It is commonly believed that Hahnemann supported only holistic and individualistic approach of homeopathy. We often miss his advice in his Lesser Writings (page 687). “...by an infinite number of trials of all imaginable simple substances used in domestic practice in a well defined disease, which shall constantly present the same characters a true certainly efficacious specific remedy for the greater number of individuals suffering from the same disease might certainly be discovered...”
Classical Homeopathy has no specific remedy for any disease by name, but it has specificity for each individual case of disease.
Typical classical homeopathic initial consultation took 117 +/- 43 minutes for each adult patient and 86 +/- 36 minutes for each child patient

Becker-Witt et al, 2004

What is commonly known as Classical Homeopathy today is basically an effort to keep the practice of homeopathy unchanged from the time of Hahnemann. The problem with this is that homeopathy is a science.

Science, as we know today embodies a process of continuous development in the course of which observational facts change with piling up of more statistics and improved instruments and methods of observation.
Homeopathic prescription written by Pandit Ishwar Chandra Vidyasagar in the year 1880

Dr. Pareshnath Banerji
1891 - 1971

Netaji Subhas Chandra Bose with Dr. Pareshnath Banerji
He found that about 80% of his patients suffering from common ailments were curable by specific Homeopathic remedies, making his clinical dispensation as quick as lightning. In the remaining 20% he gave the greatest importance to the characteristic symptoms narrated by the patients themselves.

Acute Rheumatoid Arthritis with pain

↓

Medorrhinum 200C, one dose every two hours, till relief

Bronchiectasis Sicca with Hemoptysis

↓

Bryonia

↓

Aggravates the Hemoptysis

↓

Bryonia + Aconite (mixed)

↓

Quicker Relief
In 1960, Dr. Prasanta Banerji’s own Clinic was set up at 114A, Ashutosh Mukherjee Road, Kolkata - 700 025, West Bengal, India.
“The Banerji Protocols™”
~ What are they?

Banerji Protocols™

The Banerji Protocols™ are an evolved system of Medicine, in which Specific Homeopathic Medicines, in Specific Dilutions and Pre-Set Dosage Patterns, are prescribed for Specific Diagnosis of Disease.
The scientists at UTMDACC experimented in their laboratory on different cancer cell lines.

We have shown countless number of cases showing complete remission by using the Banerji Protocols™, which, for now, remain constant for every different disease diagnosis.

The Banerji Protocols™: Why use them??

These protocols are easy to learn since the focus is on the diagnostic approach thus the case-taking time is shortened.

The fixed nature of prescription for specific diseases along with specific potencies standardizes medicine selection in the Banerji Protocols™ similar to conventional medicine.
The Banerji Protocols™: Why use them??

We have specific medicines with fixed dilution for every disease based on our experience of over 75 years of collective observations, which is very effective. Quick case taking and prescription in a few minutes.

\[ \text{DIAGNOSIS} \]

\[ \downarrow \]

\[ \text{PRESCRIPTION} \]

Our approach is Diagnostic rather than Individualistic i.e., more objective than subjective. That is why it is easy to disseminate to medical students and the general public. In a short time more patients can be treated. Consequently, it makes the medicines affordable to the weaker sections of society making it...

"The Medicine for the Global Population!"

In case of Science it is a rule that results should be repeated with almost the same result: i.e., reproducibility, and the Banerji Protocols™ fulfill this. Any doctor can treat their patients armed with a ready reckoner like our book:

"The Banerji Protocols™: A New Method of Treatment with Homeopathic Medicines"
The Banerji Protocols™ do not follow the Cardinal Principles of Homeopathy

<table>
<thead>
<tr>
<th>Cardinal Principles of Homeopathy</th>
<th>Homeopathy</th>
<th>Banerji Protocols™</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Law of Similia</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>2. Law of Simplex</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>3. Law of Minimum</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4. Theory of Chronic Diseases</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>5. Theory of Vital Force</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Differences between the Banerji Protocols™ and Homeopathy

- The Banerji Protocols™ treat the disease, homeopathy treats the individual.
- The Banerji Protocols™ are not prescribed obeying "Similia Similibus Curentur" i.e., "Likes Cure Likes", they are prescribed purely on a disease-based diagnosis.
- The Banerji Protocols™ use specific medicines, in predetermined potencies, in fixed dosage patterns for specific diseases. Whereas, homeopathy has no specific medicine for a specific disease diagnosis.

To establish a system that is based on experience is consistent with Hahnemann’s dream of the future of homeopathy.
A Presentation of Cases

Hemangioma

Hemangioma

02.02.2012  23.11.2015
Hemangioma

1. Hamamelis virginica 200C + Arnica montana 3C, two doses daily
2. Hypericum perforatum 200C + Arsenicum album 200C, two doses daily for ulceration.

Large Parotid Mass

Banerji Protocols™

1. Hamamelis virginica 200C + Arnica montana 3C, two doses daily
2. Hypericum perforatum 200C + Arsenicum album 200C, two doses daily for ulceration.
<table>
<thead>
<tr>
<th>Name</th>
<th>SB</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>90 years</td>
</tr>
<tr>
<td>Duration of illness</td>
<td>7 years</td>
</tr>
<tr>
<td>Date of first visit</td>
<td>18.01.2012</td>
</tr>
<tr>
<td>Chief complaints</td>
<td>Huge swelling left side face with pain</td>
</tr>
<tr>
<td>Past history, if any</td>
<td>NIL</td>
</tr>
</tbody>
</table>

**Banerji Protocols™**

1. Thuja Occ 1000C, one dose every week.
2. Mercurius Vivus 200C+ Belladonna 30C, two doses daily
Triple Vessels Disease

Name          Mr. R.R.S
Age           71 years
Duration of illness  1 year
Date of first visit 26.11.2011
Chief complaints Palpitation, Chest pain, Dry throat, Cough,
Past history, if any Nil

CT Coronary Angiography dated 31.10.2009
Coronary Angiography dated 13.06.2012
Banerji Protocols™

1. Lachesis 200C, every alternate day
2. Crataegus Ox. Q, and Hamamalis Vir 200C + Arnica Mont 3C, every 3 hrs. alternately

Pituitary Macroadenoma

Name: FY
Age: 27 years
Duration of illness: 4 years
Date of first visit: 29.12.1990
Chief complaints: Headache with occasional swoon and hazy vision
Past history, if any: Nil
Banerji Protocols™

1. *Ruta graveolens* 6c, 2 doses daily
2. *Calcarea Phosphorica* 3x, 2 doses daily

Liver Failure
Name: AG  
Age: 29 years  
Duration of illness: 1 Year  
Date of first visit: 22.08.2008  
Chief complaints: Ascites, jaundice, acute right abdomen colic.  
Past history, if any: Nil

Rapidly progressing Jaundice followed by pedal edema, ascites, fever and abdominal tenderness.

Viral antibody testing revealed HBsAg +, IgM HBc-, HBV DNA 1300 copies/m, and IgM antiHEV+. 
After six months of hospitalization at AIIMS, his Serum Bilirubin continued to be markedly elevated and ALT was continuously 75 times the normal, indicating failure of conservative treatment.

Blood report done on the 5th of October 2007

T. Bill – 18.6 mg/dl (Normal 0.30-1.20)
SGOT – 2580 IU/L (Normal upto 35)
SGPT – 3660 IU/L (Normal upto 40)
ALK PHOS – 310 IU/L (Normal 65-305)
The Banerji Protocols™ for Liver Failure started in April 2008.
Banerji Protocols™

1. Chelidonium majus 6X,
2. Lycopodium clavat 30c, every three hours alternately.
3. Myrica In Q, Two doses daily
4. Thuja occ. 30c, Two doses daily

Blood report done on the 26th of April 2008

T. Bill – 10.4 mg /dl (Normal 0.30-1.20)
SGOT – 61 IU/L (Normal upto 35)
SGPT – 125 IU/L (Normal upto 40)
ALK PHOS – 265 IU/L (Normal 65-305)

Blood report done on the 7th of June 2008

T. Bill – 8.6 mg /dl (Normal 0.30-1.20)
SGOT – 43 IU/L (Normal upto 35)
SGPT – 95 IU/L (Normal upto 40)
ALK PHOS – 233 IU/L (Normal 65-305)
Blood report done on the 25th of October 2008

T. Bill – 2.92 mg/dl (Normal 0.30-1.20)
SGOT – 31 IU/L (Normal upto 35)
SGPT – 62 IU/L (Normal upto 40)
ALK PHOS – 307 IU/L (Normal 65-305)

X-Ray Chest PA view dated 25.10.2008

X-Ray Chest PA view dated 07.02.2009
Blood report done on the 4th of March 2009

T. Bill – 1.56 mg/dl (Normal 0.30-1.20)

SGOT – 43 IU/L (Normal upto 35)

SGPT – 75 IU/L (Normal upto 40)

ALK PHOS – 355 IU/L (Normal 65-305)

X-Ray Chest PA view dated 05.03.2009

Blood report done on the 9th of May 2009

T. Bill – 1.37 mg/dl (Normal 0.30-1.20)

SGOT – 41 IU/L (Normal upto 35)

SGPT – 65 IU/L (Normal upto 40)

ALK PHOS – 275 IU/L (Normal 65-305)
Blood report done on the 8th of October 2009

T.Bill – 1.8 mg /dl (Normal 0.30-1.20)

SGOT – 44 IU/L (Normal upto 35)

SGPT – 29 IU/L (Normal upto 40)

ALK PHOS – 281 IU/L (Normal 65-305)

X-Ray Chest PA view dated 09.05.2009
### Congenial Heart Disease

<table>
<thead>
<tr>
<th>Name</th>
<th>SV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>3 years</td>
</tr>
<tr>
<td>Duration of illness</td>
<td>3 months</td>
</tr>
<tr>
<td>Date of first visit</td>
<td>3rd of December 2012</td>
</tr>
<tr>
<td>Chief complaints</td>
<td>Dyspnoea</td>
</tr>
<tr>
<td>Past history, if any</td>
<td>Nil</td>
</tr>
</tbody>
</table>

Ecocardiography dated 17.11.2012
Banerji Protocols™

1. Lachesis 200C, every alternate day
2. Crataegus Ox. Q, and Hamamalis Vir 200C + Arnica Mont 3C, every 3 hrs. alternately

Ecocardiography dated 18.02.2014

Ecocardiography dated 17.11.2012

Ecocardiography dated 18.02.2014
Biliary Atresia

Name: SM
Age: 2½ Months
Duration of illness: 2 months
Date of first visit: 13.06.2013
Chief complaints: Bloated abdomen with pain, nasal regurgitation of milk, stool after food (8-9 times)
Past history, if any: Nil

HIDA dated 21.05.2013
Blood report done on the 22nd of May 2013

<table>
<thead>
<tr>
<th>Test</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>T. Bill</td>
<td>17.5 (Conj-15.5, Unconj-2.0)</td>
</tr>
<tr>
<td>SGPT</td>
<td>31</td>
</tr>
<tr>
<td>SGOT</td>
<td>96</td>
</tr>
<tr>
<td>AlkP</td>
<td>1809</td>
</tr>
</tbody>
</table>

Banerji Protocols™

1. Chelidonium Majus 6X, 2 doses daily
2. Lycopodium Clavat 30C, 2 doses daily
3. Myrica Cer Q (mother tincture) 2 doses daily

2. Calcarea Phosphorica 3X, 2 doses daily

HIDA dated 28.01.2014
Left Aryepiglottic Mucosal Cyst

Name: DM
Age: 38 years
Duration of illness: 5 months
Date of first visit: 12th of August 2013
Chief complaints: Hoarseness of voice, Throat pain.
Past history, if any: Tonsillectomy 4 years ago
**Banerji Protocols™**

1. Hepar Sulph 200c, two doses daily
2. Hamam Vir 200c + Arnica Mont 3c, two doses daily

---

**Multiple Sclerosis**

---

**Name**
Ms. SS

**Age**
25 years

**Duration of illness**
3 months

**Date of first visit**
04.06.2005

**Chief complaints**
Headache, Nausea, Heaviness of head, weakness of limbs, Diplopia.

**Past history, if any**
Nil
MRI of Brain dated 03.03.2005

MRI of Brain dated 11.11.2005

MRI of Brain dated 05.07.2007
Banerji Protocols™

1. Ruta Gr. 6c, two doses daily,
2. Calcarea Phos 3X, two doses daily

Adnexal SOL
<table>
<thead>
<tr>
<th>Name</th>
<th>Mrs. SK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>37 years</td>
</tr>
<tr>
<td>Duration of illness</td>
<td>4 months</td>
</tr>
<tr>
<td>Date of first visit</td>
<td>16.09.2009</td>
</tr>
<tr>
<td>Chief complaints</td>
<td>Pain in lower abdomen</td>
</tr>
<tr>
<td>Past history, if any</td>
<td>Nil</td>
</tr>
</tbody>
</table>

**USG of lower abdomen dated 07.09.2009**

**USG of lower abdomen dated 01.01.2010**
Banerji Protocols™
Conium Mac 3c, two doses daily

Uterine Tumor

Name: Mrs. KD
Age: 43 years
Duration of illness: 5 months
Date of first visit: 04.05.2009
Chief complaints: Pain in lower abdomen, Heavy menorrhagia
Past history, if any: Nil
Banerji Protocols™

1. Conium Mac 3c, two doses daily
2. Arnica Mont 3c, two doses daily

Cholelithiasis
(Gallbladder Stone)
The most important mechanism in the formation of stones is the increased biliary secretion of cholesterol. This may occur due to many reasons which cannot be pinpointed. If by oral medication the secretion of cholesterol is regulated, density of bile is made normal, the stones melt and the disease can be cured. In some cases even if the disease is cured i.e. the bile is made normal the stones do not melt. By homoeopathic medicines, the stones become silent and fixed at one place. The patients are symptom free for the rest of life.

Current Medical Diagnosis & Treatment, 1997 Edition, Page 631, (USA)
Clinical Medicine - Kumar & Clark 4th edition, Page 341 (LONDON)

All pathological gall-bladder cases are not required to be operated. They can be treated safely with homeopathic medicines. Homeopathy has specific medicines for the treatment of pathological gall-bladder only those cases, who do not respond to oral homeopathic treatment or those who develop complications are to be treated surgically.

<table>
<thead>
<tr>
<th>Name</th>
<th>SRS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>74 years</td>
</tr>
<tr>
<td>Duration of illness</td>
<td>6 months</td>
</tr>
<tr>
<td>Date of first visit</td>
<td>24.08.2012</td>
</tr>
<tr>
<td>Chief complaints</td>
<td>Pain in right side of upper abdomen extended to back, Nausea, gas in abdomen.</td>
</tr>
<tr>
<td>Past history, if any</td>
<td>NIL</td>
</tr>
</tbody>
</table>
Name: GDA  
Age: 62 years  
Duration of illness: 4 months  
Date of first visit: 01.07.2010  
Chief complaints: Pain in right side of upper abdomen, gas in abdomen, Heaviness in abdomen.  
Past history, if any: NIL

USG of upper abdomen dated 22.06.2010

USG of upper abdomen dated 27.07.2011
Banerji Protocols™

1. Carduus Mar Q (Mother tincture), two doses daily
2. Lycopodium Clavar 200c one dose alternate day
3. Belladonna 3c SOS for pain

Renal Calculus
<table>
<thead>
<tr>
<th>Name</th>
<th>YS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>25 years</td>
</tr>
<tr>
<td>Duration of illness</td>
<td>2 months</td>
</tr>
<tr>
<td>Date of first visit</td>
<td>18.02.2013</td>
</tr>
<tr>
<td>Chief complaints</td>
<td>Bilateral renal angle pain</td>
</tr>
<tr>
<td>Past history, if any</td>
<td>Renal Colic off and on</td>
</tr>
</tbody>
</table>

USG of KUB dated 07.01.2013

USG of KUB dated 14.08.2013
1. Berberis Vulg Q (Mother tincture), two doses daily
2. Tabacum 200c two doses daily
3. Cantharis Q, (Mother tincture) SOS

Banerji Protocols™

Thank You