



ANNUAL REPORT 2013-14

Government of India

Ministry of Health and Family Welfare Department of Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH)

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Abbreviations

ACT	Ayurveda Clinical Trial	CGHS	Central Government Health
ADR	Adverse Drug Reaction		Scheme
ANC	Ante Natal Care	CME	Continuing Medical Education
APC	Ayurvedic Pharmacopoeia Committee	COPD	Chronic Obstructive Pulmonary Disease
ADE	Adverse Drug Event	CRU	Clinical Research Unit
	-	CRI	Central Research Institute
AP	Ayurvedic Pharmacopeia	DBT	Department of Bio-Technology
ASUDCC	Ayurveda, Siddha, Unani Drugs Consultative Committee	DH	District Hospital
ASUDTAB	Ayurveda, Siddha, Unani Drug	DTLs	Drug Testing Laboratories
	Technical Advisory Board	EMR	Extra Mural Research
AllA	All India Institute of Ayurveda	FRLHT	Foundation for Revitalization of Local Health Tradition
BIMSTEC	Bay of Bengal Initiative for Multi- Sectoral Technical and Economic Cooperation	GAU	Gujarat Ayurveda University
		GLP	Good Laboratory Practices
CAS	Current Awareness Service	GMP	Good Manufacturing Practices
CBD	Convention on Biological Diversity	IL&FS	Infrastructure Leasing and Financial
CHC	Community Health Centre		Services
CSIR	Council of Scientific and Industrial Research	IPGTRA	Institute for Post Graduate Teaching and Research in Ayurveda
CCRAS	Central Council for Research in Ayurvedic Sciences	IMPCL	Indian Medicines Pharmaceutical Corporation Limited
CCRH	Central Council for Research in	IPR	Intellectual Property Rights
	Homoeopathy	IPD	In Patient Department
CCRUM	Central Council for Research in Unani Medicine	ISM&H	Indian Systems of Medicine and Homoeopathy
CCRS	Central Council for Research in Siddha	IIIM	Indian Institute of Integrative Medicine
CCRYN	Central Council for Research in Yoga and Naturopathy	MDNIY	Morarji Desai National Institute of Yoga

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MoEF	Ministry of Environment and Forest	PEC	Project Evaluation Committee	
NBA	National Bio-Diversity Authority	PGIMER	Post Graduate Institute for Medical	
NCNPR	National Center for Natural		Education and Research	
	Products Research	QCI	Quality Council of India	
NRHM	National Rural Health Mission	RAV	Rashtriya Ayurveda Vidyapeeth	
NIA	National Institute of Ayurveda	RET	Rare, Endangered and Threatened	
NIH	National Institute of Homoeopathy	RRI	Regional Research Institute	
NIS	National Institute of Siddha	RCH	Reproductive Child Health	
NIUM	National Institute of Unani	SCP	Special Component Plan	
	Medicine	SDI	Selective Dissemination of	
NIN	National Institute of Naturopathy		Information	
NGO	Non-Governmental Organisation	SPV	Special Purpose Vehicle	
NEIAH	North Eastern Institute of Ayurveda	TSP	Tribal Sub Plan	
	and Homoeopathy	TKDL	Traditional Knowledge Digital	
NEIFM	North Eastern Institute of Folk		Library	
	Medicine	UG	Under Graduate	
OPD	Out Patient Department	WHO	World Health Organisation	
PHC	Primary Health Centre	WHO SEARO	WHO Regional Office for South East	
PPP	Public Private Partnership		Asia	
PG	Post Graduate			

Background of the Department

- 1.1 The Department of Indian Systems of Medicine and Homoeopathy (ISM&H) was established in the Ministry of Health & Family Welfare in March, 1995. It was renamed as Department of Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy with acronym as AYUSH in November, 2003. The Department is responsible for policy formulation, development and implementation of programmes for the growth, development and propagation of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) systems of Health Care*. Sowa Rigpa is the recent addition to the existing family of AYUSH systems.
- 1.2 VISION AND MISSION OF THE DEPARTMENT

The Vision of the Department is to position AYUSH systems as the preferred systems of living and practice for attaining a healthy India. The Department has identified its Mission in terms of seven broad thematic areas of AYUSH activities. The thematic areas are as follows:

(I) EFFECTIVE HUMAN RESOURCE DEVELOPMENT

- To ensure availability of quality education and training to AYUSH Doctors/Scientists/Teachers,
- To ensure availability of quality paramedical, pharmacy and nursing education and training in AYUSH,

- To provide availability of opportunity for quality AYUSH education throughout the country,
- To empower AYUSH professionals with improved skills and attitudes,
- To promote capacity building of Institutions, Centres of Excellence (COE), National Institutes etc.

(II) PROVISION OF QUALITY AYUSH SERVICES

- Delivery of Quality AYUSH health care services to entire population,
- AYUSH to be an integral part of the health delivery system by mainstreaming of AYUSH,
- To ensure healthy population through AYUSH interventions,
- To ensure creation of enabling uniform legal framework for the practice of AYUSH practices and therapies,
- Utilization of trained AYUSH doctors at all levels of Health Care services.

(III) INFORMATION, EDUCATION AND COMMUNICATION

- To propagate and promote AYUSH within the country,
- To strive for global acceptance of AYUSH formulations,
- To disseminate AYUSH practices and therapies for better health,

^{*} Allocation of Business Rules, 1961 accessed from www.cabsec.nic.in

[^] Strategic Plan of Department of AYUSH

 To encourage behavioural change through communication for better health.

(IV) QUALITY RESEARCH IN AYUSH

- To promote quality research in AYUSH with the objective of validating the systems scientifically, and safety and efficacy evaluation of AYUSH remedies,
- To encourage research for validation of fundamental principles of AYUSH Systems,
- To encourage development of new drugs for high priority diseases of national importance,
- To preserve through documentation local health traditions and folklore for their utilization for new drug development,
- To promote inter-disciplinary research.
- To protect Intellectual Property Rights (IPR) in AYUSH systems.
- To encourage research in preventive and promotive health through AYUSH.

(V) GROWTH OF THE MEDICINAL PLANTS SECTOR

- To ensure sustained availability of quality raw material from medicinal plants,
- To ensure conservation of medicinal plants,
- Capacity building in medicinal plants sector.

(VI) DRUG ADMINISTRATION

 To accelerate the Pharmacopoeial/ standardization work on AYUSH drugs,

- To ensure availability of high quality AYUSH drugs,
- To ensure enabling legal framework for production and distribution of safe and quality AYUSH drugs,
- To strengthen regulatory infrastructure in Central and State Governments,
- To encourage AYUSH drug industry to produce high quality AYUSH medicines for national and international needs.

(VII) INTERNATIONAL EXCHANGE PROGRAMME/SEMINARS/WORKSHOPS ON AYUSH

- To propagate and promote AYUSH systems outside the country and to ensure their global acceptance as systems of medicine,
- To collaborate with International bodies e.g. World Health Organisation for cross disciplinary standardization, global recognition and propagation of AYUSH systems,
- Global legal recognition of qualifications and practice of AYUSH,
- To promote collaborative research and education in AYUSH with other countries,
- Protection of Traditional Knowledge.
- 1.3. National Health Policy,1983** observed that the country has a large stock of health manpower comprising of private practitioners in various systems. This resource has not so far been adequately utilized. The practitioners of AYUSH systems enjoy high local acceptance and respect and consequently exert considerable influence on health beliefs and practices. It is, therefore, necessary to initiate organized measures to enable each of these systems of medicine and health care to develop in accordance

^{**} National Health Policy, 1983 accessed from www.mohfw.nic.in

with their strengths. Simultaneously, planned efforts should be made to dovetail the functioning of the practitioners and integrate their service, at the appropriate levels, within specified areas of responsibility and functioning, in the over-all health care delivery system, especially with regard to the preventive, promotive and public health objectives. Well-considered steps would also be required to be taken to move towards a meaningful phased integration of the indigenous and the modern systems. The significance of the Alternative Systems of Medicine was further emphasized in the National Health Policy, 2002, ***which stated that Ayurveda, Siddha, Unani and Homoeopathy have a substantial role because of the inherent advantages, such as diversity, modest cost, low level of technological input and the growing popularity of natural plant based products, especially in the under-served, remote and tribal areas. The Policy also envisaged the consolidation of documentary knowledge contained in these systems to protect it against attack from foreign commercial entities by way of malafide action under the Patent laws in other countries.

- **1.4** The National Policy on Indian Systems of Medicine & Homoeopathy, 2002 enunciated following as its objectives:
 - (1) To promote good health and expand the outreach of health care to our people, particularly those not provided with health cover, through preventive, promotive, mitigating and curative intervention through ISM&H,
 - (2) To improve the quality of teachers and clinicians by revising curricula to contemporary relevance and researches by creating model Institutions and Centres of Excellence and extending assistance for creating infrastructural facilities,

- (3) To ensure affordable ISM&H services and drugs which are safe and efficacious,
- (4) To facilitate availability of raw drugs, which are authentic and contain essential components as required under pharmacopoeial standards to help improve quality of drugs, for domestic consumption and export,
- (5) Integrate ISM&H in health care delivery system and National Programmes and ensure optimal use of the vast infrastructure of hospitals, dispensaries and physicians,
- (6) Re-orient and prioritize research in ISM&H to gradually validate drugs and therapies to address in particular the chronic and new emerging life style related diseases,
- (7) Create awareness about the strengths of these systems in India and abroad and sensitize other stakeholders and providers of health,
- (8) To provide full opportunity for the growth and development of these systems and utilization of the potentiality, strength and revival of their glory.
- **1.5** The policy outlines the following strategies to achieve the objectives:
 - Legislative measures to check mushroom growth of substandard colleges,
 - Course curricula to be reinforced to raise the standards of medical training and to equip trainees for utilization in national health programmes,
 - Priority to research covering clinical trials, pharmacology, toxicology, standardization and study of pharmaco-

^{***} National Health Policy, 2002 accessed from www.mohfw.nic.in

- kinetics in respect of identified areas of strength,
- The National Medicinal Plants Board to address all issues connected with conservation and sustainable use of medicinal plants leading to remunerative farming, regulation of medicinal farms and conservation of bio-diversity,
- National Medicinal Plants Board to acquire statutory status to be able to regulate registration of farmers and cooperative societies, transportation, marketing of medicinal plants and proper procurement and supply of raw materials to pharmaceutical industry,
- Protection of India's traditional medicinal knowledge to be undertaken through a progressive creation of a Digital Library for each system and eventually the codified knowledge leading to innovation and good health outcomes,
- Effort to integrate and mainstream ISM&H in health care delivery system and in National Programmes,
- A range of options for utilization of ISM&H manpower in the healthcare delivery system to be developed by assigning specific goal oriented role and responsibility to the ISM&H work force,
- Allopathic hospitals to be encouraged to set up AYUSH health facilities,
- Government to assist allopathic hospitals to establish Panchkarma and Ksharsutra facilities for the treatment of neurological disorders, musculoskeletal problems as well as ambulatory treatment of fistula-in-ano, bronchial asthma and dermatological problems,

- States to be encouraged to consolidate the ISM&H infrastructure and health services,
- Pharmacopoeial work related to Ayurveda, Unani, Siddha and Homoeopathy Drugs to be expedited,
- Industry to be encouraged to make use of quality certification and acquisition of GMP and ISO 9000 certification,
- Quality Control Centers would be set up on regional basis to standardize the in-process quality control of ISM products and to modernize traditional processes without changing the concepts of ISM,
- States to be advised and supported to augment facilities for drug manufacture and testing,
- Operational use of ISM in Reproductive & Child Health (RCH) to be encouraged in eleven identified areas, where the Indian Systems of Medicine would be useful for antenatal, intra-natal, postnatal and neonatal care,
- North Eastern States, rich in flora and fauna, to be supported to develop infrastructure and awareness of ISM,
- Keeping in view the global interest in understanding ISM concepts and practices, modules to be formulated for introducing Ayurveda and Yoga to medical schools and institutions abroad and to expose medical graduates,
- Awareness programmes on the utility and effectiveness of ISM&H to be launched through electronic and print media.
- 1.6 The Department envisages to achieve its vision, mission and policy goals/objectives through a series of Centrally Sponsored and Central Sector Schemes as listed below:

1.6.1 Central Sector Schemes

- 1 Central Sector Scheme for supporting Re-orientation programme and Continuing Medical Education (ROTP/ CME) for AYUSH personnel,
- Scheme for Upgradation of Institutions to Centres of Excellence by providing financial assistance to accredited AYUSH centres in Non-Governmental/ Private sector engaged in AYUSH education, drug development and research, Clinical Research /Folk medicine etc.,
- 3 Scheme for promoting AYUSH interventions in Public Health initiatives,
- 4 Scheme for Extra Mural Research projects,
- 5 Scheme for Information Education and Communication (IEC),
- 6 Scheme for supporting International Exchange Programme, Seminars, Workshops on AYUSH,
- 7 Development of common facilities for AYUSH industry clusters,

- 8. Support for development of Traditional Knowledge Digital Library and protection of AYUSH intellectual property rights,
- 9. Educational Institutions
- 10. Research and Development
- 11. Surveys on usage and acceptability of AYUSH systems,
- 12. National Medicinal Plants Board.

1.6.2 Centrally Sponsored Schemes

- 1. Promotion of AYUSH:
 - 1.1 Development of AYUSH Institutions.
 - Hospitals and Dispensaries (under NRHM)
 - 1.3 Drugs Quality Control
- Setting up of specialized AYUSH facilities in Government tertiary care AYUSH Hospitals in Public Private Partnership mode,
- 3. National Mission on Medicinal Plants.

AYUSH Systems

2.1 INTRODUCTION

2.1.1 AYUSH systems of medicine are a group of Indian systems of medicine and Homeopathy. AYUSH is an acronym for Ayurveda, Yoga & Naturopathy, Unani, Siddha & Sowa Rigpa, and Homoeopathy. Ayurveda is the oldest system with documented history of itspractice since more than 5000 years whereas Homeopathy is in practice in India for around 100 years. Thesesystems are being practised in the country with diverse preferences of people and infrastructural facilities. Ayurveda is more prevalent in the States of Kerala, Maharashtra, Himachal Pradesh, Gujarat, Karnataka, Madhya Pradesh, Rajasthan, Uttar Pradesh, Delhi, Haryana, Punjab, Uttarakhand, Goa and Orissa. The practice of Unani System is largely prevalentin Andhra Pradesh, Karnataka, Jammu &Kashmir, Bihar, Maharashtra, Madhya Pradesh, Uttar Pradesh, Delhi and Rajasthan. Homoeopathy is widely practiced in Uttar Pradesh, Kerala, West Bengal, Orissa, Andhra Pradesh, Maharashtra, Punjab, Tamil Nadu, Bihar, Gujarat and the North Eastern Statesand the Siddha system is practicedin Tamil Nadu, Pondicherry and Kerala. Recently recognized Sowa Rigpa system of medicine is prevalent in transHimalayan regions including Jammu &Kashmir, Himachal Pradesh, Uttarkhand, Arunachal Pradesh and Sikkim. Besides there are few educational institutes of Sowa Rigpa in UP and Karnataka.AYUSH services in the country as a whole are providedby public, private and voluntary sector organizations and the range of their distribution varies from State to State.

2.2 AYURVEDA SYSTEM

- 2.2.1 'Ayurveda'literally means "Science of Life". Ayurveda is evolved fromthe various Vedic hymns rooted in the fundamental philosophies about life, disease and health. The Charak Samhita and Sushruta Samhita developed around 2500 BC are the main treaties of Ayurveda fully available today. Accordingto Ayurveda, health is considered as a pre-requisite for achieving the goals of life i.e., Dharma, Artha, Kama and Moksha. Ayurveda takes an integrated view of the physical, mental, spiritual and social aspects of human beings and about the interrelationships between these aspects.
- 2.2.2 The philosophy of Ayurveda is based on the theory of Panchmahabhutas (five primordialelements), which postulates that all objects and living bodies are composed of these five elements. The combinations of these five elements are represented in the form of Tridoshas viz. Vata (Ether+ Air), Pitta (Fire) and Kapha(Water+ Earth). These three 'Doshas' are physiological entities in living beings, whereas Satva, Rajas and Tamas are the mental attributes. The structural entities of the human body are the matrix of Rasa, Rakta, Mansa Meda, Asthi, Majja and Shukra. Ayurveda aims to keep these structural and functional entities in a state of equilibrium which signifies good health (Swasthya). Any imbalance due to internal or external factors causes disease and the treatment consists of restoring the equilibrium through various interventions including therapeutic procedures, regimens, medicines and lifestyle management.

- 2.2.3 Ayurveda considers the human being as a microcosm(Yatha pinde tatha brahmande) which is a replica of the macrocosm (universe). The treatment in Ayurveda is holistic and individualized. The preventive aspect of Ayurveda is called Svastha-Vritta and itincludes personal hygiene, regular daily routine, appropriate social behavior and use of Rasayana. The curative aspect consists of three major categories (i) Aushadhi (drugs) (ii) Various therapeutic procedures including Panchakarma and Surgeryand (iii) Satvavajaya (Methods for Mind control).
- 2.2.4 Practice of Ayurveda as a system of medicine has been recognized under IMCC Act 1970. The education of Ayurveda is regulated by a statutory body Central Council of Indian Medicine (CCIM). Drugs& Cosmetics Act 1940 regulates manufacturing and sales Ayurvedic drugs. During the Samhita period (1000 BC), Ayurveda developed with eight branches or specialties, due to which it iscalledas Ashtanga Ayurveda. Following are the specialties of clinical medicine in Ayurveda: -
 - (1) Kayachikitsa (Internal Medicine)
 - (2) Kaumar Bhritya (Pediatrics)
 - (3) Graha Chikitsa (Psychiatry)
 - (4) Shalakya (Eye, ENT and Dentistry)
 - (5) Shalya Tantra (Surgery)
 - (6) Agada-Tantra (Toxicology)
 - (7) Rasayana (Immuno-modulation and Gerentology)
 - (8) Vajikarna (Science of fertility and healthy progeny)
- 2.2.5 The above eight branches have over the years and specifically during the last 50 years expanded into 22 specialties for post-graduate education as follows:
 - (1) Ayurveda Siddhanta (Fundamental Principles of Ayurveda)

- (2) Ayurveda Samhita
- (3) Rachna Sharira (Anatomy)
- (4) Kriya Sharira (Physiology)
- (5) Dravya Guna Vigyan (Materia Medica and Pharmacology)
- (6) Rasa-Shashtra and Bhaishajya Kalpana (Pharmaceuticals using minerals and metals)
- (7) Kaumar Bhritya Bala Roga (Paediatrics)
- (8) Prasuti-Tantra avum Stri Roga (Obstetrics And Gynaecology)
- (9) Swasth-Vritta (Social and Preventive Medicine)
- (10) Kayachikitsa (Internal Medicine)
- (11) Rog Nidana evum Vikriti Vigyan (Diagnostics and Pathology)
- (12) Shalya Tantra (Samanya) (General Surgery)
- (13) Shalya Tantra Ksar Karma avum Anushastra Karma (Kshara Karma and Para- surgical procedure)
- (14) Shalya Tantra (Asthi, Sandhi)
- (15) Shalakya Tantra Netra Roga
- (16) Shalakya Tantra Shiro-Nasa- Karna Avum Kantha Roga (ENT)
- (17) Shalakya Tantra Danta Avum Mukha Roga (Dentistry)
- (18) Manovigyana avum Manas Roga (Psychiatry)
- (19) Panchakarma
- (20) Agad Tantraavum Vidhi Vaidyaka (Toxicology and Jurisprudence)
- (21) Sangyaharana (Anaesthesiology)
- (22) Chhayaavum Vikiran Vigyan (Radiology)

- **2.2.6** Courses of study for award of Bachelor, Master and Doctorate degrees in Ayurveda are imparted through the various universities of India.
- 2.2.7 Two volumes of Ayurvedic Formulary of India (AFI) containing 636 compound formulations and eight volumes of Ayurvedic Pharmacopoeia of India (API) Part-1containing 600 monographs on single drugs and three volumes of Ayurvedic Pharmacopoeia of India (API) Part-II containing 152 monographs on compound formulations have been published.

2.3 SIDDHA SYSTEM

- 2.3.1 The Siddha System of medicine is one of the ancient systems of medicine in India having its close bedd with Dravidian culture. The term Siddha means achievements and Siddhars are those who have achieved perfection in medicine. Eighteen Siddhars are said to have contributed towards the systematic development of this system and recorded their experiences in Tamil language.
- The Siddha system of Medicine emphasizes on the patient, environment, age, sex, race, habits, mental frame work, habitat, diet, appetite, physical condition, physiological constitution of the diseases for its treatment which is individualistic in nature. Diagnosis of diseases are done through examination of pulse, urine, eyes, study of voice, colour of body, tongue and status of the digestion of individual patient. The system has unique treasure for the conversion of metals and minerals as drugs and many infective diseases are treated with the medicines containing specially processed mercury, silver, arsenic, lead and sulphur without any side effects. The strength of the Siddha system lies in providing very effective therapy in the case of Psoriasis, Rheumatic disorders, Chronic liver disorders, Benign prostate hypertrophy, bleeding piles, peptic ulcer

- including various kinds of Dermatological disorders of non-psoriatic nature.
- 2.3.3 During the last six decades, there has been continuous development in Siddha medical education and this has led to the establishment of the National Institute of Siddha at Chennai as apex Institute having six specialties in post-graduate teaching leading to the award of M.D.(S) Degree. These are Maruthuvam (General Medicine), Sirappu Maruthuvam (Special Medicine), Kuzhanthai Maruthuvam (Paediatrics), Gunapadam (Pharmacology), Noi Nadal (Pathology) and Nanju Nool & Maruthuva Neethinool (Toxicology).
- 2.3.4 For development of focused research in Siddha System of medicine Government has constituted Central Council for Research in Siddha (CCRS), an autonomous body by bifurcating Central Council for Research in Ayurveda and Siddha (CCRAS).

UNANI SYSTEM

- 2.4.1 The Unani System of Medicine originated in Greece and passed through many countries before establishing itself in India during the medieval period. It is based on wellestablished knowledge and practices relating to the promotion of positive health and prevention of disease. The Unani System has grown out of the fusion of traditional knowledge of ancient civilizations like Egypt, Arabia, Iran, China, Syria and India. It emphasizes the use of naturally occurring, mostly herbal, medicines and also uses some medicines of animal, marine and mineral origin. This system of medicine was documented in Al-Qanoon, a medical classics, by Sheikh Bu-Ali Sina (Avicena) (980-1037 AD), in Al-Havi by Razi (850-923 AD) and in many other books written by the Unani physicians.
- 2.4.2 The Unani system is based on the humoral theory i.e. the presence of blood, phlegm, yellow bile and black bile in every person. The

temperament of a person can accordingly be sanguine, phlegmatic, choleric and melancholic depending on the presence and combination of humors. According to Unani theory, the humors and the drugs themselves are assigned temperaments. Any change in quantity and quality of the humors brings about a change in the status of the health of the human body. A proper balance of humors is required for the maintenance of health.

- 2.4.3 The treatment consists of three components, namely, preventive, promotive and curative. Unani system of medicine has been found to be efficacious in many conditions, particularly chronic and degenerative disorders e.g. Rheumatoid Arthritis, Jaundice, Filariasis, Eczema, Sinusitis and Bronchial Asthma etc.
- 2.4.4 For the prevention of disease and promotion of health, the Unani System emphasizes on six essential pre-requisites of life (Asbabe-SittaZarooria) (a) pure air (b) food and beverages (c) physical movement and rest (d) psychic movement and rest (e) sleep and wakefulness and (f) retention of useful materials and evacuation of waste materials from the body.
- 2.4.5 There are four forms of treatment in Unani Medicine Pharmacotherapy, Dietotherapy, Regimen Therapy and Surgery. Regimen therapy (Ilaj bit-Tadbir) is a speciality under which various methods of treatment are used for treating specific and complicated diseases.
- 2.4.6 During the last 50 years, eight Post Graduate specialities have been developed in (i) Kulliyat (Fundamentals of Unani System of Medicine), (ii) Munafeel Aaza (Physiology), (iii) Ilmul Adviya (Pharmacology), (iv) Amraze-Niswan (Gynaecology), (v) Amraze-Atfal (Paediatrics), (vi) Tahafuzzi-wa-SamajiTib (Social and Preventive Medicine,) (vii) Moalejat (Medicine) and (viii) Jarahiyat (Surgery).

2.4.7 Six volumes of National Formulary of Unani Medicine (NFUM) containing 1228 compound formulations and Six volumes of Unani Pharmacopeia of India (UPI) containing 298 monographs on single drugs have been published. Two volumes of Pharmacopeia on compound formulations containing 100 compound drugs have been published.

2.5 HOMOEOPATHY

- 2.5.1 The Physicians from the time of Hippocrates (around 400 B.C.) have observed that certain substances could produce symptoms of a disease in healthy people similar to those of people suffering from the disease. Dr. Christian Friedrich Samuel Hahnemann, a German physician scientifically examined this phenomenon and codified the fundamental principles of Homoeopathy. Homoeopathy was brought into India around 1810 A.D. by European missionaries and received official recognition by a Resolution passed by the Constituent Assembly in 1948 and then by the Parliament.
- 2.5.2 The first principle of Homoeopathy 'Similia Similibus Curentur', says that a medicine which could induce a set of symptoms in healthy human beings would be capable of curing a similar set of symptoms in human beings actually suffering from the disease. The second principle of 'Single Medicine' says that one medicine should be administered at a time to a particular patient during the treatment. The third principle of 'Minimum Dose' states that the bare minimum dose of a drug which would induce a curative action without any adverse effect should be administered. Homoeopathy is based on the assumption that the causation of a disease mainly depends upon the susceptibility or proneness of an individual to the incidence of the particular disease in addition to the action of external agents like bacteria, viruses, etc.

- 2.5.3 Homoeopathy is a method of treating diseases by administering drugs, which have been experimentally proved to possess the power to produce similar symptoms on healthy human beings. Treatment in Homoeopathy, which is holistic in nature, focuses on an individual's response to a specific environment. Homoeopathic medicines are prepared mainly from natural substances, such as plant products, minerals and from animal sources, nosodes & sarcodes etc. Homoeopathic medicines do not have any toxic, poisonous or side effects. Homoeopathic treatment is economical as well and has a very broad public acceptance.
- Homoeopathy has its own areas of strength 2.5.4 in therapeutics and it is particularly useful in treatment for allergies, autoimmune disorders and viral infections. Many surgical, gynaecological and obstetrical and paediatric conditions and ailments affecting the eyes, nose, ear, teeth, skin, sexual organs, etc.are amenable to homoeopathic treatment. Behavioral disorder, neurological problems and metabolic diseases can also be successfully treated by Homoeopathy. Apart from the curative aspects, Homoeopathic medicines are also used in preventive and promotive health care. In recent times, there is an emergence of interest in the use of Homoeopathic medicines in veterinary care, agriculture, dentistry, etc. Homoeopathic medical education has developed in seven specialties in post-graduate teaching, which are Materia Medica, Organon of Medicine, Repertory, Practice of Medicine, Paediatrics, Pharmacy and Psychiatry.

2.6 YOGA

2.6.1 Yoga is essentially spiritual and it is an art and science of healthy living which focuses on bringing harmony between body and mind. The word 'Yoga' has two meanings; the first comes from the root 'Yujir' or 'Union', the second is derived from a different root

- 'yuja' which means 'Samadhi' the highest state of mind and the absolute knowledge. These two are the most important meanings of the word Yoga according to 'Panini', the most well-known Sanskrit grammarian.
- 2.6.2 Yoga is being practiced as part of healthy lifestyle and has become part of our spiritual heritage. In the present era, Yoga is popular world-wide because of its spiritual values, therapeutic credentials, its role in the prevention of diseases, promotion of health and management of lifestyle related disorders. Several clinical studies have lucidly demonstrated the therapeutic potentials of Yoga in the treatment of many lifestyle related or psychosomatic disorders. The specialty of this system is that it can get along with any other systems of health care.
- 2.6.3 The aim of Yoga is complete cessation of all kinds of suffering (sorrow) and its root cause ignorance and is known as Moksha or liberation. The main objectives of Yoga are health, happiness, harmony, spiritual quest, personality development, etc.
- 2.6.4 Yoga is as old as civilization. The first archaeological evidence of existence of Yoga is found in Stone Seals of excavated from Indus Valley. Yoga was special feature of Indus Valley Civilization (3000 BC). Yogic literature has been found in Vedas, Upanishadas, Darshanas, Epics, Puranas, Aagmas, Tantras, etc. Rich sources of Yoga have also been available in medieval, modern and contemporary literature.
- **2.6.5** The Yoga referred in the Vedic and Upanishadic literature has been depicted in three important texts called Prasthanatrayi:
 - Principle Upanishads (Upadesha prasthana)
 - Vedanta Sutra of Badarayana (NyayaPrasthana)
 - Bhagavadgeeta (SadhanaPrasthana)

- These texts further lead to different schools of Yoga like Jnana Yoga; Karma Yoga; Bhakti Yoga; Dhyana Yoga; etc.
- **2.6.6** The most important texts referred in Yoga are as follows:
 - (i) Patanjala Yoga Sutra
 - (ii) Bhagavad Gita
 - (iii) Vasistha Samhita
 - (iv) Hatha Pradipika
 - (v) Gheranda Samhita
 - (vi) Hatha-tattva Kaumudi
 - (vii) Siddha Sidhanta Paddhati
 - (viii) Goraksha Satkam
 - (ix) Shiva Samhita
 - (x) Hatharatnavali
 - (xi) Amanaska Yoga
 - (xii) YogaBija
 - (xii) Yoga Taravali
 - (xiv) Goraksa Paddhati
 - (xv) Siva Svarodaya, etc.
- 2.6.7 However, the classical Yoga which is one of the Shad Darshanas, has been advocated by the great sage Patanjali, who lived around approximately 200 BC. Patanjali wrote a book known as Yoga Sutras, which contains 195 sutras. Patanjali advocates Ashtanga Yoga, which is widely practiced from the ancient times till today, they are:
 - (i) Yama (Self-restraints)
 - (ii) Niyama (Observance)
 - (iii) Asana (Psycho-physical postures)
 - (iv) Pranayama (Control of vital energy breath)
 - (v) Pratyahara (Withdrawal of senses)
 - (vi) Dharana (Concentration)
 - (vii) Dhyana (Meditation)
 - (viii) Samadhi (Absorption or State of liberation)

- **2.6.8** The following are the doctrines and concepts adopted in Yoga Therapy:
 - (i) Doctrine of "Panchakoshas" (five sheaths/bodies) as found in Upanishads.
 - (ii) Doctrine of "Chitta-vrittinirodha", "kriyayoga"and "astangas" as found in Patanjala Yoga Sutras.
 - (iii) Doctrine of various kinds of "shuddhis" found in Patanjala Yoga Suntra and Hathayoga.
 - iv) Doctrine of opening blocked channels of vayus and prana (nadishuddhi), opening of lotuses and chakras, kumbhakapranayamas, muderas and dristis as found in Hatha Yoga and Kundalini Yoga.
 - (v) Working with the mind on the lines of Patanjala Yoga Sutra, Mantra Yoga and Hatha Yoga.
 - (vi) Working on the lines of "Karma-Jnana'Bhakti" from Bhagawadgita.
 - (vii) Certain aspects of Tantra Yoga also get integrated in various Yoga practices.
- **2.6.9** The following Yogic practices are being practiced for prevention and management of diseases:
 - (i) Shatkarma: These are six cleansing techniques in Yoga used to clean the internal organs and systems of the body. These are called as the process of detoxification. Shatkarmas are Neti, Dhouti, Basti, Kapalabhati, Nauli, Trataka.
 - (ii) Yogasana: These are special patterns of body that stabilise the mind through static stretching. Yogasanas are psycho-physical in nature. They play a significant role in toning up the neuromusculo and glandular systems of the body. There are more than 84 asanas mentioned in the classical texts.

- (iii) Pranayama: Pranayama is a practice which helps to regulate vital energies through regulation of breathing.
- (iv) Mudra: These are special gestures/ techniques formed with the combination of Asana and Pranayama and are used in channelization of Prana the vital force.
- (v) Dhyana: Sustain concentration on the object is Dhyana. Dhyana is an integral part of Yoga practice and is beneficial for psychological and spiritual growth and also helps in health promotion.
- 2.6.10 Several leading Yoga Institutions have been engaged in the promotion and propagation of Yoga according to their Guru-Shishya Parampara. Many Institutions, Universities are conducting Certificate, Diploma, Bachelors, Masters and Doctorate degrees courses in various aspects of Yoga.

2.7 NATUROPATHY

- 2.7.1 Naturopathy is a science of health and healing and a drugless therapy based on well-founded philosophy. It has its own concept of health and disease and principles of treatment. Uropathyisasy stem of medicine that advocates harmonious living with constructive principles of Nature on physical, mental, moral and spiritual planes. It has great health promotive and restorative, and disease preventive as well as curative potential.
- 2.7.2 According to Naturopathy the primary cause of disease, barring accidental or surgical injury, is violation of Nature's laws and the effects of violation of Nature's laws are-
 - (i) Lowered vitality;
 - (ii) Abnormal composition of blood and lymph;
 - (iii) Accumulation of morbid matter in the body.

- 2.7.3 The science of Naturopathy teachesus that the disease is Nature's effort to eliminate the morbid matter from the body to restore the health. Hence, we must not suppress the out ward symptoms of disease like fever, cough, loose motionsetc. but perate with Nature in the process of eliminating morbid matter from the body.
- **2.7.4** Some of the basic concepts of Naturopathy are outlined as under:
 - (i) Naturopathy believes in the concept of unity of disease and unity of cure. According to it root cause of all diseases are one that is accumulation of morbid matter in the body and the remedy also is one i.e. elimination of those toxins from the body.
 - (ii) Naturopathy considers bacteria and virus to be secondary cause of disease. The primary cause of disease is accumulation of morbid matter in the body. The microbes survive in the body only when a favourable atmosphere for their growth is established by the accumulation of morbid matter. Hence, the basic cause of disease is morbid matter and microbes are only the secondary cause.
 - (iii) Acute diseases are self-healing efforts of the body. Hence, they are taken as our friends, not enemies. Chronic diseases are outcome of wrong treatment and suppression of the acute diseases.
 - (iv) Human body has remarkable recuperative powers when left alone. Nature is the greatest healer. The human body is a self-healing machine. It is endowed with inherent healing power to prevent itself from disease and regain health when fallen ill.
 - In Naturopathy the patient is at the center of intervention and treatment,

- cure of disease is effected automatically with the increase in vitality and detoxification of body.
- (vi) Naturopathy believes in holistic treatment. It not only treats the body as a whole, instead of specific organs but also take into account intervention at mental, moral and spiritual planes.
- (vii) Naturopathy does not use medicines. According to it, "Food is Medicine".
- (viii) Naturopathy accepts prayers also as a modality of treatment. According to Gandhiji "Rama Nama is the best Natural Treatment" meaning there by that prayer according to one's own faith is an important part of treatment.
- 2.7.5 Some of the important therapies/therapeutic modalities of Naturopathy which are employed not only for curative purposes but also for prevention of diseases and promotion of health are as under-
 - (i) Upvas Chikitsa (Fasting Therapy)
 - (ii) Aahar Chikitsa (Diet Therapy)
 - (iii) Mitti Chikitsa (Mud Therapy)
 - (iii) Jala Chikitsa (Hydrotherapy)

- (iv) Malish Chikitsa (Massage Therapy)
- (v) Surya Kiran Chikitsa (Heliotherapy)
- (vii) Vayu Chikitsa (Air Therapy)
- (viii) Yoga Chikitsa (Yoga Therapy)

2.8 SOWA-RIGPA

2.8.1 Sowa-Rigpa is among the oldest surviving health traditions of the world with a living history of more than 2500 years. It has been in vogue and practised in Himalayan regions throughoutparticularly in Leh and Laddakh (J&K), Himachal Pradesh, Arunachal Pradesh, Sikkim, Darjeeling etc. Sowa-Rigpa is effective in managing chronic diseases like Asthma, Bronchitis, Arthritis, etc. The basic theory of Sowa-Rigpa is explained in terms of (i)The body and the mind as the locus of treatment; (ii) Antidote, i.e. the treatment; (iii) The method of treatment through antidote;(iv)Medicines that cure the disease and lastly (v) Pharmacology. Sowa- Rigpa emphasizes the importance of the five cosmological physical elements in the formation of the human body, the nature of disorders and the remedial measures.

Organizational Set Up

- to Government is headed by a Secretary to Government of India. The Secretary is assisted by one Additional Secretary & Financial Advisor to advise on financial matters, three Joint Secretaries, one Chief Executive Officer of National Medicinal Plants Board, seven Directors/Deputy Secretaries, seven Under Secretaries and technical officers like Advisors and Joint/Deputy/Assistant Advisors of Ayurveda, Siddha, Unani and Homoeopathy. The organization chart of the Department is available at **Annexure.**
- 3.1.1 The Department has, over the years, developed a broad institutional framework to carry out the activities in the field of AYUSH. The institutional framework consists of:

3.1.1.1 STATUTORY REGULATORY BODIES

- Central Council of Indian Medicine (CCIM).
- Central Council of Homoeopathy (CCH).

3.1.1.2 APEX RESEARCH BODIES

- Central Council for Research in Ayurvedic Sciences (CCRAS), New Delhi
- Central Council for Research in Unani Medicine (CCRUM), New Delhi
- Central Council for Research in Homoeopathy (CCRH), New Delhi
- Central Council for Research in Yoga and Naturopathy (CCRYN), New Delhi

Central Council for Research in Siddha (CCRS), Chennai

3.1.1.3 APEX EDUCATIONAL INSTITUTIONS

- National Institute of Ayurveda (NIA), Jaipur
- National Institute of Homoeopathy (NIH), Kolkata
- National Institute of Naturopathy (NIN),
 Pune
- National Institute of Unani Medicine (NIUM), Bangalore
- Institute of Post Graduate Teaching and Research in Ayurveda (IPGTRA), Jamnagar (aided by the Department)
- Morarji Desai National Institute of Yoga (MDNIY), New Delhi
- National Institute of Siddha (NIS), Chennai
- Rashtriya Ayurveda Vidyapeeth (RAV), New Delhi.
- All India Institute of Ayurveda, New Delhi (being developed).
- North Eastern Institute of Ayurveda and Homoeopathy, Shillong (being developed).
- North Eastern Institute of Folk Medicine, Passighat (being developed).

3.1.1.4 Apex Laboratories and Pharmacopoeia Commission

 Pharmacopoeial Laboratory for Indian Medicine (PLIM), Ghaziabad.

- Homoeopathic Pharmacopoeial Laboratory (HPL), Ghaziabad.
- Pharmacopoeia Commission for Indian Medicine (PCIM), Ghaziabad.

3.1.1.5 Public Sector Undertakings

 Indian Medicines Pharmaceutical Corporation Ltd. (IMPCL)

3.1.1.6 National Medicinal Plants Board (NMPB)

3.1.1.7 Pharmacopoeia Committees

Four different Pharmacopoeia Committees, one each for Ayurveda, Siddha, Unani, and Homoeopathy, are in place to oversee and steer the preparation of pharmacopoeias and formularies of drugs. These committees have been brought under the ambit of Pharmacopoeia Commission, which will function as an autonomous body under the Societies Registration Act.

3.1.1.8 Drug Control Cell in the Department of AYUSH

A Drug Control Cell (AYUSH) is working in the Department to deal with the matters pertaining to Drug Quality Control and regulation of Ayurveda, Siddha Unani and Homoeopathic drugs under the provision of Drugs and Cosmetics Act, 1940 and Rules there under.

- 3.1.1.9 Information, Education and Communication (IEC) Cell with a Facilitation Centre is functioning in the Department.
- **3.1.1.10** The Department has an **Education Policy Section** to deal with the matters related to grant of Central Government permission for opening of new colleges, increasing admission capacity and starting new or higher courses of study in Ayurveda, Siddha, Unani Tibb and Homoeopathy.

Human Resource Development

4.1 CENTRAL COUNCIL OF INDIAN MEDICINE (CCIM)

4.1.1 INTRODUCTION

The Central Council of Indian Medicine is a Statutory Body under the Indian Medicine Central Council (IMCC) Act, 1970. The Central Council of Indian Medicine with the previous sanction of the Central Government, as required under Section 36 of the Indian Medicine Central Council Act, 1970, and after obtaining the comments of the State Government as required under section 22 of the said Act, prescribes courses for Under-graduate and Post-graduate education in Ayurved, Unani and Siddha. The main objects of the Central Council are to regulate the education and practice and the matters related thereto in Indian Systems of Medicine.

4.1.2 ACHIEVEMENTS

- During the year 2013-14, 262 Ayurveda, 42 Unani and 09 Siddha Colleges have been visited under section 13C of IMCC Act, 1970 for assessing the compliance to the minimum standard requirements of infrastructure and teaching-training facilities.
- Recommendations in respect of 103
 Ayurveda and 08 Unani applications
 under Section 13A and 262 Ayurveda,
 42 Unani and 09 Siddha Colleges under
 Section 13 C of the IMCC Act, 1970 have
 been sent to Central Government.
- The Central Council prescribed/ amended 07 Regulations during the year 2013-14.

- During the year 2013-14, Syllabus for Final Year P.G. Course (Ayurved), Second Year UG Course (Ayurved), First year UG Course (Unani) and First Year UG Course (Siddha) have been revised and finalized.
- Central Register of the practitioners of following states for the period mentioned against their names has been notified in Gazette of India Part III, Section IV:-

Sl. No.	Name of State	Period
1.	Punjab	01.04.2010 to 31.03.2013
2.	Bihar	01.04.2011 to 31.03.2013
3.	Madhya Pradesh	01.04.2010 to 03.03.2011
4.	Delhi	Aug, 2010 to March, 2013
5.	Goa	01.04.2009 to 31.03.2010 and 01.04.2011 to 31.03.2013
6.	Chhattisgarh	01.04.2011 to 31.03.2012
7.	Uttar Pradesh	01.04.010 to 31.03.2012
8.	Jammu & Kashmir	01.04.2010 to 31.03.2013

- 577 enrollment certificates issued to practitioners of Ayurveda, Unani and Siddha whose names were included in Central Register of Indian Medicine based on registration with State Board/ Council and 05 direct registrations have been issued to Ayurveda, Unani and Siddha graduates of those States where State Board/Council does not exist.
- Direct registration granted during the period December 2011 to December 2013 notified in Gazette of India.

 Following qualification have been included in the Second Schedule to the IMCC Act, 1970:-

1	2	3	4
Guru Ravidas Ayurved University Punjab, Hoshiarpur	Ayurvedacharya (Bachelor of Ayurvedic Medicine &Surgery)	BAMS	From 2012-2013

4.1.3 BUDGET

(Rs. in Crore)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	1.10	2.00	3.10
Revised Estimate 2013-14	1.10	1.92	3.02
Expenditure upto March 2014	0.83	0.30	1.13

4.2 CENTRAL COUNCIL OF HOMEOEOPATHY (CCH)

4.2.1 INTRODUCTION

The Central Council of Homoeopathy is a statutory body constituted under the Homoeopathy Central Council Act, 1973, which provides for the maintenance of a Central Register of Homoeopathy and for other matters connected therewith.

4.2.2 ACHIEVEMENTS

- 633 Direct Registration Certificates issued as well as additional qualification recorded in respect of 16 practitioners.
- 167 Names of part-I & 10 Names of Part-II of 1993 have been published in the Gazette on 2.11.2013 and 18.5.2013, for restoration in central Register.
- 444 names of 1993 Part-I & 10 names of 1993 Part-II sent to Govt. Press on 24.12.2013 for publication in Central Register as restored names.

- 358 Colleges/Institute and 9 examination centres were inspected.
- The recognition of following qualifications in Homoeopathy have been recommended to the Department.
- (i) BHMS Degree qualification awarded by Dr. Hari Singh Gour Vishwavidyalaya, Sagar.
- (ii) BHMS Degree qualification awarded by The West Bengal University of Health Sciences, Kolkata.
- (iii) BHMS Degree qualification awarded by Himachal Pradesh University, Shimla.
- (iv) BHMS Degree qualification awarded by Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur.
- (v) BHMS Degree qualification awarded by Devi Ahilya University, Indore.
- (vi) BHMS Degree qualification awarded by Guru Ravidas Ayurved University, Hoshiarpur.
- (vii) BHMS Degree qualification awarded by Maharishi Dayananad University, Rohtak.
- (viii) M.D. (Hom) Degree qualification in speciality subjects Practice of Medicine & Organon of Medicine awarded by University of Delhi, Delhi.
- (ix) M.D. (Hom) Degree qualification in speciality subjects Organon of Medicine, Materia Medica, Repertory, Paediatrics, Psychiatry, Pharmacy, Practice of Medicine awarded by B.B.A. Bihar University, Muzaffarpur.
- (x) M.D.(Hom) Degree qualification in speciality subjects Materia Medica, Organon of Medicine & Homoeopathic Philosophy and Repertory awarded by Guru Ravidas Ayurved University, Hoshiarpur.

- Recommendation sent to Central Govt. for grant of permission to start New Homoeopathic Medical Colleges for BHMS Degree Course:-
- (i) S.V.S. Homoeopathic Medical College, Tamil Nadu.
- (ii) Ulhas Patil Homoeopathic Medical College, Jalgaon.
- (iii) A.H. Medical College, Begusarai (Bihar).
- (iv) Jyoti Vidyapeeth Woman's Homoeopathic Medical College, Rajasthan.
- (v) Devi Ahilya Homoeopathic Medical College, Indore.
- Recommendation sent to Central Government for recognition of new higher courses in respect of following colleges.
- (i) Dr. D.Y. Patil Homoeopathic Medical College, Pune to start M.D. (Hom) Courses in Materia Medica, Organon of Medicine and Repertory with intake capacity of 3 seats each.
- (ii) Govt. Homoeopathic Medical College, Bangalore to start M.D. (Hom) Course in Materia Medica, Organon of Medicine, Repertory, Practice of Medicine & Repertory subjects with intake capacity of 05 students in each subjects.
- (iii) D.S. Homoeopathic Medical College, Pune to start M.D. (Hom) Course in Practice of Medicine with intake capacity of 3 seats.
- (iv) White Memorial Homoeopathic Medical College, Kanyakumari to start M.D. (Hom) Course in Repertory, Organon of Medicine and Materia Medica with 03 intake capacity in each subjects.
- (v) Motiwala Homoeopathic Medical College, Nashik to start M.D. (Hom) Course in Materia Medica and Organon of Medicine with intake capacity of 3

- seats in each subjects.
- (vi) H.K.E.'s Homoeopathic Medical College, Gulbarga to start M.D. (Hom) Course in Practice of Medicine with intake capacity of 03 seats in each subjects.
- Central Council has recommended for increase in the intake capacity in respect of following Colleges to the Central Government.
- (i) Dr. D.Y. Patil Homoeopathic Medical College, Pune for increase of intake capacity in BHMS Course from 75 to 100.
- (ii) Govt. Homoeopathic Medical College, Bangalore for increase of intake capacity in BHMS Course from 40 to 100.
- Six meetings of Executive Committee, nine meetings of Education Committee, five meetings of P.G. Education Committee, four meetings of Office Functioning Review Committees, three meetings of Registration Committees, two meetings each of the Committees for Literature, Regulation, Excellence in Education, Finance, Editorial Board, One meeting each of the Committees for Liasion Committee, Hindi Rajbhasha and two meetings of the General Body of CCH were held.
- The CCH organized the following workshops during 2013-14
- (i) Workshop on Homoeopathy Central Council (Minimum Standards Requirement of Homoeopathic Colleges and attached Hospitals) Regulations, 2013 was held on 22.04.2013.
- (ii) One workshop on the Subject of Organon of Medicine for the teachers of Homoeopathic Medical Colleges was held from 22nd to 24th July, 2013.
- (iii) One Workshop on Homoeopathic Medical Education Technology Modules

- was held on 26th& 27th August, 2013 at Sarada Krishna Homoeopathic Medical College, Tamil Nadu.
- (iv) (Workshop on Homoeopathic Medical Education Technology Module-I was held on 24th& 25th January, 2014 at Bhartesh Homoeopathic Medical College, Belgaum, Karnataka.
- (v) Workshop for Registrars of All State Boards/Councils of Homoeopathy was held on 30.1.2014.
- (vi) Workshop on the subject of Materia Medica for teachers of Homoeopathic Medical Colleges (of Himachal Pradesh, Chandigarh, Punjab, Haryana, Rajasthan, Delhi, Uttar Pradesh, Bihar, West Bengal, Jharkhand, Assam & Uttrakhand) was held on 24th& 25th March, 2014 at Udaipur.
- (vii) Workshop on R.T.I. Act for Officers and staff was held on 25.3.2014.
- (viii) C.C.H. sponsored resource persons for the session concerning "Homoeopathic Education Technology" in XXIII All India Congress held under aegis of Indian Institute of Homoeopathic Physician (IIHP) at Hyderabad from 23rd to 24th Feb., 2014.

4.2.3 BUDGET

(Rs. in crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	0.20	3.51	3.71
Revised Estimate 2013-14	0.20	3.51	3.71
Expenditure upto March 2014	0.19	2.88	3.07

4.3 EDUCATION POLICY

4.3.1 EDUCATION POLICY-AYURVEDA, SIDDHA AND UNANI (ASU)

4.3.1.1 After amendment in the Indian Medicine Central Council (IMCC) Act, 1970 in the year

2003, the prior permission of the Central Government has become mandatory for establishing new colleges, increase in admission capacity in any course of study/ training and starting a higher or new course of study in existing courses in Ayurveda, Siddha and Unani (ASU) colleges and also for continuation of the existing ASU colleges. To implement the provisions under Section 13A of the amended IMCC Act, the Central Council of Indian Medicine (CCIM) had notified the regulations on 15.03.2004 "The Establishment of New Medical College, Opening of New or Higher Course of Study or Training and Increase of Admission Capacity by a Medical College Regulations, 2003". To implement the provisions under Section 13C of the amended IMCC Act for maintaining a uniform standard of education in all colleges, the CCIM notified on 06.10.2006 the regulations "The Indian Medicine Central Council (Permission to Existing Medical Colleges) Regulations, 2006".

- **4.3.1.2** During the academic session 2013-14, the Central Council of Indian Medicine (CCIM) had notified the following regulations:
 - (i) The Indian Medicine Central Council (Minimum Standard Requirements of Ayurveda Colleges and attached Hospitals) Amendment Regulations, 2013 on 22.04.2013.
 - (ii) The Indian Medicine Central Council (Minimum Standards of Education in Indian Medicine) (Amendment) Regulations, 2013 for Ayurveda on 22.05.2013.
 - (iii) The Indian Medicine Central Council (Minimum Standards of Education in Indian Medicine) Amendment Regulations, 2013 for Unani on 24.05.2013.
 - (iv) The Indian Medicine Central Council (Minimum Standards of Education

- in Indian Medicine) Amendment Regulations, 2013 for Siddha on 02.05.2013.
- (v) The Indian Medicine Central Council (Post-Graduate Diploma Course) Amendment Regulations, 2013 for Ayurveda on 22.05.2013.
- (vi) The Establishment of New Medical College, Opening of New or Higher Course of Study or Training and Increase of Admission Capacity by a Medical College (Amendment) Regulations, 2013 on 28.03.2014.
- **4.3.1.3** During the academic session 2013-14, following permissions have been granted under section 13A of the Indian Medicine Central Council (IMCC) Act, 1970 -
 - to open one new Ayurveda and one new Unani college to start new BAMS and BUMS course with 50 seats in each

- course,
- (ii) to increase the admission capacity of 60 UG seats & 44 PG seats in the existing 10 Ayurveda colleges, 10 UG seats in existing 01 Siddha college and 10 UG seats & 02 PG seats in existing 01 Unani College and
- (iii) to open new post-graduate courses in 63 Subjects with 299 seats in existing 19 Ayurveda colleges.
- 4.3.1.4 On the basis of recommendations and report of the CCIM and observations/ recommendations of the Hearing Committee as required, the conditional permission was accorded for the academic session 2013-14 to 213 Ayurveda colleges, 41 Unani colleges and 08 Siddha colleges. A statement indicating total number of colleges and the colleges for which permission was granted is given below:

Conditional Permission granted under Section 13A/C of the IMCC Act, 1970 to the Ayurveda, Siddha and Unani (ASU) Colleges for the academic session 2013-14

Sl.	Discipline	Government Colleges			P	Private Colleges		T	otal Colleges	
No.		Permitted	Not Permitted	TOTAL	Permitted	Not Permitted	TOTAL	Permitted	Not Permitted	TOTAL
1	Ayurveda colleges	47	09	56	166	40	206	213	49	262
2	Siddha colleges	03	00	03	05	01	06	08	01	09
3	Unani colleges	10	00	10	31	01	32	41	01	42
4	Total ASU Colleges:	60	09	69	202	42	244	262	51	313

4.3.2 EDUCATION POLICY- HOMOEOPATHY

- **4.3.2.1** After amendment of Homoeopathy Central Council (HCC) Act, 1973, in the year 2002, the prior permission of the Central Government has become mandatory for establishing new colleges, increase in admission capacity in any course of study/ training and starting a higher or new course of study in existing colleges of Homoeopathy. To implement the provisions under section 12A of the amended HCC Act, the Central Council of Homoeopathy (CCH) had notified the regulations namely, The Establishment of New Medical College, (Opening of New or Higher Course of Study or Training and Increase of Admission Capacity by a Medical College) Regulations, 2011, on 30.09.2011.
- **4.3.2.2** As per provisions of section 13 of HCC Act, 1973, the Central Government after receiving the request of the University and recommendation of CCH, has included the medical qualifications awarded by the following Universities in Second Schedule of HCC Act, 1973, during the period 2013-14:-
 - (i) Dr. Hari Singh Gour University, Madhya Pradesh,
 - (ii) West Bengal University of Health Sciences, West Bengal,
 - (iii) Guru Ravidas Ayurved University, Hoshiarpur,
 - (iv) Babasaheb Bhimrao Ambedkar Univeristy, Muzaffarpur,
 - (v) Dr.Sarvepalli Radhakrishna Ayurved University, Jodhpur,
 - (vi) Maharashtra University of Health Sciences, Nashik,
 - (vii) Vinoba Bhave University, Hazaribag,
 - (viii) Kumaun University, Nainital,
 - (ix) University of Delhi,
 - (x) Devi Ahilya University, Indore,
 - (xi) Himachal Pradesh University, Shimla
 - (xii) Maharshi Dayanand University, Rohtak.

4.3.2.3 During the academic session 2013-14, all existing colleges were granted general amnesty for non-enforcement of the new regulations, namely, HCC (MSR) Regulations, 2013, as the said regulations have come into force on 8th March, 2013 only, in order to give the colleges sufficient time to fulfill the norms in total.

4.4. CENTRALLY SPONSORED SCHEME FOR DEVELOPMENT AND UPGRADATION OF AYUSH INSTITUTIONS/COLLEGES

4.4.1 INTRODUCTION

The Centrally Sponsored Scheme for Development of AYUSH Institutions is under implementation for assisting Government and Government aided colleges to upgrade their infrastructure and facilities with the objective of bridging the critical gaps observed in compliance of minimum standards/norms of Central Council of Indian Medicine (CCIM)/Central Council of Homoeopathy (CCH).

4.4.2 PROVISION OF SCHEME

The Scheme has following components:-

- (i) Infrastructural development of AYUSH Under Graduate/Post Graduate Institutions. The Scheme provides for grant of financial assistance for Under Graduate Institutions up to Rs.2.00 crore and for Post Graduate Institution Rs.3.00 crore for the Plan period to be released in two installments.
- (ii) Assistance for add-on post graduate pharmacy and para-medical courses in existing AYUSH Institutions. The Scheme provides for grant of financial assistance up to Rs.3.00 crore.
- (iii) Development of Model AYUSH Institutions/Centre of Advanced studies. The Scheme provides for grant of financial assistance up to Rs.5.00 crore for the Plan period to be released in two installments.

- (iv) One time assistance on 50:50 matching share basis for opening of new Ayurveda, Siddha, Unani and Homoeopathy Institutions/AYUSH Universities in States not having such Institutions upto Rs.10.00 crore.
- (v) Assistance to private, not-profit making Institutions. The Scheme provides for grant of Interest free loan to eligible Institutions.

4.4.3 ACHIEVEMENTS

The financial assistance in the form of Grants-in-aid was given to 8 educational institutions during the year 2011-12. The assistance given under the Scheme is meant for facilitating improvement in the infrastructure of the colleges and attached hospitals and thereby improving quality of education and healthcare provided through these Institutions. Due to pending Utilisation Certificate against releases made during past years under the Scheme grant could not be release in 2013-14.

4.4.4 BUDGET

(Rs. in crores)

Head	Plan	Total
Budget Estimate 2013-14	50.00	50.00
Revised Estimate 2013-14	0.00	0.00
Expenditure upto March 2014	0.00	0.00

4.5 CENTRAL SECTOR SCHEME OF CONTINUING MEDICAL EDUCATION (CME) FOR TEACHERS, DOCTORS, EXPOSURE VISITS AND OTHER HRD TRAINING PROGRAMS FOR AYUSH PERSONNEL

4.5.1 OBJECTIVES:

(i) To encourage AYUSH professionals to undergo need-based professional orientation and professional skill development in an organized manner.

- (ii) To update the professional knowledge of teaching material and clinical care to teachers and doctors respectively.
- (iii) To impart good teaching practices and teaching methodology to teachers for adequate training of students.
- (iv) To encourage the use of Information technology and web-based education programmes for widespread dissemination of AYUSH developments and updates.
- (v) To train doctors in good clinical practices and emerging trends of health care and scientific outcomes for keeping up the standards of health care delivery.
- (vi) To provide information to doctors on professional journals to keep them professionally updated.
- (vii) To encourage AYUSH paramedics and health workers to undergo periodical training for improving health care services in hospitals and dispensaries.
- (viii) To arrange need-based management training programmes to administrators of AYUSH institutions and hospitals on health aspects for delivering quality services.
- (ix) To update regarding R & D activities in AYUSH systems.
- (x) To apprise regarding new Acts / notifications and other information addressing regulatory issues in AYUSH systems.
- (xi) To highlight the areas of research and avenues for collaborative activities.

4.5.2 SCHEME COMPONENTS

(i) CME programmes & Exposure Visits

 6-day subject-/specialty-specific CME programme for AYUSH teachers.

- 6-day introductory programme of AYUSH systems for allopathic and foreign doctors/students.
- 6-day specialized training for AYUSH paramedics/health workers.
- 3-day/5-day Management training to AYUSH administrators/heads of departments/institutions.

(ii) Continuing Medical Education (CME) Programmes & exposure visits for AYUSH doctors.

- Theme-specific six-day/three-day CME programme for AYUSH practitioners at district and sub-district levels.
- Six-day exposure visit cum CME programme for AYUSH doctors at specialized centres of best & innovative practices.

(iii) Web-based educational programmes

- Preparation of subject-/specialtyspecific AYUSH modules/CDs/DVDs for wider dissemination through webbased training programmes.
- Preparation, launch and running of web-based journal.

(iv) Preparation of Peer Reviewed Journals in CDs/DVDs or Making available the lectures of CMEs in CDs/DVDs in AYUSH sector:

- Preparation of peer-review journals in CDs/DVDs for up-to-date education and research developments in AYUSH sector for upgradation of professional knowledge of professionals.
- Preparation of CDs/DVDs on lectures delivered at various CME programmes to facilitate distance learning of AYUSH for wider dissemination, and upgradation of professional knowledge of practitioners.

- (v) Organizations having domain knowledge like the National Institutes viz., Rashtriya Ayurved Vidyapeeth and others and universities/deemed universities and reputed organisations will be supported for the benefit of AYUSH fraternity for the following:
 - To develop training material, courses, modules, CDs and structured programs;
 - To design and develop innovative CME courses for AYUSH practitioners;
 - To develop IT interface (software) for innovative CME courses;
 - To establish a special cell in Health/ AYUSH universities for registration of AYUSH & IT organizations and to coordinate the deputation of AYUSH teachers for training programs.
 - To provide exposure of best practices in clinical and hospital management areas to AYUSH teachers & practitioners.
 - To conduct innovative short term training program for teachers at reputed AYUSH institutions.

(vi) National and Regional Level Workshops/ Conferences for CME:

At least two National level and two Regional level workshops / conferences can be organized in a year by reputed organizations/Centres of Excellence identified by Department of AYUSH.

4.5.3 FINANCIAL ASSISTANCE:

- Rs. 3.75 lakhs for 6-day programme
- Rs. 2.95 lakhs for 3-day programme
- Rs. 2.75 lakhs for 6-day programme (Paramedics)
- Other programmes as per the recommendation of Expert Committee and approval of Screening Committee

 T.A, D.A, Accommodation, Food, Training Material etc to participants will be provided to participant doctors/ faculty.

4.5.4 ACHIEVEMENTS AS ON 31ST MARCH 2014:

Funds to the tune of Rs. 117.53 lakhs were released for various institutions to conduct 23 CMEs for teachers, 4 CMEs for doctors(6-day), 5 CMEs for doctors(3-day), 1 CME for Nurses (6-day) and 2 OTP in different AYUSH institutions to benefit 875 AYUSH personnel upto 31st March, 2014. A budget

of Rs. 400.00 lakhs was allocated for CME programs for 2013-14.

4.5.5 BUDGET

(Rs. in crores)

Head	Plan	Total
Budget Estimate 2013-14	4.00	4.00
Revised Estimate 2013-14	2.25	2.25
Expenditure upto March 2014	1.18	1.18

AYUSH Services

5.1 INTRODUCTION

5.1.1 Providing cost effective AYUSH services, with a universal access is one of the strategies to improve the quality and outreach of Healthcare Services. Under Centrally Sponsored Scheme for Development of AYUSH Hospitals and Dispensaries, Grantin-Aid is being provided to the States for co-location of AYUSH facilities at Primary Health Centers (PHCs), Community Health Centers (CHCs) and District Hospitals (DHs) as well as for up-gradation of stand-alone AYUSH Hospitals and Dispensaries.

5.2 ACHIEVEMENTS

- 5.2.1 In 2013-14, financial assistance provided to the States/ UT's under Centrally Sponsored Scheme for Development of AYUSH Hospitals & Dispensaries is as under:
- a) Co-location of AYUSH facilities at Primary Health Centres (PHCs), Community Health Centres (CHCs) and District Hospital (DHs):

Costs	Number of PHCs	Number of CHCs	Number of District Hospitals	Total units covered
Recurring	21	7	2	30
Non- recurring	20	4	2	26

b) Upgradation of AYUSH Hospitals:

Costs	Number of AYUSH Hospital
Recurring	1
Non-recurring	0

c) Upgradation of AYUSH Dispensaries:

Costs	Number of AYUSH Dispensaries	
Recurring	2	
Non-recurring	0	

5.3 BUDGET

(Rs. in crores)

Head	Plan	Total
Budget Estimate 2013-14	240.0	240.0
Revised Estimate 2013-14	121.69	121.69
Expenditure upto March 2014	0.98	0.98

Note: Under the Centrally Sponsored Scheme for Development of AYUSH Hospitals & Dispensaries, releases to the State Governments were significantly reduced because:

- (i) The State Governments could not liquidate fully all pending Utilization Certificates as required by the D/O Expenditure O.M. dated 14 Nov. 2012 although the department made its best efforts and liquidated more Utilization Certificates than previous years (Rs. 380 Crores in 2013-14 as against Rs. 226 Crores & Rs. 93.46 Crores liquidated in 2012-13 and 2011-12 respectively.
- (ii) The Proposal of the department for waiving of condition of total liquidation of Utilization Certificates for release of Grant even for medicines and salaries was not agreed to by the D/O Expenditure, whereas it had granted such waivers in previous years despite lesser liquidation of Utilization Certificates.

National Institute under Department of AYUSH

6.1 NATIONAL INSTITUTE OF AYURVEDA, JAIPUR

6.1.1 INTRODUCTION

The National Institute of Ayurveda was established on 7.2.1976 by the Government of India to develop high standards of teaching, training and research in all aspects of Ayurvedic System of Medicine with a scientific approach.

The Institute is engaged in Teaching, Clinical and Research at Under-Graduate, Post-Graduate and Ph.D. level and is affiliated to Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur for academic and examination purposes and follows the Syllabus and Curriculum prescribed by the Central Council of Indian Medicine as adopted by the University.

The Institute has a Governing Body, consisting of 16 Members and Presided over by Hon'ble Union Minister of Health and Family Welfare. There is a Standing Finance Committee, chaired by Joint Secretary, Department of AYUSH, Government of India. There is also an Institutional Ethics Committee to govern, regulate and review various research proposals in the Institute. This is constituted on the Guidelines stipulated by ICMR in its Ethical Guidelines for Biomedical Research on Human Subjects.

6.1.2 TEACHING ACTIVITIES:

The Institute is conducting Under-Graduate Course of BAMS with 92 Seats. At the time of formation of NIA, only one Subject, Kayachikitsa, was available for Post-Graduation. Now, it has 14 Specialties

viz. Kayachikitsa, Dravya Guna Vigyana, Kaumarbhritya, Panchakarma, Rasa Shastra and Bhaishajya Kalpana, Roga & Vikriti Vigyan, Maulik Siddhanta (Samhita), Shalya Tantra, Sharir Kriya, Sharir Rachana, Swastha Vritta, Shalakya Tantra, Prasuti-Stri Roga and Agad Tantra for Post-Graduation "Ayurveda Vachaspati"/"Ayurved Dhanwantari" (MD/ MS Ayurveda) with 104 seats spread over in the these subjects and all the 14 Subjects are also available for Regular Fellowship Programs leading to Ph.D.(Ay.) with 2 seats each. The Institute also conducts a Diploma Course in Ayurveda Nursing and Pharmacy of two and a half years duration with an intake capacity of 30 seats annually. Reservation to SC(15%), ST(7½%), OBC(27%), PH(3%) is also available for UG, PG and Diploma Courses.

The Institute has 3 seats available in PG Course for candidates from BIMSTEC Countries. Similarly 1 Seat is also available for candidates from Sri Lanka for Regular Fellowship Program Ph.D.(Ayurveda). Candidates from Sri Lanka, Nepal and Bangladesh are admitted every year since the last more than 10 years. 1 Seat for foreign national is also available in the Graduate Course.

During the year, 100 studentshave been admitted to the PG Course, 91 to the UG Course, 10 to the regular Ph.D. Course and 21 to the Diploma Course of AYUSH Nursing and Pharmacy.

6.1.3 PATIENT CARE ACTIVITES:

6.1.3.1 Hospital Activities: The Institute has a full-fledged 300 bedded Hospital with

all infrastructures, staff etc. in its IPD, OPD, Laboratories, etc. and also manages Specialty Clinics like Cardio Vascular Unit, Musculo-Skeletal Diseases Unit, Eye Clinic, a well-equipped Panchakarma Unit, Dental Unit, Clinics for Diabetes, Geriatric, Vitiligo, Child Mental Health(Bio-Neuro Feed Lab.), Yoga, a Centre of Excellence for Neurological Disorders and Musculoskeletal Diseases, etc. Various Para-Surgical Procedures like Ksharasutra, Jalokavacharana, Agnikarma, Siravedha, Dhantotpatana, Vranopachara etc. are also conducted. It has also a Satellite Hospital providing patient care services of free Consultation and Dispensing of Medicines.

- During the year, the total number of patients attended the OPD was 2,31,266.
- During the year, 80,178 patients were admitted in IPD and provided treatment etc.
- **6.1.3.2 Mobile Camps in SC and ST Areas under TSP-SCP Scheme:** The Institute is organizing Medical Camps to provide free medical facility through its Mobile Clinical Unit in SC and ST inhabited areas of various Districts of Rajasthan. Under this Scheme, 33 Camps were organized in various Villages and Settlements in the SC and ST inhabited Districts of Rajasthan like Udaipur, Banswara, Dungarpur, Sirohi, Jaisalmer, Ajmer, Sikar. 31,697patients were benefited from this scheme.

6.1.4 VARIOUS UNITS ENGAGED IN PATIENT CARE ACTIVITIES

- **6.1.4.1 Centre of Excellence for Musculoskeletal Disorders:** The Centre of Excellence for Musculoskeletal Disorders in Collaboration with Vaidyaratnam Oushadhasala, Thrissur has been started.
- **6.1.4.2 Bio-Feedback and Neuro-Feedback Lab.:**There is Bio-Feedback and Neuro-Feedback Lab. in the Arogyashala Hospital of NIA for

- diagnosis and Management of Stress and Memory related disorder in Children.
- **6.1.4.3 Neuro-Muscular Care Unit:** This Unit caters to the disease of Neuro-Muscular System.
- **6.1.4.4 Primary Emergency Care Unit:** There is a Primary Emergency Care Unit functioning round the clock at the main entrance of the IPD for in-house emergency. A number of Ayurvedic Drugs along with life saving drugs, Oxygen and other apparatus are kept in readiness in this Unit. Patients suffering from COAD (Chronic Obstructive Airway Disease), Diabetes Mellitus, Hypertension, Gastro-Enterities, Diarrhea, Dehydration, Haemmorrhage, Trauma, Retention Urine, etc. are treated. During the year under report, 1292 Patients suffering from COAD (Chronic Obstructive Airway Disease), Diabetes Mellitus, Hypertension, Gastroenteritis, Diarrhea, Dehydration, Haemmorrhage, Trauma, Urine Retention, etc. were treated.
- 6.1.4.5 Speciality Clinic For Pre-Diabetes,
 Diabetes And Metabolism Syndrome: A
 Speciality Clinic for Pre-Diabetes, Diabetes
 and Metabolism Syndrome was launched for
 providing consultation on preventive and
 promotive aspects of diabetes, management
 and treatment of patients. Medicines
 specially prepared for diabetes of various
 stages are also dispensed.
- 6.1.4.6 Uroflowmetry Laboratory: The Institute has launched Uroflowmetry Laboratory to calculate the flow rate of urine over time and to provide important information about the condition of lower urinary tract. This will also be useful to diagnose the Obstructive Uropathy disorders and Prostatic Enlargement. This facility is absolutely free for IPD Patients.
- 6.1.4.7 OT in Shalakaya Tantra: A separate Operation Theatre with latest instruments and equipments for managing various operations was launched for the patients of Department of Shalakya Tantra.

- 6.1.4.8 Panchakarma Unit: This Institute has a separate fully equipped Panchakarma Hospital which has gained popularity not only in the City but outside also. Various Panchakarma Therapies like Snehana, Swedana, Vamana, Virechana, Anuvasana Basti, Asthapana Basti& Nasya Karma etc. are being conducted in the Unit.
- 6.1.4.9 Panchakarma Therapies extended to City Hospital: Various Panchakarma Therapies have also been extended to the City Hospital located at Kishanpole Bazar, 4 kilometers away from the Main Campus. This will facilitate Panchakarma Treatment to the Patients attending the City Hospital.
- **6.1.4.10 Yoga and Naturopathy Unit:** A Yoga and Naturopathy Unit has been established.
- 6.1.4.11 Central Laboratory: There is a Central Laboratory to meet the requirements of various investigations and tests, both for OPD, IPD and Research Patients. The investigation facilities provided to patients include Hematological Tests, Urine Tests, Biochemical Tests, Serological Tests, Sonography, X-ray, ECG, TMT, etc. Students and Scholars also perform the investigation as part of their training.

6.1.4.12 Geriatric Clinic and Dietary Clinic:

These Clinics provide consultation, advice and also Medicines to the visiting patients and healthier ones to maintain a sound and mental health to overcome any age related problem and disorder and also advise on various day-to-day diets, physical exercises for maintaining a good physical and mental health so that with the passing of age, one can avoid physical strains, health deterioration process, etc. to a large extent.

6.1.4.13 Nature Cure Unit: There is a Nature Cure Unit for specialized Mitti Chikitsa and Jala Chikitsa for Patients of Vibhandh, Udarroga, Shirasool, Katisool, Rakta Vikar, Angamardh, Sthabdhta, Shouth, Netra Pradhahsool, Anidra, Prameha etc.

6.1.5 EXTRA MURAL RESEARCH PROJECT:

A research activity namely Phase III Randomised, Single-blind, Placebo-controlled, Parallel Group, Efficacy Study of Ay 01Hy and Ay 02 GY (5 g) Administered Orally, Twice Daily Over 12 weeks in People detected as Pre-Diabetics in association with Hindustan Unilever Limited, Bengaluruhas been initiated in the Institute in the Department of Roga Vigyan and Vikriti Vigyan.

6.1.6 PUBLICATIONS:

- 6.1.6.1 Journal of Ayurveda: The Peer Reviewed Journal of the Institute is published regularly with Articles and Research Papers received from various Ayurvedic Colleges, Institutions and Organizations.
- **6.1.6.2 NIA Newsletter:** The Institute is regularly publishing a bi-monthly 'NIA Newsletter' to project various activities of the Institute to readers.
- 6.1.6.3 Brochures, Handbills, Pamphlets etc: The Institute regularly publishes and distributes Handbills, Pamphlets etc. during various occasions like Arogya Melas, Workshops, Medical Camps etc.

6.1.7 PARTICIPATION IN AROGYA MELA

The Institute actively participated in the Arogya Mela organized at Chandigarh and also at Kolkata by the Department of AYUSH by deputing a team of faculty members, staff and scholars for projecting various activities of the Institute and Ayurveda.

6.1.8 INTERNATIONAL COOPERATION

An MOU was signed for collaboration in the field of education, training, research, treatment, publication etc. with the University of West Indies.

6.1.9 VISIT OF FOREIGN DELEGATION

A Fiji Delegation led by Dr. Neil Sharma, Hon'ble Health Minister and Mr. Yogesh Karan, Hon'ble High Commissioner of Fiji in India, visited the Institute on 1-6-2013.

6.1.10 PHARMACY

The Institute has a well equipped Pharmacy manufacturing Medicines required for IPD and OPD and also for PG and Ph.D Research. During the period under report, the Pharmacy manufactured 339 types of medicines (32,750 Kg.) worth around Rs. 1.04 Crores.

6.1.11 LIBRARY

The Library has Publications on various subjects. During the year under report, 1545 new publications were added. The Library has more than 25,000 Text Books on Ayurveda and other sciences required for the Institute. 115 Journals and Newspapers were subscribed for the Reading Room and 2,616 annual volumes of Journals were available for reference and research purposes. The Book Bank has 6,555 books for issuing to students of each class on meritcum-need basis. Departmental Libraries are also functioning in all the 14 Departments for immediate and on the spot reference by teachers and scholars. These Libraries are enriched with new additions every year by Central Library. The Library has a collection of thesis submitted by teachers, PG and Ph.D. scholars.

6.1.12 CLINICAL DOCUMENTATION PROGRAM FOR PROMOTING EVIDENCE BASED RESEARCH (PBR) IN AYURVEDA

In order to maintain a scientific outlook in the treatment and research activities of the Institute, this Program has been launched in OPD as well as in IPD.

6.1.13 NEW INITIATIVES

A well-equipped Unit with latest instruments and equipments like 5 Port Hematology Analopzer and Fully Automatic Biochemistry Analyzer was launched in the Central Laboratory. This has benefited easy and quick laboratory investigations for remarkable and quality based results for more than 200 tests being done presently.

- A well-equipped Operation Theatre has been started for Operations and managing various Eye Diseases and Disorders in the Hospital.
- A Girls Hostel (66 Seats) and Librarycum-Academic Building works almost completed.

6.1.14 BUDGET

(Rs. In crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	42.00	22.74	64.74
Revised Estimate 2013-14	30.50	22.60	53.10
Expenditure upto March 2014	29.00	21.42	50.42

6.2 NATIONAL INSTITUTE OF HOMOEOPATHY

6.2.1 INTRODUCTION

6.2.1.1 The National Institute Of Homoeopathy was established on 10th December 1975 in Kolkata as an autonomous Institution under the Ministry of Health and Family Welfare, Govt. of India, Department of AYUSH. The Institute imparts education in Homoeopathy serving as a model institution of the country. The Institute is affiliated to the West Bengal University of Health Sciences, Kolkata. NIH, presently conducts the Degree course in Homoeopathy i.e., Bachelor of Homoeopathic Medicine and Surgery [B.H.M.S.] since 1987 and Postgraduate course i.e. Doctor of Medicine in Homoeopathy [M.D. (Hom.)] since 1998. Presently PG course is offered in six subjects viz. Organon of Medicine (9 seats), Materia Medica (9 seats), Repertory (9 seats), Homoeopathic Pharmacy (3 seats), Practice of Medicine (3 seats) and Paediatrics (3 seats). Out of the total intake capacity of 36 seats in M.D. (Hom) Course, 33 students have been admitted in the session 2013-2016. Out of the total intake capacity of 93 seats in the BHMS Degree course, 92

students have been admitted to the session 2013-2014.

- 6.2.1.2 From August 1986 onwards, the Institute is functioning in its own campus measuring about 16 acres of land at Block GE, Sector III, Salt Lake City, Kolkata 700106. The Institute has an Academic building/ Administrative block, Hospital (IPD/OPD) and Hostels for Under Graduate boys and girls. Construction of Phase-1 (Four Stories) of the 8-storied Academy-cum-Library building has been completed and occupied. Another building (G+3 storied) for extension of hospital from existing 100 bed to 250 beds is also in progress and are situated in the main campus.
- 6.2.1.3 There are two other campuses, one measuring 9.5 acres located in Block-JC, Salt Lake, Kolkata, where residential quarters for the staff of the Institute, International Hostel and Post Graduate students Hostel are situated. Another campus measuring 25 acres having a herbal plant garden and a peripheral OPD is located in Kalyani, Dist. Nadia, West Bengal, about 60 kms away from the main campus. Thus total available land with the Institute is 51.5 acres.
- **6.2.1.4** The Institute has a 100 Bed Hospital situated in the main campus, consisting of Out Patient and In-patient departments and provides health care facilities to the patients. The Institute is presently providing Indoor facilities through 100 bedded hospitals of which 08 beds are earmarked for Surgery, and 4 for Maternity. The hospital has investigation facilities viz. Clinical Pathology, Biochemistry, Radiology, Ultra-sonography, ECGetc. which are provided to the patients for a nominal charge. 221241 patients were attended in OPD at NIH Salt Lake and peripheral OPD at Kalyani between April and December 2013. Total 527 patients have been admitted to the IPD of the Hospital between April and December 2013.
- 6.2.1.5 The Institute has an Operation Theatre. New apparatus / instruments, such as Pulse Oxymeter, Diathermy, Portable X-ray and Endoscopy etc. have been introduced in the operation theatre. The Institute has a Labour room and undertakes antenatal / post-natal care of the mother and child and also giving clinical training to the students.
- **6.2.1.6** The Kalyani Herb Garden situated 60 km away from Kolkata was envisaged for acclimatizing



exotic species of homoeopathic importance and building a repository of medicinal plants for use by students and researchers. A small herb garden has also been developed within the NIH campus for teaching purpose.

6.2.1.7 The Institute also carries out clinical research in Thyroid, Spondylitis, Allergic Rhinitis, Psoriasis and Cancer.

6.2.2 LIBRARY & INFORMATION SERVICES

This division has more than 20,000 books and documents (macro & micro) including rare homoeopathy treatises. There are 1042 bound journals.61 periodicals are subscribed regularly and 43 periodicals have been received as gift. It provides various services i.e. Documentation, Reference, Referral, CAS, SDI, Document delivery, Internet etc. to the in-house readers. Book Bank service is also functioning. The department of LIS also provides Information support on Homoeopathy to the Interns, PG students and the Homoeopathic fraternity as a whole.

6.2.3 MEDICAL CAMP

Medical Camp was organized during Ganga Sagar Mela providing 24 hours health care facility. The Institute also participated in community health activities such as Chikitsa Fair organized by Indian Chamber of Commerce at Kolkata, AROGYA Fairs at Hyderabad and Bhopal, Jammu & Kashmir.

6.2.4 BULLETIN

The Institute publishes a quarterly bulletin incorporating scientific articles.

6.2.5 BUDGET

(Rs. in crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	30.45	2.90	33.35
Revised Estimate 2013-14	21.64	2.70	24.34
Expenditure upto March 2014	21.64	1.40	23.04

6.3 NATIONAL INSTITUTE OF UNANI MEDICINE (NIUM), BANGALORE

6.3.1 INTRODUCTION

The National Institute of Unani Medicine was established by the Government of India in 1984 with the objective of developing it as a center of excellence for teaching, training and research in Unani Medicine. The Institute started functioning academic activities in 2004-05. Since then the Institute has emerged as a center of quality teaching and research in Unani Medicine at Post Graduate level. The Institute is affiliated to Rajiv Gandhi University of Health Sciences (RGUHS), Karnataka and follows the syllabus and curriculum prescribed by CCIM and adopted by RGUHS. The Institute is actively engaged in clinical and preclinical studies, quality control of Unani drugs and fundamental researches. The quality of research is maintained by the Institutional Ethics Committee for Biomedical Research, Animal Ethics Committee and Scientific Advisory Groups.

6.3.2 INFRASTRUCTURE

The Institute has an attached Hospital, Academic block, separate Hostel for boys and girls, Administrative block, Indoar Games Hall, Guest House, Library with internet facility, Central Instrumentation facility lab (CIF), Animal house, Drug Museum cum Herbarium, Pharmacy and Quality control lab.

6.3.3 ACADEMIC ACTIVITIES

The Institute offers post graduate teaching in six departments, namely Moalajat(Medicine), Ilmul Advia (Pharmacology), Qabalat wa Amraze Niswan (OBG), Tahaffuzi wa Samaji Tib (Preventive and Social Medicine), Ilmul Saidla (Unani Pharmacy) and Kulliyat (Basic Principles of Unani Medicine). Two more departments, namely Ilaj Bittadbeer (Regimenal Therapy) and Jarahiyat (Surgery) have been established and the faculty have been recruited.

6.3.4 HOSPITAL AND PATIENT CARE

The Institute has 180 bed Hospital with OPD & IPD wings facilitated with Bio chemistry and Pathology laboratories, X- ray and Ultrasonography units, E.C.G, 2D Echo, TMT, Holter etc for research and diagnostic purposes. The Hospital runs general and specialized OPDs. Specialized OPDs run especially in Skin, Neuro rehabilitation, GIT, Hepatology, Geriatric care, Obesity, Diabetes, Sexual disorders and Psychiatric diseases. Besides, Family planning OPD, Regimenal therapy OPD, Surgical OPD, Health promotive unit consisting of Dietetics and Nutritional advice, Revised National Tuberculosis Control Programme (RNTCP) and Vaccination under National Health Programmes are also running in the Hospital. Regimenal therapy and neuro rehabilitation units, in particular, are attracting patients not only from Bangalore and other parts of Karnataka but also from neighbouring states like Andhra Pradesh, Tamil Nadu and Kerala. The Hospital is also having well equipped Operation Theatre and Labour room. A well equipped Physiotherapy unit has also been established in the hospital.

The treatment of poor patients in the OPD is free of cost. Diet is also provided to the patients free of cost and is based on recommendation of respective physicians. No registration fee is collected from SC/ST, Senior citizens and those who are living below poverty line. Almost all the investigations are free of cost for the IPD patients. Most of the medicines prescribed for IPD & OPD patients are prepared in the Pharmacy of the Institute.

6.3.5 EVENTS AND ACHIEVEMENTS

- Workshop on "Polio Eradication and Acute Flaccid Paralysis surveillance programme" was organized in the Institute by WHO Country Office for India on 10.01. 2013.
- Guest / Extension lectures were

- conducted during the year to elevate the standard of education and research in Unani Medicine and to get acquainted with the latest researches in allied sciences.
- The institute has applied for Ph.D Unani course from 2014-15 onwards with Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore.
- Prof. M.A. Siddiqui, Director, Prof. Mohd Anwar, Prof. M. Zulkifle and Prof. Abdul Wadud attended international conference on "Traditional Medicine for South East Asian Countries organized by Dept. of AYUSH at New Delhi from 12-14th February 2013.
- Dr. Roohi Zaman and Dr. Hamid Uddin participated in the National Seminar on "Recent Advance in drug development and Pharmacotherapeutic approaches for Diabetes and other Metabolic Disorders" held in Hyderabad, on 24.02.2013. Dr. Hamid Uddin was awarded first prize for the best poster presentation.
- Training Programme on Regimenal Therapy was organized in the Institute on 30.11. 2013 for the Medical Officers and general practitioners of Unani Medicine.
- A workshop on 'Matab wa Nuskha Navesi' was organized in the Institute on 18.12.2013.
- Mobile clinics, free health camps, pulse polio programmes were organized during the year to provide free medical services to the patients.
- The Institute actively participated in AROGYA Melas organized during the year to extend the benefits of Unani Medicine in the Health care management.
- The Institute is regularly publishing a peer reviewed Journal, namely "Journal of Research in Unani Medicine".

 During the reporting period, around 65 research papers of faculty members and PG scholars were published in various reputed journals.

6.3.6 BUDGET

(Rs. In crores)

Head	Plan	Total
Budget Estimate 2013-14	17.40	17.40
Revised Estimate 2013-14	22.50	22.50
Expenditure upto March 2014	22.50	22.50

6.4 NATIONAL INSTITUTE OF SIDDHA (NIS), CHENNAI.

6.4.1 INTRODUCTION

The National Institute of Siddha (NIS), Chennai is an autonomous organization under the Department of AYUSH, Ministry of Health and Family Welfare, Government of India. The Institution was dedicated to the Nation on 3rd September 2005 by Dr. Manmohan Singh, Hon'ble Prime Minister of India as an apex Institute of Siddha in the country to develop high standards of teaching, training and research in all aspects of Siddha System of Medicine with scientific approach.

The Institute offers Post Graduate courses in Siddha and Ph.D programme which is affiliated to The Tamil Nadu Dr.M.G.R.Medical University, Chennai for Academic and Examination purposes and follows the Syllabus and Curriculum prescribed by the Central Council of Indian Medicine as adopted by the University.

6.4.2 OBJECTIVES

- To promote the growth and development of Siddha System of Medicine
- To provide medical relief through Siddha System
- To impart the post graduate course of Siddha System of Medicine

- To undertake research and dissemination
- To act as a Centre of Excellence

6.4.3 MANAGEMENT

The Chief Executive of the Institute is the Director. A General Body, Governing Council, Standing Finance Committee, Scientific Advisory Committee control the functions of the Institute. The President of the General Body is the Union Minister of Health & Family Welfare.

THE CAMPUS: The National Institute of Siddha is located at Grand Southern Trunk Road, Tambaram Sanatorium, Chennai. It is functioning in its own campus, situated on a plot of land measuring 14.78 acres. There are separate buildings for Hospital (OPD/IPD), Teaching Blocks and Administration. A well-built hospital for OPD and IPD with its 180 bed strength is functioning on all 365 days of the year. The Hospital is equipped with ECG, X-ray, Bio-Chemistry, Microbiology, Pathology Laboratories, Siddha Pharmacology Laboratory for delivering health care services and research activities.

For Post Graduate students Boys' hostel (capacity-59 students) and Girls' hostel (capacity 26 students) and an Auditorium with 160 seating capacity are available in the campus. A Resident Medical Officer quarters is also available in the campus. A Guest House with accommodation facility of 4 suits is available in the campus. An Animal House with housing facility of Rats, Mice and Guinea Pigs for dissertation / research related activities of students / faculty members is also available. A herbal garden with more than 300 species of plants and well maintained garden exist in the campus.

6.4.4 TEACHING ACTIVITIES

The Institute is conducting the Post Graduate Course of M.D(S) with 46 seats admission

capacity and it has six (6) Specialties with four (4) Departments intake capacity of eight (8) seats and other two (2) Departments with seven (7) seats. Regular Fellowship Programs leading to Ph.D(S) with two (2) seats in each Department are also available. Reservation to various categories is implemented as per rules. The Institute has one seat in PG Course for candidate from BIMSTEC countries.

6.4.5 PATIENT CARE ACTIVITIES

The Hospital attached with the Institute provides free Siddha medical care on all days. A large sector of ailing community is catered by the PG Scholars and faculty members and the out patient census ranges from 1200 to 2500 per day. The In-patient facility provides medical care with bed earmarked to clinical PG departments. A payment ward with 12 beds is also available. In view of increasing bed occupancy and demand from public, the bed strength has been increased from 160 to 180 beds from 1st November 2013 onwards.

Along with the OPD & IPD services external therapies like Varmam, Thokkanam, Leech Therapy, Pattru, Ottradam, Pugai, Suttigai and Yogam are also provided to the needy patients. An exclusive Surgical OPD is also run to provide treatment for conditions like Hemorrhoids, Fistula, abscess, cancerous lesions etc., and also for cleansing & dressing certain conditions of wounds, abrasions, bruises and burns.

The Geriatric OP is being run on the afternoon of every Tuesday to provide consultation, counseling and medicines to the visiting patients to overcome any age related problem. Advice also given on various day-to-day diets, physical exercises for maintaining a good physical and mental health so that with the passing of age, one can avoid physical strains, health deterioration process, etc. to a large extent.

The Institute is organizing two medical camps on every Saturday, one in rural area and the other in semi-urban area to provide free medical facilities to promote the Siddha Medicine as well as imparting community oriented approach to students.

6.4.6 ACHIEVEMENTS IN THE REPORTING YEAR 2013

- Forty Six (46) students were admitted into P.G. Courses in Six branches during 2013 through entrance examination followed by counselling.
- Forty two (42) students have successfully completed post graduation i.e. M.D [Siddha] during the year 2013 and were awarded degree from The Tamil Nadu Dr.M.G.R.Medical University, Chennai.
- During 2012-13, 4.82 lakhs of patients visits made in OPD and 56445 patient days treated in IPD with a bedoccupancy of 97%. During 2013-14, 5.81 lakhs of patient visits recorded in OPD and average reporting per day increased from 1323 to 1591 compared to previous year. In IPD, patient days treated also has increased significantly during 2013. During 2013-14, 59175 patient days treated in IPD with a bedoccupancy of 96%. Out of the total patients reported at OPD 52% and 48% were male and female respectively.
- The Geriatric OP has recorded 22897 patients during 2013-14. Average Geriatric OP visits has increased from 1327 to 1908 per month.
- Organised three Continuing Medical Education (CME) Programmes during 2013-14 for Training of Trainers for updating the skills and knowledge of senior faculty members of Siddha colleges. A CME on "Research Methodology & Statistical Design for Clinical Trials based on Holistic Management" was also conducted.



Sh. Nilanjan Sanyal, Secretary Department of AYUSH inaugurating National Scientific Workshop on "Management of Non-Communicable Diseases in Siddha System" on 1.10.2013 at NIS

- NIS conducted a one-day National Scientific Workshop on "Management of Non-Communicable Diseases in Siddha System" on 1-10-2013. The National Scientific Workshop was inaugurated by Shri.Nilanjan Sanyal, Secretary Department of AYUSH.
- NIS is participating in Conferences and Workshops related to AYUSH and presenting the scientific papers for disseminating the research results.
- Participation in Seminars/Workshops/ Training Programmes by the Teaching Staff and P.G.Scholars of NIS.
- NIS ensured its active participation in AROGYA Melas throughout the year, organized by the Department of AYUSH, Ministry of Health and Family Welfare, Govt.of India and providing interview / public query programme to Doordharsan Television channel. All

India Radio with a view to popularize the Siddha Medicine and thereby to extend the benefits of Siddha in the health care management of people.

6.4.7 VISIT OF TIBETIAN MEDICINE DELEGATES

A delegation from Tibetian Medicine visited the Institute in March 2013 for understanding the Siddha Medicine and services rendered by NIS.

6.4.8 FOREIGN VISITS

Dr.K.Manickavasakam, Director, National Institute of Siddha participated in International Conference on Siddha Medicine 2013 in Malaysia which was organized by the Traditional and Complementary Medicine Division, Ministry of Health, Malaysia and the Malaysian Association of Traditional Indian Medicine during 11-12 November 2013 at the Berjaya Times Square Hotel, Kuala Lumpur.

6.4.9 BUDGET

(Rs. In crores)

Head	Plan	Total
Budget Estimate 2013-14	27.00	27.00
Revised Estimate 2013-14	21.50	21.50
Expenditure upto March 2014	21.50	21.50

6.5 NATIONAL INSTITUTE OF NATUROPATHY (NIN), PUNE

6.5.1 INTRODUCTION

National Institute of Naturopathy (NIN), Pune, is registered under the Societies Registration Act. 1860 and came into existence on 22-12-1986 with the aims & objectives to propagate & promote Naturopathy & yoga, to provide treatment facility for all kinds of diseases through Naturopathy & yoga, to conduct research & training and to establish a living Memorial of Mahatma Gandhi. This institute has a "Governing Body" headed

by the Union Minister for Health & Family Welfare as its President. National Institute of Naturopathy (NIN) is located in a historical building called "Bapu Bhavan" which is situated at Tadiwala Road, Pune. "Bapu Bhavan" is named after Mahatma Gandhi, Father of the Nation, who stayed here for 156 days and made this institution his home whenever he was in Pune from the year 1944. Formerly, this place was known as "Nature Cure Clinic and Sanatorium" which was run by late Dr. Dinshaw K. Mehta. The All India Nature Cure Foundation Trust was established in this Centre by Dr. Dinshaw K. Mehta. Mahatma Gandhi became its life long Chairman. Gandhiji conducted his Naturopathy experiments and organized National and International activities while staying here. The present complex was handed over to Govt. of India on 17-03-1975 by Dr. Dinshaw K. Mehta for starting the National Institute of Naturopathy.



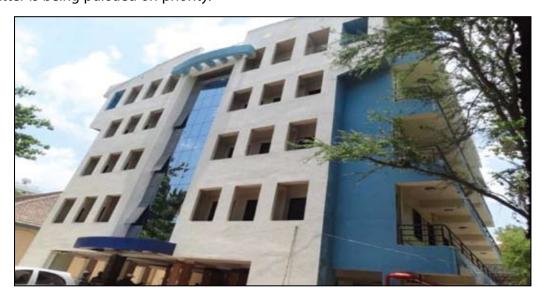
"THE BAPU BHAVAN", NIN, PUNE



LOCATION OF LAND AT KONDHWA, PUNE

6.5.2 MAJOR ACTIVITIES UDERTAKEN DURING THE YEAR 2013-14:

- the matter of acquisition of Land: NIN is pursuing the matter of acquisition of about 25Acres of land in Pune to start the Naturopathy College, Hospital & Research Unit by NIN. Department of Health, Government of Maharashtra, has earmarked the land in Kondhwa, Pune to hand over to NIN. The matter is being pursued on priority.
- **6.5.2.2.Two Years Nursing Diploma in Naturopathy & Yoga Therapy:**NIN started First year batch of two years Nursing Diploma in Naturopathy & Yoga Therapy course with 20 students on 19th August, 2013.
- **6.5.2.3. The New Out Patient Department (OPD) :**TheNew Out Patient Department at NIN is functional with all modern Naturopathy equipments from June, 2013.



NEW OUT PATIENT DEPARTMENT AT NIN, PUNE



Modern Naturopathy Equipment Installed at New OPD:



Under Water Massage



Colon Hydro therapy



Vibro Massager



Sauna Bath



Circular Jet Bath



Foot Arm Bath



NIN Medi-Gym

- **6.5.2.4. Medi-Gym:** Well equipped new set up is provided for a Medi-Gym at NIN where patients and general public are trained in exercise by Gym trained doctors. More than 100 members use this facility every day.
- 6.5.3 ONGOING SCHEMES AND ACHIEVEMENTS
 - The NIN has an OPD clinic functioning for 14 hours daily from 7 am to 9 pm with free consultation services where various Naturopathy treatments are given to the patients at a very subsidized rate i.e. Rs.350/- per week. Total 57064 patients underwent treatment here up to 31st March, 2014.

Sanatorium for HIV+ve Patients at Panchagani, Satara

- The institute also conducts 8 Yoga classes daily. Avg. 240 Participants attend the Yoga Classes daily.
- A health Shop is being run on selfsustaining basis where natural food and drinks, products free from chemicals and fertilizers, are made available to the public.
- Books on Naturopathy, Yoga and other Health subjects and various instruments used in the treatment of Naturopathy are sold here.
- The Institute publishes "Nisargopachar varta" – a bilingual magazine(Hindi/ English). "Rational Hydrotherapy"



"Shuddh Lekhan" Competiontion during Hindi Pakhwada

- a classical text by the American Naturopath Dr. J. H. Kellogg has been reprinted by the NIN and the copies are available for sale. 2nd edition of the Book "Naturopathic Diet & Recipe, a CD on Naturopathy Treatment Modalities and activities of NIN, the Handbook on Basic Yoga for Beginners are also available for sale. NIN has a Library with more than 9000 books.
- NIN is managing a Sanatorium exclusively for the HIV+ve patients with an intake capacity of sixteen, at Panchagani, Dist.Satara. 8 Research Papers (on HIV, Hydrotherapy, Musculoskeletal disorders & attention deficit hyper active disorders) of NIN have been published in various international indexed journals.
- A Naturopathic Diet Centre is being run at NIN,Pune for providing diet facilities to the general public and patients who visit this institute. Hindi Pakhwada was celebrated in the Institute from 10th to 24th Sept.'2013.
- Free guest lectures are organized on every Saturday evening featuring eminent speakers on Procedures and Benefits of Naturopathy and Yoga for treating different common ailments.

- NIN organizes one-day workshop with demonstration of procedures on different diseases for general public on the last Saturday of every month.
- NIN conducts free full day workshop in regional languages viz. Telugu, Gujarathi, Marathi, Kannada, Sindhi, Tamil, Malayalam, etc., on "Human Health & Life Style".
- NIN regularly conducts C.M.E. programme for Naturopathy practitioners, Continuous Professional Development Programme (CPDP), Women Component programme, Research Methodology Workshop and Orientation Program for doctors of other systems. Total 5 programmes were conducted during the reported year.
- NIN organizes Natural Health Food Fair at Pune and in different states of the country. During the reported year, NIN organized 4 days free "Natural Health Food Fair and Yoga Naturopathy Seminar- 2013" from 26th-29th Sept, 2013 in the premises of the Institute. NIN conducted 2 days Cookery Classes on 27th & 28th Sept, 2013.
- 52 students are undergoing 1 year full time Treatment Assistant Training



NIN Orientation Program in Vadodara



'Cookery Classes' at NIN, Pune

Course (TATC) with a stipend of Rs.3000/- p.m.

- 20 students are trained under the 2 years Nursing Diploma in Naturopathy and Yoga Therapy Course with a monthly stipend of Rs. 5000/-.
- BNYS interns from different Naturopathy colleges are undergoing Internship Programme with a monthly Stipend of Rs.3500/-.
- Free Acupressure Treatment is given to patients for six days in a week.

6.5.4 INFRASTRUCTURE

NIN has an Out Patient Department with well equipped Naturopathy equipments, Yoga Hall / Seminar/ Workshop Hall with 125 persons sitting capacity. Administrative building called "Bapu Bhavan", Health Shop, Naturopathy Diet Centre, Gymnasium, Gandhiji's Prayer Platform and Memorial, well maintainedgarden and lawns. Genset Power backup, sufficient Parking for four wheelers and two wheelers, Pump House and Bore well for water supply.

6.5.5 BUDGET

(Rs. In crores)

Head	Plan	Total
Budget Estimate 2013-14	9.00	9.00
Revised Estimate 2013-14	5.55	5.55
Expenditure upto March 2014	5.55	5.55

6.6 RASHTRIYA AYURVEDA VIDYAPEETH (RAV), NEW DELHI

6.6.1 INTRODUCTION

Rashtriya Ayurveda Vidyapeeth (Vidyapeeth) is a registered society and an autonomous organization under the Ministry of Health & F. W., Department of AYUSH, Govt. of India. The Vidyapeeth was established with the aim to preserve and arrange transfer of Ayurvedic knowledge from eminent scholars, and traditional Vaidyas who do or do not have formal qualifications but trained

under Gurukula system, to the younger generation through the Indian traditional system of education called 'Guru Shishya Parampara' to prepare proficient experts in Ayurveda with clinical skills.

6.6.2 INFRASTRUCTURE

The Vidyapeeth functions at Dhanwantari Bhawan, Road No. 66, Punjabi Bagh (West), New Delhi-110026. Various training centres enrolled by Vidyapeeth train the students. During the reporting year 15 centres spread all over the country provided training to 20 students of the Vidyapeeth.

6.6.3 PROGRAMMES

- Rashtriya Ayurveda Vidyapeeth imparts practical training to Ayurvedic graduates and postgraduates through 'Guru Shishya Parampara' i.e. the traditional method of transfer of knowledge. The One-year course of Member of Rashtriya Ayurveda Vidyapeeth (MRAV) facilitates literary research for acquisition of knowledge of Ayurvedic Samhitas and commentaries thereon to enable the post graduates to become good teachers, research scholars and experts in Samhitas. In the one-year Certificate Course of Rashtriya Ayurveda Vidyapeeth (CRAV) the students possessing Ayurvedacharya (BAMS) or equivalent degree are trained under eminent Vaidyas in Ayurvedic clinical practices, Dravyaguna and drug manufacturing.
- The Vidyapeeth has been conducting Interactive Workshops for PG students, doctors and teachers to provide clarifications on relevant topics of teaching and practice.
- The Vidyapeeth is holding national seminars on different diseases to disseminate traditional knowledge and

- research outcome to practitioners in the management of such diseases.
- The Vidyapeeth also publishes books required for students, teachers and researchers.

6.6.4 ACHIEVEMENTS

- Training Programme (Guru Shisya Parampara): During the year 20 studentswere trained under 15 Gurus in various parts of India.
- Convocation: The Annual Convocation was organized on 27th January, 2014 in New Delhi. One hundred four (104) students were conferred CRAV certificates. 13 eminent Ayurvedic scholars were felicitated with Fellow of Rashtriya Ayurveda Vidyapeeth (FRAV) and 4 other Ayurvedic scholars were also felicitated with Life Time awards for their long significant contribution to the progress of Ayurveda.
- Interactive Training Programme: Interactive programme was organized on 24-25 January, 2014 in Delhi for PG students and teachers in the subject of Kaumarabhritya.
- Training Programme for teachers:
 Two training programmes were also conducted for Ayurvedic teachers on "Samhita based clinical diagnosis". First programme was held on 24-25 March, 2014 at Govt. Ayuvedic College, Patna and second was held in Tirupati on 27-28 March, 2014.
- Participation in Arogya: The Vidyapeeth has also participated in three Arogya exhibitions i.e. First held on 25-28 Oct, 2013 in Lucknow, 2nd held on 21-24 Dec, 2013 at Jammu & again on 28-29 at Kathuwa and 3rd in Kolkata held on 8-11 January, 2014,

which were organized by Deptt. of AYUSH, Ministry of Health and F.W., Govt. of India.

Continuing Medical Education:

The Vidyapeeth, is the coordinating nodal centre for Continuing Medical Education under Central Sector Scheme of Department of AYUSH. During 2013-14 a total of 35 programs, consisting of 23 CMEs for teachers, 4 CMEs for doctors (each of 6 days), 5 CMEs for doctors (each of 3 days), 2 Orientation training programme (OTP), and 1 CME for Nurseswere approved and funds to the tune of Rs.117.53 lakhs

were released to 24 selected AYUSH

institutions, benefiting 875 trainees

(AYUSH personnel). During the year

165 pending Utilization certificates

to an amount of Rs.119.85 lakhs were

liquidated against 105 institutions.

6.6.5 BUDGET

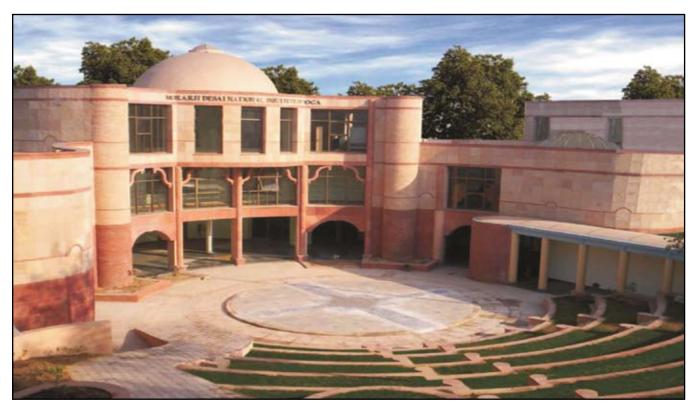
(Rs. In crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	6.60	0.86	7.46
Revised Estimate 2013-14	3.30	0.84	4.14
Expenditure upto March 2014	3.30	0.83	4.13

6.7 MORARJI DESAI NATIONAL INSTITUTE OF YOGA (MDNIY)

6.7.1 INTRODUCTION

Morarji Desai National Institute of Yoga (MDNIY) is an autonomous organization under Department of AYUSH, Ministry of Health and Family Welfare, Govt. of India. MDNIY is a focal Institute for Planning, Training, Promotion and coordination of Yoga Education, Training, Therapy and Research in all its aspects.



MORARJI DESAI NATIONAL INSTITUTE OF YOGA (MDNIY)

6.7.2 OBJECTIVES

- To act as a Centre of Excellence in Yoga;
- To develop, promote and propagate the science and art of Yoga; and
- To provide and promote facilities of training, teaching and research to fulfill the above two objectives.

6.7.3 VISION & MISSION

Health, Happiness and Harmony for all through Yoga. The Institute provides the best of Yoga Education, Training, Therapy and Research facilities to the learners, researchers and practitioners of Yoga. The aim of the Institute is to promote deeper understanding amongst the people of Yoga Philosophy and practices based on classical Yoga.

6.7.4 YOGA EDUCATIONAL PROGRAMMES

B.Sc. (Yoga Science)has been started

from the year 2012-13. It's a regular course of three years duration for 10+2 students with intake capacity of 60 every year, affiliated to Guru Gobind Singh Indraprastha University, New Delhi. During the year 2013-14, total 22 students have taken the admission.

Diploma in Yogic Science (DYSc.) for Graduates of One Year duration is being conducted with intake capacity of 120. During the year 2013-14, total 103 students have taken admission.

6.7.5 YOGA TRAINING PROGRAMMES

- Certificate Course in Yogasana for Health Promotion, a part time course of 3 months (120 hours) duration has been started.
- Certificate Course in Pranayama and Meditation for Health Promotion, a part time course of 3 months (120 hours) duration has been started.

- Foundation Course in Yoga Science for Wellness of 1 month (48 hrs.) duration is being conducted for general public. Total 24 batches have been conducted and 650 participants were admitted for this programme during the period under report.
- Yoga and Health Promotion Programmes of one hour each from 6.00 AM to 6.00 PM (as per time schedules) were conducted on all working days for the general public, working executives, women, children etc. 3927 people were benefited from these programmes. Weekend Yoga Programme was conducted where more than 400 participants were benefited.

6.7.6 YOGA THERAPY PROGRAMMES

- The Institute has Yoga OPD whichworks from 8.30 AM to 5.00 PM on all working days.
- Equipped with Pathology Lab, Bio-Chemistry Lab, X-Ray unit, Sleep Lab, etc.
- Providing consultation by Senior Medical Officer, Yoga Therapists, Dietician and Naturopathy physicians.
- Yoga Health Care Programmes of one hour each from 6.00 AM to 6.00 PM (as per time schedules) were conducted on all working days. 2374 patients were benefited.
- Individual Yoga Therapy Sessions were organised where more than 1012 individual sessions were conducted.

6.7.7 YOGA THERAPY CENTRES IN AYUSH/ ALLOPATHIC HOSPITALS

The Institute has established four Yoga Therapy Centres in Delhi where Yoga consultation and Yoga therapy classes from 8.00 AM to 4.00 PM are being conducted. 10619patients were treated during the period through Yoga Therapy.

6.7.8 PREVENTIVE HEALTH CARE UNITS OF YOGA IN CGHS DISPENSARIES

The Institute has established 20 Preventive Health Care Units of Yoga in CGHS Dispensaries in Delhi and NCR and conducting Yoga sessions from 8.00 AM to 3.00 PM on all working days (including Saturday). During the period under report, 14,844 people were benefited by these Preventive Health Care Units of Yoga.

6.7.9 NATIONAL YOGA WEEK-2014

The Institute is organizing an annual event "National Yoga Week", a mass awareness programme for health, happiness and harmony through Yoga from 12-18 February every year, which includes Seminar, Conference and Skill Building Workshops in different streams. Eminent experts of Yoga, Modern Medicine and Allied Sciences share their experience and knowledge in this mega event. During the year 2014, the said event was organised from 12 – 18 February, 2014 on the theme of Yoga for Youth. About 759 delegates & students, 80 Experts from different part of the country participated in the event.

6.7.10 PUBLICATION & PROPAGATION

- The Institute is involved in propagation of Yoga through print and electronic media.
- The Institute brings out Quarterly MDNIY Newsletter
- MDNIY has as many as 40 priced publications.
- It has published several useful IEC materials including Yoga charts both in Hindi and English.
- The Institute participated in National and International events like Health exhibitions, AROGYA, Health Mela, Seminars, Conferences etc.

6.7.11 SWAMI VIVEKANANDA DISTRICT YOGA WELLNESS CENTRES (SVDYWC)

The Institute had launched a scheme to run Swami Vivekananda District Yoga Wellness Centre (SVDYWC) through Public Private Partnership (PPP) mode in 2010-11. At present, the Institute runs 72 Centres under Phase I and 56 Centres under Phase II across the country under PPP mode. Every year more than 2 lakh people were benefited from different Yoga programmes, conducted by these centres.

6.7.12 WHO COLLABORATING CENTRE:

MDNIY has attained the privilege to be the only WHO Collaborating Centre in the world to engage in achieving Yoga specific outcomes. Considering the global demand and popularity of Yoga for health care, MDNIY has a lot to offer as WHO Collaborating Centre by generating information and documents of Yoga for the use of all Member States of WHO. This is a vintage point for the Institute to indulge in focussed activities and yield globally acceptable outcomes.

The four terms of references are:

- To serve as Yoga resource centre for information exchange on Yoga within the country and for other countries.
- To assist and work with WHO in developing standards for promoting national use of Yoga.
- To develop and practice materials for advocating evidence based use of Yoga.
- To conduct customized training programmes for national and international health professionals and WHO fellows about the utility of Yoga in health promotion.

6.7.13 FACILITIES & OTHER ACTIVITIES:

• The Institute is centrally located in the Lutyens zone of New Delhi.

- New State-of-Art complex with air conditioned and ultra modern building which includes Auditorium, Conference Hall, Kriya Block, Class Rooms, Lecture Hall, Pathology lab, Sleep lab, etc. along with Ultra Modern Teaching facilities.
- Conducive atmosphere for Yoga Sadhana.
- State of the art Library with more than 13,009 volumes.
- Learning Resource Centre (LRC) with Xerox, Computer Centre, Multi-media, Internet and other facilities.
- Healthy Food Cafeteria facilities.
- Highly qualified and experienced teaching staff which includes Honorary/ Visiting Professors and Guest Faculty from various eminent Institutions.

6.7.14 BUDGET

(Rs. in crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	17.50	4.20	21.70
Revised Estimate 2013-14	10.42	4.58	15.00
Expenditure upto March 2014	10.42	4.57	14.99

6.8 ALL INDIA INSTITUTE OF AYRVEDA (AIIA), NEW DELHI

6.8.1 INTRODUCTION

All India Institute of Ayurveda is conceived as an Apex Institute for Ayurveda under the Ministry of Health & Family Welfare, Department of AYUSH, Government of India. The institute would offer postgraduate and doctoral courses in various disciplines of Ayurveda and will focus on fundamental research of Ayurveda, drug development, standardization, quality control, safety evaluation and clinical research. The hospital will be equipped with state of the

art modern diagnostic tools and techniques which will be used in teaching, training and research.

6.8.2 INFRASTRUCTURE

The construction of the institute's hospital building (G+6) and academic building (G+7) is at advance stage of progress at Sarita Vihar. A temporary OPD block has been built in August, 2010 with pre-fabricated material for running OPD services. It has a camp office as well as OPD.

6.8.3 SCHEMES

AllA is implementing the National Campaigns on Anemia, Mother and Child Health, Geriatrics and Ksharasutra, funded by CCRAS. The number of patients treated under different national campaigns from April, 2013 to November, 2013 are; Anemia- 408, MCH-3007, Geriatrics-840, Ksharasutra-0, Others-6453. Upto November, 2013, 10708 patients have visited and received treatment.

6.8.4 ACHIEVEMENTS

- AllA has got Registered under Societies Act 1860.
- AllA has got its MOA, Bye-laws and Rules and Regulations approved.
- Construction work of the institute is in advance stage.
- An OPD is already functional in the institute.
- Governing Body of the Institute has been constituted.

6.8.5 BUDGET

(Rs. in crores)

		,
Head	Plan	TOTAL
Budget Estimate 2013-14	48.00	48.00
Revised Estimate 2013-14	45.40	45.50
Expenditure upto March 2014	39.62	39.62

6.9 NORTH EASTERN INSTITUTE OF FOLK MEDICINE (NEIFM), PASIGHAT

6.9.1 INTRODUCTION

The North Eastern Institute of Folk Medicine (NEIFM) is a National Institute, under the Department of AYUSH, Ministry of Health & Family Welfare, Government of India. It is being developed as a Centre of Excellence and apex research centre for all aspects of Folk Medicine knowledge with linkages and collaborations with other research institutions. It is located at Pasighat, East Siang District, Arunachal Pradesh. The northeastern region of India, comprising the states of Arunachal Pradesh, Assam, Manipur, Meghalaya, Mizoram, Nagaland, Sikkim, and Tripura, endowed with a rich biodiversity of flora and fauna, has a rich and vast heritage of traditional folk medicine practices, remedies and therapies. The aims and objectives of the NEIFM are to survey, document and validate folk medicine practices, remedies and therapies prevalent in the region, with a view to revitalize, promote and harness these local health traditions. The NEIFM will create an interface between traditional/folk medicine practitioners and research institutions to enable proper understanding of folk medicine. It will help to upgrade the skills and build and enhance capacities of traditional/ folk medicine practitioners, while protecting their intellectual property rights. Where feasible, validated folk medicine practices will be integrated into the mainstream healthcare system, and made available for the public at the primary healthcare level. The Institute has been registered as Society with the Govt. of Arunachal Pradesh under Societies Registration Act, 1860.

6.9.2 INFRASTRUCTURE

The works taken up in the 1st phase were the Construction of Institute building alongwith Hospital block and Guest House covering a plinth area of 40,000 sq.ft and 2100 sq.ft respectively through HLL Lifecare Ltd.. Creation of an ethno-medicinal plants Garden is under progress within the 40 acre complex.

6.9.3 ACHIEVEMENTS

- The Institute is running an OPD at the old TB Hospital complex at Pasighat with an Ayurvedic Doctor and 3 folk medicine practitioners, with an average of 25-30 patients per day.
- The work of Guest House has been completed except for Sewer & water connection.
- During this year, one training-cumworkshop organized on "Rapid Assessment on Local Health Practices" at Pasighat held during Sept,2013.

6.9.4 BUDGET

(Rs. in crores)

Head	Plan	Non-Plan
Budget Estimate 2013-14	13.50	13.50
Revised Estimate 2013-14	8.00	8.00
Expenditure upto March 2014	0.60	0.60

6.10 NORTH EASTERN INSTITUTE OF AYURVEDA & HOMOEOPATHY (NEIAH), SHILLONG, MEGHALAYA

6.10.1 INTRODUCTION

The North Eastern Institute of Ayurveda & Homoeopathy (NEIAH), Shillong, Meghalaya is an autonomous institute under the Department of AYUSH, Ministry of Health & Family Welfare, Govt. of India is being established pursuant to the approval of Union Cabinet accorded in March, 2008. The Institute campus is being developed on a plot of land adjacent to North Eastern Indira Gandi Regional Institute of Health & Medical Sciences (NEIGRIHMS) at Shillong, Meghalaya. The construction of hospitals and colleges under Phase I of the project is

in progress at a sanctioned cost of Rs. 71.81 crore.

6.10.2 ACHIEVEMENT

The Institute is running a OPD City Center in a rented building at Nongrim Hills, Shillong and proving health care services to the general masses under Ayurveda & Homoeopathic system of medicines;

- The OPD City Center has been provided with facility of internet & LAN (Local area Network) for better management;
- During the period from April, 2013 to December, 2013, a total of 11778 beneficiaries (Ayurveda – 6722 and Homoeopathic – 5056) with an average of 40-50 patients per day visited and benefitted from the OPD City Center. Patients were provided with free medicines as per availability;
- A health camp was organized by the Institute on 25.05.2013 at BSNL Colony, Rynjah, Shillong where 150 patients were provided free medical check-up and medicines;
- MoA, Rules & Regulations and Byelaws of NEIAH, Shillong have been approved and the Institute has been registered with Registrar of Societies, Govt. of Meghalaya on 23rd August, 2012.
- The official website of NEIAH, Shillong is www.neiah.nic.in;
- The 2nd issue of AYUHOM has been published by the Institute;

6.10.3 BUDGET

(Rs. in crores)

Head	Plan	Non-Plan
Budget Estimate 2013-14	24.00	24.00
Revised Estimate 2013-14	19.88	19.88
Expenditure upto March 2014	0.26	0.26

Chapter 7

Institute Funded by the Department of AYUSH

- 7.1 INSTITUTE OF POST GRADUATE TEACHING AND RESEARCH IN AYURVEDA (IPGT&RA), JAMNAGAR
- After independence, this was the first central organization established by Government of India as Central Institute for Research in Indigenous System of Medicine (CIRISM) in 1953. In 1956 another Institute named as Post Graduate Training Centre in Ayurveda was established at Jamnagar by the Government of India and both were merged in 1962 called as Institute for Ayurvedic Studies & Research (IASR). This Institute was handed over to Gujarat Ayurved University on lease in 1970 for administration after the establishment of Gujarat Ayurved University. Post Graduates of this Institute are managing various premier Institutions of Ayurveda in India and abroad as well. Presently this institute is fully financed by Government of India under central finance scheme and governed by the Acts and Statutes of Gujarat Ayurved University. Board of Post Graduate Teaching & Research in Ayurveda is the governing body for the Institute.
- 7.1.2 The Institute has been recently recognized as WHO Collaborating Centre for Traditional Medicine (Ayurveda), first and only WHO-CC for Ayurveda all over the world. The Institute has conducted various projects under WHO collaboration. Under this scheme institute has prepared Manual on simple Ayurvedic herbal formulations for common ailments, International Catalogue of Ayurvedic Publications, Standardization of Ayurvedic Clinical Terminology, Model Recruitment and promotion rules for AYUSH Personnel

- and Development of Pharmacovigilance programme for Department of AYUSH for which this institute has been recognized as National Pharmacovigilance Resource Center for AYUSH.
- 7.1.3 At present, the institute is having ten departments (offering post graduate degree in 13 specialties) and six well established laboratories with 50 admission capacity in P.G. courses of Ayurveda. Institute also conducts M.Pharma (Ayurveda) and M.Sc. (Medicinal Plants) courses as self financed.
- **7.1.4** AYU Journal: Institute is publishing quarterly peer reviewd journal 'AYU'. Four issues of the Journal have been published during the year. 'AYU' journal has been included in PubMed and is freely available on web www. ayujournal.org.
- 7.1.5 The students and faculty of the Institute publish their work in different national and international journal. In the current reporting year out of 150 articles 3 have been published.
- 7.1.6 Institute is conducting researches at many levels. Other than MD, M.Pharma, M.Sc and Ph.D projects, projects under Academia Industry Partnershipare also being conducted.
- 7.1.7 This institute is recognized as an International hub of Ayurveda. Every year more than 50 foreigners visit for various types of short and long term courses. University has MoUs with more than 10 International organization for which I.P.G.T.&R.A is implementing agency.

- 7.1.8 This institute has a well-managed Hospital with O.P.D and I.P.D facilities. In 2007 OPD strength was around 1.35 Lac which is increased to more than 2 lacs during this year. Daily average patient attendance has increased to 800 per day. The average bed occupancy of 180 bedded hospital was more than 68%. Departments like Panchakarma, Stree Roga & Prasooti Tantra, Kaumarbhritya and Shalya Tntra, Shalakya Tantra provides specialized treatment facilities to the needful. Cases of Thalassemia, mental retardation, attention deficit hyperactivity etc. are being studied in Kaumarbhritya.
- 7.1.9 The Institute is organizing various outreach activities for National programs and conducted medical camps in rural areas of Gujarat. This Institute has adopted nearby KONZA Village under AYUSH outreach services. This Institute attained a special milestone by conducting weekly OPDs at all the three Defence establishments in Jamnagar. Total 7 satellite clinics in the form

- of weekly O.P.D.'s are being conducted at Sasoi garden, Indian Naval Services, Valsura, Air Force Base, Army Camp, Districl jail, KONZA Viallage and old age home, situated at Jamnagar.
- 7.1.10 The institute is trying its best to set the highest standards of teaching and research in Ayurveda. Institute has continuously increased hospital OPD and IPD attendance of patients and serving the goal of popularizing the Ayurveda and better health care of citizens.

7.1.11 BUDGET

(Rs. in crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	6.55	19.50	26.05
Revised Estimate 2013-14	4.86	18.44	23.30
Expenditure upto March 2014	4.67	18.44	23.11

Chapter 8

Research

8.1 CENTRAL COUNCIL FOR RESEARCH IN AYURVEDIC SCIENCES (CCRAS)

8.1.1 INTRODUCTION

The Central Council for Research in Ayurvedic sciences (CCRAS) is an autonomous body under Department of AYUSH, in India for undertaking, coordinating, formulating, developing and promoting research on scientific lines in Ayurveda. The main activities of the Council include clinical research, drug research, and literary research in Ayurvedic Sciences.

8.1.2 Infrastructure

The research activities are carried out through its 30 Institutes/Centres/Units, located in different parts of India and also through collaborative studies with various universities, hospitals and institutes.

8.1.3 Achievements

8.1.3.1 Clinical Research

13 Intra Mural Clinical trials under CCRAS IMR Policy on 10 diseases/ conditions viz. Mental Retardation, Diabetes Mellitus-Type II, Osteoarthritis, Rheumatoid Arthritis, Rasayana, Psoriasis, Generalized Anxiety Disorder, Haemorrhoids, PCOS and Gout have been launched. 5 Intra Mural Clinical Trials for validation of Ayurvedic Pharmacopoeial Formulations viz. Chronic Bronchitis, Rheumatoid Arthritis, Osteopenia/Osteoporosis, Osteoarthritis and Iron Deficiency Anemia are going on and preparatory work of 10 research projects viz. Chronic Bronchitis, Rheumatoid

- Arthritis, Osteopenia/Osteoporosis, Osteoarthritis Iron Deficiency Anemia, Bronchial Asthma, Irritable Bowel Syndrome (IBS), Cognitive Deficit and Rasayana is in progress.
- 3 Collaborative Clinical Studies have been carried forward from the previous year viz. Breast Cancer, Mental Retardation and Bio-medical instrumentation for Ksharasutra preparation and one project on Lung Cancer has been completed.

8.1.3.2 Medicinal Plant Research

- **Cultivation of Medicinal Plants:** Total 982 medicinal plant species are maintained in four demonstrative gardens situated at Pune (National Research Institute of Basic Ayurvedic Sciences), Jhansi (National Vriksha Ayurveda Research Institute), Ranikhet (Research Institute of Himalayan Flora) and Itanagar (Ayurveda Regional Research Institute). In vitro propagation studies: Studies on 7 Ayurvedic medicinal plants namely Gambhari (Gmelina arborea Roxb.), Patala (Stereospermum suaveolens DC.), Shyonaka (Oroxylum indicum (L.) Vent.), Bilwa (Aegle marmelos Corr.), Agnimantha (Clerodendrum phlomidis L.f.), Agnimantha (Premna obtusifolia R.Br.) and Ishwari (Aristolochia indica L.) have been continued.
- Medico-ethno-botanical survey:
 31 Tours (19 long duration and 12

short duration) have been conducted under Medico botanical survey for documentation of ethno medical claim, 2 research projects are in progress and one project has been initiated while 4 new projects shall be initiated shortly. 280 folk claims were documented, 63 museum specimens and 191.46 kg raw material were collected for R&D work.

8.1.3.3 Drug Standardization

- Standardization of 46 (samples/batches) single drugs and 18 (samples/batches) compound formulations has been completed while preparatory work for studies on 9 formulations is in progress. The Chromatographic and Spectroscopic methods for 3 Pharmacopoeial drugs are in progress and 5 IMR projects have been initiated.
- Pharmacological 5 projects on safety toxicity studies are continued, while preparatory work on another 3 formulation is in progress.

8.1.3.4 Tribal Health Care Research Program

 Under the Tribal Health Care Research Programme, health related demographical research survey was conducted through six units and a total 21,312 population has been surveyed and 58 folk claims have been documented. In addition to this, Health care services were provided to villagers.

8.1.3.5 Documentation and Publication

 During the period under report 8 books, monographs including Journals viz. Report of Pharmacological profile and safety/toxicity of Yograj Guggulu and Mahanarayan Taila, Review of medicinal plants used in veterinary practices, Conservation, Cultivation and

Exploration of therapeutic potential of medicinal plants, Proceeding of National Workshop on Ayurvedic management of non-communicable diseases prevalent on North Eastern State, Maharishi Charak and Descriptive catalog of Sowa-Rigpa manuscript, have been published and 1 study on collection of medical information, archeological & epigraphical sources and records of archives have been completed. The works related to retrieval of 3 books, digitization of 1 classical text etc. are in progress, while one project completed and 7 research projects, preparation of 20 comprehensive monographs on medicinal plants are continued.

8.1.3.6 Digitization

 3 projects on digitization of manuscripts was funded by the Department of AYUSH out of which one project from South India, Maharashtra and Madhya Pradesh has been completed and 2 projects from Karnataka State (Kundurmath, Bangalore) & Jammu & Kashmir for Sowa-Rigpa manuscript (Leh) are continued. Five other projects and preparation of 20 comprehensive monographs on medicinal plants are continued.

8.1.3.7 Intra Mural Literary Research Projects

 During the reporting period, 8 Literary Research projects were sanctioned and same are being executed at National Institute of Indian Medical Heritage, Hyderabad.

8.1.3.8 Pharmacognosy Research Studies

Pharmacognostical study of 46 single drugs has been completed. Besides this, DNA finger printing of 3 single drugs has also been completed.

8.1.3.9 AYUSH Research Portal:

 A web based AYUSH Research Portal (http://ayushportal.ap.nic.in) being continued to showcase the research information of all AYUSH systems. CCRAS headquarters and the National Institute of Indian Medical heritage (NIIMH) Hyderabad are coordinating and maintaining the web portal in collaboration with National Information Centre, Hyderabad.

8.1.3.10 National Seminar/ Workshop/ Conference

 During the reporting year, 6 National Seminar/Conference and training workshop have been organized by the Council.

8.1.3.11 IEC/Arogya Fair/EXPO and National Campaigns and International Festivals

- Council has actively coordinated and participated in 14 Arogya Fairs in different States viz. Punjab, New Delhi, Uttar Pradesh, Jammu & Kashmir, Sikkim and West Bengal.
- Council participated in State level Arogya Fair held on 05th – 06th October, 2013 at Garhdhiwal, District Hoshiarpur (Punjab) organized by Department of AYUSH and state Govt. of Punjab. The Arogya Mela was inaugurated by Hon'ble Sh. Ghulam Nabi Azad, Union Minister of Health and Family Welfare and Hon'ble Smt. Santosh Chaudhary, Minister of State for Health and Family welfare, Govt. of India, on 05th October, 2013. The event was organized under guidance & supervision of DG, CCRAS.

8.1.3.12 Foreign Delegations:

 During the year, foreign delegations of 3 three countries viz. Mozambique, Russia, & Fiji visited the Council.

8.1.4 BUDGET

(Rs. in crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	72.50	59.25	131.75
Revised Estimate 2013-14	72.50	60.39	132.89
Expenditure upto March 2014	72.50	60.69	133.19

8.2 CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE (CCRUM)

8.2.1 INTRODUCTION

The Central Council for Research in Unani Medicine, an autonomous organization of Ministry of Health and Family Welfare, Department of AYUSHwas established in the year 1978. The Council started functioning from 10 January 1979 with the following objectives;

- Formulation of aims and patterns of research on scientific lines in Unani Medicine.
- To undertake research or any other programmes in Unani Medicine.
- Prosecution of and assistance in research and propagation of knowledge and experimental measures generally in connection with the causation, mode of spread and prevention of diseases.
- To initiate, aid, develop and coordinate scientific research on different aspects, fundamental and applied, of Unani Medicine, and to promote and assist institutions of research for the study of diseases, their prevention, causation and remedy.
- To finance enquiries and researches for the furtherance of objectives of the Council.
- To exchange information with other institutions, associations and societies

- interested in the objectives similar to those of the Council especially in the observation and study of diseases in the East in general, and in India in particular.
- To prepare, print, publish and exhibit any papers, posters, pamphlets, periodicals and books for furtherance of the objectives of the Council and to contribute to such literature.

8.2.2 INFRASTRUCTURE

The research activities of the Council are being carried out through a network of 23 centres functioning in different parts of the country.

8.2.3 RESEARCH PROGRAMMES

The areas of research include clinical research, drug research, survey and cultivation of medicinal plants programme and literary research. Besides, information, education and communication (IEC) activities and extension health services are also continued with a view to popularise the Unani system among the masses.

8.2.4 ACHIEVEMENTS

During the reporting period, the following research activities were continued. Programme-wise achievements are as follows;

8.2.4.1 CLINICAL RESEARCH

• Pre-clinical safety evaluation studies: Six new Pre-clinical studies were started. Acute and sub-acute toxicity studies on three drugs were completed. Sub-chronic toxicity studies were in progress. Chronic toxicity studies on eight drugs conducted in collaboration with other scientific institutions/universities completed. Besides Pre-clinical feasibility studies on four drugs in collaborative mode with a pharmacy college also completed.

- Clinical studies: Multicentric randomized controlled trials on four diseases viz; Ziabetus Sukkari (Diabetes mellitus), Zaghtuddam Qawi Lazmi (Essential Hypertension), Iltehab-e-Kabid (Infective hepatitis) and Bars (Vitiligo) were in progress. A sample size of 150 patients completed in these studies. Open level and comparative trials on new investigational drugs in Bars (Vitiligo), Iltehab-e-Tajaweef-e-Anf (Sinusitis), Daus Sadaf (Psoriasis), Waja-ul-Mafasil (Rheumatoid arthritis), Tahajjur-e-Mafasil (Osteo arthritis), Tashahhum-e-Kabid (Fatty liver), Iltehab-e-Kabid (Infective hepatitis) and Daul Feel (Filariasis) continued at 10 centre of the Council. Clinical trials on eight drugs completed during the reporting period.
- Validation of Unani Pharmacopoeial drugs: Validation of efficacy and safety of 25 Unani Pharmacopoeial/classical formulations in 10 disease conditions were continued on larger sample size at 15 centres of the Council. Besides, validation studies on 15 new Pharmacopoeial/classical formulations in 10 diseases were also allotted during the reporting period. A sample size of 846 patients has been completed in these studies. Studies on twenty drugs in ten diseases completed during the reporting period.
- Collaborative clinical studies:
 Four collaborative clinical studies on diseases viz; Daus Sadaf (Psoriasis) at All India Institute of Medical Science (AllMS), New Delhi, Qarah-e-Meda wa Asna-e-Ashari (Duodenal Ulcer) and Iltehab-e-Kabid (Infective hepatitis) and Gastro-oesophageal reflex disease (GERD) at Owaisi Hospital, Deccan Medical College, Hyderabad and nano application in converting Unani formulation at Jamia Hamdard, New

Delhi continued. A MoU signed with ICMR for undertaken collaborative research with ICMR Institutions. Modalities for collaboration are in process.

- Fundamental research: Research on fundamental aspects of Unani medicine continued with a view to validate the concepts of humour and temperament scientifically correlating these concepts with various physiological, bio-chemical and pathological parameters. Study on susceptibility of acquiring diseases in relation to the temperament was completed. Six new projects were initiated during the reporting period. A sample size 469 patients have been completed in these studies.
- Validation of regimenal therapies:
 Validation of the efficacy of Unani
 Regimenal therapy viz; Hajamat
 (Cupping) in Amraz-e-Mafasil
 (musculoskeletal disorders) was
 continued at two centres of the Council.
 A sample size of 76 patients has been
 completed in these studies.

8.2.5 EXTENSION HEALTH SERVICES

- General out-patient departments (GOPDs) at the Council's centres Research oriented General OPDs continued at 20 centres of the Council. During the reporting period a total of 2,81,747 new patients were registered. These patients were treated with the Unani Pharmacopoeial/Classical drugs.
- Mobile OPD in rural areas/urban slums/tribal pockets Eleven mobile units attached to different Institutes/ Units under the Council continued mobile OPDs programme in 30 adopted pockets. A total of 39054 new patients were registered. These patients were provided free treatment

for their ailments at their door steps. Besides health awareness programme was also conducted in the adopted pockets creating awareness about the potentialities of Unani medicine in the prevention of disease and the promotion of health.

- School Health Programme Under the school health programme, health check-up of 5,355 children was conducted in 10 schools. Children suffering from different common aliment were treated with Unani drugs. Health awareness was also created among the school children through health lectures organized by the physicians of the Council in the Schools adopted under this programme.
- Activities under Gender Component Plan Under Gender Component Plan, a total of 2,15,470 female patients were attended at GOPD, mobile OPD, School Health and Unani Speciality Centres and treated for their aliment with Unani drugs. Besides research/validation studies also conducted on diseases specific to female such as; Sailan-ur-Rahem (Leucorrhoea), Kasarat-e-Tams (Menorrhagia) etc.
- Activities in North-eastern Region
 The three centres of the Council functioning in the north-eastern region registered 13,030 new patients in the general OPD. These patients were treated with Unani drugs.
- Unani Centres at Allopathic Hospitals
 The two Unani Speciality Centres
 functioning one each at Dr. Ram
 Manohar Lohia Hospital and Deen
 Dayal Upadhaya Hospital, New Delhi
 registered a total of 39,923 new
 patients. These patients were mostly of
 chronic ailments switching over from
 Allopathic medicine to Unani system
 of medicine.

- Drug Standardization Research Work on development of Standard Operating Procedures (SOPs) for method of manufacture followed by their Pharmacopoeial standards was completed on 80 drugs. Besides, monograph on 35 drugs studied during 2012-13 were compiled for incorporation in the next volume of Unani Pharmacopoeia of India.
- Unani Pharmacopoeia of India Part II, Vol. 3 and National Formulary of Unani Medicine Part – II, (Hindi Version) were approved by Unani Pharmacopoeia Committee (UPC) and Pharmacopoeia Commission of Indian Medicine (PCIM). These will be printed by NISCARE as per direction of PCIM.
- Survey & Cultivation of Unani Medicinal Plants Programme Ethno botanical surveys in different forest areas including South Wayanad Forest Division (Kerala); Angul, Bhadrak and Dhenkanal Forest Division (Odisha); Nizamabad and Atmakur Forest Division (Andhra Pradesh); Sindh Valley, Gurez and Batote Forest Division (Jammu & Kashmir) were conducted collecting 3107 botanical specimens belonging to 1079 species. All these species were identified. Besides, 392 folklore claims on medicinal uses of plants were also recorded from the local inhabitants. During field studies 509 saplings of plants were collected and preserved. Two thousand three hundred and eight herbarium sheets were mounted and 532 new index cards compiled and 785 cards updated. Cultivation of 12 important medicinal plants species continued at herb gardens of the Council. Eight hundred and sixty Kg of raw drugs were yielded from these cultivations.

- Literary Research Programme Urdu translation of two classical books was completed whereas translation work on one book was in progress. Besides, two out of print classical bookswere got re-printed.
- Standard treatment guidelines of Unani treatments for 70 diseases were compiled. Out of these treatment guidelines for 50 diseases were vetted and finalized for publication.

8.2.6 INFORMATION EDUCATION COMMUNICATION (IEC) ACTIVITIES

8.2.6.1 Organization of Workshops

The Council organized ten seminars/ workshops/brain storming sessions in different disciplines.

8.2.6.2 Human Resource Development

The Council organised five training programme for the scientists in different disciplines to update their skills. During the reporting period, 40 scientists were deputed in different training programmes.

8.2.6.3 Publication of Research Papers

Based on the research studies conducted in different research programmes, 35 research papers were published in reputed scientific journals.

8.2.6.4 IEC Activities

The Council participated in 86 AROGYAs, health exhibitions and health camps organized by other agencies. Besides the Council's Centres also organized health camps during the reporting period. Fifty health camps were organized. In the camps apart from healthcounseling to the patients Unani treatment was also provided to the patients.

8.2.6.5 Capital Work / Infrastructure development

Construction of the building for Central Research Institute of Unani Medicine,

Lucknow is nearing completion. Construction work at Regional Research Institutes of Unani Medicine, Patna, and additional construction at Central Research Institute of Unani Medicine, Hyderabad were in progress. The Council acquired around 2 acres of land allotted by State Government of Assam for construction of building for Regional Research Centre (RRC), Silchar.

8.2.7 BUDGET

(Rs. in crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	65.00	36.50	101.50
Revised Estimate 2013-14	64.77	38.45	103.22
Expenditure upto March 2014	64.77	38.81	103.58

8.3 CENTRAL COUNCIL FOR RESEARCH IN HOMOEOPATHY (CCRH)

8.3.1 INTRODUCTION

The Central Council for Research in Homoeopathy is an autonomous organization of Department of AYUSH, Ministry of Health and Family Welfare, Government of India, committed to research and advancement in Homoeopathy. The Council was established on 30th March, 1978.

8.3.2 INFRASTRUCTURE

The Council with its Headquarters at New Delhi has a net work of 32 Institutes/ Units/Centres. The Council has two Central Research Institutes, eight Regional Research Institutes, one Homoeopathic Drug Research Institute, eleven Clinical Research Units, one Drug Standardization Unit, One Clinical Verification Unit, One Survey of Medicinal Plants and Collection Unit.

8.3.3 ACHIEVEMENTS

8.3.3.1 Clinical Research Programme:

Clinical Research is one of the major research activities of the Council. The

initial clinical trials were observational studies but now the Council is undertaking pragmatic and Randomized Controlled studies. The continued multi-centric enrollment in following studies:

- Homoeopathic therapy for lower urinary tract symptoms with Benign Prostatic Hyperplasia: An open randomized multicentric placebo controlled clinical trial.
- Sepia in Menopausal Symptoms: A multi-centre randomized double blind placebo controlled clinical trial.
- Lycopodium clavatum in Urolithiasis:
 A randomized, double blind, placebo controlled clinical trial.
- Homoeopathy as adjunctive treatment to resperidone/ olanzipine in treatment resistant patients of schizophrenia: An open label randomized placebo controlled trial.
- Efficacy of homoeopathic treatment for Diabetic Distal Symmetric Polyneuropathy: A multicentric randomized double blind placebo controlled clinical trial.
- A randomized open controlled trial of predefined homeopathic medicines on Acute Adenolymphangitis (ADL) due to Lymphatic Filariasis.
- A single-blind, open randomized, placebo-controlled trial of add-on homoeopathic therapy in patients of severe leptospirosis on conventional care.
- Adjuvant Homoeopathic Management for breast cancer patients experiencing side effects from chemotherapy - An observational pilot study.
- Effectiveness of homeopathic medicines-vs-placebo as add on to institutional management protocol for

Acute encephalitis syndrome (AES) – An observational study (concluded in the reporting year).

- A randomized, placebo controlled, cross-over, clinical trial of homoeopathic medicines in Autism.
- Comparative Trial in the Management of Alcohol Dependence: Standard Allopathy treatment vs. Homoeopathya randomized trial.
- A multi centre randomized double blind placebo controlled clinical trial of predefined homoeopathic medicines in Cervical Spondylosis pain management (concluded in the reporting year).
- A randomized double blind placebo controlled multicentric trial on the effects of Homoeopathic medicines on Chronic Rhinosinusits.
- Efficacy of homoeopathic therapy on duration of labour- A randomized, placebo controlled trial.

The Special Committee for Clinical Research, Scientific Advisory Committee, Ethical Committee and the Standing Finance Committee approved 05 new protocols and Council initiated following studies:

- A Comparative Randomized Controlled Trial of Homoeopathy & Allopathy in Acute Otitis Media & its recurrence in Children.
- Individualized Homoeopathic intervention in Diabetic Foot Ulcer: A randomised controlled pilot study using Calendula Q vs normal saline for ulcer dressing.
- A multi centre single blind randomized placebo controlled trial to evaluate the efficacy of individualized homoeopathic intervention in Breast fibroadenoma.

 Management of Polycystic Ovarian Syndrome with homoeopathic intervention versus placebo- A randomized controlled pilot study.

Preliminary screening is initiated in the study on Gastro Esophageal Reflux Disease (GERD). Three of these five studies initiated are Randomized Controlled Trials. Pre-trial preparations like training of investigators and completion of codal formalities have been completed for studies on:

- Effectiveness of homeopathic medicines-vs.-placebo as add on to institutional management protocol for Acute encephalitis syndrome (AES): A randomized controlled trial.
- Effects of Homoeopathic intervention in Stage I essential hypertensive patients: A randomized double blind, placebo controlled trial.
- Effect of individualized homoeopathic intervention in dyslipidemia: An open label randomised controlled exploratory trial.
- Effects of Homoeopathic intervention in pre-diabetes (EHIP): An open label randomized controlled exploratory trial.
- Comparing individualized homoeopathy with placebo in managing pain of knee osteoarthritis: a double-blind randomized controlled trial.
- Observational study to evaluate response to homoeopathic treatment in Psoriasis.
- Follow up cross sectional study of subclinical hypothyroid children post three years of treatment.
- Two new studies on Multi-Drug Resistant Pulmonary Tuberculosis and HIV Infection are pending financial approval.

The results of following clinical research studies are published in peer reviewed journals:

- Prospective multi-centric open clinical trial to evaluate the usefulness of homoeopathic medicines in the management of Diabetic Distal Symmetric Polyneuropathy. Homeopathy 2013, 102(2):132-138.
- Homoeopathic medicines in the management of benign prostatic hyperplasia: A multicentric prospective observational study. Indian Journal of Research in Homeopathy. 2012; 6(3): 16-25.
- Effect of homoeopathic LM potencies in acute attacks of haemorrhoidal disease: A multicentric randomized singleblind placebo-controlled trial. Indian Journal of Research in Homoeopathy 2013;7(2):72-80.
- Homoeopathic management in depressive episodes: A prospective, unicentric, non-comparative, openlabel observational study. Indian Journal of Research in Homoeopathy, 2013; 7(3): 116-125.
- Effect of individualized homoeopathic treatment in influenza like illness: A multicenter, single blind, randomized, placebo controlled study. Indian Journal of Research in Homeopathy, 2013;7(1):22-30.
- Homoeopathic management of attention deficit hyperactivity disorder: Randomized placebo controlled pilot trial. Indian Journal of Research in Homeopathy, 2013; 7(4): 158-167.

8.3.3.2 Drug Standardization

The Council has assigned drug standardization studies on eight drugs for the year 2013 – 14 viz. Bryophyllum calycinum, Cassada (Manihot esculenta), Lobelia erinus, Mentholum and Magnesium fluoratum including drugs assigned in previous years to both Drug Standardisation centers of the Council. Pharmacognostic and physico-chemical studies on following drugs viz., Cassada (Manihot esculenta), Lobelia erinus, Bryophyllum calycinum, Magnesium fluoratum and Mentholum from current year as well as drugs Rumex crispus, Commiphora wightii, Erigeron Canadensis from backlog assignments have been completed during the reporting year, 2013-14.

The identification data on 50 drugs have been provided for the forthcoming Volume X of Homoeopathic Pharmacopoeia of India for inclusion. As per the Action Plan 2013 – 14 for Homoeopathic Pharmacopoeia of India, ten pharmacopeial monographs viz., Cupressus lawsoniana, Datura ferox, Plumbum iodatum, Mercurius sulphuricus, Lobelia erinus, Cassada (Manihot esculenta), Plectranthus fruticosus, Bryophyllum calycinum, Magnesium fluoratum and Mentholum have been prepared for inclusion in HPI.

8.3.3.3 Survey of Medicinal Plants & Collection

The Medicinal Plants & Collection Unit (SMPCU), located at Emerald, Tamil Nadu have conducted twelve medico-botanical exploration cum raw drug plant material collection tours (4 major and 08 local) and three literature survey/herbarium consultation tours during the reported financial year. The Unit has also collected and supplied seven drugs, viz. Cassada (Manihot esculenta), Lobelia erinus, Bryophyllum calycinum, Rumex crispus, Juniperus communis, Erigeron Canadensis and Commiphora wightii to various Drug Standardization centres of the Council. SMPCU is also maintaining the cultivation of 64 exotic and 13 indigenous medicinal plants used in Homoeopathy in its medicinal plants research garden.

8.3.3.4 Drug Proving:

During the period from April 2013 – March 2014 the drug proving of 06 drugs is in progress and 05 drugs have been completed. Council is also considering homoeopathic proving of allopathic drugs whose therapeutic indications and toxic effects are well known. The data of 10 proved drugs has been approved by Special Committee of Drug Proving and published in the form of Drug Proving Volume 5.

Council will continue to prove indigenous drugs and fragmentarily proved drugs. Council is continuously looking for the ways to improve the quality of proving and that is why it is considering the international drug proving protocols. Council has organized an Interactive meet on GLOBAL HARMONIZATION OF DRUG PROVING PROGRAMS with Dr. Robbert van Haselen, Editor-in-Chief of Complementary Therapies in Medicine from 17th to 21st September 2013. Council has also motivated post graduate Homeopathic Medical Colleges to take up the drug proving research program. 14 colleges have already given their consent. Council is drafting a training module on drug proving for faculty of these colleges.

8.3.3.5 Clinical Verification:

Clinical Verification of 23 assigned drugs was continued during the reporting period and 1641 cases have been enrolled. Out of these 23 drugs, 17drugs have completed the target and withdrawn from the study. Verification on remaining 06 drugs is in progress and 336 cases have been enrolled in the study on these 10 drugs. During the reporting period two monographs viz. Cassia fistula and Thea chinensis have been published.

8.3.3.6 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. This increase in research activity is attributed to clinical efficacy & safety of homoeopathic medicines. Since inception of fundamental and collaborative research section in 2005, Council has collaborated with best of intellectual minds to undertake state of art research in fundamental and clinical aspects. This liaison has opened a new era of research in homoeopathy. The main objective of the collaborative studies is to conduct evidence-based, inter-disciplinary research studies and to validate the efficacy/ concepts of Homoeopathy on scientific parameters. A brief account of work done during this period is given below:

A study titled, 'Safety and efficacy studies of Homoeopathic drugs' was conducted in collaboration with All India Institute of Medical Sciences, New Delhi. The study concluded that dose of 04ml/kg of body weight in tested mice was non-toxic. Curcuma longa and Tribulus terrestris mother tinctures showed significant anti-inflammatory and anti-arthritic activities in mice compared to other 05 drugs. The manuscript of the study is under review for publication.

A study titled, 'Preliminary pharmacological studies of Homoeopathic drug' was conducted in collaboration with All India Institute of Medical Sciences, New Delhi. The study concluded that dose of 04ml/ kg of body weight in tested mice was non-toxic. The mother tincture of Bellis perennis, Curcuma longa, Ricinus communis and Terminalia arjuna demonstrated anticonvulsant activity in rodents. The mother tinctures of Curcuma longa, Rauwolfia serpentina, Ricinus communis, Tribulus terrestris and Terminalia arjuna possess antihypertensive properties. The manuscript of the study is under review for publication.

A study titled 'Role of homoeopathic medicines in cancer regression and rejuvenation of depressed immune system: a mechanism study' was undertaken in collaboration with Bose Institute, Kolkata. The study aimed at exploring the role of homoeopathic medicines in tumor growth and to understand the apoptogenicity of homoeopathic medicines on cancer cells with emphasis to explore the immunomodulatory properties. The results of experiments with Thuja showed that it was able to induce cancer cell death via p53 gene pathway in mammary epithelial carcinoma cells. The results have been published in the Oncology Reports: 2014 Jan 24. doi: 10.3892/or.2014.2993

Homoeopathy has been used clinically in various obstetrical conditions including labour since inception, but there is a paucity of reported randomized trials in this area. A randomized, placebo controlled trial titled, 'Efficacy of homoeopathic therapy on duration of labour' was undertaken in collaboration with Sri Aurobindo Institute of Integral Health and Research, Cuttack. The primary objective of this study was to ascertain the efficacy of homoeopathic therapy on duration of labour. The study explored the use of 07 homoeopathic medicines (Actea racemosa, Belladonna, Caulophyllum, Gelsemium, Nux vomica, Pulsatilla and Secale cor.) in management of prolonged labour. The study enrolled a total of 73 participants.

Nine projects are currently ongoing in different areas with institutes of repute like 'Action of homoeopathic medicines and potencies on heart rate variability (HRV) and blood flow variability (BFV) with medical Analyzer System' at Dr. A.C. Homoeopathic Medical College, Bhubaneswar, Extension unit of RRI(H), Puri, & RRI(H), Mumbai; 'In vitro studies of some Homoeopathic medicines on the proliferation and differentiation of neural stem cell' at School of Biotechnology,

West Bengal University of Technology, West Bengal; 'To evaluate certain homoeopathic medicines for their immuno- modulatory and antioxidant potential' at Indian Veterinary Research Institute, Izatnagar, Uttar Pradesh; Evaluation of anti-fungal activity of certain homoeopathic medicines on growth of human pathogenic fungi 'Candida albicans' using in-vitro assays, Evaluation of anti-fungal activity of certain homoeopathic medicines on growth of human pathogenic fungi 'Aspergillus niger' using in-vitro assays, Evaluation of antifungal activity of certain homoeopathic medicines on growth of human pathogenic fungi 'Microsporum cani' using in-vitro assays, Screening of antibacterial activity of certain homoeopathic medicines on the growth of human pathogenic Gram negative bacterial strain "Escherichia coli" in-vitro models, Screening of antibacterial activity of certain homoeopathic medicines on the growth of human pathogenic Gram negative bacterial strain 'Klebsiella pneumonia' invitro models and Screening of antibacterial activity of certain homoeopathic medicines on the growth of human pathogenic Gram negative bacterial strain "Proteus mirabilis" in-vitro models at Central Research Institute (H), Noida.

8.3.3.7 Documentation & Publication:

Research is never complete until the outcome of research is disseminated to the stakeholders be it clinicians, researchers, teachers, students, industry and the common man. Effective communication channelizes information exchange and spreads awareness on scientific and technical issues among general public, researchers and professionals. In the reporting period from 1st April 2013 – 31st March 2014, four issues each of the periodical publications i.e. Indian Journal of Research in Homoeopathy and three issues of CCRH News have been published and next issue is being compiled. Four issues of the periodical Current Health



Sh. Nilanjan Sanyal, Secretary (AYUSH) at Inaugural function of Global Harmonization of Drug Proving and Clinical verification Programme at CCRH Hqrs.

Literature Awareness Services have been published. Annual report (2012-13) of the Council was submitted to both houses of Parliament. The major achievement of this period is that Council's research journal has become 'Open Access Online' for wider and easy accessibility. Five books including drug monographs Cassia fistula, Thea chinensis and Alfalfa, Drug proving Volume - 5 and Vernacular names of Plant Drugs in Homoeopathic Pharmacopoeia of India have been published. Compilation of one drug monograph and one disease monograph are under progress. IEC material on BPH and Menopause has been published. Council's publications have been made available for sale online. The conversion of Council's publications into e-books is in progress.

8.3.4 BUDGET

(Rs. in crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	62.00	17.69	79.69
Revised Estimate 2013-14	62.00	17.32	79.32
Expenditure upto March 2014	62.00	16.74	78.74

8.4 CENTRAL COUNCIL FOR RESEARCH IN YOGA & NATUROPATHY (CCRYN)

8.4.1 INTRODUCTION

Central Council for Research in Yoga and Naturopathy (CCRYN) is an autonomous body under the Department of AYUSH, Ministry of Health & Family Welfare, Government of India for conducting scientific research, training and propagational activities in the field of Yoga and Naturopathy.

8.4.2 ACHIEVEMENTS

Research studies were conducted at various premier Medical, Yoga and Naturopathy institutions for establishing the efficacy of Yoga and Naturopathy in prevention and management of various diseases/ disease conditions. The Council has also published the research findings of completed Research Projects in form of Research Monographs. 12 monographs and 42 research papers have been published by the Council and Project Investigators.

- Fellowship to Ph.D. Scholars:
 Fellowship is given to the students pursuing Ph.D. in the field of Yoga and Naturopathy. During the year under report, 6 (six) Fellowships were continued.
- Health Care Services-OPDs, Yoga Classes: The Council is running 8 (eight) Yoga and Naturopathy OPDs, one at CCRYN (HQ), one at Trivandrum and remaining six in leading Government Hospitals in Delhi and Rohtak, Haryana. Free Yoga classes are conducted in these OPDs except at Hq. and CRI, Rohini, Delhi. Naturopathy treatment facilities are also provided to patients at Yoga and Naturopathy Hospital, Rohini, Delhi. Besides this, 12 Yoga classes are also conducted at Headquarter (six), Udyog Bhawan (two) and at

- Integral Health Clinic, Department of Physiology, AllMS, New Delhi (four).
- Workshop: A 'Training Workshop on Research Methodology' inaugurated by Hon'ble Secretary, Department of AYUSH was successfully conducted by the Council for AYUSH officers from the Research Councils and Institute between 03.02.2014 to 07.02.2014.
- Participation in Arogyas: The Council also participated in 18 (eighteen) Arogya melas under its propagational activities to show case the health care benefits of Yoga and Naturopathy.

8.4.3 INFRASTRUCTURAL DEVELOPMENT

Establishment of Central Research Institutes (CRIs) with 100 bedded Hospital facilities have been taken up to carry out much



Sh. Nilanjan Sanyal, Secretary, Deptt. of AYUSH inaugurated the 'Training Workshop on Research Methodology' conducted by CCRYN.

needed in-house research work for determining the true potential of these sciences. The details of the various projects are as under:-

- Central Research Institute for Yoga & Naturopathy (CRIYN), Delhi: Possession of Yoga & Naturopathy Hospital Building has been taken and MoU with MCD has been signed. OPD is functional with Yoga & Naturopathy treatment facilities for the benefit of common people.
- Central Research Institute (CRI), Nagamangala, Karnataka: Possession of 15 acres of cost free land provided by Government of Karnataka has been obtained and funds to the tune of Rs.667.04 lakh had been released to NPCC Ltd. (a Govt. of India Enterprises). Around 95% of the first phase of construction work has been completed
- Central Research Institute (CRI), Jhajjar, Bahadurgarh, Haryana: Possession of 10 acres of cost free land provided by Government of Haryana has been obtained and funds to the tune of Rs.590.17 lakh had been released to NPCC Ltd. (a Govt. of India Enterprises). 95% of 1st phase of construction work is completed.
- Central Research Institute (CRI), Bhubaneswar, Odisha: 20 acre cost free land has been sanctioned by the Government of Odisha for establishment of CRI of CCRYN at the outskirts of Bhubaneswar. The alienation of land in favour of CCRYN is at final stage.
- Central Research Institute (CRI),
 West Bengal: 'In principle' approval
 of Hon'ble Minister of Health and
 Family Welfare for acceptance of the
 cost free land from the Government
 of West Bengal for setting up of a CRI
 including 100 bedded hospital on

- Yoga & Naturopathy (CRIYN) has been obtained.
- Efforts are also being made to explore possibilities to establish more such CRIs of Yoga and Naturopathy in the country for extensive research in the field.

8.4.4 BUDGET

(Rs. in crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	13.80	2.24	16.04
Revised Estimate 2013-14	4.50	2.15	6.65
Expenditure upto March 2014	4.50	2.15	6.65

8.5 CENTRAL COUNCIL FOR RESEARCH IN SIDDHA (CCRS)

8.5.1 INTRODUCTION

Central Council for Research in Siddha was established as per the cabinet approval by bi-furcating the erstwhile Central Council for Research in Ayurveda and Siddha to promote focused research in Siddha system of Medicine. The council has been registered under the Tamilnadu Societies Registration Act, 1975, on 27th July, 2010 in Chennai. The council is continuing its activities in the areas of Medicinal Plants Research (Medico-ethno Botanical Survey, Cultivation, Pharmacognosy), Drug Standardization, Pharmacological Research, Fundamental Research, Clinical Research and Literary Research.

8.5.2 INFRASTRUCTURE

The research activities are carried out through its institutes in Chennai, Puducherry, Palayamkottai, Thiruvananthapuram and medicinal plants garden, Mettur, Tamilnadu. The steps for construction of CCRS Headquarters in Chennai has been initiated on the land allotted to National Institute of Siddha at Tambaram, Chennai, Tamil Nadu.

Sl. No.	Institutes / Units	Abbreviations
1.	Siddha Central Research Institute, Chennai.	SCRIC
2.	Siddha Regional Research Institute, Puducherry.	SRRIP
3.	Siddha Regional Research Institute, Thiruvananthapuram.	SRRIT
4.	Siddha Clinical Research Unit, Palayamkottai.	
5.	Siddha Medicinal Plants Garden, Mettur.	SMPGM

8.5.3 ACHIEVEMENTS

8.5.3.1 Clinical Research

During the reporting period the council has completed Clinical trials on Diabetes (Neerizhivu), Psoriasis (Kalanjagapadai), Fibroid Uterus (Karuppai sathai Kattigal) and Kalladaippu (Urolithiasis). The trial drugs for Osteo-arthritis (Azhal Keel Vayu), Vitiligo (Venpulli), Sinusitis (Peenisam), Hepatitis (Kalleral Azharchi) and Cervical Spondylosis (Ceganavatham) have undergone preclinical studies. Institution Ethical Committee (IEC) approval has been obtained for multicentric studies in Hyperlipidaemia and for observational studies specific to add-on therapy in diabetes, patients seeking behavior in Siddha hospitals and Assessment of Body constitution (Udaliyal).

8.5.3.2 Health Care services

A Total number of 78908 patients benefited by the 4 Clinical OPD institutes of CCRS. Besides this a total number of 184 patients were admitted in the In-patient Department of the Institutes of SCRI, Chennai and SRRI, Puducherry and the bed occupancy ratio of SCRI, Chennai is 21.8% and SRRI, Puducherry is 12.21%

8.5.3.3 Specialty Clinics

A specialty clinic for Geriatric care on every Tuesday is being run by the peripheral institutes/units and a total number of 10136 elderly patients are benefited by this. Special flu-like illnesses OPD is being run by 2 peripheral units and such cases are treated here. A total number of 61 patients reported in the current year. A specialty

clinic on Varmam and Thokkanam Therapy was established in Siddha Regional Research Institute, Puducherry, SRRI, Trivandrum and SCRI, Chennai and 4658 patients are benefited by the Varmam OPD. Traditional Bone setting OPD is conducted in SCRI, Chennai. One case of ADR has been reported in the PVR cell and dechallenged.

8.5.3.4 Drug Standardization

Standardization of 43 single drugs and 8 compound formulations have been completed. Safety and toxicity studies have been completed for three formulations and efficacy study of three drugs have been completed.

8.5.3.5 Medicinal Plants cultivation

54 specimens were collected and stored in the museum of Medicinal Plants Garden.
3 Survey tours have been completed. Construction of Petaloid pond with fountain and erection of Agathiyar statue and establishment of model garden phase ii with 105 plants have been completed utilizing funds received through NMPB project. 13 folklore claims have been documented. Under demonstrative cultivation of medicinal plants 5 new species were cultivated.

8.5.3.6 Literary Research and Documentation

21 Types of IEC materials and 10 brochures in different languages have been brought out. Compilation of Clinical trial protocols for life style diseases has been brought out. A booklet on "A-Z Medicinal plants – Know your alphabets through Siddha medicinal plants" has been completed. Monographs

on preclinical studies on Diabetes and Fibroid uterus are under compilation.

8.5.3.7 Siddha Pharmacopoeia Committee

- The Siddha Pharmacopoeia Committee with the mandate of establishing quality parameters for Siddha drugs and its formulations is working under the auspices of Dept. of AYUSH. It is currently functioning at SCRI, Chennai. As a part of its work, the Siddha Pharmacopoeia of India, Part I, Vol. II has been published in 2011.
- A meeting of Siddha Pharmacopoeia Committee was held on 26th March 2014. In the meeting, it was suggested to modify the "The Siddha Pharmacopoeia of India, Part I, Vol. III" which has reached the stage of final drafting as per the new format recommended by PCIM.
- Preparation of the Siddha Pharmacopoeia of India, Part I, Vol. IV has also been initiated during the reporting period.
- The Siddha Formulary of India, Part II (Tamil) has been published in the reporting period and the Siddha Formulary of India, Part I, 1st revised Edition (Tamil) has been approved by the SPC.

8.5.4 BUDGET

(Rs. in crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	15.00	13.31	28.31
Revised Estimate 2013-14	11.00	8.00	19.00
Expenditure upto March 2014	11.00	6.00	17.00

8.6 EXTRA MURAL RESEARCH

8.6.1 INTRODUCTION

During the 9th Five Year plan, the Department of AYUSH introduced a Scheme

for Extra-Mural Research in addition to the intra-mural research undertaken by the Research councils set up by the Ministry of Health and Family Welfare. The scheme is ongoing since then. The Extra Mural Research Scheme of Department of AYUSH is designed to encourage R&D in priority areas. It also aims to utilize the vast research infrastructure available within the country. The output from this scheme has improved over the years. The Department has supported projects on clinical trial, quality control, consistency of products etc. submitted by scientists/faculty working in University, State Government and Central Government scientific institutions etc.

8.6.2 OBJECTIVES

- To develop Research and Development (R & D) based AYUSH Drugs for prioritized diseases
- To generate data on safety, standardization and quality control for AYUSH products and practices
- To develop evidence based support on the efficacy of AYUSH drugs and therapies;
- To encourage research on classical texts and investigate fundamental principles of AYUSH Systems
- To generate data on heavy metals, pesticide residues, microbial load, safety/toxicity etc. in the raw drugs and finished Ayurveda, Siddha, Unani and Homoeopathy drugs;
- To develop AYUSH products having Intellectual Property Rights (IPR) potential for increasing AYUSH exports
- To develop the potential Human Resource in AYUSH systems, especially to inculcate scientific aptitude and expertise relating to AYUSH systems;

 To develop joint research venture among the AYUSH Department and other Organizations/Institutes.

8.6.3 ACHIEVEMENTS

- 11 New Projects are commenced as per specific parameters in 2013-14.
- 21 Projects were completed in 2013-14.
- 2 Patent application filed in 2013-14.
- 17 Research papers were published in 2013-14.
- 9 Validation of Classical Drugs/ Therapies were done in 2013-14.

- During 2013-14, 4 meetings of Project Evaluation Committee (PEC) and
- Project Approval Committee (PAC) were conducted.
- During 2013-14 the Scheme was evaluated by an Independent Agency.

8.6.4 **BUDGET**:

(Rs. in Crore)

Head	Plan	Total
Budget Estimate 2013-14	4.00	4.00
Revised Estimate 2013-14	2.50	2.50
Expenditure upto March 2014	1.75	1.75

Developing Medicinal Plants Sector in India

9. NATIONAL MEDICINAL PLANTS BOARD (NMPB)

9.1 INTRODUCTION

India has the unique distinction of possessing a substantial bio-diversity of medicinal plants, knowledge associated with their use and a good network of infrastructure required for their promotion, propagation etc. Indian systems of medicine use various raw materials and medicinal plants constitute 90% of it. About 3000 plants species are reported to be used in the codified Indian Systems of medicines like Ayurveda (900 species), Siddha (800 species), Unani (700 species) and Amchi (300 species). The rest of the species are used in local health traditions and in folk systems of medicine. Medicinal plants thus constitute an important component of the plant resource wealth of our country. In addition to their use in the preparation of Traditional medicines, medicinal plants are also being used in preparation of various pharmaceuticals and health products under the modern medicine system.

Keeping in view, the need for availability of authentic raw drugs, the vast potential of herbal product/herbal drugs and the role India could play in the global market; Government of India has taken the lead by establishing National Medicinal Plants Board (NMPB) under Department of AYUSH, Ministry of Health & Family Welfare, Government of India. NMPB is an apex national body which coordinates all matters relating to medicinal plants in the country. The Board which was established

in November 2000, acts as advisory body to the concerned Ministries, Departments and Agencies in strategic planning of medicinal plants related initiatives and to plan and provide financial support to programmes relating to conservation, cultivation and also all round development of medicinal plants sector. The Union Minister of Health & Family Welfare is the Chairperson and the Union Minister of State for Health & Family Welfare is the Vice-Chairperson.

9.2 VISION STATEMENT

To tap the potential and comparative advantage of India in the medicinal plants sector so that it can realise its potential of Global Leadership in this field by comprehensive development of conservation, cultivation, collection, processing, marketing, research and extension support system for the sector.

9.3 STRENGTHS OF INDIA IN THE MEDICINAL PLANTS SECTOR

9.3.1 RESOURCE BASE:

With its 15 Agro-Climatic zones and 16 Forest Types, India is home to 7% of the world's bio-diversity making it one of the 17 mega bio-diversity rich countries in the world. Approximately 15,000 are medicinal plants. About 6000-7000 plants are used in Indian Systems of Medicine, 960 of these have been recorded in trade and 178 are traded in high volumes, in quantities exceeding 100 Metric Tonne (MT) per year. This richness of resources coupled with a well codified and documented traditional knowledge of use of this resource and state of the art modern scientific capability for validating

this knowledge gives India considerable comparative advantage in the medicinal plants sector over other countries.

9.3.2 Traditional Knowledge:

The Indian Systems of Medicine like Ayurveda, Siddha, Unani and Sowa Rigpa are well codified and documented. These systems are officially recognized and have been validated through centuries of practice and today form an integral part of therapies being opted for by the people at large.

Modern Scientific capability: There are scientific institutions both government owned as well as in the private sector which are equipped with state-of-theart infrastructure and skilled manpower dedicated to research in medicinal plants required for validation of this knowledge.

Regulatory Regimes: We have enabling regulations to address cross cutting issues of resource augmentation and its use in line with emerging global protocols. India is one of the first countries to set up a National Biodiversity Authority in keeping with the CBD.

9.4 SCHEMES

NMPB is currently implementing the following schemes.

- Central Sector Scheme for "Conservation, Development and Sustainable Management of Medicinal Plants"
- Centrally Sponsored Scheme of "National Mission on Medicinal Plants"

9.5 ACHIEVEMENTS

9.5.1 CENTRAL SECTOR SCHEME FOR "CONSERVATION, DEVELOPMENT AND SUSTAINABLE MANAGEMENT OF MEDICINAL PLANTS"

The scheme is a revised version of the Central Sector Scheme implemented by the Board till 2007-08. Financial assistance

is provided under the scheme for survey, inventorisation and in-situ conservation, ex-situ conservation/ herbal garden, linking with Joint Forest Management Committees, Research and Development, establishing quality standards and certification, capacity building, promotional activities etc.

Achievements under this scheme during 2013-14 till 31st March 2014 are:-

- Supported 5887.54 hectares under Resource Augmentation of Medicinal Plants.
- Supported 3200 hectares to cover nineteen Medicinal Plants Conservation Areas (MPCAs).
- Supported 491 Joint Forest Management Committees (JFMCs) in States, for livelihood augmentation.
- Supported projects for setting up of Herbal Gardens, School Herbal Gardens and Home Herbal Gardens.
- Supported Research Studies on:
 - Bioactivity guided fractionation studies
 - Sustainable harvesting
 - Inter-cropping
 - Chemical and Molecular Profiling
 - Production of Quality Planting Material
 - Germplasm and Genotype Identification and Conservation
 - Agrnomics & Market dynamics
 - Insect / pest management through bio-control
 - Authentication, multiplication and substitution of RET plants
 - Quality assessment and evaluation of pesticides and heavy metals
 - Value added products
- Published Volume-II of Agro-Techniques for 32 selected medicinal plants.

9.5.2 BUDGET

(Rs. In crores)

Head	Plan	Total
Budget Estimate 2013-14	70.00	70.00
Revised Estimate 2013-14	70.00	70.00
Expenditure upto March 2014	61.86	61.86

9.6 CENTRALLY SPONSORED SCHEMES OF "NATIONAL MISSION ON MEDICINAL PLANTS"

The National Medicinal Plants Board is implementing a Centrally Sponsored Scheme of "National Mission on Medicinal Plants". The Scheme is primarily aimed at supporting medicinal plants cultivation on private land with backward linkages for establishment of nurseries, for supply of quality planting material and forward linkages for post-harvest management, marketing infrastructure, certification and crop-insurance in a project mode. This is being achieved by cultivation of medicinal plants in identified zones/clusters within selected districts of States having potential for cultivation of such plants and promoting such cultivation following good agricultural practices through Farmers, Cultivators, Growers, Associations, Federations, Self Help Groups, Corporates and Growers Cooperatives.

Financial assistance amounting to total Rs. 52.52 Crore to 18 States has so far been released during the year. (upto 31st March, 2014) for the following:

1	Setting-up of Nurseries (in nos)		83
2	Culti	vation (area in Hectare)	33157 ha.
3	Post-	Harvest Management	
	(a) Drying sheds (in No.s)		38
	(b)	Storage Godowns (in No.s)	40
4	Buy-back intervention		17
5	Mark	et promotion	5

9.6.1 BUDGET

(Rs. in crores)

Head	Plan	Total
Budget Estimate 2013-14	70.00	70.00
Revised Estimate 2013-14	67.47	67.47
Expenditure upto March 2014	54.31	54.31

9.7 OTHER IMPORTANT ACTIVITIES

9.7.1 Strengthening of State Medicinal Plants Boards:

Financial assistance is being provided to State Medicinal Plants Boards for their day-to-day activities including the monitoring of sanctioned projects. At present 35 State Medicinal Plants Board have been constituted in different States and Union Territories.

9.7.2 Third party Monitoring and Evaluation of project sanctioned by NMPB:

In order to strengthen the monitoring and evaluation mechanism by third party (M/s. Agricultural Finance Corporation Ltd.), the NMPB had entrusted the monitoring and evaluation work of both of its schemes for the years 2011-12 & 2012-13. This monitoring continued in 2013-14 for both the schemes of NMPB.

9.7.3 Awareness raising

A series of workshops and seminars were supported in different parts of the country aimed at creating awareness on Medicinal Plants and disseminating findings of important R&D projects funded by NMPB

9.7.4 Co-ordination with other departments

Represented the Department of AYUSH in intergovernmental committees of MoEF, DBT, NBA etc. related to Medicinal Plants in particular and to the Ayush sector in general.

9.7.5 International Collaboration

Established a partnership with the UNDP for taking forward projects on Medicinal Plants and also addressed issues of Access & Benefit Sharing as enumerated in the Nagoya protocol. Formal interaction was started with delegations from Uzbekistan and Nepal.Signedthe MoU on medicinal plants with National Herbarium University of West Indies,Trinidad and Tobago.

9.7.6 Quality initiatives

The schemes on GAP and GFCP were taken

forward in collaboration with the Quality Council of India (QCI) with the aim of setting up of a certification mechanism for these schemes. Further, the second volume on Agro-techniques of selected medicinal plants was published.

9.7.7 Approval for continuation of the schemes

EFC memos for both the Centrally Sponsored Scheme as well as the Central Sector Scheme were drawn-up for their continuation during the XII plan.

Drug Quality Control

REGULATION AND QUALITY CONTROL OF DRUGS

10.1 INTRODUCTION

Department of AYUSH has a Drug Control Cell to administer regulatory and quality control provisions for Ayurveda, Siddha, Unani and Homoeopathy (ASU&H) drugs. The Drug Control Cell deals with Drugs & Cosmetics Act, 1940 and Rules thereunder and the associated matters pertaining to ASU&H drugs. In this regard, the Cell coordinates with the State Licensing Authorities and Drug Controllers to achieve uniform administration of the Act and for providing regulatory guidance and clarifications. Cell is also responsible to manage the implementation of Centrally Sponsored Scheme for Quality Control of ASU&H drugs through which financial support is provided for improving infrastructural and functional capacity in the states for production, testing and quality enforcement of drugs. The Secretariat for two statutory bodies- Ayurveda, Siddha and Unani Drugs Technical Advisory Board (ASUDTAB) and Ayurveda, Siddha and Unani Drugs Consultative Committee (ASUDCC) is housed in the Drug Control Cell for planning, coordination and follow up actions of their meetings.

The Drug Control Cell interacts with Central Drugs Standard Control Organization (CDSCO), Directorate General Foreign Trade, Ministry of Environment & Forests and Quality Council of India for WHO-GMP certification scheme, export/import and clinical trials related matters, availability issues of raw materials and quality certification in respect of ASU&H drugs. In order to oversee effective implementation of the Drugs & Cosmetics Rules regarding approval of ASU drug testing institutions

by the State Licensing Authorities, technical officers of the Department have been notified as Central Inspectors to undertake joint inspection of the ASU drug testing laboratories and report to the designated authority.

10.2 OBJECTIVES

To ensure quality control over ASU&H drugs in the interest of public safety.

10.3 MAJOR ACHIEVEMENTS/INITIATIVES

During the reporting period following outcomes were achieved and initiatives were undertaken:-

- Meeting of the ASUDTAB was held on 17th
 September 2013 to discuss as many as
 ten agenda items relating to regulation
 of ASU drugs.
- Guidelines for the use of abbreviations of various plant-ingredient forms in ASU formulations were issued to State Licensing Authorities and Drugs Manufacturers Associations.
- ASUDCC was reconstituted vide Gazette Notification dated 30.12.2013 with nominated members from Central and State Governments and its first meeting was held on 26th February 2014. Fifteen agenda items concerning enforcement of the Drugs & Cosmetics Act and Rules were discussed.
- Amendments in the Drugs & Cosmetics Rules, 1945 were notified on 25th October 2013 and 5th March 2014 respectively for providing ban on the use of prefix or suffix with the names of classical ASU formulations and for facilitating grant of Free Sale Certificate and Non-Conviction

Certificate to the drug manufacturers.

- Meeting with the State Drug Regulators was held on 20.12.2013 to review the regulatory scenario and identify gaps in the infrastructure &manpower requirement for effective enforcement of legal provisions and quality control of ASU&H drugs.
- Five interactive meetings were held with AYUSH drug industry to discuss regulatory issues pertaining to global ban on mercury, access & benefit sharing of natural resources under bio-diversity Act, HS coding, licensing of herbal extracts, labeling provisions, use of prefix or suffix and mimicking in the names of ASU formulations etc.
- Four regulatory training programmes were conducted for capacity building of State Licensing Authorities, Drug Inspectors etc.
- Approval of the Department of Expenditure with the concurrence of Finance Minister was obtained for establishment of Central Drug Controller for AYUSH with thirteen posts headed by Drug Controller General (AYUSH).
- Centrally Sponsored Scheme of Quality Control of ASU&H Drugs was revised in accordance with the recommendations of the evaluation agency and suggestions of the State Governments and merged in to the unified new scheme called National AYUSH Mission in the 12th Five Year Plan.
- A Working Group chaired by Director General –Central Council for Research in Ayurvedic Sciences has been reconstituted on 12.12.2013 to prepare

- a strong and a credible defense in support of AYUSH systems against such articles appearing in the media which may harm or damage the image of AYUSH systems of medicine nationally or internationally.
- Dedicated Expert Committees have been set up to draft separate legislation for regulation of Ayurveda, Siddha, Unani, Homoeopathy and Sowa rigpa drugs, for formulating draft Bill for AYUSH Pharmacy Council, for preparing possible regulatory framework to control sale of drugs & raw materials and for defining new ASU& H drugs.
- Conceptualization of Central Sector Schemes for promoting Pharmacovigilance in AYUSH and for providing incentives to AYUSH industry has been initiated and first draft of the schemes are in the process.
- Draft Rules have been prepared for amending Drugs & Cosmetics Rules, 1940 to insert the provisions for regulating the contents of advertisements of licensed ASU medicines and for Good Laboratory Practices (GLP) for testing of ASU Drugs.
- A manual of guidelines for inspection of GMP compliance by the ASU drug industry was prepared and disseminated.
- With constant persuasion with the States, long pending Utilization Certificates worth Rs. 12 crore were liquidated under the Centrally Sponsored Scheme for Drugs Quality Control. As a result, thirteen states do not have any pending Utilization Certificate under the scheme.

Pharmacopoeia

11.1 PHARMACOPOEIA COMMISSION FOR INDIAN MEDICINE (PCIM)

The Pharmacopoeia Commission for IndianMedicine (PCIM) was set up as an independent autonomous body under Department of AYUSH with the approval of Cabinet at its meeting held on 13th May 2010. The Commission is registered as a Society and has its base at Ghaziabad. The Ayurvedic Pharmacopoeial Committee (APC), Siddha Pharmacopoeial Committee (SPC) and Unani Pharmacopoeial Committee (UPC) shall function under the umbrella of PCIM. The main mandate of the Commission is the publication and revision of the Ayurvedic, Siddha and Unani Pharmacopoeia of India, ASU Formularies; nurture and promote awareness of quality in ASU drugs formulations and drug research on ASU products; exchange information and interact with expert committees of the World Health Organization and other international bodies with a view to harmonise and develop the ASU pharmacopoeial standards to make thoseinternationally acceptable; maintain national repository of authentic reference raw materials used in the manufacture of Ayurveda, Siddha and Unani medicines for the purpose of reference and supply of reference standards to the stakeholders at a price; generate and maintain repository of chemical reference marker compounds of theplants or other ingredients used in standardizing Ayurveda, Siddha and Unani medicines and supply them as reference standards to the stake-holders on price; furtherance of the provision of Chapter IVA of Drugs and Cosmetic Act & Rules there under related to ASU Drugs.

The Commission consists of:

- (a) General Body;
- (b) Governing Body; and
- (c) Scientific Body.

THE SCIENTIFIC BODY IS FURTHER SUPPORTED BY:

- (i) Ayurvedic Pharmacopeia Committee;
- (ii) Unani Pharmacopeia Committee; and
- (iii) Siddha Pharmacopeia Committee.

11.2 AYURVEDIC PHARMACOPOEIA COMMITTEE

Harmonization of 35 single drugs and 16 Churna formulations were finalized.

Standard Operating Procedures of Manufacturing process and Pharmacopoeial Standards were laid down for the following ten Classical Ayurvedic formulations

- 1. Sarpagandha ghan vati
- 2. Abhaya vati
- 3. Draksadi gutika
- 4. Bhubaneswar vati
- 5. Devadarvyadi kvath curna
- 6. Krimighna kasaya curna
- 7. Mahasankh vati
- 8. Asmarihara kasaya curna
- 9. Boladi vati
- 10. Chandraprabha vati

Second reports on the following formulations on SOP and Analytical Parameters were

received from NRIADD, Kolkata and scrutinized at CCRAS

- 1. Saubagya Vati
- 2. Sulavajrini Vatika
- 3. Devadarvyadi kvath churna

First report of Compound formulations namely Shiva Gutika and Gojihvadi Kvatha Churna also received from NRIADD, Kolkata was scrutinized for Chemistry, Pharmacognosy and Ayurvedic portion

11.3 UNANI PHARMACOPOEIA COMMITTEE

Development of Standard method of preparation and Pharmacopoeial standards of 40 Compound Formulations were completed. Work on Unani Pharmacopoeia of India, Part-II, Vol. –IV and National Formulary of Unani Medicine, Part-III (Hindi edition) have also been placed in last UPC meeting held on 27th February 2014. In the UPC meeting it is decided that before approving the said documents by the committees, same may be seen by Sub-Committees constituted for the purpose. Compilation of Unani Pharmacopeia of India, Part-I, Volume-VII is in progress.

11.4 SIDDHA PHARMACOPOEIA COMMITTEE

The first Siddha Pharmacopoeia Committee was established by Govt. of India in 1975. Till date "The Siddha Formulary of India", Part – I (Tamil & English) comprising 248 Siddha classical formulations and Part - II (Tamil) consisting of 151 Siddha classical formulations were published. Revised edition of "The Siddha Formulary of India", Part - I (Tamil) was sent for printing. Manuscript of English translation of "The Siddha Formulary of India", Part - II (Tamil) has been finalized.

"The Siddha Pharmacopoeia of India", Part - I, Vol I & II covering 139 monographs on Single drugs were published. "The Siddha Pharmacopoeia of India", Part I, "The Siddha Pharmacopoeia of India", Part - I, Vol.III with 66 single drugs has been finalized. "The Siddha Pharmacopoeia of India", Part – I, Vol. IV (Metals and Minerals) & Vol. V are in progress.

Siddha compound formulations Talisathi curanam (Batch I, II, III & IV), Amukkara curanam (Batch I, II, III & IV), Parangippattai curanam (I, II, III & IV), Silasathu parpam (Batch - I) and Seenthil chooranam (Batch - I) were prepared in SCRI Pharmacy and Physico chemical parameters were completed for "The Siddha Pharmacopoeia of India" Part II, Vol. I.

Physico chemical parameters for 17 Single drugs of plant origin were completed to prepare "The Siddha Pharmacopoeia of India", Part I, Vol. V.

Ingredients used, method of preparation, identification by microscopy and physico chemical parameters of Attathic curanam, Elathic curanam, Kalarcic curanam, Nilavakaic curanam, Trikadukuc curanam, Talisathi curanam prepared for the "The Siddha Pharmacopoeia of India", Part II, Vol - I.

The first meeting of newly constituted Siddha Pharmacopoeia Committee was held on 26th March 2014. In the meeting, it was suggested to modify the "The Siddha Pharmacopoeia of India, Part I, Vol. III" which has reached the stage of final drafting as per the new format recommended by PCIM. Preparation of the Siddha Pharmacopoeia of India, Part I, Vol. IV has also been initiated during the reporting period.

The Siddha Formulary of India, Part II (Tamil) has been published in the reporting period and the Siddha Formulary of India, Part I, 1st revised Edition (Tamil) has been approved by the SPC.

11.5 HOMOEOPATHIC PHARMACOPOEIA COMMITTEE (HPC)

The Homoeopathic Pharmacopoeia Committee was constituted in 1962 for the

purpose of preparing the Homoeopathic Pharmacopoeia of India with the following objectives:

- i) To prepare a Pharmacopoeia of Homoeopathic drugs whose therapeutic usefulness has been proved on the lines of American, German and British Homoeopathic Pharmacopoeia,
- To lay down principles and standards for the preparation of Homoeopathic drugs,
- iii) To lay down test of identity, quality, purity, and
- iv) Such other matters as are incidental and necessary for the preparation of Homoeopathic Pharmacopoeia.

Nine volumes of Homoeopathic Pharmacopoeia of India (HPI) have been published. Total 944 monographs of Homoeopathic drugs have been approved by Homoeopathic Pharmacopoeia Committee. One Homoeopathic Pharmaceutical Codex comprising 101 Homoeopathic Drugs has also been published. The work on X volume of HPI comprising of 101 Homoeopathic Drugs has already been completed and the same is ready for publication.

The incorporation of Homoeopathy in Pharmacopoeia Commission of Indian Medicine has also been approved.

11.6 PHARMACOPOEIAL LABORATORY FOR INDIAN MEDICINE (PLIM)

Pharmacopoeial Laboratory for Indian Medicine (PLIM) is a subordinate office of the Department located in Ghaziabad. The laboratory was established in the year 1970 as a Pharmacopoeial Standards Setting-cum-Drugs Testing Laboratory at National Level for Indian Medicines which includes drugs of Ayurveda, Unani and Siddha systems. It acts as Central Drugs Laboratory for testing of Ayurvedic, Unani and Siddha drugs under

Drugs & Cosmetics Act, 1940. The PLIM was established with the objectives to develop and to validate Pharmacopoeial standards of single drugs and compound formulations for inclusion in Ayurvedic, Unani and Siddha Pharmacopoeias. The Laboratory is also assigned the task of analysis and survey of official and legal samples received from Drug Control Authorities.

Achievements of the PLIM during 2013-14

	Activities	Quantum (in Nos.)
a.	Pharmacopoeial standardization of Ayurveda, Siddha and Unani Drugs (Single and Compound formulations), Preparation of Monographs, revision of Pharmacopoeial monographs & Verification/validation of Pharmacopoeial Standards.	35
b.	Analysis/Testing of Drug samples from different official sources (Quantum may depend on receipt of samples from Drug Control Authorities).	07
c.	Development of HPTLC Fingerprinting of Pharmacopoeial drugs	20
d.	Survey/Collection tours for medicinal plants/crude drugs.	03
e.	Collection/Addition of crude drug samples for Museum.	111
f.	Maintenance of Museum and Herbarium.	Continuous Process
g.	Cultivation and maintenance of Medicinal Plants in Herbal Garden.	Continuous Process
h.	Training Programme on Regulatory Capacity Building.	03

11.6.1 **BUDGET**

(Rs. in crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	1.40	1.42	2.82
Revised Estimate 2013-14	1.52	1.39	2.91
Expenditure upto March 2014	0.80	1.29	2.09

11.7 HOMOEOPATHIC PHARMACOPOEIA LABORATORY (HPL)

Homoeopathic Pharmacopoeia Laboratory was established in 1975, as a National Laboratory for the purpose of laying down standards and testing for identity, purity and quality of Homoeopathic Medicines. The laboratory also functions as a Central Drug Laboratory for the testing of Homoeopathic Medicines under rule 3A for the Drugs and Cosmetics Act. Standards worked out by the laboratory are published in the Homoeopathic Pharmacopoeia of India (HPI). So far nine volumes of HPI have been published and Tenth volume of HPI is under publication. The laboratory also impart training on regulatory capacity building for Drug Control Authorities, Drug Analysts and Pharmacy Professional from recognized Homoeopathic Medical Colleges.

The significant achievements of the Laboratory during 2013-14 are tabulated below:-

	Activities	Quantum (in Nos.)
a.	Pharmacopoeial Monographs on Homoeopathic Drugs	14
b.	Testing of Drugs Samples of Homoeopathic Medicines	301
C.	Survey Tour for collection of Medicinal Plants and Raw Herbal Drugs	01
d.	Training Programme on Regulatory Capacity Building	02
e.	Addition of Drugs samples in Museum and Herbarium	73
f.	Experimental Medicinal Plant Garden (i) Maintenance of Medicinal Plants of homoeopathic value.	140 plant species
	(ii) Introduction of Medicinal Plants of exotic / indigenous sources by different technique.	04 plant species
	(iii) Maintenance of Germ plasm & Seeds bank for scientific studies.	241 seeds of different plant species

11.7.1 BUDGET

(Rs. in crores)

Head	Plan	Non-Plan	Total
Budget Estimate 2013-14	1.00	1.76	2.76
Revised Estimate 2013-14	1.16	1.45	2.61
Expenditure upto March 2014	0.76	1.35	2.11

Indian Medicines Pharmaceutical Corporation Limited (IMPCL)

12.1 INTRODUCTION

Indian Medicines Pharmaceutical Corporation Limited (IMPCL) is a Government of India Enterprise under the administrative control of the Department of AYUSH to manufacture and supply Ayurvedic and Unani products (www.impclmohan.nic.in). IMPCL, which is a 'MINI RATNA', ISO 9001:2008 accredited and GMP certified company, was incorporated in 1978 and started commercial production in 1983. The primary objective of the Company is to manufacture and supply authentic quality Ayurvedic and Unani products.

The formulations are tested in Govt. approved Drug Testing Laboratory along with well equipped in-house Government approved Quality Control/Assurance measures before release.

The MoU rating of the company for the year 2012-13 is '**GOOD**'.

IMPCL is expanding its capacity under 3rd Phase modernization, which is under progress and aim with Eu GMP Certification.

Besides supply of medicines to CGHS, CCRAS, State Governments, Autonomous bodies etc., the Company is gearing up to enter into open market. Since 1986-87, the company has maintained its profit earning trend and Net Worth of the company is positive. The company is manufacturing entire dosage forms of the Ayurvedic and Unani medicines.

12.2 PRODUCTS

The major products of IMPCL are M-Liv Syrup, M-Vasako Syrup, M-Shankhapushpi Syrup, M-Tribhuvan Mishran, Chavanprasha, Brahmarasayana, Vasavaleha, Ashokarista, Ashwangandhadyarishta, Dashmularishta, Drakshasava, Lohasava, Punarnavasava, Khadiradi Gutika (Mukhroga), Chitrakadi Gutika, Lashunadi Vati, Avipattikar Choorna, Bhaskar Lavan Choorna, Dadimastak Choorna, Hingwatak Choorna, Mahanarayan Taila, Panchguna Taila, Yograj Guggulu, Araq-e-Ajeeb, Jawarish Jalinoos, Sharbat-e-Zufamurakkab, Sharbat-e-Buzorromotadil etc.

12.3 TURNOVER

(Rupees in Lakh)

YEAR	2009-10	2010-11	2011-12	2012-13	2013-14 (Pre- audited)
SALES	1990	2441	2490	2967	3660

12.4 BUDGET

(Rs. in crores)

Head	Plan	Total
Budget Estimate 2013-14	7.00	7.00
Revised Estimate 2013-14	0.00	0.00
Expenditure upto March 2014	0.00	0.00

International Cooperation

INTERNATIONAL COOPERATION

13.1 With an increase in lifestyle related disorders, people all over the world are looking at alternative systems of medicine for answers. Given this global resurgence of interest in holistic systems of medicine, the Department of AYUSH has been making efforts for promotion and propagation of Indian Systems of Medicine abroad.

13.2 ACHIEVEMENTS

13.2.1 On recommendation of WHO SEARO, two week exposure training was provided to fourBhutan Government officials by the Department of AYUSH in July, 2013. During the training programme, general overview about the Department of AYUSH and

- various systems, Drug Control Cell, National Medicinal Plant Board, pharmacopoeial work and research activities was given.
- 13.2.2 The "Delhi Declaration on Traditional Medicine for the South-East Asian Countries" was unanimously adopted by the Hon'ble Health Ministers of Bangladesh, Bhutan, India, Nepal, Minister of Indigenous Medicine of Sri Lanka, Vice Minister of Timor Leste and representatives of DPR Korea, Indonesia, Myanmar, Maldives and Thailand during the 'International Conference on Traditional Medicine for South-East Asian Countries' held in New Delhi during 12-14 February, 2014. After determined efforts of the Department of AYUSH, as a follow up, the matter was taken for the first time in the



The then Hon'ble Health Minister of State, Mrs. Santosh Chowdhary along with the Director General, WHO Mrs. Margaret Chan and Health Ministers of other participating countries during Joint Launching of WHO Traditional Medicine Strategy: 2014-2023 on 28th October, 2013 at WHO High Level Meeting in Macau.

- Sixty-sixth session of the WHO Regional Committee for South-East Asia on 13 September, 2013. All the Member States recognized the importance of the 'Delhi Declaration on Traditional Medicine for the South-East Asian Countries' and the follow up on the Declaration was encouraged by all Member States.
- 13.2.3 An Indian delegation led by Hon'ble Minster of State, Smt. Santosh Chowdhary, participated in WHO High-Level Meeting on the launching & Implementation of WHO Traditional Medicine Strategy 2014-2023 on 28-30 October, 2013 in Macau SAR, China. The Keynote Speech was delivered by MoS as a Special Invitee of Director General, WHO. Useful discussions were held during the meeting on the implementation of WHO Strategy on Traditional Medicine 2014-2023. Secretary, AYUSH chaired the session on "Exchange of experiences in the development of national policies on TM&CM"
- **13.2.4** A Memorandum of Understanding between the Ministry of Human Resources of Hungary and the Ministry of Health and Family Welfare of the Republic of India on Cooperation in the field of Traditional Systems of Medicine was signed on 17.10.2013. The Memorandum of Understanding was signed by Smt. Santosh Chowdhary, Minister of State for Health & Family Welfare, Government of India and Mr. Zoltan Balog, Minister of Human Resources of Hungary at New Delhi in the presence of the Prime Ministers of both the countries. The MoU aims at strengthening, promoting and developing co-operation in the field of traditional systems of medicine between the two countries on the basis of equality and mutual benefit. The MoU encourages and promotes co-operation to enhance the use of traditional systems of medicine; promote mutual exchange of regulatory information on operational licensing to practice traditional medicine and on marketing authorisation of medicines in both countries;



Signing of MoU between India and Hungary on cooperation in the field of Traditional Systems of Medicine

promote the exchange of experts for training of practitioners, paramedics, scientists, teaching professionals and students in traditional medicine etc. The signing of the MoU will give boost to bilateral co-operation between the two countries in the areas of traditional medicine.

- 13.2.5 AYUSH Information cells were set up in Hungary, Cuba, Russia, Mauritius and Indonesia to disseminate authentic information on AYUSH systems of medicine.
- 13.2.6 A meeting with Mr. Altaf Lal, Director, USFDA, India Office with Secretary, AYUSH was held on 22 January, 2014 at Department of AYUSH. Dr. Altaf Lal shared information about FDA India Program and discussed about regulatory provisions for AYUSH products. He was briefed about detoxification process for the AYUSH products that contains heavy metals, such as Mercury and Lead.
- **13.2.7** A three member delegation led by Secretary, AYUSH visited Germany during 12-14 February, 2014 to interact with the German

- medical personnel and activists working for Ayurveda. An Ayurveda symposium was organised at the Indian Embassy, which provided an excellent platform to share Indian experience and possibilities of collaboration for promotion of Ayurveda in Germany. The visit enabled to make an assessment of the emerging scope of Ayurveda in Europe, particularly in Germany.
- 13.2.8 A three member delegation led by Secretary, AYUSH had participated in the 2nd Bilateral Meeting organized by the Ministry of Health, Government of Malaysia on 26th March, 2014 under the provisions of Memorandum of Understanding (MoU) signed between India and Malaysia on 'Cooperation in the field of Traditional Medicine'. The Malaysian side was led by Director General of Health, Ministry of Health. The two delegations deliberated various issues extensively and took stock of progress made in the cooperation between two countries. The Malaysian side appreciated the growth of AYUSH Systems of Medicine in India. The delegation also



2nd Bilateral Technical Meeting on Cooperation in the field of Traditional Systems of Medicine between the Government of Malaysia and the Republic of India on 26th March 2014 at Kuala Lumpur, Malaysia

met officials of National Pharmaceutical Control Bureau on 27th March, 2014. During the visit, Indian delegation visited Port Dickson Hospital where 'Shirodhara Practice' with help of Government of India has been setup and Cheras Rehabilitation Centre on 28th March, 2014, where Government of India donated an Automatic Shirodhara Machine to the Hospital.

13.2.9 The Department had deputed experts to participate in the following events:

- (i) 'Regional Expert Group Meeting' organized by WHO-SEARO on 'Strengthening Safety, Efficacy and Quality of Care of Traditional Medicine', from 11-13 December, 2013 in New Delhi, India. The recommendations for strengthening safety, efficacy & quality of care of Traditional Medicine were evolved by the experts from South-East Asia region.
- (ii) Twenty-Seventh Session for Intergovernmental Committee (IGC) on Intellectual Property and Genetic Resources, Traditional Knowledge and Folklore of World Intellectual Property Organization (WIPO) held in Geneva from March 24 to 28, 2014.
- (iii) 'India Show' at Kazakhstan from 27-30 March, 2014 organized by the Ministry of Commerce in collaboration with Confederation of Indian Industry (CII).

13.2.10 The following Foreign delegations had visited the Department of AYUSH:

(i) A 13 member Thai delegation led by Director General of the Department of Thai Traditional and Alternative Medicine, Ministry of Public Health, Government of Thailand visited the Department of AYUSH on 24th May, 2013 for learning Indian experience in Traditional medicine and to discuss future cooperation in the field of

- Traditional medicine between the two countries.
- (ii) A 3 member delegation led by Dr. Neil Sharma, Hon'ble Minister for Health, Govt. of Fiji visited the Department of AYUSH on 4th June, 2013 for discussing cooperation in the field of Traditional Medicine between the two countries. The delegation also visited National Institute of Ayurveda, Jaipur; and Central Research Councils at New Delhi. Hon'ble Health Minister, Govt. of Fiji also met Hon'ble Union Minister for Health & F.W, Govt. of India.
- (iii) A six member delegation from Mozambique visited AYUSH Research Councils on 23 October, 2013.
- (iv) A three member delegation from South Africa Bureau of Standards (SABS) visited the Department of AYUSH on 20 November, 2013 to discuss issues of possible cooperation between the two Departments.
- (v) A 15 member Business Delegation of Republic of Uzbekistan visited the Department of AYUSH on 08 January, 2014. The delegation discussed issues of possible cooperation between the two Departments especially in the field of Traditional Medicine and about the cultivation of medicinal plants.
- (vi) A two member delegation comprising Dr. Ivan Szalkai, Ayurveda Professor, University of Debrecen and Dr. ImreSemsei, Vice Dean for Health, University of Debrecen, Hungary visited the Department of AYUSH on 21 January, 2014. During the meeting with Secretary, AYUSH and other officers of the Department, the proposals for collaboration in the field of Ayurveda were discussed. The delegation also visited the National Medicinal Plants Board, Central Council for Research

- in Ayurvedic Science and National Institute of Ayurveda, Jaipur.
- (vii) A four member delegation led by Dr. Felisbela Gasper, Director, Traditional Medicine Institute, Maputo, Mozambique visited the Department of AYUSH on 22 January, 2014. During the meeting with Secretary, AYUSH and other officers of the Department, they discussed various issues related to Traditional Medicine and sought possible support to develop regulatory infrastructure in the field of TM in Mozambique. The delegation also visited AYUSH Research Councils, Drug Manufacturing Unit (Dabur), Pharmacopoeial Laboratory for Indian Medicine (PLIM) and National Institute of Ayurveda (NIA), Jaipur.
- (viii) Mr. Fakhrul Islam, Member of Advisory Committee for Prime Minister of Bangladesh and former Deputy Minister of Finance visited Department of AYUSH on 22 January, 2014. During his meeting with Joint Secretary AYUSH, he discussed various bi-lateral issues relating to propagation of Ayurveda in Bangladesh and proposed MoU between India and Bangladesh. Mr. Islam also visited Pharmacopoeial Laboratory for Indian Medicine (PLIM) and Drug Manufacturing Units (Dabur

- and Maharishi Ayurveda) during his visit.
- (ix) A scholar and eminent writer from Egypt, Mr. Mahmoud Azmy El Rabbat visited the Department of AYUSH on 21st March 2014. He met Joint Secretary and discussed the issues related to Traditional Medicine including possible cooperation between the two countries in this field.
- (x) Dr.Gregor Kos, Secretary General, Ministry of Education, Science and Sports, Government of Slovenia visited the Department of AYUSH on 26.03.2014. Dr. Kos was accompanied by Mr. Boris Jelovsek, Minister Plenipotentiary, Embassy of the Republic of Slovenia in New Delhi. The visit aims at having a better insight of AYUSH systems and to discuss possibilities of future cooperation in the field of Traditional Medicine between the two countries.

13.3 BUDGET

(Rs. in crores)

Head	Plan	Total
Budget Estimate 2013-14	8.00	8.00
Revised Estimate 2013-14	4.00	4.00
Expenditure upto March 2014	1.40	1.40

Information Education and Communication

14.1 INTRODUCTION

There is a world wide resurgence of interest in traditional medicines based on herbs and medicinal plants. The Department of AYUSH, which is mandated to develop, promote and propagate the Indian System of Medicine & Homoeopathy, has decided to popularize strengths of AYUSH systems by using outdoor, electronic media including organization of Arogya fairs and supporting seminars and workshops on AYUSH systems. For this purpose, the Department has been implementing Central Sector Scheme for Promotion of Information, Education, and Communication (IEC) in AYUSH.

14.2 OBJECTIVES

The scheme is meant for achieving the following objectives:

- (i) Creation of awareness among the members of the community about the efficacy of the AYUSH Systems, their cost-effectiveness and the availability of herbs used for prevention and treatment of common ailments at their door steps through various channels including the production of audiovisual educational material to achieve the objective of Health for all;
- (ii) Dissemination of proven results of R&D work in AYUSH systems at National and International forums;
- (iii) Providing a forum where horizontal and vertical interaction among stakeholders of AYUSH systems can take place through Conferences, Seminars and fairs at Regional, National

- and International levels and encourage stakeholders to participate in them.
- (iv) Propagation and promotion of AYUSH by organizing Seminars, Conferences, Symposiums & Workshop on AYUSH Systems.

Under the IEC Scheme, following activities were organized during the year 2013-14.

14.3 AROGYA FAIRS

An important initiative of the department for promoting and propagating AYUSH systems is organization of Arogya Fairs, which began in 2001 as an annual event in Delhi every year, has spread to all parts of the country. All sections of the general public visit AROGYA fairs. The fairs are organized in association with the concerned State Government. It has been the endeavor of the Department to make innovations in the successive AROGYAs over the years. As a result what began as an exhibition of AYUSH products in 2001, has expanded over the years to include literature on AYUSH, medical equipment, publishers and booksellers of AYUSH systems apart from events which are organized on the sidelines of AROGYA like Conferences on Traditional Medicine. Free health Checkup is major attraction of the fair. During the year 2013-14, State level Arogya fairs were organized at Sikkim, Punjab & Kerala and the National Level fairs at Chandigarh, Lucknow, Jammu& Kolkata. National Arogya fair at Chandigarh was inaugurated by the H.E, the Governor of Punjab, Hon'ble HFM inaugurated the event at Jammu in the presence of Hon'ble Chief

Minister and other Ministers of the State Government and the National Arogya Fairs at Lucknow & Kolkata were inaugurated by Hon'ble Minister of State for Health & Family Welfare, Govt. of India. The events were a grand success.

14.4 PARTICIPATION IN OTHER EXHIBITIONS, FAIRS AND MELAS

The Department also participated in following fairs during the current financial year 2013-14:

- 1. Chikitsa 2013 organized by Indian Chambers of Commerce, Kolkatta.
- 2. India International Trade Fair, 2013 at Pragati Maidan, New Delhi.
- "Dil Ka Darbar, a Heart Summit organised by Heart Care Foundation of India at Talkatora Grounds, New Delhi.
- 4. "MTNL Perfect Health mela organised by Heart Care Foundation of India, New Delhi.
- 5. 10th Jatiya Sanhati Utsav-O-bharat Mela organized by East Bhaleya Smrity Sangha in South, 24 Parganas Distt., West Bengal.
- 6. FICCI Heal, New Delhi
- 7. Pravasi Bhartiya Divas, New Delhi
- 8. Surajkund Mela
- World Book Fair, ITPO ,New Delhi
- 10. Global Ayurveda Festival, Kerala
- 11. Goa Mohostava
- 12. Kosmetika, ITPO, New Delhi
- 13. Medical Camp at Hoshiarpur

14.5 A S S I S T A N C E F O R E X C H A N G E PROGRAMME/SEMINAR/ CONFERENCE / WORKSHOP ON AYUSH.

Under this scheme, financial assistance was provided for 12 workshops/seminars/conferences organized by various organizations.

14.6 OUTDOOR PUBLICITY

As part of outdoor publicity to promote AYUSH systems, the following initiatives have been taken during the current year:-

- Telecast/Broadcast of Video/audio spots over Lok Sabha TV, Doordarshan & AIR as well as other TV channels all over the country through DAVP.
- Publicity through low floor DTC buses by display of AYUSH messages at the rear wind screen.

14.7 PRINT PUBLICITY

- 1. Calendar of the Department was published and distributed.
- The State Punjab was provided financial assistance for development of print material on AYUSH
- 3. Newspapers advertisements were released for Publicising Arogya fairs and five years achievement of the AYUSH Department.

14.8 BUDGET

(Rs. in crores)

Head	Plan	Total
Budget Estimate 2013-14	17.50	17.50
Revised Estimate 2013-14	11.50	11.50
Expenditure upto March 2014	8.84	8.84

Other Central Sector Schemes

15.1 AYUSH AND PUBLIC HEALTH

- 15.1.1 Promotion of AYUSH Intervention in Public Health Initiatives is a Central Sector Grantin-aid Scheme was introduced in 2007-08 initially as a pilot project for the 11th Five Year Plan period with a district/block/ Taluk as a unit for AYUSH intervention. The main objective of the scheme is to support innovative proposals for both Government as well as private organizations for community health care and to encourage institutionally qualified AYUSH practitioners. The scheme also aims to encourage utilization of AYUSH practitioners in different public health programme.
- **15.1.2** During 11th Plan period 29 proposals were supported mainly for AYUSH intervention on Malaria, Filaria, Nutrition & Health care, anaemia, mother & child health care etc.
- 15.1.3 During 2013-14, 2 proposals have been supported and an amount of Rs 174 lakhs has been spent only for ongoing projects by of releasing 2nd / 3rd installments. The Standing Finance Committee (SFC) meeting was conducted on 24/7/2013 and the Scheme has been approved by the Competent Authority for continuation in 12th Plan.

15.1.4 BUDGET

(Rs. in crores)

Head	Plan	Total
Budget Estimate 2013-14	5.00	5.00
Revised Estimate 2013-14	2.50	2.50
Expenditure upto March 2014	1.74	1.74

- 15.2 SCHEME FOR GRANT-IN-AID TO NON-PROFIT/ NON-GOVERNMENTAL AYUSH ORGANISATIONS/INSTITUTIONS FOR UPGRADATION TO CENTRES OF EXCELLENCE
- 15.2.1 It is a Central sector grant-in-aid scheme introduced in 2007-08 for the 11th Five year Plan period. The main objectives of the scheme are to support reputed AYUSH knowledge institutions in Government / Non-Government Non-Profit organizations engaged in the activities of clinical research, AYUSH Hospital and Nursing hospitals and homes, Research based on the Fundamentals of AYUSH, inter-disciplinary research in Pharmacology, pharmacy or product development, bridging AYUSH and modern science etc., to upgrade their functions and facilities to levels of excellence.
- 15.2.2 So far, Department of AYUSH has sanctioned total 30 Projects during the 11th Plan with estimated cost of Rs.103.65 crore out of which Rs.63.52 crore has been released as 1st, 2nd& 3rd installment to the Grantee institutions.
- 15.2.3 During 2013-14, 05 proposals have been supported and amount of Rs.4.21 crore has been spent only for ongoing projects by releasing 2nd / 3rd installments. The Standing Finance Committee (SFC) meeting was conducted on 24.07.2013 and the Scheme has been approved by the Competent Authority for continuation in 12th Plan.

15.2.4 BUDGET

(Rs. in crores)

Head	Plan	Total
Budget Estimate 2013-14	15.00	15.00
Revised Estimate 2013-14	7.00	7.00
Expenditure upto March 2014	4.21	4.21

15.3 REVITALIZATION OF LOCAL HEALTH TRADITIONS

- **15.3.1** The Scheme for "Grant-in-Aid to non-Profit/ Non-Governmental AYUSH Organizations/ Institutions for Revitalization of Local Health Traditions, Midwifery Practices etc in order to enhance Health Security of Rural Community"has been implemented during 11th Plan. The main objectives of the scheme is to support All India or Regionally coordinated program (in selected blocks of selected states so that the program is) of a size and scale that can have social impact with the objectives of supporting innovative proposals from non-profit/nongovernmental organizations for systematic participatory documentation of Local Health Traditions related to home remedies, food & nutrition, midwifery, ethno-veterinary practices and other specialized local health practices.
- **15.3.2** During 11th Plan period, 37 proposals mainly for documentation of home remedies, food & nutrition, bone setting used by local healers for various diseases in the locality, have been supported.
- 15.3.3 During 2013-14, 6 proposals have been supported and an amount of Rs. 47.97 lakhs has been spent only for on going projects by releasing 2nd / 3rd installments. No new proposal could be considered during 2013-14 as the scheme has been dropped in 12th Plan.

15.3.4 BUDGET

(Rs. in crores)

Head	Plan	Total
Budget Estimate 2013-14	1.00	1.00
Revised Estimate 2013-14	0.33	0.33
Expenditure upto March 2014	0.48	0.48

15.4 CENTRAL SECTOR SCHEME FOR ACQUISITION, CATALOGING, DIGITIZATION AND PUBLICATION OF TEXT BOOK & MANUSCRIPTS (ACDP)

15.4.1 INTRODUCTION

AYUSH knowledge exists in the country in the form of classical text material, manuscripts, scientific outcomes, personal experiences, folklore, local health practices, ethno-medicine, tribal medicine, etc. This information needs to be properly catalogued and digitized in user-friendly manner and make it easily accessible as well as protected. The Department of AYUSH has implemented the Scheme during the 11th Plan. The prime objective of the Scheme is to catalogue and digitized the medical manuscripts in a standard format as prescribed by National Manuscripts Mission to support translation and critical editions of medical manuscripts, selected on the basis of objective criteria, to disseminate information regarding medical manuscripts of India to all AYUSH educational and research institutions in the Government and Non-Government sectors, to utilize Information Technology for greater dissemination of AYUSH knowledge to practitioners/researchers/teachers and to promote creation of AYUSH databases for policy formulation/IEC, etc. and to support National Manuscripts Mission to undertake a sub-mission on Medical Manuscripts. Under the Scheme Rs.16.34lakhs has been released to Rashtriya Ayurveda Vidyapeeth as final instalment for completion of the project of Publication of Charak Samhita

and Chakrapani Teekka with Anvay, Hindi translation of Mool Teeka as well as comments by Dr. B.L Gaur, Ex- Vice Chancellor, Ayurveda University, Jodhpur. No new proposal could be considered during 2013-14, as the scheme has been dropped in 12th Plan.

15.4.2 BUDGET

(Rs. in crores)

Head	Plan	Total
Budget Estimate 2013-14	0.50	0.50
Revised Estimate 2013-14	0.17	0.17
Expenditure upto March 2014	0.16	0.16

15.5 CENTRAL SECTOR SCHEME FOR DEVELOPMENT OF AYUSH INDUSTRY CLUSTER

15.5.1 INTRODUCTION

The scheme was introduced in the XIth Five Year Plan with the objectives for creating Common Facility Center (CFC) for standardization, quality assurance and control, productivity, marketing, infrastructure and capacity building through a cluster based approach in the form of SPV registered company to manufacture quality drugs of Ayurveda, Siddha and Unani (ASU). The department has appointed IL&FS Education and Technology Services Limited, and Infrastructure Development Finance Company (IDFC) as Project Monitoring Consultants (PMC) for better implementation and monitoring of the scheme. So far 10 projects in different States have been approved. The three projects are functional at Confederation for Ayurvedic Renaissance Keralam Ltd; Thrissur, Kerala, Herbal Health Research Consortium Pvt. Ltd, Amritsar, Punjab and Ayushraj Enterprises Pvt Ltd; Jaipur, Rajasthan and two projects are expected to be functional during the year 2014-15. Remaining projects are under

process.

As per the scheme at least 15 enterprises within radius of 100km, holding GMP certificate enterprises and each of them minimum having annual turnover of Rs.20.00 lakhs are eligible under the scheme. The government provides one time assistance as grant-in-aid up to 60% of the project cost restricted to a maximum Rs.15.00 crore. The remaining 40% amount would be arranged by the SPV members. One testing laboratory is mandatory for each SPV/Cluster.

15.5.2 ACHIEVEMENT

During the year 2013-14 the Department has released Rs.4.20 crore to the ongoing projects out of Budget Estimate of Rs.25.00 crore. The Expenditure Finance Committee (EFC) meeting was conducted on 05.02.2014 and the Scheme has been approved by the Competent Authority for continuation in 12th Plan.

Rs. (in crore)

S. No.	Name of the clusters	Total cost of the project	Total Grant- in-aid released till March, 2014
1.	Confederation for Ayurvedic Renaissance Keralam Ltd; Thrissur, Kerala.	16.92	9.00
2.	Herbal Health Research Consortium Pvt Ltd; Amritsar, Punjab.	16.79	9.20
3.	Ayush Raj Enterprises Pvt Ltd; Jaipur, Rajasthan.	16.20	8.72
4.	Rushikulya Ayurvedic Cluster Pvt Ltd; Ganjam, Orissa.	9.99	1.20
5.	Lepakshi Ayur Park Pvt Ltd; Hyderabad, Andhra Pradesh	18.01	2.00

Rs. (in crore)

			,
S. No.	Name of the clusters	Total cost of the project	Total Grant- in-aid released till March, 2014
6.	Maharashtra Ayurved Center Pvt Ltd; Pune.	15.82	6.00
7.	Konkan Ayur Pharma Pvt Ltd; Sangemshwar, Maharashtra.	14.79	7.98
8.	Ayur Park Health Care Ltd; Bangalore, Karnataka.	17.36	8.92
9.	Traditional AYUSH Cluster Pvt Ltd Tamil Nadu.	16.59	4.99
10.	Sanskar Ayush Medicare Pvt Ltd; Uttrakhand	17.85	2.00

15.5.3 **BUDGET**

(Rs. in crores)

Head	Plan	Total
Budget Estimate 2013-14	20.00	20.00
Revised Estimate 2013-14	7.00	7.00
Expenditure upto March 2014	4.20	4.20

Empowerment of Women and Benefit to Physically Handicapped Persons

- 16.1 The Department of AYUSH, established for the promotion and propagation of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy, has been striving to achieve health for all without gender bias by popularizing the above systems. Department has been implementing various Centrally Sponsored and Central Sector Schemes, which benefit women and children as well. The Department is sensitive towards issues related to women and believes in the principle of Gender equality. The Research Councils under the Department have been undertaking research on various matters relating to Women's Health Care.
- Similarly, under National Rural Health 16.2 Mission one Ayurvedic drug 'Punarnavadi Mandura' for anemia of pregnant ladies and adolescent girls is included in the ASHA Kit. Department of AYUSH has suggested inclusion of simple AYUSH medicines in ICDS programme. AYUSH department has also been implementing Information, Education and Communication (IEC) Scheme for the various therapies under AYUSH for creating awareness amongst the general masses especially women and children about the efficacy of the therapies. Beneficiaries of these schemes include women and children who constitute a substantial number or major percentage of total participants. Schemes of National Medicinal Plant Board also provide significant avenues for income generation activities for women belonging to rural and farming families.
- **16.3** The AYUSH systems of medicine are well documented and are known to have

several efficacious remedies for women and child health problems. Ayurveda and other indigenous medical systems have maternal and neonatal health care practices evolved over a long period of time with scientific observations. The Department of AYUSH organized a National Campaign for popularizing use of Homoeopathy for health of mothers and children.

16.4 PROGRAMMES FOR WOMEN BY SPECIFIC ORGANIZATIONS

16.4.1 Naturopathy Awareness programme for Women:

The National Institute for Naturopathy (NIN), Pune runs following programmes for women empowerment:

- 2 Women empowerment programmes are conducted by NIN, Pune. 35 to 40 women participants attended each programme.
- (ii) Monthly Workshops and Regional Language Workshops on Naturopathy & Yoga are conducted in NIN with emphasis to women's health.
- (iii) Weekly lectures (once in a week) are arranged in NIN's premises focusing on women's health problems.
- (iv) Conducted Awareness Programmes, Seminars for school going Children with emphasis to girls' health and related problems.
- (v) NIN is conducting Cookery classes every year for women on Healthy Cooking methods.

- (vi) Educative articles on women's ailments are published in NIN's monthly magazine "Nisargopachar Varta".
- (vii) About 100 to 150 women are given Naturopathy & Yoga treatment daily at NIN's OPD Clinic.
- (viii) NIN has a Sanatorium at Panchgani where free treatment is given to HIV+ve females for improving their immunity level.
- (ix) During the year 30 girls are trained through the one year Treatment Assistant Training Course for imparting Naturopathy & Yoga Nursing care.
- (x) Every month special Yoga Class is conducted at NIN for women. More than 70 women are registered.
- (xi) Rural Health Programme for women is also conducted by NIN at different places.
- (xii) Workshops, seminars, awareness camps are also conducted in which women participation is encouraged.

16.4.2 Central Council for Research in Unani Medicine:

The Council under the Gender Empowerment is conducting special OPDs for females. This also helps the Council to get the research feed-back on the prevalence of different diseases among the females. Apart from General the General OPD for females, Special RCH OPD is also conducted once a week at the Council's centre. The Council is also validating the efficacy of Unani drugs in diseases especially for women such as; So-ul-Qiniya (Anaemia), Sailan-ur-Raham (Leucorrhoea), Kasrat-e-Tams etc.

16.4.3 Central Council for Research in Ayurvedic Sciences:

The council has executed following women specific clinical research projects:

- (i) Clinical evaluation of Rajapravartini Vati, Kanchanara Guggulu and Varunadi Kwath in the management of Poly Cystic Ovary Syndrome a pilot study.
- (ii) Multicentric Open clinical trial of Rajapravartini Vati in kastartava (dysmenorrhoea).
- (iii) Clinical study of AYUSH QOL 2C for improvement of quality of life in breast cancer patients
- (iv) Clinical Evaluation of Ashokarishta, Ashva-gandha Churna and Pravala Pishti in the Management of Menopausal Syndrome.
- (v) Clinical researches on the diseases which are common in women such as iron deficiency anaemia and osteoporosis have been selected under Annual Action Plan 2012-13. Under IEC activity brochures and posters are being distributed for creating awareness about the strength of Ayurveda in common conditions and disease of women.

16.4.4 National Institute of Ayurveda:

Promotive and Curative Management program is organised in the Institute for treatment of Pre-Conceptional Care, Monthwise Antenatal Care, Prasava Care, Sutika Care, Anemia in Pregnancy, Emesis Gravidarum, Ovarian Cysts, Scanty Menses, Menstrual Disorder, PCOD, Poly-cystic ovarian diseases etc.

16.4.5 National Institute of Siddha:

The Institute is providing free Siddha medical facilities to the female patients through its OPD and IPD infrastructure by providing free consultation, medicines and other associated services such as laboratory examination, Thokkanam, Varmam etc.

16.4.6 Central Council for Research in Homoeopathy:

The Council has undertaken the following women specific Clinical Research projects

- (i) Management of Polycystic Ovarian Syndrome with homoeopathic intervention versus placebo – A randomized controlled pilot study.
- (ii) A Multi-Centre Single blind Randomized Placebo Controlled Trial to Evaluate the

- Efficacy of Individualized Homoeopathic Intervention in Breast Fibroadenoma.
- (iii) Sepia in Menopausal Symptoms: A Multi-Centre Randomized Double Blind Placebo Controlled Clinical Trial.
- (iv) Adjuvant Homoeopathic Management for breast cancer patients experiencing side effects from chemotherapy – An observational pilot study.

Result Framework Document, 2013-14

- 17.1 Each Department is required to prepare Results Framework Document (RFD), which provides a summary of the most important results that a Department/Ministry expects to achieve during the financial year. This Document has two main purposes: (a) move the focus of the Department from process-orientation; and (b) provide an objective to evaluate Department's overall performance at the end of the year. This Document contains not only the agreed objectives, policies, programs and projects but also success indicators and targets to measure progress in implementing them.
- **17.2** The RFD contains the following six sections:-

Section1: Ministry's/Department's Vision, Mission, Objective and Functions.

Section 2: Inter se priorities, key objectives, success indicators and targets.

Section 3: Trend values of the success indicators.

Section 4: Description and definition of success indicators and proposed measurement methodology.

Section 5: Specific performance requirements from other Departments that are critical for delivering agreed results.

Section 6: Outcome/Impact of activities of Department/Ministry.

17.3 The Department of AYUSH prepared the RFD for 2013-14 in the above format. The main objectives, which have been incorporated

in the RFD document and the weightage given to each of these objectives and the results achieved thereof are given in the table below:-

S. No.	Objective	Weight- age	Achieve- ments
1	Delivery of AYUSH Services	10.00	6.85
2	Human Resource Development in AYUSH	17.00	7.75
3	Promotion and Propagation of AYUSH Systems	11.00	10.70
4	Effective AYUSH Drugs Administration	20.00	18.91
5	Research in AYUSH	12.00	9.85
6	Conservation and cultivation of medicinal plants	15.00	14.32
7	Efficient Functioning of the RFD System	3.00	3.00
8	Transparency/Service 3.00 delivery Ministry/ Department		0.00
9	Administrative Reforms	6.00	1.80
10	Improving Internal 2.00 Efficiency / Responsiveness.		0.00
11	Ensuring compliance to the Financial Accountability	1.00	1.00
	Total Composite Score	100	74.18

Details of Grant-in-Aid Released to Society/ Private/Voluntary Organisation

- 18.1 DETAILS OF GRANT-IN-AID RELEASED TO SOCIETY RECEIVING ONE TIME ASSISTANCE OF RS.10.00 LAKHS AND BELOW RS.50 LAKHS.
- 18.1.1 Name of the Scheme: Promotion of AYUSH Intervention in public Health Initiatives. [AYUSH & Public Health]

S. No.	Name of Societies / Organizations with full address	One time assistance of 10 lakhs and below 50 lakhs released during the year.			lakhs
	iuii auuiess	Purpose of the Grant	2011-12	2012-13	2013-14
1.	Isha Foundation, 23/7 U, Raja Nagar 2 nd Street, Sowripalayam, Coimbatore, Tamil Nadu. Pin – 641028	Promotion of AYUSH Intervention in Public Health Initiatives in Kolli Hills Block of Namakkal District, Tamil Nadu.	Rs. 38.40 lakhs	_	_
2.	Tapobhoomi Trust, 552 B, Beherasahi, Nayapalli, Bhubaneswar – 12, Orissa.	Integrated AYUSH model by control Malaria & malnutrition by (AYUSH-64) in Malkangiri District of Orissa.	Rs. 11.50 lakhs	_	Rs. 45.40 lakhs
3.	Swami Vivekananda Youth Movement, Hanchipura Road, Saragur, H.D Kote Taluka, Mysore District, Karnataka – 571121	Promotion of AYUSH Intervention in Public Health Initiatives Mysore District, Karnataka.	_	_	Rs. 30.00 lakhs

18.1.2 Name of the Scheme: - Revitalization of Local Health Tradition (LHT).

S. No.	Name of Society / Organization with full address	One time assistance of 10 lakhs and below 50 lakhs released during the year.			
	iuii auuress	Purpose of the Grant	2011-12	2012-13	2013-14
1.	Swadeshi Science Movement, Sastra Bhawan, B4, 4 th floor, Mather Square, Town Railway station road, Kochi – 682018, Kerala.	Documentation, Assessment, promotion, preserve and streamline Local Health Traditions of Idukki district of Kerala.	Rs. 10.00 lakhs	_	_
2.	Vikas Mitra Sanstha, Sargipalpara, Kondagaon, Distt. Bastar, Chattisgarh 494226	Revitalizations of Local Health Traditions in order to enhance health security of rural Communities in the selected Blocks of Bastar district in Chattisgarh State.	Rs. 10.00 lakhs	_	_
3.	Sanjeevani Ayurveda Foundation, 63, Kamaraj Avenue, 1 st street, Kasturba Nagar, Adyar, Chennai – 600020.	Building evidence base for dais and Integration of systems in 3 Districts of Tamil Nadu State.	Rs. 10.00 lakhs	_	_
4.	Centre for Traditional Medicine & Research (CTMR), Chennai. 4A, 4 th Cross street, Mahalakshmi Nagar, Adambakkam, Chennai-600088	Documentation and Validation of LHTs in Salem, Dharmapuri and Krishnagiri Districts of Tamil Nadu	Rs. 10.00 lakhs	-	
5.	SAMBANDH, 2926/5198, Jayadev Nagar, Lewis Road, Bhubaneshwar – 751002, Orissa	Revitalization of Local Health Traditions in order to enhance the health security of rural community in Muniguda and Rayagada blocks.	Rs. 10.00 lakhs	_	_
6.	Rural Development Organization (RDO), 320, Gramya Bhavan, Aruvankadu – 643202, Nilgiris, Tamil Nadu.	To identify the tribal herbs and to know the topography of medicinal plants in their habitat. To identify the concept of diseases and herbal use through the system of folk belief for good health among the tribes 4 blocks of Nilgiri, Tamil Nadu.	Rs. 10.00 lakhs	_	_

18.1.3 Name of the Scheme: Central Sector Scheme For Grant-In-Aid To Non-Profit/ Non-Governmental AYUSH Organizations/Institutions For Upgradation To Centres Of Excellence

S. No.	Name of Private Voluntary Organisation with full address	Purpose of the Grant	Details of grant rele Society receiving of assistance of 10 lakhs		ne time
			2011-12	2012-13	2013-14
1	Arogyadham, JRD Tata Foundation for Research in Ayurveda & Yoga Science, JRD Tata Foundation for Research in Ayurveda & Yoga Science, Chitrakoot, Distt. Satna – 485331	Centre of excellence in drug standardization & quality control of Ayurvedic – Unani medicines	36.95	_	
2	Bhartiya Aushadhi Sanrakshan Avam Vikas Samiti (Regd.), (Indian Medicines Conservation and Development Society), Ramnagar, Distt. Nainital, Mohan – 244715, Uttarakhand.	Centre of Excellence on product standardization and process standardization	_		15.00

18.2 DETAILS OF GRANT-IN-AID RELEASED TO SOCIETY RECEIVING ONE TIME ASSISTANCE OF RS. 50 LAKHS OR MORE.

18.2.1 Name of the Scheme: - Promotion of AYUSH Intervention in public Health Initiatives. [AYUSH & Public Health]

S	lo.	Name of Society / with full address	One time assistance of Rs. 50 lakhs or more			re
•	, its. Will rail address	Purpose of the Grant	2011-12	2012-13	2013-14	
1.		Tapobhoomi Trust, 552 B, Beherasahi, Nayapalli, Bhubaneswar – 12, Orissa.	Integrated AYUSH model by control Malaria & malnutrition by (AYUSH-64) in Malkangiri District of Orissa.	_	Rs. 54.50 lakhs	Rs.99.00 lakhs as 2 nd install- ment.
2	•	Isha Foundation, 23/7 U, Raja Nagar 2 nd Street, Sowripalayam, Coimbatore, Tamil Nadu. Pin – 641028	Promotion of AYUSH Intervention in Public Health Initiatives in Kolli Hills Block of Namakkal District, Tamil Nadu.	Rs. 54.60 lakhs	_	_

18.2.2 Name of the Scheme: Central Sector Scheme For Grant-In-Aid To Non- Profit/Non-Governmental AYUSH Organizations/Institutions For Upgradation To Centres Of Excellence.

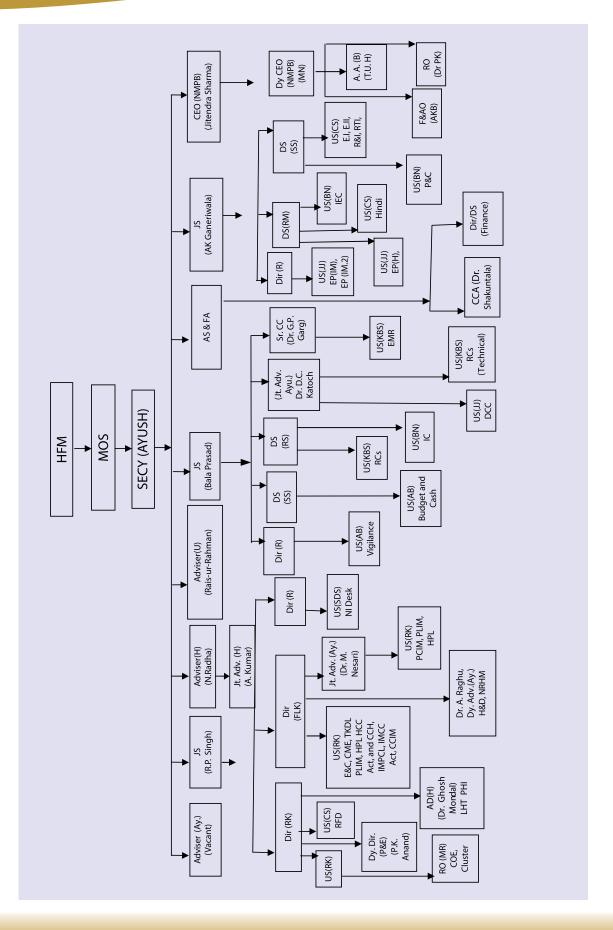
S. No.	Name of Private Voluntary Organisation with full address	Purpose of Grant	Details of grant released to Society receiving one time assistance of above Rs. 50 lakhs		
			2011-12	2012-13	2013-14
1	Muslim Progressive and Educational Council, 580 Abulbarkat, Saharanpur, Deoband – 247554, Uttar Pradesh	For upgradation of Center of Excellence in Ilaj Bid Tadbeer	89.04	-	
2	Govt. Ayurveda Panchakarma Hospital,Sanathanapuram P.O.Alappuzha, Kerala.	For developing Govt. Panchakarma Hospital, Alappuzha, Kerala into a Centre of Excellence with Referral Hospital and Advance Research and Teaching Facilities.	200.00	I	_
3	SOUKYA Foundation (A Charitable Trust) 202, Paravathi Plaza, 105 Richmod Circle, Bangalore- 560067	Centre of excellence on Respiratory Allergies intervention through Homeopathy	64.00	-	_
4	Arya Vaidyasala, Kottakkal. Centre for Medicinal Plants Research, AVS Square (Changuvetty), Kottakal- 676503, Kerala	Centre for Medicinal Plants Research	200.00		_
5	Foundation for Research in Local Health Traditions (FRLHT), 74/2 Jarakabande kaval, Via Yelanka Attur, Bangalore-560064, Karnataka	For facilitating their Hospital, Institute of Ayurveda and Integrative Medicines Research Hospital and Training Centre	200.00	_	96.43
6	Vaidyratnam Ayurveda Foundation,Thaikkaattussery P.O., Ollur, Thrissur-680322, Kerala	The Ayurvedic Management of Musculoskeletal Disorders with special importance of Chronic Inflammatory Joint Disorders and Connective Tissue Disorders.	100.00	_	99.69
7	Sahara Unani Medical Foundation,23-1-440, Mirjumla Tank, Hyderabad-500002, Andhra Pradesh	Center of Excellence in Regimental Therapy.	I	58.00	-
8	Sreedhareeyam Ayurvedic Research & Development Institute, Nellikattu Mana, Koothattukulam, Ernakulam. Kerala-686662	Centre of Excellence in Netra- Roga	_	90.00	_
9	Niamath Science Academy, 36, Jani Jehan Road,Royapeeth, Chennai- 600014	A Health Resort exclusively for Regimental Therapy	_	_	100.00
10	The Ayurvedic Trust, 136-137, Trichy Road, Ramanathapuram, Coimbatore,-641045 Tamil Nadu	Up gradation to Centre of Excellence – Research Hospital for Rheumatology	_	_	109.50

18.2.3 Name of Scheme - Central Sector Scheme for Development of AYUSH Industry Cluster

S. No.	Name of Private Voluntary Organisation with full address	Purpose of Grant	Details of grant released to organisation receiving one time assistance of Rs. 50.00 lakhs and above		
			2011-12	2012-13	2013-14
1	Ayurpark Health Care Limited, 168, Chelakere Kalyan Nagar, Bangalore - 560 043	The objectives are standardization, quality assurance and control, productivity, marketing, infrastructure and capacity building through a cluster based approach.		292.00	
2	Konkan Ayur Pharma Pvt. Ltd.Gat No. 144, A/p.: Dhamani, Tal.: Sangameshwar, Dist.: Ratnagiri 415611	Do	220.00	_	128.00
3	Herbal Health Research Consortium Pvt. Ltd. 277, East Mohan Nagar, Amritsar - 143006.	Do	170.00	_	65.00
4	M/s Ayushraj Enterprises Pvt. Ltd; Jaipur, 35, Sushilpura South, Ajmer Road Bridge, Shyam Nagar 2nd Lane, Sodala, Ajmer Road, Jaipur- 302019	Do	388.00	290.00	
5	Traditional Ayurveda Cluster of Tamilnadu, 48, Grand West Trunk Road, Kancheepuram Dist., Sriperumbudur - 602 105	Do	_	299.00	_
6	Sanskar Ayush Medicare Pvt Ltd; Arya Nagar, Jwalapur, Haridwar-249407, Uttrakhand	Do	_	_	200.00

Annexure

Organisational Chart



Abbreviations

HFM	 Health & Family Welfare Minister 	R.O (H)	 Research Officer (Homoeopathy)
MOS	- Minister of State	R.O	 Research Officer
Secy.	– Secretary	A.A.(B)	 Assistant Adviser (Botany)
JS	– Joint Secretary	PLIM	- Pharmacopoeia Laboratory of
Ay.	– Ayurveda	4.5	Indian Medicine
U	– Unani	AD	 Assistant Director
Н	- Homoeopathy	HPL	 Homoeopathic Pharmacopoeia Laboratory
AS & FA	 Additional Secretary and Financial Advisor 	PCIM	 Pharmacopoeia Commission of Indian Medicine
CEO	 Chief Executive Officer 	EMR	– Extra Mural Research
Dy. CEO	 Deputy Chief Executive Officer 	CCIM	- Central Council of Indian
NMPB	 National Medicinal Plants Board 		Medicine
DS	 Deputy Secretary 	CCH	 Central Council of Homoeopathy
Sr. C.C.	 Senior Chief Chemist 	PHI	 Public Health Initiatives
Dir. (F)	– Director (Finance)	COE	 Centre of Excellence
Dir.	– Director	EP-Homoeo	 Education Policy (Homeopathy)
Jt/ Adv. (Ay.)	– Joint Adviser (Ayurveda)	NI Desk	 National Institute Desk
US	– Under Secretary	EP (IM)	 Education Policy (Indian Medicine)
Dy. Dir.(OL)	 Deputy Director (Official Language) 	EP (IM-2)	Education Policy (Indian Medicine2)
Dy. Dir.(P&E)	 Deputy Director (Planning and Evaluation) 	IMPCL	 Indian Medicines Pharmaceuticals Corporation Ltd.
CCA	- Chief Controller of Accounts	H&D	Hospital and Dispensary
Dy. Adv.(H)	- Deputy Adviser (Homoeopathy)	E&C	Education and Co-operation
Dy. Adv.(Ay.)	- Deputy Adviser (Ayurveda)		·
Dy. Adv.(U)	– Deputy Adviser (Unani)	Estt.III	- Establishment.III
R.O (Ay.)	 Research Officer (Ayurveda) 	Estt.l	Establishment.l

Estt.II	– Establishment.II	*NI - NATIONAL INSTITUTES
Gen. Admn.	- General Administration	AllA – All India Institute pf Ayurveda, New Delhi
IEC	 Information Education Communication 	NIA – National Institute of Ayurveda
P&C	 Parliament and Co-ordination 	RAV – Rashtriya Ayurved Vidyapeeth
P&E	 Planning & Evaluation 	IGPTRA – Institute of Post Graduate Training & Research in Ayurveda
DCC	 Drug Control Cell 	NEIFM - North Eastern Institute of Folk
F	– Finance	Medicine
F&AO	 Finance and Administrative Officer 	NEIAH – North Eastern Institute of Ayurveda and Homoeopathy
LHT	 Local Health Traditions 	NIS – National Institute of Siddha
MP	Midwifery Practices	NIUM – National Institute of Unani Medicine
IMCC Act	 Indian Medicine Central Council Act 	NIH – National institute of Homoeopathy
IMPCL	 Indian Medicines Pharmaceuticals Corporation Limited 	MDNIY – Morarji Desai National Institute of Yoga
NRHM	 National Rural Health Mission 	NIN – National Institute Of Naturopathy
CME	 Continuous Medical Education 	**RCS-RESEARCH COUNCILS
GTP	 Golden Triangle Partnership 	CCRAS – Central Council for Research in
IC	 International Corporation 	Ayurvedic Sciences
IPR	– Intellectual Property Rights	CCRH – Central Council for Research in Homoeopathy
EMR	 Extra Mural Research 	CCRUM – Central Council for Research in
DCC	 Drug Control Cell 	Unani Medicine
RTI	 Right to Information 	CCRYN – Central Council for Research in Yoga & Naturopathy
R&I	 Receipt and Issue 	CCRS – Central Council for Research in Siddha

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