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Trigemianl Neuralgia (Anatavata) and its Ayurvedic Management: Case Study

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Abstract

Ananta Vata compiles two words - Ananta + Vata 'Ananta' limitless or endless, eternal or infinity etc. 'Vata' refers to Vata Dosh. Ananta Vata is described all Brihatrayis under the Shiro rogas. Ananta Vata in modern science correlates with Trigeminal neuralgia. Trigeminal neuralgia is a sudden, usually unilateral, severe, brief, stabbing, recurrent pain in the distribution of one or more branches of the fifth cranial nerve. Trigeminal neuralgia (tic douloureux) is an episodic condition of paroxysmal pain in the trigeminal distribution that is triggered by light touch. This study describes a case report of 61 years of old lady of trigeminal neuralgia attend the Shalakyta Tantra OPD of Patanjali Ayurved College, Haridwar and in present study it is observed the condition was successfully managed by the Ayurvedic treatment like Ksheer Dhoom, Shiropichu, Talam, Mukha Lepa, Marsa Nasya, Matra Vasti, Jalouka Avcharana and Agni Karma along with oral medicines. After treatment there was a remarkable reduction of the pain and symptoms and found reduced reoccurrence.

Keywords: Ananta Vata; Trigeminal neuralgia; Ksheer Dhoom, Shiropichu, Marsa Nasya, Matra Vasti, Jalouka Avcharana, Agni Karma.

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Introduction

Trigeminal nerve is the fifth (V) cranial nerve and is also known as Trifacial nerve. It is the largest of the twelve cranial nerves and has a broad territory of distribution. It is a mixed nerve with both motor and sensory fibers. The nerve originates from the brainstem (pons) and supplies various structures of the head and face. It is a paired nerve, and each nerve supply ipsilateral half of the head and face. Each trigeminal nerve has three main branches and so the name trigeminal (from Latin word "trigeminus" meaning three twins).¹ These are the ophthalmic (V1), maxillary (V2) and mandibular (V3) nerves. These branches pierce the Meckel's cave and passes forward to exit the middle cranial fossa through small openings or foramen. The

ophthalmic and maxillary divisions carry only sensory fibers whereas the mandibular division carries both sensory and motor fibers.²

Epidemiology:

The overall incidence of TGN is about 40–50 cases per one million and estimated prevalence is approximately 100–200 per million population³ Incidence of TGN varies significantly with age, with less than 5 per million in people younger than 18 years, and some studies estimating as high as 800 per million in older age groups.^{4,6} Patients in the age range of 35–65 years are most commonly affected⁷ TGN is nearly twice more common in females than males.^{8,9} Hereditary forms of TGN have been reported but are rare and constitute less than 4–5% of overall TGN.¹⁰

Definition

Trigeminal neuralgia is defined by the International Association for the Study of Pain¹¹ as 'a sudden, usually unilateral, severe, brief, stabbing, recurrent pain in the distribution of one or more branches of the fifth cranial nerve.

Etiology of trigeminal neuralgia:

According to Love and Coakham,¹² the majority of trigeminal neuralgia cases are caused by compression of the trigeminal nerve root, usually within a few millimetres of entry into the Pons, specifically the root entry zone less commonly, trigeminal neuralgia is due to a primary demyelinating disorder. Other, rare causes include infiltration of the trigeminal nerve root, ganglion or nerve by a tumor or amyloid, and small infarcts or angioma in the Pons or medulla. In a few cases the etiology is unknown.

Classification:

The two most commonly used classification systems are those proposed by the International Association for the Study of Pain (IASP) and the International Headache Society (IHS). According to the IASP classification, there are three subtypes of TGN: (1) Idiopathic, (2) Classical, and (3) Secondary. In the classification system proposed by the IHS, TGN can be either: (1) Classical, or (2) Symptomatic.^{13,14}

Clinical Features

Trigeminal neuralgia is episodic, and patients may have weeks or months of remission interspersed with varying intervals of pain.¹⁵ According to Harris,¹⁶ trigeminal neuralgia becomes more chronic with the passage of time, and the intervals decrease between the episodes of pain, although some patients have periodic bouts of pain for several weeks or months every year. He describes one case where the pain disappeared with advancing age but says that is a very rare occurrence.¹⁶ The pain is paroxysmal and is characterized by sudden bursts of extremely intense pain lasting from a few seconds to a few minutes¹⁷ or 20-30 seconds.¹⁷ The pain is like an "electric shock" and is followed by relative freedom from pain for a few seconds to a minute,¹⁷ The pain is triggered by light touch about the face especially in the perioral area. Talking, eating, brushing the teeth, washing the face, a light wind, and, in severe cases, any movement of the body may precipitate the pain. The pain is followed by a refractory period of up to 2-3 minutes during which it is difficult to elicit pain.¹⁹

Diagnostic criteria for trigeminal neuralgia:

The clinical hallmark of trigeminal neuralgia is a sudden, excruciating paroxysm of pain in the distribution of the trigeminal or fifth cranial nerve.²⁰ The diagnosis of trigeminal neuralgia depends strictly on clinical criteria.²¹ The IHS suggested criteria for the diagnosis of trigeminal neuralgia.²²

Ayurvedic view:

Parallel to this trigeminal neuralgia, Ananta Vata is similar to this in Ayurveda. Ananta Vata compiles two words - Ananta + Vata 'Ananta' limitless or endless, eternal or infinity etc. excessive beyond tolerance. 'Vata' refers to Vata Dosha. Ananta Vata is described all Brihatrayis under the Shiro rogas. According to Ayurveda classics Ananta Vata is the disease of head in which a violent pain is felt at the Manya and the Ghata (nape of the neck) which ultimately affects the region of the Akshi, Bhru and Shankha Pradesha and these Dosha create vibrations especially in the lateral side of Ganda Pradesha. In the end Hanugraha and Akshi Roga are produced. The disease is known as Ananta Vata and it is due to the concerted action of Tri Doshas.²³ Ayurvedic Management for Ananta Vata is same as that of Suryavarta added with Siravedha.

Case report: A 61 year old lady resident of Udhamisingh Nagar Uttarakhand visited OPD of Shalaky Tantra department, Patanjali Ayurvedic Hospital in Haridwar, November 2017 with complaint of pain in RT side over frontal side of face since 21 years.

Chief Complaints and Associated Symptoms: The twitching pain over right temporal, frontal, cheek and eye brow. It was brief but excruciating which comes in repeated flashes. The episodes of pain aggravates on exposure to cold, wind, on physical as well as mental exertion. During the episode, the pain is triggered when wash the face with cold water, travelling in a two-wheeler and sitting in the cool breeze of the fan, especially in the morning and night time.

History of Present Illness: A female patient, age 61 years was apparently normal 21 years back then she gradually started developing symptoms since 21 years. She went to the family physician and was given analgesic medicines which would give her temporary relief and then again get aggravated when medicines were stopped. So, he came to OPD of Shalaky Tantra department, Patanjali Ayurvedic Hospital in Haridwar, for the treatment of Trigeminal Neuralgia.

General examination:

Pallor- Nil Pulse- 74 bpm
 Icterus- Nil Respiratory rate- 18 episodes/ min
 Cyanosis- Nil B.P. - 122/80 mm/Hg
 Oedema- Nil Temperature - 98.6°C
 Weight - 62 kg Height - 165 cm

Personal History

Bowel - regular Micturition - normal
 Appetite - good Sleep - disturbed
 Diet: Vegetarian Addiction-No

Systemic Examination: No Abnormality detected in any system.

Treatment & methodology schedule: The treatment plan included both Shodhana therapy and Shamana medications.

Observation and Results

The patients got tremendous relief of the pain and symptoms after the treatment. She had given the above mentioned table as the discharge medicines. The follow up taken after 1 month which shows that patient was free for the pain and symptoms. Patient did not experience this kind of pain after treatment. Scoring of Defence and Veterans Pain Rating Scale (DVPRS). The Scale was used to understanding the severity of pain before, during and after treatment. Symptoms graded with Defence and Veterans Pain

Rating Scale from 0-10.

Table 1: IHS diagnostic criteria for trigeminal neuralgia.

Classic trigeminal neuralgia	
A	Paroxysmal attacks of facial or frontal pain that last a few seconds to less than 2 minutes, affecting one or more divisions of the trigeminal nerve and fulfilling criteria B and C.
B	Pain has at least one of the following characteristics: 1. Intense,sharp,superficial or stabbing 2. Precipitated from trigger areas or by trigger factors 3. The patient is entirely asymptomatic between paroxysms.
C	Attacks are stereotyped in the individual patient.
D	There is no clinically evident neurological deficit
E	Not attributed to another disorder.
Symptomatic trigeminal neuralgia	
A	Paroxysmal attacks of pain lasting from a fraction of a second to 2 minutes, with or without persistence of aching between paroxysms, affecting one or more divisions of the trigeminal nerve and fulfilling criteria B and C.
B	Pain has at least one of the following characteristics: 1. Intense,sharp,superficial or stabbing 2. Precipitated from trigger areas or by trigger factors 3. Attacks are stereotyped in the individual patient 4. A causative lesion, other than vascular compression, has been demonstrated by special investigations and/ or posterior fossa exploration

Table 2: Panchakarma intervention

S.No.	Panchakarma procedure	Medicines used	Date
1.	Ksheer Dhoom	Bala, Dashmool Kwath	13-11-2017 to 19-11-2017
2.	Talam	Nimbamritaadi, Rasnaadi	13-11-2017 to 15-11-2017
3.	Marsa Nasya	Ksheer Bala Taila 101(A)	13-11-2017 to 15-11-2017
4..	Shiro Pichu	Ksheer Bala Taila	16-11-2017 to 20-11- 2017
5.	Mukha Lepa	Lodhraadi	16-11-2017 to 20-11-2017
6.	Matra Vasti	Ksheer Bala Taila	16-11-2017 to 20-11-2017
7.	Jalouka Avcharana		16-11-2017
8.	Agni Karma		18-11-2017

Table 3: Patient discharged with the following medication and advised to come for check up after for 1 month:

S. No.	Medicine	Qty.	Schedule	Anupana
1.	Vatari Churna	100 gm	Mix all and take half teaspoon twice a day before meals in the morning and evening.	With lukewarm water/ honey
	Swarnmakshik Bhasm	5 gm		
	Ekanaveer Rasa	10 gm		
	Vrihat Vatchintamani Ras	2 gm		
	Mahavat Vidhwansan Ras	5 gm		
	Makardhwaj	2 gm		
2.	Vishtinduk Vati	20 gm	Take 2 tabs. Each after food.	With lukewarm water/ milk
	Aamvatari Ras	20 gm		
	Saptvishanti Guggul	40 gm		
3.	Badam Rogan	60 ml	3-3 drops in each nostril mor-eve	
4.	Brahmi Ghrita	200 ml	1/2-1/2 tsp mor-eve before food	With lukewarm water/ milk

Table 4: showing the results.

S. No.	Symptoms	BT	AT	FU 1
1	Pain over right temporal	9	4	0
2	Pain over frontal	8	3	0
3	Pain over in checks	7	2	0
4	Pain over eye	8	3	0

BT - Before Treatment; AT - After Treatment; FU1 - Follow up after 1 month

Discussion

As per Ayurveda classics the 11 type of Shiro rogas are explain among them Ananthavata is one of the Shirogata Roga. According to Acharya Sushruta the Ananthavata is a Sannipataja Vyadhi. Ksheer Dhoom with the combination of Bala, Dashmool and Ksheer is highly nutritive. Ksheer Dhoom provide to strength in facial muscle and nerve and helps in recovery. Ksheer Dhoom controls vitiated Vata Dosha in upper part of body and hence is useful in neurological disorder afflicting head and neck. Ksheer Dhoom it also relieves pain and alleviates the Tridosha mainly Vata Dosha Hara properties. Shiropichu with Ksheer Bala Taila can be describing locally as well as systemically. Local effect is based on cellular absorption of drug through transdermal route. Systemically cellular absorption and circulation has effect on central nervous system (CNS). Shiropichu improve the circulation there by correcting the brain circulation which is very important in stress. Shiropichu may helpful in regularizing the blood supply of brain and can relive the pain. Shiropichu is one of the most effective treatment for reducing the pain, stress and nervous tension. Talam with Nimbamritaadi and

Rasnaadi drugs are used and the scalp is formed five layers that is skin, connective tissue, loose areolar layer and pericardium the dense subcutaneous connective tissue has the richest cutaneous blood supply in the body. Through this absorbs the medicinal properties and relieves the pain and stressful condition and also nourishes the central nervous system. Mukha Lepa with Lodhraadi percutaneous absorption necessitates through the stratum corneum, epidermis, papillary dermis in to blood stream and purifies the blood thereby helps to remove the toxin or dead cells from the face thereby nourishes the cells. Thus help to rectify the problem. Drug are used in Mukha Lepa are Pitta and Kapha Shamaka property. Marsa Nasya with Ksheer Bala Taila (101) A the drug absorbs through the Shringataka, a Shiramarma and circulates the Prana and Shiramarma, reaches local as well as general circulation and alleviates the Dosha. According to modern drug absorption may be through receptor cells of olfactory mucosa, sensory receptors of trigeminal nerve and cavernous sinus and circulation of drug through the neural pathway olfactory and trigeminal nerve and circulatory pathway cavernous sinus. Target the limbic system and sensory area of trigeminal nerve and reduce the pain of Ananthavata (TN). Matra Vasti with Ksheer Bala Taila helps in Rasayana, Balyam, Brimhanam, Jeevanam, Vata Hara, Medhyam and Sarva Indriya Prasadnam. Ksheer Bala Taila cures all types of Vata Rogas. Jalouka Avcharana the saliva contains enzymes and compounds that act as an anticoagulation agent. The most prominent of these anticoagulation agents is hirudin, which binds itself to thrombins thus effectively inhibiting coagulation of the blood. Anti-inflammatory effects of leeches Bdellins is compound in the leech's saliva that act as an anti-inflammatory agent by inhibiting

trypsin as well as plasmin. Jalouka Avcharana the saliva of the Jalouka contains anaesthetic substances which deaden pain. The pain and inflammation will feel relief from anti-inflammatory and anaesthetic affects of the Jalouka saliva. Agni Karma is pain management procedure described in Ayurved. Agni Karma is also considered as best treatment therapy for Vata and Kapha Dosha because Agni possesses Ushna, Sukshma, Tikshna Guna Aashukari Guna which are opposite to Vata and Kapha. It removes Shrotovarodha and increase the Rasa Rakta Samvahana to the affected area. Agni Karma increase metabolism, blood circulations, decreased pain, stimulates nerve, decreased stiffness and inflammation. Agni Karma superior to Bheshaja, Shastra, & Kshara Karma as a disease burnt with Agni will never reoccur. Disease which cannot be cured with Aushadha, Shastra and Kshara, can be cured with Agni. The follow up medicines further alleviates the Tridosha by taking mixture of Vatari Churna, Swarnmakshik Bhasm, Ekangveer Ras, Vrihat Vatchintamani Ras, Mahavat Vidhwansan Ras and Makardhwaj. Vishtinduk Vati, Aamvatari Ras and Saptvishanti Guggul these are also reduced the Tridosha. Badam Rogan Taila boast the immune system and also beneficial for the brain and nerves. Brahmi Ghrita is good neurotransmitters, nourishes and gives the strength to the brain and cranial nerves. It also works as Antistress, antidepressants and anticonvulsant.

Conclusion

TGN is a dreadful disease, which can lead to incapacitating consequences. Descriptions of human suffering and attempts to understand and treat the disease have been ongoing for hundreds of years. Knowledge of the disease pathophysiology and better treatment modalities have surged in the last few decades. While the disease is still not understood in its entirety, use of Ayurvedic therapy and medicinal treatment reduced the pain and symptoms of TGN on parameters of Defence and Veterans Pain Rating Scale (DVPRS), and also helps in preventing the reoccurrence and complication of TGN.

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Clinical Evaluation of Dhatri Avaleha on Pandu

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Abstract

Background: Pandu is a varnoplakshita vyadhi where in panduta (paleness) is pathognomonic. Pandu roga is considered as a specific disease with its own specific nidana, purvarupa, rupa, samprapti and chikitsa. Rakta gets vitiated by doshas, mainly by pitta dosha, as rakta is pittavargiya, diseases like pandu roga appear. The drugs which constitute the dhatriavaleha helps in correcting the panduroga by virtue of their qualities and action.

Aim: 1. To determine the efficacy of dhatriavaleha in the management of panduroga.

Material and Methods: The study was a single armed clinical trial in which 30 patients of panduroga belonging to the age group of 20-60yrs were enrolled. Dhatriavaleha was prepared by mixing the 8 ingredients thoroughly and made into avaleha form and given to patients orally and anupana is dugdha, dose is of 1karsa in two equal divided doses before food for 30days daily and treatment followup is done on 15th and 31st day. The different parameters such as subjective paramaters like balahani, aarohanaayasa, pandutwa and objective paramaters like hb%, rbc were assessed.

Results: There was statistically significant improvement seen in the subjective and objective parameters especially good improvement is seen in the pandutwa and aarohanayasa.

Conclusion: The study concludes that dhatriavaleha is an effective formulation in the management of panduroga.

Keywords: Panduroga¹; Dhatriavaleha²; Anemia.

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Introduction

The word pandu is formed from the dhatu padi gatou. Padi means gati³ i.e parinama or transformation. The word padi gatou signifies the formation of rasa, rakta and other dhatus. If the transformation process is hindered or having any aberration then it leads to pandu. Pandu varna is a combination of shweta and peeta varna in equal proportion, similar to pollen grains of ketaki (harita samhita) Amarakosha.⁴ The degree of colouration varies according to the severity of the disease.⁵ The synonyms of pandu are khamala (based on avastha visesha), panaki, kumbhava, lagharaka and alasaka.⁶ Hariman (pallor) and Harita are the

diseases mentioned in Rigveda⁷ and Atharvaveda. The nidana of pandu roga can be summarised under aharataha, viharataha, nidanaarthakara rogajanya, vaidyakruta. Different discolourations of the body parts in pandu are twak, akshi, mukha and nakha, sira. Ahara vihara and vaidyakruta nidana causes alparaktata through pittadosha prakopa, agnimandya and rasavaha and raktavaha srotodusthi. Pitta pradhana tridosha prakopa produces pandu roga. The upadravas of panduroga are kanthagata abalatwam, hridaya peedanam, shishira dwesha, nabhi shotha, satwahani. Ayurvedic classics mentioned many yogas for the management of pandu rogas. The dhatriavaleha consists of vamsalochana, shunti, madhuyasthi,

pippali, mru dwika, sharkara, amalaki and honey as the ingredients.

The present study is aimed at evaluating the efficacy of dhatriavaleha in panduroga.

Material and methods

Total 30 patients of panduroga were taken under one group i.e group A were selected in the age group of 20-60 years irrespective of sex, occupation and socio-economic status from nkjamc and pgc bidar, karnataka.

Deepana, pachana and koshta shuddhi was done before one week.

A complete clinical study was done by treating the patients with dhatriavaleha per orally with dugdha as anupana for 30days. The data was collected before and after treatment and analyzed by using students T test and treatment follow up done on 15th and 31st day.

Diagnostic criteria

Patients characterised with classical sign and symptoms of ayurveda like subjective parameters like balahani, aarohanaayasa, pandutwa, and objective parameters like hb%, rbc below normal range were diagnosed to have pandu.

Inclusive criteria

1. Patients with pratyatmaka laxana of pandu.
2. Patients of either sex between age group of 20-60 years.
3. Hb% between 8gm% to 10gm%.

Exclusive criteria

1. Patients with any other systemic disorders like Hepatic cirrhosis, Rheumatoid arthritis, uraemia, Malignant disorders etc.
2. Any continuing blood loss like Bleeding piles, Malena, Haematemesis etc.
3. Grahani, Udara roga, Krimi roga, Kamala, etc.

Posology

Method of preparation of Medicines: Dhatri avaleha: Fresh Amalaki fruits were collected, fresh juice was extracted by trituration. Extracted juice was placed over the mild flame and heated, when it was properly boiled, Pippali powder, Yashtimadhu powder, Mridwika kalka (Paste), fine powders of Shunti, Vamshalochana and Sharkara were added. While heating, the content was properly mixed. After testing the samyak leha paka guna, it was

brought down from fire. After cooling, Honey was added, mixed properly and then packed.

Presentation: Glass bottles - 200 ml capacity.
Indication: Pandu roga, Kamala, Halimaka.

Assessment Criteria of the Study

A) Subjective Criteria

1. Parameters for the study are the predominant signs and symptoms of pandu like Balahani, Shrama, Aarohanaayasa, Hridrava and pandutwa. Gradings were given to these parameters.
2. The Data was collected before, after treatment and the data was analyzed. Statistical analysis was done by student 't' test consulting the Biostatistician.

B) Objective

1. Laboratory parameters:- CBP (Hemoglobin% and RBC) with special reference to subjective parameters to assess response in pandu roga and compared before and after treatment.

If necessary- 1. Peripheral blood smear. 2. Stool for ova and cyst.

Data collection

The data was collected from group A before and after treatment. Scoring was done and finally the data compared and analyzed.

Statistical Analysis

The data collected were calculated for mean, standard deviation, t-value and p-value using students t-test (paired). The statistical from each group were compared under guidance of biostatistician.

Observations:-

Out of 38 patients 30 patients had completed the study. Observations revealed that 60% of patients were from the age group of 25-30years, 60% were females, 83.33% were from urban area, 70% were belonging to middle class, 76.67% of patients were consuming katu rasa, 76.67% were consuming ushna guna yukta ahara, 66.67% were having mala baddhata, 83.33% were addicted to coffee, 80% were addicted to tea, 56.66% were having krura kosta, 70% were of vata pitta prakriti, 53.33% were belonging to avara sara, 86.67% were having madhyama samhanana, 66.67% were having

manda agni, 43.33% were having balahani, 60% were having aarohanaayasa, 66.66% were having pandutwa, 40% were of grade 2 (mild) hb count, grade 2 rbc count i.e 36.66%

Results

The response of treatment for individual group in % on 15th day of treatment is for Balahani 26.66%, for Aarohanaayasa 23.33%, for pandutwa 10%, for Hb count 23.33% and for RBC 6.66% patients showed encouraging response on 15th day of the treatment.

The response of treatment for individual group at the end of the treatment is 23.33% patients for Balahani, 6.66% for Aarohanaayasa, 3.33%, patients for pandutwa, 10% patients for Hb count and 0% patients for RBC count showed good response at the end of the treatment.

Effect of Dhatri avaleha on Balahani: The mean before treatment was 2.83 which was reduced to 2.56 on 15th day of the treatment with 26.66% improvement. The total effect of therapy provided statistically significant ($p < 0.01$) result with t value of 3.37

Effect of Dhatri avaleha on Aarohanaayasa :

The mean before treatment was 2.56 which was reduced to 2.33 after the treatment with 23.33% improvement. The total effect of therapy provided statistically significant ($p < 0.01$) result with t value of 3.28

Effect of Dhatri avaleha on pandutwa : The mean before treatment was 2.5 which was reduced to 2.4 after the treatment with 10% improvement. The total effect of therapy provided statistically non significant ($p < 0.10$) result with t value of 2

Effect of Dhatri avaleha on Hb count: The mean before treatment was 2.46 which was reduced to 2.2 after the treatment with 26.66% improvement. The total effect of therapy provided statistically significant ($p < 0.01$) result with t value of 2.88

Effect of Dhatri avaleha on RBC count : The mean before treatment was 2.16 which was reduced to 2.1 after the treatment with 6.66% improvement. The total effect of therapy provided statistically non significant ($p < 0.10$) result with t value of 1.75

Grading for the Severity

Grading for the severity of the individual symptoms was framed as a (1-4) point scale. Grading Criteria.

Table 1: Subjective Criteria.

Parameter	G1	G2	G3	G4
1) Balahani	No Weakness	Weakness not affecting his daily activities	Weakness affecting his daily activities	Activites reduced due to weakness.
2) Aarohana Ayasa	No Exertional dyspnoea	Mild dyspnoea with normal activities	Dyspnoea stops his daily activities intermittently	Dyspnoea stops his daily activities frequently
3) Pandutwa	No pallor	Conjunctiva slightly pale, nail and other mucus membrane not pale	Conjunctiva pale, nail and other mucus membrane slightly pale	Conjunctiva, mucus membrane and nails pale

B) Objective Criteria:- (CBP) i) Hb% - Normal - MALE:-13.0-18.0g% FEMALE:- 11.5-16.0g% ii) R.B.C - Normal - MALE:- 4.5-5.5mill/cu.mm FEMALE:-3.5-5.5mill/cu.mm

Table 2: Grading for the clinical improvement for individual variables.

Variable	G1 Normal	G2 Mild	G3 Moderate	G4 Severe
Hb%	M-13-18g% F-11.5-16.0g%	M-9-13g% F-9-11.5g%	M-8-9g% F-8-9g%	M-less than 8g% F- less than 8g%
R.B.C	M- 4.5 5.5mill/cu.mm F-3.5- 5.5mill/cu.mm	M- 4-4.5 mill/cu.mm F- 3-3.5 mill/cu.mm	M- 3.5-4 mill/cu.mm F- 2.5-3 mill/cu.mm	Less than 3.5 mill/cu.mm Less than 2.5 mill/cu.mm

Grading for the clinical improvement for individual variables: 1. CI - III: Clinical improvement excellent i.e. 3 degree reduction in the severity score against the initial score, i.e. severe - normal. 2. CI - II: Clinical improvement good i.e. 2 degree reduction in the severity score Against the initial scores, i.e. reduction from moderate - normal, severe- mild. 3. CI - I : Clinical

improvement encouraging i.e., 1 degree reduction in the severity score against initial score, i.e. reduction from mild - normal, moderate - mild and severe - moderate. 4. C.S : Clinically stable, i.e. severity score remains as against the initial score. 5. C.D : Clinically deteriorated i.e. increase in severity score against the initial score.

Statistical analysis of group results

Effect of Dhatri avaleha on Balahani : The mean before treatment was 2.83 which was reduced to 2 after the treatment with 83.33% improvement. The total effect of therapy provided statistically highly significant($p<0.001$) result with t value of 5.95.

Effect of Dhatri avaleha on Aarohanaayasa

The mean before treatment was 2.56 which was reduced to 2.2 after the treatment with 36.66% improvement. The total effect of therapy provided statistically significant($p<0.01$) result with t value of 3.36.

Effect of Dhatri avaleha on pandutwa : The mean before treatment was 2.5 which was reduced to 2.23 after the treatment with 26.66% improvement. The total effect of therapy provided statistically significant($p<0.02$) result with t value of 2.67.

Effect of Dhatri avaleha on Hb count : The mean before treatment was 2.46 which was reduced to 2 after the treatment with 46.66% improvement. The total effect of therapy provided statistically highly significant($p<0.001$) result with t value of 3.88

Effect of Dhatri avaleha on RBC count : The mean before treatment was 2.16 which was reduced to 2 after the treatment with 16.66% improvement. The total effect of therapy provided statistically significant($p<0.05$) result with t value of 2.38.

Discussion

Maximum number of patients were of 25-30 years of age group, maximum no of pt were females, and the contributory factors for women were menstruation, marital tension, lactation and dietary inadequacy. Maximum no of subjects 76.67% were consuming ushna guna yukta ahara which causes vitiation of vata and pitta dosha which are responsible for pathogenesis of pandu roga.

Symptomatology incidence:- Pandutwa, Arohana ayasa, Balahani were present in all the patients of Pandu. Other manifestations like shrama, Hridrava, Angamarda were also observed. Study showed predominance of Vataja lakshanas. Based on the data, relation can be drawn that in Pandu the predominant presenting features are Pandutwa, Arohana ayasa and Balahani.

Effect of result on Subjective parameters

Effect of Dhatri avaleha on Balahani: Balahani and shrama showed 83.33% improvement which

is statistically highly significant ($p<0.001$) result with t value of 5.95, Effect of Dhatri avaleha on Aarohanaayasa : Aarohanaayasa showed 36.66% improvement which was statistically significant ($p<0.01$) result with t value of 3.36, Effect of Dhatri avaleha on pandutwa : pandutwa showed 26.66% improvement which was statistically significant($p<0.02$) result with t value of 2.67.

Effect of result on Objective parameters

Effect of Dhatri avaleha on Hb count : Hb count showed 46.66% improvement which was statistically highly significant ($p<0.001$) result with t value of 3.88, Effect of Dhatriavaleha on RBC count: RBC count showed 16.66% improvement which was statistically significant($p<0.05$) result with t value of 2.38.

Ativyayama, Atimaithuna, Bharaharana, Panchakarma pratikarma cause excessive Karshana of body because of which the body requirements increase which is once again the cause of pandu. various haemorrhagic conditions are described which cause Pandu etc Among the Dhātu involvement, Pandu chiefly affects the Rakta dhātu as it is clearly told by Sushruta, Chakrapani and Charaka and Vagbhata. In Raktasrava, Sushruta has advised consumption of Yakrut, which is the chief source of Iron.

Probable mode of action of Dhatriavaleha

Ingredients in decreasing order of their proportions in Dhatriavaleha are as follows:

a) Amalakiswarasa 1 drona 11.946kgs. b) Sharkara 0.5 tula 2.34kgs. c) Pippalichurna 1 prastha 746gms. d) Mrudwika 1 prastha 746gms e) Madhu 1 prastha 746gms f) Vamshalochana 2 pala 48gms. g) Shunti 2 pala 48gms.

h) Yashtimadhu 2 pala 48gms. Amalaki is the main ingredient in this Yoga and hence the name Dhatriavaleha in Charaka Samhita and Amalakyadiavaleha in BhaishajyaRatnavali.

Karma

Dosha karma

- Pittahara: Amalaki, Vamshalochana, Yashtimadhu, Pippali, Draksha, Sharkara, Madhu
- Vatahara: Vamshalochana, Shunti, Pippali, Yashtimadh, Draksha, Sharkara • Kaphahara: Amalaki, Shunti
- Tridoshaghna: Amalak, Pippali, Madhu.

Vyadhikarma

- AmalakiRaktapitta, Meha
- VamshalochanaKshaya, Raktadosha, Pandu, Kamala, Raktapitta
- Shunti Pandu, Hridya,
- Yashtimadhu Sadyok shatasru kharati, Kshaya Kshaya, Shosha
- PippaliJwara, Kushta, Ama
- DrakshaKshaya, Arshoroga, Raktapitta, Jwara
- SharkaraKshaya, Raktadosha
- Madhu Raktarogaghna, Shosha, Kshaya, Raktapitta, Hridroga

Maximum number of patients were of 25-30 years of age group, maximum no of pt were females, and the contributory factors for women were menstruation, marital tension, lactation and dietary inadequacy. Maximum no of subjects 76.67% were consuming ushnagunayuktaahara which causes vitiation of vata and pitta dosha which are responsible for pathogenesis of panduroga.

Symptomatology incidence

Symptomatology Incidence: Pandutwa, Arohanaayasa, Balahani were present in all the patients of Pandu. Other manifestations like shrama, Hridrava, Angamarda were also observed.

Study showed predominance of Vatajalakshanas. Based on the data, relation can be drawn that in Pandu the predominant presenting features are Pandutwa, Arohanaayasa and Balahani.

Conclusion

Dhatriavaleha shows more effectiveness in improving the balahani, shrama, arohanaayasa & It is mildly effective in improving panduta, improving hb% and improving RBC count.

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Yukti Pramana and Its Utility: A Review

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Abstract

Objective: The proper application of Yukti is very important in achieving the goals of Ayurveda and Research. Like bhesaja, Yukti is used in different ways as Pramana, Pariksha and Guna. Acharya Charaka accepted Yukti as the fourth Pramana. It is a major contribution to the field of Ayurveda. It gives us trikaala and Trivarga Gyana (information).

Drug research, Drug standardization, pharmaceutical research, observational method, pathological research, and experimental research, animal researches are the main part of a research which is achievable with the help of Yukti. The utility of Yukti Paramana is present in every aspect of Ayurveda and Research and its negation leads to the failure of treatment as well as management of complications.

Data Source: Present work has been done on critical review of classical information mentioned in reference list, modern literature, research mentioned in various text, electronic data (e-charak).

Review Methods: In this work systematic reviews and meta-analyses are used.

Result and Conclusion: It is Karya Yojana (work planning) for every process. It is one of the most important Chaturvedi Pareeksha as per Acharya Charak. It is beneficial for the restoration of health, diagnosis, and treatment principles. In future, researcher can use Yukti Pramana as procedure development for treatment planning, research planning, and drug standardization procedure. This paper is useful for Post graduate student for performing their research in well planned manner.

Keywords: Yukti; Planning; Reasoning; Pareeksha; Pramana.

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Introduction

Ayurveda is made up of two words Ayu means life and Veda means knowledge. It is the complete science of life in the current scenario. Knowledge of many disease and precautions are the only remedies. Yukti (planning) also plays an important role in the prevention, diagnosis, and treatment of diseases. The immortal crave of the human being for obtaining complete knowledge is fulfilled with the help of the tools of investigation. The tools of investigation (examining) need to be perfect and unbiased so that the truth obtained from the investigation is uncovered and pragmatically

perfect for its application. The Pramana (instruments of investigation) provide us arms and ammunition to fight the darkness of ignorance and reality. It utilizes the scientific tools to unfold the true and valid knowledge.¹

According to Acharya Vagbhat, there is nothing in this universe which is non medicinal, which cannot be made use of for many purpose by many modes.¹⁰ With the help of planning (Yukti) and need of aims and objective we can any substance in many ways. This is the importance of Yukti Pramana.

In Ayurveda, Pramana is accepted under the name of Pareeksha also. It means the examination

or investigation finds its place in the Ayurvedic system everywhere. The coveted concept of research in Ayurveda can be pursued only through the uses of the Pareeksha. The research methodology in Ayurveda revolves around the Pareeksha. Pramana is the means of measuring or investigating the world. The word Pramana is derived from pra- means forward or more, upsarga (prefix), Ma dhatu ad Lyut pratyaya, it means true knowledge. The word Pareeksha is derived from Pari (means around/beyond or away) upsarga, Iksha-dhatu means the proper observation/ investigation/vision. Acharya Charak considered Yukti as the fourth Pramana or Pareeksha.¹

The Yukti is the Yojana on planning or assessment or reasoning which is applied.⁶ Thus the term Yukti signifies as an applied design or framework. In Vimanasthana, Charaka explained Yukti as the part of Anumana Pramana.⁷ Acharya Chakrapani rejected it as an independent pramana and said it is pramana sahkari and apramana. Yukti means proper planning /assessment/reasoning.²

The Yukti is the buddhi vishesh (intelligence) needed for the perception of the compound knowledge of multiple reasons.⁸ It gives the knowledge of Trikaala (past, present, and future) and Trivarga (dharma, artha, kama).²

Examples of Yukti⁹-Acharya Charaka has quoted these example in Sutrasthan chapter eleven-

1. Jala (water), Karshan (plowing), Beeja (seed), and Ritu (season) produce the Sasya (crop).
2. The combination of Shadadhatu (Panchamahabhuta and Atma) produces the garbha.
3. The three objects of friction namely Mathya, Manthaka, Manthan produce Agni.
4. Ideal functioning of chatuspada/Limbs of treatment/four pillar of treatment namely Vaidya (physician), Bhesaja (the drug or medicine), Rugana (patient), and Paricharika (the attendant including nurses) are capable to manage the disease. This is the best practical example of Yukti.²

Table 1: D

S. No.	Combination of contents	Product
1	Jala (water), Karshan (plowing), Beeja (seed), and Ritu (season)	Sasya (crop)
2	Shadadhatu (Panchamahabhuta and Atma)	Garbha
3	Mathya, Manthaka, Manthan	Agni
4	Vaidya (physician), Bhesaja (the drug or medicine), Rugana (patient), and Paricharika (Nurse)	Cure of disease

Data Source- Present work has been done on critical review of classical information, modern literature, research mentioned in various text, electronic data (e-charak). The possible correlation has been made between this collected information and has been presented scientific and systemic ways.

Results

1. Drug Research, Drug standardization, pharmaceutical research, observational survey, pathological research, experimental research, animal research are the main parts of research that are possible with the help of Yukti Pramana.⁵
2. Panchakarma, Shastrakarma, Yantrakarma, etc procedures can be modified as per utility and need with the help of Yukti Pramana.⁵
3. Ayurveda approves of every individual being a separate entity. So the management of patients needs a very careful decision making strategy regarding matra, preparations, anupaan with the use of Yukti Pramana.¹
4. Therapeutic utility of Yukti-¹
 - i) Diagnosis- The diagnosis is totally depended on the reasoning. The different etio-pathological factors act differently in all persons. In this situation, Yukti is used as an effective tool for diagnosis.
 - ii) Treatment plan-Indication, contraindication, Matra, Bala, Satmya, Desha, Agni, Kaal, etc are judged and finalized with the help of Yukti.
 - iii) Casualty and emergency treatment- In this condition, where there no proper information and investigations reports are available- management of such patients becomes very difficult. Emergency and casualty need an instant plan, which is possible with Yukti.
 - iv) Complication management- Though all the management of panchakarma upadrava are provided in Charak's Siddhisthan, but instant planning and strategy are a must to tackle complication situations.
5. Research utility of Yukti -^{1,5}

In research planning of study is a very important process. Yukti helps in the planning of research as follows-

- i) Selection of the problem- This is a very tough job for the researcher. Based on logic, planning and feasibility one can choose a problem topic for research.
- ii) Formulation of hypothesis- This step is also very important in the research process. In randomized controlled trial again involves the Yukti as a tool.
- iii) Material and methods, results and discussion, conclusion-These steps are very crucial in the research process. The conceptual and experimental design needs a pragmatic approach. The discussion and result part is impossible without the knowledge of Yukti. The results are logically discussed and analyzed with Yukti. Based on the discussion, the main conclusion is drawn out.

Discussion

1. Yukti is considered as Pramana, Pareeksha, and Paradi guna.⁵
2. Collection of medicines, purification, identifications, processing, formulations according to rasa, guna, virya, vipaka, etc are completed with the help of Yukti Pramana.³
3. The purpose of life is to achieve dharma (virtue), artha (wealth), kama (enjoyment), and moksha (salvation). Attending this purushartha is possible only with help of Yukti.⁴
4. Dosha, dhatu, mala, srotus, Agni, Nidan, Samprapti, Shadkriyakaal (the stages of manifestation of diseases), saadhyaa sadhyata, chikitsa sutra, matra, aushadha Kalpana, Kaal, anupaan, upadrava, upadrava siddhi are planned, assessed, strategized by Yukti Pramana.^{1,2}

Conclusion

- It is Karya Yojana (work planning) for every

process.

- It is one of the most important Chaturvedi Pareeksha as per Acharya Charak.
- It gives Trikala and Trivarga gyan.
- Beneficial for the restoration of health, diagnosis, and treatment.
- The utility of Yukti Pramana is present in every aspect of Ayurveda and Research and its negation leads to the failure of treatment and management of complications.

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A Comprehensive Study on Immune System with Respective to Free Radicals and Antioxidants

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Abstract

The main aim for this research paper is to understand the concept of Immunity, Free Radicals, Antioxidants, Oxidative Stress and the Ayurvedic herbs acting as Antioxidants. This study explains the interlink among Immunity, Free Radicals, Antioxidants and Oxidative Stress. In this modern era or stressful life, it has become very difficult for every individual to maintain the healthy life and remain happy. This study even explains the factors which are responsible for acting as antioxidants that aid to enhance the defense act of our Immune system and prevent from many chronic diseases. This study also highlights the Ayurvedic medicinal plants having the chemical constituents being antioxidants helps to maintain the good health and slow down the ageing process.

Keywords: Immunity; Antioxidants; Free radicals; Ayurveda.

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Introduction

Ayurveda always stands for prevention prior to the concept of cure and defines as swasthashya swastha rakshanama and aaturashya vikar prashanama cha . when it comes to the components which are helpful for mentaining the swasthya is vyadhi kshamatwa that states the both components of treatments i.e. vyadhi bala virodhitwam and vyadhi pratibandhakatwam. Day by day era getting modernized with sedentary life style and fast food added with the loads of job stress that's making the us to get sheltered lots many disease. According to Ayurveda and WHO the psychological factor also considered as prime component in keeping healthy status of human being. Here some attempt is made in collecting all.

Immune System

The immune system is the defense mechanism of our human body which plays a very important role

to fight against the pathogens or harmful organisms or the foreign bodies. Immunity is something we can co-relate to the resistance capacity of our body which protect us from disease by identifying the pathogens and fighting against them. For Immune system to be in an excellent condition, even Free Radicals & Antioxidants play a very important role. As some of the immune cells in our body also produce free radicals and antioxidants to fight against the harmful pathogens. During the normal metabolic process, a low amount of free radicals are produced by our human cells. These free radicals which are less in number protect our body from any pathogens or foreign body if any. At the same time, our human cells also produce Antioxidants. These antioxidants fight against foreign body contributing our Immune system and even it neutralizes the free radicals produced in the body as the balance between Antioxidants and Free Radicals is very much necessary to avoid cell or tissue damage and keeps the person healthy.

Free Radicals

Free Radicals are the Atom or group of Atoms in an molecule with minimum one unpaired electron. When Atom loses its electron, it becomes free radical and it become unstable. This unstable free radical tries to take the electron from neighboring atom of stable molecule and attain the stability. Then this targeted molecule from which free radical took the electron becomes unstable and now this molecule is called as free radical. Later, this molecule tries to steal the electron from another atom of different molecule, so this chain reaction of free radical theory continues. Due to this free radical theory, group of cells or the whole the tissue start dysfunctioning. The body's immune cells namely neutrophil and monocytes also produce the free radicals. These free radicals which are produced in minimum amount help our immune system to fight against harmful pathogens. When these free radicals are produced in excess in our body, it leads to destruction of our cells and tissue. At the same time, our human cells also produce antioxidants to neutralize the free radicals and try to protect our body cells.

Antioxidants

Antioxidants are the substances which can be produced naturally in the body and may be artificially gained. Naturally generated antioxidants are known as Endogenous Antioxidants whereas artificial source or externally gained through food supplements antioxidants are known as Exogenous Antioxidants. The main aim of Antioxidants is to neutralize the excess free radicals produced in the body and protect our human body from cell/tissue damage. Antioxidants even contribute our immune system to fight against the pathogens. By neutralizing the excess free radicals, antioxidants maintain the balance between them and free radicals preventing from the diseases. When there is excess free radicals and less of antioxidants, the balance between both of them in our body disturbed. The imbalance between free radicals and antioxidants leads to the environment or the situation known as Oxidative Stress which leads to tissue damage and disease manifestation.

Oxidative stress

The imbalance between free radicals and antioxidants in our body is known as Oxidative Stress. Long term Oxidative Stress can lead to the following conditions:

- Damages the cell membrane and tissue

- Affects the metabolism of protein, lipid and DNA
- Triggers the ageing process
- Manifests the chronic conditions like Cancer, Rheumatoid arthritis, Diabetes mellitus, Asthma,
- Chronic bronchitis, Renal failure, Alzheimer's, Parkinson, Memory loss, Cataract,
- Hypertension, Arteriosclerosis, Ischemic conditions and more.

Factors responsible for excess free radicals and oxidative stress

- Unhealthy and untimely food intake
- Less nutritive diet
- Exposure to pollution, radiation and pesticides
- Cigarette smoking
- Inadequate sleep
- Anxiety, Stress, Worries and no physical exercise

Therefore these factors decrease the immune capacity of the body to fight against the pathogens and pay the way for disease conditions.

Our Human body has the wonderful immune response to act against these excess free radicals and oxidative stress by producing Antioxidants naturally known as Endogenous Antioxidants.

Nowadays, because of the stressful lifestyle, these endogenous antioxidants would not be enough to neutralize these excess free radicals and prevent from diseases. Therefore, it becomes very important in this modern era, to take the Antioxidants externally i.e. exogenous antioxidants as well to improve our Immune system and remain healthy.

So the factors which act as exogenous antioxidants are as follows:

- A good regular nutritive diet
- Timely food intake
- Intake of green leafy vegetables and fruits
- Moderate physical exercise
- Yoga and Meditation
- Sound sleep
- Ayurvedic Herbs like Ashwagandha, Guduchi, Tulasi, Shunti, Maricha, Amalaki etc

- Vitamins A, B, E & C
- Chemical constituents like Betacarotene, Flavonoids, Carotenoid, Selenium, Tannins, Curcumin, Glutathiane, Ascorbic acid, Acetyl L-carnitine, Alpha Lipoic Acid etc

Thus, these above factors act as Antioxidants which enhance defense of our Immune system, nourishes the cell tissues and even slow or extend the process of ageing.

Ayurvedic Herbs as Exogenous Antioxidants

Ayurvedic medicinal plants are the most important and natural source of exogenous antioxidants.

Many of the Ayurvedic herbs constitutes the chemical components which act as antioxidants

And they help in neutralizing the excess free radicals in our body and keep the person healthy and devoid of diseases.

According to the many research studies and recent data, Synthetic source of antioxidants are very harmful. Hence, Ayurvedic herbs Ashwagandha, Guduchi, Tulasi, Shunti, Maricha, Amalaki, Haridra, Twak, and Arjuna etc play a very important role as antioxidants as they are natural source and are not harmful as well.

Discussion

Our Human body cells produce free radicals and endogenous antioxidants. A low concentration of free radicals and balance between antioxidants & free radicals aid our immune system to fight against pathogens. Excess free radicals produced due to unhealthy food, low nutritive diet, and exposure to air pollution, cigarette smoking, stress, mental worries etc lead to destruction of cell or tissue and pave the way for oxidative stress and produce many chronic diseases. Antioxidants help to prevent the cell or tissue damage by neutralizing the excess free

radicals. It is difficult and harmful to use synthetic antioxidants according to the latest research studies. Hence, in addition to the endogenous antioxidants, Ayurvedic medicinal plants are the natural source of exogenous antioxidants with good nutritive food like green vegetables and fruits which are rich in vitamins, proteins and carbohydrates and along with good sleep, moderate exercise, yoga and meditation strengthens our immunity and extends our process of ageing.

Conclusion

Further research studies with integrated scientific approach of Ayurveda and Modern Scientific methods may yield a huge contribution for the society to maintain the healthy life.

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Standard journal article

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Article in supplement or special issue

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Corporate (collective) author

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