

Covid 19: Ayurvedic screening and therapy

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ABSTRACT

Medicine is the science and practice of caring for a patient, including evaluation, assessment, therapy, medication, treatment, and enhancement of their health. Medicine is a wide term that refers to a variety of health-care methods that have arisen to safeguard and promote healing through illness prevention and treatment. Modern medicine uses biomedical sciences, biomedical research, genetics, and medical technology to diagnose, treat, and p-

revent injury and disease, typically with pharmaceuticals or surgery, but also with talk therapy, external splints and traction, medical devices, biologics, and ionising radiation, among other forms of treatment.

Key Words: *Ayurveda; Diabetes Mellitus (DM); Traditional care; Conventional treatment; COVID-19*

INTRODUCTION

One of the world's oldest holistic whole-body treatment systems is Ayurvedic medicine or Ayurveda. It was created in India around 3,000 years ago. It's founded on the idea that good health and well-being are dependent on a delicate balance of mind, body, and spirit. Its primary purpose is to promote good health rather than to combat sickness. Treatments, on the other hand, maybe tailored to individual health issues. Unique coronavirus-induced pneumonia, later dubbed coronavirus disease 2019 (COVID-19), has quickly spread to pandemic proportions, affecting the entire human population worldwide. The first case of COVID-19 in India was an imported case from Wuhan, China, which was detected in Kerala on January 30, 2020, and the death rate of COVID-19 in India is 1.45 per cent as of December 12, 2020. The coronavirus that causes severe acute respiratory syndrome (SARS-CoV-2) has become a pandemic threat to global public health. Ayurvedic is one of the oldest medical systems in the world and remains one of the traditional Indian healthcare systems. The ayurvedic treatment combines products (mostly derived from plants, but can also include animals, metals and minerals), diet, exercise, and lifestyle. A high-risk case of a COVID-19-positive patient with comorbidities including Diabetes Mellitus (DM), Hypertension (HTN), Hypothyroidism, and Chronic Kidney Disease (CKD) who was successfully treated with an integrative therapy plan based on Ayurveda and Yoga, as well as government-mandated required Modern Western Medicine (MWM) treatment. Some evidence for the use of Ayurveda in the treatment of COVID-19 has recently emerged.

The classical scriptures of Ayurvedic medicine, such as the Charaka Samhita and Sushruta Samhita, depict pandemics of similar magnitude as Janapadoddhvansa, or community devastation, and detail its causes and treatment. A retrospective cohort study aimed to evaluate the clinical outcome of Ayurvedic treatment as an adjunct to conventional care in early COVID 19 patients admitted to the Samaras COVID Care Center in Ahmedabad, India. Traditional care included vitamin C, azithromycin, and acetaminophen. The Ayurvedic formulation used as an adjunct was Dashamura and Patiadi decoction along with Trikatsu powder for oral administration, Sanshamani tablets, AYUSH 64 tablets and Yastimadugana tablets. Ayurvedic treatment as an adjunct to conventional treatment has shortened the duration of the early symptomatic phase of COVID 19 compared to conventional treatment alone. Add-on Ayurvedic treatment has promising potential for treating early-stage COVID19. The SARS-CoV-2 virus has resulted in a large loss of human life, extensive devastation of livelihoods, and unparalleled financial catastrophe around the world. Kerala began taking preventive and control measures in early 2020 to lessen the impact of COVID-19. For the COVID-19 pandemic, the Kerala government is working to expand the accessibility and penetration of Ayurvedic preventive, therapeutic, and convalescent care techniques. The strategy's implementation framework was well-thought-out, with a decentralised, people-centred, and participatory approach. In the traditional medicine sector, Kerala has a strong public health system with sufficient people resources and facilities. In the COVID-19 circumstance, this community case study investigates how the decentralised organisational architecture was effectively used to facilitate the delivery of Ayurvedic treatments.

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Ayurvedic programmes that are executed in a systematic, coordinated manner with social participation allow for greater use of the services. Even in resource-scarce environments, such a system can be simply replicated. In the Kerala context, an integrative health system strategy, rather than a pluralistic approach, maybe more viable in public health emergencies.