



Late Dr. Kurunji Venkatramana Gowda
Founder President



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

प्रज्वलितो ज्ञानमयो प्रदीपः ।

Editorial



यथा हि एकेन न रथस्य गतिर्भवेत् ।
एवं पुरुषकारेण विना दैवं न सिध्यति ॥

As a chariot can't move with one wheel, similarly without hard work destiny doesn't bring fruit.

In the same way the hard work done in the successful completion of Sandhana-2015, National Seminar on skeletal injuries had a greater impact over our achievement in imparting both known as well as unknown management skills in skeletal injuries.

Similarly the inauguration of new state of the art, GMP certified KVG Ayurveda Pharma was another milestone in the path of progress of our college.

Harshitha

Dr. Harshitha Purushotham

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MBBS, MS, FICS, FAIS, FRSPH (London)
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BOTANICAL GARDENS

Dr. N. Rajashekhara, M.D.(Ayu.), Ph.D.(Ayu.)
Professor & HOD of Dravyaguna Vijanana

Since the olden days, references about gardens at different parts of the world are found like in India, Europe, China, Egypt, Persia etc. In India, the 'Chaithra Ratha Vana' of Indra has been mentioned in literatures and in the scriptures related to 'Vrikshayurveda', 'Upavana's and 'Vriksha Vatika's are described. Theophrastus, disciple of Aristotle was believed to have constructed a medicinal and botanical garden.

Basically the gardens are meant for the systematically grown medicinal and ornamental plants in a specified place for the purpose of identification, exhibitions, commercial sales, preservation of endangered species, research etc. The gardens are also involved in making and supplying samples for propagation. Botanical gardens may be owned by individuals, government institutions and private institutions with or without government aid.

In Europe, many botanical gardens were constructed around 16th century and were called as 'physic gardens'. They were well developed for the purpose of botanical identification and classifications from 18th century.

Presently, about 150 countries are maintaining the gardens. There are about 400 gardens in Europe, 200 in North America, 150 in Russia and about 122 in India. There is an association in America named as American association of botanical gardens and arborate.

Royal botanical garden /Kew garden: This garden was constructed in 1760 in London. It has the world's largest collection of living plants including more than 30,000 different kinds of plants, while the herbarium, which is also one of the largest in the world, has over seven million preserved plant specimens. The library contains more than 750,000 volumes, and the illustrations collection contains more than 175,000 prints and drawings of plants. It is one of London's top tourist attractions. In 2003, the gardens were put on the UNESCO list of World Heritage sites.

Botanical gardens in Modern India:

Presently, there are about 122 botanical gardens are maintained at different parts of the country like in Kolkata, Dehradun, Kashmir, Jhansi, Saharanpur, Chandigarh, Pune, Thiruvananthapuram, Udakamandalam, Coimbatore etc. Approximate number of living plant accessions recorded in these botanic gardens are 2,00,000 and approximate number of species in these collections are about 10,000. They are involved in activities like, identification of new botanical species, evaluation, preservations of herbariums, DNA fingerprinting of medicinal plants, biodiversity research and information, tissue culture, farming, phytochemical research, collaboration with International Institutions etc.

Indian Botanical Garden: It was previously known as Royal Botanical Gardens and was founded in 1786 by the British East India Company and it became famous by William Roxburgh. It is situated in Shibpur, Howrah near Kolkata and is the largest botanical garden in India, maintained by the Botanical Survey of India. The garden exhibit a wide variety of rare plants and have a collection of over 12,000 specimens spread over 109 hectares. The garden is renowned for The Great Banyan an enormous banyan tree (*Ficus bengalensis*) that is considered to be the largest tree in the world. It has circumference of more than 330 meters. The gardens are also famous for their rich collection of orchids, bamboos, palms, and plants of the screw pine genus.

Valley of Flowers: Situated at Uttarakhand and spreading to about 85 sq. kms. Mentioned in Mahabharata and re discovered and named as 'Valley of Flowers' by Frank Smith at 1931. The valley will be full of flowers of different colors for about eight months of the year.

Full-fledged activities of the botanical and medicinal garden is the need of future for the development of medical science as well as the botany because many of the species are already extinct before their identification and most of them are at the edge of endangered category. As the source of large biodiversity, Indian subcontinent has responsibility to preserve them for the future generations of Earth to remain 'Green'.

A CASE STUDY ON UNMADA



Dr. Soumya S. V., MD (Ayu)
Treating Physician, Dept.of.Panchakarma

Attending interneer: **Dr. Ansy Sreenivas**
Dr. Aysha Shabnam

INTRODUCTION

Unmada is an illness of the mind that has been recognized throughout history within every known society. Ayurvedic approach to Unmada that, "All mental disease originates in a lack of clarity (Sattva) within the mind." Thus, Ayurveda's primary goal of treatment is the cultivation of Sattva, a state of mind that can be attained through proper diet and lifestyle.

CASE DESCRIPTION

A 21 year old female patient visited our hospital on 7/10/2014

PRESENTING COMPLAINTS

- Reduced memory
- Laughing, smiling, speaking herself since 2 years

HISTORY

Patient was normal before 2 years, suddenly developed reduced memory & behavioral changes like laughing, smiling, speaking herself and intolerance since 2years and also yellow complexion. Patient had taken Allopathic treatments for same complaints, but didn't get better relief. So she came to our hospital for better management.

FAMILY HISTORY

Grandmother was having the same complaint.

EXAMINATION

General examination

- Orientation

| Time | Day | Date | Month | Year | Place | City | State | Country |
|------|-----|------|-------|------|-------|------|-------|---------|
| ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | - | - | - |

- Darshana - Ushna asahishnutha (+++)
- Sparshana - Ushnatva (+++)
- Prashna - Desire for shady place, cold food and water (+++)
- Difficulty in recollecting (+++)

MEDICATION

Internal medication

- Indukantham kashaya (15ml-0-15ml) with 45ml lukewarm water 1 hr B/F.
- Saraswatharishta+Ashwagandharishta (15 ml-0-15 ml) A/F.
- Brhami vati (1-1-1) A/F.
- Tab.Intellect (1-1-1) A/F.
- Kalyanaka ghrtha (1 tsp with hot water B/F, morning).

PANCHAKARMA TREATMENT

- Sadyo virechana with Nimbaamruthathi eranda taila.(20ml at empty stomach)
 - Shiropichu with Himasagara taila
 - Sarvangabhyanga with Ksheerabala taila
 - Nadi Sweda
 - Ksheera Dhara for next 7 days.
- } First 7 days

Ksheera Dhara Ksheera (4L), Water (32L), Choornas of Yashtimadhu, Shatavari Bala, Guduchi (each 25 gm), reduced to Ksheeravashsha.

OBSERVATION AFTER TREATMENT

| | Before treatment | After treatment |
|---|------------------|-----------------|
| Ushna asahishnutha | +++ | Reduced (+) |
| Ushnatva | +++ | Reduced (+) |
| Desire for shady place, cold food and water | +++ | Reduced |
| Difficulty in recollecting | +++ | Reduced |

CONCLUSION

After finishing the treatments patient got systematic relief and reduces the symptoms.

In Unmada the quality of Sattva becomes diminished within the mind, it is only a matter of time before imbalances appear within the three biological humors: Vata, Pitta and Kapha.

Ksheeradhara generally used in case of Unmada, Anidra, Apasmara and Shiro daha. It produces Snigdghata, Vishyandana, Mardavata and kledana in the body. The continuous pouring of Ksheeradhara in relaxed and comfortable position has sedative and soothing effect for the brain and produces sleep. Madhura, Sheetha, Snigdgha gunas of Ksheera will helps the Tarpaka Kapha in proper facilitation and sound connection of Indriyas and their Vishayas. Also this will alleviate the derangement of the three Dosha and improves the power of all sensory organs.



“A CLINICAL STUDY ON EFFICACY OF NASYA WITH SHATAPUSHPA TAILA IN THE MANAGEMENT OF APABAHUKA”

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 Co-Guide

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 Guide

Apabahuka is a disease which affects the daily routine of an individual and if ignored, it can become a disability. In such diseases the most sought after medical modality is Ayurveda. For this disease, Nasya is the most effective line of treatment. A Clinical study on Nasya with Shatapushpa Taila in the management of Apabahuka was undertaken to assess the effect of Nasya Karma and its mode of action in curing Apabahuka

OBJECTIVES OF THE STUDY:

1. To evaluate the efficacy of Shatapushpa Taila Nasya in Apabahuka
2. To know the specific condition (chronicity and severity) of the disease on which Brimhana Nasya is effective.

METHOD

The study design selected was a single group clinical study with a sample size of 30 patients. The patients were selected as per the pretest selection criteria. The patients were given Nasya with Shatapushpa Taila in Avara Matra of 6 Bindu in each nostril. Assessment and follow up was done on 1st, 7th, 14th and 21st day.

OBSERVATIONS OF THE STUDY:

Among 30 patients of this clinical study, majority were between the age group of 48-57 years (40%), females (66.67%), uneducated (46.67%), poor socio-economic status (40%), housewives (30%), consuming Sheeta Ruksha Ahara (66.67%), Vikrutha cheshta and Dukha shayya (73.33%), Vatapitta prakruthi (36.7%), chronicity below 6 months (76.67%), Madhyama Vyadhibala (66.67%) and right hand more affected (56.67%).

DISCUSSION:

The drugs in Shoolahara Dasemani are Ushna Virya. Shatapushpa Taila is Ushna. Shoola is one of the main feature of the disease caused due Ruksha and Sheeta Guna. Shoola and Sheeta are interrelated. All Vata Vyadhis

aggravate by Shaityata. Hot fomentation reduces Shoola. Hence it can be deducted that Ushna Guna of Shatapushpa Taila reduces the Shoola in Apabahuka.

Stabdhatta is produced due to Sheeta as well as Ruksha. Shatapushpa Taila has Ushna Snigdha Guna which reduces the Stabdhatta.

The Madhura Rasa and Snigdha Guna of Shatapushpa imparts Brimhana property to the Yoga. By the Brimhana action, the degenerated tissues in the affected joint get replenished. In the present context, the aggravated Vata due to its Ruksha Guna reduces the Snigdhatta of Ama Pradesha (constriction and progressive degeneration of Sira and Snayu). In order to reduce the Rukshata and to strengthen the structures in Amsa Sandhi, Nasya with Shatapushpa Taila is ideal.

CONCLUSION:

- In Overall effect of treatment in Apabahuka, out of 30 patients in this study 10 patient (33%) were getting Moderate improvement, 16 patients (54%) were getting Marked improvement, and 4 patients (13%) were getting Complete relief. Shatapushpa Taila was found to be a good drug of choice for Stabdhatta and Shoola of Apabahuka.
- However this treatment modality is found effective in Apabahuka of recent origin (H/O less than 6 months).
- In the group of patients with a chronicity of above one year, the results were very poor. Whereas in the group of 12 patients with a history of Apabahuka of less than 6 months, 4 patients got complete relief and the rest of them with considerable relief.
- Apabahuka is completely curable if the patient approaches the physician at the onset of symptoms but as the disease becomes chronic and severe, the prognosis also deteriorates.

Key words: Nasya, Apabahuka, Shatapushpa Taila



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PG Scholar

A COMPARATIVE PHARMACEUTICO-ANALYTICAL AND CLINICAL STUDY OF TALISADI CHURNA AND ITS MODIFICATION TALISADI LEHYA W.S.R TO KASA

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Co-Guide

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Guide

BACKGROUND & OBJECTIVES:

Talisadi churna is one of the most common formulation in Ayurvedic practice for the disease of pranavaha and annavaha srotas. In this era many number of patients are suffering from Kasa due to varied etiology. Talisadi churna is proved to be effective on majority of respiratory disorders. Its administration along with madhu and gritha has become an inconvenient process in this fast moving modern world. Different references of Talisadi churna have been available in classics first of them being in Charaka Samhitha Chikitsa sthana 8th chapter. The main differences between them are the presence of Vamshalochana as an ingredient. Availability of Vamshalochana in its pure form is very difficult. It is a huge hurdle task for the researchers to identify and authenticate the Vamshalochana. So here for the preparation of Talisadi churna, the reference was taken from the text Charaka Samhitha which does not mention Vamshalochana as one of the ingredient. Considering these factors the present study is taken up to prepare Talisadi churna without having Vamshalochana and also to modify the churna into Lehya form by adding honey and Ghrita which are the anupanas. Prepared samples of Talisadi churna and Talisadi Lehya were analysed and clinically tested in diagnosed cases of Kasa.

Method:

The study was designed pharmaceutically, analytically and clinically to prepare Talisadi churna and Talisadi Lehya. Both prepared samples were analytically tested. The comparative clinical efficacy of both samples were

assessed in 30 patients with Kasa. Group A consisting of 15 patients was given Talisadi Churna and group B consisting of 15 patients was given Talisadi Lehya for a period of 7 days. Assessment and follow up was done on 7th and 14th day.

Result:

The pharmaceutical study revealed, both the samples were easy to prepare and cost effective. The analytical study carried out for both samples, revealed no much variation. Both samples were stable even after one year. The clinical results for both the samples were quite encouraging for both the groups. In Group A overall improvement is found to be 90% and Group B improvement was 91% using Mann Whitney - U test, the result was found to be not statistically significant ($P > 0.05$).

Discussion & Conclusion:

Various dosage forms of a drug or medicine were in practice in all systems of medicine. In the present study the modification of Talisadi churna into Talisadi Lehya proved to be beneficial to the public, as it shows no significant difference in the analytical and clinical studies.

Key words : Talisadi Churna, Talisadi Lehya, Kasa, Vamshalochana.



'A PHARMACO-CLINICAL EVALUATION OF KOKILAKSHA (Hygrophila spinosa T. Anders) W.S.R. TO PANDU ROGA'

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Guide

Concept of total health comprising of physical, mental and spiritual well being is the goal of Ayurveda . In the present time we see the imbalance of health of all these three levels due to the complex factors in all walks of life.

So the research work entitled 'A PHARMACO-CLINICAL EVALUATION OF KOKILAKSHA (Hygrophila spinosa T.Anders) W.S.R. TO PANDU ROGA' is significant in the present era.

The review of literature was done from Vedic period to Modern period; the references regarding the study is available in Modern Books. Pharmacognostic study was done to know the Macroscopic and Microscopic character of the drug. Analytical study was carried out to know the Physico-chemical components of the drug. Clinical study was carried out to evaluate the efficacy of the drug in pandu roga.

Materials and Methods

Pharmacognostical and Analytical study was done, clinical study was done on 30 Patients. Patients suffering from Pandu roga Lakshanas were selected, and were randomly divided into 2 Groups A&B. Group A was treated with Kokkilaksha Patra Choorna and Group B was treated with Kokilaksha Samoola Choorna. For both Groups the medicine was given for 30 days. The dose also was same ie 3grams twice daily after food. Necessary Lab investigations were done before and after treatment. Conclusion

Group A showed Statistically highly significant results on Shrama and Bhrama, significant results on Pindikodveshtana, Aruchi, Agnimandhya, Vaivarnya and Hb% and no significant results on Rookshata.

Group B showed Statistically moderate significance on Shrama, Bhrama , Pindikodveshtana and Agnimandhya ;Significant results on Rookshata and Hb% and no significant results on Vaivarnya and Aruchi.

Clinically the Drug has shown significant improvement in Hb % of almost all patients in Group A and Group B .Hence the drug is efficient in Pandu Roga.

Key words : "Kokilaksha (Hygrophila spinosa T. Anders)" "Panduroga"

ROLE OF SHODHANA ON DHATTURA BEEJA (Daturametel Linn.) A COMPARATIVE ANALYTICAL, PHARMACOLOGICAL STUDY W.S.R TO ITS ANTI-PYRETIC ACTION



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Guide and H.O.D
Dept. of Agada Tantra

INTRODUCTION: Traditional systems of medicines are being used since centuries for healthcare by people. Ayurveda also considered various poisonous substances (VishaDravyas). All these VishaDravyas are subjected to be processed (Shodhana) properly before their application in therapeutics. Concerns are being raised by western scientific community on safety aspects of such drugs and their formulations. Dhattura has been classified under one among the Upavisha. All parts of the plants are poisonous but seeds and leaves are mostly used. The active alkaloids are Hyoscine, Hyosamine and traces of Atropine. It has been planned to develop physicochemical, pharmacological profile of Ashuddha and Shuddha Dhattura Beeja through suitable models. This current attempt is expected to generate certain leads on significance and necessity of Ayurvedic treatment procedures (Shodhana) in cases of VishaDravyas. Although few works were attempted; actual impact of Shodhana on the seeds of Dhattura (Daturametel Linn.) and their comparative toxicity effect and anti-pyretic activities are not yet explored.

OBJECTIVE OF THE STUDY:

1. Shodana of Dhatturabeeja (Daturametel Linn.) as per the classics.
2. To develop preliminary physicochemical profiles of both Ashuddha and Shuddha samples.
3. To evaluate acute toxicity effect and anti-pyretic activities of the samples with standard drug.

MATERIALS AND METHODS:

Study Design: Analytical study: Relevant Physicochemical parameters including Loss on drying, Acid insoluble ash, Alcohol soluble extractive, Presence or absence of different functional groups, Thin layer chromatography.

Pharmacological study: The experimental animals will be fixed based on body surface area ratio by referring tables of Paget and Barnes (1964). Acute toxicity with gross behaviour of both samples Anti-pyretic through yeast induced pyrexia.

STUDY UNDER PROGRESS.

BRAHMI

(2nd year : 2013-14)

| | |
|------------------------------|--|
| Botanical name | - Bacopa monnieri |
| Family | - Scrophularaceae |
| Vernacular names | - Hindi: Jananima, English: Indian Pennywort. Synonyms- Kapotavega, Matsyakshi, Somavalli, Aindri. |
| Botanical description | - A Glabrous, punctate, succulent herb, leaves are sessile, obovate, and entire. Flowers are solitary, axillary and white. Fruits are ovoid and acute. Flowers and fruits almost throughout the year. |
| Chemical composition | - Ascorbic Acid, Nicotinic Acid, Brahmine, Herpestine, Alanine, Monnierin |
| Properties | - Rasa: Tikta, Kashaya; Virya: Sheeta; Guna: Laghu; Vipaka: Madhura. |
| Indications | - Apasmara, Prameha, Kushta, Pandu, Jwara, Kasa. |
| Karma | - Kaphapittahara, Medhya, Rasayana. |
| Parts used | - Whole plant. |
| Important preparation | - Brahmi Rasayana, Brahmi Ghrutha. |



SARASWATHAARISHTA
(REF. BHAISHAJYA RATNAVALI)
 Final year BAMS (2011 -2012 Batch)

समूलपत्रशाखाया ब्रह्मायाः ब्राह्ममुहूर्तके ।
 गृहीत्वा विंशतिपलं पुष्पयोगे शतावरी ॥ १७८ ॥
 विदारिकाभयोशीराश्यार्द्रकञ्च तथा मिशिः ।
 पञ्च पञ्च पलान्येषां जलद्रोणे पचेद्भिषक् ॥ १७९ ॥
 पादावशेषे विस्त्राव्य रसं वस्त्रेणगालयोत् ।
 माक्षिकस्य दशपलं सितायाः पञ्चविंशतिः ॥ १८० ॥
 धातकी पञ्चपलिका रेणुकात्रिवृताकणा ।
 देवपुष्पं वचा कुष्ठं वाजिगन्धाविभीतकी ॥ १८१ ॥
 अमृतैलाविडङ्गत्वक् प्रत्येकं कर्षसम्मितम् ।
 क्वाथेतस्मिन् समस्तानि समाक्षिप्य प्रयत्नतः ॥ १८२ ॥
 स्वर्णकुम्भेनिदध्याद्धानवे मृदुभाजनेऽपि वा ।
 स्वर्णस्य तनु पत्रञ्च क्षिप्वाऽस्मिन् कर्षसम्मितम् ॥ १८३ ॥
 मासाज्जातरसं दृष्ट्वा स्थापयेद्दधृतभाजने ॥ १८४ ॥

Ingredients: Brahmi panchanga, Shatavari, Vidarikanda, Haritaki, Ushira, Ardraka, Mishi, Water, Honey, Jaggery, Dhatakipushpa, Renuka, Trivrit, Pippali, Lavanga, Vacha, Kushta, Ashwagandha, Vibhitaka, Guduchi, Sukshma Ela, Vidanga, Twak and Swarnapatra.

Method of preparation: In Brahma muhurta, the drugs like Brahmi, shatavari, vidhari, abhaya, usheera, ardraka, mishi, (240gm each) are added to 12litre of water and decoction is prepared. Filtered decoction is taken in a new earthen pot and added with honey (480g), sharkara (1.2kg) and powders of dhatakipushpa (240g), renuka, trivrut, pippali, lavanga, vacha, kushta, ashwagandha, vibhitaki, ela, vidanga, and twak (12g each) is added. Finally 12g of Swarnapatra is added and mouth of the pot is sealed and kept for fermentation up to one month.

Dose: 1 Shana

Anupana : Cold water

Benefits : Shukradosha, Apasmara, Manasadosh, Ojakshaya, Swarakshaya, Rajadosha, Smritiksheena etc.

BHAISHAJYA RATHNAVALI

[3rd year BAMS : 2012-13]

AUTHOR : BHISHAGVARA SHREE GOVINDA DASJI

PERIOD : 19th A.D.

NUMBER OF ADHYAYAS : 106

Bhaishajya Rathnavali is a unique compiled classical textbook of Ayurveda emphasizing the bsheshajas which are mentioned under other samhitas and also some other new formulations .Some of the chapters are given below:

1. Ayurveda avatara prakaranam: Explains about birth of Ayurveda
2. Shodhana marana prakaranam : Includes methods of purification and incineration
3. Mishravarga prakaranam : Includes miscellaneous topics
4. Paribhasha prakaranam: Definition of terminologies

And later chapters deal with vividha vyadhis and their bsheshajas.

During the last 20 years there has been a tremendous upsurge in the demand of Ayurvedic formulations at national as well as international levels. Bhaishajya Rathnavali is such a text which fulfills these needs along with quality as well as safe medication.

KSHEERAVARGA (MILK)

[1st year BAMS : 2014-15]

Milk in general is madhura rasa and vipaka, snigdha, guru & sheeta guna, increases oja & dhathus, vrishya. Pacifies vata and pitta, increases kapha .

COW'S MILK :

It is jeevaniya and rasayana .It is suitable for those affected with kshatha ksheena (weekness after injury).It promotes intelligent, improves strength, is laxative. It relives shrama, bhrama, mada, alakshmi, shwasa, kasa, thrishna, raktapitta.

BUFFALO'S MILK:

It is suitable for those affected with athyagni and anidra .It is extremely guru and sheetha .

GOAT'S MILK:

It is laghu as it drinks less water &,is always on the move and consumes plant and leaves having katu and tikta taste. Cures shosha, jwara shwasa, raktapitta and atisara.

CAMEL MILK:

It is slightly rooksha (less fat content),ushnaand lavana,is deepana,and laghu .It is suitable in disease due to vitiation of vata ana kapha, aanaha, krimiroga's, shopha, udara and arsha .

BREAST MILK:

It cures nethra roga of vathika, paittika, raktaja and abhigathaja (traumatic) varieties when used for tarpana ashotana and nasya .

THE MILK OF AVIKA (SHEEP):

It is ahridya, ushna. Controls vatika diseases but causes hidma , shawsa and vitiates pitta and kapha.

ELEPHANT MILK:

It provides strength to the body .Milk of single hoofed (ungulate) animals is extremely usna and laghu. It pacifies vata which is vitiates in shakhas. It is slightly amla and lavana in rasa and causes inertia.

UNBOILD MILK:

It is anabhishyandi and is guru ,but when properly boiled has opposite properties. Condensed milk is much more guru . Milk that is freshly drawn resembles divine elixir in properties.

Achievements

STAFF ACHIEVEMENT



Dr. Leeladhar D.V. MD (Ayu)
Reader, Dept. of Dravyaguna

Selected as Member for
Board of Studies (PG)
R.G.U.H.S, Karnataka, Bengaluru



Dr. Lakshmeesha K. S. MD (Ayu)
Lecturer, Dept. of Panchakarma

Nominated as Joint Secretary
for 2015-16 by
Lions Club, Sullia.



Dr. Purushotham K. G. BSc, MD(Ayu)
Reader, Dept of RS & BK

Nominated as Chairman for
New Generation programme
2015-16 by Rotary International
Sullia- 3180



Dr. Harshitha M. MD (Ayu)
Reader, Dept of R S & B K

Chaired a session on National
Seminar "PRATISHTHAPANA-15"
organized by KLE'S Shri B.M.K
Ayurveda Mahavidyalaya, Belgavi.



Dr. Rohini D. Bharadwaj Prof. & HOD Dept of RS & BK, gave a talk on "Ecofriendly Traditional Dietic Practices and Social Health" conducted by Environmental Education and Development Trust(R) Peraje, Kodagu Dist.



Dr. Udayashankar. N Prof. Dept. of Shalakyta Tantra, gave keynote address and conducted workshop in 37th International Joint Congress 2015 Kobe and Osaka , Japan.

PG ACHIEVEMENT

PG scholars presented paper in National Seminar "SANDHANA-2015" held at K.V.G. Ayurveda Medical College Sullia.



Dr. Anup P. Won first price in paper presentation in "Sandhana 2015"

Topic :

Common sports injuries & death of Australian cricketer Phillip Hughes by "Vertebral Artery Dissection" or "Sira matruka Marmaaghattha" A clinical correlation

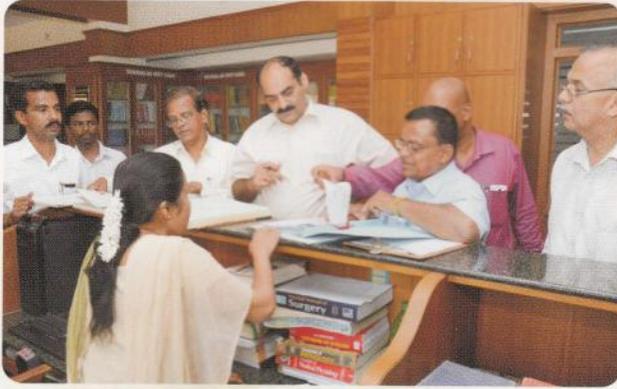
- | | |
|-----------------------|---|
| Dr .Nitika Ganjoo | - Fractures &its Radiological Mimics. |
| Dr. Swetha K.S | - Bhagna chikitsa as per Acharya Sushruta & its relevance in the present scenario. |
| Dr. Aiyanna P.P | - Fractures in Ayurveda. |
| Dr. Deepthi S | - Fracture of Clavicle. |
| Dr. Supriya Y Bhosale | - A Conceptual approach on the role of Panchakarma's in the management of Bhagna. |
| Dr. Praseethamol K | - Role of Asthisamharaka (Cissusquadrangularis Linn.) in the management of bone fracture. |
| Dr. Nitin Sharma | - Role of parisheka in the management of Bhagna A conceptual study. |
| Dr. Chitra Chandran | - Complications of Fracture. |
| Dr. Anju Philip | - Sport specific safety information. |
| Dr. Vijula K | - Management of principles of sport injuries in Ayurveda. |
| Dr. Hari Krishnan | - Role of Ayurveda in sport injuries. |
| Dr. Anusreee B. | - Traumatic loe back pain &its Ayurvedic management. |

Poster Presentation

Dr. Gowrishankara C.K. Rib cartilage injuries, signs & symptoms.

College Activities

LIC members inspecting different departments of the college



Library



Dept. of Agada Tantra

Ganapathi Pooja and Vaastu Pooja at new K.V.G Ayurveda Pharma



Glimpse of "Sandhana 2015". National Seminar on Skeletal Injuries.



Inauguration of "Sandhana 2015"



Release of K.V.G Ayur News by Our President



College Activities

Glimpse of "Sandhana 2015". National Seminar on Skeletal Injuries.



Key note address by Dr. Deenaprakash Bbharadwaj
HOD, Dept. of Shalya Tantra



Delegates



Guest speak by Dr. Aishwarya K. C. on "Radiological
Imaging Techniques In Skeletal Injuries"



Exhibition of Stalls



Poster Presentations



Dr. Sahir Ali - "Ayurvedic Fracture with
Demo" Shafi Dawa khana, Kozhikode



Dr. Ranganath, Associate Professor Dept. of
Orthopaedics - "Modern Fracture Management"



Dr. Seetharam Sargur, SVHSP -
"Common Injuries Day Today Practice"

College Activities

Glimpse of "Sandhana 2015". National Seminar on Skeletal Injuries.



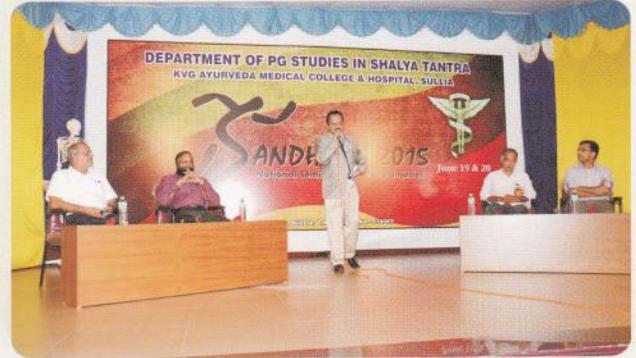
Dr. Suresh Kumar, Chief Physician, Triveni Hospital Thiruvananthapuram "Ayurvedic Fracture Management"



Dr. Muralidhara Sharma, Medical Superintendent of S.D.M.A.H Udupi - "Spine Injuries"



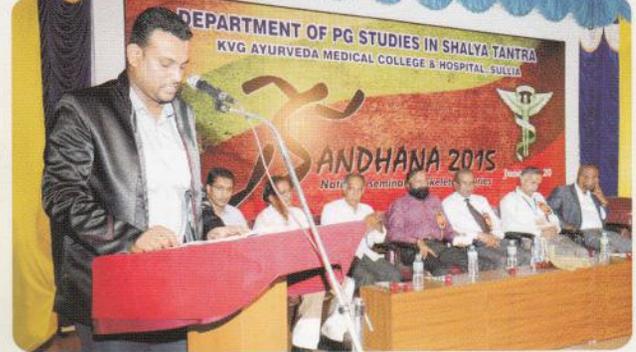
Best Paper Presentation Awards



Panel Discussion at Sandhana-2015 Seminar



Parallel Scientific Session of National Seminar in A/C Auditorium



Vote of Thanks by Organizing Secretary Dr. Harshavardhana. K



Staffs and P.G Scholars of Dept. of ShalyaTantra With Chief Guests



Dr. C.K. Hiranya Gowda & Dr. Doddabhadre Gowda along with President, RS & BK Staff & P.G Scholars at K.V.G Ayurveda Pharma

College Activities

International Yoga day celebration



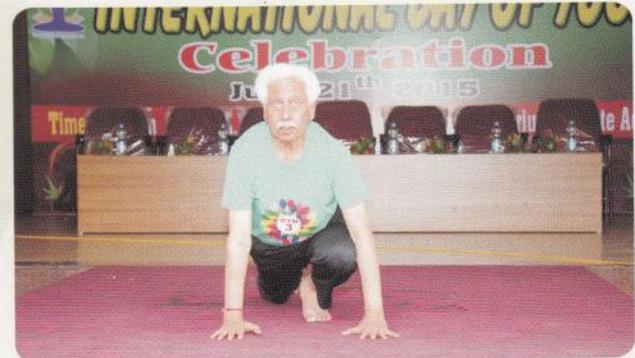
Inauguration of International Yoga Day



Speech by Chief Guest Dr. Sheela G. Nayak, Principal K.V.G.M.C.H on Yoga Day Celebration



Felicitation to Guest Speaker Dr. Vinod Kumar M.V, VPSV Ayurveda College Kotakkal on Yoga Day Celebration



Yoga Demo by Dr. C. K. Hiranya Gowda, MD, FACS, USA



Felicitation to Dr. C. K. Hiranya Gowda



Congratulating our President by Principal And Staff of K.V.G.E.C for NAAC Accreditation



Felicitation to Principal, Dr. N.A. Jnanesh, K.V.G.E.C,



Felicitation to Dr. Udaya Shankar on the occasion of his Book Release "Hasi Maddu, Khushi Maddu"

QUIZ

- 1) Balabhaishajya is the synonym of
a) Haridra b) Daruharidra
c) Aravinda d) Lodhra
- 2) Best drug for gandamala is
a) Guggulu b) Kanchanara
c) Madana phala d) Gandhaprasrini
- 3) Duration of pippali vardhamana rasayana
a) 5 days b) 10 days
c) 20 days d) 40 days
- 4) Para methoxy salicylic acid is present in
a) Sariba b) Manjishta
c) Methika d) Prisiniparni
- 5) Family of sida cordifolia is
a) Rubiaceae b) Moraceae
c) Malvaceae d) Apocynaceae
- 6) Antitote of vatsanabha
a) Jadhar b) Tankana
c) Kupilu d) Kirata tikta
- 7) The dose of bhallathaka
a) 1-3 ratti b) 1-3 masha
c) 2-5 masha d) 2 karsha
- 8) Rasa srik mamsa medo dosan hanti is due to
a) Haritaki b) Vibhitaki
c) Amlaki d) Pippali
- 9) The anupana of haritaki in sisira ritu is
a) Pippali b) Madhu
c) Guda d) Lavana
- 10) Kirata tikta is
a) Cirayata b) Katuki
c) Haritaki d) None

Answer key last edition:

1-c; 2- c; 3-d; 4- b; 5- d; 6-c; 7- b; 8-d; 9- c; 10-c

Quiz Winner :

Dr. Pavana (P.G Scholar Dept. of RS & BK)

HOME REMEDIES

1. Juice of Shigru leaves with sugar or honey is given early in the morning to cure abdominal pain.
2. Juice of Shigru leaves used for nasya to cure cold and headache.
3. Juice of Shigru leaves with honey applied over eyes to cure all types of eye diseases.
4. Kashaya prepared out of Shigru root given internally with saindhava lavana and hingu to cure inflammation and abscess.

Dr. Akshatha T. S, P.G Scholar, Dept.of Dravyaguna

DISCLAIMER :

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

To,

BOOK POST

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