

A case for Scientific Integrative Medicare

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Why Integrative Medicine? What is the need?

For last 20–25 years, we are hearing a lot of talk about ‘Integrative Medicine’. Many other terms like ‘Alternative Medicine’, ‘Mind Body Medicine’, ‘Holistic Medicine’, ‘Traditional Medicine’, etc. are floating around; trying to address the same issue. So much so that 7 leading western universities/institutions led by Harvard Medical School, the flag bearer of Western Medicare Concepts, have created Osher Collaborative for Integrative Medicine (<https://www.oshercollaborative.org/>).

There are many other similar institutions which have come up in the west, among them, Benson Henry Institute of Mind Body Medicine (<https://bensonhenryinstitute.org/>) is worth mentioning. So, the question which arises is – What are these best western scientific brains trying to address? There must be some need, some shortcoming, some deficiency in the western medical approach which they are trying to overcome. What are they? Most obvious limitation of western medicare concepts, with which we all are familiar with, is with respect to management of Non-communicable diseases (NCDs) – the chronic systemic illnesses like Diabetes, Essential Hypertension, Metabolic Syndrome, etc. – its ability to only achieve symptomatic suppression and its inability to address the root cause leading to a permanent cure.

But with respect to NCDs an even more important limitation of western medicare approach is now becoming obvious and which is very serious, is its inability to define the etiopathogenesis of these diseases. ‘What’ is described in detail, but there is no clarity on ‘Why’. In addition to NCDs, in one more area we encounter the limitation of western medicare concepts and that is its inability to explain the phenomenon of Spontaneous Healing. So the problem statement can be defined as: Western Medicine, based on the principle of Materialism/Realism has failed in addressing NCDs (handling

management & defining Etiopathogenesis) and explaining phenomenon of Spontaneous healing.

Why no meaningful progress?

But when we look at institutions, Group of Persons and Individuals working in this domain, we do not see any meaningful progress – we notice only a mix n match approach in the name of integrative Medicine, which we can call ‘Mixopathy’. In author’s opinion, this is happening because of following two reasons:

1. Discussions around solutions are taking place without an effort to define the problem. Rather, the issue is deliberately being kept obfuscated as it will expose the limitations of Western Medical Concepts. And this deliberate effort to obfuscate the issue is led by western thinkers and unfortunately followed by people in the decision making level in our country.
2. And arising out of the first problem, the second problem is that there has been no effort to define what should be the scientific basis of integrative Medicare.

Going into the Problem Statement in detail

We all know that western medical system is based on the principle of ‘Materialism’/‘Realism’ – a scientific approach in which ‘Reality’ is physical. But in case of Diabetes, Essential Hypertension like NCDs we do not find answers related to causation at the physicality level. If the causation is not at gross level than where is it? Western medicare approach will not have the answer as the paradigm is limited to Physical world.

From a western perspective, do we have experimental findings, in the domain of physical sciences, which forces us

to think that there are there some aspects of reality which are beyond physical, beyond time & space? Yes is the answer; examples being Quantum Entanglement, Quantum Paradoxes etc ... But these issues have not yet been fully resolved, so we still call them paradoxes.

Looking at the western scientific discourses in life sciences domain, do we find similar situation where certain findings/phenomenon are unexplainable at pure physical level? Yes is the answer again – examples being Morphogenesis, 100 Monkey Syndrome etc.

This aspect of western scientific discourse, both in physical & life sciences, hitting a dead end due to concept of reality being limited to physical only – is not in the public domain due to their vice like grip on public discourse through their control of social, digital, electronic & print media.

Need for a paradigm shift conforming to correspondence principle

The word 'Paradigm' means a 'Model' or an 'Archetype' or 'Criterion' etc.... Need for a 'Paradigm Shift' arises when some use cases of a particular domain become unexplainable by the existing paradigm.

While looking for a new paradigm, we have to abide by the "Correspondence Principle" which requires that the new paradigm while resolving the unresolved aspects of the older paradigm should be able to seamlessly handle the existing aspects of the older paradigm.

New Paradigm – Panchakosha & Aadhi-Vyadhi

Panchakosha: Gross Body, Subtle Body (Prana, Manas & Budhi) & the Causal Body. Author proposes that the manifested body (Gross Body) comprising of 'Physicality' & 'Functionality; arises out of an 'Informational Base' (subtle body). [Causal Body is out of purview of this discussion]. Aberration in subtle body is 'Aadhi' while deviation in Gross body is Vyadhi – The Aadhi-Vyadhi concept.

The Anadhij Vyadhis (Vyadhis not borne of 'Aadhi') – comprise morbidities arising out of Trauma, Infections & Toxins. These are managed very well with Physicality based Western Medical Concepts and are not part of the problem statement and therefore this discussion.

On the other hand, the NCDs – Aadhi Vyadhis (Vyadhis borne out of Aadhi), and cases of Spontaneous Healing (are

part of our problem statement and therefore a part of this discussion), has been explained seamlessly in Yoga Vashishta using the concept of 'Aadhi' originating in the Subtle Body.

Panchakosha based Integrative Medicare

Yoga facilitated Innate Healing, without any external Props or Pharmacological interventions, primarily acts on subtle body and addresses the *Aadhij Vyadhis*. "Manah Prashamana Upayah Yoga". Huge body of evidence now demonstrating beneficial effects of this approach with NCDs.

Interventions primarily directed towards Physicality; covered by "*Ayurveda/Allopathy*" depending upon emergency/severity and type of Pharmacological preparations/devices used; address *Anadhij Vyadhis* – Trauma, Infections, Toxins. "Aaturashya vikaar prashamanam"

And a combination of these two approaches will form "Integrative Medicare". So, *Integrative Medicare* can be defined as a combination of interventions directed at both subtle & gross bodies in an integrated way achieving bidirectional facilitation and effect multiplication.

Way forward

- Establish the limitations of western medicare approach, specially in managing NCDs.
- Define the crux of the problem – limitation of physicality based paradigms of Materialism/Realism which forms the basis of Western discourse for both domains – Physics & Medicine.
- Validate the concepts of Panchakosha & Aadhi/Vyadhi; aligned with "The Correspondence Principle" by resolving medical issues which remain unmanageable by western approach.
- Work towards achieving global paradigm shift – Physicality to consciousness – 'Upward Causation' to 'Downward Causation'.
- Be prepared & strategize for massive opposition from all exploitative & divisive doctrines because they will all fail if Consciousness is accepted as the base of reality. And when there are no 'others'. Who will you exploit and how will you divide?

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