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of 21st Century  
Dedicated to Ayurved...



August 2022

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Ayurvedidya Masik

आयुर्वेद रसशाळा, पुणे यांची गुणकारी व उपयुक्त उत्पादने...



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टाळण्यासाठी, गोवर व कांजिण्या  
होऊन गेल्यावर शरीरामधील  
उष्णता कमी करण्यासाठी  
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हार्दिक अभिनंदन व शुभेच्छा!

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## संपादकीय

### बहुविध पर्याय

डॉ. दिलीप पुराणिक

आरोग्याच्या संबंधात भारतात किंवा सर्व जगात केलेल्या सर्वेक्षणानुसार असे आढळून आले आहे की काही व्याधी होण्याचे प्रमाण दिवसेंदिवस वाढतेच आहे. अगदी पाश्चात्य देशात अथवा अतिविकसित देशांमध्ये हे व्याधी होण्याचे प्रमाण सातत्याने वाढतेच आहे. ह्या व्याधींमध्ये प्रामुख्याने समावेश होतो मधुमेह (Diabetes), कर्करोग (Cancer), हृद्रोग (Heart Disease) ह्यांचा. वैद्यकीय क्षेत्रात रोगनिदान (Diagnosis) आणि चिकित्सा (Treatment) ह्या बाबतीत आश्चर्यकारक प्रगती होवून देखील वरील व्याधी होण्याचे प्रमाण प्रयत्न करूनही वाढतेच आहे. भारत देखील त्यास अपवाद नाही.

भारतात देखील हृद्रोग, कर्करोग आणि मधुमेह होण्याचे प्रमाण चिंताजनक आहे. हृद्रोगामुळे होणाऱ्या मृत्युंचे प्रमाण एकूण मृत्युंच्या तुलनेत सुमारे १८% आहे. ह्या हृद्रोगांमध्ये Coronary Artery Disease (CAD), Ischaemic Heart Disease (IHD), Cardio Vascular Disease (CVD) ह्यांचा प्रामुख्याने समावेश होतो. सन २०२० मध्ये भारतात पावणेपाच दशलक्ष मृत्यू हृद्रोगामुळे ओढवले. संपूर्ण जगात सुमारे २४०० मृत्यू दररोज हृद्रोगामुळे ओढवतात.

पूर्वी हृद्रोगाचे निदान आणि चिकित्सा विकसित झालेली नसल्यामुळे कुठल्याही प्रकारचे हृदयाचे दुखणे म्हटले की त्यावर Heart Attack चा शिक्का बसत असे आणि त्याचे भविष्य म्हणजेच "मृत्यू" ठरलेला असे. परंतु हृद्रोगासंबंधात वैद्यकीय क्षेत्राने केलेल्या संशोधनामुळे भयावह चित्र संपूर्णपणे बदलले आहे असे म्हटल्यास वावगे ठरू नये.

सुरवातीच्या काळात Electro Cardiogram (ECG.) हे एकमेव निदान करण्याचे साधन होते. परंतु नुसत्या ECG मुळे हृदयास पुरवठा करणाऱ्या कोणत्या रक्त वाहिनीत अडथळा आहे हे समजत नसे, परंतु आता विकसित झालेल्या Nuclear Stress Test, Cardiac Pet Scan, Coronary CT angiogram किंवा Angiography ह्या चाचण्यांमुळे (tests) रक्तवाहिनीतील अडथळा (Block) होण्याची जागा शोधता येते आणि पुढील उपचार करणे शक्य होते. त्वरीत निदान झाल्याने चिकित्सा त्वरीत करणे शक्य होते आणि अर्थातच रुग्णाचे भवितव्य (Prognosis) नक्कीच आशादायक होते.

हृदयरोगासंबंधात आता ज्या शस्त्रक्रिया (Heart Surgery) उपलब्ध आहेत त्यामध्ये प्रामुख्याने Angioplasty आणि Bypass Surgery ह्यांचा समावेश होतो. तुलनेत हृदयास पुरवठा करणाऱ्या रक्तवाहिन्यांमध्ये (Arteries) जेव्हा कमी

अडथळा (Blockage) असतो त्यावेळी अँजिओप्लास्टी केली जाते. दोन किंवा तीन रक्तवाहिन्यांमध्येच अडथळा असेल त्या वेळी अँजिओप्लास्टी केली जाते. ही शल्यक्रिया त्यामानाने कमी त्रासदायक असते. ह्यामध्येही Balooning आणि stenting हे प्रकार असतात.

Angioplasty हे शल्यकर्म जरी कमी गुंतागुंतीचे असले तरी त्याचेही कांही धोके संभवतात (Complications). ह्यामध्ये 1) Allergic reaction 2) Breathing problem 3) Bleeding 4) Infection इत्यादींचा समावेश होतो. परंतु एकूणच अँजिओप्लास्टी हे शल्यकर्म कमी गुंतागुंतीचे असल्याने हृदयशल्यतज्ज्ञ आणि रुग्ण त्यास प्राधान्य देतात. अँजिओप्लास्टी मुळे वेदना (Anginal Pain) न होणे, हृदयक्रिया सुलभ होणे आणि जीवनमान सुधारते. त्यामुळेच अँजिओप्लास्टी करून घेण्यास रुग्ण आनंदाने तयार होतात.

अँजिओप्लास्टीच्या तुलनेत बायपास सर्जरी (Bypass Surgery) वरच्या दर्जाची (Superior) असली तरी अधिक गुंतागुंतीची असते. हृदयास पुरवठा करणाऱ्या तीन वाहिन्यांची विकृती (Triple Vessel Disease), Left Main stem Artery stenosis असल्यास Bypass Surgery केली जाते. ह्या शस्त्रक्रियेमुळे देखील धोके संभवतात. त्यामध्ये Bleeding, Irregular Heart rhythm, Infection of Chest Wound, Stroke, Kidney loss ह्यांचा समावेश होतो आणि अर्थातच कांही वेळा "मृत्यू" होण्याची शक्यता असते. त्यामुळेच Bypass सर्जरी म्हटली की रुग्णांच्या मनात प्रचंड भिती असते आणि ती शक्य तर टाळण्याकडे रुग्णांचा कल असतो.

"Bypass Heart surgery" अथवा "open Heart surgery" ह्या शब्दाचीच प्रचंड भिती असलेल्या रुग्णांसाठी जपानी हृदयशल्यतज्ज्ञांनी Retrograde Coronary Chronic Total occlusion Intervention ही पद्धत विकसित केली आहे. विशेषतः short occlusion मध्ये ही पद्धत विशेष फायद्याची ठरली आहे. हे शल्यकर्म गुंतागुंतीचे नसल्यानेच ही पद्धत हृदय रुग्णांच्या पसंतीस उतरली आहे.

ज्या रुग्णांना हृदयाचा अधिक गंभीर आजार असेल, उदा. Cardiomyopathy. (with class II or IV congestive heart failure), class IV angina, Non obstructive Hypertrophic Heart disease, severe decompensated inoperable valvular Heart disease ह्या रुग्णांना देखील शेवटचा पर्याय हृदय प्रत्यारोपण (Heart Transplant) उपलब्ध आहेच.



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## Quality Assurance : A Short Review

डॉ. अरविंद मुजुमदार, एम.एससी. (फार्माकोलॉजी), पीएच. डी.

**Introduction** - In the case of purity of medicine, quality is the most important requirement in the pharmaceutical manufacturing process. Quality is defined as "degree / category of excellence". Suitable for use, compliance with requirements and pursuit of excellence. Control is the act of controlling / controlling something. Quality control can be defined as "part of quality management focused on meeting quality requirements". Good Manufacturing Practice (GMP) is related to pharmaceutical products. Which ensures that the products are produced consistently. They are controlled according to the right quality standards for their intended use. Good Laboratory Practice (GLP) is related to the validation of medicine. It is a quality management control system for research laboratories, institutions and pharmaceutical factories that ensures a uniformity, consistency, reliability, reproducibility, quality and integrity of products for human health. Assurance means "freedom from doubt". "Quality Assurance" is a broad concept, internationally known as Quality Assurance (QA), which includes all. Individually / collectively affecting product quality. According to the World Health Organization, quality assurance / quality guarantee is a wide range. This concept / system encompasses all aspects, and individually affects the quality of the product / product together. In pharmaceuticals in this context, quality assurance can be divided. The major areas are development, quality control, production, distribution and inspection. Good clinical practice (GCP) ensures that information and reported results are reliable and accurate. The rights, integrity and confidentiality of test subjects are respected and protected. Pharmaceutical products are designed and

developed in this way. Quality Assurance accounts for GMP and other related code requirements such as GLP and GCP. What is the difference between quality control and quality assurance in pharmaceuticals? Quality control is a "tool". It is an analytical series used to measure drugs evaluated in terms of usefulness by authentication. Quality Assurance is a "system". It is a plan to guarantee overall management, including information on the integrity, integrity of the product. This can be accomplished by observing the good manufactured using the process. Thus, quality control samples can be used for quality assurance. After this basic discussion it is propose to discussion of various aspects of quality assurance in this review.

**World Health Organization and Quality Assurance** - The World Health Organization has a part of the Quality Assurance program under the Department of Essential Medicines and Medicines Quality and Safety Policy are coming. The World Health Organization contributes to public health by enabling quality medicines. Reaching patients through quality assurance, develop standards, standards and guidelines for quality assurance, develop international pharmaceuticals, establish International Chemical Reference Subjects (ICRS) and collaborate with a number of stakeholders to assist developing countries. to develop and implement quality assurance.

**Basic elements of quality assurance** - The basic elements of quality assurance are Facilities, equipment, reagents and supplies. Pharmaceutical factory includes production and quality control department, storage space, proper raw and processed pharmaceuticals, packaging and labelling, archives, marketing

administration finance and other necessities. Adequate space, adequate work space and safe environment are required for all these departments. Verifying performance adequate work space and safe environment are required for all these activities. To verify, equipment should be maintained, trouble shooting, servicing and repairing, inspection, storage system installed. In general, supply should be provided by certifying the supply of everything.

#### **Quality assurance in pharmaceutical factory -**

Quality assurance is an integral part of a process / system and product in a pharmaceutical factory. There is no reason to seek the help of others for this. It is also necessary to be free from financial pressures. It is important to ensure that quality policies are followed. There must be a final right to accept or reject the product. The aggregation quantification discipline specified with the component should be followed. What is quality control / quality assurance in pharmaceutical quality assurance? Quality is a degree / excellence. "The act of managing / using control from something" is the promise of gaining control over something. Thus, quality control and quality assurance, achieve excellence that can work for the integral activities of the pharmaceutical industry. This should be a function of quality control and quality assurance.

**The need for quality assurance -** There are several quality assurance objectives related to drug production, which must be met. If an organization cannot meet these quality objectives, it will have to repeat the entire pharmaceutical manufacturing process. Below are each given objectives. It does not hurt everyone, it includes patients, healthcare workers and changing policies. It benefits manufacturers / regulators, manufacturers and ensure public safety and the ultimate goal of any pharmaceutical manufacturer is to create a product that will keep the public safe and

protect from negative publicity. The ultimate goal of a pharmaceutical factory should be to earn the trust of the public, but even less, to protect it from negative publicity. Production efficiency needs to be constantly increased. Companies need to find new ways to become more efficient in manufacturing drugs, but they should not do so at the risk of quality. At the same time, it is necessary to follow each of the relevant rules when effectively formulating drugs. To comply, each drug manufacturer must be able to prove that they comply with any relevant regulations. A robust and fully documented quality assurance system will help drug manufacturers prove that they are meeting regulatory compliance requirements.

**Quality Assurance in production area -** The task of quality assurance is concerned with quality control. Quality control samples can be used for quality assurance. Create a system to identify the drug, separate the test samples to see if it is suitable, create a standard running process for each test or analysis by contaminating the mix-up and cross. Assessing the adequacy of the situation. It is important that the products be analytically tested. It is important to have control over active and inactive materials during production. Quality assurance has to be done at every stage of production. This is because of the need to establish quality assurance control procedures and improve them as required. During production it is necessary to inspect the raw material samples, inspection and testing, packaging and labeling, components, bottles, caps, foil, labels, cartons, physical inspection of production and operations critical intermediate stages. During the manufacture of the drug, it is necessary to turn on or off the device, packaging materials and labeling of other drugs, documentation of the material /final product analysis based on examination, test or results. In order to evaluate and confirm the storage condition / stability of the raw material, the expiration

date (also known as medicinal life) is fixed in the specific storage condition of the intermediate and finished products. The drug should be discarded or recycled or destroyed if it is not fitted by inspection of the finished product returned to fix it after complaints after production. Using Process Analytical Technology (PAT), Risk Analysis and Critical Control Point (HACCP), the task of quality assurance can be accomplished. This is followed by a discussion on how to conduct quality assurance. As mentioned earlier, quality assurance is a process that takes several steps to ensure good product quality. Here is how to do it in a pharmaceutical factory. Quality assurance should be integrated with resource planning, by standardizing manufacturer practice. Plan a proper test system by creating a strong communication pattern/replica. Carefully inspect numerical technology for quality assessment. In the modern age, quality assessment can be done with technology like numerical management tools.

**Quality assurance in the certification process-** Certification for the purity of a drug comes from the word "validity". Which means "legally defined". What is certification? It is important to have the user's approval for the unit testing of the drug, integration test, system test, etc. The certification is a necessary and important legal tool for quality assurance in the pharmaceutical factory. Which provides a high degree of assurance of the desired result with predefined compliance. What are the principles of process authentication? Certification establishing documented evidence that provides a high degree of assurance, that a specific process will consistently produce a product that has predetermined features and quality characteristics. (1) In the pharmaceutical industry, the provision of objective evidence requires "confirmation, a requirement for use / application for a specific purpose". Focusing

on this question, do the desired tasks. This review is an accepted tool for quality management of medicine facilities, equipment, processes, products, cleaning certification, quality recording, storage and control patterns are the main components in industry certification. The quality in the product cannot be checked. Every important stage of the production process needs to be standardized. The other steps in the process need to be controlled so that the potential is maximized, so that the finished product meets all projections and design details consistently and predetermined.

The question is whether the authentication system can work for every pharmaceutical factory there is a hearing committee to study the quality assurance certification. The head of quality assurance is usually the chairman of the committee The members are the head of Quality Control, head of Production, head of Certification. The departments responsible for certification in pharmaceutical factories are as follows. To prepare a plan for preparation. To study and execute the plan. To prepare protocol for quality assurance, documentation process, report and approval of compliance in pharmaceutical factory. To prepare test and report according to quality control protocol. Different committees work in pharmaceutical factory to run the scheme smoothly. The names of those committees and brief works are given below. Who are the executives responsible for authentication? The committee that decides this. The committee that studies the work place and the certification of the working place, selects and prepares and executes the work, the production department, the production of the team and the efficient planning committee. To approve quality assurance protocols, documentation procedures, reports and compliance. Committee for testing and preparation of reports as per quality control protocol. The

types of authentications are as follows: It is important to have certification in the manufacturing sector. Certification is a legally and important binding part of the manufacturing department. Certification of equipment in a timely manner is an important part of good laboratory practice in the certification department. Quality is an important part of assurance.

The heating, ventilation and air conditioning (HVAC) system is designed to meet the environmental requirements of a pharmaceutical company and has a cleaning system and is part of the certification process. Continuity of certification is essential for the continuity of the production process. This is the process for certifying computer systems and computer assistive software in the field of pharmaceutical manufacturing, by which all aspects of the process (including computer systems) meet all quality requirements and comply with applicable rules and regulations regarding product quality, safety and traceability. Are shown to this is a technical discipline that is used by pharmaceutical and biological pharmaceutical companies to ensure that every information technology meets the purpose of the application. Responsibilities, reference documents, procedures, deviations, conclusions, reports, if the report is approved / not, should be given with reasons. Quality, best safety and effectiveness must be finalized in the product.

**Documentation and record inspection in quality assurance** - The quality assurance in a pharmaceutical factory consists of a number of standards running processes that check the quality assurance. Apart from that, documentation and reports are prepared in manufacturing, certification, marketing and other departments, while manufacturing medicines. Its quality is assessed and inspected during assurance. This includes documentation and reports that follow the standard execution process. It is seen whether

it is followed or not. And its implementation is expected to take place in pharmaceutical factories accordingly. If not, the reasons are known and if not, legal action is taken. Below is list of some of the standard operating procedures, documentation and reports. Department of administration, recruitment of temporary and permanent manpower, training of staff, personnel gowning qualification, medical examination. access and departure process. providing lockers to employees, security precautions, documentation and information control, information concentration, password adopted as a policy on computer, backup and storage of information, production department, manufacturing discipline, production methods, chemical handling in production department, machine qualification, In the production department, production quality control department entry and exit process, safety precautions, certification of visual inspection inspectors, failed inspection in production, product recycling and restructuring, hygiene process in production area, control of master information generation by computer in production department, pest and rat control certification department. For analysis of raw material samples, for analysis of intermediate and finished product samples, safety rules analysis methods in manufacturing field, handling of standards, preparation of reference standards, handling of laboratory chemicals, reagent preparation, equipment qualification, cleaning process in certification department, acceptable quality level, handling equipment, equipment and handling equipment, quality control department entry and exit process, certification department control documentation of master information generation by computer and information control, testing and validation of packaging, handling of packaging materials, packaging methods, handling of marketed drugs, redressal of marketed drug complaints, self-

inspection and internal audit, among others. Sample books in the production and certification department of pharmaceuticals and their formulations, laboratory work books / sheets, print outs of equipment, In the production and certification department, maintenance information record, employee Information, quality improvement records, archive information record, approval and distribution, test record management, develop a unified format for each document type, create certified format for form, document storage, retrieval and destruction, market complaint information and all other documentation and reports.

**Audit work in quality assurance** - Audit can be defined as the inspection of a process /system. To ensure that it complies with the requirements of its intended use.(2) Quality audit is the review and evaluation of all / parts of the quality system for the specific purpose of improvement. It is a tool for monitoring pharmacy programs, ensuring that procedures and reimbursement mechanisms comply with contracts and regulatory requirements.(3) Audit is one of the most important parts of quality assurance work. It is important to ensure quality. This is because it is used to compare the actual situation with the requirements and to report the consequences to the management. The audit is done to check the validity and reliability of the information. To provide evaluation, it provides management with performance information through which the factory controls the quality of its processes and products.(4)

**What are the objectives of the audit?** 1) Evaluation of compliance with ISO9001 requirements to complete ensuring effectiveness. 2) Evaluate compliance with ISO9001 documentation 3) Check compliance with documentation implementation 4) Evaluate effectiveness to meet requirements and objectives 5) Meeting any contract/regulatory requirements for

audit. 6) Provide opportunities to improve the quality management system. 7) Obtain permission to register and include the factory in the registered list. 8) Eligibility to become a potential supplier.(5)

**The principles of audit are given below?** 1)

**Integrity:** Being the basis of professionalism.

2) **Impartial presentation :** Obligation to report truthfully and strictly adhere to it. 3)

**Proper professional care:** To make decisions through diligence and auditing. 4) **Privacy:**

Maintaining information security. 5) **Freedom:**

The basis of impartiality of audit and maintaining the objectivity of audit findings. 6)

**Evidence-Based Approach:** Obtaining reliable and reproducible audit findings in a rational manner, systematic audit process.(6) **What are the types of audits?** 1) Internal audit 2)

External audit 3) Regulatory audit.(7) **The responsibilities of audit are as follows :** 1) To

assist the committee in selection and to inform the committee. 2) To take responsibility for planning and management of all stages of audit. 3) To represent the audit committee

along with the auditor. 4) Control the conflict and manage difficult situations. 5) Direct and control everything including the committee

and the auditor. 6) Decide on audit problems and quality system. 7) Report the results of the audit without delay. 8) Report major obstacles.

9) Inform the main obstacles and make a decision. 10) Report serious non-compliance immediately. 11) Effective communication

skills.(3)

**The audit process is as follows :** 1)

**Notification:** The audit process starts with notification. 2) **Planning:** Planning is the steps taken by the auditor before the audit, risk

Study to identify areas of concern 3) **Initial meeting:** Meeting between audit staff and seniors will describe the management of audit

targets as well as the process that administrative staff, account staff, auditors will undertake 4) **Audit evaluation phase:** Used to

adjust the final audit plan. is indicated. Created a schedule of audit activities. Employees and preliminary investigation should be started after learning the business. Process, interviewing the chief employee, testing the current business. Practice by testing the samples, reviewing the law and internal rules, and practice for fairness. 5)

**Communication :** Contact a corporate auditor to clarify, get access to clarify documents and procedures. 6) **Draft Audit :** Upon completion of the audit, draft audit, preparation. Details of what was done and found, distribution list of parties to get preliminary, results and list of concerns. 7) **Management Response:** The draft is given to the management, after reviewing and editing, suggesting changes, checking the area of concern and making final corrections. Then respond to the report stating whether there is a management response The request is made to the management, they agree with the cited issues, come up with a plan to rectify the issues noticed, and the expected date by which all issues will be resolved. 8) **Final meeting:** The meeting is designed to close the loose ends, discuss the management response to the audit and address the scope. 9) Report Delivery Goes and sends out of the audit area.(3) 10) **Feedback :** The audited company applies the recommended changes to the audit opinion, audit review, quality, compliance and testing of results. Changes continue until all points are accepted and the next audit cycle begins, recording inconsistencies or deficiencies in the audit. To print something like that in audit circumstances may arise where the facts indicate that the quality management system has partially or completely failed, a condition called non-conformity of recording non-conformations / deficiencies. Adverse conditions for quality of pharmaceutical. What is non-conformity ? Requirements not met due to 1) Procedure / Defined process does not conform. 2) The procedure /

procedure in the described route process not actually brought. 3) Practice, what is actually done is not effective (planned results have not been achieved). Non-conformity statement must be in the format. Most of the time it should be done. This requirement alone defines certain rules for non-conformity recordings.(3)

### **The importance of quality assurance training-**

If the drug does not work as intended / defective, it can be considered a safe health hazard. All pharmaceutical companies must strive to ensure that all drugs produced are free of contaminants and achieve their intended purpose. This is an example, of which, when in contact with various conditions, of medicine Measures how different properties change. For this, it is important to train employees to create quality assurance and safe, effective products. It is also the responsibility of the pharmaceutical industry to provide timely information and training on legal matters. And helps in their development. As well as the reputation of the factory It does not cause harm, so it does not have to pay heavy fines and other penalties. In today's computer age, cloud server is a powerful physical / virtual infrastructure. Training is essential to store applications and information processing. With this training the remote interface is virtual tasks can access server functions remotely. It is used by organizations as an infrastructure to process work and store information. It is equally important to train assistants to increase the efficiency of their work. Over all the above trainings, efficiency, safety, productivity, ethics, pharmaceutical production, legal information related to certification, promotion of legal information is the most important in quality assurance.

### **The benefits of quality assurance -**

Pharmaceutical factory quality assurance is an important part. In that there are many advantages. For this, there are many objectives of quality assurance for the pharmaceutical

**Chart 1****Foundation of business work culture**

Enhances reputation of  
pharmaceutical industry

Intimacy of customers  
/ Employees for factory

Increases long term profit  
of the factory



Saves time/ money

**Benefits of quality assurance**

Expectations are created  
In production

Positive effect on  
employee

Productivity/service  
improvement

factory. Which must be met. Which will increase the quality of the medicine. **The benefits of quality assurance are as follows:** Pharmaceutical manufacturing can be the foundation of the work culture of the business. Expectations are created in production of medicine. It has positive effect on employees, it leads to. This saves time and money. It increases the long-term profit of the factory. This increases the intimacy of customers and employees towards the factory. This enhances the reputation of the pharmaceutical industry. The figure below shows the benefits of quality assurance. (See Chart 1)

**Mistakes in drug production** - Reasons for errors in drug production are as below no written procedure/ Written procedure is not followed. The drug manufacturer is not trained / completed by him. Not all tests are followed when producing a drug, individual responsibilities are unclear. Mistakes can happen during the process. Once the root cause of the mistakes is identified, steps can be taken to take corrective action. However, if basics such as quality control are not met, environmental quality assurance (EAQ), failure to calibrate equipment maintenance, old/damaged reagents, improper storage of reagents, temperature problems (room temperature), quality assurance is not ensured. Quality Medicine for (QUAMED) is a non-profit membership organization. Experience in quality medicine for all shows that the

World Health Organization (WHO) Comprehensive Quality Assurance System (WHOCQAS) can help evaluate drug distributor quality assurance systems. Hopefully it will support their improvement. There is still a long way to go for effective harmonization of drug regulation around the world, which cannot be achieved without substandard drugs. But in the face of the global challenge of low-quality drugs, we cannot live without solutions. (8) It refers to improvements in the organization's process to reduce unwanted situations such as non-conformity of word production. Commonly used in the context of quality assurance. It is an acronym for corrective action and preventive action. It is a system for analyzing, correcting and preventing problems.

**Inferior drugs pose a potential threat to public health** - Poor quality drugs pose serious public health problems, especially in emerging economies and developing countries, which can have a significant impact on the national clinical and economic burden. There has been a deliberate focus on increasing availability of counterfeit drugs, but substandard drugs are also reaching patients due to poor production and quality-control practices in the production of genuine drugs (either branded / generic). Inferior drugs are widespread and represent health hazards, as they can inadvertently lead to healthcare failures, such as antibiotic resistance and the

spread of the disease in the community, as well as increasing mortality /additional illness among individuals. The publication of Johnston and Holt (2014) examines various aspects of this inferior drug formulation. (9) which may arise (e. g. pharmacological variability in the drug unit / generic and promotional drugs, incorrect dosage of drugs, presence of generics and impurities). Possible means of resolving inferior production methods are also discussed. The government, drug manufacturers, charities and health care providers need to work together to ensure that only medicines of acceptable quality reach the patient. (9)

**Process Analytical Technology (PAT)** - Process analytical technology is an innovative design that provides information on the development, production, and quality assurance of pharmaceuticals. All critical sources of variability must be identified. Measures must be managed for variability. Product quality can be accurate and reliable. Environment and other conditions. With a view to ensuring the quality of the final product, a system that designs, analyzes and controls the quality of raw materials and processes in a timely manner to measure the quality and efficiency of the process. Serious quality of raw and processed materials and pharmaceutical production through the measurement of performance properties, the idea of which is to become more efficient while minimizing excess. Process analytical technology guides in processing, increasing efficiency and reducing waste. Mathematics, current pharmacology, medicine, chemical engineering, involves risk analysis. Integrated Process Analytical technology aims to enhance and control product perception, which is consistent with our current drug quality system. The quality cannot be tested. Products should be built/ designed.

**What are the benefits of processing analytical technology to pharmaceutical factories?** For

manufacturers of biotechnology, food, veterinary medicine, and chemicals, continuous action can greatly increase productivity and product quality. Other benefits include simultaneous processing, robustness, continuity, and benefits.

**Risk Analysis and Critical Control Point (HACCP)** - In the field of medicine, the risk analysis and critical control point approach emphasizes the risks. With the broad objective of ensuring that pharmaceutical products are safe to use, as the production of pharmaceutical products is related to safety for health. Risk Analysis and Critical Control Point Methods for quality control by detecting, evaluating, monitoring and certifying critical processes and working processes in the manufacture of pharmaceutical products. Principles of risk analysis and critical control points are as follows: Risk analysis, determination of critical control points, creation of critical limits, monitoring system, corrective measures, verification, record keeping. (10)

**The advantages of risk analysis and critical control point are as follows :** 1) The safety of drug, safety in quality of risk analysis and use of critical control point for specific purpose. In addition to increasing, there is a need to improve the use of measures on security issues and quick fixes. 2) Risk analysis and critical control point plan is specially formulated for the given product and method of use. Changes in technological advancement / use techniques can be accommodated through risk analysis and critical control point systems. 3) Consumers are the primary beneficiaries because of the assurance of system security products 4) Risk analysis and critical control points reduce the number of laboratory tests of the required product, reduce the number of non-compliant products, also reduce the sample plan required to control the process. 5) Improved awareness and training can reduce working errors by humans. 6) Risk analysis an

using a critical control point design framework can lead to enhanced process control, increased staff loyalty, and reduced failure. 7) Increases customer confidence and reduces the likelihood of recall. This reduces the cost of production. 8) Risk analysis and critical control points can help in regulatory institutional investigation. Mainly on the safety of drugs as they are documented and recorded Increases trust promotes international trade and also promotes factory stability. (10) 9) Improving the efficiency of the quality system by avoiding problems without relying on the finished product test by emphasizing the critical parts in the process of risk analysis and critical control points. (11, 12, 13, 14)

**Summary** - Quality assurance is the sum of many organizations in the field of pharmaceutical manufacturing. To ensure that the system will be a product of its purpose, there needs to be the quality assurance required for their desired use. In the case of pharmaceutical products, quality assurance means "trust is good, control is best." Priorities in medicine without assuring quality are related to health needs, and they Quality, safety and efficacy, meeting acceptable standards of any health, the service is clearly compromised. Extensive administrative and technical efforts are made in developing countries to ensure that patients benefit effectively. Good quality medicines, bringing a reliable system of drug control within the reach of every country is important for the health purpose of all.

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## Yavagus For Pain Management

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Pain manifests as a symptom of many diseases. Lots of words like Shula, Ruk, Ruja, Vedana, Vyatha, Arti etc. which denote pain are mentioned as synonyms of each other in the Ancient Classical Texts. Each one of these words has a specific meaning as well.

'Shula' is described as an Upadrava of Gulma in Sushruta Samhita. It's treatment is also prescribed there itself.

'Shula' occurring at the sites of Gulma in the absence of 'Gulma' is also described with Nidan and Chikitsa in Sushruta Samhita and Madhav Nidan. Bubhuksha-prabhav-shula, Parshwa-shula, Kukshi-shula, Hrut-shula, Basti-shula, Mutra-shula, Vid-shula, Annadosha-samudbhava-shula are some other Shulas described in Sushruta Samhita. 'Shula-Parinamshula-Annadravshula-Nidanam' is a separate chapter in Madhav Nidan.

Pain can be Chronic or Acute. Pain can be mild, moderate or intense. Pain can be described using words like 'Toda', 'Bheda', 'Vyadha', 'Ruk', 'Shula' etc. which denote specific meanings.

Pain (Ruja) is caused mainly by Vata and Agni. Some assume it to be Pachabhautik. रुजाकराण्यग्निवायुगुणभूयिष्ठानि, विशेषतश्च तौ रुजाकरौ; पाञ्चभौतिकौ च रुजामाहुरेके।। सु.शा.६/१६

Vata is mostly predominant among the causative factors of any type of pain.

सर्वेष्वेतेषु शूलेषु प्रायेण पवनः प्रभुः।। माधव निदान

Vata and Shula have a cause and effect relation in them. Whenever Vata is vitiated it gives rise to Shula. Hence it is said that Shula is nothing but vitiated Vata. There is as if oneness in the duo.

....शूलं च विगुणोऽनिलः।। अ.ह.वि...९/४५

कुपितश्चेद्वायुरुत्पन्नमेव शूलमित्यर्थः। सर्वाङ्गसुन्दर

Vata is 'Ashukari' (quick, fast acting). Hence, while treating Shula (and other Vataj diseases) treatment for vitiated Vata should be implemented with topmost priority.

शूलानां लक्षणं प्रोक्तं चिकित्सां तु निबोध मे।

आशुकारी हि पवनस्तस्मात् त्वरया जयेत्।। सु.उ. ४२/८८

Yavagus can be used effectively for various pains arising at various sites. Yavagus being Vatanuloman can be chosen for pain management.

Four Yavagus out of the twenty-eight Yavagus are prescribed for various pains viz.

- 1) Pippalyadi Yavagu - for pain mainly in Koshtha in Atisar, Grahani, Ajeerna etc., pain at the sites of Gulma in presence or absence of Gulma.
- 2) Shwadamshtadi Yavagiu - for painful micturition, Pain at urinary bladder, penis etc.
- 3) Madirasiddha Yavagu - for pain in Pakvashaya.
- 4) Tamrachudararasiddha Yavagu - for pain in male genitalia.

### 1) Pippalyadi Yavagu -

पिप्पलीपिप्पलीमूलचव्यचित्रकनागरैः।

यवागूर्दीपनीया स्याच्छूलघ्नी चोपसाधिता।। च.सू.२/१८

Yavagu prepared with Pippali, Pippalimul, Chavya, Chitrak and Nagar kindles digestive fire (Agni Deepan) and alleviates pain (Shulaghna).

Pippalyadi Yavagu can be effective for alleviating pain mainly in Koshtha in Atisar, Grahani, Ajeerna and at the sites of Gulma in presence or absence of Gulma.

The attributes of the ingredients of this Yavagu (Panchakol) and attributes of the Yavagu itself are mentioned in the 3rd article in the series namely 'Pippalyadi Yavagulu

Clinical Practice'. Readers may please refer to the article.

**Atisar** - Pain is a symptom of all types of Atisar. But the pain in Vataj Atisar is intense. In Vataj Atisar, the obstructed Vata while moving in various directions in Antah Koshta gives rise to Shula and gurgling sound. Parikartika i.e. cutting pain is also one of the symptoms of Vataj Atisar.

तस्य रूपाणि-विज्रलमामं विप्लुतमलसादि रुक्षं द्रवं सशूलमामगन्धमीषच्छद्रमशङ्खं वा विबद्धमूत्रवातमतिसार्यते पुरीषं, वायुश्चान्तःकोष्ठे सशूलशूलस्तिर्यकं चरति विबद्ध इत्यामातिसारो वातात् ॥ च.वि. १९/५ (अतिसार)

.....तत्र वातेन विड्जलम्॥

अल्पाल्पं शद्धशूलाढ्यं विबद्धमुपवेश्यते।

.....सपिच्छपरिकर्तिकम्। अ.ह.नि. ८५/७ (अतिसार)

The first step in the treatment course of Atisar is ignoring i.e. letting the Malas which are getting expelled out without any effort go out. Much of the pain subsides once the Doshas are expelled out. Then Langhana or Pachan should be implemented as per the requirement. Then once the patient feels hungry Yavagus prepared with Deepan and Grahi medicines should be offered. Pippalyadi Yavagu is an apt one for Agni deepan and Shula prashaman. It can alleviate the pain which may be remaining after Langhana or Pachan. Panchakol is Deepan and Shulaprashaman. Yavagu is Vata-anuloman. Hence Pippalyadi Yavagu can prove to be helpful for the purpose.

**Garhani** - Pain is predominant in Vataj Grahani. Continuous pain at Parshwa, thighs, groins and neck is present. The defecation is painful with pain at anus. Shodhan, Langhan and Pachan should be implemented taking in to consideration the condition of the disease and the patient. Then Yavagu prepared with Panchakol should be offered. This Yavagu is Agni deepan, Grahi and Vata-anuloman. It is helpful for alleviating the remaining pain if any.

**Gulma** - Pain is there in Vataj, Pittaj and

Kaphaja Gulmas. It is predominant in Vataj Gulma. Pain at Hruday, Kukshi, Parshwa, Basti, Nabhi, Amsa, and Shira is a symptom of Vataj Gulma. The pain is indefinite. Sometimes it is intense and sometimes mild. It aggravates at the end of digestion.

While treating Gulma, Yavagus, Yushas, Khadas should be used for pachan and Agni deepan if Ama still remains after implementation of Langhana. Once Agni is kindled Gulma decreases and subsequently the pain subsides.

आमान्वये तु पेयाद्यैः सन्धुक्ष्याग्निं विलङ्घिते॥

स्वं स्वं कुर्यात्क्रमं मिश्रं मिश्रदोषे च कालवित्। अ.ह.वि. १४/१८-१९९

आमान्वये पित्तगुल्मे सामे वा कफवातिके।

यवागूभिः खडैर्युषैः संधुक्ष्योऽग्निर्विलङ्घिते॥

शमप्रकोपौ दोषाणां सर्वेषामग्निंश्रितौ।

तस्मादग्निं सदा रक्षेत्रिदानानि च वर्जयेत् ॥ च.वि. ५/१३५-१३६

**Ajeerna** -

चित्रकचविकानागरमागधिकाग्रयवागूः स्यात्।

गुल्मानिलशूलहरी चित्राद्या वह्निजननी च॥ योगरत्नाकर (अजीर्ण)

A similar Yavau is mentioned in Yogaratnakar. Only Pippali is excluded from the ingredients. This Yavagu is said to kindle Agni and be effective in Gulma and Vataj Shula.

The apt condition for implementation of this Yavagu is when patient feels hungry after Langhana and Pachan.

**2) Shwadamshtadi Yavagu -**

धदंष्ट्राकण्टकारिभ्यां मूत्रकृच्छ्रे सफाणिताम्॥ च.सू. २/२२

Yavagu prepared with Shwadamshtadi and Kantakari along with Phanita added to it at the end is recommended for Mutrakruchchhra.

The same Yavagu is mentioned as a remedy for all types of Mutraghata / Mutrakruchchhra in Ashtanga Sangraha and Ashtanga Hruday. (Vraghri is the synonym of Kantakari.)

व्याघ्रीगोक्षुरकक्राथे यवागूं वा सफाणिताम्।

क्राथे वीरतरादेर्वा ताम्रचूडरसेऽपि वा ॥ अ.ह.वि. ११/३८

(सर्व मूत्राघात-सामान्यप्रयोग)

गोक्षुरककण्टकारिकृतां वा सफाणितां यवागूमू।

ताम्रचूडरससिद्धां वा। वीरतरादिक्राथेन वा। अ.सं.वि. १३/१४

(सर्व मूत्राघात - सामान्यप्रयोग)

It is not directly mentioned here that this Yavagu is effective for relieving pain. But it is obvious from the word 'Kruchchhra' that there is pain related to micturition and this Yavagu can be effective for relieving this pain.

मूत्रकृच्छ्रं दुःखेन मूत्रप्रवृत्तिः। सु.उ. ५९/१ (निबन्धसंग्रह)

The Doshas vitiated at Basti affect Mutramarga badly and thus micturition is difficult and painful for the patient.

पृथङ्मलाः स्वैः कुपिता निदानैः सर्वेऽथवा कोपमुपेत्य बस्तौ।

मूत्रस्य मार्ग परिपीडयन्ति यदा तदा मूत्रयतीह कृच्छ्रात्॥

च.वि. २६/३३

Intense pain is there in Vataj Mutra kruchchhraat groins, Basti and penis. Pain is associated with burning sensation and haematuria in Pittaj Mutrakruchchhra. Pain is there at penis, Sevani and Basti in Mutrakruchchhra caused by Shukrashmari. Pain occurs at groins, Basti, penis and scrotum as a result of obstructing or holding the urge for ejaculation. Obstructing the urge for micturition results in bodyache, Ashmari and pain in Basti, penis and groins.

Shwadamshtadi Yavagu can prove effective for alleviating pain in all abovementioned conditions.

#### Attributes of Gokshur -

Rasa - Madhura Veerya- Sheeta.

It pacifies Vata and Pitta. It is Basti-shodhan. It is a remedy for Ashmari and Mutra kruchchhra.

#### Attributes of Kantakari -

Rasa - Katu, Tikta Veerya - Ushna

It pacifies Vata and Kapha. It relieves Jwara, Kasa, Shwas, Parshwa-shula etc.

**Attributes of Phanita** - It is Guru, Abhishyandi and Chayakrut It i.e. causative for accumulation of all three Doshas. It is Mutras-shodhan.

**Attributes of Shwadamshtadi Yavagu** - It pacifies all three Doshas, predominantly Vata. It is Vata-anuloman, Basti-shodhan, Mutrashodhan and Balya, Hence it is a remedy for all types of Mutrakruchchhras and the pain

at abovementioned sites associated with difficult micturition.

पेयां वा रक्तशालीनां पार्श्वबस्तिशिरोरुजि॥

श्वदंष्ट्राकण्टकारिभ्यां सिद्धां ज्वरहरां पिबेत्। च.वि. ३ १८१-१८२ (ज्वर)

बस्तिपार्श्वशिरःशूली व्याघ्रीगोक्षुरसाधिताम्। अ.ह.वि. १/२० (ज्वर)

बस्तिपार्श्वशिरःशूली व्याघ्रीगोक्षुरसाधिताम्। अ.ह.वि. १/२६-३४ (ज्वर)

A similar Yavagu is prescribed for pain at Basti, Parshwa and Shira occurring in Jwara.

The only difference is that Phanita is not included in the ingredients. This Yavagu is recommended for pain in Basti, Parshwa and Shira in Jwara and not for Mutrakruchchhra. Phanita is Mutrashodhan and does not serve much purpose for this specific condition. Also, Phanita being Guru, Abhishyandi and 'Chayakrut', is contra-indicated in Jwara.

#### 3) Madirasiddha Yavagu -

यमके मदिरासिद्धा पक्वाशयरुजापहा॥ च.सू. २/२७

Yavagu prepared with Yamak Sneha and Madira alleviates pain in Pakvashaya.

In later stages of Atisar, the Ama is digested properly, Agni is kindled and quantity of Purish decreases considerably. As a result, Vata vitiates and makes Kapha and Pitta come out of their sites. The patient repeatedly defecates small portions of slimy and foamy material with little faeces or without faeces. The defecation is painful with pain in Koshtha, आमे परिणते यस्तु विबद्धमतिसार्यते।

सशूलपिच्छमल्पत्वं बहुशः सप्रवाहिकम्॥ च.वि. १९/३०

Vata vitiates when quantity of faeces in Pakvashaya decreases. The vitiated Vata as if encircling or twisting the intestines moves in the abdomen and goes in upward direction painning Hrudaya and both the Parshwas. Severe spasmodic pain in Koshtha is experienced by the patient.

पुरीषे वायुरन्त्राणि सशद्धो वेष्टयन्निव।

कुक्षौ भ्रमति यात्यूर्ध्वं हृत्पार्श्वं पीडयन् भृशम्॥ वा.सू. ११/२१

Pakvashaya is the site of Vata. Hence vitiation of Vata at its own site is severe. Obviously the pain is intense. This condition and the pain need to be attended urgently.

Sneha, especially Tail is the best for

pacifying Vata. Various medicated Tailas have been prescribed for oral administration and Anuvasan Basti.

However sometimes single sneha may not be enough for pacifying severely vitiated Vata at its own site. Hence Yamaksneha is recommended for this condition. Yamaka Sneha is recommended in various combinations viz. with Curds, Milk, sour fruits, Sura etc.

#### Attributes of Madira -

हिक्काश्वासप्रतिश्यायकासवर्चोग्रहारुचौ।

वम्यानाहविबन्धेषु वातघ्नी मदिरा हिता॥ च.चि. २७/१८०

मदिरा तु सुरामण्डः। आयुर्वेददीपिका शालिपिष्टकृतं मद्यं

सुरा। अ.ह.सू. आयुर्वेद रसायन

Madira comes under Madyavarga. It is a type of liquor. It is the upper clear part of Sura. Liquor prepared from rice flour is Sura.

Madira pacifies Vata. It is Teekshna. Hence it is Vibandhanashan. It eliminates the Kapha accumulated in the Koshtha/Pakvashay.

Madirasiddha Yavagu pacifies Vata, eliminates the Doshas accumulated in Pakvashaya and streamlines the flow of Vata (Vata-anuloman) in Koshtha. Thus alleviates the pain.

#### 4) Tamrachudarasasiddha Yavagu -

ताम्रचूडरसे सिद्धा रेतोमार्गरुजापहा। च.सू. २/३२

Yavagu prepared in Chicken soup alleviates pain in the route of passage of Shukra.

The pain in the route of passage of Shukra arises in two conditions viz. due to obstruction to the Shukravega (urge for ejaculation) and due to Ashmari obstructing the path of urinary flow.

Pain and swelling at penis and scrotum, body ache, Jwara, pain at Hruday, obstruction to the flow of urine and Ashmari take place as a result of obstructing the Shukravega.

मेद्रे वृषणयोः शूलमङ्गमर्दो हृदि व्यथा।

भवेत् प्रतिहते शुक्रे विबद्धं मूत्रमेव च॥ च.सू. ७/१०

शुक्रात्तत्सवर्णं गुह्यवेदनाक्षयथुज्वरः।

हृद्यव्यथामूत्रसङ्गभङ्गवृद्ध्यश्मषण्डताः॥ अ.ह.सू. ४/९-२०

Pain occurring as a result of Vataj, Pittaj and Kaphaj Ashmari or Shukrashmari manifests at Basti, penis and Sevani. Pain in penis is severe. Flow of urine is divided in many streams. Haematuria may take place owing to the internal injury because of the Ashmari.

Tamrachudarasasiddha Yavagu dose not only alleviate the pain in the path of passage of Shukra but is a cure for all Muraghatas and Ashmaris, especially Shukrashmari.

व्याघ्रीगोक्षुरकक्राथे यवागूं वा सफाणिताम्।

क्राथे वीरतरादेवी ताम्रचूडरसेऽपि वा॥

अ.ह.चि. ११/३८ (सर्व मूत्राघात-सामान्यप्रयोग), अश्मरी

गोक्षुरककण्टकारिकृतां वा सफाणितां यवागूम्।

ताम्रचूडरससिद्धां वा। वीरतरादिक्राथेन वा।

अ.सं.चि. १३/१४ (सर्व मूत्राघात-सामान्यप्रयोग), अश्मरी

Attributes of Kukkutamamsa (Chicken) have already been mentioned in the 8<sup>th</sup> Article i.e. Mamsarasa siddha YavagusIn Clinical Practice. Some are revised here.

Kukkutamamsa is Snigdha, Ushna, Vrushya, Brumhana, Svarabodhana, Balya, highly Vata pacifying and Svedana.

स्निग्धाश्चोष्णाश्च वृष्याश्च बृंहणाः स्वरबोधनाः॥

बल्याः परं वातहराः स्वेदनाश्चरणायुधाः। च.चि. २७/६६-६७

With holding urges of Adhovata (farting), Purisha (defaecation), Mutra (Micturition), Shukra (Ejaculation) results in vitiation of Vata. Vitiated Vata gives rise to pain at the abovementioned sites. Treatment for Vata anuloman and pacifying Vata is necessary. Manasa rasas pacify Vata. Yavagu is Vata anuloman. Chicken pacifies Vata and is Vrushya. It is very much obvious that Yavagu prepared in chicken soup is a remedy for abovementioned conditions and thus it alleviates the pain.

It is clear from these examples that Yavagus can be effectively implemented for many types of pain arising at various sites. They can potentially be used for mild, moderate and even severe pain needing treatment on emergency levels.



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



## Pilot Study Of Comparative Study Of Mashadi Lepa With Indravaruni Beej Tail Shiroabhyanga In The Management Of Palitya

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**Introduction** - Ayurveda is a science which not only gives knowledge about disease but also helps you with how to live a healthy life by following ayurveda in day to day life. People are looking toward ayurveda not only for providing remedy for major disease but also for enhancing looks and beauty. The hair has a tendency to lose its natural colour with advancing age. Hence gray hair is natural during old age.

क्षीयमाण धात्विन्द्रियबलवीर्योत्साहमन्यहनि वलिपलित खालित्यजुष्टं कासश्वासप्रभृतिभिपद्रवैः अभिभूयमानं सर्वं क्रियास्वसमर्थं जीर्णागारमिवाभिवृष्टमवसीदन्तं वृद्धमाचक्षते॥ सु.सू. ३५/३६

Now a days, premature graying of hair i.e. Palitya is also being seen in school going children. This makes a person looks older. In this age where looks matter not only personality but also professionally. This causes a great deal of concern in affected person. Ayurveda has a detailed study about dosha dushya and mala and how they are interconnected to each other, any abnormality in any of these leads to various diseases. Some of these disease are enlisted as Kshudrarogas in ayurveda; "Palitya" is one of the disease from the kshudraroga. Palitya has been included in shiroroga by charakacharya<sup>1</sup> and vagbhattacharya<sup>2</sup> and in Kshudraroga by sushrutacharya<sup>3</sup>. Charkacharya has described Palitya as Rasapradoshaj<sup>4</sup> vyadhi and lavanarasdhikya<sup>5</sup> sevan janit vyadhi.

समासेन चतुश्चत्वारिंशतम् क्षुद्ररोगनिदानम्....पलितम् (सु.नि. १३ / क्षुद्ररोगनिदानम्)

In yogaratnakar<sup>6</sup> and madhav nidan<sup>7</sup> palitya has been included in the kshudraroga. Inclusion in Shiroroga has been done on the basis of 1) Sthana<sup>8</sup> i.e. location of disease, 2) similarity of the etiopathogenesis of the disease under shiroroga. Acharya Vagbhatta has clearly mentioned that nine diseases occurring on the

outer part of head over the scalp should be called Shiroroga<sup>9</sup>.

शिरस्येव च वक्ष्यन्ते कपाले व्याधयो नवः॥२०॥

वा.उ. २४/२० (शिरोरोगविज्ञानम्)

In ancient days beautiful Hair were considered as a jewel and had very much importance. Now a days, according to survey<sup>10,11</sup> 50% of population have 50% graying of hair by the age of 50yrs. Now a days graying of hair is very common and a burning issue as people are very much concerned about their presentation in public.

प्रमाणमायुर्वेदे। प्रयोजनं चास्य स्वास्थ्यक्षणात्प्रसूतस्य विकारप्रशमनम् च॥ च.सू. ३०/२६ (अर्थदशमहामूलीय)<sup>12</sup>

In Ayurveda there is a solution for graying of hair without any side-effects. In Vagbhata Uttarsthan Shirorogapratisheḍa Adhyaya<sup>13</sup>, they have mentioned various lepas for Palitya i.e. premature graying of hair<sup>14</sup>. These lepas do not contain ammonia like modern hair dye and is very cheap compared to hair colour. It can be easily used so that we can use it in routine life माषकोद्रवधान्याम्लैर्यवागूस्त्रिदिनोषिता॥४३॥

लोहशुक्लोत्कटा पिष्टा बलकामपि रज्जयेत्॥ (वा.उ. २४. शिरोरोगप्रतिषेधम्)

So not only for quantity of life but also for good quality of life<sup>15</sup> Ayurveda helps us. The hair dye available in market may have adverse effect on our body to avoid this we can use herbal Ayurvedic Mashadi Lepa which gives us good quality to our hair and maintain its colour without any side effects. Hence the research topic is Pilot study of Comparative study of Mashadi lepa with Indravaruni Beej Tail Shiroabhyanga in Palitya.

### Hypothesis -

- **Null Hypothesis** - Mashadi lepa is equal to Indravaruni Beej Tail Shiroabhyanga in treating Palitya.
- **Alternative Hypothesis** - Mashadi lepa is

superior /inferior to Indravari Beej Tail Shiroabhyanga in treating Palitya.

**Aim** - Pilot study of Comparative study of MASHADI LEPA with INDRAVARUNI BEEJ TAIL 16 Shiroabhyanga in the management of PALITYA.

**Objectives** - 1) To compare the effect of MASHADI LEPA with control group of Indravari Beej Tail Shiroabhyanga in the management of PALITYA. 2) To document and observe the effect of MASHADI LEPA in signs and symptoms of PALITYA. (Ruksha, sphutit, Keshavarna, Snigdhashthul, Daha)

**Purpose Of Selection -**

- High incidence of Palitya.
- Intolerance to Chemical Hair dye.
- Decrease in the quality of life due to excess use of chemicals.
- Increasing social stigma related to early graying of hair.

**Literature Review - • Nidana Of Palitya -**

धूमात्पतुषाराम्बुकीडातिस्वप्नजागरैः।

उत्स्वेदाधिपुरोवातबाष्पनिग्रहरोदनैः॥११॥

अत्यम्बुमद्यपानेन कृमिभिर्वेगधारणैः।

उपधानमृजाभ्यङ्गद्वेषाधः चतुर्दशैः॥१२॥

असात्म्यगन्धदुष्टामाभ्याद्यैः च शिरोगताः ॥

जनयन्त्यामयान् दोषाः.....॥ वा.उ. २३/१-२ (शिरोरोगविज्ञानम्)

**• Samprapti Of Palitya -**

शोकश्रमक्रोधकृतः शरीरोष्मा शिरोगता।

केशान् सदोषः पचति पलितं सम्भवत्यतः॥२९॥

वा.उ. २३/२९ (शिरोरोगविज्ञानम्)

तेजोऽनिला सह केशभूमिः.....।

किंचित् दग्ध्वा पलितानि कुर्यात् हरिप्रभत्वं च शिरोरुहाणाम्

॥१३२॥ च.चि. २६ (त्रिमूर्त्यधिकित्सितम्)

**• Chikitsa -**

माषकोद्रवधान्याम्लैर्यवागूस्त्रिदिनोषिता ॥४३॥

लोहशुक्लोत्कटा पिष्टा बलकामपि रज्जयेत्॥ (वा.उ. २४. शिरोरोगप्रतिषेधम्)

**Materials And Methods - • Detailed Research**

**Plan - • Level I** - The conceptual review of the subject as per ancient and current theories; i.e. the thorough review of

a) Classical Ayurvedic literature b) Modern literature c) Use of information available on internet. d) Previous work done by the scholars.

**• Level II** - Generation of data on the basis of standardization and quality control.

This part of project consists of : 1) Standardization of ingredients of Mashadi lepa as per pharmaceutical standards and it's preparation.

2) Quality control : i) Selection of best sample by a battery of organoleptic parameters.

ii) Establishment of standard criteria using best sample as baseline with range of standard errors i.e. 95% confidence limit.

**• Level III - Clinical trial** : a) Pilot study on patients of Palitya to determine sample size, actual clinical dosage and schedule for phase II. b) Phase II- Open clinical trial (Before and after study).

**• Material : 1) Experimental Group : i) Drug** : Mashadi Lepa **ii) Method of Preparation** : Referring standard textual method of lepa **iii) Kala** : day **iv) Duration of Trial** : 40 days

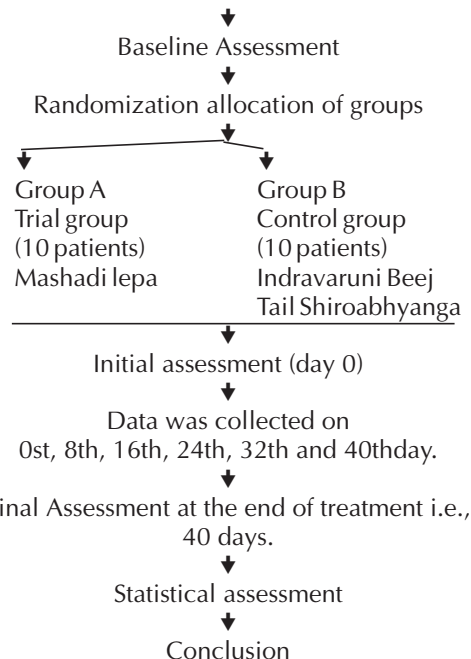
**2) Control Group : i) Drug** : Indravari Beej Tail Shiroabhyanga **ii) Method of Preparation** : Standard preparation available **iii) Kala** : day **iv) Duration of Trial** : 40 days

**• Standardization** - Standardization of material will be done in 3 stages : 1) Raw material 2) In process 3) Finished product.

**• Study Design -**

Level III / Phase II:- Randomised Single Blind Standard Controlled Trial

Written informed consent of patient will be taken



**1) Place of Work** : i) Tilak Ayurveda Hospital and

### Observation -

| Ruksha Sphutit | Median |    | Wilcoxon Signed Rank W | P-Value | % Effect | Result      |
|----------------|--------|----|------------------------|---------|----------|-------------|
|                | BT     | AT |                        |         |          |             |
| Group A        | 3      | 1  | -2.762a                | 0.006   | 55.6     | Significant |
| Group B        | 3      | 2  | -2.646a                | 0.008   | 25.0     | Significant |

Since observations are on ordinal scale, we have used Wilcoxon Signed Rank Test to test efficacy in Group A and Group B. From above table we can observe that P-Values for Group A and Group B are less than 0.05. Hence we conclude that effect observed in both groups are significant.

| Keshavaran | Median |    | Wilcoxon Signed Rank W | P-Value | % Effect | Result      |
|------------|--------|----|------------------------|---------|----------|-------------|
|            | BT     | AT |                        |         |          |             |
| Group A    | 3      | 2  | -2.919a                | 0.004   | 44.8     | Significant |
| Group B    | 3      | 2  | -3.000a                | 0.003   | 31.0     | Significant |

Since observations are on ordinal scale, we have used Wilcoxon Signed Rank Test to test efficacy in Group A and Group B. From above table we can observe that P-Values for Group A and Group B are less than 0.05. Hence we conclude that effect observed in both groups are significant.

| Snighdhsthul | Median |    | Wilcoxon Signed Rank W | P-Value | % Effect | Result      |
|--------------|--------|----|------------------------|---------|----------|-------------|
|              | BT     | AT |                        |         |          |             |
| Group A      | 3      | 1  | -2.859a                | 0.004   | 65.4     | Significant |
| Group B      | 3      | 2  | -2.810a                | 0.005   | 37.9     | Significant |

Since observations are on ordinal scale, we have used Wilcoxon Signed Rank Test to test efficacy in Group A and Group B. From above table we can observe that P-Values for Group A and Group B are less than 0.05. Hence we conclude that effect observed in both groups are significant.

| Daha    | Median |    | Wilcoxon Signed Rank W | P-Value | % Effect | Result      |
|---------|--------|----|------------------------|---------|----------|-------------|
|         | BT     | AT |                        |         |          |             |
| Group A | 3      | 0  | -2.859a                | 0.004   | 82.8     | Significant |
| Group B | 3      | 2  | -2.859a                | 0.004   | 50.0     | Significant |

Since observations are on ordinal scale, we have used Wilcoxon Signed Rank Test to test efficacy in Group A and Group B. From above table we can observe that P-Values for Group A and Group B are less than 0.05. Hence we conclude that effect observed in both groups are significant.

| Greying of Hair | Median |      | Wilcoxon Signed Rank W | P-Value | % Effect | Result      |
|-----------------|--------|------|------------------------|---------|----------|-------------|
|                 | BT     | AT   |                        |         |          |             |
| Group A         | 30     | 12.5 | -2.692a                | 0.007   | 39.1     | Significant |
| Group B         | 45     | 35   | -2.739a                | 0.006   | 15.4     | Significant |

Since observations are on ordinal scale, we have used Wilcoxon Signed Rank Test to test efficacy in Group A and Group B. From above table we can observe that P-Values for Group A and Group B are less than 0.05. Hence we conclude that effect observed in both groups are significant.

|                | Group   | N  | Mean Rank | Sum of Ranks | Mann-Whitney U | P-Value |
|----------------|---------|----|-----------|--------------|----------------|---------|
| Ruksha Sphutit | Group A | 10 | 13.60     | 136.00       | 19.000         | 0.011   |
|                | Group B | 10 | 7.40      | 74.00        |                |         |
|                | Total   | 20 |           |              |                |         |
| Keshavaran     | Group A | 10 | 12.35     | 123.50       | 31.500         | 0.045   |
|                | Group B | 10 | 8.65      | 86.50        |                |         |
|                | Total   | 20 |           |              |                |         |
| Snighdhsthul   | Group A | 10 | 12.80     | 128.00       | 27.000         | 0.031   |
|                | Group B | 10 | 8.20      | 82.00        |                |         |
|                | Total   | 20 |           |              |                |         |
| Daha           | Group A | 10 | 13.30     | 133.00       | 22.000         | 0.024   |
|                | Group B | 10 | 7.70      | 77.00        |                |         |
|                | Total   | 20 |           |              |                |         |

|                 |         |    |       |        |        |       |
|-----------------|---------|----|-------|--------|--------|-------|
| Graying of Hair | Group A | 10 | 12.00 | 120.00 | 35.000 | 0.048 |
|                 | Group B | 10 | 9.00  | 90.00  |        |       |
|                 | Total   | 20 |       |        |        |       |

Research Center, Pune. **2) Nature of Trial :** Open labeled comparative study. **3) Sample Size :** 10 patients in Experimental group and 10 patients in Control group will be selected randomly. **4) Informed Consent :** was taken.

#### ● Selection Of Patients :

**a) Inclusion Criteria :** i) Patients with of signs and symptoms of PALITYA were included (Ruksha sphutit, Keshavarna, Snigdhashthul, Daha). ii) Patients of either gender were selected with age group 18 to 40 yrs.

**b) Exclusion Criteria :** i) Sannipatik or tridoshaj Palitya ii) Garbhinijanya Palitya iii) Patient with severe systemic disorders and surgical illness. iv) Patients taking any form of the nutritional supplement, cytostatic drug, and rogens or hormonal contraceptives with some androgenic effect v) Patient with other skin and hair disorders. vi) Patients <18 years and >40 years will be excluded.

**c) Withdrawal Criteria :** The patient was withdrawn from the trial if there was,

- Occurrence of serious adverse events.
- The investigator felt that the protocol had been violated / patient had become in-cooperative.
- The patient was not willing to continue the trial / to follow the assessment schedule. Thus selected patients were divided in two groups.

**d) Sampling method :** Random selection by block sampling method with the allocation.

ratio of 1:1 **a) Experimental Group (Group A) :** MASHADI LEPA 10 patients **b) Control Group (Group B):** Indra varuni beej Tail Shiroabhyanga 10 patients.

● **Treatment Protocol:** 1) Group-A (Experimental)

- **Drug :** Mashadi lepa. **Time of administration :** diva. **Duration :** 40 days. **2) Group -B (Control)-Drug :** Indravaruni Beej Tail. **Time of administration :** diva. **Duration :** 40 days. (See Observation Tables)

**Discussion -** Ayurveda never sees any disease through a single disease point of view. Its approach towards finding the samprapti is always multi-dimensional and treatment is done in a holistic way. Cosmetic related therapies from the other Pathies are booming in recent era and

even researches should be done in Ayurveda regarding these Diseases. Most of cosmetic products used for graying of hair is harmful and not long standing. Lepa and shiroabhyanga effective on graying of hair without hazards effect on body. Both are effective on Ruksha sphutit kesh, daha, keshvarna, snigdhashthul. With help of these treatment not only used for grying of hair but also In texture of hair.

**Conclusion -** Mashadi lepa and indravaruni beej tail shiroabhyanga shows significant effect on Palitya. But Effect observed in Mashadi lepa is more than indravaruni beej tail shiroabhyanga in the management of palitya.

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2) Vagbhat, Ashtang Hridaya uttarsthan, garde, shirorovidnyannam, shlok29, anmol publication, p424. shlok43, p427.

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4) Yogaratnakar, ksudradrogranidan chikitsa prakaran, commentary by indra deva tripathi and d.s. Tripathi, krishnadas academy, Varanasi, first edition, p694.

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## अतिसार व्याधीवरील शाईगधरोक्त कल्प - एक अध्ययन

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प्रस्तावना- आदानग्लानवपुषामग्निः सन्नोऽपि सीदति।

वर्षासु दोषैर्दूष्यन्ति तेऽम्बुलम्बाम्बुदेऽम्बरे

सतुषारेण मरुता सहसा शीतलेन च।

भूबाष्पेणाम्लपाकेन मलिनेन च वारिणा।।

वन्हिनैव च मन्देन तेष्विन्योऽन्यदूषिषु। अ.ह.सू. ३/४२-४४

आदान काळाच्या प्रभावाने दुर्बल शरीरात मंदावलेला अग्नि वर्षा ऋतूतील वातादी दोषांमुळे अधिकच मंद होतो. हवेतील शीतलता, पृथ्वीतून निघणारी वाफ, अम्लपाकी व मलिन जल, जाठराग्निमांद्य यामुळे दोष एकमेकांना दुषित करतात.

अम्लविपाकी व मलिन जल



अग्निमांद्य



जलसेवन (ग्रीष्मऋतु अधिक) तीव्र सवय पुढे राहते.



आमोत्पत्ती



मलाला द्रवता



अतिसार

अतिसार व्याधीकरीता विविध भैषज्यकल्पनांचे वर्णन शाईर्गधर संहितेत आलेले आहे. त्यांचे योग्यप्रकारे अध्ययन करून युक्तिपूर्वक वापरल्यास वेळीच संप्राप्तीभंग करता येईल.

**संकल्पना** - अतिसार व्याधीचा अभ्यास करताना निदानाचा अभ्यास आवश्यक आहे. यापैकी लघुत्रयीपैकी माधवनिदान कारांनी याचे वर्णन उत्तम प्रकारे केले आहे.

**व्याधी हेतु** - गुर्वतिस्निग्धरुक्षोष्णद्रवस्थुलातिशीतलैः।

विरुद्धाध्यशनाजीर्णैर्विषमैश्चापि भोजनैः।।

स्नेहाद्यैरतियुक्तैश्च मिथ्यायुक्तैर्विषभयैः।

शोकाद दुष्टाम्बुमद्यातिपातैः सात्म्यतुपर्ययैः।।

जलाभिरणैर्वैगविधातैः क्रिमिदोषतैः।

नृणां भवत्यतीसारो मा. नि. ३/१-३

गुरु अतिस्निग्ध अतिरुक्ष अत्युष्ण अतिद्रव अतिस्थूल व अतिशीतल पदार्थांचे सेवन करणे. विरुद्धाशन, अध्यशन अपरिपक्व किंवा विषम भोजन करणे, स्नेहन, स्वेदन व पंचकर्मांचा अतियोग किंवा मिथ्यायोग होणे, शोक, दूषित जल व अतिमद्यपान करणे, ऋतुविपर्यय, अत्याधिक जलक्रिडा, वेगविधारण व कृमी दोषांमुळे भविष्यात अतिसार होतो.

**संप्राप्ती** - संशम्यापां धातुरग्निं प्रवृद्धः शक्न्मिश्रा वायुनाऽधः

प्रणुन्नः। सरत्यतीवातिसारं तमाहुर्व्याधिं धोर मा. नि. ३/४

वृद्ध (दुष्ट) जलीय धातु पाचकाग्रिला मंद करून मलाबरोबर वायुद्वारा प्रेरित होऊन अधोमागाने प्रचुर मात्रेत बाहेर पडतो. अशा घोर व्याधीस अतिसार असे म्हणतात.

हेतुसेवन

वातप्रकोप जलीयधातु विकृती

प्रकुपित. वायु दुष्ट जलीय धातुस कोष्ठत आणतो.

अग्निमांद्य व पुरीषद्रवता

गुदाद्वारे वारंवार प्रवृत्ती

अतिसार

प्रकार ७ - वातज, पित्तज, कफज, त्रिदोषज, शोकज, आमज, भयज (शा. प्र. ख ६/७)

**पूर्वरूप** - ऋन्नाभिपायुदर कुक्षितोदगात्रावसादनिलसन्निरोधाः।

**विट्सङ्ग** आध्मानमथाविपाको भविष्यतस्तस्य पुरः सराणि।।

मा. वि. ३/५

हृदयप्रदेश, नाभी, गुदा, उदर व कुक्षि यांच्या ठिकाणी सुचिवेधनवत् पीडा होणे, अंगसाद, अधोवायुला अवरोध निर्माण होणे, मलावष्टंभ, आध्मान व अविपाक हि अतिसाराची पूर्वरूपे आहेत.

**शाईर्गधर संहिता महत्त्व** - शाईर्गधर संहिता साधारणपणे मध्यम खंडातील म्हणजेच इ.स. १४ व्या शतकातील आहे. अनेकविध भैषज्यकल्पना व त्यांचे रोगाधिकार यामुळे चिकित्सेस अत्यंत उपयुक्त असा ग्रंथ आहे. मध्यमकालीन असल्याने आधुनिक शास्त्राची जोड या संहितेस मिळाली आहे. संहितेत अनेक चिकित्सोपयोगी स्वरस, कल्क, क्वाथ, पुटपाक, अवलेह, चूर्ण इ अनेक कल्पनांचे वर्णन केलेले आहे.

**निराम अतिसारनाशक**

| कल्पना        | घटकद्रव्ये           | अनुपान    |
|---------------|----------------------|-----------|
| <b>स्वरस</b>  |                      |           |
| १) बब्बुल     | स्थूल बब्बुलिका पत्र |           |
| २) श्योनाक    | श्योनाक त्वक्        |           |
| ३) कुटज       | कुटज त्वक्           |           |
| <b>पुटपाक</b> |                      |           |
| १) कुटज       | कुटज त्वक्           | मधु       |
| २) अरलु       | अरलु त्वक्           | मधु+मोचरस |

|                          |                                                                                                                                                         |                    |
|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| ३) तित्तिर               | निरन्त्र तित्तिर उदर<br>न्यग्रोधादी कल्क पुरण                                                                                                           | मधु                |
| ४) दाडिम                 | सुपक्वदाडिमफल                                                                                                                                           | मधु                |
| <b>कषाय</b>              |                                                                                                                                                         |                    |
| १) कुटज                  | कुटज                                                                                                                                                    |                    |
| २) इन्द्रयवादी           | इन्द्रयव, धान्यक, पटोल                                                                                                                                  | मधु + शर्करा       |
| <b>फाण्ट</b>             |                                                                                                                                                         |                    |
| १) आम्रादी               | आम्र, जम्बु (पल्लव)<br>वटशृङ्ख, उशीर                                                                                                                    | मधु                |
| <b>कल्क</b>              |                                                                                                                                                         |                    |
| १) अङ्कोट                | अङ्कोट मुल + मधु                                                                                                                                        | तण्डुल             |
| <b>चूर्ण</b>             |                                                                                                                                                         |                    |
| १) बृहद्<br>गंगाधर       | मुस्त, अरलु, शुण्ठी,<br>धातकी, लोध्र, वालक<br>बिल्व, मोचरस, आम्रबीज,<br>पाठा, इन्द्रयव, वत्सक,<br>प्रतिविषा, लज्जालु                                    | मधु +<br>तण्डुलोदक |
| २) अजमोदादी              | अजमोदा, मोचरस,<br>शृंगबेर, धातकी, शुण्ठी                                                                                                                | गोदधिमथित<br>घोल.  |
| ३) कपित्थाष्टक           | कपित्थ, शर्करा, दाडिम,<br>तिन्तिडीक श्रीफल, मरिच,<br>धातकी, अजमोदा जीरक,<br>पिप्पली, धान्य, ग्रन्थिक,<br>वालक सौवर्चल, यवानी<br>चित्रक नागर             |                    |
| ४) बृहद् –<br>दाडिमाष्टक | दाडिम, शर्करा, पिप्पली<br>पिप्पलीमुल, यवानी, शुण्ठी,<br>मरिच, धान्यक, जीरक,<br>तुगाक्षीरी, त्रिसुगंधी, केशर                                             |                    |
| ५) लवङ्गादि              | लवंग, कर्पूर, एला, त्वग,<br>नागकेशर, जातीफल,<br>उशीर, नागर, कृष्णजीरक,<br>पिप्पली, तुगाक्षीरी, अगुरु,<br>चंदन, नीलोत्पल, तगर,<br>कंकोल, सिता.           |                    |
| ६) महाखाण्डव             | मरिच नागकेशर, चित्रक,<br>तालीसपत्र, पंचलवण<br>पिप्पलीमुल, त्वक्,<br>पिप्पली, तिन्तिडीक,<br>जीरक, धान्यक,<br>अम्लवेतस सुंठ, बदर,<br>अजमोदा, दाडिम, सिता. |                    |
| ७) यमानी –<br>खाण्डव     | यमानी, दाडिम शुण्ठी,<br>तिन्तिडीक अम्लवेतस<br>बदर, मरिच, पिप्पली,                                                                                       |                    |

|                         |                                                                                                                              |                                             |
|-------------------------|------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
|                         | त्वक्, सौवर्चल, धान्यक,<br>जीरक, शर्करा.                                                                                     |                                             |
| ८) तालीसादी             | तालीस, मरिच, शुण्ठी,<br>पिप्पली, एला, त्वक्,<br>वंशलोचन, शर्करा.                                                             |                                             |
| <b>अवलेह</b>            |                                                                                                                              |                                             |
| १) कुटज                 | कुटजत्वक, रसांजन,<br>मोचरस, त्रिकटु, त्रिफला,<br>गुड, लज्जालु, चित्रक,<br>पाठा बिल्व, इन्द्रयव,<br>भल्लातक, प्रतिविषा विंडग. | अजा तक्र,<br>पयो, दहि                       |
| २) कुटजाष्टक            | कुटजत्वक, लज्जालु,<br>धातकी, बिल्व पाठा,<br>मोचरस, मुस्त, प्रतिविषा                                                          | छागदुग्ध/मण्ड                               |
| <b>घृत</b>              |                                                                                                                              |                                             |
| १) मसुर                 | मसुर, बिल्व, घृत                                                                                                             |                                             |
| <b>अरिष्ट</b>           |                                                                                                                              |                                             |
| १) बबुल                 | बबुल, गुड, धातकी,<br>पिप्पली, जातीफल, एला,<br>कङ्कोल, त्वक, लवंग,<br>पत्र नागकेशर, मरिच                                      |                                             |
| <b>रस</b>               |                                                                                                                              |                                             |
| १) लोकनाथ               | पारद, गंधक, कर्पद,<br>टंकण, गोदुग्ध, शंख                                                                                     | वातज – घृत<br>पित्तज – नवनीत<br>ककज – शौद्र |
| २) हेमगर्भ<br>पोट्टली   | पारद, कनक, गंधक, शंख,<br>टंकण पक्वनिम्बुरस,<br>मुक्ता                                                                        |                                             |
| <b>आमातिसारनाशक</b>     |                                                                                                                              |                                             |
| १) शुण्ठी पुटपाक        | शुण्ठी                                                                                                                       | सिता (प्रातःकाळा)                           |
| २) वत्सकादि<br>कषाय     | वत्सक अतिविषा, बिल्व,<br>मुस्त, वालक                                                                                         |                                             |
| ३) शुण्ठयादी<br>चूर्ण   | शुण्ठी प्रतिविषा, हिंगु,<br>मुस्ता, कुटज चित्रक                                                                              | कोष्णजल                                     |
| ४) हरितक्यादी<br>चूर्ण  | हरितकी, प्रतिविषा, हिंगु<br>सिन्धु, वचा, सौवर्चल                                                                             | कोष्णजल                                     |
| <b>रक्तातिसारनाशक</b>   |                                                                                                                              |                                             |
| १) जम्बुवादी<br>स्वरस   | जम्बु, आम्र,<br>आमलकी (पल्लव)                                                                                                | मधु + अजाक्षीर                              |
| २) मुस्तादी<br>प्रमथ्या | मुस्तक, इन्द्रयव                                                                                                             | मधु                                         |
| ३) बदरीमुल<br>कल्क      | बदरीमुल, तिल                                                                                                                 | मधु + क्षार                                 |

| त्रिदोषज अतिसार               |                                                                                        |             |
|-------------------------------|----------------------------------------------------------------------------------------|-------------|
| १) आनंदभैरव रस                | दरद हिंगुल, वत्सनाभ, मरिच, टंकण, पिप्पली                                               | मधु         |
| चिरोत्थित                     |                                                                                        |             |
| १) न्हीबेरादि-कषाय            | न्हीबेर, धातकी, लोघ्र, पाठा लज्जालु, वत्सक, धान्यक अतिविषा, नागर मुस्ता, गुडुची, बिल्व | मधु+मोचरस   |
| बालातिसार                     |                                                                                        |             |
| १) धातक्यादी कषाय             | धातकी, बिल्व, रोध्र, गंजपिप्पली, वालक                                                  | मधु         |
| अतिसार उपद्रव छर्दी           |                                                                                        |             |
| १) बिल्वादी कषाय              | बिल्व, आम्रास्थि                                                                       |             |
| आम रक्त शुल्युक्त व चिरोत्थित |                                                                                        |             |
| १) कुटजाष्टक कषाय             | कुटज, अतिविषा, पाठा धातकी, लोघ्र, मुस्ता, न्हीबेर दाडिम                                | मधु + मोचरस |

**विमर्श** – शाङ्गधर संहितेत तीनही खंडामध्ये अतिसाराचा उल्लेख आहे. प्रथम खंडात अतिसार संख्या वर्णन आलेले आहे. “पृथक्त्रिदोषैः सवैद्य शोकादामाभ्यादापि।।(शा.प.ख ६/७)

| अतिसार व्याधीवरील आयुर्वेद रसशाळेचे उपयुक्त कल्प...                                                                       | <br>अॅमेक्स (आमपाचन)                            | <br>कुटजारीष्ट (स्तंभन)                    |
|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| <br>कुटज पर्पटी वटी (ग्राही,अग्निदीपन) | <br>सुतशेखर(ग्राही, आमपाचन,पित्तशमन)           | <br>कामदुधा(निराम पित्तशमन,गुदपाकशमन)     |
| <br>पित्तशामक वटी (पित्तशमन)           | <br>संजीवनी गुटी (आमावस्थेत उपयुक्त दीपन-पाचन) | <br>पंचामृतपर्पटी वटी (अपुनर्भव चिकित्सा) |

या प्रकारें अतिसाराचे ७ भेद सांगितलेले आहेत. द्वितीय खंडात वेगवेगळ्या कल्पांचा समावेश केला आहे. केवळ वनस्पतीजन्य द्रव्ये नव्हे तर रसकल्पांचाही उल्लेख आहे. तृतीय खंडात पंचकर्म तसेच धूम, गण्डूष, लेप इ. बाह्य उपक्रमांचा समावेश केला आहे. वमन अर्ह व्याधीमध्ये अतिसाराचा समावेश केला आहे.

**अतिसार चिकित्सेतील कल्पांची वैशिष्ट्ये**– ● शाङ्गधर संहितेत अतिसार व्याधी करीता एकूण ११ कल्पना व ३७ कल्प वर्णन केलेले आहेत. ● या कल्पामध्ये अधिकतः चूर्ण, स्वरस व पुटपाक यांचा समावेश आहे. ● ३७ कल्पांपैकी २५ कल्प हे निराम अतिसारनाशक, ४ कल्प आमातिसारनाशक ३ कल्प रक्तातिसारनाशक व १ कल्प त्रिदोष अतिसार नाशक असे आहेत. तसेच बालातिसार, चिरोत्थित, आमशुल्युक्त अतिसार या करीता प्रत्येकी १-१ कल्पाचे वर्णन केलेले आहे. ● अतिसार चिकित्सेत विशेषकरून अग्निदीपन करणारी द्रव्ये वापरली गेली आहेत. ● त्यामध्ये शुण्ठी, पिप्पली दाडिम, अजमोदा मरिच इ. द्रव्याचा वापर केलेला आहे. ● तसेच ग्राही द्रव्य जसे बिल्व व कषाय रसात्मक द्रव्यांचा वापर केलेला आहे. ● अनुपानार्थ मधु चा उल्लेख अधिक आढळतो ● अतिसार चिकित्सेत वर्णन करण्यात आलेले कल्प फक्त अतिसारच नव्हे तर अनेक विविध व्याधींच्या चिकित्सेत वापरले जाऊ शकतात. त्या कल्पांची अनेक फलश्रुती आहे.

**निष्कर्ष** – शाङ्गधर संहितेत अनेकविध द्रव्यांच्या अनेकविध कल्पना वर्णित आहेत. त्यापैकी सद्यकाळात बहुतेक सर्व द्रव्य उपलब्ध आहेत. तसेच यातील अनेक कल्प ग्रंथोक्त पाठाप्रमाणे विक्रीसाठी सुद्धा आहेत.

संहितेत प्रत्यक्ष फक्त लोकनाथरस या कल्पाला विविध अनुपानाबरोबर सेवन करून वातज, पित्तज, कफज, अतिसारात चिकित्सेचा उल्लेख केला आहे, परंतु प्रत्यक्षात प्रत्येक कल्प हे दोषानुरूप अनुपानाबरोबर सेवन केल्यास त्या त्या विशिष्ट प्रकारामध्ये सुद्धा त्याचा फायदा होईल.

द्रव्यांच्या कल्पना सुद्धा दोषानुरूप वापरून चिकित्सा करावी जसे स्नेहकल्पना, क्वाथ हे वातप्रधान संप्राप्ती करीता वापरावे, क्षीरपाक, घृत, हिम, मंथ, हे पित्तप्रधान व आसव, अरिष्ट, हे कफप्रधान संप्राप्ती करीता वापरावे. साधारणतः अनुक्त अनुपान असतांना कोष्णजल वापरावे. व दोषानुसार अनुपानाचा विचार करावा. संपूर्ण रुग्णाची प्रकृति, व्याधी अवस्था, दोष स्थिती हे सर्व लक्षात घेवून चिकित्सा केल्यास नक्कीच रोगप्रशमन सुखकर होईल.

**संदर्भ** – १) शाङ्गधर संहिता, आढमल्लटीका, चौखंबा सुरभारती प्रकाशन वाराणसी, संस्करण २०९३

२) माधवनिदान, मधुकोषटीका, श्रीसुदर्शन शास्त्री विरचित विद्योतिनी हिंदी टिका, चौखंबा प्रकाशन वाराणसी, संस्करण २०१८

३) अष्टांगहृदय, श्रीमदरुणदत्त विरचित ‘सर्वाङ्गसुंदरा’ एवं हेमाद्री प्रणीत आयुर्वेद रसायन, चौखंबा ओरियन्टालिया वाराणसी प्रथम संस्करण २०१८.





## Conceptual Review Of Masur (Lens culinaris medik)

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**Introduction** -Masur/Lentil (Lens culinaris Medik.) is an edible legume, known for its lens shaped seeds. It's a dietary staple throughout regions of India, Shrilanka, Pakistan, Bangladesh and Nepal. References of Masur are found since from Vedic era. It is used in the diet since vedic period. Different Kalpana of Masur as Yusha, Soup, Saktu etc are indicated as a pathyaaahar in various diseases. Apart from its dietary use, Masur is one amongst the different herbs mentioned for its Varnya action. In the present article review of Masur is compiled from Vedic era till date.

**Aim** - To compile the references of Masur.

**Objectives** - To review the drug Masur from vedic era till date.

**Materials and Methodology** - Thorough review of Masur from Vedic period till date is taken. References of Masur were taken from Bruhatrayi and Laghutrayi. A reference of Masur from various nighantus were also taken.

**Masur in Vedic Era** - • Masur has been mentioned in the Bruhadaranyaka (5500 BC), a commentary on the Rigveda (8000 BC). Rigveda mentions the pulses such as Mash, Mudga and Masur (Lens culinaris Medik.)

• During the period of Yajurveda (7000 B.C.),

the three pulses urad (Vigna mungo), mung (Vigna radiata), and masur (Lens culinaris) were the most commonly used grain legumes.

•Masur is also explained as one of the Dashagramyadhanya in Shatapathabramhan of Atharvaveda. (Shatapatha brahmna).

**Masur in Samhita** - In this period, Bruhatrayi have mentioned Masur in Shamidhanyavarga of Ahardavyas and in some of the formulations for both the preventive and curative purposes. Masur yusha is indicated as pathyaaahar in Jwar, Raktapitta, Arsha, Atisara, Visarpa, Trushna. Masur yavagu is explained as 'Sarvatisaranashak'. (See Table 1)

**Sushrut Samhita** - Acharya Sushruta guided mainly about surgery in his text Sushruta Samhita. He had given the example of Masur while explaining the various Yantras and shastras. Sushrutacharya explained that all other shamidhanya are vibandhakar exept Mudga and Masur. (Su. Su.46). Masuryusha is also indicated in Jwar and Netrarogachikitsa.

(See Table 2)

**Ashtanga Hrudaya** - Acharya Vagbhata also explained the properties and function of Masur in Annaswarupavidnyaniyaadhyaya in Shimbidhanyavarga (A.H.Su.6). He has also

(Table 1) Charak Samhita

| References of Masur from Charak Samhita |                 |                           |                       |                                        |
|-----------------------------------------|-----------------|---------------------------|-----------------------|----------------------------------------|
| Sr. No.                                 | Reference       | Formulation               | Adhikar               | Indication                             |
| 1                                       | Cha.Chi. 4/37   | Masur yusha/soup          | Raktapitta chikitsa   | Raktapitta                             |
| 2                                       | Cha.Chi. 14/205 | Ksheer siddha Masur yusha | Arsha chikitsa        | Raktarsha                              |
| 3                                       | Cha.Chi. 20/37  | Mudgadichoorna            | Chhardichikitsa       | Kaphajachhardi                         |
| 4                                       | Cha.Chi. 21/60  | Patoladi Kashaya          | Visarpachikitsa       | Visarpa                                |
| 5                                       | Cha.Chi. 21/80  | Trividhapradeha           | Visarpachikitsa       | Visarpavrana                           |
| 6                                       | Cha. Chi. 25/62 | Kalayadikalka             | Dwivranayachikitsa    | Vranapidanarthalepa                    |
| 7                                       | Cha. Chi 29/134 | Prapaundarikadilepa       | VataraktaChikitsa     | Vataraktaruja, daaha, visarpa, shophha |
| 8                                       | Cha. Si. 8/40   | Sthiradi yavagu           | Prasrutayogiya siddhi | Sarvatisaarnashak yavagu               |

explained Masur in various formulations in the treatment of Jwar, Raktapitta, Visarpa, Kushtha, Vranachikitsa. (See Table 3)

#### References of Masur in Laghutrayi

**Sharangdhara Samhita: (1300A.D.)** - In this text of Laghutrayi Acharya Sharangdhara mentioned many formulations of Masur used in the form of various formulations as saktu, mantha, Kalka, Ghruta etc. (See Table 4)

**Bhavaprakash: (1600 A.d.)**- Acharya Bhavaprakasha described Masur in various formulations. Also In his nighantu he explained medicinal plants and their therapeutic uses in different varga. Masur is mentioned in Dhanyavarga with its properties and uses. (See Table 5)

#### Yoga Ratnakar

**Yoga Ratnakar (1800 A.D.)** - Yogaratnakar, is the minor image of Charak Samhita, which throws light upon curative aspect of diseases providing different formulations of Masur as Masur soup, Yusha, Saktu etc. Masur is indicated as pathyaahar in Jwara, Raktapitta, Trushna, Visphota, Masurika. Different lepas including Masur are explained in Kshudraroga chikitsa. (See Table 6)

**Masur in Nighantu** - Masur is mentioned in all the nighatus under different varga with its synonyms, guna (properties), varieties, and its karmas (action on body, tridosha). (Table 7,8)

**Etymological Derivation and Interpretation of Synonyms** - It helps for recognition of a

| (Table 2) References of Masur from Sushruta Samhita     |                       |                     |                                |                                                |
|---------------------------------------------------------|-----------------------|---------------------|--------------------------------|------------------------------------------------|
| Sr. No.                                                 | Reference             | Formulation         | Adhikar                        | Indication                                     |
| 1                                                       | Su. Su. 46/30         | Properties of Masur | Annapaanvidhi                  | Massorguna karma-Madhura vipaka, Baddhavarchas |
| 2                                                       | Su. Su. 46/369        | Masuradiyusha       | Annapaanvidhi                  | Vaatavyadhi, Ardita/Hrudya                     |
| 3                                                       | Su.U. 39/150          | Masuryusha          | Jwarapratishedha               | Jwara                                          |
| (Table 3) Reference of Masur from Ashtang Hrudayam      |                       |                     |                                |                                                |
| Sr. No.                                                 | Reference             | Formulation         | Adhikar                        | Indication                                     |
| 1                                                       | A.H.Chi.1/88          | Triphaladighruta    | Jwarachikitsa                  | Jwara, Kaas                                    |
| 2                                                       | A.H.Chi.13/12         | Trayantyadighruta   | Vidhradi-Vruddhichikitsa       | Vidradhi, Gulma, Visarpa, Daaha, Moha, Jwar    |
| 3                                                       | A.H.Chi.18/7          | Darvyadi kwath      | Visarpachikitsa                | Visarpa                                        |
| 4                                                       | A.H.Chi.22/29         | Masuradi lepa       | Vaataraktachikitsa             | Ruja, Daaha, Visarpa, Shopha                   |
| (Table 4) References of Masur from Sharangadhar Samhita |                       |                     |                                |                                                |
| Sr.No.                                                  | Reference             | Formulation         | Adhikar                        | Indication                                     |
| 1                                                       | Sha. S. M.Kha.3/11    | Masursaktumantha    | PhantadiKalpana                | Tridoshajachhardi                              |
| 2                                                       | Sha.S. M.Kha. 5/28    | Shunthikalka        | Kalka Kalpana                  | Sangrahani                                     |
| 3                                                       | Sha.S. M.Kha. 9/25-26 | Masurghruta         | Ghruta tail Kalpana            | Sarvatisaranashan, Grahani, Pravahika          |
| 5                                                       | Sha. S. U.Kha. 11/9   | Raktachandanadilepa | Lepamurdhatailka-rnapuranvidhi | Vyangaghna, Mukhakantikara                     |

plant not only in terms of its morphological characters but also in terms of its various other characters such as habit, habitat, properties (Rasa, Guna, Veerya, Vipaka, Prabhava etc.) and therapeutic as well as general uses.

List of Masur synonyms with meanings

(Table 9)

| Sr.No. | Synonym      | Meaning                                      |
|--------|--------------|----------------------------------------------|
| 1      | Masur        | Having Madhura vipaka and is easy to digest. |
| 2      | Mangalya     | One which is auspicious.                     |
| 3      | Masurika     | Having shape like Masur.                     |
| 4      | Ragada       | Having Raag i.e. Rakta Varna.                |
| 5      | Pandura      | One variety having Pandu Varna.              |
| 6      | Supya        | One which is useful in making soup.          |
| 7      | Kalyan beeja | The one which helps in well beingness.       |
| 8      | Guru beeja   | Which is useful in Brunhana.                 |

## Ayurvedic pharmacological properties of Masur

|                                     |                                                                                       |
|-------------------------------------|---------------------------------------------------------------------------------------|
| Rasa (Taste)                        | Madhura (Sweet)<br>Kashaya (Astringent)                                               |
| Virya (Poency)                      | Sheeta (Cold potency)                                                                 |
| Vipaka (Post digestive taste)       | Madhura (Sweet potency)                                                               |
| Guna (Properties)                   | Laghu (Light)<br>Ruksha (Dry)                                                         |
| Effect on dosha (Biological entity) | Kapha-Pittahara<br>(Pacifies Kapha and Pitta dosha)<br>Vatahara (Vitiating Vatadosha) |

**Types of Masur** - Dalhana, the commentator of Sushruta Samhita states two varieties of Masur as

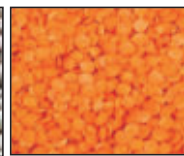
- Masur- having Krushna varna
- Mangalyaka - having Pandu varna



Masur plant



Masur seeds



Masur daal

(Table 5) References of Masur in Bhavaprakasha Samhita:

| Sr.No. | Reference        | Formulation       | Adhikar                | Indication                      |
|--------|------------------|-------------------|------------------------|---------------------------------|
| 1      | Bha.Pu.Kha.6/100 | Vyangagnalepa     | Dhoomapanadi prakarana | Vyaga, Mukhakantikara           |
| 2      | Bha.M.Kha.24/163 | Masurlepa         | Vaatvyadhi             | Paaddaha                        |
| 3      | Bha.M.Kha.29/77  | Vaajigandhadilepa | Vaatraktadhikar        | Kaphapradhana-vaatrakta         |
| 4      | Bha.M.Kha.46/34  | Gaaytryadikwatha  | Vidradhiadhikara       | Vrana, Gulma, Vidradhi, Visarpa |
| 5      | Bha.M.Kha.61/40  | Vatankuradilepa   | Kshudrarogadhikara     | Vyanga                          |
| 6      | Bha.M.Kha.61/47  | Masurlepa         | Kshudrarogadhikara     | Kantivardhan                    |

(Table 6) References of Masur from Yogaratnakara:

| Sr.No | Formulation         | Adhikar              | Indication                   |
|-------|---------------------|----------------------|------------------------------|
| 1     | Jatyadidhoom        | Kaaschikitsa         | Kaas                         |
| 2     | Lajadiyusha         | Chhardichikita       | Vatajachhardi                |
| 3     | Masursaktu          | Chhardichikitsa      | Tridoshajchaardi             |
| 4     | Prapaundarikadilepa | Vaataraktachikitsa   | Daaha, Visarpa, Raag, Shopha |
| 5     | Devdrumadichurna    | Udarchikitsa         | Krumi, ShophaUdar            |
| 6     | Vatankuradilepa     | Kshudrarogachikitsa  | Vyanganashan                 |
| 7     | Masuralepa          | Kshudrarogachikitsa  | Kantivardhan                 |
| 8     | Masur-Nimba yoga    | Samanyavishachikitsa | Vishanashak                  |

**Botanical Description - a) Scientific name:** Lens culinaris Medik. **b) Family:** Fabaceae (Papilionaceae) **c) Botanical synonyms:** The principal synonyms of Lens culinaris are 1) Cicer lens (L.) Willd. 2) Ervum lens L. 3) Lens esculenta Moench **d) Morphology:** Herb

**Chemical constituents -** (Database vol 5, Pg.no. 232) • (Seed coat) - Tricetin, luteolin, a diglycosyldelphinidin, two proanthocyanidins Phenolic acids viz, p-coumarin and ferulic acid,

• (Seeds) - four kaempferol triglycosides, 2(S),4(R)-4 hydroxyargenine, triterpene alcohols, 3-oxosteroids, vitamin B and proteins

• (cotyledons) - pinitol digalactoside-ciceritol, kaempferol glycoside, 3,4',7- trihydroxy-favone

#### Pharmacological activities of Masur -

**1) Anti-hyperlipidemic activity -** Results suggest that the extracts of Lens culinaris contain active phytoconstituents which might

**(Table 7) Classification of Masur in varios Nighantu**

| Sr.No. | Samhita/Nighantu       | Varga                            |
|--------|------------------------|----------------------------------|
| 1      | Dhanwantari Nighantu   | Suvarnadivarga                   |
| 2      | Dravyagunasangraha     | Dhanyavarga                      |
| 3      | Siddhamantra Nighantu  | Vataghna and kaphapittaghnavarga |
| 4      | Shadrasa Nighantu      | Swaduskandha, Kashaya skandhas   |
| 5      | Madanpala Nighantu     | Dhanyadigunavarga                |
| 6      | Shodhala Nighantu      | Shimbidhanyavarga                |
| 7      | Kaiyadeva Nighantu     | Dhanyavarga                      |
| 8      | Raja Nighantu          | Shalyadivarga                    |
| 9      | Bhavaprakasha Nighantu | Dhanyavarga                      |
| 10     | Nighantu ratnakara     | Gunadoshaprakaranam              |
| 11     | Shaligram Nighantu     | Dhanyavarga                      |
| 12     | Priya Nighantu         | Dhanyavarga                      |

**(Table 8) Synonyms of Masur in different nighantus**

| Sr.No. | Synonym        | D.N. | M.N. | K.N. | R.N. | Bh.N. | Sha.N. | P.N. |
|--------|----------------|------|------|------|------|-------|--------|------|
| 1      | Masur          | ✓    |      | ✓    | ✓    | ✓     | ✓      | ✓    |
| 2      | Madhura        | ✓    |      |      |      |       |        |      |
| 3      | Soopya         | ✓    |      |      |      |       |        |      |
| 4      | Pruthava:      | ✓    |      |      |      |       |        |      |
| 5      | Pittabheshajam | ✓    |      |      |      |       |        |      |
| 6      | Masurika       |      | ✓    | ✓    |      | ✓     |        |      |
| 7      | Masuri         |      | ✓    |      |      |       |        |      |
| 8      | Mangalya       |      | ✓    | ✓    | ✓    | ✓     | ✓      | ✓    |
| 9      | Pandurapala    |      | ✓    |      |      |       |        |      |
| 10     | Pandura        |      |      | ✓    |      |       |        |      |
| 11     | Raagdali       |      |      |      | ✓    |       | ✓      |      |
| 12     | Pruthubeejaka  |      |      |      | ✓    |       | ✓      |      |
| 13     | Shoora         |      |      |      | ✓    |       | ✓      |      |
| 14     | Kalyanabeeja   |      |      |      | ✓    |       | ✓      |      |
| 15     | Gurubeeja      |      |      |      | ✓    |       | ✓      |      |
| 16     | Masuraka       |      |      |      | ✓    |       | ✓      |      |
| 17     | Mangalyaka     |      |      |      |      | ✓     |        |      |

be responsible for antihyperlipidemic activity of the seeds.

**2) Anti-diarrheal, Anti-spasmodic and Bronchodilator activity** - These results suggest that *Lens culinaris* possesses antidiarrheal, antispasmodic and bronchodilator activities mediated possibly through a combination of  $Ca^{++}$  antagonists anti cholinergic and phosphodiesterase inhibitory effect and this study provides sound background to its medicinal use in disorders of gut and airways hyperactivity, like diarrhea and asthma.

**3) Vasodilatory, Blood pressure lowering and Cardio depressant activity** - In isolated guinea-pig atria, *L. culinaris* caused inhibition of atrial force and rate of spontaneous contractions, similar to that exhibited by verapamil. These data indicate that *L. culinaris* exhibits blood pressure lowering potential, mediated possibly through  $Ca^{++}$  channel blockade mechanism.

**4) Anti-inflammatory and Antioxidant activities** - The natural antioxidants level also significantly increases after extract administration in the rats. The anti-inflammatory and antioxidant effects of *Lens culinaris* Med. Seeds may be due to presence of flavonoids and tannins.

**5) Nephroprotective activity**- The study reveals that hydroalcoholic extract of seeds of *Lens culinaris* partially ameliorated doxorubicin- induced renal damage.

**Discussion** - Review of Masur suggested that its one of the herb traced easily in ancient classics since vedic literature. During vedic period it is mentioned mainly as one of the Dashagamyadhanya. In Samhitas Masur is mentioned in Shamidhanyavarga of Aahardravya and in some of the formulations in treatment of various disorders. Different properties of Masur as Madhura, Kashaya rasa, Sheetaveerya, Ruksha, Laghuguna are explained by various Acharyas. Varnya action of Masur is first explained in Ashtangsamgraha. Different Aahara Kalpana of Masur as Yusha, Yavagu, Soup etc. are mentioned as pathya in the treatment of diseases like Jwara, Raktapitta, Arsha, Pandu, Vaatarakta, Vrana, Visarpa etc.

Lepa Kalpana of Masur as a single herb for complexion improvement is mentioned in Bhavaprakasha Samhita and Yoga Ratnakar.

Considering the classification in Nighantu, it is observed that Masur is described in all the Nighantus. It is explained in Dhanyavarga of most of the nighantus. Different 17 synonyms of Masur are explained in various nighantus. Masur is explained as samgrahi, Virukshan, Varnya, etc. Therapeutic indication of Masur include its action on 22 different diseases as Jwara, Raktapitta, Pandu, Arsha, Visarpa, Vaatrakta, Vaatvyadhi, Mutrakruchchha, Vrana, Visarpa, Kushtha, Netra roga etc.

In review of literature it is seen that many biological activities of Masur such as Anti-hyperlipidemic, Anti-diarrheal, Anti-spasmodic, Bronchodilator, Vasodilatory, Antioxidant, Nephro protective had been screened by other scholars.

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## टिळक आयुर्वेद महाविद्यालय ८९ वा वर्धापन दिन - दि. २६ जून २०२२

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राष्ट्रीय शिक्षण मंडळ संचलीत 'टिळक आयुर्वेद महाविद्यालयाचा ८९ वा वर्धापन दिन समारंभ' रविवार, दि. २६ जून, २०२२ रोजी आयोजित करण्यात आला.

राष्ट्रीय शिक्षण मंडळाचे अध्यक्ष डॉ. दि. प्र. पुराणिक हे समारंभाच्या अध्यक्षस्थानी होते. क्लिनिकल गव्हर्नन्स हिंदुजा हॉस्पिटल, मुंबईचे प्रमुख डॉ. अविनाश सुपे हे प्रमुख पाहुणे होते. प्रमुख पाहुणे व मान्यवरांचे हस्ते धनवंतरी पूजनाने कार्यक्रमाची सुरुवात झाली. डॉ. गौरी गांगल यांनी धनवंतरी स्तवन म्हटले. डॉ. सरोज पाटील यांनी प्रमुख पाहुणे व मान्यवरांची ओळख करून दिली. महाविद्यालयाचे प्राचार्य डॉ. सदानंद वि. देशपांडे यांनी कार्यक्रमाचे प्रास्ताविक व स्वागत केले. त्यांनी आपल्या प्रास्ताविकात शतकाकडे वाटचाल करीत असलेल्या महाविद्यालयाचा शैक्षणिक, संशोधन, क्रिडा व सांस्कृतिक यशाचा लेखाजोखा मांडला.

पंचवीस वर्षे उत्कृष्ट सेवा करीत असलेल्या महाविद्यालयाच्या माजी विद्यार्थ्यांचा जनकसंस्था राष्ट्रीय शिक्षण मंडळ यांच्या द्वारे गौरव करण्यात आला. यावर्षीचा

'कार्यभूषण पुरस्कार' हा मानाचा पुरस्कार डॉ. अतुल राक्षे, डॉ. प्रिती अभ्यंकर व डॉ.नीलाक्षी प्रधान यांना प्रदान करण्यात आला. शैक्षणिक क्षेत्रात उत्कृष्ट काम करणाऱ्या महाविद्यालयाच्या रसशास्त्र विभागाच्या अध्यापिका डॉ. सौ. योगिनी पाटील यांना 'उत्कृष्ट शिक्षक' पुरस्काराने गौरविण्यात आले. तर शैक्षणिक कामात उत्कृष्ट दर्जा निर्माण करणाऱ्या रचना शारीर विभागास 'उत्कृष्ट विभाग' या पुरस्काराने गौरविले. विभागाच्या प्रमुख प्रा. डॉ. सौ. सरोज पाटील आणि त्यांचे सहकारी यांनी हा पुरस्कार स्वीकारला.

उत्कृष्ट काम करणाऱ्या अध्यापकेतर कर्मचाऱ्यांस दिला जाणारा 'कार्यकुशल पुरस्कार' पदवीपूर्व ग्रंथालयाच्या सहाय्यक ग्रंथपाल सौ. कविता टेमघरे तर 'कार्यतत्पर पुरस्कार' हा श्री. भारत बनसोडे यांना प्राप्त झाला. समारंभात माहे जुलै २०२२ या 'आयुर्विद्या इंटरनॅशनल' च्या जागतिक स्तरावरील शास्त्रीय नियतकालिकाच्या अंकाचे प्रकाशन प्रमुख पाहुणे मा. डॉ. अविनाश सुपे यांच्या हस्ते झाले.

सन २०२१-२२ करीता वर्षनिहाय व विषयानुसार डॉ.



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व्यासपीठावरील मान्यवरांसमवेत डॉ. किरूमक्की गोल्ड मेडल्स प्राप्त गुणवंत विद्यार्थी.

शिवराम किरूमक्की व अन्य शैक्षणिक पुरस्कारांचे वितरण गुणवत्ताधारक विद्यार्थ्यांना करण्यात आले. डॉ. अविनाश सुपे यांनी त्यांच्या मनोगतात वस्तुनिष्ठ आयुर्वेद समाजापर्यंत पोहचविणे ही एक गरज असल्याचे व आयुर्वेद आणि इतर शास्त्रांचे साहचर्य घेऊन केलेली चिकित्सा ही अधिक फलदायी ठरेल असे सांगितले. समारंभाचे अध्यक्ष डॉ. दि. प्र. पुराणिक यांनी महाविद्यालयाच्या लक्षणीय प्रगतीबाबत समाधान व्यक्त केले व आजी माजी विद्यार्थी, अध्यापक, अध्यापकेतर कर्मचारी यांना कार्य करण्यासाठी प्रोत्साहित केले व सर्व पुरस्कार प्राप्त विजेत्यांचे अभिनंदन केले.

कार्यभूषण पुरस्काराच्या मानपत्राचे वाचन डॉ. मंजिरी देशपांडे व डॉ. विनया दीक्षित यांनी केले. डॉ. मोहन जोशी यांनी

उत्कृष्ट शिक्षक, उत्कृष्ट विभाग, कार्यकुशल व कार्यतत्पर पुरस्कारांचे वाचन केले. डॉ. अभय इनामदार यांनी आयुर्विद्या इंटरनॅशनलबाबत माहिती दिली. शैक्षणिक पुरस्कारांचे वाचन डॉ. मंजिरी देशपांडे व डॉ. अपूर्वा संगोराम यांनी केले. कार्यक्रमाचे नेटके सूत्रसंचालन उपप्राचार्य डॉ. सौ. इंदिरा उजागरे यांनी केले. आभार प्रदर्शन डॉ. मोहन जोशी यांनी केले. राष्ट्रगीताने कार्यक्रमाची सांगता झाली.

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





रसशाळा

## आयुर्वेद रसशाळा - दर्जेदार औषध निर्मितीचा मापदंड!

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कार्यकारी संपादक



दि. १ ऑगस्ट २०२२ रोजी आयुर्वेद रसशाळा ८८ व्या वर्षात पदार्पण करीत आहे. दर्जेदार औषधांची निर्मिती हाच ध्यास घेतलेल्या या औषधी कंपनीने राष्ट्रीय व आंतरराष्ट्रीय स्तरावर मानाचे स्थान मिळविलेले आहे.

१ ऑगस्ट १९३५ रोजी आयुर्वेदीय औषधे शास्त्रशुद्ध पद्धतीने तयार करता यावीत, शेट ताराचंद रामनाथ धर्मार्थ आयुर्वेदीय रुग्णालय तसेच अन्य आयुर्वेदीय रुग्णालये आणि सामान्य जनतेला दर्जेदार व उत्तम औषधे सवलतीच्या दरात उपलब्ध व्हावीत व या औषधांवर संशोधन व्हावे हा या स्थापनेमागचा उद्देश होता.

रसशाळेच्या औषधांची व्याप्ती ही चूर्ण, भस्मे, गुटी, वटी, आसव, आरिष्ट, अवलेह अशी प्रचंड प्रमाणात आहे. केसांपासून पायांपर्यंत (Head to Toe) या सर्वांवरील व्याधींकरिता आयुर्वेद रसशाळेची औषधे उपलब्ध आहेत. दरवर्षी यामध्ये नव्याने भर पडत असते. या वर्षी चित्रकादि वटी, मेदोहर गुग्गुळ, प्रभाकर वटी, प्रवाळ पंचामृत रस, पुष्पधन्वा रस, रजःप्रवर्तिनी वटी अशा ६ नवीन औषधांचे उत्पादन करण्यास सुरुवात झाली आहे.

आयुर्वेद रसशाळेच्या औषधांच्या प्रचार - प्रसारासाठी व वैद्य मंडळींमध्ये औषधांविषयी जागरुकता निर्माण करण्यासाठी विविध महाविद्यालयांच्या सेमिनार, वर्कशॉप आयोजन प्रसंगी रसशाळेच्या औषधांच्या स्टॉलची उभारणी केली जाते. याही वर्षी टिळक आयुर्वेद महाविद्यालयाच्या National Seminar on Ayurvedic Management of Respiratory Disorders या कार्यक्रमात आयुर्वेद रसशाळेतर्फे स्टॉलची उभारणी करण्यात आली होती. तसेच आयुर्वेद व्यासपीठ पुणे येथे जागतिक महीला दिनानिमित्त आयोजित स्त्री रोग परिषदा कार्यक्रमालाही रसशाळेच्या स्टॉलचे नियोजन करण्यात आले होते. तसेच स्वराज्य वैद्यकीय संघ पुणे यांना गरीब व गरजू रुग्णांना वितरीत

करण्याकरीताही आयुर्वेद रसशाळेकडून देणगी स्वरूपात काही औषधे देण्यात आली.

द्रव्यगुण व रसशास्त्र या विषयांच्या पदव्युत्तर अभ्यासक्रमाचा भाग म्हणून विद्यार्थ्यांना एक महीना फार्मसीमध्ये प्रशिक्षण घेणे जरूरीचे असते. या विषयांच्या पदव्युत्तर विद्यार्थ्यांकडून मिळालेल्या प्रतिसादावरून आयुर्वेद रसशाळेकडून हे घेतलेले प्रशिक्षण त्यांना अतिशय उपयुक्त ठरते असल्याचे लक्षात येते.

राष्ट्रीय शिक्षण मंडळाची घटक संस्था असलेली आयुर्वेद रसशाळा ही आयुर्वेद व आधुनिकतेची जोड देऊन नित्य दर्जेदार व शास्त्रशुद्ध औषधांची निर्मिती करत आहे. आयुर्वेद रसशाळेशी निगडीत सर्वच तज्ज्ञ व प्रशिक्षित अधिकारी, कर्मचारी, कामगार हे समाजाप्रती उत्तम औषधांचा पुरवठा व त्यायोगे स्वास्थ्यरक्षण या समर्पित भावनेने काम करत आहेत. या सर्वांना व आयुर्वेद रसशाळेला वर्धापन दिनानिमित्त शुभेच्छा!!



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छंदश्री आंतरराष्ट्रीय दिवाळी अंक स्पर्धा  
द्वितीय पारितोषिक विजेता.

### \* आरोग्यदीप दिवाळी अंक २०२२ \*

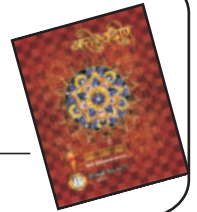
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आपले अनुभव, लेख व जाहिराती त्वरीत पाठवा.

प्रकाशन पूर्व सवलतीच्या किमतीत आपले अंक राखून ठेवा.

अधिक माहितीसाठी त्वरीत संपर्क साधा...

प्रा. डॉ. अपूर्वा संगोराम (९८२२०९०३०५) प्रा. डॉ. विनया दीक्षित (९४२२५९६८४५)



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## शैक्षणिक भेटींची सहल

डॉ. सौ. विनया दीक्षित,  
उपसंपादक

‘वैद्यकीय व्यावसायिकताभिमुख’ अशी शिक्षण प्रणाली आयुर्वेदीय महाविद्यालयांत राबविली जाते. तात्त्विक व प्रात्यक्षिक व्याख्यानांच्या माध्यमांतून विद्यापीठाद्वारा निश्चित केलेला विषयानुसार असलेला अभ्यासक्रम अध्ययन-अध्यापनात येतो. पुढे विद्यापीठांच्या लेखी - प्रात्यक्षिक मौखिक परीक्षांमध्ये याचेच प्रतिबिंब अपेक्षित असते. अर्थात तज्ज्ञ व कुशल वैद्य, चिकित्सक घडवण्यासाठीचे उद्दीष्ट ठेवून प्रत्येक शैक्षणिक वर्षाच्या अभ्यासक्रमाची रचना केलेली असते व त्याचीच पात्रता-पडताळणी परीक्षांच्या माध्यमातून होते. अतिशय सुनियोजित प्रशिक्षण पद्धतीचा हाच मूळ गाभा आहे व तो वर्षानुवर्षे उत्तमपणे राबविला जातो.

तराही नूतन पदवीधारक चिकित्सक वैद्यकीय व्यवसायाची सुरुवात करताना, नव्या रुग्णालयांत वेगवेगळ्या पदांवरची कामे स्विकारताना किंवा संशोधन, फार्मसी, शैक्षणिक वा सामाजिक संस्थांमध्ये आरोग्य विषयक कामांच्या विविध प्रकारच्या व स्तरांतील नोकरी स्विकारताना, अनेकदा साशंक, गोंधळलेले असतात. पुरेसा आत्मविश्वास गाठीशी नसेल तर पूर्ण कर्तृत्वाची वाटचालच डममगणाच्या पावलांनी सुरू होऊ शकते. यातून चांगला हात देणारा मार्गदर्शक लाभला तर ठीकच आहे पण बऱ्याचदा सैरभैरतेने अनेक मार्ग एकाच वेळी चाचपडून कुठेच पूर्ण यशस्वीता मिळत नाही. यातून अनेक हुशार वैद्य वेगळ्याच वाटेवर चालत राहतात.

व्यवहारातील ही अडचण लक्षात घेऊन सर्व अभ्यासक्रमांमध्ये विशिष्ट शैक्षणिक भेटीचा समावेश केलेला असतो. त्यांची कमीतकमी किंवा अपेक्षित संख्या ही निर्देशित असते. जसे औषधी निर्माण कारखाने (GMP certified Pharmacies) पाणीपुरवठा जलशुद्धीकरण केन्द्रे, निसर्गोपचार, मानसरोग चिकित्सालये, वनौषधी प्रचुर नैसर्गिक स्थळे अथवा वृक्ष लागवडीत आणलेली उद्याने, राष्ट्रीय संशोधन प्रयोगशाळा व केन्द्रे, इ. अनेक उदाहरणे सांगता येतील.

या सर्व शैक्षणिक भेटी किती, कशा व कुठल्या स्तरांतील असाव्यात याचे निकष अभ्यासक्रमांत असतातच. फक्त विद्यार्थ्यांसाठीच यांची उपयुक्तता नसून अध्यापक व संबंधीत शैक्षणिक संस्थांनाही यातून बऱ्याच गोष्टींचा लाभ होत असतो.

विद्यार्थ्यांना वर्गात झालेल्या व न झालेल्या पण वैद्यकीय व्यवसायाशी संबंधीत गोष्टी प्रत्यक्ष व्यवहारात कशा घडतात? त्यातील बारकावे कसे असतात? यांचे याची देही याची डोळा

ज्ञान होतेच; शिवाय नित्याच्या चौकटी बाहेर जगात सध्या या विषयांची सद्यस्थिती वेगळ्या वातावरणात अनुभवता येते. हेच अनुभव पुढच्या वाटेची शिदोरी ठरतात. पदवीनंतर पुढे काय? याचे उत्तर ही या शैक्षणिक भेटींमध्ये मिळू शकते. पुढे जाऊन काही नोकरी व्यवसाय सुरू करताना हे प्रत्यक्ष पाहिलेले अनुभव चांगला आत्मविश्वास निर्माण करतात.

प्राधापकांना ही कितीही दशकाचा शिकवण्याचा अनुभव असला तरी आपापल्या विषयांच्या संदर्भात नवीन संशोधने कोणती चालू आहेत? बाजारात औषधांची सद्य स्थिती काय आहे? नव्या निदानपद्धती किंवा चिकित्सापद्धती इतर व्यवस्थापनांत कशा अमलात येतात यासारख्या अनेक गोष्टींची सहजपणे Updated माहिती मिळते. नव्या तज्ज्ञांच्या ओळखी होतात ज्या शैक्षणिक कामकाजांना पूरक ठरतात.

शैक्षणिक संस्थांनाही आपली आजूबाजूच्या अनेक संबंधित केंद्रांशी ओळख जोडता येते. एकमेकांना साहाय्य करून आरोग्य विषयक सुविधांचा प्रचार-प्रसार अधिक सक्षमपणे करण्याचे सामर्थ्य प्राप्त होते. समाजातील विविध स्तरांमध्ये आपल्या संस्थेचे नाव व कार्य पोचवण्याचा एक उत्तम मार्ग म्हणून या शैक्षणिक भेटींचा उपयोग महत्वाचा ठरू शकतो.

एवढे सगळे असूनही दुर्दैवाने अनेक महाविद्यालये अनेकविध कारणांनी या शैक्षणिक भेटींना फारसे महत्त्व देताना दिसत नाहीत. आयोजनाचा अनुत्साह पूरक शैक्षणिक संयोगास हानिकारक ठरताना दिसतो. विविध लाभांशापासून विद्यार्थी-अध्यापक व संस्था तात्पुरत्या सोयीमुळे वंचित राहतात. यासाठी काही अडचणी असल्यास त्यावर चर्चा करून मार्ग शोधणे हे प्राधान्याने करावे. मूळ उद्दीष्ट समजून शैक्षणिक भेटींचे आयोजन जरूर करावे. या उलट काही संस्था या शैक्षणिक भेटी Mega Holidays सारख्या सहलींप्रमाणे ठेवतात. यातून इतर काही लाभ असतीलही पण व्यवहारातील अभ्यासक्रमाचे संपूर्ण होते का? यावर ही लक्ष द्यायला हवेच. थोडक्यात सर्व ताळमेळ साधून परीक्षांची तयारी सुरू होण्यापूर्वीच योग्य वेळी अभ्यासक्रमातील शैक्षणिक भेटींचे सकारात्मक आयोजन करणे निश्चितच गरजेचे आहे. या संदर्भातील आपापले अनुभव आम्हाला जरूर कळवा आपला अभिप्राय स्वागतार्ह आहेच.



आयुर्वेद रसशाळा, पुणे यांची गुणकारी व उपयुक्त उत्पादने...



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### रजःप्रवर्तिनी वटी

कष्टार्तव, अनार्तव,  
स्त्रियांमधील मासिक पाळी  
नियमित व सुसह्य  
होण्यासाठी.



### पुष्पधन्वा रस

रसायन, वाजीकरण, विशेषतः स्त्रियांमध्ये  
गर्भाशयाच्या विकारांमुळे  
आलेले दुर्बलत्व कमी  
करण्यासाठी.



### फेराईट

रक्तामधील लोहाचे प्रमाण वाढवण्यासाठी  
सौम्यभस्मयुक्त,  
कोणताही उपद्रव  
संभवत नाही.



### सूक्ष्म त्रिफळा वटी

त्वचा विकार, डोळ्याचे व घशाचे विकार,  
रक्त शुद्धी करणारे, किडलेल्या दातांवर उपयुक्त  
सर्व प्रकारचे गिलायूशोथ (Tonsillitis), कृमिदंत,  
वारंवार होणार मुखपाक (Stomatitis), अंजननामिका (Stye),  
नेत्राभिष्यंद (Conjunctivitis) पडजीभ सुजणे (Uvulitis).



शास्त्रोक्त व पेटेंट आयुर्वेदिक औषधे तयार करणारी संस्था.

## आयुर्वेद रसशाळा, पुणे

GMP Certified Company



## आयुर्वेद रसशाळा फाऊंडेशन, पुणे

२५, कर्वे रोड, पुणे - ४११ ००४. ☎ : (०२०) २५४४०७९६, २५४४०८९३

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Ayurvedya Masik