## **NEWS / HEALTH**

# The new act to promote homeopathy may fall short in regulating malpractice

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A closeup of a vial of a homeopathic medicine distributed by Aam Aadmi Party workers at Kasturba Niketan at Lajpat Nagar in Delhi on 6 July 2020. BIPLOV BHUYAN/HINDUSTAN TIMES/GETTY IMAGES

On 22 September, President Ram Nath Kovind signed the National Commission for Homeopathy Act, 2020. The <a href="mailto:act">act</a> (<a href="https://www.livelaw.in/pdf\_upload/pdf\_upload-381801.pdf">https://www.livelaw.in/pdf\_upload/pdf\_upload-381801.pdf</a>) aims to standardise homeopathy education and practice in India and promote national-health goals. However, the act makes no substantive moves to check malpractice already rampant in alternative medicine in India.

The act's preamble lays out goals of making homeopathy "accessible and affordable to all citizens," while promoting "equitable and universal healthcare that encourages community health perspective." A report (https://www.prsindia.org/sites/default/files/bill\_files/SCR-%20National%20Commission%20for%20Homoeopathy%20Bill%2C%202019.pdf) the bill by the parliamentary standing committee on health and family welfare, as well as comments from state governments and AYUSH associations from different parts of the country, also said more

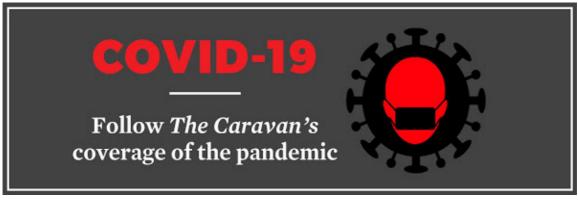
specifically that the new act should popularise homeopathy, make the services of homeopathy accessible in rural and tribal areas, and make up for shortages of healthcare staff. But public-health observers have pointed out that traditional systems of medicine do not need promotion in India but need to be regulated—which the act does not have adequate provisions to do.

The act repealed the Central Council for Homeopathy Act, 1973, which had set up an elected council that was the sole statutory body responsible for regulating homeopathy education and practice in India. The council also had the power to approve new and upcoming homeopathy-education institutions. Besides the new homeopathy act, the government also secured passage of the National Commission for Indian System of Medicine Act, 2020—which aims to regulate the education and practice of indigenous medical systems, mainly ayurveda—during the monsoon session of parliament.

These new legislations are in line with the Modi government's overall promotion of alternative medicine systems under its ministry of AYUSH—ayurveda, yoga, unani, siddha, homeopathy. However, according to some public-health experts, such promotion is quite unnecessary. "In India, AYUSH medication is already a part of our lifestyle," Amulya Nidhi, a national co-convener of the Jan Swasthya Abhiyan, said. "We don't need laws to place our faith in traditional medicine, it's just a part of our lived experience."

India has a long-standing and severe shortage of qualified medical practitioners. According to official <u>data</u> (<a href="https://pqars.nic.in/annex/250/AU1677.pdf">https://pqars.nic.in/annex/250/AU1677.pdf</a>), it has only one doctor qualified in modern medicine for every 1,456 people. This is much below the ratio of one doctor for every 1,000 people that the World Health Organisation recommends. The government hopes that the homeopathy act will help increase healthcare coverage by bringing homeopathy doctors into the primary-healthcare system. Clause 52 of the bill said that every state government can, "for the purposes of addressing or promoting healthcare in rural areas, take necessary measures to enhance the capacity of the healthcare professionals." The

term "rural area" was removed from the clause before the act was passed. The crux of the idea, however, remained the same: merging homeopathy with mainstream medicine to fortify areas of the country poorly served by its healthcare system.



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Nidhi said that the acute shortage of qualified doctors cannot be remedied by hiring more AYUSH practitioners. "Just because you don't have enough MBBS doctors in rural and remote areas, you want to bring in AYUSH doctors unqualified to prescribe allopathic medicine —how would that work?" He added that, though AYUSH practitioners can certainly supplement primary healthcare services by counselling patients of chronic conditions on lifestyle changes and dietary modifications, they can never truly replace the role fulfilled by physicians practising modern medicine. "Homeopathy cannot provide treatment for acute diseases. It cannot perform the function of a general physician educated in modern medicine."

India's gap in healthcare services has already been filled by people without qualifications offering medical advice and treatments—people colloquially referred to as quacks. Many such practitioners are AYUSH doctors. Some have even enrolled on state registers of homeopaths without any qualifications. According to a 2016 WHO report

(https://www.who.int/hrh/resources/16058health\_workforce\_India.pdf), only 41.8 percent of all homeopathic doctors in India possessed the medical qualifications to legitimately practise homeopathy. In 2017, police arrested (https://www.thenewsminute.com/article/12-years-fake-trained-teacher-registered-homeopath-arrested-quack-65200) a

man from Coimbatore after complaints from his patients. He had no medical training but was registered as a homeopath in the state register and had been prescribing modern medicine to his patients for 12 years.

Proponents of the homeopathy act claim that it will help eliminate such practices. However, it contains several loopholes that indicate otherwise. Clause 34 of the act allows individuals who are already enrolled in state registers of homeopaths to continue their practice even if they do not possess required medical qualifications outlined under the act at the time of its implementation. The clause also ensures the right of a person who has been practising homeopathy for the last five years in a state "to continue to practice in that State in which a State Register of Homoeopathy is not maintained as on the date of commencement of this Act."

Nidhi said that the government should have made sure that existing regulations are implemented and medical malpractice is kept in check instead of bringing in new legislation to promote homeopathy.

Meanwhile, Tim Caulfield, the research director of the Health Law Institute at the University of Alberta, told me over the phone that "governments might make such legislation with the intent to regulate quackery and pseudoscience and reduce harm, but in the long term this only promotes and legitimises quackery."

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In 1996, the Supreme Court heard the case of <u>Poonam Verma</u> (<a href="https://indiankanoon.org/doc/611474/">https://indiankanoon.org/doc/611474/</a>), whose 35-year-old husband, Pramod, died while receiving treatment from a homeopathy practitioner named Ashwin Patel. Patel treated Pramod's fever with modern medication, including strong antibiotics, even though he was not a qualified doctor. In his plea to the court, Patel submitted that "he has undergone an integrated course of study in both the homeopathic and allopathic systems of medicine." The Supreme Court found Patel guilty of medical negligence and concluded that he was responsible for Pramod's death.

The idea of integrating modern and traditional medical systems has been publicly debated in recent years. The government recommended the approach, in a 2017 bill, by suggesting a bridge course to allow AYUSH practitioners to prescribe modern medicines in primary-healthcare centres. Doctors and AYUSH practitioners both criticised the proposal. The final version of the National Medical Commission Act, 2019 made no mention of the bridge course.

The homeopathy act now includes regulations that promote an interdisciplinary approach towards medical education. In fact, Dr Arun Bhasme, the former vice president of the Central Council for Homeopathy who was a part of consultations held by the parliamentary standing committee for the homeopathy act, said that the idea remains entrenched in both the homeopathy act and the National Medical Council Act. "I was there when we were discussing the clause, and it was decided that the idea of enabling AYUSH practitioners to learn modern medicine practice as part of their curriculum remains," he said, referring to Clause 52 of the homeopathy act, which mandates joint sittings between commissions of all medical systems to formulate modules that can be taught across disciplines. "The term bridge course has been discarded but the idea remains the same."

The idea is expressed even in the National Education Policy of 2020. This states that, since people already exercise pluralistic choices while accessing healthcare in India, "our healthcare education system must be integrative meaning thereby that all students of allopathic medical education must have a basic understanding of Ayurveda, Yoga and Naturopathy, Unani, Siddha, and Homeopathy (AYUSH), and vice versa." Furthermore, recent news <a href="report">report</a> (<a href="https://theprint.in/health/govt-wants-to-merge-allopathy-homoeopathy-ayurveda-into-one-health-system-plans-2030-launch/509983/)s claim that the Modi government is planning to launch "One Nation, One Health System" by the end of 2030 to integrate all systems of medicine in India.

According to Ashvini Kumar Dwivedi, a homeopathy practitioner in Indore, the government's attempt to create interdisciplinary medical courses that allow AYUSH practitioners to learn aspects of modern medicine will benefitrecent and aspiring homeopathy graduates. He said that the homeopathy-education system was plagued with low standards and negligent teachers, and needed to be opened to more opportunities. "As the world changes, we need to catch up and modernise our education as well," he added. "We need to integrate modern medicine into our courses so that more young homeopaths can thrive and find gainful employment. If the new act allows for homeopathy doctors to participate in the mainstream through their knowledge in modern medicine, it will benefit not only the doctors themselves, but the patients they are treating."

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Doctors of modern medicine, however, disagree with Dwivedi's opinion on an integrated approach to medical education across alternative systems. The Indian Medical Association, the largest voluntary organisation of doctors in the country, condemned the central government's efforts to integrate all forms of medical practices through the national education policy and the medical-commission act, the two documents on which the homeopathy act is based. The IMA's national president, Rajan Sharma, and its honorary secretary general, RV Asokan, wrote a letter to all the association's branches on 6 October, stating that the government is offering a "cocktail of mixing all systems" that paves the way for legitimising non-qualified medical practitioners. The letter also said that "the nation will only produce hybrid doctors of questionable repute" if the government continues to pass such laws.

Shailaja Chandra, a former secretary in the health ministry who wrote the report "Status of Indian Systems of Medicine and Folk Healing in India" in 2013, had a different view. "However much one tries to be a purist, one has to be conscious of the practical realities that exist in India," she said. The former bureaucrat argued that, along with the paucity of doctors, chemists freely gave medication over the counter

based on a person's symptoms explained orally and consumers were ordering drugs over the internet. In these circumstances, she said, it was reasonable to let AYUSH practitioners with sufficient knowledge of primary healthcare prescribe modern medicine for day-to-day ailments. "Even allopathic doctors concede that these practitioners are quite competent."

Chandra also highlighted the problems that have arisen from poor regulation of alternative medicine. For instance, AYUSH practitioners prescribing antibiotics and high-end drugs indiscriminately has contributed to India's growing problem of antibiotic resistance. Chandra said that there should be clear schedules that outline what AYUSH practitioners can and cannot do in terms of treating ailments using modern medicine.

In September, the central government's planning body NITI Aayog appointed working committees to formulate an integrative health policy. "We are yet to meet and discuss the issue, and I cannot comment on how this will be implemented in the ground," KK Talwar, a former director of the Post Graduate Institute of Medical Education and Research in Chandigarh and a member of the working committee on integrated medical education, told me. "The point remains that the quality of medical services should not be undermined."

Dr Yogesh Jain, a founding member of the Jan Swasthya Sahyog and a member of the working committee for public-health solutions offered by an integrated health system, said that some standard protocols need to be formulated if AYUSH practitioners are allowed to prescribe modern medicines. "This could be a protocol for example to treat a persistent fever in a patient," he told me. "But this is a mechanism that can be followed by paramedical workers like ASHA workers as well, and this is what currently happens in rural areas anyway."

Jain raised the question of how much an AYUSH practitioner could deliver without having a comprehensive knowledge of modern medicine. "Will they be able to diagnose accurately and make the right choices to treat their patients? And if a year of education or a bridge

course in allopathy allows you to gain such knowledge, then why are people doing their degree for five and a half years?" He worried that allowing alternative medicine practitioners to provide primary healthcare in rural areas would only lead to substandard healthcare for the "have nots" or patients with lesser agency. He also said doctors with full medical qualifications would move to urban areas where their practice was more profitable.

The timing of the homeopathy act is also questionable with India having lost over a hundred thousand lives to the COVID-19 pandemic, and homeopathy having no proven role to play in prevention or treatment of infection. The current government, especially the AYUSH ministry, has promoted homeopathy and Indian traditional medicine for acute diseases and infections, even during the current pandemic. In January, the AYUSH ministry issued an advisory (https://pib.gov.in/PressReleasePage.aspx?PRID=1600895)regarding AYUSH formulations for prevention and management of COVID-19. Among its many claims was one that the homeopathy formulation arsenicum album 30 was effective as a prophylactic against the disease and other influenza-like illness. Later, on 4 February, the ministry issued a clarification (https://pib.gov.in/PressReleseDetailm.aspx? PRID=1601815) saying that the advisory issued by the ministry indicates "general precautionary measures to be followed in the context of such viral diseases" and does not offer a cure for the disease. Government officials and local health authorities in various states and cities distributedarsenicum album 30 as preventive medicine. In August, Gujarat's health department claimed that it had distributed the medicine to 34.8 million people—more than half of the state's population—since March. Gujarat currently has the third-highest COVID-19 fatality rate in India, after Punjab and Maharashtra.

"There is no scientific evidence to prove the efficacy of arsenic album 30," Sumaiya Shaikh, a neuroscientist and science editor for the fact-checking website *AltNews*, said. Shaikh has written an article debunking the AYUSH ministry's claim. She highlighted the fact that there were no studies to show that the formulation has a prophylactic

effect in humans, in animals or even ex-vivo or outside the body. Homeopathy preparations can also cause harm if not used properly. A research article

(https://www.tandfonline.com/doi/abs/10.1081/CLT-120026518? scroll=top&needAccess=true&journalCode=ictx19) published in 2003 in the *Journal of Toxicology* states that "Arsenic used therapeutically in homeopathic medicines can cause clinical toxicity if the medications are improperly used." The article presents three case studies of patients who, after two weeks of consuming arsenic-based homeopathic medication, developed side effects including dermatological conditions such as melanotic skin lesions and acute gastrointestinal diseases. Two weeks into consuming arsenic bromide, one of the patients developed quadriparesis, a condition characterised by weakness in all four limbs and caused by damage to the patient's peripheral nerves due to arsenic toxicity.

Dr Abby Philips from the Institute of Liver and Biliary Sciences in Delhi, who has been researching and closely monitoring side effects in alternative ayurveda and homeopathy medicines, told me that no studies have been conducted on the efficacy of arsenicum album 30 for any disease or condition in the past two decades. However, individual cases have been reported. In April 2019, doctors at the BR Singh Hospital and Centre for Medical Education in Kolkata reported (https://www.japi.org/q2c47444/a-reversible-case-of-chronic-arsenicosis-due-to-homeopathy-medicine) the case of a 44-year-old woman who suffered chronic multisystem disorder caused by excessive arsenic consumption from a homeopathy medicine she was taking for an anxiety disorder. "The promotion of such pseudoscience by the government also paves way for spurious drugs to proliferate in the market that can cause dangerous side effects to the person using it," Philips said in an email.

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Shaikh said that the problem was not with India allowing multiple systems of medicine to thrive, but with legitimising medical systems based on dubious science. According to her, traditional Indian systems

of medicine such as ayurveda still have a semi-scientific basis. Homeopathy, she said, was a completely pseudo-scientific practice that has regularly been condemned by the global modern scientific community, as well as health departments of various governments. In 2010, the United Kingdom House of Commons' select committee on science and technology released a <a href="report">report</a>

(https://publications.parliament.uk/pa/cm200910/cmselect/cmsctech/45/4504.htu concluded that "homeopathy products perform no better than placebos" and claimed that the principles of the system were scientifically implausible. Based on the committee's recommendation, the UK government stopped funding homeopathy in the National Health Service in 2017. In July 2019, the French government announced

(https://www.theguardian.com/world/2019/jul/10/france-to-stop-reimbursing-patients-for-homeopathic-treatment) that it would stop reimbursing homeopathic medicine from 2021. Even in Germany, the birthplace of homeopathy, the National Association of Statutory Health Insurance Physicians reportedly <a href="urged">urged</a> (https://www.dw.com/en/german-health-insurers-urged-to-end-homeopathy-refunds/a-49546319) insurers to stop funding homeopathic treatment. "It is okay for homeopathy to thrive in the private sector like it does in many western countries as well," Shaikh said. "But no other country gives the sort of statutory cover and legitimacy that India grants to homeopathy."

Some public-health experts argue that it is unfair to compare India's history of belief in alternative and traditional forms of medicine with the context in which Western countries operate. According to Chandra, the biggest error all central governments formed after India's independence made was to blindly mimic British-era legislation on modern medicine and apply it to alternative forms of medicine. "In trying to promote the Indian systems of medicine and homeopathy, form overtook the substance," she said. "With the passing on of those who had knowledge of and practiced the indigenous systems, we are left with hybrid products who have little faith in their own systems."

Moreover, Chandra pointed out, patients viewed such treatments as highly personal and so these systems did not function on the basis of modern scientific logic. "My view is that there was no need to have set up central councils, none of which had made noteworthy impact," she said. In fact, the central homeopathy council and its members have raised concerns not only for their lack of impact but for irregularities in functioning. The council's former president Ramji Singh was arrested (https://economictimes.indiatimes.com/news/politicsand-nation/cbi-arrests-chief-of-central-council-of-homoeopathyramji-singh-in-bribery-case/articleshow/54998026.cms) under bribery charges in 2016. The health minister, Harsh Vardhan, claimed in his address to the Rajya Sabha in September that the new homeopathy act would improve transparency and curb irregularities and corruption from the governing body. "Instead, there should have been state and regional boards, which fostered the local genius of practitioners in that region and stayed attuned to the health-seeking behaviour of the local people," Chandra said.

Even Bhasme had little hope that the act would bring positive change. "They said this will clean the earlier system of homeopathy, bring transparency, reduce corruption and all that," he said. "But I am not very hopeful, after all people in power will always remain the same—corruptible and inefficient. Public interest will remain forgotten."

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Basudeb Gupta 16 Oct, 2020 Homoeopathy itself is known in the scientific community as a medical malpractice. I think it is pointless to talk about malpractices in this field. Those who study homoeopathy also study or used to study human anatomy etc. If we could just use that knowledge in our ground level medical services, a great void would have been filled. A homoeopath can be a sincere doctor too but they are just handicapped by a non scientific doctrine.

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