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विश्व आयुर्वेद परिषद् के लिए प्रोफेसर सत्येन्द्र प्रसाद मिश्र, संरक्षक, विश्व आयुर्वेद परिषद् द्वारा नूतन ऑफसेट मुद्रण केन्द्र, संस्कृति भवन, राजेन्द्र नगर, लखनऊ से मुद्रित कराकर, 1/231 विराम खण्ड, गोमती नगर, लखनऊ-226010 से प्रकाशित।

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सम्पादक मण्डल के सभी सदस्य मानद एवं अवैतनिक हैं। पत्रिका के लेखों में व्यक्त विचार लेखकों के हैं। सम्पादक एवं प्रकाशक का उससे सहमत होना आवश्यक नहीं है। आपके सुझावों का सदैव स्वागत है।

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Editorial

Modern medicine has made tremendous advances by acquiring the knowledge of biosciences in diagnosis and treatment of many diseases. It has succeeded to eradicate several infectious diseases like cholera, plague, small pox, chicken pox, poliomyelitis etc with the help of immunization programme. Pain killers and anti-biotics have given good relief but no permanent cure. These sharp medicines are turning ineffective due to adverse side effects, drug resistance and high cost, warranting search for new safe and cost effective medicines. In this concern Ayurveda is being explored for safe affordable treatment for all. Further, in recent years a new class of lifestyle related chronic diseases have surfaced, where modern medicine is not very effective. Ayurvedic medicine seems to have strength in promotive and preventive health care along with management of chronic lifestyle related diseases.



There is also a great scope of integrative practice of medicine, where both systems join hands in a symbiotic manner. It has been noticed that adjuvant use of Ayurveda medicine with ongoing modern treatment, helps to reduce raise of drug resistance, reduces side effects of chemical drugs and also helps to reduce the cost of treatment. It has simultaneous approach of promotion of health and cures of ailments. This is the reason, why traditional medicine is being promoted globally. China has its own indigenous traditional medicine, which has been supported by Government politically, socially, scientifically and professionally. Now a day's Chinese medicine is emerged as a main stream of healthcare delivery system. This model of healthcare delivery system is also appreciated by W.H.O. and proclaimed that without proper incorporation of respective traditional system of medicine of the country, we cannot full fill norm of better health. After independence in India, Ayurveda is still seeking its own place in national healthcare delivery system. Although, it is emerging as a new hope of future medicine on the globe and researchers are inclined towards fauna and flora of Ayurveda, to evolve newer, safe and effective remedial measures for the treatment of ailments. But, due lack of will power of Ayurvedic machinery working behind and itself Government of India, the growth and development of Ayurveda is still stunted and derailed.

In this emerging scenario, there is a great need of intense interaction of Ayurveda with modern biomedical sciences to allow the growth and development of the third superior dimension of biomedicine, which is the need of today. However for pursuing such a scientific strategy we must need to develop and create fresh new research methodologies through the science of Ayurveda and the science of today without hampering the basic tenets and backbone of Ayurveda. The basic tenets of Ayurveda are based on entirely a different understanding of the structure and function of human body-mind-spirit on its quantum logic and pro-nature, which is operated through the theories of *Triguna*, *Tanmatra*, *Panchamahabhuta*, *Tridosha*, *Dhatu*, *Srotas*, *Ojas*, *Agni* and *Ama*. Ayurveda puts greater emphasis on promotion of health and prevention of disease than merely management of disease. Beside this, Ayurveda has its personalized health care strategy of management, known as *prakriti* and strongly believes that no two patients are equal as each one has distinct *Prakriti* and *Vikriti*. Hence each individual patient even if suffering from one common disease, is to be tackled in an individualized manner. Hence, for the management of diseases and designing of research protocol *Prakriti* assessment along with status of *Ojas* and *Agni* must be in incorporated. Therefore, hurriedly borrowed conventional methods of research may not succeed to unfold the complex theories and clinical practices of Ayurveda.

- Dr. Ajai Kr. Pandey
Editor



“IMPORTANCE OF RASAVAH SROTAS AND CONCEPT OF DIETARY FAT”

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ABSTRACT :

A balanced diet is most essential component of healthy life, but we may overlook this important issue and become a victim of metabolic syndrome. The main problem of today's world is blockage of roads or congestion in the traffic system of cities; similarly, our internal transport system many times get congested due to obstructive pathologies; which is called as sroto sanga. When this sroto sanga primarily affects the Rasa vaha srotas (circulation of nutritive substance), it will lead to ischemic diseases like Ischemic heart disease or a stroke. Acharya Charak stated excessive intake of oily and heavy meals and excessive thinking over thoughts as causative factors for Rasavaha sroto dushti. Now a days coronary artery disease is the leading cause of death and disability, have the same reason. Heart is using lipids as its primary fuel to meet its energy demand for pumping. If we don't take a good fat in diet, our liver will make it, and that is not worthy. The refined oils which are available in the market and used for cooking are very dangerous, because it cannot get

metabolized properly in the body and get deposited on the vascular walls causing hindrance in the flow of plasma to the heart and other important organs of the body. So selection of a good fat for ingestion is essential to become healthy and fit. Traditionally fats are of four types Ghrita, Tail, Vasa and Majja; among them ghrita (saturated fat) and tail (unsaturated fat) are used frequently. Ghrit is best source for fat specially Deshi ghee (cow clarified butter) and Makkhan (butter). The edible oils are sarson, narikela, atasi, kusumbha etc. and sesame oil is best out of these oils.

INTRODUCTION :

Diet is a very important part of everyone's life, whether it is a vegetarian, non-vegetarian or mixed. India is the largest part of world inhabiting the pure vegetarian diet people. It is also unique in its geographical situation that here all six seasons are encountered in a year so a variety of cereals and vegs, farming become possible. A balanced diet is most essential component of healthy life, but we may overlook this important issue and became a victim of metabolic syndrome. Our diet chemically has protein,

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carbohydrate and fats as major constituents; while vitamins, minerals and water as minor constituents. Each substance has its own importance in the body functions and will exhibit its deficiency symptoms when less. Usually excess of these substances is passed out by way of excretion, but sometimes they remain inside the body and become the source of pathogenesis. Today our society is facing a huge problem of adulteration and mixing of cheap inedible food material with dietary substance. The source of edible fat is limited, hence chances of contamination is highest, and due to consumption of low grade fat lipid metabolism get disturbed and leads to dyslipidemia. Dyslipidemia is one of the very important biochemical alteration in body physiology and root cause of many chronic diseases like Ischemic heart disease, and stroke. The major part of disease and death in present era is due to metabolic syndrome, which is responsible for many Non communicable diseases.

Srotas-

Term srotas means channels of circulation; actually these are the paths that helps for transportation of substances. Nutritive substances, metabolic wastes and finished products supplied to and from the cells and tissues through this path. Channels carry the transformed dhatus or excretory wastes to different destinations through their mess of network to nourish

the cells or to expel excreta out of body. In general usage the term srotas comprehends all the channels- big and small, perceptible and imperceptible that compose the internal transport system of the body. In real sense any hollow pipe like structure open at both end is a srotas and which is used for transportation of metabolic substances, they may be as small as a cell pore and as big as Gastro intestinal tract.

Rasa Vaha srotas-

The first and most important srotas is Rasavaha srotas, because it is responsible for uninterrupted supply of nutritive substance to whole body. Further it has two roots; the Heart and 10 great vessels connected to it, any blockage in the lumen of these vessels will leads to Rasa vaha sroto sanga of heart and show the clinical features of Rasakshaya. This is similar to patho-physiology of Ischemic heart disease.

रसवहानां स्रोतसां हृदयं मूलं च धमन्यः।

– च०वि०-५/७

Rasa vaha srotodushti –

Rasavaha srotas as discussed is very important for nutritional status of the body, and mostly it is suffering from blocking abnormality i.e. sanga. Atherosclerosis or spasm of coronary blood vessels is the leading cause of ischemic features of cardiac muscles.



गुरुशीतमतिस्निग्धमतिमात्र समश्रताम ।
रसवाहीनि दुष्यन्ति चिन्त्यानां चातिचिन्तनात् ॥
—च०वि०—5 / 13

Acharya Charak stated excessive intake of heavy, cold, oily and large quantity meals and excessive thinking over emotions as causative factors for Rasavaha sroto dushti. When this Rasa vaha srotas get blocked, the effector organ will show the Rasa dhatu deficiency symptoms. In clinical setting ischemia and hypoxia accounts for 80 to 90% of cell injury and subsequent diseases.

घटटते सहते शब्दं नोच्चैर्द्रवति शूल्यते ।
हृदयं ताम्यति स्वल्पचेष्टस्यापि रसक्षये ॥
—च०सू०—17 / 64

The person of rasa dhatu kshaya feels palpitation after minor work, cannot tolerate loud sounds, feeling excessive anxiety (tension), mild pain in pre cordial area and tiredness. These clinical features are similar to angina pectoris or symptoms of ischemic heart disease; which are produced due to lesser blood supply to cardiac muscles itself.

Rasaja vikar-

The diseases caused by affliction of Doshas with Rasa dhatu are following; *asraddha* (aversion of appetite), *aruchi* (anorexia), *virasata* (distaste in mouth), *hrillasa* (nausea), *gaurav* (heaviness in body), *tandra* (laziness), *angamarda* (body ache), *jvara* (fever), *tama* (visual black outs), *pandutvam* (pallor ness), *srotavarodha* (obstruction in fluency of

passages), *klaivyam* (impotency), *sada* (lethargies), *krishangata* (thinness), *nashagni* (dimness of metabolic fire) and *akale bali-palit* (early aging). Most of the above disorders are due to less peripheral vascular perfusion and deficiency of nutritive substance.

Treatment for Rasaja vikar-

The treatment for all types of Rasaj vikar is various langhan (emaciating) methods

रसजानां तु विकाराणां सर्वलघनमौषधम् ।
—च०सू०—28 / 25

Classically the langhan is of 10 types, which ranges from cleansing procedures to non-pharmacological and pharmacological methods.

चतुष्प्रकारा संशुद्धिः पिपासा मारुतातपौ ।
पाचनान्युपवासश्च व्यायामश्चेति लंघनम् ॥
— च०सू०—22 / 18

The Langhan or emaciating measures are those methods which brings lightness in the body, clears the extra load of metabolites and digest the Ama and other wastes. They are Vaman (Therapeutic vomiting), Virechan (Therapeutic Purgation), Vasti (Medicated enema), Nasya (Nasal drops), Pipasa (holding the thirst), Maruta (stay in wind), Atap (sunbath), Pachana (digestive medicines), Upavas (fasting) and Vyayama (physical exercise).

Importance of sneha dravyas in rasaj vikar -

According to Acharya Charak consumption of excessive fat in diet can



be a cause for rasavaha sroto dushti. Sneha dravyas are various dietary lipids we consumed daily, but the actual beneficial lipids are very few. Now a days every modern physician is talking about Dyslipidemia and its fatal complications like IHD, Stroke, Metabolic syndrome, Hypertension, Diabetes mellitus-II, Fatty liver disease, and they always suggest to cut the dietary source of fat, but never advise to eat the correct dietary fat. Fat is essential for human body functions, as it is required for building of cell membrane, transportation of fat soluble vitamins, various hormones are fats, and heart gets its energy from fat. So when we eat fatless diet or a dummy fat diet, all these functions would cease. Dummy fats are those fats which are derived from vegetable oils but actually not good for the human body functions as our body do not adapt them in a proper way, rather they are giving a metabolic burden to the body. When our body don't get correct fat from the diet, liver will synthesize it for us; which is not a good choice and called as LDL (low density lipo-proteins) and VLDL (very low density lipo-proteins) fats. HDL (high density lipo-proteins) fats are good for human body functions and can be derived from ghee (cow clarified butter), butter and other animal fats and by use of correct vegetable oils as stated by Acharya Charak Sarson (mustard), til (sesame), chironji, eranda (castor), tisi (linseed), muli (radish), neem, akhrot (walnut), *ber*, *bahera*, *karanja*, *pista*, *harad*, *madhuka*, *bilva*, *aadu* and *sahjana* (drumstick).

Sneha dravyas-

All lipid substance in Ayurveda are referred as Sneha dravyas; they are four in number and originated from plants and animals. Tail sneha is claimed to be the best substance to subside the Vata. while Ghrita sneha is on top to subside Pitta, Vasa and Majja are good for revitalizations and providing energy to dhatus (tissues). The snehas can be applied externally and/ or internally; the intake of sneha dravyas does shodhana (cleansing), shaman (Pacification) and branhana (Restoration) karma, depending on the nature of use. Most of the Ayurvedic medicines are also prepared by cooking of herbs in fats to increase their effectiveness and palatability.

Lipid metabolism facts and faults-

Lipids are made up of fatty acids with glycerol, and fatty acids are composed of a hydrocarbon chain that terminates with a carboxylic acid group; this arrangement confers the molecule with a polar, hydrophilic end, and a nonpolar, hydrophobic end that is insoluble in water. In biology, a lipid is a substance of biological origin that is soluble in nonpolar solvents. Lipid metabolism is the synthesis and degradation of lipids in cells, involving the break down or storage of fats for energy. These fats are obtained from consuming food and absorbing them or they are synthesized by an animal's liver. Lipogenesis is the process of synthesizing these fats. The majority of lipids found in the human body from ingesting food are triglycerides and cholesterol. Other



types of lipids found in the body are fatty acids and membrane Lipids. Lipid metabolism is often considered the digestion and absorption process of dietary fat; however, there are two ways organisms can use fats to obtain energy: consumed dietary fats and storage fat. Vertebrates and humans use both methods of fat usage as their sources of energy for organs such as the heart to function. Since lipids are hydrophobic molecules, they need to be solubilized before their metabolism begin. Lipid metabolism often begins with hydrolysis, which occurs with the help of various enzymes in the digestive system. Lipid metabolism does exist in plants, though the processes differ in some ways when compared to animals. The second step after the hydrolysis is the absorption of the fatty acids into the epithelial cells of the intestinal wall. In the epithelial cells, fatty acids are packaged and transported to the rest of the body.

Digestion of Lipids-

Digestion is the first step to lipid metabolism, and it is the process of breaking the triglycerides down into smaller monoglyceride units with the help of lipase enzymes. Digestion of fats begin in the mouth through chemical digestion by lingual lipase. Ingested cholesterol is not broken down by the lipases and stays intact until it enters the epithelium cells of small intestine. Lipids then continue to the stomach where chemical digestion continues by gastric lipase and mechanical

digestion begins (Peristalsis). The majority of lipid digestion and absorption, however, occurs once the fats reach the small intestines. Chemicals from the pancreas (pancreatic lipase family and Bile salt-dependent lipase) are secreted into to the small intestines to help breakdown the triglycerides, along with further mechanical digestion, until they are individual fatty acid units able to be absorbed into the small intestine's epithelial cells. It is the pancreatic lipase that is responsible for signaling for the hydrolysis of the triglycerides into separate free fatty acids and glycerol units.

Absorption of Lipids-

The second step in lipid metabolism is the absorption of fats. Absorption of fats occurs only in the small intestines. Once the triglycerides are broken down into individual fatty acids and glycerols, along with cholesterol, they will aggregate into structures called micelles to enter the epithelial cells. In the cytosol of epithelial cells, fatty acids are converted back to triglycerides. In the cytosol of epithelial cells, triglycerides and cholesterol are packaged into bigger particles called chylomicrons which transport digested lipids. Chylomicrons travel through the blood stream to enter adipose and other tissues in the body.

Transportation of Lipids-

Due to the hydrophobic nature of membrane lipids, triglycerides and cholesterol, they require special transport proteins known as lipoproteins. The



amphipathic structure of lipoproteins allows the tryglycerols and cholesterol to be transported through the blood. Chilomicrons are one sub-group of lipoproteins which carry the digested lipids from small intestine to the rest of the body. The varying densities between the types of lipoproteins are characteristic to what type of fats they transport. For example, Very-Low-Density-Lipoproteins (VLDL) carry the synthesized triglycerides by our body and Low-Density-Lipoprotein (LDL) transport cholesterol to our peripheral tissues. A number of these lipoproteins are synthesized in the liver, but not all of them originate from this organ.

Catabolism of Lipids-

Once the chilomicrons (or other lipoproteins) travel through the tissues, these particles will be broken down by lipoprotein lipase in the luminal surface of endothelial cells in capillaries to release tryglycerides. Tryglycerides will get broken down into fatty acids and glycerol before entering cells and remaining cholesterol will again travel through the blood to the liver.

Lipid metabolic disorders-

Lipid Metabolism Disorders are illnesses where trouble occurs in breaking down or synthesizing fats (or fat-like substances). Lipid metabolism disorders are associated with an increase in the concentrations of plasma lipids in the blood such as LDL cholesterol, VLDL,

and triglycerides which most commonly lead to cardiovascular diseases. Dyslipidemia is an abnormal amount of lipids (e.g. triglycerides, cholesterol and/or fat phospholipids) in the blood. In developed countries, most dyslipidemias are hyperlipidemias; that is, an elevation of lipids in the blood. This is often due to diet and lifestyle. Prolonged elevation of insulin levels can also lead to dyslipidemia.

Types of Lipids-

The types of lipids involved in Lipid metabolism includes; membrane lipids, cholesterol and stored fat (Adipose tissue). Membrane lipids are Phospholipids, Sphingolipids, Glycolipids, and Glycerophospholipids. While cholesterol are also present as Steroid, Triacylglycerols (fats), Triacylglycerides, Fatty acids, Bile salts, Eicosanoids and Ketone bodies.

CONCLUSION-

Health is wealth, a very important quote we are listening since our childhood; but it is so expensive to obtain now a days. Natural food is replaced by synthetic and chemical food, which is creating a havoc for healthcare professionals. The most vital organs of our body are brain, heart and kidney are always at a risk with adulterated and unhealthy diet. Lipids are crucial dietary substance and also limiting factor for health and disease. Today's market is full of various refined and processed oil derived from palm and rice bran; but they are not healthy choice and will be the cause



for metabolic disorders. So if someone want to be fit and keep away from these disorders has to eat Cow ghee, butter and all other natural oils indicated for human use by Acharya Charak.

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IMPORTANCE OF KALA

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ABSTRACT :

Ayurveda has given great importance to the kala (time) for the healthy as well as the diseased. It is that which controls both life and death of the individual. According to Charaka, kala have been divided into two Nithyaka and Avasthika. Nithyaka again divided into uttarayana and dakshinayana. Uttarayana being further classified as shishira, vasantha, greeshma and dakshinayana further classified into varsha, sharat, hemantha. Avasthika tells us about different avasthas of vyadhi. The importance of kala has been highlighted in Ayurveda in the context of classification of vyadhi, nidana for roga, in kriyakala, in Sadhyasadhyata of the vyadhi, in arishta and in Chikitsa. Thus right from the Nidana to Chikitsa, kala plays an important role.

Keywords: Kala, Vyadhi, Nidana, Chikitsa.

INTRODUCTION :

A living person is the product of kala (time). Diseases occurring to the persons are also considered to be caused by time. The whole universe is under the control of time. Hence time is the cause

everywhere. From the microscopic changes to the macro changes in the universe all are governed by time. Ayurveda has given great importance to the kala (time) for the swastha (healthy) as well as the athura (disease). From the basic dina charya (daily regimen), ritu charya (seasonal regimen), dosha kala (time of each dosa), avasthapaka (stages of digestion) kala, dhathu poshana (process of nourishment) kala, the process of ageing, developing samprapthi (pathogenesis) in a disease to its Chikitsa (treatment), all the factors depends on time.

DEFINITION:

Kala can be considered as the change and it is only one but many for the different presentations and the calculations¹; it is expressed as dina (day), masa (month) etc. Kala is said to be bhagavan, svayambhu (self-originated) and its origin, existence and end are obscure. It is that which controls both life and death of the individual². It is a continuous process like chakra (wheel) which does not stop even for a moment and joins both sukha and dhukha to the life of the individual³.

Kala vibhaga⁴:

According to Charaka, kala have been divided into two, Nithyaka and Avasthika.

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Nithyaka again divided into Uttarayana and Dakshinayana. Uttarayana being further classified as shishira, vasantha, greeshma and Dakshinayana further classified into varsha, sharad, hemantha. Avasthika tells us about different avasthas of vyadhi.

Importance of Kala in Ayurveda :

1. Classification of Vyadhi:

a. Kalaja and Akalaja vyadhi⁵:

Kalaja vyadhi can be connected to the growth of the body and the state of the organs. As the time passes the bodily changes are observed like graying of hairs, wrinkles on the skin, etc which cannot be reversed by medicines. Akalaja vyadhi are the diseases which occur untimely. For eg: disease occur in youvanavastha(young age).

b. Prakrutha and Vaikrutha⁶:

Vyadhi which is manifested where the dosha aggravated because of the nature of the season is prakrutha and it is easily curable because the line of treatment favors both dosha and ritu. Whereas the treatment for vaikrutha vyadhi will not favor for dosha and ritu. For eg: Classification of jvara (fever) is made on the basis of kala. When the jvara is caused by the swabhava of kala, it is considered as prakrutha jvara like pittaja jvara in sharad ritu.

2. Kala as a Nidana for roga⁷:

The atiyoga, ayoga and mithyayoga of artha, karma and kala is considered as the

3 main causes for the manifestation of the diseases. If a particular season manifested itself excessively, it should be regarded as atiyoga, less manifested is ayoga and exhibition in contrary to the normal one can be considered as mithya yoga.

3. Kala with special reference to kriyakala:

The concept of kriyakala has been described in 2 separate entities. Ritu kriyakala and vyadhi kriyakala. Ritu kriyakala explains the normal physiological variations of dosha in respect to season.

Table 1 Showing Ritu kriyakala

Dosh	Chaya	Prakopa	Prashama
Vata	Greeshma	Varsha	Sharad
Pitta	Varsha	Sharad	Hemantha
Kapha	Shishira	Vasantha	Greeshma

Based on the chaya, prakopa, prashama of the tridosha, various measures are explained in the ritu charya (seasonal regimens) to overcome the adverse effects that may be produced due to these seasonal variations, which in turn helps in preventing the onset of many diseases. Vyadhi kriya kala explained by Susrutha gives an idea about the consecutive stages of the disease⁸. They are sanchaya, prakopa, prasara, sthana samsraya, vyakthi and bheda. By understanding these stages of the disease, early diagnosis of the vyadhi is possible and this helps to cure the disease successfully without much discomfort in planning the treatment



especially when the physician is able to identify the disease in the early stage like sanchaya, prakopa etc and preventing it from progressing to the later complication.

4. Role of Kala in Sadhyasadyata⁹ (prognosis):

One of the criteria for deciding the sadhyasadyata of the vyadhi is kala. When the vyadhi is of nava (recent origin), it is called as Sukha sadhya vyadhi. Kruchra sadhya vyadhi is where any one of kala(season), prakruti(physical and mental constitution) or dhatus(tissue elements) are favourable to the disease and na ati kalam (not very chronic). When the disease affects the patient continuously for deerga kala (long time), it is considered to be Yapya.

5. Importance of kala in Arishta¹⁰ (bad prognosis):

Acharya Charaka had explained the arishta lakshana, which indicates the death of the individual in a specific period of time. For eg: If there is diminution of body heat, absence of concentration of mind, loss of complexion, weakness of mind and absence of attachment towards life indicates the death of person in 1 year.

6. Importance of kala in Chikitsa:

a. Based on the seasonal variations and after proper understanding of the avastha of the dosha, one can plan up the treatment.

b. Treatment of a disease depends upon the knowledge of certain factors and kala is one among them without which complete cure of the disease is not possible.¹¹

c. Importance of kala in collection of drugs: According to the part used, there is specific time for the collection of each drug.¹²

Moola (Root)-Greeshma and Shishira Palasa & Shaakha-Varsha and Vasantha (Fresh branch & tender leaf) Pushpa (flower)- According to the season Tvak, Kandha, Ksheera- Sharath (Bark, rhizome, latex) Saara (exudates) - Hemantha

d. Shelf life of different preparations is explained on the basis of kala. For eg: Churna – 6 months, Avaleha – 1 year

e. Aoushadha sevana kala: The specific time mentioned for the intake of medicines depending on the dosha involved is aoushdha sevana kala. They are¹³:

- ♦ **Abhakta-** In empty stomach (vyana vata vaigunya)
- ♦ **Pragbhakta-** Just prior to meal (apana vata vaigunya)
- ♦ **Madhyabhakta-** Middle of meals (samana vata vaigunya)
- ♦ **Adhobhakta-** Soon after meals (udana vata vaigunya)



- ♦ **Samabhakta**- Along with food (Dipana, Pachana)
 - ♦ **Antharabhakta**- After digestion of morning food
 - ♦ **Samudga** - Before and after meals
 - ♦ **Sagrassa**-With each morsel (prana vata vaigunya)
 - ♦ **Grasanthara** - Between the morsels
- f. Selection of treatment modalities in various diseases is based on kala.

For eg: After the 6th day, after administering light food patient should be given with kashaya (decoction)¹⁴. From the 10th day onwards Grita (ghee) can be administered.

- g. There are five important things to keep in mind along with the appropriate therapeutic measures for the effective treatment, without which even the useful treatment may turn out to be harmful¹⁵. In that kala is one of the important factors. Here the factors included under the kala are¹⁶:
- ♦ Dina (different parts of the day). Eg: morning time is the most suitable time for vamana (emetic therapy)
 - ♦ Athura (nature of the patient). Eg: Balavan (strong person should take medicines in the morning in empty stomach and a durbala (weak) person should take medicines along with light food.
 - ♦ Aushada (time of taking medicines). Eg: Abhakta, Pragbhakta.
 - ♦ Vyadhi (nature of the disease). Eg. Administration of ghee, decoction, milk after 6 days of the disease.

- ♦ Jirna linga (stage of digestion of food): that is after observing the hunger, proper evacuation of stool and urine; lightness of the body, according to that only medicine is prescribed.
- ♦ Ritu (nature of the season): The regimens to be followed in different season are also according to the dosha involved in the disease.

CONCLUSION

Kala (time) is an important factor for both healthy and the disease. Each stage of the disease is bounded with kala, right from the nidana(causative factor) to the chikitsa (treatment) of a disease.

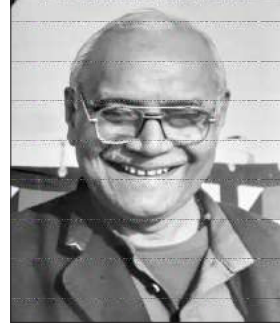
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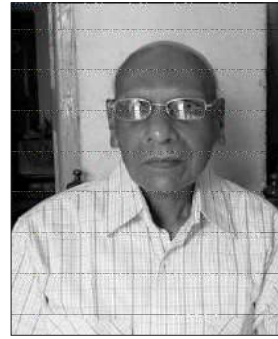


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शोक सन्देश



राष्ट्रीय स्वयंसेवक संघ के वरिष्ठ प्रचारक श्री ओमप्रकाश जी निधन दिनांक 04 अगस्त 2019 रविवार को प्रातः 6.20 बजे किंग जार्ज मेडिकल कॉलेज में हो गया। जिसके लिए विश्व आयुर्वेद परिषद परिवार अपनी शोक संवेदना प्रकट करता है एवं बाबा विश्वनाथ से मृतक आत्मा के शान्ति के लिए प्रार्थना करता है।



आचार्य गणपति विश्वनाथ द्विवेदी, पूर्व फार्मसी इंचार्ज, सी.सी.आर.एस. आजीवन सक्रिय सदस्य, काशी, विश्व आयुर्वेद परिषद का असामयिक निधन दिनांक 4 अगस्त 2019, रविवार को हो गया। जिसके लिए विश्व आयुर्वेद परिषद परिवार अपनी शोक संवेदना प्रकट करता है एवं बाबा विश्वनाथ से मृतक आत्मा के शान्ति के लिए प्रार्थना करता है।



PSYCHOLOGICAL BENEFITS OF YOGA WITH SPECIAL REFERENCE TO ITS EFFECTIVENESS IN THE MANAGEMENT OF DEPRESSION

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ABSTRACT :

In this modern technological era, majority of people face the problem of mental health in their lives. Depression is one of these that negatively affects person's functioning area & sense of well being. Depression is also responsible for death due to suicide. Depression has become a worldwide public health problem. Yoga is an ancient Indian practice and also part of Ayurveda, which is traditional Indian health care system. Yoga practices help to control impulses and improve and strengthen people by physical, mental, as well as spiritual health and improve the personal well-being. Yoga seems to be a promising way to manage depression. The purpose of this paper is to provide an overview of the history of yoga , psychological benefits of yoga and the scientific evidence in support of its use for the treatment of depression and promote personal well being.

Keywords: Yoga, Depression, Psychotherapy, mental health, personal well-being

DEPRESSION :

Depression is a common and serious medical condition. According to American

Psychiatric Associations Diagnostics and Statistical Manual five (DSM-5) depression is codified as a mood disorder. Depression is characterised by prominent and relatively persistent depressed mood or loss of interest which must be present at least two week across most of the situations which is relatively more painful for the actual circumstances or exist even without any external causes of sadness. MDD (Major depressive disorder) negatively affects person's functioning areas and sense of well-being.

The clinical presentation of depression may vary from mild to severe & symptoms can be classified in four domains:-

1. **Cognitive:** difficulty in thinking, concentrating & making decision, pessimistic ideas (feeling of hopeless, helpless & worthless) and thought of suicide may be present.
2. **Behavioural:** psycho-motor retardations (delay in performing movements & slow speech) and / or agitation (pacing, restlessness, frequent unnecessary movements).
3. **Neurovegetative:** disturbance in sleep & appetite, weight loss or weight gain and loss of sexual drive.
4. **Physical:** heaviness of head, body aches & pain.

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There are many factors which may contribute or increase vulnerability to depression, including family history (genetic factor), low level of norepinephrine, serotonin & GABA (Neurochemical factor), hyperactivity of Hypothalamus-Pituitary-Adrenal (HPA) axis and excessive release of stress hormone cortisol (neuroendocrine factor) and stressful life events such as death of love ones, losing a job, abuse, dispute with family & friends, catastrophic events play a key role in depression (psycho-social factor)

In MDD, psychosocial factors are important cause of depression. This factors adversely affect biological factor. Psychosocial factors leads to conflict, pressure and stress when stressor may continue with prolonged time or person perceived stressor as uncontrollable, they make less effort or no effort to overcome with stressor which develop learned helplessness. Learned helplessness is a vicious cycle that contributes to depression.

Major Depressive Disorder (MDD) occurs in persons of all genders, ages and backgrounds. MDD is common, affecting about 322 million people equivalent to 4.4% of the world population (WHO, 2017). One in every five women and one in every eight men experience a major depressive episode over the course of their life (wang et.al. 2007). From 1990 and 2010, major depression moved up from 15th to 11th in terms of global disease burden measured in Disability-Adjusted

Life Years (DALYs) and It is the second most prevalent cause of the Years Lived with Disability (YLD) in all age groups comparing all medical illnesses. It is responsible for approximately 2-8% death due to suicide by adult sufferers (Richards et. al. 2014) and it is reported that about 50% of people who die by suicide had depression or another mood disorder (Bachmann, S 2018).

Dimension of yogic practices in depression

Yoga is an ancient Indian practice and also part of Ayurveda, which is traditional Indian health care system. Yoga word comes from Sanskrit root 'Yuj', means 'to union' or 'to unite'. Yoga is the scientific practices or discipline that unite mind (psyche) and (body) into one entity. Yoga practices enhance individual consciousness which make individual more aware about their own thoughts, emotions, sensations & surroundings. When people become aware about their own internal process & environment, they maintain optimal emotional state & harmony in adverse circumstances and take decision & action intelligently.

The four major schools or streams of yoga are: Karma yoga (Path of self Sacrifice or rightful action without being attached to fruits), Bhakti Yoga (Path of self surrender or devotion and love for any endeavour), Jnana Yoga (Path of self analysis or Self- realization), Raja Yoga (Path of self control). The first written records of this methodology approached in Yoga Sutra Patanjali. Yoga Sutra of



patanjali (4th CE) define yoga as a “*yogas chitta virti nirodhah*” that means yoga practices control thoughts and remove fluctuation that clutter the mind and keep the mind its natural balance state. Patanjali Yoga Sutra proposed eight limbs or path of Yoga (i.e. Ashtanga yoga also known as Raja Yoga), includes, Yama (social ethics), Niyama (personal ethics of right living), Asana (poses for balance & strengthening the body), Pranayama (controlling the energy of the body through breath extension or control), Pratyahara (withdrawing the senses from external world), Dharana (concentrating in one point or object), Dhyana (meditation for transcendence self or supreme being), Samadhi (union with divine /self realization).

Ashtanga Yoga is the oldest form of Yoga. According to Patanjali yoga sutra, Ashtanga yoga is form of internal purification to reveal the universal self. It is a dynamic and spiritual practice, which synchronizes the body's movements with breathing and helps with self healing. Yoga practices improve and strengthen the person's personality as a whole (physical, mental and spiritual aspects of personality), boost subjective well being and also better adjustment with his environment. In present time, yoga across the world is concentrated mainly around its physical form include asans, pranayama and meditation called Hath Yoga because its easy to convey and can be practised easily. The name Hatha is composed of two components : “HA” means Sun (the positive current in the body) and “THA” means moon (the negative current in the

body). Hatha Yoga symbolizes the balance between these two energies.

The purpose of this paper is to provide an overview of the yoga, psychological benefits of yoga and the scientific evidence in support of its use for the treatment of depression and promote personal well being.

Yoga for depression

Yoga offers a possible way to reduce stress. High level of stress adversely affects physical as well as mental health. HPA axis is essential in response to stress and it is hyperactive during depression. A large number of scientific research studies have been shown that yoga is effective in neutralizing stress and reducing automatic arousal.

Bagchi and Wenger (1957), in their early classical yoga research said that “Physiologically Yogic meditation represents deep relaxation of the autonomic nervous system without drowsiness or sleep and a type of cerebral activity without highly accelerated electrophysiological manifestation but probably with more or less insensibility to some outside stimuli for a short or long time.” Suggested that Hath Yoga is an effective technique to enhance mindfulness and eliminate stress. A review study found that yoga is as effective or better than exercise to improve a variety of mental and physical health measures such as stress, quality of life, moods, heart rate variability and so on (Ross A et al 2010).

It has been shown that yoga improves the quality of life in healthy and ill people. Yoga practices are known to



facilitate the secretion of melatonin from the pineal gland, which can act as a psycho-sensitive hormone. It has been useful in improving functional capacity and well-being. Harinath K et al 2004 demonstrate that a Hath yoga and Omkar chanting is also known to cause alterations in the autonomic balance, respiratory performance and well being, which could be attributed to the improved scores of well being.

These observations suggest that yogic practices can be used as psycho physiologic stimuli to increase endogenous secretion of melatonin that is improved sense of well being(Harinath K et al 2004). Sharma R (2008) suggested that a short yoga based lifestyle modification and stress management educational program leads to a remarkable improvement in the subjective well being scores.

In the treatment of mild to moderate MDD, promising results indicate that yoga can be applied as a monotherapy (Pilkington K et al.2005). Studies found that Yoga asans improved mood & decrease symptoms of depression in young adults (Woolery A et.al. 2004), Sudarshan kriya yoga SKY practice significantly reduce mild to severe depression (Rohini V et. al. 2000 and Janakiramaiah N et. al. 2000), shavasana can be use as therapeutic intervation to allivate depression & significantly increase positive change in patients with depression (Khumar SS,1993), Regular practice of meditation may increase overall physical health and decrease negative emotions such as anxiety and depression (Walton et al 2002).

The scientific research mentioned above shows that the practice of yoga not only controls stress and relieves depression, but also strengthens mind, increases the capacity of consciousness, inner peace & gives the meaning and purpose of life, enhance sense of well-being and healthy and balance life style. The nature of all yoga practices is psycho-physiological. Psychotherapy and yoga are with different frameworks, techniques and practices, but both Yoga practice and psychotherapy, or talk therapy such as CBT & REBT share many of the same goals, such as promoting mental health and creating cognitive, behavioural and emotional changes.

The core goals of psychotherapy usually focus on increasing a person's participation in positive activities, improving interpersonal relationship, person's well-being & mental health. Psychotherapy focuses on helping a person understand how changing their behaviour can drive the change they feel. Some psychotherapies focus on changing the form of faulty thinking or cognitive distortions and behaviours through cognitive restructuring and developing one's own conscious effort to solve problems. Some therapies create a facilitator and empathetic environment in which patients discover the answer for themselves and decide their best direction of life.

Yoga is based on number of principles such as asanas, breath control, and meditation that support self-acceptance, self-compassion & self-confidence. The practice of asana, or physical posture, was developed as a way to align, strengthen and balance the body to keep it healthy and



serve as “a vehicle to focus within the body or quieting and calming the mind” (Robert-McComb JJ,2009) to prepare the body for being able to sit comfortably for Meditation. Asana distinguishes itself from an elastic or warm-up exercise in which its practice involves focusing the whole attention in the body.(Robert-McComb JJ,2009). Pranayam or breathing is a key mechanism of yoga practices involves releasing and channeling prana, or the life force of the body, it helps to detach from all external distractions, allow to relax and nurture optimal physical health and mental purity.

Like psychotherapeutic techniques, Yoga also help to learn to be present and resolve life-hassles and emotional difficulties such as stress, disappointment, anger, frustration & conflicts in a rational manner . Yoga unite mind-body as a whole and promote a healthy integrated self or the fully functioning person. The Mind is full of constantly changing thoughts, vivid images and fantasies. Practicing yoga calms the mind and eliminates emotional clutter and keeps negative thoughts away and helps concentrate better way.

Integrating yoga practices into psychotherapeutic intervention can improve the benefits of traditional therapeutic intervention. Yoga is accessible acceptable, cost-effective and promotes self-sufficiency and maintains inner peace. It does not produce harmful side effects. In India there are many yoga clubs that teach yoga at no cost. Clients who have the most difficulty expressing and healing through talk therapy like CBT, yoga practices work best with them. Those clients who have

suffered, from painful physical reactions and memories evoked by trauma or medical conditions, yogic practices help them feel comfortable and accept their bodies.

CONCLUSION :

The scientific research mentioned above shows that the practice of yoga not only controls stress and relieves depression, but also strengthens mind, increases the capacity of consciousness, inner peace & gives the meaning and purpose of life, enhance sense of well-being and healthy and balance life style. Both Yoga practice and psychotherapy share many of the same goals, such as promoting mental health and creating cognitive, behavioural and emotional changes. Yoga unite mind-body as a whole and promote a healthy integrated self or the fully functioning person. Integrating yoga practices into psychotherapeutic intervention can improve the benefits of traditional therapeutic intervention. Yoga is accessible, acceptable, cost-effective and promotes self-sufficiency and maintains inner peace.

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AYURVEDIC MANAGEMENT OF HYPOTHYROIDISM: A CASE STUDY

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ABSTRACT :

Hypothyroidism is a common endocrine disorder resulting from the deficiency of thyroid hormone. The main motive of thyroid hormone is to “run the body’s metabolism,” it is clear that individual with this condition have symptoms of slow metabolism. World-wide around one billion people are estimated to be iodine deficient; but, it is unknown how often this results in hypothyroidism. Hypothyroidism is a common ailment in most of the Indian women now a days. There is no direct discription of the thyroid gland in Ayurveda, but a disease by the name Galaganda, characterized by neck swelling, is well known. Also correlated with medas dhatwagni mandya, kaphaj vridhhi or kapha avarana janya dhatwagni mandya. A 60 years old female came to Ch. Brahm Prakash Ayurveda Charak Sansthan, Kayachikitsa special OPD with complaint of Balabhransha [loss of strength], Gaurava [heaviness in the body], Apakti [improper digestion]. Glani [fatigability], Daurbalya

[weakness], Agnimandya, Sheet prachiti (feeling excessive cold), Badhamala [Constipation], Sthoulya [unexplained weight gain]. Examination, investigations and history leads to diagnosis of hypothyroidism. So, patient was treated with Kanchnara guggulu with Shunthi churna along with Pathya, Apathya & Yogasananas.

Keywords: *Ayurveda, Balabransha, Galagand, Hypothyroidism, Metabolism.*

INTRODUCTION:

Hypothyroidism is a condition results from inadequate production of thyroid hormone.

Anatomy and Physiology of the Thyroid Gland: The thyroid is a small gland, immediately below the larynx (or the Adam’s apple), under the skin, measuring about 2 inches (5 centimetres) across, in the neck, anterior to trachea. The 2 halves (lobes) of the gland are connected in the middle called the isthmus, giving the thyroid gland the shape of a bow tie. Normally, the thyroid gland cannot be seen and might barely be felt. If it becomes enlarged, doctors can feel it easily, and a prominent bulge (goitre) may appear below or to the sides of the Adam’s apple.¹

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Thyroid hormones are essential for proper brain function development in infants and metabolic activity regulation in adults, as well as a wide array of effects on every organ system in the body. The main hormones produced by the thyroid gland are thyroxin (T4), 3,5,3'-triiodothyronine (T3), and reverse 3,5,3'-triiodothyronine (T3), and they are controlled by thyroid stimulating hormone (TSH) from the anterior pituitary gland. These hormones work in coexisting harmony with their upstream modulators to sustain a proper feedback mechanism and the body's homeostasis.²

Deficient thyroid hormone secretion can be due to thyroid failure (primary hypothyroidism) or, less commonly, pituitary or hypothalamic disease (secondary hypothyroidism). Subclinical (or mild) hypothyroidism is a state of normal free thyroid hormone levels and mild elevation of TSH; despite the name, some patients may have minor symptoms. With higher TSH levels and low free T4 levels, symptoms become more readily apparent in clinical (or overt) hypothyroidism. In areas of iodine sufficiency, autoimmune disease and iatrogenic causes are the most common causes of hypothyroidism. The peak age of occurrence is around 60 years, and prevalence increases with age. Congenital hypothyroidism is present in 1 of 4000 newborns; the importance of its recognition and prompt treatment for child

development has led to the adoption of neonatal screening programs.

Hypothyroidism in young patients is associated with typical symptoms and signs, such as the slowing of motor activity, constipation, cold intolerance, menorrhagia, stiff muscles, sleep apnea, dry skin, weight gain, snoring, and a hoarse voice³

Ayurvedic overview of hypothyroidism:

In Ayurvedic classical texts even though there are no direct references in terms of hyper or hypo production of the hormone by the thyroid gland (Avatu Granthi in Sanskrit), but there is a disease by the name Galaganda and Gandamaala, characterized by neck swelling that is known to be diseases of thyroid gland⁴

The first description of neck swelling was mentioned in Atharva Veda by the name Apachi. Charaka mentioned the disease under 20 shleshma vikaras.⁵ Acharya Sushruta in shareera sthana has mentioned that of the seven layers of the skin, the sixth layer Rohini is the seat of Galaganda⁶. In Nidana Sthana he described Galaganda as two encapsulated small or big swellings in the anterior angle of the neck, which hang like scrotum⁷, whereas Charaka mentioned Galaganda as a solitary swelling.⁸

In Ayurveda perspective regarding hypothyroidism, there is abnormality of



jatharagni and dhatwagni along with abnormality of kapha and vata dosha as well as rasavaha, raktavaha, medovaha, shukravaha and manovaha srotas. As the cardiac function and cardiovascular hemodynamics is readily regulated by the thyroid hormone T3. Hypothyroidism causes decreased cardiac contractility and cardiac output as well as increased peripheral resistance.⁹ These findings may specify relative incidence of Rasavaha srotas abnormality in hypothyroidism. Agnimandya of medodhatu leads to production of virkut medo dhatu. It can't participate into Asthi dhatu poshana. This vikrit medo dhatu accumulate in body which cause Bhaar vrudhi (weight gain). Weight gain also sign of Rasavahadushti & kapha viridhhi in body. Hypothyroidism patients show increased carotid artery intima-media thickness due to atherosclerosis, and elevated total cholesterol, elevated high density lipoprotein which improve on hormone replacement therapy.¹⁰ In cases of hypothyroidism the serum triglycerides remain high and the high density lipoprotein level remain low. These facts support the abnormality of Medovaha Srotas in the pathogenesis of hypothyroidism. Hypothyroidism is known to induce various neurological and mental dysfunctions.¹¹ Which supports Manovaha Srotas abnormality in this disorder.

MATERIALS AND METHODS

Case report: A female patient aged about 60 years old visited OPD of Kayachikitsa, Ch. Brahm Prakash Ayurveda Charak Sansthan, Khera Dabar presenting with complaints of Balabhramsha loss of strength, Gaurava [heaviness in the body], Apakti [improper digestion]. Glani [fatigability], Daurbalya [weakness], Agnimandya, bhadhmala [Constipation], Sthoulya [unexplained weight gain] since, 2 year.

History of present illness: One year before, the patient had a gradual onset of unexplained weight gain with increased sensitivity to cold, constipation and dry skin. After one month of this she develop puffy face, hoarseness with muscle weakness, tenderness and stiffness. Gradually she developed loss of strength and thinning of hair and chronic constipation. She feels comfortable after taking Ayurvedic medicines. Hence, she came to our hospital for better management.

History of past illness: h/o right renal calculi with 4.2 mm size, 8 month before.

Treatment history: H/o taken pain killers for whole body ache 6 months before.

Personal history: On Examination of patient, pallor was absent, tongue was not clear and she is vegetarian in diet. Pulse rate is 72/min. Her appetite was poor.



Occupation is teacher. Heart rate is 60/min with 110/70mmHg. Bowel history is 1times/2-3day with hard stools & frequency of Bladder is 3-4 times/day, 1-2 times at night. She has disturbed sleep due to muscle pain and stiffness. She has complains of stress or emotional disturbance also.

DIAGNOSTIC ASSESMENT:

Investigations: 1. Hb 2. Thyroid profile

Diagnosis: Hypothyroidism

Treatment:

‘Samprapti vighatana’ is one of the main principles of treatment. Whatever may be the aetiology of the disease, it results in under-active condition of the thyroid gland and ultimately the slowing down of the body’s metabolism. So, the aim of treatment should be to stimulate the endocrine system specially thyroid gland & symptomatic management of other associated clinical symptoms. The line of treatment with specific target to Rasavaha, Mamsavaha, Medovaha, Manovaha Srotas as well as Vata Dosha should be followed in Hypothyroidism.

Therapeutic interventions:

Shodhan:

Virechan Karma: Dipan pachan with Agnitundi Vati 500 mg 2 tab twice a day with lukewarm water before meal was done

for 3 days before starting Snehapana. Snehapana was done with Go-ghrit for 5 days starting with 30 ml, 60 ml, 100 ml, 130 ml, 150 ml in increasing pattern. Snehapana was done until Samyak Snehasidhdhi Lakshana were achieved. After Snehapana, 3 days Sarvang Abhyanga with Balataila and Swedana was done. Next day Virechana was done in classical method with Triphala Kwatha, Munakka 100mg and Trivrat Avleha. Pravara type of Shudhi (24 Vegas) was gained. Sansarjan karma was advised for 7 days.

Samshaman Aushadh:

1. Kanchnara twak churna 3gm twice a day
2. Triphala powder 5gm at bed time with hot water.
3. Arogyavardhini vati, 500mg twice a day

Anupana: Luke warm water

Drug Posology:

1. Kanchnar twak powder:

Latin Name - Bauhinia variegata Linn

Family- Caesalpiniaceae

Rasa - Kashaya, Tikta

Guna - Rooksha, Laghu

Virya - Sheet

Vipaka - Katu

Useful part Bark

2. Triphala powder :
3. Arogyavardhini vati



Table 1: Composition of Arogyavardhini vati:

Sl.	Drugs	Botanical name	Quantity
1.	Shuddha parad		1 part
2.	Shuddha gandhak		1part
3.	Lauh bhasma		1 part
4.	Abhrak bhasma		1 part
5.	Tamra bhasma		1 part
6.	Haritaki	Terminalia chebula Retz.	2 part
7.	Amalaki	Emblica officinalis Gaertn.	2 part
8.	Bhibhitaki	Terminalia bellirica (Gaertn.)	2 part
9.	Shuddha shilajit	Asphaltum punjabianum	3 part
10.	Chitrak	Plumbago zeylanica Linn	4 part
11.	Shuddha guggulu	Commiphora mukul Hook.ex Stocks	4 part
12.	Kutki	Picrorhiza kurroa Royle ex Benth	22 part

Pathya and apathya in hypothyroidism:

Pathya-

- ♦ **Ahara:** Kaphahara Ahara like Yava (barley), Bajra (millet), Javar (pearl millet), Ragi, vegetables like radish, Sarshapa, drumsticks, Gandeera (coleus) and spices like Shunthi, Jeeraka and Trikatu, buttermilk, Ushna Jala (Luke warm water). The diet should be high in fibre and low in calorie. Foods that contain iodine like brown algae, beetroot, radish, parsley, potatoes, fish, oatmeal and bananas should be kept in the diet

- ♦ **Vihara:** Regular exercises, Yogasanas, Pranayama like Surya Bhedana, Kapalbhati etc.

Apathya-

- ♦ **Ahara:** Heavy food articles and fried preparation, refined foods such as white flour, black gram, peas, potatoes, curd, milk, fermented and bakery items. Avoid salted confectioneries, chips and pickles. Eating goitrogenic foods such as cabbage, brussels sprouts, broccoli, cauliflower, sweet potatoes, maize, lima beans, soya and pearl millet should be limited. Avoid caffeine drinks like coffee, cola.



- ♦ **Vihara:** Sedentary lifestyle, day sleep, munching.

Yoga under procedure :- Sarvangasana (shoulder stand), Matsyasana (fish pose) and Halasna (plough pose), Surya Namaskara (Sun salutation), Pavanamuktasana (wind relieving pose) with emphasis on head and neck exercises, Supta Vajrasana (sleeping thunderbolt pose) and all backward bending asanas.¹²

In general, Asanas that compress and stretch the throat space are beneficial to the thyroid gland and are useful both for hyper and hypothyroidism as they stimulate the blood flow, which provides nourishment to the cells and helps the thyroid to do its work properly. Among

Pranayamas, Ujjayi is the most effective pranayama for thyroid unbalance as it directly acts on the throat area and has a relaxing and stimulating effect. It also has a warming effect which will help people whose thyroid unbalance make feel constantly cold.¹³ Thyroid disease is turning into common - with proper attention and awareness of the deep physiological therapies out there through yoga one will realize personal freedom from the disease and in some cases reverse the disease.

OBSERVATION AND RESULT:

The observation and results are displayed in this Table represent the improvement in objective criteria assessment of the patient.

Table 1: Investigation

Sl. No	Investigation	On 27/3/19	On 25/4/19	On 25/5/19
1.	Hb	10 gm/dl	11.2 gm/dl	12.5 gm/dl
2.	Serum T3	0.77 µIU/ml	0.96 µIU/ml	0.92 µIU/ml
3.	Serum T4	7.32 µIU/ml	7.25 µIU/ml	6.0 µIU/ml
4.	Serum TSH	11.58 µIU/ml	3.06 µIU/ml	2.65 µIU/ml

DISCUSSION:

The prospective of treatment is use of herbal plant extracts or formulations to balance Tridoshas or bodily humours with anti-kapha, anti-medha and pitta enhancing properties with promoting lifestyle modification along with adoption of Yoga.

Virechana: Virechana is the most preferred shodana in hyperthyroidism. As it corrects pitta related pathologies which

are seen in hyperthyroidism. It does vatanulomana. Periodically administered virechana delays the dhatupaka thereby preventing further tissue destruction. As Virechana dravya possesses Ushna, Tikshna, Sukshma, Vyavayi and Vikasi properties, by virtue of its virya the virechana dravya reaches hridaya. Hridaya here can be considered as nerve plexus in brain where it may help in balancing the hypo- thalamo pituitary thyroid axis¹⁴



Probable mode of action of Kanchanara twak churna:

Kanchanara is considered as a drug of choice for Granthi vikara and Galaganda.¹⁵ External application of kanchanara bark is done in Gandamala. Fresh bark of kanchanara is grinded with tandulodaka and mix with shunthi and used internally.¹⁶ It has a balancing activity on the thyroxin production, increasing any deficient production and decreasing any excess. It also clears swellings in the neck and goitre. It is a specific herb for swollen lymph nodes, cervical adenitis, swollen glands in general. Water-soluble fraction of total alcoholic extract of *Bauhinia variegata* Linn at a dose of 2 g/kg was fed to Neomercazole (150 mg/kg)-induced hypothyroidic rats (n = 12 in each group) for 20 days. The experiment resulted in enhanced thyroid function as evidenced by increased thyroidal weight (p < 0.001), I131 uptake and decreased serum cholesterol (p < 0.05 for both), and active thyroidal histology.¹⁷ Bark extract of *Bauhinia purpurea* Linn. at 2.5 mg/kg orally administered to female mice (n = 7 in each group) significantly increased serum T3 and T4 concentrations (p < 0.001 for both) after 20 days of treatment.¹⁸

It is a specific herb for hypo/hyper thyroid. It has a balancing activity on the thyroxin production; increasing any deficient production and decreasing any excess. It also clears swellings in the neck and goitre. It is a specific herb for swollen lymph nodes, cervical adenitis, scrophularia or swollen glands in general. It effectively flushes the lymphatic system of toxins, sluggishness and accumulated wastes. It

reduces increased serum thyroid hormone concentrations, decreased cholesterol and improved thyroid histology.

Probable mode of action of Triphala powder: It is one of the most popular herbal remedies which 'cleanse' by promoting bowel movement. It is having Deepana, Pachana, Vatanulomaka and Srotoshodhaka properties. Hence Triphala could correct the state of Agnimandya and that is one of the main factors concerned in pathogenesis process of hypothyroidism according to Ayurveda. Various scientific researchers have demonstrated that Triphala stimulates bile secretion, helps digestion and assimilation, and significantly reduces serum cholesterol and lipid levels (as hypercholesterolemia occurs due to hypothyroidism).¹⁹

Probable mode of action of Arogya vardhini vati: Arogyavardhini vati works basically on the Medas Dhatu and the Dhatvagni thus digesting and removing the Ama janit Medas dhatu vrudhi (increase in Medashatu that is undigested).²⁰ Guduchi (*Tinospora cordifolia* Miers) is rich in Tikta Rasa due to which it supports the digestive fire and digests the Ama (Indigested food particles) produced during the pathogenesis. The digestive fire when gets stimulated leads to stimulation of all Dhatvagni that leads to digestion of Ahara ansha (food particles) in their own Srotas (channels), finally causing digestion of Ama.²¹ Similarly Medas Agni also gets stimulated and digest the Apakva Medas. Tikta Rasa due to its Lekhan and Srotoshodhak Karma (channel cleansing) causes Lekhan of Medas (scrapping of fat) accumulated in Medovaha Srotas. In addition



to this the ruskha and khara guna of Tikta rasa also supports the digestion of Kapha.²² Due to wide spectrum of the disease and high prevalence in the society, the current issue was opted for study and its management by means of Ayurvedic principles

CONCLUSION :

The Ayurvedic treatment of hypothyroidism is aimed at controlling the symptoms and treating the basic pathology of the disease. From this review we conclude that hypothyroidism can be very well managed with Ayurvedic medicines, depending upon the symptoms, and careful selection of drugs to be made. Herbal extracts possess natural antioxidants, which not only help in curing the diseases, but also improve the body's defence system. So, Ayurveda based herbal remedies should be preferred for the management of Hypothyroidism.

The treatment follows holistic approach towards mind, behaviour, body and overall environment. Its main aim is to clear the blocked channels in body before initiating any oral therapy so as to balance tridoshas and then switch to Rasayana (rejuvenative) therapy. According to one of the basic principle i.e. "Saamanya Vishesh Siddhanta", similar conditions, aggravate the disease condition, whereas, dissimilar things alleviate, this treatment methodology facilitate the decrease in kapha by the use of kapha inhibiting drugs, increase dhatugata (tissue level) i.e. pitta by the use of pitta enhancing drugs and lowers the Meda (fat) by the use of Meda neutralizing drugs. All these methods help, restores the homeostasis and metabolic

activity in body which was altered by the blockage of channels by kapha. The Symptoms of Hypothyroidism are notorious for their nonspecific nature, so it often remains undiagnosed or misdiagnosed. The incidence is high in females as compared to males. Increasing the quantum and quality of Agni is the mainstay of treatment so drugs having Deepana, Pachana, Lekhana, Kaphashamaka, Vatanulomaka and Srotoshodhaka properties seems to be effective in this condition along with dietary rules and proper lifestyle as described in ayurvedic texts. Thus, a multifactorial and holistic approach is needed in managing the condition of hypothyroidism successfully i.e., diet, drugs and yogic exercises all in combination helps in normalizing the thyroid function in hypothyroidism.

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EFFECT OF SARVANGA SWEDANA ON BLOOD PRESSURE

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ABSTRACT :

Swedana karma is an essential part of purva karma chikitsa which is performed prior to vaman karma, virechan karma, vasti karma and nasya karma measures as well as pradhana chikitsa along with snehana karma. before swedana karma, rogi pariksha including dashvidha and ashtavidha pariksha are mandatory to assess the rogi bala. Now, blood pressure is an important part of patient's examination where high blood pressure and low blood pressure both the conditions cause hindrance for swedana karma. practically to know the effect of swedana karma on blood pressure, a pilot project was carried out in government ayurved college, Rewa (MP).

Key Words- *Swedana, Panchakarma, Rogi Bala, Astavidha Pariksha, Dashvidha Pariksha, Bloodmasure.*

INTRODUCTION:

Panchakarma is a five folds therapy i.e. Vamana Karma, Virechana Karma, Anuvasana Vasti, Niruha Vasti and Nasya Karma. All these five Karma are considered as Pradhana Karma whereas

Acharya has classified Karma as Purva Karma, Pradhana Karma and Pashchata Karma. All these three Karma or phases have their own importance. Pradhana Karma are the main procedures, specially design to eliminate the morbid Dosha from the body and Pashchata Karma are important to regain the normalcy after procedure while Purva Karma are important to perform prior the Pradhana Karma. These are the preparatory procedures. Main Purvakarma are – Pachana, Snehana and Swedana.

All these three Purvakarma have their own importance and mode of action. Pachana Karma is done to perform Ama Pachana. Before Panchakarma, Snehana Karma is performed to make the “Mala” unctuous and Swedana Karma to liquefy Mala, so that they may come to the circulation from the deeper tissues in the body and may come out through the body by Pradhana Karma.

In practice, before Shodhana Chikitsa like Vamana and Virechana, Abhyanga with Taila and Sarvanga Swedana with Kashaya Vashpa is done as Purvakarma along with Abhyantara Snehapana. Generally Abhyanga with oil applied in whole body in seven positions for about 30 min. then

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Vashpa Swedana with Sarvanga Peti is done according to the season and Bala of patient or Swedotpatti Lakshana.

Prior to Swedana Karma, many precautions should be taken in consideration like physical examination of patient to access the Bala. In that criteria blood pressure is mandatory.

In practice, patients with both the conditions (low BP and high BP) are not considered fit for Sarvanga Swedana. While during Shodhana Karma such as Vamana and Virechana, Sarvanga Swedana is essential for one day and for three days respectively along with the same day on which, shodhana would have to be performed.

Beside these Shodhna Chikitsa in many other conditions like Sandhivata, Pakshaghata, Gridhrasi etc in which Swedana Karma is treatment of choice, high and low blood pressure are the barrier for Sarvanga Swedana.

Plan of study – To find out whether high or low blood pressure have any relation with Sarvanga Sweda, A pilot project was designed in the hospital of Government Ayurved College Rewa MP, in which some patients of various diagnosed conditions already advised for Sarvanga Swedana were selected randomly and their blood pressure prior to Swedana Karma and after Swedana Karma was measured. Their blood pressure was also measured after 15 minutes of taking rest to check sudden effect and after effect of Swedana on their blood pressure.

Symptoms of proper Swedana Karma-

शीतशूलब्युपरमे स्तम्भ गौरव निग्रहे ।

संजाते मार्दवे स्वेदे स्वेदनाद्विरतिर्भता ।।

– (च.सू.14/13)

Fomentation should be stopped when cold and pain subsides, stiffness and heaviness are controlled, softness and sweating produced.



Sarvang Swedana



Observation-

Sample no.	Age(yrs)/ Sex	Diagnosis	BP mm of Hg before Swedana	BP mm of Hg just after Swedana	BP mm of Hg after 15 min of Swedana
1	30/M	Pakshaghata	130/90	150/110	120/90
2	40/F	Amavata	110/70	120/80	90/70
3	57/M	Pakshaghata	140/80	130/80	110/70
4	40/F	Amavata	100/70	120/80	100/80
5	30/M	Amavata	100/70	110/80	100/70
6	53/M	Katishoola	130/90	140/90	120/80
7	50/F	Gridhrasi	120/70	110/80	120/80
8	45/F	Kampavata	120/70	120/80	120/80
9	45/F	Udara Vikara	110/80	110/70	100/80
10	49/F	Sandhivata	120/80	130/90	120/90
11	50/F	Gridhrasi	120/80	110/80	110/80
12	40/F	Sandhivata	160/100	170/110	160/110
13	45/F	Kampavata	120/80	120/90	110/80
14	49/F	Sandhivata	110/80	120/80	110/80
15	45/F	Udara Vikara	110/80	110/80	110/80

As per the observations shown in the above table, blood pressure of most of the patients, just after Swedana Karma was slightly and relatively raised, which comes down after taking rest. Although some patients were remained having slightly and relatively raised blood pressure even after rest but it was not up to the limit that may lead complications.

DISCUSSION :

Effect of Sarvanga Swedana on the body can be understood with two factors which run side by side –

1. Heating stress
2. Heat.

Due to increased temperature or heating or variation of temperature may

activate sympathetic nervous system. High temperature stresses the body, causing this system to activate the “flight or fight” response. The body reacts with a variety of symptoms including pupil dilation, increase sweating, increase heart rate and increase blood pressure. In this way, Swedotpatti as well as rise in blood pressure are the consequences of high temperature through sympathetic nervous system.

According to Council of physical therapy- The effect of heat on the blood volume and circulation. H.C.Bazett, M. D. Philadelphia. Dept. of Physiology, University of Pennsylvania School of Medicine, - In such an analysis of the effect of heat, it is necessary to distinguish

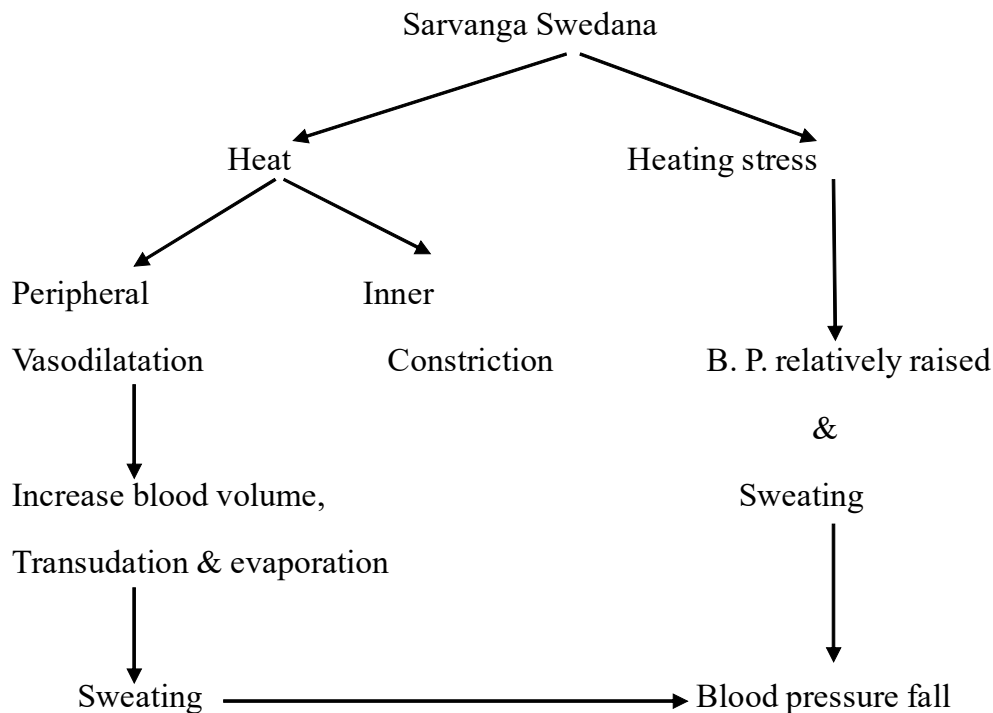


the parts played by-(i) local dilatation in the cutaneous vessels with its accompanying local increase in the rate of flow, capillary pressure and fluid transudation (ii) compensatory reduction of the vascular bed in areas other than the skin, which allows dilatation in the cutaneous vessel, even when the blood volume is unchanged or reduced (iii) increase in blood volume on exposure to heat which form an alternative method of compensation in lieu of vasoconstriction (iv) altered cardiac output.

In the review of above, heating of the whole surface of the body should increase the blood content of the skin, such a redistribution of blood demands, either an

increase in blood volume or a compensatory reduction of the vascular bed in other areas.

The vasodilatation in the skin is accompanied by a considerable rise in capillary pressure, as has been demonstrated by Landis*. (Landis E.M.-capillary pressure and capillary permeability, *Physiol. Rev* 14:404 July 1934) and the increase in the capillary pressure affects fluid transudation, so that edema may accumulate under appropriate condition at a more rapid rate at the higher temperature. In the skin such fluid transudates must increase the moistness of epidermis and so increase fluid loss by evaporation.





Symptoms of excessive Swedana Karma-

पित्तप्रकोपो मूर्च्छा च शरीरसदनं तृशा ।

दाहः स्वेदांग दौर्बल्यमतिस्विन्नस्य लक्षणम् ।।

—(च.सू.14 / 14)

Vitiation of Pitta, fainting, malaise, thirst, burning sensation, weakness of voice and organs- these are the symptoms of over fomentation.

Symptoms of Swedana Atiyoga are just like heat exhaustion that occurs when the body loses a large amount of fluid resulting from heat loss mechanism. This actually happens when environmental temperatures are high. Although a normal body temperature is maintained, the loss of water and electrolytes can cause weakness, vertigo (dizziness), nausea and possibly loss of consciousness. Heat exhaustion may also be accompanied by skeletal muscle cramps that are often called heat cramps. Heat exhaustion is treated with rest in the cool environment along with fluid replacement.

Manobala (Satva) of patient also plays an important role. Pravara Satva patients generally do not face the heating stress so there may be very little variation in their blood pressure before and after Sarvang Swedana because of the stress. Heat is the only factor that is responsible for any changes in blood pressure.

CONCLUSION-

High temperature can cause blood pressure to plummet, just as it can make

blood pressure high, then water loss through sweating impacts the body in various ways, including decrease in blood volume, low blood pressure and rapid heart rate. So, Sarvang Swedana should be avoided in the person with low blood pressure. Nadi Swedana can be indicated in such cases to avoid the heating stress of Sarvang Swedana. “As well as a person with hypertension may need medical attention”.

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अग्नि पुराण मे वर्णित- नानारोगों को हरण करने वाली औषधियों का विवेचन

— सुमन मिश्रा¹

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प्रस्तावना —

भगवत आचार्य यास्क ने कहा है कि “पुरा नवं भवति इति पुराणम्”।¹ सभी प्रकार के ज्ञान का संग्रह पुराण में होता है। मुख्य पुराणों में 18 प्रकार के पुराण हैं उनमें से एक पुराण अग्नि पुराण है जिसमें सभी प्रकार के ज्ञान का संग्रह है तथा यह प्राचीन पुराण है इसमें अनेक विषय आते हैं जैसे— मूर्ति विधान, वास्तुविधान, मन्त्र तंत्र विज्ञानम् और उद्योगोपचार तीर्थ महात्म व्रत आदि। इसी में औषधि विज्ञानम् का भी विस्तार से वर्णन किया गया है। मैं अपने इस शोध पत्र में अग्नि पुराण में वर्णित नाना रोगों को हरण करने वाली औषधियों की ओर अपने विचार रख रही हूँ। अग्नि पुराण—3 में आयुर्वेद की उत्पत्ति से लेकर विविध रोगों, विविध चिकित्सा योगों को विविध प्रकार से दर्शाया गया है तथा अग्निपुराण में 279 से 283 अध्याय तक औषध विज्ञान का निरूपण है, इसके बाद मन्त्ररूप औषधि विचार है।

आयुर्वेद की व्युत्पत्ति— आयुषो वेदः आयुर्वेदः
अर्थात् आयु सम्बन्धी वेद को आयुर्वेद कहते हैं—

तत्रायुर्वेद यतीत्यायुर्वेदः।²

—(च0सू0 30 / 23)

यह शास्त्र आयु का ज्ञान कराता है अतः
इसे आयुर्वेद कहते हैं।

आयुरस्मिन् विद्यतेऽयुर्विन्दतीत्यायुवेदः।

— (सु0सू0 1 / 23)(3)

आचार्य सुश्रुत के अनुसार आयु के हित एवं अहित का ज्ञान तथा दीर्घायु प्राप्ति के उपायों की विशद चर्चा जिस शास्त्र में हो वह आयुर्वेद है।

चरक के अनुसार आयुर्वेद की परिभाषा—

हिताहितं सुखं दुःखमायुस्तस्य हिताहितम्⁴
मानं च तच्च यत्रोक्तमायुर्वेदः स उच्यते॥

—(च0सू0 1 / 41)

जिस शास्त्र में हितायु, अहित आयु सुखायु और दुःखायु तथा उस आयु के लिए जो हितकर (पथ्य) अथवा अहितकर (अपथ्य) है आयु का मान (अल्पायु या दीर्घायु) और उसके लक्षणों (श्वसन, पाचन, उत्सर्जन एवं रक्त परिवहन आदि क्रियाएँ) का वर्णन जिसमें होता है उसको आयुर्वेद कहते हैं।

आयु के ज्ञान, संरक्षण और पोषण के लिए जो विद्या ऋषियों ने बनाई वही आयुर्वेद नाम से संसार में प्रसिद्ध हुई। आयुर्वेद में मानवों के साथ साथ प्रकृति संबंधी वृक्ष, पशु पक्षी लताओं के भी आरोग्यता के लिए लाभ के उपाय तथा मानव कैसे निरोगी जीवन व्यतीत कर सकते हैं इसके उपाय भलिभांति बताये गये हैं। अग्नि पुराण में कहा है —

शालिहोत्रः सुश्रुताय हयायुर्वेदमुक्तवान्।⁵

पालकोऽप्यंगराजाय गजायुर्वेदमब्रवीत्।

—(अग्निपुराणम् अ0292)

इस विषय का एक प्रमाण पंचतंत्र में भी उपलब्ध है⁶

¹संहिता संस्कृत एवं सिद्धान्त विभाग, उत्तराखण्ड आयुर्वेद विश्वविद्यालय, ऋषिकुल परिसर, हरिद्वार।



अग्नि पुराण में सब रोगों को हरण करने वाली औषधियों का वर्णन किया गया है जिसमें औषधियों के प्रभाव से मानस रोग, कायिक रोग और उपाधि रोग नष्ट हो जाते हैं इसके प्रमाण सुश्रुत आदि ग्रन्थों में भी प्राप्त होते हैं। इसमें शरीर विज्ञान भी निर्दिष्ट करता है जैसे—

नाभेरुर्ध्वमधश्चैव गुदश्रोण्योस्तथैव च।⁷

बलासपित्तवातानां देहे स्थानं प्रकीर्तितम्।।

इस विषय में दोष स्थान निर्दिष्ट किये गये हैं। जैसा कि सुश्रुत में भी अपनी संहिताओं में निरूपित किया है—

दोषस्थानान्यत उर्ध्वं वक्ष्यामः। तत्र समासेन वातः श्रोणिगुदसंश्रयः, तदुपर्यधो नाभेः पक्वाशयः पक्वामाशय मध्यं पित्तस्य, आमाशयः श्लेष्मणः इति।⁸

अध्याय औषध विज्ञान में सब रोगों को हरण करने वाली औषधि पर विचार किया गया है। प्रारम्भ में भगवान धनवन्तरि ने चार प्रकार के रोग बताये हैं— शारीरिक, मानसिक, आगन्तुक, सहज। इनका विभाजन इस प्रकार किया है—

शारीरिक— ज्वर, कुष्ठ आदि

मानसिक— क्रोध आदि

आगन्तुक— विघातोत्थ रोग

सहजा— क्षुतजरादि रोग

शरीर में आने वाले रोगों की निवृत्ति के लिए रविवार के दिन गुड़, घी, लवण साहिरण्य को ब्राह्मण को दान देना चाहिए इसी प्रकार सोमवार और शनिवार को विभिन्न प्रकार के दान देने से रोगों की शान्ति हो जाती है जैसा कि कहा गया है—

शारीरागन्तुनाशाय सूर्यवारे घृतं गुडम्।

लवणं साहिरण्यं च विप्रायाऽर्च्यं समर्पयत्।

चन्द्रे चाभ्यऽगदो विप्रे सर्वरोगैः प्रमुच्यते।।⁹

चिकित्सकों को देशकाल बलशक्ति भैषजबल का अनुसरण करके औषधियों का प्रयोग करना चाहिए। चतुर्थी, नवमी, चतुर्दशी इन रिक्त तिथियों का त्याग करना चाहिए। अथर्ववेद में भी भैषज सूक्त में प्रतीक उपचार मंत्र उपचार रूप से होते हैं जिससे आरोग्यता और प्राण रक्षा होती है। औषधियों के उपचार में देशकाल पर विचार अवश्य करना चाहिए अन्यथा औषध उपचार ठीक से नहीं होता है। इस वर्तमान समय में चिकित्सक ना तो खगोल चिन्ता करते हैं ना ही देवग्रहों का स्मरण करते हैं।

सर्वप्रथम रोगी व्यक्ति की प्रकृति की चिन्ता करनी चाहिए रोगी वात प्रकृति, पित्त प्रकृति अथवा कफ प्रकृति का है जैसे कि यदि व्यक्ति पित्त प्रकृति का है तो पित्त गर्म होता है अतः उसे कटु रस का प्रयोग नहीं करना चाहिए। कफ जनित रोगों में स्निग्ध, मधुर औषधियों का प्रयोग नहीं करना चाहिए अन्यथा रोगों का प्रकोप बढ़ता है। मधु अम्ल औषधियां कफ कारक होती हैं। परन्तु यह औषधियां वायु नाशक होती हैं। कटु तिक्त कषाय औषधियों से वायु विकार होता है परन्तु कफ निवारक भी होती हैं। अतः रोग निदान और विपाक का विचार करके द्रव्यगुण विज्ञान के अनुसार प्रायः औषधियों का प्रयोग होता है।

अग्नि पुराण में आयुर्वेद के विषय विशेष रूप से 17वें अध्याय में प्रतिपादित है—सिद्ध औषध वर्णन, सब रोगों को हरण करने वाली औषधियों का विवरण, रसादि लक्षण प्रकरण, वृक्षायुर्वेदप्रकथन मन्त्र रूप औषध कथन, मृतसंजीवन योग व्याख्यान, मृत्युन्जयकल्पप्रकथन, गज चिकित्सा कथन, अश्व वाहन सार कथन, अश्व चिकित्सा वर्णन, गज शान्ति कथन, गवायुर्वेद कथन, दन्तचिकित्सा वर्णन



इत्यादि। यद्यपि अग्नि पुराण में उपलब्ध यह वर्णन आयुर्वेद के अन्य ग्रन्थों से प्राचीन नहीं है फिर भी इनकी उपेक्षा नहीं कर सकते हैं क्योंकि यह विषय लोक हित के कारण ही रखे गये हैं।

सर्वप्रथम ज्वर से सन्तप्त व्यक्ति को क्या खाना चाहिए इस संबंध में पथ्य विषयक जिज्ञासा कही गई है—

जीर्णाः षष्टिकनीवाररक्तशालिप्रमोदकाः
तद्विधास्ते ज्वरेष्विष्टा यवानां विकृतिस्तथा ॥
मुदगा मसूराश्चणकाः कुलत्थाश्च सकुष्टका ॥
आढक्यो लावणकाद्याश्च कर्कोटककटोलकम् ॥
पटोलं सुफलं निम्बं पर्पटं दाडिमं ज्वरे ॥¹⁰

दांतो की चिकित्सा के विषय में भी अग्नि पुराण में कहा गया है—

शीततोयान्नपानं च तिलानां विप्र भक्षणम् ।
द्विजढार्यकरं प्रोक्तं तथा तुष्टिकरं परम् ॥
गण्डूषं तिलतैलेन द्विजदाढर्यकरं परम् ॥¹¹

अन्य भी सभी रोगो जैसे व्रण चिकित्सा, सूतिका चिकित्सा, केश चिकित्सा, वृश्चिक दंशचिकित्सा, श्वविषचिकित्सा, लूतादिकीटविषचिकित्सा, सर्पविष चिकित्सा इत्यादि का ठीक प्रकार से वर्णन अग्निपुराण में किया गया है।¹²

चिकित्सक वैद्य और भिषक रोगी का रोग देशकालबल और प्रकृति तथा औषधि की भी प्रकृति बल और अबल को जानकर ही चिकित्सा करते हैं ऐसा निर्देश अग्नि पुराण में किया गया है—

देशमातिं बलं शक्तिं कालं प्रकृतिमेव च ।
ज्ञात्वा चिकित्सतं कुर्यात् भेषजस्य तथा
बलं ॥¹³

मनुष्य, पित्त प्रकृति, कफ प्रकृति और वात प्रकृति के होते हैं वायु प्रकृति के बारे में कहा गया है कि
कदन्भोजनाद्वायुद्रेहे शोकश्च कुप्यति ॥¹⁴

इसी प्रकार कटुतिक्तकषाय रसों के भोजन सेवन से मनुष्य का पित्त प्रकोप होता है तथा अधिक जल पीने से स्निग्ध भोजन से कफ प्रकोप होता है। धातु प्रकोप के अनुसार ही औषधि उपचार करना चाहिए। वायुजनित रोगों से अस्थिभंग, मुखशोषण, जृम्भा हो जाते हैं जैसे—

अस्थिभंगः कषायत्वमास्यं शुष्कास्यता तथा ।
जृम्भणं रोमहर्षश्च वातिकव्याधिलक्षणम् ॥¹⁵

नखों, नेत्रों और नाड़ी का पीला होना, मुख का कड़वा होना, अधिक प्यास लगना, शरीर में दाह होना पित्त जनित रोगों के लक्षण होते हैं। जैसे—

नखनेत्रशिराणां नु पीतत्वं कटुता मुखे ।
तृष्णा दाहोष्णता चैव पित्तव्याधिनिदर्शनम् ॥¹⁶

इस प्रकार आलस्य, प्रसेक, गुरुत्वं मुख में माधुर्य इत्यादि लक्षणं कफ जनित रोगों के होते हैं। कहा भी गया है—

कफं शत्रुवत्, वायुं मित्रवत् पित्तं च
जामातृवत् इव शमयेत् ।

अग्नि पुराण में कहा भी गया है कि वात रोग निवारण स्निग्ध उष्णतेलः अभ्यंग से होता है तथा घृतदुग्ध शर्करा चन्द्र किरण सेवन से पित्त जनित रोग नष्ट हो जाते हैं मधु त्रिफला घृत से और व्यायाम सेवन से कफ रोग शान्त हो जाते हैं।

इस प्रकार आयुर्वेद ग्रन्थों में और पुराणों में औषधि द्वारा उपचार की उपयोगिता दिखाई देती है जो कि आधुनिक चिकित्सा विज्ञान में नहीं दिखाई देती है आयुर्वेद में आरोग्य चिन्ता लगातार की जाती है कैसे मनुष्य 100 वर्ष की आयु प्राप्त करे ये चिन्ता की जाती है। अग्नि पुराण के अनुसार नाना रोगों को हरण करने वाली औषधियों का धनवन्तरि के द्वारा निर्दिष्ट किया गया है। कुष्ठ रोग में वाकुची सतिला एक वर्ष तक खाने से यह रोग ठीक हो जाता है प्लीहा रोग में वासगर्भो एरण्ड तेल



युक्त क्वाथ और पिप्पली भी इस व्याधि को नष्ट करने में उपकारक होती है। वातरक्त रोग में विडंग सेवन हितकारी होता है। पाण्डु रोग में त्रिफलामृतानिम्ब का क्वाथ प्रभावकारी औषधि है रक्त पित्त रोग में वासारस शीत मधु प्रभावकारी औषधि है। सब रोगों के निवारण के लिए त्रिफला को मधु के साथ तथा शर्करा में मिलाकर खाने से सब रोग नष्ट हो जाते हैं। इसी प्रकार चित्रकशुण्डगुडूची सर्वरोग हरण में पथ्यकारी औषधि है।

अन्त में धनवन्तरि कहते हैं कि लौकिक और पारलौकिक सिद्धि के लिए षट् कर्म उपयुक्त हैं। उनमें मंत्र, ध्यान, औषधि तथा इज्या हैं। पुराणकार कहते हैं कि हरिस्मरण, हरिपूजन, हरिध्यान सब रोगों को शान्त करने का परम औषधि उपचार है। कहा भी गया है—

“सर्वरोगप्रशान्त्यै स्माद्विष्णोर्ध्यानं च पूजनम्।”

इस प्रकार आयुर्वेद में रोगी की प्रकृति ऋतुकाल रोगीनिदान और औषधि उपचार की चिन्ता की जाती है। स्पष्ट है कि अग्नि पुराण में वर्णित—नाना रोगों को हरण करने वाली औषधियों का विवेचन एवं आयुर्वेद तत्वों का विशद रूप से वर्णन किया गया है।

संदर्भ ग्रन्थ—सूची :

1. यास्कनिरुक्तम् अ० 3 पा० 4 पृ० 147
2. च०सू० 30/23
3. सु०सू० 1/23
4. च०सू० 1/41
5. अग्निपुराणम् अ० 292
6. अत्रान्तरे राजा सविषादः शालिहोत्रज्ञानवैद्यानाहूय प्रोवाच भोः भोः प्रोच्यतामेषामश्वानां कश्चिद्दाहमोपशमनोपायः। तेऽपि शास्त्राणि

विलोक्य प्रोचुः— देव प्रोक्तमत्र विषये भगवता शालिहोत्रेण यत्—कपीनां मेदसा दोषो वहिग्निदाह समुद्भवः। अश्वानां नाशमभ्येति तमः सूर्योदये यथा। पञ्चतन्त्रम्— 5.75

7. अग्निपुराणम्—280—34—3
8. सुश्रुत संहिता, सूत्र स्थान
9. अग्निपुराणम्—280,2—3
10. अग्निपुराणम् 379—5,6,7
11. अग्निपुराणम्—379.41—42
12. अग्निपुराणम्—379.279
13. अग्निपुराणम्— 280 / 10—11
14. अग्निपुराणम् 280,49
15. अग्निपुराणम् 280,44
16. अग्निपुराणम् 280,54



आयुर्वेदिक दिनचर्या का केश स्वास्थ्य में महत्व

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प्रस्तावना —

आजकल की जीवनशैली और पर्यावरण प्रदूषण में भारी बदलाव के कारण बालों की समस्या एक बहुत ही आम समस्या बन गई है। बालों को भी चेहरे की तरह ही स्वास्थ्य का दर्पण माना जाता है। इसलिए बालों को स्वस्थ बनाए रखना पूरी तरह से मनुष्य का कर्तव्य है। बालों के साथ साथ शिर की देखभाल भी आवश्यक है, क्योंकि यह बालों के स्वास्थ्य और स्थिति को निर्धारित करता है और शिर और बालों के रोगों को भी रोकता है। आयुर्वेद में बताया गया है कि बालों की देखभाल कैसे की जाती है और दिनचर्या के अंतर्गत बालों की समस्याओं के लिए सुरक्षित, प्रभावी और कम खर्चीले उपायों की भी सिफारिश की जाती है, जैसे कि अभ्यंग, स्नान, नस्य, धूपन इत्यादि। इस शोध पत्र में वर्तमान युग में उनके महत्व पर विस्तृत विवेचन किया जायेगा।

विषय कुंजी— बालों की देखभाल, आयुर्वेद, दिनचर्या, दैनिक आहार।

परिचय—

बहुत मोटे, लंबे और अत्यधिक रंजित केशवाले व्यक्ति अन्य व्यक्तियों से अद्वितीय एवं आकर्षक दिखते हैं। बालों की उपस्थिति और Morphology को मानव आबादी के अलग-अलग लक्षणों में से एक माना जाता है।¹ बालों की देखभाल और केशरचना ने हाल के कुछ वर्षों में खासकर किशोरों के बीच बहुत अधिक महत्व प्राप्त किया है। यह

देखा गया है कि आधुनिक समय के स्टाइल के तरीकों और विभिन्न हेयर केयर उत्पादों के उपयोग के परिणामस्वरूप बालों का झड़ना शुरू हो जाता है और इससे बालों को नुकसान भी होता है। यह साबित हो गया है कि strengtheners और कलम/रंजक के द्वारा एलर्जी या शिर में सूजन, और जलन उत्पन्न होती है और साथ में ही खालित्य, पालित्य, इन्द्रलुप्त जैसी व्याधि हो सकती है।^{2,3,4} इसके अलावा कलम/रंजक के उपयोग से कैंसर और कुछ अन्य प्रणालीगत बीमारी होने का भी खतरा रहता है।^{5,6} शोधकर्ता पटेल और उनके सहशोधकर्ता द्वारा अपने अध्ययन में 42% व्यक्तियों में सिरदर्द, खुजली, बालों के झड़ने जैसे प्रतिकूल प्रतिक्रिया देखी गई थी।⁷ आज की जीवन शैली और पर्यावरण प्रदूषण में भारी बदलाव के कारण बालों के विकार एक बहुत ही आम समस्या बन गई है। बालों को भी चेहरे की तरह ही स्वास्थ्य का दर्पण माना जाता है। इसलिए बालों को स्वस्थ बनाए रखना पूरी तरह से मनुष्य का कर्तव्य है। शिर की देखभाल करना भी आवश्यक है, क्योंकि एक साफ मस्तिष्क अच्छे स्वस्थ कोशिकाओं की वृद्धि करेगा और इष्टतम बाल विकास के लिए स्वस्थ वातावरण को बढ़ावा देगा। शिर की बाहरी त्वचा (Scalp) का बाहर निकलना, रोमकूप/रंधों के आसपास से मृत त्वचा कोशिकाओं को हटाने के लिए महत्वपूर्ण है और इस वर्तमान युग में एक शॉर्ट को बढ़ावा देने के लिए, वहाँ स्वस्थ कूप/रंधों की आवश्यकता होती है।

¹अनुसंधान अधिकारी (आयु.), ²अनुसंधान अधिकारी (आयु.), ³प्रभारी सहायक निदेशक, क्षेत्रीय आयुर्वेदीय त्वकरोग अनुसंधान संस्थान, विजयवाड़ा।



बालों और शिर की देखभाल के लिए आयुर्वेदीय चिकित्सीय तरीके -

बालों की देखभाल : बालों की देखभाल यह बालों की स्वच्छता और कॉस्मेटोलॉजी के लिए एक समग्र शब्द है। बालों की देखभाल और शिर की त्वचा की देखभाल अलग दिखाई दे सकती है, लेकिन वास्तव में वे आपस में जुड़े हुए हैं, क्योंकि बाल त्वचा के नीचे से उगते हैं। आयुर्वेदिक साहित्य में भी हजार साल पहले, बालों की देखभाल के लिए कई तरह के दैनिक कर्म को दिनचर्या के एक भाग के रूप में वर्णित किया गया है, जिसमें मूर्ध तैल, नस्य, स्नान, रसायन सेवन आदि जैसी प्रक्रियाएं शामिल हैं।⁹

शिराभ्यंग (बालों और शिर को तेल लगाना)— तेल को नियमित रूप से शिर (स्कैल्प) पर लगाना चाहिए, इसे मूर्ध तैल भी कहा जाता है। इस प्रक्रिया को नियमित रूप से अपनाने से शिर की मृत कोशिकाएं पुनर्जीवित हो जाती हैं, बाल स्वस्थ, काले और दृढ़ रहते हैं, नींद को प्रेरित करते हैं और खालित्य और पालित्य को दूर रखते हैं।

तेल बालों को नुकसान से बचाने में एक महत्वपूर्ण भूमिका निभाता है। कुछ तेल बालों में घुस सकते हैं और बालों में अवशोषित पानी की मात्रा को कम कर सकते हैं, जिससे सूजन कम हो सकती है।⁹ तेल छल्ली कोशिकाओं के बीच के अंतर को भर सकता है जिससे कूप/रंध्रो में इस तरह के संक्रामक पदार्थों को रोका जा सकता है।

नियमित रूप से तेल लगाने से बालों की रुक्षता कम हो जाती है और इस तरह बालों को टूटने से रोकने में मदद कर सकती है। 2003 में Rele AS, Mohile RB ने बालों पर खनिज तेल, नारियल तेल और सूरजमुखी तेल के गुणों का अध्ययन किया।¹⁰, इन तीन तेलों में से, नारियल का

तेल एकमात्र ऐसा तेल था, जो बिना धोए और क्षतिग्रस्त बालों के लिए प्रोटीन के नुकसान को कम करने के लिए पाया जाता था।¹¹ हल्के गरम तेल को पहले शिर पर लागू किया जाना चाहिए, इसके बाद पूरे शिर की त्वचा पर लगाकर हल्का हल्का मालिश करना चाहिए। यह शिरोरोग में मदद करता है, बालों को पोषण देता है जिससे वे चिकने, लंबे, मोटे और काले रंग के हो जाते हैं।^{12,13}

स्नान (बाल और शिर त्वचा की सफाई)— चरक के अनुसार स्नान पवित्र, शक्तिवर्धक, कामोद्दीपक, शरीर से थकान, पसीने वाली हानिकारक चीजों का निष्कासन करने वाला और जीवन को बढ़ाने वाला होता है।¹⁴ सुश्रुत ने बालों के झड़ने के संदर्भ में शिरस्नान की कुछ अतिरिक्त जानकारी दी है, जिसमें सिर और बालों को गर्म पानी से या बहुत ठंडे पानी से नहीं धोना चाहिए, ऐसा उल्लेख है। उन्होंने कहा कि अरोमा में स्नान, मौसम और भौगोलिक वितरण के अनुसार किया जाना चाहिए, लेकिन गर्म पानी के साथ शिरस्नान में हमेशा से बचना चाहिए।¹⁵ आचार्य वाग्भट्ट कहते हैं कि शरीरपर गर्म पानी डालने से ताकत बढ़ती है, लेकिन सिर के ऊपर गर्म पानी डालने से बालों और आँखों को नुकसान करता है।¹⁶ शिर के अतिरिक्त सीबम को साफ करने और फॉलिकुलिटिस और सेबोरहाइक डर्मेटाइटिस के विकास को रोकने के लिए शिर की सफाई करना अत्यंत महत्वपूर्ण है। यह सीबम, पसीना और बालों में अटके पर्यावरणीय गंदगी से छुटकारा पाने का अच्छा उपाय है। शैंपू एक तरह के तरल क्लींजर (liquid cleanser) होते हैं जो वास्तविकतया बालों और शिर की सफाई के लिए उपयोग में लाये जाते हैं। प्राकृतिक क्लींजिंग प्रतिनिधि (agent) जैसे रीटा, शिकाकाई आदि अतिरिक्त रासायनिकघटकों के बिना होते हैं और उपयोग के लिए बहुत सुरक्षित होते हैं। पुराने दिनों



में, बच्चों के बालों को चना दाल पाउडर से साफ किया जाता था जो अत्यधिक सुरक्षित और गैर एलर्जी था और शैंपू की तुलना में बहुत हल्का था।

धूपन – हेयर ड्रायर के इस्तेमाल से सूखने वाले बालों की सतहों को ज्यादा नुकसान होता है। आमतौर पर हेयर ड्रायर का उपयोग करने की तुलना में प्राकृतिक तरीके से बाल सुखाने, नरम टावल के साथ गिले बालोंकी बूंदों को कोमलता से पोंछने के बाद सामान्य तापमान के संपर्क में बाल अधिक सुरक्षित होते हैं, ऐसा माना जाता है।¹⁷ परंपरागत रूप से बालों को धूप में सूखाया जाता है। औषधि पाउडर जलते कोयले के टुकड़ों पर छिड़का जाता है। परिणामी सुगंधित धुएं को बालों को कोमलता से पोंछने के बाद उसके ऊपर अन्दर फैलाया जाता है। सौम्य धुएं की खुशबू बहुत दिनों तक बालों में रहती है। यह प्रक्रिया एंटीमाइक्रोबियल और संक्रामक रोगों को रोकने का कार्य करता है। यह बालों को तेजी से सुखाने में सहायक होता है। इसके अलावा यह शिर और चेहरे से अतिरिक्त पानी खींचता है और टंड और प्रतिश्याय को रोकने में मदद करता है।

संप्रसादन– आचार्य चरक के अनुसार, शिर और दाढ़ी के बालों का बाल काटना (कल्पन) और उचित ढंग से बांधना (संप्रसाधन) नियमित रूप से किया जाना चाहिए।¹⁸ आचार्य सुश्रुत कहते हैं कि बालों का प्रबंधन (केश प्रसाधन) करना चाहिए। यह केशप्रसादनी (कंधी और ब्रश) के साथ किया जाता है। आचार्य कहते हैं कि नियमित रूप से बाल काटने से व्यक्ति को शक्ति, प्रसन्नता, हल्कापन प्राप्त हो सकता है।¹⁹ आचार्य सुश्रुत कहते हैं कि बालों को ऊंगली, नाखूनों से नहीं खींचना चाहिए और न ही जोर से या हाथोंसे रगड़ना चाहिए और बालों को हवा में भी नहीं हिलाना चाहिए। अनावश्यक टूटने से बचने के लिए बालों को धोने के बाद बालों

की उलझन को हटाने के लिए ब्रश के बजाय कंधी का उपयोग करना चाहिए। तेल का उपयोग बालों के घर्षण को कम करता है। नारियल तेल से बालों को संवारने से बालों पर सुरक्षात्मक प्रभाव डालता है और साथ ही बालों के नुकसान से भी बचाता है।

उष्णिक– उष्णिक (पगड़ी) पहनने से बालों को हवा, गर्मी, धूल आदि से बचाया जाता है और कहा जाता है कि यह बालों के लिए पवित्र और फायदेमंद है।²⁰ हजारों साल पहले, योगियों और आध्यात्मिक साधकों ने पाया कि सिर के शीर्ष पर स्थित बाल दसवें द्वार को धूप और जोखिम से बचाते हैं। पुरुषों और महिलाओं के लिए सौर केंद्रों पर बालों को सहलाना या गाँठना ऊर्जा को केंद्रित करता है और पूरे दिन आध्यात्मिक कंपन को बनाए रखने में मदद करता है। पगड़ी का दबाव मस्तिष्क में रक्त के प्रवाह के पैटर्न को भी बदलता है। बालों को बांधकर रखने से इसकी बनावट बरकरार रहती है। ढीले बालों की वजह से खुरदरापन होता है और प्रदूषित वातावरण के सीधे संपर्क में आने के कारण बालों के कोशिकाओं को नुकसान पहुंचाता है।

अन्य क्षेत्र–

नस्य : उचित विधि से उचित समय में किया गया नस्य व्यक्ति के नेत्र, कान और नाक को स्वस्थ रखती है। उस व्यक्ति के बाल जल्दी सफेद नहीं होते हैं, वह बाल गिरने से पीड़ित नहीं होता है। उनके बालों का विकास भी अच्छा होता है।²¹ यह नस्य के महत्व को दर्शाता है जिससे खालित्य और पालित्य जैसे बालों के रोगों को रोका जा सके।

धूमपान : इसे खालित्य और पालित्य को ठीक करने के लिए कहा जाता है, इससे सिर और इंद्रियों के स्वास्थ्य में भी सुधार होता है।²², आचार्य सुश्रुत के अनुसार औषधीय धुएं के कारण सिर,



दाढ़ी के बालों और दांतों की दृढ़ता में सुधार होता है।²³, आचार्य भावमिश्र ने कई औषधियों जैसे भृंगराज, आमलकी, कृष्णतिल, गुंजा आदि का वर्णन किया, जो मुख्य रूप से बालों पर काम करते हैं।²⁴, आचार्य द्वारा आयुर्वेदसंहिता में हस्तिदंत मशी का लेप केश क्षय में (पेस्ट प्रकार स्थानीय अनुप्रयोग) और मौखिक दवाओं का वर्णन किया है।²⁵,

निष्कर्ष—

बालों की देखभाल के लिए कई प्रकार के दैनिक प्रक्रियाओं का वर्णन आयुर्वेद संहिता ग्रन्थ में किया गया है। उपरोक्त नियमों के साथ-साथ प्राकृतिक प्रतिनिधि जैसे कि हस्तिदंतमशी, मेंहदी, रीठा, शिकाकाई, आमला और गुंजा आदि अन्य को आयुर्वेद में स्पष्ट रूप से समझाया गया है, जिसका उपयोग बालों की पुष्टि के लिए या अन्य केशगत व्याधि से बचने के लिए दिए गए हैं। इस तरह बालों को स्वस्थ स्थिति में रखने के लिए आयुर्वेदिक ग्रंथों में एक उचित दिशा-निर्देश है। बालों की देखभाल और बालों की समस्या की रोकथाम के लिए इन दैनिक चर्या जैसे मूर्धतैल, नस्य, स्नान, लेपन, क्षारकर्म, उष्णिक आदि का भी सुझाव दिया गया है, जो आज के आधुनिक युग में भी उतने ही प्रभावी हैं, जितना बालों का स्वास्थ्य बनाए रखने के लिए भूतकाल में प्रभावी थे। स्वस्थ बालों की देखभाल के लिए दिनचर्या का आचरण करना चाहिए।

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RELEVANCE OF SHAT KRIYAKALA IN DIAGNOSIS AND TREATMENT

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The term “Kriyakala” literally means “the time of action”. Kala in this context refers to the particular stage of the disease process, i.e. the Avastika type of classification of Kala. Kriya or action is to be understood as all those measures and interventions in the form of Ahara, Vihara and Oushadha done with the intention of restoring the balance of Tri-Doshas and maintaining health. The various changes in the form of etiopathogenesis occurring in the body beginning with the inception, to the complete manifestation of symptoms and extending onto the complications of a disease represent an evolutionary process with distinct steps of transformation in the body elements. The Shat Kriyakala concept put forward in Sushruta Samhita encompasses all these transformative steps in the disease progression and the knowledge of Kriyakala is useful in diagnosing the ongoing disease pathology in the earlier stages of progression itself, so that appropriate treatment measures can be adopted at the earliest to stop the further development of the disease.

Relavance of the Context of Shatkriyakala

Before going into the concept proper, understanding the context in which Shat

Kriyakala is dealt with (using the Adikarana Tantrayukti) provides some insight on its applicability, which is the purpose of this essay as well. Acharya Sushruta has explained the concept of Shat Kriyakala in 21st chapter of Sushruta Samhita Sutrasthana – ‘Vranaprashnamadhyaayam’. Context of the Shat Kriyakala in Sushruta Samhita itself hints at its necessity in Shalyatantra as various types of diseases exclusively dealt under the branch of Shalyatantra present with some external morbidity produced as a result of either injury or vitiation of Tridoshas, for example Vrana, Vidradhi etc. The wounds and other morbidities presenting with external features take longer duration for healing and also present with various complications which require surgical interventions. Hence the knowledge of Kriyakala helps the physician to be aware of the forthcoming manifestations and to treat it at the earliest to prevent the condition from worsening. The concept of Shat Kriyakala is however not just limited to Shalyatantra as Acharya Sushruta also clearly explains the features of various systemic illnesses and diseases falling under the purview of Kayachikitsa

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under Shat Kriyakala.(Jwara , Atisara etc.) Moreover the Shat Kriyakala is an elaboration of the Kriyakala of Charaka which comprises of 3 stages- Chaya, Prakopa and Prashama. The context of Shat Kriyakala in the Sutrasthana signifies that it is one of the fundamental concepts that a person learning Shalyatantra/Ayurveda must be aware of before learning about the individual diseases, their Nidana, and Chikitsa. The context of Shat Kriyakala is 21st chapter of Sutrasthana - Vranaprashnam Adhyaya, i.e. after Hitahiteeyam Adhyaya (Sutrasthana 20th chapter) which explains about the Hita and Ahita ahara and vihara, the Ekanta Hitatama dravyas, the concepts of Viruddha and Satmya. In the Vranaprashnam Adyaya (Sutrasthana 21st chapter) the detail explanation of Tridoshas, their sthana, gunas and subtypes and their specific functions have been mentioned before explaining the Shat Kriyakala. And the chapter that follows is Vranasravam Adyaya(Sutrasthana 22nd chapter) which deals with Vrana akruti, Vrana srava, Vrana vedana, Vrana varna etc. From this framework of chapters it can be understood that initially Sushruta explains about Hita tama dravyas and concept of Satmya with a view to educate the learners regarding the diet and regimen which are most conducive for maintaining good health, and then Acharya Sushruta enlists Ahita dravyas and concept of Viruddha ahara so that with this the knowledge one can avoid Asatymendriyarthasamyoga and Pragyapradha which are the causes for

disease manifestation. Then Sushruta discusses the characters of tridoshas, and the various stages of Shat Kriyakala in Vranaprashnam adhyaya with the intention to normalize the derangement of Doshas at the earliest, which also occurs due to Kala (seasonal variations). Here word Vrana implies to Vatadi Doshas as it is the Doshas which are the cause for formation of Vrana and hence concepts regarding Vatadi Doshas are discussed in this chapter.

व्रणशब्देनात्र वातादय उच्यन्ते, व्रणकारणत्वात्; तेन वातादिविषयः प्रश्नो यस्मिन्नित्युक्तम् ।

– Commentary on Sushruta Sutra 21/1

And after understanding the stage wise involvement and progression of Tridosha morbidity, the descriptive aspects of Vrana i.e. Vrana srava akruti vedana etc are described in the subsequent chapter of Vranasravam Adhyaya. Hence the sequence of chapters and the order of the subject matter reiterate the fact that Ayurveda aims at स्वस्थस्य स्वास्थ्यरक्षणम् । first and then secondly आतुरस्य विकार प्रशमनम् । which is in tune with the common phrase “Prevention is better than Cure”.

SHAT KRIYAKALA AND ITS RELEVANCE IN DIAGNOSIS

The First KriyaKala – Sanchaya : It is the formative phase of the disease when the Dosha is accumulated and stagnated in its own place.

तत्र संचितानां खलु दोषाणां स्तब्धपूर्णकोष्ठता पीतावभासता मन्दोष्मता चाङ्गानां गौरवमालस्यं चयकारणविद्वेषश्चेति लिङ्गाना भवन्ति । {Su. Su. 21/18}



In Sanchaya avastha vague and ill-defined symptoms are produced and which can only be slightly evaluated in terms of Dosha vitiation. The example quoted by Acharya Sushruta which tells the symptoms and related Doshas - Sthabda poorna koshta -VATA Peeta avabhaasata - PITTA Manda ushmata , Anga Gourava , Alasya - KAPHA An interesting point to be noted here is that in Sanchaya avastha there is an aversion towards the factors that resulted in the Dosha sanchaya initially(Chaya Karana vidweshya) This is of much importance in diagnosis of Dosha involved in Sanchayavastha. For example in Hemantha Rutu due to Sheeta Guna there is Kapha Sanchaya naturally. A person in whom Kapha sanchaya occurs usually dislikes cold food items(Sheeta guna) and may prefer hot beverages and food(Ushna guna) as an aversion to the cold which caused it. This is an important diagnostic sign that can be observed in people.

The Second Kriyakala – Prakopa : In this stage the accumulated Dosha in its own place tends to become increased and excited. The factors responsible for Prakopa of each Dosha are mentioned in same chapter of Sushruta samhita which covers Ahara, Vihara, achara and seasonal and climatic variations in detail, the knowledge of which is important in preventing the progression of Sanchayavastha to Prakopavastha.

तेषां प्रकोपात् कोष्ठतोदसंचरणाम्लीकापिपासापरिदाहान्नद्वेषहृदयोत्क्लेदाश्च जायन्ते ।

- {Su. Su 21/27}

In this stage the connection between the symptoms and the Dosha involved can be clearly made out. As per the example given in the reference, Koshta toda and koshta sancharana – (VATA), Amlika, Pipasa, Paridaha – (PITTA), Annadweshya, Hrudayotkleda - (KAPHA), It must be noted here that from Sthabdapurna koshta to the Koshta toda, from Peetavabhasata to Paridaha, from Anga gourava to Hrudaya utkleda, there is an increase in the degree of severity of symptoms and clear expression of the Dosha dushti lakshana is seen and this is of great diagnostic importance.

Third Kriyakala – Prasara : The term Prasara conveys the meaning of spread from one location to another. In this Kriyakala the Prakopita doshas expand and overflow the limits of their respective places just like the overflow which occurs during the process of fermentation and the overflowing of an over full water dam. Vitiated Doshas are stated to spread from the Koshta and occupy organs and structures of the body.

एवं प्रकृपितानां प्रसरतां वायोर्विमार्गगमनाटोपौ, ओषधोषपरिदाहधूमयानानि पित्तस्य, अरोचकाविपाकाङ्गसादाश्छर्दिश्चेति श्लेष्मणो लिङ्गानि भवन्ति: तत्र तृतीय क्रियकालः ।

- {Su.su. 21/32}

In this stage with the increase in the degree of severity and variety of symptoms it becomes more evident that there is an imbalance in the homeostatis or



equilibrium of the Doshas. From Koshta toda to Atopa, from Paridaha to Osha and Chosa, from Annadwasha to Chardi the increase in severity of symptoms must be noted. And also it is in Prasara that the morbid Doshas interact with each other and may spread in unison.

This implies that from this stage onwards the symptoms represent multiple Dosha vitiation. i.e Samsarga and Sannipata lakshanas begins to manifest. For example, in the reference quoted above, Chardi is mentioned as one of the lakshana which may manifest in this stage. Chardi as we know involves both Pitta and Kapha dosha. This example indicates samsarga dosha lakshanas. Hence the relevance of the stage of Prasara in diagnosis lies in the fact that it becomes complex with more factors to consider, differentiate and exclude, and hence the condition must be diagnosed with caution as effectiveness of the treatment solely depends on the accuracy of diagnosis.

Fourth Stage of Kriyakala – Sthanasamshraya: In this stage of Kriyakala the aggravated Doshas having extended by spreading to other parts of the body, becomes localised and it marks the beginning of specific diseases related to the location where the doshas have localised. Dalhana explains that prakupita

doshas having extended and spread to parts beyond their own natural abodes, due to Sroto Vaigunya and then undergo Doshya-Dushya sammurchana i.e. there is an interaction between the dosha and dushya and wherever this takes place, a specific disease sets in and early symptoms begins to manifest.

अत ऊर्ध्वं स्थानसंश्रयं वक्ष्यामः। एवं प्रकुपितातांस्ताञ् शरीरप्रदेशानागम्य तांस्तान् व्याधीन् जनयन्ति। { Su. Su 21/33 }

The stage of Sthanasamshraya represents the “Purvarupa” or the prodromal phase of the disease which has yet to manifest fully. – पूर्वरूपमेव स्थानसंश्रयं लिङ्गम्।

Acharya Sushruta further enlists the possible diseases that may occur if the Doshas get localised in certain structures/body parts.

ते यदोदरसन्निवेशं कुर्वन्ति तदा गुल्म विद्रध्युदराग्नि-सङ्गानाहविसूचिकातिसारप्रभृतीञ्जनयन्ति; बस्तिगताः प्रमेहाश्मरीमूत्राघातमूत्रदोषप्रभृतीन्; मेद्वगता निरुद्ध-प्रकशोपदंशशूकदोषप्रभृतीन्; गुदगता भगन्दरार्शःप्रभृतीन्; वृषणगता वृद्धीः; ऊर्ध्वजत्रुगतास्तूर्ध्वजान्; त्वङ्मं-सशोणितस्थाः क्षुद्ररोगान् कुष्ठानि विसर्पाश्च; मेदोगता ग्रन्थ्यपच्यर्बुदगलगण्डालजीप्रभृतीन् अस्थिगता विद्रध्यनुशयीप्रभृतीन्; पादगताः श्लीपदवातशोणित-वातकण्ठकप्रभृतीन् सवाण्डगता ज्वरसर्वाङ्गरोग-प्रभृतीन्; तेषामेवमभिसन्निविष्टानां पूर्वरूपप्रादुर्भावः; तं प्रतिरोगं वक्ष्यामः।



Location of Dosha	Disease/ Symptoms produced
Udara	Gulma, Vidradhi, Udara roga, Agni sanga, Anaha, Visuchika, Atisara
Basti	Prameha, Ashmari, Mutraghata, Mutra dosha
Medra	Niruddhaprakasha, Upadamsha, Sookadosha
Guda	Bhagandara, Arsha
Vrushana	Vruddhi Roga
Urdhwa Jatru	Urdhwa jatrugata (Netra, Karna, Nasa, Mukha rogas etc)
Twak Mamsa Raktha	Kshudra Roga, Kushta, Visarpa,
Medogata	Granthi, Arbuda, Apachi, Galaganda, Alaji
Asthigata	Vidradhi, Anushayi
Padagata	Shleepada, Vataraktha, Vatakantaka
Sarvanga gata	Jwara, Sarvanga roga

The manifestation of disease depends upon the Sthana samshraya of Doshas at the site of Sroto vaigunya. The relevance of this stage of Kriyakala in diagnosis and treatment of diseases lies in the fact that understanding the stage of Sthanasamshraya makes the physician capable of evaluating the prodromal features (Purvarupa) present at this stage and comprehend the nature of the forthcoming disease. And by employing suitable measures the physician can stop the disease process from progressing, thereby saving the patient from untoward suffering.

Fifth Stage of Kriyakala – Vyakta: This stage may be stated to be that of manifestation of the fully developed disease. As a consequence of Dosha-dushya sammurchana, specific

symptomatology exhibits so that one can diagnose the ailment. For example Shopha, Arbuda, Granthi, Vidradhi, Visarpa, Jwara, Atisara etc. अत ऊर्ध्वं व्याधेर्दर्शनं वक्ष्यामः— शोफार्बुदग्रन्थिविद्रधिविसर्पप्रभृतीनां प्रव्यक्तलक्षणता ज्वरातीसारप्रभृतीनां च । तत्र पञ्चमः क्रियाकालः । {Su.Su. 21/34}

In Vyakthavastha the specific set of symptoms manifesting at a particular site of Sthanasamshraya gives the clear picture of the disease. For example Santapa is presenting feature in Jwara, Sarana in Atisara and Poorana in Udara. The proper knowledge, correct diagnosis and suitable treatment in the stage of the Vyakthavastha prevents further complications which may be difficult to manage.

Sixth Stage of Kriyakala – Bheda: This is the stage in which the disease may become chronic or incurable. For example



when Shotha or Vidradhi bursts it bears the characteristic features of Vrana; when Jwara persists for a long time it becomes chronic which may be difficult to manage. Thus the disease in this stage if not treated becomes Asadya or impossible to cure.

अत ऊर्ध्वमेतेषामवदीर्णानां व्रणभावमापन्नानां षष्ठः क्रियाकालः, ज्वरातिसारप्रभृतीनां च दीर्घकालानुबन्धः । तत्राप्रतिक्रियमाणेऽसाध्यतामुपयान्ति । { Su. Su. 21/35 } Furthermore, it has to be noted that the major difference between Vyaktha and Bheda avastha is that, in Vyaktha avastha the disease presents the Samanya lakshana whereas in Bheda Avastha the Vishesh lakshana is manifested. For example In Vyaktha avastha of Jwara the Santapa is the presenting feature whereas in Bheda avastha of Jwara it has a distinguishing feature such as Deerghakala anubandha which may aid the physician to pin point the Jati Bheda of Jwara, such as Vataja, Pittaja, Kaphaja, Santata, Satata, Tritiyaka etc., knowing which the most suitable treatment for the condition can be planned.

ज्वरातीसारप्रभृतीनां दीर्घकालानुबन्ध इति यथा व्यक्तिप्रस्तावे ज्वरादीनां सन्तापसरणपूरणादिकं सामान्यलक्षणमुक्तं, तथाऽत्र भेदप्रस्तावाद्विशेषलक्षणं दीर्घकालानुबन्धो ज्वरादिजातिषु भेद इति ज्ञातव्यः । {Dalhana on Su. Su. 21/35}

This stage is not only important from diagnosis and prognosis point of view but they may also act as predisposing symptoms to another disease i.e. as Nidanarthakara Roga. Bheda itself being the last stage of the disease, presenting with an array of symptoms and complications, may not be the most convenient phase for treatment but it is always better late than never. Hence diagnosing this stage of Kriyakala and providing the appropriate treatment is of utmost importance.

SHAT KRIYAKALA AND ITS RELEVANCE IN TREATMENT

The treatment protocol that can be implemented at each phase of the disease, bearing in mind the concept of Shat Kriyakala are as follows.

Sl.no	Stage of Kriyakala	Stage of Vyadhi	Chikitsa applicable
1	Sanchaya	Dosha lakshana	Nidana parivarjana, Viparita guna dravya sevana
2	Prakopa	Specific dosha lakshana	Suitable shodhana and shamana
3	Prasara	Samsarga/ sannipata dosha lakshana	Suitable shodhana and Shamana. Hetu Linga chikitsa
4	Sthanasamshraya	Purvrupa	Dosha specific and Dushya specific line of treatment
5	Vyaktha	Rupa	Vyadhi pratyanka chikitsa
6	Bheda	Upadrava	Vyadhi pratyanka, if Deergakalanubandha it is Asadya.



The knowledge of each individual stage of Kriyakala supports the physician in providing early treatment and arresting the progression of the disease. With each advancing stage of Kriyakala the condition becomes more and more miserable for the patient and more challenging for the physician. The relevance and importance of Shat Kriyakala in treatment can be clearly understood by an example stated by Acharya Sushruta in the context of Pramehapidaka chikitsitam adhyaya. ताभिरुपद्रुतं प्रमेदहणमुपचरेत् । तत्र पूर्वरूपेष्वपतर्पणं वनस्पतिकषायं बस्तमूत्रं चोपदिशेत्; एवमकुर्वतस्तस्य मधुराहारस्य मूत्रं स्वेदः श्लेष्मा च मधुरीभवति प्रमेहश्चाभिव्यक्तो भवति, तत्रोभयतः संशोधनमासेवेत्; । एवमकुर्वतस्तस्य दोषाः प्रवृद्धा मांसशोणिते प्रदूष्य शोफं जनयन्त्युपद्रवान् वा कांचित्, तत्रोक्तः प्रतीकारः सिरामोक्षश्च; एवमकुर्वतस्तस्य शोफो वृद्धोऽतिमात्रं रुजो विदाहमापद्यते, तत्र शस्त्रप्रणिधानमुक्तं व्रणक्रियोपसेवा च; एवमकुर्वतस्तस्य पूयोऽभ्यन्तरम-वदार्योत्सङ्गं महान्तमवकाशं कृत्वा प्रवृद्धो भवत्यसाधयः; तस्मादादित एव प्रमेहिणमुपकमेत् ॥

- { Su. Chi. 12/4 }

Purvarupa stage of Prameha should be treated with Vanaspati Kashaya and Goats urine. If not treated, and due to the consumption of Madhura Ahara the Mutra, Sweda and Shleshma becomes madhura and the disease of Prameha manifests. ? Rupa stage of Prameha should be treated by Ubhayata Shodhana. If not treated, Doshas increase and infiltrate Mamsa and Shonita, causing Shoppha and other complications. Upadrava stage of

Prameha presenting with Shoppha should be treated by Siramoksha(Siravyadha). If not treated, Shoppha increases and causes excessive ruja and vidaaha.(pain and burning sensation) ? In that condition it should be treated by suitable Vrana upakrama and Shastrakarmas. If not treated in this condition, there is formation of Puya (pus) which destroys the inner tissues creating an abscess and this condition is severe and incurable.

Hence person suffering from Prameha must be treated at the earliest.

In this example the stage wise progression of Prameha is explained as a consequence of not treating the earlier stage in time. Each succeeding stage presents with severity of symptoms and hence the treatment mentioned increases in its complexity. And finally the presentation of the disease reaches a stage with excessive pus and abscess formation which is extremely difficult to treat or rather incurable.

सञ्चयेऽपहता दोषा लभन्ते नोत्तरा गतीः ।

ते तूत्तरासु गतिषु भवन्ति बलवत्तराः ॥

{Su. Su. 21/37}

If the Doshas are pacified or expelled in their stage of Sanchaya, they do not progress further. But if the Doshas attain further stages they become powerful, making them difficult to treat. Hence knowledge of Shat Kriyakala has great utility not only in the diagnosis of diseases but also in its timely treatment as well.



MODERN SCIENCE AND KRIYAKALA

In many of the diseases the modern science of Pathophysiology and Biochemistry recognize certain stage wise events which progressively lead to the formation of the disease entity. For example, in Fever initially the endogenous (cytokines) or exogenous pyrogens stimulate an immune response. Major endogenous pyrogens such as Interleukin-6 release Prostaglandin E2 (PGE2) from arachidonic acid pathway. The presence of PGE2 elevates the Hypothalamic set point temperature through various channels. The brain then ultimately orchestrates heat effector mechanisms via the autonomic nervous system or primary motor center for shivering and Vasoconstriction etc. This follows a similar pattern to the Shat Kriyakala in Ayurveda where Doshas increase, then on further aggravation it reaches a site of localization, and then the features of disease begin to manifest, followed by its complications. However in the Shat Kriyakala, with each stage of pathogenesis taking place inside the body there are certain externally identifiable signs and symptoms with relevant explanation for its formation. But in the modern pathophysiology such signs and symptoms for each stage of pathogenesis have not been identified. For example there is no mention of externally visible symptoms at the stage when there is an increase in levels of PGE2 in circulation.

This is a current lacuna in science which is to be seen as an area with scope for future research.

CONCLUSION

सञ्चयं च प्रकोपं प्रसरं स्थानसंश्रयम् ।
व्यक्तिं भेदं च यो वेत्ति दोषाणां स भवेद्भिषक् ॥
{Su. su. 21/36}

From the essay it can be concluded that the concept of Shat Kriyakala is not only relevant but proves to be highly useful and beneficial in diagnosis and treatment of diseases. Acharya Sushruta himself opines that he who understands the concept of Kriyakala can only become a skilled physician/ Bhishak.



परिषद् समाचार

महर्षि चरक वनांचल आयुर्वेद स्वास्थ्य सेवा यात्रा-2019 सम्पन्न

विश्व आयुर्वेद परिषद् द्वारा सेवा समर्पण संस्थान चपकी, कारीडार, बभनी, सोनभद्र के सहयोग से दिनांक 30 जून से 4 जुलाई 2019 तक द्वितीय महर्षि चरक वनांचल आयुर्वेद स्वास्थ्य सेवा यात्रा आयोजित हुई। सेवा यात्रा का भव्य उद्घाटन दिनांक 30 जून को सेवा समर्पण संस्थान के प्रांगण में उत्तर प्रदेश के चिकित्सा एवं स्वास्थ्य मंत्री सिद्धार्थ नाथ सिंह ने महर्षि चरक एवं भारत माता के चित्र पर माल्यार्पण एवं दीप प्रज्वलन द्वारा किया गया। इस शुभ अवसर पर माननीय मंत्री जी, जिलाधिकारी सोनभद्र एवं मुख्य चिकित्साधिकारी सोनभद्र ने आठ नई एम्बुलेन्स को भी क्षेत्र की स्वास्थ्य व्यवस्था के दृष्टिगत आश्रम से रवाना किया तथा सेवाकुंज आश्रम में ही मॉडल प्राथमिक स्वास्थ्य केन्द्र बनाये जाने की घोषणा की। उद्घाटन समारोह में विश्व आयुर्वेद परिषद् के संरक्षक प्रो० सत्येन्द्र प्रसाद मिश्र, राष्ट्रीय सम्पर्क प्रमुख वैद्य कमलेश कुमार द्विवेदी, यात्रा के संयोजक प्रो० चन्द्र शेखर पाण्डेय, सह संयोजक— डॉ० अरूण कुमार द्विवेदी, डॉ० पी. एस. व्याडगी एवं डॉ० मनीष मिश्र, डॉ० आशुतोष पाठक सहित अन्य पदाधिकारी एवं राज्य सभा सदस्य श्री राम सकल जी, विधायक सदर—श्री भूपेश चौबे, विधायक दुद्धी—श्री हरिराम चैरो, विधायक ओवरा—श्री संजीव गोड़, भाजपा जिला अध्यक्ष—श्री अशोक मिश्र, पूर्व सांसद—श्री छोटेलाल खरवार सहित कई क्षेत्रीय गणमान्य उपस्थित रहें। यात्रा के उद्घाटन दिवस पर जिला प्रशासन के सहयोग से एक विराट स्वास्थ्य मेला एवं स्वास्थ्य शिविर का आयोजन किया गया। उक्त शिविर में विश्व आयुर्वेद परिषद् जिला स्वास्थ्य विभाग, आयुष विभाग, युनानी एवं होम्योपैथी के चिकित्सकों द्वारा निःशुल्क स्वास्थ्य परिक्षण एवं शिविर लगाया गया। जिसमें प्रथम दिवस कुल 403 चिकित्सकों की टीम द्वारा तीन हजार लोगों का स्वास्थ्य परीक्षण एवं औषधि वितरण किया गया। इस सेवा यात्रा में कुल 132 स्थानों में चिकित्सा शिविर लगाये गये, जिससे कुल 1282 गांवों के लोग लाभान्वित हुए। लगभग 60000 व्यक्तियों के स्वास्थ्य का परीक्षण कर 55130 रोगियों को स्वास्थ्य लाभ प्रदान किया गया। इस कार्यक्रम में विश्व आयुर्वेद परिषद्, वनवासी कल्याण आश्रम एवं सेवा समर्पण संस्थान से जुड़े 1500 शिविर कार्यकर्ता ने अपनी सहयोग दिया। इस वर्ष यात्रा में वाराणसी से 300 चिकित्सक, प्रयागराज, लखनऊ, सुल्तानपुर, जौनपुर, चन्दौली, भदोही एवं फर्रुखाबाद से 60 चिकित्सक तथा सोनभद्र, मिर्जापुर से 155 चिकित्सक ने अपनी सेवायें दी। अन्य सेवाभावी संगठनों, फार्मा कंपनियों, आयुर्वेदिक कॉलेजों का अभूतपूर्व सहयोग रहा। सेवा यात्रा का समापन दिनांक 4/08/2019 को स्वामी विवेकानन्द प्रेक्षागृह, राबर्ट्सगंज, सोनभद्र में जिलाधिकारी श्री अंकित जायसवाल की उपस्थिति में हुआ। जिलाधिकारी महोदय ने सेवा यात्रा में सम्मिलित चिकित्सकों छात्रों एवं कार्यकर्ताओं को प्रमाण पत्र एवं स्मृति चिन्ह प्रदान किया तथा परिषद् के कार्यों की सराहना करते हुए इस यात्रा को आगे भी सहयोग देने का आश्वासन दिया।

महर्षि चरक जयन्ती एवं वनांचल आयुर्वेद स्वास्थ्य सेवा यात्रा-2019 का धन्यवाद ज्ञापन समारोह वाराणसी में सम्पन्न

दिनांक 04/08/19 को विश्व आयुर्वेद परिषद् द्वारा, महर्षि चरक जयन्ती एवं महर्षि चरक वनांचल स्वास्थ्य सेवा यात्रा-2019 के धन्यवाद ज्ञापन समारोह के उपलक्ष्य में वन विहार एवं सहभोज कार्यक्रम आयोजित हुआ। ये कार्यक्रम "पीयूष आरोग्य ग्राम" जाल्हूपुर, वाराणसी जिसे परिषद् के आजीवन सदस्य एवं नगर के ख्यातिलब्ध वैद्य हरिओम पांडेय जी ने प्रकल्प के रूप में खड़ा किया है। यहां 250 से अधिक दुर्लभ जड़ी बूटियों का पौधों के रूप में संकलन है। यहाँ 'नवग्रह वाटिका', 'नक्षत्र वाटिका', 'बुद्ध वाटिका', 'गुरसाहिब वाटिका', 'मसीही वाटिका', 'कुरान वाटिका' बनाई गई है जो दर्शनीय है। कार्यक्रम में परिषद् के राष्ट्रीय सम्पर्क प्रमुख वैद्य कमलेश जी, उत्तर प्रदेश के महासचिव वैद्य विजय जी, काशी नगर के अध्यक्ष राजीव जी, काशी प्रान्त महासचिव सुभाष



जी, काशी हिंदू विश्वविद्यालय से वैद्य ज्योति शंकरजी, वैद्य अजय जी, वैद्य डी. एन. गौतम जी, तिब्बतियन संस्थान से अरुण जी, श्री सिंहपाल जी, क्षेत्रीय छात्रावास प्रमुख वनवासी कल्याण आश्रम, डॉ एस एन राय, डॉ शिव कुमार गुप्ता, डॉ अलफनाथ, डॉ हरिप्रसाद जी, सेवाभारती से शशि जी, मनोज जी, प्रवीण जी, दीनदयाल जी सहित नगर के अनेक ख्याति लब्ध वैद्य संजीव शर्मा जी, वैद्य शांतनु मिश्र जी, वैद्य एस एस मिश्र, सहित यात्रा में प्रतिभाग किए सभी चिकित्सक एवं छात्र-छात्राएं उपस्थित रहें। महर्षि चरक सेवा यात्रा प्रमुख वैद्य चंद्रशेखर जी ने महर्षि चरक की वर्तमान परिप्रेक्ष्य में उपादेयता विषयक व्याख्यान प्रस्तुत किया, वैद्य कमलेश जी ने परिषद् के विषय में विस्तार से चर्चा की तथा यात्रा के सह संयोजक वैद्य पी. एस. व्याडगी ने स्वास्थ्य सेवा यात्रा-2019 का वृतांत प्रस्तुत किया। कार्यक्रम संचालन वैद्य मनीष एवं धन्यवाद ज्ञापन डॉ सुभाष जी ने किया। कार्यक्रम के समाप्ति के पूर्व राष्ट्रीय स्वयं सेवक संघ के वरिष्ठ प्रचारक एवं विश्व आयुर्वेद परिषद के संस्थापक सदस्यों में से एक मार्गदर्शक स्वर्गीय ओमप्रकाश जी जिनका लंबी बीमारी के बाद लखनऊ में निधन हो गया। उनकी आत्मा की शांति हेतु दो मिनट का मौन रख परिषद् परिवार की तरफ से श्रद्धांजली प्रदान की गई।

विश्व आयुर्वेद परिषद् रीवा द्वारा महर्षि चरक जयंती का आयोजन सम्पन्न

दिनांक 4/08/2019 दिन रविवार को विश्व आयुर्वेद परिषद रीवा द्वारा भगवान शेष के अवतार महर्षि चरक की जयंती का आयोजन किया गया। इस अवसर पर प्रातःकाल किला स्थित प्रसिद्ध महामृत्युंजय मंदिर में विश्व कल्याणार्थ रुद्राभिषेक किया गया, तत्पश्चात दीनदयाल धाम पड़रा स्थित सरस्वती विद्यालय में महर्षि चरक के चिकित्सा के क्षेत्र में योगदान पर एक संगोष्ठी का आयोजन किया गया। कार्यक्रम में मुख्य अतिथि आयुर्वेद के प्रख्यात चिकित्सक डॉ. एल. एम. कुशवाहा, विशिष्ट अतिथि डॉ. प्रभंजन आचार्य, कार्यक्रम के अध्यक्ष डॉ. ओ. पी. द्विवेदी, परिषद् के प्रदेश महासचिव डॉ. एस. एन. तिवारी, जिला अध्यक्ष डॉ. के. पी. शर्मा, जिला सचिव उपदेश पसारी मंचासीन रहे। अतिथियों का स्वागत संभाग प्रभारी डॉ. के. के. गौतम, प्रान्त विद्यार्थी प्रमुख डॉ. राजीव अग्निहोत्री व शशिकांत द्विवेदी ने किया। कार्यक्रम में विश्व आयुर्वेद परिषद् के उद्देश्य व गतिविधियों पर डॉ. एस. एन. तिवारी द्वारा विस्तार से बताया गया। आचार्य चरक के संबंध में विषय का प्रबोधन डॉ. ओ. पी. शुक्ला ने दिया। डॉ. जिनेश जैन द्वारा उपस्थित सभी चिकित्सक व छात्र-छात्राओं को चरक शपथ दिलाई गई। परिषद की जिला कार्यकारिणी के गठन की घोषणा विद्यार्थी प्रकोष्ठ के राष्ट्रीय सह प्रभारी डॉ. आशुतोष द्विवेदी द्वारा प्रदेश महासचिव डॉ. एस. एन. तिवारी के निर्देश पर की गई। कार्यक्रम का संचालन डॉ. रामरक्षा शुक्ला व आभार प्रदर्शन डॉ. पवन किरार द्वारा किया गया। कार्यक्रम में मुख्य रूप से डॉ. आर. पी. तिवारी, डॉ. डी. के. पाठक, डॉ. धीरेंद्र, डॉ. पवन गर्ग, डॉ. सुशील मिश्र, डॉ. के. के. त्रिपाठी, स्नातकोत्तर व स्नातक के छात्र-छात्राएं उपस्थित रहे।

प्रयागराज में महर्षि चरक जयंती समारोह में संगोष्ठी एवं महर्षि चरक श्लोक वाचन प्रतियोगिता का आयोजन

विश्व आयुर्वेद परिषद प्रयागराज के तत्वावधान में सिविल लाइन स्थित होटल मिलन पैलेस में महर्षि चरक जयंती समारोह में संगोष्ठी एवं महर्षि चरक श्लोक वाचन प्रतियोगिता का आयोजन किया गया। वक्ताओं ने महर्षि चरक के जीवन, चिकित्सा पद्धति एवं आज की प्रासंगिकता पर अपने विचार विस्तार रूप से रखे। संगोष्ठी में मुख्य अतिथि डॉक्टर विवेक कुमार चतुर्वेदी, एसडीएम फूलपुर, विशिष्ट अतिथि डॉक्टर जी. एस. तोमर, वैद्य पी. एस. पांडे, डॉ. बी. एस. रघुवंशी रहे। इस अवसर पर श्लोक वाचन प्रतियोगिता का आयोजन किया गया, जिसमें श्री लाल बहादुर शास्त्री स्मारक आयुर्वेदिक कॉलेज, हण्डिया, प्रयागराज एवं चन्द्रशेखर आजाद आयुर्वेद कॉलेज, कौशांबी के छात्राओं ने प्रतिभाग किया। प्रतिभागियों को प्रथम एवं द्वितीय पुरस्कार के साथ ही अन्य प्रतिभागियों को सांत्वना पुरस्कार दिया गया सभा का संचालन एम. डी. दुबे ने मंगलाचरण से किया एवं डॉक्टर जे. नाथ और धन्यवाद ज्ञापन डॉ. विनोद त्रिपाठी ने किया।



महर्षि चरक जयंती एवं अखंड चरक संहिता पाठ का आयोजन

विश्व आयुर्वेद परिषद, उत्तराखंड, देहरादून द्वारा अग्रवाल धर्मशाला में महर्षि चरक जयंती का आयोजन किया गया। परिषद के प्रांतीय अध्यक्ष डॉ० यतेन्द्र मालिक ने महर्षि चरक के जीवन पर प्रकाश डालते हुए कहा कि विश्व के प्रथम चिकित्सक, शेषावतार महर्षि चरक का जन्मदिन श्रावण शुक्ल पक्ष पंचमी को चरक जयंती के रूप में मनाया जाता है। इनका जन्म ईसा से 200 वर्ष पूर्व कपिलस्थ (कश्मीर)में हुआ था। इन्होंने महाभारत काल के पश्चात लुप्तप्रायः हो चुके कायचिकित्सा के महान ग्रंथ अग्निवेश तंत्र का प्रतिसंस्कार कर चरक संहिता रूपी कालजयी रचना का निर्माण किया। इस अवसर पर प्रातः एक विशाल यज्ञ का आयोजन करते हुए ॐ चरकाय नमः की 108 आहुतियां भी डाली गईं। इसके पश्चात अखंड चरक संहिता पाठ में सूत्रस्थान के पठन का उदबोधन वैद्य विनीश गुप्ता, वैद्य अनुमेहा जोशी एवं हिमालयी आयुर्वेदिक कॉलेज के श्री नवीन जसोला द्वारा लगभग 150 आयुर्वेद छात्रों व चिकित्सकों की उपस्थिति में सामूहिक रूप से किया गया, जो कि लगभग 4 घण्टे तक चला। यह एक अदभुत व प्रेरणादायक आयोजन रहा। पाठ के समापन पर उपस्थित प्रतिभागियों को महर्षि चरक द्वारा रचित “चरक-शपथ” वैद्य विनीश गुप्ता द्वारा दिलाई गई। इसके पश्चात धर्मशाला प्रांगण में औषधीय पौधों का रोपण किया गया। कार्यक्रम के संयोजन में वैद्य अंकित, वैद्य शिवम, वैद्य विशाखा, वैद्य हेमंत सहित अनेक युवा वैद्य जनों का विशेष योगदान रहा और विश्व आयुर्वेद परिषद के अनेक सदस्य इस अवसर पर उपस्थित रहे। भोजन-प्रसाद व्यवस्था में श्री रजनीश गर्ग सी.ए. एवं उनकी टीम का सहयोग रहा।

सीहोर मध्यप्रदेश में महर्षि चरक जयंती का आयोजन

दिनांक 3/8/2019 को सीहोर मध्यप्रदेश में महर्षि चरक जयंती का आयोजन किया गया। जिसमें आचार्य चरक के जीवन परिचय पर डा राम प्रताप सिंह प्रदेशाध्यक्ष विश्व आयुर्वेद परिषद ने प्रकाश डाला। मौसमी बीमारियों से बचाव विषय पर कार्यशाला भी आयोजित की गई। डॉ० नीलिमा सिंह ने पावर प्वाइंट प्रेजेंटेशन के माध्यम से चरक संहिता की उपादेयता विषय पर व्याख्यान दिया। औषधि युक्त पौधों का रोपण भी किया गया। आयोजन में विश्व आयुर्वेद परिषद के 36 सदस्यों की उपस्थिति रही।

इंदौर में महर्षि चरक जयंती का आयोजन

चरक जयंती के पावन अवसर पर अष्टांग आयुर्वेद महाविद्यालय इंदौर में विश्व आयुर्वेद परिषद के तत्वावधान में चरक जयंती सम्बंधित विभिन्न कार्यक्रम हुए, जिनमें सर्वप्रथम औषधीय पौधों का रोपण किया गया एवं विभिन्न औषधीय पौधों का महत्व एवं उपयोगिता छात्रों को समझाई गई। तत्पश्चात महर्षि चरक के कार्यों एवं चरक संहिता के विभिन्न विषयों पर व्याख्यान हुए तथा चरक संहिता के विभिन्न पहलुओं एवं चिकित्सकीय पक्ष पर चर्चा की गई। कार्यक्रम का मुख्य आकर्षण प्रश्नमंच प्रतियोगिता रही, जिसमें सम्पूर्ण चरक संहिता के विभिन्न स्थानों के रोचक एवं ज्ञान वर्धक प्रश्नों का समावेश था। कार्यक्रम के मुख्य अतिथि थे, डॉ० आर.के. वाजपयी, डॉ० बाबुल ताम्रकार एवं विश्व आयुर्वेद परिषद इंदौर के अध्यक्ष डॉ० आर.आर.सोलंकी जी रहे। इस कार्यक्रम के संयोजक डॉ० ए.पी.एस.चौहान क्वीज काम्पीटिशन के प्रस्तुतकर्ता डॉ० मनीष मुकाती एवं डॉ० अश्विन पंड्या एवं कार्यक्रम संचालन एवं धन्यवाद ज्ञापन डॉ० अखिलेश भार्गव ने किया।

महर्षि चरक जयंती एवं अखंड चरक संहिता पाठ का आयोजन

दिनांक 5 अगस्त 2019 को दयानन्द आयुर्वेदिक मेडिकल पी जी महाविद्यालय एवं चिकित्सालय सीवान, बिहार में चरक जयंती का आयोजन किया गया। जिसकी अध्यक्षता स्थानीय विधायक सह महाविद्यालय शासी निकाय के अध्यक्ष श्री व्यासदेव प्रसाद ने की। मुख्य अतिथि क्षेत्र के प्रख्यात वैद्य वीरेन्द्र उपाध्याय एवं महाविद्यालय के पूर्व प्राध्यापक डॉ० पी. एन. पाण्डेय थे। विशिष्ट अतिथि के रूप में महाविद्यालय शासी निकाय के सम्मानित सदस्य नगर के वरिष्ठ शिक्षाविद डॉ० रामानंद पाण्डेय जी थे। कार्यक्रम के प्रारम्भ में मुख्य अतिथि के रूप में आए



डॉ. पी. एन. पाण्डेय जी ने बताया कि आचार्य चरक का निश्चित काल क्या है, इसपर थोड़ी बहुत मतभिन्नता है, किन्तु बुद्ध के पहले का काल उनका है, यह उनके ग्रन्थ के सूत्रों को सूक्ष्मता से अध्ययन करने पर प्रतीत होता है। डॉ. रामानन्द पाण्डेय जी ने बताया कि महर्षि चरक जी के ग्रन्थ में तीन दर्शनों का समावेश है, और उन्होंने उसमें आत्मा को बड़े ही सूक्ष्मता से प्रतिपादित किया है। महाविद्यालय के प्राचार्य डॉ. प्रजापति त्रिपाठी जी ने आम जनजीवन में आयुर्वेद कैसे जीवंत था और प्रकृति से किस तरह आचार्य चरक के कहे अनुसार आम लोगों की तारतम्यता थी, इसको बड़े ही अच्छे तरीके से बताया। साथ ही उन्होंने बताया कि विश्व आयुर्वेद परिषद के प्रांत संरक्षक होने के नाते बच्चों को उनके रोगप्रतिरोधक क्षमता का विकास कर रोगों से रक्षा कैसे की जाय इस विषय पर राष्ट्रीय सचिव जी के साथ आदरणीय महामहिम राज्यपाल जी के पहल पर मुख्यमंत्री जी, चिकित्सकों की टोली और राज्य के स्वास्थ्य सचिव के समक्ष हमलोगों ने सामूहिक स्वर्ण प्राशन पर एक प्रस्ताव प्रस्तुत किया है। कार्यक्रम की शुरुआत महाविद्यालय के छात्राओं और छात्रों के द्वारा सामूहिक सस्वर चरक संहिता के पाठ से हुई एवं उसके पश्चात सभी चिकित्सकों को चरक प्रतिज्ञा डॉ. कमलेश पाण्डेय जी ने दिलवाई। इस कार्यक्रम में चरक स्वरूप वृद्ध वैद्य के रूप में क्षेत्र के विख्यात वैद्य वीरेन्द्र उपाध्याय जी को सम्मानित किया गया एवं विश्व आयुर्वेद परिषद के द्वारा पूर्व में हुए कार्यक्रम में परीक्षोपरान्त प्रथम, द्वितीय एवं तृतीय स्थान प्राप्त छात्रों को पुरस्कार स्वरूप क्रमशः अवनीश चन्द्र उपाध्याय, शिवा सम्पत, एवं मिथिलेश कुमार तथा विशाल कुमार सिंह को 7500/-, 5000/- तथा 3000/- तीन हजार की राशि का चेक देकर सम्मानित किया गया। कार्यक्रम का सुचारू संचालन का भार डॉ. सुधांशु शेखर त्रिपाठी एवं डॉ. राजा प्रसाद जी ने निभाया। मंच संचालन महाविद्यालय के स्नातकोत्तर के अंतिम वर्ष के छात्र वैद्य अंकेश ने किया एवं धन्यवाद ज्ञापन डॉ. योगेन्द्रनाथ पाण्डेय जी ने किया। इस कार्यक्रम में महाविद्यालय के सभी शिक्षक, शिक्षिका, छात्र, छात्राओं तथा कर्मचारियों की सहभागिता रही। शामिल होने वालों में मुख्य रूप से डॉ. एस. एन. सिंह, प्रदेश सचिव, विश्व आयुर्वेद परिषद, डॉ. वी. जी. यादव, डॉ. एम. पी. श्रीवास्तव, डॉ. उपेंद्र पर्वत, डॉ. आरती, डॉ. सरिता, डॉ. पूजा त्रिपाठी, डॉ. सौरव पाल, डॉ. ए. आर. दास, प्रकाश पाण्डेय इत्यादि की सहभागिता रही।

अवध प्रान्त के द्वारा महर्षि चरक जयंती समारोह का आयोजन

दिनांक 5 अगस्त सोमवार को संजीवनी आयुर्वेदिक सेन्टर के सभागार में विश्व आयुर्वेद परिषद (अवध प्रान्त) के द्वारा महर्षि चरक जयंती समारोह बड़े उल्लास पूर्वक मनाया गया। कार्यक्रम का संयोजन डॉ. बी. पी. सिंह, वासुदेव स्मृति संस्थान ने किया जिस में अनेक औषधि निर्माण शालाओं ने सहयोग किया। कार्यक्रम के मुख्य अतिथि प्रोफेसर सत्यनारायण सिंह, निदेशक आयुर्वेद थे तथा इसकी अध्यक्षता डॉ. वाचस्पति त्रिवेदी ने की। इस अवसर पर अग्नि कर्म विशेषज्ञ डॉ. नीलेश का सार गर्भित व्याख्यान वेदना हरण विषय पर हुआ। अन्य वक्ताओं में डॉ. अजय दत्त शर्मा, अध्यक्ष अवध प्रान्त, डॉ. सुनीति मिश्रा, आयुष चिकित्सक, के. जी. मेडिकल विश्व विद्यालय, डॉ. शिव शंकर त्रिपाठी, सेवा निवृत्त चिकित्सक राज भवन, प्रोफेसर डॉ. फूल चन्द्र चौधरी, सदस्य CCIM, डॉ. अलाउद्दीन, सदस्य CCIM, डॉ. पुनीत मिश्रा सहित सैकड़ों की संख्या में चिकित्सक, शिक्षक, छात्र-छात्रायें एवं विश्व आयुर्वेद परिषद के सदस्य उपस्थित रहें। सभी चिकित्सकों को शमी, तुलसी एवं अगस्त्य के पादप रोपण हेतु वितरित किए गए। मुख्य अतिथि निदेशक आयुर्वेद ने प्रदेश में आयुर्वेद के विकास के लिये पूरे समर्पण की चर्चा की। भव्य जल पान के उपरान्त कार्य क्रम सम्पन्न हुआ।

बिहार इकाई द्वारा राष्ट्रीय संभाषा (सेमिनार) एवं स्नातक निबंध प्रतियोगिता का आयोजन

इस वर्ष (2019) हेतु बिहार इकाई द्वारा संपन्न होने वाला राष्ट्रीय संभाषा (सेमिनार) एवं निबंध प्रतियोगिता का कार्यक्रम निश्चित हो गया है। कार्यक्रम दिनांक 28 व 29 दिसम्बर 2019 को होना सुनिश्चित है। निबंध का विषय-वायुस्तु यंत्र तंत्र धरः है तथा संभाषा का विषय-प्रत्युर्जता (Allergy) है। निबंध जमा करने की अंतिम तिथि 30 अगस्त 2019 है। शब्द सीमा- 2500 शब्द अधिकतम होगी। आप सभी से निवेदन है कि आपके संपर्क के महाविद्यालयों/छात्र छात्राओं को उक्त विषय पर निबंध लेखन एवं ससमय प्रेषण हेतु उत्साहित कर अपने कार्यक्रम की सफलता का मार्ग प्रशस्त करने में अग्रसर हों।



‘पण्डित उद्धवदास मेहता पी.जी. स्टूडेंट निबन्ध प्रतियोगिता-2019’ सम्पन्न

भाई उद्धवदास मेहता स्मृति न्यास एवं विश्व आयुर्वेद परिषद् के संयुक्त तत्वावधान में आयोजित ‘पण्डित उद्धवदास मेहता अखिल भारतीय पी.जी.स्टूडेंट निबन्ध प्रतियोगिता-2019’ का पुरस्कार वितरण रानी दुल्लैया आयुर्वेद महाविद्यालय में सहकारिता संसदीय कार्य एवं सामान्य प्रशासन मंत्री डॉ. गोविन्द सिंह जी के अध्यक्षता में तथा मुख्य अतिथि डॉ. विजय लक्ष्मी साधौ, आयुष एवं चिकित्सा शिक्षा, संस्कृति मंत्री, मध्य प्रदेश शासन (भोपाल) विशेष अतिथि जनसम्पर्क एवं धर्मस्य मंत्री श्री पी.सी. शर्मा के द्वारा प्रदान किये गये। इसमें प्रथम पुरस्कार स्वर्ण पदक डॉ. नमिता बागलकोट (कर्नाटक) को राशि 21000/-, द्वितीय पुरस्कार रजत पदक डॉ. अशोक कुमार दास-जामनगर (गुजरात) 15000/- तथा तृतीय पुरस्कार कांस्य पदक डॉ. सी.एच. राजानी (गांडरा, कर्नाटक) 11000/- से सम्मानित किया गया। इस अवसर पर डॉ. साधौ ने आयुर्वेद मेडिकल टूरिज्म को विकसित करने तथा आयुर्वेद चिकित्सकों की नियुक्ति एवं आयुर्वेद के संवागीण विकास करने का आश्वासन दिया। न्यास के सचिव धनेश चतुर्वेदी ने ट्रस्ट के कार्यों का परिचय दिया तथा डॉ. बी. एम. गुप्ता, अध्यक्ष, विश्व आयुर्वेद परिषद् ने महर्षि चरक के व्यक्तित्व पर प्रकाश डाला। हेमन्त सिंह चौहान चैयरमैन आर. डी. मेमोरियल ने आभार व्यक्त किया।

महर्षि चरक जयन्ती एस.ए.एस. आयुर्वेदिक मेडिकल कॉलेज, वाराणसी में सम्पन्न

विश्व आयुर्वेद परिषद् काशी प्रान्त के तत्वावधान में आयुर्वेद चिकित्सा के जनक महर्षि की जयन्ती समारोह का आयोजन एस. ए. एस. आयुर्वेदिक मेडिकल कॉलेज एवं चिकित्सालय, हरहुआ, वाराणसी में किया गया। कार्यक्रम की अध्यक्षता प्रधानाचार्य प्रोफेसर अनुग्रह नारायण सिंह के द्वारा महर्षि चरक के चित्र पर माल्यार्पण कर प्रारम्भ किया। इस अवसर पर बी.ए.एम.एस. के छात्रों संदीप, धर्मजीत, अभिषेक, वाची, निशान्त, रिया, आर्या, प्रियंका ने महर्षि चरक के कृतित्व एवं आयुर्वेद के विकास-विस्तार पर अपने विचार प्रस्तुत किये। निषान्त एवं अभिषेक को श्रेष्ठ वक्ता का पुरस्कार प्रदान किया गया। एस.ए.एस. ग्रुप के चैयरमैन डॉ. अशोक कुमार पाण्डेय एवं डॉ. सौरभ चौरसिया ने विषय पर प्रकाश डाला। इस अवसर पर हरीतकी, बहेड़ा, ऑवला, कुटज, शिरीश आदि पौधे लगाये गये। समारोह में डॉ. गीता पाण्डेय, डॉ. अनीश पाण्डेय, डॉ. एन. के. सिंह, डॉ. सौरभ, डॉ. अखिलेश वर्मा, डॉ. योगेन्द्र, डॉ. रवि शुक्ला, डॉ. महेश, डॉ. अनिल पाण्डेय उपस्थित रहें। कार्यक्रम का संचालन डॉ. अनीश के द्वारा किया गया।

सागर में महर्षि चरक की जयन्ती का आयोजन

सागर शाखा के द्वारा दर्शनीय स्थल गिरिजा दहार में महर्षि चरक की जयन्ती मनायी गई। जिसमें परिषद् के सभी सदस्य शामिल रहे। प्रदेश कार्यकारिणी सदस्य डॉ. राजीव ने कहा कि आयुर्वेद के नुस्खे आज भी सौ प्रतिशत असर करते हैं। बस सही नब्ज देखकर औषधि दी जाये। पहले कोई अंग्रजी दवाई नहीं चलती थी तो बड़े से बड़े रोग आयुर्वेद के माध्यम से ही सही होते थे और आज भी लोग आयुर्वेद का सहारा ले रहे हैं। महर्षि चरक ने हजारों वर्ष पहले संस्कृत लिपि में लिख दिया आज भी कायम है। बस उसको समझाने की जरूरत है। बैठक के संरक्षक अशोक तिवारी, जिलाध्यक्ष पी. आर. विश्वकर्मा, प्रशांत भक्त, जोगिन्दर ठाकुर, विशाल जैन, आशीष दूबे, नीरज पटेल, प्राची अग्निहोत्री शामिल रहे।

उत्तर प्रदेश कार्यकारिणी की बैठक गोरखपुर में सम्पन्न

दिनांक 14 जुलाई 2019 को गोरखपुर के सरस्वती शिशु मन्दिर में विश्व आयुर्वेद परिषद्, उत्तर प्रदेश कार्यकारिणी की बैठक सम्पन्न हुई। कार्यक्रम की अध्यक्षता वैद्य सुरेन्द्र चौधरी, अध्यक्ष (उत्तर प्रदेश इकाई) एवं संचालन प्रकाश चन्द्र त्रिपाठी ने की। कार्यक्रम में प्रयागराज से वैद्य पी. एस. पाण्डेय, वैद्य एम. डी. दूबे, वैद्य मनो द्विवेदी, मेरठ से वैद्य चन्द्र पूर्ण मिश्र, कानपुर से वैद्य सी.एल. उपाध्याय, वैद्य विभूकान्त, अवध से वैद्य मनोज मिश्र, काशी से वैद्य विजय राय (महामंत्री) वैद्य कमलेश कुमार द्विवेदी (सम्पर्क प्रमुख), वैद्य मनीष मिश्र, सहित अन्य पदाधिकारी कार्यक्रम में उपस्थित रहें।