life"	Residents of Shimla	20	02.11.2020
31.	Webinar on Pharmacovigilance & Homoeopathy	Homoeopathic faculty, Medical Officers, Research Officers, SRFs, JRFs, PG students, Internees & Homoeopathic practitioners of Gudivada	80	20.01.2021
32.	Webinar on Pharmacovigilance of ASU & H Drugs (Central Sector Scheme)	Doctors & common people of Guwahati	177	10.02.2021
33.	Online workshop Hindi Karyashala	Research Officer and Office staff of Ranchi	12	10.03.2021
34.	Online meeting on protocol of a cross sectional survey on Impact on general public of COVID-19	Ethical committee members, Officer In charge, Research officers of Dr. D. P. Rastogi Central Research Institute for Homoeopathy, Noida	10	19.03.2021
35.	Webinar on Poshan Abhiyan Malnutrition prevalence, consequences, and its management; Awareness campaign about 5 sutras; Poshan Vatika; Food forestry	Homoeopathic students/ doctors/clinicians/health workers and staff of Shimla	33	25.03.2021

S.No.	Topic	Type of participants	Number of participants	Date
36.	Webinar on Poshan Abhiyan Malnutrition prevalence, consequences, and its management; Awareness campaign about 5 sutras; Poshan Vatika; Food forestry	Homoeopathic students/ doctors/clinicians/health workers and staff of Shimla	26	26.03.2021

Webinars Participated by CCRH

- Dr. Satish Patel had participated in a Webinar on “Combat COVID-19 current research for drug and vaccine development on 2nd June 2020 organized by Faculty of Pharmacy, RKDF University, Bhopal.
- Dr. J. Shashikanth, Dr. E. N. Sundaram, Dr. Satish Patel, Dr. Abhijit Chakma, Dr. Liyi Karso, Dr. Ratan Chandra Shil, Dr. Trupti Laxmi, Dr. Arti Soren, Dr. P. K. Pradhan, Dr. A. K. Prusty, Dr. U. K. Prusty, Dr. S. K. Choudhury, Dr. Sunil Prasad, Dr. Bharti Wadhwa and Dr. Pritha Mehra had participated in a Webinar on “AYUSH Sanjivani mobile app: a critical tool for public health research in AYUSH disciplines” held on 4th June 2020 organized by Ministry of AYUSH, New Delhi.
- Dr. J. Shashikanth and Mr. S. Mugendhiran had participated in an international Webinar on “Eco-conscious Agriculture” held on 4th June, 2020 organized by Maris Stella College, Vijayawada, A. P.
- Dr. Pooja Gautam participated in a webinar on An Update on “COVID-19 for AYUSH Doctors (HOMOEOPATHY)” conducted by Directorate of AYUSH, Government of NCT of Delhi on 5th June 2020.
- Dr. Satish Patel had participated in a Webinar on “Overseas Learning: Prospects & Path for Pharmacy Graduates” held on 9th June 2020 organized by Guru Gobind Singh College of Pharmacy, Yamunanagar, Haryana.
- Dr. Satish Patel had participated in a Webinar on “Drug Repurposing: Current Face of Drug Development” held on 10th June 2020 organized by Guru Gobind Singh College of Pharmacy, Yamunanagar, Haryana.
- Dr. A. K Prusty participated in a Webinar on “Compassionate use of medicine: increased relevance in time of COVID-19”, Organized by CDSA on 10th June 2020, Speaker was Prof. Y. K. Gupta.
- Dr. Pradhan, Dr. U. K. Prusty, Dr. S. K. Choudhury participated in MNRHMC NEXUS 2020 Webinar on “Management of Disorders of Ear, Nose & Throat”, Speaker: Dr. K. C. Prasobh Kumar, CMO, Dept. of Homoeopathy, Kerala on 13th June 2020.
- Dr. Ranjit Sonny, RO(H)/S-1 participated as expert in the Webinar organized by “Academy of Quest” Kolkata on 15th June 2020.
- Dr. Pradhan and Dr. Liyi Karso participated in a Webinar on 'Homoeopathy in cardiovascular diseases' Speaker: Dr. Maneesha Solanki, hosted by The Homeopathic Academy on 20th June 2020.
- Dr. Ranjit Sonny, Officer incharge, RRI(H), Guwahati delivered a lecture on the topic "UNDER THE SHADE OF PLANTANUS ORIENTALIS: AN EXPERIENCE IN THE BED SIDE" on 14th June 2020 on the platform of “Academy of Quest”, Kolkata.
- Dr. E. N. Sundaram, Dr. Satish Patel, Mr. K. Rambabu and Ms. Divya had participated in a Webinar on Basics of ICP-MS and analysis of heavy metal in herbal drug on 15th June 2020.
- Dr. J. Shashikanth and Mr. S. Mugendhiran had participated in a Webinar on Basics of ICP-MS and analysis of heavy metal in herbal drug on 15th June 2020 organized by Perkin Elmer, Mumbai.
- Dr. Ranjit Sonny, RO(H)/S-1 participated in the webinar on Homoeopathy Organized by “Academy of Quest” platform Kolkata, on 20th June 2020.

- A webinar on "contribution of Homoeopathic practitioners to research" was organised by Indian Institute of Homoeopathic Physicians on 21st June 2020 in which Dr. Anil Khurana, DG, CCRH participated as a principal resource person and Dr. Varanasi Roja as a speaker, Dr. Liyi Karso, Dr. P. K. Pradhan, Dr. U. K. Prusty, Dr. S. K. Choudhury and Dr. Pooja Gautam attended the program.
- Dr. Sunil Prasad participated in a Yoga session organised by Ministry of AYUSH on 21st June 2020.
- Dr. Padmalaya Rath participated in a Webinar on publication "Secret to being publication-ready revealed." Organized by Cactus Communication on 25th June.
- Mr. K. Rambabu and Mr. S. Mugendhiran had participated in a Webinar on "The great role of botanists in production of high quality authentic Ayurvedic /Herbal medicine on 25th June 2020 organized by Egra S. S. B. College, Medinipur, West Bengal.
- Dr. J. Shashikanth and Mr. S. Mugendhiran had participated in a Webinar on "Biodiversity on Conservation" held on 26th June 2020 organized by Government Arts College, Udhagamandalam.
- Dr. Pradhan participated in a Webinar on Role of Homoeopathy in Depression & some tips about Cancer, Hosted by homeopathy 360, on 27th June 2020 (B. Jain)
- Dr. E. N. Sundaram, Mr. K. Rambabu, Dr. Pradhan, Ms. Divya, Dr. Pawan Sharma, Dr. Pooja Gautam and Dr. Liyi Karso had participated in a Webinar on GHF: Homoeopathy drug dynamization in relation to quantum physics on 28th June 2020.
- Dr. J. Shashikanth and Mr. S. Mugendhiran had participated in a Webinar on "Plant Diversity of Konkan" on 29th June 2020 organized by Sharadchandra Pawar Mahavidyalaya, Lonand, M.H.
- Webinar on Homoeopathy: Need of the time organised by Arogya Bharti and Hahnemannian academy to mark our master's memorial day on 2nd July convened by Dr. Anil Khurana, DG, CCRH, Dr. Subhash Singh, Director, NIH, Kolkata, Prof. Dr. B. N. Singh, Chairman HMB, UP, Dr. Ashok Varshneya, National organising secretary, Arogya Bharti, addressed the webinar.
- Dr. J. Shashikanth and Mr. S. Mugendhiran had attended National level one week Online Short Term Course on "Plant Taxonomy" during 03rd to 8th August 2020, organized by Department of Botany, Nizam College, Osmania University, Hyderabad, Telangana.
- Mr. Digvijay Verma attended the Webinar on "CAMAG-Merck joint webinar session on TLC/ HPTLC – Tips & Troubleshooting + CAMAG Capabilities" organized by, Anchrom Enterprises (I) Private Limited, Mumbai, India for CAMAG, Switzerland on 04th August 2020.
- Mr. Digvijay Verma attended webinar on "Accelerating Innovation in Medical Devices Through Simulation" organized by ANSYS on 06th August 2020.
- Dr. J. Shashikanth had participated International Webinar on "Covid-19: Facts and it's diagnosis by RT-PCR", on 7th August, 2020 organized by PG Department of Botany, The New College, Chennai.
- Dr. J. Shashikanth and Mr. S. Mugendhiran had attended National level One week Online Short Term Course on "Green Audit" during 09th to 14th August 2020, organized by Department of Environmental Science, Osmania University and Environment Protection Training and Research Institute (EPTRI), Hyderabad, Telangana, India.
- Mr. Digvijay Verma attended 7 days Faculty Development webinar Programme on 'Research Article Writing and Online Academic Presentation' from 7, 23rd August 2020 organized by Government Girls PG College Ujjain.
- Mr. Digvijay Verma attended full agenda of ACS on Campus India Virtual Event on August 10, 2020.
- Mr. Digvijay Verma Attended the webinar on "AYUSH Regulation and Herbal Analytical Testing", organized by Perkin Elmer on 14th August, 2020.
- Dr. E. Sundaram, Dr. Satish Patel and Mr. K. Rambabu participated a Webinar on launch of campaign on "AYUSH for immunity on 14.08.2020 by Ministry of AYUSH.
- Dr. J. Shashikanth and Mr. Digvijay Verma attended the webinar on "Role of HPTLC in identifying the

markers in phytopharmaceutical drugs”, Indian Pharmacopoeia Commission, Ghaziabad organized by Anchrom Enterprises (I) Private Limited, Mumbai, India on 18th August, 2020.

- Dr. J. Shashikanth, Mr. K. Rambabu and Mr. S. Mugendhiran had participated in a Webinar on “An Overview on Plant Taxonomy” held on 20.08.2020, organized by Department of Botany (P.G), Andra Loyola College (Autonomous), Vijayawada, Andhra Pradesh- 520008.
- Mr. Digvijay Verma attended the National webinar on “Natural Products in Drug Discovery” organized by Shri Venkateshwara College of Pharmacy, Ariyur, Puducherry, India on 27th August 2020.
- 11 participants from CCRH, Hqr. attended webinar on Creativity, Inovation and IPR for knowledge based economy on dated 29th August 2020, organized by Guru Jambheshwar University of Science and Technology, Hisar.
- Mr. K. Rambabu participated a webinar on Recent Trends in Botany Organized by Department of Botany IQAC Yogeswari Mahavidhyalay Ambajogai, Maharastra on 31.08.2020.
- Dr. Anil Khurana, Director General, CCRH, inaugurated the Virtual workshop on Applied Homoeopathy on 5th September, 2020 through Google Meet app.
- Dr. Anil Khurana, Director General, CCRH, participated as a Chief guest in Webinar on "Life style Diseases and its Homoeopathic Management" on 5th September, 2020.
- Dr. Anil Khurana, Director General, CCRH, participated as an expert in a webinar on “COVID-19: Research and Clinical Update” on 4th October 2020 organized by Rashtriya Homoeopathy Sangh.
- 21 participants from DACRRI(H) Kolkata attended webinar “How to write and publish in BMJ case reports” on 01st October -2020.
- Dr. Pankaj Gupta and team CCRH attended WEBINAR: Homoeo Vigilance” on Pharmacovigilance Awareness Programme for ASU & H Drugs on 5th October 2020, IPvC, NIH, Kolkata.
- Mr. S. Mugendhiran had participated Wildlife Week Webinar 2020 on 8th October 2020, Organized by Department of Zoology and Wildlife Biology of Government Arts College, Udhagamandalam- 643 002.
- Dr. Satish Patel has attended a webinar on "Tips & Tricks to Better Histology Webinar Part 1 (Tissue Preparation to Processing) organized by Leica Biosystems on 08.10.2020.
- 23 participants from DDPRCRI(H) Noida and 18 participants from DACRI(H) Kolkata attended 66th SAB meeting on 8th October 2020.
- CCRH, HQ convened meeting on Standardization of Alcohol used in Homoeopathy with DS team under the chairmanship of Director General on dated 16.10.2020.
- CCRH, HQ convened meeting of Industry Stakeholders Virtual Consultation on “Regulations and Standards for Phytopharmaceuticals” on dated 16.10.2020
- Dr. Binit Dwivedi attended the online meeting Drug Standardization New Delhi HQs on 16th October 2020.
- 12 participants from DACRRI(H), Kolkata attended webinar conducted by DBT “Third Interactive Session for IBSCs registered on IBKP portal” on 22nd October, 2020.
- 16 participants from DDPRCRI(H), Noida attended webinar on “The Research Grant Applications Guide” organized by Wiley Research Webinars APAC on 22nd October 2020.
- Dr. J. Shashikanth had participated National Quiz "TELANGANA STATE FLORAL FESTIVAL" - ON THE OCCASION OF BATUKAMMA SAMBURAALU-"2020" on 23.10.2020, organized by Department of Science & Department of NSS, Govt. Degree College for Women, Jagtial, Telangana- 505 327.
- Dr. Anil Khurana, Director General, CCRH, participated as an expert in a webinar on 24th October 2020 organized by Kshirsagar Homoeopathic Medical College Beed Maharashtra and

Homoeopathic Education and Research Institute Mumbai.

- Dr. Anil Khurana, Director General, CCRH, participated as a Chief guest in Webinar on "Thyroid Disorder" in the occasion of foundation day of Rajasthan Vidyapeeth Homoeopathic Medical College, Dabok Udaipur on 26th October 2020.
- Dr. Anil Khurana participated in a webinar by COVID Task force for patient Management with Integrative case on 29th October 2020 to 1st November 2020.
- Dr. Binit Dwivedi, R.O.(C)/S-2 attended the online webinar on HPTLC PRO SYSTEM - CAMAG's new approach to automated quality control" organized by CAMAG, Switzerland on 09th December 2020.
- Dr. J. Shashikanth had participated National Webinar on "Trends And Techniques In Biodiversity Assessment" on 10th December 2020, Organized by Department of Botany, Adikavi Nannaya University, Rajamahendravara, Andhra Pradesh.
- Dr. Pankaj Gupta, AD(P) attended guest lecture on "General scientific methods for designing in-vivo preclinical experiments" on 22nd December 2020 organized by department of pharmacology Chalapathi Institute of Pharmaceutical Sciences.
- Dr. J. Shashikanth had participated National Webinar on "IPR: Powerhouse for Innovation" on 12th December 2020, Organized by PG & Research Department of Botany in association with IQAC IIC & IPR Cell., Vivekanandha College of Arts And Sciences For women (Autonomous), Elayampalayam, Tiruchengodu, Namakkal, Tamil Nadu.
- Mr. G. V. Narasimha Kumar attended webinar on "Efficient Mouse Colony Management" conducted by Jackson laboratories, USA on 1st December, 2020.
- Mr. G. V. Narasimha Kumar attended webinar on Pre-clinical imaging biomarker in drug discovery" conducted by ISVPT on 12th December, 2020.
- Mr. G. V. Narasimha Kumar attended webinar on "Measuring vascular stiffness in aging mice using high resolution vascular ultrasound" conducted by Fujifilm Visual Sonics on 16th December, 2020.
- Mr. G. V. Narasimha Kumar attended webinar on "Latest knowledge and research updates on COVID-19 for the CCRH Scientists" conducted by CCRH on 17th December, 2020.
- Mr. G. V. Narasimha Kumar attended webinar on "Research in Homeopathy for Health" conducted by Bahola Foundation on 19th December, 2020.
- Mr. G. V. Narasimha Kumar was invited to deliver a Guest lecture on the topic "General Scientific methods for designing In-vivo preclinical experiments" on 22nd December, 2020 by Chalapathi Institute of Pharmaceutical sciences, Guntur, Andhra Pradesh.
- Mr .G.V. Narasimha Kumar was invited to deliver a Guest lecture on the topic "General Scientific methods for designing In-vivo preclinical experiments" on 22nd December, 2020 by Chalapathi Institute of Pharmaceutical sciences, Guntur, Andhra Pradesh.
- Sh. Rajendra Indwar, Secretary TOLIC, Port Blair, participated as a speaker in 85 meeting of Town Official Language Implementation Committee, Port Blair, A & Nicobar Islands on 18th December 2020.
- India International Science Festival 2020 Mega Science Expo on the Virtual Platform on 22nd-25th December 2020.
- Dr. Bibaswan Biswas attended the webinar "COVID-19 Vaccines: Progress, Challenges and Hope"
- Dr. Kolli Raju, RO(H), S4, attended the valedictory session of the two days National Webinar on Research on Disability Rehabilitation on 29th and 30th December 2020.
- VC on administrative matters, GeM and PFMS by CCRH on 1st January 2021- 2nd January 2021 at CCRH Hqrs, New Delhi. Pending matters of the Units were discussed and orientation on working of PFMS given. Training imparted on the working of PFMS portal. Speaker was Sh. Hari Om Kaushik, AD(Admn), CCRH Hqrs.

- Dr. J. Shashikanth attended Webinar on “International Code of Nomenclature (ICN) for Plants” on 06.01.2021, Organized by Botanical Survey of India, Deccan Regional Center, Hyderabad in association with Department of Botany, Andhra University, Visakhapatnam, India.
- Dr. J. Shashikanth attended one day National Webinar on “Latest Advances in Agriculture and Health” on 9th January 2021, Organized by Department of Botany, Rayagada Autonomous College, Rayagada, Odisha.
- Mr. K. Rambabu, JRF(Botany) and Miss. K. Divya Teja, JRF (Zoology) attended webinar on “Awareness & Training program on Pharmacovigilance of Homoeopathic Drugs” organized by RRI(H), Gudivada on 20th January 2021.
- Mr. G. V. Narasimha Kumar attended “7th National Digital Conference on Scientific Updates on Emerging Viral Zoonotic Diseases including COVID-19 Prevention and Drivers triggering mutations” conducted by Millennium India Education Foundation on 27th January 2021.
- Mr. G. V. Narasimha Kumar attended “International Virtual Training Programme on Advanced Microscopic Techniques in Biomedical Research” conducted by Wiiled Body programme, Vijayawada from 28th January to 30th January, 2021.
- A Pilot Study on Sensitivity of Provers on 5th February 2021. Speaker was Dr. Pritha Mehra.
- Mr. G. V. Narasimha Kumar attended “Webinar on Inhalation toxicity and Risk assessment” conducted by ISPVT on 6th February 2021.
- 61st TOLIC (Town Official Language Implementation Committee) meeting on COVID-19 preventive measures on 10th February 2021. Speakers were Dr. Kolli Raju, R.O. (H), S-4, Officer In charge, HRID, Chennai, Dr. D. Karthikeyan, R.O (H), S-2, Dr. Goli. Siva Prasad, R.O (H).
- Awareness program on Pharmacovigilance of ASU & H Drugs on 10th February 2021. Speakers were Dr. S. R. Chinta, Deputy Advisor, Ministry of AYUSH, Govt. of India, Dr. Arun Kumar Gupta, M. D. Pharmacology, Head Scientific Affairs, Dabur India Limited Dr. Rama Kanta Sharma, Drug Controller, AYUSH, Assam, Guwahati.
- Bio makers of Cardiac Diseases on 22nd February 2021. Speaker was Dr. S. G. S. Chakravarthy
- Dr. J. Shashikanth Participated in a Two day Science Academies virtual Lecture cum workshop on “Trends in Modern Biology” held on 17th & 18th February, 2021, Organized by Telangana Social Welfare Residential Degree College for Women, Nizamabad, Telangana.
- An online webinar on Introduction and Demonstration on how Up To Date Clinical Decision Support Resource on 24th February 2021.
- Webinar on Awareness Program on NABH AYUSH Entry Level Standards in collaboration with Ministry of AYUSH & All India Institute of Ayurveda, Delhi on 24th February 2021.
- Webinar on Management of Cancer, The AYUSH Experience on 4th February 2021. Speakers were Dr. Manohar S Gundeti, R.O, Central Ayurveda Research Institute, Mumbai, Dr. Alok Pareek, President (LMHI - Liga Medicorum Homoeopathica Internationalis) International Homeopathic Medical League, Dr. M. A. Waheed, Ex. Director, Central Council for Research in Unani Medicine, Dr. Geetha Krishnan, AYUSH representative at WHO.
- Introduction and demonstration on How Up to Date-Clinical Decision Support Resource on 24th February 2021. Speakers were Dr. Vinod I, Lead Segment Director, South Asia, Wolters Kluwers Vinay Rattan, Key Account Manager, Wolters Kluwer.
- Miss. K. Divya Teja, JRF (Zoology) attended webinar on “Characterization and selection of antibodies Covid-19diagnostics” on 26.02.2021 organized by Sino Biological.
- Online webinar on 'Improve your Titration Process and Learn Tips & Tricks, organized by Merck Life Science Private Limited & Mettler Toledo, 18th February 2020.
- Registration of Clinical Trials & Publishing the outcomes in a suitable Journal for the faculty of

Homoeopathic Medical Colleges on 26th February 2021. Speakers were Dr. Ramesh Gaur, Dr. Sutapa Neogi, Dr. Atul Juneja, Dr. Harleen Kaur, Dr. Bindu Sharma.

- Dr. Chetna Deep Lamba presented the paper on “Online training on case report writing” for homoeopathic practitioners organised by Research in homoeopathy, Kerela on 6th March 2021.
- Dr. Harleen Kaur, RO, CCRH, HQ. and Dr. Divya Taneja, CCRH, HQ, participated in a two days New Media Initiative”, an online workshop /training session on 19th and 20th March 2021.
- Dr. A. K. Prusty, RO(H) and U. K. Prusty RO(H) Participated as resource persons for clinical skill development and refresher training program for AYUSH doctors organised by Orissa Medical College and Research, Sambalpur on 19th March 2021.
- Dr. Padmalaya Rath, RO(H), DDPRCRI(H), Noida, Dr. Shashi Giri, RO(H), DDPRCRI(H), Noida participated in 28th edition of SATTE from 24th-26th March 2021 at the India Expo Centre and Mart, Gr. Noida.

Table 48: Seminars/Webinars/Workshops/Conferences organised by Organisations/ Institutes other than CCRH and attended/participated by CCRH staff as Resource persons Delegates

Sl. No.	Event	Venue	Date	Participated as Resource person/ Delegate
1.	International webinar series on improving the quality of case reports organized by the Vithoulkas Compass Software Company	Online	May 2020	As resource person
2.	Webinar on “Combat COVID-19 current research for drug and vaccine development” organized by Faculty of Pharmacy, RKDF University, Bhopal.	Online	2 nd June 2020	As delegate
3.	“AYUSH Sanjivani mobile app: a critical tool for public health research in AYUSH disciplines” organized by Ministry of AYUSH, New Delhi.	Online	4 th June 2020	As delegate
4.	Webinar on “An Update on COVID-19 for AYUSH Doctors (HOMOEOPATHY)” conducted by Directorate of AYUSH, Government of NCT of Delhi.	Online	5 th June 2020	As delegate
5.	Webinar on “Overseas Learning: Prospects & Path for Pharmacy Graduates” organized by Guru Gobind Singh College of Pharmacy, Yamunanagar, Haryana.	Online	9 th June 2020	As delegate

Sl. No.	Event	Venue	Date	Participated as Resource person/ Delegate
6.	Webinar on “Drug Repurposing: Current Face of Drug Development” organized by Guru Gobind Singh College of Pharmacy, Yamunanagar, Haryana.	Online	10 th June 2020	As delegate
7.	Webinar on “Compassionate use of medicine: increased relevance in time of COVID-19”, Organized by CDSA.	Online	10 th June 2020	As delegate
8.	Webinar on management of Disorders of Ear, Nose & Throat	Online	13 th June 2020	As delegate
9.	"Under the shade of Plantanus Orientalis: An experience in the bed side” on the platform of “Academy of Quest”, Kolkata.	Online	14 th June 2020	As resource person
10.	Webinar on Basics of ICP-MS and analysis of heavy metal in herbal drug organized by PerkinElmer, Mumbai.	Online	15 th June 2020	As delegate
11.	Webinar on ‘Homoeopathy in cardiovascular diseases’ Speaker: Dr Maneesha Solanki, Hosted by The Homeopathic Academy	Online	20 th June 2020	As delegate
12.	A webinar on "contribution of Homoeopathic practitioners to research" organised by Indian Institute of Homoeopathic Physicians.	Online	21 st June 2020	As resource person
13.	Webinar on publication “Secret to being publication-ready revealed.” Organized by Cactus Communication.	Online	25 th June 2021	As delegate
14.	Webinar on “Biodiversity on Conservation” held organized by Government Arts College, Udhagamandalam.	Online	26 th June 2020	As delegate
15.	Webinar on Role of Homoeopathy in Depression & some tips about Cancer, Hosted by homeopathy 360	Online	27 th June 2020	As delegate

Sl. No.	Event	Venue	Date	Participated as Resource person/ Delegate
16.	Webinar on GHF: Homoeopathy drug dynamization in relation to quantum physics	Online	28 th June 2020.	As delegate
17.	Webinar on “Plant Diversity of Konkan” organized by Sharadchandra Pawar Mahavidyalaya, Lonand, M.H.	Online	29 th June 2020	As delegate
18.	Webinar on Homoeopathy: Need of the time organised by Arogya Bharti and Hahnemannian Academy to mark our Master's Memorial day.	Online	2 nd July 2020	As delegate
19.	Webinar on “CAMAG-Merck joint webinar session on TLC/ HPTLC – Tips & Troubleshooting + CAMAG Capabilities” organized by, Anchrom Enterprises (I) Private Limited, Mumbai, India for CAMAG, Switzerland	Online	04 th August 2020.	As delegate
20.	Webinar on “Accelerating Innovation in Medical Devices Through Simulation” organized by ANSYS on 06 th August 2020.	Online	06 th August 2020.	As delegate
21.	International Webinar on “Covid-19: Facts and it’s diagnosis by RT-PCR”, on organized by PG Department of Botany, The New College, Chennai.	Online	7 th August, 2020	As delegate
22.	Webinar on “AYUSH Regulation and Herbal Analytical Testing”, organized by Perkin Elmer	Online	14 th August, 2020	As delegate
23.	Webinar on launch of campaign on “AYUSH for immunity by Ministry of AYUSH	Online	14 th August 2020	As delegate
24.	Webinar on “Role of HPTLC in identifying the markers in phytopharmaceutical drugs”, Indian Pharmacopoeia Commission, Ghaziabad organized by Anchrom Enterprises (I) Private Limited, Mumbai, India	Online	18 th August, 2020	As delegate
25.	Webinar on “An Overview on Plant Taxonomy, organized by Department of Botany (P.G), Andra Loyola College (Autonomous), Vijayawada, Andhra Pradesh-520008.	Online	20 th August 2020	As delegate

Sl. No.	Event	Venue	Date	Participated as Resource person/ Delegate
26.	Webinar Programme on 'Research Article Writing and Online Academic Presentation' organized by Government Girls PG College, Ujjain.	Online	23 rd August 2020	As delegate
27.	National webinar on "Natural Products in Drug Discovery" organized by Shri Venkateshwara College of Pharmacy, Ariyur, Puducherry India	Online	27 th August 2020.	As delegate
28.	Virtual workshop on Applied Homoeopathy on through Google Meet app.	Online	5 th September 2021	As delegate
29.	Webinar on "Life style Diseases and its Homoeopathic Management"	Online	5 th September, 2020.	As delegate
30.	National Workshop on Biostatistics and Research Methodology	D.N.De. Homoeopathic Medical College & Hospital	22 nd September -26 th September 2020	As delegate
31.	Webinar on "COVID -19: Research and Clinical Update" organized by Rashtriya Homoeopathy Sangh	Online	4 th October 2020	As resource person
32.	WEBINAR: Homoeo Vigilance" on Pharmacovigilance Awareness Programme for ASU & H Drugs on, IPvC, NIH, Kolkata.	Online	5 th October 2020	As delegate
33.	Webinar on "Tips & Tricks to Better Histology Webinar Part 1 (Tissue Preparation to Processing) organized by Leica Biosystems	Online	8 th October 2020	As delegate
34.	PHFI capacity Building webinar: Confounding	Online	8 th October 2020	As delegate
35.	PHFI capacity Building webinar: Bias in Clinical Research	Online	12 th October 2020	As delegate
36.	PHFI capacity Building webinar: Association & Causation	Online	15 th October 2020	As delegate
37.	Webinar organized by Kshirsagar Homoeopathic Medical College Beed Maharashtra and Homoeopathic Education and Research Institute Mumbai.	Online	24 th October 2020	As resource person
38.	Webinar on "Thyroid Disorder" in the occasion of foundation day of Rajasthan Vidyapeeth Homoeopathic Medical College, Dabok Udaipur	Online	26 th October 2020.	As delegate
39.	PHFI capacity Building webinar: Critical Appraisal-II	Online	27 th October 2020	As delegate

Sl. No.	Event	Venue	Date	Participated as Resource person/ Delegate
40.	Webinar by COVID Task force for patient Management with Integrative case	Online	29 th October 2020 to 1 st November 2020	As delegate
41.	PHFI capacity Building webinar: Descriptive statistics	Online	17 th November 2020	As delegate
42.	PHFI capacity Building webinar: Linear Regression	Online	27 th November 2020	As delegate
43.	PHFI capacity Building webinar: Logistic Regression-II	Online	1 st December 2020	As delegate
44.	Webinar on “Efficient Mouse Colony Management” conducted by Jackson laboratories, USA	Online	1 st December, 2020	As delegate
45.	Webinar on HPTLC PRO SYSTEM - CAMAG's new approach to automated quality control” organized by CAMAG, Switzerland	Online	9 th December 2020	As delegate
46.	National Webinar on “Trends And Techniques In Biodiversity Assessment Organized by Department of Botany, Adikavi Nannaya University, Rajamahendravara, Andhra Pradesh.	Online	10 th December 2020	As delegate
47.	PHFI capacity Building webinar: Peer review process	Online	11 th December 2020	As delegate
48.	National Webinar on “IPR: Powerhouse for Innovation”, Organized by PG & Research Department of Botany in association with IQAC IIC & IPR Cell., Vivekanandha College of Arts and Sciences Forwomen (Autonomous), Elayampalayam, Tiruchengodu, Namakkal, Tamil Nadu.	Online	12 th December 2020	As delegate
49.	Webinar on Pre-clinical imaging biomarker in drug discovery” conducted by ISVPT	Online	12 th December, 2020	As delegate
50.	PHFI capacity Building webinar: Discussion on manuscript	Online	16 th December 2020	As delegate
51.	Webinar on “Measuring vascular stiffness in aging mice using high resolution vascular ultrasound” conducted by Fujifilm Visual Sonics	Online	16 th December, 2020	As delegate
52.	Webinar on “Research in Homeopathy for Health” conducted by Bahola Foundation	Online	19 th December, 2020	As delegate

Sl. No.	Event	Venue	Date	Participated as Resource person/ Delegate
53.	Webinar on “General Scientific methods for designing In-vivo preclinical experiments” by Chalapathi Institute of Pharmaceutical sciences, Guntur, Andhra Pradesh.	Online	22 nd December, 2020	As resource person
54.	Two days National webinar on Research on Disability Rehabilitation	Online	29 th and 30 th December 2020	As delegate
55.	Webinar on “ International Code of Nomenclature (ICN) for Plants” Organized by Botanical Survey of India, Deccan Regional Center, Hyderabad in association with Department of Botany, Andhra University, Visakhapatnam, India.	Online	6 th January 2021	As delegate
56.	One day National Webinar on “Latest Advances in Agriculture and Health” Organized by Department of Botany, Rayagada Autonomous College, Rayagada, Odisha.	Online	9 th January 2021	As delegate
57.	“7 th National Digital Conference on Scientific Updates on Emerging Viral Zoonotic Diseases including COVID-19 Prevention and Drivers triggering mutations” conducted by Millennium India Education Foundation	Online	27 th January 2021	As delegate
58.	“International Virtual Training Programme on Advanced Microscopic Techniques in Biomedical Research” conducted by Wiiled Body programme, Vijayawada	Online	28 th January to 30 th January, 2021	As delegate
59.	A Pilot Study on Sensitivity of Provers	Online	5 th February 2021	As resource person
60.	“Webinar on Inhalation toxicity and Risk assessment” conducted by ISPVT	Online	6 th February 2021	As delegate
61.	61 st TOLIC (Town Official Language Implementation Committee) meeting on COVID-19 preventive measures.	Online	10 th February 2021	As resource person
62.	Seminar on Popular writing in Homoeopathy	Bakson Homoeopathic Medical College and Hospital, Greater Noida	10 th February 2021	As delegate

Sl. No.	Event	Venue	Date	Participated as Resource person/ Delegate
63.	Bio makers of Cardiac Diseases	Online	22 nd February 2021	As resource person
64.	Two day Science Academies virtual Lecture cum workshop on “Trends in Modern Biology” Organized by Telangana Social Welfare Residential Degree College for Women, Nizamabad, Telangana.	Online	17 th & 18 th February, 2021	As delegate
65.	Registration of Clinical Trials & Publishing the outcomes in a suitable Journal for the faculty of Homoeopathic Medical Colleges.	Online	26 th February 2021	As resource person
66.	Dr. Chetna Deep Lamba presented the paper on “Online training on case report writing” for homoeopathic practitioners	Research in homoeopathy, Kerela	6 th March 2021	As resource person
67.	Ethics in Homoeopathic research and practice, Ethcon 2021 practice, Ethcon 2021	Online	19 th March 2021	As delegate
68.	Clinical skill development and refresher training program for AYUSH doctors organised by Orissa Medical College and Research, Sambalpur	Online	19 th March 2021	As resource person
69.	Two days New Media Initiative”, an online workshop /training session	Online	19 th and 20 th March 2021	As delegate
70.	28 th edition of SATTE at the India Expo Centre and Mart, Gr. Noida	Online	24 th -26 th March 2021	As delegate

Table 49: Training programs organised by Organisations/ Institutes other than CCRH and attended by CCRH

S.No.	Training Program	Venue/Organized by	Date
1.	An Update on COVID-19 for AYUSH Doctors	Department of Health & Family Welfare	5 June 2020
2.	Conceptualizing a Public Health research study	PHFI	22 nd July 2020
3.	Study Designs	PHFI- CCRUM	29 th July 2020
4.	Protocol designing and Designing of Data Collection tools.	PHFI- CCRUM	8 th August 2020
5.	Bio-statistical considerations in designing a research study.	PHFI- CCRUM	17 th August 2020
6.	Mental Health Issues & Trauma in Alderley during COVID-19	PHFI	18 th August 2020
7.	Theme 9 Shaping the Next 10 Years of Research and Interventions for SDG’s	Researcher Academy, Elsevier	20 th August 2020
8.	Data management & data quality	PHFI- CCRUM	22 nd August 2020
9.	Ethical issues in research	PHFI- CCRUM	28 th August 2020

S.No.	Training Program	Venue/Organized by	Date
10.	Art of Scientific Writing / Publication in High Impact factor Journal	PHFI- CCRUM	31 st August 2020
11.	“Patients’ Rights and Education	Faculty for virtual NABH AYUSH Assessors Course	8 th Sept 2020
12.	COVID-19: Research and Clinical Update & Post COVID Complication	Rashtriya Homeopathy Sangh (RHS)	4 th October 2020
13.	“Online training on Case report writing”	RIH, Kerala	6 th March 2021
14.	Training on Wikipedia	CCRYN for Ministry of AYUSH	19 th March 2021
15.	Training on Basics of COVID-19 (132 trainees undertook this training)	Ministry of Human Resource Development at Igot DIKSHA platform	From April 2020 to May 2020
16.	Training on Clinical management COVID-19 (121 trainees undertook training)	Ministry of Human Resource Development at Igot DIKSHA platform	From April 2020 to May 2020
17.	Training on Infection prevention and control (100 trainees undertook this training)	Ministry of Human Resource Development at Igot DIKSHA platform	From April 2020 to May 2020
18.	Training on Psychological care of patients with COVID-19 (140 trainees undertook this training)	Ministry of Human Resource Development at Igot DIKSHA platform	From April 2020 to May 2020
19.	Training on ICU care & ventilation management (80 trainees undertook this training)	Ministry of Human Resource Development at Igot DIKSHA platform	From April 2020 to May 2020
20.	Training on Personal protective equipment-english (76 trainees undertook this training)	Ministry of Human Resource Development at Igot DIKSHA platform	From April 2020 to May 2020
21.	Training on Quarantine and isolation (140 trainees undertook this training)	Ministry of Human Resource Development at Igot DIKSHA platform	From April 2020 to May 2020

Trainings programmes organised by CCRH

1. COVID-19 trainings for Master trainers

Master trainers were trained through online training by Ministry of AYUSH and Ministry of Health and Family Welfare, Government of India on COVID-19 on 4th April 2020.

As per directions of Ministry of AYUSH, during the month of April 2020, following master trainers from different units, imparted online training on “Response & containment measurement training of COVID warriors (AYUSH students)” to 4491 COVID warriors.

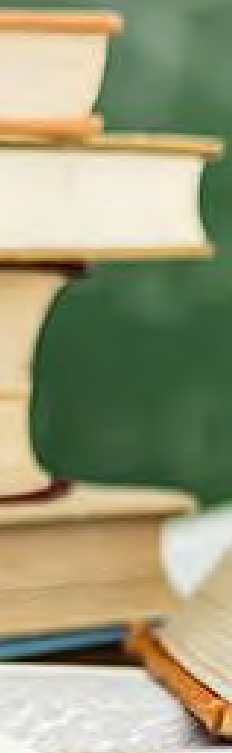
- Dr. Anil Khurana, DG, CCRH, Dr. Jaya Gupta, RO(H)/S-4CCRH, Dr. Debadatta Nayak, RO(H)/S-2, CCRH, headquarters, New Delhi
- Dr. Ch. Raveendar, Officer in-charge, RRI(H), Gudivada
- Dr. Sunil Prasad, Officer in-charge, CRU(H), Ranchi
- Dr. Sunil S. Ramteke, Officer in-charge, RRI (H), Shimla

- Dr. Kolli Raju, Officer in-charge, HRID, Chennai
 - Dr. Amulya Ratna Sahoo, RO/S-2 of extension centre of RRI(H), Puri at Bhubaneswar & Dr. Gurudev Choubey, RO(H), S-2, CRU(H), Siliguri
 - Dr. Ratan Chandra Shil, Officer in-charge, RRI(H), Agartala
 - Dr. Vibha Kumari, Officer in-charge, CVU(H), Patna
 - Dr. K.C. Muraleedharan, Officer in-charge, NHRIMH, Kottayam
 - Dr. Ravi Kumar Sardarla, Officer in-charge, CRU(H), Puducherry
 - Dr. R.V.R.Prasad, Officer in-charge, CRU(H), Tirupati
 - Dr. Nidhi Mahajan, RO(H), CRI(H), Jaipur
 - Dr. Amit Srivastava, RO(H)/S-1, Officer in-charge, RRI(H), Imphal
 - Dr. Baidurjya Bhattacharjee, Officer in-charge, CRU(H) Aizawl
 - Dr. Mahesh Sah, Officer in-charge, HDRI(H), Lucknow
 - Dr. Prabin Kumar Shaw, Officer in-charge, CRU(H), Dimapur
 - Dr. Ranjit Sonny, Officer in-charge, RRI(H), Guwahati
 - Dr. P.S. Chakraborty, Officer in-charge, DACRRI (H), Kolkata
 - Dr. Ramesh Bawaskar, Officer in-charge, RRI(H), Mumbai.
2. *ToT (Training of Trainers) program* to orient all Institute Incharges about various online platforms like Microsoft teams, google meet and cisco webex on 6th July 2020.
 3. *Online induction training* to Research Officers on NABH on 30th January 2021.

Table 50: CME program organized by CCRH

Sl. No.	CME program	Venue	Date
1.	Two days CME programme on- "Scope of Homoeopathy in management of post COVID-19 complication" organized by RRI(H), Shimla.	Online	17 th & 18 th March, 2021
2.	Two days CME on the theme "Importance of Human Psyche in Homoeopathic Research" Inaugurated by Dr. Anil Khurana, Director General, CCRH.	Online	22 nd & 23 rd March 2021

LINKING RESEARCH WITH EDUCATION



SHORT TERM STUDENTSHIP IN HOMOEOPATHY (STSH)

The Council had initiated the Short-Term Studentship in Homoeopathy (STSH) Program in 2014 in order to promote interest and aptitude for research among undergraduate students of homoeopathic college. The main objective of this program is to provide an opportunity to undergraduate homoeopathic students to familiarize themselves with research methodology and techniques by getting associated for a short duration with their seniors on ongoing research program or by undertaking independent projects. Under STSH scheme, students are awarded Rs 20,000/- each as stipend after evaluation of submitted final reports.

The program has been running in an online mode where a student after registration goes through a double blinded review of his proposal. Short listed candidates are evaluated for studentship after completion of their projects and assessment of final reports.

The details of guidelines, methodology and timeline of the scheme are available at the Council's website: www.ccrhindia.nic.in

During the reporting period 84 students submitted the final reports, which were evaluated, and studentship was awarded to 57 students.

Table 51

Year	No. of candidates registered	No. of candidates who submitted proposals	No. of candidates shortlisted	No. of candidates who submitted final reports	No. of candidates awarded under STSH Scheme
STSH 2019	726	446	142	84	57

Due to the pandemic of COVID-19 and halting of service support to the STSH portal in mid 2020, the cycle of STSH Studentship could not be completed for the reporting year.

QUALITY MD DISSERTATIONS IN HOMOEOPATHY

The Scholarship for Quality MD Dissertations in Homoeopathy was initiated in the year 2012. It is primarily aimed at promoting good research in Homoeopathy as well as improving the visibility and accessibility of the research work of young postgraduate doctors to a larger research audience. The selected candidates are awarded a scholarship of Rs. 25,000/- (twenty-five thousand only) each, after evaluation of submitted final reports.

In the year 2017, the scheme was revised, thereafter which applications are invited only once in a year between 1st to 31st December. Postgraduates in Homoeopathy who completed their MD (Hom.) course in first attempt from recognized Colleges/Universities and included in the Second Schedule of Homoeopathy Central Council Act, 1973 are invited to submit their dissertations and manuscripts within one year of declaration of result of their MD course. Applicants are then shortlisted by the Internal Review Committee of the CCRH and shortlisted candidates are invited for a short presentation of their work before the panel of experts for final selection of the awardee. The details of guidelines, methodology and timeline of scheme are available on the Council's website: www.ccrhindia.nic.in

In the reporting year 2020-21, 20 applications from different homoeopathic colleges were received. Further, these 20 candidates had given their presentations on 2nd, 8th, 15th and 23rd February, 2021 before the panel of experts. As per the decision of experts, following nine candidates were selected for the scholarship @ Rs.25,000/- each.

Table 52

Sl. No.	Name of the candidate	Name of the College	Title of Dissertation
1.	Dr. Dhanya. P	Bharati Vidyapeeth (Deemed to be) University Homoeopathic Medical College, Pune	<i>Colchicum autumnale</i> in animal models of acute gout
2.	Dr. Himani Choudhary	Dr. Madan Pratap Khunteta Homoeopathic Medical College, Hospital & Research Centre, Jaipur	Effectiveness of Homoeopathic Medicines for pain Management in cases of knee Osteoarthritis-A randomized single blind placebo-controlled study
3.	Dr. Kruti Saraswat	Dr. Madan Pratap Khunteta Homoeopathic Medical College, Hospital & Research Centre, Jaipur	A study to assess usefulness of homoeopathic medicines in management of cases of menorrhagia using PBAC scale.
4.	Dr. Shilpa Prasad	Father Muller Homoeopathic Medical College, Mangalore	Effectiveness of homoeopathic remedies selected based on Oscar E. Boericke's repertory in the treatment of Migraine using midas questionnaire.
5.	Dr. Meera Kumari	Jawahar Lal Nehru Homoeopathic Medical College, Waghodia, Vadodara	Utility of Knerr Repertory in paediatric cases

Sl. No.	Name of the candidate	Name of the College	Title of Dissertation
6.	Dr. Sheena Pal	Dr. Madan Pratap Khunteta Homoeopathic Medical College, Hospital & Research Centre, Jaipur	To assess the role of individualized medicines in the cases of allergic rhinitis
7.	Dr. Rajshree Jangid	Dr. Madan Pratap Khunteta Homoeopathic Medical College, Hospital & Research Centre, Jaipur	Effectiveness of Homoeopathic medicines in pain Management of cases of 'Heel pain with Calcaneal spur'
8.	Dr. Seema Kumari Meena	Dr. Madan Pratap Khunteta Homoeopathic Medical College, Hospital & Research Centre, Jaipur	An observational study to assess the utility of "Boenninghausen's characteristics & repertory" by C.M. Boger in management of the cases of Rheumatoid Arthritis
9.	Dr. Garima Mathur	M.N. Homoeopathic Medical College & R.I., Bikaner	Comparative study of individual Homoeopathic medicine and <i>Bacillinum</i> in cases of Tinea Cruris. A randomized parallel arm trial

Financial Statements Year 2020-2021

Central Council for Research in Homoeopathy
(Non-profit Organization)



(An Autonomous Body under Ministry of AYUSH, Govt. of India)
Jawahar Lal Nehru Bhartiya Chikitsa Avum
Homoeopathic Anushandhan Bhawan
61-65, Institutional Area, Opp. D Block,
Janak Puri, New Delhi - 110 058

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
BALANCE SHEET AS AT 31ST MARCH, 2021

(Figure in Rupees)

Liabilities	Page No	Schedule/ Annexure	Current year 2020-21	Previous year 2019-20
Capital Fund	231	1	2,482,767,362.00	2,019,154,865.00
Current Liabilities	232 & 233	7	4,194,613.00	2,130,974.00
G.P.F. Account	273	Annexure - I (Part - II)	197,921,485.00	204,079,629.00
Pension Fund Account	276	Annexure - II (Part - II)	116,045,976.00	84,752,235.00
New Pension Scheme Account	278	Annexure - III (Part - II)	550,305.04	67,549.04
TOTAL			2,801,479,741.04	2,310,185,252.04



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
BALANCE SHEET AS AT 31ST MARCH, 2021

(Figure in Rupees)

Assets	Page No.	Schedule/ Annexure	Current year 2020-21	Previous year 2019-20
Fixed Assets	234	8	808,082,217.00	807,706,776.00
Current Assets	235-237	11	1,678,879,758.00	1,213,579,063.00
G.P.F. Account	273	Annexure - I (Part - II)	197,921,485.00	204,079,629.00
Pension Fund Account	276	Annexure - II (Part - II)	116,045,976.00	84,752,235.00
New Pension Scheme Account	278	Annexure - III (Part - II)	550,305.04	67,549.04
TOTAL			2,801,479,741.04	2,310,185,252.04



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
SCHEDULE FORMING PART OF BALANCE SHEET AS AT 31ST MARCH, 2021

(Figure in Rupees)

SCHEDULE - 1 - CAPITAL FUND	Amount	Current year 2020-21	Previous year 2019-20
Opening Balance	1,219,283,879.00		
Add: Assets Created during the year	80,821,916.00		
	1,300,105,795.00	1,300,105,795.00	1,219,283,879.00
Excess of Income Over Expenditure			
Opening Balance	799,870,986.00		
Add: Excess of Income over Expenditure	(158,720,581.00)		
Add : Amount of AIH Narela (last year rectification)	224,070,000.00		
	1,182,661,567.00	1,182,661,567.00	799,870,986.00
TOTAL		2,482,767,362.00	2,019,154,865.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
SCHEDULE FORMING PART OF BALANCE SHEET AS AT 31ST MARCH, 2021

(Figure in Rupees)

SCHEDULE - 7 - CURRENT LIABILITIES		Amount	Current year 2020-21	Previous year 2019-20
FULL & FINAL SETTLEMENT OF GIS FUND	Opening Balance	-		
	Add: Received during the year	2,299,333.00		
		2,299,333.00		
	Less: Paid during the year	1,780,832.00	518,501.00	-
EARNEST MONEY	Opening Balance	970,270.00		
	Add: Received during the year	316,239.00		
		1,286,509.00		
	Less: Refunded during the year	35,000.00	1,251,509.00	970,270.00
Employees Contribution towards New Pension Scheme	Opening Balance	-		
	Add: Recovered during the year	12,951,303.00		
		12,951,303.00		
	Less: Transferred during the year	12,803,546.00	147,757.00	-
				-
Amount payable on account of GIS	Opening Balance	-		
	Add: Recovered during the year	367,850.00		
		367,850.00		
	Less: Transferred during the year	366,750.00	1,100.00	-
Amount payable to IWAI, Noida being cheque issued to the authority , not presented for payment (HRA and Licence Fee)Op. Bal		-		
	Add: Recovered during the year	-		
		-		
	Less : Opening Balance transferred to Misc. Rec. (General A/C.)	-		
	Less : Remitted during the year	-	-	-
Income Tax	Opening Balance (General Account)	943,775.00		
	Add: Received during the year	44,173,839.00		
		45,117,614.00		
	Less: Paid during the year (General Account)	42,236,173.00	1,937,666.00	
	(Pension Fund A/c (Dr. B.C. Lakhera)	943,775.00		928,272.00
			-	15,503.00
TOTAL			3,856,533.00	1,914,045.00



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

SCHEDULE FORMING PART OF BALANCE SHEET AS AT 31ST MARCH, 2021

(Figure in Rupees)

SCHEDULE - 7 - CURRENT LIABILITIES		Amount	Current year 2020-21	Previous year 2019-20
Publication Account				
Opening Balance (Transferrable previous year)	47,751.00			
Add :Minimum Balance to kept in the account				
	47,751.00			
Less : Minimum balance to kept in the account				
Balance transferrable previous year		47,751.00		
Addition during the year				
Total		47,751.00		
Less : Transfer during the year		43,650.00		
Transferrable to General Account		4,101.00	4,101.00	47,751.00
CGST/SGST Tax				
Opening Balance		169,178.00		
Add: Received during the year		1,122,584.00		
		1,291,762.00		
Less: Refunded during the year		965,690.00	326,072.00	169,178.00
PM Care Fund				
Opening Balance		910,691.00		
Add: Received during the year		910,691.00		
		902,784.00	7,907.00	
Less: Paid during the year				
Recovery of Deputationist				
Opening Balance		-		
Add: Recovered during the year		600.00		
		600.00		
Less: Transferred during the year		600.00	-	-
Thrift & Credit Society Recovery				
Opening Balance		-		
Add: Recovered during the year		1,907,438.00		
		1,907,438.00		
Less: Transferred during the year		1,907,438.00	-	-
	-	-	-	-
TOTAL			4,194,613.00	2,130,974.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
Name of Entity : Central Council for Research in Homoeopathy
SCHEDULE FORMING PART OF BALANCE SHEET AS AT 31ST MARCH, 2021

SCHEDULE - 8 FIXED ASSETS

(Figure in Rupees)

S. No.	Particulars	GROSS BLOCK				DEPRECIATION				NET BLOCK	
		Cost/Valuation as at beginning of the year	Addition during the year	Deduction during the year	Cost/Valuation at the year end	As at the beginning of the year	On addition during the year	On deduction during the year	Total up to the year end	As at the current year	As at the previous year end
1	Land	231,605,354.00	-	-	231,605,354.00	-				231,605,354.00	231,605,354.00
2	Donated Build.	2,171,041.00	-		2,171,041.00	1,477,530.00	69,351.00	-	1,546,881.00	624,160.00	693,511.00
3	Building	721,913,643.00	37,160,133.00	-	759,073,776.00	210,037,453.00	53,045,626.00	-	263,083,079.00	495,990,697.00	511,876,190.00
4	Office Equip.	47,557,588.00	1,442,099.00	21,365.00	48,978,322.00	32,930,139.00	2,348,936.00	7,277.00	35,271,798.00	13,706,524.00	14,627,449.00
5	Vehicle	3,800,109.00	2,943,800.00	-	6,743,909.00	2,980,534.00	343,721.00	-	3,324,255.00	3,419,654.00	819,575.00
6	Furniture & Fixture	-	-	-	-	-	-	-	-	-	-
		50,866,784.00	4,674,775.00	547,655.00	54,993,904.00	28,077,010.00	2,746,455.00	473,133.00	30,350,332.00	24,643,572.00	22,789,774.00
7	Computer & Peripheral	-	3,658,645.00	-	3,658,645.00	-	-	-	-	3,658,645.00	-
		65,842,573.00	6,123,282.00	253,111.00	71,712,744.00	57,051,546.00	5,713,376.00	114,213.00	62,650,709.00	9,062,035.00	8,791,027.00
8	Elect. Install.	2,558,325.00	26,510.00	-	2,584,835.00	1,574,080.00	100,720.00	-	1,674,800.00	910,035.00	984,245.00
9	Library Books	8,471,722.00	268,070.00	14,102.00	8,725,690.00	8,151,307.00	185,436.00	11,774.00	8,324,969.00	400,721.00	320,415.00
10	Tubewell	1,607,647.00	-	-	1,607,647.00	852,593.00	75,505.00	-	928,098.00	679,549.00	755,054.00
11	Lab. Equip	64,633,888.00	24,524,602.00	-	89,158,490.00	50,189,706.00	15,587,513.00	-	65,777,219.00	23,381,271.00	14,444,182.00
	TOTAL	1,201,028,674.00	80,821,916.00	836,233.00	1,281,014,357.00	393,321,898.00	80,216,639.00	606,397.00	472,932,140.00	808,082,217.00	807,706,776.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
Name of Entity : Central Council for Research in Homoeopathy
SCHEDULE FORMING PART OF BALANCE SHEET AS AT 31ST MARCH, 2021

(Figure in Rupees)

SCHEDULE - 11 - CURRENT ASSETS		Amount	Current year 2020-21	Previous year 2019-20
Bank Balance				
Council's		113,452,822.00		
Internet Banking Account (Income Tax)		87,205.00		
Internet Banking Account (Publication)		7,101.00		
User Charges Account		-		
		113,547,128.00	113,547,128.00	83,208,019.00
Loan & Advances to Employees				
Computer Advance	Op. Balance	142,111.00		
	Less: Adjusted	84,596.00		
		57,515.00		
	Add : Granted	250,000.00		
	Balance	307,515.00	307,515.00	142,111.00
Scooter Advance	Op. Balance	48,700.00		
	Less: Adjusted	40,200.00		
		8,500.00		
	Add : Granted	-		
	Balance	8,500.00	8,500.00	48,700.00
House Building Advance	Op. Balance	1,924,192.00		
	Add : Granted	1,618,400.00		
		3,542,592.00		
	Less : Adjusted	1,072,992.00		
	Balance	2,469,600.00	2,469,600.00	1,924,192.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
SCHEDULE FORMING PART OF BALANCE SHEET AS AT 31ST MARCH, 2021

(Figure in Rupees)

SCHEDULE - 11 - CURRENT ASSETS		Amount	Current year 2020-21	Previous year 2019-20
Other Advances to Units/Institutes				
Contingent Advance	Op. Balance	230,912,415.00		
	Less: Adjusted	50,962,191.00		
		179,950,224.00		
	Add : Granted	136,698,465.00		
	Balance	540,718,689.00	540,718,689.00	230,912,415.00
	Add : Amt for AIIH Narela (LY) 224070000			
TA Advance	Op. Balance	612,089.00		
	Less: Adjusted	-		
	Add : Granted	603,754.00		
	Balance	1,215,843.00	1,215,843.00	612,089.00
LTC Advance	Op. Balance	23,300.00		
	Less: Adjusted	23,300.00	-	
		-		
	Add : Granted	704,820.00	-	
	Balance	704,820.00	704,820.00	23,300.00
Medical advance	(2092295 (-) 2092295 = Nil)		-	-
Advance for Work in Progress				
	Opening Balance	868,852,874.00		
	Less: Adjusted	41,403,172.00		
		827,449,702.00		
	Add: Granted during the year	166,460,000.00	993,909,702.00	868,852,874.00
Sundry Debtors (Health Mela)	Op. Balance	14,655,057.00		
	Less Received	2,100,685.00		
	Balance	12,554,372.00		
	Addition during the year (Health Mela)	-	12,554,372.00	14,655,057.00
Total recoverable		12,554,372.00		



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

SCHEDULE - 11 - Continued				
Imprest Advance				
Opening Balance		466,543.00		
Add: Granted during the year		10,000.00		
		476,543.00		
Less: Adjusted during the year	-	40,000.00	436,543.00	466,543.00
Security Deposit -				
Opening Balance		3,603,578.00		
Add: Granted during the year		-		
		3,603,578.00		
Less: Received back		-	3,603,578.00	3,603,578.00
GPF Subscription (Excess paid from general account)				
		19,580.00		
			19,580.00	
Amount payable to IWAI, Noida being cheque issued to the authority, not presented for payment (HRA and Licence Fee) Op. Bal				
Add : Remitted during the year		725,876.00		
Less: Recovered during the year		714,142.00		
Less : Opening Balance transferred to Misc. Rec. (General A/C.)			11,734.00	
Amount recoverable from Staff on account of Individual L.I.C..				
Opening Balance		-		
Add: Recovered during the year		224,293.00		
		224,293.00		
Less: Paid during the year		224,293.00	-	-
Priced Publications				
Opening Balance		9,130,185.00		
Add: Addition during the year	(Pub. + IJRH 605359)	605,359.00		
Less: Loss	(Pub. 98394 + IJRH 135709)	234,103.00		
		9,501,441.00		
Less: Sale proceed during the year	(Pub. 63637+ IJRH 65650)	129,287.00		
		9,372,154.00	9,372,154.00	9,130,185.00
TOTAL			1,678,879,758.00	1,213,579,063.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
INCOME & EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31ST MARCH, 2021

(Figure in Rupees)

INCOME		Schedule	Current year 2020-21	Previous year 2019-20
Grants/Subsidies				
General	1,317,980,000.00			
Total	1,317,980,000.00	13		
Less Capitalised	80,821,916.00	8		
	1,237,158,084.00		1,237,158,084.00	1,136,254,330.00
			-	
GIA All India Inst. of Ayurveda for Pharmacovigilance			-	925,000.00
GIA for Publication			-	
Share for Capital Work received from CCRUM			-	
Interest Earned		17	15,978,016.00	13,764,398.00
Other Income		18	7,812,333.00	17,768,852.00
User Charges			-	
Excess of Expenditure over Income			-	354,180,653.00
Total			1,260,948,433.00	1,522,893,233.00



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
Name of Entity : Central Council for Research in Homoeopathy
INCOME & EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31ST MARCH, 2021

(Figure in Rupees)

EXPENDITURE	Schedule	Current year 2020-21	Previous year 2019-20
Establishment Expenditure			
General			
General Area	20		
		641,928,418.00	714,068,113.00
		641,928,418.00	
Other Administrative Expenditure			
General Area &	21		
Med. Edu. Trg. (NER)	21	377,586,887.00	
Spl. Comp. Plan	21	-	
Tribal Area Plan	21	968,868.00	
Total		378,555,755.00	
Swachta Action Plan	21 (A)	1,185,426.00	
		379,741,181.00	617,115,489.00
Refund to AYUSH		-	118,500,000.00
Refund of unspent GIA received from RAV		-	26,304.00
Amount transferred from User Charges Account to Pension Fund Account		-	3,300,000.00
Loss : Due to IJRH given as Complementary during the year		234,103.00	272,862.00
Loss: on auctioned items		107,511.00	-
Depreciation schedule 8		80,216,639.00	69,610,465.00
Excess of Income over Expenditure*		158,720,581.00	-
Total		1,260,948,433.00	1,522,893,233.00
Significant Accounts Policy	24		

* To the extent the expenditure on account of advances not routed through Income & Expenditure Account.



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)

Name of Entity : Central Council for Research in Homoeopathy

SCHEDULE FORMING PART OF INCOME & EXPENDITURE ACCOUNT AS AT 31ST MARCH, 2021

(Figure in Rupees)

SCHEDULE - 13 - GRANTS/SUBSIDIES		Current year 2020-21	Previous year 2019-20
Central Government			
Salary	640,000,000.00		
General Area	453,800,000.00		
General Area Plan (Capital Work)	170,000,000.00		
Spl. Comp. Plan for Sch. Caste	-		
Digital Development Infr	10,500,000.00		
Swachta Action Plan	1,200,000.00		
SCSP	20,000,000.00		
NER	20,000,000.00		
TOTAL	1,315,500,000.00		
		1,315,500,000.00	1,288,300,000.00
GIA for Pharmacovig	2,480,000.00	-	-
GIA received from All India Instt. Of Ayurveda for Pharmacovigilence		-	925,000.00
GIA (for Publication)		-	-
			-
		2,480,000.00	-
TOTAL		1,317,980,000.00	1,289,225,000.00

SCHEDULE -17 - INTEREST EARNED		Current year 2020-21	Previous year 2019-20
Saving Bank Account			
With State Bank of India		15,780,360.00	13,249,273.00
On Internet Banking Account (Publication)	4,440.00		
(Income Tax)	2,274.00		
(User Charges)	61,025.00	67,739.00	175,433.00
On Interest bearing loan to employees.		129,917.00	339,692.00
Interest on leave encashment received back		-	-
TOTAL		15,978,016.00	13,764,398.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
Name of Entity : Central Council for Research in Homoeopathy
SCHEDULE FORMING PART OF INCOME & EXPENDITURE ACCOUNT AS AT 31ST MARCH, 2021

(Figure in Rupees)

SCHEDULE -18 - OTHER INCOME	General		Current year 2020-21	Previous year 2019-20
Receipts against auctioned items	-			
Surplus on sale of Publication	-			
Journals Subs. Received back from various Councils	689,514.00			
Sale of Journals	-			
Sale of Plants	66,930.00			
Leave Salary & Pension Contribution Recovery	399,850.00			
WHD Fee (Through Pub. A/c.)	-			
WIMF Fee (Through Pub. A/c.)	90,959.00			
User Charges	3,696,779.00			
C.G.H.S. Recovery	915,000.00			
NPS (CC) Recovery	-			
Royalty	16,281.00			
Total (A)	5,875,313.00	5,875,313.00	5,875,313.00	16,264,381.00
Misc. Receipts	1,937,020.00			
Donation	-			
Application Fee	-			
Cost of I. Card/PRAN Card	-			
Unidentified amount/other receipts	-			
Sale of Tender Form	-			
Rent received from Vender CRI (H), NOIDA	-			
Sale (Old Raddi papers, Occup. Therapist Product & other items)	-			
Total (B)	1,937,020.00	1,937,020.00	1,937,020.00	1,504,471.00
TOTAL (A + B)			7,812,333.00	17,768,852.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
**SCHEDULE UNDER GENERAL AREA FORMING PART OF
 INCOME & EXPENDITURE ACCOUNT AS AT 31.03.2021**

(Figure in Rupees)

Schedule - 20		Current year 2020-21	2019-20
STATEMENT (A) - ESTABLISHMENT EXPENSES		GAP	GAP
Salaries		244,344,544.00	256,320,756.00
Allowances & Bonus		122,018,928.00	131,781,783.00
Other (Specify)			
Pay advance			
NPS (Council's Contribution)		14,427,731.00	16,405,068.00
Over Time Allowance			9,315.00
Medical Reimbursement		6,084,795.00	5,721,953.00
L.T.C. Expenses		2,285,111.00	1,581,170.00
Transferred to Retirement Benefit A/c.		250,000,000.00	294,500,000.00
LS/PC		410,474.00	1,061,392.00
CGHS Payment		2,180,975.00	6,686,676.00
Stipend		155,000.00	
Previous Year Expenses		20,860.00	
TOTAL		641,928,418.00	714,068,113.00



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi




Director General
 CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
Name of Entity : Central Council for Research in Homoeopathy

SCHEDULE UNDER GENERAL AREA FORMING PART OF INCOME & EXPENDITURE ACCOUNT AS AT 31.03.2021

Schedule - 21 Other Administrative Expenses etc.	Current year 2020-21			Previous year 2019-20	
	General Area	SCPSC	TAP (NPCDCS)		
Wages	165,540,074.00		968,868.00	155,512,741.00	
Transferred to Retirement Benefit A/c.					
Electricity & Power	7,967,385.00			11,049,689.00	
Water Charges	804,649.00			1,161,719.00	
Insurance	58,114.00			45,735.00	
Repair & Maintenance	4,557,121.00			12,881,844.00	
Rent, Rates & Taxes	4,413,086.00			4,900,351.00	
Lease Rent				355,600.00	
Vehicle Running & Maintenance	554,933.00			621,048.00	
Vehicle Hiring	735,460.00			1,544,958.00	
Postage, Telephone & Communication Charges	1,570,062.00			1,784,073.00	
Printing & Stationery	5,639,108.00			6,497,259.00	
Travelling & Conv. Expenses	2,714,631.00			13,566,046.00	
Expenditure DDI	-			-	
TA Exp. On foreign Tour				1,796,316.00	
Documentary Film					
Exp. on HM/Seminar/WS	-			5,067,184.00	
Subscription Expenses	553,478.00			1,110,752.00	
Expenses on Fees	665,759.00			787,834.00	
Audit Remuneration	88,080.00			94,120.00	
Consultant Exp.	18,525,270.00			21,338,436.00	
Exp. on Investigation	394,017.00			1,016,213.00	
Professional Charges	472,872.00			904,768.00	
Expenses on Advertisement and Publicity	2,352,159.00			2,299,480.00	
Expenses On Publication	-				
Exp. on Hindi Committee	687642.00			1,147,763.00	
Medicine	2,939,570.00			1,971,972.00	
Diet	446,537.00			3,140,108.00	
Sundries	4,599,920.00			5,577,248.00	
Provers	562,610.00			2,460,984.00	
Miscellaneous Expenses	1,301,832.00			3,588,871.00	
Exp. Wages (Sch. Health Programme)				165,000.00	
Exp. On WIMF (Annexure - F)				260,184.00	
Cont. Expenditure (International Yoga Conf.) (Annexure - F)				236,089.00	
Expenditure (WHD) (Annexure - F)				4,437,543.00	
Exp. on Medical Edu. Training (NER) (Annexure - G)	19,343,646.00			19,782,519.00	
Contingent Expenditure (HCP) (Annexure - H)	2,241,520.00			4,802,181.00	26,000.00
Contingent Expenditure (Health mela) (Annexure - H)	1,420,171.00				
Contingent Expenditure (DDI) (Annexure - H)	1,597,447.00				
Contingent Expenditure (SRP) (Annexure - H)	12,481,557.00			16,373,251.00	
Cont. Expenditure (NPCDCS) (Annexure - H)	40,292,399.00			38,257,294.00	6,924,244.00
Contingent Expenditure (HCAM) (Annexure - I)	1,021,974.00				13,610,389.00
Cont. Expenditure (CME)				123,696.00	
Exp. on Coll. Study (Annexure - J)	17,002,506.00			2,516,489.00	
Exp. On Homoeopathy for SCSP. (Annexure - I)	14,662,801.00				
Cont. Expenditure (Coordination Cell) (Annexure - J)	28,046,489.00			19,893,756.00	
Exp. on TNP (Schedule 21A)	36,412.00				
Exp. On Covid (Schedule 21A)	4,202,029.00				
Exp. on SHP (Schedule 21 A)	180,000.00				
Cont. Expenditure (Healthy Teething Prog.)				269,142.00	
Exp. On Building for AIIMS Narela				224,070,000.00	
Previous Year Expesne	6,913,567.00				
TOTAL	377,586,887.00		968,868.00	593,410,256.00	13,636,389.00
					9,211,635.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy

EXPENDITURE SCHEDULE FORMING PART OF INCOME & EXPENDITURE ACCOUNT AS AT 31ST MARCH, 2021

Annexure - F

(Figure in Rupees)

EXPENDITURE STATEMENT OF World Homoeopathic Day Conference - 2019		
	Current year 2020-21	Previous year 2019-20
Printing & Stationery		482,709.00
Award		1,200,000.00
Exp. On Travelling Allowance		706,864.00
Rent/Venue Charges		322,140.00
Advt. & Publicity		-
Exp. On Fabrication work		208,344.00
Vehicle Hiring		-
Professional Charges		208,830.00
Expenditure on Logistic		216,682.00
Misc. Exp.		1,091,974.00
TOTAL	-	4,437,543.00
(Figure in Rupees)		
EXPENDITURE STATEMENT OF World Integrated Medicine Forum (WIMF)		
	Current year 2020-21	Previous year 2019-20
Logistic		-
Misc.		-
Printing & Stationery		14,000.00
Venue Charges		226,560.00
Exp. On Travelling Allowance		19,624.00
Vehicle Hiring		-
TOTAL	-	260,184.00
(Figure in Rupees)		
EXPENDITURE STATEMENT OF International Yoga Conference		
	Current year 2020-21	Previous year 2019-20
Honorarium/Wages		-
Printing & Stationery		-
TA Expenditure		-
Misc. Expenditure		16,609.00
Water Charges		-
Stall/Space Charges		219,480.00
TOTAL	-	236,089.00



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)

Name of Entity : Central Council for Research in Homoeopathy

EXPENDITURE SCHEDULE FORMING PART OF INCOME & EXPENDITURE ACCOUNT AS AT 31ST MARCH, 2021

Annexure - G

(Figure in Rupees)

EXPENDITURE STATEMENT (North East Region)						
	MET - NER				Current year 2020-2021	Previous year 2019-2020
Expenditure						
Wages/Honorarium	13,543,451.00				13,543,451.00	13,419,932.00
Elect. & Power	348,206.00				348,206.00	376,320.00
Water Charges	3,020.00				3,020.00	6,660.00
Repair & Maint.	247,785.00				247,785.00	232,896.00
Rent , Rates & Taxes	1,844,766.00				1,844,766.00	1,067,896.00
Postage & Telephone Exp.	926,791.00				926,791.00	829,276.00
Vehicle Hiring Exp.	12,823.00				12,823.00	216,110.00
Printing & stationary	335,129.00				335,129.00	674,645.00
TA & Conveyance Expenditure	245,513.00				245,513.00	1,245,438.00
Exp. On Subscription	10,571.00				10,571.00	
Fee						2,000.00
Professional Charges						
Miscellaneous Expenditure	161,981.00				161,981.00	970,860.00
Exp. On Lab. Investigation	6,930.00				6,930.00	64,770.00
Medicine	157,936.00				157,936.00	269,911.00
Publication	2,000.00				2,000.00	279,885.00
Sundries	329,880.00				329,880.00	-
Consultant	182,280.00				182,280.00	120,000.00
Insurance				-		-
Previous Year Expense	984,584.00				984,584.00	
TOTAL	19,343,646.00	-	-	-	19,343,646.00	19,782,519.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
EXPENDITURE SCHEDULE FORMING PART OF INCOME & EXPENDITURE ACCOUNT AS AT 31ST MARCH, 2021

Annexure - H

(Figure in Rupees)

EXPENDITURE STATEMENT OF Various Schemes (General)				Current year 2020-21			
		DDI	Health Mela	SRP	NPCDCS	HCP	
TA & Conveyance Expenditure			410,939.00				
Wages			27,000.00	8,814,186.00	38,254,410.00	1,994,506.00	
Seminar			68,020.00				
Printing & Stationery				80,521.00	18,780.00	20,705.00	
Medicines				98,562.00	49,566.00	118,981.00	
Sundries				176,029.00	13,034.00		
Subscription		1,597,447.00					
Vehicle Hiring			7,326.00	566,763.00	31,680.00	23,578.00	
Misc. Exp.			392437	20,494.00		83,750.00	
Fee			12000				
Rent			120000				
Lab Investigation					698,670.00		
Previous Year Expense			382,449.00	2,725,002.00	1,226,259.00		
TOTAL		1,597,447.00	1,420,171.00	12,481,557.00	40,292,399.00	2,241,520.00	


 Accounts Officer
 CCRH, New Delhi


 Asstt. Director (Admn.)
 CCRH, New Delhi


 Director General
 CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)

Name of Entity : Central Council for Research in Homoeopathy

EXPENDITURE SCHEDULE FORMING PART OF INCOME & EXPENDITURE ACCOUNT AS AT 31.03.2021

Annexure - I

(Figure in Rupees)

EXPENDITURE STATEMENT OF Various Schemes (SCSP)		Current year 2020-21	
		HCAM-SCSP	HC- SCSP
	TA & Conveyance Exp.	7960	
	Wages	1003102	12,968,847.00
	Printing & Stationery	2662	3,300.00
	Previous Year Expense		1,561,821.00
	Medicines		2,604.00
	Sundries		18,080.00
	Vehicle Hiring		107,299.00
	Misc. Exp.	8250	850.00
	TOTAL	1,021,974.00	14,662,801.00

(Figure in Rupees)

EXPENDITURE STATEMENT OF Various Schemes (TAP)		Current year 2020-21	
		NPCDCS	HCP
	Wages	924,531.00	-
	TA Expenditure	-	-
	Elect. & Power	-	-
	Repair & Maintenance	-	-
	Rent	-	-
	Postage & Telephone	-	-
	Printing & Stationery	-	-
	Provers	-	-
	Medicines	-	-
	Sundries	-	-
	Vehicle Hiring	-	-
	Misc. Exp.	-	-
	Previous Year Expense	44,337.00	
	TOTAL	-	968,868.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
Name of Entity : Central Council for Research in Homoeopathy

EXPENDITURE SCHEDULE FORMING PART OF INCOME & EXPENDITURE ACCOUNT AS AT 31.03.2021

Annexure - J

(Figure in Rupees)

EXPENDITURE STATEMENT OF Collaborative Study			
		Current year 2020-21	Previous year 2019-2020
	Wages/Honorarium	2,179,940.00	1,310,340.00
	TA Expenditure	130,882.00	3,523.00
	Repair & Maintenance		98,530.00
	Printing & Stationery		
	Postage & Telephone	70,404.00	4,120.00
	Fee		246,998.00
	Professional Charges	1,112,920.00	98,400.00
	Exp. On Advt. & Publicity		
	Exp. On Lab. Investigation	3,467,400.00	24,000.00
	Medicine	2,256,077.00	114,975.00
	Sundries	61,502.00	444,856.00
	Consultant		148,000.00
	Misc. Exp.		22,747.00
	Previous Year Expense	7,723,381.00	
	TOTAL	17,002,506.00	2,516,489.00

(Figure in Rupees)

Expenditure statement of Coordination Cell		Current year 2020-21	Previous year 2019-20
	Printing & Stationery	36,893.00	4,071.00
	Wages	15,838,734.00	8,025,197.00
	Postage & Telephone	47,413.00	46,179.00
	Elect. & Power	9,749,750.00	10,088,700.00
	Water Charges	164,246.00	171,597.00
	Repair & Maintenance	656,828.00	533,623.00
	Consultancy	514,025.00	315,000.00
	Rent/Taxes	577,520.00	577,520.00
	Sundry	268,007.00	
	Misc. Exp.	193,073.00	131,869.00
	TOTAL	28,046,489.00	19,893,756.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
Name of Entity : Central Council for Research in Homoeopathy

EXPENDITURE SCHEDULE FORMING PART OF INCOME & EXPENDITURE ACCOUNT AS AT 31.03.2021

(Figure in Rupees)

Schedule - 21 (A) Swachta Action Plan		Current year 2020-21	Previous Year 2019-20
	Solid Waste Management	35,205.00	7,617.00
	Liquid Waste Management		3,625.00
	Water Supply	26,980.00	2,370.00
	Workshop/Seminar		30,685.00
	Clean Office Premises	246,971.00	336,916.00
	Toilet Renovation	49.00	53,121.00
	Office Ditzitisation	140,964.00	203,049.00
	Innovation Activity	158,633.00	5,818.00
	Green & Clean Belt	14,550.00	129,065.00
	Information & Education	15,950.00	84,943.00
	Creation of sanitation infrastructure	73,477.00	
	Previous Year Expense	472,647.00	
	TOTAL	1,185,426.00	857,209.00

EXPENDITURE STATEMENT OF Various Schemes (TNP)		Current year 2020-21	
		TNP	SHP
	Medicine	36,412.00	-
	Wages		
	Vehicle Hiring		
	Previous Year Expense		180,000.00
	TOTAL	36,412.00	180,000.00

(Figure in Rupees)

Expenditure On COVID-19			Current year 2020-2021
	Wages (Covid)		653,575.00
	Insurance (Covid)		236,000.00
	Sundry Exp. (Covid)		919,248.00
	Medicine Exp. (Covid)		1,582,455.00
	Vehicle Hiring (Covid)		505,785.00
	Repair & Main. (Covid)		4,763.00
	Printing & Stationery		192,039.00
	Miscellaneous (Covid)		51,125.00
	TA & Conveyance Exp. (Covid)		50,332.00
	Postage & Telephone (Covid)		6,707.00
	Total		4,202,029.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
STATEMENT OF ADVANCES TO GOVERNMENT SERVANTS

(Figure in Rupees)

Head	Opening Balance	Granted during the year 2020-21	Total	Adjusted during the year 2020-21	Balance outstanding as on 31.03.2021
Computer Advance	142,111.00	250,000.00	392,111.00	84,596.00	307,515.00
	-		-		-
Scooter Advance	48,700.00		48,700.00	40,200.00	8,500.00
	-		-		-
House Building Advance	1,924,192.00	1,618,400.00	3,542,592.00	1,072,992.00	2,469,600.00
			-		-
Medical Advance		2,092,295.00	2,092,295.00	2,092,295.00	-
TOTAL	2,115,003.00	3,960,695.00	6,075,698.00	3,290,083.00	2,785,615.00



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
Name of Entity : Central Council for Research in Homoeopathy
STATEMENT OF LAST YEAR ADVANCES ADJUSTMENT

(2020-21) (Figure in Rupees)

Head	General Area *	NPCDS Tribal	SRP	HCSP	NER	TOTAL	Adjusted through Bills	Recd. through Cash	Total Adjustment
LTC Expenses	20860				-	20,860.00	20,860.00	2,440.00	23,300.00
Allowance & Bonus									
Medical Expenses						-	-		-
(A)	20,860.00			-	-	20,860.00	20,860.00	2,440.00	23,300.00
Contingent Adjustment (B)						-	85,942,468.00	6,446,195.00	92,388,663.00
Contingent Expenditure					36,250.00	36,250.00			-
Wages Exp.	2320205				47000	2,367,205.00			
Water Charges	206075					206,075.00			
Expenditure on Fee	30000					30,000.00			
Consultant	117000					117,000.00			
Elect. & Power	-					-			
Advt. & Publicity	-					-			
Exp. On Seminar/WS						-			
TA & Conveyance Exp.	320525	5118		440	441756	767,839.00			
Repair & Maintenance	833284					833,284.00			
Rent, Rates & Taxes					75560	75,560.00			
Vehicle Hiring	17902	36819	2248248	1257421	84820	3,645,210.00			
Postage & Telephone					4277	4,277.00			
Printing & Stationery	13972		217869	48586	103161	383,588.00			
Miscellaneous Exp.	128956	2400	55142	10213	165845	362,556.00			
Professional charges	6490					6,490.00			
Provers						-			
Medicine	14907		145353	117037	13341	290,638.00			
Sundries	2904251		58390	128124	12574	3,103,339.00			
Exp. For AIIMS (Narela)						-			
Swachta Action Plan						-			
TOTAL (C)	6,913,567.00	44,337.00	2,725,002.00	1,561,821.00	984,584.00	12,229,311.00	85,942,468.00	6,446,195.00	92,388,663.00
Assets									
Land & Building	37160133					37,160,133.00			
Furniture	3912108					3,912,108.00			
Computer/Printer	25000					25,000.00			
Lab. Equipments	22019668					22,019,668.00			
Office Equipment	86949					86,949.00			
TOTAL (D)	63,203,858.00					63,203,858.00			
Total 23 (A)	652,647.00					652,647.00			
Total 23 (B)	9,835,792.00					9,835,792.00			-
Grand TOTAL (A)+(B)+(C)+(D)	80,626,724.00	44,337.00	2,725,002.00	1,561,821.00	984,584.00	85,942,468.00	85,942,468.00	6,446,195.00	92,388,663.00

Savit

Accounts Officer
CCRH, New Delhi

[Signature]

Asstt. Director (Admn.)
CCRH, New Delhi

[Signature]

Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
STATEMENT OF LAST YEAR ADVANCES ADJUSTMENT

(A)

Head	B/F	SHP	SAP	Hindi	TOTAL	(2020-21)	(Figure in Rupees)	
						Adjusted through Bills	Recd. through Cash	Total Adjustment
LTC Expenses	-							-
Total (A)	-							-
T.A. & Conveyance(GAP + HM)	-				-	-		-
Total (B)	-				-	-		-
								-
Solid Waste Management			47072		47,072.00			
Liquid Waste Management			4618					
Water Supply			34711		34,711.00			
Workshop / Seminar					-			
Clean Office Premises			254789		254,789.00			
Toilet Renovation			30769		30,769.00			
Office Dizitisation			45403		45,403.00			
Innovation Activity					-			
Green & Clean Belt			39981		39,981.00			
Information & Education Activity			15304		15,304.00			
Wages Exp.		180000			180,000.00			
	-				-			
	-				-			
TOTAL (C)	-	180,000.00	472,647.00		652,647.00	-	-	-
Assets								-
Sanitation Infracture					-			
Office Equipment								
	-							
TOTAL (D)	-	-	-		-	-	-	-
TOTAL (A) + (B)+(C) + (D)	-	180,000.00	472,647.00		652,647.00	-	-	-


 Accounts Officer
 CCRH, New Delhi


 Asstt. Director (Admn.)
 CCRH, New Delhi


 Director General
 CCRH, New Delhi

(STATEMENT OF LAST YEAR ADVANCES ADJUSTMENT)

(2020-21)

(B)

Head	General Area	Hindi	Coll.Study		Health Mela/WS	NPCDCS Gen			TOTAL
LTC Expenses									-
Medical Reimbursement									-
Total (A)	-	-	-	-	-	-	-	-	-
T.A. & Conveyance(GAP + HM)									-
Total (B)	-	-	-	-	-	-	-	-	-
Wages Exp.		80070	4020335		24000				4,124,405.00
Elect. & Power									-
Venue Charges (WHD)									-
Venue Charges (IYD)									-
Venue Charges (WIMF)									-
Exp. On Seminar/WS									-
TA & Conveyance Exp.		400946	48058		144590	10441			604,035.00
Repair & Maintenance						5048			5,048.00
Rent , Rates & Taxes									-
Vehicle Hiring			102956			2000			104,956.00
Postage & Telephone									-
Printing & Stationery		8138	52572		24974	70442			156,126.00
Miscellaneous Exp.		14549	1220341		188885	13198			1,436,973.00
Professional charges									-
Provers									-
Medicine						35217			35,217.00
Sundries			2010772			24928			2,035,700.00
Exp. On release for AIIMS(H)									-
Lab Inv.						1064985			1,064,985.00
Subcription			268347						268,347.00
									-
									-
TOTAL (C)	-	503,703.00	7,723,381.00	-	382,449.00	1,226,259.00	-	-	9,835,792.00
Assets									-
Land & Building									
Furniture									
Computer/Printer									
Lab. Equipments									
Office Equipment									
Books									
Elect. Installation									
TOTAL (D)	-	-	-	-	-	-	-	-	-
TOTAL (A) + (B) + (C) + (D)	-	503,703.00	7,723,381.00	-	382,449.00	1,226,259.00	-	-	9,835,792.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
SCHEDULE FORMING PART OF BALANCE SHEET AS AT 31ST MARCH, 2021

SCHEDULE - 24 SIGNIFICANT ACCOUNTING POLICIES

- 1 **Accounting Convention:** The financial statement are prepared on the basis of historical cost convention and on accrual basis.
- 2 **Inventory Valuation :** Stores (Including machinery and spares) are valued at cost.
- 3 **Fixed Assets :** Fixed assets are stated at cost of acquisition inclusive of taxes, incidental and direct expenses related to acquisition are capitalized at cost.
- 4 **Depreciation :** Fixed Assets are valued at cost less accumulated depreciation. Depreciation of fixed assets for the year has been provided on the Written down value of assets at the following rates

	<u>Item</u>	<u>Rates</u>
1	Office Equipment	15%
2	Electrical Installation	10%
3	Laboratory/Hospital Equipment	40%
4	Vehicle	15%
5	Furniture & Fixture	10%
6	Computer & Peripherals	40%
7	Books	40%
8	Building	10%
9	Tubewell and Waterpipe	10%

The above rates of depreciation has been adopted from the Income Tax Rules as provided under Income Tax Rules 1962 and approved by competent authority..



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

- 5 General Provident Fund :** The Council is maintaining a separate General Provident Fund Account for its employees as per G.P.F. Rule, 1960 at Annexure - I.
- The Receipt and Payment Account and the Balance Sheet for the General Provident Fund Account is attached with the Annual Account of the Council at Annexure - I..
- 6 Retirement Benefits :** Retirement benefits have been met out from the amount transferred from the Grants-in-Aid received from Department of AYUSH and Credited to the Pension Fund Account. A Separate account viz. Pension Fund Account is being maintained by the Council. Receipt and Payment Account and Balance Sheet of Pension Fund Account is attached with the Annual Accounts of the Council at Annexure - II.
- 7 New Pension Scheme :** The Council is maintaining a separate New Pension Scheme Account for its employees joined after 01.04.2004.
- The Receipt and Payment Account and the Balance Sheet for the New Pension Scheme Account is attached with the Annual Account of the Council at Annexure - III.
- 8 Investment :** Council has not made any investment other than the amount deposited in fixed / term deposit with the State Bank of India.
- 9 Corpus/Capital Fund :** This represents the accumulated balance of Excess of Income over expenditure mainly, the values of fixed assets acquired from grants-in-aid.
- 10 Contingent liability :** Council has no contingent liability on the Balance sheet date.
- 11 Change of Accounting policies and material effect:** During the year accounts has been prepared in uniform format of accounts, which is applicable to central autonomous bodies, on or after 1.04.2001. Since the new format does not provide place for G.P.F., Pension Fund Account and New Pension Scheme Account, the same has been separated from the financial statement and annexed to this financial statement (may be seen at Annexure - I, II and III)



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

- 12 The current assets includes cash and bank balances, advances to the employees and Advances to other Units/Institutes etc.
- 13 Previous year figures have been regrouped wherever necessary.
- 14 Figures have been rounded off to nearest rupees for 2020-2021.



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
STATEMENT OF SURPLUS STOCK OF PUBLICATION AND IJRH

Publication

Opening Balance	8,506,835.00	Sale during the year	63,637.00
Addition during the year		Loss due to Complementary	98,394.00
Surplus		Closing Stock	8,344,804.00
Total	8,506,835.00		8,506,835.00

IJRH

Opening Balance	623,350.00	Sale during the year	65,650.00
Addition during the year	605,359.00	Loss due to Complementary	135,709.00
Surplus	-	Closing Stock	1,027,350.00
Total	1,228,709.00		1,228,709.00



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
RECEIPTS AND PAYMENTS FOR THE YEAR ENDED 31ST MARCH, 2021

(Figure in Rupees)

RECEIPTS	Current Year 2020-21	Previous year 2019-20	PAYMENTS	Current Year 2020-21	Previous year 2019-20
Opening Balance			Expenses		
a) Bank Balance (Incl. Rec. & Rec.)	82384427.00		a) Establishment Expenses		
b) Publication	50751.00		GAP (State. - A)	642,612,378.00	
c) User charges	750407.00		Total	642,612,378.00	712,582,244.00
d) Internet Banking Account (I. Tax.)	22434.00	226,642,691.00			
		3,000.00			
	83,208,019.00		b) Administrative Expenses		
Grants received (From MHFW, New Delhi)			GAP (State. - B)	658,789,788.00	
a) GAP	453800000.00				
Salary	640000000.00		Sub-Total	658,789,788.00	658,789,788.00
GAP (Cap. Work)	170000000.00		SAP (Stae. C)	1,071,331.00	
SCPSC	20000000.00		SCSP (State- B)		
NER (Gen.)	20000000.00		TAP (State - B)	924,531.00	
SAP	1200000.00	1305000000.00	Grand Total	1,995,862.00	1995862.00
			Adv. Cap. Work (Recd. From CCRUM)		-
b) GIA (Digital Development Inf	10500000.00	-	Priced Publications		-
c) GIA for Pharmacovig	2480000.00	-	Publication		927,991.00
d) GIA All India Instt. Of Ayurveda		925,000.00	I J R H	605359	418,733.00
Previous year receipt		-		605359.00	
		-	Sundry Debtors		9,012,463.00
e) Mis.receipt	6083.00				



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

Interest Received				Expenditure on Fixed Assets		
a) On Bank Deposit Headquarter	15780360.00					
			13,249,273.00	GAP (State. - E)	16,503,435.00	
b) On Loan & Advances	129917.00		339,692.00	SCPSC (State. - E)	-	
c) Interest on Pub. A/c.	4440.00		68,215.00	TAP (State. E)	125,000.00	
d) On I B A/c. (I. Tax.)	2274.00		3,931.00			
e) Int. on User Charges A/c	61025.00	15978016.00	103,287.00	(NER) (St. E)	989,623.00	
					17,618,058.00	
Other Income					17,618,058.00	17618058.00
a) Misc. Receipts	1930937.00		1,504,471.00			41,495,026.00
b) Receipt against auctioned items	122325.00		-			
c) Sale of Publication (Gen. A/c)	63637.00		14,275.00			
d) Tfd from Publication Account			2,353,090.00			
				Other Payments		
e) Sale of Journals IJRH	65650.00			a) Loans & Advances to Staff		
f) Sale of Plants	66930.00		75,300.00	i Computer Advance	250000.00	-
g) Staff car use			2,845.00	ii House Building Advance	1618400.00	2,000,000.00
h) User Charges	3696779.00		10,839,145.00			
i) Royalty	16281.00	5962539.00	79,196.00	c) Payment made against recoveries		
Any other Receipts			-	i. Income Tax	42236173.00	44,926,677.00
a) Cash receipts against Adv.(Previous year)				ii. GPF	42046145.00	47,355,952.00
i. TA Advance			4,960.00	iii. GIS Premium	366750.00	414,526.00
ii TA Adv. (NER)			39,021.00	iv. Individual LIC Prem.	224293.00	262,950.00
iii LTC Advance		2440	14,620.00	v. Deputationist Rec.	600.00	201,200.00
iv Contingent Advance(Gen + HM)		1004389	3,591,810.00	vi T & Credit Soc.	1907438.00	1,572,066.00
v Contingent Advance (SRP)		337454	1,401,896.00	vii Remittance of HRA	702166.00	729,168.00
vi Contingent Advance (IYD)			5,000.00	viii Licence Fee	23710.00	22,740.00
vii Contingent Advance (HC- SCSP)		3291096	5,984,422.00	ix GST Tax	796512.00	750,218.00
viii Cont. Advance (NER -Capital Work)			4,987,101.00	x Tfd from Publication Account	43650.00	
ix GIA/Cont adv. NER General		626001	-	d) Payment made against receipt of G.I. Scheme fund	1780832.00	1,404,575.00
x GIA/Cont. adv. (MCCH Gen.)			120,000.00			
xi GIA/Adv. (Coll. Study)			3,911.00	e) Employee's Cont. tfd to NPS A/c.	12803546.00	12,037,413.00
xii Cont. Advance (Capital Work)		330931	-			
xiii Cont. Advance (NPCDCS-TAP)		135141	4,109,184.00			



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

iv Individual LIC premium of Staff	224293	262,950.00			
v. Deputationist's recoveries	600	201,200.00			
vi Rec. of H.B. Advance	1072992	383,952.00			
vii. T & C.S. Society	1907438	1,572,066.00			
viii. C.G.H.S. Recovery	915000	895,450.00			
x HRA recovery for remittance	690742	715,432.00			
xii. Licence Fee	23400	22,740.00			
xiii. Received against Sundry Debtors	2100685	3,986,471.00			
xv Recovery of Leave Salary	399850	1,246,803.00			
xvi GST Tax	1122584	919,396.00			
xvii NPS (CC Recovery)		27,367.00			
Performance Guranteen	117900				
Fee Received for WIMF	90959				
Tax deposit by Dr. B.C., Lakhera in the Income Tax Account		- 15,503.00			
TOTAL	1627971993.00	1685323540.00	TOTAL	1627971993.00	1685323540.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy

SCHEDULE UNDER GENERAL AREA FORMING PART OF RECEIPT & PAYMENT ACCOUNT AS AT 31.03.2021

(Figure in Rupees)

STATEMENT (A) - ESTABLISHMENT EXPENSES	Current year 2020-21			Previous year 2019-20		
			GAP			GAP
Salaries			244,344,544.00			256,320,756.00
Allowances & Bonus			122,018,928.00			131,781,783.00
NPS (Council's Contribution)			14,427,731.00			16,405,068.00
Over Time Allowance						9,315.00
Medical Reimbursement			6,084,795.00			4,262,624.00
L.T.C. Expenses			2,285,111.00			1,531,330.00
Transferred to Retirement Benefit A/c.			250,000,000.00			294,500,000.00
LS/PC		-	410,474.00		-	1,061,392.00
Stipend			155,000.00			
CGHS Payment		-	2,180,975.00		-	6,686,676.00
L.T.C. Advance		-	704,820.00		-	23,300.00
Total		-	642,612,378.00		-	712,582,244.00



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)

Name of Entity : Central Council for Research in Homoeopathy

**SCHEDULE UNDER GENERAL AREA , SPL. COMP. PLAN FOR SCH. CASTE AND TRIBAL AREA PLAN FORMING
PART OF RECEIPT & PAYMENT ACCOUNT AS AT 31ST MARCH, 2021**

(Figure in Rupees)

STATEMENT - (B) -- Other Administrative Expenses etc.	Current year 2020-21			Previous year 2019-20		
	General Area	TAP NPCDCS	GAP	SCPSC	TAP	
Wages	165,540,074.00	924,531.00	155,343,241.00			
Transferred to Retirement Benefit A/c.			-			
Electricity & Power	7,967,385.00		11,049,689.00			
Water Charges	804,649.00		1,161,719.00			
Insurance	58,114.00		45,735.00			
Repair & Maintenance	4,557,121.00		7,736,525.00			
Rent, Rates & Taxes	4,413,086.00		4,900,351.00			
Lease Rent			355,600.00			
Vehicle Running & Maintenance	554,933.00		621,048.00			
Vehicle Hiring	735,460.00		1,495,185.00			
Postage, Telephone & Communication Charges	1,570,062.00		1,745,120.00			
Printing & Stationery	5,639,108.00		6,404,727.00			
Travelling & Conv. Expenses	2,714,631.00		13,223,350.00			
TA Exp. On foreign Tour			1,796,316.00			
Expenditure DDJ(Annexure C)	1,597,447.00		-			
Exp. on HM/Seminar/WS(Ann. C)	1,037,722.00		5,067,184.00			
Subscription Expenses	553,478.00		1,110,752.00			
Expenses on Fees	665,759.00		787,834.00			
Audit Remuneration	88,080.00		94,120.00			
Consultant Exp.	18,525,270.00		21,338,436.00			
Exp. on Investigation	394,017.00		1,016,213.00			
Professional Charges	472,872.00		897,346.00			
Expenses on Advertisement and Publicity	2,352,159.00		2,299,480.00			
Exp. on Hindi Committee	183,939.00		1,147,763.00			
Medicine	2,939,570.00		1,971,972.00			
Diet	446,537.00		3,140,108.00			
Sundries	4,599,920.00		4,831,064.00			
Provers	562,610.00		2,460,984.00			
Miscellaneous Expenses	1,301,832.00		3,038,706.00			
Exp. (Wages on SHP)			165,000.00			
Exp. On WIMF (Annexure - A)			21,403.00			
Expenditure (WHD) (Annexure - A)			4,135,463.00			
Cont. Expenditure (International Yoga Conf.) (Annexure - A)			16,609.00			
Exp. on Medical Edu. Training (NER) (Annexure - B)	18,359,062.00		19,478,193.00			
Contingent Expenditure (HCP) (Annexure - C)	2,241,520.00		3,359,554.00			1,574,126.00
Contingent Expenditure (SRP) (Annexure - C)	9,756,555.00		11,705,326.00			
Cont. Expenditure (NPCDCS) (Annexure - C)	39,066,140.00		37,822,840.00			6,801,812.00
Contingent Expenditure (HCAM) (Annexure - D)	1,021,974.00		-	10,734,336.00		
Exp. on Coll. Study (Annexure - E)	9,279,125.00		2,516,489.00			
Exp. on HC-SCSP (Annexure - D)	13,100,980.00					
Exp. on Coordination Cell (Annexure - E)	28,046,489.00		19,893,756.00			
Exp. on TNP (Annexure-D)	36,412.00					
Exp. On Covid (Annexure-C)	4,202,029.00					
Cont. Exp. (Healthy Teething Programme)			269,142.00			
TOTAL	355,386,121.00	-	924,531.00	354,464,343.00	10,734,336.00	8,375,938.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

STATEMENT - (B) -- Other Administrative Expenses etc.	Current year 2020-21			Previous year 2019-20		
	General Area	SCPSC	TAP	GAP	SCPSC	TAP
B/F	355,386,121.00	-	924,531.00	354,464,343.00	10,734,336.00	8,375,938.00
T.A. Advance	114,554.00			240,000.00		
TA Advance (Health Mela)(Annex. E)				4,280.00		
TA Advance (HCP) (Annex. C)	304,200.00					
T.A. Advance (NER) (Annexure - B)	185,000.00					
Contingent Advance (HCAM)(Annexure - D)	4,641,690.00					
Contingent Advance(DDI)(Annexure-C)	5,053,567.00					
Grant--in-aid/Contingent Adv. (NER - General) (Ann. B)	904,300.00			8,003,362.00		
Grant--in-aid/Contingent Adv. (For Cap. Work) NER (Ann. B)						
Contingent Advance (Gen.)	32,913,355.00			8,219,839.00		
Contingent Advance (Health Mela) Annex. E	853,000.00			599,149.00		
Contingent Advance (Hindi WS)				743,450.00		
Cont Advancve (HCP) (Annexure - C & D)	17,881.00					47,180.00
Cont Advancve (NPCDCS) (Annexure - C)				2,463,775.00		
Cont. Advance (SRP) (Annexure - C)	191,548.00			2,716,182.00		
Cont. Advance HC-SCSP (Annexure - D)	400,011.00					
Contingent Advance (Health Camp.) (Annexure - D)					8,826,837.00	
Cont. Advance (Covid)(Annexure - C)	577,857.00					
Contingent Advance (Pharmacovigilence)	2,505,000.00			164,987,273.00		
Contingent Advance (Trigeminal Nuralgca Project)				900,000.00		
Contingent Advance (School Health Programme)				1,500,000.00		
GIA & Cont. Adv. for Collaborative Study (Annexure - E)	78,709,704.00			1,796,000.00		
GIA & Cont. Adv. for Coordination Cell (Annexure - E)	9,572,000.00			11,152,904.00		
Advance for Capital Work	166,460,000.00			16,161,768.00		
TOTAL	658,789,788.00	-	924,531.00	573,952,325.00	19,561,173.00	8,423,118.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)

Name of Entity : Central Council for Research in Homoeopathy

EXPENDITURE SCHEDULE FORMING PART OF RECEIPT & PAYMENT ACCOUNT AS AT 31ST MARCH, 2021

Annexure - A

(Figure in Rupees)

EXPENDITURE STATEMENT OF World Homoeopathic Day Conference - 2020 - 2021				Current year 2020-2021	Previous year 2019-2020
	Printing & Stationery				482,709.00
	Award				1,200,000.00
	Exp. On Travelling Allowance				706,864.00
	Rent				20,060.00
	Advt. & Publicity				
	Vehicle Hiring				
	Fabrication				208,344.00
	Professional Charges				208,830.00
	Logistic Expenditure				216,682.00
	Misc. Exp.				1,091,974.00
	TOTAL	-	-		4,135,463.00
	Contingent Advance				-
	TOTAL	-	-	-	4,135,463.00

(Figure in Rupees)

EXPENDITURE STATEMENT OF World Integrated Medicine Forum (WIMF)				Current year 2020-2021	Previous year 2019-2020
	Logistic				
	Misc.				
	Printing & Stationery				14,000.00
	Exp. On Travelling Allowance				7,403.00
	Vehicle Hiring				
	Total				21,403.00
	TA Advance				-
	Contingent Advance				-
	TOTAL			-	21,403.00

(Figure in Rupees)

EXPENDITURE STATEMENT OF International Yoga Conference				Current year 2020-2021	Previous year 2019-2020
	Wages				
	Printing & Stationery				
	Misc. Expenditure				16,609.00
	TA Expenditure				
	Misc. Expenditure				
	Water Charges				
	Total				16,609.00
	Cont. Advance				
	TOTAL			-	16,609.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



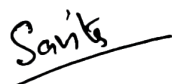
Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
**SCHEDULE UNDER MEDICAL EDUCATION TRAINING (NER) FORMING PART OF
 RECEIPT & PAYMENT ACCOUNT AS AT 31.03.2021**

Annexure - B

(Figure in Rupees)

EXPENDITURE STATEMENT (Medical Edu. Trg. - North East Region)		
	Current year 2020-2021	Previous year 2019-2020
Expenditure		
Wages/Honorarium	13,543,451.00	13,402,114.00
Elect. & Power	348,206.00	376,320.00
Water Charges	3,020.00	6,660.00
Repair & Maint.	247,785.00	232,896.00
Rent , Rates & Taxes	1,844,766.00	1,067,896.00
Postage & Telephone Exp.	926,791.00	829,276.00
Vehicle Hiring Exp.	12,823.00	187,639.00
Printing & stationary	335,129.00	628,263.00
TA & Conveyance Expenditure	245,513.00	1,203,973.00
Exp. On Subscription	10,571.00	1,200.00
Exp. On Fee		2,000.00
Professional Charges		4,720.00
Miscellaneous Expenditure	161,981.00	824,670.00
Exp. On Lab. Investigation	6,930.00	64,770.00
Medicine	157,936.00	245,911.00
Publication	2,000.00	
Sundries	329,880.00	279,885.00
Consultant	182,280.00	120,000.00
Insurance		-
TOTAL (A)	18,359,062.00	19,478,193.00
Advances		
TA Advance	185,000.00	-
Contingent advance	904,300.00	8,003,362.00
Contingent advance (Capital Work)		-
TOTAL (B)	1,089,300.00	8,003,362.00
TOTAL (A + B)	19,448,362.00	27,481,555.00



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)

Name of Entity : Central Council for Research in Homoeopathy

EXPENDITURE SCHEDULE FORMING PART OF RECEIPT & PAYMENT ACCOUNT AS AT 31ST MARCH, 2021

Annexure - C

(Figure in Rupees)

EXPENDITURE STATEMENT OF Various Schemes (General)			Current year 2020-21		
	DDI	Health Mela	SRP	NPCDCS	HCP
TA & Conveyance Expenditure		410,939.00			
Wages		27000	8,814,186.00	38,254,410.00	1,994,506.00
Seminar		68,020.00			
Printing & Stationery			80,521.00	18,780.00	20,705.00
Medicines			98,562.00	49,566.00	118,981.00
Sundries			176,029.00	13,034.00	
Subscription	1,597,447.00				
Vehicle Hiring		7,326.00	566,763.00	31,680.00	23,578.00
Misc. Exp.		392,437.00	20,494.00		83,750.00
Fee		12,000.00			
Rent		120,000.00			
Lab Investigation				698,670.00	
TOTAL	1,597,447.00	1,037,722.00	9,756,555.00	39,066,140.00	2,241,520.00
TA Advance					304,200.00
Contingent Advance	5,053,567.00	853,000.00	191,548.00		17,881.00
TOTAL	6,651,014.00	1,890,722.00	9,948,103.00	39,066,140.00	2,563,601.00

Form of Financial Statements (Non-Profit Organization)

Name of Entity : Central Council for Research in Homoeopathy

EXPENDITURE SCHEDULE FORMING PART OF RECEIPT & PAYMENT ACCOUNT AS AT 31ST MARCH, 2021

Annexure - C

(Figure in Rupees)

Expenditure On COVID-19		Current year 2020-2021
Wages (Covid)		653,575.00
Insurance (Covid)		236,000.00
Sundry Exp. (Covid)		919,248.00
Medicine Exp. (Covid)		1,582,455.00
Vehicle Hiring (Covid)		505,785.00
Repar & Main. (Covid)		4,763.00
Printing & Stationery		192,039.00
Miscellaneous (Covid)		51,125.00
TA & Conveyance Exp. (Covid)		50,332.00
Postage & Telephone (Covid)		6,707.00
Total		4,202,029.00
Contingent Advance (Covid)		577,857.00
TOTAL		4,779,886.00


Accounts Officer
CCRH, New Delhi

Asstt. Director (Admn.)
CCRH, New Delhi

Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy

EXPENDITURE SCHEDULE FORMING PART OF RECEIPT & PAYMENT ACCOUNT AS AT 31ST MARCH, 2021

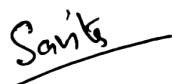
Annexure - D

(Figure in Rupees)

EXPENDITURE STATEMENT OF Various Schemes (SCSP)		Current year 2020-21		
	HCAM-SCSP	HC- SCSP		
TA & Conveyance Exp.	7960			
Wages	1003102	12,968,847.00		
Printing & Stationery	2662	3,300.00		
Lab Investigation				
Medicines		2,604.00		
Sundries		18,080.00		
Vehicle Hiring		107,299.00		
Misc. Exp.	8250	850.00		
	TOTAL	1,021,974.00	13,100,980.00	- -
Contingent Advance	4641690	400,011.00		
	TOTAL	5,663,664.00	13,500,991.00	- -

(Figure in Rupees)

EXPENDITURE STATEMENT OF Various Schemes (TNP)		Current year 2020-21		
		TNP		
Medicine		36,412.00		-
Wages				
Vehicle Hiring				
Misc. Exp.				
	TOTAL	36,412.00	-	-
Contingent Advance				
	TOTAL	36,412.00	-	-



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)

Name of Entity : Central Council for Research in Homoeopathy

EXPENDITURE SCHEDULE FORMING PART OF RECEIPT & PAYMENT ACCOUNT AS AT 31.03.2021

Annexure - E

(Figure in Rupees)

EXPENDITURE STATEMENT OF Collaborative Study		Current year 2020-21	Previous year 2019-20
	Wages/Honorarium	2,179,940.00	1,310,340.00
	Exp. On Travelling Allowance	130,882.00	3,523.00
	Repair & Maintenance		98,530.00
	Professional Charges	1,112,920.00	98,400.00
	Printing	70,404.00	-
	Exp. On Lab. Investigation	3,467,400.00	24,000.00
	Consultant		148,000.00
	Medicine	2,256,077.00	114,975.00
	Sundries	61,502.00	444,856.00
	Expenditure on Fee		246,998.00
	Postage & Telephone Charges		4,120.00
	Misc. Exp.		22,747.00
	TOTAL	9,279,125.00	2,516,489.00
	Contingent Advance	78,709,704.00	11,152,904.00
	TOTAL	87,988,829.00	13,669,393.00

(Figure in Rupees)

Expenditure statement of Coordination Cell		Current year 2020-21		Previous year 2019-20
	Printing & Stationery		36,893.00	4,071.00
	Wages		15,838,734.00	8,025,197.00
	Postage & Telephone		47,413.00	46,179.00
	Elect. & Power		9,749,750.00	10,088,700.00
	Water Charges		164,246.00	171,597.00
	Repair & Maintenance		656,828.00	533,623.00
	Consultancy		514,025.00	315,000.00
	Rent/Taxes		577,520.00	577,520.00
	Sundry		268,007.00	
	Misc. Exp.		193,073.00	131,869.00
	TOTAL	-	28,046,489.00	19,893,756.00
	Contingent Advance		9,572,000.00	16,161,768.00
	TOTAL	-	37,618,489.00	36,055,524.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity : Central Council for Research in Homoeopathy
EXPENDITURE SCHEDULE FORMING PART OF RECEIPT & PAYMENT ACCOUNT AS AT 31.03.2021

(Figure in Rupees)

STATEMENT - (C) EXPENDITURE STATEMENT OF Swachta Action Plan	Current year 2020-21		Previous year 2019-20
Solid waste management		35,205.00	7,617.00
Liquid Waste Management			3,625.00
Water Supply		26,980.00	370.00
Workshop/Seminar			30,685.00
Clean Office Premises		246,971.00	210,459.00
Toilet Renovation		49.00	39,991.00
Office Dizitisation		140,964.00	183,425.00
Innovation Activity		158,633.00	5,546.00
Green & Clean Belt		14,550.00	68,812.00
Creation of sanitation infrastructure		73,477.00	
Information & Education Activity		15,950.00	79,413.00
TOTAL		712,779.00	629,943.00
Contingent Advance		358,552.00	972,716.00
TOTAL		1,071,331.00	1,602,659.00



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)

Name of Entity : Central Council for Research in Homoeopathy

SCHEDULE UNDER G.A., S.C.P FOR SC., T.A.P., NER FORMING PART OF RECEIPT & PAYMENT AS AT 31.03.2021

(Figure in Rupees)

STATEMENT (E) - ASSETS CREATED DURING THE YEAR 2020-21									
Head	General Area	HCAM	HC-SCSP	Coord Cell	Coll.Study	DDI	Total	TNP	MET (NER)
Land & Building							-		
Laboratory Equipment ()	2,325,948.00		7,029.00				2,332,977.00		171,957.00
Vehicle	2,943,800.00						2,943,800.00		
Furniture & Fixture							-		
Cabinet/Racks	91,741.00						91,741.00		
Table/Chair	487,974.00						487,974.00		77,854.00
Wooden Partition/Sign Board/Transl	526,567.00						526,567.00		
Computer & Peripherals							-		
UPS/Voltage Stabilizer	185,608.00	30,783.00	2,919.00				219,310.00		19,225.00
Computer/Server	2,056,824.00	446,268.00	302,301.00				2,805,393.00		190,200.00
Printer	193,953.00						193,953.00		70,000.00
Software/Networking	4,005,033.00				149,999.00	1,755,600.00	5,910,632.00	125,000.00	87,650.00
Books	267,780.00						267,780.00		290.00
Office Equipments							-		
Telephone Instruments/EPABX				23,370.00			23,370.00		
Photocopier Machine/Scanner	449,832.00						449,832.00		102,300.00
Camera/CCTV/Scanner/Projector	15,608.00						15,608.00		24,165.00
Referigerator/Water Cooler	18,457.00						18,457.00		19,998.00
Inverter	20,400.00						20,400.00		
Air Conditioner/Room Heater	167,420.00						167,420.00		204,192.00
Token Printer							-		
Voltage Stabilizer	1,711.00						1,711.00		21,792.00
lintraction Board							-		
Drill Machine							-		
Epmlifier							-		
Attendance Dev./Finger Print Reader							-		
Drill Machine & other Equipments							-		
Sanitation Infrastructure							-		
Elect. Installation	26,510.00						26,510.00		
TOTAL	13,785,166.00	477,051.00	312,249.00	23,370.00	149,999.00	1,755,600.00	16,503,435.00	125,000.00	989,623.00



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)

Name of Entity : Central Council for Research in Homoeopathy

RECEIPT & PAYMENT ACCOUNT FOR THE YEAR ENDED 31ST MARCH, 2021 IN RESPECT OF GENERAL PROVIDENT FUND ACCOUNT

Annexure - I (Part-I)

(Figure in Rupees)

RECEIPTS	Current year 2020-21	Previous year 2019-20	PAYMENTS	Current year 2020-21	Previous year 2019-20
Opening Balance			Payment on account of GPF		
Bank Balance	1,567,897.15	5,013,276.15	i) Advance & withdrawals made during the year	60,628,825.00	76,336,145.00
Amount transferred from General Account on account of GPF Subs. of the staff	42,026,565.00	47,355,952.00 64.00	Investment made during the year	103,103,270.00	-
Amount of G.P.F.Received in r/o Mrs. Meenakshi Bhatia	310,000.00	70,000.00	Closing Balance		
Excess amount tfd. to GPF A/c from Gen. A/c (adjustable in the next year)	19,580.00		Bank Balance	2,701,583.15	1,567,897.15
Amount of STDRs matured and encashed during the year	109,726,773.00	22,700,655.00			
Income on Investment and Deposits					
Int. on STDR	12,663,102.00	2,544,138.00			
Int. on SB A/ c.	119,751.00	219,603.00			
Excess credit given by Bank		354.00			
Amt.. Deposited by Ms. Nishita on a/c of RTI fee (Transferable to Gen.a/c	10.00				
GRAND TOTAL	166,433,678.15	77,904,042.15	GRAND TOTAL	166,433,678.15	77,904,042.15



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)

Name of Entity: Central Council for Research in Homoeopathy.

BALANCE SHEET AS AT 31ST MARCH, 2021 IN RESPECT OF GENERAL PROVIDENT FUND ACCOUNT**Annexure - I (Part-II)**

(Figure In Rupees)

LIABILITIES	Current year 2020-21	Previous year 2019-20	ASSETS	Current year 2020-21	Previous year 2019-20
GPF Capital Fund			Investment account		
a) Opening Balance	184,846,624.00	198,743,964.00	a) Opening Balance	174,965,146.00	197,665,801.00
b) Add: Subs. Of the staff	42,356,145.00	47,426,016.00	b) Add: amount of STDRs purchased during the year	103,103,270.00	-
c) Add: Interest allowed on GPF A/C of the subs.	12,565,317.00	15,012,789.00		278,068,416.00	197,665,801.00
	239,768,086.00	261,182,769.00	c) Less: Amount of STDR matured during the year	(109,726,773.00)	22,700,655.00
d) Less: Withdrawal				168,341,643.00	174,965,146.00
i) Withdrawal	(60,628,825.00)	76,336,145.00			
(A)	179,139,261.00	184,846,624.00	(A)	168,341,643.00	174,965,146.00
Reserve & Surplus			Amount of interest accrued on STDRs but not received		
a) Opening Balance	19,233,005.00	21,116,083.00	a) Opening Balance	27,546,586.00	17,180,970.00
b) Interest recd on SB A/C.	119,751.00	219,603.00	b) Add: during the year	11,994,775.00	12,909,754.00
c) Int. accrued on STDR	11,994,775.00	12,909,754.00		39,541,361.00	30,090,724.00
d) Excess credit given by bank		354.00	Less: Received during the year	(12,663,102.00)	2,544,138.00
	31,347,531.00	34,245,794.00	(B)	26,878,259.00	27,546,586.00
Less: Interest allowed on G.P.F. A/C	(12,565,317.00)	15,012,789.00			
(B)	18,782,214.00	19,233,005.00			
Excess amount tfd. to GPF A/c from Gen. A/c (adjustable in the next year) (C)					
Amt. deposited by Ms. Nishita on a/c of RTI fee (Transferable to General Account) (D)	10.00		Closing Balance		
			Bank Balance (C)	2,701,583.00	1,567,897.00
TOTAL ((A) + (B) + (C) + (D))	197,921,485.00	204,079,629.00	TOTAL ((A)+(B)+(C))	197,921,485.00	204,079,629.00


Accounts Officer
CCRH, New Delhi

Asstt. Director (Admn.)
CCRH, New Delhi

Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity: Central Council for Research in Homoeopathy
LIST OF STDRS AS ON 31/3/2021

S.N.	STDR A/C No.	AMOUNT	ISSUE DATE	MATURITY DATE	INT.@	MATURITY VALUE
1	33748200041	3,162,108.00	25/01/2020	25/12/2022	6.85%	
2	30923408361	13,865,000.00	10/04/2017	10/04/2022	6.25%	
3	30862625236	12,131,875.00	10/04/2017	10/04/2022	6.25%	
4	31088127640	13,865,000.00	10/04/2017	10/04/2022	6.25%	
5	30651558303	13,865,000.00	10/04/2017	10/04/2022	6.25%	
6	30719876900	13,865,000.00	10/04/2017	10/04/2022	6.25%	
7	30052168630	8,665,622.00	10/04/2017	10/04/2022	6.25%	
8	32600538450	7,613,974.00	10/12/2017	10/12/2022	6.25%	
9	37652320855	10,163,508.00	16/03/2020	16/02/2022	6.4%	
10	37652321087	10,163,508.00	16/03/2020	16/02/2022	6.4%	
11	37652321316	10,163,508.00	16/03/2020	16/02/2022	6.4%	
12	37652337257	10,163,508.00	16/03/2020	16/02/2022	6.4%	
13	37652337531	10,163,508.00	16/03/2020	16/02/2022	6.4%	
14	37652337814	10,163,508.00	16/03/2020	16/02/2022	6.4%	
15	37652338353	10,163,508.00	16/03/2020	16/02/2022	6.4%	
16	37652316952	10,163,508.00	16/03/2020	16/02/2022	6.4%	
		168,341,643.00				



Accounts Officer
 CCRH, New Delhi



Asstt. Director (Admn.)
 CCRH, New Delhi



Director General
 CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)

Name of Entity : Central Council for Research in Homoeopathy

RECEIPT & PAYMENT ACCOUNT FOR THE YEAR ENDED 31ST MARCH, 2021 IN RESPECT OF PENSION FUND ACCOUNT

Annexure - II (Part - I)

(Figure in Rupees)

RECEIPT	Current year 2020-21	Previous year 2019-20	PAYMENT	Current year 2020-21	Previous year 2019-20
Opening Balance Saving Bank Account No. 19806 Last year cheque credited	84,752,235.00	3,731,079.00 5,000,000.00	Pension Payment made during the year Arrear of Pension + DA Arrear	155,838,273.00	121,509,783.00 2,250,276.00
Excess payment of salary recovered from R/G in respect of : Mrs. P.P. Celina 96188.00 Sh. VNP Singh 4557.00	965,745.00	- -	Payment made during the year on account of Retirement Gratuity and Comm. Value of Pension	28,161,772.00 36,643,982.00	52,680,508.00 45,798,680.00
Interest on Saving Bank Account	1,958,568.00	439,603.00	Last year I. Tax paid to the Govt. A/c Income Tax paid to the Govt. A/c.	20,800.00 10,463,564.00	6,520,856.00
Amount transferred from General Account to Pension Fund Account User Charges Account	250,000,000.00	294,500,000.00 3,300,000.00	Recovered amount transferred to the Gen. A/c in r/o P.P. Celina & Sh. VNP Singh	965,745.00	-
Amount recovered on account of Income Tax from pensioners	10,385,564.00	6,541,656.00	Recovered amount transferred to GPF Account (Sh. K.K. G. Nair)		64.00 -
Excess payment of GPF recovered from Sh. KKG Nair	-	64.00	Closing Balance Saving Bank Account No. 19806	115,967,976.00	84,752,235.00
Int. on STDR received during the year		-			
GRAND TOTAL	348,062,112.00	313,512,402.00	GRAND TOTAL	348,062,112.00	313,512,402.00


Accounts Officer
CCRH, New Delhi

Asstt. Director (Admn.)
CCRH, New Delhi

Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
Name of Entity : Central Council for Research in Homoeopathy.
BALANCE SHEET AS AT 31ST MARCH, 2021 IN RESPECT OF PENSION FUND ACCOUNT

Annexure - II (Part II)
(Figure in Rupees)

LIABILITIES	Current year 2020-21	Previous year 2019-20	ASSETS	Current year 2020-21	Previous year 2019-20
Pension Fund Account			Amt transfer to PFA/c from income tax	78,000.00	
Opening Balance	84,731,435.00	3,731,079.00	Closing Balance	115,967,976.00	84,752,235.00
Last year Cheque credited	-	5,000,000.00			
Add: Amount of Interest received on S.B. A/c.	1,958,568.00	439,603.00			
Amount transferred from General Account	250,000,000.00	294,500,000.00			
Amt. transferred from User Charges	-	3,300,000.00			
		-			
TOTAL	336,690,003.00	306,970,682.00			
Less: Payment made on account of DCRG/Gratuity/Comm. Value of Pension					
RG	28,161,772.00				
CVP	36,643,982.00				
Less: Pension Payments & arrear					
	155,838,273.00				
	-				
Total	220,644,027.00	(220,644,027.00)			(220,644,027.00)
TOTAL	116,045,976.00	84,731,435.00			
Income Tax Payable in r/o Dr. H. Baig	20800.00	-			
Less paid during the yr.	-	20,800.00			
GRAND TOTAL	116,045,976.00	84,752,235.00	GRAND TOTAL	116,045,976.00	84,752,235.00


Accounts Officer
CCRH, New Delhi


Asstt. Director (Admn.)
CCRH, New Delhi


Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)

Name of Entity: Central Council for Research in Homoeopathy.

RECEIPT & PAYMENT ACCOUNT FOR THE YEAR ENDED 31st March 2021 FOR NEW PENSION SCHEME

Annexure - III (Part I)

(Figure in Rupees)

RECEIPTS	Current year 2020-21	Previous year 2019-20	PAYMENTS	Current year 2020-21	Previous year 2019-20
Opening Balance	67,549.04	346,788.04	Amount of NPS paid to CR Agency, PFRDA	26,757,640.00	28,735,154.00
Employee's Contribution transferred from General Account	12,803,546.00	12,037,413.00	Closing balance	550,305.04	67,549.04
Employer's contribution transferred from General Account	14,427,731.00	16,405,068.00			
NPS with Employers Cont. received from Allahabad Bank		-			
Interest on STDR		-			
Interest on S.Bank account	9,119.00	13,434.00			
TOTAL	27,307,945.04	28,802,703.04	TOTAL	27,307,945.04	28,802,703.04


Accounts Officer
CCRH, New Delhi

Asstt. Director (Admn.)
CCRH, New Delhi

Director General
CCRH, New Delhi

Form of Financial Statements (Non-Profit Organization)
 Name of Entity: Central Council for Research in Homoeopathy.
BALANCE SHEET AS AT 31ST MARCH, 2021 FOR NEW PENSION SCHEME

Annexure - III (Part-II)

(Figure in Rupees)

LIABILITIES	Current year 2020-21	Previous year 2019-20	ASSETS	Current year 2020-21	Previous year 2019-20
Capital Fund New Pension Scheme	67,549.04	346,788.04	Closing Balance	550,305.04	67,549.40
Amount transferred from Gen. A/c Employees contribution	12,803,546.00	12,037,413.00			
Employer's contribution	14,427,731.00	16,405,068.00			
NPS with Employer's Contribution received from Allahabad Bank in respect of Sh. Himanshu Arora, Ex-LDC		-			
Interest on Employees contribution tfd. From General Account		-			
Interest on S.B. Account	9,119.00	13,434.00			
TOTAL	27,307,945.04	28,802,703.04			
Less: Paid to CRA, PFRDA	(26,757,640.00)	28,735,154.00			
Less :Interest transferred to General Account		-			
TOTAL	550,305.04	67,549.04	TOTAL	550,305.04	67,549.40



Accounts Officer
CCRH, New Delhi



Asstt. Director (Admn.)
CCRH, New Delhi



Director General
CCRH, New Delhi

Separate Audit Report of the Comptroller & Auditor General of India on the accounts of Central Council for Research in Homoeopathy for the year ended March 2021

1. We have audited the attached Balance Sheet of Central Council for Research in Homoeopathy (Council) as at 31 March 2021, the Income & Expenditure Account and Receipts & Payments Account for the year ended on that date under Section 20(1) of the Comptroller & Auditor General's (Duties, Powers & Conditions of Services) Act, 1971. The audit has been entrusted for the period up to 2022-23. These financial statements are the responsibility of the Council's management. Our responsibility is to express an opinion on these financial statements based on our audit.
2. This Separate Audit Report contains the comments of the Comptroller & Auditor General of India (CAG) on the accounting treatment only with regard to classification, conformity with the best accounting practices, accounting standards and disclosure norms etc. Audit observations on financial transactions with regard to compliance with the Law, Rules & Regulations (Propriety and Regularity) and efficiency- cum- performance aspects, etc., if any, are reported through Inspection Report / CAG's Audit Reports separately.
3. We have conducted our audit in accordance with auditing standards generally accepted in India. These standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatements. An audit includes examining on a test basis, evidences supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall presentation of financial statements. We believe that our audit provides a reasonable basis for our opinion.
4. Based on our audit, we report that:
 - i) We have obtained all the information and explanations, which to the best of our knowledge and belief were necessary for the purpose of our audit;
 - ii) The Balance Sheet, Income and Expenditure Account/ Receipt& Payments Account dealt with by this report have been drawn up in the format prescribed by the Government of India, Ministry of Finance.
 - iii) In our opinion, proper books of accounts and other relevant records have been maintained by the Council, in so far as it appears from our examination of such books.
 - iv) We further report that:

A Balance Sheet

A.1. Liabilities

A.1.1 Capital Fund (Schedule-1)- ₹ 248.28 crore

A.1.1.1. With reference to comment no. B.1.1 of previous year Separate Audit Report, the Council in the accounts for the year 2020-21, made rectifications and had passed an entry of ₹ 22.41 crore through Schedule-1 (Capital Fund) which was actually to be routed through Schedule-3 (Earmarked/Endowment Funds), resulting in understatement of Liabilities (Earmarked Fund) by ₹ 25 crore and overstatements of Current Assets by ₹ 2.59 crore and overstatement of Capital Fund by ₹ 22.41.

A.1.2 Current Liabilities (Schedule-7)- ₹ 41.95 lakh

A.1.2.1 Balance Sheet shows current liabilities amounting to ₹ 41.95 lakh. However, there was an unutilized grant of ₹ 4.11 crore as on 31 March 2021, for which the Council has not depicted liability in the annual accounts ended March 2021. This has resulted in understatement of Current Liabilities and overstatement of Capital Fund by ₹ 4.11 crore.

B. General**B.1 Contingent Advances**

In Schedule-11 (Current Assets), Contingent Advances amounting to ₹ 54.07 crore were outstanding since 2009. This needs to be settled.

B.2 In Schedule-11 (Current Assets), Advances for work in progress amounting to ₹ 99.39 crore were outstanding since 2009. This needs to be settled.

B.3 Provision for gratuity and leave encashment was not made on actuarial basis as required in the common format of accounts for the central autonomous bodies and also in contravention of AS-15.

B.4 The Council has maintained seven bank accounts at the Council Headquarters and 27 bank accounts at unit's level. Audit noted that the Council did not disclose unit level bank accounts in the annual accounts nor any bank reconciliations made available to audit. In view of this, audit could not verify the balances shown in their bank accounts.

C. Grants-in-aid:

During the year 2020-21, the Council had received Grant-in-aid of ₹ 130.50 crore from the Ministry. The Council had an unspent balance of ₹ 1.43 crore for previous year 2019-20 and interest earned including internal receipt of ₹ 3.15 crore. Thus, out of available funds of ₹ 135.08 crore, Council incurred an expenditure of ₹ 130.98 crore leaving an unutilized balance of ₹ 4.10 crore as on 31 March 2021.

D. Management Letter


Deficiencies which have not been included in the Audit Report have been brought to the notice of management of Council through a management letter issued separately for remedial/corrective action.

v. Subject to our observations in the preceding paragraphs, we report that the Balance Sheet, Income & Expenditure Account and Receipts & Payments Account dealt by this report are in agreement with the books of accounts.

vi. In our opinion and to the best of our information and according to the explanations given to us, the said financial statements read together with the Accounting Policies and Notes on Accounts and subject to the significant matters stated above and other matters mentioned in Annexure to this Audit Report give a true and fair view in conformity with accounting principles generally accepted in India;

- a. In so far as it related to the Balance Sheet, of the state of affairs of the Central Council for Research in Homoeopathy as at 31 March 2021 and
- b. In so far as it related to Income and Expenditure Account of the deficit for the year ended on that date.

For and on behalf of C&AG of India



(Ashok Sinha)

**Director General of Audit
(Health, Welfare & Rural Development)**

Place: New Delhi

Date:

ANNEXURE

1. Adequacy of Internal audit system

The Internal audit of the Council for the period 2013-16 was conducted by the Pr. PAO, M/o Health & Family Welfare.

2. Adequacy of Internal Control System

11 paras for the transaction audit for the period 2012-18 were outstanding as on 31.03.2021.

3. System of physical verification of Assets.

The physical verification of fixed assets was conducted up to 31.03.2013.

4. System of physical verification of inventory

The physical verification of inventory like books and publications was conducted up to 2018-19. The physical verification of stationery and other consumable was conducted up to 2018-19.

5. Regularity in payment of dues

As per accounts, no payments over six months in respect of statutory dues were outstanding as on 31.03.2021.