

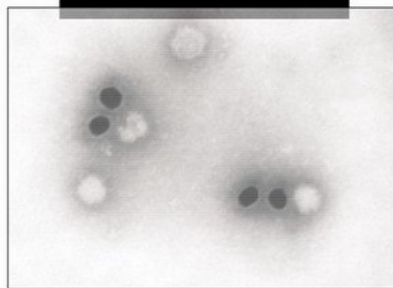


# CHIKUNGUNYA FEVER EPIDEMIC 2006 - STUDY REPORT

GOVT. HOMOEOPATHIC MEDICAL COLLEGE, THIRUVANANTHAPURAM  
DEPT. OF COMMUNITY MEDICINE



CHIKUNGUNYA (Chik)



RESEARCH ASSOCIATE

**INDIAN HOMOEOPATHIC RESEARCH CENTRE**  
(Managed by INDIAN HOMOEOPATHIC MEDICAL ASSOCIATION)  
KERALA STATE CHAPTER

# **A STUDY ON THE PROPHYLACTIC EFFICACY OF HOMOEOPATHIC PREVENTIVE MEDICINE AGAINST CHIKUNGUNYA FEVER**

*Dr. R. Rejikumar, Dr. R. S. Dinesh et al*

## **Abstract**

*Homoeopathy has established its supremacy in the control of infectious viral diseases. The widespread acclaim in this regard is now supported by this study. The study was conducted in the Chikungunya fever hit areas of Kerala. The genus epidemicus was selected after detailed analysis of the first cases of Chikungunya. This preventive medicine was widely distributed in the disease prevalent areas. A survey was conducted for the evaluation of prophylactic efficacy. The study showed a very high significant effect of Homoeopathic medicine in the prevention of Chikungunya fever.*

**Key words :** *Homoeopathy, Prophylaxis, Genus Epidemicus, Chikungunya fever*

## **Introduction**

Homeopathic prophylaxis had its beginnings with the father of homeopathy, Dr. Samuel Hahnemann (1755 – 1842). During a 1799 scarlet fever outbreak in Germany, Dr. Hahnemann observed that three children in a family contracted the disease, but the fourth remained unaffected. The fourth had been treated with homeopathic Belladonna for an unrelated joint problem. Dr. Hahnemann reasoned that perhaps the dose of Belladonna had protected the child from scarlet fever as well as treated the joint affliction. Soon afterward, he was able to test his theory when, in another of his patient's families, three children in a family of eight contracted scarlet fever. Hahnemann administered homeopathic Belladonna to the remaining un-afflicted five, and all five remained symptom free. Hahnemann continued using Belladonna during this epidemic, and soon conventional physicians took note and began using the same protocol. Of 10 allopathic physicians who were reporting their results with Belladonna, 1,646 children were prophylactically treated and then exposed to scarlet fever, but only 123 children (7.4%) developed symptoms (during the same time, disease from exposure ran as high as 90%).

Hahnemann subsequently detailed his success and prophylactic recommendations in an 1801 booklet called Cure and Prevention of Scarlet Fever.

In Kerala, there has been periodic outbreaks of epidemics, viz. Japanese Encephalitis, Weil's disease, Cholera, Chickenpox, Viral Conjunctivitis and Dengue fever. The latest turn was that of Chikungunya fever.

**Chikungunya** is a relatively rare form of viral fever caused by an alphavirus that is spread by mosquito bites from the *Aedes aegypti* mosquito, though recent research by the Pasteur Institute in Paris claims the virus has suffered a mutation that enables it to be transmitted by *Aedes Albopictus* (Tiger mosquito). The name is derived from the Makonde word meaning "that which bends up" in reference to the stooped posture developed as a result of the arthritic symptoms of the disease. The disease was first described by Marion Robinson and W.H.R. Lumsden in 1955, following an outbreak on the Makonde Plateau, along the border between Tanganyika and Mozambique, in 1952. Chikungunya is closely related to O'nyong'nyong virus.

Chikungunya is not considered to be fatal. However, in 2005-2006, 200 deaths have been associated with chikungunya on Réunion island and a widespread outbreak in Kerala.

The symptoms of Chikungunya (also called as Chicken Guinea) include fever which can reach 39°C, (102.2 °F) a petechial or maculopapular rash usually involving the limbs and trunk, and arthralgia or arthritis affecting multiple joints which can be debilitating. There can also be headache, conjunctival infection and slight photophobia. In the present epidemic in the state of Andhra Pradesh in India, high fever and crippling joint pain is the prevalent complaint. Fever typically lasts for two days and abruptly comes down, however joint pain, intense headache, insomnia and an extreme degree of prostration lasts for a variable period, usually for about 5 to 7 days.

Dermatological manifestations observed in a recent outbreak of Chikungunya fever in Southern India includes the following:

1. Maculopapular rash
2. Nasal blotchy erythema
3. Freckle-like pigmentation over centro-facial area
4. Flagellate pigmentation on face and extremities
5. Lichenoid eruption and hyperpigmentation in photodistributed areas
6. Multiple aphthous-like ulcers over scrotum, crural areas and axilla.
7. Lymphoedema in acral distribution (bilateral /unilateral)
8. Multiple ecchymotic spots (Children)
9. Vesiculobullous lesions (infants)
10. Subungual hemorrhage

### **Aims & Objectives**

1. To assess the efficacy of Homoeopathic medicine in the prevention of Chikungunya.
2. To determine the magnitude of incidence, clinical features, mortality , social & economic impact of the Chikungunya epidemic.

### **Materials & Methods**

After detailed analysis of Chikungunya cases in Neyyattinkara & Vizhinjam, the Genus epidemicus was selected to be Eupatorium perfoliatum. The 200<sup>th</sup> centesimal potency of this medicine was given in 15 doses (3 doses daily for 5 consecutive days). The distribution was done through various agencies, NGOs, FRAT etc. The details of distribution were recorded for the feedback study. The survey form for feedback study was prepared in Malayalam (Annexure-2A & 2B). The efficacy survey was conducted in the period of 20<sup>th</sup> – 30<sup>th</sup> November 2006 in the epidemic hit areas of Vizhinjam, Valiathura, Pothencode, Manacaud & Kamaleswaram, where preventive medicines were also distributed.

### **Survey Details**

The field survey team comprised of 36 students of III BHMS course headed by the survey supervisor, Dr. Sheela A. S (Head of the Dept. of community Medicine). The survey data entry team comprised of 52 Post Graduate students in the various departments. (Annexure-3). The Computerised data entry team comprised of 5 Post Graduate students. (Annexure-4). The Data analysis was done by subject experts.

### **Results & Discussion**

Total persons surveyed	:	2000
Excluded cases	:	376
Cases included	:	1624

### **Treatment Group**

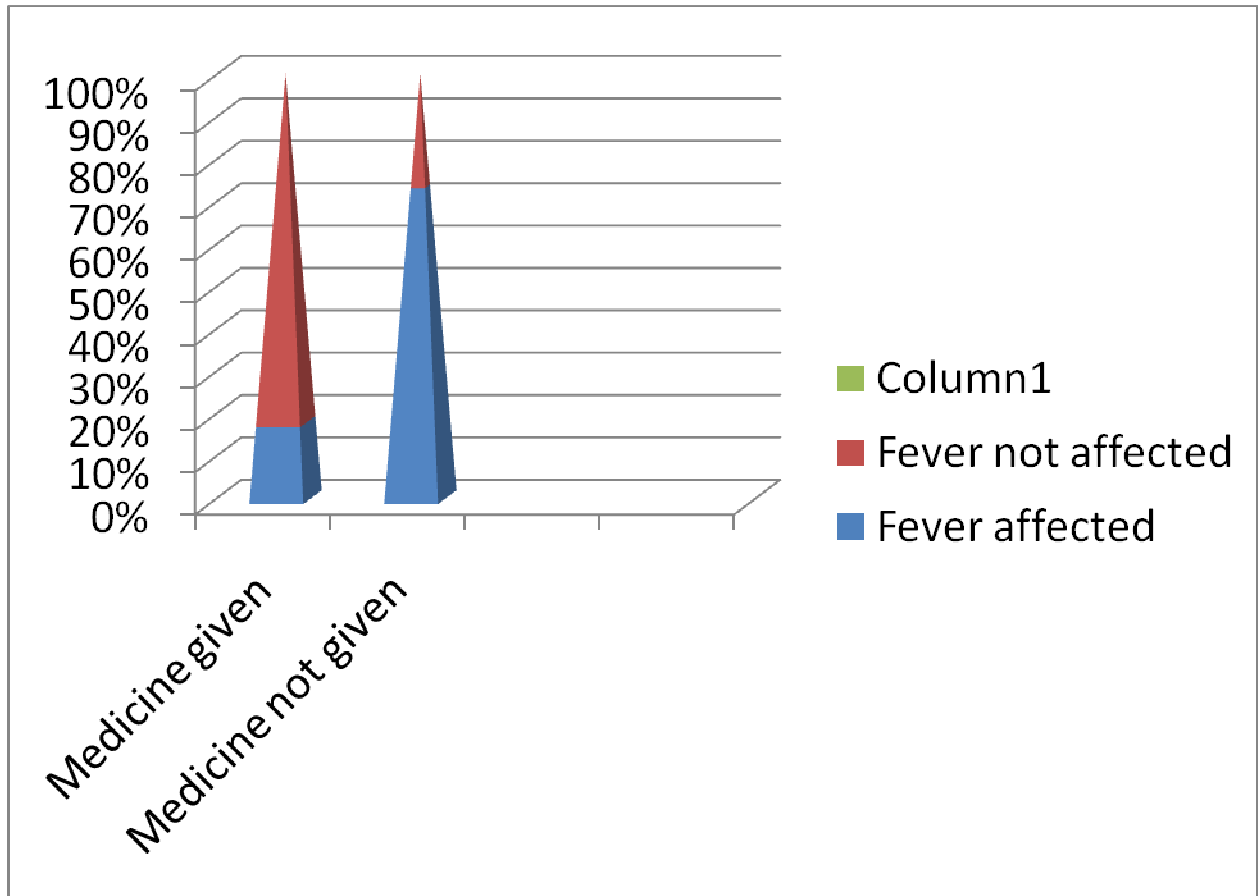
Total no. of persons who have taken Homoeopathic Preventive Medicine	:	1061
Total no. of persons who were affected with fever after the medicine	:	189
No. of persons in which the preventive was effective	:	872
% Efficacy	:	<b>82.19 %</b>

### **Control Group**

Total no. of persons who haven't taken Homoeopathic Preventive Medicine	:	563
Total no. of persons who were affected with fever	:	413
No. of persons protected naturally ( ie, without medicine)	:	150
% of cases protected naturally ( ie, without medicine)	:	26.64 %

Statistical Analysis ( see Annexure – 1)

	Fever affected	Fever not affected
Medicine given	189	872
Medicine not given	413	150



Chi square test value = 486.44

P value < 0.0001

The study is highly significant.

### **Conclusion**

The Homoeopathic preventive medicine distributed for Chikungunya epidemic was highly effective.

## ANNEXURE - 1

## BIOSTATISTICS REPORT &amp; ANALYSIS

EpiInfo Version 6			Statcalc	November 1993
+ Disease -			Analysis of Single Table	
			Odds ratio = 0.08 (0.06 <OR< 0.10)	
			Cornfield 95% confidence limits for OR	
			Relative risk = 0.24 (0.21 <RR< 0.28)	
			Taylor Series 95% confidence limits for RR	
			Ignore relative risk if case control study.	
			Chi-Squares	P-values
+	189	872	1061	
-	413	150	563	
E	602	1022	1624	
X				
P				
O				
S				
U				
R				
E				
			Uncorrected :	486.44 0.0000000 ←
			Mantel-Haenszel:	486.14 0.0000000 ←
			Yates corrected:	484.06 0.0000000 ←
			F2 More Strata; <Enter> No More Strata; F10 Quit	
F1-Help			F2-Stratum	F5-Print
			F6-Open File	F10-Done

(Sd/-)

Dr. S. Sajith Kumar M. D

Assistant Professor

Dept. of Community Medicine

Medical College, Thiruvananthapuram

ANNEXURE – 2A

SURVEY FORM FOR FEEDBACK STUDY (Malayalam Version)

**ചിങ്ങൻമനിയ /പകർച്ചപ്പനി**  
**ഹോമിയോപ്പതി പ്രതിരോധ ഔഷധ ഫലസിദ്ധി പഠന സർവ്വേ**

- പേര്: \_\_\_\_\_
- വയസ്സ് : \_\_\_\_\_
- പു/ സ്ത്രീ/കു: \_\_\_\_\_
- വിലാസം: \_\_\_\_\_
- തൊഴിൽ: \_\_\_\_\_
- വരുമാനം: \_\_\_\_\_
- കുടുംബാംഗങ്ങളുടെ എണ്ണം: \_\_\_\_\_
- പഞ്ചായത്ത്/മുൻസിപ്പാലിറ്റി/കോർപ്പറേഷൻ/വില്ലേജ്/താലൂക്ക്/ജില്ല: \_\_\_\_\_

- 1) ഹോമിയോപ്പതി പ്രതിരോധ ഔഷധം കഴിച്ചിട്ടുണ്ടോ? ഉണ്ട്  ഇല്ല
- 2) നിർദ്ദേശാനുസരണം കൃത്യമായി ഔഷധം കഴിച്ചിട്ടുണ്ടോ? ഉണ്ട്  ഇല്ല
- 3) പ്രതിരോധ ഔഷധം കഴിച്ചിരുന്ന സമയത്ത് മറ്റു മരുന്നുകൾ ഉപയോഗിച്ചിട്ടുണ്ടോ?  
ഹോമിയോപ്പതി  അലോപ്പതി  ആയുർവേദം  ഇല്ല
- 4) മറ്റേതെങ്കിലും രോഗത്തിന് ദീർഘകാലമായി ചികിത്സയിലായിരുന്നുവോ?  
ഹോമിയോപ്പതി  അലോപ്പതി  ആയുർവേദം  ഇല്ല
- 5) പ്രതിരോധ ഔഷധം കഴിച്ചതിനുശേഷം പനി ബാധിച്ചിട്ടുണ്ടോ? ഉണ്ട്  ഇല്ല   
പനി ബാധിച്ചിട്ടുണ്ടെങ്കിൽ
- 6) പ്രതിരോധ ഔഷധം കഴിച്ച് എത്രദിവസം കഴിഞ്ഞ് പനി ബാധിച്ചു? 1-7  8-14  15-28
- 7) എത്രദിവസം പനി നീണ്ടു നിന്നു? 1-7  8-14  15-28
- 8) പനിയോടൊപ്പം ഉണ്ടായിരുന്ന ലക്ഷണങ്ങൾ  
കഠിനമായ ശരീരവേദന  സന്ധിവേദന  നടുവേദന  തലവേദന   
പേശിവേദന  കുളിരും വിറയലും  ചർദ്ദി  തിണർപ്പുകൾ
- 9) പനിമൂലം ആശുപത്രിയിൽ കിടത്തി ചികിത്സിച്ചിരുന്നുവോ? ഉണ്ട്  ഇല്ല   
ഉണ്ടെങ്കിൽ: ഹോമിയോപ്പതി  അലോപ്പതി  ആയുർവേദം
- 10) എത്രദിവസം 1-7  8-14  15-28
- 11) ലബോറട്ടറി പരിശോധനകൾ നടത്തിയിരുന്നോ? ഉണ്ട്  ഇല്ല
- 12) ആകെ എത്രദിവസം ചികിത്സവേണ്ടിവന്നു 1-7  8-14  15-28
- 13) പനിമൂലം എത്ര ദിവസത്തെ ട്രോലി/ക്ലാസ്റ്റ് നഷ്ടപ്പെട്ടു? 1-7  8-14  15-28
- 14) പനിയുടെ ചികിത്സ ചെലവിനായി എത്ര രൂപ ചെലവഴിച്ചു? <500  >500  >1000
- 15) ചികിത്സാഫലം: രോഗം പൂർണ്ണമായും ഭേദപ്പെട്ടത്  രോഗമുർച്ഛ  മരണം

മേൽപ്പറഞ്ഞ വിവരങ്ങൾ സത്യമാണെന്ന് ഞാൻ ബോധിപ്പിക്കുന്നു.  
 ഗ്രഹനാമന്റെ പേര്: \_\_\_\_\_ ഒപ്പ്: \_\_\_\_\_

സർവ്വേ നമ്പർ: \_\_\_\_\_ സ്ഥലം: \_\_\_\_\_ തിയതി: \_\_\_\_\_ സമയം: \_\_\_\_\_  
 സർവ്വേ സംഘാംഗത്തിന്റെ അഭിപ്രായം: \_\_\_\_\_  
 സർവ്വേ സംഘാംഗത്തിന്റെ പേര്: \_\_\_\_\_ ഒപ്പ്: \_\_\_\_\_  
 സർവ്വേ സംഘത്തലവന്റെ പേര്: \_\_\_\_\_ ഒപ്പ്: \_\_\_\_\_

**കമ്മ്യൂണിറ്റി മെഡിസിൻ ഡിപ്പാർട്ടുമെന്റ്**  
**ഗവ: ഹോമിയോപ്പതിക് മെഡിക്കൽ കോളേജ്, തിരുവനന്തപുരം. Ph : 2459459**

## ANNEXURE – 2B

SURVEY FORM FOR FEEDBACK STUDY (English version)

## CHIKUNGUNYA / EPIDEMIC FEVER HOMOEOPATHIC PREVENTIVE MEDICINE EFFICACY SURVEY

- Name : \_\_\_\_\_ • Age : \_\_\_\_\_ • Sex: \_\_\_\_\_  
 Address : \_\_\_\_\_  
 Occupation : \_\_\_\_\_ • Income : \_\_\_\_\_  
 No. of family members : \_\_\_\_\_  
 Panchayat/ Municipality/ Corporation/ Village/ Taluk/ District : \_\_\_\_\_

- 1) Have you taken Homoeopathic Preventive Medicine ? Yes  No
- 2) Have you taken the medicine in the prescribed dose ? Yes  No
- 3) Have you taken any other medicine in between ? Yes  No   
 If yes, specify Homoeopathy  Allopathy  Ayurveda  Other
- 4) Were you under any chronic medication? Yes  No   
 If yes, specify Homoeopathy  Allopathy  Ayurveda  Other
- 5) Have you developed fever after taking preventive medicine ? Yes  No   
 If yes,
- 6) After how many days did fever develop ? 1-7  8-14  15-28
- 7) How long did the fever last ? 1-7  8-14  15-28
- 8) What were the symptoms you had, in addition to fever ?  
 Severe Bodyache  Joint Pain  Backache  Headache   
 Muscle Pain  Chill & Rigor  Vomiting  Rashes
- 9) Have you undergone In-Patient treatment ?  
 If yes, specify Homoeopathy  Allopathy  Ayurveda  Other
- 10) How long did the In-Patient treatment last ? (in days) 1-7  8-14  15-28
- 11) Did any Laboratory Diagnosis done ? Yes  No
- 12) How long did the treatment last ? (in days) 1-7  8-14  15-28
- 13) How many working/school days lost due to fever ? 1-7  8-14  15-28
- 14) How much did the fever treatment cost ? (in Rupees) <500  >500  >1000
- 15) What was the treatment result ? Complete cure  Complication  Death

The particulars given above are true to the best of my knowledge & belief.

Name of the head of family : \_\_\_\_\_

Signature : \_\_\_\_\_

Survey No. : \_\_\_\_\_ Place : \_\_\_\_\_ Date : \_\_\_\_\_ Time : \_\_\_\_\_  
 Survey team member's comments : \_\_\_\_\_  
 Survey team member's name : \_\_\_\_\_ Signature : \_\_\_\_\_  
 Survey team chief's name : \_\_\_\_\_ Signature : \_\_\_\_\_

**DEPARTMENT OF COMMUNITY MEDICINE**  
**GOVERNMENT HOMOEOPATHIC MEDICAL COLLEGE**  
**THIRUVANANTHAPURAM**  
**Ph : 0471 2459459**

## ANNEXURE – 3

SURVEY DATA ENTRY TEAM

Sl. No	Name of PG Scholar	Dept	Survey Forms	Remarks
1	Dr. Anisha P. J	MM	101-20, 1001-1020	
2	Dr. Anuji . A. John	Ph	21-40,1021-1040	
3	Dr. Arun Raj	OM	41-60, 1041-1060	
4	Dr. Asha R	Ph	61-80, 1061-1080	
5	Dr. Ashamol K. N	Ph	81-100,1081-1100	
6	Dr. BabySini	CR	101-120,1101-1120	
7	Dr. Baiju M.S	OM	121-140,1121-1140	
8	Dr. Beena Abraham	OM	141-160,1141-1160	
9	Dr. Deepa A. S	OM	161-180,1161-1180	
10	Dr. Deepa S.S	OM	181-200,1181-1200	
11	Dr. Dileep Chandran	MM	201-220,1201-1220	
12	Dr. Femina	MM	221-240,1221-1240	
13	Dr. Gopu Sankar	OM	241-260,1241-1260	
14	Dr. Jayanthi.N.K	Ph	261-280,1261-1280	
15	Dr. Joby.J	OM	281-300,1281-1300	
16	Dr. Jyothisai	MM	301-320,1301-1320	
17	Dr. Kavitha V. S	OM	321-340,1321-1340	
18	Dr. Lali I.S	PM	341-360,1341-1360	
19	Dr. Lekshmi V.R	OM	361-380,1361-1380	
20	Dr. LekshmiPriya T	PM	381-400,1381-1400	
21	Dr. Lima M. L	PM	401-420,1401-1420	
22	Dr. Manju G. S	Ph	421-440,1421-1440	
23	Dr. Manju Rani. M	OM	441-460,1441-1460	
24	Dr. Namitha K.R	CR	461-480,1461-1480	
25	Dr. Nebu P Mathew	CR	481-500,1481-1500	
26	Dr. Nisha A. N	Ph	501-520,1501-1520	
27	Dr. Padma Suganya	Ph	521-540,1521-1540	
28	Dr. Pradeep Kumar K	PM	541-560,1541-1560	
29	Dr. Preeti Nair	CR	561-580,1561-1580	
30	Dr. Ranjini. C	MM	581-600,1581-1600	
31	Dr. Rejikumar.R	OM	601-620,1601-1620	
32	Dr. Sajeev.V	PM	621-640,1621-1640	
33	Dr. Saleena	PM	641-660,1641-1660	
34	Dr. Saritha Kolarath	MM	661-680,1661-1680	

Sl. No	Name of PG Scholar	Dept	Survey Forms	Remarks
35	Dr. Sedhy P Issac	MM	681-700,1681-1700	
36	Dr. Seema Murali	CR	701-720,1701-1720	
37	Dr. Simi C.S	CR	721-740,1721-1740	
38	Dr. Simi Sarang	CR	741-760,1741-1760	
39	Dr. Sindhu Venugopal	Ph	761-780,1761-1780	
40	Dr. Smitha K Mohan	PM	781-800,1781-1800	
41	Dr. Smitha M Nair	MM	801-820,1801-1820	
42	Dr. Smitha P.S	CR	821-840,1821-1840	
43	Dr. Smitha R.S	MM	841-860,1841-1860	
44	Dr. Sophy.R.Das	PM	861-880,1861-1880	
45	Dr. Sreekumar	CR	881-900,1881-1900	
46	Dr. Sreerekha	PM	901-920,1901,1920	
47	Dr. Thanka R	OM	921-940,1921-1940	
48	Dr. Thrushala R.J	Ph	941-960,1941-1960	
49	Dr. Vineetha	CR	961-980,1961-1980	
50	Dr. Usha	CR	981-1000,1981-2000	

ANNEXURE – 4

COMPUTERISED DATA ENTRY TEAM

Sl. No	Name of PG Scholar	Dept
1	Dr. Rejikumar.R	OM
2	Dr. Narayana Prasad	CR
3	Dr. Dinesh R.S	MM
4	Dr. Mridula Gopinathan	PM
5	Dr. Ariharan.S	Ph

ANNEXURE – 4

COMPUTERISED DATA ANALYSIS TEAM

1. Dr. Sajith Kumar MD  
Dept. of Community Medicine,  
Medical College, Thiruvananthapuram
2. Dr. R. S Dinesh MD(hom)  
State Chairman, Indian Homoeopathic Research Centre
3. Dr. R. Rejikumar MD(hom)  
State Secretary, Indian Homoeopathic Medical Association

ANNEXURE – 5  
SURVEY DATA ANALYSIS (SDA) SHEET

No	1a	1b	2a	2b	3a	3b	3c	3d	4a	4b	4c	4d	5a	5b	6a	6b	6c	7a	7b	7c
1141		1															1			1
1142		1																	1	
1143		1																		1
1144		1																1		
1145		1																		1
1146	1		1					1				1		1						
1147	1		1					1				1		1						
1148													0						1	
1149													0					1		
1150													0						1	
1151													0							1
1152													0					1		
1153													0							1
1154													0						1	
1155													0						1	
1156													0						1	
1157														1					1	
1158													0							1
1159													0					1		
1160													0							1

8a	8b	8c	8d	8e	8f	8g	8h	9a	9b	9a1	9a2	9a3	10a	10b	10c	11a	11b
1	1	1	1	1	1	1			1	1			1				
1	1	1	1	1	1	1			1				1			1	
1	1	1	1	1	1	1			1		1	1				1	
1	1	1	1	1	1	1			1		1			1			1
1	1	1	1	1	1	1			1			1			1		1
1	1		1	1	1				1							1	
1	1	1	1	1	1	1	1		1				1			1	
1	1	1	1	1	1	1	1		1							1	
1	1			1	1				1							1	
1	1	1	1	1	1	1	1		1							1	
1	1	1	1	1	1	1	1		1				1			1	
1	1	1		1	1	1			1							1	
1	1	1	1	1	1				1		1				1		
1	1	1	1	1	1	1		1							1	1	
1	1	1	1	1	1	1		1	1						1	1	1
1	1	1	1		1	1			1		1				1		1

12a	12b	12c	13a	13b	13c	14a	14b	14c	15a	15b	15c	Remarks
		1			1			1		1		BA,RKR
		1						1		1		BA,RKR
	1				1			1		1		BA,RKR
		1			1			1		1		BA,RKR
												BA,RKR
												BA,RKR
			1							1		BA,RKR
									1			BA,RKR
						1			1			BA,RKR
								1		1		BA,RKR
			1			1			1			BA,RKR
1									1			BA,RKR
		1			1	1				1		BA,RKR
		1			1	1			1			BA,RKR
									1			BA,RKR
	1			1				1	1			BA,RKR
		1		1				1	1			BA,RKR
		1		1			1			1		BA,RKR
	1			1		1			1			BA,RKR
		1		1		1			1			BA,RKR

ANNEXURE – 6  
BASIC DATA ANALYSIS (BDA) SHEET

No	Date	Locality	Name	Age Group (in years)				Sex
				< 1	1 - 12	13 - 40	> 40	
801	28/11	pothencode	surendran				56	m
802	28/11	pothencode	sujith			24		m
803	28/11	pothencode	meena				44	f
804	28/11	pothencode	geetha			39		f
805	28/11	pothencode	rakesh krishnan			19		m
806	28/11	pothencode	rajamma				62	f
807	28/11	pothencode	molly			28		f
808	28/11	pothencode	swarnamma				70	f
809	28/11	pothencode	visakh		8			c
810	28/11	pothencode	sudheendran				42	m
811	28/11	pothencode	shruthi			12		c
812	28/11	pothencode	saraswathy				82	f
813	28/11	pothencode	jinadev			22		f
814	28/11	pothencode	hema			30		f
815	28/11	pothencode	alby				40	m
816	28/11	pothencode	manikandan nair				41	m
817	28/11	pothencode	asha			32		f
818	28/11	pothencode	sasikala				40	f
819	28/11	pothencode	madhavan				68	m
820	28/11	pothencode	swarnamma				56	f

## APPENDIX

Notations used in the Survey Data Analysis Sheet (see ANNEXURE – 4)

- No            →            Survey form serial number
- 1a            →            Answer to the 1<sup>st</sup> question is YES (see ANNEXURE – 1B )
- 1b            →            Answer to the 1<sup>st</sup> question is NO

(Similarly a number followed by an alphabet is used respectively to denote the question number and answer choice to enter the survey data into analysis sheet)

4d	5a
1	

→            Answer to the 4<sup>th</sup> question is 4<sup>th</sup> answer choice (Other)

4d	5a
	0

→            Answer to the 5<sup>th</sup> question is 1<sup>st</sup> answer choice (Yes)  
ie, the person was affected with fever  
0 indicates that this person belongs to control group  
(ie he/she has not taken homœopathic preventive medicine)

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