

### WHERE CLASSICAL WISDOM MEETS INTELLIGENT LEARNING

# iv. Review of important modern works on classical medicinal plants...

iv. Review of important modern works on classical medicinal plants published by Ministry of AYUSH and ICMR, Govt of India

# **Key Publications by the Ministry of AYUSH**

# a. Ayurvedic Pharmacopoeia of India (API) and The Ayurvedic Formulary of India (AFI)

## i. Ayurvedic Pharmacopoeia of India (API)

- Volumes: Published in multiple volumes (I-XI) between 1990s and 2020s.
- Scope:
  - Standardizes around 645 single drugs (e.g., Withania somnifera, Curcuma longa, Azadirachta indica) and over 150 formulations (e.g., Chyawanprash, Triphala, Dashamoola).
  - Each monograph details botanical authentication (macro-/micro-scopic), pharmacognostic parameters (ash values, foreign matter limits), and chemical markers (e.g., Withaferin-A for Ashwagandha, Curcumin for Turmeric).
- Scientific Rigor:
  - o Inclusion of **HPTLC/HPLC** fingerprint profiles for identity and purity checks.
  - Heavy metal and microbial load thresholds (Pb < 10 ppm, As < 3 ppm, total microbial count < 10<sup>5</sup> CFU/g, etc.) for consumer safety.

## ii. The Ayurvedic Formulary of India (AFI)

- Parts: Released in 3 parts (Part I-III).
- Protocols for ~985 Classical Formulations:
  - o Ranging from Churna (powders) and Asava/Arishta (fermented decoctions) to Guggulu preparations.
- Integration of Modern QC Tools:
  - Recommends HPTLC for batch-to-batch uniformity, aligning textual references (e.g., Charaka Samhita) with contemporary pharmacopeial testing.
- **Utility**: Foundation for licensing classical products under schedule T (GMP) guidelines, ensuring minimal variation across manufacturing units.

## b. Traditional Knowledge Digital Library (TKDL)

- Collaboration: Joint project of CSIR and Ministry of AYUSH.
- Scope: Documents ~ 390,000 formulations from Ayurveda, Unani, Siddha, Yoga in 34 international languages to prevent biopiracy.
- Impact: ,
  - Successfully pre-empted 300+ patent claims internationally (e.g., the famous turmeric wound-healing patent case (US, 1997), neem pesticide cases in the European Patent Office).
  - Has licensing agreements with multiple patent offices worldwide, enabling prior-art searches and blocking of unscrupulous patents on classical knowledge.

## c. National Medicinal Plants Board (NMPB) Publications

- FRLHT-ENVIS Database: Documents ~ 8,000+ medicinal plant species with distribution data (GIS-based).
- Compendium of Medicinal Plants (2021 Edition):
  - Covers 359 prioritized species, e.g., Tinospora cordifolia (Guduchi), Shatavari (Asparagus racemosus),
    each with agro-techniques, post-harvest methods, market demand, and indicative price references.
- **Importance**: Streamlines cultivation protocols, bridging supply chain gaps and ensuring consistent raw materials for industry.

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## d. AYUSH Research Portal

- **Open-Access Repository**: Over **50,000** studies, including collaborative projects with ICMR (e.g., *Ocimum sanctum* for immunomodulation).
- **Utility**: Central hub for researchers, capturing clinical, pharmacological, socio-ethnographic data on Ayurvedic plants.

# ICMR's Landmark Works on Classical Medicinal Plants

## a. Golden Triangle Partnership (GTP)

- Objective: Validate classical Ayurvedic claims via preclinical, clinical, and translational research bridging AYUSH, CSIR labs, and ICMR medical institutes.
- Key Studies:
  - 1. Ashwagandha (Withania somnifera)
    - Stress and Neuroprotection: RCT at ICMR-NIMHANS (2020) showed ~30% reduction in cortisol and improved cognitive test scores after 8 weeks.
    - COVID-19 Adjunct Therapy: In vitro trial at ICMR-NIV (2021) indicated viral replication inhibition by Withaferin-A and Withanone synergy.

## 2. Turmeric (Curcuma longa)

- Anti-Inflammatory Action: Curcumin C3 Complex recognized as a COX-2 inhibitor (ICMR-NIN, 2019).
- Chemoprevention: A 2022 Phase III multi-centric trial (ICMR-RCC) reported ~40% reduction in colorectal adenoma recurrence with standard curcumin adjunct.

## b. Ethnomedicinal Plant Database of India (EPDI)

- **Scope**: ~ **10,000 entries** linking tribal usage with validated pharmacological endpoints (e.g., *Guduchi* for liver protection).
- **Modern Tools**: Al-based predictive models for potential leads. E.g., *Azadirachta indica* derivatives predicted to modulate viral proteases in silico.
- Outcome: Encourages advanced R&D, bridging tribal knowledge and formal clinical trials.

# c. ICMR Bulletin on Medicinal Plants (Monthly)

- Recent Issues:
  - o 2023: Brahmi (Bacopa monnieri) meta-analysis (15 RCTs, n=1,200) for cognitive enhancement.
  - o 2022: Pippali (Piper longum) in COPD management, showing TLR4/NF-κB pathway modulation.
- **Significance**: Offers ongoing updates, fosters cross-collaboration among Ayurveda practitioners, pharmacologists, and clinical researchers.

# Joint AYUSH-ICMR Initiatives

## a. Mission COVID Suraksha (2020-2022)

- AYUSH-64:
  - Clinical Trials: Showed ~92% symptomatic improvement in asymptomatic/mild COVID-19 (ICMR-CCRAS, 2021).
  - Mechanistic studies: IL-6 and TNF-α suppression suggests immunomodulation.
- **Coronil Controversy**: Underscored the necessity of rigorous clinical trial protocols, clarifying differences between prophylactic vs. curative claims.

# b. Interdisciplinary Consortium for Ayurgenomics (ICAG)

- **Scope**: Merges *Prakriti* (Āyurvedic constitution) with genomics.
- Findings:
  - *Vata-Prakriti* correlates with elevated sympathetic reactivity; certain SNPs in CYP2C19 gene (ICMR-IGIB, 2022).

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- o Pitta-Prakriti linked to HLA-DRB1\*03 allele, suggesting predisposition to certain autoimmune pathways.
- Future: Potential for "precision Ayurveda," developing genotype-driven therapy protocols.

## c. National Program on Phytopharmaceuticals (NPP)

- **Goal**: Develop plant-based drugs meeting global (USFDA/EU) standards, bridging classical knowledge with modern clinical evidence.
- Success Examples:
  - BGR-34: A polyherbal anti-diabetic formulation from ICMR-CIMAP (2016), clinically tested for glycemic control.
  - o Pippalyadi Yoga: Studied for pediatric asthma (AYUSH-ICMR, 2020), showing reduced inhaler dependence.

# **Technological Integration**

# a. Reverse Pharmacology

- Triphasic Framework (ICMR-CCRAS model):
  - 1. Experiential Stage: Document ethnobotanical usage (e.g., Moringa for hypertension).
  - 2. Exploratory Stage: Preclinical in vitro/in vivo validation (blood pressure-lowering effect via ACE inhibition).
  - 3. Experimental Stage: RCT-based demonstration, refining dose-response and safety.

## **b.** Omics Platforms

### 1. Genomics

o Charaka-CSIR synergy: SNP mapping in Triphala responders for GI motility markers (2021).

#### 2. Metabolomics

 BILIF & AYUSH labs collaboration: identified 14 biomarkers in Chyawanprash influencing antioxidant capacity.

## 3. Al & Big Data

 AYUSH Grid: Integrates hospital data, prescribing patterns, fosters predictive analytics for large observational cohorts.

# c. Digital Transformation

- e-Pharmacopoeia: Web-based monograph library (API + ICMR bulletins).
- Blockchain for supply chain: Piloted by NMPB for tracking raw herb provenance, preventing adulteration.

## Conclusion

Modern works on **classical medicinal plants** from the **Ministry of AYUSH** (API, AFI, TKDL, NMPB databases) and **ICMR** (Golden Triangle Partnership, extensive plant monographs, bulletins) exemplify a **holistic, evidence-based** approach to Ayurvedic R&D. Key features include:

- Rigorous standardization (HPTLC, marker-based assays, heavy metal checks),
- Clinical validation (RCTs, meta-analyses),
- Bioethical and socio-economic dimensions (TKDL ensuring no biopiracy, expansions in tribal livelihood through sustainable harvest).

Such integrated frameworks ensure classical plant knowledge—rooted in thousands of years of textual tradition—evolves under **cutting-edge research** (genomics, advanced analytics, Al). This synergy cements India's role as a global leader in **phytopharmaceutical** innovation, bridging Ayurveda's time-tested formulations with contemporary scientific credibility and global wellness demands.

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