

The Evolution and Integration of *Āyurveda* in the Modern World: Preserving Wisdom While Embracing Change

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ABSTRACT

Background: *Āyurveda* is an ancient medical and philosophical system that offers a unique approach to health and disease. As it gains global recognition, a critical challenge is ensuring its integration into contemporary healthcare systems while preserving its fundamental integrity. **Objectives:** This article aims to analyze how *Āyurveda* can maintain its core principles while adapting to modern healthcare needs. It introduces the Collaborative Medicine and Science (Co.M.S.) framework as a structured approach for integration. **Methods:** We examine *Āyurvedic* knowledge as an information processing system and explore theoretical foundations, practical challenges, and implementation methodologies for integration with modern medical frameworks. **Results:** Our analysis suggests that successful integration requires viewing *Āyurveda* not merely as a set of practices but as a sophisticated system for processing and manifesting information from subtle to gross levels. The Co.M.S. framework provides a structured pathway for bridging epistemological gaps and fostering meaningful collaboration between *Āyurveda* and modern healthcare. **Conclusions:** Integrating *Āyurveda* with contemporary healthcare requires maintaining its epistemological integrity while adapting to global medical standards. A well-structured approach, such as Co.M.S., can facilitate this process, ensuring that both traditional wisdom and modern advancements contribute to a more holistic and effective healthcare system.

KEYWORDS: *Āyurveda*, Collaborative Medicine and Science (Co.M.S.), health care, information processing, knowledge translation

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INTRODUCTION

Modern medicine's technological achievements contrast sharply with growing systemic challenges. Despite advanced molecular and genetic interventions,^[1-3] we face increasingly complex health challenges. Chronic diseases rise despite expanding therapies,^[4,5] while psychosomatic^[6] and environmental factors^[7,8] challenge the biomedical compartmentalized treatment approach.

Āyurveda offers alternative treatments and a sophisticated epistemological framework that could transform healthcare understanding. Its approach to

reality as an information system, from subtle to gross levels, provides relevant insights for contemporary challenges. Through the Collaborative Medicine and Science (Co.M.S.) framework,^[9] we propose integration approaches that honor both traditional wisdom and modern understanding.

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THE NATURE OF AYURVEDIC KNOWLEDGE AS AN INFORMATION PROCESSING SYSTEM

The essence of Ayurvedic knowledge lies in its profound understanding of how reality manifests through the bridge between the unmanifest (*Avyakta*) and the manifest (*Vyakta*).^[10-13] This understanding, deeply rooted in the *Darśana* traditions of Indian philosophy, provides a sophisticated framework for perceiving and interpreting the complex interconnected patterns that constitute reality.^[14-16] Through this lens, *Āyurveda* reveals itself not merely as a medical system, but as a comprehensive methodology for recognizing and working with the fundamental patterns of existence as they flow from subtle to gross manifestation.

At the heart of Ayurvedic thought lies a profound understanding of how reality itself emerges and becomes knowable. All of manifest existence, this framework suggests, emerges through discernible patterns of information. These patterns, while originating in the unmanifest realm, become perceivable through what *Āyurveda* calls *Guṇa* – fundamental qualities that serve as the basic units of information through which we can understand reality itself. Think of *Guṇa* as an alphabet that creates the language of existence, allowing us to read and interpret patterns at every level of manifestation, from the cosmic to the personal, from the physical to the subtle.

This universal framework for understanding reality naturally extends to how we comprehend health and disease. An experienced Ayurvedic physician, drawing on this broader understanding of how patterns manifest, perceives a patient's condition as part of this larger tapestry of reality. When examining joint problems, for instance, the physician recognizes how qualities, like roughness (*Khara*), movement (*Cala*), and lightness (*Laghu*), represent manifestations of universal patterns. These patterns express themselves not just in physical symptoms, but across all levels of the patient's existence – from their bodily functions to their mental states to their relationship with the environment.

This way of perceiving patterns transcends individual cases to illuminate broader phenomena in nature and society. When studying metabolic disorders, for example, Ayurvedic analysis reveals how universal patterns of heaviness (*Guru*), slowness (*Maṇḍa*), and oiliness (*Snigdha*) manifest across multiple domains – from individual dietary choices to collective lifestyle patterns to environmental factors. These patterns reflect the same underlying principles that govern all of reality, specifically applied to understanding health and disease.

The sophistication of this approach becomes particularly evident when we consider how it bridges different levels of manifestation in any sphere of knowledge. The same patterns that express themselves in physical symptoms can be traced through progressively subtler levels – from gross physical changes to subtle energetic states to their origins in consciousness itself. This understanding is not limited to medicine but represents a comprehensive framework for understanding how information patterns flow from unmanifest potential to manifest reality in any field of study.^[17]

The three *Doṣa* – *Vāta*, *Pitta*, and *Kapha* – exemplify how universal organizing principles manifest in living systems. Rather than being merely medical categories, they represent fundamental patterns that emerge from specific combinations of *Guṇa*, creating recognizable templates of manifestation across all levels of existence. The same *Vāta* pattern that governs movement in physical processes, for instance, also governs transformation in mental processes and evolution in natural systems.

Similarly, *Agni* represents more than just biological transformation – it embodies the universal intelligence that governs how patterns transform and manifest across different levels of existence. Just as physical *Agni* transforms food into nourishment, cosmic *Agni* transforms unmanifest potential into manifest reality. This principle operates at every level of existence, from the transformation of thoughts into actions to the evolution of societies and ecosystems.

This framework provides crucial insights for modern health care, though its implications extend far beyond medicine alone. When we understand that the same fundamental patterns shape all levels of reality, we begin to see how disturbances in health reflect broader patterns that can be recognized and addressed at multiple levels simultaneously.

Consider how this understanding transforms medical practice. For example, when an Ayurvedic physician treats a patient with chronic digestive issues, they are not just looking at the digestive system in isolation. Instead, they recognize how patterns of disturbance manifest across different aspects of the patient's life. For example, irregular eating habits might connect with irregular sleep patterns, variable emotional states, and unstable daily routines – not as separate problems, but as different expressions of the same underlying pattern of irregularity. This insight allows for more comprehensive and effective therapeutic approaches.

More importantly, this pattern-based understanding creates natural bridges between different medical

traditions. Modern medicine might describe inflammation through molecular pathways and cellular mechanisms, while *Āyurveda* recognizes it through patterns of heat (*Uṣṇa*), sharpness (*Tikṣṇa*), and penetrating movement (*Sukṣma*). Rather than contradicting each other, these different perspectives describe the same reality at different levels of manifestation. This realization opens up exciting possibilities for collaboration between medical systems.

This is where the Co.M.S. framework becomes particularly relevant. If we understand that different medical traditions are essentially describing the same patterns of reality from different perspectives, we can develop sophisticated ways for these systems to work together. Co.M.S. provides a structured approach for this collaboration, allowing different systems to share insights while maintaining their unique strengths.^[18]

The practical value of this approach extends beyond individual treatments to how we understand health and disease more broadly. By recognizing that health challenges often reflect larger patterns in how we live and interact with our environment, we can develop more comprehensive approaches to both prevention and treatment. This understanding becomes increasingly important as we face complex modern health challenges that resist simple, single-level solutions.

Having explored how we can understand *Āyurveda* through the lens of information processing – a perspective that helps bridge traditional wisdom with contemporary understanding – we face the question of how to meaningfully engage with modern healthcare systems. This understanding of *Āyurveda* in terms of information patterns and processing offers one pathway for dialogue but requires a careful methodological approach to ensure we do not oversimplify or misrepresent the traditional knowledge in our attempt to make it accessible. The Co.M.S. framework emerges as a response to this challenge, offering a structured approach to knowledge transmission that aims to preserve the essential integrity of different medical traditions while facilitating meaningful dialogue between them.

THE CO.M.S. FRAMEWORK: A NEW PARADIGM FOR HEALTHCARE INTEGRATION

This understanding of *Āyurveda* as a sophisticated information processing system naturally leads to the question of how such knowledge can be effectively integrated with modern health care. The Co.M.S. framework emerges as a methodological response to this challenge.

At its core, Co.M.S. aims to create interfaces where knowledge can be effectively transmitted between systems while preserving the integrity of each system involved. This collaboration is not about merging systems or subordinating one to another, but rather about creating pathways through which knowledge can flow and be applied appropriately within local contexts.^[19] This framework operates through three distinct yet interconnected phases: reformulation, modeling, and localization. Each phase plays a crucial role in bridging traditional wisdom with contemporary healthcare understanding.

The reformulation phase creates an initial interface by expressing knowledge in terms that maintain its sophisticated conceptual structure while making it accessible to other systems. For instance, when we understand *Āyurveda* through the lens of information processing, we are not reducing its concepts but rather revealing their sophistication in terms that can engage with modern scientific discourse. This reformulation creates the initial possibility for meaningful dialogue between different systems of understanding. While reformulation creates the initial possibility for dialogue between systems, we need a sophisticated way to translate this reformulated knowledge across different epistemological frameworks. This is where the modeling phase becomes crucial.

The modeling phase serves as a crucial transitional space where reformulated knowledge can be expressed through various frameworks that facilitate transcultural understanding. These models might take many forms – mathematical representations, physical analogies, information processing frameworks, or multimedia expressions – each serving as a different lens through which the knowledge can be viewed and understood. For example, the concept of *Doṣa* might be modeled through systems theory, network analysis, complex systems, or pattern recognition algorithms, each model offering different insights while preserving the essential sophistication of the original concept. The key understanding here is that models serve not as simplifications, but as sophisticated tools for translating complex knowledge across different epistemological frameworks. Once knowledge has been reformulated and expressed through appropriate models, we face the challenge of making it practically applicable in specific contexts. The localization phase addresses this need.

The localization phase ensures that knowledge, having passed through reformulation and modeling, can manifest meaningfully within specific contexts while maintaining its essential sophistication. This adaptation occurs at multiple levels simultaneously: at the conceptual level, where

knowledge must find expression within different systemic frameworks, and at the practical level, where principles must align with local ecological realities. This is not simply about adapting practices but about understanding how universal principles express themselves through local conditions.

Consider how this localization operates: the same fundamental principles that *Āyurveda* describes manifest differently according to local ecosystems – the available foods, the climate patterns, the seasonal rhythms, and even the latitude of the location all shape how these principles should be applied. For instance, the concept of *ritucharya* (seasonal routines) remains valid everywhere but must be interpreted according to local seasonal patterns, which vary dramatically between tropical, temperate, or arctic regions. Similarly, dietary recommendations must consider locally available foods and their properties rather than rigidly adhering to classical prescriptions from a different ecosystem.

Whether the receiving system is modern biomedicine, traditional Chinese medicine, or any other healthcare approach, and whether the geographical context is Europe, Americas, or Asia, the knowledge must find expression in ways that both enhance the receiving system's understanding and adapt to local environmental conditions. This dual adaptation – to both intellectual frameworks and ecological realities – ensures that Ayurvedic principles remain both true to their essence and practically applicable in any context.

These three phases operate in continuous interaction, each informing and refining the others. For instance, insights gained during localization might suggest new modeling approaches, which in turn might lead to refined reformulations of the original knowledge. This dynamic interaction ensures that the transmission of knowledge remains a living, evolving process rather than a static translation.

Consider how this collaborative approach might work in practice. When examining a condition like chronic inflammation, the Co.M.S. framework allows Ayurvedic insights about pattern recognition and system relationships to interface with the biomedical understanding of molecular pathways. This collaboration does not require practitioners to abandon their primary system of practice. Instead, it enriches their understanding and opens new possibilities for therapeutic approaches within their own system. A modern physician might still prescribe conventional medications but with an enhanced understanding of system-wide patterns that could inform timing, dosage, and complementary interventions.

The theoretical sophistication of Co.M.S. reveals its full potential when we apply it to specific contemporary health challenges. By examining concrete examples, we can see how the framework's pattern recognition approach offers fresh insights into complex conditions that challenge conventional medical understanding.

Consider Alzheimer's disease, a condition that exemplifies the complexity of modern health challenges. The Ayurvedic understanding of this condition as primarily a *Vāta* disturbance illuminates patterns that manifest across multiple levels of organization. Through the lens of traditional pattern recognition, we see how the qualities associated with *Vāta* – its characteristic mobility, lightness, and instability – express themselves from cellular to systemic levels. This perspective suggested cellular membrane alterations long before their confirmation through modern research, demonstrating how pattern recognition can point toward important areas of investigation. Moreover, this understanding predicted the condition's systemic nature, recognizing that the same patterns of disturbance would likely manifest beyond the central nervous system, including in metabolic processes. The variation in disease expression among individuals also aligns with traditional understanding of constitutional patterns (*prakṛti*), offering insights into personalized approaches to prevention and treatment.

The analysis of digestive system disorders through Co.M.S. further demonstrates the framework's utility in bridging different levels of understanding. In examining gastroesophageal reflux disease (GERD), which could be considered similar to the Ayurvedic description of *Ūrdhvaga Amlapitta*, we see how understanding the condition as primarily a *Vāta* disturbance with secondary *Pitta* involvement reveals important aspects of its nature. This traditional pattern recognition pointed toward the fundamental role of motility disorders in GERD's pathogenesis and suggested its connection to broader autonomic function – insights that modern research only recently reached and continues to validate. The traditional emphasis on temporal patterns, particularly the role of circadian rhythms in symptom expression, further demonstrates how pattern recognition can illuminate complex relationships in disease manifestation.

Similarly, the application of Co.M.S. to irritable bowel syndrome (IBS) reveals the framework's ability to identify sophisticated pattern relationships. The condition described in *Āyurveda* similar to IBS is *Grahaṇī Roga*, characterized primarily by *Vāta* disturbance. This perspective recognizes the intimate connection

between the gut and nervous system function well before the modern emphasis on the gut–brain axis. This pattern analysis also suggested the importance of the gut’s microbial ecology and the systemic nature of the condition – aspects that have become increasingly central to modern understanding of IBS.

These applications demonstrate how pattern recognition through Co.M.S. can guide both research and therapeutic approaches. By understanding how patterns manifest across different levels of organization, we can develop more comprehensive approaches to complex health challenges. This does not mean simply combining traditional and modern treatments, but rather developing sophisticated therapeutic strategies that address pattern disturbances at multiple levels simultaneously.

The framework’s ability to bridge different levels of understanding – from traditional pattern recognition to modern mechanistic analysis – opens new possibilities for therapeutic innovation. When we understand how patterns of disturbance manifest across multiple levels, we can anticipate systemic implications of localized treatments and develop more personalized therapeutic approaches based on individual pattern variations. This comprehensive understanding helps explain why traditional treatments often show effects beyond their immediate target, as they address fundamental patterns that manifest across multiple systems.

The implications extend far beyond individual patient care. Research methodology must evolve to capture the multi-dimensional nature of therapeutic effects.^[20] Traditional clinical trial designs, focused on isolating single variables, prove inadequate for understanding interventions that operate simultaneously across multiple levels of human physiology and psychology. Co.M.S. suggests new research approaches that can assess both specific effects and broader patterns of response, combining quantitative measurements with sophisticated pattern recognition.

CONTEMPORARY CHALLENGES THROUGH THE AYURVEDIC LENS: AN EPISTEMOLOGICAL REVOLUTION

The application of traditional Ayurvedic analytical tools to contemporary challenges reveals an extraordinary predictive and explanatory power. Through systematic *Guṇa* analysis^[21] and particularly through the concept of *Anukta Vyādhi*^[22] – the Ayurvedic methodology for understanding previously unknown diseases – we can analyze new health challenges

through their fundamental qualities, offering insights that complement and sometimes anticipate modern scientific discoveries.

The recent COVID-19 pandemic provides a striking demonstration of how traditional Ayurvedic analysis can predict the behavior of a novel disease.

Through systematic *Guṇa* analysis of the SARS-CoV-2 virus’s physical characteristics, we can understand its pathological behavior, preferred targets, and systemic effects.

The virus’s round shape with surface spikes exhibits *Tikṣṇa* (penetrating), *Khara* (rough), and *Rūkṣa* (dry) qualities, while its small size (125 nm) and ribonucleic acid-based structure manifest *Sūkṣma* (subtle) and *Laghu* (light) properties.

This combination indicates a predominantly *Vāta* nature with strong *Pitta* potential during active infection. This analysis led to accurate predictions about the virus’s behavior: its preference for dry, airy environments like the lungs; its rapid spread and mutation capability; and its inflammatory effects through the disruption of cell membranes. The systemic implications of these qualities also correctly predicted the disease’s demographic patterns, with greater severity in elderly populations (where *Vāta* naturally predominates) and in males (with higher *Pitta* expression). This approach demonstrates how Ayurvedic principles can provide valuable insights into new diseases by analyzing their fundamental properties and predicting their behavior through the systematic application of traditional knowledge in a modern context, offering a complementary perspective to conventional medical understanding and potentially guiding therapeutic strategies.

Beyond infectious diseases, this analytical framework proves valuable across various contemporary health challenges.

Environmental toxins^[23-26] offer a particularly compelling demonstration of how this analytical framework operates. Modern science typically approaches these substances through chemical composition and direct biological effects. Ayurvedic analysis examines their qualities and patterns of interaction with living systems across multiple levels simultaneously. For example, when we analyze these substances through their *Guṇa* – their subtle and penetrating nature (*Sūkṣma* and *Tikṣṇa*), tendency to deposit and accumulate (*Guru*), and capacity to adhere and create obstruction (*Picchila* and *Maṇḍa*) – we understand not just their immediate effects but their long-term impacts on human health. This understanding, in turn, suggests specific

approaches for both prevention and treatment that might not be apparent through conventional analysis alone.

The challenge of digital technology and artificial environments^[27,28] demonstrates another dimension of this analytical power. The qualities of modern technological interaction – its rapid diffusion (*Viśada*), lightness (*Laghu*), and inherent instability (*Cala* or *Asthira*) – help explain its profound effects on human consciousness and physiology. Beyond simply identifying these effects, this analysis suggests specific approaches for maintaining balance in our increasingly artificial world. Rather than advocating wholesale rejection of technology, Ayurvedic understanding helps develop nuanced approaches to preserve its benefits while mitigating its potentially harmful effects.

The rising prevalence of autoimmune conditions presents perhaps the most striking example of how Ayurvedic epistemology can illuminate complex modern challenges. While conventional medicine struggles to explain why similar triggers produce dramatically different responses in different individuals,^[29] Ayurvedic analysis of both triggering factors and individual constitution through *Guṇa* assessment could provide crucial insights into these variations.

Mental health challenges, increasingly recognized as a global crisis, particularly benefit from this analytical framework. Modern life's excess of stimulation (*Rajas*), disconnection from natural rhythms (*Tamas*), and disruption of natural satisfaction (*Sattva*) create patterns of disturbance that manifest as anxiety, depression, and other psychological conditions.^[30-33] Ayurvedic analysis reveals how these qualities interact with individual constitution and circumstance, suggesting personalized approaches for restoring the balance that extends beyond symptom management to address fundamental disturbance patterns.

THE CORE CHALLENGE: EPISTEMOLOGICAL ACCEPTANCE IN CONTEMPORARY HEALTH CARE

The fundamental challenge in implementing Co.M.S. lies not in practical considerations or even in developing effective interfaces between systems, but in achieving genuine acceptance of traditional epistemology within the conventional medical community. Even when traditional concepts are reformulated in modern terms, there remains a deep-seated resistance to accepting alternative ways of knowing and understanding health and disease.

This resistance stems from several interconnected factors. The conventional medical establishment has developed within a specific epistemological framework that prioritizes mechanistic understanding and reductionist approaches. This framework has been remarkably successful in many ways, leading to significant advances in treating various conditions. However, this very success has contributed to what might be termed epistemological rigidity – a difficulty in recognizing and accepting other valid ways of knowing and understanding health.

Moreover, the conventional medical system's epistemological framework has become deeply institutionalized, embedded in everything from medical education to research methodologies to regulatory frameworks. This institutionalization creates what might be called epistemological inertia – a systematic resistance to alternative ways of knowing that operates at both individual and institutional levels.

The challenge becomes particularly evident when we consider how traditional knowledge is often evaluated within conventional medicine. Even when traditional concepts are reformulated in modern terms, they tend to be assessed through the lens of conventional epistemology. This approach misses the essential sophistication of traditional knowledge systems by trying to validate them according to criteria that may not be appropriate for their epistemological framework.

However, potential pathways toward greater epistemological acceptance may emerge through several approaches:

First, we might focus on demonstrating how traditional epistemology can enhance rather than challenge conventional understanding. When conventional practitioners experience how traditional pattern recognition can inform and improve their existing practice – without requiring them to abandon their primary approach – resistance may gradually diminish. This requires creating opportunities for conventional practitioners to experience the practical value of traditional epistemology within their own framework of practice.

Second, the evolution of systems biology and network medicine^[33-35] is creating natural bridges between conventional and traditional epistemologies. As conventional medicine increasingly recognizes the limitations of reductionist approaches for understanding complex biological systems, traditional holistic frameworks become more relevant and accessible. This scientific evolution might create natural

openings for accepting alternative epistemological approaches.

Third, medical education could be enriched to include exposure to multiple epistemological frameworks from the beginning. Rather than presenting traditional knowledge as an alternative to conventional medicine, it could be introduced as a complementary way of understanding health and disease. This educational approach would help develop practitioners capable of working with multiple epistemological frameworks simultaneously.

Fourth, research methodologies could be developed that explicitly acknowledge and work with multiple epistemological frameworks. Instead of trying to validate traditional knowledge according to conventional criteria, these methodologies would assess how effectively different ways of knowing can inform and enhance each other while maintaining their distinct integrity.

The success of Co.M.S. ultimately depends on achieving this deeper level of epistemological acceptance. This requires not just developing effective interfaces between systems but also fostering genuine openness to different ways of knowing within the conventional medical community. Such acceptance would transform not just how we practice medicine but how we understand the very nature of medical knowledge itself.

CONCLUSION

The integration of Ayurvedic wisdom into contemporary health care through the Co.M.S. framework represents a sophisticated approach to enabling collaboration between different systems of medical knowledge. Through our analysis, we have seen how this framework provides structured pathways for knowledge transmission while preserving the essential integrity of participating systems. The journey from *Avyakta* to *Vyakta*, from unmanifest potential to manifest reality, offers a profound model for understanding how traditional knowledge can find new expressions in contemporary contexts while maintaining its fundamental sophistication.

Our exploration has revealed that Co.M.S. operates not merely as a methodology for combining different approaches but as a framework for creating effective interfaces between systems of medical knowledge. Through its three phases – reformulation, modeling, and localization – it provides a structured approach to knowledge transmission that respects both the sophistication of traditional understanding and the practical requirements of contemporary healthcare

settings. The framework demonstrates how traditional medical knowledge can interface with modern healthcare systems not through subordination or simplification, but through careful attention to how different systems can effectively communicate and enhance each other.

The process of implementing Co.M.S. has highlighted that the primary challenge lies not in practical considerations but in achieving genuine epistemological acceptance within the conventional medical community. This challenge requires addressing deeply institutionalized resistance to alternative ways of knowing while developing approaches that can demonstrate the value of traditional epistemology within contemporary healthcare contexts. The success of this endeavor depends not on forcing traditional concepts into conventional frameworks but on developing genuine openness to different ways of understanding health and disease.

Looking toward the future, we see unprecedented opportunities for healthcare approaches that can draw effectively on multiple traditions while ensuring appropriate local application. The environmental and health challenges facing humanity require solutions that can integrate insights from different systems of knowledge while maintaining their distinct integrity.^[36-39] Through Co.M.S., we can develop approaches that address both immediate healthcare needs and longer-term challenges of sustainability and system resilience.

Most significantly, this work demonstrates how traditional medical knowledge, when properly interfaced with other systems through frameworks like Co.M.S., can contribute to addressing our time's complex challenges. Rather than choosing between different medical approaches or attempting to validate one system according to another's criteria, we can develop sophisticated collaborations that allow each system to contribute its unique insights while maintaining its essential integrity. This points toward health care that can draw effectively on multiple traditions while ensuring that knowledge is applied appropriately within local contexts – a transformation that could revolutionize not just medical practice but our understanding of how different systems of knowledge can work together effectively.

The ultimate success of this evolution depends on our ability to foster genuine epistemological openness within the conventional medical community while developing increasingly sophisticated interfaces between different systems of medical knowledge. Through careful attention to how knowledge can be

effectively transmitted and appropriately applied, we can work toward healthcare approaches that honor both traditional wisdom and modern understanding, creating more comprehensive and effective approaches to health and healing in the contemporary world.

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हिंदी सारांश

आधुनिक जगत में आयुर्वेद का क्रमिक विकास और समावेशन: परिवर्तन अंगीकार करते हुए प्राचीन ज्ञान का परिरक्षण ।

यह शोध पत्र प्राचीन चिकित्सा और दार्शनिक ज्ञान प्रणाली के रूप में आयुर्वेद की एक व्यापक विश्लेषण प्रस्तुत करता है, जो समकालीन वैश्विक स्वास्थ्य देखभाल की आवश्यकताओं को पूरा करने के लिए अनुकूलन करते हुए अपनी मौलिक अखंडता को कैसे बनाए रख सकता है। आयुर्वेदिक ज्ञान को एक सूचना प्रसंस्करण प्रणाली के रूप में जांचने और सहयोगात्मक चिकित्सा और विज्ञान (Co.M.S.) ढांचे को प्रस्तुत करने के माध्यम से, हम आधुनिक स्वास्थ्य देखभाल प्रणालियों के साथ आयुर्वेदिक ज्ञान को सफलतापूर्वक एकीकृत करने के लिए विस्तृत रणनीतियां प्रस्तावित करते हैं। यह शोध पत्र इस एकीकरण के लिए आवश्यक सैद्धांतिक आधारों, व्यावहारिक चुनौतियों और कार्यान्वयन पद्धतियों की खोज करता है, जबकि अनुकूलन प्रक्रिया के दौरान आवश्यक सिद्धांतों को कैसे संरक्षित किया जाए, इस महत्वपूर्ण प्रश्न को संबोधित करता है। हमारा विश्लेषण दर्शाता है कि सफल एकीकरण के लिए आयुर्वेद को केवल प्रथाओं के संग्रह के रूप में नहीं बल्कि सूक्ष्म से स्थूल स्तरों तक सूचना को प्रसंस्करण और प्रकट करने की एक परिष्कृत प्रणाली के रूप में समझने की आवश्यकता है।