The Role of Whole Medical Systems in Global Medicine

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‘The whole is more than the sum of its parts’ [1]. This quote by Aristotle, one of the most influential instigators in occidental philosophy, science and taxonomy, is timeless. Yet at the same time this very idea also points towards an unheralded treasure in the development of a globalized 21st century medicine: the active rediscovery of an enormous hibernating potential for meta-integration of medical knowledge worldwide. Essentially it has always been there, dormant to a greater or lesser extent, especially when we look at prominent evergreens of present-day healthcare debates like disease prevention and health promotion. In this context it is not at all surprising that the WHO’s still non-amended definition of health from 1948 [2] was already more or less articulated about 1,700 years ago in the Ayurvedic classical text Sushruta Samhita [3]. There, health is comprehensively defined as a complex physiological balance added to psycho-sensual happiness and contentment of the soul. For the purpose of realization and implementation of this Aristotelian completeness axiom, and similar concepts from most other cultures around the globe, in medicine, we are now being invited to move on beyond the traditional realms of discussion, particularly in the context of Complementary and Integrative Medicine.

Issues about demarcation from modern evidence-based medicine and/or a rigorous orientation to holism in charged atmospheres might innervate our egos. However, it will only delay processes of integrating global healthcare.

Therefore, the step ahead for genuine Integrative Medicine seems to be neither towards a reductionistic analytical view on single components nor towards a pure synthetic holistic view being reductionistic on the other side of the river. The solution lies in ‘synthesis additionally to analysis.’ [4] This is where systems thinking [5] and whole medical systems thinking [6] come into play and might lead us to a way of bridging and transcending reductionism in medicine in all areas. Whole medical systems are eo ipso complete and coherent systems of medical theory and practice that have evolved, and continue evolving, in different regions, cultures and time periods

around the globe, independently from modern western medicine, e.g. Traditional European, Indian, Chinese, Tibetan, Arabian systems of medicine, Kambo, Anthroposophy, Homeopathy, etc.

It is interesting to reflect on the fact that, alongside the continuing renaissance of our own flourishing European heritage in this field [7], some whole medical systems of Asian origin are not only thriving as officially acknowledged healthcare systems, but have a continuous mainstream medical tradition since more than 2,000 years on a continent currently bearing more than 60% of the world’s population. Here, the most well-known traditional Indian system of medicine, Ayurveda, can spearhead as pars pro toto for all others for a particular reason: on top of its inbound coherence it possesses an inherent outbound quality of openness to its surrounding realities. In South Asia, Ayurveda is recognized by the state and is viewed on equal terms with conventional medicine. Within India, Sri Lanka and Nepal, it is applied in a living environment of approximately 1.4 billion people alongside other systems of care. Ayurvedic medicine is in much the same way as Traditional Chinese Medicine fully recognized as a medical science by the WHO. According to the Association of Ayurvedic Physicians of India, there are currently approximately 450,000 Ayurvedic physicians and more than 250 university-affiliated colleges and Ayurveda universities in India alone [8]. In addition to its key role in a number of Asian healthcare systems, it is playing a growing role in international Integrative Medicine contexts, especially in Europe and North America. Ayurvedic medicine is characterized by a complex and multidimensional approach focusing on the delivery of treatments individualized to the person and disease [9] including: modification of lifestyle, dietary treatments, relaxation and meditation techniques, physical therapies, yoga, herbal medicine, as well as a broad range of highly specialized manual techniques and cleansing procedures.

Furthermore, Ayurveda’s and most other whole medical systems’ therapeutic concepts are focusing on the fundamental

principles of self-efficacy and salutogenesis. Their concepts are based on anthropologic assumptions which include all levels of human existence in medical approaches, notably also interwoven epistemological concepts. It is thus in accordance with the ideal prerequisites for a whole medical system.

On the research level Ayurvedic clinical research has begun to find its way into mainstream medical journals and scientific healthcare conferences worldwide. The past decade has seen some groundbreaking clinical trials on Ayurveda, freely available digital research databases like Dhara [10], and the formation of professional medical boards like the German Medical Doctors' Association for Ayurvedic Medicine (DÄGAM e.V.) [11], all developments pointing towards future directions. In May 2012 an international panel will discuss research methods to accurately reflect the paradigmatic foundations of Ayurveda as a whole medical system during the 3rd ISCRM conference held in Portland, OR, USA [12].

What can we learn from all this? The Ayurvedic example in this context is neither used to put a particular whole medical system into the limelight of perfection, nor is it given to suggest integrated Ayurveda as a blueprint for Integrative Medicine on a global scale. However, an in-depth analysis of Ayurveda *pari passu* with other healing systems could serve as a hermeneutic cloud point in the process of building up a global medicine of integration – an intelligent yet organic cross-linking of medical potential regardless of its Cartesian coordinates on the planet or in people's heads. Let us move on from cherry picking to planting fruit trees. Thus we may potentiate effects through opening ourselves up for conceptual cohesion. And this does not all have to be arbitrary. It might be a great learning experience and maybe even miraculous. Or as the Indian sage (and brother of thought of Aristotle) Caraka puts it: 'For the wise the whole world is a teacher' [13].

References

- 1 Aristotle (attributed to): Citation from: *Metaphysics*. Greece, 384 BC to 322 BC (lifespan of Aristotle, exact date unknown).
- 2 World Health Organization. Constitution. WHO. Geneva, 1948.
- 3 Sharma PV (ed): *Sushruta Samhita. Sutrasthana XV.41*. With English translation of text and Dalhana's commentary along with critical notes. Varanasi, Chaukhamba Visvabharati, 2001. Original Sanskrit Text: 3rd to 4th century AD.
- 4 Laszlo KC: *Dimensions of Systems Thinking*. http://archive.syntonyquest.org/elcTree/resourcesPDFs/Systems_Thinking.pdf.
- 5 Capra F: *The Web of Life: A New Scientific Understanding of Living Systems*. New York, Anchor Books, 1996.
- 6 Bell IR: Models for the study of whole systems. *Integr Cancer Ther* 2006;5:293–307.
- 7 Institut für Demoskopie Allensbach: *Naturheilmittel. Ergebnisse einer bevölkerungsrepräsentativen Befragung*. www.pandalis.de/naturheilmittel.pdf.
- 8 Association of Ayurvedic Physicians of India (AAPI). <http://aapiindia.org/>.
- 9 Kessler C, Rioux J, Manohar M, Dhruva A: Research design and methodology for Ayurveda as a whole system of medicine. *International Research Congress on Integrative Medicine and Health*, 2012, Portland, OR, USA. Abstract (in print).
- 10 Digital Helpline for Ayurveda Research Articles (DHARA). www.dharaonline.org.
- 11 German Medical Doctors' Association for Ayurvedic Medicine (DÄGAM e.V.). www.daegam.de.
- 12 Third International Research Congress on Integrative Medicine and Health. <http://imconsortium-congress2012.org>.
- 13 Sharma RK, Dash B (eds): *Caraka Samhita. Vimana Sthana 8.14*. Text with English translation and critical exposition based on Cakrapani Datta's *Ayurveda Dipika*. 7 Vol. New Delhi, Chaukhamba, 2001. Original Sanskrit Text: 2nd century BC to 2nd century AD.