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Editorial

Humanity facing attacks of Negative Microvita

Humanity, world over, is facing with the surge and resurge of different devastating diseases of viruses (negative microvita), leading to morbidity and mortality. These short outbreaks have reported from China, Africa, Brazil, Latin America and US. In Congo, a mysterious illness has killed over 50 patients and surprisingly, the patients died within 48 hours. Scientists are in the search of viruses as the cause of such diseases. But the basic pathogenesis of such negative microvitopathies in the light of microvitalist is the aberrant or unnatural human physico-psychic behavior, animal killing at large scale and meat consumption of unusual animals, drastic dip in moral values etc. We, the human beings are responsible for negative microvitopathies because we are attracting negative microvita by creating negative physical environment, psychic degradation, and inhuman behavior and in one word, lack of physico-psycho-spiritual up regulation.

Humanity has witnessed Spanish Flu and COVID-19 pandemics, SARS, MERS, Ebola, Zika, Mpox epidemics and now outbreaks of Human Metapneumovirus (HMPV) and Oropouche virus (OROV). Lately, an unidentified illness has killed more than 50 people in Northwest Congo, as per WHO report. This mystery illness outbreak started on January, 21 and a total of 419 cases reported including 53 deaths. The alarming situation is the rapid progression of the disease with most patients dying within 48 hours of symptoms. Once again, the initial outbreak was linked to consumption of Bats. The disease is spreading from animals to humans. Earlier in 2022, WHO noted that such outbreaks in Africa have increased by over 60% in the past decade¹.

The future of humanity will be cursed by these negative microvita diseases as stated by the Father of Microvitalism, Shrii P.R.Sarkar in his first discourse on the subject of microvitalism on 31st December, 1986 at Kolkata². He further predicted that the planet earth will face many new diseases due to the attack of negative microvita from other planets because of unnatural living behavior of the people of this planet^{3,4}.

There exists no definite treatment of these negative microvita diseases. Nothing can kill these negative microvita prematurely. The only effective therapeutic measures will be to increase the concentration of positive microvita. For that purpose, creation of dominant positive microvita environment is the be-all and end-all.

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--Editors

Shrii P.R. Sarkar`s prediction for Negative Microvitopathy- Becoming true

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Abstract

The world is facing what Shrii P. R. Sarkar predicted for newer negative microvita (viral) diseases. Spanish Flu of 1918 was the most severe pandemic in the past while COVID-19 was the most severe pandemic of this century. Besides these, SARS, MERS, Ebola, Zika, Mpox epidemics are occurring from time to time. Unfortunately, no drug works for these microvitopathic conditions. The preventive and therapeutic interventions rest on dietary alterations, morality enhancement and adopting well balanced psycho-spiritual life style.

Keywords: Viral diseases, Unnatural living, Positive microvita, Microvitotherapeutics.

Introduction

Shrii Prabhat Ranjan Sarkar, the Father of Microvitology, gave his first discourse on the subject of Microvitum on the eve of 31st December, 1986 at Kolkata. In his presidential address of Renaissance Universal (RU) on "Microvitum- the mysterious emanation of the Cosmic factor" he stressed the need for extensive research on this subject in order to solve the present and oncoming problems of the modern society¹.

The crux of the matter is that he foresaw and predicted that the planet earth will be visited by many new diseases due to the influence of negative microvita from other star systems. These new, difficult to diagnose diseases, caused by negative microvita would happen due to the unnatural living style of the people of this planet². What we faced in the past and what we are facing today is nothing but the resultant of his prediction.

Virus/Microvita

Sarkar has stressed that the nomenclature of 'virus' is a vague term and does not convey the proper meaning that it is a small living entity. Microvitum, on the other hand, lucidly denotes that it is the smallest (*micro*) living (*vital*) entity. Therefore, the proper term of negative microvitum /microvita should be used for viral diseases. In fact virus is the cruder variety of microvita that can be seen under high power electron microscope, while the other subtle varieties are not¹.

Let us reconcile the sequence of events of negative microvita diseases that have occurred so far. The first unofficial, localized, severe negative microvita outbreak was documented to occur on 4th October, 1989 at Ahmedabad (Gujarat), but it was very well taken care of and further spread was stopped^{3,4}. The point to remark is that this incidence of negative microvita attack was just within two months of Shrii Sarkar`s last discourse on this subject. However, the most severe pandemic in the past was the Spanish Flu of 1918 when there was 50 million deaths. The cause of this pandemic, as suggested by the microvirologist, was the attraction of negative microvita from the other celestial body/planet, by the dead and rotten bodies of the soldiers of World War I¹.

Recent past epidemics and pandemic

In 20th century, our planet has faced many epidemics as well as pandemic of negative microvita (Fig. 1-6), substantiating the prediction of Shrii Sarkar⁴. The following table summarizes:

Name	Duration	Causative agent	Area involved
1.SARS	2002-2004	SARS CoV	Started from China and Spread to 29 countries ⁵
2.MERS	2012	MERS-CoV	Saudi Arabia and Middle East countries ⁶
3. Ebola Epidemic	2014-2016	Ebola virus	West Africa ⁷
4. Zika Epidemic	2015-2016	Zika virus	America ⁸
5. COVID-19	2019-2023	SARS CoV-2	Pandemic ⁹

As has been said earlier that these negative microvita diseases in epidemic or pandemic form result from unnatural living habits of the people. These negative microvita prefer the matrix of unnatural living style, immoral thinking and behavior and preferential diversion towards the materialism^{2,4}.

Animals- The source of new epidemics

After overcoming the brunt of COVID-19, the world is still facing its after effect in the form of long COVID. Not only this, a new XE-c COVID-19 variant also been detected in UK.¹⁰. Recently, published study in `Nature` has thrown some light on the potential dangers posed by animals farmed for the fur, food or traditional medicine. These animals farmed for the fur, have been found to harbor numerous viruses which may pose significant risks to human health and potential source of new epidemic. The tissue from various organs of these animals (mink, raccoon, dogs, foxes, guinea pigs, rabbits) revealed 125 different viruses, 36 of which are novel. The point of concern is that 39 of these viruses were classified as high risk, meaning thereby that they have the potential for cross-species transmission, including to humans¹¹.

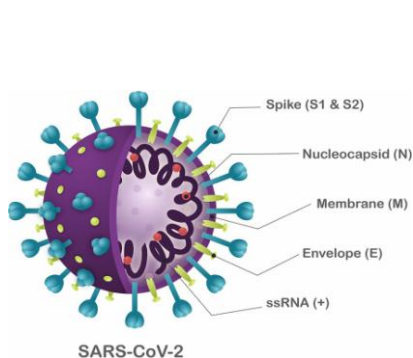


Fig. 3: ZIKA Virus

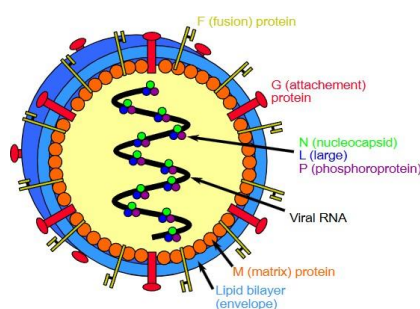


Fig. 1: SARS-CoV-2 Virus

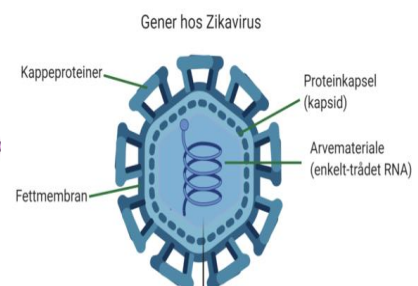


Fig. 2: NIPAH Virus

Nipah, Zika and Monkeypox (Mpox)

Kerala has been the doorway of virus entry. Previously, Kerala reported Nipah virus (Fig. 2) cases in 2018, 2019, 2021, and 2023. In this year, on July 21st 2024, a boy from Malappuram died due to Nipah infection, heralding the first confirmed case in Kerala this

year. Recently, a 24-year old man died in a private hospital in Malappuram, Kerala on September 9 due to a Nipah infection which was confirmed only after death¹².

In Pune, from India, there is increasing number of Zika (Fig. 3) cases in spite of no travel history. A release from the Ministry of Health and Family Welfare, India reported its first case of Zika in Gujarat in 2016. Since then, multiple states, including Tamil Nadu, Madhya Pradesh, Rajasthan, Kerala, Maharashtra, Utter Pradesh, Delhi and Karnataka, have reported cases. Zika disease is a viral infection primarily transmitted by *Aedes* mosquitoes but can also spread to the foetus during pregnancy, through sexual contact, blood transfusion, and organ transplantation. It is usually mild and requires no specific treatment. However, it can have serious problems during pregnancy, potentially causing microcephaly and other congenital malformations in infants as well as preterm birth and abortion. Rarely, it can cause Guillain-Barre syndrome¹³.

US reports mysterious virus spreading across US, affecting children. For this, enterovirus D68 has been incriminated. There is no treatment and no vaccine available. CDC has so far recorded 260 cases¹⁴.

And now Monkey pox (Fig. 4), a cousin of small pox. It belongs to the Poxviridae family, which includes small pox. WHO has started using a new preferable term “mpox” as a synonym for monkeypox (News release on 28th November, 2022, Geneva, Switzerland). On August 14, 2024, WHO re-declared mpox as a public health emergency of international concern (PHEIC) making it the second infectious disease that has caused two independent PHEIC in the 21st century, the first being EBOLA. PHEIC represents the highest form of alert. This is because of spread of a new variant of virus, called clade Ib, in parts of African continent. The disease continues to spread in

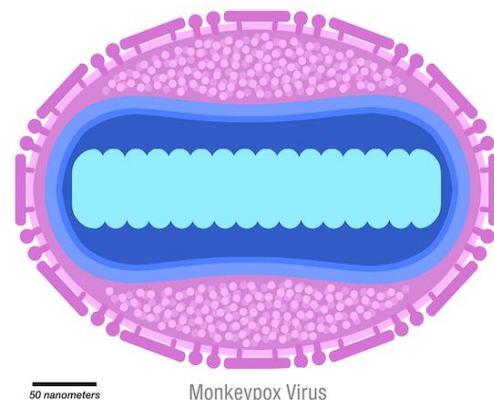


Fig. 4: Monkeypox virus

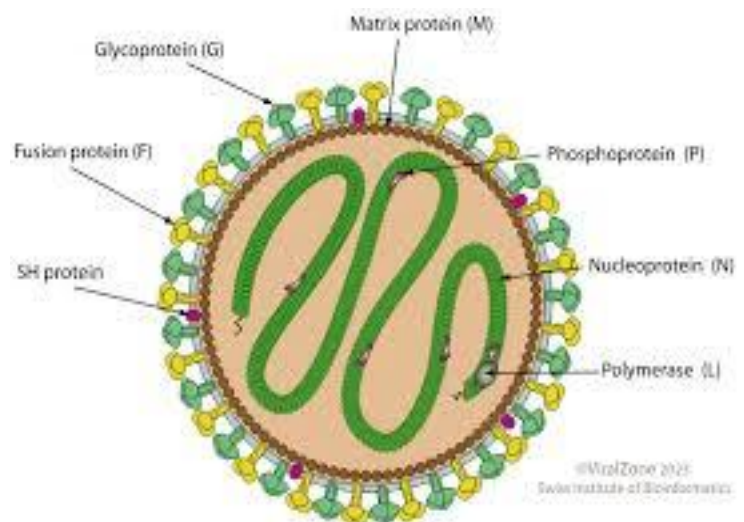
Africa. There have been 46,794 confirmed and suspected cases in Africa this year through Nov.3, including 1081 deaths (WHO report on 12th Nov.). The most affected country is the Democratic Republic of Congo, followed by Burundi and Uganda. Unfortunately, clusters of drug-resistant mpox have also been identified in five states of US¹⁵.

China has started experiencing a surge in respiratory illness with the emergence of Human Metapneumovirus (HMPV) among children under 14, elderly and immunocompromised individuals. The question is raised whether it is another pandemic brewing in China, five years after COVID?

HMPV (Fig. 5) is a common respiratory virus, discovered in 2001 and belongs to Paramyxoviridae family. It is closely related to the Respiratory Syncytial Virus (RSV). Its outbreaks have been reported in the past in the US, Canada and Europe during 2011-12. The symptoms are flu-like and usually results in mild illness. It, however, poses a higher risk of pneumonia and bronchitis in vulnerable groups. The virus (negative microvita) spread

through respiratory droplets, direct contact, or contact with contaminated objects. The incubation period ranges from 3 to 6 days after exposure.

At present there are no antiviral drugs for its treatment nor vaccine available. Experts have stressed the need for vigilance and public awareness¹⁶. Unfortunately the HMPV has already landed in India. First two cases of HMPV have been reported in Bengaluru. One is an eight month-old male infant and other is a three-month old female, both with bronchopneumonia without any travel history¹⁷⁻¹⁹. The point of concern is though HMPV; which is respiratory



virus, identified globally but has rarely been reported in India till now. **Fig. 5: HMPV Virus**

In Gujarat, the first case was reported on 6th January, 2025, when a 2-month-old boy from neighbouring Rajasthan was detected with HMPV. The infant has been discharged. Later on four cases were recorded in Ahmedabad and one in Himmatnagar in Sabarkantha district. As per the officials, there is no active HMPV case in Gujarat. All six patients have completely recovered and been discharged from hospitals²⁰.

The viruses induced illness are on rise all over the world. It is a matter of concern. The number of people affected is alarming in US. The flu has sickened 3.1million people so far in this season, leading to 37,000 hospitalization and 1500 deaths according to the CDC. COVID-19, on the other hand continues to infect millions, with 2.5 to 4.4 million cases reported since October 2024.

And now, US is grappling with a formidable “quad-demic” as flu, COVID-19, respiratory syncytial virus (RSV) and norovirus surge nationwide. “These four viruses tend to rise simultaneously, creating a challenging public health environment” as commended by Dr. Joe Bresee, an infectious disease expert and former CDC official²⁰. Dr. Robert Hopkins Jr., a medical director for the National Foundation for Infectious Diseases, emphasized that while the term “quad-demic” evokes alarm, these seasonal surges in the viruses can be mitigated with proper precautions²¹.

Re-emergence of Oropouche virus

Unprecedented spread of Oropouche virus (OROV) has been observed in Brazil and Latin America. It has resulted in early deaths in adults and acute neurological disease and congenital infections associated with malformations such as microcephaly²².

The orthopod-borne orthobunyavirus was infact discovered in 1955 and has three reassortant OROV glycoprotein gene variants termed as Iquitos, Madre de Dios, and Perdoes virus. The first two of which can cause disease in humans^{23, 24}. In the current outbreak, more than 10,000 laboratory-confirmed cases have been reported in Latin America²². It has been suggested that this outbreak might be related to higher replication efficiency and immune evasion of the circulating strain²⁵. During the 2024 outbreak, Oropouche virus was detected

in umbilical cord, placenta, and fetal organs. Igm against Oropouche virus was detected in four new born with microcephaly²⁶.

OROV (Fig. 6) predominantly causes acute febrile illness but severe neurological condition such as meningoencephalitis can occur. It is mainly transmitted by biting midges but also has been detected in several mosquito species and a wide range of vertebrate hosts²⁴. Unfortunately, Oropouche fever is a neglected disease, receiving less attention and funding than disease caused by other arboviruses, such as dengue fever²².

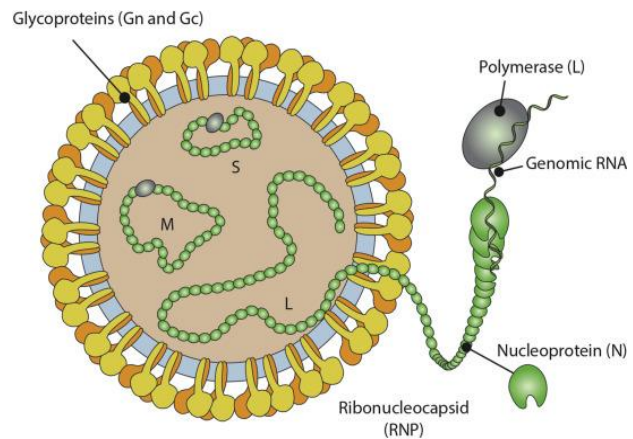


Fig. 6: OROV Virus

Alarming rise in flu cases in US

Lastly, alarming bell is ringing regarding rise of flu cases in US, which need attention. Nearly one in three people getting tested for the flu are reported positive. Latest CDC flu data from the last week of January 2025 states that nearly eight percent of all outpatients' clinic visits are having "flu-like illness" that is having fever and cough or a sore throat²⁷. The CDC does not officially tract adult deaths, but the agency estimates that there have been 13,000 flu-related deaths. About 24 million people have had the flu in the US so far this season²⁸.

Causes and interventions

Why the humanity is facing such types of drastic devastating diseases of negative microvita (virus)? Who is responsible? As per microvitologist point of view, the human physico-psychic unnatural behavior, mass animal killing and meat consumption, degraded moral values, self centered attitude and inclination towards the materialism are some of the (root) causes. We are responsible for all these deadly situations. We are attracting these negative microvita because of creation of negative environment by food (non-veg.), habits (pornography/brothels), thinking (dogmatic), physicality (money oriented), behavior (inhuman, selfish) and lack of psycho-spiritual progress etc. Unless these conditions are improved at individual and at mass levels, the doomed scenario cannot be changed.

It is a known fact that there is no definite treatment of all these negative microvita diseases. The role of drugs is only to ameliorate symptoms. Nothing can kill negative microvita prematurely; they die naturally after completing their life span. The only effective measure or therapeutic intervention, based on the microvitology, is to increase the concentration of positive microvita that may devour the negative microvita and cure the disease. For that strategy, sentient diet, spiritual living, cosmic thinking and creating dominating positive microvita environment by keeping company of good people, harnessing good thinking, promoting collective kiirtan and meditation and changing attitude from humanism to neo-humanism- which encompasses not the welfare of human beings but of all living beings as well as non-living entities. Shrii Sarkar has already thrown much light in this direction for the treatment of these upcoming negative microvita diseases^{1, 2}. In fact, he was the greatest neohumanist of the last century.

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Threat to Biodiversity: Unraveling the Effect of Climate Change in Udaipur District with Comparative Insights from Rajasthan and India

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Abstract

The biodiversity of Udaipur District, Rajasthan, is under increasing threat due to the significant impact of climate change. Rising temperatures and shifting rainfall patterns affect flora and fauna, leading to potential habitat loss, species migration, and the spread of invasive species. This article investigates the effects of climate change on Udaipur's biodiversity while drawing comparisons with similar trends observed in other regions of Rajasthan and India. The study suggests that species in Udaipur are likely experiencing similar shifts in phenology and ecosystem dynamics as observed in other semi-arid and arid regions. Conservation strategies, such as expanding protected areas and promoting climate-resilient native species, are proposed to mitigate these impacts. The paper also calls for more region-specific studies to validate these findings and address local biodiversity threats.

Keywords: Phenology, Protected Areas, Ecosystem, Invasive species, Habitat loss

Introduction

Climate change is a global phenomenon that affects biodiversity across ecosystems. Udaipur District, located in the semi-arid regions of Rajasthan, India, is not exempted from these changes. With its unique flora and fauna, Udaipur faces increasing challenges as climate change alters local temperature and precipitation patterns. Other Rajasthan districts and similar ecosystems across India are likely experiencing comparable environmental shifts¹. Change in environment conditions also causes changes in the biodiversity of that particular region. Unfortunately, scanty information on climate change's effect on Udaipur district's local biodiversity is available.

The purpose of this article is to examine the potential impacts of climate change on Udaipur's biodiversity correlating from other regions. This comparative approach helps to fill the knowledge gaps and offers insights into what might be happening locally. The need for region-specific research remains also crucial to fully understand and mitigate the threats to Udaipur's ecosystems.

Climate Change in Udaipur: Rising Temperatures and Altered Rainfall

Over the past few decades, Udaipur has experienced a notable rise in temperatures, in line with broader trends observed in other semi-arid regions of Rajasthan. A study indicates that the average temperature in Udaipur has increased by around 1.6°C over the past 50 years¹. This increase is consistent with temperature trends across Rajasthan,

Moreover, data from the Indian Meteorological Department suggests that rainfall patterns in Udaipur are also undergoing significant changes, mirroring broader regional trends². These alterations in temperature and precipitation patterns will likely have comparable impacts on the district's biodiversity as observed elsewhere in Rajasthan.

Impact on Flora: Plant Phenology and Migration

Climate change is known to cause shifts in plant phenology, including flowering, fruiting, and seed dispersal times. For example, species like *Pinus wallichiana* have migrated to higher elevations in the Himalayan region due to rising temperatures and reduced snow cover³. Furthermore, shifts in flowering times were observed globally, including earlier grape harvests in Central Europe⁴. A study in the Colorado Rocky Mountains found that flowering times for 60 plant species shifted at varying rates, with some advancing by 3.3 days per decade and others experiencing delays, leading to a reshaping of the entire plant community over 39 years⁵. A study in Jhalawar, Rajasthan, observed significant variability in flowering time and duration among *Butea monosperma* trees, with early flowering recorded in some individuals and others exhibiting prolonged flowering periods of up to 93 days⁶. Similar shifts could be occurring in Udaipur, where Jain (2013) reported changes in the flowering time of the plant species *Butea monosperma*⁷. This change in flowering time and species change may not only alter plant community structure but also impact species interactions, particularly in critical ecosystems like the wetlands of Menar, which support migratory birds⁸. Although specific local data is not yet available, these phenomena should be investigated further to determine the exact nature of these changes within the district's flora.

Impact of Invasive Species: Lessons from Other Regions

Invasive species significantly threaten biodiversity across Rajasthan, and Udaipur is likely no exception. While few specific studies have been conducted in the district, invasive species like *Lantana camara* and *Parthenium hysterophorus* are known to dominate ecosystems in neighboring regions, such as Jaisamand Wildlife Sanctuary and the Thar Desert. These species outcompete native plants and disrupt ecological balance⁹. Climate change exacerbates the spread of invasive species, as ecosystems become stressed by rising temperatures and altered rainfall. For instance, *Lantana camara*, which has aggressively spread across southern India, was linked to prolonged drought and fire events¹⁰. Udaipur's semi-arid environment may face similar threats as invasive species exploit ecological imbalances caused by climate change. Research has shown that the allelopathic effects of root exudates from *Lantana camara* significantly inhibit spore germination and regeneration. Among the extracts studied, the leaf extract had the strongest inhibitory effects, followed by the stem and root extracts. The species affected include *Pogonatum aloides*, *Riccia billardieri*, *Funaria hygrometrica*, *Physcomitrium japonicum*, *Plagiochasma appendiculata*, and *Asterella angusta*. It was observed that increasing the concentration of the extracts resulted in a decline in these species' germination and regeneration rates¹¹. However, further research is required to confirm the extent of their spread and impact on the native other groups of plant biodiversity of Udaipur.

Impact on Fauna: Habitat Loss and Migration

Udaipur's fauna is also threatened by climate change, particularly due to habitat loss caused by shifts in vegetation zones. While specific studies on Udaipur's wildlife are lacking, observations from other parts of Rajasthan provide useful insights. For instance, in the Thar Desert, species like the Great Indian Bustard and Blackbuck have experienced habitat loss and population decline due to agricultural expansion and overgrazing¹². Similar pressures are likely to be affecting Udaipur's wildlife, particularly in forest areas where human activities and climate change converge. Migratory species, such as the Bar-headed Goose (*Anser indicus*), are highly sensitive to changes in wetland habitats across India⁸. The depletion of wetlands due to climate change and human activities in Udaipur, as observed elsewhere in India, may similarly impact migratory bird populations. As these wetlands face increasing ecological pressure, it is essential to monitor their health to protect these vital habitats. Recent studies predict that up to 59% of bird species in India could lose portions of their current habitats by 2070 due to climate-induced range shifts¹³. More region-specific research is needed to confirm these effects in Udaipur.

Conservation Implications and Recommendations

The comparative insights drawn from other regions of Rajasthan and India highlight the urgent need for conservation measures tailored to Udaipur's unique biodiversity. Key recommendations include:

- **Expanding Protected Areas:** Increasing the network of Protected Areas in Udaipur will help safeguard critical habitats from the pressures of climate change and human activities. This strategy has proven effective in regions like the Thar Desert and could be equally beneficial for Udaipur. Establishing buffer zones and protected areas has been identified as a crucial strategy to combat biodiversity loss due to climate change. These areas help facilitate species adaptation by preserving intact habitats, particularly in regions like Udaipur where sensitive species may otherwise be pushed to extinction due to changing environmental conditions¹⁴.
- **Promoting Climate-Resilient Native Species:** Encouraging the plantation of native species that are more resilient to the changing climate will help support local ecosystems¹⁵. This approach has shown promise in other semi-arid regions and could be adopted more widely in Udaipur.
- **Adaptive Wildlife Management:** Wildlife management strategies should be flexible and responsive to the shifting needs of species affected by climate change. This includes monitoring migration corridors and adjusting management practices to account for phenological shifts.

These recommendations underscore the importance of proactive conservation efforts in Udaipur, drawing on lessons learned from other regions while addressing the specific challenges faced by the district.

Conclusion

While the direct impact of climate change on Udaipur's biodiversity has not been extensively studied, the patterns observed in other regions of Rajasthan and India suggests that the district is facing similar threats. Rising temperatures, altered rainfall patterns, and the spread of invasive species are likely to be affecting Udaipur's flora and fauna in ways that mirror trends elsewhere. However, region-specific research is essential to confirm these impacts and to develop targeted conservation strategies. By drawing on examples from other regions, this paper provides a framework for understanding the potential effects of climate change in Udaipur. It highlights the urgent need for both research and action.

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In remembrance of Henk de Weijer...

It is with deep sorrow, SMRIM announce the passing of Henk de Weijer (Sundara), Life member, SMRIM (L-70) on 2nd March, 2025 at Amsterdam, Netherlands. Henk was a sincere, dedicated, kind and gentle person who was always ready to help. SMRIM express its deep condolences to his family members and all his close associates.

Henk was a Fellow member of Society for Microvita Research and Integrated Medicine (SMRIM), Udaipur since 2012. He excellently served the Editorial board membership of *Bulletin on Microvita Research and Integrated Medicine* (BOMRIM) and contributed 14 articles to various volumes of BOMRIM. He was the Guest Editor of eighth volume of BOMRIM which was published in 2016. Following is the list of his articles published in BOMRIM:



- de Weijer, Henk. The origin of physical and biological forms (Part I). 2011. 3(1):4-7.
- de Weijer, Henk. The origin of physical and biological forms (Part II). 2011. 3(2):4-7.
- de Weijer, Henk. A new ontological model to approach evolution- 2011. Part I. 3(3):4-7.
- de Weijer, Henk. A new ontological model to approach evolution- Part II. 2012. 4(1):3-6.
- de Weijer, Henk. Higgs bosons and Microvita. 2012. 4(2&3):8-9.
- de Weijer, Henk. Mind – its substance, evolution and home (Part -1). 2014. 6(1):6-10.
- de Weijer, Henk. Mind – its substance, evolution and home (Part -2). 2014. 6(2):19-24
- de Weijer, Henk. Editorial. Special issue. 2015. 7(2):18.
- de Weijer, Henk. Intellect and memory in atoms and organisms. 2015. 7(2):19-21.
- de Weijer, Henk. Thoughts about mind. 2015. 7(2):26-28.
- de Weijer, Henk. The meeting of local and non-local. 2016. 8(1-3):11-16.
- de Weijer, Henk. Related Deep Research - The World in a Drop. 2016. 8(1-3):17.
- de Weijer, Henk. Substance and Nature of Concrete and Abstract Forms. 2018.10(1&2):2-7.
- de Weijer, Henk. Signs of Intelligence and COMID-19. 2020. 12(3):45-54.

By profession, he was an Architect and served for a famous architectural firm, Hermann Herzberger in Amsterdam, for many years. He was initiated in Microvita meditation directly from Shrii Shrii Anandamurti ji and was diligently pursuing it till his last breath. His commitment to spiritual growth and selfless service became a guiding light to many.

Henk was working for Microvita research and gave several concepts to deeply understand the structure and functions of microvita. For his expertise in Microvitology, He

was invited as a Keynote speaker in the First International Seminar on Microvita Research (ISMR-2012) organized by SMRIM to deliver his talk on “A new ontological model to approach biology & evolution” on 24th March 2012.

He again graced another event organized by SMRIM that is the Second International Seminar on Microvita Research (ISMR-2016) which was held at RNT Medical College, Udaipur, Rajasthan on 8th April 2016. In this seminar, he discussed possible relationships between non-local and local forms of consciousness, and energy.

His words on the concept of Microvita were written in BOMRIM (2016) as A CHALLENGE: Thirty years ago, on December 31, 1986, the first discourse on microvita was given. As all later discourses, it contained hints, like artifacts in an archeological site, rather



than turnkey solutions. The subject of microvita is still enigmatic and forms a challenging invitation to participate and lift the veil. Who has the freedom of mind, courage, and stamina to pick up the gauntlet?

This shows his dedication and curiosity to solve various problems of world by unveiling the potential of Microvita theory. It is now a task for the young generation to explore the world of mysterious microvita with the help of both physical and spiritual laboratories and carry forward the legacy of Henk.

Henk was married to Nellie (Nirguna) in 1977, and together, they shared a life of love, faith, and spiritual devotion. He was the proud father of two children, a son and a daughter, who were a testament to the love and guidance he gave to his family. Sundara's life was a reflection of his deep connection with his spiritual Guru, and his faith in the Divine was an inspiration to all who knew him.

Sundara left this world peacefully, leaving behind a legacy of love, faith, and dedication that will forever be etched in hearts. His life's work was dedicated to spreading light and love, touching the lives of countless individuals with his kindness, wisdom, and unwavering faith. We are forever grateful for the love and wisdom he shared, and we will honor his life by carrying forward his teachings, faith, and compassion.



--- Dr. Vartika Jain

Successful stories of Semal tree Conservation !!!

Team members of SMRIM, Udaipur are working hard to protect the Semal tree (*Bombax ceiba*) from burning in the fire of Holi festival for more than one and half decades. Plantation of new Semal saplings and taking care of them till they grow to a certain height is one of the strategies utilized to conserve this tree. For this purpose, Semal seeds were collected from the nearby forest area and Semal saplings were developed. These were planted in and around Udaipur city with the help of various groups, volunteers and organizations.

It feels great pleasure to share herewith few examples of places where Semal tree plantation done by SMRIM was successful.



@ Machla Magra Hills, Dudh Talai, Udaipur



@ Adinda Parshvanath Temple, Udaipur



@ Village Bhava, Rajsamand



@ Jagriti, Tekri-Madri Road, Udaipur



@ Jagriti, Near Water Tank, Bhinder



@Moti Magri, Fatehsagar, Udaipur

The success of Semal Conservation Mission of SMRIM, Udaipur was also realized when Shri J.P. Shrimali ji personally visited house of Dr. Vartika Jain, Secretary, SMRIM on 7th June, 2024 and gifted her five semal plants developed in his own farm house situated at Losing. This shows the impact of awareness campaign carried out by SMRIM for conservation of Semal tree.



Besides, plantation program, an alternate of burning Iron-pole instead of Semal tree was also provided by SMRIM in 2011. The concept was widely propagated and adopted by several societies and groups in Udaipur, Bhinder and Kanore.



The mission is still going on till the humanity understands the value of such an important tree, 'Semal'.

--- Dr. Vartika Jain

International Research Star Award to Prof. S. K. Verma

Udaipur. Dr. S. K. Verma, Professor Emeritus, Department of Medicine, Pacific Medical College & Hospital, Udaipur and President, Society for Microvita Research and Integrated Medicine (SMRIM), Udaipur, Rajasthan has been recently honored with International Research Star Award for his research and excellence in “Medicinal plants research in experimental atherosclerosis model in animals and on coronary risk parameters in man with Coronary Artery Disease”.

The award was conferred to Dr. Verma by ISSN International Science & Technology Awards Congress 2025 (IISTAC 2025) on March 23, 2025 at Jenneys Residency, Coimbatore, Tamil Nadu, India.

Dr. Verma has more than 45 years of research experience on the role of spices and medicinal plants in the risk stratification of cardiovascular diseases. He has published more than 140 research articles in national and International reputed journals, cited more than 3500 times with an h-index of 27, a remarkable achievement in the field of medical research.

Currently, he is serving as an Editor-in-Chief of *Pacific Journal of Medical and Health Sciences* (PJMHS) and *Bulletin of Microvita Research & Integrated Medicine* (BOMRIM) and his research is focused on Microvitalogy and Chrono-biology for the benefit of humanity.



Talk on Biodiversity Conservation

Udaipur. 23 March, 2025. Udaipur school of Social Work, Janardan Rai Nagar Vidyapeeth University (JRNvu), Udaipur, Rajasthan organized a seven days National Social Service Camp from 17th to 23rd March, 2025. Dr. Vartika Jain, Assistant Professor, Department of Botany, Govt. Meera Girls College, Udaipur and Secretary, Society for Microvita Research and Integrated Medicine (SMRIM), Udaipur, was invited as a Guest speaker and Chief Guest of the closing ceremony of the seven days camp held on Sunday, 23rd March, 2025.



Dr. Vartika spoke on 'Why Biodiversity Conservation' with highlighting the success story of conservation of Semal tree in Udaipur, Rajasthan. She first explained what biodiversity is, types of biodiversity and then emphasized on the threats to biodiversity. Anthropogenic threats for example, poaching, pollution, microplastics, electromagnetic waves, overexploitation of natural resources, climate change, consumption oriented life-style etc. are causing rapid habitat loss for so many floral and faunal species which is ultimately



detrimental to existence of human beings. Therefore, conservation of biodiversity is important and for that both *in situ* and *ex situ* conservation techniques could be utilized. Further, she gave the example of Semal tree whose population is in danger due to a devastating tradition of Holikadahan every year in South Rajasthan and how the conservation mission to protect this tree was started and still going on. Right from the awareness creation among masses, preparation of saplings and massive plantation drive at various places in and around Udaipur city and finally to burning of an eco-friendly iron pole instead of Semal tree were the means of conservation of Semal tree. She motivated students to think carefully about local problems and then initiate a drive for its solution.

The participants who were from all over India asked their queries to Dr. Vartika and applauded at the end of the ppt presentation. In the closing ceremony, Principal, Dr. Avnish Nagar felicitated Dr. Vartika with a memento and certificate of appreciation. NSS camp coordinator Dr. Anukrti gave a big thanks to Dr Vartika for sparing her valuable time sharing the invaluable knowledge on Biodiversity conservation to the young students.

What is Microvita ?

Microvita:

Micro- Small, *Vita-* Living

Definition:

Entities or objects which come within the realm of both physicality and psychic expressions, which are smaller or subtler than atoms, electrons or protons; and in the psychic realm, may be subtler than ectoplasm or its extra-psychic coverage; endoplasm have been termed as “Microvita” (Singular- *Microvitum*) by Shrii P. R. Sarkar.

Physicality: The position of microvita is just between ectoplasm and electron, but they are neither ectoplasm nor electron.

Categories:

A) *Based on density or subtlety -*

First: Coming within the scope of a highly developed microscope.

Second: Not coming within the scope of a perception but coming within the scope of perception as a result of their expression or actional vibration.

Third: Not coming within the scope of common perception but coming within the scope of a special type of perception which is actually the reflection of conception within the periphery of perception.

B) *Based on nature -*

1. Positive 2. Negative 3. Neutral/Ordinary

Movement:

- Move throughout the entire universe.
- Move unbarred, without caring for the atmospheric conditions.
- Move through a medium or media sound, form, figure, smell, tactuality or ideas.

Root cause of life:

Microvita create minds and bodies and also destroy minds and physical bodies. The root cause of life is not the unicellular protozoa or unit protoplasmic cell, but this unit microvitum.

Aims and Objectives of SMRIM

1. To propagate the knowledge and science of microvita by psycho-spiritual practice in individual and collective life.
2. To increase moral values, to generate scientific thinking, to remove dogma with the spread of knowledge of microvita at School, College and University levels.
3. To initiate and inspire about research on Yogic, Vaedic, Naturopathic, Ayurvedic and Homoeopathic schools of medicine.
4. To incorporate faculty of Physics, Chemistry, Botany and Medicine for research on microvita and integrated medicine; including research on medicinal plants and Homoeopathic medicine.
5. To organize free medical camps in villages and cities involving specialists of different system of medicine.
6. To publish result of the research in national and international journals and interact with other people working in the field in and out of the country.
7. To make judicious use of different systems of medicine and microvita for the treatment of diabetes, hypertension, heart diseases, cancer and diseases of modern era.
8. To establish laboratory and research centers for relentless research on microvita and integrated medicine for the welfare of entire humanity.

Who can join?

Any person interested in serving humanity through research on Microvita and Integrated medicine and abides rules and regulations of the society can become the member of the society.

**Life Membership fee: Rs. 2000/-
(Rupees Two thousand only for Once)**

Bulletin on Microvita Research and Integrated Medicine started in March, 2009 is an official peer reviewed Journal of Society for Microvita Research and Integrated Medicine (SMRIM), Udaipur, Rajasthan. It publishes three issues in a year having original research, reviews, short notes, case studies, Letter to editor in the field of microvita and integrated medicine in both hard and soft copies. Book reviews are published after approval by Editor. The Journal does not levy any Article Processing Charges or Article Submission Charges. Previous issues are available online at : www.microvitamedresearch.com

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Manuscripts should be typed in double space (12 pt, Times New Roman font) on one side of the paper of 22×28 cm. All pages should be numbered consecutively. SI units should be used and Symbols should conform to standard guidelines.

Title

It should be short & informative (14 pt), to be typed in only first letter of the first word capital; also, after colon or hyphen, first letter of the first word capital. Latin names are to be given in italics.

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Four to five keywords (in normal; 11 pt) should be given indicating the contents of the manuscript.

Authors

Names of authors to be typed in first letters capital (12 pt).

Addresses of Authors

Addresses of the affiliating institution (s) along with e-mail address (10 pt) should be given.

Main Headings

Each manuscript should be divided into the following main headings (typed in bold, first letters capital, on the left hand side of the page; 12 pt): Abstract, Introduction, Methodology, Results, Discussion, Acknowledgement, References.

Sub-Headings

Typed in flush left, bold, first letters capital (10 pt).

Abstract

It should be brief within the limit of 200 words and typed in normal font (11 pt).

Introduction

A brief and precise literature review with objectives of the research undertaken and essential background could be given.

Methodology

Methodology should include location of survey area, the source and nature of material, experimental design and the techniques employed.

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Results should contain data, which are essential for drawing main conclusion from the study. Wherever needed, the data should be statistically analyzed. Same data should not be presented in both table and figure form.

Discussion

The discussion should deal the interpretation of the results. Wherever possible, results and discussion can be combined.

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Relevant good quality illustrations/ photographs/line drawings etc. could be sent in JPEG format through email. Text figures should be numbered in Arabic numerals. Lettering, numbering, symbols and lines in the graphs/illustrations should be sufficiently clear. Captions

and legends to illustrations should be typed on a separate sheet of paper.

Acknowledgement

Acknowledgements should be made in brief.

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References should be cited in the text by the consecutive **numbers** of their occurrence; the numbers are to be shown as superscript at the end of the statement related to that particular reference, e.g. Microvita are mysterious emanations from Supreme Consciousness¹. Following the same sequence of the text, the list of references should be appended under the **References** heading. Each reference should provide names and initials of all the authors, giving coma in between the authors. In case, the authors are more than five, then use *et al* after the 5th author. It should be followed by year of publication, title of the paper, abbreviated title of journal (in italics)/ book title in italics, volume number, issue number and the starting and closing page numbers. Abbreviated titles should conform to the international guidelines, e.g. The Chemical Abstracts Service Source Index (CASSI) or BIOSIS. The style of references should be:

Research Papers

1. Verma SK. 2016. Microvitopathy. *Bull. Microvita Res. Integr. Med.* 8(1-3):3.

Books

1. Sarkar PR. 1987. *Microvita in a Nutshell*. p.56. AMPS Publ., Tiljala, Kolkata.
2. Jain V. & Jain SK. 2016. *Compendium of Indian Folk Medicine and Ethnobotany (1991-2015)*, pp. 1-542. Deep Publ., New Delhi.
3. Jain V. 2017. Chapter 5.1: A glimpse of culture-based man-plant relationships in Indian folk life. In: *Methods and Approaches in Ethnobotany (Concepts, Practices and Prospects)* (Ed. Jain SK and Jain V), pp. 151-157. Deep Publ., New Delhi.

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