



Late Dr. Kurunji Venkatramana Gowda  
Founder President

# KVG AYUR NEWS

Samskara



Jan- June 2022

Volume - 12

Issue - 1

Quarterly

Private Circulation

## K.V.G AYURVEDA MEDICAL COLLEGE & HOSPITAL

Ambate Adha, Sullia, D.K, Karnataka - 574327

### CONSTITUTION PROGRAMME



CURRENT ISSUES, CASE STUDY, RESEARCH ACTIVITIES,  
STUDENTS ARTICLES, COLLEGE ACTIVITIES, QUIZ, HOME REMEDIES

प्रज्वलितो ज्ञानमयो प्रदीपः ।

**Editorial**



On behalf of "Azadi ka Amrit Mahotsav" many health camps and talks were conducted to propagate and highlight the relevance of Ayurveda in various schools of Sullia Taluk.

New batch of students (2021-22 batch) were welcomed and introduced to the campus through Orientation program.

College NSS unit was busy with hub of activities in the form of health related camps, awareness program, talk show and others.

Institution took part in celebrating the splendid achievement of our PG and UG toppers. Farewell day was organized to the outgoing batch of Final year BAMS (2017-18 batch)

The current issue also contains scholarly article, case study and other Ayurvedic centric articles etc.

*Harshitha*

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## PHARMACEUTICO- ANALYTICAL EVALUATION OF VYAGHRYADI KASHAYA AND ARKA- A COMPARATIVE STUDY

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### Introduction

Pancha Vidha Kashaya Kalpana are the primary preparations in Ayurvedic pharmaceuticals. Kwatha, being one among the Panchavidha Kashaya Kalpanas is more potent and easily digestible dosage form. As Panchavidha Kashaya Kalpanas are usually meant for instantaneous use, its shelf life is prolonged by adding chemical preservatives such as Sodium benzoate, Methyl paraben, Propyl paraben which are said to be carcinogenic when used for longer time. Arka Prakasha describes Kalka, Churna, Rasa, Taila and Arka as Panchavidha Kashaya Kalpana. Among this Arka is said to be the most potent. Arka is a unique preparation in which water soluble active principles & essential oils from the herbal drugs are extracted through distillation method. Arka being water distillate, do not undergo putrefaction & remain fresh for 1-2 years. This preparation was introduced to main stream pharmaceutical industry in the recent years. Arka form of any drug will have better palatability, higher shelf life & maximum patient compliance. Vyaghryadi kashaya is one such formulation mentioned in Ashtanga Hridaya in Jwara chikitsa which contains Vyaghri, Guduchi, Shunti & Pippali which is indicated in Jwara, Peenasa, Kasa, Shwasa and Shoola but less explored or implemented in the clinical practice. The bitter and pungent taste and its shelf life are the hindrance that arises in implementation of this formulation in prescriptions. There arises a need to overcome this drawback with modification of these Kwatha ingredients into a form which would render same results as that of the Kwatha. Hence this study intends to evaluate Vyaghryadi Kashaya & Vyaghryadi Kashaya dravya Arka pharmaceutically and analytically.

### Materials and Methods

Table 1: Ingredients of Vyaghryadi Kashaya and Arka

Sl.No	Ingredients	Latin name	Part used	Quantity	
				For Kashaya	For Arka
1.	Kantakari	Solanum xanthocarpum	Panchanga	37.5 grams	25 grams
2.	Guduchi	Tinospora cordifolia	Kanda (Fresh)	37.5 grams	25 grams
3.	Shunthi	Zingiber officinale	Rhizome (Dried)	37.5 grams	25 grams
4.	Pippali	Piper longum	Fruit (Dried)	37.5 grams	25 grams
5.	Water	-	-	1200 ml	800 ml

Kashaya was prepared as per the general method of preparation mentioned by Sharangadhara Samhita. Arka was prepared as per the general method of preparation mentioned in Ayurveda Sara Sangraha

## Results

Table 2: Showing Results of Organoleptic Characters of Vyaghryaadi Kashaya and Arka

Sl. No.	Organoleptic characters	V.KASHAYA	V.ARKA
1.	Colour	Dark Brown	Colourless
2.	Taste	Bitter	Slightly bitter
3.	Odour	Aromatic	Aromatic
4.	Appearance	Thin Liquid	Clear liquid

Table 3: Showing results of Physico-chemical analysis of Vyaghryaadi Kashaya and Arka

Sl. No.	Analytical Parameters	V.KASHAYA	V.ARKA
1.	pH	5.77 @ 250C	7.08 @ 250C
2.	Specific gravity at 250 C	1.1459	1.0009
3.	Total ash value	0.6186 %	-
4.	Acid insoluble ash	0.3579%	-
5.	Water soluble ash	0.1541%	-
6.	Loss on drying	93.81%	-
7.	Determination of boiling point	-	98 <sup>o</sup> C
8.	Refractive index	1.3748	1.3325

### Phytochemical Analysis Results-

Vyaghryaadi Kashaya showed the presence of Alkaloids, Saponins and Carbohydrates whereas Vyaghryadi Arka showed the presence of Triterpenoids and Carbohydrates.

In alkaloid and saponin estimation, Vyaghryaadi Kashaya found to contain 1.09 mgCE/1ml of alkaloid content and 8.475 mgDE/ml of saponin content respectively.

### Discussion

The properties of the finished product after processing will be different from the raw drug. Each process will affect the fate of raw drugs. For the quality assurance of any preparation, it is important to carry out each process cautiously right from the collection of raw materials, in-process conditions up to storage of finished product.

pH Value - pH value obtained represents weakly acid nature of Kashaya and Alkaline nature of Arka. Drugs will have a higher absorption in the stomach which has acidic pH

Specific gravity- Specific gravity of Kashaya was found to be slightly more than that of Arka. This may be due to more of the water soluble constituents might have been found in Kashaya than that of Arka.

**Phyto-chemical Analysis-** The medicinal value of the plant lies in the phytochemical (bioactive) constituents of the plant which shows various physiological effects on human body. Vyaghryaadi Kashaya showed the presence of Alkaloids, Saponins and Carbohydrates whereas Vyaghryadi Arka showed the presence of Triterpenoids and Carbohydrates. Non-detection of other constituents like flavonoids tanins, etc is may be due to less concentration of drug in the solution or compounds may be non-polar or thermally labile.

**HPTLC-** In the present study, the obtained Rf values of Kashaya and Arka corresponds with that of Kwatha Choorna which suggests there is no complete degradation of raw drugs in the final product.

**Conclusion:** Kwatha, being one among the Panchavidha KashayaKalpanas is more potent, easily digestible dosageform and can be prepared easily when compared toArka. The properties of the drug changes when it isbrought into a suitable dosage form or when it issubjected to certain Samskaras as claimed by ourAcharyas and this is evident through the pharmaceuticaland analytical study results obtained in the presentstudy. Extensive research is necessary for themodificationof Kashaya into Arka as different ratiosfor water and drug have been mentioned for its preparation.



## AYURVEDIC MANAGEMENT OF CYSTIC HYGROMA- A CASE REPORT

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### ABSTRACT:

A cystic hygroma is birth defect that often occurs in the head and neck area. The cyst may not be found at birth, but grows as the child grows. Sometimes it is not noticed until the child is older. [i] Its prevalence is 1 in 8000 live births[ii]. In newborn babies, a cystic hygroma looks like a bulge under the skin, which may be slightly blue. Babies born with this type of cyst often have a hard time eating and may grow more slowly than those without cystic hygromas. If a cystic hygroma is near the throat, your baby may have trouble breathing. These cysts can become infected. Left untreated, the cystic hygroma can harm nearby bones and teeth [iii]. The treatment is surgical excision, but it will relapse in 15% of cases.



Cystic hygroma resembles the description of medoja granthi, apachi and gandamala explained in the texts of Ayurveda. There are guidelines to treat it by local application of shotha hara lepa, Nasya karma and oral administration of Lekhana dravya.

A three-year-old boy with large swelling below the left side of the anterior part of neck diagnosed as Cystic hygroma from clinical examination supported by MRI study of the neck, was successfully treated with Ayurvedic approach.



Before Treatment



After Treatment

*"Life is not a problem to be solved, but a reality to be experienced."*

**KEYWORDS:** Cystic hygroma, Lekhana drugs, Medoja- granthi, Shotha-hara

**INTRODUCTION:** Cystic hygromas are one of the most commonly presenting lymphangiomas. They are congenital malformations of the lymphatic drainage system that typically form in the neck, clavicle, and axillary regions. They are most commonly found in young infants or on prenatal ultrasound, and depending on the anatomical site, have the potential to obstruct the airway. Respiratory distress, infection, and aesthetic reasons are the main indications for surgical excision.

There are lot of complications due to the rapid enlargement of the cystic hygroma, causing infiltration of the neck. This can result in complete or incomplete airway obstruction, dysphagia, and obstructive sleep apnea. Other complications include hemorrhage within the cystic hygroma leading to infection and later abscess formation.

**CASE REPORT:** Parents of a three-year-old boy, well-built and nourished brought to the outpatient department with a considerably large cystic swelling below the left mandible. The gradual growth was observed from the last 3-4 months and pediatricians and surgeons suggested excision of the growth as there was no medical interventions to reduce the swelling. The parents were educated and aware of the inherent risks of such surgery and opted for Ayurvedic treatment.

**Clinical Findings:** On observation, there was a cystic swelling of the size 4.5 x 5.8 x 5 cms in the floor of mouth on left side, extending to the left sublingual, submandibular, masticatory and parotid space.

On palpation, the swelling was rubbery and non-tender.

**MRI** study of the neck has diagnosed it as cystic hygroma with heterogenous thin walled multi loculated cystic lesion from the floor of mouth insinuating to the supra hyoid neck spaces.

#### Therapeutic Interventions

Three-fold approach was adopted in the management-

1. Internal medicines: Trayantyadi Kashayam and Varunadi Kashayam together 5 ml twice a day before food diluting with 10 ml of warm water; Shiva gutika and Kancharana guggulu each 100 mg twice a day after food.
2. Local application of Marmani gutika and Kancharana churna lepa twice a day over the swelling
3. Drinking of water boiled with Shad dharana churna 25 mg in 500 ml of water.

All these formulations are well known Ayurvedic medicines and procured from reputed manufacturers

#### Timeline

Date	Consultation	Remarks
09-06-2022	MRI scan	Lymphatic malformation likely of cystic hygroma
01-07-2022	First visit	The treatment started (with drugs mentioned as 1,3,4,7,8)
03-08-2022	Second visit	Growth started regressing. (Treatment included 2,3,4,6,7,8)
21-08-2022	Third visit	Growth remarkably reduced (Treatment included 2,3,6,7,8)
05-09-2022	First follow up	Almost normal

**Follow up and Outcome:** The intervention was tolerated by the patient and properly supported by the parents and the results were visible within a month and the gradual reduction in the size of the swelling infused confidence in the minds of little child. The hygroma was completely regressed in nearly two months. The follow up study done in the later months has confirmed that there was no relapse of the swelling.



**Discussion:** The elevated and matted swellings are called Granthi produced from the contaminated mamsa, rakta, sira and Kapha. A special type Medoja granthi speaks of collection of cheesy material in the sac. Well known classical formulations Kanchanara guggul is indicated for nodular swellings of the neck and other tumors. Kanchnar guggulu exhibited a cytotoxic effect by inhibiting cell division (antimitotic) and reducing cell proliferation.

Shiva gutika is indicated in all types of Medo vriddhi conditions in which Lekhana effect was required

Trayantyadi kashaya and Varunadi Kashaya are indicated in various types of swellings like granthi, arbuda and vidradhi.

The role of Shad dharana churna in accounted as the supreme formulation to manage abnormal movement of Vata dosha in the kapha and meda sthana like Amashaya. It is recommended in warm water as a dietary supplement.

Marmani gutika reduces pain and inflammation on repeated application as Peedana lepa in granthi, vidradhi and arbuda.

These cumulative actions have helped to reduce the agony of young boy, who was afraid of surgery and the anxiety on the risks inherent in the process.

**Conclusion :** The lymphatic malformations of children like cystic hygroma, which are usually excised in modern surgery needs a second thought, as evidenced by the present study to explore herbal alternative.



## A PHARMACO - ANALYTICAL STUDY OF DIFFERENT MARKET SAMPLES OF TRIVRIT OPERCULINA TURPETHUM (LINN.) SILVA MANSO

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Ayurveda is the most ancient medical system of the world. It is not a science dealing only with drugs. It is more a "way of life" and describes method for promotion, propagation and maintenance of positive health by its own unique approach. The back bone of Ayurveda is medicinal plants. Dravyaguna is essentially a compilation of ancient Ayurvedic knowledge. Dravyaguna means the science dealing with properties and actions of drugs.

As the demand of Ayurveda formulations is increasing on a large scale, there has been acute shortage of crude drug materials these days. This is the major reason for substitution and adulteration.

'Trivrit' is a very common and routinely used plant by the Indian practitioners. It has a large stout perennial twinner with milky juice and fleshy branched roots found throughout India upto an altitude of 900meter. Stem are triangular in shape, leaves are small oval in shape. Flowers white, fruits globose capsules, enclosed in large brittle imbricate sepals, seeds four or less, dull black.

In commercial market, the roots of *Argyrea nervosa* (Burm.f.) Boj. are sold instead of Trivrit. So the drug may become ineffective if it adulterated or substituted, though these plants belong to same family, yet they may differ in pharmacological activity. The roots of *Marsdenia tenacissima* W.A are sold in the market instead of Trivrit. Thus the present is intended to know the genuinity and diversity of market samples which are collected from different places of the country. It helps towards standardizing the drug.

### OBJECTIVES OF STUDY

1. Pharmacognostical study of samples collected from different markets.
2. Analytical study of collected samples.
3. Comparison of collected market samples of Trivrit Operculina turpethum (Linn.) Silva Manso

## MATERIAL & METHODS

### SOURCE OF DATA

1. Literary Data will be collected from classical and modern lioterture, internet and other sources of information.
2. The drug fot the present study will be collected from different market of India
3. Comparison of pharmacognostical & analytical study done with different samples of Trivrit Operculina turpethum (Linn) Silva Manso

### METHODS OF COLLECTION OF DATA

1. Pharmacognostical study of all collected samples from different markets.
2. Phytochemical evaluation of drug.
3. Qualitative analysis of drug.

**RESULT:** After the pharmacognostical and analytical study all of the market sample values are similar to that of CCRAS Standards.



## “A COMPARATIVE CLINICAL STUDY TO EVALUATE THE EFFICACY OF ARKA TAILA AND DURVADYA TAILA IN THE MANAGEMENT OF VICHARCHIKA.”

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Vicharchika is one of the most commonly encountered skin diseases all over the world. As per the symptamatology and pathogenesis. Vicharchika has been directly co-related with eczema in modern science i.e Atikandu (Excessive itching), Shyava (Erythema with discoloration), Raaji (Thickening, lichenification of skin), Ruja (Pain), Ruksha (Dry lesion) etc. Vicharchika is explained as Kshudra Kustha by Acharya Sushruta. It is characterized by Kandu, Rekha, Ruja and Rukshata on the affected lesion.

hough, Shamana and Shodhana Chikitsa are mentioned for it by various Acharyas but in the present study role of Shamana Aushadhi's in the form of Taila for external application is undertaken. Arka Taila is explained by Yogaratnakara as an effective Chikitsa, while Chakradatta explained Durvadya Taila as external application for Vicharchika. It has ingredient which act on Twacha vikaras. Hence both formulations are worth tested for their efficacy in the management of Vicharchika. They are safe and economical and suitable for the fast life.

This present study was designed with pre-test and post test, where in 30 patients suffering from Vicharchika of either sex between the age group of 18-60 years. This study was done as a comparative study on 15 patients each of Arka Taila and Durvadya Taila for a period of 21 days. Therapeutic effect of the treatment was assessed based on specific subjective and objective parameters.

**Key words:** Vicharchika, Arka Taila, Durvadya Taila.



## A CLINICAL STUDY TO COMPARE AND EVALUATE THE EFFICACY OF DUSPARSHAKADI KASHAYA AND ARSOGHNA VATI IN ARSAS (HAEMORRHOIDS)

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**Background and objectives:** Haemorrhoids is an abnormal sprout like growth occurs in Ano rectal region, which is torturing to the patients like an enemy and create an obstruction of anal passage. Expanded, twisted, or varicose veins arising in the anus is called Haemorrhoids.

This study was conducted to COMPARE AND EVALUATE THE EFFICACY OF DUSPARSHAKADI KASHAYA AND ARSOGHNA VATI IN ARSAS (HAEMORRHOIDS)

**Materials and methods:** This was a clinical study conducted in the Department of Shalya Tantra, KVG Ayurveda Medical College and Hospital, Sullia over a period of two years. A total of 30 patients were included in this study according to inclusion and exclusion criteria and were divided into two equal groups. Trial group treated with Dusparsakadi kashaya and control group treated with Arsoghna Vati in Arshas.

**Result:** Male to female ratio was 83:17, where maximum patients were from the age group 40-49 years. The position of pile mass majority found in 11 o clock position, 33% in Group A and 40% in Group B. In both groups patients were symptom free after treating. But when compared to the degree of pain, discharge and size of pile mass, Dusparsakadi kashaya is more effective than Arsoghna vati.

**Interpretation and Conclusion:** Dusparsakadi kashaya is more effective in patients with Arshas rather than Arsoghnavati. Bheshaja is more effective in Arshas rather than other modern surgical management where the chances of extensive tissue damage and hospitalization is more.

**Key words:** Haemorrhoids (Arshas) .Dusparsakadi Kashaya .Arsoghna Vati

## AKSHITARPANA (1<sup>ST</sup> YEAR BAMS, 2021-22 BATCH)

Akshi or nethra tarpana refers to the nourishment of eye. It is one of the treatment told in Ayurveda in which medicated oil is poured over the eye.

In this therapy, an enclosure is made around the eyes with black gram flour and medicated oil or ghee is poured in that. This treatment is very effective in improving vision and treating eye-related problems.

### Procedure :

The procedure is divided into three parts

### Pre – treatment :

The eyes of the patient are also examined. the patient's body is detoxified and cleansed using Panchakarma Detox in order to get the desired body conditions. The medicated ghee or oil used for this therapy should be lukewarm and in liquid form, is placed in a container which is dipped into warm water until it is heated at a desired temperature. Black gram flour is also kneaded and get ready for making an enclosure around the eyes.

**Main treatment :**

The treatment is done in the morning or evening. The room where the therapy is to be conducted should be free from smoke and dust. The first step in the therapy is making an enclosure or ring-like structure around the eyes. For this purpose, the person is advised to lie down on back in a comfortable position facing upwards. The ring is made using black gram flour around both the eyes sealed properly with wet flour to lukewarm medicated ghee is to be poured, patient is told to keep his eyes closed. After an adequate quantity of oil is poured the patient is advised to open and close eyes within short intervals.

**Post Treatment :**

The therapy lasts for 20-30 minutes after which the medicated ghee is drained out of the ring. The patient should avoid exposure to extreme temperature, bright lights, dust and strong winds and take a proper diet and avoid head wash until the completion of the therapy.

**Tarpana kaala :**

In vata dosha one has to take tarpana daily. In pitta and kapha dosha conditions one has to take akshi tarpana in alternative days and once in two days respectively.

**Indications :**

- During feeling of darkness in front of eyes.
- Excessive dryness of eyes.
- Eyes appear to be have hardened
- Weakness and loss of lashes or dirt in the eye.
- Abnormal deviation of eye ball or it is afflicted due to any disease.

**Contraindications :**

- During very hot, cold or cloudy day.
- One who is mentally worried.
- After physical exhaustion.
- Giddiness
- During complications like inflammation, redness of eye, severe pain in the eye etc.



## SHILAJATU (II<sup>ND</sup> YEAR BAMS, 2020-21 BATCH)

**English name - Black bitumen**

**Latin name – Asphaltum punjabinum**

Shilajatu is the 5th drug in the Maharasa group, found in the Himalayan mountains of India. It is a blackish shiny resinous substance with a pungent odour.

**Synonyms:** Shaileya, Shilaja, Shailadhatu, Shilamaya, Shilasweda, Shilaniryasa, Ashmaja, Ashmajatuka, Girija, Adrija, Ashmotha, Ashmalaksha, Gaireya.

Grahya Silajatu- confirmatory tests:

- When put in the fire, shilajatu attains lingaakara(bubbles) and emits smoke.
- Does not dissolve in water.
- Should possess katu and tikta rasa.

**Types:**

Acc. to Rasa texts, it is broadly classified into 2 types.

1. Gomutragandhi Shilajatu

- Sasatwa, - Nihsatwa.

2. Karpuragandhi Shilajatu

Acc. to Rasa Ratna Samuchaya it is of 3 types.

1. Swarnaadrija:- Appears like 'japapushpa', heavy.

3. Tamraadrija:- Bluish in colour, hard and heavy.

Acc. to Rasa TaranginIL

1. Swarnagarbha Shilajatu 3. Taamrargarbha Shilajatu

Acc to Charaka,

1. Hemagarbha Shilajatu 3. Taamrargarbha Shilajatu

Acc to Sushruta,

1. Swarnaadrija, 2. Rajataadrija, 3. Taamraadrija, 4. Lohaadrija, 5. Nagadrija, 6. Vangaadrija

Shodana :

1. Washing Shilajatu with 'ksara', 'amla' dravyas or 'gomutra' and dried to obtain Suddha shilajatu.

2. Ashuddha Shilajatu is triturated along with 'yavaksara' and 'suddha guggulu'. This mixture is kept in 'Swedani yantra', which contains Kaanji as amla dravadravya. This is cooked for 3 hours to obtain suddha shilajatu.

3. Shilajatu is washed with any of the liquids like cow's milk, Triphala Kashaya or juice of Bhringaraja, filtered and dried to obtain suddha shilajatu.

- Properties: • Rasa: Tikta, • Vipaka: Katu, • Karma: Vatahara, Mutrala, Yogavahi, Rasayana, Hrdya,  
• Therapeutic usage: Shotha, Panduroga, Shwasa, Plihavridhi, Jwara, Agnimandya, Apasmara, Unmada, Arshas, Mutrakrcchra, Ashmari, Udarashula, Prameha

Dosage: 2 to 8 Ratti (R.T.)

1 pala, ½ pala, 1 karsha (Cha. Chi.)

Anupana: Ksheera, Takra, Mamsarasa, Yusha, Jala, Gomutra.

Formulation: Arogyavardhini rasa, Candraprabavati, ShilajatwadiLoha, Shilajatvadivati, Shiva gutika, Lankeswara rasa, Sarvamehaantaka rasa, Purnachandra rasa, Yogaraja rasa.



## MARMANI GUTIKA (III<sup>RD</sup> YEAR BAMS (2019-20 BATCH))

Reference- Sahasra Yoga Gutika Prakarana

**Ingredients :**

1. Vidari – 192 gm	9. Sariva-192 gm	17. Sh. Shilajatu-24gm	25. Udumbara-96gm
2. Jeevanthi-192 gm	10. Guduchi-192 gm	18. Palunirvasi – 24gm	26. Ashwatha -96gm
3. Shatavari-192 gm	11. Durva-192 gm	19. Garudapacha – 24gm	27. Plaksha-96gm
4. Musta-192 gm	12. Yashtimadhu -192 gm	20. Prasariini-96gm	28. Kathaka-96gm
5. Varahikanda-192 gm	13. Chandana -192 gm	21. Kozuppa ( Lonika)- 96gm	29. Gokshura-96gm
6. Tavakshiri-192 gm	14. Raktachandana-192 gm	22. Matsyakshi-96gm	30. Hribera -96gm
7. Kuruvikizingu- 192 gm	15. Sahasravedhi-24 gm	23. Murva-96gm	31. Usheera-96gm
8. Amalaki-192 gm	16. Kumari-24gm	24. Nyagrodha- 96gm	32. Jala - 9.216lt reduced to 2.304lt

- |                      |  |  |
|----------------------|--|--|
| 33. Nyagrodha – 96gm | 39. Pullani-96gm                       | 45. Mudga- 768gm                       |
| 34. Udumbara- 96gm   | 40. Katabhi – 96gm                     | 46. Masha- 768gm                       |
| 35. Ashwatha – 96gm  | 41. Karamarda – 96gm                   | 47. Ela- 768gm                         |
| 36. Plaksha – 96gm   | 42. Daruharidra-96gm                   | 48. Jala- 12.288lt reduced to 3.072lt  |
| 37. Lodhra -96gm     | 43. Pashanabheda-384gm                 | to be filtered and again reduced to 1. |
| 38. Katabhi-96gm     | 44. Jala – 9.216 lt reduced to 2.304lt | 536lt.                                 |

**Method :** Make the fine powder of ingredients from 1- 19. Then kashaya of drugs from 20- 31 are made with mentioned quantity of water. The filtered kashaya is given first bhavana to above fine powders of drugs. Now drugs from 33 – 43 are made kashaya and second bhavana is given. Next the drugs from 45 – 47 are made kashya and third bhavana is given and rolles into vati of Amalaki size.

**Indications :** All types of Marma vikaras, provides relief from rheumatic fever, swelling and in Aghata (Trauma)

**Dosage :** 1-2 tablets once or twice a day

## BHELA SAMHITHA (IV<sup>TH</sup> YEAR BAMS (2018-19 BATCH))

Bhela was one of the six students of Atreya, along with Agnivesha. He is said to have composed a treatise called Bhela Samhita. This is said to be composed between 400- 750 CE. It is written in the form of dialogues between Sage Atreya and Bhela. The Samhita is not completely available and some of the chapters are missing. But whatever has survived gives evidence of the same ancient tradition as Charaka Samhita does. It has also eight divisions like the Charaka, and each section ends with: "Thus spoke Atreya" as it is in Charaka Samhita. Bhela Samhita essentially corroborates what Charaka Samhita says. Occasionally, there are some similarities to Sushruta Samhita also.

**Contents:** As that of Charaka Samhita, Bhela Samhita also contain 8 divisions .

Sthanas	Number of chapters	Available chapters
Sutrasthana	30	4-23, 25-28
Nidanasthana	8	2-8
Vimanasthana	8	1,3-6
Shaarirasthana	8	2-8
Indriyasthana	12	1-12
Chikitsa sthana	30	1-28
Kalpasthana	12	1,3-9
Siddisthana	12	1,2,4-8

**Contribution of Bhela Samhita:** Bhela Samhita is combined approach of both Atreya and Dhanwantari sampradaya. The Samhita greatly is emphasized on Kayachikitsa and have been given a unique contribution.

Bhela explained that a physician should treat the kaayagni for the proper relieving of the vyadhi. The Vaidya should always give first importance to kaayagni in order to relieve the disease.

Bhela samhitha also explained the "swedaja" classification of the living beings. He rejected the statement of agantuja factors or grahas causing Apasmara and stated that it is caused by the involvement of trisodhas only. He also explained about wide range of diseases, its causes, and treatment.

## STAFF ACHIEVEMENT



Dr. Raghavendra Prasad B.S. Asst.Prof. Dept.of Shalakya Tantra delivered a guest talk on "Awareness about prevention of drug addiction" at Vivekananda P.U. College Puttur.



Dr. Anitha S. Asst.Prof. Dept.of Kayachikitsa had won first place in Kanaka Keerthana Gangotri and Conferred with "Kanaka Puraskar" from Mangalagangothri, Kanakadasa Adhyayana Kendra, Mangalore University.

## Congratulation

to **Rajiv Gandhi University of Health Sciences Rank Holders (Post Graduation)**

*Dept. of R.S. & B.K.*



**Dr. Ambili K S**  
RSBK: 16th  
Research : 8th



**Dr. Tulasi T**  
RSBK:11th  
Research : 13th



**Dr. Sindhura K S**  
RSBK :19th  
Research :21st



**Dr. Arpitha S Kurup**  
RSBK: 21st  
Research : 17th

*Dept. of Kayachikitsa*



**Dr. Vinitha Nair**  
Kayachikitsa: 12th  
Research : 12th



**Dr. Anjali S**  
Kayachikitsa:17th  
Research : 15th



**Dr. Madhurya**  
Kayachikitsa:19th  
Research :16th



**Dr. Shivakumar**  
Kayachikitsa:22nd  
Research : 18th

*Dept. of Shalya Tantra*



**Dr. K J Kavya**  
Shalya Tantra: 11th  
Research : 20th



**Dr. Shyam Prasad P S**  
Shalya Tantra:13th  
Research : 13th



**Dr. Shreevarsha P**  
Shalya Tantra:14th  
Research :20th



**Dr. Mulla Abrar Ahmad**  
Shalya Tantra :14th  
Research : 27th

*"A thousand words will not leave so deep an impression as one deed."*

*Dept. of Panchakarma*



**Dr. Gurkirat Kaur**  
Overall : 2nd  
Panchakarma :8th  
Research : 4th



**Dr. Libnayudith P S**  
Panchakarma :5th  
Research : 21st



**Dr. Prathima N**  
Panchakarma :8th



**Dr. Neethi Ravindran**  
Panchakarma :14th  
Research : 26th



**Dr. Mariya Joseph**  
Panchakarma :27th  
Research : 27th

*Dept. of Agada Tantra*



**Dr. Surabhi P.**  
Overall : 4th  
Agada:4th  
Research : 6th



**Dr. Shreya S Shetty**  
Overall : 7th  
Agada: 7th  
Research : 6th



**Dr. Soumya P.T.**  
Agada :11th  
Research :11th



**Dr. Sreeith K V**  
Dravyaguna: 19th  
Research :25th

*Dept. of Dravyaguna*

*Research Methodology*



**Dr. Gurkirat Kaur**  
4th Rank  
Dept. Panchakarma



**Dr. Shreya S Shetty**  
6th Rank  
Dept. Agada Tantra



**Dr. Surabhi P**  
6th Rank  
Dept. Agada Tantra



**Dr. Ambili K S**  
8th Rank  
Dept. R. S & B K



**Dr. Soumya P T**  
11th Rank  
Dept. Agada Tantra



**Dr. Vinitha Nair**  
12th Rank  
Dept. Kayachikitsa



**Dr. Tulasi T**  
13th Rank  
Dept. R.S.&B.K



**Dr. Shyam Prasad P S**  
13th Rank  
Dept. Shalya Tantra



**Dr. Anjali S**  
15th Rank  
Dept. Kayachikitsa



**Dr. Madhurya**  
16th Rank  
Dept. Kayachikitsa



Dr. Arpitha S Kurup  
17th Rank  
Dept. R.56B.K



Dr. Shivakumar  
18th Rank  
Dept. Kayachihitsa



Dr. K J Kavya  
20th Rank  
Dept. Shalya Tantra



Dr. Shreevarsha P.  
20th Rank  
Dept. Shalya Tantra



Dr. Shindura K. S  
21st Rank  
Dept. R.56B.K



Dr. Libnayudhih P S  
21th Rank  
Dept. Panchakarma



Dr. Neethi Raveendran  
26th Rank  
Dept. Panchakarma



Dr. Mulla Abrar Ahmad  
27th Rank  
Dept. Shalya Tantra



Dr. Mariya Joseph  
27th Rank  
Dept. Panchakarma



Dr. Sreejith K V  
25th Rank  
Dept. Dravyaguna

## Congratulation

### to Toppers & Distinction Holders of IV<sup>th</sup> Year B.A.M.S.



Mallika - 82.27%  
First



Khadeejath Dilshana - 81.49%  
Second



Puneeth Raj R.M. - 80.6%  
Third



Deepika K S  
78.27% - Distinction



Anupama Babu  
78.1% - Distinction



Rashmi P  
77.8% - Distinction



Fathimath Samshana  
77.64% - Distinction



Divya Dhariwal  
77.41% - Distinction



Sanjitha K  
77.25% - Distinction



Namitha Shetty  
76.54% - Distinction



Roopashree C M  
76.2% - Distinction



Roma Bajaj  
75.9% - Distinction



K.V. Anitha  
75.29% - Distinction



Anusha M  
75.29% - Distinction

College Activities



On account of "Azadi Ka Amritmahotsav" Health Camp and Awareness talk at various schools of Sullia Taluk



Health camp at Sathya Prashanthi Advaita Jnana Mandir, Uchchangi.



On account of "Azadi Ka Amritmahotsav" Health Camp and Awareness talk at various schools of Sullia Taluk



K.V.G Ayurveda Pharma stall at Taluk Arogya Mela organized by Govt. of Karnataka along with District Health & Family Welfare Dept., Taluk Panchayat & Taluk Health Office.



Our staffs attended the Basic Care & Life Support course a project of RGUHS training program at KVG Medical College Sullia.



Our staff participated the Basic Care & Life Support Step 2 training program of BLCs course organized by Jeeva Raksha Trust a program of RGUHS Bangalore at Coorg Institute of Dental Science, Virajpet.



Distributed free Medical books to 2021-22 batch students sponsored by Dept. of Ayush, Govt. of Karnataka

*What the superior man seeks is in himself; what the small man seeks is in others.*



On account of 'World Hypertension Day' Dr. C. Ramachandra Bhat, Prof. KVG Medical College delivered talk on 'Hypertension'



Retirement felicitation to Dr. Hariprakash H, Prof& HOD Dept. of Roga Nidana for his 25 years of service in our institution



Farewell Function to 2017- 18 batch: Dr.Govinda Sharma, Prof. SDM College of Ayurveda Hassan was the Chief Guest of the program. & Cultural program at Farewell Day Celebration



Orientation Program to 2022-23 Batch  
Welcome speech by our Principal  
Dr. Leeladhar D. V



Felicitation to Chief Guest of the program  
Mr. Naveenchandra Jogi Circle Inspector of Police,  
Sullia by our President Dr. K. V. Chidananda.



Addressing the new batch of students by  
Mr. Akshay K. C. General Secretary  
AOLE (R) Sullia.



On account of " World Red Cross Day" guest talk by Mr. Sacheth Suvarna,  
Chairman, Youth Red Cross, Sub Committee, Mangalore.



Republic Day celebration at our  
Institution.



Guest talk by Mr. Jagadish A. H., Administrator on the topic "Health & Fitness" to our students.



World Environment Day Celebration- Dr. Rajashekar N. Prof & HOD Dept. of Dravya Guna delivered talk on "Health & Environment"



NSS officer Dr. Pramod P. A. attended workshop conducted by RGUHS on the topic "Engagement of NSS volunteers for Social & Behavior changes among the communities to avail Health & Nutrition Services" at Bangalore.



Free medical camp at Govt. Higher Primary School Shanthinagar, Sullia regarding Immunization, Nutrition & Screening for Anaemia as a part of SBCC.



Orientation program for NSS volunteers regarding Social & Behavior Changes in the Community.



Guest talk on 'Nutrition' by Dr. Ashok K, Prof & HOD, Dept. of Prasoothi Tantra & Stree Roga to NSS volunteers.



Sowing fest & Vanamahotsava at Ajjavara, Sullia organized by Dept. of Forest Sullia zone and Gram Panchayat Ajjavara.



Yoga demonstration at Shri Chennakeshava temple, Sullia by our NSS volunteers.

## QUIZ

- Which disease happens due to Phena Yuktha Stanyapana  
a. Hrudroga, b. Sotha, c. Pandu, d. Shiroroga
- Atisaragni is the synonym for \_\_\_\_\_  
a. Ahiphena, b. Ativisha, c. Kutaja, d. Amalaka
- Which among the following is live vaccine  
a. Rabies, b. Cholera, c. Pertussis, d. BCG
- Acc to vagbhata, Vata Prakopa occurs during  
a. Hemanta, b. Greeshma, c. Varsha, d. Sisira
- After death, rigor mortis develops after \_\_\_\_\_ hours  
a. 12 hours, b. 6 hours, c. 3 hours, d. 4 hours
- Sweet flag is \_\_\_\_  
a. Pipalli, b. Vacha, c. Yashtimadhu, d. Gokshura
- Paithika Vruna Gandha is \_\_\_\_  
a. Katu, b. Visra, c. Teekshna, d. Loha
- The Madya Bala Rogi, mode of Langana done  
a. Shodhana, b. Pachana, c. Upavasa, d. All the above
- Ahara as Mahabhaishajya mentioned by \_\_\_\_\_  
a. Sarangadhara, b. Charaka, c. Kashyapa, d. Charaka
- Main ingredient for Shad Bindhu Taila \_\_\_\_\_  
a. Bringaraja, b. Ativisha, c. Katuki, d. Chitraka

Answer: December 2021

1. c, 2. a, 3. c, 4. b, 5. b, 6. d, 7. c, 8. b, 9. b, 10. d

Quiz winner: Dr. Anusha (Internee)

## HOME REMEDIES

### Radish (*Raphanus sativa*):

- ◆ Persons suffering from piles and constipation can have raw Radish before meals to relieve from the symptoms.
- ◆ For Jaundice, juice of Radish leaves along with sugar is taken internally.
- ◆ In skin infection, Radish seeds is triturated with curds and applied to the parts effected.
- ◆ For burning micturation, intake of juice of Radish is beneficial.

by: Dr. Arpitha S Kurup  
PG Scholar (Dept. of RS & BK)

### DISCLAIMER:

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To,

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