

EDITORIAL

Access this article online

Website:

www.ijrh.org

DOI:

10.4103/0974-7168.116616

Quick Response Code:



Assuring the quality of homoeopathic dilutions is a challenging task. Nevertheless, “the true physician must be provided with genuine medicines of unimpaired strength so that he may be able to rely upon their therapeutic powers, he must be able himself to judge their genuineness,” as mentioned in the Aphorism 264 of Organon of Medicine.^[1] The quality of a drug depends not only on the way the drug is manufactured after extracting the used part(s) of the original material, but also in the way the plant medicines are cultivated.

The Council has carried out standardization of many drugs and in this issue we present a paper on standardization markers of *Buxus sempervirens*. The drug is known for its medicinal properties for treating rheumatism, malaria, and gastrointestinal disorders.^[2] Pharmacognostic study and high-performance thin layer chromatography fingerprinting of *Buxus* make available the information regarding morphology, powder microscopy, organoleptic characters, and physicochemical studies, which will help in identification, authentication, and proper standardization of the drug.^[3]

Dr. S. C. Ghosh introduced *Cephalandra indica* to Homoeopathy in 1905. He proved this drug on four healthy volunteers and published the data in his book “Drugs of Hindoosthan,” 9th edition. The Council carried out a Clinical Verification study on the hypoglycaemic effect of *Cephalandra indica* on the symptoms mentioned by Dr. Ghosh. The study was encouraging and showed its efficacy in reducing blood glucose level and also symptoms of diabetic retinopathy in tincture form.^[4] Forty-one percent alcoholic abstract of *Cephalandra indica*, on regular administration in doses ranging from 25 to 75 $\mu\text{mL}/100\text{ g}$ of body weight by oral or

intraperitoneal route produced a significant fall in blood sugar level in alloxan-induced diabetes in rats.^[5] In the featured study, there was a significant reduction of blood glucose level, regain of body weight, and regeneration of beta cells in pancreas in mother tincture-treated rats, further verifying the antidiabetic effects of the drug.

Another paper featured in this issue assesses the role of individualized homoeopathy in essential hypertension. A few trials conducted earlier used “specific remedy” or “combination formulae” for treating hypertension rather than an individualized approach.^[6] This paper observes statistically significant reduction of blood pressure in the verum group as compared with the control group through individualized homoeopathic treatment, within a period of 6 months. *Natrum muriaticum*, *Calcarea carbonica*, *Sulphur*, *Thuja occidentalis*, *Nitric acid* and *Medorrhinum* were among the frequently prescribed medicines.

Furthermore, despite their established clinical efficacy, evidence-based studies on LM potencies are limited to only a few. Today, the LM potencies take up a small, but not insubstantial share of the market of homoeopathic remedies, which are prescribed by physicians and practitioners. Although this by no means indicates that the high-potency debate has come to an end, the gentle power of the small dosage convinces an increasing number of people. However, the kind of evidence required is still not available.^[7] In a paper where he shares his clinical experiences with LM potencies, Dr. Luc de Shepper expresses that the use of LM potencies call for more investigations so that this treasure of the 6th edition of Organon is not lost.^[8] One of our featured papers explores the effect of homoeopathic LM potencies in acute attacks of haemorrhoidal disease in a placebo-controlled trial.

A Homoeopathic Pathogenetic Trial on *Hydroquinone*, which evaluated the data using the Quantitative and Qualitative Pathogenetic Indices is also featured in the issue. Besides its use as an antioxidant in the rubber industry and a developing agent in photography, *Hydroquinone* and products containing *Hydroquinone* are used as depigmenting agents to lighten skin.^[9] The paper unveils the homoeopathic therapeutic effects of this substance through this pathogenetic trial.

It is my appeal to all the readers to use the information provided in this journal and share their experiences with the professionals.

REFERENCES

1. Samuel H. Organon of Medicine. 5th and 6th ed. New Delhi: B. Jain Publishers; 1994.
2. Barceloux DG. Boxwood (*Buxus sempervirens* L.) in medical toxicology of natural substances: Foods, fungi, medicinal herbs, plants, and venomous animals. New Jersey: John Wiley and Sons Inc; 2008.
3. Subramanian P, Padma Rao P, Sheshashena Reddy T, Sudhakar P, Ramachandra Reddy P. Standardization of homoeopathic drug–*Buxus sempervirens* L. Indian J Res Homoeopathy 2013;7(2):41-46.
4. Rastogi DP. Clinical verification of hypoglycaemic effect of *Cephalandra indica* in patients of DM. CCRH Quarterly Bulletin 1990;12:20.
5. Rastogi DP, Saxena AC and Kumar Sunil. Pancreatic beta-cell regeneration a novel anti-diabetic action of *Cephalandra indica* mother tincture. Br Homoeopath J 1988;77:147.
6. Saha S, Koley M, Seikh IH, Mundle M, Ghosh S, Nag G, et al. Individualized Homoeopathy versus placebo in essential hypertension: A double-blind randomized controlled trial. Indian J Res Homoeopathy 2013;7(2):62-71.
7. Jütte R. The LM potencies in homoeopathy: From their beginnings to the present day. Vol. 78. Stuttgart: Institute for the History of Medicine of the Robert Bosch Foundation; 2007. p. 78.
8. De Schepper L. LM potencies: One of the hidden treasures of the sixth edition of the Organon. Br Homeopath J 1999;88:128-34.
9. Kari FW. Toxicology and carcinogenesis studies of *hydroquinone* in rats and mice, Vol. 3. National Toxicology Program. USA: U.S. Department of Health and Human Services, NTP TR 366; NIH;1989.

R. K. Manchanda

Editor in Chief

Director General, Central Council for Research in Homoeopathy,
61-65, Institutional Area, Janakpuri, New Delhi, India.
E-mail: rkmanchanda@gmail.com

How to cite this article: Manchanda RK. Editorial. Indian J Res Homoeopathy 2013;7(2):39-40.

Author Help: Online submission of the manuscripts

Articles can be submitted online from <http://www.journalonweb.com>. For online submission, the articles should be prepared in two files (first page file and article file). Images should be submitted separately.

- 1) **First Page File:**
Prepare the title page, covering letter, acknowledgement etc. using a word processor program. All information related to your identity should be included here. Use text/rtf/doc/pdf files. Do not zip the files.
- 2) **Article File:**
The main text of the article, beginning with the Abstract to References (including tables) should be in this file. Do not include any information (such as acknowledgement, your names in page headers etc.) in this file. Use text/rtf/doc/pdf files. Do not zip the files. Limit the file size to 1 MB. Do not incorporate images in the file. If file size is large, graphs can be submitted separately as images, without their being incorporated in the article file. This will reduce the size of the file.
- 3) **Images:**
Submit good quality color images. Each image should be less than **4 MB** in size. The size of the image can be reduced by decreasing the actual height and width of the images (keep up to about 6 inches and up to about 1800 x 1200 pixels). JPEG is the most suitable file format. The image quality should be good enough to judge the scientific value of the image. For the purpose of printing, always retain a good quality, high resolution image. This high resolution image should be sent to the editorial office at the time of sending a revised article.
- 4) **Legends:**
Legends for the figures/images should be included at the end of the article file.