Traditional Systems of Medicine- Now & Forever

Corresponding Author:
Mr. Rajeev K Singla,  
Assistant Professor & Vice Principal, Sadbhavna College of Management & Technology, Raikot, 124001 - India

Submitting Author:
Mr. Rajeev K Singla,  
Assistant Professor & Vice Principal, Sadbhavna College of Management & Technology, Raikot, 124001 - India

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Introduction

India has a rich heritage of traditional medicine and the traditional health care system have been flourishing for many centuries. traditional medicine, defined by the WHO as "medical knowledge systems that developed over generations within various societies before the era of modern medicine, including the health practices, approaches, knowledge and beliefs incorporating plant, animal and mineral-based medicines, spiritual therapies, manual techniques and exercises, applied singularly or in combination to treat, diagnose and prevent illnesses or maintain well-being" is used globally and has rapidly growing economic importance. In developing countries, traditional medicine is often the only accessible and affordable treatment available. In Latin America, the WHO regional office for the Americas (AMRO/PAHO) reports that 71% of the population in Chile and 40% of the population in Colombia has used traditional medicine. In many Asian countries traditional medicine is widely used, even though western medicine is often readily available. In Japan, 60-70% of allopathic doctors prescribe traditional medicines for their patients. In the US the number of visits to providers of complementary alternative medicine (CAM, codified herbal medicine) now exceeds by far the number of visits to all primary care physicians.[1]

Traditional System of Medicines

Ayurveda

Ayurvedic medicine is a system of traditional medicine native to the Indian subcontinent and practiced in other parts of the world as a form of traditional medicine. In Sanskrit, the words Ayurveda consists of the words ?yus, meaning "longevity", and veda, meaning "related to knowledge" or "science". Evolving throughout its history, Ayurveda remains an influential system of medicine in South Asia. The earliest literature on Indian medical practice appeared during the Vedic period in India. The Susruta Samhita-and the Caraka Samhita- where influential works on traditional medicine during this era. Ayurveda is considered to be a form of complementary and alternative medicine (CAM) in the western world, where several of its methods, such as the use of herbs, massage, and yoga, are applied on their own as a form of CAM treatment.[2]

Ayurveda is the ancient (before 2500 B.C.) Indian system of health care involving a holistic view of man, his health, and illness. Ayurvedic treatment of a disease consists of salubrious use of drugs, diets, and certain practices. Medicinal preparation is invariably complex mixtures, based mostly on plant products. Around 1,250 plants are cured used in various Ayurvedic preparations. Many Indian medicinal plants have come under scientific scrutiny since the middle of the nineteenth century, although in a sporadic fashion. The first significant contribution from Ayurvedic materia medica came with the isolation of the hypertensive alkaloids from the sarpagandha plant (Rauwolfia serpentina), valued in Ayurveda for the treatment of hypertension, insomnia and insanity. This was the first important ancient-modern concordance in Ayurvedic plants.[3]

According to Ayurveda all objects in the universe including human body are composed of five basic elements (Panchamahabhutas) namely, earth, water, fire, air and vacuum (ether). There is a balanced condensation of these elements in different proportions to suit the needs and requirements of different structures and functions of the body matrix and its parts. The growth and development of the body matrix depends on its nutrition, i.e. on food. The food, in turn, is composed of the above five elements, which replenish or nourish the like elements of the body after the action of bio-fire (Agni). The tissues of the body are the structural whereas humours are physiological entities, derived from different combinations and permutations of Panchamahabhutas. Treatment of the disease consists in avoiding causative factors responsible for disequilibrium of the body matrix or of any of its constituent parts through the use of Panchkarma procedures, medicines, suitable diet, activity and regimen for restoring the balance and strengthening the body mechanisms to prevent or minimize future occurrence of the disease. Normally treatment measures involve use of medicines, specific diet and prescribed activity routine. Use of these three measures is done in two ways. In one approach of treatment the three measures antagonize the disease by counteracting the etiological factors and various manifestations of the disease. In the second approach
the same three measures of medicine, diet and activity are targeted to exert effects similar to the etiological factors and manifestations of the disease process. These two types of therapeutic approaches are respectively known as Vipreeta and Vipreetarthkari treatments.[4]

Siddha
Siddha system is one of the oldest systems of medicine in India. The term Siddha means achievements and Siddhars were saintly persons who achieved results in medicine. Eighteen Siddhars were said to have contributed towards the development of this medical system. Siddha literature is in Tamil and it is practiced largely in Tamil speaking part of India and abroad. The Siddha system is largely therapeutic in nature. This principles and doctrines of this system, both fundamental and applied, have a close similarity to Ayurveda, with specialization in Iatro-chemistry. According to this system the human body is the replica of the universe and so are the food and drugs irrespective of their origin. Like Ayurveda, this system believes that all objects in the universe including human body are composed of five basic elements namely, earth, water, fire, air and sky. The food, which the human body takes and the drugs it uses are all, made of these five elements. The proportion of the elements present in the drugs vary and their preponderance or otherwise is responsible for certain actions and therapeutic results. As in Ayurveda, This system also considers the human body as a conglomeration of three humours, seven basic tissues and the waste products of the body such as faeces, urine and sweat. The food is considered to be basic building material of human body which gets processed into humours, body tissues and waste products. The equilibrium of humours is considered as health and its disturbance or imbalance leads to disease or sickness. This system also deals with the concept of salvation in life. The exponents of this system consider achievement of this state is possible by medicines and meditation. The Siddha system is capable of treating all types of disease other than emergency cases. In general this system is effective in treating all types of skin problems particularly Psoriasis, STD, urinary tract infections, diseases of liver and gastro intestinal tract, general debility, postpartum anemia, diarrhoea and general fevers.[5]

Unani
Unani system of medicines originated in Greece and is based on the teachings of Hippocrates and Gallen and it developed in to an elaborate medical system by Arabs, like Rhazes, Avicenna, Al-Zahravi, Ibne-Nafis and others. Unani medicines got enriched by imbibing what was best in the contemporary systems of traditional medicines in Egypt, Syria, Iraq, Persia, India, China and other Middle East countries. In India, Unani system of medicine was introduced by Arabs and soon it took firm roots. The Delhi Sultans (rulers) provided patronage to the scholars of Unani system and even enrolled some as state employees and court physicians. During 13th and 17th century A.D. Unani medicine had its hey-day in India. During the British rule, Unani system suffered a setback due to withdrawal of State Patronage, but continued to be practiced as the masses reposed faith in the system. It was mainly Sharifi family in Delhi, the Azizi family in Lucknow and the Nizam of Hyderabad due to whose efforts Unani medicine survived during the British period. In India, the concept of research in Unani system of medicine was originally perceived by Masih-ul-Mulk Hakim Ajmal Khan in the 1920s. A versatile genius of his time, Hakim Ajmal Khan spotted Dr. Salimuzzaman Siddiqui- a chemist- for undertaking chemical studies on some important medicinal plants used in Unani Medicine. Dr. Siddiqui undertook the task visualized by Masih-ul-Mulk and his discovery of medicinal properties of a plant, commonly known as Asrol (Pagal Booti), led to sustained research that established the unique efficacy of this plant known all over the world as Rauwolfia serpentina, in neurovascular and nervous disorders, such as hypertension, insanity, schizophrenia, hysteria, insomnia and psychosomatic conditions, etc. [6]
suits a particular set of symptoms. Over the past 200 years, providing for almost 2,000 substances have been conducted.[3]

**Challenges of Traditional Medicine**

Traditional medicine has been used in some communities for thousands of years. As traditional medicine practices are adopted by new populations there are challenges.

**International diversity:**
Traditional medicine practices have been adopted in different cultures and regions without the parallel advance of international standards and methods for evaluation.

**National policy and regulation:**
Many countries have not national policies for traditional medicine. Regulating traditional medicine products, practices and practitioners is difficult due to variations in definitions and categorizations of traditional medicine therapies. A single herbal product could be defined as either a food, a dietary supplement or an herbal medicine, depending on the country. This disparity in regulations at the national level has implications for international access and distribution of products.

**Safety, effectiveness and quality:**
Scientific evidence from tests done to evaluate the safety and effectiveness of traditional medicine products and practices is limited. While evidence shows that acupuncture, some herbal medicines and some manual therapies (e.g. massage) are effective for specific conditions, further study of products and practices is needed. Requirements and methods for research and evaluation are complex. For example, it can be difficult to assess the quality of finished herbal products. The safety, effectiveness and quality of finished herbal medicine products depend on the quality of their source materials (which can include hundreds of natural constituents), and how elements are handled through production processes.

**Knowledge and sustainability:**
Herbal materials for products are collected from wild plant populations and cultivated medicinal plants. The expanding herbal product market could drive over-harvesting of plants and threaten biodiversity. Poorly managed collection and cultivation practices could lead to the extinction of endangered plant species and the destruction of natural resources. Efforts to preserve both plant populations and knowledge on how to use them for medicinal purposes is needed to sustain traditional medicine.

**Patient safety and use:**
Many people believe that because medicines are herbal (natural) or traditional they are safe (or carry no risk for harm). However, traditional medicines and practices can cause harmful, adverse reactions if the product or therapy is of poor quality, or it is taken inappropriately or in conjunction with other medicines. Increased patient awareness about safe usage is important, as well as more training, collaboration and communication among providers of traditional and other medicines.[7]

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