



## Editor's Note

# Remodeling the pillars of Ayurveda

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Is century's old human need serving health profession Ayurveda undergoing rescission at present? Yes! It is. The lack of knowledge of research methodology and clinical practice without following the basic concepts of Ayurveda has lead to decreased growth rate of this Indian system of medicine. The glory of Ayurveda lies in its holistic approach and methodology of metaphysical base scientific attitude. Present day approaches are disposing the predestined Ayurveda methods. Today researcher wishes to express his orientations towards making impression to modern scientific community, but without strengthening the Ayurvedic foundations.

Ayurveda defined the objectives of life and how to attain it. The concept of health is so wide that it includes altogether the healthy state of mind, soul and body (*Satwa, Atma & Shareera*). The triads (3-*Sthambha*) of life in description include a triad of organization and categorization also. At this juncture a doubt arises regarding the Quality of Health Care services in fulfilling the objective of life and concept of health.

The definition of Quality Health Care from different resources includes, where low error rate patient safety and patient-centered procedures / outcomes with timely management and evidence-influenced decisions or actions includes making consistent planning and delivery of treatments. Six very similar characteristics or desired outcomes have been identified by both the IOM and the WHO. The WHO suggests that health care must be:

1. **Effective-** delivering health care that is adherent to an evidence base and results in

improved health outcomes for individuals and communities, based on need;

2. **Efficient-** delivering health care in a manner which maximizes resource use and avoids waste;
3. **Accessible** - delivering health care that is timely, geographically reasonable, and provided in a setting where skills and resources are appropriate to medical need;
4. **Acceptable/patient-centered-** delivering health care which takes into account the preferences and aspirations of individual service users and the cultures of their communities;
5. **Equitable-** delivering health care which does not vary in quality because of personal characteristics such as gender, race, ethnicity, geographical location, or socioeconomic status;
6. **Safe-** delivering health care which minimizes risks and harm to service users.

The IOM (Institute of Medicine) lists these six dimensions:

1. **Safety**—avoid injury to patients from the care that is intended to help them
2. **Timeliness**—reduce waits and harmful delays
3. **Effectiveness**—provide services based on scientific knowledge to all who could benefit and refrain from providing services to those not likely to benefit (avoiding overuse and under use, respectively)
4. **Efficiency**—avoid waste to improve

efficiency.

5. **Equitability**—provide care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographical location, and socioeconomic status
6. **Patient centeredness**—provide care that is respectful of and responsive to individual patient preferences, needs, and values

Where in Ayurveda defines Health as - the state of equilibrium of three *Dosha* (*Vata*, *Pitta* and *Kapha*), tissue materials, digestive fire, proper evacuation of waste materials (feces, urine and sweat), balanced mental state, senses, and soul (spirit). *Vata* is responsible for locomotion and perceptions, *Pitta* maintain the body temperature (BMR) and enzymatic reactions and the *Kapha* is responsible for build and cellular level integrity through fluid maintenance.

ISO 9000's (quality management system) definition of quality is “degree to which a set of inherent characteristics fulfils requirement”. In relation to healthcare, the IOM back in 1998 defines quality as “The degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge”.

The day is promising for the Ayurveda, which is based on strong fundamental concepts. Our ancestors have undertaken centuries of observations to record the facts for health up thrust. The chosen base for which is even though strong still needs extra support

for remodeling and establishment of the science for present circumstances. There by remodeling the pillars of Ayurveda inevitability. These new supports are - Quality, safety and efficacy. These are to be maintained by all the four quadrants of *Chikitsa* (Physician, Patient, Attendant, medicine) of Ayurveda for three-*Sthambha*.

- ❖ **Quality** is an essential and distinguishing attribute of something or someone.
- ❖ **Safety** is the state of being certain that adverse effects will not be caused by some agent under defined conditions.
- ❖ **Efficacy** is the capacity or power to produce a desired effect.

The medicines that are produced in mass by mushroomed pharmacies in Ayurveda are unable to establish the claims either because of non-practice of text told vegetation methods or with the problems of procurement. On the other hand non availability of disease combating protocols and fewer skills in Ayurveda foundations are pulling the physician to the bottom line and transformation in to an alternative practitioner. The improvement in quality, safety and efficacy of Ayurveda medicine, Physician skills and attendant nursing staff is the top priority. We have to accept our weakness and thrive for establishing as the best is necessary. It is possible in Ayurveda with new remodeled pillars (Quality, safety and efficacy) support.

