AYURVEDAKARMAYOGA

Prof. Em. Dr. Subhash Ranade **Dr. Sunanda Ranade**

Chairman, IAA Vice-Chairman, IAA

Article 1- Germany

In 1982 we first went to West Germany (At that time West and East Germany were not united as today) on the invitation of Mr. Willy Kremling who was owner of Sterimed GMBH (*Gesellschaft mit beschränkter Haftung)* –company with limited liability. This was well known company manufacturing medical equipments. This company was interested in manufacturing or importing Narayan oil.

Sterimed GMBH Company was situated in Saarbrucken small town in the state of Saarland on the border of France. The town is industrial and transport center of Saar coal basin and produces steel, sugar, poultry, optical instruments, excellent wine and beer also. It also has beautiful Saar river which is right tributary of moselle river.

Saarbrucken, Germany

At that time very few people in Germany were speaking English and therefore we were told to learn German language. This was indeed challenge for us. But we took up this challenge and learned German language in two Institutes famous for teaching German Language in Pune – Goethe Institute or Max Mueller Bhavan and Department of foreign languages / Ranade Institute of Savitribai Phule - Pune University. Thus our entry on the Global scenario of Ayurveda was only because of knowledge of German language and therefore even today we advice our students of Ayurveda to learn any foreign language - preferably Spanish –which is

number two in most spoken languages of the World next to Chinese. Spanish is also spoken in most of South American Countries and in Europe as well. At present learning at least one foreign language and knowledge of computer technology is a must for those Ayurvedic practitioners who want to visit abroad and spread Ayurveda Globally.

In this small town there was Heilpraktiker (healing practitioner) Schule (school). It is naturopathic profession in Germany. Paracelsus (1493-1541) and Hildegard of Bingen are supposed to be founder of Naturopathy in Germany. Basic philosophy of Paracelsus is very similar to Ayurveda. He believed that sickness and health depends on harmony of Macrocosm and Microcosm. For his treatment he used alpine mineral springs, various herbs and some minerals like iron also.

Naturopathy is recognized as an alternative and complementary health care profession by German law. Person practicing naturopathy needs good knowledge of anatomy, physiology, and psychiatry and can later on specialize in Homeopathy, Ayurveda, Phytotherapy, Iridology, Chinese medicine, Reflexology. About 35,000 heilpraktiker are accredited in Germany.

After our work in Sterimed Company we were introduced to well-known Naturopathic physician- H.W. Schmidt. He had his own practice and Naturopathic school also. In his own clinic he was using all the alternative and complimentary health care systems. During our 15 days stay it was really interesting to observe his way of examination of patients by using various alternative healing systems.

After first two days of observation of his clinic he requested us to give consultations to some of his patients. These patients were suffering from simple diseases like constipation to different complicated diseases like hemiplegia. Before starting consultations we visited local market where food, vegetables and folklore herbs were available. (All Ayurvedic physicians who go to various foreign countries for practicing Ayurveda should always visit such local markets). In many countries folklore healing herbs are available in the market and it is better to know about these herbs as some patients use these herbs along with regular Ayurvedic, Homeopathic, and Allopathic medicines. We have seen such herbal markets in France, Italy, Portugal, Brazil and Mexico.

Giving Ayurvedic treatment to these patients was not easy in the initial period as none of them knew about the science of Ayurveda. Many of them have even not heard the word Ayurveda. There were many hurdles on our way and each country posed new problems. These problems were of FDA rules and regulations, legal requirements, believes and non-believes, different types of food habits, climate changes and various folklore medicines in those countries.

Although the situation has now improved quite a lot, we would like to write series of these articles so that enthusiastic Ayurvedic lovers and those young Ayurvedic practitioners who want to go abroad and practice Ayurveda would get good knowledge and idea about our efforts and we hope that they will learn something from these articles.

For treatment, we had to depend on local German (European) herbs because at that time very few Ayurvedic herbs were available. If you want to treat your patients successfully, then study of local herbs and different types of food available in those countries is very essential. It is also required to make assessment of their taste, potency and various effects on doshas, dhatu and malas.

Currently more than 600 plant based medicines are available in Germany and most of them are effective. Some of them are Arnika (Arnika montana), Baldrian (Valeriana officinalis), Brennessel (Urtica dioica), Calendula (Calandula oficinalis), Crataegus (Crataegus laevigata), Eibisch (Althea officinalis), fenchel (Foeniculum vulgare), Ginko baum (Ginko biloba), Hamamelis (Hamamelis virginiana), Holunder (Sambucus nigra), Johanniskraut, (Hypericum perforatum), Kamille (Matricaria chamomilia), Lowenzahn (Taraxacum sect), Mariendistel (Cardus marianus) etc.

In Germany, since last two hundred years, there is local tradition to use herbal teas prepared from above herbs. They are sold as tea for stomach (mint and cumin), tea for kidney (leaves of birke –Birchwood or Betula tree and licorice), tea for brain (Ginseng, Ginko biloba, Rosemarine, Sage, Melisa), tea for stress (St. John's Wort, Lemon balm, Valerian), tea for immune system (Green tea, Chamomile).

Therefore for treating our patients we had to use local herbs, herbal teas and giving advice for changing food habits and life style. Initially we used these herbs as per local pharmacopeia but later on we found out their relation with taste, potency and

effects on dosha, dhatu and malas. We are visiting Germany for almost 30 years and now we understand this relation better.

We received patients having problems of constipation, obesity, hypertension, heart problems, psychological problems and joint affections. Most of these diseases were related with improper life style, junk food and drink habits, and lack of exercise. Every morning each patient was given 45 minutes time for consultation. However in the beginning this was not enough as we had to explain everything about science of Ayurveda, concept of Prakruti, relation of body and mind, concept of Agni, effect of food on doshas, dhatus and malas etc.

Problem of constipation was so common during that time that practically every patient had this problem. Therefore we use to say that keep your fingers on the pulse of the patient, close your eyes for few seconds and then diagnose the patient as he is suffering from constipation. Your diagnosis will never fail. This problem was related to diet and lack of exercise. We found out that average daily consumption of meat, meat products and sausages was extremely higher than the consumption of vegetables that has high fiber content. (Now the situation has improved and many Germans have become vegetarian and those who eat meat and meat products are eating enough vegetables). For such patients our advice was to take diet containing more roughage, daily exercise and yoga postures that will help movement of intestines. We gave them mixture of rhabarber –rheubarb root and shatavari. (European shatavari or asparagus is different than Indian shatavari).

Bowel habits of many patients were astonishing. Very few people had regular bowel habits. Some had twice a week frequency. Those who were constipated for long time, on examination of their abdomen we found hard fecolith on the area of large intestine mainly near caecum. Incidence of developing Ulcerative colitis, Irritable bowel syndrome and cancer of large intestine was high in those patients. Perhaps our readers will be surprised that there are clubs of patients suffering from these diseases, and once we were invited to give advice of food and exercise as well as life style for these patients.