



Editorial

Safety as Paramount Issue in Health Care—as Ayurveda Recounts

Like any other Indian science and knowledge, Ayurveda—the art and science of life and living has its origin from the ‘Vedas’, the authentic documentary testimonies built through tools and plans. This documentary evidences embodied scientific knowledge is the outcome of scientific research conducted through appropriate approaches viz. “Pramanas” that make them authentic and reproducible. The major approaches comprise Aptopadesha (documented testimony) Pratyaksha (direct clinical evidence), Anumana (logical inference drawn out of results) and Yukti (reproducible evidence generated through well designed multi dimensional approach) Ayurveda classics define medicine as any substance that should only pacify the diseases and should never cause any adverse effects. It also documented certain possible adverse effects that are attributable to non-adherence to the basic principles of Ayurveda. This grossly reflects the undercurrent safety and ethical issues embodied in Ayurvedic literature.



The health care systems across the globe are dominated by conventional medicine that focus on disease management rather than health promotion and prevention, probably to sustain the market of medicines manufactured by industries. While Ayurveda and other traditional Indian health care system focus on prevention and health promotion with certain approaches that would certainly reduce the health burden; the efficacy, safety and rational use of which has been demonstrated through their time tested use.

The global traditional knowledge including health care systems is mostly based on undocumented and oral traditions, whereas, Ayurveda and Indian traditional knowledge and its reproducible outcomes are based on documented evidences such as Vedas, Upanishads and Samhitas which are still valid.

The current regulations notified through Rule 158 (B) of Drug & Cosmetic Act specified certain requirements of quality, safety and efficacy of classical as well as proprietary new Ayurveda formulations. These regulations clearly indicate that safety and proof of effectiveness studies are not required for classical formulations before its clinical use.

However, in view of certain articles published through international media/press are creating misconceptions across the stakeholders. The council has initiated generating scientific evidence of clinical safety and efficacy of classical Ayurveda formulations through well designed multicentre clinical studies. So far, this council has generated evidence on clinical safety and efficacy of about 80 classical Ayurveda formulations, while studies on about 40 formulations are being taken up. The outcome of these completed studies has demonstrated clinical safety of these formulations in terms of clinical as well as laboratory parameters as deemed. The current issue focuses on six articles on classical formulations used on 6 diseases/conditions viz. Anaemia, Obesity, Dyslipidemia, Gynaecological disorders, Rheumatoid Arthritis, Geriatric health etc. while the forth coming issue will focus on certain more evidences and safety based clinical studies for wider utility of academicians, clinicians and researchers.

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Journal of Research in Ayurvedic Sciences

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