### **Short Communication**

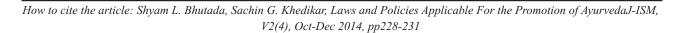
# Laws and Policies Applicable For the Promotion of Ayurveda

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JISM1449H Received: November 26, 2014; Accepted: December 1, 2014





Ayurveda has a long history of serving humanity for centuries through their intellectual knowledge and experience. As the other sciences grew and developed in 19<sup>th</sup> century, in this period other health science was relegated to the secondary position. In order to mainstream the practice of traditional and alternative system of medicines in rural community and through various National programs government of India is making endeavors since decades. Multiple laws and Acts were amended for adequate functioning of Governing council and the systems too. CCIM, ISM&H, AYUSH, CCRAS, ICMR, CSIR etc. are also introduced to promote extensive regulations and Researches in Ayurveda. Well known Golden Triangle Initiative (GTP) of AYUSH, CSIR & ICMR is recently functioning to validate Ayurvedic Products. So GOI is taking tremendous endeavor to mainstream Ayurveda in National heath and making it feasible to adopt globally as a medical system.

Key Words-Laws, Policies, Ayurveda

#### Introduction

Ayurveda is not just Herbal Medicine but very well documented System of Health Care system which is practiced in Indian Sub-Continent. It is believed that this eternal and self explanatory science is created by Lord Bramha along with the creation of mankind and universe. About 100 medicinal plants and treatment of various diseases is described in Vedas (5000 B.C.) [1]. It is a medical management for the humanity from nature in natural way. It is the gist of experience provided to globe for maintaining the health of healthy individuals as well as curing the diseased ones. Sustenance of this branch in India for years is because of its effectiveness and encouragement from people and Governance.

Though allopathic medicines are potent and effective, these medicines do possess many side effects on a body. And their long term use in certain conditions may lead to complications. So the policymakers also consider this issue and thought of

providing a harmless management of diseases through age old science i.e. Ayurveda. For the promotion and propagation of this life science certain laws and policies were implemented by Government of India.

Journal of Indian

System of Medicine

#### Infrastructure:

The present scenario of Ayurveda is hopeful and admiring to the entire fraternity because it is gaining popularity worldwide due to its harmless efficacy. The whole system is governed by apical council CCIM which is a statutory body under Department of AYUSH, Ministry of Health and Family Welfare, Government of India, set up in 1971 under the Indian Medicine Central Council Act, 48 which was passed in 1970. It is one of the Professional councils under University Grants Commission(UGC) to monitor higher education in Indian systems of medicine, including Ayurveda, Siddha and Unani [2]. There are around 301 teaching institutes in all over the India out of which around 90

are post graduate institutes [3]. Above seven lakhs practitioners are registered with different state council throughout the country. Out of total 8 health universities 2 are exclusively Ayurveda universities. Approximately 20,000 undergraduate and 2,000 post-graduate students are annually admitted to Ayurveda course. Above 3,100 Ayurveda hospitals are functioning with 70-75 thousand bed capacity. Roughly 20,811 dispensaries and 9,257 drug manufacturing unit are in force for supporting this system [4].

More than 8000 thousand plant species are known for their medicinal properties in the Asia-pacific and 10% of them are used regularly, mostly collected from wild. Ayurveda is full of treasure with about 189 animal specimens, 80 metals and 70,000 different medicinal formulations [5]. This is the strength and heritage of Ayurveda. The first Ayurvedacharya course was started at Jaipur in 1870 whereas the first official Ayurveda college was run by Maharaja of Mysore in 1906 [6].

#### Reports in Ayurveda:

For determination and implementation of health policies in India several committees were reformed by respective Government from time to time. Some important committees with their core strategies can be enumerated as follows.

Bhore Report of 1945-46 This committee, known as the Health survey & development committee, was appointed in 1943 with Sir Joseph Bhore as its chairman. It laid emphasis on integration of curative and preventive medicine at all levels. It made comprehensive recommendations for Ayurveda education & research [7].

Chopra Report of 1946-48 (Prof. R,N. Chopra) Made recommendations about general education with integration of Ayurveda & Allopathy, Uniform Syllabus all over India [8].

Pandit Committee Report 1951 Establishment of Central Institute of Research in indigenous system of medicine at Jamnagar.

Dave Report 1956 - Establishing Uniform Standards in Respect of Education & Practice of Vaidyas Udupa Committee 1959 - Assess and Evaluate the

Present Status of Ayurvedic System of Medicine Vyas Committee 1963 - Shuddha Ayurvedic Education Ramalingaswami Report 1981 - Health for All: an Alternative Strategy [5].

#### Acts in Ayurveda:

Laws offer certain rights to the concern personage. So to provide legal protection to the Ayurveda practitioners some Acts were amended.

1956 The Madras Registration of Practitioners of Integrated Medicine Act

1961 MM Practitioners Act

1962 The Mysore Ayurvedic and Unani Practitioners Registration Act

1970 The Indian Medicine Central Council Act
1984 The Central Council was reconstituted
1995 The Central Council was reconstituted again
2002 The Central Council Amendment [8].
2012 The Gazette of India, Central Council Amendment.

#### Regulatory laws:

GOI has passed & implemented some laws for adequate functioning as well as malpractice in ISM system [9].

Indian Medicine Central Council Act, 1970.

MMPC Act 1961

Drugs & Cosmetics Act, 1940

Drugs & Magic Remedies (Objectionable Advertisements) Act, Bio-diversity Act.

Wild Life Protection Act.

Indian Forests Act

#### **Governing Bodies:**

CCIM the apical council regulates all Ayurveda institutes throughout the India. Core strategies of Central council of Indian Medicine, Act 1970 are:

- 1) Translation of the syllabus of Ayurveda
- 2) Updating of syllabus
- 3) Starting of new PG & Diploma Courses
- 4) Removal of substandard existing colleges of ISM
- 5) Revision of Regulations
- 6) Revision of Minimum Standards & Requirements So as to maintain standards of Ayurveda education it functions through following objectives.

To lie down and ensure adherence to laid down standards of Ayurveda education. It maintains central Register of ISM practitioners. It also recommends the central Government for recognition and withdrawal of medical qualification awarded by Universities [10].

#### **AYUSH:-**

One of milestone in the development of ISM system in India was the establishment of AYUSH department under Ministry of Health and Family Welfare, Government of India [11].

The objectives for its establishment are:

To upgrade the educational standards in the Indian Systems of Medicines in the country.

To strengthen existing research institutions and ensure a time-bound research programme on identified diseases for which these systems have an effective treatment.

To draw up schemes for promotion, cultivation and regeneration of medicinal plants used in these systems.

To evolve Pharmacopoeial standards for Indian Systems of Medicine and Homoeopathy drugs.

#### **Priority Programs of AYUSH:**

Standardization of education & continuing medical education (CME)

Medicinal plant sector

Research & development

Information, Education and Communication (I.E.C.) & international collaboration

Standardization and quality control of AYUSH drugs

Mainstreaming of AYUSH in National health care delivery system

#### **Policies of AYUSH:**

To integrate and mainstream ISM&H in health care delivery systems including National Programmes, GOI set up Government Ayurvedic dispensaries for Ayurvedic doctors & Siddha doctors. Integration of AYUSH systems in various health programs is also in force. The same efforts were also taken for utilization of AYUSH manpower in the healthcare delivery system by assigning specific goal oriented role and responsibility to the ISM workforce.

States were encouraged to re-enact or modify laws governing the practice of modern medicine by ISM practitioners and allowed to do same through gazette notifications/state Government orders for clarity of the subject.

A scheme to provide Rs 20 lakhs for renovation of Ayurvedic hospital so as to modernize and upgrade these hospitals to provide the full range of ISM treatments. Identification of such hospitals is made according to current availability of motivated staff, OPD & IPD attendance and locational advantages.

Central Government had encouraged the setting up of specialty centres and ISM clinics at the district hospital & PHC level through setting up of *Panchakarma/Ksharsutra* clinics/centres in the existing allopathic hospital. Essential funds are released to reduce the scarcity of essential AYUSH drugs at both places.

Central Government had financially assisted for speciality hospitals of allopathy who wish to establish *Panchkarma* and *Ksharsutra* facilities in their hospital through providing grants for the same. To encourage inflow of talent and an enhanced work-culture among ISM system central Government has given liberty to states to consolidate the ISM infrastructure and raise the salary and social/professional status of ISM practitioners. Accordingly states facilitated Equal pay scales and promotion avenues for Ayurvedic doctors on the pattern of allopathic counterparts as well as started

Stipend for MD/MS (Ayurveda) students equal to allopathy post Graduate students [12].

## NATIONAL MEDICINAL PLANT BOARD & STATE BOARDS:

Keeping in mind following objectives NMPB was established [13].

Cultivation & conservation of medicinal plants.

Supply of quality raw and planting materials.

Assessment of demand & supply position.

Standardization & quality control of medicinal plants.

Scientific, technological and economic research on medicinal plants.

Development of agro-technology and harvesting, semi-processing and value addition techniques.

Trade and export of medicinal plant products. Subsidy by Govt. Cultivation Promotion

Farm to Pharmaceuticals

Diploma, degree and postgraduate courses for Pharmacy education.

#### Research in Ayurveda:

Certain agencies are formed to promote research in Ayurveda and other ISM systems [16].

CCRAS- Central Council for Research in Ayurveda System

ICMR-Indian Council for Medical Research

CSIR-Council for Scientific & Industrial Research

DST Department of Science & Technology

DBT Department of Bio-technology

No. of Allopathic Medical Colleges

BHU, AIIMS, NIMHANS

#### **New Futuristic Initiatives:**

Some initiatives have taken by GOI for promotion and propogation of Ayurveda [17].

Golden Triangle Initiative (GTP) of AYUSH, CSIR & ICMR to validate Ayurvedic Products

AYUSH Ayurvedic Pharmacopoeia Commission

Standardization of Ayurvedic Education , Publication of minimum Standards of Education

Support to Ayush Drugs Industries

More Focus on Collaborative Research in Ayurveda.

Initiative for Global promotion of Ayurveda

Continuation of TKDL Project to safe guard patents.

Recently the Union minister, Department of Health & Family welfare, GOI has declared establishment of new 4 AIMS hospital for Ayurveda in different regions of country. This is a second milestone put by present Government for Research & development of Ayurveda on the basis of Modern science.

#### **Conclusion:**

**Gove**rnment of India is taking tremendous endeavor to mainstream Ayurveda in National heath

sector and making it feasible to adopt globally as a medical system.

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