

## Rendezvous with the past: Review of the Central Council for Research in Homoeopathy Quarterly Bulletin 2006 (volume 1, 2, 3 and 4)

*You can't build a great building on a weak foundation. You must have a solid foundation if you're going to have a strong superstructure* – Gordon B. Hinckley.

The 'Central Council for Research in Homoeopathy (CCRH) Quarterly Bulletin' is like a foundation stone of the Council's present journal, i.e., 'Indian Journal of Research in Homoeopathy'. As we publish the reminiscence of the last volume of CCRH quarterly bulletin, we feel that we have relived that era which has witnessed the metamorphosis of this bulletin into 'Indian Journal of Research in Homoeopathy'. This chronicle has been divided into different sections as follows: fundamental research, drug proving, clinical research, clinical verification, drug standardisation, drug research, survey and collection of medicinal plants, case record, general article, web information and Medi News.

### FUNDAMENTAL RESEARCH

#### ***In vitro* activity of *Thuja occidentalis* Linn. against human pathogenic aspergilli (2006; 28 [1]: 1–7)**

Gupta G explored the *in vitro* antifungal potential of the homoeopathic drug '*Thuja occidentalis*' Q, 30, 200, 1M, 10M, 50M prepared in rectified spirit tested by following the poison food technique against *Aspergillus flavus* causing cutaneous aspergillosis and *Aspergillus niger* causing otomycosis. *Thuja* Q, 30, 200 were found highly potent against *A. flavus* and *Thuja* 50M against *A. niger*. Percent growth inhibition, sporulation and exudation were taken as parameters for assessment. The results are reported for the first time and were discussed in relation to the homoeopathic concept 'Higher dilution and high energy'.

#### **Alterations of cytogenetical effects by the oral administration of a homoeopathic drug, *Ruta graveolens*, in mice exposed to sub-lethal x-irradiation (2006; 28 [2]: 1–5)**

Khuda Bukhsh AR conducted this study to test the possible radioprotective action of *Ruta graveolens* by using several protocols such as bone marrow chromosome aberration (CA), micronucleus (MN) testing and sperm head anomaly, against sub-lethal x-irradiation at 100 rad and 200 rad doses in the Swiss albino mice muscle, at four different fixation intervals, namely, 24, 48, 72 and 96 h maintaining suitable controls. In the *Ruta* 30- and *Ruta* 200-fed mice in both the 100 rad and 200 rad treated series when compared to their respective controls, interestingly enough, an apparent increase in the mitotic index was noted at all the intervals.

#### **Efficacy of homoeopathic drugs for the control of fungal growth on cellulosic materials; (2006; 28 [3]: 1–5)**

Garg KL conducted this study on the basis that 'Homoeopathic drugs have long been used for the treatment of human diseases of fungal origin'. Therefore, to prevent fungal growth on paper, five homoeopathic drugs, namely, *Tellurium*, *Psorinum*, *Arsenicum*, *Rumex* and *Graphitis* in 30, 200, 1M potencies were tested for their antifungal efficacy against cellulolytic fungi isolated from deteriorated paper and textile materials. Out of 16 fungi isolated, three, namely *Aspergillus niger*, *Chaetomium globosum* and *Emericella nidulans*, were found to be the most frequent having the highest cellulose activity. During *in vitro* testing, *Arsenicum* and *Rumex* showed maximum inhibition of fungal growth. These two homoeopathic drugs were also found effective against all the three fungal isolates under *in situ* conditions, even after 1 year of incubation.

#### **Protective potentials of a potentised homeopathic drug, *Lycopodium-30*, in ameliorating azo dye-induced hepatocarcinogenesis in mice (2006; 28 [4]: 1–13)**

Pathak S *et al.* showed the protective potentials of *Lycopodium-30*, prepared from the extract of spores of *Lycopodium clavatum* (Fam: Lycopodiaceae) and used as a remedy for various liver ailments, had been tested in mice chronically fed with *p*-dimethyl amino azo benzene (q-DAB) – an initiator – and phenobarbital – a promoter of hepatic cancer – by using some cytogenetic endpoints, such as CA, MN, mitotic index and sperm head abnormality, and toxicity biomarkers such as acid and alkaline phosphatases (AcP and AlkP, respectively), alanine and aspartate aminotransferases (AST) and lipid peroxidation and reduced glutathione activities. The effects of chronic treatment of the carcinogens were assessed at different intervals of fixation, namely, at day 7, 15, 30, 60, 90 and day 120, and compared with that of mice fed conjointly with the carcinogens and the homeopathic remedy. Both the assay systems indicated considerable protective potentials of *Lycopodium 30* against *p*-DAB-induced hepatocarcinogenesis in mice.

### DRUG PROVING

#### **A systematic review of homeopathic pathogenetic trials from 1945 to 1995 (2006; 28 [1]: 8–13)**

Prior to the publication of the authors on Quality of Homeopathic Pathogenetic trials in "Homeopathy", the

systematic review of the trials from 1945 to 1995 along with preliminary results and discussion was published in the Quarterly Bulletin of CCRH.

Dantas F *et al.* conducted a systematic review of homeopathic pathogenetic trials (HPTs) (156) published in six languages (English – 84, German – 33, Dutch – 17, French – 11, Spanish – 7, Portuguese – 4) from 1945 to 1995. In this study, the literature was extensively searched and only published reports of HPTs were included. Information was extracted from two independent reviewers with experience in conducting HPT or clinical research using especially developed form with 87 items. The study method was assessed in terms of approval of protocol by the ethical committee, and randomisation, sequence generation of subjects, allocation concealment, masking of volunteers, information on medicines, use of placebo, adverse effects, assessments, presentation of data and number of claimed findings were recorded. The preliminary analysis and result were published in this edition of Quarterly Bulletin prior to publication of quality of Clinical Trials. Around 156 HPTs reporting the effects of 143 medicines in a total of 2815 volunteers were analysed twice by two reviewers. HPTs were done mainly in India (36) and United Kingdom (30) followed by German (17), Netherlands (17), Austria (16), France (13), United States (12), Mexico (9), Brazil (2), New Zealand (2), Norway (1) and Argentina (1).

## CLINICAL RESEARCH

### **Evaluation of homeopathic therapy in osteoarthritis: A study conducted by Central Council for Research in Homoeopathy (2006; 28 [1]: 14–17)**

This study was conducted to see the effect of homeopathic medicines on osteoarthritis, their reliable indications, most useful potencies and frequency of administration at Clinical Research Unit, Patiala, where 93 cases were studied under drug-related programme and 360 cases were studied under disease-related programme and at Central Research Institute (H), Kottayam, 273 cases were studied under disease-related programme. A total of 726 cases were enrolled in the study. Seventy-eight patients were found to show a marked improvement in joint pains. Medicines found effective were *Arsenicum album*, *Calcarea carbonicum*, *Lycopodium*, *Medorrhinum*, *Natrum muriaticum*, *Pulsatilla*, *Rhus toxicodendron*, *Sulphur*, and the indicated potencies were 30, 200, 1M and 10M.

### **A clinical study to find out the efficacy of homeopathic medicines in behavioural disorders; Central Research Institute (Homoeopathy), Kottayam, Kerala (1984–2002) (2006; 28 [2]: 6–13)**

A clinical study was undertaken to identify the usefulness of homeopathic drugs in behavioural disorders. The cases of behavioural disorders with clinical symptoms specified as per International Classification of Diseases-9 classification

of mental diseases were studied. These were total senile and pre-senile organic psychotic condition, alcoholic psychosis, drug psychosis, schizophrenia, affective psychosis, paranoid disorder, psychosis with origin specific to childhood, neurotic disorder, personality disorder and psychosomatic disorder. These cases were treated with the indicated homeopathic medicines. Mild to marked clinical improvement was identified in these behavioural disorders.

### **Clinical trial of homoeopathic medicine in dengue/chikungunya (2006; 28 [3]: 11–18)**

CCRH conducted a study on Dengue and Chikungunya at its research centre at Kottayam, Chennai, Puducherry, Jaipur, Andhra Pradesh and New Delhi in September–November 2006. The objective of this clinical trial was to define a treatment strategy and to find the *Genus epidemicus*. The trial was proposed to conduct following the standard guidelines for screening, case record, investigations and follow-ups and each case to be enrolled following the exclusion and inclusion criteria as per the approved protocol.

### **Controlled clinical trial of homoeopathic medicines in the management of upper respiratory tract Infections (2006; 28 [4]: 14–15)**

Controlled clinical trial of homoeopathic medicines in the management of upper respiratory tract infections was initiated in 1995 at the extension Clinical Research Unit of DSU, Hyderabad. Patients were divided randomly into two groups: 455 cases were given homoeopathic treatment based on the totality of symptoms and in other group 446 cases were given allopathic treatment. Both homoeopathic and allopathic medicines were found equally effective in bringing down the body temperature.

## CLINICAL VERIFICATION

Clinical verification is one of the important research programmes of the council since inception. The Council had undertaken clinical verification of symptomatic data of 106 drugs since inception to till date ([www.ccrhindia.nic.in](http://www.ccrhindia.nic.in)).

### **Lac caninum (2006; 28 [1]: 18–24)**

The clinical verification of the drug '*Lac caninum*' was carried out at seven centres (Regional Research Institute [H], New Delhi, Homoeopathic Drug Research Institute, Lucknow [Uttar Pradesh], Homoeopathic Research Institute, Jaipur [Rajasthan], Clinical Research Unit Jammu [Jammu and Kashmir] and Clinical Verification Units at Ghaziabad [UP], Vrindavan [Uttar Pradesh] and Patna [Bihar]) of CCRH. The symptoms, which are given in the homoeopathic literature, were clinically verified by the Council. The period of verification was from April 1984 to March 2003. The numbers of cases studied were 4347 and potencies used were 6, 30, 200 and 1M. Later, the drug was incorporated in 'Study of homoeopathic medicines through clinical verification' volume II (148–170), where the numbers of patients studied were 10,557 and the potencies used were 6C, 30C, 200C and 1M.

### ***Kali muriaticum* (2006; 28 [2]: 14–23)**

The clinical verification of the drug '*Kali muriaticum*' was carried out at seven centres (Regional Research Institute [H], New Delhi, Homoeopathic Research Institute, Lucknow [Uttar Pradesh], Homoeopathic Research Institute, Jaipur [Rajasthan], Clinical Research Unit Jammu [Jammu and Kashmir] and Clinical Verification Units at Ghaziabad [Uttar Pradesh], Vrindavan [Uttar Pradesh] and Patna [Bihar]) of CCRH. The symptoms, which are given in the homoeopathic literature, were clinically verified by the council. The period of verification was from April 1984 to March 2003. The numbers of cases studied were 6687 and potencies used were 6X, 6C, 30C and 200C. Later, the drug was incorporated in 'Study of homoeopathic medicines through clinical verification' volume II (122–147), where the numbers of patients studied were 3915 and the potencies used were 3X, 6X, 12X, 6C, 30C, 200C and 1M.

### ***Amygdalus persica* (2006; 28 [3]: 19–22)**

This study was undertaken with an objective to verify the symptoms available in the literature to elaborate the drug picture and to explore the full potential of a lesser known and partially proved drug – *Amygdalus persica*. Around 341 cases were studied during the period from April 1996 to March 2004 where *Amygdalus persica* was prescribed. The potencies used were 6 and 30. This study confirms that symptoms available in the literature are reliable indications of the drug. A number of clinical symptoms were also observed during the trial which were relieved in patients and those symptoms were mentioned as new symptoms of the drug. Later, the drug was incorporated in 'Study of homoeopathic medicines through clinical verification' volume I (85–90), where the numbers of patients studied were 364 and the potencies used were Q, 6C and 30C.

### ***Baryta iodata* (2006; 28 [4]: 16–23)**

This study was undertaken with an objective to verify the symptoms available in the literature to elaborate the drug picture and to explore the full potential of *Baryta iodata* 3915 cases were studied during the period from April 1980 to March 1997. The potencies used were 1X, 6C, 30C and 200C. This study confirms that the symptoms available in the literature are reliable indications of the drug. A number of clinical symptoms were also observed during the trial to be relieved in patients and those symptoms were mentioned as new symptoms of the drug. The symptoms obtained during the proving of the drug by the Council were compiled in the Homoeopathic Drug Proving conducted by CCRH 2005, 1<sup>st</sup> edition. Later, the drug was incorporated in 'Study of Homoeopathic medicines through clinical verification' volume II (41–48), where the numbers of patients studied were 3951 and the potencies used were 1X, 6C, 30C and 200C.

### **A comparative study of the symptoms produced in the region of mouth by some of the drugs clinically verified (2006; 28 [4]: 20–23)**

Jethani A *et al.* in this article described a comparative study regarding clinically verified symptoms related to ailments in oral mucosa of 6 medicines, viz. *Aegle folia*, *Aegle marmelos*,

*Terminalia chebula*, *Achyranthes aspera*, *Kali muriaticum* and *Hydrocotyle asiatica*.

## **DRUG RESEARCH**

### **Pharmacognostic and physico-chemical evaluation of *Psidium guajava* L. (2006; 28 [1]: 25–30)**

Subramanian P *et al.* conducted the pharmacognostic and physico-chemical evaluation of *Psidium guajava* L. which is a common fruit tree known as guava. In Unani, leaves are used as an application in wounds, ulcers and as an astringent to bowels. Leaves contain catechol and pyrogallol tannins besides oil and vitamins. In this study, pharmacognostic studies of leaf comprising macro- and microscopic characters, organoleptic and powder microscopic features, besides physico-chemical constants, namely, moisture content, ash and extractive values for raw drugs and parameters such as weight per millilitre, total solids, alcohol content and chromatographic profiles of thin-layer chromatography (TLC), high-performance TLC along with ultraviolet absorbance for mother tincture were detailed.

### **Homoeopathic drugs in endocrinological disorders an experimental approach (2006; 28 [3]: 23–26)**

In this article, Sundram EN has compiled general concepts of endocrinology and experimental studies of homoeopathic medicines in animals. He had compiled studies carried out by Council's Drug Standardisation Unit [H], Hyderabad to evaluate the therapeutic efficacy and level of safety of the drugs. A brief description about studies conducted on *anti-diabetic*, *anti-fertility*, *anti-ovulatory*, *anti-implantation* and *anti-spermatic* effects of homoeopathic drugs were explained here.

## **DRUG STANDARDISATION**

### ***Boerhaavia diffusa* (2006; 28 [2]: 24–27)**

This article discusses the pharmacognostic and pharmacological action of the drug *Boerhaavia diffusa*. In traditional medicine, it was used for its anti-inflammatory, anti-bacterial and cardiotoxic properties also used in the treatment of elephantiasis. Its seeds are considered to be tonic, expectorant and carminative and useful in muscular pain and scabies. Leaves are employed as appetiser and alexiteric and are used in wounds of eye and joint pain. Roots have diuretic, anticonvulsant and analgesic properties. The description, parts used, distribution, macro- and microscopical properties, powered drug, physiochemical standardisation, reported pharmacological studies and animal experimentation of the drug *Boerhaavia diffusa* has been discussed elaborately.

### **Pharmacognostic studies on *Lawsonia Inermis* (2006; 28 [4]: 24–28)**

Raj H *et al.* described a pharmacognostic study of *Lawsonia inermis* which has a common name 'Henna plant' in English and 'Mehendi' in Hindi. It belongs to the Lythraceae family. It is mainly cultivated and naturalised all over India. The author

had detailed the description of the leaves of the plant and their macro- and microscopical properties.

## **SURVEY AND COLLECTION OF MEDICINAL PLANTS**

For maintaining authentic plant source material in fresh and live condition, the Council has established a medicinal plants research garden and a Survey of Medicinal Plants and Cultivation Unit, which collects raw drug plant material from areas surveyed from all over India.

### **Homoeopathic medicinal plant profile: *Verbascum thapsus* Linn (2006; 28 [3]: 27–31)**

*Verbascum thapsus* (Hindi name Gidar Tamaku, Ban Tamaku) is usually a biennial herb up to 1.5 m and is a native of Europe and Asia up to Caucasus, North America, and in India it is found in Western Himalayas from Kashmir to Bhutan, in the Western Ghats and Nilgiris and in hills above 1700 m. It is also named as ‘Candlewick Plant’. In this article, the author highlighted the macroscopic study of leaves, flowers, stem and fruit, its general distribution, uses, constituents and homoeopathic uses. The whole plant is used for the preparation of mother tincture. In Homoeopathy, it is used for itching of anus, colic, constipation, cough, deafness, enuresis, haemorrhoids, neuralgia, prosopalgia and urine incontinence.

### **Homoeopathic medicinal plant profiles *Achillea millefolium* L. (2006;28 [4]: 29–36)**

*Achillea millefolium* (Hindi name Gandana) belongs to the Asteraceae family. They have erect herbs up to 1.5m and are native of Asia, Europe and America extending up to Canada. In India, it is found in Western Himalayas from Kashmir to Kumaon, especially Chandra and Bhaga valleys of Lahaul, Himachal Pradesh. This article highlighted the macroscopic study of the whole plant, general distribution, survey and collection, general uses, medicinal uses, clinical indications, chemical properties and active principles. The plant had been collected from South India mainly from the hill tops of the Nilgiris district. It is used as antispasmodics, astringents, carminatives, diaphoretics, stimulants and tonics. In Homoeopathy, it is used for controlling active haemorrhage from any part of the body.

## **CASE RECORD**

### **A case of sacroilitis with polyarthritis (2006; 28 [3]: 32–35)**

Sharma SR described a case of a 22-year-old girl, presenting with pain in the left hip region and other large joints of upper and lower limbs. This was the case of sacroilitis polyarthritis which persisted for more than 6 weeks. *Kali carb* 30 (TDS for 10 days) and 200 (3 doses/tds for 2 days after the gap of 4 days) were prescribed. *Kali carb* had brought about a complete regression of clinical symptoms and signs and also helped bring down elevated levels of C-Reactive Protein, from 3.91 to <0.6 mg/dL. Erythrocyte sedimentation rate was reduced from 50 to 20 mm in the 1<sup>st</sup> hour. Anaemia too improved as evident from a rise in Hb level from 10 to 11 g%.

### **A HIV-infected carrier under homoeopathic treatment (2006; 28 (4): 37–39)**

Dey SK presented a case of a 28-year-old unmarried HIV positive male. The case was given homoeopathic treatment and was followed up for a period of 10 years. This case showed maintenance of an upward trend of CD4 cell count from base line along with maintenance of other haematological parameters. Clinically no major illness as would have been anticipated with the natural history of the disease were observed during this period.

## **GENERAL ARTICLE**

### **Role of Homoeopathy in migraine in adolescence (2006; 28 [1]; 31–36)**

Gopinadhan S presented this article to show that the treatment on the basis of similia similibus curentur is the best psychosomatic approach for migraine in adolescence. Twenty-five cases of adolescent patients suffering from classical migraine were treated in OPD during 1997–2002. Homoeopathic medicines were selected on totality of symptoms. The author concluded that in adolescents’ migraine, the true psychosomatic approach is the homoeopathic way of treatment because the drugs prescribed on the basis of the totality of the symptoms were able to give relief in 21 out of 25 cases and also the predominant miasm responsible for the adolescent migraine are psora and pseudopsora.

### **Studies on cases of chronic arsenic toxicity and its implication in the development of homoeopathic *Materia Medica* and Repertory. (2006; 28 (2); 28-35)**

Das AK *et al.* conducted this study under the extra mural research scheme of the Deptt. of AYUSH (Ministry of AYUSH) at National Institute of Homoeopathy, Kolkata. This toxicological study showed that 89 symptoms among which 79 symptoms were already mentioned in *Materia Medica* and synthesis repertory. However, the rest 18 symptoms were not included in any homoeopathic *Materia Medica*. Such clinical confirmation is essential to prove their genuineness as well as their comparative value.

### **Web News 2006; 28 (1, 2, 3, 4)**

Verma OP compiled latest medical news/information about websites and weblinks related to avian influenza (bird flu), depression – a major mental problem – and Homoeopathy, Urolithiasis & Homoeopathy and Urolithiasis & Homoeopathy published in volumes 1, 2, 3 and 4, respectively. It had a brief description about H5 Avian Influenza virus and its epidemic data; homoeopathic medicines, ‘*Genus epidemicus*’, depression and its treatment by Homoeopathy; urolithiasis and role of Homoeopathy in its treatment; and information about chikungunya and its homoeopathic approach of treatment.

Medi News: This section contains a brief news related to the medical world having recent researches. The source of news was from Medical News Today.

Dewan: Rendezvous with the past

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## Conflicts of interest

None declared.

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