

Strengthening AYUSH Integration with Preventive Medicine

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Abstract

Integrating Ayurveda, Yoga, Unani, Siddha, and Homoeopathy (AYUSH) into preventive medicine enhances holistic health care by addressing lifestyle, mental well-being, and disease prevention. This integration is vital for addressing India's quadruple burden of non-communicable diseases (NCDs), communicable diseases, poor maternal and child health (MCH) outcomes, and an aging population. The National Health Policy 2017 promotes this integration through "Pluralism," aligning with the World Health Organization (WHO)'s Sustainable Development Goal (SDG) 3 and global traditional medicine priorities. Essential actions include adopting integrative care models, standardizing treatment protocols, training healthcare professionals, and advancing research. Despite its promise, challenges persist, such as limited awareness among modern physicians, minimal interaction between practitioners, lack of standardized protocols, and insufficient research on AYUSH's synergistic effects. The Indian Association of Preventive and Social Medicine (IAPSM) can play a pivotal role in overcoming these barriers. By advocating for policy development, adopting integrative care frameworks, and fostering educational and research collaborations with AYUSH institutes, IAPSM can advance the integration of AYUSH into preventive medicine. Promoting research and increasing public awareness of AYUSH's role in disease prevention and health promotion is essential for achieving a comprehensive healthcare system.

Keywords: AYUSH, integration, National Health Policy, non-communicable diseases, preventive medicine

INTRODUCTION

Preventive medicine and Ayurveda, Yoga, Unani, Siddha, and Homoeopathy (AYUSH) integration form a holistic approach to health care. It focuses on proactive health measures, reducing the burden of diseases. AYUSH, embodying traditional Indian systems, presents a rich tapestry of holistic practices. Integrating the two leverages preventive approaches deeply rooted in cultural wisdom and scientific evidence. This synergy addresses health comprehensively, from lifestyle to mental well-being.

Preventive medicine focuses on the prevention of diseases at primordial, primary, secondary, and tertiary levels through various interventions, such as diet, lifestyle, environment, and psychology. The AYUSH systems further dive deep into preventive aspects at all these levels with the sole purpose of enhancing life, well-being, and longevity (with the concepts unperceived through the modern medical technologies).^[1]

The epidemiological shift in India encompasses quadruple burden (non-communicable diseases (NCDs), communicable diseases, poor maternal and child health (MCH) outcomes, and

increasing elderly population and their healthcare needs). NCDs, including cardiovascular disorders and diabetes, significantly impact India's health, constituting about 28% of all deaths.^[2] Diabetes affects approximately 77 million adults.^[3] Amidst the NCD burden, communicable diseases, such as tuberculosis, persist, with India reporting 2.64 million cases yearly. Challenges in MCH encompass a maternal mortality rate of 113/per100,000 live births and an under-five mortality rate of 39/per1,000 live births.^[4] The demographic shift toward an aging population intensifies healthcare needs, with age-related conditions rising. The elderly, 8.6% in 2011, are expected to grow significantly, demanding comprehensive strategies for integrated health care across age groups in India.^[5] This complex health landscape necessitates comprehensive strategies and integrated healthcare

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approaches to address the diverse health challenges across different age groups in India. The National Health Policy 2017 (NHP 2017) champions a holistic healthcare approach through “Pluralism,” ensuring access to AYUSH care providers. This inclusivity aims to leverage AYUSH systems in achieving national health goals through integrative practices.^[6]

The principle of achieving the highest possible standard of health is a cornerstone of the World Health Organization (WHO) constitution and the United Nations (UN) human rights framework.^[7] Global agreements have emphasized the deep connections between health, peace, development, and environmental sustainability. Sustainable Development Goal 3 (SDG 3) aims to promote health and improve the quality of life for individuals across all age groups by the year 2030.^[8] The SDGs provide a unique opportunity to adopt a comprehensive, people-focused, and cross-sectoral approach to health and development, aligned with the life-course perspective. When implemented effectively, this approach facilitates the attainment of SDG 3, strengthens universal health coverage (UHC), and fosters well-being across all stages of life.^[9]

Recognizing AYUSH systems’ potential in preventing and managing health issues across different life stages, Indian policies advocate mainstreaming AYUSH, particularly in areas, such as preventive health care, women’s and children’s health, mental well-being, and rehabilitation. Rooted in ancient civilizations from East to West, AYUSH systems—“*Ayurveda, Yoga, Naturopathy, Unani, Siddha, and Homeopathy*”—offer a holistic approach to wellness within the cultural context of India. These systems uniquely contribute to NCD prevention and management, encompassing conditions, such as diabetes, cardiovascular diseases, cancer, and stroke. AYUSH emphasizes a comprehensive understanding of health, addressing physical, mental, and emotional well-being. Integrating AYUSH with conventional approaches complements a holistic framework for tackling NCD challenges. As India faces an epidemiological transition and a growing NCD burden, AYUSH systems emerge as valuable allies, showcasing a commitment to diverse healthcare approaches. The integration of AYUSH into the fight against NCDs signifies a significant step toward an inclusive, collaborative healthcare landscape in India.^[10]

CURRENT SCENARIO OF AYUSH INTEGRATION

Global

The 2016 Shanghai Declaration acknowledges the growing importance and prospective contributions of traditional medicine in improving well-being, in harmony with the SDGs. The WHO Traditional Medicine Strategy for the period 2014–2023 outlines a comprehensive framework for the appropriate integration, regulation, and supervision of traditional and complementary medicine (TCM) within the broader healthcare system. Its primary objectives include maximizing the contributions of TCM to health, wellness, and people-centered health care, alongside ensuring the safe and effective application of traditional therapies, products, and physicians.^[11]

In the context of addressing NCDs, the WHO Global Action Plan for the Prevention and Control of NCDs (2013–2020) recommends the recognition, promotion, and integration of traditional knowledge and cultural heritage, emphasizing the role of TCM in preventing and managing NCDs.^[12]

India

India’s healthcare landscape embraces a unique blend of allopathic medicine and traditional systems, such as AYUSH [Table 1]. Pioneering scholars, including Sir Ram Nath Chopra and KN Udupa, advocated for evidence-based integration, leading to key policies, such as the National Policy on Indian Systems of Medicine and Homeopathy 2002. The National Rural Health Mission in 2005 proposed mainstreaming AYUSH for primary health care, reinforced by subsequent policies, such as the NHP 2017, National Education Policy (NEP) 2020, and the National Digital Health Mission (2020).^[11] The National AYUSH Mission (NAM), inaugurated in 2014, underwent revisions in 2021–22, incorporating eight AYUSH public health programs. Notably, the integration of AYUSH with the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases, and Stroke (NPCDCS) demonstrates its practical application in health promotion and NCD management across various districts.^[13]

Research institutions, such as the Central Council for Research in Homoeopathy (CCRH), focus on “Homeopathy for Healthy Child,” incorporated with Rashtriya Bal Swasthya Karyakram (RBSK), while Siddha interventions, such as Nilavembu Kudineer, contribute to Dengue and Chikungunya prevention. The Ministry’s collaboration with Defence establishes Ayurveda outpatient departments (OPDs) in 12 Armed Forces Medical Service (AFMS) hospitals and 37 Cantonment Board Hospitals. In Poshan Abhiyaan, AYUSH-based advisories aid in Kuposhan Mukh Bharat. “*Saksham Anganwadi and Poshan 2.0*” during the Fifteenth Finance Commission period prioritizes maternal nutrition, feeding norms, and wellness through Ayush practices. Institutions, such as All India Institute of Ayurveda (AIIA), New Delhi, and International Trail Running Association (ITRA), Jamnagar, address obesity and anemia, while CCRH, New Delhi, explores homeopathic treatments for anemia. These endeavors showcase AYUSH’s multifaceted role in research and practical applications, contributing significantly to health care.^[14]

In conclusion, India’s integration of AYUSH into health care reflects a comprehensive approach to address health challenges at various life stages. The practical implementation of AYUSH in national programs, global collaborations, and research initiatives underscores its growing significance in promoting holistic well-being and preventive health care.

The integration of AYUSH into national programs and policies serves as a successful model for collaborative efforts between traditional and modern healthcare systems, emphasizing the necessity of a diverse and inclusive healthcare landscape. These

Table 1: AYUSH Integrative Initiatives undertaken by Ministries/Institutes/Organizations in India

Ministry/institutes	Integrative initiative
Ministry of AYUSH	National AYUSH Mission (NAM) <ol style="list-style-type: none"> 1. National Program for Prevention and Management of Osteoarthritis and other Musculoskeletal Disorders 2. AYUSH WITH NPCDCS 3. SUPRAJA 4. VAYO MITRA 5. AYURVIDYA 6. KARUNYA 7. AYUSH MMU (Medical Mobile Units) 8. National Programme on AYUSH for Morbidity Management and Disability Prevention (MMDP) of Lymphatic Filariasis (Lymphedema)
Central Council for Research in Homoeopathy (CCRH)	“Homoeopathy for Healthy Child,” integrated with Rashtriya Bal Swasthya Karyakram (RBSK)
Central Council for Research in Siddha (CCRS)	Nilavembu Kudineer, a Siddha polyherbal formulation, has been integrated into the comprehensive strategy for the prevention and management of Dengue and Chikungunya
Morarji Desai National Institute of Yoga (MDNIY)	Established 19 Preventive Health Care Units of Yoga in CGHS Wellness Centers in Delhi and NCR
AYUSH and Ministry of Defence	Establishment of Ayurveda OPDs at 12 Armed Forces Medical Services (AFMS) Hospitals and 37 Cantonment Board Hospitals
World Health Organization (WHO)	WHO Global Centre for Traditional Medicine
Ministry of Women and Child Development	Advisories for preferred food and dietary items to address Kuposhan Mukh Bharat
Ministry of Women and Child Development	Saksham Anganwadi and Poshan 2.0 (maternal nutrition, adhering to infant and young child feeding norms, implementing treatment protocols for severe acute malnutrition (SAM) and moderate acute malnutrition (MAM), and promoting wellness through AYUSH practices)

initiatives underscore the potential for transformative change in healthcare delivery, integrating traditional and modern approaches to ensure a more comprehensive and effective healthcare system.

Challenges in integrating AYUSH and modern system of medicines

- **Awareness Gap:** Modern medicine physicians often lack awareness or have inadequate information about the options available in AYUSH systems of medicine.
- **Lack of Interaction:** Practitioners from each system operate independently in clinical decision-making, resulting in minimal interaction. Unfortunately, this hinders the optimal utilization of the strengths of traditional medicine.
- **Limited Availability of Standardized Treatment Protocols:** The absence of sufficient research impedes the preparation of standardized integrative treatment protocols. This, in turn, acts as a barrier to informed choices for optimal health care.
- **Limited Consideration from Journals:** Limited well-conducted studies contribute to a lack of adequate evidence for traditional medicine interventions. Moreover, only a handful of leading journals are open to publishing research findings on traditional medicine, further restricting the available information.
- **Insufficient Research on Synergistic Interaction:** There is a scarcity of research papers showcasing the synergistic interaction between allopathic and AYUSH medicines. Unfortunately, this limited research hampers the development of comprehensive integrative healthcare approaches.

CURRENT EVIDENCES OF INTEGRATION OF AYUSH FOR MANAGING DISEASES: LIFE-COURSE APPROACH

“A successful approach to reducing the burden of non-communicable disease requires action at all stages of life”.^[15]

The key goal of taking a life-course approach to health is enhancing functional ability, which represents the combination of personal and environmental factors that enable individuals to pursue what matters most to them. Functional ability is essential for well-being at every stage of life and is closely tied to the fulfillment of individual rights. For a newborn or infant, this might involve activities, such as playing and feeding, whereas for older adults, it encompasses the ability to live independently without requiring external assistance. The determination of functional ability hinges on the intrinsic capacity of the individual, encompassing all physical and mental, including psychological, capacities, and the dynamic interaction between the individual and their physical and social surroundings [Table 2].^[15]

AYUSH and pregnancy and early childhood

The life-course approach commences with the critical stages of pregnancy and early childhood, where the Institute for Supply Management (ISM) addresses the holistic care of both the mother and the child, covering aspects, such as conception, fetal growth, antenatal, intra-natal, and postnatal care. These approaches are characterized by their holistic nature, emphasizing safety and effectiveness, such as practices for maternal health and child development, for stress reduction and overall well-being during pregnancy.^[27] Integrating AYUSH practices into antenatal and

Table 2: Studies with AYUSH interventions

Objective(s)	Intervention(s)	Outcome(s)	Conclusion	Author
Effectiveness of AYUSH therapeutic on COVID-19	AYUSH-64, <i>Kabasura Kudineer</i> , <i>Guduchi</i> (<i>Tinospora cordifolia</i> [Willd.] Miers.) adjuvant to standard care	Clinical improvement, WHO ordinal scale, viral clearance, and mortality	Rational use of integrated or standalone AYUSH interventions in mild-to-moderate COVID-19 patients is safe and may provide therapeutic benefits.	Thakar Anup <i>et al.</i> ^[16]
Prevalence of sleep problems in cancer survivors in the US population, and use of MBM therapies by cancer survivors with sleep problems	-	59.2% of cancer survivors reported sleep problems, 27.6% of survivors with sleep problems used MBM	MBSR, yoga, and tai chi can be especially recommended to improve sleep.	Voiss Petra <i>et al.</i> ^[17]
To evaluate the feasibility, safety, and evidence for pain reduction in older adults with chronic nonmalignant pain in the following mind-body therapies	Mind-body and relaxation techniques, biofeedback, meditation, guided imagery, hypnosis, tai chi, and yoga	Tai chi, yoga, hypnosis, and progressive muscle relaxation were significantly associated with pain reduction	The eight mind-body interventions reviewed are feasible in an older population. They are likely safe, but many of the therapies included modifications tailored for older adults.	Morone Natalia. E <i>et al.</i> ^[18]
To assess the benefits of mind-body interventions during pregnancy in preventing or treating women's anxiety and in influencing perinatal outcomes.	Mind-body interventions	Significant effect was observed on the level of relaxation as reported by the women (MD 0.78; 95% CI 0.10 to 1.46)	Mind-body interventions might be useful for preventing anxiety during pregnancy.	Marc Isabelle <i>et al.</i> ^[19]
To assess the effectiveness of antenatal yoga practices in reducing pain during the time of labor	Yoga which includes components, such as asanas, pranayama, relaxation techniques, om chanting, and meditation	Yoga is effective in reducing labor pain (SMD: -1.34 95% of CI: -1.86, -0.81)	Antenatal yoga can be a promising intervention in the field of obstetrics to reduce the intensity of labor pain	Boopalan Deenadayalan <i>et al.</i> ^[20]
To assess educational intervention and acupressure during labor on the mother's anxiety level and arterial oxygen pressure of the umbilical cord of infants (PO2)	Acupressure at BL32 acupoint	Acupressure reduce anxiety and improve fetal oxygenation	Acupressure is recommended to be used during labor for improving birth outcomes	Masoudi, Zahra <i>et al.</i> ^[21]
To rate the quality of evidence and the strength of recommendations to reduce BP in adults	Acupuncture, wet cupping, Baduanjin, bloodletting, auricular acupuncture, music, massage, Qi gong, moxibustion, relaxation therapies, biofeedback, device-guided breathing, yoga and tai chi (14 MBM therapies)	MBM therapies, lowers blood pressure	Massage and acupuncture plus antihypertensive drug benefits to lower BP and do not have contraindications for massage and acupuncture plus antihypertensive drug	Niu, Jian-Fei <i>et al.</i> ^[22]
To assess the effects of yoga on modifiable biological cardiovascular disease risk factors in the general population and in high-risk disease groups	Yoga therapy	Systolic blood pressure, diastolic blood pressure, and heart rate were reduced and improved HDL	Yoga can be considered an ancillary intervention for the general population and for patients with increased risk of cardiovascular disease.	Cramer, Holger <i>et al.</i> ^[23]
To access psychological treatment of IBS, focusing on symptom severity rather than IBS diagnostic criteria.	Mind-body therapies (meditation, relaxation, yoga, autogenic training, progressive relaxation, general training in stress coping, hypnotherapy, biofeedback, psycho-education, psychodynamic psychotherapy, and cognitive behavioral therapy)	Reduces symptom severity. Improvement more in children than adults.	Mind-body and other psychological therapies can be effective complements to medical treatment for IBS symptom severity	Shah, Khushbu <i>et al.</i> ^[24]
To assess the health-related quality of life, reduced fatigue, and mitigated short-term sleep disturbances.	Yoga	Improved health-related quality of life, reduced fatigue, and mitigated short-term sleep disturbances. It reduces depression, anxiety, and fatigue.	Yoga as a supportive intervention.	Cramer, Holger <i>et al.</i> ^[25]

Contd...

Table 2: Contd...

Objective(s)	Intervention(s)	Outcome(s)	Conclusion	Author
To assess the effectiveness of mindfulness-based stress reduction (mbsr) and mindfulness-based cognitive therapy (mbct) in patients with breast cancer.	MBSR and MBCT	MBSR/MBCT was significant for health-related quality of life, fatigue, sleep, stress, anxiety, and depression	There is short-term effectiveness and safety of mindfulness-based interventions in women with breast cancer.	Cramer H, <i>et al.</i> ^[26]

postnatal care aligns with the life-course approach's emphasis on laying a foundation for lifelong health.

AYUSH and adolescence

AYUSH systems are instrumental in guiding individuals through the transition into adolescence and adulthood, emphasizing crucial factors, such as cleanliness, lifestyle choices, dietary habits, and moral conduct to prevent lifestyle-related disorders. Within the AYURVIDYA component of the NAM, initiatives are in place to promote a healthy way of living and provide comprehensive nutrition education, incorporating dietary practices from AYUSH systems specifically tailored for school-aged children. Moreover, under the AYUSH Gram initiative of NAM, AYUSH-based lifestyles are actively advocated through strategies aimed at changing behaviors.^[27] Integrating yoga practices into daily routines further enhances both physical and mental well-being, addressing prevalent challenges, such as stress, anxiety, and sedentary lifestyles commonly encountered during the crucial life stage of adolescence and early adulthood.

AYUSH and adulthood

Adulthood presents distinctive health challenges, demanding comprehensive healthcare strategies. AYUSH systems, with a focus on holistic health, particularly stand out in managing chronic conditions. Homeopathy tailors treatments based on individual constitution, offering targeted intervention, while yoga and meditation, integral to AYUSH, provide multifaceted benefits in flexibility, cognitive function, and emotional resilience. Integrating AYUSH practices becomes crucial for addressing the complexities of adulthood, encompassing both physical and mental well-being, with Ayurveda emphasizing Dinacharya and Ritucharya for overall health promotion.^[28-30] As research validates AYUSH efficacy, their integration into mainstream health care becomes vital for diverse adult health needs.

AYUSH and geriatrics

The elderly, a valuable asset, deserves appreciation. AYUSH systems, especially Ayurveda, promote healthy aging by addressing physical and mental well-being through principles, such as Swasthavritta, focusing on preventive measures, Rasayana for rejuvenation, and Panchakarma for detoxification. Unani medicine adopts preventive and therapeutic modalities, including lifestyle and dietary recommendations, to maintain vitality in older individuals, emphasizing healthy aging.^[31,32]

AYUSH and mental health

Globally, mental disorders increased from 655 million in 1990 to nearly 970 million in 2019 (48% increase).^[33] Currently, one in every eight persons is living with a mental disorder.^[34] The

common mental disorders reported are depressive disorders, anxiety conditions, bipolar disorder, post-traumatic stress disorder (PTSD), schizophrenia, eating-related disorders, and various other mental health conditions.^[33,34] They are also the ones contributing the highest disability-adjusted life years (DALYs) to the total mental disorders DALYs.^[35] Conventional approaches using pharmacological agents were helpful to certain extent in treating these mental disorders but limited in resolving the symptoms fully and also cause adverse effects.^[36]

Yoga can contribute to addressing various mental health conditions. The esteemed sage Patanjali Maharishi, in his renowned work Yoga Sutras (aphorisms), describes yoga as “योगश्चित्तवृत्तिनिरोधः”

yogaś-citta-vṛtti-nirodhaḥ (Patanjali's Yoga Sutras 1.2)

Yoga is restraining the mind-stuff (Chitta) from taking various forms (Vrttis)^[37]

Another text Yoga Vasishta (Yoga Vasistha 3.9.32) defines Yoga as

मनःप्रशमन उपायःयोग इत्यभिधीयते !

Manah prashamanopayah yoga ityabhidhiyate ||

Yoga is a skillful method to calm the mind^[38]

These definitions suggest yoga's potential impact on mental health. Many mental disorders involve disruptions in cognitive processes, making yoga a potentially beneficial intervention. Despite yoga's broad scope, modern research primarily focuses on specific elements, such as postures, breathing techniques, and meditation.

Randomized controlled trials and meta-analysis across the world conducted in the past few decades have shown consistent results in improving mood in depression and bipolar disorders, reducing anxiety disorders, improving sleep quality, reducing negative symptoms, and improving social cognition among schizophrenics.^[39-45] Research elucidates yoga's mechanisms in these conditions, demonstrating dose-dependent effects. Yoga elevates brain-derived neurotrophic factor (BDNF), thalamic gamma-aminobutyric acid (GABA), and oxytocin levels.^[39,46-48] A 60-min session increased GABA by 27%, requiring weekly sessions to sustain elevated levels.^[39,49] Om chanting, a component of yoga, deactivates limbic system (beneficial in addressing rumination of depression/anxiety).^[50] [Figure 1]

In many of the mental disorders, the underlying factor is stress, which is characterized by speed/restlessness of

mind. Stress is also implicated in other NCDs as well. This stress leads to dysregulation of the autonomic system by increasing the sympathetic activity.^[51] Yoga acts on hypothalamic-pituitary-adrenal (HPA) axis, reducing cortisol and enhancing parasympathetic activity, and regulating autonomic nervous system.^[52,53] [Figure 1]^[54] Hence, integrating yoga into managing mental disorders can have wider effects as well.

The integration of yoga is easy to start with as this has no drug interactions, and there is wider acceptability among the citizens of India. Success in this direction has been demonstrated by the NIMHANS, Integrative Medicine Department.^[55]

The integration of AYUSH systems provides a holistic approach to address health challenges at all life stages, offering personalized and preventive solutions. From pregnancy to adulthood and the elderly, AYUSH encompasses Homeopathy's individualized treatment, the well-being benefits of Yoga, and Ayurveda's holistic principles. AYUSH systems, with principles of holistic health, personalized care, and preventive strategies, significantly enhance optimal health outcomes and overall quality of life across diverse populations.

POLICY RECOMMENDATIONS AND ACTIONS TO STRENGTHEN INTEGRATION OF AYUSH INTO PREVENTIVE MEDICINE

Role of IAPSM for strengthening integration of AYUSH with preventive and social medicine

The Indian Association of Preventive and Social Medicine (IAPSM), founded in 1974, is a non-profit professional body comprising experts in Epidemiology, Health Management, Health Promotion, and Family Medicine. The association is committed to advancing public health by contributing its members' knowledge to shape health policies, advocating for education, research, and community medicine initiatives, and serving as a platform for the continuous exchange of ideas and information.^[56]

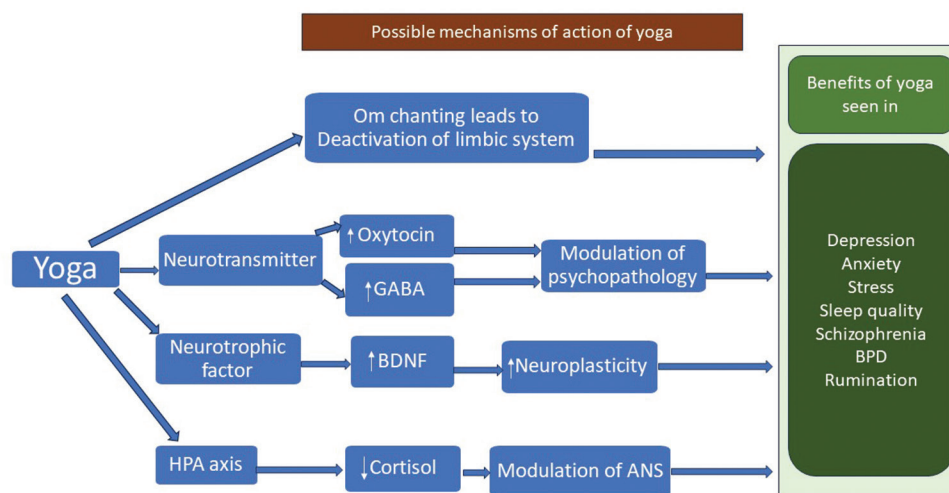
IAPSM body can play significant role in integrating AYUSH in teaching, research, and patient care rendered by different community medicine departments across the country. Following is the list of some important activities which can be initiated through this forum:

1. Advocacy-

- 1.1 IAPSM is a highest professional body of Social and Preventive Medicine experts, and it should be involved in developing policy and framing guidelines for strengthening integration of AYUSH with Preventive and social Medicine for promoting health, preventing diseases and ultimately prolonging life.
- 1.2 IAPSM can play a key role in adopting widely accepted model of integrative care for transforming primary care services provided through Health and Wellness centers, which are recently named "Arogya mandir" under AYUSHMAN Bharat. NIMHANS model (where doctors from different systems sit together and discuss the best approach to address the health issues of the patient)^[44] is one widely accepted model of integrative care may be advocated for adoption at primary, secondary, and tertiary care levels.
- 1.3 IAPSM can advocate sensitization of undergraduate students and Community Medicine postgraduate students on evidenced-based practice of AYUSH for promoting health, preventing illnesses, and managing diseases of significant public health concern through integrative approaches.
- 1.4 **Collaboration with AYUSH Institutes**—IAPSM body may have collaboration with National Institute of repute in AYUSH (NIMHANS, S-VYASA, National Institute of Yoga, and Naturopathy etc.) and bring them on the same platform in reference to common public health problems.

2. Teaching and Training/Patient care -

- 2.1 **Formulation of Guidelines and SOPs for integration AYUSH with standard care in diseases**



Modified with permission from Bhargav H et al, 2021

Figure 1: Possible mechanisms of action of yoga

of Public health importance—Through constitution of different taskforces, appropriate protocols/SOPs may be developed for integrative management of common diseases, such as diabetes, hypertension, obesity, and polycystic ovarian disease (PCOD) in collaboration with experts of AYUSH.

- 2.2 **Organization of training and workshops for Community Medicine faculty members**—Such programs can be organized for their sensitization about the role of AYUSH in reference to various public health problems, such as diabetes, hypertension, obesity, and PCOD.
- 2.3 Developing course curriculum for medical students and professionals for understanding the concept of integration, its process, and mechanism in reference to common public health problems.
- 2.4 IAPSM should also celebrate International Day of Yoga, Ayurveda, Homeopathy, etc. On this day, Community Medicine faculty and student should conduct community mobilization and sensitization programs for creating awareness about the importance of AYUSH.

3. Research -

- 3.1 **Promoting Research in collaboration with AYUSH Institutes**—IAPSM members may be given grants for having collaborative research involving AYUSH disciplines. IAPSM members can be involved in the protocol writing, supervision, analysis, and reporting of this research for assessing effectiveness of different AYUSH solutions.
- 3.2 IAPSM Conferences and workshops can have themes and subthemes on AYUSH-related subjects.
- 3.3 Journal of IAPSM can have sub-section on AYUSH to include and promote AYUSH research publication

Immediate actionable points

1. Constitution of National Level Taskforce/consortium for prioritizing efforts for utilizing the current opportunity for integrating AYUSH for promotion of health and prevention of diseases.
2. Organization of sensitization workshop in different states by state IAPSM bodies about importance of AYUSH in reference to different public health problems and current evidences.
3. Each state must plan year-round activities for mainstreaming of AYUSH.
4. Situational analysis of the existing practice of traditional, AYUSH, and integrative medicine.
5. Promoting research in the fields of integrative medicine (AYUSH and Allopathy).

Role of preventive medicine faculty

1. Preventive medicine/community medicine faculty has the unique advantage of dealing with the community directly and influence them with evidence-based approaches for promoting health and preventing diseases/ill health.
2. Faculty who has some training and understanding of

integration of AYUSH can incorporate the concepts in teaching and training of medical and health professionals.

3. Awareness generation in the community regarding areas where integration works and where it won't
4. Communicating the relevance of different home-available herbs, spices, and their uses in tackling minor health problems and also other cost-effective interventions to improve and enhance health and well-being
5. Discussing simple do's and don'ts based on Ayurvedic Ritucharya, Dinacharya, and Prakriti which were possibly not discussed in the modern medical curriculum
6. Discussing the case studies, cases where integration works and where it may not.
7. Promotion of research in the area of integrative medicine, short student projects
8. Liaisoning and collaborating between modern healthcare professionals and AYUSH professionals.

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Conflicts of interest

There are no conflicts of interest.

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