



Guest Editorial

NEED OF PRESCRIBING STANDARDS IN AYURVEDA

Introduction

Therapeutic prescribing is an art based on science. The art of medical prescribing demands great background knowledge of Basic science of human being for a physician and also a unique skill to blend the Basic science with the specific clinical situation that he intervenes. There is no doubt that the chief essence of good prescribing is to decide the most appropriate therapy which is befitting to the clinical situation in any particular patient. Ayurveda is indepth Basic Science Based - Evidence Based Medicine^[1] (BSB-EBM) and not merely Evidence Integrated Medicine (EIM). Any disease by a common name can be caused by multiple variable aetiologies in a subject and also the same aetiology can result in multiple variable pathological effects in different subjects. The main objective of prescribing in Ayurveda is to reverse the cause and circumstances of pathogenesis back to cause and circumstances of health, only by which the cure of a disease is made possible. Cure in Ayurveda refers to “*Sukha*” or “*Arogya*” (health)^[2]. A person cured of a disease does no way experience the working of his body and possess great enthusiasm to lead his life.

Evidence Based Medicine (EBM) Vs Basic Science Based -Evidence Based Medicine (BSB-EBM)

Modern Medicine is practiced Evidence based where as Ayurveda is originally Basic Science Based Evidence based. Evidence in the former refers to external evidence while in the latter refers to internal evidence. The evidence in the former is attained by integrating data while the evidence in the latter is attained from Basic science. In EBM, the clinicians weigh the potential benefits of a therapy against the potential for doing harm before prescribing any therapy. Like for example, in the case of life threatening diseases, the drug, which is counted for more benefits, is accepted by neglecting its risks. So an ethical prescriber in Modern Medicine do justice to the patient by prescribing only when

inevitable, that too having carefully assessed the balance of benefit and harm.

This is not the version of Ayurveda. Everything in the world has merits and demerits. In the same way all drugs have their effects and side effects. But anything can be called as a medicine only if it produces “health” in the patient. So all drugs do not deserve to be called as medicine in every circumstance. A physician’s duty and responsibility is to choose the most scientifically appropriate drug therapy in specific clinical situation and elevate the same to the status of “medicine”. Next question comes who is to decide “what is best”. The most righteous answer for the question is “Basic science”. The Basic science of Ayurveda is not at all presented in the form of therapeutic formulary with long list of herbs and formulations and their dosage. Instead, they are started from the most fundamental description of what is human being, health and disease, why and how disease develops, fundamental classification and description of diseases with their nature, aetiopathogenic factors, diagnostic and prognostic principles, treatment principles and principles for prevention. Thus we find a very systematic and scientific approach of “Science led Medicine” rather than “Medicine led Science” in Ayurveda. But today how many physicians are following science in their medical practice ?? Do they depend on science based standards or merely incline upon experience or expert opinions in our medical decision making?? The expert opinions or clinical experiences are only anecdotes which may possess wide variations from the particular clinical situation in the particular patient who is being treated.

It is purely unethical and unscientific for Ayurveda practitioners to depend on “probability based methodologies “like systemic review (meta analysis), prospective randomized double blind comparative (trial drug Vs standard) case control study, cohort study etc in choosing what is best

for their patient in a situation, especially when Ayurveda advocates this three step examination before prescribing:

1. *Roga tatwas* (Principles of disease examination)
2. *Rogi tatwas* (Principles of patient examination)
3. *Bheshaja tatwas* (Principles of treatment examination)

The methodologies of examination of each and every step are explained in detail in *Charaka Samhitha Vimanasthana*^[3]. Hence these methodologies are the ideal most methodologies for a clinician to be adopted in his practice. The *Tatwas* (diagnostic and treatment principles) are the best sources for imperative decision making of Ayurvedic practitioners^[4]. The *Tatwas* are scientifically proven, established and peer reviewed for many centuries and hence absolutely free from any contradictions or implausible effects. Hence prescribing is to be completely based on the treatment principles mentioned in the science which is rightly chosen befitting to the situation. No contradictory treatment principles are advocated in a single situation, like for E.g, in *Navajvara* (Acute infective fever), *Langhana* and *Brumhana* are not advised together.

Advantages of Treatment Principle Oriented Approach (TPOA)^[1] in prescribing :

1. Once the accurate diagnosis is made based on diagnostic principles and the treatment principle is decided, there is no controversy in selecting drug of choice.
2. The accuracy of treatment principle can be confirmed in maximum one day by *Upasaya-Anupasaya* evaluation and further schedule can be decided.
3. Accurate Treatment Principle (TP) considerably minimizes the number of drugs in the prescription and maximizes the intended effect in minimum time.
4. Rational prescribing is made possible which ensures the best scientifically optimized health care to the society.
5. Checks the unscientific polytherapy practices which are on rampage in the society today.
6. Save the medicinal plant resources on earth by curtailing their indiscriminate exploitation.

Training programmes for physicians

After conducting literary and clinical research for some years, the author has developed a scientific technique called **Evidence Triad Approach (ETA)**^[1] to standardize the process of diagnosis and treatment protocols of Ayurveda physicians. The technique is elaborated in author's book **Evidence Based Ayurveda & Rational Prescribing**^[1](2012). Evidence based prescribing guidelines and policies should be endorsed by the Government through AYUSH and training programmes should be initiated on appraisal techniques of Ayurvedic evidences for Ayurvedic physicians as well as faculties. Also at present, there is no prescription audit system in Ayurveda as no standards are evolved for the same. Irrational prescribing is left undetected because of this. Unscientific prescribing is resulting in extensive financial loss to the patients besides the delayed or absence of cure. All these are creating a negative impact on this Medical system. Intensive training programmes and workshops on how to employ science based standards and principles in practice should be repeatedly conducted for all physicians in order to increase their efficiency and thus improve the outcome of public health standards. It also helps to considerably improve the national economy by cutting off all unnecessary medical expenses and loss of man days.

Conclusion

Every patient is expecting to attain cure at the earliest and get back to his routine. So it is unethical to prescribe aimlessly just to end the consultation. The prime duty and responsibility of an Ayurvedic physician is not to balance benefit and harm of therapy, but to fast acquire the intended effects by reversing the cause and circumstances of the disease. This itself is a pertinent and valid reason to implement science based standardized prescribing guidelines, policies and reminders and circulate a printed manual of them among all Ayurvedic practitioners after providing sufficient training on how to use them. Constant training exercises would also enable them to know the extent of flexibility of these guidelines which make them apply it accurately in accordance to the needs of their every individual patient.

REFERENCES

- 1.http://www.amazon.com/Evidence-Ayurveda-Rational-Prescribing-ebook/dp/B00AR0DU00/ref=sr_1_?ie=UTF8&qid=1379136494&sr=8-1&keywords=Evidence+Based+Ayurveda+%26+Rational+Prescribing.
- 2.Charaka samhita suthra sthana :9/3

3.Charakasamhitha Vimanasthana :8/80

4.Charaka samhitha Vimanasthana :4/10

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