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# GURUKUL'S C.M.E



A Quarterly Magazine For  
Medicine Reorientation

## KNOWLEDGE BUILDS CONFIDENCE

Volume 5

Issue 1

Oct. Nov. Dec. 2017



अंजीर



## Editor's Desk

Dear Doctor

On successful completion of 4 years of publication of this magazine, I feel highly satisfied extending good wishes for year kind cooperation and due recognition of my endeavor.

This issue contains writeups to start with are scientific ayurvedic management of **Mastiksh Anteh-sraav** (Cerebral Haemorrhage); effective treatment of **Sangrahini** (Ulcerative-Colitis); encouraging clinical trail of herbal formula for cure & control of **Hridya-Rog** (Coronary Artery Disease); age old relevance of **Srotas** (Channels e.g tracts, arteries, veins & lymphatics) in the development and deterrence of various neurological disorders.

The last one for control & cure of **Arsh** (Haemorrhoids) by means of ayurvedic principles of **Aahar** (Diet), **Vihar** (Life style management) for clinical significance.

*Wishing you happy, healthy & honorable year 2018.*

Thanks.

With Regards

**Dr. Dinesh Vasishth**  
**Ph.D (Internal Medicine, Ayurveda), M.B.A**

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## ***Gurukul's C.M.E.***

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*HARDIK BADHAI*



**HON. SH. SHRIPAD YASSO NAIK JI**  
A.Y.U.S.H. MINISTER  
*ALL INDIA INSTITUTE OF AYURVEDA, NEW DELHI*



**AROGYA 2017, NEW DELHI**





## ***Chintan!***

### **ALERT ! MEDICAL NEGLIGENCE**

*Dear Doctor,*

*Now-a-days cases of medical negligence are in the news. These unwanted but common mishappenings occur during the course of investigations, surgical procedures, emergencies or medical treatments sadly at the cost & life of ailing patients.*

*Although attending doctors are mostly highly qualified supported by trained medical staff in reputed private hospitals.*

*Analysing these tragic incidents it is realised that concerned doctors are certainly over burdened but occasionally over confident too in discharging precise individual medical care.*

*Thank god these doctors are defended by fellow colleagues either in private medical associations or government medical councils entasting them formal punishments or mere regrets.*

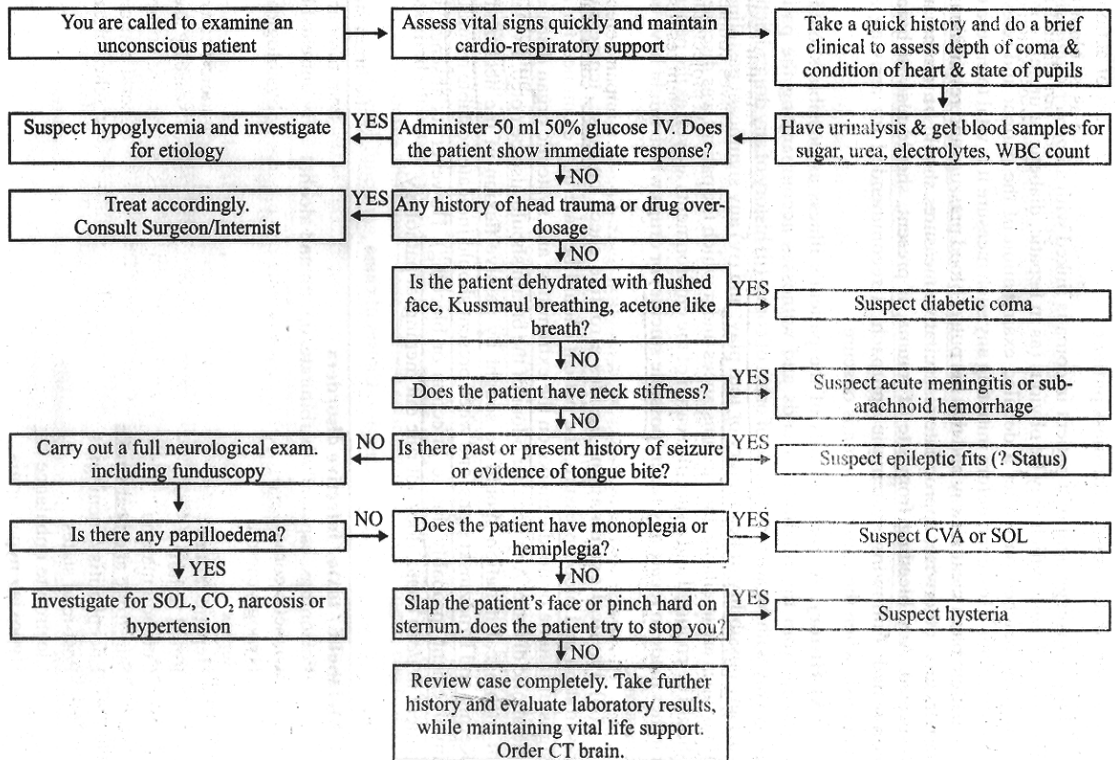
*My dear B.A.M.S./M.D (Ay.) physicians whether you are in private practice or government job you know very well that to error is any human being then who will protect you. So be prepared for any eventuality.*

***Let's think and have Chintan.***

- 1. For enhancement of knowledge encourage regular get togethers for medical lectures, seminars among P.G's & graduates.*
- 2. Ensure intellectuals as office bearers (**Not Netas**) for state or central parishads e.g. **D.B. C.P** or **C.C.I.M.***
- 3. Nurture minimum unified associations a resposible bridge between **A.Y.U.S.H** & **society**.*
- 4. Enrol your name in state registers of parishads e.g. **delhi bharatiya chikitsa parishad**.*
- 5. For safty & security while treating patients avail **indemnity insurance**.*

***Sharing knowledge is mandatory for  
growth of any medical science***

**FLOW CHART NO. 1 : EVALUATION OF UNCONSCIOUS PATIENT**



## **TERIFF FOR ADVERTISEMENT**

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## **AYURVEDIC MANAGEMENT OF ACCIDENTAL INTRACERBRAL HAEMORRHAGE**

### **A case Report**

In general, the surgical aspects of Ayurveda is always underestimated or neglected, in such circumstances one cannot think of emergency treatment of serious conditions.

**But surprisingly a case of accidental intra cerebral hemorrhage is successfully treated with the Ayurvedic line of treatment, precise case report of the same is narrated here.**

A 38 year-old male patient was admitted to an allopathic teaching hospital, with following history.

**Sudden onset of weakness in left extremities, inability to speak clearly, inability to move the left extremities, incontinence of urine and defecation, intense headache, irrelevant talk were present.**

Necessary investigations were done, the findings of important investigations were as follows:-  
B.P.210/40 MM. of Hg.

Funduscopy : Optic cups visible on both sides, Arterio-venous nipping on left side.

E.C.G. : WNL

**CAT-SCAN : Hematoma in Rt. thalamic and midbrain region**

X-ray Skull-NAD

C.S.F. : Sugar 87 Mg%

Chlorides: 530 Mg.%

Proteins: 53% & Xynthochromic Lymphocytes-HPF

Considering above findings the **diagnosis was made as Moderate Hypertension with cerebral-vascular Embolism (Hemorrhagic) with Hemi paresis left.**

The patient was treated with standard line of treatment with drugs only, for twenty one days with no improvement in spite of this the patient was discharged, advising.

**Oral Glyerol 1-02. T.D.S. x 4 DAYS**

**Tab. Aldomet 1 :QID**

**Salt restricted diet**

**Physio therapy exercises**

**To come for review after 30 days**

**The patient's relatives thought to have the alternative Ayurvedic treatment. So he was brought to the Shalya O.P.D. Govt. Ayurvedic College & Hospital, Nagpur.**

The patient was examined, the reports were observed and the patient was admitted in Shalya I.P.D. An understanding was given to the relatives about the prognosis of the patient.

The detail history was taken and revealed that the patient was a regular drinker and after fall from the cycle he developed the left hemi paresis and other sign/symptoms for which he was brought to the allopathic Medical College, Nagpur.



Left Hemi paresis  
Aphasia  
Stool & Urine incontinence  
Headache  
Insomnia

B.P.150/120 mm. of Hg.

Pulse 94/mm

Pupils/BERL

Apart to this, the impairment of optimum functions, of intellect and memory was noted by lack of association to stimuli.

The location of pathology was revealed from the scan report i.e. **Hematoma in right thalamic and midbrain region.**

As the lesion was in the **Uttamanga** i.e. the intra cerebral hematoma was the main causative factor for the impairments of mainly the vatic functions.

**The treatment was planned to evacuate the hematoma and to strengthen the affected parts of the body.** The following line of treatment was given.

1. Patient's scalp shaving was done and tap irrigation with **Dashmolla kwatha** was done once a day for 15 days prior to **leach** applications.

2. **Anu tail** medicated nasal oil drops instillation was advocated once in a day for 15 days.

3. **Three leaches** were applied over both temporal regions on every alternate day; such ten seatings were given in each seating 15 to 20 cc. impure-vitiated blood was removed.

4. The powder of **Glycyrrhiza Glabra (Mulethi)** 2 gms. thrice in a day.

5. **Sangeyasad bhasma** 125 mg X twice a day with honey.

6. **Khamiregavjava, Ambari:** 5gms. twice in a day.

7. **Saraswata rishta** 15 ml twice in a day after food.

Tab. Aldoment 1 BD

8. **Bramhighrita** 15 ml. at bed time

Apart to this, daily whole body massage with **Mahavatvyadhihar** tail followed with whole body steam bath was given regularly for 30 days. With the above treatment slowly but steadily the improvement was observed in the patient as compared with the initial conditions

**Insomnia:** Sound sleep for 5 to 6 hours in the night.

**Incontinence:** Patient can recognize, the sense of desire for stool defecation and urine micturation defecation.

**Aphasia:** Indistinct but low pitch talk.

**Loss of Memory :** Can recollect many a things and able to recognize the relatives.

**Weakness In, :** Lt. extremities muscles power regained up to 3 + and patient was able to walk with the stick for a short distance Unable to stand

**Flexion, Extension :** Movements improved but moments sluggish

**General debility:** Feeling active

**Body weight :** 34 Kg.to 36 Kgs.

**Loss of Appetite** improved

**Headache :** Absent

**B.P.** 180/120 BP. 140/90mm/Hg mm/Hg.

**Hb%** 9.8gm. : Hb.11 gm.

The same treatment was continued for another fifteen days except the doses of Tablet Aldoment which was adjusted as per the B.P. reading.

Patient recovered totally except general weakness.

**For further fifteen days the following treatment was continued.**

1. Whole body massage followed with steam bath.

2. **Brahmighrita:** 15 ml. at bed time.

3. **Anutail** nasal drops

4. **Saraswatarishta**: 15 ml. X twice daily

5. **Shatavarikalpa**: 15 gm. X twice daily with milk.

**Tab aldoment**: ½ B.D

Thereafter, the patient was discharged with advising the following treatment, to be continued, for one month.

- **Brahmighrita**: 15 ml. at bed time.
- **Anutail** drops
- **Sharaswatarishta**: 15 ml. twice daily.
- **Shatavarikalpa**: 15 gm. X twice in a day with milk.

At the time of discharge the patient totally recovered & there were no residual sign/symptoms of the disease.

**The body weight increased from 34 Kg. to 40 Kg. He was with full strength and was able to do his routine livelihood, laborious cycle repairing job. The same is evident in the later photographs.**

### DISCUSSION:-

**The main causative factor for srotorodha (obstructive lesion) was intra-cerebral Hematoma. For deeply situated hematoma the application of leeches is more effective as advised by Acharyas.**

This selective Bio-blood aspiration has played an important role in clearing the Srotodha (obstructive pathology).

The tap irrigation of scalp region has helped to eliminate the diseased blood by increasing circulation of that region.

**The Khamiregavija Ambari-The main active ingredient is Ambar which is an organic substance used in hemiplegia. It has got hematoma dissolving action.**

**Yashatimadhu-** Glycereza Glabra.

This herbal drug is used in reducing the inflammatory edema particularly that of hemorrhagic in origin.

**Sangeyashad Bhasma-** is highly effective in the vitiated vata (**neurogenic disorder**) particularly that of Pakshavadha type disorders (**Paresis**). Apart to this it has got the property of absorbing edematous tissue fluid and thus relieving the tissue oedema.

**Sarasavatarisht with Gold.** This Elixir is an excellent time tested remedy for insomnia, impaired memory and other intellect associated disorders. It also improves the speech disorder.

**Mahavatvyadhihar taila-**This oil is a mixture of Narayantail 40 ml. Asvangandha taila 40 ml. and Kukkutomamsa taila 20 ml. Regular massage of this oil followed with steam bath strengthening the muscle and thereby increasing muscle power.

**Bramhighrita-**This medicated ghee is effective in loss of memory headache and other related psychosomatic disorders.

This concise discussion clarified the modus operandi advocated in the above case.

**This is a rare but successful example of serious condition treated with Ayurvedic line of treatment. Hope this will initiate others to dare and act in similar conditions where other medical intervention are helpless or not encouraging.**

*An Awnla A Day Keeps Ailments Away*

## **'Leech' Application In Cerebral Haamorrhage (Mastishka-gat rakta-srava)**



**Before Treatment- QUADRI-PARESIS**



**CAT - SCAN  
Buffer Slice - B  
Filter 1**

**Haematoma in Rt. thalamic and  
mid brain region**



**During treatment**



**During treatment**

**Slide 1**



**After Treatment**



**(After full recovery, Pt. repairing Cycle)**

*(The case was treated in Govt. Ayurvedic College-Hospital, Nagpur. When the author was Professor in 1996)*

*\*\*Associated. Prof. Govt. Ayurvedic College – Hospital, Nagpur.*





**Dr. Shashi Bala**

Head of the Deptt & Sr. Consultant  
Moolchand Hospital, Lajpat Nagar, New Delhi

## **Ulcerative Colitis - Ayurvedic Treatment with clinical trials**

**Ulcerative Colitis** is a Chronic inflammatory disease of colon & rectum leads to formation of ulcers in the lining of large intestine. Most common part effected is Sigmoid Colon and rectum. Symptoms are very much similar to Crohn's Disease but Crohn's disease can affect any part of digestive system. Ulcerative colitis can affect people of any age but most common age is below 30yrs.

According to allopathic exact **causative factor** is not known but there are no. of factors which are responsible for this disease.

1. low immunity, 2. genetic 3. viral 4. Bacterial
5. Fungal, 6. Last but not least STRESS

### **Common symptoms**

1. Pain /cramps in abdomen, 2. Diarrhoea
3. stool mixed with mucus & blood 4. Fever
5. Fatigue 6. loss of appetite
7. Loss of weight, 8. night sweats

### **Differential Diagnosis**

1. Crohn's Disease 2. Irritable Bowel Syndrome
3. Diverticulitis

### **Complications**

1. Joint pains specially Rheumatoid Arthritis is very common
2. Eye Diseases
3. Liver Disease specially Liver Abscess

### **4. Colon cancer is very common**

Major investigation to diagnose is **Colonoscopy**

Blood Test - CBC,ESR is done to rule out infection

Stool Test to rule out blood, infection & white blood cells.

**In Ayurveda ulcerative colitis can be treated in better way, If ayurvedic medicines are selected as per the constitution of the patient,chronicity of the disease & symptoms. Diet plays a very important role in treating the disease. From 2002 to 2012 in Moolchand Hospital I have selected 60 patients of ulcerative colitis with different age groups & divided into 3 categories according to chronicity & with associated allopathic medicines.**

Patients age varies from 2yrs to 65 yrs.

These 60 patients are divided in to 3 categories with 20 patients in each category.

- 1.ulcerative colitis on steroids medication & with the history more than 10yrs.
- 2.Ulcerative colitis with non steroid medication with the history more than 6 yrs.
- 3.Ulcerative colitis with acute onset and started directly ayurvedic med with the history not more than 6 months.

### 1st Category

No of Patients	Time Period	Completely able to stop Steroids	Not able to stop steroids
20	1yr	68%	32%

in 32% of the patients we are not able to stop steroids but the symptoms are reduced or we can say very much under control

### 2nd Category

No. of patients	Time Period	Completely cure	Off & on Symptoms are appearing`
20	2yrs	72%	28%

These 28 % patients are not regular with their diet & lifestyle .They get off & on the attacks of ulcerative colitis but symptoms reduces with 3 to 4 wks treatment

### 3rd Category

Within 3 to 6 months patient become completely all right but they have to very conscious about the diet for very long time

### Treatment

Treatment : Mainly the following combination was given

**Madhuyashti churna- 200mg**  
**Haridra churna- 200mg**  
**Panchamrit parpati- 125mg**  
**Gangadhar churna- 1gm**  
**Praval pishti -200mg**  
**Sphatik bhasma- 400mg**  
**Lavan bhaskar churna- 400mg**

Powder BD or TDS depending upon the symptoms. Doses of the single drug can be changed according to the symptoms of the disease

If motion is hard or constipated then add Haritaki churna- 1 gm in above med

If there is a loose motion then add **Bilwa phala** churn- 1gm or **Dadimashtak** churna -1gm or **Bol Bhadra Ras-** 30mg can be added

**Kutaj ghan vati-** 1 Tab BD to 2 tab TDS is given in all cases except children below 10 years. In those children **Syp Kutaj Bilwa** was given 1Tsf to 2 Tsf BD or TDS

### In heavy bleeding cases

**Styplon** 2 tab TDS or **Ayapon** 2 tab TDS or **Bol Bhadra Ras** 1 Tab TDS Or **Bol Parpati** 50 mg TDS was added

If it is very Chronic with recurrent fever then **Swarn Basant Malti** 30mg TDS was given with above combination

In some cases **Patrangasavam** was given to stop the bleeding

When the symptoms are disappeared & there is no recurrence of the disease in low dose of the medicines more than a month then to maintain it following Asavas & Arishtams can be given

**Pancharishtam** 2 Tsf BD  
**Jeerakadyarishtam** 2 Tsf BD

**Kumarayasavam** 2 tsf BD  
**Abhyarishtam** 2 Tsf BD

Isabgol plays a very important role in curing this disease but the anupan & time of consumption is very important

Preferably Isabgol can be given in the evening time (Between 4pm to 6 pm)

If hard motion then it should be given with warm water

If frequency of motion is more than 3 times & consistency is soft then it can be given with cold lemon water ( salt & sweet)

If watery loose motion then it can be given with curd & banana when we start the treatment of ulcerative colitis it has been observed that we have to adjust the combination & doses of the medicine after every 2 to 3 wks. So the frequent revisits of the patient are very important

Diet plays an important role in treating & curing any kind of disease related to digestive system.

There no of things to be avoided according to season & constitution of the body but the common are spicy, sour & fried food, Spinach, Papaya, Cheeku, Urad dal, Hot milk, cauliflower, Almonds, Cinnamon etc.

Best things to eat are all light vegetables like **giya, tori, tinde, parwal, sitaphal, Moong dal** is the best. Fruits like **Apple, Pomgranate, Oranges, Banana, Curd, Yogurt, Butter** milk, Rice

Most important is food should be fresh, seasonal when eaten it should be in small quantity at short intervals.

### **One should know how to relax himself**

In conclude Ayurvedic medicines has great role to treat ulcerative colitis if **diet, stress & sleep** is under control, 50 % Of the disease can be treated itself & rest 50% is completely cured by ayurvedic medicines if given in proper combination according to the symptoms of the disease ,Constitution of the body & season .

## **PREVENTIVE MEDICINE**

### **Vatik-Disorders**

#### **Herb - Ashwagandha**

Reduces anxiety & stress (**Anxiolytic**), checks cholestrol level (**Dyslipiedimia**), treats erectile dysfunction (E.D) and boosts immunity (**Rasayan/Restorative**)

#### **Compound - Dashmoolarishta**

For various disorders of indigestion (**Aam Pachak**), Bones & Joints (**Parsh-Shool**) as well as obstretic diseases (**Sutika**)



## MOVING NEWS

## खानपान और जीवनशैली बदलें

मधुमेह वैश्विक खतरनाक बीमारी है, लेकिन खानपान और जीवनशैली में बदलाव लाकर इसे काफी हद तक नियंत्रित किया जा सकता है। टाइप 1 के मरीज को इंसुलिन लेनी पड़ती है। लेकिन टाइप 2 के मरीज खानपान संबंधी अनुशासन को अपनाने पर खानपान को नियंत्रित कर सकते हैं।

## अनाजनाकर देखें

- खाने में साबुत अनाज, ग्रीन ग्रेड, ब्राउन राइस, गेहूँ का पास्ता, ओट्स और आलू शामिल करें। फाइबर से भरपूर ये चीजें रक्त में शुगर स्तर को नियंत्रित रखती हैं।
- मैदा, सफेद चावल, सफेद ब्रेड, हाइट पास्ता, केक और कुकीज जैसे खाद्यों से परहेज करें, क्योंकि इनमें फाइबर कम होता है, इसलिए इनसे शुगर बढ़ सकता है।
- फलियाँ, दालें, टोफू, दही, पनीर, कम वसायुक्त दूध जैसे प्रोटीनयुक्त आहार लें। मांसाहार प्रोटीन, आयरन और विटामिन को आहार में शामिल कर सकते हैं।

- अधिक वसायुक्त दूध और रेड मीट मधुमेह के मरीजों के लिए दुश्मन के समान हैं।
- मक्खन, घी, चीज और डिब्बाबंद पेयों और खाद्यों से परहेज करें।

- मौसमी फलों और भरपूर मात्रा में सब्जियों का सेवन करना लाभदायक हो सकता है। लेकिन आम, चीकू, अंगूर, केला और लीची खाने से परहेज करें।

- हल्दी, लहसुन, बादाम, अखरोट, सूरजमुखी के बीज, कद्दू के बीज, पलेक्स सीड्स, चीना सीड्स, दालचीनी, ग्रीन टी का सेवन भी उपयोगी है।



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## मोटे अनाज से वजन घटाएं



सेहत

न्यूयार्क | एंजेली

कई लोग सुबह-शाम वजन कम करने के नुस्खे ढूँढ़ते रहते हैं, लेकिन क्या आपको मालूम है कि साबुत अनाज, फल और हरी पत्तेदार सब्जियाँ समेत फाइबर से भरपूर खाद्य पदार्थ मोटापा घटाने में काफी कारगर होते हैं।

एक ताजा शोध में सामने आया है कि फाइबर से भरपूर खाद्य पदार्थ खून में शुगर की मात्रा को भी ठीक करता है। साथ ही पाचन क्रिया में भी उपयोगी होता है। ये रिसर्च जर्नल सेल होस्ट एंड माइक्रो नाम की पत्रिका में छपा है। वैज्ञानिकों ने पाया कि फाइबर की कम मात्रा वाला खाना खाने से वजन बढ़ने और शुगर बढ़ने जैसे दिक्कतें चूहों में देखी गईं। इतना ही नहीं फाइबर की कमी से उनकी बड़ी आंत में एक परत जम गई जो पाचन प्रक्रिया के लिए खतरनाक है।

## क्या है फाइबर

फाइबर एक ऐसा न पचने वाला पदार्थ है, जो पाँच से कार्बोहाइड्रेट के रूप में निकाला जाता है। फाइबर दो तरह के होते हैं। इसे घुलनशील और अघुलनशील दो भागों में बाँटा जाता है। घुलनशील फाइबर वाली चीजें अधिक पानी सोख कर गाढ़े तरल का रूप ले लेती हैं और पेट में शर्करा, कोलेस्ट्रॉल व वसा को अपने साथ लेते हुए पाचनत्रय में नीचे की ओर ले जाती हैं। इन्हें पचने में अधिक समय लगता है, इसलिए देर तक पेट भरा महसूस होता है। अघुलनशील फाइबर के स्रोत पानी को कम सोखते हैं और पचते नहीं हैं। ये आंतों में मौजूद अपशिष्ट को नीचे ले जाते हुए उन्हें शरीर से बाहर करने में सहायता करते हैं।

## फल-सब्जियाँ भी स्रोत

- घुलनशील फाइबर- मसूर की दाल, फली, ओट्स (जई की भूसी, जई का दलिया), ज्वार, बाजरा, रागी, जौ, आलसी, ईसबगुल और फल जैसे सेब, नाशपाती, स्ट्रॉबेरी व खट्टे फलों में ये फाइबर होता है।

- अघुलनशील फाइबर- इनमें साबुत अनाज, दलिया, हरी पत्तेदार सब्जियाँ, ब्राउन राइस, फल व सब्जियाँ जैसे गाजर, ब्रोकली आदि शामिल हैं।

## इसके लाभ

फाइबर शरीर में कोलेस्ट्रॉल और रक्त शर्करा को मात्रा को नियंत्रित रखता है। भोजन नलिका से भोजन को आंतों तक ले जाने और शरीर से अपशिष्ट को बाहर निकालने में इसकी अहम भूमिका होती है। शोध कहते हैं कि फाइबरयुक्त चीजों का नियमित सेवन आंत, छाती व गर्भाशय के कैंसर की आशंका को भी कम करता है। बवासीर में भी यह लाभकारी है।

## रिपोर्ट के नतीजे

- 1990 में औसत आयु 59.7 साल थी, जो 2016 में 70.3 साल हो गई। लेकिन अलग-अलग राज्य के स्वास्थ्य संचिकों में फर्क होने के कारण औसत आयु में भी फर्क है। मसलन, केरल में महिलाओं की औसत आयु वर्तमान में 78.7 साल है, जबकि उत्तर प्रदेश में यह 66.8 साल है।
- राज्यों में बीमारियों के बोझ में 36 फीसदी तक की कमी आई है। लेकिन उत्तर प्रदेश, असम तथा छत्तीसगढ़ में यह सबसे ज्यादा है। इसी प्रकार बाल मृत्यु दर सभी राज्यों में घटी है, लेकिन केरल और उत्तर प्रदेश के आंकड़ों में चार गुना का फर्क है।
- 1990 में 61 फीसदी बीमार संवारी रोगों, नक़्जात, मातृ एवं पोषण से जुड़ी बीमारियों का था। साल 2016 में घटकर यह 33 फीसदी रह गया। लेकिन इस अवधि में गैर संवारी रोगों का प्रकोप बढ़ने इनका बोझ 30 फीसदी से बढ़कर 55 फीसदी हो गया है।
- पानी एवं स्वच्छता के क्षेत्र में देश में काफी सुधार हुए हैं। लेकिन अब भी देश में तीन की तुलना में प्रति व्यक्ति यह बोझ 40 गुना ज्यादा है।

## सुबह नाश्ता न करने से वजन बढ़ने का खतरा

वेस्टलान | एंजेली

अगर आप सुबह का नाश्ता नहीं करते हैं तो स्वास्थ्य न हो जाएगा। सुबह का नाश्ता न करने से आपका वजन बढ़ सकता है। शोध के मुताबिक ब्रेकफास्ट नहीं करने पर आप पूरे दिन जंक फूड खाते रहते हैं जो आपके लिए खतरनाक साबित हो सकता है। रिसर्च में यह बात भी कही गई है कि नाश्ता नहीं करने से बाँड़ी क्लॉक गड़बड़ हो जाती है जिससे वजन बढ़ने लगता है।

नियमित खाना ना खाने से आपको कई बीमारियाँ हो जैसे टाइप-2 डायबिटीज, हाइपरटेंशन और कार्डियोवैस्कुलर जैसी बीमारियाँ हो सकती हैं, लेकिन भोजन के समय में गड़बड़ों का बाँड़ी क्लॉक पर क्या असर होगा है, यह अभी तक ज्यादा स्पष्ट नहीं था। खाना टाइम से नहीं लेने पर इसका सीधा असर आपके शरीर पर पड़ता है।



## इंसुलिन को नियमित करने

वाले वर्लॉक जीन पर असर इजनवेल की यूनिवर्सिटी में हुए रिसर्च में पाया गया कि भोजन के बाद रक्तशर्करा और डायबिटीज के रिकार्ड दोनों व्यक्ति पर न्यूनतम और इंसुलिन को नियमित करने वाले वर्लॉक जीन पर नाश्ते का असर पड़ता है। शरीर के इंटर्नल वर्लॉक की महत्ता और भोजन के समय का शरीर पर पड़ने वाला असर इस साल मॉडर्न के क्षेत्र में नोबेल पुरस्कार के अनुसंधान का विषय था।

## सुबह साढ़े नौ बजे से पहले करें नाश्ता

रिसर्च के मुताबिक साढ़े नौ बजे से पहले नाश्ता करने से पूरे शरीर के मेटाबॉलिज्म सही रहता है उसके साथ ही वजन भी नहीं बढ़ता है और तब-तब की बीमारियों से भी आरंभ हो सकते हैं। तब अर्बिब यूनिवर्सिटी के डीपेल जालुकॉविक ने कहा कि सुबह शेरकाफ करने से शरीर पर इसका सीधे प्रभाव पड़ता है।

## स्टेम सेल नेत्रहीनता दूर करने में मदद करेगी

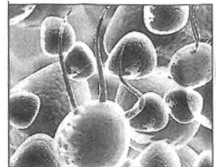
## शोध

लंदन | एंजेली

तमाम शोध के बावजूद नेत्रहीनता का इलाज संभव नहीं हो सका है, लेकिन अब लंदन के डॉक्टर इंसानी भ्रूण से मिले स्टेम सेल का इस्तेमाल कर इसका इलाज खोजने की कोशिश में जुटे हैं। उम्मीद जताई जा रही है कि स्टेम सेल की मदद से अंधेपन को दूर किया जा सकेगा।

कैसे किया गया इलाज : इस ऑपरेशन में आँख की एक खास तरह की कोशिका में स्टेम सेल को जोड़ा गया और फिर उसे रेटिना के पीछे के हिस्से में लगा दिया गया।

अंधेपन के इलाका के लिए लंदन के डॉक्टरों ने लगभग दस साल पहले यह प्रोजेक्ट शुरू किया था। इसका मकसद उन मरीजों की आँखों की रेशनी वापस लाना था, जिन्होंने उम्र से जुड़ी समस्याओं (एएमडी) की वजह से अपनी आँखों की रेशनी गंवा दी।



## स्टेम सेल की उपयोगिता

स्टेम सेल हमारे शरीर की बुनियादी कोशिकाएँ हैं, जिनमें कई तरह की दूसरी कोशिकाएँ विकसित की जाती हैं। इन कोशिकाओं को वोटप्रेस्त जगह पर स्थापित कर दिया जाता है। ये कोशिकाएँ क्षतिग्रस्त जगह पर नई कोशिकाएँ बनाती हैं। स्टेम सेल में ये क्षमता है कि ये अन्य कोशिकाओं का कई गुना नवीकरण कर सकती हैं। नाड़ी कोशिकाओं, मांसपेशियों की कोशिकाओं और रक्त कोशिकाओं का सीमित जीवनकाल होता है और ये खुद कई गुना नहीं बन सकती, लेकिन स्टेम सेल ये कोशिकाएँ बना सकती हैं।

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## REVIEW ON AHARA & VIHARA IN PREVENTING “ARSHA”

### 1. ABSTRACT

In Ayurveda Acharya Sushruta, Charaka, Vagbhata explained various ahara and vihara concepts regarding Arsha roga. Ahara and Vihara and home remedies (aharakalpana) play an important role in prevention of Arsha roga. Prevention of Arsha is crucial for lowering disease incidence and thus minimizing the individual, familial and public health burden. Ahara rich in green vegetables and fruits are beneficial whereas frequent meat consumptions increases the risk. Alcohol, mental tension occupational hazards also adding its effect on it. There is evidence of the effectiveness of ahara (Diet) or Vihara (Lifestyle) modification on Arsha Control, but further studies are necessary. The purpose of this article is to analyze and alter the Ahara and Vihara for prevention of Arsha.

**Keywords:** Arsha, Ahara, Vihara, Arsha prevention.

### INTRODUCTION

Lifestyle (Vihara) disease are outcome of our own way of living. These diseases are not infectious but self-imposed. The right quantity of health education is the only answer to avoid them. Now a days these diseases are increasing because of stress and strains caused by urbanization. Among lifestyle disorders following following are most occurring to human beings.

- Arsha (haemorrhoids)
- Diabetes
- Cardiovascular disease
- Arthritis
- Obesity
- Spinal problems
- Hyper tension
- Anxiety
- Depression etc etc

Among these Arsha is one of the Vihara (Lifestyle) disease increasing at an alarming rate in our society but everyone overlook it due to busy schedule, western lifestyle, modern civilization. The growing tendency to intake artificial foods, increase mental tension, lack of rest and careless attitude towards responding to natural urge such as suppression of defecation and urination also intensify the process of disease.

In ayurveda acharya sushruta mentioned this disease under the heading of **Mahagadas**.

### AETIOPATHOGENESIS

The etiological factors of ayurveda classics may be broadly classified in to two categories by acharya charaka.

1. Samanya nidan
2. Visheshha nidan

### Samanya nidan

Under this nidana they includes all factors corresponding to dieteric ingredients, vihara and agantuj trauma factor

### Dietic Factor

Dietic indulgence like consumption of **jirna** and **virudhahar** (de-composed and incomplete substance) that lead to **vibandh**.

Excessive less irregular intake of food i.e. Atyasan, Pramitsan And Adhyasan in Ayurveda which will interfere with digestive power leading to poor digestion and constipation.

Eating meat of cow, goat, pork and fish it also suppress the normal dietic power i.e. cause mandagni hypo function of metabolic and digestive enzyme contribute the actiopathogenesis of Arsha roga.

### Vihar

#### Sexual indulge

Sexual indulgence means unnatural sex which includes sodomy, which cause kshata in anal canal and leads to Arsha roga.

### Vegavarodha (preventing natural urge)

This leads to mandagni and vitiation of apanavayu resulting in stasis of faecal matter in guda causes development of pathological changes in gudavali and finally leads to Arsha.

### Avyayam Divaswapna

Day time sleep, lack of physical exercise and lack of sleep, this affect the rest of mind in the form of sleep at night and such people are most prone to get constipated

### Mental tension

Condition of mental tension affects the digestion.

### Gudakshnanaadabhikshna (Pressure and irritation in anal canal)

Defective sitting, sitting on haunches, soft place or uneven, hard and irregular pressure, riding on vehicles for long duration, continuous straining during defecation. It causes increase in intra-rectal pressure and it certainly aggravates possibly precipitates Arsha roga.

### Agantuj Factor

Irregular and improper use of Bastinetra, repeated deliveries, abnormal deliveries play an important role in causing kshata to the anal canal as in case of women. Later this injury repeatedly irritated with the contact of soiled clothes, undigested food stuff, grass, stones, small herbs causes friction and finally result in Arsha roga.

### Nidan

- Provocation Of Dosha
- Agnimandhya
- Vibandha
- Ama Formation
- Infliction Of Kshatam In The Anal Canal
- Doshavikriti
- Sthansnsrayam
- Doshadushya Samurchanam

Above mentioned all nidanas are capable of provocation of dosha and vitiating the jatharagni in turn of **Agnimandhya** and formation of Vikritahar i.e. **Ama**. This Ama getting together with **Prakupita** doshas converts them into their **Vikritavastha**. This stage is called **Doshavikriti**. This vikritidosha getting together with **Apana Vayu** travels through the **Pradhanahadhamanis** and paves the way in revealing the Purvarupas and repeated consumption of all Nidan factor aggravates the formation of Arsha.

### MANAGEMENT OF ARSHA

It is known that Ayurveda has two primary aims to



maintain the health and alleviate the disease. Which is achieved by

Nidanaparivarjan

**Apkarshan** (samshodhan)

**Prakritivighaat** (samshaman)

Preventive measures

Preventive measure we discuss about

**1. Ahara** (diet)

**2. Vihar** (Lifestyle)

Both for the prevention and cure of Arsha the patients should rely mainly on confirming to a suitable diet drinks and regimen factors which cause constipation and then Arsha it should be quite.

### **Ahara in preventing Arsha**

Over eating and eating between meals before the previous meal is digested should be avoided (**Vayuranulomya Anna Paan Sevyam**) such over loads clog and retard the whole process of digestion and evacuation of bowels. All these cause constipation and Arsha.

### **Eating refined foods are avoided**

In refined foods the roughage of the original grain has been removed such as white bread, white sugar and polished rice. Likewise eating tinned, preserved and reheated foods should be avoided.

Pulses generally produce more gas during digestion so it is avoided by who are constipated.

Vegetarians depend mostly upon pulses and legumes such as moong, masha, rajma, shaandahar, for their nourishment, protein requirement all these pulses, except moong are gas forming and constipative. To make them wholesome ghee, garlic, ginger, and asafoetida should be added while cooking

### **Deep fried food Strictly avoided**

Fried and deep fried food preparation through extremely tasty are harmful for the Liver and

difficult to digest leading eventually to constipation and Arsha. Timely intake of food. The three main meals of the day is breakfast, lunch and dinner should be eaten in time. In the present age because of busy life. Eating at set hours of the becomes the commonest to victim. Irregularly eaten food or food snacks eaten too often affect the digestion and bowel movements leading to constipation and Arsha (piles).

### **Chew well Before Swallowing**

Chewing well makes the food easily digestible. Swallowing food without proper chewing contributes to a considerable extent constipation in the present of hurry. The daily routine should be planned so as to leave sufficient time for meals.

### **Corns and cereals**

**Godhuma, kulatha, raktashali, Barely, Maize** and Bajara are very useful for Patient suffering from Constipation.

### **Vegetables**

To prevent and cure constipation and Arsha one should take more vegetables especially leafy vegetables such as spinach, methi both during lunch and dinner but should be fried in oil or ghee

**Bitter gourd, patola, kandaru, brinjal, beatroot** are very useful. Potatoes, cauliflower, jackfruit, yellow pumpkin and lady's finger are not useful. They cause constipation and gas formation in the abdomen.

### **Surana (Jimi kand) is very useful**

*Amorphophallus campanulatus* a kind of yam is very useful when cooked as a vegetable and also when used as a medicine. Boiled and mashed surana is very useful when eaten as a vegetable in order to correct its irritating property while a little tamarind juice is often added.

### Meat and Fish

Non vegetarian food such as meat, fish and eggs causes constipation. Person are suffering from constipation avoid them as far as possible.

### Fruits

Fruits and juices are very useful in preventing and curing constipation and Arsha. Regular use of ripe papaya and its preparations apples, pears, mangos, guavas and plumps do not make a person constipated. They promote urination and secretion of digestive juices bile from the Liver.

### Useful spices

**Black pepper, ginger, cumin, fenugreek, long pepper, cardamom, cloves, asafortida and cinnamon are very useful in promoting the functioning if liver and relieving constipation.**

### Vihar

#### Take less tea and coffee

Hot drinks such as tea and coffee in excess are harmful these taken only in limited quantities not more than two cups/day or should be avoided. They should not be taken on an empty stomach. They cause sluggishness of liver and excess intake disturbs sleep which results in bad digestion bed tea should also be avoided.

#### Taking warm milk at bedtime

Habitually taking a glass of warm milk at least two hours after dinner and before going to bed time make a person free from constipation. Buffalo's milk some times cause indigestion and gas formation in intestines so prefer cow's or goat's milk at bedtime

### Alcoholic drinks

Alcoholic drinks prepared by distillation such as whisky, brandy and vodka are nourishing and act as digestive stimulants. But if taken in excess and untimely, these drinks cause sluggishness and even cirrhosis of liver, this affects the digestion and

leads to constipation and Arsha. Drink such as beer Ayurvedic recipes such as **asava** and **aristas** are not that harmful. Some of these asava and aristas helps in relieving constipation.

### Professional hazards and exercise

Intellectuals, business managers, administrators and professionals are often required to remain seated for long time. Their work is sedentary. Modern facilities of transport such as cars and scooters do not allow them to perform even the simplest possible exercise i.e. walking after sitting down the whole day either in cars or in chairs they go straight to bed after a meal at night. Such cases yogic exercises would prove very useful. These exercises should be learnt under the supervisions of experts on yoga and should not be done just by reading books.

### Sleep and Rest

This provides natural addition to digestion and evacuation of faeces. If one does not go to sleep in time and thus cannot get up from bed in time then urge for bowel movement becomes irregular which results in ultimately in constipation and Arsha hence sleep and rest are essential for prevention and cure of Arsha.

### Mental Peace

Mental activities are directly connected with digestion and metabolism. Mental tensions, anxiety always cause liver malfunctioning, sleeplessness constipation and Arsha. To achieve mental tranquility, practising **pranayam** is described in yoga. It provides a concentration on mind and gives mental peace. Practice of pranayama by simply reading its description in yogic textbooks sometimes leads to harmful effect.

### Oriental Toilets

In western countries commodes or high lavatory seats are used for evacuation of stool. On the other hand in oriental countries such as India, lavatory seats are placed very low and one has to evacuate in an almost squatting position. Also **Sushruta**

**explained in the Arsha prevension don't sit in Utkatukaasana.** for long time physiologically oriental privies are better for evacuation. The squatting position has a further advantage in as much as the thighs are pressed against the abdomen protecting the abdominal viscera from the hazared of excessive strain. In the name of civilization in oriental countries also people have started using western style commodes. This may suit a Rheumatic patient but it leads to constipation and Arsha. The squatting posture is Ideal in order to be free from Arsha.

### DISCUSSION

We human beings are the small units of this universe. When one is in proper tuning with rest of the nature, he remains healthy and happy and when there is any disturbance in this harmony the diseases appear. Lifestyle decides a lot about our relationship with rest of the universe as what we do is a reaction to our surroundings. And according to Newton every action has a reaction, same happens with the body. We do well with the nature and our body. We get good, no chance for good after doing bad.

Lifestyle disorders are a big problem for our society today. Erlier Bacteria and viruses were the Prime killer, but now a days we human beings are proving for ourselves. For treatment principle should be focused to get rid of the human causative factors, i.e. **Nidan**. The three basic steps of treatment principle are described in ayurveda **Nidanparivarjan, Apakarshana, Prakritivighata** **Nidanparivarjan** of the three dscribed procedure is the prime one. The causative factors of the nidana are accounted under three catagories i.e. (**Ayoga, Hinayoya and Atiyoga**). Comglomiration of the object with the indriyas. **Mind** is the controller of the senses and responsible for the **Hemostasis** of indriarthasamayoga to rectify the improper comglomiration of the senses the normal equilibrium of mind should be restore. In

another context the treatment can also be performed by **Daivavyapashrayn, Yuktivyapashraya** and **Satvaavajaya, Satvajayais** the treatment procedure by which restoration of the mental faculties done. The performing the Satvavajaya treatment the nidanaparivarjana can also be achieved throught the functional appliment of the state of mind. As Arsha has its **Adhistanas in Dosha, Dushya and Malaayatan**, That's why it is Guda Vyadhi which cause is to be **Krichchasadhya** or **Yapya**, disease. in this the main treatment principle is Pathya for this it requires person manage the life by taking wholesome regimen and enjoying little comforts and happiness for the relief to his ailments. Arsha is aggravated if there is reduction in the power of digestion if it is increase and get cure, so Agni should be protected in Arsha. In Arsha the food ingredients and drugs which promotes power of digestion and downword movement of Vayu are invariably useful, so it is necessary to follow pathya in disease as well as in healthy state.

### CONCLUSSION

**A substantial and expanding study of evidence has implicated several aspects of diet and Lifestyle in the pathogenesis of Arsha. Importantly, lifestyle modification and dietary changes can effectively to control these risk factors and lower the incidence. To realize these benefits, individuals should avoid over eating, proper sleep and rest, be physically active, avoid alcohol, and follow a diet and Lifestyle as per above recommodation. Acomplishing these objectives will require individuals to change their behavior. The current challenge to healthcare providers, researchers, and government official is to develop and implement effective clinical and public health strategies, especially need-based educational programmes that would lead to sustained Lifestyle changes among individuals and more broadly, among populations.**

# RECENT DEVELOPMENTS

केंद्रीय वाणिज्य मंत्री सुरेश प्रभु ने कहा, इस क्षेत्र में बढ़ती जा रही संभावनाएं, 10 लाख प्रत्यक्ष रोजगार होंगे

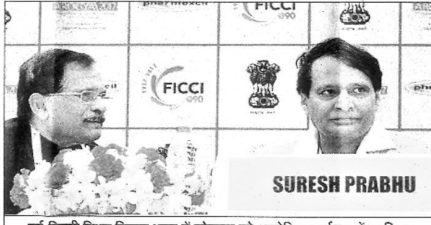
## आयुष क्षेत्र में 2020 तक ढाई करोड़ रोजगार

### उम्मीद

नई दिल्ली | विशेष संवाददाता

देश में आयुष दवाओं का बाजार तेजी से बढ़ रहा है, जिससे इस क्षेत्र में आने वाले दिनों में नए रोजगार की संभावनाएं बढ़ती जा रही हैं। केंद्रीय वाणिज्य मंत्री सुरेश प्रभु ने सोमवार को कहा कि वर्ष 2020 तक इस क्षेत्र में 10 लाख प्रत्यक्ष और करीब ढाई करोड़ अप्रत्यक्ष रोजगार पैदा होंगे।

केंद्रीय मंत्री ने विज्ञान भवन में आयोजित अंतरराष्ट्रीय आरोग्य मेले का उद्घाटन करते हुए यह बात कही। इस मौके पर उपस्थित आयुष मंत्री श्रीपद नाईक ने कहा कि आयुर्वेद व अन्य आयुष पद्धतियों को बढ़ावा देने के लिए हम गुणवत्ता पूर्व मानकीकरण पर जोर दे रहे हैं। नाईक समेत कई वक्ताओं ने इस बात पर जोर दिया कि आयुष खासकर आयुर्वेद की दवाओं को आधुनिक कसौटी पर परख जाने की जरूरत है। आधुनिक प्रयोगशालाएं इस कार्य को



नई दिल्ली स्थित विज्ञान भवन में सोमवार को आयोजित कार्यक्रम में उपस्थित केंद्रीय वाणिज्य मंत्री सुरेश प्रभु।

### जल्द ही हम चीन को पछाड़ देंगे

प्रभु ने कहा कि अभी हर्बल दवा के निर्यात में भारत दूसरे नंबर पर है। आयुष दवाएं बनाने वाली साढ़े छह हजार इकाइयां हैं, तो तेजी से बढ़ रही हैं। इसलिए वह वतन दूर नहीं जब हम चीन को इस क्षेत्र में पछाड़ देंगे।

अंजाम दे सकती हैं। पूर्व में डीआरडीओ ने सफेद दाग की दवा 'एल्युकोस्किन' और सीएसआईआर ने मधुमेह रोधी 'बीजीआर-34', आर्थराइटिस रोधी दवा

और सेहली जैसी गर्मिनरोधक बाजार में उतारी। यदि जड़ी-बूटी के हर फार्मूले को परखा जाए तो कई बीमारियों में आयुष दवाएं एलोपैथिक दवाओं का विकल्प

### नए उद्यमियों के लिए मौके

प्रभु ने कहा कि आज आयुष दवाओं का बाजार 500 करोड़ का है, जबकि निर्यात 200 करोड़ रुपये का है। हमारे पास परंपरागत चिकित्सा ज्ञान की कमी नहीं है। उसे नई कसौटी पर परखकर बाजार में लाने के नए उद्यमियों के पास काफी मौके हैं। इससे नए रोजगार पैदा होंगे।

### आयुष में 100 प्रतिशत एफडीआई से लाभ होगा

प्रभु ने कहा कि सरकार ऐसी बेहतर व्यवस्था तैयार करने के लिए सभी देशों के साथ काम करने की कोशिश कर रही है। सरकार ने आयुष में 100 प्रतिशत प्रत्यक्ष विदेशी निवेश (एफडीआई) की अनुमति दी है। इससे आयुष का बड़ा बाजार तैयार करने में मदद मिलेगी।

### प्रभु से आइकिया के प्रतिनिधि मिले

नई दिल्ली: फर्नीचर क्षेत्र की स्वीडन की प्रमुख कंपनी आइकिया के प्रतिनिधियों ने सोमवार को यहां वाणिज्य एवं उद्योग मंत्री सुरेश प्रभु से मुलाकात की।

कंपनी भारत में उपस्थिति बढ़ाने की योजना बना रही है। हालांकि, कंपनी ने केंद्र सरकार से स्थानीय श्रोतों से उत्पाद खरीदने के प्रावधानों में किसी तरह की छूट की मांग नहीं की। कंपनी को यकीन है कि 2022 तक वह अपनी बिक्री का 30 प्रतिशत माल स्थानीय स्तर पर ही खरीदेगी। आइकिया हॉल्डिंग के डिप्टी कंट्री मैनेजर पैट्रिक एंटनी ने मंत्री से मुलाकात के बाद कहा कि ऐसे समय में जब देश में पहला स्टोर शुरू करने के पांच साल होने वाले हैं, हम साल भर पहले प्रावधानों में हुए बदलाव को लेकर सकारात्मक हैं। कंपनी अगले साल तक देश में अपना फ्लैगशिप स्टोर शुरू करने वाली है। (एजेंसी)

ग्रामीण क्षेत्र में डॉक्टरों की कमी से निपटने को एक नई पहल

## चार हजार आयुष डॉक्टरों की गांवों में तैनाती होगी

### तैयारी

नई दिल्ली | गदन जैड़ा

ग्रामीण क्षेत्र में डॉक्टरों की कमी से निपटने के लिए केंद्र सरकार ने एक नई पहल की है। इसके तहत आयुष पद्धति के डॉक्टरों एवं चरित्र नर्सों को छह महीने का कोर्स करकर कम्युनिटी हेल्थ अफसर के रूप में प्राथमिक स्वास्थ्य केंद्रों और उप केंद्रों में तैनात किया जाएगा।

केंद्रीय स्वास्थ्य मंत्रालय में अतिरिक्त सचिव मनोज झालानी ने कहा कि पहले चरण में चार हजार कम्युनिटी हेल्थ अफसर के पद सृजित किए गए हैं। राष्ट्रीय स्वास्थ्य मिशन के तहत इन पदों पर केंद्र सरकार तय फार्मूले के तहत वित्तीय सहायता देगी। साथ ही इन चिकित्सकों के इंदिरा गांधी मुक्त विश्वविद्यालय



### इग्नू से कोर्स

● छह माह का प्रशिक्षण लेकर कम्युनिटी मेडिसिन अफसर बनेंगे

● प्राथमिक स्वास्थ्य केंद्रों और उप केंद्रों में इन्हें तैनात किया जाएगा

(इग्नू) से छह माह का कम्युनिटी मेडिसिन का कोर्स कराया जाएगा। इसके बाद इन्हें प्राथमिक स्वास्थ्य केंद्र में तैनात किया जाएगा। आयुष के तहत देश में आयुर्वेद, यूनानी, सिद्ध और होम्योपैथी के देश में करीब सात लाख पंजीकृत डॉक्टर हैं। पर उन्हें दूसरी पंथियों में इलाज की अनुमति नहीं है। परंतु कम्युनिटी मेडिसिन का कोर्स पूरा करने के बाद प्राथमिक स्वास्थ्य केंद्रों में उन्हें सीमित दायरे में मरीजों के उपचार की अनुमति मिलेगी।

आयुर्वेद, होम्योपैथी डाक्टर कर पाएंगे एलोपैथी पद्धति से इलाज

नई दिल्ली, प्रेटर : आयुर्वेद और होम्योपैथी सहित अन्य भारतीय चिकित्सा पद्धति के डॉक्टर अब एलोपैथी से भी मरीजों का इलाज कर पाएंगे। इसके लिए उन्हें एक ब्रिज कोर्स करना होगा। इसके लिए सरकार ने लोकसभा में विधेयक प्रस्तुत कर दिया है।

केंद्रीय स्वास्थ्य मंत्री जेपी नड्डा ने शुक्रवार को राष्ट्रीय आयुर्विज्ञान आयोग विधेयक, 2017 सदन में प्रस्तुत किया। इसमें चिकित्सा शिक्षा की गुणवत्तापूरक बनाने के उद्देश्य से भारतीय आयुर्विज्ञान परिषद (एमसीआई) की जगह राष्ट्रीय आयुर्विज्ञान आयोग के गठन का प्रस्ताव किया गया है।

इसमें कहा गया है कि सभी मेडिकल संस्थाओं में स्नातक शिक्षा के लिए प्रवेश के लिए जगह से एक सामान्य राष्ट्रीय पात्रता-सह-प्रवेश परीक्षा होगी। आयोग अंग्रेजी और ऐसी अन्य भाषाओं में परीक्षा का संचालन करेगा। यह सामान्य काउंसिलिंग की नीतियां भी निर्धारित करेगा।

विधेयक में अंडर ग्रेजुएट और पोस्ट ग्रेजुएट कोर्सों की प्रदाई, मेडिकल

### नई व्यवस्था

- इसके लिए एक ब्रिज कोर्स करना होगा, लोकसभा में विधेयक पेश
- एमसीआई की जगह राष्ट्रीय आयुर्विज्ञान आयोग का किया जाएगा गठन

संस्थानों के मूल्यांकन और डॉक्टरों के रजिस्ट्रेशन के लिए चार स्वतंत्र बोर्ड बनाए जाने का प्रस्ताव है। राष्ट्रीय आयुर्विज्ञान आयोग में सरकार द्वारा नामित अध्यक्ष और सदस्य होंगे। बोर्डों के सदस्य सर्व कमेटियों के जरिये तलाश किए जाएंगे। यह कैबिनेट सचिव की निगरानी में बनाई जाएगी।

स्वास्थ्य मंत्रालय के एक वरिष्ठ अधिकारी ने बताया कि नए प्रावधानों के जरिये सरकार का मकसद मेडिकल शिक्षा क्षेत्र में सुधार लाना है। भ्रष्टाचार और अन्य अनैतिक कार्यों के चलते पिछले कुछ समय से इसमें सुधार की मांग की जा रही थी।



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## **AYURVEDIC PERSPECTIVE OF SROTAS w. s. r TO NEUROLOGY**

### **ABSTRACT**

Ayurveda is a life science. The researchers of Ayurveda could rule out the presence of **srotas** (channels) spreading throughout the body. These **srotas** (channels) are governed by **vayu** which is using all the srotas of the body to carry out the functional and physiological activities of the human body without which the human society will not exist. Some are micro and some are macro in structures and they adopt the same colour of the particular dhatus the body to which it belongs.

The aim of the study is to justify that srotas are nothing but innumerable channels or pathways of the nervous system governed by electric current without which no functional and physiological activities of the human body will commence.

**KEYWORDS:-** Srotas(channels), Vayu, Pathways, Mana (human mind).

### **INTRODUCTION**

The human body is a house of miracles. It is made up of sophisticated electrical wires flooded throughout the human body . Even a small single hair of the body is dependent on these electrical wires that

are electrical signals. Speaking, looking, smelling hearing etc are all dependent on these electrical signals of the human body. Research is going throughout the world to understand the physiology behind this phenomena.

### **AYURVEDIC REVIEW**

Ayurveda is a life science and according to the human body is made up of three doshas namely :-

**1. Vata**

**2. Pitta**

**3. kapha**

and they follow routes to perform their activities. Different acharyas of Ayurveda have given their views and according to it the human body is made up of three types of doshas namely their own reviews regarding the functional aspects of vata, pitta and kapha.

The age of Ayurveda is about 5000 years old. In those periods the researchers of Ayurveda could rule out the presence of nervous system which is controlling each and every functional and physiological activities of the human body.

According to charaka in a human body formation of

every chemical and their movements, discharge of unwanted products from the body, feeling of hot etc as well as the functional activities of the sense organs in other words increase and decrease in functional activities occurs with the help of srotas. Chakrapani one of the commentators of Charaka samhita has put forward a maxim called “**Santan Nyay**”. According to this maxim the life is **nitya** (constant) and the **atman** is also nitya (constant). Since the life is nitya (constant), therefore formation of every substances producing inside the body as well as their movements are also nitya (constant). From the above said phenomenon it is clear that as long as the life exists in this world the neurological activities will never come to an end.

Human body is made up of **seven type of dhatus** namely – **rasa, rakta, mamsa, meda, asthi, majja and sukra**. The formation and development of the dhatus occurs due to **srotas** (channels). Again Ayurveda accepts that, **mana** (human mind) can travel throughout the body and it follows a proper route to perform its activities. So, without srotas (channels) mana cannot travel from one place to another. That means, mana has its own srotas through which it is performing its activities. Again one more concept comes even though **vata, pitta and kapha** will not be able to perform their activities. Regarding this matter Ayurveda says that pitta kapha discharge of unwanted substances outside the body and the poshana (nourishment) of dhatus will not be possible without vayu because vayu is the main controlling factor behind this phenomenon. Again the word vata means gati and gandha, are the two fundamental principles through which it is performing its activities.

The word **gati** means **gaman, gyan, praptian moksha** and the **gandha** means such an or conduction. So vata has the quality of movement which is necessary from the physiological point of view.

## **MODERN REVIEW**

The evolution of the nervous system that backs to the first development of **nervous system in animals**. Neurons developed as a specialized electrical signalling cells in multicellular cells, adopting the mechanism of action potentials present in single motile celled and colonial eukaryotes. At more integrated level the primary function of the nervous system is to control the body. It does this by extracting information from the environment using sensory receptors, sending signals that encode this information to determine an appropriate response, and sending output signals to muscles or glands to activate the response.

The nervous system derives its names from nerves which are cylindrical bundles of fibres that emanate from the brain and central cord, and branch repeatedly to innervate every part of the body.

The nervous system is involving in much ways in nearly every body function. Many tracts, pathways and channels are present in the nervous system that plays a key role in activating the functional activities of the nervous system. Neuron cell body contains a single nucleus. As with any other cells, the nucleus of the neuron is the source of information for gene expression. Extensive rough endoplasmic reticulum, golgi apparatus and mitochondria surround the nucleus. Large number of neurofilaments (intermediate filaments) and microtubules organize the cytoplasm into distinct areas dendrites are short, often highly branching cytoplasmic extensions. Dendrites usually receives information from the other neurons or from sensory receptors and transmit the information towards the neuron cell body. An axon is a long cell process extending from the neuron cell body. Each neuron has a single axon that extends from the cell body. The area where the axon leaves the neuron cell body is called the axon hillock.

**Gray matter** consists of group of cells and their dendrites where there is a little myelin. In the CNS, gray matter on the surface of the brain is called the clusters of gray matter located deeper within the brain are called nuclei. In the **PNS**, a cluster of **neuron cell bodies** is called **ganglion**. All the cell exhibit electrical properties. The inside of most cell membrane is negatively charged compared to the outside of cell membrane which is positively charged this uneven distribution of charge means the cell is polarized. In an unstimulated or resting cell, the uneven charge distribution is called the resting potential.

### DISCUSSION

Ayurveda has given utmost importance to srotas for every **murtiman bhavas** of the body. By saying **murtimanbhavas** Ayurveda means that flow of blood, neurological activities etc are the dependent on srotas (channels). **Dhatuposhana siddhanta**, physiological and functional activities of the human body, development of diseases are dependent on srotas (channels). Modern neurobiologist accepts the importance of channels or pathways. So the concept of srotas is very important. Without srotas the physiological as well as functional activities of the human body will not be possible. **Vata** follows all the srotas (channels). Vata can be assumed as a local current following all the channels of the body. Without the presence of this electrical current no action potentials can work and this current is even necessary for cell to cell interactions and it is an

established phenomenon. Ayurveda says that there is sanyoga and biyoga between the paramanus of the human body and for this sanyoga (connection) and biyoga (disconnection) **vayu**, **karma** (activity), and **swabhava** (nature) is responsible. Chakrapani has pointed out that the **vayu** has the quality to establish connection between the paramanus (cells) for the development of the human body and when disconnection occurs then destruction of the human body occurs.

### CONCLUSION

From the discussion we can make out that channels are present in every nook and corner of the body and they are responsible for carrying out functional activities of the human body. Ayurvedic researchers could make out the presence of srotas or channels 5000 years earlier by using their techniques. All the channels are governed by the flow of electric currents responsible for the development of the action potential without which none of the functional activities of the human body will take place.

**So at the end it can be concluded that srotas as Ayurveda has depicted in Ayurveda literatures are nothing but complex pathways or channels of the nervous system governed by **vayu** for carrying out the functional and physiological activities of the human body.**

## Nasya

Cleans and Lubricate both nostrils with oils of **Shadh Bindu, Til, Nariyal, Sarnso, Cow - Ghee** twice a day to check pollution effects of **Smoke & Smog**.

टाइप-2 डायबिटीज : भोजन में कटौती से बीमारी पर काबू पाना संभव, लैसैट जर्नल में शोध प्रकाशित

# 15 किलो वजन घटाकर मधुमेह से छुटकारा

**सेहत**  
लंदन | एजेंसी

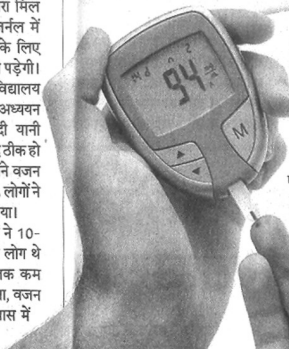
दस किलो तक वजन घटाने से टाइप 2 डायबिटीज बीमारी से छुटकारा मिल सकता है। यह शोध लैसैट जर्नल में प्रकाशित हुआ है। वजन घटाने के लिए आपको भोजन में कटौती करनी पड़ेगी।  
न्यूकैसल, ग्लासगो विश्वविद्यालय के शोधकर्ताओं द्वारा किए गए इस अध्ययन में शामिल हुए 45.6 फीसदी यानी तकरीबन आधे लोग सालभर बाद ठीक हो गए। यह सब वह लोग थे जिन्होंने वजन घटाया। ठीक होने वालों में 86% लोगों ने 15 किलो से अधिक वजन घटाया।  
इसके अलावा 57% लोगों ने 10-15 किलो तक और 34% ऐसे लोग थे जिनका वजन 5-10 किलो तक कम हुआ। प्रोफेसर रॉय टेलर ने बताया, वजन कम होने से लिवर और पैंक्रियास में मौजूद फैट भी कम हुआ।

45.6

फीसदी शोध में शामिल लोगों को मिला डायबिटीज से छुटकारा

15

किलोग्राम तक वजन घटाने वालों का प्रतिशत सबसे अधिक



## सात करोड़ वयस्कों को डायबिटीज

भारत में सात करोड़ वयस्कों और दुनिया भर में 42 करोड़ 50 लाख लोगों को डायबिटीज है। इसके साथ ही भारत में कुल जनसंख्या का 10.2 फीसदी लोगों को ग्लूकोस इंटोलरेंस है यानी 10.2 फीसदी लोगों को डायबिटीज होने का खतरा है। दुनिया भर में हर 11 में से एक वयस्क को डायबिटीज है।

## चार चीजें गलाएंगी चर्बी

### 1. दालचीनी

यह मसाला ब्लड शुगर को कोशिकाओं में पहुंचाने में मदद करता है। जिसका

इस्तेमाल ऊर्जा के तौर पर होता है। तो इस वजह से कम से कम चीनी शरीर में बचेगी। चीनी की मात्रा शरीर में एक बार कम हो जाती है तो वजन कम करना आसान होता है।



### 2. मिर्च

मिर्च में मौजूद कैप्सीकिन तत्व मिर्च

को तीखापन देता है। इससे मेटाबोलिक रेट भी बढ़ता है। मिर्च वजन को संतुलित रखने में मदद करती है। जब कैप्सीकिन को पचाया जाता है तो शरीर का तापमान बढ़ जाता है। इससे चयापचय में तेजी आती है और आप ज्यादा कैलोरी को जला सकते हैं।



### 3. अंडे का सफेद भाग

वजन घटाने की सोच रहे हैं तो अंडे का सफेद भाग भी आपकी इसमें मदद कर सकता है। अंडे के सफेद भाग में कोलेस्ट्रॉल कम पाया जाता है। सफेद भाग प्रोटीन से भरपूर होता है और यह फैट जलाने में मदद करता है।



### 4. मुर्गा और मछली

मछली और मुर्गा से हमें अधिक प्रोटीन मिलता है। प्रोटीन को पचाने में शरीर को मेहनत करनी पड़ती है। इससे अधिक कैलोरी जलेंगी और मोटापा कम होगा।



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To Check Cardiac, Respiratory, Skin, Mental & Harmonal Disorders.

### Cultivate

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**Medicinal Trees** - Neem, Mahaneem, Pipal, Arjun, Gulmohar, Amaltas, Ashok, Amrood, Bad etc.

**LESS EGO BETTER HEALTH**





**Dr. Renu**

B.A.M.S ( D.U), N.D.D.Y,  
P.G.D.H.A, M.H.P.D.C Harward; I.H.M.P  
Atlanta (U.S.A) M.D. (Ay.)

## **Randomised Controlled Study Of Herbal Formulation (Tab. Cardicare) & Basti Treatment In The Management Of Coronary Artery Disease (Hridroga)**

Looking into the present scenario of the cardiovascular diseases and the datas foreseen for the coming years ahead, the situation is very alarming. It is high time to seriously work on the subject and to prove the efficacy of certain Ayurvedic medicines on various scientific parameters which could be helpful to prevent or to reverse the disease process or pathogenesis of C.A.D. It is expected that ayurveda can offer a cost effective and dependable treatment modality for C.A.D.

My present research work entitled "**Randomised Controlled Study of a Herbal Formulation (Tab. Cardicare) and Basti Treatment in the Management of Coronary Artery Disease (Hridroga)**", aims to undertake Conceptual and clinical studies on Hridroga Vis-a Vis Coronary Artery Disease, on various scientific parameters and to clinically evaluate the efficacy of the proposed formulation (Cardicare) and Basti treatment in the management of Coronary Artery Disease.

The literature regarding Hridaya, Hridroga, its eatiology, pathogenesis, clinical features, are found at various places in Ayurvedic Samhitas. In our ancient age old Vedas also, the concept of Hridaya and its chikitsa were mentioned.

W.H.O. declared C.A.D./I.H.D. as "**Modern Epidemic**". When CAD emerged as the modern epidemic, it was a disease of the most affluent societies. Fifty years later, the situation has changed, there is a strong inverse relation between social

class and CAD in developed countries. In many developed countries, CAD still poses the largest public health problem.

Many scientific researches have been carried out on different Ayurvedic drugs for evaluating their efficacy in the managment of C.A.D. (Hridroga). **Tab Cardicare, which is a proposed formulation have Pushkarmoola, Hingu, Karpura, Yavakshara, Vidalavana, Shunthi, Kutha, Kutaki, as its ingredients.**

This formulation possess various pharmacoligical properties and actions like Deepna, Pachana, Vatanulomana, Srotoshdhana, Medohara, along with special effect at Dhatwagni level. Having these properties, Tab. Cardicare is likely to check/ reverse/ treat/delay the pathogenesis of Atherosclerosis which is the key factor for development of C.A.D. Therefore it was decided to evaluate the efficacy of A Herbal Formulation (Cardicare) and Basti as Ayurvedic therapy in the management of C.A.D. (Hridroga) in a series of patients.

For the present clinical trial, out of 35 registered clinically diagnosed and confirmed cases of C.A.D. (Hridroga), 30 cases were selected for full follow-up and randomly divided into following three groups.

**Group Ist :** 10 patients of C.A.D. (Hridroga), were recommended Tab. Dilzem 30mg TDS as Allopathic therapy for 30 days. (Control Group)

**Group IInd :** 10 patients of C.A.D. (Hridroga),

were recommended Tab. Cardicare in the dose of 2gm T.D.S. with lukewarm water as Ayurvedic therapy for 30 days.

**Group IIIrd :** 10 patients of C.A.D. (Hridroga), were recommended Tab. Cardicare 2gm. T.D.S. with lukewarm water for 30 days along with Basti treatment for 16 days.

The clinical studies on the present series of patients of C.A.D. (Hridroga) reveal that the majority of patients were of upper-middle age group of middle class Socio-Economic status with dominance of males. A significant preponderance of the incidence of C.A.D. (Hridroga) was seen in the patients of Vata-Kaphaja Prakriti with mainly in Rajasika and Tamasika manas prakriti.

All the patients selected for the present research work were observed for any improvement in their clinical manifestations after the therapy. Datas reveals that patients of C.A.D. (Hridroga) developed a growing feeling of well being, mental and physical fitness after the therapy in all the three groups.

It was observed that clinically there was comparatively highly significant improvement in various parameters in IInd & IIIrd groups after the therapy but Ist group showed significant improvement.

## **Results of Therapeutic Trial**

### **1. Subjective Improvement :**

Attempts were made to elicit the subjective improvement produced by the drugs under trial. Although there was marked improvement in the feeling of well being, physical and mental fitness in all the three groups but the incidence of improvement was higher in group III i.e. Basti therapy group moderate level of improvement was observed in group II i.e. Ayurvedic group and there was mild improvement in the patients of group I, i.e. Allopathic group.

### **2. Clinical Recovery according to C.C.V.S**

**Breathlessness** - Highly significant results were obtained in all the three groups ( $p < 0.001$  and  $p < 0.1005$ ), but on the basis of mean Percentage maximum results were seen in group II (75%), better results were seen in group III (72%) and group I also showed considerable improvement (45.45%), after the therapy.

**Chest Pain** - Highly significant results were observed in all the three groups ( $p < 0.001$ ) but on the basis of Mean percentage best results were seen in group III (71.42%), better results were in group II (70%) and fairly good results were in group I (52.63%).

**Palpitation** - Statistical analysis shows that there were highly significant improvement in group III (82.60%) & group II (73.68%) and there was significant improvement in group I i.e. (52.38%).

**Fatigue** - There was highly significant decrease in the feeling of fatigue in all the three groups ( $p < 0.001$ ) but on the basis of mean percentage best results were seen in group III (76.19%), better results were in group II (61.90%) and fairly good results were in group I i.e. (41.66%).

### **3. Clinical Recovery in Symptoms**

#### **Hriddrava (Palpitation)**

Highly significant decrease in **Hriddrava** in group III (73.00%),  $p < 0.001$ ) and significant decrease in group II (60%,  $p < 0.010$ ) and in group I (53.33%,  $p < 0.001$ ).

**Shulyate (Pain in chest)**- Highly significant results in all three groups, group III (78.43%,  $p < 0.001$ ), group II (70.59%,  $p < 0.001$ ) and group I (61.90.00%,  $p < 0.001$ ).

Jeernatyarth Vadana (Pain in chest after digestion) Highly significant decrease in group III (73.93%,  $p < 0.001$ ) and in group II (80%,  $p < 0.001$ ), but

significant recovery was found in Group I (50.19%,  $p < 0.02$ ).

**Veshthana (Cramps)** - Highly significant decrease in group II (50.00%,  $p < 0.05$ ) but insignificant in group I i.e. (28.57%,  $p < 0.2$ ).

**Hriddah (Burning sensation, retrosternal/epigastrium)**- Highly significant decrease in group II (67.00%) and group III (66.84%) ( $p < 0.001$ ).

**Aruchi (Anorexia)** - Highly significant decrease in group II (79.17%) insignificant in group III (77.78%), ( $p < 0.001$ ). but in group I (25.00%) significant.

#### **4. Observation of symptoms According to Tridosh (Mean %)**

**Bharika Hridaya (Heaviness in chest)** - Highly significant decrease in all the three groups, group III (76.41%,  $p < 0.001$ ), group II (73.33%,  $p < 0.001$ ) and group I (64.71%,  $p < 0.001$ ).

**Vatika Hridroa** recovery in group I were (48.49)%, in group II (65.14%) and in group III (72.63%).

**Paittika Hridroga** recovery in group I (25.00%) group II (67.00%) and group III (66.84%).

**Kaphaja Hridroga** recovery in group I were (43.46%) in group II (76.25%) and in group III (77.09%).

#### **5. Observation on various physiological changes :**

**Body weight**- Highly significant reduction in group III (4.10%,  $p < 0.001$ ) and significant in group II (2.93%,  $p < 0.010$ ).

**Pulse rate**- There was significant decrease in group III (0.67%,  $p < 0.05$ ).

**Respiratory Rate**- Insignificant ( $p < 0.2$ ) and ( $p < 0.5$ ) in all three groups.

**Systolic Blood Pressure (S.B.P.)** Highly significant reduction in group I (5.11%,  $p < 0.001$ ) and group III (3.03%,  $p < 0.001$ ). Group II also showed significant results (2.07%,  $p < 0.010$ .)

**Diastolic Blood pressure (D.B.P.)** - Highly significant reduction in group I (5.84%,  $p < 0.001$ ), in group II (1.66%,  $p < 0.050$ ) and group III (4.53%,  $p < 0.01$ ) moderately.

**Temperature** : No significant change in temperature noticed in all the three groups before and after the therapy ( $p < 0.2$  and  $< 0.1$ )

#### **6. Lipid Profile**

**Serum Cholesterol** - Highly significant decrease in group II (18.17%,  $p < 0.001$ ) & in group III (10.96%,  $p < 0.005$ ) insignificant decrease in group I (3.59%,  $p < 0.1$ ).

**V.L.D.L.**- Highly significant reduction in group II (18.17%,  $p < 0.001$ ) & group III (6.43%,  $p < 0.001$ ) but insignificant in group I (3.59%,  $p < 0.1$ ) treated with Dilzem.

**H.D.L.** - Highly significant improvement increase of group II (16.20%  $p < 0.001$ ) and group III (14.14%,  $p < 0.005$ ) no significant increase in group I, (2.53%  $p < 0.1$ ) treated with Tab. Dilzem after the therapy.

**L.D.L.**- Highly significant reduction in group II (33.05%,  $p < 0.001$ ) & in group III (23.15%,  $p < 0.005$ ) where as insignificant decrease of group I (6.79%,  $p < 0.1$ ).

#### **7. E.C.G Changes**

**Findings in Bipolar Limb Leads** - In E.C.G. cardiac ischaemia is shown in the form of ST- and T-presence. There were significant isoelectric or near to isoelectric level changes i.e. there was statistically significant correction of ischaemia of heart muscles indicating an increased blood supply to cardiac muscles which is shown as correction

in E.C.G. in the form of return to normal pattern of E.C.G. In group II (87.50%,  $p<0.01$ ) & in group III (81.81%,  $p<0.01$ ), but findings were less significant in group I (66.66%,  $p<0.05$ ) after treatment with respective drugs.

**Findings in Augmented Leads** - That there were significant isoelectric or near to isoelectric level changes in ST segment in all the three groups but best results were achieved in group II (70.00%,  $p<0.05$ ), better results in group III (66.66%,  $p<0.02$ ) and least results in group I (27.27%,  $p<0.05$ ) were observed after the therapy. As stated earlier, return of E.C.G. towards isoelectric changes means return of E.C.G. pattern towards normal side.

**Findings in Precordial Leads** - It was observed that there were significant isoelectric or near to isoelectric level changes in ST segment in all the three groups. Results were highly significant in group I (69.56%,  $p<0.001$ ), significant results in group II (85.00%,  $p<0.02$ ) and group III (80.00%,  $p<0.02$ ), which confirms the coronary vasodilator effect of Dilzem, Tab.Cardicare, and Bastitreatment.

#### **8. Computerized Treadmill Test (C.T.M.T.) Observations:**

As mentioned earlier for the present clinical study, 30 clinically diagnosed and confirmed cases of CAD. were registered. C.T.M.T. was done before treatment to confirm the diagnosis. After treatment of 30 days, all the patients were again advised C.T.M.T.

Various observations are computed on the basis of statistical data available and are summarized in Table 38,39,40 and Figure 38, 39, 40.

**Exercise time in minutes** - Highly significant increase in exercise time in all the three Groups. It was maximum in Group III (25.33%  $p<0.01$ ), and significant in Group I ~ (20.91%,  $p<0.010$ ) and in Group II (14.13%,  $p<0.050$ ).

**Maximum ST changes in mm.** - It was observed-- that there was significant isoelectric or near to isoelectric level changes in ST segment. It was maximum in Group III (65.00%,  $p<0.01$ ), then in Group I (46.03%,  $p<0.01$ ) and in Group II (15.46%,  $p<0.01$ ).

**Percentage Target Heart Rate (P.T.H.R.)** - Percentage Target Heart Rate was calculated in each patient by the formula " $220 - \text{Age} = \text{THR}$ ." 85% of P.T.H.R. should be achieved by individual during exercise and it was considered the criteria for evaluation of Percentage Target Heart Rate.

It was observed that after trial in 1st group only 5 patients out of 10 patients, were able to achieve the P.T.H.R. (before treatment 2 patients were able to achieve the P.T.H.R.), in 2nd group 7 patients out of 10 patients, were able to achieve the P.T.H.R. (before treatment 3 patients were able to achieve the P.T.H.R.), in 3rd group 8 patients out of 10 patients, were able to achieve the P.T.H.R. (before treatment only 2 patients were able to achieve the P.T.H.R.).

Thus the above observations clearly indicate that there was maximum percentage improvement in achieving the Percentage Target Heart Rate (P.T.H.R.) in group III (45.52%), moderate improvement in achieving the P.T.H.R. in group II (32.56%) and there was mild improvement in achieving the P.T.H.R. in group I (21.23%).

Correction of ST changes (reversal of ST wave, which is inverted in cases of cardiac ischaemia), significant increase in exercise time in mins, achieving the Percentage Target Heart Rate (P.T.H.R.) significantly confirm that modern drug Dilzem and the Ayurvedic drug - Tab.Cardicare, and Basti Tt. used in present clinical trial seems to have coronary vasodilatory effect or it may be said that the contents of **Tab. Cardicare and Basti**, may correct the ischaemic condition of cardiac muscles significantly & successfully.



## Re-Thoughts

1. Science without religion is lame & religion without science is blind - **Albert Einstein**
2. Innovation distinguishes between a leader & a follower - **Steve Jobs**
3. Nothing great in the world has been accomplished without passion- **Donald Trump**
4. If you don't have confidence you will always find a way not to win - **Carl Lewis**
5. Happiness is the highest level of success- **Dr. J.P.S. Chauhan**

## जरा विचारें

1. झूठ इसलिये बिक जाता है क्योंकि सच को खरीदने की हमारी सामर्थ नहीं— अज्ञात
2. सफलता की खाद है असफलता है,  
अर्थात् धैर्य रखे — स्वामी सुखबोधानंद
3. सागर के किनारे खड़े रहने से वह पार नहीं होता  
अर्थात् प्रयास और परिश्रम करने पड़ेगें—अज्ञात
4. सफल वही होगा जो शान्ति से दूसरों की आलोचना  
सहकर मजबूत बने — दत्तात्रेय
5. ताला (समस्या) बड़ी हो पर चाबी (हल) हमेशा छोटा  
होता है अर्थात् परामर्श लेते रहें — अज्ञात

## HERBAL MEDICINE HERITAGE

### FALGU

Hindi - Anjeer

English - Common Fig

Latin - Ficus Cariacalinn

**Description** - Tree Ht- 15-20 feet; **Leaves** - Similar of pipal's broad & round with 3-5 veins on dark green upper surface with hairs on under surface. **Fruits** - Round odoomber like black red when rippened but when dried sold in garlands.

Found in Punjab, U.P., Karnatka more in Maharastra

**Chemical Composition** - Fresh fruit is sweet highly nutritious

Carbohydrates - 17.1%, Proteins - 1.3%, Minerals - 0.6%, Iron - 1.2mg, Carotene - 0.6%, Phosphorous 0.03%, Sugar- 13-20%, but while dry 42-62%.

#### Ayurvedic Features

**Gunn**- Guru & Snigdha

**Vipaak**- Madhur

**Rass**- Madhur

**Veerya**- Sheet

#### Clinical Therapeutics

1. It is **Vaat Pitt** shamak,
2. For chronic constipation, **arsh** (piles, hemorrhoids).
3. In cases of **Kaas-Shwaas** i.e. upper and lower respiratory infections.
4. In **Kaamla** i.e. jaundice, hepatomegaly & splenomegaly.
5. As **Diuretic** in dysuria, renal colic, renal stone.
6. In **Skin** disorders i.e. urticaria, boils.
7. In **rheumatic** cases as anti inflammatory, analgesic, locally as hot poultice.
8. During **fevers** as supplement & tonic.
9. It is a wonderful **vajikaran** (aphrodisiac).
10. Precisely it is **antipyretic, antiviral, antibacterial, anti-oxident & cancer suppressant**.

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**Horn** कम मानसिक रोग भी कम

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In Calcium & Vitamin D3 deficiency associated with



Joint pain



Low back pain



Muscle pain



Diabetes



Hypothyroidism



Fatigue

Dosage:  
1-2 tablets  
daily



Optimum  
dose of  
Vitamin D3  
1000 IU/Tab

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Combination of Phyllanthus niruri, Ricinus communis, Eclipta alba, Curcuma longa and other proven **Hepato Protectors**

Co-R<sub>x</sub>

# Clearliv

Clear  
Detox

*Liver*

## Hepato Protector

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