

INDIAN SYSTEMS OF MEDICINE: ORIGIN, GROWTH AND DEVELOPMENT OF AYUSH

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ABSTRACT

The objective of this paper is to review the ancient systems of medicines, identify the emerging issues and explore the prospects for its further development. The first part is devoted to history of public health in India, health seeking behaviour and health practices among indigenous population. The second part is devoted to the origin, growth, development, status and present set-up of Indian Systems of Medicine comprising of Ayurveda, Siddha, Unani, Yoga, Naturopathy and Homeopathy. The concluding part identifies the critical elements for growth and the measures for growth of these ancient systems of medicine in the 10th Plan period.

Introduction

The practitioners of indigenous system of medicine (e.g., Ayurveda, Siddha, Homeopathy, etc.) provide the bulk of medical care to rural people. Ayurvedic physicians alone are estimated to be about 3.37 lakhs. Studies indicate that nearly 90 per cent of the Ayurvedic physicians serve the rural areas. Most of them are local residents and remain very close to the people socially and culturally. In recent years, there has been considerable state patronage to foster these systems of medicine. Many Ayurvedic dispensaries are state-owned. The Govt. of India has established a National Institute of Ayurveda in Jaipur and a National Institute of Homeopathy in Calcutta. A Central Council of Indian Medicine was established in 1971 to prescribe minimum standards of education in Indian systems of medicine. The Govt. of India is studying the question of how indigenous system of medicine could best be utilized for more effective for total health coverage.

In a mixed economy such as India's private practice of medicine provides a large share of the health services available. There has been a rapid expansion in the number of qualified allopathic physicians and the doctor-population ratio for the country as a whole is 1:2127. The general practitioners constitute 70 per cent of the medical profession. Most of them tend to congregate in urban areas. They provide mainly curative sciences. These services are available to those who could pay.

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India has moved forward in advocating global usefulness of AYUSH (*Ayurveda, Yoga, Unani, Siddha* and Homeopathy) through global networks. As a result, many foreign countries have begun looking to India for understanding AYUSH and incorporating it through education, research and practice to meet the overwhelming desire of consumers to access complementary and Alternative Medicine. In order to prevent grant of patents based on Indian Traditional Knowledge, Govt. of India has undertaken an ambitious project of creating a Traditional Knowledge Digital Library. The digital knowledge will be presented in digital format about international patent classification, traditional research classification, *Ayurveda* terminology, concepts, definitions, classified formulations, disease conditions and references to documents.

The History of Public Health In India

India has one of the most ancient civilizations in recorded history. Thousands of years before the Christian era, there existed a civilization in the Indus Valley, known as Indus Valley Civilization. India was invaded by the *Aryans* around 1400 B.C. It was probably during this period, the '*Ayurveda*' and the '*Siddha*' system of medicine came into existence. *Ayurveda* or the Science of Life developed a comprehensive concept of health.

The '*Manu Samhita*' prescribed rules and regulations for personal health, dietetics and hygiene ritual at the time of birth and death, and also emphasized the unity of physical, mental and spiritual aspects of life. '*Sarve Jana Sukhino Bhavatu*' (May all men be free from disease and may all be healthy) was an ancient saying of the Indian sages. This concept of happiness has its roots in the ancient Indian philosophy of life, which conceived the oneness and unity of all people, wherever they lived.

The Post-Vedic period (600 B.C.–600 A.D.) was dominated by the religious teaching of *Buddhism* and *Jainism*. Medical Education was introduced in the ancient universities of *Taxila* and *Nalanda*, leading to the titles of *Pranacharya* and *Pranavishara*. A hospital system was developed during the reign of *Rahul Sankirtyana* (son of Buddha) for men, women and animals and the system was continued and expanded by *King Ashoka*. The next phase in Indian history (650-1850 A.D.) witnessed the rise and fall of the *Moghul* Empire. The Muslim rulers introduced into India around 1000 A.D. The *Arabi* system of medicine, popularly known as *Unani* system, the origin of which is traced to Greek medicine. The *Unani* system since then became part of Indian medicine. With changes in the political conditions in India, the torch, which was lighted thousands of years ago by the ancient sages, grew dim, medical education and medical services became static, and the ancient universities and hospitals disappeared.

Public Health In British India

By the middle of the 18th century, the British had established their rule in India, which lasted till 1947. A number of significant events in the history of public health took place during this period. Few are listed below:

- 1873 : A Birth and Death Regulation Act was passed.
- 1880 : The Vaccination Act was passed.
- 1897 : The Epidemic Disease Act was promulgated.
- 1931 : A Maternity and Child Welfare Bureau was established under the Indian Red Cross Society.
- 1940 : The Drugs Act was passed, and drugs were brought under control for the first time.

India became independent in 1947. For the first time in India's long history, a democratic regime was set-up with its economy geared to a new concept, the establishment of a "Welfare State". The burden of improving the health of the people and widening the scope of health measures fell upon the national government. The significant events in the history of public health are listed below:

- 1946 : (a) India joined the World Health Organization as a member state.
(b) The ESI Act, 1948 was passed.
- 1951 : The beginning of first Five Year Plan with a total outlay of Rs. 2356 crore. A sum of Rs. 140 crore was allotted for health programme.
B.C.G. Vaccination Programme was launched in the country.
- 1954 : Contributory Health Service Scheme was started at Delhi. National Leprosy Control Programme was started.
- 1958 : The National Malaria Control Programme was converted into National Malaria Eradication Programme.
- 1961 : The Central Bureau of Health Intelligence was established.
- 1963 : The Applied Nutrition Programme was launched by the Govt. of India with aid from UNICEF, FAO and WHO.
- 1970 : The Drugs (Price Control) Order, 1970 was promulgated.
- 1971 : The Family Pension Scheme (FPS) for industrial workers came into force.
- 1972 : The Medical Termination of Pregnancy Act came into force.
- 1975 : India became smallpox free.

- 1981 : WHO and member countries adopted the Global Strategy for Health for all.
- 1982 : The New 20 Point Programme was announced.
- 1989 : Blood Safety Programme was launched.
- 1992 : Child Survival and Safe Motherhood Programme (CSSM) was launched on 20th August.

Ayurveda

Ayurveda originated in India long back in pre-*vedic* period. *Rigveda* and *Atharva-veda* (5000 years B.C.), the earliest documented ancient India knowledge have references on health and diseases. *Ayurved* texts like *Charak Samhita* and *Sushruta Samhita* were documented about 1000 years B.C. The term '*Ayurveda*' means 'Science of Life'. It deals elaborately with measures for healthful living during the entire span of life and its various phases. '*Ayurveda*' became one of the oldest systems of health care dealing with both the preventive and curative aspects of life in a most comprehensive way and presents a close similarity to the WHO's concept of health propounded in the modern era.

A perusal of its several classical treatises indicate presence of two schools of physicians and surgeons and eight specialties. These eight disciplines are generally called '*Ashtanga Ayurveda*' and are:

- Internal Medicine (*Kaya Chikitsa*)
- Pediatrics (*Kaumar Bhritiya*)
- Psychiatry (*Bhoot Vidya*)
- Otorainolaryngology and Ophthalmology (*Shalakya*)
- Surgery (*Shalya*)
- Toxicology (*Agad Tantra*)
- Geriatrics (*Rasayana*)
- Eugenics and aphrodisiacs (*Vajikarana*).

Compendia on these subjects like *Charak Samhita*, *Sushruta Samhita* etc. were written by the ancient scholars during B.C. period. These were used for teaching of *Ayurveda* in the ancient universities of *Takshashila* and *Nalanda*. During its early period, it was perhaps the only system of overall health care and medicine, which served well in such crucial areas as health, sickness, life and death. Then followed a long period of medieval history marked by

unsettled political conditions and several invasions from outside the country when *Ayurveda* faced utter neglect.

The political situation of the country was destined to change in favour of freedom from foreign rule. With the efforts of leaders and benevolence of the rulers of princely states, *Ayurvedic* System of Medicine was received even before the country got its freedom. In 1920, the Indian National Congress demanded Government patronage for *Ayurveda* and Provincial Governments began to grant assistance. In the present situation, medical scientists are researching *Ayurveda* remedies for lifestyle related diseases, degenerative and psychosomatic disorders.

Development and Its Status

Human life and knowledge of preserving it as a going concern, in the face of overpowering and brute physical and biological environment, must have come into being almost simultaneously. It has to be so. There cannot be any other plausible explanation, other than this, to account for the continuity of human race and survival of its several highly developed cultures and civilization.

In India, development and growth of such a body of knowledge known as *Ayurveda*, meaning science of life was coeval with the growth and evolution of Indian civilization and culture. *Vedas*, which are considered to be the repositories of recorded Indian culture, have mention of this knowledge both in theoretical and practical form. There is discussion of theories about the composition of living and non-living matter, the physical, biochemical, biological, psychological and spiritual components of man and the vital motive forces working both inside and outside the body. This medical knowledge has been the work of ages. It is the outcome of great power of observation, generalizations and analysis combined with patient labour of hundred of investigators spread over thousands of years. This knowledge has played so important a part in the development of Indian culture that it has been documented in an integrated form in the *Vedas*—the ancient most documented Indian wisdom and knowledge.

Around 5000 years B.C., *Rigveda* and *Atharvaveda* (the ancient books on Indian knowledge, wisdom, culture and science) contain many hymns on diseases and their treatment by various plants and other materials. It was around 1000 years B.C. when *Ayurvedic* fundamentals and its eight clinical specialties were fully documented in *Charak Samhita* and *Sushruta Samhita*—the first compendia on *Ayurvedic* medicine and surgery respectively.

In the last 50 years of development in the teaching and training, it has developed into following sixteen specialties:

- *Ayurveda Siddhanta* (Fundamental Principles of *Ayurveda*)
- *Ayurveda Samhita*
- *Kriya Sharira* (Physiology)
- *Rachna Sharira* (Anatomy)
- *Dravya Guna Vigian*
- *Ras Shastra*
- *Bhaishajya Kalpana* (Pharmaceuticals)
- *Kaumar Bhartiya*
- *Prasuti Tantra*
- *Swasth Vritla*
- *Kayachikitsa* (Internal Medicine)
- *Rog Nidan* (Pathology)
- *Shalya Tantra*
- *Shalkya Tantra*
- *Mano Roga*
- *Panchkarma*

Globalization and Ayurveda

India has moved forward in advocating global usefulness of *Ayurveda* contemporary scenario of health care through global networks. Indian Missions in U.S.A., U.K., Russia, Germany, Hungary, South Africa have played an effective role in channeling the information of *Ayurveda* and opening up new opportunities for the spread of Indian Medicine in to foreign institutions and the general public awareness building about *Ayurveda* in the foreign countries has been identified as an important thrust area. Following efforts were made by the Indian Government in the area of globalization:

- (a) Experts were deputed to attend symposia & seminars held in foreign countries to project Indian experiences and initiatives in the field of traditional medicine.
- (b) *Yoga* experts from National Institute of Yogam, New Delhi participated in a *Yoga* Conference arranged by Indian Embassy in Dushanbe, Kazakhtan.
- (c) An Indian team comprising Joint Secretary of the Department of Indian System of Medicine & *Ayurveda* experts from premier institutes

participated in a seminar on Indian System of Medicine held in Berlin, Germany.

- (d) An *Ayurveda* Officer from the Department of Indian System of Medicine participated in a WHO Regional Meeting on 'Integration of Traditional Medicine in the National Health System'.

Yoga

The tradition of *Yoga* was born in India several thousand years ago. The founders were great saints and sages. The great *yogis* gave rational interpretation of their experiences about *Yoga* and brought a practically sound and scientifically prepared method within everyone's reach. *Yoga* philosophy is an Art and Science of Living in tune with *Brahmand*—the universe. *Yoga* has its origins in the *Vedas*, the oldest record of Indian culture. It was systematized by the great Indian sage *Patanjali* in the *Yoga Sutra* as a special *Darshana*. Although, this work was followed by many other important texts on *Yoga*, but *Patanjali's Yoga Sutra* is certainly the most significant wherein no change is possible. It is the only book, which has touched almost all the aspects of human life. *Swami Vivekananda* defines *Yoga* as "It's a means of compressing one's evolution into a single life or a few months or even a few hours of one's bodily existence". *Yoga* is a science as well as an art of healthy living physically, mentally, morally and spiritually. It's no way limited by race, age, sex, religion, caste or creed and can be practiced by those who seek an education on better living and those who want to have a meaningful life.

Development And Its Status

In our country, generations of *Yogis* and scholars have contemplated their life in timeless fashion to realize that there is a meaning to life and some purpose beyond the human sufferings. They were even convinced that there is a way to escape the tragic problems of life of diverting the mind to something more interesting and everlasting. They were also moved by the sufferings they saw around them and wanted that the human being should be free from sufferings and ignorance, to set him on the road to freedom and live healthy.

Medicine has moved from organism to organ and from organ to cell and from the cell to molecular properties. Despite spectacular bio-medical advances and massive expenditures, the death rate and the life expectancy in the developed countries have remained unchanged. Medicine, as practiced today has begun to be questioned and criticized. With increasing recognition of the failure of existing health services to provide health care, alternative ideas and methods to provide health care have been considered and tried in

large scale in recent past. *Yoga* and Naturopathy are the two of its kinds, which can be only answer to the rising levels of health care problems. In recent times, there is a growing awareness among the people about the efficacy and utility of *Yoga* and Nature Cure in keeping one fit at physical, mental, emotional, social and spiritual planes. These systems are emerging as the effective methods and means to improve the total personality and to build a healthy society.

Unani

Unani medicine is based on the Greece philosophy. According to the basic principles of Unani, the body is made up of four basic elements i.e. Earth, Air, Water, Fire which have different temperaments i.e. Cold, Hot, Wet, Dry. The body has simple and compound organs which get their nourishment through four humours i.e. blood, phlegm, yellow bile, black bile. Health of human is based on six essentials (*Asbabe Sitta Zauoorya*) if these are followed health is maintained otherwise there will be diseases. Six essentials are: (1) Atmospheric Air (2) Drinks and Food (3) Sleep and Wakefulness (4) Excretion and Retention (5) Physical activity and rest (6) Mental activity and rest.

The drugs used are mostly of plant origin. Some drugs of animal and mineral origin are also used. Patients are treated either by single drugs (crude drugs) or by compound drugs (formulation of single drugs).

Growth, Development and Its Status

Unani system of medicine is one of the oldest systems of medicine in the world, it is still popular and practiced in Indian sub-continent and other parts of the world. The scientists and experts of different countries have contributed in development of Unani system in different periods as under:

Greek Period

Unani medicine was originated in Greece and its founder was great philosopher and physician Hippocrates (*Buqrat* 460-377 BC). He was the first Unani physician who opened the education of medicine to all communities so he is known as the father of medicine in Allopathic also because modern medical science was developed on the foundation of Hippocratic philosophy of health and disease.

After *Buqrat*, Galen contributed as a lot to the Unani Medicine. Dioscorides was the famous physician in the 1st century A.D. He was famous for the book on *Ilmuladviya* (Pharmacology) named as *Kitabulhashayash*.

Indian Era

Unani medicine in India was introduced in 1351 AD by Arabs. The first known *Hakim* was *Zia Mohd. Masood Rasheed Zangi*. Unani medicine soon got acceptance by the masses due to its efficacy and non-toxicity of drugs. Following eminent scholars of that period are:

Akbar Moh. Akbar Arjani (1721 A.D. death): He was known for his book *Qarabadin Qadri* and *Tibbe Akbar* based on his own lifelong clinical experience.

Hakim M. Shareef Khan (1725-1807): A famous *Hakim* of Delhi in *Mughal* period. He was famous for his book *Ilaj ul Amraj*.

Hakim Ajmal Khan (1864-1927): He established Unani and Ayurvedic College at Karol Bagh Delhi. He is remembered as *Mashihul Mulk Ajmal Khan*.

Hakim Kabeeruddin (Jan. 1976): He was very dedicated scholar of Unani medicine. He was translated 88 Unani books of Arabic and Persian languages into Urdu.

The first institution of Unani medicine was established in 1872 as Oriental College at Lahore.

Post Independence Period

After independence, Government at first constituted Unani pharmacopoeia Committee in 1964, consisting of Unani experts and scientist with a view to maintain uniformity in the standards of drugs and to prescribe standards for compound formulations. Pharmacopoeial Laboratory of Indian Medicine at Ghaziabad was established under Government of India to workout standards and drug testing for Indian system of medicine at national level.

Government of India has also established Central Council of Indian Medicine, a statutory body, for laying down standards and maintaining uniform standard of education in the Indian system of medicine including Unani and the regulation of practices in Indian System of Medicine.

In order to develop high standards of education and research in Unani Medicine at national level. National Institute of Unani Medicine has been established at Bangalore in 1983 in collaboration with the Government of Karnataka, which provided 55 acres of land for the Institute.

In addition to these developments Central Council for Research Indian Medicine was established in 1969. There are 11 Regional Research Institutes, 7 Clinical Research Units, One Literary Research Unit, 2 Survey and Cultivation of Medicinal Plan Units, 7 Drug Standardization Research Unit. (Table 1)

Table 1
Infrastructure in Unani:

<i>State</i>	<i>College</i>	<i>Qualified Doctors</i>	<i>Hospitals</i>	<i>Beds</i>	<i>Dispensaries</i>
Andhra Pradesh	2	2156	6	315	207
Arunachal Pradesh	—	—	—	—	—
Assam	—	—	—	—	1
Bihar	4	3250	4	414	128
Delhi	2	1810	4	311	19
Goa	—	—	—	—	—
Gujrat	1	43	—	—	—
Haryana	—	135	1	10	20
Himachal Pradesh	—	21	—	—	3
Jammu & Kashmir	2	162	2	200	171
Karnataka	2	286	10	167	45
Keraka	—	3	—	—	1
Madhya Pradesh	1	326	1	60	55
Maharashtra	6	2298	5	795	23
Manipur	—	—	—	—	—
Meghalaya	—	—	—	—	—
Mizoram	—	—	—	—	—
Nagaland	—	—	—	—	—
Orissa	—	15	—	—	9
Punjab	—	421	—	—	35
Rajasthan	3	1432	5	270	77
Sikkim	—	—	—	—	—
Tamil Nadu	1	262	—	—	6
Tripura	—	—	—	—	—
Uttar Pradesh	7	7043	136	1186	148
West Bengal	1	22	2	110	—
U.T. Chandigarh	—	—	—	—	—
Andaman & Nicobar	—	—	—	—	—
Dadar & Nagar Haveli	—	—	—	—	—
Daman & Diu	—	—	—	—	—
Lakshadeep	—	—	—	—	—
Pondicherry	—	—	—	—	9
CGHS	—	—	—	—	1
Ministry of Labour (ESI)	—	—	—	—	—
Total	33	19685	177	3892	958

Siddha

Siddha system is one of the oldest systems of medicine in India. The term *Siddha* means achievements and *Siddhars* were saintly persons who achieved results in medicine. Eighteen *Siddhars* were said to have contributed towards

the development of this medical system. *Siddha* literature is in *Tamil* and it is practised largely in *Tamil* speaking part of India and abroad. The *Siddha* system is largely therapeutic in nature.

The *Siddha* flourished in South and *Ayurveda* in North. According to the tradition, it was *Lord Shiva* who unfolded the knowledge of *Siddha* system of medicine to his consort *Parvati* who handed it down to *Nandi Deva* and the *Siddhars*. The *Siddhars* were great scientists in ancient times. According to the tradition, the origin of *Siddha* system of medicine is attributed to the great *Siddha Ayastiyar*. Some of his works are still in standard books of medicine and surgery in daily use among the *Siddha* Medical pioneers.

Basic Concepts

The principles and doctrines of this system, both fundamental and applied, have a close similarity to *Ayurveda*, with specialization in Iatro-chemistry.

Like *Ayurveda*, this system believes that all objects in the universe including human body are compared of five elements namely, earth, water, fire, air and sky. The proportion of the elements present in the drugs vary and their preponderance or otherwise is responsible for certain actions and therapeutic results.

As in *Ayurveda*, this system also considers the human body as a conglomeration of three humours, seven basic tissues and the waste products of the body such as faeces, urine and sweat. This system also deals with the concept of salvation in life. The exponents of this system consider achievement of this state is possible by medicine and meditation.

Strength

The *Siddha* system is capable of treating all types of disease other than emergency cases. In general, this system is effective in treating all types of skin problems particularly psoriasis, STD, urinary tract infections, diseases of liver and gastro intestinal tract, general debility, anemia, diarrhea, general fevers in addition to arthritis and allergic disorders.

The *Siddha* system also deals with the problems affecting the women's health and lot of formulations are available in *Siddha* classics which can counter the problems for a better living.

For any disease due to infection or otherwise, the treatment is individualistic on examination of that particular patient.

The *Siddha* system is effective in treating chronic cases of liver, skin diseases especially "Psoriasis", rheumatic problems, anemia, bleeding piles

and peptic ulcer. Practitioners have claimed that *Siddha* medicines are effective in reducing the highly debilitating problems that manifest themselves among patients of HIV/AIDS. More research into the efficacy of these medicines is presently in progress.

Milestones in the Development

- Chopra Committee recommended systems of old and modern systems of medicines to evolve a common system of medicines—1946.
- Udupa Committee recommended that there is a need for integrated system of medicine and a training course in *Siddha* and *Ayurveda*—1958.
- Establishment of Central Board of *Siddha* and *Ayurvedic* Education—1964-65.
- Establishment of Central Council of Research in *Ayurveda* and *Siddha* (CCRAS)—1978.

Homeopathy

Homeopathy today is a rapidly growing system and is being practiced almost all over the world. In India, it has become a household name due to the safety of its pills and gentleness of its cure. A rough study indicates that about 10% of the Indian population solely depend on Homeopathy for their health care needs.

It is more than a century and a half now that Homeopathy is being practiced in India. The word 'Homeopathy' is derived from the Greek words 'Homois' meaning similar and 'pathos' meaning suffering. Homeopathy simply means treating diseases with remedies, prescribed in minute doses, which are capable of producing symptoms similar to the disease when taken by healthy people. It is based on natural law of healing—"Similia Similibus Curantive" which means "likes are cured by likes". Dr. Samuel Hahnemann (1755-1843) gave it a scientific basis in the early 19th century.

The scientific principles propounded by Hahnemann are natural and well proven and continue to be followed with success. The principle of Homeopathy has been known since the time of Hippocrates from Greek, the founder of medicine, around 450 B.C. More than a thousand years later the Swiss alchemist Paracelsus employed the same system of healing based upon the principle that "like cures like". But it was not until the late 18th century that Homeopathy as it is practiced today was evolved by the great German physician, Dr. Samuel Hahnemann. He was appalled by the medical practices of that time and set about the develop a method of healing which would be safe, gentle and effective.

Over two hundred years ago, the German physician Dr. Samuel Hahnemann discovered the principle that what substance could cause in the way of symptoms, it could also cure. Hahnemann was struck by the effect that certain drugs, when taken by him while quite healthy, produced symptoms that the drugs was known to cure in seek. For instance, when he took Cinchona Bark, which contains quinine, he became ill with symptoms that exactly mimicked intermittent fever (now called malaria). He wondered if the reason Cinchona worked against intermittent fever was because it caused symptoms indistinguishable from intermittent fever in a healthy human. Hahnemann continued to experiment, noting that every substance he took, whether a herb, a mineral, an animal product or a chemical compound, produced definite distinct symptoms in him. He further noted that no two substances produced exactly the same set of symptoms. Each provoked its own unique pattern of symptoms. Furthermore, the symptoms were not just confined to the physical plane. Every substance tested also affected the mind and emotions apart from the body. Eventually, Hahnemann began to treat the sick on the principle 'let likes be treated by likes'. From the outset he achieved outstanding clinical success.

Growth and Development of Homeopathy

Homeopathy entered India in 1839 when Dr. John Honigberger was called to treat Maharaja Ranjit Singh, the ruler of Punjab, for paralysis of vocal cords and oedema. The Maharaja was relieved of his complaints and in return received valuable rewards and later on made officer-in-charge of a hospital. A large number of missionaries, amateurs in Indian civil and military service personnel practiced Homeopathy extensively and spread this system mostly in Bengal and South India.

The Government of India soon after Independence did not lost time to develop Homeopathic System of Medicine. The setting up of Homeopathic Enquiry Committee in 1948, the Committee by Planning Commission in 1951 and the Homeopathic Pharmacopoeia Committee in 1962 testify to this. Some of the states also made their own contribution to Homeopathic Education, the employment of Homeopathic practitioners in health services and regulating the practice by enacting State Acts and Rules, etc.

National Health Policy and Homeopathy

The National Health Policy as passed by the Indian Parliament assigns to the Indian System of Medicine and Homeopathy plays an important role in the delivery of primary health care and envisages its integration in the overall health care delivery system, specially in the preventive and promotive

aspects health care in the context of the national target of achieving "Health for all by 2000 A.D."

Growth and Development in India

Homeopathy continued to spread and by the beginning of 20th century most of the important cities in India had homeopathic dispensaries. The popularity of the system led to a mushroom growth of quacks practicing homeopathy seeing this deplorable state of affairs, efforts were made by the Government. It took several steps and in 1948, a Homeopathic Enquiry Committee was set up to evolve a suitable arrangement to regulate teaching and practice of Homeopathy. A Homeopathic Advisory Committee was appointed in 1952 by the Government of India and the recommendations of these committees led to passing of a Central Act, 1973 for recognition of this system of medicine. Homeopathy now has been accepted as one of the National Systems of Medicine in India.

Present Set-up

Homeopathy in India enjoys Government support along with the other system of medicine because Government is of the view that presence of all these complementary alternative systems of therapeutics offers a much wider spectrum of curative medicine than is available in any other country.

Conclusion

India has moved forward in advocating global usefulness of traditional system of medicine through global networks. Following thrust areas have been identified in the 10th Plan period for strengthening the base of Indian System of Medicine and sustained propagation:

Establishment of specialized treatment facilities of Indian Systems of Medicine like Panchkarma, Ksharsutra therapy etc. as an adjunct to conventional Allopathic treatment for widening the choice of the patients in assessing the health care services will be ensured.

- Massive Research and Development efforts for establishing efficacy and safety of drugs of Indian Systems of Medicine has been planned to be launched through intramural and extramural research programmes of the department.
- Augmenting availability and quality of raw materials used in *Ayurveda*, *Unani*, *Siddha* & Homeopathy medicines is look ensured.
- Strengthening of the Medicinal Plants Board with a view to make it proactive in helping cultivation of medicinal plants keeping in mind the

internal and external demands is planned. It is aimed to give authority and powers to the Board under the Act of Parliament during 10th Plan period.

- Strengthening of Pharmacopoeial Laboratories and committees will be done so that pharmacopoeial standards of all the drugs used in *Ayurveda*, *Unani*, *Siddha* and Homeopathy systems of medicine are made available at the earliest possible.
- Quality control measures will be attempted to have enforced maintenance of quality standards of *Ayurveda*, *Unani*, *Siddha* and Homeopathy drugs at all levels including GMP requirements.
- Regulatory mechanism for manufacture, quality control and marketing of Neutra ceuticals/food supplements and corresponding legislation have been identified as important thrust areas to be dealt on priority basis.
- Encouragement for internal patenting and sensitization will be introduced to manufacturers and researchers dealing in the medicinal uses of plant based drugs.
- Medical tourism will be propagated by establishing facilities specialized treatment therapies of *Ayurveda* like *Panchkarma* and *Yoga* in tourist in tourist hotels and resorts so as to attract domestic and foreign tourist who, particularly travel to various places for seeking treatment facilities of traditional medicine. The objective is to exploit the popularity of *Ayurveda* and *Yoga* for propagating tourism.
- Development of National Centres of Excellence of *Ayurveda*, *Unani*, *Siddha* and Homeopathy has been thought of to create high-class education and research facilities meeting the requirements of modern era of tremendous medical advancements and for imparting training to medical scholars.

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