

GLOBAL RESURGENCE AND INTERNATIONAL RECOGNITION OF AYURVEDA **

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Historical Background

Ayurveda is perhaps the world's most ancient methodical Medical knowledge system. The earliest doctrines of Indian Medicine, the *caraka samhita* and the *suzruta samhita* (B.C 1500-1000) indeed show that the art and science of Ayurveda practise was well developed and systematically organised in that period. *caraka samhita* in the present form is the third generation edition which underwent considerable revisions by *caraka* and *drDhabala*. The concepts of aetiopathology and disease management described in *caraka samhita* and the anatomical, physiological and pathological considerations of *suzruta samhita* are unique and quite logical and scientific for that period of human history. *suzruta* defined health in *suzruta samhita sUtrasthAna*, 15/48, as "Health is a bio-physical and physiological state of equilibrium and a contented state of consciousness, senses and mind." This concept of health which was the purpose of the treatment is more all encompassing and broader than the latest WHO definition of health, which was re-defined in the 70s as "Health is the state of complete physical, mental and social well being and not merely the absence of disease." Being a Medical science, Ayurveda views all the aspects which are responsible for the favourable and antagonising effects on the life and longevity of man, the causes for the same and explores the ways to enhance the favourable and eradicate the antagonistic factors.

The principles of Ayurveda are universal but the practices are localised and individualised. This is a unique feature, which ensured sustainable utilisation of Ayurveda principles in providing health care universally. It is an eco-friendly, cost-effective, organic, natural, holistic, lifestyle-integrated and easily replicable (due to its "global yet local" approach) model which primarily has only one requirement – the presence of expert well-trained experienced Ayurveda physicians. In many parts of the world, Ayurveda is practised without the knowledge of the word "Ayurveda"; the American Indians and the Afrikaners have long applied the principles of Ayurveda; northern Europe uses several home remedies that are in tune with the Ayurveda principles; and much of aboriginal therapies in Australia resemble authentic Ayurveda practices.

In the last two decades, official Ayurveda due to its holistic approach using lifestyle modification, healthy diet and safe natural drugs attracted a large population in different countries around the world. Today Ayurveda and Chinese Medicine top the list of the CAM/TM therapies in popularity across the globe.

Global Revival of Traditional Medicines

The sudden resurgence of TMs, forced Agencies like WHO and NGOs like the National Institute of Health, USA, to develop a new perspective for TM in the scientific and political circles. The WHO Traditional Medicine Strategy 2002-2005 lays guidelines for formulating Policies to integrate TM/CAM into mainstream health care,

to ensure Safety, Efficacy and Quality of TM/CAM, to increase Access to TM/CAM and promote its Rational Use.

The National Institutes of Health opened the National Centre for Complementary and Alternative Medicine (NCCAM) in 1998. They also formulated a five year strategic plan to promote clinical research on CAM, which it examines under five domains – Alternative medical systems, Mind-Body interventions, Biologically based therapies, Manipulative and body-based methods and Energy therapies. The above documents epitomize the scientific and political initiative to regulate the practice of TM/CAM the world over.

The percentage of visits to CAM practitioners increased from an estimated 427 million to 629 million between 1990 and 1997 in US while the Americans using CAM increased from 60 million to 83 million. Visits to CAM practitioners increased by 47 percent, exceeding visits to MDs by 243 million. It has also been observed that Americans spent more money out of their pockets for CAM than for conventional health care. Ayurveda is one of the most popularly used CAM/TM therapies in the World along with Traditional Chinese Medicine. The Healing potential of Ayurveda has opened up a new front of Health Tourism in India where people all over the world come over to India for availing the benefits of Ayurveda therapy for many chronic ailments and also for such diseases where modern medicine has nothing substantial to offer.

The WHO Traditional Medicine Programme

By the early 90s, various Traditional systems of Medicines, especially The Traditional Chinese Medicine and Ayurveda flourished in the developed countries in the name of Herbal medicines and Complementary and Alternative Medicine (CAM). At the turn of the new millennium, ancient systems of healing had staged a powerful comeback on a global scale with a growing popularity amidst the general public of the world.

To meet growing challenges in the area of TM, WHO has formulated a comprehensive working TM strategy for 2002–2005.

The Report of the Inter-Regional Workshop on Intellectual Property Rights in the Context of Traditional Medicine conducted in Bangkok, Thailand, on 6–8 December 2000, made many recommendations which highlights the WHO initiative for the promotion and recognition of Traditional Medicines. Some of the relevant recommendations in this regard are

1. Countries should have a national policy on traditional medicine as part of the national health policy and countries should develop and utilize traditional medicine in a meaningful manner in the national health care system.
2. Organizational infrastructure of traditional medicine should be developed and/or strengthened and official recognition accorded to TM.
3. National and regional strategies should be developed for the protection of traditional medicine with the support of WHO and other international agencies.

4. Ways and means need to be devised and customary laws strengthened for the protection of traditional medicine knowledge of the community from biopiracy.
5. Simultaneously, efforts through technical cooperation among countries need to be made to add value through innovation for public health. Indigenous and local communities should be involved in devising these models.
6. WHO, in cooperation with other agencies including UNCTAD, needs to support the initiatives taken by governments of Member States for capacity building, implementation and enforcing the legislation to protect and promote traditional medicine knowledge through training, seminars and workshops. International cooperation should be increased in this area.
7. Governments should develop and use all possible systems including the *sui generis* model for traditional medicine protection and equitable benefit sharing.
8. Countries should develop guidelines or laws and enforce them to ensure benefit sharing with the community for commercial use of traditional knowledge.
9. Traditional knowledge should be recognized in the form and concepts of the traditional medicine system of a particular country, and not necessarily on a western model.
10. Efforts should be made to utilize the flexibility provided under the TRIPS Agreement with a view to promoting easy access to traditional medicine for the health care needs of developing countries.

The 56th World Health Assembly passed a resolution on its 10th Plenary meeting on 28th May 2003, WHA 56.31. Agenda item 14.10 on Traditional Medicine, urged the member states to promote and support, if necessary and in accordance with national circumstances, provision of training and, if necessary, retraining of traditional medicine practitioners, and of a system for the qualification, accreditation or licensing of traditional medicine practitioners.

The above documents show the importance of recognizing the role and relevance of developing policies nationally and Internationally for rational and safe practice of Ayurveda.

WHO has highlighted the need of regulation of traditional medicines among member states. If the people are to be benefited from any medical system, the system has to be first recognized by the state and then its trade and practice have to be regulated in such a way that safe and quality medicines are provided to the consumers by qualified physicians. This is not possible without understanding the system as such, with all its specifications. Hence, any attempt to regulate TSMs like Ayurveda should be firmly grounded on the principles and practices of the concerned system, ensuring that safe and effective medicine are rationally dispensed by qualified doctors and freely accessible to the public.

Global Resurgence of Ayurveda

The global profile of Ayurveda can be analysed from three different angles. With respect to popularity, Ayurveda is best identified as a holistic health care system for wellness, integrating the mind-body-spirit trio. The very many Ayurvedic spas and wellness centres where Ayurveda hand in hand with Yoga is offered as a detoxification and de-stressing therapy endorse this fact. The system, which entered global health care arena as a massage system holding the hand of Yoga, started moving on its own. A few committed individuals and institutions contributed significantly in creating awareness regarding Ayurveda among the various countries of the world. Lately renowned Ayurvedists with scientific background have done a great deal in propagation of Ayurveda in the countries of their influence specially America, Japan, Australia, Italy, Germany etc.

However, this did not contribute to the legal recognition of Ayurveda as an “independent medical knowledge system” in most parts of the world.

The second aspect is the pharmaceuticals where as stated above, Ayurveda drugs are marketed and propagated as nutraceuticals, food supplements, cosmetics, rejuvenatives and aphrodisiacs. In most of the countries, Ayurveda drugs can be seen in General stores as dietary supplements under the label of Ayurvedic Herbal products. These are not classified as drugs and hence are not allowed to have any medicinal claim. There is also no requirement for a qualified Ayurveda physician to prescribe them. Sceptics of TM have demanded very high standards to accept its efficacy and validity. However the huge costs involved in research of the kind that is demanded by the global scientific community has, in effect, only denied people worldwide access to Ayurveda and other traditional medical knowledge systems in their truly holistic sense.

The third and perhaps the most recent trend is the promotion of Ayurveda education. Ayurveda is studied from different angles abroad. There is a purely academic approach to study Ayurveda, an exercise in which medical anthropologists, historians, philologists and sanskritists are engaged. Then there is the category called Complementary and Alternative Medicine, which looks at Ayurveda as part of a spectrum of alternative approaches to healing but not as an independent system of medicine. Compared to the first approach, the concept of CAM recognizes a certain amount of practical relevance for systems of medicine like Ayurveda. Thirdly, there are the promoters of Ayurveda who believe in its identity as an independent system of medicine. In this group there are a few who have a genuine understanding of Ayurveda – who desire to promote Ayurveda truly for the well-being of the global community.

Simultaneously, there are many institutions in India offering Ayurveda courses to interested foreign nationals. Many Western scholars have come to India and did a formal Ayurveda education out of sheer love and interest in the subject. Many Modern doctors in the west also were keen to understand Indian holistic health care systems better. The main barrier in acquiring formal Ayurveda education in India was the lack of authentic texts and capable teachers who can convey the subject in depth in English. The time consumed for acquiring deep knowledge of Ayurveda was unaffordable to the common western people. Initially they had to learn Sanskrit and Hindi and then Ayurveda, which consumed good quality years of their life.

By 1988, a few institutions in India commenced short-term courses for foreign nationals, which further boosted the flourish of Ayurveda abroad. These courses are of varying purpose and duration, ranging from three months introductory course for Ayurveda to a full fledged BAMS for training as an Ayurveda physician. In the year 1992, a one-year diploma in Ayurveda was started under the International Centre for Ayurveda Studies, in Gujarat Ayurved University, Jamnagar. BAMS course for foreign nationals was started by ICAS in 1999. Till date students from as many as 43 countries have completed various Ayurveda courses from GAU alone. This is ample evidence for the growing interest for Ayurveda outside India.¹ The University has had understanding with a dozen Ayurveda institutions abroad for technical guidance and assistance as the case may be. Many institutions are still looking forward to get an official MoU signed by the University. There are as many as 99 Ayurveda institutions outside India offering various courses.

The reasons behind this global resurgence of Ayurveda and other traditional medical knowledge systems can be summarized as below –

- ❖ A holistic approach towards health as against the reductionistic approach by the conventional modern medicine.
- ❖ 'Drug for patient' approach as opposed to 'drug for disease' approach by modern medicine, which offers detailed patient interaction and tailor-made drug and therapeutic plans.
- ❖ A broader concept of health, which covers the physical, mental, physical and social aspects.
- ❖ Drugless therapies offered by giving emphasis to life style modification and healthy diet in harmony with nature, climate and customs.
- ❖ Use of natural resources as medicine to which our body system is geared through predisposition.
- ❖ Due to the increasing awareness of the adverse drug reactions (ADR) and other side effects of many modern chemical therapeutic agents and the craving for a safer alternative.
- ❖ The increasing frustrations due to increasingly materialistic approach of modern world brings in the urgency for spiritual awareness and the aptitude towards the three dimensional (mind-body-spirit) perspective to health as visualised in Ayurveda philosophy.

Most importantly, increasing global disgruntlement with contemporary western medicine and increasing realisation of its inefficacy in handling most health problems is leading people worldwide to explore other medical knowledge systems for more effective health-care solutions. Hence it is all the more important for these systems to avoid going the western medicine route, otherwise a few decades hence, the same story will be repeated with traditional medicine.

¹ Data from ICAS GAU.

Global Status of Ayurveda

In the light of the increasing popularity of TSMs, there was an initiative to bring about some kind of regulation for the trade and practise of TSMs in many developed countries by the end of the last millennium. The modern scientific mind at this juncture hesitated to appreciate the medicinal action of these therapies. Eventually, the practise of Ayurveda was degraded to the practise of selected herbal remedies declared safe by the local/ regional health authorities. There was no sincere attempt to recognise the system as such in its original form. Thus, avoiding the law became the basic rule in Ayurveda practise in most of these developed countries. The complexity of Ayurveda pharmaceuticals in formulating various compound formulations processed classically or conventionally made it difficult to isolate and identify individual drug kinetics, and hence this misbranding went on without legal entangle.

Even after two decades of its globalisation, it is doubtless so say that Ayurveda is facing identity crisis among medical world. Despite our tradition and increasing popularity, we still lag behind Traditional Chinese Medicine, Acupuncture, Homeopathy etc. in global recognition. Ayurveda has been wrongly parented in many countries under the shelter of 'Herbal Medicine' or as a Traditional Medicine of empirical base or at the most as a 'Complementary and Alternative Medicine'. The term Ayurveda does not appear with an independent status anywhere in the world other than in the Indian subcontinent.

Indian materia medica has the history of a millennium. *caraka samhita* has direct reference of over 600 herbs and many herbal formulations. It is evident from many historical evidences that many ancient travelers who visited India from China, Far East, Europe etc. were impressed by the native medical system. In the British Herbal Pharmacopoeia, there are as many as 246 drugs of plant origin mentioned, and a good number of them are of Indian origin. The British people's interest in Ayurveda was limited to the pharmaco-dynamics of the valuable plant tradition of India. . Dr. Garcia da Orta, a Portuguese doctor, wrote from India a treatise "Colloquies of the Simples and Drugs of India", The frontispiece contains the approval of the count Viceroy dated November 5, 1562. So it is neither a 15 nor a 30 years' business! Precisely it is a matter that is 441 years old. Orta's work was translated, summarized or mentioned in several European languages in Latin (1567 A.D.) by Clusius, in Italian by Briganti (1582 A.D.) and in French by Culin (1619 A.D.).

The following drugs were identified, described and their uses mentioned by Orta: (1) Kumari (2) Elaichi (3) Amber (4) Parijat (5) Bhallatak (6) Hingu (7) Vijaya (Bhang) (8) Kokum (9) Karpur (10) Sonamukhi (11) Narikel (12) Kusthta (13) Cubebs (14) Dhatura (15) Hastidanta (16) Supari (17) Tamala (18) Lavanga (19) Kutaja (20) Sunthi (21) Laksha (22) Khadir (23) Jaiphala (24) Haritaki (25) Nirgundi (26) Neem (27) Sarpangandha (28) Marichi (29) Pippali (30) Chandan (31) Jatamansi (32) Vanshalochana (33) Trivritti (34) Imli (35) Karpurkachali (36) Shigru etc. These were largely imported from India into Europe, as highly valued medicinal plants and their products. Garcia da Orta took all the help for his book from the local Ayurvedic physicians who have been named. This implies that even in Europe Ayurveda as a system of medicine and their practitioners were recognized as early as in the sixteenth century. A sonnet was written to honour Garcia da Orta's contributions, by

Camoens. The 'Hortus Malabaricus' written in 16th Century gives account of a large number of herbal drugs in Southern India. In the 19th Century, lot of books were published on this subject like Catalogue of Indian Medicinal plants by John Fleming in 1810, Indigenous Drugs of India by K.L.Dey in 1867, Supplement to pharmacopoeia of India by Moodeer Sheriff 1865

Today, Ayurveda medicines are largely imported into various countries as 'Herbal Medicines', Food Supplements, and Cosmetics etc. These include single herbs, compound herbal remedies and patented drugs which contain non-herbal ingredients. Many of these contain Ayurveda natural mineral and metallic drugs which need strict medical supervision for consumption and for follow up treatment. Since there is no proper mechanism to regulate these drugs, many a times suspected ADRs spoils the reputation of the Ayurveda system as a whole, where as in most cases it is the irrational use and misbranding as food are the culprits.

Today the global estimated turnover of exports of herbal medicines is more than Rs. 50,000 crores. Of this India's share is very negligible, coming to only 400 cores.²

Current global status of Ayurveda, A country wise analysis

Among the various countries where Ayurveda has popularized, the status of Ayurveda varies widely. The trade, practice and education of Ayurveda are prevalent in all these countries, but it has not been recognized legally as a Medical system. However, Ayurveda has established its position around the globe as a unique health care system with a holistic solution to many complex health hazards. The flourish of the system has to be positively channeled to benefit the maximum people with minimum expense. Hence it is important to have a factual understanding of all Health care traditions which are popular and in public demand. A fair and effective regulation for any medical system can only be designed by experts who have in-depth knowledge of the specifications of the concerned system. The ultimate aim is to enhance its utility and neutralize its damage and to offer a cost effective and safe health care to the public at large.

For assessment of current regulatory status of Ayurveda globally, the countries should be broadly classified in to four groups.

1. India and other SAARC countries: These are the countries where Ayurveda has a strong scientific base and is well recognized as a medical system with an independent status. The trade and practice of Ayurveda is regularized by an Act of Parliament in these countries. The profile of Ayurveda practice in these countries can be outlined as below.

Sri Lanka

Ayurvedic tradition in Sri Lanka is centuries old but the teaching Institutions were established only in thirties by the persons educated from India. At present the following institutions offer Ayurveda teaching and research in the country:

² Data available from Exim Bank, Mumbai

- i. Institute of Indigenous Medicine (IIM), Colombo University, Rajgiriya.
- ii. Gampaha Wickramarachchi Ayurveda Institute (GWAI), Kelonia University.
- iii. Bandaranayake Institute for research in Ayurveda, Colombo.
- iv. Ayurveda Drug Manufacturing Corporation of Sri Lanka, Colombo.

Since 1980s IIM has started to award the degree of BAMS. Later GWAI also started awarding the degree under the Kelonia University. Many of Sri Lankan graduates have attained Post Graduate Degrees from Jamnagar and Varanasi and this country has sufficient highly qualified faculty for teaching Ayurveda in their country.

Though Sri Lanka Institutions and Govt. does not have official connection with CCIM, they follow the rules, requirements and syllabus as practiced in India. In Sri Lanka there is no accrediting body at present however there is proposal for the same.

Sri Lanka has also got a highly flourishing Ayurveda tourism inflow – most of the hotels/resorts are very well equipped with Ayurveda related infrastructure and bring in actual patients from Europe for periods ranging from 3 to 6 weeks and even more, to undertake full courses of Ayurveda treatment.

Nepal, Bhutan

Nepal is the first country to execute a National Policy on Ayurveda. Ayurveda has the status of a medical system in Nepal. Full-fledged Ayurveda degree course of 5½ year is conducted by Institute of Medicine in the premises of Tribhuvan University, Kathmandu.

Ayurveda is practised widely and has a key role in Primary Health Care. Wide range of Ayurveda Medicines are manufactured and used in the country. India supplies the major share of Ayurveda Medicines used in Nepal. Bhutan also recognises Ayurveda as a Medical system. Unani and Ayurveda are popular along with Tibetan Medicine in this country. India caters to the Ayurveda medicine requirements of Bhutan as in Nepal.

Bangladesh, Pakistan

Before independence of India, there were few Ayurveda colleges in existence within the boundaries of the present Bangladesh. However, after the formation of Bangladesh nation, Ayurveda Education and practise took a new shape. The system is recognised officially and the Government has taken initiative to integrate the Ayurveda and Unani systems in the primary and secondary health care institutions Upazilla Health Complexes (UHC) and District Hospitals (DH). A full-fledged 5-½ yr degree course is being conducted at Government Unani & Ayurveda degree college, Dhaka. They have adopted nearly the same syllabus offered by CCIM. This college is affiliated to University of Dhaka. Apart from this, there are 7 Ayurveda Colleges offering Diploma in Ayurveda in the private sector. The Certificate is given by the Bangladesh Unani and Ayurveda Board. The drugs are regulated by The Drug Control Act 1982. There are 153 BAMS registered Ayurveda Doctors and 398 Diploma holders practising in Bangladesh. There are 161 Registered Ayurveda Drug Manufacturing Companies in Bangladesh and 3150 registered Ayurveda Medicines in practise. 162 registered sales centres are there for the trade of Ayurveda Medicines in the country as of today.

Pakistan has many Ayurveda manufacturing units and the practise of Ayurveda and Unani are wide spread here as in Bangladesh.

- II. Other Asian Countries: Ayurveda along with Traditional Chinese Medicine has a strong base in the Countries of Asia. Most of the countries have developed their own TSMs, but Ayurveda forms a major part of these traditions. The Traditional Medicine practice and the drugs have a pivotal role in the Primary Health Care of these nations and the trade and practice of the same is regulated by the Act of respective Parliaments. The main players are:

Japan

In Japan the study, research and spread of Ayurveda is being carried out for last 30 years. The Osaka medical school has established Society of Ayurveda in Japan in 1969. Since then various program like seminar etc were organized for the propagation of Ayurveda. Many delegations from India including contemporary Ayurveda personalities have visited Japan, which gave good boost to the popularity of Ayurveda in Japan.

The Institute of Traditional Oriental Medicine in Tokyo was established in 1994. This Institute is conducting short-term course for health professional, which contains 50 hours of theoretical teaching and 50 hours of practical training. A special course in Panchakarma is also being offered to general public. A quarterly periodical named "Shanti Marga" is being published since inception. Many books have already been translated in Japanese and published. Another Ayurveda institute "Aihore Pratisthanam" and "Osaka Ayurveda Kenkyusho" was established in Japan in 1987 by qualified Ayurveda Physicians. They have also translated few Ayurveda classics in Japanese language. They are conducting short term primary course of 54 hours and advance course of 91 hours. They have also a course of Bhava Prakasha to study Ayurved and Sanskrit together. Founders of college are well qualified in Ayurveda and college is also supported by a qualified faculty from India.

DPR Korea

The Traditional Medicine of DPR Korea is called Koryo Medicine. Koryo medicine has a remarkably pivotal role in the National Health System. The whole medical care system is government owned. At Primary Health Care level, 70% of the treatment is covered by the Koryo Medicine. The education is a six year integrated course where 30% of the curriculum is devoted to Modern Medicine Studies. The Conventional Doctors also have to cover 30% of their curriculum in Koryo Medicine. The Korea Model of education and National health care System is ideal to be followed by other countries for developing their own TSMs. The Articles 15,29 and 36 of Law of Public Health of DPRK legally stipulates the issue of developing Koryo Medicine as a part of the NHS.

Myanmar

The traditional medicine of Myanmar has its origin from Ayurveda. Up to 79% of the total raw materials are of herbal origin and the remaining of animal and mineral origin. The country has a Department of Traditional Medicine. Ayurveda practise is

officially recognised and many students are studying in India in various Ayurveda degree courses and certificate courses.

Thailand

Ayurveda is very popular in Thailand and is counted as a Traditional Medicine. The Ayurved Vidhayalai (Jevaka Komarapaj) College offers a Bachelors'degree in Ayurveda Medicine. Many Ayurveda practitioners and Ayurveda therapy centres are running in the country and the medicaments are imported from India and Sri Lanka.

III. This group includes those developed countries of America, Europe and Australia, where Ayurveda is widely practiced as wellness therapy, with no recognition or regulation. The drugs are sold as food supplements and cosmetics, without the intervention of any Ayurveda practitioner, as OTC products. Many Educational institutions offering various Ayurveda courses are run in these countries, with and without registration and recognition. To have a look at the individual countries,

III. USA, Canada & South America

The practise and education of Ayurveda is flourishing in many states like California. Vasant Lad, Deepak Chopra, Robert Svoboda, and David Frawley have successfully propagated Ayurveda in the US. They have established Educational institutions, written large number of books relating to Ayurveda and other Indian knowledge systems, and established chains of Ayurveda clinics and counselling centres all over the country. Three type of training and education program in Ayurveda are available in America:

- Ayurveda Institute of New Mexico offer extensive on site training programs for self-healing without certifying practitioner. Another Institute runs a shorter seminar program.
- American Institutes of Ayurveda runs '*home study programs*' for Vedic Studies in New Mexico. Florida Vedic College, the Massachusetts and the Ayurveda Holistic Centre in New York offer home study plus minimal classroom training (Usually two weeks per year) culminating in certification as a practitioner.
- The only formal and elaborate training program in Ayurveda in America is being offered by the California College of Ayurveda. The California college of Ayurveda was founded in 1995. The training of Ayurveda practitioners was started with title Clinical Ayurveda specialist. In 1996 the State of California formally approved the college as a vocational training institution in the field of Ayurveda. In America two associations i.e. National Ayurveda Medical Association and California Association of Ayurveda medicine have been formed which trying two get recognition and accreditation to Ayurveda.

The states of California, Florida, New Mexico and New York have approved the teaching of Ayurveda at tertiary level. Recently many institutions and associations were formed for Ayurveda training and practises. Many graduates and post graduate of Ayurveda arrived in USA and trying to establish Ayurveda teaching and treatment centres. Few of them are named below:

- ❖ AAAM – American Academy of Ayurveda Medicine. They have established G.D.Pandey Ayurved University at New Brunswick
- ❖ American Institute of Vedic Studies
- ❖ New England Institute of Ayurveda Medicine
- ❖ Vivekanand Ayurveda College
- ❖ Vedic College of Florida

During Clinton Regime, A white House Committee on Complementary and Alternative Medicine was constituted to study the issue of regulation of CAM therapies. The report of the committee did not favour Ayurveda much to get any kind of recognition for its independent status as a Traditional Medicine.

Canada

In Canada, a council for Ayurveda practitioners is registered with the Government of Canada by name International Council of Ayurvedic Physicians (ICAP) Inc. The main goals are to create general awareness in general public about Ayurveda, Yoga and other ISMs through Internet, TV, Newspaper, Magazines, Seminars, Conferences, Workshops etc. They are also providing platforms to upcoming Ayurveda practitioners and Immigrant Ayurvedic doctors from India. They help Manufactures and Importers of Ayurveda Medicines. The council is constantly negotiating with the Canadian Government for recognition of the trade and practise of Ayurveda. A proposed International Institute of Ayurveda & Complimentary Medicines Inc. is expected to be established in Toronto by next year.

On January 1, 2004, all natural products in Canada were moved into the drug category by the Canadian Government. This demanded severe documental evidences on safety efficacy and quality for these medicines to be practised or traded in the country. To counter this, bill C-420 was launched, which would change the definition of food and drugs such as to achieve what that publicly supported “third category”, would have done. The Canadian parliament is having the second reading of the bill C 420 regarding Freedom of Choice in March 2006. This bill is expected to favour the practise of the TSMs since they allow the consumer to choose the health care of their choice.

Argentina and Brazil

Practice and trade of Ayurveda is not very popular in Argentina. There are no qualified Ayurveda physicians or full-fledged practice there. Some progress has been made in the area of Ayurveda education in the recent years.

In the Medical School of State University of Buenos Aires a Post Graduate Diploma course has been started and Dr. Jorge Luis Berra has been appointed Director for the Post Graduate degree course in Ayurveda Medicine in the year 2000. These courses are offered to qualified doctors and paramedical professionals. Courses are offered through “Foundation de Salud Ayurveda Prema.” The foundation has collaboration with Mimonidus University of Argentina as well who certifies their

Regular and part time PG courses in Ayurveda. They also have a distant learning course where the well-known Indian Ayurvedic academicians from Gujarat Ayurved University, Banaras Hindu University and National Institute of Ayurveda Jaipur etc. are contributing study materials. All these courses are run as Post Graduate Courses for Medical Professionals and Ayurveda is being practised as a Complementary medicine along with modern medicines by qualified doctors. About 300 Medical professionals are qualified from the Foundation's courses till date and they are practising Ayurveda. The Governments of Venezuela, Chile, Nicaragua, Costa Rica, El Salvador etc. have invited Dr. Jorge Luis Berra who is the Director of the "Foundation de Salud Ayurveda Prema." For lectures and briefings in Ayurveda. Ayurveda modules are included in the Diploma course in Tourism Development conducted by UTELAS. Four Latin American Countries, Venezuela, Costa Rica, Nicaragua and Guatemala have legally approved the import of 20-30 Ayurveda Medicines, some of which have metallic and mineral contents to be used as medicines.

Dr. Sergio Lais-Suarez is offering his one-year course (240 Hours) exclusively to medical doctors through his institution named as Department de Medicina Ayurveda, Universidad Abierta Ineramericana at Chacabuco since 1997. Dr. Sergio has more than 20 years experience in Ayurveda and yoga. He also runs a health spa where Panchakarma massage is also being offered. A visiting faculty from India supports his Institute.

In Brazil, Dr. Luiz Guilherme Correa Neto runs Dhanwantari Ayurveda Centre. Legal status and market situation is the same as in Argentina.

IV. Europe and other countries

In the European Union there had been an agreement that all countries would have their herbal industries and products under identical medicines controls by end 1992. The only major country to achieve tight control was UK and as a result, most herbal products were thrown out of UK market. Other EU countries as Germany, France, Italy and Spain all had their own different degrees of light control, which enabled their herbal market to expand considerably. By 1993, there was no unified market in the EU Community and no attempt was made to unify it in the last ten years!

From 1st November 2005, The EU has enforced the Directive for Traditional Herbal Medicines. Each member state will now have to pass its own regulation within this directive for the trade of Traditional Medicines which are sold as OTC. This affects the sale and practise of almost all Ayurveda products on market unless they are purely herbal OTC products with minimum of 15 years of documented usage history within the EU. The Directive will effectively check the entry of newly developed Ayurveda drugs and all drugs that uses animal products such as milk products and honey, all natural mineral drugs and combinations of the above with herbal drugs. 70-80% Ayurveda drugs will be not allowed in EU in the coming years and this shuts the door to the practise of Ayurveda in its genuine form within the next decade. Illegal imports and internet marketing which endangers the public health is to flourish and this spoils the reputation of the system and public health simultaneously. Much hues and cries are being raised over the issue all over EU in this regard.

The largest number of Ayurveda tourists in India is from European countries. They travel down to India for the treatment of a wide range of chronic disorders and take back bulks of Ayurveda medicines for their use from here.

The United Kingdom

The trade and practise of Ayurveda flourished in the UK in late '80's. The main players who flourished by the end of '90s are

1. The Maharshi Ayurveda people who were successful in establishing a separate identity for themselves.
2. The Indian led Ayurveda lobby controlled by Ayurveda Company of Great Briton, which was established in 1989.
3. The Sree Lankan led Ayurveda lobby under the banner of Ayurveda Medical Association
4. A group of Ayurveda Medicine Traders under Mr. Sandeep Garg of Vedic Medical Hall Ltd.
5. The International Ayurveda Foundation which has stakeholders all over Europe and India was established in 2002.
6. The Ayurveda Practitioners' Association established in 2005

In 1999 the Ayurveda College of Great Britain (ACGB) was launched, which started a part time three-year Bachelor of Ayurveda (Hons.) (B.A.Hons) Course in affiliation to the Thames Valley University. The TVU graduates were offered a registration under BAMC/BAAAP, which were the Ayurveda professional Associations run by ACGB.

Lately The Ayurveda College UK has been trying to start a B Sc and M Sc course in Ayurveda in collaboration with the Middlesex University. The Statutory regulation for Herbal Practitioners as well as the partial Academic recognition to the part time courses may not at this stage help Ayurveda to be recognised as a system of medicine in its own capacity. As long as the Practitioners of Ayurveda are not recognised and regulated as Traditional Practitioners who may be allowed to practise the system as a whole with a full fledged fool proof regulatory system to categorically define and duly regulate the trade and dispensing of quality Ayurveda medicines of drugs other than of herbal origin, any attempt to offer quality Ayurveda to the public will remain incomplete and defective.

The latest entrants to the Ayurveda Field are the Ayurveda Practitioners' Association. They are closely working with the European Herbal Practitioners' Association and the MHRA of UK for establishing a Statutory Regulation for Ayurveda Practitioners in UK. The International Ayurveda Foundation has been pursuing with the agenda of Global Recognition of Ayurveda from 2002 onwards. The Foundation is working closely with the Indian Government and has over 100 stakeholders around the world. Currently IAF is lobbying against the misbranding of Ayurveda as a 'herbal tradition' and the THMPD enforced in EU regulating Ayurveda drug trade in EU under this pretext.

Germany, Austria, Switzerland

Germany is country where Ayurveda along with other Vedic sciences is having good foot hold. Ayurveda Physicians from India are regularly visiting to deliver lectures, seminar and consultations. German Government has still not recognised the practise and trade of Ayurveda. A few wellness centres are established and are doing good work in promotion and propagation of Ayurveda in Germany.

In medical circles, Ayurveda is not acknowledged as a medical system by the Medical Association. About 20 doctors mainly use Ayurveda; about 200 doctors additionally use Ayurveda. The conventional Medical men doubts about the curative power of Ayurveda medicines since there is no much evidence-based research acknowledged so far. Among the "Heilpraktikers" or Practitioner of natural medicine (HP), about 20 of them mainly use Ayurveda and about 200 additionally use Ayurveda. They are allowed to independently offer Ayurvedic diagnosis, herbal therapy as well as Panchakarma. Ayurveda therapists are officially not acknowledged as therapeutic and medical assisting professions. Panchakarma therapies are medically feasible only in combination with the already acknowledged profession of a physiotherapist or a nurse or under the survey of a doctor. These therapies are permitted in the field of wellness and health prevention but no permission for invasive methods, purging methods, basthi etc.

Ayurvedic products are only to be sold as food supplements. These are subject to different standards of production and import like ISO-certificates, BDIH-standard and accordingly broad declaration of ingredients is required with quantity. Only pharmacists are allowed to import Ayurvedic medical preparations on their own responsibility and to forward them directly to patients Ayurvedic medical preparations; as opposed to Homeopathic, Spagyric or Anthroposophic medicines/preparations; are not listed in the Hufeland index, which is the German index for medical professionals to issue invoices.

The situation is almost similar in Austria. Here, about five doctors mainly use Ayurveda; about 30 doctors additionally use Ayurveda, among medical circles. Practitioner of natural medicine (HP) profession is not legally permitted in Austria. Training of Ayurvedic professionals is not acknowledged yet in Austria.

Presently, DVÖAS, an umbrella organisation of Austrian Ayurveda schools, initiated by European Academy of Ayurveda, is working on enforcing a legal recognition for Ayurveda therapists as medical assisting professions at the Austrian Ministry of Trade and Commerce and the Ministry of Health and to get them a business license.

A commission for Asian healing methods was established by the Federal Ministry of Health in 2005. Representatives of TCM, Tibetan medicine and Ayurveda Medicine were appointed as members in this commission.

The Government of Lower Austria has officially declared "Naturarzt für Ayurveda" run by Dr. Hans Heinrich Rhyner, as an Ayurveda Village and they will receive a grant form the said Government to realize the master plan of this village according to Ayurvedic and Vastu guidelines.

The European Academy of Ayurveda established by Mr. Mark Rosenberg runs Ayurvedic courses for the past couple of years. The Mahindra Institute of Ayurveda under them is doing good work for the promotion of Ayurveda practice and Education with the help of Indian scholars and Gujarat Ayurveda University. They have established good chain of wellness centres and clinics in Germany.

In Switzerland, the situation is the same. Among Medical professionals, about two doctors mainly use Ayurveda and about 20 doctors additionally use Ayurveda. In the field of Ayurveda Education, in some federal states advanced trainings in the field of Ayurveda are acknowledged as advanced trainings for medical professionals. Ayurveda are not included in the basic insurance plan of Switzerland. A regulatory commission for alternative medicine REPAM is founded, which consists of the most important associations of alternative medicine. This includes two Ayurveda associations in Switzerland. Ayurveda is listed as the fourth "alternative medicine". The others are Traditional Chinese Medicine, Homeopathy and traditional European methods of natural medicine. The process of forming an independent medical profession for alternative medicine with an acknowledged diploma (legal status comparable to Practitioner of natural medicine), with focus on Ayurveda, will be a prerequisite for the legal permission for the sale and practice of medicaments of Ayurveda. In Switzerland, this process is supported and accompanied by the government and its subordinate body BBT and a special commission for coordination (KoKo). But this is going to be a lengthy procedure, which is expected to take at least 5 years.

Hungary

In Hungary Ayurveda has become an accepted medical system and is an obligatory subject for a postgraduate degree course since 1997. A Hungarian establishment "Ayurveda Medical Foundation" is working for the propagation of Ayurveda in Hungary. The Government is very positive towards Ayurveda and currently 43 Ayurveda drugs have been officially approved for use in the country and being imported from India and Sri Lanka.

Since 1991, Garuda Trade Ltd. has been making permanent efforts to achieve its main goal: the introduction into Hungary of the methods and practices of the ancient Indian medical science of Ayurveda, and the penetration into the domestic market with natural health- and beauty-care products based on Ayurvedic texts. In compliance with its aims, our company has been licensing and importing from India since the early 1990's food-supplements, paramedicines and beauty-care compositions. The Garuda Trade Links supports two Ayurveda Organizations in Hungary namely the Hungarian Ayurveda Medical Foundation the Scientific Association of the Hungarian Ayurveda Doctors.

Netherlands

The Oriental College jointly with the Foundation of Indian systems of medicines runs two Ayurveda courses from 2004 onwards in Ayurveda Medicine and Ayurveda Psycho physiology. The courses are organised in an integrated pattern with modern Anatomy, Physiology, Pathology and Psychology. FISM has designed the concept of Satwa Ayurveda highlighting the psycho-spiritual aspects of Ayurveda.

European Institute for Scientific Research on Ayurveda (EISRA) was established in 1989 and they started organizing 2-year technical and 4-year academic level degree program since early 90's. This Institute is well supported by the faculty comprised of various graduates and postgraduates of Ayurveda from India visiting regularly. They have also formed a Professional association called "Associatie Ayurveda Nederland". This Institution has published many books in Dutch prepared by its faculty.

Italy

There are several Institutes in Italy, which imparts various Ayurveda courses. The practise of Ayurved as a Traditional and Complementary therapy is wide spread. Dr. Bhagwan Dash, an eminent Ayurveda Expert from India has successfully created a good clientele in Italy. The Instituto Italino has opened up discussions with the Italian Government for relaxations in the complex regulatory requirements for importing Ayurveda Medicines in Italy. The other Institutes are Charysat Global Health, Firenze; Yogni Akademi, Varese; Mahatma Gandhi Open University, (Vipiteno) Neustao; SKS Association, (Vipiteno) Neustao; Associazione culturale, Pozzuolo Martesana; International College of Ayurveda Jyotinat, Genoa.

Jyotinat school has been teaching Indian traditional remedies in Italy for fifteen years. The school's national headquarters are located in Genoa, with branches in Milan and Trieste and representatives in numerous other Italian cities.

Spain

Spain has the right milieu for planting a sapling of the Ashwatha tree of Ayurved; this is because of the ethnic melting crucible that Spain has been for centuries. At Barcelona and other cities of Spain, eminent Ayurvedic leaders and Naturopaths have been involved with both education and services in alternative systems of medicine. Now there is a demand for a degree course in Ayurveda, at Barcelona.. Bhavan's SPARC was requested for the draft of the curriculum which they have done with the input of several Indian Academic experts.

In 2005 November, a conference was conducted in Catalonia, about the legalisation of the natural and alternative therapies as the Catalan government are doing a pioneer project to regulate the natural therapies in Catalonia following the European union directive about these therapies. The Spanish government is waiting to see the Catalonian project to see if they want to follow it or not.

This project "Regulacio de les Terapis Naturals" is done under the direction of Dr Lluís Torralba who is a modern Doctor, Subdirector General de Serveis Sanitaris (general sub-director of the health service), Generalitat de Catalunya (Catalonian Government), Departament de Salut (health department), Direccio General dels recursos sanitaris (General Committee of healthy resources). These project will initially regulate Homeopathy, Traditional Chinese Medicine, Naturists Science and Manual Therapies.

With the law, all natural clinics, schools, doctors, practitioners and therapists will be registered. For obtaining the registration, the practitioners will have to qualify an examination conducted by experts concerned subject or therapy.

France, Czech Republic, Greece

In France, Ayurveda is getting slowly popular as a wellness therapy. Not many Ayurveda drugs are used and only few Institutions are offering Ayurveda Education. 'Tapovan' Ayurveda Centre offers some Ayurveda Therapies and health care courses in Ayurveda. The legal recognition is a remote prospect in France for Ayurveda. Ayurvedic cosmetics and healthcare products are available in a few outlets as OTC products.

In Greece Dr. Kostopolos is running an Ayurveda centre. The scenario is same as in France with respect to the legal status and popularity. Czech Republic is a little more flexible in this respect. Dr.Govind Rajpoot and Dr.George Eassay are conducting Ayurveda courses and well ness therapy centres in Czech Republic. Ayurveda is gaining popularity in this country, but legal recognition and regulation seems to be a distant possibility.

Australia and New Zealand

Ayurveda is being practised in Australia for the last decade by many qualified Ayurveda practitioners from India. The recognition and legal status as a medical system is very far. Presently drugs are imported subjected to TGA and most of the Ayurveda products cannot follow this route due to want of required data. Still a large number of products are imported mainly from India and Sri Lanka by avoiding the law. An International congress of traditional Asian medicine (ICTAM) held in 1979 at Canberra. After this congress, Australian School of Ayurveda was founded in Adelaide with the help of experts from Indian Universities. Later in 1994, this Institution developed into the Australasian Academy of Natural Medicine. This institution with recognized Ayurveda faculty was to gain full accreditation in Australia. It offers Diploma (either Ayurveda or Naturopathy) after four years of training plus clinical practice. Its competency based standard training comes under the vocational Education and training Authorities.

In New Zealand, the situation is more or less the same. Dr. Phillip Cottingham established the "Wellpark College of Natural Therapies" in 1990 in Auckland. This college conducts various courses in Ayurveda, Natural Therapies and Yoga. They conduct a Certificate course in Ayurvedic Life style counselling, extending to total 840 hours. Another course of 3 year Diploma in Ayurved Medicine is also being conducted. This college is recognized by New Zealand Government. This college is supported by an Ayurveda faculty including Dr. Ajit from India. The drug trade and dispensing is still heavily restricted in these two countries and currently, the trade and practise is done by circumventing the local rules and regulations.

- IV. Others: All other Individual countries of Africa, Latin America, Russia and other CIS States have a large clientele for Ayurveda. The system even though is not recognized as an independent system of Medicine, Ayurveda in some form or other has gained popularity and status of an Alternative Medicine. Large number of people of Asian and local origin travel down to India from these countries for Ayurveda treatment for various chronic diseases. Some of these countries where Ayurveda is most popular are

South Africa

A large presence of Indians in this country made Ayurveda popular. The Nelson Mandela School of Medicine offers Ayurveda Courses with the help of the Natal University established and has an Ayurveda faculty at the University. The university started the Ayurvedic Practitioner's course for 1 year with lectures being conducted as 2 hours per week. South Africa today allows the importing of Ayurveda medicine to this country. Ayurveda practice is also recognized and has representation on different Boards of the South African Ayurveda Liaison Committee and African Allied Health Professional Act.

Russia and other CIS States

Russian Government and public has acknowledge Ayurveda as a healing system, although there is no legal recognition for the profession or the system as such.

NAAMI medical center, Moscow is engaged in propagation of Ayurveda in Russia since last six years. They have invited a team of vaidyas from India and opened up an Ayurveda clinic in Moscow, which was a good success and generated good awareness for Ayurveda. The translation of samhitas of caraka, suzruta and vAgbhaTa are being done in Russian language. Govt. of India has signed a MOU with NAAMI in June 1999 under which all support is being provided by the Govt. of India for the development of Ayurveda in Russia. The Russian Govt. has conveyed that they have recognized Panchakarma as line of treatment throughout the country and the process for recognition of Kshara Sutra treatment has also commenced. Many Physicians are visiting Russia to train their physicians in various practices of Ayurveda. Students of Institute of Medico-Socio Rehabitilogy were taught Ayurveda by Dr. Agnivesh, a reknowned Ayurveda Expert from Kerala and his team. At present Ayurveda teaching starts from second year and runs up to the completion of the course.

The situation is same in the other CIS states.

Israel

Trade and practise of Ayurveda is being popularised in Israel recently. System is practised as a Traditional Medicine without any recognition. Very few drugs are used in the country. Reidmann International College for Complimentary Medicines under Dr.A.Mizrahi in Tel Aviv conducts Educational courses in Ayurveda. The system is practised as a CAM therapy, but is not officially recognised.

Apart from these countries, Ayurveda is practised in one form or other in many other countries like Romania, Poland, Arabian countries etc.

The system is best popular as a CAM/TM therapy. There are many educational institutions, Therapy Centers and Clinics running successfully. Here Indian stores and General stores sell a wide range of Ayurvedic drugs labeled as 'Ayurvedic herbal product'. The lack of proper regulatory methods coupled with the growing demand is causing fatal damage to the reputation of the system by the forged practices of the system. Some of this is genuine where as mostly the controversies regarding Adverse Drug Reactions are baseless without proper evidence. The hue and cry over

heavy metal contents and the toxicity of the same has recently damaged the science to a great extent.

Trading of Ayurveda Products outside India

In most of the countries where Ayurveda is practiced, the practitioners get their medicines from private sources in India, with an 'unofficial' import arrangement, circumventing the law. The small-scale practitioners bring the medicine by hand traveling to India. Official export from India is only a very small percentage compared to the trade and consumption figures. The controversial Ayurveda medicines reported to have heavy metal contents by the JAMA are not officially exported from India. It is a food for thought for the authorities as to how these medicines are reaching consumers when the country of origin is not exporting it, the country of sale does not allow the sale of the same for medicinal purpose, and the fact that drugs with Ayurvedic metal and mineral contents are NOT to be sold as OTC products and are ALWAYS recommended to be sold with the recommendation of a QUALIFIED Ayurveda practitioner.

Since the Trade of Ayurveda medicines in most of these countries are done circumventing the local law, and mostly the drugs are not declared to have medicinal functions and sold through Indian stores and general markets, it is very difficult to accurately estimate the exact figures for the usage of Indian Ayurveda Medicines in these countries.

Need of International Recognition of Ayurveda as a System of Medicine with an independent status

Ayurveda is perhaps the world's oldest Medical system with well-documented bibliographic accounts. Ayurveda is often defined as the "science of life and Longevity". Ayurveda is a knowledge system which is as simple as it is complex; for it is simultaneously an art, science, philosophy and religion; it is also simultaneously physical, mental, emotional, spiritual, social and environmental; it is again simultaneously mundane and cosmic. Thus, it can be surprisingly easy as also painstakingly difficult to follow. The art and science of Ayurveda has been developed through centuries of observational researches by generations of vaidyas who conducted extensive studies on human mind, body and spirit.

As explained, the philosophy and practice of Ayurveda cannot be in Toto defined through modern medicine parameters. Clinical correlation and comparative analysis are not conveying the complete picture of Ayurveda concepts on disease management. The concepts are unique, can be understood only after an exhaustive study of the basic concepts vis-a-vis the modern anatomical, physiological and pathological knowledge. It is a complete system of traditionally proven Medicine, not complementary or Alternative in nature, but a science of health and diseases, with its own terminology, principle and well defined line of management for a large number of ailments. Its entire approach as an organized system of comprehensive health care is attributed to specific principles, procedures and modes of diagnosis and treatment. Its holistic approach in all areas of life, whether for healthy individuals or for diseased ones is unparalleled. Hence, it should be studied and practiced as it is.

In course of time, the students and practitioners of Ayurveda have also adapted and adopted to the advancements in modern science and the young generation Ayurveda physicians follow a rigorous training of all the recent concepts of human mind and body during the basic graduation stage itself parallel to Ayurveda studies. Thus, a qualified Ayurveda physician if provided with the necessary tools and infrastructure, is capable as any medical graduate in handling the basic health care needs of the society. They are well versed with the latest advancement in medical technology and diagnostic tools, which helps accurate differential diagnosis and enabling them for selecting the most suitable treatment modality.

Research is going on in many Governmental and private institutes in India for objective parameters to retell the Ayurveda principles for modern scientists to comprehend. By broadly dumping Ayurveda among Herbal medicine, the foundational principles of Ayurveda will be forgotten and the scope for further development of the system to tackle many upcoming health challenges will be stalled forever.

The successful practice of Ayurveda as conceptualized by ancient Ayurveda teachers, has four essential factors. A properly qualified and experienced physician, good quality drugs that are best suited for the patient, good Para medical staff/ attendant who can dispense the drug and nurse the patient well and finally the patient needs to have faith and should follow the treatment meticulously. Qualification and clinical experience for the physician and availability of wide range of essential drugs are the most vital factors in this tetrad.

For an effective and safe practice of Ayurveda, thus, there should be a vaidya or a doctor of Ayurveda Medicine, who has undergone rigorous training in all aspects of Ayurveda (sound theoretical knowledge), who has learned the art of Ayurveda practice by having good clinical exposure (thorough clinical training), and he should have thorough knowledge of the pharmaco kinetics of all the medicaments and its processing. For the efficacy of the treatment, like any other medical system, there should be the availability of the best effective drug and a well experienced and learned physician. As long as these two are compromised, the clinical practice of any medical system will come to a stand still and what results will be a mock show, at the cost of public health and the reputation of the system practiced.

The term 'Herbal Medicine' does not convey the ambit of Ayurveda medicine in true sense. Rather it is a misnomer unable to cover the depth of the tradition. Even in the developing days of Ayurveda science in the period of caraka and suzruta (B.C 1000), Ayurveda was never limited to mere herbal practice. It uses a vast range of natural products of herbal, mineral and animal origin. The drugs are administered after a complex process of pharmaceuticals, which includes detoxification processes, oxidation and reduction processes for the bioavailability and mostly the drugs are used in combinations that the desired effect is achieved. To understand the complexities of the pharmaceuticals, it requires an evaluation system that encompasses the specifications of Ayurveda. During the consultation exercise conducted by the UK Department of Health under the auspices of a 'Herbal Regulatory Working Group' (HMRWG), the HMRWG itself defined Ayurveda (para 67 at pg. 21 of their report) "as a comprehensive system of health care". Ayurveda fulfils all the requirements to be designated as a specific medical system counterpart to Allopathic system.

Govt. of India is trying to revive the Ayurveda with its available resources. Since 1956 onwards, institutionalised researches started and till date more than 10,000 PG & Ph.D. theses in Ayurveda have been submitted at various Universities. These theses and other researches conducted by the institutions like CCRAS explain and validate the Ayurveda fundamental principles, procedures and safety of herbo-minerelo-metallic preparations.

Further all the major scientific and medical laboratories and research wings of Govt. of India are working for revalidation, confirmation and certification regarding toxicity of these drugs, if at all any. In this regard few institutions may be listed e.g. ITRC, ICMR, CSIR, CDRI etc. Data of these researches are being published in various scientific journals of medicine, biology, botany and Ayurveda. Many books have also been published collecting the summary of researches done on the various Ayurveda drug preparations. These publications list the efficacy and safety aspects of Ayurveda medicines.

The Ayurveda texts list the possible unwanted side effects of minerals-metallic preparation. Commonly known toxic drugs are being subjected for their possible toxicological studies. These are reported in scientific journals and personal communication during seminars.

Ayurveda as a Medical system

The eminent Ayurveda practitioners in India have lots of case studies documented with them. Just an example is that one of the formulations by Vaidya Balendu Prakash, an eminent Ayurveda practitioner from Dehradun, India, has been accepted by European and US patent authorities for Leukaemia patients. Data are available also for certain forms of cancer with more clinical data on acute leukaemia. Some other diseases that are successfully treated in Ayurveda are Chronic inflammatory disorders like Pancreatitis, hepatitis, bronchitis, colitis, cystitis, dermatitis, gastritis, duodenitis, rheumatoid arthritis, sinusitis, metabolic disorders like chronic headache, childhood asthma, urticaria, insomnia, chronic fatigue syndrome, backache and anaemia.

In Ayurveda two types of preparations are in use:

- Classical or ethical products
- Patent and propriety drugs

Classical or ethical products are based on various Ayurveda classical texts as are listed in Indian drugs and Cosmetic Act 1940. These books date back from 1st Century BC to 20th Century AD.

By late nineties, several NGOs and even WHO has started many positive attempts to promote world's popular Traditional Systems. There are several studies given in different parts of the world in an attempt to understand the principles of Ayurveda better. To give a few examples-

- i. The WHO conducted a study entitled "Efficacy of Ayurveda in Rheumatoid Arthritis" in the late 70's at the Arya Vaidya Chikitsalayam and Research Institute, Coimbatore, India. It was seen that the emphasis is more on the

system and the series of treatments based on Ayurveda Diagnosis and prognosis, rather than a few herbal preparations.

- ii. Recent studies in an American University have shown that the Vaso Active Peptide (VIP), a neuro peptide which dilates the coronary arteries, increased by as much as 80% after a course of Panchakarma Treatment. HDL rose by 75% three months after the treatment in people whose original values were below normal. This was after studying the subjects from the point of view of just the circulatory system. Similar studies in the viewpoints of different systems will certainly reveal the holistic approach of Ayurveda.
- iii. There is a study which shows that processed sesame oil contain 18.4 % of sesamol, a powerful anti oxidant which helps to reduce stress, slow down the aging process, and is useful in atherosclerosis, arthritis etc. Hence the daily application of sesame oil is very good. (Fukado et al, 1986, Sugano et al 1990). This is in keeping with the principles of Ayurveda, which advises daily application of oil as the best protective way for maintaining health.
- iv. There are studies to show that Ayurveda help prevention and regression of breast Carcinoma; reduction of aggressive lung cancer metastases; increased survival in skin tumors; prevention of cell transformation (from normal to cancer cells); transformation of cancer cells to normal cells, reduces chemical toxicity and providing protection against cisplatin (potent chemotherapeutic agent, but toxic to the kidneys), detoxifying Adriamycin (which creates free radicals which destroys the DNA of the cancer cells, but also damage the healthy cells, especially in the heart), reduces cardio-vascular risk factors and also has anti-aging effects.

These are all a few examples of research that is going on in different parts of the world related to Ayurveda. Today there are researches to show that structurally, Ghee is actually very good for the human system (contrary to the popular notions that it increases cholesterol), while Ayurveda has held this view for centuries.

In all these researches, it is primarily the principles of the system that are validated. This is because it is recognized that Ayurveda is not drug dependent or medicine dependent. It is also recognized that Ayurveda holds a different world view which has to be understood in its total perspective before one can even venture to do research into the concepts of Ayurveda.

The aim of any administration is the welfare of its community. Especially, in matters regarding health care, the global community is still looking for remedies for many chronic debilitating diseases and life threatening diseases. It is the duty of the nations to promote and encourage any attempt to meet with the solutions for this alarming problem. Irrespective of the origin or history, the resources from all medical traditions should be positively explored and developed. Recognition is the first step for regulation of any medical system. Once the specifications and principles

should be recognized, the regulation will be more impartial and effective. Only such regulations can be implemented successfully in the long run, which are based on sound understanding of the pros and cons of the system concerned. The best regulation is that which is executed impartially, closing all possibilities of defiance and dodging. It should impart the basic right of choice to its citizens of all class and creed. These can be fulfilled only by establishing a global recognition for Ayurveda and then by regulating it as a separate system of Traditional Medicine, considering the specialties and characteristics.

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