Traditional and Complementary Medicine Practice Guidelines on Shirodhara

Traditional and Complementary Medicine Practice Guidelines on Shirodhara


Ministry of Health Malaysia.
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Acknowledgement

Special thanks to every individual and organizations that have in one way or another contributed to the contents, comments and advices during the preparation of this Traditional and Complementary Medicine Practice Guideline on Shirodhara.
1. Introduction

Traditional medicine is the knowledge, skills and practice of holistic health care, recognized and accepted for its role in the maintenance of health and the treatment of diseases. It is based on indigenous theories, beliefs and experiences that are handled down from generation to generation.

The use of traditional medicine has changed dramatically in the past thirty years. Due to its affordability, availability and accessibility, traditional medicine has played an important role in meeting the demands of primary health care in many developing countries, particularly in Africa and Asia.

Since the 1990s, use of traditional medicine has surged, with many developed countries using traditional medicine (TM) as a complementary and alternative medicine (CAM). From 2002 to 2005, WHO implemented the WHO Traditional Medicine Strategy in which member states were helped to: 1) integrate TM/CAM into their own national health care systems, 2) to produce guidelines for TM/CAM, 3) to stimulate strategic research into TM/CAM, 4) to advocate the rational use of TM/CAM, and 5) to manage information on TM/CAM. One of the strategies indicate the need to promote safety, efficacy and quality of TM/CAM by providing guidelines on regulatory and quality assurance standards, and to provide access to TM/CAM.

Since the implementation of the first three Traditional and Complementary Medicine (T&CM) Units in 2006, four more units were opened at Hospital Sultanah Bahiyah in Kedah, Hospital Sultanah Nur Zahirah in Terengganu, Hospital Duchess of Kent in Sabah, Hospital Umum Sarawak and Hospital Port Dickson in Negeri Sembilan in 2010. Modalities that were introduced in these units were Malay massage, acupuncture, Malay postnatal care and herbal therapy as an adjunct treatment for cancer. Shirodhara is one of the modalities that will be introduced at the new T&CM Units. To facilitate implementation of T&CM services, each unit is provided with T&CM practice guidelines on all treatment modalities offered.

Shirodhara, characterized by warm or hot oil dripping on the forehead, is a popular Ayurvedic therapy in the Keraleeya style of Ayurvedic healing system. It is one of the components of poorva karma (preparatory therapy) before pancha karma. The center of the forehead is the area of the ‘third eye’ or the inhibitory eye region according to Ayurveda, and is considered as the ‘seat of mind’. Shirodhara, which helps to calm the mind and reduces stress, is deemed good for the general well being of a person as the total physical health depends on his state of mind.
2. Objectives

Shirodhara is one of the Traditional and Complementary Medicines (T&CM) to be introduced at Ministry of Health’s Integrated Hospitals. Therefore, it is pertinent that a guideline be developed to;

a. Regulate the practice of Shirodhara at T&CM Units in the Integrative Hospitals.

b. Provide a quality and standardized practice at all T&CM Units in the Integrative Hospitals.

c. Ensure a safe and professional practice of Shirodhara at all T&CM Units in the Integrative Hospitals.

3. Definitions

3.1 Traditional Indian Medicine

Traditional Indian Medicine is the traditional Indian health system which is an indigenous system of medicine. It includes Siddha, Ayurveda and Unani.

3.2 Shirodhara

In Sanskrit, shiro means head and dhara means dripping.

4. Treatment Concept

4.1 Shirodhara is offered as a complementary therapy to a patient’s existing/current allopathic treatment.

4.2 It is for the well being of the patient as it helps to calm the mind, reduce stress and resolves any emotional imbalances.

5. Treatment criteria

5.1 Patient Selection

5.1.1 Age limit

It should not be done in the extremes of age, too young or too old. Patients should be between the ages of 15 to 60 years old. If a child is too young, he/she might not be able to follow instructions to lie still for an extended period of time.

5.1.2 General condition of the patient

Patients referred for Shirodhara;

a. Should be stable clinically.
b. Not bedridden.
c. Not acutely psychotic, suicidal, delirious, manic, or has dementia.
d. Should be able to understand and follow instructions clearly.
e. Should not be intellectually challenged.

5.2 Indications
Patients seeking treatment at the T&CM Units should be referred by a medical doctor, in which an extensive investigation has been done, and a definitive diagnosis made. As an introduction of Shirodhara as a complementary medicine, only five conditions will be treated at the T&CM Units. These conditions are mainly of chronic and long standing nature. The reason is to provide the patients with an alternative and complementary therapy to their existing treatment that could help with their diseases but with fewer side effects.

5.2.1 Insomnia
5.2.2 Headaches
5.2.3 Stress or mental fatigue
5.2.4 Anxiety
5.2.5 Depression
   a. Only patients with mild depression should be referred for Shirodhara.
   B. Those with depression and associated with conditions stated in para 5.1.2, should not be referred for Shirodhara.

5.3 Contraindications
5.3.1 Low blood pressure
5.3.2 Alcoholism
5.3.3 Drug dependency or addiction
5.3.4 Pregnancy
5.3.5 Brain tumour
5.3.6 Central or peripheral neuropathy
5.3.7 Peripheral arterial disease
5.3.8 Conditions of the head and neck region;
   a. Recent neck injury
   b. Presence of an open wound
   c. Presence of inflammation
   d. Loss of sensation
   e. Acute Sinusitis

5.4 Precautions
5.4.1 The patient should be positioned properly.
5.4.2 Ensure that the bed and head rest is well padded to prevent pressure sores.
5.4.3 Support patient’s limb throughout the duration of the treatment.
5.4.4 Provide adequate protection against excess heat or cold.

5.5 Adverse Events
Adverse events that may occur during Shirodhara are related to the prolonged lying down and maintaining the same position, and to the oil used in the procedure. They are:
5.5.1 Discomfort at the occipital region
5.5.2 Headache and neck pain
5.5.3 Light-headedness and vertigo from prolonged lying down
5.5.4 Blisters and burns if the oil used is too hot
5.5.5 Allergic reaction to the oil used

6. Treatment Procedures
Before the commencement of the procedure, care must be taken to explain to the patient regarding the procedure and the potential side effects or adverse events that might occur. Consent must be obtained prior to starting any procedure.

6.1 Procedures and Technique\textsuperscript{[1, 2]}
6.1.1 Shirodhara is performed with the patient lying in supine position with the head and neck supported with a roll of towel or a pillow.
6.1.2 A towel is placed over the eyes to protect them from the oil during the procedure.
6.1.3 A stream of warm oil is the poured onto the centre of the forehead, between the eyes. This point is said to be the centre of perception. Most appropriate and safest conditions in performing the procedure is\textsuperscript{[2]};
   a. Oil temperature kept at $39^\circ\text{C} \pm 0.2^\circ\text{C}$. 
   b. Oil flow rate of 2.0 to 2.3 L/min.
   c. Diameter of the dripping oil nozzle of 8 x 8 mm to 10 x 10 mm.
   d. Distance between nozzle and forehead at 20 cm.

6.1.4 The same oil may be collected, warmed and re-used for the same patient in one procedure. Used oil will not be applied to a different patient.

6.1.5 The oil dripping procedure is followed by a gentle scalp or head and neck massage.

6.1.6 Patients are required to rest or remain on the treatment table for 10 to 15 minutes after completion of the procedure.
6.1.7 Before leaving the treatment table, patients should be supplied with a clean, wet towel to wrap their head with and to prevent oil from dripping onto the floor. Remaining oil on the head should be wiped off first before the patient takes a warm bath.

6.2 Equipments
6.2.1 Droni - Abhyangam or oil massage table which is capable of collecting excess oil used.
6.2.2 Oil collection and heating system with temperature monitoring.
6.2.3 Oil collection and filtration system, if the oil is reused in one session.
6.2.4 Clean towels and linen.

6.3 Types of Oil
For each treatment procedure, about 2.5 to 3.0 litres of oil will be used. The oils used should meet accepted standards and manufacturing practices. Types of oil that can be used for Shirodhara are:
6.3.1 Herbal processed sesame oils;
   a. Ksheerabala Thailam
   b. Brahmi Thailam
   c. Balahatadi Thailam
   d. Maha Chandanadi Thailam
   e. Himasagara Thailam
6.3.2 Herbal processed coconut oils;
   a. Balaguloochyadi kerathailam
   b. Balahatadi kera thailam
   c. Durvadi kera thailam
   d. Kayyunnyadi kera thailam
   e. Eladi kera thailam

6.4 Treatment Regime
6.4.1 Each treatment session should last between 45 to 60 minutes.
   a. Massage of the above shoulder region - 15 minutes
   b. Shirodhara - 30 minutes
   c. Rest after shirodhara - 10 to 15 minutes

6.4.2 Treatment sessions will be done, based on the practitioner’s assessment of the patient’s condition;
   a. Daily for 3 to 4 days, or
   b. Once a week, or
   c. Once a month
6.5 Monitoring and Follow-up

6.5.1 Throughout Shirodhara procedure, temperature of the oil should be monitored and kept constant at 39°C ± 0.2°C.

6.5.2 Patients should be observed for any signs of complications or distress during the procedure.

6.5.3 Patients should be helped up and advised to rest on the treatment bed for at least 15 minutes after completion of the procedure. During this time, any adverse events or complications should be noted and appropriate measures taken.

7. Standards of Practice

7.1 General Standards of Practice

7.1.1 Treatment room

Treatment rooms should be:

a. Well lighted and ventilated.

b. Equipped with proper disposal area for disposal of used oil and linen.

c. Equipped with proper waste bins and linen bags.

d. Equipped with a changing area and preferably a shower area. If there is no shower area allocated, clean wet towels should be provided for patients to clean themselves up.

7.1.2 Equipments

a. The treatment table should be well padded and draped. Adequate and appropriate padding would prevent sores at pressure points and minimize discomfort.

b. The oil collection, heating and filtration system should have a regular maintenance and servicing schedule, which is diligently adhered to ensure well-functioning equipment.

7.1.3 Cleanliness and sterility

a. All practitioners must always maintain good personal hygiene.

b. All practitioners should wash his/her hands prior to the examination of patients and starting treatment (Appendix 4).

c. The premise and equipments used should be cleaned regularly and after each treatment session. There should be a regular cleaning schedule which is diligently adhered to keep the environment clean and safe.

d. Opened bottles/containers of oil should not be left exposed for prolonged periods of time.
e. There should be proper management of spillage, soiled/contaminated linen, and disposal of used oil and clinical waste.
f. Practitioners are required to take appropriate measures for prevention of infection and observe proper hand hygiene.
g. All instruments used should be disinfected and sterilized according to the recommended methods of sterilization and disinfection.

7.2 Documentations
7.2.1 Patient records must be typewritten or written in a legible handwriting, either in Bahasa Melayu or English.
7.2.1 Entries should not be backdated, erased or altered with correction fluid/tape/adhesive labels.
7.2.3 Patient records should be kept confidential.
7.2.4 Consent must be obtained prior to commencement of therapy (Appendix 3). Patients should be competent to give consent of care. In case of minors (aged 18 years and below) and mentally impaired adults, practitioners requires the consent of a guardian.

7.3 Ethics and Professionalism
At all times during the provision of treatment to patients, the T&CM practitioners should:
7.3.1 Adhere to guideline for ethical conduct (refer to Code of Ethics and Code of Practice for Traditional and Complementary Medicine Practitioners).
7.3.2 Maintains clinical boundaries during the treatment through appropriate draping and communication with the patient.
7.3.3 Demonstrates responsible and caring concern for the patient.
7.3.4 Responds appropriately to the patient’s emotional reaction to treatment.
7.3.5 Elicit patient’s ongoing feedback on progress with clinical outcomes and provides the patient with appropriate education on ongoing care.
7.3.6 Maintain an updated documentation on the treatment provided and the patient’s response to it.
7.3.7 Maintain communication with the referring clinician or other healthcare professional as appropriate.

7.4 Emergency Protocol
Emergency medical services must be contacted immediately in the event of cardiorespiratory collapse.
7.4.1 Patients should be referred to the emergency department in event of occurrence of complications or adverse events with adequate information or account of events and procedures done.
7.4.2 Appropriate measures should be taken whilst awaiting the arrival of medical help (e.g. provision of basic life support or first aid, or call for help).

8. Conclusion
This document is intended to serve as guide and a standard reference for practitioners practicing *Shirodhara* at the T&CM Units. However, the ultimate judgement regarding the appropriateness or suitability of therapy must be made by the practitioner based on the clinical data presented by the patient. Currently there are limited studies available on *Shirodhara*. There is room for future research to be done on *Shirodhara* to test its effectiveness in the treatment of certain illnesses.

References
## Appendix 1: Screening Form

**KEMENTERIAN KESIHATAN MALAYSIA**
**UNIT PERUBATAN TRADISIONAL DAN KOMPLEMENTARI**
**HOSPITAL .....................**
**BORANG SARINGAN**
**(SCREENING FORM)**

<table>
<thead>
<tr>
<th>Nama :</th>
<th>No. K/Pengenalan</th>
<th>R/N:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Alamat :</th>
<th>Tarikh lahir:</th>
<th>Jantina:</th>
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</thead>
<tbody>
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</table>

<table>
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<tr>
<th>Umur:</th>
<th>Tarihk:</th>
<th>Masa:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**Diagnosa Pesakit (Patient’s Diagnosis):**

**Aduan Pesakit (Chief Complaints):**

**Sejarah Perubatan yang lalu (Past medical history):**
- Darah tinggi (hypertension)
- Kencing manis (diabetes mellitus)
- Penyakit jantung (ischaemic heart disease)
- Sawan (epilepsy)
- Lelah (asthma)
- Barah (cancer)
- Lain-lain: ..............................................

**Sejarah pembedahan yang lalu (Past surgical history):**
- .................................................................
- .................................................................
- .................................................................

**Sejarah Pengambilan Ubat-ubatan (Medication History):**

**Keputusan Ujian jika ada (investigations results if available):**

**Alahan (Allergy):**
<table>
<thead>
<tr>
<th>Tanda Vital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pemeriksaan Fizikal</td>
</tr>
<tr>
<td>Tekanan darah : _________ mmHg  Suhu badan : ______ °C</td>
</tr>
<tr>
<td>Kadar denyutan nadi : _________ per minit  Dextrostix (untuk kes DM sahaja) : ______ mmol/dL</td>
</tr>
</tbody>
</table>

**Kontraindikasi Untuk Rawatan Perubatan Tradisional dan Komplementari**

### 1. Rawatan Homeopati

- Kanser
- Sifilis
- Gonore
- Kecacatan/kerosakan kekal anggota badan/organ badan

### 2. Rawatan Shirodhara

- Tekanan darah rendah
- Kecederaan pada leher
- Mengandung
- Ketumbuhan dalam otak
- Neuropati, terutama kehilangan deria rasa di bahagian kepala dan leher
- Terdapat luka di bahagian kepala dan leher
- Terdapat keradangan kulit di bahagian kepala dan leher
- Peripheral arterial disease
- Alcoholism

Kesesuaian untuk Rawatan

<table>
<thead>
<tr>
<th>Ya</th>
<th>Tidak</th>
</tr>
</thead>
</table>

Rujukan dari / kepada:

Nama Pegawai:

Tarikh:  Tandatangan:
Appendix 2: Consent form.

BORANG KEIZINAN TERAPI SHIRODHARA

Sila baca maklumat ini dengan teliti. Rujuk kepada pengamal anda jika terdapat perkara yang tidak anda fahami.

Apakah Shirodhara?
Shirodhara merupakan satu teknik perawatan atau terapi yang menggunakan minyak panas/suam yang dialirkan ke atas kepala. Ia merupakan salah satu daripada terapi persediaan sebelum rawatan Pancha karma dilakukan.

Adakah ialnya selamat?
Secara amnya, Shirodara merupakan satu prosedur yang selamat.

Adakah ialnya mempunyai kesan sampingan?
Anda perlu tahu bahawa:
- Pening selepas rawatan dilakukan boleh terjadi kepada sebilangan kecil pesakit. Sekiranya ia berlaku, anda dinasihatkan supaya berehat setakat sebelum meninggalkan klinik atau memandu.
- Anda mungkin berasa tidak selesa di bahagian bawah kepala dan leher.
- Anda juga mungkin akan berasa sakit di bahagian kepala dan leher ketika rawatan. Ini kerana prosedur ini memerlukan pesakit berbaring dalam satu posisi dalam tempoh yang agak lama.

Risiko-risiko yang mungkin berlaku:
- Tindakbalas alahan terhadap minyak yang dipakai.
- Melecur sekiranya suhu minyak yang digunakan adalah teralu panas.

Adakah perlu dimaklumkan kepada pengamal?
Selain daripada maklumat perubatan yang biasa, adalah amat penting bagi anda memberitahu pengamal sekitiranya anda:
(sila tanda ✓ pada kotak yang berkaitan)

<table>
<thead>
<tr>
<th>MENGANDUNG ALCOHOLISM</th>
<th>YA</th>
<th>TIDAK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Masalah kulit pada bahagian kepala dan leher</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kecederaan pada leher</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kurang deria rasa terutama di kepala dan leher</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Penyakit peripheral arterial disease</td>
<td></td>
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<tr>
<td>Alahan pada minyak/herba</td>
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<td></td>
</tr>
</tbody>
</table>

PERAKUAN KEIZINAN

Saya faham bahawa saya boleh bertanya sebarang soalan berkenaan rawatan saya sebelum menandatangani borang ini. Saya juga boleh menarik balik keizinan yang saya berikan bagi memberhentikan penyerataan saya ke atas prosedur ini pada bila-bila masa sahaja. Prosedur ini telah dijelaskan kepada saya, dan saya faham atas penjelasan yang diberi. Dengan ini, saya secara sukarela bersetuju untuk menjalani prosedur di atas. Saya juga memahami bahawa satu rekod perkhidmatan kesihatan saya akan disimpan. Rekod ini adalah sulit dan tidak akan didedahkan kepada sesiapa melainkan sekiranya ia diarahkan oleh wakil saya, atau dari saya sendiri, atau sebarang cara lain yang dibenarkan atau atas arahan mahkamah.

PESAKIT/PENJAGA/AHLI KELUARGA

| Tandatangan: ................................................................. |
| Nama penuh: ................................................................. |
| No. kad pengenalan: ..................................................... |
| Hubungan dengan pesakit: ............................................. |

SAKSI*

| Tandatangan saksi: .............................................................. |
| Nama saksi: ......................................................................... |
| No. kad pengenalan: ......................................................... |
| Tarikh: ............................................................................... |

PENGAMAL

| NAMA PENUH: ................................................................. |
| TANDATANGAN: ............................................................... |
| Tarikh: ............................................................................... |

* Saksi hendaklah daripada kakitangan Unit PT&K sahaja.
# Appendix 3: Shirodhara Clerking Form.

<table>
<thead>
<tr>
<th>TRADITIONAL &amp; COMPLEMENTARY MEDICINE UNIT</th>
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<tbody>
<tr>
<td>________________________ HOSPITAL</td>
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</table>

## PATIENT INFORMATION

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<thead>
<tr>
<th>Name:</th>
<th>I/C No:</th>
<th>Registration No:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>Age:</td>
<td>Gender:</td>
</tr>
<tr>
<td>Postcode:</td>
<td>Tel. No:</td>
<td>Race:</td>
</tr>
<tr>
<td>State:</td>
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</table>

### Referring Physician/Unit:

### VITAL SIGNS

<table>
<thead>
<tr>
<th>Weight (kg):</th>
<th>Blood pressure (mmHg):</th>
<th>Temperature (°C):</th>
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</thead>
<tbody>
<tr>
<td>Height (cm):</td>
<td>Pulse rate (per minute)</td>
<td></td>
</tr>
</tbody>
</table>

### HISTORY

<table>
<thead>
<tr>
<th>Chief complaint:</th>
<th>Past surgical history:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Past medical history:</td>
<td>Treatment history:</td>
</tr>
</tbody>
</table>

### Allergy:

---

Sample
## PATIENT ASSESSMENT

Physical examination:

## CONCLUSION

*Please tick ✓ at the appropriate box*

**Contraindications:**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low blood pressure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recent neck injury</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcoholism</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pregnant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brain tumour</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neuropathy (central/peripheral)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loss of sensation over head &amp; neck region</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inflammation over head &amp; neck region</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Open wound at the head &amp; neck region</td>
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<td></td>
</tr>
<tr>
<td>Peripheral arterial disease</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sinusitis</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

☐ Suitable for *Shirodhara*  ☐ Not suitable for *Shirodhara*

## TREATMENT PLAN

Treatment regime:

Duration of treatment:

Practitioner's name:

Signature: Date:
Appendix 4: Hand Washing Techniques.

1. Palm to palm.
2. Right palm over left hand and vice versa.
3. Palm to palm, fingers interlaced.
4. Back of finger to opposing palms with fingers interlocked.
5. Rotational rubbing of right thumb clasped in left palm and vice versa.
6. Rotational rubbing, with hand in left palm and vice versa.
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