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AROGYACHINTAN PATRIKA

Modern day Janapadodhwansa: COVID-19

Corona Virus Disease (COVID-19) is a deadly infection caused by newly discovered Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2). It is named corona as its structure resembles a crown¹. The first case of this novel corona virus disease was reported in Wuhan province, China in late December 2019. Since then this respiratory disease has spread its root across the globe affecting millions of people. This COVID-19 pandemic has sent billions of people into lockdown and has adversely affected all the spheres of life.

The most common comorbid conditions with poor prognosis during this pandemic of **COVID-19** includes diabetes, chronic kidney disease, hypertension and cardiovascular disease. A strong immune system can help to tackle this infection.

Here comes the role of millennia old Ayurved science with knowledge imparted in its Samhitas and tenets to battle these ever-emerging pandemics caused by mutating virus or bacteria. Ayurved has described such diseases under the headings of Aupasargikarogas or janmar i.e. contagious diseases and Janapadodhwansa vikaras, the epidemics or pandemics.

सामान्यास्तद्वैगुण्यात्समानकालाःसमानलिङ्गाश्चव्याधयाऽभिनिर्वर्तमानाजनपदमुध्द्वंसयन्ति तेखल्विमेभावाःसामान्याजनपदेषुभवन्तिःतद्यथा – वायुः, उदकँ, देशः, कालइति।।

Acharya Charak has described **Janapadodhwansa** in details in Vimana Sthana Chapter 3.

औपसर्गिक रोगाश्च संक्रामन्ति नरान्नरम् । - स्.नि.५/३४

Janapadodhwansa literally means destruction of communities dissimilar in constitution, due to adversely affected four primary components of all living organisms- Vayu (air), Udaka (water), Desha (land) and Kala (season), resulting in simultaneous outbreak of diseases having similar symptoms.

COVID-19 is basically Aupasargika in nature due to its droplet spread from human to human, but when it attains the state of community spread, it becomes a Janapadodhvansa.

प्रसंगात गात्रसंस्पर्शात निःश्वासात सहभोजनत । सहशय्यासनाद्यापि वस्त्रमाल्यानुलेपनात ।। कुष्ठं ज्वरश्च शोषश्च नेत्राभिष्यंद एव च । औपसर्गिक रोगाश्च संक्रामन्ति नरान्नरम।। – सु.नि.५/३३–३४

Acharya Sushrut has described the spread of these vikaras by close contacts (bodily, food, sleep, clothes, etc.) and airway or droplet infection.

The regimen for such pandemics can be classified into two groups:

Pratibandhatmak (Preventive): Aushadhi (medidine) and anna sangrahan (collection of food and medicines), dinacharya (daily routine), rutucharya (seasonal routine), bramhacharya(celibacy), sadvrutta (code of conduct), rasayan and panchakarma, yog-tap-niyam, aarogya sikshan (health education), tvarit nidan (early diagnosis),

rakshoguna or vyadhikshamtva (immunity) to infections, etc.

व्याधिक्षमत्वं नाम व्याधि बलविरोधित्वं व्याध्युत्पादप्रतिबंधकत्वमिति।

- चक्रपाणि च.सू.२८/१६

Vyadhiniyantran (disease control):

In case of any disease condition, the basic principles of roga-rogipariksha or nidanpanchak helps to understand the pathology of the disease and crafting of appropriate formulations for disease management. Ayurved offers several time-tested classical formulations for the benefit of patients.

तमुवाच भगवानात्रेयः – ज्वरितस्य कायसमुत्यानदेशकालानभिसमीक्ष्य पाचनायं पानीयमुष्णं प्रयच्छन्ति भिषजः। ज्वरो ह्यामाशयसमृत्यः, प्रायो भेषजानि चामाशयसमृत्यानां विकाराणां पाचन–

Drinking of hot water in such conditions (jwar as manifestation of epidemic diseases) help in pachan of *Amashyastha* doshas.

a. Aoushadhi chikitsa & Panchkarma chikitsa:

विगुणेष्वपिखल्वेतेषुजनपदोध्द्वंसकरेषुभावेषुभेषजेनोपपाद्यमानानामभयंभवतिरोगेभ्यइति। येषांनमृत्युसामान्यंसामान्यंनचकर्मणाम्कर्मपश्चविधंतेषांभेषजंपरमुच्यते ।

Acharya Charak has described the importance of drug therapy as well as panchakarma in the management of Janopapdodhwansa (epidemic) diseases. Panchakarma therapy should be advocated keeping in mind the risk benefit ratio. Tila tel nasya can be beneficial.

b. Rasayan chikitsa

रसायनानांविधिवद्योपयोगः प्रशस्यतेशस्यतेदेहवृत्तिश्चभेषजैः पूर्वमुद्धतैः।।

Ayurved advocates its universal basic principle against prevention and control of any disease by use of Rasayana medicines to boost the immunity. Some of the time-tested classical formulations which are fit for prevention or nidanparivarjan of **COVID-19** include:

Vyadhikshamtva	nikshamtva Rasayan choorna, Suvarnamalini Vasant Laghumalini Vasant, Yashada Bhasma e	
Jwar and associated symptoms Samshamani Vati, Guduchi satva, Amrutarishta, Mahasudarshan choo Kalmegh, Laxmivilas rasa (nardeeya		
Pranvaha Srotas rasayan		
Individual herbs Tulsi, Yastimadhu, Kantakari, Amalak Haridra, Pippali, Shunthi, etc.		

Rasayan treatment essentially covers aspects of maintaining 'Agni' and 'Balance of Tri-dosha' and essential to boost immunity particularly of Pranavaha srotas. Thus, following the Ayurved way of living (preventive measures and regimens), consistently and carefully can help in maintenance of health and disease prevention.

¹ Cascella M, Rajnik M, Cuomo A, et al.

Madhumeha Kusumakar Rasa in Prameha Management

Prameha is a compound word formed of 'pra' (upasarga) and 'meha' (ksharane-dhatu) which means polyuria (pathological excessive urination). Acharya Charak (400–500 AD), an ancient Ayurved Physician has described प्रभूताविलमुलता (increased quantity,

frequency and turbidity of urine) as a major symptom of Prameha.

Following are the causative and risk factors associated with **Prameha**, as mentioned by Acharya Charak ages ago:

तत्रेमे त्रयो निदानादिविशेष:.....स सर्वो निदान-विशेष: - च.नि. ४/५

आस्यासुखं स्वप्नसुखं दधीनि ग्राम्यौदकानुपरसाः पयांसि । नवान्नपानं गुडवैकृतं च प्रमेहहेत्ः कफकृच सर्वम।। – च.चि. ६/४

Frequent and excessive intake of kapha-vitiating food: newly harvested grains and pulses consumed with ghee; meat of domesticated, marshy and aquatic animals; vegetables, tila (oil and cakes), wheat flour, milk-based sweets, liquid food (gruel) prepared of tila, rice and black gram), vilepi (a type of thick gruel) and sugarcane-based food preparations; milk, new wine, immature curd (curd which is mostly liquid and sweet); various foods that produces excess kapha, fat, and urine and indulging in lifestyle activities such as avoiding physical exercise; excessive sleep, bed rest and sedentary habits.

कफः सपित्तः पवनश्च दोषा मेदौँस्रशुक्राम्बुवसालसीकाः। मञ्जा रसौजः पिशितं च दृष्याः प्रमेहिणां, विंशतिरेव मेहाः ।। – च. चि. ६/८

Specific vitiation of kleda-kapha along with pachak-pitta, vata dosha and meda (loose fat), rakta (blood), shukra (semen and reproductive tissues), ambu (body fluids), vasa (muscle fat), lasika (lymph), majja (marrow), rasa (plasma), ojas (the nectar of all dhatus) and mamsa (muscle tissues) cause Prameha which is classified into 3 major types (Kaphaj-10, Pittaj-6 and Vataj-4) i.e. total 20 subtypes.

Acharya Sushruta has described similar types of Prameha as Apathyanimittaja prameha i.e. occurs due to unwholesome aahara and vihara. (Faulty diet & lifestyle). Whereas he went ahead to describe another type of Prameha named Sahaj Prameha caused due to Bija dosha i.e. genetic origin. Acharya Charak has described this type as Jatapramehi (caused due to bijadosha, hereditary factor or representation of kulaj vikar i.e. having family history) which is asadhya (incurable).

जातः प्रमेहीमधुमेहिनो वा न साध्य उक्तः स हि बीजदोषात।

ये चापि केचित कुलजा विकारा भवन्ति तांश्च प्रवदन्त्यसाध्यान ।। - च.चि. ६/५७

Also, Acharya Charak describes Prameha as 'प्रमेहोऽनुषङ्गिणाम्' (च.सू.अ. २५/४०) as it's managenent is not easy.

Out of the above described types of pramehas, kaphaj prameha are sadhya, pittaj are yapya and vataj as well as jatapramehi are asadhya. Prameha can be corelated with diabetes, a complex, chronic and metabolic disorder. It not only requires continuous medical care but also involves multifactorial risk-reduction strategies beyond glycaemic control. Diabetes is one of the most common and serious medical conditions human being has to face. There are estimated 72.96 million cases (11.8 % prevalence) of diabetes in adult population of India (National Diabetes and Diabetic Retinopathy Survey report for 2015-19). Nearly half (42%) of the people with diabetes in India are not aware of their disease status and are at risk of its vulnerability. India is also a home to around 135 million obese individuals and it is known that obesity is one of the main risk factors for diabetes?

It is closely related to Metabolic Syndrome. Metabolic Syndrome is a clustering of specific risk factors, namely, central obesity, raised blood pressure, impaired fasting glucose, raised triglycerides and low levels of high-density lipoprotein cholesterol (HDL-C). This cluster is triggered by insulin resistance causing hyper-insulinemia. The two major causes of insulin resistance are increased body fat (central obesity) and physical inactivity other than certain genetic/pro-genetic factors, unhealthy atherogenic diet, etc.²

Lifestyle modification is of prime importance in diabetes management. Physical activity should be improved as well as carbohydrates and high calorie foods should be avoided. All these measures improve insulin resistance. Weight loss improves insulin sensitivity (or reduces insulin resistance)³.

Madhumeha Kusumakar Rasa is a rationale herbomineral formulation offering a prime mehaghna classical kalpa, Suvarnayukta Vasant Kusumakar Rasa along with herbs beneficial in the management of prameha. Suvarnayukta Vasant Kusumakar Rasa is described as 'ayurvruddhikar' as uncontrolled diabetes is associated with a reduced life expectancy:

मन्दोत्साहमतिस्थूलमतिस्निग्धं महाशनम । मृत्युः प्रमेहरूपेण क्षिप्रमादाय गच्छति ।।

- च.नि. ४/५१

The ingredients like, Mamejak, Haridra, Amalaki, Guduchi, Asan in Madhumeha Kusumakar Rasa possess an excellent rasayan (antiaging), balya (antioxidant), shotha-nashak (anti-inflammatory), sthoulyahara (anti-obesity) or meda-nashak (hypolipidemic), vrushya (aphrodisiac), chakshushya (beneficial for eyes), yakrut balya (hepatoprotective) and meha-nashak (anti-diabetic and hypolipidemic) activity. Madhumeha Kusumakar Rasa is experimentally documented for blood glucose lowering action, it reduces insulin resistance, regulates lipid levels and has a protective effect on pancreatic tissue⁴.

Therefore, Madhumeha Kusumakar Rasa along with lifestyle modifications like diet control, nutrition and physical activity can play a vital role in the management of prameha and its upadravas.

¹BMJ Open Diabetes Research and Care 2020;8:e000965.

Madhumeha Kusumakar Rasa®

Uttam Pramehahari and Rasayan chikitsa

Effective in

Madhumeha and related Upadrava

- Madhumehajanya Netravikar
- Non- Healing wounds
- Dourbalya
- Indriya Shaithilya

Dosage & Anupan

1 to 2 Tablets once or twice a day with cow's ghee, lukewarm water or as per condition of the disease





Availability: 30 Tab. (Blister pack)

Diabetes & Metabolic Syndrome: Clinical Research & Reviews, Volume 13:1, 2019, 318-321.

³ Nutrition & diabetes, 7(6), e282.

⁴ Sponsor: Shree Dhootapapeshwar Limited, Performing Laboratory: Prin. K. M. Kundnani College of Pharmacy, To Study the Effect of Madhumeha Kusumakar Rasa in Dexamethasone-induced Insulin Resistance in Albino Wistar Rats. Registration No: 25/PO/ReBi/S/99 / CPCSEA, Dtd-10/03/1999, Ministry of Social Justice and Empowerment, Government of India.



Shilapravang Mouktik Yukta: A Sanjivani for Vardhakyavastha

Aging is a progressive process associated with declines in structure and function, impaired maintenance and repair systems, increased susceptibility to disease and death, and reduced reproductive capacity. Aging at biological level is the impact of the accumulation of a wide variety of molecular and cellular damage over a period of time resulting into a gradual decline in physical and mental capacity.²

It is reported that in 2001, 7.4% of total Indian population was above the age of 60 years, it increased to 8.6% in 2011 and in 2050 it is projected to increase to 19%. Globally, it is predicted that in the next 2-3 decades the number of elderly population (65 years and above) will double the number of children (below 5 years of age). It means the world will require more geriatricians than pediatricians.

Elderly population in India, suffer from both communicable as well as non-communicable diseases. More than 50% elderly people over the age of 70 years suffer from one or more chronic conditions. The chronic illnesses usually include hypertension, coronary heart disease, and cancer.³ Other common chronic conditions in elderly include type 2 diabetes mellitus and knee osteoarthritis. A decline in immunity results into an increased burden of communicable diseases. Additionally, they also face issues like impairment of special sensory functions like vision and hearing.

To improve the quantity and quality of life in elderly population, wholistic measures are being taken worldwide by setting up Geriatric clinics. In allopathy system of medicine in India, Geriatric medicine is a relatively new branch and evolving further as compared to the western world.

Ayurved the ancient Indian system of medicine had this strong vision and mentions a special branch for Geriatric care by the name Jara (Rasayan) Chikitsa.

कायबालग्रहोध्व्राङ्धगशल्यदंष्ट्राजरावृषान अष्टावङ्धगानितस्याहुश्चिकित्सायेषुसंश्रिता – वाग्भट

Acharya Vagbhatt has explained eight branches of Ayurved as-Kaya Chikitsa (Internal medicine), Bala Chikitsa (Pediatrics), Graha Chikitsa (Psychiatry), Urdhwanga Chikitsa (Diseases of Ear, Nose, Throat & Eyes), Shalya Chikitsa (Surgery), Danshtra Chikitsa (Toxicology), Jara Chikitsa (Rasayan-Rejuvenation and Geriatric care) and Vrusha Chikitsa (Vajikaran-Andrology).

Jara Chikitsa or Rasayan Chikitsa is a branch that exclusively deals with *vardhakya janya* (geriatric) diseases and their management through *Rasayan* therapy.

Rasayan is defined as:

"लाभोपायो हि शस्तानां रसादीनां रसायनम्"।। - च. चि.

"रसायनं च तत् ज्ञेयं यत्त् जरा व्याधि नाशनम्"। - शा.सं

''रसानाम् रस रक्तादीनाम् अयनम् आप्यायनम् रसायनम्''। – डल्हण

The world 'Rasayan' is composed of two words i.e. Rasa (nutrent fluid) and Ayana (body channels). It also means to obtain good quality body tissues and keep the body channels healthy the optimum nourishment to the dhatus.

Rasayan helps to increase the excellent quality of rasa-raktadi saptadhatu. Rasayan therapy essentially refers to the process of tissue nourishment & rejuvenation.

The benefits of Rasayan are as follows:

दीर्घमायुः स्मृतिं मेधामारोग्यं तरुणं वयः । प्रभावर्णस्वरौदार्यं देहेन्द्रियबलं परम् ।। वाक्सिद्धिं प्रणतिं कान्तिं लभते ना रसायनात । – च. चि.

Rasayan therapy imparts - longevity, memory, intelligence, health (freedom from disease), youthfulness, excellence of lustre, good complexion & voice, generosity, optimum strength of the physical body and the senses, replenishment of the vital fluids (dhatu) of the body, fulfilment of whatever is spoken and reverence of all people.

Rasayan therapy adheres to the two core objectives of Ayurved i.e. maintain and promote the positive health and to cure the disease. It is beneficial at Aahara Rasa (nutrient fluid) level, Agni (metabolic) level and Srotas (tissue) level. Many Rasayan drugs (herbs, minerals and formulations) like Guduchi, Gokshur, Shilajatu, Vanga bhasma, Suvarna Malini Vasant are documented for their antioxidant, immunomodulatory, adaptogenic, anti-stress and nutritive properties. Some Rasayan therapies have a action on specific tissue like Shukra dhatu (Reproductive tissue).

Rasayan therapy supports positive health for aging population and improve their quality of life measures. It is beneficial in degenerative conditions like osteoarthritis, osteoporosis, alzheimer's disease, anxiety, depression, cognitive impairment, parkinson's disease and genitourinary disorders (urinary incontinence).

Role of Shilapravang Mouktik Yukta in Vardhakyavastha (Aging): It is an excellent blend of ingredients like, Shilajatu, Vanga Bhasma, Mouktik Pishti, Suvarnamakshik bhasma, Bhimseni karpoor, Vanshalochan, Ela, Praval pishti, Gokshur and Guduchi satva exert beneficial effects for various types of geriatric disorders.

The ingredients present in **Shilapravang With Mouktik** are known for their Rasayan, Medhya, Vrushya, Balya, Pushtikar, Dhatuvriddhikar, Vatahar and Jeevaniya properties and can be beneficial in diseases related to old age to improve the Quality of Life measures and boost healthy aging naturally.

J Community Med Health Care. 2016; 1(1): 1003.

2 https://www.who.int/news-room/fact-sheets/detail/ageing-and-health

Shilapravang (With Mouktik) Effective in · Prameha · Dourbalya Mootradaha Ojakshaya Complications of Mootrakruchchhra Prameha: Premature ejaculation Burning sensation • Ashthila of Hands and Feet शिलाप्रवंग Debility · Klaibya Dosage 1 to 2 Tablets twice a day with milk or as directed by physician Availability: 40 Tab., 100 Tab.

Indian journal of community medicine: official publication of Indian Association of Preventive & Social Medicine, 33(4), 214–218.

Amlapitta Mishran Suspension for quick and lasting relief from Amlapitta

Amlapitta is the most common gastrointestinal disorder encountered in general practice. Amlapitta as a disease is decribed in Madhukosha Tika of Madhavnidan:

अम्लगुणोद्रिक्तं पित्तं अम्लपित्तम्। - मा.नि. अम्लपित्त १ टीका

Pachak pitta which is katu rasatmak in nature gets vitiated and becomes very amla, resulting into a disease called Amlapitta. Udrikta means 'increased or in excessive', i.e. there is quantitative and qualitative increase in pitta which leads to excess of amla guna.



According to Madhavnidan, there are various lifestyle factors contributing to the aetiology of amlapitta:

विरुद्धदुष्टम्लविदाहिपित्तप्रकोपिपानान्नभुजो विदग्धम्। पित्तं स्वहेतूपचितं पुरा यत्तदम्लपित्तं प्रवदन्ति सन्तः।।

- मा.नि



Amlapak

Consumption of viruddha (incompatible diet), dushta (contaminated), excessively sour, spicy and other pittaprakopi (pitta dosha vitiating) food and beverages cause agnimandya and results in Amlapitta.

Acharya Madhav has explained the symptoms of Amlapitta:

Pitta vidagdhata Annavidaha

अविपाकक्लमोत्क्लेशतिक्ताम्लोद्गारगौरवैः। हृत्कण्ठदाहारुचिभिश्चाम्लपित्तं वदेद्भिषक्।।' – मा.नि.



Patients with amlapitta present with symptoms like avipak (indigestion), klama (tiredness), utklesh (nausea), tikta and amlodagar (bitter and sour ercutation), gaurav (heaviness), hrida-kanthadaha (heartburn) and aruchi (loss of taste).

Acharya Madhav has classified Amlapitta in two types i.e. adhogami and urdhvagami, based on pitta gati (direction of movement) and has described their respective symptoms below:

तृड् – दाह – मूच्छां – भ्रम – मोहकारि प्रयात्यधो वा विविधप्रकारम्। हृष्ठास – कोठानलसाद – हर्ष – स्वेदाङ्गपीतत्वकरं कदाचित्।।– मा.नि.

Adhogami Amlapitta is a manifestation of symptoms such as thirst, burning sensation, black-out or fainting, delusion, illusion, nausea, skin lesions (hives), loss of appetite, excitement, profuse sweating, pallor, etc.

वान्तं हिरित्पीतक – नील – कृष्णमारक्त – रक्ताभमतीव चाम्लम्। मांसोदकाभं त्वितिपिच्छिलाच्छं श्लेष्मानुजातं विविधं रसेन।। भुक्ते विदग्धे त्वथवाँप्यभुक्ते करोति तिक्ताम्लविमं कदाचित्। उद्गारमेवंविधमेव कण्ठ – हृत्कुक्षिदाहं शिरसो रुजं च।। कर – चरण – दाहमौष्ण्यं महतीमरुचिं ज्वरं च कफपित्तम्। जनयित कण्डमण्डल-पिडकाशतिनिचितगात्ररोगचयम्।। – मा.नि. Urdhvagami Amlapitta is the most common prevalent phenotype and represents with symptoms like green, yellow, blue, black, red colour vomitus, which is excessively sour, sticky in nature, mixed with cough or of various taste. Sour or bitter eructation and vomitus are present after incomplete digestion of food or even in case of starvation or fasting. Other symptoms include burning sensation in throat, retrosternal region and abdomen, headache, burning sensation of hands and feet, heat sesation, distaste or anorexia, fever, other kapha-pitta related disorders and skin lesions with itching and rashes.

These pathophysiological factors described by Madhavnidan are in sync with those described by Yogaratnakar and can be correlated with Acid Peptic Disease (APD), a group of conditions including gastro-esophageal reflux disease (GERD), gastritis, gastric ulcer, duodenal ulcer, esophageal ulcer, etc. which are widely prevalent or increasing worldwide and attributed to changing lifestyles and dietary habits.

A survey of 1000 clinicians from India showed a high prevalence of GERD (39.2%), peptic ulcer disease (PUD, 37.1%) and non-ulcer dyspepsia (25.2%) with nearly 50% of patients requiring prompt endoscopy.¹

The causative factors described before such as dushta paan (contaminated beverages) and anna (food) are established as notable sources of *Helicobacter pylori*, *Escherichi coli*, *Entamoeba histolytica* and major causes of gastrointestinal disorders. Also, other pittaprakopi (pitta dosha vitiating) causes are responsible for mucosal damage in Amlapitta (APD). Due to mucosal damage, the stomach and duodenal lining becomes more susceptible to H. pylori infection. The symptoms described earlier by Madhavnidan are in sync with the common symptom of H. pylori infestation like abdominal pain, nausea, loss of appetite, frequent burping, bloating, heartburn, dysphagia, epigastric pain, etc.

Although, APD appear to be simple, they can further develop into serious medical complications, lead to increase in medical expenses for diagnosis, treatment and management. APD adversely affect the quality of life, decrease productivity of the patients and can also be a important cause of morbidity and mortality.

The stomach is the only organ in human body which secretes acidic fluid of pH 2 and such acidic gastric secretion is important for sterilization of bacteria in the ingested food, digestion and absorption of various nutritional factors (protein, iron, calcium and vitamin B₁₂). This gastric acid may damage the gastrointestinal tract therefore, body has various protective mechanisms, which include mucosal bicarbonate secretion and sphincter contraction of the gastroesophageal junction, to prevent gastric secretion-induced gastroesophageal damage. When these protective mechanisms fail, the low pH gastric acid secretion damages and irritates the gastrointestinal mucosa, resulting in diseases like gastroduodenal ulcers, gastroesophageal reflux disease (GERD), Barrett's esophagus, and functional dyspepsia.²

Modern medicine has a huge armamentarium to treat APDs which includes antacids, H2 receptor antagonists (e.g. famotidine, ranitidine, etc.) and proton pump inhibitors (omeprazole, rabeprazole, etc.). These medicines have their own limitations and are associated with various adverse effects. The common side

।। शास्त्रतत्त्वप्रकाशार्थं एषा चिन्तनपत्रिका ।।



effects of antacids include rebound hyperacidity and constipation.

Some months ago, in many parts of the world, ranitidine was recalled from the market over the fear of a potential cancer-causing contaminant N-Nitrosodimethylamine (NDMA) that can build up in the drug when stored for long periods. Long-term **Proton Pump Inhibitor** (**PPI**) therapy is reported to be associated with decreased bone mineral density (BMD) which increases the risk of fractures.

Therefore, there is need for research of new medication with no or minimum side-effects and good efficacy. Ayurved being the ancient Indian system of medicines is a rich database of medicines of herbal, mineral and animal origin for the management of acid peptic disorders. Moreover, Ayurved medicines are extensively studied and documented for their acid neutralising, cytoprotective and ulcer healing potential.

To manage the Amlapitta, *Yogaratnakar* has advised strengthening of pachan process with help of tikta rasa prominent medicines (bitters) including herbs and minerals:

पाचनं तिक्तबहुलं पथ्यं च परिकल्पयेत्। – योगरत्नाकर

Rationale of Amlapitta Mishran Suspension:

अम्लपित्तमिश्रणं तु शौक्तिकतिक्तभूयिष्ठम्। जयेदम्लपित्तजन्यां छर्दिमन्नविदाहजाम्।।

Amlapitta Mishran Suspension provides quick and long-lasting relief from symptoms of Amlapitta. It offers the benefits of Shouktik bhasma supported by tikta rasa prominent herbs like Vasa, Guduchi, Pittapapada, Nimba, Chirayta, Bhringaraj, Triphala, Patol and Yashtimadhu.

Shouktik Bhasma neutralises excessive stomach acid and offers prompt relief in symptoms like epigastric pain and burning sensation by virtue of its snigdha, ruchya, deepan, madhur properties.

Tikta rasa prominent herbs in Amlapitta Mishran gives relief from Amlapitta by virtue of their sheeta, hrudya, chhardihara, rasyan, balya, deepan, pachan, dahanashak, pittaghna, ruchya, kaphavataghna, shothagna, vranaropak, vishaghna, trishnanashak, shoolaghna properties.

The actions of individual herbs in Amlapitta Mishran are as follows:

Ingredient	Actions	
Vasa	Anti-emetic and anti-ulcer effect	
Guduchi	Anti-ulcer	
Parpatak	Anti-secretory, gastroprotective and in-vitro antacid activity	
Nimba	Control of gastric hypersecretion, gastroesophageal and gastroduodenal ulcer	
Chirayata	Anti- gastric ulcers activity	
Bhrungaraj	Anti-secretory and gastroprotective activity	
Triphala	Individually and in combination are documented to possess anti-ulcer and cytoprotective effect	
Patol	Anti-ulcer potential	
Yashtimadhu	Anti-ulcerogenic potential	
Shouktik Bhasma	Acid neutralising effect and anti-ulcer action	

Ingredients like Triphala, Guduchi, Yashtimadhu and Patola are documented to be a rich source of ellagic acid which possess anti-*H. pylori* activity. A study gives the evidence of preventive and therapeutic potential of ellagic acid against *H. pylori* induced gastroduodenal disease in humans. Ingredients like Pittapapada, Nimba, Vasa and Chirayata are tikta rasa prominent. They protect gastric mucosa and repair epithelial tissues.

Amlapitta Mishran Suspension is documented for its anti-ulcer effect in experimental model of indomethacin induced gastric ulcers in rats. It is indicated in the treatment of avipaak, amlodgar, aruchi, utklesh, hruddaha and parinamshoola.

Amlapitta Mishran Suspension is a Natural, Effective and Safe option for the management of Amlapitta.

AMLAPITTA MISHRAN

Quick and long-lasting relief from Amlapitta

Effective in

- Avipaak
- Utklesh
- Amlodgar
- Hruddaha
- Aruchi
- Parinamshoola

Shake well before use

Dosage & Anupan

1 to 2 tsf, twice or thrice a day preferably before meal or as per the condition of the disease



Availability: 200 ml and 450 ml bottle



- ¹ Rai, Ramesh & Gangadhar, A. & Mayabhate, Mayur. (2016). Clinical profiling of patients with Acid Peptic Disorders (APD) in India: a cross-sectional survey of clinicians. International Journal of Basic & Clinical Pharmacology. 6. 194. 10.18203/2319-2003.ijbcp20164779.
- Kinoshita Y, Ishimura N, Ishihara S. Advantages and Disadvantages of Long-term Proton Pump Inhibitor Use. J Neurogastroenterol Motil 2018; 24:182-196. https://doi.org/10.5056/jnm18001
- ³ Ronita De et al, Antimicrobial activity of ellagic acid against Helicobacter pylori isolates from India and during infections in mice, Journal of Antimicrobial Chemotherapy, Volume 73, Issue 6, June 2018, Pages 1595–1603, https://doi.org/10.1093/jac/dky079
- Vemula Sampath K, Chawada Mukesh B, Thakur Kapil S, Vahalia Mahesh K. Antiulcer activity of Amlapitta Mishran suspension in rats: A pilot study. Ancient Science of Life. 2012;32(2):112.



Stree Vyadhihari Rasa in **PCOS Management**

Polycystic Ovary Syndrome (PCOS) is one of the most common reproductive endocrinological disorders. It is clinically manifested in young women of reproductive age as oligo-ovulation, biochemical or clinical hyperandrogenism, hirsutism, male pattern baldness, acne, acanthosis nigricans (black coloured patches on the back of the neck) and ultrasound shows polycystic ovaries. The ovaries, in females with PCOS produce higher than normal amount of male hormones i.e. (androgens), causes imbalance of female hormones and menstrual irregularity. Ovulation does not take place and multiple small cysts tend to develop in the ovaries.

Its prevalence in India ranges from 3.7 to 22.5%. PCOS adversely influences the reproductive and psychological health in women. The prevalence of infertility in women with PCOS is estimated to vary between 70 and 80%.2 Obesity and insulin resistance are common findings in women with PCOS and the prevalence of obesity in women with PCOS is reported to be 30-75%.

Management of PCOS is aimed to identify and manage the current symptoms, address fertility and emotional concerns, as well as measures to cut down the risk of associated health issues. In obese women suffering from PCOS, weight loss improves fertility by restoring ovulatory cycles. A weight loss of 5-10% is found to reduce hyperandrogenism and insulin levels.4

Ayurved perspective of PCOS:

Ayurved seers have described majority of the gynaecological disorders under the heading of Yonivyapada. Some features associated with PCOS are closely related with some of types of Yonivyapada.

It is difficult to correlate PCOS to any specific condition or disease or syndrome described in Ayurved classics but the symptoms bear a resemblance to the terminologies defined as:

Anartava / Nashtartava: Aggravated vata and kapha dosha obstruct the passage of Artavavaha srotas resulting in absence of menstruation. Arajaska yonivyapad: Elevated pitta dosha vitiates the rajah leading to extreme emaciation & discoloration of the woman. Due to this there is absence of Artava or menstruation. Lohitakshaya vonivyapad: Oligomenorrhoea due to vitiation of vata-pitta dosha. Shushka yonivyapad: Aggravated vata produces retention of urine & faeces, dryness of vagina and severe pain. Vandhya yonivyapad: Vitiated vata dosha causes amenorrhoea and infertility. Shandi yonivyapad: Vitiated vata dosha causes beeja dusthi and amenorrhoea. Rajodushti and Ashtartava Dushti: Eight types of menstrual flow disorder due to vitiation of vata, pitta and kapha dosha.

Acharya Kashyap has explained the Pushpaghni Jatiharini in Kalpa Sthana and the features of this condition closely resembles the symptoms of PCOS.

> वृथा पुष्पं तु या नारी यथाकालं प्रपश्यति। स्थुललोमशगण्डा वा पृष्पघ्नी साऽपि रेवती।। - कश्यप

It mentions that the woman menstruates in time, but it is useless (Vyathpushpa i.e. anovulatory cycle), has hairy cheeks (hirsutism) and is sthula (obese). Thus, Pushpaghni Jatiharini appears to be a condition corelating with PCOS.

The pathogenic factors involved in PCOS are vitiated vata and kapha dosha, deranged rasa and meda dhatu (dushyas), vitiated artava (updhatu), artavavaha srotas, jatharaghni and dhatwaghni mandya.

Ayurved treatment for PCOS is aimed to address the above factors and it helps to restore the normal menstrual cyclical rhythm by

balancing the hormones. Some of the conventional medications in the management of PCOS are associated with serious adverse events and therefore holistic Ayurved approach is preferred.

Role of Stree Vyadhihari Rasa in PCOS:

Stree Vyadhihari Rasa is a rationale herbomineral combination of Sootikabharan Rasa (Suvarnayukta), Latakaranja Beej Ghana, Shatahva Beej, Karpasamoola, Trikatu and is processed in Lashuna swarasa and Asana kwath.

Sootikabharan Rasa possesses tridoshnashak, ushna, tikshna, lekhan and sarvaroghar properties. Latakaranj possesses tridoshshamak, vedanasthapak and rakta shodhak properties. It is reported to improve hyperinsulinemia, insulin resistance and hyperandrogonism, thereby promote ovulation in experimental model of PCOS.5 Shatahva Beej possesses vata-shlesmahar, shoolhar, yonishoolhar, pachak and hrudya properties. It is clinically documented to regulate menstrual cycle, improve menstrual blood flow and relieve menstrual pain. Karpasamoola possesses laghu, ushna, vatahar gun. It has hypolipidemic, antihyperglycemic and emmenagogue (stimulates or increases menstrual flow) activities. Trikatu possesses kaphashamak, sthoulyahar, medohar and mehahar actions. Lashuna possesses kaphashamak, vatashamak, anuloman and shulprashaman actions. Asana possesses shleshma har, mehahar and rasayan properties. Trikatu, Lashuna and Asana are reported for their anti-obesity and hypolipidemic actions and can be beneficial in overcoming the insulin resistance associated with PCOS.

Thus, ingredients of Stree Vyadhihari Rasa by virtue of their ushna, tikshna, lekhan, vata kaphahar, anuloman, shulprashaman, sthoulyahara, medahar and ovulation promoting actions help in the management of PCOS and alleviate its symptoms like anartava, sthoulya and vandhyatva. They act in synergy to normalize vata dosha especially the apana vayu and once the apana vayu is regulated the functions of organs in the apana kshetra are also normalized. The constituents like, Latakaranja, Karpasmoola, Lashuna and Shatavha, etc. act on artava-vahastrotas and helps in regularization of menstrual cycle.

Indian J Med Res 2019:150:333-44

Clinics (Sao Paulo, Brazil), 70(11), 765-769.

Indian J Endocr Metab 2019;23:257-62

4 https://www.intechopen.com/books/debatable-topics-in-pcos-patients/lifestyle-changesand-weight-loss-effects-in-pcos.

J Appl Pharm Sci, 2020; 10(02):072-076.



Availability: 30 Tab. (Blister pack)

water or as directed by the physician



'ग्रहण्याः रोगाः ग्रहणीरोगः।' – मा.निदान/ मधुकोष टिका.

Roga or vikruti associated with grahani (duodenum) an organ of gastrointestinal tract is called grahaniroga (Irritable Bowel Syndrome - IBS).

षष्ठी पित्तधरा नाम या कला परिकीर्तिता। पक्वामाशय मध्यस्था ग्रहणी सा प्रकीर्तिता।। ग्रहण्या बलमग्निर्हि सचापि ग्रहणींश्रितः।। – स्.उ. ४०/१६९

Grahani also described as Pittadhara kala, the 6th kala is the first part of the small intestine located between the stomach and the middle part of the small intestine or jejunum.

अग्नि अधिष्ठानमन्नस्य ग्रहणात ग्रहणी मता। – च.चि. १५/१६ तदधिष्ठानमन्नस्य ग्रहणाद् ग्रहणी मता सैव धन्वन्तरिमते कला पित्तधराव्हया।। – अ.हु.शा. ३/५०

Grahani is the ashray-sthana of Agni (jatharagni or pachakagni digestive enzymes) i.e. it is supported and nourished by the strength of Agni. Understanding the ashrayi-ashray-bhav between pitta and Agni, Acharya Sushrut has described grahani as Pittadhara, the 6th kala:

षष्ठी पित्तधरा नाम या चतुर्विधमन्नपानं मुपभुक्तमाशयात प्रच्युतं पक्वाशयोपस्थितं धारयति। – सु.शा. ४/१८

Grahani is responsible for grahan (power to restrain downward movement) of the consumed food, processing it by digestion (paak), absorbing the nutrients (saar) and moving the unwanted material (kitta) ahead towards pakvashay by peristalsis with help of samanvayu.

दुष्यति ग्रहणी जन्तोरग्निसादन हेतुभिः - सु.स. ४०/१६६

Vitiation of anatomical as well as physiological functions of this site results in grahaniroga. Grahaniroga is a prime gastrointestinal tract with prevalence of 12.27 % which is just a tip of an iceberg.

Pathophysiology of Grahani:

अभोजनादजीर्णातिभोजनाद्विषमाशनात्। असात्म्यगुरुशीतातिरुक्षसन्दुष्टभोजनात्।। विरेकवमनरनेहविभ्रमाद् व्याधिकर्षणात्। देशकालर्तुवैषम्याद् वेगानां च विधारणात्।। दुष्यत्यग्निर स दुष्टोऽन्नं न तत् पचति लघ्वपि। अपच्यमानं शुक्तत्वं यात्यन्नं विषरूपताम्।।

Ajirna netu	
Agnimonduo	

Agnimandya Ajirna

Vidhagdhata, Shuktapaka, Aam

Grahani-sthan-kriyakarya vaigunya

Release of undigested food from stools

Grahani roga

Excessive starvation, food intake even in case of indigestion, overeating, irregular habit of eating, consumption of unsuitable, heavy to digest food, food cold in nature or eating chilled and frozen items, food which is dry in nature or food which brings about emaciation (weakness), contaminated food, perversion of procedures like vamana, virechana and sneha, emaciation of body due to disease, sudden migration to unsuitable place, at unsuitable time and season, suppression of natural urges causes vitiation of agni leading to vidhagdhata (partially transformed/sour) and inability of digesting even the light food. It leads to formation of an intermediate substance called aam, which turns sour (shukta)

during fermentation and finally into poisonous substance (aamvisha).

अधस्तु पक्रमामं वा प्रवृत्तं ग्रहणीगदर। उच्यते सर्वमेवान्नं प्रायो ह्यस्य विदह्यते।।

When this partially digested and undigested bio-substances moves downward in gastrointestinal tract it produces a disorder known as grahaniroga.

अतिसृष्टं विबद्धं वा द्रवं तदुपवेश्यते। तृष्णारोचकवैरस्यप्रसेकतमकान्वितः।। शूनपादकरः सास्थिपर्वरुक् छर्दनं ज्वरः।लोहामगन्धिस्तित्काम्ल उद्गारश्चास्य जायते।।

Patient of grahaniroga may present with symptoms like excessive stools (in quantity or frequency) with thin consistency (loose motions) or pellet-like consistency (constipation) and thirst, anorexia, loss of taste, excessive watering of mouth, dyspnoea, oedema of legs and hands, pain in bones and joints, vomiting, fever, burps having metallic smell and bitter or sour taste like undigested food.

वातात्पित्तात्कफाच्च स्यात्तद्रोगस्त्रिभ्य एव च। हेतुं लिङ्ग चिकित्सां च शृणु तस्य पृथव पृथव।

Grahani-roga is of 4 subtypes as per the association of vitiated doshas. These types can be corelated with types of IBS:

Sr.	Grahani	Irritable Bowel Syndrome	Reference
1.	Vataj	IBS with mixed bowel habits (constipation and diarrhea)	- च.चि. १५/५९-६४
2.	Pittaj	IBS with diarrhea	– च.चि. १५/६५–६६
3.	Kaphaj	IBS with constipation	– च.चि. १५/६७-७०
4.	Sannipataj	L.	च.चि. १५/७२

लीनं पक्वाशयस्थं वा।।प्यामं स्त्राव्यं सदीपनैर। शरीरानुगते सामे रसे लङ्कनपाचनम्।।

Functionally weak Agni (mandagni) leading to aam dosha is a root cause of most of the diseases. Hence before treating any disease understanding the doshavastha (stage) viz, aamavastha or niraamavastha is most important. If the disease is in aamavastha, first line of the treatment is to improve strength of agni, remove aam and then treat the specific disease symptoms.

Kutaj Parpati Vati is an excellent combination of Kutaja Parpati, Shankha Bhasma, Kutaja and Musta choorna processed in Kutaja kwath.

It is designed to take care of agni and irritable bowel, keeping in view of principles given in classical texts. Kutaja has been used widely since ages to manage Atisaar and Pravahika keeping intact the structural and functional integrity of the bowel.

Parpati is described as ग्रहणीगजमर्दनदक्षतरा. It is known that formulations of parpati are designed to be absorbed in grahani (not to be assimilated in aamashay) as they impart strength to grahani by virtue of its yogavahi, jantunashak, pachak, etc. properties. Kutaja Parpati is an effective solution, in view of its wholesome approach in management of irritable bowel syndrome. Musta relieves spasms during episodes of diarrhoea, in addition to its proven antimicrobial activity. Deepan and pachan activities of musta augments agni thus, prepares the gastrointestinal tract to combat in the event of microbial infection.

Grahani	Anupan		
Vataj	Dashmooladya ghruta, Chitrakadi vati, Takra, panchakola yusha, Jangal mamsa rasa.		
Pittaj	Chandanadi ghruta, Tikta ghruta, Madhukasava, Takra (sweet and ardhaudhista), Tikta rasa-manda.		
Kaphaj	Takrarishta, Madvarishta, Abhayadi choorna, Marichyadi choorna, Chitrakadi vati.		

¹ J Datta Meghe Inst Med Sci Univ 2018;13:87-90

Kutaja Parpati Vati

Effective in Diarrhoea, Dysentery and IBS

Effective in

Pravahika

- Atisar
- Grahani (Diarrhoea predominant IBS)
- This unique brand offers Kutaja in potent Parpati

form making it specific for small intestine

Dosage & Anupan

1 to 2 Tablets, twice or thrice a day with Kutajarishta, Jeerakadyarishta, Buttermilk, lukewarm water or as per the condition of the disease.

Availability: 60 Tab. and 500 Tab.







Beneficial role of Asthiposhak Tablets in Udavartini Yonivyapad

According to Acharya Charak, vitiated vata dosha causes Udavartini Yonivyapad and initiation of menstruation reduces its symptoms.

वेगोदावर्तनाद्योनिमुदावर्तयतेऽनिलः। सा रुगार्ता रजः कृच्छ्रेणोदावृत्त विमुञ्चति।। आर्तवे सा विमुक्ते तु तत्क्षणं लभते सुखम्। रजसो गमनादर्ध्वं ज्ञेयोदावर्तिनी बुधैः।। – च. चि. ३०

According to Ayurved text, this clinical entity is characterized by pain, difficult expulsion of menstrual blood due to upward movement of rajah (menstrual blood) propelled by vitiated vata. The upward movement is called as Udavrittam. This condition is termed as Udavartini because the rajah (menstrual blood) moves upwards or in reverse direction. Besides painful and frothy menstruation, other symptoms like body ache and general malaise are also present.

Vititation of vata dosha (apana vayu), is the leading cause resultant of:

- Indulgence in vata vitiating ahar-vihara
- Dhatukshaya
- Margavarna

निह वाताद्वते योनिर्नारीणां संप्रदुष्यति। शमयित्वा तमन्यस्य कुर्याद्वोषस्य भेषजम्।। – च. चि. ३०

Acharya Charak has considered vata dosha as a root cause of all types of yonivyapad and advocates vatahar chikitsa as first line of treatment for various yonivyapad.

तत्र अस्थीनि स्थितो वायुः पित्तं तु स्वेद रक्तयोर। श्लेष्मा शेषेनु तेन एषां आश्रय आश्रयिणां मिथः ।। यद् एकस्य तदन्यस्य वर्धन क्षपन औषधं। अस्थि मारुतयोर नैवं प्रायो वृद्धिर हि तर्पणात्।। – अ.ह.स. ११

Acharya Vagbhata has explained the Ashraya-ashrayi relationship between asthti dhatu and vata dosha in the above shloka. It is clearly stated that asthi (bone) is the prime site for vata dosha.

Vata
Asthi

Asthi dhatu kshaya leads to dhatukshyajanya vata vruddhi and asthi-dhatu-poshak dravyas helps to

pacify the vata vrudhi. Asthidhatu poshan is necessary to alleviate various vata predominant disorders such as Udavartini yonivyapad.

In modern terms, Udavartini yonivyapad can be corelated with Dysmenorrhoea & Premenstrual Syndrome (PMS). Dysmenorrhoea is a common gynaecological problem for Doctor visit. It adversely affects the females in their reproductive years and is the most common causes of pelvic pain. It affects more than 50% of menstruating women and can be debilitating, stressful. It hampers the activities of daily living and is also a reason for school and work absenteeism. Premenstrual Syndrome (PMS) is a combination of emotional, physical, psychological and mood disturbances that occur after a woman's ovulation and typically ending with the onset of her menstrual flow. Indian studies have reported a 20%

prevalence of PMS in the general population and 8% of females with PMS suffered from severe symptoms. PMS adversely affects the Quality of Life (QOL) measures in females. Severe form of PMS is termed as Premenstrual Dysphoric Disorder (PMDD)¹.

Rationale of Asthiposhak Tablet:

कृत्वा तु वृद्धिं समानैः धात्वग्नीन् स्थापयित्वा च। असंशयं अस्थिक्षये जनयेदस्थिसारताम।।

Asthiposhak Tablets provide natural bioavailable calcium in the form of **Kukkutandatvak Bhasma**. Various studies support the role of calcium intake in reducing PMS symptoms. Use of Calcium supplements is an effective method for reducing mood disorders during PMS².

Shodhit Guggulu and Asthisamhruta effectively reduce the menstrual pain.

Amalaki, Ashwagandha and Guduchi relieve the stress, anxiety and mood swings related to PMS. These herbs are documented for their medhya, balya and rasayan actions.

Thus, Asthiposhak Tablets by virtue of its vatahar, dhatu poshak, medhya, rasayan and balya properties help in reducing the severity of symptoms associated with Udavartini Yonivyapad (Premenstrual Syndrome).

- ¹ Bhuvaneswari K, Rabindran P, Bharadwaj B. Prevalence of premenstrual syndrome and its impact on quality of life among selected college students in Puducherry. Natl Med J India 2019;32:17-9
- ² Shobeiri, F., Araste, F. E., Ebrahimi, R., Jenabi, E., & Nazari, M. (2017). Effect of calcium on premenstrual syndrome: A double-blind randomized clinical trial. Obstetrics & gynecology science, 60(1), 100–105.

Asthiposhak

Tablets

Natural & Complete Calcium Supplement

Effective in

- Asthidhatu Kshaya
- Sandhishoola
- Asthi Sousheerya
- Perimenopausal
- .
- Osteoporosis
- AsthibhagnaAsthishoola
- Pre-menstrual Syndrome

Dosage & Anupan

1 to 2 Tablets, twice or thrice a day with Milk or as per the condition of the disease.

Availability : 30 Tablet and 60 Tablet Pack



Shree Dhootapapeshwar Standari SDS Monograph No. 0702594 Asthinoshak Tahlets





For more details please contact: Health Care Services

Shree Dhootapapeshwar Limited

135, Nanubhai Desai Rd., Khetwadi, Mumbai - 400 004. Tel.: +91-22-6234 6300 / +91-22-2382 5888 e-mail: healthcare@sdlindia.com

website: www.sdlindia.com

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