

IASTAM  
INDIA

# NEWSLETTER

JUNE 1994

## Indian Association For The Study of Traditional Asian Medicine

### पारंपारिक आशियाई स्वास्थ्य परिषद् - भारत

Office: C/o. Zandu Foundation For Health Care, Gokhale Road South, Bombay-400 025. • Tel.: 4307021. • Annual Subscription Rs. 15.

#### Editorial

#### THE CHANGING NEEDS

There are fundamental changes observed in health care needs of people the world over. These expectations vary based on geographical, cultural and economic considerations. The response to these changing needs is dependent on available health care structure which however has developed on similar lines over few decades in major part of the world.

These changing needs have generated much interest and activities in traditional or indigenous systems of medicine. Diverseness of these systems due to their strong sociocultural backgrounds on one hand and similarity of present day medical approach on the other has limited these interests and activities in one's own area and priorities. Though there is definite pursuit for academic or scientific excellence through these systems.

The need to provide alternative health care through these systems is recognised and accepted. There is need to identify and modulate these needs and to evolve suitable models where these systems can play their respective roles. There is need for extensive developmental activities with utilisation of newer advances. We need to devise methods and tools to utilise these advances, rediscover their strengths and make it available as an unified approach.

This requires coming together of scholars, scientists and policy makers with well defined objectives in addition to their own academic or scientific pursuits.

Traditional or indigenous systems of medicine are under pressure. The growing interest and diverse activities though required for growth has also generated pressures of time. These systems which are required to prove their effectiveness within the present day structure and norms

are also threatened with loss of their basic fabric.

Any process of development will be dominated by socio-political and economic trends. Any developmental effort in these systems will have to recognise these trends and evolve ways and means to suit the needs. The fact is some of these systems like Ayurved, Chinese Tibetan or Unani can not only prove their effectiveness but can contribute to development of newer approaches. These systems have inherent capacities to help people identify their health care needs in different perspectives. Beyond the curative aspects through useful remedies in difficult ailments the now recognised and essential 'holistic' viewpoint can further be developed for better body-mind and social relationships and values.

It is therefore necessary for those interested in traditional systems of medicine and its actual usage to identify these trends and establish better communications and skills. The revived textual, historical and social interest is required to be complemented by development of applicable measures. The growth in only one direction will be less productive in terms of overall contributions to health care delivery. A linguist may derive his intellectual pleasure but may be deprived of beauty of context whereas a pharmacologist may get his scientific satisfaction but may miss a novel approach.

There is also need to differentiate between 'systems' and 'practices' where earlier needs more of developmental efforts the later needs more of verifiable measures. The earlier can be looked upon for conceptual ideas whereas later will have more of application value.

—Dr. Narendra S. Bhatt

IASTAM is much proud and pleased to inform our readers that **Dr. (Mrs.) G.V. Satyavati**, one of our founder members and close associate has been promoted as *Director General of Indian Council of Medical Research*, the governmental medical research structure of the country. Dr. Satyavati known for her straightforward approach has keen interest in development of alternative systems of medicine. **Her promotion to this important position has made people interested in health care through alternative systems much happy and hopeful. We wish her every success.** A brief review of her activities is as follows:

Dr. (Mrs.) G.V. Satyavati, has been associated with the ICMR since 1966, in various capacities.

In the field of medical research, her contributions are in two distinct and independent areas viz. (i) Drug Research (with particular reference to *medicinal* plants, and (ii) scientific information & communication.

#### **Pharmacology/Drug Research**

Dr. Satyavati has a unique combination of independent doctorates in both the modern (Pharmacology) and the Ayurvedic (Kayachikitsa) systems of medicine. Her pioneering researches which discovered, for the first time, the hypolipidaemic activity of Gum guggul (*Commiphora mukul*), a oleogum resin (being used by Ayurvedic physicians mainly as an anti-inflammatory agent earlier) have led to the unravelling of an altogether new aspect of the therapeutic potentialities of this versatile drug which, after nearly two decades of intensive research at the Central Drug Research Institute, Lucknow, is currently being marketed in India and few European countries. In 1990, Dr. Satyavati was invited by the Academic Press, London, to contribute a Chapter on the development of Guggulipid as a hypolipidemic agent from Gum guggul, in the prestigious series on Economic & Medical Plant Research (Volume-5).

Dr. Satyavati is a member of the WHO Expert Panel on Traditional Medicine for the past 12 years and has served as a WHO Consultant on Traditional Medicine/Herbal Drugs on several occasions at Geneva, New Delhi, New York, Burma etc. She was the UNICEF Consultant (in India) for the production of a global film on Herbal Medicine. She is a Founder Fellow of the National Academy of Indian Medicine, Varanasi. She is a life-member of the Indian Pharmacological Society

and the Indian Association for the Study of Traditional Asian Medicine. She is also an elected member Fellow of many academic bodies, the most recent membership being that of the New York Academy of sciences, New York, (1991) and the Fellowship of the National Academy of Sciences (India), 1992. She has served as a member of the Research councils of three major Research Institutes of the CSIR and is on various Advisory Committees/Expert Committees/Task Forces of the Department of Oceanography etc. She is also the recipient of awards like the R.N. Chopra Memorial oration of the Ward Indian Pharmacological Society (1988).

Currently, Dr. Satyavati is co-ordinating multi-disciplinary studies, with disease-oriented approach, in selected thrust areas of traditional medicine research (including reputed herbal remedies) under the aegis of the ICMR. This approach has already yielded highly encouraging results in two thrust areas viz. (i) efficacy of Kshaarasootra (an Ayurvedic medicated thread) in the non-surgical treatment of anal fistula and (ii) hepatoprotective activity of plants like Kutki (*Picrorhiza kurroa*) and its glycosides.

#### **Scientific Information & Publication**

Dr. Satyavati has been heading the Division of Publication & Information at the ICMR Hqrs. (since 1976) and is the Editor-in-Chief of the prestigious Indian Journal of Medical Research. Under her able editorship, the impact factor and the citation of this Journal have achieved significant improvement. She has also initiated pioneering studies on scientometric analysis of biomedical research. Information and documentation activities in selected areas of biomedical science such as *Medicinal Plants* were initiated by Dr. Satyavati in the ICMR Headquarters in 1970-71. She is the Editor-in-Chief of the Monograph on Medicinal Plants of India (in 3 volumes). The first volume of this encyclopedia published in 1976 (which was sold out within 18 months) is being updated currently, while the second volume brought out in 1987 has received wide global acclaim and the third volume is still under preparation.

Dr. Satyavati has served as a WHO expert on Global Publication Policy (1985). She is the Founder-Secretary of the SOBIC i.e. Society for Biomedical

### **MEMBERSHIP FEES**

In view of the increase in cost of printing, postal charges and bank transfer charges, the General Body in its meeting held at Pune on 29th May 1994 has decided to implement following changes in its the membership fees.

<b>Regular Membership</b>	<b>Rs. 25/- per year, minimum for 4 years</b>
<b>Life Membership</b>	<b>Rs. 500/- from 1st November 1994</b>
<b>Patron Membership</b>	<b>Rs. 2,000/- from 1st November 1994</b>
<b>Institutional Membership</b>	<b>Rs. 2,500/- yearly.</b>

Those who desire to become members are advised to rush their fees at the earliest.

The PRESENT LIFE MEMBERS CAN BECOME 'PATRON MEMBERS' by payment of Rs. 750/- till 30th October 1994. All life members are requested to become Patron Members.

In view of difficulties faced it has now been decided to accept the Fees with additional bank transfer fees. All applicants are advised to remit their fees **with transfer charges**, by DD, Cheque or M.O.

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### **ANNUAL CONFERENCE**

It is also decided to have an 'ANNUAL CONFERENCE OF IASTAM' every year. The next meeting will take place in Gujarat. Wait for further announcements.

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### **FORTHCOMING ACTIVITIES**

The General Body Meeting held in Pune strongly recommended academic activities that can be initiated by IASTAM with a focus on training and exchange between different disciplines. The areas identified are

- 1. Exposure to Indigenous Systems of Medicine to the Conventional Medicine Doctors (Allopaths) and**
- 2. Research Training of Students and Teachers of Indigenous Systems in other scientific disciplines.**

The first such training programme is proposed at

Swami Prakashanand Ayurvedic Research Centre, Bombay. Those who are interested in participation or organisation of such programmes shall write to our office.

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### **PANDIT SHIV SHARMA ORATION & DR. K.N. UDUPA AWARD**

As informed earlier the sub committee formed for constitution of Pandit Shiv Sharma Oration and Dr. K.N. Udupa Award has submitted its report. Accordingly, the Oration and the Award will be presented every year alternately, mostly at the time of Annual Conference.

IASTAM will soon initiate the process of First Oration & Award.

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### **PROCEEDINGS OF NATIONAL SEMINAR**

The well attended National Seminar at Pune has been appreciated by many for its academic contents. In view of the demand and proposal from publishers it is decided to publish the Proceedings of this Seminar. The theme papers presented at the seminars will form main content and additional relevant matter will be included. Dr. Ashok Vaidya and Dr. Narendra Bhatt have been given the editorial responsibilities while an Editorial Advisory Board of Prof. R.K. Mutatkar (Chairman), Prof. S.S. Handa, Dr. M.D. Nair and Vaidya D.S. Antarkar will help bring out a very useful publication. Any suggestions and proposals for its publication are welcome.

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### **DIRECTORY OF MEMBERS**

It has been decided to prepare a 'IASTAM DIRECTORY'. The directory will include name, date of birth, qualification/s, affiliation/s, and information on areas of interest. It is decided that the directory will include Patron, Life and Institutional Members only. A form is being sent to members for the purpose. We plan to get **sponsorship** for this directory. For any further enquiry write to our office.

### IV ICTAM

In earlier issues you have been informed of **IVth International Congress on Traditional Asian Medicines** which will be held at Tokyo, Japan between **19-21 August 1994** at National Education Centre, 3-2-3 Kasumigaseki, Chiyoda-ku, Tokyo 100, Japan. (Phone 81-3-3580-1251).

The last date for submission of papers and registration at preconference price are over.

The Registration fee will now be Japanese Yen 25,000/- (Approx. Rs. 7,500/-).

The reasonable travel expense (Bombay/Delhi—Tokyo) based on quotations received by our office is Rs. 32,050/-. The expenses on lodging and boarding will be extra.

We tried to organise a group fare but due to lack of enough no. of members could not be persuaded.

Those desirous of attending may contact:

The Secretariat, ICTAM IV  
Dept. of Medical History,  
School of Medicine, Jutendo University,  
2-1-1, Hongo, Bunkyo-ku, Tokyo 113, Japan.  
Phone: + 81-3-5802-1052.  
Fax: + 81-3-3813-1592.

### INTERNATIONAL SEMINAR

An **International Seminar on Complimentary Medicines** will be held at **Pune on 21-22 January, 1995.**

For details contact:

International Academy for Alternative Medicines,  
36, Kothrud, Opp. Mhatoba Temple, Pune-411 029.  
India.

(Contd. on page 12)

## NEWS

### PEN IN INDIA PROGRAMME

A unique programme by Pennsylvania University in association with School of Health Sciences under Poona University was held during May-July 1994. The programme was aimed at 8-week training for undergraduate students from U.S.A. to get acquainted with Indian culture and heritage. One of the four themes offered as a part of this programme was 'Ayurveda: Research & Practice'. Prof. P.H. Kulkarni was programme director. The other two members on Ayurvedic faculty were Dr. Narendra S. Bhatt and Dr. Bhushan Patwardhan.

### VISITS ABROAD

1. **Prof. Subhash Ranade**, Pune and **Prof. Gurudip Singh** from Gujarat University, Jamnagar, delivered lectures and short courses on Ayurveda at Berlin on invitation of Berlin Medical Association in Germany.
2. **Prof. R. H. Singh** of B. H. U. Varanasi visited Italy during June 1993, to give lectures and workshop on Ayurveda.

3. **Dr. Narendra S. Bhatt**, visited Germany, Holland, Belgium and Italy to give lectures and seminars on Ayurveda during June 1993.

### COMMENDABLE WORK OF FOREST DEPT., KARNATAKA

The forest dept. of Govt. of Karnataka has published "Dharmika Vritagulalli Vrokshagula Patra"—a book on Role of Plants in Religion & Rituals. This is based on Vedic, Pauranic and Ayurvedic literature. The book in three parts is illustrated with pictures.

The plants referred in part II of the book are grown at Bakkala village, about 9 kms from Shirsi in the Sahyadri mountains.

The Karnataka government has also started 'Dhanvantri Vans' in the campuses of the Bangalore, Mysore and Karnataka Universities. The Karnataka Government has been taking keen and active interest in propagation and cultivation of medicinal plants.

We commend the efforts of all involved and suggest others not only to visit these gardens but follow the example.

(Contd. on page 11)

The national Seminar—cum—Workshop on **“PRIORITIES IN THE STUDIES OF INDIAN MEDICINE AND RELEVANT RESEARCH METHODS”** was held at Pune between 27-29th May 1994. The Seminar was well attended with nearly 200 registered participants. The good attendance throughout the proceedings showed increasing interest in identification of newer areas of research and education.

This national meet organised by our Association was hosted by School of Health Sciences, Poona University. The academic and beautiful venue provided right environment for good academic discussions.

In the Inaugural Session Prof. R.K. Mutatkar, President of our association introduced IASTAM to participants giving brief history behind establishment of the Indian chapter. Dr. A.B. Vaidya gave idea about purpose and types of activities that IASTAM is involved with mainly its role as a multidisciplinary organisation. Dr. Narendra Bhatt introduced theme of the seminar and its significance in present context to identify priorities and relevant factors. Prof. Vaidya Shriram Sharma in his elaborate lecture as chief guest expressed his views and cited important references from Ayurvedic texts with reference to pursuit of knowledge. Prof. Sukhatme, one of the most prominent scientist-scholar of our times strongly advocated need to look back to look further. His views presented with extra ordinary examples established the fact that wisdom lies in going back to original scriptures and oriental knowledge if one wants to succeed in modern scientific approach. Prof. Gupte, Vice Chancellor of Poona University expressed his critical but encouraging views and need for development of research and newer methods in indigenous systems of medicine.

The first scientific session on **‘Medicinal Plants—Diverse Studies and Implications’** was chaired by renowned scientist Dr. B.D. Tilak. The theme paper presented by Prof. S.S. Handa from post-graduate department of Chandigarh University generated lot of interest. Prof. Handa who is also adviser to Indian Council for Medical Research, Govt. of India gave an extensive review of the work carried out in last few years and its outcome. The other speakers were Dr. Nagsamptgi and Dr. Bhushan Patwardhan. Dr. Prabhakar Sandu who was discussant for the session raised interesting queries.

The second session on **‘Opportunities in Basic Research: Interface of Life Sciences and Ayurved’** was chaired by Vd. Antarkar. Dr. A.B. Vaidya, Medical Director of CIBA in India with his keen interest in Ayurved stated about potentials Ayurved has even in the highly advanced present day molecular and biomedical research. Dr. C.D. Krishnakumar briefed the gathering on Ayurvedic aspects of research. Vaidya Ramesh Nanal

of Bombay as discussant questioned the basic approach in Ayurvedic textual context.

On 28th morning the third session dealt with **‘Clinical Research: Yesterday Today, Tomorrow’** was chaired by Prof. P.H. Kulkarni from Pune. Dr. Urmila Thatte, an established clinical pharmacologist with keen interest in Ayurved shared her experiences and views. Dr. Narendra Bhatt, Medical Director (Ayu.) from Research Division of Zandu Pharmaceuticals, Bombay while sharing his experiences suggested possible ways of clinical development through research based on Ayurved. Vaidya D.S. Antarkar, a well-known name in Ayurved for clinical research raised many important points based on his vast experience and expressed his opinion. Prof. Nayampalli, a professor of pharmacology suggested areas of interest.

The 4th session was on theme presentations on **‘Impact of Institutionalisation, Industrialisation and Privatisation on Ayurvedic Profession’** and **‘Ethical, Qualitative and Commercial Issues: Challenges’**. Dr. M.D. Nair, senior executive and a former scientist gave distinct idea about changing economic scene and the impact it will have on Ayurved and other systems. He stressed the need for managerial approach in identifying the priorities. Dr. C.K. Katiyar, Medical Adviser of Dabur India, Delhi shared his views on ethical issues that are faced today and those that may come up in nearer future. Dr. Mahesh Parikh, a psychiatrist by profession expressed his desire for an integrated approach to health care. Dr. Bhatt as a discussant expressed his anxiety on moral and ethical issues in relation to educational and professional systems that are developing.

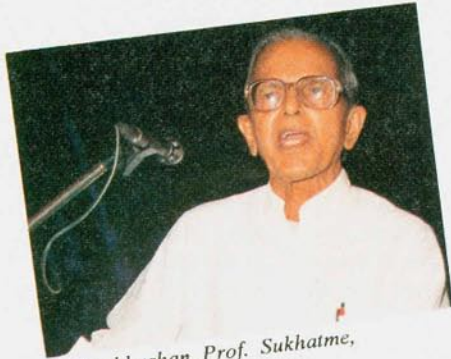
The fifth session on **‘Knowledge Attitudes and Practices vis-a-vis Indigenous Systems of Medicine’** was chaired by Vaidya Suresh Chaturvedi. Prof. R.K. Mutatkar and Mr. Robin Tribhuvan gave their viewpoints on the trends and needs. Their presentations generated useful discussion from the participants.

Further there were two panel discussions on **‘Revival of Ayurved in Socio-Cultural Contexts’** and **‘Current Contributions and Future Potentials’** where several scholars expressed their views.

Three parallel Workshops were conducted on third day.

The first workshop on **‘Methods of Standardisation of Indigenous Drugs’** was co-ordinated by Dr. Padhye, Dr. Vidyasagar, Dr. Chinchankar. The second workshop on **‘Community Based Research Methods’** was co-ordinated by Prof. Mutatkar and Mr. Robin Tribhuvan. The third workshop on **‘Clinical Research Methods’** was co-ordinated by Dr. Thatte, Dr. Vaidya and Dr. Katiyar.

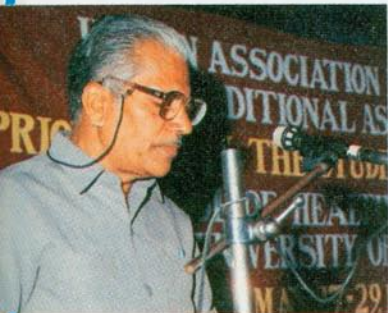
# IASTAM NATIONAL SEMINAR



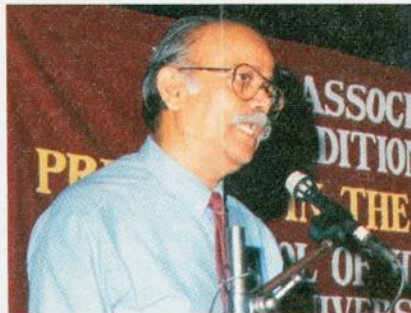
*Padmabhushan Prof. Sukhatme,  
Inaugurating the Seminar*



*Vaidya Shriram Sharma, Chief Guest*



*Prof. R.K. Mutatkar*



*Dr. A.B. Vaidya*



*Dr. Narendra Bhatt*



*Dr. (Mrs.) Urmila Thatte*

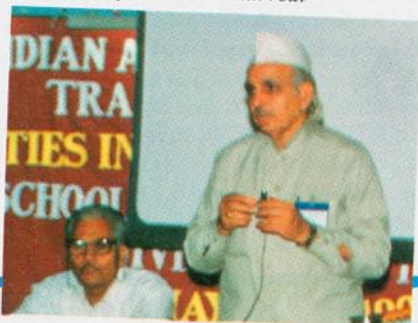


*Dr. B. Patwardhan*

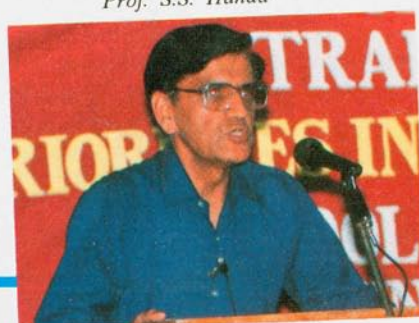


*Vaidya D.S. Antarkar*

*Vaidya S.C. Chaturvedi*



*Prof. S.S. Handa*



# & WORKSHOP MAY 1994



Felicitation to Prof. S.C. Gupte, Vice-Chancellor of Poona University who Presided over the function



Dignitaries & IASTAM-India office Bearers



Participants at the seminar



Participants at the seminar

And training at one of the Workshops



**DIVERSE SYSTEMS OF INDIAN HEALING VAGARIES AND VERITY**

BY

**DR. Ashok B. Vaidya M.D.; Ph.D.; F.A.I.M.**

**DR. (Mrs.) Rama A. Vaidya M.D.; Ph.D.; D.G.O., D.F.P.**

**Swami Prakashanand Ayurvedic Research Centre, Bombay**

*"The great sin against the human spirit is closure against diversity and variety of experience—a narrow dogmatism that insists on the absolute and exclusive validity of some particular language and the particular version of reality that this language articulates. And the central virtue, therefore, is openness to experience, caritas for the differences and diversities to be found within experience".*

—W.J. Jones

**INTRODUCTION**

The indigenous systems of medicine, in India, occupy a very pivotal role in the health care. The term 'indigenous' as an adjective means born or originating in a country; the term is derived from a Latin root—*indigena*—meaning a native. *Indigene* as a noun, from the same root, means an aborigine, a native animal or a plant. It is likely that the term 'indigenous' may be indicative of the tribal and primitive ways of life. For many Indian scientists and doctors, dominantly trained by the Western pedagogy and culturally conditioned by a different world-view, the aforesaid quotation by Prof. Jones may serve as a guideline for dropping rigid attitudes. And for an enthusiastic reorientation to our own cultural wisdom, this is mandatory.

For a renaissance in Indian medical sciences, we shall have to drop the extremes of attitudes—scathing cynicism or credulous ancient worship. Only an openness to learn by critical observations and well-planned investigations would usher such a renaissance. The impact of such an awakening on diverse disciplines of Life and Health Sciences can be immense. This was initially proven by Gananth Sen and Kartik Bose's work on *Rauwolfia serpentina*. As it turned out, it was not only a new drug discovery for hypertension; as an experimental tool, reserpine, from the plant, has led to fundamental and original work on neurotransmitters, biogenic amines and autonomic nervous system. This led to many Nobel Prizes in the field of biogenic amines.

Shri Makarand Dave expressed, "The glory of wisdom is as old as the rising sun and as new and fresh as the warming dew. When the insights of ancient sages

and discoveries of modern scientists join hands—I pray that a revolutionary and revealing truth may emerge, which will lead us towards a world of basic unity in all its apparent diversities". Unfortunately, there are currently few functional and problem-solving educational programmes to reorient our biomedical scientists to the ancient wisdom of our sages. Often such knowledge is held traditionally as esoteric by the Indian teacher-student chain. A sincere and intense effort must be made to investigate and ascertain the vagaries and verity of the diverse Indian systems of healing and medicine. Such an endeavour may turn out to be very productive for original research in the Life and Health Sciences.

**THE VARIETY OF INDIAN SYSTEMS OF MEDICINE**

The systems of medicine, when considered strictly as those originating primarily in India, would exclude allopathy, Unani-Tibb, Homeopathy, Osteopathy, Naturopathy, Chromotherapy, Chinese medicine, Acupuncture, etc. For some of these systems, however, such a rigid exclusion may not be considered to be valid. This is because of firstly a substantial exchange of knowledge across many countries and secondly due to some of these systems having already taken roots stronger in India than the countries of their origin, e.g. Unani, Homeopathy. Ctesias of Greek island Cnidos, translated the works of Charaka, several centuries before Christ. And Alexander-the Great took back with him two eminent Ayurvedic physicians. Similarly, when Buddhism spread from India to China, Indonesia, Japan etc., there was a substantial exchange of medical information. Ayurveda was already a highly developed system during Buddha's times. Buddha's personal



physician, Jeevak Kumarbhritya, has been known to carry out even brain operations. It has been proposed that some of the traditional systems of medicine existing in India, may actually represent the arrested or insulated past stages in the growth of the modern medicine. For the present article, however, we shall set aside this hypothesis and consider briefly the variety of systems of medicine in India and their current relevance or redundancy.

The types of Indian systems of healing and medicine can be broadly described into the categories as follows. There is often some degree of overlap among these categories:

### 1. Ayurveda

Based on the ancient texts by Charaka, Sushruta, Kashyap, Vagbhatta, etc., Ayurveda has deep roots and also a continuity of teaching and clinical practice, all over India. The fundamental principles are based on three humours—Tridosha—vata, pitta and kapha and saptadhatu—Rasa, Rakta, etc. There is a rational basis of reversal of pathogenesis by non-drug and drug modalities of management. It is urgently needed to document clinical responses in patients, with markers of reversal of pathogenesis. Extensive literature, published and unpublished, awaits study in Ayurveda. There are many Ayurvedic colleges offering training and degrees. As Ayurveda is widely practised all over India, people have either first-hand or second-hand (a close relative or a friend) experiences of safety and efficacy of the system. But currently there has also been an upsurge in the quackery and malpractice in Ayurveda. Vigilant professionally trained Vaidyas should exercise control over such practices.

### 2. Siddha

An ancient system prevalent in Tamil Nadu and surrounding states, with ancient texts scribed to Agastya and others, has also a living tradition of clinical practice and education. As some consider Siddha system to be quite analogous to Ayurveda, it is desirable to conduct comparative theoretical and practical studies between the two systems. Siddha system needs to be taught outside the south India. There is also a need to translate the standard texts in Hindi, English and other languages.

### 3. Yoga

Rajayoga and Hathayoga are highly developed systems of self-discipline for physical, moral and mental control. These systems, while aiming at spiritual goals,

also provide practical methods for positive mental and physical health. The universal appeal of Yoga is based more on the later contributions. Breathing and Pranayama are often equated. But the point is missed that Prana in India is so closely tied up with Chitta-Sanskaras and Vritti—the mental impressions and random thoughts. The impact of Pranayama can only be judged in a holistic manner by indepth case studies of adepts in Yoga. Though Benson, Wallace and other scientists have explained away meditation only as a relaxation response, it is desirable to study the long-term effects of Ashtanga-Yoga, where yama-niyama are not neglected just for utilitarian/commercial aims.

### 4. Jyotisha

Astrology has taken very deep roots in Indian culture, notwithstanding the tirades of the “rationalists”. Astrological medicine correlates the individual’s horoscope and planetary positions with a proclivity to diseases and accidents, etc. Rituals, fasts, wearing of gems, Dana and shanti-karmas have been indicated to counter the evil effects of malefic planets. The medical aspects of Bhrigu-sambhita an ancient astrological manuscript provide an amazing description of physiology, disease and also treatment. There are similar Nadi-Samhitas in South India too. There is report of a patient with an advanced ovarian cancer who responded to the treatment as mentioned in the Samhita. A concerted research effort, by a team of experts, is needed for judging the strengths and weaknesses of Jyotisha, as well as Samitas.

### 5. Swarodaya-Vidya

The periodic rhythm of nasal cycles of breathing and its force have been studied in great details, for many centuries, by many Yogis on their own body and mind. Massive literature in Sanskrit and other languages exists on this subject, which correlates health and disease with the nasal breath-rhythms, dominance of tatwas, etc. It has been claimed that an adept who has mastered the wisdom of his own body’s breath-rhythms and can influence it at will and can stay young and healthy for a long period. With the modern methods and instrumentation, attempts have been started to correlate Swara with the physiological criteria.

### 6. Mantra-Shastra

Since the days of Atharva-veda, mantras have been considered to play a dominant role in the prevention, promotion and restoration of health. If a nationwide

survey were to be carried out, one would be surprised to find out how many millions of people still continue to recite Gayatri, Naukarmantra and other religious mantras for health, wealth and happiness. There are specific mantras described and used for individual diseases, such as snake-bite, scorpion-bite, jaundice, etc. Sounds, in specific combinations, are claimed to have an influence on the mind and body, besides the immense power of suggestions and cultural conditioning. However, even the single well-recorded events of lighting a fire by a mantra and the effect of classical Indian music on the growth of plants EEG rhythms and milk-yield of cows are challenges to scientist's current design of experiments.

#### 7. Shivambu-kalpa

Urine has been mentioned as a therapeutic substance in Ayurveda; there are eight animals urines used. However, Shivambu-kalpa (urine therapy) as a system developed by some medieval Hatha-yogis has been described in Damar-tantra. There is a manuscript on the subject, wherein specific medicinal plants and certain foods have also been prescribed. Urine-therapy, popularised by the freedom fighter late Shri Rajiv Desai and claimed to be responsible for his long life and health by the ex-Prime Minister Shri Morarji Desai, has references in Ayurveda and Yogic practices. In the West, Armstrong wrote a book—'The Water of Life' to popularize urine therapy. The subject needs to be studied critically.

#### 8. Nabhi-vidya

A displacement of the umbilicus has been said to result in diverse types of disorders. Methods have been described and used to identify and correct such a displacement, which relieves the patient of the diverse syndromes ascribed to 'Pichuti'.

#### 9. Had-vidya

The indigenous bone-setter, all over India, have a traditional mode of diagnosing and treating sprains, dislocations, fractures and chronic bone and joint disorders. The application of certain plant-plasters (Lepa), massage with medicated oils, ingestion of drugs like *Cissus quadrangularis*, shown to be fracture-healing by Dr. K.N. Udupa, and manipulative techniques are commonly employed. Sometimes, injury to the spinal cord or nerve-roots has been reported by inadvisable and aggressive manipulations by a bonesetter, in a patient with a prolapsed vertebral disc or tuberculosis

of the spine. Current advances in orthopaedics and rheumatology are immense but a field study of the Had-vidyas work may provide data of interest.

#### 10. Griha-chikitsa

Common household remedies are still used all over India. A survey carried out by us, under the auspices of SPARC, Bharatiya Vidya Bhavan, has revealed interesting data about the kitchen ingredients and plants used for common diseases. Ginger and turmeric are now widely investigated as anti-motion sickness and anti-inflammatory agents. More surveys are needed on this subject.

#### 11. Adhidaivik/Adhyatmic Chikitsa

Faith-healing and miracle-cures have been quite central to the Indian ethos and, as it looks, it may continue to be so for millenia into the future! Spirit-possession and exorcists are abundant in our villages, tribal areas and even towns and cities. Sometimes these "well-meaning" exorcists can be hazardous, as reported from France that an Imam caused the death of a young epileptic girl, while trying to expell the ghost (Times of India, 5th July 1994). Gurus, God-men/men-Gods are abundant too. However, no 'Hindu Science' akin to 'Christian Science' of faith-healing has developed as a group practice. The field is very difficult to investigate because of methodological problems. But there is a need to critically shift superstitions from dynamic faith and healing.

### SCIENTIFIC VALIDATION OF TRADITIONAL PRACTICES

There have been sporadic efforts to investigate herbs and drugs used in Ayurveda, Siddha, etc. In the year 1894, A.D., the Indian Medical Congress passed a resolution about the need for the Government to study and advance the use of indigenous drugs in India. A committee, later appointed by the Government, tried in vain to investigate five single plants by multicentric clinical experience. Later, Sir Ramnath Chopra, the father of Indian Pharmacology made heroic efforts to demonstrate the therapeutic usefulness of several plants and drugs. His research on *Rauwolfia serpentina* (*Sarpagandha*), *Berberis aristata* (*Daruharidra*) has been universally acclaimed. His book on 'Indigenous Drugs of India' still continue to be a classic reference for the students and scientists interested in medicinal plants.

However, this approach of subjecting crude extracts

of plants for random animal screening has not been very productive. For the last two decades a new approach has been evolved: first clinical validation—pharmacology—phytochemistry. Several new leads have been found and are being developed further. Table 1 lists some of the scientifically validated practices. However, many potential fields (Table 2) are still awaiting intense research effort. But it has been unfortunately experienced that such a novel approach has not been reinforced by adequate inputs of resources. If such resources are judiciously employed, there are possibilities of important discoveries from the diverse Indian systems of healing.

Table 1  
Some Scientifically Validated Practices

Drugs/Practices	Disease	Mechanism of action
Raulwolfia serpentina	Hypertension	Depletion of catecholamines with reserpine
Holarrhena antidysenterica	Amoebic dysentery	Alkaloids killing E. histolytica
Berberis aristata	Conjunctivitis	Antibacterial activity-Berberine
Psoralea corylifolia	Leukoderma	Increased melanin formation
Adhatoda vasica	Cough	Antitussive-vasicine
Curcuma longa	Arthritis	Anti-inflammatory curcumin
Commiphora mukul	Atherosclerosis	Hypolipidaemic-Gugglipid

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### NEW AYURVEDIC INSTITUTE

A new Ayurvedic Institute, first in the region was inaugurated in February 1994 at Shahapur, Belgaum. The institute will have hospital facilities and intend to undertake research activities. A 'YAGNA' was performed on 14th followed by informative lectures of Vd. R.B. Gogate & Prof. S.M. Sathye. Shri Mallikarjun, Hon'ble Dty. Speaker of Lok Sabha was the chief guest at the function on 15th. Senior Physicians & Scholars were felicitated on the occasion. Shri Rambhau Sirdesphande, Hon. Secretary of the Pethe Arogya Seva Kendra shared his views and informed about future plans.

Mucuna pruriens	Parkinson's disease	Supplies L-Dopa
Arogyawardhani	Viral hepatitis	Increases bile secretion
Salt-free diet	Peptic ulcer	Decreases HCl secretion
Saraca indica	Menorrhagia	Oxytoxic phenolic glycoside
Meditation	Hypertension	Increased a-waves in EEG
	Anxiety neurosis	
Rubia cordifolia	Eczema	Anti-inflammatory
Coccinia indica	Diabetes mellitus	Hypoglycaemic
Tinospora Cordifolia	Infections	Enhances immune response
Luffa echinata	Viral hepatitis	Hepatoprotective
Kshar-sootra	Fistula-in-ano	Antibacterial and wound-healing

Table 2

### Potentially Challenging Research Opportunities

1. Computer correlative analysis of horoscopes and genetic and acquired diseases.
2. Study of case histories in Bhri-gu-sambhita
3. Biorhythms and breath-rhythms
4. Biodynamic substances in human urine
5. Bone-fracture healing herbs
6. Ayurvedic dermatological drugs
7. Critical nationwide survey of home remedies
8. Physiological and endocrine changes in advanced Yogis.
9. Documentation of miracle cures of cancer and other fatal diseases.

### NEWS FROM ORISSA

Orissa Ayurvedic Academy was formed on 1st April 1994 efforts of Dr. Manbhajan Guru and others. The academy plans to translate samhitas, prepare Ayurvedic texts and similar literary activities.

The Academy on 7th April celebrated the World Health Day by organisation of free Ayurvedic camp.

A 'Charak Day' was celebrated by Sri Nrusinghanath Ayurvedic College and Research Institute on 15th March 1994. A 'Charak Vidhyanidhi Award' was conferred upon Dr. Guru on the occasion.

A seminar on cultivation and conservation of medicinal plants was organised by Dept. of Social Forestry of Baragarh Dist.

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Communication (India) and a member of the International Federation of Scientific Editors' Association.

Dr. Satyavati's efforts in the past 6 years in training young biomedical scientists in the art and science of (i) writing research papers (for submission to primary journals) and (ii) preparing good research proposals (for submission to various research agencies) have been recognised as pioneering exercises. Recently, she has been assigned the responsibility of conducting a series of Workshops on these two topics in different parts of India, as a joint ICMR-WHO exercise.

Dr. Satyavati has authored a number of scientific articles and reviews in national and international journals and also contributed chapters in Monographs/books.

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A visit to Bio-Informatics Centre was organised for benefit of the participants.

The Valedictory Session presided over by Prof. Mutatkar discussed several issues connected with IASTAM activities. The decisions taken during this session are covered in other sections of this Newsletter.

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## **FOURTH INTERNATIONAL CONGRESS OF ETHNOBIOLOGY**

**Fourth International Congress of Ethnobiology** will be held under auspices of **International Society of Ethnobiology at Lucknow—India in November 17-21, 1994.**

All participants who wish to register the congress please contact

Dr. S.K. Jain, Chair Organising Committee Fourth ICE, National Botanical Research Institute, Lucknow-226 001 India. Phone: 236431, Telex: 0535-2315, Fax: (0522) 244330, 243111.

## **• BE A MEMBER, GET A MEMBER •**

If you are not a member, be a member

If you are a regular member, be a Life Member

If you are already a member, get a Life Member

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Have you come across any important information that may interest our members?

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### **Ideas? Thoughts? Views?**

Do you have any?

*Do share with us.*

### **Books? Journals? Periodicals?**

*Send us a copy to enlist or review.*

### **Meeting Ground**

Do you need some help? At times we do. We would like to help you identify a collaborator or an institute by publishing your specific need in brief.

*Do write to us.*

**This NEWSLETTER is yours.**

You are invited to participate in its publication. We assure of our efforts to publish appropriate items falling within the purview of IASTAM from our members:

**The Editor,**

**IASTAM Newsletter,**

**C/o. Zandu Foundation For Health Care,**

**Gokhale Road South, Bombay-400 025.**

*Editor: DR. NARENDRA S. BHATT*