

SYLLABUS: FIRST B.H.M.S. EXAMINATION (DIRECT COURSE)

II) Homoeopathic Pharmacy

1. Introduction : Homoeopathic Pharmacy, its speciality and originality, Homoeopathic Pharmacopoeia.
2. Scope of Homoeopathic Pharmacy in relation to -
 - a) Organon of Medicine (Aph 264 to 285 organon of medicine)
 - b) Materia Medica
 - c) National Economy
3. Weights and measures including homoeopathic scales (Deci, Centi, Milli)
4. Homoeopathic Pharmaceutical instruments and appliances.
5. Sources of Homoeopathic drugs, process of collection of drug substances, identification, purification, preservation and also preservation of potentised drugs.
6. Vehicles :
 - a) Their preparation and uses
 - b) Purification
 - c) Determination of proof strength alcohol
7. Methods of preparation of drugs from organic and inorganic chemicals, vegetables, animal and animal products, disease products (No sodes) etc.(Hahnemann's classical and modern methods including merits and demerits)
8.
 - a) Methods of preparation of mother tinctures, solutions, potencies and triturations.
 - b) Potentisations of drugs on :-
 - i) Decimal scale
 - ii) Centesimal scale
9. Fluxion potency, methods of conversion of trituration into liquid form – straight potency.
10. External application - its scope – modes of preparation and use of lotion , liniment , glycerol, ointment.
11. Prescription – its study including abbreviations, principles and mode of prescription writing and its validity.

12. Pharmacology–drug strength– Hom. Pharmacodynamics, Dynamic Power, Medicine, Posology, Remedy.
13. Brief study of study standardisation of drugs & vehicles.
14. General knowledge of legislation in relation to Homoeopathic Pharmacy.
15. General laboratory methods solutions, dilution, decantation-precipitation, filtration, distillation, crystallisation, sublimation, percolation etc.
16. Study of biological / mechanical and / or chemical characteristics of some important drug substances.
17. The technique of Homeopathic drug proving.

PRACTICAL

- (1) Identification, and uses of Homoeopathic pharmaceutical Instruments and appliances and their cleaning.
- (2) Identification, and uses of Homoeopathic drugs vide list attached Microscopic
 - (i) At least 30 drug substances – 20 from vegetable kingdom and 10 from minerals and chemicals
 - (ii) Collection of 30 drug substances for herbarium.
 - (iii) Microscopic study of two triturations of up to 3 x potency.
- (3) Estimation of moisture constant of one drug substance with water bath.
- (4) Purity test of ethyl alcohol, distilled water, sugar of milk, including determination of sp. Gravity of distilled water and alcohol.
- (5) Estimation of size of globule, its medication of milk sugar and distilled water making of doses.
- (6) Preparation and dispensing and dilute alcohol solutions and dilutions.
- (7) Preparation of mother tinctures of 3 polycrates.
- (8) Preparation of triturations of 3 crude drugs up to 3X.
- (9) Preparation of mother tinctures of drugs which do not conform to the D.S.I.
- (10) Potentisation of 3 mother tinctures up to 6 decimal scale and 3 centesimal scale.
- (11) Trituration of 3 drugs 6x and their conversion into liquid potencies.

HOMOEOPATHIC PHARMACY

Examination :-

Pattern of Question Paper for Ist. B.H.M.S.

Total 100 Marks

SECTION – A : MCQs.
(Total 30 MCQs) 30 x 1 30 Marks

Q. 1. MCQ is carrying 1 mark each.

SECTION – B :- SAQs. 35 Marks

Q. 2. Solve any 3 5 x 3 = 15 Marks
A) - 5 Marks
B) - 5 Marks
C) - 5 Marks
D) - 5 Marks

Q. 3. Answer any 2 out of 3 5 x 2 = 10 Marks
A) - 5 Marks
B) - 5 Marks
C) - 5 Marks

Q. 4. Write Short Notes 5 x 2 = 10 Marks
A) - 5 Marks
B) - 5 Marks

SECTION – C :- LAQs 35 Marks

Q. 5. Long Answer Question 15 Marks
Q. 6. Long Answer Question 10 Marks
Q. 7. Long Answer Question 10 Marks
OR
Q. 8. Long Answer Question

Anatomy

Study of Normal Man in Preclinical Period

Human Anatomy is the most difficult of all sciences to study. Man is a conscious emntalised, living being and functions as a whole. Human knowledge has become so vast that for precise comprehension of man as a whole development of different branches of sciences like anatomy, physiology and physiology was necessary. But such a division is only an expedient; man nevertheless remains indivisible.

Consciousness, life and its phenomena cannot be explained in terms of cell physiology or of quantum mechanics or by physiological concepts which in turn are based on chemical-physical concepts.

Though anatomy and physiology are hitherto being taught as entirely different subjects, a water-tight barrier should not be erected between them; structure (anatomy) and function (physiology) are but an external expression of an inesilicable phenomenon which is life.

So Anatomy and Physiology should be taught with the following aims :

- (i) To provide for the understanding of the morphological, physiological and psychological principles which determine and influence the organism of the living body as a functioning unit:
- (ii) To co-relate and interpret the structural organism and normal physiology of the human body and thus to provide the date on which to anticipate disturbance of functions.
- (iii) To enable the student to recognise the anatomical, physiological and psychological basis of the clinical signs and symptoms of disorders due to injury, disease and maldevelopment;
- (iv) Similarly, to give the student to understand the factors involved in the development of pathological processes and the possible complications which may arise therefrom.
- (v) To give the student such knowledge of preclinical subjects as will enable him ultimately competently and rationally all the ordinary methods of examination and treatment (including surgery) that may involve such knowledge; and
- (vi) For enabling the student to pick out strange, rare and uncommon symptoms from pathognomonic symptoms for individualisation of patients and drugs for the purpose of applying the law of similars in homoeopathic practice.

II) ANATOMY

Instruction in anatomy should be so planned as to present a general working knowledge of the structure of the human body. The amount of detail which he is

required to memorise should be reduced to the minimum. Major emphasis should be laid on functional anatomy of the living subject rather than on the static structures of the cadaver, and on general anatomical positions and boardrelations of the vicera, muscles, blood-vessels, nerves and lymphatic. Study of the cadaver is only a means to this end. Students should not be burdened with minute anatomical details which have no clinical significance.

Though dissection of the entire body is essential for the preparation of the student for his clinical studies, the burden of dissection can be reduced and much saving of time can be effected if considerable of the amount of topographical details is made and the following points are taken into consideration :-

1. Only such details as have professional or general educational value for the medical student should be presented to him.
2. The purpose of dissection is not to create technically expert prosectors but to give the student an understanding of the body in relation to its function, and the dissection should be designed to achieve this end, for example, ignoring of small and clinically unimportant blood vessels results in such cleaner dissection and a much clearer picture of the main structures and their natural relationships.
3. Much that is at present taught by dissection could be demonstrated as usefully through prepared dissected specimens.
4. Normal radiological anatomy also form part of practical training. The structure of the body should be presented linking functional aspect.
5. Actual dissection should be preceded by a course of lectures on the general structure of the organ or the system under discussion and then its function. In this way anatomical and physiological knowledge can be presented to students in an integrated form and the instruction of the whole course of anatomy and physiology made more interesting, lively and practical.
6. A good part of the theoretical lectures on anatomy can be transferred to tutorial classes with demonstrations.

A few lectures or demonstrations on the clinical and applied anatomy should be arranged in the later part of the course. They should preferably be given by a clinical and should aim at demonstrating the anatomical basis of physical signs and the value of anatomical knowledge to the clinician.

Seminars and group discussions to be arranged periodically with a view of presenting different subjects in an integrated manner.

Formal class room lectures to be reduced but demonstrations and tutorials to be increased.

There should be joint teaching-cum-demonstration sessions with clinical materials illustrating applied aspect of Anatomy in relation to clinical subjects. This should be arranged once a fortnight and even form part of series of introductory lectures if be needed.

There should be joint seminars with the departments of physiology and Bio-Chemistry and should be organised once a month. There should be a close correlation in the teaching of gross Anatomy, Histology, Embryology and Genetics. The teaching of areas and systems in Anatomy, Physiology including Bio-Chemistry should be integrated as far as possible.

Theory

A complete course of human anatomy with general working knowledge different anatomical parts of the body. Emphasis should be laid down on the general anatomical positions and board relations of the viscera, muscles, blood vessels, nerves and lymphatics. Candidates should not be burdened with minute anatomical details of every description which has no clinical significance.

Candidates will be required to recognise anatomical specimen and to identify and answer questions on structures displayed in recent dissections, to be familiar with the bones and their articulations including the vertebrac, the skull and with the manner of ossification of the long bones.

Emphasis will not be laid on minute details except in so far as is necessary to the understanding of or in their application to medicine and surgery. Candidates are expected to know the attachments of muscles sufficiently to understand their actions, but not the precise-details of the origin and insertion of every muscles. A knowledge of the minor details of the bones of the land, foot, their articulations and details of the small bones of the skull will not be required.

The curriculum of anatomy should be divided under the following headings :-

1. Gross Anatomy – to be dealt under the following categories :-
 - (a) Introductory Lectures with demonstrations
 - (b) Systematic series.

The study to be covered by deductive lectures, lecture, demonstrations, surface and radiological anatomy, by dissection of the cadaver and study of dissected specimen. Knowledge thus obtain together with correlation of facts should be integrated into living anatomy. Details of toportances in general practice.

- (i) Superior extremity, inferior extremity, head, neck, thorax, abdomen and pelvis to be studied regionally and system by system (special reference to be made to development and its anomalies, regional, innervation, functional groups of muscles in relation to joints of otherwise and Applied Anatomy).
- (ii) Endocrine organs-with special reference to development and applied anatomy.
- (iii) Neuro-anatomy, Gross Anatomy of brain and spinal cord and the main nerve tracts. The peripheral nerves. Cranical nerves their relations course and distributions.
- (iv) **N.B.** – The practical study should proceed the study of physiology nervous system. Early correlation-with the clinical course is desirable.

- (v) Micro-anatomy (histology) – Modern conceptions of cell, epithelial tissue, connective tissue, muscular tissue, nervous tissue.

(A) Introductory Lectures :-

- (a) Modern conception of cell-components and their functions, why a cell divides, cell division, types with their significance
- (b) Genetic Individuality :- i) Elementary genetics definition, health and diseases, result of interaction between organism and its environments, utility of knowledge from homoeopathic point of view. ii) Mandels' Laws and their significance's iii) Applied genetic.

(B) Developmental Anatomy ----- 15 lectures

(C) General anatomy & Micro-anatomy ----- 15 lectures

(D) Regional anatomy

- (a) Upper Extremity ----- 15 lectures
- (i) Skeleton, position and functions of joints,
- (ii) Muscle groups, brachial plexus,
- (iii) Arterial supply, venous drainage, neuro vascular bundles, lymphatics and lymph nodes, relation of nerves to bones.
- (iv) Joints with special emphasis on shoulder, elbow and wrist joints, muscles, producing movement, results of nerve
- (v) Radiology of bones and joints, ossification, determination of age.
- (vi) Applied anatomy.
- (vii) Surface marking of main arteries, nerves
- (b) Lower extremity ----- 15 lectures.
- (i) Skeleton, position and functions of joints,
- (ii) Muscle groups, lumbar plexus,
- (iii) Arterial supply, venous drainage, neuro vascular bundles, lymphatics and lymph nodes, relation of nerves to bones.
- (iv) Joints with special emphasis on lumbo sacral, hip knee, and ankle joints, muscles producing movement, results of nerve injury.
- (v) Radiology of bones and joints, ossification, determination of age.
- (vi) Applied anatomy
- (vii) Surface marking of main arteries, nerves.
- (c) Thorax ----- 15 lectures.
- (i) Skeleton of joints of muscles of chest wall-diaphragm, innervation of abdominal and thoracic respiration difference with age. The mammary gland lymphatic drainage.
- (ii) The pleura and lungs.

- (iv) Arrangements structures in the mediastinum, heart, coronary arteries, great vessels, trachea, esophagus, lymph nodes, thymus.
 - (v) Radiology of heart, aorta, lungs, bronchogram.
 - (vi) Applied Anatomy
 - (vii) Surface marking-pleura, lungs, heart-valves of heart, border, arch of aorta, sup, venacava, bifurcation of trachea.
- (d) Abdomen and pelvis ----- 25 lectures.
- (i) The abdominal wall – skin and muscles, innervation of fascia, peritoneum, blood vessels, lymphatics, autonomic, ganglia and plexuses.
 - (ii) Stomach, small intestine, caecum, appendix, large intestine.
 - (iii) Duodenum, pancreas, kidneys, ureters, supra renals.
 - (iv) Liver and gall bladder
 - (v) Pelvis, skeleton and joints, muscles of the pelvis, organs internal and external genitalia in male and in the female, lumbosacral plexus, vessels, lymphatics, autonomic ganglia, and plexuses.
 - (vi) Blood vessels and nerve plexuses of abdomen and pelvis, the portal venous system.
 - (vii) Applied anatomy of referred pain, portal systemic anastomosis, catheterisation of the urinary bladder to the male and female.
- (viii) Surface marking of organs and blood vessels.
- (e) Head and neck ----- 25 lectures
- (i) Scalp – Innervation, vascular supply middle meningeal artery.
 - (ii) Face – main muscles groups-muscles of facial expression muscles of mastication, innervation of skin and repair muscles, vascular supply, principles of repair scalp and face wrinkles.
 - (iii) The eyelids eyeball, lacrimal apparatus, the muscles that move the eyeball.
 - (iv) The nasal cavity nasopharynx, septum, conchae, paranasal sinuses, eustachian tube lymphoid masses.
 - (v) Oral cavity and pharynx.
 - (vi) Larynx and laryngeal part of Pharynx structure (No details) functions, nerves supply, laryngeal appearances.
 - (vii) Cervical vertebrae joints of head and neck.
 - (viii) Structures of neck, sternomastoid, brachial plexus main arteries and veins, disposition of lymph nodes, areas of drainage, phrenic nerve, thyroid gland and its blood supply, para-thyroid the trachea, oesophagus. The position of the Sub-mandibular and sublingual salivary glands.

- (ix) Teeth and dentitor.
 - (x) The external middle and internal ear.
 - (xi) Applied anatomy.
 - (xii) Surface marking : Parotid gland, middle meningeal artery, thyroid gland, common internal and external carotid arteries.
- (f) Neuro anatomy : 10 lectures.
- (i) Menings – functions of
 - (ii) Cerebrum – areas of localisation, vascular supply basal ganglion, internal capsule.
 - (iii) Cerebellum – functions
 - (iv) Pons, medullar midbrain, cranial nerves, palsies.
 - (v) Cerebro-spinal fluid-formation, circulation function, absorption.
 - (vi) Cranial nerves, origin, course (with minimum anatomical detail areas of distribution-
 - (vii) Spinal Cord-coverings, segments, relation of segments to vertebral column. Spinal nerves, distribution.
 - (viii) The sympathetic and parasympathetic nervous system location, distribution, function.
 - (ix) Applied anatomy of lumber puncture, referred paid, spinal anaesthesia increased intracranial pressure.

PRACTICAL

Dissection of the whole human body in the course of 1st month, academic months shall be 160 hrs.

1. Each dissection when completed must be shown to the demonstrator and permission must be obtained before proceeding to the next item.
2. Before allotment of a part, each student must pass the oral test of the bones on the part taken by the demonstrator.
3. There should be printed form of the class of practical anatomy as per guide-lines to be followed by every recognised college.

University Examination Pattern for Ist. B.H.M.S.

Department of Anatomy

Examination :-

Pattern of Question Paper for Ist. B.H.M.S.

Total 100 Marks

SECTION – A : MCQs.

(Total 30 MCQs) 30 x 1

30 Marks

Q. 1. MCQ is carrying 1 mark each.

SECTION – B :- SAQs.

35 Marks

Q. 2. Solve any 3

5 x 3 = 15 Marks

- A) - 5 Marks
- B) - 5 Marks
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SECTION – C :- LAQs

35 Marks

Q. 5. Long Answer Question

15 Marks

Q. 6. Long Answer Question

10 Marks

Q. 7. Long Answer Question

10 Marks

OR

Q. 8. Long Answer Question

....E.N.D....

III) PHYSIOLOGY INCLUDING BIO-CHEMISTRY AND PSYCHOLOGY

The purpose of a course in physiology is to teach the functions, processes and inter-relationship of the different organs and systems of the normal human organism as a necessary introduction to their disturbance in disease and to equip the student with normal standards or reference for use while diagnosing and treating deviations from the normal. To a homoeopath the human organism is an integrated whole of body, life and mind; and though life includes all the chemico-physical processes it transcends them. There can be no symptoms of disease without vital force animating the human organism and it is primarily the vital force, which is deranged in disease. Physiology should be taught from the standpoint of description of vital phenomena and the chemico-physical processes underlying them in health.

There should be close co-operation between the various departments while teaching the different systems. There should be joint courses between the two departments of anatomy and physiology so that there is maximum co-ordination in the teaching of these subjects.

Seminars should be arranged periodically and lecturers of anatomy, physiology and bio-chemistry should bring home the point to the students that the integrated approach is more meaningful. For example, gross and minute structure will be dealt with by the anatomist while the role of sub-cellular particles in metabolic processes and the method to assess them may be explained by the bio-chemist and towards the end the physiologist may deal in an integrated manner with behaviour of the cell as a unit, co-ordinating the characteristic bio-chemical and structural components sub-serving specific functions. Students should be encouraged to participate in the seminars and present the practical subjects in an integrated manner.

THEORY

1. **Introduction**

Fundamental phenomena of life. The cell and its differentiation. Tissues and organs of the body.

2. **Bio-chemical principles**

Elementary constituents of protoplasm. Chemistry of proteins, carbohydrates and lipids, Enzymes.

3. **Bio-physical principles**

Units of concentration of solutions, ions, electrolytes and non-electrolytes filtration, diffusion, ultrafiltration, dialysis, surface tension, absorption, hydrotrophy, osmotic equilibrium, colloid, acid, base concentration H.

4. **Nerve Muscle Physiology**

Excitation process in a nerve and its propagation changes undergone by a nerve on stimulation. Polarisation phenomena in nerve. Electrolysis Reaction of degeneration, Neuro-muscular transmission, Different types of muscles in the body. Change on excitation and nature of the contractile process. Physiology of exercise. Rigor mortis.

5. Blood Composition

Regulations of blood volume and its determination, specific gravity of blood, reaction of blood and its regulation. Composition and function of blood plasma, plasma proteins and their function. Bone-marrow, origin, composition, fat, function of the formed element of blood, Chemistry of haemoglobin and its compounds and derivatives, coagulation of blood. Haemolysis, blood group.

6. Cardio-vascular system

Structure and properties of cardiac muscle, cardiac cycle, action of valves, heart sounds, apex beat, nutrition of heart and coronary circulation, Electrocardiogram, cardiac output. Origin and propagation of cardiac impulse. Nervous regulation of heart, cardiac reflexes, course and circulation of blood, structure of arteries, capillaries and veins, peculiarities of cerebral, pulmonary, hepatic, portal and renal circulation. Time of complete circulation, velocity of blood flow, pulse, arterial and venous, innervation of blood vessels and control of circulation. Blood pressure and its regulation, Control of capillary circulation.

7. Reticulo-Endothelial System and lymph

Reticulo endothelial system (R.E.system), spleen lymphatic glands, Tissue fluids and lymph, oedema.

8. Respiratory system

Anatomy and minute structure of respiratory organs. Mechanism of respiratory movement, spirometry of respiration. Composition of inspired, expired and alveolar air. Respiratory quotient. Basal metabolism. Gases in blood and their tension. Transport of O₂ and CO₂ in blood. Mechanism of external and internal respiration, control of respiration. Cheynes-stokes respiration. Apnoea, dyspnoea, anoxia, cyanosis, asphyxia, effect of high and low atmosphere pressure, acclimatisation, Mountain sickness, altitude disease, artificial respiration, effect of respiration of circulation.

9. Digestive system

Metabolism, nutrition and dietetics, normal diet, vitamins. Milk its properties. The digestive organs and their structure and function, various digestive juices, mechanism and functions. Liver, movement of alimentary canal. Defecation, digestion and absorption of the food stuff, and their metabolism. Biological

value of protein. Blood sugar and its regulation. Mineral Metabolism and metabolism during starvation. Nutrition of an individual.

10. The sense organs

General features, classification, sensation, Sensory Organs and sensory pathways:

- (a) **Vision** – Anatomy of the eye. Errors of refraction and their correction Mechanism of accommodation, structure and functions of coats of eye ball. Ocular reflexes. Visual field, visual pathway. Colour vision. Colour blindness. Binocular vision.
- (b) **Hearing** – Structures of auditory apparatus, conduction of sound waves. Helmholtz theory, Cochlear response. Vestibular apparatus.
- (c) **Taste and Smell** – Structure and function of the receptor organs.
- (d) **Cutaneous and deep sensation** – structure and function and receptors.

11. Voice and speech

Anatomy of larynx, mechanism of production of voice and speech.

12. Endocrine Organs

13. Reproduction

Primarily and secondary sex organs and secondary sex character. Mammary gland and prostate. Placenta and its function. Foetal respiration and circulation.

14. Excretory system

Kidney-formation and chemical composition of urine, structure and functions of kidney. Constituents of urine, normal and abnormal. Volume of urine, physiology of micturition. Renal efficiency tests.

15. Inegumentary system

Structure and functions of skin, formation, secretion, composition of sweat and sebum. Body temperature and its regulation.

16. Nervous system

Evolution and history of nervous system. Spinal cord and reflexes and its properties. Cerebrospinal fluid. Synaptic transmission. Control of excitatory and inhibitory states. Somatic sensory receptors and pathways. Thalamus. Cerebral cortex. Motor and associated areas. Pyramidal and extrapyramidal pathways, basal ganglia. Posture and locomotion. Sensory and motor. Motor

point in man, reticular formation. EEG sleep, autonomic nervous system. Hypothalamus and limbic system. Conditional reflexes cerebellum.

PHYSIOLOGY (Practical)

1. Urine-examination of normal and abnormal constituents of urinary sediments. Quantitative examination for sugar, urea, albumin, acetone and bile.
2. R.B.C. & W.B.C. total count making and staining blood film and differential count of W.B.C. coagulation and bleeding time, Hb estimation, fragility and sedimentation rate of R.B.Cs.
3. Identification and use of common physiological instruments and appliances.
4. Identification of histological specimen of tissues and organs viz. liver, kidney, lungs, thyroid, pancreas, spleen, trachea, oesophagus, stomach, tongue, intestine, large intestine, testis, ovary, bone adipose tissue, spinal cord, suprarenal gland, parotid gland, anterior pituitary, salivary glands, skin, parathyroid gland, cerebellum, cerebral cortex, cardiac muscle.

The written papers in physiology shall be distributed as follows :-

Paper – I

Elements of Bio-physics, Histology, Blood and lymph, Cardiovascular system, Reticulo-endothelial system, spleen. Respiration Excretion of urine, skin, regulation of body temperature, sense organs.

Paper – II

Endocrine organs, nervous system, nerve muscles physiology. Digestive system and metabolism. Bio-chemistry of proteins, carbohydrates and lipids.

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PSYCHOLOGY

Introduction to Normal Psychology

- (a) Definition of psychology as a science and its difference from other science.
- (b) Conception of the mind.
- (c) Mesmer and his theory, Hypnotism structure of consciousness.
- (d) Freud and his theory-Dynamics of the unconscious. Development of the Libido.
- (e) Other contemporary schools of psychology.
- (f) Relation between mind and body in health and disease.
- (g) Perception, Imagination, Ideation, Intelligence, Memory,
- (h) Cognition, Conation, Affect, Instinct, Sentiment, Behaviour.

Practical Examination

Full Marks – 100 Marks

1. Examination of physical and chemical constituents of normal and abnormal urine (qualitative)
2. Enumeration of total cell count of Blood (R.B.C. or W.B.C.) or differential count of peripheral blood or estimation of percentage of Hb.
3. Viva-voce on instruments and apparatus
4. Identification of two Histological slides
5. Experimental physiology
6. Laboratory Note-Book
7. Viva-voce on experiments

PHYSIOLOGY

Examination :-

Pattern of Question Paper for Ist. B.H.M.S.

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- C) - 5 Marks

Q. 4. Write Short Notes 5 x 2 = 10 Marks

- A) - 5 Marks
- B) - 5 Marks

SECTION – C :- LAQs

35 Marks

Q.	5.	Long Answer Question	15 Marks
Q.	6.	Long Answer Question	10 Marks
Q.	7.	Long Answer Question	10 Marks
		OR	
Q.	8.	Long Answer Question	

IV - HOMOEOPATHIC MATERIA MEDICA

1. Homoeopathic materia medica is differently constructed as compared to other materia medica. Homoeopathy considered that study of the action of drugs of individual parts of systems of the body or on animals or their isolated organs is only a partial study of life processes under such action and that it does not lead us to a full appreciation of the action of the medicinal agent, the drug agent as a whole is lost sight of.
2. Essential and complete knowledge of the drug action as a whole can be supplied only by qualitative synoptic drug experiments on healthy persons and this alone can make it possible to view all the scattered data in relation to the psychosomatic whole of a person; and it is just such a person as a whole to whom the knowledge of drug action is to be applied.
3. The Homeopathic materia medica consists of a schematic arrangement of symptoms produced by each drug, incorporating no theories or explanations about their interpretation or inter-relationship. Each drug should be studied synthetically, analytically and comparatively, and this alone would enable a homoeopathic student to study each drug individually and as a whole and help him to be a good prescriber.
4. Polychrests and the most commonly indicated drugs for every day ailments should be taken up first so that in the clinical classes or outdoor duties the students become familiar with their applications. They should be thoroughly dealt with explaining all comparisons and relationship. Students should be conversant with their sphere of action and family relationship. The less common and rare drugs should be taught in outline, emphasizing only their most salient features and symptoms. Rare drugs should be dealt with later.

5. Tutorials must be introduced so that students in small numbers can be in close touch with teachers and can be helped to study and understand materia medica in relation to its application in the treatment of the sick.
6. While teaching therapeutics an attempt should be made to recall the materia medica so that indications for drugs in a clinical condition can directly flow out from the provings of the drugs concerned. The student should be encouraged to apply the resources of the vast materia medica in any sickness and not limit himself to memorise a few drugs for a particular disease. This Hahnemannian approach will not only help him in understanding the proper perspective of symptoms as applied and their curative value in sickness but will even lighten his burden as far as formal examinations are concerned. Otherwise the present trend produces the appopathic approach to treatment of diseases and is contradictory to the teaching of Organon.

Application of materia medica should be demonstrated from cases in the out-door and hospital wards.

Lectures on comparative materia medica and therapeutics as well as tutorials should be as far as possible be integrated with lectures on clinical medicine in the various departments.

7. For the teaching of drugs the college should keep herbarium sheets and other specimens for demonstrations to the students. Lectures should be made interesting and slides of plants and materials may be projected.
8. A. Introductory Lecture Teaching of the homoeopathic materia medica should include :
 - (a) Nature and scope of homoeopathic materia medica
 - (b) Sources of homoeopathic materia medica and
 - (c) Different ways of studying the materia medica
- B. The drugs are to be taught under the following details :
 1. Common name, natural order, habitat, part used, preparation
 2. Sources of drug proving.
 3. Symptomatology of the drug emphasising the characteristic symptoms and modalities.
 4. Comparative study of drugs.
 5. Complimentary, inimical, antidotal and concordant remedies.
 6. Therapeutic applications (applied materia medica)
 7. A study of 12 tissue remedies according to Schussler's biochemic system of medicine.

List of Drugs included in the Syllabus of Materia Medica for the First
B.H.M.S., Examination.

1	Abrotanum	36	Graphites
2	Aconitum Nap	37	Hepar Sulphy
3	Aesculus Hip	38	Helleborus
4	Aethusa Cyn	39	Hyoscyamus N
5	Allium Ceba	40	Ignatia
6	Aloes Socotrina	41	Ipecac
7	Ammonium Carb	42	Kali Bich
8	Antimonium Curd	43	Kali Karb
9	Antimonium Crud	44	Lachesis
10	Apis Mellifica	45	Lodum Pal
11	Argentum Met	46	Lycopodium
12	Argentum Nit	47	Mercurius Cor.
13	Arnica Montana	48	Mercurius Sol.
14	Arsenicum Alb.	49	Nitric Acid
15	Arum Triph	50	Nux Vomica
16	Aurum Met.	51	Podophyllum
17	Baptisia Tin.	52	Pulsatilla
18	Baryta Carb	53	Rhus Tox
19	Belladonna	54	Secal Cor
20	Berberis Vul.	55	Spongia Tosta
21	Borax	56	Sulphur
22	Bryonia Alb	57	Thuja Occ.
23	Calcarea Carb	58	Veratrum Alb.
24	Calendula	59	Calcarea Fluor
25	Carbo Veg	60	Calcarea Phos.
26	Causticum	61	Calcarea Sulph.
27	Chamomilla	62	Ferrum Phos.
28	Cina	63	Kali Mur.
29	Cinachona Off	64	Kali Phos.
30	Colchicum Autm	65	Kali Sulph.
31	Cococynthis	66	Magnesia Phos.
32	Drosera	67	Natrum Mur.
33	Dulcamara	68	Natrum Phos.
34	Euphrasia	69	Natrum Sulph.
35	Gelsemium	70	Silicea

HOMOEOPATHIC MATERIA MEDICA & ORGANON OF HOMOEOPATHIC PHILOSOPHY

Examination :-

Pattern of Question Paper for Ist. B.H.M.S.

Total 100 Marks

SECTION – A : MCQs.
(Total 30 MCQs) 30 x 1 30 Marks

Q. 1. MCQ is carrying 1 mark each. Each MCQ must have 4 distractors.

15 MCQs of Hom. Materia Medica 15 Marks
15 MCQs of Hom. Philosophy 15 Marks

SECTION – B
HOMOEOPATHIC MATERIA MEDICA

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Q. 2. SAQ 5 x 2 = 10 Marks

Q. 3. SAQ Solve any 3 5 x 2 = 10 Marks
A) - 5 Marks
B) - 5 Marks
C) - 5 Marks

Q. 4. LAQ 15 Marks

SECTION – C
HOMOEOPATHIC PHILOSOPHY

Q. 5. SAQ 5 x 2 = 10 Marks

Q. 6. SAQ Solve any 3 5 x 2 = 10 Marks
A) - 5 Marks
B) - 5 Marks
C) - 5 Marks

Q. 7. LAQ 15 Marks

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V) ORGANON AND PRINCIPLES OF HOMOEOPATHIC PHILOSOPHY

I, II & III B.H.M.S. EXAMINATIONS

Hahnemann's Organon of medicine is the high watermark of medical philosophy. It is an original contribution in the field of medicine in a codified form. A study of organon as well as of the history of homoeopathy and its founder's life story will show that homoeopathy is a product of application of the history of inductive logical method of reasoning to the solution of one of the greatest problems of humanity namely the treatment and cure of the sick. A thorough acquaintance with the fundamental principles of logic, both deductive and inductive is therefore, essential. The Organon should accordingly be taught in such a manner as to make clear to the students the implications of the logical principles by which homoeopathy was worked out and build up and with which a homoeopathy physician has to conduct his daily work with ease and facility in treating every concrete individual case.

The practical portions should be thoroughly understood and remembered for guidance in practical work as a physician.

SYLLABUS FOR 1ST B.H.M.S. EXAMINATION

I. Introductory lectures – 100 lectures.

Subject :

1. What is homoeopathy ?

It is not merely a special; form of therapeutics but a complete system of medicine with the distinct approach to life, health, diseases, remedy and cure.

Its holistic individualistic and dynamistic approach to life, health, disease, remedy and cure.

- Its out and out logical and objective basis and approach
- Homoeopathy is nothing but an objective and rational system of medicine
- Homoeopathy is thoroughly scientific in the approach and methods.
- Based on observed facts and data and on inductive and deductive logic inseparably related with observed facts and data.
- Distinct approach of Homoeopathy to all the preclinical, paraclinical, and clinical subjects.
- Preliminary idea about all the para-clinical and pre-clinical subjects. Their mutual relations, and relation with whole living organism.
- Importance of learning the essential of those subjects for efficient applications of the principles of homoeopathy for the purpose of cure and health.

- Distinctive essential features of the dynamic pharmacology (proving) and pharmacy of Homoeopathy.
- 2. Hahnemann's life and pioneers of Homoeopathy and their contributions.
- 3. Hahnemann's organon of Medicine – aphorism 1 to 70