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Medicine Reorientation

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हर्दी



Editor's Desk

Dear Doctor

This issue incidently contains interesting write-ups related to present day life-style disorders.

Role of **Bhallatak Guggul** in soothing, successful management of painful crippling disease **Aamvat** (Rheumatoid Arthritis); systematic approach in correcting and controlling various **Life-Style** disorders by ayurvedic principles; mother of ailments **Sthoulaya** (over weight/obesity) controlled by ancient doctrine; satisfactory clinical evaluation of **Pushkaraadi-Guggul** for checking **Vatik Hridayarog** (Angina); **Prakritic Chikitsa** (Naturopathy) for **Vatik Rog** (joints pain) enhancing quality of life simultateously.

Age old friendly diet & drug **Haridra** (turmeric) for all reasons & seasons with its **Kanak** (golden) benefits.

Thanks.

With Regards

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

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भगवान् श्री धनवन्तरी जी



'HARDIK BADHAI'
2nd Anniversary

Ayurved Day

on

DHANVANTRI DIVAS



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&

AYURVEDIC PHYSICIANS

Happy Deepawli



Chintan!

AMBASSADORS OF HEALTHY ENVIRONMENT

Dear Doctor,

Today growing environmental pollution is a matter of serious concern worldwide. Contributors are not only developing countries but equally are developed ones.

Rapid urbanization, increased vehicular traffic, festivals celebrations, technological advances, warfares and above all ignorance towards natural habitations are some of the prominent causes.

Earth (Prithvi), Water (Jal), Light (Tej), Air (Vayu) & Sky (Akash) are highly vulnerable and at stake. These five elements (Panch Mahabhutas) are getting polluted causing physical & mental ailments with enormous uncontrollable economic as well as efficiency expenditure.

Once the great ancient Vedantik (Spiritual) scholar forecasted in his popular Manu-Smriti that when there would be more of Vigyan (Science) there would be more of Vinash (Destruction) which is truly relevant today.

But a balanced solution is needed for environment friendly overall development.

Ayurvedic medical science along with Yog and Naturopathy has the right answer to check pollution & its effects.

Lets do Chintan in brief.

- 1. Ayurvedic doctors higher the educated are expected to deliver more as pioneers and ambassadors for control and cure of ailing healthy environment.*
- 2. Introducing the principles of Swasthvir (Preventive Medicine) to patients by preaching and sharing printing materials.*
- 3. Spreading awareness and benefits of various therapies like Hydrotherapy (Boiled water mixed with herbs), Nasal therapy (Nasya), Body massage (Abhayang) with medicated oils, regular use of Dravyas (Herbs), Aroma therapy (Sugandhit), Detoxification therapy (Panch karma), Pranayam, Meditations and Yogic asanas to enhance the endurance & vital capacity to fight pollution effects.*
- 4. Advise for vegetations, forestation of medicinal plants & trees, water conservation, rain harvesting etc. on special occasions like birthdays, anniversaries etc.*
- 5. Advocacy of Satvik, Sattvik seasonal nutritious Ahaar along with pleasant Vihar with do's & don'ts of Asatmik (Incompatible food with habits)*
- 6. Regular use of some of the herbs as Rasayans (Tonics, Restoratives) to raise body immunity.*
- 7. Conducting small or large scale Havans (Fumigations) with purifying herbs like gugglu, chandan, camphor, lobhan etc. and musical concerts of instruments e.g shunkh, bansuri etc.*



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Role of Bhallatak Guggulu in Amavata : A Clinical Study

ABSTRACT:-

Background and objectives:-Amavata (Rheumatoid arthritis) is a crippling disorder in the society today. In Ayurveda many approaches are in practice to treat Amavata but still it is challenging. Ayurveda considers **ama** as the root cause of disease **amavata**. **Design:** Double blind randomized interventional trial. **Participants:** - age group of 20-60 yrs. **Method:** -60 patients were selected from OPD and IPD of A & U Tibbia college and hospital, Delhi. They were randomly divided in two groups. **Bhallatakadi Churna** with gud in **Group A** and **Bhallatak guggulu** in **Group B** administered for three months of duration with follow up at every fifteen days. **Outcome measures:-** The assessment of efficacy of drug was made through scoring of clinical features and Laboratory parameters i.e. RA factor, ASO titre. **Results :** - Present study reflects that both regimes have given very good relief in sign and symptoms of Amavat, but in group B patients showed faster and better improvement. **Conclusion:- Bhallatak Guggulu is safe, beneficial and very effective in management of Amavata (Rheumatoid arthritis).**

Key Words:-Ama, Amavata, Ayurveda, Bhallatakadi Churna, Bhallatak guggulu, Gud, Rheumatoid Arthritis.

Introduction:-

Amavata is chronic systemic disease having

painful multiple joints involvement. In Ayurveda **Madhavakar** (700AD) mentioned first the Amavata as a special disease entity and where **ama** as well as **vata** plays a predominant role in the **samprapti** (pathogenesis) of the disease Rheumatoid arthritis is a chronic, progressive autoimmune arthropathy characterised by bilateral symmetrical involvement of joints with some systemic clinical manifestations.

Ayurveda is an ancient scientific medical knowledge in the world. So many Ayurvedic medicines had been described in Ayurveda for the treatment of **Amavata** (Rheumatoid arthritis). Amavata is a gruesome problem in the society in modern era.

Ayurveda considers ama as the root cause of disease amavata. Ama is a mucoid, slimy substance caused due to the malfunctioning of digestive and metabolic mechanisms. This ama is detrimental to srotas (body channels) due to its clogging capacity. While circulating in body along with vata it produces this agonising disease called amavata, which is very difficult to treat, and if not treated, leads to angavaikalya (deformities).

The prevalence rate of this disease is about 3% with a male to female ratio of 1:3. It occurs throughout the world in all climates and ethnic groups.

The conceptual study on rheumatoid arthritis and amavata revealed that there is striking similarities between etiopathogenesis of RA and amavata,

and it was found that basic pathology in RA is **microvascular injury caused by inflammatory mediators, especially in synovium which is nothing but srotavarodha and srotobhisyanda caused by ama in dhamanis of sleshma sthana specially sleshma dharana kala of joints.**

Several dreadful diseases are prevalent in medical science. The scope for therapeutic measures is limited even after extreme advancement of the modern biomedical science. The rheumatological disorder is a group of diseases that has no specific medical management in any type of therapeutics. In spite of the description of multiple drug therapy on Amavata in different classics of Ayurveda, potential and durable results are not found due to non-removal of the basic cause. Hence, special emphasis should be put into searching for a standard and suitable drug for Amavata.

In ancient literature of Ayurveda specially in **Vrihatrayi**, various measures and medicinal preparations are described for treating articular diseases. The disease amavata is described elaborately for the first time by **Madhav** in seventh century only. **Chakradutta** has not only outlined the chikitsa siddhanta for the disease amavata for the first time but has also described several preparations for treating it. Hence, Ayurvedic medicine i.e. **Bhallatak guggulu & yoga** has been selected from **Yogaratanak** for clinical evaluation on the management of Amavata (Rheumatoid arthritis).

The trial drug Bhallatak guggulu, yoga consists of four herbs i.e. Bhallatak, Guggulu, Haritaki and Krishna Tila. These herbs are not only excellent in doing deepana, pachana functions but also comprising vyadhi nashak guna.

These drugs also have anti-inflammatory, immune modulatory, anti-oxidant, anti-arthritic and cartilage protective activity.

In Ayurveda many approaches are in practice to treat

amavata but still it remains a challenging problem. Hence, the study is planned for better management of Amavata patients with enhanced quality of life.

Aims and Objectives

The present research trial has been undertaken with the following objective.

- To validate Ayurvedic concept of rheumatology on scientific lines
- To evaluate efficacy of Bhallatak Guggulu Yoga in the management of Amavata.
- To develop safe and cost effective Ayurvedic drug for Rheumatoid arthritis.

Material and method-

A. Selection of cases: - Total 60 cases divided into two groups equally.

Group A-This group of 30 patients were given **Bhallatakadi churna** with gud

Group B-This group of 30 patients were given **Bhallatak Guggulu**.

The drug for group A was given in dose of 2.5gm twice a day while Bhallatak guggul was given in the dose of 500mg TDS in group B.

B. Source:— Patients for the present study were screened out from the O.P.D. and I.P.D. of Kayachikitsa Department of A & U Tibbia College and Hospital, Karol Bagh, New Delhi.

C. Age Group:— between 20-60 years.

D. Study design:— Double blind randomised interventional clinical trial (study).

E. Inclusive criteria-

1. Age—20-60 years
2. Patients of Amavata (Rheumatoid Arthritis)

fulfilling the criteria of Clinical symptoms of Amavata mentioned in Ayurvedic classics.

3. Patient consented to participate in the study and ready to follow the instruction during three months.

F. Exclusive Criteria.

1. Age below 20 and above 60.
2. All complicated cases having any advanced deformity of rheumatoid arthritis.
3. Having cardiac diseases, pulmonary tuberculosis and pregnant woman.

4. Pittaja prakrati and summer season

Criteria for assessment:

1 Subjective criteria:

The results of therapy were assessed on the basis of clinical features of Amavata, mentioned in Ayurvedic classic. The scoring pattern adopted for assessment of clinical features is as follows:

DISCUSSION

Maximum number of patients belonged to the age group of **41-50 years**, which shows its predominance in the **middle age** group. This data is slightly in accordance with the modern findings, that the onset is most frequent during the fourth and fifth decades of life with **80%** of all patients developing disease between the age of **35-50 years**. In this study, **majority** of the patients were **female** as compared to male. Textual references also reflect the predominance of rheumatoid arthritis in females. In this study, most of the patients had impaired agni, with **55 patients (91.67%)** exhibiting mandagni, this mandagni leads to formation of ama (basis pathological unit) and mandagni also leads to mooda vata (impair anuloman of vata). Among **60 patients**, **58 (96.67%)** patients exhibiting constipated bowel because mandagni decrease the force and action of saman vayu and apana

vayu. In this study, 17 patients (28.33%) had krura kostha, 61.67% had madhyam kostha, confirming dominance of either vata or kapha or both at kostha level in Amavata patients. These data also support the etiology of Amavata, mentioned in classics. **Bhallatakadi churna** comprises of Haritaki, Bhallatak, Tila and Guda. Haritaki having properties like amapachan, sroto vibandhanashaka and dosha anulomana. Bhallataka having tikshna and ushna guna, anuloman, deepan, pachan properties helps in stimulating jatharagni. Krishna Til causing agnipustikrit and kaphapitta nashak properties which are antagonistic to Ama and is very much required in the conditions like Amavata. Gud having properties like anabhashandi and agnipushtikrita helps in ameliorating the symptoms of Amavata. Also in group B (Bhallataka guggul), guggul is having sukshma, tikshna and sara properties which is sufficient for the deep penetration of both the srotas resulting in pacifying the symptoms of Amavata and also play an important role in breaking the pathogenesis of disease Amavata.

CONCLUSION

Lastly, it can be concluded that Amavata looks similar to Rheumatoid Arthritis in its clinical appearance. Bhallatak Guggulu Yoga mentioned in Yogaratnakar showed a substantial relief in all parameters whether subjective or clinical of the Amavata supporting its anti-inflammatory and anti arthritic action. Present study reflects that both regimens-Bhallatakadi churna with gud and Bhallatak guggulu, have given very good relief in signs and symptoms of Amavata, but in group B who received Bhallatak Guggulu showed faster and better improvement.

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Cancer caution: what you should know

If diagnosed and treated in time, chances of cure are better

LOCALLY ADVANCED BREAST CANCER (LABC)

- Breast cancer is the most common form of cancer among women
- LABC is an invasive cancer with one or more of the following features: Large tumor (typically bigger than 5cm); spread to several lymph nodes in the armpit or other areas near the breast; spread to other tissues around the breast such as skin or ribs; not spread beyond the breast

WARNING SIGNS FOR LOCALLY ADVANCED BREAST CANCER (LABC)

- Thickened and dimpled skin
- Ulcers on the skin of the breast
- A lump that feels attached to the chest wall
- Red, swollen breast
- A lump in the armpit that doesn't move freely away from the chest wall
- A lump at the base of the neck

61% of breast cancer cases in India

5 WAYS TO LOWER RISK

Get Screened:

Women diagnosed with breast cancer at an early stage have a nine in 10 chance of recovery.

Lose weight:

Research has shown that obesity may raise the risk of breast cancer after menopause.

Drink less, avoid fatty foods:

Daily alcohol intake has been shown to raise risk of breast cancer by 6%

Walk:

Three studies in the Italy and the US showed a co-relation between inactivity and breast cancer

No hormone replacement therapy:

It makes women 63% more vulnerable to some forms of cancer

An Awnla A Day Keeps Ailments Away

अपील

D.B.C. P चुनाव 2017

चिकित्सक बंधुओं,

दिल्ली भारतीय चिकित्सा परिषद के चुनाव निकट भविष्य में होंगे। पहले की तरह इस बार भी डाक द्वारा मतदान होगा। बड़ी विचित्र बात है कि इतने बड़े हमारे देश में जहाँ प्रायः चुनाव प्रजातंत्र विधि द्वारा होते हैं चाहे ग्राम पंचायत हो, विधानसभा या लोकसभा। यहाँ तक कि दूसरी चिकित्सक परिषदों में भी प्रजातंत्र विधि से एक ही दिन व एक ही स्थान पर चुनाव होते हैं पर हमारे यहाँ नहीं।

आश्चर्य की बात है कि D.B.C.P. में आजतक न ही सरकारी अधिकारी और न ही गत नियुक्त पदाधिकारी इस चुनाव नीति में सुधार और गुणवत्ता ला पाए हैं। डाक द्वारा भेजे वोटों की प्रायः खींचातानी की लूट देखी जाती है।

आप से अपील है कि विचार करें कि—

1. हम शिक्षित व बुद्धिजीवी समुदाय से हैं और हमारे प्रतिनिधि चाहे D.B.C.P. या C.C.I.M चुनाव हो वे हमारे समाज का दर्पण हैं सो वोट देने से पहले समुदाय, जाति एवं गुट से ऊपर उठकर उचित उम्मीदवार चुनें।
2. चुनाव के दौरान उम्मीदवारों से आश्वस्त हों कि उनका I.S.M के चिकित्सकों के लिए क्या घोषणा पत्र है। तभी पसंदीदा उम्मीदवार के नाम के आगे चिन्ह लगाएं।
3. अपना वोट खाली (Blank Ballot Paper) किसी को न दें। स्वयं इसे वापिस डाक (Post) में डालें।

अपने समाज में सुधार और सामाजिक सम्मान कि जिम्मेदारी हमारी है



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AYURVEDIC APPROACH FOR A HEALTHY LIFE STYLE

ABSTRACT

W.H.O has declared 21st century as the century of life style disorders. In this aspect, Ayurveda is the only system in the world that provides better management in order to live a healthy life. Now world has realized that **Pathya-Apathya** (dietary guidelines), **Dincharya** and **Ritucharya** (daily and seasonal regimen), code of conduct etc. mentioned in Ayurvedic classics are very essential to live a healthy life.

In spite of advancements in the field of Science and technology, certain new health hazards emerge as a challenge. Ayurveda can contribute a lot in many such disorders. As it destroys cause of disease, the chances of recurrence are very rare. It acts slowly but removes the cause by its roots. Ayurveda not only cures disease but also promote a healthy life for a healthy individual. Ayurveda is the knowledge of science which ensures health and longevity.

Key words: Dincharya, Ritucharya, Pathya, Apathya

INTRODUCTION:

Ayurveda, derives from the Sanskrit words **Ayus** (life) and **Veda** (knowledge) is the most ancient system of traditional medicine of the world. It has been practiced in Indian peninsula since 5000 BC to offer natural ways to treat diseases. Non-toxic herbal remote healthcare and is gaining acceptance

in many countries. It is a comprehensive and a holistic system. The focus is on the body, mind and soul. This paper reviews on different aspects of development of Ayurveda. .

The basic principle in the Ayurvedic system of medicine is **Swasthyashya Swasthya Rakshanam**, which means to maintain the health of the healthy, rather than **Aturashya Vikara Prashamanancha**, means to cure the diseases of the diseased. For this purpose the **Dinacharya** (daily regimen) and **Ritucharya** (seasonal regimen) have been mentioned in the classics of Ayurveda.

AYURVEDIC VIEW:

With the change in season, environment. We see various changes in bio-life around us, such as flowering in spring, leaf-shedding in autumn in the plants, hibernation of many animals with the coming of winter and so on. As human being is also part of the same ecology the body is greatly influenced by external environment. Many of the exogenous and endogenous rhythm have specific phase relationship with each other which means that they interact and synchronize each other. If body is unable to adopt itself to stressors due to changes in specific traits of seasons it may lead to **Dosha Vaishamya**, which in turn may render the body highly susceptible to one or other kinds of disorders.

Ayurvedic treatment consists of use of herbal preparations, diet, yoga, meditation etc. Many

herbs used by Ayurvedic practitioners show great effect and could be used for larger randomized trials. Yoga, an integral part of Ayurveda, has been shown to be useful to patients with heart disease and hypertension. It promotes well-being and improves quality of life.

Ayurvēda has very holistic and scientific approach in planning the diet. It deals with the fundamental principles like pathya, apathy, tridōṣa, prakṛti, the quality, quantity, and the rules regarding eating food etc. if considered while incorporating the diet one can keep away from many diseases of body and mind.

Most health problems develop due to the inappropriate eating habits and cooking methods. The diet planning mentioned in our classical literature is based on certain principles. Lot of importance is given to the diet with regard to its processing, quality, quantity and so on. Due consideration is given to the atmosphere, psychological condition, status of health, digestion etc. of the person while dealing with this issue.

The diet should also be planned according to the age, season, habitat and the preference of the person. The proper intake of diet not only can prevent many disorders but plays major role in the management of diseases.

DINCHARYA (DAILY REGIMEN): 4

The Ayurvedic regimen of right living is designed for maintenance of health achievement of a long, healthy active life, providing relief from pain and disease thereby achieving satisfactory enjoyment of life and attainment of self-realisation.

1. Time to wake up- It is advisable to wake up during **Brahma muhurta** (starting from 4 a.m.)

2. Cleansing of teeth and mouth- Cleansing of teeth and mouth should be practiced after every meal in addition to early morning and before going to bed. The soft brushes made out of twigs of Khadira,

Karajja, Nimba, Arka, Apamarga, etc. should be used for this purpose. Tongue and mouth should be cleaned by a long flexible strip of metal or plant material.

3. Drinking Water- Drinking water early in the morning according to one's capacity cleanses the body by the elimination of toxic wastes.

4. Bowels- One should attend the nature's calls. Elimination of urine and faeces cleanse the body and cheers up the mind. Ayurveda denies the suppression of natural urges, which may further lead to disease.

5. Eye Care- Eyes should be cleaned with fresh water. To prevent eye diseases and promote vision, washing of eyes with **Triphala water** is also advised in classic literature of Ayurveda. It helps in proper functioning of eyes.

6. Betel Chewing- Chewing of betel leaves with small pieces of Puga (Areca nut) and fragrant substances like **cardamom, cloves**, refreshes the mouth.

7. Abhyaga (Oil Massage)- It is highly beneficial to massage of whole body including scalp with oil everyday to prevent dryness of body and opening skin pores. For massaging, **Tila taila** (Sesame oil), **Sasarp taila** (mustard oil), **Narikela taila** (coconut oil) or any medicated oils like **Narayana taila, Bala taila** may be used.

Oil massage ensures softness and unctuousness of skin, free movement of joints and muscles; provides nourishment, improves blood circulation and eliminates metabolic wastes.

8. Exercise- Regular exercise builds up stamina and resistance against disease, clears the **Srotas** of body (Channels) and increases the peripheral circulation and efficiency of vital organs, promotes appetite and digestion.

9. Bath- Bathing improves enthusiasm, strength,

appetite, span of life and removes impurities from the body. After bath, one should wear clean clothes and smear the body with natural perfumes. One should have regular shaving, hair cut, clipping of nails etc.

10. Marital Life - Person should avoid extra marital sexual relationship and sexual intercourse with a woman during her menses, pregnancy, within one and half month after delivery, devoid of passion, older than one and suffering from disease to prevent **Dhatu kshaya**.

RITUCHARYA (SEASONAL REGIMEN):

Seasonal changes bring about diseases and they may be prevented by adopting certain seasonal regimen. According to Ayurveda seasonal variations can have an impact on the elements of your body. Each **dosa** has an active season and by listening to the rhythm of the nature and making changes in your life style, it will help you to balance your constitution. **Ritucharya** maintains the climatic homologation in form of **Dosa samya** (equilibrium) in different seasons to promote **Swassthvrutha** (preventive & social medicine) on which Ayurveda has laid a great stress since prevention is better than cure.

The word **Ritu** means “ to go”.It is the form in which nature expresses itself in a sequence in particular and specific in present forms in short,seasons 6. Tasyashitya chapter of Charaka Samhita, it is said "**Tasya Shitadiya Ahaarbalam Varnascha Vardhate. Tasyartusatmayam Vaditam Chestaharvyapasrayam,**" which means 'the strength and complexion of the person knowing the suitable diet and regimen for every season practicing accordingly are enhanced.

KAAL (YEAR) & SEASONS:

According to Ayurveda, Year is divided into Six **ritus** (seasons). Each ritu is two months long. Every year (kaal) contains three ritus according to the position of the sun:

- (1) **Aadaan kaal** (Uttarayana):Means taking away
- (2) **Visarga kaal** (Dakshinayana):Means giving.

The six ritus and their properties can be summarized in the following table:

Kaal (Year)	Ritu (Season)	Maas (Month)	Properties of the season
Aadaan (Uttarayana)	Sishira	Magha and Phalguna (mid January to mid march)	Cold and dewy season
	Vasanta	Chaitra and Baisakh (mid March to mid May)	Spring season
	(Grishma)	Jyeshtha and Aashadha (mid May to mid July)	Summer season
Visarga (Dakshinayana)	Varsha	Shravan and Bhadrapada (mid July to mid September)	Rainy season
	Sharad	Aashvin and kartik season(mid september to mid november)	Autumn season
	Hemant	Margshirsha and Pausha (mid November to mid January)	Winter season

The environmental factors include the nature of the land, water, various atmospheric phenomena, including temperature, humidity, wind, rain, clouds, and atmospheric pressure. All these environmental factors undergo a continuous change and at a time, no two moments are exactly alike in a given place. Thus with the rising Sun the temperature keeps on rising and gradually drops at night. The maximum and minimum temperature fluctuates daily but it is highest in summer and lowest in winter. Similarly, all these factors show diurnal as well as seasonal variations and these variations for a particular time are known as season.

DISCUSSION:

A study on animals with seasonal changes revealed the effects of photoperiod on immune function and hormone synthesis which influence the development of opportunistic disease.

Another study indicated that free-living species from many regions can seasonally modulate glucocorticoid release. In other words, the magnitudes of both unstressed and stressed glucocorticoid concentrations change depending on the time of the year.

A human clinical study was carried out by Mallika et al. to assess the biophysical and biochemical changes occurring due to **Ritusandhi**. Clinical study shows provocation of **Tridosha** with the dominance of **Vata** and **Kapha** provocation. In this study during **Ritusandhi** frequently, **Jwara**, **Pratishyaya**, and **Alasya Lakshnas** were met with. In **Agnibala** also although remarkable changes are seen, they are not up to pathologic mark.

Regarding the biochemical changes, there is a varied pattern-sometimes increasing and decreasing, but all these are within the range of normal variations. The variation in biochemical values are seen but not remarkable.

One study carried out by Jangid et al. on the concept of **Ritus** and their effect on **Bala** reported that the

overall effect of **Hemanta Ritu** on **Bala** of healthy volunteers was maximum, effect of **Vasanta Ritu** was moderate and the effect of **Varsha Ritu** was minimum, and concluded that **Hemanta** is the Ritu of **Pravara Bala**, **Vasanta** is the Ritu of **Madhyama Bala** and **Varsha** is the Ritu of **Avara Bala**. Results of the study support the principles of Ayurveda.

In Ayurveda, the knowledge of **Ritucharya** is a first hand guide to the concept of **Kriya-Kala**, which describes the modes and stages of the development of diseases, with regard to the state of different **Doshas-Vatu**, **Pitta**, and **Kapha** in accordance with the changes of time. A good understanding of it is very much essential for early diagnosis and prognosis for adopting preventive and curative measures.

It is to be known that disharmony in the **Doshas-Vatu**, **Pitta**, and **Kapha** results in **Roga** (disease). And aim of the science of Ayurveda is to maintain the harmony. With changes in diet and lifestyle, there are changes in the state of **Tridosha**, which is bound to affect us, resulting **disharmony**, causing lifestyle diseases. **Ritu** acts as **Vyanjaka** or **Nimittakarana** in the aggravation and manifestation of disease. For example, an evening (afternoon) headache is essentially with **Vata** predominance. Diseases due to **Vata** show a tendency to aggravate during the rainy season.

It has been observed that there is an increased occurrence of flu, dry skin in winter, heat stroke in summer, pollen allergy in spring, high incidence of air and water borne diseases in rainy season, and skin diseases in autumn. Thus it can be said that physiology vindicates the concept of **Ritucharya**.

Studies have even revealed the increased incidence of **Asthma** attack in winter season. There is also a reference of **Seasonal Affective Disorder** in modern science.

Peoples' diet changed substantially in the second half of 20 th century, generally with increased consumption of meat, dairy products, vegetable

oils, fruit juice, and alcoholic beverages, and decreased consumption of starchy staple foods, such as bread, potatoes, rice, and maize flour. These observations suggest that the diets [or lifestyle] of different populations might partly determine the rates of cancer, and other lifestyle disorders, such as obesity, diabetes, cardiovascular diseases, etc.

In 1900, the top three causes of death in the United States were pneumonia/influenza, tuberculosis, and diarrhea/enteritis. Communicable diseases accounted for about 60% of all deaths. In 1900, heart disease and cancer were ranked number 4 and 8, respectively. Since the 1940s, the majority of deaths in the United States have resulted from heart disease, cancer, and other degenerative diseases. And, by the late 1990s, degenerative diseases accounted for more than 60% of all deaths.

India already declared the diabetes capital of the world, India now appears headed towards gaining another dubious distinction of becoming the lifestyle-related disease capital as well. A study conducted jointly by the All India Institute of Medical Sciences and Max Hospital shows that the incidence of hypertension, obesity, and heart disease increasing at an alarming rate, especially among the young, urban population.

CONCLUSION:

Doctors however say a strict diet and regular exercise along with cholesterol controlling drugs can go a long way in checking lifestyle diseases. But with the knowledge of Ritucharya we can surely avoid these by practicing regimen in accordance with the Ritu to maintain the harmony of the Tridosha and to stay healthy ever. Growing public awareness, with the support of the government and corporate wellness programs may help arrest the rapid increase in the incidence of such diseases, saving lives and crores of rupees in costs.

With global warming and variation in the advent of season, it can surely be a query, of the importance of Ritucharya in the present scenario. It is to be understood that the background on which Ritucharya is based, that is, Dosha and Panchamahabhuta theory.

Although today Ritus do not follow uniformity, the level of Dosha and Panchamahabhuta can be analyzed accordingly to decide the regimen, to which this knowledge of Ayurveda holds as a pathfinder. These principles surely demand a closer observation for clarity.

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**.

जरा विचारें

1. संगत में शुद्ध विचार, पंगत में शुद्ध आहार न हो तो संगत और पंगत दोनों छोड़ देने में ही बुद्धिमानी है। डॉ. मदन सिंह
2. बहुत गजब का नजारा है इस अजीब दुनिया का सब कुछ बटोरने में लगे हैं, खाली हाथ जाने को। डॉ. हरीश
3. किसी ने अपनी परछाई से पूछा तुम चलती हो, मेरे साथ उसने हंस कर जवाब दिया, और कौन है तुम्हारे साथ ? डॉ. हरीश
4. सांप, शेर, कुत्ता और मुख्र इसांन, इन्हें जगाओ मत कभी, कहते चतुर सुजान। अज्ञात

For Free Expert Opinion

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STHOULYA (OBESITY) AND MANAGEMENT IN AYURVEDA

Introduction-

Now a days mostly people are in mental and physical stress due to lifestyle, dietary habits resulting in many diseases like diabetes mellitus, hypertension, osteoarthritis, cardiac diseases, obesity etc. Among these, obesity is a major health hazard and detrimental to well being reflected in increased morbidity and mortality. **Obesity** may be defined as an abnormal growth of the adipose tissue due to an enlargement of fat cell size or an increase in fat cell number or a combination of both. **Obesity** is often expressed in terms of body mass index (BMI). BMI is a person's weight in kilograms divided by the square of height in meters expressed as $BMI = \text{Body Mass (weight in kg)} / \text{Height in meters}$. BMI of **30** or more in males and **28.6** or more in females indicate obesity.

In Ayurveda, **Acharya Charaka** has described Obesity by the name of sthoulya and **atisthoulya** and has been classified under "**Asta Nindita Purusha**". Sthoulya may be defined as excessive and abnormal increase of **meda dhatu** along with **mamsa dhatu** resulting in the pendulous appearance of buttocks, belly and breasts.

Etiology of Sthoulya (Obesity) in Ayurveda

Acharya Charak has mentioned causes of sthoulya (obesity) in sutrasthana. Those are **atisampurana** (excessive intake of food), **sleshmaj aahar- vihar sevana** (diet and lifestyle which causes an increase in fatty tissues), **avyayama** (lack of exercise),

avyavaya (no sexual relation), **divaswapna** (sleeping at daytime), **harsha nityam** (always enjoying happiness), **achintanam** (not thinking much) , and **beejaswabhaba** (hereditary).

All the above mentioned **nidan** (causes) of **sthoulya** (obesity) give rise to abnormal increase of meda dhatu which obstructs all the **srots** (channels) of the body. As a result **vata** moving mainly into stomach, whips up the **Agni** (digestive power) and absorbs the food. As a result, the crapulent man digests the food speedily and craves for food frequently. It causes over growth of meda dhatu and leads to Sthaulya.

Symptoms and complications of Sthoulya (Obesity)

In Ayurveda, Acharya Charak has described very systematically concerning the symptoms and complications of Sthoulya (Obesity). **Premature aging, decreased prolonged existence, tiredness, excessive sweating, excessive hunger and thirst, and reduction of sexual power are the common symptoms of Sthoulya.**

Management of Sthoulya (Obesity)

Ayurvedic management of Sthoulya (Obesity) is based on the principle of **Guru and Aptarpan ahaar** (heavy but less nourished food). Administration of Guru and Aptarpan articles which possess additional **Vata, Shleshma** and **Medonashaka** properties are considered as an ideal for **Samshaman** therapy. **Guru** property is sufficient to alleviate vitiated

Agni and thereby **Atikshudha** and **Apatarpana** property provides non-nourishment and thus leads to depletion of **Meda**. Now a days Ayurvedic management is recognized as the better option for those whom are suffering from **sthoulya** (obesity).

Some of the **asana** and **pranayam** such as **paschimottanasana** (the back stretching pose), **bhujangasana** (cobra pose), **pavanmuktasana** (wind releasing pose) helps in reducing the body fat. In Ayurveda, natural honey is indicated in the management of **sthoulya** (obesity) due to its **lekhaniya** property. Acharya Charak has also mentioned single drugs as **Guggulu**, **Guduchi**,

Ginger, **Chitrak**, **Trikatu**, **Shilajita**, **Agnimantha**, **Triphala** etc. for the management of **Sthaulya** (obesity).

Conclusion

As prevention is better than cure so awareness for seasonal, nutritive food intake in moderate quantity i.e, **Ahaar**, daily physical & mental exercise i.e **Vihaar** desciplined schedule i.e **Brahmcharya** with timely sound sleep i.e **Nidra** on the principles of Swasthwrit (**Triupstambh**) should be spread.

Re-Thoughts

1. If we exert our selves with determination, no obstacle however formidable can stop our progress- **Dr. B. C. Roy**, Physician
2. We must be modest except in our aims - **Dr. Hargobind Khurana**, Nobel Prize winner
3. An investment in knowledge pays the best interest- **Benjamine F**, Ex. U.S. President
4. Do not let circumstances control you, rather you change them - **Jachi Chan**

PREVENTIVE MEDICINE

Single Herb

Tulsi leaves or kwath for chest afflictions.

Ashwagandha for various vatic disorders as nervine tonic.

Dr. Vinod Kumar Gautam
Dept. of Kaya Chikitsa
National Institute of Ayurveda, Jaipur

Clinical evaluation of 'Pushkaradi Guggulu' in C.A.D. (Vatik Hirdya Rog)

Since disease, decay and death have always coexisted with life, the study of disease and their treatment must also have been contemporaneous with the dawn of human intellect. Today newer plants or plant derivatives are emerging as potent therapeutic agents for different diseases. In addition to this newer applications/newer therapeutic uses of older medicinal plants are also coming in light.

Present research work entitled "**Clinical evaluation of the role of 'Pushkaradi Guggulu' in the management of Coronary Artery Disease (Hridroga)**", is a kind of same type of effort and it aims to undertake a conceptual and clinical correlation of Vatika Hridroga with Coronary Artery Disease and to evaluate the efficacy of Pushkaradi Guggulu in the management of C.A.D. (Hridroga) on various scientific parameters.

The review of Ayurvedic literature reveals that the knowledge of Hridroga in the tradition of Indian medicine can be traced to the ancient times of Vedas and later to the various classics of Ayurveda. An insight in to the modern literature too reveals that symptoms of C.A.D. mainly Angina pectoris resemble very closely with Vataja Hridroga.

C.A.D. are caused by multiple aetiological factors, which requires multifactorial approach to treat it. W.H.O. has declared that C.A.D./I.H.D. is "Modern Epidemic". Many factors may explain this surge in atherosclerotic disease among various populations; rapid industrialisation, urbanisation,

faulty lifestyle, smoking/tobacco chewing, stress, sedentary habits, inevent genetic predisposition to C.A.D., Dyslipidaemias and central obesity.

Various scientific researches have been carried out on several Ayurvedic drugs for evaluating their efficacy in the management of C.A.D. (Hridroga). Pushkaradi Guggulu, which is a proposed formulation (Kalpita Yoga) comprises of Pushkarmoola Shunti and Guggulu, which has been evaluated for its possible role in the management of C.A.D. (Hridroga). This formulation possess various pharmacological properties like Deepana, Pachana, Medohara, Vatanulomana, Srotoshodhaka effects along with especial effect of Shunthi on Dhatwagni level. Due to having these properties Pushkaradi Guggulu 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 Pushkaradi Guggulu alone as Ayurvedic therapy and in combination with Tab. Dilzem as Mixed therapy in the management of C.A.D. (Hridroga) in a series of patients registered for the present trial.

For the present clinical trial out of 48 registered clinically diagnosed and confirmed cases of C.A.D. (Hridroga), 45 cases were selected for full follow-up and randomly divided into following three groups -

Group Ist : 15 patients of C.A.D. (Hridroga) were recommended Tab. Dilzem 30 mg TDS as Allopathic therapy for 45 days.

Group IInd : 15 patients of C.A.D. (Hridroga) were recommended Pushkaradi Guggulu in dose of 2 gm. T.D.S. with lukewarm water as Ayurvedic therapy for 45 days.

Group IIIrd : 15 patients of C.A.D. (Hridroga) were recommended Pushkaradi Guggulu 2 gm. T.D.S. with lukewarm water along with Tab. Dilzem 30 mg TDS for 45 days as Mixed therapy.

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 a mixture of Rajasika and Tamasika temperament.

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

It was observed that there was comparatively highly significant improvement clinically on various parameters in IIIrd & IInd groups after the therapy but Ist group showed significant improvement. Data shows that there was highly significant decrease in body weight in patients treated with Pushkaradi Guggulu along with correction of cardio-respiratory functions. This was possible probably due to Lekhana, Karshana, Srotoshodhaka, Medohara and Yakrita-uttejaka properties of Pushkaradi Guggulu.

It was observed that there was highly significant improvement in clinical features of C.A.D. after the therapy. Breathlessness, Chest pain and Fatigue etc. improved highly significantly in all the three groups. Though patients of Ist & IInd group showed significant improvement in palpitation but patients of IIIrd group witnessed highly significant

improvement in their clinical symptoms of C.A.D. after the drug therapy.

45 cases selected for present trial were divided in different types of Hridroga on the basis of Doshika involvement. Maximum number of patients i.e. 38(84.45%) patients were having Vataja Hridroga. While 04(8.89 %) patients had Kaphaja Hridroga, 02(4.44%) patients had Pittaja Hridroga and only 01(2.22%) patient had Krimija Hridroga in present series of patients registered for the clinical study.

For evaluating the efficacy of Pushkaradi Guggulu clinical trial was done on all types of Hridroga specially in Vatika Hridroga. It was found that there was highly significant reduction in majority of symptoms in patients of group IIIrd and IInd, whereas significant reduction in symptoms was noticed in patients of Ist group which suggest that Ayurvedic formulation like Pushkaradi Guggulu are quite effective in management of Vatika Hridroga (C.A.D.) but the results are highly encouraging if Pushkaradi Guggulu is administered in combination with allopathic medicines. This is probably due to synergistic action of Pushkaradi Guggulu with allopathic drug Dilzem.

Clinical evaluation of Pushkaradi Guggulu on Lipid profile has revealed a highly significant reduction in the levels of Serum Triglycerides and Serum V.L.D.L., Serum Cholesterol and Serum L.D.L. and significant increase in the level of Serum H.D.L. after the course of the therapy. This confirms potent Hypolipidaemic and Cardioprotective effects of Pushkaradi Guggulu. This is possibly due to pharmacological properties of Pushkaradi Guggulu like Deepana, Pachana, Lekhana, Medohara, Yakrita-uttejaka, Vatanulomana, etc. properties.

Studies on parameters like E.C.G. and C.T.M.T. have revealed that Pushkaradi Guggulu has potential of increasing blood supply to myocardium through its coronary vasodilating effect due to presence of drugs like Pushkarmool, Shunti and Guggulu

having Lekhana, Medohara, Parshvashoolhara and Srotoshodhaka properties. There was correction of E.C.G. findings in different leads in all the three groups especially in patients of IIIrd group. Similarly there was significant increase in exercise time, significant restoration of iso-electric or near to iso-electric changes in ST Segment, highly significantly normal or close to normal impression and moderate improvement in threshold of percentage target heart rate after the therapy in respective groups. This supports the possession of properties similar to the antianginal and vasodilating properties in Pushkaradi Guggulu.

Pushkaradi Guggulu was well tolerated by almost all the patients but one patient in Ayurvedic group complained of indigestion and diarrhoea and one patients in mixed group complained itching and burning sensation in the body which may be due to Ushna Kala, and, Pittaja Prakrati of the patients or may be due to Ushna Virya of all the constituent drugs of Pushkaradi Guggulu. By reducing the dose of Pushkaradi Guggulu this problem was sorted out. No other side effects were noticed in any patient registered for the present trial.

It was observed the Pushkaradi Guggulu has the unique property of potentiating the pharmacological actions of Allopathic drug Dilzem. When Pushkaradi Guggulu and Tab. Dilzem are used together, they act synergistically by promoting the pharmacological activities of each other.

Considering all these clinical observations, the authors are tempted to suggest that Pushkaradi Guggulu seems to possess potent antianginal, hypolipidaemic and cardioprotective actions. This can be explained in two ways -

I. Transient improvement in Coronary Blood Supply i.e. Coronary Vasodilator activities.

II. Due to Lekhana, Karshana, Medohara, Srotoshodaka, Mutrala and Yarkrita-uttajaka properties of Pushkaradi Guggulu, this may breakdown the pathogenesis of atheromatous plaques and check the formation of thrombus or embolism in blood vessels.

Considering all these activities, it is proposed that Pushkaradi Guggulu has very limited role in the acute episodes of myocardial ischaemia, but as the disease has slowly progressive nature, it should be continued for several weeks/months which can results in the prevention as well as in the management of C.A.D. (Hridroga).

So, it can be concluded that Pushkaradi Guggulu may play a crucial role in the management/to slow down the progress of C.A.D. (Hridroga). **It is expected that Pushkaradi Guggulu may have potent cardioprotective activities, which may be responsible for preventing the occurrence of C.A.D. (Hridroga).**

Sharing Knowledge is mandatory for any medical science

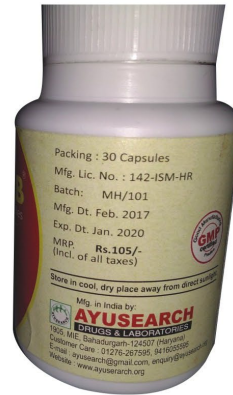


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RECENT DEVELOPMENTS



■ Prime Minister during the inauguration ceremony of country's first ayurveda hospital in New Delhi on Tuesday. PTI

Modi pitches for an ayurveda-led health revolution

HT Correspondent
e: letters@hindustantimes.com

NEW DELHI: Prime Minister Narendra Modi on Tuesday inaugurated the first ever 200-bed ayurveda hospital on the lines of All India Institute of Medical Sciences (AIIMS) in New Delhi and said his government plans to establish such traditional medical institutes in every district of the country.

"There is a strong need to integrate traditional and modern systems of medicines. This ayurveda hospital, which is like AIIMS, is equipped with most advanced technologies needed to treat patients," Modi said as he launched the All India Institute of Ayurveda (AIIA) on the National Ayurveda Day.

The AIIA, which will function under the ministry of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy or Ayush, aims to offer quality patient care and become a research hub in generating scientific information about quality, safety, and efficacy of ayurvedic products.

Modi said a country cannot move forward if it is not proud of its legacy. "We forgot our legacy for a long time... But now we have started remembering it again," the Prime Minister said.

He said there's a long list of benefits of ayurveda and added that people are showing interest in traditional medicines.

"People are attracted not only to good health but also wellness... (There is a) need to

Like the IT revolution a few years ago, the time has come for a health revolution under the aegis of ayurveda... More investment is needed in the sector for better growth.

NARENDRA MODI, Prime Minister

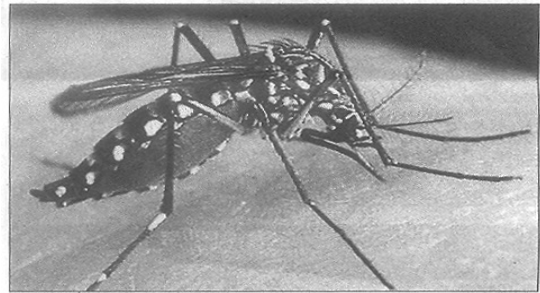
strengthen ayurveda," the Prime Minister said. "Like the IT revolution a few years ago, the time has come for a 'health revolution' under the aegis of ayurveda," he added.

"More investment is needed in this sector for better growth," Modi said as he appealed to private companies to contribute a part of their corporate social responsibility funds towards developing yoga and ayurveda.

The AIIA's outpatient department (OPD) facility started functioning a few months ago and deals with neurological and degenerative diseases, rheumatology and musculoskeletal conditions, diabetes and metabolic disorders, allergic disorders, yoga, panchakarma, kriyakaalpa, diabetic retinopathy and infertility among other conditions.

The first phase of the hospital was built with a budget of ₹157 crore. The hospital has a panchakarma therapy clinic that provides personalised care and diagnostic labs that conduct specialised tests and scans.

Chikungunya cure discovered at IIT Roorkee



■ Piperazine, a drug used to treat worm infections, targets the capsid protein which is present in the chikungunya virus PHOTO/HT

Sarah Zia
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NEW DELHI: Researchers at the Indian Institute of Technology Roorkee in collaboration with Gwalior-based Defence Research and Development Establishment have discovered the anti-viral properties of the drug piperazine in combating chikungunya, a viral disease caused by mosquitoes. Piperazine is currently used for treating worm infections such as roundworm.

The findings have been published in 'Antiviral Research' a journal of the International Society for Antiviral Research, published by Elsevier.

The researchers examined the antiviral properties of the drug using X-ray crystallographic technique, in combination with computational biology and fluorescence techniques.

According to Shaili Tomar, who led the research at IIT Roorkee, previous literature suggested that piperazine targets the capsid protein which is

present in the chikungunya virus. "We conducted cell testing in the laboratory using monkey cell lines to discover that the virus did not replicate in the body in the presence of this drug," explains Tomar. "We identified that piperazine binds itself well with the hydrophobic pocket on the capsid protein which causes the replication of the virus inside a host."

Tomar's team is researching on chikungunya for the last ten years with this particular and more molecules are being tested to see if other proteins present in the drug could be countered through existing drugs.

Currently, no vaccine or drug is available in the market to counter chikungunya.

Tomar adds that a lot of research on finding drugs for malaria and chikungunya focus on creating new drugs. "Since we are using existing drugs, we do not have to conduct any toxicity test which saves us time," she adds.

In the next stage, this drug will be tested on mice for almost a year. Toxicity test is the next stage after animal testing for new drugs but will not be needed in this case. "After animal testing, we can start with clinical studies where these drugs will be prescribed to patients," says Tomar.

CURRENTLY, NO VACCINE OR DRUG IS AVAILABLE IN THE MARKET TO COUNTER CHIKUNGUNYA



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वात रोग (Arthritis) की प्राकृतिक चिकित्सा

भारत में 180 मिलियन लोगों में 15 प्रतिशत लोग वात रोग से पीड़ित हैं। 65 वर्ष से अधिक आयु वालों में 70 प्रतिशत लोग वात रोग से ग्रस्त हैं। वात रोग ऐसा कष्टदायी रोग है कि मरीज कराहता रहता है।

वात रोग का कष्ट नरक से कम नहीं है।

लक्षण— वात रोग की शुरुआत पैरों की तथा हाथों की उगलियों से होती है। पैर की उगलियों में हल्का सा दर्द होता है उगलियाँ कुछ कठोर व सूजनयुक्त हो जाती है। थोड़ा बढ़ने पर उगलियाँ लाल होने लगती है। यह दर्द धीरे-धीरे पैर के मोड़ में घुटनों में, कलाई तथा शरीर के सभी जोड़ों में प्रारम्भ हो जाता है।

वात रोग के प्रकार— वात रोग प्रारम्भिक अवस्था में कई प्रकार का होता है।

Osteoarthritis, Rheumatoid arthritis, Septic arthritis, Gout and Pseudo-gout, Juvenile Idiopathic arthritis, Stills disease and Ankylosing spondylitis etc.

वात रोग की द्वितीय अवस्था को प्राप्त होने पर

और भयकर एवं अन्य बीमारियों का रूप ले लेता है। आयुर्वेद में वात रोग तीन प्रकार का होता है वातज, पित्तज तथा कफज।

वातज में जोड़ों में द्रव्य सूख जाता है तथा जोड़ों से चट-चट की आवाज आती है। पित्तज में सूजन हो जाती है तथा दर्द होता है तथा कफज में जोड़ सख्त हो जाते हैं। सूजन हो जाती है तथा ठंड लगती है।

वात रोग क्या है?

हमारे शरीर में जोड़ों की हड्डियों के अग्र भाग में कर्टिलेज की परत होती है तथा इन जोड़ों के खाली स्थान में साइनोवियल द्रव्य भरा होता है जिसके ऊपर एक Synovial lining होती है फिर उसके ऊपर Ligaments से ढका होता है। कर्टिलेज घिसने से या क्षतिग्रस्त होने से Synovial के चलने से घर्षण होता है और दर्द का आगाज होता है। यह तो Osteo Arthrititis की बात हो गयी। Rheumatoid arthritis में Bone में erosion होता है तथा synovial membrane में सूजन आ जाती है। इस प्रकार दोनों जोड़ आपस

में रगड़ने से दर्द होता है। सूजन बढ़ती है तथा stiffness आ जाती है।

सन्धिवात में परीक्षण— सन्धिवात में Blood test में Rheumatoid factor, CBC, ESR, CRP, anti CCP, Creatinine level टेस्ट करते हैं।

मूत्र परीक्षण— WBC, RBC, Proteins, infection test, x-ray test, MRI तथा ultrasound सभी जोड़ों का कराते हैं।

वात रोग के कारण— आयुर्वेद के अनुसार वात रोग का कारण आँव तथा वात की अधिकता तथा अग्नि तत्त्व की कमी अर्थात् जठराग्नि की मन्दता के कारण भोजन ठीक से नहीं पचता है और मल अधिक बनता है जिसके कारण टॉक्सिन जोड़ों पर इकट्ठा हो जाता है।

2. प्राकृतिक चिकित्सा के अनुसार गलत आहार—विहार अनियमित जीवन, श्रम रहित दिनचर्या अधिक गर्म मसाले, मैदा से बनी खाद्य पदार्थ भारी गरिष्ठ भोजन, मास—मछली, आलू, चावल, दाल (चना, राजमा, उड़द) अधिक चाय कॉफी, कृत्रिम पेय, नशीले पदार्थ अधिक ठंडे स्थानों पर रहना अधिक सहवास व दुर्बलता आदि हैं।

3. कुछ कारण वंशानुगत होते हैं।

प्राकृतिक चिकित्सा द्वारा उपचार—

1. प्रातः नीम के पत्ते साफ करके पानी में उबालकर छानकर ठंडा करके एनिमा देकर सप्ताह में एक बार पेट साफ करें।

2. वात रोगी को सदैव हलके गरम पानी से स्नान करना चाहिए।

3. कभी कब्ज न होने दें। त्रिफला चूर्ण एक चम्मच रात्रि में सोने से 30 मिनट पूर्व गुनगने पानी से लें।

4. प्रातः रोज योगासन ताड़, पर्वत, अश्वथ कोण अर्ध चन्द्र उत्कट, गरुण, सुप्त वज्र, गोमुख, मण्डूका, मत्स्य, अर्ध मत्स्येन्द्र, शलभ, भुजंग, धनुर, नौका, उत्तानपाद आदि आसन किसी पार्क वाटिका में करें।

5. प्रातः भस्त्रिका, कपाल भांति, अनुलोम विलोम सूर्य भेदी प्राणायाम करें।

6. रोज प्रातः गर्म पानी में पैर रखें। सहने योग्य गरम पानी चौड़ी बाल्टी में डालकर पिड़ली तक पैर डुबों कर कम्बल ओढ़कर कुर्सी पर बैठकर यह क्रिया करें। सिर पर ठंडा गीला तौलिया भी रखें, 10—15 मिनट।

7. किसी चिकित्सक की देख-रेख में पूरे शरीर को गर्म गीली चादर से 40—45 मिनट लपेटें। साथ ही गर्म पानी की बोतलें पास रखते हुए ऊपर कम्बल लपेटें ताकि शरीर से पसीना निकले व यथाशक्ति नीबू रस को गुनगने पानी में डालकर पिलाएं, अवश्य लाभ होगा।

8. नग्न बैठकर गीली चादर पूरे शरीर पर लपेटें व भांप स्नान करें तथा गर्म पानी में शहद नीबू डालकर पीएं। बाद में सूखे तौलिये से पोछें व साफ कपड़े पहनें।

9. सन्धि स्थल पर गर्म व ठंडा सेक बारी-बारी से करें। जैसे एकबार ठंडा पानी में तौलिया भीगोकर रखें व उसके बाद गर्म जल में भीगोया हुआ तौलिया रखें। यह क्रिया लगभग तीस मिनट रोज करें। अवश्य लाभ होगा।

10. टब में गर्म पानी में पहाड़ी नमक डालकर सन्धि स्थानों को रगड़कर स्नान कराए। सूजन व दर्द में बहुत लाभ होगा।

11. सहने योग्य बालू गर्म करके पैर फैलाकर सन्धि स्थान पर गर्म-गर्म बालू डालकर सूखा रगड़ें। इससे भी लाभ होगा।

12. दर्द होने वाले स्थानों पर लाल रंग का रेडियेशन 15 से 20 मिनट प्रतिदिन अवश्य करें। यह क्रिया घर पर टेबल लैम्प पर लाल रंग का सैलोफिन चढ़ाकर भी किया जा सकता है। इस प्रकार सारे शरीर पर ऐसी पन्नी लपेटकर धूप में बैठकर या लेटकर भी किया जा सकता है। निसंदेह उचित लाभ होगा।

13. अपना पेट हमेशा साफ रखने का प्रयास करें। उपवास भी करें या अल्प आहार लें।

पथ्य— सदैव हल्का, सुपाच्य व थोड़ा आहार लें। दिन में तीन बार की बजाय पाँच बार ताजा भोजन लें। जैसे हरी शाक—सब्जियाँ, करेला, लौकी, तोरी, परमल, टिंडा, लहसन, प्याज, बथूआ, मेथी, सोया का साग आदि। चुकन्दर गाजर का रस (गरम सूप), दालों में मूंग व मसरी तथा फलों में अंगूर, संतरा, चीकू, मौसमी, पपीता, बबूगोशा और अमरुद आदि का सेवन करें।

अपथ्य— अधिक टमाटर, आलू, बैंगन, उड़द की दाल, राजमा व मैदे से बनी चीजें जैसे ब्रेड, मठी, फैन, नमकीन (स्नेक्स) चटपटी चीजें तथा दूध से बनी खोया व मीठी व भारी मिठाईयों का सेवन कम से कम करें। याद रखें बाजार में बिकने वाली फास्ट फूड की चीजें जैसे बर्गर, चावामिन, मोमोज आदि अधिक चाय, कॉफी व साफ्ट ड्रिंक्स इसके अतिरिक्त शराब, बीयर, तम्बाकू आदि नशीले पदार्थों का सेवन न करें।

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Herbal Medicine Heritage

HARIDRA

Hindi- Haldi, **English** - Turmeric, **Latin** - Curcuma Longa

Brief Description - Plant grown round the year in India specially West Bengal, Maharashtra, Tamilnadu

Shrub of 2 - 3 feet, **Leaves** 1.6" -2" long 6" wide ever shining rectangular shaped with white spots anteriorly and 20-30 veins posteriorly smelling like mango, **Flowers** Tubular 6" long enveloped by light green leaves with ½" flowers yellowish looking like shining buds of adrak (ginger) generally grows in winter.

Chemical Composition- Volatile Oil- 5-8%, Alkaloid Curcumin, Vitamin A, Protein 6.3%, Minerals 3.5%, Carbohydrates 69.4%

Gun - Ruksh, Laghu, **Ras**- Tikt, Katu, **Vipaak** - Katu, **Virya** - Ushn

Ayurvedic Features

Gun - Ruksh, Laghu, **Ras**- Tikt, Katu, **Vipaak** - Katu, **Virya** - Ushn

Clinical Therapeutics

1. It is **Vat - Pitt - Kaph** shamak & **Pitt** rechak
2. Its lep & ubtan is **Shoth Har** (anti inflammatory), **Vedna Har** (anal gesic), Kushthgn (dermatitis), **Vran Ropan** (wounds, boils, piles, spleno - hepato megaly)
3. Dhum (inhalation) of burning haldi powder for **jatrugat** (upper respiratory disorders)
4. It is appetiser, improves appetite, removes flatulence & intestinal worms
5. It not only checks bleeding externally but also internally (**concealed hemorrhage**) as well as a **haematinic**.
6. It is a urinary antiseptic used as diuretic & in polyuria (**dibetes- mellitus**)
7. Used for gynaecological disorders as uterine tonic & galactologue (**lactation**)
8. For febrile conditions of **viral, bacterial & chronic** causes.
9. During convalescence as general tonic & restorative (**rasayan**) to fight air pollution effects.
10. Its popular compound **Haridra Khand** advised for allergic, fungal, eczematous skin disorders.

ELECTION MANIFESTO

for

DELHI BHARATIYA CHIKITSA PARISHAD ELECTIONS - 2017

15th November, 2017 - 15th December, 2017

of

ISM DOCTOR'S CELL, DELHI

JOIN HANDS & VOTE FOR ISM DOCTOR'S CELL

Learned Friends,

When fate turned cruel and on 08.04.2016, and Delhi High Court in a deadly stroke, disabled ISM Doctors for using Integrated Medicine, our community by enlarge, was woken out of slumber & life was thrown out of gear. Everything from livelihood to social dignity and position seemed dissolving in air. Roads were virtually cleared for our rival council for raids, FIRs and our clinic closure. Gloom was reigning all over in our ISM camp, it all appeared a matter of days only.

Requesting for relief, the Hon'ble Chief Minister, various other Ministers of Delhi Govt and Aam Aadmi Party leaders were approached. Perhaps God had not absolutely disowned, hence, promptly came the help and ISM doctors were overwhelmed by the positive attitude of the AAP and Delhi Govt. No problem was allowed to come our way. We remain ever thankful to the AAP and its Delhi Govt. for their immediate and courageous help despite the H.C. order standing against us. But since nobody is above law, an ultimate legal solution as a permanent remedy was required.

Sh. Dileep Pandey ji, spared time, kindly studied our case in totality, convinced himself with our genuine stand and subsequently blessed and promised us that AAP shall extend all help and represent our case with the Delhi Govt. and see to it that:

* No hurdle is encountered by Delhi ISM doctors.

*ISM doctors continue delivering effective Health Care as before.

*there be no harassment of ISM Doctors.

As a true friend, he acted like a saviour, guided and advised ISM community. He conceived the idea, suggested and helped establish AAP ISM Doctors' Cell to ensure proximity for ISM Doctors with the party functionaries. For the first time in India an ISM Doctors' wing came into existence which eventually opened an effective channel between ISM fraternity and Delhi Govt. with the sole purpose of enabling us to take up our case with Delhi Govt. with credibility and conviction, for a lasting solution.

“He who seizes the right moment achieves the goal.”

Friends, we grabbed the idea and wasting no time in celebrations, straight away got on to working towards focussed agenda of securing a permanent solution for our problem. While interacting with senior party office bearers, we realised very soon, the magnitude of impact this newly born baby, Doctors' Cell, was going to make for the fortunes of Delhi ISM people. We shall always be short of vocabulary to express our gratitude for Delhi's ruling party.

Friends, working against heavy odds, while crusading for our cause, we encountered stiff resistance. To our shocking surprise we came to realise that officialdom of Delhi Govt. was totally ignorant of factual rights of ISM Doctors. There were serious misconceptions due to adverse propaganda of DMA. Friends, many Govt departments were involved. Shunting from one department desk to another, often facing neglect and rejection, we felt depressed on many instances. But with eyes set upon our practicing rights, we never lost hope. Public image earned through years of service was at stake. Stark fear of losing livelihood was staring straight at us. Yes, we did felt down at times but not out. After unsavoury depressing instance, our team often used to sit back, recollect its strewn confidence, encouraging and reassuring each other would get back to job again. Sticking to our guns, word by word, erasing misconceptions, clearing doubts, inching forward, we continued stepping ahead. We knew that those who can visualise through darkness meet the light.

“Right at all costs, Right in spite of all terror. Right however long and tortuous the road may be, For without Right there is no survival.”

Subsequent to lot of persistent lobbying with the thankful support of the Doctors' Cell finally succeeded in convincing and persuaded the Delhi Govt. for the purpose resulting in Delhi Govt. sending its counsel in Supreme Court at the crucial occasion to support us. Convinced, the Supreme Court promptly issued notices to all stake holders. Practically, the SLP was admitted. Great relief indeed. My learned friends, the great advantage for Doctors' Cell came in the form of numerous interactions with the people in Party and Govt. which provided us with the much needed opportunities to knock

again and again. Being a party cell, we had come closer to people who mattered a lot for us. History of sorts was created when the Delhi Government filed its affidavit in Supreme Court, strongly endorsing Delhi ISM Doctors' SLP for the Rights of Integrated Practice while strongly and clearly defending the provisions of DBCP Act and Rules.

Moving ahead, step by step, with the required zeal AAP ISM Doctors' cell is continuing its mission. As we have earlier pointed out, this Cell came into being only and only for convincingly taking up the cause of ISM fraternity with the Delhi Govt. via the support of Aam Aadmi Party. Friends, the H.C. verdict came as an unfortunate blow to us. We treat our patients as per our teaching and training. Right of Integrated practice has been provided to us by DBCP Act and its rules, where we are registered. Provisions of DBCP Act and its rules are still existing and constitutionally valid. Where lies the fault of common practitioner. Still ISM doctors have spent lot of money for it. Actual battle lies ahead. Long long way to go. Lot of money shall be further required. We are trapped in a very difficult situation. Already we have been made to suffer and contribute for no misdeed. Very firmly, we hold the assured view that no further penny should be extracted from ISM Doctors for the present court case.

Friends since the implementation of an Act of Delhi Govt. has been blocked, AAP ISM Doctors' Cell strongly feels that the Delhi Govt., itself, should come forward, join the fray and defend its own DBCP Act and rules in the Supreme Court and provide relief to us. This, we understand would lend strong legitimacy and credibility to our cause, besides sparing ISM Doctors of further monetary pressure.

“Successful people attain their success just one step beyond.”

Friends after duly and successfully completing our professional course of studies, prescribed by the Government itself, we, practice & provide healthcare to the public, as permitted by the existing provisions of DBCP Act and its Rules. Still day in day out our rights are challenged, painfully draining our energy, time, money & causing serious distractions in our professional duties as Health Care providers. Friends, with High Court Order still in force, sword is precariously hanging over our heads. We urgently need a legal stay on High Court Verdict. Doctors' Cell is relentlessly working on the possibility of Delhi Govt. filing a stay request in the Supreme Court. To achieve this arduous task we are leaving no stone unturned. Fellow Practitioners, we understand, the impact of an application by the Delhi Govt. can be appreciated by each one of us despite our differing political beliefs. Once filed, this stay application by Delhi Govt. in S.C., we shall have a great sigh of relief. All thanks to the help and cooperation of the Party which is solidly standing behind our cause and extending all possible support with generosity. Believe me friends we are not going to stop at this. We have miles to go.

We have our vision set on something really rewarding for our practitioners. AAP ISM Doctors' Cell enjoys a positive equation with the Party. With blessings of all merciful God and support of AAP and the Delhi Govt., we are going to achieve the unthinkable. Think of the Special Leave Petition in the Supreme Court by the Govt of NCT of Delhi, to effectively defend and safeguard our practicing rights as enshrined in the Delhi Government's DBCP Act and the Rules. We remember the now famous Mukhtyar Chand Verdict where the S.C. has acknowledged and established that the practicing rights of a practitioner flows from the state Act under which he is registered in the State. Lending great Constitutional credibility to our cause, SLP by the State Government itself will be no less than half way victory for us. We the ISM Doctors of Delhi shall get a very big breather from having to fight it off ourselves. Trapped with exhausting resources it is sure going to be a very big day for us. With the Aam Aadmi Party thankfully standing and doing everything for our cause, we are very close to it. Soon everybody shall see and realise the hard work that has gone into it. Magnitude of the achievement can be gauged & understood by comparing the earlier times when no senior official was ready even to listen us. God willing, I am sure with the cooperation of Aam Aadmi Party and positive attitude of Delhi Govt. towards our genuine cause, overcoming all road blocks, we shall march ahead. We are sure that in the heart of its heart, every single ISM Doctor can feel the good it is going to be for our livelihood and social position. Can we, as ISM community reciprocate? Now when the Doctors Cell is doing so much for our cause it becomes our natural human commitment to stand up for those who have promised to help us and are actually doing so much, despite very tough legal and other adversities.

Doctors' Cell thinks that nonexistent DBCP has been a significant reason for the present sordid state of affairs. In the

absence of democratic representation, factual presentation by ISM Doctors was nowhere. Bureaucrats were having a field day, acting on their whims, promoting and pressing their own personal ideas. Inflicting serious injuries to the cause of registered Doctors there was utter disregard for the existing & constitutional provisions of DBCP Act and its Rules enacted by the Delhi Legislative Assembly and endorsed by the Respected President of India. Restoration of elected DBCP was urgently required for proper representation of facts in the right perspective. Thankfully AAP has realised this and the process of establishing an elected DBCP has been initiated by the Delhi Govt. Utilising the opportunity at this crucial juncture we are hopeful that fraternity would elect ably committed representatives, genuinely worthy for the purpose.

Friends, when every other thing fails and we find ourselves out in the cold; it is the human relations only which come to our rescue and take our sinking boat to the shore. We are sincerely for respecting the relations. Friends to realise your dreams, to fulfil your needs, for lawfully secured practicing rights, uninterrupted professional activities please support and strengthen ISM Doctors' Cell and in the coming DBCP elections choose:

- A team which does not have half baked knowledge but has absolute realistic understanding of the problem and knows how to resolve it for a permanent solution.
- A team which is a perfect balance of experienced and youthful energy of competent and dedicated professionals. A team which knows its job very well.
- A team which only talks of facts, easily verifiable with documentary evidence. A team which does not indulge in pseudo glorification but works silently, tirelessly and sincerely.
- A team which never indulge in wasteful expenditure of ISM resources.
- A team which does not talk from air castles but lives in reality, talks sense and put things in the right perspective.
- Most important of ISM Doctors' Cell enjoys much needed support of the party and has requisite approach, equation and understanding with the State Government to facilitate every ISM Practitioners' goal realisation.

ACHIEVEMENTS OF ISM DOCTORS' CELL

What this nearly one year old baby has achieved so far, is already enough to raise eye brows of seasoned players and infuse confidence in common ISM Practitioner.

- With passionate, focussed and sincere hard work ISM Doctors' Cell has been able to convince bureaucracy about the rights of ISM Doctors registered with the DBCP which was strangely groping in dark even after 20 years of Delhi Bhartiya Chikitsa Parishad's existence.
- Doctors' Cell successfully persuaded Delhi Govt. to send its advocate in Supreme Court to support our Integrated Practice, and only resulted in eventual admission of SLP in SC.
- Responding to its notice, very strongly worded affidavit has been submitted in the S.C. on behalf of Delhi Govt. only due to constant endeavours and inputs of Doctors' Cell. This affidavit shall in all probability prove to be a milestone in the case.
- Preparations are almost complete and Stay Application against the High court order is soon going to be filed in the S.C. by the Delhi Govt., again only because of concerted efforts of Doctors' Cell.
- Special leave Petition by the Delhi Govt is ready to be filed in Supreme Court. Good news is expected any time lending constitutional authenticity to our rights besides clearing away financial burden from ISM Doctors. Results amply reflects the sincerity of purpose and tireless efforts from Doctors' Cell only.

VISION AND FUTURE PLANS OF ISM DOCTORS' CELL

Hereunder we showcase some features of our vision for the good of our fraternity. Evidently clear, ISM Doctors' Cell does not, only make promises but believes and follows a result oriented work culture.

Registration Process:

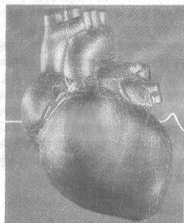
We shall endeavour to place all the information regarding required formalities for the registration including registration

MOVING NEWS

5 आहार जो आपके दिल के लिए हैं वरदान

હેલ્થ અલર્ટ


• डॉ. अमित चौधरी
सीनियर कंसल्टेंट, कार्डियो थोरेसिक
ग्रैंड वैस्कुलर सर्जरी



दिल की बीमारी के मौत का अग्रणी कारण बनने की वजह से, इस बात में कोई आश्चर्य नहीं होता कि क्यों लोग दिल को सेहतमंद रखने के बारे में बात कर रहे हैं। फल, सब्जियाँ व पूर्ण अन्न से भरपूर आहार, जिसमें थोड़ा प्रोटीन ही और मछली सेहतमंद जीवनशैली के लिए महत्वपूर्ण है; ऐसे भी कुछ खास पदार्थ हैं, जो अच्छी सेहत के लिए जाने जाते हैं...


अह! जिंदगी के स्थायी स्तंभों के लिए पाठक अपनी

ओ टीमिल (जौ का आटा): ओटमील में घुलनशील फ़ाइबर बहुत होता है, जो कोलेस्ट्रॉल को घटा सकता है। यह पाचन तंत्र में संजक की तरह काम करता है और कोलेस्ट्रॉल को सोख लेता है, ताकि उन्हीं शरीर से बाहर कर दिया जाए। तब तक प्रभाव में न चुलीं। व्यक्ति को हेस्ट्रो ओटमील से बचना चाहिए, जिसमें अक्सर शक्कर होता है, और इससे स्थान पर पुराने तरीके से बनाए जाने वाले या यहां तक कि जल्दी करने वाले ओट्स से अन्य भी खाएं जैसे कि मूठ, पास्ता को चुनना चाहिए, जूँ का आटा दिल के लिए भी तब तक अच्छा होता है, जब तक कि उन्हें पानी आटा शमित हो।



सैलमन : इस तैलीय मछली में विटामिन ए व डी और ओमेगा-3 फेटी एसिड की अच्छी मात्रा होती है। सैलमन में सघन ओमेगा-3 की मात्रा सबसे ज्यादा होती है, लेकिन ट्यूना, ट्राउट, मैकेरेल, सार्डिन्स, हेरिंग और एंकोवीज भी अच्छे स्रोत हैं। आप सैलमन को भून सकते हैं, इसे स्टिर-फ्राई, पास्ता या फिर सलाद तक में मिला सकते हैं।

फलियाँ : चूँकि वे पौधों से आती हैं, इसलिए फलियाँ जैसे कि बीन्स, मटर और मटर प्रोटीन का उत्कृष्ट स्रोत हैं, जिनमें अस्थायिकर वसा बहुत ज्यादा नहीं होता है। हफ्ते में एक बार फलियाँ न खाते फलियों का खिलना लोगों में हफ्ते में एक बार से कम बार बार फलियाँ खाने वाले लोगों में दिल की बीमारी का जोखिम 22 प्रतिशत कम होता है। और फलियाँ डाइबिटीज से पीड़ित लोगों के ब्लड शुगर को नियंत्रित करने में भी मदद कर सकती हैं।



साइडस्ट फल : वे महिलाएं जो संतरे व अंगूर जैसे फलों में पाए जाने वाले फ्लेवोनोइड्स का सेवन प्रचुर मात्रा में करती हैं, उनमें आइसमिक हार्ट डिसिजी (कॉलर की वजह से होने वाला) होने का जोखिम 19 प्रतिशत तक कम होता है, उन महिलाओं की तुलना में जो ऐसी सामग्रीयों का सेवन पर्याप्त रूप से नहीं करती हैं। साइडस्ट फलों में विटामिन-सी भी बहुत होता है, जो दिल की बीमारी के जोखिम को कम करने से जुड़ा हुआ है।

उन साइडस्ट फलों से सावधान रहें, जिनमें शर्करा होती है।

सोया : टोफू व सोया दूध सहित सोया उत्पाद अत्यन्तस्थायक वसा व कोलेस्ट्रॉल के बिना अपने आहार में प्रोटीन शामिल करने का एक अच्छा तरीका है। सोया उत्पाद में पॉलीअनसैचुरेटेड फैट्स (अपकी सेहत के लिए अच्छा), फाइबर, विटामिन व मिनरल्स की काफी मात्रा होती है। दूध व अन्य प्रोटीनों की तुलना में, सोया प्रोटीन असल में एलर्जीक या 'खराब' कोलेस्ट्रॉल भी घटा सकता है।

प्रस्तुति : प्रियंका राठौड़

बार-बार संक्रमण से बचने के लिए कुछ आदतों को बदलने की सलाह

जूते कमरे से बाहर उतारे वरना बीमार पड़ जाएंगे


सेहत

नई दिल्ली | एजेंसियां

अगर आप जल्दी-जल्दी बीमार पड़े रहे हैं, तो यह खबर आपके लिए है। कुछ बुरी आदतें छोड़ दें, जो आपके बार-बार बीमारी बीमार बनाती हैं। जैसे, कमरे में जते उतारने की आदत।

ब्रिटेन की जानी-मानी माइक्रोबायोलॉजी प्रोफेसर सैली ब्लूमफील्ड के मुताबिक लोग सोचते हैं कि शौचालय और घर की फर्श ही गंदी जगहें हैं, लेकिन हकीकत यह है कि घर की कई चीजें संक्रमण फैलाती हैं। ऐसी चीजों जैसे, दरवाजे के हैंडल, मोबाइल को साफ रखना चाहिए और हाथ साफ करने को अख्तर में शुमार करना चाहिए। सैली ने बार-बार संक्रमण से बचने के लिए लोगों को सलाह दी है।

टॉयलेट में फोन न ले जाएं।
शौचालय में फोन इस्तेमाल एक भयानक
गलती है। लंदन मेट्रोपॉलिटन यूनिवर्सिटी
के डॉ. पाल मेटवेल के मुताबिक टायलेट



गर्म पानी से स्पंज को साफ करते रहें

के दौरान फोन छूना और हाथ धोना बेहतर खराब आदत है। शौचालय की सीढ़ियाँ हैंडल, सिंक और नल पर ई कोलम जीवाणु होते हैं, जिनसे पेशाब और आँसू का संक्रमण होता है। वहीं डायरिया और सांसें में संक्रमण की आशंका होती है।

हैंडबैग साफ़ करते हैं: हैंडबैग को पर्स लगातार हाथ के संपर्क में आता है।

कमरे में जते पहनने से बचें

शोध के मुताबिक 39.7 जूतों में डायरिया फैलाने वाले जीवाणु होते हैं। अगर दुर्घटनाग्रस्त यह जीवाणु शरीर में पहुँच जाए तो आप बीमार पड़ सकते हैं। इसलिए जाए तो आप बीमार पड़ सकते हैं। इसलिफन जाए तो हमेशा कमरे से बाहर निकालने चाहिए। वहीं यात्रा कर रहे समय इन्हें कपड़ों के साथ रखने की जगह अलग से एक बैग में रखना चाहिए।

माल होने वाले स्पंज जीवाणुओं का ठिकाना है वहां गर्म और नमी वाला वातावरण, बचे-भेलता है। यानी स्पंज घर तो साफ करते हैं, भी बना सकते हैं। इसलिए इसे गर्म पानी से धोकर बाढ़ इसे बदल लें।

ये नोरोवायरस, एमआरएसए और ई कोलाई से भरे हो सकते हैं। बैग की सफाई और बाहरी हिस्से को जीवाणुरोधी कपड़े से साफ करें।

टीवी रिमोट साफ रखें : टीवी रिमोट अलग-अलग लोगों के हाथ में पड़ता है, इसलिए ई कोलाई जीवाणु का वाहक बन सकता है। इसे हमेशा साफ रखें।

मशरूम खाने से अवसाद कम होगा

लंदन | एजेंसी

एक नए शोध में पता चला है कि मशरूम से अवसाद जैसी गंभीर दिमागी बीमारी का इलाज किया जा सकता है।

हाल में ही हुए एक चिकित्सकीय प्रयोग में पता चला है कि मशरूम में एक खास तरह का तत्व पाया जाता है जो दमा से तनाव और अवसाद जैसी चीजों को मिटा देता है। इस तत्व का नाम है सिलोसाइबिन। ये मुख्य रूप से मशरूम में ही मौजूद होता है। इस शोध के लिए 19 मरीजों को इस तत्व की एक-एक खुराक दी गई। इसमें से अवसाद से जूझ रहे आधे मरीजों को दिमाग में कुछ बदलाव महसूस हुए। ये बदलाव उन्हीं

अध्ययन

- इम्पीरियल कॉलेज ऑफ लंदन के शोध में दावा
- मशरूम में पाए जाने वाले तत्व सिलोसाइबिन का कमाल

करीब पांच सप्ताह तक महसूस किए। हालांकि शोधकर्ता टीम का कहना है कि इस तत्व का इस्तेमाल बिना डॉक्टर की सलाह के करना सही नहीं होगा। बता दें कि इससे पहले भी सिलोसाइबिन तत्व को लेकर अवसाद दूर करने के लिए कई अध्ययन किए गए थे। लेकिन इन अध्ययनों में उसका सटीक प्रभाव पता



नहीं चल पाया था। इस शोध से जुड़े डॉ. रॉबिन हैरिस का कहना है कि जब ये तत्व दिमाग में जाता है तो ऐसा लगता मानो यस्तिष्क शांत हो गया है। हालांकि ये अध्ययन अभी छोटे स्तर पर हुआ है और इस तत्व को डिप्रेशन के इलाज के रूप में प्रयोग में लाने से पहले काफी बड़े स्तर पर शोध की जरूरत है।

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14 weeks	OPV-3, Pentavalent-3, fIPV-2, RVV-3 [^] , PCV-2 [^]
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16-24 months	Measles-2 or MR-2#, JE-2*, DPT-Booster-1, OPV –Booster
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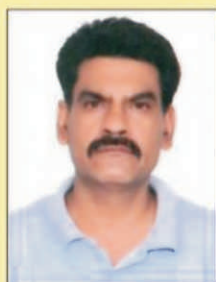
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