

ISSN 0976- 8300

विश्व आयुर्वेद परिषद पत्रिका

वर्ष-19 अंक : 11-12 संवत् 2080

मार्गशीर्ष-पौष

नवम्बर-दिसम्बर 2023



आमलकी

हेमन्त ऋतु

A Reviewed

Journal of Vishwa Ayurved Parishad

www.vishwaayurveda.org

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ISSN 0976- 8300

आर. एन.आई. नं. : यू.पी.बिल./2002-9388

प्रकाशन तिथि - 15-12-2023

पंजीकरण संख्या - LW/NP507/2009/11

मानसरोवर अमृत वैद्यम् पुरस्कार-2023 एवं वैद्य उद्भवदास मेहता स्मृति पुरस्कार-2023 वितरण समारोह



विश्व आयुर्वेद परिषद् के लिए प्रोफेसर सत्येन्द्र प्रसाद मिश्र, संरक्षक, विश्व आयुर्वेद परिषद् द्वारा नूतन ऑफसेट मुद्रण केन्द्र, संस्कृति भवन, राजेन्द्र नगर, लखनऊ से मुद्रित कराकर, 1/231 विराम खण्ड, गोमती नगर, लखनऊ-226010 से प्रकाशित।

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विश्व आयुर्वेद परिषद् पत्रिका

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मार्गशीर्ष-पौष

नवम्बर-दिसम्बर 2023

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सम्पादक मण्डल के सभी सदस्य मानद एवं अवैतनिक हैं। पत्रिका के लेखों में व्यक्त विचार लेखकों के हैं। सम्पादक एवं प्रकाशक का उससे सहमत होना आवश्यक नहीं है। आपके सुझावों का सदैव स्वागत है।

Contents

1- EDITORIAL	2
2- FACES AND FACTS OF JARA-CHIKITSA (GERIATRIC MEDICINE): AN AYURVEDIC EXPLORATION - Ajai Kumar Pandey, Krishan Bihari, Tanamya Nigam, Harsha K. P.	3
3- A REVIEW ON SHIVA TATVA RATNAKARA - A CRITICAL STUDY - Sonali Sharma, R. Vidyanath Renu Bala	19
4- ORIGIN OF SPECTACLES IN INDIA - Atri Ghosh, Santosh Rahinj Minal Rahinj	30
5- STRESS MANAGEMENT THROUGH AYURVEDA - Parth Sorathiya, Yogesh Deole	36
6- A RETROSPECTIVE ANALYSIS OF VARIOUS FORMULATIONS IN STHAULYA (OBESITY) - Shreekant R Mundada, Yogesh S Deole	44
7- आयुर्वेदानुसारं स्वास्थ्यसंरक्षणे आहारस्य महत्त्वम् - सरला, यशवन्त चौहान	49
8- समाचार	52



Guest Editorial

Ayurveda, the traditional Indian medicinal system remains the most ancient yet living traditions with sound philosophical and experimental basis. Ayurveda is gaining popularity globally due to its natural and non-invasive approach towards treatment. However, to establish Ayurveda as a globally recognized medical system, some necessary measures need to be taken such as standardization of Ayurvedic education, measures for continuous training of Ayurvedic practitioners, Development of globally accepted Ayurveda research process, Clinical trials to test the effectiveness of Ayurvedic medicines, Quality control standardization (standards for international quality of Ayurvedic medicines and products), integration with Yoga and Naturopathy, Publicity and awareness are some of the necessary measures to be taken to achieve this goal as a global holistic medical science. Important steps towards making Ayurveda medical system as a global medical science:



Ayurvedic treatment is although highly effective; proper mode of action, pharmacology, pharmacokinetics, and pharmacovigilance of many important Ayurvedic drugs are still not fully explored. There is urgent need to validate basic principles as well as drugs used in the ayurvedic system of medicine with the help of advanced research methodology by intensive and continuous scientific studies on a large scale that will help to establish evidence-based principles of Ayurvedic medicine. In case of Ayurvedic preparations, most of the drugs are polyherbal formulations, and proper quality control is still a serious issue. Consequently, till the date, the acceptability of Ayurvedic drugs in the international market is very poor. There must be some procedures and techniques to analyze these drugs (extracts or formulations) for their composition and strength. Like, China has declared Traditional Chinese Medicine as the main medical system of the country, similarly, the Government of India should also consider Ayurveda as the national heritage and declare it as the main medical system of the country. Regulatory difficulties, such as a lack of systematic data and evidence and a lack of systems to oversee the safety of traditional medicine (TM) practice, provide challenges for the recognition of TM on international grounds. This is the major reason why Ayurveda has not gained recognition in other countries. More than thousands of articles indexed in renowned PubMed every year, unfortunately, out of them a very few belong to Ayurveda research. However, the articles based on TCM cover around 12% of total published papers. Therefore, Ayurvedic literature has to make its huge contribution in PubMed for the international recognition. India government should launch a massive movement in the country to increase awareness in the country about the benefits of Ayurvedic medicine for the health interests of mankind and its holistic approach towards health.

By paying attention to the above aspects, Ayurveda medical science can potentially be established as a global medical science.

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FACES AND FACTS OF JARA-CHIKITSA (GERIATRIC MEDICINE): AN AYURVEDIC EXPLORATION

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ABSTRACT-

Aging phenomenon is not a disease but it is a progressive time bound irreversible process of body and mind due to gradual declining in physical and physiological function of senses, organs and system. It leads to an increased risk of debility, disease and death. In recent years elderly people is rising with an alarming rate world over including India due to improvement of health care facilities. Contemporary medicine is not very satisfactory to solve the geriatric related issues due to lack of holistic and comprehensive approach in the care and management. It is right time to assess the problems of aged one and to develop newer strategies and approaches for geriatric health care. Ayurveda has conceived that aging is a natural (Svabhava) phenomenon of becoming old. Ayurveda has described a special branch of medicine called Rasayana Tantra (Rejuvenative medicine) to promote longevity and wellness. Besides, Ayurveda has emphasized holistic sense to offer preventive, promotive, restorative and curative way to explore and solve the geriatric problems through

wide range of dietary, lifestyle care and intervention of medicine. The Geriatric medicine is evidence based emerging branch of contemporary medicine but all component of elderly health, wellness and disease management are not fully explored. In this emerging scenario Ayurveda has potential to contribute a lot in the line of elderly health care and management of diseases. Lifestyle care, Dietary management, Rasayana drugs and Panchakarma (bio-purificatory measures) of Ayurveda are substantially contributed in elderly care and management.

Key Words: Ayurveda, Aging, Geriatric, Jarachikitsa, Panchakarma, Rasayana

INTRODUCTION:

The elderly population is rising with an alarming rate world over due to the declining of birth rate and reduced rate of death due to availability of variety of healthcare practices. The population aging have been significantly observed in developed countries like US, Europe and Japan for last decades with significant negative impact on socio-economic and

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healthcare planning of the present day society. The developing countries like China and India have now started exhibiting similar trends. Global scenario as projected by UNO shows that the year 2050, 20% of the world population will be elderly constitute 8% of the population and by 2050 this is likely to go up to 17%. The changing demographic pattern associated with increasing population of the aged people is posing new challenges to the country. The impact of aging will be felt in many areas, e.g. economic, psychosocial, health and development programmes. At present elderly (60 yrs or above) constitute 8% of population; by 2050 this is likely to go up to 17-20% in India. The five top diagnostic categories of problems are generally affecting the elderly such as cardiovascular (85%), psychiatric (48%), musculoskeletal (46%), eye and ear (23%) and hormonal (18%) disorders¹.

The biological changes associated with aging are governed by both hereditary and environmental factors but vary from person to person and from organ system to organ system. Some individuals aged more rapidly than others. Aging changes occur in a gradual fashion throughout life and most physiologic functions begin declining after the age of 30. There are different patterns of functional loss with aging. There may be total loss; examples are reproductive functions in the female and high frequency auditory loss. Another pattern is seen in skeletal muscles and

kidneys where even with the loss of some units the remaining units can carry on functions. Sometimes the efficiency of each unit may be reduced without structural changes, for example the decrease in nerve conduction velocity. Less frequently control systems are interrupted resulting in secondary loss of function without anatomic change. A distinction should be made between aging and disease².

Western biosciences have been trying hard to identify the causes of aging but they are still not very clear to anyone. Ageing is defined as a progressive breakdown of homeostatic adaptive responses of the body. It is the progressive, universal decline first in functional reserve and then in function that occurs in organisms over time. It varies widely in different individuals and in different organs within a particular individual. Ageing is not a disease; however, the risk of developing disease is increased, in old age. The biochemical composition of tissues changes with age, physiologic capacity decreases, the ability to maintain homeostasis in adapting to stressors decline, and vulnerability to disease processes increases with age. After maturation, mortality rate increases exponentially with age. The process of ageing is cellular in nature. This rising trend of elderly will influence a wide range of Public issues of our times warranting newer strategies of healthcare and socioeconomic management. With the



advancement of age, almost all the systems of human body become prone to one or other type of disorders or multiple disorders at a time^{3,4}.

Conventional system of medicine has nothing much to offer in the core area of geriatric care except the medical management of the diseases of old age. On the contrary, Ayurveda is essentially the science of life and longevity. It presents a sound concept of aging, incorporates *Jara/Rasayana* Tantra as one of its Ashtanga specialties, which is exclusively devoted to nutrition, immunology and geriatrics. So, it can be said that Geriatrics was first mentioned in Ayurveda. The term 'Geria' is very close to the Sanskrit word "*Jara*". *Rasayana* is defined as "*Rasayanam cha tat jneyam yat jara vyadhi nashanam*" means *Rasayana* is a branch of medicine which deals with the prevention of premature ageing, management of diseases and especially the management of diseases related to old age^{5,6}.

Ageing Concepts in modern medicine

The consequences of ageing appear after reproductive age. However, ageing is distinct from mortality and disease, although aged individual are more vulnerable to disease. With age various structural and functional changes occur in different organs and systems of the human body i.e. atherosclerosis, arteriosclerosis with calcification, loss of elastic tissue from aorta and major arterial trunks, atrophy of gyri and sulci, Alzheimer's disease, Parkinson's disease, degenerative

bone diseases, deterioration of vision, disability in hearing, incontinence of urine, laxity of skin, cancer etc. The numbers of theories and observations have been projected to identify probable cause of ageing, but no definitive biologic basis of ageing is established. The following are some most acceptable theories of ageing based on experimental ageing study. The genomic and immune mechanisms seem to be the sheet anchors. The following are the enlists various modern theories of Aging^{7,8}.

- ♦ The Wear and Tear Theory
- ♦ The Neuroendocrine Theory
- ♦ The Genetic Control Theory
- ♦ The Free Radical Theory
- ♦ Waste Accumulation Theory
- ♦ Limited number of Cell Division Theory
- ♦ Hayflick Limit Theory
- ♦ Death Hormone Theory (DECO)
- ♦ Thymic -Stimulating Theory
- ♦ Mitochondrial Theory
- ♦ Errors and Repairs Theory
- ♦ Redundant DNA Theory
- ♦ Cross Linkage Theory
- ♦ Autoimmune Theory
- ♦ Caloric Restriction Theory
- ♦ Gene Mutation Theory
- ♦ The Rate of Living Theory
- ♦ The Telomerase Theory



Physiological changes & related disorder in the Elderly

- **Cardiovascular system:** Linear decline occurs in cardiac performance between ages 30 and 80. Hypotension, syncope, heart failure and heart block are the major consequences in this age group.
- **Respiratory system:** There are changes occurs in lung weight bronchial ciliary activity and reduced vital capacity by which elderly become prone for aspiratory pneumonia, dyspnea, and hypoxia.
- **Gastrointestinal system:** There is decrease in sense of taste and flow of saliva. Esophageal motility disorders are common with esophageal dilatation and delayed emptying. Gastric acidity is reduced and calcium absorption is decreased. Atrophic gastritis is common. The oral absorption of drugs and its clearance is therefore affected. Liver shrinks in size with age and clearance of drugs is affected. There is decrease in colonic motility and the problems of diverticulitis and constipation are common.
- **Genitourinary system:** The number of glomeruli of a 40 year old may be reduced to half or even one third in number by the age of 70. Thus GFR is reduced in old age. There is risk of hypernatraemia and renal failure. There is enlargement of prostate, urinary incontinence or urinary retention, symptomatic UTI and atrophy and dryness of vaginal mucous membrane.
- **Nervous system:** There is decrease in size and weight of brain with slower psycho motor performance. Ventricular size increases and thought and reaction time may become slower with aging. Other changes are decrease in sleeping hours of stage 4 and rapid eye movements sleep. This may lead to develop dementia, delirium, depression, parkinson's disease, falls, sleep apnea, hypothermia or hyperthermia in old age people.
- **Endocrine system:** The endocrinal changes include increase in ADH response, diminished estrogen and androgen production, impaired glucose tolerance, decrease in aldosterone and renin response to upright posture and sodium restriction. This is the reason of development of type 2 DM, thyroid dysfunctions, impotency, osteomalacia and non-pathological fracture in this age group.
- **Musculoskeletal system:** Degenerative joint diseases become common with severe disability. There is decrease in bone mass and lean body mass. There is loss of articular cartilage of weight bearing joints, while connective tissue increases in density and contains less water.
- **Immunologic system:** Elderly are more prone to bacterial, viral and fungal infections and malignancies.



There is absence of thymic hormone, decrease in T cell function and increase in auto antibodies.

- **Dermal changes:** Decrease in subcutaneous adipose tissue results in poor thermal insulation. There is atrophy of sweat glands and hair follicles with skin wrinkling, dryness and changes in collagen and elastin. There is senile purpura and keratosis, and loss of melanocytes from hair bulbs.
- **Special sensory changes:** Pupils get smaller with sluggish light reflex. There is presbyopia with decrease in accommodation. Cataracts, glaucoma, macular degeneration and diabetic retinopathy increase in frequency with age. There is increased sensitivity to loud noise, with reduced hearing for high frequencies. Tongue papillae and taste buds reduction leads to decline of gustatory sensation. Sense of smell decreases with aging along with changes in nasal mucosa and olfactory centers are also noticed. Light touch, pain sensitivity and vibration sense decline with age with slower conduction of peripheral impulses.
- **Other changes** include curling and slowing of growth rate of toe nails, decrease in total body water, muscle mass, lean body mass, decrease in height, graying of hair, increase in body fat, increased frequency of adverse side effects of drugs and risk of under nutrition.

- **Deviation in biochemical values:** The deviations in biochemical values in the elderly are also very common^{8,9}.

Aging Concepts in Ayurveda

Aging Event

From birth to death the moment of conception, right into the extreme old age, the human body undergoes considerable changes in shape, size and composition. The Sharangadhara Samhita and Ashtanga sangraha, describes the sequential biological decline occurring during different decades of life due to process of ageing. These descriptions are applicable even in present time if the chronology is corrected with life-span of man. The effect of aging is more obvious in the 5th decades of life when the properties of the skin elude. The aging process enhances in relation to age and affects one by one the function of vital tissues and organ like *drishti*, *shukra*, *buddhi*, motor organ, mind and other sense organs. *Vaya* (age) can be defined as the duration of time since birth to the present for a living individual. According to Acharya Charaka, age has been divided in three part i.e. *balyavastha* (young age), *madhyamavastha* (middle age) and *jirnavastha* (old age). After sixty years of age one is called 'old'. In old age there is progressive diminution of *dhatu*, strength of sense organs, vigor, masculinity, and bravery, power of understanding, retaining and memorizing, speech and analyzing facts. There is gradual diminution in the qualities of *dhatu* also.



Acharya Sushruta has described that after seventy years of age one is called as old in whom the *dhatu*s, sensory and motor organs, strength, vigor and enthusiasm decline gradually, he gets wrinkles in the skin, grey hairs and baldness and other complaints, is incapable of doing anything, and is like a worn out house in the rain. Vagbhata again mentioned the gradual decline in the *dhatu* and the function of the sense and motor organs in old age.

So, the *vriddhavastha* or *jirnavastha* is the last phase of life and is represented by the decay or degeneration of the body. Acharya Sushruta has mentioned *Jara* (ageing) under “*Svabhava balapravritta vyadhi*” which is of two type viz. *Kalaja* (*parirakshanakrita*), appearing at proper time even after proper protection and *Akalaja* (*aparirakshanakrita*), appearing before proper time due to improper care and prevention^{10,11,12}.

Responsible factors

The old age is an unavoidable phase of life which ultimately ends into death. The etio-pathogenesis and consequences of *Jara* are not clearly mentioned in Ayurveda. However some viable facts kept in mind by the Ayurvedic scholar while describing the concept of aging. The given concept of aging as per Ayurvedic parlance is quite interesting to the counter part of geriatric professional and gerontologists.

(A) Swabhavoparamavada (Theory of natural destruction)

The standard human life span as completed in scripture is of 100 years.

The Soul is immortal and transmigrates from one to another body. This process of Aging is the *Svabhava* or the very nature of living body. *Charak* has described it as a causative factor for the manifestation of being but no cause is needed for their cessation (*Cha. su. 16/27-28*). That means the process of deterioration occurs naturally. Thus *Svabhava* can be considered as a responsible factor in the causation of *Jara* (ageing) which is deteriorating, invisible and nature’s unique process, there can be a range of environmental, immunological, endocrinal, genetic, epigenetic etc. factors that accelerates the aging process.

(B) Environmental and other factor

(1) *Charak* mentioned that the life span of a person depends on the two factors -(*Cha. VI. 3/32-35*) viz- *Daiva* (Works of previous life) and *Purushakara* (works of present life).

(2) Kala (Time factor)

Modification is the characteristic features of time. All the things in the universe undergo various changes before it is destroyed completely. In Ayurveda, this sequence of change is known as “*Parinama*” which take place under the influence of “*Kala*”. C.S.Su. 16/32, C.S. Sh. 3/8) Thus it can be concluded that *parinama* brings the *jara*, is the sequential events of *balyavastha*, *yuvasvastha*, *jaravastha* etc.; are all the consequences of *kala*. *Jara* is a phase of life that occurs by the effect of time “*Kalasyaparinamena Jaramrityunimittajaha*”.



(C) Shareera Vriddhikarabhava – abhava (Depletion of growth factor)

Charaka has also given some other factors, which may be considered as promotive of growth. These factors are Kala yoga (time bounded phenomenon), *Swabhavasamsiddhi* (Natural phenomenon as result of invisible process which is responsible for growth), *Aharasaushthava* (dietary factor which is according to *ashta-aharavidhi visheshayatan, aharavidhi-vidhana, dvadashasanapravicharana*) and *Avighata* (absence of devastating causes).

The lack of above mentioned factors may decrease the growth of an individual. So, absence of these favorable condition for growth, may lead to ageing process.

(D) Role of Tridosha in ageing

In Ayurveda, the phenomenon of ageing is also related to principles of *Tridosha*. The *Tridosha* (vata, pitta and kapha) is the most important bio-humors responsible for the maintenance of good health and production of disease. These *doshas* exists in the body all the time but it varies as per age.

Bio-losses at Different Decades of Life (Sh.S.II-2/20)		
Aging decades Samhita	Sharangadhara	Ashtanga Samgraha
1 st - 0-10 years	<i>Balyam</i> (Childhood)	<i>Balyam</i> (Childhood)
2 nd - 11-20 years	<i>Vridhhi</i> (Growth)	<i>Vridhhi</i> (Growth)
3 rd - 21-30 years	<i>Chavi</i> (Complexion)	<i>Prabha</i> (lusture)
4 th - 31-40 years	<i>Medha</i> (Intellect)	<i>Medha</i> (Intellect)
5 th - 41-50 years	<i>Twaka</i> (Skin)	<i>Twaka</i> (Skin)
6 th - 51-60 years	<i>Drishti</i> (Vision)	<i>Shukra</i> (Virility)
7 th - 61-70 years	<i>Shukra</i> (Virility)	<i>Drishti</i> (Vision)
8 th -71-80 years	<i>Vikram</i> (Strength)	<i>Shrotendriya</i> (Hearing)
9 th - 81-90 years	<i>Buddhi</i> (intellect)	<i>Mana</i> (Sprituality)
10 th - 91-100 years	<i>Karmendriya</i> (Function of all the <i>Indriyas</i>)	<i>Sarvendriya</i> (all the indriyas)

During childhood *kapha dosha* predominates, in the middle age *pitta dosha* and in the older age *vata dosha* is said to be dominant. The properties of *vata dosha* are described as *ruksha, laghu, sheeta, khara and vishada*. So, *Vata dosha* by nature, decreases luster of skin, lessens body strength, dries and decays the

body and hastens ageing process. Thus the process of ageing can be evaluated in terms of the *Tridoshika* physiology.

(E) Role of Agni in ageing

Apart from *doshas*, Agni also plays an important part in aging process. In old age, more vitiation of *Vata dosha* occurs that is responsible for *Vishamagni* (improper



functioning of bio-fire), which affects the digestion and creating under nourishment of the tissues. This under nourishment of the tissues may have an impact on low status of *dhatvagni* which creates diseases in elder people. Thus, aging effects are more closely related to Agni having *vishamagni*.

(F) Role of Dhatus in aging

Though the classical text do not explain the exact role of Dhatu in ageing process but it is clearly mentioned in classics that during old age quantity as well as quality of *Dhatu* is depleted that vitiate the *Vata dosha* in systems. Further, vitiated *Vata dosha* may lead to develop tissue depletion.

(G). Role of Ojas in aging

Oja (the essence of all the dhatu) is also termed as *Bala* in Ayurveda, which is responsible for resistance against diseases or *vyadhikshamatva* (immunity) is also decreased. So, the *Dhatu kshaya* and *oja kshaya* are also responsible for process of ageing and diseases in old age.

(H) Role of Srotas in aging

Charaka has described that various pathological conditions arise in the body due to *srotodusti* of different *srotasa*. The main function of *srotasa* (channels of body) is to transfer the body fluids. In *Srotodushti* there are four pathological conditions that takes place i.e. *Atipravritti*, *sanga*, *siragranthi* and *vimargagama*. The main cause for *sroto*

dushti is vitiation of *vayu* and *mandagni*, which are prominent in aged. This may lead to improper functioning of macro-micro channel of the body in term contraction and relaxation that may interfere in the basic matrix of tissue nourishment.

Thus, till date there is no fundamental contradiction between east and the west except the philosophy of time bound life and rebirth and the splendid speculations about life beyond death in oriental traditions.

Factors responsible for Akalaj-jara (Premature aging)

The etiological factors for initiating the early aging process according to Ayurveda are clearly described by Charaka and Vagbhata in terms of *Akalaja-jara* (premature ageing). All the etiological factors for aging can be differentiated in three categories.

Aharatmaka Hetu

- *Amla, katu, lavana rasa, kshara, guru, ruksha, klinna* (softened), *abhishtandi* (those which obstruct the channels of circulation), *puti* (putrid), *paryushita* (stale) food articles accelerates the process of ageing.
- *Navashukadhanya* (newly harvested class of corns), *navashamidhanya* (newly harvested class of pulses), *shuskamansa* (dried meat), *tila* (sesamum), *palala* (paste of sesame), *pishtanna* (preparations of rice flour with water) etc. produces *ama* by



decreasing *agni* and leads to ageing process.

- Different type of *viruddha-ahara* (incompatible diet) i.e. *rasa viruddha*, *guna viruddha*, *virya viruddha* etc. are also responsible for initiation of aging process.
- *Asatmya ahara* (unwholesome diet), *Vishamashana*, *Adhyashana* etc. leads to *agnidushti* and senility.

Viharatmaka hetu

- *Viharatmaka hetu* of *jara* comprise *divasvapna* (day sleep), *ativyavaya* (excessive indulgence in sexual act), *ayasa* (excessive exercise) and *vishama-atimatra vyayama* etc.

Manasika hetu

- *Chinta*, *Bhaya*, *krodha*, *shoka*, *lobha*, *moha* etc. are the factor responsible for the senility. *Madhava Nidana* and *Rasa Ratna Sammucchaya* have mentioned that excessive walking, intake of very cold substance and *kadanna* (food articles which are devoid of *Jeevaniya* properties), sexual indulgence and mental worries are the cause of Aging.

Associated problems in elderly

There is description of additional features in the classical texts of Ayurveda, such as *Kasa* (cough), *shvasa* (dyspnea), *valita* (wrinkle), *khalitya* (alopecia), *agnisada*, *slathasaramansa sandhyasthita* (looseness of muscles, joints and bone), *twakapaurushya* (skin

becomes rough), *avanama* (body bends forward), *vepathu* (tremors), etc^{13,14}.

Ayurvedic diagnostics

Followings are silent features of Ayurvedic diagnostics.-

- Patient oriented
- Intense doctor-patient rapport.
- Two fold of clinical methodology in terms of *Rogi-Roga pariksha*.
- Emphasis is given to evaluate the genetic makeup and nature of the person and status of remainder health of the patient.
- Simulating conventional methodology in terms of its own way of examination comprises of *Shadvidha* viz *Prashana* (interrogation) and *Panchendriya pariksha* (Physical examination).
- *Rogi pariksha* comprises of *Dashavidha* for the assessment of strength of patient, prognosis, and intervention of therapeutics.
- *Roga pariksha* comprises of *Ashtavidha* and *Shadanga* and *Srotasa pariksha* through *Darshana*, *sparshana* and *Prashana* to assess the strength of disease.
- Construction of *Samprapti* (pathogenetic event) for the assessment of final diagnosis without insisting to identify the disease by name^{15,16}.



Planning of Balanced diet for the Elderly

The balanced diet should be planned individually in consideration of the following principles that ensuring the appropriated nutrition for body mind system and suitable for digestion of food.

- a) *Prakriti* of individual.
- b) Age of individual and its range
- c) Season and weather
- d) Quantum of mobility and physical activity
- e) Nutritional status of elderly
- f) Associated disease, if any in elderly age group
- g) Status of appetite and digestive power
- h) Vegetarian diet should be preferred
- i) Non-vegetarian diet should be avoided
- j) *Rasayana* measures should be added in daily dietary regimen

These measures can retard the process of ageing. Furthermore, *Rasayana* therapy, practices of yoga, time to time *Panchakarma* and various herbal drugs are very effective methods for geriatric health care in present time¹⁷.

Ayurvedic management in Elderly

Silent feature of Ayurvedic Management

- *Nidana parivarjana*- avoidance of etiologological factors

- *Samprapti vighatana*- reversal of pathogenesis by appropriate measures
- Practicing of *Samshodhana* (cellular bio-purification) therapy, which is performed through five cellular purificatory measures, known as *panchakarma*
- Practicing of *Samshamana* (palliative) therapy through appropriate use of diet, drugs, lifestyle management
- Promotion of Ojas (immune strength) status
- Promotion of Agni (bio-fire) status
- Promotion of mental status by appropriate *medhya rasayana* measure
- Other measures such as exercise, rest, recreation, relaxation, Yoga, meditation nutrition, physical rehabilitation, occupation, counseling etc.
- Appropriate referrals for medically unmanageable disorders- rightly mentioned by Charaka as- *Tatra-Dhanvantariyanamadhikarah*, which warrants clinical supremacy at that time.
- Geriatric subjects should be subjected to soft care, geriatric *Panchakarma* and *rasayana* therapy.
- Besides nutritional care, Yoga, exercise and social support are also needed.

Ayurveda advocates wonderful approach to delay Kala-jara (natural ageing) and to avoid Akala-jara (premature



ageing). Ayurveda gives primary importance to preventive and promotive health care and the maintenance of positive health. The major preventive approaches for maintaining and improving the quality of life include individualized specific measures like *Dinacharya*, *Ratricarya*, *Ritucharya*, *Hitakara* and *Matravata ahara*, *Sadvritta-palana*, intake of *Achara rasayana*, *Nitya-sevya Rasayana* etc¹³.

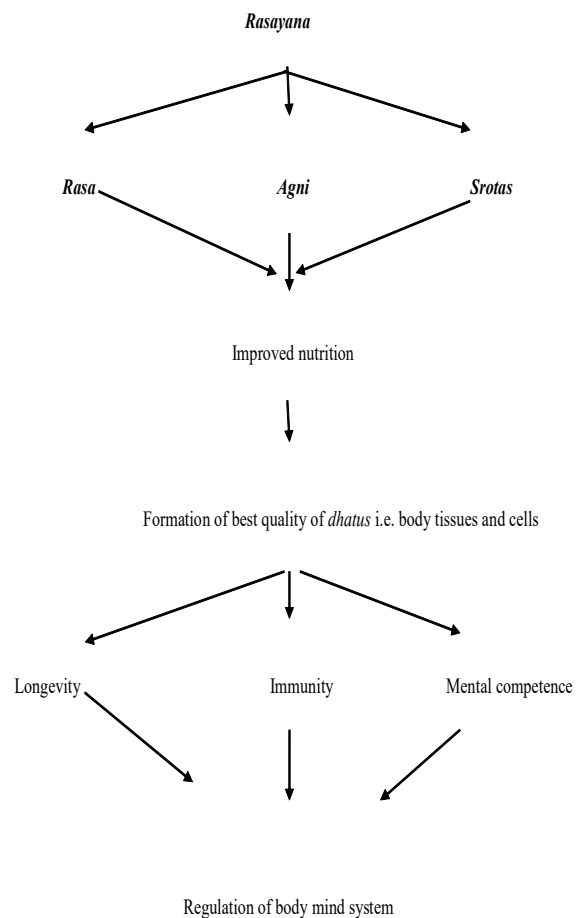
A. Rasayana therapy

Rasayana word is made up of two words “Rasa means “nutrition and “Ayana means circulation or promotion. Ayurvedic system of medicines specially incorporates Rasayana Tantra as one of the eight disciplines of *Ashtanga* Ayurveda, which is exclusively devoted to geriatric health care. Essentially *Rasayana* therapy has a very broad scope and it does not mean only rejuvenation or method for delayed ageing. *Rasayana* is specialized procedure practiced in the form of rejuvenative measures, dietary regimen and health promoting methods. *Rasayana* therapy aims ultimately at the attainment of most excellent *rasadi dhatu*. The classical texts of Ayurveda describes that a person undergoing *Rasayana* therapy attains longevity, improved memory, intelligence, freedom from diseases, youth, excellence of luster, complexion and voice, optimum strength of physique and senses, command over language, respectability and brilliance.

I. Mode of action of Rasayana therapy

According to Prof. R.H.Singh, Rasayana drugs act primarily at three level viz-

- through the level of Rasa dhatu-promoting nutrient value of plasma
- through the level of Agni-improved digestion and metabolism and through the level of Srotas- cleaning up the micro channels leading to better perfusion of tissue¹⁷.





2. Use of *Rasayana* according to diseases

There are certain *Rasayana* drugs which induces specific immune power and bio-strength to combat a particular disease, such *Rasayanas* are called as *Naimittika Rasayana*^{13,17,18}.

◦ <i>Prameharoga</i> – <i>Shilajatu, Haridra, Aamlaki</i>	◦ <i>Amvata</i> – <i>Amrit-Bhallataka</i>
◦ <i>Hrid roga</i> – <i>Shalparni, Arjuna</i>	◦ <i>Medoroga</i> – <i>Guggulu, Haritaki</i>
◦ <i>Mutraroga</i> - <i>Punarnava, Gokshuru</i>	◦ <i>Shwasa roga</i> – <i>Bhallatak, Shirisha, H</i>
◦ <i>Kustha</i> – <i>Tuvarak, Somaraji</i>	◦ <i>Pandu roga</i> – <i>Lauha</i>
◦ <i>Sandhivata</i> - <i>Eranda, Guggulu, Rasna</i>	◦ <i>Manas roga</i> – <i>Medhya Rasayana</i>
◦ <i>Oja kshaya</i> - <i>Amalaki, Guduchi</i>	◦ <i>Cancer</i> - <i>Bhallataka, Amalaki</i>

3. Use of *Rasayana* according to Saptadhatus

There are certain *Rasayana* drugs, which promote the specific dhatus (tissues), are given as below¹³.

1. *Rasa* – *Draksha, Kharjura, Kashmiri*
2. *Rakta* - *Aamlaki, Palandu, Lauha*
3. *Mansa* - *Ashwagandha, Bala*
4. *Meda*- *Haritaki, Guggulu, Amrita*
5. *Asthi*- *Laksha, Shukti, Shankha*
6. *Majja*- *Lauha, Majja, Vasa*
7. *Shukra*- *Aatmagupta, Pippali, Nagbala*

4. Use of *Rasayana* according to decade of life

Ayurveda describes the qualities of each decade of the 100 years of estimated life-span. During the process of aging an individual goes on loosing these age-related bio-strength and if this loss is compensated by age specific *Rasayana* in specific age groups the rate of aging can be retarded up to some extent and promote longevity¹⁷.



Decade of life	Loss of impact	Desirable rasayanas
1-10	<i>Balya</i>	<i>Vacha, Svarna, Kshira, Ghrita</i>
11-20	<i>Vridhhi</i>	<i>Kasmari, Bala, Amalaki</i>
21-30	<i>Chhavi</i>	<i>Amalaki, Lauha, Haridra</i>
31-40	<i>Medha</i>	<i>Sankhapushpi, Brahmi</i>
41-50	<i>Tvak</i>	<i>Jyotismati, Tubaraka, Bhringaraja</i>
51-60	<i>Drishti</i>	<i>Jyotismati, Triphala</i>
61-70	<i>Shukra</i>	<i>Atmagupta, Asvagandha, Shatavari</i>
71-80	<i>Vikrama</i>	<i>Amalaki, Bala</i>
81-90	<i>Buddhi</i>	<i>Bramhi, Madhuyashti</i>
91-100	<i>Karmendriya</i>	<i>Bala, Sahachara</i>

5. Medhya Rasayana used in elderly

1. Juice of Mandukaparni (*Centella asiatica*)
2. Juice of Guduchi (*Tinospora cordifolia*)
3. Powder of Yastimadhu (*Glycyrrhiza glabra*) with milk
4. Paste of Sankhapushpi (*Convolvulus pluricaulis*)

These Rasayana drugs have quality of enhancing memory, intelligence and strength of body, mind and sense organs. It is also used in variety of psychiatric disorders¹⁰.

6. Achara Rasayana

Good conduct and lifestyle impart inherent healing power and improve overall

wellbeing. So, it should be practice regularly^{10,11,12}.

B. Panchakarma therapy in elderly

Panchakarma is a cellular biopurifactory method comprising of five main procedures that facilitates better bioavailability of the pharmacological therapies, helps to bring about homeostasis of body-humors, cleansing of channels, eliminates the vitiated Dosas and Malas from the body and checks the recurrence and progression of disease. In geriatric practice, *Panchakarma* therapy like drastic *Vamana* (therapeutic emesis) and strong *Virecana* (therapeutic purgation) should be avoided. The schedule in the elderly consists of *Snehana* (medicated



oleation), *Svedana* (sudation), *Pindasveda*, *Sirovasti*, *Sirodhara*, *Kayaseka*, *nasya karma*, *sthanagata vasti*, *Yapana vasti* and *Brinhana vasti* suitably planned for each individual. Similarly the *Pindasveda* procedure of *Keraliya Pancakarma* therapy is known for its rehabilitative and nutrition promoting effects in many neurodegenerative conditions and myopathies¹⁹.

C. Practices of Yoga in elderly

Practice of Yoga including some *Asanas* (body postures), *Pranayama* (breath control) and meditation have been proven very effective method for improving health and spiritual wellbeing in the elderly people. A regular practice of *yama* and *niyama* will lead to complete refraining from all the evil courses and tendencies of life. Some relaxation *Asanas* such as *Shavasana*, *Sukhasana*, *Makarasana*, *yoga nidra* etc. helps to relieve the stress and produce autonomic balance thus helping to correct numerous psychosomatic conditions that are prevalent in older age. *Pavanamuktasana*, *Bhujangasana*, *Shalabhasana*, *Tadasana* etc. are also very useful in musculoskeletal disorders in old age. *Pranayama*, such as *Anuloma-viloma*, *Bhramari*, *Sitali*, *sitakari* etc) helps to improve the lung functions, control the

process of respiration and refreshment of mind in the elderly. The inner aspects of *Dharana* and *dhyana* also help to normalize the higher functions and modulate the individual perspectives thus cultivating a positive and proper attitude towards life^{13,17}.

D. Practice of Spiritual therapy in elderly

The psyche is deeply rooted in the spirit and the spirituality is the essence of Ayurvedic therapeutics, which otherwise remains superficial and limited. The following spiritual practices are found extremely useful for elderly.

- Devotion- submit the attained to the natural world
- Surrender-surrender oneself to the divine
- Compassion- recognition of the divine presence in all beings
- Rituals- it also provide positive impression and it nourish the mind
- Prayers- learn to communicate with God and pray to divine and ask for help with his problems
- The name- repeating divine name
- Chanting of Mantras- for physical psychological transformation
- Attaining self-knowledge¹³



CONCLUSION

Ayurveda is the most ancient science of life, health and cure. It practiced in India since antiquity. It is based on its own fundamental principles of disease diathesis, diagnosis and management. Its materia-medica and pharmacy are unique in nature. Promotion of health, prevention of disease and promotion of longevity are its main concerns. It conceived the holistic concept of health, disease diathesis and management. Ayurveda conceives the unique idea and medicaments for the care and management of elderly. The context of *Rasayana*, *Samshodhana* therapy and drugs measures are partially explored part of ancient wisdom. However, *Rasayana* measures, recipes and *aushadha* are of great concern value in promotive, preventive and therapeutic aspects of geriatric healthcare. Therefore, there is also a need to adopt appropriate research strategies in the field to develop an evidence based Ayurvedic geriatric and it's mainstreaming.

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A REVIEW ON SHIVA TATTVA RATNAKARA - A CRITICAL STUDY

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ABSTRACT-

First published in 1699 AD, *Śivatattva Ratnākāra* is written in the form of a dialogue in Sanskrit. *Somaśekhara*, a son of the king asks questions and the answers are provided by King *Basavarājā*. This conversational mode stimulates and maintains the interest and intellectual curiosity of the readers. . It also contains a detailed history of the *Kelādi* dynasty. This great work contains nine chapters called *kallola* and each of these contains many subdivisions called *tarangas*. There are very few books in Sanskrit that provide an encyclopedic coverage of various subjects of interest. It deals with all fields of knowledge prevalent during his times such as astrology, astronomy, āyurveda, planetary movements, eclipses, rainfall, clouds, education, devotion, architecture, science and technology, philosophy, polity and royal administration, warfare, economy, agriculture, history, geography, ethics, fine arts, entertainment, education, perfumes, gems, pearls, growth of crops,

sculpture, drama, construction of gardens, divination of water and hydrology, musicology, dance, matrimony, domestic relations, food and cookery, rituals – the list goes on.

Keywords- *Śivatattva Ratnākāra, Basavarājā, tarangas, Kelādi* dynasty.

INTRODUCTION:

Bassappa nayaka 1 (1698-1715) of *Kelādi* dynasty, author of *Śiva tattva Ratnakāra*. *Bassappa* *Nayaka* 1 was succeeded by his son *Somasekhara* *Nayaka* 2¹, who ruled for about 25 years (1715-1740) and was succeeded by his nephew, *Basappa* *Nayaka* 2. This *Bassappa* *nayak* in his turn ruled for about 15 years (1740-1755) and died. This great work contains nine chapters called *kallola* and each of these contains many subdivisions called *tarangas*. First *kallola* has 7 *tarangas*(chapters) contains 95 sub - chapters which starts with salutations to diety like *śiva, nandi, veerbhdra* etc. From universe, origin of universe. *Vedas, Upanisads, Upavedas, Mimasa, Samriti* etc. In second *taranga* (2nd chapter) has 53 sub- chapters, including

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vedas, karamkand, agama etc. Second *kallola* contains 8 *tarangas* (8 sub-Chapters) includes geography of world and continents. In 6th *Kallola*, chapter -21st there is description of *Āyurveda, Dośa, drugs* etc. In 22nd chapter, herbomineral drugs are mentioned, in 26th and 27th chapter about poisons.

Materials & Methods :

Methods: *Siva tattva Ratnakara* compiled by Basava raja of *Kelādi* edited by B.Rama Rau and Vidwan P. Sundram has been taken as the chief sources of the present study; and a thorough study has been carried out and documented the relevant data in a systematic manner.

AIMS AND OBJECTIVES _

1. To study critically *Siva tattva Ratnakara* and compile its contents.

2. Document relevant information provided by author.

OBSERVATIONS :

1 KALLOLA -

- 1st *Tarnaga- Sakalvidyodeśe* - Salutations to dieties, origin of universe, *Āyurveda, dhanurveda, gandharveda, atharveda, arthshastra*, four veda, name of principal *upanisads*, six limbs of *vedas, vedic culture, upa - puranas*. It is covering 95 chapters.

- 2nd *Taranga* - Total 70 subtopics - Topics like nature and characteristics of four *Vedas* and its branches, astronomy, grammar, vedic lexicography, astronomy are covered.
- 3rd *Taranga - Jangamsriśtikarma varnan-* 70 subtopics - Phenomenal world, six kinds of *bhaktas*, 6 kind of *linga*, 11 *rudras*.
- 4th *Taranga - Strīśtikramanirupana* - The whole chapter deals with *Sriśtikarma, śoonyalinga, niśkalinga, mahalinga*.
- 5th *Taranga -Pranavalinga Svarūpa-* Total subchapters -88 - topics are covered like *Pranavlinga, shadvarna, pancakśri*.
- 6th *Taranga - Nādatatvadvipanca-* 65 chapters - Topics covered like *nādasrishti, veda, āgama, purāna, tatva* etc.
- 7th *Taranga - Bhuvnodyamasu* -45 chapters - Topics covered like *Virātpurush, gyānindrya, karmindrya, bhootpancang* etc.

2 KALLOLA -

- 1st *Taranga* : Total sub-topics- 57 - Topics like linear measurements, inch explained, nine kinds of creation and their products. Altogether 84 lakhs of varieties of living beings inhabit the universe. This extent and life, 32 types of hell etc. are covered.



- 2nd *Taranga* : *Narkaytanuvartanam* : various kinds of hells are explained here.
- 3rd *Taranga* : *Duśkarmjanam* : Various kind of diseases are explained in this chapter.
- 4th *Taranga* : *Sapatpatāllok-svarūpvarnan* : The seven nether worlds and their inhabitants described here .
- 5th *Taranga* : *Meruvarnanam* : Total subtopics - 56 - topics covered like - 7 - continents , Mount meru etc. Described.
- 6th *Tarangas* : *Kesarachal varnan* : The whole chapter describes in lengthy detail all the mountains .
- 7th *Tarangas* : *Navakhandvibhaga* : Total subtopics - 108 - *Bharat varsh, Vindhya, jambudaveep* etc. are mentioned in this chapter.
- 8th *Tarangas*: *Śakdaveepadik-tahantavarnanam* - 6 continents ,their rivers etc. Are mentioned.
- 2nd *Taranaga* : *Meggarbhaā-divarnam*- Total subtopics - 98 - topics covered like - rains, clouds, stars effect ,wind, effect of lightning , planets relation with rain etc. are described.
- 3rd *Taranga* : *Guyakādiloka Suryarathgativarnanm* - Total subtopics - 84 - Topics covered like - *Gandharvas , Apsaras , Dikpālas* etc.
- 4th *Taranga* : *Suryagatibhednirupana* - Total subtopics - 121 , *kaśtha, muhurata dhruva* etc.
- 5th *Taranga* : *Sarvaloka, maholoka, janoloka varnanam*- Total subtopics - 125 - Topics covered like - *Suvarloka , mohloka, janaloka* etc.
- 6th *Taranga* : *Satyaloka Viśnuloka Varnanam* - Total subtopics - 64 - various Siddhis , Vekuntha etc. are mentioned.
- 7th *Taranga* : *Śivlokadikatahanta* - Total subtopics - 78 - topics like *Virātsvarūpa* description , *shivaloka* are covered .

3 KALLOLA²-

- 1st *Taranga* : *Meghaśreyagrahalokavarnam* -Total subtopics - 71 - Topics covered like - *yojana, Tapoloka , satyaloka , Meghaloka, Dvarpalakas , actions of various vāyus* etc.

4 KALLOLA³-

- 1st *Taranga* : *Samanyatonadideśadivarnan* - Total subtopics - 77 - Topics covered like description of *Bharat varśa* ,this consists of 9 divisions .its principal mountains , important rivers etc. are mentioned.



- 2nd *Taranga: Paradhānadasha-shailteerthakshetravarnan* : Total subtopics - 69 ,topics covered like - mountains, rivers, places of pilgrimage, *shakti kśetras* , *bhairava kśetras* ,holy forests etc. are covered.
- 3rd *Taranga : Yugakalpvivastha śakadhipatiśodhaśmaharajadivarnanm* :Total subtopics - 85 - topics like - *Yugas*, ages, life periods of human biengs are mentioned.
- 4th *Taranga : aturvarnyadharmā, bhramcharidharmvarnanm* : Total subtopics - 68 -topics like- raja dharmā, implements of agriculture etc. are covered.
- 5th *Taranga :Garahasthvanprasthsa nyasidharmavranan* : Total subtopics- 102- Topics covered - Bramacarya and study , eight kinds of marriage ,greatness of entertaining guests, 6 ways of earning livelihood, the sacred thread etc. are covered.
- 6th *Taranga :Varnashramsadharan dharmatyāśarmsavrūpnirūpana* : Total subtopics -137-Topics covered like duties of people of all *aśrams*, the applying of sacred ashes.
- 7th *Taranga : prayaścitamnirūpanam* :Total subtopics - 123 - topics *brahma hatya* ,expiations prescribed for each *varna*.Theft of other precious metals.Such mixing makes one equally culpable etc.
- 8th *Taranga : Basveśvarantratra nandīśvarvibhavadi vivahantam vritantkathanam*: total subtopics - 151 - topics covered kings of luner dynasty, *Basava*.
- 9th *Taranga : Basveśavrvritantnirūpanam* : Total subtopics - 100 - topics covered - conversation of Gods, about *Vrsaba*, *basva* etc.
- 10th *Taranga : Kalidharmvarnanam*: Description of *Kali Dharmā* ,how the world will gradually become sinfuland all previous religious and social institutions will disappear .
- 11th *Taranga : kalyutpatnirupana* : topics like Unusual and fearful occurrences,natural and unnatural at particular periods etc. are covered.
- 12th *Taranga*: total subtopics- 69 are mentioned.

5 **KALLOLA**⁴ -

- 1st*Taranga-Kutajadivarnanvaystam bhkālvancaṇa Maritsanjevan pradukagatyadshyakarnparkay parveshādi nirūpan*, Total subtopics -144, topics- Malla desha described ,prescription for securing perpetual youth ,prescription for the attainment of various special powers,revival of the



dead , various perscription .This can be effected by mani, mantra etc are covered.

- 2nd *Taranga* - *Deśvarnpnaya krameśvaranugrahvarnan* - Total subtopics-50 topics- story of town of *Kelādi* etc. mentioned.
- 3rd *Taranga*- *Śubhashubhfalnirupan* -This chapter deals with dreams , good, bad and their results are discussed.
- 4th *Taranga* - *Nidhicinhnanjan Sadharanrajnitivarnan*- Total subtopics - 97 - how to prepare the carbon paste ,the duties of ruler ,the greatness of of dharma are mentioned.
- 5th *Taranga* - *sadaśivnaripa critramayopayavayvarnan*- Total subtopics - 106 - various stratagems to put down the enemy etc. covered.
- 6th *taranga* - *Rājagunakradan Duraglakshan Balanuvarnan* - Total subtopics 84 - Topics covered - chief qualities in king, how to rule over people , taxes, fighting forces etc.
- 7th *taranga* - *Shaktitraya Dodsankannayka Vritantvarnan* - Total subtopics- 58 - Topics covered - Friends of king , 3 kinds of king etc.
- 8th *taranga* - *śakunphalkathnam* - omens of various kinds such as sneezing, lizard, dog, crow etc. Topics are covered.
- 9th *taranga*- *Sakannaykayala-vritankhdaglakshanam* - total subtopics- 76 , topics - Pilgrimage of *sankanna nayaka* from south to north, how to manufacture swords etc. are mentioned.
- 10th *tarnaga* - *Devapratishthakalgrahanirmanadinirupanam* - total subtopics - 186-Topics -Proper time for installation of idols , test suitable land, stones, idols etc. are mentioned.
- 11th *taranga* - *pattabhishekidhisandhivigrhayansvaroopvarnan* - the whole chapter deals with annointment and coronation of kings and all details connected with it .
- 12th *Taranga*- *Asanadvedhibhavsmashryachaturupayenirupanam*- topics- *Asana, Samasrya* etc. covered.
- 13th *taranga* - *Savaramhuratbhūmivargyoginibalvarnam* - Astrological information regarding *Svara, Muhurta, varga* . are covered.
- 14th *taranga*- *Dandyuddhupayvyuhrachnakramvarnam* - Total subtopics- 109-topics like - suitable field for battle , importance of war etc.
- 15th-*Taranga* -*Rajyasaptangsachivasena nipura hitvedyaganasoodsbhastarangrakshakbhishakdootadilakshanvarnam* -Total subtopics - 109 -topics covered like -



sword, minister, asrologer, rule of three etc. mentioned.

6 KALLOLA⁵ -

- 1st *taranga* - *Purbhavannirman-kathnam* -Total subtopics - 86 , contents - methods of laying out cities, suitable articles for timber, auspicious time for house - building, 16 varieties of houses, different parts for the use of different members of the household.
- 2nd *taranga*-*Varansnyojanchittlekhan-partimalakshannirūpan*- Total subtopics- 161, contents - manufacture of *vajralepa*, brushes, pens, measurements of different limbs and parts of the pictures.
- 3rd *taranga* -*natyakramanirūpan* - Total subtopics - 55 , contents- women of what nationality are fitted into dancing, *rāga bhāva* etc. covered.
- 4th *taranga*- *Sheershādikanthatabhinayanirūpanam* -Total subtopics - 116, topics like motion of head, motion of cheek in play, 4 kinds of facial expression mentioned.
- 5th *Taranga*- *hastabhinayvarnan* - The whole chapter deals with the various gestures of the hands.
- 6th *Taranga*- *Vaksh-parabhritipadantabhinyasthanakcharimandalbhedvarnam* -This chapter deals with

the gestures of the various parts of the body, from chest to feet, mentioned.

- 7th *Taranga*- *nādadigam kantnirūpanam* -Total subtopics - 116 topics- 18 limbs, the nature and origin of sound etc.
- 8th *Taranga*- *jātyadikanggaylakshannirūpan* - Total subtopics - 184 topics-topics covered like jatis subdivisions , the seven *svara* of music are mentioned.
- 9th *Taranga* -*tālprstadivividhvadyadisvaroopvarnanm*- Total subtopics - 189- importance of tala, drum, how to manufacture them etc. mentioned.
- 10th *Taranga*- *Upvannirmanjalbhoomiparikshanavranam*- Total subtopics - 137 - The necessity and importance of having garden around house, what trees should be planted, laying out of a garden, classification of flora, plant diseases and treatment, how to break rocks, explosives etc topics covered.
- 11th *Taranga* -*taruchikitsa, poshan, vichitrikarn, doshadvarnan*- Total subtopics - 97 - Various ways in different classes of trees are to be grown, how to improve the yield, 10 different kinds of flowers to be made to grow luxuriously by special etc topics covered.
- 12th *taranga* -*Kamśastre-jāti-svabhav-guna-deśa-dharma*-



cheštadivarnam- This chapter treats of *Kamasutra* in all details mentioned here.

- 13th *taranga* - *bahrrayt-karnbhed-yovansthirikaran-venkatapnaya-kchhari* - 175 subtopics - topics covered - various methods by external rata, attainment of perpetual youth etc.
- 14th *taranga*- *grahasnan-padukalepnobhogvarnan*- total sub - topics - 82 - topics covered like houses fit to be occupied by kings, oil bat , wooden sandles, how to test saffron, how to use perfumes in different seasons etc covered.
- 15th *taranga*- *gandhayukti nirupanam* : This chapter deals wholly with the manufacture of perfumes.
- 16th *taranga* : *Vastra-malya - bhooshnopbhogvarnam* -total subtopics - 118-Suitable time for wearing cloths,cloths of what countries are superior quality , flowers of various kinds etc.
- 17th *taranga* - *bhūshnopbhogvarnam ratnsvroopvarnam* - Total subtopics - 186 - topics covered like - dimonds, how to improve brilliance, pearls, quartz, coral, methods of distinguishing real from false stones are covered.
- 18th *taranga*- *Sūpśastreanna-diyoośantvarnam* - deal with cookery in all its details are mentioned.
- 19th *taranga*- *bhakshyalehya-dupdamśantvarnam*- 20th *taranga* *Bhojanadishyanothanothanat* - the dining hall , test for purity of esrables ,massage and application of medicated oils, beds, fumigation mentioned.
- 21 *Taranga*- *Vedyashastra-adannidanchikistsanirupan* - Total subtopics - 210 subtopics - topics covered like - origin of Ayurveda, its 8 components, qualities of physician, six kinds of tastes, how pulse works in different diseases mentioned.
- 22 *Taranga* -*drvyaguna maharasadi nirupana* - Total subtopics - 129 - qualities of food stuff and herbs, changes brought by combination of two or more things, how to reduce the strength of minerals, changes from liquid into solid etc.,duration of potency of the various classes of medicines mentioned.
- 23 *Taranga* - *Rastotpatyadivarnam*-Total subtopics - 140 - topics covered like - origin of mercury, its varities, its impurities, origin of metals, precious stones, place of origin, nature, qualities, colour, uses etc.
- 24 *Taranga*- *rassankara-dinirupanam*-the whole chapter deals with mercury, purification uses and effect when combined with other things, alchemy various for conversion of baser metals into silver and gold .



- 25 *taranga -rasaśalayantra-dinirupana* - Chemical laboratory , machinery, burning by means of various kinds of putpaka, proper arrangement of articles in the laboratory .etc.
- 26 *taranga- Viśnirūpan sarpadidootantvarnan* -The origin of serpents, the varieties and nature , their life period and changes at different stages, how to determine the kind of serpent which has bitten ,when will man live even though and in which part of the body, the place of the secretion of poison etc.
- 27 *Taranga -vishchikitsayamantra-dryyagadaveerbhadranaykachritravarnan*-total subtopics- 146- -topics covered like - treatment by drugs, rat pison and food poison -how to remove it etc.
- 7 KALLOLA⁶ -**
- 1st *Taranga -Vedāntrgatvividh-vidyatantrasarbhūte*-Total number of chapters 88 -topics covered like -the places of officers according to their importance their dress,description of women of each country in india, royal priest, Ministers and secretaries , tributaries, musicians , how to receive foreigners etc.
- 2nd *Taranga - Indrajalvidya-pardarshn*- The whole chapter deals with magic and mesmerism.Many interesting and easy prescriptions given and fully explained to produce the most astounding phenomena .
- 3rd *Taranga - Sahityashastre Kavyalakshadi Rasantvarnan* - This chapter deals with literature. Things to be described. Letters, 7 kinds of poets, principal and minor *Bhavas* in each *rasa*.
- 4th *Taranga - Saytiyashastre nayknaykagunaritivrittishyyagundośa niroopan*.-Total subtopics- 130- topics covered like- varieties of heroes, qualities of a hero,heroine, ornaments to be worn on person of the heroine , defects in literary works of various kinds etc.
- 5th *Taranga- Sahityashastre alankarnirupan* - Total subtopics-100- varieties of *kavyas* etc.
- 6th *Taranga- Sahityashastre natketihasvaroopnirupan*- varieties - 10 kinds of plays described , their characteristics and parts etc topics mentioned.
- 7th *Taranga - Putraupbhognirupana*-Total subtopics- 123- *Pusanvan* , *karnvedh*, *choodakarma*,dowry to be given by brides father procession of the newly married .
- 8th *Taranga - Horaśastranirupana*-this treats of astronomy and



astrology, the 12 *bhavas* and their owners, the results of different houses etc topics covered.

- 9th *Taranga- samudralakshan strilakśanniroopan -10th Taranga- samudralakshan purushlakshan - palmistry, explained separately for men and women .*
- 11th *Taranga - Gajalakśaannirupan -Total subtopics - 223 -Topics covered like - The good and bad points of elephants, their qualities, height, varieties, life period of elephants and their sense of duty etc.*
- 12th *taranga- Ashvśastre Aśvotpatyadicheshntaniroopan -Total subtopics - 221 - topics covered like - seven kinds of horses, bad horses, examination for age, treatment of diseases are mentioned.*
- 13th *Taranga- Chatudesh panchāśdeshvalakshanrath-gollakshanta chikitsavarnan -Total subtopics- 249- qualities of horses, how to ride, superiority of horse etc.*
- 14th *Tarnaga - Shivbhoochritrakota Chakra niropanam*
- 15th *taranga- Yograhasyau- deshvarnam.*

8 KALLOLA⁷-

- 1st *taranga - Vyavharpadnirupan - Total no. of subtopics- 268.*

- 2nd *Taranga- Dhanuchakrakuntaga- dalakshantatsadhnakramniroopan - Total no. of suopics-180 -*

- 3rd *Taranga- Mallyuddhvinod- niroopan- The whole of this chapter deals with wrestling .Three kinds of wrestlers, their food, various kind of exercises and stratagems in wrestling, danger spots, strength at different ages.*

- 4th *Taranga -kukkutlavyudh chagshunaklakshan - Total no. of subtopics 83- cock fighting etc.*

- 5th *Taranga - Somshekhharbhoo- charitravibhootividhankramniroopan- Total subtopics- 99*

- 6th *taranga- Rudrakśdharnja- pvidhivarnam-total subtopics-97*

- 7 *taranga -Śivapoojakramniroopan*

- 8th *taranga - Chennambikacharitam- aheśvarmahimatdanflatishyayaadivarnan. Total subtopics-97*

9 KALLOLA⁸-

- 1st *Taranga - Pinduttpattinirupan - Total subtopics- 170 -origin of life in womb , food etc.*

- 2nd *taranga - Sansarniransnam - Disgust of the world etc mentioned.*

- 3rd *Taranga-Śaivtattavpratipadan - Total subtopics- 144 .*

- 4th *taranga- Śastravibha- gamimansaviśeśiknyaymat-nirūpan-*



Total subtopics - 111- topics like philosophy etc.

- 5th *taranga-sankhyavedantmat-nirūpanam* -total subtopics -87 - *sankhya,yoga,vedanta philosophies* explained in brief.
- 6th *taranga - Chavarkaditant-rattanmatprapyasthanvarnam* - non-vedic religions.
- 7th *taranga- Deekshabhedguru-śiśyaritvikkaldeshadi niroopan* -Differences of *diksha* .
- 8th *taranga - Deeksha-vidhanmantpalkshadiniroopan* -method of *diksha* etc mentioned.
- 9th *taranga- Satshalagyan-nirūpanam*.

DISCUSSION & CONCLUSION :

By going through the contents of *Śivatattva Ratnakara* , it is clear that this work is full of knowledge about universe origin to philosophy, marriage, from *Āyurveda* to *vrikshāyurveda*, it has completed almost every aspect from spirituality to technology.

So, it is important to read and research on old text to gain knowledge and apply it practically in life. In 6th *KALLOLA*, 21st *Taranga -Vedyashastraadannidanchikistsanirupan* - topics like - origin of *Ayurveda*, its 8 components , qualities of

physician, six kinds of tastes, how pulse works in different diseases are mentioned , 24th *Taranga - rassankāradinirupanam* - the whole chapter deals with mercury, purification uses and effect when combined with other things, alchemy various for conversion of baser metals into silver and gold, part of *rassāstra* is mentioned, 26th *taranga - Viśnirūpan sarpadidootantvarnan* - poison is mentioned. In 7th *KALLOLA* -7th *Taranga - Putraupbhognirupana -Pusanvana , karnvedh* are discussed. Hence, work should be carried in the field of *Āyurveda*,

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ORIGIN OF SPECTACLES IN INDIA

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Abstract :

Eyeglasses are used to treat eyesight issues. Glasses can be useful if patient has problems seeing clearly, either close or at a distance. They enhance patient's ability to see items clearly and precisely from any distance. The majority of vision issues have to do with how light focuses on the retina. The retina is located close to the optic nerve in the back of the eye. The retina receives light from the lens of the eye and transforms it into signals before sending them to the brain. The visuals we perceive are produced by this process. Eyeglasses help focus the light appropriately on the retina. Patient may need glasses for problems such as:

- **Nearsightedness (*myopia*):** Patient see close objects clearly, but objects farther away look blurry.
- **Farsightedness (*hyperopia*):** Objects in the distance look clear, while things close by look blurry.
- **Astigmatism:** A problem with the shape of cornea causes blurry or distorted vision.

- **Presbyopia:** patient eyes begin to lose the ability to focus on nearby objects (an age-related condition).

Typically, glasses are worn to correct eyesight, such as with reading glasses and nearsightedness glasses. So it is important to know about the history of eye glasses and also role of ancient India for inventing glasses.

Keyword:- *Upa netra, Eye glasses, Presbyopia, Refractive Error.*

INTRODUCTION-

A sort of vision issue that makes it challenging to see clearly is refractive error¹. They take place when patient eye's shape prevents light from properly focusing on retina.

HYPERMETROPIA (LONG-SIGHTEDNESS)²:-It is the refractive error, in which the incident parallel rays of light are brought to a focus posterior to the light-sensitive layer of the retina, when the accommodation is at rest.

Etiology³

- 1) Axial hypermetropia is by far the most common. In fact, all the newborns are

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almost invariably hypermetropic (approx 2.5D). This is due to shortness of the globe and is physiological.

- 2) It may also occur pathologically, when retina is displaced forward [retinal detachment, central serous retinopathy (CSR), orbital tumors, retinal tumor etc.]
- 3) In microphthalmos or nanophthalmos (where the axial length is less than 20.0 mm), there is high hypermetropia.
- 4) Curvature hypermetropia as in cornea plana, following a corneal injury, lens plana, etc.
- 5) Index hypermetropia due to increase in refractive index of the lens-cortex in old age.
- 6) Removal of the lens (aphakia).

MYOPIA (SHORT-SIGHTEDNESS)

It is that dioptric condition of the eye in which, incident parallel rays come to a focus anterior to the light sensitive part of the retina, when accommodation is at rest⁴.

Etiology⁵

- 1) Axial myopia: When the axial length is more.
- 2) Curvature myopia: When the curvature of the cornea or lens is more, e.g. kerato-conus, keratoglobus or megalocornea, and lenticonus.

3) Index myopia: Nuclear sclerosis and in diabetes (as the index of nucleus is more).

4) Forward displacement of the lens.

ASTIGMATISM⁶

It is the type of refractive error, in which the incident parallel rays do not come to a point focus upon the retina, due to refraction varies in different meridians of the eye.

Etiology⁷

- 1) Curvature astigmatism
 - Corneal
 - Lenticular: As in lenticonus.
- 2) Diseases of the cornea
 - Pterygium
 - Keratoconus
 - Marginal degeneration
 - Corneal scar
- 3) Index astigmatism: In early cataract, due to inequalities of refractive index in different sectors
- 4) Subluxation of the crystalline lens
- 5) Decentration or tilting of the IOL.

Presbyopia: patient eyes begin to lose the ability to focus on nearby objects (an age-related condition). healthcare provider will figure out the best lens for patient based on the vision problem patient have. Lenses can treat:



- **Nearsightedness:** A concave lens (curves inward).⁸

- **Farsightedness:** A convex lens (curves outward).⁹

- **Astigmatism:** A cylinder-shaped lens.¹⁰

- **Presbyopia:** Bifocal or multifocal lenses.¹¹

History of glasses in world :- J. William Rosenthal, MD, has documented in his scholarly book, “Spectacles and Other Vision Aids.” That Italy is where the first spectacles were created. Name of the inventor is unknown. The original design for spectacles included a frame to hold the right and left spectacle cell had a rivet [swivel motion] attached to a small strut to hold the two lenses together. A space was made between them to slide over the nose. The lenses were probably made of clear quartz [pebble quartz] or beryl [sea green stone of beryllium aluminum silicate] and due to their curved surface, they demonstrated some ability to magnify an object of regard.

History of glasses in India:-

Upa Netra :-

Etymology

From उप (*upa-*) + नेत्र (*netra*, "eye").

दृष्टिदोषदूरीकरणार्थं उपयुक्तमुपकरणम् उपनेत्रम् अस्ति ।¹²

Reference of upa netra in different ancient text

1) In Netra Prakashika book written by Nandikeshvara clearly described about presbyopia. There author clearly described that “the pitta dosha supports our body for the first forty years. The same pitta will reach the light (jyoti) of both the eyes and main maximum illumination (mahaprakasha) to provide clear of the distant objects. But the vision reduces for near objects (presbyopia?). For the improvement of near vision, he will be in need of upanetra (spectacles?) This is declared as paityakopa by Lord Mahadeva¹³

2) Adi Sankaracharya (509 – 477 BCE) has used the term “Upanetra,” Sankara wrote in the 81st verse of “Aparokshanubhuti” (Direct Experience), “Just as all very small objects appear to be large when viewed through lenses, so does one, etc.” This indicates that either lenses or magnifying glasses were used in India to magnify objects or letters. The context of upanetra in the above text makes it clear that some sort of magnifying lens or spectacles were used suggests that some lens were used to help eyes view better and bigger¹⁴.

3) In Sanskrit, spectacles known as Upalocanagolaka (circular spectacles)



or Upanetra were worn by middle-class people in addition to the upper classes¹⁵.

- 4) A poem in Gujarati called “Casimasabda-Satarthi-Svadh-yaya” that was written in about 1576 CE by the Jain poet Somavimalasuri of Ahemdabad contains a mention of the spectacles. The term used in this sentence, chasima or chasma, is comparable to the Persian word chashm, which means an eye¹⁶.
- 5) It is clear that spectacles were invented in India, most likely by the Kannada-speaking Hindus, according to Devanarayan’s account (between 1344 and 1353 CE), Vyasaraaya’s use of spectacles (1520 CE), the indigenous production of spectacle lenses in South India, the different terms used for spectacles in North and South Indian languages, and other historical facts¹⁷.
- 6) Therefore, it is most likely that the Arabs brought Hindu mathematics and the ophthalmological writings of the ancient Indian surgeon Susrutha, who

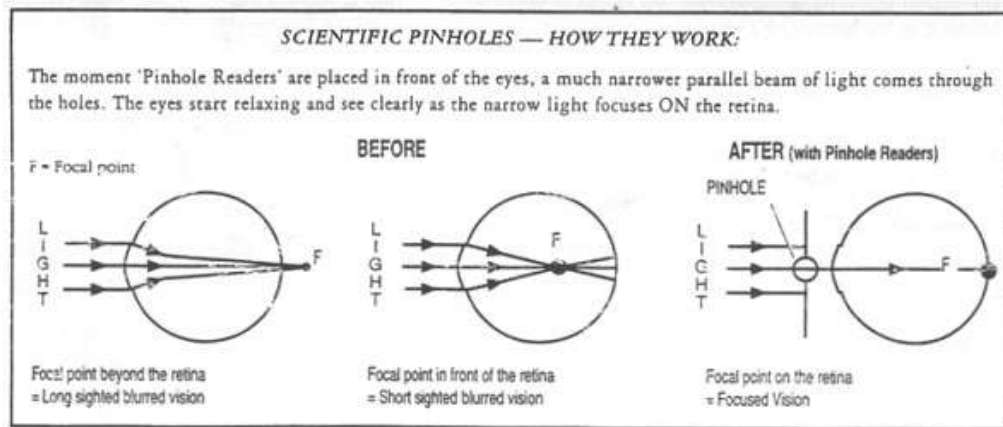
conducted the first cataract surgery, to Europe¹⁸.

- 7) Without any visual aids, ancient Indians used to cut diamonds into tiny pieces. Before South Africa made the discovery of diamonds in 1886 CE, India was the sole known supplier of the gemstone¹⁹.
- 8) According to a Vedic text called Satapatha Brahmana, Takshasila University educated students from nearby nations like Russia, China, Greece, Thailand, and others how to create glass²⁰.
- 9) In India, pinhole glasses were first utilised thousands of years ago²¹.

Principle of pin hole glasses :-

Each pinhole permits only a narrow beam of light to reach the eye. The light passes only through the centre of the lens of the eye.

So any defects of the eye lens will not take effect while the light is targeted in that way.





CONCLUSION:-

In spite of such facts, the glory of ancient India is dismissed as fiction by some. Destruction of idols and temples, burning of innumerable books in the form of Palmyra leaves, destruction of Gurukuls (ancient residential schools) and banning study of Sanskrit language through which the culture of India has been preserved has made us today aliens to our own culture and adopt some non-native cultures.

Ancient sages disseminated knowledge only to the deserving disciples as knowledge is power and power in the hands of the undeserving will harm society. Being spiritual persons they were not after name or fame. For the benefit of common people they disseminated their knowledge through Itihasas, Poetic Dramas and Poetry. Poetry which is metrical has rhythm which does not allow any omissions or alterations. Thus interpolations are prevented and purity of original text is protected. History was not written separately but it was incorporated in the form of a story in poetry. The Ramayana and The Mahabharata are called Itihasas. The word 'itihasa' means 'this happened'. But the modern western educated mind sees History as a separate subject from Literature. But in the Indian context Literature had been an expression of all knowledge including History.

History is interwoven in almost all the classics of ancient Indian literature. Without understanding this we started believing in western scientists who discovered some of the things in recent years to be the discoverers of things. Now some who are interested in clearing the ground are studying available Sanskrit texts and are bringing facts to light. This may take quite some time but ultimately truth has to and will prevail.

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STRESS MANAGEMENT THROUGH AYURVEDA

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Abstract :

Stress play an important role in manifestation of several diseases. The word 'aayasa' is used for stress. The available statistical data shows that prolonged isolation, pandemic lockdown, issues of personal life have negatively affected professionals in India more than other places in the world. According to the study 57% respondents were suffering from mild stress, 11% were feeling moderately stress, 4% were facing moderately severe symptoms of stress and 2% reported severe stress. The chinta (worries), shoka (grief), bhaya (fear) increases stress. Prajnaparadha (intellectual errors) is a cause for stress in today's era. When a person's dhi, dhruti, smruti are impaired, he performs improper activities leading aggravation of all dosha. It increases stress level in individual. Stress increases the risk of obesity, heart disease, Alzheimer's disease, diabetes, depression, gastrointestinal problems and asthma etc.

The available literature of Ayurveda and research articles are screened to review the concept of stress in Ayurveda and contemporary sciences.

The negative mental factors like anger, grief, exertion beyond capacity cause depletion of oja, that is responsible for immunity. These factors cause decreased mental strength and increased susceptibility to stress. This can cause many somatic and psycho-somatic diseases. Many therapies like daivavyapashraya, yuktivyapashraya and sattvavajaya therapies, dinacharya, ritucharya are described in Ayurveda to prevent stress and related diseases.

Stress free person have comparatively more mental strength. Three upastambha of life i.e. aahara, nidra, brahmacharya are the important pillars. These factors play vital role in management of stress. Proper diet and lifestyle, sleep patterns, and brahmacharya have direct impact on our mental status.

Ayurveda can provide better solutions for management of stress.

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Key words: *Oja, aayasa, diet patterns, lifestyle, psycho-neuro-immunology, immunity, diseases.*

INTRODUCTION-

Today, stress has become one of the most hazardous and unwanted companion of civilization. Stress is defined as anything which would adversely affect the individual. Stress is experienced when body responds to any kind of excessive demands. Stress can be caused by good and bad experience. It can be induced by physical factor and/or mental factors like grief, anger, worry, sorrow, etc. It also includes environmental factors, social factors etc. As far as body is able to cope and tackles it, a stress act as a normal stimulus required for our physical and social well being known and is better known as “positive stress” or “eustress”. And the other hand stress become an “distress” or “negative stress” when the individual is unable to cope with it.

The positive stress / Eustress helps in the improving the performance, whereas the distress is known for manifestation of various disorders like hypertension, coronary heart diseases, peptic ulcer, ulcerative colitis, irritable bowel syndrome, diabetes mellitus, thyrotoxicosis, behavioural disorders like anxiety, depression, attention deficit-hyperactivity disorders (ADHD),

emotional disorders, oppositional defiant disorder (ODD), insomnia, etc.

The stress play an important role in the aetiology of several diseases. It is well recognised in Ayurveda, where the stress is known as “aayasa”. In Charak Samhita Sutra sthana, it is mentioned that आयसः सर्वापथ्यानां... (aayasa sarva apathyanam). It means stress or straining self is foremost in unhealthy /unwholesome regimen (sarva apathyanam). Sahasa, vyayam , anashana, chinta, bhaya, shoka are responsible factor for ojakshaya. Oja can compare with immunity according to modern science. Ojakshaya is ultimately loss of immunity and increases the susceptibility body to various infectious diseases.

So that aayasa should be avoided as fast as possible. It can be managed by following traya upastambha (aahar, nidra and brahmacharya) Further, regular practice of rasayana also increase the coping capacity of the body. Several rasayana have shown an significant stress attenuating effect. The coping capacity of the body can be increased by lifestyle modifications, drug treatment. Achara rasayana also play an important role in management of stress.

Material and methods

Thorough review of literature including Ayurvedic Classical text viz. Charaka Samhita, Sushruta Samhita and Ashtanga Hridaya is done. Text books and journals



in contemporary sciences are reviewed for the parallel findings regarding the view of stress. The material is collected, reviewed and then organized according to the conceptual understanding.

Observation and results

The concept of pragnaparadha, manasa dosha like rajas and tamas, effect on oja were observed in reference to stress. The negative mental factors are listed to infer their role in etiopathogenesis of stress and related disorders. These references are elaborated as below:

Pragnaparadha

The most important factor for stress is pragnaparadha in today's era. Impairment of dhi, dhruti, smruti are responsible for harm to the mental faculties and causes stress. The person whose dhi(intellect), dhruti(patience), smruti (memory) are impaired, subjects himself to Pragnaparadha by his/her bad deeds.¹ This pragnaparadha aggravate all the sharirika and manasika dosha.

Clinical feature of pragnaparadha are indulgence in following activities:

1. Suppression of natural urges
2. Exhibition of undue strength
3. Over indulgence in sexual act
4. Negligence of treatment protocol
5. Initiation of action in improper time
6. Disrespecting those that deserve respect
7. Friendship with person of bad character and habits
8. Avoidance of the sadvrutta
9. Not following daily and seasonal regimen
10. Suffering from malice, fear, worry, anger, greed, avoidance.

Impairment of dhi (intellect), dhruti (patience), smruti (memory), deeds and unwholesome contact with objects of senses could be counted as a factor responsible for causing misery. Misery is one of the causative factor for aayasa (stress).

Table no.1: Clinical features of stress in vata dosha dominance

Physical symptoms	Behavioural symptoms	Psychological symptoms
Palpitation	Restlessness	Doubt everything
Anxiety attacks	Emotional out bursts	Erratic thoughts
Headaches	Anger	Divaswapna (daytime sleep and dreaming)
Insomnia	Disturbance in relationship	Sad/ depression
	Abnormal quietness	Not feeling well
		Emotional detachment



Table no.2: Clinical features of stress in pitta dosha dominance

Physical	Behavioural	Psychological
Profuse sweating	Hyper hostile nature	Firm decision making power
Tremors	Possessive relationship	Violent thoughts
Perspiration	Aggressive behaviour	Moderately stressed
		Happy mindset
		Emotionally attached

Table no.3: Clinical features of stress in kapha dosha dominance

Physical	Behavioural	Psychological
Weight gain	Cool minded	Stable mindset
Fluid retention	Stable relationship	Positive thoughts
Fatigue	positive behaviour	Mild stress

Biological process of stress

Autonomous nervous system (ANS) has the central role in related to mechanism of stress in body. Sympathetic nervous system become activates and it starts to respond the stressful condition and regulate the physiological process of body.. Amygdale has role in emotional processes and act as a regulator of mental factor like anger, grief, fear , etc. during responding to stress. Adrenal glands are responsible for production of stress hormone which would be secreted at the time of stress response. ²

Negative mental factors and stress:

The factors which are responsible for stress are chinta (worry), shoka (grief), bhaya (fear), krodha (anger), etc. These are mentioned in our ancient literature of Ayurveda as causative factor, as complication or as a principal of treatment (by avoiding it).

The references of negative mental factors as causes of diseases found in chikitsa sthana of Charak Samhita are mentioned in table 4 below. In nine out of thirty chapters, mental factors like chinta, bhaya, shoka, etc are found as causative factors for diseases. So it accounts for 33% of all diseases mentioned in chikitsa sthana.



Table no.4: References of negative mental factors as causes

Adhyaya	Vyadhi	Stress causing factors	Reference / note
Jwarachikitsa	Jwara	Krodha	Manifest by anger of lord Rudra(shiva) (Cha.chi. 3)
Apasmarchikitsa	Apasmara	Chinta, bhaya, shoka	Cha.chi. 10/5
Panduchikitsa	Pandu	Chinta, bhaya, shoka, krodha	Cha.chi 16/9
Hikkachikitsa	Hikka	Krodha (anger)	Mentioned in treatment protocol to avoid krodha
Kasachikitsa	Pittaja kasa	Krodha (anger), bhaya (fear), shoka (grief)	Mentioned in treatment protocol to avoid that mentioned factor
Visarpachikitsa	Visarpa	Krodha (anger)	Cha.chi. 21/115
Visha chikitsa	Visha (poisoning)	Krodha (anger)	Cha.chi. 23/228 Mentioned in treatment protocol to avoid that mentioned factor
Trimarmiya Chikitsa	Nasal disorders	Krodha (anger)	Cha.chi. 26/126
Vatashonit Chikitsa	Vata rakta	Krodha (anger)	Cha.chi. 29/7

Manifestation of stress

Stress factors like physical, mental, social, etc. can cause all type of morbidities.(Cha.Chi. 1/2/3). These are factors responsible for degenerative changes in dhatus(body tissues) and oja kshaya(a decrease in immunity).

Psychological/mental factor as mentioned earlier,are also responsible for a stress. Raja and Tama Guna become dominant over sattva that can increases stress level in individual. Raja is become aggravate due to krodha, chinta, while tamas becomes aggravated due to bhaya,

shoka, moha, etc. When Raja and tamas overcome the mind,it will result in manifestation of stress. Mental stress directly proportional to sattva of mind. If it is overcome by Rajas and tamas then it leads to decrease in mental strength or one that is not able to cope with stress.

Management of stress

प्रयोजनं चास्य स्वस्थस्य स्वास्थ्यरक्षणमातुरस्य विकारप्रषमनं च। (Cha.su. 30/26)

Management of stress can be done in two ways:

1. By avoiding the factors which are inducing the stress and vitiating dosha



2. By increase the coping capacity of body by following dinacharya, rutucharya, saddvrutta, achara rasayana and rasayana therapy as a treatment protocol.

By avoiding the stress

As we discussed earlier physical and mental factors are responsible for stress.

1. Physical factor

Ati-vyayam (excessive physical exercise), ati-vyavaya (excessive sexual intercourse) and sahasa (strain beyond capacity) should be avoided. As mentioned earlier, vata dosha is responsible for rajas dominance also.

2. Mental factor

Mental factors like shoka, bhaya, krodha, chinta, etc are responsible for causing stress. As mentioned in Charak Samhita Yajjapurushiya Adhyaya शोकः शोषणानां.. shoka is responsible for shosha (emaciation), विषादो रोगवर्धनानां... Sattva will be overcome by increased rajas and tamas. It responsible for the hyper activity of mind.

By increase the bala (strength or coping capacity) of the body

By following dinacharya, rutucharya, sadvrutta and achara rasayana, one can increase own coping capacity. These all are can include under rasayana therapy, which is the one of the branch of ayurveda.

1. Trayo upastambha

2. Rasayana therapy

Two types of rasayana

1. Achara rasayana
2. Ajasrika rasayana
3. Aushadha rasayana

1. Achara rasayana

The achara rasayana suggests a regular code of conduct to remain stress free like one should speak the truth, avoid anger, abstain from sexual intercourse, be calm and peaceful, do regular prayer to gods, give respect to teachers, preceptor and aged persons. One should have a self control. One who follows the achara rasayana in daily life can remain free from stress by staying away from the mental factors which can cause the stress. To obtain the maximum benefits of rasayana therapy, one should regularly follow the achara rasayana and ajasrika rasayana (dietary guidelines).

2. Ajasrika rasayana

The aahara which has six rasas is consider as a best aahara. The aahara should be according to prakruti of an individual, desha, kala, bala, etc. in disease condition, one should consume aahara according to state of dosha.

3. Aushadha rasayana

Aushadha rasayana is the drug treatment. It becomes more effective when



achara and ajasrika rasayana are followed properly.

The purpose of rasayana therapy to achieving healthy dhatus(tissues). Ultimately it improves ojas (the excellence of all dhatus). Rasayana act in various ways. Like,

1. Rasayana therapy may act on rasa dhatu.
2. By achieving the optimal functioning status of srotas. Function of srotas in our body is to carry respected components of that dhatu and carry

forward the nutrition for subsequent dhatus. Like pippali rasayana, amalaka rasayana, bhallataka rasayana,etc.

3. By improving the function of agni. Agni is responsible for digestion and metabolism at gross and micro level. Poshaka rasa also formed by action of agni agni and it's quality also depends on the status of agni.

In modern era, rasayana drug / therapy are known to have immunomodulators, anti-depressant, antioxidant, anxiolytic, etc.

Table 5: Herbs with it's action / properties

Action / Properties	Herbs
Immuno-modulators	Katuki (Picrorrhiza kurroa), satavari (Asparagus recemosus), ashvagandha(Withania somnifera), guduchi (Tinospora cordifolia), Pippali (Piper longum)
Hepatoprotective	Guduchi (Tinospora corfifolia), katuki (Picrorrhiza kurroa)
Medhya(acts on brain)	Mandukparni (Centella asiatica), sankhapushpi (Convolvulus prostrates), guduchi (Tinospora cordifolia), yashtimadhu (Glycyrrhiza glabra)

CONCLUSION

The diseases occurred due to chronic and oxidative stress can be managed by rasayana therapy. Achara rasayana, dinacharya, rutucharya (daily and seasonal regimen), drug treatment (aushadha rasayana etc.),are effective to prevent and manage stress Various ayurvedic herbs have anti-stress and anti-oxidant properties. In this way, Ayurveda can provide better solutions for management of stress.



Acknowledgments

The authors would like to acknowledge the support of Chairman Shri Bhikhubhai Patel, the Management Committee of Charutar Vidhya Mandal for providing this opportunity. We express gratitude to Prof.(Dr.) C.H. Babaria sir (Director of GJPIASR, Anand), Dr. Sarita Bhutada ma'am (Professor, Department of Kriya sharira, GJPIASR, Anand) for their valuable inspiration and motivation. I express my gratitude to my parents and friends for their unconditional support, motivation and inspiration.

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पेज नं. 51 का शेष

मनुष्याणां स्वस्थवृत्तेः विधेः नियमानुसारं स्वकीय स्वकीय दोषस्य विपरितगुणयुक्तान आहारस्य, विहारस्य सेवनं कर्तव्यम्, तथा च समधातु प्रकृतियुक्तान मनुष्यान् सर्वदा सर्वरसाणाम् सेवनं अनुकूलम्।

निष्कर्ष—

आयुर्वेदे आहारस्य विस्तृतं वर्णनं कृतमस्ति आहारग्रहणकर्तुः सम्बन्धितान् नियमान् ध्याने संस्थाप्य मात्रापूर्वकं हितकाराहारस्य, उचितकाले सेवनेन मनुष्यस्य स्वास्थ्यं उत्तमं भवति। एवं च सः मनुष्यः दीर्घायुं प्राप्नोति। आहारस्य उचितरूपे प्रयोगः न करणेन विभिन्नप्रकाराणाम्, रोगाणां उत्पत्तिः भवति, एव च आयु अपि न्यूनं भवति। अतः मनुष्यान् स्वास्थ्यरक्षणदृष्ट्या आयुर्वेदे वर्णितनियमानुसारं आहारस्य ग्रहणं कर्तव्यम्।

सन्दर्भग्रन्थसूची:—

1. चरसंहिता, सविमर्श "विद्योतिनी" (हिन्दी व्याख्या) भाग-1 पं. काशीनाथपाण्डयेः, डॉ.गोरखनाथ चतुर्वेदी: प्रथमे संस्करणम् चौखम्भा भारती अकादमी, वाराणसी।
2. चरक संहितायाम्, चरकचन्द्रिका, हिन्दी व्याख्या भाग-1 डॉ. ब्रह्मानन्द त्रिपाठी, तृतीय संस्करणम् प्रकाशकः-चौखम्भा संस्कृत संस्थानम्, वाराणसी
3. अष्टङ्ग संग्रहः आचार्य प्रियव्रतशर्मा, चौखम्भा ओरियन्टलिया, वाराणसी।
4. अष्टङ्ग संग्रह – हिन्दी व्याख्या, रविदत्त त्रिपदी, प्रकाशकः-चौखम्भा संस्कृत प्रतिष्ठानम्-दिल्ली।



A RETROSPECTIVE ANALYSIS OF VARIOUS FORMULATIONS IN STHAULYA (OBESITY)

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Abstract :

Obesity is high on rise in India and across the globe. As per the NFHS-5 data, 23% of women and 22.1% of men are overweight as per the BMI criterion. The preliminary finding on the status of abdominal obesity reveals that 40% of women and 12% of men are abdominally obese in the country. Ayurveda bears great responsibility in preventing and treating the Sthaulya (Obesity). A review of various researches carried out in Ayurveda is made to enlist the best effective treatment measures in preventing and treating the Sthaulya (Obesity). Available research works carried out at Institute of Post Graduate Teaching and Research in Ayurveda, Jamnagar were screened and referred with relation to Sthaulya (Obesity). While comparing the overall effect of different formulations and procedures conducted in various studies with reference to Sthaulya it can be observed that the Basti treatment is more effective than

virechana treatment. If the Basti is given before deploying other formulations, it will show better results. The herbomineral preparations like Shilajeet, Lauha require less dose and show better results. Shilajeet when used in combination with Agnimantha Ghana showed better result than used with Agnimantha swarasa, which shows that Ghana Kalpana is more effective than swarasa Kalpana. Researches showed that various Herbal, Herbomineral and Shodhana treatment can be used in Sthaulya (Obesity) Chikitsa.

Keywords- Sthaulya, Herbal, Herbomineral, Shodhana

INTRODUCTION-

Obesity is the excessive or abnormal accumulation of fat or adipose tissue in the body that may impair health. Obesity has become an epidemic which has worsened for the last 50 years.

As per the NFHS-5 data, 23% of women and 22.1% of men are overweight

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as per the BMI criterion. The preliminary finding on the status of abdominal obesity reveals that 40% of women and 12% of men are abdominally obese in the country.

The economic burden to treat the obesity is significantly high. Obesity is one of the important causes of various disorders like DM, HTN etc.

Hence prevention of Sthaulya has significant importance. Ayurveda bears great responsibility in preventing and treating Sthaulya (Obesity)

In the present study an attempt has been made to review the efficacy of various treatment procedures with reference to Sthaulya (Obesity). It will help to enlist the best effective preventive and curative measures for Sthaulya (Obesity)

Materials and Methods

- ♦ Total number of research done on Sthaulya – 181
- ♦ Total number of research done on Medo roga – 37
- ♦ Total number of research done on Obesity – 146
- ♦ In various Ayurveda institutes in India.

This data was obtained from ‘Researches in Ayurveda’ online database.

Out of these 11 researches from IPGT & RA, Jamnagar are included in current review from

Ayurvedic Research Database.

The different researches are selected as some were having churna preparation, some were having Ghana preparation, some have Rasaushadhi preparation and one research was included which was on Shodhana therapy.

Researches were selected from different time zone.

Observation and Results

The following table shows the details about the researcher, formulations, result and conclusion in the various researches carried out in Sthaulya (Obesity)

In above researches one research was carried out to study the comparative effect of Shodhana therapy i.e. comparison between Virechana and Basti karma on the effect on Sthaulya.

In above 11 researches 9 researches are studied in comparative manner i.e., comparison between two or more formulations or groups.



Table no. 1- Details of research work carried on Sthaulya (Obesity)

Sr. No	Name	Groups	Sample (N)	Result	Conclusion
1	M P Dhyani ⁱ	#Vidanga # Vidanga +Suvarnmakshika #Vidanga+Suvarnmakshika+Shilajatu	30	Weight reduced	Combination with Shilajatu found more effective
2	J R Mehta ⁱⁱ	Vidangadi Lauha	43	Reduced weight, Sr. Cholesterol and FBS	Found good result in 43 patient of Sthaulya
3	K B Roy ⁱⁱⁱ	#Devdarvyarishta #Vidangarishta	27	Reduced weight and waist line, No significant result on Sr. Cholesterol and FBS	Devdarvyarishta is more effective than Vidangarishta
4	K K Tivari ^{iv}	#Shilajatu with Agnimantha swarasa #Shilajatu with Agnimantha Ghana	12 12	Reduced weight and no significant result on Sr. Cholesterol	Agnimantha Ghana with Shilajatu is more effective than Swarasa group
5	Ravindra Korade ^v	#Tryushnadya lauha guggulu #Dashanga Guggulu	30 10	S. Cholesterol ,Total lipids, Skinfold thickness and Circumference reduced	Tryushnadya lauha possesses diuretic effect hence result was temporary. Dashanga guggulu showed more better result than Tryushnadya lauha
6	S M Thakar ^{vi}	#Apamarga #Nirgundi	44	Weight , BMI, Sr. Cholesterol reduced	Apamarga panchang showed better result than Nirgundi
7	Meeta Shah ^{vii}	Lekhaniya Dashemani w.r. to #Haridra #Chitraka	19	Weight reduced	Both the drugs show Lekhaniya property. Chitraka is more effective than Haridra



8	R M Parmar ^{viii}	Katushigru	24	Provided significant relief in symptoms of sthaulya and reduced body weight	Katu shighru possesses lekha property
9	S C Sharma ^{ix}	#Devdarvyadi Ghana Vati # Katuki Vati	17 16	Reduced total Lipids	Total lipids decreased in Devdarvyadi Ghana Vati group. Effect of Katuki vati was insignificant. General clinical features reduced in both groups. Koshtha pariksha is most essential before administration of Katuki Vati
10	Datta Anup ^x	Shilajatvadi vati # Drug +Diet #Drug +Regimen #Combination of all	6 8 8 8	Highly significant effect on weight reduction. Sr. cholesterol reduced	The combination of Drug, diet and regimen showed overall better result
11	Tejal Khunt ^{xi}	# Virechana + Triphala guggulu # Lekhana Basti +Triphala guggului	12 13	Highly significant effect on weight loss	Basti provided better relief in almost all the parameters than Virechana group

Discussion

On analysis of above data, it can be observed that various kind of herbal and herbomineral formulations are tried in the patients of Sthaulya (Obesity). The herbal preparations are used in various forms like Guggulu, Arishta, Churna, Vati etc.

Shilajeet and guggulu helped to reduce Apachit Medo dhatu by Dhatvagni deepan.

Lekhan Dravya in Basti helped to reduce the Apachit Medo dhatu.

It was observed in a research that individual Dravya from Lekhaniya Mhakashaya is also helpful for reducing the Apachit medo dhatu.

While comparing the overall effect of different formulations and procedures conducted in various studies with refer-



ence to Sthaulya it can be observed that the Basti treatment is more effective than virechana treatment.

If the basti is given before deploying other formulations, it will show better results.

The herbomineral preparations like Shilajeet, Lauha require less dose and show better results.

Shilajeet when used in combination with Agnimantha Ghana showed better result than used with Agnimantha swarasa, which shows that Ghana Kalpana is more effective than swarasa Kalpana.

From the various researches it can be concluded that Various Aushadha Kalpana can be used in the treatment of Sthaulya like Churna, Aasava, Ghana, Rasaushadhi, Gugghulu etc.

Various clinical and pathological parameters were taken under consideration in above researches and the conclusions were drawn on the above parameters.

CONCLUSION

Researches show that Herbal and Herbomineral formulations and Ayurvedic Panchkarma procedures are effective in Highly significant manner in the treatment of Sthaulya (Obesity) These formulations have not only reduced the weight but also helped to reduce the pathological parameters like lipid profile also in some researches.

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आयुर्वेदानुसारं स्वास्थ्यसंरक्षणे आहारस्य महत्त्वम्

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प्रस्तावना —

वर्तमानकाले मनुष्यस्य जीवनं सुबिधाजनकं एवं विलासितापूर्णं भवन् अस्ति। भौतिक सुख-सुविधा दृष्ट्या मनुष्यः प्रकृतिना विमुखः भवन् भवति, यस्मिन् फलस्वरूपे विभिन्नप्रकारिकाः स्वास्थ्यसम्बन्धिनी समस्याः बर्धन्ति। आधुनिक चिकित्सा स्वरूपस्य अत्यधिके विकसिते भूतेऽपि वर्तमाने काले स्वास्थ्य-सम्बन्धिनी समस्याः विकरालरूपं धारणं कुर्वन्ति भवन्ति। अन्य-चिकित्साप्रणालीनाम् विपरीतं आयुर्वेदः एवं चिकित्सा शास्त्रं नास्ति, अपितु समग्रजीवनस्य शास्त्रं अस्ति, यस्मिन् न केवलं रोगानां चिकित्सायाः वर्णनं अस्ति, अपितु मनुष्यानां स्वास्थ्यरक्षणार्थं विधानां अपि विस्तारपूर्वकं वर्णनं कृतमस्ति। आयुर्वेदानुसारं स्वास्थ्यरक्षणार्थं दोषानां साम्यावस्थायां स्थातुं आवश्यकमस्ति, यस्य कृते दिनचर्या, ऋतुचर्या, धारणीय-आधारणीय वेगान्, त्रय-उपस्तम्भादि, आहार-विहारम्यां सम्बन्धितानां निर्देशानां पालनं आवश्यकं अस्ति।

प्राणिनां जीवनस्य एवं स्वास्थ्यस्य सर्वाति महत्वपूर्णं एवं मूलाधारं 'आहार' एव अस्ति, अतएव त्रय-उपस्तम्भे सर्वप्रथमं आहारस्य गणना कृता अस्ति। आहारेणैव रसस्योत्पत्तिः, दोषाणां उत्पत्तिः एवं धातूनां निर्माणं भवति, आहारस्य अभावे शरीरस्य स्थितिः रक्षितु न शक्यते।

प्राणाः प्राणभृतमन्नऽन्नं लोकोऽभिधावति।
वर्णं प्रसादः सौस्वर्यं जिवितं प्रतिभा सुखम्।।
तुष्टिः पुष्टिर्बलं मेधा सर्वमन्ने प्रतिष्ठितमे।
—च.सू. 27 / 349-350

प्राणधारिणां प्राणं अन्नमस्ति। वर्णं प्रसन्नतां सुंदरस्वराणां अनुभूतिं, जीवनं, प्रतिभां, सुखं, संतोषं शरीरस्य पुष्टिं, बलं, मेधां एते सर्वे अन्नेनैव प्रतिष्ठिताः सन्ति, अर्थात् अन्नस्य प्राप्ते सति एतेषां स्थितिः भवति। अन्नं अथवा आहारं जीवनस्य आधारभूतेऽपि आहारं मात्रापूर्वकं ग्रहणेन एव तस्य (अन्नस्य) उत्तमगुणानां प्राप्तिः सम्भवः भवति। विषममात्रायण अन्नग्रहेण आहारेण विभिन्नप्रकाराः विकाराः उत्पन्नाः भवन्ति। अतः आहारं मात्रापूर्वकं ग्रहणं कर्तव्यम्।

आहारस्य मात्राऽपि अग्निबलानुसारेण भवितव्यम् मात्राशी स्यात्। आहारमात्रापुनरग्निबलोपेक्षिणी।

—च.सू.5 / 3

आहारस्य या मात्रा भोजनार्थी-जनस्य प्रकृतौ बाधां विना भोजनं पाचनं भवति, सैव भोजनस्य प्रामाणिकी मात्रा अस्ति। अन्नस्य पाचने, जठराग्निः एव प्रधानकारणमस्ति। जठराग्निः अपि निम्नलिखिता चर्तु प्रकारिका भवति। जठराग्नि प्रकाराः—

- ♦ विषाग्निः — आहारं विषमरूपे पाचयन् भवति धातुनाम् अपि विषमं करोति।
- ♦ तीक्ष्णाग्निः— अल्पभोजी जनस्य धातु शोषणं करोति।

¹रीडर, संहिता संस्कृत एवं सिद्धान्त विभागः, राजकीय आयुर्वेदमहाविद्यालयः एवं चिकित्सालयः, लखनऊ, ²पूर्वरीडरः एवं विभागाध्यक्षः, संहिता संस्कृत एवं सिद्धान्त विभागः राजकीय आयुर्वेदमहाविद्यालयः एवं चिकित्सालयः, वाराणसी



- ♦ मन्दाग्निः – आहारे विदाहः उत्पन्नं करोति ।
- ♦ समाग्निः— उचितमात्रायाम सेविताहारं पचयित्वा धातूनां समरूपे स्थापयति ।

मात्रापूर्वकं आहारस्य लक्षणम्—

- ♦ येन आहारेण उदरे पीडा (दबाव) न भवेत् ।
- ♦ हृदयस्य गतिसंबन्धे विकृतिः न स्यात् ।
- ♦ (उदरस्य) पार्श्वे पीडा न भवेत् ।
- ♦ उदरे अधिको गुरुता न स्यात् ।
- ♦ इन्द्रियाणि तृप्तानि स्युः ।
- ♦ क्षुधा—पिपासायाः शांति भवेत् ।
- ♦ आसनम्, शयनम् एवं गमनानि सुखकराणि भवेयुः ।
- ♦ श्वास—प्रश्वासयोः बाधा न भवेत् ।
- ♦ हसन् एव वार्तालाप करणे सुखं भवेत् ।
- ♦ सायंकाले एवं प्रातःकाले सुखपूर्वकं आहारस्य परिपाकं भवेत् ।
- ♦ बलस्य, वर्णस्य एवं शरीरस्य वृद्धिः भवेत् ।

हीनमात्रायां आहारेण हानिः—

- ♦ हीन मात्रायां कृतं आहारं बलं वर्णं एवं शरीरबृद्धेः क्षयार्थकरणं भवति ।
- ♦ अतृप्तिकरं भवति ।
- ♦ उदावर्त रोगस्य कारणं भवति ।
- ♦ दीर्घायुः कृते हानिकरं भवति ।
- ♦ वीर्यक्षयकर भवति ।
- ♦ ओजोवृद्धिः न करोति ।
- ♦ शरीरं मनः, बुद्धिं तथाच इन्द्रियाणां नाशयितुं भवति ।
- ♦ शरीरे अशोमां उत्पन्नयितुं समर्थः भवति ।

- ♦ अनेक प्रकारस्य वातरोगाणां कारकः भवति ।

अतिमात्रायां आहारेण हानिः—

- सर्वदोषानां प्रकोपः ।
- प्रकृपितवायोः लक्षणम्— शूलं, अनाहं, अंगमर्दं, मुखस्य शुष्कला, मूर्छा, चक्करस्य आगमनम्, अग्नेः विषमता, पार्श्वे पृष्ठदेशे एवं कट्यां जकड़ाहटं, सिराषु आकुञ्चनं एवं सिराषु जकड़ाहटं उत्पन्नं करोति ।
- प्राकृपितपित्तेः लक्षणम्— ज्वरं, अतिसारं, अंतर्दाहं पिपासा, मदं, भ्रम, एवं प्रलापः उत्पन्नं करोति ।
- प्रकृपितेः कंफस्य लक्षणम्—वमनं भोजने, अरुचिः, अपचनम्, शीतज्वरम्, आलस्यं तथा शरीरे गुरुता उत्पन्नं करोति ।

आहारस्य मात्रा गुरु एवं लघु द्रव्याणां अनुसारं अपि पृथक्—पृथक् भवति । गुरु द्रव्याणां आहारः कुक्षेः तृतीय मध्ये एकभागे अथवा कुक्षे अर्धभाग पर्यन्तमेव ग्रहणं कर्तव्यम् । लघ्वाहार द्रव्यैः अपि कुक्षिं पूर्णरूपेण न पूरितव्यम् । अनेन प्रकारेण भोजनेन अग्निः स्व—उचित—मात्रायां स्थिता भवति ।

मात्रापूर्वकं खादितं पथ्याहारस्य अपि चिंता, क्रोधः दुःख—शय्या—जागरणादिकारणेन सम्यक् रूपेण पोचनं न भवति । अतः मानसिक भावानां अपि पाचनापरि महत्वपूर्ण प्रभाव भवति ।

मात्रापूर्वकं हितकराहारस्य ग्रहणमपि उचितकाले । ग्रहणेन, तस्य पूर्णफलं प्राप्तं भवति, एवंच तत् सर्वं आहारं शरीरं बलं, वर्णं, आयुः, इत्यादिना परिपूर्णं करोति—

कालभोजनमारोग्यकाराणाम् ।

—च.सू. 25 / 40



अर्थात् आरोग्यकर्तुं भावेषु समयेन भोजनं श्रेष्ठं वर्तते। आचार्य चरकेन अष्ट आहार-विधिविशेष यतनं इत्यस्यान्तर्गते आहारस्य गुरु-लघुप्रकृतेः अतिरिक्तं अन्यभावानां अपि वर्णनं कृतमस्ति, यस्य ध्यानं रक्षयित्वा आहारस्य ग्रहणं कर्तव्यम् यथा-

- ♦ प्रकृतिः
- ♦ कारणः
- ♦ संयोगः
- ♦ राशिः
- ♦ देशः
- ♦ कालः
- ♦ उपयोगम् संस्थाः
- ♦ उपयोक्ताः

अष्ट आहारविधि विशेषायतनस्य सहैव आचार्य आहारविधि विधानमपि ध्याने स्थापयित्वा आहार-ग्रहणकर्तुं निर्देशः कृतवान् अस्ति।

आहार विधि-विधानम्-

- ♦ उष्णम्।
- ♦ स्निग्धम्।
- ♦ मात्रापूर्वकम्।
- ♦ भोजनस्य पचिते सति।
- ♦ वीर्यस्य अवरुद्धम्।
- ♦ स्वकीय मनसि अनुकूल स्थानोपरि।
- ♦ अनुकूल-सामग्री-सहितम् आहार न तु शीघ्रम् न तु अधिकेन विलम्बेन, न तु भाषित सहितेन, न तु हसितेन, स्वकीया आत्मायाः विचारं कृत्वा, आहार द्रव्ये मन-संयोज्य भोजनं कर्तव्यम्।

आहारं उष्णं एवं स्निग्धरूपेण ग्रहणकरणेन जठराग्निः प्रबला भवति, एवं वातस्थ अनुलोमन भवति, येन आहारस्य पाचनं सम्यक रूपेण भवति।

पूर्व ग्रहीत-आहारस्य पचिते सति एवं पुनः भोजनं ग्रहणं कर्तव्यं भवति, यतः अजीर्णावस्थायां भोजनेन सर्वदोषाणां प्रकोपः भवति। आयुर्वेदानुसारं एतादृशाणां आहारद्रव्याणां नियमितं सेवनं आवश्यकम् येन उत्तमं स्वास्थ्यनिर्माणं भवेत् अपि च रोगाणां उत्पत्तिः अपि न भूयात्। (च.सू. 5/13)

स्वभावेनैव हितकरं आहारेषु-साठी तन्दुलं, शालिधानस्य तन्दुलं, भूंगस्य सूपम्, सेंधालवणम्, आमलकम्, यवस्य पिष्टान्नं, दुग्धम्, जांगलमांसम् मधु इत्यादिकाः सन्ति। एतेषां नित्यसेवनं कर्तुं शक्यते। (च.सू. 5/12)

आचार्यवर्यैः अहितकर भूतकारिणेन वैरोधिकं आहारं ग्रहीतुं निषेधस्य निर्देशः कृताः। (च.सू. 26/85)

वैरोधिकस्य आहारस्य घटकाः देश-कालः-अग्निः-मात्रा-सात्म्यं-वातादिदोषं-संस्कारः-वीर्यं-कोष्ठं-अवस्था-क्रमं-परिहारं-उपचारः-पाकं-संयोग-विरुद्धं-हृदय-विरुद्धं, संपद-विरुद्धं एवं विधि-विरुद्ध अस्ति। (च.सू. 26/86-87)

विरोधान्नस्य सेवनेन नपुंसकता, अंधापनं, विसर्प, जलोदरं, विस्फोटं, मस्तिष्क भ्रमं (पागलपनं) भगंदरं, मुर्च्छा, मदं, आध्मानं, गलग्रहं, पाण्डुरोगं, आमविषं, किलासं, कुष्ठरोगं, ग्रहणीरोगं, शोथं, अम्लपित्तं, ज्वरं, पीनसं एवं सन्तत्यां दोषं इत्यादि रोगाणि भवन्ति। विरोधान्नस्य सेवनं भृत्योः अपि कारणं भवति। (च. सू. 26/102-103) (अ.सं.सू-9)

विपरीतगुणस्तेषां स्वस्थवृत्ते विधिर्हितः।

समसर्वसं सात्म्यं समधातो प्रशस्येत्।

(च.सू. 7/41)

अर्थात् शारीरिक प्रवृत्तेः विरुद्धं गुणस्य सेवनं एव स्वास्थ्यवर्धकं भवति। वातादि प्रकृतियुक्तः

शेष पेज नं. 43 पर



परिषद् समाचार

मानसरोवर अमृत वैद्यम् पुरस्कार-2023 एवं वैद्य उद्धवदास मेहता स्मृति पुरस्कार-2023 वितरण समारोह का आयोजन

विश्व आयुर्वेद परिषद् एवं मानसरोवर ग्लोबल विश्वविद्यालय, सिहोर, संभाग, भोपाल के संयुक्त तत्वावधान में आयोजित ब्रह्मलीन श्री कमलाकांत तिवारी जी की स्मृति में मानसरोवर अमृत वैद्यम् पुरस्कार-2023 का सफलतापूर्वक आयोजन किया गया। संस्थापक ब्रह्मलीन श्री कमलाकांत तिवारी मेमोरियल अमृत वैद्यम पुरस्कार 2023 का आयोजन पंडित खुशी लाल शर्मा आयुर्वेदिक संस्थान में किया गया। विश्व आयुर्वेद परिषद्, उद्धव दास मेहता न्यास और मानसरोवर समूह के संयुक्त तत्वावधान में आयोजित इस कार्यक्रम में देश के शीर्ष वैद्यों को महर्षि अग्निवेश वैद्यम पुरस्कार, महर्षि चरक वैद्यम पुरस्कार और आचार्य महर्षि दृढबल वैद्यम पुरस्कार से सम्मानित किया गया। साथ ही नारी सशक्तिकरण को बढ़ावा देने के उद्देश्य से 10 महिला वैद्यों को भी सम्मानित किया गया। कार्यक्रम का शुभारंभ पूर्व गृह मंत्री उमाशंकर गुप्ता के सानिध्य में मुख्य अतिथि अध्यक्ष भारतीय चिकित्सा पद्धति, राष्ट्रीय आयोग, वैद्य जयंत देव पुजारी, विशिष्ट अतिथि वैद्य संजीव शर्मा कुलपति राष्ट्रीय आयुर्वेद संस्थान जयपुर, विश्व आयुर्वेद परिषद् के राष्ट्रीय सह संगठन सचिव डॉ. केके द्विवेदी, डॉ महेश व्यास, विभाग अध्यक्ष ऑल इंडिया इंस्टिट्यूट ऑफ आयुर्वेद, डॉ उमेश शुक्ला प्राचार्य खुशी लाल शर्मा आयुर्वेदिक महाविद्यालय और मानसरोवर समूह के आयुर्वेद डायरेक्टर डॉ. बाबुल ताम्रकार सहित तीनों आयुर्वेद महाविद्यालय के प्राचार्य ने दीप प्रज्वलित कर किया। मानसरोवर ग्रुप ऑफ इंस्टीट्यूट्स के चीफ एग्जीक्यूटिव डायरेक्टर इंजी. गौरव तिवारी ने ब्रह्मलीन श्री कमलाकांत तिवारी मेमोरियल अमृत वैद्यम पुरस्कार के उद्देश्य पर प्रकाश डाला। उन्होंने महर्षि अग्निवेश अमृत वैद्यम पुरस्कार से पुरस्कृत वैद्य सुनील कुमार जोशी, देहरादून महर्षि चरक वैद्यम पुरस्कार से पुरस्कृत वैद्य आर. गोविंदा रेड्डी, मुम्बई और आचार्य महर्षि दृढबल अमृत वैद्यम पुरस्कार से पुरस्कृत वैद्य जीतेंद्र वरसाकिया, नई दिल्ली को शुभकामनाएं प्रेषित की। इस सभी को रुपये इक्कीस हजार नगद, स्मृति चिन्ह, अंगवस्त्रम्, श्रीफल एवं प्रमाण-पत्र प्रदान कर सम्मानित किया गया। उन्होंने बताया कि पुरस्कार हेतु देश भर से अलग-अलग श्रेणियों में 500 से ज्यादा प्रविष्टियां प्राप्त हुई थी, जिनमें से श्रेष्ठ का चयन किया गया। कार्यक्रम को आगे बढ़ाते हुए पूर्व मंत्री उमाशंकर गुप्ता ने कहा कि आयुर्वेद का महत्व पुनर्स्थापित हो रहा है। आज विश्व में आयुर्वेद की पहचान है, इसमें शिक्षण संस्थानों से जुड़े वैद्यों का बड़ा योगदान है। इसी क्रम में राष्ट्रीय आयुर्वेद संस्थान जयपुर के कुलपति डॉ संजीव शर्मा ने कहा कि आयुर्वेद को आगे ले जाने के लिए हमारी शिक्षा, अनुसंधान, और उद्योग में गुणवत्ता जरूरी है। अध्यक्षीय उद्बोधन देते हुए वैद्य जयंत देव पुजारी ने कहा कि शोध हमारी जिज्ञासा को बढ़ाता है। विद्यार्थियों को इस क्षेत्र में आगे बढ़ने के लिए प्रोत्साहित करने की आवश्यकता है।

भाई उद्धव दास मेहता न्यास द्वारा आयोजित अखिल भारतीय स्नातकोत्तर निबंध प्रतियोगिता में प्रथम स्थान पर रहे वैद्य भानु प्रताप, रायपुर; द्वितीय स्थान पर वैद्य नैसी जैयशैली, कर्नाटक; तृतीय स्थान पर वैद्य पारुल गुप्ता, दिल्ली; को पुरस्कृत किया गया। इन विजेताओं को क्रमशः रुपये इक्कीस हजार, ग्यारह हजार, एवं सात हजार नगद, प्रशस्ति पत्र, अंगवस्त्रम् एवं श्रीफल प्रदान कर सम्मानित किया गया। इस असवर पर प्रदेश के दस महिला चिकित्सकों को भी प्रशस्ति पत्र अंगवस्त्रम् एवं श्रीफल प्रदान कर सम्मान किया गया। कार्यक्रम में वैद्य राम प्रताप सिंह राजपूत, वैद्य सौरभ मेहता मानसरोवर आयुर्वेदिक मेडिकल कॉलेज के प्राचार्य डॉ अनुराग सिंह राजपूत, श्री साई मेडिकल कॉलेज के प्राचार्य डॉ भारत चौरागड़े, डॉ हेमंत कुमार चौहान, डॉ. मधुसूदन पांडे, डॉ सतीश शर्मा, डॉ अशोक गुप्ता, डॉ मनीषा राठी, डॉ सचिन खेडिकर, डॉ मदन मोहन, डॉ स्वाति जैन, डॉ. सुभाष खाम्बरा सहित प्रदेश के सम्मानित वैद्यगण, बड़ी संख्या में मानसरोवर समूह की शिक्षक शिक्षिकाएं और विद्यार्थी गण मौजूद रहे। कार्यक्रम का सम्पूर्ण संयोजन वैद्य गोपाल दास मेहता ने सफलतापूर्वक सम्पन्न किया।



भोपाल में चरक जयन्ती का आयोजन

विश्व आयुर्वेद परिषद् एवं मानसरोवर ग्रुप ऑफ इंस्टीट्यूशन्स के अंतर्गत मानसरोवर आयुर्वेदिक मेडिकल कॉलेज, श्री साईं आयुर्वेदिक मेडिकल कॉलेज, मानसरोवर ग्लोबल यूनिवर्सिटी फ़ैकल्टी ऑफ आयुर्वेदा के संयुक्त तत्वावधान में चरक जयन्ती महोत्सव का भव्य आयोजन किया गया। 16 से 21 अगस्त सप्ताह भर तक जारी रहने वाले इस आयोजन में चरक संहिता अखण्ड पारायण का आयोजन किया गया। इस अवसर पर मानसरोवर ग्रुप के प्रो. चांसलर गौरव तिवारी ने कहा कि ब्रह्मलीन श्री के के तिवारी जी की स्मृति में यह सम्मान आयुर्वेद के क्षेत्र में बेहतरीन कार्य कर रहे लोगों को सम्मानित करने और जन जन में आयुर्वेद के प्रति जागरूकता लाने का एक प्रयास है। कुलाधिपति श्रीमती मंजुला तिवारी ने कहा कि वैद्य का शाब्दिक अर्थ ही है विद्या से युक्त। इससे पहले चरक जयन्ती के दिन श्लोक वाचन एवं चित्रकला प्रतियोगिता आयोजित की गई, जिसमें बड़ी संख्या में विद्यार्थियों ने बढ़-चढ़ कर हिस्सा लिया। वहीं 19 अगस्त को तात्कालिक विषय प्रस्तुति शास्त्रार्थ प्रतियोगिता आयोजित की गयी। कार्यक्रम में मुख्य रूप से मानसरोवर ग्रुप के आयुर्वेद संचालक डॉ. बाबुल ताम्रकर, फ़ैकल्टी ऑफ आयुर्वेद, एम. जी. यू. के डीन डॉ. सतीश चंद्र शर्मा, श्री साईं इंस्टीट्यूट के प्राचार्य डॉ. भारत चौरागड़े, मानसरोवर आयुर्वेदिक मेडिकल कॉलेज के प्राचार्य डॉ. अनुराग सिंह राजपूत और तीनों महाविद्यालयों के डीन डॉ. सचिन खेडिकर, डॉ. मनीषा राठी, वरिष्ठ प्राध्यापक डॉ. एन. के. प्रसाद, डॉ. अशोक गुप्ता, डॉ. कृष्ण कुमार तिवारी, डॉ. प्रीति तिवारी, डॉ. स्वाति व्यास, डॉ. ध्रुव तिवारी, डॉ. अपर्णा, डॉ. मीनाक्षी, डॉ. अक्षय सहित बड़ी संख्या में अध्यापक और विद्यार्थीगण मौजूद रहे।

दिनांक 20/8/23 दिन रविवार को विश्व आयुर्वेद परिषद् जबलपुर महाकौशल प्रांत के तत्वावधान में संसार के सर्वश्रेष्ठ चिकित्सा शास्त्र के जनक एवं भगवान शेषनाग के अवतार माने जाने वाले महर्षि चरक का जन्मोत्सव मनाया गया, जिसमें आयुर्वेद विद्या के चिकित्सक एवं छात्रों ने चरक संहिता के सिद्धांतों की चरक शपथ ग्रहण की। कार्यक्रम में महर्षि चरक द्वारा बताए गए चिकित्सा एवं जीवन सिद्धांत पर वक्ताओं द्वारा संक्षिप्त विचार प्रस्तुत किये गये। कार्यक्रम विश्व आयुर्वेद परिषद् के डॉ. मुकेश पाण्डेय, डॉ. कमलेश गुप्ता एवं डॉ. शैलेश सिंह चौहान की अध्यक्षता में संपन्न हुआ, जिसमें आयुर्वेद कालेज के प्राचार्य डॉ. एल एल अहिरवाल, डॉ. पंकज मिश्रा, डॉ. आर के गुप्ता, डॉ. आर के तिवारी जी, डॉ. विवेक ठाकुर, डॉ. कल्याण सिंह जी, डॉ. सुशील तिवारी, डॉ. धीरज सोनी, डॉ. सरिता साहू, डॉ. रीतेश सिंह ठाकुर, डॉ. राकेश कुमार, मनीष मेहरा एवं आयुर्वेद कॉलेज के इंटर्न छात्र छात्राओं एवं विश्व आयुर्वेद परिषद् के सभी चिकित्सक एवं जनतायु फार्मा के सहयोग एवं सभी की गरिमामयी उपस्थिति से यह कार्यक्रम सफलता पूर्वक संपन्न हुआ।

विभिन्न प्रदेशों में धन्वन्तरि जयन्ती एवं विश्व आयुर्वेद दिवस का आयोजन

विश्व आयुर्वेद परिषद् की भोपाल इकाई द्वारा भोपाल जिले की धन्वन्तरि जयन्ती, दिवाली मिलन समारोह एवम् भोपाल इकाई की बैठक का आयोजन दिनांक 19/11/2023 सिद्धेश्वरी मंदिर, तात्या टोपे नगर, भोपाल में आयोजित की गई। जिसमें विधायक श्री रामेश्वर शर्मा एवं विधायक श्री पी. सी. शर्मा उपस्थित थे। इस अवसर पर भोपाल जिले के जिलाध्यक्ष डॉ. एच.सी. खाम्बरा जी, उपाध्यक्ष डॉ. मदन कुशवाह, उपाध्यक्ष डॉ. परमेश्वर रघुवंशी एवं उपाध्यक्ष डॉ. विशाल शिवहरे एबम सह सचिव डॉ. दीपक रघुवंशी जी सहित अनेक आयुर्वेद के छात्रों की उपस्थिति थी। संयोजक वैद्य सौरभ मेहता सचिव विश्व आयुर्वेद परिषद्, भोपाल रहें।



दिनांक 2/11/2023 को राजकीय आयुर्वेदिक चिकित्सालय 15 शैय्या कोर्ट एरिया, बस्ती में विश्व आयुर्वेद परिषद जनपद शाखा-बस्ती की बैठक प्रांतीय कार्यकारिणी के निर्देशानुसार प्रांतीय उपाध्यक्ष डॉ ज्वाला प्रसाद मिश्रा की अध्यक्षता में संपन्न हुई। बैठक में क्षेत्रीय आयुर्वेदिक एवं यूनानी अधिकारी डॉक्टर राम शंकर गुप्ता, डॉ प्रकाश चंद्र त्रिपाठी, चिकित्सा प्रकोष्ठ प्रभारी, डॉक्टर प्रभाशंकर मल्ल, डॉ भरत जी पांडे विशेष आमंत्रित सदस्य उत्तर प्रदेश की गरिमामयी उपस्थिति में सर्वसम्मत से जनपद बस्ती की कार्यकारिणी का गठन किया गया। जनपद बस्ती के पूर्व क्षेत्रीय आयुर्वेदिक एवं यूनानी अधिकारी डॉ विजय कुमार श्रीवास्तव ने कार्यक्रम का संचालन करते हुए कहा कि इस बैठक में आयुर्वेद के संबंध में जनहित के लिए आवश्यक विचार-विमर्श किया गया और बताया कि आयुर्वेद को हम जन-जन तक पहुंचा कर लाभान्वित करने की कार्य योजना की रूपरेखा को विस्तृत रूप में तैयार किया जा रहा है। जनपद बस्ती के कार्यकारिणी के गठन के संबंध में आवश्यक कार्यवाही की गई। जिसमें अध्यक्ष डॉ विजय कुमार श्रीवास्तव, उपाध्यक्ष (पुरुष) डॉ भरत जी पांडे, उपाध्यक्ष (महिला) डॉक्टर लक्ष्मी सिंह, सचिव डॉक्टर अरविंद कुमार, कोषाध्यक्ष डॉ श्रृंखला श्रीवास्तव, चिकित्सा प्रकोष्ठ प्रभारी डॉक्टर रमाकांत द्विवेदी, प्रकोष्ठ प्रभारी (महिला) डॉक्टर शबनम जहां, संपर्क प्रकोष्ठ डॉ प्रदीप कुमार पाल को नामित किया गया। मीडिया प्रभारी डॉ लक्ष्मी सिंह ने बताया की उक्त क्रम में प्रांतीय आयुर्वेदिक एवं यूनानी चिकित्सा सेवा संघ की भी बैठक संपन्न हुई। बैठक में डॉ हरीश, डॉक्टर वीरेंद्र बहादुर, डॉ इंद्र बहादुर, डॉ अरुणेंद्र, डॉ के आर, डॉ नीरा, डॉ ज्योति, डॉ रविंद्र, डॉ इंद्रेश कुमार आदि उपस्थित रहे।

दिनांक 02/11/2023 को धन्वंतरि जयंती व विश्व आयुर्वेद दिवस के उपलक्ष्य में एक कार्यक्रम गंगाशील आयुर्वेदिक मेडिकल कॉलेज, बरेली में विश्व आयुर्वेद परिषद बरेली व गंगाशील आयुर्वेदिक मेडिकल कॉलेज के संयुक्त प्रयास से किया गया। इसमें बरेली के समस्त आयुर्वेद कॉलेज के छात्रों-छात्राओं तथा पीलीभीत आयुर्वेद कॉलेज ने प्रतिभाग किया। एक प्रतियोगिता क्विज के रूप में की गई जिसमें अष्टांग हृदय 1-15 की प्रश्नोत्तरी को लिया गया। इसमें प्रथम स्थान पर गंगाशील आयुर्वेद कॉलेज एवं द्वितीय स्थान पर धन्वंतरि आयुर्वेदिक कॉलेज की टीम रही। दोनों टीम को ट्रॉफी के साथ प्रतिभागियों को प्रमाणपत्र भी दिये गये। इस कार्यक्रम में विश्व आयुर्वेद परिषद के अखिल भारतीय संगठन सचिव प्रो. योगेश चंद्र मिश्र, विश्व आयुर्वेद परिषद बरेली के संरक्षक डा. वीरेंद्र कुमार, अध्यक्ष डा. राजीव सक्सेना, सचिव डा. अनिमेष मोहन व अन्य सदस्य रहे। कॉलेज के सभी फैंकल्टी का पूर्ण सहयोग रहा।

दिनांक 8/11/2023 को विश्व आयुर्वेद परिषद, उत्तर प्रदेश के चिकित्सा प्रकोष्ठ के तत्वावधान में भगवान धन्वंतरि जयंती एवं राष्ट्रीय आयुर्वेद दिवस, कलश चिकित्सालय तारामंडल रोड, गोरखपुर में बहुत ही धूमधाम से मनाया गया। इस कार्यक्रम में परिषद के लगभग 40 चिकित्सकों ने प्रतिभाग किया। सर्वप्रथम भगवान धन्वंतरि के चित्र पर माल्यार्पण कर दीप प्रज्ज्वलन डॉ प्रकाश चंद्र त्रिपाठी, डॉ डी पी सिंह, डॉ ज्वाला प्रसाद मिश्रा, डॉ संतोष ओझा, डॉ प्रभा शंकर मल्ल ने किया। तदुपरांत चिकित्सालय के स्टाफ द्वारा धन्वंतरी वंदना की गई। सभी उपस्थित चिकित्सकों ने पुष्प अर्पित कर धन्वंतरि भगवान का वंदन किया। इस अवसर पर 'जनमानस में आयुर्वेद' के महत्व विषय पर संगोष्ठी का आयोजन किया गया। मुख्य वक्ता के रूप में डॉ दिनेश कुमार सिंह ने विस्तार पूर्वक भगवान धन्वंतरि के बारे में बताया और आयुर्वेद को जन जन कैसे पहुंचाया जाए इस पर चर्चा की। सभा की अध्यक्षता डॉ डी पी सिंह और विशिष्ट अतिथि डॉ ज्वाला प्रसाद मिश्रा और डॉक्टर प्रभा शंकर मल्ल जी रहे। सभा का संचालन चिकित्सा प्रकोष्ठ के प्रदेश प्रभारी डॉ प्रकाश चंद्र त्रिपाठी ने किया। सभी चिकित्सकों को विश्व आयुर्वेद परिषद से जुड़ने के लिए धन्यवाद दिया और नए चिकित्सकों को जुड़ने के लिए आह्वान किया। कलश चिकित्सालय के निदेशक डॉ संतोष ओझा और सविता ओझा ने भोजन के बाद सभी अतिथियों को औषधीय पौधा देकर धन्यवाद ज्ञापित किया।



कुशीनगर जिले के कसया में विश्व आयुर्वेद परिषद की जनपद इकाई द्वारा धन्वंतरि जयंती को आयुर्वेद दिवस के रूप में सरस्वती शिशु मंदिर कसया में समारोह पूर्वक मनाया गया। इस अवसर पर मुख्य अतिथि के रूप में बोलते हुए लवकुश पांडे ने कहा कि अमृत कोई घोल पदार्थ नहीं है बल्कि साधना की एक उच्चतम इकाई है। जब भगवान हृदय देश में आ जाते हैं, तो आसुरी संपत्ति हमेशा हमेशा के लिए मिट जाती है, केवल देवी संपत्ति ही जो अमृत रूप में है, वहीं शेष बसता है, यही अमृत है। सुरेश गुप्त ने कहा कि आयुर्वेद को पंचम वेद की संख्या दी जाती है। लक्ष्मी पूजा के पूर्व भगवान धन्वंतरि की पूजा की जाती है, सबसे बड़ा धन निरोगी काया है। इस अवसर पर बोलते हुए डॉक्टर अरविंद पति त्रिपाठी ने कहा कि आयुर्वेद भारत की प्राचीनतम विधा में से एक है। इसे देकर भगवान धन्वंतरि ने मानव मात्र के कल्याण का सुगम मार्ग प्रशस्त कर दिया। इस अवसर पर प्रमुख रूप से रामजी सिंह प्रधानाचार्य सरस्वती शिशु मंदिर कसया, देवानंद आचार्य जी, विद्यालय के सभी आचार्य गण एवं बच्चे उपस्थित रहे।

धन्वंतरि जयंती (आठवें राष्ट्रीय आयुर्वेद दिवस) की पूर्व संध्या पर होटल अजय इंटरनेशनल में विश्व आयुर्वेद परिषद प्रयागराज के तत्वावधान में धन्वंतरि जयंती समारोह का आयोजन किया गया। कार्यक्रम का शुभारंभ भगवान धन्वंतरी के पूजन-अर्चन दीपदान एवं माल्यार्पण के साथ हुआ। इस अवसर पर सम-सामयिक रोगों पर चर्चा की गई। कार्यक्रम के मुख्य अतिथि अपर मेला अधिकारी डॉ विवेक चतुर्वेदी जी रहे तथा अध्यक्षता डॉ जे. नाथ (अध्यक्ष, विश्व आयुर्वेद परिषद, प्रयागराज) ने की। विश्व आयुर्वेद परिषद के राष्ट्रीय कार्यकारिणी सदस्य एवं चिकित्सक प्रकोष्ठ सह प्रभारी वैद्य प्रेमशंकर पाण्डेय जी कार्यक्रम के मुख्य वक्ता रहे एवं विशिष्ट अतिथि प्रांतीय सचिव डॉ एस. एस. उपाध्याय एवं डॉ वी० एन त्रिपाठी रहे। इस अवसर पर आयुर्वेद के क्षेत्र में किए गए कार्यों एवं योगदान हेतु प्रयागराज जनपद के दो शल्य चिकित्सक डॉ वी० एन० त्रिपाठी एवं डॉ शंकर मिश्रा को "धन्वंतरि सम्मान 2023" से सम्मानित किया गया तथा सुश्री प्रतीक्षा प्रजापति (सुपुत्री डॉ जे. नाथ) को बिहार लोक सेवा आयोग में MEO पद पर चयनित होने पर अंगवस्त्रम देकर सम्मानित किया गया। इस अवसर पर मुख्य वक्ता वैद्य प्रेम शंकर पाण्डेय जी ने भगवान धन्वंतरि तथा धन्वंतरि संप्रदाय (शल्य चिकित्सकों) के बारे में बताया। उन्होंने आजकल तेजी से फैल रहे ज्वर और उससे संबंधित जोड़ों के रोग की आयुर्वेदिक चिकित्सा व्यवस्था बताई। उपस्थित चिकित्सकों का स्वागत चिकित्सक प्रकोष्ठ के प्रांतीय सह-प्रभारी, डॉ एम० डी० दुबे ने किया तथा परिषद के कार्यों एवं गतिविधियों के बारे में भी बताया। विशिष्ट अतिथि प्रांतीय सचिव डॉ सुधांशु शंकर उपाध्याय जी ने आयुर्वेद शल्य चिकित्सा की विशेषज्ञता के बारे में बताया तथा इसको और बढ़ावा देने की बात कही। मुख्य अतिथि डॉ विवेक चतुर्वेदी जी ने कहा आयुर्वेद एक सशक्त चिकित्सा पद्धति एवं जीवन दर्शन है, इसे अपनाकर हम नीरोग रह सकते हैं। सभा का संचालन वैद्य नरेंद्र कुमार पाण्डेय (सचिव, विश्व आयुर्वेद परिषद, प्रयागराज) ने किया तथा धन्यवाद ज्ञापन परिषद के वरिष्ठ सदस्य डॉ बी. एस. रघुवंशी जी ने किया। इस अवसर पर डॉ आशुतोष मालवीय, डॉ बी. डी त्रिपाठी, डॉ संजय बरनवाल, डॉ सतीश चंद्र दुबे, डॉ राजेंद्र श्रीवास्तव, डॉ राजेश मिश्रा, डॉ कमल नयनम दुबे, डॉ अतुल पाण्डेय, डॉ अर्चना पाण्डेय, डॉ रास बिहारी मौर्य, डॉ रंजना त्रिपाठी, डॉ ममता मिश्रा आदि चिकित्सक एवं आयुर्वेद प्रेमी कई गणमान्य नागरिक भी उपस्थित रहे। सभा में झंडू इमामी लिमिटेड के औषधि प्रचार विशेषज्ञ डॉ पुण्डरीक अवस्थी ने झंडू की औषधियों की गुणवत्ता एवं मानकीकरण पर प्रकाश डाला। सभा का समापन परिषद मंत्र सर्वे भवंतु सुखिनः से किया गया।

धन्वंतरि जयंती के अवसर पर विश्व आयुर्वेद परिषद नेशनल मेडिकोज एसोसिएशन, आरोग्य भारती के संयुक्त तत्वावधान में स्वास्तिका डायग्नोस्टिक सेंटर, हरदोई में कार्यक्रम आयोजित किया गया। भगवान धन्वंतरि पूजन के बाद मुख्य अतिथि एडवोकेट इन्द्रेश्वर नाथ गुप्ता ने कहा कि आयुर्वेद हमारे देश की परम्परागत प्राचीन



चिकित्सीय पद्धति है। घर-घर आयुर्वेद का प्रचार-प्रसार हो, इसलिए इस दिन को शासन ने राष्ट्रीय आयुर्वेद दिवस घोषित किया है। कहा कि घर के रसोई घर में मौजूद मसालों में विभिन्न प्रकार के चिकित्सीय गुण मौजूद है। जिनसे तमाम रोगों का घरेलू इलाज किया जा सकता है। अधिकांश वनस्पतियों में औषधीय गुण मौजूद है। जिन्हें जानने की आवश्यकता है। कार्यक्रम के अध्यक्ष डा. सुरेश अग्निहोत्री ने इस अवसर पर मिलेट्स (मोटा अनाज) की उपयोगिता बताते हुए कहा कि इसे अपने दैनिक भोजन में इसका प्रयोग करने से पाचनतंत्र, डायबिटीज, हृदय रोग आदि कई प्रकार के रोग स्वतः ठीक हो जाते हैं। चिकित्सकों को भी अपने स्वास्थ्य की चिन्ता करने की सलाह दी। नेशनल मेडिकोज एशोसिएशन के डा. सीपी कटियार ने बताया कि भगवान धन्वन्तरि आरोग्य के देवता हैं। सभी निरोगी रहे सभी स्वस्थ रहें की भावना से चिकित्सक समाज की सेवा कर रहे हैं। एसोसिएशन देश के वनवासी, आदिवासी क्षेत्रों में निःशुल्क स्वास्थ्य शिविर लगाकर समाज की सेवा करता है। आरोग्य भारती के प्रांतीय उपाध्यक्ष डा. आलोक सिंह ने आयुर्वेद के महत्व पर कहा कि इस क्षेत्र में अभी शासन द्वारा बहुत अनुसंधान की आवश्यकता है। वैद्य वंशगोपाल मिश्र, सुशील कुमार वर्मा, डा. प अरुण मिश्र, डा. आयुषी मिश्रा, डा. तरु मिश्रा, डा. अजय अस्थाना ने अपने विचार व्यक्त किये। कार्यक्रम का संचालन पीलीभीत आयुर्वेदिक कालेज के पूर्व प्रोफेसर डा. नरेश चन्द्र त्रिपाठी ने किया। इस अवसर पर परिषद के महामंत्री प्रोफेसर डा. पीके चौहान, डा. अजय सिंह, संजीवनी क्लीनिक के संचालक डा. अनुराग शुक्ला, डा. वीर सिंह कटियार, डा. इन्दुरमन दीक्षित, डा. सीपी अवस्थी, डा. विद्या प्रकाश अवस्थी, डा. अमित सिंह, डा. मुनीष सिंह, डा. अशीष मिश्र, डा. मनोज त्रिवेदी, डा. इन्दु त्रिपाठी, डा. रश्मि, डा. नीरज पाठक, डा. कलीमउल्ला कुरेशी, डा. आरके गुप्ता, डा. रजनीश पाल, डा. पंकज मिश्रा, डा. अभिषेक, डा. प्रांजल सक्सेना, डा. अनुज म् गुप्ता, डा. एसएस त्रिवेदी, डा. सन्तोष शुक्ला, डा. अमित चौहान, डा. अंकित द्विवेदी, डा. प्रहलाद मिश्रा, डा. लाल खान आदि चिकित्सक उपलब्ध रहे।

काशी में धन्वन्तरी जयन्ती महोत्सव एवं राष्ट्रीय आयुर्वेद दिवस का आयोजन संयुक्त रूप से दिनांक 9 नवम्बर गुरुवार को महामृत्युंजय महादेव मन्दिर परिसर में मनाया गया। काशी मण्डल वैद्य सभा, आरोग्य भारती तथा अन्य संगठनों के कार्यकर्ताओं की अच्छी उपस्थिति रही। धन्वन्तेश्वर महादेव एवं धन्वन्तरि कूप की विशेष पूजा, वैज्ञानिक संगोष्ठी एवं वैद्य सम्मान का कार्यक्रम इस अवसर पर किया गया। मुख्य रूप से वैद्य सुरेश श्रीवास्तव ने इस कार्यक्रम का संयोजन किया। वैद्य ध्रुव कुमार अग्रहरी, वैद्य ए. सी. पाण्डेय, वैद्य मनीष मिश्र, वैद्य विजय राय, प्रो0 के. के. द्विवेदी, प्रो0 राकेश मोहन, वैद्य उमाकान्त श्रीवास्तव, डॉ0 एन. के. सिंह, आदि ने विशेष सहयोग किया।

Global Ayurveda Festival-23 was organized from 01 to 05 Dec 2023 at Thiruvananthapuram, Kerala. Vishwa Ayurveda Parishad was associate partner in the event. It was inaugurated by Honorable Central Ayush Minister Mr. Sarvanand Sonowal. The other dignitaries who blessed the occasions are Secretary Ayush, Prof. P. K. Prajapati, Prof. A K Singh, Prof. R N Acharya, Prof. Raghuram Bhat, Prof. Rakesh Sharma etc. It as attended by 4800 delegates from all over the country. More than 60 countries represented in the festival. Vishwa Ayurveda Parishad has organized a separate session on the theme Ayurveda@2047 in form of Ayurveda@2047 vision conclave which was chaired by Prof. Raghuram Bhat, President, NCISM, Prof. K. K. Dwivedi, Jt. Organization Secretary VAP. The speakers of the session were Dr. Surendra Chaudhary, Secretary VAP, Dr. Jailakshami Amal, Sri Krien, Sri Grish Momaya. Session coordinated by Dr. Vinod Kr. TG, Vd. Krishna Kumar President VAP, Kerala, Vd. Adarsh C. Ravi, Secretary VAP Kerala, Vd. J. Radhakrishna, Vd. Amal, Vd. Abhiram Hari and other members put all efforts to make it grand success. Special thanks to Vd. G. G. Ganagadharan and Dr. Suresh for organization of this mega event.