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DR. KURUNJI VENKATRAMANA GOWDA
Founder President



CURRENT ISSUES, CASE STUDY, RE-SEARCH ACTIVITIES,
STUDENTS ARTICLES, COLLEGE ACTIVITIES, QUIZ, HOME REMEDIES.

प्रज्वलितो ज्ञानमयो प्रदीपः ।



EDITORIAL

एकं शास्त्रमधीयानो न विद्याच्छास्त्रनिश्चयम् ।
तस्माद्बहुश्रुतः शास्त्रं विजानीयाच्चिकित्सकः ॥ (सु.सु ४/७)

"IT IS NECESSARY TO HAVE THE PRIMARY KNOWLEDGE OF ALL SCIENCES TO UNDERSTAND A BRANCH OF SCIENCE PROPERLY IN ALL IT'S ENTIRETY"

Above statement of Acharya Sushruta , guides us to learn about all branches of medical science,so that Ayurveda may be understood in proper light But,whether to use drugs of other medical systems specially those belonging to Allopathy, has ben a matter of hot debate since long.The opinions have been pulling the pendulum either way with equal force.The opinion of an eminent practising Ayurvedic surgeon is featuring in the main article this time.

We become insensitive to the uses of commonly available herbs. But familiarity should not breed contempt.One of our young colleague has added colours to the common ginger by using it to cure a chronic and seemingly difficult condition.

The new building of our college encompassing all departments with all their necessary infrastructures in a different and artistic manner, was inaugurated and appreciated by Rajarshi poojya Veerendra Hegde .We happily celebrated our college day and graduates day in the new auditorium. we are sharing these events through the photo gallery.

Other usual features follow their track, hoping to keep you interested.

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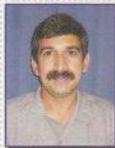
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ROLE OF AYURVEDA DOCTORS IN THE NATIONAL HEALTH SCHEME

Dr. Ravishankar Pervaje, MD(Ayu)

Consultant Surgeon,
Sushruta Ayurveda Hospital, Puttur

What should be done?

There is a misconception among people that Ayurveda doctors use only herbal and mineral medicines. And allopathic doctors means, one who uses only chemical medicines. The allopathy practice depends mainly on using biochemical drugs. Here, drug action is explained by process of drug acting on target cells to correct the deranged biochemical activity of the cell, in order to get health. This is how modern medicine has developed.

Ayurveda means science of life, or cause and effect analysis, (cause and effect) of life process. Here in Ayurveda, it is explained that patients come with signs and symptoms (Linga). A Vaidya analyses these signs and symptoms to find out the cause, (Hetu). This cause for health and disease is explained on the basis of Tridosha Siddhanta. If the Tridoshas are in normal/standard state, the person is healthy. If deranged there is disease. Depending on Hetu or linga treatment (oushadha) is given. To correct the deranged Tridoshas many treatments are explained in Ayurveda like- internal medications, external medications, Panchakarmas, surgical treatments and Yoga etc.

All the Dravyas (substances) in the universe are Panchabhoutic. By seeing their action on the body, one can utilize any medicine to bring Samyata among the deranged Doshas. The concept of normalizing Doshas is primary objective.

In the olden days - Susrutha and Charaka period, the Vaidyas mostly used herbal medicines to normalize the Tridoshas. If it was not possible to cure the disease, they clearly mentioned it as incurable. This was the limitation of the science at that time. By the 10th century AD, Physicians and surgeons improvised their knowledge in utilizing mineral preparations (Rasaoshadhis) along with the herbal medicines. Diagnostic techniques like Nadi examination urine examination, etc were added.

By the 16th century, new diseases like syphilis were also explained in Bhava prakasha as Phiranga. Thus, as continuous scientific development happened, Ayurveda also developed till the 17th century. After the 18th century onwards, the incorporation of advanced scientific knowledge to Ayurveda was stopped, hence its development also declined.

On the basis of the basic concept of Ayurveda, the present day advances in modern diagnostic techniques, surgical techniques and modern medicine should be understood. Then only these advancements should be included in Ayurveda.

Without the modern scientific advancement, many of the existing techniques of Ayurveda cannot be practiced by an Ayurvedic Physician or surgeon in the present era. One cannot think of performing a surgery without using Antibiotics, analgesics, anesthetics, and other life saving medicines.

WHAT SHOULD BE DONE AND HOW TO CORRECT THE SITUATION?

1. From government side- legal binding should be removed for practicing of modern scientific advances in medicine/surgery and diagnostic techniques.
2. From the Ayurvedic community standpoint-
 - a. The modern scientific advances in medicine/surgery and diagnostic techniques should be understood on the basis of basic concept of Ayurveda.
 - b. These advances in modern medicine should be include in Ayurvedic practice

In the ancient era, there were only herbal drugs in use. As time passed on, mineral medicines were included for therapeutic use. In the present era, we have to include the Advances in biochemical drugs, in Ayurveda.

HOW TO INCLUDE the advancements in Ayurveda?

The inclusion of any new drugs/ techniques should be done based on the basic concepts of Ayurveda. All drugs, including biochemical drugs are Panchabhoutika. Hence according to Ayurveda one can utilize any dravya to normalize the deranged Dosha. For eg: - Sushruta explained to use ethyl alcohol (Madya) as an anesthetic dravya. It induces increase of Tamoguna in the manas to cause -Mada, Murcha, Sanyasa. In the stage of sanayasa (3rd stage of anesthesia), Susrutha probably used to do the surgeries. The first anesthetic drug, developed in 1840 was ether (C₂H₅ O C₂H₅) which is nothing but dehydrated ethyl alcohol. By the use of ether also, the person goes into Mada -Murcha-Sanyasa i.e the 3 stages of anesthesia.

All these anaesthetic drugs work by same principle of Tamo Avarana leading to Mada, Murcha & Sanyasa. Here Madya is used by Susrutha as an empirical drug (Prabhavi Dravya. If you can't explain why a drug works, such drugs are called Prabhavi Dravya i.e. they work by Achintya Karma or works empirically. Local anesthetic drugs work on the body in a similar manner. These work on the body by inducing Kapha Avarna to cause Supti (loss of sensation and movement).

According to modern science one can explain why it works. This has to be learnt by Ayurveda doctors and utilized in clinical practice. That is why, Ayurveda doctors should study modern scientific advances in their curriculum and this should be utilized in their clinical practice.

HOW ANTIBIOTICS work :

In the pathogenesis of pidaka & Visarpa (inflammation & cellulites), Ayurveda explains that it is caused by Rakta Dushti duo to derangement of the 3 Doshas by

1. Ahara-Vihara
2. Abhighata
3. Krimi

The dushti due to first two causes can be corrected by oushadha and shastra kriya

1. Apakarshan - means bringing normalization of Doshas by Langhana and Amapachana
2. Nidana Parivarjana- means avoiding the causative factor for infections.
3. Prakriti Vighata-Killing of the krimi

Acharya Susrutha and Charaka very clearly explained the different types of Krimi leading to Rakta Dushti, in turn leading to inflammation and cellulites, causing different diseases like - Fever, encephalitis, peritonitis, endocarditis, abscess etc..

With the invention of the microscope the particular causative Krimi/bacteria could be directly seen. Many antibiotics developed to kill the different Krimis. Here, the principle is KILLING THE KRIMI, which has already been explained by Charaka/ Susrutha by Prakriti Vighata Chikitsa. The question arises why an Ayurvedic doctor should not use these advanced drugs in their clinical practice, if it has already been explained by Acharyas.

Susrutha has explained many herbal drugs, and in later periods Ayurvedic physicians have explained many herbo-mineral preparations to kill the Krimi. These drugs have their limitations because drugs are explained on the basis of Anumana Pramana .

Some of the drugs explained by Susrutha are still being used all over the world today. For eg: the use of Ksharodaka (alkaline solutions) as Prakriti Vighata Dravya (material). Hence the principle of Ksharodaka is reflected in the use of soap in modern science, which is used to kill infection while having a bath.

If an Ayurveda doctor adopts these advancements in the understanding of the pathogenesis of the disease and its application in therapeutic use, Ayurveda will be advanced by itself to the 21st century. For this purpose, Ayurveda doctors should be taught about the advancements in science, in their curriculum and it should be legally allowed, to be used in their clinical practice.

Amasthambhana :

We cannot explain how Ayurvedic medicines work according to the principles of drug action explained in Modern Pharmacology Ayurveda medicines acts according to its own principles i.e. through principles of Tridoshas.

E.g. according to modern pharmacology we can explain diclofenac works as analgesic by prostaglandin inhibition. On the basis of the same principle we can't explain how Yogaraj Guggulu works as an analgesic. According to Ayurveda, Yogaraj Guggulu contains Chitrak, Guggulu etc Ushna Virya Dravyas . It works by Kapha Vata Swarupa Aama Paachana. we cannot explain through comparison that diclofenac is also Kapha Vatahara. In the same way, we cannot explain Yogaraj Guggulu works by prostaglandin inhibition, because each science explains working of its own medicines according to its own concepts. We can say that the NSAID drugs become Vedanahara by its Prabhava of Amastambhana. Likewise we can say Yograj Guggulu works as analgesic empirically. These empirically used drugs can be used in clinical practice whenever necessary .Almost all drugs of modern pharmacopoeia, except antibiotics and replacement therapy drugs, work by Prabhava according to Ayurvedic principle by doing Amastambhana.

When these Amastambhana drugs should be used in clinical practice?.

Dimbasto: sthavirostho va vatapittatmakashcha ya : I

Kshin dhatu jvarathascha bahudoshatinisrutah II

Amo api stambhaniyah syat pachanat marana bhayat II
Cha.da.

In Ayurveda most of the medicines are explained for Amapachana, Ama occurs due to Agnimandya and this ama is always Vata, Pitta or Kapha Swarupa.

According to this Swarupa of Vata, Pitta, Kapha doshas, patient will present with different disease, and different symptoms. In such cases particular Amapachaka drugs should be selected to get equilibrium of Tridosha .

Chakradatta has explained some exceptions to this principle, as explained in above Sloka, that pregnant women, old people young children. Amasthambhana should be done in the initial stage, when patient survives you can go for Amapachana, for reversal of pathology in later stage. And if disease occurs due to severely increased Vata-Pitta Doshas, and when patient is suffering from Tivra Jwara (high grade fever) and patients who have Bahudosha and in severe Atisara (diahorrea), in dehydrated condition or in status Asthmaticus or status epilepticus, or in severe pain like post operative stage & such other serious conditions you are advised to do Amasthambhana even though Ama Pachana is the ideal line of treatment.

This exception for the scientific treatment of Ama Pachana is explained only to save life. In present era there are many drugs which can be used as Amasthambhaka to save the patient in emergency conditions.

On this line of thinking Ayurveda doctors can use modern advanced drugs in their clinical practice, just like utilizing all modern gadgets in their day to day life. E.g. using maruti omni as ambulance, instead of a bullock cart, to transport the patient to the hospital. In such situations you must know the mechanism of action of modern technologies and drugs, scientifically. That is why in the BAMS course, we are being taught and examined in modern scientific subjects, along with Ayurveda subjects like.

1. Anatomy
2. Physiology including bio chemistry
3. Modern pathology including micro biology with applied aspects
4. Modern pharmacology with its therapeutic use with WHO essential drug list
5. Toxicology and medical jurisprudence and detail Post Mortem examination
6. Preventive medicine including national immunization schemes
7. Modern emergency medicine with modern hospital duty
8. Modern surgery
9. OBG and Gynecology
10. Ophthalmology and ENT

As BAMS graduates are taught and examined with all these modern subjects they are competent to use modern medicine whenever necessary during their Ayurveda practice.

Concluding, it would be apt to say that a Doctor is a warrior, engaging in war with the disease affecting the patient's. Hence he should be equipped well with different types of ammunition and weapons. At the time of war, depending upon the situation and need the appropriate weapon can be used. But if restrictions are imposed on the warrior to use only one kind of weapon, then he will definitely be at the receiving end at the time of the war! This is what exactly happens with institutionally qualified Ayurveda doctors today.

There is opinion that once Ayush doctors are allowed to practice allopathy along with Ayurveda, these doctors will practice only allopathy and then who will practice and propagate Ayurveda in society. But this fear is unjustified. If these doctors are taught both subject experts, they will understand limitation and possibilities of both sciences in different clinical conditions. and accordingly they will practice medicine as needed.

Here teaching standard should be maintained by C.C.I.M. And allowing to practice Ayurveda along with emergency allopathic medicines should be done by government. But blanket permission to practice allopathy by these doctors is unjustified and uncalled for and also disastrous for development of Ayurveda. Permission to utilize allopathy medicine by postgraduates of clinical subjects like Shalya, Shalakyas & Prasuthi in their specialized practice, and for others in diseases due to infections & during emergency can be granted.

The only thing needed is legal approval by government, so that we can utilize these Ayurveda doctors with their knowledge of both sciences, in the national health programmed for benefit of the society.

** Author has obtained his post graduate degree from BHU Varanasi in Shayla Tantra. He is presently owner, medical director & Consultant Surgeon of Sushruta Ayurveda Hospital at Puttur, Serving the Ayurvedic Fraternity and Public.*

**“A PHARMACOGNOSTICAL, ANALYTICAL AND CLINICAL EVALUATION OF IKSHU
(Saccarum officinarum Linn.) w.s.r. to ITS MOOTRALA (Diuretic) PROPERTY”.**

Dr. Avinash K.V.* Dr. Leeladhara D.V. Dr. Rajashekhar N***.**

INTRODUCTION: As diseases are born with humans there is always a search for safest and curative drugs. Ayurveda is safest curative system. It helps to provide healthy life and to prevent diseases in human beings. Ayurveda mentioned so many drugs having different mode of action useful in different conditions. Among these, diuretics are one class of drugs.

Diuretics are the substances, which enhance the output of urine. These substances increase expulsion of water, sodium (Na+) and chloride (Cl-) through urine. The diuretic agents increase the urine formation by influencing glomerular filtration, tubular reabsorption and active tubular secretion.

Diuretics are generally used for treatment of disorders involving increase in extra cellular fluid volume like hypertension, congestive cardiac failure and edema. Diuretics help to prevent them by increasing urinary output and decreasing the blood volume and interstitial fluids. Thus, they reduce the edema.

However different diuretics have different site and mechanism of action. Ikshu (Saccharum officinarum Linn.) is one of the members of Graminae/poaceae family. Many classical references are found about Ikshu (Saccharum officinarum Linn.) as a mooltrala drug. It is available abundantly and is economically viable drug.

OBJECTIVE OF THE STUDY: 1) Pharmacognostical and Analytical study of Ikshu (Saccharum officinarum Linn.).

2) To evaluate the Mooltrala karma of Ikshu in the form of moola swarasa and kanda swarasa.

3) To determine the most effective form of preparation, between the above two.

3) **CLINICAL ASSESSMENT:** Clinical assessment of mooltrala karma of Ikshu Kanda swarasa and moola swarasa was carried out on healthy volunteers of age group ranging between 16-50 years in comparison with control group.

Subjects suffering from Congestive cardiac failure, Edema, Hypertension, Diabetes Mellitus, Diabetes insipidus, BPH, Chronic Renal failure, Urinary calculi and other Urinary Disorders were excluded from the study.

Quantity of urine output was measured at regular intervals up to 24 hours in Comparison with control group.

DOSAGE : 100ml (single dose).

RESULT AND DISCUSSION: It is proved that trial drug Ikshu (Saccharum officinarum Linn.) is having the significant role in increasing the Mooltrala effect. As the drug, Ikshu is Jala Mahabhuta Pradhana; it may be causing an increase in the Apyamsha of Mooltra thus resulting into Mooltrala Karma.

Since the difference between the action over urine output between Moola swarasa group and Kanda swarasa group statistically non-significant. Hence, kanda swarasa can be used in the place of moola swarasa as Diuretic.

Corresponding author * Co-guide Guide*****

A CASE STUDY ON KAPHAJA SHIRASHOOLA

Treating physicians

Dr. N.S.Shettar MD(Ayu)
MD(Ayu)

Dr. Bhagyesh.K

CASE DESCRIPTION : A patient named Nagaraj, aged about 42yrs, was suffering from headache and heaviness of head since 2months, visited our hospital on 19.07.2012.

Presenting complaints : Headache, heaviness of head and cold since 2 months.

History: Treatment history : The patient had undergone allopathic treatment before 1month, and no much improvement was seen and then he was advised for surgery.

CT scan findings :

- Polypoidal mucosal thickening in bilateral maxillary and ethmoidal sinus with few air cells within-suggestive of secondary infection.
- Sphenoidal and frontal sinusitis.

Previous history : Allergic rhinitis since 2yrs.

Examination : Tenderness +ve over both frontal sinus and maxillary sinus.

- Medication: 1) Tab Lakshmilasa(10) + Yashtimadhu choorna(10gm)
+ Thalisedi choorna(5gm) + Bharangichoorna(5gm)
½- ½ - ½ tsp with honey A/F
2) Nasya with Shadbindu Taila X 3 days
3) Dhumapana with haridra varti
4) Kavala with lavanodaka

Next consultation after 15days

Observation : No much relief from Shadbindu Taila as it is snehana nasya, and he was complaining of headache, heaviness of head, pain in temporal region, fever since 1day.

He was treated with Vatanulomaka, Kaphahara, Amapachaka Dravyas

- 1) Tab Lakshmilasa Rasa(10) + Talisedi Choorna(5gm) + Yashtimadhu Choorna(10gm) + Bharangi Choorna(5gm)

½ - ½ - ½ tsp with honey A/F X 3days

- 2) Cap Nilsin (2-0-2) X 3days
3) Dashamoola Katutraya Kashaya (2-0-2tsp) X 3days
4) Sudarshana Ghana vati (2-0-2) X 3days

Next consultation after 3days:

Observation : He was feeling slightly better.

Medication : Advised to continue same internal medicine with.

- 1) Guda nagara nasya X 7days

Ingredients : Nagara, Ksheera and Guda taken in the ratio of 2:4:1, in the dose of 5 drops in classical nasya method followed with lavana jala kavala and haridra dhoomapana

Hialin capsules for steam inhalation

Next consultation after 7days:

Patient got 80% relief from symptoms ie, heaviness of head, head ache relieved, mild rhinitis especially in early morning was present.

Discussion:

Kaphaja Shirashoola is the condition where patient exhibit symptoms like, heaviness, fullness of head, oedema around eyes and face (filled sinuses, soft tissue edema over sinuses)

Acc to modern, inflammation due to any means causes blockage in the normal sinuses drainage pathway which inturn leads to mucous retention, hypoxia, decreased muco-ciliary clearance.

GUDA NAGARA NASYA:

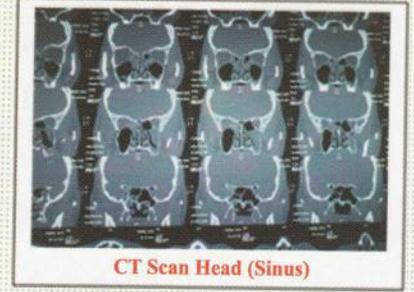
The references for guda nagara nasya is found in sharangadhara samhita(8/19)and, In Chakradatta(Hicca shwasa chikitsa)Here for this patient milk was added with nagara and guda so as to reduce its teekshnata. Guda nagara nasya by ushna katu rasa pradhanatha will do the vilayana of kapha and sroto shodhana. Thus alters the pathology of kaphaja shirashoola.

Internal medication given were kaphavata hara, shirashoolahara and prathishyayahara. Due to this synergetic action of shodhana and shamana measures kaphaja shirashoola has been cured.

Conclusion:

In Kaphaja Shirashoola Shodhana Nasya with Gudanagara and other internal medications have shown substantial relief. Same case was diagnosed as sinusitis and advised for surgery by allopathic medicine.

Clinical improvement was noticed in the patient. C.T Scan was not advised after treatment due to the economical condition of the patient.



By Dr. Shruthi C.S & Dr. Shihana Hassan. T Internees KVGAMC & Hospital Sullia

“A CLINICAL EVALUATION OF THE EFFECT OF DADIMADI GHRITA AS SHAMANANGA SNEHA IN PANDUROGA W.S.R TO IRON DEFICIENCY ANEMIA”

Dr. Vasudevan *, Dr. Krishna Prakash. M.K., ** Dr. N.S. Shettar.***

Nomenclature of the disease Pandu has been done on the basis of its presentation with colours. Healthy skin colour is an integral part of robust health. They are closely linked like flower and fragrance.

Due to Kshara, Amla, Lavana, Ushna Aharas and Ahita Viharas like Diva Swapna when a meal being digested etc. perturbation of Tridoshas takes place with dominance of Pitta Dosha which vitiates Rakta, Twak and Mamsa Dhatus and produces Panduvarnata in the skin. As it progresses other Lakshanas like Pindikodweshtana, Shwasa, Agnisada, Dourbalya, Aruchi, Gourava, Hridrava, Shirashoola etc also appears.

Pandu resembles with ‘Anemia’ of modern science which affects both rural and urban societies of India. Iron deficiency anemia is the most common nutritional disorder prevalent all over the world with an estimated 4.5 billion people affected accounting for 60-80% of the world population with 9 out of 10 sufferers living in the developing countries. This compelled the W.H.O to declare it as a world health problem.

Panduroga Chikitsa includes Shamana and Shodhana. For Snehana during Shodhana therapy and for Shamana purpose, many Ghrityogas like Kalyanaka, Panchagavya, Mahatiktaka and Dadimadi are mentioned in Charaka Samhita. The Sodhana and Shamana property of Ghrita mainly depends on the time of administration and its dosage. In Alpa Doshavastha Shamana Snehapana is the ideal choice of medication.

Acharya Vagbhata described Dadimadi Ghrita as one of the effective medicine in Panduroga. The drugs in this Yoga possess predominantly Ushna, Teekshna, Deepana and Pachana properties which enhances the Agni and it has Tridoshahara property which may help in the Samprapti Vighatana of Panduroga.

Objectives of the study:

1. Conceptual study of Panduroga and Iron deficiency anemia explained in all Ayurvedic classics and Modern text books.
2. To evaluate the efficacy of Dadimadi Ghrita as Shamananga Sneha in Panduroga.

Materials and Methods :

Study design : Single blind randomized clinical study.

Sample Size : 30 patients fulfilling the diagnostic and inclusion criteria of either sex will be selected and assigned in a group.

Intervention : 30 patients of Panduroga will be selected and subjected to Dadimadi Ghrita Shamananga Sneha.

Dose : Hrisvamatra of Sneha according to Sharangadhara Samhita - Dwikarsha Pramana.

Time of administration : Morning on empty stomach when the patient feels hungry.

Duration : 60 days (Shamananga Sneha – 45 days & Follow-up –15days)

Assessment : The signs and symptoms are recorded based on the proforma designed for the study and assessment would be done on subjective and objective criteria which would be analysed statistically.

* Pg Scholar. ** Guide. *** H.O.D.-Post graduate studies in Panchakarma K.V.G.A.M.C, Sullia.

“A CLINICAL COMPARATIVE STUDY BETWEEN
AGNIKARMA AND SWEDANA IN SANDHIGATA VATA W.S.R TO JANU SANDHI”

Dr. MOHASIN.A.KADEGAON *

Dr.UDAYA SHANKAR. M.D. (AYU) **

*** Dr. DEENA PRAKASH BHARADWAJ

Sandhigata vata is a manifestation of morbid vata in the joints, characterized by sandhi vedana, shotha, aatopa, and sthambha. Treatment like snehana, swedana, upnaha, agnikarma and basti are advised for it.

Agnikarma due to its ushna guna eliminate the vitiated vata kaphaja dosha. Swedana is usefull in diseases caused by vitiation of vata, kapha and both. Both agnikarma and swedana enhances the local temperature and looks similar, but their procedure and mode of action is different. So this topic is chosen to evaluate the better efficacy in between them.

MATERIALS AND METHODS: Patients attending the OPD of KVG ayurvedic medical college with pain & stiffness in the knee joint associated with the swelling & crepitus will be selected for the present study.

Treatment plan: Patients will be assigned into two groups, undergoing agnikarma and swedana in each group.

Agnikarma : Local massaging with til oil for 5 minutes followed by applying agnikarma with loha shalaka on the site of maximum pain. Afterwards the area is smeared with a mixture of honey and ghee.

Swedana: For patients undergoing swedana procedure, nadi sweda with dashmoola kwath is given for 15 minutes after local massage.

Follow up and duration: Treatment for 7 days followed by follow up at the end of 7th and 14th day in the both groups.

Discussion and conclusion: The clinical study has witnessed encouraging results in both the groups. Though there was quick reduction in the pain in agnikarma group, the benefits were sustained for long time in swedana group. Full details are being analysed to draw final conclusion. The clinical work is going on and expected to be completed within two months.



*P.G.Scholar, ** Guide, *** H.O.D

Post Graduate studies in Shalya Tantra, K.V.G. A.M.C, Sullia

“A PHARMACO-CLINICAL EVALUATION OF KAMPILLAKA (*Mallotus philippinensis* Muel Arg.) PHALARAJA EXTRACT ON WORMS W.S.R. TO HOOKWORM & ROUNDWORM”

Dr. Jasmeet Singh* Dr. Bhagyalakshmi** Dr.Rajashekhara N.***

Ayurveda is an ancient and globally accepted harmless medicinal system. Exploration of this knowledge throughout the world can be done only by scientific study and take patents for these drugs. The plant Kampillaka generally known as Kabeela or Kameela (K- Kumkumada mara) abundantly seen in various parts of Karnataka forest, mentioned by ancient Acharyas not only as a single drug but also in combination with other drugs for worm infestation. Especially Bhavamishra mentioned it as a Krimihara. Kampillaka has been studied scientifically for its therapeutic effects but not in extract form. In modern era, we are using extracts in pharmacy sector for convenience of the patient, to reduce the dose and to exclude their unwanted fractions. It also requires standardization as per standard norm in different types of worms.

Intestinal helminthes are a type of intestinal parasites that resides in the human gastrointestinal tract. They represent one of the most prevalent forms of parasitic disease. Scholars estimate that over a quarter of the world's population is infected with an intestinal worm of some sort, with roundworm, hookworm, and whipworm infecting 1.47 billion people, 1.05 billion people, and 1.30 billion people respectively. Furthermore, the World Bank estimates that 100 million people may experience stunting or wasting as a result of infection. For the sake of above this study is planned to assess the vermicide action of Kampillaka in worm infestation as Krimighna.

So this pilot study is designed to try Kampillaka Phalaraja in water alcoholic extract form in order to help the patients and also to improve the growth of Ayurveda.

OBJECTIVES OF THE STUDY:

- To find cheaper and readily available remedy for worms infestation.
- Pharmacognostic & Analytical study of Kampillaka phala raja.
- Preparation of the water alcoholic extract of Kampillaka phala raja.
- To evaluate the vermicide effect in Hookworm & Roundworm by Kampillaka phala raja water alcoholic extract clinically.

Selection of drugs : The drug for the study will be collected from Sullia taluk after proper identification and made water alcoholic extract in Pharmacy of K.V.G. Ayurveda Medical College.

DIAGNOSTIC CRITERIA : Diagnosis will be established by.

- Subjective criteria :
1. Bhaktadvesha (Loss of appetite).
 2. Atisara (Diarrhea).
 3. Shool (Pain in stomach).

OBJECTIVE CRITERIA:

1. Vivarnata (Discoloration of body).
2. Panduta (Anaemic appearance).

OBJECTIVE CRITERIA:

1. Vivarnata (Discoloration of body).
2. Panduta (Anaemic appearance).

LABORATORY INVESTIGATION : 1. Stool for ova & cyst
2. Hb%

TREATMENT PLAN : Patients will be assigned into above criteria, divided in two groups consisting of 15 patients in each groups according to type of worm examine by stool reports.

- Group A: Selected patients with Hookworm (*Ancylostoma duodenale*) infestation will be treated with trial drug.
- Group B: Selected patients with Roundworm (*Ascaris lumbricoides*) infestation will be treated with trial drug.

DOSE :

- In adult water alcoholic extract derived from 3gm. Phala raja.
- In children (6-12yrs), water alcoholic extract derived from 1gm. Phala raja.
- In children (12-16yrs), water alcoholic extract derived from 2gm. Phala raja.

DURATION : For 3 days in night after food as a single dose with water.

FOLLOW UP : Patients are followed up on the 7th day.

*P.G.Scholar, ** Guide, ***H.O.D.-Post graduate studies in Dravyaguna K.V.G.A.M.C, Sullia.

KASHYAPA SAMHITHA OR VRIDDHA JIVAKIYA TANTRA

3rd Prof. (Sr.) BAMS 2008-09 BATCH

INTRODUCTION REGARDING THE TREATISE:

Pharmacopeia of Ayurveda from the beginning consists of drugs based plants. However a revolution took place during medieval period, where minerals and metals made strong invasion into the medicinal field of Ayurveda and later it is made as new branch called "Rasa Shastra."

'Ananda Kanda' is a great book which gives a detailed description regarding concepts of Rasa Shastra. It is also known as "Bairavokthamaya Grantha."

ABOUT THE AUTHOR :

There is no confirmed reference about the author of 'Ananda Kanda', but some author opines that this text is written by Acharya Manthana Bhairva.

By analyzing the whole treatise we can understand that, this was written at Sri.Shaila Parvatha in Andra Pradesh or a person having good knowledge about Shaila Parvatha because a detailed description of drugs present in shaila parvatha is available in the treatise.

TIME PERIOD OF THE TREATISE : Some Scholars opine that it might be around 16 th century A.D.

CHAPTERS OF THE TREATISE: The total number of chapters is 36 . They are divided into 2 different sections in which each chapter is named as 'Ullasa'.

THE NAME OF 2 SECTIONS ARE:

- 1) Amruthikarana Vishranathi with- 26 Ullasa-It mainly deals with the description of all aspects of Parada, different Samsakarasa, Yantras, Rasayana Yogas in detail.
- 2) Kriyakarana Vishranathi with- 10 ullasa- mainly explains about Uparasas, Loha's, Ratnas, Divyaousadhi and Mahaousadhi's..

CONTRIBUTIONS : Apart from Rasa Shastra, we can get reference regarding Rutucharya, Dinacharya and some of Agada tantra – Dravya guna concept were also highlighted.

SHIRA SHOOLADI VAJRA RASA

3rd Prof.BAMS

पलं रसं पलं गन्धं पलं लौहं पलं रविः । गुग्गुलाः पलचत्वारि नदहं त्रिफलारजः ॥
कुष्ठं मधु कणा शुण्ठी गोक्षुरं कृमिनाशनम् । दशमूलञ्च प्रत्येकं तोलकं परिकल्पयेत् ॥ क्वाथेन दशमूल्याश्च यथस्वं परिभवयेत् ।
घृतयोगेन कर्तव्यं माषेकप्रमितावटी ॥ छगीदुग्धानुपनेन पयसा मधुनायवा । शिरः शूलाद्रिवज्रोयं चण्डनाथन् भाषितः ॥
एकजं द्वन्द्वजञ्चैव त्रिदोषजनितं तथा वातिकं पैतिकं पूर्वं शिरोरोगम् विनाशयेत् ॥

[Bhaisajyaratnavali Shiroroga Chikitsa]

Ingredients : Purified Parada, Purified Gandhaka, Loha Bhasma, Tamra Bhasma, Purified Guggulu,
Triphala - Choorna, Kusta - Choorna, Yastimadhu- choorna, Pipalli -Choorna, Shunti - Choorna,
Gokshura - Choorna, Vidanga - Choorna

Bhavana Dravya : Dashamoola-Kwatha

Note : Pills are made out with the help of ghee..

Therapeutic Uses : Ekadoshaja, Dwidoshaja, Tridoshaja, Vatika. Pittika and all other types of shiroroga's...

Dose : 4 Ratti

Anupana : Goat's milk, Cow's milk, honey.

SHUNTI

2nd Prof BAMS

BOTANICAL NAME : Zingiber officinale Rosc.

FAMILY : Scitaminae (Zingiberaceae)

VERNACULAR NAME : Hindi- Sonth.

English- Ginger.

Malayalam- Chukku.



SYNONYMS : Nagara, Sringavera, Visva, Visva Bhehsaja, Katubhadra, Mahoushadha.

CLASSICAL CATEGORIZATION : Charaka- Triptigna, Arshoghna, Deepan Susruta- Pipalyadi, Trikadu
Vagbhata-Pippalyadi

BOTANICAL DESCRIPTION : An erect perennial herb with aromatic rhizome. Stem-erect, leafy, 15-50 cm tall.
Leaves- subsessile, linear-lanceolate or lanceolate, acuminate, glabrous, 10-30 cm long.

Flowers - Shoot upto 12cm long, clothed with sheaths, bracts 2-5 cm, light green, corolla tube light yellow, lip orbicular, dull purple with creamy blotches.

DISTRIBUTION : Throughout India. **CHEMICAL CONSTITUENTS :** Citronellol, Geraniol, Gingerol, Zingiberol, Gingerols, Paradol, Gingerenone A, Ginger glycolipids A, B, & C.,

PROPERTIES : RASA: Katu GUNA : Guru, Ruksha, Tikсна (Ardraka), Lagu, Snigdha (Shunti).

VIRYA: Ushna., **VIPAKA:** Madhura (Ardraka- Katu), **KARMA :** Vata-Kaphahara, Deepana, Pachana, Triptighna

INDICATION: Sula, Amavata, Adhmana, Atisara, Kasa, Shvasa, Hridroga, Shopha, Arshas, Jwara, Kushta, Agnimandya.

IMPORTANT PREPARATIONS : Ardraka Rasayanam, Nagaradi Kasaya, Soubhagya Shunti, Kottamchukkadi Tailam, Samasarkara churna, Ardraka ghrita, Ardraka Khanda.

VYAYAMA

1st Prof. BAMS

लाघवं कर्मसामर्थ्यं दीप्तोऽग्निर्मदसः क्षयम विभक्तघनगात्रत्वं व्यायामादुपजायते ॥ (AH.Su.2/11)

The practice of physical exercise renders body light and efficient in activities, improves digestive power, wanes obesity, renders finely chiseled contours and consistent body structure.

Physical exercises benefits the body by promoting proper functioning of agni which helps metabolism at various levels and normalizes day to day transient vitiation of dosas. Thus, vyayama in general helps to maintain the state of proper health. In the case of rugged individuals, those who routinely consume oily food and in the ritus of Hemanta, Shishira and Vasanta; physical exercise are to be practiced until half of the total energy reserve in the body gets utilized. The cold ritus of Hemanta, Shishira are characterized by natural increase of body strength. More over, Kapha undergoes chaya in these ritus wherever it attains the state of prakopa in Vasanta ritu. In order to pacify Kapha, wholesome physical exercises are recommended in these seasons. The appearance of perspiration along the forehead, nose, joints and armpits is indicative of utilization of half of the total energy reserve in the body.

Exercises are not recommended to those who suffer from diseases due to vitiation of vata and pitta. Further, it is contraindicated in tender children, the very aged and in those who suffer from indigestion.

Now, almost 800 years after inception of Astangahrdaya, we are taught that daily exercise is a must. It is known that daily exercise prevents degenerative Arthropathies, vascular and collagen related diseases, helps to check hypertension promotes circulation, controls lipid profile and gives overall immunity, when properly instituted. It is the method available to keep one healthy at no cost at all. Surprisingly, exercise is also a business now a day look at the variety of equipments used for keeping you 'fit'!

Gymnastics/ Calisthenics/ Workouts are done using equipments like weights, bars and ropes, these help to increase body strength and the ability to move and bend easily. Aerobics are energetic physical exercises often performed with a group. These increases endurance, makes heart, lungs and muscles stronger and increase the amount of Oxygen in the blood. Specific exercise can be employed for selective muscle groups only, for strengthening them in case of dystrophies after a period of immobility. In excess, exercise causes thirst, emaciation, variety of asthma, bleeding disorders, physical fatigue mental fatigue, cough, fever and vomiting. Thus indulging in excessive exercise is like a lion attacking an elephant by physically seizing it and will harm the body.

LIVING AYURVEDA WITH A TRADITIONAL APPROACH

Dr. Sreejith.S, PG.Scholar, Dept. of Dravyaguna

One of the apt examples for living Ayurveda is seen in most of the homes in Kerala where in Karkatakakanji-Medicinal Porridge (Peyakalpana), a dish prepared in accordance to Rithucharya, is consumed in the Karkatakamasa of Varsharithu. (Karkidaka Kanji is a medicinal rice soup is a traditional item of Kerala during the rainy days. This tasty dish has a special effect in warding off the monsoon fevers. It acts as a health tonic and helps in boosting your energy and stamina.) The sutra applied here is "Pachetsadharanam sarvam ooshmanathejanam cha yath" (A.H Su 3.)

This dish includes medicinal herbs which are easily available near the surroundings, along with a preparation made out of medicinal leaves. This is taken during the whole month in the morning after taking bath.

As this month is also known as Ramayana Masa (mid July - mid August), this is consumed after taking bath, Vratha and Pooja. Another speciality of this month is Aushadhasevana.

A Kalka made of Raktachitraka and Ghrita is usually given in temples on a particular day of this month which is a small example of following Rithucharya.

COMBINATION OF KARKITAKA KANJI KOOTU (Medicinal Porridge)

Ingredients :Njavavarice, Rawrice, Wheat, Methika, Chandrashoor (Ashali).

Medicated Powder - Saliparni, Prishniparni, Bala, Punarnava, Shunti, Maricha, Jeeraka, Ela, Nagapushpa, Ajamoda, Bisa(Thamaravalayam), Katakabeeja.

Guna's of Sastika

Sastika is a type of Vrihi, and is also designated as the best among them. Dalhana clarifies that Sastika is termed as the best as it gets digested more quickly than other Vrihi. The properties of Sastika rice are unctuous, light to digestion, sweet to taste, has astringent substate, according to Caraka's opinion it pacifies all the Dosas, while Susruta attributes a Vatapitta pacifying property to it. It imparts stability (Sthiratwa) to the body elements and enhances strength. Sthira is the quality which bestows stability, delays senility, pacifies fatigue and lassitude. Thus the Sastika rice acts as Rasayana in emaciated states of the diseases.

COLLEGE ACTIVITIES



Inauguration of college new Block
Dr. Rajarshi D. Veerendra Heggade



Dr. Rajarshi D. Veerendra Heggade
at Agada Tantra Museum



Honouring By Dr. K.V. Chidananda Vice President
A.O.L.E.(R) Sullia.



Dr. Rajarshi D. Veerendra Heggade and Hon'ble
Speaker K.G. Bopaiah At digital library



Dr. Rajarshi D. Veerendra Heggade
at Dravya Guna museum



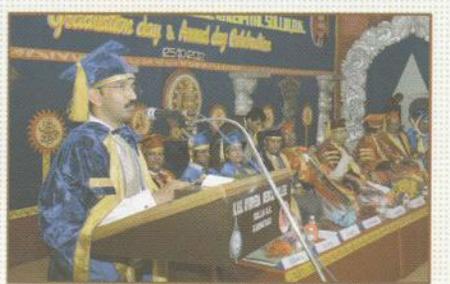
Dhanvantari Puja



Freshers day talk by Shri. Sudarshan
Circle Inspector of Police, Sullia.



CCIM President Vaidya Ved Prakash Tyagi
at Digital Library



Key Note Address by Dr. Prasanna Rao
Chairman, Executive Committee, CCIM



Releasing the Book on Shalakyta Tantra



Vaidya Ved Prakash Tyagi
Addressing the Budding Vaidya's at Convocation



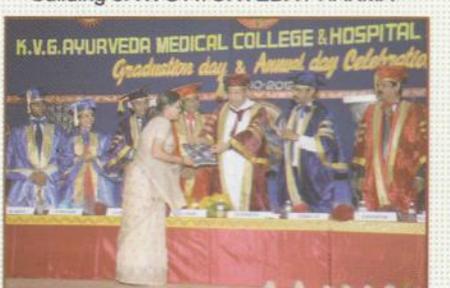
Foundation stone laying ceremony for new
building of KVG AYURVEDA PHARMA



CCIM President Vaidya Ved Prakash Tyagi
at Agada Tantra museum



Inaugurating the convocation day ceremony



Releasing the college souvenir Prajna

COLLEGE ACTIVITIES



Arrival of Dignitaries



Here we are to welcome our Guests



Our Graduates



Dr. Avinash K.V



Dr. Venugopal Bhat

OUR STAFF OUR PRODUCTS RECEIVING GRADUATE HONOURS

STAFF ACHIEVEMENTS



Dr. N. S. Shettar MD (Ayu)

Principal,

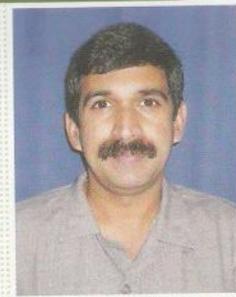
K.V.G. Ayurveda Medical College & Hospital Sullia.

Has been appointed as member board of PG studies in Ayurveda.

R.G.U.H.S Karnataka, Bangalore

AkhilaA Karnataka Ayurveda Medical Association (R) awarded

Vaidya Vidwan to Dr. Prof.N.S.Shettar.



Dr. Udaya Shankar MD. (Ayu)

Professor,

K.V.G. Ayurveda Medical College & Hospital Sullia.

Has written a book on Shalaky Tantra which is published through Chaukamba publication.



STUDENT ACHIEVEMENTS

Dr. Aatish C.B. (2004-05) Batch K.V.G Ayurveda Medical College, member of Waghray Warriors cricket team (U.K) entered Guinness World record by playing 150 hours cricket. Dr. Atish scored a total of 537 runs from 7 innings and 3 centuries with a double century (210 not out). He also took 3 wickets in the tournament.

HOMAGE

न जायते म्रियते वा कदाचित् न अयं भूत्वा भविता वा न भूयः ।
अजो नित्यः शास्वतो अयं पुराणो न हत्यते हन्यमाने शरीरे ॥
भ.गी /सांख्ययोग



Born : 20-6-1931

Expired : 22-08-2012

Late. Smt. Janaki Venkatramana Gowda

May her Soul Rest In Peace

MANAGEMENT, PRINCIPAL, STAFF AND STUDENTS

About Smt. Janaki Venkatramana Gowda.....

Smt. Kurunji Janaki Venkatramana Gowda was born on 20th June 1931 in Maragodu village, Madikeri Taluk, Kodagu district. She completed her primary education at Higher Primary School Murnad, and her High School studies up to Matriculation, in Central High School, Madikeri.

She got married to Kurunji Venkatramana Gowda in the year 1954. She was very kind and generous in treating the guests and hosts with very delicious food. She was well trained in Home Science.

Smt. Janaki Venkatramana Gowda opened a rural development ladies society for the purpose of ladies progress in the year 1976 and she became the president of the society and worked hard for about 14 years. She was also one of the committee members of Puttur block development board. She tried her best for convincing the backward people to follow the family planning in Sullia. She always stood by her husband in every respect of the college work. She was one of the Directors in Academy Of Liberal Education (R). She was very carefully looking after the inward and outward works of areca nut gardens and others.

Smt. Janaki Venkatramana Gowda survived by two sons Dr.K.V.Chidananda and Dr. Renuka Prasad K.V. and a daughter Smt. Govardhini married to Dr Jayakumar and both are settled in America. Smt Janaki's elder son Dr K.V.Chidananda Vice President of Academic of Liberal Education married Smt Shobha. Her second son Dr Renuka Prasad K.V.General Secretary of AOLE married Dr Jyothi. She was leading her life by simplicity and high thinking. Their family name and fame is wide spread all over India on account of their contribution to rural education field. Smt. Janaki breathed on 22-08-2012 at 8.20pm. We all pray God Almighty that her soul rest in peace in heaven and give strength to her family to bear the great loss.

*By - Dr. Harshitha Purushotham
Dept. of RS & EK.*

QUIZ :

- The author of Rasatarangini is
 - Sadanand Sharma
 - Priyavrata Sharma
 - Trayambak Nath Sharma.
 - None
- Which of the following is included in Pancha Panchaka as per Charaka
 - Pancha Rasa
 - Pancha Lavana
 - Pancha Kshara
 - Pancha Indriya Buddhi
- Number of Peshis present in body according to Susruta.
 - 600
 - 700
 - 500
 - 900
- Smallest bone in body
 - Malleus
 - Incus
 - Stapes
 - Ilicaus
- Sneha Paka with Mamsa Rasa should be completed in
 - 3 days
 - 1 day
 - 7 days
 - 5 days
- Drava drone Tulam gudam is mentioned in context of
 - Avelaha Kalpas
 - Vati Kalpas
 - Asavaarista Kalpas
 - Snehapaka Kalpas
- Kokilaksha is mainly indicated in
 - Kusta
 - Gridhrasi
 - Vatarakta
 - Raktapitta
- Dattura prayoga is advised in ----- visha
 - Alarka
 - Kuchala
 - Sarpa
 - Vrischika
- Kshira Sarpi Yavagu advised for Garbhini in
 - 4th month
 - 7th month
 - 8th month
 - 9th month
- Kapata Sayana is advised by Susruta in case of
 - Amsa Bhagna
 - Urvasthi Bhagna
 - Sandhi Muktha
 - none of these

Mail the answers at kvgayurnews@hotmail.com on or before Jan.20th 2013

: HOME REMEDIES :

- For improving digestion :** Chop a fresh piece of ginger and eat few pieces of ginger with salt immediately after a meal.
- For cough and cold :** Prepare tea by adding black pepper , dry ginger , few basil leaves and jaggary and drink thrice daily.
- For sore throat :** Take one tsp fresh ginger juice, half tsp honey and a pinch of turmeric and lick the mixture at least three times a day.

: DISCLAIMER :

- Editor hold no responsibility for the views of authors.
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- Treatments mentioned here are not to be instituted without proper advice by the registered Ayurvedic practitioners.

To,

BOOK POST