

LETTER TO EDITOR**Interpathy Research in Healthcare System – Does it Really Help?**

Nagoba B. S.^{1}, Selkar S. P.², Nagrale A. V.²*

¹ Department of Microbiology, Maharashtra Institute of Medical Sciences & Research, Latur-413531 (Maharashtra) India, ² Department of Physiotherapy, Maharashtra Institute of Physiotherapy, Latur -413531 (Maharashtra) India

Interpathy involves genuinely entering into the experience of the other pathies and viewing their worldview as if it was the only way in which the world could be understood. Interpathy is a blend of empathy and awareness of cultural diversity, which strengthens an individual's immune system and heals thoroughly leading to long lasting effect. In interpathy, the process of knowing and "feeling" which requires that one temporarily believes what others believe, sees as others see, values what the others value. Thus, interpathy relates to the researchers or the practitioners crossing over into a culture, which is totally different from their own. It requires the person to temporarily suspend one's assumptions about the world and how it should function and takes on board reality of the world as it is perceived by those who dwell in the different culture. This idea relates well with the suggestion that narratives can reveal hidden truths. If we take the concept of interpathy into a healthcare context it can provide a useful tool of exploration and understanding of health and disease.

Dr. Albert Schweitzer- the humanitarian, French theologian, medical missionary, organist, philosopher, medical doctor - physician and the Nobel laureate (1953), after the decades of working experience in Africa, made a comment that "symbiosis of doctors of different pathies including witch-doctors and quacks is necessary in the society". Doctors can treat the

organic diseases but psychosomatic disorders, which are beyond the control of Allopathic doctors, can be better treated by witch-doctors because of their familiarity with socio-psychological aspects of the patients. Interpathically entering the situation of ill persons means entering into their psychosomatic milieu rather than with scientific outlook like diagnostic tests and therapeutic techniques at our fingertips. It requires that we take the experience of the patient with the utmost seriousness and attempt to understand what that experience is like and what it means to the person "from the inside." The aim of medicine is to prevent illness/diseases, promote health, increase immunity and to cure diseases. For a sick person suffering from disease /illness, what matters is a relief from illness and not the pathy, which cured his illness/disease. The patient does not care which medicine (pathy) has cured it. The lay people have faith in result-oriented medicine, whether it is allopathic, ayurvedic, homeopathic or unani medicine matters little for them.

The doctors of different pathies always blame each other and claim that their pathy is superior to other pathies. The integration of different pathies in healthcare system is strenuously resisted saying that there is no scientific basis for other pathies (Pathies other than allopathy) and also saying that effects of other pathies are not proven in clinical trials. It is true that alter-

native therapies are unscientific and not evidence based, however, they are experiential, holistic and are considered as harmless. Many alternative and complimentary therapies have been effective but scientifically unproven. Double blind randomized control trials are essential to confirm the experiences.

All pathies claim certain superiority in the management of different types of diseases. Every pathy, whether it is allopathy, homeopathy, ayurveda or unani, has its own basis and works on that basis. There is no doubt that some ayurvedic or homeopathic medicines give excellent results but problem is that their clinical effects are not translated in terms of modern scientific interpretation. Modernization of other systems of medicine is possible by encouraging

- Evidence based clinical studies
- Studies on quality, safety and efficacy of molecules of other systems of medicines
- Studies on adverse drug reactions and interactions

Whether the ayurvedic, homeopathic or other systems of medicine should be integrated into healthcare system or not is a different issue to be discussed by experts and policy makers. But there is a scope in promotion of ayurvedic, homeopathic or unani drugs (drugs of alternative systems of medicine) in diseases for which there is no specific therapy available in allopathy and also for those chronic diseases, which do not respond to the conventional allopathic therapy for some or the other reasons. The purpose is to improve the quality of life of the patients.

There are number of immunological, genetic and metabolic disorders for which no specific therapy is available in allopathy. There are also

a number of other diseases like Hepatitis B infection, AIDS, cryptosporidiosis, etc. where scientifically based clinical trials of drugs of alternative systems of medicine should be encouraged so that the claims made by alternative systems of medicine can be substantiated. Targeting of these chronic diseases of public health importance for which no conventional therapies in allopathy are available may be possible by promoting interpathy research.

Scope for Interpathy Research

There are number of diseases which need to be tackled by concentrated efforts of all researchers from different systems of medicine. There are number of challenges before the clinicians and researchers of 21st century. These include:

1. The problems of aging, due to increased life expectancy, for example, arthritis, diabetes, cardio-vascular diseases, malignancy, senile degenerative diseases, etc.
2. Immunological disorders such as immunodeficiency diseases, autoimmune diseases, allergic disorders, etc.
3. Genetic and metabolic disorders such as albinism, alkaptonuria, phenylketonuria, Lesch-Nyhan syndrome, thalassemia, haemophilia, polycythemia vera, glycogen storage diseases, etc.
4. Infectious diseases like AIDS, drug resistant malaria, hepatitis, dengue, viral encephalitis, nosocomial infections caused by superbugs (multiple antibiotic resistant strains), multi drug resistant tuberculosis (MDR TB), cryptosporidiosis, etc.
5. Respiratory problems, poisoning, cancers, stress induced syndromes, psycho-somatic disorders, etc. because of environmental pollution, including water, air and noise

pollution, thinning of ozone layer, changing life style, urbanization, nuclear proliferation, increasing stress affecting all ages and classes of people, malnutrition, unwholesome diet, which serve as the important predisposing factors.

These are challenges, which need immediate attention and there is a scope for promotion of interpathy research. By involving experts from respective pathies in association with experts from allopathy, a scientifically based research and clinical trials can be carried out to find out their effects. If early studies are encouraging further studies can be employed to obtain more information in a scientific way. Even there is no harm in taking clinical trials of ayurvedic, homeopathic or unani preparations, which have been claimed to be cost effective, to give good results and have less side effects, in diseases for which conventional therapies in allopathy are available. This will help to develop an alternative therapeutic approach, which is the utmost need of the hour in India. The globalization of economy with W.T.O (World Trade Organization) act came into force in 2005 A.D. is likely to affect both Indian Patents and Pharmaceutical industries adversely. The patented allopathic medicines may not be within the reach of common man in India and may not be affordable to even moderately reach individuals from India. Hence, there is a greater need to develop alternative approaches. We must concentrate on economical, safe and effective substitutes of expensive and rare modern drugs. Trials carried out scientifically and thus leading to practice of alternative systems of medicine may open new doors to our helpless patients.

The promotion of fertile interactions among open-minded and motivated experts/researchers/clinicians from different pathies, whose

thinking is beyond the boundaries of different pathies, will be very fruitful. The investments of funds in such multidisciplinary/interpathy projects will offer challenging opportunities to explore and investigate scientific concepts, which may lead to the discovery of newer therapeutic approaches and may enrich scientific knowledge on many intricate problems in healthcare system.

Recognized by the World Health Organization as the oldest indigenous health system, Ayurveda has been successfully used for prevention and healing for thousands of years. It is the Indian science of medicine and is our proud heritage. It is now increasingly being recognized all over the world. More herbal medicines are being used by more and more people in United Kingdom and United States. Many herbal medicines have been proved to be effective in clinical trials. An increasing body of evidence is now emerging from systematic reviews and meta-analysis of approaches by encouraging interpathy research. Herbal medicine and drugs of other alternative systems of medicine will be helpful to our poor and needy patients in future when the patented allopathic drugs will not be within the reach of common man in India.

There is a need to develop newer appropriate research methodology for Ayurvedic research through intense interface between Ayurveda and conventional science. It is because of lack of such an appropriate research methodology, Ayurvedic research has not succeeded in yielding any breakthrough in recent years. An urgent action is needed to study the unique concepts of science of Ayurveda that help to develop a newer positive approach to drug research and to introduce new traits of medications thereby revolutionizing the entire field of Medicine and

Medical Care.

Chemoprevention of infections (Tuberculosis, HIV and other viral infections), malignancy, neurodegenerative disorders (Alzheimer's, Parkinson's diseases), metabolic syndromes (diabetes, hypertension, atherosclerosis) should be the major focus of future Ayurvedic drug research. Scientific validation of Ayurvedic drugs is warranted, so as to prove its role in the treatment of these disorders for which no absolute remedy is available in allopathy. We need to have better ways to evaluate Ayurvedic medicines and compare them with modern medicine. The Ayurveda is likely to yield greater success in treating chronic ailments, which are otherwise very difficult to treat by drugs of modern medicine.

It is the responsibility of researchers to create the wealth of knowledge to improve healthcare of people by promoting interpathy interaction and original research in the Indian and other systems of medicine. It is sure that ramification with an aim to achieve interdisciplinary research will create better understanding between different systems of medicine.

Systematic reviews, randomized clinical trials, observational studies, case control studies, etc. on molecules of other systems of medicine will help to achieve more concrete evidence to confirm the experience of clinical effects claimed by other pathies and surely help to see and to understand the world of illness differently leading to more effective healthcare

practices.

Drawing the attention of healthcare professionals from different pathies and their involvement from within to this important issue of the interpathy/multidisciplinary healthcare research would be a major contribution to healthcare in near future.

References:

1. Vaidya AB. Modern Medicine and Ayurveda: a synthesis for people's medicine. In: Bang A and Patel AJ Ed. Health Care: which way to go? New Delhi: Medico Friend Circle 1982:3-10
2. Smith KR. Against homeopathy. *Bull World Health Organ* 1999; 77(11): 948.
3. Convention on interpathy research. Organized by Maharashtra University of Health Sciences, Nashik Jan, 2000.
4. Ernst E. Herbal medicines: where is the evidence? *BMJ* 2000; 321(7258): 395-396.
5. Singh RH. Exploring larger evidence-base for contemporary Ayurveda. *Int J Ayurveda Res* 2010; 1(2): 65-66.
6. Lele RD. Four new approaches for validation of Ayurvedic herbal drugs. *Int J Ayurveda Res* 2010; 1(3): 136-137.
7. Sarmukaddam S, Chopra A, Tillu G. Efficacy and safety of Ayurvedic medicines: A recommending equivalence trial design and proposing safety index. *Int J Ayurveda Res* 2010; 1(3): 175-180.

**Author for Correspondence: Dr. B. S. Nagoba, Assistant Dean (R & D);
MIMSR Medical College, Latur-413531 (Maharashtra) India
Cell: 09423075786 Email: dr_bsnagoba@yahoo.com; bsnagoba@gmail.com*