

जून २०२३

या अंकात एकूण
३६ पाने आहेत.



Ayurvidya

आयुर्विद्या

किंमत २५ रुपये

ISSN - 0378 - 6463

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

June 2023

1

Ayurvidya Masik

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



रक्तवर्धक अवलेह

रक्ताल्पता, दीर्घल्य
यामधे उपयुक्त.
(रसायन बल्य, धातूवर्धक
म्हणून उपयुक्त).



रसगंधा वटी

मानसिक अस्वास्थ्य,
कामाच्या ताणामुळे
वारंवार चिडणे, झोप न येणे,
या सर्वांमुळे उत्पन्न
शरीराचे अस्वास्थ्य
यामध्ये अतिशय उपयोगी.



गोल्ड कंपाऊंड

शरीराचे बल, वर्ण,
कांती व प्रतिकार शक्ती
वाढविणारे उत्कृष्ट रसायन.
हृदयाला बल देणारे,
वृद्धावस्थेमधील सांधेदुखीवर
उपयुक्त.



बालचतुर्भद्र सायरप

लहान मुलांमधील सर्दी,
घसादुखी, अतिसार (जुलाब होणे)
व खोकला यावर
सुरुवातीच्या अवस्थेत द्यावे.



शास्त्रोक्त व पेटेंट आयुर्वेदिक औषधे तयार करणारी संस्था.

आयुर्वेद रसशाळा, पुणे

GMP Certified Company

फॉर

आयुर्वेद रसशाळा फाऊंडेशन, पुणे

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

E-mail : admin@ayurvedarasashala.com Visit us at : www.ayurvedarasashala.com Toll free No. 1800 1209727





॥ श्री धन्वंतरये नमः ॥

राष्ट्रीय शिक्षण मंडळ, संचालित

आयुर्विद्या
मासिक



Rashtriya Shikshan Mandal's

AYURVIDYA
Magazine



ISSN - 0378 - 6463

शंखं चक्रं जलौकां दधतमृतघटं चारुदोर्भिश्चतुर्भिः ।
सूक्ष्मस्वच्छातिहृद्यांशुकपरिविलसन् मौलिमम्भोजनेत्रम् ॥
कालाम्भोदोज्ज्वलाङ्गम् कटितटविलसद्धारुपीताम्बराढ्यम् ।
वन्दे धन्वन्तरितं निखिलगदवन प्रौढदावाग्रिलीलम् ॥
नमामि धन्वंतरिमादिदेवं सुरासुरैवन्दितपादपङ्कजम् ।
लोके जरारुग्भयमृत्युनाशनं धातारमीशं विविधौषधीनाम् ॥

To know latest in "AYURVED" Read "AYURVIDYA"
A reflection of Ayurvedic Researches.

ISSUE NO. - 1

JUNE - 2023

PRICE Rs. 25/- Only.

- १ जून २०२३- आयुर्विद्या मासिकाच्या वर्धापनदिनानिमित्त विनम्र अभिवादन!
- २६ जून २०२३- टिळक आयुर्वेद महाविद्यालयाच्या वर्धापनदिनानिमित्त शुभेच्छा!

CONTENTS

● संपादकीय - ● वाढती लोकप्रियता अर्थात "YOGA" ची	- डॉ. दि. प्र. पुराणिक	5
● जीवघेणा विषाणू	- डॉ. दि. प्र. पुराणिक	6
● Conceptual Study Of Stress Management Through Yogic Science	- Dr. Mihir Hajarnavis	7
● Relevance Of Ritucharya In Present Era	- Vaidya Madhavilata Dixit	13
● Role Of Swasthavritta In Geriatric Health Care : A Review	- Vd. Ravina Dalvi, Vd. Neelima Shisode	17
● Concept Of Dvadashashan Pravachar For Liver Health.	- Vd. Devashree Khare, Dr. Mihir Hajarnavis	20
● A Clinical Trial To Evaluate The Efficacy Of Ashtaguna Manda As A Raktavardhak In Female Volunteers Having Low Hemoglobin Level	- Vd. Madhumati Lohiya, Dr. Mihir Hajarnavis	24
● An Observational Study Of Effect Of Nidraveg Dharan In Nurses	- Vd. Pranjali Shewale, Vd. Neelima Shisode	28
● श्रद्धांजली -		32
● अहवाल - संवेदनशील विषयावरील व्याख्यान समारंभ	- डॉ. मनोज फडणीस	31
● अभिनंदन!		6, 33
● जाहीर प्रगटन/आवाहन		32
● स्वास्थ्यरक्षण-योग वर्षारंभ विशेषांक	- डॉ. अपूर्वा संगोराम	33
● "स्वास्थ्यश्री" प्राप्तीसाठी ...	- डॉ. सौ. विनया दीक्षित	34
● About the Submission of Article and Research Paper -		4

This Issue of Ayurvediya Masik is dedicated to Swasthavritta and Yoga.

"AYURVIDYA" Magazine is printed at 50/7/A, Dhayari - Narhe Road, Narhe Gaon,
Tal. - Haveli, Pune -41 and Published at 583/2, Rasta Peth, Pune 11.
By Dr. D. P. Puranik on behalf of Rashtriya Shikshan Mandal, 25, Karve Road, Pune 4.

IMP ● Views & opinions expressed in the articles are entirely of Authors. ●

June 2023

3

(ISSN-0378-6463) Ayurvediya Masik

About the Submission of Article and Research Paper

Rashtriya Shikshan Mandal's
AYURVIDYA
Magazine

- The article / paper should be original and submitted **ONLY** to "AYURVIDYA"
- The **national norms** like Introduction, Objectives, Conceptual Study / Review of Literature, Methodology, Observations / Results, Conclusion, References, Bibliography etc. should strictly be followed. Marathi Articles / Research Paper are accepted at all levels. These norms are applicable to Review Articles also.
- One side Printed copy** along with PP size own photo and fees should be submitted at office by courier / post / in person between **1 to 4 pm on week days and 10 am to 1 pm on Saturday.**
- "AYURVIDYA" is a peer reviewed research journal, so after submission the article is examined by two experts and then if accepted, allotted for printing. So it takes atleast one month time for execution.
- Processing fees Rs. 1000/- should be paid by cheque / D.D. Drawn in favour of "AYURVIDYA MASIK"
- Review Articles may be written in "Marathi" if suitable as they carry same standard with more acceptance.**
- Marathi Articles should also be written in the given protocol as -**
प्रस्तावना, संकलन, विमर्श / चर्चा, निरीक्षण, निष्कर्ष, संदर्भ इ.

For Any Queries Contact -
Prof. Dr. Apoorva Sangoram (09822090305)

Write Your Views / send your subscriptions / Advertisements

Subscription, Article Fees and Advertisement Payments
by Cash / Cheques / D. D. :- in favour of

To

Editor - **AYURVIDYA MASIK**, 583 / 2, Rasta Peth, Pune - 411 011.
E-mail : ayurvidyamasik@gmail.com Phone : (020) 26336755, 26336429
Fax : (020) 26336428 Dr. D. P. Puranik - 09422506207
Dr. Vinaya Dixit - 09422516845 Dr. Apoorva Sangoram 09822090305
Visit us at - www.eayurvedya.org

Payable at Pune Date :

Pay to **"AYURVIDYA MASIK"**

Rupees Rs.

(Outstation Payment by D. D. Only)

- For Online payment - Canara Bank, Rasta Peth Branch, Savings A/c. No. 53312010001396, IFSC - CNRB0015331, A/c. name - 'Ayurvedya Masik'. Kindly email the payment challan along with name, address and purpose details to ayurvidyamasik@gmail.com

"AYURVIDYA" MAGAZINE Subscription Rates : (Revised Rates Applicable from 1st Jan. 2014)

For Institutes - Each Issue Rs. 40/- Annual :- Rs. 400/- For 6 Years :- Rs. 2,000/-

For Individual Persons - For Each Issue :- Rs. 25/- Annual :- Rs. 250/- For 6 Years :- Rs. 1,000/-

For Ayurvedya International - Annual :- Rs. 550/- (For Individual) & Rs. 1000/- (For Institute)

ADVERTISEMENT RATES	Full Page	- Inside Black & White - Rs. 1,600/- (Each Issue)	Attractive Packages for yearly contracts
	Half Page	- Inside Black & White - Rs. 900/- (Each Issue)	
	Quarter Page	- Inside Black & White - Rs. 500/- (Each Issue)	

GOVERNING COUNCIL (RSM)

Dr. D. P. Puranik	- President
Dr. B. K. Bhagwat	- Vice President
Dr. R. S. Huparikar	- Secretary
Dr. R. N. Gangal	- Treasurer
Dr. V. V. Doiphode	- Member
Dr. B. G. Dhadphale	- Member
Dr. M. R. Satpute	- Member
Dr. S. G. Gavane	- Member
Adv. S. N. Patil	- Member
Dr. S. V. Deshpande	- Member(Ex-officio)

AYURVIDYA MASIK SAMITI

Dr. D. P. Puranik	- President / Chief Editor
Dr. Vinaya R. Dixit	- Secretary / Asst. Editor
Dr. A. M. Sangoram	- Managing Editor/Member
Dr. Abhay S. Inamdar	- Member
Dr. Sangeeta Salvi	- Member
Dr. Mihir Hajarnavis	- Member
Dr. Sadanand V. Deshpande	- Member
Dr. N. V. Borse	- Member
Dr. Mrs. Saroj Patil	- Member



वाढती लोकप्रियता अर्थात “YOGA” ची

डॉ. दि. प्र. पुराणिक

United Nations Organization (UNO) च्या जनरल असेम्ब्लीने डिसेंबर २०१४ मध्ये दरवर्षी २१ जून हा दिवस ‘इंटरनॅशनल योग डे’ म्हणून जाहिर केला. तेव्हा पासून सातत्याने दरवर्षी अधिक मोठ्या प्रमाणात अनेक देशात हा दिवस विशेष कार्यक्रम, महोत्सव इत्यादींचे आयोजन करून संपन्न केला जातो.

योग शास्त्राचे प्रणेते महर्षी पतंजली हे मानले जातात. सुमारे पाच हजार वर्षांपासून योग शास्त्र अथवा योग विद्या भारतात परीचित असून कोटयवधी लोक नित्य जीवनात त्याचा अवलंब करतात. योग शास्त्रास आंतरराष्ट्रीय स्तरावर मान्यता मिळाल्याने दरवर्षी २१ जून रोजी ‘विशेष विषयाला’ (Theme) धरून अनेक शहरात मोठे महोत्सवासारखे (Festival) कार्यक्रम आयोजित केले जातात. सन २०२२ चा विशेष विषय होता “Yoga For Humanity”. ह्या निमित्ताने म्हैसूर येथील राजवाड्यात योग महोत्सव आयोजित करण्यात आला. त्यात पंधरा हजारांपेक्षा जास्त देश विदेशातील योग प्रेमींनी सहभाग नोंदविला.

सन २०२३ चा विशेष विषय (Theme) आहे “One World, One Health”. ह्या निमित्ताने मार्च २०२३ मध्ये “आयुष” मंत्रालय व “मोरारजी देसाई नॅशनल इन्स्टिट्यूट ऑफ योग” ह्यांच्या विद्यमाने दिल्लीच्या तालकटोरा स्टेडीयम मध्ये योग महोत्सवाचे आयोजन करण्यात आले. तर योगाची राजधानी असणाऱ्या ऋषीकेश येथे ७ ते १३ मार्च २०२३ दरम्यान महोत्सवाचे आयोजन करण्यात आले. ह्या कार्यक्रमात “योग, औषधोपचार (Meditation), आरोग्य व स्वास्थ्य (Health & wellness) ह्यांचा समावेश होता.

योग साधना करण्याचे अनेक फायदे सांगितले जातात

त्यामध्ये प्रामुख्याने बल वाढविणे (Improvement in strength), मानसिक तोल (Balance), लवचिकपणा (Flexibility), पाठदुखी (Back pain), सांधेदुखी (Joint pain) इत्यादींची तीव्रता कमी होणे, रक्ताभिसरणात सुधारणा (Improvement in Circulation), मानसिक ताण कमी होणे (Melt away tension), मानसिक कणखरपणा येणे (Powerful mindfulness), स्मरणशक्ती सुधारणे (Improvement in Memory Function) ह्यांचा समावेश होतो.

एकूणच योग साधनेचे अनेक मानसिक व शारीरिक फायदे अनुभवसिद्ध असल्याने दिवसेंदिवस योगाची लोकप्रियता नित्य वाढतेच आहे. विकसित राष्ट्रांमधील लोक हे आर्थिक दृष्ट्या संपन्न असले तरी तेथील हवामान, जीवनशैली, आहार-विहार, संस्कृती ह्यामुळे अनेक लोक हे मानसिक ताणतणाव ह्यामुळे शारीरिक पीडाग्रस्त होत असल्याने त्यांच्या मानसिक आणि शारीरिक वेदना, योगाचा स्विकार केल्याने कमी होतात. त्यामुळे ते अधिकाधिक प्रमाणात योगाकडे आकृष्ट होतात. अशीच काहीशी परिस्थिती भारतातील नागरिकांमध्येही आढळत असल्याने तेही योगाकडे आकृष्ट होतात. अनुभवांती “आयुष्यच बदलून गेल्याची अनुभूती” त्यांना येते आहे.

अनेक व्याधीग्रस्त आजारांना कंटाळतात आणि त्यावर उपाय शोधतांना नकळत कोणत्या ना कोणत्या व्यसनाला कवटाळतात आणि स्वतःचा अंत ओढवून घेतात. अशा लोकांनी योग्य प्रकारे योग्य मार्गदर्शनाखाली “योग साधना” केल्यास उत्तम आरोग्यपूर्ण जीवन जगता येणे सहज शक्य आहे हे नक्की.



जीवघेणा विषाणू

डॉ. दि. प्र. पुराणिक

“Covid 19” चा सर्व जगावर आणि भारतावर असलेला भयगंड हळु हळु कमी होतो आहे. तरीही मार्च २०२३ मध्ये साथीचा पुनरुद्भव होण्याच्या बातम्यांनी पुन्हा एकदा शंका-कुशंकांनी सर्वसामान्य नागरीक कमालीचे धास्तावले. विशेषतः केंद्रीय आरोग्य मंत्रालयाच्या पुढाकाराने घेण्यात आलेल्या

“Mock Drill” मुळे पुन्हा एकदा सर्वचजण धास्तावले. परंतु पुढे कोव्हिडचा कोणताही पुनरुद्भव न झाल्याने सर्वांनी समाधानाचा एकच सुस्कारा सोडला आणि पुन्हा देशभरातील व्यवहार विस्कळीत न होता सुरळीतपणे सुरु राहिले.

परंतु हे समाधान अल्पकाळच टिकून राहिले. कारण

A Magazine dedicated to “AYURVED” - “AYURVIDYA” To Update “AYURVED” - Read “AYURVIDYA”

तेवढ्यात विविध माध्यमांवर बातमी झळकली, “देशाला डेंगीच्या (Dengue) आजाराचा डंख”, २०२२ मध्ये एक लाखाहून अधिक रुग्णांची नोंद”. सुशिक्षित जनसामान्य ह्या बातमीने पुन्हा काळजीच्या खाईत लोटले गेले. कारण आता सर्वांनाच माहित आहे की हा आजार डासांमुळे होतो आणि फैलावतो. महाराष्ट्रातील आणि देशभरातील तपमानात वाढ सुरु झाल्यापासून सगळीकडेच डासांच्या संख्येत प्रचंड प्रमाणात वाढ झालेली आहे आणि त्यामुळेच डेंग्यूच्या विषाणूचा फैलाव झपाट्याने होत असल्याचे आढळून आले आहे.

अधिक व्यापक दृष्टीने विचार केल्यास असे आढळते की भारतासह सर्व जगालाच डेंग्यूचा धोका संभवतो. जगातील सुमारे १२५ देशात डेंग्यूची साथ असून निम्म्या जगावर ह्या विषाणूचा विळखा पडला आहे. विशेषतः गेल्या अर्धशतकात Dengue Virus (DENV) चा प्रादुर्भाव झपाट्याने वाढला आहे आणि सातत्याने वाढतोच आहे. दरवर्षी सुमारे १० ते ४० कोटी लोकांना डेंग्यूची बाधा होत असून भारतातील सुमारे ४ टक्के लोकांना डेंग्यूचा संसर्ग होत आहे. उपलब्ध झालेल्या माहितीनुसार सन २०२२ मध्ये भारतात सुमारे एक लाख दहा हजार “डेंग्यू” चे रुग्ण आढळले. परंतु २०२१ मध्ये डेंग्यूच्या १ लाख ९३ हजार २४५ रुग्णांची नोंद झाल्याचे आढळते.

भारतात विशिष्ट राज्यांमध्ये ‘डेंग्यू’ चा प्रभाव अधिक प्रमाणात होत असल्याचे आढळून आले आहे. केरळ, उत्तर प्रदेश, आंध्र, अरुणाचल ह्या राज्यात डेंग्यूचा फैलाव अधिक आढळतो. तर जून ते सप्टेंबर हे महिने ‘डेंग्यू’ होण्यास पोषक मानले जातात. जुलै महिना Anti Dengue Month म्हणून पाळला जातो. परंतु भारतात ‘१६ मे’ हा दिवस दरवर्षी “National Dengue Day” म्हणून विविध उपक्रमांनी व कार्यक्रमांनी साजरा होतो.

जागतिक स्तरावर विचार केल्यास डेंग्यूचा प्रादुर्भाव अमेरीका, कॅरिबिअन देश, ब्राझिल, बोलिव्हिया, पेरू, कोलंबिया, निकारागुआ ह्या देशात अधिक प्रमाणात झालेला आढळतो. Southeast Asia मध्ये १९५० व १९७५ मध्ये महासाथीच्या स्वरूपात डेंग्यूचा प्रादुर्भाव झालेला आढळतो. तसेच ह्या रोगाचा जास्त धोका लहान मुले व ज्येष्ठ व्यक्तींना अधिक असल्याचे आढळून येते.

डेंग्यू विषाणूजन्य आजार असल्याने नक्की अशी औषधे लागू होत नसल्याने जी चिकित्सा करावयाची ती सर्वसाधारण ‘Flu’ आजारसारखी म्हणजेच पूर्ण विश्रांती, लाक्षणिक चिकित्सा, द्रव पदार्थ ह्या प्रकारे करणे आवश्यक. Aspirin अथवा Ibugesic सारखी औषधे देवू नयेत.

प्रतिबंधक उपायात “4 S” नुसार योजना करणे आवश्यक.

- 1) Search and Destroy Mosquitos.
- 2) Secure Self Protection.
- 3) Seek early consultation.
- 4) Support Fogging/Spraying.

डेंग्यू विषाणूचे प्रकारात सातत्याने बदल होत असल्याने सर्वसमावेशक (vaccine) लस उपलब्ध नसली तरी उपलब्ध व्हॅक्सिन्स मध्ये TDV परीणामकारक सिद्ध झाली आहे. सातत्याने नवनवीन व्हॅक्सिन शोधण्यात शास्त्रज्ञ गर्क आहेत.

“Dengue” ला नवीन नाव “Breakbone Fever” देण्यात आले आहे. डेंग्यूचा रुग्ण अचानक गंभीर होवून Shock मध्ये जाण्याचा धोका असल्याने व Internal Bleeding होवून मृत्यु पावण्याची शक्यता असल्याने अत्यंत काळजीपूर्वक व कुशल वैद्यकीय व्यक्तीने हाताळणे आवश्यक असते हे सांगणे न लगे.



डॉ. डोईफोडे ह्यांचा दुहेरी सन्मान !

डॉ. विजय डोईफोडे ह्यांना Professional Excellence Award

ज्येष्ठ आयुर्वेद तज्ज्ञ आणि राष्ट्रीय शिक्षण मंडळाचे नियामक मंडळाचे सदस्य डॉ. डोईफोडे ह्यांचा नुकताच Rotary Club MID East तर्फे Professional Excellence Award डॉ. ए. आर. केंच ह्यांच्या हस्ते देवून गौरव करण्यात आला.

तसेच राष्ट्रीय शिक्षण मंडळाच्या वतीने डॉ. डोईफोडे ह्यांची आयुर्वेद रसशाळा ह्या घटक संस्थेच्या समितीच्या अध्यक्षपदी दि. १ मे २०२३ पासून नियुक्ती करण्यात आली.

राष्ट्रीय शिक्षण मंडळ, आयुर्वेद रसशाळा व आयुर्विद्या मासिक समितीच्या वतीने डॉ. डोईफोडे ह्यांचे हार्दिक अभिनंदन व कार्यकालास शुभेच्छा.

अभिनंदन!





Conceptual Study Of Stress Management Through Yogic Science

Dr. Mihir Hajarnavis, M.D (Kayachikitsa and Swasthavritta)
PhD (Ayurved-Swasthavritta), Professor and Head Dept. of Swasthavritta,
Tilak Ayurved Mahavidyalaya, Pune.

Introduction : Stress, in everyday terms, is a feeling that people have when they are overloaded and struggling to cope with demands.

These demands can be related to finances, work, relationships, and other situations, but anything that poses a real or perceived challenge or threat to a person's well-being can cause stress.

Stress can be a motivator. It can be essential to survival. The "fight-or-flight" mechanism can tell us when and how to respond to danger. However, if this mechanism is triggered too easily, or when there are too many stressors at one time, it can undermine a person's mental and physical health and become harmful.

There can be many ways to combat stress. But Yoga is the best method to relieve stress. This research paper throws a light on Concepts of stress management through the yogic compendia.

Aim : Conceptual Study of Stress Management through Yogic Science

Objectives : 1) To study the meaning of stress.
2) To study ways of stress management from the yogic samhitas.

Review of Literature : Review of the literature from the Yogic compendia.

1) Review of Stress and Health : There is a rapid rise in non communicable diseases in the last two decades. The reason behind is changed lifestyle or an unhealthy lifestyle and stress in our life. Life style includes food, sleep, exercise, occupation, behavior etc. Proper food at proper time and in exact quantity gives rise to good health. Improper food, improper meal timings and food in excess or less quantity leads to a number of diseases. In

addition to proper food, proper exercise is necessary for maintenance of health. When food is improper or not taken following the rules of food intake; and if exercise is not done regularly then a person is unable to withstand stress which leads to many lifestyle diseases. These include hypertension, Diabetes mellitus, obesity, cardiovascular disorders and even cancer.

The body changes in the following ways during stress : • blood pressure and pulse rate rise. • breathing is faster. • the digestive system slows down. • immune activity decreases. • the muscles become tense. • a heightened state of alertness prevents sleep.

How we react to a difficult situation will affect how stress affects us and our health. A person who feels they do not have enough resources to cope will be more likely to have a stronger reaction, and one that can trigger health problems. Stressors affect individuals in different ways.

2) Review of Yoga to relieve stress : Regular exercise has been proven to:

- Reduce stress.
- Ward off anxiety and feelings of depression.
- Boost self-esteem. • Improve sleep.

When you exercise, your body releases chemicals called endorphins which help to release stress.

There are various forms of exercise which include aerobic exercises viz. Cycling, jogging, walking, hill climbing, playing a ground sport. Also there are gym exercises for muscle building. Yoga is another way of keeping good health. It includes practicing yama, niyama, yogasanas, pranayam, pratyahara, dharana, dhyana and samadhi. Along with these measures body cleansing processes viz. shuddhikriyas- vamandhuti,

varisaar, basti, jalaneti, sutraneti, trataka, ,nouli and kapalbhati are also included in yoga. Thus, Yoga can help in today's era for prevention of life style related diseases and manage stress.

Yoga is defined as "chittavritti nirodha" i.e. keeping the mind away from the fluctuations or the removal of the fluctuations of the mind. One in three or 33 percent of people are suffering from life style related disorder viz. Obesity, diabetes, stroke, cardiovascular disease or cancer. Stress has tremendously increased in every individual's life. A lot of competition has increased the stress in school going children. Stress or chinta is an etiological factor for the derangement of the rasavahasrotas as per Ayurved. Practicing ashtang yoga is the best method to relieve stress.

The first step in Ashtang Yoga is Yama¹. Yama is the practice of ahimsa (nonviolence), satya (truth), asteya (non stealing), brahmacharya (abstinence of the sense organs from their subjects, especially abstinence from sex), aparigraha (non possessiveness), daya (sympathy), arjava (politeness), kshama (forgiving nature), mitahara (controlled eating) and shaucha (cleanliness). These are restraints for Proper Conduct in the society. They are a form of moral imperatives, commandments, rules or goals. Practice of these ten paths ensures peace and harmony in the society. If every individual is made aware of these ethical conducts from the childhood there will be a "stress free society". But, if there is violence, terrorist attack, robbery, theft, gang rape, torturing the weaker sections of the society, arrogance, corruption, revenge, etc. in the society, it builds up the stress in an individual's life. Here, violence does not necessarily means firing a weapon. Using of harsh words is also himsa. Yama is the path to social well being. The path of Yamahas to be imbibed in the minds of the people educating them throughout their learning phases.

The second step in ashtang yoga is

Niyama². Niyama is the practice of Shaucha (cleanliness), santosh (contentment / satisfaction), tapa (purifying the body and mind by practice of fasting, perform certain religious rituals as per the religion), swadhyaya (continuous self study of self habits, reading of inspirational and motivational literature, and study of yogic texts) and ishwarpranidhan (surrendering to something greater than ourselves). Niyama is for personal health. It is a path of self discipline. This path of self discipline maintains physical and mental health of an individual. These habits are to be inculcated in a person since childhood. Every individual should be educated about these self discipline measures.

The third step in ashtang yoga is Asana³. There are asanas performed for maintaining health (pavanmuktasana, dhanurasana, sarvangasana, etc.), for performing meditation (padmasana, siddhasana, etc.) and giving rest to the body (shavasana, makarasana). Practicing asana gives stability and comfort to the body and the mind. It is a specific posture of the body for maintaining stability in the body. Daily practice of asanas helps in maintaining health and preventing non communicable diseases like obesity, diabetes. Disease specific asanas can be tailor made as per the complaints of the person. Stress relieving asanas include practice of shavasana. In addition to asanas Yoga nidra is very useful in all lifestyle related diseases. To achieve stability and comfort from practice of asanas one must try to sit in a particular posture for longer time by concentrating / meditating on the supreme authority. Once practice of sitting in a posture for longer time is achieved and stability and comfort is also achieved the person attains to capacity to withstand dwandwas. Dwand means opposites viz. hot and cold, sukha and dukkha (happiness and sorrow). Thus after a long practice of asanas ones mind and body becomes tough enough to face any challenges

in life. This is what is needed today to prevent illnesses associated with improper life style.

The fourth step in ashtang yoga is Pranayam⁴. Pranayam is a regulated form of an otherwise hurried and irregular flow of air. Pranayam is to practiced as puraka (inhalation), antakumbhaka (holding the breath after inhalation), rechaka (exhalation) and bahikumbhaka (holding the breath after exhalation). The ratio of puraka, kumbhaka, rechaka for a beginner is 1:2:2. One can inhale by counting 1 to 4 numbers, hold the breath by counting 1 to 8 numbers, exhale by counting 1 to 8 numbers and again hold the breath for 1 to 8 numbers. Thus, one cycle/rotation of pranayam gets completed. Anuloma Viloma Pranayam is to be practiced in the beginning, i.e. Inhalation through the right nostril, holding the breath and exhaling through the left nostril. Continue in the reverse manner. Do minimum 10 rotations. After continuous practice of anuloma- viloma for a fortnight daily for 10 minutes start practicing other pranayama types. Suryabhedan (inhalation through right nostril, holding and exhalation through the left nostril), Ujjayi (inhalation through both nostrils, making a sound in the throat while inhalation and exhalation through the left nostril), Shitali (inhalation through the mouth, holding and exhalation through the left nostril), Sitakari (inhalation through the spaces between the teeth by making a hissing sound, holding and exhalation through the left nostril), Bhasrika (inhalation and exhalation without holding the breath), Bhramari (inhalation through the nostrils, holding and exhalation by making a humming sound) are to be practiced on daily basis. Daily practice of Pranayama helps to relieve stress and make the mind stable. Pranayama is useful in respiratory problems, and cardiac problems. Pranayama stabilizes vatadosha and thus the mind become stable. Shuddhikriyas viz. Vamandhuti, jalani, basti, trataka and kapalbhati if practiced before pranayam then the body is detoxified.

All the toxins are released by proper practice of these purification processes under supervision of a yoga expert.

The fifth step in ashtang yoga is practice of Pratyahara⁵. Pratyahara means detachment from all attachments. It literally means "withdrawal from the senses," or the practice of turning inward, is about moving toward the core of your being. The first five steps of ashtang yoga are the external features of ashtang yoga. Their practice helps to maintain physical and mental health. This further helps the individual to study more about the inner self and to connect the inner soul to the eternal soul.

The last three steps are the internal features of ashtang yoga. Dharana⁶, the sixth step means concentration on any inanimate or living object. Dharana helps to develop concentration and makes the mind more and more stable.

The seventh step in ashtang yoga is dhyana⁷. Dhyana is practicing meditation, meditating on any object, living or non living. Dhyana is the best path to make the mind free from its subjects. To achieve a stress free life and freedom from lifestyle diseases dhyana is the best method. While practicing dhyana one can chant God's name. Chanting Omkar in a meditative posture is good for mind control. Yoga nidra or yogic sleep is another way to relieve stress. It is state of consciousness between waking and sleeping. It is like going to sleep stage, conscious state induced by guided meditation. Daily practice of this guided meditation for 20 minutes gives a healing effect, promotes deep rest and relaxation for many stress related symptoms.

Samadhi is the final step in ashtang yoga. It is the path leading to salvation (moksha). The soul is freed from the birth and death cycle. Sampradnyant and Asampradnyat or Sabeeja and Nirbeeja are the types of Samadhi. After meditating for a long time the yogin achieves sabeeja or sampradnyant stage where satyabuddhi alias rutambharapradnya, the

divine intellect emerges. This divine intellect makes the yogin realise about the fact that our real nature is divine. God the underlying reality exists in every being. There is a supreme power in this world and the inner soul has to connect and be one with the eternal soul, the supreme Lord.

Though, this philosophy is the ultimate goal of Yoga for a healthy life one must follow the principles of Yoga in the daily routine. The life style related diseases can be prevented by following some self discipline as regard- diet, sleep, exercise, yogasanas, positive thoughts and making the mind very strong with the practice of pranayama, omkar chanting and meditation. Adopting Ayurved along with Yoga as a life style is very beneficial for maintaining health and preventing all diseases emerging due to improper, unhealthy life style.

Review of past work done:

- 1) **Yoga for stress** reduction and injury prevention at work ---ST Gura (2002)
- 2) A healthy way to handle work place stress through yoga, meditation and soothing humor- Revati Deshpande (2012)
- 3) **Stress management:** a randomized study of cognitive behavioural therapy and yoga] Granath, S Ingvarsson, U von Thiele...(2006)
- 4) A randomised comparative trial of yoga and relaxation to reduce stress and anxiety C Smith, H Hancock, J Blake-Mortimer... (2007)
- 5) **Teaching self-care through mindfulness practices :** The application of yoga, meditation, and qigong to counselor training JC Christopher, SE Christopher... (2006)
- 6) **Mindbody medicine and the art of self-care :** teaching mindfulness to counselling students through yoga, meditation and qigong MB Schure, J Christopher... (2008)
- 7) **Yoga** as an alternative and complementary approach for stress management: a systematic review-- M Sharma (2014)

Materials: 1) The yogic compendia Patanjali Yogadarshan, Hatahyogapradipika and Gherandsamhita, were thoroughly studied for this concept.

2) Trishikhibrahmanopanishad, Tejbindu panishadwere also studied.

Methodology:

Study design: Literary Study

(See all Observations Tables 1 to 8)

Discussion: A thorough discussion of the observations obtained was done as follows:

1) Stress relieving through Yama: These are the rules mentioned for social health. If all the community all over the world is made aware of these Yamas there will be peace and harmony throughout, thus relieving stress.

2) Stress relieving through Niyama: These are the rules mentioned for individual health. If all the community all over the world is made aware of these niyamas there will be peace and stress free human being everywhere. Thus, many diseases can be prevented.

3) Stress relieving through Asanas: These are mentioned for self health. If all the community all over the world is made aware of these asanas there will be balance in the human body. Thus people all over the world will be free from stress and diseases.

4) Stress relieving through Pranayama : If pranayama is practiced and followed by every individual many diseases can be prevented. Life will be free from stress.

5) Stress relieving through Pratyahara : If pratyahara is practiced and followed by every individual many diseases of the body and mind can be prevented. Life will be free from stress.

6) Stress relieving through Dharana: If dharana is practiced and followed by every individual many diseases of the body and mind can be prevented. Life will be free from stress. Concentration of the mind increases.

7) Stress relieving through Dhyana: If dhyana is practiced and followed by every individual mind is free from disease and stress.

8) Stress relieving through Samadhi: If Samadhi is practiced and followed by every individual disease, pain and stress of the past, present and future is prevented.

Results : Observations obtained from the study of the different Yogic compendia mentioned in the above tables reveals the following results: 1) Eight fold path of ashtang yoga can be followed.

Observations:

Table No.1 Stress Management through Yama

Point	Patanjal Yogadarshan	Hatahyoga Pradipika	Trishikhi Brahman-upanishad	Tejbindu upanishad	Effect
Yama	Five Types-Ahimsa, Satya, Asteya, Brahmacharya Aparigraha	Ten Types-Ahimsa, Satya, Asteya, Daya, Brahmacharya Arjava, Kshama, Dhriti, Shaucha Mitahara	Vairagya of Deha and Indriya	-----	Maintains harmony and peace in the society. Useful for social well being. Relieves social Stress.

Table No.2 Stress Management through Niyama

Point	Patanjal Yogadarshan	Hatahyoga Pradipika	Trishikhi Brahman-upanishad	Tejbindu upanishad	Effect
Niyama	Five Types-Shaucha, Santosh, Tapa, Swadhyaya, Ishwarpranidhan	-----	Concentrating on the Almighty	Inculcating Good thoughts and withdrawal of bad thoughts	Maintains self health at Physical and Mental level. Relieves individual stress.

Table No.3 Stress Management through Asana

Points	Patanjal Yogadarshan	Hatahyoga pradipika	Gherand Samhita	Effect
Asana	Stability and a comfort state in body and mind	-----	Stability and a comfort state in body and mind	There is no effect of good and bad, comfort and discomfort on the body and mind. Body and mind becomes tough enough to withstand stress. Asanas release endorphin which in turn relieves stress.

Table No.4 Stress Management through Pranayama

Points	Patanjal Yogadarshan	Hatahyoga pradipika	Gherand Samhita	Effect
Pranayam	Control over inhalation and exhalation. The rate of respiration can be increased or decreased	Controlling the breath by practice of puraka, kumbhaka, rechaka	Control over the breath with mantra recitation	Vata becomes stable and hence mind becomes stable. The cover on the divine light within us vanishes. Mind becomes pure and subtle, thus freedom from stress is achieved

Table No.5 Stress Management through Pratyahara

Points	Patanjal Yogadarshan	Hatahyoga pradipika	Gherand Samhita	Effect
Pratyahara	Refraining of the mind from the indriyas	-----	Refraining the mind from its subjects	When the mind is detached from all its attachments there is no stress left in life. Mind becomes fearless and tough.

Table No.6 Stress Management through Dharana

Point	Patanjal Yogadarshan	Gherand Samhita	Effect
Dharana	Concentrating the mind on one object	Concentrating the mind on one object	Due to concentration on one object mind is free from other subjects. Stress is thus relieved.

Table No. 7 Stress Management through Dhyana

Point	Patanjal Yogadarshan	Effect
Dhyana	Meditating on the same object as in dharana	Mind is free from all subjects. Mind focuses only on the Almighty. All types of physical and mental stress is relieved in this state.

Table No. 8 Stress Management through Samadhi

Point	Patanjal Yogadarshan	Effect
Samadhi	Only the meaning of the object focused in dharana and dhyana is understood. The physical features vanish from the mind. Sabeeja and Nirbeeja are the types.	Realization of the almighty occurs. The mind is free from all topics. The intellect Ritambhara Pradnya or Satyabuddhi emerges. This gives realization to the soul that the Almighty is the only truth and rest all is a created false image. The soul attains moksha (freedom from birth and death) when this intellect also disappears. Thus pain and stress of the past, present and future is stopped. The soul rests in peace with the Almighty.

2) Yama and Niyama give peace and harmony socially as well as individually. Thus stress is relieved after their daily practice. 3) Asanas are best to maintain health and giving freedom from diseases and stress. 4) Practice of Pranayama maintains stability and peacefulness in the mind. Stress is completely relieved. 5) Practicing Pratyahara frees a person from all attachments. Thus stress free life is achieved. 6) The practice of Dharana, Dhyana and Samadhi makes an individual more close to the Almighty. Freedom from worldly pleasures and sorrow is sought.

Mind is free from all malice. Soul attains freedom from birth and death. Thus Moksha (salvation) is attained.

Analysis: Analysis of the above results reveals that an individual should practice yama, niyama, asana, pranayama and pratyahara on daily basis. When the mind is freed from all subjects' practice of dharana, dhyana and samadhi is started to attain moksha. Freedom from birth and death cycle is the ultimate aim of human beings life. **Conclusion:** After the observation drawn

from the Yogic compendia with discussion and presentation of results following conclusion is drawn: 1) Practice of Ashtang Yoga leads to a peaceful and stress free life. 2) Ashtang Yoga is the best ever known technology for an enhanced living.

References: १) यम – देहेन्द्रियेषु वैराग्यम् यमः इत्युच्यते। (त्रिशिखि ब्राह्मणोपनिषद्) आहिंसा, सत्य, अस्तेय, ब्रह्मचर्य, अपरिग्रह, (पातंजल योगदर्शन) दया, आर्जव, क्षमा, धृति, मिताहार, शौच (हठयोग प्रदीपिका) २) नियम – अनुरक्तिः परेतत्त्वे सततनियमः स्मृतः। (त्रिशिखि ब्राह्मणोपनिषद्) सजातीयप्रवाहश्च विजातीयतिरस्कृतिः। नियमो हि परानन्दोनियमाक्रियते बुधैः॥ (तेजबिंदूपनिषद्) शौच, संतोष, तप, स्वाध्याय, इश्वरप्रणिधान (पातंजल योगदर्शन) ३) आसन स्थिरसुखमासनम्। प्रयत्नशैथिल्यम् अनंतसमापत्तिभ्याम्। ततोद्वन्द्वान अनभिघातः। (पातंजल योगदर्शन) ४) प्राणायाम – तस्मिन् सति

श्वासप्रश्वासयोः गतिविच्छेदः प्राणायामः। तत्र बाह्याभ्यन्तरस्तंभवृत्तिः देशकाल संख्याभिः परिदृष्टो दीर्घसूक्ष्मः। बाह्याभ्यन्तर विषयापेक्षीचतुर्थः। ततः क्षीयते प्रकाश आवरणम्। किं च धारणासु च योग्यता मनसः॥ (पातंजल योगदर्शन)

५) प्रत्याहार – स्वस्वविषयासम्प्रयोगेचितस्य स्वरूपानुकारइवेन्द्रियाणां प्रत्याहारः। विषयेभ्योऽन्द्रियार्थेभ्यो मनोनिरोधनम् प्रत्याहारः। (पातंजल योगदर्शन) ६) धारणा – देशबंधचित्तस्य धारणा। (पातंजल योगदर्शन) ७) ध्यान – तत्र प्रत्ययैकतानताध्यानं स्यात्। (पातंजल योगदर्शन) ध्यानं निर्विषयं मनः। ब्रह्मात्मचिंताध्यानं स्यात्। ८) समाधि – तदेवार्थमात्रनिर्भासं स्वरूपशून्यमिव समाधिः। (पातंजल योगदर्शन) सबीज, संप्रज्ञात – सवितर्क (पंचमहाभूत), सविचार (तन्मात्रा), सानंद (इन्द्रिय), सास्मित (महत्)

Bibliography: 1) Gherand Samhitawritten by Gherand Muni. 2) Hathayogapradipika written by swatmarama yogendra with the commentary of Brahmananda. 3) Patanjali Yogadharshan published by chaukhamba academy.



Relevance Of Ritucharya In Present Era

Vaidya Madhavilata Dixit, M.D., Ph.D. (Ayu.), Chief consultant, Dixit Ayurveda, Ponda, Goa. Ex- HOD, Dept. of Swasthavritta, Gomantak Ayurveda Mahavidyalaya, Shiroda, Goa.

Introduction: Relevance of Ritucharya after describing Dinacharya in detail is established by Samhitakaras. After following all required rules about Dinacharya, Ritucharya is required due to fluctuation of Doshas in major quantity as season changes. Ritucharya is described in the form of Cheshta and Aahara. Cheshta is Vyavaya, Vyayam, Abhyanga etc regimen. Ritucharya is Ahara and Vihara of opposite Gunas of that Ritu.

Detail description about Ritucharya is available in the texts. Special recipes to be used according to Ahara Vargas are described according to Ritu. Texts also describe about which food articles and recipes should be avoided to prevent Ritujanya Vikara. Like नैव पूजितं आर्द्रकम्।...प्रायशो दधि गर्हितम्। etc. About Vihara according to season, references are available like वर्षे वर्षे अनुतेलं च कालेषु त्रिषु ना चरेत्। प्रावृट् शरद वसंतेषु गत मेघे नभस्तले।

Such guidelines from the texts need to be followed, but we will have to understand about the current scenario. Now a days in schools, children learn that there are three or four seasons. Summer, Winter, and monsoon. Sometimes spring and autumn are taught. This may be true for European or some other countries, but in India there are six seasons. In ancient times even a layman in India

would know about it, but these days people even cannot correctly give 6 names of Ritus. Therefore teaching Ayurveda right from school level is very much important, so that preventive measures which were already known to a layman in ancient times can be again taught right from childhood.

Review of literature from Samhitas - To identify Ritu, Masa (Magha etc. months), Rashi (Sun sign) and Swaroop (climatic changes)-these 3 criteria are described in the texts. Among which Hemadri explains that Rashi is most important to decide a Ritu. Now a days Rituviparyaya (untimely seasonal changes) is observed many times throughout the year. So, to decide Ritu, Rashi and Swaroop of that Ritu are important. Also, in the case of Rituviparyaya, Swaroop or Lakshana of Ritu helps. To understand Ritu globally, in different countries all over the world, Lakshana of the Ritu and accordingly changes which take place in the body are to be understood to advise Ritucharya.

Diurnal fluctuations of Doshas as well as Prakopa of Doshas in various Ritus should be explained in simple way to people. Maximum diseases and infections are found in Ritusandhi (the time period during transformation from one season to the other), especially at the beginning of Vasanta and Sharad Ritu. Clinics of general practitioners are full of patients in these Ritus. But people do not know about the changes that occur

in the body during these seasons. After winter seasons (Hemanta and Shishira), they assume that summer (Grishma) has started, whereas actually it is Vasanta Ritu. They start drinking cold beverages, ice creams etc which are to be avoided in Vasanta Ritu, since it is the time for kaphaprakopa. Then they come with Kasa, Shwasa, Pratishyaya etc. diseases and infections. Same is the case about Sharad Ritu. That is why it is told that वैद्यानां शारदी माता पिता च कुसुमाकरः।

Materials and Methods : 1) Major Samhitas viz. Charakasamhita, Sushruta Samhita, Ashtang hridaya nad Ashtang Samgraha have been reviewed. 2) Today's life style and eating habits have been taken into consideration with regionwise examples.

Observation and Discussion : Major difference is observed between Ritucharya description in our texts and present situation in the society. Even a lay man was knowing Dinacharya and Ritucharya in detail in the past. But nowadays simple knowledge like cold drinks and ice cream should be avoided in winter and spicy food items, pickles, hot drinks like tea, coffee should be avoided in summer, is also not followed by the people. Mass education through OPDs run by government, preparation of charts, posters is required for this purpose. Also, camps should be arranged at the beginning of each Ritu and through mass media, information about Ritucharya should be given.

Simple rituals and trends followed to control doshas are now a days not followed. For example, eating chutney prepared from tender leaves and flowers of Nimba, along with Hingu, Saindhava Lavana, Ajamoda, Maricha is mentioned in Panchanga as a ritual on the day of Gudhi Padwa, which is a preventive measure for the likely diseases in Vasanta Ritu. To start drinking cold water from mud pot after Ram Navami was a ritual to prevent Kaphaprakopa from cold water during Vasanta Ritu. To keep fast in Navaratri and Shravan month considering situation of Agni-digestive capacity, during this time period, is another example. These types of rituals were followed in the past throughout the country for prevention of diseases caused by seasonal changes. We can revive them in the present era. For example, the above-mentioned Yoga (combination) from Panchanga to be consumed on Gudhi Padwa, was prepared as a medicinal formulation and used for the treatment of disorders in Vasant Ritu and many other conditions, by late Vaidyaraj N.D.

Deshpande. I have also observed very good results with this yoga. Likewise for Sharad, Varsha, Grishma etc. combinations can be prepared. In Goa there was tradition to take Basti (Ajut) of Eranda Sneha (castor oil) at the end of May or in starting of June which is very much helpful in controlling Vata Prkopa during Varsha Ritu, but now it is not known and less followed. Also taking big dose of castor oil before monsoon for deworming was a good practice. In Anup Pradesha like Goa, worm infestations are observed in all age groups and in all seasons. Weekly once or twice Kalmegha Kwatha was used traditionally for preventing worm infestation and many other disorders. These types of rituals should be understood, explained and re-established.

Another way to establish the practice of Ritucharya in the society by our ancient seers, was planning of festivals according to seasons. Rituals as well as special recipes during those festivals were actually the guidelines and indications of Ritucharya during that particular Ritu. It is observed that in the starting of almost each Ritu, one big festival is planned. For example, Deepawali is planned at the juncture of Sharad and Hemant Ritu. To increase Bala as well as considering sheeta Kala and ignited Agni, Ahara and Vihara were planned. Different recipes which increase Bala are observed throughout the country. like Anarasa, Karanji, Chakali etc. in Maharashtra, coconut laddu in Assam, Mava Kachori, Dal- Bati- Churma, Barfi, Moth Wada, Ghewar (Ghrita Poora) in Rajasthan, Khaja in Bihar, Chirote etc sweets in Karnataka, Mathiya, Choraphali and different type of sweets in Gujarat and variety of Poha in Goa. This indicates that newly prepared Dhanya in that region is used to increase Bala and Ghrita, Taila is used to prepare recipes. In Vihara, Abhyanga and Udwartana are also followed in almost all states of our country during Deepawali, which is the part of Ritucharya to be followed in Hemanta.

Likewise, Makara Sankranti, Holi, Baisakhi, Onam, etc. festivals are planned at starting of Ritu. Holi is at the starting of Vasanta Ritu and maximum chances of infections are there in Vasanta Ritu, out of which maximum are airborne. Modern surveys also tell that many airborne infections, measles, mumps, conjunctivitis etc. are observed in spring. For mass disinfection of air, Holi was planned by our ancestors. With the help of heat by lighting Holi, by selection of specific wood to light the

Holi, Guggulu, Karpooora, Tila, Coconut etc. Dravyas used for Pooja and fumes prepared from them was helpful for disinfection of air on mass scale. We should guide people about selection of wood to light Holi and one kit or pack should be prepared which should contain Guggulu, Karpooora, Nimba, Jatamamsi like Bhutaghna and Jantughna Dravyas to celebrate this unique festival. We are doing it every year in our residential society.

Due to urbanization, industrialisation, globalisation and nuclear family system, celebration of festivals with all traditions and rituals is slowly disappearing from the society and instead of that celebration in hotels or going to tours during festivals is observed more.

Enjoyments described in each Ritu should be revived and planning to gather people in contact of mother nature can be done by different ways. Boating at night time in Sharad Ritu, tracking and camps in jungles in Vasanta Ritu, Dhara Gruha, musical fountains like many ways should be found to popularise Ritucharya.

Knowledge of Ritusandhi is also very important. In ancient times Yajnas were performed at Ritusandhi for disinfection of air by heat, medicinal fumes as well as auspicious sound. ऋतुसंधिषु रोगाः जायन्ते ऋतुसंधिषु यज्ञाः क्रियन्ते। Modern research as well as surveys reveal that increase in rate of infections at the time of seasonal variations and seasonal junctures is more. Specific diseases like measles, chicken pox, mumps, conjunctivitis like viral infections are observed in specific seasons. Also, survival of host or microorganism in humid and cold environment is well known. Yajna like rituals, Dhoopana everyday in the evening at home specifically in Vasanta, Varsha and Sharad Ritu, Dhumapana etc. help effectively. At the time of covid pandemic, maximum cases were found in Vasant Ritu like condition.

Charts of 15 days to leave Ritucharya of passing Rutu and to adopt Charya of new Ritu can be prepared and distributed through OPDS. Order of Ritu Satmya may be given for each Ritu. Immunity boosters should be distributed in mass at the time of Ritu sandhi.

Panchakarma for prevention of diseases is another topic to be explored for mass education. People still don't know about Panchakarma for prevention of diseases and maintenance of health. It is told that if one does Panchakarmas - Vamana in Vasanta, Virechana in Sharad and Basti in

Varsha then he will usually be disease free throughout the year. Camps, campaigns are going on but they should be organised nation wide on large scale.

Also, Nitya Rasayanas, Chyawanprash, Amalaki Rasayana, Pippali Rasayana, Ritu Haritaki and other Rasayanas according to Prakriti, age, gender as well as occupation should be advised to prevent Ritujanya diseases. While treating diseases knowledge of Ritus helps and should be considered. For eg. Tridosha Kopa takes place in Varsha Ritu. Aahara and Aushadhi Dravyas become Amlavipaki. So Kshara Dharmi medicines in Varsha Ritu help to cure many diseases. When it is too much humid weather, use of Karpooora and Dhoopana helps very nicely.

Change in regimen according to Ritu is a very new topic for people. When I explained to one of my patients who is sports man- that you should change types of exercise and quantity as season changes, he was surprised. Also, when we tell patient that the same Pav Bhaji or brinjal vegetable can be prepared with less or more spices, with ginger, garlic, with coconut- coriander, according to Ritu and when reason is explained, it is a new topic for them.

Danta Dhavana : Arka, Nyagrodha, Khadira, Karanja, Arjuna etc. Dravyas can be classified for Dantdhavana according to Ritu. In Vasanta -Arka, Karanja, Nyagrodha, Triphala, Karpooora etc., in Sharad, Khadira, Vata, Arjuna, Karpooora etc. in Varsha Lavanga, Bakul, Triphala, Karpooora etc Dravya can be used.

Nasya: is very useful to maintain health of eyes as well as to prevent many allergies - dust allergy etc. Nowadays computer vision syndrome is an emerging problem and screen time is increasing for all age groups. So Nasya is required for maintenance and prevention of Urdhwajatrugata Vikaras. Anu Taila, Panchendriya Vardhan Taila, Tila Taila can be used. Anu Taila in Pravrut, Sharad and Vasanta, Panchendriya Vardhan can be used in other Ritus and Tila Taila in general can be used. While doing my Ph.D research I have done Pratimarsha Nasya of Anu Taila for continuous 3 months on healthy volunteers and change in vision, improvement in quality of facial skin and improvement in hair fall was observed.

Gandush : Til Taila Gandush in general and Gandush with honey, milk, Gomutra, Triphala Kwatha etc. can be planned according to Ritu.

Abhyanga : Oils medicated with Vata, Pitta and

Kapha Shamaka Varga can be used according to Ritu for Abhyanga.

Vyayama : Quantity and type of Vyayama should be changed according to Ritu is not yet known to general public. Same type and quantity of Vyayama is done by the people throughout the year, either they go to gym or walking or other exercises. Ardha Shakti Lakshana's as well as knowledge about Aadana and Visarga Kala should be given to people and accordingly rigorous exercises in Hemanta- Shishira and Vasanta, medium in Sharad and less or mild exercises like Yogasanas in Varsha and Grishma should be advised. It is observed that diseases related to Pranavaha Strotas and heart diseases are observed more due to improper practice of exercises.

Udwartana: According to Ritu Dravya should be selected for Udwartana. In Vasanta- Khadir, Musta Karchura, Lodhra, Nimba, Haridra, Daruharidra, Karpura etc., in Sharad- Chandana, Rakta Chandana, Yashtimadhu Gulaba Pushpa, Ushira, Musta, Kapoora etc in Varsha- Triphala, Khadira, Manjishtha, Darvi, Haridra etc. can be used by adding milk. In Hemant and Shishir- Aguru, Manjishtha, Haridra, Kachura etc. and in Grishma- Yashtimadhu, Gulab, Chandana, Ushira, etc dravyas can be used by adding milk in them. In our clinic I prepare 4-5 types of Udvartanas according to season. People regularly use throughout the year and generally do not require any soap. Quality and lustre as well as softness of skin is improved.

Fragrance: Sugandhi Dharana according to Ritus can be prescribed by using fragrance of different flowers like Mogra, Kevda, Sandal, Khas, Rose etc. in the form of sprays, powders, etc.

Clothes: White colour in Varsha, Orange in Vasanta, yellow or white in Sharad etc. but in general dark colours in cold season and light colours in hot season as well as dried, clean, ironed and fumigated (Dhoopita) clothes in Varsha Ritu should be advised to avoid fungal infections.

Aahara : In detail according to Varga, considering region should be prescribed in the form of charts. for eg. I have prepared Ahara chart for Goan climatic conditions for each Ritu, in my book "Arogyasathi Ritucharya". For example, here is a chart for Sharad Ritu.

Breakfast- Monday- milk + chapati, Tuesday- Upma, Wednesday- moong dal dosa, Thursday- Palak Paratha, Friday- Shira Saturday- Daliya,

Sunday- cucumber sweet cake (काकडीचे सांदण)

Lunch- rice, Toordal, Masoor(lentil) Dal, Moong (green gram) Dal, grams, Chavli (kidney beans), Mataka

Vegetables - Bhendi, (ladies finger), Parval (snake gourd), Dudhi Bhopala (bottle gourd), Dodka (ridge gourd), Karli (bitter gourd), cabbage etc.

Side dish - Coconut chutney, banana Halwa, cucumber salad, carrot -tomato salad, beet root Halwa, Dudhi Halwa, Morawala, honey etc.

Evening snacks: Besan, Moong, Khajoor, Gahu Ladoo, Chivda, Chirote, Lahya Chivda, Shankarpali, Naachni (ragi) Sattva, milk, Kokam, Khas, Gulab, Amla Sarbat, fruit salad, popcorn etc.

Dinner : Palak -tomato soup with rice, Jwari roti, milk+rice, Moong Dal Khichdi, Masur and chapati, Bhakri- Bhaji, Methi Paratha, Sol Kadhi- rice, Milk+ chapati etc. Sleep during day time (Divaswapa) should be avoided except Grishma.

Ratricharya: Ratricharya rules to indulge sex are also not known to people. Adana - Visarga kala as well as considering Bala in each Ritu frequency should be told and Vajikaran a Dravyas should be prescribed.

Nidra- Due to shift duties, faulty lifestyle and working patterns one of the important Upastambha- Nidra is neglected and that is also one cause of increasing psychological disorders in our country. Nidra Sevan Vidhi should be explained.

Conclusion : Considering all these points and detailed descriptions available about Ritucharya in our Samhitas, it can be stated that still people are unaware of these fantastic ways to prevent diseases and it is the need of the era to propagate and highlight Ritucharya in the society. In this article, an effort has been made to show certain ways to educate people about Ritucharya, and re-establish the importance of Ritucharya, which is the need of the hour.

Bibliography: 1) Charaksamhita with shree chakrapani datta Kruta Ayurveda dipika Commentary. Published by chaukhamba Sanskrita Bharti Academy 3rd edition.

2) Shusrutasamhita With Nibandhasangraha commentary of shree Dalhanacharya published by Chukhamba orientalia 5th edition.

3) Ashtangasagraha With shashilekha commentary by Indu published by Atreya Prakashan 1980.

4) Ashtangahridaya By vagbhata with the commentary SarvangaSundara by Arundatta and Ayurvedarasayana by Hemadri.





Role Of Swasthavritta In Geriatric Health Care : A Review

Vd. Ravina Nagesh Dalvi,
2nd year PG scholar,
Swasthavritta Dept. TAMV, Pune.

Vd. Neelima R. Shisode, M.D. (Kayachikitsa)
Asso. Professor, Department of Swasthavritta,
Tilak Ayurved Mahavidyalaya, Pune.

Introduction :- Ageing is a natural process which begins at the time of conception, progresses throughout the life and ends at the time of death. As the age grows prevalence of illness increases and at the same time life expectancy decreases. Geriatrics or geriatric medicine is a branch of medicine which deals with the health and care of old people. There is a distinction between geriatrics and gerontology. Gerontology is the study of the social, cultural, psychological, cognitive, and biological aspects of aging. Jara or Rasayana chikitsa is mentioned as one of the anga (branch) in Ashtanga (8 branches) of Ayurveda.

कायबालग्रहोर्ध्वाङ्गशल्यदंष्ट्राजरावृषान् अष्टावङ्गानि
तस्याहुश्चिकित्सा येषु संश्रिता। ... (अ.ह. १/५)१

It is a science of rejuvenation. It contains various therapeutic modalities which delay ageing and helps in rejuvenation and promotes the overall health of an individual. Need of health care management in geriatric population - Various problems in the geriatric population are increasing day by day. Not only physical but also psychological issues are arising in old age population. Various problems in geriatric population are as follows - (See Table 1)

These types of numerous problems are arising in old age population which is creating a burden on health care system. Statistics says that by the end of 2050 there will be over 319 million elderly in India which is almost threefold the number identified by the census in 2011. So a strong health care management system should be

there to solve and overcome these geriatric problems. Ayurveda can help in all this aspects at various levels from preventive to curative therapies.

Aim and objective - Aim - To review various Upakram (measures) from different Ayurvedic texts (Samhita) which can be useful in geriatric health care. **Objective -** • Literature review regarding Jaravastha / Vriddhavastha from classical texts of Ayurveda. • Enlisting the various upakrama useful in geriatric health care.

Material and method - Materials - • Charak Samhita • Sushruta samhita • Ashtanga sangraha samhita • Ashtanga hrudaya samhita

• Bhavaprakasha samhita • Yogaratnakara • Other ayurvedic samhita. • Related Ayurveda as well as modern textbooks, dissertation works and published journals were reviewed.

Method - • Conceptual review of Jaravastha was done using the above materials. • Upakrama (various measures) useful in geriatric health care were enlisted and discussed.

Observation and Discussion :-

• **Explanation of Vriddhavastha in Ayurveda -** Utpatti, Sthiti and Laya are considered to be natural process of life. Anything even a small cell undergoes through these 3 stages of life. 3 avastha (stages) of person are explained in various Samhita. After birth an individual progresses through 3 stages Bala, Madhya and Vriddha.

Acharya has explained the span of each of

Physical problems	Psychological problems	Social problems
• Impairment of sense organs	• Dementia	• Loneliness
• Joint problem	• Emotional problems	• Dependency
• Cardiovascular problems, hypertension.	• Alzheimer's disease etc.	• Poverty etc.
• Diabetes, cancer any other major illness.		
• Accidental falls, Loss of mobility etc.		
• Senile cataract, glaucoma.		
• Osteoporosis, prostate cancer etc.		

them. Out of them Vriddhavastha starts from 60 years and lasts till the time of death. Acharya Sharangdhara has beautifully described the ageing process at the each decade of life.²

बाल्यं वृद्धिर्धर्मिण्या त्वग्दृष्टिः शुक्रविक्रमौ।

बुद्धिः कर्मेन्द्रिय चेतो जीवितं दशतो हसेत्॥ (शा.सं.पू.खं.६/६२)

Age	Declination of	Age	Declination of
10	Balya	20	Vriddhi
30	Chhavi	40	Medha
50	Tvak	60	Drishti
70	Shukra	80	Vikram
90	Buddhi	100	Karmendriya

According to other texts -

- In old age dominance of vata dosha is usually seen. It causes rapid degeneration of body.

वयोहोरात्रिभुक्तानां तेऽन्तमध्यादिगाः क्रमात्॥....(अ.इ. १/८)३

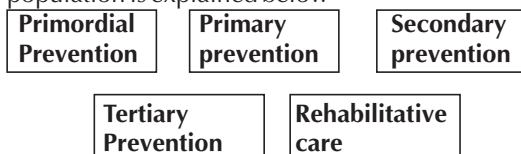
- As the age grows the agni of the person starts reducing. That's why Jaranshakti of the elderly people becomes weak as the age progresses.
- Basal metabolic rate decreases.

- Diseases like sandhigatvata, kampavata, shwasa, kasa, smruti bhrasha, malava- shtambha etc. are common in geriatric population.

That's why Jara or rasayana concept has been described in ayurvedic texts to overcome this declination of body. Ayurveda can play an important role at various levels of geriatric health care management. Some of them are explained below.

• Role of Swasthavritta in geriatric health care -

Ayurvedic geriatric procedures are aimed to cure not only physical but also emotional, behavioral issues with the help of proper medicines, Panchakarma, Rasayana chikitsa etc. With the help of this we can manage various geriatric problems in an efficient way. Ayurveda can provide an answer at various levels in geriatric population. A proper understanding of the Sidhhanta is very much important before proceeding. We can implement Ayurveda at various levels for managing health of the aged people. Health care system works at different levels of prevention. How Ayurveda can be implemented at those levels in geriatric population is explained below -



1) Primordial prevention - • It includes prevention before the onset of the disease or condition. • Pre geriatric care can be included in this. • Pre geriatric counselling can be done at this stage. Which can help people in accepting this natural process of life. Many a times people don't accept this fact their body is ageing due to that various problems may arise in future. Proper counselling can help in solving this problem.

- Pre geriatric counselling on the basis of Prakruti can be provided to people for overcoming early ageing. As some prakruti are prone for early ageing. For e.g. Khalitya and palitya is explained in Pitta Pradhan prakruti.

2) Primary prevention - • It includes health education of the people regarding the geriatric health care. • Following Dinacharya, Rutucharya, consumption of Rasayan, Vyayam, taking proper Aahar, Vihar etc. can be included in it. • Proper education regarding the ageing and its management through Ayurveda should be provided to the individual. • Simple dinacharya upakram like performing Abhyanga (oil massage) on daily basis can provide strength to body and helps in managing Ageing.⁴ • It helps in maintaining vata dosha in body. Also helps in relieving joint pain, dryness of skin etc. • Oils like Narayan Taila, Vishagarbha Taila, Bala Ashwagandhadi Taila, Nirgundi Taila etc. can be used for this purpose according to bala, agni and vyadhi of the elderly person. • Upakrama like shirobhyanga, padabhyanga, gandusha, nasya can be performed on daily basis. • Proper diet is very much important in this age group.as with age agni of a person becomes weak. • So one must take light, easy to digest, fresh food on daily basis.

3) Secondary prevention - • It includes Annual health checkups, early detection of disease, treatment provision etc. • Early detection can be done with the help of Poorvaroop assessment. For e.g. Hasta pada tala daha, deha chikkanata in Prameha. • Curative treatment on basis of dosha and vyadhi avastha can be administered in this.

Foreg.

- For constipation- Gandharva haritaki, chinch lavan taia etc.
- For pitta associated problems Sootshekhar, kamdudha vati, moravala etc.
- For

respiratory problems Sitopaladi churna, chyavanprasha, kanakasava, vasa syrup etc.

Innumerable medicines can be used for various ailments after assessing bala, agni, vyadhi, doshavastha etc. of a person. Many other ailments can be treated effectively with the help of Ayurveda.

4) Tertiary prevention - • Measures for maintenance of health after detection of any disease are included in this. • For e.g. - After undergoing bypass surgery the measures which have to be taken for maintenance of health and avoiding the recurrence are included in this.

• Rasayana therapies according to vyadhi can be administered in this.

5) Rehabilitative care - • After undergoing major surgeries or accidents, stroke etc. rehabilitation of a person is very much essential. • Any major illness can hamper the quality of life of an old age person. That's why improving quality of life of person and their rehabilitation is much more important in geriatric health care. • We can do this with the help of Ayurveda by providing proper medicines, treatment modalities like panchakarma, Rasayan etc.

For e.g. • In Pakshaghat patients Panchakarma treatments can help a lot in improving the mobility of the patient and eventually the quality of life. • Pinda sweda, mrudu sweda, basti, kati basti, janu basti, shiro dhara etc. can be advised in various individual according to type of ailment, bala, agni etc.

In this way Ayurveda can be implemented at various levels for maintaining health of geriatric population.

Detailed explanation of some measures mentioned above:-

• **Role of Rasayana in Geriatric health care** - The therapy which helps in establishing the age, promotes longevity, intellect and physical strength and also enables a person to fight out his disease is known as Rasayana. Acharya sharangdhara says that which destroy disease and ageing that is rasayana.⁵ Prashasta dhatu formation is the main function of rasayana. Various types of rasayana are explained in ayurvedic texts.

According to Charak Samhita Kutipravesik and vatatapik are 2 types of rasayana⁶.

• Out of which kutipravesik rasayan is not

feasible in current world. • So we can use vatatapika rasayana in geriatric health care.

• Various sanshodhan procedures should be performed before administering any rasayana but in geriatric population it is not possible to perform them. • Various rasayana dravya, kalpa (mentioned in chikitsasthana 1st chapter) can be used in maintaining and promoting the health of aged people. • Rasayan kalpa like Chyavanprash, agasti prash, Dhatri rasayan, Vardhaman pippali rasayan etc. can be used in geriatric health care; keeping in mind the status of agni of the individual. • Milk and ghee is mentioned as best rasayana. We can advise it to old age people for their health promotion and longevity as it is easily available and easy for consumption. • Achar rasayana is one of the important rasayana explained by Charaka Samhita. It is a behavioral therapy for calm mind and long life. • It is a unique Ayurvedic concept of mind rejuvenation. It controls and maintains the circadian rhythm of the body clock that results in good health, vitality and immunity, all of these slow the physiological ageing process.

• Medhya rasayan explained in Samhita can be used in psychological problems arising due to old age. Such as dementia etc.

Acharya sushruta has explained 3 types of Rasayana - • It contains Kanya, Naimitik and Ajasrika rasayana. • Kanya is again subdivided into Prana kama, Medhakama and Shree kama. These help in improving Life expectancy, Wisdom and Skin. • Ajasrika is that which can be consumed on daily basis. For e.g. Food containing all tastes, Milk, Ghee etc. • Naimitik is that which should be consumed for particular disease. For e.g.

1) Hrudrog - Arjuna, Shaliparni

2) Pandu - Loha

3) Prameha - Haridra amalaki

4) Kushtha - Tuvaraka

5) Manasa rog - Medhya rasayana

These were the some examples of Rasayana explained in Samhita for rejuvenation of body and mind.

• **Role of Yoga in Geriatric health care** -

• Vyayam in small quantity according to bala of person can be performed by elderly individual.

• Regular morning walk, simple yogasana,

pranayama can be advised for maintaining the health of elderly person. • In elderly individuals with less mobility chair yoga can be advised to increase their overall health. • It can help in maintaining strength stamina and flexibility of an elderly individual.

Conclusion : Though ageing is a natural process we can make this process somewhat simpler and happier by taking help of Ayurveda. Various medicines, Panchakarma and the important Rasayana Chikitsa can help us a lot in overcoming geriatric issues. Ayurveda should be implemented at various levels in public health care for providing its benefits to geriatric population. Which will definitely reduce the geriatric problems burden over the health care sector. Swasthavritta has a wide role in geriatrics health care so further studies and innovations

should be done for promotion and maintenance of geriatric health.

References :- 1) Tripathi Bhramhananda, Ashtanga hrudayam, Chaukhambha Sanskrit pratishthan, Delhi, reprint 2019, Sutrasthana 1/5, page no. 05. 2) Sharangdhar, Sharangdhar Samhita with dipika hindi commentary, Chaukhambha surbharati prakashan, Varanasi, reprint 2001, purva khanda 6/62, page no. 86, 09, 29. 3) Sharangdhar, Sharangdhar Samhita with dipika hindi commentary, Chaukhambha surbharati prakashan, Varanasi, reprint 2001, purva khanda 4/13, page no. 48. 4) Yadavji trikamji Acharya, Charka samhita with Chakrapanidatta virchit Ayurveda-Dipika Commentary, Chaukhambha Surbharati Prakashan, varanasi, reprint 2013. Chiktsasthana 1-Pada1 to 4.



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

Concept Of Dvadashashana Pravichar For Liver Health.

Vd. Devashree H. Khare,
M.D. (Scholar) Swasthavritta

Prof. Dr. Mihir Hajarnavis, M.D. (Kayachikitsa and Swasthavritta), Ph.D (Swasthavritta)

Introduction: Liver is one of the important vital organs of the body. It performs important metabolic activities which are responsible for nutrition and overall body health. The food that is eaten has to go through the long digestive tract and then it is made absorbable by the body and then we get nutrition in various forms. According to modern science liver plays an important role in this entire digestive process. According to Ayurved cause of any disease is agnimandya (Low digestive power). Diet (Ahar) is an important factor that affects agni. Not only dietary contents but meal timings, way of having food, methods of preparation of food, condition of patient are some of the important factors that need to be considered while designing the diet of patient. Acharya Sushrutacharya has mentioned Dvadashashana Pravichar in Swasthavritta adhyaya of uttarantra. These Dvadashashana Pravichar are nothing but twelve factors that should be considered in diet of a diseased person and also in healthy individuals according to Satmya Asatmya, Vaya (Age), Prakriti etc.

Objectives : Primary Objective : 1) To study Dvadashashana Pravichar for its role in liver health.

Secondary Objective : 1) To study various pathological conditions of liver. 2) To study various ahara, pathya kalpana and its guna for liver health.

Materials and Methods : Materials : 1) Sushrut Samhita 2) Charak Samhita 3) Ashtang Hridaya 4) Relevant Ayurvedic as well as modern textbooks of physiology and pathology. 5) Relevant research papers. **Methods :** Conceptual review of Dvadashashana Pravichar was done. Study of liver physiology and pathology was done. Application of Dvadashashana Pravichar for liver health was study.

Observations and Discussion :

Review of Liver Physiology according to modern science and Ayurved : As liver is one of the vital organs of the body it performs various functions as follows : 1) **Metabolic function :** Metabolism of carbohydrates, fats, proteins is carried out in liver. 2) **Storage function :**

Substances like vitamin A, D, B12, folic acid, iron, amino acids are stored in liver.

3) Synthesis : Liver produces glucose by gluconeogenesis. It also synthesizes all plasma proteins and other proteins such as clotting factors. **4) Secretion of bile.** **5) Excretory functions:** Liver excretes cholesterol, bile pigments, heavy metals, viruses, bacteria, toxins through bile. **6) Heat production :** Heat is produced during various metabolic functions of liver. **7) Hemopoietic functions:** It stores B12 for synthesis of hemoglobin. In fetus liver produces blood cells. **8) Hemolytic function:** Destruction of RBCs after the lifespan of 120 days. **9) Defense and detoxification:** Liver cells remove harmful agents by means of metabolic degradation or by conversion of toxic substances to non-toxic substances.

These functions involve processes like inflammation, destruction, regeneration of liver parenchyma continuously. After certain limit the overburden on liver causes structural and functional changes of liver which manifests in the form of liver disorders like hepatitis, cirrhosis of liver, various tumors of liver, fatty liver changes etc. Liver disease accounts for approximately 2 million deaths per year worldwide. Hence the disease burden is considerable. Hence, preventive measures have great value in disease control.

According to Ayurveda Yakruta is moolasthan of raktavaha srotas. Considering Ashray- Ashrayi bhava of Rakta - Pitta and Pitta - Agni Sahacharya we need to consider importance of Agni while treating liver diseases. Also as mentioned earlier cause of all diseases is Agnimandya (Less Digestive Power). Hence, one need to consider Agni of the patient.

Acharya Sushruta has said that, Pitta is Agni,
न खलु पित्तव्यतिरेकदन्वो अग्निरिति। (सु. सूत्र. २१-९)

Also Acharya Sushruta has mentioned Yakruta to be the sthana of pitta.

पित्तस्य यकृतलीहानौ हृदयं दृष्टिस्त्वक्...। (सु. सूत्र. २१-७)

Also yakruta is sthana of Ranjak Pitta which performs the function of Ranjana of Rasa Dhatu. Hence if jatharagni is in samyavastha (normal state) then it maintains other dependent agnis like ranjaka agni of yakruta.

Origin of organ Yakruta is from rakta according to Ayurveda.

यकृतप्लीहानौ शोणितजौ। (सु. शा. ४-२५) This explains relation of yakruta with pitta as well as agni.

Concept of Dvadashashana Pravichar and its application in maintaining liver health:

अत ऊर्ध्वं द्वादशाशनं प्रविचारान् वक्ष्यामः।

तत्र शीतोष्णस्निग्ध रुक्षद्रवशुष्कैक कालिकद्विकालि कौषधयुक्त मात्राहीनदोष प्रशमनवृत्त्यर्थाः। (सु. उ. ६४-५६)

In Uttartantra of sushruta samhita acharya sushruta has given the concept of Dvadashashana Pravichar i.e. principles to be followed while considering patient's diet. In the commentary of the same shloka acharya has mentioned that the same principles are also applicable to healthy individuals as there is need of consideration of factors like vata, satmya-asatmya, prakriti in their diet too.

According to Samanya Vishesh Siddhanta ahar, vihar, bhesaj should be designed opposite to the dosha which is dominant or vitiated in an individual.

Ayurved says that though the overall disease manifestation process has some similarities but it varies from person to person hence personalized diet should be given.

1) Sheeta Ahar : तृष्णोष्णमददाहार्तान् रक्तपित्तविषातुरान्।

मुर्छार्तान् स्त्रीषु च क्षीणान् शीतैरुपाचरेत्॥ (सु. उ. ६४-५७)

This principle has been specifically mentioned for people who are suffering from Pitta Vikaras like Trushna, Daha, Mada etc. In case of liver diseases in majority cases the damage is due to alcohol consumption. Alcohol i.e. Madya has ushna property hence there is vitiated pitta dosha which needs to be rectified with sheeta upachara. Kharjuradi Mantha, Dugdha, Ghrita can be included in diet which have sheeta guna. If it is non-alcoholic liver disease but the prakriti of patient is pittapradhan or dosha avastha is pitta dominated then also sheeta upacharas are applicable. In durbala patient lajamanda can also be given.

For healthy individual if the prakriti of patient is Pittapradhan or if young age that is pitta dominance avastha then ahariya dravyas like Amalaki, Ghrita, Dugdha, Draksha can be suggested to be included in daily diet which will cause pittashamana and anuloamana will

maintain the temperature and attain equilibrium. Swasthya Avastha can be maintained with help of this diet.

2) Ushna : कफवातामयाविष्टान् विरिक्तान् स्नेहपायिनः।

प्रक्लिन्नकायांश्च नरानुष्णरत्रैरुपाचरेत्॥ (सु. उ. ६४-५८)

Second factor mentioned is Ushna Ahara. Ushna Gunatmak ahara is to be used in case of Vata or Kapha dominance. There are conditions in disturbed liver functions where the prominent symptom is loss of appetite. Hence agnimandya needs to be corrected with help of ushna dravyas. In case of shakhashrit kamala there is vitiated Vata and kapha in this case ushna gunatmak ahara like kulattha yusha can be given. Ushna guna of Kulattha can calm Kapha and Vata too.

In healthy individual if the prakriti is vata or kapha dominated then use of ushna dravyas can be suggested. In this Ushnodaka Paan can also be included. Aharikalpana like Manda, Peya, Vilepi, Krishara can be used.

3) Snigdha : वातिकान् रुक्षदेहांश्च व्यवायोपहतांस्तथा॥

व्यायामिनश्चापि नरान् स्निग्धैरुपाचरेत्॥ (सु. उ. ६४-५९)

In case of vata dominant hetus like vyavay, vyayam and ruksha deha use of snigdha dravyas is recommended by acharya sushrutacharya. In this the ahara that will nourish body as well as will calm vata dosha is ksheera. Various siddha ksheerapaka can be given. Also Manda, Peya, Vilepi along with sneha like ghrita can be used. This will not cause agnimandya and is vatashamak too. In case of any liver disorder, the digestion process through liver is slowed down or hampered hence snigdha but easy to digest ahara can be suggested. Kruta Yavagu can be given.

4) Ruksha : मेदसाऽभिपरितांस्तु स्निग्धान्मेहतुरानपि।

कफाभिपन्नदेहांश्च रुक्षैरुपाचरेत्॥ (सु. उ. ६४-६०)

Many times the main disease condition is presented along with other conditions like diabetes etc. If there is bahu abadhha meda, mansa avastha ruksha ahara should be given. This ruksha ahara is helpful in kledanashana and agnivardhana.

Kashaya rasatmak dravyas can also be included in it e.g. Haritaki (Nitya Sevaniya Dravya), Masoor, Yava etc. Ushnodaka can be used in this condition too as it digests ama kapha.

This ruksha guna can be applicable in raised cholesterol conditions, non-alcoholic fatty liver disease. Caution should be taken while using ruksha ahara it should not cause vata prakop.

5) Dravahar :

शुष्कदेहान् पिपासार्तान् दुर्बलानपि च द्रवैः॥ (सु. उ. ६४-६१)

In chronic liver disease or in healthy individual if the patient is very thin, shushka deha then the form of ahara to be chosen should be drava. When the agni is not capable of digesting any solid food. In such cases dravahara can be considered.

Various forms of drava ahara like panaka, manda, peya, mantha, pramathya can be used. Preparations from shalidhanya are sadya tarpana and agnideepana dravyas which have great role in chronic conditions where there is marked agnimandya. In case of liver disorders milk is also an ideal diet which can be used in durbala patient. Manda is pranadharaka. Hence, in critical conditions of liver diseases Manda or Laja siddha manda, Amla dravya siddha laja manda can be given. Siddha jala can also be thought in such conditions.

6) Shushka Ahar :

प्रक्लिन्नकायान् व्रणिनः शुष्कैर्महिन एव च॥ (सु. उ. ६४-६१)

This factor mentioned in Dvadashashana pravachar is mainly considering Vranita vyakti i.e. when the wound is healing. Shloka says when there is dominance of kleda, patient is suffering from prameha, then shushka ahara should be considered. This means the Ahara that is adrava or contains less liquid matter can be given. This principle is specifically intended where the diet should not cause ama. In this Krishara, Yava, Godhuma can be used. Fried food can be given. Mudga, Masoor can be used in this ahara.

7) Ekakalika Bhojana :

एककालं भवेद्देहो दुर्बलाशिविवृद्धये॥ (सु. उ. ६४-६२)

Till shushka ahara guna of ahara were mentioned. After that sushrutacharya comments on kala of ahara that is how many times the food should be taken. This principle is given for those having severe agnimandya and daurbalya. Ekakalik Bhojana causes agnivriddhi. In many conditions of liver dysfunction there is severe agnimandya in such cases to improve agni only single meal is given to patient. That means when

patient is hungry that time only the food is to be consumed. This reduces the burden on digestive system. And improves jatharagni and further dhatuposhana, rasasamvahana. Ekakalik bhojan helps in reducing ama, gives time to the digestive system to digest the old remains and improves appetite. Hence this is one of the important principle that can be helpful in treating liver diseases.

8) Dvikalbhojana :

समाग्रये तथाहारो द्विकालमपि पूजितः॥ (सु. उ. ६४-६२)

This principle is given for patients having Samagni. When there is compromised liver function but still the condition is not worsened patient has good appetite and bala then to maintain this status Dvikalbhojana can be suggested. Dvikalbhojana means having food only twice in day when the patient feels the hunger. This improves the digestion and prevents further worsening of the disease. Continuous eating can cause harm to the digestive system by putting overburden. But if the food is taken in controlled way then the agni can be maintained. In case of patients diagnosed with grade one fatty liver this principle can be used to avoid further damage. This principle does not hampers poshana as sufficient quantity of food according to the appetite can be taken.

In changing lifestyle and lack of exercise multiple time eating can cause harmful effects on body by disturbing the digestion process. Hence, this principle can be used in healthy individuals with Samagni to avoid liver diseases.

9) Aushadhayukta Ahara :

औषधद्वेषिणे देयस्तथौषध समायुतः। (सु. उ. ६३)

This is also an important factor of Dvadashashana pravichar. Many patients are reluctant of taking medicines. Hence aushadhayukta ahara can be given to these patients. In this aushadha siddha yavagu, manda, peya, can be given. Kruta-Akruta Yavagu, Yush can be example of this type of ahara. Many dravyas of aharyogi varga which are useful in treating agnimandya can be used. Siddha Yavagu, Yusha, Manda can be used. Also the medicine that is to be administered can be mixed with food and given. This is aushadhsevana kala for samanavayu. This kala is used in treating agni

dushti. Hence, in case of liver disorders also, medicine can be delivered with help of ahara easily through this route.

10) Matraheena :

मन्दाग्रये रोगिणे च मात्राहीनः प्रशस्यते। (सु. उ. ६४-६३)

Less quantity of food to be given to person with mandagni. When there is agnimandya then agni is incapable of digesting the food. Hence, In liver disorders also when the agni is not capable then less quantity should be provided to it so that it can be easily digested. This quantity can be decided from Abhyavaharana Shakti of patient that is daily possible intake of food in healthy state. Quantity less than abhyavaharana shaktican be consumed in diseased condition.

11) Rutuanusar ahara :

यथर्तुदत्तस्त्वाहारो दोषप्रषमनः स्मृतः। (सु. उ. ६४-६४)

All the environmental conditions also affect the body in many ways. Example in Varsha ritu the Sun is not so powerful. Because of this there is agnimandya in human body too. Hence the diet should be designed accordingly. Here in Dvadashashana pravichara acharya sushruta has given that the diet according to ritu is dosha prashaman i.e. it stabilizes the doshas in the body which are vitiated due that Ritu.

12) Vrutyartha :

अतः परं तु स्वस्थानां वृत्त्यर्थं सर्व एव च। (सु. उ. ६४-६४)

This principle is specifically mentioned for Swastha people. After the disease condition is over its very necessary to maintain the healthy state. स्वस्थस्य स्वास्थ्य रक्षणं। Is the priority of Ayurved. Hence for this acharya has mentioned Vrutyartha that is Sama(??)-Sarvarasa ahara is to be given. All rasas provide nutrition to all shariradhatu, maintain jatharagni and attain swastha avastha. Hence, according to Dushya, Desha, Bala, Kala, Anala, Prakruti, Vay, Satva, Satmya, Avastha diet should be designed. This is vrutyartha ahar which maintains the Swasthya.

Conclusion : Ahara is one of the factors of trayopasthambha. In treatment of any disease there is important role of ahara. Pathology of any disease starts from agnimandya hence at every point of treatment it is necessary to treat agnimandya. Dvadashashana Pravichar can definitely play major role by improving the jatharagniand by that means improving

yakrutastha ranjakagni (Ranjak Pitta). These principles if followed while treating a liver disorder that can prevent worsening and improve quality of life of patient by providing nourishment through various forms of ahara. Hence, Dvadashashana Pravachar can play major role in maintaining liver health.

References : 1) Vaidya Yadavji Trikamji Acharya, Narayan Ram Acharya "Kavyatirtha" (Editor), Nibandhasangraha Commentary of Shri Dalhanacharya and Nyayachandrika Panjika of Shri Gayadasa, Sushruta Samhita, Chaukhamba Surbharati Prakashan Varanasi,

Reprint 2014

2) K Sembulingam, Prema Sembulingam, Essentials Of Medical Physiology, Jaypee Brothers Medical Publishers (P) Ltd. Reprint 2011

3) Dr. Ganesh Krishna Garde, Vagbhatkrut Ashtangahridayam, Saarth Vagbhata, Chaukhamba Surbharati Prakashana, Varanasi, Reprint 2015

4) 2. Prof. R. H. Singh, Ayurved-dipika commentary by Sri Chakrapanidatta, Edited by Vaidya Yadavji Trikamji Acharya, Caraka Samhita of Agnivesa, elaborated by Caraka and Drdhabala, Chaukhamba Surbharati Prakashan, Varanasi, Reprint 2020.



A Clinical Trial To Evaluate The Efficacy Of Ashtaguna Manda As A Raktavardhak In Female Volunteers Having Low Hemoglobin Level

Vd. Madhumati Lohiya,
MD, Swasthavritta,
T.A.M.V., Pune.

Dr. Mihir S. Hajarnavis,
MD, Kayachikitsa, Ph.D, Swasthavritta,
Prof. and HOD, Swasthavritta, T.A.M.V., Pune.

Introduction - Ayurveda emphasises on importance of Aahar in maintaining health and curing diseases. The food we eat is mainly responsible for building up the body and it is also responsible for the diseases in our body. Hence, properly taken food helps to cure disease and also to avoid the disease. Thus for treatment of diseases introduction of pathya aahar is very important. The precisely constituted, calculated and cooked food is known as pathya.

Aahar Kalpana should be included in dietetic preparations of both patients as well as healthy human beings. It is again classified in to two groups Kritanna varga (Aahar Kalpana) which are prescribed for healthy beings and Pathya kalpana, which are prescribed for patients. Both of these groups contain same basic preparations like manda, peya, vilepi, yavagu and mansa rasa. Certain specific dietetic preparations (aahar kalpana) as Manda (liquid gruel), Peya (thin gruel), Yavagu (gruel), Vilepi (thick gruel), Krishara (thick paste gruel), Yusha (soup), mansa rasa (meat soup) etc. have been described, which are easily digestible to increasing order and have curative effects too.

Haemoglobin is a part of rakta dhatu. Rakta is considered to be the cause of origin, maintenance and destruction of body. Hence it has been quoted

under the pranayatan as well as mula of living body. Jatharagni mandya is main cause for all leading diseases. Because of jatharagni mandya, raktadhatvagni gets disturbed and leads to raktakshaya.

Manda is aahariya kalpana under kwatha kalpana. One part of rice and fourteen parts of water are boiled together, when rice is cooked properly the contents are filtered and obtained liquid portion is called manda. Ashtaguna manda has got high nutritive value and capable of preventing and curing diseases. It enhances appetite (agni), gives energy (pranada), cleanses bladder (basti shodhan), increases blood (raktavardhak), reduces fever (jwara), pacifies all doshas. Contents of Ashtaguna manda are minimum, easily available and easy to prepare. Females are more prone to low haemoglobin due to the negligence and irregular meal habits.

So Ashtaguna manda has been chosen in female volunteers having low haemoglobin level.

Aim And Objectives : Primary Objective : To study the efficacy of Ashtaguna manda in female volunteers with low haemoglobin level as a raktavardhak aahariya kalpana.

Secondary Objective :

1) To study properties of Ashtaguna manda from various literatures. 2) To study manda as a pathya

kalpana from various literature. 3) To study the iron ferrous sulphate. 4) To study raktadhatu, rakta kshaya and rakta vriddhi symptoms from various literature. 5) To study haemoglobin and low haemoglobin level conditions.

Review Of Literature : It can be taken in 3 parts : 1) Review of Manda kalpana
2) Drug Review : Review of Ashtaguna Manda
3) Literary review of Haemoglobin

Review of Manda Kalpana

Sharangdhar samhita :

निरे चतुर्दश गुणे सिद्धो मन्डस्तु असिक्थकः।

शुण्ठी सैन्धव संयुक्तः पचनो दीपनो परः॥ शा. सं. मध्यमखण्ड २/१६२

Acharya Sharangdhara has mentioned manda kalpana in detail in Madhyam Khanda in 2nd chapter (Kwatha kalpana vidhi prakarana). Manda kalpana is considered as an important Pathya kalpana i.e. formulation. The method of preparation of Manda is as follows:

Manda is aahariy kalpana under kwatha kalpana. One part of rice and fourteen part of water are boiled together, when rice is cooked properly the contents are filtered and obtained liquid portion is called manda. This fluid if mixed with powder of Shunthi and saindhava is good Deepana and Pachana. (Digestive and Carminative). Laja manda and Ashtaguna manda are explained.

Laja manda :

लाजैर्वा तण्डुलैः भृष्टैः लाजमण्डः च्कीर्तिता॥

श्लेष्मपित्तहरो ग्राही पिपासा ज्वरजिन्मतः॥ शा. सं. मध्यमखण्ड २/१६९

Manda prepared with Laja i.e. parched rice by above mentioned method is of following characteristics : Shleshmahara (pacifies kapha dosha), Grahi (stops diarrhoea), Relieves Pipasa (thirst), Relieves Jwara (fever).

In Deepika - Gudhartha deepika teeka it has been mentioned that Laja manda is of three types depending on how many times it is filtered. (Paristrut). (Sha. Sam. Madhyam Khanda. Gudarth Deepika teeka 2/169)

- Ek paristrut (filtered once) - Dvi paristrut (filtered twice) - Tri paristrut (filtered thrice)

Other types of Manda kalpanas mentioned as a Vatya manda. (Sha.Sam.Madhyam khanda 2/168, 171)

2) Drug Review : 1 Review Of Ashtaguna Manda : Ashtaguna manda is explained in sharangdhar samhita, yogratnakar and Nighantu Ratnakar.

१) धान्यत्रिकटुसिन्धूत्थमुद्गतण्डुलयोजितः॥ १७१॥

भृष्टश्च हिंगुतैलाभ्यां सः मण्डोऽष्टगुणः दृढतः।

दीपनः प्राणदो बस्तिशोधनो रक्तवर्धनः ॥ १७२॥

ज्वरजित् सर्वदोषघ्नो मण्डोऽष्टगुण उच्यते।

शा.सं.मध्यमखण्ड २/१७१-१७२

२) तण्डुलैरर्धमुद्गांशैः किंचिद् भृष्टैः सुपाचितैः।

हिङ्गुसिन्धूत्थधनिकातैलजिकटुसंस्कृतः ॥११॥

ज्ञेया सोऽष्टगुणोमण्डो ज्वरदोषत्रयापहः।

रक्तक्षुद्रवर्धनः प्राणप्रदो वस्तिशोधनः ॥२॥ योगरत्नाकर

३) धान्यत्रिकटुसिन्धूत्थमुद्गतण्डुलयोजितः ।

भृष्टश्च हिंगुतैलाभ्यां सः मण्डोऽष्टगुणः स्मृतः ॥

दीपनः प्राणदो वस्तिशोधनो रक्तवर्धनः।

ज्वरजित्सर्वदोषघ्नो मण्डोऽष्टगुण उच्यते॥ निघण्टुरत्नाकर

Method of Preparation : Immerse Hingu in oil and heat it, fry Mudga and Rice in it. Then add Dhanyak, Trikatu, Saindhav mix it well. Add 14 times of water and cook it until Rice and mudga get Softer. Later obtain a liquid portion. This liquid is called Ashtaguna Manda. It enhances appetite, gives energy, cleanses bladder, increases blood, reduces jwara, pacifies all doshas.

Ingredients of Ashtaguna Manda:

- 1) Tandul (Oryza sativalinn.) / Rice
- 2) Mudga (phaseolusmungolinn.) / Green gram
- 3) Shunthichurna (Zinziberofficinale) powder
- 4) Marichchurna (Pipernigrum) powder
- 5) Pippalichurna (Piperlongum) powder
- 6) Dhanyakachurna (corianderseeds) powder
- 7) Saindhav (Rocksalt)
- 8) Hingu (Asafoetida) Roasted in Vegetable oil
- 9) Drinking water- 14 parts

A literary review on Haemoglobin : Haemoglobin is a large, complex molecule containing a globular protein (globin) and a pigmented iron-containing complex called haem.

Each Haemoglobin molecule contains four globin chains and four haem units, each with one atom of iron. As each atom of iron can combine with an oxygen molecule, this means that a single Haemoglobin molecule can carry up to four molecules of oxygen.

An average red blood cell carries about 280 million Haemoglobin molecules, giving each cell a theoretical oxygen-carrying capacity of over a billion oxygen molecules.

Iron is carried in the bloodstream bound to its transport protein, transferrin, and stored in the liver. Normal red cell production requires a steady supply of iron. Absorption of iron from the alimentary canal is very slow, even if the diet is rich in iron, meaning that iron deficiency can readily occur if losses exceed intake.

Oxygen transport : When all four oxygen binding sites on a Haemoglobin molecule are full, it is described as saturated. Haemoglobin binds reversibly to oxygen to form oxyHaemoglobin, according to the equation:

Haemoglobin (Hb)+oxygen 2 (O₂) ↔ oxy Haemoglobin (Hbo)

As the oxygen content of blood increases, its colour changes too. Blood rich in oxygen (usually arterial blood) is bright red because of the high levels of oxy Haemoglobin it contains, compared with blood with lower oxygen levels (usually venous blood), which is dark bluish in colour because it is not saturated. The association of oxygen with Haemoglobin is a loose one, so that oxy Haemoglobin releases its oxygen readily, especially under certain conditions, Low pH metabolically active tissues, e.g. exercising muscle, release acid waste products, and so the local pH falls. Under these conditions, oxy Haemoglobin readily breaks down, giving up additional oxygen for tissue use. Low oxygen levels (hypoxia) where oxygen levels are low, haemoglobin breaks down, releasing oxygen. In the tissues, which constantly consume oxygen, oxygen levels are always low. This encourages oxy Haemoglobin to release its oxygen to the cells. In addition, the lower the tissue oxygen level, the more oxygen is released, meaning that as tissue oxygen demand rises, so does the supply to match it. On the other hand, when oxygen levels are high, as they are in the lungs, oxy Haemoglobin formation is favoured. Temperatures actively metabolising tissues, which have higher than normal oxygen needs, are warmer than less active ones, which drive the equation above to the left, increasing oxygen release. This ensures that very active tissues receive a higher oxygen supply than less active ones. In the lungs, where the alveoli are exposed to inspired air, the temperature is lower, favouring oxy Haemoglobin formation.

Observations : 1) Effect on Haemoglobin : The frequency distribution of patients according to Effect on Haemoglobin is as given below.

Table no 1: Effect on Haemoglobin

Effect on Haemoglobin	Group		Group	
	A	%	B	%
Increase	30	100.0	30	100.0
No change	0	0.0	0	0.0
Decrease	0	0.0	0	0.0
Total	30	100.0	30	100.0

After treatment 100% increment in Haemoglobin

level of both group is found.

2) Effect On Panduta : The frequency distribution of patients according to Effect on Panduta is as given below.

Table No 2:effect On Panduta

Effect On Panduta	Group		Group	
	A	%	B	%
Increase	0	0.0	0	0.0
No change	0	0.0	0	0.0
Decrease	30	100.0	30	100.0
Total	30	100.0	30	100.0

After treatment 100% reduction in panduta symptom of both group is found.

3) Effect On Amalashita Prarthana : The frequency distribution of patients according to Effect on Amalashita Prarthana is as given below.

Table No 3:effect On Amalashita Prarthana

Effect On Amalashita Prarthana	Group		Group	
	A	%	B	%
Increase	0	0.0	0	0.0
No change	5	16.7	14	46.7
Decrease	25	83.3	16	53.3
Total	30	100.0	30	100.0

After treatment 16.7% patient of Group A and 46.7% patients of Group B has no change and 83.3% patients of Group A and 53.3% patients of Group B has reduction in Amlashita Prarthana symptom.

4) Effect On Daurbalya : The frequency distribution of patients according to Effect on DAURBALYA is as given below.

Table No 4:effect On Daurbalya

Effect On Daurbalya	Group		Group	
	A	%	B	%
Increase	0	0.0	0	0.0
No change	3	10.0	6	20.0
Decrease	27	90.0	24	80.0
Total	30	100.0	30	100.0

After treatment 10% patients of Group A and 20% patients of Group B has no change and 90% patients of Group A and 80% patients of Group B has reduction in Daurbalya symptom

5) Effect on Bhrama : The frequency distribution of patients according to Effect on Bhrama is as given below.

Table No 5:effect On Bhrama

Effect On Bhrama A	Group		Group	
	%	B	%	
Increase	0	0.0	0	0.0

No change	17	56.7	18	60.0
Decrease	13	43.3	12	40.0
Total	30	100.0	30	100.0

After treatment 56.7% patients of Group A and 60% patients of Group B has no change and 43.3% patients of Group A and 40% patients of Group B has reduction in Bhrama symptom.

6) effect On Shwaskashtata : The frequency distribution of patients according to Effect on SHWASKASHTATA is as given below.

Table No 6 : Effect On Shwaskashtata

Effect On Shwaskashtata	Group		Group	
	A	%	B	%
Increase	0	0.0	0	0.0
No change	14	46.7	22	73.3
Decrease	16	53.3	8	26.7
Total	30	100.0	30	100.0

After treatment 46.7% patients of Group A and 73.3% patients of Group B has no change and 53.3% patients of Group A and 26.7% patients of Group B has reduction in Shwaskashtata symptom.

7) Effect On Twaka Rukshata : The frequency distribution of patients according to Effect on Twaka Rukshata is as given below.

Table No 7:effect On Twaka Rukshata

Effect On Twaka Rukshata	Group		Group	
	A	%	B	%
Increase	0	0.0	0	0.0
No change	0	0.0	0	0.0
Decrease	30	100.0	30	100.0
Total	30	100.0	30	100.0

After treatment 100% reduction in Twaka Rukshata symptom of both group is found.

Discussion : By mean value - There is no significant difference in factors Daurbalya, Bhrama and Twaka Rukshata between Group A and Group B.

The effect on factors Daurbalya, Bhrama and Twaka Rukshata is nearly same in Group A and Group B.

There is significant difference in factors Panduta, Amalashita Prarthana, Shwas kashtata between Group A and Group B.

The effect on factors Panduta, Amalashita Prarthana, Shwaskashtata is greater in Group A than that in Group B.

Conclusion - Conclusions drawn on the basis of the observations and results are as follows: 1) Ahara kalpana (Pathyakar) plays an important role in management of low Haemoglobin level.

2) Ashtaguna manda is effective in raktavardhan and in increasing Haemoglobin level.

3) Haematinic (Ferrous Sulphate) is effective in raktavardhan and in increasing Haemoglobin level.

4) The effect on factors Daurbalya, Bhrama and Twaka Rukshata is nearly same in Group A and Group B.

5) The effect on factors Panduta (100%), Amalashita Prarthana (83.7%), Shwaskashtata (53.3%) is greater in Group A than that in Group B.

6) The trial group was given a ahariya kalpana along with Ayurvedic herbs and the control group was given directly a haematinic ferrous sulphate.

7) Clinically trial group showed significant improvement in the symptoms of rakta kshaya and rakta vriddhi was observed.

8) Pathologically rise in haemoglobin was seen in both groups, but more in control group as a direct haematinic medicine was given to the control group.

9) To accept the hypothesis the trials should be conducted on large number of patients. In this short study it is observed that alternate hypothesis is accepted.

Major outcome of the study: Results of the study are encouraging and trial should be conducted on larger scale in all age groups for a longer duration.

Reference : 1) Ramaharshasinha, Charka samhita with Chakrapanidatta virchit Ayurveda-Dipika Commentary, Edited by Vd Yadavji trikamji Acharya, Chaukhamba Surbharati Prakashan, varanasi, reprint 2011, Sutrasthan Pg no 181 Shlok no 45. 2) Ramaharshasinha, Charka samhita with Chakrapanidatta virchit Ayurveda-Dipika Commentary, Edited by Vd Yadavji trikamji Acharya, Chaukhamba Surbharati Prakashan, varanasi, reprint 2011, Sutrasthan Pg no 181 Shlok no3. 3) Acharya Shriradhakrushna Parashara, Sharangadhar samhita with Sharangdhar virachit, krushna hindi Commentary, shri Baidyanath Ayurveda Bhavana LTD , Pg no 223, shlok no170.

4) Acharya Shriradhakrushna Parashara, Sharangadhar samhita with Sharangdhar virachit, krushna hindi Commentary, shri Baidyanath Ayurveda Bhavana LTD , Pg no 223, shlok no171.

5) Waugh A and Grant A Ross and Wilson Anatomy and physiology in Health and Illness 12th edition 2014 London Churchill Livingstone Elsevier 2014 chapter 4 page no63-74. 6) Waugh A and Grant A Ross and Wilson Anatomy and physiology in Health and Illness 12th edition 2014 London Churchill Livingstone Elsevier 2014 chapter 4 page no63-74.





An Observational Study Of Effect Of Nidraveg Dharan In Nurses

Vd. Pranjali Shewale,
MD. Swasthavritta, TAMV, Pune

Vd. Neelima Shisode,
Asso. Prof. Swasthavritta, TAMV, Pune.

Introduction - Ayurveda is the science of life and it is a unique blend of science and philosophy that balances the physical, mental, emotional and spiritual components necessary for holistic health. Ayurveda has two basic aims, that is to maintenance of the health of a healthy person and to cure the disease of ill one. Aahar (diet), nidra (sleep) and brahmachrya (celibacy) supports body as pillars supports a house, so they are called as "trayopstambha." The inclusion of nidra in the three upstambha proves its importance. People working in night shift suffers from various symptoms which in long term causes serious diseases, working in night disturbs the biological clock. Working in night result in the suppression of natural urge to sleep.

Thus, in today's life, we often compromise with our health unknowingly with wrong daily routine, wrong food habit etc. Vegdharan is one of such factors which occurs either unwillingly, unknowingly or can be habitual. So, it is important to study vegdharan as a major reason for a disease.

As Acharya Vagbhata state that, All the diseases are produced due to the forceful creation of natural urge and suppression of natural urge. Nidra vegdharan causes vitiation of vata dosha which causes so many diseases.

Aim - To assess the effect of nidravegdharan in nurses.

Objectives - 1) To study the nidravegdharan from various literature. 2) To study the importance of veg avidharan to maintain swasthya.

Material And Methods - 1) Study type- Observational survey study. 2) Written informed consent of all the volunteers in the research has been taken. 3) Pre-determined questionnaire has been used to assess the effect of nidra vegadharan. 4) Pre-determined questionnaire has been used to assess the health effect.

Questionnaire for the assessment of symptoms of nidravegdharan. The questionnaire was designed to assess the effect of nidravegdharan in nurses. The study group consists of nurses. It consists of 07 questions for the assessment. The answers were recorded in the form of grading.

Nidravegdharan symptoms

Never - 0 Almost never - 1 Sometimes - 2 Fairly

often - 3 Very often - 4

The assessment criteria were - **Never** - Not having a symptom for a single day in a week. **Almost never** - Having a symptom in 1 day of the week. **Sometimes** - Having a symptom in 3 days of the week. **Fairly often** - Having a symptom in 5 days of the week. **Very often** - Having a symptom in all 7 days of the week.

Questionnaire for the assessment of Health. The questionnaire was designed to assess the health effect. The study group consists of nurses. It consists of 05 questions for the assessment. The answers were recorded in the form of grading.

Health problem/score :

Never - 0 Almost never - 1 Sometimes - 2 Fairly often - 3 Very often - 4

The assessment criteria were - **Never** - Not having a symptom for a single day in a week. **Almost never** - Having a symptom in 1 day of the week. **Sometimes** - Having a symptom in 3 days of the week. **Fairly often** - Having a symptom in 5 days of the week. **Very often** - Having a symptom in all 7 days of the week.

Sample selection: Inclusion criteria: 1) Individuals aged between 22-50 yrs. 2) Individual is nurse as profession. 3) No history of major illness before 6 months.

Exclusion criteria : 1) Individuals aged below 22 and above 50 years. 2) Persons having any other systemic disorders.

Sample size : Considering confidence limit 95% with the margin of error 8% and prevalence rate at 50% then the sample size was,

$$Z2pq/d2 \quad Z = \text{level of confidence} = 95\% = 1.96$$

$$P = \text{prevalence rate} = 50\% \quad 50/100 = 0.5$$

$$q = 1 - p = 0.5 \quad d = \text{margin of error} = 8\%$$

Hence, 150 volunteers will be selected.

Observation and Discussion : 1) **age wise distribution of study population :** Out of 150 participants, maximum 52% of the individual were from age group 30-40yrs, 46% was from 40-50yrs, remaining 2% were from 22-30yrs of age group. thus, majority of study population belong to 3rd and 4th decade of life. This shows that maximum working population of nurse is younger and middle age group. As this is mostly a working group. 2) **sex**

wise distribution of study population : Out of 150 participants, 94.7% were females and 5.3% were males. It was observed that in our study there was female predominance for nursing job over a male.

3) Occupation wise distribution of study population : All 150 participants were staff nurse. As this study was designed for nurses, they all must be doing/ working as a nurse.

4) frequency distribution of study population according to how many times in a week they have night duty : Almost all 99.3% were having a night duty less than four times in a week only 0.3% i.e., 1 individual having night duty more than 4 times in a week.

5) frequency distribution of study population according to no. of hrs they have to awake per night : Out of 150 participants, all 100% have to awake for 12hrs minimum. They have night duty from 8pm to 8 am. Also, at a certain time, they must travel to the hospital. The majority of them must get up an hour early to drive to the hospital and another hour to return home.

6) frequency distribution of study population according to having a nap between the duty : Out of all 150 participants all 100% didn't get a nap between their duty. As we know nurse job is very accountable and sensitive to the needs of community. They have to do their job with much accuracy and with much concentration. Also, the selected hospital has a rush of patients throughout the day. So, nurses didn't get a nap during their duty.

7) frequency distribution of study population according to how many days they are doing this job : Out of 150 participants, maximum 86% population working for more than 3 years and 14% population working from 3 years. This shows that maximum population having the effect of nidravegdharan because of long term of this duty. Also, according to table no.1 and table no.2 most of them were female of 3rd and 4th decade who were married. They also have to handle household work. So, they don't have a time to rest after a night duty. This all does the effect of nidravegdharan more vigorously.

8) frequency distribution of study population according to symptom yawning : Out of all 150 participants, 36% individual replied with fairly often, 16% with very often, 26% with sometimes, 21.3% almost never and 0.7% with never. As we seen, maximum frequency is at fairly often. Due to the night duty suppression of sleep occurs and this causes vitiation of vatadosha. This results into the symptom of vata origin i.e., Yawning/jrumbha.

9) frequency distribution of study population according to symptom body ache : Out of all 150 participants, 0% individual replied

with never, 12.7% with almost never, 36% with sometimes, 28.7% with fairly often, 22.7% very often. As we seen maximum frequency is at sometimes. Due to heavy work load at selected hospital, nurses don't get enough time to rest or just sit relax for some time, they always have busy schedule with standing work. Also due to nidravegdharan vitiation of vayu occurs. That vayu is the cause for different type of pain in body, when the normal physiological action is disturbed by specific causative factor like vegdharan.

10) frequency distribution of study population according to symptom heaviness in body / eye / head : Out of all 150 participants 0% replied with never, 14% with almost never, 37.3% with sometimes, 24% with fairly often, 24% with very often. Maximum frequency is at sometimes. As we know, nidravegdharan causes vitiation of vayu. That vayu further causes vitiation of pitta and kapha. Vayu along with kaphadosha causes gaurav/heaviness in body. Individual feels heaviness in body along with sense organ unable to do their proper work.

11) frequency distribution of study population according to symptom of feeling lazy all the time : Out of all 150 participants, 2.7% replied with never, 8.7% with almost never, 39.3% with sometimes, 28.7% with fairly often, 20.7% with very often. Maximum frequency is at sometimes. As we know vegdharan can be the causative factor for avaran. Vitiated vayu along with kapha dosha travels throughout the whole body and this vitiated kapha does avarana over vyanavayu leads to the symptom aalasya/laziness. So, they feel lazy all the time, don't feel to do their work in time, don't feel enthusiastic.

12) frequency distribution of study population according to symptom of feeling drowsy : Out of all 150 participants, 4.7% individual replied with never, 29.3% with almost never, 32.7% with sometimes, 22% with fairly often, 11.3% with very often. Maximum frequency is at sometimes. Vitiated vayu caused due to nidravegdharana further, goes towards pitta and kapha makes them vitiated and cause the symptom drowsy/tandra in nurses/study population.

13) frequency distribution of study population according to symptom delusion : Out of all 150 participants, 79.3% replied with never, 18% with almost never, 1.3% with sometimes, 0.7% with each fairly often and very often. Maximum frequency is at never. This shows that study population doing nidravegdharan have symptom of delusion / moha very least common.

14) frequency distribution of study population according to

symptom headache : Out of all 150 participants, 5.3% replied with never, 22.7% with almost never, 41.3% with sometimes, 14.7% with fairly often, 16% with very often. Maximum frequency is at sometimes. As we know vitiated vayu due to nidravedgharan causes various symptoms, Headache is one of them. Deepika chaudhari found headache as the most common symptom arising due to night time awakening in I.T. workers in her dissertation.

15) frequency distribution of study population according to symptom of having desire to eat food : Out of all 150 participants, 8.7% replied with never, 33.3% with almost never, 24% with sometimes, 32% with fairly often and 2% with very often. No physiological function in the body is untouched by the positive effects of restful sleep. As a result, poor sleep weakens the digestive system, which makes the nurses more likely to have issue about desire to eat food.

16) frequency distribution of study population according to symptom of digestion of food : Out of all 150 participants, 5.3% replied with never, 36.7% almost never, 30.7% with sometimes, 26.7% with fairly often, 0.7% with very often. No physiological function in the body is untouched by the positive effects of restful sleep. As a result, poor sleep weakens the digestive system, which makes the nurses more likely to have issue about digestion of food. At night, most of time snaking on junk food like chips, Maggi, tea coffee biscuits etc. occur rather than a proper balanced meal which in turn hampers the digestion of food.

17) frequency distribution of study population according to symptom of difficulty in passing faeces and urine : Out of all 150 participants, 9.3% replied with never, 36.7% with almost never, 33.3% with sometimes, 18% with fairly often, 2.7% very often. As we seen, maximum frequency is at almost never. Generally due to vitiation of vata caused due to nidravedgdhahran have to make difficulty in passing faeces and urine. But in this study, we found this symptom less common.

18) frequency distribution of study population according to symptom lightness in the body : Out of all 150 participants, 12.7% replied with never, 42% with almost never, 25.3% with sometimes, 19.3% with fairly often, 0.7% with very often. Maximum frequency is at almost never. As we know nidravedgharan causes vitiation of vayu, further with that pitta and kaphadosha gets disturbed and various symptoms occurs. Due to nidravedgharan; feeling of heaviness in the body occurs and health related symptoms of lightness in body gets reduced or disturbed.

19) frequency distribution of study population according to symptom of

population according to symptom having proper sound sleep : Out of all 150 participants, 24% replied with never, 31.3% with almost never, 18.7% with sometimes, 24.7% with fairly often, 1.3% with very often. Maximum frequency is at almost never. Nidravegdharan observed as the major reason for not following the physiological sleep pattern causing ill health. As we know there are many factors which are dependent on sleep like sukha-dukha, Pushti-karshya, bala-abala, vrushtakleebata, dyanana-adyanana, etc. all are gets disturbs due to not having proper sound sleep.

Discussion on statistical analysis - Aim: To test whether all the options 'Never', 'Almost Never', 'Sometimes', 'Fairly often', 'Very often' are equally likely in all questions. The test used is Chi-square Test for Goodness of fit. If p value < 0.05 , the level of significance; the result is significant.

Conclusion - 1) The research work shows the significance of nidra in every individual's daily schedule. 2) The research work confirms the truth about Ayurvedic theory of vegdharan/ natural urges and the symptoms associated with nidravegdharan. 3) Study of nidravegdharan from various literatures was studied and included in the review of literature chapter. 4) Study of vegvidharan to maintain swasthya was done from Ayurvedic literature and included in the review of literature chapter. 5) The symptoms of nidravegdharan i.e., yawning, body ache, heaviness in body, laziness, drowsiness, headache are found as fairly often and sometimes in the gradation of the symptom of nidravegdharan. 6) The only symptom delusion is found with higher frequency of never gradation. 7) The health-related symptoms are found in the gradation of almost never which means that nidravegdharan affects the health. 8) Only one question regarding difficulty in passing urine and feces is found to have little/ no effect of nidravegdharan in this study population.

References : questionnaire

An Observational Study Of Effect Of Nidraveg Dharan In Nurses.

Name-	Age-	Sex-
-------	------	------

Occupation-

A) Questionnaire for assessment of Nidravegdharan. 1) How many times in a week do you have night duty? a) <4 b) 4 c) >4 2) Numbers of hours you have to awake at night/day? a) Minimum- b) Maximum- 3) Can you get a nap between your duty? a) Never b) Sometimes c) Very often 4) Since how many days you are doing this job? a) <3 year b) 3 year c) >3 year

B) Questionnaire for Assessment of symptoms of Nidravegdharan. 1) Do you yawn frequently?

0)Never 1)Almost Never 2)Sometimes 3)Fairly often 4)Very often 2) **Do you have body ache frequently?** 0)Never 1)Almost Never 2)Sometimes 3)Fairly often 4)Very often 3) **Do you have heaviness in head/eye/body?** 0)Never 1)Almost Never 2)Sometimes 3)Fairly often 4)Very often 4) **Do you feel lazy all the time?** 0)Never 1)Almost Never 2)Sometimes 3)Fairly often 4)Very often 5) **Do you feel drowsiness?** 0)Never 1)Almost Never 2)Sometimes 3)Fairly often 4)Very often 6) **Do you feel like delusion?** 0)Never 1)Almost Never 2)Sometimes 3)Fairly often 4)Very often 7) **Do you have headache frequently?** 0)Never 1)Almost Never 2)Sometimes 3)Fairly often 4)Very often

C) Questionnaire for assessment of health. 1) Do you have desire to eat food? 0)Never 1)Almost Never 2)Sometimes 3)Fairly often 4)Very often

2) **Is your digestion of food is proper?** 0)Never

1)Almost Never 2)Sometimes 3)Fairly often 4)Very often 3) **Is there is any difficulty in passing faeces and urine?** 0)Never 1)Almost Never 2)Sometimes 3)Fairly often 4)Very often 4) **Do you feel lightness in body?** 0)Never 1)Almost Never 2)Sometimes 3)Fairly often 4)Very often 5) **Do you have proper sound sleep?** 0)Never 1)Almost Never 2)Sometimes 3)Fairly often 4)Very often .

References : 1) Mangala Gowri v. rao. Text book of Swasthritta. Chaukhamba Orientalia Varanasi. 2)Kavirajaambikaduttashastri. Sushrut Samhita. Chaukhamba Sanskrit sansthan. Varanasi.vol I 3)Annamoreshwarkunte. Ashtangh ridaya. Chaukhamba Sanskrit sansthan. 2015. 4)Vaidya Yadavji T. Charaksamhita of Agnivesha. Chaukhamba Sanskrit sansthan, Varanasi.2001. 5)Abhaykatyayan. Bhel Samhita. Chaukhamba surbharati prakashan.varanasi. 6)Joshi Y G. Charak Samhita. Vaidya mitra prakashan. 7)Anna moreshwarkunte. Ashtangh rudaya sutrasthan. Chaukhamba krushnadas academy. ❀❀❀❀

अहवाल

संवेदनशील विषयावरील व्याख्यान समारंभ

डॉ. मनोज फडणीस

राष्ट्रीय शिक्षण मंडळाच्या शतकमहोत्सवी वर्षानिमित्त राष्ट्रीय शिक्षण मंडळाच्या विविध घटक संस्थांकडून शैक्षणिक परीषदा, कार्यशाळा, आरोग्य शिबीरे, समाजोपयोगी जनजागृती करण्यासाठी व्याख्याने ह्यासारख्या कार्यक्रमांचे आयोजन करण्यात येत आहे.

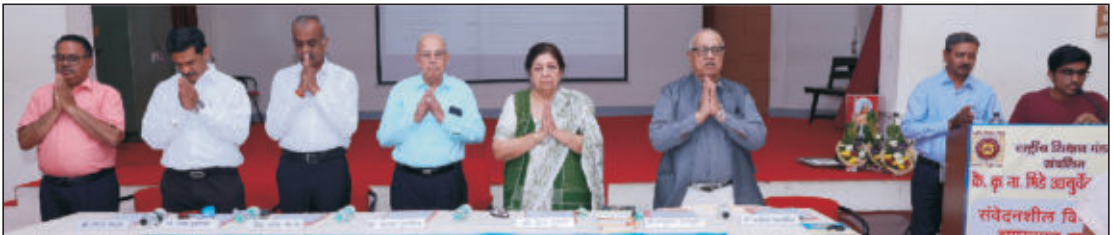
राष्ट्रीय शिक्षण मंडळाच्या कै. कृ. ना. भिडे आयुर्वेद संस्था ह्या घटक संस्थेतर्फे “**जनुकीय विकार-कारणे आणि अनुवंशिकता – प्रतिबंध व उपाय**” ह्या अतिशय सामाजिक व संवेदनशील विषयावरील व्याख्यान समारंभाचे आयोजन बुधवार दि. १७ मे २०२३ रोजी दुपारी ४ वाजता टिळक आयुर्वेद महाविद्यालयाच्या एन.आय.एम.ए. सभागृहामध्ये करण्यात आले.

मुंबई येथील सुप्रसिद्ध डॉ. हेमा पुरंदरे ह्या प्रमुख वक्त्या होत्या तर आयुर्वेद तज्ज्ञ डॉ. नरेंद्र पेंडसे हे आयुर्वेदाचे वक्ते होते. समारंभाचे अध्यक्ष डॉ. दिलीप पुराणिक हे होते. व्यासपीठावर कै.

कृ. ना. भिडे आयुर्वेद संस्थेचे अध्यक्ष डॉ. मधुकर सातपुते, राष्ट्रीय शिक्षण मंडळाचे सचिव डॉ. राजेंद्र हुपरीकर व प्राचार्य डॉ. सदानंद देशपांडे हे होते.

धन्वंतरी पूजन व स्तवनानंतर व्यासपीठावरील सर्व मान्यवरांच्या हस्ते मंगलदीप प्रज्वलन करण्यात आले. डॉ. मनोज फडणीस ह्यांनी मान्यवरांचा परिचय करून दिल्यानंतर डॉ. सातपुते ह्यांच्या हस्ते त्यांचा सत्कार करण्यात आला. डॉ. मधुकर सातपुते ह्यांनी कै. कृ. ना. भिडे आयुर्वेद संस्थेचा स्थापनेपासूनचा इतिहास कथन केला आणि संस्थेत कार्यरत असलेल्या विविध वैद्यकीय उपक्रम व कार्यक्रमांची माहिती उपस्थितांना करून दिली.

डॉ. हेमा पुरंदरे ह्यांनी “जनुकीय विकार-कारणे आणि अनुवंशिकता – प्रतिबंध व उपाय” ह्या विषयावर अत्यंत ओघवत्या शैलीत विविध उदाहरणे देत व्याख्यान देवून श्रोत्यांना



समारंभ प्रसंगी डावीकडून- डॉ. देशपांडे, डॉ. पेंडसे, डॉ. हुपरीकर, डॉ. पुराणिक, डॉ. पुरंदरे, डॉ. सातपुते, डॉ. फडणीस



धन्वंतरी पूजन प्रसंगी उजवीकडून- डॉ. देशपांडे,
डॉ. पुरंदरे, डॉ. पुराणिक, डॉ. पेंडसे

मंत्रमुग्ध केले. तसेच श्रोत्यांच्या शंका व प्रश्नांना उत्तरे देवून समाधानी केले. आयुर्वेद तज्ज्ञ डॉ. नरेंद्र पेंडसे ह्यांनी जनुकीय विकार ह्या विषयावर व्याख्यान देतांना आयुर्वेद ग्रंथातील संदर्भ व अर्वाचिन शास्त्रातील पाठ्यपुस्तके व जर्नल्स ह्यातील संदर्भ ह्यांचा कौशल्यपूर्वक समन्वय साधत श्रोत्यांकडून प्रशंसेची टाळी प्राप्त केली.

डॉ. पुराणिक ह्यांनी अध्यक्षीय भाषणात कै. कृ. ना. भिडे आयुर्वेद संस्थेचे अतिशय संवेदनशील विषयावर व लोकोपयुक्त व्याख्यान आयोजित केल्याबद्दल मनःपूर्वक अभिनंदन केले. तसेच राष्ट्रीय शिक्षण मंडळाच्या शतक महोत्सवी वर्षानिमित्त



डॉ. पुरंदरे भाषण करताना- बसलेले -
डॉ. पुराणिक व डॉ. सातपुते

आयोजित होणाऱ्या विशेष कार्यक्रमांची माहिती दिली.

डॉ. विलास डोळे ह्यांनी यथोचित आभार प्रदर्शन केले. कार्यक्रमास कै. कृ. ना. भिडे आयुर्वेद संस्थेचे डॉ. गिरीष धडफळे, अॅड. श्रीकांत पाटील, डॉ. समीर सातपुते, डॉ. मयुरेश आगटे, डॉ. सौ. आगटे, राष्ट्रीय शिक्षण मंडळाचे डॉ. वि. वि. डोईफोडे, डॉ. भालचंद्र धडफळे, टिळक आयुर्वेद महाविद्यालयातील अध्यापक, पदव्युत्तर स्नातक तसेच प्रतिष्ठित नागरिक उपस्थित होते.

डॉ. मनोज फडणीस ह्यांनी सभेचे सूत्रसंचलन नेटकपणे केले. राष्ट्रगीतानंतर कार्यक्रमाची सांगता झाली.



श्रद्धांजली

डॉ. वैजनाथ भागवत ह्यांचे दुःखद निधन

पुण्यातील प्रसिद्ध वैद्यकीय व्यवसायिक व सदाशिव पेठेतील “निरंजन नर्सिंग होमचे” संस्थापक व संचालक डॉ. वैजनाथ वासुदेव भागवत ह्यांचे दि. ८ मे २०२३ रोजी दुःखद निधन झाले.

राष्ट्रीय शिक्षण मंडळाच्या नियामक मंडळाचे माजी सचिव डॉ. वा. वा. भागवत ह्यांचे डॉ. वैजनाथ हे पुत्र होते. तसेच राष्ट्रीय शिक्षण मंडळाचे सक्रीय सभासद होते.



डॉ. भा. वि. साठ्ये ह्यांचे दुःखद निधन

आयुर्वेद शैक्षणिक क्षेत्रातील अग्रगण्य व्यक्ति प्रा. डॉ. भा. वि. साठ्ये ह्यांचे वृद्धापकाळाने दि. २५ मे २०२३ रोजी दुःखद निधन झाले.

राष्ट्रीय शिक्षण मंडळ व आयुर्वेद मासिक समितीच्या वतीने डॉ. वैजनाथ भागवत व डॉ. भा. वि. साठ्ये ह्यांना श्रद्धांजली.

९ फेब्रुवारी २०२३ ते ९ फेब्रुवारी २०२४ हे

‘राष्ट्रीय शिक्षण मंडळ’ पुणे चे शतक महोत्सवी वर्ष!

या निमित्त रा. शि. मंडळ संचलित ‘आयुर्विद्या मासिक’ या वर्षी काही विशिष्ट संकल्पनांवर आधारित अंक प्रकाशित करणार आहे. तज्ज्ञांनी या विषयासंदर्भातील शास्त्रीय लेख, रुग्णानुभव (Case Study) व संशोधन पर लिखाण त्वरीत पाठवावेत. योग्य वेळेत प्राप्त झालेले व Peer Reviewed Evaluation पूर्ण केलेले लेख निश्चितच प्रकाशित केले जातील. ● आयुर्विद्या - जुलै २०२३ - Latest Research Trends in Ayurved या वरील लेख प्रकाशित केले जातील. ● आयुर्विद्या - ऑगस्ट २०२३ - “वनौषधी व त्यांची विविध प्रयोज्य अंगे त्यावरील संशोधन व आधुनिक मानकीकरण” यावरील शास्त्रीय लेख व Research Articles प्रकाशित केले जातील. ● आयुर्विद्या - सप्टेंबर २०२३ - औषधी कल्प व रसौषधी विषयक संशोधन प्रकल्प यावर आधारित लेख प्रकाशित केले जातील.

जाहीर प्रगटन/आवाहन





स्वास्थ्यरक्षण-योग वर्षारंभ विशेषांक

डॉ. अपूर्वा संगोराम, कार्यकारी संपादक

नेमेचि येतो पावसाळा या उक्तीप्रमाणे दि. १ जून याहीवर्षी आलाच! प्रत्येक वर्षी आयुर्विद्याच्या वतीने या दिवसापासून आयुर्विद्याच्या वाचकांसाठी काहीतरी नवे देण्याची ईच्छा असते ती देण्याचा हा दिवस!

या वर्षी राष्ट्रीय शिक्षण मंडळाचे शताब्दी वर्ष चालू आहे. त्यानिमित्ताने आयुर्विद्या मासिकाने १ जून पासून संपूर्ण वर्षभर विविध विषयांवरील विशेषांक प्रकाशित करण्याचे योजिले आहे. त्यातूनच हा जूनचा पहिला अंक म्हणजे स्वास्थ्यरक्षण-योग विशेषांक. आयुर्वेदाचे उद्दीष्ट “स्वस्थस्य स्वास्थ्य रक्षणम् आतुरस्य व्याधी प्रशमनम्” हे आहे. शरीराचे स्वास्थ्य टिकविण्यासाठी, दोष, धातु, मल, साम्यावस्थेत ठेवणे, शरीर इंद्रिये, आत्मा, मन हे प्रसन्नावस्थेत राखणे हे गरजेचे आहे. त्यासाठी संतुलित आहार, विहार, योग या माध्यमातून शारीर मानस स्वास्थ्य टिकविता येऊ शकते. दि. २१ जून हा दिवस आंतरराष्ट्रीय योग दिवस म्हणून संपूर्ण जगभरात साजरा केला जातो. या वर्षी २०२३ ची थीम “वन वर्ल्ड वन हेल्थ” अंतर्गत

वसुधैव कुटुंबकम् या सिद्धान्तानुसार व्यापक वैश्विक समुदाय एकत्र जोडणे ही आहे. जास्तीत जास्त जनतेने यात भाग घ्यावा यासाठी जनतेला प्रेरित करण्यात येत आहे. विश्वभरातील जनतेबरोबरच आंतरराष्ट्रीय योग दिवस भारतातील ग्रामपातळीवरही साजरा करण्याचे प्रयत्न चालू आहेत. त्यानुसार दि. २१ जून रोजी शहरी व ग्रामिण अशा दोन्ही पातळ्यांवर हा आंतरराष्ट्रीय योग दिन साजरा करता येणार आहे.

‘आयुर्वेद व योग’ ही भारताने जगाला दिलेली देणगी आहे. आयुर्वेदीय जीवनशैली, योग याकडे आता संपूर्ण जगाचे लक्ष वेधले गेले आहे. अनेक पाश्चात्य देशांनी त्यांच्या दैनंदिन जीवनशैलीमध्ये आयुर्वेद आणि योग यांचा समावेश केलेला आहे. आपण सर्व आयुर्वेदाचे स्नातक म्हणून संपूर्ण जगभरात आयुर्वेद व योगाचे प्रचारक व प्रसारक होऊ या व या दोन अतीमहत्वाच्या जीवनशैलींच्या आधारे संपूर्ण जगाच्या स्वास्थ्याचा स्तर उंचावूयात!!



अभिनंदन!

डॉ. अभय इनामदार

शेठ ताराचंद रामनाथ रुग्णालयाच्या विश्वस्त मंडळावर

राष्ट्रीय शिक्षण मंडळाच्या नियामक मंडळाचे प्रतिनिधी म्हणून शेठ ताराचंद रामनाथ धर्मार्थ रुग्णालयाच्या विश्वस्त मंडळावर डॉ. अभय इनामदार ह्यांची दि. १ मे २०२३ पासून नियुक्ती करण्यात आली.

डॉ. इनामदार टिळक आयुर्वेद महाविद्यालयात कायचिकित्सा विभागात सहयोगी प्राध्यापक पदावर कार्यरत असून शेठ ताराचंद रुग्णालयात कायचिकित्सा (Medicine) विभागात चिकित्सक पदावर कार्यरत आहेत.

राष्ट्रीय शिक्षण मंडळ व आयुर्विद्या मासिक समितीतर्फे डॉ. इनामदार ह्यांचे हार्दिक अभिनंदन.



डॉ. प्रमोद दिवाण नानल रुग्णालय समितीच्या सहसचिवपदावर

राष्ट्रीय शिक्षण मंडळ संचलित नानल रुग्णालयाचे उपअधिक्षक (Deputy Supt.) डॉ. प्रमोद दिवाण ह्यांची नानल रुग्णालय समितीच्या सहसचिवपदावर दि. १ मे २०२३ पासून नियुक्ती करण्यात आली आहे.

आयुर्विद्या मासिक समितीतर्फे डॉ. दिवाण ह्यांचे अभिनंदन.



श्री. मुकुंद संगोराम ह्यांना “नू.म.वि. भूषण” पुरस्कार.

पुण्यातील सुप्रसिद्ध शिक्षण प्रसारक मंडळ संचालित नूतन मराठी विद्यालयातर्फे विविध क्षेत्रात विशेष कार्यकर्तबगारी बजाविलेल्या माजी विद्यार्थ्यांना “नू.म.वि. जीवन गौरव” “नू.म.वि-रत्न” व “नू.म.वि भूषण” पुरस्कार देवून गौरविण्यात आले. लोकसत्ता दैनिकाचे उपसंपादक व राष्ट्रीय शिक्षण मंडळाचे सदस्य श्री. मुकुंद संगोराम ह्यांना “नू.म.वि-भूषण” पुरस्कार देवून गौरविण्यात आले.

राष्ट्रीय शिक्षण मंडळातर्फे श्री. मुकुंद संगोराम ह्यांचे हार्दिक अभिनंदन व शुभेच्छा.





“स्वास्थ्यश्री” प्राप्तीसाठी ...

डॉ. सौ. विनया दीक्षित, उपसंपादक

राष्ट्रीय शिक्षण मंडळाच्या शताब्दीवर्ष महोत्सवाच्या निमित्ताने आयुर्विद्यातर्फे विशिष्ट संकल्पनेवर आधारित अंक या वर्षभरात प्रकाशित होत आहेत. यातील हे ‘स्वास्थ्यरक्षण व योग’ यावर आधारित पुष्प वाचकांसमोर सादर करताना अतिशय आनंद होत आहे. जागतिक योग दिन व आयुर्विद्याचा ८६ वा वर्धापन दिन या महिन्यात साजरा होत आहे. हा दुग्धशर्करा योगच म्हणावा लागेल की ‘स्वास्थ्य व योग’ विशेषांक याच महिन्यात प्रसिद्ध होत आहे.

‘Health is wealth’ हे बालपणापासून सर्वांना सर्वभाषेत सर्वज्ञात असलेले घोषवाक्य आहे. परंतु पिढी बदलताना किंवा नवीन पिढी घडताना प्रामुख्याने निरीक्षण व दैनंदिन संस्कारांतून गोष्टी समजल्या जातात. सध्याच्या प्रौढ पिढीने क्वचितच आरोग्यास प्राधान्यक्रम देऊन आयुष्याची दैनंदिनी आखलेली दिसते. सर्वसाधारण लोकसंख्या केवळ पैसा कमावणे व त्यायोगे विविध भौतिक सुखांचा उपभोग घेणे याकरताच संपूर्ण दिवसरात्र विचार व कृती करताना दिसते.

‘आरोग्यम् धनसंपदा’ ही भारतीय संस्कृती खऱ्या अर्थाने दैनंदिन आयुष्यात अजूनही तुरळकच आचरणात आणलेली दिसते. कोविड नंतरच्या काळात आरोग्य विषयक जनजागृती बऱ्याच प्रमाणात झालेली दिसते. पण एकदा का महामारीचे संकट दूर झाले की पुन्हा ‘येरे माझ्या मागल्या’ असे म्हणून सर्व जण आर्थिक आरोग्याकडेच अधिक लक्ष देताना दिसतात. यामध्ये स्वतःच्या शरीराची व मनाची हेळसांड करताना दिसतात. क्षमतेच्या पलीकडेचे ताण रोजच घेताना दिसतात. मग आता ही आरोग्याची संपत्ती मिळणार कशी? मिळालेली किंवा सध्या असलेली आरोग्यपूर्ण स्थिती राखणार कशी? सांभाळणार कशी?

यासाठी आयुर्वेदात दिनचर्या, ऋतुचर्या पालनाबरोबरच अनेक स्वास्थ्यरक्षक कल्प सविस्तर वर्णन केले आहेत. प्रकृतीनुसार किंवा जीवनशैलीजन्य विविध आजारांबरोबर, रुग्णसदृश लक्षणांनुसार प्रत्येक व्यक्तीने दररोज काय खावे? काय प्यावे? कसा व किती व्यायाम करावा? याचे सखोल

विवेचन केले आहे. याचा शास्त्रीय पद्धतीने अवलंब केल्यास, वैद्यांचे मार्गदर्शनाखाली ही सेवन पद्धती आत्मसात केल्यास नक्कीच आरोग्यपूर्ण संपत्ती गोळा करणे शक्य होईल.

यामध्ये लहान बालकांपासून वृद्धांपर्यंत सर्वासाठी दोष धातू बलानुसार जे रोजच्या स्वयंपाकात निर्माण करता येतील असे अनेक उपयुक्त स्वास्थ्यरक्षक कल्प सांगता येतात. जसे शुंठीक्षीरपाक वातकफांचे नियंत्रण, अग्नीदीपन व शूलशमन करून प्राणवह स्रोतसांचे रक्षण करणारा असतो. लसूणाचा क्षीरपाक आमपाचन, शूलप्रशमन, शोथहर व वातानुलोमन करून संधीशूल, यकृतविकार, हृदयविकार यामध्ये नित्यसेवनास उपयुक्त ठरू शकतो. याचप्रकारे दाडीम स्वरस/ दाडीमावलेह रक्तप्रसादन व पित्तशमन करणारे आहेत. मोरावळापाक, गुलकंद तीव्र शिरःशूल पित्तविकार, नेत्र विकार इंद्रियोपघात यांवर उत्तम कार्य करतात. याबरोबरच लाह्यांचा चिवडा, तांदळाची पेज, मूगाची खिचडी, मूगाचे धिरडे, नाचणीचे सत्त्व, ज्वारीची भाकरी इ. आहारीय पदार्थ स्थौल्य नियंत्रणात महत्त्वाचा भाग ठरतात. ताज्या दह्याचे उत्तम घुसळलेले ताक व ताजे गरम दूध हि तर या भूलोकीची अमृतपेयेच आहेत. गाईचे साजूक तूप व गरम दूध नियमितपणे झोपण्यापूर्वी सेवन केल्यास कोष्टाची मृदूता राहते, निद्रा उत्तम येते, धातूंची झीज टळते व मुख्यतः मलावष्टंभाची तक्रार सहजपणे दूर होते. ही फक्त थोडीच उदाहरणे इथे दिली आहेत. तज्ज्ञ वैद्य अधिक मार्गदर्शन प्रत्येक रुग्णास व स्वस्थ व्यक्तीस करून हे वैयक्तिक स्वास्थ्य दैनंदिनी उत्तमपणे आखून देऊ शकतात व त्यात वेळोवेळी सुधारणा सांगू शकतात.

गरज आहे ती ‘नित्य मंगलम्’ व्हावे या प्रखर इच्छेची त्यानुसार ‘स्वास्थ्य श्री’ प्राप्तीसाठी निरंतर प्रयत्न करण्याची व आचार-विकार व उच्चार सर्वच शारीर-मानस स्वास्थ्यरक्षणासाठी समजून उमजून करण्याची! आयुर्विद्याच्या सर्व वाचकांना, जाहिरातदारांना, लेखकांना व हितचिंतकांना ही ‘स्वास्थ्य श्री’ मिळो हीच श्रीधन्वंतरी चरणी प्रार्थना!!



रोटरी पुरस्काराने सन्मानित
आरोग्यदीप २०१७ व २०१८



आरोग्यदीप २०१९
छंदश्री आंतरराष्ट्रीय दिवाळी अंक स्पर्धा
द्वितीय पारितोषिक विजेता.

सुखी दीर्घायुष्याचा कानमंत्र देणारा...

* आरोग्यदीप दिवाळी अंक २०२३ *

दसऱ्याच्या शुभमुहूर्तावर दि. २४ ऑक्टोबर २०२३ रोजी
प्रकाशित होणार आहे... आपले लेख आजच पाठवा...

जाहिरातीसाठी व अधिक माहितीसाठी त्वरीत संपर्क साधा...

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

स्वागत!



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



फोर्टेक्स फोर्टीफाइड

पुरुषांमधे कामोद्दीपन करणारे
उत्तम औषध, उत्तम बल देणारे,
जननेन्द्रियाच्या स्नायूंची ताकद
वाढविणारे व टिकवून ठेवणारे,
शुक्रस्तंभक.



ब्राह्मीप्राश शिरप

स्मरणशक्ती-
ग्रहणशक्ती वाढविणारे,
ताणतणाव मुक्ती,
बौद्धिक प्रगती,
आयुष्यवर्धक
म्हणून उपयोगी.



परिपाठादि काढा

लहान मुलांमध्ये स्वास्थारक्षक,
गोवर व कांजिण्या यामध्ये
उपयुक्त, तसेच त्यांच्यामुळे
झालेली शरीरावरील हानी
भरून काढण्यासाठी उपयुक्त.



शतावरी कल्प

(केशशुक्ल)

गर्भिणी व स्रुतिकावस्थेमध्ये बल्य,
पोषक, स्तन्यवर्धक, अम्लपित्त,
दौर्बल्य यात उपयोगी.
मासिक पाळी येणे बंद झाल्यावर
बलकारक म्हणून उपयुक्त.
वृद्ध स्त्री-पुरुषांमधे दौर्बल्य
दूर करण्यासाठी.



रसशाळा®

शास्त्रोक्त व पेटेंट आयुर्वेदिक औषधे तयार करणारी संस्था.

आयुर्वेद रसशाळा, पुणे

GMP Certified Company

फॉर

आयुर्वेद रसशाळा फाऊंडेशन, पुणे

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

E-mail : admin@ayurvedarasashala.com Visit us at : www.ayurvedarasashala.com Toll free No. 1800 1209727

June 2023

35

Ayurveda Masik

Registered

Postal Registration No. : PCW/093/2021-2023

License to Post Without Prepayment of Postage. (WPP 101)

Posting at PSO, Pune GPO - 411001

Posted & Published on 10 / 06 / 2023

RNI Registration No. MAH MAR - M / 1968 / 14635

This magazine is printed at Unique Offset, 50/71A, Dhayari-Narhe Road, Narhe Gaon, Tal. Haveli, Pune-41 by Dinesh Dhadphale & Published at 583/2, Rasta Peth, Pune - 11, by Dr. D.P.Puranik on behalf of Rashtriya Shikshan Mandal, 25, Karve Road, Pune - 4. Editor : Dr. D. P. Puranik

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



बालजीवन

लहान मुलांना नेहमी द्यावे,
भूक वाढते, पचन चांगले होते,
अनुलोमक, बल व स्वास्थ्य
टिकविणारे व वाढविणारे.



हुपिंगकफ मिवश्चर

वारंवार उबळ, धिकट खोकला,
जेव्हा सर्व औषधे संपतात तेव्हा
सूक्ष्म त्रिफळ्या बरोबर घेतल्यास
उपयोगी.



चारकोसल

अपचन, पोट फुगणे,
पोटात गुबारा धरणे,
मळमळ, उलटी होणे या व
अशा तक्रारींवर तत्काळ काम
करणारे उत्कृष्ट औषध.



अंमेवस

अपचनमुळे उत्पन्न होणाऱ्या पोटातील
गॅसेससाठी उपयुक्त, पोटात वारंवार
दुखत असल्यास, अन्नपचन प्रक्रिया
सुधारण्यासाठी उपयुक्त.



शास्त्रोक्त व पेटेंट आयुर्वेदिक औषधे तयार करणारी संस्था.

आयुर्वेद रसशाळा, पुणे

GMP Certified Company

फॉर

आयुर्वेद रसशाळा फाऊंडेशन, पुणे

२५, कर्वे रोड, पुणे - ४११ ००४. ☎ : (०२०) २५४४०८९६, २५४४०८९३

E-mail : admin@ayurvedarasashala.com Visit us at : www.ayurvedarasashala.com Toll free No. 1800 1209727

