

2015 ACTION PLAN



INSTITUTE OF INDIGENOUS MEDICINE UNIVERSITY OF COLOMBO



TABLE OF CONTENTS

| | <u>Page</u> |
|-------------------------------|-------------|
| Foreword | 1 |
| Introduction | 2 |
| Vision and Mission statements | 5 |
| Historical Background | 6 |
| Corporate Structure | 9 |
| SWOT analysis | 11 |
| The Role of the institute | 13 |
| Corporate Goals | 14 |

FOREWORD



Wisdom glistening everywhere

It is with great pleasure that I am writing these few words as the Director, Institute of Indigenous Medicine (IIM) University of Colombo. In the present times, Indigenous Medicine has become indispensable because of its unique approach and the IIM remains one of the country's traditional health care systems in the field of Medical education by maintaining high standards and values. The Institute of Indigenous Medicine is the one and only institute which teaches indigenous medicine in Sri Lanka and produce Ayurveda Medical doctors and Unani Medical doctors. Hence, the IIM provides a brilliant opportunity for our undergraduate students who enter the university to expand the knowledge and skills on indigenous medicine with hands on experience on Ayurveda system of medicine or Unani system of medicine. My prime objective is to establish the State-of-the-Art educational Institute in Ayurveda, Unani and traditional systems of medicine through conducting teaching and research to disseminate the knowledge to up lift the traditional medical systems in Sri Lanka.

The IIM is committed to excellence in teaching and research in Ayurveda, Unani and Indigenous systems of medicine to reinforce the recognition of Indigenous Medicine, services related to Indigenous Medicine and public outreach globally. It is very important to know that once the degree program is completed successfully, students are given an exposure for a highly diverse and nourishing environment with clinically-based study programs as top-priority and therefore there is no competition for job market. The activities of the IIM are empowered through the skills and creativity of the academic staff members who have completed their postgraduate degrees in multi-disciplinary areas related to Indigenous Medicine. They offer quality services in teaching and research activities of the institutes. The research activities in Ayurveda and Unani systems of Medicine are been performed using new advances in science and technology to obtain global recognition for all the specialized areas in Indigenous Medicine. Therefore, the Institute has a dynamic, vibrant, and highly stimulating clinical based teaching and research environment which is achieved through a blend of high quality academic staff members who

are committed to disseminate knowledge in all the areas of Ayurveda and Unani systems of Medicine. I have been witnessing the efforts of the staff members of the IIM towards the improvement of the health and overall wellness locally and within the international community.

Our institute is committed to provide evidence-based quality education of Indigenous Medicine and we are proud to integrate use of advanced technology in academics to uplift the quality of standards of the IIM.

This has been a motivation for many people to contribute for the change that we all want to see in our planet for a better way of being. Our institute is affiliated with the Ayurveda Teaching hospital Colombo to provide clinical based healthcare systems in a holistic way and students are given a clinical based exposure before complete their degrees. The teaching hospital is armed with consultants, expert physicians, surgeons and supporting staff, competent facilities like IPD services with around 15 wards, IPD services with Kayachikithsa Unit, Ayurveda Surgery unit, Ayurveda Gynecology and Pediatric units, and special OPD services with traditional medical units such as eye treatments, traditional orthopedic treatments and snake bite treatments, Yoga unit, and Korean Acupuncture and Physiotherapy unit. **U**Itimate goal of our institute is to produce knowledgeable skilled doctors in Ayurveda or Unani systems of Medicine. I am also proud of the status of our current students as well as the alumni.

The institute also actively conducts various diploma courses, certificate courses and postgraduate diploma courses related to different disciplines in Ayurveda and Unani systems of medicine.

I welcome you all to this esteemed institute and wish well for your future aspirations!

Prof.Priyani A. Paranagama

Director.

INTRODUCTION

Ayurveda Section

The earliest references of Ayurveda medicine in Sri Lanka are associated with a great physician; Ravana a king of Sri Lanka dating back to the prehistoric times. Traditionally, it is believed that Ravana of Ramayana fame was well versed in Ayurveda medicine. Ramayana mentions that he represented Sri Lanka at a medical symposium at the base of Himalaya in India during his era. There were four tribes, Yaksha, Raksha, Naga, and Vaddas in Sri Lanka at the given time. According to Historiography in Sri Lanka King Ravana was the author of the following medicine books of Ayurveda. Arkaprakasya, Nadivignanaya, Kumarathanthraya and Udishathanthraya.

Sri Lanka has a rich assortment of medicinal plants of which some are endemic to the country. The majority of the plants used are the same as those used in India. Dolukanda and Rumassala are believed to be fragments of a part of Himalayas that were carried over to Sri Lanka by the mythical monkey King Hanuman of King Rama. Evidence unearthed from prehistoric burial sites speaks of the ancient practices of Ayurveda across Anuradhapura, Polonnaruwa, Madirigiriya and Pomparrippu.

The only structural remains of ancient hospitals that have so far come to light are of those established in the old monasteries of Mihintale, Madirigiriya and Alahana in Polonnaruwa. The identity of those hospitals has been established with the help of inscriptions and discovery of medicine and other equipment. As a reference to the Mahavamsa and Chulavamsa many of the ancient kings have dedicated their services to the development of Ayurveda medicine in Sri Lanka. Examples of such practices are King Pandukabhaya (4th Century BC), King Sena (851-885 AD), King Buddhadasa (362-409 AD), King Datusena (460-478 AD) etc. As such ancient Ayurveda evidence show that Sri Lanka has inherited a glorious history of indigenous medicine in the country.

But it faced setbacks during the late part of the 16th century due to foreign invasions. Afterwards Ayurveda developed on an own on an independent process. It is practiced anualy as a traditional process. (Parental inheritance) Ex: Es Vedakama (Ophthalmology) Gedi Vana (Treatment of boils and carbuncle), Sarpavisha (Toxiology), Pissubalu (Hydrophobia), Vidum Pillissum (Burns), Kadum Bidum (Fractures and Dislocation).

At Present There are about 16,800 registered Ayurvedic medical officers of which more than 5000 are academically and institutionally qualified to serve the country and nation.

Unani Section

History of Unani Medicine begins with the age of Pericles (562-430B.C) and it was developed during the Arab civilization. Hence, it is also known as Arab medicine. The Arabs, who were seafarers in mediaeval time, had commercial links mainly with India, but later they resorted to direct trade with Sri Lanka. As a result, many of them settled down in Sri Lanka, especially in the coastal areas. The Muslims of Sri Lanka disseminated & preserved this system even in this 21st century. Its dominating figure was Boharath (Hippocrates 460-360 B.C) who is still preferred to as the "Father of Medicine", and he was the authority of the humeral theory. The great Philosopher Arasthu (Aristotle 384-322 B.C) was the next prominent figure in Unani Medicine. Jalinoos (Galen 131-210 B.C) introduced his Anatomical knowledge to the Arabians. Since then there have been so many authorities who contributed towards the development of Unani system. Ibn Sina (Avicenna 937-1037) was the most famous Physician and Philosopher in Unani Medicine System. Among his contribution to medicine "Canon of Medicine" which is an encyclopedia and text book of medicine is the best.

During the 1st century Arabians brought this system to Sri Lanka and the Muslims developed the same. History reveals the fact that Arab Physicians were the family consultants to kings of various kingdoms of the country. Having felt the efficacy and the value, the Unani system was intermingled with the traditional systems of medicine of Sri Lanka as Ayurveda was absorbed into the traditional medical system of country. All the traditional medical systems of Sri Lanka were brought under an umbrella by the 1961 Act of Ayurveda. Accordingly the term "Ayurveda" includes Ayurveda, Unani, Sidda and other traditional systems of Medicine indigenous to the Asian countries.

Successive foreign invasions and the resultant strife sapped the strength of the monarchy, and Ayurveda which for centuries before had enjoyed royal patronage became a casualty in common with other ancient arts and crafts. It was only at the beginning of this century that the organized training of Ayurveda physicians was resumed.

The Ceylon Social Reform Society was formed with the aim of reviving local arts and Sciences, including Ayurveda. The revival of Ayurveda became a high priority of the society it was handicapped by the lack of funds. In the absence of patronage by the colonial government, it had to depend on private contributions to promote its aims. Subscriptions totaling Rs.131, 000 were promised. The money was placed in a deposit under the name, Oriental Medical Science Fund. It was administered by a board of trustees with Pual E. Pieris as chairman. In 1916, the trustees mooted the idea of establishing an Ayurveda hospital.

In 1917, the board of trustees selected G. P. Wickramarachchi and R. Buddadasa to be trained in Culcutta. Their selection was prophetic (development of Ayurveda) and their subsequent contribution to the profession was outstanding. Pundit Wickramarachchi, established his own school at Gampaha in 1929.

The board of trustees continued to send students to India till 1929. When the College of Indigenous Medicine was established in 1929 the Unani system was also established along with the Ayurveda and Sidda sections at the College of Indigenous Medicine due to the untiring efforts of Dr. K. Balasingam and Sir. Razik Fareed. Dr. M. A. Ahmed and Dr. H. M. Jaffer were invited from India as lecturers in Unani. They were instrumental in organizing and establishing Unani at the college. It must be stressed that Dr. H. M. Jaffer along with Sir. Razik Fareed then a member of the Board of Indigenous Medicine strived to keep the Unani section at the college. Dr. H. M. Jaffer was the chief lecturer in the Unani section. Dr. M. H. M. Hafeel, Dr. M. A. M. Jalaldeen, and Dr. M. I. William succeeded him to the posts of Head of Unani section. They all strived hard to develop the Unani section during the period.

VISION AND MISSION STATEMENTS

VISION

To become nationally and internationally acclaimed Centre of Excellence In Ayurveda, Unani and Indigenous Systems of Medicine in Sri Lanka.

MISSION

To conduct teaching and research towards dissemination and promotion of knowledge in the enhancement of status of Ayurveda, Unani and Indigenous systems of Medicine in Sri Lanka.

HISTORICAL BACKGROUND



At the end of the nineteenth century, the British colony, the then Ceylon, had a system of Indigenous medicine, but had no college for providing indigenous medical education. Three associations or bodies that were formed had done the preliminary work for preservation of traditional status of those engaged in practicing oriental medical system. These associations were "The Sinhalese Medical Association" (1891), "Sri Lanka Vaidya Maha Mandalaya" (1901) and "Sri Lanka Samajaya Prathishakthikarana sangamaya" (1915). Eminent personalities such as, Sri Solaman R. Dias Bandaranaike, F.R.senanayaka , K.Balasingham , Donald Ubhayasekera and Ananda Coomaraswamy, the great patriots were involved in creating a fund for this purpose.

In 1926, for the first time, a committee that looked into indigenous medicine system proposed that a collage should be established with adjoining teaching hospital, to provide training those who are keen to pursue this system of medicine. The than state Council (Rajya Manthrana Sabawa) appointed an advisory council titled "Ayurveda Sammelana Sabha" in 1928 with Dr K. Balasingham as its chairperson. Based on this Committee Recommendation, an institute name "Swadeshiya Vaidya Vidyalaya" (Indigenous Medicine College) was established on 10th June 1929, and it was inaugurated by the governor General of Ceylon, Sri Herbert James Stanley, at the Bauer building situated at cotta road , Borella. Dr. A.N.N.Panikkar from India who had western medical qualification and who possessed a sound training in Ayurveda Science was brought down to the newly established college by the government as its first principle.

Similarly, Dr.H.M.Jaffer and Dr.H.Ahamed were also brought down from India to develop Unani System Medicine.

Another milestone in the field of indigenous medical system was the enactment of Indigenous medical ordinance no. 17 of 1941. Hon. S.W.R.D.Bandaranayake as the minister of health and the chairperson of the indigenous medical Advisory Council has brought the legislation to uplift the quality of teaching of the college with a national standard. In 1961, the Ayurveda Act No. 31 of 1961 was enacted by repealing the Indigenous Medical Ordinance No. 17 of 1941 and the College was renamed as the Government College of Indigenous Medicine and came under the management of the College and Hospital Board. This was a step taken to uphold the quality of ayurveda healthcare delivery and the systems of education in Ayurveda, Unani and Siddha. Four statutory boards namely, Ayurveda Medical council, the college and hospital board Ayurveda Research and Ayurveda Drug Formulary Committee were created.

In 1963, Diploma in Indigenous Medicine & surgery (DIMS), the qualification hitherto named was changed to that of the diploma in Ayurveda Medicine and Surgery (DAMS) under the new ayurveda act.



In 1977, the College of Indigenous Medicine was renamed as the Institute of Indigenous Medicine and affiliated to the University of Colombo under the University Act No. 1 of 1972. This was done by the Institute of Ayurveda Statute No. 1 of 1977, published in the Government Gazette Extraordinary bearing number 258 of March 30, 1977. The objective of this step was to produce qualified medical practitioners in the field of Ayurveda, Unani and Siddha medical systems. Institute of Indigenous Medicine Ordinance No. 7 of 1979 published in the Government Gazette Extraordinary bearing No. 67/14 dated December 21, 1979 under the Universities Act No. 16 of 1978. With this enactment, the Siddha section was transferred and affiliated to the University of Jaffna.

The institute under the affiliation to the University of Colombo has made many changes in syllabus with approval of the senate of the university. One such major revision was in 1982 where the assistance of specialists in various sections in Ayurveda, Siddha and Unani for which expert advices obtained from Prof. P.N.V.Kuruppu, advisor on Ayurveda of World Health Organization.

With the estabilishment of the Institute in 1977, imparting instructions for the two degree programmes, i.e. Degree of bachelor Of Ayurveda Medicine and Surgery (BAMS) and the Degree of bachelor Of Unani Medicine and Surgery (BUMS) commenced under the two sections of the Institute and the degrees were conferred for the first time at the convocation of the University Of Colombo held on 26.10.1992.

Since inception, the National Ayurveda Teaching Hospital at Borella has been the centre for providing resources for imparting knowledge and skills, particularly in the clinical setting. The Institute has this strength of postgraduate qualified academic staff who undertakes teaching responsibilities and 23 different subject areas are now taught during the five academic years. The syllabi contain study material on Ayurveda/ Unani and other related science to produce a competent Indigenous Medical graduate. Each academic year consists of 30 weeks teaching during three times, with two mid-term vacations. At the end of each academic year annual examinations are held. Each examination consists of written, viva-voce and practical /clinical components.

In addition to undergraduates' education, the institute conducts two postgraduates' programmes leading to postgraduates' deploma in ayurveda/unani Medicine and M. Phill degree in ayurveda/unani. The postgraduates section is under the supervision of the additional director appointed from among the senior teachers of the institute. All postgraduates' programmes are under the purview of the Higher Degrees Committee of the Institute. Some short courses are being planned by the Institute at present. Already Ayurveda pharmacy course has been stared.

Several steps have been taken foe curriculum reforms and syllabus revision with the incorporation of more applied aspects in Indigenous of pioneer in providing human resources for the delivery of Indigenous System Medicine in the country.

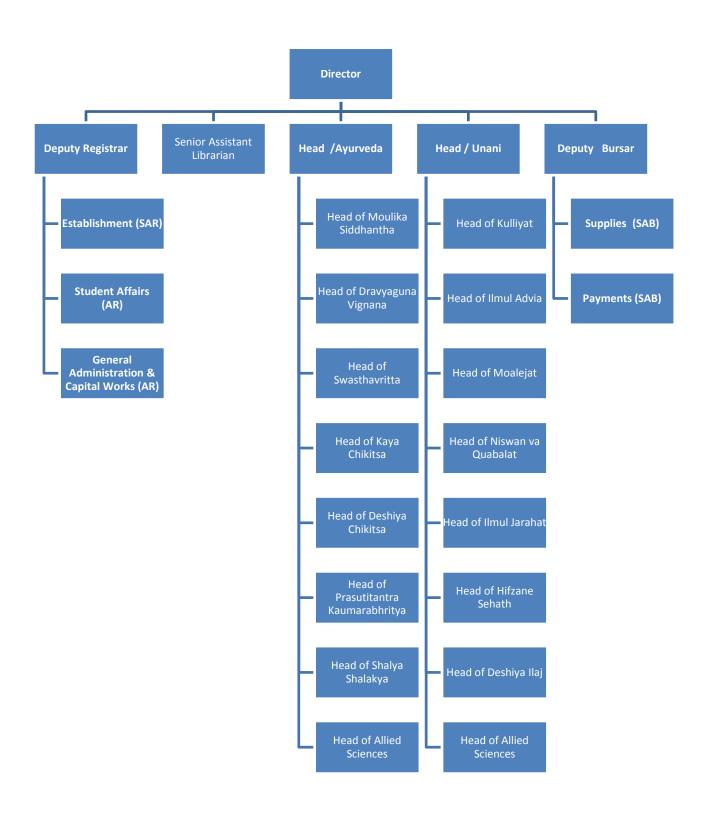
CORPORATE STRUCTURE

Members of the Board of Management

- 1. Prof.P.A.Paranagama
- 2. Ms.J.M.C.J.Wijethunga
- 3. Mr. L.H.Thilakarathne
- 4. Mr.K.D.C.S.Kumarathunga
- 5. Dr.M.D.J.Wijayabandara
- 6. Dr.J.C.K.D.Kumarasekara
- 7. Prof. Jenifer Perera
- 8. Dr.L.P.A.Karunathilake
- 9. Dr. (Mrs)M.I.Manuha
- 10. Dr.Chamari Weerarathne
- 11. Prof. (Ms) S.S.B.D.P. Soysa
- 12. Prof. Priyadarshani Galappaththi
- 13. Dr. S.M.H. Senabanda
- 14. Mr.C.Maliyadda
- 15. Mr. M.D.D. Peiris
- 16. Dr.U.R.P.P.Wimalasooriya
- 17. Prof. Kapila Senevirathne
- 18. Dr.B.M.Rishad
- 19. Dr. M.D.J .Abeygunawardena
- 20. Dr. T. Prasad Hendawitharana
- 21. Dr. T.Weerarathne
- 22. Mr.A.V.Janadara
- 23. Mr. T P Liyanarachchi
- 24. Ms. TMHPK Gunathilake

Director (Chairperson) State Secretary, Ministry of Higher Education and Highways, Higher Education Division Additional Secretary (Administrative), Ministry of Health, Nutrition & Indigenous Medicine Commissioner / Ayurveda Director-Bandaranaike Ayurveda **Research Institute Director- Ayurvedic Teaching Hospital** Dean/Medicine Head / Ayurveda Section Head Department of Unani Member of Faculty of Medicine Member of Faculty of Medicine Member of Faculty of Medicine Member of Ayurvedic Medical Council **UGC** Appointed Member **Director- Department of National Budget Deputy Bursar - Invitee** Deputy Registrar - Secretary to the Board

Organization Chart



SWOT analysis

Strengths

- Having university statues and affiliation with the university of Colombo
- Having certain legal authority to determine internal administration independently
- Trained academic staff with adequate numbers
- Experienced administrative staff
- Financial autonomy and strengths with treasury funds, generated funds and donations
- Satisfactory infrastructure facilities such as lecture rooms, laboratories, Library and other welfare facilities
- Easy accessibility due to the geographical location
- Recognition gained through 80 years of service since 1929

Opportunities

- Employability in local and foreign sectors
- Higher educational opportunities
- Capacity to self employment
- Foreign market accessibility
- Recognition and demand in special areas such as tourism, research agencies etc
- Interface with the technology
- Contribution to the national economy

Weakness

- Non- availability of required expertise in some of the major disciplines of study
- Insufficient language skills competency required at national and international levels
- Deficiencies in clinical and practical training
- Poor co-ordination among academic divisions both at institutional and inter-university level

Threats

- Difficulty to conduct modern medical components due to the restriction imposed by the SLMC
- Non co-operation of western qualified medical practitioners and Institutes
- Substandard lateral entry to the Ayurveda Medical Profession through the existing legal provisions
- Increase of number of students seeking under graduate education in foreign countries

THE ROLE OF THE INSTITUTE OF INDIGENOUS MEDICINE

- Produce quality Medical Professionals humane and well behaved, equipped with knowledge, skills, attitudes, and competencies and perform their art with highest moral and ethical standards as aspired by the public.
- Be a self supporting, administratively and financially autonomous body.
- Provide undergraduates medical education in the relevant fields for the State and Private sectors.
- Continuously review and improve the degree programmes and course content, taking in to consideration of the development in the fields of ayurveda, unani and traditional medicine.
- Assist the state sector to conduct in service training programmes.
- Develop research programmes.
- Support and conduct Continuing Professional Development (CPD) programmes.
- Establish collaborative link programmes with similar undergraduate Institute abroad.
- Train staff and improve skills in appropriate areas of specialties.
- Conduct needs analysis of private and public sector requirements.
- Maintain strong links with related international professional bodies.
- Establish career guidance service for the graduates of this institute.
- Introduce entrepreneurship development programme encouraging students for self employment.
- Initiate postgraduate programme to produce skilful professional among paramedical and other similar professionals.
- Step to improve the community Social Responsibility (CSR) of the Institute by holding health camps to provide health care and introducing preventive methods in oder to improve the family Community Medicine.
- Entering to the Holistic approach in order to integrate the indigenous medicine with other Medical System.

CORPORATE GOALS

- 1. Improve Employability and Quality of Graduates.
- 2. Uplift the standard of IIM to the International University level
- 3. Increase opportunities and access to Higher Education
- 4. Improve Satisfaction of Stake Holders
- 5. Excellence in Research, Publications and Commercialization.
- 6. Convert Higher Education for attracting Investments & Foreign Exchanges
- 7. Improve Effectiveness and Efficiency of IIM
- 8. Enhance contribution to the National Development Reconciliation and Peace