

Research Journal of Pharmaceutical, Biological and Chemical Sciences

A Review on Traditional Medicine used in India.

Aditya Singh Vats, Piyush Yadav*, and Manoj Yadav.

Prasad Institute Of Technology, Department Of Pharmacy, Jaunpur – 222001, Uttar Pradesh, India.

ABSTRACT

Notwithstanding mind boggling propels in current science, innovation and allopathic medication a huge we can't give quality medical services to all. Customary medication especially home grown medication considered as a significant medical services supplier all throughout the planet especially in rustic and distant regions. An enormous segment of individuals relies upon such medication for their essential medical care chiefly in immature or agricultural nations. Indian customary restorative framework like Ayurveda, Siddha and Unani has an exceptionally rich history of their viability; current examination likewise recognized the significance of such medication. Indian conventional medication or therapeutic plants are additionally considered as an indispensable wellspring of new medication. Mainstreaming of such medication is significant for individuals. A few stages have been taken in India to elevate such medication and to incorporate them into clinical practice. Proof based consolidation of Indian customary medication in clinical practice will assist with giving quality medical care to all.

Keywords: Ayurveda, Siddha, Unani, Medication, Traditional medicine, Mainstreaming.

<https://doi.org/10.33887/rjpbcs/2022.13.1.15>

**Corresponding author*

INTRODUCTION

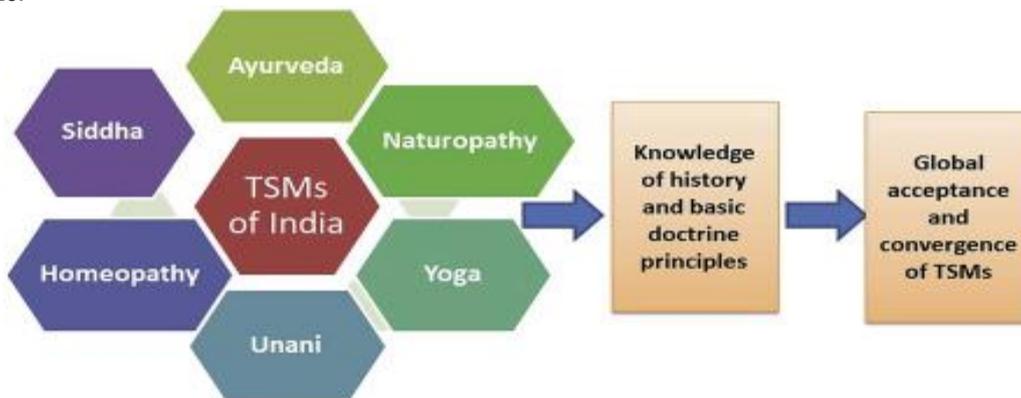
It's obviously true that Traditional Systems of meds consistently assumed significant part in gathering the worldwide medical care needs. They are proceeding to do as such as of now and will assume significant part in future moreover.

The World Health Organization (WHO) characterizes customary medication as "the aggregate of information, abilities, and practices dependent on the hypotheses, convictions, and encounters native to various societies, whether or not logical, utilized in the support of wellbeing, just as in the counteraction, analysis, improvement or treatment of physical and psychological sickness". The arrangement of prescriptions which are viewed as Indian in beginning or the frameworks of medication, which have come to India from outside and got acclimatized in to Indian culture are known as Indian Systems of Medicine.

Then again, home grown drugs "incorporate spices, natural materials, home grown arrangements and completed home grown items that contain as dynamic fixings parts of plants, or other plant materials, or blends". What's more, further, conventional utilization of home grown prescriptions "alludes to the long verifiable utilization of these drugs. Their utilization is grounded and broadly recognized to be protected and powerful, and might be acknowledged by public specialists" (WHO Report, 2017). Accordingly, customary medication (TM) incorporates natural prescriptions, yet additionally other helpful modalities just as remedial methodology.

India is a place where there is diverse gathering of individuals who have their own religion, convictions, culture, language and tongues. Along these lines, various restorative frameworks have created around here. Various therapeutic frameworks likewise presented here from outside and advanced in India. Since old time, Indian culture relies upon customary restorative frameworks rehearsed here. Presentation of allopathic medication during British period and dismissing Indian conventional medication by British ruler are liable for huge disintegration of Indian customary medication. High logical advancement in allopathic medication and present day offices likewise opposes the development of conventional medication. All things considered, around 70% provincial populaces of India are trusted in customary medication for essential medical care.

India has the interesting differentiation of having six perceived frameworks of medication in this class. They are-Ayurveda, Siddha, Unani and Yoga, Naturopathy and Homeopathy. However Homeopathy came to India in eighteenth Century, it totally absorbed in to the Indian culture and got enhanced like some other conventional framework consequently it is considered as a feature of Indian Systems of Medicine.



Ayurveda: Ayurveda is a complete logical restorative framework native to India. The term Ayurveda signifies 'information on life', which involves two Sanskrit words, Ayu (life) and Veda (information or science) [1, 2]. Most of the conventional frameworks of India including Ayurveda have their foundations in people medication. Anyway recognizes Ayurveda from different frameworks is that it has a distinct calculated system that is steady all through the ages. In applied base, it was maybe profoundly advanced and a long ways somewhat radical. It was among the primary clinical frameworks to campaigner an incorporated methodology towards issues of wellbeing and infection. What's more, other significant distinctive element of Ayurveda is that not normal for other clinical frameworks, which fostered their calculated structure dependent on the outcomes got with the utilization of medications and treatment, it

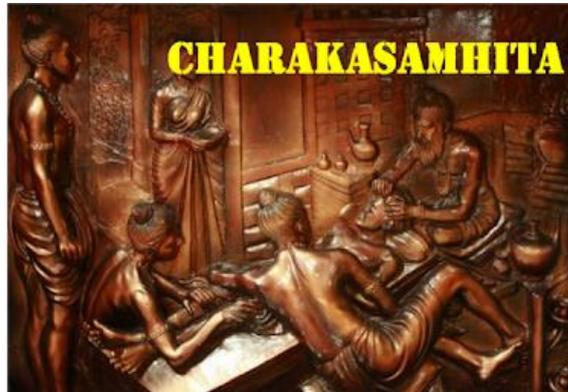
originally gave philosophical not really set in stone the restorative practice with great impacts. Its philosophical base is part of the way got from 'Samkhya' and 'Nyaya vaisheshika' floods of Indian way of thinking. This empowered it to develop into normal arrangement of medication very right off the bat in its advancement and to get separated from strict impact. It laid incredible accentuation on the worth of proof of faculties and human thinking [4].



Ayurveda system of medicine

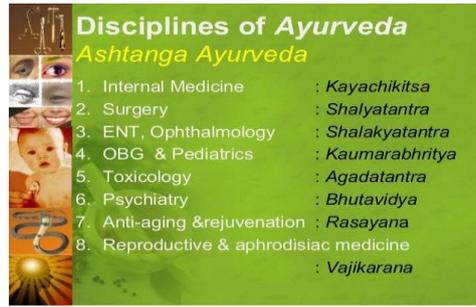
Four Vedas, considered as the most seasoned Indian writing (5000–1000 BC) contain data about normal cures. Ayurveda was set up as a completely developed therapeutic framework [1, 2]. Charaka Samhita (focussing on interior medication) and Susruta Samhita (focusing on medical procedure) were composed methodically and considered as traditional text of Ayurveda. Essential subtleties of Charaka Samhita and Susruta Samhita were agreed together and refreshed moreover in Astanga Sangraha and Astanga Hrdaya.

Some other old works of art which incorporate minor work of Ayurveda incorporates Madhava Nidana (focussing on determination of infection), Bhava Prakasa (focussing on extra data identified with plant and diet), Sarngadhara Samhita (focussing on definition and measurements structure) [1, 3].

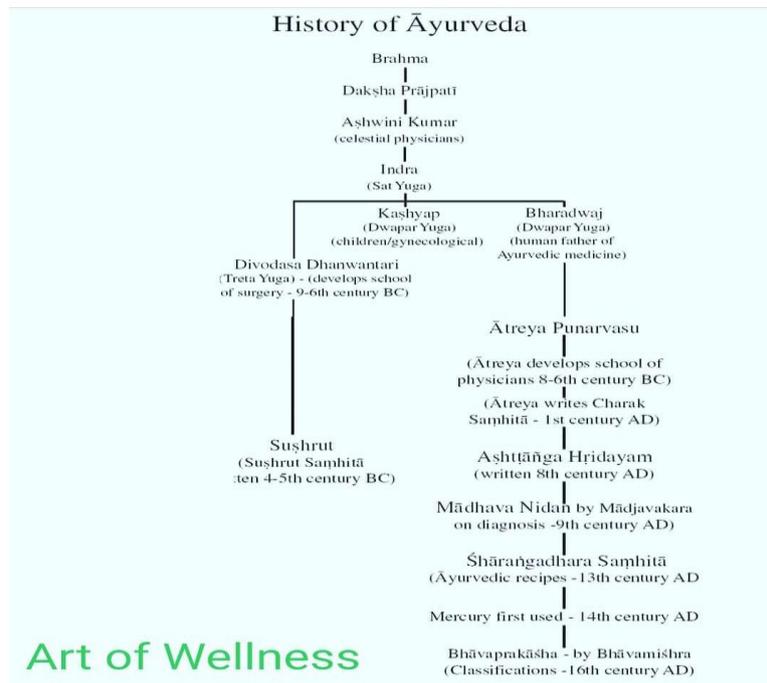


Different disciplines of Ayurveda: Ayurveda was separated into eight significant clinical regions – Kayacikitsa (interior medication), Salya Tantra (medical procedure), Salakya (illnesses of supra-clavicular beginning), Kaumarabhrtya (pediatrics, obstetrics and gynecology), Bhutavidya (psychiatry), Agada Tantra (toxicology), Rasayana Tantra (restoration and geriatrics), Vajikarana (aphrodisiology and genetic counseling) [1-3].

Ayurveda treatments have differed and advanced over two centuries. Therapie incorporate natural drugs, exceptional weight control plans, contemplation, yoga, rub, purgatives, douches, and clinical oils. Medications are typically founded on complex natural mixtures, minerals, and metal substances. Antiquated Ayurveda texts additionally showed careful methods, including rhinoplasty, kidney stone extractions, stitches, and the extraction of unfamiliar articles.



History of Ayurveda: Ayurveda in a real sense implies the Science of life. It is assumed that the crucial and applied standards of Ayurveda got coordinated and articulated around 1500 BC. Ayurveda is perceived to Dhanvantari, the doctor to the divine beings in Hindu folklore, who got it from Brahma. Its soonest ideas were set out in the piece of the Vedas known as the Atharvaveda, which frames the foundation of Indian human progress, contains 114 psalms identified with definitions for the treatment of various illnesses. The main conditions referenced are fever (takman), hack, utilization, looseness of the bowels, dropsy (summed up edema), abscesses, seizures, cancers, and skin infections (counting sickness). The spices suggested for treatment are various. The brilliant time of Indian medication, from 800 BCE until around 1000 CE, was stamped uniquely by the production of the clinical compositions known as the Caraka-samhita and Susruta-samhita, ascribed separately to Caraka, a doctor, and Susruta, a specialist. Gauges place the Caraka-samhita in its current structure as dating from the first century CE, in spite of the fact that there were prior variants. The Susruta-samhita most likely started somewhat recently BCE and had become fixed in its current structure by the seventh century CE. Of fairly lesser significance are the compositions credited to Vagbhata. All later compositions on Indian medication depended on these works, which investigate the human body as far as earth, water, fire, air, and ether just as the three real humors (vata, pitta, and kapha).



After India acquired Independence from the British principle in 1947, the development for recovery of Traditional Systems of Medicine acquired energy. The frameworks got official acknowledgment and turned out to be essential for the National Health care organization to give medical services to the nation's resident. Administration of India started a progression of measures to advance the situation of Ayurveda as one of the significant medical services frameworks essential for obliging the essential medical care needs of the country. Various emergency clinics and universities for Ayurveda were set up. The other significant drives were foundation of an examination Institute to deal with the R and D requirements (Central Institute of Research in Indigenous System of Medicine (CIRISM)- in 1955);

a Post Graduate Training Center of Ayurveda in 1956-to grant Post alumni instruction; foundation of a University-named Gujarat Ayurved University at Jamnagar in the Gujarat State in 1967; production of Central Council of Indian Medicine (CCIM) in 1972 for directing Education and Registration in Ayurveda, Siddha and Unani frameworks of medication. An exploration chamber named Central Council for Research in Indian Medicine, Homeopathy and Yoga (CCRIMH) was set up in 1971. Along these lines, this board was bifurcated to make three separate committees - Central Council for Research in Ayurveda and Siddha (CCRAS), Central Council for Research in Unani Medicine (CCRUM), Central Council for Research in Homeopathy (CCRH) and Central Council for Research in Naturopathy and Yoga (CCRNY). Public Institute of Ayurveda (NIA) was set up at Jaipur in Rajasthan state. As of late one more University has been set up known as Rajasthan Ayurved University-Jodhpur (Rajasthan state). A draft public strategy for the improvement of Indian System of Medicine has been arranged which is accessible on the site of Department of Ayurveda.

Diagnosis: The finding is constantly finished by considering the patient in general item to be analyzed. The doctor takes a cautious note of the patient's inside physiological attributes and mental attitude. He additionally concentrates on different variables like-the impacted materially tissues, goes along with, the site at which the illness is found, patient's obstruction and imperativeness, his day by day standard, dietary propensities, the gravity of clinical conditions, state of assimilation and subtleties of individual, social, monetary and ecological circumstance of the patient. The overall assessment is known as ten times assessment through which a doctor inspects the accompanying boundaries in the patient.

- Psychosomatic constitution
- Infection weakness
- Nature of tissues
- Body construct
- Anthropometry
- Versatility
- Psychological well-being
- Stomach related power
- Practice perseverance and
- Age. Likewise, assessment of heartbeat, pee, stool, tongue, voice and discourse, skin, eyes and by and large appearance is additionally completed [5].



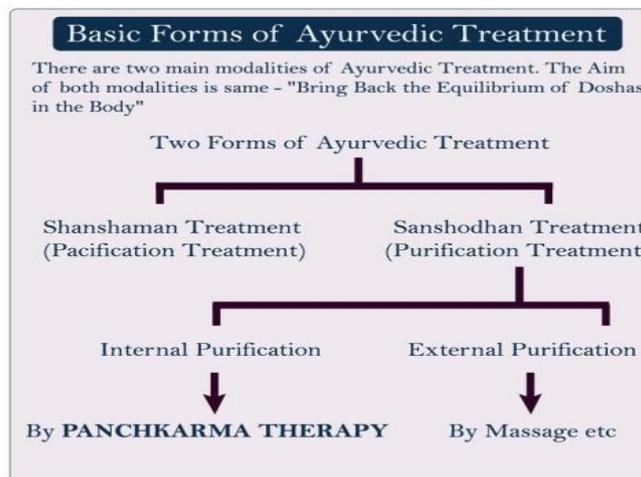
Diagnosis in Ayurveda

Treatment: The treatment lies in reestablishing the equilibrium of upset humors (doshas) through managing diet, rectifying life-routine and conduct, organization of medications and depending on preventive non-drug treatments known as 'Panchkarma' (Five interaction) and 'Rasayana' (restoration) treatment. Prior to starting treatment many elements like the situation with tissue and finished results, climate, essentialness, time, processing and metabolic power, body constitution, age, mind, body similarity, sort of food devoured are taken in to thought.

Sorts of treatment: The medicines are of various kinds a-Shodhana treatment (decontamination treatment), b-Shamana treatment (palliative treatment), Pathya Vyavastha (remedy of fitting eating routine and action), Nidan Parivarjan (evasion of causes and circumstances prompting illness or sickness exacerbation), Satvajaya (psychotherapy) and Rasayan (adaptogens-counting immunomodulators, against stress and restoration drugs) treatment. Dipan (absorption) and Pachan (osmosis) upgrading drugs are viewed as useful for assuaging the vitiated doshas (humors). This treatment should break up

the vitiated and aggregated doshas by working on the agni (stomach related power) and reestablishing the disturbed metabolic interaction. In serious conditions the above treatment must be enhanced with purificatory processes like Panchakarma. In this treatment at first the aggregated vitiated dosha is condensed by depending on outer and interior oleation of the patient; trailed by sudation (swedhana) and end of vitiated dosha through emesis (Vamana) or purgation (Virechana), Basti (douche emptying type) and Nasya (nasal insufflation).

Shodhana treatment gives purificatory impact through which restorative advantages can be inferred. This kind of treatment is viewed as helpful in neurological and musculo-skeletal issues, certain vascular or neuro-vascular states, respiratory sicknesses, and metabolic and degenerative issues. Shamana treatment includes reestablishing business as usual in the vitiated doshas (humors). This is accomplished without causing unevenness in other doshas. In this utilization of hors d'oeuvres, digestives, exercise and openness to sun and outside air are utilized. In the Pathya Vyavastha sort of treatment certain signs and contraindications are recommended as for diet, action, propensities and passionate status. In Nidan Parivarjan kind of treatment the accentuation is on keeping away from known reasons for the illness by the patient. In Satvavajaya sort of treatment the accentuation is on limiting the brain from the cravings for unwholesome items and Rasayana treatment manages the advancement of solidarity and essentialness.



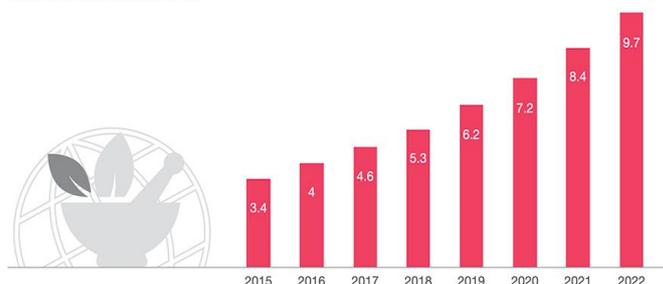
Ayurveda treatment

Education: At present there are in excess of 200 universities, which offer a four and half year course prompting Bachelor Degree in Ayurvedic Medicine and Surgery, trailed by one year temporary job. Also 2 universities offer advanced education in Siddha System of Medicine and 34 schools offer degree in Unani System of Medicine and 130 schools offer courses prompting degree in Homeopathy. The turnover of up-and-comers from these universities surpasses 9,000 every year. In excess of 30 Institutes offer postgraduate courses for Ayurveda and specialization is accessible in 16 disciplines. Likewise there is National Academy of Ayurveda, which bestows PG training under the plan of 'Master Shishya parampara'. This plan has been made so as to give training on customary lines like what used to be in old occasions. In old occasions understudies used to visit the home of the instructor to serve him while taking in the specialty of mending from him. At present around 750 Post alumni researchers are turned out each year (the term obviously is 3 years). The degree offered is M.D. (Ayu) and M.S. (Ayu). As of late Pharmacy schools have been opened which offer D.Pharm (Ayu), B.Pharm (Ayu) and M.Pharm (Ayu) (for additional subtleties visit-<http://www.ayurveduniversity.com>). Preparing programs for the most part, in-house are led, all through the nation to prepare para-ayurvedic staff. These prepared professionals help in completing remedial cycle like panchakarma and ksarasutra (a viable surgery for eliminating hemorrhoids). Likewise drug specialists are prepared to bear liabilities of running an ayurvedic drug store.

Drug fabricating in Ayurveda area: Ayurvedic drugs are showcased in different structures. They are accessible in both traditional structures (tablets, powder, decoction, sedated oil, cured ghee, aged items) and current medication show structures like cases, moisturizers, syrups, balms, liniments, creams, granules and so on There are in excess of 8500 producers of Ayurvedic drugs in the nation and the gross turnover of medications utilized in all the ISM and H frameworks is roughly around 1 billion US dollars. Drug producing in this area is directed by Drugs and Cosmetic demonstration (1940) and rules (1945)

(Jain, 2001). Hence numerous parts have been added to these demonstrations throughout the long term. Three sorts of organizations are engaged with the organization of the Acts and Rules ordered by the parliament. There is Drug Technical Advisory Board and Drug Consultative Committee to exhort the Govt., The Drug Controller General of India who with the assistance of the supporting staff is accountable for permitting and authorizing various laws identified with drug fabricating and administering. At the state level Food and Drug Administration Commissioners shoulder this obligation. As of late Good Manufacturing Process for ISM has been characterized which to be trailed by every one of the organizations have associated with the assembling of medications in this area.

Global Ayurveda Market (in \$ Bn)



Drug manufacture in Ayurveda sector

Siddha: The Siddha arrangement of medication is essentially drilled in the Southern piece of India. It is one of the most punctual conventional medication frameworks on the planet which treats the body as well as the brain and the spirit. The word Siddha has its starting point in the Tamil word Siddhi which signifies "an item to be achieved" or "flawlessness" or "sublime euphoria". India being the origination of numerous customary methods of reasoning likewise brought forth Siddha. The underlying foundations of this framework are entwined with the way of life of old Tamil civilization [6].

"Siddhargal" or Siddhars were the head researchers of this framework in antiquated occasions. Siddhars, essentially hailing from Tamil Nadu established the framework for Siddha arrangement of medication. Consequently, it is called Siddha medication. Siddhars were profound experts who had the ashta (eight) siddhis or remarkable powers. Agastyar or Agasthya, is accepted to be the initial architect of Siddha Medicine. Eighteen Siddhars are viewed as mainstays of Siddha Medicine. Siddha medication is professed to renew and revive useless organs that cause the illness. Kayakarpam, an exceptional mix of medication and way of life, Varmam treatment, Vaasi (Pranayamam) and Muppu the all inclusive Salt are the specialities of Siddha arrangement of medication. Along these lines this framework interfaces both otherworldly and physical and regards the individual all in all for example it thinks the physical, mental, social and profound prosperity of a person [6-8].

Treatment: Like Ayurveda, Siddha framework likewise follows ashtanga idea with respect to treatment strategies. Anyway the fundamental accentuation is on the three branches - Bala vahatam (pediatrics), Nanjunool (toxicology) and Nayana vidhi (ophthalmology). Different branches have not created to the degree found in Ayurveda. The surgeries, which have been clarified exhaustively in Ayurvedic works of art, don't track down notice in Siddha works of art. The therapeutics in both the frameworks can be extensively ordered into samana and sodhana treatments. The last option comprises of notable methods arranged under panchakarma treatment. This treatment isn't that all around created in Siddha framework, just the vamana treatment has gotten consideration of the Siddha doctors [6].

Unani: Unani arrangement of medication is the combination of contemporary conventional restorative framework in Egypt, Syria, Iran, Iraq, China, India and a few other east nations. It was started in Greece and later created in Arab. Bedouin and Persian pilgrims in eleventh century presented Unani medication in India, the framework gets acknowledgment and enhanced during Mughul rule [9-11].

Diagnosis: Assessment of the beat possesses a vital spot in the sickness finding in Unani. Moreover assessment of the pee and stool is additionally attempted. The beat is analyzed to record various elements like-size, strength, speed, consistency, totality, rate, temperature, steadiness, routineness and mood. Various credits of pee are inspected like smell, amount, mature pee and pee at various age gatherings. Stool is analyzed for shading, consistency, foam and time needed for entry and so forth.

Treatment: Illness conditions are treated by utilizing four kinds of treatments a-Regimental treatment, b-Dietotherapy, c-Pharmacotherapy and d-Surgery. Regimental treatment chiefly comprises of medication less treatment like exercise, rub, turkish shower, douches and so on Dietotherapy depends on proposal of patient explicit dietary routine. Pharmacotherapy includes organization of medications to address the reason for the infection. The medications utilized are essentially gotten from plants some are acquired from creatures and some are of mineral beginning. Both single and compound arrangements are utilized for the treatment.

AYUSH and Health Policy: Division of AYUSH focuses on the general administration, training, guideline, advancement and development of ISM in the India and abroad. The office has not many subordinate workplaces, a few independent bodies as exploration chambers, proficient gathering, pharmacopeia research centers, public foundations, institute and medical clinics. In the year 2002, National Policy on Indian Systems of Medicine and Homeopathy was presented. Significant goals of this arrangement are [12, 13].

- Utilize the AYUSH to support great wellbeing and spread out the effort of medical care to our kin (primarily who can't manage or reach to the advanced medical services offices) through preventive, promotive, mitigative and healing methodologies.
- To give reasonable AYUSH administrations and medications which are protected and efficacies;
- To guarantee the accessibility and real of crude medications as needed by pharmacopoeial principles to assist with working on nature of AYUSH drugs, for homegrown as well as product reason.
- Incorporate AYUSH in medical services conveyance framework and public projects and to guarantee the most ideal use of immense foundation of clinics, dispensaries and doctors.
- To offer full freedom for the extension and improvement of ISM and use of the probability, strength and restoration of their greatness.

Research and Development: The exploration exercises are being completed by Central Council for Research in Ayurveda and Siddha (CCRAS) and comparative boards for Unani, Homeopathy and Naturopathy and Yoga. The CCRAS is the head office associated with innovative work (<http://www.ccras.com>). It has 89 field units, which have been re-coordinated in to 30 organizations and units. The sorts of exercises embraced are clinical exploration including arranged clinical preliminary of single and compound ayurvedic arrangements and medication research which incorporates medico-organic studies, development of restorative plants, pharmacognostical studies, phytochemical studies, drug normalization, pharmacological and toxicological examinations. A tremendous assemblage of information is accessible in different distributed writing and information bases (Sharma et al 2000, 2001, 2002; Billore et al 2004; Satyavati et al, 1976, 19087, Satyavati, 2005; Mishra, 2004; De et al 1993; Chatterjee and Pakrashi (1995-1997); Gupta and Tandon (2004); Wealth of India series (1959-69; 1985 and 2000); Dahanukar 2000; Rastogi and Dhawan (1982); Ayurvedic Pharmacopeia Part-I in three volumes (Anonymous-1989, 1999 and 2000); Sivarajan and Balachandran (1999); Raghunathan and Mitra (1982) and five volumes (1-5) by Rastogi and Mehrotra (1990, 1991, 1993, 1995 and 1998). Scholarly examination, which includes distribution of uncommon and old style compositions of ISM and H., is additionally completed (<http://www.ccras.com>).

Other than research chambers research exercises are completed in Post Graduate habitats and Institutes of public significance like-Central Drug Research Institute (CDRI), Central Institute of Medicinal and Aromatic Plants (CIMAP), National Botanical Research Institutes (NBRI) and so forth and R and D focuses appended to Ayurvedic drug producing firms (Kurup-2004). Anyway the primary inclination is to consider therapeutic plants utilized in Ayurveda as source material for bio-prospecting of medications. There are not very many investigations, which take in to thought the ayurvedic idea driving a given plan. Ayurveda has an all around created drug definition discipline known as 'Bhaishajya Kalpana', which gives extraordinary arrangement of data about techniques for drug planning, utilization of adjuvants, assortment and handling drugs in a specific way. Research endeavors on this perspective and on fundamental standards of Ayurveda are yet to be embraced in purposeful way.

Promotion, Gradual Integration: There has been a consistent strategy backing to advance the conventional medication in India. The public authority additionally supporting various plans identified with research-advancement identified with restorative plant research. The spending plan portion for the Dept of AYUSH has been expanding slowly throughout the long term. In the twelfth Five Year Plan of India (2012-2017), complete portion for AYUSH was INR. 10,044 crore, which was 235% more than the real

consumption of eleventh Plan [14]. In the perspective on incorporate the AYUSH framework for medical services framework a few arrangements are planned like [15]:

- Utilization of AYUSH specialists in National Reproductive and Child Health and Population adjustment programs.
- Inclusion of a few customary medications (for example Ayush Ghutti, Bal Rasayana, Soubhagya Shunthi, Ark Ajwain, Ark Pudina, Punarnavadi Mandoor and Ksheerbala Tel.) in the National Reproductive and Child Health (RCH) Program for use by moms and youngsters.
- A pilot undertaking to screen the impact of Ayurveda treatment in the bet natal and post-natal consideration.
- Utilization of accessible offices of ISM in provincial medical care mission (NRHM). Like, delegating Ayurveda specialists and paramedics in the essential medical care conveyance framework and in National Health programs.
- Inclusion of AYUSH drug (for example Punarnavadi mandoor for the executives of pallor during pregnancy) pack of (ASHA or Accredited Social Health Activist go about 'as an interface between the local area and the general wellbeing framework in rustic India) notwithstanding nonexclusive medications for normal sicknesses at sub-focus/essential wellbeing place/local area wellbeing focus.
- Ensure the accessibility of Ayurvedic, Siddha and Unani fundamental medication to essential wellbeing community.
- To observe the method of consideration of AYUSH medication in plans like Janani Suraksha Yojana (JSY-AYUSH), ICDS-AYUSH, Reproductive Child Health (RCH), early breastfeeding, development checking of youngsters, risk and post natal consideration, and so on Furthermore, track down their adequacy.

As of late, there are some idea to permit the AYUSH specialist to endorse current medication if provincial regions considering lack of allopathic specialists. Be that as it may, there is solid go against as it might abuse the standard present in India. Fig. depicts the methodology of coordination of conventional home grown medication in clinical practice.



Strategy in include traditional medicine in regular healthcare service in India

CONCLUSION

Conventional medication especially home grown medication assuming significant part in keep up with of wellbeing in provincial and distant regions. Consideration of conventional natural medication in clinical practice will assist with accomplishing the objective 'wellbeing for all' (Fig. 3). Indian conventional medication like Ayurveda and others have sound logical foundation of adequacy and furthermore recognized by the new explores. Despite the fact that endeavors are expected to conquer hindrances like unreasonable use, quality control and normalization issues, high pharmacovigilance and so on Stick execution of rules, observing and intermittent amendment of guidelines are outright important to advance Indian customary medication. Generally, sufficient information about the framework, excellent clinical preliminary, legitimate data about such medications and their adequacy among average citizens needed towards the advancement of such medication. Coordination of Ayurvedic and others Indian conventional medication in clinical practice will supportive to advance the soundness of individuals who can't get to the cutting edge medication appropriately. Use of such medication

alongside regular medication sullen put more qualities to advance wellbeing or fix illnesses in the better manner. Hence, mainstreaming of ISM alongside allopathic medications and solid way of life will be useful to give medical care administration in most ideal manner to all individuals in India as well as around the globe.



Circle of life for achieving universal and quality life

REFERENCES

- [1] Anonymous . Department of AYUSH, Ministry of Health & Family Welfare, Govt of India; New Delhi: 2012. Ayurveda the Science of Life.
- [2] Chaudhury R.R., Rafei U.M. World Health Organization (Regional Office for South-East Asia); New Delhi: 2001. Traditional Medicine in Asia.
- [3] Naswamy V. *Anc Sci Life*. 1981;1:1–7.
- [4] Ramachandra Rao SK. *Encyclopedia of Indian Medicine*, Vol 2. Dr. P.V. Parameshvara Charitable trust. Bangalore. India: 1987.
- [5] Kurup PNV. In: *Ayurveda in Traditional Medicine in Asia*. Chaudhury Ranjit Roy, Rafei Uton Muchatar., editors. New Delhi: WHO- Regional Office for South East Asia; 2002. pp. 3–16.
- [6] Narayanaswamy V. In: *Introduction to the Siddha System of Medicine*. T. Nagar, Madras (Chennai): Research Institute of Siddha Medicine; 1975
- [7] Tiwari L. *Siddha Medicine: Its Basic Concepts*. Accessed from: http://www.infinityfoundation.com/mandala/t_es/t_es_tiwari_siddha.htm.
- [8] Subbarayappa BV. *Siddha medicine: an overview*. *Lancet*. 1997;350:1841–1844. [PubMed]
- [9] Ansari AA. Global status of Unani Medicine. In the Proceeding of International Conclave on Traditional Medicine (16–17 November 2006), National Agriculture Science Complex, New Delhi. Available from: <http://www.niscair.res.in/conclave/downloadables/Plenary%20Session%203/pdf/Ansari.pdf> Accessed on 8 January 2015.
- [10] Sen S., Chakraborty R. *Bot Target Ther*. 2015;5:33–44.
- [11] Siddiqi T. *Indian J Hist Sci*. 1981;16:22–25. [PubMed]
- [12] Anonymous . 2015. AYUSH, About the System.<http://www.indianmedicine.nic.in> Sharma S.K., Katoch D.C. 2006.
- [13] Ayurveda.<http://herbalnet.healthrepository.org/bitstream/123456789/2075/6/3.%20Ayur53-65.pdf>
- [14] Sharkar M. 2013. Ayush Dept Under-utilises Funds Allocated during Last Three Years.<http://www.pharmabiz.com/NewsDetails.aspx>. Sharma S.K., Katoch D.C. 2006. Current Status & Infrastructure of Ayurveda.<http://herbalnet.healthrepository.org/bitstream/123456789/2075/6/3.%20Ayur53-65.pdf>
- [15] Sharma S.K., Katoch D.C. 2006. Current Status & Infrastructure of Ayurveda.<http://herbalnet.healthrepository.org/bitstream/123456789/2075/6/3.%20Ayur53-65.pdf>