

EFFICACY OF HOMOEOMEDICINES ESTABLISHED WITH CURE OF THE INCURABLE DISEASES

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Abstract: Double Blind Drug Trials are inapplicable to Homoeopathy. Efficacy of the high potency homoeopathic medicines with no molecule of the original drug in the patient dose is established with controlled drug trials on rats, mice and by treating human patients who served as their own controls. These cases for the Modern Scientific Medicine (Allopathy) were: a) fatal/incurable, b) difficult-to-cure even with long medicinal treatment, c) required surgery, d) viral. This supports and corroborates the overwhelming clinical evidence collected by innumerable homoeopaths all over the world during the past over two centuries. It also removes the conceptual impasse created by the Avogadro's law and the Law of Mass Action. Homoeopathy is a complete medicinal therapeutics. It offers hope and efficacious cure of diseases like Allergies (food, air born, skin, eczema, asthma), Tonsillitis, Nasal Polyps, Liver cirrhosis, Hepatitis with Jaundice, Progressive Systemic Sclerosis, Sarcoidosis, Idiopathic Thrombocytopenic Purpura (ITP), Vertigo, Migraine, Kidney dysfunction, Pyrexia Of Unknown Origin, Menstrual disorders (scanty, profuse, painful), Repeated abortions, Leucorrhea, Slow healing fracture, Arthritis, Aches & pains, etc.

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1. The problems defined

Even over two centuries after its discovery in 1790 AD by Hahnemann's celebrated experiment on himself with china or cinchona bark, Homoeopathy still continues to be discarded and disregarded as "unscientific placebo therapy". Successful treatment of billions of patients by innumerable homoeopaths all over the world even of firmly diagnosed cases incurable by Allopathy has made no difference in this opinion of the scientists & adherents of the most popular and generally accepted Modern Scientific Medicine (Allopathy). The reasons are several.

Allopathy is so consistent with the modern sciences that it is called the 'Modern Scientific Medicine'. It with Ayurveda, Unani & Siddha forms a group. They all work on the 'Principle of Opposites' and their medicines satisfy the Double Blind Drug Trials (DBDT). On the other hand, Homoeopathy is beyond the contemporary sciences and the three newly proposed sciences of **Inductive Chemistry, Xenobiology & Inductoxenopathy**, which are basic to its scientificity, are not yet generally recognized. Homoeopathy singly & exclusively constitutes a separate group by itself alone. It works according to the 'Law of Similars'. The Double Blind Drug Trials are irrelevant and inapplicable to it. Yet strangely the scientists, who do not know the basics of Homoeopathy but frame the national health policy, demand the homoeopathic medicines to pass the DBDTs.

Secondly, according to the Avogadro's law of Physics & Chemistry one gram-mole (Molecular weight in gram) of any chemical compound contains 6.022×10^{23} molecules. Therefore the 12C and higher potencies on the centesimal scale, which are diluted 100^{12} or 10^{24} fold and more, do not have any trace molecule of the original drug in the patient dose. The 'Law of Mass Action' in Chemistry however ordains that the chemical or biochemical and hence the medicinal action is proportional to the molar concentration of the drug. Therefore the 30C, 200C, 1000C and higher potencies of homoeomedicines routinely used by homoeopaths in clinical practice are 'placebos' from the scientific (allopathic) standard and hence cannot have any therapeutic action.

Thirdly, the homoeopaths insist that the physical agitations of the mixture of the solute drug and the solvent diluent medium (lactose, water or ethanol) at every step of dilution are mandatory to manifest the medicinal properties of the original drug in the homoeopathic potencies. These physical dynamization processes are of forceful trituration in lactose followed by impacted succussions in water and then in ethanol. The scientists and adherents of modern Scientific Medicine, on the other hand, believe that these *physical* dynamization processes have no effect on the *chemical and medicinal* properties of the finally prepared homoeomedicines. That is, the chemical properties and hence the medicinal actions remain unaltered and the same whether the mixture of the diluent medium and the solute drug is simply diluted by mere swirling slowly or dynamically agitated at every step of dilution. This implies that the 100^{12} fold and higher dilutions of any drug should remain inert even when dynamized.

Fourthly, all allopathic medicines have to satisfy the Double Blind Drug Trial (DBDT) before being released in the market for public prescription. The DBDTs conducted in America with homoeomedicines in the past gave

equivocal results and did not show conclusively that the homoeomedicines have therapeutic action. Therefore the scientifically conscious Government banned the practice of Homoeopathy on public demand.

Fifthly, the therapeutic effects of placebo, expert assurance and faith in the physician are well documented.

Sixthly, the natural diseases are known to remit spontaneously.

The patients come to a homoeopath as a last resort when best allopathic treatment does not give adequate relief. The scientists and adherents of scientific medicine (Allopathy) therefore try to explain away the homoeopathic cures as mere thought treatments due to faith in the homoeopathic doctor coinciding with the spontaneous remission of the natural disease, which could have come about any way even by doing nothing. The treating allopathic doctor resents the unwise act of the patient in taking unscientific homoeopathic treatment, which has only introduced some unknown complication in the case. So the benefited patients are reluctant to acknowledge relief by Homoeopathy openly and more so in writing.

The continuing practice of Homoeopathy in some countries and its recent inclusion within the scope of Nobel Prize by the Nobel Foundation reflect only the popular demands and NOT the official views on its scientificity.

"How then to establish the efficacy of such high potencies of homoeomedicines, which, according to Avogadro's law, have no molecule of the original drug?", becomes the most puzzling challenge. This author thinks that it can be done by controlled animal experiments and also with suitably controlled treatment of human patients.

2. Controlled animal experiments

Dr. Rati Ram Sharma induced diabetes mellitus in albino Wistar rats with intra-peritoneal injection of Alloxan and divided the diabetic rats into four groups for treatment with (a) dynamized 20m (or 30C) Alloxan potency, (b) undynamized simple dilution of Alloxan of the same 1000²⁰ or 100³⁰ fold, (c) ethanol and (d) nothing. Last group was the control. Only the group (a) treated with dynamized potency was cured and the undynamized simple dilution had no clinical effect. These experimental results were confirmed by the research workers at the Central Council for Research in Homoeopathy, New Delhi. They further found that the cells damaged by Alloxan regenerated in diabetic rats treated with dynamized potency of Alloxan. This supports the claim/experience of some practicing homoeopaths, and holds out the possible hope for homoeopathic treatment, of diabetic patients in the early stages of the disease.

In the second set of experiment subcutaneous injection of 7, 12 Dimethyl-benz-anthracene (DMBA) induced the toxicity in albino mice. These were then divided into four groups like the rats of the first experiment. The DMBA metabolites after incubation with the drug metabolizing enzymes in the microsomal fraction of the mouse liver were used to prepare the 20m (or 30C) DMBA potency and the 1000²⁰ or 100³⁰ fold simple dilution. This was done because Alloxan is a primary pathogen as it itself affects the beta cells of the island of Langerhans in the pancreas to produce diabetes but the DMBA-specific pathology is produced, NOT by itself but by its metabolites. The 50% survival period (SP-50) for the mice in the group treated with 20m or 30C DMBA potency was 144 days and 36 days for the group treated with simple dilution. The 10% mice in the latter group also developed fibrosarcoma at the site of DMBA injection. Details of these experiments are given in the published papers e.g. Sharma, R.R., Homoeopathy & Avogadro's Law. *Journal of Scientific Homoeopathy* **1(3&4)** (Oct-Dec 1995) 3-9.

The 20m or 30C potencies of Alloxan and DMBA, according to Avogadro's law, do not contain any trace molecule of the original drug but exhibit therapeutic action strikingly, whereas the corresponding simple dilutions of the same 1000²⁰ or 100³⁰ fold are inactive inert placebos. The physical dynamization processes therefore hold the key to convert inert into medicinally active dilutions. And the efficacy of the 20m or 30C potency homoeomedicines, with no molecule of the original drug, is established convincingly.

3. Suitably controlled treatment of human patients

3.1 Double Blind Drug Trials not applicable to Homoeopathy

Dr. R.R. Sharma first thought of the 'Double Blind Drug Trials' (DBDT), which every allopathic drug has to satisfy before coming to the market for public prescription. Herein the patients having the same organ / tissue pathology or designated disease are randomly divided into two groups. One is treated with the test medicine and the second with a similar-looking inert 'placebo'. Both the patient and the physician who administers the dose are kept unaware (blind) of the medicine code. Hence the term "double blind". This is done to keep the drug trials free from the subjective bias of the patient and the doctor. The effect of the medicine is evaluated through objective laboratory tests. The medicine code is revealed at the end of the trial and the conclusions are drawn after analyzing the results with statistical methods.

However, Dr. Sharma found DBDT inapplicable to Homoeopathy for several reasons. First, patients with the same 'pathology' or 'designated disease' cannot be randomized into two groups for treatment with active homoeomedicine and placebo, since different patients usually have different symptom-totality, calling for different curative homoeomedicines. For example, the terms like 'Osteoarthritis', 'Bronchial Asthma' etc. are quite diagnostic of the disease and suggestive of the medicinal treatment in Allopathy. But in Homoeopathy these are only a part of the 'whole' disease portrayed by the symptom totality. Therefore the controlled drug trials like *Rhus tox* in Osteoarthritis, *Arnica* in tooth extraction, *Arsenic iodatum* in Bronchial Asthma etc. are flawed for being not consistent with homoeopathic philosophy.

Secondly, the homoeophysician cannot remain "blind" but must know total symptoms before and after every dose of the *known* medicine to ensure that the cure is progressing according to the Herring's laws, and the medicines and dose frequency adjusted to the changing need.

It is thus clear that the conventional Double Blind Drug Trials as routinely applied to allopathic medicines are NOT applicable and relevant to test the efficacy of potentized homoeomedicines. The drug trials done in America in the past were double blind and did not appreciate these basic constraints. That is why inconclusive and equivocal results were obtained.

3.2 *The difficult situation and the way out*

The Allopathy is synonymous with the most popular and accepted Modern Scientific Medicine. It uses the DBDTs to establish the efficacy of its medicines. The DBDTs are also applicable to Ayurveda, Unani and Siddha because these and Allopathy form a group working on the 'Principle of Opposites'. The medicines of all these four are given to 'oppose', remove, neutralize, replace or block the effects and results of the disease process. Homoeopathy, on the other hand singly and exclusively constitutes a separate group by itself alone and follows the 'Law of Similars'. Its medicine is given to cure that natural disease whose symptom totality is similar to the symptoms elicited by healthy humans during 'drug proving'. Therefore DBDTs are irrelevant and inapplicable to Homoeopathy.

But the adherents of Modern Scientific Medicine are in an absolute majority all over the world at all-important levels. They have a very strong lobby in the policy-making committees and forums of the national Governments, in the World Health Organisation and within the Nobel Assembly of the Karolinska Institute of the Nobel Foundation. They all insist that the efficacy of the homoeopathic medicines too should be established through DBDTs without appreciating the basic limitations and constraints that render the DBDTs inapplicable to Homoeopathy. Strangely, those who do not know even its basics frame the guiding policies for Homoeopathy!

How then the efficacy of homoeopathic medicines is to be established to the satisfaction of the scientists and the adherents of Modern Scientific Medicine, who are ignorant about the basics of Homoeopathy but whose opinions matter? The best way would be to cure those cases for which the experts of the Modern Scientific Medicine all over the world raise their hands. The incurability or the difficulty in curing such cases is so well known to all allopaths all over the world that it becomes a sort of established rule or law. And to break any law just very few exceptions are sufficient! But in the present context, the exceptions provided by Dr. Sharma personally will only corroborate the huge mass of curative evidence already collected by innumerable homoeopaths all over the world during the past over two centuries. Even otherwise Dr. Sharma himself has so far treated with Homoeopathy several thousand patients who came to him when the Modern Scientific Medicine (Allopathy) did not give adequate relief.

3.3 *Treatment of cases serving as their own controls*

Dr. Sharma therefore got interested in those well worked out and firmly diagnosed cases, which served as their own controls. These cases, for the Modern Scientific Medicine are: (a) incurable/fatal, (b) difficult-to-cure even with long, some times life long, medication, (c) requiring surgery, (d) viral infections where Allopathy offers nothing, (e) baby/children diseases where placebo does not work.

4. **Cases of Indian Childhood Cirrhosis (ICC) treated with Homoeopathy**

According to the Modern Scientific Medicine the Indian Childhood Cirrhosis (ICC) or the interstitial inflammation of the liver of unknown cause in children is definitely incurable and fatal. So much so that once a biopsy proven diagnosis of ICC is made the child is discharged from the hospital to avoid wastage of expertise, facilities and resources, and with a hopeless prognosis of a week's or ten days' survival.

4.1 **An ICC patient** whom Dr. R.R. Sharma treated with Homoeopathy was 1 yr 9m old boy Harish s/o Prithwi Raj Machhan, Vill. & P.O. Kutara, Teh. Rohru, Distt. Simla, H.P., India. The boy was admitted to P.G.I., Chandigarh on 3.7.75 against C.R. No. A004046 & Paying Clinic No. 900181 and discharged with a diagnosis of ICC on 4.7.75. The sincere advice whispered to the father of the patient was to take the child home quick lest he dies on the way. When his father met Dr. Sharma on 4 July noon Dr. Sharma asked him to stay in Chandigarh for a few days to watch the boy's response to homoeotreatment.

4.7.75: Hepatosplenomegaly, ascites ++, urine yellow, stool light clay coloured, 4-5 times with strain, fever low grade, appetite ↑ even at night, thirst ↑ frequent, irritated, cries often, restless, disturbed sleep, palm & sole burn, biopsy report (7.7.75) consistent with ICC, prognosis hopeless, a week's or ten days survival,

Homoeopathic medicines Arsenic 200 & Phos-200 on alternately mornings & evenings were prescribed.

7.7.75: Plays, sleeps well, abdominal skin could be easily pulled which was tight on 4.7.75 i.e. ascites ↓, no fever, urine not yellow, constipation broken. Ars 200 & Phos 200 on alternate days.

4.8.75: general improvement, plays, ascites further ↓, treatment contd.

15.9.75: Improvement continues. Ars 200 & Phos 200 alternately on 4 days' interval.

30.10.75: Review in OPD. Body wt. 9 kg, liver 7 cm, spleen 4 cm, ascites +, jaundice nil, oedema nil, Hb 10.45 gm%, retics 1%, TLC 11800, DLC: N54, L39, E4, M3; PBF: many atypical lymphocytes, Total protein 6.2 gm%, Alb 2.9 gm%, Glob 3.3 gm%, A/G 0.9, SGOT 93 (0-30), SGPT 78 (5-25), Alk. Phos. 19.2 kau (< 12), S. Bill. 0.25.

Letter dated 23.11.75 in Hindi (photocopy attached): well, plays, does not cry, does not look sickly, liver size appears reduced...

Letter dated 29.3.76 in Hindi (photocopy attached): is happy & well, plays, runs about in the village, talks....

Letter dated 23.4.76 in Hindi (photocopy attached): Looked so well that the parents went and took the child to pay thankful obeisance to the Devi. But on their way back the child fell from a roof and died! What a tragic loss!!

4.2 **The other ICC case** treated by Dr. R.R. Sharma with Homoeopathy was from the same village as Harish mentioned above. He was the 1yr 6m old boy Titu s/o Pratap Singh, Vill & P.O. Kutara, Teh. Rohru, Distt. Simla, H.P., India. He was admitted to Med. Ch. Ward 20 of the H.P. Medical College & Hospital, Simla on 4.7.77 against R.No. 10399 and discharged on 23.7.77 as a case of Post hepatic portal cirrhosis with ICC diagnosed via the Liver Biopsy Report dated 24.7.77 (See below).

4.7.77: Hb 7.5 gm%, ESR 20 mm/1st hr, PCV 19%, X-ray chest patches of pneumonia in hilar & para cardiac region, bronchitis, loss of weight. P/A liver 5 cm, spleen 4 cm, put on LIV 52 & Prednisolone.

24.7.77 Biopsy report: *Post hepatic portal cirrhosis with ICC*

The liver architecture is much disturbed. The cells in area show vacuolar degeneration with blurring of cytoplasmic outline. The nuclei look normal. Some nuclei are small. No fatty change. An eosinophilic hyaline material is not much seen. There is peripheral fibrosis and inflammatory cell reaction. The cells are neutrophils and round cells. These cells are seen within the lobules also. The fibrosis is creeping type extending from one portal tract to another and also in spaces intralobular enclosing clumps of cells forming pseudo lobular and disturbing the lobular architecture. There is an evidence of cellular regeneration. There are normal looking liver cells also. All these changes are suggestive of cirrhosis. The presence of oedematous degeneration, mesenchymal reaction suggest ICC but the absence hyaline material, presence of regenerative activity and almost normal looking liver cells, in places are the points against. I am inclined to make it portal cirrhosis of post hepatic type. However the case may be kept under observation. Sd. R.D. Sharma, Assoc. Prof, of Pathology, HP Med College, Simla.

26.7.77: Phosphorus 200 was given for enlarged liver & spleen, warm hand & feet, lassitude, appetite ↑ & thirst ok, distended abd., likes cold & open air, does not like to be covered, likes salty things not sweet.

The patient responded well as reported by his father and his friends during frequent visits.

Oct'83: Well & healthy.

4.3 **Sushil 1yr 9m old** s/o Parvar Singh vill. Dulgaon, P.O. Kutara, Distt. Simla, PGI registration no. Ch. 074522 dated 3.4.75.

4.4.75: Advanced IV grade ICC with hepatocellular failure, drowsy sleepy but cannot sleep, urine yellow, cough, white coloured stool 2-3 times, vomit, restless, cries, liver & spleen enlarged, abdominal veins prominent, abd. enlarged/distended (ascites ++), likes cold things, open air & sweets (glucose), thirst ↓, generalised oedema, fowl cadavor odour from body, both eyelids swollen, wants to uncover and keep hands & feet outside, feverish, ...

Medicine prescribed: Phos-200.

Response: initially positive but follow up failed.

4.4 **Dilbagh 1yr 4m** s/o Thakur Das Hadda, Vill & P.O. Kotla Nihang, Distt. Ropar, PGI Registration No. A 015478 dated 24.3.7.

24.3.75: A grade IV ICC patient. Hepatosplenomegaly with jaundice, urine: dark yellow coloured the cloths, stool: white 6-7 times, eyes: yellow, skin clay yellow, fever, cries, restless, prostration, weakness, Improved with Phos-200

4.5 **Sonia 1yr 3m** d/o Ram Pal Sharma, H.No. 183, Mirpur Colony, Pathankot, PGI Registration No. 501546 D.O.A. 27.10.77 D.O.D. 4.11.77

5.11.1977: Two siblings (boy & girl) died in ICC. Progressive distension of abdomen, Wt. 7.4 Kg, Ht. 68 cm, liver 7cm bcm, firm leafy edge, Hb 12.15 gm/dl, TLC 20000, PTI 72%, Alb 3.2 gm/dl, Glb 3.5 gm/dl A/G 0.9, SGOT 21.14, SGPT 62.14, liver biopsy; suggestive of ICC Rx Vit B-Complex & Vit K /3 days Homoeopathic prescription Phos-200 & Ars-200

27.2.78: Wt. 9.2 Kg. Ht. 70.5 cm, liver 6 cm bcm, firm, non tender, spleen non palpable, no sign of hepatocellular failure, plays, happy, sings.

Phos-200 & Ars-200 were prescribed to be given alternately at 8 days interval i.e. fortnightly.

4.6 **An interesting case** was of a sikh couple from a village of Panjab, who had lost several sons to ICC. The mother was given weekly dose of Ars-200 during first trimester of pregnancy and the male child after birth was given Ars-200 fortnightly, then monthly for a year. The child did not develop ICC and lived well.

5. A case of HBV related Liver Cirrhosis with a hepatocellular carcinoma treated with Homoeopathy

Mrs. Neeraj Mishra 45 F w/o Er. K.G. Mishra Dy. Chief Engineer, Bukharo Steel Plant, Bihar. Registration No. was 402317-B, D.O.A. 26.7.96 D.O.D. 24.8.96 and D.O.A.5.11.1996 D.O.D. 15.12.1996. She was treated in the Dept of Gastrointestinal Sciences, Christian Medical College & Hospital, Vellore, Tamil Nadu, South India.

Came to Dr. Sharma, through Mr. K.K. Palta now r/o 57 Sector 6, Panchkula (Ph.2582006), as a last resort, with a News Paper clipping about my nomination for a Nobel Prize, given by the Professor of Gastroenterology, CMC Vellore. She was a known case of HBV cirrhosis (biopsy proven) with HBsAg +, HBeAg +, ascites +, grade II varices x 4 column, 2.5 cm hyperechoic lesion (? hepatocellular carcinoma), coagulopathy (not corrected by vit. K) preventing FNA, splenomegaly, irritated bowel syndrome, etc.

20.12.1996: Was given Arsenic-200 on alternate mornings for loss of appetite, restlessness, thirst for cold water, fever, etc. As a first sign of improvement she ate well within 2days. Shifted to Bukharo. Treatment continued for a few months satisfactorily. Later a local homoeopath took over with frequent consultations from Dr. Sharma. Was reported by Mr. K.K. Palta to be still alive.

6. A case of HCV cirrhosis with HCV reactive and shrunken liver treated with Homoeopathy

Mr. S.C. Chopra 62 M, B-4/93 College Road, Narendra Colony, Malerkotla, Panjab, Phone: 01675-653877. PGI C.R.No. A 692632, Liver Clinic LC 22345, Chest Clinic CC 81255, admission No.76068

14 April'01: HCV related cirrhosis with HCV reactive and shrunken liver but HBsAg -ve, loss of 3 Kg weight in 4m, heart burn, uneasiness, pedal oedema, SGOT 127 (0-30), SGPT 152 (5-25), Alk Phos 234 (<12), anxiety about trifles, irritation, averse to disturbance, disturbed sleep.

Prescription: Ars-200 & Phos-200 on alternate mornings empty stomach.

21.4.2001: Much better, sleeps well, no malaise, feels great!

1 May 2004: Doing well under homoeotreatment for the past over three years.

7. A case of chronic jaundice treated with Homoeopathy

21.5.1993: Ms Sweta 10F d/o Deepak Arora, 1023 Sector 27 B now r/o 517 sector 33B, Chandigarh Phone: 2661529 came with the c/o chronic jaundice.

17.5.1993: Jaundice continuing for over 10 months first detected in July 1992. Clinical investigations dated 17.5.93 showed Total Bilirubin 2.08 mg/dl, conjugated 1.4 mg/dl, Alk. Phos 20.2, SGOT 22, SGPT 20, HbsAg -ve, G6PD normal, Hb 12.3, skin, urine & eyes yellow, appetite ↓, laughs/smiles while talking.

Aurum met 200 prescribed.

29.5.1993: Pinkish healthy face, appetite good

9.8.1993: T. bilirubin 2.6, conj. 1.4, Alk Phos 19

5.4.2003: Came after about 10 years when the same jaundice recurred. On 31.3.2003 in PGI it was diagnosed as Dubin Johnson Syndrome with chronic hepatitis. Total bilirubin 3.3 mg/dl, conjugated 1.8, Alk Phos 107, SGOT 42, SGPT 45. Skin, urine, eyes yellow, appetite ↓.

Aurum met 200 cured again.

8. Cases of psoriasis treated with Homoeopathy

Psoriasis is a chronic, hereditary recurrent dermatosis marked by discrete vivid red macules, papules or plaques covered with silvery lamellated scales.

M.R. Bharadwaj 39M r/o 291, Sector 10A, Chandigarh, Accountant Haryana State Guest House was diagnosed as having psoriasis in the Skin Department of PGI, Chandigarh under CR: A 980622.

18.3.1975: His symptoms < winters, > summers. Itching & burning < scratching blood came out. < heat.

Sulphur 200 given in two doses E/18 & M/19.

22.3.1975: Itching & burning reduced considerably. Placebo for 3 days. Relief continues. A dose of Sulphur 1M given on 22.4.75.

He wrote the following letter on 18.3 1977.

“I write to record my gratitude for curing me from the ten years’ chronic skin disease ‘psoriasis’, when one year’s treatment at Safdarjang Hospital, Delhi, one year at Rajendra Hospital, Patiala and then two years’ treatment at P.G.I., Chandigarh had failed to give me relief. It was on the kind advice of Dr. (Mrs.) S. Kaur, Head of the Skin Department at P.G.I and Dr. Bhushan of the same department that I approached your goodself on 18th March 1975. And it was a miracle that the ugly eruption on my face disappeared within 3 days’ treatment. A further treatment of a week cleared my entire body, which was checked by Dr. Bhushan himself. I remained symptom free for almost two years, and then your two doses in February last have given me relief again. Now I promise to take your treatment as and when directed by your good self

8.1 Dr. R.R.Sharma also treated the following cases of psoriasis with Homoeopathy.

M.R. Bharadwaj, 48M PGI CR A 596438, came on 18.3.1975 and received Sulphur 200. Ram Krishan Sharma 27 M, PGI CR A 595235/3.3.75, came on 6.3.1975. He was treated mainly with Sulphur 200 but Arsenic 200 also given when called for. Dharam Vir 35 M PGI CR A 592096/14.1.75, r/o 2703 Sector 20C, Chandigarh. He was seen on 13.3.1975 and treated with Sulphur 200 & Psorinum-1M. Manjeet Rai, 57M seen on 20.8.1975 and prescribed Arsenic iodatum 200.

8.2 Of all the psoriasis cases treated the most interesting was of an MD, Professor & Head Pharmacology, S.D.M. College of Dental Sciences, Karnataka. (His name, address & phone deleted on his asking but the case described in the larger interest of the ailing humanity). His psoriasis was associated with sever arthritis of both knees. He could not stretch his legs and walk properly. Psorinum-1M gave him instant relief. His following letters of 14.5 90 and 5.9.1990 give the details. It provides as one of the excellent evidence for the proven efficacy of Homoeopathy over a postgraduate allopathic doctor with chronic extensive psoriasis with NO side effects.

On 14.5.90 he wrote the following:

“ I could not write you after having come from Chandigarh. I was busy in completing syllabus of my students. From tomorrow their exams will start.....

“Presently: All the previous lesions regressed in severity about 70%. Minimal scaling present, appetite good. No bleeding piles or hyper acidity. Sleep good. No oedema in most the earlier lesions. Skin turning normal (earlier there was no sweating at the site of lesions in the body). Now skin can sweat, an indication of turning towards normal. Aggravation, amelioration is going on in fresh lesions over the arm and is responding nicely.

“There is definite improvement in feeling towards the disease as well as in skin problems.

“.... Doctor, you have given me rebirth. O owe a lot to you. Still I have to write to you a lot, what made me to meet you and how I succeeded etc and many other things in my next letter. I AM EVER INDEBTED TO YOU....”

On 5.9.90 he wrote as below.

“.....Sir, whenever I felt like writing I felt any amount of time is insufficient to express my feelings. Today it reminds me of certain experience, viz. when I was M.D student at Belgaum in Sept 1985..

“ I was very busy in reviewing literature for my thesis. Coincidentally to my fortune I could notice a green coloured book ‘Molecular Homoeopathy’. By then I was impressed and oriented towards Homoeopathy because of some of your papers published in Hahnemannian Gleanings explaining the ‘modus operandi’ of homoeopathic drugs with modern scientific outlook.

“ Coming to my illness, I was having psoriasis since 1976 over very limited area. Being aware of the limited access of Allopathy in treatment of psoriasis also of notorious side effects of allopathic drugs such as Methotrexate , Isoetrate, steroids and the tedious course of treatment consisting of repeated blood counts, Liver function tests etc—I went almost into depression. I could not take any treatment. I am really fortunate I – I could get your book on Homoeopathy. Since then I decided to meet you before I start any treatment for illness.

“Though I read & felt like meeting you in 1985, I could’nt because of some reasons. As my illness was gradually increasing I was more worried. In February 1990 (this year) I was bed ridden with lesions all over my body excepting face and forearms with sever arthritis of the knees. The illness made me unable to carry out my routines. As my family members insisted me to take available treatment, Sir, you treated me. I told “The only person who can save me and get my life back is at Chandigarh.” “ Somehow we managed to fly over to Chandigarh. Normally we cannot afford to travel by air, still we managed because I had lot of confidence in you. My confidence in you, made me to survive today.

“In Chandigarh, before I approached you (last February of 1990) I went to PGI, Skin Department. Some lady Dr, HOD, probably, DR Kaur was busy in some seminar. I called on her. She came and examined me in toto. “See doctor, you have extensive psoriasis. You have to be on Methotrexate or else Isoetrate if you can procure. As treatment course is long I advise you to take the same at Bangalore, where one of my student is working at St John Medical College, Bangalore”. One more doctor, I remember, Associate Professor Sardarji also examined me.. His expression and Dr Kaur’s words of Methotrexate and Isoetrate depressed me still more.

“Then, I was having very bad arthritis of knees (both), say literally a stretcher patient. I could manage to walk few steps with difficulty and in total dysphoria. Somehow with the help of my brother I could reach your office in lift. I learnt that you were in library and contacted you by phone. You were so kind enough and generous immediately came to the department to attend me (11.15 AM). Then you, after examining me, asked me to come at 2.00 pm same day.

“ I came at 2.00 pm. You told me ”Doctor, I have two medicines for you”. You gave me one and asked me to just keep over the tongue and let it dissolve. I did the same way as instructed. Then we discussed about some research work for about 30 minutes and you asked me. “What are you feeling?” I told no change. Again we involved in discussion. Around 3 pm you asked me and instructed to take one dose daily and meet after 2 days. Then I stood up. “Eureka!” To my surprise I was freed of my joint discomfort. I could walk around without any body’s help. I told “ Sir, there is change”. “What is that?”, you asked me. No joint pain and I can walk! Then with pleasure you asked me to continue the medicine. Within 90 minutes of taking the medicine I could literally walk down five floors of your department and half KM. I was in a total “EUPHORIA”. The pleasure, I think, if I can express, “a total blind getting his eyes suddenly”. That was a tremendous experience for me. I told my brother “ I am saved. This doctor will definitely cure my illness.”

“ All the further things are much known to you and also I have communicated in my personal letter. Here I document these things today as one of the excellent evidence for the proven efficacy of Homoeopathy over a postgraduate allopathic doctor with chronic extensive psoriasis with very meager- NO- side effects.

“ Presently, after starting alternate every 5th day Psorinum 1M and Sulphur 1M, in first week I developed mild arthritis in of left elbow. I was sure it was aggravation and did nottake any medicine. Within two weeks it subsided completely. Now Now the medicines are over since two months.

Present lesions:

“ 75 –80% lesions have totally disappeared. Skin is normal. No itching.

“ 20-25% lesions present. BUT the severity of lesions is 25% of lesions before treatment and is of little discomfort. I am totally comfortable carrying out all routines.....”

9. A case of thyrotoxicosis complicated with exophthalmos and amenorrhea treated with Homoeopathy

21.1.75: Ms R.K. Dhanotra, 32 F, Sister Tutor, College of Nursing, PGI, Chandigarh. Thyroid clinic registration No. TC 2083.

History: Father died in 1970. In Oct'73 lost the man to whom engaged since 1971. Emotionally upset, loss of sleep, anxiety, thyrotoxicosis, put on neumercazol, lithium carbonate. 14 Jan'74, partial thyroidectomy to control thyrotoxicosis. April'74, lid retraction of right eye. June'74, exophthalmos both eyes. July'74, exophthalmos increased and scanty menses for a day only. 7 Nov'74, Iodine-131 uptakes 4hr31.6%, 24hr 46%, 48hr 45% despite anti-thyroid drugs & partial thyroidectomy. Jan'75, treating endocrinologist advised to accept amenorrhea as part of life. Cried and approached Dr. R.R. sharma as a last resort.

21.1.75: Irritable, anxious, nervous, depressed, sensitive to noise & light, loss of weight despite excessive appetite & food intake, thirst ↑, likes winters, fresh air, salty things, tachy-cardia, disturbed sleep. Homoeopathic medicines prescribed Ignatia 200, 1M; Thyroidinum 200, 1M.

1977: Cured of exophthalmos and amenorrhea.

Later she married to become Mrs. Dhingra, migrated to U.S.A. and had children.

10. A case of chronic aural/labyrinth vertigo treated with Homoeopathy

Late Colonel M.S. Grewal, VSM, then r/o H.No. 31, Sector A, Chandimandir Cantt., Chandigarh was a landlord permanent r/o Samson Colony, Malerkotla, Panjab.

23.8.1974: Natrum sulphuricum CM was given on the assumption that he had a *brain injury* because his labyrinth got affected due to high altitude flying in non-pressurized aircraft. The response to two doses given on Friday evening and in the morning of Saturday was so very good that on Sunday he performed headstand (*shirshasan*). His personal letter dated 2 September 1974 describes in his own words the symptoms, modalities and course of disease with the effect of treatment. He remained symptom free for 9 years when a dose of Natrum Sulph 1M was again needed. The case was published in *TheHahnemannian Gleanings* 46 (2)(1979) 566-568 (photocopy enclosed) and also in the book: R.R.Sharma, **MOLECULAR HOMOEOPATHY**, COSMO Publications, 24-B Ansari Road, Dariyaganj, New Delhi-2, 1984 on pages 117-119.

For ready reference his letter is reproduced below.

"..... I wish to express my grateful thanks for treating me on 23 August 1974 last. Ours was a providential meeting in the office of Brigadier M.L.Kataria (then Deputy Director of Administration, PGI, Chandigarh). Perhaps it was ordained that I had to meet you there and instead of going through a chain of tests for my ailment (in the ENT department of PGI), I was to have a miraculous short cut to return to normalcy through your homoeopathic approach.

" I had suffered, off and on, for some years now due to this reeling sinking sensation. I first experienced this queer disease during 1962. Whenever I lay down in bed, turned on my side, or bent down, this giddiness overtook me. Everything seemed to reel and I was left shaken and weak only after a few seconds of this attack. All types of tests were carried out in the military hospital to rule out various possibilities: worms, blood pressure, heart and so on. Ultimately it was diagnosed as aural vertigo. My ear drums had got affected due to continuous high altitude flying in non-pressurized aircraft during 1947-48 operations in Jammu & Kashmir. Being young, I withstood these stresses and strains in those days although at one stage I had to be put under the treatment of an ENT specialist as my ear drums had got badly affected.

"After treatment in 1962, I suffered no ill-effects of the ailment even during the Chinese aggression in which I was directly involved. However, it was in August 1973 that the disease showed its ugly face again with the same symptoms. I had cold caloric test and other treatments and was normal after some time. This year the disease showed up again and I had come to Brig. M.L.Kataria for consultation so that a more lasting treatment could be undertaken through the expertise available at PGI. A chance meeting with you there gave a new dimension to this treatment. Your two doses cured me of this disease on the third day of the treatment only. It was God's grace and near miracle cure, because I have never before been so easily and quickly brought back to normalcy. What is more, these two doses, while curing me of this reeling sensation/ giddiness, caused my bowls to move more freely and make me feel generally light and alert in the head"

11. A case of 20-year chronic migraine treated with Homoeopathy

Mjr. J.S.Sekhon (retd.) c/o Mr. Ranbir Singh, "VELLARD VIEW", Pedder Road, Bombay (Mumbai)-400026 had suffered from migraine for the past more than 20 years. He came to Dr. R.R.Sharma on 26.10.1974 with the common friend Lt. Col. Bachittar Singh, 590, Sector 16-D, Chandigarh. Mjr. Sekhon had stopped in Chandigarh on his way to Patiala after visiting in Putta Parti for the third time Sri Satya Sai Baba, who had assured him that this time he will be cured.

Earlier the EEG, angiography, brain scan, pneumoencephalogram were found normal. But migraine continued. Dr. Sharma took his case in three sittings. He was given Laches in 30, 200, 1M potencies during the treatment on the following criteria: left sided symptoms, throbbing headache, lachrimation, redness of eyes, aggravation after sleep, morning, after liquor, sensitive to light & noise during attack, loquacity, erotic ideas without ability etc.

After a few days' treatment in Chandigarh itself he said that according to the past experience he would have the attack at 9 AM on a particular day. He invited Mrs and Dr. R.R. sharma to watch how terribly painful the attack was when he writhed in pain like a lamb whose throat was being cut. When Dr. Sharma reached there he was lying in the bed waiting for the attack, his sister looking on. But the expected attack did not come even after a wait of two hours. He got up surprised, became emotional and said "I cannot believe there can be life without the pain".

On 20.3.1975 he wrote the following letter.

".....Pray accept my heartiest congratulations and sincerest gratitude for your miraculous treatment of my chronic MIGRAINE from which I had been suffering for the last 20 years. During my army service I had consulted Doctors like DR. JACOB CHANDI of VELLORE, who is considered as one of the world's best neurosurgeons. I had even consulted Doctors in U.K. and Germany. But all this was in vain and of no avail to me and I kept on suffering badly. So much so that I had to ask for premature retirement from army service. Since earlier in my army service I was appointed as A.D.C. to the President of India, DR. S. RADHAKRISHNAN had sent to me Rs. 10000/ to enable me to get myself treated as a gesture of goodwill from him. With all my good contacts I tried a lot of homoeopaths as well: like DR. S.K. ZUTSHI, H.M.B., B.B.M. DR. ZUTSHI is the Vice-Chairman Homoeo Board, Delhi. His Clinic is in H Block, Connaught Circus, New Delhi-1. Then I tried the treatment of DR. JUGAL KISHORE, B.Sc., D.M.S. who is Hony. Hom. Physician to the President of India and Hony. Adviser to the Government of India. His Office and Clinic are at M-Floor (Flat No.4) "KUNCHANJUNGA", 18, Barakhamba Road, New Delhi. I Have mentioned the names of only two most famous Homoeopaths in our country though I have tried all over India so many others but all in vain.

"By the grace of Almighty I met you and started your treatment reluctantly; having lost all faith in Allopaths and Homoeopaths. I must say, to my greatest surprise, I have been completely cured by your medicines. I don't even know what magic you have put in them.

"May God give you long and prosperous life. May many sufferers like me benefit from your excellent medicines. With highest esteem for you all my life. World needs people like you....."

This case was published in the book: R.R. Sharma, **MOLECULAR HOMOEOPATHY**, COSMO Publications, 24-B Ansari Road, Daryganj, New Delhi-2, 1984 on pages 122-123.

12. A case of chronic Irritated Bowl Syndrome treated with Homoeopathy

As mentioned above, Lt. Col. Bachittar Singh had brought Mjr. J.S. Sekhon to Dr. R.R. Sharma. It was because Col Singh was earlier impressed by the homoeopathic treatment by Dr. Sharma of the chronic Irritated Bowl Syndrome of his old father. This is evident from the following letter that Lt.Col. Bachittar Singh, r/o 590/16-D, Chandigarh had already written to Dr. Sharma on September 26, 1974.

"..... I am not given to hyperbole nor to excessive praise, but here is one case where I shall always feel guilty if I don't speak out the facts. My father as you know as suffering from an old and chronic type of dysentery or diarrhea or some thing of that nature. As persistent Ayurvedic and Allopathic treatments over a period of about quarter of a century proved totally ineffective, it was given up as an incurable ailment. He had to live with this suffering all this time and had to accept the unavoidable practice of attending to the call of nature for more than eight to ten times a day.

"It is gratifying to note that your Homoeopathic two doses were God-sent and nothing short of a miracle. He is totally cured after a long disappointment and is naturally very happy to bid farewell to an inseparable disease at 90 years of age. Please accept my grateful thanks....."

13. Cases of cervical spondylosis & general spondylosis treated with Homoeopathy

Spondylosis is any degenerative change in the spine. Mrs. Raj Sharma 40F, w/o Col. Deva Raj, r/o 225 Sector 36 A, Chandigarh, Phone 2601288, Lecturer in State Institute of Education, Sector 20, Chandigarh, PGI Registration No. A 0 89708, Neurosurgery OPD was diagnosed as having sever cervical spondylosis.

27-28 May'76: Very sever pain with weakness in arms. She was advised neurosurgery of cervical spine to prevent paralysis of upper and lower extremities. But the surgeon went on summer vacation. Then she approached Dr. R.R. Sharma, took homoeopathic treatment and avoided neurosurgery.

22.6.1976: Dr. Sharma took the case. X-rays cervical spine: disc between C4 & C5 prolapsed, pressing on C6, C7, C8, C4 & C5 fused, spondiloarthrosis.

Pain in mid cervical region, sharp & shooting for >2 yrs, recent numbness in Rt arm, initially (> 2Yrs) started in Lt arm going to Rt, feels arm is cold and actually it is cold to touch,

< mornings, <winter, <rainy & cloudy weather, <movement, <coughing, <exposure to cold, <hanging down. >summer, >hot fomentation, >covering, >keeping arm up

Likes summers, open fresh air and salty things. In winters does not like taking bath daily, constipation.

Homeoecine prescribed was Rhus tox-200. She remained symptom free for about 8 years with Rhus-200 and Calcarea carb 200, 1M till 1984 as the book **MOLECULAR HOMOEOPATHY** mentioned on pp.119-121.

The case was published with her medical officer Dr. G.P. Taneja as co-author in the *Hahnemannian Gleanings* **45** (3) (1978) 129 (photocopy enclosed) as reproduced below.

"Mrs. R.S. aged 40 years, had been suffering since early 1974, from attacks of acute pain in left arm and upper left part of the back and stiffness of neck. She used to get partly relieved by treatment at Military Hospital with analgesics and Inj. B-complex. From November 1975 onwards, she started having pain and weakness of right arm with numbness of fingers along with stiffness of the neck and interscapular pain. On 27-28 May 1976 she had a very severe attack of these symptoms. Neck and arm movements were restricted and painful. Triceps reflexes were diminished. X-ray showed fusion of C4 and C5 vertebra suggesting spondyloarthrosis. Patient was put on tab Tendril, Prednisolone then Brufen and Inj. Neurobion and was advised to use a cervical collar. No relief was obtained with more than a week's treatment at Military Hospital.

" At this stage the case was referred to P.G.I. where she was advised to continue the same treatment until acute symptoms subside and then undergo surgery to prevent further worsening of the condition.

"Still in agony, the patient was brought for homoeopathic treatment to one of us (R.R.S.) because he was known to have cured, as a hobby, several other difficult cases earlier. Her medical officer (G.P.T.) also accompanied her. Rhus tox 200 was given on modalities: shooting pains aggravated by motion, cold and by damp weather; ameliorated by wrapping and hot applications; and symptoms having moved from left to right side. Response to the treatment was immediate. Pains reduced to 50% in two days. Within two weeks, she returned to normal life and even after more than a year at the time of writing this report (August 1977) is still symptom free. She has been advised static (yogic) neck exercises.

"Although X-ray of the cervical region taken later did not show any change, the pain and weakness of the right arm, numbness of the fingers, pain and stiffness of the neck and pain in the interscapular region, have all been cured and the reflexes became normal.

"The following points may be noted with interest:

(1) Modern scientific methods were used for investigating the case. (2) The allopathic and homoeopathic experts worked together for the good of the patient. (3) Homoeopathic treatment cured the patient when Allopathy could not give relief. (4) Homoeopathic treatment avoided surgery to the convincing satisfaction of the allopathic medical officer who (G.P.T.) is a co-author of this communication. It is felt that this type of collaborative research would help Homoeopathy as well as the patients.

After about 25 years she came to Dr. R.R. Sharma on 12.2.2001. Her pain in the knees and ankles was treated with Rhus-200, Bryonia-200, Calcarea flour-200. Arthritis of the knees & ankles after the cervical spondylosis is consistent with Herring's law for the disease moving from above downwards. Arthritis of the knees and ankles could have been avoided if she had been under homoeopathic treatment after the first episode of cervical spondylosis. And it could have been managed well with Homoeopathy. But she discontinued homoeopathic treatment after a month.

Not very surprisingly on 17.5.2004 her husband Col. Devraj met Dr. Sharma and told that she had been advised knee replacement! She had better continued homoeopathic treatment in stead of shifting to the use of allopathic analgesics, which though gave quick relief from pain but do not cure!!

13.1 The above case of Mrs Raj Sharma had prompted Dr. H.K. Nijhawan, Ph.D., the then Director, State Institute of Education, Sector 20, Chandigarh to take homoeopathic treatment for cervical spondylosis. Later he wrote to Dr. R.R. Sharma on November 2, 1976 as follows:

"..... I write this to express my deep sense of gratefulness to you for what you have done for me. I had never imagined homoeopathic medicines could produce such remarkable and speedy results and, frankly, I went to you in a skeptic mood. But the agonising and unbearable pain in the right shoulder and arm from which I had been suffering for 27 days compelled me to consult you.

" A second consideration was that one of my colleagues at this Institute, Mrs. Raj Sharma who had been advised by the P.G.I. immediate surgery of the spine for fear of getting paralysis of her right arm and leg, had been recently cured by you with a brief treatment.

" Prior to coming to you on 22nd October I had 18 days of very intense drug therapy coupled with physiotherapy at the P.G.I. and 9-10 days homoeopathic treatment at the Homoeopathic Medical College, Chandigarh. But there was hardly any relief, apart from a little and brief fluctuation in the intensity of pain, which is considered a characteristic of this disease-Cervical Spondylosis.

" However, it was really remarkable that with just one day's medicine the sudden piercing-vanishing kind of pain was gone, and with the single dose of the second medicine on the 3rd day (24th October), I found on the 25th morning that over 50% of the extremely severe continuous nerve pain had been cured. Now hardly 5 to 10% pain remains plus the continuing numbness of the two fingers, which too, I now feel sure, will be cured soon..... "

The patient had remained symptom free for 7 years after treatment with Belladonna-200 and Calcarea carb 200, 1M until the time of writing the book **MOLECULAR HOMOEOPATHY** in 1984, vide pages 121-122.. .

13.2 A very important and interesting link in this chain of spondylosis cases is that of Paracommando of 1 Para (Special Force) Mjr. S.S.Sinsinwar from Nahan, now a Lt. Col. r/o 22/4 PB Enclave, Chinar Complex, Udhampur (J&K), Phone 01992-243332. He came on 19.11.2000 to Dr. R.R. Sharma on the recommendation of Mjr Vivek Jaiswal s/o Mrs Raj Sharma! Earlier in the Military Hospital Mjr. (now Lt. Col.) Sinsinwar was diagnosed as a case of Cervical Spondylosis. He was advised the use of Cervical Collar and analgesics for a very long period. The allopathic diagnosis and treatment were fraught with the possibility of a lowering in the degree of his physical fitness, which could even debar him from further promotions. At this stage Mjr. Vivek Jaiswal s/o Mrs Raj Sharma advised him to take Dr. Sharma's homoeopathic treatment.

19.11.2000: Pain in neck < movement, Pain left arm with numbness, desires quick relief.

Rhus-200 prescribed and cured him.

Later he cleared the physical fitness test, completed his posting in a very difficult terrain in J & K and got promoted as Lt. Colonel. Now happily resides with his family at 22/4 PB Enclave, Chinar Complex, Udhampur (J&K), Phone 01992-243332.

14: Two cases of repeated abortions treated with Homoeopathy

8.11.1991: The first case was of Mrs. Raman Gupta, 29½ F, w/o Dr. B.B. Mahajan and d/o Dr. H.D. Gupta, 1155 Sector 8C, Chandigarh, Phone, 0172-2544632. She had no problem before pregnancy. Menses were normal & painless. During pregnancy had nausea, vomiting, uncomfortable up to 2nd month. Fetus developed up to 6-8 weeks, then stopped growing. And aborted in 12-14 weeks with bleeding and labour pains. Fear of threatened abortion, during pregnancy. Cautious, wants to take precautions to avoid abortion. Feels she had missed something. Like other girls she also wants to have a child. She had five abortions before coming to Dr. Sharma. Her husband got his semen tested and found ok.

She was treated mainly with Cimicifuga racemosa 200 before and during pregnancy. No treatment was given to her husband. She had no abortion but gave birth to a male child. A female child was born without any further treatment. Both children are well.

Her father Dr. H.D. Gupta, Ph.D., LL.B., Advocate, Punjab & Haryana High Court, former Additional Professor & Head of Biostatistics, P.G.I., now r/o 1155 Sector 6C, Chandigarh, Phone 0172-2544632 wrote on 11.5.2004 as follows:

" On the occasion of birthday on 12.5.2004 (son of my daughter Dr. Mrs. Raman Gupta), I express my gratitude to you for treating my daughter of repeated abortions, all in the third month of conception. She had five abortions before approaching you for treatment with homoeopathy medicines.

"My daughter had treatment in P.G.I., Chandigarh Gynaecology Department , but without success. Her husband is Dr. B.B. Mahajan, Assistant Professor in Medicine, Medical College, Faridkot. He also consulted his doctor friends in medical College and around, but without any success.

"Tired of running after many doctors, I consulted you for treatment in Homoeopathy.

"You were kind enough to treat my daughter with Homoeopathy Medicines. She responded well to the treatment and there was no abortion sixth time and she gave a birth to a male child in the P.G.I., Chandigarh 12.5.1993. The child is normal and doing well in studies.

"As in a second child (a female baby) was born. The baby is normal and doing well in studies....."

14.2 The second case was of Sanjana, 25 F w/o Parveen Kumar Thakur r/o 1301 Sector 13, Urban Estate, Kurukshetra, Haryana, and Phone 01744-222477.

28.6.2000: She had irregular, painful menses with blackish clots. Left sided headache and burning pain in left arm. Swelling in feet. She had repeated abortions four times in second month, when the fetal heartbeat was lost. She was sad, depressed and anxious. Fear of abortion. Her main medicine was Cimicijuga. But Lachesis and Ignatia were also given as and when indicated.

Her husband's semen analysis showed: sperm count 25 (normal range 60 to 150) million/cmm, motility 40% (normal > 60%). He was treated with Silicia-200 and Acid Phos-200.

The treatment was started of before conception and continued during pregnancy. She had no abortion but gave birth to a female child on 24 January 2002, vide the letter dated 25.1.2002 from her husband Mr. Parveen Kumar. Later another female child was born in October 2004 without treatment. Both children are doing well.

15. Difficult cases of asthma treated with Homoeopathy

Asthma is a multi-component and multi-planar disease. Autoimmune susceptibility or sensitivity to some allergens gives rise to inflammation, and then to, constriction of the air-passages. This creates difficulty in breathing and wheezing and whistling sound during respiration. The modern Scientific Medicine (Allopathy), working on the Principle of Opposites, gives broncho-dilators, like asthalin, to remove constriction of air passages and steroids for treating inflammation, leaving the basic susceptibility/sensitivity to allergens as incurable. Therefore life long medication is required to keep the morbid symptoms under control and within the tolerable limits of the individual patient. Homoeopathy, on the other hand, treats the 'whole disease' and the curative medicine is selected on the totality of symptoms. Removal of the morbid symptoms indicates cure of the disease.

Malvika Kapoor 31F, w/o Rajesh Kapoor, r/o H.No.255, Sector 6, Panchkula, phones 2569666 & 2578999 came to Dr. R.R. Sharma on 31 March 2003. She was tested at the Eliti Lab of Allergy & Immunology Centre, New Delhi and found allergic to wheat +++, orange +, dust mite+ and Bermuda grass (dubh ghas)+. And diagnosed as having season related allergic asthma. She was advised 3 years' immunotherapy course of desensitization with repeated injections of small quantities of the impugned causative allergens. But she preferred homoeopathic treatment.

31.3.2003: She had aggravation from mid April to mid May during the harvesting season. Had difficulty in breathing, cough, wheezing and rattling sound. Had to take puffs of steroids. Had headache and heaviness of eyes, better closing eyes. Discolouration around eyes. Cough < lying down > sitting up < morning. Takes warm water, avoids sour and cold things.

Main medicine Arsenic album-200; Allium cepa and Nux vomica as and when needed. Cimicifuga and Baptisia helped extreme weakness due to excessive bleeding during 'placenta previa' and threatened abortion.

She wrote on 24 April 2004 as follows:

"..... This is to thank you for all the relief you have brought me through your homoeopathic treatment.

"(a) For years I had been to specialists in Delhi and Chandigarh to treat my allergic asthma that started about 10-12 years back. But it used to give me one full month (mid April to mid May) of sleepless nights. Acute coughing and wheezing which I would dread every year. Then a friend recommended you. And your treatment has ever since relieved me of years of physical and mental trauma.

"(b) Once again- pregnant with my second child, I went through acute bleeding and was hospitalised in my third month. Only to be told that I had a very low placenta. I was put on weekly injections (HCG 5000) and daily tablets (Susten 200 mg- twice a day) accompanied by complete bed rest. But the results did not appear to be very visible. So, I simultaneously started your treatment. Three weeks hence, my gynaecologist says there's a marked improvement in the position of the placenta. She has now discontinued the injections, but I continue to have your medicines. Your homoeopathic medicine gave remarkable relief to control the excessive bleeding and also the acute weakness & mental depression.

"Thank you for always coming to my rescue....."

15.1 A very 'difficult-to-treat' was the asthma complicated with skin allergic eruptions (hives) of Neha 21 F d/o Mr. N.M. Bhanot r/o 433, sector 21, Panchkula, phone 2576433. Earlier she had taken homoeopathic and allopathic treatments without relief. Her allopathic physician Dr. (Mrs) S.K. Sandhu r/o 57 Sector 28A, Chandigarh, Phone 2651547, had herself recommended her to take the homoeopathic treatment from Dr. R.R.Sharma.

16.8.2001: She had asthmatic breathing and skin eruptions (hives) for the past 9 years. Was taking wysolone and asthalin. She had fever >101° F, was restless. Could not lie on her back. Had to take 3-4 pillows. Could no breath lying and had to sit up the whole night. Thirst increased. Appetite poor. Menses painful, some times missed. Symptoms not abated by season or weather. Sneezing on going from one room to another. Coryza < mornings. Had anxiety and fear. Had hairs on chest and stomach (hirsutism).

A dose of Arsenic-200 was given on 16.8.2001 and placebos for two days. On 18.8.2001 she felt much better, had no eruptions and no asthmatic breathing. Fever came down to 99° F

She was managed with Arsenic album as the main homoeopathic medicine. But when the symptoms acutely aggravated at night she used to phone Dr. Sharma at 2-2.30 AM at night. Puffs of steroid were need and Kali carb

also was sometimes given. Sepia was called for when she missed menses. Due to some error of communication she discontinued Dr. Sharma's treatment after about a year and a half

15.2 **Rashi 4½ F** d/o Bhavna & Atul Sehgal r/o 162, Sector 7, Panchkula, phone 1597051 had TLC 6300, Hb 10.5, Eosinophils 10/hpf, ESR 23 cm/1st hr. She had breathing problem with whistling sound with expiration.

Arsenic album 200, Phosphorus 200 and Natrum mur 200 removed the whistling sound and breathing difficulty. Her eosinophil count came down to 2/hpf.

15.3 **Brig. V.K. Seth**, 67 M, r/o 12/31 Sector 20, Panchkula, Mobile Phooone: 9316131874, chronic asthma, getting up at 3 AM from sleep, polypus posterior nares, quickly cured with Kalium Carb & Calc. phos.

16. A case of progressive systemic sclerosis (PSS) treated with Homoeopathy

The Progressive Systemic Sclerosis (PSS) is the chronic, progressive generalized hardening and shrinkage of the connective tissues. It is an autoimmune disease and may involve any part or organ of the body. Prednisolone, a glucocorticoid steroid, is the allopathic drug of choice but the response is not always satisfactory. The glucocorticoids have several side effects. These, just to mention a few, include weight gain due to sodium & water retention, potassium loss, muscle weakness, diabetes mellitus, hypertension, osteoporosis, nausea, vomiting, headache, delayed wound healing, ulcerative oesophagitis, peptic ulcer etc. The PSS has its own pathology of various organs and tissues. When the treatment is not effective the side effects of steroids add to those of the PSS to trouble the patient.

Mrs. Santosh Mamta Washan 55F w/o Mr S.N. Washan r/o 647, Sector 12, Panchkula, Phone 0172-2563167 was diagnosed as suffering from PSS in the Postgraduate Institute of Medical Education & Research (PGI) Chandigarh with CR: A 675482/ RHTOC 19003. She took their treatment for quite some time but without adequate relief. Therefore she came to R.R. Sharma for homoeopathic treatment.

6.9.2001: She had pain and stiffness in multiple joints fingers, wrists, shoulders < right side. Could not protrude the tongue and open the mouth fully. All problems < 4-5 pm & < heat. Sole sensitive < Rt. Acidity. ESR 57 mm/1 hr. Feverish. Could not inhale and exhale properly. Thirst with dry mouth, appetite ↓. Lycopodium 200 one dose on tongue. On 8.9.01 felt slightly better in all respects. Placebo for 3 days. Later Rhus tox, Bryonia, Calcarea flour were also given as and when called for.

On 4.5.2004 she wrote the following letter.

".....Sir, I had been suffering from multiple joint pains since January 1998. The pain and swelling started from finger joints, wrists, back side of palm, shoulders, knees, and went upto ankle joints and foot.

"I took the treatment from PGI, Chandigarh during 1998 and 1999. Subsequently opening of mouth was reduced and full tongue could not be taken out of mouth. RA factor was negative but ANF was positive. PGI diagnosed it to be the Auto Immune Disease PSS (Progressive Systemic Sclerosis). Treatment of private practitioner Dr. S.D. Deodhar (M.D., M.A.M.S., Ex-Prof. PGI) from January 2000 to Jan 2001 and of PGI was mainly based on medication of steroids, which increased body weight and other side effects became apparent. But I could not get the relief.

"I had also tried Ayurvedic Medicine for some period during 1999 and 2001 (Feb. to Aug.) but could not get relief.

"I started your treatment on the recommendation of a friend from September 2001 onwards with the following symptoms:-

. Temperature used to be normal or below in the morning, rise upto 99.5o F in the evening and used to be normal during night, headache in the morning.

. Non-opening of full mouth and less coming out of tongue.

. Stiffness / pain/ swelling of joints of fingers, wrist, elbow, shoulders, neck, knee, ankle and foot. Non-movement of some of the joints.

. Absence of sound sleep and loss of appetite and acidity etc.

"I religiously took your medicine as per your instructions regularly. My condition had started improving slowly with initial control over temperature, acidity, body heaviness and subsequently opening of mouth and taking out of tongue. Further , the stiffness, pain in joints/ swelling reduced. After 2½ years of your treatment now I can perform my normal domestic work, which I could not do earlier. Now I am still taking your medicine with few days gap in between to be recovered fully. At present, my right hand little finger is slightly bent and there is occasional pain in some joints.

"So, I take this opportunity to thank you for the sympathetic, dedicated, `continuous treatment, attending me at even odd hours....."

17. A case of Sarcoidosis treated with Homoeopathy

The Sarcoidosis is a chronic, progressive, generalized granulomatous reticulosis involving almost any organ or tissue, characterized by the presence in all affected tissues of noncaseating epithelioid cell tubercles. Its etiology is not known. The allopathic medicine of choice is the glucocorticoid **prednisolone** (C₂₁H₂₈O₅), which is known for its anti-inflammatory and immunosuppressive anti-allergic properties. But it also has several serious side effects as mentioned under sec. 16 above. These when added to the morbid symptoms of the sarcoidosis itself make the life of the patient difficult. That is why the patient (R.S. Bal) was quite worried when he approached Dr. Sharma.

R.S. Bal 36 M r/o 18 Sector 9 Panchkula, Phone: 2565083 was diagnosed as having sarcoidosis at the Postgraduate Institute of Medical Education & Research (PGI), Chandigarh with registration no. CR 644394/CC 78006. His chest X-ray of 17.8.2002 showed B/L hilar lymphadenopathy. The chest CT scan of 19.8.02 showed mediastinal & B/L lymphadenopathy. Bronchoscopy and transbronchial lung biopsy showed interstitial fibrosis. Ultrasound showed mild fatty liver with liver-function tests within normal limits. He was prescribed Acticort (prednisolone) 40 mg daily. He did not take the allopathic medicines but preferred homoeopathic treatment from Dr. R.R. Sharma.

25.8.2002: The following presenting symptoms were considered for homoeopathic prescription of Arsenic album 200.. Weight loss, 4 Kg in 3 months. Thirst ↑↑, but avoided cold water. Appetite ok. Lymphadenopathy. Profuse cold sweat. Anxiety, worry. Disturbed sleep. Feverish. ESR 24 mm/1hr. Heaviness on (L) chest and arm.

01.9.2002: Feels better, sleep better, cold sweat reduced. He did not sweat in a room where others did

In addition to Arsenic album 200, Phosphorus 200 and Silicia 200 were given as and when needed. The chest X-ray dated 21.9.2002 as compared to that of 17.8.02 showed marked regression of the hilar and mediastinal lymphadenopathy. The same was reported on the chest X-ray of 19.10.02. The chest X-rays taken on subsequent dates were normal.

In his letter of 12 June 2004 he wrote as follows.

“ Through this letter I thank you for the homoeopathic treatment, which you had given to me for the treatment of sarcoidosis. After I was diagnosed as having sarcoidosis by PGI, Chandigarh vide CR CC 78006, they had suggested Acticort 40 mg steroid as medicine. As steroids have many side effects your medicine, which I have taken saved me from any side effect and the X-ray reports also came normal. In the end I would again like to thank you for all you have done for me.”

18. Cases of Idiopathic Thrombocytopenic Purpura (ITP) treated with Homoeopathy

The idiopathic thrombocytopenic purpura (ITP) is a self-originated disease without a known cause, characterized by purplish or brown red discoloration easily visible through the epidermis, caused by hemorrhage into the tissues and associated with a decrease in the platelet count in the circulating blood.

18.1 Nandini 4F, d/o Rajiv Kumar Palta, then r/o H.N. 11 Sector 9, Panchkula, now shifted to 57 Sector 6, Panchkula Phone 2582006. She was admitted to PGI, Chandigarh under Dr. R.K. Marwaha with CR. No. 181536 on 29.12.93 and discharged on 30.12.93. She was diagnosed as having Acute Idiopathic Thrombocytopenic Purpura. She was given blood transfusion and put on Wysolone 55 mg/day for 10days, 40 mg/day for 2 days, 30 mg/day for 2 days, 20 mg/day for 2 days and 10 mg/day for 2 days. Severity of the disease was explained to the parents. She was again admitted to PGI from 16.2.94 to 22.2.94 and then from 22.7.94 to 8.8.94 for the same disease. During her hospital stays she was given blood transfusions and managed with high doses of intravenous injections of Methyl Prednisolone. The immunoglobuline IgG was also given. But the outcome was not entirely satisfactory. She gained weight and looked obese.

She also took Chinese medicine for some period before coming to Dr. R.R. Sharma on 21.4 1997.

21.4.1997: Her platelet count was <5000/cmm, the normal range being 150000 to 450000/cmm. She had purplish blue spots all over the body. Playing with fingers while talking. Covering the face with hands. She was shy but loquacious. One dose of Lachesis 200 was given.

22.4.1997: Colour of blue patches faint, no new patch, platelet count <10000/cmm. Desire for amusement, wants to watch TV, anxiety about health reduced. Wants to paint. One more dose of Lachesis 200 given.

28.4.1997: Platelet count 33000/cmm. It became 79000 /cmm on 6.5.97, 90000/cmm on 14.5.97, 103000 /cmm on 21.5.97 and 120000/cmm on 2.6.97. Then she was given a dose of Lachesis 200 every 10 days for 2 months.

On 28 November 2004 her grand father Mr. K.K. Palta wrote as follows: Dear Dr. Sharma, Retrospectively I feel like thanking you deeply from the core of my heart for treating my grand daughter, other relatives and friends with Homoeopathy when best allopathic treatments could not give sufficient relief.

In December 1996 I accompanied Mrs. Neeraj Mishra w/o my friend Er. K.G. Mishra, Deputy Chief Engineer (now retired), Bukharo Steel Plant, Bihar (now Jharkhand). Earlier the doctors at the C.M.C Medical College & Hospital, Vellore (south India) had found that she was having liver cirrhosis and cancer. The Professor in charge of her treatment himself had given a newspaper cutting and directed them to seek your homoeopathic treatment. She showed remarkable immediate relief with your treatment and is still doing fine.

In April 1997 I brought my grand daughter Nandini for homoeopathic treatment of pinkish blue spots over her body. Her platelet count was below 5000 then. In 1993 she diagnosed at PGI, Chandigarh as having I.T.P. She was admitted to PGI for several days then and also twice later on. She was also given Chinese medicine. But after your treatment she has remained free from the recurrence of the disease.

In April 2001 I came with my relative Mr. S.C. Chopra, r/o B-4/93 College Road, Narendra Colony, Malerkotla, Panjab. Earlier he was diagnosed as having liver cirrhosis and infection of hepatitis virus C with poor results in future. But with your homeopathic treatment he is doing fine till now.

On my advice my friend and relative Mr. Satish Kumar Dhir, r/o 743/7 Panchkula (Phone 2596618, 2733105) sought your homoeopathic treatment in April 2002, when PGI had diagnosed him as have chronic kidney failure and end stage kidney disease. For about 19 months his creatinine and urea remained within safe limits without the need for dialysis. He died towards the end of December 2003 due to some other serious disease.

Besides the above cases I have advised some other patients too to take your treatment and will continue to do so also in future.

May the Almighty God grant you long healthy life to help the needy patients.

Thanking you and with regards. Sd. K.K. Palta, 57 Sector 6, Panchkula, Phone 2582006.

18.2 The other ITP patient treated was Gurmehar 4½ M, s/o Harinder Singh, r/o 3350 Sector 32D, Chandigarh, Phone: 2601775 @ & 2734066 (shop) with PGI CR: A882819/PHC6162. He was admitted to PGI from 23 to 25 August 2001 under Dr. R.K. Marwaha and Dr. A. Trehan. He was diagnosed as having acute Idiopathic Thrombocytopenic Purpura and injected with Methyl Prednisolone 500mg each on 23, 24 & 25 August in 5% Dextrose drip over a period of 4 hrs duration. In spite of this heavy dose (1.5 gm) of Steroid his platelet count on 31 August was <5000/cmm. He then came to Dr. R.R. Sharma on 1st September.

1.9.2001: Platelet count <5000/cmm. He had hemorrhagic blue spots all over the body. Likes winters, does not like covering even in winter. Wants AC in summer. Thirst ↑, appetite ok. Was put on Lachesis 200. His platelet count recorded was <5000 on 31 Aug, 190000 on 4 Sept, 250000 on 10 Sept, 130000 on 24 Sept, 339000 on 15 October and 488000 on 26 November 2001.

18.3 An interesting case was of Ankit 14M s/o Z.S. Sagwal, Chief Geophysicist, ONGC, Dehradun, r/o C7/6, ONGC Colony, Kaulagarh Road, Dehradun, Phones: 0135-2755087, 9837047749. Through internet they came to know that Dr. R.R. Sharma had already treated cases of ITP. Earlier the boy was admitted to Indraprasth Apollo Hospital from 9.9.03 to 13.9.03 under Registration no. 406490 and diagnosed as having ITP. He was given a course of Prednisolone without satisfactory outcome. Then he undertook the Ayurveda treatment of the famous Dr. Triguna of Delhi. Boy's father contacted Dr. Sharma by phone on May 6, 2004. The symptoms were taken on phone from the boy and his both parents.

6.5.2004: Blue spots on upper and lower extremities. The platelets count on 1.5.04 as 30000. Thirst ↑↑. Appetite ↑. Averse to acids, which cause sore throat. Likes hot drinks. Tidy & orderly.. Cold feet in winters. Late to sleep and late to rise. Lachesis 200 & Arsenic 200 on alternate mornings.

26.5.2004: Platelets count 1.09 lac, Hb 15.1.

10.6.2004 : Platelets count 80600. Sputum and expectoration mixed with blood. Arsenic & Lachesis repeated.

25.6.2004: Platelets count 98000.

26.5.2004 : They visit Dr. Sharma in Panchkula. The boy overeats! Phos 200 & Lachesis 200 prescribed for a week on alternate mornings..

12.7.2004: Platelet count 1.56 Lac, Hb 14.5.

28.7.2004: Platelet count 85000.

23.8.2004: Platelet count 79000

04.9.2004: Platelet count 1.2 lac

19.9.2004: Platelet count 1.3 lac

01.10.2004: Platelet count 1.56 lac

19. Surgery avoided in the case of a solitary thyroid nodule treated with Homoeopathy

Mr. A.K. Bharadwaj, 39 M, the then (January 1975) P.A. to the Chief Commissioner of Chandigarh got leave and admitted to the surgical ward with CRNo. 590944. He was waiting in the ward for the surgical removal of the solitary thyroid nodule, which had grown so large that he could not put on the necktie. There he heard that Dr. R.R.Sharma, Head Biophysics Department in PGI, had cured homoeopathically some very difficult cases. He got himself discharged from the hospital on some pretext and approached Dr. Sharma for homoeopathic treatment. Initially Dr. Sharma was reluctant because a cold solitary thyroid nodule could be malignant. An Iodine-131 thyroid scan was therefore kept in mind and asked for, although there was no sign or symptom, like weight loss, to suggest malignant process. The scan on 13.2.1976 actually showed that the nodule was not cold but took up iodine (See below). Earlier the report dated 2.1.1975 on the X-ray of the cervical spine confirmed the diagnosis as follows:

"There is soft tissue swelling in front of the neck causing indent on the trachea, which in AP view is displaced to the left, Suggestion of thyroid swelling."

28.1.1975: Calcarea carb-200 was prescribed for painless hoarse voice, swelling right neck, sensitivity to cold, profuse sweat on palm & sole, disturbed sleep, coldness on vertex.

9.1.1976: There was no sign of the nodule and nor was any hoarseness of voice. Necktie could be put on. The report on X-ray of the cervical spine confirmed the cure as below:

"**Cervical spine AP & Lat**: Cervical canal measures 17-20 mm from C6 to C2 vertebrae. Vertebral bodies and I/V disc spaces are normal. Minor posterior osteophytes seen. Pre-vertebral and pre-tracheal soft tissue shadows are normal. Air passage is patent. No growth is seen."

13.2.1976: The iodine-131 thyroid scan was normal. There was iodine-131 uptake in the region of the nodule, which therefore was NOT cold and not malignant

Later Mr. A.K. Bharadwaj was promoted as Under Secretary and then Deputy Secretary under the Chandigarh UT Administration before superannuation. But the thyroid nodule did never recur.

20. A case of chronic active ulcerative colitis treated with Homoeopathy

Bhag Singh 35 M, r/o Kambali, Teh. Mohali, Distt. Ropar, Panjab, Phone 210513 was diagnosed as having Idiopathic Ulcerative Colitis vide the histopathological report dated 1.6.2000 on Biopsy No. S-2191/2000 under CR. No. 000506738 of Government Medical College Hospital, Sector 32, Chandigarh, Department of Pathology. The Colonoscopy report dated 14.02. 2001 from HOPE GASTROINTESTINAL DIAGNOSTIC CLINIC, Sector 21-B Chandigarh found edematous mucosa, multiple erosions and ulcerations involving rectum, sigmoid colon and descending colon and gave the impression of Active Proctocolitis. The histopathological report signed 19.02.2001 from Malhotra Lab Services, Sector 22-C, Chandigarh diagnosed it as Chronic active colitis consistent with idiopathic ulcerative colitis. He came to Dr. R.R. Sharma on 19.2.01.

19.02.2001: He had frequent stools and profuse bleeding per rectum during stool. Red blood. No mucus. His sister had died of ulcerative colitis in 1983. So he was very worried and had almost given up hope of recovery.

Phosphorus 200 and Merc-1M were prescribed to be given alternately.

28.02.2001: Frequency of stool and quantity of blood in stools reduced.

13.03.2001: No blood in stool.

He remained symptom free for over a year with occasional repetitions of doses. He discontinued the treatment after June 2003.

20. Homoeopathy for brainstem hemorrhage of a General

General Lalji D. Singh, 58M, r/o 6-7 Calston, Longwood, Simla suddenly collapsed while participating in a meeting in Simla on 25 March 1994. He was airlifted and admitted to Command Hospital (Northern Command), Chandimandir, near Panchkula the same day.

On 13.4.1994 Dr. R.R. Sharma was contacted who took the case in the hospital private ward.

Investigations had shown that due to the brainstem hemorrhage the 3, 4, 7 nerves were compressed. So he had paralysis of left face, mouth, both legs & arm. Left eye was open, eyelids could not move, so were stitched to half close position. Outer skin sensation was less on right side. Thirst ↑. Appetite ok. Perspiration ↑. Likes sweets but avoids cold drinks. Does not like milk. No fear of death but wants to do some thing for the wife. That is he was anxiously cautious, which is characteristic of the single medicine Causticum B.P. 130/85. BS: F 72, pp 96. Sleep ↓ but feels better & happy after sleep

Homoeopathic medicine prescribed: Causticum 200 for three days.

16.4.1994 : Very confident of recovery. Eyelids could move, so the stitch was removed. Sleep better. Desires to walk around.

3.7.1994 : Better. Improvement continues. Causticum 200 for 7 days.

21. Overwhelming evidence for the efficacy of high potency homoeomedicines

As in the foregoing above, Dr. R.R. Sharma could go on and on presenting cases after cases, which he successfully treated with Homoeopathy in his own hands when their world best and prolonged treatment under Modern Scientific Medicine (Allopathy) did not give adequate and satisfactory relief. Dr. Sharma's clinical experience corroborates the overwhelmingly huge mass of clinical evidence collected by innumerable homoeopaths all over the world during the past over two centuries. This is to show beyond any shadow of doubt that homoeomedicines do act curatively even in potencies (30C, 200C, 1000C) higher than the 12th centesimal. These, according to Avogadro's law, do not contain any molecule of the original drug and hence should not have any chemical, biochemical or medicinal action as ordained by the Law of Mass Action.

22. Concluding remarks

22.1 This clinical evidence is supported by the controlled animal experiments on rats and mice presented above. These experiments showed that only the dynamized 20m or 30C potency of the causative pathogenic chemical substance (Alloxan, DMBA) was curative while the same very chemical substance, simply diluted to the same very extent, namely 1000²⁰ or 100³⁰ fold, was inactive like the control placebo. All this emphasizes the very obvious fact that the key to the curative action of homoeomedicines lies in the dynamization processes, which are unique only to Homeopathy and have never before been scientifically investigated.

22.2 *The question therefore once for all closes affirmatively that the homoeomedicines do act curatively even in high potencies of dilution beyond the Avogadro's limit and hence having no molecule of the original drug.* This does not violate the Avogadro's law or the Law of Mass Action. On the contrary it points to the existence and discovery of a new scientific phenomenon of the induction of the chemical specificity of the drug molecules into the molecules of the diluent medium to generate plentiful medicinally active diluent molecules to satisfy and/or bypass the Avogadro's law. During dynamization processes of forceful trituration and impacted succession at every step of dynamized dilution for preparing the potencies, the molecules of the diluent solvent medium get resonantly promoted to acquire the chemically exchangeable energy of the solute drug molecules. Thereby the diluent molecules themselves become medicinally active and the diluent medium itself becomes the therapeutic agent containing plenty of active molecules, which mimic the chemical specificity and medicinal action of the drug molecules. The theoretical basis and the underlying physical mechanisms have been elucidated elsewhere in details.

22.3 Most of the cases, which Dr. Sharma successfully treated with Homoeopathy, came to him when the best possible treatment under Modern Scientific Medicine (MSM) did not give adequate relief. Globally the treatment of Sarcoidosis under MSM (Allopathy) is steroid-based and hence associated with serious side effects of glucocorticoid therapy. But Mr. R.S Bal, vide Para 17 above, firmly diagnosed by the best experts of MSM, to have Sarcoidosis, undertook homoeopathic treatment as the first choice and got speedy recovery with disappearance of symptoms as revealed by X-rays becoming normal. The important point is therefore made for the still doubting scientists and the experts of MSM to organize a Centre of Homoeopathic Research for Treating Difficult Diseases under controlled conditions in the renowned MSM institutes like Postgraduate Institute of Medical Education & Research (PGI), Chandigarh and All India Institute of Medical Sciences (AIIMS), New Delhi. Patients after full & firm diagnoses for designated diseases with all sorts of tests under MSM will be randomly placed in three groups for treatment with Homoeopathy, MSM (Allopathy) and Navayurveda (A judicious combination of Homoeopathy, MSM (Allopathy)

and Yoga). Evaluations of the progress of treatments and final recovery for the patients of all the three groups will again be made with MSM tests and criteria.

22.4 In the passing attention may be drawn to the following newspaper report.

Astoundingly, Dr. Allen Rose, a Senior Vice President of Glaxo-SmithKline Pharmaceutical Company has admitted (Editorial, The Tribune dated 13 Dec'03, page10) that 50 to 70 per cent of the allopathic drugs are ineffective in treating the ailments for which they are prescribed.

Secondly the PTI news published on the front page in first column of the Chandigarh Edition of Hindustan Times dated Saturday the 8th May'4 reads:

HEALTH CARE IN A MESS

Every year, 22 lakh Indians are pushed below the poverty line because of healthcare spending, with 58pc of hospitalized people borrowing money at high interest rates or selling their assets-PTI.

The situation will worsen after 2005 when the WTO regime will be in place pushing the prices of Allopathic medicines beyond the reach of the majority of the global populace.

22.5 Homoeopathy too is not 'all cure'. For that matter no therapeutic modality can cure all diseases. All therapies have merits, demerits and limitations. The newly proposed Navayurveda tries to maximize merits and minimize demerits by judiciously combing Homoeopathy, MSM (Allopathy) and Yoga. The Navayurveda-based Health Care Delivery System has the merit and potential to provide 'Health for All' effectively yet cheaply.