

Annual Report

2013-2014



CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

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

Ministry of Health & Family Welfare, Government of India

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1. OVERVIEW

1.1. OBJECTIVES OF THE COUNCIL

The Central Council for Research in Unani Medicine (CCRUM) is an autonomous organisation under Department of Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH), Ministry of Health & Family Welfare, Government of India. The Council was established on 30 March 1978 under Societies Registration Act, 1860. However, it started functioning from 10 January 1979. 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 connection with the causation, mode of spread and prevention of diseases
- To initiate, aid, develop and coordinate scientific research on 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 the objectives of the Council
- To exchange information with other institutions, associations and societies interested in the objectives similar to those of the Council, especially in the observation and study of diseases in the East in general, and in India in particular
- To prepare, print, publish and exhibit any papers, posters, pamphlets, periodicals and books for furtherance of the objectives of the Council and to contribute to such literature

1.2. PROGRAMME-WISE ACHIEVEMENTS

The Council during the reporting period continued research activities in the areas of Survey and Cultivation of Medicinal Plants, Drug Standardisation Research, Clinical Research, and Literary Research. Besides, Information, Education and Communication (IEC) activities and extension health-care services also continued. These activities were undertaken through a network of 23 centres functioning under the Council in different parts of the country.

Under the Survey and Cultivation of Medicinal Plants Programme, ethnopharmacological surveys in different forest divisions/areas were conducted. The areas included South Wayanad Forest Division (Kerala); Angul, Bhadrak and Dhenkanal Forest Divisions (Odisha); Nizamabad and Atmakur Forest Divisions (Andhra Pradesh); and Sindh Valley, Gurez and Batote Forest Divisions (Jammu & Kashmir). As a result of the surveys, 3,107 botanical specimens comprising 1,079 species of plants were collected and identified. Besides, 392 folk medicinal claims were also recorded from the tribal and rural inhabitants. Experimental and large-scale cultivation of over 12 important medicinal species also continued at different herb gardens of the Council.

About 150 common species of medicinal plants used in Unani Medicine were maintained in the nurseries of the Council's centres. Of the specimen collected during the surveys, 2,308 herbarium sheets were prepared, and 243 kg of raw drugs were collected. The Council also published a monograph "Medicinal Plants in Folklores of Odisha – Part III".

Under the Drug Standardisation Research Programme, work relating to the development of Standard Operating Procedures (SOPs) for manufacture of compound formulations and their Pharmacopoeial standards continued. During the reporting period, work on 53 compound formulations was completed. Besides, 95 single drugs and 54 compound formulations prepared at the Council's pharmacy were tested for their quality control and their data were documented. The Council also initiated shelf-life studies and redesigning of dosage forms of Unani formulations. Compilation of Unani Pharmacopoeia of India, Part-II, Volume-IV comprising 50 monographs was completed. Hindi version of National Formulary of Unani Medicine, Part-III was also completed.

Under the Clinical Research Programme, preclinical safety evaluation studies, clinical studies, validation of efficacy of classical/Pharmacopoeial formulations/ regimenal therapies continued. Besides, research on fundamental aspects also continued. Preclinical studies establishing the safety of seven investigational drugs were completed. In clinical research, studies on 14 diseases continued during the reporting period. Four randomized controlled trials (RCTs) - one each in Ziabetus Sukkari (Diabetes mellitus), Zaghtuddam Qawi Lazmi (Essential hypertension), Iltehab-e-Kabid (Infective hepatitis) and Bars (Vitiligo) continued. Validation of 33 Pharmacopoeial formulations in 15 disease conditions continued during the reporting period. Besides, studies on validation of four classical / pharmacopoeial fast-acting drugs in three diseases also continued.

With a view to scientifically validate the concept of humours and temperaments, research on fundamental aspects of Unani Medicine also continued. During the reporting period, temperament assessment of 4,396 patients was carried out and susceptibility of acquiring diseases in relation to the temperaments of the patients was studied. Besides, two projects – Scientific relevance of the theory of Akhlat (Humours) in relation to Zaghtuddam Qawi (Essential Hypertension) and Scientific relevance of the theory of Akhlat (Humours) in relation to Ziabetus Sukkari (Diabetes mellitus) – were completed on 131 and 122 patients respectively at CRIUM, Hyderabad and six new projects on co-relation theory of Akhlat (Humours) with genetical and pharmacogenomic aspects were initiated.

Regimenal therapy experimentation in Amraz-e Mafasil (musculoskeletal disorders) also continued. Efficacy of Hijamat (Cupping) was validated in 76 patients of Waja-ul-Mafasil (Rheumatoid arthritis) and Tahajjur-e-Mafasil (Osteo arthritis). Taleeq (leeching) was applied in 12 patients of alopecia, nine patients of frost bite and seven patients of vitiligo at RRIUM, Srinagar. Significant effects of these therapies were observed.

Preclinical collaborative study continued with Faculty of Medicine, Jamia Hamdard, New Delhi and collaborative clinical studies on Daus Sadaf (Psoriasis) at Department of Dermatology, AIIMS, New Delhi and studies on Iltehab-e Kabid (Infective hepatitis), Qarah-e-Meda wa Asna-e-Ashari (Duodenal ulcer) and Gastroesophageal reflux disease (GERD) at Owaisi Hospital, Deccan Medical College, Hyderabad continued during the reporting period.

Under the Extra-Mural Research (EMR) scheme of the Department of AYUSH, 26 research projects continued whereas six projects were completed and three new projects were allotted.

Research-oriented health-care facilities continued at the general out-patient departments (GOPDs) of 19 clinical centres of the Council. At these GOPDs, the patients were treated with the Unani classical/pharmacopoeial formulations. Special OPDs for reproductive and child health (RCH) and geriatric care also continued. During the reporting period, a total of 2,81,747 new patients were treated in the GOPDs at different centres. Referral of research patients to other hospitals for specific diseases was also done. Under the Mobile Clinical Research Programme, the Council covered a total population of over five lakh in 31 rural areas, urban slums and pockets predominantly inhabited by the Scheduled Castes/Scheduled Tribes. During the reporting period, a total of 39,054 patients were treated in the mobile OPDs in 683 mobile visits made to these pockets. Apart from providing health-care, health awareness was also propagated among the masses through group meetings and school health lectures.

Under the Special Component Plan for the Scheduled Castes and Tribal Sub-Plan, the Council continued research oriented medicare activities at the GOPDs of its Institutes/Units and also in the adopted pockets predominantly inhabited by the Scheduled Castes and Scheduled Tribes. During the reporting period, 47,533 patients belonging to the Scheduled Castes/Tribes were treated in different GOPDs of the Council.

Under the Gender Component Plan for Women, 2,15,470 patients were treated in the GOPDs at different centres of the Council. With a view to creating health awareness among the females and also to make them aware of the potentialities of Unani medicinal plants, lectures were delivered by the physicians in the pockets adopted under the Mobile Clinical Research Programme.

Under the activities in North Eastern Region, 13,030 patients were treated for their common and chronic ailments at the two clinical centres of the Council. Under the School Health Programme, 5,355 children in 31 schools under the coverage of Mobile Clinical Research Programme were checked up for their health status, diseases, deficiencies and deformities by the physicians of the Council. Children suffering from some specific diseases were also referred to allopathic hospitals, besides being provided Unani treatment. The two Unani Medical Centres functioning in allopathic hospitals in Delhi established under the scheme of co-location of AYUSH centres in allopathic hospitals continued providing treatment for common and chronic ailments through Unani medicines. During the reporting period, a total of 39,923 patients were treated. These patients were mostly of chronic ailments.

Under the Literary Research Programme, Urdu translation of Persian book *Muheet-i Azam, Volume III* was published. Besides, Urdu translation of Persian books *Muheet-i Azam Volume IV* and *Iksir-i Azam, Volume II* and vetting of Urdu translation of Arabic books *Tazkirat Uli al-Albab, Volume II* and *Minhaj al-Dukkan* continued. Hindi translation of 'Unani Pharmacopoeia of India' Part I, Volume I also continued during the reporting period. Under the programme of reprinting rare books, *Kitab al- Mi'a fi't Tib* volume I was reprinted. The book comprises first twenty chapters of Abu Sahl Masihi's (d.1010 A.D.) *al- Mi'a fi-l-Sanâ'a al-Tibbi'yyah*, an encyclopedic treatise on medicine comprising total one hundred chapters.

With a view to disseminating the research findings, 59 research papers based on the studies conducted under different research programmes were either published in scientific journals or presented at the national and international conferences/seminars. During the reporting period, 18 publications were brought out. Publication of the Council's bi-monthly bulletin CCRUM Newsletter, quarterly Urdu journal Jahan-e-Tib, quarterly English journal Hippocratic Journal of Unani Medicine, and publicity material also continued. The Council organized three workshops, one each on intellectual property rights (IPR), drug discovery and development, and ethics for animal experimentation, and one seminar on managing information resources in digital environment, and three brain storming sessions.

Besides, the researchers of the Council also participated in six National/ international seminars in different disciplines for their exposure to the latest updates in their respective fields. Under the capacity building programme, the Council's researchers also attended 24 training programmes organized by other scientific organizations. The Council participated in eight Arogya fairs and health exhibitions organized by the Department of AYUSH in different parts of the country. On these occasions, the Council's physicians provided consultancy services to the visitors seeking Unani treatment. Apart from this, 19 health camps were also organized by the Council. The Council continued promotion of the official language. During the reporting period, use of Hindi in the official work improved significantly. Hindi fortnight was organized at the Council's headquarters and its different centres.

The Council continued infrastructural development activities to strengthen its Institutes. Collaboration with the other scientific institutions including the institutes of Indian Council of Medical Research (ICMR) – Institute of Cytology and Preventive Oncology (ICPO), Noida, National Institute for Research in Tuberculosis (NIRT), Chennai, National AIDS Research Institute, Pune – was materialized for collaborative studies. During the 12th plan period, the Council proposes to conduct research in new areas particularly those of chronic and degenerative nature as well as diseases in which Unani system of medicine can play a pivotal role as safe adjuvant therapy to allopathic treatments to reduce the side effects of treatment and improve the quality of life for terminal patients. Besides, safety evaluation, standardisation and quality control of classical drugs would continue.

New Delhi
05 December 2014

A blue ink signature of Prof. S. Shakir Jamil, written in a cursive style.

Prof. S. Shakir Jamil
Director General

2. MANAGEMENT

The management of the affairs of the Council is entrusted to a Governing Body (GB) consisting of official and non-official members.

2.1. GOVERNING BODY

The Governing Body of the Council was reconstituted on 6 September 2012. The following was the constitution of the GB.

President

Minister of Health & Family Welfare, Government of India

Executive Vice-President

Minister of State for Health & Family Welfare, Government of India

Vice-President

Secretary, Department of AYUSH, Ministry of Health & Family Welfare, Government of India

Vice-President (Technical)

Hakim Syed Khaleefathullah, Chennai

Official Members

- Financial Advisor, Ministry of Health & Family Welfare, Government of India or his/her nominee not below the rank of Deputy Secretary
- Joint Secretary, Department of AYUSH, Ministry of Health & Family Welfare, Government of India

Non-Official Members

- Prof. M.A. Jafri, New Delhi
- Dean, Faculty of Unani Medicine, Aligarh Muslim University, Aligarh
- Hakim Mairajuddin Ahmad, Meerut
- Hakim Mohammad Umar, Surat
- Prof. M. Ali, New Delhi
- Dr. G.J. Samanthanam, New Delhi
- Prof. Y.K. Gupta, New Delhi
- Dr. Mohsin Wali, New Delhi

Member-Secretary

- Director General, Central Council for Research in Unani Medicine (CCRUM)

During the reporting period, the GB met on 13 January, 2014. Following key decisions were taken in the meeting:

1. The GB approved the Minutes of its 20th meeting held on 10 January 2012 with modification that the essential qualification for the post of Research Officer (Unani) should be a post-graduate degree in Unani Medicine with upper age limit of 40 years. The GB also decided that the requirement of experience should be dropped as the post was in an entry grade.
2. The GB decided to allow the Council to award 30 fellowships but only for Ph.D and not for M.D. The procedure for awarding this Ph.D fellowship should be as per ICMR/ CSIR guidelines. It was also pointed out that the research topic (for the award of the doctorate) would be related to Unani system of medicine and allied fields.
3. After detailed discussions, the GB approved the following amendment to its composition.
 - a) Executive Vice-President : Minister of State for Health & Family Welfare dealing with Department of AYUSH
 - b) Vice-President : Secretary (AYUSH)
 - c) Vice-President (Technical) : One eminent Unani physician/scholar
4. The GB considered and approved the Annual Reports of the Council for the years 2010-11, 2011-12 and 2012-13. On a query from the President, the GB was informed that the Annual Report for the year 2012-13 had been submitted to the Parliament Secretariat but could not be placed before the Lok Sabha due to abrupt adjournment/prorogation of the House sine die on 18 December 2013.
5. The GB noted the achievements of the Council for the year 2012-13 and updated achievements for the year 2013-14. The GB also approved the proposed action plan for 2014-15.
6. The GB considered and approved the amendment of Rule 19(4) and Rule 46(2) of Memorandum of Association and Rules, Regulations and Bylaws of the Council with regard to membership of Financial Advisor of Ministry of Health & Family Welfare in the Governing Body and Standing Finance Committee of the Council.
7. The GB considered the proposal for creation of one post of Director (Technical) in the Council in Pay Band of ₹ 37,400-67,000 plus Grade Pay of ₹ 8,700/-. The GB also decided to designate the created post as Joint Director General and the existing post of Joint Director (Hqrs.) in PB-3 i.e. ₹ 15,600-39,100 with Grade Pay of ₹ 7,600/- as Deputy Director General to maintain uniformity in designation.

The following decisions were also taken by the Union Minister of Health & Family Welfare in his capacity as President of the Council's GB during inter Governing Body period.

- The GB approved the proposal for shifting Clinical Research Unit (CRU), Meerut to Meerut Cantonment Board (MCB) General Hospital premises but desired that keeping in view of the public sentiment and interest, an OPD counter may be continued at Bhumiya Ka Pul area in the city to cater public health needs.

- The GB approved revision of delegation of powers to Director General, CCRUM for selected items vide O.M. No. R.14011/7/2008-NI dated 28 January 2010.
- The GB approved the amendment of Recruitment Rules for the post of Director General, CCRUM vide letter No. R-13016/51/2010-HD dated 10 January 2012 of the Department of AYUSH.
- The GB approved the amendment of Recruitment Rules for the post of Assistant Research Officer (Pharmacology) and Research Officer (Pharmacology).
- The GB approved the adoption of Pay Scales prescribed in Part-B of the Sixth Central Pay Commission as approved by the Central Government for selected posts.
- The GB approved up-gradation of Pay Scale and the amendment of Recruitment Rules for the post of Administrative Officer (Institutes).

2.2. STANDING FINANCE COMMITTEE

The composition of the Council's Standing Finance Committee (SFC) was as follows:

- Joint Secretary, Department of AYUSH : Chairman
Ministry of Health & Family Welfare
Government of India
- Financial Advisor : Member
Ministry of Health & Family Welfare
Government of India or his/her nominee
not below the rank of Section Officer
- Prof. Rais-ur-Rahman : Technical Member
Advisor (Unani)
Department of AYUSH
Ministry of Health & Family Welfare
Government of India
- Director General, CCRUM : Member-Secretary

During the reporting period, the SFC met thrice, firstly on 18 July 2013, secondly on 20 September 2013 and thirdly on 14 March 2014. Important recommendations made by the SFC at these meetings are as follows:

SFC meeting held on 18 July 2013

- The SFC approved the annual accounts of the Council for the year 2012-13.
- It also approved annual estimate of ₹ 41,38,245/- for civil maintenance and that of ₹ 44,92,967/- for electrical maintenance of the CCCBC building through CPWD during the year 2013-14.
- The SFC approved extension of the Satellite Centre of Clinical Research Unit (CRU), Kerala at Kumbalangi for the period upto July 2014. It also approved the progress report of Pilot Project at Manipur and its continuation for the third year.

- The SFC approved providing one big room and one cabin on the 4th floor of the CCCBC building vacated by the CCRS to the CCRUM for storing the its publication.

SFC meeting held on 20 September 2013

- The SFC considered the proposal for construction of second floor of the existing building, Pharmacy Block and allied construction works of Regional Research Institute of Unani Medicine (RRIUM), Chennai and recommended construction of second floor and Pharmacy Block only at an estimated cost of ₹ 9,88,34,669/- by CPWD (excluding taxes, cess and contingencies, etc.) out of total projects of ₹ 23,26,31,300/-.
- The SFC considered the proposal for release of second installment of grant-in-aid amounting to ₹ 10,04,400/- as *fait accompli* for collaborative project on “Development of Nano Drug Delivery System for Unani Medicines (UNIM-105 and UNIM-115) and their Biological Activities Evaluation” on the basis of performance report and presentation given by Dr. Asif, Principal Investigator of the project and recommended for release of the second installment of grant-in-aid. The SFC was of the view that CCRUM should develop such capability in house.
- The SFC considered the proposal for renovation of ground floor and first floor of the CCCBC building through CPWD at an estimated cost of ₹ 65,37,589/- inclusive of 5% contingencies and recommended the proposal.
- The SFC approved the proposal for maintenance of the building of RRIUM, Bhadrak through CPWD on Annual Maintenance Contract (AMC) basis.
- The SFC approved an expenditure amounting to ₹ 10,06,687/- (including 5% contingencies) towards renovation and up-gradation of Ultrasonography Laboratory at RRIUM, Srinagar through CPWD.
- The SFC approved providing fire safety measures and execution of allied works at CRIUM, Hyderabad through CPWD at an estimated cost of ₹ 1,12,20,188/-.

SFC meeting held on 14 March 2014

- The SFC recommended replacement of hospital lifts and execution of other works at CRIUM, Hyderabad through CPWD at an estimated cost of ₹ 1,10,74,082/-.
- The SFC recommended repair/replacement of Electrical installations at CRIUM, Hyderabad through CPWD at an estimated cost of ₹ 25,23,118/-
- The SFC recommended purchase of instruments/equipment for various institutes of the Council duly approved by the Scientific Advisory Committee (SAC) in its 46th Meeting held on 6 February 2014.
- The SFC also recommended earth-filling and construction of boundary wall on the plot of land allotted by the Government of Assam at Silchar (Assam) bearing Dag No. 1514 (Kha) and 1478 under Mouza Ambikapur Pt. IV, Pargana Barakpur, District Cachar at an estimated cost of ₹ 3,94,58,600/- including contingencies through CPWD, Silchar. It also advised that other codal formalities may also be adhered to.

- The SFC considered the revised preliminary estimate submitted by CPWD, Chennai and recommended construction of an additional floor (second floor) over the existing office building and Pharmacy Block of RRIUM, Chennai at a revised estimated cost of ₹ 11,73,13,000/- (i.e. ₹ 7,29,39,000/- towards construction of additional floor on the existing office building and ₹ 4,43,74,000/- for construction of Pharmacy Block) including taxes, VAT, Cess and contingencies instead of ₹ 9,88,34,669/- plus taxes.
- The SFC considered the proposal for revising the cost for purchase of HPTLC for RRIUM, Chennai from ₹ 1,00,00,000/- to ₹ 1,16,71,460/-.

2.3. INSTITUTIONAL ETHICS COMMITTEES

It is mandatory that all proposals on biomedical research involving human participants be approved by an appropriately constituted Institutional Ethics Committee (IEC) to protect the welfare and rights of the participants. At present there are 17 Institutional Ethics Committees functioning at various Institutes/Units of the CCRUM.

Central Research Institute of Unani Medicine (CRIUM), Hyderabad

- | | |
|---|----------|
| <ul style="list-style-type: none"> • Dr. Kaiser Jamil
Emeritus Research Scientist and Head
Genetics Department
Bhagwan Mahavir Medical Research Centre
Hyderabad | Chairman |
| <ul style="list-style-type: none"> • Dr. M.U.R. Naidu
Formerly Head
Department of Clinical Pharmacology and Therapeutics &
Dean, Faculty of Medicine
Nizam's Institute of Medical Sciences
Hyderabad | Member |
| <ul style="list-style-type: none"> • Prof. Ghulam Yazdani Khan
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Government Nizamia Tibbi College
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| <ul style="list-style-type: none"> • Dr. K. Nagaiah
Senior Principal Scientist
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Indian Institute of Chemical Technology
Hyderabad | Member |
| <ul style="list-style-type: none"> • Dr. M.D. Alam
Formerly Deputy Director
Central Research Institute of Unani Medicine
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- Prof. Vasia Naveed
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- Mr. Syed Taher
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Member
- Maulana Shamsheer Ali
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- Mrs. Rafath Shaheen
Head Mistress
Government High School
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- Incharge
CRIUM
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Central Research Institute of Unani Medicine (CRIUM), Lucknow

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Faculty of Pharmacy
Integral University
Lucknow
Chairman
- Dr. R.C. Murthy
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Indian Institute of Toxicology Research
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- Mufti Ateeq Ahmad Bastawee
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Member
- Incharge
CRIUM
Lucknow
Member-Secretary

Regional Research Institute of Unani Medicine (RRIUM), Chennai

- Hakim Syed Khaleefatullah
Vice-President (Technical)
Governing Body, CCRUM
New Delhi
Chairman
- Dr. R. Ilavarasan
Assistant Director (Pharmacology)
CSM Drug Research Institute of Ayurveda
Chennai
Member
- Dr. Raziuddeen
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- Prof. B.S. Usmani
Formerly Principal
Dr. M. Ishaq Jamkhanawala Tibbia Unani Medical College &
Haji A.R. Kalsekar Tibbia Hospital
Mumbai
Member
- Prof. Isa Nadvi
Formerly Head, Department of Preventive and Social Medicine
Dr. M. Ishaq Jamkhanawala Tibbia Unani Medical College &
Haji A.R. Kalsekar Tibbia Hospital
Mumbai
Member
- Prof. Mankeshwar
Department of Preventive and Social Medicine
Grant Medical College & Sir J.J. Group of Hospitals
Mumbai
Member
- Dr. Abdul Hannan
Assistant Professor, Department of Pharmacology
Grant Medical College & Sir J.J. Group of Hospitals
Mumbai
Member

- Mr. Javed Bashir Ahmed Ansari
Bombay High Court
Mumbai Member
- Ms. Gazala Munawwar Azad
Mumbai Member
- Mr. Zubair Hasan Khan
Mumbai Member
- Incharge
RRIUM
Mumbai Member-Secretary

Regional Research Institute of Unani Medicine (RRIUM), Srinagar

- Dr. Abdul Kabir Dar
Director, Indian System of Medicine & Homoeopathy
Jammu & Kashmir
Srinagar Chairman
- Prof. Ghulam Qadir Mir
Department of Law
University of Kashmir
Srinagar Member
- Dr. Shariq Masoodi
Associate Professor
Department of Endocrinology
Sher-i-Kashmir Institute of Medical Sciences
Srinagar Member
- Dr. Mohammad Iqbal
Formerly Deputy Director
RRIUM
Srinagar Member
- Maulana Mir Ghulam Mohiuddin Naqib
Chairman, Minhajul Islam
Srinagar Member
- Mr. Ghulam Rasool Butt
Srinagar Member
- Incharge
RRIUM
Srinagar Member-Secretary

Regional Research Institute of Unani Medicine (RRIUM), Aligarh

- Prof. K.M.Y. Amin
Department of Ilmul Advia
Ajmal Khan Tibbiya College
Aligarh Muslim University
Aligarh
Chairman
- Prof. M.M.W. Amin
Chairman, Department of Ilmul Amraz
Ajmal Khan Tibbiya College
Aligarh Muslim University
Aligarh
Member
- Prof. A. Mannan
Department of Moalajat
Ajmal Khan Tibbiya College
Aligarh Muslim University
Aligarh
Member
- Mr. Zakiuddin Khairuwala
Advocate
Civil Court
Aligarh
Member
- Dr. M. Laiq Ali Khan
President
Hakim Ajmal Khan Foundation
Kasganj, Aligarh
Member
- Mufti Suhaib Ahmad Khan
Madrasa Tameer-e-Millat
Aligarh
Member
- Mr. Abdul Majid Khan
Aligarh
Member
- Incharge
RRIUM
Aligarh
Member-Secretary

Regional Research Institute of Unani Medicine (RRIUM), New Delhi

- Prof. Mohammad Ahmad
Formerly Dean
Jawaharlal Nehru Medical College
Aligarh Muslim University
Aligarh
Chairman

- Dr. K.K. Sharma
Formerly Head
Department of Pharmacology
Guru Teg Bahadur Hospital
New Delhi
Member
- Dr. Shamshad Ahmad
Formerly Assistant Director (Chemistry)
CCRUM
New Delhi
Member
- Prof. Mohammad Akhtar Siddiqui
Head, Department of Moalajat
Jamia Hamdard
New Delhi
Member
- Prof. Mohammad Idrees
Head, Department of Ilmul Advia
A&U Tibbia College
New Delhi
Member
- Prof. Akhtar-ul-Wasey
Commissioner
National Commission for Linguistic Minorities
New Delhi
Member
- Dr. Arun Mukherji
Director
UDAAN
New Delhi
Member
- Mr. Mohammad Haleem Siddiqui
Advocate, Supreme Court
New Delhi
Member
- Mr. Zubair Ahmad Miftahi
Janakpuri
New Delhi
Member
- Incharge
RRIUM
New Delhi
Member-Secretary

Regional Research Institute of Unani Medicine (RRIUM), Kolkata

- Prof. Mohd Ayoob
Professor
The Calcutta Unani Medical College & Hospital
Kolkata
Chairman

- Dr. Eqbal Ahmad
Consultant Physician
R.P. Islamia Hospital
Kolkata
Member
- Dr. Danish Zafar
Reader
The Calcutta Unani Medical College & Hospital
Kolkata
Member
- Dr. Shadab Ahmed Khan
Lecturer
The Calcutta Unani Medical College & Hospital
Kolkata
Member
- Mr. Imtiaz Hussain
Registrar
State Council of Unani Medicine
Kolkata
Member
- Mr. Pranbesh Kanji Lal
Mayurbhanj Citizen Forum
Kolkata
Member
- Hakeem Abdul Jaleel
Honorary Consultant (Unani)
RRIUM
Kolkata
Member
- Ms. Nikhat Fatima
Office Superintendent
The Calcutta Unani Medical College & Hospital
Kolkata
Member
- Incharge
RRIUM
Kolkata
Member Secretary

Regional Research Institute of Unani Medicine (RRIUM), Patna

- Dr. S.K. Sinha
Formerly Professor
Patna Medical College & Hospital
Patna
Chairman
- Dr. M.P. Tripathi
Formerly Medical Officer
Patna
Member

- Dr. Tauhid Kibria
Reader
Government Tibbia College
Patna
Member
- Dr. Syed Hamid Hussain
Medical Officer
Government Tibbia College
Patna
Member
- Dr. Akbar Raza Jamshed
Formerly Additional Judge
Patna
Member
- Dr. Mohd. Aftab Alam
Patna
Member
- Mr. Misbahul Haque Emadi
Khanqaah Emadia
Patna
Member
- Mr. S. Ghulam Sarmad
Patna
Member
- Prof. Alauddin Ahmad
Formerly Vice-Chancellor
Jamia Hamdard
New Delhi
Member
- Incharge
RRIUM
Patna
Member-Secretary

Regional Research Institute of Unani Medicine (RRIUM), Bhadrak

- Dr. Trupti Rekha Swain
Associate Professor
Department of Pharmacology
SCB Medical College
Cuttack
Chairman
- Dr. Sanjay Kumar
Associate Professor
Department of Pharmacology
IMS & SUM Hospital
Bhubaneswar
Member
- Dr. Mohammad Kamal Khan
Medical Officer (Unani)
Government Unani Dispensary
Bhadrak
Member

- Dr. Sayed Mozammil Ali
Medical Officer (Unani)
Balasore
Member
- Dr. Lalatendu Dikshit
Advocate
Bhadrak
Member
- Mr. Shaikh Abdus Salam
Bhadrak
Member
- Mr. Mohammad Abdul Bari
President, Muslim Jamat
Bhadrak
Member
- Mr. Fazle Rasool
Imam, Badi Masjid, Bada Shankarpur
Bhadrak
Member
- Mr. Rajendra Kumar Panda
Principal In-charge
K.K.R. Mahila Mahavidyalaya
Bhadrak
Member
- Incharge
RRIUM
Bhadrak
Member-Secretary

Clinical Research Unit, Bhopal

- Prof. Zaki Anwar Ansari
Principal
H.S.Z.H Govt. Unani Medical College
Bhopal
Chairman
- Dr. Neelesh Arya
Assistant Professor
Department of Pharmacology
Gandhi Medical College
Bhopal
Member
- Dr. N. Ganesh
Head
Department of Research
Jawaharlal Nehru Cancer Hospital & Research Centre
Bhopal
Member
- Dr. S.M. Abbas Zaidi
Lecturer
Department of Moalajat
H.S.Z.H. Govt. Unani Medical College
Bhopal
Member

- Mr. Zafar Hassan
Social Worker
Bhopal
Member
- Mr. Mohd. Umar
Lecturer of Arabic
Department of Kulliat
H.S.Z.H Govt. Unani Medical College
Bhopal
Member
- Mr. Dileep Kumar Sharma
Advocate
Bhopal
Member
- Mr. C.P. Mathew
Bhopal (M.P.)
Member
- Incharge
CRU
Bhopal
Member-Secretary

Regional Research Centre (RRC), Allahabad

- Dr. P. K. Sinha
Formerly Chief Medical Officer
Allahabad
Chairman
- Dr. Mazahir Alam
Principal & Superintendent
State Unani Medical College
Allahabad
Member
- Dr. Anwar Ali Ansari
Formerly Lecturer
Amraz-e-Chasm (Opthamology)
State Unani Medical College
Allahabad
Member
- Dr. Tariq Mahmood
Associate Professor & HOD
Pulmonary Medicine
Moti Lal Nehru Medical College
Allahabad
Member
- Dr. Barkat Ullah
Reader
State Unani Medical College
Allahabad
Member

- Dr. Shilpi Mathur
Managing Director
Santosh Clinic
Allahabad
Member
- Mr. Pradeep Bhargava
Director
Govind Ballabh Pant Social Sciences Institute
Allahabad
Member
- Mr. Zaheeruddin Ansari
Advocate
Allahabad
Member
- Mr. Mohd Anis
Allahabad
Member
- Incharge
RRC
Allahabad
Member-Secretary

Clinical Research Unit (CRU), Buhanpur

- Dr. Humayun Shareef Dawood
Incharge, Blood Bank
Government Nehru District Hospital
Burhanpur
Chairman
- Professor Khaleel Ansari
Seva Sadan Law College
Burhanpur
Member
- Dr. Saeed Siddiqui
Professor
S.H. Unani Tibbiya College
Burhanpur
Member
- Dr. B.M. Gupta
Incharge
Saeeda Hospital & Research Center
Burhanpur
Member
- Mr. Kiran Kumar Mahajan
Guest Faculty
Jija Mata Government Polytechnic College
Burhanpur
Member
- Mr. Abdul Hamid Ansari
Azad Nagar
Burhanpur
Member

- Incharge
CRU
Burhanpur
- Member-Secretary

Clinical Research Unit (CRU), Meerut

- Hkm. Sirajuddin Ahmad
Formerly Member of Governing Body of CCRUM
- Chairman
- Chaudhrey Sartaj Ahmad
Advocate
Meerut
- Member
- Dr. Riaz Ahmad
Assistant Professor
LLRM Medical College
Meerut
- Member
- Dr. Dilshad Ali
Assistant Professor (Pharmacology)
CCS University
Meerut
- Member
- Maulana Ishraq Ahmad
Meerut
- Member
- Mr. Mohd Aslam
Meerut
- Member
- Incharge
CRU
Meerut
- Member-Secretary

Clinical Research Unit (CRU), Kurnool

- Dr. Habibullah
Formerly Principal
Dr. Abdul Haq Unani Medical College
Kurnool
- Chairman
- Mr. A.S. Omair Javed
Advocate
Kurnool
- Member
- Dr. Abdul Haq
Formerly Professor
Osmania College
Kurnool
- Member
- Mr. H. Mohammad Iqbal
Contractor
Kurnool
- Member

- Dr. Abdul Rahim Quazi
Formerly CMO (Unani)
CGHS
Kurnool
Member
- Syed Zakir Ahmed Rasheedi
Imam, Masjid Khubsurat
Kurnool
Member
- Incharge
CRU, Kurnool
Member-Secretary

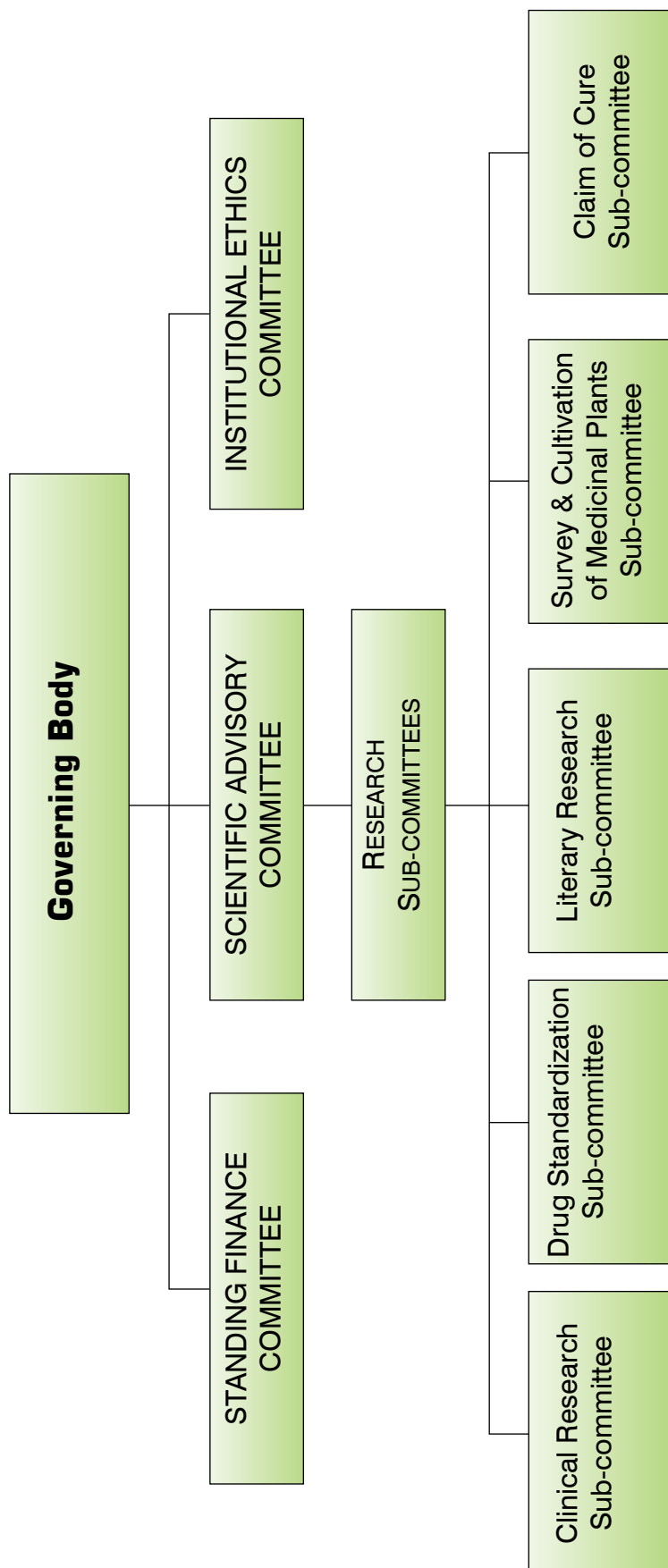
Clinical Research Unit (CRU), Silchar/Karimganj

- Dr. Afsar Alam
MD (Gynae)
Civil Hospital
Silchar
Chairman
- Dr. P. Chakrabarty
In-charge & Associate Professor
Department of Pharmacology
Silchar Medical College
Silchar
Member
- Dr. M. Ahmad
Civil Hospital
Silchar
Member
- Dr. Nazma Anjum Khan
Silchar
Member
- Mr. Ramizur Rahman
Advocate
Silchar
Member
- Mr. Owais Alam Khan
Silchar
Member
- Maulana Hanif Ahmad
Boro Masjid
Silchar
Member
- Mr. Nazrul Islam
Silchar
Member
- Incharge
CRU
Silchar
Member-Secretary

Clinical Research Unit (CRU), Kerela

- | | |
|--|------------------|
| • Dr. Mohammad Navas
Malapuram | Chairman |
| • Dr. Muhammed Jabeel
Fatima Hospital
Ernakulam | Member |
| • Dr. Abdul Wahab C
Chief Physcian
Medicina Unani Hospital
Pattambi | Member |
| • Mr. P.A. Abdul Jabbar
Senior Advocate
High Court
Kerela | Member |
| • Mr. Shakeel Mohammad
Mechanical Engineer and Social Worker
Edathala | Member |
| • Mr. Layaq Ali Khan
M.M. Medical Store
Aluva | Member |
| • Incharge
CRU
Kerala | Member-Secretary |

Management of the Council



2.4. SCIENTIFIC ADVISORY COMMITTEE

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

- | | |
|--|------------------|
| • Prof M. A. Jafri
Dean, Faculty of Medicine
Jamia Hamdard
New Delhi | Chairman |
| • Prof. Rais-ur-Rahman
Advisor (Unani)
Department of AYUSH
New Delhi | Member |
| • Hakim B. S. Usmani
Formerly Principal
Dr. M. Ishaq Jamkhanawala Tibbia Unani Medical College &
Haji A.R. Kalsekar Tibbia Hospital
Mumbai | Member |
| • Hakim Abdul Haleem
Chairman
Rex (U&A) Remedies Pvt. Ltd.
New Delhi | Member |
| • Hakim Mohammad Yousuf
Formerly Deputy Director
Regional Research Institute of Unani Medicine
Srinagar | Member |
| • Dr. O.P. Aggarwal
Emeritus Scientist
Indian Council of Medical Research
New Delhi | Member |
| • Dr. Nandini K. Kumar
Formerly Deputy Director General
Indian Council of Medical Research
New Delhi | Member |
| • Dr. Ahmad Kamal
Project Director
National Institute of Pharmaceutical Education & Research
Hyderabad | Member |
| • Prof. Amir Azam Khan
Jamia Millia Islamia
New Delhi | Member |
| • Prof. Syed Shakir Jamil
Director General
CCRUM | Member-Secretary |

During the reporting period, the SAC met on 09 May 2013, 03 September 2013 and 06 February 2014. Important recommendations made by the SAC are as follows:

SAC meeting held on 09 May 2013

- Director General, CCRUM mentioned that the SAC agreed in principle to the initial draft of Intra-mural Research (IMR) policy prepared by the Council with an expectation that research would get initiated in project-mode in CCRUM institutions. He observed that an exclusive meeting of the SAC should be called to discuss and finalize the IMR policy.
- The SAC recommended the list of ten diseases on which effects of combinations of different drugs would be studied.
- The protocols on clinical validation of pharmacopoeial drugs in ten diseases – Zof-e-Masana, Surat-e-Inzaal, Soo-ul-Qinya, Kasrat-e-Ratubat-e-Hamoozi, Nisyan, Warm-e-Kabid, Zaheer, Busoor-e Jild, Bawaseer-e-Damiya, Waja-ul Mafasil as prepared in consultation with the experts of the field were recommended by the committee for conducting clinical validation studies.
- The Committee recommended the proposal for developing quick relief Unani drugs on three diseases, i.e. Sual-e-Ratab, Nazla Har, Waja-ul Mafasil.
- The SAC recommended the proposals on re-designing of the dosage forms of Unani products.
- The Committee recommended the content of Expression of Interest in identified priority research areas in relation to diseases of great concern.
- The SAC recommended the projects on fundamentals of Unani Medicine on establishing genetic co-relation between the theory of Akhlat and fundamentals of Unani Medicine in healthy individuals as well as different diseases.

SAC meeting held on 03 September 2013

- The SAC recommended the Council's IMR Policy 2013.
- The SAC recommended to add few priority areas for research e.g. maternal health, studies on pre-natal and post-natal care, and chronic renal diseases.
- The SAC recommended that the priority areas can be classified into two headings – first line and second line priorities – according to their incidence and promising intervention of Unani Medicine.
- The SAC recommended the purchase of the proposed instruments required for research work.

SAC meeting held on 06 February 2013

- The project on virtual digitization of herbarium specimens under IMR scheme was recommended by the SAC.

- The committee agreed in principle to evaluate therapeutic intervention of Safoof Jawahar Mohra and Khameera Marwareed in HIV/AIDS; Qurs-e-Kuliya, Jawarish Zarooni and Arq Joshanda Bisehri Booti in chronic renal failure; and Majoon I.Q. in Senile Dementia.
- The SAC recommended that reverse pharmacology on UNIM-152 and UNIM-158, and pre-clinical studies on the proposed drugs for clinical studies in upcoming financial year may be carried out.
- The SAC recommended drug-based study for validation of pharmacopoeial drugs.
- The SAC recommended disease-based study for validation of pharmacopoeial prescriptions for the next financial year.
- The SAC recommended protocols on clinical validation of Unani formulations for developing safety data in diabetes mellitus, anorexia, scabies, gout, helminthiasis, palpitation, nephrolithiasis, cough and stomatitis.

2.4.1. RESEARCH SUB-COMMITTEES

The SAC is assisted by five Sub-committees, namely Survey and Cultivation of Medicinal Plants Sub-committee; Drug Standardisation Sub-committee; Clinical Research Sub-committee; Literary Research Sub-committee; and Claim of Cure Sub-committee.

2.5. ORGANISATIONAL SET-UP

The Council has its headquarters at New Delhi and a network of 23 centres functioning in different parts of the country. These include:

Centre	Number
Central Research Institute of Unani Medicine	02
Regional Research Institute of Unani Medicine	08
Regional Research Centre	02
Clinical Research Unit	06
Literary Research Institute of Unani Medicine	01
Drug Standardisation Research Institute	01
Drug Standardisation Research Unit	01
Chemical Research Unit (Grant-in-aid)	01
Clinical Research Pilot Project	01

The Council's centres are spread over different States. The following is the State-wise institutional network of the Council.

Andhra Pradesh

- Central Research Institute of Unani Medicine (CRIUM), Hyderabad
- Clinical Research Unit (CRU), Kurnool

Assam

- Regional Research Centre (RRC), 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 Standardisation Research Unit (DSRU), New Delhi
- Unani Medical Centre (extension centre of RRIUM, New Delhi), Dr. Ram Manohar Lohia Hospital, New Delhi
- Unani Speciality Clinic (extension centre of RRIUM, New Delhi), Deen Dayal Upadhyay Hospital, New Delhi

Jammu & Kashmir

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

Kerala

- Clinical Research Unit (CRU), Edathala (Alwaye) with an extension centre at Kumblanghi

Karnataka

- Clinical Research Unit (CRU), Bangaluru

Madhya Pradesh

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

Manipur

- Clinical Research Pilot Project, Imphal

Maharashtra

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

Odisha

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

Tamil Nadu

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

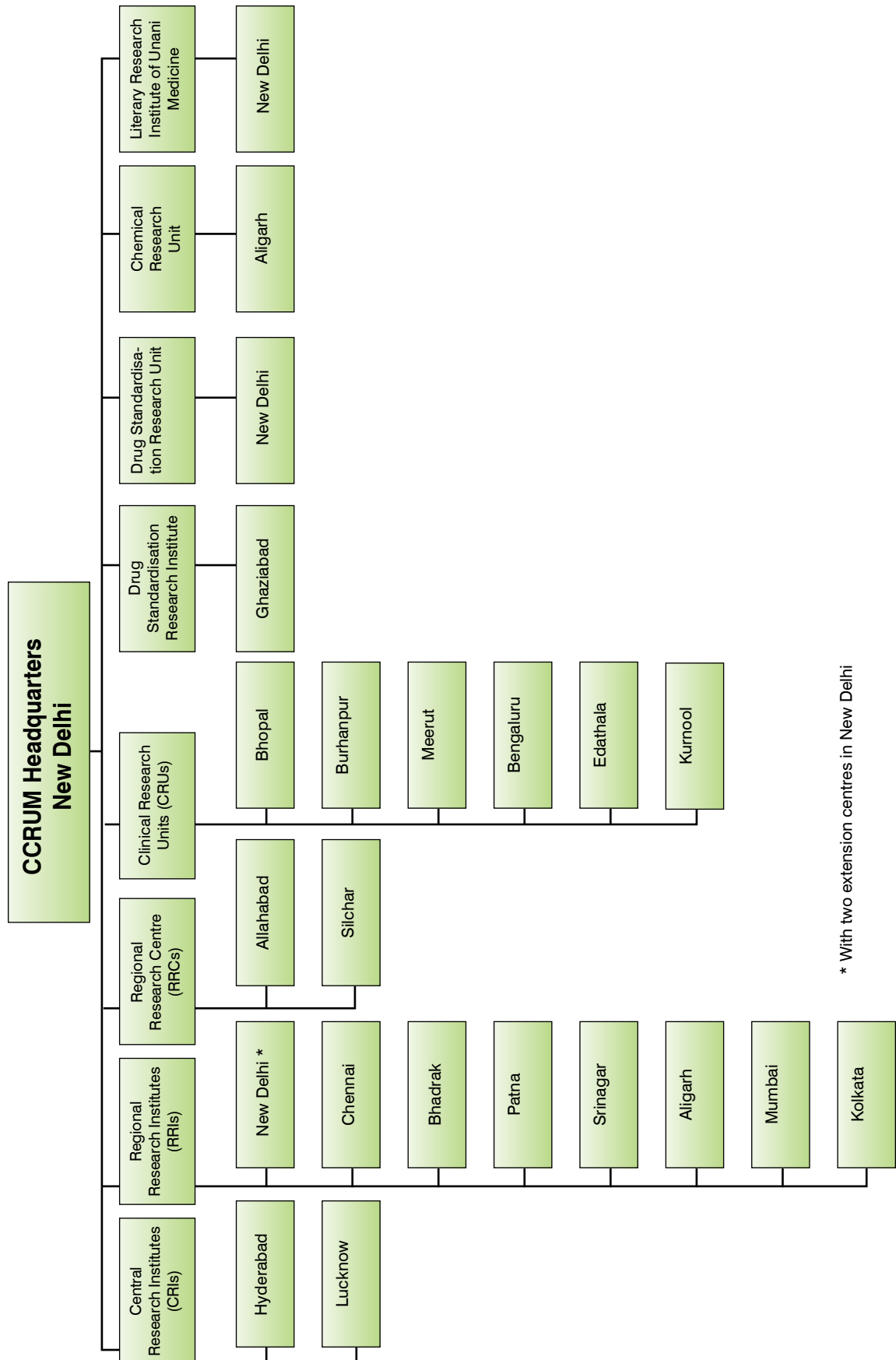
Uttar Pradesh

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

West Bengal

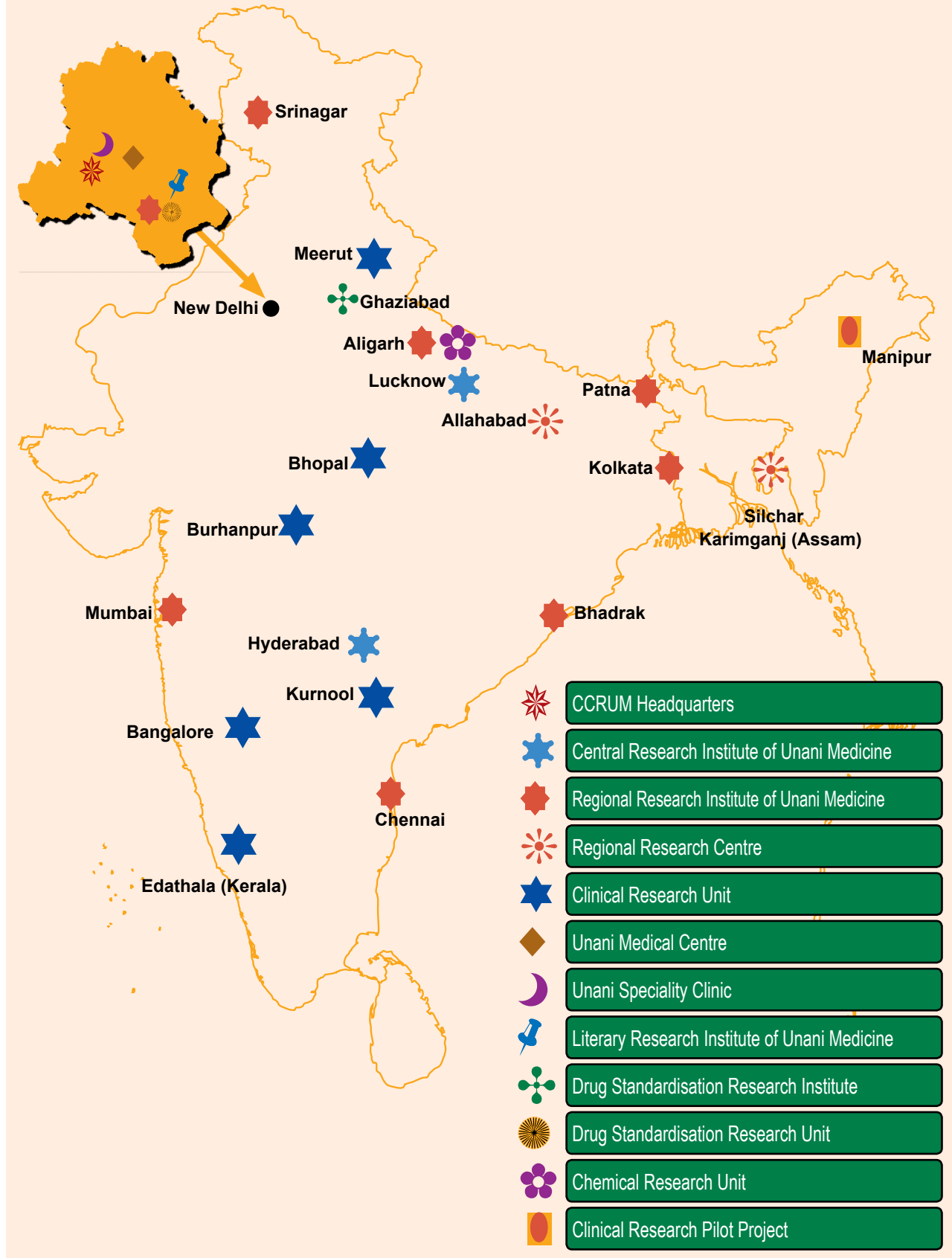
- Regional Research Institute of Unani Medicine (RRIUM), Kolkata

Organisational Set-Up of the Council

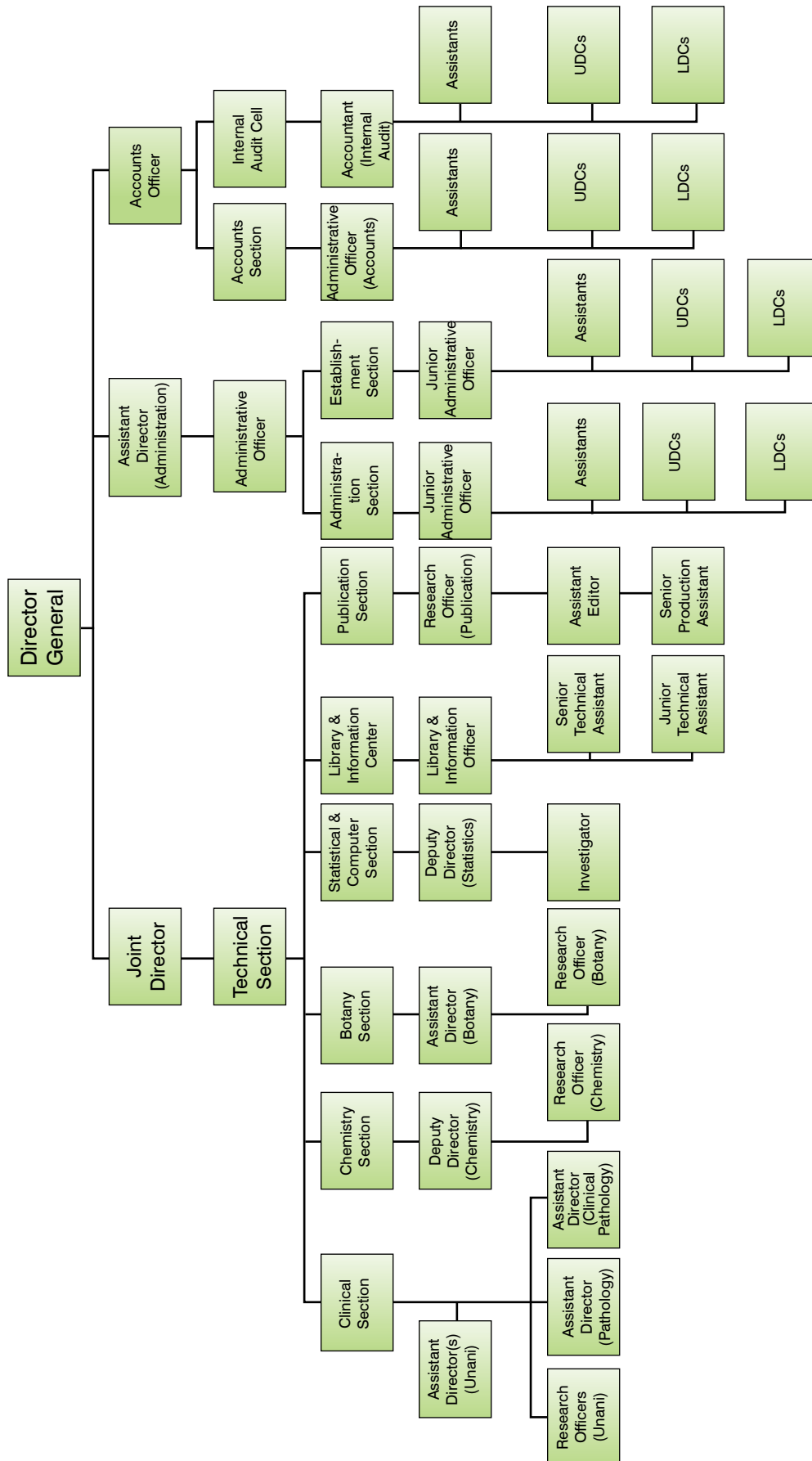


* With two extension centres in New Delhi

Institutional Network of CCRUM



Organisational Structure at the Headquarters



2.6. BUDGET (ACTUAL EXPENDITURE)

The centre-wise actual expenditure of the Council during 2013-14 was as follows:-

(₹ in thousands)

S. No.	Name of State	Non-plan	Plan	Total
1	Andhra Pradesh			
	(i) CRIUM, Hyderabad	90,421	22,821	1,13,242
	(ii) CRU, Kurnool	1,806	1,064	2,870
	Total S. No. 1	92,227	23,885	1,16,112
2.	Assam (NER)			
	(i) CRU, Karimganj	-	7,301	7,301
	Total S. No. 2	-	7,301	7,301
3	Bihar			
	(i) RRIUM, Patna	14,833	14,153	28,986
	Total S. No. 3	14,833	14,153	28,986
4.	Karnataka			
	(i) CRU Banagalore	3,308	1,148	4,456
	Total S. No. 4	3,308	1,148	4,456
5.	Jammu & Kashmir			
	(i) RRIUM, Srinagar	27,140	26,194	53,334
	Total S. No. 5	27,140	26,194	53,334
6.	Kerala			
	(i) Alwaye	2,545	10,814	13,359
	Total S. No. 6	2,545	10,814	13,359
7.	Madhya Pradesh			
	(i) CRU, Burhanpur	4,305	3,428	7,733

S. No.	Name of State	Non-plan	Plan	Total
	(ii) CRU, Bhopal	-	6,331	6,331
	Total S. No. 7	4,305	9,759	14,064
8.	Maharashtra			
	(i) RRIUM, Mumbai	7,828	19,017	26,845
	Total S. No. 8	7,828	19,017	26,845
9.	Manipur (NER)			
	(i) Clinical Pilot Project	-	1,793	1,793
	Total S. No. 9	-	1,793	1,793
10.	New Delhi			
	(i) LRIUM	22,464	1,618	24,082
	(ii) DSRU	8,591	644	9,235
	(iii) RRIUM	31,754	31,262	63,016
	(iv) CCCBC	0	32,679	32,679
	(v) Headquarters	57,315	27,274	84,589
	Total S. No. 10	1,20,124	93,477	2,13,601
11.	Odisha			
	(i) RRIUM, Bhadrak	23,085	34,248	57,333
	Total S. No. 11	23,085	34,248	57,333
12.	Tamil Nadu			
	(i) RRIUM, Chennai	38,560	22,654	61,214
	Total S. No. 12	38,560	22,654	61,214
13.	Uttar Pradesh			
	(i) DSRI, Ghaziabad	13,705	902	14,607

S. No.	Name of State	Non-plan	Plan	Total
	(ii) CRIUM, Lucknow	-	71,624	71,624
	(iii) RRC, Allahabad	11,797	3,631	15,428
	(iv) RRIUM, Aligarh	12,272	39,718	51,990
	(v) CRU, Meerut	-	9,662	9,662
	Total S. No. 13	37,774	1,25,537	1,63,311
14.	West Bengal			
	(i) RRIUM, Kolkata	-	13,651	13,651
	Total S. No. 14	-	13,651	13,651
15.	Other charges			
	(i) Pension fund transfer	15,000	8,500	23,500
	(ii) Contribution to NPS	4,627	2,311	6,938
	(iii) CGHS contribution	-	1,863	1,863
	(iv) Seminar/workshop	-	4,097	4,097
	(v) Health Mela	-	187	187
	(vi) Training programme	-	38	38
	(vii) Arogya	-	1,411	1,411
	(viii) EMR	-	122	122
	(ix) Short-term research projects	-	1,176	1,176
	(x) Unani Pharmacopoeia	-	195	195
	(xi) Collaborative studies	-	1,882	1,882
	(xii) Contribution to DST projects	-	3,800	3,800
	(xiii) Advance for construction of building	-	2,18,026	2,18,026
	(xiv) Council's publication (Priced)	-	517	517

S. No.	Name of State	Non-plan	Plan	Total
(xv)	Medical advance	203	-	203
(xvi)	Pay advance	24	-	24
(xvii)	Advance to Govt. servants	-	-	-
(xviii)	Scooter	-	456	456
(xix)	Car	-	462	462
(xx)	HBA	-	345	345
(xxi)	Computer	-	650	650
Total S. No. 15		19,854	2,46,038	2,65,892
Grand Total S. No. 1 to 15		3,91,583	6,49,669	10,41,252

3. TECHNICAL REPORT

3.1. INTRAMURAL RESEARCH

3.1.1. CENTRE-WISE ACTIVITIES

Centre	Activities
Central Research Institute of Unani Medicine (CRIUM), Hyderabad	<ul style="list-style-type: none"> • Clinical Research Programme • Validation of Unani Pharmacopoeial Drugs • Research on Fundamentals/Basic Principles of Unani Medicine • General Out-patient Department (GOPD) Programme • Mobile Clinical Research Programme • School Health Programme • Drug Standardisation 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 • Validation of Unani Pharmacopoeial Drugs • General Out-patient Department (GOPD) 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 • Validation of Unani Pharmacopoeial Drugs • Validation of Unani Pharmacopoeial Fast-acting Drugs • General Out-patient Department (GOPD) Programme • Mobile Clinical Research Programme • School Health Programme • Drug Standardisation 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 • Validation of Unani Pharmacopoeial Drugs • Validation of Unani Pharmacopoeial Fast-acting Drugs • General Out-patient Department (GOPD) Programme

Centre	Activities
Regional Research Institute of Unani Medicine (RRIUM), Patna	<ul style="list-style-type: none"> • Mobile Clinical Research Programme • School Health Programme • Survey and Cultivation of Medicinal Plants Programme • Clinical Research Programme • Validation of Unani Pharmacopoeial Drugs • Validation of Unani Pharmacopoeial Fast-acting Drugs • General Out-patient Department (GOPD) Programme • Mobile Clinical Research Programme • School Health Programme
Regional Research Institute of Unani Medicine (RRIUM), Aligarh	<ul style="list-style-type: none"> • Clinical Research Programme • Validation of Unani Pharmacopoeial Drugs • Pharmacological Research Programme • General Out-patient Department (GOPD) Programme • Mobile Clinical Research Programme • School Health Programme • Drug Standardisation 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 • Validation of Unani Pharmacopoeial Drugs • Validation of Unani Pharmacopoeial Fast-acting Drugs • General Out-patient Department (GOPD) 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 • Validation of Unani Pharmacopoeial Drugs • Validation of Regimenal Therapies • Pharmacological Research Programme • General Out-patient Department (GOPD) Programme • Mobile Clinical Research Programme • School Health Programme • Drug Standardisation Research Programme • Survey and Cultivation of Medicinal Plants Programme

Centre	Activities
Regional Research Institute of Unani Medicine (RRIUM), Kolkata	<ul style="list-style-type: none"> • Validation of Unani Pharmacopoeial Drugs • General Out-patient Department (GOPD) Programme
Regional Research Institute of Unani Medicine (RRIUM), New Delhi	<ul style="list-style-type: none"> • Clinical Research Programme • Validation of Unani Pharmacopoeial Drugs • General Out-patient Department (GOPD) Programme • Mobile Clinical Research Programme • Unani Speciality Clinics at Allopathic Hospitals
Regional Research Centre (RRC), Allahabad	<ul style="list-style-type: none"> • Clinical Research Programme • Validation of Unani Pharmacopoeial Drugs • General Out-patient Department (GOPD) Programme • Mobile Clinical Research Programme • School Health Programme
Regional Research Centre (RRC), Silchar with extension Centre at Karimganj	<ul style="list-style-type: none"> • Validation of Unani Pharmacopoeial Drugs • Validation of Unani Pharmacopoeial Fast-acting Drugs • General Out-patient Department (GOPD) Programme
Clinical Research Unit (CRU), Bangalore	<ul style="list-style-type: none"> • Clinical Research Programme • Validation of Unani Pharmacopoeial Drugs • General Out-patient Department (GOPD) Programme
Clinical Research Unit (CRU), Meerut	<ul style="list-style-type: none"> • Validation of Unani Pharmacopoeial Drugs • General Out-patient Department (GOPD) Programme
Clinical Research Unit (CRU), Bhopal	<ul style="list-style-type: none"> • Clinical Research Programme • General Out-patient Department (GOPD) Programme
Clinical Research Unit (CRU), Burhanpur	<ul style="list-style-type: none"> • Clinical Research Programme • Validation of Unani Pharmacopoeial Drugs • General Out-patient Department (GOPD) Programme • Mobile Clinical Research Programme
Clinical Research Unit (CRU), Edathala	<ul style="list-style-type: none"> • Validation of Unani Pharmacopoeial Drugs • General Out-patient Department (GOPD) Programme

Centre	Activities
Clinical Research Unit (CRU), Kurnool	<ul style="list-style-type: none"> • Validation of Unani Pharmacopoeial Drugs • Validation of Unani Pharmacopoeial Fast-acting Drugs • General Out-patient Department (GOPD) Programme
Drug Standardisation Research Unit (DSRU), New Delhi	<ul style="list-style-type: none"> • Drug Standardisation Research Programme
Drug Standardisation Research Institute (DSRI), Ghaziabad	<ul style="list-style-type: none"> • Drug Standardisation 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-inaid), Aligarh	<ul style="list-style-type: none"> • Chemical Investigations of Unani Medicinal Plants

3.1.2. PROGRAMME-WISE ACTIVITIES

3.1.2.1. SURVEY AND CULTIVATION OF MEDICINAL PLANTS PROGRAMME

The Council has undertaken programme of extensive surveys of medicinal plants in different parts of the country, primarily with a view to collect and identify medicinal plants and recording basic data on their ethnopharmacological uses from the tribal and other rural folks of the study area. The broad objectives of the programme are:

- To survey, collect and identify medicinal plants in different forest zones of the country
- To study distribution, availability, ethnopharmacological uses and threats of 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 document folk knowledge on medicinal uses of plants
- To collect samples of genuine drugs from the forest for pharmacopoeial standardisation work
- To develop nursery of medicinal plants for demonstration purpose with a view to popularize them among the masses

This programme continued at the following research centers 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 ethno-pharmacological surveys in different forest divisions/areas during the period under report. These include South Wayanad Forest Division (Kerala); Angul, Bhadrak and Dhenkanal Forest Divisions (Odisha); Nizamabad and Atmakur Forest Divisions (Andhra Pradesh); and Sindh Valley, Gurez and Batote Forest Divisions (Jammu & Kashmir). As a result of the survey tours conducted, 3,107 botanical specimens comprising 1,079 species of plants were collected and identified.

Herbarium

Plant specimens collected from the study areas including previous collection were mounted on herbarium sheets. During the reporting period, 2,308 such herbarium sheets were prepared and information pertaining to plants' botanical name, family, local name, Unani name (wherever available), date of collection, brief morphological features, medicinal/ other uses of plant were recorded on each herbarium sheet. Besides, 532 new index cards were compiled and 785 index cards were updated. The survey team members during field studies collected 509 saplings of important medicinal species for plantation in the nurseries attached to the institutes. The survey team also collected 243kg of raw drugs and sent to the Pharmacy section of Central Research Institute of Unani Medicine (CRIUM), Hyderabad for preparation of Unani formulations.

Folk Claims

The survey team members collected information from the local communities about traditional uses of plants. The information was systematized taxonomically, and efforts were made to develop a database for comparative analysis of the information recorded so far. As a result, 392 folk medicinal claims were recorded from tribal inhabitants and other rural folks of the study areas. The Council has taken up a programme to publish this information in the form of books providing 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 took up cultivation of some important medicinal plants used in Unani medicines. These included Atrilal (*Ammi majus* L.), Afsanteen (*Artimisia absinthium* L.) Babchi (*Psoralea corylifolia* L.), Gulnar farsi (*Punica granatum* Linn. abortive var.), Gilo (*Tinospora cordifolia* (Wild.) Miers), Gurmarbuti (*Gymnema sylvestre* R Br.), Kahzaban (*Arnebia benthami* Wall

ex G.Don), Khatmi (*Althaea officinalis* L.), Khulanjan (*Alpinia galanga* Willd.), Unsul (*Urgenia indica* Kunth.), Sudab (*Ruta graveolens* Linn.), and Zanjabeel (*Zingiber officinale* Rosc.). As a result of field-scale cultivation and collection, 557 kg of raw drugs were obtained and supplied to the pharmacy section of CRIUM, Hyderabad for preparation of Unani formulations.

Nursery of Medicinal Plants

With a view to popularize medicinal plants among the masses, the Council has launched a programme of cultivating about 150 common species in its nurseries developed at Aligarh, Chennai, Hyderabad and Srinagar. Some of the important and interesting species grown under this activity include: Aatrilal (*Ammi majus* L.), Afsanteen (*Artemisia absinthium* L.), Anar (*Punica granatum* L.), Arusa (*Adhatoda vasica* Nees.), Aspaghol (*Plantago ovata* Forsk.), Asl-us-soos (*Glycyrrhiza glabra* Linn.), Belgiri (*Aegle marmelos* (L.) Correa.), Babchi (*Psoralea corylifolia* L.), Banafsha (*Viola odorata* L.), Bhangra (*Eclipta alba* Hussk), Brinjasif (*Achillea millefolium* L.), Fufal (*Areca catechu* L.), Gheekwar (*Aloe barbadensis* Mill.), Gulnarfarsi (*Punica granatum* L. abortive var.), Gurmar buti (*Gymnema sylvestre* R. Br.), Hina (*Lawsonia inermis* L.), Irsa (*Iris ensata* Thunb), Jadwar (*Delphinium denudatum* Wall. ex & T.), Keora (*Pandanus tectorious* Soland. ex Parkinson.), Khulanjan (*Alpinia galanga* Willd.), Konch (*Mucuna pruriens* L.), Mako (*Solanum nigrum* L.), Marorphali (*Helicteres isora* L.), Muqil (*Commiphora mukul* (Hook ex Stocks) Engl.), Palas (*Butea monosperma* (Lam.) Taub.), Qinnab (*Cannabis sativa* L.), Qurtum (*Carthamus tinctorius* L.), Rasan (*Inula racemosa* C.B. Clarke), Sadabahar (*Vinca rosea* L.), Satawar (*Asparagus racemosus* Willd.), Sudab (*Ruta graveolens* Linn.), Tulsi (*Ocimum sanctum* L.), Turbud (*Ipomoea turpethum* R. Br.), Waj (*Acorus calamus* Linn.) etc.

3.1.2.2. DRUG STANDARDISATION RESEARCH

The Drug Standardisation Research Programme is mainly concerned with evolving pharmacopoeial standards of single as well as compound Unani formulations included in various volumes of National Formulary of Unani Medicine for their incorporation in the Unani Pharmacopoeia of India. Work on compound formulations include development of Standard Operating Procedures (SOPs) for their manufacture followed by their pharmacopoeial standardisation. Besides, standardisation of investigational drugs for clinical trials at the Council and estimation of heavy metals, microbial load, aflatoxin content and pesticidal residues in the drugs are also part of this programme. Chemical investigations of Unani medicinal plants are also being carried out under this programme. Standardisation 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.

The work 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 Standardisation 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 manufacture of compound Unani formulations and their pharmacopoeial standardisation in the Council's laboratories
- Development of Standard Operating Procedures (SOPs) for manufacture of compound formulations and their pharmacopoeial standards completed by different laboratories through UPC projects
- Quality control of research drugs manufactured at the Council's pharmacy in Hyderabad
- Standardisation of Unani drugs (Pharmacopoeial drugs)
- Chemical investigations of medicinal plants

Development of Standard Operating Procedures (SOPs) for manufacture of compound formulations and their Pharmacopoeial standards

Under this programme, SOPs for manufacture of following 53 compound formulations and their pharmacopoeia standards were developed at various research centres of the Council.

- | | |
|----------------------------|---------------------------|
| • Habb-e-Bars | • Habb-e-Kotwali |
| • Habb-e-Astam Khiqoon | • Habb-e-Hummae Murakkaba |
| • Habb-e-Barmak | • Habb-e-Ikhtilaj |
| • Habb-e-Ishrat | • Habb-e-Kafoor |
| • Habb-e-Kafoori | • Habb-e-Kalaf |
| • Roughan-e-Bars | • Roughan-e-Khizab |
| • Roughan-e-Mastagi | • Roughan-e-Gogard |
| • Roughan-e-Hindi | • Roughan-e-Laqwa |
| • Roughan-e-Bazr-ul-Banj | • Roughan-e-Dhatura |
| • Roughan-e-Badam Talkh | • Roughan-e-Auraq |
| • Roughan-e-Sausan | • Roughan-e-Jund |
| • Qurs-e-Irsa | • Habb-e-Tap-e-Larza |
| • Itrifal Muqawwi-e-Dimagh | • Qurs-e-Firanj mushk |
| • Sufoof-e-Kahruba | • Sufoof-e-Ood |

- Marham Asl
- Jawarish-e-Haamaan
- Jawarish-e-Anjadan
- Jawarish-e-Khuzi
- Jawarish-e-Usquf
- Qurs-e-Samoogh
- Qurs-e-Luboob
- Jawarish-e-Muqawwi-e-Meda
- Laooq-e-Tabasheer
- Roghan-e-Kaner
- Roghan-e-Makhtara
- Roghan-e-Muqawwi-e-Dimagh
- Roghan-e-Nafe Warm-e-Niqras
- Qurs-e-Shifa Hindi
- Jawarish-e-Kafoor Qawi
- Jawarish-e-Qaiser
- Itrefal-e-Irq Madni
- Jawarish-e-Muqawwi-e-Dimag
- Qurs-e-Mur
- Roghan-e-Chhajan
- Jawarish-e-Narmushk Mushil
- Roghan-e-Zarneekh
- Roghan-e-Tambaku
- Roghan-e-Hina
- Roghan-e-Shibt

Quality Control of Research Drugs

(A) During the reporting period, the following 95 single ingredients were tested for their quality control:

- Roughan-e-Kunjad
- Roughan-e-Kunjad
- Kamela
- Babchi
- Babchi
- Kalonji
- Roughan-e-Kunjad
- Roughan-e-Kunjad
- Asal
- Roughan-e-Zaitoon
- Roughan-e-Kunjad
- Khusta-e-Khabsul Hadeed
- Namak-e-Turb
- Namak-e-Turb
- Namak-e-Turb
- Barg-e-Sana Makki
- Irsa
- Roughan-e-Kunjad
- Babchi
- Kalonji
- Kalonji
- Roughan-e-Kunjad
- Asal
- Asal
- Roughan-e-Zaitoon
- Khusta-e-Khabsul Hadeed
- Khusta-e-Khabsul Hadeed
- Namak-e-Turb
- Namak-e-Turb
- Roughan-e-Kunjad

- Babchi
- Babchi
- Babchi
- Babchi
- Babchi
- Babchi
- Babchi
- Babchi
- Babchi
- Khusta Baiza Murg
- Gul-e-Tesu
- Aftimoon
- Gudmar Buti
- Gulkhand
- Gharikhoon
- Ustukhudoos
- Samagh-e-Arabi
- Tukhm-e-Panwad
- Beikh-e-Karafas
- Kalonji
- Babchi
- Babchi
- Babchi
- Satt-e-Pudina
- Mako Khusk
- Tukm-e-Katan
- Khusta Khabsul Hadeed
- Hajrul Yahood
- Daroonaj Arqabi
- Hulba (Methi)
- Amber Ash Hab
- Gul-e-Nilofar
- Badranjboya
- Babchi
- Babchi
- Babchi
- Babchi
- Babchi
- Babchi
- Babchi
- Khusta Zarmarrud
- Asal
- Samgh-e-Kateera
- Anjeer-e-Zard
- Maweez Munaqqa
- Zeera Siyah
- Satt-e-Behroza
- Zanjabeel
- Shahatra
- Beikh-e-Kasni
- Kafoor
- Babchi
- Babchi
- Babchi
- Gul-e-Banafsha
- Beikh-e-Izkhar
- Irsa
- Ood Hindi
- Namak-e-Turb
- Habb-ul-Khilt
- Sang-e-Sarmahi
- Badiyan
- Zafran
- Aamla

(B) During the reporting period, the following 54 compound formulations prepared at the Pharmacy of CRIUM, Hyderabad were tested for quality control.

- | | |
|------------------------|---------------------------|
| • UNIM-001 | • UNIM-001 |
| • UNIM-001 | • UNIM-003 |
| • UNIM-003 | • UNIM-004 |
| • UNIM-004 | • UNIM-004 |
| • UNIM-352 (Majoon) | • UNIM-352 (Majoon) |
| • UNIM-104 (Majoon) | • UNIM-401 (Granules) |
| • UNIM-403 (Oil) | • UNIM-402 (Oil) |
| • UNIM-005 (Powder) | • UNIM-005 (Powder) |
| • UNIM-301 (Capsule) | • UNIM-301 (Capsule) |
| • UNIM-304 (Oil) | • UNIM-304 (Oil) |
| • UNIM-051 (Capsule) | • UNIM-040 |
| • UNIM-041 | • UNIM-MUNB |
| • UNIM-405 | • Sharbat-e-Zufa Murakkab |
| • UNIM-001/T | • UNIM-003/T |
| • Gulqand | • UNIM-MUNB |
| • UNIM-MUNB | • UNIM-041 |
| • UNIM-405 | • UNIM-405 |
| • UNIM-027(MA) | • UNIM-405 |
| • UNIM-42(A),K2 | • UNIM-027(TPA) |
| • Capsule Habis | • UNIM-403 |
| • Arq-e-Mako | • UNIM-MUNB |
| • Arq-e-Badiyan | • UNIM-403 |
| • UNIM-301 | • UNIM-003 |
| • Itrifal Shahatra | • Sharbat-e-Ejaz |
| • Arq-e-Badiyan | • Arq-e-Mako |
| • Jawarish Kamooni | • Marham Kharish Jadeed |
| • Sufoof Hajrul Yahood | • Qurs-e-Deedan |

Standardisation of Unani formulations prepared in the DSRU component of CRIUM, Hyderabad:

- Preparation of ointments UNIM-044, UNIM-045, UNIM-046.
- Preparation of modified form of drugs: prepared creams of i) UNIM 044 –7 kgs. ii) UNIM 045 – 14 kgs. iii) UNIM 046 – 25 kgs.
- Developement of phytochemical markers for Unani herbal formulations and phytochemical extraction and isolation of compound from Unani formulations were under progress.

Unani Pharmacopoeia of India

The Council after being designated as secretariat for Unani Pharmacopoeia of India by the Department of AYUSH, organized meetings of Unani Pharmacopoeia Committee (UPC) and its sub-committees. During the reporting period, Council prepared fourth volume of *Unani Pharmacopoeia of India*, Part-II consisting of 50 monographs comprising Araqiya, Dawa, Itrifal, Jawarish, Majoon, Safoof and Tiryaaq and Hindi version of National Formulary of Unani Medicine, Part-III. Both will be published after approval of UPC and Pharmacopoeia Commission of Indian Medicine (PCIM).

Shelf Life Studies of Unani Formulations

Government of India has fixed the date of expiry of various dosage forms of Unani formulations. The Council discussed it with Ayurveda, Siddha, Unani Drug Technical Advisory Board (ASUDTAB) constituted by the Department of AYUSH, Ministry of Health & Family Welfare, Government of India. ASUDTAB directed that Shelf Life Studies of different Unani dosage forms may be initiated by the Council as well as by industry.

In view of the above, the Council initiated the work at CRIUM, Hyderabad. The protocol of shelf life studies was prepared by the Council in consultation with the experts from academics, industries and research institutions and it was approved by the Unani Pharmacopoeia Committee.

Redesigning of dosage forms of Unani formulations

During the reporting year, the Council undertook the redesigning of Unani formulations in order to reduce their volume/size and to increase the bio-availability of the drug. The objective was also to provide sugar free medicine to the diabetic patients. This work was initiated in collaboration with Faculty of Pharmacy, Jamia Hamdard, New Delhi and National Institute of Pharmaceutical Education and Research (NIPER), Hyderabad. Redesigning of four formulations was completed and six formulations were under process.

3.1.2.3. CLINICAL RESEARCH PROGRAMME

Pre-clinical Studies

Preclinical safety and general pharmacological studies on some classical Unani drugs were undertaken at the Council's pharmacological units. Preclinical studies were also carried out in collaboration with Pharmacology Departments of some reputed hospitals/universities.

During the reporting period, the following studies were undertaken at the Council's pharmacological units:

Safety evaluation of Qurs Tursh Mushtahi at RRIUM, Aligarh

Acute, sub acute and sub chronic toxicity studies were carried out on albino rats weighing 100-150 gm. For each experiment, the animals were divided into three groups of five animals each, and group I serve as control in every experiment. Aqueous suspension of Qurs Tursh Mushtahi was given to albino wistar rats in the dose of 1gm/kg and 2gm/kg body weight (b.w.) in single dose for acute toxicity study while 150mg/kg b.w. and 450mg/kg b.w. for 28 days and 90 days for subacute and chronic toxicity study respectively. On the next day of the completion of duration of drug administration, the animals were sacrificed after collecting their blood samples and their liver, heart, kidney and spleen were excised out for determination of change in the organ weight as compared to the control group. The animals were observed for gross behaviour (salivation, lacrymation, lethargy, sleep and coma) and mortality. The findings of the acute toxicity study showed that Qurs Tursh Mustahi was well tolerated and no abnormality was observed in general behaviour of the animals and no overnight mortality was recorded as compared to the control group in all experiments. The results of the study showed that there were no statistically significant changes in haematological and biochemical parameters, except significant increase in haemoglobin level in female rats at dose 450mg/kg. The results of these studies suggest that drug Qurs Tursh Mushtahi is safe at the dose level of 150 mg/kg and 450 mg/kg b.w.

Pharmacology study to determine Amylase and Trypsin activity in pancreatic homogenate at RRIUM, Aligarh

Pharmacological (enzymatic) study of Qurs Tursh Mushtahi was conducted on albino rats at RRIUM Aligarh. Albino rats of either sex weighing between 100-150 g were randomly selected and divided into three groups having five animals each. Group I was kept as normal control which was treated with distilled water for 60 days, while in the group II and III, the aqueous suspension of Qurse Tursh Mushtahi was administered orally in the dose of 150 mg/kg b.w. and 450 mg/kg b.w. respectively for 60 days.

The next day all animals were sacrificed and pancreas were excised and removed from fat and connective tissues. Larger part of pancreas was used for biochemical assay. The homogenization was performed in phosphate buffer saline to determine enzymatic activity. The findings of the study suggest that Qurse Tursh Mushtahi enhances pancreatic enzymatic activity. There was significant increase in alpha amylase enzymatic activity in the dose of 450 mg/kg while the dose of 150 mg/kg didn't showed any change, however significant increase in trypsin activity was observed in both the dose levels of 150 mg//kg and 450 mg/kg. These findings suggest that Qurs Tursh Mushtahi has potential to promote pancreatic enzymatic activity.

Safety evaluation of Capsule Shaqeeqa at RRIUM, Srinagar

Chronic toxicity evaluation of capsule Shaqeeqa was conducted on both male and female albino wistar rats at RRIUM, Srinagar. Animals were divided into four groups; two were control (male and female) and two were test. The powder of capsule Shaqeeqa was mixed with distilled water

and made a suspension, which was administered to animals orally at the dose level of 90mg/kg b.w. for 90 days. Behavioural and neurological changes as well as changes in body weight, water intake and feed consumption were observed on weekly interval. There was no significant change in feed consumption in test groups in comparison to control groups in both sexes. There was no significant change in gross examination of organs. The values of biochemical and haematological parameters remained unaffected. Hence these results of study suggest that drug is safe when administered orally for long time.

Safety evaluation of Capsule Deedan at RRIUM, Srinagar

Chronic toxicity evaluation of capsule Deedan was conducted on albino wistar rats at RRIUM, Srinagar. Animals were divided into four groups; two control (male and female) and two test (male and female). Capsule Deedan was opened and the powder was further grinded in mortar and pestle to make fined powder. The fined powder was mixed with distilled water and final suspension was orally administered at the dose level of 90mg/kg body weight in both male and female wistar rats. The drug treated rats gained body weight normally. The average feed and water consumption of rats was found unaffected by the drug throughout the study period. The gross examination of tissues and organs revealed normal appearance in shape, size and texture in the drug treated rats. The biochemical and haematological parameters were found to be normal in treated rats when compared with the control rats.

Safety evaluation of Capsule Siras at RRIUM, Srinagar

Sub acute and chronic toxicity of capsule Siras were carried out on albino rats weighing 100-150 gm at RRIUM, Srinagar. For each experiment, the animals were divided into four groups of ten animals each; group I and II (male and female) served as control, while group III and IV (male and female) as test. Aqueous suspension of powder of capsule Siras was given to albino wistar rats in the dose of 90 mg/kg b.w. for subacute and chronic toxicity study for 28 and 90 days respectively. On the next day of the completion of duration, blood was collected and the animals were sacrificed. The physiological parameters like body weight gain, feed and water consumption in both control and test (male and female) groups were found to be unaffected by drug administration. There was no significant change in various biochemical and haematological parameters of both groups of male and female rats when compared with control groups. In subchronic toxicity study, test group (female) was found to gain body weight in a normal fashion. The average feed consumption in treated females was found to decrease than the control females but the values were statistically non significant.

Safety evaluation of Qurs Mulayyan at RRIUM, Srinagar

Sub acute and sub chronic toxicity studies of Qurs Mulayam in albino wister rats were carried out at a dose level of 90mg/kg b.w. in both male and female rats for 28 days and 90 days respectively. Qurs Mulayyan was converted into fine powder by grinding by mortar and pestle. The powder was mixed with distilled water and suspension was administered orally to the animals through cannula. After the completion of duration, blood sample was collected and the animals were sacrificed, and their organs were preserved for gross and macroscopic examinations. No lethality was found in either sex of treated rats. Physiological parameters like feed and water consumption were found to be unaffected in the treated rats. General behaviour like alertness,

hearing activity etc. was normal. Gross examination of collected organs and tissue of treated rats was normal in appearance, sizes, shape and texture. The results of haematological and biochemical parameters of treated male and female rats were unaffected.

Safety evaluation of Capsule Habis at RRIUM, Srinagar

Acute and subacute toxicity study of capsule Habis in albino wister rats were conducted at RRIUM, Srinagar. Capsule Habis was opened and the powder was converted into fine powder by grinding through mortar and pestle. The fine powder was mixed with distilled water and administered orally at a dose of 2000mg/kg b.w. and 150mg/kg. b.w. for 14 and 28 days respectively in both male and female wister rats in a single dose. After the completion of the therapy, blood samples were collected for estimation of bio-chemical and haematological parameters. The animals were sacrificed and their organs were preserved for macroscopic and microscopic examinations. There was no sign of any lethal action nor was any behavioural change after the administration of the drug. In male rats, the average feed water consumption increased slightly in comparison to the controls but was statistically non-significant. The treated rats gained body weight normally and their blood biochemical and haematological parameters were similar to the control rats. Gross examination of the organs and tissues of male rats did not reveal any treatment-related differences in the treated groups when compared with the controls. No statistically significant change in any biochemical or haematological parameter was found in the treated male or female rats when compared to the control males and females respectively. The tissues were found to be normal in size, shape and texture.

Safety evaluation of Habb e Shifa at RRIUM, Srinagar

Acute and subacute toxicity study of habb e Shifa in albino wister rats were carried out at RRIUM, Srinagar. Habb e Shifa was converted into fine powder through grinding by mortar and pestle. Powdered drug Habb e Shifa at a dose level of 2000mg/kg b.w. and 500mg/kg. b.w. in the form of aqueous suspension to both control and test groups (male and female) was given orally through feeding canula for 14 and 28 days respectively. Slightly increase in feed and water consumption in test group animals were observed. No change in biochemical and haematological parameters seen except increase in ALP enzyme of liver in test group. Tissues were found to be normal in shape, size and texture in gross examination in comparison to control.

Clinical Studies

The clinical research programme of the Council deals with the methods of diagnosis and treatment of diseases and aims at critical appraisal of 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 validation 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 (Regimenal therapies) of Unani Medicine is also being validated in some diseases, besides research on some fundamental aspects of the system.

This programme is being conducted 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 (RRC), Allahabad
- Regional Research Centre (RRC), Silchar
- Clinical Research Unit (CRU), Bangalore
- Clinical Research Unit (CRU), Meerut
- Clinical Research Unit (CRU), Bhopal
- Clinical Research Unit (CRU), Burhanpur
- Clinical Research Unit (CRU), Edathala (Kerala)
- Clinical Research Unit (CRU), Kurnool

CENTRE-WISE ALLOCATION OF DISEASES FOR CLINICAL / VALIDATION STUDIES ON SAFETY AND EFFICACY OF UNANI DRUGS

Centre	Disease
Central Research Institute of Unani Medicine (CRIUM), Hyderabad	Bars (Vitiligo), Ziabetus Sukkari (Diabetes mellitus) Zaghtuddam Qawi Lazmi (Essential Hypertension) Iltehab-e-Kabid (Infective Hepatitis) Iltehab-e-Tajaweef-e-Anf (Sinusitis), Kasrat-e-Shahmuddam (Hyperlipidemia), Qarh- e-Meda-wa-Isna-e-Ashari (Duodenal ulcer), Gastro-oesophageal reflex disease (GERD), Daus Sadaf (Psoriasis), Zof-e-Masana (Over active bladder) and Nisyan (Amnesia)
Central Research Institute of Unani Medicine (CRIUM), Lucknow	Waja-ul-Mafasil (Rheumatoid arthritis), Ziabetus Sukkari (Diabetes mellitus), Zaghtuddam Qawi Lazmi (Essential Hypertension) Saman-e-Mufrit (Obesity), Takhalkhul-e-Izam (Osteoporosis), Zof-e-Masana (Over-active bladder) and Su-ul-Qinyah (Anaemia), Deedan-e-Ama (Helmenthiasis)

Centre	Disease
Regional Research Institute of Unani Medicine (RRIUM), Chennai	Iltehab-e-Kabid (Infective hepatitis), Waja-ul-Mafasil (Rheumatoid arthritis), Tahajjur-e-Mafasil (Osteo-arthritis), Tashahhum-e-Kabid (Fatty liver) and Nisyan (Amnesia), Nazla-e-Har (Common Cold)
Regional Research Institute of Unani Medicine (RRIUM), Bhadrak	Daul Feel (Filariasis), Jarb (Scabies), Busoor-e-Jild (Boils and Pustule) and Bawaseer-e-Damia (Bleeding piles), Nazla-e-Har (Common Cold), Wajaul Mafasil (Rheumatoid Arthritis)
Regional Research Institute of Unani Medicine (RRIUM), Patna	Daul Feel (Filariasis), Kasrat-e-Ratubat-e- Hamoozi (Hyper acidity), Nazla-e-Har (Common cold), Waja-ul-Mafasil (Rheumatoid arthritis) and Sual-e-Ratab (Productive cough), Nazla-e-Har (Common Cold)
Regional Research Institute of Unani Medicine (RRIUM), Aligarh	Bars (Vitiligo), Ziabetus Sukkari (Diabetes mellitus), Zaghtuddam Qawi Lazmi (Essential hypertension), Su-ul-Qinyah (Anaemia), Kasrat-e-Ratubat-e-Hamoozi (Hyper acidity), Iltehab-e-Kabid (Infective hepatitis), Nisyan (Amnesia), Warm-e-Kabid (Hepatitis) Daus Sadaf (Psoriasis) and Zof-e-Masana (Over active bladder)
Regional Research Institute of Unani Medicine (RRIUM), Mumbai	Zaghtuddam Qawi Lazmi (Essential Hypertension), Nazla-e-Har (Common Cold), Iltehab-e-Kabid (Infective hepatitis), Nisyan (Amnesia) and Warm-e-Kabid (Hepatitis)
Regional Research Institute of Unani Medicine (RRIUM), Srinagar	Bars (Vitiligo), Zaghtuddam Qawi Lazmi (Essential Hypertension), Daus Sadaf (Psoriasis), Zof-e-Masana (Over active bladder) and Kasrat-e-Ratubat-e-Hamoozi (Hyper acidity)
Regional Research Institute of Unani Medicine (RRIUM), Kolkata	Bawaseer-e-Damia (Bleeding piles), Warm-e-Kabid (Hepatitis) and Deedan-e-Ama (Helmentiasis)
Regional Research Institute of Unani Medicine (RRIUM), New Delhi	Bars (Vitiligo), Ziabetus Sukkari (Diabetes mellitus), Zaghtuddam Qawi Lazmi (Essential hypertension), Tashahhum-e-Kabid (Fatty liver), Zaheer (Dysentry), Su-ul-Qinyah (Anaemia), Kasrat-e- Shahmuddam (Hyperlipidemia) and Bawaseer- e-Damia (Bleeding piles)
Regional Research Centre (RRC), Allahabad	Busoor-e-Jild (Boil and Pustules) and Surat-e-Inzaal (Premature ejaculation)

Centre	Disease
Regional Research Centre (RRC), Silchar with extension Centre at Karimganj	Waja-ul-Mafasil (Rheumatoid arthritis) and Su-e-Hazm (Dyspepsia)
Clinical Research Unit (CRU), Bangalore	Daus Sadaf (Psoriasis), Busoor-e- Jild (Boil and Pustules) and Waja-ul-Mafasil (Rheumatoid arthritis)
Clinical Research Unit (CRU), Meerut	Surat-e-Inzaal (Premature ejaculation), Zaheer (Dysentery), Zof-e-Ishteha (Anorexia), Su-e-Hazm (Dyspepsia) and Surfa Yabis (Dry Cough)
Clinical Research Unit (CRU), Bhopal	Nar-e-Farsi (Eczema) and Daus Sadaf (Psoriasis)
Clinical Research Unit (CRU), Burhanpur	Busoor-e- Jild (Boil and Pustules) and Surat-e-Inzaal (Premature ejaculation)
Clinical Research Unit (CRU), Edathala	Warm-e-Kabid (Hepatitis) and Waja-ul-Mafasil (Rheumatoid arthritis)
Clinical Research Unit (CRU) Kurnool	Bawaseer-e-Damia (Bleeding piles), Nazla-e-Har (Common cold), Waja-ul-Mafasil (Rheumatoid Arthritis) and Sual-e-Ratab (Productive cough)

AMRAZ-E- JILD (SKIN DISORDERS)

BARS (VITILIGO)

Clinical therapeutic studies on Bars (Vitiligo) continued at Central Research Institute of Unani Medicine (CRIUM), Hyderabad. During the reporting period, the following studies were conducted:

Evaluation of therapeutic efficacy of a combination of coded drugs UNIM-001 and UNIM-003 in Bars (Vitiligo) patients

Therapeutic efficacy of a combination of two coded drugs, UNIM-001 and UNIM-003, was evaluated in 3,034 patients of Bars (Vitiligo). The drug UNIM-001 was given in the dose of two tablets (500 mg each) twice daily after an hour of meals. Besides, the paste of the drug UNIM-003 was applied locally on the affected parts early in the morning and the affected parts were exposed to sun rays for 10 to 15 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.

During the reporting period, 1,664 new patients were registered whereas 1,370 patients continued from the previous year bringing a total of 3034 patients studied. Out of them, 297 patients completed the study. Three (1.0%) patients showed 100% repigmentation. In three

(1.0%) patients repigmentation was 91-99%. Twenty-four (8.1%) patients showed 71-90% repigmentation. In 39 (13.1%) patients repigmentation was 51-70%. Forty-one (13.8%) patients showed 41-50% repigmentation. In 156 (52.5%) patients repigmentation was <40%. Thirty-one (10.4%) patients showed no response. Two thousand and forty-five patients were under study whereas 692 dropped out of the study. The drugs showed significant therapeutic effects in arresting the exacerbation in the existing size of the patches and appearance of new patches, besides repigmenting the depigmented patches to a variable degree depending upon the chronicity of the disease and the part of the body affected. No drug intolerance/side effects was noted.

Evaluation of therapeutic efficacy of a combination of coded drugs UNIM-004 and UNIM-005 in Bars (Vitiligo) patients

Therapeutic efficacy of a combination of two coded drugs, UNIM-004 and UNIM-005, was evaluated in 5951 patients of Bars (Vitiligo). The drug UNIM-004 was given in the dose of 1.5 gm twice daily, preferably on empty stomach. Besides, the paste of the drug UNIM-005 was applied locally on the affected parts early in the morning and then the affected parts were exposed to sun rays for 10 to 15 minutes. The paste was washed off after 30 minutes of the application. The treatment was given for a period of three months initially. This was extended till the maximum repigmentation was achieved.

During the reporting period, 2200 new patients were registered whereas 3,751 patients continued from the previous year bringing a total of 5951 patients studied. Out of them, 742 patients completed the study. Six (0.8%) patients showed 100% repigmentation. In four (0.5%) patients, repigmentation was 91-99%. Thirty-five (4.7%) patients showed 71-90% repigmentation. In 66 (8.9%) patients repigmentation was 51-70%. Ninety-eight (13.2%) patients showed 41-50% repigmentation. In 472 (63.6%) patients repigmentation was <40%. Sixty-one (8.2%) patients showed no response. Four thousand and fifty four patients were under study whereas 1,155 patients dropped out of the study.

No drug intolerance/toxicity of the drug was noted. However, itching and blister formation was reported in some patients with sensitive skin. This was managed by diluting the concentration of the paste and applying coconut oil on the affected parts.

Preliminary screening of new coded combinations of drugs UNIM-044(O)+UNIM-044(L), UNIM-045(O)+UNIM-045(L), UNIM-046(O)+UNIM-046(L) and UNIM-047(O)+UNIM-047(L) with Munzij-Mushil therapy in Bars (Vitiligo) patients

Preliminary screening of coded drugs UNIM-044(O)+UNIM-044(L), UNIM-045(O)+UNIM-045(L), UNIM-046(O)+UNIM-046(L) and UNIM-047(O)+UNIM-047(L) with Munzij-Mushil therapy was conducted in 180 patients of Bars (Vitiligo). The patients were divided in four treatment groups. In each group, the patients were first subjected to Munzij-Mushil therapy followed by treatment with the oral and local drugs. In Munzij-Mushil therapy, Munzij-e-Balgham was given till the Nuzj appeared in urine followed by Mushil and Tabreed drugs for six days alternately. After completion of the Munzij-Mushil therapy, patients were treated with the oral drugs, UNIM-044(O), UNIM-045(O), UNIM-046(O), and UNIM-047(O) in the dose of two capsules (500 mg) each twice daily along with the local application of the drugs UNIM-044(L), UNIM-045(L),

UNIM-046(L) and UNIM-047(L) in the ointment form in the respective group. The treatment was given for a period of three months excluding the Munzij-Mushil therapy period. The period of treatment was extended till the maximum repigmentation was achieved.

In group-I, 11 new patients were registered during the reporting period whereas 25 patients continued from the previous year bringing a total of 36 patients studied. Out of them, 11 patients completed the study. Three (27.2%) patients showed 51-70% repigmentation. In three (27.2%) patients, repigmentation was 41-50%. Five (45.6%) patients showed <40% repigmentation. Twenty-two patients were under study whereas three patients dropped out of the study.

In group-II, 11 new patients were registered during the reporting period whereas 25 patients continued from the previous year bringing a total of 36 patients studied. Out of them, eight patients completed the study. Two (25.0%) patients showed 41-50% repigmentation. In six (75.0%) patients repigmentation was <40%. Twenty-six patients were under study whereas two patients dropped out of the study.

In group-III, 26 new patients were registered during the reporting period whereas 39 patients continued from the previous year bringing a total of 65 patients studied. Out of them, 13 patients completed the study. Four (30.8%) patients showed 41-50% repigmentation. In nine (69.2%) patients, repigmentation was <40%. Forty-three patients were under study whereas nine patients dropped out of the study.

In group-IV, 17 new patients were registered during the reporting period whereas 26 patients continued from the previous year bringing a total of 43 patients studied. Out of them, five patients completed the study. One (20.0%) patient showed 41-50% repigmentation. In four (80.0%) patients repigmentation was <40%. Thirty six patients were under study whereas two patients dropped out of the study.

Evaluation of therapeutic efficacy of Munzij-Mushil drugs (UNIM-040+UNIM-041+UNIM-042) in Bars (Vitiligo) patients (CRIUM, Hyderabad)

Therapeutic efficacy of coded Munzij-Mushil drugs (UNIM-040+UNIM-041+UNIM-042) was evaluated in 94 stubborn patients of Bars. The Munzij drugs were given till the appearance of Nuzj in urine followed by Mushil and Tabreed drugs for six days alternately. During the reporting period, 80 new patients were registered whereas 14 continued from the previous year bringing a total of 94 patients studied. Out of them 75 patients completed the study. Sixteen patients were under study whereas three patients dropped out of the study. In these patients, Nuzj appeared in urine within two to three weeks of the treatment. There was definite sign of repigmentation either in the form of islands of pigmentation or perilesional pigmentation or both. No intolerance/adverse effect was noted.

Evaluation of therapeutic efficacy of Munzij-Mushil drugs (UNIM-041+UNIM-042) in Bars (Vitiligo) patients, (CRIUM, Hyderabad)

Therapeutic efficacy of coded Munzij-Mushil drugs (UNIM-041+UNIM-042) was evaluated in 233 stubborn patients of Bars. The Munzij drugs were given till the appearance of Nuzj in urine followed by Mushil and Tabreed drugs for six days alternately. During the reporting period, 209 new patients were registered whereas 24 continued from the previous year bringing a total of 233 patients studied. Out of them, 213 patients completed the study. Three patients were

under study whereas 17 patients dropped out of the study. In these patients, Nuzj appeared in urine in two to three weeks of the treatment. Six patients dropped out of the study. There was definite sign of repigmentation either in the form of islands of pigmentation or perilesional pigmentation or both. No intolerance/adverse effect was noted.

NAR-E-FARSI (ECZEMA)

Clinical study on Nar-e-Farsi (Eczema) continued at CRU, Bhopal. During the reporting period, following study was conducted.

Evaluation of therapeutic efficacy of coded drugs UNIM-401(O) and UNIM-403 (L) in Nar-e-Farsi (Eczema) patients

Therapeutic efficacy of a combination of coded drugs UNIM-401(O) + UNIM-403 (L) was evaluated in patients of chronic Nar-e-Farsi (Eczema) patients. The drug UNIM-401(O) was given in the dose of two capsule (500 mg) twice daily along with the local application of the oil UNIM-403 (L) on the affected parts at bed time. The treatment was given for a period of three months. The duration of treatment was extended upto six months in some patients.

During the reporting period, 74 new patients were registered whereas 18 patients continued from the previous year bringing a total of 92 patients studied. Fifty three patients completed the study. Eleven (20.8%) patients were relieved, 28 (52.8%) partially relieved whereas 14 (26.4%) patients showed no response. Thirteen patients were under study whereas 26 patients dropped out of the study.

DAUS SADAF (PSORIASIS)

Clinical study on Daus Sadaf (Psoriasis) continued at CRIUM, Hyderabad; RRIUM, Srinagar; and CRUs, Bangalore and Bhopal. During the reporting period, following studies were conducted:

Trial of coded drugs (UNIM-401(O)+ UNIM-403 (L)) with and without Munzij-Mushil therapy in Daus Sadaf (Psoriasis) patients (CRIUM, Hyderabad)

Preliminary screening of coded drugs UNIM-401(O) +UNIM-403 (L) was conducted in two groups of patients. In group-I, the patients were first subjected to Munzij-Mushil therapy followed by treatment with the coded drugs UNIM-401(O)+UNIM-403(L). In group-II, the patients were treated with the drugs UNIM-401(O)+UNIM-403(L) only. Munzij-e-Sauda was given till the Nuzj appeared in urine followed by Mushil and Tabreed drugs for six days alternately. After completion of the Munzij-Mushil therapy, the drug UNIM-401(O) was given in the dose of two capsules (500 mg) twice daily before meals along with the local application of UNIM-403(L) on the affected parts. Treatment was given for a period of three months initially, which was extended upto six months.

During the reporting period, in group-I, 82 new patients were registered whereas 46 patients were continued from the previous year bringing a total of 128 patients studied. Out of them 45 patients completed the study. Eighteen (40.0%) patients showed complete remission, 10 (22.2%) partial remission whereas 17 (37.8%) patients showed no response. Fifty patients were under study whereas 33 patients dropped out of the study.

In group-II, 98 new patients were registered, whereas 29 patients continued from the previous year bringing a total of 127 patients studied. Out of them, 28 patients completed the study. Twelve (42.9%) patients showed complete remission, three (10.7%) partial remission whereas 13 (46.4%) patients showed no response. Seventy patients were under study whereas 29 patients dropped out of the study.

Comparative trial of coded drugs (UNIM-401 (O) +UNIM-403 (L) with and without Munzij and Mushil therapy in Daus Sadaf (Psoriasis) patients (RRIUM, Srinagar)

Therapeutic efficacy of coded drugs (UNIM-401 (O) +UNIM-403 (L) with and without Munzij and Mushil therapy was compared in two groups of patients, one group on oral and local medicines only and the other group with Munzij and Mushil therapy followed by the treatment with drugs UNIM-401(O) + UNIM-403 (L).

In group-I, the drug UNIM-401(O) was given in the dose of two capsules (500 mg) twice daily before meals along with the local application of UNIM-403(L) on the affected parts. In group-II the patients were first subjected to Munzij and Mushil therapy followed by treatment with the oral drug UNIM-401(O) + UNIM-403 (L) as in group-I. Treatment was given for a period of three months initially, which was extended upto six months in both the groups.

In group-I, 15 new patients were registered. Out of them five completed the study. One (20.0%) patient was relieved and four (80.0%) partially relieved. Five patients were under study whereas five patients dropped out of the study.

In group-II, 22 new patients were registered, out of them nine completed the study. Three (33.3%) patients were relieved, five (55.6%) partially relieved whereas one (11.1%) patient showed no response. Six patients were under study whereas seven patients dropped out of the study.

Preliminary screening of a combination of coded drugs (UNIM-401(O)+UNIM-403(L) and 777(Oil) in the patients of plaque psoriasis (CRU, Bangalore)

Preliminary screening of a combination of coded drugs UNIM-401(O)+UNIM-403(L) and 777(Oil) was done in patients of chronic plaque psoriasis. The drug UNIM-401(O) was given in the form of two capsules (500 mg) thrice daily on empty stomach along with the local application of UNIM-403 (L) and 777 (oil) on the affected parts. The treatment was given for a period of three months which was extended up to six months.

During the reporting period, 19 new patients were registered whereas 12 patients continued from the previous year bringing a total of 31 patients studied. Out of them, 15 patients completed the study. Seven (46.7%) patients were relieved and eight (53.3%) partially relieved. Eight patients were under study whereas eight patients dropped out of the study.

Preliminary screening of a combination of coded drug UNIM-401(O)+UNIM-403(L) in Daus Sadaf (Psoriasis) patients (CRU, Bhopal)

Preliminary screening of a combination of coded drugs UNIM-401(O)+UNIM-403(L) was conducted in Daus Sadaf patients. The drug UNIM-401(O) was given in the dose of two capsule

(500 mg each) twice daily along with the local application of UNIM-403(L) at bed time. Treatment was given for a period of three months initially which was extended to 180 days.

During the reporting period, 36 new patients were registered whereas 26 patients continued from the previous year bringing a total of 62 patients studied. Out of them, 39 completed the study. Nine (23.0%) patients were relieved, 14 (35.9%) partially relieved and 15 (38.5%) patients showed no response. In one (2.6%) patient the condition worsened. Ten patients were under study whereas 13 patients dropped out of the study.

JARB (SCABIES)

Comparative study of coded drugs UNIM-401(O)+UNIM-403 (L) and Gama Benzine Hexachloride in Jarb (Scabies) patients (RRIUM, Bhadrak).

Therapeutic efficacy of coded drugs UNIM-401(O) + UNIM-403 (L) was compared with Gama Benzine Hexachloride in Jarb (Scabies) patients. The patients were divided in two groups. In Group-I, the patients were given the drug UNIM-401(O) in the dose of one capsule (500 mg each) twice daily along with the local application of drug UNIM-403 (L) at bed time for seven consecutive days. In Group-II, the drug Gama Benzine Hexachloride was applied daily for seven days. The patients were advised to take cleansing bath daily with soap and lukewarm water.

In Group-I, out of 23 patients registered, eight patients completed the study. One (12.5%) patient was cured and seven (87.5%) relieved. Fifteen patients dropped out of the study.

In group-II, 17 new patients were registered, out of which nine completed the study. All the nine patients were relieved. Eight patients dropped out of the study.

AMRAZ-E-TARSEELI (COMMUNICABLE DISEASES)

Clinical and therapeutic studies on Amraz-e-Tarseeli (Communicable diseases) including Daul Feel (Filariasis) at RRIUM Bhadrak and Patna and Iltehab-e-Kabid (Infective hepatitis) at RRIUMs, Chennai and Mumbai continued. During the reporting period, following studies were conducted.

DAUL FEEL (FILARIASIS)

Comparative clinical trial of two combinations of coded drugs UNIM-268+ UNIM-270+UNIM-271+UNIM-272 and UNIM-269+UNIM-270+UNIM-271+UNIM-272 with and without Munzij-Mushil therapy in Daul-Feel (Filariasis) patients (RRIUM, Bhadrak)

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

In Group-I, the patients were given the drug UNIM-268 in the dose of two tablets (500 mg each) twice daily along with 'Nutool' (hot wet fomentation) of the drug UNIM-271 followed by local application of the paste of the drug UNIM-270 and UNIM-272 on the affected part at bed time for a period of 80 days.

In Group-II, the patients were first subjected to Munzij-Mushil therapy followed by the treatment with the combination of the drugs as in Group-I. The Munzij drugs were given till the appearance of Nuzj in urine followed by Mushil and Tabreed drugs alternately for six days. After completion of Munzij-Mushil therapy, the patients were given the combination of the drugs (UNIM-268+UNIM-270+UNIM-271+UNIM-272) for a period of 80 days.

In Group-III, the patients were given the drug UNIM-269 in the dose of two tablets (500 mg each) twice daily along with 'Nutool' (hot wet fomentation) of the drug UNIM-271 followed by local application of the paste of the drugs UNIM-270 and UNIM-272 on the affected parts at bed time for a period of 80 days.

In Group-IV, the patients were first subjected to Munzij-Mushil therapy followed by the treatment with the combination of the drugs as in Group-II. The Munzij drugs were given till the appearance of Nuzj in urine followed by Mushil and Tabreed drug alternately for six days. After completion of Munzij-Mushil therapy, the patients were given the combination of the drugs (UNIM-269+UNIM-270+UNIM-271+UNIM-272) for a period of 80 days.

During the reporting period, 34 new patients were registered in group-I. Out of them 10 completed the study. Six patients (60.0%) were relived and four (40.0%) partially relived. Eight patients were under study whereas 16 patients dropped out of the study.

In Group-II, out of 19 patients studied, nine completed the study. Seven (77.8%) patients were relieved and two (22.2%) partially relieved. Four patients were under study whereas six patients dropped out of the study.

In Group-III, out of 34 patients studied, eight completed the study. Four (50.0%) patients were relieved, and four (50.0%) partially relieved. Eight patients were under study whereas 18 patients dropped out of the study.

In Group-IV, out of 21 patients studied, eight completed the study. Six (75.0%) patients were relieved, and two (25.0%) partially relieved. Three patients were under study whereas 10 patients dropped out of the study.

Trial of a Coded combination of drugs (UNIM-268+UNIM-270+ UNIM-271+UNIM-272) with Munzij and Mushil therapy in patients of Daul Feel (Filariasis) (RRIUM, Patna)

Therapeutic efficacy of a combination of coded drugs (UNIM-268+UNIM-270+UNIM-271+UNIM-272) with Munzij and Mushil therapy was conducted in patients of Daul Feel (Filariasis) with less than five years chronicity. The patients were first subjected to Munzij and Mushil therapy followed by the treatment with the oral and local drugs. The drug UNIM-268 was given in the dose of two tablets (500 mg each) twice daily along with 'Nutool' (hot wet fomentation) of the drug UNIM-271 followed by local application of the paste of the drugs UNIM-270 and UNIM-272 on the affected parts at bed time. Treatment was given for a period of 80 days.

During the reporting period, 22 new patients were registered whereas eight patients continued from the previous year bringing a total of 30 patients studied. Out of them 19 patients completed the study. One (5.3%) patient was relived and 15 (78.9%) partially relieved. Three (15.8%) patients showed no response. Eight patients were under study whereas three patients dropped out of the study. So far a sample size of 154 patients has been completed in the study. No drug intolerance/side effect was observed.

ILTEHAB-E-KABID (INFECTIVE HEPATITIS)

Therapeutic studies on Iltehab-e-Kabid (Infective hepatitis) continued at CRIUM, Hyderabad, RRIUMs, Chennai and Mumbai. Following studies were conducted during the reporting period.

Clinical evaluation of coded drug UNIM-105 and UNIM-115 in Iltehab-e-Kabid (Infective hepatitis) patients (RRIUM, Chennai)

Therapeutic efficacy of coded drugs UNIM-105 and UNIM-115 was evaluated in patients of Iltehab-e-Kabid (Infective hepatitis). The patients were divided in two groups. In Group-I, UNIM-105 was given in the dose of two tablets (500mg) twice daily whereas in Group-II, UNIM-115 was given in the same dose as in Group-I. In both the groups, treatment was given for a period of one month. However, the duration of treatment was extended in some cases upto six weeks.

In Group-I, during the reporting period, five patients continued from the previous year were studied and relieved completely.

In Group-II, 88 new patients were registered during the reporting period, whereas four patients continued from the previous year bringing a total of 92 patients studied. Out of them 59 completed the study. Fifty-eight (98.3%) patients were relieved and one (1.7%) patient partially relieved. So far a sample size of 102 patients has been completed in the study. In the relieved patients, the clinical sign and symptoms subsided completely and biochemical parameters including serum bilirubin, SGOT, SGPT and serum alkaline phosphatase levels attained to the normal levels.

Preliminary screening of coded drug UNIM-104 in asymptomatic Hepatitis-B carrier patients (RRIUM, Chennai)

Preliminary screening of coded drug UNIM-104 was conducted in asymptomatic Hepatitis-B carrier patients. The drug UNIM-104 was given in the dose of 5 gm twice daily for a period of 180 days. During the reporting period, two new patients were registered whereas 10 patients continued from the previous year bringing a total of 12 patients studied. Five patients completed the study but not relieved. Seven patients dropped out of the study. So far 34 patients have completed the study.

Preliminary screening of coded drug UNIM-104 in acute Hepatitis-B marker positive patients (RRIUM, Chennai)

Preliminary screening of coded drug UNIM-104 was conducted in acute Hepatitis-B marker positive patients. The drug UNIM-104 was given in the dose of 5 gm twice daily for a period of 180 days. During the reporting period, two patients were registered and completed the treatment. One patient was relieved and one partially relieved. So far a sample size of 17 patients has completed the study.

Preliminary screening of coded drugs UNIM-116 and UNIM-117 in acute Hepatitis-E marker positive patients (RRIUM, Chennai)

Preliminary screening of coded drugs UNIM-116 and UNIM-117 was conducted in two groups of acute Hepatitis-E marker positive patients. The patients were divided into two groups. In

Group-I, the drug UNIM-116 was given in the dose of 5 gm in Majoon form twice daily whereas the drug UNIM-117 was given in the dose of 10 ml twice daily. In both the groups, treatment was given for 30 days initially.

In group-I, three patients were registered. Two patients completed the study and were relieved. One patient dropped out of the study. In group-II, no patients was registered.

Preliminary screening of coded drug UNIM-115 in asymptomatic Hepatitis-B Carriers (RRIUM, Mumbai)

Preliminary screening of the coded drug UNIM-115 was conducted in asymptomatic Hepatitis-B carriers. The drug UNIM-115 was given in the dose of two tablets (500 mg each) twice daily for a period of 180 days.

During the reporting period, five new patients were registered whereas 11 patients continued from the previous year bringing a total of 16 patients studied. Out of them, 13 patients completed the study and were partially relieved, one patient was under study, whereas two patients dropped out of the study. So far a sample size of 34 patients has completed the study.

AMARZ-E-MAFASIL (MUSCULO-SKELETAL DISORDERS)

Clinical studies on patients of Amraz-e-Mafasil (Musculo-skeletal Disorders) including Waja-ul-Mafasil (Rheumatoid arthritis) and Tahajjur-e-Mafasil (Osteoarthritis) continued at CRIUM, Lucknow, and RRIUMs, Chennai and New Delhi. Following studies were conducted during the reporting period:

WAJA-UL-MAFASIL (RHEUMATOID ARTHRITIS)

Study on optimization of duration of Munzij-Mushil therapy with involvement of different Akhlat in Waja-ul-Mafasil (Rheumatoid arthritis) patients (CRIUM, Lucknow)

The study was conducted with the objective of optimizing the duration of Munzij-Mushil therapy in patients of Waja-ul-Mafasil (Rheumatoid arthritis) with the dominance of different Akhlat. The patients of Waja-ul-Mafasil (Rheumatoid arthritis) were classified as per dominance of the Khilt and accordingly Munzij drugs for Istifragh (Evacuation) of that Khilt was given. Munzij drugs were given till Nuzj appeared in urine followed by Mushil and Tabreed drugs for six days alternately. During the reporting period, 12 patients of khilt-Balgham, 25 of Khilt-e-Safra, 21 of Khilt-e-Sauda and one of Khilt-e-Dam, were registered whereas one patient of khilt-e-Balgham, two in Khilt-e-Safra, one of khilt-e-Sauda continued from the previous year, bringing a total of 63 patients studied. These patients were administered the Munzij drugs of the respective khilt till the Nuzj appeared in urine followed by Mushil and Tabreed drugs alternately for six days. The average time of appearance of Nuzj was two weeks in Balghami cases and three weeks in Saudavi and Safravi patients. So far a sample size of 60 patients in khilt-e-Balgham, 66 patients in Khilt-e-Safra, 30 patients in Khilt-e-Sauda and two patients in Khilt-e-Dam has been completed in the study.

Evaluation of therapeutic efficacy of coded drugs UNIM-318+UNIM-319 with Munzij-Mushil therapy in Waja-ul-Mafasil (Rheumatoid arthritis) patients (CRIUM, Lucknow)

Therapeutic efficacy of coded drugs UNIM-318+UNIM-319 was evaluated in 49 patients of Waja-ul-Mafasil (Rheumatoid arthritis). These patients were first subjected to Munzij-Mushil therapy followed by treatment with the oral and local drugs. Munzij drugs were given according to the dominance of the respective Khilt till Nuzj appeared in urine followed by Mushil and Tabrid drugs for six days alternately. After completion of Munzij-Mushil therapy, oral drug UNIM-318 was given in the dose of two capsules (500 mg each) thrice daily along with the local application of oil UNIM-319 at bed time. Patients were also advised to follow prescribed diet schedule. The treatment was given for a period of 90 days after completion of Munzij- Mushil therapy.

Out of the 10 patients with dominance of Khilte Balgham studied, five patients completed the study. Three (60.0%) patients were relieved, one (20.0%) partially relieved whereas one (20.0%) patient showed no response. Two patients were under study whereas three patients dropped out the study. So far a sample size of 42 patients has been completed in this study.

Out of 28 patients with dominance of Khilte Safra studied, 12 patients completed the study. Three (25.0%) patients were relieved, five (41.7%) partially relieved whereas four patients showed no response. Four patients were under study, whereas 12 dropped out of the study. A sample size of 37 patients has been completed in the study.

Out of 20 patients with dominance of Khilte Sauda studied, 12 patients completed the study. Four (33.3%) patients were relieved, five (41.7%) partially relieved whereas three (25.0%) patients showed no response. Four patients were under study, whereas four patients dropped out of the study. So far a sample size of 20 patients has completed the study.

TAHAJJUR-E-MAFASIL (OSTEOARTHRITIS)

Preliminary screening of coded drugs UNIM-318+UNIM-319 in patients of Tahajjur-e-Mafasil (Osteo-arthritis) (RRIUM, Chennai and New Delhi)

Preliminary screening of coded drugs UNIM-318+UNIM-319 was evaluated in patients of Tahajjur-e-Mafasil (Osteo-arthritis). The drug UNIM-318 was given in the dose of two capsules (500 mg each) thrice daily along with local application of UNIM-319 at bed time. The treatment was given for a period of 90 days.

During the reporting period, 46 new patients were registered whereas 11 patients continued from the previous year bringing a total of 57 patients studied. Out of them, 31 patients completed the study. Nine(29.0%) patients were relieved, 12(38.7%) partially relieved whereas 10(32.3%) patients showed no response. Seventeen patients were under study, whereas nine patients dropped out of the study. So far a sample size of 113 patients has been completed.

The drugs showed significant therapeutic response in subsiding clinical sign and symptoms including pain, swelling, tenderness and stiffness in the joints. No drug intolerance/side effect was noted.

At RRIUM, New Delhi 32 new patients were registered. Out of them 21 patients were under study, whereas 11 patients dropped out of the study.

TAKHALLUL-E-IZAM (OSTEOPOROSIS)

Preliminary screening of coded drugs UNIM-320+UNIM-321 in patients of Takhallul-e-Izam (Osteoporosis) (CRIUM, Lucknow)

Preliminary screening of coded drug UNIM-320+UNIM-321 was evaluated in patients of Takhallul-e-Izam (Osteoporosis). The drug UNIM-320 was given in the form of one capsule (500 mg) along with 4 gm of the coded drug UNIM- 321 orally twice daily for a period of 180 days.

During the reporting period, one patient was registered whereas three patients continued from the previous year bringing a total of four patients studied. Out of them, three patients completed the study. These patients showed no therapeutic response. One patient dropped out of the study. A sample size of 15 patients has so far been completed.

MARZ-E-TAJAWEEF-E-ANF (DISEASE OF SINUS)

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

Clinical study on Iltehab-e-Tajaweef-e-Anf (Sinusitis) continued at CRIUM, Hyderabad. During the reporting period, the following study was conducted:

Evaluation of therapeutic efficacy of coded drugs UNIM- 054(O) and UNIM-055(V) with and without Munzij-Mushil therapy in Iltehab-e-Tajaweef-e-Anf (Sinusitis) patients

Clinical efficacy of coded drugs UNIM- 054(O) and UNIM-055 (V) with and without Munzij-Mushil therapy in patients of Iltehab-e-Tajaweef-e-Anf (Sinusitis) was evaluated in two groups of patients. In Group-I, the patients were first subjected to Munzij-Mushil therapy followed by treatment with the drug UNIM-054(O) and UNIM-055 (V) whereas in Group-II, the patients were given the drug UNIM-054(O) and UNIM-055 (V) only. In group I Munzij-e- Balgham was given. The Munzij drugs were given till Nuzj appeared in urine followed by Mushil and Tabreed drugs for six days alternately. After completion of the Munzij-Mushil therapy, the oral drug UNIM-054 was given in the dose of two capsules (500 mg each) twice daily for 90 days. Steam inhalation of the drug UNIM-055 was also given at bed time. The patients were also advised to follow prescribed diet schedule.

In Group-I, 16 new patients were registered whereas seven patients continued from the previous year bringing a total of 23 patients studied. Out of them, four patients completed the study. Two (50.0%) patients were cured, one (25.0%) partially relieved and one (25.0%) patient showed no response. Eight patients were under study whereas 11 patients dropped out of the study.

In group-II, 56 new patients were registered during the reporting period whereas 13 patients continued from the previous year bringing a total of 69 patients studied. Twenty-two patients completed the study. Four (18.2%) patients were cured, two(9.1%) relieved, seven (31.8%) partially relieved whereas nine (40.9%) patients showed no response. Seventeen patients were under study whereas 30 patients dropped out of the study.

No drug intolerance/side effect was observed in both the groups.

AMRAZ-E-GHAIR-TARSEELI (NON-COMMUNICABLE DISEASES)

ZIABETUS SUKKARI (DIABETES MELLITUS)

Clinical studies on patients of Ziaabetus Sukkari (Diabetes mellitus) continued at CRIUM, Lucknow. The following study was conducted during the reporting period:

Evaluation of therapeutic efficacy of coded drug UNIM-220(G) as adjuvant therapy to standard Allopathic drug Metformin in Ziaabetus Sukkari (Diabetes mellitus) patients (CRIUM, Lucknow)

Therapeutic efficacy of coded drugs UNIM-220 (G) was evaluated in two groups of patients. In group-I, the drug UNIM-220(G) was given in the dose of 5 gms in granules form twice daily. In group-II, UNIM-220 (G) was given as in group-I along with one tablet of Metformin twice daily. In both the groups, treatment was given for 180 days.

In group-I, six new patients were registered during the reporting period whereas one patient continued from the previous year bringing to a total of seven patients studied. Out of them, one patient completed the study and was partially relieved. Two patients were under study whereas four patients dropped out of the study.

In group-II, nine new patients were registered during the reporting period whereas two patients continued from the previous year bringing to a total of 11 patients studied. Out of them, eight patients completed the study. Two (25.0%) patients were relieved, five (62.5%) partially relieved and one (12.5%) patient showed no response. Three patients dropped out of the study.

SAMAN-E-MUFKIT (OBESITY)

Clinical study on Saman-e-Mufrit (Obesity) continued at CRIUM, Lucknow. During the reporting period, the following study was conducted:

Evaluation of therapeutic efficacy of coded drugs UNIM-1201+UNIM-1202 patients with and without Munzij and Mushil therapy in Saman-e-Mufrit patients (CRIUM, Lucknow)

Therapeutic efficacy of coded drugs UNIM-1201+UNIM-1202 with and without Munzij and Mushil therapy was evaluated in 73 patients of Saman-e-Mufrit (Obesity). The patients were divided in two groups. In group-I, the patients were first subjected to Munzij-Mushil therapy followed by treatment with the drugs UNIM-1201+UNIM-1202. Munzij-e-Balgham was given till Nuzj appeared in urine followed by Mushil and Tabreed drugs for six days alternately. After completion of Munzij-Mushil therapy, drug UNIM-1201 was given in the dose of two capsules (500 mg each) twice daily along with 200 ml decoction of the coded drug UNIM-1202. In group-II the patients were given the drugs UNIM-1201 and UNIM-1202 as in group-I. The treatment was given for a period of six months. The patients were also advised to follow prescribed diet schedule along with modification in the lifestyle.

Out of 42 patients registered in group-I, 33 completed the study. Thirty-two (97.0%) patients partially relieved whereas one (3.0%) patient showed no response. In group-II 25 new patients were registered during the reporting period whereas six patients continued from the previous year bringing a total of 31 patients studied. Out of 31 patients studied, six completed the study.

Four (66.7%) patients were partially relieved whereas two (33.3%) patients showed no response. Sixteen patients dropped out the study, whereas nine patients were under study. A sample size of 53 patients has so far been completed in group-I and seven patients in group-II.

AMRAZ-E-QALB (CARDIAC DISEASES)

Clinical studies on Kasrat-e-Shahmuddam (Hyperlipidemia) continued at CRIUM, Hyderabad and RRIUM, New Delhi. During the reporting period, the following studies were conducted:

KASRAT-E-SHAHMUDDAM (HYPERLIPIDEMIA)

Multicentric preliminary study of coded drug UNIM-763 in Kasrat-e-Shahmuddam (Hyperlipidemia) patients (CRIUM, Hyderabad and RRIUM, New Delhi)

Preliminary screening of coded drug UNIM-763 was conducted in patients of Kasrat-e-Shahmuddam (Hyperlipidaemia). The coded drug UNIM-763 was given in the dose of two capsules (500 mg each) twice daily after meals for a period of 90 days initially. The treatment was extended up to 180 days in some cases. The patients were also advised to follow prescribed diet schedule.

At CRIUM, Hyderabad, 47 new patients were registered during the reporting period, whereas six patients continued from the previous year bringing a total of 53 patients studied. Out of them, 22 completed the study. Four (18.2%) patients were relieved, 12 (54.5%) partially relieved and six (27.3%) patients not relieved. Four patients were dropped out whereas 27 patients were under study.

In group-II six patients were registered. Four patients completed the study. Two (50.0%) patients were relieved and two (50.0%) not relieved. Two patients were under study.

At RRIUM, New Delhi, five patients were registered. One patient completed the study and was not relieved. Four patients dropped out of the study.

AMRAZ-E-NIZAM-E-HAZM (DISEASES OF DIGESTIVE SYSTEM)

TASHAHHUM-E-KABID (FATTY LIVER)

Multicentric preliminary clinical study of UNIM-104 in patients of Tashahhum- e-Kabid (Fatty liver) (RRIUMs, Chennai and New Delhi)

Preliminary screening of coded drug UNIM-104 was conducted in patients of Tashahhum-e-Kabid (Fatty liver) of grade-I and II. The drug UNIM-104 was given in the dose of 5 gm twice daily in Majoon form for a period of 90 days. The duration of treatment was initially three months which was extended to six months.

At RRIUM, Chennai, four new patients were registered during the reporting period whereas two patient continued from the previous year bringing to a total of six patients studied. Four patients completed the study. Three patients (75.0%) were relieved and one (25.0%) partially relieved. One patient dropped out of the study and one patient was under study. So far, a sample size of 29 patients has been completed in the study.

At RRIUM, New Delhi, 24 new patients were registered. Out of them 10 patients completed the study. All these patients were relieved. Thirteen patients dropped out of the study whereas one patient was under study. So far a sample size of 28 patients has been completed in the study.

Multi-centric Randomized Controlled Trials (RCTs)

A multi-centric single blind, randomized, parallel group, comparative study to compare the efficacy and safety of Coded Unani formulations UNIM-001+UNIM-003 with Psoralen in the treatment of Bars (Vitiligo) (CRIUM, Hyderabad; RRIUMs, Aligarh, New Delhi and Srinagar)

A Multi-centric clinical study to compare the efficacy and safety of Coded Unani formulations UNIM-001+UNIM-003 with Psoralen in the treatment of Bars (Vitiligo) was carried out at CRIUM, Hyderabad; RRIUMs, Aligarh, New Delhi and Srinagar. The patients were divided into two groups, one group received UNIM-001 orally in the dosage of two to four tablets (800 mg each) two to three times a day depending on the age of the patients and severity of the disease and UNIM-003 locally in lotion form for application on the affected area whereas the second group received psoralen orally two to four tablets (10 mg each) two to three times a day and Psoralen in lotion form application on the affected area. The total duration of treatment was 8 months.

During the reporting period, 133 patients were registered, out of which 106 patients were under study and 27 patients dropped out from the study.

A multi centric, single blind, randomized, parallel group study to compare efficacy and safety of coded Unani formulation UNIM 221 with Metformin in patients with Ziabetes Sukkari Qism e Sani (Diabetes Mellitus Type II) (CRIUMs, Hyderabad and Lucknow; RRIUM, Aligarh and New Delhi)

A multicentric clinical study to compare efficacy and safety of coded Unani formulation UNIM-221 with Metformin in patients with Ziabetes Sukkari Qism e Sani (Diabetes Mellitus Type II) was carried out at CRIUMs, Hyderabad and Lucknow; and RRIUMs, Aligarh and New Delhi. The patients were divided into two groups; one group received the study drug UNIM-221 in the dose of 10 gms twice daily half hour before meals while the second group received anti-diabetic drug Metformin 500 mg twice daily. The total duration of treatment was 12 weeks.

During the reporting period, 113 patients were registered, out of which 51 patients completed the study. Out of the completed patients, nine (17.6%) patients were relieved, 25 (49.0 %) patients were partially relieved and 17 (33.4 %) patients showed no relief. At the end of the reporting period, 38 patients were under study and 25 patients dropped out from the study. The test drug was found well tolerated and no adverse effect was observed.

A multi centric, single blind, randomized, parallel group study to compare efficacy and safety of coded Unani formulation UNIM-904 with Amlodipine in patients with Zaghtuddam Qawi Lazmi (Essential hypertension) (CRIUM, Hyderabad, and RRIUMs, Aligarh, Srinagar, Mumbai and New Delhi)

A multi-centric clinical study to compare efficacy and safety of coded Unani formulation UNIM-904 with Amlodipine in patients with Zaghtuddam Qawi Lazmi (Essential Hypertension) was

carried out at CRIUM, Hyderabad, and RRIUMs, Aligarh, Srinagar and New Delhi. The patients were divided into two groups; one group received the study drug UNIM-904 in the dose of five gms twice while the second group received standard anti-hypertensive drug Amlodipine five mg once daily. The total duration of treatment was 12 weeks.

During the reporting period, 72 patients were registered, out of which 24 patients completed the study. Out of the completed patients, 14 (58.3%) patients were relieved, 10 (41.7 %) patients were partially relieved. At the end of the reporting period, 14 patients were under study and 34 patients dropped out from the study. The test drug was found well tolerated and no adverse effect was observed.

A multi-centric, single blind, randomized, parallel group study to compare efficacy and safety of coded Unani formulation UNIM-118 with Silymarin in patients with Warm-e-Kabid / Acute Hepatitis A/B/C/E & Chronic Active Hepatitis B/C (CRIUM, Hyderabad and RRIUM Chennai)

A multi-centric clinical study to compare efficacy and safety of coded Unani formulation UNIM-118 with Silymarin in patients with Warm-e-Kabid / Acute Hepatitis A/B/C/E & Chronic Active Hepatitis B/C was carried out at CRIUM, Hyderabad and RRIUM Chennai. The patients were divided into two groups. One group received UNIM-118 at a dose of two tablets (500 mg each) thrice daily, the other group received Silymarin at a dose of one tablet (70 mg) thrice daily. The total duration of treatment was eight weeks for Acute Hepatitis A/ B/ C/ E and 12 weeks for Chronic Active Hepatitis B and C.

During the reporting period three patients were registered, out of which two patients completed the study and were relieved whereas one patient dropped out from the study. At the end of the reporting period no patient was under study.

Validation of Unani Pharmacopoeial Drugs

Validation of pharmacopoeal formulation *Sharbat e Faulad* in *So ul Qiniya* (CRIUM, Lucknow; RRIUMs, Aligarh and New Delhi)

A study on validation of pharmacopoeial formulation *Sharbat e Faulad* in *So ul Qiniya* was carried out at CRIUM, Lucknow; RRIUMs, Aligarh and New Delhi. The subjects received *Sharbat e Faulad* in the dose of 12 ml twice daily after meals for 12 weeks.

During the reporting period, 220 patients were registered, out of which 82 patients completed the study. Out of the 82 completed patients, 12 (14.6%) patients were relieved, 40 (48.8 %) patients were partially relieved and 30 (36.6%) patients showed no relief. At the end of the reporting period 31 patients were under study and 107 patients dropped out of the study. The test drug was found well tolerated and no adverse effect was observed.

Validation of pharmacopoeial formulations *Arq e Kasni*, *Arq e Mako* and *Sharbat e Bazoori Motadil* in *Warm e Kabid* (RRIUMs, Mumbai and Kolkata, and CRU, Kerala)

A study on validation of Pharmacopoeial formulations *Arq e Kasni*, *Arq e Mako* and *Sharbat e Bazoori Motadil* in *Warm e Kabid* was carried out at RRIUMs, Mumbai and Kolkata, and CRU,

Kerala. The subjects received *Arq e Kasni* 20 ml once a day *Arq e Mako* 20 ml once a day and *Sharbat e Bazoori Motadil* 20 ml twice a day for eight weeks.

During the reporting period, 27 patients were registered, and 17 patients completed the study. Out of the completed patients, nine (52.9%) patients were relieved, eight (47.1%) patients were partially relieved. two patients were under study and 11 patients were dropped out. The test drug was found well tolerated and no adverse effects were observed.

Validation of Pharmacopoeial formulations *Jawarish Amla* and *Habb-e-Papita* in *Kasrat-e- Ratubat-e-Hamoozi* (RRIUMs, Srinagar, Aligarh and Patna)

A study on validation of Pharmacopoeial formulations *Jawarish Amla* and *Habb-e-Papita* in *Kasrat- e- Ratubat-e-Hamoozi* was carried out at RRIUMs, Srinagar, Aligarh and Patna. The subjects received *Jawarish Amla* 10 gms twice daily and *Habb-e-Papita* two pills twice daily after meals for six weeks.

During the reporting period, 111 patients were registered, out of which 82 patients completed the study. Out of the completed patients, 45 (54.9%) patients were relieved, 35(42.7%) patients were partially relieved whereas 2 (2.4%) patients showed no relief. At the end of reporting period, 21 patients were under study and eight patients dropped out of the study. The test drug was found well tolerated and no adverse effects were observed.

Validation of Pharmacopoeial formulations *Habb-e-Rasaut*, *Hab-e-Muqil*, *Majoon Muqil*, *Marham Saeeda Chob Neem Wala* in *Bawaseer-e-Damiya* (RRIUMs, New Delhi, Bhadrak and Kolkata, and CRU, Kurnool)

A study on validation of Pharmacopoeial formulations *Habb-e-Rasaut*, *Hab-e-Muqil*, *Majoon Muqil*, *Marham Saeeda Chob Neem Wala* in *Bawaseer-e-Damiya* was carried out at RRIUMs, New Delhi, Bhadrak and Kolkata, and CRU Kurnool. The subjects received *Habb-e-Rasaut* and *Hab-e-Muqil* orally in the dose of two tablets of each twice daily. *Majoon Muqil* was given orally in the dose of 10 gms once daily. *Marham Saeeda Chob Neem Wala* was applied locally. The duration of treatment was six weeks.

During the reporting period, 157 patients were registered, of which 78 patients completed the study. Out of the completed patients, 25 (32.1%) patients were relieved, 50 (64.1%) patients were partially relieved and three (3.8%) patients showed no relief. Twenty four patients were under study and 55 patients dropped out of the study. The test drug was found well tolerated and no adverse effect was observed.

Validation of Pharmacopoeial formulations *Majoon Ushba* and *Arq Murakkab Musaffi Khoon* in *Busoor e Jild* (RRIUM, Bhadrak, RRC Allahabad, CRUs, Bangalore and Burhanpur)

A study on validation of Pharmacopoeial formulations *Majoon Ushba* and *Arq Murakkab Musaffi Khoon* was carried out at RRIUM, Bhadrak, RRC Allahabad, CRUs, Bangalore and Burhanpur. The subjects received *Majoon Ushba* orally in the dose of 12 gms daily and *Arq Murakkab Musaffi Khoon* orally in the dose of 25 ml twice daily. The duration of treatment was six weeks.

During the reporting period 142 patients were registered, out of which 91 patients completed the study. Out of the completed patients, 56 (61.5%) patients were relieved, 33 (36.3%) patients

were partially relieved and two (2.2%) patients showed no relief. 14 patients were under study and 37 patients were dropped out of the study. The test drug was found well tolerated and no adverse effect was observed.

Validation of Pharmacopoeial formulations *Safoof e Mughalliz e Mani, Majoon Arad e Khurma* and *Hab e Akseer e Shifa* in Sura't Inzaal (RRC Allahabad, CRUs, Burhanpur and Meerut)

A study on validation of Pharmacopoeial formulations *Safoof e Mughalliz e Mani, Majoon Arad e Khurma* and *Hab e Akseer e Shifa* was carried out at RRC Allahabad, CRUs, Burhanpur and Meerut. The subjects received *Safoof e Mughalliz e Mani* seven gms once a day, *Majoon Arad e Khurma* 10 gms once a day and *Hab e Akseer e Shifa* one tablet daily for six weeks.

During the reporting period 275 patients were registered, out of which 116 patients completed the study. Out of the completed patients, 79 (68.1%) patients were relieved, 34 (29.3%) patients were partially relieved and three (2.6%) patients showed no relief. One hundred forty three patients were under study and 16 patients dropped out of the study. The test drug was found well tolerated and no adverse effect was observed.

Validation of Pharmacopoeial formulations *Majoon Suranjan* and *Safoof Suranjan* orally and *Roghan Suranjan* locally in *Waja ul Mafasil* (CRIUM, Lucknow; RRIUMs, Chennai and Patna; and CRUs, Bangalore and Kerala)

A study on validation of Pharmacopoeial formulations *Majoon Suranjan* and *Safoof Suranjan* and *Roghan Suranjan* was carried out at CRIUM, Lucknow; RRIUMs, Chennai and Patna; and CRUs, Bangalore and Kerala. The subjects received *Majoon Suranjan* seven gms, *Safoof Suranjan* six gms twice a day orally and *Roghan Suranjan* for local application. The duration of the treatment was 12 weeks.

During the reporting period, 176 patients were registered, out of which 124 patients completed the study. Out of the completed patients, 31 (25.0%) patients were relieved, 77 (62.1%) patients were partially relieved and 16 (12.9%) patients showed no relief. Fourteen patients were under study and 38 patients were dropped out of the study. The test drug was found well tolerated and no adverse effects were observed.

Validation of Pharmacopoeial formulation *Tiryaaq e pechish* in *Zaheer* (RRIUM New Delhi and CRU Meerut)

A study on validation of Pharmacopoeial formulation *Tiryaaq e pechish* in the patients of *Zaheer* was carried out at RRIUM, New Delhi and CRU, Meerut. The subjects received *Tiryaaq e pechish* five gms twice daily for one week.

During the reporting period, 29 patients were registered, out of which 22 patients completed the study. Out of the completed patients, five (22.7%) patients were relieved, 17 (77.3%) patients were partially relieved. Seven patients were dropped out of the study. The test drug was found well tolerated and no adverse effect was observed.

Validation of Pharmacopoeial formulation Majoon Nisyan in Nisyan (CRIUM Hyderabad, and RRIUM Chennai and Mumbai)

A study on validation of Pharmacopoeial formulation Majoon Nisyan was carried out at CRIUM Hyderabad, and RRIUMs Chennai and Mumbai. The subjects received Majoon Nisyan seven gms once a day for a period of 12 weeks.

During the reporting period, 113 patients were registered, out of which 84 patients completed the study. Out of the completed patients, 59 (70.2%) patients were relieved, 14 (16.7%) patients were partially relieved and 11 (13.1%) patients showed no relief. Fourteen patients were under study and 15 patients were dropped out from the study. The test drug was found well tolerated and no adverse effect was observed.

Validation of Pharmacopoeial formulations Majoon Filasafa and Majoon Masikul Baul in Zof e Masana (CRIUMs, Hyderabad and Lucknow)

A study on validation of Pharmacopoeial formulations Majoon Filasafa and Majoon Masikul Baul was carried out at CRIUMs, Hyderabad and Lucknow. The subjects received Majoon Filasafa and Majoon Masikul Baul in the doses of seven gms each in the morning for 12 weeks.

During the reporting period 40 patients were registered, out of which 29 patients completed the study. Out of the completed patients, 12 (41.4%) patients were relieved, 14 (48.3%) patients were partially relieved and three (10.3%) patients showed no relief. Four patients were under study and seven patients dropped out of the study. The test drug was found well tolerated and no adverse effect was observed.

Validation of Pharmacopoeial formulations Majoon Kundur, Jawarish Zarooni and Arq-e-Badiyan in Zof e Masana (CRIUM Hyderabad)

A study on validation of Pharmacopoeial formulations Majoon Kundur, Jawarish Zarooni and Arq-e-Badiyan was carried out at CRIUM Hyderabad. The subjects received Majoon Kundur, Jawarish Zarooni and Arq-e-Badiyan in a dose of seven gms once a day, seven gms twice a day and 20 ml twice a day respectively for a period of 12 weeks.

During the reporting period, 30 patients were registered, of which 19 patients completed the study. Out of the completed patients, nine (47.4%) patients were relieved, seven (36.8%) patients were partially relieved and three (15.8%) patients showed no relief. Three patients were under study and eight patients dropped out of the study. The test drug was found well tolerated and no adverse effect was observed.

Clinical Validation of Pharmacopoeial formulation Qurs e Deedan in Deedan e Ama (Helminthiasis) (CRIUM, Lucknow and RRIUM, Kolkata)

A study on validation of Pharmacopoeial formulation Qurs e Deedan was carried out at CRIUM Lucknow and RRIUM Kolkata. The subjects received Qurs-e-Deedan one Tablet (250 mg) twice daily before meals with water for a period of 2 weeks

During the reporting period, five patients were registered, out of which two patients completed the study and were relieved. Three patients were under study and there were no dropouts in the study.

Clinical Validation of Pharmacopoeial formulation Jawarish Ood Shireen in Zof e Ishtiha (CRU, Meerut)

A study on validation of Pharmacopoeial formulations Jawarish Ood Shireen was carried out at CRU, Meerut. The subjects received Jawarish Ood Shireen in the doses of five gms twice a day before meals with water for a period of two weeks.

During the reporting period, 13 patients were registered, out of which 10 patients completed the study. Out of the completed patients, seven (70.0%) patients were relieved, two (20.0%) patients were partially relieved and one (10%) patient showed no relief. Three patients were under study and there were no dropouts in study. The test drug was found well tolerated and no adverse effect was observed.

Clinical validation of Pharmacopoeial formulation Sharbat e Ejaz in Surfa e Yaabis (Dry Cough) (CRU, Meerut)

A study on validation of Pharmacopoeial formulations Sharbat e Ejaz was carried out at CRU Meerut. The subjects received Sharbat e Ejaz in the dose of 20 ml twice a day mixed with 40 ml of lukewarm water for a period of two weeks.

During the reporting period, two patients were registered; both patients completed the study and were relieved. There were no dropouts in study.

Clinical validation of Pharmacopoeial formulations Itrifal shahatra, Aab e Neem and Marham Kharish Jadeed in Jarab wa Hikka (RRIUM, Bhadrak)

A study on validation of Pharmacopoeial formulations Itrifal shahatra, Aab e Neem and Marham Kharish Jadeed was carried out at RRIUM, Bhadrak. The subjects received Itrifal Shahatra six gms twice daily with water after meals. The affected area was washed with Aab e Neem before application of Marham Kharish Jadeed twice daily for a period of two weeks.

During the reporting period, three patients were registered, out of which one patient completed the study and was relieved. Two patients were under study and there were no dropouts in study.

Clinical Validation of Pharmacopoeial formulations Jawarish Kamooni and Arq e Badiyan in Su e Hazm (Dyspepsia) (CRUs, Meerut and Kurnool)

A study on validation of Pharmacopoeial formulations in Jawarish Kamooni and Arq e Badiyan was carried out at CRUs, Meerut and Kurnool. The subjects received Jawarish Kamooni five gms twice daily and Arq e Badiyan 60 ml twice daily with water after meals for two weeks.

During the reporting period, 13 patients were registered, out of which five patients completed the study. Out of the completed patients, two (40.0%) patients were relieved, two (40.0%) patients were partially relieved and one (20.0%) patient showed no relief. Eight patients were under study and there were no dropouts in the study.

Studies initiated:

During the reporting period, the following clinical validation studies were also initiated in different centres of the Council.

- i) Clinical validation of Unani Pharmacopoeial formulation Qurse Ziabetus Khas in Ziabetus (Diabetes Mellitus Type -II)
- ii) Clinical validation of Unani Pharmacopoeial formulation Kushta Khubs ul Hadeed and Habb e Marwareed in Sailan-ur-Reham (Leucorrhoea),
- iii) Clinical validation of Unani Pharmacopoeial formulations Majoon e Suranjan and Habb e Azaraqi in Niqras (Gout),
- iv) Clinical validation of Unani Pharmacopoeial formulation Dawaul Misk Motadil Sada in Khafqan (Palpitation),
- v) Clinical Validation of Unani Pharmacopoeial formulation Safoof Hajrul Yahoood in Hisatul Kulyah (Nephrolithiasis)

Validation of Pharmacopoeial Fast-acting Drugs

During the reporting period, the Council initiated the programme of validating the efficacy and safety of some Pharmacopoeial fast-acting drugs in different disease conditions at five clinical centres.

Validation of four Pharmacopoeial drugs was initiated in three disease conditions, *Nazla-e- Har* (common cold), *Waja-ul- Mafasil* (Joint pain) and *Sual-e- Ratab* (Productive cough). The following studies were conducted:

Validation of Unani Pharmacopoeial formulation- *Habb-e- Shifa* for symptomatic relief in patients of *Nazla-e- Har* (Common Cold) (RRIUMs, Mumbai, Chennai, Bhadrak and Patna, and CRU, Kurnool)

Clinical Validation of Unani Pharmacopoeial formulation- *Habb-e- Shifa* was conducted in the patients of *Nazla-e- Har* (Common Cold) at RRIUMs, Mumbai, Chennai, Bhadrak and Patna, and CRU, Kurnool. The drug *Habb-e- Shifa* was given orally in the dose of 1-2 pills (according to body weight, one tablet in patients with body weight less than 50 kg and two tablets in patients with body weight more than 50 kg twice daily. The treatment was given for a period of seven days.

During the reporting period, 348 patients were registered, out of which 267 completed the study. Out of 267 patients completed the study, 165 (61.79%) patients were relieved, 84 (31.46%) patients partially relieved whereas 18 (6.74%) patients showed no response. Seventy eight patients dropped out of the study and three patients were under study at the end of reporting period. The test drug was found well-tolerated and no adverse effect was observed.

Clinical Validation of analgesic effect of Unani Pharmacopoeial formulations- *Habb-e-Suranjan* and *Raughan-e-Suranjan* in patients of *Waja-ul-Mafasil* (Joint Pain) (RRIUMs, Mumbai, Chennai, Bhadrak and Patna, and CRU, Kurnool)

Clinical Validation of analgesic effect of Pharmacopoeial formulations- *Habb-e-Suranjan* and *Raughan-e-Suranjan* was conducted in patients of *Waja-ul-Mafasil* (Joint Pain) at RRIUMs,

Mumbai, Chennai, Bhadrak and Patna, and CRU, Kurnool. The drug *Habb-e-Suranjan* was given orally in the dose of two pills after meal thrice daily. The lukewarm *Raughan-e-Suranjan* (oil) was applied locally twice a day on the affected joint(s). The treatment was given for a period of 14 days.

During the reporting period, 340 patients were registered, out of which 281 patients completed the study. Out of the completed patients, 163 (58.0%) patients were relieved, 103 (36.7%) patients were partially relieved whereas 15 (5.3%) patients showed no response. Fifty six patients dropped out of the study and three patients were under study at the end of the reporting period. The test drug was found well-tolerated and no adverse effect was observed.

Clinical validation of Unani Pharmacopoeial formulation- *Sharbat Zufa Murakkab* in patients of *Sual Ratab* (Productive Cough) (RRIUMs, Mumbai, Chennai, Bhadrak and Patna, and CRU, Kurnool)

Clinical Validation of Unani Pharmacopoeial formulation- *Sharbat Zufa Murakkab* was conducted in the patients of *Sual Ratab* (Productive Cough) at RRIUMs, Mumbai, Chennai, Bhadrak and Patna, and CRU, Kurnool. The drug *Sharbat Zufa Murakkab* was given orally in the dose of 10 ml three times a day with lukewarm water. The treatment was given for a period of 14 days.

During the reporting period, 229 patients were registered, out of which 178 patients completed the study. Out of completed patients, 114 (64.0%) patients were relieved, 52 (29.2%) partially relieved whereas 12 (6.7%) patients showed no response. Thirty six patients dropped out of the study and 15 patients were under study at the end of reporting period. The test drug was found well-tolerated and no adverse effect was observed.

Validation of Regimenal Therapies

Apart from pharmacotherapy, Unani Medicine also offers Ilaj-bit-Tadabeer (Regimenal therapies) such as Hijama (cupping), Qai (vomiting), Riyazat (exercise), Taleeq (leeching), etc. for certain conditions. During the reporting period, clinical validation on Hijama (Cupping) was done in patients of Waja-ul Mafasil (Rheumatoid Arthritis) and Tahajjur-e Mafasil (Osteo Arthritis) at RRIUMs Chennai and Patna. A total of 76 patients were subjected to the study. Forty five (59.2%) patients responded to the treatment. Taleeq (leeching) was applied in 12 patients of alopecia, nine patients of frost bite and seven patients of vitiligo at RRIUM, Srinagar. Significant therapeutic effect of Taleeq was observed in the patients.

Validation of Fundamentals

Theory of Akhlat wa Mizaj (Humours and temperaments)

The objective of the project is to test scientifically the concept of Akhlat (Humours) and Mizaj (Temperament), 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 clinical assessment of mizaj (temperament) in different diseases and scientifically establishing correlation among them.

During the reporting period, assessment of temperaments of 4,396 patients attending the OPD of CRIUM, Hyderabad was done. These included 3,947 patients of Bars (Vitiligo), 178 of Daus Sadaf (Psoriasis), 51 of Kasrat-e-Shahmuddam (Hyperlipidemia), 42 of Ziabetus Sukkari (Diabetes mellitus), 45 of Zof-e-Masana (Over active bladder), nine of Nisyan (Amnesia), 26 of Iltehab-e- Kabid (Infective hepatitis) and 25 of Zaghtuddam Qawi Lazmi (Essential hypertension) and 73 of Iltehab-e-Tajaweef Anf (Sinusitis).

In Bars, 1323 (33.5%) patients showed damavi temperament, 2567 (65.0%) showed balghami temperament and 57 (1.4%) showed safravi temperament. In Daus Sadaf 82 (46.1%) were damavi, 28 (15.7%) balghami, 20 (11.2%) safravi and 48 (27.0%) were of saudavi temperament. Out of 51 patients in Kasrat-e-Shahmuddam 48 (94.1%) were of balghami temperament and three (5.9%) of damavi temperament.

In Ziabetus Sukkari, out of 42 patients 24 (57.1%) were of damavi temperament and 18 (42.9%) balghami. In Zof-e-Masana 30 (66.7%) were of balghami temperament, nine (20.0%) safravi, five (11.1%) damavi and one (2.2%) saudavi. In Nisyan one (11.1%) patient was of damavi temperament, six (66.7%) balghami and two (22.2%) patients were safravi. In Iltehab-e-Kabid five (19.2%) patients were of damavi temperament, nine (34.6%) balghami and 12 (46.2%) safravi. In Zaghtuddam Qawi Lazmi six (24.0%) patients were of damavi temperament, 17 (68.0%) balghami and two (8.0%) safravi. In Iltehab-e-Tajaweef Anf (Sinusitis), 55 (75.3%) patients were of balghami temperament, 14 (19.2%) damavi and four (5.4%) Safravi. In these patients, susceptibility for acquiring diseases in relation to different temperaments was also studied. An interim analysis of data revealed that patients of balghami (Phlegmatic) temperament were more susceptible to Bars (Vitiligo) followed by Damavi (Sanguine), Safravi (Bilious) and Saudavi (melancholic) temperaments. Similarly, persons of balghami (Phlegmatic) temperament were most susceptible to Iltehab-e-Tajaweef-e-Anf (Sinusitis) followed by Damavi (Sanguine) temperament. Patients of Damavi temperament were most susceptible to diabetes mellitus and essential hypertension. Physiological studies were also conducted in patients of essential hypertension and diabetes mellitus where a number of physiological parameters such as pulmonary function test, bicycle ergometry, electrocardiography, anthropometric measurements, hand grip and other related tests such as skin fold thickness, and blood viscosity were carried out. Response to the treatment in relation to the temperament of the patients correlating the clinical and physiological parameters was also studied. The following projects were completed during the reporting period.

Scientific relevance to the theory of akhlat (humours) in relation to Zaghtuddam Qawi (Essential Hypertension) (CRIUM, Hyderabad)

Scientific relevance to the theory of Akhlat (Humours) in relation to Zaghtuddam Qawi (Essential Hypertension) was conducted at CRIUM, Hyderabad. A total number of 131 patients completed the study during the reporting period. The dominant temperament observed as damavi followed by balghami, safravi and saudavi. It may be inferred that essential hypertension is related to dominance of damvi. Statistics of the laboratory parameters (bio-chemical, physiological and pathological) were in the process. Correlation will be done with dominant temperament after obtaining statistical data.

Scientific relevance to the theory of akhlat (humours) in relation to Ziabetus Sukkari (Diabetes mellitus), (CRIUM, Hyderabad)

Scientific relevance to the theory of Akhlat (Humours) in relation to Ziabetus Sukkari (Diabetes mellitus) was conducted at CRIUM, Hyderabad. A total number of 122 patients completed the study during the reporting period. The dominant temperament observed were damavi followed by balghami, safravi and saudavi. It may be inferred that Diabetes Mellitus is related to dominance of Dam. Correlation will be done with dominant temperament after obtaining statistical data.

The following new projects were also initiated during the reporting period:

- Genetic studies on theory of humours with special reference to diabetes mellitus, essential hypertension.
- Genetic studies on theory of humours with special reference to vitiligo.
- Genetic studies on theory of humours with special reference to hepatitis.
- Genetic studies on theory of humours with special reference to cancer and other diseases.
- Genetic studies on theory of humours with special reference to healthy volunteers.
- Pharmacogenomics of Unani formulations in vitiligo.

Research-oriented Healthcare

General Out-Patient Department (GOPD) Programme

The objective of the GOPD programme is to provide treatment to the patients desirous of taking Unani treatment for common and chronic ailments besides getting feed-back for research. During the reporting period, this programme continued at Central Research Institutes of Unani Medicine (CRIUMs), Hyderabad and Lucknow; Regional Research Institutes of Unani Medicine (RRIUMs) Chennai, Bhadrak, Patna, Aligarh, Mumbai, Srinagar, Kolkata and New Delhi; Regional Research Centres, Allahabad and Silchar (with an extension at Karimganj); Clinical Research Units (CRUs), Bangalore, Bhopal, Burhanpur, Meerut, Kurnool and Edathala (with satellite centre at Kumbalangi); and Clinical Research Pilot Project, Manipur. During the reporting period, a total of 2,81,747 new patients were treated at different centres. These patients were studied for assessment of their temperaments and other various factors responsible for occurrence of the disease and accordingly Unani treatment was prescribed. In the treatment to these patients classical/Pharmacopoeial drugs were used.

Mobile Clinical Research Programme

The Mobile clinical research programme of the Council aims at providing health care to the population residing 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 provide health care through

Unani Medicine to the suffering population at their door steps. Besides, health awareness is propagated among the population under coverage particularly the women through health lectures by the visiting physicians on the preventive, promotive and curative health aspects. This programme continued at Central Research Institutes of Unani Medicine (CRIUM), Hyderabad and Lucknow; Regional Research Institutes of Unani Medicine (RRIUM), Chennai, Bhadrak, Patna, Aligarh, Mumbai, New Delhi and Srinagar; Regional Research Centre (RRC), Allahabad; and Clinical Research Unit (CRU) Burhanpur. During the reporting period, 31 pockets were covered and a total of 39,054 patients were treated with Unani classical/pharmacopoeial drugs.

3.1.2.4. LITERARY RESEARCH PROGRAMME

During the reporting period, literary research continued at Literary Research Institute of Unani Medicine, New Delhi. Besides translation of classical text available in Arabic/Persian to Urdu, reprinting of rare books and compilation of text/reference book, etc. continued in the institute. Urdu translation of Persian book *Muheet-i Azam Volume III* was published. Besides, Urdu translation of Persian books *Muheet-i Azam Volume IV* & *Iksir-i Azam Volume II* and vetting of Urdu translation of Arabic books *Tazkirat Uli al-Albab Volume II* and *Minhaj al-Dukkan* was continued. Hindi translation of 'Unani Pharmacopoeia of India' Part I, volume I also continued.

Under the programme of reprinting rare books, *Kitab al- Mi'a fi't Tib* volume I was reprinted. The book comprises first twenty chapters of *Abu Sahl Masihi's* (d.1010 A.D.) *al- Mi'a fi-l-sanâ'a al-tibbi'iyyah*, an encyclopedic treatise on medicine comprising of total one hundred chapters.

The council also published the first volume of *Standard Unani Treatment Guidelines for Common Diseases*. The volume carries description on treatment of 70 commonly occurring diseases of different body systems. This work being in English can be regarded as first in its kind that presents vital information about various diseases gathered from classical sources. Another important publication of the reporting period was *Qamus Asma al-Advia* (Dictionary of Single Drugs of Unani Medicine). The dictionary defines more than 7,000 names of Unani single drugs collected from 42 different languages. The distinguishing feature of the dictionary is its mentioning of scientific name of each drug.

Abstracting of articles of *Jahan-i-Tib* in English continued and 115 articles were abstracted during the reporting period. Besides, compilation and critical review of classical Unani literature on *Nisyan* and *Sartan* also continued at the institute.

3.2. EXTRAMURAL RESEARCH

The Department of AYUSH initiated extra-mural research scheme (EMR) with a view to provide funds to established institutions for research in priority areas. The Department has taken up a series of programmes/ interventions wherein evidence-based support for the efficacy claims is needed. Safety, quality control and consistency of products are also very much required. The scheme was later transferred to respective research councils of AYUSH, and they were declared Directorate of EMR Scheme for projects related to their systems for evaluation and monitoring of projects where as the financial part remained to be taken care of by the Department of AYUSH. The objectives of EMR scheme are:

- Development of Research and Development (R & D) based AYUSH drugs for prioritized diseases;

- To generate data on safety, standardisation and quality control for AYUSH products and practices;
- To develop evidence-based support for 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 potential Human Resource in AYUSH systems, especially to inculcate scientific aptitude and expertise relating to AYUSH systems;
- To develop joint research ventures among the AYUSH Department and other organizations/institutes.

In the year 2013-14, six projects related to Unani Medicine were completed, 26 were ongoing and three were allotted. The following EMR projects continued during the reporting period.

S. No.	Title of the Project	Institution
1.	Anti-leishmanial activity of Unani drugs against <i>Leishmania donovani</i> <i>in vitro</i> and <i>in vivo</i> .	Department of Toxicology & Elementology, Faculty of Science, JamiaHamdard, New Delhi
2.	Study of Nabz (Radial Pulse) Wave Form and its Physiological variations in different temperaments by a self-designed pulse wage detection module	Department of Kulliyat, Ajmal Khan Tibbiya College, Aligarh Muslim University, Aligarh
3.	Therapeutic and prophylactic potential of herbal drug in protection of chronic heart failure.	Department of Physiotherapy and Rehabilitation, Jamia Millia Islamia, New Delhi
4.	Development of quality standards and clinical evaluation of a herbomineral formulation used in Urolithiasis.	Department of Ilmul Jarahat, Faculty of Medicine (Unani), Jamia Hamdard, New Delhi
5.	Scientific validation of Mizaj-e-Advia (Temperament of Drugs).	Department of Kulliyat, Ajmal Khan Tibbiya College, Aligarh Muslim University, Aligarh
6.	Study of some Unani compound drugs in experimentally induced Hepatitis like condition with an aim to explore their protective, curative and regenerative potential.	Department of Ilmul Advia, Ajmal Khan Tibbiya College, Aligarh Muslim University, Aligarh

S. No.	Title of the Project	Institution
7.	Studies on the prevention of Parkinson's disease by some Unani drugs in animals.	Department of Toxicology & Elementology, Jamia Hamdard, New Delhi
8.	Clinical trial of a Unani formulation in the patients of Menorrhagia in reproductive age group.	Department of Qabalat-wa-Amraz-e-Niswan, Ajmal Khan Tibbiya College, Aligarh Muslim University, Aligarh
9.	Protective effects of Unani drugs against Liver toxicity.	Department of Toxicology & Elementology, Jamia Hamdard, New Delhi
10.	Isolation and purification of active compounds with anti-leishmanial activity of Unani medicinal plants.	Department of Clinical Microbiology, All India Institute of Medical Sciences, New Delhi
11.	Spermatozoa DNA damage in infertile males: Protective effect of Unani preparation.	Department of Biochemistry, Chhatrapati Shahuji Maharaj Medical University, Lucknow
12.	Clinical efficacy of Unan polyherbal formulation in <i>Helicobacter pylori</i> positive antral gastritis (Warm-e-Meda)- A controlled study.	Department of Ilmul Jarahat, Ajmal Khan Tibbiya College, Aligarh Muslim University, Aligarh
13.	Single blind randomized controlled clinical trial of Unani formulation in cholasma/ melasma.	Department of Ilmul Advia, Ajmal Khan Tibbiya College, Aligarh Muslim University, Aligarh.
14.	Investigation of Anti-HIV Potential of Some Herbal Plants- <i>Adhatoda vasica</i> , <i>Boerhaavia diffusa</i> , <i>Cephalandra indica</i> and <i>Nardostachys jatamansi</i> from Indian subcontinent.	Department of Biosciences, Jamia Millia Islamia, New Delhi
15.	Screening of Anticancer potential of Indian Medicinal plants.	Department of Biosciences, Jamia Millia Islamia, New Delhi
16.	To study the bronchodilator and anti-inflammatory property of <i>Nigella sativa</i> in patients of Bronchial Asthma.	Department of TB & Chest Medicine, Jawahar Lal Nehru Medical College, Aligarh Muslim University, Aligarh
17.	Translation, Editing and Collation of Al Qanoon Fil Tib.	Department of Kulliyat, Ajmal Khan Tibbiya College, Aligarh Muslim University, Aligarh

S. No.	Title of the Project	Institution
18.	Phytochemical screening and anti-hyperlipidemic evaluation of some medicinal plants from Kashmir (Himalaya).	Department of Pharmaceutical Sciences, University of Kashmir, Hazratbal, Srinager
19.	Comparative evaluation and synergism in hypoglycemic activity of <i>Cichorium intybus</i> Linn. and <i>Swertia chirata</i> Buch.	Allana College of Pharmacy Azam Campus Pune
20.	Development of herbal formulation from drugs used in Unani System of Medicine for <i>Acne vulgaris</i> (Basoor-e-Labniyah).	Department of Pharmaceutical Chemistry, Faculty of Pharmacy, Jamia Hamdard, New Delhi
21.	Genotyping of Unani system based temperament (Mizaj) groups by RAPD fingerprinting.	Department of Zoology, Faculty of Science, Aligarh Muslim University, Aligarh
22.	Experimental studies on the cellular and molecular mechanism of action of UNIM-352, polyherbal Unani formulation, to validate its use as a drug for bronchial asthma.	Department of Pharmacology, V. P. Chest Institute, University of Delhi, Delhi
23.	Applicability and cost-effectiveness of LAMP based technology as a tool for the authentication of medicinal plants.	Department of Ilmu Advia, Faculty of Medicine, Jamia Hamdard, New Delhi.
24.	Preparation of electronic herbarium and digital database of the medicinal plants of Unani Formulations.	Department of Botany, Faculty of Science, Jamia Hamdard, New Delhi
25.	Classical methods of Tadbeer (Detoxification) of toxic Unani drugs and their comparative chemical analysis.	Department of Ilmu Advia, Jamia Hamdard, New Delhi
26.	Identification of effective products of Unani medicine through innovative analysis.	Indian Council for Medical Research, Ansari Nagar, New Delhi
27.	Classification of human population based on HLA Gene polymorphism and concept of mizaj (temperament) in Unani system of medicine	Department of Physiology, ZVM Unani medical College, Azam Campus, Pune

S. No.	Title of the Project	Institution
28.	Investigation of Anti-Cancer activities of some selected medicinal plants and their molecular targets oral cancer cell lines	Department of Biotechnology All India Institute of Medical Science New Delhi
29.	Efficacy of Majoon Ushba, a Unani formulation with reference to biochemical and immunological parameters in the management of Rheumatoid Arthritis (Waja-ul- mafasil)- an experimental study	School of Biosciences and Technology, VIT university, Vellore

During the reporting period (2013-14), six EMR projects were completed. The findings of these projects are as follows:

1.	Title of the Project	Analysis of efficacy of <i>in vitro</i> raised plant (<i>Catharanthus roseus</i>) extracts in protecting chemically induced carcinogenesis in model rat.
	Institution	Department of Botany, Faculty of Science, Jamia Hamdard, New Delhi
	Summary	The study was aimed to analyse the field grown <i>Catharanthus roseus</i> and the <i>in vitro</i> raised plant tissue extract for protective anti-cancer activity in animal models. It is observed that the field grown <i>Catharanthus roseus</i> plant and <i>in vitro</i> raised plant tissue extracts showed significant protective effect on diethyl nitrosamine (DEN) induced carcinogenesis in model rat. The enhanced recovery/ activity may be due to the presence of vincristine and vinblastine alkaloids present in plant tissues. The <i>in vitro</i> raised leaf extracts was more efficient compared to plant extracts obtained from other tissues.
2.	Title of the Project	Therapeutic efficacy and safety evaluation of selected Unani drugs in the treatment of Rheumatoid Arthritis: an experimental study
	Institution	Department of Biochemistry, University College of Medical Sciences, University of Delhi, Delhi
	Summary	Therapeutic efficacy and safety of two Unani drugs Majoon Suranjan (MS) and Habb-e-Asgand (HA) was evaluated in

		experimentally induced Rheumatoid Arthritis. Majoon Suranjan (MS) and Habb-e-Asgand (HA) did not show any significant effects in the behavioral profile or any other parameters in experimental animals in acute and chronic toxicity studies. Both MS and HA have significantly reduced the levels of RF as well as anti-CCP antibodies and the results were comparable to that of standard treatment methotrexate (MTX). Treatment with MS and HA resulted in a significant decrease in antinuclear antibodies, suggesting a decreased inflammatory response. These formulations have also led to a significant reduction in oxidative stress in comparison to collagen induced arthritic (CIA) rats.
3.	Title of the Project	Pharmacological evaluation and safety profile of Unani antioxidant and hepato-protective drugs
	Institution	Department of Pharmacognosy and Phytochemistry, Faculty of Pharmacy, Jamia Hamdard, New Delhi
	Summary	The study was aimed to evaluate the pharmacological and toxicological profile of some Unani antioxidant and hepato-protective drugs experimentally. Studies of UNIM-104, Aab-e-Murawwaqain, Aab-e-Turb, Aaloo Bukhara, Tamar Hindi, Jawarish Amla, Sugarfree Capsule of Jawarish Amla were carried out to evaluate the toxicity of the drugs in a single dose (2000mg/kg body weight p.o.). The extracts do not cause any significant behavioral changes in the animals challenged with the any of the formulations and all formulations were safe for oral administration in both male and female animals in acute and chronic toxicity. The phyto-chemical screening of Zanjabeel, Katha Safed, Jawarish Amla, Khamira Aabresham, Khamira Marwareed has showed presence of various bioactive component. The reducing power (antioxidant property) of all the drugs was very potent and the power of the extract was increased with quantity of sample. Hepatoprotective activity of UNIM-104, Aab-e-Murawwaqain, Aab-e-Turb, Aaloo Bukhara, Tamar Hindi, Jawarish Amla, Sugarfree capsule of Jawarish Amla were evaluated and compared for their efficacy as hepatoprotective agent in CCL ₄ intoxicated rat model. The doses of formulation used in the study were evaluated to precisely match with human doses. The statistically significant reduction in the serum biochemical markers observed with the all tested drugs. But Jawarish Amla and its sugar free pellets indicate significantly superior hepato-protective activity than the other tested drugs.

4.	Title of the Project	A comparative study of a new Unani formulation with Majoon Suranjan against experimental arthritis
	Institution	Department of Toxicology and Elementology, Faculty of Pharmacy, Jamia Hamdard, New Delhi.
	Summary	The objective of the study was to compare the efficacy of a new Unani formulation with Majoon Suranjaan. The new formulation was planned with three ingredients (<i>Nigella sativa</i> , <i>Trachyspermum ammi</i> and <i>Trigonella foenum-graecum</i>). These ingredients were procured, and tested for quality and physico-chemical standards. Thereafter, these ingredients were evaluated for anti-arthritic property in collagen type II induced arthritis (CIA) in Wister rats. <i>Nigella sativa</i> and <i>Trigonella foenum-graecum</i> showed anti-inflammatory effects while <i>Trachyspermum ammi</i> have significant effect on the restoration of the non protein thiols (GSH) and all three plant extracts have effect on the reduction of nitrite content in the articular tissues in CIA.
5.	Title of the Project	Evaluation of the cardio-protective effects of crocin and safranin, an active constituents of <i>Crocus sativus</i> L. in experimental model of Myocardial infarction
	Institution	Department of Pharmacology, All India Institute of Medical Sciences, New Delhi.
	Summary	The objective of the study was to evaluate of the cardio-protective effects of active constituents of <i>Crocus sativus</i> L. in experimental models of myocardial infarction. It was established that saffron (<i>Crocus sativus</i> L.) and its carotenoid crocin have cardio-protective effects via regulating redox status of the myocardium. Since, Hsp70 actively participates in shielding the cell from oxidative stress, or necrotic cell deaths. Therefore, it was postulated that Heat Shock Protein (Hsp) 70 might be the actual mediator behind the cardio-protective effect of crocin and Safranin. Crocin (20mg/kg, p.o) and Hsp70 inhibitor, triptolide (1 mg/kg, i.p), and safranin (0.1-0.5ml/kg,i.p) were administered for 14 days and on 15th day one stage ligation of left anterior descending coronary artery for 45 minutes followed by 60 minutes of reperfusion was done. Crocin significantly normalized hemodynamic and left ventricular functions of the ischemia reperfusion challenged myocardium. It is found that safranin not only improved left ventricular function and haemodynamic status of the myocardium but also significantly decreased the infarct size (a marker of necrotic cell death).

6.	Title of the Project	Studies on the possible mechanisms of action of UNIM-352, a poly-herbal, Unani anti asthmatic preparation in experimental animals
	Institution	Department of Pharmacology, V. P. Chest Institute, University of Delhi, Delhi.
	Summary	The objective of the study was to establish the possible mechanisms of action of UNIM-352 a poly-herbal Unani anti-asthmatic preparation in experimental animals. The effects of UNIM-352 was evaluated in 200 and 400mg/kg b.w. doses selected on the basis of earlier safety data on (a) markers of inflammation and immunity, (b) oxidative stress and bronchial hyper reactivity to spasmogens in various experimental models. Studies on bronchial hyper reactivity revealed that UNIM-352 inhibited histamine and bradykinin induced contractions of isolated guinea pig ileum preparation with reasonably good EC 50 values. It appeared from this study that UNIM-352 has anti-inflammatory, immune-modulatory, anti-oxidant and broncho-relaxant properties. All of which could contribute significantly to the efficacy of this polyherbal agent in the treatment (as an adjuvant) in bronchial asthma.

3.3. COLLABORATIVE RESEARCH

3.3.1. COLLABORATIVE PRECLINICAL STUDIES

During the reporting period, the following studies were conducted in collaboration with other medical institutions:

Development of nano drug delivery system for Unani medicines (UNIM-105 and UNIM-115) and their biological activity evaluation at Faculty of Medicine (Unani), Jamia Hamdard, New Delhi

The main objective of this research project was to synthesize a nano based system in such a way that enhances the solubility of hydrophobic drugs and makes its administration easy. The drugs UNIM-105 and UNIM-115 were selected. The rationale behind selection of the drugs was the bulk dose and acceptability. Recent efforts in liver disease research have been geared towards designing highly effective novel drug delivery systems. Due to the unique physiochemical properties of the nanoscale materials, their behavior may differ from the larger bulk forms. The research is also to investigate on how they interact with biological systems. A good control of particle-size range within each batch is also important if reliable links between toxicity and size are to be made.

As reported earlier, the temperature-sensitive amphiphilic polymer poly (N-isopropylacrylamide-co-HEMA) has been synthesized and used to encapsulate the extract of UNIM-105 and UNIM-

115 drugs, in core-shell nanoparticles formed by a membrane dialysis method. The critical association concentration of the polymer was determined to be 10 mg/L. UNIM-105 and UNIM-115 easily encapsulated into the nanoparticles. The nanoparticles are spherical in shape, and their size was found to be below 200 nm. Its encapsulation efficiency was affected by fabrication temperature, initial drug loading and polymer concentration. In vitro release of UNIM-105 and UNIM-115 from the nanoparticles was responsive to temperature changes.

As a gist of the research work it is stated that a hydrophobic and hydrophilic core-shell architecture structured micellar formulation has been developed that has the capability of carrying UNIM-105 and UNIM-115 and deliver them at specific site. In the present investigation from the results of biochemical assays and histo-pathological sections, it is clear that the nanoform of UNIM-105 exhibited significant hepato-protective activity as well as antioxidant activity against CCl_4 induced hepatotoxicity in albino wistar rats in comparison with traditional form of Unani drugs UNIM-105. The work related to the effectiveness of the nano form of the drug UNIM-115 is being studied in-vivo model.

3.3.2. COLLABORATIVE CLINICAL STUDIES

Comparison of clinical efficacy and safety of PUVA sol and Unani formulation UNIM-401 (oral) and UNIM-403 (oil) and UVA in the treatment of chronic plaque psoriasis at Department of Dermatology, All India Institute of Medical Sciences (AIIMS), New Delhi

Studies of comparative clinical efficacy and safety evaluation of PUVA sol and Unani formulation UNIM-401 (oral) and UNIM-403 (oil) and UVA in the treatment of chronic plaque psoriasis were conducted at Department of Dermatology, All India Institute of Medical Sciences (AIIMS), New Delhi. Patients of chronic plaque psoriasis aged above 18 years with PASI or body surface involvement (BSA) of $>10\%$ were included in the study. After baseline investigations, patients were randomly allocated to one of the two study groups. In the study group I (Test drug group), patients were given UNIM-401 orally twice a day and UNIM-403 oil for local application once a day along with sun exposure. In the active control group II (PUVA sol group), patients were given 8 MOP on alternate days, followed by (2 hours later) application of petroleum jelly and gradually increasing sun exposure. Response was assessed by reduction in PASI at 2, 4, 8, 12, 16, 20 and 24 weeks.

During the reporting period, total 99 patients were registered in both the groups, 50 patients in group I and 49 patients in group II. Out of them, 64 patients completed the trial. In group I, none of the patients and in group II, 02 (4%) patients achieved PASI score of 100. Nine (18%) patients in group I and 03 (6%) patients in group II achieved PASI score of 75 and more. Eight (16%) patients in group I and four (8%) in group II achieved PASI more than 50. One (2%) patients in group I and two (4%) in group II achieved PASI less than 49.

Collaborative study on preliminary screening of Unani drug UNIM-701 in Qarah-e- Meda wa Isna-e-Ashari (Peptic Ulcer) at Centre for Liver Research & Diagnostics, Owaisi Hospital, Deccan Medical College, Hyderabad

Preliminary screening of a coded drug UNIM-701 was conducted in patients of Qarah-e- Meda wa Isna-e-Ashari (Peptic Ulcer). The drug UNIM-701 was given in the dose of two capsules (500

mg each) twice daily for eight weeks. The patients were diagnosed on the basis of endoscopic findings.

During the reporting period, six new patients were registered whereas three patients continued from the previous year bringing a total of nine patients studied. One (11.1%) patient was cured and eight (88.9%) patients were relieved. So far, 68 patients have completed the study. The drug has shown significant therapeutic effects in subsiding the clinical sign and symptoms and healing the ulcer in the cured cases. No recurrence was observed.

Collaborative study on preliminary screening of Unani drug UNIM-701 in gastroesophageal reflux disease (GERD) at Centre for Liver Research & Diagnostics, Owaisi Hospital, Deccan Medical College, Hyderabad

Preliminary screening of a coded drug UNIM-701 was done in patients of gastroesophageal reflux disease (GERD) attending the OPD of Department of Gastroenterology, Owaisi Hospital, Deccan Medical College, Hyderabad. The drug UNIM-701 was given in the dose of two capsules (500 mg each) twice daily for six weeks.

During the reporting period, nine new patients were registered whereas two patients continued from the previous year bringing a total of 11 patients studied. Out of them, nine patients completed the study. Two (22.2%) patients were cured, four (44.5%) relieved, two (22.2%) partially relieved whereas one (11.1%) patient showed no response. One patient was under study whereas one patient dropped out of the study. So far, 50 patients have completed the study. The drug showed significant therapeutic effects in subsiding the clinical sign and symptoms.

Collaborative study on preliminary screening of Unani drug UNIM-107, and UNIM-117 in acute viral hepatitis at Centre for Liver Research & Diagnostics, Owaisi Hospital, Deccan Medical College, Hyderabad

Preliminary screening of two coded Unani formulations, UNIM-107 and UNIM-117 was conducted in patients of acute viral Hepatitis including Hepatitis A Virus (HAV), Hepatitis E Virus (HEV) marker positive patients at Owaisi Hospital, Deccan Medical College, Hyderabad.

The coded drugs UNIM-107 and UNIM-117 were given in the dose of 10 ml thrice daily in syrup form to the patients positive for HAV and HEV treated in two separate groups. However, UNIM-117 in the dose of two tablets thrice daily was given to the HBsAg positive patients. The duration of treatment was 12 weeks in each group.

In the treatment group UNIM-107, six new patients were registered. Out of them five completed the study and were relieved completely. One patient was under study. So far, 40 patients have completed the study. The drug has shown significant therapeutic effects in subsiding the clinical sign and symptoms and normalizing various biochemical parameters.

In the treatment group UNIM-117, six new patients were registered whereas one patient continued from the previous year bringing a total of seven patients studied. Out of them, six patients completed the study and were completely relieved whereas one patient dropped out of the study. So far, 37 patients have completed the study. The drug has shown significant therapeutic effects in subsiding the clinical sign and symptoms and normalizing various biochemical parameters.

3.4. PUBLICATIONS

3.4.1. BOOKS, MONOGRAPHS AND REPORTS

During the reporting period, the Council brought out the following books, monographs and reports:

1. CCRUM Annual Report (English) Year 2012-2013
2. CCRUM Annual Report (Hindi) Year 2012-2013
3. CCRUM Calendar 2014
4. Unani Medicine – An Overview
5. Unani System of Medicine – The Science of Health & Healing (Dossier)
6. Unani Treatment for some Common Disorders (English)
7. Unani Treatment for some Common Disorders (Hindi)
8. Unani Treatment for Bars – A Success Story (English)
9. Unani Treatment for Bars – A Success Story (Hindi)
10. Unani Treatment for Eczema & Psoriasis - A Success Story (English)
11. Unani Treatment for Eczema & Psoriasis - A Success Story (Hindi)
12. Unani Treatment for Waja-ul-Mafasil - A Success Story (English)
13. Unani Treatment for Waja-ul-Mafasil - A Success Story (Hindi)
14. Unani Medicine – An Introduction (English)
15. Unani Medicine – An Introduction (Hindi)
16. Flyers for RRIUM, Srinagar
17. CCRUM Newsletter May-June 2013
18. CCRUM Newsletter July-October 2013

3.4.2. JOURNALS

During the reporting period, the Council published the following journals:

1. Hippocratic Journal of Unani Medicine Vol. 8/1 (January-March 2014)
2. Hippocratic Journal of Unani Medicine Vol. 8/2 (April-June 2014)
3. Hippocratic Journal of Unani Medicine Vol. 8/3 (July-September 2014)
4. Hippocratic Journal of Unani Medicine Vol. 8/4 (October-December 2014)

3.4.3. RESEARCH PAPERS

During the reporting period, following research papers were published in reputed scientific journals or presented in national/international seminars/conferences:

- Kazmi MH; Raza M; Zafar S (2013) "Anti-Narcosis Effects of Essential oil of Rosa Damascena Mill after inhalation in rats". Journal of Environmental Research & Development (JERAD), 7(4), pp.1610-1613.

- Aminuddin; Kumar M; Hussaini S A; Samiulla L (2013) "Ethnobotanical Survey of Konark Forests of District Puri, Odisha". Hippo. Journal Unani Med, 8 (2), pp. 83-89.
- Kumar M; Hussaini S A; Aminuddin; Ahmad S; Samiulla L (2013) "Ethnomedicinal Studies in Narsinghpur Forests of Athagarh Forest Division, District Cuttack, Odisha". Hippo. Journal Unani Med, 8 (2), pp. 99-107.
- Kumar M; Butt T A; Hussaini S A; Kumar K; Qamaruddin; Khan H; Aminuddin; Samiulla L (2013) "Ethnomedicines in the Khordha Forest Division, Odisha". Hippo. Journal Unani Med, 8 (4), pp. 171-180.
- Kumar M; Alam M; Zakir M; Khan H; Kumar K; Aminuddin; Samiulla L (2014) "Ethnopharmacological Studies in Health Care among the Tribals of Angul Forest Division, Angul, Odisha". Hippo. Journal Unani Med, 9 (1), pp. 115-123.
- Alam M; Khan H; Samiullah L; Jamil S S (2013) "Nephroprotective activities of Herbal Plants and their products- A Review". Int. Journal of Pharmaceutical Research and Development, 5 (9), pp. 32-49.
- Munshi Y; Rafique H; Zahoor A; Pandit R; Rasool S (2013) "Concept of Arthritis in Unani System of Medicine", Int. Journal of Advanced Ayurveda, Yoga, Unani, Siddha and Homeopathy, 2 (1), pp.132-136.
- Hassan G A; Bilal A T; Butt T A; Wani S; Irshad A N (2013) "Economic and ethno medicinal uses of Juglans regia L in Kashmir Himalaya". Unique Journal of Ayurvedic and Herbal Medicine, 1(3), pp. 64-67.
- Kumar M; Butt TA; Hussain S A; Kumar K; Khan H; Aminuddin; Samiaulla L (2014) "Ethnomedicines in the Khorda Forest Division of Khorda District, Odisha India". Int. J Curr. Microbiol. App. Sci. 3(1), pp. 274-280.
- Ara I; Ara N; Basharat S; Khan N H (2013) "Efficacy of capsule Saras and Marham e Dakhloon on Vaginitis". Int. Journal of Traditional and Natural Medicine, 2(1), pp. 21-26.
- Ali Z A; Ahmad S; Wasiuddin; Khan L A (2013) "Ethnopharmacological survey of the West Tarai Forest Division, Ramnagar, Nainital in Kumaon Region of Uttarakhand". Hippo. Journal of Unani Med, 8 (1), pp. 79- 88.
- Ali Z A; Ahmad S; Wasiuddin; Khan L A (2013) "Ethnopharmacological study of Medicinal plants in East Tarai Forest Division Haldwani, Nainital, Uttarakhand". Hippo. Journal of Unani Med, 8(2), pp. 67-74.
- Ali Z A; Wasiuddin; Zaidi S T H (2013) "Ethnopharmacological Survey of Central Tarai Forest Division Haldwani, Nainital, Uttarakhand". Hippo. Journal of Unani Med, 8(3), pp. 141-148.
- Verma R S; Parveen S; Khan L A (2013) "The Efficacy and safety of a Unani Pharmacopoeial drug Sharbat-e-Faulad in Cases of Anaemia". Hippo. Journal of Unani Med, Vol.8 (3), pp. 11-22.
- Ahmad W (2013) "Khajoor: Ahadees-e-Nabvi Aur Tibb-e-Qadeem-o-Jadeed Ke Tanazur Mein", Rex Tibbi Magazine (Monthly), I (VII), pp. 7-11.

- Qamaruddin; Siddiqui J I; Sayeed A; Siddiqui K M (2014) "Breast Feeding and Unani Medicinal Plants with Galactagogue Potential". Research & Reviews: A Journal of Pharmacognosy, 1(1), pp. 1-7.
- Qamaruddin; Samiulla L; Jamil S S (2014) "A Practical Approach to Clinical Trials: Concepts and Methodologies", Journal of AYUSH, 3(1), pp. 35-40.
- Kumar M; Husaini SA; Qamaruddin; Aminuddin; Kumar K; Samiulla L (2013) "Ethnobotanical Study of the Wild Edible Plants from Odisha, India". Life Sciences Leaflets, 7, pp. 13-20.
- Khanam R (2013) "Palak aur Uska Istemal", Jahan-e Tibb, 4 (4) pp. 60-63.
- Khan M A; Khan N M (2013) "Sartan-e-Raham Tibbe Unani Main Uska Ilaj". Jahan-e Tibb, 14 (1), pp. 24-26.
- Arshad M (2013) "Zof-e-Bah Ka Usool-e- Ilaj". Jahan-e Tibb, 15 (1), pp. 53-55.
- Arfeen S (2013) "Masihul Mulk Hakeem Mohammad Ajmal Khan Key Ilmi Aasar Ka Mutalliye". Jahan-e Tibb, 15(1) pp. 14-17.
- Sagar P K; Paliwal R K (2013) "Phytochemical Screening and Antioxidant potential of Pongamia pinnata (vent), Hydroalcoholic root and leaves extracts". Int. J. Nat. Prod. Sci. 3(4), pp. 19-29.
- Sagar P K (2013) "Emerging trends of selective medicinal plants used in preparation of traditional Ayurvedic and Unani patent formulated medicines having effective anti diabetic, hypoglycaemic medicinal values – A review " Int. J. Nat. Prod. Sci., 3(4), pp. 1-19.
- Sagar P K, Paliwal R K (2013) "Standardization and significance of active minerals, anticancer compounds having medicinal value present in medicinal plant root parts of Pongamia pinnata (Vent) -A study in vitro", J. Sust. Env. Res., 2(1), pp. 35-40.
- Paliwal R K, Sagar P K (2013) "Karanj (Pongamia pinnata (vent): A miraculous medicinal vedic plant having immense medicinal values used in Indian System of Medicines", J. Sust. Env. Res, 2(1), pp. 65-68.S
- Rasheed NMA; Shareef M A; Rehana A; Waheed M; Arfin S; Aminuddin (2014) "Phytochemical and HPTLC Fingerprint analysis of Terminalia arjuna (Roxb.) Wight & Arn. in different solvent extracts", Indo American Journal of Pharmaceutical Research, 4, (1), pp. 457-463.
- Khan A A; Jahangir U; Jalees S; Kapoor P; Urooj S (2013) "Efficacy of classical Anti-obesity Unani Pharmacopeial Preparation (Safoof-e-Muhazzil) Randomized, Controlled Clinical Trial". International Journal of Analytical, Pharmaceutical and Biomedical Sciences, 2 (3), pp.43-53.
- Khan A A; Jahangir U; Jalees S; Kapoor P; Urooj S (2013) "Efficacy of classical Anti-obesity Unani Pharmacopeial formulation (Safoof-e-Muhazzil) in systolic and diastolic blood pressure: A randomized, open-labelled, controlled Clinical Study". J Adv Pharm Technol Res., 4 (4), pp.190-197.
- Khan A A; Jahangir U; Urooj S (2013) "Management of knee osteoarthritis with cupping therapy". J Adv Pharm Technol Res., 4 (4), pp.217-223.
- Ahmad B; Salam M; Ahmad W (2013) "A Persian Manuscript of Early Mughal Period", Journal of Research in Unani Medicine, 2 (1), pp. 62-64.

- Jamal A; Siddiqui A (2013) "Contemporary Drug Development (CDD) to substantiate the efficacy of Unani Medicine", Hamdard Medicus, 56 (2), pp. 5-11.
- Jamal A; Siddiqui A (2013) "Classical Unani Approach for steady Management of Warm-e-Shobatur Riya Muzmin (Chronic Bronchitis)- A View", Hamdard Medicus, 56 (3), pp.41-49.
- Azhar M; Anjum N; Quddusi N; Akhter J; Akram U; Yadaw PK (2013) "Pharmacologically Active Nephroprotective Plants- a Review", Hamdard Medicus, 56 (2), pp. 56-76.
- Ramasamy D; Meena RP; Mageswari S; Sri PMD; Khan SA; Arfin S; Ahmed SJ; Jameel SS (2013) "Development of HPTLC finger prints and pharmacopoeial standards of Unani formulation Jawarish-e-Javed". Hippo. Journal Unani Med, 8 (1), pp. 117-127.
- Meena RP; Mageswari S; Ramasamy D; Sri PMD; Khan SA; Arfin S; Ahmed SJ; Jameel SS (2013) "Standardisation of Habb-ul-Aas (Myrtus communis Linn. (fruits) - a Unani drug". Hippo. Journal Unani Med, 8 (1), pp. 143-152.
- Sri PMD; Meena RP; Ramasamy D; Mageswari S; Arfin S; Aminuddin; Mehmooda R (2013) "Antibacterial activity of Majoon-e-Maddat-ul-Hayat Jadwari against Uropathogenic Escherichia coli (UPEC)". Hippo. Journal Unani Med, 8 (3), pp. 115-121.
- Mageswari S; Meena RP; Ramasamy D; Sri PMD; Arfin S; Aminuddin; Mehmooda R (2013) "Pharmacognostical and physico-chemical studies of Ood-e-Balsan (Commiphora gileadensis (L.) C. Chr.) - a Unani drug, Hippo. Journal Unani Med, 8 (3), pp. 123-133.
- Meena RP; Mageswari S; Ramasamy D; Sri PMD; Ahmed SJ; Arfin S; Jameel SS (2013) "Development of SOPs and pharmacopoeial standards for Jawarish-e-Jalinoos". Journal of Pharmacy Research (ELSILVER), 7(8), pp. 734-740.
- Mageswari S; Meena RP; Ramasamy D; Sri PMD; Arfin S; Aminuddin; Ahmed K; Ahmed SJ (2013) "Development of quality standards of a single Unani drug -Habb-e-Balsan". Hippo. Journal Unani Med, 8 (4), pp. 161-170.
- Sajwan K; Sonali S; Chandra M; Alvi AI; Asim SM (2013) "Standardisation of Unani poly-herbal formulation Habb-e-Rasaut". Journal of AYUSH, 2 (2), pp.
- Ansari SA; Khan AS; Qasim MA; Rashid MA; Mustehasan; Pawar RK; Arfin S; Garg GP (2013) "Standardisation of Sufoof-e-Mohazzil". Hippo. Journal Unani Med, 8 (2), pp. 51-61.
- Alam M Siddiqui; Zaidi SAH; Singh S; Aminuddin; RD Girach; Khan MH (2013) "Native phyto-therapy for filariasis from Odisha". India Hippocratic Journal of Unani Medicine, 8 (4), pp. 127-135.
- Hussain M; Raza M "Anti-anxiety activity of rose oil inhalation with the help of Resonant Field Imaging analysis in Human Individual". International Congress of Environmental Research, Aurangabad, 19-21 December 2013.
- Kumar M; Hussaini S A; Kumar K; Qamaruddin; Aminuddin; Dhal N K; Samiulla L; Jamil S S "Ethnomedicinal Investigation of Phytomedicines among the Local Inhabitants of Narsinghpur Forests of district Cuttack, Odisha". National Seminar on Traditional Knowledge and Practices for Sustainable Development, Bhubneswar, 15 April 2013.
- Khalid G M; Akbar S; Dar S A; Nazir T; Dar M Y " Subacute oral toxicity of Unani drug UNIM -K-2019 in Albino Wistar rats". 9th J & K Science Congress, 1-3 October 2013.

- Mustafa K G; Akbar S; Dar S A; Tantry M A; Nazir T; Dar M Y; Masood A "Diabetes and medicinal plants-A review". 9th J&K Science Congress, 1-3 October, 2013.
- Khan S A "Intervention of FASD (Venesection) and Qualitative Estimation of Blood-Haemorrheological Determinants". National Seminar on Unani Medicine; Beyond Traditional Legacy, Jamia Hamdard, 9 September 2013.
- Waheed M A "Vitiligo Regimentation -A Cosmetic need: A study with systemic and topical Unani formulations in the treatment of Vitiligo". International Conference and Exhibition on Traditional & Alternative Medicine, OMICS Group Conferences, Hyderabad, 9-11 December 2013.
- Rasheed N.M.A; Waheed M A; Arfin S; Rafeeqi T A "Fingerprint analysis of seeds of *Psoralea corylifolia* Linn. By UPLC with PDA detector International Conference and Exhibition on Traditional & Alternative Medicine, OMICS Group Conferences, Hyderabad, 9-11 December 2013.
- Waheed M A " Emerging trends and management of Diabetes & Metabolic syndrome (Guest Lecture), National Seminar on Current Status and recent advances in Medicinal Plants Research". A.P. Medicinal & Aromatic Plants Board, Hyderabad, 29-31 December 2013.
- Rafeeq M A R "A randomized clinical trial to evaluate the safety and efficacy of UNIM-701 compound in the treatment of duodenal ulcer and eradication of *Helicobacter pylori*". 5th Annual Conference of Indian Society of Gastroenterology, Ahmadabad, 28 November – 01 December, 2013.
- Meena RP; Sri PMD; Ramasamy D; Mageswari S; Arfin S; Ahmed SJ; Mahmooda R; Jamil SS "Pharmacopoeial and microbial studies of Jawarish-e-Qaiser - a Unani formulation". International Conference and Exhibition on Pharmacognosy, Phytochemistry and Natural Product, Hyderabad, 21-23 October 2013.
- Arfin S; Meena RP; Ramasamy D; Mageswari S; Sri PMD; Aminuddin "Standardization of Unani Formulation with Reference to Jawarish-e-Ood Kibreet". International Conference and Exhibition on Pharmacognosy, Phytochemistry and Natural Product, Hyderabad, 21-23 October 2013.
- Ramasamy D; Meena RP; Mageswari; Sri PMD; Arfin S; Kareem MA; Ahmed SJ; Jamil SS "Standardization and Quality Control Methods of Unani Single Drug Tudri Surkh (*Cheiranthus cheiri* Linn)". National Seminar on Emerging Trends in Biodiversity Conservation and Sustainable Utilization, Coimbatore, 29-30 January 2014.
- Meena RP; Mageswari S; Ramasamy D; Sri PMD; Arfin S; Ahmed SJ; Aminuddin "Standardization of Dirmana Turki (*Artemisia maritime* L-Root) Using Pharmacognostical, Physico-chemical and Quality Control Methods". National Conference on Conservation, Characterization and Cultivation of Medicinal Plants for Sustainable Utilization and Community Welfare, Puducherry, 23-25 February 2014.
- Murugeswaran R; Rajendran A; Venkatesan K; Hafiz CM Aslam; Aminuddin "Diversity of Unani Medicinal Plants in Southern Western Ghats of Coimbatore District, Tamil Nadu". National Seminar on Emerging Trends in Biodiversity Conservation and Sustainable Utilization, Coimbatore, 29-30 January 2014.

- Venkatesan K; Murugeswaran R; Ahmed A; Jameeluddin Ahmed; Aminuddin "Folk Medicinal Plants Used as Mosquito Repellent among Kani tribal community in Kaniyakumari District of Tamil Nadu, India District, Tamil Nadu, South India". National Seminar on Emerging Trends in Biodiversity Conservation and Sustainable Utilization, Coimbatore, 29-30 January 2014.
- Kumar M; Hussaini SA; Kumar K; Qamar Uddin; Aminuddin; Dhal NK; Samiulla L; Jamil SS "Ethnomedicinal Investigation of Phytomedicines among the Local Inhabitants of Narsinghpur Forests of District Cuttack, Odisha". National Seminar on Traditional Knowledge and Practices for Sustainable Development, Bhubneswar, 15 April 2013.

3.5. EXTENSION HEALTH CARE SERVICES

3.5.1. SCHOOL HEALTH PROGRAMME

The School Health Programme is an important component of the Council's Clinical Research Programme. The objective of this programme is to raise health status of school children and reduce morbidity rate among them through healthcare and health education. Under this programme, some of the primary/secondary schools falling under the coverage of the mobile wings are adopted. A baseline health check-up of school children is conducted and those found suffering from any ailment are treated with Unani medicines. Thereafter, health education is provided to them 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 on oral hygiene, cleanliness of body and environment, safe drinking water, nutrition, balanced diet, etc.

During the reporting period, this programme continued at CRIUMs, Hyderabad and Lucknow; RRIUMs, Chennai, Bhadrak, Patna, Aligarh, Mumbai and Srinagar; and RRC, Allahabad; and CRU, Burhanpur. The Council's team of physicians visited 10 centres covering 31 schools that were adopted under the School Health Programme particularly those falling in the pockets adopted under mobile clinical research programme. Five thousand three hundred and fifty five school children were checked-up for their health status. This programme proved very effective in creating health awareness not only among the school children but also the message went to the families through the children. The most common diseases found among the school children included skin infection, helminthiasis, ottoorohea, cough and cold, conjunctivitis and dental carries. Significant reduction in the incidence of these diseases among the children was observed during the reporting period.

3.5.2. UNANI MEDICAL CENTRES IN ALLOPATHIC HOSPITALS

Unani Medical Centre was established at the National Capital's Dr. Ram Manohar Lohia Hospital on 14 January 1998 with a view to providing AYUSH healthcare facilities at Government Allopathic Hospitals. On demand of the patients, another Unani Speciality Centre started functioning at Deen Dayal Upadhyaya Hospital, New Delhi on 01 November 2010. These centres are being run by the CCRUM. Besides the general out-patient department (GOPD) facilities, these centres provide specialized Unani treatment for some selected disorders like vitiligo,

eczema, psoriasis, rheumatoid arthritis, bronchial asthma, sinusitis, infective hepatitis, diabetes mellitus, etc. During the reporting period, a total of 39,923 patients were treated. A large number of patients were referred to these centres from Allopathic OPDs particularly for treatment of different chronic ailments. Also, counseling of patients, particularly the senior citizens, was done to improve their physical and mental health.

3.5.3. HEALTH CAMPS

The Council organized health camps through its Institutes/Units with a view to create health awareness among the masses and to provide treatment through Unani System of Medicine. In these health camps, health lectures were delivered by the physicians of the Council. Besides, health counselling was also done. The patients suffering from different diseases were provided Unani treatment. Referral of the patients was also made to the Council's centres as well as of other Hospitals. During the reporting period, 19 health camps were organized.

3.5.4. ACTIVITIES UNDER GENDER COMPONENT PLAN FOR WOMEN

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 to women. Besides, female patients in the pockets adopted under mobile clinical research programme were also treated by the physicians in the mobile OPD scheme. During the reporting period, a total of 2,15,470 female patients in different OPDs were treated. Efficacy of the pharmacopoeial drugs was also validated under this component. Health lectures/group meetings on preventive and promotive health aspects were also organized in the pockets adopted under mobile clinical research programme. Information, Education and Communication (IEC) material on preventive, promotive and curative health aspects was also provided in different languages.

3.5.5. ACTIVITIES IN THE NORTH-EASTERN REGION

The two centres of the Council in the North-Eastern region, the Regional Research Centre, Silchar (with an extension centre at Karimganj) and Clinical Pilot Project, Manipur continued the GOPD. During the reporting period, 13,030 patients were treated. The most commonly occurring diseases were Humma (Fever), Humma-e-Ejamia (Malaria), Ishal (Diarrhoea), Zaheer (Dysentery) and Waja-ul-Mafasil (Rheumatoid arthritis). The patients were treated with the pharmacopoeial drugs. Besides, patients of common/seasonal ailments were also treated.

3.5.6. ACTIVITIES UNDER SPECIAL COMPONENT PLAN FOR SCHEDULE CASTES AND TRIBAL SUB-PLAN

Under the Special Component Plan for Scheduled Castes and Tribal Sub-Plan, the Council continued research oriented medicare activities to benefit the SC/ST population. These segments of the society were provided free medicare at the Council's GOPDs, mobile OPDs and at Unani Specialty clinics. Medicare was also provided at the door steps of the patients through mobile OPDs. During the reporting period, 47,533 patients belonging to SC/ST population were benefited.

4. INFORMATION, EDUCATION AND COMMUNICATION

4.1. LIBRARY SERVICES

The Council has a Library and Information Centre (LIC) at the headquarters that aims to collect and preserve scattered literature on Unani system of medicine, and to disseminate information thus collected to the researchers, academicians and practitioners of the system.

During the reporting period, services of the LIC remained fully automated through local area network (LAN). The LIC provided its services to the readers through Troodon library software that controls the Online Public Access Control (OPAC), circulation of books, etc. A total of 696 books were acquired, 323 books accessioned, 2,776 books circulated, and 4,046 issues of daily newspapers and 280 issues of popular magazines were purchased during the year. Besides, 186 issues of journals were received, of which 89 were related to Unani Medicine and 51 were in Hindi language. The LIC carried out cataloguing of 2,500 books and physical processing of 370 books. It provided spiral binding, photocopying, and reference services to the readers. Comb or thermal binding of 384 items and photocopying of 6,030 pages was carried out during the reporting period. The library also continued information retrieval services by compiling and disseminating Current Content of Journals (quarterly) and Medical News Index (bimonthly).

The LIC continued institutional membership of British Council Library, American Resource Information Center and Developing Library Network (DELNET) during the year. It also provided the readers access to two consortia, Health & Wellness Resource Centre (HWRC), and InfoTrac Medical Collection (IMedC). The HWRC provides instant access to carefully compiled and trusted medical reference material. The (IMedC) is a carefully selected list of journals that covers all streams of medical science. This innovative full-text online resource allows users to search articles instantly by title, subject, publication, country, etc.

The LIC continued digitization of Unani manuscripts and the number of digitized manuscripts reached 42 at the end of the financial year. It also updated its database of MD (Unani) theses. A total of 490 theses were available on OPAC for search and consultation.

A total of 286 member/non-member visitors excluding the researchers at the CCRUM headquarters visited the LIC. Besides, a delegation from Thailand comprising Dean of Chulapovon Medical College, Director of Golden Jubilee Medical Centre, Mahdol University, and Director of Bureau of Alternative Medicine visited the LIC during the financial year.

4.2. ORGANIZATION OF CONFERENCE, SEMINAR, ETC.

4.2.1. NATIONAL WORKSHOP ON INTELLECTUAL PROPERTY RIGHTS (IPR) IN UNANI MEDICINE

The Council organized a one-day 'National Workshop on Intellectual Property Rights (IPR) in Unani Medicine' on 23 March 2014 at its Regional Research Institute of Unani Medicine (RRIUM)

in Chennai. The workshop underscored the need to document the hitherto undocumented traditional knowledge and preserve classical works of Unani system of medicine.

Addressing the workshop, the Chief Guest Prof. Rais-ur-Rahman, Advisor (Unani), Department of AYUSH, Ministry of Health & Family Welfare, Government of India advocated for protection and commercialization of the knowledge and intellectual properties of Unani Medicine through patenting.

Earlier, in his welcome address, Prof. Syed Shakir Jamil, Director General, CCRUM highlighted the importance of IPR in Unani system of medicine and achievements of the Council in this area. He informed that the Council had been granted eight patents and filed another 33 patent applications. Prof. R.S. Ramaswamy, Director General, Central Council for Research in Siddha (CCRS), Chennai, who was the Guest of Honour on the occasion, emphasized that folklore knowledge should also be protected.

Prof. S. Chandrasekaran, former Controller General of Patents, Designs and Trademarks emphasized the importance of acquiring, utilizing and protecting the knowledge of traditional medicines.

More than 60 delegates participated in the workshop which comprised lectures on various aspects of IPR and related issues by Mr. S K Pangasa, former Assistant Controller of Patents & Designs, Indian Patent Office (IPO), New Delhi; Prof. D. Narasimhan, University of Madras, Chennai; Mr. Sanjeev Majumdar, Deputy Manager - IPR, National Research Development Corporation, New Delhi; Dr. S P Subramaniam, Assistant Controller, IPO, Chennai; and Mr. K Chitrarasu, Advisor (Law), National Biodiversity Authority, Chennai. The workshop concluded with the vote of thanks proposed by Dr. Syed Jameeluddin Ahmed, Research Officer Incharge, RRIUM, Chennai.

4.2.2. NATIONAL CONFERENCE ON MANAGING INFORMATION RESOURCES IN DIGITAL ENVIRONMENT

The CCRUM and the Society for Information Research and Studies (SIRs), New Delhi jointly organized a National Conference on Managing Information Resources in Digital Environment in New Delhi on 21 September 2013.

Inaugurating the conference, Prof. Rais-ur-Rahman, Advisor (Unani), Department of AYUSH, Ministry of Health & Family Welfare, Government of India highlighted the importance of information and its management. He said that it was very important to enrich our knowledge base and adopt modern technologies to preserve the knowledge for the global community.

Prof. Syed Shakir Jamil, Director General, CCRUM stressed the need to digitize the manuscripts and rare books of Unani Medicine on priority basis. He said that the knowledge and information on Unani Medicine, preserved in the manuscripts in different libraries of the country, needed to be made accessible to the researchers and practitioners at global level. He informed that the Council had digitized some of the manuscripts available at the Council headquarters and the work on the rest continued. He underscored the need for networking of the Council's libraries at its different centres.

Dr. A. M. Siddiqui, Director, SIRs said that digitization was the current trend in the field of library and information sciences. He said that in developed countries libraries had been digitized, and the developing countries had been following them and progressing in that direction.

Earlier, Organizing Secretary Mr. M. Azhar Khan, Assistant Library & Information Officer, CCRUM welcomed the guests.

The conference had three technical sessions wherein 36 papers were presented by researchers and information-based professionals. The areas covered in these papers included planning and managing resources, sourcing and organizing information, managing audiovisual resources, digitization and e-documentation of information, planning and management of digital libraries, knowledge creation through information services, etc.

Addressing the valedictory session, Dr. Khalid M. Siddiqui, Assistant Director, CCRUM highlighted the objective of the Council and its progress in the research programmes.

The deliberations of the conference were summed up by Mr. S. Shuaib Ahmad, Library & Information Assistant, CCRUM, who was Coordinator of the Conference.

The conference was attended by Dr. Rajesh Singh, University of Delhi, Delhi; Dr. N.K. Bar, former Director, National Archives of India, New Delhi; Hakim Abdul Hannan, Joint-Director, CCRUM, New Delhi; Mr. Uzzwal Madhav, Executive Director, Lakshya Foundation, New Delhi; Mr. Khalid Kamal Faruqi, former Librarian, Jamia Hamdard, New Delhi; Dr. Mohammad Fazil Khan, Research Officer, CCRUM, New Delhi; Dr. R.N. Malviya, University Librarian, Lingaya's University, Faridabad; and officers from the Council's headquarters and its Delhi-based institutes.

4.2.3. NATIONAL WORKSHOP ON DRUG DISCOVERY AND DEVELOPMENT

The Central Research Institute of Unani Medicine (CRIUM), Hyderabad – a prestigious institute of the CCRUM, organized a two-day National Workshop on Drug Discovery and Development at its premises from 4 to 5 February 2014. Eminent scientists and researchers from diverse disciplines participated in the event and offered future directions.

Inaugurating the workshop, Mr. Ajay Sawhney, Principal Secretary, Health, Medical & Family Welfare, Government of Andhra Pradesh stressed upon the need for multidisciplinary research in traditional systems of medicine so that the health areas where modern medicine had little to offer could be supported by these systems. He expressed hope that scientists working at CRIUM, Hyderabad would succeed in developing new treatment regime for otherwise intractable and difficult diseases.

Welcoming the dignitaries and the gathering, Dr. M.A. Waheed, Deputy Director In-charge of CRIUM gave a detailed account of ongoing activities at the Institute and the leads taken by it in clinical research, especially in the area of dermatological conditions like vitiligo, psoriasis, etc. He also made a mention of research collaborations with other reputed institutions including National Institute of Pharmaceutical Education and Research (NIPER); Sultan ul Uloom College of Pharmacy; Indian Institute of Chemical Technology (IICT); Centre for Cellular & Molecular Biology; and Nizam's Institute of Medical Sciences (NIMS). He also informed that efforts were being made to enter into collaborations with Birla Institute of Technology and Science (BITS) Pilani, Hyderabad campus.

During the inaugural function, Mr. K.P. Srivasuki, Commissioner, AYUSH & Chief Executive Officer, A.P. Medicinal & Aromatic Plants Board said that there was new International cooperation developing for the promotion of Indian systems of medicine in foreign countries and it was in that connection that Unani Medicine Chair was established at the University of Western Cape, South Africa.

Prof. Suman Kapur, Dean, BITS Pilani, Hyderabad campus expressed wish for joint holding of Brainstorming Sessions and getting an MoU signed between the two institutions to address the research needs, create evidence-based data and offer the world a safe and effective therapy.

Dr. G. Santha Rao, Director, Medical Education, Government of Andhra Pradesh showed keen interest in pursuing collaboration between CRIUM, Hyderabad and medical institutions and teaching hospitals of the State.

Prof. Mushtaq Ahmad, Unani Chair, University of Western Cape, South Africa said that Unani system of medicine was firmly establishing its roots in South Africa and the Unani medical practitioners were doing well. He stressed to further improve the quality of research in Unani system of medicine in order to compete with the global challenges.

Dr. G. Santha Rao, Director, Medical Education, Government of Andhra Pradesh, inspected the newly established research facility at the Institute and offered support for further augmenting these facilities necessary for meaningful research in traditional systems of medicine on modern and scientific line.

Dr. Ahmed Kamal, Outstanding Scientist, CSIR-IICT and Project-Director, NIPER, Hyderabad, delivered keynote address on "Recent Advances in Medicinal Chemistry" and dealt at length with the challenges and opportunities in the field of drug discovery and development in cancer therapy. He presented his research work on phytochemicals in cancer management which was going on at IICT, Hyderabad.

Renowned scientists from industry, academia and clinical research domain came under one roof and discussed the complex process of drug discovery and development. The speakers included Dr. M.U.R. Naidu, Former Dean, NIMS, Hyderabad; Prof. Anupama Koneru; Sultan-ul-Uloom College of Pharmacy, Hyderabad; Dr. S.K. Saxena, CSIR-CCMB, Hyderabad; Dr. Kaiser Jamil, Jawaharlal Nehru Institute of Advanced Studies (JNIAS), Hyderabad; Dr. N. Srinivas and Dr. Wahid Khan, both from NIPER, Hyderabad; Dr. B. Dinesh Kumar, National Institute of Nutrition, Hyderabad; Dr. K. Nagaiah, CSIR- IICT, Hyderabad; Dr. Pratima Srivastava, GVK Biosciences, Hyderabad; Dr. M.V.Narendra Kumar Talluri, NIPER, Hyderabad; Dr. Suman Kapur, BITS Pilani, Hyderabad campus; Dr. Kavita K. Kakarala, JNIAS, Hyderabad.

4.2.4. WORKSHOP ON REGULATIONS AND ETHICS FOR ANIMAL EXPERIMENTATION

The Council's Regional Research Institute of Unani Medicine (RRIUM), Srinagar organized a Workshop on Regulations and Ethics for Animal Experimentation during 8–9 November 2013 in Srinagar in collaboration with Department of Science and Technology, Ministry of Science and Technology, Government of India, and the Committee for the Purpose of Control and Supervision of Experiments on Animals (CPCSEA). The workshop was the first of its kind to be organized in Jammu & Kashmir.

The workshop was inaugurated by Mr. Surjit Singh, Vice Chairman, CPCSEA and Joint Secretary, Ministry of Environment & Forests, Government of India. The valedictory session was presided over by Prof. G.N. Qazi, Vice Chancellor, Jamia Hamdard, New Delhi.

More than 65 researchers from University of Kashmir, Sher-i Kashmir Institute of Medical Sciences, Sher-e-Kashmir University of Agricultural Sciences and Technology (SKAUST), and RRIUM, Srinagar participated in the workshop. They included heads of departments, post-doctoral fellows, faculty members and research scholars. About 20 lectures were delivered by the experts from Central Drug Research Institute, Lucknow; Institute of Immunology, New Delhi; National Institute of Pharmaceutical Education and Research, Chandigarh; CPCSEA, New Delhi; Jamia Hamdard, New Delhi; and SKAUST, Srinagar.

4.2.5. BRAINSTORMING SESSION ON SURVEY AND CULTIVATION OF MEDICINAL PLANTS AND DRUG STANDARDIZATION RESEARCH

The Council organized a Brainstorming Session (BSS) on two of its research programmes - Survey and Cultivation of Medicinal Plants, and Drug Standardization Research in New Delhi on 1 October 2013. The BSS aimed at expanding the research activities and introducing a mechanism for better utilization of its staff and infrastructure related to Botany and Chemistry.

At the outset, Prof. Shakir Jamil, Director General, CCRUM gave a detailed background of the BSS, and requested the experts to suggest new areas for research. After introductory remarks, a presentation on the ongoing research in the areas of Survey and Cultivation of Medicinal Plants, and Drug Standardization Research was made by Mr. Aminuddin, Research Officer (Botany), CCRUM headquarters.

Addressing the session, Prof. Wazahat Husain, formerly Head, Department of Botany, Aligarh Muslim University (AMU), Aligarh advised that while collecting plant specimens, observations like presence of latex with its colour and smell, and the colour of flowers and presence of hairs on leaves should be recorded in the field diary. He also suggested that seeds of plants should also be collected and displayed on herbarium sheet. Prof. M.A. Jafri, Jamia Hamdard, New Delhi said that the Council may collaborate with National Institute of Unani Medicine, Bangalore and Jamia Hamdard, New Delhi for large-scale cultivation of plants to cater to its drug manufacturing needs. Prof. Naeem Ahmad Khan, Ajmal Khan Tibbiya College, AMU, Aligarh suggested that Matrook Adviya (out-of-use drugs) should be identified and re-introduced.

The Director General advised that the work of digitization of herbarium specimens as suggested by the experts might be taken up. He emphasized to identify some important folk claims for phytochemical, toxicological and other scientific studies in order to identify clues for development of new drugs. He also said that cultivation of medicinal plants may be planned in such a way that ingredients of one or two formulations may be produced. The available area of land at the Council's centres in Aligarh, Chennai, Srinagar and Hyderabad may be utilized for the purpose.

The BSS was attended by the members of the Scientific Advisory Committee's Sub-committees for Survey and Cultivation of Medicinal Plants, and Drug Standardization Research Programmes and the Council's researchers working in the two fields at its institutes and the researchers at the headquarters.

Dr. Y.S. Bedi, Indian Institute of Integrative Medicine, Jammu suggested that the Council should initiate digitization of herbarium specimens. It was supported by Dr. Shoaib Ahmad, Rayat & Bahra Institute of Pharmacy, Mohali, Punjab. Dr. Shamsul Afaq, former Deputy Advisor, Department of AYUSH said that collection of plant material for drug manufacturing should be done at appropriate time, keeping in view the stage of specific part required. He also suggested that while collecting drugs, period of maturity of plant might also be kept in mind. Dr. Shariq Ali Khan, Research Officer (Scientist-4), RRIUM, Aligarh suggested that information collected on folk claims should be authenticated through clinical trials. He also advocated that temperament of plants or their parts collected during ethnopharmacological surveys should also be established. The Council's researchers suggested that a centralized herbarium and museum might be established for reference and record purposes. It was also suggested that farmers should be encouraged for cultivation of medicinal plants required for preparation of Unani formulations and their passport data might be developed.

4.2.6. BRAINSTORMING SESSION ON LITERARY RESEARCH

The Council organized a Brainstorming Session (BSS) on its Literary Research Programme in New Delhi on 7 January 2014. Besides reviewing the programme being pursued at the Council's Literary Research Institute of Unani Medicine (LRIUM), New Delhi, the Session aimed to devise strategy for strengthening literary research in Unani Medicine.

In his welcome remarks, Prof. S. Shakir Jamil, Director General, CCRUM observed that before planning new literary research projects, current activities should be reviewed so that possible future difficulties and shortcomings might be avoided. He also stressed the need for identifying priority areas in literary research in tune with the current needs, larger benefits, available resources and time constraints.

The session felt that the indexing of classical Unani books was very important and that it should be initiated with that of the books published by the Council. It was also agreed that single volume books or the books having less volumes would be the right choice for starting the work. It was also decided that the works already done in this area should be gone through henceforth. The Director General asked to organize a separate meeting for selection of the books for the purpose.

For Urdu/English translation of classical books, it was decided that editing and thereafter translation of the unpublished part of *Kitab al- Miya't*, of which first 20 chapters had already been translated, should be taken up. Also, translation of remaining volumes of *Muheet-i Azam*, *Tazkirat Uli al-Albab* and *Iksir-i Azam* should be taken up on priority basis.

The meeting also decided to compile on priority basis monographs on Unani Medicine in Mental Health, Unani Medicine in Reproductive and Child Health and Healthy Ageing through Unani Medicine. Dr. Khalid M. Siddiqui drew the attention of the house towards a letter from Department of AYUSH regarding compilation of standard treatment guidelines (STG) for prevention and control of non-communicable diseases (NCDs) through AYUSH systems. In this regard, the Director General said that a capsule on NCDs may be prepared with the help of already available draft on STG with necessary modifications.

Prof. S. Zillur Rahman, Chairman, Literary Research Sub-committee suggested for organizing a national seminar on this topic followed by bringing out a special issue of *Jahan-e Tib*.

Dr. Khalid M. Siddiqui, Assistant Director (Unani), CCRUM suggested that chapterization of classical books should also be done in their reprints.

Hakim Abdul Hannan emphasized the need to develop better understanding of Amraz-i Ghair Mudawwana (the diseases that are not described in classical Unani literature) and Unani medicinal intervention to combat them.

Dr. Sagheer Ahmad Siddiqui, Research Officer (Unani) (Scientist – 4) and in-charge of LRIUM, New Delhi briefed the house about the activities going on at the Institute.

Earlier, in his presentation, Dr. Amanullah, Research Officer (Unani) (Scientist – 2) gave a brief account of the current activities and achievements of the Council's literary research programme and outlines of future work. He informed the participants about the recent books published by the Council under literary research programme; uploading of data on AYUSH Research Portal; abstracting of articles published in *Jahan-e Tib*; compilation and critical review of classical Unani literature on Nisyan (amnesia) and Sartan (cancer); reprinting of rare classical books; digitization of manuscripts; preparation of IEC material; and outlines of the future work.

Others who attended the meeting included Prof. Khalid Zaman Khan, Hakim K. A. S. Azmi, Dr. Wasim A. Azmi, Dr. Ashhar Qadeer, all Members of Literary Research Sub-committee; Dr. M. Raziul Islam, an expert in literary research; and concerned researchers from the CCRUM headquarters and LRIUM, New Delhi.

4.2.7. BRAINSTORMING SESSION ON UTILIZATION OF RESEARCHERS FROM ALLIED SCIENCES

The Council organized a Brainstorming Session (BSS) at its headquarters on 31 October 2013 followed by a pre-BSS meeting on the previous day to formulate strategy for optimal utilization of the services of its pathologists, biochemists and pharmacologists, and evaluate the activities in the clinical research programme.

Experts of the relevant fields from reputed institutions like Indian Council of Medical Research (ICMR), Aligarh Muslim University (AMU), Jamia Hamdard, and members of the Council's Scientific Advisory Committee and Clinical Sub-committee were invited for deliberation.

In his introductory remarks, Prof. Syed Shakir Jamil, Director General, CCRUM underscored the need to evaluate and document the research carried out so far at the Council and formulate strategy for better outputs.

Dr. Khalid M Siddiqui, Assistant Director, CCRUM presented an account of the Council's research activities during the past two years, and status of the available infrastructure.

During the two-day long deliberations, various suggestions were extended by the experts and various decisions were made. For better utilization of the officers from allied sciences, it was decided that apart from assisting in the mainstream projects, they should be engaged in stand-alone and turnkey projects. Exploring new indications for pharmacopoeial drugs and redesigning of dosage forms were also discussed and selected for future research. It was

suggested that the research works continuing for the last 20-25 years at the Council should be first consolidated in conclusive manner and their findings be published. It was also suggested that regimenal therapies might also be validated, their Standard Operating Procedures (SOPs) be generated, and their instruments developed.

Hakim Syed Khaleefatullah, Vice President, Governing Body, CCRUM; Prof. M.A. Jafri, Jamia Hamdard; Dr. O.P. Agarwal, Emeritus Scientist, ICMR; Dr. Nandni K. Kumar, Former Deputy Director General, ICMR; Prof. K.M.Y. Amin, AMU; and the Council's officers of allied medical sciences attended the meetings.

4.3. PARTICIPATION IN CONFERENCES

4.3.1. PHARMACOGNOSY 2013

The Central Council for Research in Unani Medicine (CCRUM), New Delhi participated in Pharmacognosy 2013 – an International Conference and Exhibition on Pharmacognosy, Phytochemistry and Natural Products held at Hyderabad from 21 to 23 October 2013. It was the 148th OMICS Group conference organized under its scientific programme.

The main theme of the conference was *“accelerating plant-based drug discovery for safer drug development”*. The conference brought together a diversified bunch of participants from pharmaceutical, bio-tech and herbal companies, universities and research institutes working in the field of plants and herbal products in India and other parts of the world.

The event was inaugurated by Dr. Chandrakant Kokate, Vice Chancellor, KLE University, India.

The following officers of the Council participated in the conference: Dr. Rampratap Meena, Research Officer (Chemistry), Regional Research Institute of Unani Medicine, Chennai; Mr. Shamsul Arfin, Research Officer (Chemistry) and Mr. Aminuddin, Research Officer (Botany), both from CCRUM headquarters.

4.3.2. INTERNATIONAL CONFERENCE ON DIGITAL LIBRARIES 2013

The Council's library and information staff participated in a three-day International Conference on Digital Libraries (ICDL) 2013 organized in New Delhi from 27 to 29 November 2013. The conference organized by the Energy and Resources Institute (TERI) was themed on 'Vision 2020: Looking back 10 Years and Forging New Frontiers'.

The conference was inaugurated by Mr. Hamid Ansari, Vice President of India, in the presence of Dr. M.M. Pallam Raju, Union Minister for Human Resource Development. In his inaugural address, Mr. Ansari dwelt upon the changes taking place in the world of knowledge and transition from print to electronic medium. He said that mass-scale digitization was leading to empowerment and more informed decision making.

The three-day event comprised six pre-conference tutorials, 23 technical sessions, a plenary session, 24 invited talks, 40 paper presentations, nine thematic workshops-cum-panel discussions, a cultural programme, a poster session, 15 product presentations by leading companies, and a daily bulletin/newsletter. The conference witnessed various brainstorming and informative sessions.

Mr. Mohammad Azhar Khan, Assistant Library and Information Officer and Mr. Syed Shuaib Ahmad, Library and Information Assistant at the Council's headquarters participated in the conference.

4.3.3. WORKSHOP ON LABORATORY METHODS IN LEPTOSPIROSIS

A researcher from the Council's Regional Research Institute of Unani Medicine (RRIUM), Srinagar - Dr. Mohammad Naime, Research Officer (Bio-Chemistry) - attended a WHO-sponsored Hands-on Training Workshop on Laboratory Methods in Leptospirosis and Mapping of Diagnostic Laboratories for Zoonoses at Port Blair from 19 to 26 November 2013. The workshop was organized by the Regional Medical Research Centre (RMRC) of Indian Council of Medical Research (ICMR) based in Port Blair.

Nine experts/resource persons from various areas of biomedical research related to leptospirosis imparted training to a total of 30 participants from several states of India and eight participants from South East Asian countries viz. Indonesia, Sri Lanka, Thailand and Myanmar. The workshop was structured in a way that helped the participants develop expertise in laboratory diagnosis and strategies for prevention and control. Hands-on training was imparted in various laboratory procedures and application of molecular tools.

4.3.4. SEMINAR ON BIODIVERSITY CONSERVATION

The Council's researchers from its headquarters and Regional Research Institute of Unani Medicine (RRIUM), Chennai participated in the National Seminar on Emerging Trends in Biodiversity Conservation and Sustainable Utilization held at Coimbatore, Tamil Nadu from 29 to 30 January 2014. Sponsored by the University Grant Commission (UGC), the Seminar was organized by the Department of Botany, Bharathiar University, Coimbatore.

In his inaugural address, Prof. M. Krishnan, Department of Environmental Biotechnology, Bharathidasan University, Tiruchirapalli stressed upon the conservation of flora and fauna in their natural habitat. Presiding over the function, Prof. G. James Pitchai, Vice-chancellor, Bharathiar University, Coimbatore laid emphasis on conducting research in the areas of biodiversity, environmental sciences and proper utilization of natural resources. Prof. A. Rajendran, Organizing Secretary of the seminar, highlighted the objective and rationale of the seminar.

The participants from the CCRUM also presented their papers on various topics in the oral sessions. These included Mr. R. Murugeswaran, Dr. K. Venkatesan and Dr. D. Ramssamy, all from RRIUM, Chennai. One of the technical sessions was chaired by Mr. Aminuddin, Research Officer (Botany) at the CCRUM headquarters.

About 150 delegates, including academicians and researchers, participated in the two-day event and over 60 research papers were presented.

4.3.5. LIBRARY & INFORMATION PROFESSIONALS SUMMIT 2014

The Council's Assistant Library & Information Officer Mr. Mohammad Azhar Khan participated in the two-day Library & Information Professionals Summit-2014 themed on '*From Brick to Click: Transforming Libraries into Social Spaces*' during 7-8 February at the University of Delhi South

Campus. The Conference was jointly organized by the University of Delhi South Campus and the Society for Library Professionals in association with UN Information Centre for India and Bhutan and Special Libraries Association–Asian Chapter.

Mr. Azhar presented his paper on '*Role of the Library as Data Warehouse through Data Mining*' which was published in the conference proceeding. The main recommendation of the conference included that libraries must transform themselves into social, cultural and community spaces.

4.3.6. NATIONAL CONVENTION ON KNOWLEDGE, LIBRARY AND INFORMATION NETWORKING – NACLIN 2013

The Council's library and information staff participated in the 16th National Convention on Knowledge, Library and Information Networking – NACLIN 2013 jointly organized by Developing Library Network (DELNET), New Delhi and Malviya National Institute of Technology (MNIT), Jaipur at the Hoter Clark Amer, Jaipur during 10–12 December 2013.

The convention was themed on '*Emerging Technologies and Innovations in Library Practice*' which included deliberations on Emerging Digital Technologies, Digital Libraries Practices, Managing Web Resources, Library Networking and Consortia, Library Services and Users' Needs, Copyright, Human Resources Management, Information Services for Public, Knowledge Societies, etc.

The convention was inaugurated by Dr. H. P. Vyas, Vice Chancellor, Bikaner Technical University, while the presidential address was delivered by Professor I. K. Bhat, Director, MNIT Jaipur. More than 300 delegates from India, Bangladesh, Malaysia, Nepal, New Zealand and Sri Lanka participated in the convention. Over 25 papers and 30 posters were presented during the convention. Mr. Syed Shuaib Ahmad and Mr. Masood uz Zafar Khan, both Library and Information Assistant at the CCRUM headquarters, participated in the event.

4.4. TRAINING PROGRAMME

During the reporting period, the Council deputed its medical and non-medical scientists and investigators to the following training programmes for capacity building and updating their knowledge:

1. CME programme on evaluation of drug safety, organized by Vallabhbhai Patel Chest Institute, University of Delhi at Delhi on 15 April 2013.
2. Solutions for current analytical challenges – (technology seminar), organized by Waters India Pvt. Ltd. at Hyderabad on 16 May 2013.
3. Hindi workshop, organized by National Institute of Indian Medical Heritage at Hyderabad on 09 July 2013.
4. Training programme on AYUSH colleges hearing, organized by Department of AYUSH at New Delhi on 15 July 2013.
5. The clinical research summit 2013, organized by National Institute of Clinical Research at New Delhi on 28-29 July 2013.

6. Training programme on the use of Raj Bhasha organized by CCRUM at New Delhi during 12-16 August 2013.
7. Training programme on basics in drug discovery, organized by Indian Institute of Integrated Medicine at Jammu during 02-07 September 2013.
8. Design and analysis of randomized control trials organized by Indian Institute of Public Health at Delhi during 16-20 September 2013.
9. Training on working knowledge in Hindi on computers, organized by Hindi Training Plan at Postnett Bhavan, Hyderabad during 16-21 September 2013.
10. Emergency medical service system and innovation, and entrepreneurship in healthcare, organized by Department of Hospital Administration, AIIMS at New Delhi during 18-20 October 2013.
11. First clinico-radiology meet, organized by Department of Radiology, Hamdard Institute of Medical Sciences and Research (HIMSR) at New Delhi on 23 November 2013.
12. Workshop on botanical identification and evaluation of Indian medicinal plants at Jadavpur University, Kolkata during 20-26 November 2013.
13. National workshop on Nuskha Navisi organized by Department of Moalajat, Faculty of Unani Medicine, Aligarh Muslim University at Aligarh during 22-23 October 2013.
14. National workshop on hepatitis-B organized by Department of Tahaffuzi wa Samaji Tib, Ajmal Khan Tibbia College, Faculty of Unani Medicine, Aligarh Muslim University at Aligarh on 30 October 2013.
15. Training on working knowledge in Hindi on computers, organized by Hindi Training Plan at Postnett Bhavan, Hyderabad during 28 October - 01 November 2013.
16. Qualitative research methods and data analysis, organized by Indian Institute of Public Health at Delhi during 02-06 December 2013.
17. Training on working knowledge in Hindi on computers, organized by Hindi Training Plan at Secunderabad during 09-14 December 2013.
18. Workshop on regimenal therapy, organized by Unani Students Association, Government Tibbia College at Patna on 05 January 2014.
19. Multi-disciplinary healthcare, organized by All India Institute of Unani Medicine at New Delhi during 11-12 January 2014.
20. 71th Ardhwarshik Baithak, Nagar Raj Bhasha Karyanvan Samiti, organized by Upshadna Section, Hindustan Aeronautics Limited at Lucknow on 30 January 2014.
21. Workshop on statistical analysis using STATA, organized by Indian Institute of Public Health at Delhi during 20-24 January 2014.
22. Training workshop on research methodology, organized by Central Council for Research in Yoga and Naturopathy (CCRYN) at New Delhi during 03-07 February 2014.
23. 4th national conference on statistical inference, samplings techniques and related areas, organized by Department of Statistics and Operational Research, Aligarh Muslim University at Aligarh during 18-19 February 2014.

24. Workshop on importance and use of technical terminology, organized by Commission for Scientific and Technical Terminology at Hapur during 15-16 February, 2014.

4.5. PARTICIPATION IN AROGYA FAIRS

During the reporting period, the Central Council for Research in Unani Medicine (CCRUM) participated in *Arogya* fairs organized by Department of Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH), Ministry of Health & Family Welfare, Government of India at Hoshiarpur (Punjab), Jammu (Jammu & Kashmir), Kapurthala (Punjab), Kolkata (West Bengal), Jaipur (Rajasthan), Ghuman (Punjab) and Fazilka (Punjab). The *Arogya* fairs are organized to promote and propagate Indian systems of medicine and showcase their strengths in preventing as well as curing diseases with special feature of causing no side effects. They are aimed at highlighting major activities and achievements of the Councils of AYUSH in the area of research, providing free-of-cost diagnosis and treatment to the ailing visitors, and imparting awareness among the general public and health professionals about health, hygiene, and curative aspects of ill-health.

4.5.1. AROGYA AT HOSHIARPUR, PUNJAB

The Council participated in the *Arogya* fair held in Garhdiwala tehsil of Hoshiarpur district in Punjab from 5 to 6 October 2013. The health fair was jointly organized by Department of AYUSH, and the Government of Punjab to showcase the strengths, activities and achievements of the AYUSH systems.

Inaugurating the fair, Union Minister for Health & Family Welfare Mr. Ghulam Nabi Azad announced a tertiary cancer hospital for Hoshiarpur to be built up with a cost amounting to ₹ 45 crore. Mr. Azad said that the hospital would be in addition to the cancer institute that the Health Ministry had already promised to the State.

Mrs. Santosh Chowdhary, Minister of State for Health & Family Welfare, Government of India; Mr. Surjit Kumar Jiyani, Health & Family Welfare Minister, Government of Punjab; and Mr. Sham Sunder Arora, MLA, Hoshiarpur also spoke on the occasion.

Among the dignitaries present on the occasion were Mr. Sangat Singh Gilzian, MLA; Mr. Anil Kumar Ganeriwala, Joint Secretary, Department of AYUSH, Ministry of Health & Family Welfare, Government of India; Mrs. Vini Mahajan, Principal Secretary, Health & Family Welfare, Government of Punjab; Prof. S. Shakir Jamil, Director General, CCRUM; and Prof. Abhimanyu Kumar, Director General, Central Council for Research in Ayurvedic Sciences (CCRAS).

After the inaugural ceremony, Mr. Ghulam Nabi Azad, Mrs. Santosh Chowdhary, Mrs. Vini Mahajan and various other dignitaries went round the CCRUM's pavilion as well as other stalls at the fair.

The CCRUM pavilion at the *Arogya* displayed the Council's progress in its research programmes namely clinical research, drug standardization, survey and cultivation of medicinal plants, and literary research. On display were also the Council's publications.

Beside public lectures by experts, a free health clinic was also put up by the Council to provide free health check-up and treatment to the visitors.

4.5.2. AROGYA AT JAMMU, JAMMU & KASHMIR

The Council participated in the Arogya fair held at Jammu from 21 to 24 December. The fair was organized by the Department AYUSH; Directorate of Indian Systems of Medicine, Government of Jammu & Kashmir; and Federation of Indian Chambers of Commerce and Industry (FICCI).

The event was jointly inaugurated by Mr. Ghulam Nabi Azad, Minister of Health & Family Welfare, Government of India, and Mr. Omar Abdullah, Chief Minister of Jammu & Kashmir. Speaking on the occasion, Mr. Azad highlighted the Central Government initiatives to popularize AYUSH systems in the country. He informed that the Government of India had provided financial assistance to the State Government for construction and up-gradation of 322 health centers and hospitals and grant under National Rural Health Mission to the State had been increased from ₹ 232 crore to ₹ 436 crore.

Addressing the event, Mr. Omar Abdullah said that the right to medicare should be recognized as a fundamental right of the people in order to legally empower them to seek the best available medical treatment free of cost in government health centers and hospitals. He described Jammu & Kashmir as a State of medicinal plants, and said that his government had taken various steps to harness this natural wealth and utilize it for both health and economic purposes.

Union Minister of State for Health & Family Welfare Mrs. Santosh Chowdhary stressed the need to make maximum utilization of medicinal plants found in Jammu & Kashmir.

The CCRUM displayed its research activities through posters and other exhibits and organized free health consultancy and clinic for the visitors.

4.5.3. AROGYA AT KAPURTHALA, PUNJAB

The CCRUM participated in the Arogya fair held at Ramgarhia Polytechnic College, Satnampur, Phagwada in Kapurthala district of Punjab during 28–29 January 2014. The fair was organized by the Department of AYUSH in collaboration with the State government.

The event was inaugurated by Mrs. Santosh Chowdhary, Minister of State for Health & Family Welfare, Government of India. Mr. Nilanjan Sanyal, Secretary (AYUSH), Ministry of Health & Family Welfare, Government of India, Mr. Anil Kumar Ganeriwala, Joint Secretary (AYUSH), Ministry of Health & Family Welfare, Government of India, Mr. Hussan Lal, Secretary (AYUSH), Government of Punjab, and Mr. O.P. Upadhyay, Vice Chancellor, Guru Ravi Dass Ayurved University, Punjab were also present on the occasion.

Inaugurating the event, Mrs. Santosh Chowdhary emphasized on optimum use of the remedies provided by the Indian systems of medicine and motivated the participants to actively participate in the promotion and propagation of these systems.

In his talk, Mr. Sanyal highlighted the activities and achievements of the Department of AYUSH and stressed upon quality education and manufacturing in AYUSH systems.

Mrs. Chowdhary as well as other dignitaries visited and appreciated the stall put up by the CCRUM. Hundreds of common people also visited the stall during the fair and gathered information about the system, treatment facilities of the Council and treatment of selected diseases. The Council also arranged health clinic which provided free consultancy and treatment to the patients.

Under the health awareness programme, 12 invited lectures were delivered by AYUSH doctors. Two of them were delivered by the Council's Officers giving detailed account of concepts and treatment approaches of Unani Medicine in general health management as well as in skin disorders.

4.5.4. AROGYA AT KOLKATA, WEST BENGAL

The Council participated in the National Arogya fair organized by the Department of AYUSH during 8–11 February 2014 in Kolkata. The fair was inaugurated by Mr. A.H. Khan Choudhury, Minister of State for Health & Family Welfare, Government of India. The inaugural function was presided over by Mrs. Chandrima Bhattacharyya, Minister of State for Health & Family Welfare, Government of West Bengal and Dr. Nirmal Maji, Parliamentary Secretary, Government of West Bengal was the Guest of Honour.

Inaugurating the fair, Mr. Choudhury said that over the past three decades there had been a tremendous resurgence of peoples' interest in the AYUSH systems due to their holistic approach towards health and disease management.

Mr. Nilanjan Sanyal, Secretary (AYUSH), Ministry of Health & Family Welfare, Government of India; Mr. Malay Kumar De, Principal-Secretary, Health & Family Welfare, Government of West Bengal; Mr. Gautam Ghosh, Director General, AYUSH, Government of West Bengal also addressed the gathering.

The CCRUM showcased its progress in its research programmes and its research publications. It also distributed free informative material on promotion of health and prevention and care of diseases. It also arranged free health and consultancy clinic for the visitors.

4.5.5. AROGYA AT JAIPUR, RAJASTHAN

The Council participated in the Arogya fair organized by the Department of AYUSH, and the Government of Rajasthan at Jaipur from 28 February to 03 March 2014. Mr. Rajendra Singh Rathore, Minister for Medical and Health, Government of Rajasthan inaugurated the fair.

During the four-day event, the CCRUM provided free consultancy and treatment to more than 1,100 visitors, and distributed literature on promotion of health, prevention of diseases, and management of healthy life. It also highlighted its achievements and progress in its research programmes.

The fair also had lecture sessions to create awareness about the management of healthy lifestyle and popularize AYUSH systems. More than 24 such lectures were delivered by AYUSH researchers and doctors.

4.5.6. AROGYA AT GHUMAN, PUNJAB

The Council took active participation in Arogya fair held at Ghuman in Gurdaspur district of Punjab during 03–04 February 2014. The fair was organized by the Department of AYUSH in collaboration with the Government of Punjab.

Inaugurating the fair, Mrs. Santosh Chowdhary, Minister of State for Health & Family Welfare, Government of India highlighted the initiatives of the Central Government to improve and popularize Indian systems of medicine. Dr. Rakesh Sharma, Director of AYUSH, Punjab; Local MLA; District Medical Officer; and many other local doctors were also present at the inaugural function.

The CCRUM displayed translites on its research activities, charts and posters on diseases like psoriasis, vitiligo, filariasis, sinusitis, eczema and women's problems at its stall. It also distributed free-of-cost Unani literature on healthy living and history of Unani Medicine as well as success stories on effects of its medicines in treatment of various chronic diseases.

The Council also organized a health clinic at the fair to provide free consultancy and treatment to the visitors. Over 400 patients, suffering from arthritis, psoriasis, diabetes mellitus, seasonal cold and cough, bronchial asthma and digestive problems, benefited from the clinic. For the effective treatment of arthritis and skin problems like vitiligo, patients were advised to visit nearby Unani research centres. The Council also organized lecture session for the visitors.

4.5.7. AROGYA AT FAZILKA, PUNJAB

The Council participated in Arogya fair organized by the Department of AYUSH in collaboration with the Government of Punjab at Fazilka, Punjab during 7–9 February 2014. Apart from the activities for promotion and propagation of Indian systems of medicine and providing free treatment to the visitors, the fair highlighted the unique benefits and recent development of AYUSH systems.

The fair was inaugurated by Mr. Surjit Kumar Jiyani, Health & Family Welfare Minister, Government of Punjab. In his welcome address, Mr. Jiyani laid emphasis on the use of traditional medicine to avoid after-effects of modern medicine. He also underscored the need for scientific validation of AYUSH systems and appreciated the works already done in this area.

Dr. Rakesh Sharma, Director of AYUSH, Punjab; Dr. Ravi, District Ayurveda/Unani Officer; Dr. Navjot Kaur Sidhhu, MLA, and other dignitaries were also present in the inaugural ceremony.

At the fair, the CCRUM stall displayed its activities and achievements in its research programmes. The Council's physicians also extended their services to the patients visiting the health clinics arranged by the AYUSH systems. These clinics benefited up to 6,000 patients.

4.6. PARTICIPATION IN PROMOTION OF OFFICIAL LANGUAGE

With a view to motivating employees to create an environment for implementation of the Official Language Policy in day-to-day work, Hindi Pakhwara (fortnight) was celebrated at the CCRUM headquarters in New Delhi and its different institutes. Section-wise review of Hindi

works done at the headquarters was also conducted besides organizing various competitions during the event.

The Pakhwara at the CCRUM headquarters was conducted during 06-25 September. The prize distribution function was held on 27 September. Speaking on the occasion, the Chief Guest Mr. R. P. Singh, Joint Secretary, Department of AYUSH, Ministry of Health & Family Welfare, Government of India appreciated the Council for organizing the Pakhwara with great enthusiasm and spirit. Addressing the audience, Prof. Shakir Jamil, Director General, CCRUM said that sincere efforts at each level were needed for greater promotion of Hindi language. Mr. Pradeep Kumar Sharma, Senior Research Officer, Committee of Parliament on Official Language, New Delhi was the Guest of Honour. Earlier inaugurating Pakhwara on 6 September, Prof. Shakir Jamil said that the use of Hindi had increased at the Council during the past few years.

During the Hindi Pakhwara, the Council organised Hindi Shrutlekh (Dictation) Competition, Hindi Translation Competition, Hindi Note Writing Competition, Hindi Debate Competition, Hindi Poetry Competition and Essay Writing Competition. The competitions were open for the Council's employees at the headquarters and its centres in Delhi - Regional Research Institute of Unani Medicine (RRIUM), Literary Research Institute of Unani Medicine (LRIUM), and Drug Standardization Research Unit (DSRU), and the Ghaziabad-based Drug Standardisation Research Institute (DSRI).

4.6. APPOINTMENTS

Hakim Akhtar Hussain Jamali was appointed Research Officer (Unani) at Regional Research Institute of Unani Medicine (RRIUM), Srinagar on 24 April 2013.

Hakim Mohammad Nawab was appointed Research Officer (Unani) at RRIUM, Kolkata on 25 April 2013.

Hakim Shaikh Nikhat Parveen was appointed Research Officer (Unani) at RRIUM, Chennai on 25 April 2013.

Hakim Mohammad Zakir was appointed Research Officer (Unani) at RRIUM, Bhadrak on 25 April 2013.

Hakim Mohammad Wasim Ahmad was appointed Research Officer (Unani) at RRIUM, Patna on 25 April 2013.

Hakim Rajesh was appointed Research Officer (Unani) at Regional Research Centre, Allahabad on 04 November 2013.

Mr. Gulam Mohammad Husain was appointed Research Officer (Pharmacology) at Central Research Institute of Unani Medicine (CRIUM), Hyderabad on 04 November 2013.

Mr. Mohammad Niyaz Ahmad was appointed Research Officer (Publication) at Central Council for Research in Unani Medicine (CCRUM) headquarters on 24 June 2013.

Mr. Ashish Mohan Tiwari was appointed Investigator (Statistics) at RRIUM, New Delhi on 10 February 2014.

Mr. Anirban Goswami was appointed Investigator (Statistics) at RRIUM, Patna on 21 February 2014.

Mr. Mohammad Nasim was appointed Investigator (Statistics) at Regional Research Centre, Allahabad on 13 February 2014.

Mr. Narendra Singh was appointed Investigator (Statistics) at RRIUM, Bhadrak on 19 February 2014.

Mr. Mohammad Urooj was appointed Assistant Research Officer (Pharmacology) at RRIUM, Aligarh on 04 January 2014.

Mr. Goli Panchala Pratap was appointed Research Assistant (Botany) at CRIUM, Hyderabad on 03 March 2014.

Mr. Abdul Rasheed N. was appointed Research Assistant (Chemistry) at CRIUM, Hyderabad on 28 October 2013.

4.7. RETIREMENTS

Hakim Abdul Hannan, Joint Director (Unani) at the CCRUM headquarters, retired on superannuation on 31 December 2013 after serving the Council for more than 33 years. He joined the Council as Assistant Research Officer (Unani) on 21 April 1979 and was promoted to Research Officer (Unani) on 17 September 1985.

Mr. Mohammad Suhail Anwar, Store Keeper at the CCRUM headquarters, retired on 30 April 2013. He joined the Council on 14 July 1980.

Mr. Mohammad Lateefuddin, Ward Boy at CRIUM, Hyderabad, retired on 30 April 2013. He joined the Council on 29 May 1978.

Mrs. Ajmeri Begum, Aya at CRIUM, Hyderabad, retired on 31 May 2013. She joined the Council on 25 August 1978.

Mr. S. Badiuddin, Lab Technician at CRIUM, Hyderabad, retired on 31 May 2013 after serving for more than 31 years. He joined the Council on 01 April 1972.

Mr. Fazlur Rehman, Upper Division Clerk at CRIUM, Hyderabad, retired on 30 June 2013. He joined the Council on 15 April 1973.

Mrs. Veena Gaba, Senior Stenographer at CCRUM headquarters retired on 31 July 2013. She joined the Council on 13 August 1976.

Mrs. Anurekha Lala, Sister In-charge at RRIUM, Patna, retired on 31 July 2013. She joined the Council on 25 January 1983.

Hakim Rafat Mahmooda, Deputy Director (Unani) at RRIUM, Chennai, retired on superannuation on 31 August 2013. She joined the Council on 28 November 1980.

Mr. Mohammad Nasim, Administrative Officer at the CCRUM headquarters, retired on 31 August 2013. He joined the Council on 25 March 1980.

Hakim Irshad Ahmad Khan, Research Officer (Unani) at RRIUM, Kolkata, retired on 31 August 2013. He joined the Council's service on 05 August 1996.

Mr. Ziauddin, Laboratory Technician at CRIUM, Hyderabad, retired on 31 August 2013. He joined the Council on 05 August 1978.

Dr. Habibur Rehman, Research Officer (Pharmacology) at RRIUM, Aligarh, retired on 30 September 2013. He joined the Council on 20 August 1979.

Mr. Viqar Ahmad, Assistant Research Officer (Pharmacology) at Drug Standardization Research Institute, Ghaziabad, retired on 30 November 2013. He joined the Council on 15 February 1980.

Mrs. Urooj Rizivi, Museum Assistant at CRIUM, Lucknow, retired on 31 December 2013. She joined the Council on 06 September 1982.

Mr. Jamil Ansari, Assistant at CCRUM headquarters, retired on 31 January 2014. He joined the Council on 21 April 1979.

Mrs. Atiya Rehana, Research Officer (Chemistry) at CRIUM, Hyderabad, retired voluntarily on 01 February 2014. She joined the Council on 12 June 1979.

Mrs. Sarla Siddiqui, Sister In-charge at CRIUM, Lucknow, retired on superannuation on 28 February 2014. She joined the Council on 04 September 1987.

Dr. M. Abdul Qasim, Research Officer (Chemistry) at RRIUM, Aligarh, retired on superannuation on 31 March 2014 after serving the Council since 23 August 1979.

Hakim M. Kamaluddin, Research Officer (Unani) at CRIUM, Hyderabad, retired on superannuation on 31 March 2014. He joined the Council on 22 January 1983.

Mr. B. Shyam Rao, Field Attendant at CRIUM, Hyderabad, retired on 31 March 2014. He joined the Council on 09 June 1976.

Mr. M. Farooq Ahmad, Laboratory Technician at CRIUM, Hyderabad, retired on 31 March 2014. He joined the Council on 12 April 1977.

4.8. DEATH

Mr. Mohammad Yusuf, Cook at CRIUM, Hyderabad, expired on 18 January 2014. He joined the Council on 26 August 1978.

5. FINANCIAL STATEMENT

5.1. AUDIT REPORT

SEPARATE AUDIT REPORT OF THE COMPTROLLER & AUDITOR GENERAL OF INDIA ON THE ACCOUNTS OF CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE (CCRUM) FOR THE YEAR ENDED 31 MARCH 2014.

We have audited the attached Balance Sheet of Central Council for Research in Unani Medicine (CCRUM) as at 31 March 2014, the Income & Expenditure Account and Receipts & Payments Account for the year ended on that date under Section 20(1) of the Comptroller and Auditor General's (Duties, Powers & Conditions of Service) Act, 1971. The audit has been entrusted for the period upto 2013-14. These financial statements include the accounts of nine regional offices of the Council. These financial statements are the responsibility of the Council's management. 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 and Auditor General of India 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 Laws, Rules & Regulations (Propriety and Regularity) and efficiency-cum-performance aspects, etc., if any are reported through Inspection Reports/Comptroller and Auditor General'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, evidences 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 and Receipts & Payments Account dealt with by this report have been drawn up in the format approved by the Ministry of Finance.
- (iii) In our opinion, proper books of accounts have been maintained by the Council in so far as it appears from our examination of such books.
- (iv) We further report that :

A. Grants-in-aid

(i) Health Account

The Central Council for Research in Unani Medicine (CCRUM) received a grant of ₹ 103.58 crore (Plan ₹ 64.77 crore and Non-Plan ₹ 38.81 crore)

during 2013-14, in addition to unspent balance of previous year ₹ 4.94 core (Plan ₹ 4.29 crore and Non-Plan ₹ 0.65 crore). The Council had its own receipt of ₹ 2.75 core (Plan ₹ 0.68 crore and Non-Plan ₹ 2.07 crore). The Council utilized ₹ 104.26 crore (Plan ₹ 65.10 crore and Non-Plan ₹ 39.16 crore) leaving an unutilized balance of ₹ 7.01 crore (Plan ₹ 4.64 crore and Non-Plan ₹ 2.37 crore) during 2013-14.

(ii) Specific Project Account

The Central Council for Research in Unani Medicine (CCRUM) received a grant of ₹ 0.50 crore for specific projects from various agencies, in addition to unspent balance of previous year ₹ 2.49 crore. The Council had its own receipt of ₹ 0.86 core. The Council utilized ₹ 1.37 crore leaving an unutilized balance of ₹ 2.48 crore during 2013-14.

- (v) Subject to our observations in the preceding paragraphs, we report that the Balance Sheet, Income and Expenditure Account and 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 explanations given to us, the said financial statements read together with 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 it relates to the Balance Sheet, of the state of affairs of the Central Council for Research in Unani Medicine as at 31 March 2014; and
 - b. In so far as it relates to Income and Expenditure Account of the surplus for the year ended on that date.

For and on the behalf of C&AG of India



Director General of Audit
(Central Expenditure)

Place: New Delhi
Date: 07 November 2014

ANNEXURE I

1. Adequacy of internal audit system

- The internal audit of the Council was conducted upto 2011-12 by the Ministry of Health & Family Welfare.

2. Adequacy of internal control system

- 26 paras pertaining to the period 2000-2001 to 2009-12 were outstanding.

3. System of physical verification of fixed assets

- The physical verification of fixed assets had been conducted upto 2013-14.

4. System of physical verification of inventory

- The physical verification of Books and Publications had been conducted upto 2010-11
- The physical verification of stationery and consumables etc. had been conducted upto 2013-14.

5. Regularity in payment of statutory dues

- No payment over six months in respect of statutory dues were outstanding as on 31.03.2014.

5.2. AUDITED STATEMENT OF ACCOUNTS

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Index of the Annual Accounts for the Year 2013-14

S. No.	Name of the accounts	Page No.	Schedules at Page No.
1.	Receipt & Payment account	121-122	125 – 170
2.	Income & Expenditure account	123	171 – 173
3.	Balance Sheet	124	174 – 177
4.	Notes on Accounts	178	–

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Receipt & Payment Account for the year ended 31 March 2014

S. No.	Receipts	Current Year	Previous Year	S. No.	Payments	Current Year	Previous Year
1.	Opening balance			1.	Establishment expenses	55,30,38,479.00	50,42,53,973.00
	(i) Cash in hand	2,24,748.75	2,02,723.75	2.	Administrative expenses	7,58,74,787.50	7,76,19,369.41
				3.	Other expenses		
	(ii) Cash-at-bank	3,82,81,591.50	5,24,02,957.71	(i)	Material & Supplies	13,21,93,438.50	6,48,93,141.00
	Total opening balance	3,85,06,340.25	5,26,05,681.46	(ii)	Advance to Govt. servants	19,12,800.00	34,55,990.00
2.	GIA received			(iii)	Outstanding advances	3,01,54,134.00	96,60,203.00
	(i) From Government of India	1,01,72,00,000.00	86,82,00,000.00	(iv)	Other charges	1,57,70,296.00	11,73,15,292.00
	(ii) From other sources	-	-	4.	Investments (Out of own funds)	4,62,09,054.99	44,05,58,648.54
3.	Bank interest	1,48,05,117.77	3,79,66,391.00	5.	Fixed assets	1,93,99,216.00	2,81,98,134.13
4.	Interest on refundable advances	5,57,697.00	5,67,246.00	6.	Work in progress	18,30,25,860.00	12,29,96,000.00
5.	Other receipts	4,25,89,328.09	6,12,49,016.91	7.	Publications (Priced)	5,16,909.00	5,81,948.00
				8.	Remittance of recoveries	7,08,64,783.00	5,25,66,006.00
6.	By adjustment of advances pertaining to previous years	36,16,594.00	28,85,314.00	9.	Refund of unspent balance to concerned Deptts./Offices	-	63,69,538.00
7.	Recoveries for remittance	7,28,05,172.00	5,35,91,788.00	10.	Undisbursed amount in previous year disbursed	3,500.00	-
8.	Sale of publications (Priced)	5,01,725.00	3,11,118.00	11.	Amount to be received from concerned a/c. Instts.	35,000.00	2,507.00

Sd/-
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Sd/-
(F.A. Bazaz)
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Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Receipts	Current Year	Previous Year	S. No.	Payments	Current Year	Previous Year
9.	Recovery of subscription & advances	4,45,93,967.00	5,14,68,614.00		Amount to be received from concerned a/c, Instts.	13,75,931.00	3,00,801.00
10.	Investment received	9,39,62,012.11	40,38,07,148.01	12.	LIC amount disbursed	3,00,000.00	7,10,000.00
11.	Amount receivable received	89,22,451.41	2,23,80,369.63	13.	Other misc. payments/ transfers	10,18,55,003.00	9,33,71,151.00
12.	Security deposit	5,38,000.00	5,57,300.00	14.	Amount remitted by decentralized Institutes to be contra against their receipts in Hqrs, New Delhi	1,30,313.00	33,672.00
13.	In transit in previous year received	5,00,60,183.00	22,52,00,000.00	15.	Balance transferred to other a/cs	-	42,869.68
14.	Payable to other a/cs	8,171.00	3,507.00	16.	Arogya (North East)	-	5,63,280.00
15.	Recovery of refundable advances	25,95,507.00	26,14,942.00	17.	Amount payable paid	4,33,14,425.00	20,29,26,707.00
16.	Undisbursed amount	-	10,964.00	18.	NPS amount transferred to NPS Trustee Bank a/c	3,66,50,006.00	1,92,44,404.00
17.	LIC for disbursement	3,00,000.00	7,10,000.00	19.	Closing Balance		
18.	Petty Cash Balance (RRI, New Delhi)	-	40,247.00		Cash-in-hand	2,16,854.75	2,24,748.75
19.	Amount received to be contra against their remittance by the decentralized Institutes	1,30,313.00	328.00		Cash-at-bank	7,88,51,787.89	3,82,81,591.50
	Total Rs.	1,39,16,92,578.63	1,78,41,69,975.01		Total Rs.	1,39,16,92,578.63	1,78,41,69,975.01

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(Prof. S. Shakir Jamil)
Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Income & Expenditure Account for the year ending 31 March 2014

S. No.	Expenditure	Current Year	Previous Year	S. No.	Income	Current Year	Previous Year
1.	Establishment expenditure	57,03,09,489.00	50,85,94,217.00	1.	GIA	1,03,58,00,000.00	90,46,00,000.00
2.	Administrative expenditure	7,49,67,137.50 13,21,45,558.50	7,61,08,164.50 6,48,93,141.00	2.	Other income	1,87,40,583.00	1,46,40,097.71
3.	Other charges	1,26,91,595.00	11,80,77,803.00	3.	Less : Capitalised expenditure	(-) 19,58,12,079.00	(-) 17,24,88,636.00
4.	Depreciation	2,91,04,574.25	3,16,92,179.00	4.	Excess of expenditure over income	-	5,26,14,042.79
5.	Balance being excess of income over expenditure	3,95,10,149.75					
	Total Rs.	85,87,28,504.00	79,93,65,504.50		Total Rs.	85,87,28,504.00	79,93,65,504.50

Sd/-
(S. Asif Mian)
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Sd/-
(Prof. S. Shakir Jamil)
Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Balance Sheet as on 31 March 2014

S. No.	Liabilities	Schedule No.	Current Year	Previous Year	S. No.	Assets	Schedule No.	Current Year	Previous Year
1.	Capital fund	(S/1)	1,01,40,04,956.02	77,90,08,838.02	1.	Fixed assets	(S/3)	89,47,14,936.00	72,83,33,542.00
2.	Current liabilities	(S/2)	43,13,01,816.79	50,89,42,704.82	2.	Investments (Others)	(S/5C)	34,69,92,129.11	39,47,45,086.23
3.	Earmarked/Endowment fund	S/3(A)	2,47,65,219.14	2,49,13,443.05	4.	Current assets:			
					(i)	Loans & advances	(S/5B)	14,92,96,284.20	15,12,80,017.41
					(ii)	Bank/Cash balance : 5,43,03,423.50 2,47,65,219.14	(S/5A)	7,90,68,642.64	3,85,06,340.25
	Total Rs.		1,47,00,71,991.95	1,31,28,64,985.89		Total Rs.		1,47,00,71,991.95	1,31,28,64,985.89

Sd/-
(S. Asif Mian)
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(Prof. S. Shakir Jamil)
Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Schedule of Receipts for the year ending 31 March 2014

S. No.		Opening Balance		GIA		Bank Interest	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(1)		(2)		(3)	
1.	Health scheme a/c						
	(1) NON-PLAN						
	(i) Health scheme			36,45,00,000.00	35,71,00,000.00	66,50,038.00	37,04,970.00
	(a) Cash in hand (Imprest)	15,200.00	15,200.00				
	(b) Cash-at-bank	4,047.61	65,21,841.11				
	Total (Non-plan) S. No. 1	19,247.61	65,37,041.11	36,45,00,000.00	35,71,00,000.00	66,50,038.00	37,04,970.00
2.	PLAN						
	(i) Health scheme a/c			64,77,00,000.00	49,95,00,000.00	6,32,934.00	21,13,265.00
	(a) Cash-in-hand (Imprest)	1,92,667.60	1,82,667.60				
	(b) Cash-in-hand (other than imprest)	16,881.15	4,856.15				
	(c) Cash-at-bank	11,56,683.92	34,83,179.21				
	Total (H) PLAN	13,66,232.67	36,70,702.96	64,77,00,000.00	49,95,00,000.00	6,32,934.00	21,13,265.00

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Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Opening Balance		GIA		Bank Interest	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(1)	(2)	(3)			
(ii)	ROTP a/c	-	-	-	-	-	-
(iii)	Herbgarden a/c	29,753.00	77,156.00			1,201.00	898.00
(iv)	Pub. of text book a/c	45,550.00	43,777.00			1,841.00	1,773.00
(v)	UPS a/c I	39,206.00	37,986.68			1,546.00	1,496.00
(vi)	Seminar a/c	-	-	-	-	-	-
(vii)	DSOP	1,77,068.05	1,70,299.05			7,023.00	6,769.00
(viii)	AIUM a/c	-	-	20,00,000.00	-	-	-
(ix)	Digitisation of manuscript a/c	-	14,948.00			107.00	605.00
(x)	WHO a/c	1,827.00	1,690.00			74.00	137.00
(xi)	NMPB a/c	-				-	
(xii)	UPS a/c II	-	861.00			-	
(xiii)	ICST a/c	-				-	
(xiv)	Donation a/c	-	41,921.75			-	671.25
(xv)	International events/conference a/c	5,83,042.00	5,60,342.00			23,555.00	22,700.00
(xvi)	DST a/c	97,85,318.00	1,06,31,878.74		1,16,00,000.00	947.00	2,08,024.30

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Opening Balance		GIA		Bank Interest	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(1)	(2)	(3)			
	(xvii) CRISM a/c	1,31,20,207.00	8,42,858.00			4,27,859.00	3,02,747.00
	(xviii) CICISM a/c	-	63,19,191.00			-	33,933.00
	(xix) South African a/c	11,31,472.00	30,78,270.00	30,00,000.00		61,085.00	1,07,110.00
	Total (Plan) S. No. 2	2,62,79,675.72	2,54,91,882.18	65,27,00,000.00	51,11,00,000.00	11,58,172.00	28,00,128.55
3.	(i) NPS a/c	48,98,448.95	13,78,666.33			37,47,998.99	8,68,239.04
	(ii) CPF/GPF a/c	11,66,949.24	12,62,376.61			11,67,202.91	2,88,15,596.19
	(iii) GIS a/c	4,13,416.87	7,13,107.65			53,025.98	7,50,375.17
	(iv) Pension fund a/c	57,28,601.86	1,72,22,607.58			20,28,679.89	10,27,082.05
	Total S. No. 3	1,22,07,416.92	2,05,76,758.17			69,96,907.77	3,14,61,292.45
	Grand Total S. No. 1 to 3	3,85,06,340.25	5,26,05,681.46	1,01,72,00,000.00	86,82,00,000.00	1,48,05,117.77	3,79,66,391.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Miscellaneous Receipts		Interest on Refundable Advances		By Adjustment of Advances Pertaining to Previous Years	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(4)	(5)	(6)	(7)	(8)	(9)
1.	Health scheme a/c						
	(1) NON-PLAN						
		85,61,923.00	38,59,200.00	4,46,196.00	4,17,625.00	428.00	7,46,370.00
						8,75,367.00	
	Total (Non-plan) S. No. 1	85,61,923.00	38,59,200.00	4,46,196.00	4,17,625.00	8,75,795.00	7,47,370.00
2.	PLAN						
	(i) Health scheme a/c	23,36,691.00	46,97,513.71	1,11,501.00	1,49,621.00	25,73,799.00	17,34,944.00
	Total (H) PLAN	23,36,691.00	46,97,513.71	1,11,501.00	1,49,621.00	25,73,799.00	17,34,944.00
	(ii) ROTP a/c						
	(iii) Herbgarden a/c		2,029.00				2,00,000.00
	(iv) Pub. of textbook a/c						
	(v) UPS a/c I						
	(vi) Seminar a/c						
	(vii) DSOP						
	(viii) EMR						

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Miscellaneous Receipts		Interest on Refundable Advances		By Adjustment of Advances Pertaining to Previous Years	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(4)		(5)		(6)	
	(ix) Digitisation of manuscript a/c						
	(x) WHO a/c						
	(xi) NMPB a/c						
	(xii) UPS a/c II						
	(xiii) ICST a/c						
	(xiv) Donation a/c						
	(xv) International events/conference a/c						
	(xvi) DST a/c	76,32,601.09	27,050.00 + 37,11,718.00				
	(xvii) CRISM a/c					1,67,000.00	2,04,000.00
	(xviii) CICISM a/c						
	Total (Plan) S. No. 2	99,69,292.09	84,38,310.71	1,11,501.00	1,49,621.00	27,40,799.00	21,38,944.00
3.	(i) NPS a/c		15,00,000.00				
	(ii) CPF/GPF a/c						
	(iii) GIS a/c						

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

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(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Miscellaneous Receipts		Interest on Refundable Advances		By Adjustment of Advances Pertaining to Previous Years	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(4)		(5)		(6)	
	(iv) Pension fund a/c	2,35,00,000.00 57,200.00	57,202.00 8,816.00+				
		5,00,913.00	3,90,00,000.00				
			7,203.20+ 97,640.00				
			2,04,541.00				
			36,51,456.00				
			35,87,249.00+ 7,94,806.00+ 42,593.00				
	Total S. No. 3	2,40,58,113.00					
	Grand Total S.No. 1 to 3	4,25,89,328.09	6,12,49,016.91	5,57,697.00	5,67,246.00	36,16,594.00	28,85,314.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE | 131

S. No.		Recoveries of Refundable Advances		Sale of Council's Publications	
		Current Year	Previous Year	Current Year	Previous Year
		(7)		(8)	
	(x) WHO a/c				
	(xi) NMPB a/c				
	(xii) UPS a/c II				
	(xiii) ICST a/c				
	(xiv) Donation a/c				
	(xv) International events/conference a/c				
	(xvi) DST a/c				
	(xvii) CRISM a/c				
	(xviii) CICISM a/c				
	Total (Plan) S. No. 2	3,83,200.00	4,53,300.00		
3.	(i) NPS a/c				
	(ii) CPF/GPF a/c				
	(iii) GIS a/c				
	(iv) Pension fund a/c				
	Total S. No. 3	-			
	Grand Total S. No. 1 to 3	25,95,507.00	26,14,942.00	5,01,725.00	3,11,118.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Recoveries for Remittance		Recovery of Subscription/Advances		Misc. Receipt to be Transferred to Pension Fund A/c	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
			(9)		(10)		(11)
1.	Health scheme a/c						
	(1) NON-PLAN						
	Health scheme	5,03,74,627.00	3,75,00,459.00				61,395.00
		3,89,571.00	2,50,824.00				
	Total (Non-plan) S. No. 1	5,07,64,198.00	3,77,51,283.00	-	-	-	61,395.00
2.	PLAN						
	(i) Health scheme a/c	1,93,01,869.00	1,21,66,023.00				
	(b) Cash-at-bank						
	Total (H) PLAN	1,93,01,869.00	1,21,66,023.00	-	-	-	-
	(ii) ROTP a/c						
	(iii) Herbgarden a/c						
	(iv) Pub. of textbook a/c						
	(v) UPS a/c I						
	(vi) Seminar a/c						
	(vii) DSOP						

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Recoveries for Remittance		Recovery of Subscription/Advances		Misc. Receipt to be Transferred to Pension Fund A/c	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(9)	(10)	(11)			
	(vii) EMR						
	(ix) Digitisation of manuscript a/c						
	(x) WHO a/c						
	(xi) NMPB a/c						
	(xii) UPS a/c II						
	(xiii) ICST a/c						
	(xiv) Donation a/c						
	(xv) International events/conference a/c						
	(xvi) DST a/c						
	(xvii) CRISM a/c						
	(xviii) CICISM a/c						
	Total (Plan) S. No. 2	1,93,01,869.00	1,21,66,023.00				
3.	(i) NPS a/c			32,53,562.00	81,96,702.00		(-) 14,701.00
					34,60,392.00		(-) 3,186.00
					3,25,854.00		1,02,79,685.00
							(-) 1,02,091.00

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Accountant (I/A)

Sd/-
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Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Recoveries for Remittance		Recovery of Subscription/Advances		Misc. Receipt to be Transferred to Pension Fund A/c	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(9)		(10)		(11)	
	(ii) CPF/GPF a/c			(-) 500.00 3,73,61,339.00 31,89,336.00	3,54,55,669.00		3,44,46,222.00
					31,85,507.00		29,29,643.00
	(iii) GIS a/c			7,90,230.00	8,44,490.00		(+) 140.00 8,84,640.00 (-) 20.00 (-) 100.00
	(iv) Pension fund a/c	12,000.00 19,94,457.00 7,32,648.00	23,73,056.00 12,91,426.00 10,000.00				
	Total S. No. 3	27,39,105.00	36,74,482.00	4,45,93,967.00	5,14,68,614.00	-	
	Grand Total S. No. 1 to 3	7,28,05,172.00	5,35,91,788.00	4,45,93,967.00	5,14,68,614.00	-	4,84,20,232.00

Sd/-
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Accountant (I/A)

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(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Receivable Amount Received		Security Deposit		Advance Received from outside Institute	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(12)		(13)		(14)	
1.	Health scheme a/c						
	(1) NON-PLAN						
	Health scheme		16,43,810.00				
	Total (Non-plan) S. No. 1		16,43,810.00	-	-	-	-
2.	PLAN						
	(i) Health scheme a/c			4,38,000.00 (CCBC) 1,00,000.00 (CCRUM)	5,57,300.00		
	Total (H) PLAN	-	-	5,38,000.00	5,57,300.00		
	(ii) ROTP a/c						
	(iii) Herb garden a/c	2,507.00					
	(iv) Pub. of textbook a/c						
	(v) UPS a/c I						
	(vi) Seminar a/c						
	(vii) DSOP a/c						
	(viii) EMR a/c						
	(ix) Digitisation of manuscript a/c						
	(x) WHO a/c						

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Receivable Amount Received		Security Deposit		Advance Received from outside Institute	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(12)	(13)	(14)			
	(xi) NMPB a/c						
	(xii) UPS a/c II						
	(xiii) ICST a/c						
	(xiv) Donation a/c						
	(xv) International events/conference a/c						
	(xvi) DST a/c						
	(xvii) CRISM a/c		1,20,00,000.00				
	(xviii) CICISM a/c						
	Total (Plan) S. No. 2	2,507.00	1,20,00,000.00	5,38,000.00	5,57,300.00		
3.	(i) NPS a/c	1,000.00 31,18,658.94	4,53,359.75+ 36,409.00				
	(ii) CPF/GPF a/c	22,96,139.46	19,18,469.00 +39,79,622.71				
	(iii) GIS a/c	3,500.00 + 38,918.44	15,00,105.98				
	(iv) Pension fund a/c	34,61,727.57	8,48,593.19				
	Total S. No. 3	89,19,944.41	87,36,559.63				
	Grand Total S. No. 1 to 3	89,22,451.41	2,23,80,369.63	5,38,000.00	5,57,300.00		

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		In Transit Amount Received		Un-disbursed Amount		Payable Amount	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(15)		(16)		(17)	
1.	Health scheme a/c						
	(1) NON-PLAN						
	(i) Health scheme	65,00,000.00			1,000.00	2,261.00	1,000.00
						35.00	
	Total (Non-plan) S. No. 1	65,00,000.00	-	-	1,000.00	2,296.00	1,000.00
2.	PLAN						
	(i) Health scheme a/c	4,15,00,000.00	22,52,00,000.00		5,568.00+ 1,896.00		2,507.00
		3,34,181.00			2,500.00		
	TDS						
	Total (H) PLAN	4,18,34,181.00	22,52,00,000.00	-	9,964.00	-	2,507.00
	(ii) ROTP a/c						
	(iii) Herbgarden a/c						
	(iv) Pub. of textbook a/c						
	(v) UPS a/c I						
	(vi) Seminar a/c						
	(vii) DSOP a/c						
	(viii) EMR a/c						

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		In Transit Amount Received		Un-disbursed Amount		Payable Amount	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(15)	(16)	(17)			
	(ix) Digitisation of manuscript a/c						
	(x) WHO a/c						
	(xi) NMPB a/c						
	(xii) UPS a/c II						
	(xiii) ICST a/c						
	(xiv) Donation a/c						
	(xv) International events/conference a/c						
	(xvi) DST a/c						
	(xvii) CRISM a/c						
	(xviii) CICISM a/c						
	Total (Plan) S. No. 2	4,18,34,181.00				-	
3.	(i) NPS a/c	64,639.00					
	(ii) CPF/GPF a/c	16,51,023.00				5,875.00	
	(iii) GIS a/c	10,340.00					
	(iv) Pension fund a/c						
	Total S. No. 3	17,26,002.00				5,875.00	
	Grand Total S. No. 1 to 3	5,00,60,183.00	22,52,00,000.00	-	10,964.00	8,171.00	3,507.00

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Accountant (I/A)

Sd/-
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Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Investment Received		LIC Amount for Disbursement		Petty Cash Balance (RRIUM, New Delhi)	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(18)		(19)		(20)	
1.	Health scheme a/c						
	(1) NON-PLAN						
	(i) Health scheme						
	Total (Non-plan) S. No. 1						
2.	PLAN						
	(i) Health scheme a/c						40,247.00
							40,247.00
	Total (H) PLAN						
	(ii) ROTP a/c						
	(iii) Herbgarden a/c						
	(iv) Pub. of textbook a/c						
	(v) UPS a/c I						
	(vi) Seminar a/c						
	(vii) DSOP						
	(viii) EMR a/c						
	(ix) Digitisation of manuscript a/c						
	(x) WHO a/c						

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Administrative Officer

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(F.A. Bazaz)
Administrative Officer

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(Prof. S. Shakir Jamil)
Director General

S. No.		Investment Received		LIC Amount for Disbursement		Petty Cash Balance (RRIUM, New Delhi)	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(18)		(19)		(20)	
	(xi) NMPB a/c						
	(xii) UPS a/c II						
	(xiii) ICST a/c						
	(xiv) Donation a/c						
	(xv) International events/conference a/c						
	(xvi) DST a/c						
	(xvii) CRISM a/c						
	(xviii) CICISM a/c						
	Total (Plan) S. No. 2	-	-	-	-	-	40,247.00
3.	(i) NPS a/c	3,02,11,390.90	1,57,38,899.94				
	(ii) CPF/GPF a/c	2,65,31,795.59	+34,51,33,692.13				
	(iii) GIS a/c	7,87,786.81	2,97,22,893.10	3,00,000.00	7,10,000.00		
	(iv) Pension fund a/c	3,64,31,038.81	1,31,66,527.84				
	Total S. No. 3	9,39,62,012.11	40,38,07,148.01	3,00,000.00	7,10,000.00		
	Grand Total S. No. 1 to 3	9,39,62,012.11	40,38,07,148.01	3,00,000.00	7,10,000.00	-	40,247.00

Sd/-
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Accountant (I/A)

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(D.S. Negi)
Administrative Officer

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(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Amount Received to be Contra Against Remittance by Decentralized Institutes as Already Taken Receipts in Previous Year		Total Receipts	
		Current Year	Previous Year	Current Year	Previous Year
		(21)		(22)	
1.	Health scheme a/c				
	(1) NON-PLAN				
	(i) Health scheme		292.00	44,05,32,000.61	41,39,24,233.11
	Total (Non-plan) S. No. 1		292.00	44,05,32,000.61	41,39,24,233.11
2.	PLAN				
	(i) Health scheme a/c	1,30,313.00	36.00		75,06,06,541.67
	Total (H) PLAN	1,30,313.00	36.00	71,74,10,445.67	75,06,06,541.67
	(ii) ROTP a/c	-	-	-	-
	(iii) Herbgarden a/c	-	-	33,461.00	2,80,083.00
	(iv) Pub. of textbook a/c	-	-	47,391.00	45,550.00
	(v) UPS a/c I	-	-	40,752.00	39,482.68
	(vi) Seminar a/c	-	-	-	-
	(vii) DSOP	-	-	1,84,091.05	1,77,068.05
	(viii) AIUM a/c	-	-	20,00,000.00	-
	(ix) Digitisation of manuscript a/c	-	-	107.00	15,553.00
	(x) WHO a/c			1,901.00	1,827.00

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

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(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Amount Received to be Contra Against Remittance by Decentralized Institutes as Already Taken Receipts in Previous Year		Total Receipts	
		Current Year	Previous Year	Current Year	Previous Year
		(21)		(22)	
	(xi) NMPB a/c				
	(xii) UPS a/c II			-	861.00
	(xiii) ICST a/c				
	(xiv) Donation a/c			-	42,593.00
	(xv) International events/conference a/c			6,06,597.00	5,83,042.00
	(xvi) DST a/c			1,74,18,866.09	2,61,78,671.04
	(xvii) CRISM a/c			1,35,48,066.00	1,33,49,605.00
	(xviii) CICISM a/c			-	63,53,124.00
	(xix) South African a/c			43,59,557.00	31,85,380.00
	Total (Plan) S. No. 2			75,56,51,234.81	80,08,59,381.44
3.	(i) NPS a/c			4,52,95,698.78	3,19,58,522.06
	(ii) CPF/GPF a/c			7,33,69,160.20	41,97,96,067.64
	(iii) GIS a/c			23,97,218.10	3,42,40,971.90
	(iv) Pension fund a/c			7,44,47,266.13	8,33,90,798.86
	Total S. No. 3			19,55,09,343.21	56,93,86,360.46
	Grand Total S. No. 1 to 3	1,30,313.00	328.00	1,39,16,92,578.63	1,78,41,69,975.01

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Schedule of Payments for the year ending 31 March 2014

S. No.	Name of the Scheme	Establishment Expenses		Administrative Expenses		Material & Supplies	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(1)		(2)		(3)	
1.	Non-plan						
	(i) Health scheme a/c	38,10,39,871.00	37,25,58,100.00	35,41,195.50	26,41,803.50	3,97,298.00	2,22,333.00
	Total (Non-plan) S. No. 1	38,10,39,871.00	37,25,58,100.00	35,41,195.50	26,41,803.50	3,97,298.00	2,22,333.00
2.	Plan						
	(i) Health scheme a/c	16,93,65,450.00	12,98,18,540.00	7,14,25,942.00	7,19,06,745.00	13,17,48,260.50	6,46,70,808.00
	Total (H) Plan	16,93,65,450.00	12,98,18,540.00	7,14,25,942.00	7,19,06,745.00	13,17,48,260.50	6,46,70,808.00
	(ii) ROTP a/c						
	(iii) Herb garden a/c		5,500.00		2,42,323.00		
	(iv) Pub. of textbook a/c						
	(v) UPS a/c						
	(vi) Seminar a/c						

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Establishment Expenses		Administrative Expenses		Material & Supplies	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(1)	(2)	(3)			
	(vii) DSOP a/c						
	(viii) EMR a/c						
	(ix) Digitisation of manuscript a/c						
	(x) WHO a/c						
	(xi) NMPB a/c						
	(xii) UPS a/c II						
	(xiii) ICSJ a/c						
	(xiv) Donation a/c						
	(xv) International events/conference a/c						
	(xvi) DST a/c	7,79,136.00	-	6,75,167.00	24,17,024.91	47,880.00	
	(xvii) CRISM a/c	26,214.00	-	-	2,29,398.00	-	
	(xviii) CICISM a/c		-	-		-	
	(xix) South African a/c	18,27,808.00	18,71,833.00	2,32,483.00	1,82,075.00	-	
	Total (Plan) S. No.	17,19,98,608.00	13,16,95,873.00	7,23,33,592.00	7,49,77,565.91	13,17,96,140.50	6,46,70,808.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Establishment Expenses		Administrative Expenses		Material & Supplies	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
			(1)		(2)		(3)
3.	(i) NPS a/c						
	(ii) GPF a/c						
	(iii) GIS a/c						
	(iv) Pension fund a/c						
	Total S. No. 3						
	Total S. No. 1 to 3	55,30,38,479.00	50,42,53,973.00	7,58,74,787.50	7,76,19,369.41	13,21,93,438.50	6,48,93,141.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Assets		Publications (Priced)		Advances to Government Servants	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
			(4)		(5)		(6)
1.	Non-plan						
	(i) Health scheme a/c	4,809.00	56,075.00				
	Total (Non-plan) S. No. 1	4,809.00	56,075.00	-	-	-	-
2.	Plan						
	(i) Health scheme a/c	1,27,66,226.00	1,41,65,731.00	5,16,909.00	5,81,948.00	19,12,800.00	34,55,990.00
	Total (H) Plan	1,27,66,226.00	1,41,65,731.00	5,16,909.00	5,81,948.00	19,12,800.00	34,55,990.00
	(ii) ROTP a/c						
	(iii) Herb Garden a/c						
	(iv) Pub. of textbook a/c						
	(v) UPS a/c I						
	(vi) Seminar a/c						
	(vii) DSOP a/c						
	(viii) EMR a/c						

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Assets		Publications (Priced)		Advances to Government Servants	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(4)	(5)	(6)			
	(ix) Digitisation of manuscript a/c						
	(x) WHO a/c						
	(xi) NMPB a/c						
	(xii) UPS a/c II						
	(xiii) ICSJ a/c						
	(xiv) Donation a/c						
	(xv) International events/conference a/c						
	(xvi) DST a/c	66,28,181.00	14,80,571.00+ 1,24,95,757.13				
	(xvii) CRISM a/c						
	(xviii) CICISM a/c						
	(xix) South African a/c						
	Total (Plan)	1,93,94,407.00	2,81,42,059.13	5,16,909.00	5,81,948.00	19,12,800.00	34,55,990.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Assets		Publications (Priced)		Advances to Government Servants	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
			(4)	(5)	(6)		
3.	(i) NPS a/c						
	(ii) GPF a/c						
	(iii) GIS a/c						
	(iv) Pension fund a/c						
	Total S. No. 3						
	Total S. No. 1 to 3	1,93,99,216.00	2,81,98,134.13	5,16,909.00	5,81,948.00	19,12,800.00	34,55,990.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Outstanding Advances		Other Charges		Works in Progress	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
			(7)	(8)	(9)		
1.	Non-plan						
	(i) Health scheme a/c	3,73,115.00	7,42,426.00	-			
		2,26,580.00	17,171.00	-			
	Total (Non-plan) S. No. 1	5,99,695.00	7,59,597.00	-			
2.	Plan						
	(i) Health scheme a/c	2,89,90,075.00	82,05,625.00	1,26,91,595.00	11,73,15,292.00	18,30,25,860.00	12,29,96,000.00
		3,84,364.00	6,94,981.00				
	Total (H) Plan	2,93,74,439.00	89,00,606.00	1,26,91,595.00	11,73,15,292.00	18,30,25,860.00	12,29,96,000.00
	(ii) ROTP a/c						
	(iii) Herbgarden a/c						
	(iv) Pub. of textbook a/c						
	(v) UPS a/c						
	(vi) Seminar a/c						

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Outstanding Advances		Other Charges		Works in Progress	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(7)		(8)		(9)	
	(vii) DSOP a/c						
	(viii) EMR a/c						
	(ix) Digitisation of manuscript a/c						
	(x) WHO a/c						
	(xi) NMPB a/c						
	(xii) UPS a/c II						
	(xiii) ICSJ a/c						
	(xiv) Donation a/c						
	(xv) International events/conference a/c						
	(xvi) DST a/c			30,78,701.00			
	(xvii) CRISM a/c			-			
	(xviii) CICISM a/c			-			
	(xix) South African a/c	1,80,000.00		-			
	Total S. No. 2	2,95,54,439.00	89,00,606.00	1,57,70,296.00	11,73,15,292.00	18,30,25,860.00	12,29,96,000.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Outstanding Advances		Other Charges		Works in Progress	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
			(7)		(8)		(9)
3.	(i) NPS a/c						
	(ii) GPF a/c						
	(iii) GIS a/c						
	(iv) Pension fund a/c						
	Total S. No. 3	-					
	Total S. No. 1 to 3	3,01,54,134.00	96,60,203.00	1,57,70,296.00	11,73,15,292.00	18,30,25,860.00	12,29,96,000.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Current Year		Previous Year		Excess Paid to be Received / Adjusted		Current Year		Previous Year		North East Arogya	
		(10)		(11)		(12)		(13)		(14)		(15)	
1.	Non-plan												
	(i) Health scheme a/c												
	Total (Non-plan) S. No. 1												
2.	Plan												
	(i) Health scheme a/c							35,000.00					5,63,280.00
	Total (H) Plan							35,000.00					5,63,280.00
	(ii) ROTP a/c												
	(iii) Herbgarden a/c									2,507.00			
	(iv) Pub. of textbook a/c												
	(v) UPS a/c I												
	(vi) Seminar a/c												
	(vii) DSOP a/c												

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Current Year		Previous Year		Excess Paid to be Received / Adjusted		Current Year		Previous Year		North East Arogya	
		(10)		(11)		(12)		(13)		(14)		(15)	
	(viii) EMR a/c												
	(ix) Digitisation of manuscript a/c												
	(x) WHO a/c												
	(xi) NMPB a/c												
	(xii) UPS a/c II												
	(xiii) ICSJ a/c												
	(xiv) Donation a/c												
	(xv) International events/conference a/c												
	(xvi) DST a/c												
	(xvii) CRISM a/c												
	(xviii) CICISM a/c												
	(xix) South African a/c												5,63,280.00
	Total S. No. 2							35,000.00					

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Current Year		Previous Year		Excess Paid to be Received / Adjusted		North East Arogya	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
			(10)		(11)		(12)		
3.	(i) NPS a/c								
	(ii) GPF a/c								
	(iii) GIS a/c								
	(iv) Pension fund a/c								
	Total S. No. 3								
	Total S. No. 1 to 3	-	-			35,000.00	2,507.00		5,63,280.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Remittance of Recoveries		Unspent Balance Refunded to the Concerned Department/Offices		Un-disbursed Amount Disbursed	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
			(13)		(14)		(15)
1.	Non-plan						
	(i) Health scheme a/c	4,84,38,781.00 3,89,571.00	3,64,76,889.00 2,50,824.00			1,000.00	
	Total (Non-plan) S. No. 1	4,88,28,352.00	3,67,27,713.00			1,000.00	
2.	Plan						
	(i) Health scheme a/c (gen)	1,92,95,326.00	1,21,63,811.00			2,500.00	
	Total (H) Plan	1,92,95,326.00	1,21,63,811.00			2,500.00	
	(ii) ROTP a/c						
	(iii) Herb garden a/c						
	(iv) Pub. of textbook a/c						
	(v) UPS a/c I						
	(vi) Seminar a/c						
	(vii) DSOP a/c						

(S. Asif Mian) Accountant (I/A) Sd/-
(D.S. Negi) Administrative Officer Sd/-
(F.A. Bazaz) Administrative Officer Sd/-
(Prof. S. Shakir Jamil) Director General Sd/-

S. No.	Name of the Scheme	Remittance of Recoveries		Unspent Balance Refunded to the Concerned Department/Offices		Un-disbursed Amount Disbursed	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
			(13)		(14)		(15)
	(viii) EMR a/c						
	(ix) Digitisation of manuscript a/c				15,553.00		
	(x) WHO a/c						
	(xi) NMPB a/c						
	(xii) UPS a/c II				861.00		
	(xiii) ICSJ a/c						
	(xiv) Donation a/c						
	(xv) International events/conference a/c						
	(xvi) DST a/c						
	(xvii) CRISM a/c						
	(xviii) CICISM a/c				63,53,124.00		
	(xix) South African a/c						
	Total S. No. 2	1,92,95,326.00	1,21,63,811.00	-	63,69,538.00	2,500.00	-

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Remittance of Recoveries		Unspent Balance Refunded to the Concerned Department/Offices		Un-disbursed Amount Disbursed	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
			(13)	(14)	(15)		
3.	(i) NPS a/c						
	(ii) GPF a/c						
	(iii) GIS a/c						
	(iv) Pension fund a/c	19,94,457.00	23,73,056.00				
		14,000.00	12,91,426.00				
		7,32,648.00	10,000.00				
	Total S. No. 3	27,41,105.00	36,74,482.00	-			
	Grand Total S. No. 1 to 3	7,08,64,783.00	5,25,66,006.00	-	63,69,538.00	3,500.00	-

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Amount Receivable		Investments A/c		Temporary Transfer to Health A/c to be Received	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(16)	(17)	(18)	(19)	(20)	(21)
1.	Non-plan						
	(i) Health scheme a/c	7,806.00					
	Total (Non-plan) S. No. 1	7,806.00					
2.	Plan	-					
	(i) Health scheme a/c	35.00					
	Health scheme a/c	11,41,639.00	3,00,801.00				
	Health scheme a/c (from DST a/c) RRIUM, Srinagar	2,26,451.00					
	Total (H) Plan	13,68,125.00	3,00,801.00				
	(ii) ROTP a/c						
	(iii) Herb garden a/c						
	(iv) Pub. of textbook a/c						
	(v) UPS a/c I						
	(vi) Seminar a/c						

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Amount Receivable		Investments A/c		Temporary Transfer to Health A/c to be Received	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(16)		(17)		(18)	
	(vii) DSOP a/c						
	(viii) EMR a/c						
	(ix) Digitisation of manuscript a/c						
	(x) WHO a/c						
	(xi) NMPB a/c						
	(xii) UPS a/c II						
	(xiii) ICSJ a/c						
	(xiv) Donation a/c						
	(xv) International events/conference a/c						
	(xvi) DST a/c						
	(xvii) CRISM a/c						
	(xviii) CICISM a/c						
	(xix) South African a/c						
	Total S. No. 2	13,68,125.00					

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Amount Receivable		Investments A/c		Temporary Transfer to Health A/c to be Received	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(16)		(17)		(18)	
3.	(i) NPS a/c		3,00,801.00	77,38,766.97	72,94,227.11		
	(ii) GPF a/c			2,69,76,956.02	37,93,76,015.40		
	(iii) GIS a/c				3,13,13,856.03		
	(iv) Pension fund a/c			1,14,93,332.00	2,25,74,550.00		
	Total S. No. 3			4,62,09,054.99	44,05,58,648.54		
	Grand Total S. No. 1 to 3	13,75,931.00			44,05,58,648.54	-	
			3,00,801.00	4,62,09,054.99			

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Received from LIC Disbursed		Misc. Receipt Transferred to Pension Fund A/c		Amount Payable Paid/Adjusted	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(19)		(20)		(21)	
1.	Non-plan						
	(i) Health scheme a/c					60,00,000.00	8,36,361.00
	Total (Non-plan) S. No. 1					60,00,000.00	8,36,361.00
2.	Plan						1,20,00,000.00
	(i) Health scheme a/c					3,68,26,318.00	19,18,469.00 + 25000.00
	Health scheme a/c					4,02,000.00	18,63,62,799.00
	Health scheme a/c					10,000.00 (CCCB)	15,44,252.00
						70,000.00 (CCRUM) + 2,507.00	1,67,365.00
	Total (H) Plan					3,73,10,825.00	20,20,17,885.00
	(ii) ROTP a/c						
	(iii) Herbgarden a/c						
	(iv) Pub. of textbook a/c						
	(v) UPS a/c						

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Received from LIC Disbursed		Misc. Receipt Transferred to Pension Fund A/c		Amount Payable Paid/Adjusted	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(19)	(20)	(21)			
	(vi) Seminar a/c						
	(vii) DSOP a/c						
	(viii) EMR a/c						
	(ix) Digitisation of manuscript a/c						
	(x) WHO a/c						
	(xi) NMPB a/c						
	(xii) UPS a/c II						
	(xiii) ICSJ a/c						
	(xiv) Donation a/c						
	(xv) International events/conference a/c						
	(xvi) DST a/c						
	(xvii) CRISM a/c						
	(xviii) CICISM a/c						
	(xix) South African a/c	-	-	-	-	-	-
	Total S. No. 2					3,73,10,825.00	20,20,17,885.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Received from LIC Disbursed		Misc. Receipt Transferred to Pension Fund A/c		Amount Payable Paid/Adjusted	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
			(19)		(20)		(21)
3.	(i) NPS a/c						14,382.00
	(ii) GPF a/c					3,600.00	-
	(iii) GIS a/c	3,00,000.00	7,10,000.00				-
	(iv) Pension fund a/c						58,079.00
	Total S. No. 3	3,00,000.00	7,10,000.00			3,600.00	72,461.00
	Grand Total S. No. 3	3,00,000.00	7,10,000.00			4,33,14,425.00	20,29,26,707.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Transfer of Bank Balance to Other A/cs		Other Mis. Payments/ Transfer		NPS Subscription & Contribution Transferred to NPS Trustee Bank A/c		Amount Remitted by Decentralised Institutes now Contra Against Recovery to Headquarters, New Delhi as Already Taken Receipt in Previous Year	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(22)	(23)	(24)	(25)				
1.	Non-plan								
	(i) Health scheme a/c		1,02,711.00				292.00		
	Total (Non-plan) S. No. 1		1,02,711.00				292.00		
2.	Plan								
	(i) Health scheme a/c		40,247.00	47,395.00 3,02,097.00			1,30,313.00	33,380.00	
	Total (H) Plan		40,247.00	3,49,492.00			1,30,313.00	33,380.00	
	(ii) ROTP a/c								
	(iii) Herb garden a/c								
	(iv) Pub. of textbook a/c								
	(v) UPS a/c I		276.68 (to Health a/c)						
	(vi) Seminar a/c								
	(vii) DSOP a/c								
	(viii) EMR a/c								
(S. Asif Mian) Accountant (I/A)		Sd/- (D.S. Negi) Administrative Officer		Sd/- (F.A. Bazaz) Administrative Officer		Sd/- (Prof. S. Shakir Jamil) Director General			

S. No.	Name of the Scheme	Transfer of Bank Balance to Other A/cs		Other Mis. Payments/ Transfer		NPS Subscription & Contribution Transferred to NPS Trustee Bank A/c		Amount Remitted by Decentralised Institutes now Contra Against Recovery to Headquarters, New Delhi as Already Taken Receipt in Previous Year	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(22)		(23)		(24)		(25)	
	(ix) Digitisation of manuscript a/c								
	(x) WHO a/c								
	(xi) NMPB a/c								
	(xii) UPS a/c II								
	(xiii) ICSJ a/c								
	(xiv) Donation a/c		42,593.00						
	(xv) International events/ conference a/c								
	(xvi) DST a/c								
	(xvii) CRISM a/c								
	(xviii) CICISM a/c								
	(xix) South African a/c								
	Total S. No. 2		42,869.68	40,247.00	3,49,492.00			1,30,313.00	33,380.00
(S. Asif Mian) Accountant (I/A)		Sd/- (D.S. Negi) Administrative Officer		Sd/- (F.A. Bazaz) Administrative Officer		Sd/- (Prof. S. Shakir Jamil) Director General			

S. No.	Name of the Scheme	Transfer of Bank Balance to Other A/cs		Other Mis. Payments/ Transfer		NPS Subscription & Contribution Transferred to NPS Trustee Bank A/c		Amount Remitted by Decentralised Institutes now Contra Against Recovery to Headquarters, New Delhi as Already Taken Receipt in Previous Year	
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year
		(22)		(23)		(24)		(25)	
3.	(i) NPS a/c				5,07,060.00	3,66,50,006.00	3,25,854.00 1,54,58,158.00 34,60,392.00		
	-do-				-				
	(ii) GPF a/c			49,11,360.00	43,49,600.00				
	-do-			2,51,64,000.00	2,06,84,000.00				
	-do-			1,54,74,251.00	1,05,68,047.00				
	-do-			25,000.00	36,51,456.00				
	(iii) GIS a/c			7,36,000.00 6,65,317.00	2,698.00 11,84,001.00 6,17,000.00				
	(iv) Pension fund a/c			5,48,38,828.00	5,13,55,086.00				
	Total S. No. 3	-		10,18,14,756.00	9,29,18,948.00	3,66,50,006.00	1,92,44,404.00	-	-
	Grand Total S. No. 1 to 3	-	42,869.68	10,18,55,003.00	9,33,71,151.00	3,66,50,006.00	1,92,44,404.00	1,30,313.00	33,672.00

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Closing Balance		Total Payments	
		Current Year	Previous Year	Current Year	Previous Year
			(26)		(27)
1.	Non-plan				
	(i) Health scheme a/c	1,11,974.11	19,247.61	44,05,32,000.61	41,39,24,233.11
	Total (Non-plan) S. No. 1	1,11,974.11	19,247.61	44,05,32,000.61	41,39,24,233.11
2.	Plan				
	(i) Health scheme a/c	4,64,00,628.17	13,66,232.67	71,74,10,445.67	7,50,606,541.67
	Total (H) Plan	4,64,00,628.17	13,66,232.67	71,74,10,445.67	7,50,606,541.67
	(ii) ROTP a/c				
	(iii) Herbgarden a/c	33,461.00	29,753.00	33,461.00	2,80,083.00
	(iv) Pub. of textbook a/c	47,391.00	45,550.00	47,391.00	45,550.00
	(v) UPS a/c	40,752.00	39,206.00	40,752.00	39,482.68
	(vi) Seminar a/c		-		-
	(vii) DSOP a/c	1,84,091.05	1,77,068.05	1,84,091.05	1,77,068.05
	(viii) AIUM a/c	20,00,000.00	-	20,00,000.00	-

Sd/-
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Accountant (I/A)

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(D.S. Negi)
Administrative Officer

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(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Closing Balance		Total Payments	
		Current Year	Previous Year	Current Year	Previous Year
		(26)		(27)	
	(ix) Digitisation of manuscript a/c	107.00	-	107.00	15,553.00
	(x) WHO a/c	1,901.00	1,827.00	1,901.00	1,827.00
	(xi) NMPB a/c		-		-
	(xii) UPS a/c II		-		861.00
	(xiii) ICSJ a/c		-		-
	(xiv) Donation a/c		-		42,593.00
	(xv) International events/conference a/c	6,06,597.00	5,83,042.00	6,06,597.00	5,83,042.00
	(xvi) DST a/c	62,09,801.09	97,85,318.00	1,74,18,866.09	2,61,78,671.04
	(xvii) CRISM a/c	1,35,21,852.00	1,31,20,207.00	1,35,48,066.00	1,33,49,605.00
	(xviii) CICISM a/c	-	-	-	63,53,124.00
	(xix) South a/c	21,19,266.00	11,31,472.00	43,59,557.00	31,85,380.00
	Total S. No. 2 (ii to xix)	7,11,65,847.31	2,49,13,443.05	75,56,51,234.81	
	Total S. No. 2 (i to xix)		2,62,79,675.72		

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.	Name of the Scheme	Closing Balance		Total Payments	
		Current Year	Previous Year	Current Year	Previous Year
		(26)		(27)	
3.	(i) NPS a/c	9,06,925.81	48,98,448.95	4,52,95,698.78	3,19,58,522.06
	(ii) GPF a/c	8,13,993.18	11,66,949.24	7,33,69,160.20	41,97,96,067.64
	(iii) GIS a/c	6,95,901.10	4,13,416.87	23,97,218.10	3,42,40,971.90
	(iv) Pension fund a/c	53,74,001.13	57,28,601.86	7,44,47,266.13	8,33,90,798.86
	Total S. No. 3	77,90,821.22	1,22,07,416.92	19,55,09,343.21	
	Grand Total S. No. 1 to 3	7,90,68,642.64	3,85,06,340.25	1,39,16,92,578.63	1,78,41,69,975.01

	Current Year	Previous Year
Cash	2,16,854.75	2,24,748.75
Bank	7,88,51,787.89	3,82,81,591.50
Total	7,90,68,642.64	3,85,06,340.25

Sd/- **(S. Asif Mian)** Accountant (I/A) Sd/- **(D.S. Negi)** Administrative Officer Sd/- **(F.A. Bazaz)** Administrative Officer Sd/- **(Prof. S. Shakir Jamil)** Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Schedule of Income for the year ending 31 March 2014

S. No.	Grant-in-aid	Miscellaneous Receipts	Capital Expenditure
1.	Health a/c (Plan)	23,31,691.00 + 6,32,934.00+ 1,11,501.00+ 5,000.00	1,27,66,226.00 + 5,16,909.00 + 18,30,25,860.00 (-) 5,01,725.00
	Total (Plan)	30,81,126.00	19,58,07,270.00
		85,61,923.00 + 66,50,038.00 + 4,46,196.00 + 1,300.00	
2.	Health a/c (Non-plan)	2,36,00,000.00 36,45,00,000.00	4,809.00
	Total (Non-plan)	1,56,59,457.00	4,809.00
	Grand Total	1,87,40,583.00	19,58,12,079.00

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

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(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Schedule of Expenditure for the year ending 31 March 2014

S. No.	(A) PLAN	Depreciation	Establishment Expenses	Administrative Expenses	Material & Supplies	Other Charges	Excess of Income over Expenditure	Excess of Expenditure over Income
1.	Health a/c	78,82,434.00 (-) 16,580.00	16,93,65,450.00	7,14,25,942.00	13,17,48,260.50	1,26,62,264.00 (+) 331.00 (-) 29,000.00	4,07,48,656.25	
		7,22,591.00 (+) 1,543.00 (+) 6.00 (+) 40,82,178.00 (-) 64,006.00						
		56,638.00 (+) 61,34,971.00 (-) 10,884.75 (+) 558.00						
		1,02,04,504.00						
	Total (Plan)	2,89,93,952.25	16,93,65,450.00	7,14,25,942.00	13,17,48,260.50	1,26,91,595.00	4,07,48,656.25	

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(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

S. No.		Depreciation	Establishment Expenses	Administrative Expenses	Material & Supplies	Other Charges	Excess of Income over Expenditure	Excess of Expenditure over Income
2.	Health a/c (Non-plan)	75,199.00 (+) 19.00 (+) 1,109.00 (+) 3,058.00 (+) 27,563.00	38,10,39,871.00 (+) 1,99,04,168.00	35,41,195.50	3,97,298.00			12,34,832.50
	Total (Non-plan)	1,06,948.00	40,09,44,039.00	35,41,195.50	3,97,298.00	-	-	12,34,832.50
3.	FW a/c	2,386.00 (+) 176.00 (+) 1,112.00	-	-	-		-	3,674.00
	Total FW	3,674.00	-	-	-		-	3,674.00
	Grand Total	2,91,04,574.25	57,03,09,489.00	7,49,67,137.50	13,21,45,558.50	1,26,91,595.00	4,07,48,656.25	12,38,506.50
	Less : Excess of Expenditure over Income						(-) 12,38,506.50	
	Net Excess of Income over Expenditure						3,95,10,149.75	-

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

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(D.S. Negi)
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(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Schedule of Assets of Balance Sheet as on 31 March 2014

S. No.	Name of Schemes	Fixed Assets (S/3)	Excess of Expenditure over Income (S/4)	Current Assets (S/5A)	Current Assets (S/5B)	Investments (S/5C)	Total Assets
1.	Health a/c	89,46,84,973.00	11,25,88,498.15	4,65,12,602.28	10,06,44,299.65	-	1,15,44,30,373.08
2.	FW a/c	29,963.00	1,78,602.06		2,047.94	-	2,10,613.00
3.	NPS a/c			9,06,925.81	3,55,300.00	1,43,26,999.99	1,55,89,225.80
4.	CPF/GPF a/c			8,13,993.18	33,852.98	28,01,71,797.12	31,94,26,394.59
	-do-				80,93,564.00		
	-do-				3,03,13,087.31		
	-do-				100.00		
	GIS a/c			6,95,901.10	200.00	1,50,00,000.00	1,76,75,826.42
	-do-				180.00		
	-do-				19,79,545.32		
5.	Pension fund a/c			53,74,001.13	10,000.00	3,74,93,332.00	5,07,41,440.13
	-do-				78,64,107.00		
	-do-						
	Total	89,47,14,936.00	11,27,67,100.21	5,43,03,423.50	14,92,96,284.20	34,69,92,129.11	1,55,80,73,873.02

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

Sd/-
(D.S. Negi)
Administrative Officer

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(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Schedule of Liabilities of Balance Sheet as on 31 March 2014

S. No.	Name of Schemes	Capital Fund (S/1)	Excess of Income over Expenditure (S/4)	Current Liabilities (S/2)	Total Liabilities
1.	Health a/c	1,12,65,78,533.23	-	2,78,51,839.85	1,15,44,30,373.08
2.	FW a/c	1,93,523.00	-	17,090.00	2,10,613.00
3.	NPS a/c	-	-	63,63,183.00	1,55,89,225.80
	-do-	-	-	92,26,042.80	-
4.	CPF/GPF a/c	-	-	21,70,37,022.49	31,94,26,394.59
	-do-	-	-	80,174.00	-
	-do-	-	-	80,93,564.00	-
	-do-	-	-	942,15,634.10	-
5.	GIS a/c	-	-	27,72,065.40	1,76,75,826.42
	-do-	-	-	1,026.00	-
	-do-	-	-	1,49,02,735.02	-
6.	Pension fund a/c	-	-	5,07,41,440.13	5,07,41,440.13
	Total	1,12,67,72,056.23	-	43,13,01,816.79	1,55,80,73,873.02
	Excess of Income over Expenditure	-	-	-	-
	Less: Excess of Expenditure over Income	(-) 11,27,67,100.21	-	-	-
	Total	1,01,40,04,956.02	-	-	-

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

Sd/-
(D.S. Negi)
Administrative Officer

Sd/-
(F.A. Bazaz)
Administrative Officer

Sd/-
(Prof. S. Shakir Jamil)
Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Consolidated Schedule of Fixed Assets as on 31 March 2014

				Gross Block		Less: Sale of Council's Publications (Priced)			Depreciation				Net Block	
S. No.	Name of the Assets	Opening Balance as on 01.04.13	Addition	Deductions	Total	Opening Balance as on 01.04.12	Addition	Total	Opening Balance as on 01.04.13	On Addition	On Deductions	Total	As on 31.03.14	As on 31.03.13
1.	Machinery & equipments	8,52,63,309.32	52,53,176.00	(-) 1,10,534.00	9,04,05,951.32				3,66,77,259.32	80,21,440.00	(-) 16,580.00	4,46,82,119.32	4,57,23,832.00	4,85,86,050.00
2.	Furniture & fixture	8,34,49,442.57	21,22,429.00	(-) 1,08,840.75	8,54,64,030.82				2,38,38,414.57	61,63,646.00	(-) 10,884.75	2,99,91,175.82	5,54,72,855.00	5,96,11,028.00
3.	Computers	1,56,49,429.00	44,30,760.00	(-) 1,06,676.00	1,99,73,513.00				1,32,23,236.00	40,83,845.00	(-) 64,006.00	1,72,43,075.00	27,30,438.00	24,26,193.00
4.	Land	27,85,336.00	-	-	27,85,336.00								27,85,336.00	27,85,336.00
5.	Works in progress	50,14,73,163.00	18,30,25,860.00	-	68,44,99,023.00								68,44,99,023.00	50,14,73,163.00
6.	Books & journals	2,93,72,314.00	9,63,670.00	(-) 60.00	3,03,35,924.00								3,03,35,924.00	2,93,72,314.00
7.	Vehicles	89,77,692.00			89,77,792.00				41,60,295.00	7,22,610.00		48,82,905.00	40,94,787.00	48,17,397.00
8.	Building	13,43,46,873.00			13,43,46,873.00				6,63,16,848.00	1,02,04,504.00		7,65,21,352.00	5,78,25,521.00	6,80,30,025.00
9.	Council's publications (Priced)	1,24,90,149.50	5,16,909.00		1,30,07,058.50								1,12,47,220.00	1,12,32,036.00
	Total	87,38,07,708.39	19,63,13,804.00	(-) 3,26,110.75	1,06,97,95,401.64	12,58,113.50	5,01,725.00	17,59,838.50	14,42,16,052.89	2,91,96,045.00	(-) 91,470.75	17,33,20,627.14	89,47,14,936.00	72,83,33,542.00

Sd/-
(Prof. S. Shakir Jamil)
Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Schedule Forming Part of Balance Sheet as on 31 March 2014

(Schedule -3(A) Earmarked/Endowment Funds

	Herb Garden A/c	Publication of Textbooks	UPS A/c I	DSOP A/c	Digitisation of Manuscript A/c	AIUM A/c	WHO A/c	International Events/Conference A/c	DST A/c	CRISM A/c	South African A/c	Total	
												Current Year	Previous Year
(a) Opening balance	29,753.00	45,550.00	39,206.00	1,77,068.05	-	-	1,827.00	5,83,042.00	97,85,318.00	1,31,20,207.00	11,31,472.00	2,49,13,443.05	2,18,21,179.22
Total (a)	29,753.00	45,550.00	39,206.00	1,77,068.05	-	-	1,827.00	5,83,042.00	97,85,318.00	1,31,20,207.00	11,31,472.00	2,49,13,443.05	2,18,21,179.22
(b) Additions													
Grant-in-aid						20,00,000.00					30,00,000.00	50,00,000.00	1,16,00,000.00
Other additions a/c of													
Bank interest	1,201.00	1,841.00	1,546.00	7,023.00	107.00		74.00	23,555.00	947.00	4,27,859.00	61,085.00	5,25,238.00	6,86,863.55
From health a/c									2,26,451.00		-	2,26,451.00	1,57,11,718.00
By adjustments of advances pertaining to previous years											1,67,000.00	1,67,000.00	4,04,000.00
Receivable received	2,507.00										-	2,507.00	29,079.00
Misc. receipts									76,32,601.09		-	76,32,601.09	
Total (b)	3,708.00	1,841.00	1,546.00	7,023.00	107.00	20,00,000.00	74.00	23,555.00	78,59,999.09	4,27,859.00	32,28,085.00	1,35,53,797.09	2,84,31,660.55
Total (a+b)	33,461.00	47,391.00	40,752.00	1,84,091.05	107.00	20,00,000.00	1,901.00	6,06,597.00	1,76,45,317.09	1,35,48,066.00	43,59,557.00	3,84,67,240.14	5,02,52,839.77
(c) Utilization/expenditure													
i) Capital expenditure													
Fixed assets									66,28,181.00			66,28,181.00	1,39,76,328.13
Others													
ii) Revenue expenditure													
Salaries/wages allowances									7,791,360.00		18,27,808.00	26,06,944.00	18,77,333.00
Other administrative expenditure									37,53,868.00	26,214.00	2,32,483.00	40,12,565.00	30,70,820.91
Material & supplies								2,28,451,004,788.00			-	2,74,331.00	
Outstanding advance											1,80,000.00	1,80,000.00	
Amount payable paid													
Unspent balance refunded													641,240,768
Temporary transfer to health a/c to be received													2507.00
Total (c)	-	-	-	-	-	-	-	-	1,14,35,516.00	26,214.00	22,40,291.00	1,37,02,021.00	25,33,996.72
Net balance (a+b)-(c)	33,461.00	47,391.00	40,752.00	1,84,091.05	107.00	20,00,000.00	1,901.00	6,06,597.00	62,09,801.09	1,35,21,852.00	21,19,266.00	2,47,65,219.14	2,491,344.05

Sd/-

(S. Asif Mian)

Accountant (I/A)

Sd/-

(D.S. Negi)

Administrative Officer

Sd/-

(F.A. Bazaz)

Administrative Officer

Sd/-

(Prof. S. Shakir Jamil)

Director General

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

5.3. NOTES ON ACCOUNTS:

1. Annual accounts of the Council for the year 2013-14 has 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 prepared on accrual basis.
4. Schedule attached where necessary.
5. Depreciation has been charged on assets on diminishing balance method.
6. The construction work are being done by the CPWD & NPCC.
7. There is no valuation of inventories since it is not a profit earning organisation but a Research Organisation under Department of AYUSH, Ministry of Health & Family Welfare.
8. A schedule of investment is prepared every year & given to audit which is duly reconciled with actual documents figure mentioning there the rate of interest duration amount & name of Institutions etc.
9. Retirement benefits are treated as per GOI Rules.
10. Depreciation has been charged under expenditure.
11. Earmarked/endowment fund has been shown separately in the Balance Sheet with necessary Schedule.
12. The annual accounts of the Council for the year 2013-14 has been approved by the competent authority i.e. Standing Finance Committee on 23 June 2014.

Sd/-
Administrative Officer
CCRUM, New Delhi

APPENDIX-I

INSTITUTIONAL NETWORK OF CCRUM

- 1. Central Council for Research in Unani Medicine (CCRUM) Headquarters**
61-65, Institutional Area, Opposite "D" Block, Janakpuri
New Delhi - 110 058
Phone : +91-11-28521981
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- 2. Central Research Institute of Unani Medicine**
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Hyderabad – 500 838
Andhra Pradesh
Phone : +91-40-23811551, 04023811495
Fax : +91-40-23811495
E-mail: criumhyderabad@rediffmail.com
- 3. Central Research Institute of Unani Medicine**
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Fax : +91-522-2723088
E-mail: crium_lko@yahoo.co.in
- 4. Regional Research Institute of Unani Medicine**
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Fax : +91-44-25955532
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- 5. Regional Research Institute of Unani Medicine**
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- 6. Regional Research Institute of Unani Medicine**
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7. Regional Research Institute of Unani Medicine

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11. Regional Research Institute of Unani Medicine

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12. Regional Research Centre

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- 13. Clinical Research Unit**
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- 14. Clinical Research Unit**
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- 15. Clinical Research Unit**
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- 16. Regional Research Centre**
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- 17. Clinical Research Unit (Unani)**
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- 19. Clinical Research Unit (Unani)**
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- 20. Chemical Research Unit**
Department of Research in Unani Medicine
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Aligarh Muslim University, Aligarh – 202 001
Uttar Pradesh
- 21. Drug Standardisation Research Unit**
Jamia Hamdard
Hamdard Nagar
New Delhi – 110 062
Phone: +91-11-26089688
- 22. Literary Research Institute of Unani Medicine**
Jamia Hamdard
Hamdard Nagar
New Delhi – 110 062
- 23. Drug Standardisation Research Institute**
PLIM, Building, Ghaziabad
Uttar Pradesh
Phone: 95120-2783029
Fax : 2787016
E-mail : dsrigzb@gmail.com
- 24. Unani Medical Centre**
(Extension Centre of RRIUM, New Delhi)
Dr. Ram Manohar Lohia Hospital
New Delhi - 110 001
Phone: 23404594
- 25. Unani Speciality Centre**
(Extension centre of RRIUM, New Delhi)
Deen Dayal Hospital, Ghantaghar
Harinagar
New Delhi - 110 064
- 26. Clinical Pilot Project (Unani)**
LACHUA Complex, Mairang Palli Bazar
Cherapur, P.O. Wangjing – 795 148
District Thoubal
Manipur

APPENDIX-II

ACKNOWLEDGEMENT

The Director General (DG), Central Council for Research in Unani Medicine, New Delhi expresses his deep gratitude to the members of the Governing Body (GB), the Standing Finance Committee (SFC), the Scientific Advisory Committee (SAC) and the Research Sub-committees for the services rendered by them. The Council could not have progressed in the right direction without their valuable guidance and continued support.

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CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

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