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

Ayush's readiness for Global Trade based on Global Rules

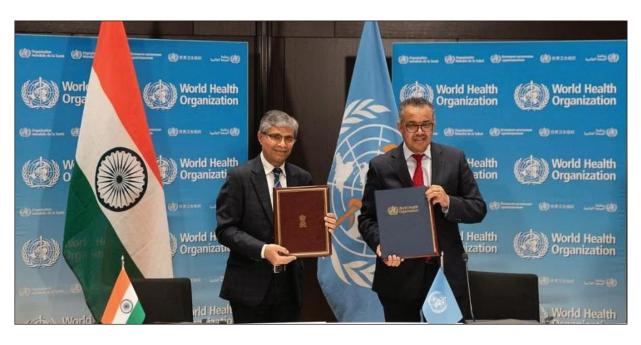
he Gujarat Declaration (Aug 2023) and the WHO Traditional, Complementary & Integrative Medicine (TCIM) Strategy 2025–2034 are important events in relation to Ayush. They resonate the foundational requirements for building trust and credibility within the global community of regulators, health systems and buyers, by marking out governance, data and quality points that can shape the same. In simpler terms, they underline that evidence, standards and measurement are what would singularly define the market moving ahead.

The Gujarat Declaration exhorts countries and partners to (i) scale up evidence and research—including setting up research chairs and repositories—and (ii) to standardize data collection on safety, effectiveness and economics, emphasizing that ICD-11 coding would constitute the language for tracking TCIM implementation and impact. It further articulates the need for inclusive methods that are capable of evaluating complex, individualized interventions involving TCIM (rather than limiting to single-molecule trials). It emphasizes that a holistic infrastructure needs to be created to understand and substantiate how and what within TCIM works, for whom does it work, and at what cost does it work.

This roadmap is boosted further by the WHO Strategy which lays down a 10-year policy frame spelt out as "universal access to safe, effective, people-centred and sustainable TCIM" and its integration with Universal Health Coverage (UHC). This is anticipated to imapact national regulation, workforce, research, and digital reporting. This was tabled through the WHO Executive Board for adoption at the World Health Assembly (WHA-78) in May 2025—which duly endorsed it. This endorsement, in turn, facilitates ministries, regulators and consumers the provision of a multilateral agreement to apportion budgets for standards, creation and strengthening of registries and evaluation mechanisms.

The importance of ICD-11

A recurring challenge that has been encountered in exporting Ayush products and services has been the issue of non-comparability, owing to different terminologies, clinical records and claims



frameworks being used across countries of the globe. The International Classification of Diseases 11th revision (ICD-11) aims to resolve this. The classification now includes a supplementary Traditional Medicine (TM) chapter that helps in dual coding by linking TM diagnoses with conventional codes so that outcomes, safety and utilization can be assessed within the same datasets. Until recently, this chapter (TM1) covered East Asian systems of TM only. In 2025 WHO released the ICD-11 update acknowledging a new module covering Ayurveda, Siddha and Unani, with India's Ministry of Ayush showcasing and disseminating widely the announcement and its policy significance with respect to mechanisms such as data interoperability, health-system reporting etc. As far as exporters and providers are concerned, dual coding would means that they could be visible in hospital data, insurance claims as well as analyses carried out on population health analytics. These are critical preconditions for financial coverage, contracting and scale.

The Global Traditional Medicine Centre in Jamnagar

India has also made additional infrastructural investments. The Global Traditional Medicine Centre (GTMC) in Jamnagar is a WHO HQ department outposted to India, backed by a multi-year Govt. of India commitment (≈US\$250 million) for land, infrastructure and operations.

This can channelize reference datasets, training and several kinds of methods that partner countries could reuse. It also augments the credibility

of India when it communicates fellow member nations to adopt WHO benchmarks or share data. The GTMC is anticipated to provide open, reproducible data on safety and outcomes, thereby having a major impact on global trade of Ayush and TM products and services.



Consecrating within India's industry and trade global needs

WHO's Benchmarks for training in Ayurveda (2022) define minimum training requirements and safety competencies. This provides a reliable criteria for partner Universities and institutions globally, to recognize Ayurveda practitioners and programs who are linked with Indian programs that adhere transparently to these benchmarks. This will provide a major fillip to Ayurveda service exports.

Continued on page 8











Country Focus

Malaysia





Recognition and scope

Malaysia legally recognizes Traditional & Complementary Medicine (T&CM) . It has its own indigenous system of medicine —Traditional Malay Medicine (TMM). TMM is based on spiritualist, Hindu and Islamic traditions; and services provided through the same may involve rituals, physical techniques such as massage and bone-setting, and medicines / medicinal formulations that are derived from plants, animals and minerals. There are a community of practitioners within this system who hold expert knowledge in women's health, men's health, or regional traditional herbal medicine disciplines such as Jamu.

Traditional Medicine service delivery

Healthcare services of TMM are primarily provided by Traditional Malay healers through their homes or centres or hospitals. The government has integrated TMM in its hospitals where its scope remains limited to Malay Massage and Malay Postnatal Treatment. On the other hand, services that are offered by traditional Malay healers in their homes or individual centres comprise of more holistic interventions targeting a range of mystical, non-mystical and clinically diagnosed illness. The secondary providers for TMM include pharmaceutical companies insurance companies. The National Pharmaceutical Control Bureau of Malaysia regulates the Pharmaceutical companies. Though Insurance companies in Malaysia provide coverage for traditional medicine, including TMM, the coverage exists for a very limited amount and is applicable for services that are offered by certified traditional medical practitioners and centres only.

Governance and policy

The Traditional and Complementary Medicine division (DTCM) located within the Ministry of Health (MOH) Malaysia, assumes the regulatory role with respect to TMM and TCM, and works with different stakeholders such as the Ministry of Higher Education (MoHE), Malaysian Qualifications Agency (MQA) and the Ministry of Human Resources towards developing T&CM education and skills training. On 11 January 2006, a proposal by the Ministry of Health (MOH) recommending the establishment of T&CM units at MOH hospitals, was accepted by the Malaysian Cabinet. The objective was to integrate selected T&CM practices into the national health-care system.

Regulatory jurisdiction

Under a specific Act - Act 775, the Traditional & Complementary Medicine Council (T&CM Council) has disciplinary jurisdiction over all T&CM practitioners who are registered with the council. It may act in instances where a registered practitioner: (a) has conducted himself in such a manner as to bring the profession into disrepute; (b) has failed to comply with mandatory practice standards in governance and practice codes; (c) is alleged to have committed serious professional misconduct as stipulated in the code of professional conduct and other guidelines/directives issued by the Council; or (d) has obtained registration by fraud or misrepresentation.

Administration, infrastructure, **R&D** and clinical trials

The Ministry of Health Malaysia, MoHE, MQA, and Ministry of Human Resources comprise the administrative/technical structure for T&CM in Malaysia. The National Institute of Health for Traditional Medicine (NIHTM) leads Traditional Medicine R&D within the country. The GMP certified facilities ensure quality production of medicines and sales of the same is achieved through licensed pharmacies, online platforms, and clinics. For R&D, the pathway begins with consultation (NIHTM or DCTM), Medical Research and Ethics Committee (MREC) approval, a research plan, and data analysis and dissemination. T&CM

clinical trials involve MOH, Drug Control Authority (DCA), MREC, DTCM, and National Pharmaceutical Regulatory Agency (NPRA), moving through pre-submission, regulatory review, conduct, analysis, and dissemination as per specified approvals.

Raw material procurement

Herbs classified forms: into two extemporaneous traditional preparations, which are directly prescribed and dispensed as raw and/ or dried medicinal herbs by T&CM practitioners; and herbal products, which are processed and distributed through pharmaceutical companies for treatment purposes. The former is exempt from registration requirements while the latter is subject to GMP requirements, approval and registration regulations.

Import and Export

The import of traditional medicines and OTC products in Malaysia is governed by the Sale of Food and Drugs Ordinance under MOH. All products must be registered and must adhere to specified regulations. For herbal trade, the National Pharmaceutical Control Bureau oversees the distinct processes in relation to activities such as entrepôt trade, repackaging and exporting, with destinations mainly in the USA, Europe, Japan, China, and the Middle East.

Product categories in trade include flavour and fragrance compositions, essential oils and natural extracts, and aroma chemicals. The essential market requirements comprise of carbon-cycle records, industry standards and official endorsement. Plant extracts are used in the food and fragrance industries for the U.S. commercial markets while in the pharmaceutical industry extracts are used for flavourings and palatability. The expectation of markets is of ultra-clean, verifiable, high-quality products, reliable suppliers and competitive prices.

(Source: Ayushexcil)

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(Concise Updates)



Kerala Designated as Nodal State for Ayush Sector

(Times of India, September 18, 2025)

The designation of Kerala as the nodal state in Ayush sector is a recognition of innovative initiatives implemented in the field of information George.

Kerala was chosen as the nodal state during the fourth meeting of chief secretaries convened by NITI Aayog. This led to organization of a national workshop under Kerala's leadership. The recognition reflects the state's notable advancements in digital technology and healthcare innovation, George noted.

This designation has been accorded under the IT-enabled services subtheme within a national, NITI-Aayogsteered process. It is also important to note that Kerala is one of two nodal states (with Maharashtra) for the ITenabled digital services sub-theme under NITI Aayog's Departmental Summit process for the National AYUSH Mission. The Departmental Summit workstream has specific deliverablesstandardisation, interoperability, and a roadmap for state adoption. This is anticipated to aid the creation of a framework for standardised digital adoption across states as well as a knowledge-sharing platform. In the light of recommendations to align Ayush digital systems with National Digital Health Mission (NDHM)/ Ayushman Bharat Digital Mission (ABDM), it is hoped that field-tested insights from Kerala's facilities can be leveraged to help other states to implement interoperable Ayush digital systems.

Goa to host historic 10th Ayurveda Day on 23rd September 2025

(Pharmabiz, September 15, 2025)

The 10th Ayurveda Day will be celebrated on 23rd September, 2025 at the All India Institute of Ayurveda (AIIA), Goa, marking a historic technology, declared Health Minister Veena milestone in the global promotion of traditional Indian medicine. This announcement was made by Union Minister of State (Independent Charge), Ministry of Ayush and Minister of State, Ministry of Health & Family Welfare, Shri Prataprao Jadhav,

> For the first time, Ayurveda Day will be observed on a fixed calendar date—23rd September-departing from the earlier practice of aligning the celebration with Dhanvantari Jayanti. The main event being hosted at AIIA, Goa, further underlines the state's emergence as a global wellness destination.

> Highlighting the importance of the occasion, Shri Prataprao Jadhav said: "Goa provides the perfect global stage for Ayurveda Day. With its international outlook and deep roots in wellness, Goa will amplify this year's theme - 'Ayurveda for People & Planet'. We are not just celebrating a tradition; we are taking Ayurveda to the world as a sustainable solution for modern healthcare challenges."

The decision to have a fixed day every year, from the previous year, dedicated for the Ayurveda Day celebration is an important step to facilitate international coordination through Missions and partners, state-level planning and potential annual review. Also the fact that Goa has a strong tourism infrastructure helps it to showcase a tag of a global wellness hub by hosting the event. In addition, the host institution, AIIA Goa, gains the advantage of opportunity to highlight itself as a nationally significant institution for academics, research and collaborations.

Patanjali and the Defence Ministry sign historic MoU to offer free Ayush treatment to 6 million exservicemen

(Times of India, September 2, 2025)

In a one-of-a-kind initiative, the Department of Ex-Servicemen Welfare and Patanjali Yoggram signed a historic agreement under the Ex-Servicemen Contributory Health Scheme (ECHS). With this agreement, ex-servicemen and their families will now avail free health services at Patanjali from yoga, Ayurveda, and naturopathy, without any cost constraint. A total of almost 6 million beneficiaries are likely to benefit from this move.

Addressing the audience at Patanjali University's Mini Auditorium, Swami Ramdev mentioned that saints and soldiers alike give their lives to serve the country in their own capacities. He thanked the Indian Army and stressed that this commitment must also be made by regular-duty soldiers.

Currently, ECHCS provides healthcare through its CGHS network of healthcare facilities, benefitting close to 63 lakh beneficiaries. It has standing policies for Ayush care. Ayush hospitals which are empanelled under the CGHS are also by default deemed as empanelled under ECHCS. The empanelment of Patanjali hospitals/centres creates an additional set of access points of Ayush healthcare for the beneficiaries across the country, potentially providing enhanced quality care from the private sector at public sector prices.

DEPwD and Ministry of Ayush Join Hands to Promote Integrative **Rehabilitation for Persons with Disabilities**

(Press Information Bureau, September 18, 2025)

In a significant step towards integrating traditional Indian healing practices with modern disability rehabilitation, the Department of Empowerment of Persons with Disabilities (DEPwD), under the Ministry of Social Justice and Empowerment, has approved a series of collaborative research projects with the Ministry of Ayush. These initiatives focus on leveraging Ayurveda, Yoga, Naturopathy, Unani, Siddha, and Homeopathy to enhance the quality of life for persons with disabilities (PwDs), including those with neurodiversity, blood disorders, hearing impairments, physical disabilities, and age-related conditions.

The approvals were granted during the 19th Governing Body Meeting of the National Fund for Persons with Disabilities, chaired by Shri Rajesh Aggarwal, Secretary, DEPwD. Emphasizing holistic and evidence- based approaches, the projects aim to bridge research gaps, promote integrative therapies, and foster inclusive wellbeing for PwDs across India.

Editorial

Ayush Medical Value Travel

ndia has quietly established the prerequisites for legitimate Ayush Medical Travel over the last two years, including accreditation requirements for Ayush hospitals, a secure invite/extension system, an official one-stop portal, and a dedicated visa.

On July 27, 2023, India established a distinct category for Ayush Visas, which includes four subcategories: AY-1, AY-2, e-Ayush, and e-Ayush Attendant. As of December 4, 2024, the government had granted 221 e-Ayush visas, 17 e-Ayush attendant visas, and 123 regular Ayush visas. On August 17, 2023, the Ministry of Health and Family Welfare unveiled the government's own MVT gateway, Advantage Healthcare India, a one-stop digital portal for workforce and patient mobility.

The Ministry of Home Affairs' Medical & Ayush Visa Portal is operational. It enables wellness centers and registered hospitals to create invitation letters and extension letters for medical/Ayush visas, including for medical/Ayush attendants.

To nurture collaboration between states, industry, and providers together around a common playbook, the Ministry of Ayush organized two regional Ayush MVT summits: the Western Zone (Mumbai, September 2024) and the Southern Zone (Chennai, May 2025).

In a recent parliamentary response provided by the Ministry of Tourism, Foreign Tourist Arrivals (FTAs) were around 1,31,856 for medical purposes between January and April of 2025, or roughly 4.1% of all FTAs during that time. Additionally, it lists the following numbers of FTAs for the preceding five years: 1,82,945 in 2020; 3,23,748 in 2021; 4,74,798 in 2022; 6,59,356 in 2023; and 6,44,387 in 2024. The Ministry in the same response further pointed out that citizens of 171 countries were eligible for e-medical and e-medical attendant visas.

The Accreditation Standards for Ayush Hospitals that were published by the National Accreditation Board of Hospitals and Healthcare Providers (NABH) in September 2024 systematically organizes the dimensions such as patient care, continuum of care, management of drugs, governance and quality standards across all Ayush institutions. Hence, to spur faith in the quality of services under Ayush MVT, any institution or healthcare facility that is inviting international patients, must adhere to NABH norms, as a baseline prerequisite.

A facility that is authorized to send invitations or letters of extension, should be able to generate clean and comparable episode data, that is inclusive of diagnosis, protocols that were employed, length of stay of the national, any adverse events that occurred, and a record of a 30- or 90-day follow-up, which can enable the auditing of testimonies. This journey of data generation and documentation should commence with the registration at the MHA Visa Portal. Operational speed will offer a competitive advantage. This should be achieved by state health/Ayush departments leveraging the roadmaps laid down by the zonal-summits to enable the flow of onboarding through a single-window which covers MHA-portal registration, NABH-readiness for Ayush hospitals, and a state register that links accredited beds to the Advantage Healthcare India portal. The global demand for Ayush based medical care has risen up again Post-Covid and a visa system that facilitates its fulfilment is also in place. Cashless packages should be encouraged through NABH accredited hospitals and all relevant outcomes that can support claims should be captured.

Continued from page 3

This is significant because it provides a formal research opening for Ayush within mainstream rehabilitation medicine and habitation services for PwDs. By carrying out important projects/research within National Institutes, the findings/outcomes could potentially aid in the creation of Integrative multi-modal Standard Treatment Protocols, the quality of evidence generation. Given that these National Institutes are located in different regions of the nation, It could also possibly facilitate the scaling up of integrative rehabilitation at a regional level through the outreach networks of each of these institutions.

Hamdard Laboratories hosts Unani Summit 2025 in Mumbai to explore research avenues to address India's NCDs

(Pharmabiz, September 18, 2025)

Hamdard Laboratories, India's leading health and wellness company, hosted the Unani Summit 2025 in Mumbai recently. The summit brought together leading Unani doctors, researchers, and industry experts to exchange knowledge and explore the role of Unani medicine in preventive and sustainable healthcare.

The event was organized in collaboration with leading Unani medical colleges from across Maharashtra, including institutions in Mumbai, Pune, Jalgaon, Aurangabad, Malegaon,

and Nashik, the summit showcased the broad academic and clinical footprint of Unani medicine in the region. The summit was part of Hamdard Laboratories' larger national initiative to promote the integration of Unani medicine into India's healthcare system, said the company.

The summit featured in-depth scientific sessions that delved into how Unani medicine addresses today's pressing health challenges. Experts discussed the conceptualization and management of pain, the role of Unani therapies in fatty liver disease, and approaches for managing diabetes mellitus all from the perspective of integrating traditional wisdom with contemporary medical research.

The push and promotion for evidencebased Unani Medicine within the national healthcare system enhance access to Ayush healthcare services, especially in underserved areas. In regions and states of the country where Unani Medicine has a historical presence and social legitimacy, this can help in enhancing cultural acceptability. From a Public Health point of view, India's morbidity challenges are primarily skewing towards the rising burden of NCDs. The National Health Policy of 2017 has advocated for the integration of the Ayush systems of medicine within the mainstream healthcare delivery framework. Initiatives such as the one promoted by Hamdard is in alignment with this policy vision.

JIPMER not yet shelved dual course on medical degree, forms internal panel

(New Indian Express, September 19, 2025)

The Jawaharlal Institute of Postgraduate Medical Education and Research (JIPMER) in Puducherry may have announced putting on hold the proposed dual degree medical course combining MBBS and BAMS courses but has not shelved it.

Instead, JIPMER has formed internal committees to evaluate the proposal, prepared by the Auroville Foundation and announced by Union Minister of State for Health and Family Welfare and Ayush, Prataprao Jadhav, on May 27.

It will also seek the opinion of major stakeholders, including medical teachers, students, parents, and the National Medical Commission (NMC) who were earlier kept out of the loop.

Any dual degree would mandatorily require a well-defined, formally approved framework across the National Medical Council (NMC) and the National Commission for Indian Systems of Medicine (NCISM), the regulatory boards for the standards and curriculum of MBBS and Ayush education respectively and cannot merely lie within the scope of an internal institute decision. Given that JIPMER is an Institute of National Importance, if accorded formal approval, a dual degree program that has been piloted there could possibly pave the way for several other pilots across the country as well as changes in curriculum and licensing of practice in the long run.

Event Info

Departmental Summit on National Ayush Mission (NAM)



he Ministry of Ayush had organized a two-day Departmental Summit titled "National Ayush Mission and Capacity Building in States" on the 3rd and 4th of September 2025 at the All India Institute of Ayurveda (AIIA), Sarita Vihar, New Delhi. The summit was chaired by Shri Prataprao Jadhav, Union Minister of State (Independent Charge), Ministry of Ayush and Minister of State for Health & Family Welfare, in the esteemed presence of Dr. V. K. Paul, Member (Health), NITI Aayog, and Vaidya Rajesh Kotecha, Secretary, Ministry of Ayush.

In his inaugural address, Shri Jadhav highlighted the transformative impact of the National Ayush Mission (NAM) in expanding affordable and inclusive Ayush healthcare services under the visionary leadership of the Hon'ble Prime Minister. He also inaugurated two key facilities at AIIA: a Project Management Unit (PMU) for assisting the public with insurance claims, and an Advanced Centre for Ayurveda Digital Learning and Communications, aimed

at enhancing capacity building, professional development, and digital innovation in the sector.

Dr. V. K. Paul emphasized the importance of synergy between the National Health Mission (NHM) and the National Ayush Mission (NAM) to improve national health outcomes and stressed the importance of collaborative action between the Centre and States.

The summit focused on providing a platform for detailed discussions on state-specific notes and feedback notes received from State/UT officials, including grassroots-level inputs. This kind of a participatory approach was intended to strengthen and strategically expand the National Ayush Mission (NAM)—a flagship program that promotes holistic healthcare by integrating Ayurveda, Yoga & Naturopathy, Unani, Siddha, Sowa Rigpa and Homeopathy systems.

The summit was the final event in a series of six thematic summits emphasized by the Prime Minister during the 4th Chief Secretaries' Conference in 2025. These summits, spanning across the year, bring together officers from the

Central Government and all States and Union Territories for focused deliberations on key themes, encouraging participation across all levels, including junior officers, to enhance capacity building.

The summit featured keynote addresses and expert insights from renowned dignitaries and professionals, including Shri Hoveyda Abbas, Additional Secretary and Financial Adviser, Ministry of Ayush and Ministry of Health & Family Welfare; Ms. Indrani Kaushal, Senior Economic Adviser, MoHFW; Dr. B. N. Gangadhar, Former Chairman of the National Medical Commission; Dr. R. Balasubramaniam, Member of the Capacity Building Commission; Dr. V. M. Katoch, Former Director General of ICMR; Shri Rajiv Vasudevan, Managing Director and CEO of AyurVAID Hospitals; Dr. J.L.N. Sastry from Dabur Research and Development Centre; Shri Ranjit Puranik, Managing Director of Shree Dhootapapeshwar Ltd.; Shri Abhishek Singh, Director General of NIC and CEO of the India AI Mission; Professor Bejon Kumar Mishra, Chairman of the Core Group of Experts for Insurance; Dr. Bhavana Prasher, Senior Principal Scientist at the Institute of Genomics and Integrative Biology; and Shri Bhushan Patwardhan, Professor, Savitribai Phule Pune University.

The valedictory session was addressed by Vaidya Rajesh Kotecha, Secretary, Ministry of Ayush, who emphasized the need for large-scale Behaviour Change Communication and widespread lifestyle adoption rooted in Ayurveda through the Har Ghar AyurYog initiative. He urged States and UTs to bring forward innovative proposals to strengthen the National AYUSH Mission in the upcoming financial cycle, highlighting India's diversity as a key strength for developing scalable health models aligned with Viksit Bharat@2047 and the national goal of allocating 5% of GDP to health.

In line with this vision, NITI Aayog identified six thematic areas for the summits. The "National Ayush Mission and Capacity Building in States" was selected as the sixth and final theme, with the Ministry of Ayush designated as the nodal ministry, supported by the Ministry of Health & Family Welfare.

The summit witnessed intense discussions across six thematic areas, including:

- Financial Management, Monitoring & Evaluation, Project Management
- Organizational Structure Review, including HR Strengthening & Capacity Building
- Integration of Ayush with Modern Health Care Services, including Public Health Programs
- Quality Services under Ayush Facilities including Infrastructure, IPHS Standards, Healthcare Delivery
- Quality Assurance of Ayush Medicine and its Procurement System including Branding and Packaging
- IT-Enabled Digital Services in different sectors



The NITI Aayog Member (Health)'s call for synergy between the National Health Mission and NAM is significant because this highlights a political intent to shift Ayush from a position of a parallel provisioning entity to an integrated populationhealth contributor (in areas such as screening, NCD prevention, primary care etc.), for joint measurement of outcomes. The emphasis on behaviour-change communication

and lifestyle adoption through the Har Ghar AyurYog scheme, steers Ayush in the pathway of preventive, whole-ofsociety strategies.

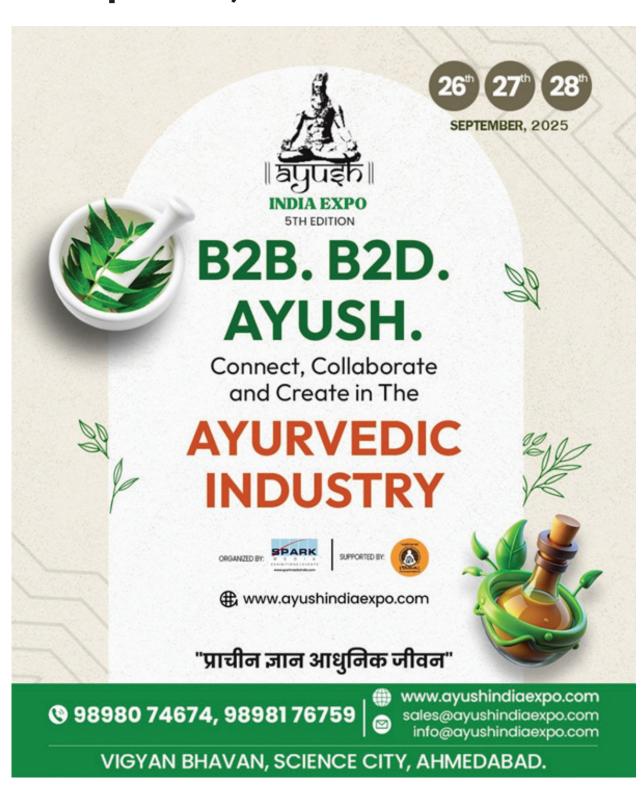
The deliberations on quality and procurement (including branding/ packaging) impact domestic and export markets. The Summit's welcome focus on these themes highlight a push by the ministry towards a compliance-oriented capacity. From

the purview of global outreach for Ayush, "IT-enabled digital services" as a sub-theme, as well as the new digital learning centre, builds a foundation for enhancing the scope of interoperable registries, supply-chain visibility, teleadvice, and scalable training. Ayush ambitions to macro health goals (Viksit Bharat@2047; 5% of GDP for health) were also firmly articulated while inviting state innovations into the next financing cycle.

Ayush India Expo 2025, Ahmedabad

ndia's largest Ayush-oriented B2B/B2D event—with specific attention to contract manufacturing, private label and sourcing, the Ayush India Expo 2025, was held from 26th - 28th September 2025, at Vigyan Bhavan, Science City, Ahmedabad. It was organized by SPARK Media and All Gujarat Ayurveda Medical Association (GAMA) with Chhattisgarh joining in as a partner state and Parul University associated as the knowledge partner. The program included national seminars and live workshops across Ayurveda, Yoga, Naturopathy, Unani and Homoeopathy, alongside free health check-ups/Panchakarma. The session themes included export promotion, quality management in Ayush, tech advances in practice, and clinical topics (related to the areas gastroenterology; infertility management). The Expo also had a broad participant and visitor profile—comprising medicine manufacturers and packaging/machinery firms to importers/ exporters and formulators.

The focus of the Expo on B2B and Private-label acts complementary to the Ministry of Ayush's own efforts towards export promotion. thematic areas of the seminars and the endeavours in the Expo were focused on addressing capacity gaps in the upstream supply chain such as productization, packaging, documentation, Quality Analysis (QA) and Quality Checks (QC). Expos such as these serve an important role of a trade facilitation node for the Ayush value-chain.



Opportunities

1. NIUM, Bengaluru advertises for multiple posts

The National Institute of Unani Medicine (NIUM), Bengaluru vide its notification dated 20.09.2025 have advertised for multiple positions in the institution, inviting applications from eligible candidates for recruitment on Direct/Deputation including short term contract basis. The last date for applying is 45 days from the promulgation of the advertisement i.e. 03.11.2025. A total of 31 positions, which are of the non-teaching cadre, have been advertised, the details of which can be found in the following link: https://www.nium. in/assets/pdf/Advt.%2001%202025%20-%20 Non-Teaching,%20Bagngalore.pdf)

2. Positions in CCRS, Chennai

The Central Council for Research in Siddha (CCRS), Chennai has called for a total of 17 positions to be filled on a contractual basis, that include the positions of Research Associate, Junior Research Fellow, Consultant and Domain expert. The last date of application is 10.10.2025. Details of the same can be found in the following link: https://siddhacouncil.com/ccrs/wp-content/ uploads/2025/05/1 Advt-No-1-of-2025-IMR-Website-Upload.pdf?utm

3. Positions in MDNIY, New Delhi

The Morarji Desai National Institute for Yoga (MDNIY), New Delhi has called in applications for contractual/short-term basis recruitments for the post of Yoga instructors. The walkin-Interview for the same would be held on 06.10.2025 at the Institute. Details of the advertisement are available on the following link : https://www.yogamdniy.nic.in/files/vacancy/ vacancy_68d64ec0579e91758875328.pdf

Firm Profile

LIIMRA (U & A) Remedies

In a world where people are returning to natural remedies and herbal healthcare, LIIMRA (U & A) Remedies has emerged as a leader in innovative Unani medicine. With its head office in Delhi and a modern GMP-certified manufacturing facility in Faridabad, the company has combined the heritage of Unani medicine with contemporary innovation, making it more accessible and relevant for today's generation.

Founded with a clear mission to preserve the essence of Unani medicine while modernizing its dosage forms, LIIMRA (U&A) Remedies has become a name synonymous with quality, authenticity, and innovation.

Philosophy: Innovation within **Tradition**

For centuries, Unani medicine has offered holistic healing through syrups, powders, and oils. But LIIMRA (U&A) Remedies recognized that to thrive in today's fast-paced lifestyle, these remedies must evolve into convenient, hygienic, and attractive formats.

The company's guiding principle is simple: "Innovation in Form, Purity in Substance." While the essence of Unani wisdom is carefully preserved, the dosage forms are modernized for better compliance and global acceptance.

Innovative Product Portfolio

One of LIIMRA (U&A) Remedies' strongest achievements lies in its range of innovative products, many of which are first-of-their-kind in the Unani industry:

- Dip-Dip Joshanda (Tea-Bag Form) A classical Unani decoction transformed into a modern tea-bag format, making it convenient, quick, and travel-friendly.
- Muqavvi Badan Chocolate-Coated Granules - A revolutionary concept blending taste with health, ensuring children and adults alike enjoy Unani vitality in a delicious form.
- Mohazzil Khas Granules A specialized formulation for weight management and lifestyle balance.
- Roghan Shugartune An innovative Unani oil supporting diabetic care and related complications.
- Neemfair Ointment A natural skin-care ointment based on Neem for acne, pimples, and blemishes, promoting safe and herbal skincare.
- Neemfair Unani Medicated Soap (Glycerine Base) - A first step towards therapeutic hygiene products, combining Unani herbs with the softness of glycerine.
- Husn-e-Yusuf Range (Cream / Gel / Soap / Face Pack) - A flagship skincare line, based on a legendary Unani beauty formulation, adapted into multiple consumer friendly formats.
- Aanisah Leuko Capsules A capsule based remedy focusing on women's health, especially leucorrhoea and related conditions.

This diversified product line reflects LIIMRA's focus on lifestyle health, women's care, immunity, and natural beauty.



Quality and Compliance

Every product is developed under Good Manufacturing Practices (GMP) with adherence to both the Drugs & Cosmetics Act and the Drugs and Magic Remedies Act. From raw herb selection to advanced packaging, LIIMRA ensures purity, safety, and efficacy at every step.

The Faridabad manufacturing unit uses modern machinery, blending age old knowledge with 21stcentury pharmaceutical standards, while the Delhi head office serves as the hub for strategy, branding, and outreach.

Leadership: Mohammed Jalees

Behind the company's success is Mr. Mohammed Jalees, a visionary entrepreneur who believes that Unani medicine can only grow if it adapts to the needs of modern consumers. His leadership has made LIIMRA a recognized name in national and international exhibitions, International Trade fair, including World Food India, where its innovative products received wide appreciation.

Mr. Jalees has also been recognized personally for his contribution to Unani medicine, receiving leadership awards that honor his dedication to taking Unani innovation to the global stage.

Awards and Recognition

Over the years, LIIMRA (U&A) REMEDIES has earned prestigious awards, reflecting its leadership in innovation and excellence. They include:

- Health Care Icon Award 2024 Presented to Mr. Mohammed Jalees for his outstanding contribution to the healthcare sector.
- Herbal Excellence in Skincare Award For the product Husn-e-Yusuf, recognizing its impact as a natural beauty solution.

- Popular Brand of 2024 Award Organized by Eminent Research, highlighting LIIMRA's growing consumer trust.
- Innovative Forms of Unani Medicine Award - Recognizing LIIMRA's breakthroughs like tea-bag Joshanda, chocolate-coated Muqavvi Badan, and granulated formulations.
- Heritage Skincare Award For the product Husn-e-Yusuf, celebrating the adaptation of a classical beauty secret into a modern skincare

These recognitions showcase LIIMRA's ability to honor Unani heritage while pioneering innovation.

Research and Development

LIIMRA invests heavily in research and development, ensuring its products are not only authentic but also scientifically validated and consumer friendly. The company focuses on:

Granules and capsules for better compliance

Topical applications like ointments and gels for skincare and dermatology

Functional hygiene products such as glycerine based medicated soaps

Specialized health categories like women's health, weight management, and metabolic health

This R&D driven approach keeps LIIMRA ahead in the Unani innovation race.

Contribution to the Industry

As an active member of the Unani Drug Manufacturers Association (UDMA), LIIMRA (U&A) Remedies also plays a role in shaping the future of the Unani industry. By participating in conferences, workshops, and exhibitions, the



company helps increase awareness, acceptance, and recognition of Unani medicine at both national and global levels.

Future Outlook

Looking forward, LIIMRA (U&A) Remedies aims to:

- 1. Expand exports to introduce its innovative Unani products to global markets.
- Launch more proprietary formulations addressing lifestyle, immunity, and women's health.
- 3. Collaborate with academic and research institutions for clinical studies and validation.
- 4. Strengthen consumer awareness through branding, digital platforms, and wellness campaigns.

Conclusion

LIIMRA (U&A) Remedies stands as a symbol of how heritage and innovation can blend seamlessly. By introducing innovative products, the company has taken Unani medicine into the modern era. With its Faridabad manufacturing base, Delhi head office, strong leadership, and award winning innovations, LIIMRA (U&A) Remedies is not only keeping the Unani tradition alive but also ensuring it reaches new heights in global healthcare.

As the demand for natural remedies grows worldwide, LIIMRA (U&A) Remedies is wellpositioned to lead a Unani renaissance, proving that this ancient system of medicine can thrive in the modern world.



Continued from page 1

With the ICD-11 dual coding now in force for Ayurveda, Siddha and Unani (ASU) conditions, Ayush facilities need to look into upgrading their Electronic Medical Records (EMR) templates, discharge summaries and registries to capture TM and conventional codes together. This would be important to demonstrate safety, outcomes and cost benefits within same datasets of conventional care creating an ease for payers and public health managers for carrying out pilots in relation to coverage. The advantage of the dual coding arrangement should also be juxtaposed upon the Medical Value Travel (MVT) segment facilitated through the Ayush Visa. Accredited centres must be encouraged to adhere to dual coding so that evidence-based outcomes of groups or cohorts of patients over a period of time can be generated. Such policy-related evidence can positively influence insurers and state health schemes.

translated to the Ayush industry, this would pan WHO strategy espouses that integration should be

out to designing pragmatic trials, embedding studies within relevant registries and post-market surveillance that is aligned with ICD-11 and national pharmacovigilance standards.

Impact on providers and exporters

To begin with, documentation would become a critical determinant. Buyers and regulators would be keen to prioritize firms which produce WHO-GMP/quality alignment and ICD-aware safety/outcomes data. While building regionspecific dossiers such as for ASEAN, Middle-East, EU or Africa, the pairing of pharmacopoeial specifications and stability data with ICD-coded Real World Evidence from pilots that have been carried out in India or partner countries would be extremely beneficial. The Declaration's call for research repositories and the strategy's emphasis on UHC-aligned monitoring can cause a bloom in the creation of such repositories or 'data rooms'. It is The Gujarat Declaration calls for inclusive to be understood that TM coding in itself does not will routinely produce clean data, benchmarked methods and repositories as well as a strategy of amount to any form of an endorsement of efficacy training and compliant products, global market routine monitoring inside health systems. When but rather a tool for counting and comparison. The access will become a norm.

firmly rooted in patient safety, equity and ethics.

Given that India now has a major convening power with the presence of the GTMC, this should be leveraged to host multi-site registries along with counterparts from different regions, that would publish display positive as well as negative outcomes/data in a transparent fashion collectively. This promotes confidence within regulators and enables more quicker and easier decisions with respect to coverage.

Conclusion

It is to be understood that TM coding in itself does not amount to any form of an endorsement of efficacy but rather a tool for counting and comparison. The WHO strategy espouses that integration should be firmly rooted in patient safety, equity and ethics. If India's AYUSH ecosystem taps into the tools enabled by the Gujarat Declaration and the WHO strategy to create an ecosystem that







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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" (दिशिण) 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.