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# Indian System of Medicine on Digital Helpline for AYUSH Research Articles on Covid Resources: An Analytical Study

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#### 1. Introduction

Medical knowledge has been derived from the receptive and observational propositions and collective experiences from time immemorial. It is a study of the evolution of man and of human knowledge down the ages. In ancient times, health and illness were interpreted in a solar and anthropological perspective. Ancient medicine played a huge role in the addition of early cultures and it is timeless. The scope of medicine keeps expanding and requires a restoration of its aim and objectives. Systems should integrate health promotion and disease prevention on the one hand and treatment for acute illness and chronic care on the other. India has 22 official languages. Schools teach in 58 different languages in different parts of the country. There are newspapers in 87 languages. About a dozen scripts are used to communicate in these languages. Though the country once boasted about this linguistic complexity, people have since found that it poses barriers to effective communication. A solution would be the use of a single language across India, but researchers feel that would be too determined. "There are difficulties to creating combined language in India, not least because of the huge moving factor," Based on this Indian system of medicine is also available multilingual languages. (like Sanskrit, Urdu, Tamil, English, Hindi) It will comes under the single language and lay man can understand the medical system

## 2. EMERGENCE OF AYUSH DEPARTMENT IN INDIA

The Indian System of Medicine is of great antiquity. It is the peak of Indian deliberation of medicine which represents a way of healthy living valued with a long and unique cultural history. A separate Department of Indian Systems of Medicine and Homoeopathy (ISM&H) was set up in 1995 to ensure the optimal development and propagation of AYUSH systems of health care. The Department of ISM&H was re-named as the Department of AYUSH (an acronym for – Ayurveda, Yoga and Naturopathy, Unani, Siddha, Homoeopathy) in November 2003.

The Department of AYUSH under Ministry of Health and Family Welfare, promotes and propagates Indian systems of Medicine and Homoeopathy, and is committed to infuse the wisdom of traditional medicine with the methodologies of modern science, scientifically validating the systems and presenting them in the scientific idiom, relating their efficacy to modern life styles.

## 3. AYUSH SYSTEMS

## 3.1. Avurvedha

Ayurveda is a classical system of medicine founded around 5000 years ago in India. The medical knowledge in the Atharva Veda (one of the four Vedas) gradually developed into the science of Ayurveda. Atreya is acknowledged as the first great Indian physician and teacher<sup>1</sup> Charaka was a court physician to the Buddhist king, Kaniska. Based on the teachings of Atreya, Charaka complied his famous treatise on medicine the "Charaka Samhita". Susruta the "father of Indian Surgery" compiled the surgical knowledge of his time in his classic "Susruta Samhita" Ayurveda believes in the theory of Tridosha: Vata, Pitta and Kapha. The mental characters of men are as Satva, Rajas and Tamas. Ayurveda aims to keep these structural functional entities in a state of equilibrium which signifies good health.

## 3.2. Yoga and Naturopathy

It is primarily a way of life, first propounded by Patanjali in systematic form. It consists of eight components namely, restraint, observance of austerity, physical postures, breathing exercise, restraining of sense organs, contemplation, meditation and Samadhi. Yoga today is no longer restricted to hermits, saints, sages and it has taken its place in everyday life and has aroused a world-wide awakening and acceptance.

Naturopathy is a cost effective drugless, non-invasive therapy involving the use of natural materials in its treatment based on the theories of vitality, toxiemia, self healing capacity of the body and the principles of healthy living. Naturopathy is not only a system of treatment but also a way of life.

## 3.3. Unani

The Unani System of Medicine originated in Greece. This system is based on the teachings of Hippocrates and Gallen, developed into an elaborate Medical System by Arabs. The Unani system became enriched by imbibing what was best in the contemporary systems of traditional medicines in Egypt, Syria, Iraq, Persia, India, China and other Middle East countries.

## 3.4. Siddha

The Siddha System is one of the oldest systems of medicine in India and is practiced in the Tamil speaking parts of India and abroad. The term Siddha means 'achievements' and Siddhars were saintly persons who achieved 'results' in medicine. Eighteen Siddhars were said to have contributed towards the development of this medical system. Siddha literature is in Tamil and it is largely therapeutic in nature.

## 3.5. Homeopathy

Dr. Christian Friedrich Samuel Hahnemann, a German physician, scientifically examined this phenomenon and codified the fundamental principles of Homoeopathy. Homoeopathy was brought into India around 1810 A.D. by European missionaries and received official recognition by a resolution passed by the Constituent Assembly in 1948 and then by the Parliament.

# 4. REVIEW OF RELATED LITERATURE

Mallik Ajoy and Basu Tapasree (2017)<sup>2</sup> observed that the number of publications increased with compound annual growth rate of 10.39% during the studied periods. Evolving trend of the research topics was visualised by drawing the keyword co-occurrence map in this field. Shree Devi et al  $(2019)^3$  reveal that results of WV interoperated in statically T-test, Quality Control ( $\pm 3 \sigma$  analysis) & the results implicated deviating from the control, specification limits. These tests bring out the errors, misbranded and bad quality of markedly available products & there is a need to improve regulatory standards to ensure the therapeutic and quality goals. Rajalakshmi. K (2018)<sup>4</sup> explain the fallout of phytochemical analysis and antimicrobial action of this formulation Avaarai kudineer (AK) is encouraging as it offers mutual benefit to the patients both in the management of diabetes and also in the prevention and treatment of diabetic complications that are due to infections. Harini P (2020)<sup>5</sup> clarify that outcome were represented as pie charts. From this survey it observed that the siddha and Ayurveda form of medicines helps to overcome pandemic diseases. The present study thus concluded that siddha and ayurvedic medicines are effective against. Kedzia Ilona (2020) examine that the transformations referred to in the text concern both the domains of the human body, and the non-biological matter, being the object of alchemical operations of the Siddha adept. Such transforming science taught by Yākōpu is based on the action of certain substances credited with extraordinary potency. Suhas Shankar Joshi, V. Balamuralidhara (2020) discuses that Comparison study helps to understand the various differences between the registration process in regulated and emerging market. The main aim is to understand the regulatory process of registration process of herbals in various regulated and emerging market. Natarajan et al. Trials (2021)<sup>8</sup> explain Siddha clinical assessment and the occurrence of adverse effects were documented as secondary outcomes. Paired t-test was used in statistical analysis .Balamithra S et al (2019) revel that the results recorded in the present findings, it is concluded that Siddha polyherbal preparation has a potential antimicrobial agent on human oral pathogenic microorganisms, and hence, the herbal drug may serve as one of the potential antimicrobial agents. Rajeshbabu et al (2022)<sup>10</sup> expose that comprehensively analyzed the

case study and the efficacy of Indian Siddha medicine Kabasura Kudineer chooranam. Naturally occurring Indian Siddha medicinal (Kabasura Kudineer chooranam) compounds and its treatment as prevention measures so as to provide strategy and suggestions for the disease COVID-19 are discussed. Saikat Sen et al (2015)<sup>11</sup> explain the Results confirmed that Karisalai Karpam tablet could protect the liver against acetaminophen-induced oxidative damage possibly by increasing the antioxidant defence mechanism in rats.

DHARA is the acronym for Digital Helpline for Ayurveda Research Articles. It is the fi rst comprehensive online indexing service exclusively for research articles published in the fi eld of Ayurveda. DHARA is accessible online

## 5. OBJECTIVE OF THE STUDY

To examine the Indexed in the Pubmed from the Ayurveda articles.

To find out the density of indexed in Digital Helpline for Ayurveda Research Articles.

To examine the chorological indexed in pubmed and indexed in DHARA.

To identify the research publication of Clinical, Pre-clinical, Drug and Fundamental research.

To find out the Published Articles on AYUSH COVID-19 Clinical, Pre-clinical, Drug and Fundamental research Clinical and Other R&D.

To examine the distribution of author

To examine the publication density

To find out the year wise publication Ayurveda Articles in PubMed DHARA is the acronym for Digital Helpline for Ayurveda Research Articles. It is the fi rst comprehensive online indexing service exclusively for research articles published in the fi eld of Ayurveda. DHARA is accessible online atDHARA is the acronym for Digital Helpline for Ayurveda Research Articles. It is the fi rst comprehensive online indexing service exclusively for research articles published in the fi eld of Ayurveda. DHARA is accessible online at DHARA is the acronym for Digital Helpline for Ayurveda Research Articles. It is the fi rst comprehensive online indexing service exclusively for research articles published in the fi eld of Ayurveda. DHARA is accessible online.

Table1. Year wise No. of Ayurveda Articles in Indexed DHARA and PubMed

Sl. No	Year	Indexed in DHARA	Indexed in Pubmed
1	2022	81	353700
2	2021	72	315972
3	2020	48	155628
4	2019	215	957348
5	2018	192	896040
6	2017	380	1721340
7	2016	271	1263888
8	2015	442	2060892
9	2014	509	2301408
10	2013	516	2159928
11	2012	581	2268396
12	2011	3365	14435676
13	2010	4239	18849852
14	2009	3766	16727652
15	2008	3617	15916500
16	2007	3545	15718428
17	2006	3146	14190444
18	2005	2718	12568140
19	2004	2713	12483252
20	2003	2510	11483460
21	2002	2060	9474444
22	2001	1706	7677648
23	2000	1400	6394896

24	1999	1012	4546224	
25	1998	915	4074624	
26	1997	898	3942576	
27	1996	806	3631320	
28	1995	809	3503988	
29	1994	698	3093696	
30	1993	637	2730564	

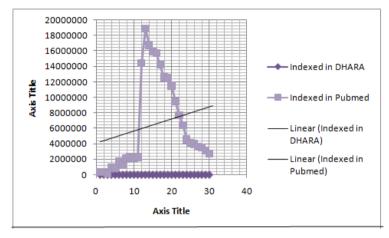


Figure1.

It is evident from table 1 and figure 1, during 1993-2022, In the year 2010 is the highest number of Index in Digital Helpline for Ayurveda Research Articles (DHARA) 4239 and indexed in Pubmed 18849852. The liner index in Digital Helpline for Ayurveda Research Articles is gradually increase and also the indexed in Pubmed. From year 1993 index on DHARA progressively increase up to 2003, after that up to in the year 2010 peak stage of index in Pubmed and DHARA. Between the year 2007 -2009 the productivity of index has step by step increase ranking like 4,3,2. from the year 2012 onwards productivity of index has dwindling because of the lack of linear indexing output of pubmed and DHARA.

**Table2.** AYUSH COVID-19 Clinical and Other R&D Initiatives from the repository utility (as on 22.7.2022)

Sl.No	Types of Medical	Types of Research				
	System	Clinical	Pre-clinical	Drug	Fundamental	Total
1	Ayurveda	3648	12878	5755	3150	25431
2	Yoga & Naturopathy	1003	199	0	224	1426
3	Unani	478	218	1263	733	2692
4	Siddha	509	981	1410	885	3785
5	Homeopathy	801	160	444	1083	2488
6	Sowarigga	0	0	7	4	11
Total		6439	14436	8879	6079	35833

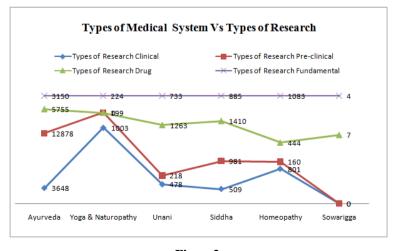


Figure 2.

From table 2 and figure 2Clinical and Other R&D Initiatives from the repository utility, reveal that up to the mark, July 2022, Ayurveda Pre-clinical study has higher(12878) than the clinical (3648) research. While the comparative from these two, therapeutic researches has the maximum repository utility (5755) .Yoga & Naturopathy from the clinical study is the highest number and compare with other study, and there is no evidence of the drug study. Unani medicine drug research is the highest of repository (1263) while compare with the fundamental research (733) and clinical Research (478). Siddha medicine on drug research repository is (1410) high and preclinical research (981) is the second place of publication, followed by the fundamental research (855). While comparative on clinical research in Siddha, Homeopathy medicine in clinical research has (108) high but at the same in preclinical research has low ((160) followed by the drug research.

Sl.No	Types of Medical Types of Research					
51.100	System	Clinical	Pre-clinical	Drug	Fundamental	Total
1	Ayurveda	63	16	28	151	258
2	Yoga & Naturopathy	0	0	0	5	5
3	Unani	4	1	1	22	28
4	Siddha	41	13	48	37	139
5	Homeonathy	1	0	Λ	Q	0

0

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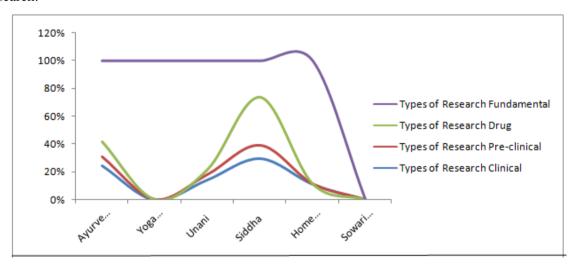
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Table3. Published Articles on AYUSH COVID-19 Clinical and Other R&D

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From table 3 and figure 3Published Articles on AYUSH COVID-19 Clinical and Other Research and Development activities of ayurveda and siddha overall publication of research articles has high compare with the other medical system. The fundamental research of ayurveda has high (151) followed by the siddha productivity .Siddha therapeutics publication is (48) high and the ayurveda has (28) low, while compare with the clinical in siddha (41) more or less the publication of therapeutics research has(48) balance, followed by the ayurveda clinical publication has (63) and the therapeutics has(28) imbalance. Unani and Homeopathy publication has very low in all types of research.



**Table4.** Articles at a Glance in Ayurveda

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Total

Sowarigga

1	All Articles:	9236
2	Full Text:	2768
3	Free Full Text:	1894
4	Paid Full Text:	776
5	Abstract Only:	5317
6	Title only:	1151

From the table - 4, data are collected from the Digital Helpline for Ayurveda Research Articles (DHARA) among the total articles (9236) the productivity of free full text articles (1894) has greater than the paid full text articles (776).

Table5. Authors at a Glance in Ayurveda

1	Total number of Author *	21061
2	Articles written by only one Author	2511
3	Maximum Articles for an Author	47
4	First Author	6968
5	Last Author	6687
	*Names of one author in different formats have not been merged	

From the table - 5, data are collected from the Digital Helpline for Ayurveda Research Articles (DHARA)

# Journals at a Glancein Ayurveda

1	All Journals :	944
2	Ayurveda (4757 Articles):	15
3	Complementary and Alternative Medicine (612 Articles):	18
4	Mainstream and Other Medical Disciplines (3097 Articles):	843
5	Journals not Indexed in Pubmed (1944 Articles):	15

## 6. CONCLUSION

Analysis of this article reveal that density of the article in the field of Ayurvedhic medicine has high and followed by the Siddha medicine. Both system has collaboration of drug analysis, standard operative procedure and clinical trials were one is co inside with others. Because of most of the herbal, chemical analysis and clinical trials similarity is digression.

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