

POINTS FOR PRAFUL PATEL'S SPEECH
AT HYDERABAD CONFERENCE ON INTERNATIONAL MEDICINAL PLANT

The British people's interest in Ayurvedic system was very superficial and mostly confined to the commercial potential of the Indian medicinal plants, and to a limited extent, the pharmacy-dynamics of the valuable plant tradition of India.

It is estimated that the world trade in medicine plants and related products by 2050 will be US \$5 trillion and our vision should be to have at least 5% of this share of the global export of medicinal plants. We have to go a long way ahead for this to ensure the purity, quality and standardized herbs preservation techniques. In the view of these current developments in the global arena, instead of a considerable increase in India share it is going to come down to 1/4th i.e. just Rs. 100 crores whereas China is marching ahead with a 20% growth rate.

The raw drug trade, which is presently totally in the hands of private sector has to be brought to public sector. A corporation should be established for the procurement and trade of medicinal plant on the model of the FCI. It should cover various aspects of procurement of the genuine drug, collection, distribution, export and the researches also.

The drugs sold in the market may be toxic to health, may be contaminated, not ripe or mature to ensure the full properties or even completely adulterated or substituted. The proposed corporation of Indians medicinal herbs should bring the trade of medical plants under a single roof and reasonable pricing and assured quality should be provided.

There are about 2000 medicinal plants reported in modern as well as classical literature out of which about 500 plant species are commonly used in Ayurveda.

A possible solution is that organized cultivation can be started by Central and State Government and leading NGOs procuring free land. Depending on the geographical peculiarity of each state and each province, the drug is to be chosen and mass cultivation can be done. Government should lease the land for this purpose and allot subsidized manures. This small scale cultivation of herbs should be encouraged by the Government and NGOs and whose wives and unemployed youth should be urged to utilize their courtyards and fields for cultivating medicinal plants with their aid. Such a project will definitely be beneficial to both parties where the women and unemployed youth earn their living and the scarcity of the raw drug can be solved to some extent. Experts should declare each district favorable for growing a few spices and bodies like NBRI should be incorporated to give advices and directives. Seedling should be supplied at nominal prices and crops should be purchased at reasonable prices.

The cultivation of medicinal plants and procurement of raw material should be more systematic and be organised on scientific methods and norms to bring life to the Ayurvedic medicaments.

An attraction to the orthodox Ayurvedic system of medicine amongst the British people at that time was very superficial. But in view of prevailing circumstances of our country at that time, their attention was mostly confined to the economically commercial plants of the country. Later, the pharmacodynamics of the medicinal plants also aroused their inquisitiveness to a limited extent. It, however, could result in the preparation of such books as the Indigenous drugs of India by K.L. Dey, 1867; Useful plants of India and Handbook of Indian flora by H. Druv 1893; Materia Medica of Hindus by U.C. Dutta, 1877; Catalogue of Indian Medicinal Plants (Trans-actpon of Ascatic Society) by John Fleming 1810; Supplement to the pharmacopoeia of India by Moodeer Sheriff 1865; Pharmacopoeia of India and Bazar Medicines by Waring in 1868 and 1874; Dictionary of economic Plants by Smith J. 1882 and Dictionary of economic products of India I-IV Vol. By George Wattin 1889 etc. (Abdul Wahid and Siddiqui 1961).

Medicinal Plants Board needs to be activated and should work in tandem with Ministries of Forestry, Agriculture Ecology & Environment and Rural Development. There is US\$ 70 billion huge market in this area. I am told that China has a market share of exports of herbal raw material amounting Rs. 22000 crores each year, whereas India has an export market of only Rs. 1200 crores – mind you, authorities will delightfully say that two years ago it was Rs. 200 crores and that the rise is considerable but I am sure it will not escape the colossal figure of Chinese exports of Rs. 22000 crores.

Ayurveda claims the knowledge of the exact medicinal properties of a large number of plants, but in order to create new drugs from them, the clinical evaluation of their claimed properties of medicinal plants.

The second beacon light is from a number of experiments in 'integration' of different medical traditions, already being carried out by non-governmental organisations in many parts of the country. If a truly serious, consciously political strategy of integration is to be worked out, that is, one that addresses the knowledge aspect of the question and also that of involving the different stake holders, then this is surely a good opportunity. As in the mandate of the Medicinal Plants Board however, this needs to be spelt out clearly and the necessary participants identified in order to bring them together. This will be better understood once some of these organisations have been discussed later in the paper.

About medicinal plants and India's possible gains in the world market, he was aware of the contradictions. While there was enormous demand on the one hand, there was great concern for the depletion of bio diversity as a result of over harvesting on the other. He suggested that in this context, the input of

companies to cultivate these plants and to create herbal gardens would be a worthwhile activity both in terms of intent and profit.

The Prime Minister has announced with great flourish the creation of a Medicinal Plants Board, that would look at all these questions closely and advise the government on making policies on this important new area. While this announcement had been made before, this time round it did result in the creation of this board and the first committee meeting was held in September 2001.

Medicinal Plants Board:

This Board is a national level body of the Government of India, "constituted to look after formulation, co-ordination with Ministries/Departments, ensuring sustainable availability of medicinal plants and to co-ordinate all matters relating to their development and sustainable use" (MOHFW 2000:2). It includes a number of bodies and groups, within government — across ministries and outside of it and certain major players from the civil society — both companies and non governmental organisations. It has designated several committees, to focus on the different aspects, the cultivation, including conservation of rare and endangered species, research, demand and supply, on patents and intellectual property rights and on exports and imports. Thus, it is designated a number of functions, relating to each of these activities and could well be a very important institution in one of the most significant new arenas of governmental activity in the years to come.

The policy that set this board in place is very conscious of the national and international pressures now at work. While the demand for medicinal plants grows because of the increasing market for herbal products, there is a very real awareness of over harvesting and depletion of irreplaceable natural resources. So both the producers and the sustainable development lobby are concerned. Given that so much of the negotiations in the future are going to be around these natural resources, such a Board could well play a very important role in projecting the best Indian interests in the international arena. It remains to be seen as to whether it exercises its potential and to how the hierarchies of power within the different organisations and institutions involved, respond to these questions.

The increasing market for medicinal plants, whether for direct export or for the growing manufacturing sector of Ayurvedic medicines, implies a depletion of bio diversity and so there has to be a concerted attempt by industry government and non government organisations to tackle the problem.

The World Health Organization (WHO) has defined herbal medicines as "Finished labelled medicinal products that contain as active ingredients aerial or underground parts of plants, or other plant material or combinations thereof, whether in the crude state or as plant preparations." (WHO 1996:178-183). The same WHO document adds that medicines containing

plant material combined with chemically defined active substances, including chemically defined, isolated constituents of plants, are not considered to be herbal medicines.

In 1987, the 40th World Health Assembly adopted a resolution reaffirming the Alma Ata Declaration (WHO 1978) and gave two further mandates to the WHO: (i) Initiate comprehensive programmes for the identification, evaluation, preparation, cultivation and conservation of medicinal plants used in traditional medicine. (ii) Ensure quality control of drugs derived from traditional plant remedies by using modern techniques and applying suitable standards and good manufacturing practices. Following this, came the Chiang Mai Declaration of 1988 entitled, "Saving Lives by Sharing Plants" (WHO 1988). It recognised that medicinal plants are essential in primary health care, both in self-medication and in national health services, viewing with grave concern the fact that many of the plants that provide traditional and modern drugs are threatened. This then focussed attention on the issues threatening medicinal plants, including those of habitat destruction and unsustainable harvesting practices, and the continuing disruption and loss of indigenous cultures. It would seem though, from the subsequent focus provided by both the WHO and the national governments, that the most important was the significant economic value of the medicinal plants used today and the great potential of the plant kingdom to provide new drugs. What is relevant for this discussion is that given the change of emphasis in the international market with the new possibilities of the herbal medicine sector, that the focus of the WHO seems to have moved away from traditional medicine to that of herbal medicine. The latter is more inclusive than the former, and allows for the entry of the biomedical pharmaceutical sector. The implications of this, for both policy and politics, are very significant and will be discussed later.

Not medicinal plant medicines, even products (as have been in vogue for some time now in the market), but simply materials. It is possible of course that brevity is the reason for this usage, given that medicinal plants are processed into a wide range of things – like intermediate products, raw materials, as well as medicines and other products. So the only inclusive term could have possibly been 'materials'. However, given the trend of the slow erosion of legitimacy to the medicines of 'traditional' systems in the international market, this word does not seem innocent of reducing traditional medical systems to simply plant materials.

This is where one of the significant flaws of the current policy lies. It emphasises too much on the requirements of the international market, in terms of the agenda it is setting for itself. Its self-confessed priority are the standardisation of requirements for the export market and the good manufacturing practices for the local, as also the long-awaited regulation and co-ordination of the medicinal plants market.

The documentation of three types of knowledge—about the actual medicinal properties of plants, the procedures for medicines that can be made from

them and, health practices -- are increasingly understood to be a valuable resource that needs to be urgently documented, else they would be lost.

Further, Ayurveda claims the knowledge of the exact medicinal properties of a large number of plants, but in order to create new drugs from them, the clinical evaluation of their claimed properties of medicinal plants.

Clean'n'Clear gel capsules were based on extracts from neem, the well-known medicinal plant of India, used by all the medical systems. It promised a 'cure, rather a cover', for skin problems, whereas 'pimple creams provide the illusion of good looks'.

Note: Mr. Praful Patel was invited to this conference by the Late Prime Minister Shri P.V. Narasimha Rao and Dr. A.P.J. Abdul Kalam, who inaugurated this International Conference.