



Contents lists available at ScienceDirect

## Journal of Ayurveda and Integrative Medicine

journal homepage: <http://elsevier.com/locate/jaim>

## Discussion Kernel

# Conserving traditional wisdom in a commodified landscape: Unpacking brand Ayurveda



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## ARTICLE INFO

## Article history:

Received 7 July 2022

Received in revised form

11 October 2022

Accepted 12 October 2022

Available online 18 November 2022

## Keywords:

Commodification

Ayurveda

Cultural appropriation

New Age Orientalism

## ABSTRACT

As Ayurveda continues to gain global recognition as a sanctioned system of health care, the essence of Ayurveda's identity has become prey to commoditization and commodification for commercial undertakings in the holistic health milieu of India, but also in emerging markets such as Europe. This paper critically assesses the commodification of Ayurveda as a cultural signifier within Europe that separates the indigenous artefact from its Vedic origins. Often presented as an elite commodity in Western settings, Ayurveda has become embedded as a cultural artifact within consumer society as the epitome of holistic care with an emphasis on its spiritual attributes, yet simultaneously isolating it from the customary elements that motivated its inception. The paper argues that Ayurveda's discursive detachment from its ontological tenets facilitates its rearticulation as a malleable experience as it crosses national boundaries, and in this process fosters the misinterpretation of the ancient healing tradition. This process may provide Ayurvedic treatments and principles with increased visibility in Europe's health sector. However, brands are exploiting this niche with push-marketing strategies to capitalize on the budding Ayurveda industry, turning traditional medicines into emblematic commodities. To advance this argument, we examine product diversions in the commodification of classical Ayurvedic medicines in the Netherlands and Germany, focusing on the over-the-counter (OTC) segment. We present an interpretive analysis of the processes that are (de)constructing traditional practices and principles as Ayurveda travels beyond India, and how this complicates issues of authenticity and expertise as herbal medicines diverge from the indications ratified in Ayurveda's classical compendiums.

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## 1. Introduction

This paper critically assesses the commodification of Ayurveda as a cultural signifier within Europe in ways that separate the indigenous artefact from its Vedic origins. We argue that through the commodification of Ayurveda, Indian culture still remains an object subsumed under the speculist eye of Orientalism. Paradoxically, what was in the past oppressed by the West [1] is now becoming appropriated [2] and commodified both nationally in India and internationally [3,4]. Building upon the work of Said, we argue that the commodification of Ayurveda in Europe represents a form of 'New Age Orientalism' [5] where the essence of Ayurveda – a manuscript for health care elaborated in ancient Sanskrit texts –

has been distilled to a commodified wellness & spa culture, catering to the desires and spiritual curiosity of the upper middle class from the Western world. Often presented as an elite commodity in Western settings, Ayurveda has become embedded as a cultural artifact within consumer society as the epitome of holistic care with an emphasis on its spiritual attributes, yet simultaneously isolating it from the symbolic elements that motivated its inception. We argue that the market strategy of divorcing Ayurveda's discourse from India's ancient philosophical ontologies facilitates its rearticulation into a malleable experience as it crosses national boundaries, and in this process fosters the misinterpretation of the healing tradition.

Activists and scholars in India and elsewhere have subjected the commodification of different traditions and forms of non-Western knowledge to a strong critique in recent decades. Traditional knowledge in medicine, agriculture and other life domains frequently operates via economies of reciprocity. Commodification, a hallmark of capitalist market-based economies, is viewed as an existential threat

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Peer review under responsibility of Transdisciplinary University, Bangalore.

to the social structures that sustain both traditional knowledge and local livelihoods [6]. For example, Whitt argues that the commodification of indigenous knowledge represents an ongoing form of bio-colonialism [7]. In a study of traditional knowledge systems in Hawaii, Conway argues that the prevention of commodification of knowledge is a prerequisite to self-determination for indigenous peoples [8]. Vermeylen offers a nuanced critique of processes of commodification of traditional medicinal knowledge of the San people of Southern Africa [6]. Vermeylen's life story approach reveals that while commodification of medicinal plants is viewed as a pragmatic choice by local people, this process has led to a deep sense of loss as well as cultural changes in the meanings attached to local plants. In India, Vandana Shiva has led a powerful critique of the commodification of traditional agricultural knowledge as 'biopiracy', particularly focusing on the impact on indigenous peoples of the privatization of plant genetic material via intellectual property rights [9].

Despite this critique, apart from a few notable exceptions there has been little research so far on processes of commodification of Ayurveda, particularly in Europe. This is surprising, as interest in Ayurveda has experienced rapid growth both in India and abroad in recent years. Ayurveda's capacity to assign personalized, integrated treatments that appease both the physical and energetic body is increasingly valued in the alternative medicine market. The domestic Indian Ayurveda market was valued at US\$2.5 billion in 2015 and forecasts expect this to rise threefold to US\$8.0 billion by 2022, with a yearly export market of over US\$780 million. The same report forecasts export growth of 20% yearly, implying a global market size worth US\$9.7 billion by 2022. By 2028, the global Ayurveda market is expected to reach US\$21.12 billion. These figures signify that what originated as a holistic healing and knowledge system is increasingly viewed as an opportunity for profit accumulation.

Given this context, it is important to understand the implications of Ayurveda's ongoing commercialization and commodification as it moves into new markets. This paper builds on recent research that documents how these processes are unfolding in India. Kudlu assesses how open-source Ayurvedic treatments and herbal remedies are increasingly commodified in Kerala, which has grown to become a prominent Ayurveda tourism destination [4]. The commodification of Ayurveda is thus readily occurring in the country of origin itself. Apart from the work of Kudlu, Bode offers one of the few in-depth analyses of processes of commodification in India's Ayurveda sector [10,11]. The author documents how by the 1990s, Ayurvedic medical products in India were increasingly transformed into mass-produced goods, 90% of which by the end of the twentieth century were sold as over-the-counter medicines [10]. In this process, a nascent niche was born through which classical Ayurvedic medicines are also being recast as over-the-counter 'dietary supplement' commodities in Europe. This process leads to symbolic resignifications as products are diverted from the doshic (relating to the doshas) context in which they are embedded, while concurrently bypassing the deliberation of the physician as reported by Kudlu [4].

Bode (p.230) argues that "'high-tech' products have replaced traditional medical forms such as bitter decoctions (kashaya), crude powders (churna), hand-rolled pills (gulika, majun), medicated butters (ghrita) and semi-solid formulas (avaleha)" to suit the proclivities of the modern Indian consumer [10]. The author goes on to argue how Ayurvedic products are also "propagated as substances that take away the venom of westernization", and presented as an "adjuvant for fighting the iatrogenic effects of biomedical treatment". These are new identities that Ayurvedic medicines have taken on in the market economy:

*Just like modern pharmaceuticals, Ayurvedic and Unani medicines are framed by a variety of arenas. For example, in the context of the*

*family these substances are tokens of nurturance; in the national arena they are proof of Indian spirituality vis-a-vis Western materiality; and in the social context the consumption of Ayurvedic and Unani medicines testifies to a wholesome lifestyle and ecological awareness. And as prescriptions of traditional physicians of high repute and moral status, Ayurvedic and Unani medicines become signals of wisdom and are conceptualized as gifts to ailing humanity of Hindu rishis (seers) and Muslim tabibs (wise men). However, when Ayurvedic and Unani medicines feature on the price lists of manufacturers they are merchandize (p. 226) [10].*

While these studies shed light on the commodification of Ayurveda within its origin country, little is known about how these processes are unfolding outside of India. As the number of product and service providers branded in the name of Ayurveda multiplies, some important questions are raised: What are the medico-cultural implications of Ayurveda's commercial exploitation as an artefact to be commodified? Where and how does the loss of metis [12] occur throughout the commodity chain as Ayurveda travels from India to Europe, and how does this influence public understanding of the knowledge system? How is knowledge about Ayurveda produced and reproduced in these commodity chains? We engage with these questions to capture a more nuanced understanding of commodification dynamics. The insights presented in the paper are drawn from a larger study of Ayurveda in Europe. Data sources for the study included interviews with practitioners, physicians, company owners and key informants in Germany and the Netherlands, as well as a review of Europeans-based alternative medicine online shops. The focus of the paper is on how the marketing strategies of firms turn traditional medicines into emblematic commodities, and the social and cultural consequences of this. We do not focus on the potential adverse health consequences to consumers of the misrepresentation of Ayurvedic products. This should, however, be the focus of future research.

The article proceeds as follows; first we briefly review the two key concepts that frame this study, New Age Orientalism and commodification; second, via a case study of the Netherlands, we assess how classical Ayurvedic medicines are being recast as over-the-counter 'dietary supplement' commodities in Europe; we then provide examples of common concepts in Ayurveda that are being deconstructed, reconstructed and integrated in the lucrative herbal medicine market. We conclude with a discussion that summarizes findings on how commodification is deviating Ayurveda's focus on treating practical health problems to capitalizing off of market niches oftentimes affiliated with wellness signifiers. Consumer demands and expectations driving product diversion and reinterpretation opportunities are examined, along with its effect on Ayurveda's identity within dominant Euro-centric narratives.

## 2. Commodifying 'otherness'

In 1978, Edward Said brought Orientalism to public attention as a system of thought that impelled Western consciousness to confront and question the bifurcation being created in the world as a consequence of European colonial, hegemonic power over the Eastern world. Said argues that the representation of 'the Orient' is a fabrication by Europe that served to create an ideological divide between the East/Orient with the West/Occident [13,14]. For Said, Orientalism was a "mode of discourse with supporting institutions, vocabulary, scholarship, imagery, doctrines, even colonial bureaucracies and colonial styles" (p. 10) [13]. This mirror of antipodes and contrasts perceived by the West set the stage for

justifying an exercise of power/knowledge domination over their given subject, that is, 'the other' Oriental society [14].

While Said's Orientalism alluded to the perceived superiority of West over East, Reddy argues that in recent decades a 'New Age Orientalism' has emerged, where the West has come to romanticize and idealize certain facets of Eastern culture [15]. As Islam argues, this idealism emerges "from a crisis of modernity" in the West, giving birth to 'new age' and alternative lifestyles and desires amongst certain Western populations [5]. New Age Orientalism is therefore largely informed by a postmodern discourse where enlightenment values of the West are being catechized, a circumstance that set grounds for the romanticization of Eastern philosophies. At the same time, New Age Orientalism leads to the production of new stereotypes regarding the East. In the healthcare/wellness domain for instance, the West has come to idealize the perceived 'holistic', 'healing' and 'wellness' qualities of Eastern medicine, when held up against an overly medicalized Western biomedical system. In this process, Islam suggests that 'New Age Orientalist desires' have prompted the West to exercise new forms of colonial authority over Eastern medicine, where 'complementary' Eastern medicine is legitimized but subjected to the controls of Western medicine in order to make it legible to Western institutions [5].

One overt form of this authority or control is the ongoing commodification of Eastern medicine for Western consumers and, increasingly, affluent Eastern consumers [5]. The emergence of Ayurvedic spa & wellness resorts in India that target Western consumers is one symptom of this commodification [3,10,16]. For example, Kudlu (p. 275) argues that in Kerala this shift is paradigmatic "from pharmaceuticals to services and from illness to wellness" and demonstrates a reinterpretation of Ayurveda's original form to satisfy the medical tourism demands of international travelers [4].

Appadurai, in a much-cited edited volume, provides a framework under which we can conceptualize the cultural aspects of the commodification of Ayurveda in Europe [17]. The contributors to this volume delve into how objects of value morph as they circulate from hand-to-hand, and across sociocultural and economic settings. In this process, transient things go about their lives, interacting with different crowds that add value, remove value, and inscribe new meaning to the object (material or service) as it transforms into a commodity. This lens is appropriate to understand the flows of complex things like indigenous ontologies and medical epistemologies by imparting a more anthropological account on how commodities are situated in our lived experience, in contrast to the more economic terms in which they are viewed in Marxist or mainstream economic theory. As Appadurai argues (p.5), to uncover such processes of commodification, we must "follow the things themselves, for their meanings are inscribed in their forms, their uses, their trajectories." [17].

Against this background, approaching Ayurvedic products as social things provides context for understanding how actors and processes convert them into commodities across transnational settings. Bearing this in mind, the purpose of this study is to contribute to the debate on whether borrowing cultures may benefit from Indian medical indigeneity without compromising its integrity in the process. This is not to say that the globalization or commercialization of Ayurvedic knowledge is inherently problematic. However, little is known about how these processes are unfolding in European countries, nor about the implications for the integrity of Ayurveda as a philosophy of holistic health. This study accordingly assesses some of the agents and processes that drive the Ayurvedic commodity chain in Europe, in order to understand how the wholeness of Ayurveda may be preserved as it reaches new localities.

### 3. Over-the-counter Ayurveda: side-stepping the physician

The medicine commodity has the distinct quality of being need-driven, unlike demand-driven retail and consumer-goods. Provided that their consumption arises out of the incidence of health disturbances, the scope of medicine usage is limited to specific contexts, systematically rendering them more resilient to commodification. Classical products in Ayurveda are particularly resistant because of the *doshic* context in which they are embedded. The formulations may be polyherbal or consist of a single herb, they have specific *gunas* (qualities/primordial attributes) and are prescribed after a series of diagnostic techniques in deliberate combinations and proportions to pacify aggravated *dosha(s)*. Ayurvedic physicians are thus the primary actors with the pharmacological knowledge to mediate their consumption.

Consumption is therefore often mediated by an expert, the doctor, whose deliberation is mandatory for the prescription of products that are meant for curing a practical problem. As it is the doctor that acts as the expert mediator for distinguishing between the states of health and illness, they serve as an important barrier to pharmaceutical producers and companies for the commodification of medicines or health treatments. For capital to seize more of the market, this barrier must be circumvented. The Ayurveda industry in India did so using two strategies: one was to side-step the doctor by targeting consumers and tending to the over-the-counter (OTC) segment (including classical products and reinventions/diversions of traditional medicines). Second was to concentrate on prescription 'ethical' products that are solely available through the mediation of the physician. Both these strategies diverted Ayurvedic products from *the established path* by bypassing the physician and breaking outside the scope of Ayurvedic principles [4].

In India and in Europe, Ayurveda products and therapies are marketed as natural solutions against common ailments (for example, indigestion, cough, headache, pain etc) and as remedies against diseases of the modern era (diabetes, arthritis). Here, Ayurvedic medical products turn into mass-produced goods to be distributed and consumed, 90% of which are now sold OTC and bypass the deliberation of the doctor [10]. Firms marketing Ayurvedic products attempt to capitalize off Ayurveda's 'natural' character by framing their products in opposition to "synthetic" Western pharmaceuticals, making them easy to exploit commercially [10]. In this process, Bode notes how large firms promote Ayurvedic products as safe solutions rooted in Indian national pride, culture, and *desi*-ness.

In the context of India, there are three reasons that explain why in the 1990s branded Ayurvedic medicines came to dominate the market: the rise of a wealthy urban consumer class; the wish of manufacturers to protect investments in marketing; and favorable government policies towards Indian indigenous medicines. These are responsible for the plethora of brands catering to a class of affluent urban consumers with products that are about five times as expensive as comparable traditional medicines [10].

Ambiguity surrounding the identity of Ayurvedic commodities also has to do with lenient regulatory policies for products to be able to carry the title of "Ayurvedic Patent or Proprietary medicine", where the main guideline requires that ingredients be found somewhere in Ayurveda's principal texts. This means that single ingredients can be cherry picked across different texts, which in turn invites the manipulation of recipes by exploring new combinations. This leeway is what allowed Procter & Gamble's Vicks Vapo-Rub to become a registered proprietary Ayurvedic medication, as the analgesic satisfies the provision that the constituent ingredients are mentioned in the authoritative texts on Ayurveda,

even though the formula is not manufactured in accordance to the processes indicated in the canons [10].

#### 4. Ayurvedic products and reinvented commodities in Europe

In Europe, the commodity trajectory of Ayurvedic pharmaceuticals consists of a mix of classical and proprietary medicines. On one hand, classical medicines are derived from 'open-source knowledge' that by virtue is embedded in Ayurveda's *doshic* context, rendering them more resistant to commodification [4]. On the other hand, there are new stakeholders and ethical proprietary-focused companies that are diverting products from the established path as a strategy to circumvent *doshic* logic by using "Indian herbs" as source of new active pharmaceutical ingredients to catalyse commodification potential.

New segments of consumption have emerged enabling manufacturers to expand to new niches without competing with classical products. A range of products across the OTC segment have emerged that essentially break the boundaries of traditional ethos by altering the products in terms of form, the channels through which they circulate and the composition of the formulations. Using google search, we surveyed the Ayurveda-branded products available for sale online in Europe. We analyzed how European companies are formulating and presenting commodities in the name of Ayurveda, using their 'unique selling point' or manufacturing processes as a benchmark to compare the extent to which the principles align with classical Ayurveda (and Ayurvedic pharmacology). Highlighted below are enigmatic examples that we found that exemplify the separation of the artefact from its Vedic origins.

Our first example is Ayurvedic herbal shampoos that are sold as cosmetic products on the open market. Traditionally, soap nut (Sanskrit name is *Reetha*, Latin name is *Sapindus trifoliatus*) is the medicinal plant which contains antimicrobial and antiseptic properties for cleansing the scalp and producing a lather. Today, international companies such as Rituals will embed certain ingredients like wheat protein and sweet almond oil in a predominantly chemical formula, and present the shampoo to the world as part of a product line titled 'The Ritual of Ayurveda' under the 'Rebalancing collection'. This same range has also launched a series of unconventional product segments like 'Ayurveda hand wash', 'hair & body mist', 'bath foam', 'kitchen hand balm', and 'coconut milk bath'. At the time of writing, several claims were found on the company website (<https://www.rituals.com/nl-nl/home>) that reproduce an oversimplified misconception of Ayurveda that the primary aim is to restore 'balance': for example, "Rebalance your energy from head to toe with this hair & body mist from The Ritual of Ayurveda."; "The Indian rose and himalaya honey used in the collection create a balancing effect"; and "After you've finished your kitchen chores, rebalance and restore the moisture in your hands with the luxurious hand balm from The Ritual of Ayurveda."

These quotes will be immediately confounding for adherents and practitioners of Ayurveda. How will moisturizing hands after washing the dishes lead to balance? What is a 'balancing effect'? Is balancing 'energy' as easy as applying a mist? And what kind of energy are we talking about? This is not to diminish the companies aim of trying to instill joy in daily life, but when we understand that *imbalance* in Ayurveda is in fact balance, and that balance is not static but a state of dynamism that is influenced by multiple factors, the claims made by the company simply reduce to an inanity that something as subtle as "energy" can be alleviated with a hair and body mist.

Companies are also breaking traditional barriers by stepping outside the recipes and recommendations laid in classical texts. The company Himalaya for example has released a herbal toothpaste containing sea salt as the active ingredient: "This Ayurvedic dental

cream with its clinically tested formula contains natural salt, which is considered a natural abrasive" (<https://www.himalayaproducten.nl/product-categorie/dental-cream/>). However, the first chapter of *dinacharya* (daily regimen) describes salt as *lavana rasa*, which is contraindicated to be applied on the gums and teeth. In this process, commodification stretches the portfolio of products that may be called 'Ayurvedic', regardless of whether the principles of Ayurveda are followed.

In the skin care sector, hybrid Ayurveda–allopathy skincare supplements have proliferated. For example, the company Samaya has designed a proprietary formula that aims to balance the *kapha* skin type. The product includes Ayurvedic botanicals like triphala and Gotu kola (*Centella asiatica*) in combination with non-traditional ingredients. The product page describes this as follows: "Authentic Ayurvedic herbs combine with Hyaluronic Acid, CoQ10, Vitamin E and Vitamin C to promote the formation of collagen in your skin, help tissue repair, strengthen your immune system and combat tiredness and fatigue" ([www.samaya.com](http://www.samaya.com)). This is a cosmetic-focused product containing synthesized substances like CoQ10 and hyaluronic acid that ruptures the pharmacological logic of Ayurvedic ingredients.

New categories of commodities such as memory wellness can also be found as OTC supplements (for example, [www.planetaryurveda.com](http://www.planetaryurveda.com)). These products extend the commodification of Ayurveda into specialized market segments. Brahmi (*Bacopa monnieri*) is a popular perennial creeping herb whose name is derived from the Sanskrit term *Brahman*, universal consciousness that is inseparable from *shakti*, the creative force through which it permeates. Brahmi has wide-ranging effects, one of them being a brain tonic that promotes *medhya* (intellect). The issue with propagating Brahmi under the label of 'memory wellness', as with the examples above, is that according to Ayurvedic traditions it is a gross oversimplification that reduces the effects of the plant to one function in order to accommodate the marketability of the commodity, while letting the other effects slip. From an Ayurvedic standpoint, everything is cause and effect. The impact of Brahmi on cognitive functions will elicit a butterfly effect on every other function in the body. This is why, while Brahmi products ostensibly help with 'memory support', it is misinformation to market it as so (as product names) because this fails to acknowledge its significant effects on other bodily functions.

Ayurveda often speaks of the *karma* (actions) of medicines through the prism of *doshas*, as it provides a more encompassing view of the medicinal effects of substances on the body. Brahmi is *tridoshic*, so it will regulate the three *doshas* (Vata, Pitta & Kapha constitutional types). It also has a *madhura* "sweet" and *tikta* "bitter" taste so it pacifies *Vata* and *Pitta*. This means that it helps to regulate the nervous system, it removes mental turbulence and nourishes the *dhatu*s (tissues). Brahmi falls under a classification of drugs known as *rasayan*, a rejuvenative herb (*Rahmanian*). Typically before consuming a *rasayan*, there must be an assessment of the *prakriti* by a physician so that a suitable *rasayan* can be assigned to the individual according to their mind-body makeup. The body must moreover be primed with biopurification procedures before ingestion of the *rasayan* to reap integral effects. In some cases, the issue with OTC distribution of drugs is that it opens the gateways for self-medication. While the Ayurvedic expert may be able to self-diagnose and prepare the body for consumption of the *rasayan*, the typical consumer may purchase and drink a 'memory support' tablet without knowledge of his or her constitution, with a weak *agni* (transformation principle), with *ama* (metabolic waste products), and may be selecting a herb that is not suitable for their situation. In the case of the latter, consumption of the *rasayana dravya* (substance) will essentially serve little purpose.

Along the lines of the case of Brahmi, '5 herbs capsules' is an OTC proprietary product manufactured by the company Dr. Wakde's,

and marketed as “aphrodisiac herbs for energy & vigor” (<http://drwakde.com>). *Vajikarana tantra* is one of the eight branches of Ashtanga Ayurveda for promoting sexual health, and as per the *Charak Samhita*, directions including body purification therapies, diet, conduct and medicinal formulations have been laid out for managing sexual dysfunctions [18]. The issue with commodified products such as the one above is that the *Charak Samhita* clearly lists contraindications for *Vajikarana* preparations, and if people are self-medicating it is highly possible that audiences will be unaware of those factors. Second, purification procedures (*Sodhana*) are necessary before intake of the medicines to reap efficient results, and provided that the drugs are available online or OTC, buyers are free to consume them without accounting for whether their internal environment is accommodating for the medicine.

Apart from the constituent ingredients in formulations, Ayurvedic medicines have also taken new form as with the controversial case of extracts. Ayumeda for example is a German-based company that uses extracts for manufacturing dietary supplements (<https://ayumeda.eu/>). An extraction process was developed to isolate desired active constituents of medicinal plants by breaking down the hydrophilic (water-soluble) or lipophilic (fat-soluble) molecules. Supercritical CO<sub>2</sub> extraction is used as a solvent to capture the oil and fat soluble molecules from the herbs. For the hydrophilic (alcohol-soluble substances), water or ethanol is used as an extraction medium. The CO<sub>2</sub> extract is then combined with the powdered water extract or hydroethanolic extract to produce the final product. However, utilization of alkaloids from plants used in Ayurveda does not systematically render a product ‘Ayurvedic’. For example, *ashwagandha* (*Withania somnifera*) contains the phytochemical and steroidal lactone Withaferin A, though as a whole contains a wide range of therapeutic agents that can be used for treating a variety of clinical conditions. For this reason, an Ayurvedic physician will not solely perceive *ashwagandha* as a steroid, but will account for its assortment of medicinal properties. This is not to say that using extracts is inherently problematic, but calling the supplement ‘Ayurvedic’ is not an accurate representation as the isolation of bioactive constituents does not satisfy *rasa panchaka* – the five principles of Ayurvedic pharmacology.

## 5. Going to the cradle of wellness commodification

The examples above showcase how Europe's (and other continents) inclination to resignify Ayurveda as an alternative remedy (often cross-practiced with allopathy) ensures an ideological hegemony where the Ayurvedic health system does not exist in conflict (economic, theological) with established Western structures. As a result, when consumers engage with Ayurveda, people are bound to be unaware of the complex principles and individualized practices that underly the science in order to reap its integral benefits. For this reason there is a strong need for the government of India to strengthen its oversight on the mechanisms that regulate the development of Ayurveda around the world, and in that process implement standards on therapeutic products, services and education circulating in the name of their ancient tradition. Without this, those that do decide to engage with Ayurveda are left to a *laissez-faire* type of leadership with little guidance on how to transmit the classical body of knowledge that has been built according to India's ecological and cultural parameters, and little counsel on how to adapt it to the site of practice.

From an epistemological perspective, protection of theoretical and academic integrity of traditional medical systems can be approached in the realm of education in the countries where knowledge is being (re)produced, accepted or denied. This allows for a more detailed understanding of what constitutes certain subjectivities that are hindering Ayurveda's advancement in an

integrated manner. The theories, practice and rationalities of traditional medicines have unique, site-specific aetiologies for explaining and treating (psycho)somatic conditions. The mechanic parameters and methods of biomedicine are thus unfitting to capture or measure indigenous worldviews towards health and healing. By not catering to other local realities, the system by design fails to acknowledge any other potentially medically significant prospects. In the midst of these impediments, the model, products, therapies, and knowledge being propagated in new settings are bound to depart from the beaten path. In this process, the model of Ayurveda and its accompanying knowledge and metis may be driven to adjust to the receiving cultures logics and praxis, so as to be able to practice in any capacity [12].

One of the macro factors that engenders the varying expressions of Ayurvedic education is that Ayurveda is recognized as an official system of medicine in India, whereas in Europe it is primarily classed as a system of complementary and alternative medicine (CAM). An argument for this designation is that many of the principles at the foundation of Ayurvedic theory are not evidence-based. Yet, if Ayurveda needs to provide evidence-based scientific research in order to be accepted as a verified system of medicine, this is a major bottleneck. In other words, the hegemony of Western, positivist scientific categories and biomedical parameters are dictating codes of medical validity, a structure that is intertwined in power relations that are impeding Ayurveda's – and other forms of traditional healing systems – from advancing in research to gain acceptability and support.

In other respects, while evidence-based scientific research aids in the affirmation of Ayurvedic theory, the question remains whether the rational, secular, analytical language of modern science holds the appropriate vocabulary to interpret the variables of indigenous realities and ontologies, many of which have evolved from acceptance of the claims in the classical literature as testimony. Nevertheless, Ayurveda is increasingly progressing towards scientization, with information being compiled in databases such as the AYUSH research portal (<https://ayushportal.nic.in/>). Such initiatives help to bridge the divide amongst audiences by speaking a contemporary language that helps to demystify the seemingly arcane. With scientization also comes the opportunity to truly understand and expand Ayurveda by studying how we might apply the founding principles in various contexts, in place of being reductive by solely imitating or appropriating the format as it exists in the Indian subcontinent as part of a commodification venture.

## 6. Discussion

Ayurveda is a practical knowledge system that aims to restore balance across the complex of subtle bodies (as per the *pancha koshas* concept) that render us human. Yet, several levels of ‘resignification’ and ‘symbolic displacement’ throughout the West are distancing this indigenous artifact from its original theoretical doctrines [19]. As Ayurveda travels, its very name becomes an amorphous signifier severed from the original ontological and epistemological assumptions that engendered its development. As the products analyzed above show, the nucleus of Ayurveda founded on components such as dietary practices and internal purification have opened up a spectrum of possibilities for the delivery of commodified classical medicines across the globe. Yet unsurprisingly, the *most important* practices such as daily routine (*dinacharya*), seasonal regimens (*ritucharya*) or the core moral codes that individuals should uphold (*sadvritta*) – which cannot be sold for monetary gain – are almost entirely cast aside.

Ayurveda's landscape has undergone numerous transformations since its genesis, so characterizing the nature of Ayurvedic medicine commodities can help understand factors that are

enabling reconfigurations in their physical form and identity. In this process, industry and commerce provide a lens through which market logic and its mechanisms for shaping medical traditions can be understood under the schema of commodification. The manifestation of new segments, hybrid products and new forms are an attestation to how actors are satisfying the penchants of European consumers, reflected in the burgeoning of New Age Orientalist desires [6]. As such, it is important to realize the intricate interconnectedness between language and markets, and their ability to mold the landscape in a way that reinforces consumerist structures.

The Ayurvedic physician and *tridosha* theory have until now acted as barriers to commodification [20]. To maneuver around the *doshic* context, the commercial Ayurvedic industry both in India and Europe have targeted the selling of prescription and OTC products, enabling people to self-medicate. Ayurveda's repute of yielding no adverse side effects has also made it convenient for manufacturers to bring forward new products in different countries. This distends the commodity context as medicines are evolving to new forms (extracts), new categories (memory, aphrodisiac etc), new vending channels (OTC, online sellers) and new spinoff identities (hybrids, traditional, modern etc) On a medical level this means that people may be consuming medicines without an awareness of their *prakriti* (unique body constitution) or without the Ayurvedic physicians deliberation. This in turn may lead to complications, or render the medicine ineffective.

On a cultural level, when diverted Ayurvedic commodities are propagated, consumers that are encountering Ayurveda for the first time can draw interpretations based on products driven by market logic where new meaning and identities have been strategically constructed. Novel chains of significance are created as Ayurveda is displaced, rearticulated and introduced as an artifact grounded in Eastern spirituality through which its establishment has been bolstered by connecting its content to Western biomedical frameworks and wellness paradigms [19,21,22].

The New Age Orientalist concept helps to explain the growth of the Ayurveda industry in Europe, leading to the creation of commodity chains through which commodification processes for products and services occur. It is critical to understand how this process unfolds in order to ensure that the identity of the artifact is respected. These processes of disarticulation have already occurred in Yoga in Europe, where the practice people have come to adopt is detached from what it customarily is and signifies in India [19,23–25]. As this paper shows, the same processes are now rapidly taking hold for Ayurveda in Europe.

## 7. Conclusion

This article has highlighted the practices and processes that are driving the evolution of Ayurveda's identity into newly signified and commodified forms in Europe. The co-option of Ayurveda into a European context opens doors for the market to concentrate on those facets that are more amenable for commodification and capital gain, while dismissing those that are less. This raises concerns about the precedence being attributed to Ayurveda's commercial potential. Our analysis has demonstrated how the process of commodification is often powered at the expense of Ayurveda's inherent logic and ethics.

While the commodification of aspects of Ayurveda may be inevitable, a deep understanding of this process can aid in the resistance of cultural appropriation and the transposition and reduction of entire ancient health systems to mere commodities in order to benefit the agendas of a select few. Moving forward, this will entail moving beyond local/global binaries, in-group/out-group perspectives. Future research should explore how democratic participation in and access to Eastern medicines may

be improved while respectfully honoring the source culture at every step.

## Author contribution

The study was conceptualized by the first author, and designed by the first and second author. Data collection and analysis was performed by the first author. The manuscript was discussed, prepared and revised by both authors. Both authors read and approved the final manuscript.

## Sources of funding

There are no funding sources to report for this article.

## Data availability

The data that support the findings of the study will be available upon reasonable request.

## Declaration of Competing Interest

None.

## Acknowledgement

This paper is based on the MSc dissertation of the first author. The full dissertation is published online at <https://www.wur.nl/en/library/students/msc-theses-online.htm>. We thank the two anonymous reviewers for their helpful comments on earlier versions.

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