

BASES OF A NEW INDIAN SYSTEM OF COMPREHENSIVE THERAPEUTICS: 'NAVĀYURVEDA'

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ABSTRACT: Earlier papers developed a molecular-biological theory that unified widely scattered phenomena of health, disease and cure; rationalized laws & principles of Homoeopathy, and proposed a system of *unified therapeutics* which is further elaborated here. Unlike the past unsuccessful attempts at integrating Ayurveda and Allopathy, and as opposed to the implied directive, yet consistent with the objective, of the draft new national health policy of India, the proposed system is not an *ad hoc* combination of ancient and modern therapies, but emerges from a conceptual unification, at the level of basic molecular mechanisms, of mutually complementary and supplementary therapeutic principles, to maximize overall potentialities and to minimize overall limitations and costs. Thus it is *open* to assimilate any and all health promoting and/or restoring systems, procedures, recipes etc. including the orthodox ones. No proposition is dismissed or accepted without scientific trials and research. Auto-urotherapy, for example, is shown as neither 'cure-all' nor completely 'pointless'. All systems based on the principle of opposites, like Allopathy, Ayurveda, Unani etc., are integrated into one 'Neo-allopathy', those on that of 'similars' into Ultramicroxenopathy, and so on. These integrated systems are then 'unified into the new system named *Navāyurveda*, meaning *new Ayurveda*—the comprehensive science of the biological phenomena of health, disease and cure from conception to death. It preserves the grand aims of the ancient system to ensure health to the whole man, yet is relevant to modern sciences, and makes use of scientific evaluations and developments. It is expected to: (i) improve patient management by providing cheap, quick, safe and comfortable treatments, (ii) help primary health care as envisaged under Alma-Ata declaration—1978, (iii) enlarge the concept and scope of achievable health, (iv) help people to stay healthy, (v) help cure some of those diseases that are incurable or difficult-to-cure under modern system of scientific medicine-cum-surgery, and (vi) help eliminate some of the chronic and sub-chronic diseases, including stress disorders. *Navāyurveda* is thus the most comprehensive, ever-up-to-date and ever-growing medical science.

INTRODUCTION

It is now widely appreciated that mere absence of bodily disease is not health. Theoretically, both Ayurveda¹ and *Rāja Yoga*² are based on the *Sāṅkhya* philosophy and as such address to the whole man with the grand aims of ensuring health at all the four planes of consciousness manifestation: social, corporeal, mental, spiritual. However, operationally, Ayurveda works on the pre-scientific concepts of *tridoshas* (*vāt, pitta, kapha*) derived from the five *mahabhūts* (earth, water, energy, air, space) of the *Sāṅkhya* philosophy; its materia medica has no place and use for the modern scientific

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evaluations and advancements. Udupa's rationalization⁹ of *tridoshas* as three neurohumors (acetylcholine, catecholamines, histamine) for the description of the pathogenesis of stress disorders and their management with *Yoga*, is interesting. But this theory cannot encompass all the phenomena of health, disease and cure. The practice of *Rāja Yoga* is still associated with an element of mysticism because the underlying biological mechanisms are not fully known. Less profound systems like transcendental meditation have therefore come up (see below).

The system of scientific medicine-cum-surgery (or Allopathy) is the most widely practised system today. It has the popular attraction because of its scientific evaluations, life-prolonging procedures, antibiotics, quick reliefs and so on. But oftentimes, it cannot even diagnose diseases in early stages when laboratory tests are negative and only subjective symptoms are present. Its concept of health is therefore not that comprehensive as under *Ayurveda*, *Rāja Yoga* and Homoeopathy. Further, many a time, its medicines do not cure chronic diseases but, instead, lead to adverse side effects and iatrogenic diseases. These limitations, as shown below, are inherent in its basic operational principle of 'opposites' and can be obviated.

Homoeopathy⁴⁻⁷ treats the whole patient. It makes full use of the subjective symptoms and can cure diseases in early stages. It can also cure many chronic diseases declared incurable under scientific Allopathy. But it has a limited role in important areas like contraception, induced abortions, emergencies, accidents, poisonings, parasitic diseases, deficiency disorders etc. where Allopathy is very effective. Further, its theories are not consistent with modern sciences and hence it is not yet recognised as a 'scientific' system. This author^{8,12} has tried to revise the present-day scientific theories to provide a scientific basis after showing that none of the present-day sciences is conceptually and technically advanced enough to negotiate the homoeopathic phenomena. But some of its limitations are inherent in its basic law of 'similars'. (see below).

Thus, no single traditional system seems to be universally effective and acceptable. Combination of *Ayurveda* and Allopathy was tried in India, but many a trainee, after getting the degree of *Ayurvedachārya* (B.A.M.S./G.A.M.S.) was found practising not *Ayurveda* but Allopathy! (see below).

Combination of Allopathy and Homoeopathy, though potentially promising^{9,11,12} could not come about because allopaths dismiss Homoeopathy as unscientific and the true Hahnemannians insist that according to their philosophy⁴ and the conventional practice the two systems can never meet.

The present paper proposes an entirely new approach of unified co-ordination of integrated systems of therapeutics. Unlike the past unsuccessful attempts at integrating *Ayurveda* and Allopathy, and as opposed to the implied directive, yet consistent with the objective, of the draft new national health policy of India, the proposed system is not an *ad hoc* combination of ancient and modern therapies, but emerges from a conceptual unification,

at the level of basic molecular mechanisms, of various mutually complementary and supplementary therapeutic principles. The new system is named *Navāyurveda*, meaning new Ayurveda—the comprehensive science of biological phenomena in health, disease and cure from conception to death. It preserves the grand aims of the ancient Ayurveda to address the whole man to ensure health at all the four planes: social, corporeal, mental, spiritual. But unlike that, it is relevant to and compatible with the modern sciences and makes full use of the scientific evaluations and advancements.

These conceptual developments follow from the molecular-biological theory developed earlier⁸⁻¹¹ that unified widely scattered phenomena of health, disease and cure, rationalized the laws and principles of Homoeopathy, and proposed a system of unified therapeutics which is elaborated here in details. The basic objective is to maximize the overall potentialities and to minimize overall limitations and costs.

MOLECULAR-BIOLOGICAL BASES OF HOMOEOSTATIC MACHINERY

For the convenience of the readers, here we will recapitulate some of the salient points of the hypotheses proposed in the earlier papers.⁸⁻¹¹

Claude Bernard was the first to recognise that for full and healthy life, dynamic stability of the *milieu intérieur*, the internal environment in which the body tissues and cells live, is essential. But this intracorporeal-extracellular environment is in dynamic equilibrium with the intracellular environments of various cells and tissues. The chemical compositions of these two classes of environment control and are controlled by a two-way functional coordination with electrical and structural properties of various organs, tissues and cells and their membranes. This general coordination maintains multi-component or *profound homoeostasis* (for chemical constituents, pH, temperature, pressure, biopotentials etc.) throughout the whole body and is accomplished by a delicate and balanced coordination of innumerable processes and metabolic reactions taking place in a series of small steps catalyzed by enzymes. *This enzyme-populated-and-operated homoeostatic system is prior and basic to the immune system.*

All enzymes are proteins. Their synthesis is genetically controlled and is mediated through intra- and extra-cellular signals, chemical or electrical in nature. *This signal-populated-operated control system is basic and prior to the enzyme-populated-operated system.* The two systems are, however, interdependent because the synthesis and release of regulatory signals themselves involves enzyme-mediation, at least in part.

In this scheme, the CNS plays or contains the *master regulator*, of even the regulatory signals, operating through still more basic regulatory signals and mechanisms. *The CNS-master regulator is thus the most basic homoeostatic unit.* It has two-way neural and/or humoral connections, with the cerebral cortex and psychic centre on the one hand, and with the peripheral nervous systems, organs and tissues on the other. The newly proposed science

of parapsychology⁹ studies these over-riding CNS-mediators in the phenomena of health, disease and of cure. Patterson *et al*¹², for example, have reviewed experimental data to show that electrical signals from the central neurons and chemical signals from the non-neuronal tissues mediate post-natal transformation of some of the prenatal adrenergic to postnatal cholinergic neurons in the sympathetic ganglia in rat. This involves switching on and off of genes for the synthesis of enzyme proteins.

Other experimental evidence in support of these hypotheses has been cited in earlier papers.⁸⁻¹¹

There are thus a number of physiological planes for the *homoeostatic machinery* to operate from, for the primary cause of disease to situate on, and for the therapeutic agents to act upon. These physiological planes are: (a) CNS-master regulator, (b) regulatory signal-populated-operated unit including neuroendocrine-endocrine system, (c) enzyme-populated-operated unit, (d) intra-and extra-cellular environments, (e) immune system, (f) ANS-system, (g) cells, tissues and organs, including the absorptive and excretory systems.

These units are highly interdependent, inter-connected and interwoven through multiway biofeed back/forward mechanisms into a single homoeostatic machinery involving and pervading all the cells, tissues and organs of the body. This self-surveillant, self-correcting and self-maintaining homoeostatic machinery may be taken as synonymous with the popular though loosely used term *nature*. The enzyme-signal-populated-operated *homoeostatic capacity* is responsible for maintaining profound homoeostasis. This capacity may be taken synonymous with the lay term 'body resistance', which is prior and basic to the immune defence. The *existence of homoeostasis* somehow mediates the feelings of health, relief and well-being. The perturbation of homoeostasis mediates manifestation of disease symptoms, subjective as well as objective.

THE DISEASE STATE AND CLASSIFICATION OF DISEASES

The disease, like health, is a physiological state involving all the cells, tissues and organs to varying extents.

The state of health is characterized by the homoeostatic state which has two components: (a) the existence of homoeostasis, and (b) the patency and fullness of the homoeostatic capacity. The diseases can therefore be classified as follows:

1. *The self-persisting diseases*, where both the homoeostasis and homoeostatic capacity are perturbed and therefore the diseases tend to persist and continue. These can be of three sub-classes: sub-chronic, chronic, incurable.

(a) A *chronic* disease is one in which the self-correcting homoeostatic machinery cannot rectify the homoeostatic capacity by itself alone nor even with long symptomatic treatments using 'opposite' medicines (i.e. those acting on the principle of opposites), but can do so with the help

of similar medicines (as of Homoeopathy and ultramicroxenopathy¹¹), via the CNS-mediation by inducing requisite enzymes and/or regulatory signals.¹¹ (see below).

(b) A chronic disease becomes *incurable* when the homoeostatic capacity becomes irreparable even with the similar medicines.

(c) Between these two extremes, there would be sub-chronic diseases in which the homoeostatic capacity can be self-rectified but after a long period, without or with symptomatic treatments with opposite medicines. Similar medicines would shorten the course. Thus those diseases which are curable with allopathic/ayurvedic opposite medicines are sub-chronic and not chronic.

2. *The non-chronic diseases*, where the homoeostasis at grosser sites is perturbed but the basic homoeostatic capacity remains intact. These can be of three sub-classes:

(a) In *non-chronic, self-correcting* diseases, the intact homoeostatic capacity can and does restore the homoeostasis in a short period. Similar medicines make the course shorter. Opposite medicines effectively shorten the duration of the treatment and make it comfortable.

(b) In *non-chronic, non-self-correcting* diseases, the homoeostatic capacity though intact is, by itself alone, incapable of correcting the *huge* perturbations in homoeostasis but can do so with the cooperation of 'opposites' drugs and/or procedures as for instance under the scientific medicine-cum-surgery. These refer to the manageable situations under emergencies, accidents, poisoning etc. Similar medicines would help patient management if given concurrently with opposite drugs/steps.

(c) In a *non-chronic, incurable disease*, the intact homoeostatic capacity cannot rectify the *gross* perturbations in homoeostasis even with the help of 'opposite' procedures.

THE THERAPEUTIC PRINCIPLES, MODES OF ACTION, POTENTIALITIES AND LIMITATIONS

(1) *The principle of opposites*: The remedial or corrective steps under this principle try to neutralize, oppose, remove, suppress or block the products and results of disease-processes by producing conditions and effects opposite to those created by the disease. The practice of modern system of scientific medicine-cum-surgery (i.e. Allopathy), Ayurveda, and Unani, is based on this principle. Ayurvedic medicines aim at lowering the *dosha* which is found raised due to disease and at raising the lowered one. This paper calls these medicines as 'opposite' medicines and procedures as 'opposite' procedures.

These opposite steps produce two beneficial effects: (i) They restore homoeostasis and thereby induce the feeling of relief and well-being quickly. (ii) The disease-generated xenobiotics¹⁰ are prevented from perpetuating the old disease processes and also from creating the new ones. During the thus-

created symptom free state the self-correcting homoeostatic machinery or nature is left free to rectify the homoeostatic capacity.

Therefore, these steps are useful in handling accidents, emergencies etc. and also in treating non-chronic diseases because in these conditions homoeostasis-perturbation is the main, over-weighing problem.

However, the opposite steps (medical, surgical or others) cannot rectify the homoeostatic capacity. Hence, for the symptomatic treatment of chronic and sub-chronic diseases, the opposite medicines are required to be given as repeated doses in macro quantities for long period(s). This leads to undesirable side effects and iatrogenic diseases created by the opposite drugs as well as by the yet-un-neutralized disease-created xenobiotics¹⁰, if any. This is because the opposite medicines do not cover the complete case. If the adverse side-effects over-weigh the beneficial effects, the drug goes out of use. This way, allopathic medicines have been coming and going—a trend which still continues. The new unified system, *Navāyurveda* would be free from these hazards and limitations.

For diagnosis under the scientific Allopathy the disease must advance enough to create laboratory detectable tissue changes and/or biochemical abnormalities and/or biopotential disturbances of statistically significant magnitudes outside the 'normal range' for the population, and Not for that individual subject. That is why, diseases are not diagnosable in early stages when subjective symptoms are present but laboratories report N.A.D. (nothing abnormal detected). We propose 'lesser health' as the term to denote this state of health or of disease!

In order to detect fine and finer abnormalities for diagnosing diseases at earlier stages, phenomenal development of sophisticated techniques is taking place. But it has increased the physician-patient distance and costs. The new comprehensive system would obviate these limitations.

(2) *The principle of similar*: The Homoeopathy⁴ and Ultramicroxenopathy¹¹ work on this principle. Xenobiotics¹⁰ in small quantities are given to cure those disease symptoms which large quantities of that xenobiotic produce in healthy subjects¹¹. These are called 'similar' medicines here. Xenobiotic is a substance present in the *milieu intérieur* in unnatural quality and/or abnormal quantity¹⁰. The total biological response of the organisms to a xenobiotic or 'non-self' substance is studied under the new science of xenobiology¹⁰. The 'self' substances are those which are normal constituents of the organism and therefore do not elicit any xenobiotic response.

The ultramicro quantities of these 'non-self' xenobiotic drugs have been postulated¹¹ to induce disease-specific 'self' remedies in the form of requisite enzymes, and/or signals via the CNS-mediation. They thereby rectify and restore the homoeostatic capacity which in its turn restores the homoeostasis. These medicines therefore act from centre to periphery.

The similar medicines are essential and indispensable for the treatment of chronic and sub-chronic diseases where opposite medicines have no or

limited utility. The course and treatment-duration of non-chronic diseases would be shortened by similar medicines. The medicines are also expected to be able to treat some of the hereditary diseases by switching on and off the requisite genes¹⁰.

The law of similars envisages medicinal removal of disease-created abnormalities from the natural physiological processes. The similar medicines, in usual doses and frequencies are therefore incapable of creating physiological abnormalities as those required in contraception, induced abortion etc. Moreover in emergencies, accidents, poisonings etc. the perturbations in the homeostasis are so large and gross that the homeostatic capacity, even though intact, cannot restore homeostasis even with similar medicines. The opposite medicines and procedures are very effective in all these situations.

It might however be pointed out in the passing that repeated indiscriminate use of these 'non-self' xenobiotic drugs is fraught with the possibility of implanting deep xenobiotic diseases on the homeostatic capacity.

(3) *The principle of same* : Here the pathogenic agent in modified and/or attenuated form is used prophylactically or curatively. For immunizations with vaccines and toxoids the altered pathogens induce antibodies to oppose and inactivate the live-pathogens if and when introduced subsequently. This process, in part, involves the law of opposites for operation.

The cure of xenobiotic-induced diseases with high potency homeopathic drugs prepared from the causative agent is effected on the principle of same.

The use of homeopathic nosodes and sarcodes however is based on the law of similars and necessitates prior provings in healthy subjects.

(4) *The surgery* : It is a distinct discipline by itself. With the modern advancements it has now become an integral part of the scientific system of medicine-cum-surgery and is no longer an art but has become a science. So much so that two equivalent divisions in a number of specialities are well recognized and co-exist, like surgical neurology & medical neurology, surgical cardiology & medical cardiology and so on. The surgical and medical experts work together for both the diagnosis and treatment.

(5) *Rāja Yoga* : As discussed earlier^{8,11} Patanjali's *Rāja Yoga*² with eight steps is a very comprehensive system addressing the whole man at all the four planes; social (*yam, niyam*), corporeal (*āsana, prānāyama*), mental (*pratyāhār, dhārna, dhyāna*), spiritual (*samādhi*).

The *yams* and *niyams* illustrate the do's and don't's for social harmony. These attitudes, particularly at the time of practice, also help progress in mental yoga.

The *āsans* and *prānāyama* comprise the *physical yoga* which in *Hatha Yoga* consists of *āsans, prānāyama, mudrās* and *bandhs*. According to Patanjali² (2/46, *Sthirsukhamāsanam*), stability and relaxation are the two essential requisites at every stage of the physical yoga. Sub-threshold electronic controls thereby become operative in exclusion of the spike potentials surg-

ing in dynamic exercises. The static yogic exercises are therefore prescribed for their recuperative and curative effects, whereas dynamic ones are prohibited during ailments. It may be relevant to point out that Udupa's experiments on *āsana*s by rats ensure stability but not relaxation². However, these yogic exercises are reported^{3,12} to produce long term and deep physiological changes supporting the hypothesis that the local circuit neurons (LCNs) and the local neural circuits (LNCs) which they form within the CNS mediate these processes.^{8,11} The peripheral nervous system through lower centres of the CNS affect the CNS-master regulator and thence the homeostatic machinery.

The *pratyāhār*, *dhārnā*, *dhyān* and *samādhi* comprise the mental yoga. Decentration and withdrawal (*pratyāhār*) followed by wilful concentration (*dhārnā*) and then *effortless* meditation (*dhyān*) is the guiding principle and procedure. This ultimately leads to the state of *samādhi* when only the awareness of the object of meditation remains and that of the self fades away. The three (*dhārnā*, *dhyān*, *samādhi*) together constitute the *sanyyam* (ch. 3, aph. 4) which in Patanjali's *Rāja Yoga* is the most powerful mental technique². This ultimately leads to the 'infallible un-waivering intellect' (*ritambhara pragya*, 1/48) and then to the 'realization' (*Kaivalyam*, 4/34). The state of *samādhi* induces intuitive and creative thinking. This state is common to all the variants of *Yoga*. Shri Ramakrishna Paramhansa referred to this state when he advised: Become *the act* while acting, and *the thought* while thinking. It is the secret of all success everywhere at all the four planes.

The effects of mental *yoga* are mediated through the higher centres of the CNS (cerebral cortex, psychic centre) on to the CNS-master regulator and thence to the homeostatic machinery¹¹.

The potentialities of the *Rāja Yoga* largely remain unexplored. The transcendental meditation (T.M.) due to Maharishi Mahesh Yogi is based on only one aphorism (1/28, *tajjapastadarthabhāvanam*) and has gained world-wide popularity for its beneficial effects including tranquillizing the mind. A host of other recipes still remain untested and 'untasted'!

With Patanjali² this author has found that exhalation followed by 10-15 seconds holding of breath outside if repeated 4-5 times is very effective in controlling the mind.

This author has found the following combination of physical and mental *yoga* as very simple yet effective in tranquillizing the mind and in removing the psychological components of disease. Here one breathes slowly and comfortably keeping the ratio of inspiration to expiration as 1:2. With eyes and ears closed one concentrates on the 'bumming' sound produced. Success lies in hearing no other sound and in seeing no images; that is, in excluding all thoughts, because thinking occurs mostly via sounds and images. With experience, one learns to stop hearing external sounds without having to close the ears. This can be practised any time, in any position/posture.

Thus *Rāja Yoga* is a very profound system with unestimable potentialities. If children could be introduced to it early in life by making it a part of the curriculum, the future generations can be expected to have people with less wandering minds, less clouded intellects, more composed personalities and refined social values.

(6) *Others*: Here we can put any and every health promoting and/or restoring system, procedure, recipe, formula etc. including the orthodox ones. We propose to encourage scientific trials and researches in these systems. We also propose not to dismiss and discard any proposition without scientific research/trials.

In view of the several reports in the press, we propose to analyse auto-urotherapy according to the molecular-biological theory summarized above.

Possible molecular-biological bases of auto-urotherapy: The self-persisting chronic diseases are associated with perturbation(s) in the homeostatic capacity including enzyme deficiencies. When the population size and/or functional activity of some strategic enzymes fall below normal the unmetabolized substrates and/or metabolic products of isozymic action(s) could/would be excreted in the urine. Administration of this auto-urine to the patient may lead to: (a) activation/induction of the requisite enzymes, or (b) overloading and suppression of the already deficient enzyme population and activity. In the former condition a curative effect would follow and in the latter an aggravation. The work of Sur and Bhatti¹⁶ seems to suggest that auto-urotherapy might be helpful in some cases of Indian childhood cirrhosis. Readers are referred to an earlier paper¹¹ for detailed discussion on the induction of enzymes for curative action of homeopathic drugs.

Therefore auto-urotherapy is neither a cure-all nor completely pointless. The need for scientific research can hardly be over-emphasized, however. Urine is a known source of urokinase and of erythropoietin.

INTEGRATION OF SYSTEMS BASED ON THE SAME THERAPEUTIC PRINCIPLE

The term 'integration' here signifies combination of systems working on the same therapeutic principle into a composite system with the objective: (a) to provide alternative medicines for treating the same condition to compare their relative effectiveness and costs, and (b) to find remedies to treat yet-unmanageable conditions.

The systems based on the principle of opposites may be integrated into a single system called, say 'Neo-allopathy'. For historical considerations names of original systems may be retained as implicit in the names of medicines. These opposite systems are (i) modern system of scientific medicine, (ii) conventional Ayurveda, (iii) Unani, (iv) other (indigenous) systems including orthodox recipes, prescriptions, herbs etc. This integration may be based strictly on the scientific trials and research but no formula or procedure should be dismissed or accepted without scientific trials.

Strong public opinion and acceptance may be prepared with well docu-

mented and publicized research before the experiments on integration are conducted in medical education and in field trials on patients. The past Indian attempts at integrating Ayurveda and Allopathy failed, probably because these precautions were not taken. Similar integrations can be done for various systems based on other principles.

THE NAVAYURVEDA

The *Navāyurveda*, meaning new Ayurveda represents the highest limit of unified coordination of integrated systems. It comprises (a) Neo-allopathy i.e. all systems and procedures based on the principle of opposites integrated together through scientific trials and research, (b) Ultramicroxenopathy²¹ including Homoeopathy, (c) Physical *Yoga*, (d) Mental *Yoga*, (e) scientific Surgery, (f) healthy counselling including Psychotherapy and Thought treatments, (g) Naturopathy including Diet-therapy, and (h) others, as mutually compatible and complementary and/or supplementary constituents. Here the term 'unified' signifies conceptual unification of therapeutic principles with a view to maximize the overall potentialities and plus points and to minimize overall limitations and costs.

According to the hypotheses developed in earlier papers²⁻²¹ and summarized above, the diseases in fact are ultimately cured by the multiplanar self-serveillant, self-maintaining and self-correcting homoeostatic machinery itself by removing its own perturbations, without or with the aid of medicines and/or other agents/procedures via the CNS-mediation. The natural remissions and cures, curative effects of thoughts, suggestions and beliefs, treatments with physical *yoga* and mental *yoga*, homoeopathic drug therapies, treatments of non-chronic and sub-chronic diseases with 'opposite' medicines etc. are all *con-current* processes because they all operate through the CNS-master regulator. Surgical procedures, like opposite medicines, help restore the homoeostasis quickly leaving homoeostatic machinery alone to act freely. Therefore these are all mutually compatible as well as complementary and/or supplementary processes and hence are unifiable into a very powerful comprehensive system.

In reverence to the Indian tradition of generalizations the new system has been called the *Navāyurveda*. It signifies a new Indian system of comprehensive therapeutics and a medical science of the biological phenomena in health, disease and cure from the moment of conception to that of death. Its other interesting features are as follows:

(i) It preserves the grand aims of the ancient system to ensure health to the whole man at all the four planes of personality manifestation: social, corporeal, mental, spiritual. This is because both *Rāja Yoga* and Ultramicroxenopathy (Homoeopathy) address to the whole man and are its integral constituents.

(ii) This also enlarges the concept and scope of 'achievable' health.

(iii) For the treatment of chronic and sub-chronic diseases, the opposite

medicines would now be used in minimal (number of) doses and quantities only just sufficient to keep the symptoms in check. The treatments would therefore be comfortable as well as safe, that is free from the hazards of adverse side-effects, and iatrogenic diseases, usually associated with long symptomatic treatments with repeated doses of allopathic medicines in macro quantities.

(iv) The agony and discomfort of the homoeopathic aggravations would now be obviated with concurrent opposite drugs.

(v) Some of the chronic diseases incurable with opposite medicines alone, would become curable with concurrent use of similar medicines and *Rāja Yoga*. The treatments would also be safe and comfortable.

(iv) The treatment of sub-chronic diseases would become short, safe and comfortable.

(vii) Homoeopathy is known for offering medical treatments of surgical cases with more satisfying results^{11,12} and less chances of recurrence than surgery. Coordinated combination of surgery with similar and opposite medicines seems to provide exciting possibilities, in the treatment of effusions, inflammations, tumors, nodules, cysts etc. particularly of internal locations.

(viii) Because of the drastic cut in the use of costly opposite medicines and of some costly tests the treatments would be cheap under *Navāyurveda*.

(ix) Homoeopathy and *Rāja Yoga* together with minimal number of essential opposite medicines could form the backbone of a cheap and effective primary health care scheme as envisaged under the Alma-Ata declaration¹⁴ of September 1978. This will help abort diseases in early stages and make people stay healthy. Some of the conventional chronic and sub-chronic diseases including stress disorders, may even be eliminated by nipping them in early stages.

(x) The benefits of the scientific evaluations, terminally life prolonging and life saving procedures, antibiotics, preventions, immunizations, quick reliefs and so on, offered by the modern system of scientific medicine-cum-surgery would continue to be available with *Navāyurveda* and with improvements.

(xi) The concept and scope of *Navāyurveda* is very inclusive and wide. It is thus an ever-growing and ever-up-to-date and best medical science. It has the most comprehensive concept and scope of achievable health.

CONCLUSIONS

(i) Conceptual unification of therapeutic principles from the molecular-biological theory developed earlier has yielded a very promising comprehensive system called *Navāyurveda*, meaning new Ayurveda.

(ii) The *Navāyurveda* has exciting potentialities but minimal limitations and costs. It is open to assimilate any and every health promoting and/or restoring proposition but with scientific research/trials. Nothing is accepted or dismissed without scientific trials and research. It is thus the most com-

prehensive, ever-up-to-date and best and ever-growing medical science. Its concept of health is also the most comprehensive.

(iii) The need for scientific researches, in various medical institutes, in *Navāyurveda* can hardly be overemphasized.

(iv) The unified integration of therapeutic systems into one *Navāyurveda* would help eliminate rivalries and pool and deploy all resources for fight against disease.

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Editorial comment: The author has presented in a series of papers his concept of the homoeopathic science based on micro-biology. No doubt the presentation is logical, lucid and absorbing. But there is an inherent danger in carrying a dynamic system to the laboratory in the author's anxiety to make it appealing to the scientific world. Whatever view-points the learned

author has contributed to Homoeopathy from a certain standpoint are worth examining since they have opened a new avenue of thinking. But instead of making an exclusive view of the large field of Homoeopathy from within the parameters of a specific branch of knowledge if it is examined by a more holistic approach there is a reasonable chance of presenting it as a balanced and intergrated science to the world. It may or may not appeal to the scientific world in its current phase of looking at the universe around from a totally materialistic concept. But there is positive evidence that at least, in the field of medicine, a concept is fast evolving which is trying to bridge the gulf between the materialistic and spiritualistic domains in man and bringing this holistic concept within the realms of science. This concept is psychosomatic medicine.

In his latest paper, the learned author has made an effort to integrate the different systems of therapeutics. For that purpose the theory he has expounded is of a chemical environment that is postulated to exist between the *milieu intérieur* of Claude Bernard and the intracellular atmosphere. A balance between these two is described as a state of homoeostasis. Various levels are mentioned where this state is maintained to give a state of well being to the individual which is equated with health. The system is said to possess a homoeostatic capacity that ensures balance between the different environments through the medium of enzyme-populated and signal-populated-operated systems. All this raises two issues: When the term capacity is employed it implies a potentiality and homoeostasis becomes the resultant or manifested state of it expressed through the sense of well being. What converts the potentiality into the manifested state? Obviously it is a *force*. And if there are constant perturbations at the levels that require constant re-adjustment of the system to maintain the requisite balance it automatically implies that this force also has to be *dynamic*. It also implies that the system is susceptible to the laws of dynamics. That shifts the perspective to the realm of bio-physics. An attempt to project the homoeopathic principles through the laws of dynamics has been made in the paper A2 of the Symposium on Hahnemannian Totality conducted by I.C.R., Bombay last year by Dr. P. K. Sundararajan and the editor. It is an equally logical exposition of Homoeopathy.

The sum and substance is that when an integration is spoken of the effort should be to first view a particular subject or system in its totality as perceived from all the different perspectives or branches of knowledge. It is only when this totality is fully comprehended that the question of integrating it with other systems which are built on altogether different philosophical foundations can be examined. A true totality becomes comprehensible only when the observations conform with Gestalt psychology. The concept of totality as envisaged by Hahnemann conforms with Gestalt psychology. Unless Homoeopathy is perceived from his concept of totality its true *nature* cannot become intelligible.
