Ayurveda has been progressing continuously in its therapeutic aspects but the progress in diagnostic side (Nidanatmaka) aspect was extremely slow and stands still since the period of Bhavaprakasha except contribution of Ashta Sthana Rogi Pariksha specially Nadi pariksha of Yogaratnakara.

During medieval and then in British era Ayurveda education in Gurukula was completely vanished and Ayurveda become family business and was taught by elder family members to junior members of the family may be with few exceptions. It seems these family trained Vaidya devoted most of their time in procurement and preparation of their own drugs and clinical practice. Therefore, on the literary/theoretical side they adopted easy way of knowing few famous Shaloka and quotations and in practice instead of knowing the details they started diagnosis by Nadi Pariksha. Twenty types of Prameh contracted to Madhumeha, eight types of Udara Roga to Jalodara, eighteen types to few skin diseases, five types of Gulma to Vatika Gulma (phantom tumor) and so on. This period I call as elaboration to brief period in the field of Ayurveda Nidana.

After independence Ayurveda education was institutionalized, brought to University level and then regulated by the CCIM. At present trend of specialization at post graduate level is being done at many Ayurveda Institutions and Ph.D. level standard research in Ayurveda is also the part of many colleges. According to Ayurveda a scholar (post graduate) must inculcate the capacity to make elaborate from brief. Hence the present era is brief to elaborate.

In Ayurveda many laws are mentioned in brief and they required elaborations. There are many concepts for example Pancha-Mahabhidra, Tridosha etc which require scientific elaboration. There are many occasions in the literature where the link is broken and some portion is lost, they are to be found out and reconstructed. Some misunderstandings are created by the adulterants which are required to be corrected.

Now the question is how to elaborate? In my opinion whatever Ayurveda literature is available it should remain as such and no alteration should be made. But at the same Ayurveda says whatever is documented in the classics it is not the last word and may be invented new according to the need of the time. Hence, we can utilize the scientific advances made in contemporarily sciences without leaving our own basic principles and complete the broken chains or missing parts.

Contemporary knowledge is available in two ways viz. knowledge in basic science as biology, physics and chemistry, and in modern medicine. As long as basic sciences are concerned there should be no hesitation for utilizing the benefit of X-Ray, microscope, ECG, EEG, sonography, MMR and so on because they are not the invention of the modern medicine but adopted them to take their benefits. Similarly, Ayurveda can also utilize them according to its own principles. For example, one takes a group of Vatika or other types of Hrid-Roga and get their ECG done and if some pattern comes in notice then it may be used as diagnostic tool for Vatika Hrad-Roga. We can also standardize EEG pattern for four types of Apasmara. If we know exact Samparapti of Pakshaghata by MMR, certainly it will help in pinpointing the place and type of lesion which in turn will help in better planning the Ayurveda treatment.

We have to break the trend of miss-concepts. For example, I have published an article where it is established that twenty types of Prameha are different clinical entities with excessive urine (JAPS.co.in). Thus, an opportunity has emerged to add these already existing diseases to Ayurveda literature and construct as well research their treatment.

During thousands of years journey of Ayurveda literature suffered many types of adulterations might have done in good faith but they are hindering the progress. For example, I have published an article in which it is established on the basis Sushruta’ descriptions that each Dhatu is nourished/generated separately through the Ahara-Rasa (JAPS.co.in 2 (2)). It means different Poshaka Tattva for each Dhatu are present in Ahara Rasa. Hence, we can construct Ahara of each Dhatu. For example, Ahara of Raktu Dhatu is Rakta (due to Dravya Samanya), Lauha (Karma Samanya) and some plants, vegetables and fruits rich in vitamin B12, folic acid etc (to be found out). Similarly, Ahara of Mamsa Dhatu may be constructed as Mamsa (Dravya samanya) and milk, wheat, pulses etc (Guna Samanya) and so on.

At present Ayurveda is worldwide recognized for its hepatoprotective as well as cure of various liver diseases. Due to some reasons in ancient India, liver diseases might not have been so common, therefore the liver diseases are linked with spleen but at present era condition is just reverse with increase in pollution levels and faulty eating habits, the liver diseases are more common. Therefore, it is the demand of the hour that Ayurveda should revive the hepatology on the basis of descriptions of Plihodara, Yakritdaudara, Bhavaprakash’s description of Plilha Dosha and by research on clinical materials available in the Ayurveda Hospitals.

Cite this article as: Singh Gurdip. Editorial: Need for reviving and Construction of New Ayurveda Clinical Literature: Journal of Ayurveda Physicians & Surgeons October, 2017; Vol. 4 (4) 55