



Late Dr. Kurunji Venkatramana Gowda
Founder President



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STUDENTS ARTICLES, COLLEGE ACTIVITIES, QUIZ, HOME REMEDIES

प्रज्वलितो ज्ञानमयो प्रदीपः ।



Editorial

देशकालविचारिणा स्मृतिमता
ज्ञानोत्थानउपकरणसंपत्सु नित्यं यन्तवता च ।

A Physician should always keep himself incessantly active in improving his knowledge and updating the equipments and instruments. This indeed helps for the progress of medical science making it more efficient to meet the challenges of the changing priorities of life.

An Ayurvedic physician has the added advantage of the accessible ancient knowledge available in the classical text. This may give him clues and guidance to solve problems connected with his profession. This issue opens with an article of an attempt to re'search' a suture material mentioned in Sushruta Samhitha.

It is also heartening to see that the young generation is opening its eyes to the vices of getting lost in the virtual world. Awakening is the beginning of betterment.

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EVALUATION OF SHANA AS SUTURING MATERIAL IN OPERATED CASES OF INGUINAL HERNIA

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INTRODUCTION:

The Sushruta Samhita represents school of professionalized surgical practice. In ancient era, it was the most advanced school of surgery in the world. *Shana* was one of the plant origin suturing material used by Acharya Susrutha. An inexpensive suture with good performance is the need of the day. Hence, this research work proposes to bring focus on the efficacy of *Shana* as suture material in the operated cases of inguinal hernia for external wound closure.

OBJECTIVES:

- To process the *Shana (Crotalaria pallida)* fibers to make it an acceptable suturing material and study its physical properties at various stages.
- To note its effects as suturing material and compare it with the standard cotton thread in external wound closure in inguinal hernia.

STUDY DESIGN:

- Fibers are isolated from *Shana* stem. Thread is prepared and sterilized.
- Control group: skin closure of 10 patients by cotton thread no.10
- Trial group: skin closure of 12 patients by *Shana (Crotalaria pallida)* sutures.
- Patients were assessed in the post operative period till the removal of sutures and follow up after one week from the day of removal of sutures.

Inclusion Criteria	Exclusion Criteria
<ul style="list-style-type: none"> Elective surgery for inguinal hernia (U/L or B/L) under Local /Spinal/GA. Patients of either sex aged between 20-60 years. 	<ul style="list-style-type: none"> Systemic diseases like Diabetes Mellitus, Hepatitis, TB, and HIV. Recurrent hernia. Emergency surgical indications

ASSESSMENT CRITERIA:

Physical properties of the *Shana (Crotalaria pallida)* fiber were measured in Central Silk Technological Research Institute, central silk board, Bangalore.

Diameter	• Before autoclaving
Tensile Strength	• After autoclaving
Subjective Parameters	1. Pain 2. Restoration of daily activities
Objective Parameters	1. Discharge 2. Edema 3. Infection 4. Days taken for wound healing

Preparation of Shana "Suture Material": Method of extraction of *Shana* fibers is not available in Ayurvedic literatures. Mature erect *Shana* stems are completely immersed in container filled with tap water and single *Shana* fibres are separated. Four filaments of *Shana* fibres of equal length are twisted and wound around the rubber tube. Terminal portions with fraying ends are trimmed off. *Shana* Sutures are **sterilized** by autoclaving and stored in sterile steel container.

RESULTS AND DISCUSSION:

As per the U.S. Pharmacopeia classification of nonabsorbable surgical sutures, *Shana* belongs to Class II sutures as it is a natural plant origin suture material. Routine average length yield of *Shana* thread is about 25-50 cm. The *Shana* suture has 4 single filaments Therefore, multifilament in construction. Average diameter 0.35 to 0.399mm

come under 0 USP size. Thus **diameter of Shana** suture in the present study comes under the 0 USP size. Average knot pull tensile strength of Class II, 0 USP size suture is 14.2N. Manually prepared *Shana* sutures were only 3N less than the tensile strength requirements as defined by the USP for Class II, 0 USP size sutures. *Shana* sutures maintained optimum tensile strength so as to hold the tissues until primary healing occurred.

Physical properties	Single filament	Before Autoclaving	After Autoclaving
Diameter	0.28mm	0.40mm	0.38mm
Breaking load	3.0	10.1	11.1
Tensile strength (N)	12.0	8.9	11.0

Shana sutures have low memory which facilitates easy handling of sutures. It exhibits **capillary action**, possess good **knot security and offers mild-moderate** tissue drag.

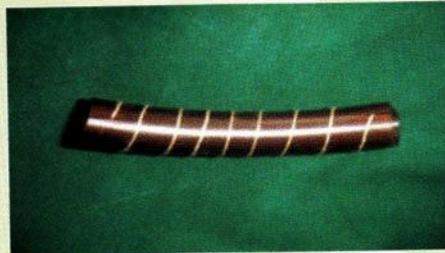
The variation is statistically significant in post operative pain and edema. Trial group patients showed good recovery in restoration of daily activities and it is statistically significant. The difference in discharge is statistically not significant. No patient in trial group suffered from infection. *Shana* exhibited mild to moderate tissue reaction. In 1 patient in the trial group, sutures removed on 4th day after surgery. Suture removal was done on 5th day in 6 patients of control and 8 patients of trial group. Removal of sutures was done on 6th day in 4 patients of control and 3 patients of trial group. The variation was statistically not significant.

CONCLUSION:

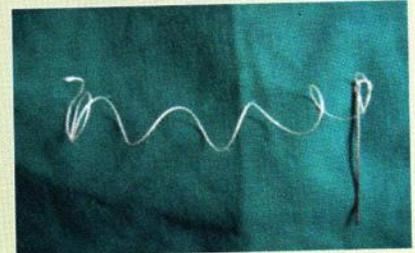
Shana (crotalaria pallida) fibers can be made an acceptable suturing material and it can be used for skin closure in inguinal hernia. Present study illustrates that physical property of *Shana* sutures are only a step behind the standard requirements. Raw material of *Shana* is easily available. *Shana* sutures are cost effective, facilitates easy handling, possess and maintain good tensile strength, exhibit good **knot security and** causes minimum tissue reaction. Present study justifies the use of *Shana* as surgical suture by Acharya Sushruta.



Bundles of shanafibres



Shana suture



Swaged shana suture

SAHACHARA

2nd PROF BAMS (Jr) [2012-2013]

BOTONICAL NAME	: Barleria prionitis
FAMILY	: Acanthaceae
VERNACULAR NAMES	: Hindi : Sahachara, Kannada : Sahacara
SYNONYMS	: Kurantaka, Koranda, Kerandaka
BOTONICAL DESCRIPTION	: A bushy, prickly under shrub, leaves- simple, elliptic, acute, glabrous. Flowers - sessile, solitary, yellow, subulate, linear lanceolate. Fruit - capsule, ovoid. Seeds- compressed, 0.8 cm in diameter.
CHEMICAL COMPOSITION	: Alkaloids, beta- sitosterol, potassium.
PROPERTIES	: RASA: madhura, tikta, GUNA: snigda, ViRYA: usna, VIPAKA: katu.
KARMA	: Kaphahara, kasa, kesha ranjana, vishahara
INDICATION	: Kustha, Kandu, Vatarakta, Palitya
PART USED	: Root, leaf.
IMPORTANT PREPARATION	: Sahacaradi taila, Nilikadya taila, Astavarga kvathaurna, Rasnaerandadi kvathaurna.



VAITARANA BASTI IN THE MANAGEMENT OF KATIGRAHA



Treating physician :
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BAMS, M.D. (Ayu)

Attending physician :
Dr. Litty C. J.
PG Scholar, Dept. of Panchakarma

In modern era, due to changes in life style, several disharmonies are seen in biological system of human being. Busy professional and social life, improper sitting postures in offices, continuous and over exertion, jerking movements during travelling and sports etc create undue pressure over the musculoskeletal system. These contribute to the manifestation of diseases like low backache, sciatica, cervical spondylosis, osteoarthritis etc.

Low back ache is a leading cause of disability, with 60-80% of the world population experiencing pain at some time in their life. This interferes with quality of life, work performance and is the most common reason for medical consultations. Few cases of back pain are due to specific causes like sitting in same position for long duration; heavy exercises, daily travelling, sleeping in irregular postures etc and most causes are not specific. Acute back pain is the most common presentation and is usually self-limiting, lasting less than 3 months regardless of treatment. Chronic back pain is more difficult problem, which often has strong psychological overlay, work dissatisfaction etc.

This condition is explained in Ayurveda as Katigraha. Even Katigraha is not explained as a separate disease entity in Bruhathrayees, but in many disease conditions like Gridhrasi, PakwashayagataVata, Amavata etc it appears as one of the major symptom. The classical texts Gadanigraha and Bhavaprakasha have dealt with this disease separately, which is having the Lakshanas like Shoola and Graha of Kati Pradesha. According to Bhavaprakasha, the Vata getting aggravated localized in the Kati (waist) either alone (without association of Ama) or with association of Ama gives rise to pain, this is known as Katigraha.

Katigraha is mentioned as TrikaVedana in the list of symptoms mentioned in PakvashyagathaVata. Acharya Sushruta has mentioned 3 therapies, SnehaVirechana, ShodhanaBasti, Lavana yukthayogas in PakvashayagataVata. Acharya Charaka has mentioned one treatment for the same condition that is Vibandha Hara Chikitsa. Vaitarana Basti is the variety of Sodhana Basti that can be adopted in Katigraha, since it is considered as one among the symptom in PakvashayagataVata.

Vaitarana is the name of a river, which a person is supposed to cross during death in his astral realm. This Basti is so powerful in a sense that it can bring back life of a person who is about to cross the vaitarana river. Chakradutta indicates this Basti in Shoola, Anaha and Amavatha. Vangasena added some more conditions like KatiprishtaSotha, Urusthamba, Gridhrasi, Janu Sankocha, Vatavikara.

CLINICAL FEATURES:

In VatajaKatigraha, Ruk&Sthamba in Katipradesh
In VataKaphajaKatigraha, along with Ruk&Sthamba, SamaLakshanas like Balabramsa, Gourava, Alasya, Apakti, Malasanga, Aruchi, Klama will be seen.

AGGRAVATING FACTORS:

Exposure to cold, experience of heavy work or restlessness.

CASE REPORT:

The Subject of our case study is Mr.Venkatesh (name changed), 58 years old male, who was admitted in our hospital KVGAMC, Sullia, on 22/07/2013, with the main complaints of Low back ache. His trouble apparently began 7 years before and aggravated since 2 days.

Presenting Complaints:

Pain and Stiffness in Low back region since 7years and aggravated since 2 days.

MANAGEMENT & TREATMENT:

Patient was advised for VaitaranaBasti in the format of Kala Basti for 15 days. Follow-up after 30 days.

Ingredients of Vaitarana Basti:

Chincha/Amla-1 Pala (50 gm), Guda-1 Sukti (25 gm)

Saindhava- 1 Karsha (12 gm), Gomutra-1 Kudava (200 ml)

Dashamulakwatha - 1 Kudava (200 ml) Sahacharaditaila - Ishat(25 ml)

OUTCOME:

Patient got relieved in pain and stiffness in Katipredesha.

DISCUSSION:

Since Katigraha is considered as one among the symptom in PakvashayagataVata, VaitaranaBasti is the variety of Sodhana Basti can be adopted in Katigraha.

Saindhalavana by its Sukshma and Tikshna properties, it helps to pass the drug molecule in systemic circulation through mucosa. Thus, it helps the Basti Dravya to reach up to the molecular level. It is also helpful for the elimination of waste due to its irritant property. It is capable of liquefying the viscid matter and breaking it into minute particles. In this Basti instead of Madhu, Guda was used. It along with Saindhava makes homogenous mixture, to form a solution having properties to permeable the water easily. The retention of the irritative substances may be favored by making its solution as nearly isotonic as possible by using colloidal fluids. Regarding Guda, it is Laghu, Anabhishtandi, Agnivardhaka and Vatapittaghna. It also helps in carrying the drug micro-cellular level. In this Basti, SahacharadiTaila mixed with the solution of Guda and Saindhava help in forming the uniform mixture. Chincha is having Vata-Kaphashamaka, Ruksha and Ushna properties. These properties of the Chincha make it useful for the disease Katigraha. In VaitaranaBasti, the Gomutra is chief content, which owing to its Katu Rasa, KatuVipaka, UshnaVirya, Laghu, Ruksha and TikshnaGuna pacify the Kapha. It is having Tridosahara, Agnideepana, Pachana, Srotovishodhana and Vatanulomana properties. Thus solves both the purpose; to curing the disease and to purify the body.

CONCLUSION:

It can be concluded that Katigraha looks similar to Low back ache in its clinical appearance and VaitaranaBasti is effective in the treatment of Katigraha.



“EVALUATION OF VRANA ROPANA ACTION OF DURVA GHRUTA AND KARPOORA GHRUTA LEPANA IN SADHYOVRANA A COMPARITIVE STUDY”

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PG Scholar

Dr. Harshavardhana.K
Co-guide

Dr. Deenaprakash Bharadwaj
Guide & HOD Dept. of Shalya tantra.K.V.G AMC

Every human being will be having his own ambitions in his life & will have his own way to reach his goals. During that effort he will be exposed to different types of mental & physical hardships. So Vrana is the commonest painful condition that every human being suffers in their life. As the science has advanced newer remedies tried out for specially recovery, but the oldest remedies still lead the race. Here an attempt is made to compare the efficacy of Durva Ghruta and Karpoora Ghruta in Sadhyo Vrana with the title “Evaluation Of Vrana Ropana Action Of Durva Ghruta And Karpoora Ghruta Lepana In Sadhyovrana A Comparitive Study”.

Methods :

Thirty patients of *Sadhyo Vrana* were collected from OPD of the KVG Ayurveda Medical College and assigned into two groups.

Group A - Durva Ghruta 15 patients

Group B - Karpoora Ghruta - 15 patients .

Assesment Criteria : Pain, Tenderness, Itching, Discoloration and Discharge.

Treatment plan : Daily dressing done for 7 days and Follow up on 14th day.

Result and Discussion:

In cases of *Sadhyo Vrana*, Group A had overall result of 91.27% and Group B had 81.59%. So Durva ghruta promotes better healing than Karpoora ghruta. *Durva* has *vrana ropana, vishagna, daha prashamana, stambhana and raktashodhaka* properties. This makes Durva a good vrana ropaka dravya . By the virtue of *Lekhana, Putihara, Dahahara, Kandughana and Vrana Ropana* properties, *Karpoora*, helps in wound healing. Ghruta is the base of both preparations. *Ghruta* has *pitta Anilahara guna, ropana, varnya and vishahara* properties. Lipophilic action of *ghruta* facilitates entry of the formulation into the cell.

NANOPHARMACEUTICALS

Nanopharmaceuticals are a relatively new class of therapeutic substances containing nonmaterial that often have unique nanoproperties (physiochemical properties) due to their small size, a high surface to volume ratio and the possibility of modulating their properties, nanoparticles intended for a broad spectrum of clinical therapeutic applications. They have the potential to target a particular organ or tissue site. Those therapeutic agents that were previously unsuitable for oral or injectable traditional drug formulations can now be 'nanoformulated' for site specific delivery due to superior pharmacokinetics, pharmacodynamics and active intracellular delivery. This approach has the ability to reduce toxicity and enhance bioavailability, improving efficacy and patient compliance.



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“EVALUATION ON EFFECT OF UPANAHA SWEDA AND WAX THERAPY IN JANU SANDHIGATA VATA W.S.R.TO OSTEOARTHRITIS OF KNEE JOINT- A COMPARATIVE CLINICAL STUDY.”

Background & Objective :

Ayurveda emphasizes the importance of adapting the daily and seasonal regimen along with the healthy life style and food habits. The faulty dietary regimens and habits leads to various disorders. One such disorder is Mutrakricchra. Mutrakricchra is a disease where one passes urine with difficulty. The symptoms of mutrakricchra closely resembles to Urine Tract Infection (U.T.I). The line of treatment in contemporary science is antibiotics and steroids. Even though they prove to be useful, they involve considerable amount of risk, side effects, expensive and reoccurrence is high. Hence there is a need for Effective single drug which is fast acting in minimal doses which prevent reoccurrence and with least side effects.

Here comes the importance of herbal remedies of Ayurveda. Eladwaya (seeds of *Elettaria cardamommum* Maton and *Ammomum subulatum* Roxb.) has a wide range of therapeutic value. Because of the properties like Madhura rasa, madhura vipaka and sita virya it acts on mutravaha srotases

In the present study seeds of Eladwaya is studied :

- Pharmacognostically: Macroscopic, microscopic and powder microscopic study of seeds of *Elettaria cardamommum* Maton and *Ammomum subulatum* Roxb.)
- Analytical study: Organoleptic study, physico-chemical analysis, and H.P.T.L.C.
- Clinically: 30 patients were taken divided into three groups. Group A was given Sukshma churna, group B was given Sthula churna and Group C standard drug Gokshura. The dosage was taken as per the reference given for three days and follow up on seventh day. The subjective and objective parameters of pre and post treatment will be compared for assessment of the results. Then all the results will be analyzed statistically.

Result : The trial drugs have shown significant action in relieving Mutrakricchra.

Conclusion : The present clinical study has shown that, both the trial drug are having significant action in relieving mutrakricchra. Among them Sukshma Ela is comparatively superior.

Keywords : Eladwaya, Elettariacardamommum Maton and AmmommsubulatumRoxb, Mutrakricchra, Pharmacognosy, Analytical



STANDARDIZATION

Dr. Satheesh S. Warriar, P.G. Scholar, Dept. of R.S. & B.K.

World is going behind the norms for standardization of Ayurvedic drugs in both herbal and mineral formulations. Many new theories rules and regulations are introduced for increasing the quality and reproducibility of product quality. Rules and regulations should be practiced from the collection of drugs to manufacturing and storage. Vrikshayurveda, Brihat trayis, Laghu trayis and many other Ayurvedic text books explained these points in a beautiful manner. Instead of thinking about new rules and regulations, by following the basics principles mentioned in samhitas one can get Quality assured product.

1. **Standard operating Procedures (S.O.P)** : These are the standard steps one should follow during pharmaceutical preparation. Standard operating procedures are mandatory from the collection of a drug to final product. Rasa Shastra as well bhaishajya Kalpana text books given detailed preparation methods with ratios of drugs and other ingredients which should be used in a particular formulation, even if the ratio is not known.
2. **Good Agricultural Practices(G.A.P)** : Deals with Good Cultivation techniques , now in 21st century going back to organic farming, aqua farming and many other most modern thoughts for more productivity .In Vrikshayurveda a text book on plants , find many Fertilizers used in cultivation of plants and these gives increase in Quality and quantity of products . Simply soil examination and giving chemicals may give us more products but not desired quality of products, quality of a plant depends on its chemical constituents not in mere physical appearance.
3. **Good collection practices(G.C.P)**: As a part of Quality assurance, forced to certify the genuineness of a plant part which is collected. Samhitakaras gives rules for collection procedure, part to be collected, from where and how. Acharyas mentioned specific timings and auspicious day for the collection of different parts of plants, and places of collection, one should not collect plants from road sides, junctions and from funeral places this might be because of microbial contamination.
4. **Good manufacturing practices**: G.M.P has been introduced to keep the Quality of the product, by ensuring the cleanliness of place and mental status of the person who is taking care of the work. Ayurveda grantha's have mentioned detailed description about G.M.P while explaining rasashala / Bheshajyagara. Directions diamentions and other parameters mentioned in rasashala are sufficient to produce good quality products For ensuring Quality of prepared products आचार्य's have mentioned many parameters like सिध्द लक्षणा's, Bhasma pareeksha for both herbal and mineral formulations. Which are both organoleptic as well as chemical in nature.

SAHACHARDI TAILA

2nd PROF BAMS(JR) [2011-2012]

समूलशाखस्य सहचरस्य तुलां समेतां दशमूलतश्च ।
 पलानि पञ्चाशदभीरुतश्च पादावशेषं विपचेद्वहेऽपाम्
 तत्र सेव्यनखकुष्ठहिमैलास्पृक् प्रियङ्गुनलिकाम्बुशिलाजैः ।
 लोहितानलदलोहसुराहैः कोपनामिशितुरुष्कनतैश्च
 तुल्यक्षीरं पालिकैस्तैलपात्रं सिद्धं कृच्छान् शीलितं हन्ति वातान् ।
 कम्पाक्षेपस्तम्भशोषादियुक्तान् गुल्मोन्मादौ पीनस योनिरोगान्

A.H (Vatavyadhi Chikitsa)/67-69.

INGREDIENTS :

- Drava Dravya** : Sahachara panchanga-1 Tula; Dasamoola 1 Tula; Abheeru (Shathavari) - 50 Pala
Jala -1 vaha(4 drona); Prepare kwatha-(reduced to ¼); Ksheera 1 adhaka
- Kalka dravya** : Sevy (Usira), Nakha, Kushta, Hima, Ela, Sprik, Priyangu, Nalika, Ambu (Hribera),
Silaja, Lohita (Manjishta), Nalada, Loha(agaru), Surahwa (devadaru),
Kopana (choraka), Misi (sathapushpa), Turushka (Sallaki), Nata (tagara)-1 pala each
- Sneha Dravya** : Tila Taila 1 Adhaka
Procedure : Prepare taila with the above drugs viz, kalka, sneha and drava dravyas
taken in the specified quantity.
- Indication** : Kampa, Akshepaka, Sthambha, Shosham, Gulma, Unmada, Pinasa, Yoniroga,
Mutrakricchra, Vataroga.

BASAVARAJEYAM **FINAL YEAR B.A.M.S (2010-2011)**

'Basavarajeeyam' is a complete compendium and treatise of Ayurveda that mainly describes on various herbal remedies.

It consists of 25 chapters (Prakaranas) presented in the form of Sanskrit shlokas and Telugu cantons (Padyas). It details on various drugs; some of them new to the Ayurvedic Research scholars. A total of 377 medicinal plants described in it, of which, 336 are in Sanskrit verses, 29 in Telugu verses and 12 in parentheses.

It was for the first time in India that a non-Telugu speaking personality, **Pt. Sri Govardhana Sharma Changani** translated these Telugu verses into Sanskrit. But there were several errors due to lack of knowledge of Telugu language and omissions due to difficulty in translation.

About the Author : 'Basavaraju', son of Namahshivaya was the disciple of Ramadhesika and was a staunch follower of Veerashaivism and a contemporary of King Bijjala. He has referred many other works like Charaka, Madhava Nidana, Revanakalpam and others.

Contents : It is an exhaustive work on various diseases like Gulma and Phirangiroga. It indicates Phirangichakka (Madhusnuhi) for the treatment of Meharoga and Granthi.

He explained of 'Golluveeyuta' as a form of Agnikarma with red hot needles and coins placed on abdomen to prevent Shoola and other abdominal disorders. He also enumerated on the various aspects of 'Naadi' and described on various local drugs of significance in addition to classical drugs.

Due to its all-round significance, 'Basavarajeeyam' is one of the most popularly adopted treatises by the practitioners of South India, and also in North India.

VASANTHA RITU **(SPRING SEASON)** **1st year B.A.M.S (2013-2014)**

Vasantha ritu or spring season comprises of two months, chaitra and vaisaka. These months comprises from mid March-mid May. In vasantha ritu, astringent tastes are more predominant and strong.

Kapha dosha which has undergone an increase in cold seasons (Sisira) becomes liquefied during spring season because of heat of Sun, decrease the digestive capacity and it gives rise to several diseases. Hence aggravated Kapha can be pacified by vama, nasya; intake of diet which is laghu and ruksha, and by vyayama, udvartana and aghata. One should take bath and anoint himself with the pastes of karpura, chandana, agaru and kumkuma.

The delights recommended in Vasanta ritu are barley, wheat and meat of Jangala desa animals, drink alcoholic beverages, wine made of sugarcane, grapes and honey that are delightfully delicious, the juice of mango fruit mixed with fragrant substances, and also drink water mixed with madhu, or water boiled with either sringavera, sara or musta.

The mid-day should be spent by telling and hearing stories in parks, amidst fragrant flowers and trees bearing exotic blooms.

To be avoided during this ritu:

- Sleep during day time
- Madhura and Amla rasa food
- Foods containing Guru, Snigdha and sheeta guna



Sneha Antony
IInd Prof. BAMS

VICIOUS WEB OF VIRTUAL WORLD

The wheel of time moves on at fast pace, sweeping past the old & renewing the entire globe. Today, in the 21st century also called as computer age many things has changed & much more to change yet. Rural India is stepping ahead as Incredible India. The flourishing industries, techno parks, IT industries etc adds up to t pride of India. One of the reasons behind this sudden economical development is the wide acceptance to the virtual world.

Virtual world is defined as Massively Multiplayer Online World (MMOW) is a computer based simulated world. It doesn't only involve 3D games but also forums, blogs, wikis, chat rooms, instant messaging & video conferences. Companies are attracting customers by the development of new form of virtual advertisements; the field of education is on the path of progress by introducing, communities, interactive white boards etc; Starlight Children Foundation entertains the children suffering from painful illness & diseases like autism, which otherwise would have been cut off from the society.

But we should realize the basic fact that we are humans residing in a very real world & not merely the cartoons jumping around on a mouse click. Today virtual world as an alternative to 'live persons'. It presents an unreal environment with instant connections & gratification. The time has gone when the shopkeepers would have penned down your purchase bills or the Govt. servants working overtime for getting done with their huge loads of paper works; rather now we witness dozens of computers taking place of human brain, which has moved into a state of morbidity. Virtual world has made us idle, lazy, obese, couch potatoes. Hours spent on it has led to diseases like eye disorders, migraines, obesity, heart diseases, digestive disorders, back pain, headache & many more. We are now patients of virtual world.

Many of the psychologists explain virtual world as-

A person has unlimited assay to an infinite array of opportunities to fulfill every fantasy, grant every wish or satisfy every desire. So it is a place to go when real life become overbear in or boring. Here people can communicate with people online without any hesitation as they are never going to face each other in reality. So it is a psychological escape.

Psychologists of St. Michael's college & University of Washington-

Parents offer video games to kids with a false belief that they will learn better navigation & get a better idea of time, space & energy; which is totally wrong. Virtual navigation shows no increase in ability to navigate the real physical environment.

Thus the age old saying goes correct that 'in excess even nectar can act as deadly poison'. Virtual world can benefit us if used in the proper manner & if on the other way then we only will be the ultimate sufferers.

ACHIEVEMENT

STAFF ACHIEVEMENT



Mr. Atul Kumar Ojha, M. Pharm (Analytical Chemist) has successfully completed the six days training programme on "Quality Control" conducted by CaRe Keralam Ltd. Kinfra small industries, KINFRA PARK, Koratty, Thrissur



Rtn. Dr. Purushotham K.G. Reader, Selected as Director for web site of Rotary International Sullia - Dist. 3180

STUDENT ACHIEVEMENT

100% result in Final year BAMS Exam



SNEHA K.
(76%)



NITHYA PRIYA P. K.
(75.70%)

Secured first & second Place in Final year BAMS



Dr. Anusree S. B.,
1st year P.G Scholar
(Dept. of Kayachikitsa)
got 1st prize in Quiz
Competition held
at 6th Astanga Hridayam
Satram, Guruvayoor on
15/2/14.



Dr. Vinitha V. Nair,
2nd year P.G Scholar (Dept of Dravyaguna)
Attended and Presented paper on "Basis
for inclusion of new herbs in Ayurvedic
pharmacopeia-Perspective on problems
and benefits" in Karnataka State level
final P.G. Presentation contest, organized
by Himalaya drug company Bangalore
on 27/3/14.



Dr. Satheesh S. Warriar
(2nd year P.G Scholar Dept. of
Rasashastra & Bhaishajya
Kalpana) has successfully
completed the six days training
programme on "Quality Control"
conducted by Care Keralam Ltd.
Kinfra small industries, KINFRA
PARK, Koratty, Thrissur.

PAPERS AND PRESENTATIONS FROM P. G. SCHOLARS

- P.G Scholars Participated and Presented in International Seminar Ayurveda, Global Ayurveda Festival held at Kochi, Kerala
- Dr. Harikrishnan. S (2nd yr P.G Scholar-Dept of Shalya Tantra)- on the topic- Critical evaluation on Marmaabhigata W.S.R to Bursitis.(Oral presentation)
- Dr. Nitika Ganjoo (2nd yr P.G Scholar- Dept of Shalya Tantra)- - Jalauka vacharana in siragranthi (varicose vein) An emerging occupational disease(Poster presentation)
- Dr. Rajani Nair (Final yr P.G Scholar -Dept of Shalya Tantra - Evaluation of vrana ropana action of Durva ghritha and Karpooora ghritha on Sadhyovrana-A comparative study(Poster presentation)
- Dr. Padma Bhat (Final yr P.G Scholar -Dept of Shalya Tantra)- Decubitus ulcer –A case study.
- Dr. Sandeep. S (2nd yr P.G Scholar- Dept of Shalya Tantra)-Vestana Chikitsa and its application in present era-A literary review.
- Dr. Sandeep.V.S(2nd yr P.G Scholar-Dept of Shalya Tantra)- Plastic Surgery –An Ayurvedic perspective.
- Dr. Mathew. V. Sam (Final yr P.G Scholar -Dept of Shalya Tantra)- Clinical Study on Allergic Rhinitis with Haridra Choorna and Pippali Choorna in cow's milk.
- Dr. Vinitha V. Nair (2nd yr P.G Scholar-Dept of Dravyaguna)-Public Health (poster presentation)
- Dr. Rejin.P.V (2nd yr P.G Scholar-Dept of Dravyaguna)- Traditional use of vishagna plants in Keraleeya visha Chikitsa-A toxicological drug study.(Poser presentation)
- Dr. Rakesh (Final yr P.G Scholar-Dept of Dravyaguna)- Potentiation effect of root extract and essential oil of vetiveria zizanioides(Linn) on Phenobarbitone induced sedative – hypnosis in swiss albino mice.(oral presentation)
- Dr. Varghese (Final yr P.G Scholar-Dept of Dravyaguna)- Adulteration and substitution of medicinal plants with special focus on market samples of Kerala
- Dr. Lakshmeesha K.S. (final yr P.G Scholar –Dept of Panchakarma)- Evaluation on effect of Upanaha sweda and wax therapy in janusandighata vata W.S.R to osteoarthritis of Knee Joint-A Comparative Clinical study".(Oral Presentation)
- Dr. Shruti. S (2nd yr P.G Scholar-Dept of R.S & B.K) –A case study on infertility through Ayurveda W.S.R to PCOS.(Poster Presentation)
- Dr. Geethu Sudheesh (2nd yr P.G Scholar-Dept of R.S & B.K)- Jara W.S.R to Aging process with Rasayana(Poster Presentation)
- Dr. Anusree S.B (1st year P.G Scholar-Dept of Kayachikitsa)-Presented paper on Clinical study of krimighna Chikitsa in pandu with respect to iron deficiency (Anemia) in 6th Astanga Hridayam satram, Guruvayoor.
- Dr.Vishnu Prasad .V (1st year P.G Scholar-Dept of Panchakarma)-presented paper on Efficacy of Choornabasti in ghridrasi in 6th Astanga Hridayam Satram,Guruvayoor
- Dr. Swetha.K.S (2nd year P.G Scholar-Dept of Shalya Tantra)-Presented paper on Siravyadhana in Siragranthi-Clinical Study - National seminar on Siravyadha,Muniyal Institute of Ayurvedic Science,Manipal on 12/4/14
- Dr. Padma Bhat (Final year P.G Scholar-Dept of Shalya Tantra)-Siravyadhana in Vatakantaka-Clinical study-National seminar on Siravyadha,Muniyal Institute of Ayurvedic Science,Manipal on 12/4/14
- Dr. Aiyanna.P.P (1st year P.G Scholar –Dept of Shalya Tantra)-Siravyadhana in Padadhari-Clinical Study-National seminar on Siravyadha,Muniyal Institute of Ayurvedic Science,Manipal on 12/4/14

College Activities



N.S.S. Health Camp at Kanthamangala Govt. L.P. School



Foundation laying ceremony & Bhoomipooja for New Block of Ladies hostel



Inspection KVG Ayurveda Pharma by Dr. H. Y. Rathode, Drug Licencing authority AYUSH Govt. of Karnataka



General Manager Syndicate Bank visited our Institute



Inaugural ceremony of N.S.S special annual camp



Guest lecture on awareness regarding Women health by Dr. Geetha Doppa



Talk by Sri.Seetharama Kevala Human Values & Personality development



Guest lecture on Service experience in foreign Countries by Dr.Prabhakara Shishila



Guest lecture on Fractures and Management by Dr. Ranganath



Guest lecture on personality development by Mrs. Anuradha Kurunji



N.S.S Volunteers with N.S.S Camp Officer Dr. Harshitha M.



N.S.S Volunteers at Shramadhana.

College Activities



Get together of old students (1996 batch) with our President



Valedictory function-Addressing the N.S.S Volunteers by Smt. Shobha Chidhananda



N.S.S Volunteers at Herbal Garden



Inauguration of Taluk level CME & Workshop for Ayush Doctors by Dr. K. V Chidhananda, President A.O.L.E



Releasing the previous issue of K.V.G Ayur News



Guest lecture by Dr. Askok K. on Clinical Assessment & Ayurvedic Management of common Gynecological problems.



Guest lecture by Dr. Rohini D. Bharadwaj, On Preventive Curative & Promotive health care in general practice.



Guest lecture by Dr. Harshavardhan on Kshara sutra in clinical practices.



Guest lecture by Dr. Shashidhara Hasanadka on Yoga & Naturopathy for stress management.



Valedictory function of Taluk level CME & Workshop for Ayush Doctors

QUIZ

- 1) Murvadi churna is told by Astanga hridaya, in the context of
a) Mushika visha b) Lutha visha
c) Dushi visha d) Gara visha
- 2) Shunthi with harithaki is indicated in rithu acc to Bhavaprakasa
a) Hemantha b) Shisira
c) Vasantha d) Sharat
- 3) Acc.to Charaka, first treatment done in rakthapitta Chikitsa
a) Sthambhana b) Vamana
c) Langhana d) Virechana
- 4) Rogadhikara of Amrutha prasha ghrutha
a) Kasa b) Rajayakshma
c) Kshataksheena d) Rakthapitta
- 5) The most common type of kidney stone
a) Phosphate b) Oxalate
c) Urate d) Cystine
- 6) Action of tila with madhu in vrana ac to Susrutha
a) Ropana b) Sandhana
c) Shodhana d) All
- 7) Carpel tunnel syndrome is related with nerve
a) Ulnar b) Median
c) Radial d) Brachial
- 8) Panchakarma is indicated in..... rithu by Charaka
a) Vasantha b) Hemantha
c) Sharat d) Varsha
- 9) Vardhamana prayoga of mandukaparni is indicated in.....chikitsa acc to Astanga Hridaya
a) kasa b) Rakthapitta
c) Swasa d) Urakshata
- 10) Breakbone fever is the feature of.....
a) Dengue b) H1N1
c) Yellow fever d) Kala azar

Quiz key last edition :
1-d, 2-c, 3-c, 4-b, 5-d, 6-c, 7-b, 8-a, 9-d

Quiz Winner :
Dr. Sreejith, PG Scholar (Dept. of RS & BK)

HOME REMEDIES

1. Migraine pain
Grind together 50gm Ardraka, 50gm Lashuna, 1gm Hingu & 5 drops of mustard oil squeeze through a cloth and instill 5 drops in each nostril before sunrise once daily for 3 days.
 2. The milky latex of the jackfruit can be applied on Ulcer , Wounds, insect bite, Glandular swelling.
 3. Juice of ripened watermelon helps in dissolving kidney and bladder stones
 4. Fenugreek (methi) seed decoction is recommended as gargle for throat inflammation and mouth ulcer.
- Dr. Aleena Joseph**

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3. Treatments mentioned here are not to be instituted without proper advice by the registered Ayurvedic practitioners.

BOOK POST

To,

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