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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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नवम्बर-दिसम्बर 2019

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सम्पादकीय कार्यालय :

विश्व आयुर्वेद परिषद् पत्रिका
1/231, विरामखण्ड, गोमतीनगर
लखनऊ - 226010 (उत्तर प्रदेश)

लेख सम्पर्क- 09452827885, 09336913142

E-mail - drajaipandey@gmail.com

dwivedikk@rediffmail.com

vapjournal@rediffmail.com

manish.arnav@gmail.com

rebellionashu@gmail.com

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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सम्पादकीय

आयुर्वेद चिकित्सा को राष्ट्रीय चिकित्सा पद्धति घोषित की जाए, ऐसे नारे विभिन्न संगठनों के माध्यम से सुनने को मिलते रहते हैं। किन्तु वास्तविकता यह है कि इस दिशा में हमारा प्रयास न्यूनतम है, जबकि अनुकूलता का वातावरण इस समय में उपलब्ध है। आयुष विभाग की स्थापना को वर्षों बीत चुके हैं। आयुष सचिव के रूप में आयुर्वेद के विशेषज्ञ उपस्थित हैं। सी0सी0आई0एम0 अपने नवीन स्वरूप के साथ अपने गति से अच्छा करने का प्रयास कर रहा है। आयुर्वेद का प्रचार प्रसार भी हो रहा है। सरकार के तरफ से अर्थाभाव भी नहीं है। इसके बाद भी अपेक्षित परिणाम उपलब्ध नहीं हो पा रहा है। क्या कमियां हैं? आयुर्वेद चिकित्सा शास्त्र की लोकप्रियता बढ़ाने के क्या उपाय हो सकते हैं? इस पर चिन्तन-मन्थन की आवश्यकता है। सम्भवतः विश्व आयुर्वेद सम्मेलन में माननीय प्रधानमंत्री जी के व्यंग से यह पीड़ा स्पष्ट झलकती हैं। मेरा भी मानना है कि चिकित्सा, शिक्षा एवं रोगी सापेक्ष है। बिना उत्तम चिकित्सालय एवं रोगियों के उचित प्रशिक्षण सम्भव नहीं हैं। अन्तरंग चिकित्सालयों में ही विद्यार्थी अपना प्रशिक्षण सम्यक रूप से कर पाता है। अपूर्ण संसाधनों के साथ निजी आयुर्वेद महाविद्यालयों की मान्यता एवं उनकी वृद्धि लगातार हो रही है। अधिकतर राजकीय महाविद्यालयों में भी शिक्षकों, संसाधनों की कमी है। शिक्षकों को समय से प्रोन्नति प्रदान हो, ऐसी चिन्ता राजकीय क्षेत्र में नहीं के बराबर है, जबकि निजी महाविद्यालय अगले दिन से ही प्रोन्नति प्रदान कर देते हैं। शिक्षकों में इस प्रकार को कुण्ठा व्याप्त होना भी शिक्षण-प्रशिक्षण में बाधक है।



हमारे शिक्षक कक्षा में तो विषय को पूर्ण रूप से प्रतिपादित करते हैं, किन्तु रोगी के अभाव में प्रायोगिक प्रशिक्षण पूर्ण नहीं कर पाते। फलस्वरूप स्वाभाविक रूप से विद्यार्थियों में आत्मविश्वास की कमी रहती है, जिसके फलस्वरूप वह एलोपैथिक दवाओं के तरफ भागते हैं। गुरुकुल परम्परा में एक ही गुरु सारे ज्ञान देता था, जिसमें सभी विषयों के ज्ञान के साथ औषधि पहचान, औषधि निर्माण प्रक्रिया, रोगियों पर उसकी गुणवत्ता का परिणाम, प्रत्यक्ष रूप से विद्यार्थियों को प्राप्त होता था। फलस्वरूप उसमें आयुर्वेद चिकित्सा के प्रति विश्वास की भावना विकसित होती थी। राष्ट्रीय आयुर्वेद विद्यापीठ, विश्व आयुर्वेद परिषद् तथा अन्य संगठन इस दिशा में कार्य तो कर रहे हैं, किन्तु विद्यार्थियों की संख्या अधिक होने से यह प्रयास न्यून प्रतीत होता है। कैंसर, प्रमेह, थायरॉयड आदि अनेक रोगों में बड़े-बड़े दावे किये जाते हैं, किन्तु क्या इसका कोई साक्ष्य या प्रमाण है? नहीं। जबतक कोई परिणाम साक्ष्य सम्मत नहीं होगा, समाज एवं विज्ञान को स्वीकार नहीं होगा। इसलिए आवश्यक है कि हम अपने शोध एवं अध्ययन को प्रमाण (एवीडेन्स बेस) आधारित बनायें। केवल सरकार से अपेक्षा न रखते हुए ऐसी कार्यशैली को विकसित करें, जिससे जनमानस हमसे जुड़े, हमारी सेवारतें ले, लाभ प्राप्त करें। जनमानस ही इस चिकित्सा शास्त्र को लोकप्रिय बना सकता है, समाज में उचित स्थान दिला सकता है एवं आयुर्वेद को राष्ट्रीय चिकित्सा पद्धति का दर्जा प्राप्त करने में सहयोग कर सकता है। सत्य जो सुनने में अप्रिय लगता है, उस पर गम्भीरता से चिंतन करने की आवश्यकता है और सुधारात्मक कदम उठाने के लिए पहल करने का प्रयास करना चाहिए। आयुर्वेद चिकित्सा पद्धति का भविष्य उज्ज्वल है, केवल हम सभी को उसके चिकित्सकीय शिक्षण, प्रशिक्षण एवं औषधियों के प्रभावी क्रियान्वयन की तरफ विशेष मनन करने के लिए पहल करने का प्रयास करना चाहिए।

- प्रो० सत्येन्द्र प्रसाद मिश्र

पूर्व कुलपति, उत्तराखण्ड आयुर्वेद विश्वविद्यालय
देहरादून, उत्तराखण्ड



STUDY TO EVALUATE THE ADD ON EFFECT OF SPECIFIC YOGA THERAPY ALONG WITH AMALAKI CHURNA IN TYPE 2 DIABETES MELLITUS

- Virendra Singh Solanki¹, Trupti Jain², Charu Bansal³
e-mail : veer123s@gmail.com

ABSTRACT :

The prevalence of Diabetes is rapidly rising all over the globe at an alarming rate. Diabetes Mellitus occurs throughout the world, but it is more common; especially Type-2 Diabetes Mellitus in the developed countries. WHO predicted that at the current rate there will be some 592 million D.M.people by the year 2035. In India, it is estimated that by the year 2017 total number of Diabetic subjects to be around 72.9 and by year 2045 it is further set to rise to 134.3 million (IDF). Various scientific researches showed Yogasanas have great potential in the prevention and the control of lifestyle disorders like metabolic syndrome, asthma, cancer, diabetes and its co-morbid conditions like hypertension and dyslipidemia etc. Simultaneously, various Ayurvedic single herbs proved its potential in the control of Diabetes and its complications by their antioxidant properties and Amalaki churna is one of them. Thus for the present study specific yoga therapy and Amalaki churna were selected for the patients of Type 2 Diabetes Mellitus.

Key Word: Type 2 DM, Yoga Therapy, Amalaki Churna.

INTRODUCTION:

The prevalence of Diabetes is rapidly rising all over the globe at an alarming rate.^[1] Diabetes Mellitus occurs throughout the world, but it is more common; especially Type-2 Diabetes Mellitus in the developed countries. WHO predicted that 30 million people were diagnosed with Diabetes worldwide in 1985, by 1995 the number had risen to 135 million and at the current rate there will be some 592 million by the year 2035.^[2] In India, it is estimated that by the year 2017 total number of Diabetic subjects to be around 72.9 and by year 2045 it is further set to rise to 134.3 million (IDF).^[3]

Diabetes is a lifestyle disease and it can affect people at any age, leading to many complications like heart disease and kidney disease etc. One way to keep Diabetes and its complications under control is; early detection of the disease and to adopt the healthy lifestyle. According to the Modern science, main two type of Diabetes are referred as Type-1 DM & Type-2 DM.

¹PG Scholar, ²Lecturer, ³Prof. & Head, Deptt. of Swasthavritta Govt. (Auto.) Ayurveda College and Institute Bhopal, (M.P.)



The ancient Indian physicians also had a sound knowledge of Diabetes. It is considered as one of the serious disease and included in '*AshthaMahagada*'. In *Ayurveda*, types, clinical features, complications and treatment of Diabetes described vividly. Both *Sushrutha* and *Charaka* emphasized the importance of diet and exercise in the management of Diabetes.

Various scientific researches showed *Yogasanas* have great potential in the prevention and the control of lifestyle disorders like metabolic syndrome, asthma, cancer, diabetes and its co-morbid conditions like hypertension and dyslipidamia etc.^[4] Simultaneously, Various Ayurvedic single herbs proved its potential in the control of Diabetes and its complications. *Amalaki churna* is one of them. *Acharya* have described *Amalaki* as an antidiabetic (*Pramehaghna*) drug on the basis of its pharmacological properties. (*B.P. Hrit.3/39 p-9-12*). Thus for the present study specific yoga therapy and *Amalaki churna* were selected for the patients of Type 2 DM.

MATERIALS & METHOD

Plan of Study:

It is a clinical study and the sample was selected by simple random sampling technique. The diagnosed cases of type-2 DM, and those who are already under the treatment and taking modern oral hypoglycemic drug were considered for

intervention. Patients were advised to continue same oral hypoglycemic drug with same dose as was before the initiation of present trial regimen.

Ethical Clearance

The proposed clinical study was presented in the form of a synopsis in front of Institutional Ethics Committee. The clinical trial started after the approval from Chairman of Institutional Ethics Committee.

AIM AND OBJECTIVE:

1. To evaluate the combine efficacy of *Yogasana* and *Amalaki Churna* in the management of Type-2 Diabetes cases.
2. To evaluate the efficacy of *Amalaki Churna* in the management of Type-2 Diabetes cases.

METHOD

Sample Size: Total 60 male patients (30 patients in each group).

Grouping

Group A: *Yogasana* and *Amalaki Churna* Group

Group B: *Amalaki Churna* Group

- *Anulomaviloma pranayama* for 10minutes.
- *Trikonasana, Pawanmuktasana, Janushirshasana, Marichyasana, Setubandhasana, Ushtrasana,*



Mandukasana, for 7 times early in the morning daily for 45 days.

- In both the groups, Oral administration of *Amalaki Churna* in 6gm BD dose daily empty stomach with luke warm water for 45 days.
- In both the groups, patient are advised for specific Diabetic diet.

Inclusion criteria

- The Male patients of Age group between 25-60 years.
- The male patients Plasma glucose level :
 - Fasting (8 hour): >126-140 mg/dl
 - Post prandial after 2 hour : > 200 mg/dl

Exclusion criteria

- Female Patients
- Patients below the age 25years and above 60 years.
- Patients with Type 1 Diabetes Mellitus (IDDM).
- Patients having secondary Diabetes Mellitus.
- Patients suffering from any severe systemic illness.

Investigation

- FBS & PPBS

Blood sample was collected up to 2-4ml. as per requirement

CRITERIA FOR ASSESSMENT

Subjective Assessment: To assess the subjective features and the clinical symptoms, which so ever presented by the patients, were graded in to four grades (0-3) scale on the basis of severity, before and after the completion of treatment plan.

Grade Complaint

- 0 No complaint
- 1 Presence of mild complaint
- 2 Presence of moderate complaint
- 3 Presence of severe complaint

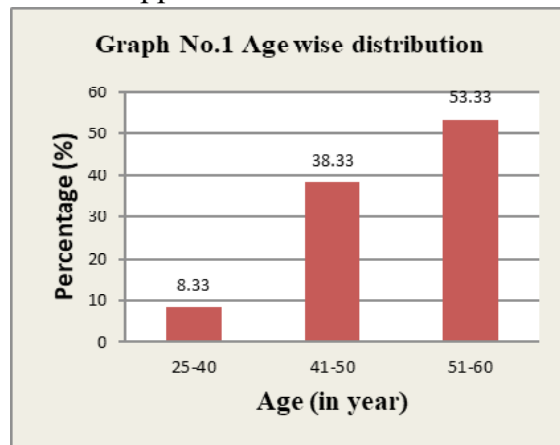
Objective Assessment

- Fasting Plasma Glucose
- Post prandial

Graphpad InStat-3 software was used for statistical analysis.

OBSERVATION AND RESULTS:

In this study, total 60 patients were registered and out of 60 patients, 45 cases turned up for follow-up and 15 patients were dropped.





In this study the majority of the patients 53.33% were reported in the age group of 51-60 yrs followed by 38.33% in the age group of 41-50 yrs and 8.33% in the age group of 25-40 yrs. (Graph no.1) In this study maximum number of patients 96.66% were belonging to urban habitat and least 3.33% patients were belonging to rural area (Tab. 1) 55% patients having family history of *Prameha*, while 45% patient were found with no family history of *Prameha* (Tab.2) In the present study maximum number of patients 43.33% were belonging to *Kapha -Vat Prakriti*, 35 % patients were belonging to *Pitta-Kaphaj Prakriti* whereas 21.66 % patients were belonging to *Vat-Pitta Prakriti*. (Tab.3) These shows that incidence of disease is maximum when there is dominance of vata and kapha in the body constitution. Nidan wise distribution shows that most of the DM. patient were consuming Guru, Snigdha, Sheeta, Madhura, Amala, Lavana predominant Ahara regularly which are consider the main causative factor of this disease. Asyasukham, avyayama, Achinta and Diwaswapana are the major Viharatmaka nidanas found in this study. This confirms that Lack of exercise, Sedentary lifestyle and physical inactivity are causative factors for Type 2DM. (Tab.4&5)

Effect of therapy on Subjective parameter- On intra group comparison in both the groups, mean difference of all the symptoms i.e. *PrabhutMutrata*,

AvilMutrata, KshudhaAdhikya, Trushna Adhikya, Gal-Talu Shosha, Kar-Pad dhaha, Kar-Pad shuptata, Pindikoudvestana, Nisha Mutrata, Daurbalya were reduced after treatment and found statistically extremely significant, very significant and significant respectively which indicates the efficacy of the treatment. On inter group comparison of group A and group B effect of treatment on subjective parameters showed that mean difference of group A is more than group B so it can inferred that group A is better than group B in all subjective parameters. (Tab.6)

Effect on FBS & PPBS-On intra group comparison, both the groups showed ,reduction in FBS but statistically mean difference of FBS before treatment and after treatment was found not significant. On inter group comparison of group A and group B effect of treatment on FBS, both the groups showed unequal result with statistically extremely significant difference ($p < 0.0001$). Mean difference of FBS in Group A was 80.74 and in group B was 6.100. So we can say that in improvement of FBS in Group A is better than Group B. (Tab.7). On intra group comparison of PPBS in both the group before treatment and after treatment showed statistically significant result. On inter group comparison of group A and group B, effect of treatment on PPBS, both the groups showed unequal result with



statistically extremely significant difference ($p < 0.0001$). Mean difference of PPBS in Group A was 117.55 and in group B was 18.384. So we can say that improvement of PPBS, Group A is better than Group B. (Tab.8)

Table No.1 Habitat wise distribution of patients.

Family History	No. of Patients	Percentage (%)
Absent	27	45.00
Present	33	55.00
Total	60	100

Table No.2 Family History wise distribution of patients

<i>DehaPrakriti</i>	No. of Patients	Percentage (%)
<i>VataPitta</i>	13	21.66
<i>PittaKapha</i>	21	35.00
<i>KaphaVata</i>	26	43.33
Total	60	100

Table No.3 Prakriti wise distribution of patients.

Habitat	No. of Patients	Percentage (%)
Rural	2	3.33
Urban	58	96.66
Total	60	100

Table No.4 Aharatmaka Nidana wise distribution of patients.

<i>Aharatmaka Nidana</i>	No. of Patients	Percentage (%)
<i>Guru Ahara</i>	42	70.00
<i>Snigdha Ahara</i>	39	65.00
<i>Sheeta Ahara</i>	35	58.33
<i>Madhura Ahara</i>	41	68.33
<i>Amla Ahara</i>	18	30.00
<i>Lavana Ahara</i>	26	43.33
<i>Kshira/Ghrita/Dadhisevan</i>	30	50
<i>Gramya/Anupa/Audaka-Mamsa Ahara</i>	26	43.33

Table No.5 Viharatmaka Nidana wise distribution of patients.

<i>Viharatmaka Nidana</i>	No. of Patients	Percentage (%)
<i>Avyayama</i>	37	61.66
<i>Diwaswapa</i>	20	33.33
<i>Asya Sukha</i>	41	68.33
Achinta	26	43.33



Table No.6 Effect of treatment on Sign and Symptoms.

Sign and Symptoms	Group	Mean		MD	% Relief	SD	SE	Wilcoxon matched-pairs signed & p value
		BT	AT					
<i>PrabhutMurtara</i> (Polyuria)	A (n=20)	1.150	0.2000	0.9500	82.60	0.8256	0.1846	W=105, N=14 p<0.0001,ES****
	B (n=25)	0.8400	0.4000	0.4400	52.38	0.5831	0.1166	W=55, N=10 P=0.0020,VS**
	Mann- Witney U-statistic = 161.5, p = 0.0451, S*							
<i>AvilMurtara</i> (Turbidity of Urine)	A (n=20)	0.9000	0.1500	0.7500	83.33	0.9665	0.2161	W= 45, N=9 P=0.0039,VS**
	B (n=25)	0.8000	0.5600	0.2400	30.00	0.4359	0.0871	W=21,N=6 P= 0.0313,S *
	Mann- Witney U-statistic = 182.5, p = 0.1164, NS							
<i>KshudhaAdhikya</i> (Polyphagia)	A (n=20)	1.000	0.1500	0.8500	85.00	0.5871	0.1313	W=120,N=15 p<0.0001,ES****
	B (n=25)	1.000	0.4400	0.5600	56.00	0.6506	0.1301	W=78, N=12 p=0.0005,ES***
	Mann- Witney U-statistic = 182.5, p = 0.1382 NS							
<i>TrushnaAdhikya</i> (Polydipsia)	A (n=20)	1.250	0.2000	1.050	84.00	0.8870	0.1983	W=105,N=14 p<0.0001,ES****
	B (n=25)	1.040	0.5600	0.4800	46.15	0.5099	0.1020	W=78, N=12 P=0.0005,ES***
	Mann- Witney U-statistic = 159, p =0.0361 S*							
<i>Gal-TaluShosh</i> (Dryness of mouth)	A (n=20)	0.7500	0.0500	0.7000	93.33	0.4702	0.1051	W=105,N=14 p<0.0001,ES****
	B (n=25)	0.8000	0.3600	0.4400	55.00	0.5831	0.1166	W=55, N=10 P=0.0020,VS**
	Mann- Witney U-statistic = 182, p = 0.1172 NS							
<i>Kar-Pad dhah</i> (Burning sensation in palms & sole)	A (n=20)	1.000	0.1500	0.8500	85.00	0.6708	0.1500	W=105,N=14 p<0.0001,ES****
	B (n=25)	1.000	0.3600	0.6400	64.00	0.7000	0.1400	W=91, N=13 P=0.0002,ES***
	Mann- Witney U-statistic = 206.5, p = 0.3197 NS							
<i>Kar-Pad Suptata</i> (Numbness in hands & feet)	A (n=20)	0.7500	0.1000	0.6500	86.66	0.8127	0.1817	W=55, N=10 P=0.0020, VS*
	B (n=25)	0.8800	0.2800	0.6000	68.18	0.6455	0.1291	W=91, N=13 P=0.0002,ES***
	Mann- Witney U-statistic = 249, p = 99.07NS							
<i>Pindikoudvestanah</i> (Cramps in legs)	A (n=20)	1.250	0.3500	0.9000	72.00	0.5525	0.1235	W=136, N=10 p<0.0001,ES****
	B (n=25)	0.9200	0.4000	0.5200	56.52	0.5859	0.1172	W=78, N=12 P=0.0005,ES***
	Mann- Witney U-statistic = 166, p = 0.0528 CNS							



NishaMutrat a(Nocturia)	A (n=20)	1.300	0.2500	1.050	80.76	0.8870	0.1983	W=105, N=14 p<0.0001,ES****
	B (n=25)	1.080	0.5200	0.5600	51.85	0.6506	0.1301	W=78, N=12 P=0.0005,ES***
	Mann- Witney U-statistic = 190, p = 0.0732 NS							
Daurbalya (General debility)	A (n=20)	1.200	0.2000	1.000	83.33	0.8584	0.1919	W=105,N=14 P<0.0001,ES****
	B (n=25)	0.8400	0.3200	0.5200	61.90	0.7703	0.1541	W=55, N=10 P=0.0020,VS**
	Mann- Witney U-statistic = 165.5, p = 0.0521 NS							

Table No.7 Effect on FBS

Group	Mean		MD	SD	SE	Paired t test	p value
	BT	AT					
A (n=20)	177.23	96.49	80.74	57.29	12.81	t=6.302	p=0.001, ES***
B (n=25)	140.31	134.21	6.100	22.78	4.55	t=1.338	p=0.1933, NS (p>0.05)
Unpaired t test p<0.0001 , t=5.316 ES****							

NOTE : p <0.0001 ES **, p = 0.0001 to 0.001 ES ***, p >0.05 NS**

Table No.8 Effect on PPBS

Group	Mean		MD	SD	SE	Paired t test	p value
	BT	AT					
A (n=20)	267.01	149.47	117.55	95.09	21.263	t=5.528	p<0.0001, ES****
B (n=25)	211.55	193.16	18.384	39.10	7.820	t=2.351	p=0.0273, S*
Unpaired t test p<0.0001 , t=4.332 ES****							

NOTE : p <0.0001 ES **, P= 0.01 to 0.05 S***

DISCUSSION

Possible Justification for effect of therapy:

Excessive formation of *Kleda* and *Ama* in the body causes increased frequency and quantity of urination. Regular *Yoga* practice improves the *Agni* and tones

the internal organs and *Amalaki* due to *Kashaya*, *Tikta* and *Katu Rasa* acts as *Sangrahi* and *Kleda*, *Meda*, *ShlesmaShoshaka* thus reduces the symptom *PrabhutaMutrata*.

Galatalushosha are the result of excessive excretion of *Dravya Dhatu* through *PrabhutaMutrata*. As both the



therapy showed improvement in *PrabhutaMutrata* simultaneously it reduces ***Galatalushosha***.

Amalaki has *Deepana* and *KashayaRasa* property due to its *VishadaGuna* it clears the fluid, increase *Malotpatti* thus decreases the excess of *Kleda* and *AvilaMutrata*.

Vitiated *Kapha* and *MedaDhatu* obstruct the channels so the *VataVridhhi* occurs. *Amalaki* and *Yoga* therapy improves the status of *Agni*, Cleans the *Strotus* so improvement in ***Kshudhaadhikya*** was observed.

Amalaki has *Mridurechana* and *SheetaVeerya* thus pacifies the *Pitta* which is responsible for ***Karpaddaha***.

Karpadsuptata occurs due to inactivity of nerves due to *Shrotorodha* of *Kapha*. *Yoga* improves the circulation and *Amalaki* had *Strotoshodhana*, *Tridoshashamak*, *Rasayana* property. Therefore it might have produced proper *Dhatu* and improved *Rasaraktasamvahana*. So they helped to diminish ***Karpadsuptata***.

Yoga therapy improves blood supply to muscles and produces muscular relaxations and *Rasayana*, *Balya* and *Tridoshaghna* property of *Amalaki* helps to cure ***Pindikodwestana***.

Daurbalya is produced due to inadequate nourishment of the *Dhatu*. As *Amalaki Churna* has *Rasayana* property

and regular *Yoga* therapy help to utilize the unspent glucose in the release of energy hence cure the ***Daurbalya***.

FBS & PPBS - Though both fasting and post-prandial sugar are present in blood, there mechanism of production is quite different. Fasting blood sugar is increased due to inadequate suppression of gluconeogenesis i.e. insulin deficiency and post-prandial blood glucose is increased due to reduced peripheral utilization of glucose i.e. insulin resistance. [5] *Yoga* therapy reduces the glucagon and possibly improving the insulin action responsible for reduction in FBS. Improved blood supply to muscles through yoga might enhance insulin receptor causing increased glucose uptake by muscles and reduces the PPBS. [6] *Amalaki* primarily contains tannin, alkaloids, phenolic compounds, amino acids and carbohydrates. It is rich in chromium and contains many nutrients like Vit.C, Vit.B, calcium phosphorus, iron and carotene. It plays a role in reducing oxidative stress and improving glucose metabolism in type 2 DM. [7]

CONCLUSION:

Intake of *Guru*, *Snigdha*, *Madhur Ahara* and Sedentary Lifestyle are the main etiological factors for Type-2 Diabetes Mellitus.

शेष पेज नं० 24



EFFECT OF AN AYURVEDIC FORMULATION TO TREAT INSOMNIA: A CASE REPORT

- Upasna¹, O. P. Singh², Shweta Shukla³
e-mail : upasna.gulati91@gmail.com

ABSTRACT :

Insomnia is an extremely common disorder. The prevalence of insomnia in a study depends on the criteria's selected for determining the prevalence. It is well known that several factors like gender, age, psychiatric disorders among several others are risk factors for insomnia. The stress of modern urban life adds to the factors responsible for an increase in the prevalence. In addition, several co-morbid factors can have a significant effect on the prevalence of insomnia. In the present case study, a female patient of age 50 years having complaints of reduced and disturbed sleep was treated with self formulated Ayurvedic formulation for 90 days. She was reported to have significant improvement in the duration of sleep and sleep patterns. Along with this, there was also improvement in the symptoms which were because of disturbed sleep.

INTRODUCTION:

Sleep is one of the essential and basic physiological processes. Sleep is not a mere passive state but an active neurobehavioral state maintained by a

highly organized interaction of neural networks and neurotransmitters of the central nervous system. Sleep has an important role in the regulation of central nervous system and the body's physiological functions, regulating metabolism, catabolism, temperature, learning and memory consolidation [1].

Insomnia literally means "lack of sleep at bedtime." It is both a symptom and a disorder. The patho-physiology of insomnia is highly complex involving multiple factors that provide inputs to the sleep system. The reported prevalence of insomnia is 9% in the general population and about 30% suffer from occasional insomnia. [2],[3] A higher prevalence of sleep disorders related to initiation and maintenance of sleep (28%) was reported in an urban population from north India. [4] These observations suggest that insomnia is an unrecognized burden in India and underscores the need for community-based studies across different socio-economic situations. The most important risk factors associated with insomnia are anxiety and depression in addition to health-related variables. [5]

¹M.D Scholar, ²Professor and Head, ³Assistant Professor, P.G. Deptt. of Kayachikitsa, Rishikul Campus, UAU, Dehradun.



CASE REPORT

A female patient, aged 50 years was registered from the O.P.D (OPD/ IPD No. K-3116/9719), P.G. Department of *Kayachikitsa*, *Rishikul Campus Haridwar* on 15-03-2018.

Chief Complaints

Patients mainly complaints of reduced and disturbed sleep since 1-2 years. Although, her Blood Pressure was recorded to be normal.

History of Present Illness

According to the patient, she was asymptomatic before 3years. Since then she feels like her sleep duration got reduced day by day. She also noticed that her sleep remained disturbed whole night. She consulted to allopathic doctors and they started Benzodiazapines (i.e. Alprex) to improve her sleep. Initially, the drug showed very good results but as the time passed, she became dependent on the drug and sometimes she had to increase the dose to sleep. Then, she decided to go for some *Ayurvedic* treatment. So, she came to *Rishikul Ayurvedic Hospital* for further treatment.

History of Past Illness- No history of DM, HTN, Hypothyroidism.

Treatment History- Taken allopathic treatment (Benzodiazapines).

Family History- No relevant history.

General Examination:

Gen. condition – Average	Temperature –98.8°F
B.P. -110/78 mm Hg	Height-154 cm
Pulse rate - 74/min.	Weight- 58 kg
Respiratory rate- 18/min.	BMI-24.4 kg/m ² (i.e. within normal limit).

Physical Examination:

Sleep- Reduced and Disturbed	Pallor- Not Present
Appetite- Normal	Cyanosis- Not Present
Bowel- Regular	Clubbing- Not Present
Micturition- Normal	JVP- Not Raised
Edema- Not Present	

Systemic Examination-

No abnormality was detected in Gastro-intestinal, Respiratory, Cardiovascular and Nervous system.

Ashtavidha Pariksha

<i>Nadi – Vatadhika Tri-dosaja.</i>	<i>Shabda(speech)- Samanya</i>
<i>Mala (stool) - Niram</i>	<i>Sparsha- Samanya</i>
<i>Mutra (urine) – Samanya</i>	<i>Drika- Samanya</i>
<i>Jihwa (tongue)- Samanya</i>	<i>Akriti- Samanya</i>

Study Design

- a. **Selection of Drug:** *Ayurvedic* formulation made to treat Hypertension.



b. Dose of Drug: 2 tablet HS with luke warm water.

c. Duration of study: 90 days

d. Type of Study: Single blind

e. Assessment: The assessment of the patient was done at the interval of 30 days.

Contents of Ayurvedic formulation:

1. Root of *Jatamansi* (*Nordostachys jatamansi*) – 1 part
2. Stem Bark of *Arjuna* (*Terminalia arjuna*) – 1 part
3. Whole herb of *Gokshura* (*Tribulus terrestris*) – 1 part

4. Whole herb of *Mandookparni* (*Centella asiatica*) – 1 part

5. Root of *Sarpagandha* (*Rauwolfia serpentina*) – 1/4 part

6. Root of *Tagara* (*Valeriana wallichii*) – 1/2 part

Each drug was taken in the above mentioned proportion. It was presented in the tablet form of 250 mg each.

Patient was also given some psychotherapy to relieve her stress and other guidelines like to have light dinner on time, avoid use of T.V and mobile late in night, massage her foot with luke warm oil or ghee etc.

Investigations done:

Haematological	B.T.	A.T.	Haematological	B.T.	A.T.
Hb (gm%)	12	12.7	B. Urea	29	25
W.B.C/cmm.	8400	7850	S.Creatinine	0.65	0.4
Neutrophils (%)	56	50	S. Uric Acid	4.02	3.32
Lymphocytes (%)	26	22	S. Cholesterol	176	165
Monocytes (%)	01	01	S. TGL	151	165
Basophils (%)	00	00	S. HDL	45	42
ESR(mm)	32	28	S. LDL	89	75
FBS (mg/dl)	97.24	98.06	VLDL	24	23
SGPT	28	26			
SGOT	25	23			

E.C.G. (If necessary):- Not done

Criteria of Assessment:

Subjective: The subjective assessment was done on the basis of following signs and symptoms as described below:

- *Shiro-ruja* (Headache)
- *Ghabrahat* (Palpitation)
- *Klama* (Fatigue)



- *Bhrama* (Vertigo)
- *Akshiraga* (Redness of eyes)
- *Krodha- prachurya* (Irritability)
- *Alpanidra / Anidra* (Insomnia)

The above symptoms were graded as below: None -0, Mild-1, Moderate-2, Severe-3

Progress of Patient in Three Follow Up Visits:

Symptoms	BT	(After 30 day)	(After 60 day)	(After 90 days)	Improvement (%)
Shiro-ruja (Headache)	2	1	0	0	50%
Palpitation (Ghabrahat)	1	1	0	0	100%
Klama (Fatigue)	1	---	---	0	100%
Bhrama (Vertigo)	1	0	0	0	100%
Akshiraga (Redness of eyes)	----	---	---	---	----
Krodha- prachurya (Irritability)	2	1	1	1	50%
Alpanidra / Anidra (Insomnia)	3	1	1	1	66.6%

RESULT

Follow up was made on 30th day, 60th day and 90th day. During this period patient does not develop any other complaint. She reported gradual improvement in *Shiro-ruja* (50%), *Ghabrahat* (100%), *Klama* (100%), *Bhrama* (100%), *Krodha-prachurya* (50%), and *Alpanidra/ Anidra* (66.6%). After treatment patient got significant relief in the symptoms.



DISCUSSION:

The present study shows that the *Ayurvedic* formulation prepared with an objective to treat Hypertension as its effect on insomnia regardless of the Blood Pressure. The preparation also helps in overcoming the dependency over Benzodiazepines which is stopped during the trial period. It is seen that the drugs used mainly in this preparation have *Medhya, Hridya, Vata Anulomaka, Ama Pachaka* and *Nidrajanana* effect. The effect observed in the present study is because of these properties of the drug. The main cause of insomnia in the present case is stress. The preparation here used relaxes mind thus help in reducing stress because of which sleep pattern is improved.

CONCLUSION:

Insomnia is not only a disorder but is a symptom also. This mainly occurs in people who are over stressed, have mentally tensions and burden which may be due to their work or family and have a lot of responsibilities in their life. The main factor for disturbed sleep is stress. If stress is removed by any means or if the psychotherapy or treatment is done to relax mind and reduce stress then sleep pattern or disturbed sleep can be improved without using any habit forming drugs like Benzodiazepines. So research should be done to improve sleep by natural ways instead of using drugs.

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MEASURES OF GERIATRIC CARE IN AYURVEDA

- Praveen Kumar Mishra¹, Akhilesh Shukla², Nidhi Markam³
e-mail : drpraveenku.mishra@gmail.com

ABSTRACT :

Geriatrics is a process of physical, psychological and social changes in multidimensional aspects. Geriatrics is a progressive irreversible phenomenon of body rather than disease. It is manifested as a medical as well as social problem world over. The number of elderly populations is increasing without limits and it is the challenge of the era to limit the disabilities of the elderly. A healthy and successful ageing is what everyone desires. Evidence based medicine and treatment has become the need of the hour. Modern medicine has evolved a separate branch for the cure of illnesses of the aged called as geriatric medicine. It focuses mainly on the health care problems of the elderly. Conventional system of medicine is not very satisfactory in this problem as lack of holistic and comprehensive approach towards this problem. Ayurveda, the Indian traditional holistic health science has got the potential for prevention of diseases by promotion of health and management of diseases occurring in old age. It has a broad spectrum of preventive measures for combating the ageing process. Rasayana (Rejuvenation)

or Geriatrics or Jara chikitsa in Ayurveda is a unique therapeutic methodology to delay ageing and to minimize the intensity of problems occurring in this degenerative phase of one's life. Panchakarma is a radical approach of Ayurveda designed to cleanse the srotas of the body. It is beneficial for preventive, promotive and rehabilitative health purposes and management of various systemic diseases.

Key words: Geriatrics, Geriatric health, Rasayana Chikitsa, Panchkarma, Jara

INTRODUCTION

Populations around the world are rapidly ageing¹. The pace of population ageing is much faster than in the past and all countries face major challenges to ensure that their health and social systems are ready to make the most of this demographic shift². Ageing is natural phenomenon which is unavoidable. It is an irreversible consequence of the human body. The old age is frequently associated with set of illness as well as discomfort in healthy lifestyle. Common conditions in older age include hearing loss, cataracts

¹Associate Professor & HOD, ²Assistant professor, ³Assistant professor, Department of Samhita and Siddhanta, Govt. Ayurveda College and Hospital, Bilaspur, Chhattisgarh, India



and refractive errors, back pain, neck pain, osteoarthritis, chronic obstructive pulmonary disease, diabetes, depression, and dementia. Furthermore, as people age, they are more likely to experience several conditions at the same time³. The causes of these diseases are multifactorial and sometimes unknown. So only, elderly people require special attention in diagnosis of their disease as well as during treatment. These geriatric diseases need long term or lifetime care and may not be possible to completely reverse it. The conventional system of medicine has not yet provided any satisfactory answer for the effective management of this problem. In this situation, all the health systems of the world is eyeing towards traditional system of medicines specially Ayurveda to find a better solution. Ayurveda is world's oldest system of health care and it has got all the potential to prevent and manage the diseases occurring in old age. Rasayana or Geriatrics or Jara Chikitsa, a specialized branch of Ayurveda which deals with the health problems of the aged and measures to delay ageing and to minimize the intensity of problems occurring in this degenerative phase of one's life. It is beneficial for preventive, promotive and rehabilitative health purposes and management of various systemic diseases.

Aim

- Preventive health care measures in geriatrics.

Objectives

- To evaluate the current status of geriatrics and the common disorders of the aged.
- To discuss the concepts of geriatric nutrition.
- To discuss the geriatric health care measures in Ayurveda.

Concept of Jara in Ayurveda

Etymologically, the term Jara is derived from the Panini's Vyakarana from Dhatu Jrs -Vayohanou which means loss during the period of lifespan⁴. Jara (ageing) is mentioned in Ayurveda as Svabhava of the living beings⁵. Old-age, that is Vriddhavastha or Jirnavastha refers to the period after 6th or 7th decades of life. As per Ayurveda during old age natural dominance of Vata Dosha is observed and Vata dominant diseases are expected more in this age group. There is gradual deterioration of Dhatu, Indriya, Bala, Veerya, Paurusha and Parakrama and with this there is lessening of cognitive functions such as Grahana, Dharana, Smarana, Vachana, Vigyana etc. The major senile changes seen at this time are wrinkling of skin, graying of hair, baldness, cough, dyspnea and gradual diminishing ability to perform physical work.^{6,7,8} Jara or Vriddhavastha is further divided as Kalaja (timely) which manifests after the



age of 60 or 70 years and natural one. The second is, Akalaja (untimely) which is due to the aggravation of doshas which vitiates dhatus and bring early ageing changes. This condition requires treatment to correct the vitiation.

Daily and Seasonal Regimens

Maintenance of a healthy life is one's own responsibility and it is done by following the principles laid down in the context of Svasthavritta which means the regime of abiding one's own nature. Health is the dynamic integration between our environment, body, mind and spirit. Ayurveda, the traditional Indian health systems lay emphasis on preventing the diseases. Elaborate description is available on personal hygiene encompass diet and regimen during daily routine (Dinacarya) which includes waking up early morning before sunrise, evacuation of natural urges, oral hygiene, care for all the sense organs viz. eyes, nose, ears, skin and tongue, strengthening physical activities, bath, spiritual practices, clothing and dressing, beauty care, use of ornaments, healthy and timely diet, care for foot, professional activities, timely healthy sleep avoidance of suppression of natural urges etc. All these are essential to lead a healthy diseases free long life.

Seasonal routine (Ritucarya) gives guidance to deal with the impact of

seasonal changes in our health. The seasonal removal of aggravated Dosha during specific seasons by Shodhana Karma⁹ helps to break the pathogenic process of Doshas. The specific diet pattern and activities are recommended for each season to maintain the healthiest state of body. In short, for food and drinks, Madhura, Amla and Lavana rasa are good during winter and rainy seasons, Katu, Tikta and Kashaya Rasa is recommended during Vasanta Ritu (spring season), During summer Madhura and during Sharad Ritu (autumn) Madhura, Tikta and Kashaya Rasa is recommended. During Summer and autumn, the dravyas having Sheeta Guna are recommended in food and drinks, whereas during early and late winter, spring and rainy seasons Ushna guna dravyas are good. During Spring and Autumn, food and drinks which are having Ruksha Guna are recommended and in there four seasons Snigdha dravyas are good to consume¹⁰. Such guidelines are given after the keen observations of the changes which take place in the season and in the body. Following that helps to protect health from the changing environment.

Geriatrics Nutrition

Nutrition is seen as the science of food and its relation to health and aging¹¹. Geriatric nutrition plays an important role in the quality of life for the older



individual¹². Elderly people have different nutritional requirements compared to the normal adult population. With increasing age, people become more vulnerable to malnutrition for many reasons including Arochaka (anorexia) due to ageing, medication, disease like Smriti nasha (dementia), Manoavasada (depression), Stroke, Kampavata (Parkinson disease) and other neurological disorders, poor dentition, delayed gastric emptying, ill-fitting dentures, swallowing problems, oral infections, taste changes and diminished smell sensation. The diet should be regulated taking into account the habitat, season, age, etc. the diet should be balanced and the quantity should be according to one's digestive capacity. Following points may be considered while planning / advising dietary and other life style regimen.

1. The food should be tasty, nutritious, fresh and good in appearance.
2. Too spicy, salty and pungent food should be avoided.
3. It should neither be very hot nor very cold.
4. Liquid intake should be more frequent and in small amount.
5. Heavy food should be avoided or rarely can be prescribed in a limited quantity.

6. Heavy food should not be given at night. The proper time for night meals is 2-3 hours before going to bed. After dinner, it is better to advice for a short walk.
7. Heavy physical work should be avoided after meals.
8. Mind should be peaceful while eating.
9. To eat food only whenever hungry and avoidance of over eating.
10. Inclusion of sufficient amount of vegetables and fruits in diet.
11. Daily intake of vegetable soup and fruit juices.
12. Milk and ghee are the Agraushadha (drug of choice) of vardhakya (senility). Hence their daily usage is advisable. Patient with hyperlipidemia, ischemic heart disease, obesity use it after consulting the physician.

As ageing is a gradual process, proper nutrition for the elderly people is required for life time. Nutritional deficiency is often seen in the aged people and this is a challenge to provide the good nutrition as per the specific requirements with growing age.

Physical activities for older adults:

As per WHO In adults aged 65 years and above, physical activities are required in order to improve cardiorespiratory and muscular fitness, bone and functional



health, reduce the risk of NCDs, depression and cognitive decline. Older adults should do at least 150 minutes of moderate-intensity aerobic physical activity throughout the week or do at least 75 minutes of vigorous-intensity aerobic physical activity throughout the week or an equivalent combination of moderate- and vigorous-intensity activity¹³. Ayurveda defines Vyayama as the physical activities which are desirable and are capable of bringing about bodily stability and strength. It is a sense of weariness from bodily labour and it should be practiced daily but only in moderation.^{14,15,16}

Healthy sleep during old age

During Vriddhavastha, Vata Dosha is dominant and there will be reduction in the nocturnal sleep time with growing age. Aging is associated with decreased ability to maintain sleep (increased number of awakenings and prolonged nocturnal awakenings), reduced nocturnal sleep duration, and decreased deep sleep (slow wave sleep)¹⁷. Like a proper diet, proper sleep is also essential for the maintenance of good health¹⁸. Happiness, proper nourishment, strength, virility, knowledge and, life itself depend on proper sleep¹⁹. For healthy Sleep, the bedroom should be calm and clean, with clean bed linens. Comfortable bedding encourages quality sleep; it provides good rest and happiness.

The bed should stand at knee joint level, and the mattress should be soft and pleasant

At the beginning and end of night, i.e. while going to sleep and waking up, one should only think about virtuous acts and avoid all negative thoughts. Lying down in an easy posture on a comfortable bed removes the sense of fatigue, pacifies or soothes, brings sleep and conducive to the growth of the body; conversely, lying down in a contrary manner is attended with contrary results²⁰.

Sadvritta (Code of Conduct)

A. Ethical code of conduct

A healthy mind is as important as healthy body. This ethical regimen contains principles of right conduct that are applicable to all. Effort should be made to maintain mental balance by satvik food and life style. Satvik ahara is considered to be the best hitakara (wholesome), pathyakara (compatible) diet. It is a vegetarian diet containing non-oily, non-spicy articles which are easily assimilable (Satmya) e.g. milk, rice, green vegetables, certain fruits etc.

1. One should suppress urges of greed, grief, fear, fury, pride, shamelessness, envy and excessive passion.
2. Observe self-control and always speak truth.
3. One should not harm others and should always act in a polite manner.



4. Errors / mistakes in dietetic and behavioral habits if any should be given up gradually and good habits should be practiced.
5. An intelligent person who seeks happiness should make a great effort to make good company and avoid the bad one.

B. Social hygiene

Man is a social animal and one has to work in the society in a manner which is conducive to better hygiene and sanitation of his community. This can only be achieved by individual's efforts as well as his co-operation with the concerned authorities.

1. The house refuse / waste should not be thrown at random. It should be consigned to its proper place.
2. The drainage should not remain blocked.
3. Latrines and urinals should be kept properly cleaned.
4. Water sources should not be contaminated and well protected from environmental pollutants.
5. In case of outbreak of any infectious disease concerned authorities should be immediately reported.
6. Always discourage use of plastic bags.

Achara Rasayana (Good conduct)

Ayurveda adopts Satvavajaya chikitsa (non-drug psychotherapies) that includes various codes of conduct (achara rasayana) for maintenance of better mental health and to prevent various mental disorders. This includes the factors viz. Practice universal prayer, always being truthful, speak softly, gently, speak with others kindly and with smiling face, always be considerate about others' feelings, donate generously, don't lose temper, don't take much stress, don't ridicule and never harm others.

Rasayana (Rejuvenation)

The strength of Ayurveda in the context of Geriatric care is Rasayana therapy. Rasayana stands as an answer in preventing premature ageing and to solve the problems due to ageing; it also ensures healthful longevity including mental health and resistance against various geriatric disease conditions. The observance of dietetics, rules of hygiene are essential for the success of treatment prescribed for healthy longevity of life and rejuvenation. Below the table no.1 shows the specific Rasayana drugs recommended for common geriatric diseases.^{21, 22}

The principles laid down in the daily routine (Dinacarya), seasonal routine (rutucarya) and behavioral and ethical principles (Sadvritta) has been described here in brief. These measures are for



Table no.1. shows the specific Rasayana drugs which can be recommended for common geriatric diseases-

Selected Diseases	Suggested Naimittika Rasayana
Diabetes mellitus	Silajatu, Haridra
Leprosy & Dermatomes	Tuvaraka, Haridra, Somaraji
Bronchial Asthma	Haridra, Sirisha
Hypertension & IHD	Sarpagandha, Pushkaramula, Arjuna
Urinary Disorders	Punarnava, Gokshura
Arthritis	Bhallataka, Eranda, Guggulu
Neurodegenerative Dis eases	Brahmi, Ashwagandha
Dementia	Brahmi, Sankapushpi
Immunodeficiency	Amalaki, Guduchi
Cancer	Bhallataka, Amalaki

preventing the diseases as well as for promoting the health. Proper observance of these principles leads to the perfect physical, mental and spiritual wellbeing.

CONCLUSION

Due to increased elderly population, the prevalence of Geriatric specific disease conditions is also increasing. The biggest challenge with geriatric diseases

is that in most of the cases the condition cannot be attributed to a single cause. Geriatric health care approach has two aspects: measures for the promotion of health and longevity and management of diseases of old age. The medical field has been able to manage the geriatric disorders, but they failed in the point of promotion of a healthy and successful



ageing. Ayurveda is notably strong in this aspect and it has rich potential to promote health of the elderly. It is the duty of the young health care professionals to explore the Ayurveda classics and to create awareness about the strength of Ayurveda in geriatric care.

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पेज नं० 10 का शेष

Study group kept on specific *Yoga* Therapy and *Amalaki Churna* showed better effects with respect to subjective and objective parameters in Type-2 Diabetes Mellitus.

Interventions like *Yoga* therapy and *Rasayana* therapy (*Amalaki Churna*) are useful as add on therapy for control of Type-2 Diabetes Mellitus.

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SNAKE BITE POISONING - FIRST AID TREATMENT IN AYURVEDA

- Dipti Sharma¹

e-mail : drdeptisharma1982@gmail.com

ABSTRACT :

Snake bite in India is listed as neglected tropical disease and designed with an exclusive protocol for its management as per WHO as military in vary from approximately 1300 to 50000 annually uptown 2016 . Ayurved has a unique approval for its own ,for the management of snake bite poisoning which has parlance with concept of modern medical science. In 24 th chapter of Chikitsa Sthana "Visa Chikitsa" Adhaya Acharya Chatur has given 24 modilaties for management of poisoning cases know as "Chatur Vimshati Upakarma" which can be sub divided to justify them with scientific understanding. In this article an attempt is made to understand these chatur Vimshati Upakarma with emphasis on the modilaties that can hinder the entry of poison into systemic circulation.

Key Words : Ayurved, Chatur Vimshati Upakarma, Visha, Snake bite .

INTRODUCTION

Snakes are more prevalent in temperature and tropical countries. India

is a tropical country in which out of 216 species of snakes 52 venomous snakes are found .Out of 250000 snake bite evidence in India 50000 people died in Tamil Nadu, West Bengal, Maharashtra , Kerala and Uttar Pradesh.

There are five families of poisonous snakes out of which big four Indian Cobra, Common Krait, Russell's Viper ,Saw Scaled Viper are the four venomous snake present in India, which are mainly responsible for snake mortality in India.

Type of Snake Bite

Acharya Sushruta and Vagabhata both explain and classified snake bite as –

Acharya Sushruta

- * Sarpita - Deeply inflammed wound with very minute blood secretion
- * Radita - Superficial wound with alpvisa
- * Nirvisha - Non poisonous bite without inflammation
- * Sarpangabhihata - No actual bite is present it is just an accidental contact with snake or any other thing which look like a snake .The symptoms which appears are those as of snake bite with

¹Asst. Professor, Agad Tantra Department, SAM College of Ayurvedic Sciences and Hospital, Bhopal



very low potency. This Sarpangabhithata is explained by Charak as Shanka Visha which is because of fearful complex or suspected poisoning.

Acharya Vagbhatta divided bite of snakes in five divisions

- * Tundhata - Just touched
- * Vyalidha - marks of teeth without bleeding
- * Vyalupt. - Deep wound
- * Dastak. - Deep and Serious wound
- * Drastak Nispidit - Deep and inflamed wound

As per modern medicine there are two types of snake bite Dry and Wet. In dry bite no or minimal poison is injected these type of bites are done for warning or for defense, here a intention is just to escape from the site. So very less quantity of poison is injected in such dry bites.

In wet bite amount of venom is in bulk which enters in systemic circulation and chance of being death of victim is very high. These type of bites are normally done by snakes when they are hungry and are behind their prey. These types of snakes are ferocious at time and when individual come across, snake gives a wet bite which is very dangerous and may cause even death.

Management of Snake Bite in Ayurveda

A protocol is given by WHO for which emphasized mainly on first aid treatment for snake bite.

1. Assurance and re-assurance to the patient who is anxious due to snake bite.
2. Immobilisation of part which is bitten through sling or splint as movement of bitten part causes muscular contraction which in turn increases the absorption of venom into the blood stream and lymphatic circulation.
3. Avoid unwanted interference with wound as it may cause infection, increase bleeding and absorption of venom.

In Ayurveda Acharya Charak said 24 modalities i.e. ChaturVamshati Upakarma for management of poisoning which also act as first aid treatment for snake bite poisoning. All these 24 modalities can be used in all type of poisoning, one has to examine and decide that which procedure is suitable for specific condition. These 24 modalities or upakarma can be divided into five major set depending upon the probable purpose of treatment. These procedures are –

1. Measure which restricts the entry of poison in systemic circulation.⁸

- a) Arishta bandhanam
- b) Utkartanam



- c) Nishpedanam
- d) Avagaham
- e) Achushanam
- f) Agni
- g) Parishekam
- h) Lepam

2. Elimination therapy(6)

- a) Rakta mokshanam
- b) Vamanam
- c) Virekam
- d) Nasyam
- e) Dhuman
- f) Pradhanamam

3. Supportive or Symptomatic treatment (3)

- a) Hrudayavaranam
- b) Sangyasthapanam
- c) Mruta Sanjeevanam

4. Counter acting medication/antidote(4)

- a) Mantra
- b) Lehan
- c) Aushadham
- d) Pratisaranam

5. Tropical Application(3)

- a) Upadhanam
- b) Anjanam
- c) Pratisaranam

In ancient text it is mentioned that without, entering the blood stream, poison

can not damage body tissue but if a single atom of poison enter the blood stream it is capable of destroying body tissue considering this priority the first step is preventing the entry of poison in to systemic circulation.

All the measure present in the first division is used to prevent or restricts the entry of poison in the systemic circulation. The eight modalities mentioned in the first division is beneficial in restraining the entry of poison in the systemic circulation or we can say that they act as or considered as the first aid treatment of snake bite poisoning.

1. Mantra

Mantra is the foremost and par excellence upakarma which nullifies the poison without failing as per Chakrapani. As per Acharya Charak mantra prevents the entry of poison in systemic circulation by occluding the blood vessels and protects from further infection also .When a person is bitten and the bite is of dry type it is necessary to reassure the patient and alleviate the anxiety and frightening ,this is successfully achieved by Mantra Chikitsa .In such type of cases Para sympathetic nervous system is stimulated ,the condition of frightened or fearfulness results in dilating of peripheral blood flow towards vital organ like brain and give rise to giddiness ,fainting or even collapse



based on the severity of the shock. When Mantra are chanted in a rhythmic manner ,they build confidence in person and reduce anxiety .By which there is stimulation of sympathetic nervous system and strengthen the peripheral blood vessels, which in turn maintain a normal blood flow to vital organs .Thus Mantra plays a very imp role in reassuring the person.

2. Arista Bandhana

The concept of arista bandhana is also well accepted even by the modern medical science. As per Acharya's there are two types of arista bandhana — mantra arista bandhana and mantra rahit arista bandhana. Mantra arista bandhana helps in reassuring and provides confidence in similar way of mantra.

Precautions of Arista Bandhana

- * As per Chakrapani, it should be applied before poison enters systemic blood flow.
- * As per Sushruta it should be applied only in case of bite occurred over limbs.
- * Arista should not be too tight or loose.

Adverse effect of gaddha Arista Bandhana

- * Shoona gatrata (numbness)
- * Puti, linna mansa (Gangrene formation)

As per modern medicine too application of tourniquet with great

pressure for long time occlude under lying main blood vessels ,lymph vessels and nerves which further interferes the circulation and nerve impulse.3, 4 , 5. Utkartana, Nishpidana and Chushana

These three modalities are done with an intention to prevent further damage to the under lying soft tissue and other structure like arteries , lymph vessels and nerves.

As per Acharya Sushruta poison remain at the site for 2 to 3 hours and as per Vagabhatt poison remains for 100 matra kala at the site or bite. Hence proper local measure are to be taken to eliminate the poison from the site of bite .Even as per modern medical science incision and letting of blood are very beneficial if they are done in first 30 min of bite.

Precautions taken before doing Chushana

*keep yava flour, cloths or mud in oral cavity before sucking poison from the site of bite, which prevent the contact of poison with oral mucosa .

*Shringa (instrument used for sucking poison) is also used which is comparatively safer .

Arista bandhana can only be used on shakha danshta ,if bite happened other than limbs these three upakarma are very beneficial. Parishek, Avaghan and Lepa By



using above modalities a possible elimination of poison is done from the site of bite. The incised bitten part no need a proper cleaning and local medication application. For this purpose Acharya's said to clean and apply seta drugs and other liquids .Application of Parisheka ,Avagaha and Lepa reduce local symptoms and also reduce infection in the wound.

Modern medical science also believe in concept that cold character of drug helps in contraction of local blood vessels and prevent further spread of remaining poison.

CONCLUSION

The treatment modalities emphasized in Ayurveda have a great significance and are valuable particularly in far away remote areas, these upakarma are capable in neutralizing the poison in different ways . Though there is certain vagueness in approach as compared to modern medical science.

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BASIC CONCEPT OF PARA SURGICAL PROCEDURES IN AYURVEDIC SURGERY

- Anand Puri¹, Suman Yadav¹
e-mail : dr.anandpuri2010@gmail.com

Ayurveda has a golden history of 5000 yrs in the field of treatment and life-science. It seen very modulations from ancient to modern but never forgot their fame. Many emperors came from different countries in ancient time and trying to defame or destroy this but they don't, and Ayurveda still stand with it's full potency. Ayurveda proves his potency time to time when other pathy fails to treat the disease, they came in shelter of Ayurveda and Ayurveda never disappoint them. For example when in present era all the antibiotics of modern medicine gets resistant to bacteria the AIIMS Bhopal trail a drug which is form by the combination of several Ayurvedic drugs such as Mahamritunjay Ras, Sudarsan Vati, Sanjivani Vati, Godanti Bhasm, Tribhuvankriti Ras etc. and named it. Fifatrol, is very effective against many bacteria, specially on Staphylococcus having without side effect.

This is only one example about potency of Ayurvedic Drug, there are several drugs researches which prove the power of Ayurveda. In Ayurveda there are

many Acharyas who gave their contribution to treat and prevent diseases. Acharya Sushruta is one of best surgeon doctor who published the oldest book of Surgery. He is famous as "Father of Surgery." Many procedure such as Eight type of Shastra karma- Chhedana (excision), Bhedana (incision), Lekhan (scraping), Bhedan (puncturing), Esana (probing), Aharana (extraction), Visravana (blood letting), and Sivan(suturing), three type of Chikitsa karma i.e. Purva karma, Pradhan karma, Paschat karma, 60 Upakrama for Vrana Chikitsa, Type of Shastra (sharp instrument) and their merit and demerit along with their use, Ahar-Vihar for Vranita purush (dietary habits for patients), Type of suture material and suturing. Acharya Sushruta also mentioned Plastic surgery (reconstructive surgery) for Karna (otoplasty), Nasa (Rhinoplasty), Chhinosta (oroplasty) are his soutri bution to surgery. And are the some example of Genuineness of Sushruta. Besides the text book contains many surgical procedure and treatments which helps us for treating the patient in present era also. Achrays

¹PG Scholar, ²Reader & HOD, Department of Shalya Tantra, Govt. P.G. Ayurvedic College & Hospital, Varanasi.



Sushruta mention the 6 steps of Chikitsa (Shat kriya kala) which also shows their long vision about disease, that at what step, disease will cure easily and what symptom shown.

While describing all the surgical procedure Acharya Sushruta also described Para surgical procedure for treating various diseases. In patients in which surgery can not be performed with sharp instruments, surgery can be performed by Anushastra's . Above review shows that Shalya tantra is one of the important branch of Ayurveda in which surgical and para surgical techniques had been described for the management of various diseases.

PARA SURGICAL PROCEDURE (Anushastra Karma)

"अशस्त्राप्येव शस्त्रकार्यं कुर्वन्तीत्यनुशस्त्राणि"
(इंदुः)

"शस्त्रसकृशानि— अनुशस्त्राणि" (हाराणचन्द्र)

Para surgical means surgical procedure performed by non surgical items or instrument in absence of surgical instruments. Acharya Sushruta described 14 type of Anushastra in which Agni Karma, Kshar Karma and Jalaukavacharana is foremost Anushastra Karma which is used mainly in children are in persons who are afraid of sharp instrument, in pregnant women, older patient etc.

Kshar Karma (Phytochemical Cauterisation)-

"तत्र क्षरणात् क्षणनाद्वा क्षारः" (सु.सू.11/4)

It's called kshar, since it has the property to dissolve (Ksharan) and excise (Kshana) the vitiated Doshas and infected tissues (Dhusta Dhatu) respectively¹.

"नानौषधिसमवायात् त्रिदोषघ्नः" (सु.सू.11/5)

A medicine derived from various herbs is called Kshar, since it destroys (the vitiated tissues and make them fall off) the tissues².

"शस्त्रानुशस्त्रेभ्यः क्षारः प्रधानतमः, छेद्यभेद्य—
लेख्यकरणात्रिदोषघ्नत्वाद्विशेषक्रियावचारात्त्वं"

(सु.सू.11/3)

According to Acharya Sushruta kshara (caustic alkali) is the most important one among Shastra (sharp instrument) and Anushastra (Accessory instruments) because it does functions like excision (removal) , cutting(dividing) and scraping, mitigates all the three Doshas and is suitable for being used by special methods³.

Importance of Kshar Karma⁴-

Kshar is the important Anushastra because it perform various action in the body i.e.

1. Tridoshaghata- Kshar is prepared by combination of many plant drugs (during its manufacture) so it mitigates the Tridoshas.
2. Action of kshar such as burning, ripening, bursting etc. are not hindered because of predominance of agneya



drugs (drugs of fiery nature).

3. Shodhan, Ropan, Shoshan, Lekhan- having these all action Kshar is used to treat an ulcer and wound.
4. Having liquefying property it destroys worm (bacteria, virus etc.), Aama (undigested materials).
5. It also destroys Kapha and cures Kushta (skin disease) and poisons and obesity.

Type⁵-

Mainly it is of two type i.e. Pratisarniya (applied externally) and Paniya (drunk internally).

Indication of Pratisaraniya Kshar⁶-

Application of Pratisaraniya kshar is indicated in Kustha(leprosy), Kitibha, Dadru, Mandal, Kilas (these all are the skin disease), Bhagandara (Fistula-in-ano), Arbud (Maligant tumors), Arsha (Haemorrhoids), Nadi Vrana (Sinus Ulcers), Skin Warts, Pin heads, Pigmented patches on the body and on the face, Moles on skin, External abscess, Worm, Disease produced by Poison, the seven disease of the mouth such as Upjihva, Adhijihva, Upkusa and danta vaidarbha, three kinds of Rohini. And in those disease where use of accessory instruments only has been indicated.

Indication of Paniya Kshara⁷-

Paniya Kshar is indicated in Gar Visha (Artificial Poison), Abdominal tumors, enlargement of the abdomen, Agni sanga

(disorders due to irregularities of digestive power), Ajeerna (indigestion), Sharkrashmary (urinary gravel and calculus), Arochak (loss of test), Aanah (distention of abdomen), Abhyanter Vidradhi (internal abscess), Krimi (worms), Visha (poison) and Arsha (hemorrhoids).

Contraindication of Kshara⁸-

Kshara should not be used externally or internally in bleeding disease, Durbals (weak persons), Balak (children), Vridha (aged patients), Bhirutwa (cowards), fevers, subjects of Pitta dominant constitution, those who are suffering from giddiness, fainting, blindness, and other similar ailments. The patients with sarvangshotha (anasarca) Udar rogi (patient who suffer with abdominal disease), Rakta-pitta, Pregnant women, Prameha (diabetic patient), Trishna (thirst), Napunshak (impotent) and female patients with menstrual cycle and prolapsed uterus. In arteries, joints and vital place, in cartilages, veins, nerves, sutures, throat and umbilicus, places having poor muscles, testes, penis, inside the nails, eye disease except disease of eyelids, in excessive cold, in rainy and summer season alkali should not be used.

AGNI KARMA (THERMAL CAUTERY)

The word Agnikarma consist of 'Agni' and 'Karma' i.e. Heat+Procedure.

"अग्निनां क्रित्वा यत् कर्मा, अग्ने सम्बंधी वा यत् कर्मा, तत्तग्निकर्मा"⁹



Agni karma means application of Agni directly or indirectly with the help of different materials to relieved the patient from disease. Acharya Sushruta describe that the disease treated with Agnikarma don't reoccurs. Use of Agni for therapeutic purpose are described in Vedic periods also. In Rigveda application of Agni is indicated for the treatment of different gynaecological and obstetrical disease, Agni is capable of destroying the invading parasite and demons in the vagina and uterus of women and to save the fetus from later. In Veda Agni is given special names as Atma and Parmeshwar. Atharva Veda mentioned Agni as God and treatment for diseases from the verses it become clear that Agni was used to protect the body from the invading microorganism¹⁰.

Importance of Agni Karma-

क्षारादग्निर्गरीयान क्रियासु व्याख्यातः, तत्त्वधानां रोगाणाम्पुर्भावाद्भेषजशस्त्रक्षारैरसध्यानां तत्साध्यत्वात् च ॥

(सु.सू.12/3)

Agni (fire) is better than alkali in action (of burning); it is said so, because disease treated by burning will not recur again and also because those diseases which are incurable by the use of medicines, sharp instrument and alkalis will be cured by Agni (thermal cautery)¹¹.

Suitable Kala For Agni Karma-

तत्राग्निकर्म सर्वर्तुषु कुर्यान्यत्र शरद्ग्रिष्माभ्यां तत्राप्यात्ययिकेअग्निकर्मसाध्ये व्याधौ तत्प्रत्यनीकं विधिं कृत्वा ॥ (सु.सू.12/5)

Agni Karma (branding by fire) can be done in all season, except sharad (autumn) and grishma (summer); even in these season it can be done in diseases of emergency, after adopting counter methods (Dalhana mention covering the body or the site of branding with moist cloth, use of cold foods and applying pastes which are cooling etc. as counter methods to mitigate the effects of burning)¹².

Agni Karma vidhi (procedure for branding)-

सर्वव्याधिष्वृतुषु च पिचिच्छलमन्नं भुक्तवतः मूढगर्भाशमरीभगन्दरोदरार्शोमुखरोगेष्वभुक्तवतरुकर्म कुर्वीत ॥ (सु. सू. 12/6)

In all disease and seasons, (Agni Karma) should be done after the patient has partaken food which is slimy (cold in potency and soft), in diseases such as obstructed foetus, urinary calculus, fistula-in-ano, enlargement of the abdomen, piles and disease of the mouth, it should be done when the patient has not taken food¹³.

Possible mechanism of action¹⁴-

Agni Karma cures all the Vataj and Kaphaj disorders as Ushna guna of Agnikarma is opposite to that of Vata and Kapha doshas. According to Ayurveda, every Dhatu (tissue) have its own Dhatvagni and when it becomes low, disease begins to manifest. In this condition, Agnikarma works by giving external heat there by increasing the Dhatvagni which helps to digest the aggravated doshas and hence cures the disease. The local thermo therapy



may increase tissue metabolism which may leads to excretion of the unwanted metabolites and toxins. Heat may stimulate lateral spinothalamic tract (SST) which leads stimulation of descending pain inhibitory fibres (DPI) which release of endogenous opoid peptide which bind with opoid receptors at substantia gelatinosa rolandi which inhibits the release of p-substance (pre-synaptic inhibition) and blocked of transmission of pain sensation occur.

Indication of Agni Karma¹⁵-

The Agnikarma should be done in the disease of the head and Adhimanth (a disease of the eye) on the brows, forehead and/or the temples; in disease of the eyelids, branding should be done on the follicles of hairs (eye lashes) after covering the area of vision (pupil and cornea) with a pad of wet cloth. Branding should also be done in condition such as presence of very severe pain in the skin, muscle, veins, ligaments, bony joints and bones caused by Vata (aggravation), muscles which are grown upwards (new growths), hard and without sensation, ulcer / wounds, tumor, haemorrhoids, malignant tumor, fistula-in-ano, glands in neck, filariasis, warts on the skin, moles, hernia, tearing of the joints, and veins, sinus ulcer and profuse haemorrhages.

Contraindication of Agni Karma¹⁶-

Agni Karma (branding by fire) should be avoided in persons of Pitta predominant

constitution, in whom blood has accumulated inside the abdomen, when there is rupture of the abdominal organs, foreign body has not been removed, the debilitated, children, very aged, the fearful, those suffering from multiple wound and persons who are unfit for sudation therapy.

Therapy after Agni Karma-

“तत्र सम्यग्दग्धे मधुसर्पिभ्यामभ्यंगः।”
(सु.सू.12/13)

After the branding (thermal cauterisation) has been done in the proper manner, the area (of burning) should be anointed with mixture of honey and ghee¹⁷.

JALAUKAACHARAN (Leech Therapy)-

“जलमासामायुरिति जलयुकाः, जलमासामोक इति जलौकसः।” (सु.सू.13/9)

Since Jala (water) is their life, they are called Jalauka or since they are accustomed / habituated to water they are called Jalauka¹⁸.

Leech therapy is an ancient bloodletting technique firstly described in Ayurveda by the name of Jalaukavacharan. Ancient history suggest that Lord Dhanwantari evolved in this world after Samundra manthan with Jalauka (leech) along with pitcher filled nectar in his hand. This shows immense importance of Leech in therapeutics. Bloodletting can be done by Shringa, Alabu, Jalauka and Siravedh, out of them Jalaukavacharan (Leech therapy) is the mildest and safest methods used for



bloodletting, for this reason ,it is called as the best method of Raktmokshan¹⁹.

नृपढ्यबालस्थविरभीरुदुर्बलनारीसुकुमाराणामनुग्रहार्थं
परम्सुकुमारोऽयं शोणितावसेचनोपायोऽभिहितो
जलौकसः ॥ (सु.सू.13/3)

Jalaukavacharan is best suitable to kings, wealthy persons, children, old aged, frightful, debilitated, women and persons of tender constitution²⁰.

Kinds-

There are of twelve kinds- six are Savisha (poisonous) and six are Nirvisha (nonpoisonous)²¹.

For the bloodletting Nirvisha jalauka is used which lives in place where more amount of fragrant water is found, they do not feed on dirty foods nor live in slush²².

Indication of Bloodletting-

Bloodletting is prescribed in burning sensation in the soles, tenderness or tingling in the soles, whitlow, fissure in soles, sprain of the ankle, filariasis, inflammation of the knee joint, tumor of the neck, lymphadenitis of the neck, spleenomegali, hepatomegaly, pain of arm, sciatica, dysentery, pain in abdomen, hydrocele, ascites, internal abscess, pain in the flanks, wasting of the arms, loss of movements of the arms, tertian fever, quarantine fever, epilepsy, insanity, disease of tongue and teeth, in loss of smell perception and disease of nose, partial blindness, ulceration of the eye, in disease of head.

According to modern medicine-

In present time, doctors use Leeches for treating abscess, painful joints, glaucoma, and myasthenia and to heal venous disease and thrombosis. Non poisonous leeches are now used in plastic surgery, for improving brain circulation and for curing infertility. Jalaukavacharana gives best result in eczema, psoriasis and alopecia. It could be also very effective in various disease like- Inflammatory disease, Abscess, Wounds, Gangrene and Ischemic disease, Venous disease, in Plastic surgery, Thrombosis, Rheumatic disease, Skin diseases (herpes, psoriasis, eczema etc.) etc²⁴.

Contraindication of Blood letting-

अथविस्राव्याः – सर्वांगशोफरु क्षीणस्य चाम्ल-
भोजननिमित्तः, पाण्डुरोग्यर्शसोदरिशोशिगर्भिणीनां च
श्वयथवः ॥ (सु.सू.14/24)

Persons unfit for bloodletting are those who have swelling all over the body, who are emaciated due to intake of sour foods for long time, who are suffering from diseases such as anaemia, haemorrhoids, abdominal enlargement, consumption and dropsy and the pregnant women²⁵.

Bioactive enzyme of Jalauka (Leech)²⁶⁻

Therapeutic action of Jalauka (leech) is due to presence of several bioactive constitution in the saliva of leech, in which some major bioactive constitution of leech are as-



1. Hirudin- Inhibits blood coagulation by binding to thrombin.
2. Calin- Inhibits blood coagulation by blocking the binding of Von Willebrand factor to collagen. Inhibits collagen-mediated platelet aggregation.
3. Bdelellins- Anti-inflammatory (Inhibits Trypsin, Plasmin, Acrosin).
4. Destabilase- Monomerizing activity, Dissolves Fibrin, Thrombolytic effects.
5. Hyaluronidase- Increases Interstitial Viscosity, Antibiotics.
6. Tryptase Inhibitor- Inhibits Proteolytic Enzyme of Host Mast Cells.
7. Eglins- Anti-inflammatory, Inhibits the activity of Alpha Chymotrypsin, chymase, Subtilisin, Elastase, Cathepsin G.
8. Factor Xa inhibitor- Inhibits the activity of Coagulation factor Xa by forming Equimolar Co mplex.
9. Carboxypeptidase A Inhibitor- Increases the inflow of blood at the bite site.
10. Histamine-like Substances- Vasodilator, Increase s the inflow of blood at the bite site.
11. Acetylcholine- Vasodilator.
12. Anesthetics substance- Anaesthetic.

Benefits of Raktmokshana-

त्वग्दोषा ग्रंथयः शोफा रोगाः शोणितजाश्च ये ।
रक्तमोक्षणशीलीनां न भवन्ति कदाचन ॥
(सु.सू.14 / 34)

The person who are subjected to bloodletting from time to time do not suffer from skin disorders, lymphadenopathies or glandular diseases, inflammatory disorders and blood borne diseases²⁷.

CONCLUSION –

Anushastrakarma (parasurgical procedure) is one of the best treatment which is described by Acharya Sushruta for various disease and for those patient in which sharp instrument are not used for treatment purpose. There are mainly three procedure which are used frequently in that era and in modern era also such as Kshar Karma, Agni Karma, Jalaukavacharana. For Kshar Acharya Sushruta told that is is best among the Shastra and Anushastra. For about action or quality of Agni Acharya told that rhe disease treated with Agni will never reoccur. For understanding the importance of Bloodletting the Acharya Sushruta told that “Bloodletting is considered as half of treatment in surgery just like Vasti Karma in Kayachikitsa”[28].

शिराव्यधश्चिकित्साअर्धं शल्यतंत्रे प्रकीर्तितः ।
यथा प्राणिहितः सम्यग्वस्तिः कायचिकित्सिते ॥
(सु.शा. 8 / 23)

In spite such strength these Ayurvedic procedure is not used in common practice in present scenario and to preserve the strength of Ayurvedic surgery along with their para surgical procedures, we will have to change our self with the changing



scenario by more and more technical advancement. These goal can only be achieved by research based practical and theoretical approach along with scientific documentation.

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HEALTH BENEFITS OF IMMUNE BOOSTER AYURVEDIC PLANT TILA (SESAMUM INDICUM) IN WINTER SEASON

- Sunil Kumar¹

e-mail : drsuniltomarmuz@gmail.com

Abstract :

Immunity plays a vital role to keep disease free health & this may be achieved through Ayurvedic Medicinal plant known as Tila (sesamum). Seeds of Tila are well known for its oil content & nutritive values as it provides good strength to human body. It is a good dietary food supplement in winter season to improve immunity as it is hot in potency and unctuous. Sesamum seeds are rich in oil, protein, mineral, crude fibres, oxalates, soluble carbohydrates and Vitamin B.

Key words: Tila, Sesamum, immunity, Vitamin-B

INTRODUCTION

Sesamum is one of the earliest old crops of the world, and is undergone cultivation in Asia for over 5000 years. Various Ayurvedic texts have described many medicinal properties of sesamum, especially in the form of immunity modulator and body rejuvenation. It is known as “tila” in Sanskrit, “til” in hindi. *Ayurveda Acharyas* describe three varieties of sesamum as “*Krishna* (black), *Shweta* (white) and *Raktha* (red)”. Usually *Krishna tila* or black sesamum seeds are considered to have excellent

medicinal properties and are recommended in *Ayurvedic* treatments and *Ayurvedic* preparations.

Sesamum seeds contain approximately 50% oil and 25% protein. The oil of these seeds contains about 47% oleic and 39% Linoleic acid. Foods prepared with sesamum oil have long shelf life duration, as the oil contains antioxidant called sesamol. The residual left after the oil pressing of sesamum is rich in protein and used as an excellent protein supplement for live stock in the form of fodder. Due to its chemical constituents and properties soaps prepared from this oil in the base form helps in maintenance of skin health benefits.

As per Ayurvedic texts sesamum is heavy to digest and increases moistness in the tissues, Its taste is sweet and has hot potency (*ushna*). Sesamum seeds are used as best alternative for edible oil and it provides good strength, immunity and rejuvenation for human body & are also good dietary source of energy during winter session. It works on the Lymphatic system consists of bone marrow, spleen, thymus and lymph nodes which in turn helps in improving immunity and vitality of the body.

¹Prof. & HOD, Dept. of Dravyaguna, Vivek College of Ayurvedic Sciences & Hospital, Bijnor (U.P.)



Taxonomical Classification

Taxonomical classification		Synonyms
Kingdom	Plantae	Tila Homa-dhanya
Infrakingdom	Streptophyta	Pavitra
Superdivision	Embryophyta	Pitra-Tarpana
Division	Tracheophyta	Papahana
Subdivision	Spermatophytina	Putra-dhanya
Class	Magnolipsida	Jatil
Order	Scrophulariales	Vanod-bhava
Family	Pedaliaceae	Taila-phala
Genus	<i>Sesamum</i>	Putra
Species	<i>Sesamum Indicum Linn.</i>	Snehapur-phala Tila-pushpa Seet

BOTANICAL DESCRIPTION³

Sesamum belongs to the genus Sesamum, which comprises about 20 species, a few other species in the genus are occasionally cultivated for their edible seeds and leaves. Sesamum grows primarily in tropical and subtropical areas of the world, and is well adapted to semi-arid regions. It is an annual self-pollinated plant with a strong woody, hairy and often many-branching stem that reaches 0.5–2 m in height. Leaves are Simple above, lanceolate or oblong or upper most linear and alternate, lower opposite often lobed,

intermediate leaves usually ovate or toothed. Flowers are tubular in shape, 2–2.5 cm long, and white, some with pink or purple markings. The fruit are capsules, which dehisce with a pop when the seeds mature. The seeds come in a variety of colours, including shades of brown, brick red, black, yellow, and white, depending on the cultivar.

DISTRIBUTION: It is cultivated throughout India up to an altitude of 1200m. Cultivated all over India, Baluchistan, Wa- ziristan- probably the native of tropical Africa



AYURVEDIC PROPERTIES^{4,5}

RASA PANCHAKA		Properties in Various text
RASA	Katu	Balya, Keshya, Twachya, Stanya-janana, Vrano-hita, Dantya, Grahi, Vataghna, Deepana, Sukrala, Alpamutrakrit, Medhya, Vrushya, Sleshma-varadhaka, Vedanasthapana, Artavajanana, Sandhaneeya, Rasayana, Mutrajannana.
	Tikta	
	Kashaya	
	Madhura	
GUNA	Snigdha	
VIRYA	Ushna	
VIPAKA	Katu	
DOSHAKARMA	Vatahara	

Nutritional value of Sesamum⁶

Sesamum seeds are widely considered as healthy food, 100 grams of seeds carry 573 calories. Although much of its calorie comes from fats, sesamum contains several essential health-benefiting nutrients, minerals, antioxidants, and vitamins.

The seeds are especially rich in mono-unsaturated fatty acid, oleic acid, which comprises of up to 50% of fatty acids in them. Oleic acid helps lower LDL or “bad cholesterol” and increases HDL or “good cholesterol” in the blood. Research studies suggest that Mediterranean diet which is rich in mono-unsaturated fats may help prevent coronary artery disease, and stroke by favouring healthy serum lipid profile.

The seeds are also valuable sources of dietary protein with fine quality amino

acids that are essential for growth, especially in children. Just 100 g of seeds provide about 18 g of protein (32% of daily recommended values).

Sesamum seeds contain many health benefiting compounds such as sesamol (3, 4-methylene-dioxyphenol), sesaminol, furyl-methanthiol, guaiacol (2-methoxyphenol), phenyl ethanthiol and furaneol, vinyl guacol, and decadienal. Sesamol and sesaminol are phenolic antioxidants. Together, these compounds help stave off harmful free radicals from the human body.

Sesamum is among the seeds rich in quality vitamins, and minerals. They are excellent sources of B-complex vitamins such as niacin, folic acid, thiamin (vitamin B1), pyridoxine (vitamin B6), and riboflavin.

The seeds are incredibly rich sources of many essential minerals. Calcium, iron,



manganese, zinc, magnesium, selenium, and copper especially concentrated in sesamum seeds. Many of these minerals have a vital role in bone mineralization, red blood cell production, enzyme synthesis, hormone production, as well as regulation of cardiac and skeletal muscle activities.

Chemical constituents of Tila ⁷

	White Variety (whole seeds)	Black variety (whole seeds)
Moisture	5.4	5.2
Fat	50.2	49.8
Protein	19.8	20.0
Crude fibre	3.2	3.3
Carbohydrates	14.9	14.7
Mineral matters	4.8	5.2
Oxalic acid	1.72	1.80
Calcium	1.06	1.21
Phosphorus	0.47	0.62

Health Benefits of Tila (Sesamum) ⁸

Sesamum seeds have many potential health benefits and have been used in folk medicine for thousands of years. They may protect against heart disease, diabetes, and arthritis, however you may need to eat significant amounts - *a small handful per day* - to gain health benefits as-

Good Source of Fiber: Three tablespoons (30 grams) of unhulled (with husk) sesamum seeds provide 3.5 grams of fiber, which is 12% of the Reference Daily Intake (RDI), eating sesamum seeds regularly could help increase your fiber intake. Fiber is well known for supporting digestive health. Additionally, growing evidence suggests that fiber may play a

role in reducing your risk of heart disease, certain cancers, obesity, and type 2 diabetes.

May Lower Cholesterol and Triglycerides: Some studies suggest that regularly eating sesamum seeds may help decrease high cholesterol and triglycerides, which are risk factors for heart disease, Sesamum seeds consist of 15% saturated fat, 41% polyunsaturated fat, and 39% monounsaturated fat, Research indicates that eating more polyunsaturated and monounsaturated fat relative to saturated fat may help lower your cholesterol and reduce heart disease risk, What's more, sesamum seeds contain two types of plant compounds lignans and



phytosterols, that may also have cholesterol-lowering effects.

May Reduce Inflammation: Long-term, low-level inflammation may play a role in many chronic conditions, including obesity and cancer, as well as heart and kidney disease. When people with kidney disease ate a mixture of 18 grams of flax seeds and 6 grams each of sesamum and pumpkin seeds daily for 3 months, their inflammatory markers dropped 51-79%.

Good Source of Vitamin-B: Sesamum seeds are a good source of certain B vitamins, which are distributed both in the hull and seed. Removing the hull may either concentrate or remove some of the B vitamins. Three tablespoons (30 grams) of unhulled and hulled sesamum seeds provide -Thiamine (B1) 17%, Niacin (B3) 11%, Vitamin B6 5% of the RDI. B vitamins are essential for many bodily processes, including proper cell function and metabolism.

Rich in Antioxidants: Animal and human studies suggest that consuming sesamum seeds may increase the overall amount of antioxidant activity in your blood. The lignans in sesamum seeds function as antioxidants, which help fight oxidative stress - a chemical reaction that may damage your cells and increase your risk of many chronic diseases. Additionally, sesamum seeds contain a form of vitamin E called gamma-

tocopherol, an antioxidant that may be especially protective against heart disease.

May Support Your Immune System: Sesamum seeds are a good source of several nutrients crucial for your immune system, including zinc, selenium, copper, iron, vitamin B6, and vitamin E. For example, your body needs zinc to develop and activate certain white blood cells that recognize and attack invading microbes. Keep in mind that even mild to moderate zinc deficiency can impair immune system activity. Sesamum seeds supply about 20% of the RDI for zinc in a 3-tablespoon (30-gram).

May Soothe Arthritic Knee Pain: Osteoarthritis is the most common cause of joint pain and frequently affects the knees. Several factors may play a role in arthritis, including inflammation and oxidative damage to the cartilage that cushions joints. Sesamin a compound in sesamum seeds, has anti-inflammatory and antioxidant effects that may protect your cartilage.

May Support Thyroid Health: Sesamum seeds are a good source of selenium, supplying 18% of the RDI in both unhulled and hulled seeds. Your thyroid gland contains the highest concentration of selenium of any organ in your body. This mineral plays a vital role in making thyroid hormones.



May Aid Hormone Balance During Menopause: Sesamum seeds contain phytoestrogens, plant compounds that are similar to the hormone estrogen, Therefore, sesamum seeds might be beneficial for women when estrogen levels drop during menopause.

DISCUSSION & CONCLUSION :

Sesamum seeds are a good source of healthy fats, protein, vitamins, minerals, fiber, antioxidants, and other beneficial plant compounds. Regularly eating substantial portions of these seeds combat arthritic pain and lower cholesterol, triglycerides, improves the immune system of human beings. Sesamum oil is highly nutritive oil which can be used in day today food making which provides good health to all. To optimize your nutrient intake, you can eat sesamum seeds soaked, roasted, or sprouted. There is a lots of scope still to work with this miraculous medicinal plant for new researchers.

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स्वर्ण प्राशन—बच्चों का आयुर्वेदिक इम्यूनाईजेशन

— आशीष कुमार गराई¹, देवकी नन्दन शर्मा²

e-mail : garai.asishkumar@gmail.com

संक्षेप—

स्वर्णप्राशन शास्त्रोक्त विधि से निर्मित सिद्ध योग है। यह स्वर्ण के साथ साथ आयुर्वेद के कुछ औषध, गाय का घी और शहद के मिश्रण से बनाया जाता है। स्वर्ण प्राशन जन्म से 16 वर्ष तक के बच्चों को चटाया जाता है। अच्छे परिणाम के लिये इसे प्रतिदिन लगातार कम से कम छह माह तक प्रयोग करना जरूरी है। स्वर्णप्राशन बच्चों की रोग प्रतिरोधक क्षमता बढ़ाता है, साथ ही सर्वांगीण विकास करता है। स्वर्णप्राशन के निरंतर प्रयोग से बच्चे शारीरिक और मानसिक रूप से मजबूत हो जाते हैं और वे भविष्य में होने वाली गंभीर बीमारियों से बचे रहते हैं। स्वर्ण प्राशन— शिशुओं का श्रेष्ठतम रसायन है। इसे एक प्रकार का आयुर्वेदिक इम्यूनाईजेशन भी कहा जाता है।

सूचक शब्द — स्वर्ण प्राशन, रोग प्रतिरोधक उपाय, मानसिक विकास, आयुर्वेदिक टीकाकरण

प्रस्तावना—

स्वर्ण प्राशन एक आयुर्वेदीय संस्कार है, जो काश्यपसंहिता जैसे अत्यंत प्राचीन ग्रन्थों में वर्णित है। यह एक आयुर्वेदिक रोग प्रतिरोधक बल बर्धक उपाय है, जिसमें स्वर्ण प्राशन औषधि बालकों को पिलाया जाता है। जिस प्रकार एलोपैथी चिकित्सा

पद्धति में बीमारियों से बचाव के लिये टीकाकरण प्रयोग किया जाता है, उसी प्रकार आयुर्वेद में इसका उपयोग किया जाता है। इसे एक प्रकार आयुर्वेदिक टीकाकरण भी कहा जाता है। स्वर्ण प्राशन बीमारियों से लड़ने और मानसिक विकास के लिये उपयोगी है एवं बच्चा कई संक्रामक बीमारियों से बचे रहते हैं। बच्चों की बुद्धि तेज होती है। बच्चे बार—बार बीमार नहीं पड़ते हैं।

स्वर्ण प्राशन औषधि के घटक द्रव्य—

यह आयुर्वेदीय औषधि ऋषियों— मुनियों द्वारा शास्त्रोक्त विधि से निर्मित सिद्ध योग है। यह सुवर्णप्राशन पुष्यनक्षत्र में उत्तम प्रकार की औषधियों के चयन से ही बनता है। स्वर्ण प्राशन औषधि शुद्ध उच्च कोटि के स्वर्ण भस्म, गाय के दूध से बने घी (गो घृत) एवम शुद्ध मधु के मिश्रण/संयोग से तैयार किया जाता है। स्वर्ण प्राशन औषधि निर्माण हेतु ब्राह्मी, शंखपुष्पी, वचा, गुडूची, अश्वगंधा आदि अन्य महत्वपूर्ण औषधियों का भी प्रयोग किया जाता है। सुवर्णप्राशन के निर्माण में घी का उपयोग किया जाता है, जो कि उत्कृष्ट मेधा एवं स्मृतिवर्धक है। मन्त्रोच्चारण के साथ इस घृत को पुष्यनक्षत्र के शुभ मुहुर्त में सिद्ध किया जाता है, जिससे औषधीय गुणधर्मों में वृद्धि होती है। सुवर्णप्राशन एक अवलेह पिलाया कल्पना

¹कौमारभृत्य विभाग, राजकीय आयुर्वेद महाविद्यालय एवं चिकित्सालय, वाराणसी, ²कौमारभृत्य विभाग, एस0 आर0 एम0 राजकीय आयुर्वेद, महाविद्यालय एवं चिकित्सालय, बरेली, उत्तर प्रदेश



(Semisolid Preparation) है, जिसे लेहन (चाटना, या चटाना) विधि से सेवन करना होता है।

स्वर्ण प्राशन हेतु समय—

स्वर्ण प्राशन जन्म के बाद एवं हर माह प्रत्येक पुष्य नक्षत्र में देने का विधान है। सत्ताइस नक्षत्रों में आठवां नक्षत्र है पुष्य। सभी नक्षत्रों में इस नक्षत्र को सबसे अच्छा माना जाता है। पुष्य का अर्थ ही पोषण करने वाला, उर्जा एवं शांति प्रदान करने वाला है। मतान्तर से पुष्य को पुष्य का बिगड़ा रूप मानते हैं। पुष्य का प्राचीन नाम तिष्य, शुभ, सुंदर तथा सुख, संपदा एवं स्वास्थ्य को देने वाला है। पुष्य नक्षत्र संरक्षण, संवर्धन एवं समृद्धि का प्रतीक है। विद्वानों ने इसे बहुत ही शुभ और मंगलकारी माना है। पुष्यनक्षत्र में सुवर्ण और औषध पर नक्षत्र का एक विशेष प्रभाव रहता है। पुष्य नक्षत्र में इस दवा का प्रभाव बढ़ जाता है। हर माह में 1 बार पुष्य नक्षत्र होता है इसलिये प्रत्येक माह पुष्य नक्षत्र तिथि में स्वर्ण प्राशन करवाने से यथोचित फल की प्राप्ति होती है। पुष्य नक्षत्र के दिन सुबह खाली पेट औषधि पिलाना श्रेष्ठ है। स्वर्ण प्राशन कराने के आधा घंटा पहले एवं आधा घंटे बाद तक बच्चों को आहार नहीं देना चाहिए। स्वर्ण प्राशन— शिशुओं का श्रेष्ठतम रसायन है। अच्छे परिणाम के लिये इसे लगातार प्रतिदिन भी पिलाया जा सकता है एवं कम से कम छह माह तक इस का प्रयोग करना जरूरी है। अगर यह हमसे छूट गया है, तो बाल्यावस्था के भीतर यानि 16 साल की आयु तक कभी भी शुरू करके इसका लाभ ले सकते हैं।

स्वर्ण प्राशन हेतु वय—

स्वर्ण प्राशन जन्म से 16 वर्ष तक के बच्चों को पिलाया जाता है। जन्म के तुरंत बाद कुछ महिनो तक नवजात शिशु का शारीरिक एवं मानसिक विकास अत्यंत तेजी से होता है। इसीलिये शास्त्र

नवजात शिशु को नियमित रूप से 6 महिने तक सुवर्णप्राशन देने की सलाह देता है। जिससे नवजात शिशु का विकास सर्वांगीण और सही दिशा में हो। सुवर्णप्राशन यह एक उत्कृष्ट रसायन है, इसलिये नवजात शिशु से लेकर सभी उम्र के बच्चे और बड़ों को भी दिया जा सकता है।

स्वर्ण प्राशन की मात्रा एवं पानविधि—

शास्त्रोक्त सुवर्णप्राशनम अवलेह (Semisolid) स्वरूप है। सुवर्णप्राशन अवलेह स्वरूप होने के कारण इसे चटाना/चाटना पडता है। स्वर्ण प्राशन औषधी उम्र के हिसाब से अलग अलग मात्रा में पिलाया जाता है। स्वर्ण प्राशन औषधि (स्वर्ण भस्म गो घृत शुद्ध मधु) की मात्रा सामान्यत पांच वर्ष तक के बच्चों में 2 बूंद (two drops) एवं इससे बड़े बच्चों में 4 बूंद (four drops) देना चाहिए। स्वर्ण प्राशन ड्राप देने से पूर्व स्वर्ण प्राशन औषधि शीशी हिलाकर मिलाया, फिर वय के अनुसार पान कराया जाता है।

स्वर्ण प्राशन के लाभ/परिणाम—

प्राचीन कल में बच्चों को मजबूत बनाने और उनमें रोग प्रतिरोध क्षमता बढ़ाने के लिये स्वर्ण प्राशन करवाया जाता था, स्वर्ण प्राशन शिशुओं में शारीरिक एवं मानसिक सर्वांगीण वृद्धि तथा विकास में सहायक है। स्वर्ण प्राशन रोग— प्रतिरोधक क्षमता (immunity) को बढ़ाता है। बीमारियों से लड़ने की क्षमता बढ़ाती है। भूख बढ़ाता है, पाचन तन्त्र को मजबूत करता है। बच्चे बार—बार बीमार नहीं पड़ते हैं। दांत निकलने में तकलीफ नहीं होती है। बालकों के दाँत आने से होने वाले रोगों में कमी आती है। बच्चों को बार—बार होने वाली सर्दी—जुकाम, खासी एलर्जी, दस्त (अतिसार) वायरल एवं बैक्टीरियल रोगों से बचाता है। मौसमी बीमारी से बचाव हेतु स्वर्ण प्राशन संस्कार आयुर्वेद की प्राचीन पद्धति है। मेधा, बुद्धि, स्मृति/स्मरण



शक्ति एवम एकाग्र चित्तता की वृद्धि करता है। सुनने, देखने एवं बोलने संबन्धित क्रियाओं का विकास करता है। बच्चे की सीखने की शक्ति बढ़ती है। बौद्धिक क्षमता को बढ़ाता है। बच्चे की ग्रहणशक्ति, धारणाशक्ति तथा विवेचनशक्ति विकसित होती है। मानसिक बीमारियों से बचाव होता है। बच्चों के सभी सामान्य एवं जटिल रोगों को होने से रोकने में अधिक रूप से कारगर है। जानलेवा जापानीज इंसेफेलाइटिस (जेई) से बचाव होता है। शरीर के बल (stamina) को बढ़ाता है और वर्ण (colour) को उत्तम बनाता है। बच्चों के रंग-रूप में निखार आता है। चर्म रोग में भी काफी लाभ मिलता है। उपरोक्त सभी लाभ सुवर्णप्राशन के नियमित एवं दीर्घकाल तक सेवन करने पर ही प्राप्त होते हैं। आजकल ज्यादा प्रमाण में उपयोग में लाये जाने वाले एंटीबायोटिक्स के दुष्परिणाम से रक्षण होता है। ऋतु परिवर्तन तथा दो ऋतुओं के संधिकाल में होनेवाले रोगों से संरक्षण होता है। रासायनिक खेती से प्राप्त निकृष्ट आहार और दैनिक भागदौड़ के कारण शरीर पर होनेवाले दुष्परिणामों को कम करता है। हृदय के लिये अत्यंत हितकारी है। रक्तदाब उत्तम संचालित करता है। स्वर्ण भस्म के immunity booster, antioxidant, antiaging, anti cancerus आदि प्रभाव खोजे जा चुके हैं तथा बच्चों में पूर्णतः दुष्प्रभाव रहित है।

बच्चा अगर निम्नलिखित लक्षणों से पीड़ित रहता है तो स्वर्ण प्राशन अमृत समान लाभकारी है—

- ♦ बार बार सर्दी—जुकाम, बुखार होना, शारीरिक विकास में कमी
 - ♦ पाचन तन्त्र में गड़बड़ी, भूख ना लगना
 - ♦ सुनने, बोलने एवं पढाई लिखाई में कमजोरी
- असामान्य बच्चों में स्वर्ण प्राशन नियमित सेवन कराना जीवनदायक एवम महत्वपूर्ण है। केमोथेरेपी

एवं रेडीयोथेरेपी की गर्म औषधियों के भीषण दुष्परिणाम कम करने के लिये रोज सुवर्णप्राशन का सेवन कराना चाहिये।

स्वर्ण प्राशन बड़ों में भी से दिया जा सकता है। स्वर्ण प्राशन उत्तम शुक्र बढ़ानेवाला (increases sperms) तथा बाजीकारक (sexual power enhancer) है। उत्तम संतति की चाह रखनेवाले मातापिता को गर्भाधान संस्कार के पूर्वकाल में योग्य पंचकर्म के पश्चात् सुवर्णप्राशन का नित्यसेवन अत्यंत लाभदायी है। इससे पिता के शुक्राणु और माता के अंडाणु बलवान होकर सुप्रजा—निर्माण का मार्ग प्रशस्त होता है। माता को गर्भाधान के पश्चात् प्रसवपर्यंत गर्भपोषण के लिये सुवर्णप्राशन का नियमित सेवन करना चाहिये। सुवर्णप्राशन शरीर धातुओं में स्थित विषाक्त घटकों को निष्प्रभ करके निष्कासित कर देता है और इस तरह से शरीर शुद्धि करने में मदद करता है। पार्किन्सोनीज्म, अलजायमर्स डिजीज जैसे वृद्धावस्थाजनित व्याधियों में नियमित सेवन से सुवर्णप्राशन उत्तम स्थैर्य एवं लाभ प्रदान करता है।

आयुर्वेद के बालरोग के ग्रंथ काश्यप संहिता ने सुवर्णप्राशन के गुणों का निम्न रूप से निरूपण किया है —

आमथ्य मधुसर्पिभ्यां लेहयेत् कनक शिशुम् ॥
सुवर्णप्राशनं ह्येतन्मेधाग्निबलवर्धनम् ।
आयुष्यं मङ्गलं पुण्यं वृष्यं वर्ण्यं ग्रहापहम् ।
मासात् परममेधावी व्याधिभिर्न च धृष्यते ।
षड्भिर्मसैः श्रुतधरः सुवर्ण प्राशनाद् भवेत् ।
— (काश्यपसंहिता, लेहाध्याय)

अर्थात्— सुवर्णप्राशन मेधा (बुद्धि), अग्नि (पाचन अग्नि) और बल बढ़ाने वाला है। यह आयुष्यप्रद, कल्याणकारक, पुण्यकारक, वृष्य, वर्ण्य (शरीर के वर्ण को तेजस्वी बनाने वाला) और ग्रहपीडा को दूर करने वाला है। सुवर्णप्राशन के एक मास तक



नित्य सेवन से बालक मेधायुक्त बनता है और बालक की भिन्न भिन्न रोगों से रक्षा होती है। वह छह मास में श्रुतधर (सुना हुआ सब याद रखने वाला) बनता है, अर्थात् उसकी स्मरणशक्ति अतिशय बढ़ती है।

कौमारभृत्य विभाग, एस.आर.एम. राजकीय आयुर्वेद महाविद्यालय एवम चिकित्सालय, बरेली, उत्तर प्रदेश में हर माह प्रत्येक पुष्य नक्षत्र तिथि में 0-16 वर्ष तक के 100 से अधिक बच्चों को स्वर्णप्राशन प्राशन दवा मुफ्त में नियमित 6 माह तक पिलाये गये। इससे अधिकांश बच्चों को आशातीत फायदा हुआ है। मौसमी बीमारी एवं बार बार होने वाले सामान्य बिमारियों जैसे सर्दी-जुकाम, कास, अतिसार आदि से बच्चों सुरक्षित रहे। स्वर्ण प्राशन करवा रहे बच्चों के परिवार से ज्ञात हुआ कि जिन बच्चों का स्वर्ण प्राशन चल रहा है वे बच्चे शहर में चल रहे विशेष फीवर से सुरक्षित रहे। जो कि स्वर्ण प्राशन के उत्तम परिणामों से एक है।

विमर्श एवम निष्कर्ष –

आधुनिक विज्ञान ने कई रोगों के लिये वैकसीन निकाली है। संशोधन जारी है एवं यह एक नित्य चलने वाला कार्य है। हमारे आचार्यों ने रोग प्रतिरोधक शारीरिक और मानसिक क्षमता बढ़ाने वाले यही सिद्धान्त आज से हजारों साल पहले सोच रखा था। वैदिक काल से ही स्वर्णप्राशन हमारे समाज में प्रचलित रहा है। स्वर्ण यानि सोना (gold) और प्राशन यानि चटाना (licking)। स्वर्ण हमारे शरीर के लिये श्रेष्ठतम धातु है एवं हमारे जीवन व्यवहार में सदियों से स्वर्ण का महत्व रहा है। स्वर्णप्राशन के प्रयोग से बच्चों की शारीरिक और मानसिक क्षमता का विकास होता है और वे भविष्य में होने वाली गंभीर बीमारियों से बचे रहते हैं। सुवर्णप्राशन नित्यसेवनीय है, इसीलिये कभी भी दिया जा सकता है। प्रत्येक माह के पुष्य नक्षत्र

के दिन इस औषधि को पिलाना अत्याधिक लाभकारी होता है। बच्चे और बड़े— दोनों में समानरूप से दिया जा सकता है। शिशुओं और बच्चों में यह अधिक लाभकारी है। यह एक प्रकार की आयुर्वेदिक इम्यूनाईजेशन विधि है। बच्चों की रोग प्रतिरोधक क्षमताओं की वृद्धि करती है, जिससे बच्चों को बार बार होने वाले सामान्य रोग कम होते हैं और संक्रामक बिमारियों के होने की संभावना कम होती है। बच्चों का शारीरिक एवं मानसिक वृद्धि तथा विकास तेजी से होता है। याददाश्त की वृद्धि होती है। सही मात्रा और औषध से बना हुआ स्वर्ण प्राशन छः माह तक नियमित रूप से दिया जाये तो वह 'श्रुतधर' मतलब कि एक बार सुना हुआ उसको याद रह जाता है। बच्चों के स्वस्थ जीवन और सुन्दर भविष्य के लिये स्वर्ण प्राशन अति महत्वपूर्ण है। स्वस्थ और तेजस्वी भारत के निर्माण में यह संस्कार हमारे लिये एक महत्वपूर्ण बात है।

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Dr. Ganga Sahay Pandey Memorial

U.G Essay Competition- 2018 (Bronze Medal Third Prize Winner)

रोगों के निदान और प्रबन्धन में षड्क्रियाकाल की प्रासंगिकता

— धर्मेन्द्र कुमार वर्मा

e-mail : dkverma7791@gmail.com.

सर्वे भवन्तु सुखिनः सर्वे सन्तु निरामया ।
सर्वे भद्राणि पश्यन्तु माकश्चिद् दुःख
भाग्भवेत् ॥

सभी सुखी हों, सभी रोग मुक्त रहें, सभी मंगलमय के साक्षी बनें और किसी को दुःख का भागी ना बनना पड़े।

प्रस्तावना—

आयुर्वेद शास्त्र जीवन का विज्ञान है, यह प्राचीन भारतीय चिकित्सा पद्धति है, जिसके ज्ञान को आजकल दुनिया भर में स्वीकार किया जाता है। यह एक पूर्ण चिकित्सा प्रणाली है जिसमें शारीरिक, मानसिक, दार्शनिक, नैतिक और आध्यात्मिक स्वास्थ्य शामिल है और इसमें हजारों चिकित्सीय अवधारणायें और परिकल्पनायें शामिल हैं। उनमें से एक अवधारणा क्रिया काल है। व्याधि की कोई स्थिर स्थिति नहीं है बल्कि विकारगत विविध परिवर्तनों की एक श्रृंखला है, जो कई अवस्थाओं में होती है। रोग की चिकित्सा में चिकित्सक का यह कर्तव्य होता है कि उसके उत्पत्तिक्रम की विभिन्न अवस्थाओं का ज्ञान करके उसके रोकथाम या प्रतिकार का प्रबन्धन करें।

आचार्य सुश्रुत ने बड़े ही विस्तार से व्याधि की उत्पत्तिक्रम तथा अवस्थाओं में किए जाने वाले प्रतिकार की विवेचना की एवं इन अवस्थाओं का नाम क्रियाकाल दिया है।

क्रियाकाल का अर्थ—

आयुर्वेद चिकित्सा का उद्देश्य (प्रयोजन)

स्वस्थस्य स्वास्थ्य रक्षणम् आतुरस्य विकार प्रशमनं च।

(चू.सू.30/26)

उपरोक्त दोनों उद्देश्य की पूर्ति शरीर, इन्द्रिय, मन एवं आत्मा संयोग रूप आयु को स्थिर एवं सम रखकर ही प्राप्त किये जा सकते हैं। इस उद्देश्य की पूर्ति का प्रमुख साधन है— क्रियाकाल। आयुर्वेद में काल को एक स्वतंत्र द्रव्य माना गया है उसे "सूक्ष्मामपि कला न लीयते इति कालः", कहा है, अर्थात् काल निरन्तर गतिशील है और वह स्थिर नहीं रहता है। काल दो प्रकार का होता है। नित्यग एवं आवस्थिक अतः क्रियाकाल को चिकित्सा का अवसर कह सकते हैं।

विभिन्न आचार्यों का मत—

- आचार्य चरक एवं वाग्भट्ट आत्रेय सम्प्रदाय से सम्बन्धित है उनकी दृष्टि में आतुर के विकार—शमन की अपेक्षा स्वस्थ मनुष्य के स्वास्थ्य संरक्षण को अधिक महत्व दिया है। इसी कारण व्यक्तियों के स्वास्थ्य अनुरक्षण के लिये उन्होंने दोषों की वृद्धि की तीन अवस्थाओं का उल्लेख किया है— संचय, प्रकोप, प्रसर, अन्तिम अवस्था में दोष स्वतः ही सम हो जाते हैं, अतः दोष

**Final Year Student, Govt. P. G. Ayurved College and Hospital, Varanasi (U.P.)*



वृद्धि की वास्तव में दो ही अवस्थायें हैं— संचय एवं प्रकोप। ऋतुओं में कालवशात् होने वाली दोषों की वृद्धि स्वाभाविक है, अतः ऋतु परिवर्तन (ऋतुसंधि) के समय आहार विहार एवं चर्या में परिवर्तन कर एवं औषधि द्वारा साम्यावस्था में लाया जा सकता है, इसलिये आचार्यों ने ऋतुचर्या के बारे में बताया है।

- ii. आचार्य सश्रुत ने वर्णप्रश्नानीध्याय में षट्क्रिया काल का वर्णन किया है। सश्रुत का कथन शल्य चिकित्सा की दृष्टि से है। उनका कथन है कि शरीर में व्रण उत्पत्ति भी दोष वैषम्य के बिना नहीं हो सकती है। अभिघात, विष आदि कारणों से व्रण की उत्पत्ति में भी दोष वैषम्य ही कार्य करता है। यह प्रक्रिया छः अवस्थाओं में होती है, जिन्हें षट्क्रिया काल कहते हैं। जिस प्रकार दोष वैषम्य रोग उत्पत्ति का परिणाम होता है, उसी प्रकार व्रणात्पत्ति की प्रारम्भिक अवस्था शोथ से एवं इसके रोपण तक छः अवस्थायें होती हैं, जैसे रोग उत्पत्ति की छः अवस्थायें होती हैं।

- (i) शोथ (Swelling)
- (ii) रक्तिमा (Redness)
- (iii) विद्रधि (Abscess formation)
- (iv) व्रणभाव (Ulceration)
- (v) पूयभाव (Necrosis)
- (vi) रोपण (Resolution)

सुश्रुत ने इसी प्रकार व्याधियों में देह परमाणुओं एवं व्याधि के मध्य होने वाले दोष-दूष्य सम्मूर्च्छनाजन्म छः क्रिया काल को कहा है।

षट्क्रिया काल -

निज आगंतुक दोनों प्रकार के विकारों की उत्पत्ति दोष-वैषम्य से स्रोतों-वैगुण्य होकर व्याधि उत्पन्न करती है। अतः क्रियाकाल के अनुसार विषम दोषों की वृद्धि की छः अवस्थायें निम्नलिखित हैं—

- (i) संचय (प्रथम क्रियाकाल)
- (ii) प्रकोप (द्वितीय क्रियाकाल)
- (iii) प्रसर (तृतीय क्रियाकाल)
- (iv) स्थान संश्रय (चतुर्थ क्रियाकाल)
- (v) व्यक्तावस्था (पंचम क्रियाकाल)
- (vi) भेदावस्था (षष्ठ क्रियाकाल)

संचय च प्रकोपं च प्रसरं स्थान संश्रयम्।
व्यक्तिं भेदं च यो वेति दोषाणां स भवेद्
भिषक् ।।

(सु.सू.21/36)

(i) संचयावस्था—

संचय का अर्थ 'एकत्रित होना' है। विभिन्न आहार-विहार के परिणामस्वरूप दोषों का उनके प्राकृतिक स्थान (स्वस्थान) पर बढ़ना संचय कहलाता है। इस अवस्था में यह देखा गया है कि जिन गुणों से दोष का संचय होता है, उसके प्रति द्वेष तथा उनके विपरीत गुण वाले आहार-विहार के सेवन की इच्छा होती है। इस काल में आम का विशेष महत्व है, जिस प्रकार जलाशय में जल को एकत्रित करने के लिये चारों तरफ घेरा होता है, उसी प्रकार इस अवस्था में आम द्वारा अवरोध कर दोषों का संचय होता है। यथा वात के संचय से कोष्ठ में स्तब्धता एवं भारीपन, पित्त के संचय से पदार्थों का पीतवर्ण दिखाई पड़ना, कफ के संचय



से अवयवों में भारीपन एवं आलस्य इत्यादि। इसे आधुनिक चिकित्सा विज्ञान की भाषा में Incubation Period से कर सकते हैं।

(ii) प्रकोपावस्था –

इस अवस्था में संचित दोष अपने स्वस्थान से निकलकर अन्य स्थानों में प्रसरण के लिये तैयार होते हैं। एक दोष दूसरे दोष के स्थान पर वृद्धि को प्राप्त होकर एकत्रित होता है, तो उसे प्रकोप कहते हैं। इसी कारण डल्हण ने “विलयनरूपा वृद्धि प्रकोप” तथा वाग्भट्ट ने ‘उन्मार्ग गामिता’ को प्रकोप कहा है इस अवस्था में आम आमविष में परिवर्तित हो जाता है, प्रकोप दो प्रकार का होता है— चय प्रकोप, अचय प्रकोप। चय प्रकोप— संचयपूर्वक प्रकोपक कारणों से दोषों का उत्तेजित होना। अचय प्रकोप— बिना दोष संचय के प्रकोप का होना यथा बलवान से युद्ध करने पर वात प्रकोप, क्रोधादि से पित्त प्रकोप होता है।

(iii) प्रसरावस्था –

इस अवस्था में प्रकृपित दोष प्रसरण करने लगते हैं, जिस प्रकार पात्र में संशोधनार्थ रखा यीस्ट पिष्ट एवं जल को कुछ समय बाद किण्वन होता है एवं वह अपने आकार में बढ़कर अपने पात्र से बाहर फैलने लगता है वैसे ही प्रकृपित दोष बाहर निकल कर प्रसरण करने लगते हैं। आम से बने अवरोध के रहने पर दोष का प्रसरण कैसे होता है? इसका उत्तर यह है कि आम दोष संघात्मक प्रवृत्ति रखता है और इस अवस्था में आम— आमविष में परिवर्तित होकर प्रकृति से विकृति की ओर गमन करता है, क्योंकि आमविष लघु, सूक्ष्म, आशु आदि गुण से दोषों के शीघ्र प्रसरण में सहायक होते हैं। यथा इक्षुरस— सिरका दोषों के प्रसरण के बहुत सारे मार्ग हैं यथा रक्तादि धातु, हृदय, वस्ति, महास्रोतास, कोष्ठ इत्यादि इन मार्गों से दोषों

(वात, पित्त, कफ, रक्त) का प्रसरण आपस में दोषों के संयोग से 15 प्रकार से होता है। यथा— वातपित्त, वातशोणित, वात पित्त कफ इत्यादि। वात प्रसर से— पेट में गुड़गुड़ाहट, पित्तप्रसर से उष्णता, ओष, चोष; कफ प्रसर से— अरुचि, अंगसाद, ददर्दि।

(iv) स्थान संश्रयावस्था—

इस अवस्था में प्रकृपित प्रसरणशील दोष किसी स्थान विशेष पर रुक कर एक या एक से अधिक धातुओं एवं मलों को दूषित कर एवं उनके साथ मिलकर (दोष दुष्य सम्मूर्छना) स्थान अनुरूप रोग उत्पन्न करते हैं। इस अवस्था में तीन प्रमुख बाते होती हैं।

- (a) ख—वैगुण्य (निदान के एक अंश से उत्पन्न होता है)
- (b) दोष दूष्य सम्मूर्छना
- (c) प्रागुत्पत्ति लक्षण व्याधि

जिस प्रकार घनीभूत बादल बिना पर्वतों के अवरोध के वर्षा नहीं करते हैं, उसी प्रकार दोष समस्त शरीर में फैलते हैं एवं स्रोतस के जिस स्थान पर अवरोध (ख—वैगुण्य) होता है उसी स्थान पर स्थान संश्रय कर रोग उत्पन्न करते हैं। इसलिये इसे “व्याधिजन्म काल” भी कहते हैं।

क्षिप्यमाणः ख वैगुण्याद्रसः सज्जति यत्र सः।
करोति विकृतिम् तत्र खे वर्षमिव तो यदः॥

(च.चि. 15/38)

(v) व्यक्तावस्था—

व्याधि की इस अवस्था में स्थान संश्रय में अव्यक्त लक्षणों वाले रोग स्पष्ट हो जाते हैं तथा दोष दूष्य सम्मूर्छना पूर्ण हो जाती है, तत्पश्चात्



स्त्रोतों दुष्टि एवं प्रत्यात्म लक्षण उत्पन्न हाते है। इस अवस्था में निम्नलिखित घटनाएं होती है—

- पूर्ण दोष दूष्य सम्मूर्छना
- स्रोतस दुष्टि
- व्यक्ति लक्षण समुच्चय

इसे व्याधि दर्शन काल भी कहते है। तथा इस अवस्था में रोग का निदान हो जाता है। यथा गुदा मार्ग से अतिद्रव सरण होना, अतिसार संताप होने पर ज्वर इस अवस्था में दोष कुपित होकर अलग-अलग स्थानों पर रोगों को उत्पन्न करते हैं, इसलिये चिकित्सक को प्रकृति स्थान भेद एवं कारण विशेष को जानकर चिकित्सा व्यवस्था करें यथा—

- पित्त स्थानगत वात में – पित्तवत चिकित्सा
कफ स्थानगत पित्त में – कफवत चिकित्सा
वात स्थानगत कफ में – वातवत चिकित्सा

(vi) भेदावस्था—

व्यक्तावस्था में व्यक्त व्याधियाँ प्रतिकार के अभाव में विदीर्ण होकर व्रण भाव को प्राप्त हो जाती है। उसे भेदावस्था कहते हैं। भेदावस्था में निम्नलिखित अर्थ को ग्रहण करते हैं।

- व्याधि की साध्यासाध्यता निर्धारण
- व्याधियों का वातज, पित्तज, कफज आदि का विभाजन
- व्याधि का नवीन या जीर्ण होना
- व्यक्त व्याधि के उपद्रव

इसे उपद्रवावस्था भी कहते हैं।

अतः षट्क्रिया काल की प्रथम तीन अवस्था को हम “दोष क्रियाकाल” तथा अन्तिम तीन अवस्था

को “व्याधि क्रियाकाल” कह सकते हैं।

रोगों के निदान (Dignosis) में षट्क्रियाकाल की उपादेयता

चिकित्सक को रोगी के अंतरात्मा में प्रवेश कर तथा सूक्ष्मबुद्धि से परीक्षण कर इन षट्क्रिया कालों को जानना चाहिये। इनमें से प्रथम तीन अवस्थाएं सूक्ष्म बुद्धि द्वारा ही ग्राह्य हैं। जो चिकित्सक ज्ञान और बुद्धि रूपी दीपक को लेकर अपने कार्य क्षेत्र में या रोगी की अंतरात्मा में प्रवेश नहीं करता है, वह चिकित्सक चिकित्सा करने में कभी नहीं सफल हो सकता है।

ज्ञान बुद्धि प्रदीपेन यो नाविशति तत्त्वित्।

आतुरस्यान्तरात्मानं न स रोगांश्चिकित्सति ॥

(च.वि. 7/12)

स्वास्थ्य क्षेत्र में एक बहुत बड़ा मुद्दा है, जीवन शैली पर आधारित रोग यथा मधुमेह, उच्च रक्तचाप, मानसिक विकार, कोरोनरी आर्टरी डिजीज (CAD), मोटापा, कैंसर, गठिया इत्यादि।

टाइप-2 मधुमेह से पीड़ित 50 मिलियन लोगों के साथ दुनिया की मधुमेह की राजधानी भारत को इस रोग से सामना करना एक चुनौती है। पूरे विश्व में लगभग 14.1 मिलियन नए रोगी तथा लगभग 8.9 मिलियन लोगों की मृत्यु केवल कैंसर से होती है। हालांकि चिकित्सा विशेषज्ञों का मानना है कि समय रहते यदि इसका निदान (Dignosis) कर ले तो रोगियों को सामान्य जीवन जीने में मदद मिल सकती है। यह समय रहते केवल विद्वान वैद्य षट्क्रिया काल की सहायता से संचय, प्रकोप प्रसर अवस्था में निदान कर उसे केवल पथ्य-अपथ्य, दिनचर्या, ऋतुचर्या से ही नियंत्रित कर सकते हैं।



षट्क्रियाकाल एवं Etio-Pathogenesis - आधुनिक चिकित्सा में व्याधि के निदान (Dignosis) को Etio- pathogenesis कहते हैं।

जिस प्रकार आयुर्वेद में रोगोत्पत्ति का अध्ययन क्रिया काल के माध्यम से किया जाता है, ठीक उसी प्रकार आधुनिक चिकित्सा विज्ञान में रोगोत्पत्ति का ज्ञान Etio-pathogenesis के अंतर्गत किया जाता है।

- ♦ त्रिदोष की विषमावस्था को— Imbalance of ratio of oxidant and antioxidant molecules/radicals in the cells.
- ♦ संचय काल को — Level of oxidative stress, which damage cell structure and its function (Somatic Mutation)
- ♦ प्रकोप काल को — Unusual cell proliferation (DNA Mutation)
- ♦ प्रसर काल को — Cell migration (Metastasis)
- ♦ स्थान संश्रय काल को — Malignant progression, Invasion and Settling of Cancer into distant organ.
- ♦ व्यक्तावस्था को— Alteration of normal function of affected organ.
- ♦ भेदावस्था को — Type of Cancer and Complication

आधुनिक चिकित्सा विज्ञान में कैंसर का निदान प्रारम्भिक अवस्था में नहीं हो पाता है। इसकी पहचान अन्तिम अवस्था में होती है, जबकि आयुर्वेद षट्क्रिया काल की सहायता से इसका निदान प्रारम्भिक अवस्था में करके जीवन शैली पर आधारित रोगों (Life Style Disorders) से विश्व को मुक्ति मिल सकती है।

- चिकित्सक साध्यता असाध्यता निर्धारण षट्क्रिया काल की अवस्थाओं से करते हैं, जिससे चिकित्सक को उपचार करने में सुविधा तथा यश की प्राप्ति हाती है।
- क्रियाकाल के अन्तिम अवस्था में औषधि प्रयोग व्यर्थ है, क्योंकि उचित काल में ही औषधि प्रयोग सिद्धि प्रदान करता है।
- षट्क्रिया काल रोग उत्पन्न होने की एक प्रक्रिया है तथा उत्तरोत्तर अवस्था में पहुँचने पर दोष अधिक बलवान हो जाते हैं। अतः चिकित्सक को चिकित्सा प्रारम्भिक अवस्था में कर लेनी चाहिये। जिस प्रकार तरुण वृक्ष को अल्पश्रम से समूल नष्ट किया जा सकता है, उसी प्रकार रोग का निदान कर प्रारम्भिक अवस्था में रोग उन्मूलन कर देने से रोग को समूल नष्ट किया जा सकता है।

रोग ही ना हो शरीर में आपके।

यदि प्रारम्भिक अवस्था में निदान हो आपके।।

रोगों के प्रबन्धन में षट्क्रिया काल की उपादेयता—

चिकित्सा काल के उपस्थित न होने पर चिकित्सा करने एवं चिकित्सा काल के उपस्थित होने पर चिकित्सा न करने से हीन अथवा अतिरिक्त चिकित्सा करने से साध्य रोग भी असाध्य हो जाते हैं। चिकित्सा का उद्देश्य सम्प्राप्ति विघटन है और सम्प्राप्ति विघटन हेतु त्रिविध चिकित्सा की जाती है—

- (a) दोष प्रत्यनीक चिकित्सा
- (b) व्याधि प्रत्यनीक चिकित्सा
- (c) दोष व्याधि प्रत्यनीक चिकित्सा (उभय प्रत्यनीक)
प्रत्येक रोग की सम्प्राप्ति में दोष, दूष्य, स्रोतस



एवं अग्निविषम स्वीकार किये जाते हैं, इसलिये उपरोक्त चिकित्सा विधान करने से पहले दोषों का निहर्षण अथवा शाधेन या शमन, दूष्यों का पोषण, स्रोतसों की शुद्धि तथा अग्नि को प्रारम्भिक अवस्था में लाने के लिये दीपन पाचन उपकर्म का प्रयोग करना चाहिये। उपरोक्त त्रिविध चिकित्सा को आधार बनाकर निम्नवत् प्रबन्ध करते हैं—

- निदान की चिकित्सा – निदान परिवर्जन
- दूष्यों की चिकित्सा – दोष प्रत्यनीक चिकित्सा
- दोष दूष्य सम्मूर्छना को भंग करना – व्याधि प्रत्यनीक चिकित्सा
- स्रोतस दुष्टि की चिकित्सा – शोधनोपचार
- मंदाग्नि की चिकित्सा – दीपन पाचनोपचार

इस प्रकार सम्प्रति विघटन का प्रबन्ध करते हैं।

दोष प्रत्यनीक चिकित्सा –

- शोधन चिकित्सा— वात दोष में वस्ति, पित्त दोष में विरेचन, कफ दोष में वमन एवं शमन चिकित्सा।
- शमन चिकित्सा—दोषों के गुणों के अनुसार शामक औषधि का प्रयोग
- हेतु विपरीत चिकित्सा।
- नानात्मक व्याधि में दोष प्रत्यनीक चिकित्सा।

व्याधि प्रत्यनीक चिकित्सा—

किसी व्याधि की विशेष चिकित्सा व्याधि प्रत्यनीक चिकित्सा है यथा—

- दैव व्यपाश्रय चिकित्सा
- विकृतविषमसमवेत सम्मूर्छना में व्याधि प्रत्यनीक चिकित्सा यथा— हृदय रोग में अर्जुन, कृमिरोग में विडंग
- स्रोतों दुष्टि में स्रोतस प्रभावी द्रव्य यथा

प्राणवहस्रोतस में कनकासव, मूत्रवह स्रोतस में पुनर्नवा आदि का प्रयोग

- शल्य चिकित्सा व्याधि प्रत्यनीक चिकित्सा है
- महाकषायों का प्रयोग
संचय – हेतु विपरीत चिकित्सा
प्रकोप – हेतु विपरीत चिकित्सा
प्रसर – हेतु विपरीत चिकित्सा
स्थान संश्रय – उभय प्रत्यनीक चिकित्सा
भेदावस्था – व्याधि प्रत्यनीक चिकित्सा

उपरोक्त वर्णन से स्पष्ट है रोग प्रबन्धन में षट्क्रिया काल के अवस्थाओं के अनुरूप चिकित्सा करने से रोगों को समूल नष्ट किया जा सकता है।

उपसंहार—

क्रियाकाल के अध्ययन से स्पष्ट है कि व्याधि उत्पन्न होने की एक प्रक्रिया है जो विभिन्न अवस्थाओं में विकसित होती है। षट्क्रिया काल का सार्वजनिक स्वास्थ्य महत्व को उपेक्षित नहीं किया जा सकता है। क्योंकि यह अपने प्रत्येक चरण में रोग प्रक्रिया को रोकने का हर मौका प्रदान करता है। रोग नियंत्रण और रोकथाम पर रणनीति को बनाने के लिये क्रियाकाल का ज्ञान बेहद जरूरी है। विश्व स्वास्थ्य संगठन ने भी प्रतिषेध चिकित्सा पर बल दिया है। प्रतिषेध चिकित्सा की सफलता इस बात पर आधारित है कि व्यक्ति के शरीर, मन एवं वातावरण को जानकर योग्य अवस्था का ज्ञान करें, जिससे उस अवस्था में प्रतिषेध उपायों को किया जा सके।

स्वस्थ भारत का सपना तभी होगा साकार।

जब आयुर्वेद बनेगा जीवन का आधार।।





परिषद् समाचार

विश्व आयुर्वेद परिषद् एवं एमिटी इन्स्टीट्यूट, नोएडा के संयुक्त तत्वावधान में एक दिवसीय संगोष्ठी का आयोजन

विश्व आयुर्वेद परिषद् एवं एमिटी इन्स्टीट्यूट, नोएडा के संयुक्त तत्वावधान में 24 नवम्बर 2019 को "अर्न्तमंथन" इन्डोकाइनोलाजी एवं आयुर्वेद विषय पर एक दिवसीय राष्ट्रीय संगोष्ठी का आयोजन हुआ। प्रो० के. एस. धीमान निदेशक सी.सी.आर.ए.एस., नई दिल्ली ने कार्यक्रम के मुख्य अतिथि के रूप में संगोष्ठी का उद्घाटन किया। संगोष्ठी में प्रो० संजीव शर्मा, निदेशक, एन.आई.ए., जयपुर; प्रो० पी.के. प्रजापति, ए.आई.आई.ए., नई दिल्ली; प्रो० इंद्रीश, प्राचार्य एवं अधीक्षक, तिबिया कालेज, नई दिल्ली; विशिष्ट अतिथि के रूप में उपस्थित रहें। प्रो० एच. एस. श्रीनिवास गुज्जरवार, डॉ० मायाराम उन्याल, प्रो. एस. के. बालियान, डॉ० एस. के. राजपूत, निदेशक ए.आई.आई.एस.एम. भी आयोजन में उपस्थित रहें। डॉ० अनुज जैन, डॉ० अनुमेहा एवं वैद्य विनिश गुप्ता विशिष्ट वक्ता के रूप में आमंत्रित थे। समारोह के आयोजन में विश्व आयुर्वेद परिषद् के उ०प्र० के अध्यक्ष डॉ० सुरेन्द्र चौधरी, अमित अदाना एवं उनके सहयोगियों ने सक्रिय योगदान दिया।

विश्व आयुर्वेद परिषद् एवं ब्लिस आयुर्वेद, नोएडा द्वारा धन्वंतरि जयन्ती एवं आयुर्वेद दिवस समारोह का आयोजन सम्पन्न

विश्व आयुर्वेद परिषद् एवं ब्लिस आयुर्वेद, नोएडा द्वारा दिनांक 25 अक्टूबर 2019 को ब्लिस आयुर्वेद भवन नोएडा में धन्वंतरि जयन्ती एवं आयुर्वेद दिवस समारोह का आयोजन हुआ। इस अवसर पर धन्वंतरि पूजन एवं हवन, योग क्रिया प्रदर्शन एवं सांस्कृतिक कार्यक्रम भी आयोजित हुआ। जिसमें प्रवीण पाठक एवं उनके सहयोगियों द्वारा योग नृत्य प्रस्तुत किया गया। समारोह में ब्लिस आयुर्वेद के डॉ० नितिन अग्रवाल एवं विश्व आयुर्वेद परिषद् के कार्यकर्ताओं सहित विश्व के अनेक देशों अमेरिका, जर्मनी, स्विट्जरलैण्ड, सोवियत रूस के अतिथियों की सहभागिता रही।

One day CME & PG Alumni meet "SamSiAM 2019" organised in Assam.

On 7th December 2019, the PG Dept of Samhita and Siddhanta, Govt. Ayurvedic college Jalukabari, Guwahati in collaboration with Vishwa Ayurved Parishad (VAP), Assam Chapter Organised a One day CME On: "Application of Modern Research Methodology in the Field of Ayurveda" in connection with PG Alumni meet of the Dept "SamSiAM 2019". In this seminar many eminent resource persons and scientists with having tremendous exposure in the field of Research from different elite institutes like IIT Guwahati, JNU, Guwahati Medical college, Veterinary College, Guwahati, Guwahati University, etc were invited for deliberation of lectures on research. Also an expert from Pennsylvania University of school of medicine, Philadelphia, USA Dr. Kacy Cullen, Associate Professor, Neurosurgery Dept., delivered lecture and enhanced the gravity of the CME. In this CME Alumni from all the North Eastern states like Manipur, Arunachal Pradesh, Meghalaya, Tripura etc and from other states like Bihar, Orissa, UP, Haryana participated. In the



inaugural session Director of NEIAH, Shillong Meghalaya and National Secy of VAP, Vd. Shivaditya Thakur etc. graced the occasion. Prof. Khagen Basumatary, the HOD cum General Secretary of VAP was the organising president of the CME. A souvenir cum abstarct book containing articles of all resource persons and thesis work done in the department was published.

राष्ट्रीय धन्वंतरि आयुर्वेद पुरस्कार-2019

दिनांक 25 अक्टूबर 2019 को राष्ट्रीय आयुर्वेद संस्थान, जयपुर, राजस्थान में "चतुर्थ राष्ट्रीय आयुर्वेद दिवस समारोह" आयोजित हुआ। जिसमें राष्ट्रीय धन्वंतरि आयुर्वेद पुरस्कार-2019" प्रदान किये गये समारोह के मुख्य अतिथि लोकसभा अध्यक्ष माननीय श्री ओम बिरला तथा विशिष्ट अतिथि आयुष एवं रक्षा राज्यमंत्री श्री यशोपाद नाइक जी थे। केन्द्र सरकार एवं आयुष मंत्रालय वर्ष 2016 से प्रत्येक वर्ष राष्ट्रीय आयुर्वेद दिवस, धन्वंतरि जयन्ती के अवसर पर राष्ट्रीय धन्वंतरि पुरस्कार, आयुर्वेद एवं आयुष के क्षेत्र में कार्य कर रहे विशिष्ट व्यक्तियों को सम्मान पत्र, पदक एवं पांच लाख रुपये की धनराशि पुरस्कार स्वरूप प्रदान करती है।

इस वर्ष यह पुरस्कार विश्व आयुर्वेद परिषद् के केन्द्रीय मार्गदर्शक मण्डल सदस्य वैद्य प्रो० पी० वी० वेंकटाचार्य एवं पद्मश्री श्री प्रो० रामहर्ष सिंह जी को उनके उत्कृष्ट सेवाओं के लिए प्रदान किया गया। विश्व आयुर्वेद परिषद् आयुर्वेद जगत के इन महान विभूतियों को शुभकामनाएं प्रेषित करता है।

शोक सन्देश



विश्व आयुर्वेद परिषद् के केन्द्रीय संगठन सचिव श्रद्धेय डॉ योगेश चंद्र मिश्र जी की धर्मपत्नी का देहावसान दिनांक 6 नवम्बर 2019 हो गया है। परमपिता परमेश्वर उनकी आत्मा को शांति प्रदान करते हुए अपने श्रीचरणों में स्थान दे। परिवार को इस वज्राघात को सहन करने की असीम शक्ति प्रभु दे, यह प्रार्थना है।



विश्व आयुर्वेद परिषद् के वरिष्ठ सदस्य एवं विश्व आयुर्वेद पत्रिका के सम्पादक डा. अजय पाण्डेय जी की माता श्रीमती ग्याना पाण्डेय जी का दिनांक 29 नवम्बर 2019 को निधन हो गया। परिषद् परिवार मृतक आत्मा की शान्ति के लिए ईश्वर से प्रार्थना करता है तथा उन्हें श्रद्धासुमन अर्पित करता है।