

# Ayush Vaibhav

POLICY | INDUSTRY | INTERNATIONALISATION

– Growth and Excellence of the Ayush Sector

FITM Industry and Trade Newsletter

## Ayurveda as Strategic Civilizational Infrastructure for Modern Bharat

A Policy–Civilizational Perspective Rooted in Classical Foundations and Contemporary Global Relevance



Dr. Ramkumar

### Executive premise & strategic context

*Ayurveda as Strategic National Infrastructure — Not Cultural Memory*

Ayurveda must no longer be positioned merely as a traditional medical system or preserved as heritage. It must be recognised and actively developed as a civilizational health intelligence infrastructure — foundational to national health security, economic resilience, public well-being, agricultural sovereignty, cultural continuity, and global leadership in future medicine.

The strategic error of the past century was to treat Ayurveda as something to defend or preserve. The strategic responsibility of this century is to position it as something to deploy, evolve, and lead with. Ayurveda is not an “alternative” to modern medicine — it is the missing preventive, ecological, personalised and a layer of consciousness-aware intelligence without which healthcare becomes reactive, fragmented, and economically unsustainable.

### The Global Healthcare Model Is at Threshold

*The world today is witnessing:*

- A surge of lifestyle-driven chronic diseases — diabetes, obesity, autoimmune disorders, infertility, anxiety, insomnia
- 70% of global premature deaths are now due to preventable non-communicable conditions (WHO, 2023)
- Neurological and stress-related disorders are emerging as the leading cause of disability globally
- Healthcare costs outpacing GDP growth in multiple nations
- Individuals are living longer, but suffering earlier and longer

Modern medicine is brilliant in acute and emergency care — but the global health

challenge today is not emergency— it is chronic, behavioural, metabolic, and existential. This is the exact domain where Ayurveda was designed to lead.

### Bharat’s Civilizational Responsibility

As global healthcare institutions increasingly explore circadian medicine, microbiome science, psychoneuroimmunology, epigenetic reprogramming, and trauma-informed healing, the world is slowly rediscovering fragments of what Ayurveda already holds as a complete and integrative health intelligence system.

However, unless Bharat narrates and deploys Ayurveda strategically — through clarity, dignity, and evidence — rather than through cultural sentiment, the knowledge will again be fragmented, outsourced, and commercialised without its civilizational intelligence intact. Ayurveda is not merely to be remembered. It is to be positioned as Bharat’s living strategic contribution to the future of humanity.

### Classical Foundations & Global Health Alignment

*Ayurveda’s Foundational Intelligence — Historically Complete, Systemically Future-Ready*

Ayurveda is not a collection of treatments — it is a governing intelligence framework for understanding health as a dynamic state of rhythm, intelligence, and adaptation, not merely the absence of disease. -Charaka Samhita, Sutrasthana 30.26:

*“Swasthasya swasthya rakshanam, aturasya vikara prashamanam cha.”*

The first responsibility of medicine is to protect the health of the healthy, and only then to treat the illness of the unwell. This principle aligns perfectly

with what the world today calls preventive, predictive, personalised and participatory healthcare — P4 Medicine — a vision the West is still trying to conceptualise, while Ayurveda has already operationalised it for millennia. Additionally, Ayurveda offers foundational paradigms now being rediscovered by Western science:

Ayurveda Principle	Modern Scientific Re-emergence
Dinacharya, Ritucharya	Chronobiology & circadian medicine
Prakriti (constitution)	Precision & genomic medicine
Agni & Ama	Metabolic inflammation & gut dysbiosis
Manovaha Srotas	Psychoneuroimmunology & trauma medicine
Achar Rasayana	Epigenetic lifestyle programming

Ayurveda is not “alternative medicine”. It is systems intelligence — and it is strategically future-aligned.

### WHO Global Disease & Disability Trends — A Direct Call for Ayurveda Intervention

According to the World Health Organisation (2023 Global Health Estimates):

- 7 of the top 10 causes of death globally are non-communicable chronic diseases
- — Heart disease, stroke, lung disease, cancers, diabetes, etc.
- Neurological and stress-related conditions are now the leading cause of disability worldwide
- Over 70% of premature deaths are now preventable — yet the global system remains

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The distinctive and rich landscape of Guatemala nurtures Traditional and Complementary Medicine (T&CM), which, in turn, has been shaped by indigenous healing traditions, community-centred practices, and that is aided by a regulatory system that focuses on ensuring safety, ethical sourcing, and quality control. T&CM is officially recognised in Guatemala, and its practice remains deeply embedded within local culture, particularly among indigenous groups that have conserved herbal and ritualistic healing systems over generations. The T&CM ecosystem in Guatemala finds able support through institutions, communities, and regulatory entities collectively creating a structured pathway for administration, research, procurement, registration, and oversight.

### Recognition and Administration of T&CM

The oversight for the recognition of T&CM in Guatemala is under specific government bodies, primarily the Ministry of Public Health and Social Assistance (MSPAS) and its specialised unit, the Directorate for Regulation, Control and Sanitary Surveillance of Pharmaceutical Products and Related Products (DRECPAF). Supporting institutions such as the National Institute of Indigenous Languages and Cultures (INLCI) and the National Council of Protected Areas (CONAP), play significant roles in regulation, cultural validation, and biodiversity management of T&CM.

### Infrastructure support for T&CM

Guatemala's traditional medicine infrastructure finds strong support from clinics such as Centro de Medicina Tradicional Maya Ixchel, Universities that document and promote ancestral health knowledge, indigenous communities, herbal markets, and NGOs that are involved in cultural preservation and public health outreach. These establishments of practice help in ensuring continuity of traditional systems alongside the provision of accessible healthcare options to local populations.

### Research and Development

Research on T&CM in Guatemala is governed by MSPAS and INLCI, with an emphasis on regulating T&CM within a framework which is sensitive to challenges such as intellectual property rights and community empowerment. Regulatory guidelines for safeguarding traditional knowledge while enabling ethical research practices and collaboration, are in place.

### Clinical Trials

Clinical trials fall under MSPAS via DRECPAF for ensuring ethical conduct and standardised methodologies. The regulatory system emphasises on ethical protections for indigenous knowledge and local communities participating in research. This framework aims to support credible evidence generation that is in alignment with international standards as well as national cultural priorities.

### Registration of T&CM Products

Registration of Traditional Medicine in Guatemala follows a structured process put in place by MSPAS and DRECPAF. The pre-registration process involves contacting DRECPAF, preparing a detailed application, and undergoing rigorous document reviews to ensure compliance with legal and safety requirements. This structure has been created to serve as a critical element, for both domestic circulation and international trade.

### Raw Material Procurement

Guatemala articulates an emphasis on ethical sourcing and collaborative practices in raw material procurement. This would involve the identification of plant materials, engaging with multiple government entities, and procurement of permits for ensuring environmental protection and regulatory compliance. Institutions such as CONAP and MAGA (Ministry of Agriculture, Livestock and Food) ensure that harvesting confirms to biodiversity laws and indigenous custodianship.

### Manufacturing

Manufacturing of Traditional Medicine involves (Source: Ayushexcil)

coordination between MSPAS, INLCI, MAGA, and CONAP. The manufacturing practices in the country prioritize ethical sourcing, community-centric production models, and adherence to cultural integrity alongside meeting national regulatory standards

### Sale and Licensing

The sale of Traditional Medicine mandates and follows compliance with guidelines overseen by MSPAS-DRECPAF. Some of the major requirements are ethical sourcing, proper ingredient disclosure, compliant labelling, and full licensing before distribution. The licensing process involves community engagement, ethical protocols, regulatory applications to MSPAS, and continuous compliance monitoring with periodic renewals.

### Import and Export Regulations

Importing Traditional Medicine warrants the coordination with DRECPAF for registration followed by customs clearance for ensuring legal distribution within Guatemala. Exporting Traditional Medicine mandates compliance with the regulatory requirements of MSPAS (via DRECPAF) and securing permits from INLCI, MAGA, and CONAP, and in a few cases, the Ministry of Foreign Affairs (MINEX).

### Penal Actions and Regulatory Enforcement

The penal framework of Guatemala outlines strict measures to prevent misuse or illegal trade of Traditional Medicine. Penalties are linked with violations related to unauthorized or adulterated medicines, practicing without a license, false advertising, unfair commercial practices, consumer harm, breach of ethical standards, and improper pharmaceutical control. The important authorities in relation to the same include DRECPAF, the Public Prosecutor's Office, the Consumer Protection Bureau, and the Council of Health Professions.





Secretary Ayush Underscores  
Ayurveda’s Central Role in Holistic  
Healthcare

(Press Information Bureau, November 11, 2025)

Vaidya Rajesh Kotecha, Secretary, Ministry of Ayush, addressed the 22nd CII Annual Health Summit 2025 in New Delhi, underscoring Ayurveda’s pivotal role in shaping the future of holistic healthcare in India. He urged hospitals and healthcare providers to fully harness the vast potential of Ayurveda by actively integrating Ayurvedic therapies, wellness treatments, detoxification, and yoga with modern medical services. Shri Kotecha emphasized that Ayurveda and holistic wellness programmes are rapidly gaining popularity among both domestic and international patients seeking comprehensive and restorative healthcare in India. He described the integrative healthcare model—as a combination of traditional healing wisdom and contemporary medicine—as essential to establish India’s position as a leading global destination for medical tourism, while advancing a truly inclusive and world-class healthcare ecosystem.

The call is a shoutout to the private and corporate players in the healthcare services domain to actively promote the delivery of integrative clinical services within their facilities rather than creating/house stand-alone Ayush care units. This could potentially inspire more private players to consider the creation of integrative streams of service delivery in relation to multiple disciplines such as Metabolic disorders, Geriatric care, Oncology etc, thereby additionally contributing to robust evidence generation.

Uttar Pradesh to open up Ayush  
Wellness Centres and Resorts in  
the state

(Times of India, November 8, 2025)

Uttar Pradesh Tourism has opened doors for Ayush practitioners and entrepreneurs to establish wellness centres and resorts across the state.



“The move aims at integrating Ayurveda, Yoga, Naturopathy, Unani, Siddha and Homoeopathy into the state’s tourism ecosystem” said tourism and culture minister Jaiveer Singh. He added that UP has immense potential to become a national hub for wellness and rejuvenation tourism.

The govt has identified spiritual destinations — including Varanasi, Ayodhya, Mathura-Vrindavan, Chitrakoot, Sarnath, Shravasti and Kapilvastu — for developing wellness infrastructure and hosting Ayush-led programmes.

By specifying mandatory infrastructural parameters for approval of such centres, the state government is laying down the foundation for a regulatory framework which could at a later stage be linked to appropriate quality and accreditation standards. This is clearly targeted towards the globally growing Wellness Industry market with economic gains and brand-building for the sector.

Safdarjung Hospital and Ayurveda  
Institute team up for better  
menopause care

(Times of India, November 19, 2025)

Help for women going through menopause may soon become more holistic and easier to access. Vardhman Mahavir Medical College (VMMC) & Safdarjung Hospital signed an MoU with the Central Ayurveda Research Institute (CARI) , under the Ministry of Ayush, to jointly develop scientific, Ayurveda-based solutions for menopausal care.

The new partnership aims to blend traditional knowledge with modern medical science so women can access safe, effective, and research-backed therapies. Dr Sandeep Bansal, Director of VMMC & Safdarjung Hospital, said Ayurveda, when used carefully alongside allopathic treatment, can offer meaningful relief to menopausal women. He stressed that some Ayurvedic formulations, especially those containing metals, must be taken only under trained supervision to ensure safety.

The collaboration is expected to help design scientifically validated Ayurvedic therapies that can be safely integrated with modern menopausal care, ultimately aiming to improve patient outcomes, expand research capacity, and bring holistic, patient-centric solutions within reach for more women.

Menopause is an area that has not been accorded high priority in research or public health programs. A major public healthcare facility piloting the project through an MoU with an apex public sector Ayurveda institution opens up the scope of availing benefits of the same for a large number of women from the weaker economic sections of the society.

Ayush Ministry plans a  
Naturopathy Hospital and College  
in Vishakhapatnam

(Times of India, November 11, 2025)

In a first, the Ministry of Ayush has proposed to establish the Apex Research Institute for Yoga and Naturopathy at a cost of Rs 750 crore and sought 40 acres of land from the state govt for establishing the institute at Visakhapatnam, announced Health Minister Y Satya Kumar Yadav.

According to the Health Minister, the Apex Yoga and Naturopathy Research Centre, which will be established by the Central Council for Research in Yoga and Naturopathy (CCRYN), the apex body for research of Yoga in the country under the Ministry of Ayush, will construct a 450-bedded naturopathy hospital. It will also offer a Bachelor of Naturopathy and Yoga Surgery course with 100 seats and 20 PG seats in the inaugural academic year at the institute.

Furthermore, the Central Research Institute of Yoga and Naturopathy would be established at a cost of Rs 100 crore near Nadimpalem (near Katuru Medical College) in Prathipadu mandal of Guntur district.

This is a positive step towards the creation of a tertiary-care and research institution that can support rigorous clinical research on Yoga and Naturopathy. It could also progressively evolve as a regional hub (such as for the SEAR region) for collaborations in research and training.



Editorial

Can Ayush become an ally of Climate change, rather than a victim ?

Climate change has moved from the identity of an environmental concern to a looming public health emergency. By the WHO’s own estimates, the annual mortality threat owing to climate change could be closer to 250,000 additional deaths per year, by the 2030s – 2040s, attributable to resultant malnutrition, malaria, diarrhoea and heat stress. India is a major nation that faces the scourge of climate change in its urban cities and villages.

In this backdrop, the Ayush sector in India has a significant challenge. It is directly susceptible to climate shocks. Shifting habitats of medicinal plants, disruption of supply chains and cultivation and heat-wave induced strains on communities relying on traditional healers as a first line of healthcare are vivid expressions of this phenomenon. The way forward would be to align it with the principles of climate resilience, Planetary Health and One Health.

The WHO Traditional Medicine Strategy 2025-2034 calls for a support to environmental sustainability, biodiversity safeguard and alignment with One Health by Traditional, Complementary and Integrative Medicine (TCIM). It underscores that the practice of TCIM which by themselves are rooted in natural resources and local knowledge, should be practiced and regulated in such a manner so as to not deplete the local ecosystem or worsen a climate risk. India’s current National Action Plan on Climate Change and Human Health (NAPCCHH), advises that all health programs should have to work on building resilience in climate-sensitive locations, through multiple modes such as surveillance, early warning and community-based adaptation.

From an Ayush perspective, focus on the following fronts would be critical. To begin with, focus on reducing pressure on wild stocks of medicinal plants, while preserving their quality, through interventions such as water-efficient agronomy, native biofertilizers as microbial solutions, as well as pertinent cultivation in relation to existing climate (being climate-smart) can help deal with the fragile ecosystems of Ayush raw materials. Second, Ayush needs to position itself into climate-resilient health services delivery. The amplification of Non-Communicable Diseases (NCDs) by climate change, especially heat-related illnesses and mental-health issues, is well understood by now. Thus, it is strategic to enable tapping into Ayush’s inherent strengths with respect to prevention, lifestyle-modification and community-based care. Ayush could therefore target on vulnerable groups susceptible to climate stress and support the management of mental health issues by enhancing mental and social resilience. Third, prospective research on the harmful effects of climate change on the quality and efficacy of medicinal herbs and considering the inclusion of climate-risk assessment and biodiversity impact in forthcoming regulation with respect to drugs and raw-materials would be an important step. Finally, in global discussions with stakeholders, Ayush needs to showcase climate-resilient cultivation models and community-centred interventions and approaches, thereby linking climate with health partnerships and collaborations.

Ayush has the opportunity to contribute to citizens’ adaptability to changing climate zones globally without any damage to the ecosystem. It should now seek the pathway to move forward to be counted as a reliable climate change ally.



Himachal CM approves full salary for Ayush docs pursuing PG

(Times of India , November 12, 2025)

Himachal Pradesh Chief Minister Sukhvinder Singh Sukhu on Tuesday ordered that doctors pursuing post-graduation under the Ayush department will now receive 100% of their salary, overturning the earlier notification that allowed only 40% pay. The decision was taken during a review meeting of the Ayush department.

Emphasizing the Govt’s commitment to promote wellness tourism in Himachal Pradesh, Sukhu said the Ayush department plays a vital role in realizing this vision. He noted that the state’s natural beauty and favourable climate provide immense potential for wellness-based tourism.

To further improve healthcare delivery, Sukhu directed the department to identify Ayush health institutions with high patient footfall and strengthen them with additional staff and better infrastructure.

This is anticipated to create a positive impact on increasing the pool of qualified specialists of Ayush and provide motivation for the PG Physicians to serve in public facilities . Also, the additional emphasis on wellness tourism balances the public health and economic product dimensions of the service sector.

USTM produces Northeast India’s first native AM biofertilizers for conservation of medicinal plants

(The Hub Reporter, November 22, 2025)

In a significant scientific milestone for the Northeast, the Department of Botany at the University of Science and Technology Meghalaya (USTM) has successfully produced Arbuscular Mycorrhizal (AM) biofertilizers using native fungal strains — marking the first such achievement in the region.

The innovation was led by research scholar Mrs. Nilufa Afruza under the supervision of Dr. Dhritiman Chanda, Assistant Professor, and the guidance of Prof. G. D. Sharma, Vice Chancellor, USTM. Two biofertilizer variants — Glo-VAM and Acaulo-VAM — have been developed based on metagenomic studies identifying Acaulospora and Glomus as dominant AM fungal genera associated with endangered medicinal species in Meghalaya. These have been registered with accession number PRAJNA1298766 and a patent application has been filed.

Vesicular Arbuscular Mycorrhiza (VAM) refers to AM fungi that form one of the most beneficial and ancient plant–microbe partnerships. VAM

fungi colonize plant roots and extend microscopic hyphae deep into the soil, functioning as a natural extension of the root system to enhance nutrient and water uptake. By improving nutrient-use efficiency, VAM reduces reliance on chemical fertilizers, offering a low-cost, eco-friendly solution for agriculture, especially medicinal plant cultivation.

It has been scientifically documented that over 80% of terrestrial plants, including medicinal plants have the ability to form symbiotic associations with AM fungi. Research shows that the inoculation of AM fungi into the soil boosts nutrient uptake, water absorption, enhances drought and salinity resistance and improves plant growth and biomass, while influencing secondary metabolites, particularly with respect to medicinal plants . Given that a majority of medicinal plants, in particular, those of Traditional Medicine grow in the wild thereby consistently facing the threat of population decline and ecological stress, the indigenously developed AM biofertilizer could potentially promote ex situ and in situ conservation efforts, for creating the foundations of sustainable cultivation. There also lies the possibility of obtaining a yield of higher phytochemical quality through AM fungi based cultivation of medicinal plants.



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dominantly reactive, not preventive. Modern medicine continues to advance at an extraordinary pace in acute care, surgery, and emergency medicine — yet the defining crisis of our time is chronic, behavioural, lifestyle-rooted, and rhythm-driven. This is exactly where Ayurveda is strongest. It does not wait for disease — it reverses dysregulation long before it becomes diagnosable pathology.

Ayurveda is no longer a cultural option — it is a strategic response to a collapsing global health paradigm. Ayurveda does not replace modern medicine — it completes what modern systems have not been designed to address at scale. This is not alternative — this is strategic complementarity.

### Rebuilding Ayurveda Education & restoring the Vaidya as the fulcrum

The long-term future of Ayurveda hinges not merely on institutional expansion, but also on the quality, depth, and clarity of its Vaidyas. Historically, the Vaidya was not simply a medical practitioner — but a custodian of perception, clinical subtlety, ethical integrity, cultural responsibility, and living research. The strength of Ayurveda has always been transmitted through living intelligence — not only through literature or infrastructure.

Modern education has strengthened structure — but the next natural evolution is to strengthen depth. The priority is not more doctors of Ayurveda, but more true Vaidyas.

### Classical Vision — A Tradition of Cognition and Observation

Ayurveda education has always been centred on the cultivation of *āchāra*, *śraddhā*, *darshana*, *sparshana*, *prashna*, *nadi pariksha*, *manas pariksha*, and more — not only as syllabus elements, but as disciplines of perception, character, and responsibility. This orientation does not need to be recreated in its old form — but its purpose must be restored. Ayurveda education must train intelligence, not just memory. It must sharpen perception, not just accumulate information.

The goal is not more Doctors of Ayurveda — but more Vaidyas. This is not a rejection of the current model — it is its natural maturation. The direction is clear : from degree completion to human refinement; from knowledge retention to perceptual cognition; from syllabus coverage to clinical depth and ethical presence.

### The Vaidya as “Researcher on the Job”

In the Ayurveda paradigm, the Vaidya is also a living researcher in real time — not in the narrow academic sense, but as one who continuously documents, refines, and evolves insight through direct engagement with living reality.

When every Vaidya systematically observes and documents prakriti, samprapti, agni, manas, intervention pathways, recovery patterns across diverse populations and more, Ayurveda naturally generates evidence that is both quantitative and phenomenological.

Over time, when thousands of Vaidyas across diverse geographies document this with standardised rigour:

- Authentic, pattern-based clinical intelligence emerges across regions, seasons and populations

### Ayurveda’s Strategic Complementarity

<i>Global Priority Zone</i>	<i>Current Healthcare Approach</i>	<i>Ayurveda’s Complementary Role</i>
Chronic & metabolic disorders	Advanced acute and symptom management	Early-stage reversal via Agni, diet, lifestyle & rhythm correction
Mental health & stress	Neurochemical and cognitive interventions	Mind–body regulation through Manas, Prana, and sensory intelligence
Immune & inflammatory regulation	Precision modulation	Terrain harmonisation and immune intelligence cultivation
Public health sustainability	High-resource tertiary care investment	Low-cost prevention-first, community-rooted ecosystem

- Evidence accumulates at scale — not abstract, but rooted in lived outcomes
- Case-rich insight accumulates faster than any controlled trial format
- Ayurveda’s strengths are demonstrated not through replication of external models, but through expansion of its own epistemological rigour

In this model, the Vaidya is the primary knowledge engine, and society itself becomes a living laboratory — not reducing Ayurveda to institutional research, but elevating research to the level of living practice.

### What Must Change — Strategic Reform Pillars

- Gurukula 2.0 — reintroduce proximity-based learning within modern frameworks. Apprenticeship under experienced Vaidyas must be re-established — not sentimentally, but as the necessary medium of transmission of clinical subtlety.
- Clinical perception as a core competency — not peripheral Darshana, Sparshana, Prashna, and Nadi Pariksha must be systematically cultivated — supported by guided observation, simulation environments and ethical real-case immersion.
- Revival of Nyaya and Tarka — train original thought, not memory. Students must be trained to reason like Ayurveda, not merely repeat Ayurveda.
- Research routed through Ayurveda’s epistemological strength. Evaluation must include real-world, parametric insight at scale, not limited to reductionist imitation of other scientific models.

If Vaidyas are strengthened, Ayurveda rises naturally. If Vaidyas are diluted, the system collapses into content.

### National Policy Architecture & Global Leadership

Ayurveda as Foundational National Health Infrastructure

Ayurveda must now be positioned not as a parallel or alternative system, but as the foundational health intelligence layer of Bharat’s future healthcare architecture — particularly in domains of prevention, lifestyle regulation, immune resilience, community health ecosystems, and regenerative longevity. In complement with allopathy and other medical knowledge systems — which may continue to lead in acute intervention, emergency care, surgery, and critical response — Ayurveda should be institutionally recognised as the first line of national health preservation and human optimisation.

### Strategic Pillars for National Implementation

- Prevention as National Health Security : Ayurveda’s principles — dinacharya, ritucharya, agni care, nidana parivarjana — must inform structured national programs for sleep health, metabolic regulation, stress immunity and early-stage reversal, not merely “wellness campaigns”.
- Community-Centric Ayurveda Ecosystems : Locally-adapted health ecosystems must be developed at village and urban precinct levels — integrating food systems, seasonal practices, ecological intelligence and culturally rooted lifestyle guidance.
- The Vaidya as Primary Knowledge Engine : The Vaidya must be institutionally recognised as a “researcher on the job” — continuously generating real-world evidence through ethical documentation, ensuring knowledge is alive, adaptive, and self-renewing.
- Complementary Integration — Not Competition : Ayurveda and other medical knowledge systems must be formally positioned as co-architects of the national health grid — each operating from its highest strength zone, in mutual respect and complementarity. Ayurveda must be structurally integrated into national health planning as India’s official first line of preventive care, and not treated as a welfare or heritage add-on.
- Ayurveda as India’s Global Health Diplomacy Offering : Projected internationally not as a cultural artefact, but as a future-relevant, scientifically aligned, ecologically committed health intelligence model — capable of contributing to global dialogues on chronic disease, ageing, sustainability and resilience.

### Conclusion — Not Preservation, But Leadership

Ayurveda is not a relic to be remembered — it is a living intelligence to be activated. India now holds the opportunity — and the responsibility — to lead the world towards a more intelligent, integrative, ecological and deeply human-centred era of healthcare. This is not an advocacy for tradition. It is a strategy for the future.

For this to happen, Ayurveda must move from the margins of memory to the centre of national strategy — guided not by nostalgia, but by visionary clarity, scientific dignity, and civilizational responsibility. Ayurveda is not seeking re-entry. It is arriving as the next civilizational offering of Bharat to the world.

(The author is Founder-Director Punarnava Ayurveda and Director, Vaidyagrama Ayurveda Healing Village)



# Firm Profile

## Vaidyagrama Ayurveda Healing Village, Coimbatore



Vaidyagrama Ayurveda Healing Village, set in almost 50 acres of land in the gentle countryside on the outskirts of Coimbatore, Tamil Nadu, was created with a simple but profound intention — to bring classical Ayurveda into the lap of nature, where healing unfolds not only through medicine, but through earth, silence, and a deeper remembering of life’s natural rhythm.

Rooted in the ancient prayer *Sarve Bhavantu Sukhinah* — “May all be healthy and happy” — Vaidyagrama is a living, breathing healing village where traditional wisdom, spiritual ambience, and ecological integrity come together in quiet harmony.

### A Healing Philosophy Grounded in Classical Ayurveda

Healing at Vaidyagrama follows the wisdom of the classical Ayurveda texts — texts that guide treatment through purification, nourishment, rest, and the cultivation of a sattvic inner life. Every treatment is personalised, prepared fresh, and administered with mindful attention. Medicines are made onsite using herbs grown in the soil of the land itself. Food is simple, gentle, seasonal, and rooted in classical dietary wisdom.

Days begin with prayer, continue in unhurried silence, and flow with the sun — allowing the body to slow down, senses to soften, and the mind to settle into stillness. This alignment with natural rhythm becomes a subtle yet powerful medicine, awakening the inner healing intelligence that every being carries within.

### Clinical Integrity With a Human Heart

Accredited by NABH, Vaidyagrama maintains strong clinical discipline and ethical practice. Yet the environment feels more ashram than hospital — physicians walk barefoot on mud paths, therapists serve with devotion, and the care is attentive without being intrusive. Apart from allocating 2 therapy rooms for each 4 rooms in an illam, here are some practical measures that are meticulously practised at Vaidyagrama:



- Infection control
- Patient consent
- Documentation standards, and
- Safety protocols

The medical leadership — Vaidyas A.R. Ramadas, K.K. Harikrishnan, and E.K. Ramanandan — carry lineage-based learning and decades of deep clinical practice. Supported by 25+ Ayurveda doctors, over 90 therapists and over 250 staff, they hold space for healing in a way that blends knowledge with compassion, science with spirituality, discipline with humility.

### A Global Family of Seekers and Patients

More than 12,000 people from over 75 countries have journeyed to Vaidyagrama — many seeking relief from long-standing conditions such as neurological disorders, autoimmune challenges, metabolic disease, women’s health conditions, chronic pain, emotional exhaustion, and cancer supportive care.

Stays often extend 21–60 days, allowing space for the body to cleanse, strengthen, and reset. Patients speak not only of physical recovery, but of rediscovering ease in the breath, softness in the heart, and clarity in the mind — as if they have returned to a part of themselves they had forgotten.

### Ecology as Medicine

At Vaidyagrama, the environment is not a backdrop — it is a living part of the healing process. The buildings are shaped from sun-dried mud blocks that breathe with the land, keeping rooms naturally cool without artificial air-conditioning. Courtyards, open skies, neem and native trees, gentle birdsong, and quiet pathways of soil guide the senses back to simplicity. Solar energy lights the rhythms of the day, biomass fires cook nourishing meals, and water is returned to the earth after gentle purification.

Over the years, this partnership with nature has allowed the land to thrive — groundwater levels have risen by more than 200 per cent, 15000 native trees have been planted, and the soil has yielded over 35000 kilograms of naturally grown vegetables. Water and energy are conserved in significant measure, and even everyday practices like crafting oil-recycled candles and preparing soapnut and herbal floor cleansers reflect a commitment to tread lightly.

Impact Area	Measurable Result
Groundwater	Risen by over 200%
Reforestation	15,000 native trees planted





Sustainable Yield	Over 35,000 kg of naturally grown vegetables
Conservation	Water and energy are conserved in significant measure

At Vaidyagrama, alignment with nature is considered essential for true healing. When the body begins to move with the rhythm of the earth, healing deepens, breath slows, and inner clarity awakens. Patients often describe the land itself as a healer — silent, watchful, nourishing.

Sustainable Design & Practices

Practice	Detail
Architecture	Buildings made from sun-dried mud blocks that breathe, providing natural cooling.
Energy	Solar energy lights the rhythms of the day.
Cooking	Biomass fires are used to cook nourishing meals.
Everyday Low-Impact	Everyday practices include crafting oil-recycled candles and preparing soapnut and herbal floor cleansers.

A Community Rooted in Service

Vaidyagrama supports surrounding villages with free medical care, meals for elders, women’s livelihood programs, children’s support and education, cow protection, water conservation, and rural welfare initiatives. Service here is not charity — it is a continuation of healing, flowing from the understanding that wellbeing is collective.

Vaidyagrama – At a Glance

**Location:** Thirumalayampalayam, Coimbatore, Tamil Nadu, India Founded: 2009  
**Healing Model:** Classical Ayurveda healing village rooted in silence, nature & sattvic living  
**Accreditation:** NABH Accredited Ayurveda Hospital  
**Medical Team:** 25+ doctors, 90+ therapists  
**Leadership:** Vaidyas Ramadas, Harikrishnan & Ramanandan  
**Patients Served:** 12,000+ from 75+ countries  
**Healing Duration:** Typically 21–60 days of immersive care  
**Campus:** 50+ acres, mud architecture, natural ecology  
**Conditions Supported:** Neurological, autoimmune, metabolic, cancer-supportive, women’s health, post-viral, digestive & chronic disorders

Why Patients Choose Vaidyagrama

- Sacred Ayurveda village
- Ancient principles, modern clinical rigour
- Mud rooms, open courtyards, natural light
- Herbal medicines prepared onsite
- Sattvic food from natural soil
- Prayer, silence, gentle pace
- Deep Panchakarma stays
- Lineage-based vaidyas
- Emotional/spiritual grounding
- Nature & community as medicine

Evolution Timeline

- 2008–2010 — Vision & foundation
- 2009 — First mud-block & prayer hall
- 2012 — Community service begins
- 2015 — Global presence grows
- 2018 — Food forests & cow sanctuary
- 2020 — Global learning community
- 2023 — 12,000+ guests, 75+ countries
- Future — Toward a 100-acre healing ecosystem

Regional Context

- Western Ghats sacred ecology belt
- Rural village community
- Ancient herbal biodiversity zone
- Land of traditional farming & temples

A Living Model for the Future

Vaidyagrama stands today as a rare contemporary expression of authentic Ayurveda — not modernised, but made accessible through sincerity, structure, and devotion. It demonstrates that true healing can happen gently, quietly, and in alignment with nature — without excess, without distraction, without disconnection from earth and spirit.  
It is a place where the soil cools the feet, dawn prayer softens the heart, trees offer shade like blessings, and where the body remembers what the mind has forgotten — that life heals when we live in harmony with nature, time, and truth.



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# RIS

Research and Information System  
for Developing Countries

विकासशील देशों की अनुसंधान एवं सूचना प्रणाली

RIS specialises in issues related to international economic development, trade, investment and technology. It is envisioned as a forum for fostering effective policy dialogue and capacity-building among developing countries on global and regional economic issues. The focus of the work programme of RIS is to promote South-South Cooperation and collaborate with developing countries in multilateral negotiations in various forums. Through its following centres/forums, RIS promotes policy dialogue and coherence on regional and international economic issues.



The word “DAKSHIN” (दक्षिण) is of Sanskrit origin, meaning “South.” The Hon’ble Prime Minister of India, Shri Narendra Modi, inaugurated DAKSHIN – Global South Centre of Excellence in November 2023. The initiative was inspired by the deliberations of Global South leaders during the Voice of the Global South Summits. DAKSHIN stands for Development and Knowledge Sharing Initiative. Hosted at the RIS, DAKSHIN has established linkages with leading think tanks and universities across the Global South and is building a dynamic network of scholars working on Global South issues.



AIC at RIS has been working to strengthen India’s strategic partnership with ASEAN in its realisation of the ASEAN Community. AIC at RIS undertakes research, policy advocacy and regular networking activities with relevant organisations and think-tanks in India and ASEAN countries, with the aim of providing policy inputs, up-to-date information, data resources and sustained interaction, for strengthening ASEAN-India partnership.



CMEC has been established at RIS under the aegis of the Ministry of Ports, Shipping and Waterways (MoPS&W), Government of India. CMEC is a collaboration between RIS and Indian Ports Association (IPA). It has been mandated to act as an advisory/technological arm of MoPSW to provide the analytical support on policies and their implementation.



FITM is a joint initiative by the Ministry of Ayush and RIS. It has been established with the objective of undertaking policy research on economy, intellectual property rights (IPRs) trade, sustainability and international cooperation in traditional medicines. FITM provides analytical support to the Ministry of Ayush on policy and strategy responses on emerging national and global developments.



BEF aims to serve as a dedicated platform for fostering dialogue on promoting the concept in the Indian Ocean and other regions. The forum focuses on conducting studies on the potential, prospects and challenges of blue economy; providing regular inputs to practitioners in the government and the private sectors; and promoting advocacy for its smooth adoption in national economic policies.



FIDC, has been engaged in exploring nuances of India’s development cooperation programme, keeping in view the wider perspective of South-South Cooperation in the backdrop of international development cooperation scenario. It is a tripartite initiative of the Development Partnership Administration (DPA) of the Ministry of External Affairs, Government of India, academia and civil society organisations.



FISD aims to harness the full potential and synergy between science and technology, diplomacy, foreign policy and development cooperation in order to meet India’s development and security needs. It is also engaged in strengthening India’s engagement with the international system and on key global issues involving science and technology.



As part of its work programme, RIS has been deeply involved in strengthening economic integration in the South Asia region. In this context, the role of the South Asia Centre for Policy Studies (SACEPS) is very important. SACEPS is a network organisation engaged in addressing regional issues of common concerns in South Asia.



Knowledge generated endogenously among the Southern partners can help in consolidation of stronger common issues at different global policy fora. The purpose of NeST is to provide a global platform for Southern Think-Tanks for collaboratively generating, systematising, consolidating and sharing knowledge on South South Cooperation approaches for international development.



DST-Satellite Centre for Policy Research on STI Diplomacy at RIS aims to advance policy research at the intersection of science, technology, innovation (STI) and diplomacy, in alignment with India’s developmental priorities and foreign policy objectives.