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आयुर्विद्या

Peer Reviewed Indexed
Research Journal
of 21st Century
Dedicated to Ayurved...

Ayurvidya

Ayurvidya Masik

।। श्री धन्वंतरये नम: ।।

राष्ट्रीय शिक्षण मंडळ, संचालित

आयुर्विद्या

मासिक

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AYURVIDYA

Magazine

शंखं चक्रं जलौकां दधतमृतघटं चारुदोर्भिश्चतुर्भि: ।
सूक्ष्मस्वच्छातिहृद्यांशुकपरिविलसन् मौलिमम्भोजनेत्रम् ।।
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संपादकीय

झाकोळलेला जागतिक दिन

डॉ. दिलीप पुराणिक

तंबाखूचे (Tobacco) व्यसन ही खऱ्या अर्थाने जागतिक समस्या झाली आहे. तंबाखू आणि तंबाखूयुक्त पदार्थांच्या सेवनाने जागतिक स्तरावर दरवर्षी अनेक मृत्यू होत आहेत.

तंबाखूचा वापर आज अनेक प्रकारे व अनेक पद्धतींनी केला जातो. सर्वात जास्त प्रमाण हे धूम्रपानाद्वारे केले जाते. धूम्रपान हे सिगारेट (cigarettes), सिगार (cigar), बिडी, पाईप, हुक्का ह्याद्वारे प्रामुख्याने केले जाते. तंबाखूयुक्त धूम्रपानामुळे शरीरावर अनेक प्रकारे दु:ष्परिणाम होतात, तसेच अनेक व्याधी होण्याची शक्यता असते. ह्यामध्ये प्रामुख्याने कॅन्सर, Lung Attack, हृद्‌रोग, Stroke, फुफ्फुसाचे विकार, मधुमेह, Chr. Obstructive Lung Disease (COPD) होण्याचा धोका असतो. COPD मध्ये Emphysema, Chr. Bronchitis होण्याचा धोका असतो. ह्या बरोबरच T.B., Eye Diseases, Immune system संबंधित Rheumatoid Arthritis सारखे व्याधी होण्याची शक्यता असते. डोळ्यांच्या विकारांमध्ये Cataract, Macular Degeneration, Yellowing of Eyes होण्याची शक्यता असते. ह्याखेरीज नाक, ओठ, जीभ, मुख, तसेच घसा व स्वरयंत्राचा कॅन्सर होण्याचा धोका असतो. अर्थात ह्यामध्ये तोंडाची चव जाणे, वास न येणे अशी अनुषंगिक लक्षणे दिसतात.

तंबाखूचे सेवन करण्याच्या इतर पद्धतींमध्ये मुखाद्वारे सेवन (chew) करणे. भारतात कच्चा तंबाखू, गुटखा, पान मसाला, खैनी ह्याद्वारे तंबाखूचे सेवन केले जाते. मुखाद्वारे तंबाखूच्या सेवनाने सर्वात जास्त धोकेदायक ठरणारा व्याधी म्हणजे कॅन्सर. Oral cancer मध्ये Tongue, cheeks, palate, lips ह्या ठिकाणी तसेच घसा (Pharynx), अन्ननलिका (Eesophagus) ह्यांचाही कॅन्सर होण्याचा धोका असतो. त्या अनुषंगाने हिरड्या व दातांचे विकार, मुख व श्वास दुर्गंधी अशी लक्षणे बघावयास मिळतात. ग्रामीण भागात स्त्रीपुरुषात तंबाखू सेवनाचा सर्वाधिक प्रिय प्रकार म्हणजे 'मिस्त्री' लावणे.

तंबाखू सेवनाचा आणखी एक प्रकार म्हणजे तंबाखूची पावडर (तपकीर) नाकाने हुंगणे (sniff). परंतु वरील दोन प्रकारांच्या मानाने हा प्रकार कमी लोकप्रिय आहे. अर्थातच ह्या प्रकारामध्येही 'धोके' सर्वसाधारण तेवढेच असतात.

'तंबाखू' व तंबाखूजन्य पदार्थांच्या सेवनाने अतिशय गंभीर व धोकेदायक व्याधी होण्याची शक्यता माहीत असूनही जगात जवळ जवळ नऊ कोटी प्रौढ (Adults) आणि सुमारे सव्वासहा लाख लहान मुले तंबाखूचे विविध प्रकारे सेवन करतात. तंबाखूच्या व्यसनाने एकट्या भारतात सुमारे एक दशलक्ष व्यक्ती दरवर्षी मरण पावतात. जागतिक स्तरावर ही संख्या दरवर्षी सुमारे पाच दशलक्ष एवढी प्रचंड आहे. प्रत्यक्ष धूम्रपान न करणाऱ्या परंतु धूम्रपान करणाऱ्या व्यक्तींच्या सान्निध्यामुळे नकळत धूम (Passive Smoking) घेतल्याने मृत्यू पावणाऱ्यांची संख्याही खूप मोठी आहे.

तंबाखूच्या व्यसनामुळे अथवा सेवनामुळे होणाऱ्या दु:ष्परिणामांच्या बाबत जनजागृती करण्यासाठी जागतिक आरोग्य संघटनेच्या (WHO) पुढाकाराने व्यापक प्रमाणावर मोहीम उघडण्यात आली आणि त्यातूनच सन १९८७ पासून दरवर्षी ३१ मे रोजी "World Tobacco Day" घोषित करण्यात आला. तंबाखूच्या धोक्यांबाबतीत व्यापक प्रमाणावर जनजागृती करण्याच्या दृष्टीने दरवर्षी ३१ मे रोजी एक 'Theme' घोषित केली जाते व त्या विषयास अनुसरून विविध कार्यक्रमांचे आयोजन केल जाते.

सन २०१९ साठी घोषित केलेला विशेष विषय (Theme) होता, "Tobacco And Lung Health", तर २०२० ह्या वर्षासाठी विशेष विषय होता, "Protecting youth from Industry-Manipulation and Preventing Them from Tobacco and Nicotine Use"

सन २०२१ साठी WHO ने "No Tobacco Day" साठी घोषित केलेला विशेष विषय होता, "Commit To Quit". 'तंबाखू' सोडण्याचा दृढ निश्चय असे स्वरूप. परंतु २०२१ च्या एप्रिल, मेच्या दरम्यान सर्व जगात, विशेषत: भारतात "COVID 19" च्या दुसऱ्या लाटेमुळे गंभीर परिस्थिती उद्‌भवलेली असल्याने ३१ मे हा World No Tobacco Day काहीसा झाकोळला गेला. ह्या दिवसाच्या निमित्ताने दरवर्षीप्रमाणे अनेक कार्यक्रम संपन्न झाले असते. परंतु उद्‌भवलेल्या परिस्थितीमध्ये शासकीय अथवा अशासकीय संघटनांनाही हे शक्य झाले नाही.

वास्तविक तंबाखू व्यसनाचे गांभीर्य एवढे आहे की वर्षातून एक दिवस जनजागृती किंवा तंबाखू विरोधी मोहीम उघडून भागणार नाही तर वर्षातील प्रत्येक दिवस "No Tobacco Day" समजून मोहीम चालविली जाणे आवश्यक आहे. भारतातील महाराष्ट्र, केरळ ह्या राज्यांनी गुटखा, पानमसाला, हुक्का, सार्वजनिक ठिकाणी धूम्रपान ह्यावर व त्यांच्या उत्पादनांवर घातलेल्या बंदीप्रमाणेच इतरही राज्यांनी बंदी घातल्यास आणि तंबाखू व्यसनाधिनांनी "Commit To Quit" चा निश्चय केल्यासच ""तंबाखू"" ला 'खो' बसणार आहे.

Comparison Of Four Scribes Manuscripts Of Jwara Timir Bhaskar

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Introduction - The main source of Ayurvedic knowledge today is Samhitas. We have very few samhitas which are available with us. Ashtang hruday in verse says "Ashtang sangraha and hriday are written as a essence of the vast literature available in Ayurveda" This is indicative of availability of the samhitas at that time. When we look back the history of the Ayurveda knowledge was exchange in the form of "Guru Shishya" tradition which was initially Oral tradition.

Oral tradition of knowledge in ancient time gradually come in form of writing in the form of Manuscripts. The manuscript is a handwritten composition on paper, bark, cloth, metal, palm leaf or any other material dating back at least seventy-five years that has significant scientific, historical or aesthetic value. The primary resources of the knowledge of various science like traditional medicine, culture, philosophy etc. ancient literature in the form of Mss, most of which are yet to be studied and published. National manuscript mission dat indicated availability of 2340000 Manuscripts. More than lakh in Sanskrit. The can act as treasures of knowledge in many fields. Even for Ayurved information of drugs, disease, classification of diseases, new formulations, elaboration in treatment and principle, new instruments, new methods of Purifications for metals and non metals, anupan, kala etc.

Manuscripts in Ayurved are of various types. They are dedicated to different topics. some like "kalagyan vichar" based on few diagnostic issues. , Bhishakchakrachittotsav a compiles short book on Nidan, Some on formulation like Vaidyavallabha , Yogshataka , Some on explaining one part like Pathyapathya sangrah and on Dravyaguna like "paryaymuktavali" and rasashashtra "Rasapradeep ". Some sharing experience of Vaidyas for Vaidyamanotsav, Vaidyaksar. Few only on Chikitsa like "Madhav Chikitsit" Very few on single disease like "Arshoghnasudhakar". Jwara Timir bhaskar (JTB) is one such manuscript(Mss) on disease Jwara written in 16 century was observed in Catalogue of Vaidya. Literature was searched for JTB. it was not published and was in the list of unpublished Mss from Indira Gandhi National Institute for culture and arts (IGNICA). The MS was searched thoroughly in MS libraries, lists of published books of various publications and libraries. From New Catalogues Catalogorum , it is found that, this MS is present at 16 several places. Amongst them four were collected From Bhandarkar Oriental Research Institute, Pune (BORI)

Objective : To Study four scribes of Mss Jwara Timir Bhaskar (JTB.)

Material and Methods : Four codices of Jwara Timir Bhaskar collected from Bhandarkar Oriental Research Institute, Pune (BORI)

C1: Jwar Timir Bhaskar [JTB1] (Catalogue Vaidyak, BORI, Pune) No 86 (1050/1886-92)

C2: Jwara Timir Bhaskar [JTB3] (Catalogue Vaidyak, BORI, Pune) No 88 (920/1884-87)

C3: Jwara Timir Bhaskar [JTB2] (Catalogue Vaidyak, BORI, Pune) No 87 (892/1887-91)

C4: Jwara Timir Bhaskar [JTB4] (Catalogue Vaidyak, BORI, Pune) No 89 (455/1895-98)

Methodology: Four codices of Mss JTB were photocopied from the BORI, Pune. They were processed as per manuscriptology study for comparison.

Incorrectness - Manuscript is in Sanskrit still incorrectness was observed in the Mss.

Points for comparison : The methodology for manuscript processing was followed in following points Structural details of mss, form and size of manuscript, Technique, Punctuation, Abbreviation, Colophon, Illustration, Decoration, Correction, Script,

language.

Results and Discussions

Codices of JTB

C1 Jwar Timir Bhaskar[JTB1] (Catalogue Vaidyak, BORI, Pune) No 86 (1050/1886-92) Size 10.1/2 in by 4.2/5 inch. 80 pages, 10-11 lines per page, 25-32 letters in line.

Country Paper, Devnagri Character, Two hand writing on two sort of pages, folio 1-52 bold but shaky hand writing, paper is old, musty and worn out. Borders have double lines in black ink on both the sides, mark of punctuation and colophons are in red ink. Topic headings tingled with red pigments. Fol 53-80 are written in good hand. There are no border lines and border lines are tinged with red pigments. Fol 69-76 have lacunae. There are marginal notes in Ms. Author is Kayashtah Chamunda who have completed work in Sam 1646 i.e. 1590 AD

Ref A Aufrecht's catalogus categorum 214. Mitra's Desc. Catalogue of Bikaner Ms. P 643. No 404.

C2 Jwara Timir Bhaskar[JTB2] (Catalogue Vaidyak, BORI, Pune) No 87 (892/1887-91)

Size 10/3/10 in by 4.3/10 inch. Extent 75 leaves, 9 lines to a page, 35-44 letters to a line. Country paper, Devnagari Character, hand writing good, borders have two rows of three lines, one line in red ink. Benedictory phrase, topic headings and topic endings, punctuation, verse no. and colophons in red ink. The hand writing is bold at the begging and smaller towards end. Paper is very old musty, worn out and brittle. Samvit 1763.

C3 Jwara Timir Bhaskar[JTB3] (Catalogue Vaidyak, BORI, Pune) No 88 (920/1884-87)

Size 9.1/2 by 5.7/10 in. 177 leaves 10 lines to a page, 26 letters to a line. Country paper, devnagari character, several hand writing, all bad and childish, except on folio 1 B and 114 to 116. All letters have separate headlines full of lacunae. Fol 67a, 69a, 73a, 75a, 77a, 79a, 80a, 81a,82a, 84a, 89a, 92a, half of 92b, 102a, 103 (IIb) 108b, 112b, half 113b are blank. 103 repeated. Benedictory phrase, topic headings and topic endings, punctuation, verse no. and colophons in red ink. The hand writing is bold at the begging and smaller towards end. Paper is very old musty, worn out and brittle. Place of Trasscription, Ajmer. Sam 1689.

C4 Jwara Timir Bhaskar [JTB4] (Catalogue Vaidyak, BORI, Pune) No 89 (455/1895-98)

Size- 12.7/10 in by 6 in. Extent 55 leaves, 11 lines per page, 55 letters per line. Country paper, devnagari character, Hand writing good, Benedictory phrase, topic headings and topic endings, punctuation, verse no. and colophons in red pigment. Paper is thick, old and musty. Last page is worn out. Samvit 1875. As JTB1 was earliest in the period so study was started with JTB1.

Codec

a) Form and Size of Mss JTB

Form - pages of Mss are unstitched. Paper of MSS is old country paper. Ink used to write MSS is of Black colour. All leaves of MSS are in uniform size. Form - In the form of Hand made paper sheet which are not stitched together. Size - All leaves of MSS are in uniform size. There are Total pages very from 80 to 177 as per scribe Total verses - very in each scribe. 1480 to 1501 average 1342 and 1610 in total.

- Number of verses which are numbered are 358-598 unusual numbering in various scribes.
- Number of verses which are not unnumbered are 923 to 1222 as per Mss.
- Average lines - 7 to 11 as per scribe Average letters 14 to 22 per line.

Codec 4

Technique - Ms is written with ink. The writing is horizontal lengthwise and in perfect straight lines. In all codices of JTB. In each page the

letters are in equal size, on the same base line and of same height and style. Sufficient margin is left on either ends of the sheet and writing is full from top to bottom. Perfect alignment is maintained at both ends of the lines.

a) Pagination found in MSS JTB - The folios are numbered. There are different folios in Mss JTB1 80, JTB2 , JTB3 177, JTB4 45.

b) Punctuation - The punctuation mark present in MSS is vertical strike called Danda, double Danda are put at the end of each verse which is similar to the commonest Sanskrit writing type. Serial number for verse is present at the end of each verse.

JTB1 Begins with verse numbers for first three chapters. Ii chapter starts with fresh numbering. Third chapter starts with continued numbering. C10 numbered few.

JTB2 Begins with number initially. After 4 folios has no numbering.

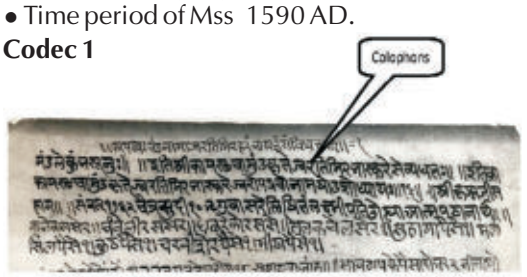
JTB3 Complete mess in numbering folios. Sometimes on two sides, sometimes not at all. Sometimes wrong numbering.

c) Abbreviation - There is abbreviation at pagination. "Jwa. Bha." Or "Ti. BHa." Or "Jwar." Various combinations were observed as per scribe.

d) Colophon - At the end of a work is given the colophon. A colophon at the end of this MSS contains.

- Title of the work given a Jwaratimirbhaskar.
- Name of author Kayastha Chamunda.
- Information of author Place / Desha, Medapat / Mewar, King Mallaraj, Nakshatra Sharabhu.
- Reference of teachers (Guru) and parent Father Kumba.
- Aim of writing MSS given in two places. Objective at begiing and in colophons.
- Time period of Mss 1590 AD.

Codec 1

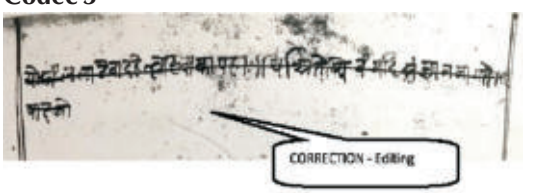


e) Illustration - Book illustration is the art of embellishing a MSS, book by painting picture in gold/red/yellow colours etc. They are found mostly in paper MSS. But there is no illustration present in this MSS.

f) Decoration - MS is not decorated by author. Red ink or Pigmentation is only observed at Benedictory phrase, topic headings and topic endings, punctuation, verse no. and colophons.

g) Correction - Errors are bound to occur while coping or writing the MSS. We find correction made in MSS, but we are not sure if the correction was done as a part of copying work. There are many types of correction. In this MSS to indicate correction small horizontal strokes are drawn above each word to be corrected. Corrected words or additions are indicated in margins. Some letter/s or word/s is adding a line. Such additions are written above the concerned line or indicated in the margin

Codec 3



Types of error - Errors observed are of four types, whatever may be their causes.

1) Deletion or Omission - This is mostly mechanical error. Types of omission are as follows:

Simple omission due to oversight or more due to carelessness or negligence of scribe, there occurs omission of a letter, a word or even a line.

Omission of serifs - The vowels sign that are put above and below the letters are called serifs and these sometimes are omitted.

3) Haplography - When the same or similar phonemes occur in a series, one or two of them tend to be dropped. This is called haplography. Words between two words having similar phonemes are often dropped along with one of the similar phonemes.

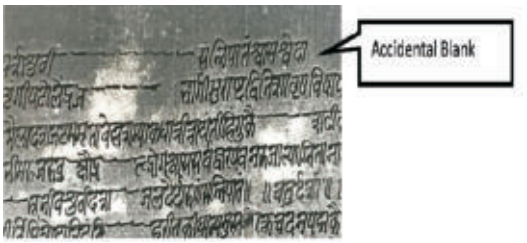
- **Addition -** Additions from C2, C3, C4 were recorded.

Substitution - Substitutions were observed.

Orthographic confusion: were observed in all four scibes.

Accidental blank - Accidental blanks were present in all scribes. C3 also shows complete blank pages, lines, dotted lines.

Codec 2



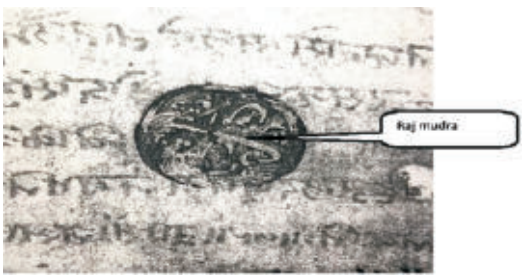
Marginalia - The writing in the margin of MSS is called Marginalia.

All C1,C2,C3,C4 has marginalia, Name of the Manuscript, Abbrevation of Ms JTB, corrections, missing letters, lines and additions.

Explanation - Replacement or substitution done later is written in the nearest marginal space. Some words are added and explanations are made also written in marginal space. Writing is same as original text, it confirms that this explanations are done by scribe. JTB 1

Kinds of texts - Generally an author writes out his own composition. A copy of a text written by the author himself is called Autograph copy. MSS JTB not an autograph copy. It was not possible to find.

Codec 3



Types of Handwritings: multiple handwritings were observed in all codics. C3 Almost six hand writings. It also has a official stamp of king. Probably it was written by may scibes on duty.

Script - Collected Mss was rewritten. Efforts were taken to understand the script written in Mss. Script Devnagari in all codices,

Language : Manuscript is in Sanskrit. All the codices are in Sanskrit. Incorrectness was observed in all the manuscripts. Few comments in Hindi were observed at the end of JTB2. JTB3 has multiple handwritings, many pages are written in illegible hand writing.

Conclusion - JTB is complete mss written by Kayastha Chamunda in 16 century. Four scribes collected are from different regions of India and has difference in number of pages, number of verses, Script is Sanskrit with one exception of Hindi occasionally. As size and page and hand writing differed in all, it is a challenge for further collation and study. Many folios are unnumbered, incorrect numbering and even verses are incorrect numbering / no numbering, it is challenging for further study. Geographical distinctness is present in 4 codices. Peculiarities based on that will be critical point in study. Marginal writing is observed as abbreviations, corrections and additions or editing marks. It needs more attention while further study. Accidental blanks, dots and intentional skipping of verse observed. Similarly difference of 400 + verse is noted in four copies. It indicates more efforts are required for understanding original copy. More scribes will be beneficial for understanding stemma or for further critical study of manuscript.

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2) New Categories Categoricum, Manuscript Library, Chennai, India.

A Review On Avarana Chikitsa In Ayurveda

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Introduction - All the functions of the body is controlled by three fundamental factors called Tridosha. Among these 3 doshas, Vata has very much significance. It plays a key role in the maintenance of the body in a normal healthy state. Due to certain nidanas doshas get vitiated gets accumulated in the srotas and produce diseases. Srotodushti occurs in 4 ways Atipravrutti, Sanga, Vimarga Gamana and Siragrandhi[1]. Various types of manifestations of the diseases of Vata are being explained. They include the Nanatmaja Vikaras, Gata Vata, Avarana, etc having different samprapti. Mainly vitiation of vata occurs in 2 ways Dhatukshaya (depletion of dhatus) and avarana (obstruction)[2]. The word "Avarana" means Avarodha and Gatinirodha. It means obstruction to the normal movements and functions of vayu.

Avarana is very helpful in discussing the samprapti of many diseases. The wrong diagnosis of Avarana Vata may lead to faulty management which may deteriorate the condition. In many of the cases, it goes unidentified or mistaken as associative Dosha due to lack of observations and skill. But once identified it helps in designing the management protocol of a particular disease.

Aim - To compile the concept of Avarana and its Chikitsa from Ayurvedic literature.

Objective - To explore the concept of Avarana from Ayurvedic literature and its clinical application.

Materials And Methods - Charak samhita sutrasthan, Chikitsasthan, Sushruta samhitha sutrasthan, Ashtanga Hridhaya Nidansthan chikitsasthan. An attempt has been made to compile the various references of Avarana from different samhitas and commentaries.

1) Nirukti - The word 'avarana' means Avarodha and Gatinirodha. (Ayurveda shabdakosha). It means obstruction/resistance to the normal gati of vayu. The components of vata avarana are 'Avaraka' and 'Avruta'[3]. avaraka is the component that covers vata and obstructs it. Avruta is that which is covered. Eg. While we are eating food agni is getting covered with ahara (annavruta agni), here anna is the avaraka and agni is the avruta.

2) Difference between Gatavata and Avarana vata

Gata vata	Avarana vata
Nidana apatarpana	Nidana - santarpana (except in anyonya avarana and ashayavrut vata)
Lakshana - vata pradhana lakshana	Lakshana - Avaraka lakshana
Laghu sheeta rookshadi guna vriddhi	Gati hani
Causes dhatukshaya	Causes dhatu vriddhi
Chikitsa - vatavyadhi samanya chiktsa	Chikitsa - avarana chikitsa
Causes Degenerative diseases	Causes metabolic diseases

3) Etiology[4] - If we eat food it comes in contact with agni and proper digestions occur and samyak dhatus were formed. There are 3 factors that are responsible for the proper formation of dhatus and sharira. Proper dhatvagni, vayu, and no resistance are needed for proper metabolism. If we took food it comes in contact with agni and proper digestion occurs and the samyak dhatus were formed. While describing the samprapti of

avarana it is rasanimittaja, all avaranas start from the rasa dhatu. The etiological factors are kaphakara ahara sevana, adhyasana, vidahi anna, avyayama, divaswapna, etc similar to that of metabolic diseases.

4) Pathogenesis of avarana - Due to these nidanas forms amaja annarasa and turns into madhura rasa and circulates all over the body and it causes symptoms like sthoulya, fatigue, shortness of breathing, excess sweating, etc. then the person becomes weak and unable to do day-today activities. Due to this etiology, the avaraka (pittadi dushya) increases quantitatively and hampers the functions of vata (avruta). So there is dhatuvriddhi in avarana samprapti. The samprapti is similar to that of metabolic diseases in the present era. The symptoms of the Avarana depend upon the place where Dosha-Dushya Sammurchana has taken place. For instance, the symptom of Shula of Avrita Vata may occur in the different parts like head, ears, abdomen, back, depending upon the organ involved in the process of Avarana.

4.1) Avarana samprapti in other diseases - According to sushruta due to obstruction of kapha and medas it produces diseases like Prameha pitaka, Jwara, Vidradi, Bhagandhara, Vatavikara, etc. The pathogenesis of Avarana Atipravrutti leads to sangha. Which intern leads to vimargagaman due to this hridroga, pleeha, gulm like complication.

4.2) Avarana modern aspect -

1) Circulatory system - atherosclerosis of coronary artery causes angina pectoris, ischemic heart diseases, etc. Atherosclerosis in peripheral vessels causes obstruction to blood flow and peripheral vascular diseases

2) Neurological disorders - Parkinsonism, TIA, Stroke, etc.

3) Endocrine disorders - PCOS, Thyroid disorders, Diabetes, etc.

4) Various GI tract disorders and musculoskeletal disorders.

5) Types of avarana -

1) By Anya Avarana of Ama, Kapha, pitta, Mala etc. It is general or samanya avarana and it is of 22 types.

2) Anyonya avarana is obstructed by the other 5 varieties of vata. It is of 20 types.

6) Management of Avarana[5,6] - In avarana chikitsa firstly aims at nidana parivarjana, avoidance of sedentary lifestyle, avyayama, divaswapna, etc. Dalhana mentioned rooshana chikitsa, medoghna, chedana, and srothovisodhana chikitsa for avarana samprapti. It can be considered as the treatment for current metabolic disorders like PCOS, Diabetes, etc. In kapha pitta avruta vata patient should be treated with Anabhishyandi, Snigdha, Kapha pitta Aviruddha, srotovishodhana and vatanuloma therapies. Administration of Yapan basti like mustadsi yapana basti, Sramsana chikitsa if the patient is having good bala, and Rasayana chikitsa like shilajatu can be done after analyzing the bala of the patient and the stage of the disease. Anya Avarana can be treated successfully after adopting these treatment modalities, whereas treatment of Anyonya Avarana is not simple. Different varieties of Panchakarma treatments are planned in order to remove the obstruction and put the specific variety of Vata in its own path.

6.1) Symptoms and Treatment of Anyonya avarana Vata[7,8]

1) Pranavruta vyana vata : Loss of functions of the senses, memory loss and loss of strength.

• Treatment - Urdhwa jatrugata chikitsa.

2) Vyanavruta prana vata : Excessive sweating, Horripilation, skin diseases, and numbness in the body.

• Treatment - Sneha yukta virechan.

3) Pranavruta samana vata : Difficulty in speech, slurred speech, dumbness.

• Treatment - yapana basti, Chatusprayoga sneha - gives bala to samana

4) Samanavruta apana vata : causes diseases

like grahani, Parshwa / Hridgada and colic pain in the stomach.

• Treatment - Agnideepak ghrita

5) Pranavruta udana vata : Stiffness of the head, rhinitis, obstruction to inspiration and expiration, heart diseases and dryness of the mouth.

• Treatment - For such patients, therapies prescribed for the treatment of the diseases of the head and neck should be given and the patient should be comforted.

6) Udanavruta prana vata : Loss of the functions, Ojas, strength and complexion. There may be even the death of the patient.

• Treatment - He should be slowly sprinkled with cold water, consoled and comforted.

7) Udanavruta apana vata : causes Vomiting and diseases like asthma.

• Treatment - Basti, Vata anulomak annapana.

8) Apanavruta udana vata : produce Unconsciousness, suppression of the power of digestion and diarrhea.

• Treatment - Vamana, Agnideepan, Grahi annapana.

9) Vyanavruta apana vata : Vomiting, abdominal distension, udavarta, gulma and parikartika.

• Treatment - Snigdha anulomana kriya.

10) Apanavruta vyana vata : Excessive discharge of stool, urine and semen.

• Treatment - Sangrahi chikitsa.

11) Samanavruta vyana vata : Fainting, Drowsiness, delirium, diminution of Agni, Ojas as well as strength.

• Treatment - Laghu bhojana vyayama.

12) Udanavruta vyana Vata : Stiffness, loss of Agni, loss of sweating, loss of activities and closure of the eyes.

• Treatment - Alpa and Laghu bhojana.

6.2) Symptoms and treatment of anya avarana vata[9,10,11,12]

Pitta avruta vata : Produces symptoms like Daha, Trishna, Shoola, Bhrama, Tama, Sheeta kamita.

Treatment - alternate sheeta - ushna kriya, madhura tikta oushada, virechana, kshira basti, jeevaniya sarpi, etc

Kapha avruta vata : Causes symptoms like shaitya, Gaurava, Shoola and Langhan, aayasa, ruksha, usna kamitva.

Treatment - vamana when kapha is in amashaya and virechana when it is in pakvashaya, tikshna swedana, niruha basti, jirna sarpi, etc.

Raktavruta Vata : When Obstructed by Rakta, there is a burning sensation, severe pain inside skin and Muscles, the appearance of red swelling and red patches on the skin.

Treatment - vatashonita chikitsa.

Mamsavruta Vata : When Obstructed by Mamsa, there is hard swelling and eruption of various colors, horripilation and the feeling of ants crawling on the body.

Treatment - swedana, abhyanga, mamsarasa, kshira and sneha prayoga.

Medavruta Vata : Swelling on the body which is movable, unctuous, soft and cold, Loss of taste/ appetite are the symptoms when covered by Meda. This condition is known as Adhyavata and is difficult to cure.

Treatment - In Adhyavata Pramehagna, medogna and vatahara chikitsa is to be done.

Asthyavruta Vata : When obstructed by Asthi, the body is very hot to touch, finds comfort by squeezing (massaging, pressing), feels as though being pricked by needles severely, weak and painful.

Majjavruta Vata : When Obstructed by Majja, there is bending of the body parts, more of yawning (feeling of) encircling the body (by rope, cloth, etc.), and pain, which subsides by pressing with hands.

Treatment - When enveloped by Asthi & Majja do bahya aabhyantar snehana and Mahasneha prayoga.

Shukravruta Vata : When Obstructed by Shukra, the ejaculation occurs with great force

or not at all, or it may become fruitless.
Treatment - Harsha and annapan responsible to increase bala of shukra are given. Virechan is advised if the marga is obstructed followed by a diet regimen.

Annavrut Vata : When Vata is obstructed by Anna, there is a pain in the abdomen soon after consuming food, subsides after digestion.
Treatment - Vaman, deepan, pachan and laghu bhojana.

Mutravruta Vata : When Obstructed by Mutra, there is no elimination of urine, but causes distension of the urinary bladder.
Treatment - svedana, uttarbasti.

Malavruta Vata : When Obstructed by Mala, there is obstruction down below (constipation) and causes cutting pain in its own place (in the large intestine and rectum), fat gets digested quickly, the person develops flatulence by partaking food, the feces thus troubled by food, is expelled with difficulty.
Treatment - Drinking of eranda taila, basti and sneha which produce purgation is ideally suited.

Discussion And Conclusion - It is easy to understand the concept of ayurveda once we are using our knowledge in the basic principles of Ayurveda. While we are managing several conditions as the usual treatment protocol is not working as expected, thus we think of concepts like Avarana toi explain the pathogenesis. The concept of avarana helps us to explain the samprapti of various diseases, for accurate diagnosis and proper management. It is only the experience and keen observation of a physician will make him to become a master in diagnosis and treatment with the help of theoretical knowledge.

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Congratulations!

Dr. Mohan R. Joshi Passed Ph. D. (Ayu.)

Thesis, titled "The Critical Evaluation of Manuscript Jwara Timir Bhaskar" presented by Ph.D. scholar Dr. Mohan R. Joshi to M.U.H.S. has been accepted by the University and has declared candidate eligible for the degree of "Doctor Of Phylosophy" (Ph.D.) Ayu. Dr. Joshi completed his Thesis work under the guidance of Prof. Dr. Priyanka A. Aher at R. S. M's Research Institute of Health Sciences and Management, Pune.

Rashtriya Shikshan Mandal, RIHSM, Tilak Ayurved Mahavidyalaya, Ayurvidya Masik Samiti Congratulates Dr. Mohan Joshi for his brilliant success.

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

शार्ङ्गधरोक्त श्वासव्याधीवरील चिकित्साकल्प - एक अध्ययन

वैद्य. वैष्णवी अ. जोशी, पद्व्युत्तर विद्यार्थिनी
रसशास्त्र व भैषज्यकल्पना विभाग
टिळक आयुर्वेद महाविद्यालय, पुणे

वैद्य. विनया दीक्षित, सह प्राध्यापक
रसशास्त्र व भैषज्यकल्पना विभाग,
टिळक आयुर्वेद महाविद्यालय, पुणे

प्रस्तावना :

श्वास हा प्राणवहस्रोतसाची दुष्टी करणारा व्याधी आहे. आयुर्वेदसंहिता ग्रंथांमध्ये याचे पाच प्रकार व त्यानुरूप चिकित्सा वर्णन केली आहे. हा प्रत्यक्ष व्याधी स्वरूप व काही व्याधींमध्ये लक्षण स्वरूप किंवा उपद्रव स्वरूप उत्पन्न होतो. प्राण, व्यान, उदानवायूंच्या गतिला अवरोध झाल्यामुळे प्राणवहस्रोतसाच्या कार्यामध्ये विकृती निर्माण होते व श्वास व्याधी उत्पन्न होतो. आत्ययिक अवस्थेमध्ये हा व्याधी असाध्यतेकडे जातो. COVID-19 या व्याधीमध्ये श्वास हा उपद्रव स्वरूप दिसत असून, प्रवृद्ध अवस्थेमध्ये प्राणघातक ठरत आहे. याचप्रमाणे अन्य प्राणवहस्रोताचे व्याधी उदा. COPD, Chronic bronchitis, pleural effusion इत्यादी रोगसुद्धा प्राणघातक ठरतात. लक्षणानुरूप तुलनात्मक अभ्यास केल्यास शोष, कास, राजयक्ष्मा, उरःक्षत या व्याधींचे चिकित्सा उपक्रमसुद्धा श्वास व्याधीमध्ये चिकित्सेकरीता सहाय्यक ठरतात. शार्ङ्गधरसंहितेमध्ये भैषज्यकल्पनेनुसार विविध कल्पांचे वर्णन केले आहे. त्यातील अनेकविधकल्प श्वासव्याधीवर चिकित्सा करण्याकरिता उपयुक्त ठरू शकतात. त्यांचे अध्ययन करून आयुर्वेद उपचार पद्धतीद्वारा सद्यकाळामध्ये रुग्णजीवन वाचविण्याकरता प्रयत्न होणे क्रम प्राप्त आहे.

संकल्पना : श्वास व्याधीची चिकित्सा करण्याकरिता निदानाचा अभ्यास आवश्यक ठरतो. त्याकरिता अष्टांग हृदयामधील श्वास निदानाचे अध्ययन केले आहे.

श्वासव्याधीहेतू :

कासवृद्ध्या भवेत् श्वासः पूर्वेः वा दोषकोपनैः।
रजोधूम अनिलैः ममर्चघातादतिहिमाम्बुना।।
(अ.हृ.नि.४/१,२)

सद्य उपस्थित कास रोगाची वृद्धी होऊन अथवा वातादीदोष प्रकोपामुळे श्वास व्याधी उत्पन्न होतो. रज, धूम, वात व अतिशीत जलसेवन तसेच प्राणवह स्रोतसाशी संबंधित मर्मावर आघात झाल्यामुळे देखील श्वास व्याधी उत्पन्न होतो.

श्वासरोगनिदान :

कफोपरुद्धगमनः पवन विश्वागस्थितः।
प्राणोदकान्नवाहिनी दुष्टस्रोतांसिदूषयन।।
उरस्थः कुरुते श्वास आमाशयसमुद्भव। (अ.हृ. नि.४/३)

प्रकुपित कफदोषामुळे सर्व शरीरात संचार करणाऱ्या वायूची गती अवरुद्ध होते. हा वायू प्राण, उदक व अन्नवहस्रोतसांची दुष्टी करून उरप्रदेशी स्थानवैगुण्य करून श्वास व्याधी उत्पन्न करतो. या व्याधीचे उद्भवस्थान आमाशय तर व्यक्ति स्थान उर आहे.

कफ ज्वर, कफवात ज्वर, रक्तपित्त पूर्वरूप, क्षतज व क्षयजकास, राजयक्ष्मा, वातज मदात्यय, अर्श, वातज ग्रहणी, विषवेग इत्यादी रोगांमध्ये श्वास व्याधी लक्षण स्वरूप आढळतो.

कास, पाण्डु इत्यादी रोगांमध्ये श्वास व्याधी उपद्रवस्वरूप आढळतो.

श्वास व्याधी प्रकार :

क्षुद्रस्तमकःछिन्नोमहाउर्ध्वः च पंचमः। (अ.हृ.नि.४/२)
(तक्ता क्र.१ पाहा)

उपरोक्त ५ पैकी क्षुद्रश्वास चिकित्सेविना शमन होणार असून संहिताकारांनी महा, उर्ध्व, छिन्न हे ३ नैसर्गिकरित्या असाध्य सांगितले आहेत. तरी त्यांची चिकित्सा करणे आवश्यक आहे.

शारंगधर संहिता महत्त्व : शार्ङ्गधसंहिता ही मध्यम कालखंडातील असल्यामुळे यामधील काही कल्प हे सद्यकाळात सहजरित्या उपलब्ध होतात. कल्पांमधील घटकद्रव्ये ही सहज उपलब्ध होत असून कल्प निर्माण करणे शक्य आहे. तसेच हा भैषज्यकल्पनेचा प्रमुख ग्रंथ असल्यामुळे श्वास व्याधीकरिता उपयुक्त अशा विविध कल्पना या संहितेमध्ये आढळतात. दूष्य, देश, बल, काल... या दशविध परीक्षाद्वारा अभ्यास करून विविध भैषज्यकल्पना या ग्रंथाच्या अध्ययनातून करणे शक्य आहे. बृहत्रयींमध्ये चिकित्सा उपक्रमावर अधिक भर दिला असल्यामुळे,

शार्ङ्गधर संहितेमधील कल्पांचे संकलन व अध्ययन केले आहे.

(तक्ता क्र.२ पाहा)

विमर्श : शार्ङ्गधर संहितेमध्ये तीनही खंडामध्ये श्वास चिकित्सेबद्दल उल्लेख आले आहेत.

• प्रथम खंडामध्ये मान परिभाषेचे वर्णन आले असून, कल्पांची मात्रा ठरवण्याकरिता सहायक ठरते. औषधी कालवर्णन हे दिवसातील दोष अवस्था व भोजन अवस्था या नुसार असून हे देखील औषध सेवनाकरिता काळ निर्देशक ठरते.

• प्रथम खंडामध्ये 'नाभीस्थः प्राणापवनः स्पृष्टवा हृदकमलांतरं...' असे प्राणवायूच्या प्राकृत गतीचे व कार्याचे वर्णन केले आहे. त्याचप्रमाणे त्रिदोष, धातू, मल, शरीरचना इत्यादींचे वर्णन आहे. हा पूर्वाभ्यास श्वासव्याधी निदान व चिकित्सेकरिता उपयुक्त आहे.

• द्वितीय खंडामध्ये प्रत्यक्ष कल्पांचा उल्लेख आहे. यामध्ये भैषज्यकल्पना तसेच रसकल्प या दोहोंचा समावेश आहे. पंचकषाय कल्पना पासून उत्तरोत्तर आसवरिष्टासारख्या क्लिष्ट कल्पना रसद्रव्य आणि रसकल्प असा अभ्यास या खंडामध्ये केला आहे.

• तृतीय खंडामध्ये पंचकर्माचा व इतरमुखलेप, धूम, गंडूष इत्यादी बाह्य उपक्रमांचा उल्लेख असून, शेवटचा अध्याय नेत्ररोगावरील कल्पनांवर रचनाबद्ध केला आहे. यापैकी श्वास रोगावरील प्रमुख उपक्रम वमन आणि विरेचन यांचे सविस्तर वर्णन केले आहे.

श्वास चिकित्सेतील काही कल्पनांचे वैशिष्ट्य : शार्ङ्गधरसंहितेमध्ये श्वास चिकित्सेकरिता १२ कल्पना व ५६ कल्प वर्णन केले आहेत.

• लाक्षातैल अभ्यंगाकरिता, नारायण तैल नस्य बस्ती, आभ्यंतरसेवन, अभ्यंगाकरितात सेच इतर कल्प आभ्यंतर उपयोग करण्याचे आहेत.

• नारायणादि चूर्ण विरेचनाकरिता सांगितले आहे.

• अवलेहकल्पना यामुख्यत्वे रसायन कर्माकरिता वर्णन केल्या आहेत. कुष्मांड अवलेह रसायन हे बाल वृद्धांकरिता वर्णन केले आहे.

• पिप्पली, कंटकारी, पुष्करमुळ, मुस्ता, त्रिकटू, दशमूळ, अम्लद्रव्य (अम्लवेतस, चिंचा, दाडिम) लवण, क्षार, कर्कटशृंगी हि वनस्पतीज द्रव्ये उतरत्या क्रमाने प्रामुख्याने कल्पांमध्ये वापरली आहेत.

• खनिज द्रव्यांमध्ये पारद, गंधक, सुवर्ण, टंकण, लोह इत्यादी द्रव्य कल्पांमध्ये वर्णन केले आहेत.

• बालकांमध्ये पिप्पली, कर्कटशृंगी, अतिविषा, मुस्ताहि द्रव्ये सांगितली आहेत.

• हृदरोग व श्वास असे दोनही फलश्रुती असणाऱ्या कल्पांमध्ये अम्लद्रव्यांचा समावेश दिसून येतो.

• अवस्थानुरूप विचार करता वातकफहर, वातानुलोमक, अग्निवर्धक, हृदय, शुक्रबलप्रद, दीपन पाचन करणारे कल्प

(तक्ता क्र. १)

श्वास प्रकार	हेतु	संप्राप्ति / लक्षण	साध्यासाध्यत्व / उपशय अनुपशय
क्षुद्रश्वास	अतिआयास, अतिभोजन	----	साध्य (स्वयं संशमन)
तमकश्वास	श्वास सामान्य हेतु	वायु प्रतिलोम होऊन प्राणवह स्रोतसांत कफाचे उदीरण करतो. शिर ग्रीवा उर पार्श्व येथे पीडा उत्पन्न करून कासादि लक्षणे व प्राणोपतापी असा श्वासरोग उत्पन्न करतो.	कफनिष्ठिवनोत्तर, बैठक स्थितीमध्ये, उष्ण गुणामुळे उपशय, वेगावस्था, शयनस्थिती व शीत गुणामुळे वृद्धी. नविन व रोग व बलवान रुग्ण असता साध्य.
छिन्नवस्था	श्वास व्याधि सामान्य हेतु	तुटक तुटक (विछिन्न) श्वासोच्छवास. मर्मच्छेद झाल्याप्रमाणे वेदना.	असाध्य (च.चि.१७/५४) चक्रपाणिदत्तटीका
महाश्वास	श्वास व्याधि सामान्य हेतु	(महता नादेन श्वसिति) उन्मत्त बैलाप्रमाणे आवाज करत श्वासोच्छवास	असाध्य (च.चि.१७/५४) चक्रपाणिदत्तटीका
उर्ध्वश्वास	श्वास व्याधि सामान्य हेतु	दीर्घ श्वास बाहेर सोडतो. परंतु आत घेताना कफावरणामुळे अल्पश्वास घेतला जातो.	असाध्य (च.चि.१७/५४) चक्रपाणिदत्तटीका

(तक्ता क्र. २)

कल्पना / कल्पनाम	घटकद्रव्ये	मात्रा व अनुपान / सहपान	गुणधर्म
स्वरस			
१) आर्द्रक स्वरस पुटपाक स्वरस	आर्द्रक	मधु	दीपन, पाचन, स्रोतोरोधहर
२) कण्टकारी पुटपाक	कंटकारी पंचांग	पिप्पली चूर्ण	दीपन, पाचन, प्राणवहस्त्रोतोगामी, वातानुलोमन
३) बिभीतक पुटपाक	बिभितकफल घृताने लिंपून पुटपाक	फलत्वक मुखामध्ये धारण करावी	
क्वाथ–४) दशमुलादी क्वाथ	दशमूल	पिप्पलीचूर्ण	कफवातहर दोषानुलोमन
५) अभयादि क्वाथ	अभया, भुस्ता, पाठा, शुंठी, धान्यक, पद्मक, तिक्ता, रक्तचंदन, पिप्पली	२ पल	त्रिदोषहर, पित्तप्रधान अवस्थेमध्ये दीपन, पाचन
६) अष्टदशांग क्वाथ	दशमूल, मुस्ता, गजपिप्पली, किराततिक्त, धान्यक, तिक्ता, इंद्रजव, शुंठी, देवदार	२ पल	पार्श्वरुजाहर सन्निपातहर
७) कटफलादि क्वाथ	कटफल, मुस्ता, कर्कटशृंगी, भाडर्गी, धान्यक, शुंठी, रोहिष, वचा, पर्पट, हरितकी, देवदार	२ पल	कासज्वरहर कफहर वातानुलोमन
८) निदिग्धि कादि क्वाथ	निदिग्धिका (कंटकारी) अमृता शुण्ठी	पिप्पलीचूर्ण	पाचम, शमन, वातानुलोमन, स्त्रोतोगामी
९) देवदार्व्यादी क्वाथ	देवदार, कटफल, वचा, भूनिंब, धन्वयास, कुष्ठ, कुटकी, कृष्णजीरक, पिंपली, कंटकारी, बृहती, गजपिप्पली, गोक्षुर, शुंठी, अमृता	२ पल	पाचन, शमन, वातानुलोमन, स्त्रोतोगामी
१०) देवदार्व्यादी क्वाथ	देवदार, वासा, सुंठी, हरितकी, शालपर्णी	मधु+सिता	चातुर्थिक ज्वर, मंदाग्नि, श्वास
११) पुनर्नवादी क्वाथ	पुनर्नवा, दारुहरिद्रा, गुडुची, अभया, कुटकी, शुंठी, निंब, पटोल	गोमूत्र	पांडु शोफजन्य श्वास
१२) क्षुद्रादि क्वाथ	कंटकारी, वासा, कुळीथ, शुंठी,	पुष्करमूल चूर्ण	वातानुलोमन कफहर स्त्रोतोगामी
१३) दशमूलादि क्वाथ	दशमूल	यवक्षार सैंधव	वातकफहर हृद्रोग, गुल्म
१४) उष्णोदक	जल १/८, वा १/४ वा १/२ शिल्लक राहीपर्यंत तापवावे.	रात्रि(काल)	कफवातहर दीपन कासश्वास ज्वरहर
क्षीरपाक – १५) पंचमूली क्षीरपाक	लघुपंचमूल, क्षीर, जल	अनुपान नाही	ज्वरामधील उपद्रवस्वरूप/ लक्षणस्वरूप श्वासहरण
कल्क – १६) वर्धमान पिप्पली	३/५/७ पिप्पली दूध/जलपिष्ट	दुग्ध/जल	रसायन दीपन पाचन कफवातहर
१७) लाक्षाकल्क **चूर्ण –** १८) पिप्पलीचूर्ण	कुष्मांडरस, लाक्षा पिप्पली	कुष्मांडरस मधु	रक्तक्षयहर उरोघातहर हिक्काश्वासहर कण्ठ्य बालकांमध्ये कासघ्न व ज्वरहर कार्य
१९) कृष्णादिचूर्ण	कृष्णा मुस्ता अतिविषा शृंगी	माक्षिक	बालकांमध्ये श्वासकासहर
२०) सुदर्शन चूर्ण	किराततिक्त + त्रिफलादि ५२ द्रव्ये	शीतांक (ज्वर)	त्रिदोषहर धातुगतज्वरहर विषमज्वरहर, श्वासहर
२१) त्रिफला पिप्पलीचूर्ण	त्रिफला, पिप्पली	मधु	कासश्वासहर अग्निवर्धन संचित दोषभेदन
२२) कट्फलादि चूर्ण	कटफल, शुंठी, मुस्ता, कर्कटशृंगी, तिक्ता, पुष्करमूल,	आर्द्रकरस किंवा मधु	कण्ठ्य कासश्वासहर दीपन पाचन स्त्रोतोगामी

२३) कट्फलादि चूर्ण (२)	कटफल, मुस्ता, पुष्करमूल, शुठी, कर्कटशृंगी, त्रिकटू	आर्द्रकस्वरस किंवा मधु	कफहर शूलहर
२४) कट्फलादि चूर्ण (३)	कटफल, पिंपली, पुष्कर, कर्कटशृंगी	मधु	श्वासकासज्वरहर कफहर
२५) शृंग्यादी चूर्ण	कर्कटशृंगी, पिप्पली, अतिविषा,	मधु	बालकांमध्ये कासश्वासज्वरहर
२६) तालीसादि चूर्ण	तालीसपत्र, पिप्पली, वंगभस्म, मरिच, वंशलोचन, ताम्रभस्म, शुण्ठी, एलात्वक्, शर्करा	जल	रोचन पाचन कफहर
२७) लवंगादि चूर्ण	लवंग, उशीर, जटामांसी, शुद्धकर्पूर, कृष्णजीरक, नीलोत्पल, जातीफल, कृष्णागरू, चंदन, शुंठी, वंशलोचन, तगर, पिप्पली, कंकोल, उशीर, त्वग, एला, नागकेशर	जल	राजार्ह अग्निदीपन तमकश्वासहर तर्पण बलप्रद त्रिदोषहर
२८) महाखांडव चूर्ण	त्रिकटू, चित्रक, पिप्पली, लवणपंचक, जीरक, पिप्पलीमूल, त्वक्, धान्यक, चिंच, एला, नागकेशर, अम्लवेतस, बदर, दाडिम, अजमोदा, मुस्ता, सिता	जल	अग्निदीपन हृद्य वातानुलोमन पंचविध श्वासजित्
२९) नारायणादि चूर्ण	चित्रकादि २६ द्रव्ये + विशालामूल, त्रिवृत्त, दंतीमूल, सातला	वातरोग–प्रसन्ना, आध्मान–सुरादि, विष–घृत, अजीर्ण–उष्णांबु	विरेचनप्रयोगार्थ सर्वरोगनाशन
३०) हिंग्वादि चूर्ण	हिंगु, धान्य, हपुषा, पाठा, दाडिम, अम्लवेतस, अभया, शठी, अजगंधा, त्रिकटू, अजमोदा, जीरक, वचा, पुष्करमूल	भोजनापूर्वी किंवा भोजनामध्ये जीर्णमद्य किंवा तक्र किंवा उष्णोदक	वातकफहर हृद्रोगहर हृद्बस्ति पार्श्वशूलहर
३१) लवणत्रित्तपादि चूर्ण	लवणत्रितय, शतपुष्पादवय, षडूषण	सर्पि/जीर्णमद्य/उष्णोदक/ कोलांबु/तक्र/उष्ट्रदुग्ध/मस्तु	यकृतप्लीहारोगहर हिक्काश्वासहर त्रिदोषहर दीपन पाचन दोषानुलोमन
३२) सितोपलादि चूर्ण	सितोपला, पिप्पली, त्वक, वंशलोचन, बृहदेला,	मधु/सर्पि	अग्निदीपन त्रिदोषशमन श्वासकासक्षयहर
३३) भास्करलवण चूर्ण	सामुद्रलवण, चातुर्जात, जीरक, सौवर्चल, त्रिकटू, कृषणजीरक, दाडिम, पिप्पलीमूल	शाणप्रमाण मस्तु/सुरासव	वातकफहर आमदोषहर शूल श्वासहर हृदरुजाहर दीपन पाचन
गुटीवटी– ३४) व्याघ्री–जीरकादी गुटीका	व्याघ्री (कंटकारी), जीरक, धात्री,	मधु	उर्ध्ववातहर महाश्वासहर समकश्वासहर (युच्यते क्षणात्)
३५) गुडादि गुटिका	गुड, शिवा, शुण्ठी, मुस्ता,	अनुपान नाही	श्वासकासहर दोषानुलोमन दीपन पाचन
३६) व्योषादि गुटीका	व्योष, जीरक, गुड, अम्लवेतस, चिंच, तालीसपत्र, त्रिसुगंध,	अनुपान नाही	आमदोषहर, श्वासरोगात आमावस्थेमध्ये उपयुक्त
३७) चंद्रप्रभा	चंद्रप्रभा इ. ३३ द्रव्ये + लोहभस्म, सिता, शिलाजित, गुग्गुळ	कर्षप्रमाण गुटीका	रसायन सर्वरोगहर बल्य वृष्य अग्निवर्धन
३८) योगराज गुग्गुळ	नागरादि २० द्रव्ये + त्रिफळा गुग्गुळ + नागभस्म, रौप्यभस्म, लोहभस्म, वंगभस्म, अभ्रकभस्म, मण्डूरभस्म, रससिंदूर	शाणप्रमाण गुटीका कफरोग–आरग्वधकषाय वातरोग–रास्नादिक्काथ पित्तरोग – काकोल्यादि क्वाथ	त्रिदोषघ्न रसायन वातकफहर क्षयहर अग्निदीपन

अवलेह – ३९) कंटकारी वलेह	कंटकारी, धन्वयास, घृत, गुडुची, भाङ्गी, तैल, चव्य, मधु, चित्रक, रास्ना, शर्करा, मुस्ता, शठी, त्र्यूषण, वंशलोचन, शृंगी	१ पल	हिक्का श्वास कास हर
४०) च्यवनप्राश अवलेह	दशमूल, जीवनीयगण, आमलकी, वंशलोचन, त्रिजात, घृत, खंडशर्करा, पिप्पली, मधु इ. ३८ द्रव्ये	अग्निबलापेक्षी मात्रा	रसायन हृद्रोगश्वास कासहर शुक्रदोषहर उरोग्रहहरण
४१) कुष्मांड अवलेह	कुष्मांड, धान्यक, घृत, त्रिकटू, खंडशर्करा, त्रिजात, मधु	अग्निबलापेक्षी मात्रा	उरसंधानकृत क्षतक्षय बालवृद्धांमध्ये बल्य म्हणून उपयुक्त
४२) अगस्ति हरितकी	हरितकी आदि २० द्रव्ये, सर्पि, मधु, तैल, गुड	२ हरितकी लेहासह सेवन कराव्या	रसायन बलवर्णकर सर्वरोगनाशन
स्नेहकल्पना – ४३) लाक्षातैल	लाक्षा, कुटकी, चंदन, शतपुष्पा, रेणूका, मुस्ता, अश्वगंधा, मूर्वा, रास्ना, हरिद्रा, कुष्ठ, तैल, देवदार, यष्टी,मस्तु	अभ्यंगार्थ	विषमज्वरहर कासश्वासहर वातपित्तहर यक्ष्मादिहर
४४) नारायण तैल	अश्वगंधादि १३ औषधे + शतावरीस्वरसगोदुग्ध, जल कल्कद्रव्ये – कुष्ठ, चंदन, वचा, एला, मूर्वा, जटामासी, सैंधव, अश्वगंधा, बला, रास्ना, शतपुष्पा, देवदार, तगर, पर्णीचतुष्ट्य	नावन अभ्यंग धान बस्ति	वातरोगहर कफविलयन वातानुलोमन
आसव अरिष्ट – ४५) लोहासव	लोहचूर्ण, यवानी, त्रिकटू, त्रिमद, त्रिफला, धातकीपुष्प, क्षौद्र, गुड	२ पल	अग्निवर्धन श्वासकास अरुचिहर
४६) खदिरारिष्ट	खदिरादि १० द्रव्ये + धातकी, मधु, शर्करा	२ पल	कण्ठ्य कफक्लेदहर अग्निवर्धन
४७) बब्बुलारिष्ट	बब्बुल, जातीफल, मरिच, पिप्पली, कंकोल, लवंग, चातुर्जात, गुड, धातकी	२पल	क्षयहर श्वासकासहर
४८) द्राक्षारिष्ट	द्राक्षा, मरिच, पिप्पली, प्रियंगु, विडंग, चातुर्जात, गुड	२ पल	बलकृत अग्निदीपन मलशोधन दोषानुलोमन
४९) दशमूलारिष्ट	दशमूलादि ३१ कषायद्रव्य, कंकोलादि १० चूर्णद्रव्य, धातकीपुष्प मधु गुड	२ पल	धातुक्षयजित् पुष्टीजनन वातकफहर शुक्रबलप्रद
रसकल्प – ५०) लोकनाथरस	शु. पारद, कपर्दभस्म, शु. गंधक, शंखभस्म, शु. टंकण, गोक्षीर, गजपुट	६ गुंज कल्प + २६ भाग मरिच चूर्ण वातरोग–घृत पित्तरोग–नवनीत कफरोग–मधु श्वासकास स्वरभंग इ. उशीर व वासाक्वाथ	सर्वरुजाहर बल्य दीपन पाचन श्वासकासहर
५१) मृगांक पोट्टलीरस	रसद्रव्य, सुवर्णभस्म, शु. पारद, शु. गंधक, टंकणक्षार, वनस्पतीद्रव्य, कांचनार, स्वरस, ज्वालामुखी, स्वरस, लांगली	२ गुंजा कल्प + ८ मरिचचूर्ण सर्पि/मधु/३ पिप्पलीसह	कृशत्वहरण बल्य श्वासकासहर

५२) हेमगर्भ पोट्टलीरस (प्रकार १)	शु. पारद, शु. गंधक, शु सुवर्णचूर्ण, कांचनारस्वरस, मूधरयंत्र – आर्द्रक रस, चित्रकस्वरस, टंकणक्षार, शु. बचनाग, शु. स्नुहीस्वरस (सहाय्यकद्रव्य–पीत कपर्द) गजपुट	कफ – गुड + आर्द्रक	कफवातहर अग्निदीपन कासक्षयहर
(प्रकार २)	शु. पारद, शु. सुवर्णचूर्ण, शु. गंधक, मुक्ताभस्म, शंखभस्म, टंकणक्षार, पक्वनिंबूरस, गजपूट	८ गुंज गोघृत २९ मरिचचूर्ण	श्वासहर कासहर
५३) सूर्यावर्तरस	शु. पारद, शु. गंधक, कुमारीस्वरस, ताम्रपत्र, स्थालिकायंत्र	२ गुंज	श्वासजित
५४) लोहरसायन	शु. पारद, शु. गंधक, शु. लोहचूर्ण, कुमारीस्वरस, ताम्रपात्र, शालीतण्डुल, (सहाय्यक द्रव्य) स्वरस– त्रिकटूकषाय, त्रिफला, नीलिक, वासा, अमृता, चित्रक, तुलसी, पलाश, कदली, निर्गुंडी, अलंबुषा, दाडिमत्वक, बबुल, उत्पलदल, भृंगराज, कुरंटक, बीजक	मधुघृत +त्रिफलाक्वाथ ४ तोळे ३ महिने (रसायन)	रसायन अग्निवर्धन श्वासकासहर बलवर्णकर वृष्य आयुष्य
धूमकल्पना– ५५) कासघ्न धूम	कंटकारी मरिच	यथावश्यक	स्त्रोतोरोधनाशन कफविलयन
गंडूषकल्पना – ५६) त्रिफला गडूष	त्रिफला (१) मधु	कफपूर्णास्थता दोषछेदन नेत्रनासास्त्राव (गण्डूषधारण मर्यादा)	कफ रक्त पित्तहर

सांगितले आहेत.

• अनुपानार्थ मधू, आर्द्रकस्वरस यांचा उल्लेख अधिक आहे, तर योगराज गुग्गुळाप्रमाणे विविध अनुपानाद्वारे अनेकविध व्याधींवरील कल्प ही सांगितले आहेत.

• संहिताकारांनी महा, उर्ध्व, छिन्न हे ३ नैसर्गिकरित्या असाध्य सांगितले असले तरीही यांचे शमन करणारे कल्प शार्ङ्गधरांनी वर्णन केले आहेत.

निष्कर्ष : शार्ङ्गधरसंहिता मध्यम कालखंडातील असल्यामुळे यामधील कल्प व वंशलोचन (संदिग्धद्रव्य), पुष्करमुला सारखे (लुप्तप्राय) निवडक द्रव्य वगळता अन्य द्रव्ये सद्यकाळामध्ये आपल्याला उपलब्ध होतात. काही कल्प ग्रंथोक्त औषधे म्हणून बाजारामध्ये थेट विक्रीकरिता आहेत तर काही कल्प वैद्य स्वतःदेखील निर्माण करून उपयोग करू शकतील.

संहितेमध्ये एकेरी द्रव्यांच्या कल्पना यथार्थ अनुपानासह वर्णन केल्या आहेत. केवळ रोगनाशनाकरिता नाही तर पुढे अग्निदीपन, रसायनकार्याकरिता कल्पना वर्णन केल्या आहेत.

शार्ङ्गधरसंहितेतील कल्पांचा अभ्यास करून प्राणघातक ठरणाऱ्या रोगांवर साध्य रुग्णांमध्ये विजय प्राप्त करणे, कष्टसाध्य रोगाचे शमन करणे शक्य आहे.

संदर्भ :

१) चरकसंहिता उत्तरार्ध, सविमर्श हिंदी विधोतिनी व्याख्या, व्याख्यकारः पं. काशिनाथ शास्त्री, डॉ. गोरखनाथ चतुर्वेदी, प्रकाशक : चौखंबा भारती अकादमी, वाराणसी, संस्करण चौदावे (१९८७), पान क्र. ५१६

२) सार्थवाग्भट, डॉ. गणेश कृष्ण गर्दे, प्रकाशक : अनमोल प्रकाशन, पुणे, आवृत्ती १९९४

३) सार्थ शार्ङ्गधरसंहिता, वैद्य गंगाधर वासुदेव शास्त्री साठे, प्रकाशक : रघुवंशी प्रकाशन, आवृत्ती चवथेए १९८३.

A Review Article On Ayurvedic Management Of Dushta Vrana

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Introduction - In practice, Dushta vrana is the most common encountered problem faced. By a medical practitioner. Wound healing is the major problem in surgical practice. Even though healing of Vrana is a natural process of the body, the Vrana should be protected from Dosha dushti and from various microorganisms which may hamper the natural course of Wound healing. As the sciences have advanced, newer therapies are tried out for boast up the recovery process, but the oldest remedies still lead the race. Acharya Sushruta "The Father of Indian Surgery" has explained Vrana in detail in his classical text "Sushruta Samhita" as a concourse of wound healing procedures described by Sushruta still holds its place today. Sushruta has described 60 measures for the comprehensive management of Vrana (wound), which includes local as well as the systematic use of different drugs and treatment modalities under a dedicated chapter. One of such purification therapy explained by Sushruta is virechanato eliminate the pravrudha doshas out from the body, particularly in Vata-PittaVata-Pitta praduhtajadushta vrana. Jatyadi ghruta is used as an external application in combination with virechana.

Non healing wound is vigoursly seen in surgical field. Wounds are probably one of the first medical problems faced by human beings from antiquity. Classics of Ayurveda have emphasized at various places to take care of wound which occurs due to vitiated doshas or any trauma. Healing of Vrana is a natural Process but due to the interference of vitiated Doshas, Vrana becomes Dushta and normal healing process gets delayed. Achieving fast wound healing with minimal scar and controlling pain effectively are the prime aim of every Doctor. Vrana ropan is a natural process, But due to various factors the Vrana becomes Dushita and the wound becomes complicated and healing process delayed. So the management of the disease starts from the earlier stage of vitiation of Dosha to the total recovery, which means bringing back the site of lesion to normally in all aspect. Acharya Sushruta has mentioned Vrana Vinishchayartham as a major part of Shalya Tantra. In present day wound is said to healed when epithelialization is complete, but as per Sushruta's view he emphasized on the point "Vaikritapaham" that means the measure which will bring the normal colour, surface and hair growth of the skin.

Definition : "The term wound is break in the continuity of soft parts of body structures caused by violence of trauma to tissue." Wound (Vrana) is an injury to body (as from violence, accidental, or surgery) that typically involves laceration or breaking of a member (as the skin) and usually damage to underlying tissues. Word Vrana is derived from Sanskrit verb root. Vru-vrunoti meaning "to cover", 'to envelope 'or 'to protect'.

स व्रणोति आच्छादयति यस्मात तस्मात व्रण
इति अथवा व्रणवस्तु व्रणचिन्ह रुढेअपि न
नश्यति तथैवास्ते आदेहधरणात तस्मात व्रण इति। – डल्हण

In 'Vrana Prashniya Adhyaya' of Sutra sthana, Sushruta has described Nirukti of word vrana as above. This means that the vrana is a thing that never vanishes even after its complete ropana from body, because once a breach in the continuity of a skin occurs, it remains forever either in the form of a scar tissue or discolored, pigmented mark, but its original, natural anatomy can never be restored by any means i.e. Acharya Sushruta has explained that "the scars of a wound never disappear even after complete healing and its imprint persists lifelong and it is called Vrana by the wise". A wound which refuses to heal or

heals very slowly inspite of best efforts by Chikitsa Chatuspada i.e Bhishak, Dravya, Upsathata and Rogi is known Dushta Vrana.

Dushta Vrana - A wound which is associated with severe pain, profuse discharge having putrefied smell, having irregular floor and margin is known as Dushta Vrana. Dushta Vrana refuses to heal or heals very slowly in spite of best efforts by surgeon. Dushta is one in which there is localization of Doshas. Dushta Vrana is an excessively damaged condition characterized by vitiation of mamsa and meda dhatus and doshas (Nija Vrana) and caused by external trauma (Agantuja Vrana) with exudation of durgandhayuktha Puya (Pus), pain, temperature, inflammation, redness, itching and also oozing of durgandhayuktha rakta with no intention to heal. Vrana lakshanas are high in intensity and which is almost opposite to Shuddha Vrana.

Lakshanas of Dushta Vrana - Various lakshnas explained according to Acharya Sushruta - Samhita - Narrow mouthed, Kathina - Hard, Avasanna-Depressed, Vedanavan - Severe pain, Vivruta- Wide mouthed, Ushna -Hot, Daha -burning sensation at site, Paka - Suppuration, Raga - Redness, Putimamsa - Full of foited pus, Puyastrava - Discharge of pus, Manojana Darshana - with ugly scar, Sira Snayu Pratipurna - Involvement of muscles, vessels and ligaments, Kandu - Itching, Shoph - Swelling, Pidika - With boils, Mrudu -Soft, Bhairava - Frightful. According to Acharya Charaka Putigandha - Foul smell, Vivarana - Discolouration, Bahusrava - Profuse discharge, Maharuja - Severe pain. Shuddha Lakshana Viparita.

Management of Dushta Vrana - Acharya Sushruta has described shashthi upakrama the 60 measures for wound management from its manifestation to the complete healing. In these measures he explained preventive measures and dietary regimen and rehabilitation of the patient. Seven measures of Vrana - Vimlapan, Avasechana, Upanaha, Patana kriya, Shodhana, Ropana, Vaikritapaham explained by Acharya Sushruta. According to Acharya Dalhana Shasthi Upakrama are divided into Purva karma, Pradhana Karma and Paschat karma of the Vrana, where as patana and ropana are the Pradhana karma and the remaining procedures which help to restore normal strength, colour etc. are known to be Paschat Karma.

Dushta Vrana chikitsa broadly divided into two headings :

Aushadhi chikitsa (Conservative Treatment)
Shastra chikitsa (Surgical Management)

Shodhana - Shodhana means to purify or Eradicate the causative factors or vitiated Doshas like puya, dusta rakta from the vranita or vrana. Shodhana comprises two Varieties of purification. Abhyantara Abhyantara shodhana (internal purification), Bahya Shodhana (external purification).

Abhyantara shodhana -

1) Vamana karma or the Emesis therapy is the first Pradhana karma in Panchkarma.Vranas above the level of Nabhi Pradesh with Kapha Pradhana Lakshana are better managed by Vamana Karma.

2) Virechana - The wounds which are Affected by Pitta Dosha and Situated middle portion of the body And non healing wound with long Duration, in such cases Virechana Plays a better managed by Vamana Karma.

3) Basti - Basti cleanses the Accumulated toxins from all the Three Doshas especially the Vata Toxins, through the colon. Wound situated in lower extremities are better treated with Basti Chikitsa.

4) Shirovirechna - Vrana which are situated in Urdvajatrugata area and Kaphapradhana conditions, this Procedure is beneficial.

Bahya Shodhana :

1) Raktamokshana - Raktamokshana includes various method are commonly practiced are siravedhan (vein-puncture) and Jalauka avacharan (leech application). Rakta mokshana is indicated in disorders of pitta and Rakta involvement, thus non healing which has imbalance of Pitta and Rakta can be well managed with Raktamokshana. It also drains of excessive Inflammatory mediators thus prevents swelling and pain and burning sensation instantly.

2) Ropana - Ropana means a factor which Promotes the healing process. At present the modern system of medicine could not find such karmas which promote the process of healing except anti-infective and debriding agent. But the Acharya Susruta gave his attention towards the ropana, as well as Dhoopana Karma.

3) Vrana Prakshalana - Panchvalkal kashaya, Sursadigana kashaya, Aragwadhadi kashaya, Lakshadigana kashaya is to be used for Vrana Prakshalana.

4) Vrana Pichu - Doorvadi ghrita, Jatyadi Ghrita/taila, Nimbadi taila, Kshar taila Pichu, Sursadi taila etc. is to be used for Vrana Pichu.

5) Vrana Lepa - Tilkalkadi lepa,etc

6) Vrana basti - By Jatyadi tail, etc

7) Dhoopana karma - Acharya Sushruta has advised to do Dhoopana with Rakshoghna Dravyas. He has stated many combination and different type of Dhoopa for different type of organism. Fumigation should be done the powder of Guggulu, Agaru, Sarjarasa, vacha, Gaurasarshapa added with lavana, nimba patra and ghrita.

Surgical management : Chedana, Bhedana, Daarana, Lekhana, Eshana, Aaharana, Vyadhana, Visravana, Seevana, Sandhana, Kshaarakarma, Agnikarma, Pratisaarana, Lomaapaharana and Yantra.

Discusssion : Management of wound has been a great challenge since antiquity for the surgeons throughout the world. Dushta Vrana is a chronic illness which causes the individual a long term suffering. When the Wounds are not treated in proper time even the curable (Sadhya) ulcer may develop into Yaapya, Yapya to Asadhya and asadhya to fatal and may even cause Death. As per Ayurveda if proper care is not taken for simple wound it may become Dushta Vrana. Healing is a natural process But delayed by many factors. The main Goal or achievement of shodhana chikitsa is to improve these inhibitory factors. Finally at the end of shodhana chikitsa, Dushta Vrana becomes Shuddha Vrana And Ropana chikitsa has to be followed thereafter. In present surgical practice also Wound debridement is of main importance For removing the slough tissue, so that Wound healing may take place faster. In Ayurveda non surgical trial are also Mentioned along with surgical measure. Therefore number of drugs of different Properties is described as Vrana Shodhaka And Vrana Ropaka in the management of dushta Vrana. Drugs which contain Katu, Tikta, Madhura and Kashaya Rasa are more useful. Dushta Vrana is one of the vrana which needs treatment for its Healing, it is necessary to remove the maximum Dushti by the virtue of Shodhana, Sravahara, Dahahara, Krimighana, Vishahara, Amapachak, Tridoshhara. At the end of Shodhana Chiktsa, Vrana become Shuddha vrana then Ropana chikitsa has to be followed further. Wound healing is completed in three phases: Inflammatory, proliferative and remodelling. Granulation, collagen maturation and scar Formation are some of the other phases of Wound healing which run concurrently but are Independent of each other.

Conclusion : The vrana should be protected from Dosha dushti and from various micro-Organism, which may afflict the Vrana and Delay the normal healing process. For the Early and uncomplicated healing of Vrana, Treatment is necessary. Before starting the Treatment of Vrana we must to assess Which type of Vrana, level of Dushti, Predominance of Dosha, involvement of Dhatu, site and size of the Vrana, Sadhyata-asadhyata of Vrana. When Wound will be completely free from Discharge, slough, foul smell, burning Sensation, itching, pain then healing can be achieved very well.

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A Conceptual Study Of 'Keshasharir' In Ayurveda

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Introduction- Primary aspects of Ayurveda concern with Rachana Sharir. Hair plays a vital role in enhancing the personality of a human. As hair is the noticeable part of beauty, Keshavikara also have more psychological impact on human society. Due to modern lifestyle, faulty hair care practices, environment, stress induced hectic and unhealthy schedules, results in various hair problems. There are an increasing number of panicked people coming to the doctor with the complains about hair problems. Healthy Hairs is essential for the physical as well as social fitness of an individual. So there is need to focus on study of kesha in detail. According to Modern anatomy, Hair is the end product of cornification of cells of skin appendage, called hair follicle. Follicle produces new hair cells and old hair cells being pushed out through the surface of skin. It arises from hair matrix and it is made up of modified keratin. While in Ayurveda, Kesha is one of the sharir avayava and are nourished by kitta bhaga of ahara. Ayurvedic classics consider Kesha as a Updhatu and also as a Mala.

Aim - Study of concept of Kesha in Sharir Rachana.

Objective - To explore the literature related to Kesha from various Ayurvedic Samhitas.

Material and methods -

1) Ayurvedic texts Charaksamhita, Sushrut samhita and Ashtanghrudaya, Ayurvedic dictionaries are referred.

2) Use of internet - Articles, Periodic journals, Online research portals.

Review Of Literature -

Etymology - Kesha the word derived from root word 'ke', means Mastaka (Head) with 'Shi' to shete (sleep) and 'ach' in 'aluk' samasa. Vachaspatyam, Shabdaratna, Mahodadhi and Nalanda Vishal Shabda Sagar said "Ke Shirasi Shete Shi".

Synonyms - In Amarkosha, Chikura, Kuntala, Bala, Kacha, Shiroruha etc. are the synonyms of Kesha.

Keshautpatti -

- Syat kittam keshlomasthno snehoakshivitatvacham | prasadkitte dhatunam pakadevam dvichchhardatah || - Cha. Chi. 15/18-19

  Chrakacharya mentioned that when seven dhatus are formed Kesha is formed as Mala of Asthidhatu.

- Grabhasya keshashmashru Lomasthninakhdanta.....sthirani pitrujani| - Su.Sha.5/33

  Kesha is formed by Prithvi mahabhuta and it is a paternal organ.

- Shashte Snayusiraromabalvarnnakhatvacham| - A.Hru.Sha.1/57

  According to Ashtang Hrudaya and Ashtang sangraha, Kesha is formed in 6th weeks of intrauterine life.

- Chaturthake cha lomanam sambhavshatra drushyate |- Ha.S.Sha.A.1/21

  Kesha is formed in 4th week of intrauterine life explained by Harita Samhita.

Enumeration - The number of Kesha as per various Ayurvedic texts may be summerized as below.

- Acharya Charaka has enumerated total human hair is 29956. He further stated that the number of kesha, shmashru and loma are equal. Asthanga sangrahakara also gives same view.
- Acharya Sushruta believes that the number of hairs are innumerable like that of Dhamaniagras.
- According to Vidyotini Teeka of Charak

Samhita, the number of Kesha stated by Aptopdesha is 72 crores. (cha.sa.7/14)

Parts of Kesha - The different parts of Kesha told in different contexts can be combined as ,

1) Keshaagra Hair ends
2) Keshabhoomi / Keshabhu Scalp
3) Romakoopa / Koopaka / Lomakoopa Hair follicle.

The Romakoopa / Romachhidra is embedded in twacha of Shairakapala. This is the Kesha utpatti sthan.

Names based on location - Hairs growing on the scalp are known as Kesha, Kuntala, Chikura etc. Hair over the body are known as Roma, Romaraji and Loma. Those growing on the eyelids are know as Pakshma. The facial hairs are known as Shmashru.

Panchbhautikatva - Organs which are gross, stable, having form, heavy, rough and hard like nail, bone, teeth, flesh, skin, faeces and hair are dominated by 'Prithvi mahabhoota'

Kesha asa Mala and Updhatu -

- Syatkittam keshalomasthno l
  - Cha. Chi.15/30

Kesha is Mala of Asthi dhatu . As a Mala, kesha utsarajana occurs after particular time. Whenever there is a Vruddhi and Kshaya of Asthi dhatu, it will affect the growth and development of the Kesha.

- Sharangdhara mentioned that Roma is Mala of Meda dhatu and an Updhatu of Majja dhatu.

Keshabhoomi - The place where Kesha grows is calleds as 'Keshabhoomi'. Keshabhoomi described in Khalitya in various texts. Abhyanga prevents keshabhoomigat gada.

Keshanta - While explaining shareer pramana, Acharya Sushruta in Sutrasthana mention word 'Keshanta' which denotes the frontal hairline. According to Dalhana, There is also another term, 'Avatukeshant' which donates the hairline on the back of the neck below the occipital area.

Romakoopa - The follicle like structure from which Kesha spread out is Romakoopa. The number of Romkoopa remains the same throughout the life.

Prashasta kesha lakshana - Snigdha, Mrudu, sukshma, naikamula / prithanmulata and sthira are the Prashasta Kesha lakshana told by Acharya Vagbhata and Ekaikaja, mrudu, snigdha, subaddha mula and krishna are the Parshasta Kesha lakshana told by Acharya Charaka in their Sharirsthana.

Kesha and Prakruti - Acharya Charaka, Sushruta, Vagbhata and Sharangdhara mentions Keshaswarupa according to Prakruti. Vata prakruti possess dry, scanty, rough hairs and hair with split ends. Pitta prakruti possess soft, scanty, brownish hairs. Kaphaprakruti possess firm, dense, bluish, tinged, long and silky hairs.

Kesha and Marma - The marma realated to Kesha (Scalp hair) are -

Utkshepa - Shankhayorupari keshante,
Adhipati - Mastakabhayantaratah uprishtat sirasandhisannipatah romavartah,
Aangan - Bhrupuchchantaha,
Aavarta - Bhruvoupari, Shanghai Bhruvo antayo upari,
Sthapani - Bhruvormadhye.t.

Kesha and Sira - Four avedhya siras related to Keshanta, two related to Aavarta bhaga and total ten related to Shankha pradesha, in which two are Avedhya.

Kesha and Dhamani - Tiryagagamidhamani divide in hundreads to thousands and are innumerable. These Dhamanis are dispersed throughout the body and their opening is in relation with Romakoopa.

Kesha and Srotas - Charakacharya mentioned in Vimansthana that Lomakoopa are moolasthana of Swedavahasrotas. The vitiation of Swedavahasrotas leads to absence of perspiration, excessive perspiration, roughness of body, general burning sensation, horripilation.

Keshaposhana - According to Acharya Sushruta, Kesha gets nourishment from the end part of the Dhamanis which are attached to the Romakoopa. According to Acharya Charaka, Keshais a Mala nourished by kittabhaga of Aharrasa.

KeshaVarnotpatti - In Ayurveda, formation of

colour of hair clearly explained as Teja Mahabhoota is responsible for the colour of hair, specifically Bhrajaka pitta. Teja Mahabhoota combines with Pruthvi and Vayu Mahabhootas and produce black colour. The colour of hair is based on Prakruti of that individual.

Kesha and Saarata - In Charak Vimansthana Adhyaya 8, saarata is described in detail.

- The excellence of skin and hair is observed in Ras saarata. Rasa saar individauals possess soft hair.
- Proper unctuousness of the body which is the result of Meda saarata, makes hair soft and silky.
- According to Sushrutacharya, Ras saar individuals possess soft, delicate skin and hair.

Kesha vikara - Khalitya, Palitya, Indralupta, Darunaka, Upshirshaka, Arunshika are the Keshavikara told by various Acharyas.

A special growing nature of hair present in human being that the nails and hair constantly grow by nature in spite of the wasting of body. In Sushrut Samhita Sutrasthana, it is mentioned that the Kesha continues to grow during Sharirkshaya and even after death.

Results And Observations -

- From the above explaination, it can be interpreted that Kesha is one of the most ornamental part of the body. Kesha sharir was not explained separately in Samhitas. Ayurveda classics have not explained of detailed anatomy of Kesha under single section. But it has special value while treating the patient.
- In Ayurvedic classics, many contraversies have been noticed on this topic like number of Kesha is different according to different Acharyas.
- The hairs growing on different parts of the body are known by different names. The term Kesha specifies hair on scalp and Loma stands for body hair. Roma is used for both scalp and body hair.
- Many terms of SharirRachana are having relation with Kesha sharir and regarding anatomy of Kesha, Romakoopa, Kesha bhoomi, Roma, Shiroruha etc. words are found but this requires detailed description.
- The word 'Mala' is derived from the sanskrit root 'Mruj' meaning 'that which is to be cleaned or eliminated'. Mala are of two types- Ahara or shariric mala and Dhatumala. Kesha is Mala of Asthi dhatu means it is Dhatumala. Asthi dhatvagni has its action on the Ahar rasa producing Asthi dhatu and this asthi dhatu is responsible for nourishment of Majja dhatu and Kesha. Therefore, Asthidhatvagni is responsible for healthy Hair. As a Mala, kesha utsarajana occurs within particular time and it explained in Modern Anatomy as Hair follicle produces new hair cells and old hair cells being pushed out through the surface of skin.
- Sharangdhara, Bhavmishra, Trimalla Bhatt, Acharya Bhoj mentioned Kesha as a Updhatu. According to Sharangdara, it isan Updhatu of Majja dhatu. The word Updhatu has been made by combination of two words i.e.Upa and Dhatu. 'Upa'is prefix attached to the word Dhatu. The Updhatus are finest product of Dhatu metabolism. Updhatus are important physiological units and resembles Dhatus in terms of structure, function and nature. They have no fate to get transformed into another component. Here, Kesha is an Updhatu of Majja that means it is formed as a by product of MajjaDhatu. So poshana of Kesha is depend on proper nourishment of MajjaDhatu. As an Updhatu, it denotes its Dharana karma and protect the scalp.
- Romkoopa is moolasthana of Swedavaha srotas that means we can say that there are close relation between Hair follicle and sweat glands.

Conclusion - Concept of beauty (Saundarya) is gaining more and more attention globally and hair plays an important role in it. Therefore in recent years, there have been renewed interest in exploring the depth of this science. Pertaining the above observations, it becomes necessary to highlights the other areas, be it academically or clinically. From above observation, we can say that Kesha is

produced as a Mala but stays for sometime in body to act as an Updhatu.

Ayurveda believes healthy hair is result of proper digestion of food. So Kesha vikara are the effect of internal imbalance. In Ayurveda, we examine each patient nakhashikhanta (from hair tip to nails) whatever the diseases is.So kesha parikshana is also important in treating patient.

As Kesha has been affected in various acute as well as chronic diseases, the basic information about Keshasharir is important to diagnosis and prognosis of disease. Hence study of Kesha is useful in suggesting lifestyle management and proper hair care to people.

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Effect Of Shatpushpa In Female Infertility Related To Anovulatory Cycle In PCOS

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Introduction : Fertility is the capacity of a couple to reproduce or the state of being fertile. Reproduction is the process that requires the interaction and the integrity of the female and male reproductive tracts. Among the causes of infertility, ovarian factor overall contributes 20% and 15% in primary and secondary infertility respectively where as in females, it contributes 40%. Ovarian dysfunction encompasses anovulation or oligoovulation, corpus luteum insufficiency, luteinised unruptured follicle.[2] Modern medical treatment for anovulation i.e. failure to produce mature ovum includes hormonal therapy, In Vitro Fertilization (IVF), Embryo Transfer (ET), Gamete Intra Fallopian Transfer (GIFT) etc., but they have unsatisfactory results, enormous expenses and lots of side effects like ovarian hyper stimulation, frequent abortion, multiple gestations and major long term possibility of ovarian cancer. There is a need of time to evaluate some alternative medicine in infertility due to anovulation. While referring the Samhitas, the single drug found which can be helpful in such cases is" Shatpushpa". Indication of use of Shatpushpa given in Kashyapsamhita directly points out its utility in ovulatory dysfunction. To ascertain effectiveness of Shatpushpa, an attempt was made by reviewing previous research works which were carried out in anovulatory factor of infertility with the use of Shatpushpa in different dosage forms. In this study shatpushpa is reviewed through ancient text, modern science data and discussed with respect to indications, chemical constituents n

uses.

Aims And Objectives :

1) To study the effect of Shatpushpa from different ayurvedic texts.

2) To study the therapeutic effect of Shatpushpa.

3) To study and critically analyze latest researches on Shatpushpa in female infertility w.s.r. anovulatory factor. Description of Shatpushpa was studied from classical texts of Ayurveda. Various journals were referred for recent researches being carried out on Shatpushpa w.s.r to female reproductive health.

Materials and Methodology : Review Of Literature.

Literary Review : Detail Description Of The Drug:- 1) Shatapusha,[3],[4]

Botanical Name : Anethum sowa Kurz.

Family : Umbelliferae

Paryaya : Chhatra, Shatahwaha, Madhura.

Swarupa : It is a kshupa having 1'-2' height.

Habitat : All over India.

Part Used : Dried Fruit.

Vernacular names :

English : Indian Dil Fruit, Dill, Dill seed, Garden dill

Hindi : Soya, Sova, Sowa.

Rasa Panchaka :

Rasa : Katu-tikta.

Guna : Laghu, snigdha, tikshna.

Virya : Ushna.

Vipaka : Katu.

Doshaghnata : Kaphavatashamaka.

Chemical constituents : Dihydrocarvone, carvacrol, safrole and thymol, - pinene, dphellandrene, dillapiol, d phellandrene, - terpinene, carvone, caryophyllene, myristicin, eugenol, anethofuran (essential oil); carvone, (+) limonene (dill oil); glyceryl esters of saturated and unsaturated fatty acids, vicenin (6,8-di-cglucosyl- 5,7,3'-trihydroxy-flavone), xanthone glycoside-dillanoside (fruits); tripetroselinin, petroselinicdiolein, dipetroselinicolein, dillapional (seed oil); benzodipyrangraveolone, carvone (plant); carvone, dihydrocarvone, carvacrol, methyl benzoate, 1,5-cineole, p- - - -pinene (essential oil from fruits). [5]

Karma and Prayoga : Due to ushna and tikshna guna it acts as kaphavatashamaka. It has deepana, pachana, anuloman and krimighna (vermicide) properties so; it is used in Aruchi (loss of appetite), Chardi (vomiting), Agnimandhya (aclorhydria), Ajeerna (indigestion), Udarshoola (abdominal pain), Krimi (worms), etc. In female reproductive system it actsas artavajanana (helps in commencement of menstruation) and stnayajanana (production of milk). So it has good effect on rajorodha, yonishoola, kastartava, prasuta and stanyanasha. Experimental studies reveals its uterine stimulant activity. Sowa seeds are dry and of heat producing potency, kosthavatahara, mutrajanana, artavajanana (diuretic and amenogogue).

Discussion -

Mode Of Action Of Shatpushpa : Shatpusha is having Ushna Virya, Vatanulomaka and Vata Shamaka drug so especially it acts on Vata Pradhan Kati Pradesh and corrects the Apana Vatadushti which regulate the menstrual cycle. Due to Katu Vipaka it corrects the Dhatwagni and release the obstruction of nutrition of next Dhatus and finally Artava Upadhatu also which gets nutrition from its mother Dhatu i.e. Rasa Dhatu. Iit stimulates the Artvaha srotas and Beejagranthi. By the stimulation of Beejagranthi (ovary), Follicles size was increase and lead to ovulation. Ovaries contain receptors which receive hormone under the influence of hypothalamus and pituitary gland. The drug seems to stimulate these receptors which lead to enhance ovarian function and resulting in ovulatory cycles. Shatpushpa by virtue of phytoestrogenic property bring down the level of insulin resistance in the body and restore the cellular imbalance that is a major cause of PCOS. It also increases endometrial thickness

and the amount of cervical mucus. According to Rasapanchaka of Shatpushpa Rasadhatu Vridhikara and will remove Ama and will help in its proper functioning. Having Madhura Rasa, KatuVipaka and Ushna Virya which is a rare quality found only in Shatapushpa so it has Kapha Nashaka property also and will clear all the channels by removing Margavrodhaand due to Ushna Guna it normalizes vitiated Vata after normalize the Vata and Kapha Dosha, it increases vitality power of reproductive organ and prepare Kshetra for conception because Samanya kapha have an anabolic action on body. Hormonal imbalance first disturbs ovarian cycle which later on reflects by menstrual cycle.

Conclusion : Acharya Kashyapa highlighted the effect of Shatpushpa exclusively in many gynaecological disorder such as "Artvabamyanapashyanti" (amenorrhoea), Pashyantibishphala cha ya (without fruit means women not having child/ can't conceive) Atiprabhut (menorrhagia.) Atyalpam (Hypomenorrhoea) Atikantam (menopause) Abisransi (having improper flow of menstruration). All these menstrual disorder are more or less associated with hormonal imbalance, poor or nill estrogen secretion or disturbed HPO axis, poor haemoglobin, nutritional deficiency. Indication of this Shatpushpa kalpa covers all type of female reproductive disorder, Shatpushpa works as a nector. Modern management of infertility due to anovulation is associated with many hazards. Ayurveda science with its proven track record is helpful in female infertility. Shatpushpa mentioned by Acharya Kashaypa closely related to infertility related to ovarian dysfunction.

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अभिनंदन !

डॉ. ज्योती रहाळकर (खरे) ह्यांना काव्य प्रतिभा पुरस्कार

टिळक आयुर्वेद महाविद्यालयाच्या माजी विद्यार्थिनी व आयुर्वेद व योग चिकित्सक व नामवंत साहित्यिक डॉ. ज्योती रहाळकर ह्यांना नुकताच रंगत–संगत प्रतिष्ठानचा 'काव्यप्रतिभा पुरस्कार २०२१' प्राप्त झाला.

सदर पुरस्कार त्यांनी ५ जून २०२१ रोजी डॉ. सदानंद मोरे ह्यांचे हस्ते स्वीकारला. आयुर्विद्या मासिक समितीच्या वतीने डॉ. ज्योती रहाळकर ह्यांचे हार्दिक अभिनंदन व शुभेच्छा.

Comprehensive Review Of Gandhprasarani (Paederia foetida Linn)

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Introduction - Gandhprasarani is mentioned in various ayurvedic text such as Charak Samhita, Shusruta Samhita, Ashthang Hridhay, Nighantus such as Raj Nighantu, Mandanpal Nighantu, Bhavprakash Nighantu, etc.

Gandhaprasarani increases Pitta dosha because of its Tikt rasa, it is Ushna in guna. It diminishes increased or vitiated kapha and vata doshas.

Gandhaprasarani belongs to Rubiaceae family and grows nearly throughout India. The important Gandhaprasarani growing states in India are Bengal, Assam, Dehradun, Himachal Pradesh.

The main habitual use known is anti-Inflammatory. Other reported use include analgesic, antispasmodic, anticancer. The leaves and stem of gandhaprasarani have been long history of medicinal uses.

Gandhaprasarani having Tikt rasa, Katu vipaka and Ushna Virya. Due to its Guru guna it acts as on Aphrodisiac (Shukral). Oil can be derived from this plant and is very effective in chronic pains.

Aim - Studay of comprehensive review of Gandhaprasarani.

Objectives - 1) To make compilation of relevant data about Gandhaprasarani from relevant literature.

2) To study and understand its importance and therapeutic utility.

Literature Referred - Concerned Ayurveda texts, relevant modern literature, all concerned previous research work, articles, internet information sources are referred.

Historical Review - Many references of Gandhaprasarani can be traced in various texts namely -

1) Charak Samhita
2) Sushrut Samhita
3) Raj Nighantu
4) Kaidev Nighantu
5) Bhavprakash Nighantu
6) Priy Nighantu
7) Madanpal Nighantu
8) Nighantu Adarsh

Botanical Identity -

Botanical Name - Paederia foetida Linn.

Family- Rubiaceae

Vernacular Names -

Marathi - Prasaran, Hiranvel
Bengali - Gandhabhaduli
Telugu - Savirela
Gujrati - Gandhana, Nari
Tamil - Pinarisangai
Sanskrit - Gandhaprasarani
Rajasthan - Khip
Kannada - Hesarane
English - Chinese flower plant
Malayalam - Talanili

Synonyms - Prasarani, Suprasara, Sarani, Sutra, Charuprani, Rajbala, Bhadraprani, Pratanika, Prabala, Rajparani, Balya, Bhadrabala, Chandravalli, Prabhadra, Bhadrakali, Prahita, Sarana, Sharani.

Geographical Distribution and Habitate - Gandhaprasarani is commonly present all over India. It is cultivated in any soil. Provided the climate is tropical or subtropical. Gandhprasarani is found nearly all over India i.e., Bengal, Dehradun, Himalaya, Himachal Pradesh, Bihar, Orissa, Kolkata, Assam,

Flowering and Fruiting Time - Plant flowers and fruits in March-May. Sprying to summer seasons, practically the flowering in end of rains and beginning of autumn of season (August-October) and fruiting in cold season (December).

Morphological Characters-

Gandhaprasarani - Branches slepder, terete, rigid, green, glabrescent.

Leaves when present linear or lanceolate, lathery, pubescent on both surface, flowers greenish-yellow in short peduncled, umbellete cymes, Bracts puberulous, cilite, calyx cuplsr, pubescent, segments ovate-deltoid, acute. Pollen masses attached to pollen carries with a minute caudicle.

Follicle glabrous soliary, lanceolatr, shortly-beaked up to 11cm long seeds with coma 2.5 to 4.0 cm long.

Chemical constituents -

Major chemical constituents are - Asperuloside, Paedersoidic acid, Paederoside, Scandoside, valine, Tyrosine, Histamine, Carotene, Vit.c, Ursoloc acide, Epifridelinol.

Observation - Extensive literature survey revealed that gandhaprasarani has a long history of traditional use for a wide range of diseases. Much of the traditional uses have been validated by scientific research. A number of chemicals isolated from plants like Valine, Paedersoidic acide, Histamin, Vit c, Ursolic acid, Tyrosine, Paederoside, Scandoside shown promising activity in many trials. The plant has been extensively studied in terms of pharmacological activities of its major components and results indicate potent anti-inflammatory, analgesic, anticancer activity, antispasmodic activities.

Discussion - This plant is one of the most important source of medicines. It is popularly known as Prasarani and has been used traditionally as a medicinal plant. It has good amount of Paedersoldic acid that is carotenoid phytochemical, it has anti-inflammatory property, and anti-cancer property. People suffering from chronic pain can use its oil. 50% ethonolic extract of leaves exhibits antispasmodic activity on isolated guinea pig ileum. It also shows gross depresent effect and hypothermia in mice and anti cancer activity against human epidermoid, carcinoma of nasopharynx in tissue culture.

Conclusion - In conclusion, Gandhaprasarani have been mentioned nearly in all important Ayurvedic texts. Mainly it is described in Charak Samhita, Sushrut Samhita and Ashtang Hridaya. According to all acharyas Gandhaprasarani having Tikta rasa, Ushna Virya, Katu Vipaka, Guru and Sara Guna. It acts as Kaphvatasahmaka and used in many diseases like Vatayadhi, Amvata, Mutrakrucha, Sandhivata, Vatarakta, Udarshula, Vibhand, Shotha, Atisar, Arsh, Malavarodh etc. These results show that Gandhaprasarani (Paederia foetida) has Antiinflammatory, Anti-spasmodic, Analgesic, Antioxidant, Anticancer and nutritional value. The oil can be extracted for local application and has very good result in chronic pain. This vital plant should be cultivated more to meet the nutritional and medicinal requirement at cheaper value.

References -

1) Charaka Samhita - Chikitsa Sthan, 28/165, 166.
2) Sushruta Samhita - Chikitsa Sthan, 15/44.
3) Ashtang Hridaya - Chikitsa Sthan, 21/64, 65.
4) Raj Nighantu, Parpatadi Varga, 36,37,39.
5) Kaiydev Nighantu, Aushadhi Varga, 1060,1061.
6) Priya Nighantu, Pipalyadi Varga, 55, 56.
7) Madhav Dravyaguna, Vividhaushadhi varga, 95.
8) Chakradatta, vatayadhi Chikitsa, 120, 173, 215, 216.

अभिनंदन !

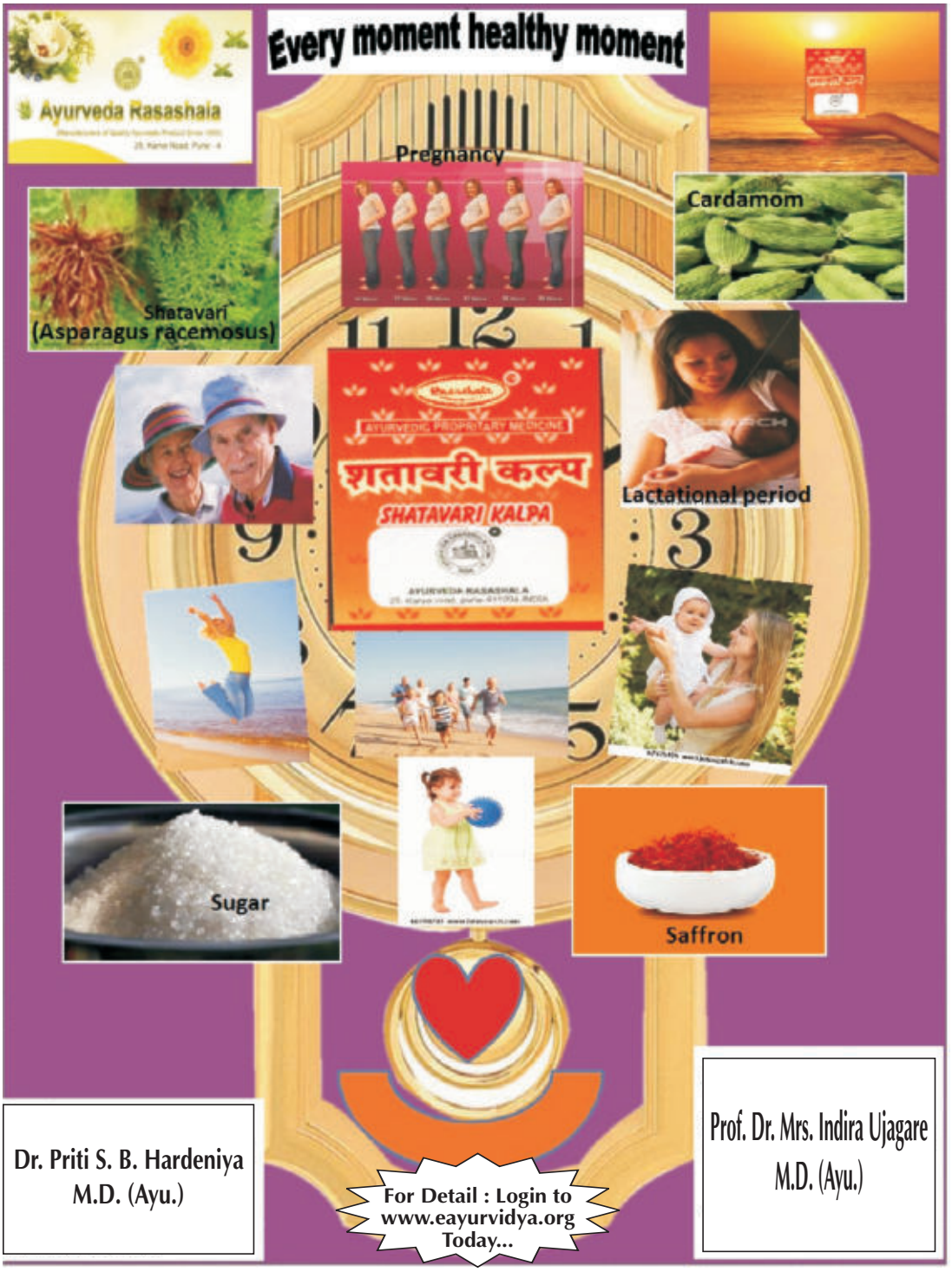
वैद्य योगेश बेंडाळे ह्यांची एस.एफ.सी. वर नियुक्ती

पुण्यातील ख्यातकिर्त आयुर्वेदीय चिकित्सक व कर्करोग तज्ज्ञ वैद्य योगेश बेंडाळे ह्यांची नुकतीच दिल्ली. स्थित, सेंट्रल काऊंसिल ऑफ रिसर्च इन आयुर्वेद सायन्सेस (CCRAS) च्या स्थायी वित्त समितीच्या (एस.एफ.सी.) सदस्यपदावर नियुक्ती करण्यात आली.

वैद्य बेंडाळे हे राष्ट्रीय शिक्षण मंडळ संचलित टिळक आयुर्वेद महाविद्यालय समितीचे विद्यमान सदस्य असून राष्ट्रीय शिक्षण मंडळाच्या विविध कार्यक्रमात सक्रीय असतात.

राष्ट्रीय शिक्षण मंडळातर्फे व आयुर्विद्या मासिक समितीच्या वतीने वैद्य योगेश बेंडाळे ह्यांचे हार्दिक अभिनंदन व शुभेच्छा.

Poster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आयुर्विद्या मासिक वर्धापनदिन समारंभ – दि. १ जून २०२१

डॉ. विनया दीक्षित

राष्ट्रीय शिक्षण मंडळ संचलित आयुर्विद्या मासिकाच्या ८४ व्या वर्धापनदिनानिमित्त दि. १ जून २०२१ रोजी आयुर्वेद रसशाळा सभागृहात विशेष समारंभाचे आयोजन करण्यात आले होते. 'कोव्हिड' विषयक शासकीय निर्बंधामुळे फक्त विशेष निमंत्रितांच्या उपस्थितीत शासकीय नियमांचे काटेकोरपणे पालन करून आखिव रेखिव स्वरूपात समारंभाचे आयोजन करण्यात आले होते.

समारंभाच्या अध्यक्षस्थानी राष्ट्रीय शिक्षण मंडळाचे अध्यक्ष **डॉ. दि. प्र. पुराणिक** हे होते. व्यासपीठावर **डॉ. रा. श. हुपरीकर, डॉ. र. ना. गांगल,** आयुर्विद्याच्या सचिव **डॉ. विनया दीक्षित** व कार्यकारी संपादक **डॉ. अपूर्वा संगोराम** आसनस्थ होते.

प्रारंभी डॉ. दिलीप पुराणिक ह्यांच्या हस्ते श्री धन्वतंरीचे पूजन करण्यात आले. डॉ. मैथिली नैसर्गी ह्यांनी धन्वंतरी स्तवनाचे चरण आळविले.

डॉ. विनया दीक्षित ह्यांनी मान्यवरांचे व उपस्थित समुदयाचे हार्दिक स्वागत केले. सन २०२० साल कोव्हिडग्रस्त असूनही आयुर्विद्या मासिकाच्या सर्व अंकांचे प्रकाशन तर झालेच शिवाय "Ayurvedic Management of Infertility" ह्या विषयाच्या विशेष अंकाचे तसेच 'आरोग्यदीप दिवाळी अंक २०२०' चेही चाहत्यांच्या अभूतपूर्व स्वागतात प्रकाशन झाल्याचे त्यांनी नमूद केले.

'आरोग्यदीप दिवाळी अंक २०२१' च्या कार्यकारी संपादक डॉ. अपूर्वा संगोराम ह्यांनी २०२० अंकाची यशोगाथा वर्णन केली आणि २०२१ चा अंक त्यापेक्षाही वरचढ होण्याची ग्वाही दिली. तसेच आरोग्यदीपसाठी जास्तीत जास्त जाहिराती देण्याचे उपस्थितांना आवाहन केले.

"Ayurvidya International" व "E-ayurvidya" चे Co-Editor डॉ. अभय इनामदार ह्यांनी दोन्ही अंकांचे नियमित प्रकाशन होत असून ह्या अंकांमुळे Ayurvidya Global झाल्याचे अभिमानपूर्वक नमूद केले.

डॉ. सुभाष रानडे व डॉ. सुनंदा रानडे पुरस्कृत नवलेखकांना उत्तेजनार्थ देण्यात येणारी पारितोषिके मान्यवरांच्या हस्ते वितरीत करण्यात आली.

आयुर्विद्या वर्षारंभ २०२१ जून अंकाचे प्रकाशन डॉ. रमेश गांगल ह्यांच्या हस्ते करण्यात आले.

अध्यक्ष डॉ. पुराणिक ह्यांनी आयुर्विद्याच्या समिती सदस्यांची आदर्श कामासाठी प्रशंसा केली आणि सर्वांनी एकजूटीने काम करण्याचा आदर्श इतर समित्यांसाठी घालून दिला असल्याचे नमूद केले. आगामी वर्षासाठी व **'आरोग्यदीप २०२१'** साठी हार्दीक शुभेच्छा दिल्या.

आयुर्विद्या इंटरनॅशनलचे मॅनेजिंग एडिटर डॉ. मिहीर हजरनवीस ह्यांनी आभार मानले व सर्व समारंभाचे उत्कृष्ट सूत्रसंचलन केले.

डॉ. दि. प्र. पुराणिक – अध्यक्षिय मनोगत व्यक्त करताना.

डॉ. विनया दीक्षित, सचिव – आयुर्विद्याची वाटचाल अधोरेखित करताना.

वर्षारंभ २०२१ अंकाचे प्रकाशन – डावीकडून – डॉ. मिहीर हजरनवीस, डॉ. अपूर्वा संगोराम, डॉ. दिलीप पुराणिक, डॉ. रमेश गांगल, डॉ. राजेंद्र हुपरीकर.

कार्यकारी संपादकीय

वृक्षवल्ली आम्हा सोयरी वनचरी!

– डॉ. अपूर्वा संगोराम

वर्षाऋतुचा प्रारंभ झाला की सृष्टीला नवचैतन्याचे वेध लागतात सारीच धरणीमाता हिरवा शालू लेवून या पर्जन्यधारा झेलायला सज्ज होऊ लागते. ग्रीष्म ऋतुत होरपळून गेलेली धरणी या पर्जन्यधारांनी सुखावते. पावसावर अवलंबून असणारा बळीराजा आकाशात ढग दाटून येताच पेरणीच्या कल्पनेने उत्साही होतो. जून महिन्यात येणारा वटपौर्णिमेचा सणही मनुष्य आणि निसर्गाला एकमेकांच्या जवळ येण्यास सुचवतो. स्त्रीरोगात असणारे वडाचे महत्व या निमित्ताने अधोरेखित होते. जनमानसातही पावसाळा सुरू होताच सर्वांनाच वृक्षारोपणाचे वेध लागतात. गेल्या ५ वर्षांपासून ३३ कोटी वृक्षलागवड कार्यक्रमाअंतर्गत जुलै महीन्याच्या पहिल्या आठवड्यात वृक्षारोपण सप्ताहाचे आयोजन करण्यात येते. या निमित्ताने अनेक महाविद्यालयांमध्ये, टेकड्यांवर मोकळ्या जागांवर वृक्ष लावण्यात येतात. फक्त हे वृक्षारोपण करताना अधिक डोळसपणे करण्याची गरज आहे. नेमक्या कोणत्या वनस्पतींची लागवड करावी याबद्धल प्रबोधन होणे जरुरीचे आहे.

वृक्ष लागवड करताना विशेषतः देशी वृक्षांचा समावेश करणे जरुरीचे आहे. मुख्यतः वड, पिंपळ, कडूनिंब खैर, करंज, अशोक, आंबा, मोह, अर्जुन यासारखे देशी वृक्ष लावणे जरुरीचे आहे. या देशी वृक्षांमुळे पर्यावरणाचा समतोल साधण्यास मदत होते. त्यांचे पुनरुत्पादन होण्यास मदत होते. त्यावर राहाणारे पक्षी, प्राणी हे निसर्गाचा समतोल राखण्यास मदत करतात. हवा शुद्धीकरण प्रकीयेतही हे वृक्ष मदत करतात. प्रदूषण कमी करण्यास सहाय्य करतात. बऱ्याचवेळा या लागवडीची सखोल माहिती न घेतल्यामुळे रस्त्याच्या कडेला, दुभाजकांमध्ये अनेक विदेशी झाडांची लागवड केलेली दिसते. अशा प्रकारच्या झाडांवर पक्षी घरटी बांधत नाहीत. किंबहुना यामुळे पर्यावरण समतोलही राखला जात नाही.

सध्याच्या काळात अनेक नविन सोसायट्यांना बांधकामास परवानगी देताना, वृक्षलागवड, कम्पोस्ट खत प्रोजेक्ट उभारणी या गोष्टी बंधनकारक केल्या जातात. अशा वेळी या प्रत्येक सोसायट्यांनी औषधी वनस्पतींची लागवड केली तर त्याचा औषधी वनस्पतींचे ज्ञान, स्वास्थ्यरक्षणासाठी त्यांचा उपयोग, त्यांपासून बनविण्यात येणाऱ्या सोप्या औषधी कल्पना या गोष्टींचे ज्ञान सोसायटीमधील सर्व वयोगटातील नागरीकांना होऊ शकेल. या सर्व बाबींसाठी औषधी वनस्पती क्षेत्रातील तज्ज्ञांची मदत घेता येऊ शकेल.

पुणे, मुंबई यासारख्या महानगरांमध्ये जागेअभावी मोठे वृक्ष फक्त सोसायट्यांच्या आवारातच लावता येऊ शकतील. परंतु घरगुती स्तरावराही घराच्या/फ्लॅटच्या छोट्या बाल्कनीतही लावता येतील अशा, शतावरी, अश्वगंधा, वेखंड, वाळा, कोरफड, आले, गवती चहा, जास्वंद, मोगरा, गुलाब यासारख्या औषधी वनस्पती कुंड्यामध्येही लावता येऊ शकतील. जागा असेल तर गुळवेल, पिंपळी, मिरे, विड्याची पाने, जाई, जुई यांचे वेल एखाद्या पाईपच्या आधाराने सोडता येतील.

नॅशनल मेडीसिनल प्लॅंट बोर्ड व मिनिस्ट्री ऑफ आयुष यांच्या पुरस्कृत प्रकल्पाअंर्तगत सावित्रीबाई फुले पुणे विद्यापीठाच्या बॉटनी विभागातर्फे औषधी वनस्पती मोफत दिल्या जात आहेत. पुणे महानगरपालिकेच्या उद्यान विभागातर्फेही पावसाळ्यात अत्यल्प दरामध्ये रोपे उपलब्ध करुन दिली जातात. टिळक आयुर्वेद महाविद्यालयाच्या वनौषधी सल्लाकेंद्रामार्फतही कोणत्या औषधी वनस्पती कोठे लावाव्यात यासंबंधी मार्गदर्शन करण्यात येते. तसेच अत्यल्प दरामध्ये औषधी वनस्पतींची रोपे ही उपलब्ध करुन देण्यात येतात!

इतकेच नव्हे तर औषधी वनस्पतींच्या उद्योगातून लाखोंची उलाढाल करण्याची कामगिरी सुनील पवार या केवळ बारावीपर्यंत शिकलेल्या आदिवासी तरुणाने उपरोक्त पुणे विद्यापीठाच्या प्रकल्पाच्या साहाय्याने केली.

सध्याच्या कोव्हीड पॅनडॅमिकच्या काळात औषधी वनस्पतींना अतिशय मागणी आहे. त्यामुळेच औषधी वनस्पतींची लागवड ही केवळ मर्यादीत स्वरुपात न राहाता त्याचे योग्य नियोजन केले तर त्याचे मोठ्या व्यवसायातही रुपांतर होऊ शकते हेही या निमित्ताने सिद्ध झाले आहे. चला तर मग या निमित्ताने "झाडे लावा झाडे जक्षवा" असा संकल्प सोडू या!

उपसंपादकीय

सदा सर्वदा योग तुझा घडावा

– डॉ. सौ. विनया दीक्षित

२१ जून हा जागतिक योग दिन! भारतीय संस्कृतीची संपूर्ण जगाला मिळालेली आरोग्यपूर्ण भेट म्हणजे योग व आयुर्वेद. योग साधना ही आरोग्य साधनेचा अविभाज्य भागच आहे. जागतिक पातळीवर प्रत्येक व्यक्तीच्या मनामध्ये, दैनंदिनीमध्ये 'योग' अभ्यासाचा ठसा उमटण्यासाठी हा योग दिन साजरा करणे नक्कीच प्रभावी ठरते.

योग साधनेचा अभ्यास म्हणजे केवळ शारीरिक व्यायाम किंवा आसनांचे प्रकार नाहीत. महर्षी पातंजलींना व आयुर्वेदातील संहिता ग्रंथात, विज्ञानात जी योगसाधना आहे ती मोक्षप्राप्तीचा मार्ग व मनुष्याचा सर्वांगीण विकास–आतून बाह्यतः व बाहेरून आतपर्यंत असे शूचिर्भूत होणे म्हणजे 'योग' अभ्यास करणे असा आहे.

सध्याच्या महामारीच्या परिस्थितीत लादलेल्या टाळेबंदीत इंद्रियांचे नियमन करण्याशिवाय पर्यायच उरला नव्हता. भोगविलासाचे मार्गच कुलूपात असल्याने आपोआप यम–नियमन यांना चालना मिळाली आहे. ती पुढे टिकवून ठेवणे हे स्वतःच्या व कुटुंबाच्या आरोग्यासाठी अत्यंत गरजेचे आहे.

'प्राणायाम' म्हणजे अर्थातच श्वसनाचे नियंत्रित व्यायामच. अर्थात केवळ दूरचित्रवाणीवर पाहून हे प्राणायामांचे प्रकार करण्यापेक्षा तज्ज्ञांच्या मार्गदर्शनाखालीच सराव करणे आरोग्यरक्षक असते. चुकीच्या पद्धतीने केलेले प्राणायामाचे प्रकार संकट निर्माण करू शकतात. या प्राणायामांच्या शास्त्रशुद्ध सरावांनी मनुष्य स्वतःला स्वतःच्या प्रत्येक श्वासाला ओळखायला लागतो. व्यावहारिक जगातील ओळख विसरून क्षणभर अतिमहत्त्वाच्या श्वसन क्रियेवर लक्ष देऊ लागतो. पुढे पुढे अधिक व्यापक विचारसरणी व दृष्टिकोन निर्माण होतो.

आसन – विशिष्ट शारीरिक व मानसिक रचना अवस्था या योगासनातून साधली जाते. यामध्ये त्या स्थितीत काही काळ राहिल्याने शरीरातील अंतर्गत व बाह्य अशा विविध अवयवांना रसरक्ताभिसरण सुरळीत होऊन प्रत्येकाचे कार्य सुधारते. शरीराला नियंत्रित करणाऱ्या रासायनिक स्रावांचे, पाचक स्रावांचे स्रवणही योग्य प्रमाणात व उपकारक होण्यास मदत होते. मुख्यतः पाचकाग्नि सुधारतो, त्यामुळे रसरक्तादी सर्वच धातू, उपधातू व मल यांची पुष्टी होते. माणसाची वर्णकांती सुधारते. छान भूक लागते व तितकीच शांत झोप लागते. रक्त लघवी किंवा इतर कुठल्याही नैदानिक तपासण्यापेक्षा सहज समजणारी ही आरोग्य निदर्शक प्रमाणके आहेत.

योगासनांचा सराव नियमित हवा. ज्ञानेंद्रीयांचे व कर्मेन्द्रीयांचे हीन–मिथ्या व अतियोग टाळून यम नियमांसह प्राणायाम व ध्यान यांचा नित्य सराव चालू ठेवला तर प्रत्येकाचे आरोग्य संवर्धन निश्चितच होते. मनाचे ही सामर्थ्य वाढते.

एका व्यक्तीच्या व्यक्तीगत आरोग्याबरोबरच 'कौटुंबिक' संवाद, आनंद व समाधान यावरही प्रकर्षाने हितकर प्रभाव होतो. वादविवाद, आळस आणि अनियमितता या गोष्टी आपोआपच गळून पडतात. एक खऱ्या अर्थाने एकरूप आनंदी–आरोग्यपूर्ण कुटुंब तयार होते. अशी कुटुंबे उत्तम जीवनमूल्ये सांभाळणारा समाज तयार करतात. असे समाज एक स्वस्थ राज्य, स्वस्थ राष्ट्र बनवतात.

योगदिन हा दैनंदिन बनावा. सदा सर्वदा प्रत्येकाची योग साधना करण्याची प्रवृत्ती व्हावी हीच श्री धन्वंतरी चरणी प्रार्थना!