



Newsletter of ASA India



Estd.: 2014

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Acupuncture Science Association (ASA)

Registered under Punjab Societies Registration Act (XXI of 1860) No. 239 of 2014-15

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Volume - 4

December 2017

National Convention - 2017 Issue

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Editorial

Acupuncture is a mother science of the unseen meridian pathways, important junction points, subtle energy flow across cellular gap junctions and acceleration or modulation of energy flow by needling, warming, touching and therapeutic massage. There are several Micro-systems that are much widely applied.

By a good understanding of Acupuncture, some healers would have already touched millions of humans over decades, saving them from costly procedures.

Collectively whatever human intelligence had discovered is pre-existence of Nature, leaving nothing for the average humans to claim.

Disease nomenclature of Western medicine is taboo to Oriental Traditional Treatment systems that believe in patterns of suffering, while Oriental theories can't be understood by the western scientists who are lacking Cosmological approach. Acupuncture treatment had thwarted the sufferer away from disease patterns through its own fundamental basis of diagnoses and treatments.

Existing medical groups are keen in learning and practicing Acupuncture along with their system - as this is a traditional system that has been tested and proven on humans. This joint endeavor has paved way to implement this system in India as a proactive approach. In addition, some philanthropic seekers who had joined established schools had discovered that the lacunae within their medical college physiology got filled up after understanding this system.

For fulfillment of the unique demand of all groups, recommendations of acupuncture as an Independent Stand-alone system - and not just as an adjunct mode is very much awaited from our respected 'Experts' team of the Department of Health Research committee members representing the Government.

Governments in the center and some states show optimism towards establishing Acupuncture as a new system of health care. However ASA being an ever expanding umbrella association in India is constantly focusing on the standardization of practical skills of the enthusiasts within and outside its fold, through 'Refresher Training' – which has become an eye opener for some friendly associations too in a pro-active manner.

“Healing is a matter of time, but it is sometimes also a matter of opportunities” as Hippocrates himself opined...!

Dr. C. K. Raju (Editor)

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MEDICAL ETHICS FOR ACUPUNCTURE AND HERBAL MEDICINE BASED RESEARCH PROJECTS



***Prof. (Dr) Ram Gopal**

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In this globalization era all round progress in the materialistic world has been achieved. The 20th century achievements in **S & T** has produced more than cars, mobiles, **WMD**, space crafts etc & discovered new stars & planets too in the competitive global business. Consequence of S & T progress is creation of global problems and global change. S & T developments have positive and negative aspects. With these changes, integrated world community is forming with a common abode (dwelling), common fate and common responsibility. The Indian concept of unity in diversity is emerging at global level. There are only two ways to regulate social relations in the civilized world - by law & by morality/Spirituality. Swami Vivekananda on his address to parliament of religion on 11th Sept. 1893 has expressed Indian perspective on need of values in global change, philosophy of Vedanta, *Puranas, Mahabharata, Gita*, and other Indian scriptures. Medical ethics and human values need more emphasis in present lifestyle management.

Most Western and now Asian countries now require that research projects involving humans have independent ethical review prior to initiating research. A committee comprising medical and non-medical persons conducts these reviews. The reviews are undertaken to ensure the protection of the welfare and rights of research participants as well as the facilitation of research that will benefit society and humankind. Indeed, many funding bodies require that such a committee approve proposals before releasing funding for the research. In addition, many ethics committees require that research conducted overseas under the direction of local institutions, comply with the local ethical requirements. The **Declaration of Helsinki**, an international set of guidelines for ethical research adopted by the World Medical Association, is clear in enunciating the need for a committee to review research proposals involving humans. The S&T personnel have an important role in promoting global oriented morality and ethical codes. Experiments with applications of spirituality lessons and ethical practices have enhanced creativity, innovations, value addition and quality output. The goal of **Sarvjan Hitay, Sarvjan Sukhay** can be achieved by **implementing synergetics of Science and Spirituality**.

Ethics is derived from Greek word “**Ethos**” meaning customs, usages or in total character. Ethics is thus concerned with the principles, which make our conduct right or wrong. Ethics is also called **Moral Philosophy**. According to ethics good concept is built-in or it is an inherent value. Members of learned and noble professions involve in unethical means of money making ignoring their professional obligations and social responsibility. These Fundamental problems are due to **lack of moral and spiritual teaching** and training. Hence teaching and practicing ethics in noble professions like medical in our context is a necessity for wellness of society. Establishing research merit and integrity is necessary for the ethical involvement of human participants. The trial design should use recognized principles of research with tangible, clinically relevant measurable outcomes. Dissemination of research results is another often overlooked ethical issue. Clinical research that has a negative outcome is frequently not submitted for publication. In addition, **journal editors may have a bias against publication of a negative outcome trial**. Reporting of negative trials also should be encouraged.

It is paradoxical that we Indians generally are extremely religious in our private lives while in our medical profession related business and work places we hardly take account of the extent of human suffering that our actions/ work/ produce might cause unrest in society. This realization becomes more intense while attending such ethical application conventions. We find that people away from spirituality work for social welfare. Lured on their success, own qualities, trivial awards and positions they start looking at themselves as **social workers** and **reformers**. They expect appreciation and recognition from others. The **enhanced ego** creates enemies. Thus their social work besides making them **Lok Sevak** makes them **Lok Vinashak**. In our society, doctors and therapists are placed next to God. Look at the state of affairs in various schools, centers and hospitals run by us and others in different disciplines.

Religion and culture have been the repository and source of ethical values, while science and technology have the capacity to improve human life and living conditions. For a world of the future, both must go hand in hand. **Swami Vivekananda**, for instance, went on record to argue that modern science would only prove the ancient wisdom of Vedanta which held that matter and spirit were one and the same. In his first publications, he actually called **Raja Yoga** a science. In more recent times, the **Dalai Lama** has often said that Buddhism had much in common with modern science in that both are based on rationality and experimentation. In Tibetan text Buddhism is described as **Buddha Dhamma**. Acupuncture earlier practiced in Vedic period has been popular and described as **Suchibhedan**. Our ethical practice of ancient time needs to be integrated with modern therapy to **improve efficacy and efficiency of acupuncture**. Both science and spirituality are two instances of an enduring human quest for truth. That their methods, objects, and instruments of seeking knowledge are different does not make them inherently incompatible. Ultimately R&D efforts of all material science and spirituality are aimed to improve quality and longevity of life. Usually, the spiritualists will say that there is no conflict between the two, while practicing scientists will remain silent or disagree. What most people who consider them to be separate domains will however agree to that both are necessary for human well-being and progress. As **Albert Einstein** famously remarked, '**Science without religion is lame and religion without science is blind.**'

Vinoba-ji in response to the catastrophe of the atom bomb, after his silence and meditation, emerged to make his famous declaration, 'The days of party politics and denominational religion are coming to an end. Now dawns the new age of **science and spirituality**'. Indeed, more than anything else, it is our capacity through the exercise of modern science and technology having driven us to the unprecedented precipice of self-annihilation that also forces us to take the next evolutionary leap. Such a leap will have to combine both **ethical practices with spiritual wisdom** and scientific knowledge to make our earth a better place for all.

Over the past three decades there have been many developments concerning **acupuncture and Chinese medicine research** methodology. In addition, there has been increasing interest, especially in Western countries, on the consideration of ethics on research design. The World Health Organization document, **Guidelines for Clinical Research on Acupuncture**, states that 'consideration should be given to the different value systems that are involved in human rights such as social, cultural and historical issues' and that 'further studies should be conducted in relation to **ethical issues involved in clinical research on acupuncture**'. Most Western and an increasing number of Asian countries now require that research projects involving humans have independent **ethical review prior to initiating research**. A committee, often comprising medical and non-medical persons, usually conducts these reviews.

These reviews are undertaken to ensure the protection of the welfare and rights of research participants as well as the facilitation of research that will benefit society and humankind. In the United States, these committees are called Independent Review Boards, while in the United Kingdom they are termed Research Ethics Committees and in Australia, Human Research Ethics Committees. Indeed, many funding bodies require that such a committee approve proposals before releasing funding for the research. In addition, many ethics committees require that research conducted overseas under the direction of local institution comply with the local ethical requirements.

The Declaration of Helsinki, an **international set of guidelines for ethical research** adopted by the World Medical Association, is clear in enunciating the need for a committee to review research proposals involving humans. Decision making in health care often involves more than just medical facts of the case. Ethical principles and values will be the determining factor in which course of action to take. In India also many health care facilities/councils /departments have established Ethics Committees. Clearance is required from these committees before granting approval and financial support to undertake projects. Again, the Declaration of Helsinki is explicit in this regard -

Every medical research project involving human subjects should be preceded by careful assessment of predictable risks and burdens in comparison with foreseeable benefits to the subject or to others.

Research Investigators should be aware of the **ethical, legal and regulatory requirements for research** on human subjects in their own country as well as applicable international requirements. Many ethical concerns revolve around the four basic principles of research –

- **Merit and integrity,**
- **Respect for human beings,**
- **Weighting of risk–benefit and**
- **Justice.**

The second issue of respect for human beings requires that participants choose whether or not to become involved in a research study. Central to this concept is the participant's informed consent. General requirements for consent involve:

- Voluntary participation that is based on sufficient information and understanding of the purpose, methods, demands, risks, inconvenience, discomforts and possible outcomes of the research and,
- That the participant is not subject to coercion or to inducement and the participation is clearly established such as a signed form, return of a survey or a recorded audio agreement.

These principles form the basis for any discussion concerning **human research ethics** and are applicable to all approaches (quantitative or qualitative) and types (clinical or non-clinical) of **research including TCM**. In order to be ethical, research must be conducted or supervised by persons or teams with the experience, qualifications and competence appropriate to the research. An important consideration for 'hands on' type **research such as acupuncture** is the skill and competence of the acupuncturist administering the interventions. Unfortunately, some studies fail to use qualified, competent practitioners. Furthermore, the acupuncturist should have experience in the treatment of the condition being studied.

When reporting the study, the qualification, the length of training and clinical experience of the acupuncturist should be stated. The consideration of ethics in the design and conduct of acupuncture and Chinese herbal medicine clinical trials is fundamental to good research. Ethical consideration of research involves the protection of the welfare and rights of the participants in the research. It also entails the development of rigorous research that will be of benefit to humankind. **Value based management of science and spirituality needs to be brought with Indian concept of unity in diversity for better world.** National institutes have realized necessity of this synergy and started study of medical ethics/ business ethics / engineering ethics / psychology / applied (practical) philosophical ethics to increase ability of concern S&T personnel, managers and others to responsibly confront moral issues raised by technological activity. I express my appreciation to **ASA INDIA Delhi** branch for realizing the need and organizing national convention on **Ethical Aspects of Acupuncture Practice.**

In summary, the consideration of ethics in the design and conduct of acupuncture and herbal medicine clinical trials is fundamental to good research. Ethical consideration of research involves the protection of the welfare and rights of the participants in the research. It also entails the development of rigorous research that will be of benefit to humankind. It is hoped that this practice will generate more interaction in medical ethics for acupuncture and herbal medicine. In **IRIIM** a humble attempt has been made in development of Acupuncture - **Moxa (*Artemisia vulgaris*)** based herbal therapy. Considering this need **ASA INDIA** is organizing a National Convention on '**Recognition of Acupuncture in India and Ethical Aspects of Acupuncture Practice**' in New Delhi on 16-17 Dec.2017.

In Feb. 2013 the GOI, in collaboration with the **WHO South East Asia Region Office (SEARO)** organized an international conference on traditional medicine in New Delhi at which participating countries agreed to cooperate, collaborate and mutually support each other by adopting the **Delhi Declaration on Traditional & Complementary Medicine (T&CM)**. Government of India through AYUSH (2014) has also spelled out to promote and propagate **T&CM** as signatory member state of **WHO decade program (2014-2023)**. My experience with integrated therapy as a R&D scientist to manage present life style diseases and lead healthy and happy life has strengthened the belief on continuing R&D demand for integrating medicine in Vedic tradition with **T&CM** products, practices and practitioners, which has been updated by WHO (2013) in the document "**WHO Traditional Medicine Strategy 2014-2023**" incorporating and promoting acupuncture therapy.

As Chairman, Research Advisory Board, IRIIM, Howrah, WB and Chief Advisor ASA INDIA I express satisfaction over multiple growths of **IRIIM and Ludhiana Acupuncture Medical College & Dr Kotnis Hospital, Ludhiana, Punjab** in establishing clinical and research study in pro-nature therapies integrated with modern medicine. The R&D work, protocol and processes developed **with ethical principles** to create relatively safe holistic health care system have been appreciated and recognized by national and international institutes, universities, media coverage and organizations. The multinational approach associating traditional and alternating medicine with organic diet based pro-nature therapy in holistic health management is attracting practitioner in government, NGO and private sectors. Both the institutes with headquarters at Howrah and Ludhiana, sub-centers within India and students network in India & abroad through their small clinics are rendering **yeomen services ethically** by the cost effective, eco-friendly and safe health care system within the reach of common people. **GOI and State Government** ministers, officials and experts have visited our centers on several occasions.

MOH & FW/ DHR are actively considering our demand of approving **Acupuncture as Independent System of Therapy**. Acupuncture associations in India including **ASA INDIA** have jointly put up this long pending demand before GOI. Acupuncture practitioners covered under **ASA INDIA** with their present 23 state branches have taken up this movement in different forums and platforms.

I strongly appeal to ASA INDIA members and other beneficiaries associated with ASA to be aware of the above **Facts & Myths** and not be carried away by many such unrecognized agencies **selling degrees unethically** and so called untrained pseudo-acupuncturists, acupressure–*sujok* therapists / pro-nature therapy experts having fake designations and qualifications. **I also recommend to my fellow members to first heal themselves and develop their holistic personality before projecting as qualified and blissful therapists.** What we own (sound body, mind and intellect) can only share, transfer and impart to others with spiritual bliss. We are committed to contribute in fulfillment of national health care goal strictly following the World Health Organization document, ***Guidelines for Clinical Research on Acupuncture.***

Such enlightened ASA workers ethically committed to fulfill national and international goals will be virtuous, imaginative and productive to any family, society and organization.

Let us ASA-ians Practice Indian Work Ethos (ISM/T&CM) for Building a Better Future & Healthy Environment.

** Prof. (Dr.) Ram Gopal, Ph.D. (born Aug. 11.1942), a well-known research scientist for his work on Drinking Water Management is a unique combination of material science, spiritual science and philanthropy. As a Director of Materials of Defense Research Development Organization, Headquarters, Ministry of Defense, Government of India and Director, Defense Laboratory, Jodhpur, Rajasthan, India, he has contributed in development of new materials and technologies. The R&D work has been recognized by over 600 publications including patents, research papers, key note lectures and paper presentation in National and International conferences. Dr. Gopal, a former colleague of Hon`ble Dr. A.P.J.Abdul.Kalam, Former President of India is recipient of a number of National Awards. He is the Chief Advisor, Acupuncture Science Association, India (2014). Dr. Gopal is Chairman, Research Advisory Board, Indian Research Institute for Integrated Medicine, Howrah; Member, DST Core Group; Expert Member/ Advisor to DST, ICMR, IIT Rajasthan, IRIIM, JIET, ICMAT and Visiting Professor in Universities, S&T and Management Institutes. As a Philanthropist, he is regularly organizing R&D Seminars and Health Camps on Yoga-Naturopathy-Meditation-AM under IRIIM, Howrah.*

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"...You can buy a crown, it doesn't make you king
Beware the trinkets that we bring..."

- Robert Charles Heaton

ASA – India hosted National Conference on Integrated Medicine within the campus of IEST - Shibpur, Howrah, West Bengal, on February 24 and 25, 2017 (NCIM 2017).

3 days (February 23-25) Free Medical Camp & Health Exhibition were conducted. Following this on February 26, 2017 (10 a.m - 6 p.m), 4th National Meet of ASA India was held at IRIIM Bhawan, (Photo on page 19) followed by a workshop on TUINA & Advance Moxa on 27 February. All ASA members present at the conference, attended.

As decided in this meeting, Letters were sent to all the State and Union Health Secretaries. (See page 11 & 12)

ASA INDIA 4TH NATIONAL MEET FEBRUARY 26-27, 2017

Venue : IRIIM Bhawan, Mourigram Howrah, West Bengal

CIRCULAR- DATED FEBRUARY 28, 2017

ASA India 4th National Meet was held at HQ of ASA India at IRIIM Bhawan, Howrah on February 26-27 2017. More than 100 members from 20 states participated. ASA India Advisor Prof. Dr. S.N.Pandey, **Vice Chancellor, Indira Gandhi Technological And Medical Sciences University, Ziro, Arunachal Pradesh was present as special guest.** ASA India President Dr. Anish Gupta presided over the meeting. A secretariat composed of Gen. Secy. Dr. Debasis Bakshi, Joint Secretaries Dr. Inderjit Singh & Dr. Yogesh Kodkani, Treasurer Dr. Tapan Bid and ASA Newsletter Chief Editor Dr. C.K. Raju conducted the discussion. Following resolutions were accepted unanimously:-

While emphasizing the role of Acupuncture throughout world, general secretary informed that globally 103 countries have already acknowledged the usage of acupuncture, 29 countries have regulation for Acupuncture service providers and 18 countries were covered by health insurance for acupuncture. Presently this therapy alone is the 2nd fastest growing medical science throughout the world after allopathy. **(Ref. WHO Traditional Medicine Strategy 2014-2023, pg. 22)**

- i. While reporting the progress of the association's activities throughout India in the last year, it was stated that ASA India organization now spread to 21 states in India and covered more than 1000 Life & Patron members.
- ii. In Jan. 2016 by the initiative of ASA India, a mass convention on 'Recognition of Acupuncture as a full-fledged system' held at Bandra, Mumbai, Maharashtra. Dr. Beramji, Dr. Bakshi, Dr. Lohiya, Dr. Inderjit & Dr. Kodkani were the speakers.
- iii. In April, a special brain storming session was conducted at Hyderabad to undertake many major policy making decisions. All India secretariat members with ASA South India stalwarts were present.

- iv. To standardize the present acupuncture work force throughout India, ASA Founder Members conducting 'NO TUITION FEE' based refresher training programs. This initiative created a very positive response amongst the acupuncture practicing fraternity. Very shortly this training program will be conducted in all the parts of India. This Refresher course is designed as per WHO guideline and teaching of Late Dr. B.K. Basu, doyen of Acupuncture in India. Standard class note was provided, clinical & practical session was also organized. Safety in acupuncture was emphasized. Training was provided to existing Acupuncture Practitioners and ASA members only.
- v. RECOGNITION: 21 years ago (1996) acupuncture has been recognized as a separate system of therapy in West Bengal and accordingly thousands of patients are getting the benefit of this unique therapy of the orient in all the state & district hospitals at free of cost. Unfortunately other states are deprived. Maharashtra Acupuncture System of Therapy Act became valid in 2017. ASA India strongly demands to form the Council immediately so that millions of Maharashtra people and practitioners will be benefitted.
- vi. It was reported from different corners that a lobby is trying to restrict acupuncture practice by professionals of other already recognized medical systems and ignoring the demand of full-fledged recognition of a separate system of therapy and its existing practitioners irrespective of their background. ASA India strongly propose the immediate recognition of this system independently and enroll officially all the existing acupuncture practitioners throughout India in different categories.
- vii. ASA India demands to withdraw /amend the 2003 Order so that Full-fledged courses (Degree or Diploma) on Acupuncture can be reopened and fresh fully qualified Acupuncture Doctor can be produced who can contribute in National Health Care Delivery. This will solve the crisis of present fully trained workforce created due to 2003 order. ASA India always opposes all sorts of Quackery which increased basically by the 2003 order.
- viii. ASA India fully supports the judgment by Hon'ble Judge of Kerala High Court for allowing present acupuncture practitioners to practice without any state interference if they are properly trained from a competent authority. ASA India totally opposes any move to contradict or reverse the above said High Court verdict which is in favor of proper development of acupuncture practice throughout India. But at the same time ASA India strongly opposes any sort of malpractice in the name of acupuncture in any part of India. ASA India will shortly send memorandum to respective state authorities.
- ix. It was emphasized in the meet that the mother acupuncture system (as per WHO guideline) should accommodate all the acupuncture therapy related practices in the country so that our broader family be treated as a single unified community in India which will help to attain proper attention from the policy makers and administrators.
- x. Fund Raising Move: At the call of founder members and hon'ble advisor of ASA India, an appeal to build a reserve fund of Rs. 10 lacs was placed in the meet. The fund is needed immediately for dealing of all such activities related to recognition move. Members present responded gladly and shared to raise this fund most urgently. All the members, supporters and acupuncture loving people are requested to reach the target as early as possible.

- xi. ASA Newsletter will be published from now quarterly. The previous three issues were very much accepted by members and supporters. A new attractive look and more columns will be added from the next issue. ASA website launched. Contents will be uploaded very shortly. Members are requested to send their suggestions.
- xii. The present committee structure of states and local bodies are to be strengthened so that minor technical and schooling differences can be dissolved amicably.

Finally advisor and founder members appeal to all the members to hold high the ASA spirit and work collectively and united with all other acupuncture groups, organizations and institutions on the basis of definite principle mentioned earlier which must not be in contrary to ASA standpoint.



(Dr. Debasis Bakshi)

Gen. Secy. ASA India

On Feb. 27, ASA India Founder member Dr. Pradeep Antony of Trivandrum, Kerala demonstrated Tuina Therapy and newer techniques of Moxibustion. Noted Ayurveda & Acupuncture Physician Dr. Rashmi Jha of Bhopal supplemented. Participants also practiced on each other.

“Whenever a new science or medical system comes up it is quite natural for their practitioners to pass through the episodes of labor pains till the delivery in the form of some Government recognition. Labor pains are not pleasant but when they are followed by a healthy delivery it becomes matter of great joy forever.”

“In decision making, the size of the country, its diversity, population, multiple recognized systems of treatment and their popularity in different regions, multiple legislations and agencies governing different systems, current status of acupuncture in different countries and in different states of the country etc. are to be kept in mind.”

“Wise decisions and recommendations can only be made through thorough consultation with all those who are involved in practice, teaching, training, research and propagation of acupuncture across the country.”

- Glimpses of a GEM STUDDED Guideline Article in the Souvenir, by our

ASA Advisor Prof. Dr. S.N. Pandey

**Former Vice Chancellor, IGTAMSU,
Ziro, Arunachal Pradesh**



Estd. 2014

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Dr. C. K. Raju
CHENNAI, TAMILNADU

Ref. No. ASA/Gen./2017/4/1-38

Dated: April 4, 2017

To

The Secretary,

Govt. of India and All State Govt.s

Department of Health & FW and/or Dept. of AYUSH

Subject: Request for issuing suitable instructions to district level law enforcement authorities and CMOs in respect of practice of Acupuncture in the state/UT

Sir,

With due respect and honor I am to submit the following on behalf of Acupuncture Science Association (ASA) for your kind consideration and suitable action:-

1. Acupuncture Science Association (ASA) is a professional organization of Acupuncture practitioners in the country having members from almost all the States and Union Territories of India.
2. Acupuncture is an established medical science and is a recognized system of healing in most of the countries of South East Asia and also several other countries including UK and USA. As per WHO reports acupuncture is practiced in 103 countries. 29 countries are having regulations for practice and 18 countries are having health insurance coverage.
3. In regard to origin of this science the general belief is that it is originated in China but the ancient Indian Literature on health practices are indicative of the fact that such healing procedures were practiced in India too since time immemorial under different names. Therefore it can be safely claimed that it has its roots in India but it is a matter for proper research by medical historians to verify various claims and counter claims. Whatever may be the historical facts, as on today this science has gained a global popularity due to its amazing efficacy in dealing with curative and preventive aspects of a good number of diseases. It will be interesting to note that even major surgeries can be performed safely without anesthesia with the use of acupuncture under competent hands.

4. The professional membership criteria of ASA are very strict and confined to only genuine and competent practitioners. Full professional membership is granted only after due verification and ascertaining the fact that he /she is fully competent and genuinely serving the ailing masses in ameliorating their sufferings most professionally. We need to emphasize that in the absence of any appointed Govt. body of Acupuncture experts, ASA India, an association founded by Acupuncture experts, can fit in to fill the gap. ASA India gives Life Membership to "Appropriately Trained" Acupuncturist. So they should be considered as eligible for practicing Acupuncture even if they do not belong to the other recognized systems that have registration in any other existing council. This is of course only till the time that Acupuncture councils take up this role in respective State or Centre.
5. Except for West Bengal, no State or UT in the country has so far come up with any regulatory body established under Act of Legislature (it is expected to be finalised shortly in Maharashtra). Therefore education, training, practice and professional conduct of practitioners in all these States and UTs are matters of great concern for ASA. In some of the States some practitioners of acupuncture had to face a lot of difficulty and ugly situations under the hands of law enforcement authorizes out of confusion in regard to practice of this science and were forced to approach Courts of Law for their protection. An interesting such incident happened in Kerala and the Honorable High Court of Kerala had to come to the rescue of the practitioner and protect him and thereby practice of this science too. The judgment dated 3.1.2017 in Crl.MC No.1349 of 2016 is enclosed for your kind information.
6. ASA always stresses its members to have ethical conduct, respect the laws of the State of their practice and keep on updating their knowledge through continuing medical education and by attending technical seminars, workshops and conferences so that high quality services could be provided by them and no untoward incidents occur requiring them to approach courts of law for their protection.

As a professional organization of practitioners of Acupuncture in the country, ASA most humbly request your good self to promote Acupuncture in your State and issue suitable instructions to the district level law enforcement authorities and CMOs to cooperate with the ASA members practicing Acupuncture in their district in case any grievances are brought by them and accord them a decent dealing they deserve as professionals serving the ailing masses in ameliorating their sufferings.

Thanking you,

Yours faithfully,

(Dr Debasis Bakshi)

General Secretary, ASA India

“REFRESHER TRAINING” – ASA’s Mantra



Revival of Teachings of Dr. Bejoy Kumar Basu
As Per Acupuncture Training Guideline by World Health Organization (WHO)

NO TUITION FEE ACUPUNCTURE REFRESHER TRAINING

Organised by: Acupuncture Science Association (ASA) India

Technical Support by:

Indian Research Institute for Integrated Medicine (IRIIM), Howrah, West Bengal & Ludhiana Acupuncture Medical College & Dr. Kotnis Hospital, Punjab

ASA India successfully completed historic NO TUITION FEE Acupuncture-Moxibustion (AM) Refresher Training courses - all together **7 sessions** from **July '16 to Oct. '17** (held 2 sessions at ASA HQ-IRIIM Bhawan, 1 in ASA Regd. Office at Ludhiana Acupuncture College & Hospital, 2 sessions in Mumbai, 1 each in Delhi and Chennai) All together more than **140 Acupuncture Practitioners** have completed these **7 refresher courses**. We are planning for the future Training Program in other parts of country in coming future.

As informed, after primary nationwide survey regarding the present status of Acupuncture practice in India, we seriously felt for developing a standard basic refresher training on Acupuncture-Moxibustion (AM) to be introduced all over India in order to revive the great teachings of **Late Dr. Bejoy Kumar Basu** (*doyen of Acupuncture in India*) in line of worldwide accepted **Acupuncture Training Guideline of World Health Organisation** (W.H.O.). ASA India's senior most founders and students of late Dr. Basu led the whole teaching and refresher program of AM. The whole training is FREE OF ANY TUITION FEE. Actual expenses are shared by the participants.

TRAINING DETAILS:

1. Whole program is at present restricted to ASA India members only (new Life Membership Fee - Rs. 3200 or 3 yrs. new General Membership - Rs. 1100). Later on it will be opened to the Acupuncture Practitioners outside ASA.
2. Certificate of Attendance is issued by ASA India.
3. Medium of Training: English & Hindi, Exam. will be only in English

CLASS DETAILS

Subjects of Refresher Course:

- i) Introduction about the Course and its importance
- ii) Dr. B.K. Basu & his schooling
- iii) Preliminary Assessment of knowledge and skill of the participants in classical Acupuncture through Questionnaire: Written, Oral & Practical.

SESSION**THEORY**

- i) Revision of Basic Theory of Acupuncture-Moxibustion : Yin-Yang, Zang-Fu, Qi Blood & Body Fluid, Diagnostic Methods, Aetiology & Pathogenesis, Meridians & Collaterals, Acupuncture General & Specific Points, Theory of Eight Principle *(As Per Specific Note Only)*
- ii) Important Surface Marking
- iii) Revision of Channels (14 Meridians)
- iv) Safety and Precaution in Acupuncture

PRACTICAL

- v) Acupuncture Needle & Allied (Hammering, Moxibustion, Cupping) - Introduction
- vi) Deqi during treatment with practice
- vii) Acupuncture point pricking practical- mutually on each other and finally on the Teacher
- viii) Preparation of patient before and after treatment
- ix) Record keeping & Proper History taking and Advice

CLINICAL

- x) Therapeutics in common diseases with practical Treatment
- xi) Discussion and Interaction on Integration and Difference between Acupuncture and other Acu Therapy (Acupressure, Reflexology, Sujok, Laser, Touch therapy etc.

4. Assessment of the participants in lessons taught in the Camp through Interaction.

For ASA India, Dr.Debasis Bakshi, Gen.Secy. (09831111317, drdebasis56@gmail.com) & Dr.Inderjeet Singh, Jt. Secy. (098887-02426, kotnis4@gmail.com)

“REFRESHER TRAINING” – Participant’s Opinion

Respected Sir..

After Compliments..

It was a package of hours..fully enriched with the real TCM method of Acupuncture as it came to our country through Dr B K Basu.. the same light has further come in a very spectacular way to us through the prism of the huge base of your knowledge and experience.

I am overwhelmed by seeing you these five consecutive days. Starting from 9 morning to 7 evening.. Continuously you were actively monitoring the entire schedule of the Knowledge Reviving Process.

Apart from the academic part, there were some of your styles of Leadership, which has given us a magic break for revival..like..on first day we started our session with a panoramic view of green horizon from the terrace, where we could feel the real taste of nature, calmness, cool breeze and also the unique concept of preserving rain water with further process to use it for the irrigation purpose in your Organic Garden.. Correlating and reminding Pather Panchali on the terrace with the train whistle.... Planning for hot Muri-Badam in the tiffin.. arranging Mango-Break..Banana Break in the afternoon.. on closing day, world famous mouthwatering item Rasogolla ..

I must thank you specially for arranging a Bonus-Lecture by Dr Chandan Chakraborty, a senior scientist residing in Canada. Dr Chakraborty has given us a very interesting and useful advice how to combat the current trend of unavoidable food adulteration in the kitchen what we are facing daily ...

As a whole.. I am highly benefited from this revival program and more confident than before to perform the Acupuncture Technique with academic background ...again waiting for this type continuous process of sharing knowledge, skill and opportunity to update my knowledge from ASA India stalwarts.

Thanking you again for sending all photographs captured during the session..

My pronams to you and all my teachers..

Rathin Mitra

[Participant of 1st. Refresher course (July'16) after completing the session]

“REFRESHER TRAINING” – Photos

ASA 1st Refresher Camp - July 2016 - HOWRAH



ASA 3rd Refresher Camp - October 2016 - MUMBAI



ASA 5th Refresher Camp – November 2016 - LUDHIANA



ASA 7th Refresher Camp – October 2017 - CHENNAI



NATIONAL & INTERNATIONAL EVENTS – Photos



ASA 4th National Meet – February 2017 - HOWRAH



**International Seminar by noted Acupuncture Stalwart
Dr. SHAHZAD ANWAR – PAKISTAN – 10th April 2017 - IMA Hall, NEW DELHI**



ASA South Zone Meet – January 2016 – BANGALORE



ASA Karnataka submitted Proposal for recognition of Acupuncture system in the state – October 2017 – BANGALORE

SPIRIT OF RECOGNITION



ASA Stalwarts with other National Acupuncture Group leaders
– meeting with DHR, GOI – 22nd November 2017 – NEW DELHI

Teams met Honorable AYUSH MINISTER – GOI – NEW DELHI



**PROPOSAL ON
RECOGNITION OF ACUPUNCTURE AS AN INDEPENDENT SYSTEM &
SUBSEQUENT INCLUSION IN HEALTH CARE SYSTEM**

Presented by - Acupuncture Science Association (ASA) - asa.india13@gmail.com

Acupuncture Science Association (ASA) is the largest Representative Body of Acupuncturists in India having branches in 23 states

Major Aim :

1. To spread knowledge & awareness on Acupuncture
2. To follow Ethical guideline of Practice & Training
3. To Promote Continuing Medical Education (CME) with up to date knowledge and techniques

ASA India with likeminded organizations & stalwarts of acupuncture are relentlessly Interacting with the Govt. of India for *Recognition*

Acupuncture -Definition

As per Oxford Dictionary :

“A system of complementary medicine in which fine needles are inserted in the skin at specific points along what are considered to be lines of energy (meridians), used in the treatment of various physical and mental conditions”

As per WHO :

“Acupuncture”, (Latin *acus* = needle, *punctura* = piercing) is an ancient and traditional system of medicine for the treatment of medical problems, which means puncturing standard needles (Acupuncture needles) at appropriate sites of body, called Acupuncture points (Acu point)

Evolution of Acupuncture & Needle

Acupuncture is a very ancient form of healing started from the Old Stone Age(10,000 years ago and beyond) and in the New Stone Age (10,000-4000 years ago), refined into fine needles for healing, Bone fragments and bamboo sticks were also used.

Later evolution from various metals starting from Bronze, Gold, Silver, Brass, Copper and ultimately Iron and now Stainless Steel.

Origin of Acupuncture – Indian Contribution

Acupuncture is known in China ‘Chen Chiu’ & in Japan ‘Shin Kiyu

In India as ‘Bhedan Karma’, ‘Marma Chikitsa’, ‘Suchi Bheda Chikitsa’, ‘Dagdha Chikitsa’ (Moxibustion) etc.

Extensive literatures on ‘Suchi Bheda Chikitsa’ (Acupuncture) are seen in Indian Traditional Texts as:

Philosophy of Acupuncture

- Acupuncture is one of the most ancient traditional method of healing.
- The holism (totality) is the basic concept. It sees body as a self-rectifying whole, a network of interrelating and interacting Vital energies or ‘Qi’.
- Their even distribution & flow maintain health, but any interruption, depletion or stagnation leads to disease
- By needling and / or warming (Moxibustion) on acupuncture points or tender area, Vital Energy can be influenced,
- Living beings are all naturally full of vitality and are continually & quite unconsciously rebalanced & regenerated from within,
- The human body is an integrated whole and part of the universe, It responds to the changes in the environment,
- It believes that importance should be given not only on the disease but also to the patient in totality.

UNIQUE DIAGNOSTIC METHODOLOGY**Observation of Tongue and Palpation of Pulse**

- **Pulse Diagnosis** –The pulse has dynamism, fluidity and changeability. Also, the pulse has many different dimensions - depth, rate, rhythm, strength, shape and so on. Each of these dimensions changes in ways that reflect the state of health and well-being of the person
- **Tongue Diagnosis** – is a traditional non-invasive diagnostic procedure Like different traditional medical systems

Similarities / Dissimilarities of 'Acupuncture System' with the existing recognised systems under AYUSH

- **Similarity with AYUSH system :**

AYUSH Systems (either Nature based or Drugless) and Acupuncture have a common principle of **HOLISTIC HEALING**

- **Dissimilarity with AYUSH system :**

Acupuncture has a unique concept regarding Aetiology, Pathogenesis, Diagnosis, Treatment, Management, Prognosis and Prevention of chronic and acute ailments with safe, standardized, effective Treatment Devices & Methodology (As replied on 4.2.2000 to ICMR regarding requirement of "ESSENTIAL & DESIRABLE CRITERIA" for Accepting A System Of Medicine)

Modern Scientific Experiments Show That Acupuncture Can :

1. Strengthen Controlling & adjusting functions of body through Central Nervous System
2. Regularize heart beats, Adjust body temperature, regulate blood pressure & breathing
3. Stop convulsions, cure paralysis through nerves & body fluids
4. Improve imbalances in internal & external secretion systems
5. Enhance the functions of the reticulo-endothelial system
6. Stimulate development of bone marrow,
7. Strengthen white blood cells' engulfing ability,
8. Improve circulation of body fluids,
9. Affect major pathological processes of inflammation, curb the growth of germs & diminish inflammation,
10. Change chemical processes within body, speed up excretion of poisonous elements, improve metabolism & raise body's function of absorbing, compounding, storing & using nutritious substance,
11. Trigger release of opioid peptides,
12. Activate the hypothalamus and pituitary gland; resultant alteration in neuro-transmitters & neuro-hormones changes haemodynamic regulation throughout body
13. Play vital role not only for relief of symptoms but also can strengthen immunity power or body resistance

Worldwide Research & Publication Trends in Acupuncture over past 2 decades

- Around 13,320 acupuncture-related publications identified in Pub Med database (Upto 2015)
- Mean annual growth rate of 10.7%, compares to a mean annual growth rate of 4.5% in biomedicine
- Increase in the proportion of randomized clinical trials (RCTs), from 7.4% in 1995 to 20.3% in 2014, exceeding the 4.5% proportional growth of RCTs in biomedicine
- The top 3 contributors being China (47.4%), United States (17.5%), and United Kingdom (8.2%)
- Impact factors ranging between 0.7 and 2.8 in the top 20 journals, followed by journals specializing in neuroscience, pain, anesthesia/analgesia, internal medicine and comprehensive fields
- Acupuncture research has grown markedly in the past two decades, with a 2-fold higher growth rate than for biomedical research overall.
- **IMPORTANT GUIDELINE BY WHO**
- Three Very Important Documents Published by WHO Regarding Acupuncture
- Acupuncture – WHO reviews
- WHO opined "Acupuncture, if practiced by well-trained individuals, be they physicians or other health professionals, should be safe and efficacious for the management of well defined conditions, and it is cost effective if controlled by the Government"
- WHO in 1979 approved this science after extensive research

- Moreover, it emphasizes on development and standardization of basic equipment and research on this therapy
- The recent guideline of “WHO Strategy on Traditional Medicine 2014-2023” shown great importance on Acupuncture and it’s inclusion in Traditional & Complimentary System (T&CM) and finally in National Health Care Delivery by Integrating with Conventional Medicine

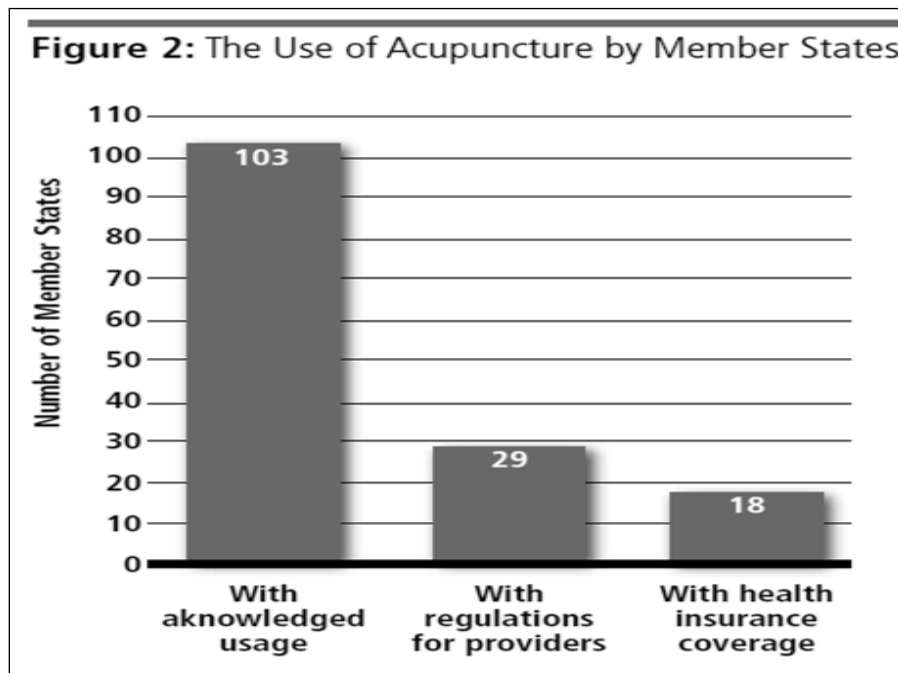
The World Health Organization Reviews Clinical Trials of Acupuncture

SUMMARY OF THE FINDINGS OF THE REVIEW, PUBLISHED IN 2002, FOLLOWS:

- A. Diseases, symptoms or conditions for which Acupuncture has been proved through controlled trials to be an effective treatment:
- B. Diseases, symptoms or conditions for which the therapeutic effect of Acupuncture has been shown but for which further proof is needed;
- C. Diseases, Symptoms or Conditions for Which There are Only Individual Controlled Trials Reporting Some Therapeutic Effects, but for Which Acupuncture is Worth Trying Because Treatment by Conventional and Other Therapies Are Difficult
- D. Diseases, Symptoms or Conditions for which Acupuncture may be Tried Provided the Practitioner has Special Modern Medical Knowledge and Adequate Monitoring Equipment :

Global progress - Practices

“T&CM practices vary widely from country to country with certain practices (sometimes called modalities) regarded differently depending on the culture, understanding and accessibility of conventional medicine. A practice where significant progress has been made is acupuncture. Although acupuncture was originally a feature of traditional Chinese medicine, it is now used worldwide. According to reports supplied by 129 countries, 80% of them now recognize the use of acupuncture (Figure 2)”



Indian Scenario - Rejuvenation of Acupuncture and Recent Development

DOYEN OF ACUPUNCTURE IN INDIA - DR. BEJOY KUMAR BASU (1 March 1912 – 12 October 1986)

- West Bengal State Govt. Hospitals Providing Acupuncture
- Two Oldest Acupuncture Institutions of India
 - Indian Research Institute For Integrated Medicine (IRIIM) Howrah &
 - Ludhiana Acupuncture Medical College & Hospital, Punjab

Research Work in India

1st research project on Acupuncture sponsored by ICMR completed successfully in 1999

More Research Projects Completed

1. Research Projects completed by IRIIM, Howrah
 - DIT, CCRYN, DST under Govt. Of India Sponsored Research Project On TRADITIONAL TONGUE DIAGNOSIS
 - Defence Laboratory (DRDO) Sponsored Research Projects On MOXA
2. Research work conducted by Dr. B.K. Basu Memorial Research and Training Institute of Acupuncture
3. Regular Research activities are also conducted by University College of Medical Sciences, DDU, L.N.J.P.N., RML, M.S. Guru Teg Bahadur Hosp. & Safdarjung Hospitals, AIIMS New Delhi

During last 20 years recognizing our R&D contribution over 10 projects were sanctioned by Central and State Government departments, agencies & NGOs (ICMR, CCRYN, DST, DRDO, IT Ministry, IIT, Govt. of WB). All the projects have been successfully completed with remarkable achievements

Unfortunately the vast Indian people could not avail the outcome of this result and findings implemented by ASA Practitioners in our medical college/institutes/hospitals/centers.

Legal Status in India

In 1996, 1st time in India, Government of West Bengal recognised Acupuncture as an Independent System; A good number of Acupuncturists are registered & practicing safely,

In 2017, Maharashtra Govt. recognized Acupuncture as a System of Therapy.

RECOGNITION OF ACUPUNCTURE AS AN INDEPENDENT SYSTEM OF MEDICINE AN UTMOST NEED**Acupuncture Influences Major Aspects Of Health Care:**

1. Promotion of health & well being without medicine,
2. Acupuncture is effective (without side effect) in varied level - it is already proved scientifically worldwide
3. Pain control on broader aspect with sustainable effect,
4. Reducing financial burden on people & government
(by reduction of cost of medicine, cost for long hospital stay or long absence of work etc.),
5. Worldwide funding for research work done / going on in Acupuncture surpluses the total health budget of many nations.

WHY RECOGNITION

1. Indian Origin of Acupuncture therapy is well established,
2. Acupuncture, as per ICMR guideline in 2000, fulfills ESSENTIAL CRITERIA of having it's own unique Diagnostic Method, Differential Diagnosis, Methodology etc. which is distinctly different from any other recognised systems of medicine,
3. Dr. B.K.Basu reintroduced it in 1959, one state recognised in 1996, another in 2017, but all other states are deprived though there are sufficient manpower of Experts, Therapists & Institutions,
4. Efficacy, Research, Extent of use throughout the world SURPASSES all the other systems except Allopathy, but still millions of sufferers are deprived of this system in India,
5. ICMR & other major Funding agency (DIT, DST, DRDO, CCRYN etc.) sponsored R & D projects on Acupuncture proved "SATISFACTORY", still it is not recommended for inclusion in Health Care Delivery.

ADDITIONAL BENEFITS AFTER RECOGNITION

1. A new therapy will give a new boost to health care system,
2. More than 60% population in rural area will be benefitted where Government lacks in providing treatment,
3. Unemployment will be improved after Degree and Diploma courses on Acupuncture introduced for Fresher,
4. Industrial benefit with huge market for all the Acupuncture equipments throughout the world,
5. Will help India financially & also to earn foreign exchange,
6. Acupuncture based Health Tourism may a big tool.

CONCLUSION

- Acupuncture therapy is tailor made for Indian population specially for low income and poor section who are approximately (BPL) 33% of total population,
- Who can benefit directly with this unique therapy as at least 2% of total population every year going below poverty level due to unbearable medical expenditure,
- Acupuncture is least costly, non-hazardous, eco friendly and easily applicable method with sustainable result,
- So its role should be fully utilized,
- It can play definitely important role in health care delivery.
- Our honorable Prime Minister has kindly insisted on the need of more emphasis on drugless traditional therapies on various occasions,
- We sincerely believe GOI will take necessary steps for the Recognition of Acupuncture as an Independent System of Medicine and subsequently include in Health Care System which will be in line with our honorable Prime Minister’s appeal,
- It will also go a long way in fulfilling the most cherished dream of "Make in India", "Swachh Bharat" and "Sabke Sath - Sabke Vikas" .

THANK YOU
For A New Hope

UNIFORM CURRICULUM FOR DIFFERENT COURSES

A. PROPOSED DEGREE COURSE IN ACUPUNCTURE SYSTEM OF MEDICINE

(4 AND 1/2 YEAR DEGREE COURSE OF ACUPUNCTURE + 1 YEAR COMPULSORY INTERNSHIP)

ADMISSION TO COURSE

Minimum qualification: No candidate shall be admitted to the Degree course in Acupuncture System of Medicine unless he/she has-

- (i) passed Higher Secondary (10 + 2) or equivalent examination with Physics, Chemistry and Biology as his/her subjects.
- (ii) attained the age of 17 (seventeen) years on or before 31st December of the year of his/her admission to the First Year of the Course.

Selection of the Candidates for admission to the First Year of the Degree in Acupuncture course shall be made by merit, interview and aptitude of the Candidate.

COURSE CURRICULUM

<p><u>1st year</u></p> <ol style="list-style-type: none"> 1. Anatomy 2. Physiology 3. Introduction of Acupuncture 	<p><u>2nd year</u></p> <ol style="list-style-type: none"> 1. Pathology 2. Acupuncture-1 3. Traditional Chinese Medicine (TCM) - introduction 4. Forensic Medicine 5. Pharmacology
<p><u>3rd Year</u></p> <ol style="list-style-type: none"> 1. TCM diagnosis 2. Acupuncture-2 3. Social & Preventive Medicine 4. Medicine -1 5. Surgery- 1 6. Acupuncture Therapeutics-1 	<p><u>Final year (1 and ½ yr)</u></p> <ol style="list-style-type: none"> 1. Acupuncture therapeutics -II 2. Medicine -II 3. Surgery -II 4. Gynecology & Obstetrics

Total teaching hours should be 800 hours in a year, including theoretical, practical classes and study tour and excluding examination

INTERNSHIP: 1 YEAR

B. DIPLOMA IN ACUPUNCTURE SYSTEM OF MEDICINE

(3 YEAR DIPLOMA COURSE OF ACUPUNCTURE + 6 MONTHS COMPULSORY INTERNSHIP)

ADMISSION TO COURSE

Minimum qualification.—No candidate shall be admitted to the Diploma course in Acupuncture System of Medicine unless he/she has -

- i. passed Higher Secondary (10 + 2) or equivalent examination with Physics, Chemistry and Biology as his/her subjects;
- ii. Attained the age of 17 (seventeen) years on or before 31st December of the year of his/her admission to the First Year of the Course.

Selection of the Candidates for admission to the First Year of the Diploma in Acupuncture course shall be made by merit, interview and aptitude of the Candidate.

COURSE CURRICULUM

First Year-

- 1. Anatomy
- 2. Physiology
- 3. Introduction of Acupuncture

Second Year-

- 1. Acupuncture and Traditional Chinese Medicine
- 2. Pharmacology
- 3. Medicine
- 4. Surgery
- 5. Social and Preventive Medicine
- 6. Forensic Medicine

Third Year-

- 1. Acupuncture Therapeutics
- 2. Medicine
- 3. Surgery
- 4. Gynecology and obstetrics

Total teaching hours should be 800 hours in a year, including theoretical, practical classes and study tour and excluding examination.

INTERNSHIP: 6 MONTHS

ASA - IDENTITY CARD

This is a sample ID card that will be issued to all ASA Patrons and Life Members as discussed earlier.



Acupuncture Science Association (ASA)
(An All India Registered Society under Punjab Societies Registration Act (XXI of 1860) No. 239 of 2014-15)

Regd. Off: Dr. Kotnis Acupuncture Hospital, Salem Tabri, Ludhiana - 141 008
Head Off.: IRIIM Bhawan, Mourigram Stationpara, P.O. Unsanli, Howrah - 711 302
Email: asa-india13@gmail.com // Web: www.acuasaaindia.net

NAME:- C. K. Raju (Krishna Raju)

STATUS:- Patron

MEMB. NO.:- ASA/PM/2014/4

VALID UPTO:- Life

STATE/COUNTRY:- Tamil Nadu



(Signature)
(Dr. Anish Gupta)
President, ASA

(Signature)
(Dr. Debasis Bakshi)
Gen. Secretary, ASA

(Signature)
(Dr. Inderjeet Singh)
Joint Secretary, ASA

AN HUMBLE APPEAL

Really good news for all of us that Dept. of Health Research under Ministry of Health, Govt. of India has invited 4 associations or organizations related to Acupuncture for a meeting at Indian Red Cross Society Building, New Delhi **on October 4, & November 22, 2017** regarding- *Examination of Validity of " Acupuncture" as a system of medicine by Inter-Departmental Committee* and to opine on the following 2 points sent by GOI:

1. "Whether Acupuncture will come under the umbrella of any existing system or not.
2. Sufficient documentations are there or not regarding 'Frame work about qualifications of eligible practitioners, uniform curriculum of different courses, regulatory structure for teaching and training as well as Practitioners

This is the first time officially after nationwide notification, a high level Inter Departmental Committee under Govt. of India will judge all of the three proposals on "Recognition of Acupuncture" though many preparatory meetings took place few years back at ICMR and other offices which of course paved the way of this climax.

In both the meets all these associations or organizations (including ASA India) placed and presented huge documents regarding A-Z of acupuncture therapy and its valid benefits etc.

Later on in the evening, we all met AYUSH MINISTER Honorable ShriPad Nayak at his office and conveyed the outcome of the meet at DHR office.

It is a humble request to all our learned Acupuncture loving friends that our voice should be UNITED so that we can achieve the following goals which are long cherished by lacs of Indian Acupuncture practitioners and Acupuncture loving people in general:-

1. Acupuncture must be recognized as an Independent System of Medicine with equal status like other already recognized systems (Modern Medicine & AYUSH systems) **There is no other option.**
2. All the strata of existing practitioners of acupuncture throughout India must get due and legitimate chance for one time registration (may be in Part 'A' or 'B' or 'C') irrespective of their background. **Below this we all must not accept or agree.**
3. **Immediately after completing the Recognition process, '2003 Administrative Order' by Ministry of Health, Govt. of India must be withdrawn** so that Full-fledged Degree and Diploma courses for 10 + 2 **can be resumed or started** in order to build the proper Acupuncture Doctors as per W.H.O. guideline.
 - We all must have concerted voice to pay due respect to this traditional science and it's lakhs of practitioners in our vast country.
 - This is a golden opportunity for acupuncture to make a history.
 - Thanks and best wishes for a bright future ahead.

Dr. Debasis Bakshi
Gen. Secretary, ASA

Our Website: www.acupunctureindia.co.in

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Our Sincere Thanks to ASA Delhi State Committee
for organizing - “ASA National Convention - December 2017”
On recognition of Acupuncture in India and Ethical Aspects of Acupuncture Practice.

We wish all the delegates a proactive healthy participation !

*Journeys in lives that stay on - help
Churning the healthy ways to come on;
Phoney though are tricks to Con..
Attorneys of goodwill shall hold on !!*

Contributory Donation per copy Rs.50/-