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राष्ट्रीय शिक्षण मंडळ संचलित आयुर्वेद रसशाळेच्या ८६ व्या वर्धापनदिनानिमित्त हार्दिक शुभेच्छा! १ ऑगस्ट २०२१

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Editor - AYURVIDYA MASIK, 583 / 2, Rasta Peth, Pune - 411 011. **E-mail**: ayurvidyamasik@gmail.com

Phone: (020) 26336755, 26336429 **Fax**: (020) 26336428 Dr. D. P. Puranik - 09422506207 Dr. Vinaya Dixit - 09422516845

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डॉ. दिलीप पुराणिक

नुकतेच म्हणजे जून महिन्यात महाराष्ट्रातील सर्व प्रमुख वृत्तपत्रात मोठ्या व

अग्रभागी झळकलेल्या पुढील मथळ्याने सर्वेच वाचकांचे लक्ष वेधून घेतले. ''ईगतपुरी येथे हॉलिडे रिसॉर्टवर पोलिसांनी मध्यरात्री चाललेल्या 'रेव्ह पार्टीवर' छापा घालून उच्चभ्रू स्तरातील बावीस जणांना अटक केली, विदेशी मद्य, हेरॉईन, इंग्ज ताब्यात घेतले. ह्या बावीस 'उच्चभ्रूंमध्ये' बारा ह्या महिला होत्या आणि त्यापैकी काही सिनेक्षेत्राशी आणि दूरदर्शन क्षेत्राशी संबंधित आहेत.''

ही धक्कादायक बातमी थोडीफार 'शिळी' होते न होते तोपर्यंत दुसरी बातमी आली ती लोणावळ्याची! ह्याही बातमीचे सर्वसाधारण स्वरूप वरील बातमीप्रमाणेच! लगोलग बातमी प्रसिद्ध झाली ''अमली विरोधी पथकाने साडेतीनशे किलो अंमली पदार्थ पकडले, बाजारभावाने त्याची किंमत काही हजार कोटी रूपये.''

अमली पदार्थांच्या विळख्यात 'सिनेसृष्टी' ही घटना नुकत्याच एका सुप्रसिद्ध सिनेअभिनेत्याच्या आत्महत्येच्या प्रकरणातून चव्हाट्यावर आली. ह्या संदर्भात झालेल्या पोलीस आणि अमली पदार्थ विरोधी पथकाच्या तपासात एकूणच त्या घटनेची पाळेमुळे अमली पदार्थांचा व्यापार आणि त्यांच्या तस्करीपर्यंत जावून पोहोचली. एकूणच अमली पदार्थं, त्यांचे व्यसन ह्यांची व्यापी सर्वसाधारण माणसाच्या कल्पनेपलीकडे आहे असेच म्हणावे लागेल.

अमली पदार्थ व ड्रग्ज ह्यांचे व्यसन ही जागतिक समस्या आहे. शहरी भागात व उच्चभ्रू समाजात त्याचे प्रमाण अधिक असले तरी ग्रामीण भागातही त्याचे प्रमाण चिंता करण्यासारखे आहे. पुरुषांमध्ये व्यसनाचे प्रमाण अधिक असले तरी ह्या बाबतीत स्त्रियाही नक्कीच मागे नाहीत हे सुरुवातीला आलेल्या उल्लेखावरून लक्षात येते

अमली पदार्थ तसेच ड्रम्जचे सेवन विविध पद्धतींनी केले जाते. १) पहिला प्रकार अथवा पद्धत म्हणजे मुखाद्वारे (oral) २) नाकाद्वारे जोरात ओढून घेणे (snorting) ३) अमली पदार्थाची वडी गुदद्वारावाटे प्रवेशित करणे (soppository) ४) धुम्रपानाद्वारे (smoking) ५) टोचून घेणे (injection). ह्या सर्व पद्धती कमी अधिक प्रमाणात व्यसनाधिनांमध्ये प्रिय आहेत. व्यसन सेवनाच्या वेगवेगळ्या पद्धतींप्रमाणे व्यसन करण्याची विविध द्रव्येही वापरली जातात. त्यामध्ये १) उत्तेजित करणारी द्रव्ये (Stimulants)–Cocaine २) औदासिन्य करणारी (Depressant)–Alcohol ३) अफूसारखी वेदनाहारक (Heroin) ४) मानसिक भ्रम उत्पन्न करणारी (Hallocinogens)–LSD. भारतात सर्वसाधारणपणे वापरली जाणारी अमली द्रव्ये म्हणजे – Cannabis, Sativa, Heroin, अफू (opiates), Kratom–LSD, Charas

(Cannabis concentrate) or Hashish, Kief, भांग, Dhoor, गांजा इत्यादी. ह्या खेरीज ब्राऊन शुगर, निद्राजनन करणारी द्रव्ये (sedatives), ''याबा'' (कृत्रिम अमली पदार्थ), ''Ice'', तसेच श्वासाबरोबर पेट्रोल, व्हाइटनर ह्या सारख्या दव्यांचा वापर केला जातो.

आज अमली पदार्थांच्या विळख्यात जागतिक स्तरावर सुमारे चार कोटी लोक अडकले आहेत. त्यात सुमारे सव्वा कोटी महिला आहेत. भारतात देखील सुमारे दीड कोटी लोक अमली पदार्थांच्या व्यसनात गुरफटलेले आहेत. सन २०१९ मध्ये केलेल्या सर्वेक्षणानुसार सुमारे ४० लाख-गांजा, चरस, ५१ लाख धूमपानाद्वारे –गांजा, कोकेन, पेट्रोल, व्हाईटनर व्यसनाधीन आहेत. भारतात पंजाब, उत्तरप्रदेश, हरियाना, आंध्र, गुजरात ह्या राज्यात अमली पदार्थ व्यसनाधिनांचे प्रमाण अधिक आहे.

अमली पदार्थांचे व्यसन लागण्याची विविध कारणे सांगितली जातात. त्यामध्ये आजार, मानसिक आरोग्य ढळणे, कौटुंबिक कलह, अनुवंशिकता, विशिष्ट दडपण वगैरे. व्यसनाधीन व्यक्तींकडून त्याचे समर्थन केले जाते. त्यामध्ये व्यसनामुळे वेगवेगळे प्रश्न, समस्या ह्यांना सामोरे जाण्यास बळ प्राप्त होते, मनास आधार मिळतो, शारिरीक व मानसिक पीडा, चिंता कमी होतात असे सांगितले जाते.

अमली पदार्थ व ड्रम्जच्या व्यसनग्रस्तांना पुरवठा करणाऱ्या अनेक आंतरराष्ट्रीय टोळ्या कार्यरत असून विविध पद्धतींनी हे पदार्थ पोहोचवले जातात. ह्यालाच Drug Trafficking म्हणतात. ह्याला आळा घालण्यासाठी राष्ट्रीय व आंतरराष्ट्रीय स्तरावर अनेक प्रयत्न केले जात आहेत. परंतु हे प्रयत्न तोकडे पडत असून अमली पदार्थांच्या व्यसनामुळे अनेक व्यसनी व कुटुंब ही उध्वस्त झाली आहेत. ह्यासाठीच सन १९८७ साली संयुक्त राष्ट्र संघाने (UNO) अमली पदार्थांच वाढते सेवन व तस्करी ह्यासाठी २६ जून हा दिवस 'International Day Against Drug Abuse and I llicit Trafficking' म्हणून जाहीर केला आणि तेव्हापासून अनेक राष्ट्रांमध्ये तो पाळला जातो. २६ जून २०२१साठी संयुक्त राष्ट्रसंघाने जाहीर केलेला विशेष विषय होता, 'Share Drug Facts To Save Lives''.

अमली पदार्थांच्या व्यसनाला आळा घालणे हे सर्व जागृत व जबाबदार समाजाचेच काम आहे. विशेषतः वैद्यकीय क्षेत्रात काम करणाऱ्यांनी त्यासाठी योगदान देणे अत्यंत आवश्यक आहे. त्यासाठी गावोगावी ''Narcotic Anonymous'' सारख्या संस्था कार्यरत होणे आवश्यक आहे.

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Role Of Langhana In The Form Of Upawasa And Laghwashana (Laghuahara) In Lifestyle Disorders

Vd Monica S. Mulay, M.D. Ph D. (Panchakarma) Assistant professor, Tilak Ayurveda Mahavidyalaya, Pune.

Introduction - Lifestyle disorder is umbrella term with different diseases like obesity, diabetes mellitus, cardiac disorders, PCOD, stress etc. Modified lifestyle including unwholesome food, wrong food processing, wrong diet pattern, modified sleep patterns or some behavioral habits lead to lifestyle disorders. We can correlate this condition with santarpanottha diseases. Charaka has described whole chapter for sanntarpanajanya diseases. As Ayurveda is science of life, the prime aim is prevention of disease (swasthyarakshana). So, Ayurveda has a big potential to prevent these lifestyle disorders by dinacharya, rutucharya, use of rasayana and appropriate use of ahara and aharavidhi.

Therapeutic measures for these diseases are given as apatarpana or langhana. It mainly includes ullekhana (shodhana), upawasa, vyayama, etc.

Apatarpana is synonym for langhana or langhana means anashana. There are ten types of langhana- 4 shodhana and 6 shamana types (1). Among these ten types, the article deals with langhana i.e. upawasa or anashana or laghuannasevana. There are different food items with laghu attribute prescribed in different santarpanottha diseases. So, to understand role of laghuahara in this type of vyadhis is important. Langhana is responsible for doshakshapana and agnideepana and ultimately for doshaasamya or balance of tridoshas. This article elaborates role of langhana or laghuannasevana in santarpanottha diseases.

Aim - To evaluate the role of langhana i.e. upawasa (fasting) and laghuahara in santarpanottha diseases (lifestyle disorders).

Objectives - 1) To elaborate the samprapti of

santarpanottha diseases

- 2) To elaborate langhana karma and its effects.
- 3) To explain role of langhana and laghuahara in santarpanottha diseases with reference to different pathyakalpanas as laghuahara.

This study elaborated role of langhana and laghuannasevana in santarpanottha diseases by collecting and reviewing different references of santarpanotthavyadhi and langhana karma.

Review of literature - 1) Charaka has elaborated santarpanajanya vikara samprapti (pathophysiology of lifestyle disorders) in sootrasthana. Prameha, kustha, pandu, shotha and amapradosha are different vyadhis included in this group. Following causative factors are enlisted in these vyadhis.

Table 1-Santarpanotthavyadhi hetu

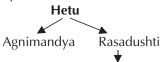
Hetu	Hetuvishesha	Guna
(causes)		(attributes)
Ahara	Navanna, Guru,	
	mansa, madya	manda,
	-	Pichhila,
		Abhishyandi
Vihara	Cheshtadwesha,	Sthira, guru,
	shayyasanasukha	manda,
		abhishyandi

These hetus will cause accumulation of doshas, vitiation of rasa, mansa and medadushti.

Long term use of these factors leads to santarpana or vruddhi of specific dhatus like mansa and meda i.e. these dhatus are not nourished properly but there is disproportionate increase (Ayathaupachaya) of mansa and meda. This type of upachaya is not responsible for dhatusamya or balance of doshas and dhatus in the body.



Figure 1- Samprapti of santarpanottha vyadhi-



Rasadushti - Pandu, jwara, amapradosha, shotha etc. Raktadushti - Kushtha, kandu Mansadushti - Ayathaupachaya, atisthoulyapramehapeedaka Medadushti - Ayathaupachaya

Sanga, Upalepa in srotasas

Dosha- Kapha, pitta, vata

Dooshya - Rasa, rakta, mansa, meda, indriya **Agni -** Jatharagni, dhatvagni

Srotasa- Annavaha, purishavaha, mootravaha, rasavaha, raktavaha, mansa and medovaha

Srotodushti - Sanga (srotorodha), sanga and vimargagamana

Mala - Mutra, purisha, sweda, raja

Treatment principle is given as apatarpana which includes ullekhana (shodhana), vyayama, upawasa and udwartana. This article deals with upawasa and laghu annasevana options from the abovementioned treatment protocol.

1) Concept of langhana upakrama

There are 6 treatment modalities ie langhana, brunhana, swedana, stambhana, snehana and rookshana. These are three pairs with antagonistic effects. (3)

Langhana is one important modality among them. It creates lightness in body.

Langhana dravyas possess following attributes. The efficacy of the attributes is given accordingly.

Table 2 Langhana and karma (4)

Attribute	Karma
Laghu	Langhana
Ushna	Pachana
Teekshna	Shodhana
Vishada	Kshalana
Rooksha	Shoshana
Sookshma	Vivarana
Khara	Lekhana

Sara	Anulomana
Kathina	Dhrudhikaran

If we observe the effect mentioned in table on dosha, dhatu, mala etc. langhana will perform functions like

Dosha - vatakara, kaphahara, pittahara **Dhatu -** Langhana, karshana, lekhana **Agni -** deepana **Mala -** kshaya

There are 10 types of langhana - 4 shodhana, pachana, upawasa, vyayama, pipasa, maruta and atapa. Each has specific indications.

If there is mild vitiation of doshas, langhana i.e. upawasa is useful to pacify doshas. Small quantities of water get absorbed by heat and wind, similarly doshas are reduced by aggrevation of agni and vata due to langhana. Hence it is advised in chardi, atisara, visuchika, etc. For moderate vitiation of doshas, pachana, deepana, vyayama, etc. can be advised. In severe vitiation of doshas, shodhana type of langhana is prescribed. (5)

In vyadhis like amavata and jwara, langhana is the primary treatment modality.

In Amavata, as ama is important samprapti factor, the first therapeutic measure is langhana. Hence considering samadosha, treatment starts with langhana ie upawasa, pachana and then deepana. After achieving pachana and deepana, shodhana can be administered. (6)

Pathyakalpanas with laghu attributes - Pathyakalpana or ahara described in santarpanottha diseases are considered here. Ayurveda has unique concept of dravya, guna, karma siddhanta. We can suggest different pathyakalpana according to dravyas, combination of dravyas and sanskara. Charaka has advised different pathya kalpana according to vyadhi in chikitsasthana, for example yavanna, mantha, laghumansarasa in prameha and tiktashaka, jangalamansarasa, mudga in Kushtha and takra, mudga and kulattha in sthoulya.

Table 3: Vyadhi and pathyakalpana -

Vyadhi/avastha	Pathyakalpana
Sthoola	Sattu, yava,
	Kulatthayusha,
	Takra, madhoodaka
Prameha	Sattu, yava, manda,
	madhoodaka
Kushtha	Shali, tiktashaka
Jwara	Yavagu, yusha
Samadosha	Upawasa,
	sansarjana karma
Visuchika	Peyadi karma

In Sharangdhar Samhita, different ahara kalpanas with specifically laghu attributes are elaborated. These can be considered in santarpanottha diseases, for eg, ushnodaka, lajamanda, saptamushtikayusha, etc.

- 1) Ushnodakapana It causes medalekhana, amapachana and kaphavilayana.
- **2)** Lajamanda is laghu, pacifies pitta and kapha and hence prescribed in jwara.

It can be used in amashayadushtijanya vikaras.

- 3) Yusha is laghu, nourishes dhatus, kaphaghna and can be used in shwasa and kasavyadhi. Mudga and kulattha yusha is suggested in sthoulya.
- **4)** Saptamooshtikayusha which is amavatahara and kaphaghna, can be used as laghuashana in sthoulya, prameha. (7) Similarly, kulatthayusha, mudgayusha can be used.

Sansarjana krama and tarpana are explained after shodhana to restore agni functions. Both includes sequential diet regime to be used after shodhana. It includes peya, vilepi, akrutayusha, krutayusha, akrutamansarasa and krutamansarasa. (8) It gradually activates agni and nourishes rasa dhatu.

Tarpana - It is sequential diet regime in pitta ailments and alcoholic patients. It includes swacha tarpan instead of peya and ghanatarpana instead of vilepi. ⁽⁹⁾

As sansarjana krama and tarpana has laghu attributes they can be advised in ama avastha and also to counteract santarpanottha

samprapti.

In treatment of sthoulya, shleshma medohara ahara (food items antagonistic to kapha and meda) are advised. This list includes mudga, kulatha etc. (10)

In kushtha, laghuanna is indicated.ref (11)

Shothavyadhi has sangapradhana samprapti with kapha, pitta, rakta and vata vitiation. When this samprapti is accompanied by ama ie amaja shotha, langhana and pachana is the treatment of choice. (12)

1) Action of langhana - Vyadhis like Meha, Kushtha, Amadosha, Vyadhis with samprapti of atisnigdha and abhishyandi are indications of langhana. Hence different types of langhana (10 types of langhana) can be used in these vyadhis. According to dravya guna siddhanta, dravyas (ahara and aushadhi) with laghu, rooksha, ushna, sookshma, etc. attributes and karmas like shodhana, upawasa, vyayama, atapaseva, etc can be used in these vyadhis.

Action of langhana ie upawasa is elaborated in Jwarachikitsa. It pacifies dosha and activates agni. Thus, jwara started reducing, there is lightness in body, and patients can feel hunger and thirst. Here, bala is an important criterion for upawasa. (14)

Effect of langhana are enlisted as-

- 1) Laghav-Lightness in body
- 2) Improvement in appetite- simultaneous activation of thirst and hunger
- 3) Improves strength of indrivas
- 4) Udgarashuddhi
- 5) Vyadhimardava- reduction in strength of disease
- 6) Utsaha- energetic feeling
- 7)Tandranash-loss of laziness or fatigue (15)

All types of langhana can be used in santarpanottha vyadhis according to doshavastha, vyadhibala and rugnabala.

Methodology - References from classics regarding santarpanotthavikara were gathered to elaborate their samprapti i.e. specially anshanshakalpana.

References regarding langhana and



laghvashana were searched. Efficacy of langhana was tried to elaborate and mode of action of langhana in santarpanajanyavyadhis and amapradosha was explained. Different pathya Kalpana (diet receipes) are searched from various santarpanottha diseases.

Observations - There are 4 main results found during this review.

Samprapti of santarpanottha diseases can be explained in terms of gunas ie attributes of hetus.

Langhana karma can be elaborated in terms of gunas ie attributes.

Langhana is antagonistic with the samprapti of santarpanottha diseases.

According to yukti pramana, different laghuahara kalpanas can be used to counteract samprapti of santarpanottha diseases.

Sansarjana krama which is used after shodhana (purificatory measures), can be used in santarpanotthavyadhis to counteract pathogenesis along with other treatment modalities.

Discussion - There is congruency of santarpanottha diseases with lifestyle disorders.

Different hetus like guru, manda, snigdha, picchila and abhishyandi are involved in santarpanottha diseases. Langhana karma has antagonistic attributes to santarpana hetus.

Hence, charaka has mentioned Apatarpana is primary treatment. It includes shodhana, vyayama and udvartana. All the 10 types of langhana can be used in santarpanottha vyadhis as most of the vyadhis like meha, kushtha, amadosha, etc are indicated in langhana arha vyadhis. But the types of langhana are indicated according to doshamana and rugnabala.

Table 4 Classification of langhana types in santarpanottha vyadhis -

Bahudosha, balawan	Shodhana
santarpanottha vyadhi	
Madhyama dosha	Pachana, deepana,
santarpanottha vyadhi	vyayama, upawasa
Alpadosha	Upawasa, laghu

santarpanottha vyadhi	ahara, maruta seva,
	atapaseva.

All types of langhana can be considered in santarpanottha diseases. Upawasa or laghuahara can be considered for langhana effect in santarpanottha diseases in all avasthas either singly or in combination with other langhana types. Laghu ahara or laghu pathya kalpanas can be considered to perform langhana but it is not potent as shodhana. But both have special indications.

Langhana (upawasa) is inevitable in amapradhana avasthas like jwara, amavata and amapradosha like visuchika and alasaka.⁽¹⁶⁾

In samadoshavastha where doshas are spread all over body ie doshas are bahu (severe vitiation of doshas), one cannot administer shodhana as doshas are adhered to dhatus, the bond between doshas and dhatus are strong due to ama. So, the first step of treatment is pachana. If agni is too weak to digest medicine then langhana in the form of upawasa is suggested. It cut short the formation of ama in body and activates agni. As langhana proceeds, ama in the body is transformed and new ama is not produced. Hence agni gets activated. Still activation of agni continues and rasa dhatu with laghu, snigdha, sara, sookshma attributes is produced.

Site of ama can be shakhamarga, koshthamarga or madhyamamarga. As ama gets transformed in all rogamargas by langhana and pachana, sarvadehalaghava can be achieved. As proper rasadhatu is formed, it will circulate in body and all dhatus will receive proper rasadhatu. By this time dhatvagnis get activated. Dhatwagnis will work properly, and it will convert appropriate dhatuposhakaanshas to specific dhatus. Thus, proper dhatusnehaparampara can be established. Laghu, sookshma, sara, ushna attributes work together to counteract srotorodha. Thus, long term langhana or laghvashana, pachana, deepana will make properly upachitadhatus. With this indrivas

will receive proper rasa and indriyas work actively. Due to doshakshaya, amapachana work, srotorodha is eliminated. Vatanulomana occurs. Mala, mutrasanga get eliminated.

Once agni gets activated ushnodaka or laghuahara or sansarjana krama can be administered.

If samadoshas are tried to eliminate from body, it will be harmful for dhatus or dhatus can be destroyed. Ama should be rendered to niramaavastha and then easily and safely eliminated. In santarpanottha amapradoshaja vyadhi, upawasa or laghuashana can be used to cut short ama production and then shamana treatment can be administered. This type of upawasa or laghuashana can include ushnodaka, shadangapaniya, panchakola siddha yavagu and sapta mushtikayusha.

In santarpanottha diseases if there is severe vitiation of doshas then upawasa cannot be first step treatment but supplementary to other treatment. In santarpanottha diseases, if samadoshas are predominant then one should follow samadosha treatment protocol which includes langhana first. Or the sequence of treatment will be pachana, deepana, snehana, swedana and then shodhana. After shodhana, again laghu ahara in the form of sansarjana krama is administered. This krama is given to restore agni and dhatubala.

In alasaka and visuchika, langhana and peyadi karma is the line of treatment. Peyadikrama is sansarjanakrama.

There are different pathya kalpanas explained in Chikitsa sthana. In kushtha, laghuanna is indicated. Hetus of kushtha includes viruddhaahara, drava, snigdh and vidahiahara. First rasadhatu and then other dhatus are vitiated. To establish proper rasadhatu formation and flow, langhana is indicated.

Specific diet in specific disease ie pathya has important role to pacify doshas and to counteract doshadushyasammurchana. It also acts synergetically with other shamana treatment modalities. In santarpanottha diseases different laghu anna kalpanas help to create balance of doshas.

All types of langhana are considered in rasa pradoshaja vikara as rasa is the first dhatu formed after digestion of food. Weak digestive capacity can produce ama which primarily affects rasadharu mainly causing obstructive pathologies. Hence langhana rather all types of langhana are suggested for rasa pradosha javikara. Secondly once rasa is vitiated it can cause vyadhis of different srotasas including rasavaha, annavaha, mansa, medovaha and shukravaha.

Bala of a person is an important criterion for doing langhana especially upawasa. It may lead to rasakshaya or dhatukshaya. Hence durbala, pittaprakruti persons and persons who cannot tolerate rikta koshtha (emptystomach) cannot tolerate langhana. In such persons laghuannasevana is important option.

There are different researches carried out regarding fasting either in the form of intermittent fasting, calorie restriction, alternate day fasting, different diet plans.

Assessment regarding fasting and its impact on lifestyle disorders were studied.

Calorie restriction can be compared with pramitashana. It reduces oxidative stress in various species including mammals.

This also prevents increase in visceral fat mass and intramyocellular lipid deposition that are observed with aging. (17)

Harris et al proved that intermittent energy restriction may be an effective strategy for treatment of obesity. (18)

Bertosz M et al emphasized benefit from use of intermittent fasting in research on the development atherosclerosis. It reduces plaque by reducing concentration of inflammatory markers. It limits the risk factors for cardiovascular disease. Fatty acids and ketones become the main energy source because the body undergoes metabolic switching of glucose ketone, by affecting biochemical transformation of lipids, it decreases body mass and has positive

influence on lipid parameters. Thus different types of fasting and calorie restriction have impact on metabolism.

In Ayurveda, langhana (upawasa- fasting) or light diet is prescribed by observing bala (strength), type of samprapti and satmya (habit). Ayurveda includes variety of pathyakalpanas (recipe) for individuals.

Conclusion - In santarpanottha vyadhis upawasa and laghu ahara kalpanas can be useful to counteract santarpanottha samprapti and can be used in the form of upawasa, pathya kalpanas, pramitashana or in the form of sansarjana karma.

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Assessment Of Add On Effect Of Ayurvedic Management Along With Standard Treatment In Primary Infertility : A Case Study

Dr. Sneha Kulkarni, MD Dravyaguna, Associate Professor, Dravyaguna Dept. Tilak Ayurved Mahavidyalaya, Pune.

Introduction - The prevalence of primary infertility is 8.9% in urban area. Infertility is a disease of the male or female reproductive system defined by the failure to achieve a pregnancy after 12 months or more of regular unprotected sexual intercourse, as per the definition given by WHO. Primary infertility is when the patient has not achieved a pregnancy even once. In the ayurvedic perspective; rutu, kshetra, ambu and beej are the four factors responsible for conception. When a potent seed is sown in the fertile soil during good climatic conditions and irrigated properly it results into a sapling. Similarly,

Dr. Harshad Kulkarni, MD Sharir Rachana, Assistant Professor, Sharir Rachana Dept., Tilak Ayurved Mahavidyalaya, Pune.

these 4 factors - Fertile period (Rutu), the healthy reproductive system (Kshetra), Proper nutrition (Ambu) and healthy Sperm and ovum (beeja) are the 4 essential factors for fertilityⁱⁱ. Ayurveda, describes this whole process of fertilization in great depth. Many cases of primary infertility can therefore be successfully treated with Ayurveda. Proper management of diet and daily regimen, counselling also plays a very important role in the treatment.

Aim and Objectives:

• Aim - To assess the efficacy of add on effects of Ayurvedic management along with IVF, in



case of primary infertility.

• **Objectives** - 1) To achieve raja shodhan, kshetra shuddhi. 2) To strengthen the uterus and allied organs (Kshetra). 3) To overcome the IVF related complaints

Case study - A female patient, age 33, an IT engineer, marriage history and so the history of regular intercourse for around 8 years, came to clinic as a typical case of primary infertility. The semen analysis reports of the male partner were within normal limits. Stress, an integral part of lifestyle for an IT engineer and improper diet results into Rasavaha srotodushtiⁱⁱⁱ. This patient underwent 2 cycles of IVF. But, they failed due to incompatibility of the endometrium to catch the fertilized embryo.

On clinical examination-

- Karshya Adhmaan
- Gudagudayan Udarvriddhi
- Mala avarodha, Sakthishula
- Ghana sapravahan mala
- Raja alpata Grathil raja
- (1.5 days 1 pad per day)
- Shirashula- Mano avasad- Klama

All these complaints were present from the duration of 6 to 8 months.

This reveals the following observations-

- Vata vruddhi Rasa ksheenata
- Raja ksheenata and/or avarodha
- Apan dushti Oja ksheenata

The treatment included following along with the allopathic treatment which she was already taking for IVF.

- **Step 1 -** Shatavari Churna 500 mg Rasayan kal Anupan dugdha
- Sutashekhar 125 mg Sariva 250 mg
- Manjishtha 250mg Shankhavati 125 mg
- Arogya vardhini 75 mg Chandraprabha 75 mg
- Trivrutt 250 mg vyanodan kal koshna jal
- Kuberaksha vati 500 mg vyanodan koshna jal

This treatment was continued for 3 months and she was assessed for the improvement. The findings were

- Varna and prabha improvement
- Raja praman vruddhi 3 days 2 pads per day
- Vata sanchiti lakshane upashay

- Manas bala vriddhi (stability)
- Mala pravartan srushta savata
- Agni vruddhi
- -LMP-10/10/2020

After raja shuddhi lakshane^{iv} are attained, next step was to strengthen the uterus^v. To achieve this the treatment plan was-

- Step 2 Shatavari churna 500 mg
- Sutashekhar 125 mg Bhaskar lavan 250 mg
- Brahmi 250 mg Dhatri 125 mg
- Padmakadi gana churna^{vi} 500 mg with milk vyanodan kal
- Mansi phanta nishakale 50 ml
- **Step 3** Only 3 days before IVF, eranda sneha 25 ml and dadimadi ghrita 25 ml Anuvasan basti was given.
- **Step 4** From the day of IVF, the treatment was-
- Shatavari churna Sutashekhar 500 mg 125 mg
- Bhaskar lavan 250mg Brahmi 250 mg
- Dhatri 125 mg
- Padmakadi gana churna 500 mg with milk vyanodan kal

This treatment was continued till the urine pregnancy test came positive i.e. for 11 days.

Discussion - In this case, the important inputs given by the gynecologist were -

- 1) Endometrial growth is not sufficient.
- 2) Endometrium is not able to catch and retain the fertilized embryo.

On the basis of these observations and the clinical findings, in ayurvedic perspective, we need to work on all the aspects of the domain Rutu, Kshetra, Ambu and beej. The raja praman alpata can be because of two reasons, viz. avarodha and alpata^{vii}. Looking upon the other clinical signs, we need to treat both of these situations.

Rasa dhatu Rakta Poshan bhag Raja, Stanya (Upa dhatu) Kapha (Mala)

मासेनोपचितं काले धमनीभ्यां तदार्तवम्। ईषत्कृष्णं विवर्णं च वायुर्योनिमुखं नयेत्। – सु. श. २/१० सूक्ष्मकेशप्रतीकाशा बीजरक्तवहाः सिराः।

गर्भाशयं पूरयन्ति मासाद् बीजाय कल्पते।। सु.सू. १४/डल्हण टीका विश्वामित्र वचनम्

The small minute vessels, which help the supply of beej and rakta continuously, fulfill the uterus over the period of a month, and finally serves for proper nourishment of beeja, the ovum. The current scene, therefore requires corrections at following steps-

- 1) Raja avarodha
- 2) Rasa ksheenata and raja ksheenata
- 3) Agni Vardhan
- 4) Vat anuloman especially apan anuloman
- Step 1- Synonyms are used to describe the actions of the dravya in nighantus. The synonyms of shatavariviii, like Peevari explains that it is a best rejuvenator for rasadhatu, an herb that serves the best for nourishment and replenishment. The synonym Abheeru explains that it's herb that relieves the stress and anxiety. Shatavari was therefore used throughout the treatment as a rasayan, administered with milk at the rasayan kal, i.e. early morning, empty stomach.

Kuberaksha vati, containing Latakaranja as a main ingredient, is used chiefly to relieve the obstruction of raja.

The other medicines include, sariva and manjishtha, which increase the uterine strength, improve the flow of rasa towards uterus. Sutashekhar, was used for pachan of sama pitta predominant doshas. Chandra prabha was used as a tonic for uterus and to remove the avarodha at uterus if any. Shankhavati and trivrutt, were used the purpose of apan anulomana and as a mrudu anulomana. Arogya vardhini, was used to facilitate the process of Agni sthapan and ensure the formation of good quality rasadhatu.

• Step 2 - After 3 cycles, when shuddha raja symptoms were noticed, it emphasizes the fact that old and saturated (pooran) raja cleaning was achieved and the process of accumulation of new and pure rasa (raja) has begun at the uterus.

गते पुराणि रजिस नवे च अवस्थिते। - च.शा. ४/७

• **Step 3** - Before IVF, proper conditioning of the apan vayu is very important to improve the

'Dharan' of the fertilized embryo. Anuvasan basti, was therefore selected as a treatment modality. Anuvasan basti of 25 ml eranda sneha and 25 ml dadimadi ghrita was administered 3 days prior to the day of IVF. The basic intention behind choosing these two sneha is apan anulomana. Also, eranda sneha and dadimadi ghrita combination was used for following reasons-

- 1) Eranda sneha sookshmaix
- 2) Dadimadi ghrita moodha vatanulomana

Deepan Rasa Vardhan Garbha sthapan^x

In addition to the basti, 2 days before and after the process, a combination of shatavari churna and laxmi vilas guti was given to relieve the mental stress associated with the procedure of embryo transfer. सौमनस्यं गर्भजननानाम्। – च.सू.

To relieve the anxiety and ensure saumananasya, i.e. happy and sound state of mind which in turn is a must factor for the conception, this treatment was given.

• **Step 4** - The same treatment mentioned in step 2, was continued till the Urine pregnancy test came positive, i.e. for 11 days. UPT came positive on 6/11/2021.

There after the regular monthly regimen of the treatment was administered.

Conclusion - Ayurvedic treatment, properly planned and executed gives significant results in primary infertility cases.

Scope for further studies - A thorough Ayurvedic management, including proper treatments of both male and female partners, counselling and guidance for conception will be able to solve many such cases, even without the help of IUI or IVF.

List of shlokas -

- १) धृवं चतुर्णां सान्निध्यात् गर्भः स्यात् विधिपूर्वकम् ऋतुक्षेत्राम्बुबीजानां सामुग्र्यात् अंकुरो यथा। सु.शा. १/३३
- २) गुरूशीतमतिस्निग्धमतिमात्रं समश्नताम्। रसवाहीनि दुष्यन्ति चिन्त्यानां चातिचिन्तनात्। च.वि.५/१३
- ३) शशासृक प्रतिमं यतु यद्वा लाक्षारसोपमम्। तदार्तवं प्रशंसन्ति यद् वासो न विरंजयेत्।। सु.शा. २/१७

४) एवं योनिषु शुद्धासु गर्भं विन्दन्ति योषितः। अदुष्टे प्राकृते बीजे जीवोपक्रमणे सित।। च.चि. ३०/१२५ ५) शतावरी बहुसूताभीक्तरिन्दीवरी वरी। नारायणी शतपदी शतवीर्यां च पीवरी। शतावरी गुरूः शीता तिक्ता स्वाद्वी रसायनी। मेधा अग्निपुष्टीदा स्निग्धा नेत्र्या गुल्मातिसारजित्।। शुक्रस्तन्यकारी बल्या वातिपत्तास्त्रशोथजित्।। भा.प्र. गुङ्च्यादि वर्ग ६) पद्मक्पुण्ड्रौ वृद्धितुगर्ध्दयः शृंग्यमृता दश जीवनसंज्ञाः। स्तन्यकरा घ्नन्तीरणित्तं प्रीणनजीवनबृंहणवृष्याः। अ.इ.सू.१५/१२ ७) वातिपत्ताभ्याम् क्षीयते रजः। सु.शा.

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Concept Of Bhasma Kalpana - Classical To Coneventional

Vd. Gaurav Dongare, Associate professor, Rasashastra Dept., Ashvin Rural Ayurved College, Manchi hill, Sangamner.

Introduction: What is Bhasma? A question comes in mind of anyone who starts to learn Rasashastra rather Ayurveda. Bhasma literally means ash of something but it has a far deeper meaning in Rasashastra text. Bhasma is a form of medicine prepared from a mineral or metal to make them easy to assimilate in the body. The process of preparation of bhasma includes various tedious procedures. Key procedure in bhasma preparation is incineration of that processed material, in simple words "burn them into ashes" that's why the term "Bhasma". Rasashastra texts quotes bhasma in terms of Mritaloha as

'' तर्जन्यगुष्ठसंघृष्टविशेद्रेखान्तरं तु यत्। निविष्टश्च बहिनैंति मृतलोहं तदुच्यते।।...(र.र.स.) **Need of Bhasma form:** Different Rasashastra texts have mentioned importance of Mritaloha or Bhasma form of medicine which indicate the need for Bhasma.

- अल्पमात्रोपयोगीत्वात् अरुचेरप्रसंगतः।
 क्षिप्रमारोग्यदायित्वात् ओषधेभ्योऽधिको रसः।।
- ''तत्र नानारुजाक्रांतशरीराणां शरीरिणाम्।
 क्षीणानां दुर्बलाग्नीनां भेषजद्वेषीणामि।।
 स्वादुत्वात्स्वल्पमात्रत्वाल्लघुपाकीतयाऽपि च।
 प्रत्युग्रतरवीर्यत्वाल्लोहमेव प्रशस्यते।।''... लोहसर्वस्वम्
- ''मृतानि लोहानि रसीभवन्ति निघ्नन्ति 'युक्तानि' महामयांश्व।
 अभ्यासयोगाद् दृढदेहसिद्धिं कुर्वन्ति रुग्जन्मजराविनाशम्।।' 'र.स.
- ''रत्नानि लोहानि वराटशुक्तिपाषाणजातं खुरशृंगशल्यम्। महारसाद्येषु कठोरदेहं भरमीकृतं स्यात्खलु सूतयोग्यम्।।''... र.र.स.

• रसीभवन्ति लोहानि मृतानि सुरवन्दिते।



विनिघ्नन्ति जराव्याधीन् रसयुक्तानि किं पुनः।।'' ... आ.प्र.

Aims : 1) To review the concept of Bhasma form from Rasashastra texts.

2) To explore various methods of preparation of Bhasma

Objectives: 1) To review Rasashastra texts regarding Bhasma preparation.

- 2) To focus on different factors related to the preparation of Bhasma.
- 3) To highlight the importance of Bhasma examination.

Materials and Methods: The preparation of Bhasma of any material involves certain important factors, which ultimately leads to the standardization process.

''जातिमद्भिः विशुद्धैश्च विधिना परीसाधितैः। रसोपरसलोहाद्यैः सूतः सिद्धो नान्यथा।।'' ... (र.र.स.)

• द्रव्यसंपत् - जातिमद्भिः (Raw material quality control)

Raw material for bhasma should have possesses all the textual criteria mentioned under the term Grahya-agrahyatva.

Several points should be considered under this viz.

- 1) Textual Grahya-agrahyatvacriterias.
- 2) What material we get in market?, whether it matches to the textual criteria?
- e.g. Currently in most of Ayurveda raw material vendors Iron pyrite is sold as Suvarnamakshik whereas the criteria for Suvarnamakshika matches with the mineral Chalcopyerite in all aspect.
- 3) Adulteration in the raw material.
- शोधन विशुद्धैः (In process quality control)

The process of shodhan of a raw material is at utmost importance in any formulation. According to Rasashastra text, Shodhan is not only a process of mere purification but it includes several processes which are termed as Sanskara. E.g. before subjected to Bhasma preparation Abhraka undergoes Nivaapa (Quenching in several liquids), Dhanyabhraka (getting soaked in fermented rice water) etc. precesses.

The metal or mineral if used without

shodhan shows undesirable effects and producing disease condition in the body e.g शुद्ध सुवर्ण – बल्य, वर्ण्य, स्मृतीप्रद, आयुष्यं अशुद्ध सुवर्ण – हन्ति बुद्धिबलादिकम् ... र.त.

Also we found different materials for the Shodhan process of same metal/mineral. It is believed that it affects the efficacy and end result of Bhasma in different diseases.

• यथाविधी निर्माण - विधिना परीसाधितैः (Standard operation procedure)

The classical Rasashastra texts have provided the standard operating procedures for the prepatation of all the formulations, one should follow the guidelins provided by these texts to assure the quality of prepared medicine.

Marana/Bhasma preparation:

- After review of certain Rasashastra texts it came to know that Bhasma preparation is done by different methods such as
- 1) Putapaka As incorporated in preparation of most of Rasadravyas.
- 2) Jarana Perticularly for Putilohas.
- 3) Kupipakva method Special method for Bhasmas of Metals.
- Putapaka being mostly practiced method have an important place in Bhasma preparation of many materials. Puta means a measure of heat as ''रसादिद्रव्यपाकानां प्रमाणज्ञापनं पुटं''. There are different types of Putas mentioned in Rasashastra texts according to their sizes.

Classical approach to Puta consist of certain aspects

- 1) Garta (The Pit) Different sizes of pits are mentioned according to its volume. Rasashastra texts have mentioned the exact size of different types of Putas leading to the standard in measure of heat volume.
- 2) Vanyopala (Cow dung cake) Vanyopala is defined as a volume of faecal matter excreted in single stroke and gets dried upon while the cows are wondering in forest. The size of the Vanyopala should be standardized while using them in Puta.



- **3) Sharava samputa -** Keeping the processed material within two earthen plates with their joint sealed by clay.
- **4) Dravya maan** (Quantity of Material to be kept in Sharava samputa.)

In mana paribhasha Sharava stands for 32 karsha which is approximately 320gm. That means we can pour near about 320gm of material in Sharava samputa.

5) Agni (Quantity of heat generated)

Agni is the most important factor in Bhasma preparation. The purpose of Agni is not only giving heat to the material but it is used to stabilize the Guna (properties and efficacy) of Bhasma.

E.g.Shataputi and Sahastraputi Abhrak bhasma.

This can also be observed while preparing Suvarnasootshekhar in Pottali form. Pottali form of is more stable than Khalviya Rasayana due to Agni sanskara.

6) Kala (Season) - According to some traditions the best season for the medicine preparation should be from the start of Sharad Rutu till the end of Greeshma rutu. The environmental conditions are favourable for uniformity in the Agni during these seasons.

The classical methods for Putapaka sometimes might found difficult to follow due to certain reasons such as urbanization, unavailability of resources. Efforts are going on to find out new innovative and convenient tools regarding the Putapaka. We can observe certain changes that are happening in the classical method of Putapaka such as

- Use of prepared cow dung cakes instead of the natural Vanyopala. This thing needed standardization regarding weight, size and volume of heat produced.
- Use of earthen pots instead of Sharava samputa.
- Use of Iron barrels or coal furnaces instead of a pit. This makes differences in the volume of heat as the heat loss due to open air burning of cow dung cakes is more in this method.

• Use of Muffle furnace for heating instead of traditional Putapaka. One advantage of this method is one can arrenge the temperature pattern here. But still it needs more research.

The classical method for Putapaka seems the best one because we already have provided the standardized format by Rasashastra texts regarding.

• The size of Puta, number of Puta, number of Vanyopala,

e.g. ''पंचक्रोडपुटेर्दग्धं म्रियते माक्षिकं खल्।'' (र.र.स.)

• Also the colour and other examination of prepared Bhasma are clearly mentioned in texts.

е.д. ''सिंद्राभं भवेद्भस्म माक्षिकस्य न संशयः।'' (आ.प्र.)

If we follow the guidelines provided by Rasashastra texts, there should not be any need to further standardization.

• Mardana and Bhavana are also the important factors in Bhasma nirman. Bhasma become more fine and properties of the Bhasma got increased and stabilized due to Mardana sanskara.

पुटे पुटे विधातव्यं मर्दनं दृढवत्तरम्।... र.चू.

Role of Maran dravya in Bhasma process: The qualities of prepared Bhasma are also depends on the material used for the Marana of Dhatu. Rasaratnasamuchchaya had quoted this as लोहानां मारणं श्रेष्ठं सर्वेषां रसभरमना। मूलीभिर्मध्यमं प्राहुः कनिष्ठं गन्धकादिभिः।। अरिलोहेन लोहानां मारणं दुर्गुणप्रदम्।''..र.र.स.५

List of materials for marana of Rasadravyas : There are number of materials used for marana of a single Rasadravya

- Abhrak marak gana from Rasatarangini has 60 different dravyas of plant and animal origin for the processing of Abhraka to Bhasma form.
- Loha marak gana from Rasatarangini comprises of different groups of plants such as Triphaladi gana, Erandadi gana, Kiratadi gana, Shrungaveradi gana etc.
- Ksharavarga Haridra, Apamarga, Palash etc for the marana of Putilohas
- Jarana is the method used for the marana /



Bhasma preparation of Putiloha. It is different from the Putapaka method as it involves

- 1) Liquefaction of metal.
- 2) Heating of liquefied metal with powders of certain dravyas.
- 3) Converting the metal into Bhasma.

The method used in the preparation of Vanga (Sn), Naga (Pb) and Yashad (Zn) Bhasma.

• **Kupipakva** method is used to prepare some special kind of metal Bhasma as Somanathi Tamra Bhasma.

Examination of Bhasma:

- It is the most important part in Bhasma preparation as the efficacy and toxicity of Bhasma depends upon its completeness.
- Bhasma pariksha are nothing but the standardization of Bhasma.
- Rasashastra texts defined Bhasma pariksha as

1) General examination -

applicable to all Bhasmas and consists of Varitaratva, Rekhapurnatva, Apunarbhavatva, Nirutthatva etc.

2) Specific examination -

- Nishchandratva in case of Abhrak Bhasma,
- Nirdhoomatva in case of Haratala.
- Dadhi pariksha in case of Tamra etc.

Discussion:

- Preparation of any Bhasma exactly according to the Rasashastra texts has utmost importance in Ayurveda pharmaceuticals.
- Rasashastra texts have provided all the standard guideline to prepare the special medicinal form like Bhasma.
- Rasashastra texts have also mentioned the dos and donts regarding the preparation and use of Bhasma prepared from Metals and minerals.
- If we follow the guideline mentioned by classical Rasashastra texts then there should not be any issue regarding the toxicity of these Bhasmas.
- One can use some conventional methods in the preparation of Bhasma following the

principles of Rasashastra texts.

• The classical methods of Bhasma preparation are much more standardized than the conventional one.

Conclusion:

- Bhasma preparation and its use in the treatment of various diseases is a vast subject. It is our duty to prepare Bhasma as per the guideline of Rasashastra texts and use them.
- Bhasma examination according to Rasashastra text is the utmost necessity in the current era.
- Bhasma is a very potent form of medicine while treating the complex etiologies.

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डॉ. सुनंदा रानडे व डॉ. सुभाष रानडे फौंडेशन तर्फे उत्तेजनार्थ पारितोषिक प्राप्त लेख...



Role Of Sitz Bath In Case Of Fissure In ANO

Dr. Sonali V. Ausarmal, P.G. Scholar (Shalyatantra) TAMV, Pune

Introduction - Ayurveda is the ancient science which aims the better health of healthy person and treats illness of diseased person. [4] Person is healthy only when he is free from both physical and psychological pain. In Ayurveda

Ayurveda has divided into eight branches called Ashtang Ayurveda. Shalya is one of the branch of Ayurveda which has its own authenticity and originality contributing to the modern conservative and surgical modalities. अतिप्रवृद्धं मलदोषजं वा शरिरीणां स्थावरजङ्गमानाम्।

physical pain is consider as Shalya.

यत्किञ्चिदाबाध्करं शरीरे तत्सर्वमेव प्रवदन्ति शल्यम् – इति।। (स.स.१/८ डल्हण टिका)

Dr. Nandkishor V. Borse,Prof. and H. O. D of Shalyatantra Dept.,
Tilak Ayurved Mahavidyalaya, Pune.

This means any internal or external factors like prakopa of dosha or dushti of mala or any other external plant and animal origin substances which causes pain or harm to the

तत्र शल्यं नाम विविध

तृणकाष्ठपाषाणपांशुलोहलोष्टास्थिबालनखपूयास्त्रावदुष्ट-व्रणान्तर्गर्भ शल्योद्धरणार्थण्यन्त्रशस्त्रक्षाराग्निप्रणिधान

व्रणविनश्चयार्थं च। $^{(6)}$ (सु.सू. १/८)

body it is known as shalya.

Shalyatantra deals with removing of any unwanted substance from the body which is responsible for causing physical pain with the help of yantra (blunt Instruments), Shastra (sharp instruments), Kshar and agni also it



deals with the wound.

Due to drastic change in our lifestyle the chances of occurrence of many Gastro-intestinal disorders are increased. The excessive use of spicy food, inadequate sleep, stress, Suppression of natural urges, long term sitting on hard surface, alcoholism are contributing factors for development of various Gastrointestinal disorders, like arsha (hemorrhoids), Parikartika (fissure in ano), bhagandara (Fishula in ano), vidradhi (Abscess), arbuda (Malignant growth), granthi (tumour), gulma (any glandular growth in the abdomen) etc.

Among the above disease parikartika was described in virechana vyapada by Acharya Charak as -

स्निग्धेन गुरूकोष्ठेन सामे बलवदौषधम्। क्षामेन मृदुकोष्ठेन श्रान्तेनाल्पबलेन वा।। पीतंगत्वा गुदं साममाशु दोषं निरस्य च। तीव्रशुलां सपिच्छासां करोति परिकर्तिकाम्।। (८) (च.सि.६/६१,६२) मृदुकोष्ठाल्पदोषस्य रूक्षस्तीक्ष्णोऽतिमात्रबान्। बसतर्दोषन्निरस्याशु जनयेत परिकर्तिकाम्।। त्रिकवंक्षण बस्तीनां तोदं नाभेरधो रूजम्।

विबन्धौऽल्पाल्पमुत्थानं बस्ति निर्लेखनाद् भवेत।। (१) (च.सि.७/५४,५५)

Gudasthani kartanvata pida (cutting like sensation at anal region), vibandha (constipation), Raktasrava (per rectal bleeding) etc. are the symptoms seen in parikartika.

According to Acharya Sushrut parikartika described as - क्षामेणातिमृदुकोष्ठेन मनदाग्निना रुक्षेण वाडतितीक्ष्णोष्णातिलवण्मतिरुक्षं वा पीतमौषधं पित्तनिलौ प्रदुष्य परिकर्तिकामापादयति, तत्र गुदनाभिमेढूबस्तिशिरः सुसदाहं पिरिकर्तनमनिलसंगो वायु विष्ठम्भो भक्तारुचिश्च भवति...। (जु.चि. ३४/१६) अतितीक्ष्णोऽतिलवणोरुक्षो बस्तिः प्रयोजित। सतित्वं कोपयेत्वायुं कुर्याच्यच्च परिकर्तिकाम्।। नाभिबस्त गृदं तत्र छिन्नतीवातिदेहिनः। (ज्जि.३६/३७)

Due to dushit pitta and vata parikartika occur, in this diseases there is gudapida (extremely cutting like pain sensation is present at anus), vayu avrodha (flatulence),

Aruchi (Loss of taste) etc. symptoms are seen.

According to modern point of view fissure in ano is an ulcer in the longitudinal axis of the lower and canal. Commonly it occurs in the midline. It is superficial, small but distressing lesion. Because of the curvature of the sacrum and rectum, hard fecal matter while passing down causes a tear in the anal valve leading to posterior anal fissure. Anterior anal fissure is common in females due to lack of support to pelvic floor. [12]

Hard stool, diarrhea, increased sphincter tone, trauma, local ischemia, STD, Crohn's disease, Veneral diseases, Ulcerative colitis, tuberculosis etc. are the causes for fissure formation. Fissure in ano can be acute or chronic. Chronic fissure is less painful than acute one. In acute fissure there is deep tear with severe sphincter spasm, patient with severe pain, bleeding and constipation. In chronic fissure there are inflamed, indurated margins with scar tissue, having skin tag act like guard sentinel pile.

Treatment of fissure in ano is either conservative (Use of Laxative, xylocain for local application and sitz bath) and surgical. The general measures for anal fissure are adequate fluid intake, fiber rich diet, bulk forming agents, stool softeners, local Anesthetic agents, avoid constipation, sitz bath. [13]

Sitz bath to be carried out 2-3 time / day and also after defecation generally the patient is instructed to immerse their perineum and lower pelvis in tub of warm water with or without any addition of betadine solution or KMNO4 in small quantity for 20 minutes.

The mechanism of how the sitz bath relieves pain is unclear. There may be the physiological mechanism involved in the relief of pain and edema. Behind it there is hypothesis is that via a neural pathway, a warm sitz bath can expected to relieve pain by relaxing the internal anal sphincter, causing a

decrease in the rectal neck pressure and internal anal sphincter electromyographic activity through a mechanism involving the thermosphincteric reflex. [14]

वातहरोः क्वाथक्षरितैलघृतपिशितरसोष्णसलिलकोष्ठक अवगाहस्तु यथोक्त एवावगाहः।। (१५) (च.सू. १४/४५)

According to Acharya Charak, there should bath tub is filled with vatnashaka dravya kwatha, kshir, tail, ghrut, mansras or warm water and avgaha swedana carried out. There is excellent effect of avgaha sweda in parikartika. [16]

Aim - To evaluate the effect of sitz bath in the cases of fissure in ano.

Objectives - 1) To evaluate the effect of sitz bath in fissure in ano. 2) To observe any adverse effects of sitz bath.

Material And Method -

Inclusion criteria - 1) Patient having age group of 20-60 years. 2) Patients will be selected irrespective of sex marital status, religion, education and economic status. 3) Patients of fissure in ano having following symptoms -

- Sadhaha mala pravruti burning sensation during defecation.
- Raktasrava per rectal bleeding.
- Vibhandha constipation.
- Gudakandu anal itching.

Exclusion criteria - Patient suffering from fissure in ano with following disease will be excluded.

- HIV and HBsAg patients.
- Bleeding disorders.
- CA Rectum and anal canal.

For sitz bath, bath tub and warm water require.

Quantity of water - Patients perineum and lower pelvis should be deep in warm water so according to it quantity of water should be taken.

Duration of sitz bath - 20 minutes daily 2 - 3 times for 15 days.

With the sitz bath laxative and local

anesthetic application are given.

Assessment criteria -

1) Raktasrava - P/R bleeding:

, 8	
Absent (no P/R bleeding)	0
Mild bleeding	1
Moderate bleeding	2
Stream of bleeding	3

2) Sadaha mala pravrutti/guda-daha- Burning sensation at anal region:

O	
Absent (No burning sensation)	0
Burning remain for 1 hr. after defecation	1
Burning remain for 4-6 hr. after defecation	2
Burning remain for whole day	3

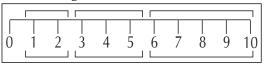
3) Vibandha - Constipation :

o, maineria conon panon	
Absent (No constipation)	0
Bowel passed once or twice daily	1
Bowel passed one day alternate	2
Bowel passed after 2-3days	3

4) Gudakandu - Itching at anal region:

Absent (No anal itching)	0
Itching remain for 1 hr. after defecation	1
Itching remain for 4-6 hr. after defecation	2
Itching remain for whole day	3

Visual analogue scale:



Nil Mild		Moderate	Severe	
0	1	2	3	

(See table - Observation and Result)

Discussion: In present cases total 10 patients are observed which are came to (OPD NO. 7) Surgery OPD of Tilak Ayurveda Mahavidyalaya, Pune. All patients are between 20-60 years of age group. All patients are having symptoms of burning after defecation, constipation, PR bleeding and out of them 4 patients are having itching at anal region. After treatment all patients are having excellent relief from symptoms.

Conclusion: Sitz bath can promote blood flow to ano rectal area, keeping anus clean and helps in wound healing at anal mucosa (i.e.

Observation And Result:						
Sr. No.	Assesmen	t Criteria	Raktasrava	Gudadaha	Vibandha	Gudakandu
1.	CASE-I	Before Treatment	2	3	3	1
		After Treatment	0	1	1	0
2.	CASE-II	Before Treatment	2	2	2	-
		After Treatment	0	0	1	-
3.	CASE-III	Before Treatment	2	2	3	-
		After Treatment	0	1	1	-
4.	CASE-IV	Before Treatment	1	2	2	-
		After Treatment	0	0	1	-
5.	CASE-V	Before Treatment	0	2	3	_
		After Treatment	0	1	1	-
6.	CASE-VI	Before Treatment	1	1	2	-
		After Treatment	0	0	1	-
7.	CASE-VII	Before Treatment	0	2	2	2
		After Treatment	0	1	1	1
8.	CASE-VIII	Before Treatment	2	2	2	2
		After Treatment	0	1	1	1
9.	CASE-IX	Before Treatment	0	1	1	-
		After Treatment	0	0	0	-
10.	CASE-X	Before Treatment	0	1	1	1
		After Treatment	0	0	1	0

fissure). Sitz bath also helps reducing inflammation and discomfort caused by anorectal diseases.

Sitz bah is simple procedure which didn't require hospitalization; it can be carried out at home. Due to wound healing and pain relief by sitz bath, patient's also gives relief from vibandha (constipation), aruchi (loss of taste).

From this study we can concluded that fissure in ano (parikartika) can be effectively managed by sitz bath (Avgaha sweda).

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A Conceptual Study On Raktapitta Chikitsa

Rushikesh Ravindra Dalavi, P G Scholar, Dept. of Kayachikitsa, TAMV, Pune. **Dr. Siddharth S. Parchure,**Asst. Professor, Dept. of Kayachikitsa,
TAMV, Pune.

Introduction - Dosha, Dhatu, and Malaas are considered as the root of Sharira. Among them, rakta dhatu is of prime importance. Sushruta even considered it as a 4th dosha. The most important function of rakta is 'Jeevana kriya' (life-sustaining). There is aashrayee ashraya bhava sambhandha of rakta and pitta. In the process of dhatu parinama, the rakta dhatu, due to heat provided by the pitta dosha aided by vyanavayu, circulates all over the body and is converted to the succeeding dhatus. Their balance should be maintained between rakta and pitta, if not maintained it will form raktapitta.1 Raktapitta is a disease caused by Raktava srotodusti. Charaka has mentioning Raktapitta as a Mahagada. Raktapitta manifests rapidly and spreads all over the body like fire so it is called 'ashukari.2 It invades the body in all possible directions and becomes critical if not diagnosed or treated

Aim - To explore the concept of Raktapitta from various Ayurvedic literature.

Objective - To compile the information of Raktapitta and it's chikitsa from various Ayurvedic literature.

Materials And Method - Charak samhita, Sushruta samhita, Ashtang Hridhaya and commentaries. An attempt has been made to compile the references of Raktapitta from various Ayurvedic literature.

Nirukti³

- 1) Pitta associates or interacts with Rakta, hence the term Raktapitta.
- 2) Samyogaat Samyoga means an association or combination of the Pitta with Rakta. This association causes the vitiation of pitta to contaminate Rakta.

Dooshanat - Pitta always have the tendency to

vitiate rakta.

Saamanyat gandha varnayoho - Pitta attains similarity with rakta in terms of gandha (smell) and varna (color).

Nidana⁴

Ahara -

- **Rasa** Excessive consumption of diet that is Amla (sour),Katu (pungent),Lavana (saline).
- **Guna** Intake of excessive Vidahi, Tikshna, Ushna, Kshara (Alkalis).

Vihara -

- Aatapa Excessive exposure to heat of sun
- Vaayama Excessive physical exercise
- **Vyavaaya** Excessive indulgence in sexual activities
- Adhwa Excessiv walking

Manasika -

- Shoka Excessive grief
- Kopa Anger

Others -

Excessive Virechana karma

Samprapti of Raktapitta⁵

Pitta aggravated by the above said nidanas and reaches Rakta. Being a mala of Rakta, the Pitta on getting mixed with Rakta attains quantitative increase. The vitiated Pitta in turn vitiates the Rakta. Due to the heat of Pitta, the drava dhatu or the liquid portion of other tissues like Mamsa, Meda, etc oozes out of their respective tissues and gets mixed with Rakta. This further enhances the quantity of blood flowing in the blood vessels. Due to the pressure of the blood and heat of Pitta blood starts flowing through various openings of the body. Bleeding occurs through the mouth, nose, ears, skin, anus, penis, and vagina.

Poorvaroopa^{6,7}

- Anannabhilasha Bhuktasya vidahata
- Sukta Amla Udgara Swarabheda



- Paridaha Klama Shiro gourava Kasa
- Shwasa Bhrama Angasada
- Sheeta kamitva Kanta dhumayana
- Vamana
 Loha gandhi nishwasa
- Matsya gandha

Types of Raktapitta⁸

1) Based on the Dosha predominance

- a) Vataja b) Pittaja d) Sannipataja e) Vata Pittaja
- f) Pitta kaphaja g) Kapha vataja
- 2) Based on direction of bleeding
- a) Urdhavaga Raktapitta Rakta pitta in which the bleeding takes place in the upward directions and from upward passages, from Mukha, Karna, Akshi, Nasa, etc. Here the causative attributes are Snigdha and Ushna guna which vitiates Kapha and Pitta dosha.
- **b)** Adhogata Raktapitta Rakta pitta in which the bleeding takes place in the downward directions and from downward passages, from Guda, Yoni, Mootra-marga. Here the attributes are Rooksha and Ushna guna which causes vitiation of Vata and Pitta.
- c) Ubhaya / Tiryakgata Raktapitta Rakta pitta in which bleeding occurs through both directions and even through the subcutaneous spaces.
- 3) Lakshanas (Signs and symptoms)9
- 1) Vataja Raktapitta When it is associated with Vata the blood will be
- Shyava Aruna (Brownish red)
- Saphena (Frothy)
- Tanu (Thin)
- Rooksha (Dry)
- **2) Pittaja Raktapitta -** When it is associated with Pitta, the blood will be
- Kashaya like the color of the Patala flower
- Black like Gomutra (Cow's urine)
- Mechakagara (greasy black)
- Agara Dhuma
- Anjana (collyrium)
- **3) Kaphaja Raktapitta -** When it is associated with Kapha, the blood will be
- Sandra (Dense)
- Sapandu (Whitish discolouration)
- Sasneha (unctuousness)
- Picchila (Sticky, Slimy)

- **4) Sannipataja Raktapitta -** When vitiated by all the 3 Doshas then the signs and symptoms of all the 3 Doshas were manifested in the blood.
- **5) Samsargaja Raktapitta -** When vitiated by 2 Doshas, the signs and symptoms of the aggressive two Doshas were manifested in the blood.

Prognosis10

c) Kaphaja

- 1) One Dosha Sadhya (Curable)
- **2) Two Doshas -** Its Krichrasadhya (difficult to cure) or Yapya (manageable)
- 3) All the 3 Doshas Asadhya (Incurable)
- **4)** Urdhvaga which is Kaphaanubandhi is Sadhya.
- 5) Adhoga which is Vaataanubandhi is Yapya.
- **6)** Ubhaya which is Vatakaphaanubandhi is Asadhya.
- 7) It also becomes Asadhya in the following conditions:
- If the patient is having Mandagni (less power of digestion)
- Ativegavat if the disease has an acute attack
- If the patient is emaciated by diseases
- Ksheena Deha if the patient is debilitated
- Vruddha if the patient is aged
- Anashana If the patient is not able to eat
- When bleeding takes place in excess through either of Urdhva or Adho marga
- Kunapa gandhi When blood has a smell like that of a dead body
- Krishnavarna when it is excess black in color
- When it gets obstructed in the throat
- Upadrava sahita when it is associated with all complications

Raktapitta Chikitsa^{11,12,13}

- Pratimargaharana Chikitsa
- Santarpana/Apatarpana Chikitsa
- Shodhana and shamana chikitsa
- Mrudu, Sheetala, guna Ahara
- Madhura, Tikta, Kashaya Rasa Ahara
- Pradeha, Parisheka, Avagaha, Samsparshana, etc external applications
- 1) Pratimarga harana chikitsa Eliminating the causative, vitiated dosha from the opposite



direction of its manifestation is the key to the management of Rakta Pitta.

- 2) For Urdhvaga Raktapitta Kashaya and Tikta Rasa are criteria. Virechana should be given using Nishottara, Haritaki, Aragvadha, etc. Tarpana should be given in the beginning.
- 3) For Adhogata Raktapitta Shamana Dravya and Madhura Rasa are to be used. Vamana should be done using Indrayava, Musta, Madana, Yashti, etc. Peya should be given in the beginning.
- 4) Bahya prayoga Abhyanga, Lepa, Parishechana, Seka, Avagaha, Sheeta Upachara etc.
- 5) Ksheera prayoga (in vataanubandha)-Chaga Dugdga or Godugdha boiled with Draksha or Nagaraka or Bala or Gokshura, Godugdha with Jeevaka, Rishabaka added with Grita and Sharkara.
- 6) Kshara Prayoga: The ksharas should be prepared of Neela (stalk), Utpala, Mrunala, Keshara of Padma, and Utpala, Palasha, Madhuka, and Asana should be administered.
- 7) Shamana Chikitsa In all patients with Raktapitta, Sheeta Upachara is advised in Granthas. In the case of patients eligible for Shamana; Stambhan, Langhan and Brumhana chikitsa should be followed by oral medication as well as medicine.
- Internally Diet should be Mrudu (soft), Madhura (sweet), Sheeta (cold), Tikta (bitter) and Kashaya (astringent).
- Aushadhi Yoga Bolabaddha Rasa, Kamadudha Rasa, Chandrakala Rasa, Palasha Ghrita, Kshiri Ghrita, Vasa Ghrita, Vasavaleha, Shatavaryadi ghrita.

Pathya - Apathya of Rakta pitta

Pathya	Apathya
Rasa Kashaya	Rasa - Katu,
	Amla, Lavana
Dhanya - Jeerna Shashtika	Guna - Vidahi
Shali, Priyangu, Nivara,	
Yava, Godhuma.	
Shimbi dhanya - Mudga,	Drava -
Masoora, Chanaka, Adhaki,	Kaupa Jala,
Makushta, Koradoosha,	Madya
Shyamaka	,
· ·	

Mamsa - Aja, Pakshi, Harina,	
Kukkuta	
Dugdha - Godugdha,	
Ksheera navaneet, Ghrita,	
Aja Dugdha, Santanika	
Drava - Sheeta Jala,	
Narikel Jala, Varuni,	
Audbhid Jala, Shrutasheeta	
Jala, Madhu Jala, Laghu	
Panchamoola Siddha Jala.	
Phala - Kadali, Talaphala,	
Dadima, Amalaki, Narikela,	
Kapittha, Draksha, Ikshu,	
Pakva Amra Phala.	

Discussion And Conclusion - Raktapitta is a Mahagada (dreadful disease) which has Mahavega (having severe intensity in terms of heavy bleeding which is life threatening and ashukari (acute), Raktapradoshaja disease can be considered as one of the life threatening disorders. Severity depends upon the cause and the blood loss. Therefore a wise physician who has a clear cut knowledge of the Hetu and Lakshanas of Raktapitta , a physician who has the skills of diagnosing this condition as quickly as possible should treat it immediately, without any delay.

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My Favourite Sutra (verse) From The Yoga Treatises

Jahanvi Thumar, B.A.M.S. (4th Year), RK University Ayurvedic College and Hospital, Rajkot. **First Prize winner of** Essay Competition, (**Yoga Related Online Competitions - 2021**)

स्थिर सुखम् आसनम् (Sthira sukha asanam)

(Patanjali Yoga sutra 2.46) Sthira = steady Sukham = comfortable Asanam = posture

Postures must be stable, pleasurable and staying calm during yoga.

When I hear this sutra, I think of the ability to stay cool, calm, and collected while doing yoga.

Yoga is essentially a spiritual discipline based on an extremely subtle science, which focuses on bringing harmony between mind and body. It is an art and science of healthy living. 'The word yoga originates from the root word yuj, which means union. As such, it is a holistic practice that joins together the body, mind, heart, and spirit. The practice of yoga has been around for more than 4,000 years. It was practiced long before written history and organized religion existed.

Asana: The word breaks down as = to breathe, san = to join with, and na = the eternal vibration.

Reason for selecting this verse,

Many a times, I have seen many people that pushes themselves way too far in postures. They are red in the face, breathing heavily, shaking uncontrollably, etc. While it's great to want to push yourself, this is not yoga. In yoga, you should feel steady, stable and comfortable. Yoga is about your body and mind becoming one. In order to do this, you need to be in a state of comfort. When you feel discomfort, your mind is distracted and can only focus on getting rid of the discomfort.

One of the gifts of yoga and Ayurveda, is their ability to engender in us a growing sensitivity to our own prana so that we learn to move through our lives with steadiness (sthira) and ease (sukha). These two Sanskrit terms are familiar to most yoga students from a quoted aphorism in the Yoga Sutra of Patanjali: sthira-

sukham asanam. Which is translated as "resolutely abide in a good space." Established in "good space," is possible only when our prana is healthy. And cultivating healthy prana is a process that extends beyond the edge of our yoga mat into every aspect of our daily lives. When we start infusing our lifestyle, diet, and relationships with sthira and sukha, we pave the way for a life of balance and spiritual insight.

Let's begin by taking a closure look at sutra, according to Patanjali there are 8 limbs of yoga and asana is the third limb, following the yamas and the niyamas which are like the Ten Commandments of yoga. If we approach yoga linearly it would appear that we could not begin an asana practice without mastering all ten of the yamas and niyamas. That would be really, really difficult for most of us as the first Yama (ahimsa- non-violence), second (satya- truthfulness) in everything. I think the first two limbs should be asana and pranayama before the yamas and the niyamas. The reason being that the asanas teach us so much about the yamas and niyamas and they give us ample opportunity to practice non-violence with ourselves and being honest with ourselves and not being attached to things. The beautiful thing about a sincere yoga practice is that it is through the daily practice that we learn how to be more mindful and how to relax in our effort and be more in the moment. Asana is such a powerful practice as long as we recognize the impermanence of the body and the reality that it will change throughout our lives, we can celebrate ourselves and truly practice yoga in its entirety.

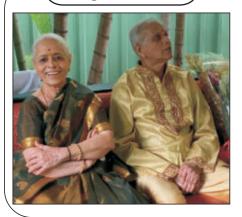
Sthira means strength, stability, endurance, and the ability to stay. Sukha is the word for sweetness and incidentally it is the root of the word sugar. It refers to the bliss or sweetness of the pose. Sthira and sukha are the two qualities of an asana (pose) that we yogis

are constantly working towards. They seem contradictory and yet they are complementary. As I understand it, to paraphrase, this sutra tells us that in every asana we are looking for effort without tension and a state of relaxation without being dull. The only way we can ever hope to achieve this high state is through abhyasaha- consistent regular practice!

At last, I would like to conclude by saying that,

The Aghori Vimalananda offered sound advice for creating sthira and sukha in our relationships. "Yoga is meant to make every home a happy home," he told us. "When every family member is giving out his or her best to unite the family and make it a success, which is real yoga. As we say in Sanskrit, 'Vasudeva kutumbamwe are all members of God's family." Our family is our earth; it is our foundation, our support, the ground we walk on, live on, and rely on. Thank you!

Congratulations!



Prof. Dr. Subhash Ranade, has been assigned the Job of Director, International Maharishi Ayurveda Foundation.

Dr. Subhash Ranade and Dr. Mrs. Sunanda Ranade were recently felicitated for "Sahastrachandra Darshan" by their Disciples, Admirers and scholars of International Ayurved Academy.

Dr. Subhash Ranade is an active member of Rashtriya Shikshan Mandal and a Member of Board of Directors of "Ayurved Rasashala Foundation".

Rashtriya Shikshan Mandal and Ayurvidya Masik Samiti congratulate Dr. Subhash and Dr. Sunanda Ranade and extend Best Wishes.

श्री. अमर अशोक मुळे यांना भारतज्योती प्रतिभासन्मान एक्सलंस पुरस्कार!

'कोरोना' संकटकाळात सामाजिक बांधिलकीचे



भान जपत आपण या समाजाचे काहीतरी देणे लागतो. या निस्वार्थ हेतूने केलेल्या सेवेसाठी भारताच्या पूर्व राष्ट्रपती आदरणीय प्रतिभाताई पाटील यांच्या सन्मानार्थ दिला जाणारा २०२०-२०२१ या वर्षीचा-''राज्यस्तरीय भारतज्योती

प्रतिभासन्मान एक्सलंस पुरस्कार'' टिळक आयुर्वेद महाविद्यालयाचा विद्यार्थी श्री. अमर अशोक मुळे यास देण्यात आला आहे.

याबद्दल टिळक आयुर्वेद महाविद्यालय व आयुर्विद्या मासिकातर्फे अमर मुळे यांचे हार्दिक अभिनंदन!

अभिनंदन !

डॉ.ऋतुराज देशपांडे ह्यांचे सुवर्ण यश - रॉयल कॉलेज ऑफ लंडनची फेलोशिप

पुण्यातील डॉ.ऋतुराज देशपांडे हे नुकतेच भारती विद्यापीठाच्या

मेडिकल कॉलेजमधुन एम.डी.(मेडिसिन) परीक्षा प्रथम क्रमांकाने उत्तीर्ण झाले. तसेच लंडनमधील 'पोस्ट ग्रॅज्युएट डिप्लोमा इन क्लिनिकल एंडोक्रायनोलॉजी अँड डायबेटीस'' पद्विकाही त्यांनी यशस्वीपणे प्राप्त केली आहे.



आँकोलॉजी मधील पुढील शिक्षणासाठी मुंबईच्या कोकिलाबेन हॉस्पिटलमधील कॅन्सर विभागात ते सध्या कार्यरत आहेत.

डॉ. ऋतुराज देशपांडे हे राष्ट्रीय शिक्षण मंडळाचे क्रियाशील सदस्य असून आयुर्विद्या मासिकाचे नियमित वाचक आहेत.

राष्ट्रीय शिक्षण मंडळ व आयुर्विद्या मासिक समितीतर्फे डॉ. ऋतुराज देशपांडे ह्यांचे सुवर्ण यशाबद्दल हार्दिक अभिनंदन व शभेच्छा!

August 2021



अहवाल

टिळक आयुर्वेद महाविद्यालय ८८ वा वर्धापन दिन - दि. २६ जून २०२१

डॉ. मिहीर हजरनवीस

राष्ट्रीय शिक्षण मंडळ संचलित 'टिळक आयुर्वेद महाविद्यालयाचा ८८ वा वर्धापन दिन समारंभ' शनिवार, दि. २६ जून २०२१ रोजी आयोजित करण्यात आला. राष्ट्रीय शिक्षण मंडळाचे अध्यक्ष **डॉ. दि. प्र. पुराणिक** हे समारंभाच्या अध्यक्षस्थानी होते. सिंबायोसिस इन्स्टिट्यूट ऑफ हेल्थ सायन्सेस्चे संचालक **डॉ. राजीव येरवडेकर** हे प्रमुख पाहुणे होते. कार्यक्रमाची सुरुवात धन्वंतरी पूजनाने झाली. योग दिनानिमित्त प्राप्त पोस्टर प्रदर्शनाचे उद्घाटन डॉ. राजीव येरवडेकर यांचे हस्ते झाले. वैद्य प.य. वैद्य खडीवाले यांच्या प्रतिमेचे अनावरण डॉ. दि. प्र. पुराणिक यांच्या हस्ते करण्यात आले.

प्राचार्य **डॉ. सदानंद वि. देशपांडे** यांनी कार्यक्रमाचे प्रास्तविक व स्वागत केले. प्रास्ताविकात महाविद्यालयाच्या गेल्या २ वर्षांचा प्रगती आलेख त्यांनी मांडला. समारंभामध्ये राष्ट्रीय शिक्षण मंडळ पुरस्कृत 'कार्यभूषण पुरस्कार' या वर्षी **डॉ. प्रज्ञा आपटीकर; डॉ. नीलांगी नानल** व **डॉ. विनेश नगरे** या १९९६ साली बी.ए.एम.एस. झालेल्या बॅचच्या माजी विद्यार्थ्यांना देण्यात आला. राष्ट्रीय शिक्षण मंडळ पुरस्कृत



दीप प्रज्वलन प्रसंगी- डावीकडून- डॉ. हुपरीकर, डॉ. भागवत, डॉ. डोईफोडे, डॉ. पुराणिक, डॉ. येरवडेकर, डॉ. देशपांडे, डॉ. उजागरे.

'उत्कृष्ट शिक्षक पुरस्कार' प्रा. डॉ. मिहीर हजरनवीस यांना (सन २०१९–२० करीता), प्रा. डॉ. मीनाक्षी रणदिवे यांना (सन २०२०–२१ करीता), 'उत्कृष्ट विभाग पुरस्कार' कायचिकित्सा विभाग प्रा. डॉ. सदानंद वि. देशपांडे व सहकारी यांना प्रदान करण्यात आला.

अध्यापकेतर वर्गातून 'कार्यकुशल पुरस्कार' प्रयोगशाळा तंत्रज्ञ सौ. वर्षाराणी धिवार यांना (सन २०१९ – २० करीता), लिपीक टंकलेखक कु. नेहा शिंदे यांना (सन २०२० – २१ करीता) तसेच 'कार्यतत्पर पुरस्कार' श्री. संतोष मचाले यांना (सन २०१९ – २० करीता), श्री. संजय हिरश्चंद्रे यांना (सन २०२० – २१ करीता) प्रदान करण्यात आला.

कार्यक्रमामध्ये आयुर्विद्या इंटरनॅशनलच्या माहे जुलै २०२१ च्या अंकाचे प्रकाशन करण्यात आले. ॲनिमिया प्रोजेक्ट वरील पुस्तकाचे प्रकाशन करण्यात आले.

सन २०१९-२० व २०२०-२१ करीता वर्षनिहाय व विषयानुसार डॉ. शिवराम किरुमक्की व अन्य शैक्षणिक पुरस्कारांचे वितरण गुणवत्ताधारक विद्यार्थ्यांना करण्यात आले.



कै. वैद्य प.य. वैद्य खडीवाले यांच्या तैलचित्र अनावरण प्रसंगी-डावीकडून- डॉ. उजागरे, डॉ. देशपांडे, डॉ. पुराणिक, डॉ. हजरनवीस, डॉ. येरवडेकर, डॉ. हुपरीकर, डॉ. गांगल, डॉ. गव्हाणे, वैद्य कुलकर्णी.



आयुर्विद्या इंटरनॅशनलचे प्रकाशन प्रसंगी- डावीकडून- डॉ. गांगल, डॉ. भागवत, डॉ. हुपरीकर, डॉ. येरवडेकर, डॉ. पुराणिक, डॉ. देशपांडे, डॉ. हजरनवीस, डॉ. उजागरे, डॉ. इनामदार, डॉ. दीक्षित.





कार्यभूषण पुरस्कार स्विकारताना डॉ. विनेश नगरे– चित्रात डावीकडून– डॉ. हुपरीकर, डॉ. येरवडेकर, डॉ. पुराणिक, डॉ. विनेश नगरे, सौ. नगरे, डॉ. देशपांडे, डॉ. उजागरे, डॉ. हजरनवीस.

कार्यभूषण पुरस्कार स्विकारताना डॉ. नीलांगी नानल– चित्रात डावीकडून– डॉ. हुपरीकर, डॉ. पुराणिक, डॉ. भागवत, डॉ. येरवडेकर, डॉ. नीलांगी नानल–सरदेशपांडे, श्री. सरदेशपांडे, डॉ. देशपांडे, डॉ. हजरनवीस, डॉ. उजागरे.





कार्यभूषण पुरस्कार स्विकारताना डॉ. प्रज्ञा आपटीकर-चित्रात डावीकडून-डॉ. हुपरीकर, डॉ. पुराणिक, डॉ. भागवत, डॉ. येरवडेकर, डॉ. प्रज्ञा नागन्र-आपटीकर, श्री. आपटीकर, डॉ. देशपांडे, डॉ. हजरनवीस, डॉ. उजागरे.

डॉ. राजीव येरवडेकर यांनी 'मिक्सोपॅथीचा रुग्ण हितासाठी वापर करावा' असे म्हटले. 'आयुर्वेद व ॲलोपॅथी यांनी एकत्र येऊन विविध आजारांवर काम करणे गरजेचे आहे. स्त्रीरोगातील विषयात योगासने, प्राणायाम इ. चा वापर करून संशोधन करण्याची आवश्यकता आहे' असेही त्यांनी सांगितले

रॅन्डॅक ॲन्ड फास्टनर्स या जर्मन कंपनीचे मॅनेजिंग डायरेक्टर श्री. सतीश भिडे यांचा मुलांच्या वसतिगृहातील सुधारणा करण्यासाठी देऊ केलेल्या देणगीबद्दल सत्कार करण्यात आला.

डॉ. दि. प्र. पुराणिक यांनी अध्यक्षीय मनोगतामध्ये 'टिळक आयुर्वेद महाविद्यालय हे राष्ट्रीय आयुर्वेद संस्था करण्याच्या दृष्टीने प्रयत्न करणार' असे सांगितले. सर्व पुरस्कार प्राप्त विजेत्यांचे अभिनंदन केले.

कार्यक्रमामध्ये धन्वंतरी स्तवन डॉ. गौरी गांगल यांनी म्हटले. मान्यवरांची ओळख डॉ. सरोज पाटील यांनी करून दिली. कार्यभूषण पुरस्कारांच्या मानपत्राचे वाचन डॉ. मिहीर हजरनवीस, डॉ. मंजिरी देशपांडे व डॉ. विनया दीक्षित यांनी



उत्कृष्ठ शिक्षक पुरस्कार स्विकारताना डॉ. मिहीर हजरनवीस – चित्रात डावीकडून– डॉ. सौ. हजरनवीस, डॉ. हजरनवीस, डॉ. हुपरीकर, डॉ. येरवडेकर, डॉ. पुराणिक, डॉ. देशपांडे.



उत्कृष्ठ शिक्षक पुरस्कार स्विकारताना डॉ. मिनाक्षी रणदिवे – चित्रात डावीकडून– डॉ. गांगल, डॉ. मिनाक्षी रणदिवे, डॉ. भागवत, डॉ. हुपरीकर, डॉ. येरवडेकर, डॉ. पुराणिक, डॉ. देशपांडे.



सर्वोत्कृष्ठ विभाग पुरस्कार स्विकारताना कायचिकित्सा विभाग प्रमुख – चित्रात डावीकडून– डॉ. परचुरे, डॉ. शिंपी, डॉ. देशपांडे, डॉ. गांगल, डॉ. भागवत, डॉ. हपरीकर, डॉ. येरवडेकर, डॉ. प्राणिक.



कार्यकुशल पुरस्कार स्विकारताना कु. नेहा शिंदे – चित्रात डावीकडून– कु. नेहा शिंदे, डॉ. गांगल, डॉ. भागवत, डॉ. हपरीकर, डॉ. येरवडेकर, डॉ. पुराणिक, डॉ. देशपांडे.



कार्यतत्पर पुरस्कार स्विकारताना श्री. संजय हरीश्चंद्रे – चित्रात डावीकडून– श्री. संजय हरीश्चंद्रे , डॉ. भागवत, डॉ. हपरीकर, डॉ. येरवडेकर, डॉ. पुराणिक, डॉ. देशपांडे.



कार्यतत्पर पुरस्कार स्विकारताना श्री. संतोष मचाले – चित्रात डावीकडून– श्री. संतोष मचाले, डॉ. गांगल, डॉ. भागवत, डॉ. हुपरीकर, डॉ. येरवडेकर, डॉ. पुराणिक, डॉ. देशपांडे.



कार्यकुशल पुरस्कार स्विकारताना कु. नेहा शिंदे – चित्रात डावीकडून– सौ. वर्षाराणी धिवार, डॉ. गांगल, डॉ. भागवत, डॉ. हुपरीकर, डॉ. येरवडेकर, डॉ. पुराणिक, डॉ. देशपांडे.

केले. डॉ. इंदिरा उजागरे यांनी उत्कृष्ट शिक्षक, उत्कृष्ट विभाग, कार्यकुशल व कार्यतत्पर पुरस्कारांचे वाचन केले. डॉ. अभय इनामदार यांनी आयुर्विद्या इंटरनॅशनल बाबत माहिती दिली. शैक्षणिक पुरस्कारांचे वाचन डॉ. मंजिरी देशपांडे व डॉ. तरन्नुम पटेल यांनी केले. सूत्रसंचालन डॉ. योगिनी पाटील यांनी केले. आभार प्रदर्शन डॉ. नंदिकशोर बोरसे यांनी केले. राष्ट्रगीताने कार्यक्रमाची सांगता झाली.

या कार्यक्रमास मान्यवर, प्रतिष्ठित व्यक्ती, राष्ट्रीय शिक्षण मंडळाच्या घटक संस्थांचे पदाधिकारी व सभासद, विद्यार्थी व त्यांचे पालक तसेच अध्यापकेत्तर कर्मचारी 'कोविड १९' चे सर्व नियम पाळून उपस्थित होते.



Report

Celebration of the 7th International Day of Yoga at Tilak Ayurved Mahavidyalaya, Pune

Dr. Mihir Hajarnavis

Tilak Ayurved Mahavidyalaya, Pune, Sheth Tarachand Ramnath Charitable Ayurvedic Hospital in collaboration with Ayurved Department of Sassoon General Hospital And BJ Medical College, Pune organized the programme to observe the **7th International Day of Yoga on 21/06/2021** at the Yoga Hall of Sheth Tarachand Ramnath Charitable Ayurvedic Hospital. Owing to the Covid 19 pandemic situation, the offline programme was conducted in the presence just 40and the digital broadcasting of the same was attended by about 249 participants. Thus, the programme had a total of 289 attendees.

The inauguration was done digitally at the hands of the Dean of BJ Medical College and Sassoon General Hospital **Dr. Murlidhar Tambe.** The Assistant Director of AYUSH Pune, Vaidya **Vyankat Dharmadhikari** graced the programme as the Chief Guest. **Dr. Sadanand Deshpande**, the Principal Of Tilak Ayurved Mahavidyalaya, Pune delivered the welcome address.

The programme commenced with the Dhanwantari Stavan and Patanjali Muni. The Common Yoga Protocol designated by the Ministry of AYUSH was performed under the guidance of Mrs Vaishali Chowgule and Mrs Tejashree Pendse, the Yoga Teachers at the institute. Principal Dr. Sadanand Deshpande, Vice Principal Dr. Indira Ujagare, Vice Principal And HOD Dr. Mihir Hajarnavis, Deputy Superintendent of Hospital Dr. Kalyani Bhat were among those present o the dais. As a Part of the Celebrations of the 7th International Day of Yoga various activities were held by the college.

1) Yoga Related Online Competitions -

Sr No	Name of	Topics	Number of	Winners
	Competition		Entries	
1	Essay Competition	 My Favourite 	50	Group A
		Verse (Sutra) from		First Prize: Jahanvi Thumar
		Yoga Treatises		Second Prize: Anagha Rao
		• Mental Health		Third Prize: Pavan Sorathiya
		and Yoga		Group B
		 Globalization 		First Prize: Vd. Ruchika Karad
		and Yoga		Second Prize: Vd. Aishwarya Jogalekar
				Third Prize: Vd. Sarita Murade
2	Poster Competition	 Ashtang Yoga- 	84	Group A
		For Enhanced		First Prize: Priyanka Bhalia
		Living		Second Prize : Misbah Kazi
		• Shatkarma		Third Prize: Shivani Sahane
				Group B
				First Prize: Vd. Sarita Murade
				Second Prize: Vd. Radhika Kharad
				Third Prize: Vd. Urmila Ramnani
3	Slogan Competition	Maximum	87	First Prize: Sayak
		10 words Yoga		Second Prize: Prachi Sali
		Practice related		Third Prize : Sonu Maddshiya

		slogan in Marathi/Hindi/ English/Sanskrit						
4	Quiz Competition	Yoga treatises, Information about IDY, Day to day practice of Yoga	11 <i>7</i>	First Prize: Vd. Rashmi Rekha Acharya Second Prize: Vd. Raveena Dalvi Third Prize: Vd. Ashutosh Joshi Fourth Prize: Vd. Vrishalee Amte				

2) Online Lectures/Demonstrations about Yoga

Topic	Resource Person	Торіс	Resource Person
Sooryanamaskar	Dr. Nileema Shisode	Yoga for Obesity	Dr. Sheetal Chopde
Ahara-Yoga Sambandha	Dr. Maithili Naik	Chair Yoga	Dr. Hema Shah
Yoga for Mental Health	Dr. Jyoti Rahalkar		
Yoga For All	Dr. Mihir Hajarnavis	Healthy Lifestyle	Dr. Soniya Kale
(Stress Management	-	through Yoga	-
Through Yoga)		practices	

3) Release of Yoga related material on the social media

- **a)** A You Tube Channel was created so as to release Yoga related material. A video containing the important sutras from Hathayoga Pradeepika , Gherand Samhita and Charak Samhita was created and uploaded on Channel of Department of Swasthavritta and Yoga of Tilak Ayurveda Mahavidyala, Pune. This is the link for the same https://youtu.be/mawByp2m-CY
- **b**) A blog containing the information of the Yoga Day celebrations was posted on the Blogspot. This is the link for the same

https://swasthavrittatamv.blogspot.com/p/7th-international-yoga-day-celebration.html

4) Distribution of Yoga related goodies, articles

- A specifically designed mug, yoga mat was distributed among the staff members and dignitaries.
- Books related to Yoga like Gherand Samhita were given as prizes to the winners of various competitions.
- A Guduchi sapling was used instead of flowers for the felicitation of dignitaries.

All activities were undertaken by the Department of Swasthavritta and Yoga was coordinated by HOD Dr. Mihir Hajarnavis and Assistant Co Ordinator was Dr. Maithili Naik. The NSS Team under the guidance of Dr. Madhura Kulkarni rendered support for the programme. All the activities were held with strict adherence to the Covid 19 precaution guidelines and using the online mode wherever possible.



Felicitation of dignitaries-From left- Dr. Ujagare, Dr. Dharmadhikari, Dr. Deshpande, Dr. Hajarnavis.



Teachers and Students Participated in 7th International Day of Yoga on 21/06/2021









आमधाचन, आनाह



वातकपहर

रेचक, भेदक, उत्वलेशकर

दाह, कृति

Embelia ribes वातकफहर







सुखसारक चूर्ण हा मृदु रेचन कर योग आहे. स्वर्णक्षीरी व हरीतकी हे सुखसारक चूर्णातील मुख्य रेचक द्रव्य आहेत.

वरील घटकद्रव्यांनुसार

रस-कटू, कषाय, मधुर

वीर्य-उष्ण

विपाक - कटू कार्मुकत्व :

दोष - तिक्तकटुविपाकाने कफवातशमन व स्निग्ध, उष्णवीर्य, कषायरस, सरगुणांनी वातानुलोमन धातू -अम्ल, तिक्तरस, उष्णवीर्य कटुविपाक तसेच स्निग्ध गुणामुळे अग्निदीपन व अन्नाचे व्यवस्थित पाचन होऊन उत्तम आहार रस तयार होऊन पुढील धातूंची निर्मिती सुरळीत होते. **मल** – साठलेल्या मलाचे किंवा दोषांचे पाचन करून सरण होते. स्निग्ध गुणांनी तसेच रेचन व भेदन कर्माने मलनि:सारण. **अवस्था** : साम आणि निराम. **अवयवांवरील कार्य** : पक्वाशयगुद, ग्रहणी. <mark>उपयोग :</mark> बद्धकोष्ठ अम्लपित्त, अजीर्ण, प्रवाहिका, आध्मान

सुखसारक चूर्णाचे मुख्यतः पाचन, भेदन व अनुलोमन हे गुण आहेत. या योगाचा मुख्यतः वातकफजन्य संप्राप्तीमध्ये उपयोग होतो. तसेच पित्त प्रकृती अथवा मृद् कोष्ठ असलेल्या रुग्णामध्ये विरेचनासाठी या योगाचा वापर होतो. अध्यशन, अत्यशन, विषमाशन या कारणांनी झालेल्या अजीर्णामध्ये तसेच समान वायूची विकृती होऊन झालेल्या अजीर्णामध्ये तसेच विष्टब्धाजीर्णामध्ये सुखसारखचूर्ण १ ते १.५५ ग्रॅम मात्रेत जेवणापूर्वी वा जेवणाच्या मध्यवेळी कोमट पाण्याबरोबर देता येते. अल्प प्रमाणात सामावस्था असल्यास सुखसारक चूर्ण अपान काळी सेवन केल्यास आमपाचन व वातानुलोमन होऊन अग्निदीपन होते व पचनयंत्रणा सुरळीत होते. आमावस्था अधिक असल्यास पाचन द्रव्यांसोबत या योगाचा वापर करू शकतो. पोट जड होऊन आध्मान, शूल ही लक्षणे असल्यास तूप व कोमट पाण्यासोबत दिल्यास वातामूलोमन होण्यास मदत होते. ग्रहणीच्या पूर्वरूपावस्थेमध्ये जेव्हा अग्रिमांद्य, विदाह, चिरपाचन अशी लक्षणे असतात तेव्हा अग्निदीपन व पचनासाठी या योगाची मदत होते.

रुक्ष आहार सेवन, मैद्याचे पदार्थ, बेकरी प्रॉडक्टस, कडधान्ये तसेच आसीन जीवनशैली यामूळे प्रायः दिसून येणाऱ्या बद्धकोष्ठासारख्या लक्षणांमध्ये सुखसारकचूर्णाचा अत्यंत चांगला उपयोग होतो. तसेच वृद्धावस्थेमध्ये आन्त्राचे बल कमी झालेले असते व वातप्रकोप अधिक प्रमाणात असतो. अशावेळी बद्धकोष्ठता असल्यास सुखसारकचूर्ण अल्प प्रमाणात नियमितपणे वापरता येते.

तसेच कृमि, अम्लपित्त, आनाह यांसारख्या रोगांमध्ये अनुलोमनार्थ सुखसारक चूर्णाचा चांगला उपयोग होतो.

मात्रा : १–२ ग्रॅम. **निषेध** : आन्त्रवृद्धी, आन्त्रगत व्रण intestinal obstruction यात हे चूर्ण देऊ नये.

वैद्य चेतना चौधरी, एम. डी (आयू)

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वैद्य इंदिरा उजागरे, एम. डी (आय्)



कार्यकारी संपादकीय



- डॉ. अपूर्वा संगोराम



दर्जेदार औषध निर्मितीची परंपरा आयुर्वेद रसशाळा



दिनांक १ ऑगस्ट २०२१ रोजी आयुर्वेद रसशाळेचा ८६वा वर्धापन दिन साजरा होत आहे. उत्तम आणि दर्जेदार औषधांची निर्मिती हे आयुर्वेद रसशाळेच्या औषधांचे वैशिष्ट्य ठरले आहे. रसशाळानिर्मित औषधांच्या यादीवर नजर टाकली तर असे लक्षात येते की, समाजातील सर्व वयोगटातील व्यक्तींना उपयोगी पडतील, सर्वसाधारणपणे शरीराच्या विविध अवयवांना होणाऱ्या आजारांसाठी, वेगवेगळ्या ऋतूमानानूसार होणाऱ्या आजारांसाठी, मानसरोगांसाठी, जीवनशैलीमुळे होणाऱ्या आजारांसाठी, साथीच्या आजारांसाठी, अशा वेगवेगळ्या दृष्टिकोनातून औषधांची निर्मिती केलेली दिसून येते. उदाहरणच घ्यायचे झाले तर, सध्या चालू असलेल्या ऋत्तील आजार जसे की, पावसाळ्यातील सर्दी, खोकला, ताप यासारख्या आजारावरील त्रिभुवन किर्ती, व्हॅसोसिन, सितोपलादी चूर्ण, द्राक्षासव, कुमारी कल्प यासारखी औषधे असोत की या ऋतूमध्ये विशेष बळावणाऱ्या दम्यासारख्या विकारावर उपयोगी श्वासकुठार गोळ्या, अभ्रक भस्म, कंटकारी कल्प, कनकासव, अशा विविध औषधांची प्रभावी निर्मिती असो, ही औषधे रुग्णांना सहज वापरता येतील व वैद्यांनाही रुग्णांना देता येतील अशा पद्धतीने तयार करण्यात येतात. याशिवाय वर्षभरात नेहमी आढळून येणारे आम्लपित्त, त्वचाविकार, रक्तक्षय, मूळव्याध, मूत्रविकार, संधिवात, मधुमेह, रक्तदाब, कावीळ, पोटद्खी, अजीर्ण यासारख्या व्याधींमध्येही नित्य उपयुक्त ठरतील अशी औषधे तयार केली जातात. औषधांची निर्मिती करताना त्यांची चव, गंध, वर्ण याचाही विचार करावा लागतो. त्यानुसार लहान बालकांसाठी दाडिमावलेह, रक्तवर्धक, बाळजीवन असे कल्प निर्माण करण्यात आले आहेत. तरुण वर्गासाठी तारुण्यपिटीका, केस गळणे सारख्या व्याधी लक्षात घेऊन मंजिष्टादी क्वाथ. सारीवाद्यासव, केसगळतीसाठी माधवी तेल, गर्भिणींसाठी गर्भपाल रस, स्तिकांसाठी शतावरी कल्प, स्त्रीरोगांसाठी ए.एल.टॅब्लेट, अशोकारिष्ट, वृद्धावस्थेतील मलावरोध, स्मृतिभ्रंश यासाठी त्रिफळा चूर्ण, सुखसारक चूर्ण, प्रशम,

सारस्वतारिष्ट यासारखी आयुर्वेद रसशाळेची औषधे जनमानसात प्रसिद्ध आहेत.

अर्थात ही यादी प्रतीकात्मक आहे. सध्या आढळणाऱ्या बहुतांश विकारांवर आयुर्वेद रसशाळेची औषधी उपलब्ध आहेत आणि वैद्यवर्ग मोठ्या प्रमाणात ही औषधे वापरतात. ही औषधे अतिशय शास्त्रशुद्ध पद्धतीने तयार होतात, यामध्ये कच्च्या मालाच्या निवडीपासून ते औषधी निर्मितीपर्यंत वेगवेगळे विभाग कार्यरत आहेत व त्यांचे काम अतिशय शिस्तबद्ध व काटेकोरपणे चालते, त्यामुळेच या कंपनीला GMP Certified Company असे मानांकन मिळाले आहे.

फक्त औषध निर्मिती करून ही संस्था थांबत नाही तर विद्यार्थी, डॉक्टर्स यांच्याकरिता व्याख्यानमाला, सेमिनार, चर्चासत्र यांचेही आयोजन करण्यात अग्रेसर आहे. गावागावात शिबिरांच्या माध्यमातून रसशाळेची औषधे सर्वदूर पोहोचली आहेत. विविध चर्चासत्रांमध्ये रसशाळेच्या स्टॉलमार्फत औषधांची माहिती अधिकाधिक पोचण्यास मदत होते आहे.

पुण्यासारख्या शहरात कर्वे रस्त्यावर दिमाखात उभी असलेली आयुर्वेद रसशाळा, पुणे शहराच्या वैभवात व प्रतिष्ठेत भर घालत आहे. तिचा दिवसेंदिवस असाच विकास होवो अशीच या वर्धापनादिनानिमित्त प्रार्थना!

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For Details Contact -

Prof. Dr. Vinaya Dixit (9422516845)

Prof. Dr. Mihir Hajarnavis (9422331060)



उपसंपादकीय



स्वास्थ्यनिर्भर भारत!

– डॉ. सौ. विनया दीक्षित

स्वास्थ्यसंरक्षण व स्वास्थ्यसंवर्धन ही दोन जीवनसंरक्षक उद्दीष्टे आहेत. प्रत्येक भारतीय नागरीकाने 'स्वस्थ' व आरोग्यपूर्ण जीवन आनंदाने जगावे यासाठी रोटी – कपडा और मकान या बरोबरच आरोग्य संरक्षणाचा चौथा आयाम शासनाने अधिक चांगल्या प्रकारे विकसित केला आहे.

रोगापासून बचाव हे उपचारापेक्षा अधिक महत्त्वाचे आहे. तसेच नियमितपणे आरोग्यविषयक जागरूक-तपासणी करणे, त्याचा लेखा-जोखा नोंदवून ठेवणे हे सध्याच्या आधुनिक भारतीय जीवनशैलीला अनुसरून बनवलेले सर्वोत्तम धोरण आहे. संसर्गजन्य असो वा जीवनशैलीजन्य-मधुमेह, रक्तदाबाचे विकार, हार्मोन्स विषयीचे विकार-काहीही असले तरी जेवढे लवकर त्याचे 'निदान' होते, किंबहुना पूर्वरूपे वा चाहूल अगोदरच ओळखता येते-तितके रुग्णाच्या आरोग्य रक्षणासाठी फायद्याचे असते.

बऱ्याचदा साधा सर्दी-ताप, वारंवार होणारी मळमळ, डोकेदुखी, जाणवणारी अशक्तता, अपचनाच्या तक्रारी या कुठल्या तरी प्रदीर्घ आजाराची सुरुवात असू शकतात. त्यामुळे केवळ तात्पुरते घरगुती उपचार करून 'वेळ मारुन नेणे' ही वृत्ती कदापि पथ्याची नसते. यात कधीच आरोग्य रक्षण साधले जात नाही. पुढे जावून जेव्हा आजार चिघळतो तेव्हा तपासण्या केल्यावर कष्टसाध्य किंवा असाध्य, जीवनभर सोबत करणाऱ्या आजारांचे निदान तज्ज्ञ सांगतात. अर्थात त्यावर औषधोपचार असतात. निराश होण्याचे कारण नसते. दररोज अनेक गोळ्या औषधे घेऊन माणसे आनंदाने जगतच असतात.

तरीही ही परिस्थिती गेल्या दशकात अनेक पटींनी वाढली आहे. मधुमेह, उच्चरक्तदाब या पाठोपाठ PCOD व वंध्यत्वासारखे आजार घरोघरी ठाण मांडूनच आहेत. यातून बचाव करायचा तर पिढीजात आजारांना रोखणे तितके सोपे नाही.

मग उपाय काय? जागरुकता-प्रत्येकाची स्वतःच्या

आरोग्याविषयी! याकरीता योग्य आहार-विहाराबरोबरच दर महिन्याला सर्व घरातल्या सद्स्यांच्या नियमित तपासण्या करणे व काही शंका आल्यास त्वरीत तज्ज्ञांचे मार्गदर्शन घेणे हेही एक उत्तम धोरण ठरते.

कोरोना सारख्या महामारीच्या काळात तर यासाठी उपयुक्त उपकरणांची अधिकच आवश्यकता जाणवत आहे. Digital Thermometer, Pulse oximeter, B.P. apparatus, Blood Sugar तपासणारे घरगुती स्तरावर वापरता येणारी ही उपकरणे, स्मार्ट मोबाईल वापरणारे स्मार्ट नागरिक सहजपणे व जबाबदारीने वापरू शकतात. त्यामुळे मुलभूत गरजांप्रमाणे यांच्या उपलब्धतेने 'रोगबचाव' व आरोग्यरक्षण धोरण अमलात आणणे शक्य आहे.

हीच बाब वेळीच लक्षात घेऊन अतिशय धोरणीपणाने शासनाने National Pharmaceutical Pricing Authority च्या कक्षात या विविध वैद्यकीय उपकरणांचा समावेश केला आहे. त्यामुळे यांच्या सरासरी विक्रीची किंमत ही शासनाने निश्चित केलेल्या किमती प्रमाणेच राहील. यांचा फायदा सर्वसामान्य भारतीयांना होणार आहे. १५०० ते ३००० पर्यंत मिळणारी BP apparatus सारखी उपकरणे आता १ हजार रुपयांच्या कक्षेत उपलब्ध होतील.

प्रत्येक कुटुंबाने आरामदायी वस्तूंबरोबर अशा उपकरणांची खरेदी करून त्यांचा जागरूकपणे व जबाबदारीने वापर करणे शिकले पाहिजे. अर्थात पूर्णपणे यावरच अवलंबून न राहाता काही शंका असल्यास किंवा अयोग्य मोजमाप आढळल्यास त्वरीत तज्ज्ञ डॉक्टरांचा सल्ला घ्यायला हवा.

आत्मनिर्भर भारत हे स्वप्न सत्यात येण्यासाठी प्रथम स्वास्थ्यनिर्भर भारत उभारायला हवा. हीच योग्य वेळ आहे. 'जागरुकता', 'साक्षरता' आणि 'स्वास्थ्य' हे सर्व एकत्रच नांदतात. त्यांना आत्मसात करू यात आणि आरोग्य संपन्न भारत निर्माण करूयात!

् रोटरी पुरस्काराने सन्मानित आरोग्यदीप २०१७ व २०१८



आरोग्यदीप २०१९ छंदश्री आंतरराष्ट्रीय दिवाळी अंक स्पर्धा द्वितीय पारितोषिक विजेता.

(आवाहन!!)

अारोग्यदीप दिवाळी अंक २०२१

दि. १५ ऑक्टोबर २०२१ रोजी दसऱ्याच्या शुभमुहूर्तावर प्रकाशित होणार आहे. ● जाहिरातदारांनी कृपया त्वरीत संपर्क साधावा. ●

प्रा. डॉ. अपूर्वा संगोराम (९८२२०९०३०५)

प्रा. डॉ. विनया दीक्षित (९४२२५१६८४५)





