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A case for comparative clinical effectiveness research on Botanical therapeutics

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Abstract

Economic potential of plant based drugs was studied extensively and a comparative economic implications were also reported. Unfortunately, PharmacoEconomic evaluations (Outcomes measurements) were rarely done on Botanical Therapeutic s, in India and abroad. There is a growing need to make Botanical Therapeutic interventions as eligible candidates for Comparative Clinical Effectiveness Research (CCER/CER). CCER is broadly defined as –"A type of health care research that compares the results of one approach for managing a disease to the results of other approaches. Comparative effectiveness usually compares two or more types of treatment, such as different drugs, for the same disease. Comparative effectiveness also can compare types of surgery or other kinds of medical procedures and tests. The results are often summarized in a systemic review (ARRA, 2009). " In India PharmacoEconomics is yet to make its mark in Academics, Industry, and Government. CER studies are needed to fix drug prices scientifically, to make an entry into essential drug lists of State and Central governments, to determine health insurance premiums. CER results are also act as added values for export and import of drugs. The presentation has three components: 1. Explain the relevance of CER to Botanical Therapeutics; 2. Explore the utility of Meta-Analysis as a tool of CER to statistically synthesize individual studies on plant based drugs (individual parts of plants and whole extracts); 3. Present and discuss the results of a prospective PharmacoEconomic study conducted on type-2 Diabetic patients who were on two plant based products—Vnishamla K (Ashwagandha and Amla) and Guduchi—and two standard treatments—Metformin and Glibenclamide. Quality of Life (QOL) profiles were assessed by administering the generic instrument (SF-36) and a disease specific scale (Qolid). The QOL profiles of Botanical Therapeutics were seemingly indicated higher values (Mental Health Domains) when compared to standards. However, results are to be interpreted cautiously as the study was conducted on convenient t samples obtained from a city corporate hospital and a government Ayurvedic clinic.

Biography

Having served nearly two decades as Drug Regulator in India (Drugs Inspector and Asst. Drugs Controller, Orissa State, India, 1968-1987, he left for USA for higher studies. Obtained M.S (Pharmacy Administration) University of Minnesota (1987-1989); M.A (Politics) and PhD) in Behavioral and Administrative Pharmacy from West Virginia University, Morgantown (USA, 1990-1994). He did his B.Pharm (1963-67), M.Pharm—Pharmaceutical Technology (1978-80) and both the degrees from Andhra University, Waltair, India.

Taught at Howard University (1994-2001), Florida AM University, Tallahassee (2001-02), and Hawaii College of Pharmacy, Kapolei (2005-- Professor and Research Director). As a Professor, Principal and Dean worked at two Pharmacy Colleges in Andhra Pradesh. Currently, serving as Research Director and Academic Advisor for TP Colleges of Pharmacy, Warangal, India. Presented and published in the areas of Meta-Analysis and Outcomes Research. Recipient of WHO Fellowship (1984); The Barbara Alvis International Award—WVU Award (1994); Upjohn Award (excellence in Research, WVU) 1992; The outstanding Paper Award, AAAS-Second place (1992); Howard University Faculty Merit Award (1999); Howard University Distinguished Faculty Author (2000). He believes that ever since he embraced 'Chaos Theory and Complexity Science', his professional life really became 'chaotic'.