



annual report 2008-2009



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE



Annual Report

2008-2009



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE
Ministry of Health & Family Welfare, Government of India
New Delhi



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CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Department of Ayurveda, Yoga & Naturopathy,
Unani, Siddha & Homocopathy (AYUSH)

Ministry of Health & Family Welfare, Government of India

61-65, Institutional Area, Janakpuri, New Delhi-110 058.

Telephone: +91-11/28521981, 28525982, 28525983, 28525831, 28525852, 28525862,
28525883, 28525897, 28520501, 28522524

Fax: +91-11/28522965

E-mail: unanimedicine@gmail.com & ccrum@rediffmail.com

Web site: www.unanimedicine.com

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CONTENTS

Preface	5
Executive Summary	7
Administrative Report	9
Technical Report	16
• Programme-wise Activities of the Council's Centres	16
• Clinical Research Programme	18
Clinical Studies	21
Pharmacological Research	42
Research on Fundamental Aspects of Unani medicine	43
Validation of Regimental Therapies of Unani medicine	44
Research-oriented Health Programmes	44
Mobile Clinical Research Programme	47
School Health Programme	48
Unani Treatment-cum-Speciality Centre at Dr. R.M.L. Hospital, New Delhi	48
Facilities under Gender Component Plan for Females	49
Activity of the Council in the North-Eastern Region	49
Collaborations	49
Extra-mural Research Scheme	51
• Drug Standardization Research Programme	66
• Survey and Cultivation of Medicinal Plants Programme	71
• Literary Research Programme	73
• Collection and Dissemination of Information	75
Miscellaneous	78
• Organization of Workshops, Seminars, Health Camps, Trainings, Lectures, etc.	78
• Celebration of National and International Days, Weeks and Fortnights	89
• Participation in Conferences, Seminars, Workshops, Exhibitions, Fairs, etc.	92



• Memorandum of Understanding	103
• Possession of Building	104
• Foreign Visitors to CCRUM	104
• Promotions	106
• Retirements	106
• Deaths	107
• Appendix-I : List of Research Papers Presented in Different Seminars/Workshops/Conferences	108
• Appendix-II : List of Research Papers Published in Journals	121
• Appendix-III : List of Participants of Training Programmes	131
Acknowledgements.	134
Financial Statements	
• Audit Report	135
• Audited Statement of Accounts	139
• Notes on Accounts	164

PREFACE

Unani Medicine is a perfect system of healthy living. It offers time-tested ways and therapies for prevention and cure of diseases as well as preservation and promotion of good health. The Central Council for Research in Unani Medicine (CCRUM), an autonomous organization under Ministry of Health & Family Welfare (Department of AYUSH), Government of India, has since January 1979 been busy developing research in Unani Medicine, and validating various strengths and fundamental concepts on scientific lines. The Council has over the years achieved significant progress in its research programme, and has some important success stories to share with the scientific world.

This present report carries the progress the CCRUM has made during the year 2008-2009 in its research programme comprising clinical research, drug standardization research, survey and cultivation of medicinal plants, and literary research. Besides, it also offers a peep into some other important activities and achievements of the Council. During the reporting period, efforts were made to reorganize the activities on extramural and intramural fronts. In view of the national health priorities, newer initiatives for furthering the aims and objectives of the Council were taken.

Under the Clinical Research Programme, studies on 20 different diseases continued to establish therapeutic efficacy of the Unani drugs. Therapeutic trials of Unani drugs could be completed in three cosmetic conditions and significant leads were obtained. With a view to further strengthening the clinical research programme, collaborations with leading scientific institutions particularly in the areas of Infective Hepatitis, Bronchial Asthma, Obesity, Psoriasis and Duodenal Ulcer continued. The Council has collaborative arrangements with such eminent institutions as Deccan Medical College, Hyderabad; Lady Hardinge Medical College, New Delhi; and Vallabh Bhai Patel Chest Institute, New Delhi to take care of chronic and stubborn cases. Regimental therapies were employed particularly in musculoskeletal disorders that helped increase the efficacy rate of Unani drugs. For the first time in the history of the system, standard operating procedures (SOPs) were developed for Hajamat (cupping) – a form of regimental therapy – making it safe and efficacious.

Research on fundamentals of the system - an area of importance for the CCRUM – continued during the period under report. Under this, studies on susceptibility to lifestyle diseases in relation to the temperament of the individuals continued. Proper assessment of the temperament was conducted, and this provided some scientific basis to the studies. Together with this, research-oriented healthcare facilities at 16 clinical centres also continued. About 1.5 lakh people benefited from the administration of kit medicines developed by the Council.

Some other important initiatives continued during the year. Under the School Health Programme, health check-up and treatment of children in the schools adopted for the purpose continued, besides making them understand the importance and efficacy of Unani medicinal plants in essential healthcare. The Council's Mobile Clinical Research Programme extended its benefit to a population of over four lakh people living in areas predominantly inhabited by Scheduled Castes and Scheduled Tribes in 20 villages and urban slums. A good number of people benefited from the health awareness programme in which health education on preventive and promotive health aspects of Unani Medicine were

offered to the masses. In the entire clinical research work, a number of steps were taken to provide special care to women and children. They were also educated about strengths of Unani Medicine on prevention of disease and promotion of health as well as importance of medicinal herbs. In fact, a larger section of the population has accepted it with confidence.

Another important area was Drug Research Programme where the Council developed SOPs for manufacture of 85 compound formulations. Phyto-chemical investigations of the drugs developed by the Council were also undertaken. Standards developed by the Council were included in the *Unani Pharmacopoeia of India* on the basis of the monographs published by the Council having database and protocols approved by the Unani Pharmacopoeia Committee.

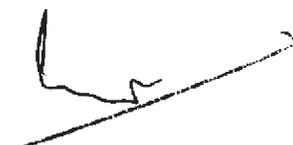
In the area of Literary Research, the Council's endeavour was to edit and translate the Arabic/Persian texts in to Urdu and other languages. Being concerned about the fast elimination of rare books, the Council embarked upon a programme of digitization of rare books of high value and reprinting of out-of-print books of importance.

Besides, the Council also laid great emphasis on human resource development wherein a number of officers were exposed to training in different institutions of eminence. The Council also had its share of responsibility in the development of Traditional Knowledge Digital Library (TKDL) database – a joint venture of the Council of Scientific and Industrial Research (CSIR) and Department of AYUSH. It should not be out of place to mention here the setting up of a Centre for Research in Indian Systems of Medicine (CRISM) in a joint venture for Ayurveda and Unani systems at National Centre for Natural Products Research (NCNPR) at the University of Mississippi, U.S.A. The centre has paved way for worldwide acceptance of the two Indian systems of medicine – Ayurveda and Unani.

The CCRUM during all these years of its functioning has tried to establish as an institution responsible for development of Unani Medicine with particular emphasis on establishing the philosophies and therapeutic profile of the system on scientific lines in the larger interest of the mankind. The Council has always risen to the occasion during natural calamities, floods, epidemics, etc. and made considerable efforts for providing medical relief to the victims. I am sure that the Council's activities will go a long way in providing succour to the suffering humanity at large as well as the Unani fraternity in the country and abroad.

I shall be failing in my duty if I do not place on record our deep appreciation and gratitude for the excellent support and patronization received from the Hon'ble Union Minister of Health & Family Welfare and Hon'ble Ministers of State for Health & Family Welfare. We are also grateful to Secretary, Department of AYUSH in particular who, together with the officers of the Department, has all along been a great source of encouragement, guidance and support in all our activities.

New Delhi
19 April 2010

A handwritten signature in black ink, appearing to be 'Dr. Mohammed Khalid Siddiqui', is written over a horizontal line.

Dr. Mohammed Khalid Siddiqui
Director General



EXECUTIVE SUMMARY

The Council continued its activities during the reporting period in the areas of clinical research, drug standardization research, survey and cultivation of medicinal plants, and literary research. The main emphasis during the reporting period was on consolidation of the work done in different research programmes. Besides, new studies were also initiated. Under the clinical research programme, clinical and therapeutic studies continued on 20 different diseases. Therapeutic trials of Unani drugs were completed in three cosmetic conditions and significant leads achieved. Collaborative studies on infective hepatitis, bronchial asthma, obesity, psoriasis and duodenal ulcer continued with other scientific organizations including Lady Hardinge Medical College, New Delhi; Vallabh Bhai Patel Chest Institute, New Delhi and Deccan Medical College, Hyderabad.

Regimental therapy experimentation in musculoskeletal disorders also continued. Standard operating procedure (SOP) for Hajamat (Cupping) – a form of regimental therapy – was developed for its application in rheumatoid arthritis/osteo-arthritis cases.

Research on fundamental aspects of Unani Medicine also continued. Studies on susceptibility to lifestyle diseases in relation to the temperament of the individual continued at the Council's Central Research Institute of Unani Medicine (CRIUM), Hyderabad. During the reporting period 3804 patients were assessed for their temperament.

Research-oriented healthcare facilities continued at out-patient departments (OPDs) of 16 clinical centres of the Council. At these OPDs, the patients were treated with the kit medicines developed by the Council. During the reporting period a total of 140350 new patients were registered.

Under the mobile clinical research programme, over four lakh people including 80000 belonging to Scheduled Castes and 20000 belonging to Scheduled Tribes were covered in 20 villages/urban slums. A total of 14120 patients were treated during 679 mobile visits. With a view to promoting health awareness among the rural masses, health education programme on preventive, promotive and curative strengths of Unani Medicine also continued in the adopted pockets.

Under the School Health Programme, 24 schools in the adopted pockets were covered. In these schools, health check-ups of 4260 school children were conducted, and of them 3112 were treated for the ailments they suffered from.

Under gender component plan, 82350 female patients were treated at different centres of the Council. With a view to enhancing health awareness among the masses, health education on medicinal uses of plants growing in their vicinity was provided particularly to women and school children in the adopted pockets/schools through group meetings, health lectures etc.

The Council's only centre in the North-Eastern region, the Regional Research Centre of Unani Medicine (RRCUM), Sillchar (Assam) continued to provide to the people healthcare through Unani Medicine, and treated 6250 patients during the reporting period.

Under the Drug Standardization Research Programme, Standard Operating Procedures (SOPs) for manufacture of 85 compound formulations were developed, and quality control was enforced on 37 compound formulations prepared at the pharmacy of CRIUM, Hyderabad. Phyto-chemical investigations on coded drug ITA-06 for sinusitis were carried out and 16 compounds were isolated which are being characterized with the help of spectroscopy. During the reporting period, the sixth volume of the first part of *Unani Pharmacopoeia of India* consisting of 48 monographs on single drugs was published.

Under the Survey and Cultivation of Medicinal Plants Research Programme, different forest areas including Atmakur and Chittoor (Andhra Pradesh), Begeshwar (Uttar Pradesh), Pithoragarh (Uttarakhand), Kanya Kumari (Tamil Nadu) and Peer Punjal forest division (Jammu & Kashmir) were surveyed, and 2798 specimens representing 855 species of medicinal plants were collected. Besides, 255 folk medicinal claims were also recorded from the tribal inhabitants. Experimental and large scale cultivation of some important medicinal plants also continued at different herb gardens of the Council.

Under the Literary Research Programme, Urdu translations of four important classical books were published. Besides, under the project of publication of out-of-print Unani books, nine classical books were reprinted.

Besides, publication of the Council's bi-monthly bulletin *CCRUM Newsletter*, quarterly Urdu journal *Jahan-e-Tib*, quarterly English journal *Hippocratic Journal of Unani Medicine*, Annual Report, technical books and publicity literature continued. During the reporting period, 37 publications were brought out. The Council also continued coordination in the TKDL - Traditional Knowledge Digital Library (Unani) project.

During the period under report, 90 research papers based on the studies conducted in different research projects at the Council's centres were presented in different international and national seminars/conferences. Sixty-nine research papers were published in the reputed scientific journals. Human Resource Developmental activities in respect of the Council's researchers also continued. The scientists of the Council were deputed to orientation training programmes in different disciplines. With a view to popularizing the system among the masses, the Council participated in various international and national health exhibitions, and health fairs. The Council's centres also actively participated in the national pulse polio programme.



ADMINISTRATIVE REPORT

THE COUNCIL

The Central Council for Research in Unani Medicine (CCRUM) was established on 30 March 1978. However, it started functioning as independent organization from 10 January 1979.

OBJECTIVES

The main objectives of the Council are as follows:

- Formulation of aims and patterns of research on scientific lines in Unani Medicine.
- To undertake research or any other programmes in Unani Medicine.
- Prosecution of and assistance in research and propagation of knowledge and experimental measures generally in connections with the causation, mode of spread and prevention of diseases.
- To initiate, aid, conduct, develop and coordinate scientific research in different aspects, fundamental and applied, of Unani Medicine, and to promote and assist institutions of research for the study of diseases, their prevention, causation and remedy.
- To finance enquiries and researches for the furtherance of objects of the Council.
- To exchange information with other institutions, associations and societies interested in the objects similar to those of the Council especially in observation and study of diseases in East and in India in particular.
- To prepare, print, publish and exhibit any papers, posters, pamphlets, periodicals and books for furtherance of the objects of the Council and to contribute to such literature.

GOVERNING BODY

The management of the Council is entrusted to a Governing Body (GB) consisting of official and non-official members. Following was the constitution of the Governing Body of the Council during the reporting period.

President

Union Minister of Health & Family Welfare

Executive Vice-President

Union Minister of State for Health & Family Welfare

Vice-President

Prof. (Hakim) Syed Khaleefathullah, Chennai (Tamil Nadu)



Official Members

- Secretary, Department of AYUSH, Ministry of Health & Family Welfare, Government of India or their nominee not below the rank of Joint Secretary.
- Additional Secretary & Financial Advisor (FA), Ministry of Health & Family Welfare, Government of India.
- Joint Secretary, Department of AYUSH, Ministry of Health & Family Welfare, Government of India.

Non-Official Members

- Prof. (Hakim) B.S. Usmani, Mumbai (Maharashtra)
- Hakim Sirajuddin Ahmad, Meerut (Uttar Pradesh)
- Hakim Shakeel Ahmad Tamanna, New Delhi
- Prof. (Dr.) M.S.Y. Khan, New Delhi
- Dr. O.P. Agarwal, New Delhi
- Dr. Palpu Pushpangadan, Lucknow (Uttar Pradesh)
- Prof. (Dr.) C.N. Deivanayagam, Chennai (Tamil Nadu)
- Dean, Faculty of Unani Medicine, Aligarh Muslim University, Aligarh
- Director, National Institute of Unani Medicine, Bangaluru (Karnataka)

Member Secretary

- Director, Central Council for Research in Unani Medicine.

STANDING FINANCE COMMITTEE (SFC)

- Joint Secretary, Department of AYUSH, Ministry of Health & Family Welfare, Government of India : Chairman
- Additional Secretary & Financial Advisor, Ministry of Health & Family Welfare, Government of India : Member
- One Technical Member nominated by the President of the Governing Body
- Director, Central Council for Research in Unani Medicine : Member-Secretary

During the reporting period, the SFC met twice – first on 8 July 2008 and then on 27 August 2008.



Recommendations of the SFC meeting on 8 July 2008

- The SFC considered the un-audited accounts of the Council for the year 2007-08 and recommended for adoption of the same subject to the observations of the Audit from Director General of Audit, Central Revenue (DGACR).

Recommendations of the SFC meeting on 27 August 2008

- The SFC recommended for acceptance of donation from Mrs. Anita Reddy of Hyderabad.
- The SFC recommended the association of Dr G.N. Qazi, an eminent expert in the field of Drug Development, as a Consultant to the Council with consultancy fee at the government prescribed rates, subject to his accepting the assignment.
- The Committee approved the proposal for engagement of consultants as per Department of Personnel & Training (DOP&T) norms in respect of retired Government servants.
- The SFC after discussion agreed upon the proposal for replacement of vehicles for ambulance for the Council's Clinical Research Units (CRUs) at Burhanpur, Allahabad and Amethi and Regional Research Institutes of Unani Medicine at Delhi, Mumbai and Patna. The replacement of the Jeep was also agreed in view of the functional requirements at RRIUM, Srinagar and RRIUM, Chennai especially for survey work.
- The Committee further agreed for replacement of the Staff Car No. DL4C-8521 by the Maruti Gypsy, for use by the Director, CCRUM.
- The Committee discussed the proposal for hiring of accommodation for the RRIUM, Patna and desired that Director, CCRUM make efforts to get some government accommodation.
- The SFC agreed for engagement of Emeritus Scientists in the Council on the pattern of CSIR/ICMR.
- The Committee approved the proposal regarding assignment for the audit of de-centralized Institutes to the State Accountant General Office (AGs) as per the instructions of the Controller & Auditor General (C & AG).
- The Committee noted the allotment of 0.675 hectares of land for construction of building of CRIUM, Lucknow, and rental accommodation with a covered area of 6,000 square feet. provided by the State Government till such time as the Council's own building for the Institute is constructed.

SCIENTIFIC ADVISORY COMMITTEE

The Scientific Advisory Committee (SAC) of the Council consists of :

- Five eminent Unani physicians one of them being the Chairman and four members.
- A chemist
- A botanist

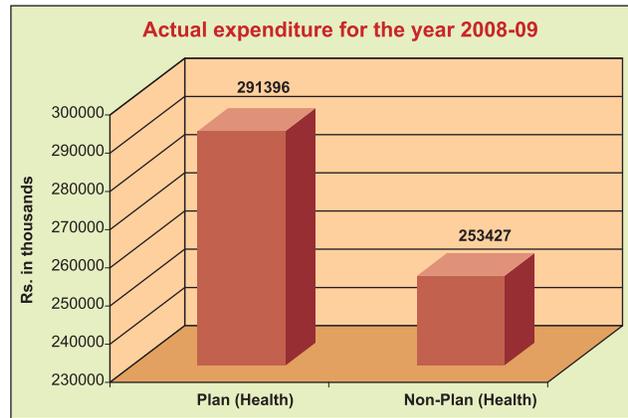
- A pharmacologist
- An expert in Modern Medicine
- Director, CCRUM as Member-Secretary

During the reporting period the Scientific Advisory Committee (SAC) was not in office.

FINANCIAL OUTLAY

The actual expenditure on plan and non-plan health schemes for the year 2008-09 are shown below:

	Actual Expenditure (Rs. in thousands)
Plan (Health)	2,91,396
Non-Plan (Health)	2,53,427
Total	5,44,823



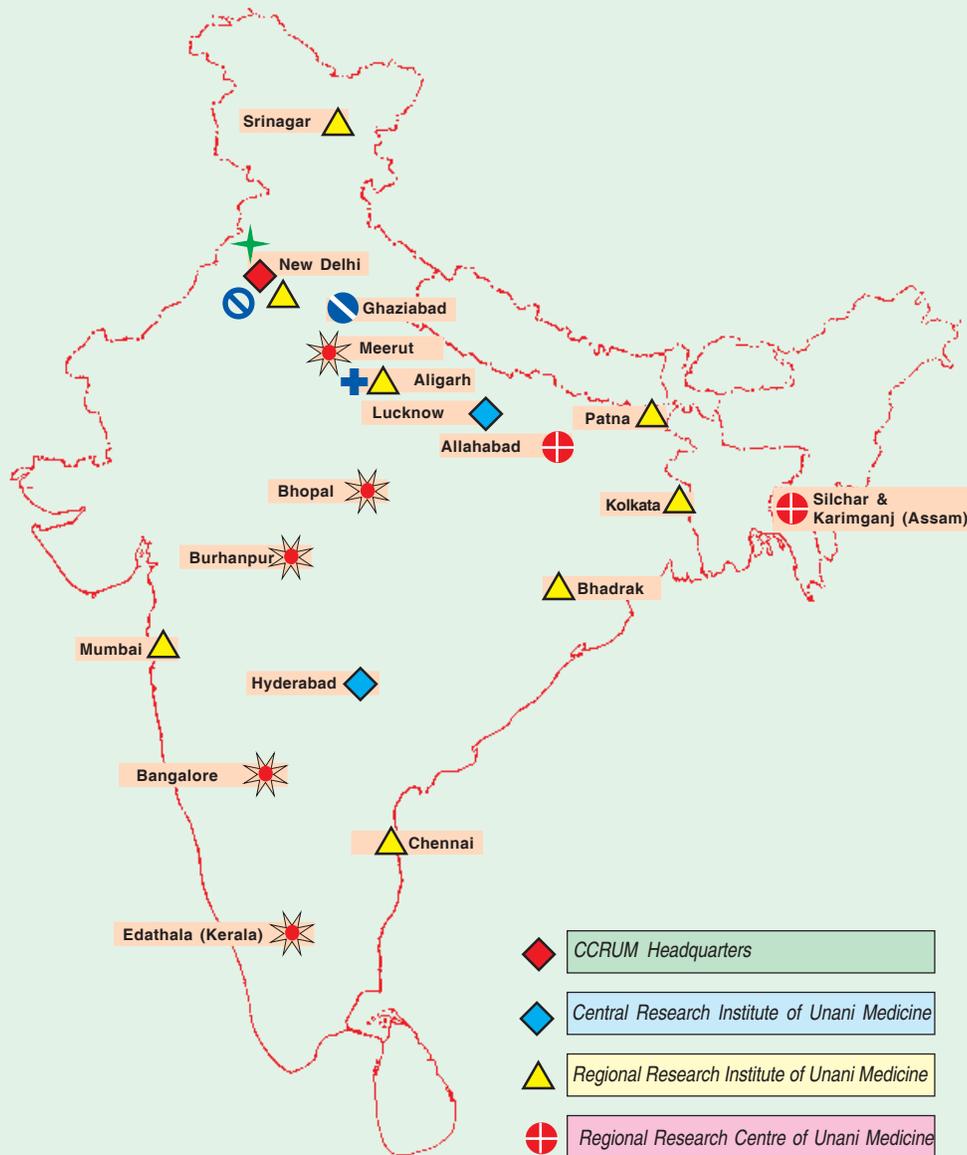
INSTITUTIONAL NETWORK OF CCRUM

The Council's institutional network consists of the following 22 centres.

Centres	Number
CCRUM Headquarters, New Delhi	01
Central Research Institutes of Unani Medicine	02
Regional Research Institutes of Unani Medicine	08
Regional Research Centres of Unani Medicine	02
Clinical Research Units (Unani)	05
Literary Research Institute of Unani Medicine	01
Drug Standardization Research Institute	01
Drug Standardization Research Unit	01
Chemical Research Unit (Grant-in-aid)	01
Total	22

The above Centres are functioning in different States. The following is the State-wise institutional network of the Council.

Institutional Network of CCRUM



-  CCRUM Headquarters
-  Central Research Institute of Unani Medicine
-  Regional Research Institute of Unani Medicine
-  Regional Research Centre of Unani Medicine
-  Clinical Research Unit
-  Drug Standardization Research Institute
-  Drug Standardization Research Unit
-  Literary Research Institute of Unani Medicine
-  Chemical Research Unit



Andhra Pradesh

- Central Research Institute of Unani Medicine (CRIUM), Hyderabad

Assam

- Regional Research Centre of Unani Medicine (RRCUM), Silchar with an extension centre at Karimganj

Bihar

- Regional Research Institute of Unani Medicine (RRIUM), Patna

Delhi

- Regional Research Institute of Unani Medicine (RRIUM), New Delhi
- Literary Research Institute of Unani Medicine (LRIUM), New Delhi
- Drug Standardization Research Unit (DSRU), New Delhi
- Unani Medical Centre (extension centre of RRIUM, New Delhi), Dr. Ram Manohar Lohia Hospital, New Delhi

Jammu & Kashmir

- Regional Research Institute of Unani Medicine (RRIUM), Srinagar

Kerala

- Clinical Research Unit (CRU), Edathala (Alwaye)

Karnataka

- Clinical Research Unit (CRU), Bangaluru

Madhya Pradesh

- Clinical Research Unit (CRU), Bhopal
- Clinical Research Unit (CRU), Burhanpur

Maharashtra

- Regional Research Institute of Unani Medicine (RRIUM), Mumbai

Orissa

- Regional Research Institute of Unani Medicine (RRIUM), Bhadrak



Tamil Nadu

- Regional Research Institute of Unani Medicine (RRIUM), Chennai

Uttar Pradesh

- Central Research Institute of Unani Medicine (CRIUM), Lucknow
- Regional Research Institute of Unani Medicine (RRIUM), Aligarh
- Drug Standardization Research Institute (DSRI), Ghaziabad
- Regional Research Centre of Unani Medicine (RRCUM), Allahabad
- Clinical Research Unit (CRU), Meerut
- Chemical Research Unit (Grant-in-aid), Aligarh

West Bengal

- Regional Research Institute of Unani Medicine (RRIUM), Kolkata

TECHNICAL REPORT

PROGRAMME-WISE ACTIVITIES OF THE COUNCIL'S CENTRES

During the reporting period the following activities were performed at different centres of the Council.

Centre	Activities
Central Research Institute of Unani Medicine (CRIUM), Hyderabad	<ul style="list-style-type: none"> • Clinical Research Programme • Research on Fundamentals of Unani Medicine • General Out-patient Department (OPD) Programme • Mobile Clinical Research Programme • School Health Programme • Drug Standardization Research Programme • Survey and Cultivation of Medicinal Plants Programme
Central Research Institute of Unani Medicine (CRIUM), Lucknow	<ul style="list-style-type: none"> • Clinical Research Programme • General OPD Programme • Mobile Clinical Research Programme • School Health Programme • Literary Research Programme
Regional Research Institute of Unani Medicine (RRIUM), Chennai	<ul style="list-style-type: none"> • Clinical Research Programme • General OPD Programme • Mobile Clinical Research Programme • School Health Programme • Drug Standardization Research Programme • Survey and Cultivation of Medicinal Plants Programme
Regional Research Institute of Unani Medicine (RRIUM), Bhadrak	<ul style="list-style-type: none"> • Clinical Research Programme • General OPD Programme • Mobile Clinical Research Programme • School Health Programme • Survey and Cultivation of Medicinal Plants Programme
Regional Research Institute of Unani Medicine (RRIUM), Patna	<ul style="list-style-type: none"> • Clinical Research Programme • General OPD Programme • Mobile Clinical Research Programme • School Health Programme



Centre	Activities
Regional Research Institute of Unani Medicine (RRIUM), Aligarh	<ul style="list-style-type: none"> • Clinical Research Programme • Pharmacological Research Programme • General OPD Programme • Mobile Clinical Research Programme • School Health Programme • Drug Standardization Research Programme • Survey and Cultivation of Medicinal Plants Programme
Regional Research Institute of Unani Medicine (RRIUM), Mumbai	<ul style="list-style-type: none"> • Clinical Research Programme • General OPD Programme • Mobile Clinical Research Programme • School Health Programme
Regional Research Institute of Unani Medicine (RRIUM), Srinagar	<ul style="list-style-type: none"> • Clinical Research Programme • Pharmacological Research Programme • General OPD Programme • Mobile Clinical Research Programme • School Health Programme • Drug Standardization Research Programme • Survey and Cultivation of Medicinal Plants Programme
Regional Research Institute of Unani Medicine (RRIUM), Kolkata	<ul style="list-style-type: none"> • Clinical Research Programme • General OPD Programme
Regional Research Institute of Unani Medicine (RRIUM), New Delhi	<ul style="list-style-type: none"> • Clinical Research Programme • Validation of Regimental Therapies • General OPD Programme • Mobile Clinical Research Programme • School Health Programme
Regional Research Centre of Unani Medicine (RRCUM), Allahabad	<ul style="list-style-type: none"> • Clinical Research Programme • General OPD Programme • Mobile Clinical Research Programme • School Health Programme
Regional Research Centre of Unani Medicine (RRCUM), Silchar with extension Centre at Karimganj	<ul style="list-style-type: none"> • Clinical validation of efficacy of kit medicines • General OPD Programme
Clinical Research Unit (CRU), Bangaluru	<ul style="list-style-type: none"> • Clinical Research Programme • General OPD Programme

Centre	Activities
Clinical Research Unit (CRU), Meerut	<ul style="list-style-type: none"> • Clinical Research Programme • General OPD Programme
Clinical Research Unit (CRU), Bhopal	<ul style="list-style-type: none"> • Clinical Research Programme
Clinical Research Unit (CRU), Burhanpur	<ul style="list-style-type: none"> • Clinical Research Programme • General OPD Programme • Mobile Clinical Research Programme
Clinical Research Unit (CRU), Edathala	<ul style="list-style-type: none"> • General OPD Programme
Drug Standardization Research Unit (DSRU), New Delhi	<ul style="list-style-type: none"> • Drug Standardization Research Programme
Drug Standardization Research Institute (DSRI), Ghaziabad	<ul style="list-style-type: none"> • Drug Standardization Research Programme
Literary Research Institute of Unani Medicine (LRIUM), New Delhi	<ul style="list-style-type: none"> • Literary Research Programme
Chemical Research Unit (CRU), (Grant-in-aid), Aligarh	<ul style="list-style-type: none"> • Chemical Investigation of Unani Medicinal Plants

CLINICAL RESEARCH PROGRAMME

The clinical research programme of the Council deals with the methods of diagnosis and treatment of diseases and aims at critical appraisal for the theory of pathogenesis, symptomatology, clinical methods of diagnosis and prognosis, principles, lines and methods of treatment, and the drug and diet therapies peculiar to Unani Medicine. Under this programme, clinical and therapeutic studies are being conducted on common and chronic ailments, some of them having national priority, in order to find effective remedies for them. Effectiveness of certain special therapies of Unani Medicine is also being tested in some diseases, besides research on some fundamental aspects of the system.

This programme is being implemented at the following centres :

- Central Research Institute of Unani Medicine (CRIUM), Hyderabad
- Central Research Institute of Unani Medicine (CRIUM), Lucknow
- Regional Research Institute of Unani Medicine (RRIUM), Chennai

- Regional Research Institute of Unani Medicine (RRIUM), Bhadrak
- Regional Research Institute of Unani Medicine (RRIUM), Patna
- Regional Research Institute of Unani Medicine (RRIUM), Aligarh
- Regional Research Institute of Unani Medicine (RRIUM), Mumbai
- Regional Research Institute of Unani Medicine (RRIUM), Srinagar
- Regional Research Institute of Unani Medicine (RRIUM), Kolkata
- Regional Research Institute of Unani Medicine (RRIUM), New Delhi
- Regional Research Centre of Unani Medicine (RRCUM), Silchar
- Regional Research Centre of Unani Medicine (RRCUM), Allahabad
- Clinical Research Unit (CRU), Bangaluru
- Clinical Research Unit (CRU), Meerut
- Clinical Research Unit (CRU), Bhopal
- Clinical Research Unit (CRU), Burhanpur
- Clinical Research Unit (CRU), Edathala (Kerela)

CENTRE-WISE ALLOTMENT OF PROJECTS/DISEASES FOR CLINICAL RESEARCH

Different centres of the Council have been allotted various projects and diseases for clinical research. The details are as follows:

Centre	Disease
Central Research Institute of Unani Medicine (CRIUM), Hyderabad	Bars (Vitiligo), Iltehab-e-Tajaweef-e-Anf (Sinusitis), Iltehab-e-Kabid (Infective hepatitis), Muzmin Zube-e-Sadariya Sabit (Chronic stable angina), Kasrat-e-Shahmuddam (Hyperlipidemia), Zaghtuddam Qawi (Essential hypertension), Qarh-e-Meda-wa-Isna-e-Ashari (Duodenal ulcer) and Daus Sadaf (Psoriasis), Study on Unani galactogogue, Collaborative study on Viral Hepatitis-patients and project on Theory of Akhlat, Physiological studies on humours and temperaments.
Central Research Institute of Unani Medicine (CRIUM), Lucknow	Waja-ul-Mafasil (Rheumatoid arthritis), Ziabetus Sukkari (Diabetes Mellitus), Tahajjur-e-Mafasil (Osteo arthritis), Bars (Vitiligo), Warm-e-Lissa (Gingivitis), Zahab-o-Mayil Asnan (Tooth hypersensitivity) Cosmeto-therapeutic trials on graying of hair, skin fairness, pimples and lips crack.

Centre	Disease
Regional Research Institute of Unani Medicine (RRIUM) Chennai	Ziabetus Sukkari (Diabetes mellitus), Daul Feel (Filariasis), Iltehab-e-Kabid (Infective hepatitis), Waja-ul-Mafasil (Rheumatoid arthritis), project on immunomodulatory activities of Unani drugs, and cosmeto-therapeutic trials of Unani drugs in Baldness and Skin Crack.
Regional Research Institute of Unani Medicine (RRIUM) Bhadrak	Daul Feel (Filariasis)
Regional Research Institute of Unani Medicine (RRIUM) Patna	Daul Feel (Filariasis) and Humma-e-Aswad. (Kala Azar/Leishmaniasis)
Regional Research Institute of Unani Medicine (RRIUM) Aligarh	Ziabetus Sukkari (Diabetes Mellitus), Bars (Vitiligo) and Zaghtuddam Qawi (Hypertension)
Regional Research Institute of Unani Medicine (RRIUM) Mumbai	Zaghtuddam Qawi (Hypertension) and Iltehab-e-Kabid (Infective hepatitis)
Regional Research Institute of Unani Medicine (RRIUM) Srinagar	Waja-ul-Mafasil (Rheumatoid arthritis), Zeequn Nafas (Bronchial asthma) and Daus Sadaf (Psoriasis)
Regional Research Institute of Unani Medicine (RRIUM) Kolkata	Zaheer-e-Muzmin (Bacillary dysentery) and validation trials of kit medicines in different diseases
Regional Research Institute of Unani Medicine (RRIUM) New Delhi	Waja-ul-Mafasil (Rheumatoid arthritis), Ziabetus Sukkari (Diabetes Mellitus), Zaghtuddam Qawi (Hypertension) and Saman-e-Mufrit (Obesity)
Research Research Centre of Unani Medicine (RRCUM) Allahabad	Ziabetus Sukkari (Diabetes mellitus) and Validation trial of kit-medicines in different diseases
Clinical Research Unit (CRU), Bangaluru	Nar-e-Farsi (Eczema), Daus Sadaf (Psoriasis) and Buffa (Dandruff).

Centre	Disease
Clinical Research Unit (CRU), Bhopal	Nar-e-Farsi (Eczema) and Daus Sadaf (Psoriasis)
Clinical Research Unit (CRU), Burhanpur	Zaheer-e-Muzmin (Bacillary dysentery), Nar-e-Farsi (Eczema) and Shira-e-Muzmin (Chronic urticaria).
Clinical Research Unit (CRU), Meerut	Buffa (Dandruff) and Zaheer-e-Muzmin (Bacillary dysentery)
Clinical Research Unit (CRU), Edathala (Kerela)	Validation trials of kit medicines
Research Research Centre of Unani Medicine (RRCUM) Silchar (Assam)	Validation trials of kit medicines

CLINICAL STUDIES

AMRAZ-E-JILD (SKIN DISORDERS)

BARS (VITILIGO)

Clinical and therapeutic studies on Bars (Vitiligo) continued at CRIUM, Hyderabad; CRIUM, Lucknow and RRIUM, Aligarh. During the reporting period following studies were conducted.

Studies Conducted at CRIUM, Hyderabad

Clinical studies on Bars (Vitiligo) were conducted on a total of 7162 patients in the OPD/IPD. These patients were studied in different treatment groups. Details are as follows;

(i) Evaluation of therapeutic efficacy of a combination of the coded drugs UNIM-001 and UNIM-003

Therapeutic efficacy of a combination of the coded drugs UNIM-001 and UNIM-003 was evaluated in 2302 patients of Bars (Vitiligo). The drug UNIM-001 was given in the dose of two tablets (500 mg each) twice daily an hour after meals. Besides, the paste of the drug UNIM-003 (prepared by mixing one part of the powdered drug with five parts of water) was applied locally on the affected parts early in the morning and then exposed to sun rays for two to five minutes. The paste was washed off after 30 minutes of the local application. The treatment was given for a period of three months initially, and was extended till the maximum repigmentation was achieved.

Out of the 2302 patients registered, 427 completed the study. Ninety-nine (23.2%) patients showed 71-90% repigmentation. In 123 (28.8%) patients repigmentation was 51-70%. One hundred and forty-six (34.2%) patients showed less than 40% repigmentation. Fifty-nine (13.8%) patients showed no response. Eight hundred and ninety patients were under study. Nine hundred eighty-five patients dropped out of the study.

The response of the treatment was better in the lower age groups. No toxicity of the drugs was seen. However, in some cases nausea and vomiting were reported which were controlled either by adding pure ghee in diet or discontinuing the drug for few days.

(ii) Evaluation of therapeutic efficacy of a combination of the coded drugs UNIM-004 and UNIM-005

Therapeutic efficacy of a combination of the coded drugs UNIM-004 and UNIM-005 was evaluated in 4582 patients of Bars (Vitiligo) attending the OPD. The drug UNIM-004 was given in the dose of 1.5 gm twice daily (morning & evening) preferably on empty stomach. Besides, local application of the drug UNIM-005 in the form of paste (prepared by mixing one part of the powder drug with five parts of water) was made on the affected parts early in the morning and then exposed to sun rays for two to five minutes. The paste was washed off after 30 minutes of the local application. The treatment was given for a period of three months initially. This was extended till the maximum repigmentation was achieved.

Out of the 4582 patients registered, 1333 completed the study. Two hundred and fifty-two (18.9%) patients showed 71-90% repigmentation. In 755 (56.6%) patients repigmentation was 51-70%. One hundred forty-five (10.9%) patients showed below 40% repigmentation. One hundred eighty-one (13.6%) patients showed no response. One thousand three hundred and nine patients were under study. One thousand nine hundred and forty patients dropped out of the study.

In the responding cases further exacerbation in the size of the depigmented patches was checked. No new patches appeared. The response to the treatment was better in the lower age groups and in non-progressive segmental lesions with unilateral involvements.

No toxicity of the drug was observed. However, itching and blister formation was reported in some patients after the local application of UNIM-005 but that too was controlled by diluting the paste and adjustment of exposure to sun rays.

(iii) Evaluation of therapeutic efficacy of Munzij and Mushil (MM) therapy

Therapeutic efficacy of Munzij and Mushil (MM) therapy was evaluated in 239 patients of Bars (Vitiligo) attending the IPD of the Institute. These patients were of chronic nature. The patients were first subjected to Munzij and Mushil therapy followed by treatment with the oral and local drugs. The Munzij drug UNIM-040 was given in the form of decoction (prepared by soaking 35 gm of the drugs in 120 ml of hot water in the night and boiled and sieved) early in the morning on empty stomach. The Munzij drug was given for four to six weeks or till the maximum 'Nuzj' appeared in the urine

followed by use of the Mushil drug UNIM-041 once and the Tabreed drug UNIM-042 twice daily alternately for six days.

Out of the 239 patients registered, 223 completed the study. Two hundred eighteen (97.7%) patients responded to the therapy. Five (2.3%) patients did not respond to the therapy. There was definite sign of starting early repigmentation in the depigmented patches even during the MM therapy. After completion of this therapy, these patients were treated in different treatment groups in the OPD. It was observed that the therapy activated the repigmentation process. The response was rapid in the cases who were subjected to the Munzij and Mushil therapy compared with the patients who were put only on oral drug and local application of the drug. Seven patients dropped out of the study, and nine were under study.

The average duration of the therapy was 40 days for appearance of Nuzj in the urine particularly in chronic cases.

(iv) Preliminary study on the development of SOPs for use of Munzij-e-Balgham

Preliminary study on the development of SOPs for use of Munzij-e-Balgham in patients of Bars (Vitiligo) was done in eight patients in the IPD. The Munzij drug MUNB was given in the form of decoction (prepared by soaking 35 gm of the drug in 120 ml of hot water in the night, boiled and sieved) on empty stomach early in the morning. The drug was given till the maximum Nuzj appeared in the urine. After completion of Munzij drugs, Mushil and Tabrid drugs were given once on alternate days for six days. All the eight patients showed appearance of Nuzj from the third week of the treatment. However, maximum Nuzj appeared in the fourth week.

(v) Study on the oestrogen and progesterone levels in female patients

Preliminary study on levels of the oestrogen and progesterone hormones in female patients of Bars was started during the reporting period. Thirty-one female patients in the age group of 15-45 were included in the study. Their oestrogen and progesterone levels were studied. Out of 31 patients, 17 patients showed normal oestrogen level whereas in 14 patients oestrogen level was found above normal range. Progesterone level was normal in 28 patients and above normal in three patients. These patients are being treated with the coded drugs UNIM-001 and UNIM-003 and are under study.

Studies Conducted at CRIUM, Lucknow

(i) Evaluation of therapeutic efficacy of the coded drugs UNIM-001+UNIM-003, UNIM-004+UNIM-005 and UNIM-006+UNIM-027 with and without the Munzij and Mushil (MM) therapy

Therapeutic efficacy of a combination of the coded drugs UNIM-001+UNIM-003, UNIM-004+UNIM-005, UNIM-006+UNIM-027 with and without the MM therapy was evaluated in 103 patients of Bars (Vitiligo) in three separate groups.

In Group-I, patients were given the oral drug UNIM-001 in the form of two tablets (500mg each) thrice daily along with local application of the drug UNIM-003 in the form of paste (prepared by mixing one part of the drug with five parts of water) on the affected parts and then exposed to sun rays for two to five minutes. The paste was washed off after half an hour of the application. The treatment was given for a period three months in the first instance. This was extended till the maximum repigmentation was achieved. The average duration of treatment was 24 months. In this group, 57 patients were registered. Out of these, 10 completed the study. All these patients showed 51-70% repigmentation. Ten patients were under study whereas 37 patients dropped out of the study.

In Group-II, the patients were given the oral drug UNIM-004 in the dose of two tablets (500 mg each) thrice daily along with the local application of the drug UNIM-005 in the form of paste (prepared by mixing one part of the drug with five parts of water) on the affected parts and then exposed to sun rays for two to five minutes. The paste was washed off after half an hour of local application. The treatment was given for a period of three months in the first instance. This was extended till the maximum repigmentation was achieved. The average duration of treatment was 24 months. In this group, out of the 30 patients registered, four completed the study. In all the four patients, repigmentation was 71-90%. Ten patients were under study. Sixteen patients dropped out of the study.

In Group-III, patients were given the oral drug UNIM-006 in the form of decoction (prepared by soaking 35 gm of the drug in 120 ml of water) with honey on empty stomach early in the morning, along with local application of the drug UNIM-027 in the form of paste on the affected parts. The treatment was given for a period of 24 months. In this group, 16 patients were registered. Six patients were under study whereas 10 patients dropped out of the study.

(ii) Evaluation of therapeutic efficacy of Munzij and Mushil therapy

Therapeutic efficacy of MM therapy was evaluated in 12 patients in the IPD. These patients were first subjected to the Munzij and Mushil therapy followed by the treatment with the oral and local drugs. Munzij drugs were given for a period of 2-3 weeks or till the maximum 'Nuzj' appeared in the urine followed by the Mushil and Tabreed drugs once alternately for six days. Out of 12 patients registered, six completed the study. All the six patients responded to the therapy. Repigmentation started even during the MM therapy in all the six cases. Four patients were under study whereas two patients dropped out of the study.

Studies Conducted at RRIUM, Aligarh

Preliminary screening of the coded drugs UNIM-007 and UNIM-023

Preliminary screening of the coded drugs UNIM-007 and UNIM-023 continued in patients of Bars. During the reporting period, 55 patients were studied. The drug UNIM-007 was given in the dose of two capsules (500mg each) twice daily along with the local application of UNIM-023 in the form of cream on the affected parts in the morning and then exposed to sun rays for two to five minutes early in the morning. The treatment was given initially for a period of three months. This was extended till the maximum repigmentation was achieved.

Out of the 55 patients registered, 48 completed the study. Seven (14.6%) patients showed 71-90% repigmentation. In 24 (50.0%) patients repigmentation was 51-70%. Seventeen (35.4%) patients showed no response. Seven patients dropped out of the study.

NAR-E-FARSI (ECZEMA)

Clinical and therapeutic studies on patients of Nar-e-Farsi (Eczema) continued at CRU, Bhopal and CRU, Bangaluru. During the reporting period following studies were conducted.

Studies Conducted at CRU, Bhopal

Comparative trial of the coded drugs UNIM-401+UNIM-402 and UNIM-401+UNIM-403

Therapeutic efficacy of a combination of the coded drugs UNIM-401+UNIM-402 and UNIM-401+UNIM-403 was compared in 90 patients. Patients were divided into two groups. In Group-I, oral drug UNIM-401 was given in the form of infusion (prepared by soaking from 17gm of the drug in 120 ml of water) on empty stomach early in the morning, along with local application of the oil UNIM-402 on the affected parts at bed time. In Group-II, UNIM-401 was given as in Group-I along with the local application of the drug UNIM-403. The treatment was given for a period of 90 days. This was extended till the maximum response was achieved. The average duration of treatment was six months.

Out of the 42 patients registered in Group-I, 26 completed the study. Ten (38.5%) patients were completely relieved, 13 (50.0%) partially relieved whereas three (11.5%) patients showed no response. Eleven patients were under study. Five patients dropped out the study.

Out of the 48 patients registered in Group-II, 25 completed the study. Nine (36.0%) patients were completely relived, 10 (40.0%) partially relieved whereas six (24.0%) patients showed no response. Seventeen patients were under study. Six patients dropped out of the study.

Both the combinations of the drugs showed significant therapeutic effects in subsiding the clinical signs and symptoms of the disease. The oral drug UNIM-401 proved to be an important blood purifier.

Studies Conducted at CRU, Bangaluru

Evaluation of therapeutic efficacy of the coded drugs UNIM-401 and UNIM-403

Therapeutic efficacy of a combination of the coded drugs UNIM-401 and UNIM-403 was evaluated in four patients of chronic dermatitis. The drug UNIM-401 was given in the form of infusion (prepared from 17 gm of the drug in 120 ml of water) on empty stomach early in the morning along with local application of UNIM-403 on the affected parts at bed time. The treatment was given for a period of three months. This was further extended upto six months.

Out of the four patients registered, two completed the study. Both the patients were partially relieved. Two patients were under study.

DAUS SADAF (PSORIASIS)

Therapeutic studies on patients of Daus Sadaf (Psoriasis) continued at CRIUM, Hyderabad, CRU, Bangaluru and CRU, Bhopal. During the reporting period following studies were conducted.

Studies Conducted at CRIUM, Hyderabad

Comparative trial of the coded drugs UNIM-401 and UNIM-403 with and without Munzij and Mushil therapy

Therapeutic efficacy of the coded drugs UNIM-401 and UNIM-403 was evaluated in 38 patients in two groups. One group was treated with the combination of the drugs UNIM-401 and UNIM-403 and the patients in the other group were first subjected to MM therapy followed by treatment with the combination of the two drugs UNIM-401 and UNIM-403. The drug UNIM-401 was given in the form of infusion (prepared by soaking 17gm of the crude drug in 120 ml of hot water in the night and decanted in the morning) on empty stomach early in the morning. Besides, local application of the ointment UNIM-403 was also done on the affected parts at bed times. The treatment was given for a period of three months which was extended till the maximum response was achieved. The average duration of the treatment was six months.

In Group-I, out of the 11 patients registered, six completed the therapy. All the patients responded to the therapy and are under treatment with the oral and local drugs. Five cases dropped out of the study. In Group-II, out of the 27 patients registered, 12 patients were under study and 15 patients dropped out of the study.

Studies Conducted at CRU, Bangaluru

Preliminary screening of a combination of the coded drugs UNIM-401, UNIM-403 and UNIM-777(oil)

Preliminary screening of a combination of the coded drugs UNIM-401, UNIM-403 and UNIM-777(oil) was done in patients of plaque psoriasis. The drug UNIM-401 was given in the form of infusion (prepared by soaking 17gm of drug in 120 ml of water kept over night) on empty stomach early in the morning. Besides, the ointment UNIM-403 mixed with UNIM-777 (oil) applied locally on the affected parts at bed time. The treatment was given for a period of six months.

Out of the 24 patients registered, 14 completed the study. Three (21.4%) patients were completely relieved, seven (50.0%) partially relieved whereas one (7.2%) patient showed poor response. Three (21.4%) patients showed no response. Ten patients were under study.

Studies Conducted at CRU, Bhopal

Comparative trial of two combinations of the coded drugs UNIM-401+UNIM-402 and UNIM-401+UNIM-403

Therapeutic efficacy of two combinations of the coded drugs UNIM-401+UNIM-402 and UNIM-401+ UNIM-403 was compared in 48 patients. The drug UNIM-401 was given in the form of infusion (prepared by soaking 17gm of the crude drug in 120 ml of hot water in the night and decanted in the morning) on empty stomach early in the morning. Besides, local application of the ointment UNIM-402 was given in Group-I and UNIM-403 in Group-II respectively. In each group the treatment was given for a period of three months which was extended upto six months.

Out of the 25 patients registered in Group-I, 18 completed the study. Four (22.2%) patients were completely relieved, seven (38.9%) partially relieved whereas seven (38.9%) patients showed no response. Five patients were under study. Two patients dropped out of the study.

In Group-II, out of the 23 patients registered, 15 completed the study. Five (33.3%) patients were completely relieved, seven (46.7%) partially relieved whereas three (20.0%) patients showed no response. Seven patients were under study. One patient dropped out of the study

No drug intolerance/toxicity was noted.

AMRAZ-E-TARSEELI (COMMUNICABLE DISEASES)

Clinical and therapeutic studies on the patients of Amraz-e-Tarseeli (Communicable diseases) including Daul-Feel (Filariasis), Iltehab-e-kabid (Infective hepatitis) and Kala Azar continued at CRIUM, Hyderabad, RRIUMs, Chennai, Bhadrak and Patna. During the report-ing period, following studies were conducted.

DAUL FEEL (FILARIASIS)

Studies Conducted at RRIUM, Chennai

Comparative trial of two combinations of the coded drugs UNIM-268+UNIM-270+UNIM-271+UNIM-272 and UNIM-269+UNIM-270+UNIM-271+UNIM-272

Therapeutic efficacy of two combinations of the coded drugs UNIM-268+UNIM-270+UNIM-271 and UNIM-269+UNIM-270+UNIM-271 was compared in 24 patients of Daul Feel (Filariasis). The patients were divided into two groups.

In Group-I, the drug UNIM-268 was given orally in the dose of two tablets (500mg each) twice daily after meals along with the 'Nutul' of UNIM-271 at bed time. Besides local application of the paste prepared by mixing 20 gm of the powdered drug UNIM-270 with 20 ml of the drug UNIM-272 was also done on the affected parts at bed time.

In Group-II, the oral drug UNIM-269 was given as in Group-I along with the local application of UNIM-270 and UNIM-272 and Nutul of UNIM-271 as given in Group-I. The treatment was given for a period of 30 days in the IPD. Thereafter the patients were treated for a period of another 30 days in the OPD.

Out of the 12 patients registered in Group-I, five completed the study. Two (40.0%) patients were completely relieved, one (20.0%) patient was partially relieved whereas two (40.0%) patients showed no response. One patient was under study whereas six patients dropped out of the study.

In Group-II, out of the 12 patients registered, five completed the study. One (20.0%) patient was completely relieved, three (60.0%) patients were partially relieved whereas one (20.0%) patient showed no response. Four patients were under study. Three patients dropped out of the study.

No drug intolerance/toxicity was noted.

Studies Conducted at RRIUM, Bhadrak

Comparative trial of two combinations of the coded drugs UNIM-268+UNIM-270+UNIM-271 and UNIM-269+UNIM-270+UNIM-271+UNIM-272 with and without Munzij and Mushil (MM) therapy

Therapeutic efficacy of two combinations of the coded drugs UNIM-268+UNIM-270+UNIM-271 and UNIM-269+UNIM-270+UNIM-271+UNIM-272 with and without Munzij & Mushil therapy was compared in 98 patients of Daul Feel (Filariasis) in four groups.

In Group-I, patients were given the drug UNIM-268 in the dose of two tablets 500 mg twice daily along with the Nutul of the drug UNIM-271 followed by local application of the drug UNIM-270 and UNIM-272 on the affected parts at bed times. In Group-II, patients were given the drug UNIM-269 in the dose of two tablets (500 mg each) twice daily along with the local application of drugs UNIM-270 and UNIM-272 and Nutul of the drug UNIM-271 as in Group-I. In Group-III patients were first subjected to Munzij and Mushil therapy followed by the treatment with the combinations of the drug as in Group-I. In Group-IV, the patients were first subjected to Munzij and Mushil therapy followed by treatment given as in Group-II. Munzij and Mushil therapy was given for a period of three to four weeks followed by treatment with the oral and local drugs for 90 days.

In Group-I, out of the nine patients registered, three completed the study. One (33.3%) patient showed complete remission, whereas two (66.7%) patients showed no response. Two patients were under study. Four cases dropped out of the study.

In Group-II, out of the 41 patients registered, 15 completed the study. Ten (66.7%) patients showed complete remission, four (26.7%) partial remission whereas one (6.6%) patient showed no response. Eleven patients were under study whereas 15 patients dropped out of the study.

In Group-III, out of the eight patients registered, five completed the study. One (20.0%) patient showed complete remission, two (40.0%) partial remission and two (40.0%) patients showed no response. Three patients were under study.

In Group-IV, out of the 40 patients registered, 19 patients completed the study. Ten (52.6%) patients showed complete remission, seven (36.8%) partial remission whereas two (10.5%) patients showed no response. Ten patients were under study. Eleven patients dropped out of the study.

Study Conducted at RRIUM, Patna

Evaluation of therapeutic efficacy of the coded drugs UNIM-269, UNIM-270, UNIM-271 and UNIM-272 in patients of lymphatic filariasis

Therapeutic efficacy of a combination of four coded drugs UNIM-269, UNIM-270, UNIM-271 and UNIM-272 was evaluated in 25 patients. The drug UNIM-269 was given in the dose of two tablets (500 mg) each twice daily along with the Nutul of the drug UNIM-271 and local application of the drugs UNIM-270 and UNIM-272 on the affected parts at bed times. The treatment was given for a period of 120 days.

Out of the 25 patients registered, 20 (80.0%) were relieved and five (20.0%) partially relieved.

HUMMA-E-ASWAD (KALA AZAR/LEISHMANIASIS)

Studies Conducted at RRIUM, Patna

Preliminary screening of a combination of the coded drugs UNIM-180, UNIM-181, UNIM-182 and UNIM-183

Preliminary screening of a combination of the coded drugs UNIM-180, UNIM-181, UNIM-182 and UNIM-183 was done in 12 acute patients of Humma-e-Aswad (Kala Azar). The drug UNIM-180 was given in the dose of two tablets (500 mg each) twice daily along with 10 ml syrup of UNIM-181 twice daily. Besides, one capsule (125 mg each) of UNIM-182 and one capsule (500 mg each) of UNIM-183 were also given. The treatment was given for a period of 90 days.

Out of the 12 patients registered, eight completed the study. Two (25.0%) patients were relieved, four (57.8%) partially relieved whereas two (28.6%) patients showed no response. Four patients dropped out of the study.

ILTEHAB-E-KABID (INFECTIVE HEPATITIS)

Therapeutic studies were continued on patients of Iltehab-e-Kabid (Infective hepatitis) at CRIUM, Hyderabad and RRIUM, Chennai. During the reporting period following studies were conducted.

Study Conducted at CRIUM, Hyderabad

Preliminary screening of the coded drug UNIM-115

Preliminary screening of the coded drug UNIM-115 was done in 62 patients of asymptomatic hepatitis B carriers attending the OPD of Centre for Liver Diseases, Owasi Hospital, Deccan Medical College,

Hyderabad in collaboration with CRIUM, Hyderabad. Sixteen patients were positive for HBsAg, 26 were positive for Hepatitis E Virus (HEV) and 27 were positive for Hepatitis A Virus (HAV).

The patients were treated with the drug UNIM-115 in the dose of two tablets (500 mg each) thrice daily for a period of 180 days. All the 62 cases responded to the therapy. There was marked decrease in the levels of serum bilirubin and liver enzymes in hepatitis-E and hepatitis-A patients compared to hepatitis-B patients.

Study Conducted at RRIUM, Chennai

Comparative trial of the coded drugs UNIM-105 and UNIM-115

Therapeutic efficacy of the coded drugs UNIM-105 and UNIM-115 was compared in 79 patients of Iltehab-e-Kabid. The patients were treated in the IPD in two groups. In Group-I, the drug UNIM-105 was given in the dose of two tablets (500 mg each) twice daily whereas in Group-II the drug UNIM-115 was given in the same dose as in Group-I. In each group the treatment was given for a period of 30 to 60 days.

Out of the 41 patients registered in Group-I, 26 completed the study. All the patients showed complete subsidence in all the signs and symptoms of the disease and normalization of bio-chemical parameters including serum bilirubin levels, SGPT, SGOT, Serum alkaline phosphatase. Seven patients were under study whereas six patients dropped out of the study. Two patients were referred to other hospitals.

In Group-II, out of the 38 patients registered, 23 completed the study. All the patients were completely relieved. Three patients were under study whereas eight patients dropped out of the study. Four patients were referred to other hospitals.

No drug intolerance/toxicity was noted.

ZAHEER-E-MUZMIN (BACILLARY DYSENTERY)

Study Conducted at RRIUM, Kolkata

Evaluation of therapeutic efficacy of the coded drugs UNIM-1351 and UNIM-1352

Therapeutic efficacy of the coded drugs UNIM-1351 and UNIM-1352 was evaluated in 19 patients of Zaheer-e-Muzmin (Bacillary Dysentery). The drug UNIM-1351 and UNIM-1352 were given in the dose of 5 gm each in powdered form for a period of three weeks.

Out of the 19 patients registered, 16 completed the study. Three (18.7%) patients were completely relieved, one (6.3%) patient was partially relieved whereas 12 (75.0%) patients showed no response. Three patients dropped out of the study.

Study Conducted at CRU, Meerut

Comparative trial of the coded drugs UNIM-1351 and UNIM-1352

Therapeutic efficacy of the coded drugs UNIM-1351 and UNIM-1352 was compared in 49 patients of Zaheer-e-Muzmin (Bacillary Dysentery). The patients were divided in to two groups. In Group-I, UNIM-1351 was given in the dose of 5 gm twice daily whereas in Group-II, UNIM-1352 was given in the same dose as in Group-I. In both the groups, the treatment was given for a period of three weeks.

Out of the 25 patients registered in Group-I, seven (28.0%) were completely relieved and 18 (72.0%) partially relieved.

In Group-II, out of the 24 patients registered, six (25.0%) patients were completely relieved and 19 (75.0%) partially relieved.

No drug intolerance/toxicity was noted.

AMARZ-E-MAFASIL (MUSCULO-SKELETAL DISORDERS)

Clinical and therapeutic studies on Waja-ul-Mafasil (Rheumatoid arthritis) continued at CRIUM, Lucknow and RRIUM, Chennai, RRIUM, Srinagar and RRIUM, New Delhi. During the reporting period following studies were conducted.

Studies Conducted at CRIUM, Lucknow

(i) Evaluation of therapeutic efficacy of a combination of the coded drugs UNIM-301 +UNIM-304 with MM therapy

Therapeutic efficacy of a combination of the coded drugs UNIM-301+UNIM-304, given with the Munzij and Mushil therapy, was evaluated in 67 patients. The patients were first subjected to the Munzij and Mushil therapy followed by treatment with the oral and local drugs. The Munzij drug UNIM-308 was given in the dose of 150 ml in decoction form on empty stomach daily early in the morning for two to three weeks or till the maximum 'Nuzj' appeared in the urine followed by the Mushil drug UNIM-309 in the dose of 150 ml in decoction form once and the Tabreed drug UNIM-310 in the dose of 5 gm twice daily on alternate days for six days. After completion of the Munzij and Mushil therapy, the patients were given the oral drug UNIM-301 in the dose of three tablets (500 mg each) thrice daily along with the local application of the oil UNIM-304 on affected parts at bed time. The treatment was given for a period of 90 days excluding the Munzij and Mushil therapy period. The average Munzij and Mushil therapy period was 21 days.

Out of the 67 patients registered, 44 completed the study. All the patients were partially relieved. Subsidence in the clinical signs and symptoms was noted even during the MM therapy. Twenty-three patients dropped out of the study.

(ii) Evaluation of the therapeutic efficacy of the coded drugs UNIM-301 and UNIM-304 with Munzij and Mushil (MM) therapy in Tahajjur-e-Mafasil (Osteo-arthritis)

Therapeutic efficacy of a combination of the coded drugs UNIM-301 and UNIM-304 with Munzij and Mushil (MM) therapy was evaluated in 43 patients. The patients were first subjected to the Munzij and Mushil therapy followed by treatment with the local and oral drugs. The Munzij drug UNIM-308 was given in the dose of 150 ml in decoction form on empty stomach daily early in the morning for two to three weeks or till the maximum Nuzj appeared in the urine followed by the Mushil drug UNIM-309 in the dose of 150 ml once and the Tabreed drug UNIM-310 twice daily in the dose of 5 gm alternately for six days. After completion of the Munzij and Mushil therapy the oral drug UNIM-301 was given in the dose of three tablets (500 mg each) thrice daily along with the local application of the oil UNIM-304 at bed time. The treatment was given for a period of 90 days after completion of the Munzij and Mushil therapy.

Out of the 43 patients registered, 38 completed the study. Thirty-five (91.1%) patients responded to the treatment whereas three (7.9%) patients showed no response. Five patients dropped out of the study. In the responding cases there was significant improvement in the signs and symptoms such as pain, tenderness and swelling. Improvement in the morning stiffness has also been noted in the treated patients.

Studies Conducted at RRIUM, Chennai

(i) Preliminary screening of a combination of the coded drugs UNIM-312 and UNIM-304

Preliminary screening of a combination of the coded drugs UNIM-312 and UNIM-304 was done in 155 patients of Wajaul Mafasil (Rheumatoid Arthritis). The coded drug UNIM-312 was given in the dose of two tablets (500 mg each) twice daily along with the local application of the oil UNIM-304 on the affected parts at bed time. The treatment was given for a period of 90 days.

Out of the 155 patients registered, 64 completed the study. Thirty six (56.2%) patients were completely relieved, 25 (39.1%) partially relieved whereas three (4.7%) patients showed no response. Forty-nine patients were under study. Forty-two patients dropped out of the study.

The drugs showed significant effects in subsiding different signs and symptoms. Significant improvement in the parameters like walking time, hand grip strength, functional index, etc. was noted after treatment. The drugs were found effective both in seropositive and seronegative cases.

No drug intolerance/toxicity was noted. Longterm follow-up of the patients continued to note any relapse.

(ii) Preliminary screening of a combination of the coded drugs UNIM-301 and UNIM-305

Preliminary screening of a combination of the coded drugs UNIM-301 and UNIM-305 was done in 161 patients of Wajaul Mafasil (Rheumatoid Arthritis). The oral drug UNIM-301 was given in the

dose of two tablets (500 mg each) twice daily along with the hot fomentation of UNIM-305 at bed times. The treatment was given for a period of 90 days.

Out of the 161 patients registered, 69 completed the study. Thirty-nine (56.5%) patients were completely relieved, 25(36.2%) partially relieved whereas five (7.2%) patients showed no response. Fifty patients were under study. Forty-two patients dropped out of the study.

The drugs showed significant effects in subsiding different signs and symptoms. No drug intolerance/toxicity was noted. Longterm follow-up of the patients continued to note any relapse.

Study Conducted at RRIUM, Srinagar

Evaluation of therapeutic efficacy of a combination of the coded drugs UNIM-301 and UNIM-304

Therapeutic efficacy of a combination of the coded drugs UNIM-301 and UNIM-304 was evaluated in 45 patients of Wajaul Mafasil (Rheumatoid Arthritis). The drug UNIM-301 was given orally in the dose of two tablets (500mg each) twice daily along with the local application of the oil UNIM-304 at bed time. The treatment was given for a period of 90 days.

Out of the 45 patients registered, 30 completed the study. All these patients were patially relieved. Fifteen patients were under study.

No drug intolerance/toxicity was noted.

Study Conducted at RRIUM, New Delhi

Evaluation of therapeutic efficacy of the coded drugs UNIM-301, UNIM-302 and UNIM-304 with and without the Munzij and Mushil therapy

Therapeutic efficacy of a combination of the coded drugs UNIM-301, UNIM-302 and UNIM-304 with and without the Munzij and Mushil therapy was evaluated in 182 patients. The patients were divided into two groups. In Group-I, the patients were first subjected to the Munzij and Mushil therapy followed by treatment with the oral drug UNIM-301 and local application of the oil UNIM-304. In Group-II, the patients were treated with the oral and local drugs.

In Group-I, the Munzij drug UNIM-308 was given in the dose of 150 ml in decoction form on empty stomach early in the morning daily for a period of two to three weeks or till the maximum 'Nuzj' appeared in the urine followed by the Mushil drug UNIM-309 in the dose of 150 ml once and Tabreed drug UNIM-310 in the dose of 5 gm twice daily for six days alternately. After completion of the Munzij and Mushil therapy the oral drug UNIM-301 was given in the dose of two tablets twice daily. Besides, hot fomentation of the drug UNIM-302 and local application of the oil UNIM-304 was also given on the affected parts. The treatment was given for a period of 180 days.

In Group-I, out of the 87 patients registered, 36 completed the study. Fifteen (41.7%) patients showed complete remission. Twenty-one (58.3%) patients showed partial remission. Thirty-one patients were under study. Twenty patients dropped out of the study.

In Group-II, out of the 95 patients registered, 36 completed the study, Six (16.7%) patients showed complete remission and 21(61.1%) partial remission whereas eight (22.2%) patients showed no response. Forty-one patients were under study. Eighteen patients dropped out of the study.

WARM-E-LISSA (GINGIVITIS)

Study Conducted at CRIUM, Lucknow

Preliminary screening of the coded Unani dental powders UNIM-851, UNIM-852 and UNIM-853

Therapeutic efficacy of the coded Unani dental powders UNIM-851, UNIM-852 and UNIM-853 was evaluated in 24 patients of Warm-e-Lissa (Gingivitis) in three separate groups. In Group-I, patients were advised to apply the drug UNIM-851 on teeth and gums in the morning and at bed time. Whereas, in Group-II, the drug UNIM-852 was applied and in Group-III the drug UNIM-853 was applied as in Group-I. The patients were advised to use these powders for 30 days.

Out of the eight patients registered in Group-I, four completed the study. Two (50.0%) patients showed partial subsidence whereas two (50.0%) patients showed no response. Four patients dropped out of the study.

In Group-II, out of the eight patients registered, three completed the study. All the patients showed partial subsidence. Five patients dropped out the study.

In Group-III, out of the eight patients registered, two completed the study and showed partial subsidence. Six patients dropped out of the study.

ZAHAB-O-MAYIL ASNAN (TOOTH HYPERSENSITIVITY)

Study Conducted at CRIUM, Lucknow

Preliminary screening of the coded drugs UNIM-855 and UNIM-856

Therapeutic efficacy of the coded Unani dental powders UNIM-855 and UNIM-856 was evaluated in 37 patients of Zahab-o-Mayil Asnan (Tooth Hypersensitivity). The patients were divided into two groups. In Group-I, the patients were advised to apply the powdered drug UNIM-855 on teeth in the morning and at bed time whereas in Group-II, the drug UNIM-856 was applied as in Group-I. The patients were advised to use this powder for a period of 30 days.

Out of the 23 patients registered in Group-I, 13 completed the study. One (7.7%) patient was completely relieved, eight (61.5%) patients were partially relieved whereas four (30.8%) patients showed no response. Ten patients dropped out the study.

In Group-II, out of the 14 patients registered, nine completed the study. Two (22.2%) patients were completely relieved, five (55.5%) partially relieved whereas two (22.2%) patients showed no response. Five patients dropped out the study.

MARZ-E-ANF (DISEASE OF SINUS)

Therapeutic studies on Iltehab-e-Tajaweef-e-Anf (Sinusitis) continued at CRIUM, Hyderabad. During the reporting period following studies were conducted.

ILTEHAB-E-TAJAWEEF-E-ANF (SINUSITIS)

Studies Conducted at CRIUM, Hyderabad

(i) Comparative trial of two combinations of the coded drugs UNIM-051 + UNIM-053 and UNIM-052 + UNIM-053

Therapeutic efficacy of two combinations of the coded drugs UNIM-051+UNIM-053 and UNIM-052+UNIM-053 was compared in 43 patients of Iltehab-e-Tajaweef-e-Anf (Sinusitis). The patients were divided in to two groups. In Group-I, the drug UNIM-051 was given in the dose of 600 mg in two divided doses morning and evening on empty stomach. Besides, the patients were advised to take steam inhalation of UNIM-053 (prepared by adding two drops of UNIM-052 in one liter of hot water) at bed times. In Group-II, UNIM-052 was given in the dose of 1.5 gm twice daily on empty stomach along with the inhalation of UNIM-053 as in Group-I.

Out of the 23 patients registered in Group-I, 11 completed the study. Eight (72.7%) patients showed complete remission and three (27.3%) showed no response. Twelve patients dropped out of the study.

In Group-II, out of the 20 patients registered, seven completed the study. Three (42.8%) patients showed complete remission, two (28.6%) partial remission whereas two (28.6%) patients showed no response. Thirteen patients dropped out of the study.

(ii) Preliminary screening of a combination of the coded drugs UNIM-054 and UNIM-055 with and without Munzij and Mushil therapy

Preliminary screening of a combination of the coded drugs UNIM-054 and UNIM-055 with and without Munzij and Mushil therapy was done in 46 patients. The patients were divided into two groups.

In Group-I, the patients were first subjected to Munzij and Mushil therapy followed by treatment with the oral drug UNIM-054 and steam inhalation of UNIM-055 whereas in Group-II, only the oral drug UNIM-054 and steam inhalation of UNIM-055 was given for a period of two months.

Out of the 11 patients registered in Group-I, six (54.5%) patients were completely relieved, one (9.1%) patient was partially relieved whereas four (36.4%) patients showed no response.

In Group-II, out of the 35 patients registered, seven completed the study. Three (42.8%) patients were completely relieved, one (14.3%) patient was partially relieved whereas three (42.8%) patients showed no response. Ten patients were under study. Eighteen programme dropped out of the study.

ZIABETUS SUKKARI (DIABETES MELLITUS)

Clinical studies on patients of Ziabetus Sukkari (Diabetes mellitus) continued at CRIUM, Lucknow; RRIUM, Chennai; RRIUM, Aligarh; RRIUM, New Delhi and CRU, Allahabad. During the reporting period following studies were conducted.

Study Conducted at CRIUM, Lucknow

Comparative trial of the coded drugs UNIM-210 and UNIM-211

Therapeutic efficacy of the coded drugs UNIM-210 and UNIM-211 was compared in 42 patients of Ziabetus Sukkari (Non-insulin Dependent Diabetes Mellitus). The patients were divided in to two groups.

In Group-I, the coded drug UNIM-210 was given in the dose of four tablets (500 mg each) thrice daily whereas in Group-II, the drug UNIM-211 was given as in Group-I. The treatment was given for a period of 180 days.

Out of the 22 patients registered in Group-I, 10 completed the study. Two (20.0%) patients showed normal blood sugar levels whereas in eight (80.0%) patients there was no change in the blood sugar levels. However, reduction was observed in the symptoms. Twelve patients dropped out of the study.

Out of the 20 patients registered in Group-II, six completed the study. One (16.7%) patient showed normal blood sugar levels and five (83.3%) showed no response. There was no significant effect on the symptoms of the disease in the patients who showed no response. Fourteen patients dropped out of the study.

Study Conducted at RRIUM, Chennai

Comparative trial of the coded drugs UNIM-210 and UNIM-211

Comparative trial of the coded drugs UNIM-210 and UNIM-211 was conducted on 54 patients of Ziabetus Sukkari. The patients were divided into two groups.

In Group-I, UNIM-210 was given in the dose of two tablets (500 mg each) twice daily orally before meals whereas in Group-II, UNIM-211 was given in the same dose as in Group-I. In each group the treatment was given for a period of 180 days.

Out of the 27 patients registered in Group-I, 10 completed the study. Three (30.0%) patients showed partial control in the blood sugar levels whereas in seven (70.0%) patients no response of the drug was observed in reducing the symptoms or the blood sugar levels. Eight patients were under study. Nine patients dropped out of the study.

In Group-II, out of the 27 patients registered, 11 completed the study. Four (36.4%) patients showed normalization of the blood sugar levels, four (36.4%) partial control whereas three (27.2%) patients showed no response. Six patients were under study. Ten patients dropped out of the study.

Study Conducted at RRIUM, Aligarh

Comparative trial of the coded drugs UNIM-210 and UNIM-211

Therapeutic efficacy of the coded drugs UNIM-210 and UNIM-211 was compared in 63 non-insulin dependent Diabetes mellitus patients. The patients were divided in to two groups. In Group-I, the drug UNIM-210 was given in the dose of two tablets thrice daily whereas in Group-II, the drug UNIM-211 was given in the same dose as in Group-I. In each group, the treatment was given for a period of 80 days. Out of the 20 patients registered in Group-I, four (20.0%) showed complete control in the blood sugar levels, 11 (55.0%) showed partial control whereas five (25.0%) patients showed no response.

In Group-II, out of the eight patients registered, one (12.5%) patient showed complete control in the blood sugar levels, six (75.0%) showed partial control whereas one (12.5%) patient showed no response. Thirty-five patients dropped out of the study.

Study Conducted at RRIUM, New Delhi

Comparative trial of the coded drugs UNIM-210 and UNIM-211

Comparative trial of the coded drugs UNIM-210 and UNIM-211 was conducted on 62 patients of Ziaabetes Sukkari. The patients were divided into two groups. In Group-I, the drug UNIM-210 was given in the dose of two tablets (500 mg each) thrice daily whereas in Group-II, the drug UNIM-211 was given as in Group-I. In each group the treatment was given for a period of 180 days.

Out of the 62 patients registered, 12 (19.3%) showed complete normalization of the blood sugar levels, 32 (51.6%) showed partial control whereas 18 (29.1%) patients showed no response. In the responding cases, different symptoms of the disease subsided completely. Moreover, blood sugar levels also attained normal levels in such cases.

Study Conducted at CRU, Allahabad

Comparative evaluation of antidiabetic effect of the coded drugs UNIM-210, UNIM-211 and UNIM-212

Antidiabetic effect of the coded drugs UNIM-210, UNIM-211 and UNIM-212 was evaluated in 100 patients of Ziaabetes Sukkari. The patients were divided in to three groups. In Group-I, drug UNIM-210 was given in the dose of two tablets (500 mg each) thrice daily whereas in Group-II, the drug UNIM-211 was given as in Group-I. The drug UNIM-212 was given in Group-III in the dose of two tablets (500 mg each) as in Group-I. In each group, the treatment was given for a period of 180 days.

Out of the 35 patients registered in Group-I, 27 completed the study. Fifteen (55.6%) patients showed normal blood sugar levels, nine (33.3%) showed partial control whereas three (11.1%) patients showed no response. Five patients were under study. Three patients dropped out of the study.

In Group-II, out of the 34 patients registered, 24 completed the study. Six (25.0%) patients showed complete control in the blood sugar levels, 13 (54.2%) showed partial control whereas five (20.8%) patients showed no response. Five patients were under study. Five patients dropped out of the study.

In Group-III, out of the 31 patients registered, 17 completed the study. Seven (41.2%) patients showed partial control in the blood sugar levels whereas ten (58.8%) patients showed no response. Three patients were under study. Elven patients dropped out of the study.

SAMAN-E-MUFRIT (OBESITY)

Study Conducted at RRIUM, New Delhi

Preliminary screening of the coded drugs UNIM-1201 and (UNIM-1201+ UNIM-1202)

Preliminary screening of the coded drugs UNIM-1201 and UNIM-1201+ UNIM-1202 was conducted in 55 obese cases in two separate groups. In Group-I, the drug UNIM-1201 was given in the dose of one capsule 500 mg twice daily whereas in Group-II, the drug UNIM-1201 was given as in Group-I along with decoction of the drug UNIM-1202 (prepared by soaking 10 gm of the powdered drug in 150 ml of water) on empty stomach early in the morning. The treatment was given for a period of 180 days in both the groups.

Out of the 28 patients registered in Group-I, five completed the study. All the five cases showed significant reduction in the body weight as well as basal metabolic index (BMI). Fifteen patients were under study. Eight patients dropped out of the study.

Out of the 27 patients registered in Group-II, seven completed the study. All the seven patients showed partial response in reducing the body weight. Thirteen cases were under study. Seven cases dropped out of the study.

AMRAZ-E-QALB (CARDIAC DISORDERS)

Clinical studies on Kasrat-e-Shahmuddam (Hyperlipidemia) and Muzmin Zubeh-e-Sadaria Sabit (Chronic Stable Angina) continued at CRIUM, Hyderabad. During the reporting period following studies were conducted.

KASRAT-E-SHAHMUDDAM (HYPERLIPIDEMIA)

Studies Conducted at CRIUM, Hyderabad

Trial of the coded drug UNIM-763/A

Therapeutic efficacy of the coded drug UNIM-763/A was evaluated in seven patients of Kasrat-e-Shahmuddam (Hyperlipidemia). The drug UNIM-763/A was given in the dose of four capsules (500 mg each) twice daily after meals for a period of 90 days.

Out of the seven patients registered, three completed the study. Two (66.7%) patients showed significant response in reducing the serum cholesterol, LDH and serum triglyceride levels whereas one patient (33.3%) showed no response. Two patients were under study. Two patients dropped out of the study.

Muzmin Zubeh-e-Sadaria Sabit (Chronic Stable Angina)

Evaluation of therapeutic efficacy of a combination of the coded drugs UNIM-754, UNIM-755, UNIM-756 and UNIM-757

Therapeutic efficacy of a combination of the coded drugs UNIM-754, UNIM-755, UNIM-756 and UNIM-757 was evaluated in eight patients of Muzmin Zubeh-e-Sadaria Sabit (Chronic Stable Angina). The coded drug UNIM-754 was given in the dose of two tablets (500 mg each) twice daily along with 100 ml decoction of UNIM-755 early in the morning on empty stomach. Besides, three gm UNIM-756 was given twice daily after meals along with one capsule (500 mg) of UNIM-757 twice daily. The treatment was given for a period of 90 days.

Out of the eight patients registered, three completed the study. One (33.3%) patient showed good response and two (66.7%) showed partial response. One patient was under study. Four patients dropped out of the study.

Zaghtuddam Qawi (Essential Hypertension)

Therapeutic studies on Zaghtuddam Qawi (Essential Hypertension) continued at CRIUM, Hyderabad and RRIUM, New Delhi. During the reporting period, following studies were conducted.

Study Conducted at CRIUM, Hyderabad

Evaluation of the therapeutic efficacy of the coded drugs UNIM-902 and UNIM-903

Therapeutic efficacy of the coded drugs UNIM-902+UNIM-903 was evaluated in seven patients of Zaghtuddam Qawi (Essential Hypertension). The drug UNIM-902 was given in the dose of one tablet (500 mg) along with the drug UNIM-903 in the form of Majun (paste) in the dose of three grams twice daily. The treatment was given for a period of 90 days.

Out of the seven patients registered, one (14.3%) showed significant lowering effects within the normal range on both systolic and diastolic levels. In three (42.8%) patients there was reduction in the blood pressure levels. Three (42.8%) patients showed no response.

Study Conducted at RRIUM, New Delhi

Comparative therapeutic evaluation of the coded drugs UNIM-901, UNIM-902 and UNIM-903

Therapeutic efficacy of the coded drugs UNIM-901, UNIM-902 and UNIM-903 was compared in 44 patients of Zaghtuddam Qawi (Essential Hypertension) in three separate groups.

In Group-I, the drug UNIM-901 was given in the dose of one tablet (500 mg) twice daily whereas in Group-II, the drug UNIM-902 was given as in Group-I. In Group-III, the drug UNIM-903 was given in the form of Majun (paste) in the dose of five grams twice daily. In each group treatment was given for a period of two months.

Out of the 14 patients registered in Group-I, seven completed the study. Three (42.8%) patients showed significant effects in normalizing both diastolic and systolic levels besides subsiding all the symptoms of the disease. Four (57.2%) patients showed partial remission. Seven patients were under study.

Out of the 15 patients registered in Group-II, nine completed the study. Five (55.5%) patients showed significant effects in normalizing both systolic and diastolic levels besides subsiding all the symptoms of the disease. Four (44.4%) patients showed partial remission. Six patients were under study.

Out of the 15 patients registered in Group-III, eight completed the study. Four (50.0%) patients showed complete remission, three (37.5%) partial remission whereas one (12.5%) patient showed no response. Seven patients were under study.

BUFFA (DANDRUFF)

Study Conducted at CRU, Meerut

Comparative trial of the coded drugs UNIM-1451 + UNIM-1452 and UNIM-1451 + UNIM-1453

Therapeutic efficacy of the coded drugs UNIM-1451+ UNIM-1452 and UNIM-1451+UNIM-1453 was compared in 128 patients of Buffa (Dandruff). The patients were divided into two groups. In Group-I, the drug UNIM-1451 mixed with the drug UNIM-1453 was applied locally on the scalp whereas in Group-II, the drug UNIM-1451 mixed with the drug UNIM-1452 were applied locally as in Group-I. The drugs were used for a period of three weeks.

Out of the 64 patients registered in Group-I, 56 completed the study. Forty-eight (85.7%) showed complete remission and eight (14.3%) patients showed partial remission. Eight patients dropped out of the study.

Out of the 64 patients registered in Group-II, 55 completed the study. Forty (72.7%) patients showed complete remission and 15 (27.3%) showed partial remission. Nine patients dropped out of the study.

COSMETO-THERAPEUTIC TRIALS

PREMATURE GRAYING OF HAIR

Study Conducted at CRIUM, Lucknow

Preliminary screening of the coded drugs CT-I and CT-II

Preliminary screening of the coded drugs CT-I and CT-II was done in 22 subjects of premature graying of hair. The subjects were divided into two groups. In Group-I, the subjects were advised



to apply the oils CT-I thoroughly on the scalp at bed times whereas in Group-II, the subjects were advised to apply the drugs CT-II as in Group-I. In both the groups application was made twice weekly for a period of three months.

Out of the four subjects registered in Group-I, one subject completed the study and showed partial response. Three subjects dropped out of the study.

Out of the 18 subjects registered in Group-II, eight completed the study. One (12.5%) subject showed good response whereas seven (87.5%) subjects showed poor response.

PIMPLES

Study Conducted at CRIUM, Lucknow

Preliminary screening of the coded drugs CT-VI+CT-VIA and CT-VII+CT-VIIA

Preliminary screening of the coded drugs CT-VI+ CT-VIA and CT-VII+ CT-VIIA was conducted in 26 subjects in two groups. In Group-I, the drugs CT-VI+ CT-VIA were applied locally whereas in Group-II, the drugs CT-VII+ CT-VIIA were applied locally on the face. In each group, the subjects were advised to apply it for a period of three months.

Out of the seven subjects registered in Group-I, six completed the study. One (16.6%) subject showed good response, three (50.0%) showed partial response whereas two (33.3%) subjects showed no response. One subject dropped out of the study.

Out of the 19 subjects registered in Group-II, 11 completed the study. One (9.1%) subject showed good response, seven (63.6%) showed partial response where as three (27.3%) subjects showed no response. Eight subjects dropped out of the study.

DARKNESS OF SKIN

Study Conducted at CRIUM, Lucknow

Preliminary screening of the coded drug CT-XV

Preliminary screening of the coded drug CT-XV was conducted in four cases of dark complexion. The drug CT-XV was applied locally on the face daily for a period of 30 days.

Out of four cases registered, two completed the study and showed partial fairness in the complexion. Two patients dropped out of the study.

SKIN CRACK

Study Conducted at RRIUM, Chennai

Preliminary screening of the coded drug CT-XVI and CT-XVII

Preliminary screening of the coded drugs CT-XVI and CT-XVII was conducted in 26 subjects. The subjects were divided in to two groups. In Group-I, the drug CT-XVI was applied locally in the form

of paste daily at bed times whereas in Group-II, the subjects were advised to apply the drug CT-XVII daily at bed times as in Group-I. In each group the subjects were advised to apply it for 30 days.

Out of the 13 subjects registered in Group-I, seven completed the study and showed partial response. Six patients dropped out of the study.

In Group-II, out of the 13 subjects registered, eight completed the study and showed partial response. Five patients dropped out of the study.

PHARMACOLOGICAL RESEARCH

Studies Conducted at RRIUM, Aligarh

The coded drug UNIM-211 a compound Unani formulation clinically evaluated for its antidiabetic activity at different clinical research centers of the Council, was investigated for acute toxicity, sub-acute toxicity and pentobarbitone sleeping time.

Acute toxicity study of the aqueous extract of UNIM-211 showed that the animals could well tolerate the extract upto 10g/kg orally. The animals remained normal as there was no untoward signs and symptoms in 24 hours of observation period and there were no overnight mortality.

Sub-acute toxicity study was conducted in albino rats. Animals were divided into three groups. One group served as control, while others were given 1g/kg and 3g/kg of UNIM-211 for a period of 28 days. On the 29th day, the blood samples were collected from retro-orbital vein for the study of liver function test, renal function test, lipid profile studies and haematological study. Organ to body weight ratios of liver, heart, kidney and spleen were also recorded.

The result of these studies showed that the four-week treatment with the drug extract did not produce any significant change on the liver function and lipid profile but significant increase in blood urea level was observed at both the doses of the drug. There was no significant increase in the serum triglyceride level at any dose level. The organ to body weight ratio of liver, heart and spleen remained unaltered, but a significant increase in the organ to body weight ratio of kidney at the dose of 3g/kg was observed. Haematological studies revealed no significant change in haemoglobin, ESR, but a significant change in TLC, and DLC levels at 3g/kg dose was observed.

Pentobarbitone sleeping time study revealed no significant change in the sleeping time in groups of mice treated with 1g and 3g/kg of drug extract.

It was concluded from the above studies that the drug was quite safe except for some adverse effect on kidney.

Study Conducted at RRIUM, Srinagar

Sub-acute Toxicity Studies

ITA-06: It is a combined mixture of *Lavendulla officinalis* (flower spikes) and seeds of *Piper nigrum*, as per the ratio provided by the Council. The plant material was collected from IIIM field station,

Bonera, Pulwama and processed at the Institute's Drug Standardization Research Unit (DSRU) Laboratory.

Animal studies were conducted on female and male albino rats of wistar strain separately. Animals were divided into four sets of seven animals each.

- Set I – Control male
- Set II – Control female
- Set III – Experimental male
- Set IV – Experimental female

In set III and IV, ITA-05 dissolved in distilled water was given to the rats orally for three months in the dose of 20 mg/kg body weight. Experimental rats did not show any untoward symptoms. They remained healthy and gained weight normally as was evident from the weight chart maintained. The rats were sacrificed after three months and liver, brain and kidney were removed. Blood was collected from the neck vein. Different biochemical parameters viz GOT, GPT and Alkaline phosphatase, along with Protein, Albumin, Urea, BUN, Sugar and Hb were studied in Serum, Liver, Brain and Kidney of treated as well as control animals. The results obtained were analyzed statistically and it was found that results were not significantly different from the control values.

ITA-05: It is a combined mixture of *Iris ensata* (rhizome) and seeds of *Piper nigrum* (kalimirch), as per the ratio provided by the Council. The plant material was collected from IIIM field station, Bonera, Pulwama and processed at the DSRU Lab.

Animal studies were conducted on female albino rats of wistar strain. Animals were divided into two sets of seven animals each.

- Set I – Control female
- Set II – Experimental female

In set II, ITA-05 dissolved in distilled water was given to the rats orally for three months in the dose of 20 mg/kg body weight. Experimental rats did not show any untoward symptoms. They remained healthy and gained weight normally as was evident from the weight chart maintained. The rats were sacrificed after three months and liver, brain and kidney were removed. Blood was collected from the neck vein. Different biochemical parameters viz GOT, GPT and Alkaline phosphatase, along with Protein, Albumin, Urea, BUN, Sugar and Hb were studied in Serum, Liver, Brain and Kidney of treated as well as control animals. The results obtained were analyzed statistically and it was found that results were not significantly different from the control values.

RESEARCH ON FUNDAMENTAL ASPECTS OF UNANI MEDICINE

THEORY OF AKHLAT (HUMOURS) PROJECT

The objective of the project is to test scientifically the concept of Akhlat (Humors) and its relevance to the states of health and diseases. This project is being undertaken at the Central Research Institute of Unani Medicine (CRIUM), Hyderabad.

The project aims at studying the clinical, physiological, pathological and bio-chemical parameters of subjects of different temperaments and establishing scientifically the correlation between them. During the reporting period assessment of temperament of 3804 patients attending the OPD of CRIUM, Hyderabad was done. These included 3648 patients of Bars (Vitiligo), 61 of Iltehab-e-Tajaweef-e-Anf (Sinusitis), five of Muzmin Zube-e-Sadariya Sabit (Chronic stable angina), five of Kasrat-e-Shahmuddam (Hyperlipidemia), one patient of Ziabetes Sukkari (Diabetes mellitus), 38 patients of Daus Sadaf (Psoriasis), two of hepatitis-B and 44 under galactogogue study. In these patients susceptibility to diseases in relation to different temperaments was studied. An interim analysis of the data revealed that patients of Damawi temperament (49.2%) were more susceptible to Bars (Vitiligo) followed by those of Balghami temperament (47.6%), Safravi (3.2%) and Saudavi (nil). Similarly, persons of Balghami temperament (59%) were most susceptible to Iltehab-e-Tajaweef-e-Anf (Sinusitis). Persons of Damvi temperament were more susceptible to essential hypertension. Persons of Damvi temperament were more prone to suffer from Chronic Stable Angina.

Physiological studies were also conducted in patients of essential hypertension and Diabetes mellitus where a number of physiological parameters such as Pulmonary function, Bicycle ergometry, Electrocardiography, Anthropometric measurements, Hand grip and other related tests such as, Skin fold thickness, Lung Function, Blood Velocity were studied. Response to the treatment in relation to the temperament of the patients correlating the clinical and physiological parameters were also studied.

VALIDATION OF REGIMENTAL THERAPIES OF UNANI MEDICINE

Apart from the simple physical and clinical methods to treat the diseases, Unani Medicine also offers regimental therapies such as Hajamat (cupping), Qai (vomiting), Riyazat (exercise), Taleeq (leeching) etc. for certain conditions. During the reporting period documentation of four regimental therapies – Riyazat (Exercise), Dalak (Massage), Hajamat (Cupping) and Kai (Cauterization) – undertaken. The Council plans to scientifically establish the relevance of these therapies in successfully combating various chronic diseases. Scientific validation of Hajamat (Cupping) was done at RRIUM, New Delhi in patients of Wajaul Mafasil affecting different joints. During the reporting period beneficial effects of this therapy were evaluated in 40 patients of chronic nature having different joints affected by the disease. Three consecutive applications of cupping were done at regular intervals.

Out of the 40 patients registered, 27(67.5%) responded to the therapy. In these patients there was significant reduction in the tenderness and swelling. Pain also subsided significantly. Thirteen patients showed no response. This therapy was found to be effective in diverting the morbid material from the affected joints thus reducing tenderness and swelling.

RESEARCH-ORIENTED HEALTH PROGRAMMES

GENERAL OUT-PATIENT DEPARTMENT (GOPD) PROGRAMME

The GOPD programme of the Council aims at conducting observational research on different new Unani therapeutics with a view to validating their efficacy. The Council developed a kit of 24 drugs

prepared from very commonly available drugs/household condiments for treatment of common/seasonal diseases. These drugs are being prescribed in the treatment of various diseases in the patients attending the General OPD at the Council's centres. During the reporting period, the GOPD programme continued at 16 centres of the Council. These included Central Research Institute of Unani Medicine (CRIUM), Hyderabad; CRIUM, Lucknow; Regional Research Institute of Unani Medicine (RRIUM), Chennai; RRIUM, Bhadrak; RRIUM, Patna; RRIUM, Aligarh; RRIUM, Srinagar; RRIUM, Mumbai; RRIUM, Kolkata; RRIUM, New Delhi; Regional Research Centre of Unani Medicine (RRCUM), Silchar; RRCUM, Allahabad; Clinical Research Unit (CRU), Burhanpur; CRU, Meerut; CRU, Edathala and CRU, Bangaluru.

During the reporting period 140350 new patients were registered. The clinical attendance of old patients was 235099 and the overall total clinical attendance of new and old patients in these OPDs was 375449. The drugs prescribed in the treatment of different disease conditions included the following.

Names of Kit Medicines	Indications	Form	Dosage	Duration of Treatment	Rate of Efficacy
1. Capsule Mubarak	Humma (Pyrexia)	Capsule (500 mg)	2 Capsules thrice a day	3-5 days	80%
2. Capsule Nazla	Nazla (Cattra)	Capsule (500 mg)	2 Capsules thrice a day	3-5 days	80%
3. Capsule Tinkar	Qabz Yaseer (Constipation)	Capsule (500 mg)	2 Capsules thrice a day	3 days	90%
4. Capsule Habis	Nazfuddam (Haemorrhage-Epistaxis) Nakseer (Ruaf)	Capsule (250 mg)	2 Capsules twice a day	3-5 days	80%
5. Capsule Hudar	Wajaul Mafasil (Rheumatoid arthritis)	Capsule (125 mg)	2 Capsules twice a day	3 weeks	70%
6. Capsule Siras	Suda (Headache)	Capsule (500 mg)	1 to 2 Capsules 3 times a day	2 days	70%
7. Capsule Musaffi	Fasad-ud-Dam (Impurity of blood)	Capsule (500 mg)	1 to 2 Capsules 3 times a day	2-3 weeks	70%
8. Qurs Shifa	Waja-ul-Azlat and Humma (Pyrexia)	Tablet (125 mg)	1 to 2 Tablets thrice a day	1-2 days	70%

Names of Kit Medicines	Indications	Form	Dosage	Duration of Treatment	Rate of Efficacy
9. Qurs Surfa	Sual (Cough)	Tablet (500 mg)	2 Tablets thrice a day	2-5 days	70-80%
10. Qurs Bel	Ishal (Diarrhoea)and Zaheer (Dysentery)	Tablet (500 mg)	2 Tablets thrice a day	2-3 days 2-3 weeks	90%
11. Qurs Zahar Mohra	Su-e-Hazm (Indigestion)	Tablet (250 mg)	2 Tablets thrice a day	2-3 days	70%
12. Qurs Haiza	Haiza (Cholera)	Tablet (250 mg)	2 Tablets thrice a day	3-5 days	80%
13. Qurs Mafasil	Waja-ul-Mafasil (Rheumatoid arthritis)	Tablet (500 mg)	2 Tablets twice a day	3-4 weeks	70%
14. Qurs Musaffi	Jarb-o-Hikkah (Scabies)	Tablet (500 mg)	2 Tablets thrice a day	1-2 weeks	70%
15. Habb-e-Taskeen	Waja-ul-Badan (Boady-ache)	Pill (125 mg)	1 to 2 pills in a day	2 days	90%
16. Sufoof-e-Hazim	Su-e-Hazm (Indigestion)	Powder	2 to 6 gm. twice a day	1 week	70%
17. Zuroor-e-Qula	Qula (Stomatitis)	Powder	Sprinkle a pinch on tongue when required	1-2 weeks	90%
18. Marham-e-Kharish	Jarb-o-Hikkah (Scabies)	Ointment	Apply locally	one week	70%
19. Marham-e-Ral	Busoor-o-Khuraj (Boils & Fruncles)	Ointment	Apply locally	1-2 weeks	80%
20. Arq-e-Ajeeb	Waja-ul-Meda (Spasmodic pain), Haiza (Cholera) and Suda (Headache)	Liquid	2 to 5 drops in sufficient water. In case of insect bite and headache, a small quantity of liquid may be applied on the affected part.	one day	90%

Names of Kit Medicines	Indications	Form	Dosage	Duration of Treatment	Rate of Efficacy
21. Raughan-e-Kamila	Jarb-o-Hikkah, (Boil & Scabies) and Sailan-ul-Uzn (Otorrhoea)	Oil	External use only. In case of otorrhoea instil 2-3 drops in the ear twice a day	One week	80%
22. Raughan-e-Surkh	Waja-ul-Mafasil (Rheumatoid arthritis)	Oil	For external use only	3-4 weeks	80%
23. Qutoor-e-Ramad	Ramad (Conjunctivitis)	Liquid	Instil 2 drops in the eye	2-3 days	90%
24. Sunoon Katha	Waja-ul-Asnan (Toothache)	Powder	Apply as a tooth powder	3-4 days	80%

These drugs are not only being prescribed in the treatment of common ailments at the Council's GOPDs but are now also being commercially exploited through National Research Development Corporation (NRDC) for use in some of the State Government Hospitals. Out of this commercial exploitation of these drugs the Council is earning royalty.

MOBILE CLINICAL RESEARCH PROGRAMME

The mobile clinical research programme of the Council aims at improving the health status of the population in rural areas/urban slums and pockets inhabited by under privileged sections of the society. Under this programme such rural areas/urban slums and pockets that are predominantly inhabited by Scheduled Caste/Scheduled Tribe population with no medical facility are covered. The Council's physicians associated with the Mobile Clinical Research Programme visit the adopted pockets at regular intervals and provides medicare through Unani Medicine to the suffering population nearer to their door steps. Besides, health awareness is created among the population under coverage particularly the females through health lectures by the visiting physicians and social worker on the preventive, promotive and curative health aspects.

This programme continued at 10 centres of the Council including CRIUM, Hyderabad; CRIUM, Lucknow; RRIUM, Chennai; RRIUM, Bhadrak; RRIUM, Patna; RRIUM, Aligarh; RRIUM, Mumbai; RRIUM, New Delhi; RRCUM, Allahabad and CRU, Burhanpur.

During the reporting period a total population of over four lakh, including 80000 people belonging to Scheduled Castes and 20000 people belonging to Scheduled Tribes, was covered. A total of 679 mobile visits were made to these adopted pockets to conduct the mobile OPDs. A total of 14120 new patients were registered. The total clinical attendance was 28250. Research cases of Filariasis, Kala

Azar, Rheumatoid Arthritis, Vitiligo, Bronchial Asthma were referred to the Council's research centres. In the treatment of different diseases in the mobile OPDs, the kit medicines developed by the Council proved to be an effective tool in the management of common/seasonal disorders.

SCHOOL HEALTH PROGRAMME

School health programme is another important component of the clinical research programme. The objective of this programme is to raise the health status of school children and reduce the morbidity rate among school children through health care and health education. Under this programme, some of the primary/secondary schools falling under coverage of mobile wings are adopted. A baseline health check-up of school children is conducted and those found suffering from any ailment are treated with the Unani kit medicines. Thereafter, health education is imparted to the school children through lectures on different preventive, promotive and curative health aspects. The children are also educated about the potentialities of the commonly available plants in their vicinity for the management of different diseases. Specific lectures are given particularly on oral hygiene, cleanliness of body and environment, safe drinking water, nutrition, balanced diets etc.

During the reporting period, this programme continued at CRIUM, Hyderabad; RRIUM, Chennai; RRIUM, Bhadrak; RRIUM, Patna; RRIUM, Aligarh; RRIUM, Mumbai and CRU, Burhanpur. The Council's team of physicians visited 24 schools that were adopted under the School Health Programme. A total of 114 visits were made to these schools. Four-thousand two hundred and sixty school children were checked up. Out of these 3112 patients were treated for different ailments. This programme proved very effective in creating health awareness not only among the school children but also the message went to the family through the child. The most common diseases found among the school children included skin infections, helminthiasis, otorrhoea, cough and cold, conjunctivitis and dental carries. Significant reduction in the incidence of these diseases among the children was observed during the reporting period.

UNANI TREATMENT-CUM-SPECIALITY CENTRE AT DR. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI

A Unani treatment centre was opened at the Capital's Dr. Ram Manohar Lohia Hospital on January 14, 1998. The centre, run by the Central Council for Research in Unani Medicine (CCRUM), was set up by the then Department of Indian Systems of Medicine & Homoeopathy (ISM&H) of the Union Ministry of Health & Family Welfare in accordance with a decision of the Ministry to introduce Indian Systems of Medicine in the Central Government hospitals in the city.

Besides the general out patient department (GOPD) facilities, the centre also provides services of leading specialists of Unani Medicine for the treatment of some selected disorders like vitiligo, eczema, psoriasis, rheumatoid arthritis, bronchial asthma, sinusitis, infective hepatitis, diabetes mellitus, etc. for which the Unani system offers successful treatment.

During the reporting period, a total of 22150 new patients were registered. The clinical attendance of old patients was 28069. The total clinical attendance was 50219. A large number of patients were referred to from modern hospitals particularly for treatment of chronic ailments such as Sinusitis, Infective hepatitis, Rheumatoid arthritis and Osteo-arthritis, Diabetes mellitus and Hypertension besides the cases of common/seasonal ailments. For the treatment of different diseases the Council's kit medicines and also classical medicines were prescribed. Senior citizens were the main beneficiary. Apart from providing the medicare, counseling of patients particularly the senior citizens was also done to improve the physical and mental health among these patients.

FACILITIES UNDER GENDER COMPONENT PLAN FOR FEMALES

The Council continued research and treatment facilities for women under gender component plan. Treatment facilities were made available at all clinical centres of the Council for women. Besides, female patients in the pockets adopted under mobile clinical research programme were also treated by the physicians in the mobile OPD. During the reporting period a total of 82350 female patients were registered at different centres of the Council. Besides, research studies on diseases specific to women including leucorrhoea, menorrhagia, dysmenorrhoea and anaemia also continued. In these cases efficacy of the drugs developed by the Council was validated.

ACTIVITY OF THE COUNCIL IN THE NORTH EASTERN REGION

The only centre of the Council in the North-Eastern region, the Regional Research Centre of Unani Medicine, Silchar with extension at Karimganj continued functioning of the OPD located at S. M. Dev Civil Hospital, Silchar and Masjid Raod, Karimganj. These centres continued the GOPD programme and validation trials of kit medicines developed by the Council. During the reporting period 6250 patients were registered. The total clinical attendance at these centres was 14750. Majority of them suffered from the commonly occurring diseases like fever, diarrhoea, dysentery, gastritis and joints pain.

COLLABORATIONS

Besides, intramural research projects allotted to different centres, the Council is also working in collaboration with other scientific organisations in different areas of research. During the reporting period following collaborative studies continued.

(i) Development of bio-active molecules of Unani formulations in collaboration with the CSIR

The Council had signed a Memorandum of Understanding (MoU) with the Council of Scientific and Industrial Research (CSIR) in March 2000 that was renewed in the year 2005 to work with the CSIR through its various laboratories in collaborative manner. The MoU aimed to develop viable bio-active

molecules and to establish standardization procedure and improve processing of Unani formulations. During the reporting period collaborative studies continued in various laboratories of the CSIR on 235 extracts prepared from 83 Unani drugs supplied by the Council.

(ii) Collaborative study in Bronchial Asthma at Vallabh Bhai Patel Chest Institute, New Delhi

The Council signed another MoU with Vallabh Bhai Patel Chest Institute, New Delhi in the year 2004 to undertake collaborative study on Bronchial Asthma. Under the aegis of this dispensation efficacy of a coded Unani polyherbal formulation UNIM-352 was evaluated in patients of Bronchial Asthma attending the OPD of the Vallabh Bhai Patel Chest Institute, New Delhi fulfilling the criteria. The trial was a randomized single blind design, placebo controlled study. Both the drug and the placebo were provided by the Council in a codified form. During the reporting period follow-up studies on 40 patients continued in order to observe the reduction in the frequency and severity of the bronchial attack as well as subsiding the symptoms. Post-trial improvement in the quality of life was also noted. An interim analysis of data shows that there was improvement in clinical symptoms, tightness in chest and difficulty in breathing in the patients receiving the test drug as compared to the placebo. Spirometry data showed that the Forced Expiratory Volume (FEV1) was more in the test drug treated group than in the placebo. The frequency of use of emergency bronchodilators viz. levosalbutamol inhaler, were appreciably lower in the test drug group as compared to the placebo group. Biochemical assay of blood samples showed that liver function test parameters like SGOT, SGPT, bilirubin, alkaline phosphatase, and kidney function markers like urea and creatinine levels were not significantly different in test drug and placebo treated groups. No other general parameter like body weight, food intake, body temperature, etc., were influenced to any appreciable extent by UNIM-352 across both groups of asthma patients. This indicated good tolerability of UNIM -352 in this study.

Taken together, the data of the ongoing pilot study revealed that UNIM-352 had potential effects of the existing anti-asthma drug therapy. It is safe also as no untoward effects were reported.

(iii) Collaborative study in Infective hepatitis at Lady Hardinge Medical College, New Delhi

The Council signed yet another MoU in the year 2007 with the Department of Pharmacology, Lady Hardinge Medical College, New Delhi for collaborative studies in Infective hepatitis. Controlled trial of a Unani formulation UNIM-1000 with the standard drug in the Hepatitis-C Virus (HCV) positive patients attending the OPD of Lady Hardinge Medical College, New Delhi. During the reporting period long term follow-up of 66 subjects that were enrolled in the previous years continued in order to observe the subsidence in the clinical signs and symptoms as well as normalization of bio-chemical parameters besides studying the effect of the drugs on viral load.

(iv) Collaborative study in acute viral hepatitis and duodenal ulcer at Deccan Medical College, Hyderabad

The Council signed an MoU with Centre of Liver Disease and Diagnostics, Deccan College of Medical Sciences and Allied Hospitals, Hyderabad in the year 2006 to undertake collaborative studies on acute viral hepatitis and duodenal ulcer. Under this MoU, trial of a coded Unani polyherbal formulation UNIM-115 continued in acute viral hepatitis patients. During the reporting period 69 cases were enrolled whereas three cases continued from the previous year bringing a total of 72 cases studied during the reporting period. Out of these, 62 completed the trial. Two cases were under study whereas eight cases dropped out. All the 62 cases showed significant improvement in the clinical signs and symptoms and normalization of different pathological and biological parameters.

Clinical trial of a coded polyherbal Unani formulation UNIM-701 continued in cases of duodenal ulcer attending the OPD of the Owaisi Hospital and Research Centre. During the reporting period 27 new cases were registered whereas four cases continued from the previous year bringing a total of 31 cases studied during the reporting period. Out of the 31 cases, 28 completed the trial, two cases were under study and one case dropped out of the study. Fifteen (53.6%) cases showed complete remission, 12 (42.8%) showed partial remission and one (3.6%) cases did not respond to the treatment. No drug toxicity was observed.

EXTRA-MURAL RESEARCH SCHEME

The Department of AYUSH has introduced a Scheme for Extra-mural Research (EMR) in addition to the intra-mural research undertaken by the Research Councils for Ayurveda and Siddha, Unani, Homoeopathy and Yoga and Naturopathy set up by the Ministry of Health and Family Welfare three decades ago. The off-take and output from this scheme has so far been limited and has yet to meet the standards for scientific enquiry and outcome effectively. The Department has taken up a series of programs/interventions wherein evidence based support for the efficacy claims is needed. Safety, quality control and consistency of products are also very much required. The objectives of the EMR scheme are:-

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

- To develop the potential Human Resource in AYUSH systems, especially to inculcate scientific aptitude and expertise relating to AYUSH systems;
- To develop joint research venture among the AYUSH Department and other Organizations/Institutes.

The EMR scheme was later transferred to respective research Councils and these Councils were declared as Directorate of EMR schemes. For the EMR schemes related to Unani Medicine, Central Council for Research in Unani Medicine is designated secretariat for evaluation of projects and their monitoring whereas the financial part is taken care of by the Department of AYUSH.

During 2008-09, more than a hundred projects were evaluated and revised and out of them the following were approved by the Screening Committee chaired by Secretary, Department of AYUSH for financial support.

S.No.	Title of the Project	Investigator and Institutions
1	Therapeutic and prophylactic potential of herbal drug in protection of chronic heart failure	Dr. Mohd. Faheem V.P. Chest Institute, New Delhi
2	Antileishmanial activity of Unani drugs against <i>Leishmania donovani</i> <i>in vitro</i> and <i>in vivo</i>	Dr. Farhat Afrin Jamia Hamdard, New Delhi
3	Development of quality standards and clinical evaluation of a herbomineral formulation used in urolethiasis	Dr. S.M. Arif Zaidi Jamia Hamdard, New Delhi
4	An experimental evaluation of the anti-atherogenic effect of selected Unani medicine in experimentally induced hypercholesterolemic rats.	Dr. D.S. Arya AIIMS, New Delhi
5	Development and evaluation of Sugar free capsule dosage form of some Khamiras used in cardiac disorders	Dr. Sayeed Ahmad Jamia Hamdard, New Delhi
6	Development and evaluation of a novel neon emulsion gel for a Topical anti-Rheumatic Unani formulation	Dr. Farhan Jalees Jamia Hamdard, New Delhi
7	Scientific validation of Mizaj-e-advia (Temperament of Drugs)	Prof. Anis A. Ansari A.K. Tibbia College, AMU, Aligarh

S.No.	Title of the Project	Investigator and Institutions
8	Evaluation of Anti diabetic compounds from Cyanobacteria	Dr. Tasneem Fatima, Jamia Millia Islamia New Delhi
9	Pharmacological evaluation and safety profile of Unani antioxidant and Hepatoprotective drugs	Dr. M. Mujeeb Jamia Hamdard, New Delhi
10	To study the bronchodilator and anti-inflammatory property of <i>Nigella sativa</i> in patients of bronchial asthma.	Dr. M. Shamim JN Medical College, AMU, Aligarh
11	Study of Nabz (Radial Pulse) wave Form and its physiological variations in different temperaments by a self-designed pulse wage detection module	Dr. F. S. Sheerani Department of Kulliyat, AK Tibbia College, Aligarh

The following projects completed during the year 2008-09.

Title of the project	Evaluation of antiproliferative activity of Unani drugs in cancer prevention-A mechanistic approach
Institution	Jamia Hamdard, Hamdard Nagar, New Delhi
Summary	<p>All the plants <i>Foeniculum vulgare</i>, <i>Glycyrrhiza glabra</i>, <i>Picrorhiza kurroa</i> and <i>Cuscuta reflexa</i> were extracted to get the methanolic extract. The extracts were assessed for their efficacies <i>in-vitro</i> and <i>in-vivo</i>. All the four drugs were evaluated for their <i>in-vitro</i> efficacies against lipid peroxidation and cytochrome P450 activity. All the drugs were found to inhibit lipid peroxidation induced by iron/ascorbate generated ROS. The drugs also inhibited cyt. P450 activity <i>in vitro</i> in rat liver microsomes. Both the parameters indicate that the drugs are effective against ROS induced oxidative damage <i>in vitro</i> and suppression of cyt. P450 may play a role against bioactivation of carcinogens in <i>in vitro</i>. This can be hypothesized that these drugs may have similar role in <i>in vivo</i> against chemically induced oxidative damage and carcinogenesis.</p> <p>In tumour induction studies there was significant reduction of tumour incidences in the liver and kidney of wistar rats. Findings suggest that</p>

Title of the project	the drugs show protective effects in short term and long term studies in rodents and it gives a path to extend the study to more elaborated level.
Institution	A study in relation to blood groups and four temperaments.
Summary	Jamia Hamdard, Hamdard Nagar, New Delhi
Summary	From the study of temperament, blood groups and IgG and IgM levels of 600 volunteers. It was found that most abundant Mizaj (temperament) distributed in Indian geographical condition is billious following the sanguine, phlegmatic and melancholic, respectively. Studying their blood groups, it was found that blood group B positive is most prevalent followed by O positive, A positive and AB negative, respectively. A negative and AB-ve blood groups are rare. Billious (hot & dry) temperament is prevalent in the individuals of B+ve blood groups (54.4%) and sanguine (hot & wet) temperament is common in the individuals having blood group O+ve (35.12%). This study provides the pattern of temperament frequency in individuals having various blood groups and shows that these patterns are different from each other. As far as the IgM and IgG level is concern, comparatively raised levels of IgM (162.34±81.25) and IgG (1064.21±438.26) in volunteers of sanguine temperament can be correlated with the Unani concept that the people with sanguine temperament are less prone to diseases and are comparatively healthier.

The following projects were in progress during the reporting period.

Title of the Project	Development of SCAR Markers (DNA finger prints) for Authentication of Medicinal Herbs used in Unani Formulations
Institutions	Centre for transgenic plant development, Deptt. of Biotechnology, Jamia Hamdard, New Delhi
Objectives	<ol style="list-style-type: none"> 1. Development of SCAR markers for medicinal herbs used in Unani formulations. 2. Validation of SCAR markers developed for authentication of raw materials used in Unani formulations.

Title of the Project	Clinical trial of a Unani formulation in the patients of menorrhagia in reproduction age group.
Institutions	Department of Qabalat-wa-Amraz-e-Niswan, A.K. Tibbia Colleage, AMU, Aligarh
Objectives	<ol style="list-style-type: none"> 1. To find out the cause of Menorrhagia in the females of reproductive age. 2. To treat the patients with selected Unani drugs. 3. To minimize the incidence of hysterectomy in the patients of Menorrhagia. 4. To encourage the research scholars of Unani system of medicine to prove efficacy of this system scientifically.

Title of the Project	Study of some Unani compound drugs in experimentally induced Hepatitis like condition with an aim to explore their protective, curative and regenerative potential
Institutions	Department of Ilmul Advia, A.M.U., Aligarh
Objectives	<ol style="list-style-type: none"> 1. To study the effect of crude drugs/extract on various models of hepatic damage 2. To study the biochemical and histopathological changes in serum and liver tissue. 3. To study the protective and curative effect of the crude drugs as well as extracts in different models of pre and post hepatic damage. 4. To study the acute toxicity study and adverse drug effect of effective and efficacious polyherbal formulation.

Title of the Project	Hepato-protective efficacy of few Unani Medicine
Institutions	Jiwaji University, Gwalior
Objectives	<ol style="list-style-type: none"> 1. To assess the restoration of membrane integrity of hepatocytes using Cyt. P450 enzyme systems.

2. To evaluate recovery pattern on both cell growth and cell survival using human liver cell lines.
3. Whether the formation of free radicals and accumulation of toxic metabolites will be inhibited by the therapy?
4. To study the detoxification strategies and role of glutathione metabolism.

Title of the Project Studies on the prevention of Parkinson’s disease by some Unani drugs in animals.

Institutions Jamia Hamdard, New Delhi

- Objectives
1. To study the neurobehavioral, neurochemical, histopathological, immunohistochemical and receptor binding assays in Parkinsons disease.
 2. To study the protection on Parkinson’s disease by some Unani drugs, some herbal extracts and some active principles of the medicinal plants used in Unani System of Medicine on neurobehavioral, neurochemical, histopathological, immuno-histochemical and receptors binding assays in Parkinson’s disease.

Title of the Project Screening and scientific evaluation of hypoglycemic effects of some Unani drugs in streptozotocin-induced diabetic rats

Institutions AIIMS, New Delhi

- Objectives
1. To investigate the effect of Unani medicines on blood glucose, plasma insulin and glycated haemoglobin levels in streptozotocin-induced diabetic rats.
 2. To study the role of oxidative stress in diabetes by determining oxidant and antioxidants in liver, pancreas and kidney of normal and diabetic rats.
 3. To study the effect of Unani medicine on ultrastructural changes in liver, kidney and pancreas in normal and diabetic rats.
 4. To conduct acute toxicity studies to determine safety of these medicines.

Title of the Project	Screening and purification of plant extracts used in Unani system of medicine against microbial flora of oral cavity, antimicrobial and carcinogenic activity
Institutions	Interdisciplinary Biotechnology Unit, Aligarh Muslim University, Aligarh
Objectives	<ol style="list-style-type: none"> 1. To evaluate some Unani medicines for their use in dental caries with special reference to their effect on the growth and biofilm forming ability of streptococcus mutans 2. To purify the extract using solvent column.
Title of the Project	A comparative study of new Unani formulation with Majoon Suranjan against experimental arthritis
Institutions	Jamia Hamdard, New Delhi.
Objectives	<ol style="list-style-type: none"> 1. Identification and characterization of test drugs (<i>Nigella sativa</i>, <i>Trachyspermum ammi</i> and <i>Trigonella foenum-graecum</i>). 2. To evaluate the anti-arthritic potential of selected plants. 3. Preparation of new compound drug from the selected plants and study its anti-arthritic effect. 4. Evaluation of arthritic potential of Majun Suranjan. 5. Comparison of the anti-arthritic potential of new formulation with Majoon Suranjan. 6. Toxicological evaluation of plants and new formulation
Title of the Project	Protective effects of Unani drugs against Liver toxicity
Institutions	Jamia Hamdard, New Delhi
Objectives	<ol style="list-style-type: none"> 1. To prepare the hydrophilic and lipophilic extracts of plants. 2. Drugs will be studied for <i>in-vitro</i> efficacy against lipid peroxidation, calf thymus DNA sugar damage, Reducing potential, total phenolic content and cytochrome P450 activity.

3. To study the time dependent effects of Unani drugs on acetaminophen induced hepatic sub acute toxicity and acute toxicity at high and low dose.
4. To study the effect of Unani drugs on acetaminophen induced hepatic toxicity at molecular level.
5. To study the effects of Unani drugs on restoration on DNA integrity.
6. To study histo-pathological changes in liver tissues for support of the efficacy of drugs.

Title of the Project Isolation and purification of active compounds with anti-leishmanial activity of Unani medicinal plants

Institutions Department of Clinical Microbiology, AIIMS, New Delhi

- Objectives
1. Demonstration of *in vitro* anti-leishmanial activity of the crude extracts, provided by the council.
 2. Bio-assay guided fractionation of potential crude extracts for isolation of active compounds after accomplishing objective 1.
 3. Isolation and purification of active compounds from the sub fractions obtained under the objective 2.
 4. Toxicity studies of the purified active compounds in animal models.
 5. Demonstration of *in vitro* antileishmanial activity of the purified active compounds in animal models.
 6. Identification and attempts to elucidate the structure of the active compound.

Title of the project Studies on the possible mechanisms of action of UNIM-352 a polyherbal, Unani anti asthmatic preparation in experimental animals

Institution Department of Pharmacology, V.P. Chest Institute, University of Delhi, Delhi.

Objectives	<ol style="list-style-type: none"> 1. To study the anti inflammatory and immunomodulatory effects of UNIM-352 in experimental animals, by evaluating its effects on standard markers of inflammation and immunity <i>in vitro</i> and <i>in vivo</i>. <ol style="list-style-type: none"> a. Active and passive anaphylaxis in rats b. Pro-and anti inflammatory cytokines (TNF alpha and IL-4) 2. To study the effects of UNIM-352 on bronchial hyperreactivity <ol style="list-style-type: none"> a. On isolated Guinea pig tracheal chain preparation. b. Modification of the effects of spasmogens like histamine and bradykinin 3. To study the effects of UNIM-352 on oxidative and nitrosative stress markers <ol style="list-style-type: none"> a. Lipid peroxidation b. Anti oxidant enzyme profile c. Total anti oxidant activity d. Nitric Oxide metabolites
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Title of the project	Evaluation and Standardization of Unani Medicines as metabolic interceptors of epileptogenesis for the treatment of epilepsy
Institution	Department of Pharmaceutics, Faculty of Pharmacy, Jamia Hamdard, New Delhi.
Objectives	<ol style="list-style-type: none"> 1. To study the effect of Unani herb fractions and their compounds in animal model of epilepsy (electrically induced) and to compare it with established antiepileptic drugs. 2. To evaluate the neuropharmacological profile i.e. effects on mood, memory and anxiety of the plant extracts and to compare it with established antiepileptic drugs. 3. To assess the changes in brain tissue with histopathological examinations. 4. To evaluate the clinical efficacy of selected Unani medicine in the treatment of epilepsy. 5. To perform clinical studies with optimized final preparation. 6. To explore the patentability of the final formulations

SHORT-TERM RESEARCH INQUIRIES

The Council initiated collaborative research programme with established Institutions having good infrastructure and facilities for research. Small project of short duration were funded to various Institutions and research work of Councils interest was undertaken with minimum provision of funds. During 2008-09 the following research inquiries were completed.

Title of the project	Pharmacological and Molecular on Cardio protective potential of some Unani drugs in Experimentally induced myocardial infarction
Institution	Department of Pharmacology, AIIMS, New Delhi
Summary	<p>During the study the effects of Dawa-ul-misk-sada, katha and Badi-elaichi on hemodynamic and histological changes in isoproterenol models of myocardial infarction, modulation marker of lipid peroxidation (MDA), cardiac injury markers like CK-MB & LDH and on endogenous antioxidant milieu in the rat myocardium was assessed. Moreover cardio protective effect of Abresham and Zaffran on ultrastructural changes in rat myocyte was also assessed. It was concluded in this study that:</p> <ul style="list-style-type: none"> • Dawa-ul-misk-sada (1000 mg/kg) dose was found effective in functional recovery of the heart and favourable restoration of biochemical alterations and showed cardioprotective activity. • In ultrastructural studies, Abresham at 800 mg/kg reduced edema, myonecrosis and inflammation as compared to ISO-control group. • Badi elaichi (400 & 800 mg/kg) and Katha (800mg/kg) significantly reduced MDA and leakage of myocardial necroenzyme LDH and CK-MB and also showed increase level of endogenous antioxidant glutathione, enzymes SOD and CAT. • Zaffran has shown intact myofibrils at ultrastructural level.
Title of the project	Ameliorative effect of natural products in liver regeneration against model hepatotoxicants: <i>in vivo</i> and <i>in vitro</i> approach
Institution	Jiwaji University, Gwalior
Summary	<p>Three drug were selected for this study namely Gul-e-Surkh, Sharbat-e-Dinar and Gul-e-Tesu. It was concluded that</p> <ul style="list-style-type: none"> • Significant protection was found with the therapy of against CCL₄, APAP and alcohol induced acute and sub acute exposure

- Therapy with aqueous extract of Gul-e-Surkh at different doses 256, 513, 1026 mg/kg showed significant recovery in a dose dependent manner.
- Therapy with SD(PHF) at different doses of Sharbat-e-Dinar 1,2,and 4 ml/kg showed significant recovery in a dose dependant manner and Gul-e-Tesu at different doses 208,416 and 832 mg/kg also showed significant recovery.
- The molecular studies substantiated present results the extract was effective in inhibiting DNA damage as seen from comet assay

Title of the project	A mechanistic approach of Unani drugs in Cancer Chemoprevention.
Institution	Jamia Hamdard, New Delhi
Summary	<p>During the period of the project the efficacy of methanolic extracts of Maghz Akhrot, Maghz Karanjawa, Afsanteen and Shaham Hanzal were evaluated <i>in-vitro</i> and <i>in-vivo</i>. Antioxidant properties of the extracts were evaluated by studying the inhibition of lipid peroxidation, DNA sugar damage in calf thymus, cytochrome P450 activity. Further total phenolic content of the four extracts was also estimated, ferric reducing potential and DPPH free radical scavenging activity estimated to prove their antioxidant potential. In <i>in vitro</i> studies it was found that Maghz Akhrot (<i>Juglans regia</i>) nuts has the greatest antioxidant properties and Maghz Karanjwa (<i>Caesalpinia bonducella</i> seeds) has the lowest whereas Afsanteen (<i>Artimisia absinthium</i>) and Shaham Hanzal (<i>Citrullus colocynthis</i>) have moderate antioxidant properties. These properties were found to be correlated with the polyphenolic content of the drugs i.e. higher the polyphenolic content, higher the antioxidant potential of the drug. On the basis of results of these studies anti tumor activities of all the drugs were evaluated against diethyl nitrosamine initiated and 2-acetyl amino fluorine promoted hepatic tumours in Wistar rats. All the drugs showed anti tumor effects in terms of decreased hepatic tumor events and histopathological changes in rat liver tissue.</p>

Work on the following research enquiries was in progress during the reporting period.

Title of the project	A study on effect of some Unani Medicine on Seminal Plasma lipid peroxide and anti-oxidant levels in infertile males
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Institution	K.G. Medical University, Lucknow
Objectives	<p>The present study is designed with the following objectives:</p> <ol style="list-style-type: none"> 1. To evaluate following parameters <ul style="list-style-type: none"> • Sperm count, motility, morphology etc. • Levels of seminal plasma, lipid peroxide and oxidized protein products (protein carbonyl group) • Seminal plasma activities of the antioxidant enzymes namely Catalase, Superoxide dismutase, Glutathione reductase and Glutathione Peroxidase. • Seminal plasma antioxidant Vitamins levels, namely Vitamin A, C and E. • The levels of trace minerals i.e. Selenium, Zinc, Magnesium, Iron and Copper in the seminal plasma of infertiles males. 2. To assess the protection afforded, if any on the aforementioned morphological and biochemical profiles by the following Indian medicinal plants: <ul style="list-style-type: none"> • <i>Tinospora cardifolia</i> • <i>Mucuna pruriens</i> • <i>Withania somnifera</i>

Title of the project	Comparative Chemical analysis and development of SOPs of Unani Kushtajat prepared from conventional as well as modern methods.
Institution	Department of Ilmul Advia, A.K. Tibbia College, AMU, Aligarh
Objectives	<ol style="list-style-type: none"> 1. Development of standard operational procedures (SOP) for the preparation of Unani kushtajat containing heavy metal ions like Hg, Zn, Au, Ag, Pb, Sn, Fe 2. comparative qualitative and quantitative chemical analysis of the finished khushtajat obtained from conventional and modern methods (obtained from SOP) 3. Toxicity studies and evaluation of LD 50 of the kushtajat prepared from conventional and scientific procedures.



Title of the project	Screening of three medicinal plants and a Unani formulation on experimental PD model used for treating CNS disorders in Unani system of Medicine – its characterization and molecular mechanism
Institution	ICMR-CSIR, New Delhi
Objectives	<ol style="list-style-type: none"> 1. To conduct a experimental study on a few medicinal plants mentioned in the Unani system for the treatment of CNS disorders. 2. To find the biochemical basis of neuroprotective effects of these preparation 3. To test whether the beneficial effects observed are resulting from synergism of different molecules existing in various plants. 4. Toxicities studies and examination of LD 50 of the combined formulation.

Title of the project	Lipid reducing herbal compounds providing protection against diabetes cardiovascular disorders
Institution	Department of Physiology, V.P. Chest Institute, Delhi
Objectives	<ol style="list-style-type: none"> 1. Influence of diabetes on cardiovascular regulatory mechanism. 2. Improvement in cardiovascular functions on treatment with statins and Unani herbal agent (Arjuna bark). 3. To investigate the efficacy of Arjuna Bark as a cardioprotective agent in diabetes.

Title of the project	Comparison of clinical efficacy and safety of PUVA sol and Unani formulation UNIM-401 (IF) oral and UNIM-402 (Oil) and UVA in treatment of chronic plaque psoriasis
Institution	Department of Dermatology, AIIMS, New Delhi
Objectives	<ol style="list-style-type: none"> 1. To compare the clinical efficacy of Unani medicine [UNIM-401 (IF) orally & UNIM-402 (oil for local application) and sun exposure] in the treatment of chronic plaque psoriasis with the standard allopathic therapy in the form of PUVA sol 2. To evaluate the safety of Unani medicine UNIM-401 (IF) orally & UNIM-402 (oil for local application) and sun exposure] in treatment of chronic plaque psoriasis.

Title of the project	Double blind randomized controlled clinical trial to evaluate efficacy and safety of polyherbal Unani formulation UNIM-1000
Institution	Department of Pharmacology, LHMC, New Delhi
Objectives	<p>Primary objectives:</p> <ul style="list-style-type: none"> • To study the effect of Qurs-e-Istisqa on viral load, hepatic fibrosis and mortality in patients of acute and chronic hepatitis-C • To compare these effects with standard therapy for acute and chronic hepatitis C i.e interferon α <p>Secondary objectives:</p> <p>To study the effect of Qurs-e-Istisqa on the following events</p> <ul style="list-style-type: none"> • General wellbeing of the patient • Amelioration of symptoms • Improvement of liver functions • Effect of treatment on complications of liver

Title of the project	A Preliminary study on Anti-obesity property of a Unani formulation in experimental models in rats.
Institution	Department of Pharmacology, AIIMS, New Delhi
Objectives	<ol style="list-style-type: none"> 1. To standardized and validate the models of obesity in rats. 2. To evaluate the effect of single dose of Unani drug/formulations provided by CCRUM on experimental obesity in rats.

Title of the project	Safety study of UNIM-401 and UNIM-403 in the treatment of Chronic Plaque Psoriasis.
Institution	Department of Pharmacology, AIIMS, New Delhi
Objectives	<ol style="list-style-type: none"> 1. Safety study of PUVAsol and Unani medicine (UNIM-401,oral) and (UNIM-403, local) in the treatment of Chronic Plaque Psoriasis

Title of the project	Evaluation of modulatory effects of some Unani drugs on toxicity of an anticancer drugs cyclophosphamide.
Institution	Jamia Hamdard, New Delhi

Objectives	<p>The main objectives of study are as under</p> <ul style="list-style-type: none"> To evaluate the protective effect of Unani drugs on the immune responses (humoral and non specific) of animals. To assess the protective role of these Unani drugs on toxicity associated with anti cancer drug (cyclophosphamide).
Title of the project	Medicinal importance of alkaloid free Argemone oil
Institution	Jamia Hamdard, New Delhi
Objectives	<p>The argemone oil and alkaloid free (Sanguinarine free) argemone oil have inhibited serum lipids significantly in animals. The same dose of argemone oil was hepatotoxic but the sanguinarine free argemone oil has revealed no hepatotoxic symptoms in animals. Now we proposed to study the various combinations (0.1, 1,5,10,25,50 and 100%) of alkaloid free (sanguinarine free) argemone oil with mustard oil for hypolipidemic property of alkaloid free argemone oil in rats for 1,3,6 and 12 months on the following parameters.</p> <ol style="list-style-type: none"> Cardiac function test Liver function test.
Title of the project	Role of Unani drugs in normalizing altered liver function test in post cholecystectomy and choledocholithotomy patients
Institution	Jamia Hamdard, New Delhi
Objectives	<p>The present study has been designed with the above aims and objectives to develop and evaluate Unani drugs for post operative cases of gall bladder stones to normalize their liver functions and to get them rid off from their gastro intestinal symptoms. The main aim of this study is to clinically evaluate the hepatocorrective effect of Unani formulations in post operative cases of cholelithiasis and choledocholithiasis</p>

One new project was also allotted during the reporting period.

S.No.	Title of the Project	Investigator and Institution
1.	Development of Novel drug delivery system of some established Unani formulations	Dr S. H. Ansari & Dr Javed Ali, Faculty of Pharmacy, Jamia Hamdard, New Delhi

DRUG STANDARDIZATION RESEARCH PROGRAMME

The programme of drug standardization is mainly concerned with evolving pharmacopoeial standards of single and compound Unani drugs included in various volumes of *National Formulary of Unani Medicine* and simultaneously to test the drugs under trial in the Council's Clinical Research Units/ Institutes and being manufactured in the pharmacy of Central Research Institute of Unani Medicine, Hyderabad.

Simultaneously, chemical investigations of Unani medicinal plants as well as toxicity studies are also carried out under this programme.

Standardization work for single drugs and compound formulations is carried out in accordance with the format approved by Unani Pharmacopoeia Committee of the Government of India, because the standards so developed are incorporated in the *Unani Pharmacopoeia of India*.

Under the Drug Standardization Research Programme, standard operating procedures (SOPs) for the manufacture of 50 compound formulations were developed and quality control of 121 compound formulations prepared at the pharmacy of CRIUM, Hyderabad was done. Phyto-chemical investigation on *Verbascum thapsus* and *Iris nepalensis* was carried out and seven compounds were isolated which are being spectroscopically characterized. With the help of spectroscopy and in other laboratory namely Chemical Research Unit, AMU, Aligarh investigations on different parts of Neem plant were done and seven single molecules were characterized namely β -sitosterol, Friedlin, Quercetin, Caemferol, Rhamnoside and two compounds are being characterized. Study on acute toxicity on Unani coded drugs namely ITA-05 and ITA-06 was also completed. During the reporting period, four meetings of Unani Pharmacopoeia Committee were held. During the reporting period the Council published *Unani Pharmacopoeia of India* Volume V containing 52 monographs on single drugs. Compilation work of *Unani Pharmacopoeia of India*, Part-II and Volume I was in progress. Besides, *National Formulary of Unani Medicine* Part-V containing 179 drugs was also published.

The job is carried out through the following research centres of the Council.

- Drug Standardization Research Institute (DSRI), Ghaziabad.
- Central Research Institute of Unani Medicine (CRIUM), Hyderabad
- Regional Research Institute of Unani Medicine (RRIUM), Chennai
- Regional Research Institute of Unani Medicine (RRIUM), Srinagar
- Regional Research Institute of Unani Medicine (RRIUM), Aligarh
- Drug Standardization Research Unit (DSRU), New Delhi
- Chemical Research Unit (Grant-in-Aid), AMU, Aligarh.

During the reporting period following works were carried out.

- Development of Standard Operating Procedures (SOPs) for the manufacture of compound formulations and their pharmacopoeial standards.
- Quality control
- Chemical investigations of medicinal plants.
- Safety evaluation.

DEVELOPMENT OF STANDARD OPERATING PROCEDURES (SOPS) FOR MANUFACTURE OF COMPOUND FORMULATIONS AND THEIR PHARMACOPOEIAL STANDARDS

Under this programme SOPs for the manufacture of following compound formulations were developed at various research centres of the Council as well in the laboratories outside the Council, under EMR projects. During the reporting period studies on following compounds were done.

- | | |
|--------------------------------|-----------------------------|
| • Jawarish-e-Safra Shikan | • Majoon-e-Yahya Bin Khalid |
| • Jawarish-e-Tabasheer Mushil | • Jawarish-e-Hazim |
| • Jawarish-e-Safar Jali Mushil | • Majoon-e-Nisyan |
| • Jawarish-e-Qurtum | • Jawarish-e-Ood Mulaiyin |
| • Itrifal-e-Badiyan | • Jawarish-e-Hindi |
| • Itrifal-e-Kishmishi | • Majoon-e-Reward |
| • Itrifal-e-Qimbeeli | • Jawarish-e-Kamooni Mushil |
| • Itrifal-e-Khabsul Hadeed | • Majoon-e-Masihi Mumsik |
| • Itrifal-e-Aftimoon | • Jawarish-e-Kamooni Kabir |
| • Itrifal-e-Zabeeb | • Majoon-e-Misri |
| • Itrifal-e-Sana | • Majoon-e-Sandal |
| • Itrifal-e-Muqil Mumsik | • Jawarish-e-Darchini Qawi |
| • Itrifal-e-Mushil | • Jawarish-e-Darchini |
| • Dawa-e-Tatoora | • Jawarish-e-Kafoor |
| • Dawa-e-Tehal | • Majoon-e-Mujarrab |
| • Dawa-e-Suzak | • Jawarish-e-Aamla Luluvi |

- Dawa-e-Mudirr-e-Haiz
- Dawa-e-Salasil Baul
- Dawa-e-Siyah Jiryani
- Dawa-e-Sahaj
- Dawa-ul-Shifa
- Dawa-ul-Misk Barid Jawaharwali
- Dawa-ul-Misk Motadil Jawaharwali
- Halwa-e-Gheekwar
- Halwa-e-Salab
- Dawa-e-Diqqul Atfal
- Itrifal-e-Muqawwi-e-Basar
- Majoon-e-Bhangra
- Majoon-e-Boolis
- Majoon-e-Bawasir
- Majoon-e-Buqrat
- Majoon-e-Gul
- Majoon-e-Gheekawar
- Majoon-e-Hafiz-ul-Ajsad
- Majoon-e-Ibn-e-Sarafian
- Majoon-e-Luluvi
- Majoon-e-Masihi
- Qurs-e-Atash
- Qurs-e-Gul
- Qurs-e-Hummaz
- Qurs-e-Istisqa
- Qurs-e-Khashkhash
- Qurs-e-Zatul Janb
- Majoon-e-Pethapak
- Jawarish-e-Aamla Ambari
- Habb-e-Musquit-e-Hamal
- Habb-e-Man-e-Hamal
- Habb-e-Narmushk
- Habb-e-Zaranbad
- Habb-e-Mafasil
- Habb-e-Tatoora
- Habb-e-Filfil
- Habb-e-Tap-e-Balghami
- Habb-e-Neeb
- Dayaqooza
- Habb-e-Kibreer Kabeer
- Habb-e-Suzak Haad
- Habb-e-Suzak Muzmin
- Habb-e-Haiza
- Habb-e-Kibreer Sagheer
- Qurs-e-Kafoor Mumsik
- Qurs-e-Kundur
- Qurs-e-Luk
- Qurs-e-Mastagi
- Qurs-e-Rewand Kabidi
- Qurs-e-Sartan Kafoori
- Qurs-e-Sumaq Mushtahi
- Qurs-e-Sumbul
- Qurs-e-Ward

Shelf Life Studies

During the reporting period shelf life studies of the following nine compounds were carried out.

- Khamira Gaozaban Sada
- Habb-e-Kabid Naushadari
- Habb-e-Rewand
- Habb-e-Tankar
- Sufoof-e-Chobchini
- Habb-e-Rasaut
- Habb-e-Shifa
- Habb-e-Papita Desi
- Habb-e-Raal

Quality Control Work

During the reporting period the following 37 compound formulations prepared at the pharmacy of CRIUM, Hyderabad, were tested for their quality control.

- UNIM-001
- UNIM-003
- UNIM-004
- UNIM-005
- UNIM-405
- UNIM-001
- UNIM-006
- UNIM-004
- UNIM-1452
- UNIM-003
- UNIM-004
- UNIM-006
- UNIM-042
- UNIM-054
- UNIM-312
- UNIM-116
- UNIM-107
- UNIM-045(O)
- UNIM-046(O)
- UNIM-152
- UNIM-104
- UNIM-115
- UNIM-220
- UNIM-268
- UNIM-318
- UNIM-319
- UNIM-321
- UNIM-416
- UNIM-001
- UNIM-003
- UNIM-104
- UNIM-004
- UNIM-005
- UNIM-352

- UNIM-401
- UNIM-1202
- UNIM-044

Besides, studies on estimation of heavy metals in 43 compound formulations, and microbial load, aflatoxin contamination and pesticidal residue in 56 drugs were also carried out at CRIUM, Hyderabad.

Chemical Investigations of Medicinal Plants

During the reporting period this work was carried out through two research centres viz. RRIUM, Srinagar and Chemical Research Unit, Aligarh.

The RRIUM, Srinagar conducted phyto-chemical investigations on coded drug ITA-06 (L) and identified the following new compounds by GCMS.

- α -pinene
- α -thuja
- Myrcene
- Z-linolool oxide
- Linalool
- Eugenol
- β -caryophyllene
- GW-1 (to be identified)
- β -pinene
- Camphene
- Limonene
- E-linolool oxide
- Linalyl acetate
- Geranyl acetate
- PA-1 (to be identified)
- GW-2 (to be identified)

Chemical Research Unit, Aligarh investigated the drug Barg-e-Shahatra (*Fumeria indica*) and isolated following six compounds:

- Methyl octacosan 1 – ol
- Excess trans enonic acid
- Hexa trans enonic acid
- Coded compound PFP-5 (to be characterized)
- Coded compound PEP-I (to be characterized)
- Coded compound EFP-II (to be characterized).

Safety Evaluation

Under this programme acute toxicity studies on coded compound drugs ITA-05 and ITA-06 were conducted at RRIUM, Srinagar.

SURVEY AND CULTIVATION OF MEDICINAL PLANTS PROGRAMME

The Council has undertaken a programme of extensive survey of medicinal plants in different parts of the country, primarily with a view to collecting and identifying medicinal plants and recording basic data on ethnopharmacological uses of plants to provide a lead material for the discovery of new drugs of natural origin. The broad objectives of this programme are:

- To survey, collect and identify medicinal plants in different forest zones of the country.
- To study distribution, availability, ethnopharmacological uses of and threats to medicinal plants.
- To cultivate medicinal plants experimentally and in the field.
- To maintain a herbarium and an exhibition of medicinal plants and raw drugs for demonstration purposes.
- To maintain a demonstrable herb garden.
- To organize farmers' meets to impart awareness, and provide training on cultivation of medicinal plants.
- To document folk knowledge on medicinal uses of plants.
- To collect samples of genuine drugs from the forest for pharmacopoeial standard work.
- To develop nursery of medicinal plants for demonstration purpose with a view to popularizing them among the masses.

This programme is being carried out at the following research centres of the Council:

- Central Research Institute of Unani Medicine, Hyderabad.
- Regional Research Institute of Unani Medicine, Aligarh.
- Regional Research Institute of Unani Medicine, Bhadrak.
- Regional Research Institute of Unani Medicine, Chennai.
- Regional Research Institute of Unani Medicine, Srinagar.

Ethnopharmacological Surveys

Under this programme the Council undertook ethnopharmacological surveys in different forest divisions/areas during the period under report. These included Atmakur and Chittoor forest divisions, (Andhra Pradesh), Begeshwar, (Uttar Pradesh), Pithoragarh forest division (Uttarakhand), Kanya Kumari forest division (Tamil Nadu) and Peer Panjal forest division (Jammu & Kashmir). As a result, 2798 specimens comprising 855 species of medicinal plants were collected. Of these, 840 species were identified.

Herbariums

Plant specimens collected from the study areas were mounted on herbarium sheets. A total of 2484 such herbarium sheets were prepared and information pertaining to the plant's botanical name, family, local name, Unani name (wherever available), date of collection, brief morphological features, medicinal/other uses were recorded on each herbarium sheet. Besides, 646 index cards were updated.

The Council's surveyors during their field studies, collected 469 saplings of important medicinal species for plantation in the nurseries attached to the units of the institute(s).

The survey teams also collected fresh raw drugs weighing 587 kg and supplied to the pharmacy section of the Central Research Institute of Unani Medicine, Hyderabad for preparation of Unani formulations.

Folk claims

The survey team members enquired from the local communities about the traditional uses of plants. This information was systematized taxonomically, and efforts were made to develop a database for comparative analysis of the information recorded so far. As a result, 255 medicinal folk claims were recorded from the tribal inhabitants and other rural folks of the study areas. This information had been collected with a view to providing lead materials for the discovery of new drugs of plant origin. Recently, the Council has also taken up a programme to publish this information in the form of books providing details such as botanical name and family, synonyms, local name, Unani name, habit and habitat, wild or cultivated, medicinal efficacy claimed and name of the tribe, locality, collection number, part(s) used, mode of application and biodynamic notes.

Experimental and field scale cultivation of medicinal plants

Under this activity, the Council has taken up cultivation of some important medicinal plants used in Unani Medicine. These include Babchi (*Psoralea corylifolia* Linn.), Irsa (*Iris ensata* Thunb.), Atrilal (*Ammi majus* Linn.), Asgand (*Withania somnifera* Dunal), Datura siyah (*Datura metel* Linn.) Gulnar Farsi (*Punica granatum* Linn. abortive variety), Gurmarbuti (*Gymnema sylvestre* R Br.), Khulanjan (*Alpinia galanga* Willd.), Unsul (*Urgenia indica* Kunth.), Sudab (*Ruta graveolens* Linn.) etc. As a result of field scale cultivation of drug plants, 217 kg of raw drugs was yielded.

Farmers' meets

The Council's research centres organized farmers' meetings on awareness, training, cultivation and marketing of medicinal plants. During the reporting period five such training programmes were organized at block level in the States of Andhra Pradesh (AP), Tamil Nadu (TN) and Uttar Pradesh (UP). These blocks included Choutuppal and Bibinagar Mandals (AP); Akkrabad Block (UP) and Sriperumputhur and Kadampathur Blocks (TN).

Nursery of medicinal plants

With a view to popularizing medicinal plants among the masses, the Council has launched a programme of cultivating about 150 common species in its nurseries developed at Aligah, Chennai, Hyderabad and Srinagar. Some of the important and interesting species grown under this activity included Mako (*Solanum nigrum* Linn.), Bhangra (*Eclipta alba* Hussk), Tambaku (*Nicotiana tabacum* Linn.), Kasni (*Cichorium intybus* Linn.), Qurtum (*Carthamus tinctorius* Linn.), Funduq (*Corylus avellana* Linn.), Sadabahar (*Vinca rosea* Linn.), Kasoos (*Cuscuta reflexa* Roxb.), Muqil (*Commiphora mukul* (Hook ex Stocks) Engl.), Anar (*Punica granatum* Linn.), Marorphali (*Helicteres isora* Linn.), Behidana (*Cydonia oblonga* Mill.), Tulsi (*Ocimum sanctum* Linn.), Keora (*Pandanus tectorius* Soland. ex Parkinson.), Waj (*Acorus calamus* Linn.), Turbud (*Ipomoea turpethum* R. Br.), Karanjawa (*Caesalpinia crista* Linn.), Ajwain Desi (*Trachyspermum ammi* Linn.), Qinnab (*Cannabis sativa* Linn.), Gurmar buti (*Gymnema sylvestre* R. Br.), Hina (*Lawsonia inermis* Linn.) Khubbazi (*Malva sylvestris* Linn.), Babchi (*Psoralea corylifolia* Linn.) and Konch (*Mucuna pruriens* Linn.).

Based on the surveys conducted a monograph entitled *Medicinal Plants of Tarai Forests in Kumaon Region of Uttarakhand* published during the reporting period.

LITERARY RESEARCH PROGRAMME

Literature relating to the Unani system of medicine is scattered in private and public libraries and at times is not within the reach of scholars and research workers. A good number of manuscripts are available in various libraries. Some manuscripts are in dilapidated condition and valuable information therein has got to be obtained before they get completely destroyed. Some manuscripts are very rare and old. The responsibility to make full use of the information contained therein rests with the scholars of today. Further, there has been a handicap in the field of Unani medical education due to the lack of standard text books dealing with various subjects. The scholars who can understand and interpret the concepts laid down in the classics of Unani Medicine are also becoming fewer as most of the literature is in Persian and Arabic.

To get full advantage of the rich experience of ancient scholars, to get all the valuable knowledge of Unani system of medicine rendered into Indian languages and to have standard books, the Council has taken up the programme of literary research. The project aims at rendering in simple and lucid language the medical knowledge of the manuscripts for the benefit of the posterity.

This programme is being carried out through a Literary Research Institute of Unani Medicine functioning at New Delhi. With a view to expediting the work, outsourcing for the translation work to the eminent Unani experts who are well versed in Unani Medicine as well as in Arabic and Persian languages was also done.

The Literary Research Programme of the Council includes collation, editing, translation of classical books/rare manuscripts of Unani Medicine. Besides compilation of books, booklets/leaflets on preventive, promotive and curative health aspects based on information available in the Unani classics was also a part of this programme.

During the reporting period Urdu translation of following books was finalized and published.

- Kitab-al-Hawi, Volume XV
- Kitab-al Miyah
- Kitab-al-Fakhir, Volume 1
- Kitab-al-Aghzia

Under the programme of reprinting of out-of-print classical Unani books, the following books were published during the reporting period.

- Ktab-al-Fakhir (Arabic)
- Tazkira-e-Jaleel (Urdu)
- Ghina Muna (Urdu)
- Ghina Muna (Arabic)
- Tazkiratul Kahhaleen (Arabic)
- Tazkira ul-il Albab Volume I (Arabic)
- Kitab-ul-Aghzia (Urdu)
- Mufradat-e-Azizi (Persian)
- Qarabadeen-e-Qadri (Urdu)

Work on the following books was in progress.

- Tazkira ul-il-Albab (Arabic), Part I
- Muheet-e-Azam (Persian)
- Akseer-e-Azam (Persian) Volume II
- Minhaj-ud-Dukkan.

Besides, documentation on the following diseases was also completed.

- Waja-ul-Mafasil (Rheumatoid arthritis)
- Humma-e-Aswad (Kala Azar)
- Sara (Epilepsy)
- Duwali (Varicose vein)

Two booklets one on similarities and differences in fundamentals of Ayurveda and Unani System of Medicine and the other on Reproductive and Child Health in Unani System of Medicine were also compiled.

COLLECTION AND DISSEMINATION OF INFORMATION

The Council has a reference Library and Information Centre at the headquarters that aims to collect and preserve the scattered literature in Unani System of Medicine and to disseminate the information thus collected among the researchers, academics and practitioners of the system.

During the reporting period services of the library remain automated through local area network. During the reporting period 800 books, 14 CDs, six photocopies of rare books and 95 issues of Journals including 79 issues of Unani Journals, 83 serials and 48 Hindi magazines were added to the existing stock of the library. Under the WHO global subscription scheme, 32 books, 42 journals and 58 serials were added to the collection.

Sixty-four documents were purchased under the centralized purchase scheme. Two thousand and seventy-eight books were classified, 3870 consulted and 658 circulated, twenty-two books were issued under inter-library loan service. Over 192 non-library and five foreign delegates visited the library. The library continued the institutional membership of British Council Library, Medical Library Association of India, Developing Library Network (DELNET) and American Resource Information Centre.

During the reporting period the library carried out the following services.

- Publication of monthly Medical News Index – 06 Issues
- Publication of Current Contents of Journals (Unani) – 02 Issues
- Catalogue or Bibliographical searches – 6705 titles
- C.D. searches – 17 times
- Reference services (long and short ranges) – 7884 queries
- Collection of relevant news clippings – 10546 news
- Photocopying (important articles and routine work) – 41861 copies
- Spiral Binding – 49 documents

The library has a collection of over 13521 books, 528 bound volumes of journals, 33 manuscripts, 149 photocopies of rare manuscripts, nine microfilms, 30 slides and 169 CDs. The Library subscribed national/international journals in different disciplines.

PUBLICATION

During the reporting period the Publication Division of the Council brought out the following publications.

- Tazkira-e-Jaleel (Urdu)
- Ghina Muna (Urdu)
- Ghina Muna (Arabic)
- Tazkiratul Kahhaleen (Arabic)
- Tazkira ul-il Albab-I (Arabic)
- Kitab-al-Aghzia (Arabic)
- Kitab-al-Aghzia (Urdu)
- Kitab-al-Fakhir (Arabic)
- Mufradat-e-Azizi (Persian)
- Qarabadeen-e-Qadri (Urdu)
- Kitab-al-Miyah (Urdu)
- Bayaz-e-Kabeer, II (Urdu)
- Kitab-al-Hawi, Vol. XV
- Kitab-al-Fakhir, Vol. I, Part-I (Urdu)
- National Formulary of Unani Medicine Part-V
- Medicinal Plants of Tarai Forest Division
- Unani Treatment for Bars – A Success Story (Marathi)
- Unani Treatment for Eczema and Psoriasis – A Success Story (Marathi)
- Unani Treatment for Waja-ul-Mafasil – A Success Story (Marathi)
- Jahan-e-Tib, Volume, IX, Issue 3
- Jahan-e-Tib, Volume, IX, Issue 4
- Jahan-e-Tib, Volume, X, Issue 1
- Jahan-e-Tib, Volume, X, Issue 2



- Hippocratic Journal of Unani Medicine, Volume III, No. 3
- Hippocratic Journal of Unani Medicine, Volume III, No. 4
- Hippocratic Journal of Unani Medicine, Volume IV, No. 1
- Hippocratic Journal of Unani Medicine, Volume IV, No. 2
- Unani Medicine in India (Revised)
- CCRUM Newsletter (March-June 2008)
- CCRUM Newsletter (July-October2008)
- CCRUM Newsletter (November-December 2008)
- Annual Report 2006-07 (Hindi & English)
- Some Common Unani Medicinal Plants (Booklet) (Marathi)
- Unani Treatment for some Common Disorders (Booklet) (Marathi)
- Unani Medicine – An Introduction (Booklet) (Marathi)
- Unani Medicine in India (Booklet) (Marathi)
- Health Promotive Unani Medicinal Plants (Booklet) (Marathi)



Mrs. Panabaka Laxmi, Minister of State for Health and Family Welfare, Government of India sharing the dais (to her left) with Mr. Riyaz Panjabi, Vice-Chancellor, University of Kashmir, Srinagar at the workshop on patents and IPR issues organized by Central Council for Research in Unani Medicine (CCRUM) in Srinagar on 3 May 2008. To the Minister's right are Dr. Mohammed Khalid Siddiqui, Director, CCRUM; and Dr. Kabir Dar, Director, Indian Systems of Medicine (ISM), Jammu & Kashmir.



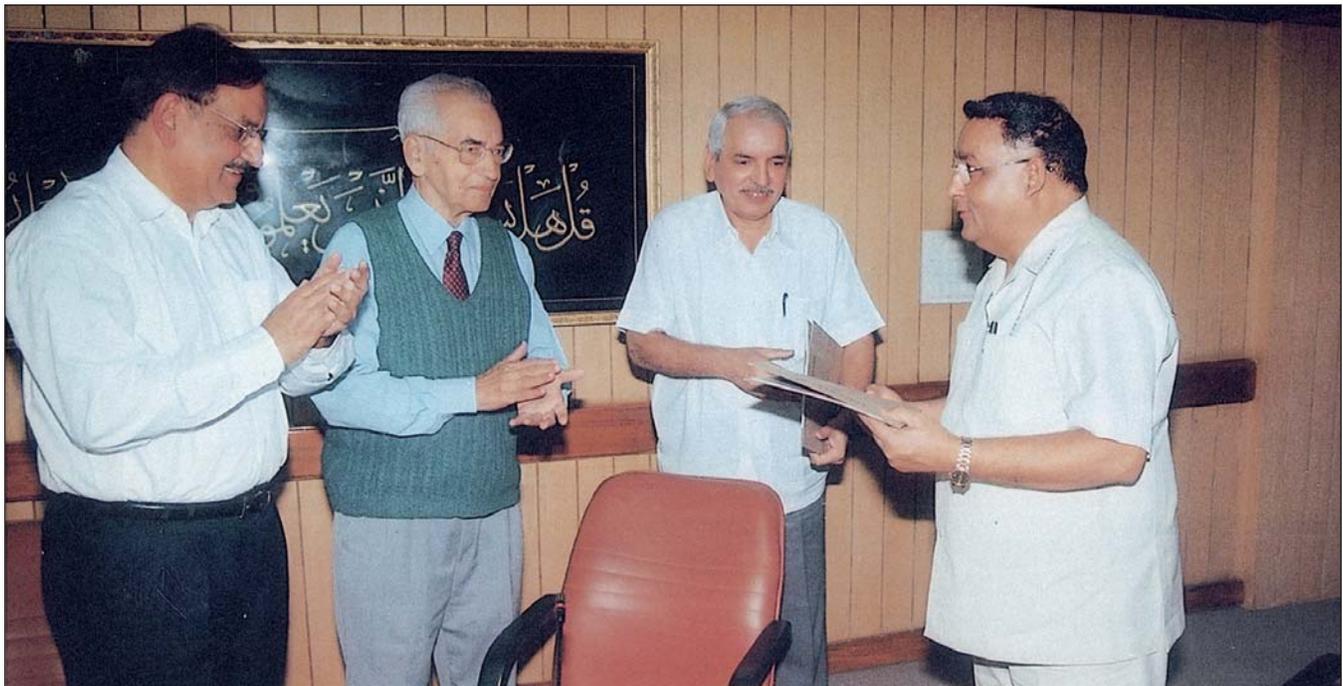
Dr. Mohammed Khalid Siddiqui, Director, CCRUM with two officials from the Embassy of Iran in New Delhi – Dr. Ahmed Momeni, Academic Counselor; and Dr. Karim Najafi, Cultural Counselor – at the CCRUM headquarters in New Delhi on 28 April 2008.



Mrs. Panabaka Laxmi, Minister of State for Health and Family Welfare, Government of India being escorted by Dr. Mohammed Khalid Siddiqui, Director, CCRUM at Arogya Health Mela at Nellore, Andhra Pradesh on 26 April 2008.



Mrs. S. Jalaja, Secretary to Government of India, Ministry of Health & Family Welfare, Department of AYUSH at the inaugural ceremony of Regional Seminar on Intellectual Property Protection and Management, organized jointly by the CCRUM and NRDC, in New Delhi on 11 February 2009. To Mrs. Jalaja's right is Dr. Mohammed Khalid Siddiqui, Director, CCRUM and to her left is Dr. G.N. Qazi, Vice-Chancellor, Jamia Hamdard, New Delhi.



All smiles: Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine (CCRUM) (right) exchanging the MoU documents with Mr. Ehsan Ahmad Khan, Registrar, Jamia Hamdard at the MoU signing ceremony in New Delhi on 22 October 2008, while Mr. Saiyid Hamid, Chancellor, Jamia Hamdard and Dr. G.N. Qazi, Vice Chancellor, Jamia Hamdard give a big hand.



Mrs. Anita Das, Secretary to Government of India, Ministry of Health & Family Welfare, Department of AYUSH releasing the Unani Pharmacopoeia of India (Part I, Volume V) at the launch of National Campaign on Quality Assurance of ASU&H Drugs in New Delhi on 10 June 2008 while Dr. J.S. Habayeb, World Health Organization representative claps.



Dr. Surender Singh, Drug Controller General of India (second from left) addressing the technical session on ASU drugs he chaired at the Workshop for launch of National Campaign on Quality Assurance of ASU&H Drugs in New Delhi on 11 June 2008. To his right is Dr. Mohammed Khalid Siddiqui, Director, CCRUM who co-chaired the session.



Mrs. S. Jalaja, Secretary to Government of India, Ministry of Health & Family Welfare, Department of AYUSH at the inaugural function of the Workshop on Dietotherapy in Unani Medicine, organized by the CCRUM, in New Delhi on 13 January 2009. To her right are Dr. G.N. Qazi, Vice-Chancellor, Jamia Hamdard, New Delhi and Dr. Mohammed Khalid Siddiqui, Director, CCRUM.



Mr. Saiyyid Hamid, Chancellor, Jamia Hamdard going round the health camp at Hamdard Public School, Sangam Vihar, New Delhi on 8 March 2009. He inaugurated the camp.



Mrs. Panabaka Lakshmi, Minister of State for Health and Family Welfare, Government of India receiving a bouquet at the inaugural function of National Conference on Jarahat at Aligarh Muslim University (AMU), Aligarh on 21 February 2009. Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine (CCRUM) and Prof. Anis Ismail, Organizing Secretary of the Conference look on.



Mr. Nand Kishore Yadav, Minister of Health, Government of Bihar (centre) handing the keys to the Nawab Manzil building over to Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine in Patna on 14 December 2008. To Mr. Yadav's right are Dr. Ajay Kumar Singh, Government Ayurvedic College, Patna; and Mr. Dayanand Paswan, Ward Councillor; and to Dr. Siddiqui's left is Dr. S. Sikendar Ali Khan, Research Officer in charge of Regional Research Institute of Unani Medicine, Patna.



Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine (CCRUM) (right) with other dignitaries at the inaugural function of International Integrative Medicine Conference in Karachi, Pakistan on 24 November 2008. Others in the picture are (from left): Prof. Hakim Syed Zillur Rahman, President, Ibn Sina Academy of Medieval Medicine and Science (ISAMMS), Aligarh, India; Prof. Nasim A. Khan, Vice Chancellor, Hamdard University, Karachi, Pakistan; Mr. Syed Qaim Ali Shah, Chief Minister, Government of Sindh, Pakistan; Mrs. Sadia Rashid, President, Hamdard Foundation Pakistan; Dr. Navaid-uz-Zafar, Managing Director, Hamdard Laboratories (Waqf), Pakistan; Dr. Rashid A.H. Bhikha, Chairman, Ibn Sina Institute of Tib (ISIT), South Africa; and Dr. Hamidollah Afrasiabian, delegate from Iran.



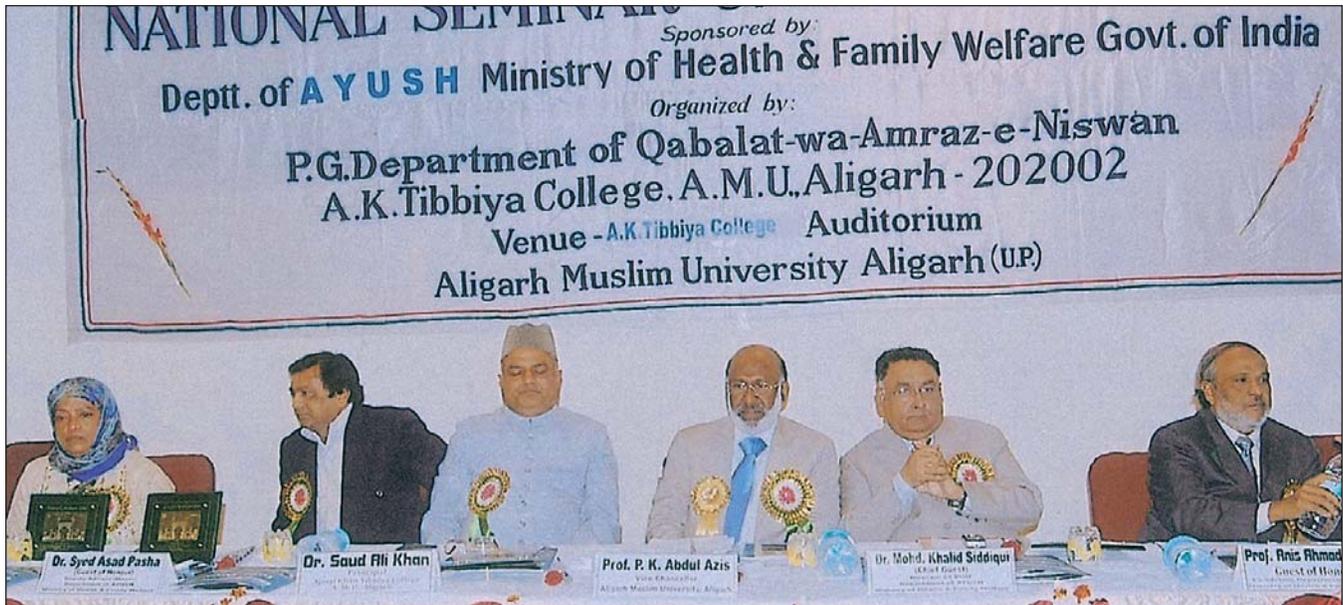
Dr. Mohammed Khalid Siddiqui, Director, CCRUM (centre in the second row) at the inaugural ceremony of International Congress of Traditional and Complementary Medicine (ICTCM-2008) held in Mazandaran, Iran from 28 to 31 October 2008.



Mrs. S. Jalaja, Secretary to Government of India, Ministry of Health & Family Welfare, Department of AYUSH inaugurating the Ibn Al-Baitar Herbal Garden at the Council's Central Research Institute of Unani Medicine (CRIUM), Hyderabad on 20 February 2009. Accompanying Mrs. Jalaja are Mr. B. Anand, Joint Secretary to Government of India, Ministry of Health & Family Welfare, Department of AYUSH and Dr. Srivasuki, Chief Executive Officer, Andhra Pradesh Medicinal Plants Board.



The CCRUM researchers gathering information on medicinal uses of plants from a tribal informant in Saganaria forest in Balasore district of Orissa.



Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine (CCRUM) (second from right) and Prof. P.K. Abdul Aziz, Vice Chancellor, Aligarh Muslim University (AMU), Aligarh at the inaugural ceremony of Seminar on Amraz-e-Niswan at AMU, Aligarh on 20 December 2008. To Dr. Siddiqui's left is Prof. Anis A. Ansari, Head, Department of Kulliyat, A.K. Tibbiya College, AMU, Aligarh, and to the Vice Chancellor's right are Dr. Saud Ali Khan, Principal, Ajmal Khan (AK) Tibbiya College, AMU, Aligarh; Dr. Syed Asad Pasha, Deputy Adviser (Unani), Department of AYUSH, Ministry of Health and Family Welfare, Government of India; and Prof. Qamar Akhtar Kazmi, Head, Department of Qabalat-wa-Amraz-e-Niswan, A.K. Tibbiya College, AMU, Aligarh.



Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine (CCRUM); Prof. S. Mahdi Hasan, Honorary Professor, King George Medical University, Lucknow; Prof. Mashkoor Ahmad, Dean, Faculty of Medicine (Unani), Jamia Hamdard, New Delhi; Prof. V.D. Agarwal, Dean, Unani and Ayurvedic College, Aligarh; and Prof. Afzal Ahmad, Secretary, Maqbool Social Health and Education Society (MSHES) at the inauguration of National Seminar on Indian Medicine at Aligarh (Uttar Pradesh) on 12 April 2008.

MISCELLANEOUS

ORGANIZATION OF WORKSHOPS, SEMINARS, HEALTH CAMPS, TRAININGS, LECTURES ETC.

Workshop on patents and IPR issues at Srinagar

Mrs. Panabaka Laxmi, Minister of State for Health and Family Welfare, Government of India inaugurated a workshop on Patents and Intellectual Property Right (IPR) issues in Unani Medicine organized jointly by Central Council for Research in Unani Medicine (CCRUM) and National Research Development Corporation (NRDC) at the University of Kashmir in Srinagar on 3 May 2008.

The Minister observed that she would like the Council's Regional Research Institute of Unani Medicine (RRIUM) at Srinagar to develop as a major centre of medical tourism as well as research and development in Unani Medicine. She emphasized on optimal utilization of Unani Medicine as well as other Indian systems of medicine in implementing National Rural Health Mission (NRHM) in the States and assured Central Government's full support for the purpose. She also called upon the researchers of Unani Medicine to validate their system on scientific parameters for the system's global acceptance.

In his welcome address Dr. Mohammed Khalid Siddiqui, Director, CCRUM said that the RRIUM, Srinagar has emerged as the leading institution of Unani medical research in the State of J & K. The CCRUM is also planning to develop this institute as a centre of excellence in respect of human resource of Unani Medicine and pre-clinical studies. The institute has earned great repute for successful treatment of some chronic diseases like bronchial asthma, rheumatoid arthritis and vitiligo.

Dr. Siddiqui highlighted the Council's success stories in the fields of clinical research, drug standardization, survey and cultivation of medicinal plants and literary research. He said that the CCRUM has developed collaboration with reputed scientific organizations including Council of Scientific and Industrial Research (CSIR), Indian Council of Medical Research (ICMR) and National Research Development Corporation (NRDC), which is working in the direction of patenting the results of the Council's research work.

Mr. Riyaz Panjabi, Vice-Chancellor, University of Kashmir presided over the inaugural function. In his presidential address he stressed on increasing collaborations between the various departments of his University and the CCRUM for advancing interdisciplinary research in Unani Medicine and related sciences. He assured the University's continuing cooperation for the RRIUM, Srinagar.

At the technical session, Dr. B.K. Sahu gave an overview of Intellectual Property Right (IPR). Dr. V. K Bali gave his talk on patent searching, and Dr. K.S Kardam gave his talk on patent system in India.

National campaign on quality assurance of ASU & H drugs in New Delhi

Mrs. Anita Das, Secretary to Government of India, Ministry of Health and Family Welfare, Department of Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) inaugurated a two-day workshop organized to mark the launch of National Campaign on Quality Assurance of Ayurveda, Siddha, Unani & Homoeopathic (ASU&H) drugs in New Delhi on 10 June 2008. She observed that quality assurance was the defining parameter for ASU & H industry and that the entire stakeholders should pool their efforts and put in place a quality assurance mechanism to save these systems and the industry from stagnation.

The workshop was organized by Department of AYUSH, Ministry of Health & Family Welfare, Government of India and Pharmacopoeial Laboratory for Indian Medicine in association with Central Council for Research in Unani Medicine (CCRUM), World Health Organization and Shriram Institute for Industrial Research.

Speaking of the campaign, Mrs. Das said that it mainly aimed to create a quality assurance movement in the AYUSH industry in the country and this will be possible only if the entire stakeholders own up this initiative. She said that commercial production of ASU & H drugs requires SOPs, pharmacopoeial standards, good manufacturing practices, testing manuals etc. and that a lot has been done in these areas. The Secretary said that strong and effective enforcement machinery was required in the States to ensure effective GMP compliance, and drug testing capacity in the private sector also needs to be fully utilized for standardization and quality control of ASU & H medicines. The Department of AYUSH has made testing of heavy metals mandatory for export purposes from November 2006.

The workshop had over 250 delegates from ASU & H drug industry, State Secretaries/Directors of AYUSH, representatives of State drugs Testing Laboratories/ Pharmacies, State Licensing Authorities and renowned experts of ASU & H systems and phytochemistry and pharmaceutical sciences.

Welcoming the guests and participants Mr. Shiv Basant, Joint Secretary to Government of India, Ministry of Health & Family Welfare, Department of AYUSH said that the ASU & H drug industry, R&D and quality control institutions in Central and State Government enforcement machinery have a very important role to play in ensuring quality assurance regime for ASU & H medicines. The Department of AYUSH is emphasizing appropriate technology and use of quality control capacity in the private sector for upgradation of the ASU & H drug industry.

Dr. S.J. Habayeb, WHO Representative spelt out salient features of the WHO support for AYUSH drugs. He said that a large section of India's population depend on traditional medicine. He emphasized the need for documentation of AYUSH systems and proving of the quality of the drugs used in these systems for making them acceptable for the global society. He emphasized rational use of drugs by physicians and consumers addressing the safety and efficacy issues in respect of ASU & H medicines.

Following the inauguration, there were parallel technical sessions on various aspects of Ayurveda, Siddha and Unani (ASU) medicines and Homoeopathic medicines. The first technical session on ASU

drugs was on compliance of pharmacopoeial standards and was chaired by Mr. Verghese Samuel, Joint Secretary to Government of India, Ministry of Health & Family Welfare, Department of AYUSH. The post lunch technical session on the status of quality control and GMP compliance for ASU products in States was chaired by Mr. Shiv Basant, Joint secretary, Department of AYUSH. In the evening there was a group discussion by State enforcement officials and industries for formulation of plan of action for quality assurance for ASU drugs.

The first technical session of the second day discussed the industrial perspective of compliance of GMP and quality control of ASU products. The session was chaired by Dr. Surender Singh, Drug Controller General of India and co-chaired by Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine. The following session comprised the stakeholders consultation on AYUSH schemes for drug quality control and AYUSH industry clusters and was chaired by Dr. S.K. Sharma, Adviser, Department of AYUSH and was co-chaired by Mr. S.K. Chadha, Director, Department of AYUSH.

At the wrap-up session Mrs. Anita Das, Secretary, Department of AYUSH, in her concluding remarks, urged all the stakeholders of the ASU & H drug industry and enforcement agencies to join together and make optimal use of R & D capabilities and infrastructure available in the country and make quality assurance of the ASU & H drugs a national movement.

Dr. Narendra Bhatt and Dr. C. Nayak spoke on the way forward for quality control and standardization of ASU drugs and homoeopathic drugs, respectively. Mrs. Meenakshi Negi, Director, Department of AYUSH presented the recommendations of the workshop.

Workshop on Dietotherapy in Unani Medicine in New Delhi

The Council organized a workshop on dietotherapy in Unani Medicine in New Delhi on 13 January 2009. Mrs. S. Jalaja, Secretary to Government of India, Ministry of Health and Family Welfare, Department of Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) inaugurated the workshop.

In her inaugural address Mrs. Jalaja emphasized the need for optimal use of Unani Medicine in ensuring essential healthcare delivery to the public. She said that Unani Medicine as well as other Indian systems of Medicine should be integrated with the country's main healthcare delivery system.

Mrs. Jalaja said that Government of India through the National Rural Health Mission (NRHM) was trying its best to make quality healthcare services accessible to the masses at an affordable cost. She said that to make the NRHM successful it was essential to take optimal advantage of the treasures of classical knowledge embedded in Unani Medicine and other native medicines for the prevention and cure of diseases as well as preservation of good health. She also stressed the need for developing education as well as research in Unani Medicine in tune with contemporary global demands. She said that there was an urgent need for validating the specific strengths as well as the fundamentals of the system on modern scientific parameters so that the system could be accepted widely. The Secretary

asked the CCRUM to develop meaningful collaborations with renowned public and private institutions of scientific research in the country.

Presiding over the inaugural function of the workshop, Dr. G.N. Qazi, Vice-Chancellor, Jamia Hamdard, New Delhi, said that researchers of Unani Medicine should explore newer possibilities of scientific research in their system and develop that in accordance with the contemporary science. He highlighted the importance of nutrition and recent developments taking place in nutritional research. He stressed the need for subjecting the Unani medical knowledge on dietotherapy to modern scientific scrutiny.

On this occasion Hakim Mazhar Subhan Usmani – an eminent scholar and practitioner of Unani Medicine in Delhi – threw important light on the concept of nutrition and dietotherapy in Unani Medicine. Dr. Nandini K. Kumar, Programme Director, National Institute of Health, USA, and Consultant to Indian Council of Medical Research (ICMR) said that the collaboration between the CCRUM and the ICMR had started yielding encouraging results. She also underscored the need for further collaborations between the two Councils in research on dietotherapy.

In his welcome address, Dr. Mohammed Khalid Siddiqui, Director, CCRUM highlighted the Council's progress in its research programme. He also mentioned about the Council's research collaborations with Council of Scientific and Industrial Research (CSIR), National Research Development Corporation (NRDC), Indian Council of Medical Research (ICMR) and Jamia Hamdard. He said that to further strengthen its research programme the Council would like to develop more collaboration with other leading academic and scientific institutions in the country.

At the valedictory session Mr. Satyendra Singh, Joint Secretary Health and Medical Education, and Director, Unani Medical Services, Government of Uttar Pradesh was the chief guest. In his valedictory address Mr. Singh said that dietotherapy had deep roots in Indian and other oriental civilizations. He informed that Government of Uttar Pradesh had recently set up a separate Directorate of Unani Medicine to boost all round development of the system. He said that his Directorate would like to collaborate with the CCRUM to further expand and strengthen the presence of Unani Medicine in the State.

Earlier, in his introductory remarks, Dr. Mohammed Khalid Siddiqui, Director, CCRUM made a special mention of the Council's activities in Uttar Pradesh. He said that the Council's Central Research Institute of Unani Medicine at Lucknow had emerged as the leading centre of Unani medical research in Northern India.

Presiding over the valedictory function, Prof. Hakim Syed Zillur Rahman, President, Ibn Sina Academy, Aligarh emphasized the need for gathering and publishing all the classical knowledge of Unani Medicine concerning food and nutrition and dietotherapy. He said classical literature on food and dietetics in Unani Medicine was scattered in various parts of the country and abroad.

The workshop had two technical sessions in which about 25 papers on various aspects of food and nutrition and dietotherapy were presented by the researchers from different centres of the CCRUM, Aligarh Muslim University, Aligarh and Jamia Hamdard, New Delhi.

Seminar on intellectual property protection and management in New Delhi

The Central Council for Research in Unani Medicine (CCRUM) organized a two-day Regional Seminar on Intellectual Property Protection and Management in New Delhi on 11 and 12 February 2009 in collaboration with National Research Development Corporation (NRDC). The seminar aimed to create awareness about issues relating to Intellectual Property Rights (IPR) among researchers, academicians and students of Unani Medicine and the drug industry.

Inaugurating the seminar, Mrs. S. Jalaja, Secretary to Government of India, Ministry of Health & Family Welfare, Department of Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) emphasized the need for safeguarding intellectual property and its commercialization. She said that the IPR was a very important issue of present times and needed to be publicized widely for creating a public awareness about its importance and benefits.

The Secretary urged the researchers and scholars of Unani Medicine and other indigenous medicines to have a clear understanding of the IPR and convert their researches into commercially viable technologies that would benefit them individually as well as the society at large. She asked the CCRUM to make special efforts for creating a better intellectual environment in the Unani medical world for proper understanding and appreciation of the IPR related issues.

Dr. G.N. Qazi, Vice Chancellor, Jamia Hamdard, New Delhi presided over the function. In his address Dr. Qazi stressed that the scientists engaged in research in Unani Medicine and other traditional medicines as well as the drug industry must realize the value of the intellectual property related to these systems and take suitable measures for its proper management.

In his introductory address, Mr. Somenath Ghosh, CMD, NRDC, New Delhi said that in the 21st century a technological change and globalisation has reshaped the world economy where intellectual property has played a key role.

Earlier, in his welcome address, Dr. Mohammed Khalid Siddiqui, Director, CCRUM said that the CCRUM had collaborated with the NRDC to create awareness among the Unani researchers, academics and industry about the IPR and patents related issues. He said that the CCRUM had so far filed provisional patents for 29 Unani drugs including 17 kit-medicines developed by the Council and 12 other research drugs used for various common ailments. He said that the Council was also contributing to the development of Traditional Knowledge Digital Library (TKDL) relating to Unani Medicine.

Dr. A.K. Nagpal, Chairman, Batra Group of Hospitals also shared his views about IPR on this occasion. Dr. M.Z. Abdin, Head, Centre for Transgenic Plant Development, Jamia Hamdard thanked the guests and delegates.

After the inauguration Mr. C.M. Gaind, Senior Manager (IPR) and Head of the IPR Division from NRDC, New Delhi in his presentation gave an overview of the IPR spectrum in India. Ms. Sanjit Kaur Batra, IPR specialist at the US Embassy in New Delhi, delivered her talk on copyright protection and registration in India. Mr. S. Asthana, Examiner of Patents and Designs at the Patent Office in

New Delhi explained the overall structure and functioning of the patenting system in India. Mr. P. S. Rao, Assistant Controller of Patents and Designs, Patent Office, New Delhi made a presentation on “Design Registration: A Marketing Tool for Industry. Dr. S. Kochhar, Principal Scientist, Indian Council of Agricultural Research (ICAR), New Delhi delivered a talk on biodiversity, traditional knowledge and benefit sharing in the IPR era.

The second day (12 February) started with the presentation of Mr. Sarfaraz-Ur-Rahman, Examiner of Patents and Designs, Patent Office, New Delhi on “Determining Novelty, Inventiveness and Utility of Inventions”. Mr. V. K. Bali, Senior Technical Director, NIC, New Delhi gave his talk on search for state-of-the-art searches in the field of inventions. The following lecture on disclosure of invention for patent protection was delivered by Dr. Sunita Rani, Examiner of Patents and Designs from Patent Office, New Delhi. Mr. C. M. Gaind, Senior Manager (IPR) and Head of the IPR Division, NRDC, New Delhi delivered a talk on Patenting Abroad”. Dr. Sudhir Kochhar, Principal Scientist, ICAR, New Delhi delivered his talk on Protection of Plant Varieties and Farmers’ Rights Act, 2001. Mr. V.K. Jain, Deputy Manager NRDC, New Delhi in his lecture on the IP Issues in Technology Transfer explained the concept of technology transfer and as to how the technology transfer takes place.

About 300 participants attended the seminar. The participants included researchers from the CCRUM, faculty and students of Jamia Hamdard, officials from the Government etc.

Workshop on project writing and publication ethics in New Delhi

The Central Council for Research in Unani Medicine (CCRUM) organized a workshop on project writing and publication ethics at its headquarters in New Delhi on 18 March 2009. The workshop was inaugurated by Prof. Y.K. Gupta, Head, Department of Pharmacology, All India Institute of Medical Sciences (AIIMS), New Delhi.

Dr. Mohammed Khalid Siddiqui, Director, CCRUM, in his welcome address, emphasized the importance of developing skills of writing and other forms of communication and adhering to publication ethics in writing research papers and scientific projects.

Prof. Y.K. Gupta, Head, Department of Pharmacology, AIIMS, delivered an exhaustive talk on pre-requisites and regulatory requirements for clinical trials of Unani drugs. Dr. Nandini K. Kumar, Consultant, Indian Council of Medical Research (ICMR) gave an informative lecture on methods of writing projects. Dr. Satyanarayan, Deputy Director General, ICMR delivered his talk on publication ethics. Dr. K.M.Y. Amin gave his lecture on writing scientific papers. Dr. O.P. Agarwal, Consultant, ICMR delivered a talk on essential elements of project writing. An informative talk on organization, planning and execution of multicentric clinical trial projects and management of clinical trial data was presented by Prof. V. Srinivas, AIIMS, New Delhi. Prof. Nina Khanna, AIIMS talked about scoring methods in clinical trial in skin diseases. A number of participants from the Council, local Unani colleges and the pharmacy college attended the workshop.

Farmer's meet on cultivation of medicinal plants in Kancheepuram District, Tamil Nadu

The Council's researchers from its Regional Research Institute of Unani Medicine (RRIUM), Chennai organized a farmer's meeting on cultivation and marketing of medicinal plants at Sunguvarchathiram, Sriperumputhur Block of Kancheepuram district in Tamil Nadu on 30 July.

In his inaugural speech, Mr. Nicholus, Vice Chairman, Sriperumputhur Block, highlighted the problems faced by the farmers of Sunguvarchathiram and adjacent villages in recent years due to high input cost in the agricultural crops.

The chief guest for the occasion Dr. A. Ameer Jahan, Chairman of the All India Medicinal Herbs Cultivators, Processors, Manufactures and Research Industrial Co-operative Society Ltd., Tamil Nadu, delivered the keynote address. He emphasized that many of the medicinal plants like *Withania somnifera* Dunal (Asgand), *Vinca rosea* L. (Sadabhar) *Cassia senna* L. (Senna), *Aloe vera* L. (Gheekawar) etc. are of high demand in local as well as international markets. He advised the farmers to produce value-added herbal products like gel, powder, juice, extracts and oils of medicinal plants, which sell at high prices, for their prosperity.

Mr. G. Kalaimani, Assistant Director of Agriculture, highlighted the importance of cultivation of medicinal plants. Shri Chandratan, Agricultural Officer, Sriperumputhur block, discussed the use of medicinal plants in traditional medicines. Mr. Murugeswaran, Research Officer (Botany), RRIUM, Chennai informed the gathering about cultivation of important Unani medicinal plants such as Asgand (*Witania somnifera* Dunal), Gurmarbuti (*Gymnema sylvestre* R.Br.), Khulanjan (*Alpinia galanga* Willd.), Gheekawar (*Aloe vera* L.) etc. being undertaken by the Institute. He also informed about the schemes and financial aid offered by the National Medicinal Plants Board (NMPB), New Delhi, for promoting cultivation of medicinal plants. Dr. K. Venkatesan, Senior Scientific Assistant (Botany) at the Institute developed good liaison with farmers during the event for follow-up. Hakim Jameel Ahmed, Research Officer (Unani) at the Institute highlighted the importance of medicinal plants and explained the basic principles of Unani Medicine. About 40 farmers belonging to Sunguvarchathiram, Mulachur and adjacent villages of Sriperumputhur block participated in the day-long meeting. All the participants were provided with cultivation techniques for five important medicinal plants. The Mulachur village was proposed to be adopted for the cultivation and marketing of medicinal plants programme

Farmer's meeting on cultivation of medicinal plants in Nalgonda District, Andhra Pradesh

The Council's Central Research Institute of Unani Medicine (CRIUM), Hyderabad organized a farmer's meeting on awareness and field scale cultivations of medicinal plants at Choutuppal Mandal of Nalgonda District in Andhra Pradesh on 12 August 2008.

Inaugurating the meeting, Mr. Satyanarayana, Agriculture Officer, Choutuppal Mandal called upon the farmers to undertake large scale cultivation of medicinal plants suitable to the agro-climatic



conditions of the region. Dr. Shastri, Research scientist from Central Institute of Medicinal and Aromatic Plants (CIMAP), Hyderabad highlighted the importance of common medicinal plants widely growing in the forests of Andhra Pradesh and emphasized the need for cultivation of selected medicinal plants having high demand to help farmers make additional income. He also invited farmers to CIMAP for short training programmes for the cultivation and extraction procedures for perfumery oil yielding plants and its buy back policy to the farmers for various reputed pharmaceuticals companies.

Hakim M.D. Alam, Deputy Director Incharge and Dr. Mohammed Ataulah Shareef, Deputy Director (Unani), CRIUM, Hyderabad encouraged farmers to take up cultivation of Unani medicinal plants with the financial support and subsidiary for seeds, seedling and farm yard manure and fertilizers from State Medicinal Plants Board at Hyderabad.

Mr. A.L. Pandu Rao, Deputy Executive Officer from State Medicinal plants board also explained the easy methods for getting different financial aids from the medicinal plants board with different schemes. Dr. V.C. Gupta and Dr. Shaik Imam, both Research Officers (Botany) at the Institute, also spoke on various aspects of medicinal plants and emphasized the need for large scale cultivation and the importance of Unani medicinal plants such as Mako (*Solanum nigrum* Linn.); Real Ashoka (*Saraca indica* Linn.); Kasni (*Cichorium intybus* Linn.) and Sataver (*Asparagus racemosus* Wild.).

At the meeting some important medicinal plants were also exhibited. Some 100 farmers and growers of medicinal plant attended the meeting. Others who participated in the meeting included Mr. Ranga Rao, MPDO and Mr. Srinivas Rao, MRO, Choutuppal Mandal of Nalgonda District. In addition, the farmers were given seedlings of some important medicinal plants free of cost. They were also provided with free literature in Telgu on cultivation practices and marketing of some high demand medicinal species. The participants were also educated about authentic sources of germplasm, signs and symptoms of common diseases of important medicinal crops and their treatment with organic pesticides and fertilizers.

Farmer's meet on cultivation of medicinal plants in Aligarh District, Uttar Pradesh

The Council's Regional Research Institute of Unani Medicine (RRIUM), Aligarh organized a farmer's meeting in Akrabad Development Block of Aligarh district in Uttar Pradesh on 18 February 2009. The meeting aimed to create awareness on cultivation of medicinal plants among the farmers.

Mr. Atipal Singh Yadav, Pramukh, Chhetra Panchayat Akrabad, District Aligarh inaugurated the meeting and said that in view of the increasing demand for plant based pharmaceuticals, farmers should take up cultivation of medicinal plants. He also emphasized the need for suitable training to the farmers for herbal cultivation.

Presiding over the programme, Mr. Jagvir Singh Yadav, Block Development Officer (BDO), Akrabad said that there were many agribusiness opportunities in cultivation of medicinal crops and encouraged especially the marginal farmers to undertake cultivation of high demand medicinal plants to raise their income. He appreciated endeavors of RRIUM, Aligarh for organizing the present meeting in

the rural area. Besides, Dr. Mahendra Singh, Scientist (Agriculture), Krishi Vikas Kendra, Chherat, Aligarh spoke on cultivation and marketing of medicinal plants. He provided technical know-how on agro-techniques and marketing of various medicinal crops.

On this occasion, Dr. Latafat Ali Khan, Deputy Director Incharge, RRIUM, Aligarh assured all possible support from the Institute to farmers interested in initiating cultivation of medicinal plants. Mr. Zaheer Anwar Ali, Research Officer (Botany) and Hakim Sarfaraz Ahmad, Research Officer (Unani) at RRIUM, Aligarh also spoke. The two officers recommended 20 species of medicinal plants for cultivation as per agro-climatic conditions of the area, and provided detailed information on cultivation as well as marketing of medicinal plants in particular Asgand and Gulnar Farsi.

At the meeting some potted medicinal plants of commercial value were also displayed. These included Asgand (*Withania somnifera* (L.) Dunal), Babchi (*Psoralea corylifolia* L.), Babuna (*Matricaria chamommilla* L.), Bach (*Acorus calamus* L.), Gheekawar (*Aloe vera* (L.) Burm. f.) Wall. Ex Nees), Kalonji (*Nigella sativa* L.), Karanjwa (*Caesalpinia bonducella* (L.) Roxb.), Isabgol (*Plantago ovata* Forak.), Mako (*Solanum nigrum* L.) Muquail (*Commiphora wightii* (Arn.) Bhandari), Satawar (*Asparagus racemosus* Willd.), Sudab (*Ruta graveolens* L.), etc. Literature in Hindi on cultivation practices and marketing of some medicinal plants, which had high demand for manufacturing many drugs of ISM, was also distributed among the farmers. About 150 farmers attended the meeting.

Farmer's meet on cultivation of medicinal plants in Tiruvallur District, Tamil Nadu

The Council's Regional Research Institute of Unani Medicine (RRIUM), Chennai organized a training programme for farmers on awareness, cultivation and marketing of medicinal plants at Kondancheri Village, Kadampathur Block, Tiruvallur District, Tamil Nadu on 16 March 2009. A free Unani health camp was also put up on the occasion.

Dr. A. Ameer Jahan, Chairman of the All India Medicinal Herbs Cultivators, Processors, Manufacturers and Research Industrial Co-operative Society Ltd. was the chief guest for the occasion. In his keynote address, he stressed the need for cultivation of the medicinal plants like *Withania somnifera* Dunal. (Asgand), *Vinca rosea* Linn. (Sadabhar), *Cassia senna* Linn. (Senna), *Aloe vera* Linn. (Geekawar) etc. that were in high demand in the local market as well as the global market. He also asked the participants to also attempt to produce some value added herbal products like *Aloe vera* gel, powder, juice, extractions and oils of some other important medicinal plants that were commercially more beneficial to the farmers.

Inaugurating the programme, Mr. A. Fransis, President, Kondancheri Village said that there was a need for providing suitable know-how and proper training for cultivation and marketing of the medicinal plants.

Mr. Selvamuthu, Deputy Agriculture Officer, Kadampathur Block spoke on the importance of the medicinal plant's cultivation. Mr. Jayakumar, Assistant Agricultural Officer, Kadampathur Block talked about some important medicinal plants used by the villagers.



Mr. Murugeswaran Research Officer (Botany), RRIUM, Chennai welcomed the participants and threw light on cultivation activities of important Unani medicinal plants going on at the institute under the Council such as Asgand (*Withania somnifera* Dunal.), Gurmarbutti (*Gymnema sylvestre* R.Br.), Khulanjan (*Alpinia galanga* Willd.), Geekawar (*Aloe vera* Linn.), etc. He also highlighted the scheme and financial aids offered by National Medicinal Plants Board, New Delhi, for promoting cultivation of medicinal plants. Hakim Zaheer Ahmad, Research Officer (Unani), RRIUM, Chennai explained the basic principles and preventive, curative methods of the Unani Medicine. Hakim Aijaz Ahmed, Research Officer (Unani) managed the health camp.

About 50 farmers belonging to Kondancheri, Perampakkam and Kadampathur and adjacent villages of Kondancheri participated in the programme. All the participants were provided agronomical notes on five important medicinal plants. Seeds of Asgand (*Withania somnifera* Dunal.) were given to the village president for experimental cultivation. About 130 people underwent health check-up by the Council's Unani physicians and were provided Unani treatment for their complaints free of charge at the Unani health camp organized at the occasion.

Guest lecture on prevention of heart diseases

The Council's Central Research Institute of Unani Medicine, Hyderabad organized a guest lecture on prevention of heart related ailments by a senior cardiologist, Dr. Meeraji Rao at the institute on 28 August 2008. Dr. Rao is attached with Nizam's Institute of Medical Sciences (NIMS) and Yashoda Group of Hospitals, Hyderabad.

In his lecture Dr. Rao stressed the need for adopting healthy lifestyles including healthy diet and proper exercise for a healthy heart. He said that the present day sedentary lifestyle had become a predisposing factor for various cardiac ailments. Irregular food habits with junk food enriched with fatty materials and stressful life style are causing heart problems.

Dr. Rao also informed that smoking and alcohol consumption are the other major factors responsible for heart diseases. The lecture provided important information on preventing heart diseases and keeping the heart healthy.

Health camp in Mumbai

The Council's Regional Research Institute of Unani Medicine (RRIUM), Mumbai organized a free Unani health camp at the Vikhroli Park in the North-West of Mumbai on 2 August 2008. The area has a population of about 20,000 of including about 5000 people belonging to Scheduled Caste and Scheduled Tribes.

At the camp 261 cases – 135 male and 126 female – were registered, out of which 64 cases were investigated for monsoon-related diseases. The cases attended to suffered from different diseases such as joint pain, cold and cough, fever, skin diseases, digestive disorders, pain in abdomen, hepatitis, diabetes, asthma etc. The patients were treated with Unani kit medicines developed by the Council. They were also educated about Unani concepts of prevention of disease and preservation and promotion of health.

Health camp at Magh Mela in Allahabad

The Council's Regional Research Centre (Unani) Allahabad organized a health camp at Magh Mela at Sangam, Allahabad during 15 January to 7 February 2009.

The camp, organized in collaboration with an Allahabad based NGO, the Utthan Centre, was inaugurated on 15 January by Dr. Shankar Charan Tripathi, in the presence of Dr. D.N. Tewari, Deputy Chairman of Planning Commission, Govt. of Chattisgarh, Dr. K.K. Tiwari, Secretary, Utthan – a local NGO, and Prof. Dr. M.S. Hussain, Principal, State Unani Medical College, Allahabad. The diabetic health camp was formally inaugurated by Dr. D.N. Tewari. On this occasion a workshop on diabetic diet and exercise was also organized. Diarrhoea and viral fever camp was inaugurated by Dr. K.K. Tiwari.

The Council's health camp was visited by many VIPs. The visitors included the MLAs, officials from the Health Department, the Vishwaguru and delegates from different countries including America, Britain, Russia etc. During the Mela a total of 14804 patients were treated in the Council's health camp and mobile Clinical Research OPD. Out of them, 7270 were treated in the camp and 7634 cases in the mobile OPD. The mobile team visited door to door in the Kalpwasi area and covered 32 Akharas and Ashrams.

Medical relief for flood-affected Bihar

The Central Council for Research in Unani Medicine deputed six teams of physicians and paramedical staff in the flood-affected areas of Bihar including Saharsa, Madhepura, Katihar, Ararya, Purniya and Supol in September 2008 to provide free Unani treatment to the victims of the flood.

The team consisting of physicians from Central Research Institute of Unani Medicine, Lucknow, Regional Research Institutes of Unani Medicine at New Delhi, Patna, Bhadrak and Aligarh, and Clinical Research Units at Allahabad and Meerut. The teams organized health camps in collaboration with the District authorities during 8 September and 19 October 2008.

The teams attended a large number of patients mostly suffering from fever, diarrhea, gastrointestinal disorders, indigestion, skin infection etc. The Council kit medicines such as Qurs-e-Bel, Qurs-e-Zehar Mohra, Capsule Mubarak, Qurs-e-Haiza, Sufoof-e-Ishal, Sufoof-e-Hazim, Marham-e-Kharish etc. showed significant therapeutic effects in subsiding the disease within three-four days of the treatment. Apart from organizing camps, the teams also made door-to-door visits to provide treatment in the rehabilitation camps.

During the camping, 3329 patients in Ararya, 2814 in Purniya, 1845 in Supol, 6890 in Katihar and 3282 in Saharsa were treated. The kit medicines developed by the Council proved to be of immense therapeutic value in the management of the diseases produced as a result of the flood.

CELEBRATION OF NATIONAL AND INTERNATIONAL DAYS, WEEKS AND FORTNIGHTS

Hindi Fortnight Celebrations at CCRUM Headquarters

Use of Hindi language in official as well as personal communication should further increase. This was emphasized by Mrs. Meenakshi Negi, Director, Department of Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH), Ministry of Health and Family Welfare, Government of India at the Hindi fortnight prize distribution ceremony held at the Central Council for Research in Unani Medicine (CCRUM) headquarters in New Delhi on 25 September 2008.

Addressing the CCRUM staff as the Chief Guest for the occasion, Mrs. Negi said that Hindi should develop not merely as the official language of the nation but also as a tool for effective communication both official and personal. She said that better opportunities should be created for independent and multifaceted development of Hindi and also other regional languages of the country. She urged the CCRUM to become active partner in the national endeavour to enrich the official language. She appreciated the Council's efforts to publish popular literature on Unani Medicine in Hindi and other regional languages, and said that the research findings of the Council too should be published in Hindi to reach a wider readership. She congratulated the Council for organizing various contests relating to Hindi for its employees. She was also for organizing such events more frequently at national as well as regional levels.

Earlier welcoming Mrs. Negi, Dr. Mohammed Khalid Siddiqui, Director, CCRUM said that the Council has been promoting the use of Hindi in official work right from the beginning. Over the years the use of Hindi in the Council has increased manifold and at present most of the employees are capable of using the language in official work. In fact some of them have taken up in their leisure time even creative writing in the language. He said that the Council had been constantly trying to encourage its employees even in non-Hindi belt to learn and use Hindi in their work.

Dr. Siddiqui informed that the Council had published some of its booklets, brochures, posters and other publicity material in Hindi as well as other national and international languages to carry the message of Unani Medicine far and wide. He said that the Council intended to publish in Hindi as well as other languages books and monographs based on the studies going on in its different research programmes.

On this occasion Mrs. Meenakshi Negi also gave away prizes to the winners of the Hindi contests organized by the Council at the headquarters on 16 and 17 September 2008.

Mr. Mehr-e-Alam Khan, who was Coordinator of the CCRUM Hindi fortnight celebrations, anchored the ceremony. During the Hindi fortnight, the Council had organized debate, essay writing, poetry, and translation competitions in Hindi for its staff. Besides, a Shrutlekh (dictation) competition was also organized for the Class IV employees.

Besides, the regional centres functioning under the Council in parts of the country also celebrated the Hindi fortnight and organized various functions to promote Hindi in official work.

International Day for the Elderly

The Council celebrated the International Day for the Elderly at its centres in different parts of the country to generate awareness about the health problems of the elderly population on 1 October 2008. The International Day is dedicated to honor, respect and care for the world's elderly. In 1990 the United Nations General Assembly designated October 1st as the International Day for the Elderly, also known as "International Day for Older Persons".

To mark the day the Council's centres organized lectures on geriatric problems and special health surveys and health camps for the elderly where they were examined and treated by the Council's Unani physicians free of charge.

The Council had started special out-patient department (OPD) facility for geriatric patients at its research centres located at Hyderabad, Chennai, Bhadrak, Patna, Aligarh, Mumbai, Srinagar, Kolkata, New Delhi, Allahabad, Karimganj, Silchar (Assam) and Edathala (Kerala) on every Monday in October 2007, although the geriatric patients were being attended to at the general OPD at these centres since 2000. General weakness, indigestion, constipation, anorexia, joints pain were some of the common problems observed in the patients attended at these centres. The facility aims to build confidence among the elderly and to improve their general health and mobility.

The Council had also conducted a WHO-sponsored multi-centric trial of some Unani drugs for healthy aging at its centres. The study conducted on 600 patients for a period of three years showed significant improvement in the general health status of the elderly population as well as reduction in occurrence of any disease during the trial period. The Council's kit medicines showed significant therapeutic effects in relieving specific conditions such as Habb-e-Muqawi in general weakness, Sufoof-e-Hazim in indigestion, Habb-e-Tinkar in constipation, Habb-e-Mubarak in seasonal fever. Some of the compound Unani formulations such as Majoon-e-Flasfa, Jawarish Shahi, Majoon-e-Masikul Boul, Majoon-e-Chobchini, Khameera Gaozaban, Dawaul Misk Sada proved very efficacious.

The International Day for the Elderly was observed at the Council's Central Research Institute of Unani Medicine (CRIUM), Hyderabad; Regional Research Institute of Unani Medicine (RRIUM), Chennai; RRIUM, Srinagar; RRIUM, Mumbai; Regional Research Centre of Unani Medicine (RRCUM), Allahabad; and Literary Research Institute of Unani Medicine (LRIUM), New Delhi. About 1000 elderly people benefited from the health camps put up at these centres.

CCRUM celebrates World AIDS Day

The Central Council for Research in Unani Medicine (CCRUM) celebrated the 20th anniversary of the World AIDS Day (WAD) on 1 December 2008. The Council's activities organized on the WAD included talks and discussions on various aspects of HIV/AIDS and exhibitions highlighting the WAD 2008 theme "Lead – Empower – Deliver".

During the past few years the Council has been actively participating in raising public awareness about the menace of HIV/AIDS and spreading the message as to how the principles of healthy living enunciated in Unani Medicine can help prevent the deadly disease.



December 1, 2008 marked the 20th anniversary of World AIDS Day (WAD). On the occasion of the WAD 2008, Dr. Mohammed Khalid Siddiqui, Director, CCRUM, in his message to the Council's staff, said that practitioners and researchers of Unani Medicine should become active partner in the global endeavours to prevent and control the increasing threat of HIV/AIDS. He said that it was of paramount importance to propagate the useful information about the spread, prevention and control of the deadly disease widely. He said that there was an urgent need to build international collaborations to fight HIV/AIDS – the biggest health challenge of the present times.

Dr. Siddiqui said that the Council was trying to publicize the Asbab-e-Sitta Zarooriya – the six essentials described in Unani Medicine for the prevention of disease and promotion of good health – through various Information, Education and Communication (IEC) activities. He emphasized to scientifically explore the wealth of Unani Medicine to find dependable drugs for AIDS.

The various centres of the CCRUM that celebrated the WAD actively included its Literary Research Institute of Unani Medicine, New Delhi; Central Research Institutes of Unani Medicine (CRIUM), in Hyderabad and Lucknow; and Regional Research Institutes of Unani Medicine at Srinagar, Aligarh, Bhadrak, Chennai, Mumbai and Patna.

World AIDS Day at CRIUM, Hyderabad

The Council's Central Research Institute of Unani Medicine (CRIUM), Hyderabad celebrated World AIDS Day on 1 December 2008. The Institute organized an exhibition on HIV-AIDS to enhance public awareness about the disease. The exhibition also screened audio visual material collected from Andhra Pradesh AIDS Control Project, Directorate of Medical Sciences, Koti. At the exhibition posters highlighting the gravity of HIV-AIDS were displayed in four languages – Telugu, Urdu, Hindi and English. The exhibition displayed both the mode of transmission of the AIDS virus and how the virus does not transmit.

World Diabetes Day at CRIUM, Hyderabad

The Council's Central Research Institute of Unani Medicine (CRIUM), Hyderabad celebrated the World Diabetes Day on 14 November by organizing an awareness programme at Karmikanagar slum, Borabanda Hyderabad.

At this occasion lectures were organized on prevention and treatment of diabetes by senior officers at the Institute. The lectures covered the importance of the day, warning signs of diabetes and precautionary measures to fight the disease, importance of food and exercise and morning walk etc. in preventing diabetes. In the free diabetes testing camp organized on the occasion a total of 100 people underwent the diabetes test. Twenty of them were found to be diabetic.

International Women's Day celebrations

The Central Council for Research in Unani Medicine (CCRUM) under its public private partnership initiatives for rejuvenation of Unani Medicine joined hands with Jamia Hamdard, New Delhi and

organized Women and Child Health Week in the Capital during 6 and 12 March 2009 to celebrate International Women's Day. Different centers of the Council also celebrated the Women's Day on 8 March 2009.

The Council in collaboration with Jamia Hamdard organized free health check-up and treatment camps for Women and Children on 8 March 2009 at four different localities in Delhi. The main emphasis at these camps was on providing health check-up facilities to women between the age of 18 and 60 years. The health camp organized at the premises of Hamdard Public School, Talimabad, Sangam Vihar, was inaugurated by Mr. Saiyid Hamid, Chancellor, Jamia Hamdard. The Vice Chancellor, Dr. G.N. Qazi also graced the occasion. Dr. Mohammed Khalid Siddiqui, Director, CCRUM also visited the camp. He also visited the health camps organized by the Council in other parts of Delhi.

The physicians both from CCRUM and Majeedia Hospital, Jamia Hamdard catered to about 2000 people in different localities. Unani medicines distributed free of charge at these camps were provided by the CCRUM. Besides, an e-essay writing competition and poster drafting competition on woman and child health were also organized. The poster competition, held at Faculty of Pharmacy, Jamia Hamdard attracted participants from amongst the students of various faculties of Jamia Hamdard, Jamia Millia Islamia, University of Delhi.

The Council's institutes that observed the Women's Day with great fervor included Central Research Institute of Unani Medicine (CRIUM), Hyderabad; Regional Research Institute of Unani Medicine (RRIUM), Chennai; RRIUM, Aligarh; RRIUM, Patna; RRIUM, Mumbai; RRIUM, Kolkata; and Regional Research Centre of Unani Medicine (RRCUM), Allahabad. These centres organized health camps for women and children, exhibitions, public lectures, walks, and essay and poster competitions on themes highlighting women's and children's health. From the health camps organized at these centres over a thousand people benefited.

PARTICIPATION IN CONFERENCES, SEMINARS, WORKSHOPS, EXHIBITIONS, FAIRS ETC.

International Traditional Medicine Congress in Mazandaran, Iran

A delegation of Indian scholars of Unani Medicine led by Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine (CCRUM) attended the International Congress of Traditional and Complementary Medicine (ICTCM-2008) held in Mazandaran, Iran from 28 to 31 October 2008.

The Governor of Mazandaran inaugurated the congress, and Dr. Hamid Mohammad Jafari, Vice Chancellor; Mazandaran University of Medical Sciences presided over the inaugural ceremony.

The conference was organized by Mazandaran University of Medical Sciences in collaboration with French Society of Iran Studies at the Traditional and Complementary Medicine Research Centre, Sari, Mazandaran.



Dr. Mohammed Khalid Siddiqui, Director, CCRUM made a presentation on the status of Unani Medicine in India. He threw light on the salient features of the progress made in India in different areas of Unani Medicine including education, research, healthcare and drug control, and industry. He also highlighted the success stories of the CCRUM in the fields of clinical research, quality control and standardization of Unani drugs, survey and cultivation of medicinal plants, and literary research covering translation, editing and publication of important classics of Unani Medicine originally written in Arabic and Persian languages. The congress strongly recommended developing collaboration between various institutions of Traditional Medicine (Tibb-e-Sunnati) in Iran and Ministry of Health and Family Welfare, Government of India.

At a session, Dr. Khalid Mahmood Siddiqui, Assistant Director (Unani) at the CCRUM headquarters presented his paper on the contribution of Rhazes to Clinical Medicine. Other Indian delegates who presented their work at the conference included Prof. Syed Zillur Rahman, President, Ibn Sina Academy, Aligarh; Prof. Shakir Jamil, and Dr. S.M. Abbas Zaidi both from Jamia Hamdard, New Delhi.

The congress, among other things, recommended starting of colleges for imparting education and training in traditional and complementary medicine. It also recommended establishing hospitals for training of doctors of Tibb-e-Sunnati. The conference also recommended sending scholars and students from Iran to India for training and education in traditional and complementary medicine.

International Integrative Medicine Conference in Karachi, Pakistan

Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine (CCRUM) led a Government of India delegation to the International Integrative Medicine Conference held in Karachi, Pakistan from 24 to 26 November 2008. The delegation consisted of Dr. Syed Asad Pasha, Deputy Adviser (Unani), Department of AYUSH, Ministry of Health and Family Welfare, Government of India, and four officers from the CCRUM. Besides, Prof. Hakim Syed Zillur Rahman, President, Ibn Sina Academy of Medieval Medicine and Science, Aligarh, and faculty members from Aligarh Muslim University (AMU), Aligarh, and the Jamia Hamdard, New Delhi also attended the conference.

The conference focusing on the theme of Expanding the Horizon of Integrative Medicine strongly recommended that India and Pakistan should develop collaborative efforts for the promotion of Unani Medicine in the two countries. The conference also decided to form an International Association for Unani Medicine (IAUM) to promote the system internationally. The conference was organized by Hamdard Foundation Pakistan in collaboration with Pakistan Association for Eastern Medicine (PAEM) and Hamdard University, Karachi.

Prof. Hakim Syed Zillur Rahman, President, Ibn Sina Academy of Medieval Medicine and Science (ISAMMS), Aligarh, India in his keynote address traced the history and development of Unani Medicine in India. He especially highlighted the vital role played by Hakim Sharif Khan and Hakim Ajmal Khan in the revival of Unani Medicine in the British period.

Dr. Mohammad Khalid Siddiqui, Director, CCRUM and Dr. Hamidollah Afrasiabian, delegate from Iran, jointly chaired the session consisting of memorial lectures on Hakim Abdul Hameed. Addressing

the session Dr. Mohammad Khalid Siddiqui paid rich tributes to Hakim Abdul Hameed and highlighted his services in the promotion of Unani Medicine in India. He said that India had emerged as the world leader in Unani Medicine thanks to the increasing funds and support from Government of India for the multifaceted development of the system. The country has a wide network of excellent educational, research, healthcare and pharmaceutical institutions of Unani Medicine. The CCRUM has made its mark as the leading research organization in the field.

Dr. Siddiqui said that the CCRUM had made considerable progress in its various research programmes covering clinical research, drug standardization, survey and cultivation of medicinal plants and literary research and had several success stories to its credit. He lauded the contribution of Hakim Abdul Hameed in the development of Unani medical education and research and pharmaceutical industry in India.

A presentation on the present status of Unani Medicine in India was made by Dr. Khalid Mehmood Siddiqui, Assistant Director (Unani) at the CCRUM headquarters. He also presented a research paper. Three other researchers from the CCRUM Hakim S.M. Hassan, Research Officer (Unani), Central Research Institute of Unani Medicine (CRIUM), Lucknow, Mr. Shamsul Afrin, Research Officer (Chemistry) from CCRUM headquarters, and Hakim Shagufta Parveen, Research Officer (Unani), Literary Research Institute of Unani Medicine (LRIUM), New Delhi – also presented their papers.

The conference addressed various issues concerning Unani Medicine and made important recommendations for its holistic development and globalization.

Seminar on complementary and alternative medicine in Muscat, Oman

Health academia as well as authorities in Oman seems to be getting attracted towards various traditional forms of medicine, including Unani Medicine, practiced in India. This was evident at a seminar on evidence-based complementary and alternative medicine held at the Indian Embassy in Muscat, Oman on 16 November 2008.

The seminar was organized by the Indian Embassy under the aegis of the Ambassador of India to Oman, Mr. Anil Wadhwa in collaboration with Department of Family Medicine and Public Health, College of Medicine and Health Sciences, Sultan Qaboos University (SQU), Muscat. The participants included three experts from Department of AYUSH, Ministry of Health & Family Welfare, Government of India. Of them two – Prof. M.A. Jafri, Director, National Institute of Unani Medicine (NIUM), Bangalore; and Dr. Mohammad Fazil Khan, Research Officer (Unani), Central Council for Research in Unani Medicine (CCRUM), New Delhi – represented Unani Medicine.

Addressing the seminar, the Indian Ambassador Mr. Anil Wadhwa said that India was rich in traditional systems of medicine. Over the centuries, these various Indian medicines have evolved and presently form integral part of the national healthcare set-up. These healthcare systems have scientifically-tested efficacy in prevention and treatment of diseases, and enjoy wide acceptance in other countries too, including the West.



Prof M. A. Jafri, Director, NIUM, Bangalore spoke on the relevance of Unani Medicine to present times. Dr. Mohammed Fazil Khan, Research Officer (Unani), CCRUM presented his paper on “Traditional philosophy of treatment in relation to human temperament and the temperament of drug in Unani system of medicine.”

Asia Oceania Congress of Nuclear Medicine and Biology in New Delhi

Researchers from the Central Council for Research in Unani Medicine (CCRUM) headquarters and its three centres – Central Research Institute of Unani Medicine (CRIUM), Hyderabad; Regional Research Institute of Unani Medicine (RRIUM), Chennai; and RRIUM, Mumbai attended the Ninth Asia Oceania Congress of Nuclear Medicine and Biology held in New Delhi from 31 October to 4 November 2008.

The researchers who represented the CCRUM at the congress on the theme of ‘Globalization of Nuclear Medicine’ included Dr. Shamshad Ahmad Khan, Assistant Director (Chemistry); Dr. Khalid Mehmood Siddiqui, Assistant Director (Unani); Mr. Suhail Mustafa Adhami, Research Officer (Statistics); Dr. Pawan Kumar Yadav, Research Officer (Clinical Pharmacology); Dr. Pradeep Kumar, Research Officer (Pathology); Dr. Shamsul Arfin, Research Officer (Chemistry); Dr. Zaki A. Siddiqui, Research Officer (Unani) – all from the Council headquarters; Dr. P. V. Goud, Deputy Director (Pathology) and Dr. M.A. Waheed, Deputy Director (Unani) – both from CRIUM, Hyderabad; Dr. A.H. Sayeeda, Research Officer (Pathology); Dr. R.P. Meena, Reserarch Officer (Chemistry); and Dr. Abdul Kareem, Research Officer (Biochemistry) – all three from RRIUM, Chennai; and Dr. Nirmala Devi, Research Officer (Pathology) from RRIUM, Mumbai.

National Conference on Indian Medicine at Aligarh

The Council’s researchers participated in a two-days National Conference on Indian Medicine held at Aligarh, Uttar Pradesh on 12 and 13 April 2008. Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine (CCRUM) was the chief guest at the inaugural session.

In his inaugural address Dr. Khalid Siddiqui stressed the need for harnessing the strengths of individual practitioners and researchers of Indian systems of medicine including Unani Medicine. He said that non-government organizations (NGOs) can play an important role in raising health awareness among the public as well as help the government implement various national health programmes successfully. The conference was organized by an Aligarh-based NGO, Maqbool Social Health & Educational Society (MSHES).

Dr. Khalid Siddiqui gave an overview of the advances made by the CCRUM in its various research endeavours and the increasing governmental support for the holistic development of Unani Medicine in the country and abroad. He called upon the votaries of Indian systems of medicine to collaborate with each other and improve the quality of research and development in their respective system.

Dr. S. Mahdi Hasan, Honorary Professor, King George Medical University, Lucknow, who is also INSA Senior Scientist and Patron of the MSHES, Aligarh, presided over the inaugural session. Prof.

V.D. Agarwal, Dean, Unani and Ayurvedic College, which is affiliated to Kanpur University, gave his keynote address to the conference.

Mr. Vivek Bansal, former MLA from Aligarh, gave the valedictory address to the conference on 13 April 2008.

National Conference on Jarahat at Aligarh

The Central Council for Research in Unani Medicine (CCRUM) participated in a two-day National Conference on Jarahat – JCON 2009 at the Aligarh Muslim University (AMU), Aligarh on 21 and 22 February 2009.

Inaugurating the conference on 21 February, Mrs. Panabaka Lakshmi, Minister of State for Health & Family Welfare emphasized the need for further developing education, training and research in Unani Medicine in accordance with the demands of modern times. The conference, organized by the Department of Jarahat, Ajmal Khan Tibbiya College, AMU, Aligarh, focused on the theme of futuristic shape of teaching and training of Jarahat (surgery) at undergraduate and postgraduate education of Unani Medicine. The Vice-Chancellor of AMU, Professor P.K. Abdul Azis presided over the function.

Mrs. Panabaka Lakshmi urged the researchers and academics of Unani Medicine to draw maximum benefit of the recent scientific and technological advances while preserving the basic philosophies of the system. She underscored that undergraduate and postgraduate education in various subjects of Unani Medicine including surgery should be standardized in light of modern advances and should continuously be updated.

Addressing Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine (CCRUM) said that the CCRUM had over the past three decades of its functioning emerged as the leading institution of scientific research in the system in the world. The Council has attained significant progress in its research programme covering clinical research, quality control and drug standardization, survey and cultivation of medicinal plants, and literary research.

Prof. Abdul Azis, Vice-Chancellor, AMU, Aligarh in his presidential remarks highlighted the contribution of Hakim Ajmal Khan to Unani Medicine. He thanked the Government of India, Ministry of Health & Family Welfare for sanctioning an amount of Rs. 125 crores for the up-gradation of the J.N. Medical College at the University, and requested the Central Government for upgrading the A.K. Tibbiya College to an Institute of National level.

Seminar on Unani Medicine at Chennai

The Central Council for Research in Unani Medicine participated in the National Seminar on Herbal Unani Medicine held in Chennai on 4 October 2008. The seminar was organized by Niamath Science Academy, a non-governmental organization for propagation and development of Unani Medicine.



Six researchers from the Council's Regional Research Institute of Unani Medicine (RRIUM), Chennai attended the deliberations. The CCRUM pavilion put up on the occasion displayed the Council's progress in its various research programmes. Samples of Unani raw drugs and live medicinal plants used in Unani Medicine were also on display. Around 400 people visited the Council's pavilion. The visitors were offered information about the Council's activities and achievements and strengths of Unani Medicine for healthy living. Besides, the visitors were also offered free literature on Unani Medicine and the Council's work.

World AMU Alumni Summit at Aligarh

A group of officers from the Central Council for Research in Unani Medicine (CCRUM) headquarters attended World Summit of Aligarh Muslim University (AMU) Alumni-2008 held at the University campus at Aligarh from 18 to 19 October 2008. They also attended the Sir Syed Day-2008 celebrations organized to mark the AMU's founder Sir Syed Ahmad Khan's 191st birth anniversary on 17 October 2008.

The main agenda of the CCRUM representatives' participation in the conference was to interact with the alumni of the A.M.U., especially those in influential position in the country and abroad, and inform them of the progress the country had made over the years in the development of education, research, healthcare and pharma industry of Unani Medicine. During the summit, the CCRUM officers actively participated in the deliberations and had fruitful discussions on how the A.M.U. and its alumni could take a leadership role in the multidimensional development of Unani Medicine in the country and abroad. The alumni were also informed about the success stories of the CCRUM in developing research in key areas of Unani Medicine and its allied disciplines. Literature published by the CCRUM was also distributed during the summit.

At the summit Vice President of India, Mr. Mohammad Hamid Ansari was the chief guest and Governor of Uttar Pradesh Mr. T.V. Rajeswar Rao and Governor of Jharkhand Mr. Syed Sibtey Razi were the guests of honour.

At the AMU Science Faculty alumni meeting, which was part of the Summit, held at the Department of Zoology on 19 October 2008, Mr. Mehr-e-Alam Khan, Research Officer (Publication) at the CCRUM said that there was a need to develop stronger linkages between various departments of the AMU's Science Faculty and the leading Science and Technology institutions in the country and abroad in order to develop quality education and research in various disciplines matching international standards. Mr. Khan said that various departments of biological sciences at the AMU may collaborate with the CCRUM and the Department of AYUSH in the Union Ministry of Health & Family Welfare and work to validate various concepts of the yesteryear health sciences including Unani Medicine.

Other officers from the CCRUM who participated in the summit included Dr. Khalid Mehmood Siddiqui, Assistant Director (Unani), Mr. Suhail Mustafa Adhami, Research Officer (Statistics), Mr. Shamsul Arfin, Research Officer (Chemistry), and Mr. Aminuddin, Research Officer (Botany) – all from the headquarters, and Hakim (Mrs.) Shagufta Parveen, Research Officer (Unani) from the Council's Delhi-based Literary Research Institute of Unani Medicine.

Arogya health fair at Nellore

The Central Council for Research in Unani Medicine (CCRUM) participated in the Arogya – the health fair showcasing the strengths of Unani Medicine, Ayurveda and Siddha, Yoga and Naturopathy and Homoeopathy – at Nellore in Andhra Pradesh on 26 and 27 April 2008.

Mrs. Panabaka Lakshmi, Minister of State for Health and Family Welfare, Government of India inaugurated the fair on 26 April in the presence of Mr. Anam Vivekananda Reddy, MLA from Nellore; Mr. N Subrahmanyam, MLA from Sullurpeta; Mr. Kakani Govardhan Reddy, Chairman ZPP, Nellore; Dr. Vijay Kumar, Commissioner, Department of AYUSH, Government of Andhra Pradesh; Mr. Rajkumar, Commissioner, Department of AYUSH, Government of Tamil Nadu; Mr. Varghese Samuel, Joint Secretary (AYUSH), Government of India; Mrs. Meenakshi Negi, Director, Department of AYUSH, Government of India; and Mr. K. Ramgopal, Collector and District Magistrate of Nellore. Other dignitaries present at the inaugural ceremony included Dr. Mohammed Khalid Siddiqui, Director, CCRUM; Dr. C. Nayak, Director, CCRH and Dr. B.T.C. Murthy, Director CCRYN.

On this occasion two CDs of the video film on leucoderma, produced by the CCRUM, were released. Three brochures – Unani Medicine for Healthy Living, Some Common Unani Medicinal Plants, and Medicinal Plants for Healthy Living – brought out by the CCRUM were also released.

After the inauguration the Minister along with other dignitaries went round the exhibition and showed keen interest in the CCRUM exhibits. The CCRUM pavilion besides displaying the Council's leads in its research programme also exhibited its publications. The visitors were offered free health consultancy and Unani treatment facility by the Council's physicians. They were also provided with free of charge literature published by the Council in Telugu, Tamil and English languages. Video films produced by the Council were also screened for the visitors.

Ayurveda Congress-cum-Arogya 2008 in Jaipur

The Central Council for Research in Unani (CCRUM) participated in World Ayurveda Congress-cum-Arogya 2008 – a fair showcasing different Indian systems of medicine including Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) – held at Jaipur, Rajasthan from 16 to 21 December 2008.

The event, which aimed at generating public awareness about the AYUSH systems and their role in health care, was jointly organized by the Department of AYUSH, Ministry of Health & Family Welfare, Government of India; Department of Ayurveda, Government of Rajasthan; Vijnana Bharti; and National Institute of Ayurveda, Jaipur.

The Programme was inaugurated on 16 December by Governor of Gujarat Mr. Naval Kishore Sharma in presence of Mrs. P. K. Sreemathi Teacher, Minister of Health, Government of Kerala; Mr. G.A. Rajkumar, Special Commissioner, Department of ISM & H, Government of Tamil Nadu; Dr. B. L. Gaur, Vice Chancellor, Rajasthan Ayurved University and Dr. Raghunandan Sharma, Chairman, Central Council of Indian Medicine (CCIM).



The six-day event had active participation of Department of AYUSH and organizations under the Department. At the fair the CCRUM showcased its progress made in its research programmes including clinical research, drug standardization, survey and cultivation of medicinal plants, and literary research. The CCRUM pavilion also displayed its publications, besides raw drug samples. The visitors were provided with IEC material brought out by the Council on curative and preventive strengths of Unani Medicine and the Council's success stories in English, Hindi and Urdu languages. Video CDs on Skin care, Health promoting Unani Medicinal Plants and other subjects of Council's research programmes were also screened during the exhibition.

National Seminar on Amraz-e-Niswan at Aligarh

The Council participated in a national seminar on Amraz-e-Niswan (women's diseases) held at Department of Niswan, Ajmal Khan (AK) Tibbiya College, Aligarh Muslim University (AMU), Aligarh on 20 December 2008.

Addressing the seminar Dr. Mohammed Khalid Siddiqui Director, Central Council for Research in Unani Medicine (CCRUM), who was the chief guest for the occasion, stressed the need for optimal utilization of the potential of Unani Medicine in ensuring holistic health for women and children as well as men. He said there was a need to scientifically validate various concepts and strengths of Unani Medicine for the system's worldwide acceptance in view of the increasing global interest in the system.

Dr. Siddiqui said as a result of increasing governmental support and funds India has emerged as the world leader in the field of Unani Medicine and is in a position to export the system as well as the products used therein. Highlighting the progress of the CCRUM, he said that the Council during the three decades of its functioning had some good success stories in the area of clinical research, quality control and drug standardization, survey and cultivation of medicinal plants and literary research.

Prof. P.K. Abdul Aziz, Vice-Chancellor, AMU, Aligarh presided over the inaugural session. He emphasized the role of mother in the family and highlighted the importance of women's health in developing healthy societies. Speaking on the occasion, Dr. Asad Pasha, Deputy Adviser (Unani), Department of AYUSH, Ministry of Health and Family Welfare, Government of India highlighted various governmental initiatives for the development of Unani Medicine.

Food and Agro-biodiversity festival in Thiruvananthapuram

The Central Council for Research in Unani Medicine (CCRUM) participated in Annam National Food and Agro Biodiversity Festival held in Thiruvananthapuram , Kerala from 27 to 31 December 2008.

Kerala Chief Minister Mr. V.S. Achuthandan inaugurated the event on 27 December 2008. The festival was a celebration of ethnic food traditions and agricultural biodiversity and aimed at acquainting the new generation with traditional foods as a substitute to the fast food and packed food culture. The programme was jointly organized by Center for Innovation in Science & Social Action (CISSA);



Department of AYUSH, Ministry of Health & Family Welfare, Government of India; Department of Agriculture and Food & Civil Supplies, Government of Kerala; Kerala State Council for Science Technology and Environment (KSCSTE); Kerala State Biodiversity Board; National Horticulture Mission; Navdanya, New Delhi, and National Rural Health Mission.

The CCRUM pavilion put up on the occasion displayed the Council's progress in the fields of clinical research, drug standardization and quality control, survey and cultivation of medicinal plants etc. Live potted medicinal plants were also on display with information on their identification and therapeutic potential. Some raw drug samples and the Council's publications were also displayed. The visitors were offered the IEC material brought out by the Council about Unani Medicine and allied subjects.

Workshop on Quality Control of ASU Drugs at Patiala

Four researchers of the Central Council for Research in Unani Medicine (CCRUM) attended a workshop on Quality Control of Ayurveda, Siddha and Unani (ASU) drugs in Patiala, Punjab on 24 January 2009. The workshop was organized by Central Council for Research in Ayurveda & Siddha (CCRAS) at the premises of its National Institute of Pharmaceutical Education and Research (NIPER) and had active participation of the pharma-industry.

Dr. S.S. Gill, Vice-Chancellor, Baba Farid University of Health Sciences (BFUHS), Faridkot inaugurated the workshop, and Dr. K.S. Dhindsa, Vice-Chancellor, Chaudhary Devi Lal Vidhyapeeth (CDLV), Sirsa delivered the keynote address.

The CCRUM researchers who participated in the workshop were Dr. Shamsul Arfin, Research Officer (Chemistry), CCRUM headquarters; Dr. Kunal Sajwan, Research Officer (Chemistry), Drug Standardization Research Unit (DSRU), New Delhi; Dr. M.A. Qasim, Research Officer (Chemistry), Drug Standardization Research Institute (DSRI), Ghaziabad, Uttar Pradesh; and Dr. Parvez Akhtar, Assistant Research Officer (Botany), DSRU, New Delhi.

Arogya 2009 in Thirussur, Kerala

The Council's Regional Research Institute of Unani Medicine (RRIUM), Chennai participated in the Arogya 2009 – the fair aiming at projecting the country's indigenous health systems including Unani Medicine – held at Thirussur, Kerala from 11 to 15 February 2009. The health fair was jointly organized by the Kerala State Government and the Department of AYUSH, Ministry of Health & Family Welfare, Government of India in association with two NGOs – Oshadi and Ayurvedic Medicine Manufacturers' Organization of India.

Kerala Health Minister Mrs. P. K. Sreemathi inaugurated the event. Mr. Therambil Ramakrishnan, MLA, presided over the function. Among other dignitaries Mr. B. Ananad, Joint Secretary to Government of India, Ministry of Health & Family Welfare, Department of AYUSH was also present on the occasion.

The CCRUM pavilion at the fair depicted the Council's progress in its various research programmes including clinical research, drug standardization, survey and cultivation of medicinal plants and literary research. The stall offered the visitors free health check-up and consultation by experts of Unani Medicine, besides the publicity literature on Unani Medicine published by the Council. Over 400 visitors benefited from the free healthcare facility offered at the Council's pavilion.

At the stall documentaries showing the success stories of the Council were screened. Raw samples of Unani drugs and live Unani medicinal plants were also displayed. The stall also displayed the research and general publications brought out by the Council. The Council's stall was visited by about 5000 people including foreigners who evinced keen interest in the strengths of Unani Medicine and the researches going on in the system under the CCRUM.

Pulse Polio Programme in Hyderabad and Chennai

The Central Council for Research in Unani Medicine (CCRUM) through its centres in different parts of the country takes active part in the Pulse Polio Programme that aims to eradicate the scourge completely. The Council's Central Research Institute of Unani Medicine (CRIUM), Hyderabad and Regional Research Institute of Unani Medicine (RRIUM), Chennai participated actively in the intensive Pulse Polio immunization programme in the two cities on 21 December 2008 and 1 February 2009.

The CRIUM, Hyderabad participating in the Pulse Polio drive, organized in the city on 1 February and earlier on 21 December 2008 last, provided polio drops to a total of 186 children around five years of age.

In Chennai the Council's Regional Research Institute of Unani Medicine (RRIUM), conducted the Pulse Polio Programme on 1 February in co-ordination with Royapuram Health Post in Zone II of Chennai Corporation. During the programme a total of 997 children were immunized.

Arogya Health Mela at Dehradun

The Central Council for research in Unani Medicine (CCRUM) participated in the Arogya Health Mela at Dehradun, Uttarakhand from 11 to 18 October 2008. The Mela was organized by Department of Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH), Ministry of Health & Family Welfare, Government of India.

Dr. Ramesh Pokhariyal "Nishank", Minister of Health and Family Welfare, Government of Uttarakhand visited the CCRUM health camp on 15 October 2008 and evinced keen interest in Unani Medicine and the activities and achievements of the Council.

The Mela was inaugurated by Mr. Harbans Kapoor, Chairman, Vidhan Sabha on 11 October 2008 in the presence of Mr. Indu Kumar Pandey, Chief Secretary to Government of Uttarakhand; Mr. Vinod Chamooli, Mayor of Dehradun; Mr. Vijay Ranjan, President, Reach Foundation, and Mr. R.K. Singh, General Secretary of Reach. Mrs. Meenakshi Negi, Director, Department of AYUSH, Ministry of Health & Family Welfare, Government of India was also present at the inaugural ceremony.

At the Mela, the Council health camp offered the visitors free health check-up by Unani physicians besides free Unani treatment for their complaints. Through the camp an organized effort was made to educate the people about healthy living and strengths of Unani Medicine as well as the progress the CCRUM has made in its research programmes. The Council's physicians attended to 527 patients of various ailments and gave them Unani kit medicines developed by the Council.

The CCRUM pavilion also displayed the Council's publication in different languages for free distribution as well as sale. Audio/video CDs produced by the Council were also played for the visitors.

Arogya 2009 at Mumbai

The Central Council for Research in Unani Medicine (CCRUM) participated in the Arogya 2009 – the health fair showcasing strengths of various Indian systems of medicine including Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) held in Mumbai from 30 January to 2 February 2009. The fair was jointly organized by Department of AYUSH, Ministry of Health & Family Welfare, Government of India; Federation of Indian Chambers of Commerce & Industry (FICCI); Government of Maharashtra and Municipal Corporation of Greater Mumbai.

Mr. Gopinath Munde, former Deputy Chief Minister of Maharashtra inaugurated the fair in the presence of Mr. Krishna Pal Singh, MLA, Dr. (Mrs.) Shubha Raul, Mayor, Municipal Corporation, Greater Mumbai; and Mr. Ramesh Madhekar, Deputy Mayor Municipal Corporation, Greater Mumbai. Officers from the Department of AYUSH who were present on the occasion included Mr. T.S. Bhatia, Deputy Secretary; and Mr. Suman Chatterjee, Under Secretary. After the Inauguration, Mr. Munde along with other dignitaries went round the exhibition. They saw the CCRUM pavilion with interest and showed keen interest in the Council's progress as well as the strengths of Unani Medicine displayed at the Council's stall.

Mr. B. Anand, Joint Secretary to the Government of India, Ministry of Health and Family Welfare, Department of AYUSH visited the Council's stall on 31 January and 1 February. He keenly observed the exhibits and other material showcased at the stall and appreciated the working of the Council.

The CCRUM pavilion displayed the recent progress made in the Council's various research programmes including clinical research, drug standardization, survey and cultivation of medicinal plants, and literary research. The stall also had the Council's publications on display, besides samples of raw drugs and live medicinal plants. The visitors were provided literature on Unani Medicine as well as the CCRUM's success stories in English, Hindi, Marathi and Urdu languages. Video CDs on skin care, health promoting Unani medicinal plants and different diseases under clinical studies were also played for the visitors. At the fair the Ayurveda and Siddha, Unani, Yoga & Naturopathy and Homoeopathy clinics offered the visitors health check-up and consultancy facility.

Arogya 2009 at Ludhiana

The Central Council for Research in Unani Medicine (CCRUM) participated in a four-day comprehensive health fair *Arogya 2009* held at Ludhiana from 20 to 23 March 2009. The fair was

organized to showcase the strengths of different Indian systems of medicine including Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH).

The show was jointly organized by the Department of AYUSH, Ministry of Health & Family Welfare, Government of India; Department of Ayurveda, Government of Punjab and Federation of Indian Chambers of Commerce and Industry (FICCI). It was aimed at imparting public awareness about the AYUSH systems and their role in health care.

The event was inaugurated on 20 March 2009 by Mr. A. R. Talwar, Principal Secretary, Health, Government of Punjab. There was active participation of Department of AYUSH and research organizations under the Department.

At the fair, the CCRUM pavilion projected the Council's progress in its research programmes including clinical research, drug standardization, survey and cultivation of medicinal plants, and literary research. The CCRUM pavilion also displayed its publications, besides raw drug samples. The visitors were provided with IEC material brought out by the Council on curative and preventive strengths of Unani Medicine and the Council's success stories on Arthritis, Vitiligo and Eczema and Psoriasis in English, Hindi, and Punjabi languages. Video CDs on Skin care, Health promoting Unani medicinal plants and other subjects of Council's research programmes were also screened during the exhibition.

MEMORANDUM OF UNDERSTANDING

CCRUM and Jamia Hamdard sign MoU

The Central Council for Research in Unani Medicine (CCRUM) and the Jamia Hamdard – a deemed university in New Delhi – signed a memorandum of understanding (MoU) to develop various segments of research in Unani Medicine. The MoU was signed at the University on 22 October 2008. The agreement will be operative for a period of five years and can be extended by mutual consent.

Speaking at the ceremony, Mr. Saiyid Hamid, Chancellor, Jamia Hamdard said that the collaboration should pave way for better development of Unani Medicine. He hoped that the joint ventures would yield significant results in developing quality education and research in the system and bring Unani Medicine at par with the latest set international standards.

On this occasion Dr. G.N. Qazi, Vice Chancellor, Jamia Hamdard highlighted the significance of the MoU and said that the agreement was the brain child of Dr. Mohammed Khalid Siddiqui, Director, CCRUM, and that it aimed at bringing the two institutions together and initiating joint efforts for creating state-of-the-art facilities for research and development in Unani Medicine.

Dr. Mohammed Khalid Siddiqui, Director, CCRUM stressed the need for collaborative endeavours for the holistic development of Unani Medicine based on scientific validation of the various concepts and strengths. He assured the Jamia of the Council's full support in developing the research base of Unani Medicine at the university. He also emphasized to develop better and meaningful communication between the two institutions for further development of education and research in Unani Medicine.

POSSESSION OF BUILDING

Council takes possession of RRIUM, Patna building

After over a decade the Council's Regional Research Institute of Unani Medicine (RRIUM) at Patna is back to its original home – the Nawab Manzil, the State Government owned building in Guzri area of the city, thanks to determined efforts by Mr. Nand Kishore Yadav, Minister of Health, Government of Bihar State.

The State Health Minister Mr. Nand Kishore Yadav handed over the keys to the building to Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine (CCRUM) at a special ceremony held there on 14 December 2008. The Institute was shifted from Nawab Manzil to a rented building located at Boring Canal Road in the city in 1997.

On this occasion inaugurating the functioning of the Institute at Nawab Manzil, Mr. Nand Kishore Yadav said that the State Government attached great importance to the all round development of various Indian systems of medicine including Unani Medicine, and was trying to utilize their optimal potential for providing essential healthcare services to the people living in the rural and far flung areas.

Dr. Mohammed Khalid Siddiqui, Director, CCRUM expressed his gratitude to the State Government for allotting for construction of new premises of RRIUM, Patna 20,000 square feet of land out of the 4.5 acres where the old building, Nawab Manzil, stands. He said the Central Government would provide adequate funds for construction of new building for the Institute, and that the construction work might start soon.

Dr. Siddiqui said that re-shifting of the Institute to Nawab Manzil would ensure like before better Unani medical services for the people in the area. He said that the Council had increased the number of beds in the inpatient department from 25 to 50 and hoped that the benefits of the facility would reach a larger section of people. The Institutes caters to health needs of 300 to 400 patients daily.

FOREIGN VISITORS TO CCRUM

American Scholar

Mr. Josef Alan Brinckmann, International Trade Centre (ITC) Consultant for Export Development of Indian Natural Medicinal Products of United Nations Conference on Trade and Development (UNCTAD) visited the CCRUM headquarters on 10 April 2008.

Mr. Brinckmann, who is the Vice President of Research and Development for Traditional Medicinals, Sebastopol, California, USA is busy in conducting a Needs Assessment Study in cooperation with Department of AYUSH. He is an herbal researcher, product developer, and author of several books on herbal medicine with nearly 30 years professional experience in the medicinal herbal products trade.

Welcoming Mr. Brinckmann, Dr. Mohammed Khalid Siddiqui, Director, CCRUM informed him about the Council's progress in its research programmes. Dr. Siddiqui also made a presentation on the state of Unani Medicine in India highlighting the success stories of the CCRUM.

Iranian Officials

Iran is keen on developing strong linkages with India for multifaceted development of Unani Medicine in that country. Such an indication was given by two Iranian embassy officials meeting with Dr. Mohammed Khalid Siddiqui, Director, Central Council for research in Unani Medicine (CCRUM) in New Delhi on 28 April and 25 June 2008.

At a lunch on at the Islamic Cultural Centre on 25 June 2008, the two officials Dr. Ahmad Momeni, Academic Counselor, and Dr. Karim Najafi, Cultural Counselor at the Embassy of Iran in New Delhi discussed the possible areas of collaboration between the two countries with Dr. Mohammed Khalid Siddiqui, Director, Central Council for Research in Unani Medicine (CCRUM) in the presence of Dr. Asad Pasha, Deputy Adviser (Unani), Department of AYUSH, and Hakim Iqbal Ahmed, Unani physician attached to the Delhi-based Hamdard Clinic.

At the meeting, the two counselors emphasized the need for having a Memorandum of Understanding signed urgently between the Government of Iran and the CCRUM, Ministry of Health & Family Welfare, Government of India to foster cooperation in the field of Unani Medicine. The collaboration may cover development of clinical research, standardization and safety of the Unani drugs, literary research, particularly translation and publication of Persian manuscripts, and medicinal plants in order to facilitate export and import of drugs specific to the two countries.

Dr. Mohammed Khalid Siddiqui also stressed that the CCRUM may have a separate MoU signed with the University of Isfahan where extensive work could be done in the areas of clinical research, pharmacology and safety as also drug standardization and quality control of Unani drugs. The Iranian officials showed their willingness to accept the pharmacopoeial standards developed by the Government of India's Unani Pharmacopoeia Committee (UPC) for the Unani drugs.

During their visit to the CCRUM headquarters on 28 April 2008, Dr. Ahmad Momeni and Dr. Karim Najafi had indicated that the Iran's Ministry of Health was exploring possibilities of collaboration with India for the development of Unani Medicine. The two visitors indicated that their Government would shortly invite an Indian delegation to visit Iran to talk to the Iranian authorities and particularly the University of Soha for starting a course of study on Unani Medicine. They also wanted some good Unani physicians from India to visit different cities in Iran and demonstrate the efficacy of the system. The two visitors were also agreeable to replicate the module of Unani clinics in modern hospitals.

The two counselors also showed their agreement on the suggested areas of collaboration between the two countries including Research and Development, cultivation, export and import of medicinal plants, revival of regimental therapy, replication of education module, registration of practitioners etc.

PROMOTIONS

1. Hakim M.A. Waheed, Research Officer (Unani), CRIUM, Hyderabad was promoted to Deputy Director (Unani) with effect from 10 June 2008.
2. Hakim Mohammad Ishaq , Research Officer (Unani), RRIUM, Srinagar was promoted to Deputy Director (Unani) with effect from 30 June 2008.
3. Mr. F.A. Bazaz, Office Superintendent, RRIUM, Srinagar was promoted to Administrative Officer with effect from 20 June 2008.
4. Mr. Mohammad Wasiq Imam, Office Superintendent, RRIUM, Aligarh was promoted to Administrative Officer with effect from 20 June 2008.

RETIREMENTS

1. Hakim Imranullah Khan, Deputy Director, RRIUM, Aligarh retired on 30 September 2008 after completing 29 years of service in the Council. Hakim Imranuallah Khan joined the Council on 8 September 1979. He served the Council in various positions at Clinical Research Unit (CRU), Rewa, CRU, Allahabad, CRU, Meerut and RRIUM, Aligarh.
2. Dr. V.K. Singh, Deputy Director (Botany), CCRUM Headquarters, New Delhi retired on 30 November 2008. Dr. Singh joined the Survey of Medicinal Plants Unit (SMPU), Aligarh in the earstwhile Central Council for Research in Indian Medicine & Homoeopathy (CCRIMH) on 27 August 1971. He served the Council in different positions at RRIUM, Aligarh and the Council Headquarters for over 37 years.
3. Dr. Rais Ahmed Khan, Assistant Director (Chemistry), RRIUM, Chennai attained superannuation on 31 January 2009. Dr. Khan joined the Council on 30 November 1979 as Research Officer (Chemistry) at Drug Standardisation Research Unit, Bangalore. Later, he served at RRIUM, Chennai on the merger of DSRU, Bangalore with RRIUM, Chennai. He served the Council for over 28 years.
4. Mr. K. Paneer Das, Cook, RRIUM, Chennai took voluntary retirement on 29 May 2008. Mr. Das joined RRIUM, Chennai on 12 December 1979. He served the Council for over 28 years.
5. Mr. Syed Nisar Ahmed, Pharmacy Attendant, CRIUM, Hyderabad retired on 31 May 2008. Mr. Ahmed joined CRIUM, Hyderabad on 16 August 1972 in the earstwhile CCRIMH. He served the Council for over 35 years.
6. Mr. Surendra Prasad, Laboratory Technician, RRIUM, Aligarh attained superannuation on 31 July 2008. Mr. Prasad joined Clinical Screening Unit (CSU), Aligarh in the earstwhile CCRIMH on 19 June 1972. He served the Council for over 36 years.



7. Mr. Shabbeer Ahmed A., Laboratory Technician, CRU, Bangaluru took voluntary retirement on 31 December 2008. Mr. Ahmed had joined the Clinical Research Unit, Bangalore on 23 December 1980. He served the Council for 28 years.
8. Mr. Bhola Dutt Raturi, Driver, RRIUM, Aligarh took voluntary retirement on 1 February 2009. Mr. Raturi joined SMPU, Aligarh in the earstwhile CCRIMH on 26 May 1978. He served the Council for over 28 years.
9. Mr. Mohammad Junaid, Laboratory Technician, RRIUM, Aligarh attained superannuation on 31 March 2009. Mr. Junaid joined Clinical Screening Unit (Unani), Aligarh in the earstwhile CCRIMH on 28 September 1974. He served the Council for 34 years.
10. Mr. Maud Mirza, Security Incharge/Care Taker, CRIUM, Hyderabad retired on 31 March 2009. Mr. Mirza joined CRIUM, Hyderabad on 21 January 1974. He served the Council for over 35 years.

DEATHS

1. Dr. (Mrs.) A.H. Sayeeda, Assistant Director (Pathology), RRIUM, Chennai expired on 30 December 2008. Dr. Sayeeda joined the Council on 1 June 1983 as Assistant Research Officer (Pathology). She served the Council for over 24 years.
2. Mr. Mohammad Ayub Khan, Store Keeper, RRIUM, Aligarh expired on 3 March 2009. Mr. Khan joined the RRIUM, Aligarh on 12 September 1979. He served the Council for over 29 years.

Appendix-I

LIST OF RESEARCH PAPERS PRESENTED IN DIFFERENT SEMINARS/WORKSHOPS/CONFERENCES

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
1.	Prevention of obesity	S. Ahmed	RRIUM, Aligarh	National Conference on Indian Medicine at Hifzane Sehat Science Academy, Aligarh, 12-13 April 2008
2.	Psycho-spiritual health and its management in Unani System of Medicine	M. Salim Siddiqui	CCRUM, Headquarters, New Delhi	National Conference on Unani Medicine at Hifzane Sehat Science Academy, Aligarh, 12-13 April 2008
3.	Role of Riyazat (Exercise) in Prevention of Diseases	Jamal Akhtar Amanullah, K.M. Siddiqui & M.K. Siddiqui	CCRUM, Headquarters, New Delhi	National Conference on Indian Medicine at Hifzane Sehat Science Academy, Aligarh, 12-13 April 2008
4.	Ilaj bit Tadbir ke Mukhtalif Tariqon ki Itlaqi Tauzih	Amanullah, Jamal Akhtar, Khalid M. Siddiqui & M.K. Siddiqui	CCRUM, Headquarters, New Delhi	National Conference on Indian Medicine at Hifzane Sehat Science Academy, Aligarh, 12-13 April 2008
5.	Leeching and its usefulness in various chronic diseases	Shagufta Parveen	LRIUM, New Delhi	National Conference on Indian Medicine at Hifzane Sehat Science Academy, Aligarh, 12-13 April 2008
6.	Asbab-e-Sitta Zarooriya-Tibbe Unani Ka Ek Zarrin Nazria	M. Fazil	LRIUM, New Delhi	National Conference on Indian Medicine at Hifzane Sehat Science Academy, Aligarh, 12-13 April 2008
7.	Aromatherapy in stress management	Neelam Quddusi	LRIUM, New Delhi	National Conference on Indian Medicine at Hifzane Sehat Science Academy, Aligarh, 12-13 April 2008

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
8.	Hasbah (measles) – A literary Insight	Nighat Anjum	LRIUM, New Delhi	National Conference on Indian Medicine at Hifzane Sehat Science Academy, Aligarh, 12-13 April 2008
9.	AIDS-A Global Health problem and role of Unani Medicine	M.U. Azhar, S. Parveen, K.M. Siddiqui & M.K. Siddiqui	LRIUM, New Delhi	National Conference on Indian Medicine at Hifzane Sehat Science Academy, Aligarh, 12-13 April 2008
10.	Impact of Environmental Polution on human Health	Mohd Ayub Khan	RRCUM, Allahabad	National Conference on Unani Medicine at Hifzane Sehat Science Academy, Aligarh, 12-13 April 2008
11.	Avicenna – A Mild Stone in Unani Medicine	Zubair A. Khan	RRCUM, Allahabad	National Seminar on Unani medicine at Hifzane Sehat Science Academy, Aligarh, 12-13 April 2008
12.	Disease Prevention and Control	Mumtaz Ahmad	RRCUM, Allahabad	National Seminar on Unani medicine at Hifzan-e-Sehat Science Academy, Aligarh, 12-13 April 2008
13.	Forestation with Unani medicine plants can play Major role in air pollution control	Mohd. Aslam	CRIUM, Lucknow	National Conference on Hifzan-e-Sehat wa Mahauliat. State Unani Medical College, Allahabad, 23-24 August 2008
14.	Good oral hygiene instruction for better health	M.N. Khan	CRIUM, Lucknow	National Conference on Hifzan-e-Sehat wa Mahauliat. State Unani Medical College, Allahabad, 23-24 August 2008
15.	Importance of sleep and wakefulness (Naum-o-Yaqza) in the maintenance of healthy life	H.A. Lari	CRIUM, Lucknow	National Conference on Hifzan-e-Sehat wa Mahauliat. State Unani Medical College, Allahabad, 23-24 August 2008

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
16.	Six essential factors-principles of maintaining and delayed ageing in Unani Medicine	M.R. Kidwai	CRIUM, Lucknow	National Conference on Hifzan-e-Sehat wa Mahauliat. State Unani Medical College, Allahabad, 23-24 August 2008
17.	Human health with reference to Asbab-e-Sitta Zarooriya	Z.H. Siddiqui	CRIUM, Lucknow	National Conference on Hifzan-e-Sehat wa Mahauliat. State Unani Medical College, Allahabad, 23-24 August 2008
18.	Clinical efficacy of Qurs-e-Mafasil and Roghan-e-Surkh in the cases of wajaul Mafasil	Shamsul Arfeen & Waseem Ahmed	CRIUM, Lucknow	National Conference on Hifzan-e-Sehat wa Mahauliat. State Unani Medical College, Allahabad, 23-24 August 2008
19.	Management of stress in Unani Medicine	Arifa Khatoon	CRIUM, Lucknow	National Conference on Hifzan-e-Sehat wa Mahauliat. State Unani Medical College, Allahabad, 23-24 August 2008
20.	Today's lifestyle and over eating	Mohammad Arshad	CRIUM, Lucknow	National Conference on Hifzan-e-Sehat wa Mahauliat. State Unani Medical College, Allahabad, 23-24 August 2008
21.	Prevalence of Hepatitis-B, its prevention and treatment	Rehan Zaheer	CRIUM, Lucknow	National Conference on Hifzan-e-Sehat wa Mahauliat. State Unani Medical College, Allahabad, 23-24 August 2008
22.	Stress – causes and its management in Unani Medicine	Wahiduzzaman & Waseem Ahmed	CRIUM, Lucknow	National Conference on Hifzan-e-Sehat wa Mahauliat. State Unani Medical College, Allahabad, 23-24 August 2008
23.	Preventive aspects of Tibb-e-Nabavi	S.M.A. Hassan	CRIUM, Lucknow	National Conference on Hifzan-e-Sehat wa Mahauliat. State Unani Medical College, Allahabad, 23-24 August 2008

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
24.	Health & Hygiene in Islamic Perspective	Abdul Hannan, Ghazala Javed & M.K. Siddiqui	RRIUM, New Delhi	National seminar on Hifzan-e-Sehat. Allahabad, 23-24 August 2008
25.	Urdu Rasail Aur Seh Mahi Jahan-e-Tibb	S.A. Khan, Ghazala Javed, Abdul Hannan & M.K. Siddiqui	RRIUM, New Delhi	National seminar on Hifzan-e-Sehat. Allahabad, 23-24 August 2008
26.	Hammam – Introduction and its therapeutic importance in Unani System of Medicine	M. Salim Siddiqui	CCRUM, Headquarters, New Delhi	National Seminar on Hygiene and Environment. Allahabad, 23-24 August 2008
27.	Dalak (Massage) as a mode of Treatment	Anwar Jamal, K.M. Siddiqui & M.K. Siddiqui	CCRUM, Headquarters, New Delhi	National Seminar on Hifzan-e-Sehat aur Maholiat. State Unani Medical College, Allahabad, 23-24 August 2008
28.	Prevention and treatment of Malaria (Humma-e-Ajamia) through Unani Medicine – Evidence based approach	Jamal Akhtar, Amanullah, K.M. Siddiqui & M.K. Siddiqui	CCRUM, Headquarters, New Delhi	National Seminar on Hifzan-e-Sehat aur Maholiat. State Unani Medical College, Allahabad, 23-24 August 2008
29.	Environmental Ethics – An Islamic Perspective	Amanullah, Jamal Akhtar, Khalid M. Siddiqui & M.K. Siddiqui	CCRUM, Headquarters, New Delhi	National Seminar on Hifzan-e-Sehat aur Maholiat. State Unani Medical College, Allahabad, 23-24 August 2008
30.	Massage & its Importance in Unani System of Medicines	Shagufta Parveen, K.M. Siddiqui & M.K. Siddiqui	LRIUM, New Delhi	National Seminar on Hifzan-e-Sehat aur Mahauliat State Unani Medical College, Allahabad, 23-24 August 2008
31.	Concept of Hygiene in the light of Quran and Science	Sadaqatullah Sadiq	LRIUM, New Delhi	National Seminar on Hifzan-e-Sehat aur Mahauliat State Unani Medical College, Allahabad, 23-24 August 2008

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
32.	Cancer and its management in Unani Medicine	Azma	LRIUM, New Delhi	National Seminar on Hifzan-e-Sehat aur Mahauliat State Unani Medical College, Allahabad, 23-24 August 2008
33.	How to avoid cardiac stroke?	M.U. Azhar	LRIUM, New Delhi	National Seminar on Hifzan-e-Sehat aur Mahauliat State Unani Medical College, Allahabad, 23-24 August 2008
34.	Dental care with reference to Al Hawi fit Tib	Waseem Ahmad	LRIUM, New Delhi	National Seminar on Hifzan-e-Sehat aur Mahauliat State Unani Medical College, Allahabad, 23-24 August 2008
35.	Role of Exercise and Massage in antenatal and postnatal care	Mohammad Fazil & Waseem Ahmad	LRIUM, New Delhi	National Seminar on Hifzan-e-Sehat aur Mahauliat State Unani Medical College, Allahabad, 23-24 August 2008
36.	Rhazes – An expert Physician for Ophthalmic Diseases	Zubair A. Khan	RRCUM, Allahabad	National Seminar on Hifzan-e-Sehat and Maholiat. State Unani Medical College, Allahabad, 23-24 August 2008
37.	Environmental Polution – Preventive Measures	Parvez A. Siddiqui	RRCUM, Allahabad	National Seminar on Hifzan-e-Sehat and Maholiat. State Unani Medical College, Allahabad, 23-24 August 2008
38.	Demography and Family Planning	Mumtaz Ahmad	RRCUM, Allahabad	National Seminar on Hifzan-e-Sehat and Maholiat. State Unani Medical College, Allahabad, 23-24 August 2008
39.	Guidelines for Preventing HIV – Health Care Setting	Ashok Kumar	RRCUM, Allahabad	National Seminar on Hifzan-e-Sehat and Maholiat. State Unani Medical College, Allahabad, 23-24 August 2008
40.	Qai (Emesis) as a Regimental therapy of Unani Medicine	Mohammad Ehsan Ansari	RRCUM, Allahabad	National Seminar on Hifzan-e-Sehat and Maholiat. State Unani Medical College, Allahabad, 23-24 August 2008

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
41.	Quran, Science and Hifzan-e-Sehat	Naseem Ahmad	RRCUM, Allahabad	National Seminar on Hifzan-e-Sehat and Maholiat. State Unani Medical College, Allahabad, 23-24 August 2008
42.	Hifzan-e-Sehat Quran aur Science ki Roshni Main	Khwaja Sabeehuddin	RRCUM, Allahabad	National Seminar on Hifzan-e-Sehat and Maholiat. State Unani Medical College, Allahabad, 23-24 August 2008
43.	Principle of Unani Medicines for maintaining health in old age	Mohammad Ayub Khan	RRCUM, Allahabad	World Day for Elderly. RRCUM, Allahabad, 30 September 2008
44.	Contribution of Rhazes to clinical medicine	K.M. Siddiqui	CCRUM Headquarter, New Delhi	International Congress of Traditional and Complementary medicine. Sari, Mazandaran at Iran, 28-31 October 2008
45.	Ethno-medicine and vegetational patterns in the changed environment of Atmakur Forest Division	V.C. Gupta	CRIUM, Hyderabad	National Symposium on Environmental Stress and Bio-resource Management. Department of Botany, Hamdard University, New Delhi, 20-22 November 2008
46.	Effect of cement industry pollution on degradation of natural vegetation	R. Murugeswaran	RRIUM, Chennai	National Symposium on Environmental Stress & Bio-resource Management. Jamia Hamdard, New Delhi, 20-22 November 2008
47.	Restoration of saline soil by using salt marsh halophytes	K. Venkatesan	RRIUM, Chennai	National Symposium on Environmental Stress & Bio-resource Management. Jamia Hamdard, New Delhi, 20-22 November 2008
48.	Oral Rehydration Salt in Unani Medicine	Shagufta Parveen, K.M. Siddiqui & M.K. Siddiqui	LRIUM, New Delhi	Conference on International integrative Medicine, Karachi, Pakistan, 24-26 November 2008

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
49.	Contribution of Unani physicians in development of Endo-chronology	K.M. Siddiqui, Shagufta Parveen & M.K. Siddiqui	CCRUM Headquarter, New Delhi	International integrated medicine conference. Karachi, Pakistan, 24-26 November, 2008
50.	Angrezi Zuban Mein Hakeem Mohammad Saeed Ke Qalami Shahkaar	S.M.A. Hassan	CRIUM, Lucknow	International Conference of Hamdard Pakistan. 25 November 2008
51.	Aljami Li Ibne Baitar main Amraz-e-Niswan ke Hawale	Fakhre Alam	RRIUM, Aligarh	National Seminar on Amraz-e-Niswan. A.K. Tibbia College, Aligarh, 19-20 December 2008
52.	Menopausal disorders and their Management in Tibb-e-Unani	M. Salim Siddiqui	CCRUM, Headquarters, New Delhi	National seminar on Amraz-e-Niswan. AKTC, Aligarh, 19-20 December 2008
53.	Evidence based herbal Galactagogue in Meternal and Infant Health Care	Anwar Jamal K.M. Siddiqui & M.K. Siddiqui	CCRUM, Headquarters, New Delhi	National Seminar on Amraaz-e-Niswan. (Women's Medicon 2008). AMU, Aligarh, 19-20 December 2008.
54.	Birth Control (Contraception) – An Ancient and Practical Approach for Women	Jamal Akhtar Amanullah, K.M. Siddiqui & M.K. Siddiqui	CCRUM, Headquarters, New Delhi	National Seminar on Amraaz-e-Niswan. (Women's Medicon 2008). AMU, Aligarh, 19-20 December 2008.
55.	Razi aur Amraz-e-Niswan-Al-Hawi ke Hawale se	Amanullah, Jamal Akhtar, Khalid M. Siddiqui & M.K. Siddiqui	CCRUM, Headquarters, New Delhi	National Seminar on Amraaz-e-Niswan. (Women's Medicon 2008). AMU, Aligarh, 19-20 December 2008
56.	Menorrhagia & its management in Unani System of Medicine	Shagufta Parveen & K.M. Siddiqui	LRIUM, New Delhi	National Seminar on Amraaz-e-Niswan (Women's Medicon 2008). AMU, Aligarh, 19-20 December 2008

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
57.	Role of Unani Medicine in menstrual disorders	Sadaqatullah Sadiq	LRIUM, New Delhi	National Seminar on Amraaz-e-Niswan. (Women's Medicon 2008). AMU, Aligarh, 19-20 December 2008
58.	Puerperium and Prevention of Puerperal Diseases	Azma	LRIUM, New Delhi	National Seminar on Amraaz-e-Niswan (Women's Medicon 2008). AMU, Aligarh, 19-20 December 2008
59.	Post-climateric change – A Unani approach	Neelam Quddusi	LRIUM, New Delhi	National Seminar on Amraaz-e-Niswan (Women's Medicon 2008). AMU, Aligarh, 19-20 December 2008
60.	Care of the new born in Unani Medicine	Nighat Anjum	LRIUM, New Delhi	National Seminar on Amraaz-e-Niswan (Women's Medicon 2008). AMU, Aligarh, 19-20 December 2008
61.	Geriatric care in Unani Medicine	M.U. Azhar	LRIUM, New Delhi	National Seminar on Amraaz-e-Niswan (Women's Medicon 2008). AMU, Aligarh, 19-20 December 2008
62.	HIV status and its testing importance during pregnancy	Waseem Ahmad	LRIUM, New Delhi	National Seminar on Amraaz-e-Niswan (Women's Medicon 2008). AMU, Aligarh, 19-20 December 2008
63.	Some Persian Tibbi Manuscripts of Takmilut Tibb Library – A Review	S.M.A. Hassan	CRIUM, Lucknow	XXIX All India Persian Teachers Conference and International Seminar. Murshidabad (W.B.), 27-29 December 2008

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
64.	Kutub Khana Shibli Naumani Darul Nadvatul Ulma Key Farsi Tibbi Makhtutat Ka Jaiza.	Waseem Ahmed	CRIUM, Lucknow	XXIX All India Persian Teachers Conference and International Seminar. Murshidabad (W.B.), 27-29 December 2008
65.	Farsi Tibbi Adab Mein Hkm. Shareef Khan ka Hissa, Elajul Amraz ke Khussosi Hawale Se	S.M. Qasim & Waseem Ahmed	CRIUM, Lucknow	XXIX All India Persian Teachers Conference and International Seminar. Murshidabad (W.B.), 27-29 December 2008
66.	Farsi Tibbi Adab ke Irtiqa mein Khandan-e-Yaqoobi ka Hissa	Mohammad Arshad-I & Waseem Ahmed	CRIUM, Lucknow	XXIX All India Persian Teachers Conference and International Seminar. Murshidabad (W.B.), 27-29 December 2008
67.	Allama Hakeem Syed Fakhruddin Khayali Aur Unki Farsi Wa Tibbi Khidmat	M.A. Khan & Waseem Ahmed	CRIUM, Lucknow	XXIX All India Persian Teachers Conference and International Seminar. Murshidabad (W.B.), 27-29 December 2008
68.	Qarabadeen Mazahari- Ek Tajziati Mutala	Fakhre Alam	RRIUM, Aligarh	XXIX All India Persian Teachers Conference. Murshidabad, 27-29 December 2008
69.	Hidayat-ul-Muta'llimin fit-Tib-An Earliest Work on Unani Medicine in Persian Language	Amanullah, Khalid M. Siddiqui & M.K. Siddiqui	CCRUM, Headquarters, New Delhi	All India Persian Teacher's Conference & International Seminar. Murshidabad (W.B.), 27-29 December 2008
70.	Ilm-ul-Aghziya per Tasneefi Sarmaya	Amanullah, Khalid M. Siddiqui & M.K. Siddiqui	CCRUM, Headquarters, New Delhi	National Workshop on Dieto-therapy (Diet in Health & Diseases). Organized by CCRUM at New Delhi, 3 January 2009
71.	Wild medicinal plants used by the tribal communities of Dindigul Dist., Tamil Nadu	R. Murugeswaran	RRIUM, Chennai	International Conference on Industrialization of Institutional Research on Phytomedicine. Coimbatore, 8-9 January 2009

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
72.	Standardization of phytomedicine with respect to Majoon-e-Rewand – A Unani formulation	Rampratap Meena	RRIUM, Chennai	International Conference on Industrialization of Institutional Research on Phytomedicine. Coimbatore, 8-9 January 2009
73.	Native therapy of some Unani medicinal plants used for Hepatitis in Kanniyakumari Dist., Tamil Nadu	K. Venkatesan	RRIUM, Chennai	International Conference on Industrialization of Institutional Research on Phytomedicine. Coimbatore, 8-9 January 2009
74.	Standardization of <i>Luffa cylindrica</i> (Linn.) M. Roem. (whole plant)	D. Ramasamy	RRIUM, Chennai	International Conference on Industrialization of Institutional Research on Phytomedicine. Coimbatore, 8-9 January 2009
75.	Role of Fasting in treatment of Diseases	S.M.A. Hassan	CRIUM, Lucknow	National Workshop on Dieto-Therapy (Diet in Health & Diseases). Organised by CCRUM at New Delhi, 13 January 2009
76.	Ilaj bil Ghiza in Unani Medical classics with special reference to Kitab al-jami li Mufradat al-Advia wal Aghzia by Ibn Baitar	Waseem Ahmed	CRIUM, Lucknow	National Workshop on Dieto-Therapy (Diet in Health & Diseases). Organised by CCRUM at New Delhi, 13 January 2009
77.	Isphanak-Ek Mufeed Ghiza	R.I. Ansari, Z.A. Ali, S. Ahmed, I.U. Khan	RRIUM, Aligarh	National Workshop on Dieto-Therapy (Diet in Health & Diseases). Organised by CCRUM at New Delhi, 13 January 2009
78.	Dietary regulations in lactating mothers	Neelam Quddusi	LRIUM, New Delhi	National Workshop on Dietotherapy (Diet in Health & Disease). Organised by CCRUM at New Delhi, 13 January 2009

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
79.	Ethics of eating and drinking	Nighat Anjum	LRIUM, New Delhi	National Workshop on Dietotherapy (Diet in Health & Disease). Organised by CCRUM at New Delhi, 13 January 2009
80.	Diet in different age groups	M.U. Azhar	LRIUM, New Delhi	National Workshop on Dietotherapy (Diet in Health & Disease). Organised by CCRUM at New Delhi, 13 January 2009
81.	Diet and lifestyle modifications in Hyperlipidemia	S.A. Khan, Ghazala Javed, Abdul Hannan & M.K. Siddiqui	RRIUM, New Delhi	National Convention on Unani Medicine. Organised by AIUTC, Thakery Hall, Bhiwandi, Mumbai, 8 February 2009
82.	Diabetes – Causes and treatment by Unani Medicine	Mohammad Ayub Khan	RRCUM, Allahabad	Magh Mela. 13 February 2009
83.	Tibbe Unani Main Ilme Tashreeh Ke Mojuda Tariqa Taleem Ka Jalinoosi Tashrehat Ke Hawale Se Ek Tanqeedi Jayeza	Fakhre Alam & Latafat Ali Khan	RRIUM, Aligarh	National Conference on Jarahat “Jcon-2009”. A.K.T.C., Aligarh, 21-22 February 2009
84.	Some useful ointments for healing of the wounds	R.I. Ansari	RRIUM, Aligarh	National Conference on Jarahat “Jcon-2009”. A.K.T.C., Aligarh, 21-22 February 2009
85.	Fasd (Venesection) – Site in relation to indication: A Literary profile	Shagufta Rehman	RRIUM, Aligarh	National Conference on Jarahat “Jcon-2009”. A.K.T.C., Aligarh, 21-22 February 2009
86.	Cauterization (Amal-e-Kaii) A promised cure by traditional method	Shabana Parveen	RRIUM, Aligarh	National Conference on Jarahat “Jcon-2009”. A.K.T.C., Aligarh, 21-22 February 2009

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
87.	Evaluation of quality standards for traditional system of medicine with reference to Barg-e-Sudab (<i>Ruta graveolens</i> Linn.)	Rampratap Meena	RRIUM, Chennai	International Herbal Conference 2009. Bangaluru, 26-28 February 2009
88.	Ethnobotanical report of some Unani medicinal plants used for various ailments by Kanni tribes of Kanniyakumari Dist. Tamil Nadu	K. Venkatesan	RRIUM, Chennai	International Herbal Conference 2009. Bangaluru, 26-28 February 2009
89.	Role of microscopical techniques for standardization of Majoon-e-Yahya Bin Khalid	S. Mageswari	RRIUM, Chennai	International Herbal Conference 2009. Bangaluru, 26-28 February 2009
90.	Evaluation of pharmacopoeial standards for polyherbal drugs with respect of Majoon-e-Masihi Mumsik – A Unani formulation	D. Ramasamy	RRIUM, Chennai	International Herbal Conference 2009. Bangaluru, 26-28 February 2009
91.	Diabetes – Diet and Exercise workshop prevention and management on MCH	Mohammad Ayub Khan	RRCUM, Allahabad	RRCUM, Allahabad 9 March 2009
92.	Stress – Causes symptoms prevention and management on MCH	Mohammad Ayub Khan	RRCUM, Allahabad	RRCUM, Allahabad 9 March 2009

S. No.	Title of the Paper	Name of Authour(s)	Name of the Institute/Unit	Event, Place & Date(s)
93.	Scope of Cultivation of Medicinal Plants used in Unani Medicine	S.M.A. Hassan	CRIUM, Lucknow	Conference organized by PHD Chamber of Commerce and CIMAP, Lucknow, 28 March, 2009
94.	Bamboo – its utilisation and Global challenge	Mohammad Ayub Khan	RRCUM, Allahabad	National seminar on importance of medicinal & aromatic plant
95.	Women and child welfare – Interlinked in RCH	Mohammad Ayub Khan	RRCUM, Allahabad	Pharmamed 2009. Jamia Hamdard, New Delhi

Appendix-II

LIST OF RESEARCH PAPERS PUBLISHED IN JOURNALS

S. No.	Title of the Paper	Name of the Author(s)	Name of the Institute/ Unit	Name of Journal/ Book	Vol. No. & Page	Year of Publication	Publisher/ Place of Publication
1.	Ethno-medicines of Bhadrachalam Forest Division (North & South) of A.P.	M.A. Shareef, V.C. Gupta, V.K. Singh & Aminuddin	CRIUM, Hyderabad	Hippocratic Journal of Unani medicine	Vol. 3 (3) 117-124	2008	CCRUM, New Delhi
2.	Vitiligo Repigmentation – A cosmetic need: Melanogenic effect of Unani formulations	M.A. Waheed	CRIUM, Hyderabad	Proceeding of Consultation on Strategy for globalizing Unani Medicine	pp. 3-23	2008	CCRUM, New Delhi
3.	Remission of Chronic Rhinosinusitis	M.A. Waheed	CRIUM, Hyderabad	Proceeding of Consultation on Strategy for globalizing Unani Medicine held in New Delhi 20 August 2008	pp. 24-41	2008	CCRUM, New Delhi
4.	Important folk-medicinal plants and traditional knowledge of tribals of East and West Godavari District of A.P., India	V.C. Gupta	CRIUM, Hyderabad	Second Proceeding of International Conference of Unani Medicine New Delhi February 2005		2008	CCRUM, New Delhi

S. No.	Title of the Paper	Name of the Author(s)	Name of the Institute/ Unit	Name of Journal/ Book	Vol. No. & Page	Year of Publication	Publisher/ Place of Publication
5.	Medicinal Plants of Bhadrachalam Forest Division of Andhra Pradesh	V.C. Gupta	CRIUM, Hyderabad	Role of Bio-technology in Medicinal and Aromatic plants	Vol. XX, pp. 291-311	2008	Ukaz Publication, Hyderabad
6.	Shaikhullah ke Mukhtalif Marahil main Dalak ki Ifadiyat	Waseem Ahmad	CRIUM, Lucknow	Jahan-e-Tibb	Vol.IX, Issue IV, pp. 15-23	2008	CCRUM, New Delhi
7.	Khar Khashak Cancer ki Ek Mufeed Dawa	S.M.A. Hassan	CRIUM, Lucknow	Jahan-e-Tibb	Vol. X, Issue I	2008	CCRUM, New Delhi
8.	Niqras ka Unani Ilaj Alqanoon Fit Tibb Key Hawaley se	Waseem Ahmad, W. Zaman and S. Arfeen	CRIUM, Lucknow	Jahan-e-Tibb	Vol.X, Issue I, pp. 24	2008	CCRUM, New Delhi
9.	Dood Ki Ghezai Aur Tibbi Ifadiat	S.M.A. Hassan	CRIUM, Lucknow	Jahan-e-Tibb	Vol. X, Issue II	2008	CCRUM, New Delhi
10.	Haiwani Ghezain – Tibbi Ifadiat	S.M.A. Hassan	CRIUM, Lucknow	Jahan-e-Tibb	Vol. X Issue II	2008	CCRUM, New Delhi
11.	Taghziah Aur Ilaz Bil Ghiza – Al jami li Mufradat Al Advia Wal Aghziah ke Hawale se	Waseem Ahmad	CRIUM, Lucknow	Jahan-e-Tibb	Vol. X Issue II (Ghiza Number), pp 39-93	2008	CCRUM, New Delhi
12.	Taghziah Aur Ilaz Bil Ghiza –Kitab al Mukhtarat Fi Al Tibb Ke Hawale se	Waseem Ahmad	CRIUM, Lucknow	Jahan-e-Tibb	Vol. X Issue II (Ghiza Number), pp 144-154	2008	CCRUM, New Delhi

S. No.	Title of the Paper	Name of the Author(s)	Name of the Institute/ Unit	Name of Journal/ Book	Vol. No. & Page	Year of Publication	Publisher/ Place of Publication
13.	Ahad-e-Mughaliah ke Tibbi Adab Ka Jaiza – Ilmul Ilaj ke Khosoosi Hawale se	Waseem Ahmad	CRIUM, Lucknow	Jahan-e-Tibb	Vol. X Issue III, pp 8-12	2009	CCRUM, New Delhi
14.	Andey Key Tibbi Khawas	S.M.A. Hassan	CRIUM, Lucknow	Jahan-e-Tibb	Vol. X, Issue II	2009	CCRUM, New Delhi
15.	Ethnobotanical report of some Unani Medicinal plants used for Diabetes in Coimbatore District, Tamil Nadu	K.Venkatesan	RRIUM, Chennai	Hippocratic Journal of Unani Medicine	Vol.3(3): 57-62	2008	CCRUM, New Delhi
16.	Studies on the pharmacopoeial standards of dried fruits of Sapistan (<i>Cordia dichotoma</i> Forst. f.)	Rampratap Meena	RRIUM, Chennai	Hippocratic Journal of Unani Medicine	Vol.3(3): 31-38	2008	CCRUM, New Delhi
17.	Development of standard operating procedure and pharmacopoeial standards of Jawarish-e-Amla Sada	Rampratap Meena	RRIUM, Chennai	Hippocratic Journal of Unani Medicine	Vol.3(4): 73-81	2008	CCRUM, New Delhi
18.	Microscopical and chemical standardization of a polyherbal drug – Jawarish-e-Hazim	Rampratap Meena	RRIUM, Chennai	Hippocratic Journal of Unani Medicine	Vol.4(1): 85-92	2009	CCRUM, New Delhi

S. No.	Title of the Paper	Name of the Author(s)	Name of the Institute/ Unit	Name of Journal/ Book	Vol. No. & Page	Year of Publication	Publisher/ Place of Publication
19.	Science ki Roshni Mein Gajar ka Tajzia	Latafat Ali Khan	RRIUM, Patna	Qaumi Tanzeem, Patna	5	2008	Patna
20.	Adrak – Ghiza Bhi Dawa Bhi	Latafat Ali Khan	RRIUM, Patna	Qaumi Tanzeem, Patna	5	2008	Patna
21.	Karaila ke Tibbi wa Ghazai Fawaid	Latafat Ali Khan	RRIUM, Patna	Qaumi Tanzeem, Patna	5	2008	Patna
22.	Qabaz Aur Uska Ilaj	Latafat Ali Khan	RRIUM, Patna	Qaumi Tanzeem, Patna	5	2008	Patna
23.	Loo/Zarbus Shams se Bachau Aur Uska Ilaj	S.M. Ahsan	RRIUM, Patna	Rashtriya Sahara, Patna		2008	Patna
24.	An Epidimological Study of Kala-Azar in Patna and surrounding areas	Humaira Bano, L.A. Khan & S.M. Ahsan	RRIUM, Patna	Hippocratic Journal of Unani Medicine	3(3):1-6	2008	CCRUM, New Delhi
25.	Hum Bhoolte Kiyon Hain	M.I. Alam	RRIUM, Patna	Rashtriya Sahara Urdu	11	2008	Patna
26.	Insani Jism Ke Liye Paani Ki Ahmiyat	L.A. Khan	RRIUM, Patna	Rashtriya Sahara Urdu	12	2008	Patna
27.	Mausami Amraz	L.A. Khan	RRIUM, Patna	Rashtriya Sahara Urdu	12	2008	Patna
28.	Bawaseer aur Uska Tadaruk	L.A. Khan	RRIUM, Patna	Qaumi Tanzeem	12	2008	Patna

S. No.	Title of the Paper	Name of the Author(s)	Name of the Institute/ Unit	Name of Journal/ Book	Vol. No. & Page	Year of Publication	Publisher/ Place of Publication
29.	Kitabul Fil Waba Wa Asbabih Ek Taaruf	Bilal Ahmad	RRIUM, Patna	Jahan-e-Tib		2009	CCRUM, New Delhi
30.	Analgesic and Antipyretic Activities of Leaf of <i>Cassia sophera</i> Linn. var. <i>Purpurea</i> Roxb – A preliminary study	Bilal Ahmad	RRIUM, Patna	Hippocratic Journal of Unani Medicine	3(3)	2008	CCRUM, New Delhi
31.	Zawal-e-Umr ke Asbab aur Tahaffuzi Tadabeer-Tibb-e-Unani ke Hawala se Ek Tajziyati Mutala	Bilal Ahmad	RRIUM, Patna	Jahan-e-Tib		2008	CCRUM, New Delhi
32.	Comparative morphology of some cucurbitaceous seeds-used in Unani system of Medicine	S. Hashmi & V.K. Singh	RRIUM, Aligarh	Hippocratic Journal of Unani Medicine	3 (2): 47-56	2008	CCRUM, New Delhi
33.	Pharmacognostical standardization of some important herbal drugs of Unani system of Medicine	S. Hashmi	RRIUM, Aligarh	Second Proceedings of International Conference of Unani Medicine, New Delhi, February 2005		2008	CCRUM, New Delhi

S. No.	Title of the Paper	Name of the Author(s)	Name of the Institute/ Unit	Name of Journal/ Book	Vol. No. & Page	Year of Publication	Publisher/ Place of Publication
34.	Gandana: A crude drug of disputed Namedative	S. Hashmi, V.K. Singh & S. Parveen	RRIUM, Aligarh	Hippocratic Journal of Unani Medicine	3 (4): 49-52	2008	CCRUM, New Delhi
35.	Folk medicinal plants of Lansdowne Forest Division Kotdwar (Pauri Garhwal)	Ali, Z.A. & Ahmad, S.	RRIUM, Aligarh	Hippocratic Journal of Unani Medicine	4 (1): 93-100	2009	CCRUM, New Delhi
36.	Isphanak-Ek Mufeed Ghiza	R.I. Ansari	RRIUM, Aligarh	Jahan-e-Tibb	Vol II, 186-189	2008	CCRUM, New Delhi
37.	Randomized Placebo controlled Clinical Trial of a Unani Herbo-mineral Cream (UHC) to evaluate its topical Effects on chloasma	Shagufta Parveen, Shariq Zafar, Masroor Ali Qureshi & Humaira Bano	RRIUM, Mumbai	Hippocratic Journal of Unani Medicine	3(2):	2008	CCRUM, New Delhi
38.	Evaluation of Sharbat-e-Akseer-e-Sadar and Qurs-e-Zeequn Nafas in 100 patients of Chronic Bronchitis	Kazmi S.F. Siddiqui M.M.H. Masroor Ali Qureshi	RRIUM, Mumbai	Hippocratic Journal of Unani Medicine	3(2):	2008	CCRUM, New Delhi
39.	Effect of essential oil of rose on aggressive behaviour of Siamese fighting fish	Munawwar Hussain, Shariq Zafar & Masroor Ali Qureshi	RRIUM, Mumbai	Hippocratic Journal of Unani Medicine	4(1): 11-18	2009	CCRUM, New Delhi

S. No.	Title of the Paper	Name of the Author(s)	Name of the Institute/ Unit	Name of Journal/ Book	Vol. No. & Page	Year of Publication	Publisher/ Place of Publication
40.	Effect of Safoof Jawahar Mohra (SJM) on CD4 count in cases of AIDS: A Case study	Masroor A. Qureshi & Humaira Bano	RRIUM, Mumbai	Hippocratic Journal of Unani Medicine	3(4): 103-106	2008	CCRUM, New Delhi
41.	Scientific validation of method of manufacture of Raughan-e-Banafsha: A potent herbal formulation	Akbar S., Masood A. and Khan S.A.	RRIUM, Srinagar	The Asian Journal of Experimental Chemistry	3(1-2): 33-35	2008	
42.	Spices as beneficial hypoglycemic Indian food adjuncts	Akbar S. and Masood A.	RRIUM, Srinagar	Indian Journal of Applied and Pure Biology	23(2): 257-260	2008	ISSN: 0970-2091
43.	Piyo Saf aur Shafaf Pani Barkarar Rakho Sehat aur Jawani	N.H. Khan	RRIUM, Srinagar	Journal Al Shifa, issue		2008	
44.	Reproductive Child Health and Unani Medicine	NH Khan, Naquibul Islam & Basharat Bukhari	RRIUM, Srinagar	Hippocratic Journal of Unani Medicine	3(3): 23-30	2008	CCRUM, New Delhi
45.	Management of Menorrhagia with Cap Habis and Sufoof Sailanur Reham	Irfat Ara, Naquibul Islam & Basharat Bukhari	RRIUM, Srinagar	Hippocratic Journal of Unani Medicine	3(4): 1-6	2008	CCRUM, New Delhi

S. No.	Title of the Paper	Name of the Author(s)	Name of the Institute/ Unit	Name of Journal/ Book	Vol. No. & Page	Year of Publication	Publisher/ Place of Publication
46.	The Prevalence of different forms of psoriasis – possible aggravating & predisposing factors in Kashmir Valley and response of double blind coded Unani drugs UNIM-401+402 and UNIM-401+403 in Psoriasis – Part-II	Naquibul Islam, NH Khan & Basharat Bukhari	RRIUM, Srinagar	Hippocratic Journal of Unani Medicine	3(4): 17-24	2008	CCRUM, New Delhi
47.	Similarities between concepts of Wajaul Mafasil (Arthritis) in Unani and Rheumatoid Arthritis in Modern Medicine – A Critical Literature Review	Naquibul Islam & S. Shakir Jamil	RRIUM, Srinagar	Hippocratic Journal of Unani Medicine	3(4): 25-38	2008	CCRUM New Delhi
48.	Leeching in the history – A review	Younis Munshi, Irfat Ara, Huma & Zahoor A.	RRIUM, Srinagar	Pakistan Journal of Biological Sciences	11(13)	2008	PMID–18819 614
49.	Zof-e-Dimagh Aur Uska Tadaruk	Ghazala Javed & Abdul Hannan	RRIUM, New Delhi	Jahan-e-Tibb	9(4): pp 24-25	2008	CCRUM, New Delhi
50.	A clinical study of the Unani formulation UNIM-210 for its Anti-diabetic effect	Radhey Shyam Verma	RRCUM, Allahabad	Hippocratic Journal of Unani Medicine	4(1): 41-48	2009	CCRUM, New Delhi

S. No.	Title of the Paper	Name of the Author(s)	Name of the Institute/ Unit	Name of Journal/ Book	Vol. No. & Page	Year of Publication	Publisher/ Place of Publication
51.	Alternative Healthy trends and regimental therapy	M. Salim Siddiqui	CCRUM, Head-quarters, New Delhi	Proceedings of International Conference of Unani Medicine New Delhi February 2005	pp 515	2008	CCRUM, New Delhi
52.	Abu Bakr Mohammad Bin Zakariya Razi ki Tibbi Khidmat – Al Hawi Fit Tibb ke Khusoosi Hawale se	M. Salim Siddiqui	CCRUM, Head-quarters, New Delhi	Proceedings of Seminar on Historical and Literary Research in Unani Medicine 2007	pp 114	2009	CCRUM, New Delhi
53.	Additions to ethnomedicines of Santhals from Hazaribagh district of Bihar, India	Aminuddin	CCRUM, Head-quarters, New Delhi	Hippocratic Journal of Unani Medicine	3 (2): 93-100	2008	CCRUM, New Delhi
54.	Regulatory standards on single drugs of plant origin used in Unani System of Medicine	Aminuddin	CCRUM, Head-quarters, New Delhi	Hippocratic Journal of Unani Medicine	3 (2): 101-114	2008	CCRUM, New Delhi
55.	Nephroprotective effects of Kulthi	M.U. Azhar	LRIUM, New Delhi	Hippocratic Journal of Unani Medicine		2008	CCRUM, New Delhi

S. No.	Title of the Paper	Name of the Author(s)	Name of the Institute/ Unit	Name of Journal/ Book	Vol. No. & Page	Year of Publication	Publisher/ Place of Publication
56.	Alwan-e-Baul se Istidlal-e-Amraz ke Tibbi Usool	Amanullah	CCRUM Head-quarters, New Delhi	Jahan-e-Tibb	Vol IX, Issue IV, pp 43-49	2008	CCRUM, New Delhi
57.	Review of book Zeeq-un-Nafas Shobi: Mashahir Atibba ki Nazar Main	Amanullah	CCRUM Head-quarters, New Delhi	Jahan-e-Tibb	Vol X, Issue III, pp 63-64	2009	CCRUM, New Delhi

Appendix-III

LIST OF PARTICIPANTS OF TRAINING PROGRAMMES

S. No.	Name(s) of the participants	Name of the instt./units	Title of the training	Date and period	Name of the organizer/Venue
1.	M.A. Waheed	CRIUM, Hyderabad	Training Programme on Entrepreneurship Development through Medicinal and Aromatic Plants Technologies	6-8 January, 2009	CIMPA Resource Centre, Boduppall, Hyderabad
2.	Rifat M. Afridi	RRIUM, Aligarh	Continuing Medical Education (CME) Programme	6-7 August 2008	A.M.U., Aligarh
3.	Rahat Raza, Ghazala Javed, Rashidullah Khan, Abdul Raheem & Anwar-ul-Islam	RRIUM, New Delhi	Training programme on Biomedical Ethics in Clinical Trials of Unani Medicine	3 June 2008	CCRUM, New Delhi
4.	Abdul Hannan	RRIUM, New Delhi	Delivered lecture on Arthritis and its management through Unani System of Medicine	13 November 2008	Jamia Hamdard, New Delhi
5.	Abdul Hannan	RRIUM, New Delhi	Delivered lecture on role of regimental therapy specially cupping	17 March 2009	Jamia Hamdard, New Delhi
6.	Ghazala Javed	RRIUM, New Delhi	Training Programme in Biomedical Ethics	16 November to 12 December 2008	Saint Jhon's Medical Academy, Bangaluru
7.	Ghazala Javed	RRIUM, New Delhi	Contact programme in respect of PG certificate course in Hospital Management	22-26 December 2008	NIHFW, Munirka, New Delhi

S. No.	Name(s) of the participants	Name of the instt./units	Title of the training	Date and period	Name of the organizer/Venue
8.	Abdul Raheem	RRIUM, New Delhi	Reorientation training programme in yoga and naturopathy for practitioners of AYUSH & Allopathy	20-25 March 2009	CCRYN, New Delhi
9.	Mohammad Ayub Khan	RRCUM, Allahabad	Workshop on Bio-medical ethics in Clinical Trials of Unani Medicine	3 June 2008	CCRUM, New Delhi
10.	M. Salim Siddiqui	CCRUM Headquarters, New Delhi	Training Programme in National Yoga Week	16-21 February 2009	Morarji Desai Yoga Institute, New Delhi
11.	Anwar Jamal	CCRUM Headquarters, New Delhi	Training Programme on Biomedical Ethics in Clinical Trails of Unani Medicine	3 June 2008	CCRUM, New Delhi
12.	Anwar Jamal	CCRUM Headquarters, New Delhi	Workshop on Biomedical Ethics	2 August 2008	Jointly organised by CCRUM and ICMR at Administrative Block Auditorium, AMU, Aligarh
13.	Anwar Jamal	CCRUM Headquarters, New Delhi	Re-orientation Training Programme in Yoga and Naturopathy for the Practitioners of AYUSH and Allopathy	20-25 March 2009	CCRYN, New Delhi
14.	Jamal Akhtar	CCRUM Headquarters, New Delhi	Re-orientation Training Programme in Yoga and Naturopathy for the Practitioners of AYUSH and Allopathy	20-25 March 2009	CCRYN, New Delhi

S. No.	Name(s) of the participants	Name of the instt./units	Title of the training	Date and period	Name of the organizer/Venue
15.	Amanullah	CCRUM Headquarters, New Delhi	Re-orientation Training Programme in Yoga and Naturopathy for the Practitioners of AYUSH and Allopathy	20-25 March 2009	CCRYN, New Delhi
16.	Mohammad Salim Siddiqui	CCRUM Headquarters, New Delhi	Training Programme on Biomedical Ethics in Clinical Trails of Unani Medicine	3 June 2008	CCRUM, New Delhi
17.	Jamal Akhtar	CCRUM Headquarters, New Delhi	Training Programme on Biomedical Ethics in Clinical Trails of Unani Medicine	3 June 2008	CCRUM, New Delhi
18.	Amanullah	CCRUM Headquarters, New Delhi	Training Programme on Biomedical Ethics in Clinical Trails of Unani Medicine	3 June 2008	CCRUM, New Delhi



ACKNOWLEDGEMENTS

The Directorate of the Council is grateful to the Union Minister of Health & Family Welfare and Minister of State for Health & Family Welfare for their support in fulfilling the objectives of the Council. The Directorate is also thankful to Secretary to Government of India, Ministry of Health and Family Welfare, Department of Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) without whose encouragement and guidance the strides made in the various research programmes of the Council would not have been possible. We are also thankful to other officers in the Department of AYUSH, and are confident of their continued support and cooperation in future as well.

Thanks are also due to the scientists and scholars of various disciplines, government agencies and universities, who have been associated with research work of the Council either directly or indirectly and also to the Project Officers and research workers of the Council working in different projects including headquarters.



FINANCIAL STATEMENTS

Separate Audit Report of the Comptroller & Auditor General of India on the Accounts of Central Council for Research in Unani Medicine for the year ended 31 March 2009

We have audited the attached Balance Sheet of the Central Council for Research in Unani Medicine as at 31 March 2009 and Income & Expenditure Account/Receipt & Payment Account for the year ended on that date under Section 20(1) of the Comptroller & Auditor General's (Duties, Powers & Conditions of Service) Act, 1971. The audit has been entrusted upto 2008-09. These financial statements include the accounts of eight regional offices of the Central Council for Research in Unani Medicine. These financial statements are the responsibility of the Central Council for Research in Unani Medicine. Our responsibility is to express an opinion on these financial statements based on our audit.

2. This separate Audit Report contains the comments of the Comptroller & Auditor General of India (CAG) on the accounting treatment only with regard to classification, conformity with the best accounting practices, accounting standards and disclosure norms etc. Audit observations on financial transactions with regard to compliance with the Law, Rules & regulations (Propriety and Regularity) and efficiency-cum-performance aspects, etc. if any are reported through Inspection Reports/CAG's Audit Reports separately.

3. We have conducted our audit in accordance with auditing standards generally accepted in India. These standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatements. An audit includes examining on a test basis, evidence supporting the amounts and disclosure in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall presentation of financial statements. We believe that our audit provides a reasonable basis for our opinion.

4. Based on our audit, we report that:

- i. We have obtained all the information and explanations, which to the best of our knowledge and belief were necessary for the purpose of our audit.
- ii. The Balance Sheet, Income & Expenditure Account/Receipt & Payment Account dealt with by this report have been drawn up in the format prescribed by the Ministry of Finance.
- iii. In our opinion, proper books of accounts and other relevant records have been maintained by the Central Council for Research in Unani Medicine in so far as it appears from our examination of such books.

iv. We further report that :

A. Balance Sheet

A.1 Liabilities

No provision had been made for gratuity, pension and leave encashment resulting in understatement of liability. The amount could not be quantified.

A.2 Assets

A.2.1 Investment

Investments had not been made as per the pattern prescribed by the Ministry of Finance, vide notification no F5-53/2002-E CB & PR, dated 24/01/2005. Out of the total investment of Rs. 16.74 crore, only Rs. 1.60 crore has been invested in Government Securities, which is not in conformity with investment pattern.

B. Income & Expenditure Account

B.1 Expenditure

B.1.1 Depreciation

Depreciation of Rs. 2.95 crore for the period 2008-09 has not been shown as expenditure in Income and expenditure account though deducted from the fixed assets. The depiction was not as per the common format of accounts.

C. Grant-in-aid

During the year 2008-09, the Council received a total grant of Rs. 55.92 crore (Plan Rs. 30.85 crore and Non-Plan Rs. 25.07 crore) from the Ministry of Health and Family Welfare, Department of Ayush. It had its own receipts of Rs. 49.15 lakh (Plan Rs. 41.95 lakh and Non-Plan Rs. 7.19 lakh). The expenditure during the year was Rs. 51.74 crore (Plan Rs. 26.22 crore and Non-Plan Rs. 25.52 crore).

D. Management letter

Deficiencies, which have not been included in the Audit Report have been brought to the notice of the Management through a management letter issued separately for remedial/corrective action.

v. Subject to our observations in the preceding paragraphs, we report that the Balance sheet and Income and Expenditure Account/Receipts and Payments Account dealt with by this report are in agreement with the books of accounts.



- vi. In our opinion and to the best of our information and according to the explanation given to us, the said financial statements, read together with the Accounting Policies and Notes on Accounts, and subject to the significant matters stated above and other matters mentioned in Annexure to this Audit Report, give a true and fair view in conformity with accounting principles generally accepted in India:
- a. In so far as they relate to the Balance Sheet of the state of affairs of the Central Council for Research in Unani Medicine as at 31 March 2009; and
 - b. In so far as they relate to the Income and Expenditure Account of the surplus for the year ended on that date.

For and on behalf of C & AG of India

**Director General of Audit
Central Expenditure**

Place: New Delhi
Date: 12.2.2010





CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Index of the Annual Accounts for the Year 2008-2009

S.No.	Name of the accounts	Page No.	Schedules at Page No.
1.	Receipt & Payment accounts	140-142	146-153
2.	Income & Expenditure accounts	143	154-155
3.	Balance Sheet	144-145	156-163
4.	Notes on Accounts		164

Sd.
(D.S. Negi)
Office Superintendent
(Accounts)

Sd.
(S. Asif Mian)
Accountant (I/A)

Sd.
(Surinder Nath)
Accounts Officer

Sd.
(Athar Ali)
Assistant Director (Admn.)

Sd.
(Dr. Mohammed Khalid Siddiqui)
Director



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE
Receipt and Payment Account for the year ended 31.03.2009

Receipts	Current year	Previous year	Payments	Current year	Previous year
1. Opening Balance			1. Expenses		
A- Cash in hand	1,44,372.75	1,43,361.75	A- Establishment Expenses	32,16,31,018.50	18,89,43,271.92
B- Bank Balances			B- Administrative Expenses	6,16,35,336.62	4,87,50,399.08
a- In Current A/C	Nil	Nil	C- Other Expenses		
b- In Deposit A/C	Nil	Nil	a- Material & supplies	5,50,71,731.00	3,28,46,426.50
c- Saving A/C	160,33,979.64	1,01,76,883.04	b- Advance to Govt. Servants	28,76,500.00	48,41,050.00
			c- Outstanding Advances	79,48,402.00	1,40,00,667.00
			d- Other Charges	3,47,39,584.00	2,70,73,428.05
2. Grants Received			2. Payments made against Funds for Various Projects	Nil	Nil
A- From Government of India	55,88,62,000.00	35,64,11,652.00			
B- From State Government	Nil	Nil			
C- From Other Sources (W.H.O.)	3,00,000.00	14,17,390.00			
3. Income from Investments			3. Investments and Deposits Made		
A- Earmarked/ Endowment Funds	Nil	Nil	A- Out of Earmarked/ Endowment Funds	Nil	Nil
B- Own Fund (Other Investments)	Nil	Nil	B- Out of Own Funds (Other Investments)	2,61,92,462.47	1,53,85,082.12

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Receipts	Current year	Previous year	Payments	Current year	Previous year
4. Interest Received			4. Expenditure on Fixed Assets & Capital Work-in-Progress		
A- On Bank Deposits	50,01,586.92	17,95,500.00	A- Purchase of Fixed Assets	4,43,33,869.00	6,39,76,000.00
B- Loans, Advances etc.	3,19,895.00	4,35,316.00	B- Expenditure on Capital W.I.P	1,63,33,500.00	3,14,91,000.00
			C- Publication (priced)	8,45,167.00	11,03,932.00
5. Other Income (Specify)	1,73,43,577.00	1,61,01,791.30	5. Refund of Surplus Money / Loans		
			A- To Government of India	Nil	Nil
			B- To The State Government	Nil	Nil
6. Amount Borrowed	Nil	Nil	6. Finance Charges	Nil	Nil
7. Any Other Receipts			7. Other Payments (Specify)		
a- By Adjustments of Advances pertaining to previous year	69,50,237.00	6,01,12,804.00	a- Remittances of Recoveries	3,88,79,004.10	2,12,16,452.00
b- Recovery for Remittances	3,88,79,137.10	2,11,63,327.00	b- Refund of unspent balances to concerned Departments/Offices	4,32,155.38	4,56,024.00
c- Sale of Publication (Priced)	24,0851.00	1,38,204.00	c- Undisbursed amount in previous year disbursed	23,000.00	Nil
d- Misc. Receipts to te Transferred to pension fund A/C	70,922.00	1,05,925.00	d- Amount to be received from concerned a/c / institute	41,466.00	Nil
e- Recoveries of subscriptions/advances	3,49,44,357.00	2,97,17,997.05	e- L.I.C amount disbursed	2,00,000.00	50,000.00
f- Investment Received	2,18,09,230.93	4,85,377.92	f- Other misc. payments	3,43,44,340.00	3,39,11,685.48

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Receipts	Current year	Previous year	Payments	Current year	Previous year
g- Amount Receivable Received	10,57,638.00	4,58,294.48			
h- Security Deposit	71,100.00	81,883.00			
i- Advance from Vidyapeeth through RRIUM, Srinagar	2,50,000.00	-			
j- In transit in previous year received	2,61,500.00	-			
k- Payable to other A/Cs	18,000.00	2,989.00			
l- Recoveries of refundable advances	17,02,726.00	14,02,075.00			
m- Undisbursed amount	87,000.00	23,000.00			
n- L.I.C for disbursement	2,00,000.00	50,000.00			
			8. Closing Balance		
			A- Cash in hand	1,39,912.75	1,44,372.75
			B- Bank Balances		
			a- In Current A/C	Nil	Nil
			b- In Deposit A/C	Nil	Nil
			c- Saving A/C	5,88,80,661.52	1,60,33,979.64
Total	70,45,48,110.34	50,02,23,770.54	Total	70,45,48,110.34	50,02,23,770.54

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CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE
Income and Expenditure Account for the year ended 31.03.2009

(B)	Current year	Previous year	(A)	Current year	Previous year
Expenditure			Income		
Establishment expenses	32,16,31,018.50	18,86,89,036.92	Income from sales / services	Nil	Nil
Other Administrative Expenses etc.	11,69,24,823.62	8,18,75,666.20	Grants / subsidies	55,94,00,000.00	35,75,74,390.00
Expenditure on Grants, subsidies etc.	Nil	Nil	Fees / Subscription	Nil	Nil
Interest	Nil	Nil	Income from Investmens	Nil	Nil
Depreciation	Nil	Nil	Income from Royalty	Nil	Nil
Other Charges	3,39,48,354.00	2,18,28,668.00	Interest Earned	Nil	Nil
			Other Income	49,14,504.00	23,94,218.55
			Increase/Decrease in Work in progress	Nil	Nil
			Total (A)	56,43,14,504.00	35,99,68,608.55
			Less- Capitalised Expenditure	-4,49,38,185.00	-6,49,41,728.00
Total	47,25,04,196.12	29,23,93,371.12	Total Income	51,93,76,319.00	29,50,26,880.55
Balance being excess of income over Expenditure (A-B)	4,68,72,122.88	26,33,509.43			
Transfer to special reserve (Specify each)	Nil	Nil			
Transfer to / General Reserve	Nil	Nil			
Balances being Surplus/(Deficit) carried to Capital Fund	4,68,72,122.88	26,33,509.43			

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Director

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE
Balance Sheet as on 31.03.2009

Liabilities

Corpus / Capital Fund and Liabilities	Schedule	Current Year	Previous Year
Corpus / Capital Fund	1 & 4	28,75,11,412.86	22,70,89,194.01
Reserves and Surplus		Nil	Nil
Earmarked / Endowment Funds		Nil	Nil
Secured Loans and Borrowings		Nil	Nil
Unsecured Loans and Borrowings		Nil	Nil
Deferred Credit Liabilities		Nil	Nil
Current Liabilities and Provision	2	19,84,96,693.89	17,47,03,716.77
Total		48,60,08,106.75	40,17,92,910.78

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Director



Assets

	Schedule	Current Year	Previous Year
Fixed Assets	3	17,31,31,605.34	15,89,17,135.99
Investments from Earmarked/Endowments		Nil	Nil
Investments – Others		16,74,14,583.57	16,30,31,355.83
Current Assets, Loans, Advances etc.	5 (A & B)	14,54,61,917.84	7,98,44,418.96
Miscellaneous Expenditure		Nil	Nil
TOTAL		48,60,08,106.75	40,17,92,910.78
Notes on Accounts (Attached) Page 164			

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Director



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE
Schedule of Consolidated Receipts for the Current Year 2008-09

S. No.	Name of the Scheme	Opening Balance		Grant-in Aid	Misc. Receipts	Bank Interest	Interest on refundable advances	Recovery for Remittance	By adjustment of advances pertaining to previous year	Recovery of subs. etc.	Sale of Council's Publication (priced)
(1)	(2)	(3)		(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
1.	Health Scheme a/c	Cash in Hand	Cash at Bank	25,06,57,000.00	7,19,246.00		2,86,725.00	2,84,46,931.10	5,29,220.00		2,40,851.00
	"	10,200.00	3.61	27,98,05,000.00	34,09,342.00		33,170.00	1,03,06,476.00	64,21,017.00		
	"	83,167.60	32,632.00		(-) 33,900.00	33,900.00					
	"	46,000.00	670.82		(-) 8,92,999.00	8,92,999.00					
	"	5,005.15	59,826.42		(-) 2,86,725.00						
2.	ROTP a/c		2,000.90		(-) 33,170.00	71.00					
3.	Herb Garden a/c		8,78,621.00			28,499.00					
4.	Pub. of Text Book a/c		46,00,000.00			83,313.00					
5.	UPS a/c I		3,56,107.35			12,539.00					
6.	Seminar a/c		3,044.00			110.00					
7.	DSOP		1,89,424.05			5,968.00					
8.	EMR		37,876.00		1,51,269.00	680.00					
9.	Digitisation of Manuscript a/c		34,96,305.00	11,00,000.00		98,125.00		1,250.00			
10.	WHO a/c		3,93,634.00	3,00,000.00		16,572.00					
11.	NMPB a/c		1,29,525.38								
12.	UPS a/c II		861.00								
13.	ICST a/c		1,54,221.00			5,445.00					

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Director



S. No.	Name of the Scheme	Opening Balance		Grant-in Aid	Misc. Receipts	Bank Interest	Interest on refundable advances	Recovery for Remittance	By adjustment of advances pertaining to previous year	Recovery of subs. etc.	Sale of Council's Publication (priced)
(1)	(2)	(3)		(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
14.	Donation a/c		31,656.75		5,000.00	1,053.00					
15.	International Events conference a/c			3,00,000.00							
16.	DST a/c			2,70,00,000.00		3,70,992.00					
17.	New Pension Scheme a/c		2,611.00		8,199.00	4,27,243.61				75,42,123.00	
18.	GPF a/c		15,21,411.59			25,76,801.02				2,17,06,905.00 27,83,041.00 20,05,348.00	
19.	GIS a/c		7,41,510.65			17,663.00				9,06,940.00	
20.	Pension fund a/c		34,02,037.12		58,801.00 37,38,514.00 1,05,00,000.00	4,29,613.29		1,12,480.00 12,000.00		-	
	Total	1,44,372.75	1,60,33,979.64	55,91,62,000.00	1,73,43,577.00	50,01,586.92	3,19,895.00	3,88,79,137.10	69,50,237.00	3,49,44,357.00	2,40,851.00
		1,61,78,352.39									

Sd.
(D.S. Negi)
Office Superintendent
(Accounts)

Sd.
(S. Asif Mian)
Accountant (I/A)

Sd.
(Surinder Nath)
Accounts Officer

Sd.
(Athar Ali)
Assistant Director (Admn.)

Sd.
(Dr. Mohammed Khalid Siddiqui)
Director



S. No.	Name of the Scheme	Recovery of refundable advances (12)	Misc. receipts to be transferred to pension fund a/c (13)	Receivable amount received (14)	Security deposits (15)	Advance received from the outside Institute (16)	In transit amount received (17)	Undisbursed amount (18)	Payable amount (19)	Investment received (20)	LIC amount for disbursement (21)	Total (22)
1.	Health Scheme a/c	14,51,576.00	64,022.00	10,05,048.00	71,100.00	2,50,000.00	2,61,500.00	87,000.00				58,42,20,884.70
		2,51,150.00	6,900.00									
2.	ROTP a/c											2,071.90
3.	Herb Garden a/c											9,07,120.00
4.	Pub. of Text Book a/c											46,83,313.00
5.	UPS a/c I											3,68,646.35
6.	Seminar a/c											3,154.00
7.	DSOP											1,95,392.05
8.	EMR											1,91,075.00
9.	Digitisation of Manuscript a/cs								18,000.00			47,12,430.00
10.	WHO a/c											7,10,206.00
11.	NMPB a/c											1,29,525.38
12.	UPS a/c II											861.00
13.	ICST a/c											1,59,666.00
14.	Donation a/c											37,709.75
15.	International Events conference a/c											3,00,000.00

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S. No.	Name of the Scheme	Recovery of refundable advances (12)	Misc. receipts to be transferred to pension fund a/c (13)	Receivable amount received (14)	Security deposits (15)	Advance received from the outside Institute (16)	In transit amount received (17)	Undisbursed amount (18)	Payable amount (19)	Investment received (20)	LIC amount for disbursement (21)	Total (22)
16.	DST a/c											2,73,70,992.00
17.	NPS a/c									65,68,851.20		1,45,49,027.81
18.	GPF a/c									1,27,15,140.00		4,33,08,646.61
19.	GIS a/c										2,00,000.00	18,66,113.65
20.	Pension fund a/c			52,590.00						25,25,239.73		2,08,31,275.14
	Total	17,02,726.00	70,922.00	10,57,638.00	71,100.00	2,50,000.00	2,61,500.00	87,000.00	18,000.00	2,18,09,230.93	2,00,000.00	70,45,48,110.34

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Director



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Schedule of Consolidated Payments for the Current Year 2008-09

S. No.	Name of the Scheme	Establishment Exps.	Administrative Exps.	Material & Supplies	Assets	Publication (Priced)	Advances to Government Servant	Remittance of Recoveries	Refund to concerned Department/offices	Outstanding advances
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
1.	Health Scheme Non Plan a/c	24,22,35,697.50	44,10,955.00	4,91,993.00	1,55,571.00			2,84,46,931.10		6,75,422.00
2.	" Plan	7,93,54,321.00	5,70,38,264.62	5,45,79,000.00	4,38,40,298.00	8,45,167.00	28,51,000.00	1,03,06,343.00		72,72,980.00
3.	"						25,500.00			
4.	"									
5.	"									
6.	ROTP a/c									
7.	Herb Garden a/c									
8.	Pub. of Text Book a/c									
9.	UPS a/c I									
10.	Seminar a/c									
11.	DSOP	3,000.00	2,731.00	738.00						
12.	EMR	38,000.00	166.00					1,250.00		
13.	Digitisation of Manuscript a/c				3,38,00.00					
14.	WHO a/c								3,02,630.00	
15.	NMPB a/c								1,29,525.38	

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(Athar Ali)
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Director



S. No.	Name of the Scheme	Establishment Exps.	Administrative Exps.	Material & Supplies	Assets	Publication (Priced)	Advances to Government Servant	Remittance of Recoveries	Refund to concerned Department/offices	Outstanding advances
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
16.	Manuscript									
17.	UPS a/c II									
18.	ICSJ a/c									
19.	Donation a/c		60.00							
20.	International Events conference a/c									
21.	DST a/c		1,81,360.00 1,800.00							
22.	NPS a/c									
23.	GPF a/c									
24.	GIS a/c									
25.	Pension fund a/c							1,24,480.00		
	Total	32,16,31,018.50	6,16,35,336.62	5,50,71,731.00	4,43,33,869.00	8,45,167.00	28,76,500.00	3,88,79,004.10	4,32,155.38	79,48,402.00

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(Athar Ali)
Assistant Director (Admn.)

Sd.
(Dr. Mohammed Khalid Siddiqui)
Director



S. No.	Name of the Scheme	Other Charges (12)	Undisbursed amount Disbursed (13)	Amount Receivable (14)	Investments (15)	Other Misc. Payments (16)	LIC amount disbursed (17)	Work in Progress (18)	Closing Balance (19)	Total (20)
1.	Health Scheme a/c Non Plan	54,57,792.00	23,000.00						1,00,469.11	28,19,97,830.71
	" Plan	2,92,81,792.00		40,340.00				1,63,33,500.00	4,54,548.37	30,22,23,053.99
	"									
	"									
	"									
2.	ROTP a/c								2,071.90	2,071.90
3.	Herb Garden a/c								9,07,120.00	9,07,120.00
4.	Pub. of Text Book a/c								46,83,313.00	46,83,313.00
5.	UPS a/c								3,68,646.35	3,68,646.35
6.	Seminar a/c								3,154.00	3,154.00
7.	DSOP								1,88,923.05	1,95,392.05
8.	EMR								1,51,659.00	1,91,075.00
9.	Digitisation of Manuscripts a/c								43,74,430.00	47,12,430.00
10.	WHO a/c								4,07,576.00	7,10,206.00
11.	NMPB a/c									1,29,525.38
12.	Manuscripts									
13.	UPS a/c II								861.00	861.00
14.	ICSJ a/c								1,59,666.00	1,59,666.00
15.	Donation a/c								37,649.75	37,709.75

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Director



S. No.	Name of the Scheme	Other Charges (12)	Undisbursed amount Disbursed (13)	Amount Receivable (14)	Investments (15)	Other Misc. Payments (16)	LIC amount disbursed (17)	Work in Progress (18)	Closing Balance (19)	Total (20)
16.	International Events conference a/c								3,00,000.00	3,00,000.00
17.	DST a/c								2,71,87,832.00	2,73,70,992.00
18.	NPS a/c				91,27,504.81				54,21,523.00	1,45,49,027.81
19.	GPF a/c				1,41,21,182.00	1,28,62,950.00 29,91,519.00 38,17,258.00 955.00 1,20,000.00 8,70,281.00			85,24,501.61	4,33,08,646.61
20.	GIS a/c				29,43,775.66	2,72,625.00 4,74,000.00	2,00,000.00		9,19,488.65	18,66,113.65
21.	Pension fund a/c			1,126.00		1,29,34,752.00			48,27,141.48	2,08,31,275.14
22.	Total	3,47,39,584.00	23,000.00	41,466.00	2,61,92,462.47	3,43,44,340.00	2,00,000.00	1,63,33,500.00	5,90,20,574.27	70,45,48,110.34

Cash 1,39,912.75

Bank 5,88,80,661.52

Total 5,90,20,574.27

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CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE
Schedule of Consolidation of Expenditure for the year ending 31.03.2009

S. No.	Name of the Scheme	Establishment Exps.	Administration Exps.	Material & Supplies	Other charges	Excess of Income over expenditure	Excess of Expenditure over Income
1.	Health a/c	24,22,35,697.50	44,10,955.00	4,91,993.00	2,60,45,092.00		
2.	"	7,41,44,854.00	5,33,09,133.62	2,85,42,905.00	35,45,564.00		
3.	"	12,81,323.00	22,21,256.00	1,91,05,506.00	43,57,698.00		
4.	"	39,28,144.00	15,07,875.00	69,30,589.00		2,17,36,574.38	
5.	"		68,454.00				37,78,232.50
6.	"		1,49,302.00				
7.							
8.							
9.	DSOP a/c	3,000.00	2,731.00	738.00			501.00
10.	Donation a/c		60.00			5,993.00	
11.	DST a/c		1,83,160.00			2,71,87,832.00	
12.	EMR a/c	38,000.00	166.00			1,13,783.00	
13.	ROTP a/c					71.00	
14.	Herb Garden a/c					28,499.00	
15.	UPS a/c I					12,539.00	
16.	Seminar a/c					110.00	
17.	WHO a/c					3,16,572.00	
18.	ICSJ a/c					5,445.00	
19.	Digitisation a/c					8,60,125.00	
20.	Publication of Text book a/c					83,313.00	
21.	International events a/c					3,00,000.00	
	Total	32,16,31,018.50	6,18,53,092.62	5,50,71,731.	3,39,48,354.00	5,06,50,856.38	37,78,733.50
22.	Less: Excess of expenditure over income adjusted					(-) 37,78,733.50	
	Total		11,69,24,823.62			4,68,72,122.88	

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(Athar Ali)
Assistant Director (Admn.)

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(Dr. Mohammed Khalid Siddiqui)
Director



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE
Schedule of Consolidation of Income for the year ending 31.03.2009

S.No.	Name of the Scheme	Grant in Aid	Misc. Receipts	Expenditure Capitalised
1.	Health a/c	25,07,00,000.00	7,19,246.00	1,55,571.00
2.	Health a/c	28,00,00,000.00	34,09,342.00	3,75,67,063.00
3.	Health a/c		6,280.00	42,60,214.00
4.	Health a/c			20,13,210
5.	Health a/c			
6.	Health a/c			
7.	Digitisation a/c	11,00,000.00	98,125.00	3,38,000.00
8.	WHO a/c	3,00,000.00	16,572.00	
9.	International events a/c			
10.	DST a/c	2,70,00,000.00	3,70,992.00	
11.	ROTP a/c		71.00	
12.	Herb garden a/c		28,499.00	
13.	Publication of text books a/c		83,313.00	
14.	UPS a/c		12,539.00	
15.	Seminar a/c		110.00	
16.	DSOP a/c		5,968.00	
17.	EMR a/c		1,51,949.00	
18.	ICSJ a/c		5,445.00	
19.	Donation a/c		6,053.00	
20.	Publications (Priced) 8,45,167.00 (-) 2,40,851.00			6,04,316.00 4,49,38,185.00
	Total	55,94,00,000.00	49,14,504.00	

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Sd.
(Athar Ali)
Assistant Director (Admn.)

Sd.
(Dr. Mohammed Khalid Siddiqui)
Director

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE
Consolidated Schedule of Fixed Assets as on 31.03.2009

S. No.	Name of the assets	Opening Balance as 01.04.2008	Addition	Deductions	Total	Depreciation	Net as 31.03.2009
1.	Machinery & Equipments	1,93,79,826.00	2,44,66,140.00	(-) 8,36,236.69	4,30,04,729.31	1,22,98,364.12	3,07,06,365.19
2.	Furniture & Fixture	2,11,00,288.00	53,03,733.00	(-) 22,88,360.00	2,61,15,661.00	31,00,377.84	2,30,15,283.16
3.	Vehicles	19,11,209.00	11,07,619.00	(-) 1,11,291.00	29,07,537.00	7,26,884.00	21,80,653.00
4.	Computers	14,67,361.00	43,22,884.00	-	57,90,245.00	42,11,602.00	15,78,643.00
5.	Land	27,85,336.00	-	-	27,85,336.00	-	27,85,336.00
6.	Herb garden Construction work	4,79,102.00	-	-	4,79,102.00	47,910.00	4,31,192.00
7.	Books & Journals	1,58,40,940.17	40,34,493.00	-	1,98,75,433.17	-	1,98,75,433.17
8.	Building	8,59,27,896.00	50,99,000.00	-	9,10,26,896.00	91,02,690.00	8,19,24,206.00
9.	Council's Publications (Priced)	1,00,30,177.82	8,45,167.00	(-) 2,40,851.00	1,06,34,493.82		1,06,34,493.82
	Total	15,89,17,135.99	4,51,79,036.00	(-) 14,76,738.69	20,26,19,433.30	2,94,87,827.96	17,31,31,605.34

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CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE
Consolidated Schedule of Capital Fund a/c of Consolidated Balance Sheet as on 31.03.2009 (S/1)

		Current year	Previous year
(i)	Health A/c	17,16,88,991.63	15,74,58,395.28
(i)	Herb Garden a/c	4,37,694.00	4,86,752.00
(ii)	Patent a/c	10,493.00	10,493.00
(iii)	UPS a/c	5,93,359.00	7,82,600.00
(iv)	Digitisation of Manuscripts a/c	2,53,500.00	
(v)	DSOP a/c	76,519.00	94,821.00
(vi)	NMPB a/c	28,243.00	30,963.00
(vii)	Family Welfare a/c	42,805.71	53,111.71
	Total	17,31,31,605.34	15,89,17,135.99
	ii) Add Excess of Income over Expenditure b/f (S/4)	11,43,96,525.68	6,81,88,847.18
	iii) Less Excess of Expr. over Income b/f (S/4)	(-) 16,718.16	(-) 16,789.16
	Total	28,75,11,412.86	22,70,89,194.01

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(Athar Ali)
 Assistant Director (Admn.)

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(Dr. Mohammed Khalid Siddiqui)
 Director



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE
Consolidated Schedule of Excess of Income Over Expenditure a/c of Consolidated Balance Sheet
as on 31.03.2009 (S/4)

	Liabilities	Current year	Previous year
(i)	Health A/c	7,56,03,280.28	5,78,77,156.40
(ii)	Herb Garden	11,07,120.00	10,78,621.00
(iii)	UPS (I)	3,78,146.35	3,65,607.35
(iv)	Seminar	3,154.00	3,044.00
(v)	EMR a/c	1,51,659.00	37,876.00
(vi)	Digitisation of Manuscripts a/c	43,56,430.00	34,96,305.00
(vii)	Donation a/c	5,993.00	-
(viii)	DSOP a/c	1,93,923.05	1,94,424.05
(ix)	WHO a/c	2,65,148.00	2,51,206.00
(x)	International conference & silver Jubilee celebration of the Council	1,59,666.00	1,54,221.00
(xi)	NMPB a/c	-	1,29,525.38
(xii)	DST	2,71,87,832.00	-
(xiii)	International events – Conference	3,00,000.00	-
(xiv)	Unani Pharmacopoeia	861.00	861.00
(xv)	Publication of text books a/c	46,83,313.00	46,00,000.00
	Total c/f to capital fund a/c (S/1)	11,43,96,525.68	6,81,88,847.18

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Assistant Director (Admn.)

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Director



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE
Consolidated Schedule of Excess of Expenditure Over Income a/c of Consolidated Balance Sheet
as on 31.03.2009 (S/4)

		Current year	Previous year
	Excess of Expenditure over Income		
(i)	ROTP	1,676.10	1,747.10
(ii)	F.W.	15,042.06	15,042.06
	Total c/f to capital fund a/c (S/1)	16,718.16	16,789.16

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Sd.
(Dr. Mohammed Khalid Siddiqui)
 Director



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Consolidated Schedule of Current Assets a/c of Consolidated Balance Sheet as on 31.03.2009 (S/5A)

		Current year	Previous year
(i)	Health	5,55,017.48	2,37,505.60
(ii)	Pension fund	48,27,141.48	34,02,037.12
(iii)	GIS	9,19,488.65	7,41,510.65
(iv)	GPF	85,24,501.61	15,21,411.59
(v)	ROTP	2,071.90	2,000.90
(vi)	Herb Garden	9,07,120.00	8,78,621.00
(vii)	UPS I	3,68,646.35	3,56,107.35
(viii)	Seminar	3,154.00	3,044.00
(ix)	EMR a/c	1,51,659.00	37,876.00
(x)	Digitisation of Manuscripts a/c	43,74,430.00	34,96,305.00
(xi)	Donation a/c	37,649.75	31,656.75
(xii)	DSOP a/c	1,88,923.05	1,89,424.05
(xiii)	WHO a/c	4,07,576.00	3,93,634.00
(xiv)	International conference & silver Jubilee celebration of the Council	1,59,666.00	1,54,221.00
(xv)	NMPB a/c	-	1,29,525.38
(xvi)	DST	2,71,87,832.00	-
(xvii)	International events – Conference	3,00,000.00	
(xviii)	UPS II	861.00	861.00
(xix)	Publication of text books a/c	46,83,313.00	46,00,000.00
(xx)	NPS	54,21,523.00	2,611.00
	Total (c/f to S/5B)	5,90,20,574.27	1,61,78,352.39

Sd.
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Director



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Consolidated Schedule of Current Assets a/c of Consolidated Balance Sheet as on 31.03.2009 (S/5B)

		Current year	Previous year
(i)	Health A/c	7,85,18,461.65	5,84,36,472.65
(ii)	Pension Fund a/c	66,254.00	71,047.00
(iii)	GIS a/c	12,730.00	180.00
(iv)	CPF/GPF a/c	74,71,320.98	48,01,116.98
(v)	ROTP a/c	2.00	2.00
(vi)	Herb Garden a/c	2,00,000.00	2,00,000.00
(vii)	UPS a/c	20,000.00	20,000.00
(viii)	DSOP a/c	5,000.00	5,000.00
(ix)	WHO a/c	1,00,793.00	1,00,793.00
(x)	New Pension scheme a/c	44,734.00	29,407.00
(xi)	F.W. a/c	2,047.94	2,047.94
	Total	8,64,41,343.57	6,36,66,066.57
	Total b/f (S/5A)	(+) 5,90,20,574.27	(+) 1,61,78,352.39
	Total (S/5A &B)	14,54,61,917.84	7,98,44,418.96

Sd.
(D.S. Negi)
Office Superintendent
(Accounts)

Sd.
(S. Asif Mian)
Accountant (I/A)

Sd.
(Surinder Nath)
Accounts Officer

Sd.
(Athar Ali)
Assistant Director (Admn.)

Sd.
(Dr. Mohammed Khalid Siddiqui)
Director

**CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE****Consolidated Schedule of Current Liabilities a/c of Consolidated Balance Sheet as on 31.03.2009 (S/2)**

		Current year	Previous year
(i)	Health A/c	34,70,198.85	7,96,821.85
(ii)	Pension Fund a/c	1,29,43,420.87	1,11,04,573.58
(iii)	GIS a/c	1,13,66,061.35	1,11,75,537.12
(iv)	CPF/GPF a/c	15,55,56,279.85	14,44,76,943.86
(v)	ROTP a/c	3,750.00	3,750.00
(vi)	UPS a/c	10,500.00	10,500.00
(vii)	Digitisation	18,000.00	
(viii)	Donation a/c	31,656.75	31,656.75
(ix)	WHO a/c	2,43,221.00	2,43,221.00
(x)	New Pension Scheme a/c	1,48,36,515.22	68,43,622.61
(xi)	F.W. a/c	17,090.00	17,090.00
	Total	19,84,96,693.89	17,47,03,716.77

Sd.
(D.S. Negi)
Office Superintendent
(Accounts)

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Accountant (I/A)

Sd.
(Surinder Nath)
Accounts Officer

Sd.
(Athar Ali)
Assistant Director (Admn.)

Sd.
(Dr. Mohammed Khalid Siddiqui)
Director



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE
Consolidated Schedule of Investment a/c of Consolidated Balance Sheet as on 31.03.2009 (S/5c)

		Current year	Previous year
(i)	Pension Fund a/c	80,50,025.39	76,31,489.46
(ii)	GIS a/c	1,04,33,842.70	1,04,33,846.47
(iii)	CPF/GPF a/c	13,95,60,457.26	13,81,54,415.29
(iv)	New Pension scheme	93,70,258.22	68,11,604.61
	Total	16,74,14,583.57	16,30,31,355.83

Sd.
(D.S. Negi)
 Office Superintendent
 (Accounts)

Sd.
(S. Asif Mian)
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Sd.
(Surinder Nath)
 Accounts Officer

Sd.
(Athar Ali)
 Assistant Director (Admn.)

Sd.
(Dr. Mohammed Khalid Siddiqui)
 Director



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Notes on Accounts:

1. Annual accounts of the Council for the year 2008-09 have been prepared on the new format as prescribed by CGA and approved by the CAG of India since 2002-03.
2. The Central Council for Research in Unani Medicine is fully financed through grant-in-aid therefore income tax is not applicable on the organisation.
3. The said accounts have been prepared on accrual basis.
4. Schedules have been attached where necessary.
5. Depreciation has been charged on assets by diminishing balance method.
6. The construction work is being done by the CPWD.
7. There is no valuation of Inventories since it is not a profit-earning organisation but a Research Organisation under Ministry of Health & Family Welfare, Department of AYUSH.
8. A schedule of Investment is prepared every year and given to audit which is duly reconciled with actual documents figure mentioning there the rate of interest, duration, amount and name of Institutions etc.
9. Retirement benefits are treated as per GOI Rules.
10. The annual accounts of the Council for the year 2008-09 were approved by the competent authority i.e. Standing Finance Committee on 29.09.2009.

Sd/-
Accounts Officer
CCRUM, New Delhi



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Department of Ayurveda, Yoga & Naturopathy, Unani,
Siddha and Homoeopathy (AYUSH)

Ministry of Health & Family Welfare, Government of India

61 - 65 Institutional Area, Janakpuri, New Delhi - 110 058, India

Tel.: +91-11-28521981, 28525982, 28525983, 28525831/52/62/83/97, 28520501, 28522524 • Fax: +91-11-28522965

Web site: www.unanimedicine.com • E-mail: unanimedicine@gmail.com & ccrum@rediffmail.com