

ERGHAYU

ISSN - 0970 - 3381



The Peer Reviewed Quarterly Journal for Ayurveda & Health Science since 1984

























CHANGING NUMBERS

High Blood Pressure Past 140/90 mm of Hg Present 130/80 mm of Hg



Blood Glucose Level Past 140 mg/dL Present 100 mg/dL

Price Rs. 300

Authors of this Issue



Dr. Dilip Bhusari



Dr. P. S. Pawar



Dr. Eknath Kulkarni



Dr. Sanjay Pund



Dr. Atul Rakshe



Dr. Sanjay Lungare



Dr. Manisha Pund



Dr. Manjari Keskar



Dr. Manisha Kulkarni



Dr. Mukul Tamhane



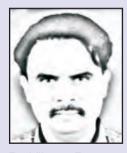
Dr. Pradeep Taware



Dr. Pravin Joshi



Dr. Arati Firke



Dr. Vikram Pansare

19th International Ayurveda Conference and 'Dolce India' Festival, 2017, Italy

The 19th International Ayurveda Conference was organized at Ashram Joytinat, Italy by Ashram Joyutinat and sister concerns on 1, 2 and 3rd September 2017.

Over 300 Ayurveda and Yoga students, practitioners and enthusiasts from various European countries attended these three day events dedicated to Ayurveda, Yoga, Indian arts, spirituality and culture.

Dr. Atul Rakshe, Secretary general of International Ayurveda association and Lama Thuben Wangchen of Casa Tibet, Barcelona were the guests of honor for the events. Dr. Annibale D'Angelo (psychotherapist and naturopathic) was the coordinator of the events.

The conference started with traditional Dhanwantari Pooja and Dhanwantari Stavana sung by Prof. Dr. Atul Rakshe. Books viz. 'Disease treatment- An integrated approach', 'Vaajikarana' and 'Shishu health' were published at the hands of Swami Joythirmayananda. Dr. Atul Rakshe presented a picture of Goddess Lakshmi 'the symbol of prosperity' to the Ashram.

This conference had speakers Fabio Basalisco (Ayurvedic physician specializing in purification practices), Giorgio Gustavo Rosso (publisher and founder of Macro Gruppo Editoriale), Mario Longhin (specialist in problems related to the spine), Nadeshwari Joythimayananda (doctor in health sciences, yoga and shamanism in the new millennium), Jerry Diamanti (creator and author of the multimedia magazine Matrika. Consciousness Development), Cristina Landi (psychologist, president of the Cooperative Other Streets of Padua).

Umahar Joythirmayananda, Cristina Landi, Masterchef Rajalakshmi Joythirmayananda and many dignitaries were present.

A Round table on the theme 'The role of the sacred song to human health '. Speakers were Acharya Swami Joythimayananda, the Tibetan Lama Thubten Wangchen and the parish priest Don Giuseppe Bartera Sebastianelli; moderates the meeting Guido Gabrielli, editor of Yoga Journal Italy. Followed by: "Singing for peace (shanti) and happiness (anandam)"

A concert of Bhajans' Sounds and oriental atmosphere with Indian music of Ruben Narrainen (vocals and harmonium) and Viraj Dhananjaya (tablas) was oraganized.

Nadeshwari Joythirmayananda's Baharatanatyam performance was widely appreciated.





Glimpses of 8th International Ayurveda Research Day Conference













DEERGHAYU INTERNATIONAL

ISSN 0970 - 3381

VOL. THIRTY THREE - 04

ISSUE NO. 132

Oct.-Dec. - 2017

FOUNDER / CHIEF EDITOR

EDITOR

Prof. Dr. P. H. Kulkarni

Prof. Dr. Kavita Indapurkar

E-mail: kavitaindapurkar@gmail.com, Mob.: 9890791688

ASSOCIATE EDITOR

Prof. Dr. Atul Rakshe, drraksheatul @gmail.com, Mob.: 9422034506

EDITORIAL CORRESPONDENCE

Kothrud Ayurveda Clinic,

Opp. Mhatoba Temple, Bodhi Vruksha, Navagraha Maruti, 36, Kothrud Gaothan, Pune - 411 038. (INDIA)

Telefax: +91 - 20 - 25382130 Tel.: 91 - 20 - 65207073, Mob.: 9822037665 Email: deerghayuinational@gmail.com, profdrphk@gmail.com, Website: www.ayurvedalokguru.com, Blog: https://drphk.blogspot.com

Deerghayu International Council Of Editors

1)	Dr. Bhalsing Manisha	13)	Dr. Kamble Pushpalata	25)	Dr. Puranik Geeta
2)	Dr. Bhandare Kishor	14)	Dr. Khadilkar Ravindra	26)	Dr. Muke Abhinandan
3)	Dr. Bothare Mugdha	15)	Dr. Kulkarni Eknath	27)	Dr. Patwardhan Manish
4)	Dr. Chothe Vikas	16)	Dr. Kulkarni Yogini	28)	Dr. Pawar Chandrakant
5)	Dr. Daspute Swapnil	17)	Dr. Kurmi Kurush	29)	Dr. Pawar Chandrakant
6)	Dr. Deshmukh Devika (CA, USA)	18)	Dr. Lalitha B. R.	30)	Dr. Pund Sanjay
7)	Dr. Ghodke Kaustubh	19)	Dr. Mahajan Madhavi	31)	Dr. Rokade Patil Sagar
8)	Dr. Ghotekar Mrunali	20)	Dr. Mohare Harshad	32)	Dr. Samant Rani (Melbourne, Austr.)
9)	Dr. Gupta Shivani	21)	Dr. Mukherji Pradnya	33)	Dr. Sardeshmukh Sukumar
10)	Vd. Irani Farida (Sydney, Austr.)	22)	Dr. Phadnis Manoj	34)	Dr. Terwadkar Sharduli
11)	Dr. Kadampatil Ruturaj	23)	Dr. Phalle Shailesh	35)	Dr. Tommasini Lucia (Italy)
12)	Dr. Kale Shashikant	24)	Dr. Pingle Kirti (CA, USA)		

Subscription Rates				
Details				
1 Year	Rs. 500/-			
Advertisement Tariff	Per Insertion			
Full page B & W	Rs. 2000/-			
Half page B & W	Rs. 1200/-			
Full page 2/3 colour	Rs. 10000/-			
Cover page 4 colour	Rs. 12000/-			
Front Cover	Rs. 15000/-			
Sponsoring one article	Rs. 2000/-			
Discount for Annu	al contract			

Send subscription/donations/gifts in favour of "Deerghayu International"
${\sf UCOBANK,KothrudBranch,nearPostOffice}.$
Bank Account No. 14690200000611.
IF SC (India Financial System Code)
of the bank UCBA 0001469.
Code of the Bank - 411028011.
Tel. No. of Bank - 91-20-25380076

Index

	Pag	je No.
1)	Review: Kriyakalp - A boon to ophthalmic cure and care - A Review Keskar Manjiri, Bhusari Dilip	255
2)	Experiment: A Comparative Pharmacognostical & Physiochemical Study of Chitraka (Plumbago Zelanica. Linn) Collected from Natural & Cultivated Sources Pradip B. Taware, Lungare Sanjay Narayanrao	259
3)	An Analytical & Pharmacological study of Shigru seed (Moringa Oleifera linn.) with special reference to its antimicrobial activity against waterborne pathogens. Vikram Maruti Pansare, Lungare S. N.	263
4)	Clinical: A single case study on Constipation P. S. Pawar, S. S. Pund, P. R. Joshi	269
5)	Critical study on consideration of Kaphamedavatahara drug with respect to obesity P. S. Pawar, S. S. Pund, P. R. Joshi, Manisha S. Pund	273
6)	Review: Importance of Ashtauvidha Aahar Vidhi Visheshayatan In Healthy Living Mukul R. Tamhane, Arti R. Firke	277
7)	Philosophy: Ayuvedic Niti Shastra Manisha Kulkarni	284
8)	Research : Research Article Structuring Eknath Kulkarni	287
9)	Information : Sowa - Rigpa	290
10)	Guidelines for Submission of Articles	291
11)	Report of 8th International Avurveda Research Day Conference	292

Review:



Kriyakalp - A boon to ophthalmic cure and care - A Review

Author - *Dr Keskar Manjiri, Ph. D. (Ayurved), **Dr Bhusari Dilip, Ph. D. (Ayurved)
*Associate Professor, D. Y. Patil University, School of Ayurved, Nerul, NaviMumbai - 400706
manjirikeskar@gmail.com, 9822606358

**Prin., Ashtang Ayurved Mahavidyalaya, Maharashtra University of Health Sciences, Sadashiv Peth, Pune 30 drbhusaridilip@gmail.com, 9422002020

*First Author **Corresponding Author

Introduction -

Eye is the most important organ of the body. Good vision is crucial for social and intellectual development of a person. So to protect this organ is not only a necessity but also a responsibility of every individual and an ophthalmologist too. And to do this, *Kriyakalp* means ocular treatment procedures are described in Ayurvedic texts like CharakSamhita, Sushrut Samhita, Ashtang Sangraha etc.

Charak described three treatment procedures – Tarpana, Putpaka and Anjana.

Sushruta told about five treatment procedures-Tarpana, Putpaka, Seka, Aschyotan and Anjana

In 13th AD, Sharangdhar (Ayurved physician) added *Pindi* and *Bidalak* to the procedures described by Sushruta.

So from then onwards, total seven treatment modalities are in use to cure ophthalmic diseases along with systemic drugs. *Ayurved* always believes in maintaining body's healthy status first and if disease occurs then it deals with it. To avoid recurrence, some special treatment are also described in *Ayurved* called as *Apunarbhav Chikitsa*(Treatment which does not allow recurrence of disease)

In inflammatory condition of eye, Seka, Aaschyotan, Pindi and Bidalak are used and when eye is freed from diseased state, to maintain its healthy state, Tarpana, Putpaka, and Anjana is used.

The guidelines given by these great physician and surgeons are proving its significance till date and will continue forever.

Aim -

To review action of *Kriyakalpa* in light of modern drug delivery system

Importance of Kriyakalp -

Kriyakalp is a Sanskrit word which has two words in it-kriya and kalpa. Kriya means therapeutic action and kalpa means formulation. It is local therapeutics for various eye disorders to cure and also to maintain healthiness of eye.

Kriyakalp has several advantages over systemic administration of drugs in ocular diseases. Cornea plays major role in active absorption of drugs administered locally. So the aqueous decoctions and herbal preparations are so designed to rectify vitiated *Doshas* (causative factor of ocular disease).

Kriyakalp are to be selected depending upon the stage and severity of disease so that tissue contact time can be managed accordingly for better results.

There are blood aqueous, blood vitreous and blood retinal barriers in the eye to reach target diseased tissue. So *kriyakalp* drugs are made accordingly considering anatomy and physiology of ocular tissues to achieve higher bioavailability for better results.

Kriyakalp in details -

- Aaschyotan-Putting medicated drops in eyes is called Aaschyotan. Modern eye drops are included in this form of Kriyakalp. It is first line treatment of all eye diseases. Putting medicated drops in eyes relieves pain, itching, irritation, foreign body sensation, excessive watering, burning, redness and inflammation. Sushruta says that Aaschyotan is to be done in day time only. It is contraindicated at night.
- 2. **Seka**-In this aqueous decoction or medicated milk or medicated liquid is poured into eyes from inner canthus to outer canthus at a distance of four inches for specific time period while eyes are kept closed. It is indicated in acute condition if ocular diseases to ensure more tissue contact time.
- 3. Bidalak-It is application of medicated paste on the eyelids externally except eyelashes keeping the eyes closed. It is used in acute condition of ocular disease. It controls burning, discharges, excessive watering, swelling, redness, pain, itching, foreign body sensation etc. It has three types depending on the thickness of its application. The more severe the disease, the more the thickness. It is used along with Aaschyotanor seka to ensure better results.
- **4.** *Pindi*-Medicated paste is kept on a bandage cloth and then it is applied on the eyelids. It is used in acute condition of eye diseases especially in *Netrabhishyanda*(all types of conjunctivitis). It is also useful in reducing inflammation produced due to trauma or wound.
- 5. *Tarpana*-It is the procedure used to give nourishment to the ocular tissues. It is used when eyes are disease free and we need to strengthen the eyes so that there should not be recurrence of the disease. In this procedure, medicated ghee is poured in eyes for specific time period by making circular boundary of black gram flour dough around orbital fosses. It is best method of inducing nourishment to the eyes.
 - It is contraindicated on a very hot, very cold, cloudy and rainy day. It is also contraindicated in acute conditions. It should not be done in excessive fatigue, stress, worries. It is contraindicated in allergic conditions, rhino sinusitis, fever and cough.

The duration to hold the medicated ghee depends on which ocular tissue needs nourishment.

- 6. Putpak-It is to be done immediately after Tarpana to reduce ill effects of Tarpana if at all it exists. In this procedure, by special pharmaceutical procedure, liquid is extracted from medicated herbs and is poured in the eyes. The duration of pouring the medicated liquid depends on what action is expected from this procedure.
 - Proper *Tarpana* and *Putapak* sharpen vision, gives pleasant appearance to eyes, enhances capacity of eyes to tolerate wind and sunlight, allows sound sleep and blissful awakening.
- **7. Anjana**-Application of herbal drug in the form of paste or fine powder into conjunctiva fornix with an applicator or with fingertip is called as Anjana.
 - It should be given in absence of inflammation.
 - If done properly, Anjana serves purposes like cleanliness of eyes, lightness of eyes, better functioning of eyes.

Discussion -

In *kriyakalp* procedures, the main forms of drugs instilled into the eyes are aqueous solutions as in *Aaschyotan* and *Seka*, aqueous suspensions like medicated ghee and oils, ocular inserts and ointments as in anjana. Each form has different bioavailability. In solution form, drug is totally dissolved so completely available but tissue contact time is very low as in Aaschyotan and Seka. In suspension form, the drug is present as small particles suspended in aqueous medium as in medicated ghee and oils. In this form, particles do not leave the eyes as quick as solution do, increasing tissue contact time as in *Tarpana* and *putpaka*. So each *Kriyakalp* has its own benefits and *Shalaki* has to use his or her talent to ensure which *Kriyakalp* will be useful to the patient by knowing which stage the disease is. If the disease is in *SaamAvastha*(showing signs and symptoms of inflammation), then *Aaschyotan*, *Seka*, *Pindi* and *Bidalak* are to be done, all at a time or one by one depending again on patients condition. If disease is in *NiraamAvastha*(showing no signs of inflammation) then *Tarpana*, *Putpak* and *Anjana* can be used.

It is up to the Shalaki to identify

Stage of disease,

Condition of patient,

Vitiated Dosha and Dushya(causative factors),

Desh(Area where patient belongs),

Kaal(Season),

Bala(capacity of the patient to tolerate disease and treatment)

All these factors changes with every patient so we cannot typecast a typical treatment for every patient. It is the Shalaki who decides the treatment, systemic as well as local.

Conclusion -

In the light of above fundamentals of modern pharmacology, all the Ayurvedic ocular therapeutic procedures are relevant as such and also provides undoubted efficacy of all Ayurvedic

therapeutic procedures, researched and preached in the benefit of mankind since thousands of years.

To cure ocular diseases, local treatment procedures are described by keeping in mind the stage of the disease, severity of the disease and spread of disease. The drugs prescribed for these procedures are designed by keeping in mind tissue contact time, bioavailability of the drug, hydrophilic, hydrophobic, lipophilic, lipophobic nature of ocular tissue(cornea), permeability of drug, active drug absorption, drug delivery system, molecular size of the drug and excretion of drug.

Sushruta must have thought of all above factors which affects drug absorption in ocular tissues so he described different treatment procedures with different drug forms. He also described what should be the frequency of drug administration.

All that differs is language but the scientific content is of same potential and carries same rationale.

Acknowledgement - We hereby thank Dr Kartar Singh Dheeman, Director General, CCRAS, New Delhi for his book 'KriyakalpVidgyan'; which helped us a lot in writing this article.

References -

- Charak Samhita with Ayurved Dipika commentary by Chakrapanidatta, Ed. By Vd Yadavji Trikamji Acharya, Chikitsasthana 26/231, Chaukhambha Surbharti Prakashan, Reprint 2011, pages 271-281
- 2. Chakrapani, Chakradatta with vaidyaprabhahindi commentary by Dr. IndradevaTripathi edited by Acharya Ramanath Dwivedi, Netrarog Chikitsa/2, Chaukhambha Sanskrit Bhavan, Varanasi. Reprint 2010
- 3. Sushrutsamhita, Nibandhasangrah Commentary by Dalhan, Edited by Vd Yadavji Trikamji Acharya, Uttartantra 18/44, Chaukhambha Surbharti Prakashan, Varanasi. Reprint 2010, Pages 51,52
- 4. Vaghbhat, Ashtang Hriday with Sarvang Sundari commentary by Arundatta and Ayurved rasayan commentary by Hemadri, edited by Pt Hari Sadashiv Shastri Paradkar, Sutrasthan, 23/1, 24/12-23, 35/5, Chaukhambha Surbharti Prakashan, Varanasi, Reprint 2010, Pages 23/1, 24/12-23, 35/5
- 5. Sharangdhar Samhita with Dipika Commentary by Adhamalla, edited by Pt. Parshuram Shastri Vidyasagar, Uttarakhand, 13/1-2, Chaukhambha Orientalia, Varanasi, 7th edition, 2008, Pages 1-2
- 6. Gulsen D. Chauhan A. Ophthalmic drug delivery through contact lenses. Invest Ophthalmol Vis Sci 2004; 45:2342-2347. doi:10.1167/iovs. 03-0959 [PubMed] [Cross Ref]
- 7. VandammeTF. Microemulsions as ocular drug delivery systems: recent developments and future challenges. Prog Retin Eye Res. 2002: 21; 15-34. Doi; 10.1016/S1350-9462 (01) 00017-9 [PubMed] [Cross Ref]

Experiment:

A Comparative Pharmacognostical & Physiochemical Study of Chitraka (Plumbago Zeylanica. Linn) Collected

from Natural & Cultivated Sources

Vd. Pradip B. Taware

PMTS Ayurved College, Shevgaon, Ahmednagar Mb.9822494223, email: pradipbtaware@gmail.com

18, Narayan Niwas, Ushakkal Housing Society ,Old Sangvi, Pune 411027

Guide: Dr. Lungare Sanjay Narayanrao, Prof. HOD Dravayaguna Vidnyan

ABSTRACT:

Panchabhautik siddhant is one of the main siddhant in Ayurved. It plays an important role in Plant habitat & their development. The habital mentioned in classical Ayurved text book of Ayurved reguarding to chitraka is "Agni" which is important in panchabautik sanghatan of Chitraka; while the cultivated source of chitraka shows the qualitative dismerit in panchabhautik sanghatana. The natural habital i.e. dry, rough area plays important role in chitraka sanghatana.

Key words: Panchabhautic, Agni, Chitraka, Pharmacognostical

Total No. of ref. use – 10

INTRODUCTION:

Theory of Panchamahabhuta is the heart of Ayurved and basic of drug formation.

Plants and their habitat (Bhoomi) are classified according to the theory of Panchamahabhuta by Acharya Sushruta.

To use as a medicine, whole plant or its useful parts should be collected from such habitat and climatic condition, which possess same Panchabhautic composition as plant.

Bhoomi or Habitat is one of the major factors, which affect the final action of the drug.

About 800 species are estimated to be in trade with a turnover of Rs. 4000 crores per year. Except about 60-80 species whose produce comes from cultivated sources, the rest of the raw material being traded com es from the wild collections.

Chitraka (Plumbago zeylanica Linn.) is one of the species, which have high demand in indigenous drug industry, who comes from wild collections and whose annual market demand is 1000 tonnes per year.

Such high demand puts enormous pressure on the wild populations leading to destruction asnd causes less supply. To conserve their genetic stock and increase production to fulfill increasing demands, varius cultivation methods adapted by herbal industries. By this they yeild more production of Chitraka root, by using more water and fertilizers.

As per Acharya Sushruta, Chitraka is made up of Agni premominance. It should be collected

from dry, sandy region; where water stress is maximum means form Bhoomi of Agni predominance.

When we use more water, fertilizer and non-sandy soil as per cultivation methods, a question arises; is there any changes, which are not suitable for medicinal purpose? To find out changes, in this present strudy; phytochemical and physiochemical evaluation of Chitraka (Plumbago zeylanica Linn.) collected from wild and cultivated sources will be done.

OBJECTIVES:

- 1. Literary study of Chitraka (Plumbago zeylanica Linn.)
- 2. Study of phytochemical and physiochemical analysis of Chitraka (Plumbago zeylanica Linn.) collectedfrom wild and natural sources.
- 3. Study of phytochemical and physiochemical analysis of Chitraka (Plumbago zeylanica Linn.) collected from cultivated sources.

MATERIALS & METHODOLOGY

a) MATERIALS

1	Chitraka	Plumbago zeylanica L.	Plumbaginaceae	Root
Sr. No.	Sanskrit Name	Botanical name	Family	Part uses

Sr. No.	Sample	Particulars
1	Sample A	specimen of Chitraka root will be self-collected from wild area
2	Sample B	specimen of Chitraka root will be self-collected from cultivated
		sources

b) METHODOLOGY

- ♦ Collection & Authentication :-
- Collection of drug samples (one sample from each area)
- Produrement of samples
- Authentication of samples
- Drying of samples
- Storing of samples
- Coding of sample

Panchabhautik Parikshan will be done by Organoleptic methods.

Pharmacognostical study (Root):-

- Macroscopy
- ♦ Microscopy

PLAN OF WORK

Review of Chitraka (Plumbago zeylanica L.)



Review of pharmacognosy, phytochemistry and other analytical methods



Identification and authentification of Chitraka collected from wild and cultivated sources



Organoleptic study of Chitraka collected from wild and cultivated sources



Microscopic study of Chitraka collected from wild and cultivated sources



Physical analysis of Chitraka collected from wild and cultivated sources



Chemical analysis of Chitraka collected from wild and cultivated sources

STUDY DESIGN:

It is Observational analytical study.

PREVIOUS WORK DONE:

- 1. Bhakuni D.S., Dhar M.L. et al. (1969), Screening of Indian plants for biological activity, Part II, Indian J. Exp.Biol.(7), PP-250.
- 2. Dhawan B.N. and Ssxena P.N. (1958), Evaluation of some indigenous drugs for stimulant effect on the rate uterus, A preliminary report, Indian J. Med. Res. (46), PP-808.
- 3. Santhakumari G. et al.(1978), Anticoagulant activity of plumbagin Indian J. Exp. Bio. (16), PP-485.
- Karnick C.R. et al.(1982), Cultivation trails, pharmacognocy and ethno-botanical investigations of Plumbago zeylanica L. (Chitraka) of the Indian system of medicine, Int. J. Crude Drug R 20(4_, PP-193.
- Kharadi R. et al.(2011), Differntial responses of plumbagin content in Plumbago zeylanica
 L. (Chitraka) under controlled water stress treatment, J. of stress Phy. and Bio., vol 7(4), PP.113-121.

All previous work done is mainly related with its pharmacology, one research work is related with its cultivation techniques and only one research work is of comparision between control and stress water treatment in lab.

None of the research is related with comparative study between full-grown wild and cultivated species. So this research topic is different from previous work done.

Review of literature :-

For this research work review of various literature will done in following.

- 1. **Ancient Review :-** Review of vedic and puran literature about Chitraka (Plumbago zeylanica L.) and will be done.
- 2. **Ayurvedic Review :-** Review of all the concern literature available in Ayurvedic samhita like Bruhattrayi and laghutrayi will be done.
- 3. **Modern review :-** review regarding pharmacogonosy, phtochemistry and physiochemical analysis from modern science iterature and worldwideweb will be collected.

REFERENCE:

- 1. Charaka Samhita, Surtra Sthana, 26/10, edited by Vaidya Yadavaji Trikamji Acharya, reprint edition, Chaukhambha Krishnadas Academy, Varanasi, 2010' 138.
- 2. Sushrut Samhita, Sutra Sthana, 36/4, edited by Vaidya Yadavaji Trikamaji Acharya, reprint 4th edition, Chaukhamba Orientalia, Varanasi, 1980; 158-59.
- 3. Sushrut Samhita, Sutra Sthana, 41/6, edited by Vaidya Yadavaji Trikamaji Acharya, reprint 4th ediction, Chaukhamba Orientalia, Varanasi, 1980; 182-83.
- 4. Sushrut Samhita, Sutra Sthana, 36/5, edited by Vaidya Yadavaji Trikamaji Acharya, reprint 4th ediction, Chaukhamba Orientalia, Varanasi, 1980; 159.
- 5. Charaka Samhita, Vimana Sthana, 8/87, edited bu Vaidya Yadavaji Trikamji Acharya, reprint edition, Chaukhambha Krishnadas Academy, Varanasi, 2010; 275.
- 6. B.S. Somashekhar Andhra Pradesh State Forest Department, Training Manual on Propogation Techniques of Commercially Important Medicinal Plants, March 2002, page 1-2.
- 7. National Medicinal Plants Board, Agro-Techniques of Selected Medicinal Platns, v-1, 1st edition, Teri press, 2008, page 149.
- 8. B.S. Somashekhar Andhra Pradesh State Forest Department, Training Manual on Proporation Techniques of Commercially Important Medicinal Plants, march 2002, page 1-2.
- 9. Sushruta, Dalhanacharya, Gayadasacharya, Sushrut Samhita, Sutra Sthana, 41/6, edited by Vaidya Yadavaji Trikamaji Acharya, reprint 4th ediction, Chaukhamba Orientalia, Varanasi, 1980; 182-83.
- Sushruta, Dalhanacharya, Gayadasacharya, Sushrut Samhita, Sutra Sthana, 41/6, edited by Vaidya Yadavaji Trikamaji Acharya, reprint 4th ediction, Chaukhamba Orientalia, Varanasi, 1980; 158-59.

Experiment:

An Analytical & Pharmacological study of Shigru seed (Moringa Oleifera linn.) with special reference to its antimicrobial activity against waterborne pathogens.

P. G. Scholar - Vd. Vikram Maruti Pansare
PMTS Ayurved College, Shevgaon, Ahmednagar
Mb.9850869767, email: vikrampansare323@gmail.com
Maruti Lawns, At/Post Ghulewadi, Tal. Sangamner Dist. Ahmednagar 422608

Guide: Dr. Lungare S. N., Prof. & HOD, Dept. of Dravyguna Vigyana

ABSTRACT:

In Todays era of industrialization and modern fast life, chances of waterborne disease is more. The maximum chances of waterborne disease is due to unhygienic water and dis management of water intake. In Ayurvedic text book many procedure of water purification are mentioned by which one can achieve the antimicrobial activity.

According to Vagbhata Fruit, Seed, Leaves and Bark are the useful parts for this medicinal purpose. Seed powder of Shigru is used to treat diarrhea which raises a question that whether seeds of Shigru has antimicrobial activity against waterborne pathogens?, which causes diarrhea. Some researcher shows fruit were devoid of any antibacterial activity

Key Words-Shigru, Muller Hinton medium, Nutrient broth

Total No. Of Ref. Used - 11

INTRODUCTION:

Era of miracle drugs started after discovery of woner drug Penicillin in 1928 by Dr. Fleming. After that, new antibiotics were being discovered daily. However, very soon 95% of S. aureus became resistant to Penicillin. Such type of trend seen in many types of pathogens. against so many antibiotics; due to overuse and other causes. Each year these drug resistant bacterial infections causes' unavoidable death and put challenge to miracle drug.

To overcome this problem it is need of hour to screen some newer drugss for their Antibacterial property.

The research resulting from the resolution adopted by WHO and that engaged in by forward-thinking companies and scientists in Europe and Asia have revealed that instead of being a quaint quackery of our forefathers, many herbs possess strong antibacterial qualities, in many instances being equal to even surpassing the power of antibiotics. Given the nature of bacteria it is not unreasonable to assume that new antibiotics would only postpone the problem; bacteria would, in time, becomes resistant to them. Thus, there is great deal of promise in addressing this problem through the use of plant medicines instead of antibiotics.

Pharmaceutical antibiotics are in fact, simple substances not complex, and because of these

bacteria can more easily figure out how to counteract their effects. While plant medicines, which are very complex, exist in powerful balance with each other. Bacteria find it much more difficult to develop resistance or avoid the medicine's impact. Hence, scientists are beginning to unconsciously mimic plant medicine.

Many herbal drug are screened for their Anticacterial properties.

According to Charaka Shigru (Moringa oleifera Linn.) is used ad Krimighna.

According to Vagbhata Fruit, Seed, Leaves and Bark are the useful parts for this medicinal purpose. Seed powder of Shigru is used to treat diarrhea which raises a question that whether seeds of Shigru has antimicrobial activity against waterborne pathogens?, which causes diarrhea. Some researcher shows fruit were devoid of any antibacterial activity.

In recent year, a cationic protein derived, from seed shows promising coagulation activity during water treatment, which indicates its effect on waterborne pathogens.

Hence it is interesting to screen only seed powder of Shigru (Morigna oleifera Linn.) for its antimicrobial activity against waterborne pathogens.

OBJECTIVES:

- 1. To study Pharmacognostic evaluation of seed of Shigru (Moringa oleifera Linn.)
- 2. To study Chemical evaluation of, seed powder of Shigru (Moringa oleifera Linn.)
- 3. To study physical evaluation of, seed powder of Shigru (Moringa oleifera Linn.)
- 4. To study Antibacterial activity of, seed powder of Shigru (Moringa oleifera Linn.)

PREVIOUS WORK DONE:

- 1. Bhatnagar S. S. et. al. (1961), Biological activity of Indian medicinal plants, Part I, Antibacterial, antitubercular and antifungal action, Indian J. Med. Res. 49, PP-799.
- 2. Bhawasar G. C. et. al. (1965), Antibacterial activity of some indigenous medicinal plants, Med. Surg. 5 PP-11.
- 3. Dhar M. L. et al. (1968), Screening of Indian plants for biological activity part I, Indian J/ Exp. Biol. 6, PP-232.
- 4. Singh R. H. et. al. (1974), On the antibacterial activity of some Ayurvedic drugs, J. Res. Indian Med. 9 (2), PP-65.

Previous work was done on Root, Fruit and Leaves for its Antimicrobial effects, some work was done on isolated peptide from seed but no work has been done on whole water extract of seed powder of Shigru, so this research topic is different from previous work.

Review of Literature:

Conceptual study of Shigru (Moringa oleifera Linn.) will be done with the help of following:-

1. Ayurvedic Samhitas :- Charak Samhita, Sushrut Samhita, Vagbhat Samhita and all Nighantus.

- 2. Modern literature: Books related to Pharmacology, Pharmacognocy, Microbiology etc.
- 3. Study from World Wide Web database will be done.

PLAN OF WORK:

Literary study of Shigru (Moringa Oleifera Linn.)



Review of pharmacognosy, phytochemistry and other analytical methods



Authentification of Shigru (Moringa Oleifera Linn.) and collection of seed



Drying and crushing of Shigru (Moringa Oleifera Linn.) seed



Pharmacognostic analysis of Shigru (Moringa Oleifera Linn.) seed and its powder



Physical evaluation of Shigru (Moringa Oleifera Linn.) seed powder



Chemical analysis of Shigru (Moringa Oleifera Linn.) seed powder



Antibacterial Assay

MATERIAL AND METHODS (METHODOLOGY):-

Study Design: Preclinical (In-Vitro) Study.

Materials

Plant material :-

Shigru (Moringa oleifera Linn.) seed will be self-collected from filed. Authentification of Shigru (Moringa oleifera Linn.) will be done by taxonomist.

Plant	Botanical name	Family	Guna	Rasa	Veerya	Vipaka	Useful part
Shigru	Moringa oleifera	Moring- aceae	Laghu, Rooksha, Tikshna	Katu, Tikta	Ushna	Katu	Seed

Bacterial strains:

Collcted from nearest microbiology department.

Sr. No.	Pathogen
1.	E. coli
2.	Giardia lamblia
3.	Salmonella typhi

Methodology: (Phusicochemical study)

- Shigru seed will be self collected, authentication will be done by taxonomist.
- 2. Shigru and seed will be identified and will be analyzed according to API (Ayurvedic pharmacopeia of India) standards.

Pharmacognostic tests:-

- 1) Microscopic analysis
- 2) Powder microscopy
- 3) Organoleptic study

Physical tests:-

- 1) Solubility
- 2) Moisture content
- 3) Ash value
- 4) Extractive values
- 5) PH of 5%w/v suspension
- 6) Identity tests (T.L.C.)

Chemical tests :-

- Qualitative
 - I. Test for alkaloids
 - II. Test for flavanoids
 - III. Test for terpenoids
 - IV. Test for proteins

Methodology (In-Vitro Study)

In vitro Antibacterial study of mentioned drugs by following means will be carried out.

Antibacterial Assay

The effect of Moringa seed extracts on the several bacterial strains will be assayed by Agar well diffusion method. (SOP of Antibacterial Study is attached in Annexure 1)

Collection of Sample : Samples of Moringa seed will be self collected from filed from respective habitat.

Preparation of the Extracts

The seed extracts will be prepared with the help of Soxiet's apparatus and the solvent as water.

Test Microorganisms

The bacteria will be used are

	1.	E. coli
	2.	Giardia lamblia
Ì	3.	Salmonella typhi

Method:

Agar - Well Diffusion Method

Reagents

- A. Muller Hinton Agar Medium (1 L)
- B. Nutrient broth (1L)
- C. Standard antibacterial agent

Sample size: Every bacterium will be treated with extract of Moringa seed and the experiment will be repeated for different concentrationsn of trial drugs.

Observations and Result:

Observations will be noted and presented in the form of Photographs, Tables and Graphs. 'z' test will be applied for analysis of data. Inference will be drawn on the basis of analysis.

REFERENCE:

- Stephen Harrod Buccher, Herbal Antibiotics, 1st edition, Storey Books Publication, United State, 1999, PP-2
- 2. Stephen Harrod Buccher, Herbal Antibiotics, 1st edition, Storey Books Publication, United State, 1999, PP-19
- 3. Stephen Harrod Buccher, Herbal Antibiotics, 1st edition, Storey Books Publication, United State, 1999, PP-20
- 4. Agnivesh, Charaka, Dridhabala, Chakrapai Datta, Charaka Samhita, Sutra Sthana, 2/23, Edited by Vaidya Yadavaji Trikamji Acharya, Reprint edition, Chaukhambha Sanskrit Sansthan, Varanasi, 2014; 26.
- 5. AshtangSangraha, Sutra Sthana, 14/6, edited by Dr. Shivaprasada Sharma, 3rd edition, Choukhamba Sanskrit Series Office, Varanasi, 2012; 127
- 6. AshtangSangraha, Sutra Sthana, 14/6, edited by Dr. Shivaprasada Sharma, 3rd edition, Choukhamba Sanskrit Series Office, Varanasi, 2012; 505
- 7. Dhar M.L. et al. (1968), Screening of Indian plants for biological activity part I, Indian J. Exp. Biol. 6, PP-232
- 8. Kevin Shebek, Allen B.S., et al., Langmuir, The Flocclating Cationic Polypeptide from Moringa oleifera Seeds Damages Bacterial Cell Membrances by Causing Membrane Fusion, 2015, 31, 4496-4502.
- 9. http://www.ayusoft.cdac.in/pshome/apps/en/src/Articles/DravyaRasabhishajya/ Standards_for_varous_drugs.htm(assessed on 3/3/2014)

- Ananthnarayan and paniker's Textbook of Microbiology, Universities press (2011). Page no. 196, 289, 315
- Kavitha, D. In vitro and in silico approaches for characterising novel antimicrobials from couroupita guianensis aubl. [Thesis] Avinashilingam Deemed University For Women. 4-Feb-2011. available from: http://hdl.handle,net/10603/1458

Further references will be added during the study.

Annexure 1

PREPARATION OF THE EXTRACTS

The seed extract will be prepared using DI water as a solvent. 10g of the sample will be homogenized wilth 100ml of DI water. The crude preparation will left overnight in the shaker at room temperature and then centrifuged at 4000rpm for 20 mins. The supermatant containing the plant extract was then transfer to a pre weighted beaker and the extract was concentrated by evaporating the solvent at 60 O c. The crude extract will be weighted and dissolved in a known volume of Dimethyl sulphoxide, to obtain a final concentration of 20mg/5ul.

AGAR-WELL DIFFUSION METHOD

PRINCIPLE

The antimicrobials present in the plant extract are allowed to diffuse out into the medium and interact in a plate freshly seeded with the test organisms. The resulting zones of inhibition will be uniformly circular as there will be a confluent lawn of growth. The diameter of zone of inhibition can be measured in millimeters.

REAGENTS

1. Muller Hinton Agar Medium (1L)

The medium will be prepared by disovling 33.9 g of the commercially available Muller Hinton Agar Medium (HiMedia) in 1000ml of distilled water. The dissolved medium will be autoclaved at 15 lbs pressure at 121 0 C for 15 minutes. The autoclaved medium will be mixed well and poured onto 100mm petriplates (25-30ml/plate) while still molten.

2. Nutrient brogh (1L)

One liter of nutrient broth will be prepared by dissovling 13 g of coomerically availbel nutrient medum (HiMedia) in 1000ml distilled water and boiled to dissolve the medium completely. The medium will be dispensed as desired and sterilized by autoclaving at 15 lbs pressure (121 0 C) for 15 minutes.

3. Standard antibacterial agent.

PROCEDURE

Petri plates containing 20 ml Muller Hinton medium will be seeded with 24hr culture of bacterial strains. Wells will bb cut and 25 ul of the plant extract (namely aqueous extracts) will be added. The plates will then incubated at 37 0 C of 24 hours. The antibacterial activity will be assayed by measuring the diameter of the inhibition zone formed around the well (NCCLS, 1993). Standard antibacterial agent disc will be used as positive control.

Clinical:



A single case study on Constipation

Prof. P. S. PAWAR¹ MD (Kayachikitsa), Ph.D., Prof. S. S. Pund² MD (Kayachikitsa), MD (Samhita), Ph.D., P.R.Joshi³ MD (Dravyaguna), PGDMB, Ph.D, PD, D.litt (H.c).

1. Retired Prof., G.S.Gune Ayurveda College Ahmednagar, Former Dean MUHS University Nashik.

2. HOD Dept. of Samhita, G.S.Gune Ayurveda College Ahmednagar

3. HOD Dept. of Dravyaguna, G.S.Gune Ayurveda College Ahmednagar

P. R. Joshi - Email-ayurpravin@yahoo.co.in Mob.no.9403847270. Dr. P. S. Pawar - Mob.no. 9422737722 Prof. S.S.Pund - Email: drsanjayspund@gmail.com Mob.no. 9822316642

Abstract

Constipation is considering as G.I. tract disease which is difficult to treat .Patient of 61yrs. old came in O.P.D. for constipation, anorexia, distention of abdomen, thirstiness. We classified this disease in the category of dietary habit and daily routine of the patient. He was habitual for medicine which have the action of laxative and purgative. We had given the appropriate treatment according to *charakasamhita*. At the end of the three months treatment by using internal medicine result came that along with constipation about symptoms totally cured.

Key words(3)- Constipation, Triphala rasayan, Charaka samhita

Introduction

In day today practice we see that above 60 yrs. patients came for us for the complaints of loss of appetite, constipation, weakness and laziness. He was retired government person after that he have no work so constipation develops due to constipation above symptoms increased. Afterinterrogation with patient he said that I used all drugs for constipation but no relief. Now a days it not acts properly so I approached to you. Then we discussed and finally we come to conclusion that we will use *Triphalarasayan* for this patient.

Case report

Basic information of the patient

Age-61 years

Sex-Male

Religion -Hindu

Status-Retied middle class.

Family history-No any major complaints.

Patients History

No history of DM, HTN

CVS-NAD

CNS-NAD

History of present illness

Chief complaints- Difficulty for passing the stool.

Minor complaints (Anushangikalaxana)

Adhmana (Distention of abdomen)

Loss of appetite

Thirstiness

History of Past illness

At the age of 35 yrs. Typhoid fever, at the age of 40 corn of the foot excised.

Treatment history

Since one year patient was undergone laxative and purgative drugs to cure the constipation.

Prakrutivinichaya of the patient

Vatapittatmaka

Pulse-76/Min

B.P.-120/86 mm of Hg.

Respiration-16/min.

Criteria for assessment

Daily motion frequency- Not to feel heaviness in abdomen.

Stool-Semisolid.

Increase appetite.

Distended abdomen is reduced.

Thirstiness is reduced.

Patient feels healthiness.

Treatment protocol

Over all 90 days treatment given as below.

Triphalarasayan (Sloka 41-42, CharakachikitsaRasayanatritiyapada)

After digestion of food in night i.e. early in the morning 500 mg *Haritaki powder* with Luke warm water before meal. 1 gm. *Vibitaki*after meal. After evening 2gm. *Amlaki*with honey and ghee for oral use for 3 months.

Probable pathophysiology and its management

S.no.	Rogaprakruti	Sampraptighataka	Samptraptivighatana
1.	Dosha	Vatapradhanta	Amlaki and Haritaki
2.	Dushya	Samana and Apanavayu	Haritaki and Amlaki
3.	Agni	Manda	Improved by Vibhitaki
4.	Srotas	Purishavahasrotas	Amlaki, haritaki, Vibhitaki
5.	Srotodusti	Sanga	Triphala
6.	Udbhavasthana	Bhruhdantra, Gudashaya	Haritaki, vibhitaki
7.	Roga	Malavasthamba triphalarasayana	Vatavyadhichikitsa, oral medicine
8.	Upadrava	Arsha,Grahani,parikartika, Gudabhramsha	Vatanulomana, grahi drugs, vatakaphanashaka
9.	Sadhyasadhytatva	Kruchrasadhya	Madhya avasthachikitsavyadhi.

Properties of the drug

Haritaki-

Rasa-Lavanrahitapancha rasa, kashaya mainly.

Virya- Ushna

VipakaMadhura

Vibhitaki

Rasa-Kashaya

Virya-Ushna

Vipaka-Madhura

Amlaki

Rasa-Lavanrahitapancha rasa, amla mainly

Virya-Sheeta

Vipaka-Madhura

Discussion

As *vatadosha* is pradhana in constipation there is administration of *Amlaki* with ghee reduces *vatadosha* as *shaman chikitsa*. As *Amlaki* is vyasthapana drug and Haritaki is pathya drug so it acts on Samana andApanavayu, it acts especially on mucous membrane of *gudashaya*. Due to *ushnaguna* of *Vibhitaki*the fragments of fecal matter lower down in *gudashaya* and as we know *Haritaki*s having same property in this way by administration of this drug in the form

of *rasayanachikitsa* it builds up the immunity along with release the constipation. Here the thought relates to treatment as only using *Thriphalachurna* powder with Luke warm water have minimal effects as per the patient so we used this drug in different form as discussed above.

Conclusion:

As selected this treatment modality is effective in sign and symptom, then reducing constipation and its allied symptoms too. Thus permutation and combination of the drugs with respect to Ayurveda science the drug not only reduce constipation but also increases immunity to all over body. There is scope for researchers for further study.

References:

- 1. Agnivesha, CharakaSamhita, Chikitsa, Adhaya 1/3 pada/41, 42, Chaukhambabharti academy, Varanasi 1992, pg.no.42.
- 2. S. S. Pund, Kayachikitsa, Shantnuprakashana, Annavahasrotas, Ahmednagar, 2003.
- 3. P. V. Sharma, Dravyaguna Vijnana, Chaukhambabharti academy, Varanasi, 2009

Clinical:

Critical study on consideration of Kaphamedavatahara drug with respect to obesity.

Prof. P. S. Pawar¹ MD Ph.D(Kayachikitsa), Prof. S. S. Pund² MD (Kayachikitsa), MD (Samhita), Ph.D., P. R. Joshi³ MD (Dravyaguna), PGDMB, Ph.D., PD, D.litt(H.c). Ph.D., Dr. Manisha S. Pund⁴.

- 1. Ex. Prof., G.S.Gune Ayurveda College Ahmednagar MD, Ph. D. (Kayachikitsa), 2. HOD Dept. of Samhita G.S.Gune Ayurveda College Ahmednagar, 3. HOD Dept. of Dravyaguna G.S.Gune Ayurveda College Ahmednagar,
- 4. Director, Yogadan super speciality research and training center for piles, fistula and panchakarma.
 - **Dr. Manisha S. Pund. -** Mob.no. 9881931735, Email: drsanjayspund@gmail.com, **Dr.P.S.Pawar**, Mob.no. 9422737722, **Prof. S.S.Pund**, Mob.no. 9822316642, **Pravin R. Joshi**, Mob.no. 9403847270.

Abstract:

Ayurveda is the ancient therapy have great exposure to treat the patients who have not relief from other pathy. The obesity is one of the disease which defined in Charaka samhita as ashtonindita (8 traits). The drug given by Yogaratnakara was used on 100 patients out of which 50 patients were selected for clinical study. We had given specific formulation of Yogaratnakara and results were seen which were useful in obesity.

Key words: (3)-Obesity, Ayurveda, Yogaratnakara

References: 4 Introduction:

There are eight body traits this are considered to be avoided. These pairs are tallness, shortness, hairiness and hairlessness, black and white, obesity and leanness all in the extremities. Here obesity deserves a special attention to treat. Mainly the obesity patient have shortened life, difficulty in movement, difficulty in sexual intercourse, tiredness, body odor, excessive sweating, severe hungriness and thirstiness. Obesity can cause the tissue in asymmetric in pairs, strength and shortens life span and the individual become averse to physical activity. Excess fat hampers locomotion and sexual intercourse which is aggravated by reduction in semen. Body odor is an outcome of accumulation of fat, the association of fat with kapha and its diffusion and excess which made increase in sweating as digestive power is strong in this individual's vata is more active in stomach and cause intense hunger and thirst. Food is digested quickly and triggers to eat more. One can say that the digestive fire and vata combine to burn the subject as like in forest. The obese have marked accumulation of fat in buttock, belly and breast.

The aim of the treatment is to restore the balance in proportion of muscle among tissue because the resultant firmness protects from disorders. Proper balanced diet should be there to withstand hunger, thirst, heat, cold, and physical activities. Their life process including digestion are also evenly balanced.

Criteria of assessment of the patients

- 1. Hip and Waist circumference in centimeters.
- 2. Body weight in Kg.
- 3. Lightness of the body.
- 4. Excessive thirstiness disappearance.

Pathophysiology-

Phalatrika and Trikatu powder admixed with eranda taila (Castor oil) and saindhava should take orally up to six months. It is useful in Kapha, Meda, Vata comes in normal phase.

Administration

Triphala-1gm.

Trikatu-1/2 gm.

Eranda taila -10 ml.

Saindhava lavana -125mg.

Make a paste of above all and take1 glass of luke warm water along with this drug.

Duration - 6 months.

Time- Early in the morning.

Age group-30 to 60.

Results and discussion

1. Dosha wise categorization of the patients-

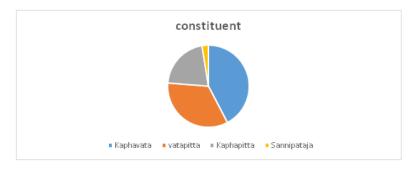
Kapha vata-20

Vata pitta-16

Kapha pitta-10

Sannipataja-04

Vata kaphaja patients are more than sannipataja patients and kaphapitta constituent.



VOL. THIRTY THREE - 04 ISSUE NO. 132 OctDec 20'	VOL. THIRTY THREE - 04
---	-------------------------------

2. Age wise categorization

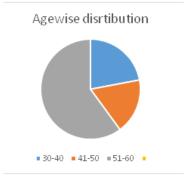
30-40 age group-11

41-50 age group-09

51-60 age group- 30

Male patients-22

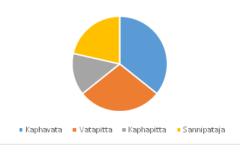
Female patients 28



3. Measurement of reduction of size in circumference

Prakriti	Up to 60 cm.	Up to 50 cm.	Up to 40
cm.			
Kapha vata	5 cm.	3 cm.	4 cm.
Vata pitta	4 cm.	2.5 cm.	2.5 cm
Kapha pitta	2 cm.	1.5 cm.	1.5 cm.
Sannipataja	3 cm.	2.7 cm.	2 cm.





This chart shows that in six months average measurement reduction of abdominal girth.

VOL. THIRTY THREE - 04	ISSUE NO. 132	OctDec 2017
------------------------	---------------	-------------

Weight reduction

Up to 100- 120 kg. No. of patients	Mean weight loss	Up to 80-100 kg. No. of patients	Mean weight loss	Up to 70-80 kg. No. of patients	Mean weight loss
or patients	18-20 kg	Q	12-15 kg.	6	7 -10 kg.
3	10-20 kg	5	12-15 kg.	3	7 - 10 kg.
2		4		3	
2		3		2	

Probable mode of the action

Trikatu has a property of karshana as this drugs mainly acts on medovahisrotases. Triphala drugs are having kleda shoshana gunadharma (action) as well as mild purgation clears the srotorodha and erenda is considered as vatahara dravya. Saindhava lavana has a property as yogavahi which results in rapid action of the drug.

Conclusion:

Obesity is the disease which is difficult to treat there are two basic folds of treatment which is Santrapana and Apatarpana. Thus the topic is further open for research scholars and scientists.

Note:

This work carried out in Yogdan hospital Balikashram, Ahmednagar. The legendary physicians given guidelines whenever difficulty arises with prior permission from authority. The contribution of the topic is for social aspect.

References:

- 1. Legacy of Charaka, M.S. Valianthan, Orient Longman private limited, Chennai 2004.
- 2. S.S.Pund, Kayachikitsa, Shantnu prakashana, Ahmednagar, pg.no. 548, 2003.
- 3. P.V.Sharma, Dravyaguna Vijnana, Chaukhamba bharti academy, Varanasi, 2009
- 4. Agnivesha, Charaka Samhita, Chikitsa, Adhaya 1/3 pada/41, 42, Chaukhamba bharti academy, Varanasi 1992.

Review:

Importance of Ashtauvidha Aahar Vidhi Visheshayatan In Healthy Living

Vd. Mukul R. Tamhane, M.D.(Ayu.Scholar), Swasthvritta Department.
Vd. Arti R. Firke, Asso. Professor, Swathavritta Department.
E Mail - mukultamhane6606@gmail.com, arfirke@gmail.com
Phone No.- 9552625353. 8888845674.
College of Ayurveda & Research Centre, Nigdi, Pune-44.
University- Maharashtra University of Health Science.

ABSTRACT

The main aim of Ayurveda is to maintain the health in a healthy person and to cure the disease. Food is the prime requirement of every living. Modern science described Aahar in terms of its nutritional values of vitamins, minerals, energy of balanced food. Ayurveda has explained this diet in different view including Ashtauvidha Aahar Vidhi Visheshayatan, Aharvidhividhan, Vishambhojan etc. Ayurvedic dietetics places greater emphasis on processing food, its compatibility and rules of food consumption.

The directions for taking food are equally important and emphasized in Ayurveda. Charaka Samhita describes the eight principles of Aaharvidhi called visheshayatan to describe the importance of different factors to be considered while consuming Aahar. It is also termed as Dietary standards or Dietary rules of eating.

The characters of these (factors) having good or bad results are mutually benefactors. One should try to understand them and thereafter desire for the wholesome only. Food or any other thing which is liked but is unwholesome and with unpleasant consequences should not be used by ignorance or carelessness.

According to Ayurveda, importance of Ashtauvidha Aahar Vidhi Visheshayatan in healthy living is explained in this article.

KEYWORDS: Aahar, Ayurveda, disease, Food, Health, Person. [6]

REFERENCES: 6 **INTRODUCTION**:

Ayurveda has emphasized diet as one of the essential part of healthy life. No other science has described the unique effect of diet as thoroughly, as Ayurveda described thousand years ago. Ayurveda has given detail discipline and process to take the Aahar for an individual and in general both. This discipline is titled as Aahar Vidhi, where all the law about the diet and the drinks are given. The main aim of Ayurveda is to maintain the health in a healthy person and to cure the disease. Food is the prime requirement of every living. In Ayurveda, Aahar is mentioned as one among the three Upasthambhas. It means that it is one of the fundamental principles ahead which gives health.

Three Basic Factors

1) Aahar, 2) Nidra, 3) Bramhacharya. - are called as Trayopasthambha.

Aahar is utilized for replenishment of daily wear & tear of all body entities, for generation of energy, to develop immunity,to carry out activities. If food is taken in proper way, it achieves all benefits.

Aaharprashasti- benefits of Aahar

प्राणाः प्राणभृतामन्नमन्न लोकोऽभिधावति ।

वर्णः प्रसादः सौस्वर्य जीवितं प्रतिभा सुखम।।

तुष्टिः पुष्टिर्बलं मेधा सर्वमन्ने प्रतिष्ठीतम। (च. सू. २७/३४९)

All living beings in the world requires food. Food is the vital breath of living beings. Aahar is not only needed for the continuity of life, but also for complexion, good voice, clarity, intelligence, longevity, satisfaction, happiness, strength, nourishment and intellect. The worldly activities done for livelihood, the Vedic once for attainment of heaven and those for emancipation also depend on food.

Charkacharya said that it is the Aahar which maintains the equilibrium of Dhatus and help in promotion of health and prevention of disease. According to Ayurveda the Aahar which nourishes both the mental and physical built is called 'balanced diet'.

Charaka Samhita describes the eight principles of Aaharvidhi called Aharvidhi visheshayatan to describe the importance of different factors to be considered while consuming Aahar. It can be also term that Dietetics in Ayurveda or Dietary rules of eating.

ASHTAUVIDHA AAHAR VIDHI VISHESHAYATAN-

तत्र खल्विमान्यष्टावाहारविधिविशेषायतनानि भवन्ति । तद्यथाप्रकृतिकरणसंयोगराशि देश कालोपयोग संस्थोपयोकत्रष्टमानि भवन्ति । (च. सृ. १/२१)

The eight principle are

1)	Prakriti	Nature of food
2)	Karana	Sanskar means way of preparation
3)	Samyoga	Combination of two or more
4)	Rashi	Quantity of food
5)	Desha	Habitat and climate
6)	Kala	Time
7)	Upyoga-Sanstha	Rules to follow
8)	Upyokta	The consumer

As the food is like medicine which balance our Dosha, Dhatu as well as Malas, if consume in proper way. Otherwise food becomes harmful to create many diseases. With this concept of Aahar equally importance is given to the discipline of taking food.

The life has become so complicated and fast that nobody has time to spend for proper eating. It gave rise to fast food, packed food, junk food etc. Also people have not solitude, short recess time. All this may develop bad habits of eating. The health conscious people know about- what to eat? But not -how to eat? Ultimately it affects the health. So there is need of time to explain dietary standards of eating called Ashtauvidha Aahar Vidhi Visheshayatan for proper intake of Aahar.

ASHTAUVIDHA AAHAR VIDHI VISHESHAYATAN(Eight aspects of Dietetics):

Ayurveda has given more importance to eight factors regarding food, which are called as Aahar Vidhi Visheshayatan, means the factors responsible for wholesome and unwholesome effect of the Aahar and methods of Aaharsevana (Special rule for diet intake). These eight factors should be considered before taking food. 1. Prakriti 2. Karana 3. Samyoga 4. Rashi 5. Desha 6. Kala 7. Upyoga- sanstha 8. Upyokta.

1) Prakriti (nature of food) -

It means natural quality of food, Depending on whether the food is easily digestible or not. Food can be classified in heavy (guru) and light (Laghu) qualities.

The food which is easy to digest called Laghu Aahar eg. Green gram, Common Quail,Rice and Vegetables. The food which takes a time to digest is called Guru Aahar eg. Black Gram, Meat. by its nature is heavy to digest and hence those having less digestive capacity should not take it. This is the basic nature of the food and while eating we must take this into consideration.

Rice, Chapati(freshly prepared flat bread), Vegetables, green salad or curry and pickles are the ingredients of wholesome Indian diet, Taste and method of preparation differs in every state and region in India. Food cooked with compassion and love in a good surrounding with positive attitude nourishes the body.

Nowadays, many hybrid foods are in use e.g. Wheat, Rice, Sugarcane, Watermelon, Mango etc. but in hybrid food articles all the natural qualities are not present. All other factors depend on Prakriti of food only. The quantity, sanskar, time of consumption all is depends on nature of food. So it comes first in Aaharvidhi Visheshayatan. Same as Prakriti (nature/constitution) of the consumer should take in consideration. Depending of constitution of the person his Aahar should be selected.

2) Karan (Sanskar)

It means processing of substances which leads to alteration in the inherent properties of substances. Generally cooked food is better for nutrition. Some food substances like fruits and salads are better taken as uncooked. Food cooked on natural wood or coal fore has better taste than cooked on electricity or gas. Microwave cooking destroys Prana in the food. This modification is brought about by application of heat (vaporization, sublimation and

distillation), storing, maturing, flavoring, impregnation, preservation, roasting, frying, baking, direct heating on fire, preparing by tandoor roasting, barbeque, mixing, roasting, blending, grinding drying, churning, washing, cleaning, boiling,

During formation of substance a particular mode of combination of panchabhuta impart particular properties to the drug or food.By processing, changes are done in qualities.

For eg.

- 1) Rice washed with water, then cooked by boiling, transform the qualities of raw rice from heavy to light.
- 2) In the same way lightness of red rice is enhanced by cooking.
- 3) Vrihi which is heavy to digest, becomes light when transformed in to Laja after frying,
- 4) By churning, oedema aggravating property of curd is transformed in to oedema alleviating, even though fat content is intact.

3) Samyoga (combination of two or more)

Samyoga is the combination of two or more substances. This results in manifestation of specific qualities, which are not present when present singly. Eg. the combination of Honey and Ghee, Honey and Ghee taken alone is wholesome to the body but combined together, Honey and Ghee in equal quantity they become toxic. Combine sour fruits with milk or curd is not beneficial.

So we can say that though Samyaoga is very useful but it may be harmful too. Fish and milk, fruit salad, Banana and milk all these are unwholesome diet as per Ayurveda. Taking Milk and fish together is unwholesome diet as fish is ushna viryatmak and milk is sheet viryatmak. Taking together is incompatibility diet (Viruddhahar) leads to vitiation of Rakta (blood) and Srotorodha (obstruction of body channels) and formation of many disease.

A few examples of its usefulness are Guda and Curd in combination are more useful as it is having Snehana ,Hridya, Tarpana and Vataghna effects. Milk with Ghee used regularly is the best Rasayana.

4) Rashi (Quantity)

Rashi means Matra / Quantity.

Rashi is the quantity of food to be taken. It is of two types i.e. sarvagraha, the quantity of food taken in its entirety and parigraha i.e. quantity of each of its ingredients. A person should have his diet in proper amount.

Here again, Consider the guru and Laghu qualities of the substance that are taken. The quantity of food depends on digestive fire. There are no fix criteria for the amount of food according to age, sex etc.

According to Vagbhat half of the stomach is to be filled with solid food, one quarter with liquids and another quarter should be kept vacant for the free movement of Vata. Two types of Aahar Matra, 1) Heen Matra & 2) Ati Matra. The diet which is less than required quantity is called Heen Matra. It is seen to result in the impairment of strength and complexion, in the

impairment of functions of life, energy, vitiation of the body elements and in the generation of the eighty kinds of Vata disorders. The diet which is excessive in measure (Ati Matra) is Considered as Sarvadosha prakopka, it aggravates all the Doshas, Diet taken in proper quantity balances all Tridosha.

5) Desha (Habitat And Climate)

Desha is considered as Bhumi as well as Deha (body). Bhumi desha and Deha desha. both are the lands which are to be considered while consuming food. The Deharoopa desha is considered, the Doshas are distributed in three different regions of the body. The first region of the body which extends from Hridaya to complete upper portion is place of Kapha Dosha, the second region extending between the Nabhi and Hridaya is place of Pitta Dosha while the third region extends from Nabhi to complete lower portion is place of Vata Dosha.

Place related to habitat. It may be the place of growth, movement of substance in a particular locality, like drugs grown in dessert are light, those grown in Himalayas are potent, the Desha can be divide into three.

These categories of bhumi desha are Jangla, Anupa and Sadharana desha. Charaka says that in the Jangala Desha the Vata and Pitta are in predominance, where as in the Anupa Desha the predominance of Vata and Kapha is witnessed. In the Sadharana Desha the predominance of all three dosha I.e. Vata, Pitta and Kapha.

Wholesomeness of diet also depends on the desha, because if a person is in Rajasthan, he can easily digest a higher amount of Ghrita and other Guru Dravyas but when the same person have been in south India, he cannot digest the same type of food items. Use of dry and sharp substances in deserts and unctuous in Marshy land is having antagonistic effect.

6) Kala (Time)

Means time or period.when previous food has been properly digested then only the next should be consumed. One must also change the type of the food as well as its quantity and quality depending on the seasonal changes. The main meal must be taken between 11 to 1 in the afternoon, which is pitta time. Kala is used in two senses. Nityaga kala & Avasthika Kala.

Daily(Nityaga)- In the form of day and night one should consume food two times a day according to rules. Considering the doshawastha of the day as well as ritu, Aahar should be taken according to Dincharya and Ritucharya, which help the body function to acclimatize with the external environment & keep healthy.

Conditional (Avasthika)- According to disease one should consume food which is conducive the disease, E.g. in Naveen Jwara, Langhana should be done for 7 days, but if Jwara is Jeerna Ghrit is indicated. Avasthika Kala is considered to be Vyadhi Avastha.

In health one should see his age & consume food accordingly. Age can be divide into baal (young), madhyama (middle age), vruddhapya (old age). Even the quantity of food should be decided according to age of person.

7) Upyoga-Sanstha (Rules to follow)

Means for eating. Food must be consumed while it is hot. This will naturally increase the digestive fire. Meals must be taken in relaxed, calm and cheerful atmosphere. One should not eat, when the person is nervous, anxious, angry or in disturbed state of mind. Similarly eating while talking, laughing, thinking or watching television, too slowly or too rapidly is also not advisable. It is better if we concentrate on the food only with the thought that this food is going to benefit my body and mind. Drinking too much water or any other liquid immediate after eating is not advisable. After eating food one can drink water after half an hour.

Make eating as ritual. It is recommended to take shower and wear clean clothes, prior to cooking. Guest is God. First the food should served to him and children. Chanting of mantras & offering prayer to God is always advisable. When you finish the food, show gratitude towards the person who has given you the food.

8) Upyokta (The Consumer)

The consumer is the person who makes use of food. All the food whether it is healthy or unhealthy is depends on Upyokta. As every food is a medicine but whether it is wholesome or unwholesome for the upyoktas. Every person who must take in to consideration. His own constitution, capacity of his digestive power, time of day, the season & whether the previously taken food has been digested or not

Satmya- This means thing (food, herbs, atmosphere etc.) which is beneficial to the body and mind even after it's long term use certain substances become habitual to the body after its long term use. This is called as Okasatmya.

This factor is not considered separately by VridhaVagbhata, he count this under Upyoga Vyavatsha, So he had given seven Vidhi Vidhan, in place of eight of Charaka Samhita. These are the dietetic rules as per Charak Samhita for healthy as well as unhealthy persons. Similarly, Sushruta describes 12 factors to be considered during the consumption of food and termed them Dvadasha Asana Vidhi. These are mentioned especially for unhealthy persons. As per condition, one should select his food.

General rules of eating-

- 1) Eat only when your body is naturally hungry. Otherwise improperly digested food mixes with food product and aggravates all doshas.
- 2) Eat warm and unctuous food. It is easy to digest, tasty, nourishes the body and promotes strength.
- 3) Do not eat until your stomach has finished working on the previous meal.
- 4) Do not eat food while sitting in front of Television, Talking or playing on mobile phone & watching horror movies or any other serials. Eat with concentration without talking & laughing.
- 5) Do not eat when you are very emotional, angry, worried or upset at this disturbs Agni.
- 6) Avoid incompatible food combinations. Otherwise person may get afflicted with diseases like skin disease(eg. Kushta, visarpa)

- 7) Do not eat over or under. If food is taken in proper quantity it prolongs life, it does not aggravate doshas.
- 8) Do not drink iced water before, during or after a meal. Coldness shocks the body, also inhibits Agni and cause Aama. Can drink normal water during taking food and half hour after lunch and dinner.
- Avoid the food which you don't like as they won't satisfy the mind. Eat in desired place with desired articles.
- 10) Do not eat in hurry or too slowly..
- 11) Avoid eating leftover or reheated food as it will have little Prana.
- 12) Eat wholesome foods that are pleasing to the senses.
- 13) Be great full to the food you eat. Enjoy it in an atmosphere of respect and love.

Importance Of Ashtauvidha Aahar Vidhi Visheshayatan

The practical importance of Ashtauvidha Aahar Vidhi Visheshayatan is proven factor for long time, but today, it is the time to prove it again with some new methodology. If our science can contribute in preventing disease originated by faulty dietary habits, then it is obligation to study the topic throughly with the help of research parameter. Today people are very little aware about the Principles of diet. So each and everyone should be educated about the dietary standards, to prevent lifestyle disorders.

In this concept of Aahar,equal importance is given to the dietary standards as well as the dietary rules. As the food is like medicine which balance Dosha, Dhatu as well as Malas, if it consume in proper way.

CONCLUSION-

So, for healthy and disease free life, one should have to follow the dietary standards as per Ayurveda i.e. Ashtauvidha Aahar Vidhi Visheshayatan. Ashtauvidha Aahar Vidhi Visheshayatan is very important for the maintenance of health and healthy living.

REFERENCES-

- 1) Prof. Priyavrat Sharma, Caraka Samhita, vol 3, publisher- Chaukhambha orientalist, Varanasi, sixth edition, 2001, pages- 315 & 316.
- 2) Prof. Priyavrat Sharma, Caraka Samhita, vol 1, publisher- chaukhambha orientalia, Varanasi, seventh edition, 2001, pages 305 to 308.
- 3) Dr. Mangalagowri v. Rao. M.D. (Ayurveda.), A text book of 'Svasthavrtta', publisher-Chaukhambha orientalia, Varanasi, Reprinted edition-2014, pages- 79 to 87.
- 4) Dr. Sunanda Ranade, Ayurvedaic Indian cooking, publisher- international academy of Ayurveda, revised third edition- January 2001, pages- 40 to 43.
- 5) Vd. Jadavaji Trikamji Acharya, Charaka Samita with commentary by Chakrapanidatta, Publisher-Chaukhambha Prakashan, 2011, Varanasi, pages-174.
- 6) Prof. Priyavrat Sharma, Caraka Samhita,vol.1, publisher- Chaukhambha orientalist, Varanasi, edition-2014, pages- 225.

Oct.-Dec. - 2017

Philosophy:

Ayuvedic Niti Shastra

Dr. Manisha Kulkarni, Ph. D. Scholar Tilak Maharashtra Vidyapeeth Deemed University, Pune - 411 009 **E-Mail :** manisha73kulkarni@gmail.com **Mobile No. :** 9890156698 C/16, Suyoga Aditya Residency, Bibwewadi Gaon, Pune - 411 037

Introdction:

Ethical, political. economical, virtual properties can be achieved by Ayurvedic Dincharya and Rutucharya regimen. All ayurvedic compendia like Charakacharya, Susrutacharya. Vagbhatta elaborate these facts. When we follow Dincharya and Rutucharya our health becomes ethical, fine and best.

Aim: To study Ayuvedic Grantha for niti shastra

Ayurvedic Dincharya:

In Vagbhatt Samhita, 2nd chapter, he describes about Dincharya. When we get up early in morning then we become healthy. Then after cleaning mouth, we should take some ayurvedic medicinal plants and chew it. It is danta dhavan (dental cleaning), it is useful in Ajirna (indigestion), Vanti (vomiting), Shwas (breathless), Kas (cough), Jwar (fever), Ardit (paresis), Vayu, Trushna (thirst), Asya- pak (stomatitis), hruday rog (heart diseases), Netra rog (eye diseases), Shirorog (diseases of head), Karna rog (ear diseases), etc. Apply rasanjan in our eyes daily. Afterwards Nasya (enrhine), Gandush (gargling), Dhumrapan (smoking) and Tambul (bittlenut leaf chewing). Daily massage with oil, and then take bath. This bathing keep away Vardhakya (oldage), Shram (tiredness) and Vaatvikar (nerves disorders). Then perform exercise, the body gets light, activeness is increased, body gets strength. Those who are suffering from Ajirna, Vaatvikar, and old people and chidren should not do exersices. One must apply utne (Udvartana) to body. Due to this Kapha and Meda decresases and skin gets cleaner.

After digestion of previous food, eat timely. Do not resist 13 vegas (urges).

Now as Ayurvedic niti says Dharmacharan. Make good freinds, do leave away from bad peoples. Do not do Himsa (hurt), Chori (theft), Vyabhichar (adultary), Chahadi, Apriya (undesirable), Astaya (non stealing), no Pralap (talkative) and Paap (sin). Help the ill, poor, sad. Dev, Brahamin, Vrudha (old), Vaidya, Raja (king) and Athiti (guest) pujas. Be a samdushti.

Make others happy. Do not be indriyaadhin. Nails,hair and beard, mustaches must be cutted. Nice and sober colthes must be worned. Bow to Pipal. Brahamin, old peoples and flags (dhwaja).

We must not laugh without closing mouth and do not yawn and sneeze. Do not do bad body guestures. Kayik, vachik, manasik kriya must be done lightly. Do not lie down in garden near banyan tree in chowk, donot carry huge luggages. To sell liquor, to make it, to give or drink liquor must be prohibitted. Eastern wind, Dawn rays, rain, sneezing, sleeping, sex, must not be done. In pradosh kal do not sleep, eat or study. Do not say secrets to women. Pity all peoples, give dan (donation). Bodyly, mind and Mental works not be extended. We must think about who we are, what we are, where to go, what should we do, This is sadachar (good behaviour) niti, If we do this, we get dirghayushya (long life), health, wealth. fame and salvation (mukti).

Rutucharya (Seasonal conduct):

From magha to pausha, there are 6 rutus in India. They are Shishir, Vasant, Greesma, Varsha and Hemant. The first three always come in uttarayan which are also called Adan . That is not giving health, strength.

The sunrays and wind are wide, hot and ruksha (dry). They make land very bad and katu, kashay and Tikta are increased in human body. In adan, agni shakti are incressed. The varshadi rutu comes in Dakshinayan. As they give health and strenght. They are called Visarga kal. Because of moonlight the strenght of sun and cold, wind and rain, the tempurature of earth becomes less and madhur ras increased. In cold rutus, the strenght of peoples are increased. In hemant rutu, bodily skin pours gets shrunken, so the jatharagni (gastric fire) is increaed. So, in this season one must eat madhur, aml, and lavan Rasa.

In this season, the night is longer so at dawn time, one is hungry. So after bathing one must take break-fast for decreasing the hunger. Massage body with oils and do martial arts with wreslters. Then bath with Shikekai, Kesar, Kasturi, Maus rasa, etc. Liquor of jaggery, Cereals liqour, udida, vasa, oil etc. must be eaten. To clean hand-legs and to drink, use warm water. Use hand-gloves & footwears. Keep heat at the baesment of house. The shishir rutu and then jatharagni is also lowered. As kapha prakop (agravation), Perform tivra vaman, nasya, etc.

Light and non oily food, and exersice, put utane and massage it will decrease the kaph. Use kapur (Camphor), chandan (Sandalwood), kesar and agaru for utane. Use old jav, wheat, honey, deer-rabbit maus, eat them. Asavas, Aushadi liquor, Sugar-cane juice, Drakshasava. Do not eat heavy, cold, oily, bitter and sweets and do not sleep in daytime. Due to sun, vayuvrudhi is there. So do not eat madhur (sweet), laghu (light), snigadh (oily), sheet (cold) and

drav (liquid). Do not drink liquor or dilute it with water. Because Swelling, Shaithilya (looseness), Dah (burning) and Moha (confusion) etc are icreased. Moha pushpa fruits are eaten. Drink rose and camphor scented water.

One must take Vaman, Basti for constipation. Use masala muga and panchakol, padelon-curd, etc. Do not walk without footwears, use smoked colthes, regularly in take gruta, do virechan and rakta - mokshan. In hunger, use rice, mug, padval, awala, liqour, sugar and jangal maus etc. and eat madhur, honey, astringent, bitter and light food. By appyling chandan, vala, kapur, mauktik, pushpa mala and colthes etc and enjoy moonlight on terace. Avoid dew, sunlight, eastern wind, day sleeping, heavy liqour, salty curd, oil, vasa etc. This is Rutucharya

Conclusion:

Due to Dincharya, Rutucharya, the body is benefitted. The vat- pitta - kapha doshas are in samyavasta. The mal (faeces), mutra (urine), svedh (sweat) are easily eradicated from our body and all rasa, rakta, maus, med, asti, majja, sukra, and oja are in samya avasta. Due to these niti ,one gets divya sharir, silent mental states. Due to these virtues are increased and peoples become healty, wealthy , wise and fame.

And because of these nitis, people get ethical, political, economical, virtual gains and salvation...This is ayurvedic niti shastra...

Bibliography:

- 1. BOOK: Garde. Ganesh.K, (Vagbhatta), Sartha Vagbhatt, Shri gajanan book depo, Dadar, Mumbai, 7ed, Pg 7 to 16.
- 2. BOOK : Somdevsuri, Nitivakyamrut, Manikchand Jain Granthamala, Mumbai,1 st ed, Page 8 to 35.
- 3. Charak Samhita P. H. Kulkarni, E-book, 2010, Ayurveda shikshan Mala
- 4. Pandurang Nighantu P. H. Kulkarni, E-book, 2016, Ayurveda Shikshan Mala

Research:



Research Article Structuring

Dr. Eknath Kulkarni

Professor, Ayurveda Mahavidyalaya, Nashik

Our research work should reach the broader scientific community. There are many research journals. Researcher should publish his work in such journals. Research article has following components title, abstract, key words, introduction, methods, results & discussions. Here guidelines about introduction, methods, results & discussions are written. Every journal publishes instructions to authors. Researcher should read the instructions & write & submit article accordingly.

INTRODUCTION:-

In the introduction, you are attempting to inform the reader about the rationale behind the work, justifying why your work is an essential component of research in the field.

The introduction does not have a strict word limit, but should be as concise as possible.

The introduction gives an overall review of the paper, but does address a few slightly different issues from the abstract.

It works upon the principle of introducing the topic of the paper and setting it into a broad context, gradually narrowing down to a research problem, thesis and hypothesis. A good introduction explains how you mean to solve the research problem, and creates 'leads' to make the reader want to delve further into your work.

You should assume that your paper is aimed at someone with a good working knowledge of your particular field.

Importance

This leads into the rationale behind the research, revealing whether it is building upon previous research, looking at something that everybody else has overlooked, or improving upon a previous research project that delivered unclear results.

This section can then flow into how you are going to fill the gap, laying out your objectives and methodology. You are trying to predict what impact your research will have if everything works as it should, and you ultimately reject the null hypothesis.

Limitations

The introduction is the place to highlight any weaknesses in the experiment from the start.

Assumptions

You should also point out any assumptions that you make about conditions during the research. You should set out your basic principles before embarking upon the experiment: any research will be built around some assumptions.

METHODOLOGY:

Any scientific paper needs to be verifiable by other researchers, so that they can review the results by replicating the experiment and guaranteeing the validity.

To assist this, you need to give a completely accurate description of the equipment and the techniques used for gathering the data.

Finally, you must provide an explanation of how the raw data was compiled and analyzed.

Writing Methodology allows Verification

Other scientists are not going to take your word for it, and they want to be able to evaluate whether your methodology is sound.

In addition, it is useful for the reader to understand how you obtained your data, because it allows them to evaluate the quality of the results.

Writing methodology allows the reader to make their own decision about the validity of the data.

Whilst there are slightly different variations according to the exact type of research, the methodology can be divided into a few sections.

Describe the materials and equipment used in the research.

Explain how the samples were gathered, any randomization techniques and how the samples were prepared.

Explain how the measurements were made and what calculations were performed upon the raw data.

Describe the statistical techniques used upon the data.

That is the very basic structure of writing methodology, and it will clarify all of the information.

The writing for the method should be clear and direct, concise and straight to the point. The major point is not to stray off into irrelevance, and this process is helped by making a few basic assumptions.

Whilst not always possible, the methodology should be written in chronological order, always using the past tense

A well laid out and logical methodology will provide a great backbone for the entire research paper, and will allow you to build an extremely strong results section.

The only real difficulty with the methods section is finding the balance between keeping the section short, whilst including all of the relevant information.

RESULTS:

The results section is not for interpreting the results in any way; that belongs strictly in the discussion section. You should aim to narrate your findings without trying to interpret or evaluate them, other than to provide a link to the discussion section.

For example, you may have noticed an unusual correlation between two variables during the analysis of your results. It is correct to point this out in the results section.

Speculating why this correlation is happening, and postulating about what may be happening, belongs in the discussion section

Perhaps the best way to use the results section is to show the most relevant information in the graphs, figures and tables

Be sure to include negative results - writing a results section without them not only invalidate the paper, but it is extremely bad science. The negative results, and how you handle them, often gives you the makings of a great discussion section, so do not be afraid to highlight them.

DISCUSSION:

In an ideal world, you could simply reject your null or alternative hypotheses according to the significance levels found by the statistics.

Self-Criticism at the Heart of Writing a Discussion Section

For this purpose, you should criticize the experiment, and be honest about whether your design was good enough. If not, suggest any modifications and improvements that could be made to the design.

Maybe the reason that you did not find a significant correlation is because your sampling was not random, or you did not use sensitive enough equipment.

The discussion section is not always about what you found, but what you did not find, and how you deal with that. Stating that the results are inconclusive is the easy way out, and you must always try to pick out something of value.

Using the Discussion Section to Expand Knowledge

You should always put your findings into the context of the previous research that you found during your literature review. Do your results agree or disagree with previous research?

Do the results of the previous research help you to interpret your own findings? If your results are very different, why? Either you have uncovered something new, or you may have made a major flaw with the design of the experiment.

Finally, after saying all of this, you can make a statement about whether the experiment has contributed to knowledge in the field, or not.

ISSUE NO. 132

Oct.-Dec. - 2017

Information:

"Sowa-Rigpa"

"Sowa-Rigpa" commonly known as Tibetan system of medicine is one of the oldest. Living and well documented medical tradition of the world. It has been originated from Tibet and popularly practice in India, Nepal, Bhutan, Mongolia and Russia. The majority of theory and practice of Sowa-Rigpa is similar to "Ayurveda". The first Ayurvedic influence came to Tibet during 3rd century AD but it became popular only after 7th centuries with the approach of Buddhism to Tibet. There after this trend of exportation of Indian medical literature, along with Buddhism and other Indian art and sciences were continued till early 19th century. India being the birth place of Buddha and Buddhism has always been favorite place for learning Buddhist art and culture for Tibetan students; lots of Indian scholars were also invited to Tibet for prorogation of Buddhism and other Indian art and sciences. This long association with India had resulted in translation and preservation of thousands of Indian literature on various subjects like religion, sciences, arts, culture and language etc. in Tibetan language. Out of these around twenty-five text related to medicine are also preserved in both canonical and non-canonical forms of Tibetan literatures. Many of these knowledge were further enriched in Tibet with the knowledge and skills of neighboring countries and their own ethnic knowledge. "Sowa-Rigpa" (Science of healing) is one of the classic examples of it. rGyud-bZhi (four tantra) the fundamental text book of this medicine was composed by Yuthog Yonten Gonpo who is believed to be the father of Sowa Rigpa. rGyud-bZhi which is based on indigenous medicine of Tibet enriched with Ayurveda, Chinese and Greek Medicine. The impact of Sowa-Rigpa along with Buddhism and other Tibetan art and sciences were spread in neighboring Himalayan regions. In India, this system is widely practice in Sikkim, Arunachal Pradesh, Darjeeling (West Bengal), Dharamsala, Lahaul and Spiti (Himachal Pradesh) and Ladakh region of Jammu & Kashmir

Guidelines for submission of articles.

- 1) Left top corner of article write one of following:
 - a) Research, b) Case Study ,c) Review, d) Experiment, e) Short communication, f) Research method ,g) Standardization, h) Proceedings paper,i) Opinion paper , j) Patent etc.
- 2) Title, 3) Authors' name, e mail id, phone no. college/institute, university,
- 3) Abstract not more than 200 words.
- 4) Mention no.of references for the article in the bracket.
- 5) Keywords in alfabetical order.
- 6) Introduction, aims ,objects,methodology ,observations, discussion, conclusion, etc.as per requirements.
- 7) References with details such as section, chapter, page no.etc.
- 8) Add graphics if any at the end.
- 9) References be written as follows e. g.
 - 1) Journal: Bhoir Uday B./Kamble Pushpalata, "Evaluation of 'Sama Aayam vistor' in Unhealthy individuals with congenital/ Development Physical Deformity". Deerghayu International, 2015, Vol. 31-01, issue no. 121, Jan.-Mar. Pgs. 52-60
 - 2) Book: Kulkarni P.H., Hosurkar Geetanjali, 'Obesity & Holistic Medicine', Publisher
 - Deerghayu Intenational Pune, 1st edition, 2014, pages 42-44
 - 3) Patents: Patent owner, title of patent. Patent number, date.
- 10) Send article via e mail with biography, photo to:
 - a) kavitaindapurkar@gmail.com
 - b) deerghayuinternational@gmail.com.
- 11) Send Bank Demand Draft OR cheque payable at par for Rs. 1500/- to Editor, Deerghayu international, 36 Kothrud Gaonthan, opp.Mhatoba Mandir, Pune 411 038.
- 12) Author can deposit money in the following Bank account. Send receipt of amount deposited.

Deerghayu International, UCO Bank, Kothrud Branch, Pune 411 038, A/c no. 14690200000611, IFSC code: UCBA 0001469, MICR code: 411028011.

DEERGHAYU INTERNATIONAL



- 1) The peer reviewed quarterly journal for Ayurveda and Health Sciences since 1984.
- 2) International Standard Serial Number is ISSN 0970 3381 since 1986.
- Included in Indian Citation Index.
- 4) Impact factor published from time to time.
- 5) Articles published in Deerghayu Interantional is being uploaded to AYUSH portal by National Institute for Indian Medical Heritage, Hyderabad.

Report:

8th International Ayurveda Research Day conference

The 8th International Ayurveda Research Day conference was organized on Sunday, 6th August 2017 at Sumant Moolgaokar auditorium (Pandurang Sabhagruha) and Bajaj Conference hall (Deerghayu Sabhagruha), International Convention Center trade towers, S. B. Road, Pune, India.

This was the 66th International Conference organized by Deerghayu International, International Ayurveda Association (IAA) and sister concerns. Over 100 researchers participated in this unique gathering of Ayurveda researchers. Delegates from PRAANAM Ayurveda Academy of Barcelona, Spain also participated. Founder President Vaidya Carmen Navarro, Janire Nicolás, Elisenda Berninches, Rosa Salvatierra, Cristina Sevillano were present.

The proceedings of the conference started at 10am with prayer 'Dhanvantari Stavana'.

At the opening ceremony, conference patron Prof. Dr. P. H. Kulkarni inaugurated the conference.

His keynote address included the experiences in of Ayurvedic practice in various countries. This speech gave important insights to the researchers and Ayurveda practitioners present in the auditorium. Executive president Dr. Atul Rakshe expressed his views on clinical studies for difficult autoimmune diseases by 'Shamana Chikitsa'. This was a brief about present day management of autoimmune diseases and how Ayurveda can play a very important role. Vaidya Carmen Navarro, Founder of the PRAANAM Academy delivered a speech about the present condition and future of Ayurveda and Yoga in Europe.

The conference had two important presentations during the first session.

Ayurveda is primarily the science of healthy living. There are a number of 'cow- products, such as milk, ghee, cow urine, cow dung, ghee, cow buttermilk used in various Ayurvedic products and have a very significant role in Indian health foods. Mr. Anand Palnitkar of the 'Tharparkar Desi cow club' gave a presentation about how Indian cow species are endangered and how their products can bring a very healthy food-medicine benefit to everyone's life.

This session concluded with a presentation about much awaited Marathi feature film 'Nadi Vahate (River flows)'. The co-producer and art director of the film Neeraja Patwardhan-Sawant spoke about this movie based on the concept of sustainable living and how rivers across the word play important role in environment, culture and life as a whole. This movie speaks about efforts to save small rivers.

International Ayurveda Associationn has recently launched its 'Ayurveda Yoga International (AYI)' program focused on awareness, training and examinations of Yoga professionals.

The first batch of AYI was felicitated for successful completion of the Intensive Yoga Training program. Mrs. Pradnya Kulkarni, Ms. Rucha Dashputre, Mrs. Mrudula Kulkarni and Ms. Sayli Mulay received the certification. Dr. Vikas Chothe spoke about various initiatives for Yoga and Ayurveda by department of AYUSH.

Dr. Swati Kamat was the compeer for the session.

Two parallel scientific session were organized in Sumant Moolgaokar and Bajaj Conference hall post lunch.

Dr. Sanyukta Mohare, Dr. Mazhar Sayyed and Dr. Swati Kamat conducted the scientific sessions.

During these sessions, 45 researches presented their work. Prof. Dr. J. K. Barde, Prof. Dr. Prof. Dr. Nilakshi Pradhan, and Vaidya Carmen Navarro. were the mentor and moderators for the sessions.

The presentation ceremony started at 4pm. Dr. Harshad Mohare was the master of the ceremony.

Renowned Gynaecologist and founder editor of Shatayushee, Dr. Arvind Sangamnerkar, Prof. Dr. J. K. Barde, Vaidya Carmen Navarro, Prof. Dr. P. H. Kulkarni and Prof. Dr. Atul Rakshe were present at the dias.

During his speech, the patron Prof. Kulkarni said that research in Ayurveda is a continuing process and documentation of work is highly important.

Deerghayu International's 131st issue was published.

Deerghayu International is the peer reviewed journal dedicated to health sciences since three decades. It's impact factor is declared time to time and it is included in the Indian Citation Index.

Three books were published during the conference.

The first book named 'Panchatantra and Yogasutra' written by Dr. Vikas Chothe is a compilation of Panchatantra stories related to various 'Yogasutras' described by Patanjali.

A book titled 'Disease treatment: an integrated approach written by Prof. Dr. Atul Rakshe, Dr. Sarika Rakshe was published.

The book 'Breathless-Shwasa-kasa-Chikitsa' written jointly by Dr. Sagar Rokade Patil, Dr. Mrs. Savvi Rokade Patil, Prof. Dr. Kirhor Bhandare and Dr. Prasanna Bhandare was also released.

These books are written on various topics under guidance of Prof. Kulkarni. Over three hundred twenty books are published till date by the Ayurveda Education series. This is a record in modern history of Ayurveda.

Dr. Atul Rakshe said that Ayurveda research has to join hands and such conferences and meetings which bring all Ayurveda research under one roof should be organized time to time. The next Research day will be organized in January 2018.

During the presentation ceremony, 'Best paper presentation award for the conference' was presented to Dr. Maheshwar Tagare for his paper about 'Tablet Nyagrodha (Banyan tree) in treatment of hairline fracture.

'Pandurang Hari International Ayurveda Research Gold Medals' were presented to following

recipients for the excellence in Ayurveda Research in various institutes.

1. Dr. Sachin Zadbuke

(Guide: Prof. Dr. D. L. Shinde Ph.D. level)

Study the efficacy of Trayodashanga guggulu in management of Grudhrasi

Bhararti Vidyapeeth Deemed University, Pune, India

2. Prof. Dr. Sarita Gaikwad

(Guide: Prof. Dr. R. S. Huprikar Ph. D. level)

Evaluation of Ayurvedic management of Chronic renal failure

M.U.H.S., Nashik, India

3. Dr. Devika Deshmukh

(Guide: Prof. Dr. Ashwini Kumar M. M.D. level)

Comparative study on the effect of Nasya karma and Greeva Basti with Ksheerabala Taila in Greeva Hundanam w.s.r. to Cervical Spondylosis

Rajiv Gandhi University of Health Sciences, Bangalore, India

4. Dr. Nitin Dhumane (Guide: Prof. Dr. D. B. Kadam M. S. level)

Topic: A comparative study of jeevaniyagana ghrita tarpan and saptamrut loha abhyantar sevan in management of dry eye syndrome w.s.r. to shushkakshipaka

Bhararti Vidyapeeth Deemed University, Pune, India

5. **Prof. Dr. Kavita Indapurkar** for extraordinary contribution to Ayureda Research as M.D., Ph. D. Guide.

The media representatives and members of the conference management committee were present.

This conference was managed, conceived and executed by a brigade of young Ayurveda Practitioners.

- Dr. Ruturaj Kadam-Patil (Pune-Osmanabad) 9890644866,
- Dr. Vikas chothe (Akurdi) 9922916025,
- Dr. Harshad Mohare (Pune) 9028753905.
- Dr. Mazhar Sayyad (Mumbai) 9987867018,
- Dr. Sagar Rokade 9503969189,
- Dr. Priyanka Kapse-Birajdar(Bharti Vidyapeeth),
- Dr. Swati Kamat (Sangali) 8983345847,
- Dr. Madhuri Shankarao Arkaty 9860310859 (Tarachand Hospital),
- Dr. Priyanka Surajuse 8956486360,
- Dr. Sanyukta Mohare 9623799062,
- Dr. Prachi Bhagwat 99755 09414,
- Dr. Jyoti Shinde (Hadapsar) 7744998280,
- Dr. Shalmali Thube 95452 67779

A) Books by Prof. Dr. P. H. Kulkarni, Maha vaidya

Publisher: Sadguru Publication / Indian Books Centre, Delhi.

1)	Ayurveda for Women	100/-
2)	Ayurveda Rejuvination	200/-
3)	Ayurveda & Hepatic Disorders	400/-
4)	Ayurveda Aahar/ Food - Diet	300/-
5)	Ayurveda Chikitsa	200/-
6)	Ayurveda for Child Care	200/-
7)	Ayurveda Herbs	200/-
8)	Ayurveda Minarals	200/-
9)	Ayurveda Nidana	150/-
10)	Ayurveda Panchakarma Papers	150/-
11)	Ayurveda Panchakarma	300/-
12)	Ayurveda Philisophy	150/-
13)	Ayurveda Therapeutics	200/-
14)	Ayurveda Therapy	500/-
15)	Ayurveda Upachar	200/-
16)	Ayurveda Vajikaran	200/-
17)	Ayurveda Vistas	200/-
18)	Ayurvedic Aahar	300/-
19)	Baala Ayurveda	200/-
20)	Biorythm	200/-

VOL.	THIRTY THREE - 04	ISSUE NO. 132	OctDec 2017
21)	Bronchial Asthma, Ca	re in Ayurveda and Holistic Systen	ns 200/-
22)	Cancer and Aids - The and other Health Scien	eir Care/Cure in Ayurveda nces.	200/-
23)	Common Symptoms E	Effective Remedies	200/-
24)	Complimentary Medic	ine	300/-
25)	Hand Book of Clinical	Ayurveda Practice	200/-
26)	Heart Care in Ayurved	a	200/-
27)	Joint Disorders Care /	Cure in Ayurveda	200/-
28)	Know Ayurveda		100/-
29)	Musing Ayurveda		200/-
30)	Neurological Disorder	s and Care in Ayurveda	300/-
31)	Prameh-Veda / Diabe	tes	200/-
32)	Prof. P. H. Kulkarni's A	yurveda Research Papers	300/-
33)	Secrets of Body, Mind	Soul	200/-
34)	Skin Care and Cure in	Ayurveda	200/-
35)	Subtle (Sookshma) Ay	vurvedic Medicines	300/-
36)	Surgery in Ayurveda		300/-
37)	The Ayurvedic Plants		1000/-
38)	The Encyclopedia of A	yurveda, 2 Volumes	4000/-
39)	The Primer of Ayurveo	la	200/-

Contact email: anil4013@ Yahoo.com

vkgupta@indianbookcentre.com

Prof. Dr. P. H. KulKarni email: deerghayuninternational@gmail.com

B) E-Books & Print-Books by Prof. Dr. P. H. Kulkarni

Publisher: Deerghayu International, Pune, India,

1)	Abhyanga Tantra - Ayurveda Massage	400/-
2)	Anna - Ayurvedic Healthy Diet	600/-
3)	Ayurveda for You	400/-
4)	Ayurveda Jidnyasa	300/-
4)	Breathless	375/-
6)	Cancer and Ayurveda	400/-
7)	Clinical Ayurveda Practice - Hand Book	300/-
8)	Diabetes - Ayurveda Care	400/-
9)	Disease Treatment - An integrated approach	400/-
10)	English Charak Sarnhlta, Poorvardha & Uttarardha	2400/-
11)	Five Cleansing Procedures - Panchakarma in Ayurveda	400/-
12)	Heart Care - Hrudayam	400/-
13)	Home Remedies	400/-
14)	Joint Disorders and Ayurveda	400/-
15)	Junk Food & Ayurveda	175/-
16)	Liver Care & Cure in Ayurveda	400/-
17)	Mahasrotas - The digestive system - Ayurveda care cure	300/-
18)	Mastishka - Neurology in Ayurveda	450/-
19)	Naadee Pareeksha - Pulse Examination in Ayurveda	200/-
20)	Obesity - Holistic Medicine	222/-
21)	Shishu Health, Care in Ayurveda	300/-
22)	Skin Care & Cosmetology in Ayurveda	200/-
23)	Stree Roga - Gynaecology in Ayurveda	400/-
24)	Swastha - The Eternal Life	400/-
25)	Vajikarana - Sexology in Ayurveda	475/-
26)	Yoga with Ayurveda	400/-

Contact: 1) www.bookganga.com, Telephone 91 20 24 52 52 52.

2) Shri Swami Samarth Agency, Pune. Tele.: 91 20 2538 2130.

11)

300/-

C) Ayurveda books by Prof. Dr. P. H. Kulkarni. Published by Divine Books / Vasu Publication, Delhi.

1) Ayurveda Herbs for Health 2) Ayurveda Nidana - The Diagnosis and Pathogenesis Ayurveda Philosophy and Practice 3) 4) Bhasma / Calx - Ash Concept in Ayurveda Experiments with Drugs of Ayurveda 5) 6) Five Cleansing Procedures -The Ayurveda Panchakarma Fundamentals of Ayurvedic Medicine 7) 8) Kidney Disorders, Care and Cure in Ayurveda 750/-9) Mental Health and Care / Cure in Ayurveda 750/-10) Pictorial Ayurveda Panchakarma

Contact: e mail - sunilgupta405@gmail.com

Telephone: 91 9871552640

deerghayuinternational@gmail.com

The Ayurvedic Care & Cure of Digestive System

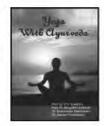
Ayurvedic Books of Dr. P. H. Kulkarni





















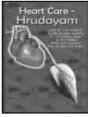










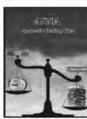


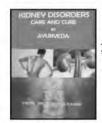












Contact for books and Ayurveda Products

Shri Swami Samarth Agency,
36 Kothrud Gaonthan,
Opposite Mhatoba Temple, Pune 411038.
Telefax: 20 - 25382130.

E-mail: pavanoriental25@gmail.com.

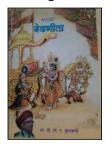
For e-books - 1) www.bookganga.com 2) deerghayuinternational@gmail.com

साहित्य आनंद माला (१९८४ पासून)

संपादक : प्रा. डॉ. पां. ह. कुलकर्णी





























Contact:



Shri Swami Samarth Agency,

36 Kothrud Gaonthan, Opposite Mhatoba Temple, Pune 411038.

Telefax : 20 - 25382130. E-mail: pavanoriental@gmail.com.