

Time for a serious research implementation of the hypotheses in ancient Ayurveda literatures: A call from a roller coaster ride

Dear Editor,

As we all know, on Thursday, September 13, 2018, at Harvard University, the humankind witnessed the 28th first annual ceremony of Ig Nobel Prize. Marc A. Mitchell and David D. Wartinger the duo bagged its prestigious medicine honor. They were awarded for their study on "how the roller coaster ride, tries to hasten the passage of kidney stones." Their work was validated with a model and was published in the year 2016.^[1] It had mainly two outcomes: (a) the functional pyelocalyceal renal model served to assess the activities that facilitated calyceal renal calculus passage and (b) the rear seating position on the roller coaster led to the most renal calculus passages ($n = 23$ out of 36).^[1] The work was highly appreciated and so was entitled for the esteemed honor which made people LAUGH at first and ended with THINKING.

To be frank, the work gained my attention, only after it brought to limelight through the Ig Nobel Prize recognition. The content of their work somewhere reminded me of the similar concept proposed in ancient Ayurveda literatures. The search ended in the thought of treating a condition called 'Ashmari (Renal calculus)' mentioned in the various treatises of Ayurveda.

Thoughts from Ayurveda

Acharya Charaka (father of Indian medicine), who lived in between 3rd century BC^[2] is the principle contributor

to Ayurveda. He was the first to hypothesis and propose an innovative idea on treating *Ashmari*. In his treatise *Charaka Samhita*, he states that "a person having renal calculus, should drink *Nigada* (an alcoholic preparation), and should ride in a fast moving chariot or on a horse. With this method, the calculus gets dislodged and if this does not help that person, then he may get benefitted from surgery."^[3]

Sri Gangadhara, who is one among the commentator of *Charaka Samhita*, has opined same thought to that of Acharya Charaka but differs in opinion that "the person suffering from *Ashmari*, should be made to drink *Nigada* (a freshly prepared alcohol preparation) or decoction made out of *Mamsa* (some type of meat) and then should ride in fast moving chariot." He also agrees that if the *Ashmari* does not get dislodged, he should undergo surgical procedures. For this procedure, he elaborately proposes to follow the guidelines mentioned by Acharya Sushruta.^[4]

Acharya Vagbhatta, who existed somewhere between fourth and fifth century AD, is famous for presenting Ayurveda and its essence in an easy, comprehensive, and logical way. His treatise "Astanga Hridaya" is referred as best for the practical understanding of the Ayurveda concepts.^[5] He raises alike thought of treating the *Ashmari* in his treatise that "a person having renal stone/s, should be made to drink an old, unspoilt *Madya* (wine) and should have a fast ride on a chariot driven by horses or can even ride on a horse."^[6]

Apart from the above proposals, the following descriptions are the few add-on to the present context which may help in put a match to the knowledge and vision of the reader. Sri Bhavamishra, the author of *Bhava Prakasha Nighantu* (Indian materia medica), who lived around 1600 AD, states the quality of *Madya* or *Nigada*. According to him, a vigorous and an ideal *Madhya* brings the action of dryness in the body, ignites *Pitta*, alleviates the aggravated *Vata* and *Kapha*, stimulates the appetite, prompts digestion, and affects the metabolism through its properties of hot (potency), sour (taste), sharp (quality), separates-resolves into components, and expands-opens-enters-travels into channels.^[7]

Acharya Sushruta (father of surgery), who lived nearly in the sixth century before the common era,^[8] has not opted matching ideas in treating *Ashmari* as the above scholars; though being a pioneer of surgery, he has elaborately advised surgical and other clinically applicable methods in treating it.^[9]

An Inference

On scrutinizing the above thoughts, anyone can wonder and appreciate the hidden empirical theories in ancient Ayurveda literatures. The lack of scientific methods, evidence, and data in the ancient era was the major drawback in the upliftment of its concepts or hypothesis. Even though the Ayurveda science is being pushed into the "alternative medicine's list, the new researches in the corners of the world themselves reflects that they had been hypothesized and had been practised long back. The above is one such instance where, a model (the functional pyelocalyceal renal model) was mostly developed on some idea (can be linked here to those at the rear seat in a roller coaster similar to a ride on a fast moving chariot driven by the horses). Although it cannot be claimed that the above duo researchers (Marc A. Mitchell and David D. Wartinger) followed the Ayurveda concepts, it is an agreeable fact that the work which they have done today was proposed and hypothesized thousand years back with a similar design. The growing western and modernization have somewhat neglected in acknowledging or in giving a credit to ancient science (to the present context Ayurveda) and it is one of the prime concerns of the present critique. Ayurveda science has rich resources related to human health. The time has arrived for us to sincerely work on those resources which are concealed as concepts or hypotheses and serve its principal goal of both preventive and curative concerns on human health. The scientific development, validation, and the

implementation of newer logical technologies, models, formulations, and therapies with the base of ancient hypothesis may facilitate in attaining that principal goal.

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