





August 2020

# HOMOEO EXCELLENCE



# Publisher: RAJKOT HOMOEOPATHIC MEDICAL COLLEGE

B/h Jainath Complex, Gondal Road, Rajkot -2 (Gujarat) Ph: 0281-2361372 E-mail: rhmc@paruluniversity.ac.in Website: www.paruluniversity.ac.in

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### :: EDITORIAL::

Dr. Krupa Vyas

Dear Readers,

# "HEALTHY CITIZENS ARE THE GREATEST ASSET ANY COUNTRY CAN HAVE" -WINSTON CHURCHILL

I am honoured to take the responsibility of furnishing the 32<sup>nd</sup> issue of Homoeo-Excellence on the occasion of Independence Day which focuses on "Efficacy of Homoeopathic System of Medicine in Viral Disorders".

Viruses are very tiny germs; are like hijackers. They invade living normal cells and use those cells to multiply and produce other viruses like themselves. This can kill, damage, or change the cells and make you sick. When you get a virus, you may not always get sick from it. Your immune system may be able to fight it off. For most viral infections, treatments can only help with symptoms while you wait for your immune system to fight off the virus. Antibiotics do not work for viral infections.

Homeopathy has a robust track record of controlling, managing and preventing outbreaks of infectious diseases on a large scale. Homeopathic philosophy holds that homeopathic treatments improve functionality of an individual's immune system so that they can deal with infection efficiently, restoring wellness without lasting damage or complications. It also acts as a preventive and helps to reduce the chances of transmitting the infections.

This issue tries to explore the scope of homoeopathy in various viral disorders with information regarding various epidemic and pandemic viral infections as well as it include details of various co-curricular and extracurricular activities carried out by institute for overall development of students during academics and also during lockdown time

I express my heartiest gratitude to principal, my colleagues, students, Office staff of institution & to all those who helped me directly or indirectly to complete my task.

On this anniversary of freedom of India from British rule, hope that our lives also get freedom from the prison of prevailing viral sufferings

"WISHING ALL READER'S A VERY HAPPY INDEPENDENCE DAY"

Sandip Vaghela (2<sup>nd</sup> BHMS)

### STRUCTURE OF VIRUSES

### A)Capsid:-

- The virion consists of nucleic acid surrounded by a protein coat, the capsid.
- Capsid with the enclosed nucleic acid is known as nucleocapsid.
- •Capsid composed of a large number of capsomers which form its morphological unit. The chemical units of capsid are polypeptide molecules.

Three kinds of symmetry are encountered in capsid:-

- a)Icosahedral (cubical):- It is a polygon with 12 corners and 20 sides. Each facet is in the shape of an unilateral triangle.
- b)Helical:- The capsomers and nucleic acid are wound together to form a helical or spiral tube. c)Complex:- like poxviruses.

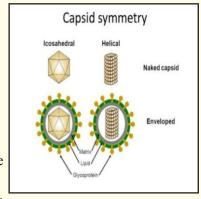
### • Function:-

- 1)Protect the nucleic acid from in inactivation by nucleases and deleterious agents in the environment.
- 2)Introduce the viral genome into host cell by absorbing readily to cell surface.

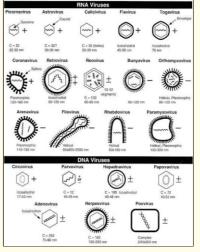
### **B) ENVELOPE:-**

- Virion may be enveloped or non-enveloped
- •It is derived from the host cell membrane when progeny virus is released by budding. It is made up of lipoproteins.
- The lipid is largely of host cell origin while protein is virus coded.
- •Protein subunits may be seen as projecting spikes on the surface of envelope known as polymers.
- •Biological properties such as attachment to host cell or Hemagglunation depends on envelope.

### **STRUCTURE :- 2 Parts**



### SHAPE AND SIZE OF VIRUSES:



### STRUCTURAL VARIATIONS OF CLINICAL VARIETIES OF HEPATITS VIRUS



Foram Ratanpara
(2<sup>nd</sup> BHMS)

### **HEPATITIS A VIRUS [HAV]:**

 $\sim$  HAV is a 27 nm , non enveloped RNA virus belonging to the picornavirus family. It was originally designated as 'enterovirus 72'. Because of its unique features , HAV is now recognized as the prototype of a new genus Hepatovirus. Only one serotype of the virus is known.

### **HEPATITIS B VIRUS [HBV]:**

 $\sim$  HBV is a 42 nm DNA virus with an outer envelope and a inner core , 27 nm in diameter , enclosing the viral genome and a DNA polymerase . Because of its unique features, HBV is assigned to a separate family Hepadnaviridae.

### **HEPATITIS C VIRUS [HCV]:**

 $\sim$  The virus has not been grown in culture , but has been cloned in E.Coli. HCV is 50-60 nm virus with linear, single stranded RNA genome, enclosed within a core and surrounded by an envelope , carrying glycoprotein spikes . HCV resembles to Flaviviruses in structure and organization , and has been classified as a new genus Hepacivirus in the family Flaviviridae.

# Hepatitis viruses Envelope lipid Polymerase DNA Envelope lipid NPG DNA DNA DNA Envelope lipid Spherical Hepatitis B virus Capsid Polymerase DNA Envelope lipid Spherical Hepatitis B virus Capsid RNA Envelope lipid Envelope lipid Envelope lipid Envelope lipid Envelope lipid Hepatitis C virus Hepatitis D virus Hepatitis E virus

### **HEPATITIS D VIRUS [HDV]:**

 $\sim$  HDV is a spherical , 36 nm particle with an outer coat composed of the hepatitis B surface antigen surrounding the circular single stranded RNA genome. Though it resembles some plant viruses , such as viroids or satellite viruses , it has been proposed to be classified in a new genus Deltavirus, because of its special features.

### **HEPATITIS E VIRUS [HEV];**

 $\sim$  HEV is a spherical non enveloped virus , 32-34 nm in diameter , with single stranded RNA genome. The surface of the virion shows indentation and spikes. The virus is very liable . In morphology and physical characteristics , it resembles Calicivirus such as the Norwalk virus. It has been provisionally classified in Hepeviridae.

**Pratik Nakum** (4<sup>th</sup> BHMS)

RNA ss linea

HAV

anti-HAV

Excellent

DNA, ss/ds

anti-HC\

Worse with ag

HCV 30-60 nm

RNA, ss, linea

Parenteral,

HCV RNA

C 100-3 C 33c

anti-HBc

35-37 nm

anti-HDV

Acute good; chronic

RNA, ss. circula

RNA ss linea

HEV

### CLASSIFICATION OF HEPATITIS VIRUS & IT'S HOMOEOPATHIC MANAGEMENT

### 1.CARDUS MARIANUS

Pain in the liver region, left lobe is very sensitive. Stools bright yellow, hard, difficult and knotty alternate

Hyperamia of liver with jaundice.

Cirrhosis with dropsy; liver spot is a special indication.

### 2.MYRICA CERIGERA

Marked actions on the liver and mucous membrane. Complete jaundice with "Bronze yellow"skin.

Flatus is passed continuously while walking and Stools are grey in colour.

### 3.LEPTANDRA

Aching and soreness in the liver region.

Jaundice with Clay coloured stool

Stools muddy, watery, black and tarry.

### 4.TARAXACUM OFFICINALE

It has bilious attack with characteristically mapped tongue and bitter taste in mouth.

Pain in the spleen and liver region with coldness of finger tips.

Sensation of bubbles bursting in bowel.

Evacuation is very difficult.

### 5.LYCOPODIUM CLAVATUM

Brown spots on abdomen as well as dropsy due to hepatic troubles.

Hepatitis; pain shooting across the lower abdomen from right to left.

Fullness of stomach after eating a small quantity.

### 6.PHOSPHORUS

Fatty degeneration of the liver, with well marked soreness and jaundice.

The stools are greyish white.

Acute hepatitis; It is best for malignant disease of liver

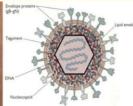
Jaundice with Pneumonia or brain diseases during pregnancy

### EFFICACY OF HOMOEOPATHIC SYSTEM OF MEDICINE IN HERPES SIMPLEX VIRUS



Jinkal Sommanek (2<sup>nd</sup> BHMS)







### INTRODUCTION:

- Herpes infections are a type of viral infections that cause skin eruptions, specially on the mouth and
- 2 types of herpes virus strains :HSV 1 AND HSV2
- 1. Herpes simplex virus(HSV)-1 :Usually cause lesions around the mouth and transmitted by direct contact or droplets of carriers."ABOVE THE WAIST"
- 2. Herpes simplex virus(HSV)-2 :Responsible for majority of genital herpes infections and commonly transmitted venereally. Usually "BELOW THE WAIST"
- 3. CLINICAL FEATURES:
- Infection starts with fever, bodyache, headache, a sick feeling tiny red blisters appearing in clusters.
- Mainly,
- 1. Cutaneous infection: Fever blisters on cheeks, chin, around mouthor on forehead.
- 2. Genital infection:On the cervix, vagina, vulva, anus, aroundpanis, anus, buttocks
- Although herpes infections are usually mild,occasionally they may be life threatening, especially in the case of new bornor those with a weak immune system or with a weak immune system

### **HOMOEOPATHIC TREATMENT:**

- It relieve the acute lesions of herpes of the primary infection.
- Long term treatment also reduce the reaccurence of subsequent outbreak.
- Common homoeopathic remedy that are employed for the treatment of herpes includes.
- Arsenic album
- ii. Heparsulphuris
- iii.Graphitis
- iv. Mercurius solubilise
- v. Apismellifica

ARSENICUM ALBUM: patient having ulceration in the mouth and tongue with a burning, heat like sensation. Dry, Scanty and Rough skin eruptions which worsen with the application of cold and

GRAPHITIS: Blisters on tongue with excessive salivation and bad breath. Ulcers and fissures on the inner sueface of the lips and corners of the mouth. Scab like eruptions.

HEPAR SULPHURIS: Patient having sensitive abscesses on genitalia, discharges smells like old cheese. Herpetic eruptions are very sensitive and bleeds easily.



Raxit Vishapara (4<sup>th</sup> BHMS)

### Difference of Pathophysiology and sign/symptoms of SARS COV-2 & Influenza

- \* Receptor for entry diffrence
- > Terminal α-sialic acidreceptor, by HAvs ACE-2(Angiotensin converting enzymereceptor) by S spike protein
- The coronavirus spike protein is a multifunctional molecular machine that mediates coronavirus entry into host cells. It first binds to a receptor on the host cell surface through its S1 subunit and then fuses viral and host membranes through its S2 subunit. Receptor responsible for this virus entry is ACE-2 (Angiotensin converting enzymer eceptor).
- For Influenza entry pathway and the role of the fusion protein of hemagglutinin. in this process. Hemagglutinin (HA) is a trimeric glycoprotein that is present in multiple copies in the membrane envelope of influenza virus. HA contains a fusion peptide, a receptor binding site, a metastable structural motif, and the transmembrane domain. The first step of influenza virus entry is the recognition of the host cell receptor molecule, terminal  $\alpha$ -sialic acid, by HA. This multivalent attachment by multiple copies of trimetric HA triggers endocytosis of influenza virus that is contained in the endosome.
- > By this way both virus gets entry in host cell and start to make copies.
- Incubation period difference
- The speed of transmission is an important point of difference between the two viruses. Influenza has a shorter median incubation period (the time from infection to appearance of symptoms) and a shorter serial interval (the time between successive cases) than COVID-19 virus. The serial interval for COVID-19 virus is estimated to be 5-6 days, while for influenza virus, the serial interval is 3 days. This means that influenza can spread faster than COVID-19.
- Fever onset difference
- Based on the incubation period there is sudden rise of body temperature in case of influenza infection what we say patient develops high grade fever within 3 days, But in case of covid-19 there is gradual increase in body temperature may take 5 to 14 days after infection.
- However it is not possible to know time of the infection and with this fever may cause confusion in this situation.
- Fatality and severity difference
- > In comparison of influenza with covid-19 fatality we found there is more fatality rate in SARS cov 2 than influenza
- > In both virus infection there is inflammatory and immune response present but there is hypothesis that SARS cov 2 may create cytokine storm which means inflammatory mediators release from inflammatory cells in massive amount which affect on respiratory system and whole body.
- Another difference may be there due to entry of receptor. Patient of Hypertension and on ACE receptor inhibitor are likely to develop more symptoms and fatality reason behind is there is more expression of receptor due to prolong use of receptor inhibitor drug. Due to this there is more entry point for virus.
- \* Children affection difference
- > Children are important drivers of influenza virus transmission in the community and For COVID-19 virus, initial data indicates that children are less affected than adults and that clinical attack rates in the 0-19 age group are low. Further preliminary data from household transmission studies in China suggest that children are infected from adults, rather than vice versa.



Kinal Kotecha (Internee)

### EFFICACY OF HOMOEOPATHIC SYSTEM OF MEDICINE IN VIRAL OTITIS-

### **Symptoms of Otitis:**

The main symptoms of ear infections are pain, ear discharge (varies from fluid to thick discharge and from white to yellow-green color) and pressure feeling in the ear. Fever may accompany acute infection. Diminished hearing and noises in the ear (tinnitus) and vertigo may also appear.

### **HOMOEOPATHIC THERAPEUTICS:**

Homeopathy offers complete recovery from ear infections. It also provide a shield in preventing complications resulting from an ear infection, including hearing loss, eardrum perforation, and mastoiditis.

### 1. For Ear Infections to Relieve Acute Pain in Ear

Two wonderful medicines for ear infections to relieve acute ear pain are

- 1)**Belladonna-** It's selected when the pain and sensitivity in the ear are marked. Pain is severe, throbbing and pulsating in nature. It is the best choice when the ear infection has followed throat infection.
- 2)**Chamomilla-** It's effective when ear pain is of a stitching nature. Even a slight touch worsens the earache. A pressure in the ears with stoppage sensation also appears. Pain could make the person angry and irritable.
- 2. For Ear Infections with Ear Discharges

Some highly useful medicines for ear infections with ear discharges are-

- 1) Kali Mur- It's very helpful when the ear discharges are white in color.
- 2) Calcarea Sulph It's a suitable medicine for ear infection with thick yellow ear discharge.
- 3) Pulsatilla It's prescribed for ear infection with green colored ear discharges.
- 3. For Ear Infections with Pus Discharges -
- 1)Silicea and HeparSulph- Are medicines for ear infection that aids in pus absorption. 2)Merc Sol It's beneficial medicine when along with pus blood also starts oozing from the ear.
- 4. For Ear Infections with Offensive Ear Discharge -

Medicines for ear infections with offensive ear discharge.

- 1) **Psorinum** It works well when ear discharge is fetid, offensive, and putrid. It may be brownish in color. Intolerable itching in the ear may also appear.
- 2)**Tellurium** It's a good prescription when ear discharge is acrid and offensive. The discharge is of a fishy odor and is very irritating in nature.
- 5. For Ear Infections Accompanied by Fever -
- 1)Belladonna- It's suggested for ear infection with high fever. The body is extremely hot to touch.
- 2) **HeparSulph** It's indicated for an ear infection with pus-like discharges and fever. Fever with a marked chill is present.



### HISTORY OF HOMEOPATHY IN EPIDEMIC OR PANDEMIC DISEASE

### HISTORICAL EVIDENCE:-

### 1. RUSSIAN FLU [1889-1890]:

The first significant flu pandemic started on Siberia and Kazakhstan, and the rest of europe, north america and Africa.

· By the end of 1 million had died.

• Allopathic mortality rate: - 30%

• Homeoapthic mortality rate: - 3.4%

Palak Bandhiya (4<sup>th</sup> BHMS)

2. SPANISH FLU[H1N1] [1918-1920]: The avian-borne flu that resulted in 50-100 million deaths First observed in europe, U.S.and part of Asia.

• Allopathic mortality rate: - 30% • Homeoapthic mortality rate:- 5.8% At the time GELESEMIUM is the medicine which is used as

### homeoprophylaxis. 3. DENGÜE [2001]:

Viral epidemic which causes 25,000 deaths. At the time EUPATORIUM PERFOLATUM is the main concerned medicine.

### 4. CHICKENGUNIA [2007]:

Firstly observed in kerela, south india. BRYONIA ALBA is the drug of choice in that epidemic.

### 5. SWINE FLU[H1N1] [2009]:

Started in California, U.S.A & had 5,00,75,000 death.

• Allopathic mortality rate: - 28.2% Homeoapthic mortality rate: - 1.12% IPECAC, ACONITE, INFLUENZINUM is used to treat the epidemic viral flu.

### 6. EBOLA [2014-2016]:

Spread through West Africa to U.S. and 11,300 deaths

Helpful medicine is CROTALUS HORRIDUS, PHOSPHORUS, LACHESIS.

### 7. COVID-19 [2019-present]

First reported in wuhan, china, on 31st December, 2019 and rapidly spread across 217 countries.

By the end of 12th July, 2020...death cases are more than 5,61,617 globally.

Indian council of medical research [ICMR], national institute of virology [NIV] at pune has developed and validated the indigenous of IgG enzyme linked immunosorbent assay [ELISA] test "COVID KAVACH ELISA" for late antibody detection for COVID-19.while reverse transcription-

polymerase chain reaction [RT-PCR] is the Frontline test for test for clinical diagnosis of CoV.

### **HOMEOAPTHY IN 2019-nCoV:**

Whether using individualization, combination remedies, genus epidemicus or isopathy, we have several good studies documenting positive result with homeopathy.

- Ministry of AYUSH, GOI included ARS.ALB.30c as a possible preventive. Ars alb as one of the constituents in formulation has been shown to affect HT29 cells and human macrophages, also it showed NF-kB hyperactivity, TNF- Alfa release macrophages.
- In china, doctor indicating BRY.ALBA and GELS. As a preventive and in that area no sick people were recorded.
- In the Italian study, the prescribed medication of frequency were BRY.ALBA(21times), ARS.ALB(16times), PHOS FLVUS(9 times), ATR.BELL(6

And hospitalization rate of this group treated homeopathically for 2019-nCoV was ZERO.

• Dr.rajan shankran advised to give CAMPHORA 1M twice daily for 2 day as prophylactic.

### **\* CONCLUSION:-**

As we have seen from these examples, homeoapthy has been used for more than a century in many parts of the world to treat epidemic disease. While individualization is the gold standard, it is impractical to use on a wide spread basis but combination remedies, genus epidemicus, or isopathy we have several good studies documenting positive result with homeopathy.

The challenge for future is to refine these approaches and to the knowledge base with additional rigorous trials. It and when conventional medicine runs out of option for treating epidemic disease. Homeoapthy could be seen as an attractive alternative, but only if there is viable experimental evidence of its success



Dr. Kinjal Mehta (Medical Officer)

### VIRAL WARTS & HOMOEOPATHY

### CAUSTICUM

WART ON FACE SPECIALLY NOSE

### **THUJA**

VARIOUS WARTS WARTS BLEED

# CINNABARIS

MOLLUSCUM
CONTAGISUM.
REDDISH &
PERIPHERY SNILE
KERATOSIS WITH
SINUSITIS

### **GRAPHITES**

PERIUNGUAL WARTS OR CORN LIKE SHAPE ON PALM & SOLE THAT MAYBE TINGED WITH YELLOW

# **VIRAL WARTS**

DULCAMARA

FLAT WART LOCATED ON BACK OF HAND. SOFT BROWNISH TO BLACK, SEBORRHEIC WART FOUND ON THE BACK

# CALCAREA CARBONICA

ROUND, HARD SOLITARY WART ENDOPHYTIC WARTS

### **NITRIC ACID**

LARGE, FISSURED, GOLD YELLOW WART WITH I<u>TCH</u> BLEED

# FERUM PICRICUM

SMALL POINTED WART IN LARGE GROUP. FLAT WART WITH IRREGULAR BORDER

### Nirav Ganatra (Internee)

### HOMOEOPATHIC SAVIOUR OF DENGUE

A relative of 33-years-old lady, approached for her complaints of dengue with following complaints of extreme weakness, headache and heaviness of eyelids which she even cannot open it voluntarily. Headache with sensation of band in head. Cannot sleep keeping head on pillow must raise her head. Continous cramps in hand and weakness in both the extremities. Cannot even lift her limbs with his will. Feels as if limbs paralyzed. Fever with muscular soreness and extreme prostration. The relative says that chills has got into her head. Wants all the windows opened. Feels better when someone makes her hands and limbs exercise. Sleeping all day dull in bed.

### PRESENTING COMPLAINTS:

LOCATION	SENSATION	MODALITIES	CONCOMITANTS
System, Location,	Pathology with Intensity	Should consider	Can eliminate all other
Origin, Duration,		Reportorial rubrics	symptoms for prescription
Frequency, Progress			
HEAD,	• extreme weakness,	>Open air, continued	
EXTREMITIES	<ul><li>heaviness of eyelids and cannot open</li><li>Headache with sensation of band</li></ul>	motion	
	<ul><li>Headache must raise her head.</li><li>Feels as if limbs paralyzed</li></ul>		
	Fever with muscular soreness and extreme prostration. Dullness		

CENTED	A T	SVMPTOMS.
CHNHK	Δ.	NAME TO THE STATE OF THE STATE

- A. PHYSICAL GENERALS:-
- APPEARANCE:- Lean, thin person TASTE:- not specific THIRST:- Thirstless URINE:-profuse, watery, involuntary SWEAT:-Normal STOOL: 1/0 - d/n
- THERMAL REACTIONS:- Chilly SLEEP:- sound

### B. **MENTAL GENERALS:-**

No specific mental generals but feels dullness and doesn't feels to do work and wants to sleep all the time.

### **EXAMINATION:-**

- **GENERAL EXAMINATION:-** Fever with chills and extreme prostration.
- **SYSTEMIC EXAMINATION:-** Nothing specific was observed in other systemic examinations.

### PROVISIONAL DIAGNOSIS:-

- STREPTOCCOCAL FEVER **URTI TYPHOID** DENGUE
- INVESTIGATION:-CBC Dengue card test

### **CONFIRMATORY DIAGNOSIS:-** DENGUE

### **CASE PROCESSING:-**

- Analysis of symptoms :-
- Mental Generals:- Feels dullness and doesn't feels to do work and wants to sleep all the time.
- Physical generals:-
- Thirstless o Urine profuse, , watery, involuntary o Dullness, extreme prostration and weakness o Desire for Sweets 0
- Physical particulars:-
- 0 heaviness of eyelids and cannot open 0 Headache with sensation of band Headache must raise her head.
- Fever with muscular soreness and extreme prostration. Feels as if limbs paralyzed 0 0
- **Evaluation of symptoms:-**
- Feels dullness and doesn't feels to do work and wants to sleep all the time. o Thirstless 0
- Urine profuse, watery, involuntary 0
  - o Dullness, extreme prostration and weakness o Desire for Sweets
- Heaviness of eyelids and cannot open 0
- o Headache with sensation of band o Headache must raise her head.
- Feels as if limbs paralyzed o Fever with muscular soreness and extreme prostration. 0

0

- **TOTALITY OF SYMPTOMS:-**
- Feels dullness and doesn't feels to do work and wants to sleep all the time. 0

o Thirstless

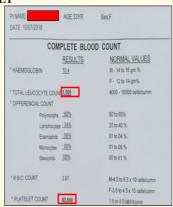
- Urine profuse, watery, involuntary 0
- 0 Dullness, extreme prostration and weakness o Desire for Sweets
- Heaviness of eyelids and cannot open 0
- Headache with sensation of band o Headache must raise her head.
- Feels as if limbs paralyzed 0
- Fever with muscular soreness and extreme prostration.
- 0 PRESCRIPTION:- On the basis of non-reportorial aspect with reference to William boericke's material medica,
- \* GELSEMIUM SEMPERVIRENS 200 SINGLE DOSE STAT ORALLY
- \* SAC-LAC 4X3X 4 DAYS
- \* CARICA PAPAYA Q 15 DROPS TDS FOR 4 DAYS
- FOLLOW UP:- 1<sup>ST</sup> FOLLOW UP:-
- Patient was feeling much better in the complaints,
- Was able to move limbs on own slightly,
- Complaint of headache was still present
- Fever still persistent
- R<sub>v</sub>:- GELSEMIUM SEMPERVIRENS 200 SINGLE DOSE STAT ORALLY

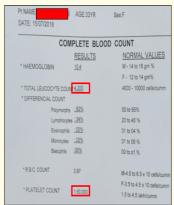
### SAC-LAC 4\*3\* 4 DAYS

### CARICA PAPAYA Q 15 DROPS TDS FOR 4 DAYS

2<sup>nd</sup> FOLLOW UP:-Patient was able to move limbs on own

- Platelet count increased
- Headache was relieved and weakness decreased
- Slight fever still present
- R<sub>x</sub>:- SAC-LAC 4\*3\*7 DAYS





**Before** 

After

### **CURRICULAR & CO CURRICULAR ACTIVITIES OF INSTITUTION**

TOPPERS OF RHMC 2019 - 2020 4th BHMS Exam - PU



Ritu Lalwani University 1st / College 1st



Advani Anjali University 5th / College 2nd



Lathigara Anjali University 6th / College 3rd

TEACHER'S DAY CELEBRATION



16-10-2019

1st BHMS ORIENTATION



26-08-2019

05-09-2019 INTERDEPARTMENTAL SEMINAR



06-12-2019

MATERIA MEDICA SYMPOSIUM



28-11-2019 VIIT TO R.P. PATEL INTITUTE BY 4TH BHMS

01-12-2019 INDUSTRIAL VISIT OF 4TH BHMS



10<sup>th</sup> ALUMNI MEET



12-01-2020

**FELICITATION AT SU** 



Kadri Rehnuna SU. 1st 4TH BHMS EXAM - 2019

MEERA SACHDE **AWARD - 2019** 



177<sup>th</sup> Death Anniversary Of Dr. Hahnemann



Annual Sports & Cultural Week- Jan.-2020



12-12-2019

6th Jan. to 11th Jan. - 2020

**DHOOM 2020** 





24th Feb. to 26th Feb. - 2020



1st BHMS Dept. of Anatomy & **Dept. of Physiology** 14-07-2020



2nd BHMS Dept. of Pathology & Dept. Organon of Medicine 15-07-2020



3rd BHMS Dept. of Obstetrics & Gynaecology and Dept. of Surgery 16-07-2020



4th BHMS Dept. of Practice of Medicine & Dept. of Materia Medica 17-07-2020

### Faculties Of RHMC Served As A Resoruce Person In National Webinars Organised By Homoeopathy 360 & B.jain Group







Dr. Amar Thakkar

Dr. Amar Seth

Dr. Vaidehi Bhati

### **HOSPITAL ACTIVITIES**

### NABH SURVEILENCE OF SAINATH HOSPITAL







**WORKSHOP ON ECG** 



Preparation Of Prophylactic Medicine At College







**Peripheral Distribution of Immunity Booster Against Covid 19 At UHC of RMC** 



**CAMP PHOTOS** 









### **CAMP DETAILS**

Sr. No.	Name of Activity	Date
1	Sainath hospital, Rajkot homoeopathic medical college	02-08-19
2	Somnath industries area,kothariya,rajkot	06-10-19
3	Dhareswar mahadev temple,bhaktinagar circle rajkot	13-10-19
4	Chandramauleshwar mahadev temple,ajnta/janakpuri society,sadhuvasvaniroad rajkot	10-11-19
5	Nagar Prathmic Sikshan Samiti, Pradhyuman Singhji Sankul, Near Karanpara Chowk, Rajkot	22-12-19
6	Mega Medical Camp at Bhomeshwar temple	19-01-20
7	Mega Medical Camp at Pathikashram	23-02-20
8	Camp for devotees travelling to Dwarka	29-02-20
9	Corona Prophylatic Homoeopathic Medicine Arsenic Alb 30 Preparation & Distribution in Society	March'20-July'20

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