Introduction
It dates back to the beginning of twentieth century since when serious attempts have been made to analyse the phenomena involved in the process of growing old from an young age, the changes that crop up during the process and the mechanisms that are associated with natural death. The research activities of three scientists (Minot 1908; Metchnikoff, 1908; and Child, 1915) gave birth to the field of gerontology. Minot's observation was related to the cytological investigation, that of Metchnikoff comprised of combination of biological and medical findings and Child forwarded the experimental data collected on studies of regeneration and senescence of invertebrates. It appears that with the help of gerontology it will be possible to have communication between the terms “ageing”, “Senescence” and “senility”.

To some, ageing means the process of change in the organism from the time of fertilisation of ovum till death of the individual. To some others, the study of ageing means the study of time in the life history of the organism, including the growth and involution of specific organs like thymus and uterus. “Senescence” is possibly a more specific term for the process or processes, causing gradual deterioration of the adult organism at an older age. Ageing and senescence can be defined as a “process of
unfavourable progressive change, usually correlated with the passage of time, becoming apparent after maturity and terminating invariably in the death of the individual" (Lansing 1951; 1952).

Gerontology has been defined as that branch of knowledge concerned with the situations and changes inherit in increments of time with particular reference to post maturational ages, (Gerontological Society 1959). It would appear that end product of the process of ageing (senescence) is the state of being aged or decrepit, which can be called as senility.

The definitions and terminologies are however not sufficient to clear the haze around the field of gerontology. It is agreed that we are concerned with the process of unfavourable change in the adult organism terminating in the death of the individual. It is difficult however to distinguish between the senescence or death due to vicissitudes of life and death due to endogenous changes of senescence (Natural death). Several biological generalisation about the natural death has been made by (Pearl, 1922). (1) An enormous variation in the duration of life both intra and interracial has been established between the average duration of the life of the individuals composing a species and any other broad fact known in their life history or their structure or physiology. (3) Definite structural and functional changes in the body precede natural death as distinguished from accidental death.
One can speculate therefore that senescence is a process of deterioration of adult organism leading to inevitable death of that organism. It can be further suggested that senescence is a process involving progressive loss of ability to live.

That there occurs a large differentiation of structure and function with the advancement of age has been appreciated recently, and a research in the physiology of ageing has become a matter of considerable scientific interest as the research concerned with living beings. Since characteristic changes of ageing occurs depending on the individual, the implication of research on ageing has become vast. The review on earlier literature on the biology of ageing dates back to 1952 by Lansing, by Comfort (1956) and by Medawar (1957). While individuals over the age of sixty five have usually dependency problems due to various factors like health, psychological and economic, an appreciable attention to research on these people could be given only when their population in the society and in the professional service had increased sufficiently.

Social and cultural values have played definite role for the emphasis that has been given to research on childhood and the growth processes. Persons have been utilised to study the dynamics of life during the period of youth rather than the research on ageing simply because that would provoke uneasy feelings and that is how it would become unsuitable for objective examination. It is this uneasiness about objective study of ageing
that has led to a drag effect on research of ageing but from the recent trend it appears that we could pass over this stage of dragging. Various processes are beginning to be explored for the study of ageing. Some of the investigators across the world have transformed their effort on research from the early, to the later part of life.

Even a few years back, persons of abundance of conjectures, philosophical bias had supported a pessimistic view regarding collection of facts and ideas about ageing and in the process no biological data could be obtained on this particular field. But now research on ageing has started undergoing a metamorphosis into an experimental field. As the understudy and the facts about ageing increase, it is likely that more attention will be paid to method and theory in devising efficient experimentation. What is necessary is to identify key problems associated with ageing and implication of the same on man's well being. If we are able to define a problem exactly it will be easy to find the way of its solution, if we can communicate this problem to others it will be easier to avoid confusion about the implication of the same.

"Ageing" is usually referred to something closely related to chronological age but not identical with it, and most of the investigators believe that they do not mean everything to include while correlating with chronological age. Indeed, in the ageing organism, so much changes occur that it may be difficult to bring about an order in ageing. Ageing
has been used in two ways, on one hand it is used to explain the phenomenon and on the other it is explained. In some studies ageing is regarded as dependent variable, whereas in others as an independent variable.

The concepts about ageing appear to be semi formal system of ideas and it is likely that new terminology will appear in future refinements in which the term “ageing” will be replaced by terms like “longevity”, “senescence” and “antiquation”.

However the term “ageing” has acquired an independent, scientific and social significance. Chronological age is one of the most important items of information about an organism if not the most useful. It appears that a large number of general statements or predictions can be forwarded about the anatomy, physiology, psychologic and social behaviour of the organism from the knowledge of chronological age. It is a powerful index that classify large amounts of data while attempting to understand the interrelationships. It is necessary that we must attach some significance to the role of time or age in the array of facts in which it is embedded. The regular changes that occur in the form or appearance of organism indicate that time give direction to the individual. (Medawar 1945).

The task is difficult at present, to correlate age with the entire range of biological, psychological and social aspects of individual. Regardless of the
customs, all cultures at all times old and young persons differ in dress, speech, and in social behaviour. The determining factor regarding "ageing" is simply, because of the intrinsic nature of organism or the environment in which they live.

About 30% of patients attending for their ailments to a physician are older adults. From the statistics it appears that it will go upto 50% by the end of the century. By older adults we mean an individual attending the age of sixty-five or above. In view of the increase in the mean span of life and decrease in rate of birth, the population of older adults is bound to increase. It is also to be noted that availability of better health care system and an increase in the number of people above the age of seventy five has been recorded.

Although mean life span has increased, maximum life span however, has not changed much. The fact remains that increase in mean life span will be meaningful if the older persons remain healthier and more active than today, unfortunately with the advancement of time the mean prevalence of disability is also rising. In fact a bimodel distribution with a certain number of individuals are remaining active and healthier inspite of advancement of age but their number is less in comparison to the number of individuals who are disabled as a result of longer life. It is meaningless to have more number of disabled older adults in the population because that will become nothing but a burden to society. What is important is the question of successful ageing, it is a challenge to the medical scientist
today to deliver the required health care by improving the system thoroughly and to decrease the duration of disability in the older adults if we have to reach an era of successful ageing.

It is well known that the phenomena that occur with the advancement of age are decline in physiological status of the different tissues and organs of an individual and increase in the disease processes. It is true that an interdependency exist between these phenomena, although physiologic decline is relatively independent.

The physiologic functions reach a basal resting state in healthy older adults and it is this decreased functional status of different organisms and tissues, and the homeostatic mechanism which is responsible for the system being under stressful and challenging situations. The interactions between the physiological control mechanism and the disease processes continue to play a very important role even in the oldest individuals. Little alteration in the homeostatic mechanism may lead to pathological state, an occurrence of lesions and an abnormal health (Hayflick 1976; Finch and Schneider 1985).

Molecular and cellular level of ageing involves accumulation of damage to the molecules and the regulation of specific genes concerned. That DNA changes continuously in response to both extrinsic and intrinsic processes is known. The double stranded appearance of DNA helps repair of chain by specific repair enzymes and thus a stability is
It has been suggested that somatic mutagenesis is likely to be responsible for the biological ageing which could be due to deficiencies in the repair mechanisms or an increase in susceptibility to mutagenesis. It appears, as though, the longevity of an individual can be correlated with DNA repair enzymes. It is true that such correlation could be shown to exist in different species of animals but in human being the spontaneous mutagenesis mechanism, does not adequately account for the different change associated with the biological ageing. It has also not been proved that a failure in DNA repair due to absence of concerned enzymes is responsible for ageing.

Man's activities are determined by various types of biological and environmental influences. He may be acting at a moment of time primarily as a result of biological drive whereas at another to a very cultivated motivation. The implication is that the behaviour and motivation of a normal individual may be largely discontinuous; it may be task specific at one moment while at other it may be determined by the situation arising from the inner state of mind. Under certain circumstances, as in a disease, all the behavioural capacities of an individual is diminished whereas in different circumstances capacities may be present but they are not called into play. It is necessary to analyse the sampling of activities so as to have the total perspective of man's behaviour. Attention should be given to assess the amount of time, individuals of different age group spent in various daily routine activities
like number of hours spent in eating, sleeping or talking, but this method of assessment might reveal a conflict in existing interpretations that imply a new control or indicate a hitherto unsuspected influence in the type of study proposed. Anderson (1954) presented an outline for the evaluation of behaviour which may help for acquiring a more ideal state of knowledge about ageing.

With advancement of time, our bodies deteriorate, our mind becomes less alert and the satisfaction of our basic physical need is achieved less easily. Thus our health is often a function of age. Age is related to time and the experience of ageing indicates our awareness of time. No one in this world is exempt from the process of ageing. It starts as soon as we are born, there is no reversal of this process under any circumstances.

Since man is conscious of changes in mind and body that accompany advancing age, it is inevitable that he will react psychologically to irreversible passage of time. When we are young we are never conscious of living, on the other hand when the old age sets in, we start becoming conscious of living and it is the process of ageing that puts us at this stage.

Man lives in triplicate in the past in the present and in the future. Religion has added a fourth that is eternity (Alliston 1908). Democritus regards atom as eternal. They have always been and will always be immutable, indestructible, endless through this universe. Democritus, Pythogras, Parminides and Plato taught that true reality is eternal.
However the fact remains that ageing is a process closely connected with time. It is true that the concept of age is more general than that of ageing. One can talk about age without applying a notion of ageing. There is some amount of ambiguity connected with the word “old”. The opposite of old is “young” and at times “new”. We very often talk about old & young plants, animals & people and also about old and new clothes, old and new machines, old and new houses, or old and new cars.

The question is - can we postpone the ageing process? If a car, however old it may be, is maintained well, it can be used for a longer time in comparison to a car that is badly maintained. If it is so, if the internal environment of an individual can be maintained at a level as that of relatively younger person, why not the ageing can be postponed at least for some length of time.

Before the advent of allopathic system in India, Ayurveda used to be practised for long for treatment of ailing people. In Ayurvedic practice it was routine to extract medicines from different medicinal plants which are used singly or in combination for treatment of various diseases. Existing literature indicates that Satavari & Alkushi possess ability to increase longevity in man, but no systematic studies are available in the literature. An attempt has been made for analysis of these two drugs in a scientific manner to assess whether Satavari and Alkushi are in anyway involved to postpone the ageing process in individuals.