SWASTHYA 2021

International Webinar on Ayurveda

17:00 to 20 hrs IST, 26th February 2021

“Ayurveda in Diverse Domains of Public Health: Perspectives and Prospects”

DEPARTMENT OF AYUSH, GOVERNMENT OF KERALA
Ayurveda in Kerala is unique due to the judicious blend of indigenous practices, surviving traditions of systematic learning, and widespread acceptance of Ayurvedic principles and practice cutting across various socio-economic and cultural barriers. Several authentic Ayurvedic treatises which originated in this land are widely acknowledged and appreciated by the global ayurvedic fraternity. There are detailed descriptions of over 1500 medicinal plants and 6000 medicinal formulations in Ayurvedic treatises, and thousands of signs and symptoms for detailing and diagnosing diseases are available in Ayurvedic textbooks. Several countries have accepted the Ayurvedic legacy of Kerala and given due recognition to Kerala Ayurvedic practices in various public health domains.
Lack of definitive treatment for several chronic diseases, high cost of new medicines, antimicrobial resistance, changed lifestyle patterns and emerging trends in diseases have prompted populations in many countries to resort to complementary and alternative medicines. The average global utilisation of traditional, complementary and alternative drugs is on an upward trajectory. The utilisation of Ayurveda medicines is also quite high in India. (Global Report on Traditional and Complimentary Medicine, WHO, 2019).

Ayurveda has a personalised or individualised approach towards health and diseases, considering the individual’s genomic and epigenomic factors. Although treatment with Ayurveda is considered useful in managing chronic diseases through lifestyle interventions, and traditional approaches, application of Ayurvedic management practices in nutritional disorders and communicable diseases is also beneficial. Such an approach would supplement the efforts of the State Health Department in reaching the target laid down under Sustainable Development Goal – 3 particularly in maternal and child health. The immunogenic and prophylactic modalities of Ayurveda as stand-alone or add-on to existing therapy can be useful in the management of emerging and re-emerging infectious diseases that may pose a threat to public health.

Notwithstanding the promise that Ayurvedic management holds-out, unless evidence-based date is documented and published, integration of Ayurvedic principles and practices in public health may not be possible. Well implemented public health intervention programmes, rigorous research, data collection, and documentation are necessary for the effective utilisation of Ayurveda in our public health initiatives. Evidence-based documentation is essential to establish the core competencies of Ayurveda. An integrative and pluralistic approach that facilitates traditional medicine practices in the application of existing health care system is recognised in national and international policies on Traditional Medicine.

The present international webinar on Ayurveda titled Swasthya 2021 examines, deliberates and discusses various perspectives and prospects of Ayurveda in Public Health in the following domains

- Health and wellness
- Management of Non-Communicable Diseases
- Pain and Palliative Care
- Ageing and Health
Health is a state of complete physical and mental wellbeing and is not merely the absence of disease. Health encompasses diverse determinants of wellbeing, such as social, economic, and physical environments, along with the individual's characteristics and behaviours. Healthy sustenance and improvement of life need an active engagement from the individual coupled with positive external or environmental factors. In short, positive health is the responsibility of the self and the society, highlighted by the motto "our health our responsibility". Experts often consider "wellness" as the ways and means to attain positive health. The National Wellness Institute (NWI), Wisconsin, USA, defines wellness as "an active process through which people become aware of, and make choices toward, a more successful existence".

Ayurveda encompasses holistic principles primarily focused on personalised health. Positive health and preservation of the same is the central point of Ayurvedic therapeutic approach. Ayurveda considers life as the union of the body (Sareera), the senses (Indriya), the mind (Satwa) and the spirit (Atma). The harmonious existence of these constituents reflected as the self, or the organism is considered as the state of positive health; and disharmony qualifies as ill-health. Ayurveda has recognised health and ill-health as multifactorial entities comprising the phenome of the individual (Prakriti), the surrounding environment and the status of nourishment.

The Ayurvedic way of healthy living, balanced dietetic concepts, specific yoga and pranayama modalities, and individualised seasonal treatment regimens, are widely accepted worldwide. The brand "Kerala Ayurveda" can provide more vibrant services to the global population if organised adequately and scientifically. The Ayurvedic clinics and hospitals in Kerala can effectively function as health and wellness centres, providing personalised and seasonal advice for healthy and harmonious living.

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Confederation of Indian Industry in its report (2018) observes that the Kerala Ayurveda holds a fair share in the Indian wellness industry that accounts for USD 13.9 billion. Citizens from over 50 countries visit Kerala each year to enjoy the rejuvenating experience of Ayurvedic wellness therapies.
Although we have been able to control the burden of communicable diseases to a considerable extent, the non-communicable disease burden is rising globally. Over 40 million deaths worldwide can be attributed non-communicable diseases (Key Facts on Non-Communicable Diseases, WHO, June 2018). Unescapable side effects of socio-economic transition, relentless urbanisation process, and specific behavioural modifications such as unhealthy diet, inadequate physical activity, uncontrolled use of alcohol and tobacco abuse are contributing factors for non-communicable diseases across the globe. The impact of these risk factors is more on the low- and middle-income countries. They are also contributing to 80% of the global deaths due to NCD (Key Facts on Non-Communicable Diseases, WHO, June 2018). The financial burden attributed to the diagnosis and management of NCD is enormous, so also the number of households thrown into poverty annually in India from health-related expenditure. Many of these factors are modifiable, and the deaths arising from them are undeniably preventable. Various studies have reported that in the developing world, preventable mortality rate from NCD is twice that of infectious diseases.

Research based on Ayurveda now signifies the use of daily living activities comprising Dinacharya (the individualised dietary, exercise and behavioural modalities for the maintenance of wellbeing) and Ritucharya (modifications to the Dinacharya based on seasons) for combating lifestyle disorders. Integrating scientifically validated practices from Ayurveda and Yoga in the existing management framework of NCD could help reduce the financial burden from these ailments and maintain positive health. The ability of Ayurvedic medicines and therapies currently practised to combat NCD also need to be thoroughly evaluated.

Ayurvedic physicians use specific herbal drugs, polyherbal formulations, and other medicines to prevent and manage NCD, associated conditions, and further complications. Several projects are under implementation in the Department of AYUSH in its primary and secondary Ayurvedic facilities and Ayurveda Colleges.
Yoga to reduce physical and psychological stress and comprehensively improve fitness of mind and body is also widely practised. Sports Ayurveda is an emerging multidisciplinary field that integrates principles of sports medicine into personalised therapies of Ayurveda. Several sportspersons of national and international stature from Kerala have received the benefits of this integrative approach.

Project Jeevani is being implemented by the Department of Indian Systems of Medicine to prevent and control diabetes and associated complications using Ayurvedic therapeutic strategies (ATS), including Ayurvedic Medicines and dietary and Lifestyle modifications. The report based on a preliminary descriptive analysis comprising 407 diabetes patients who had received ATS alone or with conventional drugs during the period 2018-2019 had revealed clinically plausible results.
Palliative care aims at reducing the physical, social, and mental sufferings, and is an integral part of people-centred health care. With the motto of “leave no one behind”, palliative care provides relief to patients of all ages and even their caretakers from several distress. Whether it be end-stage cancer or senile dementia or acute trauma or lasting impacts of congenital disabilities, palliative care has become essential and inevitable.

Out of the 40 million people requiring palliative care globally, 78% live in low- and middle-income countries. Among 40 million who need substantial care, unfortunately only 14% receive any (Key Facts on Palliative Care, WHO, August 2020). Although speedy access to adequate palliative care can reduce health-related expenditure by reducing unwanted hospital admissions, valid policies, regulations, and human resources are lacking in many locations. Kerala has developed a palliative care framework, which advocates services of doctors and paramedics, pharmacists, nursing and other support workers, and volunteers for the patient, family, and caretakers. Proper integration of elements of Ayurveda and Yoga into existing palliative care practices can make it more holistic and potent. The ethical obligation of society to the terminally ill or chronically suffering patient is higher than any restrictive policy or regulation that moves against such integrative practices. The time-tested health care modalities and treatment regimens available in Ayurveda are also relevant and valid in the present health day issues, particularly in diseases or conditions that necessitate continuing pain and palliative care.

Apart from medicines, Ayurvedic physicians also use various therapeutic procedures such as Vasti (medicated enema), Snehana (massage using medicated oils), Swedana (fomentation) and others for palliative care. Ayurvedic interventions used as standalone or add-on medicines to the existing treatment regimen are beneficial in many conditions. Scientific studies have reported that the above interventions have significantly improved quality of life in several distressing disease stages. Cancer cachexia, various
neuropathies, complications arising out of chemotherapy, deterioration in tuberculosis, chronic autoimmune conditions, and different stages of degenerative and cognitive diseases are a few to mention. Ayurvedic and Yoga pain and palliative care practices are also useful in long-standing psychological stress and chronic somatic pains. Several palliative care programmes are available to the ailing from primary and secondary Ayurvedic institutions and Ayurveda colleges across Kerala. However, these services are unavailable to a larger population who genuinely need urgent and essential palliative care and chronic pain management.

The Indian Systems of Medicine department did a descriptive analysis on 1232 confirmed CVA cases selected from its Punarnava project intended for post-stroke care across the state. The study showed a substantial improvement ($P<0.001$) in post-stroke functional capabilities of the patients after the treatment compared to their baseline status assessed using the European Stroke Scale.
With the current pace of demographic transition, one in six of the world population will be over 65 years of age in 2050, accounting for 16 per cent of the total population (Key Facts on Ageing and Health, WHO, February 2019). India anticipates her elderly to be around 12% of its total population by then. Kerala has already reached similar figures, with the average life expectancy at birth in Kerala being 74.9 years (https://niti.gov.in/content/life-expectancy). The steady increase in the elderly population poses a plethora of financial and health-related issues. Rapid urbanisation, nuclearization of families and migration and shift to urban areas, other metros and foreign countries are some of the reasons for neglect in care of the elderly. Geriatric care has not developed into a full-fledged specialty either. The Indian elderly population is largely heterogeneous owing to socio-cultural diversities, geo-climatic locations and religious practices. Experts have observed that even morbidity and mortality patterns vastly vary across different strata of the elderly population.

Elderly are prone to communicable and non-communicable diseases and various abuses both physical and verbal. Nutritional inadequacies, psychological stress, trauma, different degenerative disease, and cognitive and sensory impairment also impact quality ageing. Ayurveda has specific modalities to reduce the burden of ageing, degeneration and related ailments, known as Rasayana, which includes healthy lifestyle, special diets, specific behavioural changes and specific medicines. Scientific application of Yoga and Pranayama can reduce anxiety and stress and improve physical strength in the elderly. Specific Panchakarma (cleansing therapy) and Rasayana therapies are also available for old-age cognitive impairment and neurological conditions.

The project Susmitham of Indian Systems of Medicine Department aims to reduce the burden in geriatric population arising due to cognitive deficits. The preliminary study report on Susmitham reveals statistically significant (P<o.05) regression in mild cognitive impairments in the selected age group.

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