WHERE CLASSICAL WISDOM MEETS INTELLIGENT LEARNING

ii. Ayurvedic Formulary of India (AFI)

ii. Äyurvedic Formulary of India (AFI) - Introduction, development and importance

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The Ayurvedic Formulary of India (AFI) is the official compilation of Ayurvedic compound formulations recognized by India's Ministry of AYUSH. Published under the auspices of the Ayurvedic Pharmacopoeia Committee (APC), it provides standardized recipes and manufacturing guidelines for multi-herb (and multi-mineral) preparations detailed in classical Ayurvedic texts. Below is a doctoral-level exposition of the AFI's history, structure, volumes, and relevance to modern Ayurvedic research, industry, and regulation.

Introduction to AFI and the Concept of Formulation

1. Definition of Formulation

 In Ayurveda, a "formulation" (kalpanā) is a multi-drug compound—"the use of more than one drug in a medicinal preparation"—often leveraging synergy among varied ingredients (plant, mineral, animal origin).

2. Context and Need

- Previously, data on **compound formulations** was scattered across multiple classical treatises (*Caraka Saṃhitā, Suśruta Saṃhitā, Bhaiṣajya Ratnāvalī*, etc.).
- The AFI organizes these references in a systematic, easy-to-consult format for researchers, manufacturers, regulators, and practitioners.

3. First Official Publication

- Part I of the AFI was published in 1976 (English version recognized in 1978).
- Marked the APC's inaugural attempt at compiling classical formulations to aid in pharmacopoeial standard development under the Drugs and Cosmetics Act (1940).

Development of the AFI

Role of the Ayurvedic Pharmacopoeia Committee (APC)

1. Foundational Efforts

- The APC first compiled the **Ayurvedic Pharmacopoeia of India (API)** (for single drugs) and then expanded to produce **AFI** for compound formulations.
- This synergy ensures both raw materials (API monographs) and final formulations (AFI) are standardized.

2. Aim and Objectives

- **Consolidate** classical references in a uniform manner, bridging textual synonyms and variant recipe listings
- Provide a basis for **pharmacopoeial standards** (identity, purity, potency) and to **fulfill** the legal requirements of the **Drug and Cosmetics Act** and **Schedule T** (GMP).

3. Single Drugs Listing

 An auxiliary step: the APC prepared a comprehensive roster of single herbs and minerals (with correct botanical/mineral identification) used in these compound formulations, minimizing confusion over synonyms or adulterants.

Structure and Classification of Formulations

1. Kasthaushadhi vs. Rasaushadhi

- o Kasthaushadhi: Predominantly plant-based preparations (e.g., āsava, ariṣṭa, avaleha, ghṛta, cūrṇa, taila).
- o Rasaushadhi: Metals and minerals (e.g., bhasma, pisti, lauha, mandūra, kupipākva rasāyana).

2. Volumes

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- $\circ~$ Part I (1976): 444 formulations.
- o Part II (2000): 192 formulations.
- o Part III (2011): 350 formulations.
- Composition:
 - Parts I & II emphasize **classical** formulations widely manufactured.
 - Part III includes hospital pharmacy formulations (in use > 50 years) and lesser-known but clinically relevant recipes.

3. General Format

- o Title: Name of the formulation (Sanskrit, sometimes cross-referenced with vernacular).
- Method of Preparation: Step-by-step instructions (proportions, processing, cooking).
- **Dose**: E.g., 5-10 g or ml, typically referencing classical units converted to metric.
- **Anupāna**: Vehicle or adjuvant (milk, honey, ghee, water).
- Therapeutic Uses: Indicated diseases, doșa imbalances, general conditions.
- **Storage**: Guidelines for container type (glass vs. plastic), shelf-life references.

Overview of AFI Publications and Contents

AFI Part Year Number of Monographs (Compound Formulations)

Part I 1976 444 (predominantly classical, widely used formulations)

Part II 2000 192

Part III 2011 350 (hospital pharmacy formulations in use >50 yrs)

Note: These three parts collectively capture a **majority** of classical formulations, along with their expansions for modern contexts.

Importance and Impact of the AFI

Standardization and Quality Assurance

1. Legal Mandate

- Manufacturers must conform to AFI guidelines to claim authenticity and meet AYUSH licensing.
- o Minimizes risk of inter-manufacturer variability, ensuring safer, reproducible final products.

2. Research and Development

- Pharmaceutical labs or academic centers rely on AFI monographs for standard recipes to test efficacy or synergy.
- Facilitates multicentric clinical trials for widely used formulations (e.g., *Chyawanprash*, *Dantī harītakī*, *Aśvagandhā-Ghṛta*) with uniform compositions.

Preservation of Classical Heritage

1. Consolidation of Classical Recipes

- AFI references root texts (e.g., Bhaiṣajya Ratnāvalī, Śārngadhara Samhitā, Caraka, Suśruta) harmonizing variant readings or synonyms.
- $\circ\,$ Ensures the textual continuum is not lost or diluted in mass manufacturing settings.

2. Regulatory Consistency

- Regulators, inspectors, and licensing authorities uniformly reference AFI for composition checks, especially in litigation or complaint scenarios.
- Encourages honest labeling (exact ingredients, ratio) and controls unscrupulous adulteration.

Industry Expansion and Global Reach

1. Export Validation

- Many big Ayurvedic houses (Dabur, Himalaya, Charak) rely on AFI for documenting classical formulas in their product portfolios, essential for export compliance.
- Lays the foundation for bridging with WHO guidelines on herbal products, enabling mutual recognition or GMP alignment.

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2. Innovation

- Hybrid or "proprietary" formulations often partially reference classical compositions from AFI, adapting them with new delivery forms (capsules, syrups).
- Encourages modernization while maintaining classical ethos.

Summation

1. Historical First

• **AFI Part I (1976)** was the earliest consolidated official attempt to unify scattered references on classical **compound** Ayurvedic formulations.

2. Content

• Each monograph indicates title, ingredients, dosage, anupāna, therapeutic uses, storage guidelines.

3. Future Prospects

- Ongoing expansions or new volumes may include advanced analytical standards (HPTLC, HPLC) for each compound formula, bridging with the **Ayurvedic Pharmacopoeia of India (API)** single-drug references.
- Potential for e-version or Al-based formula cross-referencing to streamline large-scale R&D and supply chain integrity.

In essence, the **Āyurvedic Formulary of India (AFI)** offers a **structured blueprint** for **compound formulations**, safeguarding **classical authenticity** and **scientific rigor**—thereby enabling uniform production, consistent clinical efficacy, and global acceptance of **Ayurvedic** medicine.

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