

Alternative" or "complementary" doesn't say it quite right. Ayurveda, Unani and many other healing systems predate the development of Allopathic medicine, and for many centuries provided care to the majority of the population. They continue to do so even today, despite the economic and even cultural dominance of Allopathy. For example, according to the 1981 census, Kerala had 7,409 allopathic compared to 7,826 ayurvedic and 3,393 homoeopathic practitioners respectively. In a special issue on the subject, a report in the *Journal of the American Medical Association* notes that 42 per cent of American households spent at least \$27 billion for some form of alternative medicine in 1997, many more in developing countries.

Commercial preparations of ayurvedic and other 'herbal' formulas are finding a receptive market worldwide, encouraged, perhaps, by pharmaceutical companies' renewed interest in extracting the 'active ingredients' of a herbal medicine.

However, concerns have been raised: do manufacturing and labelling follow the principles on which the systems are based? The chair of the health ministry's Ayurvedic, Siddha and Unani Drugs technical advisory board has stated that most commercial preparations do not conform to Ayurvedic texts; there is no quality control or other regulation, and no information on contraindications or potential side-effects. This can make them both ineffective and dangerous, and allopathic journals regularly carry reports of 'adverse events' associated with herbal medicine. (Of course, many more people may be affected by improper use of allopathic drugs — or use of improper allopathic drugs.)

Why are these systems so popular?

Treatment with such medicine is seen as more affordable, effective, accessible, humane and holistic.

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From the point of view of allopaths, interest in these other systems is fuelled at least partly by dissatisfaction with allopathy: "disillusionment with the often hurried and impersonal care delivered by conventional physicians, as well as the harsh treatments that may be necessary for life-threatening diseases." They also seem to view 'alternative medicines' as essentially unscientific: harmless at best, but potentially dangerous, particularly if it causes seriously-ill patients to neglect effective (allopathic) treatment.

From certain perspectives, the WHO's

Allopathy and other medical systems

decision to establish a centre for global standardisation for herbal medicines makes a lot of sense, though it has been argued that standardisation is technically difficult and would make drugs unaffordable in developing nations. As for reports of specialist clinics to generate data on disorders for which efficacious traditional remedies are claimed, or the various clinical trials of such medicines, one does not know if these will focus on extracting allopathic treatments or documenting the traditional medical system. Doubts have been expressed about the government's commitment to research into traditional systems

Ethical questions

It is becoming common for patients to use more than one medical system, either simultaneously or alternating from one to the other. Sometimes there is no perceived conflict; sometimes such 'multi-drug therapy' is conceptually chaotic, and each system sees the other as harming the patient. Homoeopathy says steroids suppress symptoms. Allopathy says some ayurvedic medicines can cause heavy metal poisoning. This presents serious dilemmas to the health professional. How can you respect patients' rights to use another system, even if it doesn't make sense to you — and even if you believe it does harm?

The existence of more than one system should also be an opportunity for health professionals to learn about other forms of treatment. How should

the doctor open up to this possibility of another perspective, and not just extract another treatment according to his own system's principles? Finally, what is the role of the external authorities in the promotion and regulation of all medical systems?

The discussion articles in this issue raise a number of questions that must be examined in the light of a growing — though uneasy — interface of these different systems of medicine. A doctor describes what he sees as the tasks ahead in a 'milieu of mixopathy' and proposes the practice of 'integral

medicine'. The parents of a child with a serious health condition describe their efforts to mediate between two systems. A philosopher holds that both Ayurveda and Allopathy are used against women. A doctor and researcher describes the ethical principles guiding tribal medicine men.

It is hoped that these essays provoke a lively debate and reflection, ultimately contributing to ethical medical practice.

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The writer acknowledges the inputs of the editorial board