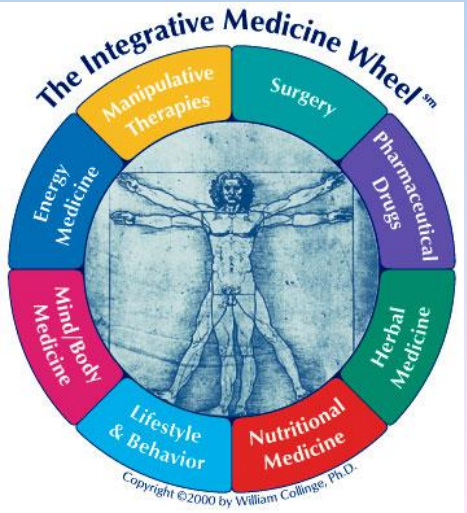
Patients' preference for integrating homeopathy (PPIH) within the standard therapy settings in West Bengal,

The part 1 (PPIH-1) study





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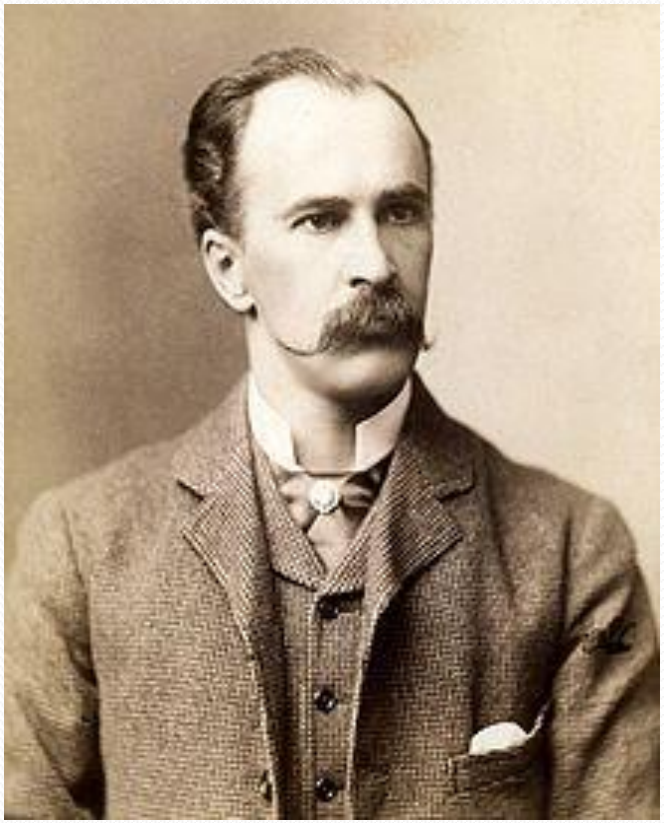
INDIA

Dr. Samuel Christian Frederic Hahnemann (1755-1843)

- He was the founder of Homoeopathy. He established the fundamental principles of the science and art of Homoeopathy.



William Osler
1849 – 1919



"Father of modern medicine"

A great admirer of Samuel Hahnemann and of homeopathy, and he wrote about homeopathy many times.

Osler said '… *Ask not what kind of illness the patient has, ask what kind of patient* has the illness… (Dana Ullman, Disc*overing homeopathy: medicine for the 21st century*, (North Atlantic Books, 1 Jun 1991)

Osler also said '… *No one individual has done more good to the medical profession than Hahnemann*… (Jonathan Davidson, *A Century of Homeopaths: Their Influence on Medicine and Health*, , (Springer 2014).

DATA BASE IN HOMOEOPATHY

- **The CORE-Hom** database has emerged from the need for a publicly available and reliable source of information in the field of homeopathy clinical research.(As of now, the database consists of **1039** clinical trials)
- **http://www.carstens-stiftung.de/core-hom**
- **HomBRex - a database on Basic Research experiments on Homeopathy http://www.carstens-stiftung.de/hombrex**

  (Currently HomBrex contains 1945 experiments published in 1446 original articles.)

Integrative Medicine

Requires a ***paradigm shift*** from

the disease-centered approach of

conventional biomedicine

to

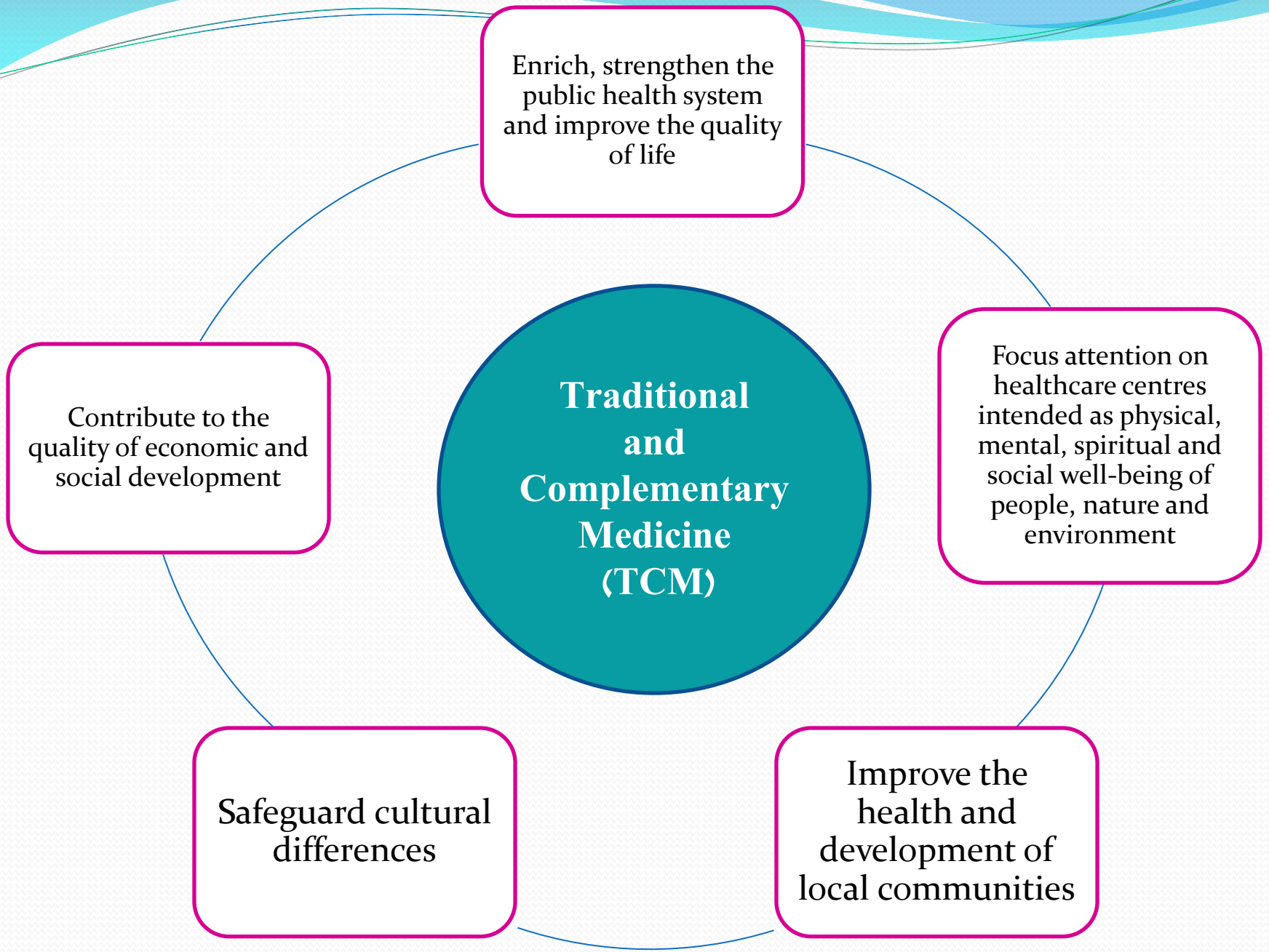
an approach in which patient values and participation of patients are central.

Background

There is lack of studies assessing the preference of Indian patients for integration of homeopathy into standard therapy settings.

Traditional and Complementary Medicine (TCM)

- Has a patient-centred approach and a holistic focus on health care instead of a disease-centred approach of conventional medicine since origin
- Represents a useful and sustainable resource in different fields of health care; but their inclusion in the public health system must go hand in hand with an adequate process of scientific evaluation to control the efficacy, safety and quality of the health services and products


Enrich, strengthen the public health system and improve the quality of life
Focus attention on healthcare centres intended as physical, mental, spiritual and social well-being of people, nature and environment
Improve the health and development of local communities
Safeguard cultural differences
Contribute to the quality of economic and social development
Traditional and Complementary Medicine (TCM)

In India, the endeavour of mainstreaming TCM, namely ***AYUSH [Ayurveda, Yoga, Unani, Siddha, Homeopathy, and Amchi/Sowa Rigpa (Tibetan medicine)***; renamed in November 2003; previously called ***ISM&H, i.e. Indian System of Medicine and Homeopathy***, created in March 1995 therapies is ongoing through formulation of the National Policy on ISM&H in 2002 and implementation of different schemes, e.g. National (Rural/Urban) Health Mission (N(R/U)HM) since 2005, Homeopathy Specialty Clinics since 2009, Reproductive and Child Health (RCH) and Rashtriya Bal Swasthya Karyakram (RBSK) since 2012, etc.

Establishment of ISM&H dispensaries under the **Central Government Health Scheme (CGHS)** is ongoing since 1964 for ayurveda and since 1967-68 for homeopathy.

The objective of the integration of **AYUSH** in the health care infrastructure was to reinforce the existing public health care delivery system, with the use of natural, safe and friendly remedies, which are time tested, accessible and affordable, and to improve outreach and quality of health delivery in rural areas.



As on **April 1, 2010**, the homeopathy infrastructure of **AYUSH** in the country consisted of **245 hospitals**, 9631 beds, **6958 dispensaries**, and **246772 registered practitioners**.

189 undergraduate (UG) colleges with 12371 intake capacity, 33 postgraduate (PG) colleges with 1073 intake capacity, and 2 exclusive PG colleges with 99 intake capacity.

Scenario of homoeopathy in west bengal

The **infrastructure in West Bengal** consisted of 12 hospitals, 630 beds, 1534 dispensaries, 41079 registered practitioners, 13 UG colleges (4 undertaken by the Govt. of West Bengal, 1 by the Govt. of India, rest private; all under affiliation with the West Bengal University of Health Sciences/WBUHS) with 693 intake capacity, 3 PG colleges (2 run by the Govt. of West Bengal, 1 by the Govt. of India, under WBUHS) with 30 intake capacity, and 105 licensed pharmacies.

The Central Council for Research in Homeopathy (CCRH) also runs one clinical research unit (CRU), and one regional research institute (RRI) in West Bengal.

The growing popularity of TCM resulted in an ongoing debate on integrating such therapies into the mainstream healthcare.
The World Health Organization (WHO) supported incorporation of TCM into national health care systems and stressed integration at the community level to guarantee its judicious use.

REFERENCES:

- *Akerele O. The best of both worlds: bringing traditional medicine up to date.Soc Sci Med. 1987;24:177e181.*
- *Chi C. Integrating traditional medicine into modern health care systems:examining the role of Chinese medicine in Taiwan. Soc Sci Med. 1994;39:307e321.*
- *World Health Organization. Legal status of traditional medicine and complementary/alternative medicine: a worldwide review. http://apps.who.int/medicinedocs/pdf/h2943e/h2943e.pdf; Published 2001; Accessed 01.01.14*

Additional TCM experience gave them flexibility to offer patients different treatment options and alleviated the need to reconcile conflicting theories of disease etiology. Some of the early field-based studies by the WHO in Ghana, Mexico, and Bangladesh to evaluate the effectiveness of CAM practitioners as primary health care workers were shown to be effective. This made the ground for integrating CAM into primary health care.

- Integration of TCM in primary care services was reported in a number of studies from the United States, Germany, Israel, Australia, Italy, and Iran.
- In the Western model of integration, TCM is practiced mostly as specialty that allowed physicians to address body-mind-emotional and spiritual causes of disease.

The study was the first local study to assess patients' demand of integrated medical services.

We intend to assess:

- Preference for integrated services of the patients already availing services from homeopathy hospitals (part 1);
- Satisfaction of patients from integrated services (part 2); and
- Preference for integration where integrated service is not available (part 3).
- This paper presents the results of the part 1 study.

aims & OBJECTIVES

- To examine the knowledge, attitudes &
- Practice of homeopathy among Indian patients already availing homeopathy treatment
- Its integration into mainstream healthcare

METHODS

- A cross-sectional survey was conducted among adult patients attending the out-patients of the four government homeopathic hospitals in West Bengal, India.
- A self-administered 24-items questionnaire in local vernacular Bengali was developed and administered to the patients.
- Permission was granted from the institutional ethics committees of each respective institution prior to conducting the study.
- The study was of 3 months duration – August to October 2014.

Methods

- Systematic sampling method was used to select every 3rd patient as a respondent in each setting.
- Following distribution of patient information sheets and explanation of the study objectives, written informed consents were obtained from all patients.
- The questionnaire was distributed among 1435 patients, of whom, 1352 returned the filled-in questionnaire, and thus response rate was 94.2%.

CRITERIA

Inclusion criteria

- The patients aged 18 years and above,
- Giving written informed consent to take part in the study.

Exclusion criteria

- Patients who were too sick for consultation,
- Unable to read patient information sheets,
- Unwilling to participate,
- Not giving consent to join the survey

Name of the Institutions where the work was primarily carried out

- ***Calcutta Homeopathic Medical College & Hospital, Government of West Bengal***; 265, 266, Acharya Prafulla Chandra Road, Kolkata 700009, West Bengal, India
- ***D N De Homeopathic Medical College & Hospital***; 12, Gobinda Khatick Road, Kolkata 700046, West Bengal, India
- ***Mahesh Bhattacharya Homeopathic Medical College & Hospital***, Government of West Bengal; Drainage Canal Road, Doomurjala, Howrah 711104, West Bengal, India
- ***Midnapore Homeopathic Medical College & Hospital***, Government of West Bengal; Post Office Midnapore, Midnapore (West) 721101, West Bengal, India

ANNEXURE -1

English version of the used questionnaire

Patients' preference for integrating homeopathy (PPIH) within the conventional healthcare settings in West Bengal, India: the part 1 (PPIH-1) study

Instructions:

Kindly answer the following questions, either by filling in the blanks or by tick (√) marking in appropriate boxes –

Age: ..... (years) Sex: Male Female

Marital status: Married Unmarried Divorcee/Separated/Living in etc.

Employment status : Student/Dependent Service Business

Monthly household income: <10,000 10,000 – 30,000 >30,000

Education level: 10th class or less 12th class Graduate or above

Please put tick (√) marks in appropriate boxes:

Knowledge questions	Yes	No	Not sure
1. Can homeopathic medicines be used along with allopathic medicines for treatment in a patient?			
2. Can homeopathic medicines cause side effect?			
3. Can homeopathic medicines interact with other medications?			
4. Is there a license for homeopathic practitioner in Indian system of health?			
5. Is there any law to regulate homeopathic practices in India?			
6. Is there any law to regulate homeopathic practices in developed countries like USA, Canada, and Germany?			
7. Is there any integrative homeopathic consultation within any hospital setting in developed countries?			

Please put tick (√) marks in appropriate boxes:

Attitude questions: Regulations of practicing and safety of homeopathic medicine	Yes	No	Not sure
8. Should homeopathic practitioners have degree in this profession?			
9. Should the homeopathic practitioners be certified and licensed from the Ministry of Health?			
10. Does the production and selling of homeopathic medicines need to be regulated by the government?			
11. Should the homeopathic medicine container have a license and registration number?			
12. Should the homeopathic medicine container be labelled with the expiry date?			
13. Should the homeopathic medicine container have a warning of possible side effect and interaction with other medications?			
14. Should the homeopathic medicine container have a clear note of approval by the Government Drug Control Authority?			
15. Do you think that homeopathic pharmacist can give useful advice to you to use homeopathic medicines?			

Please put tick (√) marks in appropriate boxes:

Attitude questions: preference towards integrated services	**Yes**	**No**	**Not sure**
16. Do you like to visit a licensed and qualified homeopathic practitioner within the allopathic hospital setting?			
17. Would integrating homeopathic practice within allopathic hospital settings make you feel safer to use homeopathic medicines?			
18. Do you think that your allopathic family doctor can monitor your health better if he/she knows what homeopathic medicines you are using and who prescribed it?			
19. Do you want your allopathic family doctor to give you advice about safe use of homeopathic medicines?			

Please put tick (√) marks in appropriate boxes

Practice questions	Yes	No	Not sure
20. Do you use homeopathic medicines in any illness (acute/chronic)?			
21. Do you use homeopathic medicines for your children?			
22. Do you self-prescribe homeopathic medicines for yourself?			
23. Do you ask your allopathic doctor about homeopathic medicines when you want to use them?			
24. Do you ask the homeopathic pharmacist about homeopathic medicines when you want to use them?			

Table 1: Demographic characteristics and distribution of knowledge, attitude, and practice scores (N=1352)

¥ Continuous data presented as mean ± standard deviation and independent *t* test applied; # categorical data presented as N (%) and chi-square test (Yates corrected) applied; **P*<0.05 two-tailed considered as statistically significant

Variables	Overall	Preference for integrating homeopathy		
		Yes	No / Not sure	*P* value
Total responses	1352 (100)	1198 (88.6)	154 (11.4)	-
Age (years) ¥:	39.8 ± 15.6	39.7 ± 15.5	40.5 ± 16.1	0.188
Age groups#:	489 (36.2)	437 (89.4)	52 (10.6)	0.891
▪ 18 – 30	523 (38.7)	464 (88.7)	59 (11.3)	
▪ 31 – 50	308 (22.8)	270 (87.7)	38 (12.3)	
▪ 51 – 70	32 (2.4)	27 (84.4)	5 (15.6)	
▪ ≥ 70				
Sex#:				0.664
▪ Female	702 (51.9)	619 (88.2)	83 (11.8)	
▪ Male	650 (48.1)	579 (89.1)	71 (10.9)	
Marital status#:				0.408
▪ Married	922 (68.3)	819 (88.8)	103 (11.2)	
▪ Unmarried	407 (30.2)	357 (87.7)	50 (12.3)	
▪ Others	20 (1.5)	20 (100)	0 (0)	
Occupation#:				0.066
▪ Student and dependent	555 (43.2)	506 (91.2)	49 (8.8)	
▪ Self-employed	448 (34.9)	394 (87.9)	54 (12.1)	
▪ Service	282 (21.9)	245 (86.9)	37 (13.1)	
Monthly household income (Rs.) #:				0.113
▪ ≤ 10,000	761 (59.0)	667 (87.6)	94 (12.4)	
▪ 10,000 – 30,000	425 (32.9)	388 (91.3)	37 (8.7)	
▪ > 30,000	103 (7.9)	89 (86.4)	14 (13.6)	
Education#:				0.980
▪ 10th standard or less	486 (36.4)	430 (88.5)	56 (11.5)	
▪ 12th standard	357 (26.7)	316 (88.5)	41 (11.5)	
▪ Graduate or above	494 (36.9)	442 (89.5)	52 (10.5)	
Scores ¥:				
▪ Knowledge	2.7 ± 1.5	2.7 ± 1.5	2.3 ± 1.5	0.002*
▪ Attitude toward regulations	5.6 ± 1.6	5.6 ± 1.7	5.0 ± 1.7	0.000*
▪ Attitude toward integration	2.4 ± 1.2	2.6 ± 1.1	1.1 ± 0.9	0.000*
▪ Practice	2.2 ± 1.1	2.2 ± 1.1	2.2 ± 1.1	0.515

Table 2: Patients' knowledge, attitudes, and practice towards integrated healthcare (N=1352)

Questionnaire	Yes	No	Not sure
Knowledge:			
1. Homeopathic medicines may be used along with standard therapy.	541 (40.0)	609 (45.0)	202 (14.9)
2. Homeopathic medicines may cause side effect.	439 (32.5)	913 (67.5)	247 (18.3)
3. Homeopathic medicines may interact with other medications.	180 (13.3)	833 (61.6)	339 (25.1)
4. There is license for homeopathic practitioners in Indian system of health.	1034 (76.5)	82 (6.1)	236 (17.5)
5. There is law to regulate homeopathic practices in India.	821 (60.7)	136 (10.1)	395 (29.2)
6. There is law to regulate homeopathic practices in developed countries like USA, Canada, and Germany.	541 (40.0)	113 (8.4)	698 (51.6)
7. There is integrative homeopathic consultation within hospital settings in developed countries like USA, Canada, and Germany.	339 (25.1)	202 (14.9)	811 (59.9)
Attitude questions: Regulations of practicing and safety of homeopathic medicine			
1. Homeopathic practitioners should have degree in this profession.	1196 (88.5)	38 (2.8)	118 (8.7)
2. The homeopathic practitioners should be certified and licensed from the Ministry of Health.	1103 (81.6)	46 (3.4)	203 (15.0)
3. The production and selling of homeopathic medicines should be regulated by the government.	1140 (84.3)	72 (5.3)	140 (10.4)
4. The homeopathic medicine container should have a license and registration number.	521 (38.5)	478 (35.4)	353 (26.1)
5. The homeopathic medicine container should be labelled with the expiry date.	1118 (82.7)	126 (9.3)	108 (7.9)
6. The homeopathic medicine container should have a warning of possible side effect and interaction with other medications.	987 (73.0)	149 (11.0)	216 (15.9)
7. The homeopathic medicine container should have a clear note of approval by the government drug control authority.	1118 (82.7)	94 (6.9)	140 (10.4)
8. Homeopathic pharmacist can give useful advice regarding use of homeopathic medicines.	344 (25.4)	761 (56.3)	247 (18.3)
Attitude towards integration: Preference for integration of homeopathy within conventional care settings			
1. Would like to visit a licensed and qualified homeopathic practitioner within the allopathic hospital setting.	1198 (88.6)	104 (7.7)	50 (3.7)
2. Integrating homeopathic practice within allopathic hospital would make feel safer to use homeopathic medicines.	795 (58.8)	261 (19.3)	296 (21.9)
3. Allopathic doctors can monitor health better if they know what homeopathic medicines are being used.	628 (46.4)	401 (29.7)	323 (23.9)
4. Allopathic doctors should give advice about safe use of homeopathic medicines.	659 (48.7)	562 (41.6)	131(9.7)
Practice questions			
1. Use homeopathic medicines in any illness (acute/chronic).	922 (68.2)	363 (26.8)	67 (4.9)
2. Use homeopathic medicines for children.	1035 (76.6)	207 (15.3)	110 (8.1)
3. Self-medicate with homeopathic medicines.	213 (15.8)	1055 (78.0)	84 (6.2)
4. Would ask allopathic doctors about homeopathic medicines when wants to use them.	563 (41.6)	659 (48.7)	130 (9.6)
5. Would ask homeopathic pharmacists about homeopathic medicines when wants to use them.	260 (19.2)	917 (67.8)	175 (12.9)

questionnaire	No. of questions	SUBJECTS
The knowledge part	7	• concurrent use of homeopathic medicines with standard therapies, • side effects, • Interactions • local and international governing regulations, and awareness of a Western model of integration.
The Attitude part	12	divided into 2 groups: 8 questions about the regulations and the safety of homeopathic medicine and 4 questions about the preference for integrated services.
The practice part	5	It is about one's experience using homeopathic medicine and its integration

Results

A total of **1352** patients' responses were included in the current analysis.

- 40% patients thought that homeopathic medicines can be used along with standard therapy.

- 32.5% thought that homeopathic medicines might cause side effects, while only 13.3% believed that those might interact with other medications.

- Patients' knowledge ranged between 25.1 and 76.5% regarding regulations of practicing and safety of homeopathic medicine in India and abroad; while positive attitude towards the same ranged between 25.4 and 88.5%.

- 88.6% of the patients had favourable attitude toward integrated services. 68.2% of the patients used homeopathic medicines in any acute or chronic illness for themselves and 76.6% for their children.

- Preference for integrated services was significantly associated with better knowledge (***P*=0.002**), positive attitudes toward safety and regulations (***P*<0.0001**), and integration (***P*<0.0001**), but not with the level of practice (***P*=0.515**).

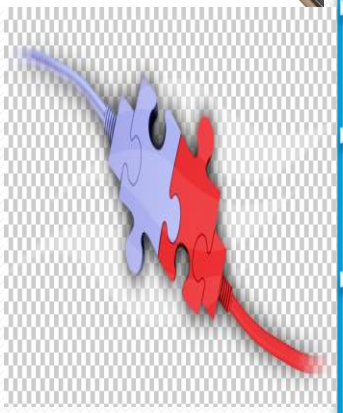
Patients' preference for integrating homeopathy (PPIH) within the conventional healthcare settings in West Bengal, India: the part 1 (PPIH-1) study

Munmun Koley, Subhranil Saha, Jogendra Singh Arya, Gurudev Choubey, Aloke Ghosh, Kaushik Deb Das, Subhasish Ganguly, Samit Dey, Sangita Saha, Rakesh Singh, Kajal Bhattacharyya, Shubhamoy Ghosh, Sk. Swaif Ali

Cross-sectional survey of 3 months on 1352 participants; Four government homeopathy hospitals in West Bengal, India

- 88.6% patients preferred integration of homeopathy into mainstream healthcare
- Mean knowledge score = 2.7; 38.6%
- Mean attitude score towards regulation and safety = 5.6; 70%
- Mean attitude score towards integrated service = 2.4; 60%
- Mean practice score = 2.2; 44%
- Favourable attitude was significantly associated with:
  - ❖ Higher knowledge score
  - ❖ Higher attitude score towards regulation and safety
  - ❖ Higher attitude score towards integrated service





Mainstreaming initiatives already taken by the Government of India

- National Rural Health Mission (NRHM)
- Reproductive Child Health (RCH) program / Rashtriya Bal Suraksha Karyakram (RBSK)
- Homeopathy Specialty Clinics (HSCs)
- State Homeopathy Dispensaries (SHDs)
- Gram Panchayet Homeopathy Dispensaries (GPHDs)
- Homeopathy Wings

DISCUSSION

Majority of the patients revealed favourable attitude toward integrating homeopathy into conventional healthcare settings.

Surprisingly, knowledge of homeopathy was compromised even among the patients availing homeopathy treatment from the homeopathic hospitals.

Conclusion

- A favorable attitude toward integrating homeopathy into conventional healthcare settings was obtained among the patients attending the homeopathic hospitals in West Bengal, India.
- Still, the process of integration is facing difficulties, from the level of policy formulation to implementation.
- Many recommendations are being made, and what is needed at this moment, is a sincere authority and a dedicated, eligible workforce aimed at promulgation of TCM in India.

Paper published

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Patient preference for integrating homeopathy (PPIH) & attitude and satisfaction following integration within mainstream healthcare settings in West Bengal, India: the part 2 (PPIH-2) study:

- Focus on Alternative and Complementary Therapies

  Volume 20(2) June 2015 81–88A
- Cross-sectional survey was undertaken in November 2014 involving 456 patients visiting five integrated homeopathy clinics across four northern districts in West Bengal, India. A 14-item self-administered questionnaire, comprising four-point Likert scale response sets (i.e. 1 = strongly disagree to 4 = strongly agree) and written in local vernacular Bengali, was used to address the above objective.

PPIH 2 STUDY

- **Results** Of the patients surveyed, 98.8% were satisfied with the integrated services and disclosed a high level of satisfaction (86.3% of maximum score) following consultation with homeopaths. Although the patients preferred that allopaths to have knowledge of homeopathy, they did not prefer them to prescribe homeopathic medicines. In-house referrals were found to be compromised. Higher educational status and referrals seemed to influence satisfaction and attitude scores significantly (**$P<0.05$**), while satisfaction scores following consultation remained uninfluenced by suspected variables.

Ppih 2 study (contd.)

- **Conclusion**

  When formulating strategies for integrated CAM models in India, patient preferences should be evaluated with reasonable importance.

Homoeopathy is my Love & Passion

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REFERENCES

1. Florence Declaration Complementary and Traditional Medicine in Public Health: Towards an Integral Health System. International Workshop Innovation and Development in Health: Integration of Complementary and Traditional Medicine in Public Health Systems, Florence October 28-31, 2008. http://www.art-tuscany.org/documents/reports/MedCom_DeclarationEng.pdf; accessed December 3, 2014.
2. Astin JA. Why patients use alternative medicine: results of a national study. JAMA. 1998;279:1548-1553.
3. Rossi E, Di Stefano M, Baccetti S, Firenzuoli F, Verdone M, Facchini M, et al. International cooperation in support of homeopathy and complementary medicine in developing countries: the Tuscan experience. Homeopathy 2010;99:278-283.
4. Report no. 16 of 2005: Performance Audit report on AYUSH. Dept. of AYUSH, Ministry of Health & family welfare. Available at http://saiindia.gov.in/english/home/our_products/audit_report/government_wise/union_audit/recent_reports/union_performance/2004_2005/Civil_%20Performance_Audits/Report_no_16/perfaudayush.pdf; accessed Dec 3, 2014.
5. Health on the March 2012-2013. State Bureau of Health Intelligence, Directorate of Health Services, Govt. of West Bengal. Available at: http://www.wbhealth.gov.in/medical-directory/Health%20on%20March%20Book%202013.pdf; accessed Dec 3, 2014.
6. Allam S, Moharam M, Alarfaj G. Assessing patients' preference for integrating herbal medicine within primary care services in Saudi Arabia. J Evid Based Complement Altern Med 2014;19:205-210.
7. Koley M, Saha S, Arya JS, Choubey G, Ghosh A, Das KD, et al. Patients-perceived evaluation of service quality in the government homeopathic hospitals in West Bengal, India: a cross-sectional survey. Focus Altern Complement Ther. 2014 (paper in press).
8. Thomas KJ, Coleman P, Weatherley-Jones E, et al. Developing integrated CAM services in primary care organisations. Complement Ther Med. 2003;11:261-267.
9. Akerele O. The best of both worlds: bringing traditional medicine up to date. Soc Sci Med. 1987;24:177-181.
10. Chi C. Integrating traditional medicine into modern health care systems: examining the role of Chinese medicine in Taiwan. Soc Sci Med. 1994;39:307-321.
11. World Health Organization. Legal status of traditional medicine and complementary / alternative medicine: a worldwide review. http://apps.who.int/medicinedocs/pdf/h2943e/h2943e.pdf; Published 2001; accessed January 1, 2014.
12. Deng G. Integrative cancer care in a US academic cancer centre: the Memorial Sloan-Kettering experience. Curr Oncol. 2008;15: s108.es68-71.

REFERENCES (contd.)

13. Joos S, Musselmann B, Szecsenyi J. Integration of complementary and alternative medicine into family practices in Germany: results of a national survey. Evid Based Complement Altern Med. 2011;2011:495813
14. Keshet Y, Ben-Arye E. Which complementary and alternative medicine modalities are integrated within Israeli healthcare organizations and do they match the public's preferences? Harefuah. 2011;150:635-638, 689, 690.
15. Baer H. The emergence of integrative medicine in Australia: the growing interest of biomedicine and nursing in complementary medicine in a southern developed society. Med Anthropol Q. 2008;22:52-66.
16. Rossi E, Baccetti S, Firenzuoli F, Belvedere K. Homeopathy and complementary medicine in Tuscany, Italy: integration in the public health system. Homeopathy. 2008;97:70-75.
17. Fahimi F, Hrgovic I, El-Safadi S, et al. Complementary and alternative medicine in obstetrics: a survey from Iran. Arch Gynecol Obstet. 2011;284:361-364.
18. Salkeld EJ. Integrative medicine and clinical practice: diagnosis and treatment strategies. Complement Health Pract Rev. 2008;13:21-33.
19. Hoff W. Traditional health practitioners as primary health care workers. Tropical Doctor. 1997;27:52-55.
20. Guan A, Chen CA. Integrating traditional practices into allopathic medicine. Global Health J. 2012;2:38-41.
21. Summary of infrastructure facilities under AYUSH. Available at: http://indianmedicine.nic.in/showfile.asp?lid=44; accessed Dec 3, 2014.
22. State-wise statistics of homeopathy under AYUSH. Available at: http://indianmedicine.nic.in/writereaddata/linkimages/3833835927
23. West%20Bengal.pdf; accessed Dec 3, 2014.
24. Central Council for Research in Homeopathy, Dept. of AYUSH, Ministry of Health and Family Welfare, Govt. of India. Available at: http://ccrhindia.org/Institute.asp; accessed Dec 3, 2014.
25. Report of the Steering Committee of AYUSH for 12th five year plan (2012-2017). Health Division Planning Commission, Govt. of India. Available at: http://planningcommission.gov.in/aboutus/committee/strgrp12/st_ayush0903.pdf; accessed Dec 3, 2014.
26. Singh B, Kumar M, Singh A. Evaluation of implementation status of national policy on Indian systems of medicine and homeopathy 2002: Stakeholders' perspective. Ancient Sci Life. 2013;33:103-108.
27. Singh RH. Mission mainstreaming of AYUSH void of strategies and action plans. Annals Ayur Med. 2013;2:56-57.
28. Unnikrishnan P. Role of traditional medicine in primary health care: An overview of perspectives and challenges. Yokohama Int Soc Sci Res 2010;14:57-77.
29. Singh B, Singh A, Kumar M. Unification of Indian Systems of Medicine and Homoeopathy Policy and National Health Policy in India – Stakeholders' Perspective. Spatula DD. 2012; 2:141-146.
30. Ross CL. Integral healthcare: the benefits and challenges of integrating complementary and alternative medicine with a conventional healthcare practice. Integr Med Insights. 2009;4:13-20.
31. Chandhiok N, Joglekar N, Shrotri A, Choudhury P, Chaudhury N, Singh S. Task-shifting challenges for provision of skilled birth attendance: a qualitative exploration. Int Health. 2014 Aug 4. pii: ihu048. [Epub ahead of print]

Thank You