Ayush Policy | Industry | Internationalisation | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |

- Growth and Excellence of the Ayush Sector

FITM Industry and Trade Newsletter

RIS Roundtable on India-Indonesia Cooperation on Traditional Medicine

he Research and Information Systems for Developing Countries (RIS), through its constituent units – Forum on Indian Traditional Medicine (FITM), Development and Knowledge Sharing Initiative (DAKSHIN) and the Asean India Centre (AIC), hosted a round table on 'India-Indonesia Cooperation on Ayush and Jamu: Relevance of Sustainable Bioresource Management' at the India Habitat Centre, New Delhi, on January 23, 2025. This was organized in collaboration with the Jawaharlal Nehru University (JNU) and the University of Padjajaran and the University of Udayana, Bali.

The event witnessed two major panel discussions. The first panel focussed on the 'Institutionalization of Traditional medicine systems: India-Indonesia Cooperation for capacity building of Jamu'. This panel held important deliberations on infrastructure development, quality standards, sustainability, governance

and international collaboration in relation to the mainstreaming of Jamu within the public health system of Indonesia, by collaboration with the Ministry of Ayush. The panel was Co-chaired by Vaidya Jayant Deopujari, Chairperson, National Commission for Indian System of Medicine (NCISM) and Ms. Monalisa Dash, Joint Secretary, Ministry of Ayush, Government of India

The second panel focused on 'Medicinal Plants Governance: Imperatives for Sustainable Bioresource Management'. was seen as a common concern to both countries. Exploring R&D cooperation on digital sequencing information (DSI), tissue culture and use of synthetic biology on medicinal plants common to both countries was suggested to address supply of critical medicinal plants. The panel was Co-chaired by Prof. (Dr.) Mahesh Kumar Dadhich, Chief Executive Officer, National Medicinal Plants Board (NMPB) and Dr Koustubha Upadhyaya, Advisor, Ayurveda, Ministry of Ayush, Government of India.

Panel discussants from the Indian side included Dr Vinod Kumar, Senior Scientist, Kerala State Council for Science Technology Environment, (KCSTE-JNTBGRI), Thiruvananthapuram; Dr Raman Mohan Singh, Director, Pharmacopoeia Commission for Indian Systems of Medicine and Homeopathy (PCIMH), New Delhi; Prof Ravi Srinivas, Consultant, RIS, New Delhi; Dr. Chandra Shekhar Sanwal, Deputy Chief Executive Officer, National Medicinal Plants Board (NMPB) and Dr Pawan Dhar, Executive Director, CVJ Centre for Synthetic Biology & Biomanufacturing, Kochi. The Indonesian side was represented by Prof. Ni Luh Watiniasih Dean of Faculty of Mathematics and Natural Sciences Univeristas Udayana, Bali; Dr. Lia Faridah, Universitas Padjadjaran, Bandung; Prof. Dr. I Made Joni: Universitas Padjadjaran, Chair, IIBC, Bandung and Prof. Dr. Camellia Panatarani, Head of Department of Physics, Universitas Padjadjaran, Bandung. The Round Table concluded with the

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(Concise Updates)



Foundation stone for new building for Central Ayurveda Research Institute laid down at Rohini, New Delhi

(Press Information Bureau, 05 Jan 2025)

In a momentous step towards advancing healthcare and promoting traditional medicine Prime Minister Shri Narendra Modi laid the foundation stone (virtually) of Central Ayurveda Research Institute in Rohini, and termed it as the "Ayurveda's – next big leap". The ceremony was attended by Shri Prataprao Jadhav, Union Minister of State (Independent charge), Ministry of Ayush and other dignitaries.

Emphasising the Government's focus on making healthcare accessible to the poorest of the poor, the Prime Minister remarked that the Government is also promoting traditional Indian medicine systems like AYUSH and Ayurveda. He added that over the past decade, the AYUSH system has expanded to more than 100 countries. Shri Modi highlighted that the first World Health Organization (WHO) institution related to traditional medicine is being established in India. He added that a few weeks ago, he inaugurated the second phase of the All India Institute of Ayurveda. Shri Modi remarked that today, the foundation stone for the Central Ayurveda Research Institute has been laid and extended his special congratulations to the people of Delhi for this achievement.

Ayush facilities at Mahakumbh

(Press Information Bureau, 08 Jan 2025)

The Ministry of Ayush in relation with the state government of Uttar Pradesh has dedicatedly made efforts to ensure a holistic experience for all devotees attending the Mahakumbh 2025 at Prayagraj. The key Ayush initiatives that have been planned for Maha Kumbh 2025 are:

offering 24x7 access to pilgrims

Special Yoga Camps by experts from the Morarji Desai national Institute of Yoga (MDNIY) Medicinal Plant Exhibits showcasing the therapeutic properties of India's rich medicinal

Fully-equipped mobile Ayush clinics offering timely health support and ensuring immediate access to Ayush-based care for pilgrims.

A comprehensive review meeting of senior officials of the Ayush Ministry was conducted by the Minister of State (Independent), Ayush, Shri. Prataprao Jadhav. The Minister expressed his satisfactiion with the ongoing efforts and congratulated the team for their commitment to enriching the experience of the devotees attending the mega event.

Ayush ministry allocated Rs 3,992.90 crore in Union Budget FY 2025-2026

(ET Healthworld.com, Feb 2, 2025)

The budget allocation for the Ministry of Ayush emphasised the importance of integrating modern has been increased to ₹3,992.90 Crore for 2025- and traditional medical systems in the fight against 26 from ₹3,497.64 Crore (revised estimates) in sickle cell and TB.

Round-the- clock Ayush multi-OPD clinics 2024-25, a 14.15 per cent hike. The National Medicinal Plants Board has been allocated ₹18.59 Crore while the Pharmacopoeia Commission for Indian Medicine and Homoeopathy (PCIM&H) has been allocated ₹21.96 Crore.

> The autonomous bodies have been allocated ₹1,965.80 crore, of which Central Council for Research in Ayurvedic Sciences has been given ₹457.20 crore, Central Council for Research in Homeopathy has been given ₹165 crore, Central Council for Research in Unani Medicine has been given ₹214.50 crore and All India Institute of Ayurveda has been given ₹251.20 crore.

Governor calls for AYUSH's support to fight against TB, sickle cell anaemia in MP

(Sakshi Post, Jan 28,2025)

The Madhya Pradesh Governor Mangubhai Patel said that the state had become a leading state in efforts to eliminate tuberculosis (TB) and sickle cell anaemia. During a discussion with the Ministers and senior officials, Governor Patel



Editorial

Navigating Multiple Frontiers: Ayush's Journey Towards Global Integration and Innovation

he year 2025 holds the promise of a pivotal period with an increased focus on sustainability within the Ayush sector. As the multiple paradigms of global healthcare shift towards more environmentally friendly and sustainable practices, it is anticipated that Ayush can lead the way, owing to its inherent reliance on natural processes and holistic health solutions. This natural alignment with global sustainability goals in addition to enhancing the appeal of Ayush on the international stage also facilitates the creation of new benchmarks for integrating traditional wisdom with contemporary environmental needs. This is expected to usher in broader acceptance and integration into mainstream healthcare systems, promising a sustainable future for traditional practices.

Innovation will play a critical role in Ayush's evolution. Cuttingedge technologies such as digital platforms and artificial intelligence will revolutionize how Ayush therapies are delivered, understood, and integrated into daily health regimes. These technologies will transform Ayush from traditional practices into modern health solutions aligning with global standards. They will prove pivotal in developing personalized treatment plans, enhancing diagnostic accuracy, and improving patient outcomes, without compromising on the authenticity and integrity of traditional practices.

Substantial reforms are reshaping the regulatory landscape of Ayush. As we progress towards further stringent quality control measures and enhanced regulatory frameworks, Ayush products are bound to augment trust and credibility worldwide. These are absolutely imperative to mitigate the long-standing challenges of standardization and quality assurance that have historically impacted the global acceptance of Ayush products. Enhanced regulation will also enable the safety and efficacy of Ayush treatments, making them a pertinent viable choice for health consumers around the world.

The role of collaborations and partnerships cannot be highlighted enough for the sector's growth. Particularly, in light of additional international collaborations that aim not only to expand the market reach of Ayush products but also enhancing academic and research exchanges anticipated this year. A deeper understanding and acceptance of Ayush practices globally needs to be fostered through such partnerships, facilitating shared research initiatives, and developing international standards for practice and products.

Of equal importance is the role of public and private sectors in promoting and investing in Ayush. Strategic partnerships involving governmental backing and private enterprise are essential for the growth and globalization of Ayush. These collaborations help in navigating complex international markets and regulatory landscapes, enabling the maintenance of a competitive edge by Ayush.

Our past editions have highlighted the innovations in Ayurvedic practices, and strategic movements towards internationalization and quality standardization. We invite our readers—practitioners, researchers, administrators, industrialists, academicians enthusiasts alike—to engage with us in a dialogue that explores these developments. Lert us not only reflect on the achievements but also critically analyze the pathways to overcoming the sector's challenges. Your insights and contributions would be invaluable as we fortify our framework for Ayush's future.

The commitment towards integrating Ayush with global health imperatives underscores our collective desire to enhance health, promote sustainability, and promote well-being globally. Hoping that this year will be a testament to the resilience and adaptability of Ayush, on the sidelines of our consistent efforts to innovate, collaborate, and thrive.

"The Governor called for the involvement of the AYUSH department in treatment and urged parallel studies on the effectiveness of Ayurveda and homeopathy. He stressed creating public awareness about affordable medicines available at Jan Aushadhi Kendras and ensuring their availability for patients and carriers along with screening," according to the statement issued from the health department.

NBA invites feedback on revising ABS Regulations to strengthen ayurvedic biodiversity conservation

(Pharmabiz.com, December 19,2024)

The National Biodiversity Authority (NBA), an autonomous and statutory body under the ministry of environment, forest and climate change (MoEFCC), has called for public comments and Kochin Devaswom Board. suggestions regarding the revision of the Access and Benefit Sharing (ABS) Regulations, 2014 Devaswom Minister, V N Vasavan, in a function towards strengthening ayurvedic biodiversity organised at the Sri Dhanwanthari Temple at conservation.

This initiative comes in light of the recent amendments to the Biological Diversity Act, 2002, and the Biological Diversity Rules, 2004. The NBA is seeking input from individuals, associations, entities, and institutions on the proposed revisions, with a focus on the benefit-sharing obligations related to the utilization of biological and genetic resources and/or associated knowledge and digital sequence information.

Dr D Ramanathan wins Dhanwanthari Award for his contributions to Ayurveda

(Pharmabiz.com, January 11,2025)

Dr D Ramanathan, Managing Director of Sitaram Ayurveda Pharmacy, Thrissur and general secretary of the Ayurveda Medicine Manufacturers Organisation of India (AMMOI), has won the prestigious Dhanwanthari Award instituted by the

The award was given away by the state

Thrissur two days ago. This is the premier award given by the Kochi Devaswam Board in the name of Dhanwanthari, the God of health and Ayurveda, every year.

The Dhanwanthari Award is designed for doctors who are performing well in the field of Ayurveda clinical practice and research. Doctors working in government and private sectors are considered for the award which carries a cash award of Rs. 25,000 and a citation.



A Call for the Sustainable Management of Trona (Pooneeru): A Critical Element of the Siddha **Pharmaceutical Industry**



Dr J. Jeyavenkatesh

ooneeru, also known as Trona or Earth Salt or Fuller's earth or Pirisonite, is a blend of white salt and limestone that naturally occurs on Earth. Traditionally, Siddha practitioners and pharmaceutical producers gather these salts during full moon days, utilizing them for medicinal purposes. The expansion of urban areas into previously undeveloped lands has now limited its availability. In Siddha medicine, Pooneeru is crucial not only for the purification of various metallic drugs before they are processed but also as a key ingredient in medications. Its role is pivotal in removing toxins and purifying heavy metals and marine shells, a practice that has been integral to Siddha industries for many decades. Trona is extensively documented across various Siddha medicinal texts. It appears in renowned works such as 'Agathiyar Gnanakummi', 'Padartha Gunasintamani', and many others. These texts, which range from classics like 'Bogar-7000' to 'Therayar Karisal', highlight its importance in traditional medicine, underscoring its pivotal role in therapeutic practices throughout centuries.

The Sambasima Pillai Tamil Dictionary lists its natural habitat as 32 locations in South India. However, a recent survey by industry professionals has shown that its availability has dwindled to eight locations across Tamil Nadu. These sites include Singampunari and Naatarmangalam in Sivagangai, Varapur and Siddamalli villages in Pudukkottai, and several others, iterating a significant reduction in its accessibility. Notably found in these regions during specific full moons, its physical appearance can suggest its qualities, described as masculine if long and stick-like, or feminine if it resembles a beak. Referred to in various revered texts and associated with positive feminine energy, it is integral for creating higher order Siddha medicines by the use of *Pooneeru* water. This precious element is carefully stored in glass or porcelain to preserve its purity. The texts that discuss Pooneeru, known as Dikshaviti, often personify it with elements of nature, describing it as a gift from Mother Earth and Father Moon, influenced by lunar energy. Siddhar hymns and Tamil medical texts highlight that Trona (Medicated Pooneeru) harnesses this moon energy. 'Agathiyar Paribashai' notes its dual nature—both alkaline and acidic. For preservation, it's recommended to store Trona in glass jars, though alternatives like bamboo sticks or animal horns can also be used, reflecting its deep connection to natural and traditional storage methods.

While *Trona* (Medicated *Pooneeru*) is typically natural and can't be synthesized, ancient texts like Bogar 7000 reference a method purportedly



Organic Trona

used by the Chinese to create it artificially. Natural *Trona* is prized for its unique properties, notably its ability to detoxify metallic or chemical substances. Formed under specific environmental conditions, Trona crystallizes in swampy, brackish soils due to electrical energy from the atmosphere, typically found two to five feet underground. It surfaces as a pearl-like substance during the full moon of the Tai, Masi, and Panguni months and must be harvested before sunrise to avoid degradation by the sun's

Fuller's earth, commonly marketed globally as Multani Mitti by bio-organic industries, is distinct from medicinal Trona. It is often sold informally, without receipts, in local drugstores across the country. The price of Trona fluctuates, typically around INR 400 per kg, but can double during the rainy season. Despite its widespread use, Trona has not been standardized by any regulatory body. Interestingly, the Central Council for Research in Siddha has secured the first patent for Trona and its preparation methods, marking a significant milestone in its formal recognition.

While Trona is not listed as a minor mineral in Tamil Nadu, the Indian government has categorized it as such under the name Fuller's Earth in its publication, "Indian Minerals 2018." Primarily used in industries to filter and cleanse oils and greases, Fuller's Earth is not commonly employed in factory settings. It is also used in the production of carbon-free sheets. Awareness of Fuller's Earth's locations could lead to depletion as it is a sought-after resource in states like Rajasthan, Telangana, and others. Despite its global abundance, detailed data on Tamil Nadu's mineral resources remains limited.

Current Scarcity **Future** demands

The India Trona market generated a revenue of USD 49.6 million in 2019 and is expected to

Habitat of Trona in Tamil Nadu



reach USD 59.7 million by 2027. The India market is expected to grow at a CAGR of 2.3% from 2020 to 2027.

As urbanization expands and the use of artificial fertilizers increases, the availability of Trona or Fuller's Earth, essential for Siddha medicinal preparations, is at risk. This mineral, crucial for making metallic medicines used in cancer treatments, needs urgent conservation measures. Just as wildlife and plants like deer, elephants, tortoises, and red sandal trees are protected, so too must we safeguard the sites where Pooneeru (Fuller's Earth) is found to ensure its availability for future generations. Hence the Ayush industry must address the impending scarcity of Trona (Pooneeru) by taking proactive measures to safeguard its deposits across India. It is essential that areas known for their Trona deposits be designated as protected zones. To this end,

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Country Focus

Mauritius



auritius recognizes Traditional and Complementary Medicine (T&CM), rooted in its multicultural heritage which includes influences from Creole, Indian, Chinese, and African traditions. Common practices include the use of medicinal plants, massage therapy, acupuncture, and spiritual healing. Despite its integration, T&CM in Mauritius is still in early development stages, mostly supplementing modern medicine especially in rural areas.

Regulatory Framework and Stakeholder Engagement

Mauritius has a well-defined regulatory framework for T&CM, governed by the Ministry of Health & Wellness (MOHW) through its Traditional & Complementary Medicine Unit (TCMU) and supported by the Traditional Medicine Committee (TMC). They are supported by the Ministry of Education and Human Resources Tertiary Education & Skills Development (MOEHRTSD), which handles the accreditation standards for T&CM practitioners through its Skills Development & Accreditation Council (SDAC).

Various associations and federations like the Mauritian Federation of Complementary & Alternative Medicine Practitioners and Association des Medecins Naturopathes,

Acupuncteurs et Homeopathes de l'Île Maurice support the practice and development of T&CM.

Research and Development

Mauritius proactively promotes T&CM research, with significant contributions from the Mauritius Institute of Health and the University of Mauritius. These institutions focus on clinical trials, safety, efficacy studies, and phytochemistry, particularly concerning medicinal plants. The Mauritius Research Council plays a pivotal role in supporting T&CM research by providing funding and facilitating international research partnerships.

Clinical Trials and Product Registration

The regulatory oversight of clinical trials is executed through the National Committee for Biomedical Ethics and the Mauritius Research Council. This is towards ensuring ethical compliance and safety. This rigorous approach reassures stakeholders, including international partners and investors, of the high standards maintained within the local T&CM sector. For T&CM product registration, the TCMU, the Mauritius Institute of Health, and the National Herbarium coordinate with each other to ensure thorough quality control and authentication of plant materials. This systematic validation process is crucial for manufacturers and distributors who must adhere to strict safety and efficacy standards.

Resource Management and **Manufacturing Practices**

The sustainable management of T&CM resources is overseen by the Ministry of Agro-Industry and Food Security and the Ministry of Environment, for the responsible harvesting and trading of raw materials.

Manufacturing practices are regulated by the Good Manufacturing Practices Unit, which defines standards for product safety and quality. This regulatory environment supports manufacturers by providing clear guidelines and standards that align with international best practices.

Market Regulation

The Mauritius Revenue Authority, together with the TCMU, regulates the sale, import, and export of T&CM products, ensuring compliance with both local and international trade regulations. This rigorous market regulation is vital for stakeholders within the trade sector of the AYUSH industry, offering a structured and secure environment for the commercial activities of T&CM products.

Source: Ayushexcil

Event Info

8th International Ayurveda Congress, Pune, Feb 1-2, 2025

he 8th International Ayurveda Congress (International Ayurveda Conference) in collaboration with the All India Ayurveda Congress, New Delhi, the International Maharshi Ayurveda Foundation from the Netherlands, and the International Academy of Ayurveda is being hosted at the Dr DY Patil College of Ayurveda and Research Centre in Pune, affiliated to the Dr DY Patil (Deemed) University on February 1 and 2, 2025.

The conference includes a series of lectures, research paper presentations, and discussions. Research scientists, doctors, and scholars worldwide with expertise in Ayurvedic and Western medicine will discuss various themes and scientific evidence on preventing disease, promoting longevity, and alleviating specific health conditions with Ayurveda. The primary goal of the



conference is to discuss innovative research, the future scope of Ayurveda, treatment solutions,

and the exploration of Ayurveda's role in modern healthcare.

In Conversation

Team India Indonesia Bioresource Consortium (IIBC), Indonesia

he FITM team at RIS held a freewheeling, informal conversation with important members of the India Indonesia Bioresource Consortium (IIBC) - an entity in Bandung, under the University of Padjajaran (UNPAD), Indonesia, on Indonesia's traditional medicine sector, at RIS on 24 January 2025. This conversation was a corollary to the round table on 'India-Indonesia Cooperation on Ayush and Jamu: Relevance of Sustainable Bioresource Management' that was held at the India Habitat Centre, a day earlier. The members of the IIBC who were present were:

- Prof. Ni Luh Watiniasih Dean of Faculty of Mathematics and Natural Sciences Univeristas Udayana, Bali, Indonesia
- Dr. Lia Faridah , Universitas Padjadjaran , Bandung, Indonesia
- Prof. Dr. I Made Joni: Universitas Padjadjaran, Chair, IIBC, Bandung, Indonesia
- Prof. Dr. Camellia Panatarani, Head of Department of Physics, Universitas Padjadjaran, Bandung

The intent of the conversation was to understand the scope of activities in Indonesia with an objective of mainstreaming their traditional medical systems, such as Jamu.

Important thematic areas that were covered under the discussion and the inputs received therein are highlighted below:

Diversity of Traditional Medicines

The discussion revealed the existence of various traditional medicines, beyond Jamu, like Loloh, which are integral to Balinese culture and are preserved in traditional ways, including manuscripts. This highlights the rich diversity of herbal practices across Indonesia, which are region-specific and deeply embedded in the local culture.

Documentation and Standardization

The efforts towards documenting traditional practices and validating them through scientific methods at centers like Tawaman in Solo was explained by the team. This documentation is vital for institutionalizing these practices and integrating them into the broader health system.

Nanotechnology Integration

The efforts towards innovative integration of nanotechnology with traditional available bioresources - those in relation to Jamu and other traditional forms of medicine in Indonesia and otherwise was pointed out by the IIBC team. The focus here is to achieve significant strides in enhancing the efficacy and delivery mechanisms of herbal treatments. This approach not only elevates the traditional practices but also introduces a scientific rigor that paves the way for broader acceptance and application.



Research and Collaboration

The conversation centered around the dynamic collaboration between Indonesian universities and their Indian counterparts - Jawaharlal Nehru University (JNU), to push the boundaries of research in traditional medicine. This includes the use of nanotechnology to develop novel drug delivery systems, particularly targeting cancer treatment through natural compounds like mango skin extracts.

Sustainability and Resource Management

A critical aspect discussed was the sustainable management of bioresources. The discussion highlighted the strategies to preserve these plants through germplasm conservation, which involves storing the genetic material of plants to ensure their availability for future use. Furthermore, there is an emphasis on community involvement in supplementing the plant supply needed for medicine production. The conversation touched on international collaboration, particularly between India and Indonesia, focusing on protecting germplasm for critically endangered species common to both countries, which is vital for maintaining biodiversity and ensuring the sustainability of traditional medicinal resources.

Collaboration with Medical Institutions

The Tawaman center collaborates with Sarjito Hospital in Central Java, integrating standardized medicines alongside conventional treatments. While Sarjito Hospital has embraced this integration, other hospitals across Indonesia remain hesitant. The overarching goal is for the successful model at Sarjito Hospital to be adopted

by other hospitals across Indonesia, aiming to elevate the credibility and utilization of herbal medicine within the broader medical community.

Policy and Regulatory Framework

The approach of different institutions within Indonesia in the management and conservation of bioresources, through their own policies and strategies was brought to the fore by the IIBC team. They pointed out that the Central Government maintains significant botanical gardens in Bogor and Bali for preserving diverse plant species, while traditional herbalists employ distinct conservation practices. The IIBC aims to synchronize these varied approaches to enhance policy impact. This involves integrating and exchanging information across governmental and institutional boundaries to create a cohesive strategy that supports the development and regulation of traditional medicine.

Further. discussions Indonesian with regulatory bodies like the Ministry of Health and the FDA were underway as part of an ongoing dialogue to align traditional medicine practices with regulatory policies. Recent legal advancements, that include Health Law No. 70 passed in 2023, mark significant steps towards institutionalizing traditional medicine within the national healthcare system. This legal framework supported the establishment of a National Task Force, that has put in place a move towards structured governance and integration of traditional medicine at various levels of healthcare and policy-making. The Task Force in Indonesia aims to formalize the governance structure for traditional medical systems, focusing not just on Jamu but also exploring other local medicinal practices across regions such as Loloh in Bali.

Perspective

CCRYN's efforts in advancing community health and wellness with Yoga and Naturopathy

Dr. Raghavendra Rao

Director General, Central Council for Research in Yoga and Naturopathy (CCRYN)

oga and Naturopathy are important traditional Indian systems of medicine that have been used in preventive, promotive and rehabilitative and Integrative healthcare for over several centuries. These systems advocate minimalistic and simple living in tune with the laws of nature and play a vital role as lifestyle medicine. "Medicine is the science and practice of the diagnosis, treatment, and prevention of disease. It involves the use of various therapies, including medication, surgery, lifestyle changes, and other medical interventions to improve health outcomes." (NHS UK) . This encompasses a holistic view of healthcare, focusing on both the prevention and treatment of illnesses using a wide range of methods. Yoga and Naturopathy as a lifestyle intervention that encompasses treatment with diet, exercise, yoga, fitness, acupuncture, manipulative therapies, massage, energy healing, nutraceuticals, hydrotherapy, chromotherapy etc. play vital role in the management of various medical conditions. Central Council for Research in Yoga and Naturopathy (CCRYN) that was formed in the year 1978 has been playing a pivotal role in upliftment of yoga as a therapeutic intervention even before the advent of courses on yoga therapy in ashrams and yoga institutions. There were 65 publications in CCRYN published in various PubMed index journals since 1978 to 2019. After 2019 the number of PubMed index publications increased by 76. CCRYN has made significant contributions by developing yoga therapy modules for CAD, Asthma, Migraine, IBS, Diabetes, Cancer, Rheumatoid arthritis, Pregnancy, PCOS, Tuberculosis, High altitude and different

geographies and climatic conditions for the armed forces. CCRYN was also involved in development of the Yoga Dictionary. Literary reach included compendium of references on yoga from several manuscript libraries in Puranas, Upanishads, Gerand Samhita, Gorakshnath Samhita, Vyasa Bhashya of Patanjali Yoga Sutra, Hatha yoga Pradipika etc. Fifteen literary books and two apps were developed by CCRYN.

CCRYN has developed collaborative research with institutions like DIPAS, NIMHANS, SVYASA, Sanskriti Foundation, Kaivalyadhama, AIIMS Delhi etc. which have now developed into Integrative medicine centers in the country. Some of the studies of CCRYN have won accolade from American Society of Clinical Oncology, American Diabetes Association and American Heart Association as well. The impact factor theses publications range from 1.8 to 13.0 . the publications of CCRYN have been cited in guideline documents in National Cancer Care Network and Society of for Integrative Oncology.

A scheme for mainstreaming Yoga and Naturopathy involved setting up of collaborative center for mind body interventions through Yoga in AIIMS Rishikesh, AIIMS Raipur and PGI Chandigarh. This scheme involves completing five research projects over 5 years and 2 MD thesis using yoga as an intervention every year over five years. This also involves conducting two research methodology workshops over five years. This scheme has gained immense traction and more AIIMS have applied for these institutes with CCRYN. Statutory regulation of Yoga and Naturopathy alone can bring in standardization across these systems. The lack of central regulation is an impediment in this effort with more substandard colleges, courses etc dotting its landscape. Though there is statutory state regulation central regulation is yet to follow.

NABH Accreditation standards for Hospitals is already underway and several hospitals have availed this certification, however accreditation standards for education and training are needed to enhance quality of these courses.

Yoga and Naturopathy centers are very popular among the public for detox, wellness and rehabilitation. There are more than 250 naturopathy hospitals in the country with beds ranging from 20 to 2500 across centers. Most of these centers have foreigners and NRIs queuing up to take detox therapies and waiting time in some hospitals extends up to six months. CCRYN has recently opened two 100 bed central research institutes of yoga and naturopathy at Nagamangala, Karnataka and Jhajjar, Haryana and is in the process of opening many more in Raipur, Bhubaneshwar, Dibrugarh, Vijayawada and Kasargod in the years to come. These centre's will offer subsidised yoga and naturopathy outpatient, day care and inpatient intervention to the public and will form the hub of treatment delivery in these states. We aspire to open such CCRYNs in all states and union territories in the years to come.

CCRYN has also conducted startup yoga challenge and yoga tech challenge where several startups with innovations in devices and software apps were showcased with the help of startup India. CCRYN now intends to mentor startups in incubation centers in IITs with BIRAC. CCRYN has used innovative technologies such as Dozee, Ayurythm and other apps for their research studies. CCRYN has partnered with ICMR Task force project on Heart Failure to conduct a multi centric study which is currently underway. CCRYN is planning capacity building workshops in pulmonary rehab, palliative care, cardiac Rehab. CCRYN intends to conduct large multicentric studies and capacity building programs to enhance research output.

Continued from page 4

these areas should fall under strict land use restrictions as outlined in various legislative acts such as the Land Acquisition Act 1894 and the Mines and Minerals (Development & Regulation) Amendment Bill, 2023. These protections will ensure that Trona resources are conserved for both environmental reasons and public benefit, guided by the Department of Environment and Mineral Resources.

(The Author is Head (Medical and Research), Kokila Siddha Hospital and Research Centre; Managing Partner, Kokila Siddha Pharma (GMP certified) and President, Association of Siddha Hospitals and Clinics, Tamil Nadu)

Continued from page 1

suggestion that RIS should undertake studies on prospects of bilateral and multilateral cooperation on traditional medicine. A recommendation was also made to establish an India-Indonesia Fund

to strengthen connections between the respective traditional medicine systems.

(For details please visit: https://www.youtube.com/ watch?v=ED7IoQZDXL4)



Firm Profile

Kokila Siddha Hospital and Research Centre - India's first NABH **Accredited Siddha Hospital**

he Kokila Siddha Hospital and Research Centre is located in the village of Kunnanampatti in Thirumangalam Taluk, Madurai District, Tamil Nadu. It is the first Siddha hospital accredited by NABH, Quality Council of India. Currently empaneled with more than ten medical insurance companies, it is recognized by TNCEA (Tamil Nadu Clinical Establishment Act) for 60 bed in-patient facilities and has been functioning for the last 16 years benefiting more than 20 villages and more than 10000 people in the periphery.

The Kokila Siddha Hospital and Research Centre is using classical diagnostic methods Neikuri (Oleo-uromacroscopy) to diagnose the diseases, Manikkadai Nool (Wrist and Finger Anthropometry) to assess the prognosis in terminally ill patients and Nadi parisothanai (Pulse reading) for accurate diagnosis and selection of medication. The treatment of acute joint pain and spinal cord injury through the use of Varma medicine and Siddha Chuttigai (Cauterization) are some of the special methods of Siddha medicine that have been providing a yeomen service to the people. A significant percentage of patients receive Siddha internal medicine and externa therapies. Every day, free medical treatment is made available to the people below poverty line.

There are around 400 different kinds of flora that are preserved in the herbal garden. The earliest manuscripts and Siddha medicinal books, which date back 150 years, have been gathered together in the library. Medical Value Travelers from Malaysia, Singapore, and the United Arab Emirates are getting Siddha treatment. The hospital owns Kokila Siddha Pharma, that produces and provides classical GMP certified Siddha medicine for the benefit of the patients.

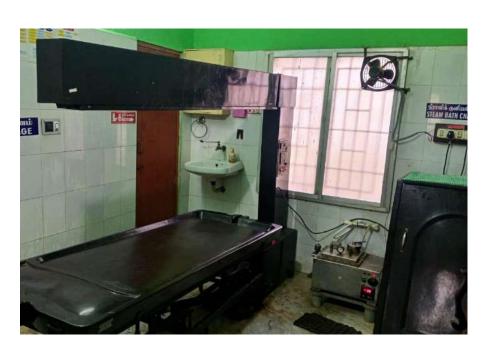


The original hospital was established in the year 1997 and is currently operating in Jaihindpuram, Madurai city. It is also accredited by NABH, Quality Council of India for 2 years. Initially, Kokila Siddha Hospital began in 1997 in a small, rented building with an out-patient wing and an investment of just Rs 10,000, has now expanded into two NABH accredited hospitals with the trust of the patients. The second hospital unit was established in 2009 in a fertile land with an herbal garden. The founder of Kokila Siddha Hospitals, Dr. J. Jeyavenkatesh, has obtained both his master's degree and his doctoral degree in Siddha medicine. He wrote 27 medical books and received best Tamil Medical Author award by the government of Tamil Nadu. He is a member of the

Scientific Advisory Board of the Central Council for Research in Siddha Medicine and a member of the Governing Council of the National Institute of Siddha Medicine. He has published more than 40 research papers in international journals. Most of these are articles indexed by Scopus, PubMed, and Web of Science respectively.

The Kokila Siddha Hospital and Research Centre is working with the objective of preserving rare herbs and researching the traditional medicines mentioned in the classical Siddha medical literatures and ultimately using these medicines to treat cancer. The founder intends to develop a comprehensive medical facility for cancer treatment and prevention.













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