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# History of Indian Traditional Medicine: A Medical Inheritance

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## **ABSTRACT**

Objective: Indian Conventional Medication, the groundwork old enough old act of medication on the planet, plays had a fundamental impact in human medical care administration and government assistance from its commencement. Similarly, all traditional medicines have distinct regional effects and are particularly prevalent in West Asian nations; East Asian nations like India, Pakistan, Tibet, and so on; Africa, South and Central America, China, Korea, Japan, Vietnam, and other countries Based on recent methodical reviews, this article aims to shed light on the significance of Indian traditional medical care. Methods: Search engines, for instance; Reviews and meta-analyses were conducted using Google, Science Direct, and Google Scholar. Results: People who use Indian Traditional Medicine for a variety of ailments and disorders and those who rely on modern medicine have been at odds for a long time; cure with modern medicine. A fundamental truth is at the heart of the civil debate between modern medicine and traditional medicine: Every individual, irrespective of education or illness, ought to be educated about the realities of their illness and the medication side effects that accompany it. Helpful information on Indian customary medication has moved different conventional methodologies with comparative or various hypotheses and approaches, which are of territorial importance. Conclusion: to investigate phytochemicals and extend research on Indian Traditional Medicine in the near future; The current review will be beneficial to traditional medicinal pursuit researchers.

**Keywords:** Indian traditional medicine; Age-old practice; Phytochemicals.

# INTRODUCTION

Natural products, or NPs for short, are huge, diverse, and biologically active secondary metabolites that have been used in a wide range of applications, particularly in agriculture and the veterinary and human industries [1-3]. Plants, marine animals, and microorganisms are all sources of NPs. Secondary metabolism produces the NPs that come from plants; the mixtures which are not fundamental for presence in research facility conditions but rather are positively answerable for self-preservation coordination in normal circumstances. Macromolecules like DNA, RNA, protein, and antecedents, and their fundamental intermediates found normally are excluded from the meaning of NPs. Since the discovery of penicillin, which took place more than 85 years ago, the pharmaceutical, insecticidal, and herbicidal importance of NP has been driven by the discovery of NP and has taken on a significant role. Numerous NPs have been isolated and characterized since then. The phytochemical diversity and its complexity in determining the appropriate manifestation in the treatment and management of diseases have primarily piqued the interest of NP scientists. However, for centuries, people have relied on nature to treat a variety of diseases with herbal and phytonutrient treatments. These treatments are becoming increasingly popular, and between 80 and 85 percent, or about 6 billion people worldwide, rely on herbal medicines to treat a variety of diseases. Plants, specifically, have been engaged in the customary medication, dating from around 2600 BCE, recording 1000 plant-based item in Mesopotamia, which consolidate the use of separated oils of Cupressus arizonica Greene, Commiphora acuminata Mattick, Cedrus libani A. Rich., Papaver somniferum L. and Glycyrrhiza glabra L. are still used to treat common

(MIJ) 2022, Vol. No. 8, Jan-Dec

colds, coughs, swelling, and parasitic diseases. Egyptian drug which is around 2900 BCE old, guarantees the antiquated practice as to ordinary medication. Despite the fact that "Ebers Papyrus," which dates back to 1500 BCE and contains more than 700 drugs, many of which were derived from plants, is the most well-known record. Chinese traditional medicine has been extensively studied over the centuries, with evidence dating back approximately 2000 years (1100 BCE; Wu, Er, Bing, and Fang; containing 52 medications), followed by the home grown Shennong (100 BCE; 365 drugs) and the natural Tang (659 CE; 850 medication). Nonetheless, the records of the Indian customary medication dates from before 5000 years (Charaka and Sushruta Samhitas hold with 341 and 395 natural drugs independently 1000 BCE back). On the other hand, the Greeks and Romans significantly contributed to the coherent development of the use of traditional medicine in the ancient Western world. A Greek physician named Dioscorides documented the collection, storage, and proper application of traditional medicine in the then-"known world." NPs that are sold as home grown and additionally food supplements for meds covers half of the super 50 medications sold in European drug stores. Besides, current pharmacopeia contains not <25% drugs, coming about because of various plants and numerous engineered analogs that are made in light of the model or probably subordinates from NPs. Traditional medicine is also defined by the World Health Organization (WHO) as: The entire of the data, capacities, and practices considering the speculations, convictions, and encounters of native to various societies, regardless of whether coherent, uses as a piece of the help of medical care administration and furthermore in the counteraction, recognizable proof, improvement, or therapy of physical and mental precariousness. Traditional Indian medicine is the oldest of the many traditional medical systems that are used worldwide for a variety of related beliefs and social causes. The traditional Indian medicine known as Ayurveda is still the oldest and has a solid philosophical foundation. Western examinations have uncovered that over 40% of Americans and more than 20-60% of Europeans use a few type of corresponding and elective medication. The utilization of NPs as medical services the board framework may be shown an extraordinary test in early human advancement. Potentially early people frequently consumed nonconsumable plants, which could prompt retching, the runs, unconsciousness, or other poisonous responses - or even demise. However, humans have been able to perceive and collect information about edible resources and natural medicines thanks to the transfer of knowledge from one generation to the next. In a similar vein, the development of traditional NP knowledge and the expansion of information extended generation by generation. Prior to the turn of the twentieth century, the majority of the medications used in drug preparations came primarily from plant and vegetable sources. Concentrates of plants as a wellspring of NPs and conventional medication have been used for millennia, and those old definitions are kept in old writing. In this manner, the plant has met all of man's requirements, including foods, shelter, clothing, flavors, scents, and medicines. From this time forward, plants turned into an essential of old human developments. The "Rigveda," which was written between 1700 and 1100 BCE, the "Yajurveda," which was written between 1400 and 1000 BCE, and the "Atharva Veda," which was written between 1200 and 1200 BCE, all have health-care records that date back to 5000 BCE. In later works, such as the "Charaka Samhita" (990 BCE), "Sushruta Samhita" (660 BCE), and "Dhanwantari Nighantu" (1700 CE), the use of plants and polyherbal formulations was emphasized and widely used. Fig. 1 further explains the antiquated Indian restorative composition. The act of prescriptions which are believed to be Indian beginning or which have come to India from outside and got consumed into Indian culture is known as conventional medication of India, exemplified in Fig. 2. India has the selective differentiation of its own perceived conventional medication; Yoga, naturopathy, Unani, Siddha, Ayurveda, and homoeopathy. In spite of the way that Homeopathy came to India in the eighteenth 100 years, yet it is completely consumed into the Indian culture and got further developed like another customary framework thus it is improved and turned into a piece of Indian conventional medication.

# **AYURVEDA**

Ayurveda literally means "The Science of Life;" the amalgamation of the two Sanskrit words "veda" (science or knowledge) and "ayur" (life). Ayurveda is based on a logical idea of living in harmony, and its origins can be traced back to ancient texts like the Rigveda and the Atharva Veda. Ayurveda's origins are unknown, but between 2500 and 500 BCE, in India, its principles and practices were idealized. A regular practice of Indian Ayurveda has been the

(MIJ) 2022, Vol. No. 8, Jan-Dec

utilization of natural resources for development through generous experimentation and experiences from everyday life. There are two fundamental parts to the ayurvedic treatment fundamental rule. These are intended to preserve the illness's cause and increase the patient's awareness of it. "Ayurveda deals with happy and unhappy life," is the primary goal of ayurvedic treatment. It measures life expectancy and quality of life, as well as explains what is appropriate and inappropriate in relation to life. It is a comprehensive set of medical services based on the idea that the human body is a network of seven fundamental tissues (Rasa, Rakta, Mansa, Meda, Asthi, Majja, and Shukra) and the body's waste products (excretion, sweat, and urine), which are derived from the five fundamental elements (fire, water, air, ether, and earth) and three dynamic energies (vata, pitta, and kapha) (Disease is brought on by any unbalance or unsettling influence on these fundamental body standards. Ayurveda treats the person as a whole, not just the illness. This method of medicine emphasizes that every person is unique in terms of social conservative status, bio-personality, biosynthetic conditions, and physiological conditions that might cause a particular disease. Additionally, this makes it easier to conduct investigations into various human services issues using the most recent logical approaches. Polyherbal mixtures of metals, minerals, and products derived from plants and/or animals are frequently used in Ayurvedic preparations. However, NPs outnumber other derived products in ancient manuscripts, including the modern Ayurvedic Pharmacopoeia . Over the past few decades, higher-level endeavors in this field have resulted from multidisciplinary research on Ayurveda. Diverse lead compounds for drugs are emerging. Ayurvedic medicines are becoming increasingly popular all over the world due to their easy acceptance, useful assistance, socioeconomic benefits, and traditional acceptance. Quality, wellbeing, dependability, and effectiveness for ayurvedic drugs are presently being guaranteed through broad examination. The development and management of health-related issues in India are being significantly influenced by the growing search for novel agents derived from medicinal plants, particularly bioactive compounds.

## **SIDDHA**

Between 10,000 BCE and 4000 BCE, an ancient human civilization in India developed the Siddha system of medicine. It is the oldest form of medicine in South India and, like Ayurveda, is based on the everyday skills of using natural resources to stay healthy. One of the six branches of Hinduism, Saiva philosophy is the foundation of this medical practice. "Siddha" designates "blessed agreement" or "achieving greatness" or "perceived truth" and the "Siddhars" were otherworldly creatures who acquire scholarly powers by consistent act of such kind of medication. 18 "Siddhars" are believed to have established the Siddha system of medicine. Thirumoolar, Ahappe, Agathiyar, Sunthara ananthar, Bogar, Machchamuni, Konganar, Korakkar, Therayar, Karuvoorar, Nandi Devar, Idaikkadar, Iraamathevar, Sattamuni, Kuthampai, Paampaatti, Aluhanna, and Kahapusundar are the other characters in this group. This restorative practice thinks safeguarding the human prosperity is significant to succeeding the everlasting happiness and the philosophical thought incorporates "food is medication, medication is food" and "sound psyche makes a sound body." This system's philosophy and principles are similar to those of Ayurveda. The human body is also depicted in the Siddha system of medicine as an accumulation of seven basic materials, three humors, and discarded products. A healthy level of humor is indicative of well-being, whereas an imbalance causes illness or disease. A person's 96 main parts are their physical, physiological, moral, and intellectual components. Change causes 96 principles to operate improperly, resulting in disease. The eight stages of diagnosis include speech, pulse, complexion, tongue, and other examinations. Yoga, the mind, the sensory organs, and pleasure and pain all have the potential to improve sensory functions and their refinement. The psychosomatic framework can be restored by administrating metals and minerals alongside NPs. Because a large portion of the literature is not translated into Tamil, Siddha medicines are less wellknown in the Western world. However, they are well-known as an alternative biomedicine within Tamil communities . Siddha philosophy is based on therapeutic, profound, and academic perspectives. It places equal importance on the inner and outer bodies, particularly identifying methods of alchemy (turning base metals into gold), urine examination, and practice materia medica. At this point, Siddha drugs are recognized as being sensible to treat all issue expect emergency cases. In a similar vein, herbo metal and herbo mineral preparations that unquestionably contain nanoparticles perform better in treating chronic conditions.

(MIJ) 2022, Vol. No. 8, Jan-Dec

## **UNANI**

The Unani medical system originated in Greece and was developed by Arabs into an elegant medical discipline based on Hippocrates, a Greek physician who lived from 460 to 377 BCE. Galen and Hippocrates (Jalinoos), both from Buqrat. Galen (131-212 CE), Raazes (850-925 CE), and Avicenna (980-1037 CE) were Greek and Arab scholars who significantly improved the system, which is referred to as Greco-Arab Medicine. Unani practice of medication is based on the four states of living, for example, hot, soaked, chilly, and dry and four humors of Hippocratic speculation, in particular, blood, yellow bile, dull bile, and bodily fluid. Unani arrangement of medication was blended in with the Indian culture in Mughal Heads and is used by a broad fragment of the populace in India. Unani sees the human body as comprised of seven principles; Mizaj refers to the flavors, Anza to the organs, Quo to the resources, Arkan to the parts, Arawh to the spirits, Aklath to the humor, and Afal to the capacities. These principles direct success and moreover sickness condition. Before making a diagnosis or offering a treatment plan, a doctor takes into account all of these factors. The NP drugs used as a piece of this system are illustrative of life and are liberated from incidental effects. Such drugs, which are deadly in raw shape, are ready and filtered before usage . Diet therapy, regimental treatment, and pharmaco-treatment are some of the medications that the Unani medical system recommends: 1. Diet therapy can be used to treat specific illnesses by organizing specific diet control plans or by regularly controlling the amount and nature of diet. 2. Diaphoresis, diuresis, the Turkish shower, knead cleansing, and other methods are included in regimental treatment. 3. The use of NPs is managed by pharmacotherapy. The Unani system of medicine is a comprehensive system of medicine that miraculously treats a wide range of health and disease conditions by using a single or crude formulation. The gastrointestinal, nervous system, and cardiovascular diseases can all benefit from this system.

## YOGA AND NATURAL MEDICINE

Yoga is a Sanskrit word that is only spoken in India. In mainstream Indian ceremonial settings, such as Hinduism, Jainism, and Buddhism, Sanskrit is fundamentally popular. The word yoga has changing understandings yet is generally typically grasped as importance association. As a way to train people to become more mindful, yoga focuses on the abilities to heal and prevent illness. While care-based subjective treatment, a different model of mindfulness is used for cognitive therapy practices, dialectical behavior therapy has its underlying foundations in cognitive behavior therapy. Naturopathy is a particular form of essential medicine that strikes a balance between ancient healing practices, rational progress, and most recent research. Naturopathy is directed by an intriguing game plan of the standard that sees the body's characteristic recuperating limit, underlines infection counteraction, and urges solitary obligation to get ideal prosperity. With regard to natural healing systems, the naturopathic hypothesis views the disease as a process of disturbance to well-being and subsequent recovery.

# **HOMEOPATHY**

Hippocrates, a Greek physician who lived in the 450s BCE to 450s C.E., established the principle of homoeopathy, which is still one of the most debated therapeutic practices. Dr. Samuel Hahnemann, a German physician who practiced Homoeopathy from 1755 to 1843, was more influential in establishing the modern practice. The Greek words "homos," which means similar, and "pathos," which means suffering, are the origins of the term "homoeopathy." A method of treatment known as homeopathy makes use of combinations of substances whose effects, when administered to healthy individuals, correspond to the symptoms of the individual patient's illness. It is believed that the methodology is based on two main tenets: 1. ""Like heals like" Since the drug is used to treat the same disease, a healthy person would experience the same symptoms. 2. "Infinitedilution" refers to the fact that even when diluted beyond Avogadro's number, therapeutic activity is enhanced by repeated dilution and succession. In essence, homeopathy refers to the practice of treating diseases with remedies that, when taken, can cause the same symptoms as the disease. For instance, bark concentrate of Cinchona officinalis, which contains quinine, in the event that administrated by a solid individual, would delivers the very same side effect than that of jungle fever. Homeopathic

(MIJ) 2022, Vol. No. 8, Jan-Dec

techniques have been refined for more than 200 years in India and are now utilized worldwide. It has blended so all the way into the roots and customs of India and has been seen as one of the perceived frameworks of medication in medical care administration. Indian conventional medication has beginning in India developed through a constant course of change from its Vedic period and a solitary medication or mixes not doing so well are preferred over many crease plans. Even though these traditional methods of medicine have different beginnings and stages of development, they all have one thing in common: they use plants and plant-based preparations in their basic standards and practices when providing medical services. The degree of use of plants in an alternate arrangement of prescriptions shows up in Fig. 3. In addition, the traditional system is utilized by 85–90 percent of the Indian population for essential medical services.

## DISCUSSION

The majority of pharmaceutical active ingredients in Western prescriptions have come from NPs. This is by and large recognized to be certifiable when associated with drug revelation from NPs. In the "previous days," before the movement of high-throughput screening and the post-genomic time, more than 80% of medications were gotten from NPs or roused by regular mixtures. More than 100 compounds derived from NP are currently undergoing clinical trials, and less than 100 projects of a similar nature are in preclinical development. Plant and microbial leads are the basis for the majority of anticipated medications. Although the practice of using plants as drugs is commonly referred to as ethno-pharmaceutical, it is more accurately referred to as ethno-botanic medicine. A broad term used to describe any non-Western therapeutic approach is "conventional medicine." Ethnopharmacology is a much broader approach to drug discovery that includes the perception, depiction, and testing of indigenous medicines and their biologic functions. India's social legacy includes the development of Ayurveda and plant-based medical treatments through everyday experiences. In addition, the World Health Organization estimates that between 80 and 85 percent of the population in developing nations relies on complementary or alternative pharmaceuticals for fundamental therapeutic administrations and requirements. In every one of the traditional structures of prescription, the restorative plants expect to play a vital impact and comprise the spine. It is difficult to determine the total number of medicinal plants in existence; According to some estimates, approximately 35,000-70,000 plant species are utilized in human health care services worldwide. The Indian pharmacopoeia alone contains more than 3000 natural-source medications. According to estimates provided by the World Health Organization (WHO), populations in developing nations such as India (65– 70 percent), Rwanda (75 percent), Tanzania (50–60 percent), Uganda (55–60 percent), Benin (80%), and Ethiopia (90 percent) frequently make use of both conventional and complementary medicines in order to receive medical care. NPs are a fundamental piece of an enormous part of the customary and elective frameworks of around the globe. A remarkable percentage of the population in developed nations, including Australia (48-50 percent), Belgium (30 percent), France (50 percent), the United States (45 percent), and Canada (65-70 percent), occasionally uses traditional treatments for human health services. On the other hand, the global trade exchange of NPs amounts to approximately \$60 billion annually and grows at a rate of 8% per year. An investigation reveals that approximately 42% of the most popular pharmaceutical products in 1997 were NPs or drugs derived from NPs, worth \$17.5 billion in the United States. However, there has been a long-running debate between those who use NP treatments for various conditions and disorders and those who rely on modern medicine; cure with modern medicine. People who favor modern medical treatments argue that NP treatments are mostly "smoke and mirrors" and that nothing can be understood through NP consumption. They believe that natural remedies are typically bogus treatments used by dishonestly educated individuals. Be that as it may, "truth" remains "truth" under all circumstances. Numerous trial confirmations demonstrate that NP cures are not counterfeit treatments. In 1989, in English Clinical Diary the outcomes of a nonindividualized, randomized, twofold visually impaired, fake treatment controlled, half and half preliminary on the usage of Rhus Toxicodendron 6 C (A Homeopathic medicine) in patients with fundamental fibromyalgia. One of the findings of this investigation was that, in spite of significant departures from the truthfulness of homeopathy, the patients improved in all aspects when they took active medications rather than a placebo. The examination exhibited a gigantic blessing for the homeopathic drug. Parallel results were published in the journal Rheumatology in 2004 for

(MIJ) 2022, Vol. No. 8, Jan-Dec

individualized double-blind, placebo-controlled, randomized treatment of fibromyalgia patients in an investigation supported by the National Institutes of Health and the National Center for Complementary and Alternative Medicine. The most important finding and conclusion was that participants in dynamic treatment had significantly greater improvements in both personal contentment and global well-being. A previous placebo-controlled hybrid study in fibromyalgia that pre-screened for a single homeopathic treatment is replicated and expanded upon in this study. In addition, the study demonstrated that individualized homeopathy is fundamentally superior to placebo when it comes to relieving fibromyalgia sufferers of pain, improving their personal approval, and improving their global health. Dr. Shah led the 2013 homeopathic pathogenetic pilot test for Hepatitis C (Hep C) node experiment, and volunteers were prepared to fill out prescribed questionnaires and provide information. Hep C nosodes (Genotypes I and III) were planned using a fifteen-stage method, allowing for future preparation of an identical nosode. Twenty-two volunteers participated in the study; fifteen received Hep C nosode in 30c potency, seven received a placebo, and they participated once per week for a month. "An enhanced technique for nosode preparation used for a double-blind, randomized, placebo-controlled pathogenetic trial of the Hep C nosode produced indications, which may encourage its treatment," was the conclusion. For the treatment of immunologically mediated diseases like Hepatitis C, fibrotic pathology, and chronic inflammatory disorders, the nosode should also be investigated. The results of a Randomized Controlled Trials treatment for Nicaraguan children with loose bowels were published in Pediatrics. The treatment bunch had a measurably critical lessening in term of detachment of the entrails (p<0.05) and the amount of stool consistently between the two gatherings after 72 h of treatment (p<0.05) [61]. Numerous proofs suggest that herbal medicines have been used for centuries to treat illness and are inexpensive and ready-to-use for health care services. However, despite the public's faith in Western medical systems and their strength during the British era, the ancestral Indian traditional system emerged as an alternative mode of treatment in India following the establishment of the 1st Asian Medical College and Hospital in Kolkata in 1835. In Fig., the Medical College and Hospital of Kolkata 4, also known as Calcutta Medical College, is a medical school and hospital in the Indian city of Kolkata, which is in West Bengal.

## PHOTOGRAPHER:

In 1835, the medical college was built. Immediately, after this foundation on January 28, 1835 was followed by Madras Clinical School on February 2, 1835. The primary medical school in India, Medicinal College, Bengal, provided a deliberate education in western pharmaceuticals. Despite the fact that Lord Macaulay settled the dispute over whether India should support traditional medicines or western medicines, 5000-year-old Indian traditional medicine faced the greatest setback. His decision called for only the cultivation of western medicines in all East India Company-governed regions. Indian traditional medicine was effectively disheartened as a result, and Western medicine was seen as the most legitimate approach to follow. However, due to the fact that natural remedies have fewer or no side effects and are less dangerous for prolonged use than allopathic synthesized medicines, many modern medical practitioners are beginning to recommend alternative (natural) remedies to their patients when modern medications fail to work; those underwrite harmful incidental effects and may once in a while prompt demise. On the other hand, there is growing evidence to suggest that the components of NPs work together in a synergistic way, potentially neutralizing side effects when combined properly. A fundamental truth is at the heart of the civil debate between modern medicine and traditional medicine: every individual, paying little heed to schooling or infection, should be instructed about the facts concerning their ailment and the related symptoms of meds.

# CONCLUSION

Helpful information on Indian customary medication has moved different conventional methodologies with comparative or various hypotheses and approaches, which are of territorial importance. In 1951, following independence, the planning commission was established. A different department, the Department of Indian System of

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Medicine and Homoeopathy (ISM&H), was established in 1995, a significant amount of time later. In 2003, ISM&H changed its name to AYUSH, which stands for Ayurveda, Yoga, Naturopathy, Unani, Siddha, and Homoeopathy. It was a separate department of the Ministry of Health and Family Welfare in India. Despite widespread trust and confidence, Indian traditional medicines are under attack as a result of their mastery of modern drugs. The need to unite and systematize the entire traditional medical system with a very strong and optimistic approach to spreading our own medical tradition is very important. Thusly, phytochemical and biochemical examination with a nonstop undertaking for the restoration and spreading of Indian clinical legacy for the government assistance of the general public overall is required.

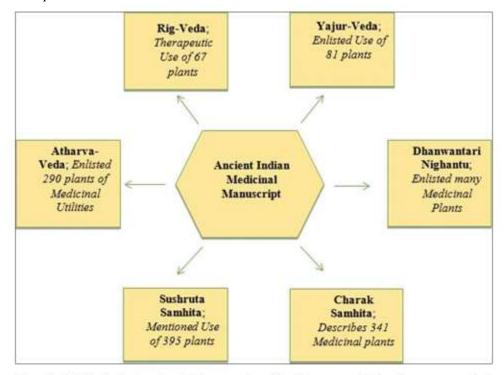


Fig. 1: Enlisted plants of the ancient Indian medicinal manuscript

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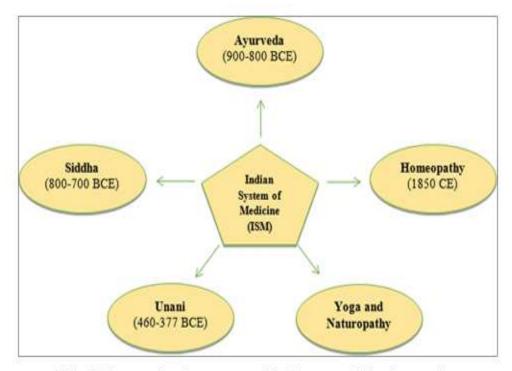


Fig. 2: Recognized systems of Indian medicinal practice

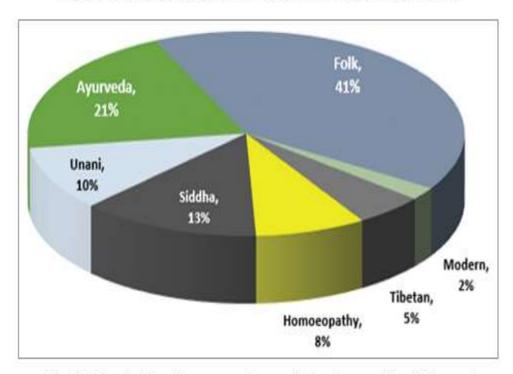


Fig. 3: Displaying the percentage of plants used in different systems of medicines in India

(MIJ) 2022, Vol. No. 8, Jan-Dec



Fig. 4: Medical College Hospital Calcutta (Kolkata) - mid 19<sup>th</sup> century

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