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India to make some traditional knowledge free access

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[NEW DELHI] Indian traditional knowledge could soon help researchers develop new drugs for diseases such as malaria and tuberculosis, because of plans to make some of this knowledge publicly available.

The Traditional Knowledge Digital Library (TKDL) has been in development since 2001, with more than 200 researchers compiling and translating traditional knowledge based on some 150 ancient texts and documenting around 200,000 medicines.



The library aims to protect against biopiracy Flickr/fredericknoronha

It aims to legitimise traditional knowledge and protect it from biopiracy and patent claims by providing information to patent offices for cross-checking of new applications.

So far, access to the TKDL has been restricted to agreed users — mainly patent offices worldwide — for fear of it being misused for commercial purposes, according to V. K. Gupta, the library's director.

Now, there are plans to release a small part of the information, which focuses on diseases of the poor, into the public domain, said Samir Brahmachari, director-general of the Council for Scientific and Industrial Research (CSIR), where the project is hosted.

"A proposal is lying with us to put the one per cent of the TKDL meant for diseases like cholera, malaria and tuberculosis (TB) into the public domain," he said at an international conference held in New Delhi last week (22–24 March), which examined how India's example in protecting traditional knowledge could be used around the world.

Brahmachari said that the newly available information will be used for the Open Source Drug Discovery project (OSDD) started by the CSIR in 2008.

Zakir Thomas, project director of the OSDD, said the information "will encourage serious scientific research into [diseases of the poor]".

"Research on these diseases, which usually affect the poor in developing countries, is neglected because it has no value in the market," he said.

Gupta said that there are plans to give access to the entire database to India's publicly funded laboratories on condition that there will be no licensing cost for using this knowledge and that the pricing of the medicines produced from these will be kept low.

Representatives from several countries at the conference, including Bangladesh, Bhutan, Nepal and Zambia have expressed interest in adopting a similar model.