

Editorial

Prescribing Ayurveda

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Ayurveda undoubtedly the treasure of the Indian subcontinent from generations passed through stages of turbulence from internal and external encounters. The conflicts generated in the concepts are because of misunderstanding or not understanding properly, or with negligence and attraction towards the contemporary trends and approaches. Ayurveda a science life propagated for the protection of humanity from the ailments from natural resources to treat colonized diseased with natural approaches. Dispensing Ayurveda for the people who do not have time to think in urbanization about their health is not only difficult but also mirage.

Ayurveda does not just prescribe the medicine for the diagnosed disease, but also suggest prophylaxis for pre and pro disease factors along with lifestyle rectification. In 21st Century practice and prescription of Ayurveda is mimicking the contemporary with BD or TDS dosages thinking that they are maintaining the drug “half life” period in the blood successfully. This ideology diverts the main line concepts of Ayurveda to far away, where the Ayurveda launches the drug to rectify the deprived or vitiated *Dosha*.

Ayurveda describes the various crude materials - Herbs, Metals, Animal products, etc. in preparation of decoctions, milk decoctions, oils, tablets, jams, etc. These forms of medicines are used in various routes - oral, rectal, trans-dermal, urethral, etc. in accordance with the disease and diseased conditions. The Ayurvedic therapeutic system includes various types of dosage forms, depending upon the consistency and its shelf life, viz. *Vati* (tablet), *Churna* (powder) as solid dosage forms; *Swarasa* (juice), *Kwatha* (decoction), *Hima* and *Phanta* (cold and hot infusion, respectively), *Asava* and *Arishta* (preparation containing alcohol) as liquid dosage forms, whereas semi-solid preparation includes *Kalka* (paste) and *Avaleha* (electuary), etc. Amongst of them, basic dosage forms like *Swarasa*, *Kalka*, *Kwatha*, *Hima* and *Phanta* are prescribed in fresh condition because of having short shelf life; while the derived formulations like *Asava*, *Arishta* and *Avaleha*, etc. can be used throughout year or more because of prolonged stability [1].

Cross System Practice and Prescription

Can practitioners of modern medicine i.e. allopathic practitioners prescribe Ayurveda medicines? [2]. If an Ayurvedic medicine is prescribed by an allopathic doctor, it is advised to think again and again carefully, before taking your next dose. Allopathic doctor is as illiterate about Ayurvedic medicines as a common consumer [3].

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The same question arises even vice versa when an Ayurveda Graduate practices Allopathic medicine. According to Kuldip Kohli, director of AYUSH, government of Maharashtra, “the earlier notifications specifically mention that Ayurvedic and Unani doctors would be allowed to prescribe medicine to the extent to which they have received training in allopathic medicine”. “The Ayurveda and Unani syllabi prescribed by the Central Council of India Medicine have a good component of allopathic teaching, including pharmacology,” he says [4]. Confusion persists over the decision of the state governments to allow pharmacists and Ayurvedic doctors to prescribe medicines, including blood and life-saving drugs, listed in the schedule K according to the conditions laid down in the Drugs and Cosmetic Act (1945) [5]. At least there are permissions for the Ayurvedic Practitioners to prescribe Allopathy but never for the Allopathic to prescribe Ayurvedic drugs, may be even on the name of Herbal medicine.

Allopathy has made tremendous innovative technological adaptations to improve longevity and quality of life. It works hand in hand with Physics, Chemistry and modern technology, which has helped us develop various diagnostic mechanisms, medicines with a specific point to point of action, sophisticated procedures, surgery, transplants and vaccines. Together, all these developments in contemporary medicine combine to make Allopathy as an excellent system. But the care of “health” management is left behind.

Two studies in North India reveal that 5.26% of allopathic-practitioners prescriptions contained 88% allopathic and 12% Ayurvedic drugs. Total 69% of Allopathic doctors prescribe branded Ayurvedic preparations even though claim that there is potential adverse herbdrug interactions in many patients.

The National Law School Bangalore, has interpreted the two judgments of Supreme Court of India on this issue and came to the conclusion that there is no bar on cross system practice. The apex court has only laid down that every practitioner must discharge “a duty of care” to every patient he accepts to treat and “the practitioner must bring to his task reasonable degree of skill and knowledge, and must exercise a reasonable degree of care.”

There are few recommendations to introduce a minimum program of Ayurveda science in MBBS

education by AYUSH. Dr.Arun Jamkar, MUHS vice chancellor feels that the “Modern medical doctors should be familiar with Indian Traditional medicine and its treatment methodology.” When the “Bilateral Integration” of both streams of Medicine comes out as “Inter disciplinary” in India with the ethical learning and practice with legal provisions in the public interest, that day is memorable [6].

The Planning Commission of India has already said, “Health sector trends suggest that medical pluralism will shape the future of health care where Ayurveda will play a key role. The shift from singularity to plurality is taking place because it is becoming evident that no single system of health care has the capacity to solve all of society's health needs [7].

Consumer guidelines

Consumers of Ayurvedic medicines need education on these medicines and treatment procedures as they play an important role in health care. Consumers are broadly aware of the benefits of relying on the Ayurvedic treatment regimen and medication based on the label described. Manufacturers make more claims without following Ayurvedic pharmacopoeias & formularies mentioned stipulations. In such a situation the public ignores either the Ayurvedic products and treatments altogether or whenever they opt for them, they rely on big names, family tradition, advertising and word-of-mouth [8].

Observations of irrational use of Ayurvedic medicine in prescriptions are many. On the top is the use of too many branded or classical medicines per patient (polypharmacy) along with failure to prescribe in accordance with classical clinical guidelines. Often it follows with inappropriate doses that may result in lack of efficacy in general or outcome as serious side effect [12].

Ayurvedic Dosage Forms and Its Intake Methodology

Ayurvedic formulations are presented in a variety of dosage forms as per the need of consumer especially according to status of disease and otherwise as per his/her own age, physical and mental evaluation. A good balanced prescription is possible only when taking all evidences from Ayurvedic classical and proprietary medicines with following “Ten Medicinal Dispensing Timings”

(*Dashavidha Aushadhakaala*) and dosage norms as prescribed by the authorities. are notified in Ayurvedic Formulary of India, an official publication of department of AYUSH, Ministry of Health and Family Welfare, Government of India.

The consumer should be aware of the following points related to the consumption of the medicine and ensure that from the label on the medicine or from Physician. Of course it is the moral duty of physician to make patient to understand about medicine he/she consuming:

- When to consume (Before/during or after the intake of food)
- Quantity of medicine (dosage) (Fig 1) [9]
- With what (water / honey or any other decoction /juice) adjuvant
- Possible Drug-Drug interaction/Drug-Herb interaction
- How long to use (duration)

A word to conclude is that the consumer trust may not be achieve unless the Ayurveda Physician feels the responsibility towards system and society to offer a methodical prescription to the ailment of approached patient.

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Fig 1: Treatment guideline for Ayurvedic Medicine

DOSAGE ACCORDING TO AGE

Types of medicine	1-12 months (per dose)	1-5 years (per dose)	6-15 years (per dose)	Adult (per dose)
Swaras/juice	1-3 drop	5-15 drop	2-5ml	7-14ml
Churna	—	1-2gm	2-3gm	3-6gm
Kwath/Arka	1-5 drop	5-15 drop	2-5ml	14-28ml
Sitkasaya/Phanta	1-5 drop	5-15 drop	2-5ml	14-28ml
Tablet/Capsule	5-30 mg	30-130mg	130-250mg	250-500mg
Dhatu Bhasma	8-15mg	30-130mg	130-250mg	250-500mg
Kalka	130 mg	1-2gm	2-5gm	6-12gm
Asob/Arista	1-5 drop	5-15 drop	2-5ml	14-28ml
Abaleho/madak	120mg	1-2gm	2-5gm	12-24gm
Ghrita	1-5 drop	5-15 drop	2-5gm	12-24gm
Supp/ene/douch	½ - 1 stick/day	1 stick/day	1-2 stick/day	2-4 stick/day