

EDITORIAL

Access this article online

Website:

www.ijrh.org

DOI:

10.4103/0974-7168.154339

Quick Response Code:



Infectious diseases are a major cause of morbidity and mortality. It is challenging to prevent, control, and treat these diseases in developing countries like India. In this issue, we present two original papers on the subjects of Acute Encephalitis Syndrome (AES) and Human Immunodeficiency Virus (HIV) nosode. AES is a growing problem in India with the first major outbreak in West Bengal in 1973 involving 700 cases and over 300 deaths. The state of Uttar Pradesh has experienced periodic AES outbreaks since 1978, but following a major outbreak in 2006, the annual case load has exceeded 3000 patients, 3 times the level prior to that year.^[1] The state has accounted for almost half (over 20,000) of cases and 3560 deaths since 2008. In recent years, various *Enteroviruses* (EV) such as EV-76, EV-89 as well as Coxsackie virus B5 and Echovirus 19 have been found associated with AES cases.^[2,3]

AES treated according to institutional management protocol has considerable mortality and morbidity. This paper evaluates the effect of Homoeopathy if used as an add-on intervention. Council has established a research unit in the epidemic ward of Baba Rhaghav Das Medical College and Hospital, Uttar Pradesh where an observational study with control was carried out from July 2012 to November 2012 with the objective to explore the feasibility of further randomized control study. There is a favorable response, but further study is desirable to identify useful homoeopathic medicines and treatment strategy for undertaking more rigorous studies.^[4]

Medicine prepared from microbes are being used in Homoeopathy since 1827, in this issue, we are publishing a study undertaken to evaluate a newly developed HIV nosode in the treatment for

HIV-infected participants.^[5] The article features the preparation of this nosode along with the results of the clinical study which revealed improvement in immunological parameters, treatment satisfaction, reported by an increase in weight, relief in symptoms, and an improvement in health status. It is a preliminary study; however, further exploration is desirable.

The standardization of a proving process^[6,7] and quality of proving^[8,9] studies has been a major consideration for research over the years. The methodology of drug proving has changed considerably since the times of Dr. Hahnemann. Proving guidelines have been developed by various international bodies^[10-12] on the basis of which proving protocols for individual drugs are developed by researchers^[13] for individual studies. Council has harmonized its methodology for drug proving keeping in view the guidelines of Homoeopathic Pharmacopoeia of United States and Liga Medicorum Homoeopathica Internationalis, in consultation with Robbert Van Haselen, Editor and Chief, Journal of complementary Medicine. This has also been approved by the Special Committee of Drug Proving of the Council. We are publishing this protocol with the hope that Homoeopathic Medical Colleges may follow this for undertaking drug proving programs at the institutional level. Council shall also be using this protocol in its research program.^[14]

Other highlights of this issue are the pharmacognostic studies on *Chamaecyparis*^[15] and evaluating the analgesic and central nervous system depressant activities of *Solanum* as Homoeopathic formulations in experimental animal models.^[16]

High-quality research in Homoeopathy is the need of an hour, posing a challenge to all the researchers

and the budding homeopaths in propagating such researches which will yield evidence-based outcomes.

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How to cite this article: Manchanda Raj K. Editorial. *Indian J Res Homoeopathy* 2015;9:1-2.

Source of Support: Nil, **Conflict of Interest:** None declared.