urging the grant of full Statehood for Manipur. Members belonging to all the parties and groups in this House have sent it. I sugges 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 ϵ -mand of this kind is conceded by the Cha \cdot . Therefore, I would request that this should be taken up by the Chair. This is not at all a party issue.

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SHRI S. S MARISWAMY(Tamil Nadu): Sir, if the (bject of the Bill is to give a fillip to the Ayurvedic system, I have absolutely no complaint againtst it. On the other hand, I would rather welcome the Bill if it would do equal justice to another section of p actitioners 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 is integrated medicine is imparted in about 40 colleges and 10 universities all over Ind a. 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 whosever comes before a particular date, he can re-gister 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 fullfledged doctors. I have some true story with me. In a village in my State a young and healthy fellow developed submach ache all of a sudden. He went to a native doctor who gave him some pills. The second day he went to the same docto: and complained of severe Then he gave him some lehyam. pain. After taking that, Sir, the fellow died. Then the matter was reported to the police and when he 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 I do not know what is that 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

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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 hae 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-presidentship 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 launch at two of the clock, MR. DEPUTY CHAIR-MAN 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 reconnmended the establishment

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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 Nami Tal in 1968. The Committee resolved that 50% of the number of members in the Committees for Ayurveda, Siddha, Unani and Homoeopathy should be nom-nated and the remaining 50% should be elected from various State Boards and Faculties keeping an overall two-thirds majority for the institutionally qualified paragraphic to 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 any-where 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 enrol-led 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

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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 funda-mental 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 va'dya 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 a 30 given their due share in the Central Council. Siddha is found only in Tamil Nadu and Unani has some 15 in titutions throughout the teaching country. Although the origin of Unani dates back to Hyppocretes in Greece it took a long time for + to come to India via Arabia, Europe and I an. It came to India in the 18th century ind has found a permanent home here. There is no Unani system being practised anyv here else in the world except in India. I sul mit, Sir, that as far as Ayur-veda is conce ned, I hope and I am sure that due weigh : 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 or 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. Vorks of Charak 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 separeate 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 Covernment, 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 treat-ment. 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 5,00 persons. These doctors are confined to the urban areas. In the 14 RSS 70-6

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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 sytems 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 bandags, 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 Pushapak Vimana was there in the days of the Ramayana when Rama flew back from Lanka to Avodhva. This is all self-deceit and selfsatisfaction 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 any body 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 treat-ment 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 possiblities 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 ut 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 medial 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

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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 biassed 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 1 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 tolean 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 thin: 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, Sie dha or Unani in their practice. This has caused discontentment with the so-alled 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 ie 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 DEVELOP-MENT (SHR| 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. DEPL FY CHAIRMAN : Will you please conclude?

SHRI A. I'. 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

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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 amendmets. At this stage I am satis fied 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 prob em 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 madequacies 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 pastora 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 harm-ful. 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 After Susrut 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 pooints.

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 ot 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, after-care, etc. Obviously, the methods of in-vestigation, 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,

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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.



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کچھ امینڈمینتس میں نے دئے ھیں۔ همارے كذستني تيوشن ميں واضع طور پر يه يقين دلايا گيا هے كه هدوستان ميں تمام علوم کوه تمام شکشاؤں کو اور تمام هر قسم کی چیزوں کو ترقی کرنے کا پورا م قعة ملے كا اس لئے س سے بہت يهلے يہ ہونا چاهئے تيا که همارے کنسټی ٿيوشن کی جو ياين دهانی هے اس کی اروشدی میں نمام طب یونانی کو اور آیوویدک کو سنٹ او کو اور جو دوسری چیزین هین ان کو پررا موقعه ملنا چاهئے تھا ليكن بدة سمتم سے ان کو پورا موقعہ نہیں مل سکا ہے اور اس بل میں اس طرح کی امید پائی جانی ہے کہ آئیڈدہ آس او عملی طور پر مهی **پررا موقع، ملے کا - اس راست**ه میں جو کچھ رکاوتیں مجھے محسوس هو ی هیں اس بل میں عملی طور پر ان کی طرف میں آپ کی توجه دلانا چاهتا هوں اور اس میں کے ساتھ کہ اس طرح کی جو چوک ہے اس کو ادور کیا جانے کا اور عملی طور پر بھی صحيم طريقه سے چليہ ۽ تاکه هم اپنے ملک کے بسلے والوں کی صحیح طہر ہر خدمت کر سکیں ارر ان کی خدمت کے راستہ میں جو روزے ہیں وہ ن اتکیں ۔

ظاهر ہے ایلوپیتھا اس ملک میں بہت ترقی یافتہ ہے پہلے سے ھی -بہت پہلے سے اس کی سرپرستی اور مدد کی جانی ہے اور ھوئی چاھئے -اس کی ترقی پر ھم کو کوئی اعتراض نہیں ہے اس میں بہت سارے مواقعے حاصل ھیں - آج اس کا طریقہ علاج بہت آگے ہوت چکا ہے اس کو پورے طریقہ سے اپذانا چاھئے لیکن اس کے ساتھ جو ھمارے ملک میں پرانے طریقہ علاج ھیں اور جن سے اس ملک کے ہسلے والوں نے کروزوں کی تعداد میں پہلے بھی قائدہ اتھایا ہے ارز آج بھی ملک کی بہت ہوی آبادی اس سے فائدہ اتھا رھی ہے -دیہات دیہات گاؤں گاؤں میں دیہات دیہات گاؤں گاؤں میں مطلوں میں اور ہوتے ہوتے شہروں یو اس کو ھم نے پررے طریقے مے آگے ہوھانے میں جو غفلت پہلے رکھی ھے، انگریزوں کے زمانے میں یا آج تک ھم نے چو کمی کی ہے اس کو دور کرنا چاھئے۔

اس بل کے اعتبار سے معجهکو ایسا محصوس هونا هے که جنلے طریقه علاج آج دیسی عیں ان کے لئے ایک کمیتلی بدا کر ان کو جیسے گھونمت دیا گیا ھو ارر ترقی کے لئے جو پرری مدد ہونی چاہئے ان کو شاید وہ نہ مل سکے اس لگ میں یہ چاہتا تھا کہ جس طریقہ سے آپ نے ہومدودیتھک کے لئے جو باہر سے آیا ہوا طریقہ علج ہے - - - کرئی حرج نہیں گر ہمارے ملک کے بسلے والوں کو کسی طایقہ علاج سے چاہے وہ همارے ملک کا هو يا باهر کا هو قائدة هوتا ہے تر اسکو همیں اپذانا چاهئے اللے ملک میں بسلے والوں کے فائدہ کی خاطر تو آپ نے اس کے لئے الگ کونسل بنائی **ہے - بہت اچھا ہے لیک**ی اس طریقہ سے اپنے ملک کے جو طریقہ علاج ہیں جدسے آیوروید ہے، یونانی ہے، سدھا ہے۔ اس کے لئے بہ_ی الگ الگ کونسل نہ بدانے سے ان کی یوری همت افزائی اس میں |

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[شربي ايم - اسعد مدني] نہیں ہونی ہے اور یہ ایک طریقہ سے ان کے راستہ میں بادھا ڈالنا ھے -گل پھینکے ھیں اوروں کی طرف بلكة ثمر بهى اے خانہ برانداز چمن کچھ تو ادھر بھی

جس طرح *سے ان* کے لئے یہ سب کچھ کیا گیا ہے تو اپنے جو طریقہ علام ہیں ان کے لئے بھی پوری سہولتیں اور پوری اوجه هونی چاهئے -

میں خاص طور پر یہ عرض کروں که طب یونانی آن ۸بیسی طریقه علاج کے معاملات کو دیکھنے کے لئے آپ کی پارلینڈے کے دونوں ہاؤسیز نے ایک کمیتی بذائی، (س نے جائزہ لیا لیکن بد قسمتی سے اس نے ماک کا جو سروے کیا اور جائزہ لیا۔ اس میں یہاں آئے هوئیے وقود کی بات سڈی ۔ بہت دور دور گئے - جام نگر آیورویدک یونیورسٹی کو دیکھا - مدراس میں آیرروید کے کاموں کو دیکھا لیکن مدراس میں، میدراباد میں اور خود دھلی کے اندر جو يونانى طب كالمج هے اس كو نہيں دیکھا ۔ آپ کر یہ معلوم ہے کہ حکیم اجمل خان صاحب هندوستان کی بہت اهم شخصيت نها اندين نيشدل کانگریس کے صدر رہے ارر پولیڈیکل حيثيت سے نہيں بلکه هدوستان کے ایک مشہور طبیب گذرے ہیں - انہوں نے یہاں یونانی ایڈی آیورویدک طبیہ کالبج بذایا اور اس کے ساتھ ہندوستانی دواخانه قائم کیا تھا - وہ یہاں دہلی كو يه موقعه ديمًا چاهئے تها إن ميں | ميں موجود هے - گرچه مجهكو يه بھی

شکایت **ہے** کہ آج اس کی متّی پلید ہو رهی هے، اس کے اندر انتہائی خرابی <u>ھے</u> - گورندنی اس کی طرف صحیح طرر پر توجه نہیں کر رھی ہے - اس کو نا اہلوں کے ماتھ میں دے دیا گیا ہے -سنترل گورنمنت اسے اپنے ہاتھ میں لے کر اتدی بری اهم شخصیت کی اندی بری یادگار کو ہرباد ہونے سے بچا سکتی ھے۔ اس نے اس کی طرف اپنی ذمەدارى **پ**ېرى نېيى كى - اگر يە کمیتمی طهیم کالبم کو دیکھتنی، وہاں کے حالات سے با خبر ہوتی ارر اس کی ضرورت کا جائزہ لیتی تو شاید اس طرح کی یک طرفة ریورت نه هوتی لیکن بد قسمتھی سے اس نے جا کر ان کالجوں کو دیکھلے اور وہاں کے معاملات کو سمجهدے کی زحمت گرارا نہیں کی بلکہ جو وفود آئے ان کی بانوں کو کچھ سن كر اسى ير فيصله كر ليا - بهر حال اسی طریقه سے هم کو یه بهی شکایت ہے کہ یہاں انڈین میڈیسن کے سلسلہ ميى سينترل هيلتهه منسترى مين ایدوائزد هے - تین قسم کی اندین میڌیسن مانی گئی ھیں اور آپ نے هندوستانی طریقہ علاج کے لئے ایڈوائزر مقرر کیا ہے تو بےشک یا تر ٹیلوں طریقوں کے لئے تین ایڈوائزر ہونے چاهدیں به مداسب بات ہے یا پهر ایک هی رکها هے تو ایک مرتبه اگر آیرروید کے کسی صاحب کو اس پوسٹ پر نامزہ کبا گیا ہے تو دوسری دفعہ کسی طديب كو بهي موقعه دينا چاهئے تها -ایسے حکیم بھی هندوستان میں مل سکتے ہیں - سدھا کے بھی کسی آدمی

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بهی ایسا کوئی آدمی مل سکتا ہے لیکن بدقسمتی سے پہلے دو جو نامزد کئے گئے اور جو صاحب آج ھیں تھلوں کے تین صرف آیوروید کے آیں اور کوئی حکیم یا سدها کا آدمی اند بن میدیس کے ایڈوائزر کے طور پر سینڈر گورنمیڈت میں نہیں رکھا گیا -

اسی طرح پیلک سریس کمیشن کی طرف سے جو اناؤنسمیلات ہوتا ہے، جو اشتهارات نکلتے هیں مرکزی پوستروں کے لئے، ہیلتھ منسٹری کے لئے اور جس نے لئے صلاحیت کے اعتبار سے حکیم اور آیوروید دونوں برابر هوتے هیں ان میں صرف آيورريد كي ملاحيت اشتهارات میں چھپتی 🙇 اور کسی سیں اس کے ساتهم حکیم کا حوالہ نہیں دیا جاتا تو کوئی حکمم کس طرح در۔عواست دے۔ سکتا ہے ان جگہوں کے لئے - چنانچہ تمام ملک کے حکیم اس حق سے بلکل محروم رة جاتے هيں - يه ايسی عملی شکایدہوں کی وج پہ سے بہت ڈاانصافی ہوتی ہے ملک کے ایک دیسی طریقه علاج کے ساتھہ - تو اس کی طرف حکومت کو نوجه کرنی چاهئے - (Tine bell rings) جناب میرے خیال میں مجھے تو چار ملت ھی ھرئے ھیں -

श्री उपसभापति : आपको 9 मिन्ट हो गए एक आध मिन्ट ग्रीर लेले ।

شربي ايم- اسعد مدني : ممكن ہے کہ میں نے غلط گھری دیکھی **ہو -**بهرهال میں دو تین ملت. هی لونگا -میں عرض کروں کہ ھیلتھ اسکیم کے متعلق أيد دلي خاص ميں سرکار نے هیں - آیوروید کی پانچ **دسپنسریا**ں هیی اور هو*-*یوپی^مهک کی دو دسپلسریان هین لیکن یونانی کی ایک بهی ڈمپلسری نہیں ہے - تو یونانی کی ڈسپلسری بھی قائم ہو سکٹی ہے ۔ شری اکبر علی خان (آندهر بردیش) : ایک بھی نہیں ہے -شرمی ایم - اسعد مدنی : ایک بھی نہیں ہے - اگر ہو تو جو آپ کے سرکاری لوگ ھیں جو کہ گورنیلے کے خرجه پر علاج کرانا چاهتے هيں وہ کرا

شری اکبر علی خان : منستر صاحب کہم رہے میں کم ایک ہے -

سکتے هيں -

شرى ايم - اسعد مدنى : نهيس ہے۔ دھلی میں نہیں ہے۔ میری معلومات یہ ہے کہ ایک بھی نہیں ہے -یہ هی نہیں بلکہ میں نے ماستر صاحب كو اس سلسلم مدين خط لكها ارو اس کے جواب میں مجھکو صاف بات نہیں معلوم ہوئی - یہ مجھے شکایت ہے بہر حال **اس ک**ے ساتھ میں یه عرض کر رہا ہوں کہ سرکاری ہیلتھ اسکیم کے مطابق سرکاری لوگوں کو جو رمايتين ملتى هين اور و، جو علاج کراتے ھیں اس میں یونانی داخل نہیں **ہے**لی^ےی اس کے باوجود سرکاری ملازمین طب یونانی میں ایدی جدب سے پیسہ خرچ کر کے علاج کرانے جاتے ہیں -چھوتے حکیم جو دھلی میں بہت ھیں ان کے پا**س** شاید ویکارڈ نہیں ہوگا | ڈسپڈسریاں قائم کی ھیں اور آپ کی

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چاغلے لیکن یونانی کو بھی ترقی کرنے۔ کا پورا موقعہ دینا چاهلے -

اسی طرح سے میں یہ عرض کر رما ہوں کہ یونانی کالبے ملک کے اندر بند هوتے چلے جا رہے ہیں - ددایذ،، گھتنی چلی جا رہی ہے - اس طرح سے مختلف میدانون میں یو اس اور طب کے ساتھ بے انصافی ہو رہی ہے - تو جہاں آپ بوجھ کر رہے عیں، اس کو برها رہے میں تو پھر طب یونانی کی طرف بھی توجه کی جائے - یہ بات صحهم هے اور آپ اس کو محسس كربنگے - جب آپ اپنے بعجت كو دیکھیلگ که شاید دو فی صدی بھی طب یونا ہی کے لگے آپ کے بجمت میں پرے ملک بھر میں خرچ نہیں ہوتا -اس کو بچھانا چاھئے تک لوگوں کر اس سے فائدہ پہنتے ۔ بے شک طب یونانی ایسا ہے کہ اس میں اور آیوروید میں بہت فرق ہے بدیادی طور پر - بہر حال اس فرق کے لحاظ سے آپ کو اس کی همت افزائی کرنی چاهئے تاکم جو لوگ اس میں خدمات کر رہے ھیں، جس سے لوگ (س میں فائدہ معسوس کرتے ہوں۔ تو ان کو بھی ترقی کا موقعہ ملے اور ملک میں یسلے والوں کو قائدہ ہو۔ یہ ملک کی ایک دولت ہے جس سے ماک کو فائدہ پہنچے گا - تو الصاف کا تقاضه ہے کہ آپ اس طوف پوری توجه کریں اور طب یونانی کے لئے الگ کونسل بلا کر آیوروید کے لئے الگ کونسل بدا کرہ سدھا کے لئے الگ کونسل ہدا کر جس طرح سے آپ نے هومهوديتهك كے لئے الگ سے كونسل ہلا کر ہمت افزائی کی ہے - ویسے ہی

[شری ایم - اسعد مدی] لیکن آپ حکیم اجمل خان کے هلدوستانی دواخانه دو دیکھیں -همدم دواخانه کو دیکھیں - شمع کے بڑے دواخانه کو دیکھیں - همدرد دواخانه جو ایشیا میں عظیم تریں 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.

شرى اكبر على خان : نهيم -نهیں - گورنمدی آف انڈیا کی طرف سے کوئی اپیں ہے -شری ایم - اسعد مدنی : تو میں یہ عرض کر رہا تھا کہ صرف ہندرد کے هی ریکارد میں عی آپ جا کر دیکھیں تو تقريباً سو ملازمين روزانه جا كر طب یونانی میں علاج کراتے ہیں - ان کے ریکارت میں درج ہے اور اپنی جیب سے قیمت دے کر دوائیں لاتے ھیں - اگر لوگ اس میں دلچسپی نہیں لیتے ھیں۔ تو پھر یہ کیوں ھوتا ہے - منبر پارلیملٹ هکیموں کے پاس جاتے هیں -میں خود دو سال سے پارلیملت کا ممهر هو آج تک میں ، هیلته اسکیم کے مطابق ایلودیتھک کو اچھا کھتے هوئے بھی ضرورت محصوس نہیں کی اور دوا نہیں ئی ایلوپبتھک کے مطابق-جب بهی میں بیمار هوتا هوں تو صرف حميم کی دوا استعمال کرتا هوں۔ دو سال سے میں بے کسی ایلوپیتھک داکتر سے دوا نہیں لی - میرا مطلب یہ نہیں ہے کہ ایلودیتھک غیر اہم ہے، ا غہر ضروری ہے اس کو ترقی دیلی

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کوئی وجه نهیر آپ اس کی پوری همت افزائی کریں - میں چاهدا هوں جدسم أن كي همت افزائي كريس ويسيم طب يوناني کے بھی کريں اور يہ جو کونسلیں هیں ان کا عام رجستا، یشن هو - يە سب باتايى دىكەنى ھەي -ریکگذیشی کا مسئلہ دیکھا! ہے، بڑا اہم کام ہے - اس اہم کام کے لئے ان کو پورے اختیارات ملنے چاھڈیں یہ نہیں کہ ان کی اهمیت کا اعتراف نم کریں ان کو موقعه نه دين يا انصاب کې بات نهیں ، اس لگ میں درخواست کرونگا کہ آپ اس کے لگے ایک جنالانہ کرنسل ملظرر كريس اور صرف وعدلا نهين بلكه عدلًا إن كو موقعة ملذا چاهر -

آخر مين ايك بات كرونكا - داكتر عبدالغفي صاحب ايم - بي - بي -ایس - بھی ہے، حکیم بھ_{نی} تھے خرد انہوں نے مجھه سے کہا کہ کاربلکل کا وأى كامياب علاج إيلويستهك مي نہیں ہے لیکن طب یونانی میں اس کا بهترين نستعده كامياب نستغم موجرد ہے - میرے کہنے کا یہ مطاب نہیں ہے که ایلوپچتهک کی یا آیرویدگ کی اہمیمت نہیں ہے ۔ سب کی ادنی اپنی اهميت هے ليکن طب يوناني کي بھي اہمیمت سلک بھر میں ہے اس لئے اس کو بھی سب کے ساتھ ساتھ آگے برھائیں اور نمام ار چذوں کو دور خرکے اس کے راسته کو صاف کریں ناکہ ملک کو فائدہ پہلچے -

†श्ति एम० ग्रस प्रद मदनी (उत्तर प्रदेश): नायब सदर साहब, मै जो बिन ग्रापके सामने है उसका मजमुई तौर

t[] Hindi transliteration.

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पर स्वागत करता ह। इसमें कुछ एमेडमेन्ट मैने दिये है। हमारे कान्स्टीटयज्ञन मे वाजया तौर पर यह यकीन दिलाया गया है कि हिन्दुस्तान में तमाम अलुम क्रो, तमाम शिक्षाग्रों को ग्रौर तमाम हर किस्म की चीजों को तरक्की करने का पूरा मौका मिलेगा, इसलिए इससे बहुत पहले यह होना चाहिए था कि हमारे कान्स्टीट्युशन को जो यकीन दिहानी है उसकी रोणनी मे तमाम तिब्बे यनानी को और आयुर्वेदिक को और सिद्ध को और जो दुसरी चीजें हैं उनको पूरा मौका मिलना चाहिये था. लेकिन बदकिस्मती से उनको पूरा मौका नही मिल सका है ग्रोर इस बिल में इस तरह की उम्मीद पाई जाती है कि ग्राइन्दा इसको ग्रमली तौर पर भी परा मौका मिलेगा। इस रास्ते मे जो कृष्ठ रुकावटे मुझे महसूम होती हैं, इस बिल में अमली तौर पर उनकी तरफ मै ग्रापकी तवज्जो दिलाना चाहता हं ग्रौर इस उम्मीद के साथ कि इस तरह की जो चक है उसको दुर किया जायेगा ग्रौर ग्रनली तौर पर भी सही तरीके से चले ताकि हम ग्रपने मुल्क के बसने वालो की सही तौर पर खिदमन कर सके ग्रौर उनकी खिदमत के रास्ते में जो रोडे हैं वे न ग्रटके।

जाहिर है एलोपैथिक इस मुल्क में बहन तरक्की-याफता है पहले से ही। बहन पहले से इसकी सरपरस्ती और मदद की जाती है श्रौर होनी चाहिए। इसकी तरक्की पर हमको कोई एतराज नही है, इसमें बहत सारे मुवाके हासिल हैं। आज इसका तरीका इलाज बहत ग्रागे बढ चुका है उसको पूरे तरीके से ग्रयनाना चाहिये । लेकिन इसके साथ जो हमारे मुल्क में पूराने तरीके इलाज है स्रौर जिनसे इस मुल्क के बसने वालो ने करोडो की तादाद में पहले भी फायदा उठाया है ग्रौर ग्राज भी मुल्क की बहुत बडी ग्रावादी इससे फायदा उठा रही हे। देहात-देहात गाव-गाव में महलों में ग्रौर बडे-बडे शहरों में इससे फायदा उठा रही है तो उसको हमने पूरे तरीके से आगे बढाने में जो गफ़लन पहले रखी है. अग्रेजों के जमाने में या ग्राज तक हमने जो कमी की है उसको दर करना चाहिए।

इस बिल के एतबार से मुझको ऐसा महसूस होना है कि जितने तरीके इलाज के क्राज देसी है, उनके लिए एक कमेटी बना कर उनको जैसे घट दिया गया हो ग्रौर तरक्की के लिए जो पूरी मदद होनी चाहिए उनको शायद वह न मिल सके, इसलिये मैं यह चाहता था कि जिस तरीके से म्रापने होम्योपैथिक के लिए जो बाहर से स्राया हुग्रा तरीका इलाज है—कोई हर्ज नही ग्रगर हमारे मुल्क के बसने वालो को किसी तरीके इलाज

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[श्री एम० ग्रसग्रद मदानी]

से चाहे वह हमारे मुल्क का हो या बाहर का हो फायदा होता है तो उनको हमें अपनाना चाहिए अपने मुल्क में बनने वालों के फायदा की खातिर। तो आपने इसके लिए अलग कौंसिल बनाई है। बहुन अच्छा है, लेकिन इस तरीके से अपने मुल्क के जो तरीका इलाज है जैसे आयुर्वेद है, यूनानी है, सिद्धा है इसके लिए भी अलग-अलग कौसिल न बनाने से उनकी पूरी हिम्मत अफ-जाई इसमे नही होती है और यह एक तरीके से उनके रास्ते में बाधा डालना है।

गुल फेके हैं ग्रौरो की तरफ बल्कि समर भी, ऐ खाना बर ग्रन्दाज चमन कुछ तो इधर भी।

जिस तरह से इनके लिए यह सब कुछ किया गया है, तो म्रपने जो तरीके इलाज हैं, उनके लिए भी पूरी सहलियते ग्रौर पूरी तवज्जो होनी चाहिए।

मै खाम तौर पर यह ग्रर्ज करू कि तिब्बे यनानी इन देमी तरीका हाथ-इलाज के मामलात को देखने के लिए आपकी पालियमेट के दोनों हाउसिज ने एक कमेटी बनाई, उसने जायजा लिया, लेकिन बदकिस्मती से उसने मुल्क का जो सर्वे किया श्रौर जायजा लिया उसमें यहां ग्राए हुए वफुद की बात सूनी। बहुन दूर दूर गये। जामनगर ग्रायुर्वेदिक युनिवर्सिटी को देखा, मद्रास में ग्रायर्वेद के कामों को देखा, लेकिन मद्रास में, हैदराबाद मे ग्रौर खद दिल्ली के ग्रन्दर जो युनानी तिव्बया कालिज है उसको नही देखा । ग्रापको यह मालुम है कि हकीम ग्रजमल खा माहब हिन्द्रस्तान की बहुत अहम शख्सीयत थे। इण्डियन नेशनल कांग्रेस के सदर रहे ग्रौर पोलिटिकल हैसीयत से नही बल्कि हिन्दुस्तान के एक मशहर तहबीब गुजरे है। उन्होने यहां युनानी एण्ड ग्रायवेंदिक तिब्बिया कालेज बनाया ग्रौर उसके साथ हिन्दुस्तानी दवाखाना कायम किया था। वह यहा दिल्ली में मौजूद है। अगर्चे मुझ को यह भी शिकायत है कि ग्राज उसकी मिट्री पलीत हो रही है उसके ग्रन्दर इन्तहाई खराबी है। गवर्नमेट उसकी तरफ मही तौर पर तवज्जो नही कर रही है। उसको न ग्रहलो के हाथ में दे दिया गया है। सेन्ट्रल गवर्नमेंट इसे ग्रयने हाथ में लेकर इतनी बडी ग्रहम शख्सीयत की इतनी बड़ी यादगार को बर्बाद होने से बचा सकती है। इसने उसकी तरफ ग्रपनी जिम्मेदारी पूरी नहीं की । ग्रगर यह कमेटी तिब्बिया कालेज को देखती वहां के हालात से बाखबर होती और उसकी जरूरत का जायजा लेती तो शायद इस तरह की एक तरफा रिपोर्ट न होती, लेकिन बद-किस्मती से उसने जाकर इन कालेजो को देखने ग्रौर वहा

के मामलात को समझने की जहमत गवारा नही की बल्कि जो वफूद ग्राये उनकी बातों को कुछ सुन कर इसी पर फैसला कर लिया। बहर-हाल इसी तरीके से हम को यह भी शिकायत है कि यहां इण्डियन मेडिसन के सिलमिले में सेन्ट्ल हैल्थ मिनिस्ट्री में एडवाइजर हैं। तीन किस्म की इण्डियन मेडिसन मानी गई है ग्रीर ग्रापने हिन्दुस्तानी तरीका इलाज के लिए एडवाइ-जर मुकर्र किया है,तो बेशक या तो तीनो तरीको के लिए तीन एडवाइजर होने चाहिए यह म्नासिब बान है या फिर एक ही रखना है तो एक मर्तबा ग्रगर ग्रायवेंद के किसी साहब को इस पोस्ट पर नामजद किया गया है तो दूसरी दफ़ा किसी तबीब को भी मौका देना चाहिए था। ऐसे हकीम भी हिन्दूस्तान में मिल सकते है। सिद्धा के भी किसी ग्रादमी को यह मौका देना चाहिए था उनमे भी ऐसा कोई ग्रादमी मिल सकता है, लेकिन बदकिस्मती से पहुंले दो जो नामजद किये गए झौर जो साहब ग्राज हैं तीनों के तीनों सिर्फ ग्रायुर्वेद के हैं ग्रोर कोई हकीम या सिद्धा का ग्रादमी इण्डियन मेडिसन के एडवाइजर के तौर पर सेन्ट्रल गवर्नमेन्ट में नही रखा गया।

इसी तरह पब्लिक सर्विम कमीशन की तरफ से जो एनाउन्समेंट होता है, जो इश्वहारात निकलने है मरकारी पोस्टो के लिए, हैल्थ मिनिस्ट्री के लिए ग्रौर जिसके लिए सलाहियत के एतबार से हकीम ग्रौर ग्रायुर्वेद दोनों बराबर होने हैं, उनमें सिर्फ ग्रायुर्वेद की सलाहियत इश्तेहारात मे छपती है ग्रौर किसी में उसके साथ हकीम का हवाला नहीं दिया जाता तो कोई हकीम किस तरह दरख्वास्त दे सकता है इन जगहो के लिए। चुनाचे तमाम मुल्क के हकीम इम हक से बिलकुल महरूम रह जाते है। यह ऐसी ग्रमली शिकायते हैं, जिनकी वजह से बहुत नाइन्साफी होती है, मुल्क के एक देसी तरीका इलाज के साथ। तो इमकी तरफ हकूमत को तवज्जो कुरनी चाहिए। (Time bell rings) जनाब मेरे खयाल में मझे तो चार मिनट ही हए है।

श्री उपसभापति : ग्रापको 9 मिनट हो गये एकाध मिनट ग्रौर ते लें।

श्री एम॰ ग्रसग्रद भदनी : मुमकिन है कि मैंने गलत घड़ी देखी हो। बहरहाल मैं दो तीन मिनट ही लूंगा। मैं ग्रजं करू कि हैल्थ स्कीम के मुत्तलक अपने दिल्ली खास में सरकार ने डिस्पेसरियां कायम की है ग्रौर ग्रापकी यहां एलोपैथिक की पांच डिस्पेसरियां है। आयुर्वेद की पाच डिस्पेंसरियां हैं ग्रौर होम्योपैथिक की

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दो डिस्पेसरिया है, लेकिन यूनानी **की एक** भी डिस्पेंसरी नही है, तो यूलानी की डिस्पेसरी भी कायम हो सकती है।

श्री ग्राकब[,] ग्राली ख़ान (ग्रान्ध्र प्रदेश): एक भी नही है।

श्री एम॰ प्रसम्रद मदनी : एक भी नही है । ग्रगर हो तो जो अप्यके सरकारी लोग है जो कि गवर्नमेट के खर्चे पर इनाज कराना चाहते है, वे करा सकते हैं।

श्री ग्राकबर ग्राली खानः मिनिस्टर साहब कह रहे है कि एक ४।

श्री एम० असग्रद मदनी : नहीं है, दिल्ली में नहीं है। मेरी मालूमान यह है कि एक भी नही है। मैंने यह ही नही बल्कि मैने मिनिस्टर साहब को इस सिलसिले में खत लिखा और उसके जवाब में मुझ को साफ बात नही मालूम हुई। यह मुझे शिकायत है बहरहाल इसके साथ मै यह अर्ज कर रहा हूं कि सरकारी हैल्थ स्कीम के मुताबिक सरकारी लोगों को जो रियायते मिलती है ग्रौर वे जा इलाज कराते है, उसमें युनानी दाखल नही है, लेकिन इसके बावजूद सरकारी मुलाजमीन तिब्बे युनानी में ग्रपनी जेव से पैमा खर्च करके इलाज कराने जाते हैं। छोटे हकीम जो दिल्ली में बहुत हैं, उनके पास शायद रिकार्ड नही होगा । लेकिन ग्राप हकीम ग्रजमल ख[ः] के हिन्द्रस्तानी दवाखाने को देखें, हमदम दवाणाने को देखे, शमा के बड़े दवाखाने को देखे, हमदर्द दवाखाने को देखें, हमदर्द दवाखाना जो एशिया मे अजीम तरीन है उसको देखें।

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

श्री ग्राकवर ग्रली खान : नही, नही, गवर्नमेंट ग्राफ इण्डिया की तरफ से कोई नही है।

श्रो एम ग्रसग्रद मदनी : तो मै यह ग्रर्ज कर रहा था कि सिप हमदर्व के ही रिकार्ड में ही ग्राप जा कर देखें तो तक्षरीबन सौ मुलाजमीन रोजाना जाकर तिब्बे युनानं। मे इलाज कराते है उनके रिकार्ड में दर्ज है ग्रौर ग्रानी जेब से कीमत देकर दवाये लाने है। ग्रगर लोग इसमें दिलचस्पी नही लेते है तो फिर यह क्यो होता है ? मेम्बर्स पालियमेन्ट हकीमो के पास जाते है। मैं खुद दो साल से पालियमेन्ट का मेम्बर हूं, ग्राज तक मैंने हैल्थ स्कीम के मुताबिक एलोपैथिक को अच्छा कहते हुए भी जरूरत महसूम नहीं की और दवा नहीं ली। एलोपैथिक के मुताबिक जब भी मैं बिमार होता हू तो सिर्फ हकीम की दवा इस्तेमाल करता हूं। दो साल से मैंने किसी एलोपैथिक डाक्टर से दवा नही ली है। मेरा मतलब यह नही है कि एलोपैथिक गैर-अहम है, गैर-जरूरी है उसे तरक्की देनी चाहिए, लेकिन यूनानी को भी तरक्की करने का पूरा मौका देना चाहिए।

इसी तरह से मैं यह ग्रर्ज कर रहा हूं कि यूनानी कालेज मुल्क के अन्दर बन्द होते चले जा रहे है, ऐड घटती चली जा रही है। इस तरह से मुख्तलिफ मैदानो में युनानी ग्रौर तिव्ब के साथ बेइन्साफी हो रही है। सो जहा ग्राप तवज्जो कर रहे है, उसको बढ़ा रहे है तो फिर तिब्बे यनानी की तरफ भी तवज्जो की जाये। यह बात सही है ग्रौर ग्राप इसको महसूस करेगे जब ग्राप ग्रपने बजट को देखेगे कि शायद दो फी सदी भी तिब्बे युनानी के लिए ग्रापको बजट में पूरे मुल्क भर मे खर्च नही होता। इसको बढ़ना चाहिये ताकि इससे लोगो को फायदा पहुंचे। बेशक तिब्बे यूनानी ऐसा है कि इसमे और आयु-र्वेद मे बहुत फर्क है बुनियादी तौर पर । वहरहाल इस फर्क के लिहाज से ग्रापको इसकी हिम्मत अफजाई करनी चाहिए। ताकि जो लोग इसमें खिदमात कर रहे हैं, जिससे लोग इसमें फायदा महसूस करते हों तो उनको भी तरक्की का मौका मिले ग्रौर मुल्क में बसने वालो को फायदा हो । यह मुल्क की एक दौलत है जिससे मल्क को फायदा पहुचेगा। तो इन्साफ का तकाजा है कि ग्राप इस तरफ पूरी तवज्जो करे ग्रौर तिब्बे यूनानी के लिए ग्रलगकौ सिल बना कर, ग्रायुर्वेद के लिए ग्रलग कौंसिल बना कर सिद्धा के लिए ग्रलग कौंसिल बना कर जिम तरह से ग्रापने होम्योपैथिक के लिए ग्रलग से कौसिल बना कर हिम्मन ग्रफजाई की है वैसे ही कोई वजह नही आप इसकी पूरी हिम्मत अफ़जाई करे। मैं चाहता हूं जैसे उनकी हिम्मन अफ़जाई करे वैसे तिब्बे यनानी की भी करे ग्रौर ये जो कौसिले है इन का ग्राम रजिस्ट्रेशन हो यह सब बाते देखनी है रिकगनीशन का मसला देखना है। बड़ा ग्रहम काम है। इस ग्रहम काम के लिए उनको पूरे ग्रख्तियारात मिलने चाहिएं। यह नही कि उनकी ग्रहमियत का एतराफ न करे, उनको मौका न दे यह इंसाफ की बात नहीं है, इसलिए मैं दरख्वासर्त करूंगा कि म्राप इसके लिए एक जुदागाना कौसिल मजर करे ग्रौर सिर्फ वायदा नहीं बल्कि अमलन उनको मौका मिलना चाहिए।

[श्री एम० ग्रहमद मदनी]

आखिर मै एक बात कहगा। डाक्टर ग्रब्दूल गनी साहब एम० बी० वी० एस० भी थे, हकीम भी थे। खद उन्होने मझ से कहा कि कारबक्ल का कोई कामयाब इलाज एलोपैथिक मे नही है, लेकिन तिब्बे युनानी मे उसका बेहनरीन नस्खा कामयाब नस्खा, मौजद है। मेरे कहने का यह मतलब नही है कि एलोपैथिक की या ग्रायर्वेदिक की ग्रहमीयत नही है। सबकी ग्रपनी ग्रपनी ग्रहमियत है लेकिन तिब्बे यनानी की भी ग्रहमियत मल्क भर मे है इसलिए उसको भी सबके साथ साथ ग्रागे बढाये ग्रौर तमाम ग्रड्चनो को दूर करके उसके रास्ते को साफ करें ताकि मल्क को फायदा पहुंचे।]

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 tranquil-But I found later that homoeopathy lisers. 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

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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 three these 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 tyring 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.

SHRI AKBAR ALI 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. (Imerruptions) 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 homocopathy.

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

3 р.м.

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 relfection 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. The 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.

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*[श्री एम ग्रसग्रद मदनी : ग्राप इस प्रणाली से वाकिफ नही हैं वह कूछ ग्रौर भी देखते है।]

SHRIA. D. MANI: The Minister would have hauled up the person. (Interruption) सुन लोजिए, मै ग्रपना ग्रनुभव बता रहा ह, सच्चा, ग्रनुभव बता रहा हू। I am not getting the protection of the Chair to the extent that 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 A urvedic or Unani drugs? Why should anyb dy charge Rs. 30 for two bottles of water?

AN HON. MEMBER : What happened then?

MR. DI PUTY CHAIRMAN : You continue your speech.

SHRIA. D. MANI: They are very hostile to me. These 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 in medicine must be the basis for both the systems namely, a good knowledge of anatomy 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 taught, then you have no objection?

SHRI A. D. MANI : No. Matricultation standard vary from University to University. The moment you admit them, I only want 'ou to prescribe these as compulsory studies where a person must get at least 6%. Very few know about human analomy 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 compartmentalisation 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, erythrocin 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 lable 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 But that does 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 opithalmic 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.

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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 गनेशी लाल चौधरी (उत्तर प्रदेश). उपाध्यक्ष महोदय, यह बिल जिस रूप में स्राया है मैं उसका समर्थन नहीं कर सकता ग्रीर उसके दो कारण हैं। एक कारण तो यह है कि जितने हमारे यहा के सिसटम है, मेडिसिन के, उनके ग्रलग-ग्रलग बोर्ड बनने चाहिएं थे। जिसका इसमे यह प्राविजन होना चाहिए था। यदि उनके लिए ग्रलग-ग्रलग बोर्ड होते, तभी उनकी तरक्की हो सकती है। दूसरा कारण यह है कि मैंने जब इस बिल को पढ़ा तो इसमें जो कौसिल बनाने की बात ग्रायी है उसमें देश के जो शेडयुल्ड कास्ट हैं या जो शेड़युल्ड ट्राइब्स है उनको कौसिल में रखने का प्राविधान नही किया गया है । इस कारण मैं इस बिल का समर्थन नही कर सकता ।

बहरहाल, यह बिल आया जिसको बहुत पहले ग्राना चाहिए था । देर से ग्राये दूरुस्त ग्राये । इस बिल से यह पता चलता है कि श्रीमती फीरोज गांधी की जो सरकार है, वह कितनी दूरदर्शिता से परे है। क्योंकि इस बिल को बहत पहले ग्रा जाना चाहिए था। मै आपको एक मिसाल दुगा कि श्रीमती फिरोज गांधी की जो सरकार है, देश में जब लड़ाई झगड़े हो जाते है, कम्युनल बातें हो जाती है तो उसके बाद उन पर विचार करती है। जब देश में नक्सलपंथी बढ़ जाने है, तो उनके बारे मे सोंचा जाना है कि उन नक्सलपंथियों कैसे दबाया जाय । यह दूरन्देशी है, श्रीमती फीरोज गांधी की सरकार की । जब सूबों में एक नया सूबा बनाने के लिए म्रान्दोलन होता है, तमाम तोड़-फोड़ हो जाती है तब सूबा मजुर किया जाता है। आज जब देश में चारों तरफ हरिजनों को जलाया जा रहा है, हरिजनो को गोलिया मारी जा रही है, तो श्रीमती फीरोज गाधी की सरकार को यह सोचना पड़ रहा है कि उनकी रक्षा कैसे की जाय। यह पहले सोचना चाहिए था कि देश में एक ग्राधिक क्रान्ति चल रही है ग्रौर जब ग्रायिक कान्ति चलती है तो उस ग्रायिक कान्ति के साथ झगड़े होते है और इस लिए उन को रोकने के लिए सरकार को पहले मे तैयार रहना चाहिए था । तो मै इसलिए कह रहा हं कि म्राज श्रीमती फीरोज गांधी की सरकार जो है वह दूरदेण नहीं है . .

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

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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 addres them by the name by which they are know 1 on the electoral rolls. The other day m 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. DEPUTYSCHAIRMAN : 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. Rajnarai that he should refer to the Prime Minister as Mrs. Indira Gandhi. I hope this di ease will not prove to be contagious and w ll not spread further.

श्री निरंजन वर्भा (मध्य प्रदेश). ग्रापने जो कहा वह तो ठीक है ंगकिन ग्रगर मिसेज फीरोज गांधी भी उनको कहा जाय तो उससे उनके प्रति ग्रभद्रता प्रकट नही होती है।

श्री शोलभद्र थाजों] (बिहार) : मापकी वाडफ का नाम ले कर प्रगर ग्राप को बुलाया जाय तो क्या बहुत ग्रच्छा है ?

MR. DEPUTY CHAIRMAN : I had told the House the other day that if you want to adcress 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) : W hat is wrong with it?

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

श्रो निरंजन वर्माः जो ग्रापका सुझाव है उसमें हमें कोई ग्रापरित नही है। लेकिन मै इतना ही निवेदन करना चाहता हं कि ग्रतने देश में यह प्रथा है कि पति के नाम के पीछे परनाम चलता है ग्रौर मिसेज लगता है। तो इस मे किसी सदस्य को ग्रभद्रता नही दिखनी चाहिए ।

श्री उपसभाषतिः जिस द्ष्टिकोण से कहा जा रहा है उसके लिए मैंने कहा।

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

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श्री हयातुल्ला अन्सारी (उत्तर प्रदेश) : देखिए एक मसल है, खिनियानी बिल्ली खम्बा नोचे, जो हार गये है, बहुत परेशान हैं, वह ग्रगर बुरे-बुरे नाम ले कर के कुछ रोना चाहते है तो मैं समझता हूं कि हमको थोड़ा सा सत्र करना चाहिये ।

श्री उपसभापति : ग्रच्छा गनेशी लाल जी ग्राप कहिये ।

श्री गनेशी लाल चौधरी : मझे बडा दू:ख है, श्रीमती फीरोज गाधी के नाम पर हमारे भाइयों को इतराज है। मै अपने देश की परम्परा को बताना चाहता हं कि देश भी जा परम्परा है उसमे पुरुष का नाम स्त्री के साथ लगता है, तो मेरे खयाल में मुझे माफ करेंगे मेरे दोस्त जो कि उधर बैठे है, जिनको इस बात से कोई तकलीफ हुई है, अपनी संस्कृति और अपनी परम्परा के ग्रनसार सैने श्रीमती फीरोज गाध के साथ कोई ग्रभद्रता की बान 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: श्रीमन, यह पहला ग्रवसर है जब एक सेट्रल कौसिल ग्राफ इंडियन सिस्टम ग्राफ -मेडिसिन ग्रौर होम्योपैथिक कौसिल का गठन हो रहा है । यह पहला ग्रवसर है जब कि ग्रपने देश कि मेडिसिन्म के जो सिस्टम्स है, अपने देश के वातावरण मे पली हई जो मेडिसिस है इनको सारे देश के वातावरण मे सोचा जा रहा है ग्रौर 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 ग्रौर जो शास्वी बन कर के, पढ़ कर के ग्राते है उनको क्या डिग्री दी जाय । तो यह इसके लिये पहला ग्रवसर है। वैसे, उपाध्यक्ष महोदय, हमारे देश मे जो अपने देश की चिकित्सा प्रणाली चल रही है, उसको सरकार की ग्रोर से ग्रब तक मान्यता नहीं मिली ग्रौर यह उन चिकित्मा प्रणालियों की उपयोगिता ही है कि ग्राज तक बिला सरकार की किसी महायता के भी जिन्दा है।

Time bell rings

श्रीमन, मेरा तो बहुत सा टाइम चला गया, आप उसका तो खयाल रखें। श्रीमनु मैं सरकार से एक प्रण्न पूछना चाहता हूं कि ग्राज जो देश का 70 फीसदी ग्रादमी देहात मे रहता है, उसको चिकित्सा की सुविधा

[श्री गनेशी लाल चौधरी]

देने के लिये ग्रापके पास कोई स्कीम है। सन 1944 ई० में चिकित्सा शास्त्री श्री जीवराज जी ने कहा था कि देश में जो बीमारिया है वह लगभग 87 प्रतिशत साधारण बीमारियां हैं। ग्रौर 13 प्रतिशत जो है वह स्पेशल बीमारियां है। तो ग्राज 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 मै माननीय मंत्री जी से कहगा कि ऐसी कोई स्कीम बनायें, जिससे कि देश के मारे लोगों को दवाये उपलब्ध हो सके ।

मै ग्रापके सामने दो तीन सजेशन देना चाहता हं. उपाध्यक्ष जी भी मेरी म्रोर देख रहे हैं म्रौर चाहते है कि मैं जितनी जल्दी हो सके खत्म कर दूं। तो मैं ग्रापके सामने दो तीन सजेशन देना चाहता हूं। यह कि आज चिकित्सा प्रणाली जो है वह विलेज ग्रोरियंटेड करें। क्या आपके पास कोई स्कोम है कि शहर मे जो ग्राप सुविधाएं दे रहे हैं. उसको घटा कर देहान की स्रोर ले जायेंगे और ग्रापकी जो स्कीम है वह विलेज ओरियेन्टेड हैं । दूसरा सुझाव मैं देना चाहना हु कि यह जो चिकित्सा प्रणाली है यह क्वालिटेटिव न हो कर के क्वान्टिटेटिव हो----''ग्रेटेस्ट गुउ म्राफ दि ग्रेटेस्ट नम्बर ''। म्राप समाजवाद की तरफ जा रहे है, समाजवाद चला रहे हैं, तो कृपा कर ग्राप 13 परसेन्ट बीमारों के लिये आप सारा पैसा मत खर्च करें, ज्यादा से ज्यादा लोगो को ग्राप हिन्दूस्तानी दवाग्रों की ग्रोर ले जाए।

तीसरा सुझाव यह है कि ग्राप देश के स्तर पर, सेंग्रे देश मे जो चिकित्सा के क्षेत्र में शास्त्री हैं, उन चिकित्सा शास्तियो को स्राप बुलाएं स्रौर उनकी कमेटी बना कर यह निश्चित करे कि सस्ती से सस्ती दवाएं कौनसी प्रणाली दे सकती है और राष्ट्रीय स्तर पर शिक्षा चलाए। इसमें जिस तरह से ग्राप रक्षा के लिये प्राथमिकता देते है, जिस तरह से शिक्षा के लिये प्राथमिकता देते हैं, खाने और कपड़े के लिये प्राथमिकता देते हैं. उसी तरह से ग्राप उन दवाइयो के लिए भी प्राथमिकता दे ग्रौर ग्रागे रखे।

इन शब्दो के साथ उपसभापति जी मैं जिस रूप मे यह बिल ग्राया है, उसका समर्थन नही करता ह ।

SHRI HAMID ALI SCHAMNAD (Kerala) : Mr. Deputy Chairman, while supporting this Bill, to provide for the constitution of a Central Council of India

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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 some in the service of India. They do not come in the proper 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 unproved. It is not enough if we increase the native physicians or Aurvedic physicians. It is absolutely ne-cessary 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 odctor. 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. 1 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 Medicine and Homoeopathy and main-tenance of a Central Register of Indian being formed. Some colleges were started

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in 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 mode n medical college. And students coming out of that institution claim that they have attained knowledge of Ayurveda and modern medicine. When they go out of the college, they do not touch Ayurveda. They only practise modern medicine because Ay irveda is not attractive to them; nor the people are attracted by Ayur-These GCIM students and doctors veda. after coming out of that college, a'tended a condensed MBBS course and have got the MBBS degre's and they have become allopathic doctors. So also in Kerala we have got an Ayur edic College which gives the Degree of BIM, Bachelor of Indian Medicine. Even those 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. This bifuraction 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 1 of be prejudiced against it. Unani medicine also should be practised, should be studied, research should be conducted into it. Those doctors should practise Unani system only. Whatever medicine they study in the college when they come out of the college, they do not practise that, but practise only modern medicine. Why is it so? There is another Medical science has advanced tendency. 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 ey, specialist, heart means heart specialist. There is specialisation in various specialist. There is specialisation in various branches. What I say is, when medical science has so much advanced, it is no fun in our stying that our old, ancient method alone should be adopted, unless the quality of it is improved. I say that the Indian medicine should definitely improve. In the rural areas we have got many phy-sicians, native physicians. What happens sicians, native physicians. What happens there? Poor patients go there. These physicians treat them. And when they the Bill with the following ovservtations, find that it is incurable, then they say, you It is good that medical practitioners have 14 RSS 70-7.

Council Bill 1968 go to some doctor. They send them to some doctors. When they go to the govern-ment hospitals, the doctors there say to them, you have come here too late. The disease has advanced too much. It is 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 be-cause 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 mainthat proper registration should be main-tained in every district medical office for those who are all practitioners and their qualifications in Ayurveda etc. The mini-mum 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 fa-mous 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 Indain 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 ovservtaions.

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 to accept my views. The proposed Ball seeks to enrol members, even quacks, as my friend put it. I entirely agree with Mr. Koya and Mr. Mani

SHRI HAMID ALI SCHAMNAD I 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. Could 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, Eighteen Siddhas of Medical Dictionary The Siddhas propounded this system which is superior to the Ayurvedic or the Unant 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 sufficient 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 effective system, i e. the integrated system, which included both theory and practice, was developed. Mr. Deputy Chairman, there are more colleges for this system than for any of these three systems. I have given on ment 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, diploams 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 they would have also got it. It is about what the Supreme Court of 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 Executive 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 19 walking away.

SHRIG.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 any regular examination should not be included.

SHRI M. M. DHARIA (Maharashtra) [•] 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 Homocopathy. (Interruption). I have also passed examinations in Homoeopathy. This postal 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 hon. 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 AKBAR 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. Excepting the Siddha system, I know about all these four systems. I am a beneficiary of the Ayurveda system; I am a ben ficiary of the Unani system; I am a ben ficiary 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 cannot believe. I know cases where allopathy has said "No" but Ayurved has come in. I know a crise where Allopathy has said "No" but U ani has come in. The same is true with Homoeopathy. So they have got their own instory. They have got their own important things. 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 neen completely ignored by the Ministry. That is not right. That is not fair I know eminent persons like Madan Mohan Malavia and Hakim Ajmal Khan, who thought high of their own systems which they not only liked but which they wanted to orogress and prosper. They felt that unless Ayurved was brought into modern touch, unless Unani was brought into modern ouch, 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 f there had been three or four independent councils. That would have been much better. I think it is too late for me now to uggest it. But I request the Minister to hange it. I find in the Bill that these councils have been given, for all practical purposes, complete indepen-dence. 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 n this. At present there is nothing that MR. DEPUTY CHAIRMAN : All s not covered in this. Everything is there, right. Take three or four minutes. in this. At present there is nothing that

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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 Unanı Dispensary. That is not right 1 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 you insist, I can give you two or three minutes.

SHRIK.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.

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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 reason 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 most ancient documents. We sometimes believed that they are APAURUSHEYA, which means that they do not emanate from human sources. They derive their authority from God That is why they are called APAURUSHEYA. They are documents of great antiquity ever known to history. Ayurveda is considered to be one of the Upavedas of the four jain Vedas The four vedas are : RIG, YAJUS, SAMA 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 Devas, Charaka, Susiuta and Dhanvanthari It is also believed that a king a 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 I is stagnation in the system of Ayurvedic medicine because it is far behind the modern system of medicine. Modern sciences have I 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 has a serious drawback. This Bill has neglected and ignored the body of physicains 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 Examination in sciences. 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 facilites. 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 thev 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 guite clear in his mind that both the systems shoul 1 be combined There should be a combine. I training in both the systems in our colleges and then only our medicine can prosper and there can be a fusion of the past experience with the modern developments. That is why 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 inedicine' 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 unjest, untair 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 and wanted this Bill to be passed as early as possible.

Sir, the main point that become a bone of contention more or less is about the integrated cou se 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 think 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 hedicine, leading to integration 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 synthesis with the modern medicine. Then in 1949 another Committee

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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 Western medicine 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 was never started to make the Indian system modernised.

SHRI M. V. BHADRAM : The status given to Ayruveda was 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 4 p.m. a man stand for the subject in which he hasreceived education. If all these integrated persons as well as the Ayur vedic practitioners stood for the-

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would 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 accepted more or less by the States and the veds outnumber the integrated people 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 integrated practitioners are not at all touched. They are now registered in the Register of Ayurvedic Practitioners except perhaps in Madras where they have a separate Board and perhaps, subject to correction, in Maharashtra where there is a separate schedule 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, Siddhe again is a system but integrated system is a course of education wherein Ayurveda and western medicine as well as modern sciences are brought together to make the student better than the earlier educated or trained Avurvedic 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 neither myself nor my senior colleague, Shu Shah, have anything against the integrated system of practitioners and every protection will be given under this very Act to see that their representatives are in the Central Council and then their wise counsels are accepted for the good of the Indian society and the Indian systems of medicines

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

SHRIB. S MURTHY : We have already accepted 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 Integrated Medical 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 a very reasonable.

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

indigenous system, I am sure this Bill know why another Committee should be there for the integration of Ayurveda and the Wester Veda?

SHRI S. S. MARISWAMY : The Ayur-

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 why there should be a separate Council for the Integrated System of Medicine, 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 protection to the integrated systems. (Interruptions) As far as election is concerned-that is a very important point-we have said in this **B**ill that institutionally quabfied persons will have to be elected as members for this Central Council out of the-according to the figures available-40,000 Ayurvedic practitioners including 25,000 Inte-grated 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 overwhelined by the institutionally qualified non-integrated practitioners. Therefore, there is not that difficulty, Sir.

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

Medical Research, and the Gujarat Ayur- only for more or less the Government vedic 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 dard Dawakhana every day. establishment of twenty post-graduate Departments in Ayurveda, Siddha and Unani. Proposals for such departments at Lucknow, Aligarh, Trivandrum and other places are inder 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 pre 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 Homoeopoathy 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 will science as a whole. Drug research and standardisation of medicine used in Ayurveda and Sid Iha and Unani have been given priority in the Fourth Plan. Standards, are being worked out for the drugs and formulations National formularies of Ayurveda, S. Idha, Unani and Homoeopathy are being pre bared by expert pharmacopoeia committees of these systems. The first volume of these national formularies is to be printed at an early date.

There wa 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 Unant dispensaries run by the Corporation.

* श्रि एमः ग्रसग्रदमदनीः मैने ग्रापनेः खत ॥पने बहत गोल-मोल जवाब दिया। लिखाथा। साफ जवाब न**ा दिया ।**]

SHRIB. S. MURTHY : I am not against a it and I say we will do our best to provide it but I am evplaining the background against which this had not been done so fai. As a matter of t ict we provide these dispensaries

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employees

SHRI AKBAR ALI KHAN : Hundreds of Government employees go to the Ham-

र्भिश्री एम**० ग्रसग्रद मदनी** सरकारी मलाजम जा कर इलाज कराते हैं ग्रौर पैसा खर्च करते थे ।]

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,---

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

(ii) 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.

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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 and 21, the following be substituted, namely :--

(f) 'medical institution' means any institution within or without India having facilities for regular institutional training and hespital 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."

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and hospital attendance and be inserted."

The questions were proposed.

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

(MRS.) DR 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 amen.iments. 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, (SHRI AKBAR 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.'

Similaly 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 institutions in Ayurveda and Siddha which are training institutions according to the Second Schedule, 1 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 60. "That at page 4, line 21, after the word 'India' the words 'having facili-ties for regular institutional training the health of the people. They deal with

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 clinics. Then only their training is complete. Therefore, I move my amendments.

SHRI M. V. BHADRAM : There are two amendments of mine, Nos 5 and 9 No. 5 deals with the definition of medicine. It does not include the integrated medicine. The Minister aid that they are protected by the amendment suggested by Mr. Mohan Dharia, but according to me and according to so many other friends also it does not protect the integrate of the integrated practitioners. Accc ding 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 moder 1 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 nanned 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, qualitied and unqualified put together, in Ay rveda 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 late will be hanging. Otherwise, they must go on applying grease to this politician or that politician or catch hold of a big recketeer. That is why I seriously insis on my amendment. Mr. Mohan Dharia's amendment will not meet the requirements.

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

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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 compromize and it is not wholly accepting that of the integrated course people. When ſ dicussed 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, 1 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) 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 see; that was my feeling.

SHRIA G. KULKARINI. 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 recom nended 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 Ashtang Ayurveda, Siddha or Unani, Tibbi, whether supplemented or not by such modern ad-vances as the Central Council may, from time to time, have determined So, here the Central Council in which I have fixed 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 case 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 was allowed to enter, and that is why there is religious stagnation The House will kindly excuse me. But that is one of the reasons. But here we have accepted a new definition whereby we have kept the scope 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 protection given 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 m my name, in the list of amendments. which is to clause 17 And for the information of the House, I would like to read out 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 States on a practitioner of Indian medicine enrolled on a State Register of Indian Medicine Let me explain.

SHRI S S MARISWAMY Mi Murthy said that he cannot recognise integrated medicine.

SHRI M. M. DHARIA : That I fairly concede, they have not recognised the integrated system of medicine. They have accepted my point of view that for the present Siddha system the present Unani system, there is a vast scope. And modern science also could be attracted. It could be integrated. And because of the acceptance of my definition, every course whether Siddha Ayurveda, Ashtanga Ayurveda, Unani or Siddhu, they become integrated courses. That is my sub-mission. And because the Government has accepted that definition. I am sure that every course in future will be an integrated course. May Ł say with your permission, Sir, in this House that if we allow our systems to develop in that sense, if we keep the door open for modern advancement. I have no doubt that these systems would become more perfect. I have no time. But I can say that there are medicines which I have myself experienced. Take, for instance, the Suddha Sekhar from Ayurveda. For acidity Suddha Sekhar is the best medicine, for headache Aspro or Anacin is the best

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) . You can multiply.

SHRI M. M. DHARIA : So, if these people tomorrow accept the course, it will be better. There is no harm in taking Aspro 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 V CE-CHAIRMAN (SHRI AKABAR (LI KHAN) : Has your amendment been accepted?

SHRI M M DHARIA : It is going to be accepted. In principle it is accepted. It is going to be moved. It is ture 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 Scheduels will be dominated by people who are integrated course practitioners and therefore 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 because there are some other representatives of the Goven ment also and the Government shall have to take a rational view. Therefore, my appeal to the House would be to accept my emendment.

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

> "Inch ding the right to practise any system of madicine" 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, syuryeda and unani. So this is no system.

THE VICE-CHAJRMAN (SHRI AKBAR ALL 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 M 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 perfrectly carried in my amendment, I have no doubt whatsover. SHRI M V. BHADRAM : How?

to Questions

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 the all 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 ANSAR1 : Still I want to elucidate it

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

श्वी ह्यातुल्ला ग्रन्सारी : मै यह कहता चाहता हू कि ऐसा माल्म होता है धारिया जी की दलील से कि दो सिस्टम मुल्क में चल रहे है. एक है ग्रनइन्टीप्रेटेड ग्रौर दूसरा इन्टीग्रेटेड । तो मै कहना चाहता हं ग्रन-इन्टीग्रेटेड सिस्सटम कही इडिया मे नहीं है। चाडे युनानी हो, चाढ़े ग्रायुर्वेदिक हो, जिनने भी गवर्नमेंट संचिम से वैद्य ग्राते है ग्रौर युनानी मानने वाले ग्राते है, उन सबसे कहा जाता है कि चेचक का टीका लगाग्रो, उन सबसे कहा जाता है कि चेचक का टीका लगाग्रो, उन सबसे कहा जाता है कि डनाक्युलेशन कालरा का दो. उन सबसे कहा जाता है कि प्लेग का टीका लगाग्रो, वे सब डी० डी० टी० फि्लट यूज वरते है, ग्रापरेशन के वक्त डाक्टर को बुलाते है ताकि एनीस्थीशिया दी जा सके । इसके साथ-साथ तमाम जर्मीसाइड यूज करते है, दबाए मगाते है, स्पिरिट उनके यहा रहती है, इंजेक्शन

[श्री हयातुल्या अन्मारी]

भी लगा देते है और बहुत से लोग पेमिलिन भी लगाते है, क्यूनेन तो बहुत ग्राम चीज है । इम टाइप की चीजे बहुत युज होती है । ग्रनडन्टीग्रेटेड सिस्टम सिवाय उन नोगो के जो एवव 70 है कही तहीं पाया जाता । इंढ्रेन जाण्गे तो पीम ग्राफ म्यूजियम की तरह मिल जाण्गे ग्रीर कही नहीं मिलेगा ।

लांग बाते करते है कि ग्रायुर्वेदिक को रिसर्च मिलनी चाहिए, यूनानी को रिसर्च मिलनी चाहिए । सबमें बडी खुशनसीबी यह है कि इन दोनो सिस्टमो को रिसर्च का मौका नहीं मिला । ग्रगर रिसर्च का मौका मिला होता, तो यूनानी में क्या ब्लड प्रेसर नहीं निकलता, प्रायुर्वेदिक मे क्या ब्लड प्रेशर नहीं निकलता ? पहले दिक मानने थे, टी० बी० मानते थे, ग्रगर यूनानी वाले रिसर्च करे तो क्या वह स्नोफीलिया नहीं निकलेगा ।

श्रीमान सिंह बर्मा (उत्तर प्रदेश)। ब्लड प्रेशर की सबसे बडी दवा

(Interruption)

श्री हयातुल्ला अन्सारी : ब्लड प्रेणर कही आयुर्वेद मे नही है। तो दो साइन्स नही बन सकती । आयुर्वेदिक और तिब वाले एक तो यह कहते है कि साइन्स ने वर्क किया है एलोपैथी पर, इसलिए एलोपैथी बिलकुल बेकार है, हमारे दादा, वाबा ने काम किया था, बडे-बडे सन्तो ने काम किया था, बड़े-बडे बुजुर्सों ने दवाइयां निकाली थी, साइन्स की दवाइया बिलकुल बेकार है । दूसरी तरफ कहते है कि रिसचं होनी चाहिए आयुर्वेदिक मे, यूनानी मे, इनमे भी साइन्स लगे । पहले कहते है कि साइन्स बेकार है और फिर बाद मे कहते है कि माइन्स लगे ।

श्री मान सिंह वर्माः कौन कहता हे ?

श्री हयातुल्ला ग्रन्सारी : दोनों में कोई ऐसा नहीं मिलेगा, जिससे दम मिनट बात करों तो पहले पाच मिनट तक वह यह न कहे साइन्स बेकार है ग्रौर बाकी पाच मिनट में यह कहे कि इनमें रसर्च होनी चााहिए । मैं यह कहना चाहना हू कि ग्रगर साइन्स लगे युनानी ग्रौर ग्रायुर्वेदिक मे तो बडी मुष्किल यह है कि सब एलोपैथिक बन जाएगे । ग्राज ग्राप दूसरी एनाटोमी नहीं बना मकते, ग्राज ग्राप दूसरी फिजियोलोजी नहीं बना मकते, ग्राज द्रमरी केमिस्ट्री नहीं पैदा कर सकते ।

श्री मान सिंह वर्माः उपसभाध्यक्ष जी, ग्राप मुझको भी मौका दीजिएगा ।

श्वी हयातुल्ला ग्रन्सारी : ग्राप बीच में बोल रहे हैं, दो ग्रादमी साथ-साथ नही बोल सकते । एक बात में कह

कर के खत्म कर देता हू और वह यह है कि न यूनानी के खिलाफ हू, न आधुर्वे दिक के खिलाफ हू, बर्रिक मै चाहता हूं कि दोनो बढ़े, नरवकी करे और उन के अच्छे-अच्छे जो हिग्से है वे हमको मिल जाये । यह मै समझता हू, लेकिन मे यह भी ममझता हू कि दो साइग्से नही बन सकती है, दो फिजिक्स नहीं बन सकती, दो के सिग्ट्री नहीं बन सकती, इसलिए, ऐसा जो अनडाटी ग्रेटेड सिस्टम है, जहा तक मै जानता हू कम से कम इडिया में इस बक्त पाया नहीं जाना ।

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

SHRIA.G.KULKARNI (Maharashtra) : No, 1 do not want to speak.

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

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

श्वी मान सिंह वर्माः उनका कॉई ग्रमेडमेट नही था, लेकिन ग्रापने उनको टाइम दिया इसलिए हमे 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 : श्रीमन, मुझे केवल यह कहना है कि माननीय यन्सारी जी ने जो बात कही है उनके कथन में थोड़ी गलनफहमी है। कोई भी ग्राय्वेंद वाला यह नहीं कहता है कि एलोपैथी कोई साइन्म नही है, कोई भी नित्र्व या यनानी वाला यह नही कहना है कि एलोपैथी कोई साइन्स नहीं है अपने-अपने रथान पर सब माइन्से है। मेरा यह कहना है कि ग्रायवेंद भी साइन्स है, एक मुल विज्ञान है ग्रौर उस विज्ञान को बढाने के लिये ग्राज तक प्रयास नहीं किया गया है। अभी उन्होंने माना है कि दो साइन्से नहीं चल सकतीं। ठीक है, मेरा भी ऐसा कहना है कि एक दूकान पर सारी चीजे नहीं विक सकती, उनके लिये ग्रलग-ग्रलग टुकानें होती है । तो यह जनरल मर्चेडाइज की दूकान नही होनी चाहिये । यहां पर यही हो सकता है कि म्रायुर्वेद ग्रपने स्थान पर तरक्की करे, युनानी ग्रपने स्थान पर तरक्की करे और एलांपैथी ग्रपने स्थान पर तरक्की करे ।

THE VICE-CHAIRMAN (SHRI AKBAR ALI 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 /ICE-CHAIRMAN (SHRI AKBAR All KHAN) : Have you got anything to say Mr. Murthy?

SHRI B. S. MURTHY : No, Sir.

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

3. "That t page 4,—

(i) ir line 3 for the figure '2' the figures and brackets '2(1)' be substituted; and

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

(2) Any reference in this Act to a law which is not in force in the State of Jammu and Kashmir shall, in relation to that State, be construed as a ref-rence to the corresponding law, if any, in force in that State ".

The motion was adopted

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

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 '

The motion was negatived

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

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

Explana ion.—Integrated system of For text medicine neans and includes conjoint 208 supra.

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

The motion was negatived

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

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

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

The motion was nagatived.

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

(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."

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. 207 and 208 supra.

[RAJYA SABHA] to a matter of urgent 220 219 Calling Attention

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 parctical experience in respect of each branch of Indian medicine and enrolled on any State Register' be substituted.

SHRI K P. MALLIKARJUNDU 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 provisio 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, amend-ment No. 22 is to the sub-clause concerning the coostitution of the Central Council and its committees. Sub-clause (c) says :---

"Such number of members, not excceding 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 spe cial knowledge or practical experience in respect of Indian medicine :'

Clause 3-Constitution of Central Council. Here the Government can nominate anybody as stated above. Now my amend-ment is for the words "be nominated by the Central Government, from amongst persons having special knowledge or practical experience in respect of Indian medi-cine :", 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 from amongest themselves by persons enrolled onthat Register as practitioners of Ayurveda, Siddha or Unani, as the case 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 education. My amendment is only to restrict quacks being nominated to the Council

SHRI K. P. MALLIKARJUNUDU 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 बौधरी वाइस चयरमैन मर, मेरा ग्रमेन्डमेन्ट एक विलकुल सीधा ′ॄग्रमेन्डमेन्ट है । इम बिल के चैंप्टर 2 में जो सैक्शन 3 है, उसमे कास्टीट्य्शन श्राफ द सेन्टल कौसिल का प्राविधान किया[[]गया है । मेरा ग्रमेन्डमेन्ट बहुत सिम्पल सा है, जहां पर यह प्राविजन है कि किन-किन मेम्बरो को इसमे रखा जायेगा, जिसमे गवर्नमेन्ट को पावर है नामिनेशन 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 Scheul-Tribes members who are practising ed in the Ayurveda, Siddha, Unani or Homoeopathy systems of medicine.'

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मैं यह अमेन्डभट इसलिये चाहना ह कि मैने अभी सरकार की दुरदेशों की जात कही थी कि सरकार कितनी दरदेश है। जब नभी किसी कानन में कोई एक रपेस्फिक प्राविजन नहीं होता है, णेडयल्ड कास्ट ग्रौर णेडयल्ड टाइब्स के लिये ते श्रीमन, वहां सरकार दुरदेशी नही करती, उनमे से कोई काबिल ग्रादमी सरकार को नही मिलता। मै ग्रामको मिसाल द. बैक नेशनलाइजेशन के समय भी मैने यही कहा था कि ग्राप विधान बना दे कि जिस वक डाइरेक्टर्स की नियक्ति होगी, उसमे शेड्युल्ड कास्ट और शेडयल्ड ट्राइब्म के स्रादमी भी लिये जाये। मै जानता ह उसमे नही लिये गये। श्रीमन, मै यह भी जानता हू कि ग्राज देश में सेन्टर की यान-वसिटीज चल रही है ग्रौर युनिवसिटीज में शेड्यूल्ड कास्ट और ग्रेडयच्ड टाइव्स के स्नादमी एक्जीक्यटिव कौसिल में नहीं लिये जाने जब कि जो छाब पढते है, ! ग्रध्यापक है, वे भा झेड्युरुड कास्ट के नही है। इसलिये मै कहना चाहता हं गरकार दुरदेश नही है । कृपया मरकार शेडयल्ड कास्ट ग्रौर शेडयल्ड ट्राइब्स के लिये कानन मे प्रावधान करे ताकि ग्रापको याद तो रहे। इसलिये मै मान-नीय मंबी जी में यह चाहगा कि हमारे इस अमेडमेट को मान ले जिससे िः जेडयुल्ड कास्ट ग्रौर जेडयुल्ड टाइट्स के गिरे हुए लो । को भी इस कौमिल में स्प्रिजेन्टेशन मिल सके।

THE VICE-CHAIRMAN (SHR1 AKBAR ALL 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 hav- | ALI KHAN) : The question is : ing special knowledge - or practical ex-perience is 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

The motion was negatived.

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

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

(SHR1 VICE-CHAIRMAN THE AKBAR ALI KHAN) : I like him by i that name.

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

THE VICE-CHAIRMAN (SHR1 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** (SHR1 AKBAR ALI KHAN) : The question 15

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' the word 'Integrated' be inserted."

The motion was negatived.

THE VICE-CHAIRMAN (SHRI AKBAR

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 e 20, the following further proviso be sented, 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 ie practising in the Ayurveda, Siddha, Unani or Homoeopathy systems of medicine."

The motion was negatived.

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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, 1 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.

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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 spoiled.

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 educational qualification. The other the qualification is related to the State. One is to be registered in the State Register So, [•]and' and is to reside in the State 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. To-morrow, if somebody goes to the court and gets it quashed, then ?

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

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

(Interruptions)

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

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

SHRI M. N. KAUL (Nominated) : Comma is 1 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 means that he must be on the State Register, 1 don't think there is any harm whatsoever in accepting my suggestion.

SHRI M V. BHADRAM : In view of Mr. Dharia's explanation, I agree with him and seek the permission of the House to withdraw my amendment to support his amendment

SHRI K P. MALLIKARUJUNUDU: Sir, I am also a lawyer and I know something of law. Of course Mr. Dharia read out the clause. Our amendment is instead of 'or' there should be 'and'. This will make it readable.

(Interruptions)

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

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : You accept it ?

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

SHRIK. K. SHAH : At least as a lawyer and as a fr.end who knows English much better, I may say that throughout our lives, we have said when there are two sentences or two qualifications 'and' is added in the 11 RSS 70-8. last and all of them are followed by commas. This is something which is common English.

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

THE VICE-CHAIRMAN (SHRIAKBAR ALI 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 ALI 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, namly :

"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

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[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 wos 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 inserted." 35. "That at page 7,-

- (i) in line 1, after the word 'Ayurveda' the word 'Integrated' be inserted; and
- (*ii*) in line 7, after the word 'Ayurveda' the word 'Integrated' be inserted."

SHRI K. P. MALLIKARJUNUDU : I move :

36. "That at page 7,---

(*i*) 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

(*ii*) 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 figures that he quoted so far as the number of Ayurvedic practitioners and the practi-tioners 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 represen-tation 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.

^{*}For text of amendment, vide col. 226 supra.

I also move :

SHRI M M. DHARIA : Mr. Vice-Chairman, Nir, 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 he present system themselves, and because of their registration at the State level they can have their dominant voice. So herefore there can be a real integrated course in all the systems and that way it may open up its gates for all the systems hat exist in the country today. But so far (s the fate of the present practitioners in tl e 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 o 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 a demand for it.

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

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

SHRI M. V. BHADRAM : This Clause 9 contemplates to constitute separate Committees, one 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 Avurveda 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 amend-ment 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 quarel with the figure. But Mr. Murthy says that out of the 40,000 prac-titioners 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 lict, can the Minister assure

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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 Councul ?

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 func-tions 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 practi-tioners 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 by 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 acceept.

*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. XXIII 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 four years experience after that. Everybody can become a doctor.

SHRIMATI PURABI MUKHOPADH-YAY (West Bengal) : Before the Minister replies to this point, may 1 be allowed to make one submission ? THE VIC E-CHAIRMAN (SHRI AKBAR ALI KHAN) : No, no. We are at the last stage.

SHRIMATI PURABI MUKHOPADH-YAY : O this clause.

THE VIC \exists -CHAIRMAN (SHRI AKBAR ALI KHAN) : He has already replied. I will give /ou opportunity on some other clause.

SHRIMATI PURABI MUKHOPA-DHYAY : This is a very important clause.

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

SHRIMATI PURABI MUKHOPA-DHYAY: Before the Minister either agrees or disagree. 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 Hoinoeopathy, 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 educa ion in some institution. The hazards from those medicines are so very dangerous. It may save the life for the moment, bt it has its after-effect. So some sort constitutional education should be made compulsory.

SHRI B. S. MURTHY : When I said I would not accept Mr. Bhadram's amendment. I winted to save the time of the House. What is being done today is we are now creating a Central Council to regulate the future medical education and practice in higherous 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....

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SHRI M. V. BHADRAM : Do you accept that all the 116 insitutions 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 (SHRIAKBAR 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 MUKHOPADH-YAY : Will you allow anti-biotics and other injections to be given by these Ayurvedic practitioners ?

SHRI B. S. MURTHY : No.

SHRIMATI PURABI MUKHOPADH-YAY : 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 (SHRIAKBAR 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

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[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 PURABI MUKHOPA-DHYAY : 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 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."

The motion was negatived.

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 (SHRIAKBAR 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 :—

(00) 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;

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

(0000) 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."

. इसमे दो वातें मेरा ख्याल है छूट गई हैं। एक तो यह है कि उसकी इनकम कहां से होगी, प्राइवेट इनकम होगी या सब कुछ गवर्नमेंट देगी, बजट वना सकेगी या नही बना सकेगी। ये दोनो बाते मैंने इममें बताई है। यह बहुत बड़ी बात है। पार्लियामेंट मे सबसे बड़ा सवाल होता है कि इनकम कहां से होगी, बजट कौन बनाएगा। इतनी बड़ी ची जे छोड़ दी गई, इनका मैशन कर देना जरूरी था। इनकम के लिए दो बातें बताई गई हैं। 'ग्रो' में कहा गया है ---

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

ग्रपोल्स 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 शायद दो ज़ार सालाना ग्रामदनी होगी।

श्री शोलभद्र याजी : ं बूद-बूद करके तालाब भरता है ।

श्री हयातुल्ला अन्सारी : अगर किसी का डिप्लोमा छीन लिया गना हो तो वह ग्रपील करे और इसी तरह की छोटी-छोर्ट' बाते है जिनसे दो हजार से ज्यादा इनकम नही होगी। जंलोग प्रेक्टीशनर हैं, जो रजिस्ट्रेशन करना चाहते हैं तो असके लिए फीस होनी चाहिए । उससे ग्रपनी इनकम भी कौसिल की हो जायगी । यह मैंने बढ़ा दिया है ।

दूसरी बान कि बजट भी बना सकती है, यह कही मेशन नही है । यह कह दिया गया है कि वह अपने प्रेसिडेन्ट, वा स-प्रेसिडेन्ट, रजिस्ट्रार, इस्पेक्टर के लिए सेलरी बनाएगी लेकिन कम्पलीट बजट होना चाहिए जिमसे हम जां। कर सकें।

एक बात और खास तौर से मेशन करना चाहता हं ग्रौर वह यह है कि जब ग्रान्ध बना था तो तेलंगाना के लिए बड़े-ब वादे किए गए थे कि यह करेगे, वह करेगे, लेकिन दप-बारह साल गुजर गए, कुछ नही किया गया। इसलिए थोडा मेंशन इसमें भी होना चाहिए, ऐसा न हो कि आन्द्र और तेलगाना जैसी हालत यहा भी हो जाय । इसलिए एक ग्राइटम मैं ने बढा दिया है ग्रीर वह यह ग 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 sistem of Indian medicine."

इसमें 25 प : सेट छोड दीजिये, इधर जाय या उधर जाय इम लिये कि हम देख चुके है कि हिन्दुस्तान मे प्राव्लम बट्त ज्यादा डीप है, बहुत गहरी हैं, हर एक भखा है, हर एव को पैसे की जरूरत होती है इस लिये हर कोई चाहत है कि सारा पैसा हम ही खा जाय । यही पेश ग्राया है आन्ध्र में, तेलगाना मे और कही ! *For text of amendment, vide col. 236 supra.

ऐसा न हो कि इसमें भी जिस के मेम्बर ज्यादा हों वही ज्यादा खा जाय । तो मै अपील करता हं कि 25 परसेंट उनको मिलना चाहिये। अगर ऐसा नहीं किया गया तो बहुत से सिस्टम जो कमजोर है, जिन के ग्रादमी कम है, वे घबडा जायेंगे, परेेशान हो जायंगे । इस लिये मैं गवर्नमेंट से ग्रपील करता ह कि वह इन तीनों बातों को मान ले। यह ठीक है कि बिला इन्कम के कोई पार्टी चल नही सकती, कोई ग्रजुमन चल नहीं सकती, लेकिन बिला वजट बनाये कोई चीज जज नहीं हो सकती। तीसरी बात यह है कि आयुर्वेंद से कोई प्रोपोर्शन रहना चाहिये। तो ये जो तीन बातें मैने कही है उनको गवनंमेट 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."

52. "That at page 18, in re-numbered item 31, under column 2, for the words 'Netra Vaidya-Visharada' the following be substituted, namely :--'Netra Vaidya-Visharada Vaidyakalanidhi'.'' adopt ed. 53. "That at page 20, after re-numbered item 81, the following be inserted, namelv :-'82. State Faculty of Ayurvedic Medicine, Orissa. Ayurvedacharya B.S.A.M. From 1969 onwards." 54. "That at page 23,---(i) item 109 and all entries relat-The ing thereto be deleted; the Bill. (ii) items 110 to 116 be re-numbered as 109 to 115, respectively; (iii) in re-numbered item 111,-(a) under column 3, for the letters 'M.A.S.M.' the letters 'M.A.S.F.', be substituted; 2 ted. (b) under columns 2 and 3, the word and letters 'Pranach-arya' F.A.S.F.' be inserted." adopted. 55. "That at page 24, under Part II-Unani,--(i) in item 4, under column 4, for the existing entries, the following be substituted, namely :-'From 1958 to 1963. From 1956 to 1963." (*ii*) in items 5 and 6, under column 4, for the figure '1956' wherever, occurring, the figure '1958' be substituted." Bill. (*iii*) 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 : amended. "That the Second Schedule, as amended, stand part of the Bill.'

The motion was adopted.

[Shri B. S. Murthy]

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 I-Ayurveda and Siddha',

the following be inserted, namely :--

•3.	Manmohan Chatuspatı, Dacca.	Ayurved- shastri Ayurved- ratna	1920— 1940.`"
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The question was put and the motion was adopted.

THE VICE-CHAIRMAN (SHRI AKBAR ALL 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 :

1. "That at page 3, line 1, for the word 'Twentieth' the word 'Twentyfirst' 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 part of the Bill."

The motion was adopted.

The Enacting Formula, as amended was added to the Bill.

The Title was added to the Bill.

SHRI B. S. MURTHY : Sir, I move : "That the Bill, as amended, be passed."

The question was proposed.

SHRI M. V. BHADRAM : Sir, I have one point to make. The State Governments under the Drugs Act permit various practitioner; 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 honour ble 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 vaidy as 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 not be used now that the Central Council is coming it to being. If anybody misuses his degree o whatever it may be, the matter should be referred to the Council. The Governmen should not take any unilateral action to exclude anybody or advise any Government 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 sustain Van could talk to him with 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 d scussed. 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 1

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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 sys-tem 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 fermination 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 सिर्फ गवर्नमेंट से इस बात की प्रार्थना करूंगा कि जो ग्रायवेंद मिस्टम है उसका जो ग्रसली सिद्धांत है उसकी तरफ पूरी तवज्जह रखी जाय, मसलन जैसे कि पहला सिद्धांत ग्रायुर्वेद 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 ग्रोर काफी ध्यान देने की ग्रावश्यकता है। मैंने कूछ थोड़ा सा स्रायुर्वेद का ग्रध्ययन सन् १९१३ में किया था। मैंने उस वक्त देखा था, उसमें यह बताया गया था कि रस, बीर्य ग्रीर विपाक क्या होता है, यानी हम जब किसी औषधि को लेते है तो वह जब हमारे स्टमक मे, पेट मे, जाता है तो उसका क्या ग्रसर होता है, विपाक का क्या ग्रसर होता है, रम का क्या ग्रसर होता है। इसका मतलब यह है कि इम प्रक्रिया में जितनी स्टेजेज होती हैं उनके बारे में जानकारी किसी भी प्रकार से ली जानी चाहिये क्योंकि आयुर्वेद के संबंध में जो मौजूदा ग्रंथ है उनमें कही भी यह बात नहीं मालम की जा सकती कि जिससे यह मालुम हो सके कि इस प्रकार की व्याख्या जो ग्रौपधियों के बारे में की गई है, किस स्टेज पर क्या गुण होता है या ग्रसर होता है, उसके बारे में संभव है कुछ निघंटू तैयार हो तब वह जानकारी प्राप्त हो सकती है, या कदाचित उन्होंने ग्रपने ग्रनभव से ऐसी बात लिखी हो। तो मैं समझता हूं, इस बारे में रिसर्च ग्रवश्य होनी चाहिये कि जो दवायां के, ग्रीपधियों के कही-कहीं इस प्रकार से उपयोग बनाये गये है, हर एक स्टेज पर उसके गुण बताये गये है, उसके बारे में पहले क्या पद्धति थी या ग्रब क्या पद्धति है उसके बारे में खोज होनी चाहिये।

दूसरी बात, जैसे हर एक प्रौषधि के बारे में यह बताया जाता है कि उसकी जड का यह असर होगा, उसके तने का यह ग्रमर हांगा, उसके पत्ते का यह ग्रसर होगा, उसके फुल का यह अमर होगा, इस बारे मे भी मेरा खयाल है कि कुछ रिसर्च होना ग्रावण्यक है । तो मेरी अर्ज यह है कि जब इस प्रकार से बहुत मुद्दत के बाद, बहुत इंतजार के बाद, यह बिल ग्राया है, तो मैं ममझता ह गवर्नमेंट इस ओर ध्यान देगी और जैसी जैसी प्रणालियां है उनके निस्बत 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 contri-buted 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 Central 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 who 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 under-stand 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 हवातूल्ला ग्रन्सारी : जनाब वाइस चेयरमैन साहब, डिबेट में तब से सुन रहा हं। मुनते-सुनते इन्फी-रियारिटी काम्प्लेक्स बैहद पैदा हो गया है क्योंकि जो लोग बोले है उनकी लाजिक पर मैं यहां से टैक्सी पर जाऊंगा वह भी वैस्टर्न है, जब मै घर पहुंचुंगा बिजली का बटन दबाउंगा वह भी वैस्टर्न है । यह बहुत अफसोस है । मैं साइन्स ग्रौर नालेज को न वेस्टर्न ममझता हं न ईस्टर्न समझता हूं। जिसने रेल का इंजन बनाया बहुत ग्रच्छा काम किया । मैं समझता हु पहिया न ईजाद हुन्ना होता तो रेखवे नहीं बन सकती थी, अगर आइरन या स्टील न बना होता तो रेल न बनती। नालेज और माइन्म एक काटिन्युग्रग प्रोसेस है । जब से इनसान पैदा हुग्रा है ग्रागे चलता जायेगा, सीखेगा ग्रीर समझेगा । जैसे रेल बन गई तब से ग्राज के दिन एटामिक इनर्जी बन गई ग्रोर यह न हिन्दुस्तान की चीज है ग्रोर न दुनिया में कही ग्रौर की चीज है । नालेज ग्रौर साइन्स में इन्फी-रियारिटी कम्प्लेक्स नही पैदा करना है । म्राज मैं एस्प्रो की गोली खा लेता हूं, मै कैसे वैस्टर्न माने लेता हूं या मैं बोल रहाँ हं तो मै कैसे वैस्टर्न ग्रपने ग्राप को कहता हूं। मै वैस्टर्न तहजीब में दब सकता हूं कि यह कभी मेरी खददारी गवारा नही करेगी । नालेज सारी दुनिया

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

चरक ने अहुत बातें कही है। हम क्यों न समझ लें कि चरक की बातें ग्राज भी चल रही हैं। एस्प्रो चरक की बातो से बना है, ब्लड प्रेशर भी चरक की बातों से बना है, थर्मामीटर भी चरक की बातों से बना है। जिस तरह से एक छोटा बीज बढते-बढ़ते दरख्त बन जाता है और दरख्त बन जाने के बाद उसमें फल आते है, लेकिन अफसोस की बात है कि लोग फल देखते है, जड़ नहीं देखने तन्हा नहीं देखते हैं। न कोई नालेज वैस्टर्न है ग्रौर न कोई ईस्टर्न है । सब का है ग्रौर मारी दूनिया का स्रीर ह्यू मैनिटी का नालेज है। तो बड़े अफसोस की बात है कि इस समय इनफीरियटी कम्प्लेक्स पैदा करने वाले है इस हाउस में मैं बहत ग्रफसोस करता हं कि वैस्टर्न इलाज कराता रहता ह। अगर मैं बिजली के नीचे बैठत" हूं तो क्या वैस्टर्न में बैठूंगा। टैक्सी में बैठूंगा तो वैग्टर्न में बैठूंगा ग्रौर ग्रगर मैं एरोप्लेन में बैठगा या जालगा तो वैस्टर्न में जाऊंगा। यह बात नहीं है। पहिया हिन्दुस्तान में इजाद हुग्रा तो फिर रेल में रह क्या 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 हई, एक प्रोंसेंग बना ग्रौर फिर एक के बाद एक चीज होती रही । वही पहिया , वही छकड़ा जो हमारे यहां बैल खीचता ह, उसमे इंजन लगाया गया जिसमे भाष ग्रा गई। भाग हमारे यहां बनती है। दोनों चीज को जोड़कर रेल ान गई। यह बहुत प्रफसोम की बात है कि ग्रगर में िकल ने डाक्टर बना दिये है, ये हमारे नही है, तो बहुत बड़ी गलती की है। रमन हमने पैदा किया, बोस अमने पैदा किया, खुराना हमने पैदा किया ग्रीर इस तर, से लाखों करोड़ों हम पैदा करने चले जायेगे ग्रीर इस तरह से वैस्टर्न साइन्स को बढ़ाते चले जायेंगे । कैंगैस्ट्री को बढ़ायेंगे, मेडिकल साइन्स को बढायेगे स्रीर किसी पर एसहसान नही करेगे । ये सब चीजें हैं जो दूनिया ने दी है। जब से दुनिया बनी है तब से ये इन्मान ग्रं। र ह्यू मैनीटी की चीजे हैं। मैं बहुत ग्रफसोम करता हूं ग्रीर चाहता हूं कि कम से कम ग्रपने दिल का कुढ़ा निकाल कर फैंक दूं जो वैस्टर्न साइन्स, वैस्टन मेडिकल माइ ५ करके भरा गया है । जब हम एस्प्रो था एनासीन कं⊫गोली खाते है तो हम इस बात का एहसान वैस्टनं का नहं। मानेंगे । यह तो एक प्रोसेस चल रही है ग्रौर बहत '।हले में चल रही है । यह मैं पहली बात कहुगा ।

Council Bill 1968

ग्रब मैं एक दूसरी बात दूर करना चाहता हू कि ग्रीर कहना चाहता हूं कि मैं बराबर कह रहा हूं कि आयर्बेद भी चले और युनानी भी चले। एक प्रोसेस में ये भी चल रहे हैं, ये भी गाड़िया चल रही हैं। ये चीजें है श्रौर चलते चलते कहा पहुंचेंगी । एनाटेमी हम नही छोड़ सकते है चाहे वह वैस्ट की बनाई हो या किसी की बनाई हो । एलोपैथी ग्रौर एनौटमी हम नहीं छोड़ सकते है। फिजियोलोजी हम नही छोड़ सकते है श्रौर हम इसके लिए मजबूर है। डिसेक्शन हम नही छोड़ सकते है क्योंकि हम इसके लिए मजबूर है। मैं समझता हं कि इंडिया में बहत कम डिसेक्शन हुआ है । युनानी मैं बहुत खूब जानता हूं । लाश को चीरना ग्रौर फाइना बहुत गन्दी चीज समझी गई है। यह काम भगी श्रीर चमार कर सकने है हम शरीफ ग्रादमी किसी लाश को कैसे काट सकते हैं । लेकिन जो लाश काटेगा वह देखने के लिए काटेगा और ह्युमैनिटी को सर्व करने के लिए काटेगा। इस चीज को हम नही छोड़ सकते हैं। यह पार्ट है, प्रोसेस है साइन्स का जो दूनिया में इस समय चल रहा है। हमने करोड़ों चीजें दुनिया को दी है ग्रीर करोड़ों चीजें ली है। ग्रब भी दे रहे है ग्रीर ग्रव भी लेंगे।

इसके बाद में एक किस्सा आपको बतलाऊंगा जा म्राजकल हो रहा है। लखनऊ के करीब एक जगह दरिया-बाद है जो करीब 40 मील की दूरी पर है। उसकी पूरी पापुलेणन करीब 20 हजार के है । वहां एक कुए में पानी चल रहा है 100 वर्षों से । उसके बारे में मशहर हो गया कि इस कुए के पानी से जो नहाल, उसकी तमाम बीमारिया दूर हो सकती है ग्रौर नहाना होना चाहिये सन्डे ग्रौर टयजुडे को । इतवार ग्रौर मगल को । अभी भी इस इतवार को जब में चला था तो वहा पर एक लाख मरीज स्राये हुए थे । स्राज दरियाबाद में ला एन्ड ग्रार्डर ग्रीर हाईजीन का प्राबलम हो गया है । एक लाख ग्रादनी शायद मगल को भी ग्राये होगे । तो में पूछना चाहता हू कि यह क्या चीज है। यह पहले दफा नही हुई है, कई दफा इंडिया में हो चुकी है। एक साध महात्मा थे जो घिसकर सीपिया देते थे ग्रीर उडीमा में दो चार लाख ग्रादमी इसको लेने के लिए जमा हो जाने थे। हमारे दोस्त कहते है कि यह भी चीज बहुत ग्रच्छी है, रख लो । लेकिन ग्रफसोस है यह भी हमारे साइन्स का दिमाग है चाहे वह हिन्दुस्तान का हो, चरक का हो या किसी का हो हम उसको टैस्ट करेंगे।

ग्रभी एक साहब ने लैटर टुदी एडिटर लिखा है। उसमें उन्होंने लिखा है कि जो कुंए से निकल रहा है वह सल्फर है। लेकिन यह नही कहा जा सकता है कि वह

247 Recalling Attention [5 AUG. 1970] Notice

सल्फर सन्डे ग्रीर टयूजडे को ही चलगा, हम इस चीज को नहीं मान सकते है। ग्रगर चलेगा तो हमेशा के लिए चलेगा बरना नहीं चलेगा। दूमरी बान यह है कि ग्रगर चलता होता तो इतनी बीमारिया दरियाबाद मे क्यो होर्ना। यहां पर दो हजार साल से ग्राबादी बढ़ी नहीं, हालांकि यह कुया खूब चलता था ग्रौर पीते भी थे लोग ग्रौर नहाते भी थे। उन लोगों के सब बीमारियों होती रहती थी। तो यह प्रेसेस तो चलेगा ही।

मै यह बात कहना चाहता हूं कि न मैं श्रायुर्वेद के खिलाफ हूं ग्रीर न यूनानी के खिलाफ हूं लेकिन मैं आबजे-क्टिव ब्यूह लेना चाहता हू। जो चीज है वह ग्रागे बढ़ेगा। हमारे पास आयुर्वेद और यूनानी मे जो कुछ रह गया है, बहुत मैडिसन्स रह गई है, बहुत उम्दा है, बहुत ग्राला दर्ज की है ग्रीर दुनिया को हमने मैडिसन दी है। मसलन शाल मुगराग्रायल दिया है। शाल मुगराग्रायल दिया जिससे एक हजार साल पहले और दो हजार साल पहले लैप्रोसी का इलाज हुग्रा करना था।

6 P. M. लिप्रांर्सा के लिए शाल मुगरा प्रायल के अलावा दा हजार साल पहले तक कोई दवा नही रही । सपेंटीना

दो हजार साल पहल तक काइ दवा नहा रहा। सपटाना हिन्दुस्तान से मिली जो पागलपन का इलाज रही है। तो कहने का मतलब यह है कि हम दोनों में फर्क नही बर सकते, वाटर-टाइट कप्पाटंमेट नही बना सकते कि यहां पर इंडियन मैडिसिन खत्म होती है झौर यहा पर बैस्टन मेडिकसिन शुरू होती है, दोनो चलेगी और जो हीरे, जवाहरात यूनानी और आयूर्वेदिक मे है उन्हे हम लेंगे श्रूकेमिस्ट्री और इन हीरे-जवाहरात से हिन्दुस्तान को ही नही बल्कि सारी दुनिया को फोयदा होगा।

श्री शोलभद्र धार्जी : माननीय वाइस चेयरमैन महांदय, सयुक्त प्रवर समिति की घोर से मैं सभी मेम्बरों को धन्यवाद दे रहा हूं कि उन्होंने इस बहस मे भाग लिया । जो उससे रिपोर्ट निकली घौर भारतीय पढति के इलाज ग्रीर उसको दवायो का सरकार ने जो इस बिधेयक के रूप में स्वीकार किया है उसके लिए मैं सरकार को भी शाबाशी देता हूं, धन्यवाद देता हूं । इन शब्दों के साथ मैं इस विधेयक की ताईद करता हूं ।

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

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

SHRI B. S. MURIHY : ... getting 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 B. 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-lla in India. To-day a new chapter is beginning when the Cindrella will herself become the mother once again, of all systems of medicine wherever they areno East, no West, no North and no South and see that India once again leads as the best in the medical field 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, Shri Shah, I got this opportunity to get my life's ambition fulfilled and my dream realised.

THE VICE-CHAIRMAN (SHRI AKBAR ALI KHAN) : 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 Bill, as amended, be passed."

The motion was adopted.

The Bill, as amended, was passed

REFERENCE TO CALLING ATTEN-TION NOTICE ON STATEHOOD FOR / MANIPUR-contd.

SHRI BHUPESH GUPTA : I understand that the Calling Attention on Manipur will be taken up in the other House tomorrow. 1 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