

### **AYUSH in AYUSHMAN BHARAT**

#### Dr. Narendra Bhatt

The Ministry of AYUSH and its officials must be congratulated for having successfully got AYUSH systems recognition as part of 'AYUSHMAN BHARAT'. Elsewhere in this issue is an important article by Prof. Dr. S. S. Savrikar where he has covered this largest ever scheme of healthcare in India under the leadership of Prime Minister Modi.

This provides the biggest opportunity that has ever been offered to AYUSH sector. The planning, execution and the outcome of this major step will be closely watched. It has potential to be a game changer for the sector. While Prof. Savrikar has provided elaborate details, I wish to focus on few important factors that can have a major impact on this scheme.

Defining Goals - Success and failure in any 1. public healthcare delivery system are determined by properly defined goals. Defining quantifiable goals in such a situation is not easy, particularly when the healthcare delivery system is in itself based on a paradigm which is different from its own basis. Adapting to this paradigm while working on the strengths of the AYUSH systems will be an important challenge. A comprehensive look at the health and medical care for the needs of the people at the remotest level and the identification of specific areas where AYUSH systems can demonstrate their strength will be the key. Such a consideration; more than wishful thinking, based on potentials, should be driven by ground realities, critical analysis of the strengths and weaknesses of the systems and by the defining of measurable goals. What AYUSH can achieve in the areas of prevention of diseases, improvisation of the health status of people, morbidity and mortality in terms of diseases and overall improvisation of medical care must form an integral part of defining such goals.

2. Skill, Training and Enablement of Human Resources - Obviously such a scheme will require skilled and trained human resources at the level of professional execution, support personnel and the administration. This cannot be achieved by organising simple training programmes. The outcome of the scheme will be fully dependent on the human resources deployed. The commitment, involvement and enabling of the institutes and people is not going to be easy. It will be necessary to bring in a serious sense of discipline. The training will have to be aimed at the goals without any ambiguity and must be purpose driven. Ensuring that the human resources employed are capable of delivery, will be another important key to success.

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3. Resource Development and Management – All such resources, whether it be in the form of creating awareness, training, training of the masses, providing equipment, providing treatment, drugs, products or tools, will have to be effectively deployed. The predefined goals will need to be transmitted into ground level objectives, their subsets, both quantifiable and qualitatively efficient. Organisation of the complete chain management, identifying gaps, identifying trouble points and developing troubleshooting mechanisms with back up arrangements will be required for efficient working of the scheme.

4. Monitoring Mechanism - The fourth and important aspect will be the execution and monitoring including remedial measures to overcome weaknesses if any, in the system. The effective and productive use of information technology will be a key to ensure success. Such an activity will have to be taken up on mission mode not only at the level of the Central Government but at various levels of execution, right from the top to the ground level.

**Need for Open and Productive Deliberations** - An endeavour of such magnitude should be undertaken only after intense discussions allowing different stakeholders to raise questions so as to provide an efficient system and minimise troubleshooting points. Each and every view, be it from profession, from administration, or from management in providing inputs, must be considered so as to develop the capability to take on this major challenge. There is a need for an open door (not closed door) systematic deliberation on the subject of deliverance for this important mission. *We must succeed at any cost so as to define our own footprint for a better future for AYUSH Systems*.

The quantifiable endpoint parameters in the context of the whole AYUSHMAN BHARAT Scheme will be very vital to avoid any new confusion about the outcome. I recollect a few instances wherein though Ayurvedic interventions were found to be useful, they could not generate the desired space as was expected, due to lack of clarity about end points. I must reiterate that defining such endpoints based on strengths and weaknesses of our system will be very vital.

There is also an opportunity, if executed in the right manner, to undertake epistemological, epidemiological and surveillance research as a parallel activity adhering to the right mechanisms that could then be evaluated for the gains delivered in order to analyse the contributions made by the systems.

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# COMMENT - NATIONAL HEALTH CARE SERVICES FOR AYURVEDA

#### By Dr. S. S. Savrikar

In 1971 the Central Council of Indian Medicine was established. The organizational structure of institutionalized education in the field of Ayruved came into existence since then. Prior to that Ayurved was being taught through institutions throughout the country, but there was no uniformity in the training. Most of the courses were conducted under the aegis of boards and faculties in different states. The nomenclatures of these courses were also different. Humorously, it was then said that one could put any alphabet together randomly in any sequence, one would an acronym of some course on Ayruved. There were as many qualifications of Ayruved as alphabets from A to Z. A few Universities did have courses on Ayurved courses but they were exceptions. Presently 339 Ayurveda colleges are listed as recognized, in the list displayed by the Central Council of Indian Medicine on its website. An average strength of 50 students per year per college is presumed and every year around 17000 students graduate and are doctors ready to practice Ayurveda. from these colleges in the country. As on April 1,2010, 478750 Ayurved practitioners have been registered with the councils.

India is the motherland of Ayurveda. Every intellectual, scientist, medical professional and political leader shouts out about the greatness of Ayurveda and its heritage status on societal platforms, in no mean terms. But when it came to utilization of Ayurveda in public health care services the Ayurveda community was given a big zero till date. Ayurved has had no official outlet to offer service to society through Government-led health services sector. With the exception of few states that could be counted on one's fingertips and have some health care centres offering Ayurvedic health care service most other states are sadly lacking in this. Even in these states that offer Ayurved Health Care Service, doctors employed in these centres have been left high and dry, without any infrastructure, medicine or any other resource support. They were never included in any health care statistics

#### COMMENT

either at the state level or at the national level. In most of these states their services have been utilized to cater to allopathic healthcare.

Every year tens of thousands of qualified Ayurvedic practitioners are produced and thrown into mainstream society to fend for themselves. Nobody bothers about their livelihood. But now thanks to our Prime Minister Hon'ble Narendra Modiji, the National Health Care Services have opened their doors partially for Ayurveda through the AYUSHMAN BHARAT scheme, which was rolled out on August 15, 2018. AYUSHMAN BHARAT is the world's largest ambitious health care service scheme of the Government of India. This scheme intends taking health care service to the door step of the poorest of the poor and the remotest of the remotely placed Indian citizen. The scheme aims at making interventions in primary, secondary and tertiary health care, covering both preventive and promotive health, to address healthcare holistically. The scheme has two arms namely, Pradhan Mantri Jan Arogya Yojana (PMJAY) or National Health **Protection Scheme and the Health and Wellness Centre.** The National Health Protection Scheme will cover over 10 crore poor and vulnerable families (approximately 50 crore beneficiaries) providing coverage of up to 5 lakh rupees per family per year for secondary and tertiary care

hospitalization. This arm as of date, does not have any Ayurved component. No Ayurved treatment is covered under this scheme.

Through the second arm of Health and Wellness Centre scheme, 1.5 lakh health and wellness centres will be set up to provide comprehensive health care, including noncommunicable diseases and maternal and child health services, apart from free essential drugs and diagnostic services through Public Health Centres, which will be converted into Health and Wellness Centres. We all know that the world over health and wellness is acknowledged as a principal domain of Ayurved. Despite that, until recently this arm of AYUSHMAN BHARAT was not allowed to touch Ayurved. Now thanks to the persistent efforts of the entire Ayurved community headed by the present secretary of AYUSH, Vd Rajesh Kotecha, this sector has been partially opened to Ayurved. Now 10% of the Wellness Centres will be reserved for offering Ayurveda health care service. Thus, the target for establishing 12500 Ayurved Wellness Centres throughout the country has been set. Every state has been asked to identify centres for this activity.

This is a moment of rejoicing for the Ayurvedic fraternity. This is the first time Ayurved is gaining an official entry into Public Health Care service offered through the agency of the Govt. Every person with an Ayurved qualification must feel delighted. But at the same time the entire Ayurved fraternity should become cautious as well. We should take this opportunity as a challenge. Because if we fail this time, the doors to the public health care service sector will remain permanently closed for Ayurved.

The Ministry of AYUSH is gearing up for this venture. Principals of Ayurvedic colleges from all over the country were invited to Delhi on 16th May 2019 to take an active participation and responsibility for this scheme. The major hurdle in the implementation of this scheme is the State Government's health service department, which is governed by allopathic doctors and administrators who have the least interest in Ayurved. Till date these people have utilized the services of Ayurved doctors as errand boys in non-medical services. It is very likely that no or minimum possible support will be provided by State Health authorities to the Ayurved Medical Officer who will be working as Community Health Officer in the Wellness Centre. Under the circumstances, it is the duty of every Ayurved person to stand behind this Ayurved doctor. We should give whatever help we can to this doctor. He/she should not feel left out and alone in the health care sector crowded with allopathic services.

The first thing this doctor should remember is that he/she should not use any allopathic drug. Otherwise the purpose of this exercise will fail. The Central Govt, specifically the Ministry of AYUSH is trying to equip this centre with adequate Ayurvedic drugs. Guidelines, Treatment protocols and other IEC material is being prepared by the Ministry. Training modules are also being prepared. These doctors will be provided adequate training to serve in the wellness centre. Ayurvedic colleges are being asked to coordinate the activity and serve as referral centres for the Wellness Centres in their areas. Presently there may be no or minimum financial support for the colleges to offer referral services. But the procedures to provide such support are being worked out. Till then the Ayurvedic Colleges and NGOs and we, Avurved speciality consultants should extend our hand to these centres to make the schemes successful. This is a 'do-or-die' time for Ayurved in the Public Health Service sector owned by the Government.

On this important occasion let us come together and join hands to make AYUSHMAN BHARAT a success story through Ayurved. The success should be so phenomenal that in future the Government should hand over all Wellness Centres to Ayurved.

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# **OUR ASPIRATIONS**

A Man of Idolism and Principles, Vd. B. K. Padhye Gurjar

Vaidya B. K. Padhye Gurjar is known for his dedication to the social cause of Ayurved. He was born on 20th November 1936 in Bhu, a village in Konkan, Maharashtra.

After completing his matriculation, he joined his uncle Vaidya Annashashtri Padhye Gurjar. He received his degree 'Ayurved Pravin' from Sion Ayurvedic College, Mumbai. He was a fellow of the National Academy of Ayurved. Though a staunch believer and practitioner of Ayurved he also completed the Integrated course as he believed that *integrated medical* practice was the need of the hour and beneficial to society. As a practicing physician he has helped various patients.

He was involved with several social organizations and actively participated in various movements. He was nominated as



a Trustee; *Ayurvidya Prasarak Mandal*; Sion Ayurvedic College and *Vidya Vardhini* School; Goregaon; Mumbai. His continual efforts towards the growth of Ayurved and the ability to take people with him; was manifest when he was elected as President at the *'Maharashtra Ayurved Sammelan.'* (1989)

Dr. Vandana Kozarekar provides a profile of

He was a Founder member of 'Ayurved Vignyan Mandal', Founder member and President of Vishva Hindu Parishad, Vice President; Mumbai Vaidya Sabha and Akhil Bharatiya Ayurved Mahasammelan; Delhi, Member and ESIS Medical Benefit Council.

He was appointed as President at *'Ayurved Sahitya Sammelan*' in Nashik organized by *'Ayurved Patrika'*. Recognizing his work for Ayurved he was invited by ''Maharshi Mahesh Yogi'' to Amsterdam; The Netherlands.

The prize he received for the story 'Suvarnacha Divas' [A golden day] written for the magazine 'Deerghaayu' unveiled his literary skills. The book 'Dehi Arogya Nandate' [A healthy life] received the 'Hari Anant Best Ayurvedic Book Award' conferred by the Institute of Indian Medicine, Pune. 'Kayakalpa'; the novel based on unique Ayurvedic principles and practices of Rejuvenation received public accolades and won him the 'Mahamahopadhya Vaidya Shankar Dajishastri Pade' Award. He was felicitated by the Marathi Newspaper Writers Association in memory of 'Shree Rajabhau Joshi.' He was also honoured with the 'Vaidya Datar Shashtri Memorial Award.' In addition he also received two other prestigious Awards – 'Fellow – National Academy of Ayurved' and 'Ayurved Maharshee.'

Vd. Padhye Gurjar was an ardent supporter of IASTAM. He was a member of the IASTAM Managing committee [1993], Joint Secretary [1996] and nominated as the member of NAC [2014].

A nationalist by nature and practice he was a true 'Swayam Sevak', a soldier of the institution that he believed in and belonged to. He was positively a man who believed in purpose of the institution rather than individuals. This attitude helped him support activities and policies adopted by IASTAM. He contributed significantly to important issues.

Right from the early days for several years he carried the twin responsibility of coordinator and editor for all publications of IASTAM particularly during III ICTAM along with Dr. S. P. Kinjewadekar.

We were privileged to receive his affectionate and wise guidance. His contribution to the field of Ayurved and IASTAM as an association is highly noteworthy.

Work for a Cause...Not for Applause...

Our sincere thanks to Vd. S. D. Kamat for providing the details of Vd. B. K. Padhye Gurjar

IASTAM NEWSLETTER

June 2019

**OBSERVATION** 



## About the Conclave on 'Cancer Care & Research in AYUSH: Developing a Roadmap at Kochi (2019) and Notes on Ayurveda

#### By Dr. Liedwien Wit

Dr. Liedwien Wit is a Western educated doctor from the University of Amsterdam in the Netherlands. She chose to work for long-term elderly care and acquired training to become a geriatric specialist at the VUmc (VU medical centre), Amsterdam, after working in various fields of medicine-addiction care, internal medicine, oncology and surgery. Towards the end of her Ph.D. in order to acquaint herself with research, for over 3 years, she did observational research on patients receiving Ayurvedic treatment by Dr. Bhatt, his father and his associate Dr. Vandana. She also met and interacted with several other Ayurvedic doctors and visited the main institutes of Ayurved. Since 1993 her interest has continued to expand, with regular contacts with India. She voluntarily participated at the Conclave on Cancer and noted her observations as requested. These have been summarized as follows.



**Appreciation about the Meet -** Dr. Liedwien Wit was inspired with the 3-day conclave on "Cancer Care & Research in AYUSH: Developing a Roadmap" in Kochi, February 2019 with the presence and participation of several good speakers from beautiful and diverse backgrounds. She was impressed with the good food, the good location and the pleasant conversations over meals. She liked the Benedictory Address by Chief Guest Swami Poornamritananda Puri.

**Criticism** - She was critical about the lack of adherence by speakers with regards to time limits and with the organizers regarding time management at these sessions. She suggested that able chairpersons ought to manage this, particularly the discussions at the sessions. She was astonished to observe the lack of cell phone discipline with phone conversations being held even while the sessions were on. She felt that it displayed lack of respect for the speaker and academics.

**Case Studies and documentation -** There is a need for large-scale research, such as those with Allopathic /Western medicine. There were many presentations of case studies. She felt that the Ayurved doctors fell short of expectations as they may have not documented their work sufficiently. There is a felt need to retrospectively examine these case studies to supplement the missing data. These case studies may serve as a basis for more large-scale research. It was important to report in an unambiguous manner and to reach agreements on the conditions that a case study ought to meet and on which data must be presented, in order to be characterized as scientific.

She stated: During my training to become a geriatric specialist in 2003-2005, part of the training was to discuss an article from a medical journal. During the discussion we discovered that many articles in the (Dutch) medical journals lacked essential information. And that you were therefore often unable to ascertain from the text of the article whether or not the conclusions were based on valid values.

#### About Need for Research & Method suggested; 'Examine Everything and Keep The Good'

Liedwien liked the idea of making a study design for a clinical trial in 3 malignancies; breast, liver and cervical cancer, where the oncologist and the Vaidya can work together. Informed consent is necessary. A patient who visits an allopathic doctor can participate in a study in which he / she is also assessed by the Vaidya, and vice versa. Data may be collected from Vaidya's who have already been involved in the treatment of these 3 malignancies according to a fixed protocol. A patient may be assessed by both an Ayurvedic and Allopathic doctor for Symptoms/complaints of the patient, probable causes, diagnosis, additional examination, treatment and result. Monitoring patients over time must be carefully noted. Researchers may look at interactions between different products through pharmacists, and other disciplines with knowledge of medicines and herbal products.

The Importance of this is not only for cancer but also for other chronic diseases that seem to have no easy solution. Possibly there is a need to also write out the study design for the treatment of other chronic diseases, such as Morbus Alzheimer, Parkinson, etc.

#### Need to adhere to Ayurved as these ideas are relevant.

- Prevention is still better than cure. A healthy lifestyle with healthy food and right exercise was very important.
- Prevention must start at a young age, as a school subject about daily regimen as prescribed in Ayurved like washing, cleaning and such other aspects based on natural rhythms.
- A reference to the division of the day in relation to the elements in acupuncture was made.

- Prevention programs that would include the need for smoking cessation, a study of the effects of smoking/alcohol/ fast food on life and living are very important.
- Explanation about the right type of nutrition that fits a person's constitution is also of importance.

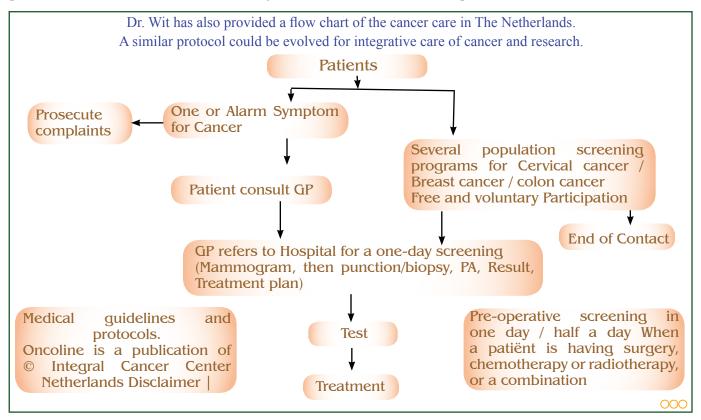
*Importance of Ayurved as against Allopathy* - Lifestyle is the most important aspect of Ayurved. This was something that has becoming increasingly important for world medicine. It appears that diseases, mainly chronic diseases such as diabetes mellitus, hypertension, COPD etc. cannot be cured by Allopathic medicines. Most of these are due to unhealthy lifestyle, fast food habits and little exercise. These diseases are an ever-increasing challenge for healthcare.

*About Concept of Health* - She was intrigued with the concept of health in Ayurved, which is broad based; instead of the term 'medicine' that includes wellbeing in terms of not only personal needs but also comfort with society, occupation, suitability, environment and such other factors.

In Western medicine, there are also several diseases that are chronic and that are controlled with the help of medication to prevent long-term damage, such as, for example, regulating hypertension well to prevent cardiovascular damage (CVA, MI). How does the Ayurvedic doctor handle this? Which rules of life, which products would be best practices? What are the right products? And what is role of Yoga and Meditation?

**Suggestions for integration -** Dr. Wit is aware of the importance of Ayurved and believes a holistic approach is important to be able to perform good diagnostics and provide good care. Ayurveda looks at patients in its own way, has its own concepts, has its own way of making a diagnosis in looking at disease. She felt we had to feel proud of our own healing methods. Allopathic medicine is based on evidence-based medicine in trying to be transparent while using the reductionist method. Ayurved is person-oriented looking for symptoms in a person, considering what constitution the person has, and finding out where there is a disruption. Dosha, dhatu, agni, aama. All are important. As a doctor, it is also important to have an open attitude and to strive for cooperation with different disciplines and look beyond the boundaries of one's own medicine, one's own field. Complementary medicine! And finally, what works for one person may not work for another.

There is a need for mutual respect between different healing methods. A clear goal may be formulated for partnerships between Allopathic and Ayurvedic medicine; the goal being always, the well-being of the patient. The patient doesn't care how he is treated as long as the disease is controlled and pain is relieved.



#### DIALOGUE

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DR. P. RAMMANOHAR, a former IASTAM Dr. C. Dwarkanath Awardee and member of IASTAM Managing committee is the Research Director of Amrita Centre for Advanced Research in Ayurveda. He has been contributing in the field of Ayurvedic research since last 24 years and has made research visits worldwide for the promotion of Ayurveda. He is also honored with many other Awards for his contributions to research in Ayurveda. During the Kochi event of IASTAM Award Function 2019 and conclave on 'Cancer Care & Research in AYUSH: Developing a Roadmap'; Dr. Kirti Bhati interacted with him to find out his views, observations and suggestions about organising the event



What are your views on the organization Award of IASTAM Function and conclave on 'Cancer Care & Research in AYUSH: Developing a Roadmap' at Kochi in February 2019?

It was a great experience to organize these IASTAM awards and orations and the AYUSH cancer conclave at Amrita Institute of Medical Sciences. What was most challenging and at the same time most interesting was to bring together people from diverse

backgrounds to focus on a common cause. Even for us at Amrita we had to coordinate with multiple institutes as the concept of aspiring traditions we are from Amrita school of Ayurved and we had to organize it, not in our

own place but at the Amrita institute of Medical science which is home of modern medicine of our University campus. This was a bit of a challenge because many local logistics were not so easy. If it was in our own venue, those things could have been much more easily managed.

In spite of that we were able to get so many people involved even within our institute. The great thing was IASTAM through this award function really brought a very impressive array of experts from diverse fields and from across the world. We had participants from Canada, Germany, Italy, Sweden, and also from within India there was a very nice mix of government and private organizations. We had representative from ICMR, CSIR, CCRAS, ministry of AYUSH and also, people from even private laboratories-Sapien Biosciences, Hylasco Biotech, plant lipids, and eminent practitioners, oncologists, as well as Ayurveda clinicians.

It was a rich platform in terms of bringing together people from modern science, modern medicine, traditional ayurvedic practitioners and then to have intense brainstorming session to churn out well thought out strategies on how we can move forward in implementing AYUSH systems for cancer care.

...theme of IASTAM to connect systems and bridge disciplines to connect systems and bridge and at the same time promote manifested itself in spirit,

I think this theme of IASTAM disciplines and at the same time promote the concept of aspiring traditions manifested itself in

spirit, in spite of all the organisational challenges.

When we come down South, we need to really understand how the logistics are different from other parts of the country. In a city like Kochi, towards evening it is very difficult to get people engaged in activities. I think some of the things we also learnt is that programs have to be tailored according to the place where it is organized. We have to come up with a frame work, understanding where we stand, what we need to do in order to take the cancer initiative forward. I am very hopeful that the working groups will be able to come up with at least a few activities that will make an impact. Maybe we can reflect on that at the next IASTAM award function.

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## **Dr. Sunanda and Dr. Subhash Ranade Foundations Best Book of the Year Award**

'SUN, MOON AND EARTH - SACRED RELATIONSHIP BETWEEN YOGA AND AYURVEDA'

Author- Mas Vidal, CEO of Dansing Shiva, Encinitas, California, Publisher- Lotus Pres

Prize - Rs. 10,000

Will be declared @ 82<sup>nd</sup> Foundation Day Function of Ayurvidya Magazine at Pune on 1 June 2019

IASTAM NEWSLETTER - Regd. Periodical RNI No. MAHENG/2016/72373; Decl. No. SDO/Haveli/SR/297/2016 dtd. 22.11.2016 Postal Registration No.: PCW / 196/2017-2019 (Posting at BPC, Vishrambagwada Post, Pune 411 030); Date of Publication - 8.06.2019 Posting Date - 10.06.2019 For June 2019 Issue

#### Our New Institutional Member - SAMI LABS, Bangalore

Founded by Dr. Muhammed Majeed in 1991, an internationally acclaimed scientist and entrepreneur in the area of "Alternative Medicine", Sami Labs is a research-oriented multinational health science company and a leading producer of nutraceuticals, cosmeceuticals, standardized herbal extracts, fine chemicals, specialty chemicals, and probiotics.

In the challenging global scenario, Ayurved has to have a competitive edge. For its global reach we need major changes. Representation of the individuals belonging to the sector of Ayurved elected as 'Member of Parliament' will help the sector grow faster. We compliment them for their sucess.

Dr.



Shri Anurag Sharma; one of the leaders of the Baidyanath Group; India's leading Ayurvedic company

and a recognised speaker on Ayurveda, working and promoting Ayurveda for Alternative Health Care with over 30 Colleges in India is a Member of Parliament in Lok Sabha from Jhansi-Lalitpur constituency of Uttar Pradesh.



B.A.M.S. Shyal. (Bachelor of Ayurveda, Medicine & Surgery) at

Bharati

Gulabkuwarba Ayurved College, Gujarat Ayurved University, Jamnagar is consulting Ayurvedic practitioner by profession and Member of Parliament for Bhavnagar, Gujarat. She was also a member of 16th Lok Sabha.

Dr. Krishna Pal Singh Yadav B . A . M . S . (Bachelor of Ayurveda, Medicine &



Surgery) and an Ayurvedic physician by profession is a Member of Parliament from Guna Constituency of Madhya Pradesh.

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IASTAM NEWSLETTER, Monthly is owned by Indian Association for the Study of Traditional Asian Medicine, Printed & Published by Dr. Vandana Kozarekar, Printed at Ekvira Publicity, Sinhgad Road, Pune, Published at Bharati Vidyapeeth University, College of Ayurved, Dhankawadi, Pune - 411 043. Editor - Dr. Manasi Deshpande

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