

urging the grant of full Statehood for Manipur. Members belonging to all the parties and groups in this House have sent it. I suggest that this may be taken up as early as possible before the situation gets out of control and it is very essential that a universal command of this kind is conceded by the Chairman. Therefore, I would request that this should be taken up by the Chair. This is not at all a party issue.

**THE INDIAN MEDICINE AND
HOMOEOPATHY CENTRAL COUN-
CIL BILL, 1968—contd.**

SHRI S. S. MARISWAMY (Tamil Nadu): Sir, if the object of the Bill is to give a fillip to the Ayurvedic system, I have absolutely no complaint against it. On the other hand, I would rather welcome the Bill if it would do equal justice to another section of practitioners who are practising in integrated medicine for the last 30 years all over the country. If my statistics are correct, their number is about 50 thousand. Education in integrated medicine is imparted in about 40 colleges and 10 universities all over India. Now the object of the Bill is to constitute a Council wherein there is a fear that a large number of quacks would get a place, and they would outnumber those people who have done research and who have had training, etc. for so many years. Yesterday our friend, Mr. Goray, pointed out that in Maharashtra they issued a circular saying that whosoever comes before a particular date, he can register himself as a doctor if he produces some certificate without any support. So a large number of fake certificates were produced and a large number of people have become full-fledged doctors. I have some true story with me. In a village in my State I young and healthy fellow developed a stomach ache all of a sudden. He went to a native doctor who gave him some pills. The second day he went to the same doctor and complained of severe pain. Then he gave him some lehyam. After taking that, Sir, the fellow died. Then the matter was reported to the police and when it was apprehended, he gave a very strange reply. He said that the pills were manufactured by his father who had learnt it from his grandfather. About lehyam he said "It was prepared by my father according to some Sanskrit slogan and I do not know what is that slogan." So, Sir, there are these types of doctors who are available all over the country. Not that I am against giving any help to the Ayurvedic system. I have absolutely no grievance against it but there should be

some proper training and research because they are dealing with human lives and not with animals. Therefore I am afraid that the Bill as envisaged will encourage more and more quacks and they will outnumber those who have got the necessary qualifications and who have made research, etc. I hope Mr. Murthy keeps an open mind contrary to the statement made by the people belonging to the integrated branch that he is very much prejudiced against them. Therefore I request that he should constitute a separate Committee or a Council for the integrated medical practitioners or he should give vice-presidency in the proposed Council to that branch of medicine. If he does not do that, I think he will be doing great injustice to that community. Our country is a vast country of 7 lakhs of villages and there is great dearth of doctors. Just now we were saying that there is periodical incidence of famine and pestilence.

What is wrong with this integrated doctor? So more and more training must be given to them and it must be seen that they are sent all over the villages of the country. The present system would only encourage quacks. I hope Mr. Murthy, along with Mr. Shah, would see that this community is also helped in a big way.

MR. DEPUTY CHAIRMAN : The House stands adjourned till 2 P.M.

The House then adjourned for
lunch at one minute past one of the
clock.

The House reassembled after lunch at two of the clock, MR. DEPUTY CHAIRMAN in the Chair.

DR. (MRS.) MANGLADEVI TALWAR (Rajasthan) : Mr. Deputy Chairman, Sir, I welcome the Indian Medicine and Homoeopathy Central Council Bill, 1968. A great deal of thought as well as effort have gone into this for getting this measure in its present form. Ayurveda is a science which has been nurtured and developed in our country. It is a part of our culture. Soon after independence a Committee on Indigenous Systems of Medicines was formed in 1948 popularly known as the Chopra Committee. It recommended an integrated course of medicine combining the best of both the systems for study. In 1958 the Udupa Committee and in 1961 the Lakshmanaswamy Mudaliar Committee were set up by the Government of India which recommended the establishment

[Dr. (Mrs.) Mangladevi Talwar] of a Council of Indian Medicines on the lines of the Medical Council of India. The Central Council of Health constituted a Committee in 1967 with Pandit Shiv Sharma as the Chairman to look into the details of the proposed legislation. The major points of difference among the members of the Committee related to the question of laying down qualifications for candidates for election to the proposed Council.

The point raised was whether only institutionally qualified persons should be made eligible for election, or whether registered practitioners, whether they were qualified or not, should also be eligible for such election. This difference of opinion was referred to the Executive Committee of the Central Council of Health held at Naini Tal in 1968. The Committee resolved that 50% of the number "of members in the Committees for Ayurveda, Siddha, Unani and Homoeopathy should be nominated and the remaining 50% should be elected from various State Boards and Faculties keeping an overall two-thirds majority for the institutionally qualified persons in the Council and the Committees. I am glad to see, Sir, that provision of nominated members has been brought down to 30% in the Bill, instead of 50% as was recommended by the Executive Committee. But there is no mention anywhere in this Bill that the overall two-thirds majority for the institutionally qualified persons would be kept in the Central Council and the Committees.

Institutional education not only imparts technical education but it also equips an individual's mind to think, plan and work in a methodical way. The real purpose of education, Sir, is to develop the faculties of an individual to the maximum capacity he or she is capable of. According to Clause 17, sub-clause (3) (a), a person, who does not possess any qualification, if he is enrolled on a State Register before this Bill is enacted and enforced, shall enjoy all the rights enjoyed by a qualified practitioner. So, many quacks would rush to be enrolled on the Registers of all States and if we have no working rule for election to the Central Council and the Committees, the chances are that so many quacks would occupy the exalted chairs of the highest body. In this connection, Sir, I would just quote one sentence from the speech of the hon. Member, Shri N.G. Goray. He gave the example of a person who "immediately applied and got a certificate that he was a Registered Medical Practitioner. He does not know anything about it; he never practised. Such people will dominate the Register. And what happens to these 50,000

Integrated Medical Practitioners?" However, I don't say that many people have done so, but there is a chance, there is a great chance of their registering themselves as practitioners, people who do not possess adequate knowledge of any of the systems which they practise.

The Central Government would have the choice and the authority to nominate persons of special knowledge and eminence in each system of Indian Medicine to the extent of one-third of the total number which they would be entitled to.

Sir, it is stated that the Chairman and Members of the Committee felt that, in so far as Ayurveda was concerned, the majority of the institutionally qualified people were the people who were the Integrated Practitioners of Ayurveda.

And they did not have either a fundamental understanding of the system or faith in it and they had tended to practise only allopathic medicines. According to the Second Schedule there are some 116 institutions teaching Ayurvedic and Siddha systems of medicine and 15 teaching Unani system. Although it is not mentioned in the Schedule, surely they all could not be teaching integrated medicine. However the fact remains that there are some 50,000 of them in our country and it is a number that we cannot just ignore. If they have no faith or training in Ayurveda, well, whose fault is it? Are we not responsible for their training? Have we not spent crores of people's money on their training? Was it not our duty to see that the right type of training was given to them? If they practise only allopathic system that, I submit, must be, to a great extent, due to the demand of the public. People have greater faith in the injections and quick cure of dangerous diseases like typhoid, infectious diseases, TB etc. by the modern wonder drugs like sulpha drugs, antibiotics, penicillin etc. In our country whosoever practises any kind of medicine uses these drugs; he may be a vaidya or he may be a compounder or he may have any other claim to practise. Personally I do not subscribe to anyone who has no full knowledge of the effects and the by-effects of these drugs, using these drugs as they are very potent drugs and serious complications can follow by their injudicious use.

According to clauses 18 and 19 the Central Council has full authority to appoint Inspectors to get information regarding curriculum, examinations, etc. of teaching institutions and according to clause 22 may prescribe minimum standards of

education for granting degrees. For the existing graduates they can prescribe refresher courses to improve their knowledge of Ayurved, Unani or Siddha as the case may be. I am glad, Sir, that Unani and Siddha are also given their due share in the Central Council. Siddha is found only in Tamil Nadu and Unani has some 15 teaching institutions throughout the country. Although the origin of Unani dates back to Hippocrates in Greece it took a long time for it to come to India via Arabia, Europe and Iran. It came to India in the 18th century and has found a permanent home here. There is no Unani system being practised anywhere else in the world except in India. I submit, Sir, that as far as Ayurveda is concerned, I hope and I am sure that due weight would be given to Ayurveda as it is found all over the country and has the largest number of practitioners and teaching institutions. It has continued in this country for the last 5,000 years; it has served the people of this country mostly in the rural areas where even now no medical help is available. Its implied knowledge is spread out everywhere and the common home and grandmother's remedies are nothing but implied knowledge of Ayurveda. Vriksha Charaka and Susruta are considered to be authentic and standard treatises on surgery and medicine even today.

The recommendation of the Joint Committee is that there should be two separate and independent Central Councils, one for all the three Indian systems of medicine and the other for Homoeopathy, since the basic concept of the Indian systems of medicine is totally different from the fundamentals of homoeopathy. Of course, the Central Government, in their wisdom, will decide the ultimate course and take the decision, but in my humble opinion the two systems, i.e., Ayurveda and Unani, are as different from each other in their fundamental concept of diagnosis and treatment. So, I would urge upon the Government to give careful consideration and examine closely if homoeopathy could not remain in the Central Council. The three committees would be autonomous in their respective spheres. The Homoeopathy Committee could be given full autonomy as far as the teaching and practising of the system is concerned. With these words, I support the Bill.

SHRI M. V. BHADRAM (Andhra Pradesh) : Mr Deputy Chairman, according to the figure available, there are about one lakh doctors for a population of fifty crores. It roughly works out to one doctor for every 5,000 persons. These doctors are confined to the urban areas. In the

rural areas more than 80 per cent of the people even today are dependent on the Ayurvedic medicine and the Ayurvedic practitioners available there. The Bill which is supposed to restore the status of Ayurveda keeps the backwardness of Ayurveda as it is. It does not encourage Ayurveda to adopt new techniques. The Bill refuses to take the best of both the systems of medicine, namely, Ayurveda and allopathy. Take, for instance, the reluctance on the part of these people to adopt new techniques. In modern medicine there is bacteriology, microscope and other modern equipment which are not available in Ayurveda. If Ayurveda does not adopt all these things, it would remain as it was. I may quote my own example. When I was a child I fell down from a tree and broke my left arm. I was sent to an Ayurvedic practitioner who, in modern medicine, would be called an orthopaedic surgeon. He did not know where the bone had broken and so he sat it in a particular position and put on the bandage, thereby my left hand today cannot be stretched. I cannot stretch it this way. I do not blame the doctor. Because of the non-availability of modern techniques, X-Ray was not taken. So, Ayurveda even today suffers. Microscopic examination is not done in the Ayurvedic system at all.

SHRI A. D. MANI (Madhya Pradesh) : No examination is done.

SHRI M. V. BHADRAM : Anatomy, physiology, pathology, bacteriology, all these things are there, but these are not being used. Some people may say: 'No, no, the Mongolians have adopted our Ayurveda'. This is like saying that the Pushpak Vimana was there in the days of the Ramayana when Rama flew back from Lanka to Ayodhya. This is all self-deceit and self-satisfaction and it does not take the country forward.

An effort was being made about thirty years ago to integrate both the systems of medicine. I think science cannot be monopolised by any country. If anybody takes an orthodox view against science, I do not think can be called a civilised and modern man. Unless Ayurveda adopts the new technique learnt from the modern medicine, it cannot remain as a medicine. In this connection I would like to quote a foreign doctor who had toured our country from January to March. He has submitted a report to the Government in which he says :

"In the course of my study tour in India, I found that Ayurvedic treatment has proved efficient in a large number of patients whom I personally saw and examined. In a number of these

[Shri M. V. Bhadram] cases, treatment with modern medicine had failed. Besides this, the effect of Ayurvedic medicine has been lasting and free from toxic side-effects. Ayurvedic approach is turned towards the patient as a whole, and the detailed observation was impressive. Ayurvedic system of medicine; undoubtedly offers both theoretical and practical possibilities which call for further scientific study and investigation as well as application by modern medicine."

He further goes on to say :

"I would like to emphasize on the following points :

The long-term progress of this scheme needs the availability and training of physicians in both the Ayurvedic and modern systems of medicine. Such a staff alone can narrow the gulf that tends to separate the two medical systems and enable active collaborative scientific research."

If this attitude is not adopted by this Government, the casteism which prevails in the country is going to prevail and is going to be perpetuated in the medical profession also. This Bill puts an end to the education system which has been in existence for the last thirty years in 10 universities and 50 colleges, like the Tibbia College in Delhi. It is going to put an end to the education system. It means as and when the Government thinks fit, when a Minister comes and goes, according to the whims and fancies of the Government and the Minister the education system, the curriculum itself, is being changed. Thirty years ago they started it on the recommendation of various Committees, the Chopra Committee, the Pandit Committee, the Dave Committee, the Udapa Committee, etc. These people suggested an integrated system of medicine, not exclusively Ayurveda or Allopathy. If this is not adopted, the Bill perpetuates the backwardness of Ayurveda, the Bill perpetuates casteism in the medical profession and destroys the integrated system. If there are any lacunae, any shortcomings in the integrated course or system, they should be set right. But you cannot do away with the entire system throwing 50,000 practitioners into the streets. The Bill also gives licence to a quack to practise, it means to kill people. Dr. Talwar read out 16 institutions. Many of them are bogus institutions, and on the strength of the certificates the names were enrolled in the State Register or the Central Register, whatever it may be. One institution I have seen. They have no rooms in that institution to teach the people. Even if teaching is

there, there are no hospital facilities where students can have practical knowledge of the whole thing. It means this Bill is going to give licence to lakhs of quack practitioners. I do not mind if they are given licence to make a livelihood, that is a different thing. Not only that, they are going to give licence to sit over and control the future of medical education in India. This is a preposterous proposition which the Bill proposes.

But at the same time I am not opposed to Ayurveda. Ayurveda should be there because it is available to 80 per cent of the people. It should be enriched, it should be improved, research must be done, and modern techniques, modern method of medicine should be adopted. Also I would quote one example of Mr. Balchandra Menon. He was suffering from duodenal ulcer for several years. His stomach was cut twice. Ultimately it was proved that his stomach was mishandled. He was cured only by Ayurveda medicine. I know him for the last forty years. So, I am not blaming the doctors. Unless we adopt this method, Ayurveda is not going to survive in India. It is going to satisfy some egoist, some protagonist or some vested interests or some politicians behind the whole scheme.

Sir, I would draw your attention to this. The Ministry and the Minister in particular are prejudiced against the integrated medical practitioners and they are biased in favour of Ayurveda. It is not bias. It is only killing. They are not going to save Ayurveda in India if the Bill is passed into law. Why am I saying this? The Minister in his speech at one stage was characterising these integrated medical practitioners as inferior stuff. Those people who could not get accommodation or admission into the allopathic medical colleges, those people have gone to this integrated medical course, which is not a fact. There are many eminent physicians even in Government service whose recommendations or whose opinions are so much valued and accepted on several occasions. I would like to quote the Minister :—

"During the trial of this scheme in the schools and colleges of Indian Medicine in the last twenty years it was noticed that the students of Indian Medicine were generally those who had failed to qualify for admission in a modern medical college and as such they tended to lean more and more on the subjects of modern medicine . . ."

It means that inferior stuff has gone to them. It does not mean that in the allopathic colleges they are all good people. It is preposterous to suggest that thing.

Another thing; the Minister says—

"After passing out from these colleges, they resorted to the practice of modern medicine and used little or no drugs of Ayurveda, Siddha or Unani in their practice. This is caused discontentment with the so-called integrated system of medicine."

At the same time the Minister says a different story when denying them their proper place in the Council :—

"The Joint Committee felt that since the practitioners who have gone through the concurrent course of training are primarily practitioners of Indian Medicine, they should be registered in the Central Register of Indian Medicine as practitioners of Ayurveda, Siddha or Unani, as the case may be."

At one stage the Minister says that they are not practising Ayurveda, that they are only allopathic practitioners. Then he says they are of Indian Medicine, not of Allopathy. This shows in which way the Minister's mind is going. It is going against the fifty thousand integrated medical practitioners.

SHRI S. S. "MARISWAMY : I asked him whether he has an open mind. He said, yes.

SHRI M. V BHADRAM : If he has a closed mind . . .

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY PLANNING AND WORKS, HOUSING AND URBAN DEVELOPMENT (SHRI B. S. MURTHY) : He is now trying to close it.

SHRI M. V BHADRAM : If he is susceptible to my influence, why does he not accept my suggestion?

SHRI B. S. MURTHY : We have an open mind.

MR. DEPUTY CHAIRMAN : Will you please conclude.

SHRI A. L. MANI : He is making a useful speech. He should be given more time.

MR. DEPUTY CHAIRMAN : Then you will lose your time.

SHRI M. V. BHADRAM : Therefore, the Minister should carefully look into these points and see that ayurveda exists

in India and they should energise and enrich it. At the same time they should protect not only ayurveda practitioners by giving them a proper place in the Central Council but there should be a separate Council for them; and also they should protect their right to practise as they have been doing for the last thirty years.

I will take up the other points when it comes to the clause by clause discussion or amendments. At this stage I am satisfied with the remarks I have offered so far.

SHRI K. P. SUBRAMANIA MENON (Kerala) : Mr. Deputy Chairman, I welcome this Bill as far as it goes. It has got its defects too. But the problem today in India is to see that the millions of our people who live in far off villages should get some sort of medical assistance at expenses which they can bear and in places where they can get it. Therefore, Sir, to brush aside ayurveda as a backward system is easy but to put something in its place where the millions of our people can enjoy some sort of security is a little difficult.

Sir, I agree with some of the speakers who spoke about the inadequacies of ayurveda as it stands today. As you know, ayurveda rose in the pastoral civilisation of the vedic Aryans. In those days we had pristine forests, virgin lands, crystal clear waters of the Ganga and the Sindhu. In those days we did not have the problems of huge cities, big chemical factories, polluted rivers, lack of fresh air, etc. The problems of medicine, health, etc. were limited. The advance of science, the knowledge gained in natural sciences, etc. was also limited. Therefore, the science which rose in those days had its limitations. It catered to the limited needs of a pastoral population who had all the fresh air and good water and the pristine forests to roam about, who were not very often subjected to disastrous, contagious diseases, etc. The ayurveda in those days catered to the needs of this population. But, as you know, Sir, stagnant knowledge is no knowledge at all. Unless it develops according to the needs of the times, according to the range of knowledge, in fact, it may become harmful. What has happened is that after the third or the fourth century there has not been a single good treatise on ayurveda; it has stopped thereafter. After Susrut and Sharandhara we do not hear anybody having written an original book on ayurveda. In the fourth century we could not have had a microscope. We did not have electricity to conduct electrolysis of blood and all these things and we could not have found out so many diseases. Therefore, let us

[Shri K. P. Subramania Menon] recognise the backwardness of ayurveda. At the same time let us also recognise some of its good points.

As you know, Sir, in those days the number of herbs which were there, by empirical application these scientists found the use of some of these herbs. Even today those are very powerful and very useful. But our mistake is that we have not used in a scientific manner the legacy and the knowledge of our past.

That is the point. Now for example, we know there is trifala or three fruits, having a number of uses. Now, why can't our modern laboratories do research on these things? We are supposed to have a drug research laboratory in Lucknow. I do not know what they are doing. But whatever advance has been made based on our past knowledge has been made only in the Western countries. For example, you know sarpagan-dhi. Now we could have found it out. Similarly, I was talking about trifala. There are a number of effects which these three fruits have got. Why is it that we have not done research to find out the active principles which give such effects? Then there is another thing. Ayurveda, as I said, is mainly based on herbal remedies. And these herbs sprout in different climates, in different conditions, etc. A number of people are not able to identify them. This is also a problem. What is called somalata in the North may not be somalata in the South. This problem has to be solved. Otherwise, the same name may be applied to different medicines. The whole thing requires a vast amount of research and a scientific approach to the problem. The solution of those problems will lead us to better treatment of diseases, etc.

As you know, Sir, it is recognised that the modern system of medicine, with all its wonders, has got its defects. For example, in many medicines the toxicity is very high. They create reactions, whereas in the case of Ayurveda, because it is mainly herb-based, they do not create such toxicity and some of those medicines can be very useful. It is, therefore, necessary that we should conduct further research on the old herbs, on the particular medicines which were used, etc. At the same time, to say that Ayurveda is a complete system of medicine is to misunderstand what a complete system of medicine is. A complete system of medicine requires investigation, diagnosis, treatment of the disease, aftercare, etc. Obviously, the methods of investigation, the tools available for investigation, etc., in Ayurveda are limited. It has not advanced its scientific level since the third or the fourth century. Therefore,

it cannot be a complete system. But its medicines have been useful. For example, it has found that in the case of rheumatism, etc., a particular type of treatment can be very useful and it has proved effective, too. Similarly, in certain cases of intestinal ulcers, etc. some of the medicines offered by Ayurveda have been found effective. At the same time, we should note that a man living in Delhi or Bombay or Calcutta cannot go hunting after herbs, make kashayas out of them, have pathyas, live without work, without food, etc. Therefore, the whole medical treatment has to be adjusted to the modern needs of the society. Similarly, why can't Ayurveda adopt injections, tinctures, etc.? Some of these medicines can be easily available, can be useful. Otherwise, Ayurveda may not be useful for a city population. It can be useful to the rural population who have got the herbs around them, who can pluck them, prepare decoctions out of them, etc. Therefore, it is necessary that this system should adopt certain things, with the necessary modifications, etc., from the modern system of medicine. I do not understand why Ayurveda cannot adopt the modern system of investigation and diagnosis, because Ayurveda in itself has not got that. Therefore, it should be possible for Ayurveda to adopt the modern system of investigation and diagnosis. Now, these are the points, Sir: If this Bill helps in creating an atmosphere in the country to modernise the whole system of Ayurveda, to take from it whatever is good, to adopt the medicines for modern usage, for the use of industrial workers, for the use of office-going people who cannot sit at home eating a few pills, drinking kashayas etc., then it can be useful. At the same time, we also should not forget that at the given moment, in this country, vast numbers of people still have to depend on Ayurveda and those people have to be protected, and this Bill goes a long way in protecting those people from the attacks of quacks, etc. True, even this Bill gives protection for quacks, but that is the case even in the most modern system of medicine. Large numbers of quacks are there, who go about saying that they are doctors, etc. That you can prevent. That can be prevented only by enforcing it strictly. So, I think this Bill is in the right direction, and I support it.

شہی ایم - اسعد مدنی (انور)
پروڈیوسر: نائب صدر صاحب - میں
جو بل آپ کے سامنے ہے اس کا مجبوری
طور پر سوالات کرنا ہوں - اس میں

کچھ امیلڈ میٹلس میں نے دئے ہیں۔ ہمارے کنسٹی ٹیوشن میں واضح طور پر یہ یقین دلایا گیا ہے کہ ہندوستان میں تمام علوم کو تمام شکشاؤں کو اور تمام ہر قسم کی چیزوں کو ترقی کرنے کا پورا موقع ملے گا اس لئے اس سے بہت پہلے یہ ہونا چاہئے تھا کہ ہمارے کنسٹی ٹیوشن کی جو یقین دہانی ہے اس کی روشنی میں تمام طب یونانی کو اور آیوریدک کو سدھا کو اور جو دوسری چیزیں ہیں ان کو پورا موقع ملنا چاہئے تھا لیکن بدقسمتی سے ان کو پورا موقع نہیں مل سکا ہے اور اس بل میں اس طرح کی امید پائی جاتی ہے کہ آئندہ اس کو عملی طور پر بھی پورا موقع ملے گا۔ اس راستہ میں جو کچھ رکارڈیں مجھے محسوس ہوئی ہیں اس بل میں عملی طور پر ان کی طرف میں آپ کی توجہ دلانا چاہتا ہوں اور اس میں کے ساتھ کہ اس طرح کی جو چوک ہے اس کو دور کیا جائے گا اور عملی طور پر بھی صحیح طریقہ سے چلیں تاکہ ہم اپنے ملک کے بسنے والوں کی صحیح طور پر خدمت کر سکیں اور ان کی خدمت کے راستہ میں جو درجے ہیں وہ ان تکمیں۔

ظاہر ہے ایلوپیتھک اس ملک میں بہت ترقی یافتہ ہے پہلے سے ہی۔ بہت پہلے سے اس کی سرپرستی اور مدد کی جاتی ہے اور ہونی چاہئے۔ اس کی ترقی پر ہم کو کوئی اعتراض نہیں ہے اس میں بہت سارے مواقع حاصل ہیں۔ آج اس کا طریقہ علاج

بہت آگے بڑھ چکا ہے اس کو پورے طریقہ سے اپنانا چاہئے لیکن اس کے ساتھ جو ہمارے ملک میں پرانے طریقہ علاج ہیں اور جن سے اس ملک کے بسنے والوں نے کروڑوں کی تعداد میں پہلے بھی فائدہ اٹھایا ہے اور آج بھی ملک کی بہت بڑی آبادی اس سے فائدہ اٹھا رہی ہے۔ دیہات دیہات، گاؤں گاؤں میں، محلوں میں اور بڑے بڑے شہروں میں اس سے فائدہ اٹھا رہی ہے تو اس کو ہم نے پورے طریقہ سے آگے بڑھانے میں جو غفلت پہلے رکھی ہے، انگریزوں کے زمانے میں یا آج تک ہم نے جو کمی کی ہے اس کو دور کرنا چاہئے۔

اس بل کے اعتبار سے مجھے ایسا محسوس ہوتا ہے کہ جتنے طریقہ علاج آج دیسی ہیں ان کے لئے ایک کمیٹی بننا کہ ان کو جیسے گھونٹ دیا گیا ہو اور ترقی کے لئے جو پوری مدد ہونی چاہئے ان کو شاید وہ نہ مل سکے اس لئے میں یہ چاہتا تھا کہ جس طریقہ سے آپ نے ہومیوپیٹھک کے لئے جو باہر سے آیا ہوا طریقہ علاج ہے۔۔۔ کوئی حرج نہیں کہ ہمارے ملک کے بسنے والوں کو کسی طریقہ علاج سے چاہے وہ ہمارے ملک کا ہو یا باہر کا ہو فائدہ ہوتا ہے تو اس کو ہمیں اپنانا چاہئے اپنے ملک میں بسنے والوں کے فائدہ کی خاطر تو آپ نے اس کے لئے الگ کونسل بنائی ہے۔ بہت اچھا ہے لیکن اس طریقہ سے اپنے ملک کے جو طریقہ علاج ہیں جیسے آیورید ہے، یونانی ہے، سدھا ہے اس کے لئے بھی الگ الگ کونسل نہ بنانے سے ان کی پوری ہمت افزائی اس میں

[شہری ایم - اسعد مدنی]
نہیں ہونی ہے اور یہ ایک طریقہ سے
ان کے راستہ میں بادھا ڈالنا ہے -

گل پھیلنے میں اوروں کی طرف
بلکہ ٹمر بھی

اے خانہ بونداز چمن کچھ تو
اندھ رہی

جس طرح سے ان کے لئے یہ سب کچھ
کیا گیا ہے تو اپنے جو طریقہ علاج ہیں
ان کے لئے بھی پوری سہولتیں اور پوری
توجہ ہونی چاہئے -

میں خاص طور پر یہ عرض کروں
کہ طب یونانی ان ایسی طریقہ
علاج کے معاملات کو دیکھنے کے لئے آپ
کی پارلیمنٹ کے دونوں ہاؤسز نے ایک
کمیٹی بنائی، اس نے جائزہ لیا لیکن
بد قسمتی سے اس نے ملک کا جو سروے
کیا اور جائزہ لیا اس میں یہاں آئے
ہوئے وفود کی بات سنی - بہت دور
دور گئے - جام نگر آیوریدک یونیورسٹی
کو دیکھا - مدراس میں آیوریدک کے
کاموں کو دیکھا لیکن مدراس میں
ہیدرآباد میں اور خود دہلی کے اندر
جو یونانی طب کالج ہے اس کو نہیں
دیکھا - آپ کو یہ معلوم ہے کہ حکیم
اجمل خان صاحب ہندوستان کی بہت
اہم شخصیت تھے انڈین نیشنل
کانگریس کے صدر رہے اور پولیٹیکل
حیثیت سے نہیں بلکہ ہندوستان کے
ایک مشہور طبیب گذرے ہیں - انہوں
نے یہاں یونانی ایڈ آیوریدک طبیبہ
کالج بنایا اور اس کے ساتھ ہندوستانی
دواخانہ قائم کیا تھا - وہ یہاں دہلی
میں موجود ہے - کچھ صحیح ہے یہ بھی

شکایت ہے کہ آج اس کی مٹی پلید ہو
رہی ہے اس کے اندر انتہائی خرابی
ہے - گورنمنٹ اس کی طرف توجہ
طور پر توجہ نہیں کر رہی ہے - اس کو
نا اہلوں کے ہاتھ میں دے دیا گیا ہے -
سنٹرل گورنمنٹ اسے اپنے ہاتھ میں لے کر
اتنی بڑی اہم شخصیت کی اتنی بڑی
مانگاڑ کو برہان ہونے سے بچا سکتی
ہے - اس نے اس کی طرف اپنی
ذمہ داری پوری نہیں کی - اگر یہ
کمیٹی طبیبہ کالج کو دیکھتی رہاں کے
حالات سے باخبر ہوتی اور اس کی
ضرورت کا جائزہ لیتی تو شاید اس طرح
کی ایک طرفہ رپورٹ نہ ہوتی لیکن
بد قسمتی سے اس نے جا کر ان کالجوں
کو دیکھنے اور وہاں کے معاملات کو
سمجھنے کی زحمت گوارا نہیں کی بلکہ
جو وفود آئے ان کی باتوں کو کچھ سن
کر اسی پر فیصلہ کر لیا - بہر حال
اسی طریقہ سے ہم کو یہ بھی شکایت
ہے کہ یہاں انڈین میڈیسن کے سلسلہ
میں سولٹرل ہیلتھ منسٹری میں
ایڈوائزر ہے - تین قسم کی انڈین
میڈیسن مائی گئی ہیں اور آپ نے
ہندوستانی طریقہ علاج کے لئے ایڈوائزر
مقرر کیا ہے تو بیشک یا تو تینوں
طریقوں کے لئے تین ایڈوائزر ہونے
چاہئیں یہ مناسب بات ہے یا پھر ایک
ہی رکھنا ہے تو ایک مرتبہ اگر آیوریدک
کے کسی صاحب کو اس پوسٹ پر نامزد
کیا گیا ہے تو دوسری دفعہ کسی
طبیب کو بھی موقع دینا چاہئے تھا -
اسے حکیم بھی ہندوستان میں مل
سکتے ہیں - سدھا کے بھی کسی آدمی
کو یہ موقع دینا چاہئے تھا ان میں

بھی ایسا کوئی آدمی مل سکتا ہے لیکن بدقسمتی سے پہلے دو جو نامزد کئے گئے اور جو صاحب آج ہیں تھلے کے تین صرف آہورویڈ کے ہیں اور کوئی حکیم یا سدھا کا آدمی انڈین میڈیسن کے ایڈوائزر کے طور پر سیلنگل گورنمنٹ میں نہیں رکھا گیا۔

اسی طرح پبلک سروس کمیشن کی طرف سے جو انانسیسٹ ہوتا ہے جو اشتہارات نکالتے ہیں سرکاری پوسٹروں کے لئے ہیلتھ منسٹری کے لئے اور جس کے لئے صلاحیت کے اعتبار سے حکیم اور آہورویڈ دونوں برابر ہوتے ہیں ان میں صرف آہورویڈ کی صلاحیت اشتہارات میں چبھتی ہے اور کسی میں اس کے ساتھ حکیم کا حوالہ نہیں دیا جاتا تو کوئی حکیم کس طرح درخواست دے سکتا ہے ان جگہوں کے لئے۔ چنانچہ تمام ملک کے حکیم اس حق سے بالکل محروم رہ جاتے ہیں۔ یہ ایسی عملی شکایتیں ہیں جن کی وجہ سے بہت ناانصافی ہوتی ہے ملک کے ایک دیسی طریقہ علاج کے ساتھ۔ تو اس کی طرف حکومت کو توجہ کرنی چاہئے۔ (Time bell rings) جناب میرے خیال میں مجھے تو چار منٹ ہی ہوئے ہیں۔

श्री उपसभापति : आपको 9 मिनट हो गए एक आध मिनट और ले लें।

شری ایم۔ اسعد مدنی : ممکن

ہے کہ میں نے غلط گھڑی دیکھی ہو۔ بہر حال میں دو تین منٹ ہی لوں گا۔ میں عرض کروں کہ ہیلتھ اسکیم کے متعلق اپنے دلی خاص میں سرکار نے

یہاں ایلوپیتھک کی پانچ ڈسپنسریاں ہیں۔ آہورویڈ کی پانچ ڈسپنسریاں ہیں اور ہومیوپیتھک کی دو ڈسپنسریاں ہیں لیکن یونانی کی ایک بھی ڈسپنسری نہیں ہے۔ تو یونانی کی ڈسپنسری بھی قائم ہو سکتی ہے۔

شری اکبر علی خان (آندھرا پردیش) : ایک بھی نہیں ہے۔

شری ایم۔ اسعد مدنی : ایک بھی نہیں ہے۔ اگر ہو تو جو آپ کے سرکاری لوگ ہیں جو کہ گورنمنٹ کے خرچہ پر علاج کرانا چاہتے ہیں وہ کرا سکتے ہیں۔

شری اکبر علی خان : منسٹر صاحب کہہ رہے ہیں کہ ایک ہے۔

شری ایم۔ اسعد مدنی : نہیں

ہے۔ دہلی میں نہیں ہے۔ میڈی معلومات یہ ہے کہ ایک بھی نہیں ہے۔ یہ ہی نہیں بلکہ میں نے منسٹر صاحب کو اس سلسلہ میں خط لکھا ابو اس کے جواب میں مجھے صاف بات نہیں معلوم ہوئی۔ یہ مجھے شکایت ہے بہر حال اس کے ساتھ میں یہ عرض کر رہا ہوں کہ سرکاری ہیلتھ اسکیم کے مطابق سرکاری لوگوں کو جو رعایتیں ملتی ہیں اور وہ جو علاج کراتے ہیں اس میں یونانی داخل نہیں ہے لیکن اس کے باوجود سرکاری ملازمین طب یونانی میں اپنی جیب سے پیسہ خرچ کر کے علاج کراتے ہیں۔ چھوٹے حکیم جو دہلی میں بہت ہیں ان کے پاس شاید ویکارڈ نہیں ہوگا

[شری ایم - اسعد مدنی]

لیکن آپ حکیم اجمل خان کے
ہندوستانی دواخانہ کو دیکھیں -
ہمدرد دواخانہ کو دیکھیں - شمع کے بڑے
دواخانہ کو دیکھیں - ہمدرد دواخانہ
جو ایشیا میں عظیم ترین ہے اس کو
دیکھیں -

THE MINISTER OF HEALTH AND
FAMILY PLANNING AND WORKS,
HOUSING AND URBAN DEVELOP-
MENT (SHRI K. K. SHAH) : There are a
number of Unani dispensaries.

شری اکبر علی خان : نہیں -

نہیں - گورنمنٹ آف انڈیا کی طرف
سے کوئی نہیں ہے -

شری ایم - اسعد مدنی : تو میں

یہ عرض کر رہا تھا کہ صرف ہمدرد کے
ہی دیکارڈ میں ہی آپ جا کر دیکھیں
تو تقریباً سو ملازمین روزانہ جا کر طب
یونانی میں علاج کراتے ہیں - ان کے
دیکارڈ میں درج ہے اور اپنی جیب سے
قیمت دے کر دوائیں لاتے ہیں - اگر
لوگ اس میں دلچسپی نہیں لیتے
ہیں تو پھر یہ کیوں ہوتا ہے - ممبر
پارلیمنٹ حکیموں کے پاس جاتے ہیں -
میں خود دو سال سے پارلیمنٹ کا
ممبر ہوں آج تک میں - ہمدرد اسکیم
کے مطابق ایلوپیتھک کو اچھا کہتے
ہوئے بھی ضرورت محسوس نہیں کی
اور دوا نہیں لی ایلوپیتھک کے مطابق -
جب بھی میں بیمار ہوتا ہوں تو
صرف حکیم کی دوا استعمال کرتا ہوں -
دو سال سے میں نے کسی ایلوپیتھک
ڈاکٹر سے دوا نہیں لی - ممبر مطلب
یہ نہیں ہے کہ ایلوپیتھک غیر اہم ہے
غیر ضروری ہے اس کو ترقی دینی

چاہئے لیکن یونانی کو بھی ترقی کرنے
کا پورا موقعہ دینا چاہئے -

اسی طرح سے میں یہ عرض کر رہا
ہوں کہ یونانی کالج ملک کے اندر بند
ہوتے چلے جا رہے ہیں - دہلیڈہ گھنٹی
چلی جا رہی ہے - اس طرح سے
مختلف میدانوں میں یونانی اور طب
کے ساتھ بے انصافی ہو رہی ہے - تو
جہاں آپ توجہ کر رہے ہیں اس کو
بڑھا رہے ہیں تو پھر طب یونانی کی
طرف بھی توجہ کی جائے - یہ بات
صحیح ہے اور آپ اس کو محسوس
کرینگے - جب آپ اپنے بجٹ کو
دیکھینگے کہ شاید دو فی صدی بھی
طب یونانی کے لئے آپ کے بجٹ میں
پورے ملک بھر میں خرچ نہیں ہوتا -
اس کو بڑھانا چاہئے نہ کہ لوگوں کو اس
سے فائدہ پہنچے - بے شک طب یونانی
ایسا ہے کہ اس میں اور آہورید میں
بہت فرق ہے بنیادی طور پر - پھر حل
اس فرق کے لحاظ سے آپ کو اس کی
ہمت افزائی کرنی چاہئے تاکہ جو لوگ
اس میں خدمات کر رہے ہیں جس
سے لوگ اس میں فائدہ محسوس
کرتے ہوں تو ان کو بھی ترقی کا موقعہ
ملے اور ملک میں بسنے والوں کو فائدہ
ہو - یہ ملک کی ایک دولت ہے
جس سے ملک کو فائدہ پہنچے گا - تو
انصاف کا تقاضہ ہے کہ آپ اس طرف
پوری توجہ کریں اور طب یونانی کے لئے
الگ کونسل بنا کر آہورید کے لئے الگ
کونسل بنا کر سدھا کے لئے الگ
کونسل بنا کر جس طرح سے آپ نے
ہومیوپیتھک کے لئے الگ سے کونسل
بنا کر ہمت افزائی کی ہے - ویسے ہی

کوئی وجہ نہیں آپ اس کی پوری
ہمت افزائی کریں - میں چاہتا ہوں
جیسے ان کی سمت افزائی کریں ویسے
طب یونانی کو بھی کریں اور یہ جو
کونسلوں میں ان کا عام رجسٹریشن
ہو - یہ سب باتیں دیکھنی ہیں -
دیکھنا کہ مسئلہ دیکھتا ہے ہوا اہم
کام ہے - اس اہم کام کے لئے ان کو پورے
اختیارات ملتے چاہئیں یہ نہیں کہ
ان کی اہمیت کا اعتراف نہ کریں ان
کو موقع نہ دیں یہ انصاف کی بات
نہیں - اس لئے میں درخواست کروں گا
کہ آپ اس کے لئے ایک جداگانہ کونسل
ملطازم کریں اور صرف وعدہ نہیں بلکہ
عملاً ان کو موقع ملنا چاہئے -

آخر میں ایک بات کہونگا - ڈاکٹر
عبدالغنی صاحب ایم - بی - پی -
ایس - بھی ہے حکیم ہیں بڑے خود
انہوں نے مجھے یہ کہا کہ کارڈنگل کا
یونی کامیاب علاج ایلویوٹیک میں
نہیں ہے لیکن طب یونانی میں اس کا
بہترین نسخہ کامیاب نسخہ موجود
ہے - میرے کہنے کا یہ مطلب نہیں ہے
کہ ایلویوٹیک کی یا آیو ویدک کی
اہمیت نہیں ہے - سب کی اپنی اپنی
اہمیت ہے لیکن طب یونانی کی بڑی
اہمیت ملک بھر میں ہے اس لئے اس
کو بھی سب کے ساتھ ساتھ اگے بڑھائیں
اور تمام آرگنوں کو دور کر کے اس کے
دستہ کو صاف کریں تاکہ ملک کو فائدہ
پہنچے -

†[ش्री एम० अरुणद मदनी (उत्तर प्रदेश): नायब सदर
माहव, मैं जो बिना आपके सामने है उसका मजमूई तौर

†[] Hindi transliteration.

पर स्वागत करता हूँ। इसमें कुछ एमेंडमेंट मैंने दिये
हैं। हमारे कान्स्टीट्यूशन में बाजया तौर पर यह यकीन
दिलाया गया है कि हिन्दुस्तान में तमाम अलूम को,
तमाम शिक्षाओं को और तमाम हर किस्म की चीजों
को तरक्की करने का पूरा मौका मिलेगा, इसलिए इससे
बहुत पहले यह होना चाहिए था कि हमारे कान्स्टीट्यूशन
की जो यकीन दिहानी है उसकी रोजगारी में तमाम
तिल्वे यूनानी को और आयुर्वेदिक को और सिद्ध को और
जो दूसरी चीजें हैं उनको पूरा मौका मिलना चाहिये
था, लेकिन बदकिस्मती से उनको पूरा मौका नहीं
मिल सका है और इस विल में इस तरह की उम्मीद
पाई जाती है कि आइन्दा इसको अमली तौर पर भी
पूरा मौका मिलेगा। इस रास्ते में जो कुछ रूकावटें मुझे
महसूस होती हैं, इस विल में अमली तौर पर उनकी तरफ
में आपकी तबज्जो दिलाना चाहता हूँ और इस उम्मीद
के साथ कि इस तरह की जो चुक है उसको दूर किया
जायेगा और अमली तौर पर भी सही तरीके से चलें
ताकि हम अपने मुल्क के बसने वालों की सही तौर पर
खिदमत कर सकें और उनकी खिदमत के रास्ते में
जो रोड़े हैं वे न अटकें।

जाहिर है एलापैथिक इस मुल्क में बहुत तरक्की-
याफता है पहले से ही। बहुत पहले से इसकी सरपरस्ती
और मदद की जाती है और होनी चाहिए। इसकी
तरक्की पर हमको कोई एतराज नहीं है, इसमें बहुत सारे
मुवाफिके शामिल हैं। आज इसका तरीका इलाज बहुत
आगे बढ़ चुका है उसको पूरे तरीके से अपनाना चाहिये।
लेकिन इसके साथ जो हमारे मुल्क में पुराने तरीके
इलाज हैं और जिनसे इस मुल्क के बसने वालों ने करोड़ों
की तादाद में पहले भी फायदा उठाया है और आज भी
मुल्क की बहुत बड़ी आबादी इससे फायदा उठा रही
है। देहात-देहात गांव-गांव में महलों में और बड़े-बड़े
शहरों में इससे फायदा उठा रही है तो उसको हमने
पूरे तरीके से आगे बढ़ाने में जो गफलत पहले रखी है,
अग्रेजों के बमाने में या आज तक हमने जो कमी की है
उसको दूर करना चाहिए।

इस विल के एतबार से मुझको ऐसा महसूस होता
है कि जितने तरीके इलाज के आज वेसी हैं, उनके लिए
एक कमेटी बना कर उनको जैसे घुंट दिया गया हो और
तरक्की के लिए जो पूरी मदद होनी चाहिए उनको
शायद वह न मिल सके, इसलिये मैं यह चाहता था
कि जिस तरीके से आपने होम्योपैथिक के लिए जो
बाहर से आया हुआ तरीका इलाज है—कोई हर्ज नहीं
अगर हमारे मुल्क के बसने वालों को किसी तरीके इलाज

[श्री एम० असप्रद मन्त्री]

से चाहे वह हमारे मुल्क का हो या बाहर का हो फायदा होता है तो उसको हमें धनाना चाहिए अपने मुल्क में बसने वालों के फायदा को खातिर। तो आपने इसके लिए अलग कोमिल बनाई है। बहुत अच्छा है, लेकिन इस तरीके से अपने मुल्क के जो तरीका इनाज है जैसे आयुर्वेद है, यूनानी है, सिद्धा है इसके लिए भी अलग-अलग कोमिल न बनाने से उनकी पूरी हिम्मत अफजाई इसमें नहीं होती है और यह एक तरीके से उनके रास्ते में बाधा डालना है।

गुल फेंके हैं औरों की तरफ बल्कि समर भी, ऐ खाना बर घन्टाज बमन कुछ तो धर भी।

जिस तरह से इनके लिए यह सब कुछ किया गया है, तो अपने जो तरीके इलाज हैं, उनके लिए भी पूरी सहूलियतें और पूरी तबज्जो हांकी चाहिए।

मैं खाम तोर पर यह अर्ज करूँ कि तिब्बे यूनानी इन देसी तरीका हाथ-इलाज के मामलात को देखने के लिए आपकी पालियमेंट के दोनों हाउसिज ने एक कमेटी बनाई, उसने जायजा लिया, लेकिन बदकिस्मती से उसने मुल्क का जो सर्वे किया और जायजा लिया उसमें यहाँ आए हुए वफूद की बात सुनी। बहुत दूर दूर गये। जामनगर आयुर्वेदिक यूनिवर्सिटी को देखा, मद्रास में आयुर्वेद के कामों को देखा, लेकिन मद्रास में, हैदराबाद में और खुद दिल्ली के अन्दर जो यूनानी तिब्बिया कालिज है उसको नहीं देखा। आपको यह मालूम है कि हकीम अजमल खाँ साहब हिन्दुस्तान की बहुत अहम शक्सीयत थे। इण्डियन नेशनल कांग्रेस के सदर रहे और पोलिटिकल हैसीयत में नहीं बल्कि हिन्दुस्तान के एक भण्डार तहसीब गुजरे हैं। उन्होंने यहाँ यूनानी एण्ड आयुर्वेदिक तिब्बिया कालिज बनाया और उसके साथ हिन्दुस्तानी दवाखाना कायम किया था। वह यहाँ दिल्ली में मौजूद हैं। अगर्चे मूव को यह भी शिकायत है कि आज उसकी मिट्टी पलीत हो रही है उसके अन्दर इन्तहाई खराबी है। गवर्नमेंट उसकी तरफ सही तौर पर तबज्जो नहीं कर रही है। उसको न अहलों के हाथ में दे दिया गया है। सेन्ट्रल गवर्नमेंट इसे अपने हाथ में लेकर इतनी बड़ी अहम शक्सीयत की इतनी बड़ी यादगार को बर्बाद होने से बचा सकती है। इसने उसकी तरफ अपनी जिम्मेदारी पूरी नहीं की। अगर यह कमेटी तिब्बिया कालिज को देखती वहाँ के हालात से बाखबर होती और उसकी ज़रूरत का जायजा लेती तो शायद इस तरह की एक तरफा रिपोर्ट न होती, लेकिन बदकिस्मती से उसने जाकर इन कालिजों को देखने और वहाँ

के मामलात को समझने की ज़रूरत गवारा नहीं की, बल्कि जो वफूद आये उनकी बातों को कुछ सुन कर इसी पर फैसला कर लिया। बहरहाल इसी तरीके से हम को यह भी शिकायत है कि यहाँ इण्डियन मेडिसन के सिलसिले में सेन्ट्रल हेल्थ मिनिस्ट्री में एडवाइजर हैं। तीन किस्म की इण्डियन मेडिसन मानी गई है और आपने हिन्दुस्तानी तरीका इलाज के लिए एडवाइजर मुकर्र किया है, तो बेजक या तो तीनों तरीकों के लिए तीन एडवाइजर होने चाहिए, यह भुनासिब बाल है या फिर एक ही रखना है तो एक मर्तबा अगर आयुर्वेद के किसी साहब को इस पोस्ट पर नामजद किया गया है तो दूसरी दफा किसी तबीब को भी मौका देना चाहिए था। ऐसे हकीम भी हिन्दुस्तान में मिल सकते हैं। सिद्धा के भी किसी आदमी को यह मौका देना चाहिए था उनमें भी ऐसा कोई आदमी मिल सकता है, लेकिन बदकिस्मती से पहले दो जो नामजद किये गए और जो साहब आज हैं तीनों के तीनों सिर्फ आयुर्वेद के हैं और कोई हकीम या सिद्धा का आदमी इण्डियन मेडिसन के एडवाइजर के तौर पर सेन्ट्रल गवर्नमेंट में नहीं रखा गया।

इसी तरह पब्लिक सर्विस कमिशन की तरफ से जो एनाउन्समेंट होता है, जो इस्तेमाल निकलने हैं सरकारी पोस्टों के लिए, हेल्थ मिनिस्ट्री के लिए और जिसके लिए सलाहियत के एतबार से हकीम और आयुर्वेद दोनों बराबर होते हैं, उनमें सिर्फ आयुर्वेद को सलाहियत इस्तेमाल में छती है और किसी में उसके साथ हकीम का हवाला नहीं दिया जाता तो कोई हकीम किस तरह दरखवास्त दे सकता है इन जगहों के लिए। चुनावे तमाम मुल्क के हकीम इस हक से बिलकुल महकूम रह जाते हैं। यह ऐसी अमली शिकायतें हैं, जिनकी वजह से बहुत नाइन्साफी होती है, मुल्क के एक देसी तरीका इलाज के साथ। तो इसकी तरफ हकूमत को तबज्जो करनी चाहिए। (Time bell rings) जनाब भेरे खयाल में मुझे तो चार मिनट ही हुए हैं।

श्री उपसभापति : आपको 9 मिनट हो गये एकाध मिनट और न लें।

श्री एम० असप्रद मन्त्री : मुमकिन है कि मैंने गलत घड़ी देखी हो। बहरहाल मैं दो तीन मिनट ही लूंगा। मैं अर्ज करूँ कि हेल्थ स्कीम के मुत्तलक अपने दिल्ली खास में सरकार ने डिस्पेंसरियां कायम की हैं और आपकी यहाँ एलोपैथिक की पांच डिस्पेंसरियां हैं। आयुर्वेद की पांच डिस्पेंसरियां हैं और होम्योपैथिक की

दो डिस्पेंसरियाँ हैं, लेकिन यूनानी की एक भी डिस्पेंसरी नहीं है। तो यूनानी की डिस्पेंसरी भी कायम हो सकती है।

श्री अकबर अली खान (आन्ध्र प्रदेश) : एक भी नहीं है।

श्री एम० असमद भदनी : एक भी नहीं है। अगर हो तो जो आपके सरकारी लोग हैं जो कि गवर्नमेंट के खर्च पर इलाज कराना चाहते हैं, वे करा सकते हैं।

श्री अकबर अली खान : मिनिस्टर साहब कह रहे हैं कि एक है।

श्री एम० असमद भदनी : नहीं है, दिल्ली में नहीं है। मेरी मालूम यह है कि एक भी नहीं है। मैंने यह ही नहीं बल्कि मैंने मिनिस्टर साहब को इस सिलसिले में खत लिखा और उनके जवाब में मुझे को साफ बात नहीं मालूम हुई। यह मुझे शिकायत है बहरहाल इसके साथ मैं यह बत कर रहा हूँ कि सरकारी हेल्थ स्कीम के मुताबिक सरकारी लोगों को जो रियायतें मिलती हैं और वे जो इलाज कराते हैं, उसमें यूनानी दाखल नहीं है, लेकिन इसके बावजूद सरकारी मुलाजमीन तिव्वे यूनानी में अपनी जेब से पैसा खर्च करके इलाज कराने जाते हैं। छोटे हकीम जो दिल्ली में बहुत हैं, उनके पास शायद रिकार्ड नहीं होगा। लेकिन आप हकीम अजमल ख के हिन्दुस्तानी दवाखाने को देखें, हमदम दवाखाने को देखें, शमा के बड़े दवाखाने को देखें, हमदर्द दवाखाने को देखें, हमदर्द दवाखाना जो एशिया में अहीम तरीक है उसको देखें।

THE MINISTER OF HEALTH AND
FAMILY PLANNING AND WORKS,
HOUSING AND URBAN
DEVELOPMENT (SHRI K. K. SHAH) :
There are a number of Unani dispensaries. ...

श्री अकबर अली खान : नहीं, नहीं, गवर्नमेंट आप इण्डिया की तरफ से कोई नहीं है।

श्री एम० असमद भदनी : तो मैं यह अर्ज कर रहा था कि सिर्फ हमदर्द के ही रिकार्ड में ही आप जा कर देखें तो तकरीबन सौ मुलाजमीन रोजाना जाकर तिव्वे यूनानी में इलाज कराते हैं उनके रिकार्ड में दर्ज है और अपनी जेब से कीमत देकर दवायें लाते हैं। अगर लोग इसमें दिलचस्पी नहीं लेते हैं तो फिर यह क्यों होता है? मेम्बरस पार्लियमेन्ट हकीमों के पास जाते हैं। मैं खुद दो साल से पार्लियामेन्ट का मेम्बर हूँ, आज

तक मैंने हेल्थ स्कीम के मुताबिक एलोपैथिक को अच्छा कहते हुए भी जरूरत महसूस नहीं की और दवा नहीं ली। एलोपैथिक के मुताबिक जब भी मैं बिमार होता हूँ तो सिर्फ हकीम की दवा इस्तेमाल करता हूँ। दो साल से मैंने किसी एलोपैथिक डाक्टर से दवा नहीं ली है। मेरा मतलब यह नहीं है कि एलोपैथिक गैर-अहम है, गैर-जरूरी है उसे तरकी देनी चाहिए, लेकिन यूनानी को भी तरकी करने का पूरा मौका देना चाहिए।

इसी तरह से मैं यह अर्ज कर रहा हूँ कि यूनानी कालेज मुल्क के अन्दर बन्द होने चले जा रहे हैं, ऐड घटती चली जा रही है। इस तरह से मुस्तलिफ मैदानों में यूनानी और तिव्वे के साथ बेइन्साफी हो रही है। सो जहाँ आप तबज्जो कर रहे हैं, उसको बढ़ा रहे हैं तो फिर तिव्वे यूनानी की तरफ भी तबज्जो की जाये। यह बात सही है और आप इसको महसूस करेंगे जब आप अपने बजट को देखेंगे कि शायद दो फी सदी भी तिव्वे यूनानी के लिए आपको बजट में पूरे मुल्क भर में खर्च नहीं होता। इसको बढ़ना चाहिये ताकि इससे लोगों को फायदा पहुँचे। बेशक तिव्वे यूनानी ऐसा है कि इसमें और आयुर्वेद में बहुत फर्क है बुनियादी तौर पर। बहरहाल इस फर्क के लिहाज से आपको इसकी हिम्मत अफजाई करनी चाहिए। ताकि जो लोग इसमें खिदसात कर रहे हैं, जिससे लोग इसमें फायदा महसूस करने हों तो उनको भी तरकी का मौका मिले और मुल्क में बसने वालों को फायदा हो। यह मुल्क की एक दोलत है जिससे मुल्क को फायदा पहुँचेगा। तो इन्साफ का तकाजा है कि आप इस तरफ पूरी तबज्जो करें और तिव्वे यूनानी के लिए अलगकी मिल बना कर, आयुर्वेद के लिए अलग कौंसिल बना कर मिट्टा के लिए अलग कौंसिल बना कर जिस तरह से आपने होम्योपैथिक के लिए अलग से कौंसिल बना कर हिम्मत अफजाई की है वैसे ही कोई बजह नहीं आप इसकी पूरी हिम्मत अफजाई करें। मैं चाहता हूँ जैसे उनकी हिम्मत अफजाई करें वैसे तिव्वे यूनानी की भी करें और ये जो कौंसिलें हैं इन का ग्राम रजिस्ट्रेशन हो यह सब बातें देखनी हैं रिकग्नीशन का मसला देखना है। बड़ा अहम काम है। इस अहम काम के लिए उनको पूरे अख्तियारात मिलने चाहिए। यह नहीं कि उनकी अहमियत का एतराफ न करें, उनको मौका न दें यह इन्साफ की बात नहीं है, इसलिए मैं दरखवास्त करूँगा कि आप इसके लिए एक जुदागाना कौंसिल मंजूर करें और सिर्फ बायदा नहीं बल्कि अमलन उनको मौका मिलना चाहिए।

[श्री एम० अहमद मन्नी]

आखिर मैं एक बात कहूँगा। डाक्टर अब्दुल गनी साहब एम० बी० बी० एस० भी थे, हुकीम भी थे। खुद उन्होंने मुझ से कहा कि कारबंस्ल का कोई कामयाब इलाज एलोपैथिक में नहीं है, लेकिन तिब्बे यूनानी में उसका बेहतरीन नुस्खा कामयाब नुस्खा, मौजूद है। मेरे कहने का यह मतलब नहीं है कि एलोपैथिक की या आयुर्वेदिक की अहमियत नहीं है। सबकी अपनी अपनी अहमियत है लेकिन तिब्बे यूनानी की भी अहमियत मूलक भर में है इसलिए उसको भी सबके साथ साथ आगे बढ़ायें और तमाम अड़चनों को दूर करके उसके रास्ते को साफ करें ताकि मुल्क को फायदा पहुँचे।]

SHRI A. D. MANI : Mr. Deputy Chairman, Sir, I oppose this Bill with mixed feelings, because I myself have practised one of the so-called Indian systems of medicine, namely, homoeopathy, which, unfortunately, has been excluded from this Bill.

I have studied a good deal of homoeopathy and at one time I felt that homoeopathy was the last word, was the final word in the medical science. I have treated one of the members of the All-India Medical Council.

Please do not anticipate my points. I have treated a member of the All India Medical Council. He was suffering from insomnia. I gave him aconite-6 and he felt much better by taking aconite-6 than he had ever been before by taking tranquilisers. But I found later that homoeopathy as different from the other systems of medicine has got serious gaps in knowledge. Homoeopathy was discovered in the 18th century and Ayurveda was formulated many centuries ago, and so also the Unani system of medicine. But the word has advanced very much and after Sulphonamides and antibiotics the entire medical world has undergone a revolution. Mr. Shah who is an admirer of the Ayurvedic system of medicine must accept the fact that sulphonamides and antibiotics are completely revolutionary in the system of medicine. Then I came to feel that homoeopathy was not the last word but perhaps a useful word in medicine and I came to the conclusion later after studying certain books on modern medicine that modern medicine had the key to greater knowledge in regard to the ailments of humanity.

Sir, what does this Bill seek to do? It seeks to bring in the communal electorate principle in the systems of medicine. It says that if any decision is to be taken in

regard to the Unani system of medicine by the Central Council, then three members practising in that system must agree. Now in regard to medical knowledge there is no question of a Unani doctor or an Ayurvedic doctor. What is the correct ailment and what is the correct remedy to be prescribed? That is important. Why should Mr. Shah try to placate all the separatist feelings in this country? The system is not integrated. Why should these three Ayurveds agree or three Unani doctors agree before a change is made? I am unable to accept this theory. He does not say that any modern doctor, any person conversant with modern medicine, must be associated with the Council. You are trying to introduce the principle of communal electorates in this sphere. I agree with my friend, Mr. Bhadram, that this Bill seeks to launch under the certificate of the Central Government a large number of quacks in this country who are so-called medical practitioners in the Ayurvedic and Unani systems.

SHRIAKBARALI KHAN: Mr. Mani, don't you think that there are thousands of people who are being cured by Ayurveda and Unani?

SHRI A. D. MANI : I will give you my own example. I took one patient who was not properly treated in the Willingdon Hospital. (Interruptions) I have practised it own myself. (Interruption) Sir, I have also studied allopathy and I can also give allopathic treatment. But I am not wanting to be registered as a qualified practitioner either in modern medicine or homoeopathy.

SHRI K. K. SHAH : Can I call you a quack? You are such an expert in homoeopathy without registration and without medical qualification.

3 P.M.

SHRI A. D. MANI : I want to give you my experience of the so-called Indian system of medicine.

SHRI AKBAR ALI KHAN : How many persons who have been under your treatment have had a prepetual life?

SHRI A. D. MANI : I took a patient who was ailing from something which was not cured by- the Allopaths to a Unani Doctor. When I say Unani Doctor, please do not misunderstand that I am casting any reflection on any system of medicine. The pulse was taken. The pulse can be brought down by Equibron or by taking a tranquiliser. The pulse is never the indication. It is the heart-beat which is the indication under the modern

system. Tie pulse was taken and two bottles of what looked like water was prescribed With some powder and the Bill was Rs. 30. If the matter had gone before the Minister for Petroleum and Chemicals. .

شہری ایم - اسعد ذہم : آپ اس
بدنالی سے واقف نہیں ہیں وہ کچھ اور
بھی دیکھتے ہیں -

(Interruption)

*[श्री एम. असद सदनी : आप इस प्रणाली से वाकिफ नहीं हैं वह कुछ और भी देखते हैं।]

SHRI A. D. MANI : The Minister would have hauled up the person. (Interruption)

सुन लीजिए, मैं अपना अनुभव बता रहा हूँ, सच्चा, अनुभव बता रहा हूँ। I am not getting the protection of the Chair to the extent I hat I deserve. I want to take one point about all these things. You are talking of price control in regard to allopathic drugs. What about price control over Ayurvedic or Unani drugs? Why should anyt >dy charge Rs. 30 for two bottles of water?

AN HOR . MEMBER : What happened then?

MR. DIPUTY CHAIRMAN : You continue yc ur speech.

SHRI A. D. MANI : They are very hostile to me. Truse are all matters which Mr. Shah should take into consideration. I feel that i we want to help Ayurved and Unani systems of medicine, we have to accept the fact that the modern system of education i l medicine must be the basis for both tin systems namely, a good knowledge of ;inatomy and physiology and a fair acquaintance with pharmacology. These three things are necessary. Taking the pulse and prescribing. .

SHRI K. K. SHAH : May I take it that if the qualifications for admission to Ayurved are fixed that in the previous standard, in matriculation these subjects should be tought, then you have no objection?

SHRI A. D. MANI : No. Matriculation standard v; ry from University to Univer- sity. The moment you admit them, I only want vou to prescribe these as compulsory stu lies where a person must get at least 6\$% . Very few know about human anaiomy among the Ayurveds and Unani physicians. The holding of the pulse . . .

†[] Hindi transliteration.

SHRI K. S. CHAVDA (Gujarat) : He should address the Chair.

MR. DEPUTY CHAIRMAN : He is addressing the Chair but only looking to that side.

SHRI A. D. MANI : In regard to the Central Council, do not think I am putting forward any outlandish theory. There must be somebody who brings a sense of balance regarding research in these systems of medicines. There must be somebody acquainted with the modern system of medicine in the Central Council. I do not want you to confine it only to the scheduled tribes of Unani doctors and the scheduled tribes of Ayurvedic physicians. Why should you have this sort of compart-mentalisation among the doctors. I would like Mr. Shah to put up a member of the Medical Council also on this Board who may benefit by his association with the Ayurvedic physicians and Unani doctors. Regarding clause 17 it says :

"Nothing contained in sub-section (2) shall affect the right of a practitioner of Indian medicines enrolled on a State register of medicines to practise Indian medicine in any State merely on the ground that on the commencement of this Act he does not possess a recognised medical qualification."

Mr. Shah knows 'that this Parliament itself passed a law which enabled one lakh of quacks, I repeat, one lakh of quacks, to be enrolled as medical practitioners. They are quacks but they call themselves doctors. I call them quacks. (Interruptions) I am also a quack. You are also a quack. All of us are quacks. I feel that the moment the Council comes into being, some attempt should be made to revise these lists and see whether these persons have acquired the requisite knowledge and experience. It is time to put some sort of moral pressure on them to improve their knowledge, to improve their techniques.

My third point is this, and this is the final point regarding Ayurveda and Unani medicines. Now, Sir, when I buy an allopathic medicine, I get a folder which says that, if I take more than five tablets for example, or, say, a tablet in excess of the prescribed dosage, I may develop rash. For example, erythrocine is one of those drugs which may cause allergic reactions. Now, in the Unani system of medicine or the Ayurvedic system of medicine you are given a bottle on which it is written that the medicine contained in that bottle is meant for brain disorder, for stomach disorder

[Shri A. D. Mani]

and for other disorders. In fact, all disorders are included in the table on the bottle. I say there should be a definite statement about the medicinal properties of the Ayurvedic medicines, for example. I am sure Mr. Shah will agree that this is necessary because we must know what the properties are because a medicine may fail and the patient may die, and Mr. Mariswamy mentioned the case of a man who died after taking some 'Lehiyam'. So one must know what he is taking, and the Minister should insist that the Ayurveda and Unani systems of medicine must accept the same rigorous control over pharmaceutical preparations which the allopathic system has accepted under the various Drug Control Orders. If this is done, I hope that these two Councils will develop research in the Ayurveda and Unani systems of medicine. I quite agree with my friend, Mr. Shah, that Sushruta had a very clear idea of the anatomy of the human body and his methods of plastic surgery have been a model for modern plastic surgery. But that does not mean that all knowledge was concentrated in India at that time. Humanity is progressing. Our knowledge is increasing. We must honour our ancients and take the best of what they did. And there are a large number of Indian drugs which can also be subjected to extensive research and analysis. I may mention about the drugs also.

MR. DEPUTY CHAIRMAN : You need not mention about them now.

SHRI K. K. SHAH : I accept your statement. Would you not agree that we find out what we knew? Let us find out what we knew, and after finding out what we knew, if we find that anything else is necessary, we shall take it, but at least let us find out what we knew.

SHRI A. D. MANI : I entirely agree with Mr. Shah. One more point about the drugs. I am sorry that these are all matters of personal detail. Ten years ago some Ayurvedic physician said that I was developing cataract. He gave me some powder. I put the powder in my eyes and I saw an atomic blaze before me and I was seeing things very much better. And when I continued using this powder, somebody said that I should better get myself examined by an opthalmic surgeon. I got myself examined by him and he told me that there was no sign of cataract at all in my eyes.

SHRI K. K. SHAH : That shows that the Ayurvedic medicine had benefited you and your eyes were very good at least at that time.

SHRI A. D. MANI : After that I did not use this medicine. All these go to show that these drugs should be carefully examined and properly explained.

Thank you very much.

श्री गनेशो लाल चौधरी (उत्तर प्रदेश) : उपाध्यक्ष महोदय, यह बिल जिस रूप में आया है मैं उसका समर्थन नहीं कर सकता और उसके दो कारण हैं। एक कारण तो यह है कि जितने हमारे यहां के मिनिस्ट्र हैं, मेडिसिन के, उनके अलग-अलग बोर्ड बनने चाहिए थे। जिसका इसमें यह प्रावधान होना चाहिए था। यदि उनके लिए अलग-अलग बोर्ड हों, तभी उनकी तरक्की हो सकती है। दूसरा कारण यह है कि मैंने जब इस बिल को पढ़ा तो इसमें जो कॉमिन बनाने की बात आयी है उसमें देश के जो श्रेष्ठ कान्ट है या जो श्रेष्ठ ट्राइन्स है उनको कॉमिन में रखने का प्रावधान नहीं किया गया है। इस कारण मैं इस बिल का समर्थन नहीं कर सकता।

संहराज, यह बिल आया जिसको बहुत पहले जाना चाहिए था। देश में सबसे दुस्त प्रायः। इस बिल से यह पता चलता है कि श्रीमती फीरोज गांधी की जो सरकार है, वह किसी दूरदर्शिता में परे है। क्योंकि इस बिल की बहुत पहले धा जाना चाहिए था। मैं आपको एक मिसाल दूंगा कि श्रीमती फीरोज गांधी की जो सरकार है, देश में जब लड़ाई जगड़े हो जाते हैं, कम्युनिज बाते हो जाती हैं तो उसके बाद उन पर विचार करती है। जब देश में नक्सलपंथी बढ़ जाते हैं, तो उनके बारे में सोचा जाना है कि उन नक्सलपंथियों कैसे दबाया जाय। यह दूरदर्शी है, श्रीमती फीरोज गांधी की सरकार की। जब सूबों में एक नया सूबा बनाने के लिए आन्दोलन होता है, तबाम सोड़-फोड़ हो जाती है तब सूबा मंजूर किया जाता है। आज जब देश में चारों तरफ हरिजनों को जलाया जा रहा है, हरिजनों को गोलियों मारी जा रही है, तो श्रीमती फीरोज गांधी की सरकार को यह सोचना पड़ रहा है कि उनकी रक्षा कैसे की जाय। यह पहले सोचना चाहिए था कि देश में एक आर्थिक कान्ति चल रही है और जब आर्थिक कान्ति चलती है तो उस आर्थिक कान्ति के साथ झगड़े होते हैं और इस लिए उन को रोकने के लिए सरकार को पहले से तैयार रहना चाहिए था। तो मैं इसलिए कह रहा हूँ कि आज श्रीमती फीरोज गांधी की सरकार जो है वह दूरदर्श नहीं है...

SHRI G. A. APPAN (Tamil Nadu) :
Mr. Deputy Chairman, on a point of order.

The other day in the House I raised a point of order that when people address hon. Members of the House or Ministers they should address them by the name by which they are known in the electoral rolls. The other day my friend Mr. Rajnarain was using an expression like small children. Let us have decorum and decency; let us respect each other. I want that name Feroze Gandhi to be expunged; if he wants to say Mrs. Gandhi, I do not mind.

MR. DEPUTY CHAIRMAN : The other day I also pointed out that when referring to Ministers and Members, hon. Members should refer to them in polite language and actually I had suggested to Mr. Rajnarain that he should refer to the Prime Minister as Mrs. Indira Gandhi. I hope this discipline will not prove to be contagious and will not spread further.

श्री निरंजन वर्मा (मध्य प्रदेश) : आपने जो कहा वह तो ठीक है लेकिन अगर मिसेज फीरोज गांधी भी उनको कहा जाय तो उससे उनके प्रति अभद्रता प्रकट नहीं होती है।

श्री शीलभद्र राजो (बिहार) : आपकी वाइफ का नाम ले कर अगर आप को बुलाया जाय तो क्या बहुत अच्छा है ?

MR. DEPUTY CHAIRMAN : I had told the House the other day that if you want to address the Prime Minister as Shrimati Indira Feroze Gandhi I would have no objection but if you say Shrimati Feroze Gandhi it is not proper.

SHRI N. K. SHEJWALKAR (Madhya Pradesh) : What is wrong with it?

MR. DEPUTY CHAIRMAN : I think you all know that first your own name comes and then comes the surname. But if you use this in a derogatory manner, that is not proper.

श्री निरंजन वर्मा : जो आपका मुझाब है उसमें हमें कोई आपत्ति नहीं है। लेकिन मैं इतना ही निवेदन करना चाहता हूँ कि अपने देश में यह प्रथा है कि पति के नाम के पीछे वरनाम चलता है और मिसेज लगता है। तो इस में किसी सदस्य को अभद्रता नहीं दिखनी चाहिए।

श्री उपसभापति : जिस दृष्टिकोण से कहा जा रहा है उसके लिए मैंने कहा।

SHRI G. A. APPAN : Our guideline is the electoral roll or the University Register.

श्री ह्यातुल्ला अन्सारी (उत्तर प्रदेश) : देखिए एक मसल है, खिसियानी बिल्ली खग्वा मोचे, जो हार गये हैं, बहुत परेशान हैं, वह अगर बुरे-बुरे नाम ले कर के कुछ रोना चाहते हैं तो मैं समझता हूँ कि हमको थोड़ा सा सन्न करना चाहिये।

श्री उपसभापति : अच्छा गनेशी लाल जी आप कहिये।

श्री गनेशी लाल चौधरी : मुझे बड़ा दुःख है, श्रीमती फीरोज गांधी के नाम पर हमारे भाइयों को इतराज है। मैं अपने देश की परम्परा को बनाना चाहता हूँ कि देश की जो परम्परा है उसमें पुरुष का नाम स्त्री के साथ लगता है, तो मेरे खयाल से मुझे माफ करेंगे मेरे दोस्त जो कि उधर बैठे हैं, जिनको इस बात से कोई तकलीफ हुई है, अपनी संस्कृति और अपनी परम्परा के अनुसार मैंने श्रीमती फीरोज गांधी के साथ कोई अभद्रता की बात नहीं की है।

SHRI G. A. APPAN : Can you not give a ruling on this point?

MR. DEPUTY CHAIRMAN : Please sit down. Let him continue.

श्री गनेशी लाल चौधरी : श्रीमन्, यह पहला अवसर है जब एक सेंट्रल काउंसिल आफ इंडियन सिस्टम आफ मेडिसिन और होम्योपैथिक काउंसिल का गठन हो रहा है। यह पहला अवसर है जब कि अपने देश कि मेडिसिन्स के जो सिस्टम्स हैं, अपने देश के वातावरण में पली हुई जो मेडिसिन्स हैं इनको सारे देश के वातावरण में सोचा जा रहा है और यह सोचा जा रहा है कि जो इसकी प्रैक्टिस करते हैं, उनकी न्यूनतम योग्यता क्या हो, शिक्षा का समय क्या हो, शिक्षा का सिलेबस क्या हो और जो शास्त्री बन कर के, पढ़ कर के आते हैं उनको क्या डिग्री दी जाय। तो यह इसके लिये पहला अवसर है। वैसे, उपाध्यक्ष महोदय, हमारे देश में जो अपने देश की चिकित्सा प्रणाली चल रही है, उनको सरकार की ओर से अब तक मान्यता नहीं मिली और यह उन चिकित्सा प्रणालियों की उपयोगिता हो है कि आज तक बिना सरकार की किसी सहायता के भी जिन्दा है।

Time bell rings

श्रीमन्, मेरा तो बहुत सा टाइम चला गया, आप उसका तो खयाल रखें। श्रीमन् मैं सरकार से एक प्रश्न पूछना चाहता हूँ कि आज जो देश का 70 फीसदी आदमी देहात में रहता है, उसको चिकित्सा की मुविधा

[श्री गनेशी लाल चौधरी]

देने के लिये आपके पास कोई स्कीम है। सन् 1944 ई० में चिकित्सा शास्त्री श्री जीवराज जी ने कहा था कि देश में जो बीमारियां हैं वह लगभग 87 प्रतिशत साधारण बीमारियां हैं। और 13 प्रतिशत जो हैं वह स्पेशल बीमारियां हैं। तो आज देश में जो पैसा खर्च हो रहा है, व्यय हो रहा है, वह केवल 13 प्रतिशत बीमारियों के लिये हो रहा है, 13 प्रतिशत लोगों के लिये हो रहा है। तो मैं माननीय मंत्री जी से कहूंगा कि ऐसी कोई स्कीम बनायें, जिससे कि देश के सारे लोगों को दवायें उपलब्ध हो सकें।

मैं आपके सामने दो तीन सजेसन देना चाहता हूं, उपाध्यक्ष जी भी मेरी ओर देख रहे हैं और चाहते हैं कि मैं जितनी जल्दी हो सके खत्म कर दूं। तो मैं आपके सामने दो तीन सजेसन देना चाहता हूं। यह कि आज चिकित्सा प्रणाली जो है वह विलेज ओरियेंटेड करें। क्या आपके पास कोई स्कीम है कि शहर में जो आप सुविधाएं दे रहे हैं, उसको घटा कर देहात की ओर ले जायेंगे और आपकी जो स्कीम है वह विलेज ओरियेंटेड है। दूसरा मुझसे मैं देना चाहता हूं कि यह जो चिकित्सा प्रणाली है यह क्वालिटेटिव न हो कर क्वान्टिटेटिव हो—“ग्रेटेस्ट गुड आफ दि ग्रेटेस्ट नम्बर”। आप समाजवाद की तरफ जा रहे हैं, समाजवाद चला रहे हैं, तो कृपा कर आप 13 परसेंट बीमारों के लिये आप सारा पैसा मत खर्च करें, ज्यादा से ज्यादा लोगों को आप हिन्दुस्तानी दवायों की ओर ले जाएं।

तीसरा मुझसे यह है कि आप देश के स्तर पर, सारे देश में जो चिकित्सा के क्षेत्र में शास्त्री हैं, उन चिकित्सा शास्त्रियों को आप बुलाएं और उनकी कमेटी बना कर यह निश्चित करें कि सस्ती से सस्ती दवाएं कौनसी प्रणाली दे सकती है और राष्ट्रीय स्तर पर शिक्षा चलाएं। इसमें जिस तरह से आप रक्षा के लिये प्राथमिकता देते हैं, जिस तरह से शिक्षा के लिये प्राथमिकता देते हैं, खानों और कपड़े के लिये प्राथमिकता देते हैं, उसी तरह से आप उन दवायों के लिए भी प्राथमिकता दें और आगे रखें।

इन शब्दों के साथ उपसभापति जी मैं जिस रूप में यह बिल आया है, उसका समर्थन नहीं करता हूं।

SHRI HAM ID ALI SCHAMNAD (Kerala) : Mr. Deputy Chairman, while supporting this Bill, to provide for the constitution of a Central Council of India Medicine and Homoeopathy and maintenance of a Central Register of Indian

Medicine and so on, I hope the Government will bring forward another comprehensive legislation to do away with the defects and lacunae that are existing today in this Bill. I hope the Government would make a survey of the system of our Indian medicine that is being practised and after making an entire survey would bring forward a comprehensive legislation in future. Indian medicine consisting of Ayurveda, Siddha and Unani systems today is not given its proper place in the national health service of India. They do not come in the proper national channel of health service. Why is it so? Ayurveda is no doubt one of the glorified systems of medicine, no doubt of it, but has the quality of the Ayurvedic medicine improved? That has to be seen, and Government should take steps to see that the quality of the Ayurvedic medicines is improved. It is not enough if we increase the native physicians or Aurvedic physicians. It is absolutely necessary that the quality of the medicines should also be improved. A scientific approach should be made. As has been pointed out by many Members here, when we say Ayurvedic physician, we must also define who is an Ayurvedic physician. We should not recognise a quack as a physician. They will have to deal with human beings and not with the animals, as has been pointed out. It is absolutely necessary that whoever practises must be qualified. If it is in Ayurveda system or Unani system or if it is in Homoeopathy, in whichever system he may practise, we should not allow just a man to call himself a Homoeopathic doctor or other doctor. One fine morning a man appears on the scene and calls himself a Homoeopathic doctor and we recognise him. This is a question that I should like to put before this House and submit to the Health Minister. I am given to understand that even postal tuition is being given for Homoeopathy system of medicine. How would it be possible? One gentleman told me that he studied the Homoeopathic system of medicine through postal tuition. After studying it by postal tuition he treats the patients. If this is so, I do not know where our patients would go. We need not mind whether the origin of the medicine is east or west or is Indian. What is best suited to our country and to humanity should be taken into consideration. We need not be guided or prejudiced by sentimental values.

I should like to make a few points about integrated medicine. Modern medicine and Ayurveda are combined together and the integrated medicine is being formed. Some colleges were started

our country. There was one GCIM College in Madras, Graduate Course in Indian Medicine with modern medicine course was started there a few years ago. Unfortunately that college converted itself into a modern medical college. And students coming out of that institution claim that they have attained knowledge of Ayurvedic medicine. When they go out of the college, they do not touch Ayurveda. They only practise modern medicine because Ayurveda is not attractive to them; nor the people are attracted by Ayurveda. These GCIM students and doctors after coming out of that college, attended a five-year MBBS course and have got the MBBS degrees and they have become allopathic doctors. So also in Kerala we have got an Ayurvedic College which gives the Degree of BIM, Bachelor of Indian Medicine. Even these doctors, after they come out of that college, are attracted by MBBS degrees. After BIM, they are not content with Ayurvedic medicine, they do not practise that medicine. They also go in for MBBS. A condensed course has been started by the Kerala University. After a two-year course they also get the MBBS degrees. The bifurcation should be there, division of medicine should be there. Homoeopath means that he should practise homoeopathy only and he should specialise in homoeopathy. So also, if it is Ayurveda, he should specialise in that particular branch of medicine. He must specialise in that, make research and practise in that medicine alone, none else. I have no objection to Unani medicine. Definitely one should not be prejudiced against it. Unani medicine also should be practised, should be studied, research should be conducted in it. Those doctors should practise their system only. Whatever medicine the study in the college when they come out of the college, they do not practise that, but practise only modern medicine. Is it so? There is another tendency. Medical science has advanced very far. Today we do not have general practitioners in the country. If a man has got pain in the chest, immediately he runs to the lungs expert. If he has got throat pain, he goes to the ENT specialist. Eye means eye specialist, heart means heart specialist. There is specialisation in various branches. As I say is, when medical science has so much advanced, it is no fun in our country that our old, ancient method alone should be adopted, unless the quality or it is improved. I say that the Indian medicine should definitely improve. In the rural areas we have got many physicians, native physicians. What happens there? Poor patients go there. These physicians treat them. And when they find that it is incurable, then they say, you

II RSS 70-7.

go to some doctor. They send them to some doctors. When they go to the government hospitals, the doctors there say to them, you have come here too late. The disease has advanced too much. It is incurable. Either it is cancer or advanced TB or things like that. Without diagnosing the disease, without knowing the fundamentals, these people who are not qualified, style themselves as physicians, they treat patients. Sometimes they cure them because 80 per cent of the diseases could be cured without taking any medicine. By chance they get cured. I submit to the Government, to the Health Ministry, that proper registration should be maintained in every district medical office for those who are all practitioners and their qualifications in Ayurveda etc. The minimum qualification should be prescribed. Only such a person should be registered in the Register. This is absolutely necessary, Sir, to avoid these bogus physicians. I do not say anything against our Ayurveda system. Definitely it has got a glory behind it and many people go in for Ayurveda treatment. In Kerala we have a very famous Ayurveda institution in Kottakal. Even our President, Mr. Giri, got himself treated in that institution. Such institutions should be helped and should be developed, should be given the fullest chance to develop. At the same time, Ayurveda, modern system of medicine, and homoeopathy should not be mixed together and called the integrated system. That will do more harm than good to the country and to the humanity.

There is another point which I wish to mention here. Many of our modern doctors, after getting their M.B.B.S. degree go to foreign countries for higher studies but they do not return to India. There are many Indian doctors today working in foreign countries either in the United Kingdom or in the United States of America. Why do they not come to India? They say that they do not get the necessary encouragement from the Government of India. That is why they stick on to these foreign countries. So I submit to the Health Ministry that we must attract all our Indian doctors who are working in foreign countries to our country so that they may serve Indians and the suffering humanity of this country.

MR. DEPUTY CHAIRMAN : Mr. Appan. Five minutes only.

SHRI G. A. APPAN : Mr. Deputy Chairman, Sir, I am very happy to support the Bill with the following observations. It is good that medical practitioners have

been compelled to have themselves registered under the medical registration scheme and that Medical Councils are to be constituted for Ayurveda, for Siddha and for Unani. No doubt homoeopathy is also there. My only regret is that the integrated medicine people who are qualified under integrated medicine could not find a separate Council for themselves. Whether these people of the integrated medicine course should have a separate Council or not is for the consideration of the Government. They will have no other option if they were my views. The Government seeks to enrol members, even quacks, as my friend put it. I entirely agree with Mr. Koya and Mr. Mani

SHRI HAMID ALI SHIAMNADI
am not Koya.

SHRI G. A. APPAN : That is why I pointed my finger towards you... and others who spoke before me. In this respect when the Government wants to provide a Council for people who are not qualified, who have not passed any examination and who have their own practice to be enrolled as members, I really wonder. Is the Government or any respectable citizen tolerate the idea of denying a separate Council for such people? Why did this integrated system of medicine come? When did it come? Mr. Deputy Chairman, Siddha is a system of ancient medicines, more ancient than any other system. It is a system practised by Tamil scholars, in the Siddhas of Medical Dictionary. The Siddhas propounded this system which is superior to the Ayurvedic or the Unani system. Because these systems could not do surgery, which was in many cases required to cure people who had trouble in the internal side of their body, the integrated system of medicine had to be developed. If these three systems had been developed, then there would have been no need to start the integrated system of medicine at all. To do something which these three systems could not accomplish, i. e. surgery, a better and more integrated system, both theory and practice, was developed. Mr. Deputy Chairman, there are more for this these three systems here.

"Medical Institution means any institution, school, college or university within or without India."

That is not correct; it should be 'outside India'.

having facilities for regular full time courses of study, training and hospital

attendance to qualify for the grant of degrees, diplomas or licences in Indian medicine on the results of an examination."

Not simply because my father is a doctor, he can give me a certificate. One should pass a recognised examination. Now, I have received a certain pamphlet. I have been receiving so many pamphlets from all the various systems. Actually, I wanted to place this pamphlet before the hon. Ministers who are piloting the Bill. But I think; would have (Is it in it. It is about what the Supreme Court or the High Court said about one person. Dr. Sarma, or something like that who drafted it. If they have got it, I want them to go through those three or four cyclostyled pages to see how those unqualified people could have come in. If people have not passed any recognised examination through a recognised institution. I do not want them to be even ordinary members, leave alone their being members of the Bill Committee and things like that.

Mr. Vice-Chairman, I know Mr. Murthy from 1938. He is an eminent man, a gold medallist in B. A. of undivided Madras. Such an eminent person is piloting the Bill.

SHRI S. S. MARISWAMY : He is paying compliments and Mr. Murthy is walking away.

SHRI G. A. APPAN : It does not matter. He has his own urgent work. I do not object to it. I will request the hon. Minister for Health to see that those who have not passed the examination should not be included.

SHRI M. M. DHARIA (Maharash)
For the information of Mr. Appan, the hon. Minister is also a gold medallist.

SHRI G. A. APPAN : Even Mr. Mani is a gold medallist in Homoeopathy. (repetition). I have also passed examinations in Homoeopathy. This post-al course should not be accepted, unless people have undergone a course of a practical training and have attended hospitals, and so on. I request the Minister to see that a separate Council is provided for the people of the integrated system. There is one more point. There are many councils where the Scheduled Castes and Scheduled Tribes are not allowed. The other people, who are in a majority, who are having 80 per cent majority, do not allow these people to come in. So I would request the honourable Minister to see that among the practitioners, not the unqualified fellows, there

are at least 25 per cent people from the Scheduled Castes and Scheduled Tribes.

' SHRI AKIAR ALI KHAN : I am glad that the honourable Minister has brought this measure though late. I think it is a very constructive measure and it was long needed because this starts a new history

of the Indian systems of medicine. It will put them under a definite scope, and the standardisation, the "supervision of the courses, etc. all these things should be looked into by the council which this Bill envisages. I suspect the Siddha system, I know of these four systems.

I am a beneficiary of the Ayurveda system; I am a beneficiary of the Unani system; I am a beneficiary of the Homoeopathy system; and I am a beneficiary of the Allopathy system also. I owe a debt of gratitude to these systems. I strongly urge that these systems should be helped. They should be modernised and they should be brought up-to-date. There are many things

in each of these systems which you can believe. I know cases where allopathy has said "No" but Ayurved has come in. I know a case where Allopathy has said "No" but Unani has come in. The same is true with homoeopathy. So they have got their own history. They have got their own importance. So all these systems should be scientifically studied and organised

and encouraged. There should be no difficulty about it. But I do, feel that so far as this integrated system is concerned, it has been completely ignored by the Ministry. That is not right. That is not fair. I know eminent persons like Madan Mohan Malaviya and Hakim Ajmal Khan, who thought highly of their own systems which they liked but which they wanted to progress and prosper. They felt that unless Ayurved was brought into modern touch, unless Unani was brought into modern touch, (there was no future for these systems. That thing should not be ignored. So we have to try to maintain their basic principles, maintain their basic ideas, and we have also to supplement them by the modern knowledge, modern science and so on. It would have been much better if there had been three or four independent councils. That would have been much better. I think it is too late for me now to suggest it. But I request the Minister to change it. I find in the Bill that these councils have been given, for all practical purposes, complete independence. So let us try this experiment. Let us see how far it works. As we gain experience, as difficulties, if any, come in our way, necessary improvements can be made in this. At present there is nothing that is not covered in this. Everything is there.

With these few words I very much commend this Bill for the consideration of this House.

I was sorry to hear from the honourable Minister that there is not one Central Government Unani Dispensary. That is not right. I am sure the Minister will look into it. I hope he will do justice to these systems.

MR. DEPUTY CHAIRMAN :

Now

the Minister, Mr. Murthy.

SHRI K. P. MALLIKARJUNUDU (Andhra Pradesh) : Mr. Deputy Chairman, my name is there. I also want to speak.

MR. DEPUTY CHAIRMAN : But your party has got only 45 minutes and only two or three minutes are left for you.

SHRI K. P. MALLIKARJUNUDU : My party gave three names.

MR. DEPUTY CHAIRMAN : That is right, but there is no time left.

SHRI K. P. MALLIKARJUNUDU : There is enough time.

MR. DEPUTY CHAIRMAN : In your party one Member took 25 minutes and another Member took 17 minutes. Your own party Members cannot accommodate you. There is no time left for your party. If I insist, I can give you two or three minutes.

SHRI K. P. MALLIKARJUNUDU : No, Sir, there is enough time. We can sit up to 5 o'clock. I want at least ten minutes.

MR. DEPUTY CHAIRMAN : No, no. Actually we should have finished this Bill before 3 o'clock. We have already exceeded it. We are 45 minutes behind the scheduled time.

SHRI K. P. MALLIKARJUNUDU : Kindly give me at least ten minutes.

MR. DEPUTY CHAIRMAN : How can I help you when your own party Members cannot accommodate you? If you want to speak, you may take two or three minutes.

SHRI M. S. GURUPADASWAMY (Mysore) : You have to bear in mind the large number of members who want to speak on this Bill. In fact, I wanted to speak myself. But I have abstained myself seeing the large number of people. Therefore, please give him some time.

MR. DEPUTY CHAIRMAN : All right. Take three or four minutes.

SHRI K. P. MALLIKARJUNUDU : A little more than that.

Mr Deputy Chairman, I welcome this Bill in general, not because it is free from defects. I believe it has so many defects. I welcome it because I find myself in agreement with the principle underlying the Bill. According to me, the principle underlying the Bill is to systematise and regularise our indigenous systems of medicine. The second in which prompted me to welcome this Bill in general is that I have great regard and respect for the systems of indigenous medicine. These two reasons prompted me to welcome this Bill, even though I differ on certain vital aspects of the Bill.

Sir, I do not know anything about the Siddha system and the Unani system. But I know a little about the Ayurvedic system. The term 'Ayurveda' consists of two words—AYU and VEDA. They are two Sanskrit words. The word AYU means life and VEDA means science. Therefore, 'Ayurveda' means the science of life or the science which gives the truth about life and methods to sustain life.

That is what is meant by Ayurveda.

Sir, you know that according to the Hindu thought and philosophy, Vedas are the ancient documents. We sometimes believed that they are APANUSHEYA, means that they do not emanate from human sources. They derive their authority from God. That is why they are called APANUSHEYA. They are documents of great antiquity ever known to history. Ayurveda is considered to be one of the four Vedas. The four Vedas are : RIG, YAJUR, SAM and ADHARVA.

Ayurveda is a great science which flourished for a number of centuries in the past. Very great names were associated with Ayurveda. Some of them are Asvini Charaka, Susruta and Dhanvantari. It is also believed that a king was operated upon in his brain by the Asvini Devas successfully. That was the degree of development that Ayurveda reached in times of yore. This Bill is an effort to systematise Ayurveda and therefore I said I welcome this Bill in general.

But I should say to my regret that there is stagnation in the system of Ayurvedic medicine because it is far behind the modern system of medicine. Modern sciences have made great strides and we cannot afford to lag behind the developments of the present-day modern science. So, it is

necessary, in my opinion, that Ayurveda should derive its sustenance and strength from the modern systems of Western medicine. There, I believe, this Bill is a serious drawback. This Bill has neglected and ignored the body of physicians who are called Doctors of Integrated Medicine. I know, Sir, in Madras, there was a college where people were trained. There was a good hospital. They were trained for 4/1 years or so. They took persons who had passed the Intermediate Examinations. So, that was the kind of college that flourished there even though it does not exist now.

SOME HON. MEMBERS : It is there now.

SHRI K. P. MALLIKARJUNUDU : There, four to five years' training was given with hospital facilities. Are we to destroy those fellows? Are we to destroy and ignore those people who, I suppose, number about 50,000? For one moment I cannot agree to the proposition that they must be relegated to a very backward place. They must be given due recognition. They represent a trend of thought which is necessary in our modern life.

Sir, in this connection, I may be permitted to quote from a speech of our beloved, late Prime Minister, Shri Jawaharlal Nehru. He said like this :—

"..There is much controversy often about the place of the Ayurvedic and Unani systems. There can be no doubt that both these ancient systems of India have an honourable history and that they had a great reputation. Most people know also that even now they have some effective remedies. It would be wrong and absurd for us to ignore this accumulation of past knowledge and experience. We should profit by them and not consider them as something outside the scope of modern knowledge. They are parts of modern knowledge. But, in many directions, modern science, as applied to both medicine and surgery, has made wonderful discoveries and, because of these, the health standards in advanced countries have improved tremendously. We cannot expect to improve our standards unless we take full advantage of science and modern scientific methods. There is no reason why we should not bring about an alliance of the old experience and knowledge, as exemplified in the Ayurvedic and Unani systems, with the new knowledge which modern science has given us. It is necessary that the approach to this problem should be made on the basis of scientific methods and persons who are Ayurvedic

and Unani physicians should take full advantage of modern methods. That means there should be a basic training in scientific methods for all, including those who wish to practice Ayurvedic or Unani system. Having got that training, a person may practice either of the systems or homoeopathy."

Sir, I derive support from no less a person than the late Shri Jawaharlal Nehru. He is quite clear in his mind that both the systems should be combined. There should be a combined training in both the systems in our college; and then only our medicine can prosper and there can be a fusion of the past experience with the modern developments. (He is who) I say that this Bill suffers from a very, very serious defect in that it ignores this kind of a scientific approach to our ancient systems of medicine.

So, Sir, with this view in mind, perhaps I have certain amendments to make with a view to seeing that the definition of the word 'Indian medicine' includes this system of integrated medicine, and also certain consequential amendments. Therefore, with all the emphasis at my command, I plead with the hon. Ministers that to ignore them, those 50,000 medical practitioners, integrated medical practitioners, is unjust, unfair and unreasonable.

SHRI B. S. MURTHY : Sir, I am very happy that there is a lot of enthusiasm as far as this Bill is concerned. As many as seventeen speakers have participated in the discussion and all of them evinced real interest. I had wanted this Bill to be passed as early as possible.

Sir, the main point that becomes a bone of contention more or less is about the integrated content of medicine.

Many hon. Members may think that integrated course is yet to be introduced or to be tried. No. It was tried and introduced long ago. In fact it was in 1948 when the Chopra Committee recommended a plan of education incorporating the best in Ayurveda, Siddha and Unani, supplemented by modern sciences and advances in the Western science of medicine. This Committee envisaged the teaching of subjects of Indian medicine concurrently with subjects of modern sciences and Western medicine, leading to fusion and later, to synthesis. In 1948, Sir, if the hon. Members would like to know, an attempt was made not only to integrate the indigenous systems of medicine, but also to synthesize with the modern medicine. Then in 1949 another Committee

came into existence known as the Pandit Committee. This Committee recommended that the teaching of modern medicine in Ayurvedic colleges was not advisable because of the low standard of these institutions. At that time it was the intermediate pass with science taken to M. B. B. S. or sometimes even matriculation pass only taken to Ayurvedic colleges. Not only that, but the curricula and syllabi also differed. Therefore they did not go well. Therefore another Committee came into existence which was known as the Dave Committee, appointed in 1954, by the Central Council of Health. But no unanimity was reached with regard to the acceptance of this Committee's recommendations. Therefore it was given up. Therefore in those days the integrated system went on for some time. I do not know how Mr. Mariswamy was thinking that I had no open mind...

SHRI S. S. MARISWAMY : I said I presumed that you were having an open mind.

SHRI B. S. MURTHY : I thank him for that. Though I do not want to beat the drums here, it was in 1939 when the Government of Madras, the popular Ministry went out and the Advisers' regime came in, they introduced this integrated system. It was I who led a deputation and fought the battle of the integrated medicine and the Advisers reluctantly agreed that they should continue the integrated system. Even today I am willing to do everything. Myself and my senior colleague, Mr. Shah, we have nothing against any system of medicine. The difficulty is that all the States more or less have come to the conclusion that the integrated system is not working well. The integrated system was adopted in India to make Ayurveda, Unani and Siddha modernised with the teaching of modern sciences as well as the advances made in the West. But unfortunately the students began, as Mr. Bhadram quoted me, relying more on modern medicine and less on Ayurveda. Let the hon. Members understand that the integrated system started to make the Indian system modernised.

SHRI M. V. BHADRAM : The status given to it is not equal to that given to allopathy. That is why they started this agitation.

SHRI B. S. MURTHY : Whatever that be, it is the love of the subject that makes a man stand for the subject in which he has received education. If all these integrated persons as well as the Ayurvedic practitioners stood for the-

ous system, I am sure this Bill have been introduced in this Parliament at least 20 years back. Therefore I have nothing against them but the only thing is, the integrated system was not done more or less by the States and the Planning Commission then allowed the States to have their own way of educating the Indian boys and girls in Ayurved, Unani and Siddha systems. This must therefore be borne in mind when people support it and even to-day, the present rights and privileges and prerogatives enjoyed by the traditional practitioners are not at all touched. They are now registered in the Ayurvedic Practitioners except perhaps in Madras where they have a separate and perhaps, subject to correction, in Maharashtra where there is a special law for them. Except that no other State has ever thought of giving them a separate status because it is simple to understand that integrated system is not a system. Ayurved is a system, Unani is a system, Siddha again is a system but integrated system of education with Ayurveda and western medicine as modern sciences are brought to; to make the student better than the earlier educated or trained Ayurvedic practitioner but unfortunately the country has not accepted it. Therefore I am sorry that there should have been such a controversy. I assure all Members and the public outside that if nor my senior colleague Shri Shah, have anything against the integrated system of practitioners and every one be given under this very Act to see that representatives are in the Central Council and then their counsels are accepted for the good of the Indian systems of medicines.

SHRI S. S. MARISWAMY : You spell out what protection you are going to give.

SHRI B. S. MURTHY : We have already in the amendment by Mr. Dharia wherein the necessary protection is given to the integrated practitioners and Mr. Dharia, as a representative of the All-India Integral Practitioners' Association met my Minister and we discussed the whole thing and then we accepted a formula which would please them. Therefore the protection is being given.

SHRI K. P. MALLIKARJUNUDU : Under clause 9 a separate committee for them can be constituted. That would be able.

SHRI B. S. MURTHY : Ayurved plus 'Veda' is Ayurveda—science of life and Ayurved is a science of life and I do not

know why another Committee should be there for the integration of Ayurveda and the Western Veda?

SHRI S. S. MARISWAMY : The Ayurved outnumber the integrated people.

SHRI B. S. MURTHY : I am coming to that. If the Members had gone through the report, they would find that it is clearly stated that only institutionally qualified persons are to be elected to these Committees. According to the figures available there are 25,000.

SHRI G. A. APPAN : May I seek a clarification, Sir? How is it termed 'institutional' without any hospital or practical training? Will the hon. Minister define it? If there is a Deputy Minister or a Minister of State, does it mean that there should not be a Cabinet Minister? That is the contention of my friend when he says that when there is the Council for Ayurveda within there should be a separate Council for the Integrated System of Medical Education. Integrated medicine is an advanced course which is intended to help the people in the other three branches. What they cannot do, people practising the Integrated Medicine can do. When it is an advanced course, why not have a separate Council? There should necessarily be a separate Council for that first and foremost and not one Council for all including the Integrated System of Medicine.

SHRI B. S. MURTHY : As I have already stated, we have accepted an amendment which gives all power to the integrated systems. (Interruptions) As far as election is concerned—that is a very important point—we have said in this Bill that institutionally qualified persons will have to be elected as members for this Central Council out of the following to the figures available—40,000 Ayurvedic practitioners including 25,000 Integrated practitioners. Therefore, Sir, 25,000 are more than 15,000, who are only trained in Ayurvedic colleges and schools. Therefore, Sir, there is no fear of these Integrated practitioners being overwhelmed by the institutionally qualified non-integrated practitioners. Therefore, there is not that difficulty, Sir.

I would like to go to the other point, and as far as post-graduate courses are concerned. Sir, all attempts are being made to see that courses are started in the various which teach Ayurveda, Unani and Siddha, and we have already appointed. Sir, a Central Council for Ayurvedic Research on the model of the Indian Council of

Medical Research, and the Gujarat Ayurvedic University and the Banaras Hindu University have provision for post-graduate education in all branches of Ayurveda. They also have facilities for conducting research. The Fourth Plan envisages the establishment of twenty post-graduate Departments in Ayurveda, Siddha and Unani. Provisions for such departments at Lucknow, Uigarh, Trivandrum and other places are under consideration. Central assistance will be extended to these. In some cases, Sir, I may tell you, cent per cent of the expenditure is borne by the Centre. Some people have said that sufficient funds are not available. About this also I have to say that the Central Government has actively encouraged research during the successive Five-Year Plans. Rs. four crores have been earmarked for research in Indian Medicine, and Rs. 1-5 crores for Homoeopathy in the Fourth Plan. An Autonomous Central Council for research in Indian Medicine and also Homoeopathy has been established in 1969 to give a greater fillip to research, the results flowing from the researches will enrich not only Indian Medicine but medical science as a whole. Drug research and standardisation of medicine used in Ayurveda and Siddha and Unani have been given priority in the Fourth Plan. Standards are being worked out for the drugs and formulations. National formularies of Ayurveda, Siddha, Unani and Homoeopathy are being prepared by expert pharmacopoeia committees of these systems. The first volume of these national formularies is to be published at an early date.

I have also a question raised that there was no Unani dispensary in the city of Delhi established by the Central Government. We did not establish them so far because a request to this effect did not come as there are already four Unani dispensaries run by the Corporation.

شہی ایم - اسعد مدنی : میں نے آپ کو خط لکھا تھا۔ آپ نے بہت کچھ کہہ دیا۔ جواب دیا۔ صاف جواب نہیں دیا۔

†[श्री एम० अश्वमेध मदनो : मैंने आपको खत लिखा था। आपने बहुत गोल-गोल जवाब दिया। माफ़ जवाब नहीं दिया।]

SHRI B. S. MURTHY : I am not against it and I say we will do our best to fulfil it but I am explaining the background against which this could not be done so far. As a matter of fact we provide these dispensaries

only for more or less the Government employees.

SHRI AKBAR ALI KHAN : Hundreds of Government employees go to the Ham-dard Dawakhana every day.

شہی ایم - اسعد مدنی : سیکڑوں ملازم جا کر علاج کراتے ہیں اور پیسہ خرچ کرتے ہیں۔

†[श्री एम० अश्वमेध मदनो : सरकारी म्वाजम जा कर दवाज करतے हैं और पैसा खर्च करते हैं।]

SHRI B. S. MURTHY : Now that the request has come we will try to do our best.

Sir, I think I have more or less met the main points raised and I request that the Bill may be taken into consideration.

MR. DEPUTY CHAIRMAN : The question is :—

'That the Bill to provide for the constitution of a Central Council of Indian Medicine and Homoeopathy and the maintenance of a Central Register of Indian Medicine and Homoeopathy and for matters connected therewith, as reported by the Joint Committee of the Houses, be taken into consideration'

The motion was adopted

MR. DEPUTY CHAIRMAN : We shall now take up clause by clause consideration of this Bill.

Clause 2 (Definitions)

SHRI B. S. MURTHY : Sir, I move :

3. "That at page 4,—

(/) in line 3, for the figure '2' the figures and brackets '2(1)' be substituted; and

(//) after line 36, the following be inserted, namely :—

'(2) Any reference in this Act to a law which is in force in the State of Jammu and Kashmir shall, in relation to that State, be construed as a reference to the corresponding law, if any, in force in that State.'

†[] Hindi transliteration.

SHRI K. P. MALLIKARJUNUDU :
Sir, I move :

4. "That at page 4, line 19, after the word 'Unani' the words and 'includes the system of integrated medicine under which is given a study, training and practice in indigenous medicine and modern medicine including surgery' be inserted."

SHRI M. V. BHADRAM : Sir, I move :

5. "That at page 4, for lines 18 and 19, the following be substituted, namely :—

(e) 'Indian medicine' means the systems of Indian medicine commonly known as Ayurveda, Siddha, Unani and Integrated system of medicine.

Explanation :—Integrated system of medicine means and includes conjoint or concurrent study of, training and practice in, indigenous medicine and modern medicine including surgery."

Sir, I also move :

9. "That at page 4, for lines 20 and 21, the following be substituted, namely :—

if) 'medical institution' means any institution within or without India having facilities for regular institutional training and hospital attendance and which grants degrees, diplomas or licences in Indian medicine."

SHRI M. M. DHARIA : Sir, I would like to move my amendment with this slight modification and I move the modified amendment :—

6. "That at page 4, for lines 18 and 19, the following be substituted, namely :—

(e) 'Indian Medicine' means the system of Indian Medicine commonly known as Ashtang Ayurveda, Siddha or Unani, Tibbi, whether supplemented or not by such modern advances as the Central Council may declare through notification from time to time."

DR. (MRS.) MANGLADEVI TALWAR
Sir, I move :

11. "That at page 4, line 21, after the words 'Indian Medicine' the words 'having facilities for regular institutional training and hospital attendance' be inserted."

60. "That at page 4, line 21, after the word 'India' the words [having facilities for regular institutional training

and 'hospital attendance and' be inserted."

The questions were proposed.

MR. DEPUTY CHAIRMAN : I think we have had enough discussion.

DR. (MRS.) MANGLA
DEVI
TALWAR : I would like to say a few words.

SHRI M. V. BHADRAM : I thought you were only just asking us to move the amendments. I also want to speak.

MR. DEPUTY CHAIRMAN : It is not necessary to speak on each and every amendment.

SHRI A. G. KULKARNI : We should get some opportunity also. If we are taking back our amendments it does not mean that we cannot speak.

MR. DEPUTY CHAIRMAN : All right; brief observations you can make.

[THE VICE-CHAIRMAN, (SMU AKBAL ALI KHAN) in the chair]

DR. (MRS.) MANGLA DEVI
TALWAR : Sir, my amendment No. 11 is, after the words :

"(f) 'medical institution' means any institution within or without India grants degrees, diplomas or licences in Indian medicine,"

the following words be added :-

"having facilities for regular institutional training and hospital attendance."

Similarly at page 4, line 21, after the word "India" the words 'having facilities for regular institutional training and hospital attendance and' should be inserted. It has been pointed out in the discussion by different speakers that there are many correspondence courses and so people read books. They claim to practise it and there are many shops, 116 in lions in Ayurveda and Siddha which are training institutions according to the Second Schedule. I do not know how many of them have got the facilities for hospital training and other instructions. Medical training should be given in any system because you equip the graduates to practise medicine. They deal the life of the people. They deal with the health of the people. Therefore, it is

essential that you should give them hospital training, actually seeing the patients, diagnosing and treating them, the men at the bedside, as they say, the wards are the learning centres. Then only their training is complete. Therefore, I move my amendments.

SHRI M. M. BHADRAM : There are amendments of mine, Nos. 5 and 9. No. 5 deals with the definition of medicine. It does not intend to hide the integrated medicine. The Minister said that they are protected by the amendment suggested by Mr. Mohan Dharia, but according to me and according to so many of his friends also it does not protect the interests of the integrated practitioners. According to Mr. Dharia's amendment :—

"Indian medicine means the systems of Indian medicine commonly known as Ashtang Ayurveda, Siddha or Unani, Tibbi, whether supplemented or not by such modern advances as the Central Council may declare, through notification from time to time."

It means the fate of the 50,000 integrated practitioners is left to the care of the Central Council which will be formed subsequently. Before that they cannot enter the Council, which will be manned by the other people. I am seriously refuting the figures given by the Minister. I have calculated it from the evidence given before the Select Committee, Volumes I and II. The total registered, qualified and unqualified put together is two lakhs, Siddha 20,000 and Unani 30,000. These are the figures from the evidence. Therefore, the fate of the 50,000 people is to be decided by the Council to be formed later on. Till that time their fate will be hanging. Otherwise, they must go on applying grease to this politician or that politician or catch hold of a big racketeer. That is why I seriously insist on my amendment. Mr. amendment will not meet the requirements.

As regards my second amendment, I wholeheartedly agree with Dr. Talwar that these 116 institutions are there in the Second Schedule. Many of them are not institutions at all. They are institutions only on paper. They are existing without any hospital. 5. A medical institution, according to this Bill, means an institution which is now listed in the Second Schedule, containing 116 institutions. Where are we going? Any man who starts an institution with the help of this Minister without the Minister's recognition. It means such an institution can produce a hundred doctors a day. It is going to be a very

serious affair and, therefore, there must be a check on that. The institutions must be qualified. Therefore, the definition given to the medical institutions is not sufficient. My amendment and Dr. Talwar's amendment, both are almost the same and I wholeheartedly agree with her in that respect.

SHRI K. P. MALLIKARUNUDU : My amendment also seeks to enlarge the definition of the term Indian medicine as given in clause 2 by saying that the term Indian medicine should include the system of integrated medicine under which is given a study, training and practice in indigenous medicine and modern medicine including surgery. That is my amendment. What I mean to say is that this integrated medicine is part of Indian medicine. There need not be any fear that it is something different from Indian medicine. It is according to me Indian medicine enriched by modern science. So, it is modernised Indian medicine. In that view of the matter I should think the Government should have no objection to enlarge the definition as contemplated by my amendment.

Then second point is when the hon. Minister has gone so far as to agree to the amendment proposed by Mr. Dharia, I do not think he should have any difficulty in going a step further and accepting my amendment. When they have gone so far, what is the real objection in going a step further? Having regard to these points which I raise, I should think the Government should accept my amendment.

SHRI M. M. DHARIA : Mr. Vice-Chairman, I would like to bring to the notice of this House that there are two aspects of the problem which we shall have to consider while protecting the interests of the integrated course practitioners. Of course I do concede in this House that the amendment of mine is certainly a compromise and it is not wholly accepting that of the integrated course people. When I discussed this matter with several people and when I found that no agreement was possible, and when it was brought to my notice that if this amendment is accepted it is not only a question of the Ayurveda course or Unani course or Siddha course but we should take into consideration the modern science and technology and the developments in the world, I felt that it is in this light that we should modify this definition, and this is the definition which is suggested by the representatives of the integrated course. It is suggested by them, which I have moved. (Interruption) I would not like to claim as their representative. The hon. Minister said that I was

[M. M. Dharia]

present with them. I am not their sole representative. I was with them.

SHRI S. S. MARISWAMY : You have the approval of all of them?

SHRI M. M. DHARIA : I do not make that claim, but to a great extent I could say that was my feeling.

SHRI A. G. KULKARNI : The delegation was an all India delegation.

SHRI M. M. DHARIA : If the Government is not prepared to accept the integrated course as such, the protection to the present integrated course practitioners becomes absolutely essential. By accepting the definition as it is in the Bill itself as recommended by the Joint Committee, Indian medicine means the system of Indian medicine commonly known as Ayurveda, Siddha or Unani. My amendment seeks to define Indian medicine as the systems of Indian medicine commonly known as Ashtanga Ayurveda, Siddha or Unani, Tibbi, whether supplemented or not by such modern advances as the Central Council may to time, have determined. So, here the Central Council in which I have my faith shall have to take into consideration the various advances that are taking place in the world. If they take those advances into consideration, then naturally they shall try to add and they will not in any way try to deduct. This definition takes us out of the original definition in the Bill, and if I am to compare, the original definition is like Hindu religion where nobody is allowed to enter, and that is why there is no change. The House will excuse me. But that is one of the reasons. But here we have accepted new definitions whereby we have kept the for accepting new definitions in the

SHRI SYED AHMAD (Madhya Pradesh) : It is like..

SHRI M. M. DHARIA : You may say that. And this is not only the definition whereby we give some protection to the practitioners. To be frank, I will come to protection later on. I shall be moving amendment No. 67.

SHRI M. V. BHADRAM : I am only asking him since he is satisfied that it gives some protection. I am prepared to be convinced if his arguments are sound. That is why I ask him. In view of the provision in clause 17 where they have used the term 'Indian medicine'. Now here also 'Indian medicine' is defined and it will

be from time to time decided by the Central Council. How is it going to give protection to the existing practitioners today?

SHRI M. M. DHARIA : I am going to move that amendment No. 67 which stands in my name, in the list of amendments which is to clause 17. For the information of the House, I would like to put that amendment. After the words 'the privileges' in sub-clause (3)(b) of clause 17, my amendment starts—"including the right to practise any system of medicine" "privileges including the right to practise any system of medicine conferred by or under any law relating to registration of practitioners of Indian medicine for the time being in force in any State on a practitioner of Indian medicine enrolled on a State Register of Indian Medicine." Let me explain.

SHRI S. S. MURTHY : Mr. Murthy said that he cannot recognise integrated medicine.

SHRI M. M. DHARIA : That I do not recognise the integrated system of medicine. The Government accepted my point of view that for the Siddha system, there is a vast scope; and modern science also could be attracted. It could be integrated. And I of the acceptance of my definition whether Ashtanga Ayurveda, Unani or Siddha integrated courses. That is because the Government has accepted that definition. I am sure that in future there will be an integrated course. May I say with your permission, Sir, in this House to develop in that sense, if we keep the door open for modern advancement, I have no doubt that they will become more perfect. I have no line. But I can say that there are medicines which I have myself experienced. Take, for instance, the Siddha Sekhar from Ayurveda. For acidity Siddha Sekhar is the best medicine, for headache Aspirin or Anacin is the best.

THE VICE-CHAIRMAN (SHRI AFZAL KHAN) : You can multiply.

SHRI M. M. DHARIA : So, if these people tomorrow accept the course, it will be better. There is no harm taking Aspirin. We can also have our own system here. And in that direction, it could be an integrated course. My amendment No. 17 clarifies this and gives all protection. And the hon. Minister has

agreed that it will not only be a protection to those who are registered but also to those who have joined the colleges this year, who will become practitioners in four or five years.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN): Has your amendment been accepted?

SHRI M. M. DHAMIA: It is going to be accepted. In principle it is accepted. It is going to be moved. It is true that the Government has not accepted the present integrated course. As a compromise, because of my amendment, they have accepted that every course will be an integrated course.

And one more point, and that is regarding the number. Sir, as per my information, the Council properly constituted according to these present Schedules will be dominated by people who are integrated course practitioners and before as they shall be in the Council in a bigger number, naturally they shall have their say. Anyhow, it is accepted for the time being that there are 50,000 - they may not be in a majority. Such a dominant voice cannot be curtailed by some other representatives of the Government or merit also and the Government has a rational view. Therefore, my appeal to the House would be to accept my amendment.

SHRI M. V. BHADRAM: The Minister put it as "integrated system". It is not a system of medicine. Your amendment says:

"In exercising the right to practise any system of medicine" What are these integrated system practitioners practising? It is not integrated medicine. How can it be any system of medicine? Today they are practising allopathy, ayurveda and unani. So this is no system.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN): All right, you have explained that and he has heard it.

SHRI M. V. BHADRAM: We are trying to convince each other, if this vagueness from amendment No. 67 could be removed. I think we could go together.

SHRI M. V. DHARIA: Only one word in reply. The point is there are two aspects. One is to protect the interest of the present integrated practitioner. That is perfectly satisfied in my amendment, I have no doubt whatsoever.

SHRI M. V. BHADRAM: How?

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN): He has explained it. You may not agree with him.

SHRI M. M. DHARIA: Mr. Vice-Chairman, I would like to bring it to the notice of Mr. Bhadram that besides my amendment even if we read the whole frame of the law, those who are registered as medical practitioners by the State shall be treated as medical practitioners and they have every right to practise whatever system they are adopting today. That is the meaning. Mr. Vice-Chairman, this Government has no right to stop them from practising. Even if we pass this Bill, they can challenge this Act in the Supreme Court tomorrow that it is their fundamental right to practise whatever system they have been practising. Here I am perfectly convinced and they are right also.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN): Mr. Ansari, what do you want to speak on?

SHRI HAYATULLAH ANSARI: I am going to support amendment No. 67 about integrated courses.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN): He has agreed to compromise which is accepted by the Government.

SHRI HAYATULLAH ANSARI: Still I want to elucidate it.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN): Very well. Please go ahead.

श्री हयातुल्ला अंसारी : मैं यह कहना चाहता हूँ कि ऐसा मान्य होता है धारिया जी की दलील ने कि दो सिस्टम मूलक में चल रहे हैं, एक है अनइन्टीग्रेटेड और दूसरा इन्टीग्रेटेड। तो मैं कहना चाहता हूँ अनइन्टीग्रेटेड सिस्टम कहीं इंडिया में नहीं है। चाहे यूनानी हो, चाहे आयुर्वेदिक हो, जितने भी गवर्नमेंट सब्सिडी में पैदा होते हैं और यूनानी मानने वाले होते हैं, उन सबसे कहा जाता है कि चेचक का टीका लगाओ, उन सबसे कहा जाता है कि इनाक्वुलेशन कालरा का दो, उन सबसे कहा जाता है कि प्लेग का टीका लगाओ, वे सब डी० डी० टी० फिल्टर यूज करते हैं, आपरेशन के बक्त डाक्टर को बुलाते हैं ताकि एनीस्थीजिया दी जा सके। इसके साथ-साथ तमाम जर्मीसाइड यूज करते हैं, दवाएं मंगाने हैं, स्पिरिट उनके यहाँ रहती है, इन्जेक्शन

[श्री ह्यातुल्ला अन्सारी]

भी लगा देते हैं और बहुत से लोग पेंसिलिन भी लगाते हैं, क्योंकि तो बहुत घाम चीज है। इस टाइप की चीजें बहुत यूज़ होती हैं। अनइन्टीपेटेड सिस्टम सिवाय उन लोगों के जो एब 70 हैं कहीं नहीं पाया जाता। दुंदने जाएंगे तो पीस आफ म्यूजियम की तरह मिल जाएंगे और कहीं नहीं मिलेगा।

लोग बातें करते हैं कि आयुर्वेदिक को रिसर्च मिलनी चाहिए, यूनानी को रिसर्च मिलनी चाहिए। सबसे बड़ी खुशनसीबी यह है कि इन दोनों सिस्टमों को रिसर्च का मौका नहीं मिला। अगर रिसर्च का मौका मिला होता, तो यूनानी में क्या बलड प्रेसर नहीं निकलता, आयुर्वेदिक में क्या बलड प्रेसर नहीं निकलता? पहले दिक् मानते थे, टी० बी० मानते थे, अगर यूनानी वाले रिसर्च करें तो क्या वह स्नोफीलिया नहीं निकलेगा।

श्री मान सिंह वर्मा (उत्तर प्रदेश) : बलड प्रेसर की सबसे बड़ी दवा

(Interruption)

श्री ह्यातुल्ला अन्सारी : बलड प्रेसर कहीं आयुर्वेद में नहीं है। तो दो साइन्स नहीं बन सकती। आयुर्वेदिक और तिब वाले एक तो यह कहते हैं कि साइन्स ने वर्क किया है एलोपैथी पर, इसलिए एलोपैथी बिलकुल बेकार है, हमारे दादा, बाबा ने काम किया था, बड़े-बड़े सन्तों ने काम किया था, बड़े-बड़े दुर्गों ने दवाइयाँ निकाली थीं, साइन्स की दवाइयाँ बिलकुल बेकार हैं। दूसरी तरफ कहते हैं कि रिसर्च होनी चाहिए आयुर्वेदिक में, यूनानी में, इनमें भी साइन्स लगे। पहले कहते हैं कि साइन्स बेकार है और फिर बाद में कहते हैं कि साइन्स लगे।

श्री मान सिंह वर्मा : कौन कहता है ?

श्री ह्यातुल्ला अन्सारी : दोनों में कोई ऐसा नहीं मिलेगा, जिससे दस मिनट बात करो तो पहले पांच मिनट तक वह यह न कहे साइन्स बेकार है और बाकी पांच मिनट में यह कहे कि इनमें रसर्च होनी चाहिए। मैं यह कहना चाहता हूँ कि अगर साइन्स लगे यूनानी और आयुर्वेदिक में तो बड़ी मुश्किल यह है कि सब एलोपैथिक बन जाएंगे। आज आप दूसरी एनाटोमी नहीं बना सकते, आज आप दूसरी फिजियोलोजी नहीं बना सकते, आप दूसरी केमिस्ट्री नहीं पैदा कर सकते।

श्री मान सिंह वर्मा : उपसभाध्यक्ष जी, आप मुझको भी मौका दीजिएगा।

श्री ह्यातुल्ला अन्सारी : आप बीच में बोल रहे हैं, दो आदमी साथ-साथ नहीं बोल सकते। एक बात मैं कह

कर के खत्म कर देता हूँ और वह यह है कि न यूनानी के खिलाफ हूँ, न आयुर्वेदिक के खिलाफ हूँ, बल्कि मैं चाहता हूँ कि दोनों बहें, तरक्की करें और उन के अच्छे-अच्छे जो हिस्से हैं वे हमको मिल जायें। यह मैं समझता हूँ, लेकिन मैं यह भी समझता हूँ कि दो साइन्स नहीं बन सकती हैं, दो फिजिक्स नहीं बन सकती, दो केमिस्ट्री नहीं बन सकती, इसलिए ऐसा जो अनइन्टीपेटेड सिस्टम है, जहाँ तक मैं जानता हूँ कम से कम इंडिया में इस वक्त पाया नहीं जाता।

THE VICE-CHAIRMAN (SHR) :
AKBAR ALI KHAN) : Mr. Kulkarni.

SHRI A. G. KULKARNI (Maharashtra) :
No, I do not want 10 speak.

SHRI MAN SINGH VARMA : Sir, I
want to say a few words.

THE VICE-CHAIRMAN (SHR) : AKBAR
ALI KHAN) : Please, you have no
amendment.

श्री मान सिंह वर्मा : उनका कोई अमेंडमेंट नहीं था,
लेकिन आपने उनको टाइम दिया इसलिए हमें भी
टाइम दीजिए।

THE VICE-CHAIRMAN (SHRI AKBAR
ALI KHAN) : If you want to insist, then I
will allow you. But I think there is no
reasonableness.

श्री मान सिंह वर्मा : श्रीमान्, मुझे केवल यह कहना
है कि माननीय अन्सारी जी ने जो बात कही है उनके
कथन में थोड़ी गलतफहमी है। कोई भी आयुर्वेद
चाहता यह नहीं कहता है कि एलोपैथी कोई साइन्स
नहीं है, कोई भी तिब्ब या यूनानी वाला यह नहीं कहता
है कि एलोपैथी कोई साइन्स नहीं है अपने-अपने स्थान
पर सब साइन्स हैं। मेरा यह कहना है कि आयुर्वेद
भी साइन्स है, एक मूल विज्ञान है और उस विज्ञान
को बढ़ाने के लिये आज तक प्रयास नहीं किया गया है।
अभी उन्होंने माना है कि दो साइन्स नहीं चल सकती।
ठीक है, मेरा भी ऐसा कहना है कि एक दुकान पर सारी
चीजें नहीं बिक सकती, उनके लिये अलग-अलग दुकानें
होती हैं। तो यह जनरल मर्चेन्डाइज की दुकान नहीं
होनी चाहिये। यहाँ पर यही हो सकता है कि आयुर्वेद
अपने स्थान पर तरक्की करे, यूनानी अपने स्थान पर
तरक्की करे और एलोपैथी अपने स्थान पर तरक्की
करे।

THE VICE-CHAIRMAN
(SHRI

AKBAR ALL KHAN) : Now. I shall put the amendments to vote.

SHRI M. V. BHADRAM : Sir, the Minister has to say a few words, whether he is accepting the amendments or not.

"THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : Have you got anything to - ty Mr. Murthy?

SHRI B. S. MURTHY : No. Sir.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

3. 'That at page 4,—

(/) it line 3 for the figure '2' the figures ;md brackets '2(1)' be substituted; and

(//) i lter line 36, the following be inserted, namely :—

'(2) At / reference in this Act to a law which is not in force in the State of Jammu and Kashmir shall, in relation i that State, be construed as a re! fence to the corresponding law, if ai , in force in that State' "".

The motion was adopted

THE VICE-CHAIRMAN
(SHRI AKBAR ALI KHAN) : The question is :

4, "Th it at page 4, line 19. after the word 'Unani' the words and includes the system of integrated medicine under which is given a study, training and practice in indigenous medicine and modern medicine including surgery be inserted.'

he motion was negated

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

5. "Th; at page 4, for lines 15 and 19, the following be substituted, namely:—

(<0 'Indian medicine' means the systems of Indian medicine commonly known as Ayurveda, Siddha, Unani and Integrated system of medicine."

Explanation. — Integrated system of medicine means and includes conjoint

or concurrent study of, training and practice in, indigenous medicine and modern medicine including surgery."

The motion was negated

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

9. "That at page 4, for lines 20 and 21, the following be substituted, namely:—

(/) "medical institution' means any institution within or without India having facilities for regular regular institutional training and hospital attendance and which grants degrees, diplomas or licences in Indian medicine."

The motion was negated.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

6. "That at page 4 for lines 15 and 19 the following be substituted, namely :—

(?) 'Indian Medicine means the system of Indian Medicine commonly known as Ashlang Ayurveda, Siddha or Unani, Tibbi, whether supplemented or not by such modern advances as the Central Council may declare through notification from time to time."

The motion was adopted.

DR. (MRS) MANGLADEVITALWAR : Sir. I beg leave to withdraw my amendments Nos. 11 and 60,

Amendment Nos. 11 and 60 were, by leave, withdrawn.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

"That Clause 2. as amended, stand part of the Bill."

The motion was adopted,

Clause 2 as amended, was added to the Bill.

For text of amendments, vide col. 20/ and 208 supra.

Clause 3—Constitution of Central Council.

SHRI M. V. BHADRAM : I move

:

16. "That at page 5, line 2, after the word 'persons' the words 'with recognised medical qualification' be inserted."

22. "That at page 5, lines 11-13, for words 'be nominated by the Central Government, from amongst persons having special knowledge or practical experience in respect of Indian medicine' the words 'be nominated by the Central Government to the Central Council from amongst persons having special knowledge or practical experience in respect of each branch of Indian medicine and enrolled on any State Register' be substituted."

SHRI K. P. MALUKARJUNDU : I move :

14. "That at page 4, line 44, after the word. "Siddha" the word 'integrated' be inserted."

17. "That at page 5, line 2, after the word 'Siddha' the word 'Integrated' be inserted."

20. "That at page 5, line 4, after the word 'Siddha' the word 'integrated' be inserted."

25. "That at page 5, line 24, after the word 'Siddha' the word 'Integrated' be inserted."

SHRI GANESHI LAL CHAUDHARY :
I move :—

64. "That at page 5, after line 20, the following further proviso be inserted, namely :—

"Provided further that Government at the time of nominating the members to the Central Council, may give due regard to the Scheduled Caste and Scheduled Tribe members who are practising in the Ayurveda, Siddha, Unani or Homoeopathy systems of medicine."

The questions] were proposed.

SHRI M. V. BHADRAM : Sir, amendment No. 22 is to the sub-clause concerning the constitution of the Central Council and its committees. Sub-clause (c) says :—

"Such number of members, not exceeding thirty per cent of the total number of members elected under clauses (a) and (b) as may be nominated by the Central Government, from amongst persons having special knowledge or practical experience in respect of Indian medicine :"

Here the Government can nominate anybody as stated above. Now my amendment is for the words "be nominated by the Central Government, from amongst persons having special knowledge or practical experience in respect of Indian medicine :". the words "be nominated by the Central Government to the Central Council from amongst persons having special knowledge or practical experience in respect of each branch of Indian medicine and enrolled on any State Register :". be substituted. This puts a restriction in nominating the persons.

Then regarding amendment No. 15 to Clause 3(1)(a). Clause 3(1)(a) reads :

"such number of members not exceeding five as may be determined by the Central Government in accordance with the provisions of the First Schedule for each of the Ayurveda, Siddha and Unani systems of medicine from each State in which a State Register of Indian Medicine is maintained, to be elected amongst themselves by or for the

on that Register as practitioners of Ayurveda, Siddha or Unani, as the may be;"

Hereafter the word "persons" I am suggesting the adding of the words "with recognised medical qualification", because without that what happens is quacks to whom the present Bill seeks to give licences, also can practise. Of course, I do not have any quarrel there. But they should not be allowed to come to the Council and dominate it and thus control the future. My amendment is only to restrict quacks being nominated to the Council.

SHRI K. P. MALLIKARJUNDU : Sir, my amendments are only consequential amendments. I have nothing to speak on them except to request that these amendments may be put to vote.

श्री गनेशी लाल चौधरी : वाइस चैयरमैन सर, मेरा अमेन्डमेन्ट एक बिलकुल सीधा अमेन्डमेन्ट है। इस बिल के चैप्टर 2 में जो सेक्शन 3 है, उसमें कांस्टीट्यूशन ऑफ द सेंट्रल काउंसिल का प्राविधान किया गया है। मेरा अमेन्डमेन्ट बहुत सिम्पल सा है, जहाँ पर यह प्राविजन है कि कितन-कितन सदस्यों को इसमें रखा जाएगा, जिसमें अमेन्डमेन्ट को पावर है नमिनेशन की :

"Provided further that Government at the time of nominating the members to the Central Council, may give due regard to the Scheduled Castes and Scheduled Tribes members who are practising in the Ayurveda, Siddha, Unani or Homoeopathy systems of medicine."

Council Bill 1968

में यह अमेन्डमेंट इसलिए चाहता हूँ कि मैंने अभी सरकार की दूरदर्शी की बात कही थी कि सरकार कितनी दूरदर्श है। जब कभी किसी कानून में कोई एक स्पेसिफिक प्राविजन नहीं होता है, शेड्यूल्ड कास्ट और शेड्यूल्ड ट्राइब्स के लिये तो श्रीमन्, वहाँ सरकार दूरदर्शी नहीं करती, उनमें से कोई काबिल आदमी सरकार को नहीं मिलता। मैं आपको मिसाल दूँ, बैंक नेशनलाइजेशन के समय भी मैंने यही कहा था कि आप विधान बना दें कि जिस व्यक्ति डाइरेक्टर की नियुक्ति होगी, उसमें शेड्यूल्ड कास्ट और शेड्यूल्ड ट्राइब्स के आदमी भी लिये जायें। मैं जानता हूँ उसमें नहीं लिये गये। श्रीमन्, मैं यह भी जानता हूँ कि आज देश में सेक्टर की यूनि-वर्सिटीज चल रही हैं और यूनिवर्सिटीज में शेड्यूल्ड कास्ट और शेड्यूल्ड ट्राइब्स के आदमी एक्जीक्यूटिव कोसिल में नहीं लिये जाते जब कि जो छात्र पढ़ते हैं, अध्यापक हैं, वे भी शेड्यूल्ड कास्ट के नहीं हैं। इसलिये मैं कहना चाहता हूँ सरकार दूरदर्श नहीं है। कृपया सरकार शेड्यूल्ड कास्ट और शेड्यूल्ड ट्राइब्स के लिये कानून में प्राविधान करे ताकि आपको याद तो रहे। इसलिये मैं माननीय मंत्री जी से यह चाहता हूँ कि हमारे इस अमेन्डमेंट को मान लें जिससे कि शेड्यूल्ड कास्ट और शेड्यूल्ड ट्राइब्स के गिरे हुए लोगों को भी इस कोसिल में रिप्रेजेंटेशन मिल सके।

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : I will now put the amendments to the vote of the House The question is :

22. "That at page 5, lines 11-13, for the words 'be nominated by the Central Government from amongst persons having or practical experience in respect of Indian medicine' be substituted by the words 'be nominated by the Central Government from amongst persons having knowledge or practical experience in respect of Indian medicine and enrolled on any State Register'."

The motion was negatived.

Shall I put all the amendments by Shri Mallikarjun Naidu together?

SHRI M. V. BHADRAM : Why do you call him as Naidu? He is a pucea Brahmin.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : I like him by that name.

SHRI M. M. DHARIA : It is like the integrated course.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

14. "That at page 4, line 44, after the word 'Siddha' the word 'Integrated' be inserted."

The motion was negatived.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

16. "That at page 5, line 2, after the word 'persons' the words 'with recognised medical qualification' be inserted."

The motion was negatived.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

17. "That at page 5, line 2, after the word 'Siddha' the word 'Integrated' be inserted."

The motion was negatived.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

20. "That at page 5, line 4, after the word 'Siddha' the word 'Integrated' be inserted."

The motion was negatived.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

25. "That at page 5, line 24, after the word 'Siddha' the word 'Integrated' be inserted."

The motion was negatived.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

64. "That at page 5, after the word 'Further proviso be inserted, namely :—

'Provided further that Government at the time of nominating the members to the Central Council, may give due regard to the Scheduled Caste and Scheduled Tribe members who are practising in the Ayurveda, Siddha, Unani or Homoeopathy systems of medicine.'"

The motion was negatived.

SHRI K. P. MALLIKARJUNUDU : Amendment No. 15 is left out.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : That is in the name of Shri Goray who is not here.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

"That Clause 3 stand part of the Bill."

The motion was adopted. Clause 3 was added to the Bill. Clause 4 was added to the Bill.

Clause 5—Restriction on elections and membership

SHRI M. M. DHARIA : Sir, I move :

65. "That at page 5, line 37, for the words 'Fourth Schedule or is enrolled' the words 'Fourth Schedule, is enrolled' be substituted."

SHRI M. V. BHADRAM : Sir, I move :

28. "That at page 5, line 37, for the words 'or is enrolled' the words and is enrolled" be substituted."

(This amendment also stood in the name of Shri K. P. Mallikarjunudu.)

The questions were proposed,

SHRI M. V. BHADRAM : Sir, I wanted to speak, but you called Shri Dharia. Sir, my amendment is very simple, but is a very important one. Clause 5 says, "No person shall be eligible for election to the Central Council unless he possesses any of the medical qualifications included in the Second, Third or Fourth Schedule or is enrolled in a State Register of Indian Medicine and resides in the State concerned."

Sir, even if one is not possessing qualifications, if one is registered in the State Register, he is eligible for election. This is very dangerous. Sir. Therefore, it should be amended this way : 'or' should read as 'and'—so, both the qualifications, which means he must possess the qualifications and he must also be borne on the State Register. Otherwise, you are see, one without qualification gets back-door entry into the State Register and so he can get elected to the Council. How can you prevent undesirable elements from coming in ? Therefore, I plead with the House to accept my amendment.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : Mr. Murthy, you want to say anything ?

SHRI K. P. MALLIKARJUNUDU : Sir, my name is also there, supporting the same amendment. I would support what Shri Bhadram has stated. Unless that word 'and' is put in place of 'or', people with no qualifications will get into the Register and the whole scheme will get sp-

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : All right. Mr. Murthy, you are not accepting it ?

SHRI M. V. BHADRAM : I wanted to know the Minister's mind.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : He says 'No'.

SHRI M. V. BHADRAM : I think he has closed his mind.

SHRI M. M. DHARIA : Sir, can I say something on this ? There is unnecessarily some misunderstanding. The amendment of hon. Shri Bhadram and my amendment No. 65 are virtually the same. Shri Bhadram says, 'or is enrolled' should be substituted with 'and is enrolled'. What I have proposed is this : instead of the words "or is enrolled", I have put a comma. Sir, it is because of drafting that this has occurred. Sir, Clause 5 is like this : "No person shall be eligible for election to the Central Council unless he possesses any of the medical qualifications included in the Second, Third or Fourth Schedule, is enrolled on any State Register of Indian Medicine and resides in the State concerned." Because of the amendment of Shri Bhadram the word 'and' comes twice and I have put a comma, meaning the same.

SHRI M. V. BHADRAM : No. Sir. Sir, there are two qualifications. One is the educational qualification. The qualification is related to the State. One is to be registered in the State Register and is to reside in the State. So, 'and' is only to that—being borne on the Register of the State and also must be a resident of the State. But, here if you put only the comma, it does not read properly. Tomorrow, if somebody goes to the court and gets it quashed, then !

SHRI M. M. DHARIA : Sir, I would like to clarify here.

5 P.M.

Sir, the i leaning is the same. It is only for drafting purposes that I am suggesting this. [car convince Mr. Bhadram also.

(Interruptions)

SHRI M V. BHADRAM : Tomorrow if somebody goes to the court. . . .

SHRI M. M. DHARIA : Evert if somebody goes to the court, the comma will be treated ;s 'and'.

SHRI M. N. KAUL (Nominated) : Comma is i o part of the statute.

SHRI M M. DHARIA : I will read clause 5 which says :

"No person shall be eligible for election to the Central Council unless he possesses any of the medical qualifications included in the Second, Third or Fourth Schedule or is enrolled on any State Register..."

This mean- that he must be on the State Register. I don't think there is any harm whatsoever n accepting my suggestion.

SHRI M V. BHADRAM : In view of Mr. Dharia •; explanation, I agree with him and seek tl e permission of the House to withdraw ny amendment to support his amendment

SH/U K. P. MALLIKARUJUNUDU : Sir, I am a 50 a lawyer and I know something of lav. Of course Mr. Dharia read out the ciat so. Our amendment is instead of 'or' the e should be 'and'. This will make it i tadable.

(Interruptions)

SHRI BANKA BEHARY DAS (Orissa) : With a little sense of grammer that we have about Engli h, comma here in this context means 'and. Therefore I support Mr. Dharia's ai ndment.

THE VIC ^-CHAIRMAN (SHRI AKBAR ALI KHAF) : You accept it ?

THE it DER OF THE OPPOSITION (SHRI S. IS MISHRA) : We will have to look at it nore closely. What does the Minister sa bout it ?

SHRI K. C. SHAH : At least as a lawyer and as a ft end who knows English much better, I ma ' say that throughout our lives, we have sai I when there are two sentences or two qua (fications 'and' is added in the

last and all of them are followed by commas. This is something which is common English.

श्री बांके बिहारी दास : इनके अगड़े से हिन्दी में कानून हो जाय ।

THE VICE-CHAIRMAN (SHRI AKBAR AH KHAN) : The question is :

28. "That at page 5, line 37. for the words 'or is enrolled' the words 'and is enrolled' be substituted."

The motion was negatived.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

65. "That at page 5, line 37, for the words 'Fourth Schedule or is enrolled' the words 'Fourth Schedule, is enrolled' be substituted."

The motion was adopted.

THE VICE-CHAIRMAN (SHRI AKBAR A LI KHAN) : The question is :

"That clause 5, as amended, stand part of the Bill."

The motion was adopted.

Clause 5, as amended, was added to the Bill.

Clauses 6 and 7 were added to the Bill.

Clause 8—Meetings of Central Council.

SHRI HAYATULLAH ANSARI : I move :

66. "That at page 6, for lines 30 to 33, the following be substituted, namely :

"Provided that no decision of the Central Council in relation to any Indian medicine shall be effective unless three members representing that system of medicine are present at the meeting and support the decision."

I move this amendment because I want to make it a happier wording. I draw your attention to page 4 wherein you find :

"Indian medicine means the system of Indian medicine commonly known as Ayurveda, Siddha or Unani;"

In clause 8 it says :

"Provided that no decision of the Central Council in relation to any Indian

[Shri Hayatulla Ansari]

medicine** shall be effective unless three members representing Ayurveda, Siddha or Unani** system of medicine, as the case may be, are present at the meeting and support the decision."

Why the same thing is defined at two places with two wordings ? One says 'Indian medicines' and the other says 'Ayurved, Siddha and Unani'. There is some ambiguity. This is more direct and a happier wording. So I have moved my amendment.

The question was proposed.

SHRI B. S. MURTHY : We are not accepting it.

SHRI HAYATULLAH ANSARI : I withdraw my amendment.

*The amendment was, by leave, withdrawn.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

"That clause 8 stand part of the Bill."

The motion was adopted:

Clause 8 was added to the Bill.

Clause 9—Committee for Ayurveda, Siddha and Unani

SHRI M. V. BHADRAM : I move :

31. "That at page 6, after line 36, the following be inserted, namely :

'(aa) a committee for Integrated medicine;'"

SHRI K. P. MALLIKARJUNUDU : I move :

32. "That at page 6, after line 38, the following be inserted, namely :

"(d) a committee for Integrated Medicine;"

I also move :

34. "That at page 6, line 42, after the word 'Siddha' the word 'Integrated' be inserted."

SHRI M.V. BHADRAM : I move :

33. "That at page 6, line 42, after the word 'Ayurveda' the word 'Integrated' be insert

*For text of amendment, vide col. 226 supra.

I also move :

35. "That at page 7,—

(i) in line 1, after the word 'Ayurveda' the word 'Integrated' be inserted; and

(«) in line 7, after the word 'Ayurveda' the word 'Integrated' be inserted."

SHRI K. P. MALLIKARJUNUDU : I move :

36. "That at page 1 —

(/) in line 4, for brackets, letters and words '(a), (b) and (c)', the brackets, letters and words '(a), (b), (c) and (d)' be substituted; and

(/;) in line 7, after the word 'Siddha' the word 'Integrated' be inserted."

The questions were proposed.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : Mr. Mariswamy, you can speak now.

SHRI S. S. MARISWAMY : Sir, I must confess that I am a little confused in the statement given by Mr. Dharia to the Minister. The Minister in his opening speech has said that he would not recognise the Integrated Medicine as a system. In his explanation Mr. Dharia said that the Minister would accept it as a system, and as a conjurer, who brings out a rabbit from out of his hat, he brought out a compromise formula in the last minute. And I do not know how Government has come forward to accept it without properly explaining it to the House. I do not dispute it. So far as Mr Dharia is concerned, I admire his sincerity and interest in this matter. But I would like to know from the Minister whether he can assure us that he stands by the B that he quoted so far as the number of Ayurvedic practitioners and the practitioners of Integrated Medicine is concerned. That is number one. Number two, he should assure us that equal representation will be given to Integrated Medicine because, as per his amendment, their case is hanging in fire and they are left to the mercy of the Council to be formed. As it is, it is not decided; we are not presenting it as a fait accompli but we are going to leave it in the hands of the Medical Council. So I would like to know at the very outset whether representation of the Integrated Medicine will be in the Council, and if the Minister gives an answer in the affirmative in that regard, I shall be satisfied and withdraw my amendment.

SHRI M. M. DHARIA : Mr. Vice-Chairman, Sir, let me be very clear that those who are enrolled as Integrated Medical Practitioners, they are protected by the law, their fate is not at all hanging in the hands of the Council to come, but because of my amendment to the Definition, in the Council itself it is possible for them to modify the present system themselves, and because of their registration at the State level they can have their dominant voice. So therefore there can be a real integrated course in all the systems and that way it may open up its gates for all the systems that exist in the country today. But so far as the fate of the present practitioners in the Integrated System of Medicine is concerned, it is absolutely clear, and I would like to request the hon. Minister also to give that assurance to the country, not merely to those who are actually registered practitioners, but even to those who have joined this course this year and who would be becoming Doctors within four or five years. In their case also the guarantee should come from the Minister and I make that demand for it.

SHRI K. K. SHAH : We have said so.

SHRI M. M. DHARIA : You please say it again.

SHRI M. R. BHADRAM : This Clause 9 contemplates to constitute separate Committees, i.e. Committee for Ayurveda, one Committee for Siddha and another Committee for Unani, and the practitioners of the Integrated System of Medicine, as I see the provision in the Bill, have to submerge themselves in one of these three Committees. But the Minister, in his introductory speech made on the 19th of May said that they are not inferior stuff, and because they are not well versed in Ayurveda they are practising only allopathy. But in the Indian Medical Council they have no place because they are their inferiors, and here, because they are practising allopathy, they are necked out from here. Therefore, in view of the amendment to sub clause 2.(e) having been lost a peculiar position has arisen how to protect the interests of these 50,000 people. Mr. Murthy is contesting this figure. So I don't quarrel with the figure. But Mr. Murthy says that out of the 40,000 practitioners of Indian Medicine 25,000 are those who are practising the Integrated System of Medicine. This is what he has said. If that is the position, we need not bother about their safety or protection they can take care of themselves. If that is not the fact, can the Minister assure

this House that their proportion in the Committees will be such that their interests will be taken care of by the Committees in which they will also be represented?

SHRI M. V. BHADRAM : Can the Minister give a categorical assurance? If they cannot come through election the Government has nomination quota and can the Government give an assurance that their interests will be protected by nominating integrated practitioners to the Council?

SHRI K. P. MALLIKARJUNUDU : May I have one word? Why I gave notice of this amendment is this. In clause 8 it is stated that the Central Council shall meet at least once in each year. That means the Central Council will be meeting very rarely and practically all the functions of the Council are to be discharged by these Committees under sub-clause (3) of clause 9 which says that subject to such general or special directions as the Central Council may from time to time give each such committee shall be competent to deal with any matter relating to Ayurveda, Siddha or Unani system of medicine as the case may be within the competence of the Central Council. Whatever powers the Central Council enjoys are enjoyed by these Committees and therefore it is these committees which are more powerful and which are in actual practice the Central Council. That is why I wanted in the interests of the integrated practitioners a separate committee should be set up for them but in view of the assurance given by the hon. Minister that their interests will not suffer and they will have adequate representation in the Central Council by virtue of their numbers, I do not think I should press my point.

SHRI B. S. MURTHY : When I said this is not integrated system I did not mean that there is no integrated course in India. There is integrated course and therefore we have to recognise that as long as that system of education is in force.

As far as the other thing is concerned, except in Tamil Nadu, persons who have undergone the concurrent course of training are registered as practitioners of Ayurveda, Siddha and Unani everywhere in India. But in Tamil Nadu there is a separate Board for the registration of practitioners in each system of medicine. The number in each is, Ayurveda 359, Siddha 280, and Unani 46. According to the First Schedule Ayurveda and Siddha practitioners can elect one member each and there will therefore be at least two members on the Central Council of the integrated medicine.

[Shri B. S. Murthy]

Besides this, I have already assured the representatives of the integrated practitioners when they came to see me and later on my senior colleague, Mr. Shah, that every effort will be made to see that in nominating their interests will not be forgotten. And that full assurance I give on the floor of the House that their interests will be protected.

SHRI M. M. DHARIA : Mr. Vice-Chairman, Sir, I want a very categorical assurance from the Minister that those who have taken this integrated course—those who are enrolled as practitioners their interests have been completely protected so far as their rights and privileges to practice in any system they want are concerned—those who have joined this course this year, their interests also shall be protected.

SHRI B. S. MURTHY : I have already assured as far as that is concerned.

SHRI M. M. DHARIA : I do not want any confusion; I want a categorical assurance.

SHRI K. K. SHAH : The same terms in which Mr. Dharia has said, I accept.

* Amendment Nos. 31 to 36 were, by leave, withdrawn.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

The motion (was adopted).

Clause 9 was added to the Bill.

Clauses 10 to 13 were added to the Bill.

Clause 14—Recognition of medical qualifications.

SHRI M. V. BHADRAM : Sir, I move : 39. "That at page 8, after line 10, the following be inserted, namely :—

"(3) No qualification shall be recognised medical qualification unless it is granted after training in an approved institution for a period of not less than four years after matriculation or its equivalent."

Clause 14 reads :—

"(1) The medical qualifications granted by any University, Board or other medical institution in India which are included in the Second Schedule shall be

*For text of amendments, vide cols. 227 and 228 supra.

recognised medical qualifications for the purposes of this Act."

There is one snag. The Second Schedule contains 116 institutions. As I have already stated, some of them are existing only on paper. Therefore, some protection has to be given. That is why my amendment reads :—

"No qualification shall be a recognised medical qualification unless it is granted after training in an approved institution for a period of not less than four years after matriculation or its equivalent."

Otherwise, even a third form, even an illiterate can become a practitioner. Therefore, it is necessary to prescribe some standard. Otherwise, everybody would become a practitioner. In this connection I would like to draw the attention of the House to a notification issued by the UP Government. It reads :—

"In exercise of powers conferred under sub-clause (iii) of clause (ee) of rule 2 of the Drugs Rules, 1945, the Governor of Uttar Pradesh is pleased to declare each person who is registered with the Board of Indian Medicine, U.P. under the U.P. Indian Medicine Act, 1939 (U.P. Act X of 1939) as person practising the modern scientific system of medicine for the purpose of the Drugs Act, 1940 (Act No. XXII of 1940)."

Therefore, everybody will come under this. There must be some minimum standard laid down. Otherwise, medical education will be affected. It should apply to the future candidates. Therefore, there must be some minimum standard in this respect.

The question was proposed.

SHRI B. S. MURTHY : We are not accepting it.

SHRI M. V. BHADRAM : Let them say that they do not want any education at all.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : I am putting amendment No. 39 to vote. I think the 'Noes' have it.

SHRI M. V. BHADRAM : Even matriculation is not necessary and (our years experience after that. Everybody can become a doctor.

SHRIMATI PURABI MUKHOPADHYAY (West Bengal) : Before the Minister replies to this point, may I be allowed to make one submission ?

THE VK E-CHAIRMAN(SHRI AKBAR ALI KHAN) : No, no. We are at the last stage.

SHRIMATI PURABI MUKHOPADHYAY : O. this clause.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : He has already replied. I will give an opportunity on some other clause.

SHRIMATI PURABI MUKHOPADHYAY : This is a very important clause.

SHRI BHUPESH GUPTA (West Bengal): Let her speak.

SHRIMATI PURABI MUKHOPADHYAY : Before the Minister either agrees or disagrees with the suggestion, may I submit that, when we are going to give recognition to all the medical practitioners in India, in Unani, in Siddha Ayurved and also in Homoeopathy, may we not agree to some sort of institutional education to be the only criterion? Not only we will go by experience, but they must have some institutional qualification and some institutional training.

With my experience as the Health Minister of West Bengal I can tell you that we run two Ayurvedic Colleges there. When we used to pay the medical bill for the Ayurvedic colleges, to my surprise I found that we paid the maximum for the medicines which are used only by the Allopaths, like very difficult medicines, life-saving drugs, which should not be allowed to be given by anybody who did not have proper medical education in some institution. The hazards from those medicines are so very dangerous. It may save the life for the moment, but it has its after-effect. So some sort of institutional education should be made compulsory.

SHRI B. S. MURTHY : When I said I would not accept Mr. Bhadram's amendment. I wanted to save the time of the House. What is being done today is we are now constituting a Central Council to regulate the future medical education and practice in indigenous systems of medicine. What we have now done is the present Schedule has been drawn up on the basis of qualifications awarded by the State Boards, Councils, Faculties, examining bodies and other institutions which are registerable qualifications. It may be left to the Central Council, when formed, to review the various qualifications and recommend amendments whenever considered necessary. Sir, not only all over India but in one State....

SHRI M. V. BHADRAM : Do you accept that all the 116 institutions which are listed in Schedule II are having institutional facilities and hospital facilities?

SHRI B. S. MURTHY : Please listen. Today in a single State there are a number of institutions where there is no co-ordination. For certificate, for diploma and degree in the self-same State various categories of syllabus and other things are there, and these are recognised by the State Government. Therefore, the Centre is taking power to constitute a Central Council in order to review the whole position with regard to all these institutions, whose names we have given in the Schedule also go into the very existence of the institutions, and see whether they are capable or not of running an institution.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : They should be looked into by the Council.

SHRI B. S. MURTHY : Yes. Otherwise we have to go into a lot of details prescribing qualifications and all these things. Moreover, I must also tell this is being modelled on the Indian Medical Council Act....

SHRIMATI PURABI MUKHOPADHYAY : Will you allow anti-biotics and other injections to be given by these Ayurvedic practitioners?

SHRI B. S. MURTHY : No.

SHRIMATI PURABI MUKHOPADHYAY : Is there any clause in the Bill to prevent them from practising and using those drugs? It is not there in the Bill.

SHRI M. V. BHADRAM : The reply given by the Minister does not meet the point at all. The clause says : medical qualifications granted by any university, board or other medical institution in India which are included in the Second Schedule. The Second Schedule contains 116 institutions.....

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The Minister says the Council will be able to look into that matter.

SHRI M. V. BHADRAM : That is all right. We are making a statute. Are we not laying down the minimum standards?

SHRI K. K. SHAH : Will you kindly not realise this? When the Allopathy Act was passed, the Indian Medical Council Act, did you not permit those who were

[Shri K. K. Shah]

practising to continue to practise ? Did you want to take away their practice ?

SHRI M. V. BHADRAM : I am only speaking of minimum qualifications.

SHRI K. K. SHAH : Your amendment will mean that lakhs of people who are already practising Ayurveda would be deprived of their right to practise. In future care will be taken. Today nobody will be deprived.

SHRIMATI PU-RABI MUKHOPADHYAY : Quacks are also practising. Are you going to recognise quacks ?

SHRI K. K. SHAH : No quack is going to be recognised.

THE VICE-CHAIRMAN (SHRI AKBAR

ALI KHAN) : The question is :

39. "That at page 8, after line 10, the following be inserted, namely :—

(3) No qualification shall be recognised medical qualification unless it is granted after training in an approved institution for a period of not less than four years after matriculation or its equivalent." "

The motion was negated.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

"That clause 14 stand part of the Bill."

The motion was adopted.

Clause 14 was added to the Bill.

Clauses 15 and 16 were added to the Bill.

Clause 17—Rights of persons possessing qualifications included in Second, Third and Fourth Schedules to be enrolled

SHRI M. M. DHARIA : Sir, I move :

67. "That at page 9, line 15, after the words 'the privileges' the words and brackets '(including the right to practise any system of medicine)' be inserted."

The question was proposed.

SHRI K. K. SHAH : Mr. Dharia's amendment we are accepting.

SHRI M. V. BHADRAM : Sir, may I a little bit amplify the whole thing ?

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : Your amendment is not being moved ?

SHRI M. V. BHADRAM : If Mr. Dharia's amendment is accepted by the Government, I am not moving amendment No. 41.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

67. "That at page 9, line 15, after the words 'the privileges' the words and brackets '(including the right to practise any system of medicine)' be inserted."

The motion was adopted.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

"That clause 17, as amended, stand part of the Bill."

The motion was adopted.

Clause 17, as amended was added to the bill.

Clauses 18 to 35 were added to the bill.

Clause 36—Power to make regulations.

SHRI HAYATULLAH ANSARI : Sir, I move :

68. "That at page 15, after line 12, the following be inserted, namely :—

'(oo) the determination of the amount of fees to be paid by the applicants for registering their names as qualified medical practitioners of the Indian system of medicine;

(ooo) the determination of the amount of fees to be paid by the medical institutions to get recognition of the Central Council;

(oooo) the preparation and passing of the annual budget of the Council providing for at least twenty-five per cent of the budget allocation on the development of each system of Indian medicine."

इसमें दो बातें मेरा खयाल है छूट गई हैं। एक तो यह है कि उसकी इनकम कहां से होगी, प्राइवेट इनकम होगी या सब कुछ गवर्नमेंट देगी, बजट बना सकेगी या नहीं बना सकेगी। ये दोनों बातें मैंने इसमें बताई हैं। यह बहुत बड़ी बात है। पार्लियामेंट में सबसे बड़ा खयाल होता है कि इनकम कहां से होगी, बजट कौन बनाएगा।

इतनी बड़ी चीजें छोड़ दी गईं, इनका मेशन कर देना जरूरी था। इनकम के लिए दो बातें बताई गई हैं। 'ओ' में कहा गया है—

"The fees to be paid on applications and appeals under this Act;"

अपील्स में डिफाइन किया गया है पेज 12 पर 25 में, नम्बर 2 में, नम्बर 28 में, लेकिन ये बहुत छोटी छोटी बातें हैं, जनरल अपील में आएंगी, उससे मुश्किल से शापद दो हजार सालाना आमदनी होगी।

श्री शीलभद्र याजी : बूंद-बूंद करके तालाब भरता है।

श्री हयतुल्ला अन्सारी : अगर किसी का डिप्लोमा छीन लिया गया हो तो वह अपील करे और इसी तरह की छोटी-छोटी बातें हैं जिनसे दो हजार से ज्यादा इनकम नहीं होगी। जो लोग प्रेक्टिसनर हैं, जो रजिस्ट्रेशन करना चाहते हैं तो उसके लिए फीस होनी चाहिए। उससे अपनी इनकम की कोसिल की हो जायगी। यह मैंने बड़ा दिया है।

दूसरी बात कि बजट भी बना सकती है, यह कही मेशन नहीं है। यह कह दिया गया है कि वह अपने प्रेसिडेंट, वाइस-प्रेसिडेंट, रजिस्ट्रार, इन्स्पेक्टर के लिए सेलरी बनाएंगी लेकिन कम्पलीट बजट होना चाहिए जिससे हम जांच कर सकें।

एक बात और खास तौर से मेशन करना चाहता हूं और वह यह है कि जब आन्ध्र बना था तो तेलंगाना के लिए बड़े-बड़े वादे किए गए थे कि यह करेंगे, वह करेंगे, लेकिन दस-बारह साल गुजर गए, कुछ नहीं किया गया। इसलिए थोड़ा मेशन इसमें भी होना चाहिए, ऐसा न हो कि आन्ध्र और तेलंगाना जैसी हालत यहां भी हो जाय। इसलिए एक आइटम मैं ने बड़ा दिया है और वह यह है कि—

"the preparation and passing of the annual budget of the Council providing for at least twenty-five per cent of the budget allocation on the development of each system of Indian medicine."

इसमें 25 पर सेंट छोड़ दीजिये, इधर जाय या उधर जाय इस लिये कि हम देख चुके हैं कि हिन्दुस्तान में प्रब्लम बहुत ज्यादा डीप हैं, बहुत गहरी हैं, हर एक भूखा है, हर एक को पैसे की जरूरत होती है इस लिये हर कोई चाहता है कि सारा पैसा हम ही खा जायें। यही पेश आया है आन्ध्र में, तेलंगाना में और कहीं

ऐसा न हो कि इसमें भी जिस के मेम्बर ज्यादा हों वही ज्यादा खा जाय। तो मैं अपील करता हूं कि 25 परसेंट उनको मिलना चाहिये। अगर ऐसा नहीं किया गया तो बहुत से सिस्टम जो कमजोर हैं, जिन के आदमी कम हैं, वे घबड़ा जायेंगे, परेशान हो जायेंगे। इस लिये मैं गवर्नमेंट से अपील करता हूं कि वह इन तीनों बातों को मान लें। यह ठीक है कि बिला इन्कम के कोई पार्टी चल नहीं सकती, कोई अंजुमन चल नहीं सकती, लेकिन बिला बजट बनाये कोई चीज जज नहीं हो सकती। तीसरी बात यह है कि आयुर्वेद से कोई प्रोपोजन रहना चाहिये। तो ये जो तीन बातें मैंने कही हैं उनको गवर्नमेंट को मान लेना चाहिये।

The question was proposed.

SHRI B. S. MURTHY : Sir, I thank the hon. Member for raising all these points. We shall bear these in mind. I appeal to him to withdraw his amendment.

SHRI HAYATULLAH ANSARI : After this assurance, I beg to withdraw my amendment.

* Amendment No. 68 was, by leave, withdrawn.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

"That clause 36 stand part of the Bill."

The motion was adopted.

Clause 36 was added to the Bill. The First Schedule was added to the Bill.

The Second Schedule

SHRI B. S. MURTHY : Sir, I move:

48. "That at page 16, under 'Part I—Ayurveda and Siddha', in item 10, under column 4, for the figures '1956', wherever occurring, the figures '1958' be substituted."

49. "That at page 17, in item 11, under column 4, for the figure '1962' the figure '1958' be substituted."

50. "That at page 17, item 23 and all entries relating thereto be deleted."

51. "That at pages 17 to 20, items 24 to 82 be re-numbered as items 23 to 81, respectively."

*For text of amendment, vide col. 236 supra.

[Shri B. S. Murthy]

52. "That at page 18, in re-numbered item 31, under column 2, for the words "Neira Vaidya-Visharada" the following be substituted, namely :—

'Netra Vaidya-Visharada
Vaidyakalanidhi."

53. "That at page 20, after re-numbered item 81, the following be inserted, namely :-

'82. State Faculty of
Ayurvedic Medicine,
Orissa.

Ayurvedacharya
B.S.A.M. From 1969
onwards."

54. "That at page 23,—

(/) item 109 and all entries relating thereto be deleted;

07) items 110 to 116 be, re-numbered as 109 to 115, respectively;

(iff) in re-numbered item 111,—

(a) under column 3, for the letters 'M.A.S.M.' the letters 'M.A.S.F.', be substituted;

(b) under columns 2 and 3, the word and letters 'Pranach-arjd F.A.S.I-V be inserted."

55. "That at page 24, under Part II—IJnani,—

(7) in item 4, under column 4, for the existing entries, the following be substituted, namely :—

•From 1958 to 1963.

From 1956 to 1963."

(;7) in items 5 and 6, under column 4, for the figure '1956' wherever, occurring, the figure '1958' be substituted."

077) in item 7, under column 4, for the figure '1965' the figure '1963' be substituted."

The questions were put and the motions were adopted.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

"That the Second Schedule, as amended, stand part of the Bill."

The motion was adopted.

The Second Schedule, as amended, was added to the Bill.

The Third Schedule

SHRI B. S. MURTHY : Sir, I move :

57. "That at page 26, after item 2, under 'Part 1—Ayurveda and Siddha',

the following be inserted, namely :—

'3. Manmohan Ayurved- 1920—
Chatuspati, shastri 1940."
Dacca. Ayurved
ic tna

The question was put and the motion was adopted.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

"That the Third Schedule, as amended, stand part of the Bill."

The motion was adopted.

The Third Schedule, as amended, was added to the Bill.

The Fourth Schedule was added to the Bill.

Clause 1—(Short title, extent and commencement) SHRI B. S. MURTHY :
Sir, I move :

2. "That at page 3, line 6, for the figure '1969' the figure '1970' be substituted."

The question was put and the motion was adopted.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

"That Clause 1, as amended, stand part of the Bill."

The motion was adopted.

Clause 1, as amended, was added to the Bill.

Enacting Formula SHRI

B. S. MURTHY : I move :

I. "That at page 3, line I, for the word 'Twentieth' the word 'Twentyiirst' be substituted."

The question was put and the motion was amended.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

"That the Enacting Formula, as amended, stand pan of the Bill."

The motion was adopted.

The Enacting Formula as amended was added to the Bill.

The Title was added to the Hill.

SHRI B. S. MURTHY : Sir, I move :

"That the Bill, as amended, be passed." The motion was proposed.

SHRI M. V. BHADRAM : Sir, I have one point to make. The State Governments under the Drugs Act permit various practitioners to practise allopathy. In Punjab under the Drugs Act, Rule 2, and the Drugs and Cosmetics Act, 1940 and the Rules made thereunder of 1945, the Governor issued a notification. Subsequently the honourable Leader of the House and the Minister of Health and Family Planning issued a statement which contains a serious danger. The Punjab Government was considering a suggestion to exclude vaid and hakims from the list. The statement of the Minister, Mr. K. K. Shah, was made on 4th March. I have his quotation taken from the Times of India. It says, "..... excluding some of the people who are likely to indulge in spurious drugs, or whatever it may be, in Punjab....." This power should not be used now that the Central Council is coming into being. If anybody misuses his discretion whatever it may be, the matter should be referred to the Council. The Government should not take any unilateral action to exclude anybody or advise anybody on this matter. This is the point that I wanted to make.

SHRI M. N. KAUL : Mr. Vice-Chairman, I wanted to take only a few minutes. I have watched this debate with intense interest almost all the time. The reason is that some years ago I visited an institute in Jamnagar which deeply impressed me. The man in charge of the institute was a very well qualified allopath. He turned later into an ayurved. His faith developed in that system. You could talk to him with reason and he could argue with you. He said then that it is not merely a question of integrating the medicines. What we are doing is we are concentrating on certain medicines, certain magic cures, certain drugs, which are not known to the Western system and we want them to be encouraged and become known and be practised. But he said that that is a limited approach. The fundamental approach of our ancients should be discussed. That was the basic Indian approach. And with that end in view he had collected a mass of literature, Sanskrit literature and other literature, and large parts of it were still not translated.

He said that there is a great lot of them. I was reminded of the renaissance in Europe when all the new ideas were developed as a result of the study of the ancient Greek

14 RSS/70—9.

and Roman books. I still believe that the renaissance of Indian medicine may come. But it will not come, as he said, through an integration of these medicines. It has got to come through these practitioners adopting a new approach and contributing something which the West has not yet contributed. That man has yet to arise, as he said. What has it come to now!

It is medicine plus intuitive diagnosis. The last person who was famous for his intuitive diagnosis and whom I knew was Hakim Ajmal Khan. His diagnosis was through pulse, eyes, nails and general observation. That was sheer intuition. That knowledge could not easily be transmitted. It could only be transmitted to pupils who remained with him not for five years, but for a whole lifetime. By observation and by his message, he could impart something of the intuitive faculty. The Indian system of medicine has adopted drugs plus intuition. That is not enough. This Bill will not solve the problem and drugs will not solve the problem. It is the man who has got to arise and that man will give a clarion call and that will come from a deep study of scholars who will imbibe that ancient knowledge and who will be inspired by that knowledge. Now I will tell you a story and conclude my speech.

For the first time, the sway of modern medicine was highlighted in the time of Shah Jahan. As students of history, some of the Members may know this. Once, his daughter was badly burnt. Nothing that the doctors in India did could save her life. Then appeared in the picture a French Doctor, one Bernier. He was an expert in his own system and he completely cured and saved the life of Shah Jahan's daughter. It was that single fact which had highlighted the superiority of the Western system and stagnation of the Indian system. That stagnation is still there. Gandhiji used to say that there are jewels in the ruins. But those jewels have to be picked up by a man who has the capacity to pick up and popularise them. It is the approach of the Western science that made it a success. We have to look at it from that point of view. This Bill and these parliamentary battles are intended for providing livelihood for the existing practitioners. It is nothing more or less than that. The burden lies on those who can put their hearts and souls into a deep study of all the relevant literature and then out of this fermentation some man may be thrown up who will inspire them and give a new lead to the Indian medicine. It is only that man who can make Indian medicine a success.

SHRI BHUPESH GUPTA : We do not have a Shah Jahan's daughter.

श्री राम सहाय (मध्य प्रदेश) : उपाध्यक्ष महोदय, इस अवसर पर मैं सिर्फ़ गवर्नमेंट से इस बात की प्रार्थना करूँगा कि जो आयुर्वेद सिस्टम है उसका जो असली सिद्धांत है उसकी तरफ़ पूरी तबज़्जह रखी जाय, मसलन जैसे कि पहला सिद्धांत आयुर्वेद का यह है कि बिला किसी दवा के पथ्य जो है वही इंसान को रोग से मुक्त कर देता है। तो मेरा निवेदन है कि जो उसका सिद्धांत है उसकी ओर काफी ध्यान देने की आवश्यकता है। मैंने कुछ थोड़ा सा आयुर्वेद का अध्ययन सन् १९१३ में किया था। मैंने उस वक्त देखा था, उसमें यह बताया गया था कि रस, बीज और विषाक क्या होता है, यानी हम जब किसी औषधि को लेते हैं तो वह जब हमारे स्टमक में, पेट में, जाता है तो उसका क्या असर होता है, विषाक का क्या असर होता है, रस का क्या असर होता है। इसका मतलब यह है कि इस प्रक्रिया में जितनी स्टेज होती हैं—उनके बारे में जानकारी किसी भी प्रकार से ली जानी चाहिये क्योंकि आयुर्वेद के संबंध में जो मौजूदा ग्रंथ हैं उनमें कहीं भी यह बात नहीं मालूम की जा सकती कि जिससे यह मालूम हो सके कि इस प्रकार की व्याख्या जो औषधियों के बारे में की गई है, किस स्टेज पर क्या गुण होता है या असर होता है, उसके बारे में संभव है कुछ निष्कर्ष तैयार हो तब वह जानकारी प्राप्त हो सकती है, या कदाचित्त उन्होंने अपने अनुभव से ऐसी बात लिखी हो। तो मैं समझता हूँ, इस बारे में रिसर्च अवश्य होनी चाहिये कि जो दवाओं के, औषधियों के कहीं-कहीं इस प्रकार से उपयोग बनाये गये हैं, हर एक स्टेज पर उसके गुण बताये गये हैं, उनके बारे में पहले क्या पद्धति थी या अब क्या पद्धति है उसके बारे में खोज होनी चाहिये।

दूसरी बात, जैसे हर एक औषधि के बारे में यह बताया जाता है कि उसकी जड़ का यह असर होगा, उसके तने का यह असर होगा, उसके पत्तों का यह असर होगा, उसके फूल का यह असर होगा, इस बारे में भी मेरा खयाल है कि कुछ रिसर्च होना आवश्यक है। तो मेरी धार्ष्ट्य यह है कि जब इस प्रकार से बहुत मुद्दत के बाद, बहुत इंतज़ार के बाद, यह बिल आया है, तो मैं समझता हूँ गवर्नमेंट इस ओर ध्यान देगी और जैसी जैसी प्रणालियाँ हैं उनके निस्वतः वैसा वैसा विचार किया जायेगा। यही मेरा निवेदन है।

SHRI M. M. DHARIA : Mr. Vice-Chairman, Sir, it is indeed a great red letter day in the history of Indian medicine. This Bill provides the proper opportunity

and proper protection. This Bill is not ment to protect any quacks in this country. Let us make it very clear. It is only for better expertise. This country has certainly contributed to the world—it has a great heritage, a great culture, and spiritual and moral values. This country has contributed all these to the world and the Indian medicine should also contribute to the whole world. It is for the experts, the best doctors in the West to come to this country and learn much further. As we had our plastic surgery even in the past, such traditions are to be created. This is the responsibility cast on this new Centra) Council and the other faculties to be created under this Bill. Sir, I look at the Bill in this way. A great responsibility is cast on those whn are protagonists of Indian medicine. I am sure you will stand by them and this chapter will open up a new vista for those who intend functioning in this way, in this direction. I wish them all good luck. But, let them not understand that it is for just giving protection to some quacks and other persons. It is only for the raising of the standards, it is for the breaking of the barricades of stagnation in Indian medicine. That is why we are passing this Bill and in this spirit, I am sure, the Council will take it and go ahead and create a new history in Indian medicine.

श्री हर्षानुल्ला अन्सारी : जनाब वाइस चैयरमैन साहब, डिबेट में तब से सुन रहा हूँ। सुनते-सुनते इन्की-रियारिटी कामप्लेक्स बहद पैदा हो गया है क्योंकि जो लोग बोलते हैं उनकी लाजिक पर मैं यहाँ से टैक्सी पर जाऊँगा वह भी वैस्टर्न है, जब मैं घर पहुँचूँगा बिजली का बटन दबाऊँगा वह भी वैस्टर्न है। यह बहुत धफसांग है। मैं साइन्स और नालेज को न वैस्टर्न समझता हूँ न ईस्टर्न समझता हूँ। जिसने रेल का इंजन बनाया बहुत प्रच्छा काम किया। मैं समझता हूँ पहिया न ईजाद हुआ होता तो रेलवे नहीं बन सकती थी, अगर साइरन या स्टील न बना होता तो रेल न बनती। नालेज और साइन्स एक कांतिन्युअस प्रोसेस है। जब से इन्सान पैदा हुआ है आगे चलता जायेगा, सीखेगा और समझेगा। जैसे रेल बन गई तब से आज के दिन एटॉमिक इनर्जी बन गई और यह न हिन्दुस्तान की चीज़ है और न दुनिया में कहीं और की चीज़ है। नालेज और साइन्स में इन्की-रियारिटी कामप्लेक्स नहीं पैदा करना है। आज मैं एस्प्री की गोली खा लेता हूँ, मैं कैसे वैस्टर्न माने लेता हूँ या मैं बोल रहा हूँ तो मैं कैसे वैस्टर्न अपने आप को कहता हूँ। मैं वैस्टर्न तहजीब में दब सकता हूँ कि यह कभी मेरी खुददारी गवारा नहीं करेगी। नालेज सारी दुनिया

के इन्सान का है, साइन्स सारे दुनिया के इन्सान की है। मेडिकल साइन्स सबके लिये है।

चरक ने बहुत बातें कही हैं। हम क्यों न समझ लें कि चरक की बातें आज भी चल रही हैं। एम्प्रो चरक की बातों से बना है, ब्लड प्रेशर भी चरक की बातों से बना है, थर्मामीटर भी चरक की बातों से बना है। जिन तरह से एक छोटा चीज बढ़ते-बढ़ते दरकत बन जाता है और दरकत बन जाने के बाद उसमें फल आते हैं, लेकिन अफसोस की बात है कि लोग फल देखते हैं, जड़ नहीं देखते, तन्हा नहीं देखते हैं। न कोई नालेज वैस्टने है और न कोई ईस्टने है। सब का है और सारी दुनिया का और ह्यूमैनिटी का नालेज है। तो बड़े अफसोस की बात है कि इस समय इन्फोरमिटी कम्प्लेक्स पैदा करने वाले हैं इस हाउस में मैं बहुत अफसोस करता हूँ कि वैस्टने इलाज करता रहता है। अगर मैं बिजली के नाचे बैटन हूँ तो क्या वैस्टने में बैटूंगा। टेक्सी में बैटूंगा तो वैस्टने में बैटूंगा और अगर मैं एरोप्लेन में बैटूंगा या जाऊंगा तो वैस्टने में जाऊंगा। यह बात नहीं है। पहिया हिन्दुस्तान में इजाद हुआ तो फिर रेल में रह गया। फौलाद हमने बनाया है, स्टील हमने बनाया है। स्टील न होता, पहिया न होता तो क्या रेल चल सकती थी। ये सारी चीजें यहां डेवलप हुईं, एक प्रोसेस बना और फिर एक के बाद एक चीज होती रही। वही पहिया, वही छकड़ा जो हमारे यहाँ बेल खींचता है, उसमें इंजन लगाया गया जिससे भाप आ गई। भाप हमारे यहाँ बनती है। दोनों चीज को जोड़कर रेल बन गई। यह बहुत अफसोस की बात है कि अगर मेडिकल ने डाक्टर बना दिये हैं, ये हमारे नहीं हैं, तो बहुत बड़ी गलती की है। रमन हमने पैदा किया, बोस हमने पैदा किया, खुराना हमने पैदा किया और इस तरह से लाखों करोड़ों हम पैदा करने चले जायेंगे और इस तरह से वैस्टने साइन्स को बढ़ाने चले जायेंगे। कैपेस्ट्री का बढ़ायेंगे, मेडिकल साइन्स को बढ़ायेंगे और किसी पर एम्हसान नहीं करेंगे। ये सब चीजें हैं जो दुनिया ने दी हैं। जब से दुनिया बनी है तब से ये इन्सान और ह्यूमैनिटी की चीजें हैं। मैं बहुत अफसोस करता हूँ और चाहता हूँ कि कम से कम अपने दिल का कूड़ा निकाल कर फेंक दें जो वैस्टने साइन्स, वैस्टने मेडिकल साइन्स करके भरा गया है। जब हम एम्प्रो या एनासीन का गोली खाते हैं तो हम इस बात का एम्हसान वैस्टने का नहीं मानेंगे। यह तो एक प्रोसेस चल रही है और बहुत पहले से चल रही है। यह मैं पहली बात कहूंगा।

अब मैं एक दूसरी बात दूर करना चाहता हूँ कि और कहना चाहता हूँ कि मैं बराबर कह रहा हूँ कि आयुर्वेद भी चले और यूनानी भी चले। एक प्रोसेस में ये भी चल रहे हैं, ये भी गाड़ियां चल रही हैं। ये चीजें हैं और चलते चलते कहा पड़ेंगी। एनाटमी हम नहीं छोड़ सकते हैं चाहे वह बैस्ट की बनाई हो या किसी की बनाई हो। एलोपैथी और एनोटीमी हम नहीं छोड़ सकते हैं। फिजियोलोजी हम नहीं छोड़ सकते हैं और हम इसके लिए मजबूर हैं। डिसेक्शन हम नहीं छोड़ सकते हैं क्योंकि हम इसके लिए मजबूर हैं। मैं समझता हूँ कि इंडिया में बहुत कम डिसेक्शन हुआ है। यूनानी मैं बहुत खुब जानता हूँ। लाश को चीरना और फाटना बहुत गन्दी चीज समझी गई है। यह काम भंगी और चमार कर सकते हैं हम शरीफ आदमी किसी लाश को कैसे काट सकते हैं। लेकिन जो लाश काटेगा वह देखने के लिए काटेगा और ह्यूमैनिटी को सवें करने के लिए काटेगा। इस चीज को हम नहीं छोड़ सकते हैं। यह पार्ट है, प्रोसेस है साइन्स का जो दुनिया में इस समय चल रहा है। हमने करोड़ों चीजें दुनिया को दी हैं और करोड़ों चीजें ली हैं। अब भी दे रहे हैं और अब भी लेंगे।

इसके बाद मैं एक किस्सा आपको बतलाऊंगा जो आजकल हो रहा है। लखनऊ के करीब एक जगह बरिया-बाद है जो करीब 40 मील की दूरी पर है। उसकी पूरी पापुलेशन करीब 20 हजार के है। वहां एक कुए में पानी चल रहा है 100 वर्षों से। उसके बारे में मशहूर हो गया कि इस कुए के पानी से जो नहाने, उसकी तमाम बीमारियां दूर हो सकती हैं और नहाना होना चाहिये मन्डे और ट्यूब के को। इतवार और मंगल को। अभी भी इस इतवार को जब मैं चला था तो वहां पर एक लाख मरीज आये हुए थे। आज दरियाबाद में ला एण्ड आर्डर और हाईजीन का प्राबलम हो गया है। एक लाख आदमी शायद मंगल को भी आये होंगे। तो मैं पूछना चाहता हूँ कि यह क्या चीज है। यह पहले दफा नहीं हुई है, कई दफा इंडिया में हो चुकी है। एक साधु महात्मा थे जो घिसकर सीपियां देते थे और उड़ीसा में दो चार लाख आदमी इसको लेने के लिए जमा हो जाते थे। हमारे दोस्त कहते हैं कि यह भी चीज बहुत अच्छी है, रख लो। लेकिन अफसोस है यह भी हमारे साइन्स का दिमाग है चाहे वह हिन्दुस्तान का हो, चरक का हो या किसी का हो हम उसको टेस्ट करेंगे।

अभी एक साहब ने लैटर टू दी एडिटर लिखा है। उसमें उन्होंने लिखा है कि जो कुए से निकल रहा है वह सल्फर है। लेकिन यह नहीं कहा जा सकता है कि वह

Notice

[श्री ह्यातुस्ला अम्सारी]

सल्फर सन्डे और टयूजडे को ही चलेगा, हम इस चीज को नहीं मान सकते हैं। अगर चलेगा तो हमेशा के लिए चलेगा वरना नहीं चलेगा। दूसरी बात यह है कि अगर चलता होता तो इतनी बीमारियाँ दरिद्राबाद में क्यों होतीं। यहाँ पर दो हजार साल से आबादी बढ़ी नहीं, हालाँकि यह कुछ खूब चलता था और पीते भी थे लोग और नहाने भी थे। उन लोगों के सब बीमारियाँ होती रहती थी। तो यह प्रोसेस तो चलेगा ही।

मैं यह बात कहना चाहता हूँ कि न मैं आयुर्वेद के खिलाफ हूँ और न यूनानी के खिलाफ हूँ लेकिन मैं आबजे-बिंदव ब्यूट लेना चाहता हूँ। जो चीज है वह आगे बढ़ेगा। हमारे पास आयुर्वेद और यूनानी में जो कुछ रह गया है, बहुत मेडिसिन रह गई है, बहुत उम्दा है, बहुत खाला दर्ज की है और दुनिया को हमने मेडिसिन दी है। मसलन शाल मुगराआयन दिया है। शाल मुगराआयन दिया जिससे एक हजार साल पहले और दो हजार साल पहले लैप्रोसी का इलाज हुआ करता था।

6 P. M.

लैप्रोसी के लिए शाल मुगरा आयन के अलावा दो हजार साल पहले तक कोई दवा नहीं रही। सर्पेटोना हिन्दुस्तान से मिली जो पागलपन का इलाज रहती है। तो कहने का मतलब यह है कि हम दोनों में फर्क नहीं कर सकते, वाटर-टाइट कम्पाटिमेंट नहीं बना सकते कि यहाँ पर इंडियन मेडिसिन खत्म होती है और यहाँ पर बैटन मेडिकसिन शुरू होती है, दोनों चलेगी और जो हीरे, जवाहरात यूनानी और आयुर्वेदिक में हैं उन्हें हम लैंग्थ केमिस्ट्री और इन हीरे-जवाहरात से हिन्दुस्तान को ही नहीं बल्कि सारी दुनिया को फोयदा होगा।

श्री शीलचन्द्र याजी : माननीय बाइस चेयरमैन महोदय, संयुक्त प्रवर समिति की ओर से मैं सभी मेम्बरो को धन्यवाद दे रहा हूँ कि उन्होंने इस बहस में भाग लिया। जो उससे रिपोर्ट निकली और भारतीय पद्धति के इलाज और उसकी दवाओं को सरकार ने जो इस विधेयक के रूप में स्वीकार किया है उसके लिए मैं सरकार को भी शाबाशी देता हूँ, धन्यवाद देता हूँ। इन शब्दों के साथ मैं इस विधेयक को तारीफ करता हूँ।

SHRI B. S. MURTHY : I rise to thank the Members in all humility for the greatest cooperation they have given me to see that this Bill is enacted. My special thanks are due to Mr. Bhadram and Mr. Mallikarjunudu. In spite of all their anxiety to provide certain safeguards, they could

Maninur

see how we were anxious to help them. My thanks are also due to Mr. Dliaria who was responsible for.....

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : Compromise.

SHRI B. S. MURTHY : ...yetting an amendment, agreeable to all sides. I must say that this is a red letter day in the history of Ayurved.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : You mean all Indian medicines

SHRI II. S. MURTHY : Ayurved, Siddha and Unani are known as Indian medicines. The Indian medicine for some time past has been reduced to the position of Cindre-11a in India. To-da> a new chapter is beginning when the Cindrella will herself become the mother once again, of all systems of medicine wherever they are—, no East, no West, no North, and no South and see that India once again leads as the best in the medical idd as it did during the days of Buddha and even prior to him. Here I must also say, it is one of my dreams and my life's ambition being fulfilled to-day because ever since I fought with the Adviser's Government in Madras in 1939 this has been my mission and unexpectedly and through the kindness of my senior colleague, Shii Shah, I got this opportunity to get my life's ambition fulfilled and my dream realised.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KUAN) : I wish the Ministry, the Government and the country very well it is really a very great step to help, organise and regulate the Indian medicines.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : The question is :

"That the BiU, as amended, be passed."

The motion was adopted. I he

Bill, us amended, was passed

REFERENCE TO CALLING ATTENTION NOTICE ON STATEHOOD FOR MANIPDR—contd.

SHRJ BHUPESH GUPTA : I understand that the Calling Attention on Manipur will be taken up in the other House tomorrow. I do not see why it should not be possible also to be taken up in this House tomorrow. Now as you know, I pointed out in the morning that so many of us have given this motion. The Government should consider it and if it is not possible simultaneously, at least it should be divided