Dr. Swapan Paul

Book Publication: "Introduction to Homoeopathic Materia Medica".

Sr. No.	Name of the Articles	Name of the Journals	Issue details	Month & Year
1	Reshape from Obesity (Pg. No. 56 – 59)	Homoeopathy for All (ISSN 0973-9823), New Delhi	Vol. 17 No. 10 (190)	October 2015
2	Menopause – A Milestone in Woman's Life (Pg. No. 25 – 32)	Homoeopathy for All (ISSN 0973-9823), New Delhi	Vol. 17 No. 12 (192)	December 2015
3	Acute Infantile Colic and its Homoeopathic Approach (Pg No 22 – 26)	The Homoeopathic Heritage (ISSN, 9070-6038), New Delhi	Vol. 41, No.12	March 2016
4	Homoeopathy and Performance – Remedies for Men (Pg. No. 12 – 17)	The Homoeopathic Heritage (ISSN: 9070-6038), New Delhi	Vol. 42, No.3	June 2016
5	Bed-Wetting: No More Worry (Pg. No. 55 – 57)	Homoeopathy for All (ISSN 0973-9823), New Delhi	Vol. 18 No. 8 (200)	August 2016
6	A case of Obstructive Jaundice cured by Arsenicum album (Pg. No. 48 – 49)	The Homoeopathic Heritage (ISSN: 9070-6038), New Delhi	Vol. 42, No.5	August 2016
7	An Overview on Psoriasis through Homoeopathic Lens (Pg. No. 55 – 59)	Homoeopathy for All (ISSN 0973-9823), New Delhi	Vol. 18 No. 9 (201)	September 2016
8	Use of Indian Drugs and Rare Drugs in Constipation (Pg. No. 66 – 71)	Homoeopathy for Ali (ISSN 0973-9823), New Delhi	Vol. 18 No. 10 (202)	October 2016
9	Homoeopathic Perspectives on Allergic Rhinitis (Pg. No. 56 – 60)	Homoeopathy for All (ISSN 0973-9823), New Deihi	Vol. 18 No. 11 (203)	November 2016
10	Dynamization: The Quantum Science of Homoeopathy (Pg. No. 50 – 56)	Advancements in Homoeopathic Research (ISSN 2456-3668),	Vol. 1 No. 3 (37)	Nov 2016–Jan 201



		New Delhi		
11	Evidence based case study of Renal Calculus (Fg. No. 33 – 38)	The Homoeopathic Heritage (ISSN: 9070-6038), New Delhi	Vol. 42, No.11	February 2017
12	Homoeopathic Treatment of Nasal Polyp (Pg. No. 68 – 73)	Homoeopathy for All (ISSN 0973-9823), New Delhi	Vol. 19 No. 2 (206)	February 2017
13	Homoeopathic Treatment of Dental Caries in Children (Pg. No. 25 – 30)	Homoeopathy for All (ISSN 0973-9823), New Delhi	Vol. 19 No. 3 (207)	March 2017
14	Homoeopathic Management of Epistaxis (Pg. No. 70 – 73)	Homoeopathy for All (ISSN 0973-9823), New Delhi	Val. 19 No. 4 (208)	April 2017
15	of gouty Arthritis with a Case Study (Pg. No. 37 – 41)	The Homoeopathic Heritage (ISSN: 9070-6038), New Deihi	Vol. 43, No.01	April 2017

SL.No	Name of the Article	Name of the Journal	NSSI	Name of the Author(s)	No	Volume	Month	Page No
1	2	ω	4	5	6	7	8	9
-	Angustura	Bulletin of	0972-	Dr. Gitasri Pal	No.2	œ	April 2005	45
	vera	the NIH	6276					
2	Ptelea	Bulletin of	0972-	Dr. Gitasri Pal	No.4	00	October	134
	trifoliata	the NIH	6276	10.00			2005	
w	Berberis	Bulletin of	0972-	Dr. Gitasri Pal	No.1	10	January	v
	aquefolium	the NIH	6276				2007	
4	Psychological	Bulletin of	0972-	Dr. Gitasri Pal	No.1	11	January	29
	disorders	the NIH	6276	Dr.Sayeed			2008	
	related to			Akhtar				
	pregnancy							

Dr.Gitasri Pal

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- Panakkada D, 'Need of Pharmacovigilance in Homoeopathy', Compendium of invited articles on Pharmacovigilance, Ayusuraksha Nov -2019.

Live

This is to inform that Dr. Gitasri Pal delivered lectures as resource person in the below mentioned occasions.

Name of Resource Person	Topic	Organising Institute	Occasion	Date
Dr Gitasri Pal	Relation of Pharmacy with Materia medica	NIH, Materia medica dept.	ROTP,Materia medica	18.11.2008
Dr Gitasri Pal	Source of Hom. Drug	N.I.H	Induction training in AYUSH system imparted to newly joined doctors of CHS	22.05.2017
Dr Gitasri Pal	Source of Hom. Drug	N.I.H	Foundation training program of CHS doctors	20.11.2017
Dr Gitasri Pal	Thin Layer Chromatograph	N.I.H	Recent advances in Homoeopathy, for teaching Faculties of Govt Hom Medical College Of Odisha	16.09,2019
Dr Gitasri Pal	Research works made by Pharmacy Dept, NIH	Homoeopathic Bijnan Parishad at South Calcutta Girls School,Kol-25	Celebration of Hahnemann's Birth day	20.05.2018



DR. Gautam Pal.

- A. Experience as Associate Editor (Technical) of the Bulletin of National Institute of Homocopathy, since 2008 to till 31.03.2017.
- B. Editor, Bulletin of the National Institute of Homoeopathy, since April, 2018 to 31,12,2019.

C Papers published in Peer-reviewed Journals:

- Effects of homoeopathic single and minimum dose on non-radiographic axial spondyloarthritis - BASDAI Assessment; Homoeopathic Links, 2020; 33(1):41-52.
- Gut Microbiota: In dynamics of life and homoeopathy; Homoeopathic Links, 2020; 33(4):

D. Articles in Bulletin of The National Institute of Homoeopathy.

- Eczema: Scope of homocopathy, 2(4):75-82, 1999;
- Laws of causation and homoeopathy, 6(2): 54-56, 2003;
- The concept of individualisation and its application in homoeopathy, 7(1): 29-36, 2004 (Co –author: Dr. Indrani Chakrabarti);
- Black tarry stool: its causes and management, 8(4): 121-125, 2005;
- Nail: a clinical perspective, 9(1): 18-22, 2006;
- Philosophy, homoeopathy and materia medica,9(3): 108-112, 2006;
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- 9. Totality on single symptom: the bird's eye view, 12(2): 63-66, 2009;
- Study of materia medica in light of practice of medicine, 13(2): 70-75, 2010;
- Prostatomegaly with moderately high value of PSA; a case of sick individual, 13(4): 184-187, 2010;
- Organon and homoeopathic philosophy in relation to repertory, 14(3): 129-135, 2011;
- A review on aggravation of 50 millesimal potency; 16(2):72 84, 2013;
- Study of symptoms of dengue or dengue-like fever episode occurred at Salt Lake, Kolkata in 2012 and searching for its genus epidemicus; 17(1):38 - 42, 2014.
- Dynamic nature of Molluscum contagiosum; 18(1):30 31, 2015.
- A review on prevailing mode of teaching of clinical subjects in homoeopathic educational curriculum; 19(1):5-11, 2016
- E. Worked as coordinator for compilation of materials related to Hand book on MCH for CCRH on behalf of National Institute of Homocopathy.
 - E. Contributor to 'Pockete Chikitsa', a popular handbook in Bengali compiled by Ms. Sujata Mukherjee;
 - G. Contributor to 'Crack the entrance', authored by Dr. Jithesh TK & Dr. Anil K.

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List of Publications of

Dr Ajoy Kumar Chowdhury, Reader

Dept of Physiology & Biochemistry, NIH, Kolkata

SI. No.	Name of the article	Name of the Journal	ISSN	Name of the Author	Issue No.	Volume No.	Month	Page No
1	2	3	4	5	6	7	8	9
1	Biochemical investigation and its interpretation	Bulletin of the National Institute of Homeopathy	0972- 6276	Dr Ajoy Kumar Chowdhury	2	3	April 2000	34
2	Anti Nuclear Antibodies	Bulletin of the National Institute of Homeopathy	0972- 6276	Dr Ajoy Kumar Chowdhury	4	4	October 2001	59
3	Tumor Markers	Bulletin of the National Institute of Homeopathy	0972- 6276	Dr Ajoy Kumar Chowdhury	2	5	April 2002	1
4	Role of Nitric Oxide in infections	Bulletin of the National Institute of Homeopathy	0972- 6276	Dr Ajoy Kumar Chowdhury	4	5	October 2002	10
5	Morbidity Survey of Cardiovascular patients Admitted in Indoor of a Homeopathic Hospital	Asian Journal of Homoeopathy	0975- 4156	Dr Arup Das, Dr Ajoy Kumar Chowdhury, Dr D Basu	4(17)	5	Nov 2011- Jan 2012	42



Name of the Officer: Dr. Kalasapakam Vijay Ananth.

Department: Anatomy Post Held: Lecturer

Date of joining National Institute of Homoeopathy: 30.12.2010

- A) Attended the Annual Conference of Anatomical Society of India, West Bengal Chapter-
- 1.) On 18th January, 2011
- 2.) On 18th January, 2012
- 3.) On 18th January, 2013
- 4.) On 19th January, 2015
- 5.) On 10th January, 2017
- 6.) In the month of January, 2020
- B) Conducted Annual Conference of Anatomical Society of India (ANACON), West Bengal Chapter in the year 2016 at National Institute of Homoeopathy, organized by the Department of Anatomy for all the State Medical Colleges.
- C) Conducted the B.H.M.S Entrance Examination for these centers in those years-
 - 1.) At Thiruvanathapuram in the month of June, 2013
 - 2.) At Bhopal in the month of month of June 3rd, 2012
 - 3.) At Chennai in the month of June, 2011
- D) Organized and Conducted a Arogya Mela for National Institute of Homoeopathy in the National Arogya Mela organized by Ministry of AYUSH with collaboration with the Confederation of Indian Industries and State Govt. of Tamil Nadu at Chennai Trade Center, organized at Chennai from 05th to 8th May, 2017. Team set up a stall for NIH for seeing patients and circulating NIH & AYUSH brochures to the visitors.
- E) Organized and Conducted a 12th Jatiya Sanghati Utsav-o-Bharat Mela, 2016 held at 24th Paraganas (south) Kolkata from 14th- 18th December, 2016 visited with medical team and conducted the program by seeing patients, dispensing medicines and pamphlets pertaining to AYUSH and NIH oriented services to public the undersigned was assigned the duty on 18.12.2016.
- F) Participated National level Arogya Expo at Science City, Kolkata organized by Ministry of AYUSH, Govt. of India in collaboration with 7th World Ayurvedic Foundation from 1st to 4th December, 2016. Team set up a stall for NIH for seeing patients and circulating NIH & AYUSH brochures to the visitors. The undersigned was assigned the duty on 04.12.2016.
- G) Attended Scientific Convention on World Homoeopathy Day from 10th April to 11 April 2018, conducted at New Delhi.
- H) Undertaken to conduct a C.C.H Inspection at C. N. Kothari Homeopathic Medical College, Vyara on 10.05.2019.

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Biceps Anatomical Aberration in a Cadaveric Study

Vijay Ananth K.

Abstract

In a routine cadaveric dissections in a cadaver the short head of Biceps Brachii tendon (SHBT) showed bifurcated in attachment with the belly of the Pronator Teres muscle seen along with its usual course of attachment with the radial tuberosity. This was seen bilaterally on both the upper limbs in the same body during the anatomical dissection. Here the biceps brachii was originating from the long head from the supraglenoid tubercle from the capusular joint and the short head from the coracoid process of scapula.

Keywords: Biceps Brachii and Pronator Teres Muscle; Extrarticular Insertion; Cadaver.

Introduction

In the upper extremity the anterior compartment forms the flexor group muscles of which along with the coracobrachialis the Biceps Brachii plays a major role in flexing the arms and the elbow joint. It compensates the action with the Triceps Brachii the posterior compartment muscle of the brachium which forms the extensors.

It is a large fusiform muscle of that compartment [3,8] and a primary supinator of the forearm. Biceptal aponeurosis, a triangular band formed from the deep fascia originates from the biceps tendon. This aponeurosis gives protection to the cubital fossa. A third head is also reported seen posterior to the brachial artery [8].

It originates from long and short heads from supraglenoid tubercle and coracoids process of scapula respectively.

And both the heads converge with the two belles and gets inserted into the posterior part of the tuberosity of radius bone [9].

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Fig. 1: Rt. Side Arm

Figure 1 shows Biceps Brachii in the front of forearm and the Cubital fossa below.

Red arrow shows the LHBT inserting into the radial tuberosity.

Green arrow shows the SHBT and its extrarticular insertion was seen in the pronator teres muscle which is the medial border of Cubital Fossa (Fig. 1).

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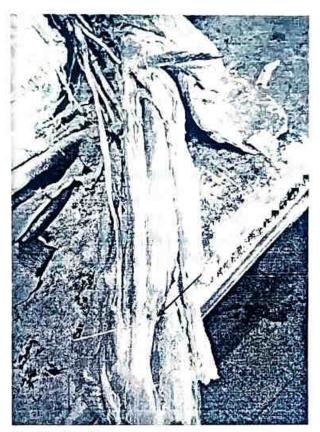


Fig. 2: Lt. Side Arm

Figure 2 shows Biceps Brachii in the front of forearm and the Cubital fossa below.

Red arrow shows the LHBT inserting into the radial tuberosity.

Green arrow shows the SHBT and its extrarticularinsertion was seen in the pronator teres muscle which is the medial border of Cubital Fossa (Fig. 2).

Case Report

In the year 2016 a male cadaver was procured to the Dept. of Anatomy, National Institute of Homoeopathy for the dissection purpose regarding teaching and training the undergraduate students which was procured from the R.G. Kar Medical College through the Director of Medical Education. It is know that such anatomical aberration may be seen due to any congenital or as anatomical anomalies. The short head of Biceps Brachii and the long head originated from their respective course but this extrarticular insertion was seen in the pronator teres muscle for the SHBT but the LHBT got inserted into the tuberosity of radius as usually. The arterial and nerve supply was normal.

Discussion

Different origin was noted in some case studes like The supernumerary head was a bulky muscle belly and originated from the medial lip of the intertubercular groove [1]. The absence of the long head of the biceps (LHB) tendon as reported in the fourth case of bilateral congenital anamaly of the LHB tendon under clinical studies conducted by using Ultrasonography (US) and magnetic resonance (MR) when the patient experienced anterior shoulder pain at rest that exacerbated with overhead activities. The pain was moderate for months but worsened in the last few weeks, specially seen after sports activity in another study by Rego Costa and et al. [6].

In one particular study 74 cadavers were dissected and observed in one year based on its variations in shape and insertion of the Biceps Brachii were found in 10 out of 74 cadavers (13,5%). In which 20 arms of the 10 cadavers, 14 had variations, thus, in 148 analyzed arms, only 9,4% varied. Bilateral variation occurred in 4 arms, and 2 of them were symmetric. Eight different types of variations were found in Brazilians as per Denize Augusto da Silva and others [4].

Bergman, Thompson and Afifi reported that the two heads of biceps brachii muscle may be totally separate or fused and either head may be absent. In the absence of long head, the tendon may be found arising from the bicipital groove, one of the tubercles of humerus, the capsule of then shoulder joint or the tendon of pectoralis major [2]. In a similar study by Hyman and Warren too came across an extraarticular origin of the long head of biceps brachii [7]. Sharadkumar Pralhad Sawant and others observed that in undergraduate dissections a male donated cadaver showed that the short head of the biceps brachii muscle got inserted into the radial tuberosity of the radius separately. The long head got inserted into the radial tuberosity and bicipital aponeurosis though the orgin was as usual [5]. In a detailed study by Subhalakshmi Wahengbam and others in a 35 adult cadavers which were dissected and observed for variations in the origin and insertion of biceps brachii muscle bilaterally. Among the 70 arms studied, three had 3-headed biceps brachii, 2 on the left and 1 on the right side.

All the third heads were of humeral origin, which inserted into the radial tuberosity by a common tendon with the long and short heads [10]. All such anomalies can be visualised during the daily activities or in extreme physical work but in the present work as the Cadaver was procured from the mortuary no details

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of the case history is recorded or was available. Further it is possible the individual may have some discomfort in flexing the elbow but that must have substantiated with the Pronation muscles during his life.

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Evaluation of the Growth Inhibitory Activities of Triphala against Common Bacterial Isolates from HIV Infected Patients

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The isolation of microbial agents less susceptible to regular antibiotics and the rising trend in the recovery rates of resistant bacteria highlights the need for newer alternative principles. Triphala has been used in traditional medicine practice against certain diseases such as jaundice, fever, cough, eye diseases etc. In the present study phytochemical (phenolic, flavonoid and carotenoid) and antibacterial activities of aqueous and ethanol extracts of Triphala and its individual components (Terminalia chebula, Terminalia belerica and Emblica officinalis) were tested against certain bacterial isolates (Pseudomonas aeruginosa, Klebsiella pneumoniae, Shigella sonnei, S. flexneri, Staphylococcus aureus, Vibrio cholerae, Salmonella paratyphi-B, Escherichia coli, Enterococcus faecalis, Salmonella typhi) obtained from HIV infected patients using Kirby-Bauer's disk diffusion and minimum inhibitory concentration (MIC) methods. T. chebula was found to possess high phytochemical content followed by T. belerica and E. officinalis in both aqueous and ethanol extracts. Further, most of the bacterial isolates were inhibited by the ethanol and aqueous extracts of T. chebula followed by T. belerica and E. officinalis by both disk diffusion and MIC methods. The present study revealed that both individual and combined aqueous and ethanol extracts of Triphala have antibacterial activity against the bacterial isolates tested. Copyright © 2007 John Wiley & Sons, Ltd.

Keywards: Triphala; Kirby-Bauer's disk diffusion; zone of clearance; minimum inhibitory concentration.

INTRODUCTION

Antibiotic resistance has become a global concern (Westh et al., 2004). Antibiotics exist in large numbers in today's pharmaceutical market. Despite that, their usage is becoming increasingly restricted; the reason being attributed largely to the development of drug resistance among microorganisms. In addition, the phenomenon is coupled by the toxicity possessed by many of the conventionally prescribed antimicrobials, warranting a search for newer antimicrobial agents that could substantially overcome some of these drawbacks.

There has been a worldwide move towards the use of traditional medicines due to concerns over the more invasive, expensive and potentially toxic mainstream practices (WHO, 2002). Numerous studies have identified compounds within herbals that are effective antibiotics (Basile et al., 2000; Cowan, 1999). Traditional healing systems around the world that utilize herbal remedies are an important resource for the discovery of new antibiotics (Okpekon et al., 2004). Certain traditional remedies have already been reported to be

effective against drug-resistant bacteria (Kone et al., 2004; Sato et al., 2000).

Interestingly, the effects of fruit extracts on bacteria have been studied by numerous researchers world-wide (Reddy et al., 2001; Erdoorul, 2002; Atefl and Erdoorul, 2003). In addition, much work has been focused on ethnomedicinal plants in India (Maheshwari et al., 1986; Rai, 1989; Negi et al., 1993). It has been suggested that ethanol and aqueous extracts from plants are potential sources of antimicrobial agents (Chung et al., 1995; Vlietinck et al., 1995). The selection of crude plant extracts for screening programmes has the potential of being more successful as an initial step than the screening of pure compounds isolated from natural products (Kusumoto et al., 1995).

Triphala is a traditional ayurvedic herbal formulation, consisting of equal parts of three medicinal plants namely T. chebula, T. belerica and E. officinalis. Triphala has been used extensively as a drug against a number of diseases (Awasthi and Nath, 1986; Reddy et al., 1990). The fruits of Triphala are claimed to have antiviral and antibacterial effects (Hozumi and Oyama, 1997). Moreover, Triphala is prescribed for various symptoms of infections, fatigue, assimilation and infectious diseases such as tuberculosis, pneumonia, AIDS (El-Mekkawey and Merelly, 1995), periodontal diseases, (Abraham et al., 2005) and has been reported to reduce considerably the damage due to oxidative stress in experimen-

E-mail: drsheeladevi@yahoo.com Contract/grant sponsor: University Grant Commission, Government of

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Table 1. Plant materials used in Triphala formulation

	E GARAGE PARKET COLUM	2.0.000000	
Scientific name	Family	Harvested period	Part used
T. chebula T. belerica E. officinalis	Combretaceae Combretaceae Euphorbiaceae	January December December	Seedless dry fruits Seedless dry fruits Seedless dry fruits



The present study investigates the phytochemical and antibacterial efficacies of ethanol and aqueous extracts of Triphala and its individual plant components against certain bacterial isolates recovered from HIV infected patients using the conventional Kirby-Bauer's disk diffusion and MIC methods.

MATERIALS AND METHODS

Plant materials. Fruits belonging to the Triphala formulation were collected from The Chief Botanist (Tamilnadu Medicinal plant farms and Herbal Medicine Corporation (TAMPCOL)) Ltd, Chennai, India and authenticated by The Director of Centre for Advanced Studies on Botany, University of Madras, India (No.ARC/DO-NA/Authentication/2005/1830) (Table 1). The seedless fruits were dried under shade and powdered before use.

Aqueous extract. The seedless fruits of Triphala and its individual components were ground to fine powder, maintained at 60 °C for 3 h in sterile distilled water. The resulting suspensions were filtered and evaporated for dryness at 60 °C in vacuo.

Ethanol extract. The seedless fruits of T. chebula T. belerica and E. officinalis and combined (Triphala formulation) were placed in a soxhlet extractor containing 70% of ethanol. The resulting extracts were subsequently weighed before usage in the study.

Phytochemical study. The phytochemical study was designed to estimate phenolic, flavonoid and carotenoid components present in the aqueous and ethanol extracts of Triphala and its individual fruit components.

Isolation and estimation of phenolics. Isolation and estimation of phenolics was performed using protocols suggested by Price et al. (1980). Briefly, 5 g of the sample was homogenized thoroughly in 200 mL of acetone using a mortar and pestle, transferred to a stoppered flask and kept overnight in a shaker. The supernatant was collected and the residue was extracted twice with 10 mL acetone. The collected extracts were pooled and filtered through Whatman No.1 filter paper and the filtrate was centrifuged at 3000 x g for 10 min. The resultant supernatant was used for the estimation of total phenolics. One milliliter of distilled water was added to 25 µL of extract. To this preparation, 25 µL of acctone and 60 µL of ferric ammonium sulphate were added and kept at room temperature for 20 min. Later, 60 μL of potassium ferricyanide was added and the absorbance was measured at 720 nm after 20 min using quercetin as a standard. The total phenolics was

Isolation and estimation of flavonoids. The isolation and estimation of flavonoids was carried out using protocols suggested by Harborne (1975) and Lamaison and Carnat (1990). Flavonoids are generally present as their glycosides and were hydrolysed before the free flavonoids were assayed. Briefly, 5 g of the sample was acid hydrolysed with 10 mL of 1 n sulphuric acid at 70 °C for 1 h and neutralized with 0.5 mL of 10 N NaOH. To this 5 mL of ethyl acetate was added, shaken well and the ethyl acetate portion was collected. This was repeated thrice and the ethyl acetate was pooled and evaporated to dryness. The residue was reconstituted with 1 mL of HPLC grade methanol and assayed for total flavonoid content. From the extract, 1 mL of extract was mixed with 1 mL of 2% methanol AICl3 and the absorbance was measured at 430 nm using a double beam Perkin Elmer UV/Visible spectrophotometer (USA).

Extraction and estimation of total carotenoids. Extraction and estimation of phenolics was performed by protocols suggested by Narayanaswamy and Palanisami (1973). Briefly, 5 g of the sample was homogenized in 20 mL of acetone using a mortar and pestle, and filtered using Whatman No. 1 filter paper. The extraction was repeated until free from pigments. The filtrate was pooled and partitioned with an equal quantity of peroxide free ether, thrice using the separating funnel. The ether phase containing carotenoids was evaporated and the residue was dissolved in 1 mL ethanol. Subsequently, 0.1 mL of 60% KOH was added and partitioned twice in peroxide free ether. The ether was evaporated and the residue was dissolved in 0.5 mL ethanol, before measurement of carotenoids. The extract was measured at 450 nm for absorbance and the carotenoids present were estimated using the formula:

$$C = D \times V \times F/2500$$

where C is the total carotenoids, D is the absorbance at 450 nm in a 1 cm cell, V is the volume of original extract in mL, F is the dilution factor and 2500 is the average extinction coefficient of the pigments. The carotenoids were expressed as $\mu g/g$ sample.

Disk preparation: Sterile blank diffusion disks were placed into labelled trays for each ethanol or aqueous

Table 2. The aqueous and ethanol extracts yield of Triphala and its individual components

Plant	Aqueous (%)	Ethanol (%)
Triphala	12	14
T. chebulla	12	16
T. belerica	13	15
E. officinalis	12	18

\$12

extract. A 10% extract was prepared using the respective solvents and from this preparation, disks with various concentrations were prepared by saturation with 5 μL of the individual aqueous or ethanol extracts. Control disks were prepared by saturating sterile blank disks in either ethanol or sterile distilled water and allowed for evaporation.

Bacterial dilution. The bacterial isolates used were clinical isolates from urethral swabs, seminal fluid, urine, high vaginal swabs, skin swabs, blood and sputum specimens of HIV infected patients. The isolates were identified by standard culture and biochemical methods in the microbiology laboratory. The organisms were maintained on an agar slope at 4 °C and sub-cultured for 24 h before use. Isolated colonies of the bacteria were placed into individual tubes containing 5 mL of sterile brain-heart infusion broth (BHIB) (Himedia. Mumbai, India) and incubated at 37 °C, before adjusting the tubes with 0.5 McFarland Units using sterile BHIB. Turbidity was also verified using spectrophotometric comparison with a 0.5 McFarland standard. The dilutions were used within 15 min of preparation and gently vortexed prior to use.

Disk diffusion analysis. The standardized inoculum $(1-2\times10^7\,\mathrm{cfu/mL}\ 0.5\,\mathrm{MeFarland}\ \mathrm{standards})$ was introduced on the surface of sterile Mueller-Hinton agar (Himedia, Mumbai, India) (MHA) (pH 7.2–7.4) plates using sterile cotton swabs. The inoculations were done along three axes in a rolling motion to ensure uniform bacterial distribution and growth. After the plates were labeled, the disks were placed on the surface of the agar, inverted and incubated at 37 °C for 16 h. Measurements were made from the outer edge of the disks to the inner edge of any zones of clearance produced.

Minimum inhibitory concentration (MIC). The MICs were determined using the MH broth-dilution method. The extracts, sterilized by 0.45 mm Millipore filters, were added to MH broth medium. Serial 10-fold dilutions were made that furnished a concentration range from 0.01 to 1000 mg/mL for each extract. The tubes were incubated aerobically at 37 °C for 18–24 h. Two control tubes were maintained. These included an antibiotic

control (tube containing extract and the growth medium without inoculum) and an organism control (the tube containing the growth medium, physiological saline and the inoculum). The lowest concentration (highest dilution) of the extract that produced no visible bacterial growth (no turbidity) when compared with the control tubes were regarded as the MIC.

RESULTS AND DISCUSSION

In addition to the increased magnitude of emergence of bacterial drug resistance, high-dosage and prolonged antimicrobial therapy could eliminate beneficial bacterial commensals predisposing to pathogen invasion (Carson and Riley, 2003; Guarner and Malagelada, 2003). Phytonutrients are plant-derived, naturally occurring compounds possessing antimicrobial, curative, preventative and nutritive values (Balentine and Albano, 1999; Craig and Beck, 1999).

The present study investigated the antibacterial effects of aqueous and ethanol extracts of Triphala and its individual plant components against certain common bacterial isolates recovered from HIV infected patients. Both the aqueous and ethanol extracts of T. chebula were found to possess inhibitory effects against most of the isolates tested, followed by T. belerica and E. officinalis. However, P. aeruginosa, S. paratyphi-B and S. typi were resistant to both the extracts investigated. The study also showed that most of the isolates tested were more sensitive to the ethanol extract than the aqueous one. T. chebula was the only aqueous extract that showed inhibitory activity against S. sonnei, S. flexneri, V. cholerae, E. coli and E. faecalis (G1 tract pathogens), while the rest of the aqueous extracts failed to show any zone of clearance (Table 3).

The MIC method showed that most of the bacterial isolates were sensitive to both the aqueous and ethanol extracts of Triphala and its individual components. Further, S. sonnei, S. flexneri and Staph. aureus were sensitive at low concentrations (0.01 µg/mL) of ethanol extracts of T. chebula. In addition, the aqueous extract possessed antibacterial activity against most of the isolates tested except K. pneumoniae and S. typhi (Table 4).

Table 3. Antibacterial activity of aqueous and ethanol extracts of Triphala and its individual plant components by Kirby-Bauer's disk diffusion

				Concentra	tion (5 µL)			
Bacterial isolate	ATc	АТЬ	AEo	AT	ETc	ETb	EEo	ET
Pseudomonas aeruginosa	-	-			JE	+	-	+
Klebsiella pneumoniae		90	-	≂	/_	i 	-	-
Shigella sonnei	+	¥3	-	-	++	++	+	+
Shigella flexneri	+	2	-	¥	++	+	+	+
Staph. aureus	+	2	4	≘	++	+	+	+
Vibrio cholerae	a + 8	-	6	2	+	+	. + ≥	+
Salmonella paratyphi-B	-	₹	155	=	≅	: 	#C	1 =
Escherichia coli	+	-	(C ++)	5 7	+	+	+	- 4
Enterococcus faecalis	+	=	-	÷	+	+	+	4
Salmonella typhi	+	¥3	246	=	2	2	-	-
Solvent (aqueous/ethanol)		27	_	52	-	-	(=)	-

^{-,} no antibacterial activity; +, zone of inhibition less than 4 mm; + +, zone of inhibition 4-10 mm; ATc, aqueous extract of *T. chebula*; ATb, aqueous extract of *T. belerica*; AEo, aqueous extract of *E. officinalis*; AT, aqueous extract of Triphala; etc, ethanol extract of *T.*

Table 4. Minimum inhibitory concentration of aqueous and ethanol extracts (μg/mL) of Triphala and its individual plant components

	AT	ATc	ATb	AEm	ET	ETc	ETb	EEm
P. aeruginosa	100	10	100	D				
K. pneumoniae	R	100	B	n	0.1	0.1	0.1	10
S. sonnei	10	0.1	100	н	10	10	10	10
S. flexneri	10	075770	100	100	0.1	0.01	0.1	0.1
Staph. aureus	90000	0.1	10	100	0.1	0.01	0.1	0.1
	10	0.1	10	100	0.1	0.01	0.1	0.1
V. cholerae	10	0.1	10	100	0.1		22.0	
S. paratyphi-B	10	0.1	10	100		0.1	0.1	0.1
E. coli	10	0.1	10		0.1	10	10	100
E. faecalis	10			100	0.1	0.1	0.1	0.1
Salmonella typhi	100	0.1	10	100	0.1	0.1	0.1	0.1
AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	100	0.1	R	R	10	10	10	100

MIC values are expressed as μg/mL: R, no inhibition even at the highest tested concentration. AT, aqueous extract of Triphala; ATc, aqueous extract of T. chebula; ATb, aqueous extract of T. belerica; AErn, aqueous extract of E. officinalis; ET, ethanol extract of Triphala; Etc, ethanol extract of T. chebula; ETb, ethanol extract of T. belerica; EEm, ethanol extract of E. officinalis.

Table 5. The phytochemical (phenolics, flavonoids and carotenoids), in aqueous and ethanol extracts of Triphala and its individual fruit components

Drug	Phenolics (µg/g)	Flavonoids (µg/g)	Carotenoids (µg/g)
Aqueous extract			(0.5.3)
T. chebula	9 084	712	196
T. belerica	8 256	624	166
E. officinalis	9 520	682	
Triphala	8 026	680	194
Ethanol extract	2.020	060	184
T. chebula	11 260	806	222
T. belerica	10 860	740	322
E. officinalis	8 620	000000	286
Triphala		710	280
V-1000000000	10 600	724	300



Triphala and its individual components showed antibacterial effect on both Gram-positive as well as Gramnegative bacteria, which suggests the ingress of active phytochemicals through both the bacterial cell walls. In the present study ethanol extracts showed high antibacterial activity compared with aqueous extracts, which might possibly be due to the lesser solubility of the active constituents in aqueous solutions, resulting in less or almost no antibacterial effect on the bacterial isolates tested at lower concentrations. The percentage of individual and combined formulation of Triphala extract yields (aqueous and ethanol) is given in Table 2. The ethanol extract yield was more (in both Triphala and individual plant components) than the aqueous extract yield. Furthermore, the phytochemical analysis on T. chebula showed the existence of higher phenolic, flavonoid and carotenoid contents in its ethanol extracts than the aqueous extract, followed by Triphala, T. belerica and E. officinalis, respectively (Table 5).

Most of the antibiotic compounds already identified in herbs are reportedly aromatic or saturated organic molecules which makes ethanol an ideal solvent (Cowan, 1999). Albeit the ethanol extract of *E. officinalis* showed 18% yield, it showed poor antibacterial activity, possibly due to the high temperature during the extraction procedure, which in turn could have substantially denatured the active constituents responsible for antibacterial activities. It has been reported by some researchers that certain phytocompounds, such as phenolics, flavonoids and carotenoids possess antibacterial activities (Lin et al., 2005; Alzoreky and Nakahara, 2003; Mahanom et al.,

more sensitive to T. chebula than T. belerica and E. officinalis could be due to the presence of a high phytochemical content. Nevertheless, Triphala preparation has been reported to contain numerous flavonoids including procyanidin and quercetin, the existence of other ingredients warrants more studies. Moreover, the mechanisms behind the antibacterial activity are complex to understand and could be attributed to either inhibiting the cell division or to damaging the cell walls of bacteria; which however requires to be investigated in detail.

CONCLUSION

In conclusion, this study showed Triphala and its individual fruit components of Triphala have potent antibacterial action against the wide spectrum of bacterial isolates from HIV infected patients. This antibacterial activity may be due to the presence of phytochemicals, which warrants Triphala be subjected to extensive preclinical and clinical antibacterial experimentations in the future to treat certain diseases due to infectious agents.

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NAME OF FACULTY: Dr. LOKANATH BEHERA DESIGNATION: LECTURER DEPARTMENT OF REPERTORY NATIONAL INSTITUTE OF HOMOEOPATHY (NIH), KOLKATA LIST OF PUBLICATIONS

SI. No.	Name of the Article	Name of the Journal	ISSN	Name of the Author(s)	Issue No.	Volume No.	Month/ Year	Page no
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3	Deciding the Significance of Some Symptoms in Summer	New Life Era	2320-4125	Dr. Subhash Chaudhary Dr. Lokanath Behera Dr. D. Basu	7	10	May 2017	4
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20.02.2012 to 24.02.2012	Training Technology Course for AYUSH faculty members	National Level	Participant	National Institute of Health & family Welfare (NIHFW), New Delhi	(National Institute of Health & family Welfare (NIHFW), New Delhi

Paper Published:

- Effect of Homoeopathy in the treatment of Subarachnoid Haemorrhage of Brain: A case Report, Surgery Current Research, Volume 10,Issue 2, No104 10:104.doi:10.352248/2161-1076.2020.10.104 Published Date: May 25,2020
- Kata Chhera O Raktopate Homoeopathy, Sarir O Sastho, Bartaman Prakashana, Nabom Barsho, Panchom Shankhya, Published Date- 15th December 2020

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Name
 Designation

Lecturer (Dept of Physiology) N 111 Kolkata

Article	"Taking excess of iron our nuke you TRONM IN: or a diseased man"	STH halletin October 2012 (Vol. 15 No.4 (SSN 0952-6276)
	"Allergic Manifestations: Its overview and Homocopathic Management."	Souvenir 2016 National Homoeopathic conference at Allahabad (28-29 Feb 2016)
	Efficacy of Homoeopathy in Managing Respiratory Infections beyond Doubt!—A Narrative Review	Hornoeopathic Links Published online 2020-12-15

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4	Approach of Homoeopathy in Nero- developmental type of Mental Disorder, ADHD	MHC AIIMS 2016 Conference Souvenir 2-8 November 2016		Dr. Shagufta Anjum Dr. Lokanath Behera			November 2016	31
5	Quibus combitus: The epiphenomenon of concomitants	International Journal of Homoeopathic Sciences	E - ISSN - 1626-4493 P - ISSN - 1626-4485	Dr. Lokanath Behera	Issue No. 3	Vet 4	July Sen 2020	98-103
6	Poly Arthritis Treated by Homoeopathy- A Case Report	Journal of Homoeopathy		Dr. Lokanath Behera Dr. B.P. Srivastav Dr. Shristhi Singh	Issue No. 1	Vo 1	Jan-Run 2020	10-19



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SI no	Name of the article	Name of the Journal	Date	Co Authors
1	Individualized homoeopathy versus placebo in essential hypertension: A double-blind randomized controlled trial	Indian Journal of Research in Homoeopathy : CCRH	DOI: 10.4103/0974- 7168.116629 Indian J Res Homoeopathy 2013;7(2):62-71.	Subhranil Saha, Munmun Koley, Seikh Intaj Hossaini, Malay Mundlei, Shubhamoy Ghoshi, Goutam Naga, Achintya Kumar Dattas, Prasanta Raths
2	Developing the criteria for evaluating quality of individualization in homeopathic clinical trial reporting: a preliminary study	Journal of Integrative Medicine. www.jcimjournal.com/jim www.elsevier.com /locate/issn/20954	J Integr Med. 2014; 12(1): 13-19. http://dx.doi.org/10.10 16/S2095- 4964(14)60009-1	Subhranil Saha1, Munmun Koley1, Subhasish Ganguly2, Prasanta Rath3, Pulak Roy Chowdhury4, Seikh Intaj Hossain5
3	Randomized trial on weight and lipid profile of obese by formulation from Garcinia combogia	Medical Science ISSN 2321–7359 EISSN 2321–7367 24(103), May - June, 2020	24(103), May - June, 2020	Raja M1, Chintamani Nayak2, Biswaranjan Paital3©, Prasanta Rath4, Karunakara Moorthy5, Sobiya Raj6, AK Hati7



PUBLISHED RESEARCH WORK AND ARTICLES

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Ĺ.	Role of Homocopathy in Preventive & Social Medicine	Bulletin of the National Institute of Homoeopathy	Jan. 1999	1	2		
2.	Homocopathic Magic - The earliest concept of Similarity (or does Homocopathy have its origin in Magic?)	Bulletin of the National Institute of Homocopathy	Jan. 2001	1	4		
3.	Study of Materia Medica – A suggestion	Bulletin of the National Institute of Homoeopathy	Oct. 2000	IV	3		
4.	Karkat Rog Sankranta ba Cancerous Diathesis O' Cancer (in Bengali)	Homoeo Ketan	March, 2001	12	14		
5,	Karkat Rog Sankranta ba Cancerous Diathesis O' Cancer (in Bengali)	Homoco Ketan	April, 2001	1	15		
6.	Karkat Rog Sankranta ba Cancerous Diathesis O' Cancer (in Bengali)	Homoeo Ketan	May, 2001	2	15		
7.	Karkat Rog Sankranta ba Cancerous Diathesis O' Cancer (in Bengali)	Homoeo Ketan	June, 2001	3	15		
8.	Karkat Rog Sankranta ba Cancerous Diathesis O' Cancer (in Bengali)	Homoeo Ketan	August, 2001	5	15		
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10.	Vaccinated: To Be Or Not To Be?	The Journal of Homovo Transmission	May-June, 2001	2	VI
11.	Suicide	XIII All India Homoeopathic Seminar	2003		<u> </u>
12.	Lactational Disorders	Bulletin of the National Institute of Homoeopathy	Jan. 2008	1	13
13.	Prescription on Keynote Symptoms	Principia Homoeopathica	June, 2008	VII	1
14.	A Short History of Study of Cardiology	Principia Homoeopathica	Aug. 2008	lX	-
15.	A Study of Repertory to the Cyclopedia of Drug Pathogenesy, compiled by Dr. Richard Hughes	HOMEOBUZZ	June 2009	6	4
16.	Homoeopathic Treatment of Bronchial Asthma	Souvenir of Homoeopathic Scientific Seminar National Level	24 January 2010		
17.	Suicide and Homocopathy	Souvenir of International Seminar On Recent Advances In Homocopathy	19-21 st Feb. 2010		
18.	The Basics of Miasm	IHK NEWS	Dec. 2010	6	XXV
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20.	Calcutta Method or Keynote Method Of Prescription	Souvenir of REMINISCENCE 2011, Alumni Meeting of P. G. Students of S. K. H. M College, Beed	April, 2011		
21.	Shadows of Remedy	Bulletin of the National Institute of Homoeopathy	April 2011	2	14



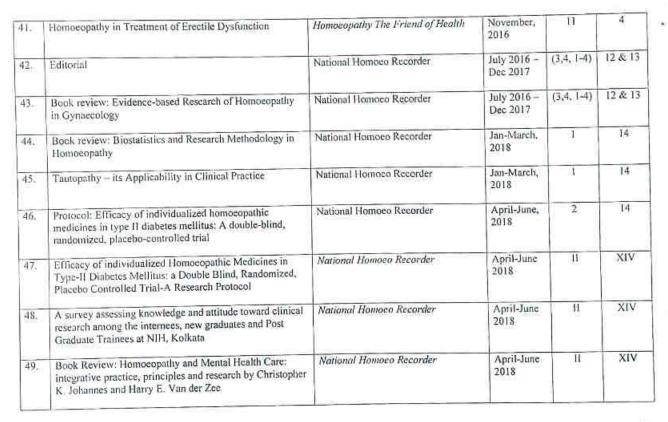


22.	Fragmentary Observation on Hahnemann's 'Fragmenta De Viribus Medicamentorum Positivis Sive in Sano Corpore Humano Observatis'	Bulletin of the National Institute of Homoeopathy	Oct. 2011	.4	14
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24.	Study and Analysis of Human Kinesics with reference to Repertorial Rubric	Bulletin of the National Institute of Homocopathy	July 2013	3	16
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27.	Arthralgia-Study of 20 cases with Constitutional Homoeopathic Treatment	National Homoeo Recorder	January- March 2014	ļ.	X
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29.	Artificial Chronic Diseases – a review	National Homoeo Recorder	July-Sept. 2014	ш	х
30.	Albrecht Von Haller	National Homoeo Recorder	April-June 2014	П	X



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2.	Study of Polsatilla from a Cyclopaedia of Drug Pathogenesy by Richard Hughes with Comparison to Materia Medica Pura By Samuel Hahnemann	National Homoso Recorder	July-Sept. 2015	Ш	ΧI
3.	A study on shadow of Sulphur	National Homoeo Recorder	OctDec. 2015	IV	XI
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37.	A case of Focal Seizures (Complex Partial Seizures) with impairment of consciousness	Souvenir, 19th All India Homoeopathic Scientific Seminar 2015, Nagpur	16 th -17 th Jan. 2016		
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40	Action of Dulcamara in an Acute Exaggeration in a case of Chronic Eczema	Homocopathy The Friend of Health	September, 2016	9	4







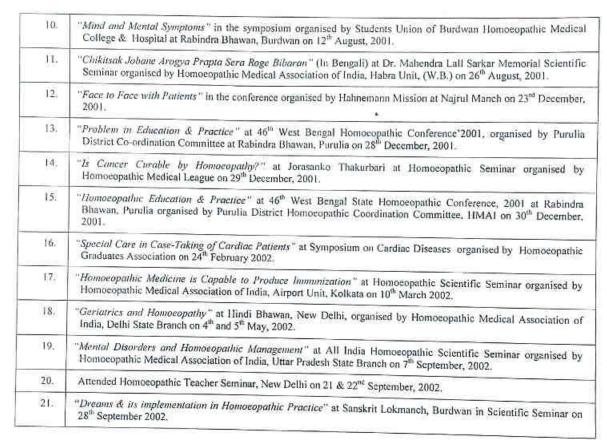
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53.	Editorial: The journey of National Homoeo Recorder	National Homoeo Recorder	Oct-Dec, 2018	4	14
54.	Homocopathic treatment of heavy menstrual bleeding due to uterine fibroids in reproductive age group; An open-label, prospective, observational trial	National Homoeo Recorder	Oct-Dec, 2018	4	14
55.	Book review: Keynotes Advances & Complete: by Dr. Rohit Gupta	National Homoeo Recorder	Oct-Dec. 2018	4	14
56.	Efficacy of individualized homeopathic treatment of insomnia: Double-blind, randomized, placebo-controlled	Complementary Therapies in Medicine, ELSEVIER.	2019.		43
57.	Journey of concept of Health, Disease and Holistic medicine upto 21st Century	All India Homoeopathic Journal	Jan. 2019	XIV	1/2019
58.	Homoeopathic treatment of large Endometrial Plyp: a case	Homocopathic Links	2019	32 (Sub	mitted)
59.	The role of homoeopathic treatment in individuals suffering from post-caesarean backache: An open observational clinical trial	Complementary Therapies in Medicine, ELSEVIER.	2019.	(300)	maeu)



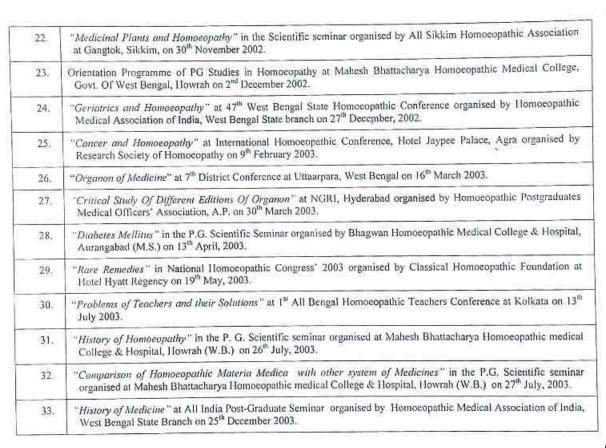


Sl. No.	Topic, Date, Place & other details
Ĺ	"Rheumatoid Arthritis" at IX All India Homoeopathic Seminar, Pune 1995 organised by Homoeopathic Medical Association of India, Pune City and District Unit at Balgandharva Rangamandir, Pune on 25th & 26th November 1995.
2.	"Cancer And Its Homoeopathic Treatment" at Conference of Indian Homoeopathic Organisation, Raipur, (Madhya Pradesh) on 28th February, 1999.
3.	"Mental State & Symptoms for arriving at Totality" at Bihar State Homocopathic Conference, Darbhanga on 23rd May, 1999.
4.	"Evolution of Organon of Medicine, Various Literature of Hahnemann and Difficulties in Study and Teaching of Organon of Medicine" at Teacher's Re-Orientation Programme in Organon of Medicine at J.J. Magdum Hom. Med. College, Jayasingpur (Maharashtra) on 15th & 16th October 1999.
5,	"Case-Taking in Homoeopathy" at Scientific Seminar of International Society of Sahni Drug Transmission, Patna. (Bihar) on 17th January, 2000.
6.	"Falling of Hair & Its Management" at 2 nd Dr. R. P. Mishra Memorial Vyakhanmala organised by Dr. R. P. Mishra Memorial Trust at Ghazipur, U.P. on 19 th November 2000.
7.	"Different Angles of Prescription" in the 6 th Hooghly District Homoeopathic Practitioners' Convention, Uttarpara, W.B. on 17 th December, 2000.
8.	"Dreams and Homoeopathy" in the Scientific Seminar and 75th Birth Anniversary of Dr. B. Sahni organized by International Society of Sahni Drug Transmission at Patna (Bihar) on 17th January, 2001.
9.	"Rheumatoid Arthritis" in Millennium National Scientific seminar 2001 organised by Homoeopathic Medical Association of India at Hotel Taj Bengal on 29th July, 2001.







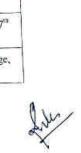




34.	"Doctor-patient Relationship" at XIII All India Homoeopathic Seminar organised by Homoeopathic Medical Association of India, West Bengal State Branch on 26th December 2003.
35.	"Rheumatism: its Management & Homoeopathic Treatment" at Scientific Seminar organised by Jhargram Sub Divisional Homoeopathic Doctor's Association, Jhargram, West Bengal on 19th February 2004.
36.	"The Life and Works of Dr. Hahnemann" on Hahnemann Birthday Programme on 10 th April 2004. (vide Office Order No. 8-30/NIH/2004/3274 dated 16-03-2004)
37.	"Evolution of Organon of Medicine" at Post-Graduate Workshop organised by G.D. Memorial Homoeopathic Medical College & Hospital, Patna (Bihar) on 12 th April 2004.
38.	"Doctor-Patient Relationship" at Homoeopathic Practitioners Conference, Chandpara, West Bengal on 25th April 2004.
39.	"Evolution of Organon" at Post-Graduate Workshop organised by G.D. Memorial Homoeopathic Medical College & Hospital, Patna (Bihar) on 6 th May 2004.
40.	"Homoeopathic Materia Medica" at Post-Graduate Workshop organised by G.D. Memorial Homoeopathic Medica College & Hospital, Patna (Bihar) on 7th May 2004.
41.	"Case Taking in detail - Study" & "Study Plan of Organon at PG Level" at Post-Graduate Workshop organised by G.D. Memorial Homocopathic Medical College & Hospital, Patna (Bihar) on 6th & 7th May 2004.
42.	"Clinical Application of Organon of Medicine" at Workshop organised by Venkateswara Homoeopathic Medical College & Hospital, Chennai (Tamilnadu) on 17th August 2004.
43.	"Homoeopathic Prophylaxis" at National Seminar organised by Mayurbhanj Homoeopathic Medical College & Hospital, Baripada (Orissa) on 4 th September 2004.
44.	"Different School of Philosophy, etc." at State Homocopathic Medical College and Hospital, Ghazipur, U.P. on 24 and 25th September 2004.
45,	"Importance of Mental Symptoms in Homoeopathy" at National Homoeopathic Congress 2004 organised by Classica Homoeopathic Foundation at Indian Museum, ABC Hall, Kolkata on 27th & 28th November 2004.

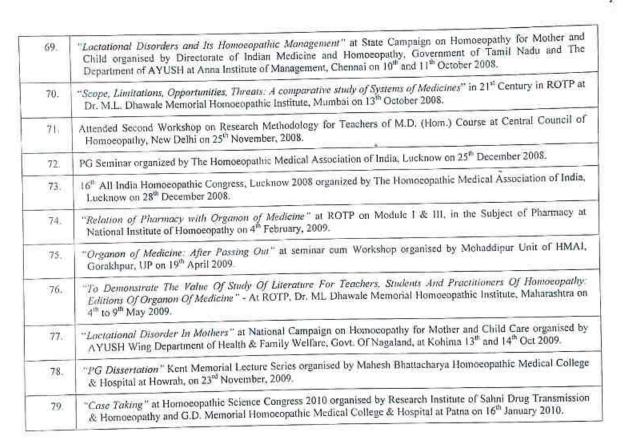


46.	"Homocopathic Case Taking" at National Homoeopathic Science Congress 2005 organised by The Homoeopathic Medical Association of India, Lucknow Unit, at Ganna Kisan Sansthan Dalibagh, Lucknow on 5th and 6th February 2005.
47.	"Homoeopathic Management of Malaria" at The Continuing Medical Education Programme on 'Malaria' sponsored by Deptt. of AYUSH, Govt. of India at Dr. A. C. Homoeopathic Medical College & Hospital, Bhubaneswar on 12th and 13th February 2005.
48.	"Homoeopathic Approach in Endocrinal Disorders" AT C.M.E. Programme organised by J.S.P.S. Govt. Homoeo Medical College, Ramanthapur, Hyderabad on 18th & 19th February 2005.
49.	"Role of Constitution, Temperament, Diathesis, etc" conducted one day workshop at Burdwan on 12th March 2005.
50.	"Case Presentation" at 2 nd National Seminar of Homoeopathic Specialists '05 organised by NVS Bio Research Pvt. Ltd. at Hotel Oberoi Grand, Kolkata on 17 th April 2005.
51.	"Expectation from Students during House-Job and Remaining Part of M.D. (HOM) COURSE" at Workshop on PG Degree Course for PG Guides organised by Central Council of Homoeopathy at New Delhi on 18th and 19th April, 2005.
52.	Conducted Workshop on 6th & 7th August 2005 at C.N. Kothari Homoeopathic Medical College & Research Centre, Vyara, Gujarat.
53.	"History of Medicine" at All India Teachers' Conference & P.G. Seminar at Kolkata on 14th November 2005.
54.	Conducted two day PG Workshop at Dr. M. L. Dhawale Memorial Homoeopathic Institute on 19th and 20th November 2005. (TOPIC)
55.	"Role of Homoeopathy in Endocrinal Disorders" at Homoeopathic National Conference at Belgaum, Karnataka on 75 and 8th January 2006.
56.	Homocopathy" at Seminar for PG Students in D.K.M.M. Homocopathic Medical College



57.	Treatment of Hormonal Diseases with Importance of Individualisation" at St. Dr. Brijkishore Homocopathic Medical College and Hospital, Faizabad on 25 th & 26 th February 2006.
58.	"Case Taking in Homoeopathy" at State Homoeopathic Scientific Seminar 2006 organised by The Homoeopathy March 2006.
59.	A Consec of Birthum Homogopathic Practitioners Conference at Suri, West Bengal on Zo March 2000.
60.	"Organon of Medicine is Required for Successful Homoeopathic Practice" at Two days Homoeopathic Section of Assam at District Library (Nagaon), Assam on 18th Seminar organised by Homoeopathic Health Organisation of Assam at District Library (Nagaon), Assam on 18th
61.	Attended Workshop Organised by Central Council of Homoeopathy for Inspectors/ Visitor at Dr. A. C. Homoeopathic
62.	"Nosodes with Special Emphasis on Carcinosin" organised by Homoeopathic Bijnan Parishad, Koikata on o
63.	"Keynote Method of Prescription" at XV All India Homocopathic Congress, Aurangabad, 2006 on 23" December
64.	2006. "History of Homoeopathic Medicine" at ROTP in the subject of Organon of Medicine at Midnapore Homoeopathic Medical College and Hospital on 8th March 2007. Medical College and Hospital on 8th March 2007.
65.	"Where does Homoeopathy Stand in 2007" in one day Homoeopathic Conference-2007 on 25 Where
	Regency, Salt Lake, Kolkata. Regency, Salt Lake, Kolkata. "Man in Health" for PG Students at D.N. De Homoeopathic Medical College & Hospital on 17th & 24th September
66.	2007.
67.	2007. "History of Medicine, Biographical History of Homoeopathy" at ROTP on Module I, in the Subject of Organon of Medicine, Biographical History of Homoeopathy on 19th February, 2008. Medicine at National Institute of Homoeopathy on 19th February, 2008.
68.	Classic Diverges" AT ROTP on Module II on Case taking and Trionocopathe reports







	A Day of Homogo Medical College and Hospital at
80.	"Selection Of Potency" at Workshop organised by State Sri Durga Homoro Medical College and Hospital at Azamgarh, UP on 23 rd and 24 th January 2010.
81.	and the Hampergraphy" at International Seminar on Recent Advances on Troub
82.	"Howevenethy In Day To Day Practice" at Scientific Seminal Organises 57
83.	April 2010. "Upper Respiratory Tract Infection" at CME organised by Central Council for Research in Homoeopathy (CCRH), "Upper Respiratory Tract Infection" at CME organised by Central Council for Research in Homoeopathy (CCRH), Agartala Unit, Tripura on 17th September 2010.
84.	All Judia Scientific Seminar 'Homoecon-2011' organised by The Fromoecopanic
85.	"Studious Of Remedy" at Sai Ram Homoeo Smart Info 2011 organised by Sai Vin
86.	"Variables Methods of Prescription" at CME Programme organised by Basic Pr
87.	er lad Disease ROTE in Surgers
88.	Suppers In Relation To Organon Of Medicine And Homoeopathy Philosophy 17th September 2011.
7,555	Module-I organised by JSF3 GOTHAT at 66th World Congress of LHMI "LIGA-2011" organised by LMHI at New "Keypoies Methods Of Prescription" at 66th World Congress of LHMI "LIGA-2011" organised by LMHI at New
89.	Delhi on 1st to 4st December 2011. "Case-Taking" at Dr. D.P.Rastogi Memorial Scientific Seminar 2011, organised by HMAI, at Azamgarh, UP on 15
90.	December 2011.
91_	"Key Note Method Of Prescription - A Practical Demonstration at Blitat State Formation organised by HMA1, Bihar State Branch at Bodhgaya, Bihar on 10th and 11th April 2012.



