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# GURUKUL'S C.M.E



A Quarterly Magazine For  
Medicine Reorientation

## KNOWLEDGE BUILDS CONFIDENCE



आरुग्बध

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# HARDIK BADHAI



## HON. SH. SHRIPAD YASSO NAIK JI

*A.Y.U.S.H. MINISTER ; I/C  
Government of India*



***Raising Towards Excellence***

**Heads of National AYUSH Institutes**

**17-18 July, 2018**

**All India Institute of Ayurved, New Delhi**



## Editor's Desk

Dear Doctor,

Humble congratulations to the department of **Ayush**; Govt. of India for spreading ancient **Yog** to every corner of the world in a short span of time, so is needed of Ayurved, although setting up of **All India Institute Of Ayurved**, Delhi, a milestone with best world class facilities besides simultaneous in running of Ayurvedic faculties academically and clinically with detailed schedule of **O.P.Ds**; by experts.

Ayurvedic management of viral fever; swin flu (**Visham-Jwar**); appreciable contribution of **Gyan-Daan**; study of **Amaltaas** for various diseases; role and importance of **Naishthiki-Chikitsa**, an age old holistic regimen; equally **Naturopathy** remedy for viral fever.

A brief & bold solution for falling counts of **Platelets**, great incorporation of Ayurved and its practitioners for old age problems (**Geriatrics**) in national health programme while last one is effective management of bronchial-asthma (**Tamak-Swas**) are some of the write ups.

Thanks.

With Regards

A handwritten signature in black ink, consisting of a stylized 'D' followed by a flourish.

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

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

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## ***Chintan!***

### **Yog International ; Ayurved Not National!**

*Dear Doctor,*

*Yog and Ayurved are the pillars of Indian civilisation; Keeping the generations healthy, happy through holistic living for all round developments.*

*Unfortunately the British rulers pushed back the Indian medical systems by popularising their language, legal laws, life style and legacy of allopathic medicine which gradually changed the psych of Indian heads, politicians and public preferring modern treatment.*

*But today happily and proudly Yog has regained its lost glory reaching every continent, country and corner of the world in short span of time.*

*Full credit goes to present honorable P. M. Shri. Narendra Modi Ji , Shri. Shripad Nayak Ji, government machinery and yog educated scholars.*

*Same justice and enthusiasm is needed for Ayurved too.*

*Lets have Chintan!*

- 1. B.A. M. S. / M.D. (Ay.) community should thank Ayush Dept for promotion, propagation of Ayurved at government level.*
- 2. In educational institutions the teachers need to educate ayurvedic texts more on ethical & scientific lines to produce more confident ayurved savy physicians.*
- 3. After graduation majority of us are doing integrated private practice at affordable patient friendly charges but not doing fair justice towards ayurved although all are registered ayurvedic physicians in state registers.*
- 4. For quality and standardised ayurvedic medicines in use, the pharmaceuticals are stressed for research and evidence based clinical studies.*
- 5. A team work among academic intellectuals and pharma companies supported by Ayush Department should be initiated to find a solution of emerging diseases of viral, auto-immune, cancer & where allopathic medicine is ineffective.*

**ROLE OF AYURVEDA & CONTRIBUTION OF ITS PRACTITIONERS IS IMMENSE  
IN CONTROLLING ENVIRONMENTAL POLLUTION**

**O. P. D. SCHEDULE (A.I.I.A)**  
**ALL INDIA INSTITUTE OF AYURVED**  
**MATHURA ROAD, SARITA VIHAR, NEW DELHI-110076**

**Revised OPDs Duty Schedule**

Sr. No.	Clinical Specialty	OPD No.	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<b>Kayachikitsa (Medicine)</b>								
1.	Kaya Chikitsa Clinic	01	Dr. Divya	Dr. Alka Kapoor/ Dr. P.K. Prajapati	Dr. V.D. Aggarwal	Dr. V.D. Aggarwal	Dr. Divya	Dr. Shalini Rai
2.	Neurological & Degenerative Disease Care Unit	02	Dr. V.G. Huddar	Dr. Divya	Dr. Raja Ram Mahto	Dr. R.K. Yadav	Dr. S.K. Bhatted	Dr. V.G. Huddar
3.	Rheumatology & Musculoskeletal Care Unit	03	Dr. R.K. Yadav	Dr. V.G. Huddar	Dr. Divya	Dr. Raja Ram Mahto	Dr. R.K. Yadav	Dr. S.K. Bhatted
4.	Diabetes & Metabolic / Allergic Disorders Care Unit	07	Dr. Raja Ram Mahto	Dr. R.K. Yadav	Dr. V.G. Huddar	Dr. Divya/ Dr. M.K. Vyas	Dr. Raja Ram Mahto	Dr. Galib/ Dr. Pramod Yadav/ Dr. R.K. Yadav
<b>Integrated AYUSH Clinic</b>								
5.	UHS Clinic	04	Unani	Homeopathy	Unani	Homeopathy	Siddha	Siddha
<b>Swastha Vritta (Life style, Dietetics &amp; Yoga)</b>								
6.	General OPD	05	Dr. Meera K. Bhojani/ Dr. M.K. Vyas	Dr. Shivani Ghildiyal/ Dr. Tanuja Nesari	Dr. Shalini Rai	Dr. Galib/ Dr. Pramod Yadav	Dr. Shivani Ghildiyal/ Dr. Tanuja Nesari	Dr. Mangalagowri V Rao/ Dr. Shivakumar Harti
7.	Lifestyle Clinic	Room No. 4 First floor Physical medicines unit	Dr. Mangalagowri V Rao,	Dr. Shivakumar Harti	Ms. Jyoti Arora	Dr. Mangalagowri V Rao	Dr. Shivakumar Harti	Ms. Jyoti Arora
	Yoga (09AM to 10AM & 3:30PM to 4:30PM)	Yoga Hall – 1 <sup>st</sup> Floor Academic Block)	Dr. Namrata	Dr. Namrata	Dr. Namrata	Dr. Namrata	Dr. Namrata	Dr. Namrata
<b>Panchakarma</b>								
8.	Panchakarma Clinic	06	Dr. S.K. Bhatted	Dr. Prasanth D.	Dr. S.K. Bhatted	Dr. Prasanth D.	Dr. Prasanth D.	Dr. Prasanth D.

Annexure-II

	Opd No.	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<b>a (Eye &amp; ENT)</b>							
Eye	101	Dr. Manjusha	Dr. Pankaj	Dr. Manjusha	Dr. Narayan	Dr. Pankaj	Dr. Narayan
ENT	103	Dr. Narayan	Dr. Manjusha	Dr. Narayan	Dr. Pankaj	Dr. Manjusha	Dr. Pankaj
Triya Kalpa	113	Dr. Pankaj	Dr. Narayan	Dr. Pankaj	Dr. Manjusha	Dr. Narayan	Dr. Manjusha
<b>oupping Method</b>							
	113	Dr. Humera Shazia					
<b>Surgery</b>							
halya Samanya	104	Prof. S.K Gupta	Dr. Rahul Sherkhane	Dr. V.D. Mahanta	Prof. S.K Gupta	Dr. Rahul Sherkhane	Dr. V.D. Mahanta
shara Evum nushastra Karma	105	Dr. V.D. Mahanta	Prof. S.K Gupta	Dr. Rahul Sherkhane	Dr. V.D. Mahanta	Prof. S.K Gupta	Dr. Rahul Sherkhane
<b>a &amp; Prasuti Tantra (Gynaecology &amp; Obstetrics)</b>							
infertility Clinic	201	Dr. Sujata Kadam	Dr. Meenakshi Pathak	Dr. Kamini Dhiman	Dr. Sujata Kadam	Dr. Kamini Dhiman	Dr. Meenakshi Pathak
nte Natal Clinic	202	Dr. Kamini Dhiman	Dr. Sujata Kadam	Dr. Meenakshi Pathak	Dr. Kamini Dhiman	Dr. Meenakshi Pathak	Dr. Sujata Kadam
eneral SRPT	203	Dr. Meenakshi Pathak	Dr. Kamini Dhiman	Dr. Sujata Kadam	Dr. Meenakshi Pathak	Dr. Sujata Kadam	Dr. Kamini Dhiman
ancer Clinic	204	---	---	Cancer Screening Clinic (10 am. – 12 am)	---	---	---
<b>hbritya (Paediatrics)</b>							
al Rog Clinic	208	Dr. Rajagopala	Dr. Mahapatra Arun Kumar	Dr. Rajagopala	Dr. Mahapatra Arun Kumar	Dr. Rajagopala	Dr. Mahapatra Arun Kumar
<b>tic Retinopathy Clinic - First Wednesday of Every Month.</b>							

**tic Retinopathy Clinic - First Wednesday of Every Month.**

*AMC*  
17/08/18

Prof. Dr. Tanuja Manoj Nesari  
Director, AIIA





**Dr. Santosh N. Belavadi M.D (Ayu)**

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Department P.G studies in Panchakarma

D.G.M Ayurveda Medical College

GADAG-582103 KARNATAKA

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### “Swine Flue (H1N1) & Ayurveda”

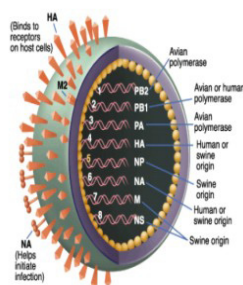
#### Introduction:

In the present era as the world goes on developing, increase in the population, extremely developed science, sophisticated latest facilities and Researches established in the Medicine. In the same way in the present day today life emerging newly, and highly infectious diseases in which Swine flue (H1N1) is one among them which is fatal disease because it has been taken numerous life. In this health article the concept of Swine flu and preventive measures are elaborately discussing.

- Swine influenza: first proposed to be a disease related to human influenza during the 1918.
- In 1998, Swine flu was found in pigs in U.S
- From all over the world the death rate with swine flue is about 10.900 and around 14.000 swine flue affected patient was detected.

Swine flu means it's a type of Virus which is cause for the disease.

- H1N1 means Hemagglutinin Neuraminidase virus which is the cause for the Swine flu; the RNA virus that causes the swine flu. This is also called Swine flu, Mexican flu, hog flu and pig flu. Influenza is transmitted. Symptoms are more common in unrelated gastroenteritis, sometimes called "stomach flu" or "24-hour flu".

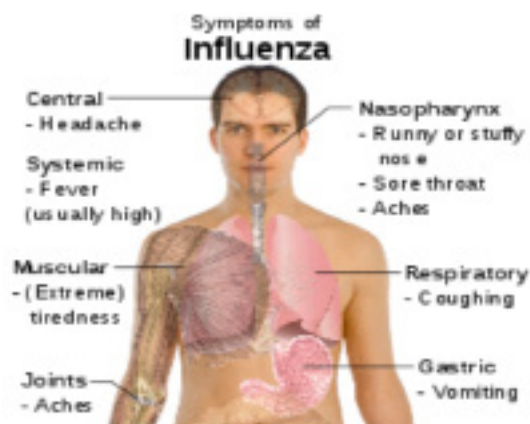


#### Mode of Transmission of Infection:

- The virus spreads through respiratory secretions which are generated by coughing or sneezing, contact with these body fluids. Human to human in two different ways through the air, and by direct or indirect contact.
- Intensive farming (the practice of cultivating the land) may also increase the risk of transmission.
- Airborne transmission through the aerosols produced by pigs coughing or sneezing is also an important means of infection.
- The virus usually spreads quickly through herd (a group of cattle or sheep or other domestic mammals).
- Direct transmission of a swine flu virus from pigs to humans is occasionally possible (called zoonotic swine flu)
- Symptoms include fever, cough, sore throat, body aches, headache, chills and fatigue. The 2009

outbreak has shown an increased percentage of patients reporting diarrhea and vomiting.

- Swine influenza infection is considered in the differential diagnosis of patients with acute febrile respiratory illness



A diagnosis is confirmed: Swine flu requires laboratory testing of a respiratory sample

(A simple nose and throat swab).

### DIAGNOSIS:

- Diagnosis can be made by sending a specimen, collected during the first five days for analysis
- Samples should be taken from the deep nostrils (nasal swab), nasopharynx (nasopharyngeal swab), nasopharyngeal aspirate, throat or bronchial aspirate
- Appropriate precautions should be taken in collecting specimens since this may expose to the collector through respiratory secretions from patients.

### LABORATORY TESTS:

- Rapid tests and immuno fluorescence:
- Serology: A four-fold or greater rise in specific influenza A (H1N1) swine virus antibody titers indicates recent infection with the virus.

- PCR: A sample is considered positive if results from tests using two different PCR targets give positive results in the same specimen, the possibility of PCR contamination should first be excluded by repeating PCR procedures using new RNA extract from the original specimen or RNA extract from another specimen.

Confirmation of novel H1N1 flu infection can only be made by reverse-transcription polymerase chain reaction testing or viral culture.

### PREVENTION:

Prevention of swine influenza has three components:

- Prevention in swine: Include facility management, herd management, and vaccination
- Prevention of transmission to humans: Farmers and veterinarians are encouraged to use a face mask when dealing with infected animals. The use of vaccines on swine to prevent their infection is a major method of limiting swine to human transmission.

- Prevention of its spread among humans: Influenza spreads between humans through coughing or sneezing. This includes frequent washing of hands with soap and water or with alcohol-based hand sanitizers, especially after being out in public

### SUPPORTIVE TREATMENT:

- Adequate liquid intake and rest, soup to ease congestion, and over-the-counter drugs to relieve pain.
- Aspirin, for instance, is very effective for treating fever in adults but is not recommended for children without a doctor's advice

Antiviral drugs can be given to treat those who become severely ill.

- There are two such medications that are recommended for use against the 2009 H1N1 swine flu virus, Oseltamivir (Tamiflu) and Zanamivir (Relenza)

During your travel

- Avoid close contact with sick people
- Avoid touching your eyes, nose or mouth!
- Wash or clean your hands frequently!

**In Ayurveda there is no direct reference or exact disease in terms of Swine flu but Ayurvedacharyas have been explained the different concepts which will help to think this type of infectious disorder and explained preventive measure which will help to prevent the disease.**

**Janapadadwamsa-** When there is vitiation of Air, Water, Earth and Season suddenly manifests a similar type of Lakshans and many people are infected at the same time.

**Sankramikaroga-** The disease which will spread from one person to another is said to be as Sankramika.

- It will transmit from one person to another through respiration. The secretion or body fluids of the infected person.
- Doing copulation with infected woman.
- Touching the infected persons face mouth etc.
- Using the infected persons materials and belongings.
- Secretion which produced on Sneezing and Coughing spread the infection. Will manifest Jwara, Kushta adi Sankarmika rogas.

H1N1 or Swine flu is also such disease in which will be manifested by different body secretion while Sneezing, Coughing. This is also considered one of the Sankramika roga which will manifest from one person to another.

**Vydhikshamatva-** The resistance power against the disease is called Vydhikshamatva.

For the manifestation of the disease Immunity plays very important role in preventing the diseases. Vydhikshamatva mainly depends upon the

equilibrium of Doshas, Healthiness of the dhatu, Pravara Satva of an individual and Bala.

### **Sannipataja Jwara:**

**In Ayurveda H1N1 or Swine flu is not directly explained or correlated or equated with any one disease by the acharyas but the clinical feature explained for Swine flu majority it mimic to Jwara that to Sannipatajwara. This Jwara is also one of the Sankramika roga which will spread from one person to another explained by the Acharya Sushruta.**

### **Sannipataja Jwara and clinical features of H1N1**

Sl.No	Sannipataja Jwara	H1N1
1	<b>Jwara</b>	Fever
2	<b>Kasa Chardi</b>	Cough
3	<b>Swasa</b>	Breathlessness
4	<b>Kantakujana</b>	Sore throat
5	<b>Shirovedhana</b>	Headache
6	<b>Angasaithilya</b>	Body ache /weakness / Fatigue
7	<b>Ashtisandhi siravedhna</b>	Joint & Muscular pain
8	<b>Aruchi</b>	Loss of appetite
9	<b>Jiwhasrava</b>	Nausea
10	<b>Chardi</b>	Vomiting
11	<b>Shyava Raktavarna mandala</b>	Skin rash / Discoloration of skin
12	<b>Hritpeeda</b>	Chest pain

Majority of the features Swine Flu hold good for the lakshanas of Sannipataja jwara

### **Chikitsa sidhanta:**

- Sawasthya rakshana: Prevention of health of a person
- Vikaraprashamana: Giving treatment when person suffering with the disease.
- Nidanaprivarjana that is avoid the cause is the first line of treatment



- A state of separation between persons or groups, from the diseased one
- Purifying the area, like dhoopana, homa, Havana... Different Daivavyapashraya chikitsa.

### **Rasayana sidhanta:**

Rasayana is one which will nourish Rasadi saptadhatu, increases strength of an individual and they are acting as immunomodulator like.

### **Single medicinal herbs**

- **Amrita**
- **Tulasi**
- **Pippali**
- **Maricha**
- **Shunti**
- **Ashvagandha**
- **Guggulu etc**

The person who use these herbal medicines will enhances the immunity and helps in preventing the ailment.

### **Use of Rasayana like**

- **Chavanprash**
- **Agastyaharitaki**
- **Vyagriharitaki**
- **Personal hygiene**
- **Intake proper quantity and good quality of food**

### **• Drinking pure water**

### **• Good sleep**

### **• Performing Yoga, Pranayama and Dhayana**

### **Guidelines:**

- Taking care and closing the mouth and nose with handkerchief while sneezing Coughing
- Isolation of affected person
- Avoid or be careful Group gatherings like Film theaters, Circus, Marriage ceremony and Attending functions
- Use regular antiseptic like Dettol, Savilon or any antiseptic lotion soon after touching the patients Lips, Mouth, Nose etc.
- Avoid shaking hands, kissing and long distance traveling
- If you are suffering with Fever, Cold, Cough etc consult the Doctor immediately.

If any body found any symptoms as above mentioned consult your doctor for proper medication as the earliest Self medication is dangerous. The information given here is to creating awareness of this H1N1 among the public and some preventive guidelines are suggested here.

---

## **Plastic surgery in Medieval India**

During one of his battles with the British, Tipu Sultan (1793 A.D.) the ruler of Srirangapatnam (in the present Karnataka state in South India) had, as punishment, cut the nose of 4 Indians, and 3 other Soldiers- who served in the British Army. The commanding officer of the British contingent in India chanced upon an Indian merchant who had his nose fixed after cut as a punishment for adultery. The commanding officer traced the vaidya (doctor) from Maratha (the present Maharashtra) and had him fix the noses of his Indian soldiers. This was reported in the Madras Gazetteer of 1793.

A detailed account of the reconstruction procedure was published in the October 1794 issue of the *Gentlemen's Magazine* published from London. Inspired by this account, an English surgeon J.C. Carpue published his experience. A German surgeon Graefe followed Carpue's example. Rhinoplasty thus moved from Maratha to Europe and has come back 200 years later as Plastic surgery in India.

*- Bhale Bharth English Monthly,*



## **Gyan-Daan**

**M.D (Ay.) / M.S / Ph. D**  
**Research Thesis**

**Dr Rajeev Pundir M.D, Shalya Tantra**  
Professor, Bharat Ayurvedic College,  
Muzaffar Nagar (UP)

### **A Clinical Study of Chandraprabhavati in Mutrasangha (Retention of urine) with special reference to Benign Prostatic Hyperplasia**

#### **Introduction:**

The term Mutrasangha is applied to the retention of urine of any degree and by any cause. Benign Prostatic Hyperplasia (Prostatic Enlargement) is the most common disease affecting the ageing males above 50 years which give rise to obstructive uropathy leading to acute / chronic / partial or complete retention of urine. Because of its damaging effect on renal function, Mutrasangha i.e., obstructive uropathy is one of the most important disorders.

Despite extensive researches, no medical management of this disease has been invented till now in conventional medicine and surgery remains as the only alternative to cure BPH which may lead to serious complications sometimes. In this context when I searched Ayurvedic books I found a number of drugs, both single and compound, recommended for the genitor-urinary problems. **And, finally I selected Chandraprabhavati for my research work on BPH during my post-graduation (1981-84) under Dr Kulwant Singh at IPGT&R, Gujarat Ayurveda University, Jam Nagar.**

#### **Highlights of The Clinical Study**

1. Total 20 cases of BPH were selected for this study.
2. The study was divided into 2 groups: Group I : comprising chronic partial retention of urine. Group II : Chronic retention of urine with incontinence or retention with overflow.
3. Each group comprised 10 cases.
4. A higher incidence was found among the persons between 57-60 years of age in group I and above the age of 60 in group II.
5. No social class was found to be immune to BPH.
6. Both, the married and the unmarried males are subjected to this age related disease called BPH.
7. No hereditary relation has been found causing Mutrasangha due to BPH.
8. History of abstinence or sexual dejection was noted in both the groups covering the duration of two to three months.
9. Frequency of micturition, difficulty in passing urine, chronic / partial retention of urine, burning micturition and constipation were noted as the most common symptoms in both the groups.
10. Incontinence of urine, involuntary dribbling,

retention with overflow, dysuria and haematuria were noted as the specific symptoms in Group II only.

11. The degree of prostatic enlargement was detected to be 1st and 2nd degree in group I and 2nd and 3rd in group II through per rectal finger examination.

### Results

1. Complete relief in the symptoms was observed on administration of Chandraprabhavati upto the maximum duration of six weeks in group I.
2. Marked relief was noted after the duration of 8th weeks with Chandraprabhavati in group II.
3. Marked lowering of pus cells / red cells count was observed in the routine-microscopic studies of the urine in both the groups.
4. A better quality of urine in colour, appearance, and clarity was detected on physical examination of the urine in both the groups.
5. The cases of both the groups showed a marked decline in specific gravity in the physical examination of the urine.
6. The pH of the urine remained as acidic in both the groups throughout the study.
7. Marked diminution was noted in bacterial content of the urine on urine culture in both the groups.
8. The blood examination showed a rise in Hb% and PCV and a fall in ESR.
9. Blood Urea and Serum Creatinine came to normal in those they were raised in the beginning of the study.
10. The other parameters like BP remained almost unchanged throughout the study in all the cases.
11. Radiological studies showed a decreased impression of the enlarged prostate over the wall of the urinary bladder in all the cases in the comparative studies of the pre and post treatment cystograms. Ultrasonography was not introduced at that time.
12. The findings of per rectal examination pertaining to the size, shape, consistency, mobility, median groove and tenderness etc revealed a significant improvement in all the 20 cases. As a result the flow of urine improved gradually.
13. Residual urine reduced to below 50 ml in most of the cases.
14. Biopsy not done in any of the cases.

### Mode Of Action Of The Drug

1. A detailed study of Chandraprabhavati's constituents concluded that it bears a **Tridosh-shamak activity mainly on the genitor-urinary system.**
2. It's a potential anti-inflammatory agent and causes decongestion of the prostate.
3. Being a mild and progressive diuretic it increased the flow of urine improving the output and the changed the stream from weak to stronger. However, Cystometry was not introduced till then and subjective evidences noted as reliable source of investigation.
4. Subsequently, a gradual improvement was noted in intake of fluids.
5. Chandraprabhavati bears some constituents having mild laxative action and relieved the constipation of the patients.
6. Antibiotic activity of Chandraprabhavati was detected in vitro objectively by microbiological



experiment and in vivo on pre and post treatment urine culture.

7. No side or after effect of this drug was noted even after a prolong administration.
8. Cost of Chandraprabhavati is far less than any operative procedure.
9. It may be taken for a longer time without a fear of having any side effect.
10. No hormonal analysis was available at that time in our institute. So it's difficult to proclaim its effect on hormonal backgrounds.
11. Its aphrodisiac effect has a positive effect on the musculature of urinary bladder and improves

its function making it strong resulting into a strong stream of the urine.

### Conclusion

From the above study, findings and detailed discussion, I can say that in the initial and chronic cases of BPH where partial obstruction is there, Chandraprabhavati is highly effective and its timely but prolong use may save the patient from surgery. However, more advanced studies are required in the light of Ultrasonography, CT scanning, Biopsy procedures and hormonal essaying.

But, Ayurvedic parameters are far more subjective and equally authentic and we must give proper credence to them also.

**Re-orientation of Knowledge among teachers  
or student scholars or both is must for growth of Ayurved.**

## जरा विचारें

1. ना कद बढ़ा ना पद बढ़ा मुसीबत में जो खड़ा, वह सबसे बड़ा • डा. हरीश
2. अपने चाहने वालों से बातचीत करते रहें, क्योंकि अक्सर बंद मकानों में  
मकड़ी जाले लग ही जाते हैं • कबीर
3. रोग का सूत्रपात मन में ही होता है अतः मनोबल बढ़ाये • पंतजलि
4. श्रेष्ठता जन्म से नहीं परन्तु अपने कर्मों व कला से आती है • डॉ विनोद
5. नफरतों के शहर में अपने अपने खेमे हैं  
जहां लोग जो तेरे मुँह पर तेरे हैं, मेरे मुँह पर मेरे हैं • डॉ मदन सिंह

## **HERITAGE**

## **HERBAL - MEDICINE**

### **Aaragvadh**

**Hindi**- Amaltas

**Sanskrit** - Rog Nashak

**Latin** - Cassia Fistula

**English** - Purging Cassia

**Description** : Round the year grown & found in all parts of India.

**Tree** - 25-30 feet high; **Trunk** - Brownish red

**Leaves** - Clusters of 1 foot containing 8-16 round/ spear shaped green leaflets.

**Flowers** - Bucket of tiny hanging yellow of 1.5-2.5" diameters.

**Fruits** - (Fali) 1-2 foot long tube like, cylindrical of 1" wide diameter, little hard when green, when ripend contains 25-100 seeds of round & flat with yellow black mucilaginous gelly.

**Chemical Composition** - Phal Majja contains - Anthroquinon, Glucose 60%, Glutin, Pectin, Pigments, Calcium Qxalate resin & water, Tannin 10-20%, Flavonoids and Glycosides.

### **Ayurvedic Features**

**Gunn**- Mridiu (Light Sweet), Guru, Snigdh

**Rass**- Madhur

**Virya** - Madhur

**Vipaak** - Madhur

### **Clinical Therapeutics**

1. Controls **Vat, Pitt, Kaph** based on ayurvedic gunn.
2. Locally poultice of leaves as vedna shamak (**analgesic**), Shoth har (**anti-inflammatory**), Kushth har (**anti-dermatitis**)

3. Relives Adhyaman (**anti-flatulant**), Kosht Bandhta (**constipation**)
4. Corrects Yakrit Vridhi and Kaamla (**hepatic enlargement & jaundice**).
5. For Mukh Paak (**mouth ulcers**) by gandush (**gargles**).
6. As Hridya decreases (**raised L. D. L & Triglycerides**) and raises H.D.L
7. Corrects Kaas- Swas (**Breathlessness**).
8. As Jwarnashak (**anti-pyretic**) for visham - jwar (**Black Water fever**).
9. As Mutrajanan (**diuretic**) for dah (**burning micturition**), pida (**dysuria**), poroush granthi (**B.P.H**).
10. Mukh sevan (**orally**) for sheet-pitt (**urticaria**), vaat-vyadhi (**Neurological disorders**), aamvat (**rheumatic disorders**).

**Compounds : Aargvadhaadi Tel, Aargvadhaadi Leh, Aargvadhaadi Arisht.**

In 1912, Casimir Funk, Great Biochemist of Poland Discovered The Concept of Vitamins; Vital- Amines (Amino -Acids)

## Re-Thoughts

1. Eat food as medicines otherwise you have to eat medicines as food- **Ratan Tata**
2. Great minds have purposes others have wishes - **Washington Irving**
3. Accept compliment & criticism like sun & rain which help flowers to grow- **Babbar S.K.**
4. Dream as dreams transform into thoughts resulting into action-**Abdul Kalam A P J**
5. Mind is every thing what you think so you become - **Lord Budha**





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### Naishthiki Chikitsa

#### Abstract

Since time immemorial human race is in search of absolute eradication of miseries (Duhkha) from life. All Aastika Darshanas and Ayurveda (as an independent Darshana) have expressed deep thoughts about Moksha which is one and the most important achievement amongst Chaturvidha purushartha.

**Naishthiki chikitsa is the practice which will definitely help the person to proceed on the path of Moksha. Understanding of Karma–Karmaphala siddhanta; Lok-Purusha samya siddhanta, Punarjanma siddhanta, is the basic need for every person. Gradual elimination of undue various desires and excessively dominant Rajas and Tamas guna of Manas; simultaneous efforts to increase Sattva guna of Manas and Karmakshaya after its bhoga; help a human being to pave the road towards Aatyantika vedana nivrutti. Yoga and Moksha are the two important paths mentioned in Charaka samhita for vedana nivrutti. Yoga is said to be karana (cause) to attain Moksha as karya (effect).**

Today in society Spirituality is the most popular word. A lot many Sampradayas and Gurus are putting efforts to guide common man about spirituality, awareness of self etc. Here it seems that Charakacharya expected Ayurvediya Chikitsaka (Physician) to get mastery in treating healthy individuals and disease free community through Naishthiki chikitsa. Moksha is the supreme outcome of this chikitsa.

#### Introduction

Ayurveda is the first ever medical science which defined health as perfectly balanced state of; physical (sharira) , psychological (mana), social and spiritual (indriya-indriyarth and atma) components of human body . Maintaining healthy status in human being is the primary aim of Ayurveda .Treating physical, psychological and many other ailments is the secondary aim of an Ayurvedic physician. Thus to advocate chikitsa for unhealthy persons and bring them to normal state of balance is the essential function of a Vaidya. However for healthy people to get permanent rid of pain or miseries from life had been the quest. Since time immemorial Shad darshan have

tried to explain it in their terms whereas Ayurveda profoundly described Naishthiki chikitsa.

There is no direct reference about Janma as Bhavaroga (disease) Charak samhita; but Mrutu is termed as Swabhavika vyadhi; which is the result of effect of kala on the body. Again it is mentioned that swabhava is nish pratikriya i.e. it cannot be avoided by any ordinary treatment. Here Chakrapani said that any treatment other than Rasayana is not effective to react with swabhavika roga. Further it is explained that once the rejuvenating effect of Rasayana is over; swabhava still persists. Thus it shows that janma, jara and mrutyu are unavoidable; by the time, the specialized treatment i.e. Naishthiki Chikitsa is not done.

Spirituality is the word gaining popularity in this era where it is intimately linked to resolving mental health issues. A lot many people are seen putting hard efforts to learn about self awareness, spirituality etc. Since ages our nation India has background of spirituality. Ideally it is one's journey towards the discovery of higher truths, true nature of reality and Moksha. Here it appears that Charaka expected Ayurvediya chikitsaka to treat healthy and disease free community through Naishthiki chikitsa where Moksha is the Supreme outcome.

**This articles aims to encourage all Ayurvedic Vaidyas to think, to progress and to practice this specialty type of**

**Chikitsa for self; for their near and dear ones and for society and patients. We the human beings are bestowed by the God with Manushyatva (first basic requirement to attain moksha). Mumukshutva and Mahajanasamshraya are the two remaining goals which are to be achieved.**

**Till date no previous article is noted describing this topic. Only in articles related to disease cancer, they have mentioned Naishthiki chikitsa as one of the four types of chikitsa quoting the common reference.**

### **MATERIALS & METHODS:-**

Sharira sthana of Charaka Samhita is the supreme legacy of thoughts. Here the ultimate goal of human life; Moksha is described in detail Shareera sthana chapter 1 and 5 along with Sutrasthana chapter 1 are the crown adhyayas. Definition, aims, need and methodology to achieve Moksha are well versed by the Acharyas to explain Naishthiki Chikitsa.

### **Naishthiki Chikitsa –**

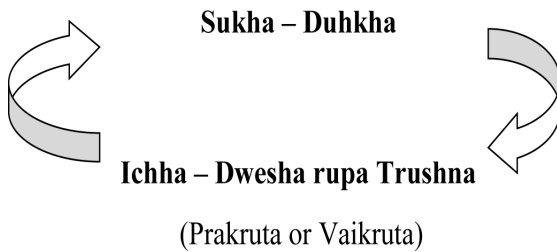
**Charak has defined Naishthiki chikitsa as, one which is without Upadha. For clear understanding of the definition commentary of Chakrapani is useful. He comments that Chikitsa which eradicates all miseries from life and results in Moksha is Naishthiki chikitsa. Nishtha according to him is atyanta-**

**duhkha- moksha (as good as Moksha) and chikitsa for the same purpose is Naishthiki chikitsa. Meaning of term Upadha is Trushna (desires good or bad). So Vinopadha gives meaning as Trushna Shoonya Pravritti (proceeding without Trushna) leads to Moksha.**

Gangadhara Naishthiki chikitsa as Moksha sadhani and it definitely blesses with Apunarbhava (no rebirth). Iccha and Dwesha (desires and hatred about worldly matters though Prakruta or Vikruta) are nothing but Trushna and act as Upadha. Here Upadha is a hetu which ultimately gives rise to Duhkha and Aashraya of Duhkha. The term **Naishthiki is also used as an adjective for Buddhi which is Satyabuddhi or Mokshasadhika Buddhi.**

In short it can be said that Upadha itself is Trushna and is the root cause of all miseries. Elimination of all Upadha leads to complete Duhkha nasha . This is a vicious circle as shown below.

Hence to stay away from all types of Vishaya (Shubha or Ashubha / Dharma or Adharma mulaka) by non-initiation of any work or non union with any artha; will help



an individual to stay away from all miseries. Non initiation of any work does not mean to be idol; but to initiate work without Raga (attraction) and Dwesha (hatred) and also be inert towards the resultant of the deeds.

### Why required?

Usually due to likes and dislikes, human beings start the work; which may leads to Duhkha. In this regard **Dhi-Dhruti-Smruti Bhramsha; Asatmyendriyarthasamyoga** as well as Karmaja & Kalaja effect (samprapti) are the three main causes of Duhkha.

Here Chakrapani explains Karma samprapti means Pachyamana Karmayoga i.e. about Karmas which essentially result into Karmaphala and Kala samprapti means, not the diseases which occur in that particular Kala (Kalajanya) but those which are expressed at that particular time (Kalavyanja).

Charak says that Buddhi is always meant to realize balanced things; as they are incorrect in understanding about Nitya and Anitya; otherwise understanding of Hita and Ahita is Buddhi bhramsha. Dhruti is supposed to control Manas from undesired works. Actually the things always to be remembered by a person are stored in Smruti (memory). Smrutibhramsha occurs due to excessive indulgence in Rajas & Tamas dominant activities by a person. This leads to loss of remembrance of eternal principles (Tattvadyna).

Such a **Dhee-Dhruti-Smruti vibhrashta Purusha** performs the activities which are termed as **Ashubha Karma**. It is nothing but **Pradnyaparadha**. **Ashubha Karma** causes Dosha Prakopa at physical level (**Tridosha prakopa**) as well as psychological level (**Raja-Tama Vrudhhi**). **Pradhnyaparadha** is the major cause for all types of diseases.

Here it should be realized that one must always try to keep **Dhee-Dhruti & Smruti** in proper state. For this purpose reducing **Rajas & Tamas Doshas of Manas & increase in Sattva Guna of Manas is the basic need**.

Further Charak expressed **Karma-Karmaphala Siddhanta** which states that there is no Karma however minute or great; for which there is no **Karmaphala**. All **Karmaja** diseases prove ill-effects of the proper treatment and usually they subside after complete **Karmakshaya** i.e. essential experience of **Karmaphala** (bhoga).

At this stage it is well understood that **Upadha, Pradhyaparadh, Kala, and Karma** play important role in creation of any kind of pain, disease or miseries. Now it's essential to know how the miseries can be ruled out of the life.

### How?

Sukha is nothing but Aarogyta. For the **Sukha samayog** (i.e. balanced utilization of kala-buddhi-indriya) is the only cause

and actually it is very difficult to achieve. As already explained, the relation between **Trushna** and **sukha- dukha**; if there is no union of artha-indriya-manas and **atman**, there won't be **vedana** (pain). Here Charakacharya explained Yog and Moksha as two main paths for complete elimination of vedana from the body as well as life.

Yoga is said as Karana (cause) for **Moksha**. Chakrapani said that Yoga and Moksha both are equally important with respect to **Vedana nivrutti**. In case of **Moksha** there is absolute **Sharira Uchcheda** (destruction) so, no recurrence of Vedana at all, where as in case of **Yoga** eliminated **Vedana** can recur.

This indicates that in Yog, a particular status of **Sharira** and **Manas** is attained so that **Vedana** is not perceived. Here **Manas** is united with **Atman** and stage of **Vashitva** or **Yogi** is achieved. Important eight types of powers are also gained by such a **Yogi Purusha**.

In Gangadhar commentary, Yoga is explained in detailed as obliteration of **Vrutties** (thoughts) of **chittah** (manas). Instead of learning the whole description, in short it can be said that **Abhyasa** (maintaining a particular body posture for longer duration) and **Vairagya** (vivek vairagya after self realization) helps to progress in the path of Yoga.

Charakacharya said Moksha is A-punarbhava (no rebirth) because all types



of bonds with respects to sharira- buddhi- ahankara are permanently lost. This is possible only after complete elimination of **Rajas & Tamas** from **Manas** and **Karmakshaya** after Bhoga of any strong Karma.

### How to attain Moksha ?

A detailed description about to be performed things (**Moksha Upaya**) is available in Charak samhita. One must follow that list sequentially to reach the goal. As mentioned earlier Tattvasmruti is really very important in this regard.

Smruti helps in **duhkha pramosha**. It is possible by acting according to Guru vachana from **satsevan** till **dhruti**. It is important to realize the Swabhava of all the Bhavapadarthas so that all pains can be released. Various eight reasons are mentioned in Charaka samhita which create smruti. Here **Tattva dnyana prapti** is very important due to which person can remember everything; including self realization as **Atman**.

### How Tattvasmruti is Moksha sadhaka?

Tattvasmruti is one of the best paths unanimously accepted by **Jeevanamukta** personalities. One who follows this path will never get rebirth is the strong thought of Yogi as well as Samkhya tattvadnya. **Jeevanmukta personalities** are such that either they get **renaissance** (moksha) or are capable to take birth as per their wish (**incarnation**).

Further Adyana is major cause for samsar or bhavaroga and samyak dyana is for Moksha. Unless and untill **Satyabuddhi** is generated and I am different from the body is realized; person suffers from **duhkha** or **vedana**. As soon as self realization occurs; **dnyani** person due to Tattva sakshatkar gets rid of everything other than itself.

Following Guruvachana and **Kriyasanyas** (anarambha of karma) leads to more abhyasa. Progression in the same path inculcates knowledge about all bhavapadarthas. This motivates the of knowledge is absolute Satya. To realize this concept Lok -Purusha samya siddhanta is elaborately described in 5th adhyaya i.e. Purushavichaya. Here similarity between Lok and Purusha is with respect to perception of sukha and dukkha. It is but natural to avoid the painful things; still it is essential to avoid even pleasant things which are always accompanied by dukkha. One who becomes **raga-dwesha-mukta** can become Satyadnyanawan. The same person is recognized as Sthitapradnya in Bhagavadgita. Ultimately this leads to absolute sattvavruddhi in a person, which can eradicate greatest type of moha( mahamoha (cause of rebirth).

It's not overnight miracle to achieve **lok purusha samya dnyana**. Still persistent efforts towards **Apavarga** (Nivrutti) are required. By considering sarva Lok in self and self spread all over in Lok generates **Satyabuddhi**; due to which person realizes

that, you yourself are the cause of **sukha** as well as **duhkha**. **Satyabuddhi** is also called as **Vidya, Siddhi, Mati, Medha, Pradnya and Dnyana**. Sant Dnyaneshwar is an idle example, who asked the God, **Pasayadana for wellness of community**.

Apavarga is also called as **Brahma, Akshara, Moksha, Amruta** etc. All the required things to be performed by **mumukshu** are enlisted in this chapter for **apavarga anushthana**. It gives a person absolute peace which is never going to end.

In **Charaka Samhita** apart from description about moksha; upaya of moksha are enlisted in Shareera sthana 1st and 5th chapter. **Sadvrutta anusthana** and **Achara rasayana** are the two other very important keys while proceeding for Moksha. Detailed description of **Mokshopaya** though is important; is not explained here, as it requires another article.

In short it can be said that concept of Moksha is really difficult to understand. Agama is the only **pramana** in this respect. Moksha can be attained by complete eradication of **rajas** and **tamas** doshas of manas; simultaneous karmaphala-bhoga of balawan karma and separation from all worldly matters. Samayoga of indriyarthasamyoga which is really difficult; should be tried to achieve. Ultimate truth i.e. God / Supreme power should be believed, followed through Nishtha.

Here one thing should be remembered by

Ayurvedic Vaidyas that **Upekshasana** type of treatment is absolutely different from **Naishthiki Chikitsa**. Genuine efforts by Vaidya for self improvement and further for healthy society in this regard are expected.

Simple procedures like **satsangati, sadgranthwachana, namasmarana/japa, tapa, dhyana** are useful along with the directions given by our **science-Charaka Samhita**. This article is just motivation; actual practice is the part of self experience.

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## Moving News

### जल्द एचआईवी का टीका बनेगा



संकेत

अटलांटा | एजेंसी

विशेषज्ञ एचआईवी संक्रमण से निपटने का तरीका ईजाद करने के बेहद करीब हैं। अमेरिका के अटलांटा स्थित इमोरी यूनिवर्सिटी स्कूल ऑफ मेडिसिन के विशेषज्ञों ने यह दावा किया है।

शोधकर्ताओं का कहना है कि ट्रेग कोशिकाएं एचआईवी संक्रमित गर्भवती महिला से उसके भ्रूण में संक्रमण फैलने से रोकती हैं। यह कोशिकाएं एक तरह की रेगुलेटरी लिफोसाइट होती हैं।

प्रमुख शोधकर्ता पीटर केसलर का कहना है कि गर्भ में चल रहे भ्रूण में एचआईवी संक्रमण रोकने की वजह का पता लगाना बड़ी उपलब्धी है। इससे उन तरीकों को ईजाद करने में आसानी होगी, जिससे प्रतिरोधक क्षमता को प्राकृतिक तौर पर मजबूत बनाने का रास्ता तलाशने में मदद मिलेगी।

वैज्ञानिक काफी समय से इस बात से हैरान थे कि एचआईवी संक्रमित मां से जन्म लेने वाले शिशुओं के संक्रमित होने की दर काफी कम है। आज की



**सक्रिय कोशिकाओं को संक्रमित करता है वायरस**

अध्ययन के दौरान शोधकर्ताओं ने 64 उन शिशुओं के खून की जांच की, जो एचआईवी संक्रमण से मुक्त थे। उन्होंने एचआईवी संक्रमण के साथ जन्म लेने 28 अन्य शिशुओं के खून की भी जांच की। उन्होंने देखा कि संक्रमण रहित शिशुओं में ट्रेग सेल्स की संख्या अधिक थी। एचआईवी संक्रमित शिशुओं में अन्य लिफोसाइट के प्रकार सक्रिय और काफी अधिक थे। विशेषज्ञों का कहना है कि एचआईवी वायरस सिर्फ सक्रिय कोशिकाओं को संक्रमित करता है।

तरीख में एंटीरेट्रोवायरल दवाओं की मदद से एचआईवी संक्रमण को सफलतापूर्वक काबू किया जा सकता है। संक्रमित शख्स को आजीवन इन दवाओं का सेवन करना होता है।

### पालक खाने से जोड़ों का दर्द दूर हो जाएगा



संकेत

लंदन | एजेंसियां

ऑस्टियो-आर्थराइटिस से पीड़ित मरीजों के लिए पालक, ब्रोकोली, पत्तागोभी और अजमोद का सेवन खासा फायदेमंद साबित हो सकता है। ब्रिटेन स्थित सर्रे यूनिवर्सिटी के हालिया अध्ययन में इन हरी सब्जियों को हड्डियों और जोड़ों के दर्द से राहत दिलाने में असरदार करार दिया गया है।

शोधकर्ताओं ने 60 से अधिक अंतरराष्ट्रीय अंतरराष्ट्रीय अध्ययनों का विश्लेषण किया। उन्होंने पाया कि पालक, ब्रोकोली, पत्तागोभी और अजमोद विटामिन-के का मुख्य स्रोत

**वजन काबू में रहना जरूरी**

मोटापा ऑस्टियो-आर्थराइटिस के मरीजों की तकलीफ और बढ़ा सकता है। दरअसल, वजन ज्यादा होने पर हड्डियों-मांसपेशियों पर अतिरिक्त दबाव पड़ता है। इससे कार्टिलेज घिसती है और जोड़ों में दर्द व सूजन की शिकायत सताने लगती है।

हड्डियों और मांसपेशियों में दरारों की मरम्मत में इस विटामिन की भूमिका बेहद अहम मानी जाती है। मुख्य शोधकर्ता प्रोफेसर अली मोबाशेरी ने ऑस्टियो-आर्थराइटिस से जूझ रहे मरीजों को रोजाना 1 ग्राम फिश-ऑयल सप्लीमेंट लेने की भी सलाह दी।

### सुबह व्यायाम करना ज्यादा फायदेमंद



संकेत

नई दिल्ली | एजेंसी

शोधकर्ताओं का मानना है कि व्यायाम करने का सबसे सही समय सुबह नाश्ता करने से पहले होता है।

सही डाइट के साथ ज्यादा वर्कआउट करने से भी शायद आपका वजन कम न हो। वजन कम करने और फिट रहने के लिए व्यायाम किस समय पर किया जा रहा है यह भी जरूरी है। कभी-कभी सही डाइट रखने से और पूरा वर्कआउट करने में परेशानी आ सकती है। लेकिन सही समय पर वर्कआउट कर आपको फायदा मिल सकता है। हाई कैलरिफाउंडेशन के डॉ के अग्रवाल का कहना है कि

**सुझाव**

- सुबह शरीर की रक्त शर्करा का स्तर कम रहता है
- सबसे सही समय वही है, जब वायु प्रदूषण सबसे कम हो

सबसे सही समय तब हो सकता है जब वायु प्रदूषण सबसे कम हो। वहीं ओजोन फिटनेस एंड स्पा के फिटनेस ट्रेनर अखलाक कुरेशी का कहना है कि जो भी आपका फिटनेस लक्ष्य है उसे आप कभी भी पा सकते हैं। हालांकि सुबह-सुबह वर्कआउट करने से आपको इसका ज्यादा फायदा मिलता है और आप जल्द वजन घटा सकते हैं, क्योंकि सुबह शरीर का शुगर लेवल कम रहता है।

### भोजन को जहरीला बना सकता है रसोई में प्रयोग होने वाला तैलिया

**कैसे करें बचाव**

- तैलियों को नियमित रूप से साफ करें
- दोबारा इस्तेमाल में लाने से पहले अवश्य सुखाएं
- कपड़े के बजाय पैपर तैलिये का इस्तेमाल करें

मांसाहार पकाए जाने वाले रसोई के तैलियों में ई-कोलाई की मौजूदगी पाई गई। तैलियों को लगातार नम रखने और एक ही तैलिये को कई कामों में इस्तेमाल करने से बचना चाहिए।

-डॉक्टर सुशीला बिरजिया-हरदयाल, प्रमुख शोधकर्ता, भारतीय यूनिवर्सिटी



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## **Treatment of Viral Fever by Naturopathy**

**Naturopathy treatment is not only the treatment of any disease but also treatment of whole body and mind. Human body is made of five elements and these five elements found in nature also. Whenever the balance of these elements got disturbed by un matching food and un natural life style one become ill.**

**Viral fever is caused by virus found in wet temperature it is found particularly in rainy and winter season. The virus enters into human body in silent mode and whenever person drinks cold water cold drinks from refrigerator the silent virus becomes active. Viral fever refers to a viral infection that is caused by an increase in normal body temperature. It attacks to those children or adult whose immune power is weak. The white blood cells are not able to produce large amount of antibodies which fights against pathogens.**

First it attacks in “Respiratory” and respiratory infection causes a lot of troubles in throat, upper airways and lungs. Most common respiratory infection includes a sore throat, common cold, sinus, and then it becomes viral fever.

### **Causes**

- The most common cause of viral fever is the common cold which is caused by a viral infection that affects the upper respiratory tract.
- It spreads when an individual sneezes, cough,

talks or yawns, he/she sprays some tiny particles of viruses and bacteria from his body. Whenever you talk to any one just close in front of person the bacteria enter into your body through mouth or nose and infect you. It can take about 16-48 hours to infect your whole body.

- The most common type of virus led infection is the Respiratory Infection.
- Little children caught infection due to wearing more clothes and by kissing of infected patient.
- It causes due to drinking polluted and dirty water also wrong food and wrong living style..
- **Symptoms :**
- The common symptom of viral infection is very high fever that occurs at regular interval. This fever present in your body for a long period.
- The symptoms can be vomiting, pain in joints, red eyes, burning in eyes, rashes and swelling on the face.
- The symptoms can be , heaviness and, headache, body-ache, white coated tongue. throat ache, running nose,
- The symptoms may be rar pain, muscles pain, Poor appetite, tiredness, cough, headache, skin rashes, diarrhea



### Test:

- Complete blood count test, Viral Antigen Detection Test.
- The Antibody Test, Viral Culture Test

### Treatment

- In Naturopathy The best treatment of fever is fasting three to five days under care.
- Cleaning of big intestine by cold water with 10 ml lemon juice mixing by enema in the morning after toileting.
- Clean stomach by Kunjal Kriya with warm salty water in the morning.
- If it is fever do cold hip bath 15-20 minutes, the fever will go away.
- MehanSnan with cold water be done before bath. Spine bath with cold water be done after bath. It will make strong nervous system.
- If it is high fever then a cold pack or ice pack should be kept over the forehead and on abdomen. The fever temperature will come down in 15-20 minutes.
- When intestines are hot use cold mud pack over stomach and abdomen it will be very beneficial in fever.
- Cold sponge baths or cold friction baths are very effective, and bring down body temperature
- If mud pack is not available you take a cotton cold pack should be applied over abdomen.
- Rubbing the spine with ice also reduces temperature.
- Chest pack and cold compresses on the forehead frequently.
- When fever caused by common cold and cough, do **JalNeti** and then **GhritNeti** it is very beneficial.
- Do rest during fever and use mask on mouth

so that infection could not be spread to other members.

- Whole body pack with cold water wetted bed sheet covering with blanket (ChadarLapaite) and cold water wetted towel on head and hot pack on foot souls use hot water bottles in both sides of body .It is very useful to release toxins of body. It should be done by Naturopath.
- Steam bath of 7-10 minutes be given after relieving of fever.

### Diet:

- Only liquids must be given to patients, Lemon water and orange juice be given.
- At lunch time give the mad (boiled rice water). Tomato or spinach soup be given.
- Boiled coriander dana or green coriander leave tea and give to patient.Methi tea with honey and lemon juice be given.
- Grind 21 Tulsi leaves and boiled it in 2 cup water and sieving it mix one spoon honey and one spoon lemon juice and give to patients.
- In next day give boiled green vegetable or pulse water with little salt and green coriander leaves.
- In third day give light season's juicy fruits in lunch and boiled green vegetables (tori, ghia, palak, tinda,)
- And later on fresh juicy fruits, raw salads, sprouts and could be taken. Gradually, one should take Dalia and then come in normal diet.

### Pranayam:

- In fever Chandrabhedhi, Shitali and SitkariPranayam should be practised in every morning and evening.
- During fever the breathing should be done through Chandra Nadi through left side nostril. It will be very beneficial.

- Do the Anulome-VilomePranayama(Nadisodhanpranayam) which make balance of body mechanism.
- Deep breathing should be done during this period.  
Yogaasana: During fever any yoga asana should not be done. Patients should do rest in **Shavaasan** and in **Shishuasan** it will give more relax to patients.
- After relieving from fever one may do **Matsyaasan** and **Pawanmukt** asana, and twisting of spine also be made under the care of specialist. You may do when body allows.
- If naturopathy treatment is given to patients it will cure to patients very soon in deep root level.



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Scotland - United Kingdom

### Ayurveda For Healthy Platelets

In conditions of decreasing platelets count due to bleeding disorders externally in skin rashes or internally in viral fevers e.g. Dengue, Malaria, Alcoholism, Over use of Non Steriodal Anti Inflammatory Drugs, Bone Marrow Pathologies, Chemotherapy, Degenrative Arthritic, Aging Conditions etc. the ancient medical science has an effective and complete answer as follows.

1. Use of milk specially cow and goat
2. Use of green leafy vegetables in the form of sallad and soup.
3. Use of fresh fruits like grapes, apple, guava, anar, ananas, chiku, papita, khajur etc.
4. Use of swaras from petha (kushmand), awla, anar, patra of papita, giloy, tulsi etc.
5. Use of kwath from chirayta, triphla, dashmul.
6. Commonly used ayurvedic yog Godanti Bhasm, Giloy Satva, Draksharishta, Dashmularisht, Mahasudarshan vati or powder etc.

### **Nasya For Jatrugat Rog (E.N.T)**

With oils of **Shadh Bindu, Til, Nariyal, Sarnso, Cow - Ghee**  
twice a day to check pollution effects of **Smoke & Smog.**

## Recent Developments

# सरकार आयुष दवाओं का जेनेरिक संस्करण लाएगी

### तैयारी

नई दिल्ली | स्कन्द विवेक

महंगी एलोपैथिक दवाओं के सस्ते जेनेरिक संस्करण उतारने के बाद अब केंद्र सरकार आयुर्वेदिक, होम्योपैथिक और यूनानी दवाओं का जेनेरिक विकल्प बाजार में उतारने की तैयारी कर रही है। इसके लिए आयुष मंत्रालय और रसायन एवं उर्वरक मंत्रालय के तहत आने वाले औषध विभाग के बीच सैद्धांतिक समझौता हो गया है।

आयुष मंत्रालय के वरिष्ठ अधिकारियों ने 'हिन्दुस्तान' से बातचीत में कहा कि फिलहाल एक ही तरह की

आयुर्वेदिक और होम्योपैथिक दवाइयां अलग-अलग दवा कंपनियों की ओर से 10 से 15 गुनी अधिक कीमत पर बेची जा रही हैं। इसका कारण ये है कि ज्यादातर दवाएं कंपनियों की ओर से एक ब्रांड नेम के जरिए बेची जा रही हैं। इसके चलते लागत कम होने के बावजूद आयुष खासकर आयुर्वेदिक दवाएं महंगी मिलती हैं।

इसलिए एलोपैथिक की तर्ज पर हमने आयुष दवाओं का भी जेनेरिक संस्करण बाजार में उतारने का फैसला किया है। अधिकारी ने उम्मीद जताई कि इन जेनेरिक आयुष दवाओं की कीमत बाजार में मौजूद दवाओं से 10 गुना तक कम हो सकती है। उन्होंने बताया कि पहले चरण में 80 जेनेरिक आयुष दवाएं बाजार में उतारी जाएंगी।

### आयुष में सबसे बड़ी हिस्सेदारी आयुर्वेद की

आयुष दवाओं में सबसे बड़ी हिस्सेदारी और बाजार आयुर्वेदिक दवाओं का है, जो कि होम्योपैथिक और यूनानी से 10 गुना से भी अधिक है।

16 हजार करोड़ रुपये का है आयुर्वेदिक दवाओं का बाजार

52 हजार करोड़ रुपये का बाजार होने की उम्मीद 2022 तक

● डाबर, झंडू, बैद्यनाथ और पतंजलि का है आयुर्वेद के कुल बाजार के 80 फीसदी हिस्से पर कब्जा

### इन बीमारियों के लिए मांग

आयुर्वेदिक दवाओं के माता-पिता, जीवनशैली से जुड़ी बीमारियों के लिए सबसे अधिक लोग आयुर्वेद का सहारा लेते हैं। इनमें डायबिटीज, हायपरटेंशन, एंजायटी, ऑर्थोराइटिस और पावन समस्या के मरीज सबसे अधिक होते हैं।

आगे चलकर सभी महत्वपूर्ण दवाओं का जेनेरिक संस्करण लाने की कोशिश करेगी।

अधिकारी ने कहा कि औषध

विभाग से हुए समझौते के मुताबिक, सार्वजनिक क्षेत्र की कंपनी बीपीपीआई के जरिए टेंडर जारी कर के जेनेरिक आयुष दवाओं की खरीद

की जाएगी। इन जेनेरिक आयुष दवाओं को देशभर में मौजूद 3500 से अधिक जन औषधि केंद्रों से बेचा जाएगा।

## Obesity will add to India's disease burden

A new ICMR study suggests 54% of people in the country are inactive

### AYUSH RECOGNISED AS A SCIENTIFIC TERM

NEW DELHI: The Commission for Scientific and Technical Terminology on Friday officially recognised 'Ayush' as a scientific term in both English and Hindi. Ayush became popular as the acronym for five traditional systems of medicine — Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy. As per the commission, Ayush has been defined as "traditional and non-conventional systems of healthcare and healing, which include Ayurveda, Yoga, Naturopathy, Unani, Siddha, Sowa, Rigpa, Homeopathy etc." The government's next step is to get the word recognised as a term for all forms of alternative medicine, and not just the five streams of medicine it stands for. "This would underline the essential unity of all holistic systems of healing. The decision would also add strength to the ministry's efforts to develop integrated solutions to manage the public health challenges of the country," said Shripad Yesso Naik, Union Ayush minister.

इंडियन काउंसिल ऑफ मेडिकल रिसर्च केंद्र के प्रमुख बने, 27 साल के करियर में ढाई लाख मरीजों का उपचार कर चुके

## एलोपैथी के शोध में आयुर्वेद का साथ लेंगे : बलराम भार्गव

### साक्षात्कार

नई दिल्ली | कृष्ण कुमार

इंडियन काउंसिल ऑफ मेडिकल रिसर्च (आईसीएमआर) केंद्र अब गैर संक्रामक बीमारियों से लोगों को निदान दिलाने पर ध्यान केंद्रित करेगा। इसके लिए एलोपैथी में होने वाले शोध आयुर्वेद, सिद्धा, यूनानी और होम्योपैथी जैसी चिकित्सा पद्धतियों के साथ किए जाएंगे।



डॉ. बलराम भार्गव

यह बात आईसीएमआर के महानिदेशक बलराम भार्गव ने कही। उन्होंने कहा कि आईसीएमआर

### इन बिंदुओं पर ध्यान

- डॉक्टरों पर मरीजों का विश्वास कुछ कम हुआ है, डॉक्टरों की इमज सुधारनी जरूरी है
- संस्थान में कौन क्या काम कर रहा है, इसकी निगरानी की जाएगी
- काम करने के लिए उच्च मानक निर्धारित किए जाएंगे

जरूरत पड़ने पर विदेशी संस्थानों के साथ मिलकर भी काम करेगा। डॉ. बलराम भार्गव एम्स के विख्यात

कॉर्डियोलॉजिस्ट रह चुके हैं। वह 27 साल के करियर में एम्स में ढाई लाख मरीजों का इलाज कर चुके हैं। उन्होंने बताया कि आयुर्वेद और अन्य चिकित्सा पद्धतियों के साथ मिलकर काम होगा। लेकिन, यह वैज्ञानिक तथ्यों पर आधारित होनी चाहिए। आईसीएमआर खुद भी मेडिकल प्लांट डिवीजन के तौर पर काम कर ही रहा है। उन्होंने बताया कि नेशनल हेल्थ स्कीम के तहत आयुष्मान भारत जैसी योजनाएं शुरू हुई हैं। ऐसे में स्वास्थ्य के लिए नीति

बनाने वाली आईसीएमआर उन योजनाओं पर काम करेगी, जिन पर अब तक काम नहीं हो सका है।  
डायबिटीज चिंता का विषय : डॉ. भार्गव ने कहा कि गैर संक्रामक रोग जैसे डायबिटीज, कैंसर, हाइपरटेंशन पर आईसीएमआर काम करेगा। डायबिटीज भारत के लिए चिंता का विषय है, क्योंकि यहाँ इससे पीड़ित करोड़ों लोग हैं। लोगों को इसके प्रति जागरूक करने की जरूरत है। वेलनेस सेंटर को आईसीएमआर से जोड़ा जाएगा।

## *CONGRATULATIONS*



**Prof. (Dr) G. S. Lavekar, Former Director General,  
CCRAS-AYUSH, Ministry of Health Govt. of India**

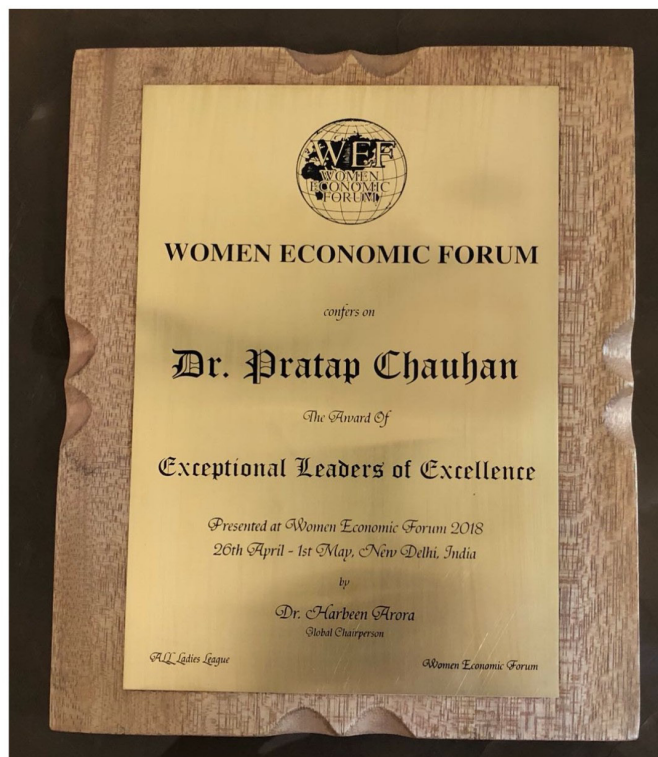




## *CONGRATULATIONS*



**Dr. Pratap Chauhan**  
Director, JIVA Ayurveda



**And**  
**Life Time Achievement award at AROGYAM CONCLAVE**  
**given by Hon. Sh. Shripad Nayak ji, Ayush Minister (I/C)**

## **SEHYOG**

### **Government of India's Initiative (N.P.H.C.E) National Programme Of Healthcare For The Elderly**

Ministry of Health & Family Welfare advocates national centres of aging and regional geriatric centres, will coordinate with local Ayush Practitioners for convergence of intervention for the old population.

#### **Common Diseases of Elders**

**Coronary Diseases / Stroke / Osteoporosis / Dementia / H.T/ C.O.P.D/ B.P.H / Cataract etc.**

**Ashtang Ayurved** classified & codified ancient medicine which is no less at par with modern allopathic system. Fairly ayurved has independent rejuvenation or geriatric medicine defined as **rasayan therapy** to contain and cure diseases of the old age.

#### **Shrangdhar's Samnita**

**'Rasayanan ch tajjgyam yjjra vyadhi nashnam'**

**Ayurvedic protocol as proposed :-**

1. Following the principles of **Swasth-Vrit**.
2. Cleansing - Antah Shodhan by **Panchkarma Therapy, Shirovirechan & Nasya**.
3. Regular use of **Rasayan** as preventive medicine or **bheshaj chikitsa** as curative & preventive treatment.

These are few e.g **Harad, Trifla, Haritkyadi Churan/ Avleh, Amlak Rasayan, Brahm Rasayan, Vidang Avleh, Nagbala, Medhya Rasayan, Pipli Rasayan, Chavanprash Avleh** etc. & many more explained in Ayurvedic texts.

4. Accordingly these yog (formulations) may be added to any allopathic treatment for various diseases of the old age.

This will not only promote health of the old population with chemicals free (allopathic- medicines) treatment where patients are having side effects and evolving more diseases.

**It will be contribution of Ayush practitioners e.g B.A.M.S and M.D (Ay.) doctors in National Programme Of Healthcare For The Elderly in terms of quality treatment as near radical cure.**



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## **MANAGEMENT OF TAMAKA SWASA (BRONCHIAL ASTHMA) IN CLINICAL PRACTICE**

### **ABSTRACT**

**Ayurveda, the ocean of remedies serving mankind since years ago. It is a life science where the herbal, mineral and animal origin drugs are used in the therapeutics in different dosage form.**

**Tamaka swasa is one of the most common Respiratory disorder found in day to day clinical practice, if neglected is life threatening too. Usually it affects all the age groups and both the sex.**

In the present paper an effort is made to study the management of Tamaka Swasa in regular clinical practice.

### **INTRODUCTION-**

As you know that there are many respiratory disorders which are explained in Ayurvedic classics, viz- Kasa, Swasa, Hikka, Pratisyaya, etc. Tamaka swasa is the one of the most common respiratory disease found in day to day clinical practice. it affects all the age groups and both the sex, But it is more prevalent in school going children due to excessive exposure to pollution and cold.

**To Ayurveda, Tamaka swasa is one among the five varieties of Swasa and said to be yapyia in case of more than one year duration of history. In Ayurvedic classics five types of swasa are found, Mahaswasa, Urdhwaswasa, Chinnaswasa, Tamakaswasa and Kshudraswasa.**

### **AETIOLOGY-**

#### **Ahara-**

- Vata, Kapha prakopaka ahara,
- Laghu, Ruksha, Shitala, Atisnigdha, Vidhahi, Guru, Vishtambi, picchila, Abhisandhi ahara and pana.
- Adyashana, Vishamashana.
- Dadhi sevana, Mahsha sevana, Pinyaka, Taila, Anupa mamsa, etc.

#### **Vihara-**

- **Vata, Kapha prakopaka vihara,**
- **Shita sthana nivasa**(Living in cold and clammy areas.)
- **Dhuma Rajo sevana** (Living in dusty, smoky, areas.)
- **Atiatapa and anila sevana** (Excessive exposure to hot sunrays and wind.)
- **Ati vyayama, Karmabhara** (Excessive exercise, lifting and carrying of heavy articles.)
- **Dhumapana** (Excessive smoking.)
- **Vegadharana** (Suppression of natural urges.)
- **Apatarpana** (Pasting or intake of less nutrient diet.)
- **Atimytuna** (Excessive sexual intercourse.)

### **PATHOGENESIS-**

Vata, Kapha prakopaka ahara and vihara leads to obstruction of **pranavaha, udakavaha and**

**annavaha** srotas due to pratiloma sanchara of vayu along with kapha at the level of head and neck leads to peenasa and at the level of pranavaha srotas leads to Tamaka swasa.

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Aetio-Pathogenesis of Tamaka swasa.

**Aetiological factors-Vata, Kapha prakopaka karana**

- Pratiloma of vayu along with kapha
- Srotho avarodha
- Peenasa, gur-gur dwani and tivra swasa vega.
- leads to Tamaka swasa.

### PRODROMAL SIGNS & SYMTOMS-

'ykd&2 ^vulg ik' oZly% fi Mue~ân; L; pA  
ik L; p foykroe~LokLue~i wZ/k leAA  
Anaha, Admana, Parshva shula, Hritpida,  
Krucaswasa and Shankapida.

### SIGN AND SYMTOMS-

'ykd&3 ^ifrylee~; nk Q ok qL=krefl i fr iln; rA  
xof' jkp l xg% 'ySl eue~l kphz pAA

- Breathlessness
- Peenasa
- gur-gur dwani at urdhwa pradesha
- Krucaswasa relives after expectoration of kapha.
- Relief in swasa vega in sitting position.
- Kasa(cough)
- Bhrama and Anidra
- Uchritta aksha(opened eyes)
- Lalata swedana
- Desires to take worm foods and drinks.
- Shraha shula
- Mukha shosha
- Kricra bhashitam.

Tamak swasa vega will be aggravated by cloudy, cold and rainy atmosphere, prakvayu(wind from east) and kapha vardhaka ahara.

## MANAGEMENT- AND TREATMENT

The management of Tamaka swasa should be planned in the following aspects, depends on conditions.

- 1) **Nidana parivarjana.**
- 2) **Kapha vilayana-chedana dravya prayoga.**
- 3) **Shodhana chikitsa.**
- 4) **Swasa kasa hara dravya prayoga.**
- 5) **Respiratory tonics(Rasayana yoga).**

1) Nidana parivarjana- avoid vata-kapha prakopaka ahara and vihara.

2) Kapha vilayana- chedana dravya prayoga-shlka-4. Apply saindhava lavana mixed with tila taila over the chest, back and abdomen followed by nadisweda in order to thinning of kapha and for easy expectoration.

### 3) Shodhana therapy-

- Abhyantara snehapana- with pippalyadi ghrita, kantakari ghrita, etc.

- Virechana karma is the main line of treatment which is advised by Acharya charaka- Trivrut leha or haritaki along with yestimadhu is best for this purpose as both are virechaka and as well as kasa, swasa hara dravyas.

- In kaphadhikata, vamana is also advised before virechana with suitable vamaaka dravya.

- Navana nasya with sukhoshna gritha manda and saindhava lavana.

### 4) Swasa-kasa hara dravya-

**a) Ekamulika single herb-** Pushkaramoola, Shati, Karkatasrunji, Bhargi, Haritaki, Yastimadhu, Pippli, Haridra, Chitrakamoola, Maricha, Shunti, Kantakari, Vasa, Tulasi, Bringraj, Hingu, Yavakshara, Madhu, etc.

**b) Bhasmas-** Abhraka, Swarnamakshika bhasma, Srunga, Mayura piccha, Tankana, Godanti, etc. 125-500mg



c) **Churnas-** Srungyadi, Talisadi, Sithopaladi, Karpuradi etc. 5-10mg

d) **Asava-Arista-** Kanakasava, Vasakasava, Bringrajasava, Draksharista, etc. 20ml-30ml

e) **Avaleha-** kantkari, Chitraka haritaki, Bharangi guda, Vasavaleha, etc.

f) **Vati & Rasayoga-** Lavangadi vati, Khadiradi vati, Gorochanadi vati, Swasakutar rasa, swasakasa chinthamani, Trilokya chinthamani rasa, etc.

g) **Rasayana yoga-** Chavanaprasha, Koshamanda rasayana, Agastya haritaki, Bramha rasayana, etc.

### **PATHYA-**

Sukoshna jala, Godugdha with shunti churna, Yava, Godhuma, Mudgha, Palak, Goats milk, Purana gritha, Worm cloths, Ushna desha nivasa.

### **APATHYA-**

Cold water, Shita pradesha nivasa, Dadhi, Masha, Vidhahi ahara, Dusty area, Vegadharana.

### **CONCLUSION-**

The ideal drugs to treat Tamaka swasa should possess the properties as such **Vata, Kapha hara, Kapha vilayana-chedana, Swasa-kasa hara gunas.**

In my clinical practice, have found good results with the fallowing combinations.

- 1) -Sithopaladi churna -50gms.  
-Karpuradi churna -25gms.  
-Guduchi satva -10gms.  
-Abhraka bhasma -05gms.  
-Srunga bhasma -05gms.  
-Loha bhasma -05gms.
- 2) -Rasasindura -01gms.  
-Sithopaladi churan -24gms.
- 3) -Shudda hingu -05gms.  
-Guda -05gms.  
-Pippli churna -05gms.

Given in divided doses with madhu. These drugs should be advised as per **Desha, Kala, Bala, Satva, Satmya and Matra** for better health.

## Local Ayurvedic Contraceptive - Neem Oil

Nimba (Neem) (*Azadirachta indica* A Juss) is an important medicinal plant used in various forms in Ayurveda. The Neem seed oil is used for application on infected wounds and is attributed with having anti-microbial properties. The spermicidal effect of Neem oil has been studied in rhesus monkey, and water-soluble fraction containing sodium nimbinidate is spermicidal in human sperms in-vitro.

### **Method of administration**

1 ml. of Neem oil locally (introduced in Vagina through a plastic applicator) five minutes prior to coitus.

### **Efficacy on Neem Oil**

No. of Women studied	225
No. of Cycles studied	1700
Maximum No. of Cycles followed	52

### **Neem Oil Local Contraceptive (Spermicidal)**

### **Pregnancy rate as per Pearl Index-HWY**

Drug failure	2.1
Drug omission	21.1
Combined	23.2

### **Clinical studies**

The study has been conducted on 225 fertile female volunteers in the age group of 18-35 years (mother with at least one child) in OPD of Central Research Institute (Ayurveda), Punjabi Bagh, New Delhi in a selected population of the community. The drug has been found very effective since only three women conceived due to drug failure. 43 volunteers continued upto 36 cycles and more.

**Conclusion :** It is well tolerated and accepted except for a foul smell. Further efforts are under way to make the drug more acceptable by modifying dosage forms.

## ***Congratulations***



Secretary Ayush; Dr. (Vd.) Rajesh Kotecha ji with Hon. Sh. Shripad Nayak ji, Minister Ayush (I/C)

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## ***Congratulations***



### **Privileged Writer**

Dr. Rajeev Pundir M.D (Ay.)

Besides the profession of Ayurvedic specialist a few of short stories, poems and novels have been written in hindi and english languages as follows.

**Hindi** - *Saat Paheliyan, Samandar, Aquarium, Zindagi : Kabhi Dhoop Kabhi Chhanv*

**English** - *A Tracker and The Heart Stealer; Song of A Flying Sparrow.*

**Editor** - *Melody Of Life, Crush-2 and Love A Sweet Poison-2*

**E-books** - *Tiny Tales, Metro Musings and Wedding Vows.*

Short film made on his story namely '**The Blind Game**' garnering millions of viewers on YouTube.

Books available on Amazon.in, Blog: [withoutmaliceforoneandall.blogspot.com](http://withoutmaliceforoneandall.blogspot.com) Email: [rajeevherbal@gmail.com](mailto:rajeevherbal@gmail.com)



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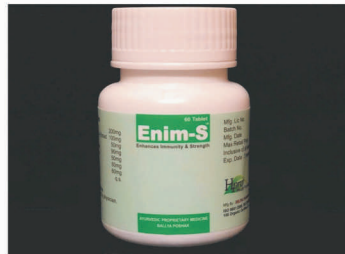


# ENIM-S<sup>TM</sup> Tablet

**PURE AYURVEDIC - ENHANCES IMMUNITY & STRENGTH**

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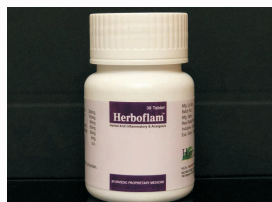
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