### SYLLABUS

### For Courses affiliated to the

### **KERALA UNIVERSITY OF HEALTH SCIENCES**

### Thrissur 680596



### POST GRADUATE COURSE IN HOMEO MEDICINE

## M.D (HOM.) PSYCHIATRY

## **Course Code: 308**

### (2018-19 Academic year onwards)

### 2018

NEW SYLLABUS

#### 2. COURSE CONTENT

#### 2.1 Title of course

MD (Hom) PSYCHIATRY

#### 2.2 Objectives of course

1) The goal of postgraduate medical education shall be to produce competent specialists and or medical teachers

2) Who shall recognize the health needs of the community and carry out professional obligations ethically.

3) Who shall be aware of the contemporary advance and developments in the discipline concerned

4) Who shall have acquired a spirit of scientific inquiry and is oriented to the principles of research methodology, epidemiology

5) And who shall have acquired the basic skills in teaching of the medical and paramedical professionals

#### **2.3 Medium of instruction:**

The medium of instruction is English

#### 2.4 Course outline

The course shall be of three years duration, including one year of house-job or equivalent thereof

a) All the days of the year will be working days for the postgraduate students.

- b) The candidate should secure 80% attendance for the
- 1) First year, i.e., during house job.
- 2) First half of 2ndyear.
- 3) Last one and half year.

1. A candidate for MD (Hom) shall opt one of the special subject as his specialty at the time of admission and the degree shall be awarded in that specialty.

2. The PG candidate shall pursue a regular course of study and research in the department under the guidance of a guide recognized by the university, emphasis being on practical training; participate in seminars, group discussions, clinical meetings, journal clubs etc.

3. The candidate shall be a resident in the hospital campus and shall be given graded responsibility in the management of patients entrusted to his care. He shall participate in teaching and training of undergraduate student and internees.

4. Candidate is required to write a thesis or dissertation on a subject approved by the University of not less than 10,000 (Ten Thousand) words.

5. The PG student may be permitted to attend seminars, symposium and other academic programs conducted by registered organizations, academic bodies and institutions in and outside state. The head of institution shall sanction duty leave to PG students, limited to 10 days in an academic year.

6. The student shall be required to attend at least 80% of total lecture, seminar, clinical discussion, and journal club and group discussion separately in each paper/subject of the examination in order to become eligible to appear for examination.

7. The different components of attendance of Part I and Part II exam are given below

Name of the paper	% of attendance required
Paper 1	80%
Paper 2	80%
Paper 3	80%

#### **Part l Examination**

#### **Part II Examination**

Name of the subject	% of attendance required
Paper 1 & 2	80%
Paper 3	80%

#### The course shall comprise of the following

- M.D. (Hom.) Psychiatry PART I
  - (i) Paper I Psychiatry
  - (ii) Paper II Research Methodology & Bio-statistics
  - (iii) Paper III Advanced teaching of Fundamentals of Homoeopathy

#### M.D. (Hom.) Psychiatry PART II

- (i) Paper I Psychiatry
- (ii) Paper II Psychiatry
- (iii) Paper III Practice of Medicine

#### 2.5 Duration

The course shall be of three years duration, including one year of house-job or equivalent thereof

#### 2.6 Syllabus

Given under clause "Content of each subject in each year "

#### 2.7 Total number of hours

Given under clause "Content of each subject in each year"

The concept of health care counselling shall be incorporated in all relevant areas.

#### 2.8 Branches if any with definition

Given under clause "Course outline"

#### 2.9 Teaching learning methods

#### TRAINING PROGRAMME

a) Every institution undertaking Post Graduate training shall setup an Academic cell or a curriculum committee, under the chairmanship of a senior faculty, which shall work out the details of the training in each speciality in consultation with other department faculty staff and also co-ordinate and monitor the implementation of these training programmes.

b) The training programme shall be updated as and when required. The structured training programme shall be written up and strictly followed, to enable the examiners to

determine the training undergone by the candidate and the Central council inspectors to assess the same at the time of inspection.

c) The Post Graduate student shall maintain a record (logbook) of the work carried out by them and the training programme undergone during the period of training.

d) The record book shall be checked and assessed by the faculty members imparting the training, monthly.

e) The Post Graduate student shall be required to participate in teaching and training programme of undergraduate students and interns.

#### Method of training:

The emphasis should be on in service training and not on didactic lectures. The candidates should take part in seminars, group discussions, clinical meetings etc. The candidate should be required to write a thesis or dissertation with detailed commentary, which should provide the candidate with necessary background of training in research methods and techniques along with the art of writing research papers and learning and making use of library. The candidate shall be a resident in the campus and shall be given graded responsibility in the management and treatment of patients entrusted to his case. He shall participate in teaching of undergraduate students or interns. Adequate number of posts of clinical residents shall be created for this purpose.

A candidate for M.D. (Hom.) shall opt one of the subjects of speciality at the time of admission and the degree shall be awarded in that speciality.

#### 2.10 Content of each subject in each Part

#### PSYCHIATRY

#### **1. Applied Psychiatry**

#### **Basic Disciplines relevant to understanding Psychiatric Illnesses:**

#### A. Study of Normal Behaviour:

- 1. Basic psychological processes Cognition, Affect, Conation, and their neural basis
- 2. Evolution and its effect on understanding the traits, emotional and social behavioural characteristics of the human being.

- 3. Psycho-social development and maturation from childhood to old age-normal characteristics and the relevance to a Homoeopathic clinician
- 4. Socio-economic, community, religious and cultural determinants of behaviour and their reflections on community susceptibility
- 5. Personality as an integrated expression of the aspirations of the human being. Theories of Personality relevant to a Homoeopathic clinician

#### **B.** Abnormal Behaviour and its Causes

- 1. Biological-Genetic, Intrauterine and Neurobiological factors
- 2. Nutritional
- 3. Psychological-Life events
- 4. Socio-cultural context

### C. Psychopathology and Psychiatric Symptomatology-elicitation, identification and differentiation of signs and symptoms

- 1. Disturbances of Thinking
- 2. Disturbances of Perception
- 3. Disturbances of Mood
- 4. Disturbances of Consciousness
- 5. Disturbances of Memory
- 6. Disorders of Language
- 7. Disorders of Will
- 8. Disturbance of Judgement
- 9. Disorder of Self
- 10. Somatic Disturbances in Psychiatric Illnesses
- 11. Disturbances of Behaviour and Motor activity
- 12. Disturbances of Interpersonal relationships

# D. Classification of Psychiatric Disorders-Principles and Systems viz. DSM/ICD Systems; Homoeopathic approach

#### 2. Miasmatic Study of Diseases, Cases and Medicine:

Application of Knowledge in terms of Clinical, Pathological, Immunological, Functional, Structural changes in a cell–tissue–organ–system to understand the Miasm. Study the Evolutionary aspect of diseases, specifically in terms of Psora – Sycosis – Tubercular – Syphilis. Application of this knowledge into the prescription and management of the case.

Detailed study of aphorism 210 to 230

Mental illness as one-sided diseases

Concept of common and characteristics symptoms and totality in mental illness.

Scope & limitations of Homoeopathy in comparison to other systems of medicine in the treatment of mental diseases.

#### 3. Diagnostic procedures

Utility of Lab Investigations in the Diagnosis of Neuro Psychiatric illnesses:

Pathological, radiological and EEG

Tests of intelligence, Cognitive functions and Personality

Other important and specific investigations to diagnose co morbid diseases

#### 4. Practice of Homoeopathy in Psychiatry

Comprehensive and holistic approach in the management of Psychological disorders Psychiatric interview of adults and children, evaluation and follow up according to the homoeopathic principles along with holistic consideration of co morbid conditions

#### PART I

#### I. PSYCHOLOGY

#### Module I

- 1. Introduction
  - a) Definition
  - b) Nature
  - c) Subject matter
  - d) Brain behaviour
- 2. Methods of Psychology
  - a) Experimental
  - b) Questionnaire (Inventory)
  - c) Clinical
  - d) Survey
  - e) Case study
- 3. Observation
- 4. Developmental Theories
  - a) Psycho analytical / neo Freudians
  - b) Psycho- social
  - c) Behavioural
  - d) Humanistic

- e) Cognitive psychiatry
- f) Interpersonal psychology
- 5. Motivation
  - a) Classification theories; Homeostasis
  - b) Cognitive approach, frustration, Conflicts, Mental Mechanisms
  - c) Stress: Meaning, Definition, types and its effects on body
  - d) Mind body relationship
  - e) Sources of Stress / Coping with stress
  - f) Stress Management. (Relaxation, Biofeedback)
- 6. Psychological Process:
  - a) Sensation, perception, Attention Study of Disorders in each of them.
- 7. Emotions:
  - a) Characteristics, Expression (vocal, nonverbal)
  - b) Internal physical changes, Emotion & Health
- 8. Personality
  - a) Definition, Characteristics, Traits, factors influencing Personality
  - b) Assessment
- 9. Intelligence:
  - a) Definition, Nature, Growth, Determinants, Assessments, Application
- 10. Learning:
  - a) Types Classical conditioning, Operant conditioning
  - b) Cognitive learning application in medicine
- Memory & Forgetting: a) Process, types, Causes of forgetting, methods to improve memory
- 12. Physiological basis of behaviour

#### **Module II**

#### 1. Historical aspect relevant to the study of Mental Diseases:

- i. Historical review of the development of Psychiatry
- ii. Hahnemann's contribution to the understanding of Mental Disorders

Western Philosophy starting from Greek period and the further growth & development of Philosophy in western world. The study of philosophy is necessary to explore in depth the theoretical and practical problems of Homoeopathy and

general medical science. This is necessary for a postgraduate to achieve a holistic vision

- 2. Behavioural and Social Sciences relevant to Mental Disorders
  - General Psychology with schools of the Psychology, Theories of Personality Development, Special dimensions of behaviour & current issues, Doctor – Patient relationship, Patient interviewing & study of therapeutic relationship.
- 3. Psychological Foundations of Clinical Psychiatry.

Psycho- Bio- Social Model Of Disease, Neuro- Physiology, Neuro- Chemistry, Neuro- Anatomy, Neuro- Psychology, Neuropathology, Psycho- Neuro Immunology, Psycho- Neuro Endocrinology, Neuropsychiatry, Neurogenetics Neurological Examination With Neuro-Imaging Related To Mental Disorders. Chronobiology

#### 4. Aetio-pathogenesis of Psychiatric disorders, Psychopathology

Concept of normality & Deviance in behaviour, Psychiatric Symptomatology, concept of stress, psychological testing, Classification of Psychiatric Disorders

#### **Module III**

1. Examination and diagnosis of the psychiatric patient.

Psychiatric Interview, History and Mental Status Examination, Psychiatric Rating scales, Clinical Neuropsychology and Intellectual Assessment of Adults, Personality Assessment: Adults and Children, Neuropsychological and Cognitive Assessment of Children, Medical Assessment and Laboratory Testing in Psychiatry, Neuroimaging in Psychiatry, Physical Examination of the Psychiatric Patient.

- 2. Psychotherapies
- 3. Study of Mental diseases in view of ICD 10 and DSM V classification
- 4. Critical review of Hahnemannian Classification of Mental Diseases as elucidated in the Organon in the light of ICD & DSM classifications.
- 5. Principles of clinical research in Psychiatry

#### II. Research Methodology & Biostatics.

- 1. Research Methodology:
  - a) Research in Biomedicine.
  - b) Need of Research and Research Challenges in Homoeopathy.
  - c) Types of Research Studies.

- d) Planning of Research Studies (which includes Research Questions, Research Hypothesis, Aims & Objectives, Literature Review, Study Design, Study Sample, Randomization, Blinding, Intervention, Variables, Outcome assessment etc.).
- e) Design and Conduct of Clinical Trials.
- f) Data Collection and Data Management.
- g) Assessing and Reporting Adverse Events.
- h) Ethical Issues in Biomedical Research.
- i) Writing & Publishing Research Studies.
- 2. Biostatistics
  - a) Definition and scope of Biostatistics in Clinical Research.
  - b) Types of Data and methods of Data presentation.
  - c) Descriptive Statistics (Mean, Median, Mode, SD and Variance etc.).
  - d) Correlation and Regression.
  - e) Sampling techniques and sample size estimation.
  - f) Measures of Morbidity and Mortality.
  - g) Data Analysis.
  - h) Use of Statistical Software

#### III. Advanced teaching of the Fundamentals of homoeopathy-

1. Homoeopathic concept of health with a comparative study of modern concept- concept of vital force, Susceptibility, Constitution, temperament.

2. Homoeopathic concept of Disease- definition, different types of causes, classification, symptomatology, Evaluation of symptoms.

3. Posology –principles and criteria for repetition and selection of potency.

- 4. Auxiliary measures.
- 5. Prognosis after giving the remedy (Remedy reaction)
- 6. Prevention of Diseases-homoeopathic and modern concept.
- 7. Drug Proving-Hahnemann's method and modern view
- 8. Dynamisation concepts in different editions of Organon of Medicine

- 9. Palliation and suppression: different views and scope of homoeopathy in these areas.
- 10. Application of Kent's Repertory in clinical practice. Repertorial approach in case taking and case taking in different clinical situations.
- 11. A brief idea about Hompath, Radar Opus and Complete dynamics.
- 12. Miasmatic, therapeutic & reportorial approach in
  - i) Common infectious diseases,
  - ii) Nutritional & metabolic disorders,
  - iii) Water & Electrolyte disturbances
  - iv) Palliative care and Pain management

With special emphasis to their clinical features, diagnosis, prognosis, complications

and

management.

13. Micro teaching- teacher training and faculty development techniques

14. Recent advances in homoeopathic research. Application of genetics & genomics in research

of homoeopathy

#### 15. In-depth study of select polychrest remedies

1	Alumina	26	Lycopodium
2	Ammonium carb	27	Mag carb
3	Antim crud	28	Medorrhinum
4	Apis mel	29	Merc sol
5	Arg nit	30	Natrum mur
6	Ars alb	31	Natrum sulph
7	Aurum met	32	Nitric acid
8	Baryta carb	33	Nux vom
9	Calc carb	34	Phosphoric acid
10	Calc phos	35	Phosphorus
11	Causticum	36	Platina
12	Cinchona	37	Plumbum met
13	Cuprum met	38	Psorinum
14	Ferrum met	39	Pulsatilla

15	Flouric acid	40	Sepia
16	Graphites	41	Silicea
17	Hepar sulph	42	Staphysagria
18	Hyoscyamus	43	Stramonium
19	Ignatia	44	Sulphur
20	Iodum	45	Syphilinum
21	Kali bich	46	Tarentula Hispanica
22	Kali carb	47	Thuja
23	Lac caninum	48	Tuberculinum
24	Lachesis	49	Veratrum alb
25	Lilium tig	50	Zincum met

#### PART II

#### **PAPER 1- Psychiatry**

#### Module IV

- i. Dementia in Alzheimer disease
- ii. Vascular dementia
- iii. Dementia in other diseases classified elsewhere
- iv. Unspecified dementia
- v. Organic amnesic syndrome, not induced by alcohol and other psychoactive substances
- vi. Delirium, not induced by alcohol and other psychoactive substances
- vii. Other mental disorders due to brain damage and dysfunction and to physical disease
- viii. Personality and behavioural disorders due to brain disease, damage and dysfunction
- ix. Unspecified organic or symptomatic mental disorder
- x. Mental and behavioural disorders due to use of alcohol
- xi. Mental and behavioural disorders due to use of opioids
- xii. Mental and behavioural disorders due to use of cannabinoids
- xiii. Mental and behavioural disorders due to use of sedatives or hypnotics
- xiv. Mental and behavioural disorders due to use of cocaine
- xv. Mental and behavioural disorders due to use of other stimulants, including caffeine
- xvi. Mental and behavioural disorders due to use of hallucinogens
- xvii. Mental and behavioural disorders due to use of tobacco
- xviii. Mental and behavioural disorders due to use of volatile solvents

xix. Mental and behavioural disorders due to multiple drug use and use of other psychoactive substances

#### Module V

- i. Schizophrenia
- ii. Schizotypal disorder
- iii. Persistent delusional disorders
- iv. Acute and transient psychotic disorders
- v. Induced delusional disorder
- vi. Schizoaffective disorders
- vii. Other nonorganic psychotic disorders
- viii. Unspecified nonorganic psychosis

#### Module VI

- i. Manic episode
- ii. Bipolar affective disorder
- iii. Depressive episode
- iv. Recurrent depressive disorder
- v. Persistent mood [affective] disorders
- vi. Other mood [affective] disorders
- vii. Unspecified mood [affective] disorder
- viii. Phobic anxiety disorders
- ix. Other anxiety disorders
- x. Obsessive-compulsive disorder
- xi. Reaction to severe stress, and adjustment disorders
- xii. Dissociative [conversion] disorders

#### Module VII

- i. Application of general philosophy in homoeopathy
- ii. Dynamic concept of health, disease & cure.
- iii. Holistic concept
- iv. Concept of individualization.
- v. Concept of totality
- vi. Conversion of psychiatric symptoms from the case taken into rubrics of various repertories

#### **PAPER II - Psychiatry**

#### Module VIII

- i. Somatoform disorders
- ii. Other neurotic disorders
- iii. Eating disorders
- iv. Nonorganic sleep disorders
- v. Sexual dysfunction, not caused by organic disorder or disease
- vi. Mental and behavioural disorders associated with the puerperium, not elsewhere classified
- vii. Psychological and behavioural factors associated with disorders or diseases classified elsewhere
- viii. Abuse of non-dependence-producing substances
  - ix. Unspecified behavioural syndromes associated with physiological disturbances and physical factors

#### Module IX

- i. Specific personality disorders
- ii. Mixed and other personality disorders
- iii. Enduring personality changes, not attributable to brain damage and disease
- iv. Habit and impulse disorders
- v. Gender identity disorders
- vi. Disorders of sexual preference
- vii. Psychological and behavioural disorders associated with sexual development and orientation
- viii. Other disorders of adult personality and behaviour
- ix. Unspecified disorder of adult personality and behaviour
- x. Mild mental retardation
- xi. Moderate mental retardation
- xii. Severe mental retardation
- xiii. Profound mental retardation
- xiv. Other mental retardation
- xv. Unspecified mental retardation

#### Module X

i.Specific developmental disorders of speech and language

- ii.Specific developmental disorders of scholastic skills
- iii.Specific developmental disorder of motor function
- iv. Mixed specific developmental disorders
- v.Pervasive developmental disorders
- vi. Other disorders of psychological development
- vii.Unspecified disorder of psychological development
- viii.Hyperkinetic disorders
  - ix.Conduct disorders
  - x.Mixed disorders of conduct and emotions
  - xi.Emotional disorders with onset specific to childhood
- xii.Disorders of social functioning with onset specific to childhood and adolescence
- xiii.Tic disorders
- xiv.Other behavioural and emotional disorders with onset usually occurring in childhood and adolescence

#### Module XI

- i. Consultation Liaison Psychiatry
- ii. Community Psychiatry with special reference to contemporary problems.
- iii. Psychiatry in the educational setting
- iv. Geriatric Psychiatry
- v. Socio cultural Psychiatry
- vi. Forensic Psychiatry and Ethics in Psychiatry
- vii. Preventive aspects of Mental Disorders
- viii. Recent advances in psychiatry
- ix. Emergency Psychiatry
- x. Detailed study of aphorism 210 to 230
- xi. Mental illness as one sided diseases
- xii. Concept of common and characteristics symptoms and totality in mental illness.
- xiii. Scope & limitations of Homoeopathy in comparison to other systems of medicine in the treatment of mental

#### Paper III - Practice of Medicine

System – Based diseases- diagnostic procedures, miasmatic basis, general and Homoeopathic Management

- i. Cardio Vascular system
- ii. Respiratory system

- iii. Endocrine system
- iv. G.I.T. including liver and pancreas
- v. Haematological disorders
- vi. Musculoskeletal disorders
- vii. Neurological disorders
- viii. Genitourinary disorders
  - ix. Common dermatological conditions

#### **Paper Division**

#### PART I

#### **Paper I – Psychiatry**

- Module 1 Module II
- Module III

#### Paper II- Research Methodology & Biostatics

- i. Research Methodology
- ii. Biostatics

#### Paper III- Advanced teaching of the Fundamentals of homoeopathy

#### PART II

#### Paper I - PSYCHIATRY

Module IV Module V Module VI Module VII

#### Paper II PSYCHIATRY

Module VIII Module IX Module X Module XI

#### Paper III - PRACTICE OF MEDICINE

System – Based diseases- diagnostic procedures, miasmatic basis, general and Homoeopathic Management

- i. Cardio Vascular system
- ii. Respiratory system
- iii. Endocrine system
- iv. G.I.T. including liver and pancreas
- v. Haematological disorders
- vi. Musculoskeletal disorders
- vii. Neurological disorders
- viii. Genitourinary disorders
- ix. Common dermatological conditions

#### 2.11 No: of hours per subject

Residential programme

#### 2.12 Practical training

Given under clause No: 2.10

#### 2.13 Records

Records, 40 cases followed up during Part I Period

Each candidate shall maintain at least the records of 40 cases (10 Acute & 30 chronic cases) treated by them and well documented in the concerned specialty

Logbooks, mid marks obtained in tests will be maintained by the head of department and will be made available to the University or Central council of Homeopathy.

#### 2.14 Dissertation:

#### THESIS

Every candidate shall carry out work on an assigned research project under the guidance of a recognized Postgraduate teacher as a guide. All Postgraduate students should submit a synopsis of the thesis duly attested by the competent authorities in the prescribed proforma with in twelve months from the date of admission. Candidate is required to write a thesis or dissertation on a subject approved by the University of not less than 10,000 (Ten Thousand) words.

Each candidate should submit the dissertation (4copies) six months prior to the completion of the course. The University will sent it to four experts (two internal two

external) with instructions to return it within two weeks after valuation. Dissertation may classified as "Accepted", Accepted with modifications" or "Rejected". At least two experts should accept the dissertation for it to be considered as accepted. If it is accepted with modifications, the candidate will be given 45 days for correction and resubmission through proper channel. If it is rejected, the candidate will not be permitted to appear for the examination. She/he should repeat the work and submit within a period of six months. Such dissertations will be valued in the examination centre itself at the time of practical/clinical examination

#### 2.15 Speciality training if any

Not applicable

#### 2.16 Project work to be done if any

Not applicable

#### 2.17 Any other requirements [CME, Paper Publishing etc.]

Publication/ acceptance of at least one research paper/article in a scholarly journal.

Text	Text Books					
Sl. No	Author	Name of Book				
1.	A.P.A.	Hand Book Of Psychiatry Measures.				
2.	A.P.P.	D.S.M IV: Diagnostical / Statistics Manual of Mental Disorders				
3.	Ahuja	A short Text Book Of Psychiatry				
4.	Ahuja	Text Book Of Postgraduate Psychiatry				
5.	Alder	Psychology and Sociology applied to medicine				
6.	Alexander and Selesnick:	The History of Psychiatry.				
7.	Arieti Silvan	American Handbook of psychiatry				
8.	Bhatia	Differential Diagnosis In Psychiatry.				
9.	Bhatia	Essentials of Psychiatry.				
10.	Bhugra	Case presentation in Psychiatry				
11.	Carso	Abnormal Psychology				
12.	Chavan	Community Mental Health in India				
13.	Dhakra`s	Psychiatry				
14.	Dubovsky	Concise Guide to Clinical Psychiatry				
15.	Frank	Behavioral Science / Psychiatry				

#### 2.18 Prescribed/recommended textbooks for each subject

16.	Gallavardin	Repertory of Psychic Medicines with Materia Medica
17.	Greogry	Psychiatry.
18.	Hamilton Max	Fish's Clinical Psychopathology
19.	ICD	ICD – 10 classification
20.	Kaplan & Sadock	Synopsis of Psychiatry
21.	Lishmann V.A	Organic Psychiatry
22.	Mayer & Gross	Clinical Psychiatry
23.	Michele's Robert(Ed)	Psychiatry 3 volumes
24.	Morgan and King	Introduction to psychology.
25.	Munn Norman	Normal Psychology
26.	Strub	The Mental Studies: Examination in Neurology
27.	Strub	Neurobehavioral discovery
28.	Susan Ayers	Psychology for Medicine
29.	Tasman	Psychiatry
30	John R Geddes	New Oxford Text book of psychiatry
31	Andrews Sims	Symptoms in the mind
32	Razeena Viswambharan	A text book of General Psychology for health professionals

#### 2.19 Reference books

- 1. The art of teaching Medical students-Pritha Bhuiyan
- 2. Essential skill for a Medical teacher-Ronald M Harden
- 3. Genetics and Genomics-WaseemAhamed
- 4. Genetics in Medicine-Thompson and Thompson
- 5. Davidson's principles and practice of Medicine
- 6. Harrison's Principles of Medicine.
- 7. Organon of medicine- Hahnemann 5th and 6th edition
- 8. Lectures on Homoeopathic philosophy Dr. J.T. Kent
- 9. The Genius of Homoeopathy Dr. Stuart Close
- 10. The principles and Art of Cure by Homoeopathy H.A. Roberts
- 11. A comparison of chronic miasms Phyllis Speight
- 12. Miasmatic Diagnosis S.K. Banerjee
- 13. Lectures on Homoeopathic Materia Medica -Kent JT
- 14. Leaders in homoeopathic Therapeutics- Nash EB
- 15. Key Notes -HC Allen
- 16. A Clinical Materia Medica- Farrington EA
- 17. Pocket Manual of the Homoeopathic. Materia Medica -Boericke W

- 18. A study on Materia Medica -Choudhuri N.M.
- 19. Keynotes and Red Line symptoms of the Materia Medica- Lippe A
- 20. A manual of Materia medica, Therapeutics and Pharmacology with Clinical Index -Blackwood AL
- 21. Analysis of the Rubric/ Symptoms of Dr Kent's Repertory : Dr R P Patel
- 22. Essentials of Repertorisation : Dr S K Tiwari

#### **2.20 Journals**

The PG students shall be familiar with all available journals related to the subject both in medical and allied aspects

#### 2.21 Logbook

Logbook serve as a document of the trainee's work. The trainee shall maintain this Logbook of Journal review presentation/ Seminar presentation/ Clinical works in IPD and OPD/ Clinical presentation/ Teaching skill practice and Dissertation presentation and shall be counter signed by concerned HOD

#### **3 EXAMINATIONS**

#### 3.1 Eligibility to appear for exams [including Supplementary]

As per the clause "Schedule i.e., approximate months of regular / supplementary exams" given below

#### 3.2 Schedule of Regular/Supplementary exams

- a) The university examination for a subject shall be conducted twice in a year at an interval of 4-6 months, as notified by the university from time to time.
- b) The supplementary examination will be held within 6 months of regular examination and failed students shall be eligible to appear in its supplementary examinations as the case may be.
- c) In case a student fails to appear in regular examination for cognitive reason, he/she will appear in supplementary examination as regular students. In such cases, his/ her nonappearance in regular examination will not be treated as an attempt. Such students

after passing examination will join the studies with regular students and appear for next professional examination after completion of the required period of study.

#### 3.3 Scheme of examination showing maximum marks and minimum marks

The examination shall be conducted in two parts namely:

(a) M.D. (Hom.) Part I, which is to be held six months after completion of house job of

one year's duration.

(b) M.D. (Hom.)Part II, which is to be held one year six months after Part I examination.

#### **Part I Examination**

Every candidate seeking admission to Part I of the examination shall submit application to the University with the following documents, namely:

- a) A certificate from the Principal or Head of the institution about the completion of the course of studies in the subjects in which the candidate seeks admission to the examination; and
- b) Certificate of having completed one-year house job in the collegiate hospital.

#### Examiners

a. Qualifications:

- i. MD (Hom). Regular degree (3 years of regular study).
- ii. Professor or Reader/Associate Professor with a total teaching experience of not less than seven years in the concerned subject
- b. A panel of examiners shall be prepared by the University for a period of 3 years.
- c. One of examiners shall be the guide. Minimum number of examiners shall be four out of which 50% should be external.

With a view to providing experience to prospective internal examiner, Skilled Assistants may be permitted, in concurrence with the External Examiners, to be present in the Examination Hall. The role of skilled assistants, however, shall be confidential, only to carrying out the instructions of the Examiners

(i) Part-IM.D. (Hom.)Examinations-Full marks for each subject and minimum number of marks required to pass shall be as follows:-

Subjects	Theor	eory Practical including viva-voce		Total	Pass marks	
	Max	Min	Max	Min		
1. Psychiatry	100	50	50	25	150	75
2. Research methodology & bio- statistics	100	50	-	-	100	50
3. Advanced teaching of fundamentals of Homoeopathy	100	50	50	25	150	75

(II) Part –II M.D. (Hom.) Examination-Full marks of each subject and minimum number of marks required to pass shall be as under

Subjects	Theory	,	Practical including		Total	Pass marks
			viva-voce			
	Max	Min	Max	Min		
Paper 1 Psychiatry	100					
Paper 2 Psychiatry	100	150	250	125	550	275
Paper-3-Practice of	100					
Medicine						

#### 3.4 Papers in each year

As given under clause no: 2.10

#### 3.5 Details of theory exams

As given under clause no: 2.10 & 3.3

#### 3.6 Model question paper for each subject with question paper pattern

#### 3.7 Internal assessment component

Not applicable

**3.8 Details of practical/clinical exams** to include Duration Marks Types of cases/ questions

As given under clause "Content of each subject in each year" & "Scheme of examination showing maximum marks and minimum marks". See 3.3 & 3.10

#### 3.9 Number of examiners needed (Internal & External) and their qualifications

As given under clause no: 3.3

#### 3.10 Details of viva:

Division of marks

Viva-voce shall be conducted separately by each examiner and coordinated by the senior most internal examiner. The same person shall finalize the mark sheet of practical and Viva-voce examinations, in consultation with the other examiners. The examination shall be aimed to test the clinical acumen, ability and working knowledge of the student in the practical aspect of the speciality and his/her fitness to work independently as a specialist. Division of marks of viva/ practical should be as follows

#### PART 1

#### **PAPER I-** Psychiatry

Practic	al	
Sl No	Item	Marks
1	Short case	5

2	Long case	10
3	Log book	10
4	Total (1+2+3)	25
Viva V	oce	
5	Viva Voce	25

### PAPER III- Advanced teaching of the Fundamentals of homoeopathy

Practic	al	
Sl No	Item	Marks
1	Long case	10
2	Micro Teaching	10
3	Log book	5
4	Total (1+2+3)	25
Viva V	oce	
5	Viva Voce	25
6	Grand total (4+5)	50

### PART II

Practical:					
Sl No	Item			Marks	
1	Short case			20	
2	Long case	Presentation	10	50	
		Clinical Examinations-	10		
		Provisional diagnosis, D/d ,investigations	10		

		General and medicinal management	10	
3	Spotters-(X- marks each	-ray ,ECG, Lab investigations etc.,) (5 item	ns x 3	15
4	Micro teach	5		
5	Log book	10		
6	Total (	(1+2+3+4+5)		100
Viva v	oce based on			
7	Speciality			100
8	Dissertation	50		
9	<b>Total</b> (7+8)	)		150
10	Grand Tota	al(6+9)		250

#### **4 INTERNSHIP**

#### 4.1 Eligibility for internship

Not applicable for PG courses

#### 4.2 Details of internship

Not applicable for PG courses

#### 4.3 Model of Internship Mark lists

Not applicable for PG courses

#### **5 ANNEXURES**

#### 5.1 Check Lists for Monitoring:

Log Book, Seminar Assessment etc. As shown under clause "Logbook

#### **5.2 Template for Dissertation**

As given under clause "Dissertation:

#### 5.3 Template for Mark List showing Maximum & Minimum

### KERALA UNIVERSITY OF HEALTH SCIENCES THRISSUR – 680596

#### STATEMENT OF MARKS

Name of the Candidate: Name of College: Reg.No:

Name of Course: MD (Hom) PSYCHIATRY Examination: MD (Hom) PSYCHIATRY Part II Regular Examination Month & Year of Examination: Date of Publication:

Subjects	Theory			Practical/ viva		Total		Remarks		
	Max	Min	Awa rded	Max.	Min.	Awar ded	Max	Min.	Awa rded	
Paper 1 - Psychiatry	100	50								
Paper 2- Psychiatry	100	50		250	125		550	275		
Paper 3- Practice of	100	50								
medicine										
Grand Total 550 275										
Total in words										

Annexure 1

### **MD** (Hom) Part I Degree Examinations **Speciality – Psychiatry**

### **Psychiatry - Paper I**

#### **Time: 3 Hours**

#### • Answer all questions

Essay 1. Do you find any value in Daniel Goleman's claim 'EQ matters more than IQ'? Draw upon the relevant psychological evidence and illustrate your answer with suitable examples.

#### Write in detail

80)

- 2. Describe the stages of Psychosexual development as described by Sigmund Freud
- 3. Factors responsible for the success of psychotherapies of all kinds.
- 4. Narrate the interviewing techniques in non-cooperative patient.
- 5. Explain about Life stress and mental illness.
- 6. Write in detail about Intelligence Tests used in India.

#### Max. Marks: 100

(20)

(8x10 =

- 7. State the Utility of Hahnemannian classification of mental disorder.
- 8. Anxiety and Tubercular Miasm.
- 9. Compare and contrast the following
  - a) Introspection and observation
  - b) Developmental theories of Freud and Neo Freudians

### MD (Hom.) Part I Degree Examinations Paper II - Research Methodology and Biostatistics (Common to all specialties)

Time: 3 Hrs		Max. Marks: 100
	• Answer all questions	
	• Draw diagrams whenever necessary	
Essay:		(20)

1. Discuss the need and utility of planning of statistical design. Explain clearly the steps involved in conducting a clinical trial.

#### **Short Essays:**

- 2) Two types of diets were administered to two groups of boys for increase in weight and the following increases in weight (in lbs.) were recorded after 20 days Increase in weight Diet A: 4, 3, 2, 2, 10, 5, 6, 3 :Diet B: 5, 4, 4, 2, 3, 2, 7, 1 .Test whether there is any significant difference between the two diets with respect to increase in weight.
- 3) What are the research challenges in Homoeopathy and the methods to overcome it?
- 4) How will you plan a research study?

#### (8x10=80)

- 5) What are different methods of data collections?
- 6) Define the scope of Biostatics in clinical research
- 7) Which are the different sampling techniques and compare its merits
- 8) Discuss merits and demerits of different statistical soft wares
- 9) Difference between Mean, Median and Mode

### **MD** (Hom.) Part I Degree Examinations Paper III - Advanced Teaching of Fundamentals of Homoeopathy (Common to all speciality)

### Time: 3 Hrs Max. Marks: 100 • Answer all questions • Draw diagrams whenever necessary **Essay:** (20)

1. Discuss the role of miasms in the pathogenesis, clinical presentation and complications of Type II Diabetes Mellitus. Discuss the therapeutics based on Kent's Repertory

#### **Short Essays:**

- 2. Elaborate the sycotic component of Medorrhinum & Thuja in the mental sphere.
- 3. Illustrate the remedy relationship between Pulsatila, Silicea & Fluoric acid
- 4. What is anamnesis? How does the history, history of presenting complaint, family history & treatment history help in case taking & repertorisation. Explain with example from different repertories
- 5. Comment on the merits of software in repertory. Make brief note on salient features of RADAR, COMPLETE DYNAMICS & HOMPATH

#### (8x10=80)

- 6. Describe the various criteria for selection of potency & repetition of remedy
- 7. Discuss in detail on evaluation of symptoms
- 8. Write a note on disorders of copper metabolism, its clinical presentation & miasmatic basis
- 9. Briefly describe Complication of Mumps, with indications of Pulsatilla & Jaborandi in management

### MD (Hom) Part II Degree Examinations Speciality – Psychiatry Psychiatry - Paper I

**Time: 3 Hours** 

**Total Marks: 100** 

•Answer all Questions.

#### **Essays:**

(20)

1. State your understanding of the role of Nature – Nurture in the development of Schizophrenia.

A. Explain this with the help of Sullivan's model of Inter personal relationship.

- B. Explain miasmatic aspects with the help of clinic-pathological correlation.
- C. Give indications of four commonly used remedies.

Short (8x10=80) **Essays:** 

2. Discuss the Psychiatric manifestations, differential diagnosis and Homoeopathic management of Chronic Alcohol abuse with dependence.

3. Work out the Psychodynamic model of Anxiety Disorders as per Freud along with the therapeutics and miasmatic understanding.

4. List the type of psychological disorders generally seen following natural or man-made calamities e.g. earthquakes, floods etc. in cities. Describe any one of these in detail. What is the role of Homoeopathy in the management of these conditions?

5. Susceptibility and Posology in Alzheimer's disease.

6. Mini mental state examination.

7. Define 'Mental Disorder'. Describe the process of arriving at Psychiatric Diagnosis.

8. Management of Panic disorder.

9. Indication of Aurum met and Natrum Sulph in the treatment of Major Depression

### MD (Hom) Part II Degree Examinations Speciality – Psychiatry Psychiatry - Paper II

#### **Time: 3 Hours**

#### Total Marks: 100

#### •Answer all Questions.

#### **Essays:**

20

8x10 = 80

1. State your understanding of the Psycho-Physiological disorders.

A. How would you like to treat them?

B. Give indications of four commonly used remedies.

#### **Short Essays**

 What is Type A personality? What are the illnesses these personalities are prone to and why? Describe in detail the case taking and Homoeopathic management of "I*rritable Bowel Syndrome*".

- 3. An anxious mother despairing for her 14years old son brought to the child psychiatric clinic with the main complaint of academic under achievement. What is your advice? Give us psycho physiological basis and suggest your own remedial measures for the condition.
- 4. How will you examine a Psychiatry case and explain in detail about case taking by a Homoeopathic Psychiatrist.
- 5. What is Mens Rea, Define "Rape" classify and discuss the management of its victims.
- 6. Discuss the influence of culture on the psychopathology and treatment of mental disorders.
- 7. Admission and Discharge procedures under Mental Health Act.
- 8. Scope and limitations of Homoeopathy in the treatment of Psychiatric cases.
- 9. Discuss in detail the treatment of Depression in Geriatrics.

### MD (Hom.) Part II Degree Examinations Paper III – Practice of Medicine

### (Common for Materia Medica, Homoeopathic Philosophy, Repertory & Psychiatry Specialties)

#### Time: 3 Hrs

#### Max. Marks: 100

- Answer all questions
- Draw diagrams whenever necessary

#### **Essay:**

1. Discuss the differential diagnosis of Polyarthritis. How will you diagnose and manage a case of SLE. Comment on the role of miasms in its aetio-pathogenesis & clinical manifestations.

#### **Short Essays:**

#### (8x10=80)

(20)

- 2. Discuss the differential diagnosis of tremor. Write the clinical presentation and role of anti miasmatic medicines in the management of Parkinsonism
- Discuss investigations to be done in a patient presenting with secondary hypertension.
  Write a note on complications of Hypertension
- 4. Write the various radiological changes in the chest x-ray in a patient with Bronchogenic Carcinoma. Discuss the role of repertory in managing a case of bronchogenic carcinoma.
- 5. Write the differential diagnosis of papulo-squamous skin disorders. Discuss the clinical presentation and its homoeopathic management & reportorial approach
- 6. Discuss the aetiopathology & clinical presentation of hereditary spherocytosis. Comment on its miasmatic background.
- Write in detail the investigation to be done in a patient presenting acute pancreatitis. Discuss its complication and rubrics.
- 8. Discuss the cause and clinical presentation of hyponatremia
- 9. Comment on Renal Profile. Discuss the management of acute renal failure. Give important rubrics from synthesis