



SADVAIDYA

Quarterly Newsletter of Vishnu Ayurveda College Shoranur



For Private Circulation Only - January - April 2023 VOL-1 ISSUE-3



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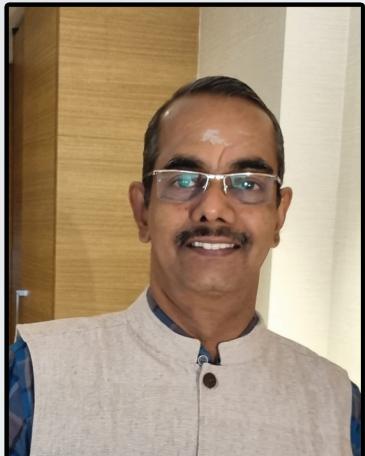
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Karkitaka is the last month of malayalam calendar, which falls in the monsoon season. It is the ideal time for Rejuvenation and healing therapies due to conducive climate. During this period, the body's immunity tends to be low making it more susceptible to various ailments. Ayurveda offers specific treatments and practices to help boost immunity and restore health during this time. Purification Therapies (Panchakarma) detoxify and cleanse the body. Therapeutic vomiting (Vamana), Therapeutic purgation (Virechana), Medicated enema (Vasthi), Nasal medication (Nasya), Blood letting therapy (Rakthamokshana) are advocated during this season. Moreover Ayurvedic practitioners prescribe specific herbal medicines based on individual conditions of body and disease. These help to strengthen the immunity, improve digestion and promote overall well-being. Massage with medicated oils help to nourish body, relieves stress, improve circulation and promotes the preparation for purification. Treatment involving steam bath with herbs opens up the pores, eliminate toxins and improve blood circulation. Rejuvenation after purification enhance mental, physical well-being, reduce stress and leads to healthy longevity. Dietary modification in Karkitaka (Sravana masa) promotes overall well-being and overall process of digestive system. Let all of us undergo monsoon treatment and preserve our health. “Sarve bhavantu sukhina Sarve santhu niramaya” (Let all be happy and devoid of diseases).

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GREESHMA RITHU

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Ayurveda explains *kala* (time/ season) as a prime etiological factor in the concept of disease causation. The structural and functional similarity of the body with the environment is one of the core fundamentals in diagnosis as well as treatment in Ayurveda. Any change in the external environment will impart its effect in the internal environment of the body also.

In general seasons are divided into three - Winter, Summer and Rainy season. Ayurvedic classics have adopted a much more detailed classification of Samvatsara (year) into six categories named rithus -Sisira, Vasantha, Greeshma, Varsha, Sarat and Hemantha. The first three come under adana kala(utharayana) and the rest in visargakala (dakshinayana). The gunas (properties) of each season vary according to their nature and composition of pancha bhootas.

Each rithu is characterized by specific variations in the external environment, which can disrupt the homeostasis of the body resulting in diseases. So the diet and regimen in each rithu should be modified in such a way that it can help one to preserve health to a great extent. Comprehensive regimens are mentioned for each season which will restore good health and prevent seasonal morbidities. Among them Greeshma rithu has a particular importance due to its drastic nature. The disequilibrium caused by seasonal etiological factors are to be managed by understanding the underlying concept of gunas (properties) in the season and administering foods drinks and activities antagonistic to them.

Out of the six seasons Greeshma rithu has profound implications on the body and mind of the individual. Greeshma rithu comes under adanakaala in which both the sun and wind become very powerful, taking away all the saumya bhavas of earth making this season predominantly agneya. The sun grows stronger in heat and light and all living beings gradually begin to lose strength and energy.

These changes alter the metabolism and thus the normal physiological functions of body are affected. Appetite and digestion are impaired. Skin becomes active and excretes profuse secretions. Lack of hygiene and improper care of skin gives rise to various skin diseases. Excessive fluid loss leads to dehydration and other urinary infections. Owing to the excessive heat outside and decreased strength, diseases like heat stroke, hemorrhagic diseases, infectious diseases like chicken pox, hepatitis, conjunctivitis etc are likely to happen. Therefore, utmost care is important to make the body healthy and stay fit in this season.

Foods which are laghu (light to digest), those having madhura (sweet), snigdha (unctuous), seetha (cold) and drava (liquid) properties are to be taken. Precautions should be taken to rehydrate the body with suitable drinks to counteract for the fluid loss. Water boiled with sariba, shatavari, usheera, dhanyaka may be used for drinking after cooling. Buttermilk, fruit juices, meat soups, can be used to compensate the effect of heat. Fruits and vegetables like watermelon, cucumber, pumpkin, ash gourd, bottle gourd may be included in the diet. At bedtime milk with sugar will be ideal for the replenishment and nourishment of the tissues. Intake of alcohol and foods which are katu(pungent), lavana(salty) amla (sour) and ushna(hot) and guru (heavy to digest) like curd, pickle, confectioneries, fried foods, egg, chicken, meat are to be avoided.

Staying in cool places, applying sandal wood and other aromatic pastes over the ody, bathing twice a day, wearing light clothes and sleeping at daytime are helpful. These can reduce the effect of heat during day and regain strength. During night one can enjoy the cool moon rays with breeze. Excessive exercise or hard work is to be avoided. Direct exposure to sunlight should be avoided and umbrellas should be used to minimise the effect of heat. Too much sexual indulgence and alcoholic preparations are prohibited.

Ayurveda emphasises on the maintenance of health during the seasonal variations by strict adherence to the seasonal regimen. These are a few methods described in Ayurveda to withstand the effect of Greeshma rithu and stay healthy. Bringing these changes in diet and lifestyle and adhering to the seasonal regimen will improve the quality of health and performance of the individual despite the scorching summer and prevent many diseases.



IMPORTANCE OF MILLETS IN WOMEN'S HEALTH

Introduction

Millets are a group of small seeded cereal crops that are considered to be some of the most nutritious and healthy grains available. In ayurveda millets are classified under Trina dhanyavarga / Kudhanyavarga/Kshudradhanyavarga. Now-a-days people are conscious about their healthy living practices to overcome metabolic disorders and lifestyle diseases. Millets are considered to be an important part of a healthy diet due to their unique combination of nutrition & medicinal properties. Almost all the millets are used for human consumption in developing countries but their use has been primarily restricted to animal feed in developed countries. Millets are nutritionally comparable to major cereals and serve as good source of protein, micronutrients and phytochemicals. They are rich in fiber, vitamins, minerals and antioxidants, making them an important component of a healthy diet, especially for women. With the aim to create awareness & to increase production & consumption of millets, United Nations, at the behest of the Govt. of India, declared 2023, the International Year of Millets.

Types of Millets

Madhulika / Ragi(Fingermillet), Bajra / Kambu (Pearlmillet), Kangu / Priyangu / Tina (Foxtailmillet), Kodrava / varaku (Kodomillet), Syamaka / Chama (Littlemillet) and Kuthiraval (Barnyard millet) Uddalaka / cholam (sorghum) are some important staples to millions of people worldwide.

Millets Nutritional Facts

Millet Name	Protien(g)	Fat(g)	Fiber(g)	Iron(mg)	Calcium(mg)	Calories(kcal)
Pearl Millet	10.6	4.8	1.3	16.9	38	378
Finger millet	7.3	1.5	3.6	3.9	344	336
Foxtail millet	12.3	4	8	2.8	31	473
Kodo millet	8.3	3.6	9	0.5	27	309
Little millet	7.7	5.2	7.6	9.3	17	207
Barnyard millet	11.2	3.9	10.1	15.2	11	342
Sorghum	10.4	3.1	2	5.4	25	329
Proso millet	12.5	2.9	2.2	0.8	14	356

Health benefits of Millets in general

- ❖ **For reducing blood pressure** - Being rich source of magnesium, millets help in reducing blood pressure and risk of heart disease. Also, the potassium present in millets helps in keeping blood pressure low by acting as vasodilator.
- ❖ **For lowering LDL cholesterol** - The high fiber present in millets plays a major role in lowering LDL cholesterol and increasing the effects of HDL.
- ❖ **For regulating blood glucose level** - The efficiency of insulin and glucose receptors in the body is increased by the significant levels of magnesium content present in millets and help in preventing diabetes. Finger millet-based diets have shown lower glycemic response due to high fiber content.
- ❖ **For reducing gastrointestinal disorders** - Fiber content in millet helps in eliminating disorders like constipation, excess gas, bloating. Millets are rich in phenolic acid, tannins, and phytate. These nutrients reduce the risk of colon cancer.
- ❖ **For clearing body wastes** - Many of the antioxidants found in millet have beneficial impact on neutralizing the free radicals and clean up other toxins from kidney and liver.

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Role of millets in women's health

❖ For Adolescent girls

Millets can play an important role in supporting the health and well-being of adolescent girls. They are nutritious and healthy foods that can provide many benefits including supporting bone health, promoting energy and reducing fatigue, improving mental health, aiding digestion and for weight management.

❖ Supports hormonal balance

Being a good source of magnesium, they help for maintaining hormonal balance, supporting reproductive health and for reducing menstrual irregularities.

❖ Promotes ovarian health

As they are good source of antioxidants, they help to protect the ovaries from oxidative stress & to reduce the risk of ovarian disorders.

❖ Supports fertility

Zinc plays a major role in fertility which can be provided by using millets.

❖ Promotes healthy pregnancy

Millets are a good source for folic acid, which is essential for the proper development of fetus and can help to reduce the risk of birth defect.

❖ Regulates blood glucose level

Millets are a low glycemic food that can help to regulate blood sugar levels & reduce the risk of gestational diabetes

❖ Supports lactation

Being a good source of calcium, which is essential for lactation and can help to promote the production of breast milk.

Role In various Gynaecological disorders

Millets play an important role in preventing various gynaecological disorders. For instance, the symptoms of premenstrual syndrome like abdominal bloating, swelling of extremities, weight gain etc, preparations like peya/vilepi with chama is found to be effective.

In case of primary dysmenorrhoea (spasmodic dysmenorrhoea) preparations with Ragi & Tina are found to be beneficial due to its anti-inflammatory & fiber rich properties.

In case of PCOS related with obesity, lekhana (scarification) action of chama/varaku is helpful to remove the excess fat.

As they are rich in phenolic acid, tannins, and phytate, it reduces the risk of breast cancer. Recent research has revealed that fiber as one of the best and easiest ways to prevent the onset of breast cancer in women.

Preparations with Ragi & Tina which are rich in Calcium & Iron are found to be effective in reducing symptoms of Menopausal syndrome like hot flush, night sweats & osteoporosis etc.

Discussion & Conclusion

Millets are rich in health-promoting phytochemicals like polyphenols, phytosterols, phyto-oestrogens, phytocyanins. Also, the important nutrients present in millets include resistant starch, oligosaccharides, lipids, antioxidants such as phenolic acid, flavonoids, lignans and phytosterols which are believed to be responsible for many health benefits. These principles act as antioxidants, immune modulators, detoxifying agents etc. and hence prevent various related degenerative diseases, cardiovascular diseases, Diabetes, Cancer etc. Being non-glutinous, millets are safe for people suffering from gluten allergy and celiac diseases.

In present scenario the health benefits mentioned above are the main attraction for using these millets. Even though it is having such benefits; the inappropriate usage of these millets will result in rokshtato body which ultimately leads to the vitiation of Vata dosha. Therefore, processing of these by adding snigddhadravys like ghee, oil etc, is necessary to prevent such untoward effects. Also, these millets can be used as various preparations like dosa, idly, chappathi, pulav, porridge, combination with pulses & vegetables, soups, health drinks etc. in our day-to-day life.



**A CLINICAL STUDY ON VRANA SHODANA
ACTION OF GOMUTRA ARKA IN DUSHTAVRANA
W.S.R TO DIABETIC FOOT ULCER**

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Abstract:

Context : The diabetic foot ulcer, being chronic in nature involves various tissues, it can be considered as Dushtavrana in Ayurveda. Proper Care for diabetic foot with medication and procedures that has hastened the healing process with less complication is the need of the hour. Aim: To evaluate the Vrana Shodana action of Gomutra Arka in Dushtavrana w.s.r. to diabetic foot ulcers. Settings and Design: It is a clinical study with pre-test and post-test design. Total number of patient taken for the study was 40 excluding dropouts. The patients selected for the study were divided in to 2 groups, Group-A and Group-B, consisting of 20 patients each.

Materials and Methods: The wound is examined, exudates, debris, slough will be removed, the surrounding area will be cleaned and pad soaked in Gomutra Arka is placed and wound dressing is done once in a day. And duration of study will be 45 days or till the formation of granulation tissue whichever is earlier, assessment will be done in every 7 days. For healing Jatyadi taila is applied after the Shodhana Kriya with Gomutra Arka..

Conclusions: Gomutra Arka was having good results in reduction in burning sensation, itching ,smell, size, depth, discharge, edge, floor and presence of granulation tissues compared to Betadine. Both drugs having equal effect in reduction of pain. Both drugs has Shodhana, lekhana property, hastens the wound healing process which helps in reduction of wound size. It can be concluded that Gomutra Arka application is effective in all types of Diabetic foot ulcer by their faster, effective Shodhana, lekhana, vedana, shamaka, kandu samana, daha shamana properties compared to Betadine.

Keywords:Dushta Vrana, Diabetic foot ulcer, Gomutra Arka, Betadine, Jatyadi Taila.

Introduction:

The diabetic foot may be defined as a group of syndromes in which neuropathy, ischaemia, infection lead to tissue breakdown resulting in morbidity and possible amputation^[1]. The diabetic foot ulcer, being chronic in nature and with involvement of various tissues, it can be considered as Dushtavrana^[2]. Proper care for diabetic foot with medication and procedures that has hastened the healing process with less complication is the need of the hour. The use of Arka in Vrana is mentioned in Ayurveda^[3].Krimihara property of Gomutra is also mentioned by Caraka^[4].Thus to evaluate the Vrana Shodana action of Gomutra Arka⁽⁵⁾ in Dushtavrana, this study is being carried out.

Subjects and Methods:

Twenty patients diagnosed as suffering from Diabetic foot ulcer fulfilling inclusion criteria were randomly selected from O.P.D .

Study Design

A clinical study in comparison with a control group, with pre-test and post-test design will be done on 40 patients suffering from diabetic foot ulcer selected as per the criteria mentioned in assessment criteria. The patients enrolled in the study will divide into 2 groups - a) Study Group; b) Control Group, each comprising of 20 patients each. The signs and symptoms and other parameters, as per the assessment criteria mentioned in assessment criteria will be observed before and after the treatment and the results of the two groups will be compared, analyzed statistically and discussed.

Inclusion criteria

- Patients with clinical features of diabetic foot ulcer having diagnosed diabetes mellitus type two.
- Age below 60yrs
- Sex- both male and female.
- Diabetic foot ulcer with minimum H/O 7 days.

**Exclusion criteria**

- Patients with diabetic foot ulcer with HbA1C level above 7.5.
- Malignant ulcers.
- Ulcer with signs of gangrene.
- HIV & HBsAg +ve.
- Patient with any signs and symptoms of Osteomyelitis.
- Ulcer in which bone is visible to the naked eye.

Diagnostic criteria

Subjective Parameters	Objective parameters
Pain.	Size.
Burning sensation.	Depth.
Itching	Discharge
Smell.	Edge.
	Floor and granulation tissue.

Procedure of administration of drug**Treatment Regimen**

Dressing with the Application of Gomutra Arka pad under aseptic precaution in study group and Betadine pad in control group. Application of Jatyadi taila in both group for healing .

Procedure

- a) Poorvakarma
- b) Pradhana karma
- c) Paschat karma.

Poorvakarma

The procedure adopted was (for both the Groups)

1. Vrana was exposed properly
2. Examination and assessment of features of wound on every sitting.
3. Debridement of wound was done with swab .
4. Cleaning the wound is done in each case prior to application of the said medicaments in both the groups.
5. Prakshalana with Normal saline water (Lavanodaka).
6. Dry the wound area.

Pradhana karma

For group A- Gomutra pad alone applied over wound area (sufficient quantity)

For group B- Betadine pad alone applied over wound area (sufficient quantity)



Paschat karma

Vrana Bandha (bandaging) is done with sterile gauze piece.

Though the bandaging is contra indicated in some of the Vrana's, bandaging was done to prevent the contamination from surrounding and protect the part from external trauma and keep the medicament on the lesion for longer duration. Depending upon the quantity of oozing, pain and smell, dressing was done once in a day. All the patients in both groups were requested to take light diet, prescribed diabetic diet and to keep the wounded part in resting position and don't soak the water as far as possible. Treatment was given for 45 days and 7 days once follow-up upto 3months. During this period keen observation were made for Vrana Vedana, Kandu, Daha, Vrana Varna, Vrana Srava, Granulation tissue, Area of wound etc. and were immediately noted down on their respective research proforma papers.

Assessment criteria

Subjective Parameters	Objective parameters
Pain.	Size.
Burning sensation.	Depth.
Itching	Discharge
Smell.	Edge.
	Floor and granulation tissue.

Method of statistical analysis

For assessing the improvement of symptomatic relief and to analyze statistically the observations were recorded before starting the treatment, during the course of treatment i.e. every 7th day , after the treatment (i.e. 45 day) and after follow- up period (i.e. on the 90th day of treatment). The mean, percentage, S.D, S.E, and t-value (unpaired t-test), p-value were calculated from the observation recorded. The total result including the overall effect of therapy is given in tables for the present study.

Observation and Results:

Statistical results were analyzed within Group A and Group B, patients with Diabetic Foot Ulcer before, after treatment and after follow-up done. Total 40 patients were registered in this study. Out of that all 40 patients were studied in this project. 20 patients were in group A while 20 were in B group. Group A was subjected to dressing with Gomutra Arka and Group B was subjected to dressing with Betadine solution. However both the groups were administered their regular medication of diabetes mellitus during the course of treatment. Each patient was observed thoroughly and noted neatly. The observations are recorded and necessary table and charts were made. Photograph of the Diabetic Foot Ulcer before and after the treatment were taken and observed thoroughly. The course of treatment was 45 days and follow up was done up to 90 days after treatment. The treatment had shown significant changes on all clinical features of ulcers, because drugs selected promoted the natural healing process.

Comparative results of Group-A and Group-B

In case of diabetic foot ulcer, gomutra arka group(group-A) is having good result in reduction in burning sensation, itching, smell ,size, depth, discharge, edge, floor, presence of granulation tissues compared to betadine group (group-B). Both treatments have equal effect in reduction of pain. Both have less effect on podiatric study.



Assessment of total effect of therapy

Out of 20 patients, In Group-A total 4 patient cured, 13 patients shows Good improvement and 3 patients shows moderate improvement. Out of 20 patients, In Group-B total 18 patient shows moderate improvement and 2 patients shows mild improvement. Compared in both Groups Group-A shows slight better response than Group-B may be because of have more ingredients shows good result.

Discussion:

Shodana action of Gomutra Arka can be understood as follows-

Rasa- katu,tikta, kashaya, lavana

- Kashaya rasa is Vrana ropana, Lekhana. It is Savarnakrit (a.s su18/17-18) therefore it may helps in normalizing colour of the skin.

- Tikta rasa does the Lekhana Karma and Shodhana. It scrapes the slough of the wound.

- Katu rasa- Shodhana and Vranaavasadana property. It might helps in cleansing the wound.

Guna – Tikshna. Penetrating property of Gomutra might help in reaching to the deeper level of the wound.

Karma – Malashodhaka. This property shows the cleansing nature of Gomutra Arka.

Betadine therapeutic uses

Disinfection of skin,an excellent agent.

Also in treatment of wounds and abrasions.Aqueous solution of 0.5% to 2% iodine with sodium iodide is applied.0.1% solution may used for irrigation.

Conclusion

Gomutra Arka was having good results in reduction in burning sensation, itching ,smell, size, depth, discharge, edge, floor and presence of granulation tissues compared to Betadine.Both drugs having equal effect in reduction of pain. Both drugs has Shodhana, Lekhana property, hastens the wound healing process which helps in reduction of wound size

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A CRITICAL REVIEW ON KAPHAJONMADA

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ABSTRACT

In ayurveda “Unmada” is the common term used in every mental disorder. The term Unmada can be applied to a wide range of diseases. Like that the kaphajonmada can be applied to wide range of diseases. Depressive disorder is one among them. In Ayurveda Kaphajonmada is explained as a separate entity with the explanation of specific nidanapanchaka and treatment.

INTRODUCTION

Kaphajonmada is one of the common psychiatric disorder with trend of rising incidence in recent years throughout the world is still a serious challenge to the medical profession. It is one of the leading cause of disability worldwide. Approximately 15 % of general population reports depressive syndrome (Kaphajonmada). Kaphajonmada can be applied to wide range of diseases. Depressive disorder is one among them. Many references are available related to Kaphajonmada. In this article different views of different Acharyas are compiled in brief.

Acharya Charaka defines unmada is the disease characterized by the perversion of mind (Manas) intellect (Buddhi), consciousness (Samjnajnana), memory (Smriti), desire (Bhakti), manners (Sheela), behavior (Chesta) and conduct (Achara). Here Vibhramsha means the total disability to perform assigned function or dysfunction of particular entity. Susruta defines Unmada is distraction of mind due to the upward movement of Doshas. Ashtanga Samgraha and Ashatangahridaya defines Unmada is Mada (toxicity, disorder) of the mind produced by the Doshas (Vata etc), moving in the wrong paths. Among all above definitions, definition by Charaka could be termed as complete as it gives a clear picture of disease. By examining this definition it can be said that Unmada is a very broad term comprising of various kinds of Manovikaras.

Literary Review

Nidana

General Nidana for Unmada is described in Ayurvedic classics. But specific Etiology for Doshonmada like Vatha, Pitta and Kapha are not described in detailed manner. Only Charaka has explained specific Nidana and sampraphthi for doshik type including Kaphajonmada. The same matter is quoted in Gadanigraha, Bhavaprakasa, Madhavanidana and Yogaratnakara. (Table 1).

Table 1: Samanya Nidanas of Kaphaja Unmada

SN	Nidana	A.H	A.S	C.S	S.S	M.N	B.P	G.N	Y.R
1	Bhiruta	-	-	+	-	-	-	-	-
2	Upaklishta Satva	-	-	+	-	-	-	-	-
3	Alpa Satva	+	+	+	+	+	+	+	+
4	Kamacrodhadibhi Abhyahada Manaha	+	+	+	+	+	+	+	+
5	Vyadi Vega Samudbhava Vishma Sareera Cheshta	+	+	+	-	-	-	-	-
6	Abhikhata Abhyahatha	-	-	+	-	-	-	-	-
7	Devagurudvija Pradharshana	-	+	+	+	+	+	+	+
8	Poojya Vythikrama	+	-	-	-	-	-	-	-
9	Utsanna Dosha	-	-	+	-	-	-	-	-
10	Athyupa Ksheena Deha	-	+	+	-	-	-	-	-
12	Samala Vikruthopahata Aharasevana	+	+	+	+	+	+	+	+
13	Vishannatha	+	-	-	-	-	-	-	-
14	Vishena Upavishena	+	+	-	-	-	-	-	-
	Visesha Nidana								
1	Sampoorana	-	+	-	+	+	+	+	+
2	Mandacheshta	-	-	+	-	+	+	+	+

Poorvarupa

There is no specific Poorvaroopa told for individual unmada in classics. So Samanya Poorvaroopa told for Unmada can only be taken as the Poorvaroopa of the Kaphajaunmada.(Table 2)

**Table 2: Poorvaroopa of Kaphaja Unmada**

SN	Poorvaroopa	A.H	A.S	C.S	S.S	M.N	B.P	G.N	Y.R
1	Shirasashunyatha	-	+	+	-	-	-	-	-
2	Chakshu Rahulatha	-	+	+	-	-	-	-	-
3	Karnasvana	-	+	+	-	-	-	-	-
4	Uchvasadhidhya	-	+	+	-	-	-	-	-
5	Asyasamsravanam	-	+	+	-	-	-	-	-
6	Arochaka	-	+	+	-	-	-	-	+
7	Avipaka	-	+	+	-	-	-	-	-
8	Anannabhilasha	-	+	+	-	-	-	-	-
9	Hridgraha	-	+	+	-	-	-	-	-
10	Asthaneudvega	-	+	+	-	-	-	-	+
11	Sammoha	-	+	+	-	-	-	-	-
12	Dhyana	-	+	+	-	-	-	-	-
13	Athyutsaha	-	+	+	-	-	-	-	-
14	Satatam Lomaharshaha	-	+	+	-	-	-	-	-
15	Jvaraschaabhikshanam	-	+	+	-	-	-	-	-
16	Unmattacitvam	-	+	+	-	-	-	-	-
17	Udadarditvam	-	+	+	-	-	-	-	-
18	Arditakrikaranamcayatheh	-	+	+	-	-	-	-	-
19	Swapnecha	-	+	+	-	-	-	-	+
20	Abhekshnadarsanam	-	+	+	-	-	-	-	-
21	Chakshusha Apasarpanam	-	+	+	-	-	-	-	-
22	Gathranam Apakarshnam	-	-	-	-	-	-	-	+-
23	Athyulsaha	-	-	-	-	-	-	-	-
24	Bhayam	-	-	-	-	-	-	-	+
25	Mrithyutsaham	-	-	-	-	-	-	-	+
26	Tamaha	-	-	-	-	-	-	-	+
27	Shoshaha	-	-	-	-	-	-	-	+

Sampraphi of Kaphajonmada

Acharya Vagbata explained samanya sampraphi of unmada as the excited doshas of the individual with alpasatwa is moving in wrong path and vitiate hridaya which is the seat of manas and buddhi and disturb manas occluding manovahasrotas. This inturn causes loss of buddhi due to which the individual loses the power of discrimination and indulges in faulty activities. And this disturbed state is referred to as unmada. Acharya Susrutha narrated the sampraphi of unmada as the upward movement of dosha of alpasatwa vitiate hridaya and occlude manovahasrothas.

There is no clear explanation of samprapti of disease kaphajonmada except from some of the acharyas like Charaka. The sampraphi of kaphajonmada explained by Acharya Charaka tells that kapha gets vitiated because of sampoornana (over nourishment) and mandacheshta (sedentary life style). The aggravated kapha along with pitha afflicts the vital organs (heart) adversely affects the intellect and memory and vitiate the mind leading to this specific morbidity that is kaphajonmada. Here the two ethiological factors described are excessive eating or over nourishment and sedentary life style.

But only to these factors are not enough to precipitate a mental disorder. So a general etiology of mental abnormalities along with these circumstances of kapha vitiation is necessary for manifestation of kaphajonmada.

**Lakshanas of Kaphajonmada (Table 3)**

SN	Symptoms	A.H	A.S	C.S	S.S	M.N	B.P	G.N	Y.R
1	Arochaka	+	+	+	+	+	+	+	+
2	Chardi	+	+	+	+	+	+	+	+
3	Alpacheshta	+	+	+	+	+	+	+	+
4	Alpahara	+	+	-	+	-	-	-	-
5	Alpavak	+	+	+	+	+	+	+	+
6	Sthri Kamada	+	+	+	+	+	+	+	+
7	Rahapriti	+	+	+	+	+	+	+	+
8	Lalasinghanakasruti	+	+	+	-	-	-	-	-
9	Baibhatsyam	+	+	+	-	-	-	-	-
10	Sauchavidwesha	+	+	+	-	-	-	-	-
11	Nidra	+	+	+	+	+	+	+	+
12	Svayadhuranane	+	+	+	-	-	-	-	-
13	Balavanrahtrau	+	+	+	+	-	-	-	-
14	Sthanamekadeshe	-	-	-	-	-	-	-	-
15	Shuklasthimitha Malopadiudhakshata	-	+	+	-	-	-	-	-
16	Nakhadishauklyam	-	-	+	-	+	+	+	+
17	Agnimandya	-	-	-	+	-	-	-	-
18	Kasa	-	-	-	+	-	-	-	-
19	Alpamati	-	-	-	+	-	-	-	-
20	Ushnasevi	-	+	-	+	-	-	-	-
21	Bukthamatrebalavan	+	+	+	-	+	+	+	+
22	Sadana	-	+	-	+	-	-	-	-

Upashaya & Anupashaya of Kaphajonmada

Aggravation of symptoms by regimen not wholesome and wholesome to Kapha

Saadhyaaasaadhyatha (Prognosis)

The diseases with alpalakshana ekadosha (with single dosha involvement and less number of signs and symptoms) are usually saadhyaa. Hence Vataja, Pitaja and Kaphajonmada are saadhyaa. I.e. they carry good prognosis. The diseases with sarvasampoornalakshnas are always asadhyaa (i.e. carries bad prognosis)

Chikitsavivechana (General line of treatment for doshonmadas)

Snehana (Oleation), Swedana (Formentation), Vamana (Emesis), Virechana (Purgation), Astapanam and Anuvasana type of enemas, Upasamana (Alleviation Therapies), Nasya (Errhines), Dhooma (Smoking), Dhoopana (Fumigation), Anjana (Collyrium), Avapida and Pradhamana type of snuff, Abyanga (Massage), Pradeha (Ointment), Parisheka (Affusion), Anulepana (Unction), Vadha (Assault), Bandha (Tying), Avarodha (Confinement), Vithrasana (Frightening), Vismapanam and Vismarana (Inducing astonishment and forgetfulness), Apatarpana (Depletion), Sira Vedha (Venesection). And also suitable diets should be given according to the requirements of the patient.

DISCUSSION**NIDANA**

Acharya Charaka defines Unmada is the disease characterized by the perversion of Manas, Buddhi, Samjnajnam, smriti, Bhakti, Sheela, Cheshta and Achara. Here vibramsha means the total disability to perform assigned functions or dysfunction of particular entity.

“Heena Satwa” is considered as predisposing factors and other factors precipitate the mental abnormality. All the etiological factors are common to all types of Doshonmada including Kaphajonmada. Excessive eating and sedentary lifestyle as modulatory factors. Which may modify the above said nidanas leading to the manifestation of Kaphajonmada. In the same way the normal physical and mental dispositions (Kapha Prakruthi and Tamasa prakruthi), food habits of the person etc. will also act as the modifier of the basic pathology. So all the factors in the nidana of Doshonmada along with the specific nidanas of Kapha vitiation are necessary for the manifestation of Kaphajonmada.



Poorvaroopa of Kaphajonmada

Asyasamsravana- Due to the vitiation of Kaphadosha there will be increase in the pramana of Syandaguna of Kapha in Kandapradesha which leads to asyasamsravana which is a Kaphaja vyadhi.

Arocaka, Avipaka Anannabhilasha - Due to the intake of virudha malinahara sevana and sleshmalahara sevana and sedentary lifestyle there will be mandagni which results in avipaka, arocaka, Ananabhilasha

Hridgraha- Due to the Kaphajaaharaviharas there will be mandagni which leads to rasavahasrotodushti. The moola of rasavahasrotas is hridaya. Due to the vitiation of the rasadushti which leads to avaroda of udana and vyana and results in hridgraha.

Dyana - Satwahani results in dyana. There will be vitiation of rasarakta samnjasrotas.

Swapne kalushanam ambhasam avarthe nimanjanam- Due to the Prabala Doshasanjaya in manovahasrotas there will be swapna.

Roopa of Kaphajonmada

Arocaka - Arocaka may be of two types Manasanthapaja and Kaphadoshaja. Kaphadoshaja is due to the increase of Kaphajaharavihara and virudhaharasheela causes agnimandyā which leads in rasadushti and results in rasavahasrotodushti which is a rasapradoshajavyadhi.

Chardi - Due to atidrava atisnidgda asatmyaja bojana there will be agnimandyā which leads to srotorodha and Kaphotklesha and udanavayu kopa which resulting in Chardi.

Alpahara - Due to the virudhahara sevana there will be agnimandyā resulting in arochaka and alpahara.

Alpavakyatha, Alpacheshta - Due to the sleshmala ahara and mandacheshta there will be vitiation of kapha and tamas in manovahasrotas in heenataswa person which results in alpacheshta and alpavak.

Alpamati - Due to the Kaphavardaka and malinahara sevana and alpacheshta there will be mandagni which leads to rasavahasrotodushti. The moola of rasavahasrotas is hridaya. Manas and buddhi is situating in hridaya. Due to the Kaphavarana and tamoavarana there will be decrease in buddhi.

Naripriyatha - Kaphavridhikaraaharavihara results in increase of soumyabhava and soumyadhathu ie, suklavridhi which leads to naripriyatha. Due to the Kaphavardaka and malinahara sevana and alpacheshta results in increase of tamoguna which results in interes in woman which is one of the Tamasaprakruthi lakshana.

Viviktapriyatha - Due to the increase of tamoguna in manovahasrothas, person prefer to be alone which is one of the thamasaprakruthi lakshana.

Atinidratha - Nidra occurs due to the adikya of kapha and tamas As kaphadosha and tamoguna increases in a person, atinidra occurs.

Sadana- Sadana is a rasapradoshaja vyadi. Due to malinahara sevana and kapha vridhikaraaharavihara which causes agnimandyā which inturn leads to rasadushti and sadana.

Lalasravam - Due to Kaphavridhikara aharavihara kapha increases and leading to utklesha of kapha which results in lalasrava.

Nakhadi shauklyam - Due to the vitiation of kaphadosha nakhadishauklyam is occurring.

Ushnasevi -When Kaphadosha increases in the body person craze for ushnaguna

Svayathu - Due to the vitiation of kapha, svayathu occurs

Sauchavidvesha, Bibytsyam - Due to the increase of tamoguna person moves away from daily regimens like bathing shaving etc. which results in bibytsyam

Bukthebalam - After the intake of food kapha produces first in the body. So symptoms increases.

Ratraubrisham- During the early hours of night there will be vitiation of kaphadosha so symptoms aggrevated at that time

Manovibramam - Due to the prolonged avarana of kapha, vitiation of vata is occurring which results in mano vibramam.

Chikitsa vivechanam

General line of treatment can be applied to kaphajonmada. Management of kaphajonmada is not discussed in detail anywhere. Base d on the rogi and rogabhala the mode of treatment whether sodhana or samana has to be decided.

CONCLUSION

Nidanas explained in Ayurvedic Classics were found to act as pre disposing precipitating and modulating factors in production of unmada. There was significant role of heenataswa in initiation of all unmadas. Two factors told by Charaka ie, excessive eating and sedentary lifestyle act as modulating factors which may modify the samanya nidanas leading to the manifestation of kaphajonmada. But also the other factors like cultural, psychosocial stress factors are responsible manifestation of this disorder. So all the factors in the nidana of doshonmada along with specific nidanas of kapha vitiation are necessary for the manifestation of kaphajonmada. Nidana parivarjana has a definite role in reducing the recurrence of kaphajonmada. Increasing satvabala is also nidana parivarjana. There is no specific poorvaroopa told for individual type of unmada in classics. The actual signs and symptoms of the disease will be seen in the vyakthaavastha where doshadooshya sammoorchna takes place. With the help of roopa this can be diagnosed and confirmed. The sampraphikhatakhas can be studied with the help of roopa only. The views on sampraphithi explained by different acharyas in similar.

It is helpful in diagnosing the disease during doubtful situation. When physician fails to diagnose the disease with the help of nidana poorvaroopa sampraphiti. In this condition diagnosis of the case is made by upasaya and anupasaya. Before the start of treatment physician should decide the line of treatment as well as the prognosis of the disease. Sadyasadyatha is helpful. Management of kaphajonmada is discussed in detail in classics.



PHARMACOGNOSTIC AND PHYTOCHEMICAL PROFILE OF *COLEBROOKEA OPPOSITIFOLIA*

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INTRODUCTION

Traditional medicine(also known as Indigenous or folklore medicine)comprises medical aspects of traditional knowledge that developed over generations within the folk beliefs of various societies, before the era of modern medicine. Traditional medicine lives among the people as part of their culture. In Traditional societies, any information about a disease is shared by others. This information is passed through generations. Inappropriate use of such folklore medicines without proper scientific research can be dangerous. There are many drugs in dark which can be seriously measured and added to our Pharmacopeia.

Effect is taken on the lines of conversion system with the solo motto of whatever is available in universe there Panchabhouthics will have effect on diseases as it is a dravya it is presumed as plant source. Taking this fact into consideration a folklore drug named Colebrookea oppositifolia, Smith. has been claimed by the Santhal tribes for various conditions like wound healing property, epilepsy etc.

Colebrookea oppositifolia, Smith. has been selected with the aim of evaluating pharmacognostic and preliminary phytochemical analysis of the Roots which is claimed to possess Anticonvulsant effect.

METHODOLOGY

The present study has been carried out with following headings:

1. Collection and preservation of the drugs
2. Pharmacognostical and phytochemical studies
3. Preparation of medicine

Collection and Preservation of the drugs:

Colebrookea oppositifolia,Smith. were identified using taxonomical characters based on habit including floral characters and characters of fruits mentioned in different floras viz. Flora of upper Gangetic plains, Flora of Madras presidency etc. The identified plant was confirmed by Botanists before collection of drug. 2Kg of root of Colebrookea oppositifolia was collected along the road side of Quard hit-low near Koppa in chikmagalore district of Karnataka. The roots of Colebrookea oppositifolia were very stout and difficult to collect. The collected drug was dried in shade and covered with marking cloth to avoid dust. They were regularly attended while process of drying to check any fungal infestation. Such infection was not observed.

BOTANICAL DESCRIPTION

TAXONOMICAL CLASSIFICATION:

Kingdom	:	Plantae
Subkingdom	:	Spermatophyta
Division	:	Angiospermae
Class	:	Dicotyledons
Subclass	:	Gamopetalae
Series	:	Bicarpellatae
Family	:	Lamiaceae
Genus	:	Colebrookea
Species	:	oppositifolia
Scientific name	:	Colebrookea oppositifolia, (poir) smith.



VERNACULAR NAMES

Bombay	:	Bahmani, Bhamini, Dasai, Dasari, Dussarica
Dehradun	:	Binda
Hindi	:	Binda, Bindu, Dulshat, Pansra
Kannada	:	Tuggigidda
Kumaon	:	Dulshat
Lepcha	:	Kumhyemkung
Malayalam	:	Karimchedi
Melghat	:	Chotabhandara
Nepal	:	Dosro, Dosul
Punjab	:	Barmera, Basuti, Briali, Dashane, Duss, Phisbekkar, Sampru, Shakardana, Suali
Ramnagar	:	Bhuriruoleri
Santali	:	Barsapakor, Bhainsa
Saora	:	Jolidi
Tamil	:	Vitupucittalai
Transindus	:	Shakardana

NATURAL HABITATS

A shrub with grey bark, common on the outer Himalayas from Indus to Bhutan and Ava, also on the lower hills of India. This plant is distributed throughout the northern parts of India, south western China as well as in Indo-China and Nepal. They are found in open dry and rocky places at altitude of 1800mt.

MORPHOLOGY1

Morphological features of *Colebrookea oppositifolia*, (poir) Sm.

Leaves: Leaves light green, crowded at the ends of the branches, exstipulate, petiolate, opposite or in whorls of threes, oblong-lanceolate or elliptic lanceolate. Margin crenulate or serrulate, apex and base acute, softly pubescent on both surfaces

Flower: Small, white, numerous, in dense flowered whorls of paniculate spikes, bract solitary linear, pubescent; bracteoles several, connate at base into a whorl. Calyx 5 partite almost to the base, lobes subulate, plumose with white hairs. Corolla tube short, lobes 4, subequal, upper lob Androecium: Stamens 4 epipetalous, filaments equal, exserted in male and included in female, anther cells orbicular, sterile in female. Gynoecium : Disc uniform flat. Ovary superior 4- partite, rudimentary in male; style slender bilobed; lobes subulate, long.

Fruit: Nutlets oblong- obovoid, usually solitary, pubescent, hairy at the tip.

Pharmacognostical and Phytochemical studies:

This is under the following headings:

1) Macroscopic study

2) Microscopic study

3) Phytochemical study

a) Physico-chemical parameters

b) Qualitative parameters

c) Quantitative parameters


Pharmacognostical study of Colebrookea oppositifolia root:

1. Macroscopic studies: The macroscopic studies of trial drug was done using organoleptic methods. The concentration of study was on characters seen with naked eye as well those observed with magnifying (dissecting) microscope. The shape, size, color, fracture, odour, taste and texture were observed with sensory organs and magnifying microscope (wherever required).
2. Microscopic studies: The diagrammatic transverse section is almost circular in shape showing a layer of epiblema followed by hypodermis. Below this 2-3 layered collenchyma cells are seen which is continued with a wide zone of Aerenchyma cells.

Results
Table showing result of Macroscopic characters of root of Colebrookea oppositifolia

Macroscopic characters	Root of Colebrookea oppositifolia
Shape	Long cylindrical
Size	18.1cm in length, .1cm in diameter
External surface	Rough with fine rootlets arising
Fracture	Fibrous
Color	Light brown
Odour	No characteristic smell
Taste	Slight astringent

Result of Microscopic characters of root of Colebrookea oppositifolia
Root of Colebrookea oppositifolia

The outline of the section is almost circular with wavy margin due to broken cork cells. The detail section shows a layer of epidermis composed of tangentially elongated rectangular cells. Below the epidermis a layer of comparatively bigger cells constitute the hypodermis. This is continued with cork cells generated from apparent layer of cork cambium just above the cortex. Beneath this lies secondary cortex in continuation with cortical cells. Few secretory cells are found in this region. A layer of endodermis separates the stellar region from cortex. Below epidermis phloem elements are present in continuation with larger zone of xylem elements consisting of vessels, tracheids and fibers.

Powder: Under compound microscope, cork cells are seen in surface view as well as in intercepted surface and sectional view. Other structures seen are surface view of tracheids, vascular cells, vessels, fibers in bundles etc.

Result of physico-chemical study of Colebrookea ghanavati

Loss on Drying	1.32%
Total Ash	6.19%
Water soluble Ash	5.44%
Acid insoluble Ash	1.04%
Water soluble Extractives	30.22%
Alcohol soluble Extractives	4.12%
Friability	0.28%
Hardness	15N
Disintegration Time(in DO water)	30 min



Result of Qualitative study of Colebrookea ghanavati

Reducing sugar	++++
Protein	+++
Anthraquinone glycoside	+++
Cardiac glycoside	+++
Tannin	+++
Alkaloid	++
Flavanoid	+++
Steroid	+++
Triterpenoids	+++

+ : very low quantity; ++: low quantity; +++: moderate quantity; ++++: good quantity

Result of Quantitative study of Colebrookea ghanavati

Thin Layer Chromatography

Solvent System- Toluene: Ethyl acetate::93:7

Spraying Agent- Anisaldehyde sulphuric acid

Rf of colebrookea ghanavati

0.02 – pale yellow under long UV

0.11 - pale yellow under long UV

0.25 - pale yellow under long UV

0.45 – pale yellow under long UV

DISCUSSION

Colebrookea oppositifolia, Smith. is an ethno-medicinal plant claimed by the Santhal tribes as antiepileptic. Since it is a claim, an attempt has been made to verify its activity and add it to our Ayurvedic Pharmacopeia as well as utilize it for the wellbeing of the society.

CONCLUSION

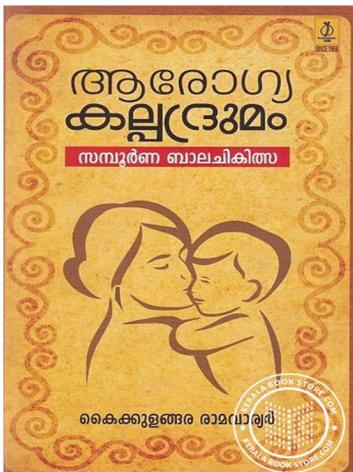
Colebrookea oppositifolia though being a folk lore medicine have medicinal significance being extensively used for treating various ailments as per ethno botanical surveys and claims by the santhal tribes. The drug could be easily identified with its morphological characters

RECENT RESEARCHES ^{3,4}

1. A clinical trial to study the efficacy and safety of Colebrookea oppositifolia (Acetoside) in acute hepatitis patients.
2. A new acylated flavones glycoside from Colebrookea oppositifolia. (Ramreddyvenkatanarahaireddy, Bandianilkumarreddy , Duvvurugunasekhar- Natural products division, Dept of chemistry Sri venkateswara university, Tirupati , India.)
3. Isolation and characterization of acetechin glycoside from the leaves of Colebrookea oppositifolia Smith (Dash .S.K., Nath. L.K, Bhise .S and Bhattacharya .S.-Ethnomedicinal research 2006 Dibugarh university.
4. Invitro- Invivo evaluation of cardio protective effect of the leaf extract of Colebrookea oppositifolia Smith. (K.Haddarpallab, B.Kush, P.Arunkumar- Dept of pharmacology Himalayan pharmacy institute, Majhitar Sikkim) <http://jgps.com>
5. Invitro antifungal activities of amphotericin B in combination with acetoside, a phenylthanoid glycoside from Colebrookea oppositifolia. (Intzarali, Punita Sharma, Krishnavartsuri, Nareshkumarsatti) <http://jmm.sgmjournals.org>
6. Species composition, Distribution, lifeforms, and folk nomenclature of forest and common land plants of western Chitwan, Nepal. (D.R.Dangol – Institute of Agriculture and Animal sciences, Rampur, Chitwan, Nepal.)

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AROGYA RAKSHA KALPADRUMAH BOOK REVIEW

Author : Sri Kaikkulangara Rama Warrier
Text with English Translation: Dr. Lal Krishnan

INTRODUCTION

Kaumarabhritya is one among the eight branches of Ayurveda. The practice of Kaumarabhritya starts right from birth of the baby upto he/she becomes capable of independent existence (Kumaravastha). Kaumarabhritya also includes the treatment of women from the beginning of pregnancy until cessation of breast feeding - because any disturbance in the mother's physiology will reflect in the child and also because the child would be treatable only through the medium of breast milk. Therefore pediatrics, obstetrics and gynecology are included under Kaumarabhritya.

The Traditional literatures Arogya kalpa druma is mainly focus on Balachikitsa. This text is well known in and around Kerala but not in other parts of the world because the language of the text is Sanskrit but its script is Malayalam. An English translation of this text is bound to make the text gain wider currency. It is because of this that the translation of the work done by Dr. Lal Krishnan is noteworthy. This is more practically oriented and can be considered as a ayurvedic pediatrician's quick reference hand book. Sri Kaikkulangara Rama Warrier, one of the judicious physician and visionary of ancient Kerala, is considered as the author of this treasured literature. The original text is written in Sanskrit language with Malayalam script. The present book is the English translation with shlokas (verses) written in Devnagri script by Dr. Lal Krishnan.

ABOUT THE AUTHOR

Kaikkulangara Rama Warrier (1832-1896), author of the treatise was an eminent Scholar of Kerala. Rama was his name; Warrier, the caste name. Kaikkulangara is the name of place where he resided. He was born in 1832 in Thrissur district. Several Sanskrit books were translated and explained in great detail by him. He has written more than 40 texts, which include both original works and commentaries on various subjects ranging from medicine, astrology, music, grammar, dictionary and literature.

ABOUT THE BOOK

Original version Arogya Kalpadrumah comprises of forty chapters with 3800 shlokas (verses). In Arogya Raksha Kalpadrumah the content is rearranged in forty seven chapters. The chapters were named as stavaka. The text as translated comprises of 47 chapters. The first chapter name Sadyojaata Baalopacharaniya (eleven-fold classification of balavastha, Care of new born, breast feeding, samskara, principles of treatment in children in different age groups and arista lakshana i.e, indicative signs of death, Pakshateeta Baalopacharaniya (Care of fifteen days old child, treatment methodology for the child more than fifteen days of age), Visarpa Nidan (Pathogenesis of cutaneous diseases), Vata Visarpa Chikitsa (Treatment of vata visarpa), Pitta Visarpa Chikitsa (Treatment of pitta visarpa.), Kapha Visarpa Chikitsa (Treatment of kapha visarpa.), Vata- Pitta, Vata- Kapha, Pitta- Kapha, Rakta, Visha Visarpa Chikitsa (Treatment of Vata-Pitta, Vata- Kapha, Pitta- Kapha, Rakta and Visha Visarpa), Visarpa samanya Chikitsa (Treatment of visarpa in general), Raktastambha (Vatashonita) avum Raktanavastha Chikitsa (Diagnosis and treatment of Raktastambha (Vatasonita) and Raktanavastha), Kundalaka, jatharavrana, ulvaru, raktalasaka lakshana Chikitsa (Diagnosis and treatment of Kundalaka, jatharavrana, ulvarunshi and raktalasaka), Shakha roga Nidana Chikitsa (Diagnosis and treatment of Upper and Lower limb), Pakshipida Lakshan Chikitsa (Diagnosis and treatment of Pakshipida), Prakaradi yogas (Immunomodulatory measures), Pratyauoshadha Chikitsa (Remedial measures for over intake of food stuffs).



SALIENT FEATURES OF THE BOOK

This work contains stupendous description regarding various diseases, their pathogenesis, symptomatology and management with special reference to pediatric age group which are not mentioned in classical texts. The astonishing explanation of 51 types of visarpa, shakharoga cikitsa, kundalaka, kupaka, raktanavastha, shakuni balgraha cikitsa, vatashonita, raktastambha and prakarayogas are topics of special citation of this text. Also, the step by step management for garbha, garbhini, newborn and sutika recommended in the work is noteworthy. Methods for purification of stanya, including lepas are mentioned.

Age classification

The text also provides a new 11-fold classification of bala, which is not mentioned in earlier texts.

Treatment features of neonates

Arista Lakshanas told for the children less than fifteen years of age are very much similar to the danger signs mentioned in modern texts.

Disease description

Skin diseases like Shakaroga (skin disease of extremities and head). Eight types of Shakharogas which occurs in the four sakhas are also described. They are Raktolbuda, Ajagallika, Gallaka, Asrasopha, Kupaka, Indrarmma, Idhmaka, and Dadhmika. Kundalaka is a Raktha mamsasritha roga.

Drug formulations

Most of the drugs are in the form of Kwatha, ghrita and taila. Khala kalpana has also been used in many diseases.

Prakaradi yoga

Prakara Yoga is an indigenous method of enhancing body immunity, which is narrated only in the text Arogya Kalpadruma. It protects the children from the disease just as Prakara (fence) protects a house from enemies. The concept is an Ayurvedic approach of way of immunization, which helps in the maintenance of health and prevention of disease.

Mantra chikitsa

Mantra chikitsa (Healing through hymns) Varahi mantra, Aghora mantra

Raksha karma

Dhupana chikitsa has also been given much importance. Some important Dhupas are Kushthadi dhupa, Lashunadi Dhupa, Nimbadi dhupa etc.

Pratyauoshadh chikitsa

This is also one of the important contributions of this treasured text. It's a very useful compilation and should be established through researches. These are the remedial measures for over intake or indigestion caused due to particular food stuffs.

Panchakarma

Medications like Many effective therapies like Shashtikapindasweda, Sirolepa, Shiropichu, Shirodhara, Avagahan, lepana etc. are also mentioned as inevitable part of Balachikitsa.

Some yogas mentioned in this book

Kushmanda Rasayana, Karpooradi Choorna, Amrutadi Tailam, Vasa Ghritam, Nayopayam Kashaya, Jirakadi choorna, Dhanvantara Gulika, Swasanandam Gutika, Vilwadi Lehyam, Dadimadi gulika, Ashtakshari gutika, Nagaradi Choorna, Avipathi choorna, Dineshavallyadi taila, Kshira bala Taila, Dhanvantara taila, Prasarani taila, Pinda taila. Saptasara Kashaya, Durdurapatradi taila, Karpasastyadi taila, Prabhanjanavimardana taila etc.

The text is not only an authentic account of bala chikitsa, but is also an excellent reference in general treatment due to its wide range of application. Acharya concludes the book by saying that the treatment modalities described in the book are equally effective in old age people. Considering the wide collection of diseases and treatments, the work can be of use for both bala chikitsa as well as kayachikitsa

DISCUSSION

Exclusive formulations, prakara yoga (immunopotentiating regimens), pratyauoshadh chikitsa (antidote therapy), treatment modalities and many new diseases mentioned in this text which are not found elsewhere makes it unique and very much contributory.

CONCLUSION

English version of this book will enlighten the budding Ayurveda pediatricians. Research works should be carried out to establish the efficacy and applicability of this unique legacy for credentials and evidence creation.



QUIZ

1. Gandoosha dharana of ----- is good for 'asyavairasya' and mukha 'dourgandhya'.
(a) Madhu (b) Sarpi (c) Paya (d) Dhanyamla
2. In swastha person, nasya kala in greeshma rtu is -----
(a) Purvahna (b) Madhyahna (c) Sayam kala (d) Rathri
3. "Pake agni sama" is -----
(a) Pippali (b) Maricha (c) Chithraka (d) Nagara
4. After the bite of -----, the poison ascends to the upper part of body and comes back to the stinge area and settles there.
(a) Mooshika (b) Luta (c) Vrischika (d) Sarpa
5. Prakshepa dravyas of Kaidaryadi kashaya (Chi. Manj)
(a) Saindava (b) Pippali (c) Both a & b (d) Sunti

Answer Key 1.d , 2.c , 3.c , 4.c , 5.c .



GEMS OF AYURVEDA

“अभ्यासात्प्राप्यते दृष्टिः कर्मसिद्धिप्रकाशिनी ॥ ५५ ॥
रत्नादिसदसज्जानं न शास्त्रादेव जायते” ।

(Astanga hridayam sutrasthana chapter 12 sloka number 55)

The vision that illuminates the achievement of therapy can be acquired only through continuous practice just as knowledge regarding purity of precious stones like diamonds cannot be attained only with the help of scientific knowledge .



YOGA PARICHAYAM

(Department of Rasasastra and Bhaishajya Kalpana)

Prasaranyadi kwatha

It is a kwatha preparation which is used internally for alleviating vata rogas specially in Apabahuka and Greevagraha. The drugs used for this formulation is given below.

Reference :- Sahasrayoga Sujanapriya commentary -24th edition, published by vidyarambham publishers, Alappuzha on November 2002 –page 78

Ingredients of the formulation

Sl no.	Name of the drug	Botanical name	Part used	Malayalam name
1	Prasarani	Merimmia tridentata	Whole plant	Talanili
2	Masha	Phaseolus mungo	Seed	Uzhunnu
3	Bala	Sida rhombifolia	Root	Kurunthottiveru
4	Rasona	Allium sativum	Bulb	Veluthulli
5	Rasna	Alpinia galanga	Rhizome	Chittarattha
6	Sunthi	Zingiber officianale	Rhizome	Chukku

Most of the drugs of this yoga are having Tikta, Katu rasa, ushna veerya and katu vipaka. Hence it has kaphavatahara property and srotosodhaka property which in turn helps to reduce inflammation ,stiffness and pain. Hence it is widely used in the condition of Cervical spondylosis, Frozen shoulder etc.

As per Arogyakalpadruma vata vyadhi chikitsa, in prasaranyadi kashaya masha is excluded and jaggery should be used as prakshepa dravya.

In other classics ksheerakashaya of this yoga as per ksheerapaka vidhi and ksheera bhojana is advised. It is found very effective in clinical practice. Also sahapana and anupana like Ksheerabala taila, Maharajaprasarini taila etc. can be selected according to the avasta of rogi ,roga and agni bala of the patient

Prasaranyadi kashayam

प्रसारणी माष बला रसोन रास्नौषधैः प्रक्वथितं तदम्भः ।

पिबन्ति ये क्षीरभुजो जयन्ति मरुद्विकारानपबाहुकं च॥ (Sahasrayogam)



DRUG REVIEW

Department of Dravyaguna vignanam



Cassia fistula, also known as golden shower, purging cassia, Indian laburnum, KaniKonna, or pudding-pipe tree, is a flowering plant in the family Fabaceae. The species is native to the Indian subcontinent and adjacent regions of Southeast Asia. It is the official state flower of Kerala in India. It is also a popular ornamental plant and is also used in herbal medicine. Cassia fistula is widely grown as an ornamental plant in tropical and subtropical areas. It blooms in late spring/early summer in hot, dry weather. Flowering is profuse, being seen.

It grows well in dry climates. In Ayurvedic medicine, the golden shower tree is known as Aragyadha, meaning "Disease killer". The fruit pulp is considered a purgative. Though it has been used in herbalism for millennia, little research has been conducted in modern times, although it is an ingredient in some mass-produced herbal laxatives. When used as such, it is known as "cassia pods". The fruit pod of Aragyadha is having major chemical constituents like rheindianthraquinone glucosides, Sennoside A, Sennoside B and fistulic acid. Cassia fistula contains the Following nutritional components like Vitamin-E and C; Calcium, Iron, Magnesium, Manganese, Phosphorus, Potassium, Sodium.

Of all herbs aragyadha is useful in bringing mild purgation especially in jwara hridroga, pittasra, vataja udavarta, shula. It can be used in elderly and sensitive people

Parts used –fruit rind, root bark, flower, leaves

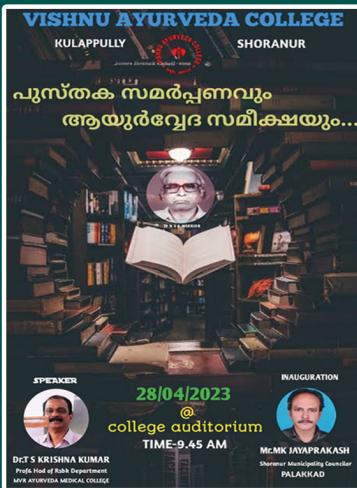
Ripened pod pulp is good laxative, stem bark and leaves are equally beneficial. Aragyadha is categorized classically in kushtagna gana, Aragyadhadhi gana, Shyamadi gana, Hatitakyadi varga

Medicines which contains aragyadha Manasamitra vatakam., Mahamajistadi kashayam, Maharasnadi kashayam, Aragyadhadhi kashayam, Aragyadharistam





GALLERY



Medicine Plant Distribution on Women's day



House Surgeons Association
2022-23
Vishnu ayurveda college

A session on

"Common gynaecological
disorders and ayurvedic
solutions"



1.30 to 3.30 pm
College auditorium
BAMS, MD(AY)
Prasut Tantra and Stri roga
Rehd SENIOR MEDICAL OFFICER
INDIAN SYSTEMS OF MEDICINES
KERALA
Dr. Nimmi M A
INTERNATIONAL WOMEN'S DAY 08 MARCH

VISHNU AYURVEDA COLLEGE

Dept of Prasootitantra & stree roga, NSS A-16 Unit



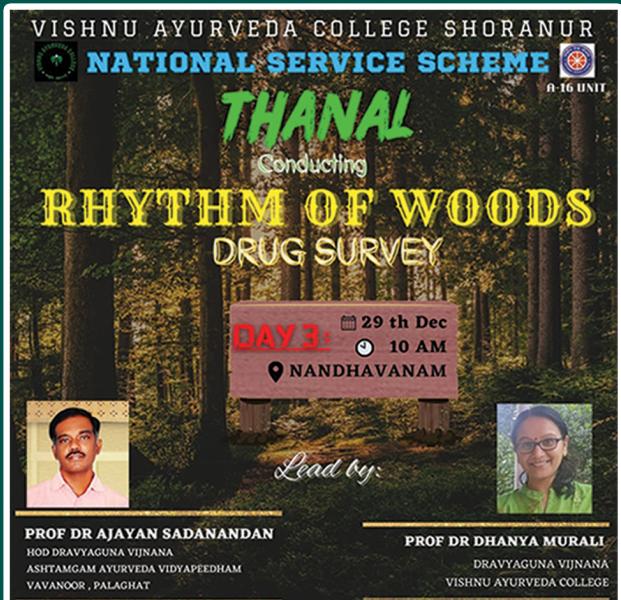
Angana

INTERNATIONAL WOMEN'S DAY CELEBRATION



Inauguration
Smt. Ushadevi MM
Rehd official social justice Department

TOPIC - Adolescent mental health





GALLERY

KUHS PG EXAMINATIONS 2022

Congratulations

DR SHILPA P (2012 batch alumni) ROGA NIDANA 1ST RANK

DR SOUMYA R (2012 batch alumni) KAYACHIKITSA 1ST RANK

DR SHIRIN SHAFEECK AHMED (2011 batch alumni) DRAVYAGUNA VIYOGANA 1ST RANK

DR HARITHA MOHAN (2012 batch alumni) ROGA NIDANA 3RD RANK

ALOKAH STUDENTS UNION Vishnu Ayurveda College

Congratulations

DR N SUDHIR RAJ MEMORIAL 2ND NATIONAL PAPER PRESENTATION COMPETITION 2023

THIRD PRIZE

DR SWATI S NAIR

Alokah Students Union Vishnu Ayurveda College, Shoranur

Congratulations

DR AISHWARYA MOHAN PG Samhita Siddhant Gov Ayurveda College TVM

DR KARTHIKA DEV S PG Prasuti & Streeroga GOV Ayurveda College Tripunithura

DR NAYANA MATHEW PG Dravyaguna GOV Ayurveda College Tripunithura

DR YADHU KRISHNA PG Manasikam Kottakkal Ayurveda College

DR AMRTA JESTAS PG Kayachikitsa Vaidyaratnam Ayurveda College Ollur

DR JINI VARGHESE P PG Shalya Tantra PNMM Shornur

ALOKAH STUDENTS UNION Vishnu Ayurveda College

Congratulations

DR AKHILA V. S PG -RASABHAISAJYA GOVT AYURVEDA COLLEGE TVM

DR AMBILI N. R PG - DRAVYAGUNA GOVT AYURVEDA COLLEGE TVM

DR SREELAKSHMI PG - SHALAKYAM AMRITA AYURVEDA COLLEGE

DR LEENA K T PG -PANCHAKARMA KOTTAKAL AYURVEDA COLLEGE

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Dr Shyla. M.G
BAMS MD(Ay) PhD,
Enlisted in KUHS
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Supervising guidelist

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Kerala PSC
Assistant Professor,
Panchakarma

Dr Nikhil Neelakandan
M.U Associate professor, Dept of
Kayachikitsa Vishnu ayurveda
college Secured PhD in Kayachikitsa
from Parul University ,Gujarat



AMAI Malayalam Recitation Competition first Prize

AMAI Malappuram -football tournament first prize winners

Best player
Dr Irshad Ali

Football Tournament AMAI 1st Prize

Best Goal keeper
Dr Devkrishna



GALLERY



Dr. Usha - AMAI Digital Poster Competition
1st Prize



Question Bank by Dr. Abdul Riyaz (HS)



Visit to dairy plant - College of dairy science
and technology, Mannuthy



Millet Year Celebration



Awareness Programme in Connection with
Aryanchira UP School, Kallipadam, Golden Jubilee
Celebrations



Visit to Padinharkkara Ayurveda Hospital &
Research Center



Sent off to Dr. Rohitkrishna B., Dept. of RSBK



SADVAIDYA



Our respected Director, Senior member of AMAI Pattambi area
Dr. P.Ramachandran Nair MSAM PhD was honored with Distinguished
AMAI Membership. His wife Dr Indira Devi, Area executives Dr Haridas,
Dr Jayaram, Dr Rajna, Dr Sherin and Dr Usha Prashant were present.



Saduaidya

Published by
Journal Club, Vishnu Ayurveda College, Shoranur
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