# The Boundaries for Traditional Medicinal (AYUSH) practitioners

**Mains**: *GS II- Government policies and interventions*

## Why in news?

*Recently, A controversy on X between a hepatologist and an Indian chess Grand Master, on whether practitioners of traditional medicine can claim to be doctors, has sparked much interpretation on the role and the status of practitioners of traditional Indian medicine systems such as Ayurveda and Unani, in India.*

## What are different perspectives on AYUSH?

- **A much old debate** – The origin of this argument can be traced back nearly 80 years beginning from 1946.
- **Bhore committee** – The Bhore Committee in 1946 supported firmly for modern, evidence-based medicine.
- The committee had pointed out that other countries were in the process of phasing out their traditional medicine systems.
- It recommended that states to decide on the extent to which traditional medicine played a role in their public health systems.
- **Opposition from traditional medicos** – The traditional medicine practitioners opposed Bhore committee report.
- They argued for the preservation of systems such as Ayurveda.
- **Committee on Indigenous Systems of Medicine** – The government established the committee in response to the opposition.
- It submitted the report in 1948 which enclosed the validity of traditional medicine in a narrative of Hindu nationalism.
- **The Indian Medicine Central Council Act, 1970** – It was Enacted under the Indira Gandhi government in 1970, while Jawaharlal Nehru refrained from granting official recognition to these systems.
- It recognised and regulates the practitioners of Ayurveda, Siddha and Unani.
- This act was replaced by the National Commission for Indian System of Medicine Act 2020.
- **Confused curriculum** – The syllabus for aspiring practitioners of Ayurveda is an absolute mish-mash of concepts
- It includes everything from doshas, prakriti, atmas (which includes learning the difference between paramatma and jivatma)
- They contain a very small inclusion of modern medical concepts such as cell physiology

and anatomy.
- **Conflicting concepts** — The theory of tridosha attributes all ills to an imbalance of doshas.
- Modern medicine locates the concepts of some diseases such as infections in germ theory among others.
- Concepts such as integrative medicine make no sense because there is no middle ground between both systems of medicine.

## What are the major points of friction among traditional and modern medicinal practitioners?

- **Boundaries** – The legal recognition led to questions on the exact boundaries between the practice of traditional and modern medicine.
- **Prescription of medicines** – Ayurvedic practitioners have consistently demanded the right to prescribe modern medicines developed by evidence-based modern science.
- **Demand for advantage** – Traditional Ayurvedic practitioners, claim the superiority of their art over modern medicine.
- **Rule 2(ee) of the Drugs and Cosmetics Rules, 1945** – It defined the class of registered medical practitioners who can prescribe modern medicine.
- This definition is complicated since it is not limited to doctors with a MBBS degree.
- **Powers to state government** – The Rule 2(ee), delegates a certain amount of power to State governments to pass orders declaring medical practitioners on their State medical registers.
- They are registered as persons practising the modern scientific system of medicine for the purposes of the Drugs & Cosmetics Act, 1940.
- Many State governments have used this power under Rule 2(ee) to allow registered practitioners of Ayurveda and Unani to prescribe modern medicine such as antibiotics.
- **Dr. Mukhtiar Chand vs The State Of Punjab** – The court stated that, the right to prescribe allopathic drug cannot be wholly divorced from the claim to practice allopathic medicine.
- In simple words Ayurvedic practitioners had no right to prescribe modern medicine.
- **Defiance of the Court's judgment** – State governments for the promulgation of orders under Rule 2(ee) allowing the Ayurvedic and Unani practitioners to prescribe modern medicine.
- This inevitably leads to litigation before the High Courts, usually by the Indian Medical Association, which often wins these cases.
- **Litigation by patients** – Patients have often sued practitioners of Ayurveda before consumer courts.
- They argue that they were misled into believing that they were being treated by a doctor with a MBBS degree who can prescribe modern medicine.
- **Issues on the medical procedures** – There has been a question whether modern medicinal procedures can be conducted legally by practitioners of Ayurveda and Unani.
    - ***For example,*** *can a registered Ayurvedic practitioner "**intubate**" a patient? This is an important question to ask.*
- **Falsification by hospitals** – Many hospitals claiming to practise modern medicine are hiring Ayurvedic practitioners.

- They employ people with Bachelor of Ayurvedic Medicine and Surgery (BAMS) degree at lower pay in place of graduates with a MBBS degree.
- **Notification by the Indian government in 2020** – It has allowed Ayurvedic practitioners (post graduates) to perform 58 minor surgeries.
- This including the removal of the gall bladder, appendix and benign tumours.
- The constitutionality of this notification is pending before the courts.

## What are the challenges associated?

- **Problems on drugs** – If the notification of 2020 is upheld, the question that arises is whether these Ayurvedic practitioners can now use anaesthetic agents and antibiotics required to conduct surgeries.
- **Unscientific arguments** – The risks are high for public health in India since the possible strategy of Ayurvedic practitioners will be to argue that the modern surgeries were known in traditional Indian medicine.
- **Political factors** – It is not just the ruling party, most of the political parties feel compelled to support an visibly dangerous approach to public health.
- Even the opposition that the party said, it would "support" all systems of medicines instead of a promise to support only rational, evidence-based medicine.
- **Government policies** – The government is actively considering the inclusion of AYUSH (Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy) treatments under the Ayushman Bharat insurance scheme funded by tax-payers.
- **Huge Spending** – Approximately ₹20,000 crores to be spent on research councils functioning under the Ministry of AYUSH with a mandate to research AYUSH.

## What lies ahead?

- The blind faith in traditional medicine could cost every citizen in the future, since the traditional medicines have very less evidences in terms of scientific revolutions.
- The government could consider the wellbeing, safety and informed consent of Indian citizens.

## Reference

[The Hindu |The Medical Boundaries for AYUSH Practitioners]

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