

Messege

Dear Staff and Students,

I am profoundly happy that Faculty of Ayurved is organizing a National Seminar on Trauma care in Ayurveda - Abhighatopachara on 29th & 30th December, 2017 at our University. The Faculty of Ayurved which started to function in our University from 2006 has now grown into a fully fledged, vibrant and dynamic entity. The University has successfully established an active learning environment which equips its students with in-depth knowledge and clinical skills with creative and critical ways of Ayurvedic practice. We strongly believe in providing our students with motivation, encouraging participation and making students feel responsible in their process of learning. I hope that this conference would provide informative and practical ideas to the participant students, researchers and practitioners on Ayurvedic trauma care. I convey my best wishes for the success of the event.



Dr.Devanshu Patel
President,ParulUniversity
Limda

Messege

Dear Delegates,

Warm greetings to all my dear enthusiasts of Ayurveda!!!!

I am informed that "Abhighatopachara" is targeted towards exalting the practice of Ayurvedic management in the event of trauma. The very topic chosen is a novel contribution to the genre of Ayurvedic medicine. I am sure that at the end of the seminar the participants will be charged with newer thoughts and ideas to serve the community in a much better way. I wish to convey my best wishes to the organizers and wish the National Seminar all success.



Dr.Parul Patel
Member,Governing Body &Chairperson,
Admissions Commitee, Parul University, Limda.

Messege

As the Medical Director of the university, this is a proud moment for me. Parul University is a leading educational institute of repute offering Under Graduate/ Post Graduate and Doctoral programs in Ayurved and Homeopathy. Parul Institute of Ayurved was established on 16th September 2006 by Parul Arogya Seva Mandal which was approved by Central Council of Indian Medicine, New Delhi and it was affiliated with Gujarat Ayurved University, Jamnagar. Now 2015 onwards, it is constituent part of Parul University, Limda, Vadodara. In its journey towards excellence, Parul Institute of Ayurved has completed a decade. To make the moment memorable, the Faculty of Ayurved is organizing National Seminar on Ayurved, "Abhighatopachara- Trauma Care in Ayurveda." This seminar would provide opportunities to the delegates to exchanges their ideas and involvement towards Trauma Care. I profoundly wish the seminar for every success. I wish to convey my best wishes to the organizers and wish the National Seminar all success.



Dr. Geetika Patel
Medical Director
Parul Sevashram Hospital
Limda

Messege

I am pleased to know that the Parul Faculty of Ayurved is organizing a National Seminar on Trauma care in Ayurveda "Abhighatopachara" on 29th and 30th Dec, 2017 at Parul University campus. I congratulate the whole faculty for organizing such a seminar which encourages the professional fraternity to explore all the areas of Trauma care through Ayurveda drawing inspiration from the renowned authorities of the field. I am sure that this will enhance the quality of management of trauma with Ayurveda and boost the research activities in this domain. The souvenir brought out on this occasion will be useful and informative for all. I wish to convey my best wishes to the organizers and wish the National Seminar all success.convey my best wishes to the Faculty of Ayurved for successful conduction of the seminar and publication of souvenir on this occasion.



Dr. Komal Patel
Managing Trustee
Parul Arogya Seva Mandal
Limda

Messege

I am happy to learn that the Faculty of Ayurved is organizing a National Seminar "Abhighatopachara" at our University campus. Parul University has involved itself in providing purposeful, holistic education through a curriculum that is well blend with both theoretical and practical knowledge. The idea behind this theme is to bring to a common platform stalwarts from various fields of healthcare, to discuss and share the changing dynamics in the management of Trauma care through Preeminent science of life-Ayurveda vis-à-vis the role of research, changing management trends, and above all enhancing patient care and experience.

I compliment the faculty for their efforts and believe that this seminar will benefit the Ayurvedic fraternity on a whole.



Dr. Ketan Kotecha
Honorable Provost
Parul University
Limda

Messege

The faculty of Ayurved started with a mission to provide quality Ayurveda medical education to the students making them highly skilled and experts in the field of Ayurveda. As a part of achieving this goal, the National Seminar Abhighatopachara is being organised. The seminar is aimed at analysing, understanding and implementing good practices of trauma care through Ayurveda. Traumatic experiences often involve a great threat to life or safety. Any situation that leaves a feeling overwhelmed and isolated can be traumatic. This eventually affects the individual and also the people around him/her badly. I am confident that this seminar would be a useful platform for exchange of ideas and best practices in the management of trauma that will benefit the participants and patients at large. I congratulate the faculty for organizing the National Seminar and wish the programme a grand success.



Dr. H. S. VIJAYKUMAR
Registrar
Parul University
Limda



वैद्य राजेश कोटेचा
Vaidya Rajesh Kotecha



सचिव

भारत सरकार

आयुर्वेद, योग व प्राकृतिक चिकित्सा
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MINISTRY OF AYURVEDA, YOGA & NATUROPATHY

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MESSAGE

I am pleased to know that Faculty of Ayurved, Parul University is organizing a national seminar on Trauma care in Ayurveda - Abhighatopachara on 29th & 30th December at Parul University, Vadodara. I congratulate the Organisers for providing a platform for this interaction through this Conference. I wish the Conference a great success.

(Handwritten signature)

(Rajesh Kotecha)

New Delhi,

Dated: 11th December, 2017

Messege

I hope and believe that this comprehensive seminar will cover all relevant traits of Trauma Care in Ayurved being organized by the Faculty of Ayurved, Parul University. It is highly appreciable that the ancient trauma management techniques discussed in Ayurved are being researched upon and analysed by eminent scholars of Ayurved. It is the need of the hour to validate the Ayurvedic Trauma management. I wish the seminar a grand success.



Dr.Dineshchandra Pandya
Director, AYUSH,
Gujarat.

Messege

Dear Delegates,

I am proud to express that Faculty of Ayurved, Parul University is organizing a National Seminar on Trauma Care in Ayurveda - Abhighatopachara on 29th & 30th December, 2017. I am happy to share that through this seminar we have brought together eminent professionals from across the country under one platform to discuss and propagate the various types of trauma management in Ayurveda. This particular theme chosen of "Trauma care through Ayurveda" is indeed very appropriate, considering the lack of awareness among the Ayurvedic fraternity and the immense potential Ayurveda has got to offer. I am confident that this seminar will come up with practical solutions to manage trauma through Ayurveda and stress upon the areas of research. On behalf of the organising committee, I hope and pray for the best outcome of the seminar.



Dr. Hemant Toshikhane
Dean
Faculty of Ayurved
Parul University
Limda

Messege

Dear Delegates,

I am immensely happy to share that the Faculty of Ayurved, Parul University is organizing a National Seminar "Abhighatopachara" at the University campus on 29th and 30th of December, 2017 and a souvenir is being brought to commemorate this occasion. The faculty of Ayurved which comprises of two sister concerns i.e., Parul Institute of Ayurved and Parul Institute of Ayurved and Research has organised National seminars on some of the most relevant topics of Ayurved and even this time, one such topic has been chosen which needs to be focused on. It is of great significance that this august body is going to deliberate upon several important topics, exploring some forgotten areas of practice and stress upon the research and collaboration with contemporary systems of medicine. I am sure that this humble step will contribute for the advances in the area of Trauma care in Ayurveda. I convey my best wishes for the success of the seminar.



Dr.B.G.Kulkarni
Principal
Parul Institute Ayurved & Research
Ishwarpura.

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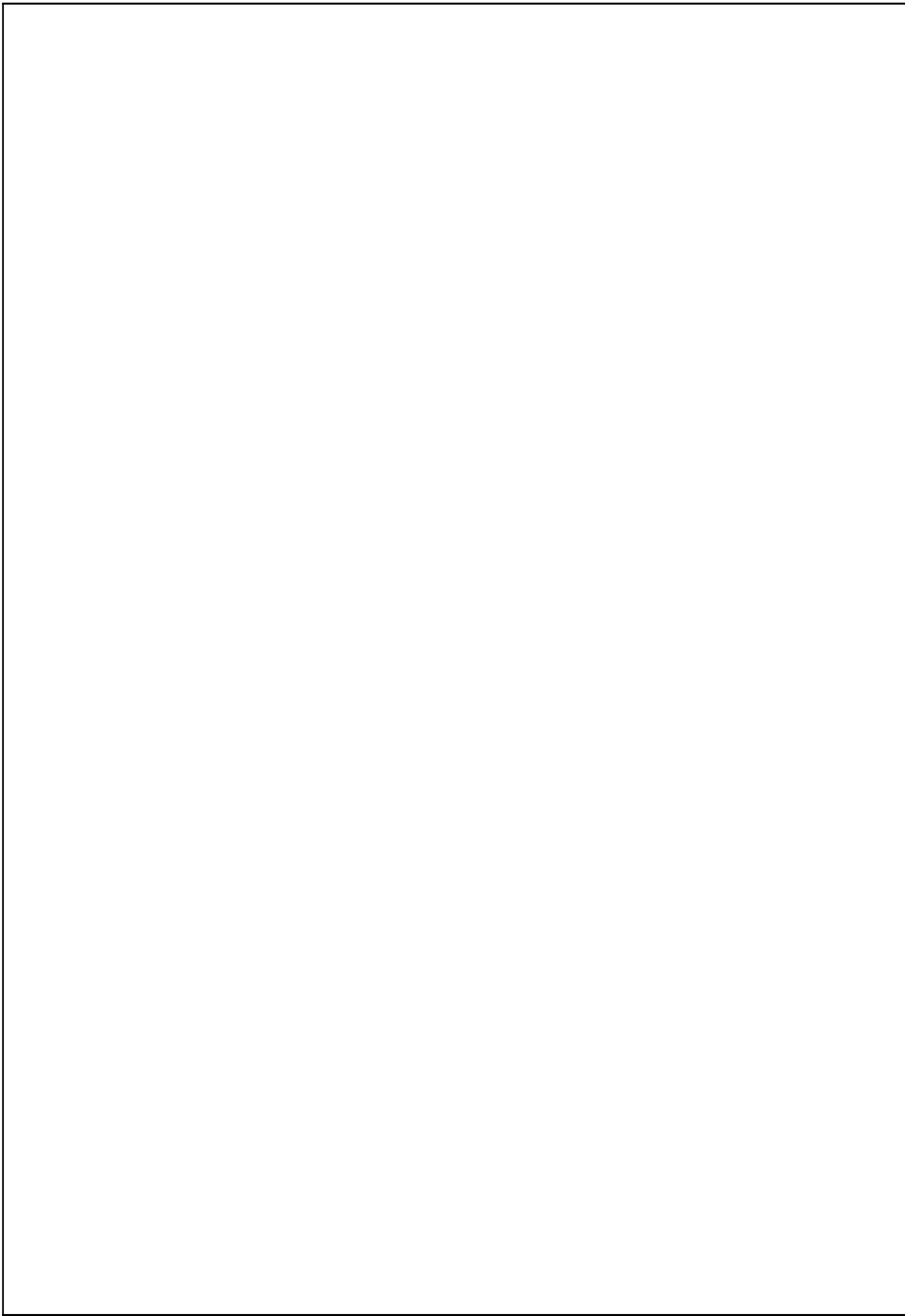
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ABSTRACTS

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DIFFERENT AYURVEDIC PROCEDURE AND HERBAL MEDICINES IN THE WOUND HEALING WITH SPECIAL REFERENCE DIABETEC ULCER

Dr. Akhlesh Kumar Bhargava¹

1. Asso. Prof.&H.O.D., Dept. of Shalya Tantra, Govt. Ashtang Ayurved College, Indore (M.P.), akhlesh.bhargava@yahoo.com

Abstract:

Wound is a discontinuity or break in the surface epithelium. A wound is simple when skin is involved. It is complex when it involves underlying nerves, blood vessels and tendon. Concept of wound care and wound cicatrisation is very well explained in Ayurvedic text books. Sushruta, being the father of surgeon has explained in detail about wound healing. Acharya Sushruta has described 60 procedures for the wound healing, described in full paper presentation.

Vrana is the most important and widely described chapter of Shalya tantra. Vrana (wound) is one of them, which have been managed by human being from starting of civilization. Under the circumstances, the first thing which the men came across was the injury from different sources which caused him the Vrana. Vrana is seen as debilitating and scaring disorder, usually seen affecting the human being at any age.

Delayed wound healing and wound infection place a substantial financial burden on health care systems, as a result of increasing dependency and increased hospital admissions. Chronic wounds also have a very large social and quality of life impact on individuals and carers.

Keywords: Cicatrisation, Healing, Infection

A REVIEW ON MEDICAL EMERGENCIES OCCURING AT SCHOOL AND THEIR MANAGEMENT

Arpitha Shetty¹

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Introduction: The average school aged child spends 28% of the day & 14% of his or her total annual hours in school. Children and adults might experience medical emergency situations. From injury to anaphylaxis to status epileptics, schools are expected to anticipate and prepare to respond to a wide variety of emergencies. The school across the nation varies tremendously in their degree of preparedness to deal with emergencies. Schools in rural area particularly in larger communities are ill prepared to deal with such emergencies.

Aims & Objectives: To review the various medical emergencies which commonly occurring in schools as well as to study the management of such medical emergencies and thereby creating awareness for the same.

Discussion: School medical emergencies can involve students involve students, staff members or attendees of special events, because injuries are the most life threatening emergencies encountered by children and adolescents inside or outside schools. Hence; teachers, school nurses, physicians, athletic trainers, coaches and students should know general principles of first aid and CPR.

Conclusion: With the present paper an effort will be made to increase the clinicians awareness of the role that school play in preparing for & responding to the individual student emergencies.

Keywords: School children, Medical emergencies, Awareness.

AN OBSERVATIONAL STUDY ON MANAGEMENT OF TRAUMATIC TEAR OF ACL USING SWEDANA KARMA AND MATRA VASTI

Dr. Gokul Narayanan¹

Dr. S Narayanan²

1. Physician, Narayana Ayurveda Chikitsalayam, Amrithakripa, Chittilamchery, Palakkad, Kerala, 8129688155, dr.gokul.narayanan@gmail.com

2. Chief Physician, Narayana Ayurveda Chikitsalayam, Amrithakripa, Chittilamchery, Palakkad, Kerala

Abstract:

Knee joints play a vital role in maintaining stability and well as in providing mobility. Due to excessive strain which happens over the knees during various activities the ligaments are prone for various types of injuries. Janu is considered as a Vaikalyakara Sandhi Marma according Ayurveda. As Vastikarma is considered to be the foremost line of approach in Marmabhighata, Matra Vasti was selected.

5 patients of both genders, who were diagnosed to be suffering from complete/partial tear of Anterior Cruciate ligament as per MRI were selected for the study. The patients were subjected for Upanaha Sweda with Asthishrighala, Egg white and Rasa Taila and 9 days of Matravasti (90) MI 50 MI Rasa Taila + 40 MI of Godugdha. The parameters of tenderness, swelling of the joints, limitation of flexion and extension, stability of joints and crepitus were studied before treatment, after treatment and at follow up. In patients who had partial tear of ACL study showed significant results in almost all parameters, whereas patients who had complete tear showed significant results in joint instability, flexion and extension.

With studies being conducted on more subjects the principles of Ayurveda can be an alternative for the contemporary surgical methods in treatment of Ligament injuries

Keywords: Vaikalyakara Sandhi Marma, Marmabhighata, Matra Vasti, Crepitus

RECENT ADVANCE APPROACH IN POLYTRAUMA MANAGMENT

Dr.Sanjay Trivedi¹

1. Associate Professor, Dept.of Shalya Tantra, G.J.Patel Institute of Ayurvedic studies &Research centre Anand, 9428628046, drsanjaytrivedi888@gmail.com

Abstract:

Poly-trauma is severe injury to more than one organ system or physical regions, one of which will be life threatening, hence the name poly-trauma or multisystem trauma. The term is defined via an Injury Severity Score (ISS) equal to, or greater than 16.

Like heart disease or cancer, trauma is also a disease, as it has identifiable causes, established method of treatments and defined methods of prevention. Overall trauma is the sixth leading cause of death and third major cause of disability in the developed countries but, it is the second leading cause of death in the developing countries. Majority of deaths due to trauma occur between 15-44 years of age. The first peak occurs within seconds to minutes due to airway obstruction, ventilation failure or injury to the vital organs like brain, the second peak occurs within minutes to hours due to exsanguinous haemorrhage or due to rupture of major vessels like aorta and the third peak occurs over days to weeks due to sepsis or multi organ failure (MOF). Trauma can be best managed through the algorithm derived by American College of Surgeons committee on trauma (ACSCoT) called Advanced Trauma Life Support (ATLS) guide lines.

Inpatient care of poly-trauma victims requires careful attention to detail, and meticulous treatment of ongoing injuries and complications after the immediate resuscitation and damage control surgery. This discussion provides an update on the management of coagulopathy, respiratory failure, and prevention and treatment of venous thromboembolism in poly-trauma victims. Specifically, the role of thromboelastography, ratios of blood product transfusions, newer modes of respiratory support including airway pressure release ventilation and veno-venous extracorporeal membrane oxygenation, and the use of mechanical and chemoprophylaxis for prophylaxis and management of venous thromboembolism

Keywords: Air way obstruction, Poly-trauma, ACLS, MOF, Thromboelastography, Thromboembolism, Coagulopathy

CASE REPORT: MANAGEMENT OF BASTIMARMAGHAT (ACUTE) THROUGH PANCHBHOUTIK CHIKITSA

Dr. Krishna B. Rathod¹

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Abstract:

Ayurveda is science of life. Ayurveda is the science having its own fundamental principles. The precious fundamentals of Ayurved guide in diagnose and management of Disease. Thousands of basic principles explained in the Ayurved samhitas. Only few of them are practically used in day today practice by few Ayurvedians, Ayurveda consultants and Most of the principles used by few Ayurveda practicers and Ayurveda Consultants.

AGHAT OF MARMA (Externally) AND PANCHBHOUTIK CHIKITSA: Ayurveda explains Marma and their Panchbhautikatatva. Aghat (External trauma) to Basti marma and due to trauma Urinary incontinence, painful Anterior Abdominal wall etc (Subjective) Lakshana Significantly noted. By using basic principles of Panchabhoutikatatva of Gairik; case got relief to the symptoms. This Shows the SIGNIFICANCE of Panchabhoutik Chikitsa through which try to manage the acute trauma of Basti Marma –Aghat. Basti marma is one of the Skandhashrit marma (Marmatraya). Panchbhautik chikitsa is One of the best practically used Chikitsa especially in Kayachikitsa. Through this, a clinical case study has been tried to show significance of panchabhoutik chikitsa in management of Acute Trauma to basti Marma.

Keywords: Bastimarma, Aghat, Panchbhoutikchikitsa, Trauma, Gairik.

ROLE OF ABHIGATHAJ NIDAN IN UNDERSTANDING PROGNOSIS

Dr. Shivanand A Kembhavi¹

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Abstract:

Abhigata can be a cause for a disease or it may be found in the process of pathology, so it can be studied at different levels of a disease process. Trauma (Abhigata) can be classified in physical trauma and psychological trauma. Physical Trauma can further be classified into two categories like external (Pathan Peedan, Prahar etc. leading to Bhagna etc.) and internal (Doshopaghata, etc. leading to Kushta, Arbuda etc. Psychological trauma is also classified into two types like external (Kama Kroda Matsar etc leading to Unmad and Apasmar) and internal (Long standing diseases and other factors like Guru Sadujan nindAna etc. leading to Unmada, Kushta)

Based on etiology of Abhigata the prognosis of diseases may vary. In almost all the conditions where trauma is the part of pathological process we notice poor prognosis, e.g. In case of Kushta, Prameha, Udara, and Arbuda where the Abhigata occurs due to vitiated Doshas leading to Disability or deformity.

If Abhigata is found as external etiological factor of a disease, we notice good prognosis. e. g. Fractures, Dislocations, Upadamsh, Parivartika etc. Psychological trauma due to either internal or external causes, leads Abhigata to important structures like Chetana (mana) and its location i.e. Hridaya, Dasha dhamani, in such conditions we notice poor prognosis.

Thus we can consider the types of Abhigata in assessing prognosis of conditions which may help in their better management.

Keywords: Abhigata, Trauma, Prognosis

CONCEPT OF MARMA SHARIRA – AN AYURVEDIC TRAUMATOLOGY

Dr. Seetharama Mithanthaya¹

1. Reader, J.S. Ayurved Mahavidyalaya, Nadiad, 9901732256, drsitharam1@gmail.com

Abstract:

Introduction: In the era of dynasties, people use to face various combats to protect their kingdom, in this course they use to meet with different kinds of life threatening trauma. This formed the basic necessity for development of a specific branch in medicine known as traumatology. The concept of traumatology is documented under the heading of Marma-Śārīra in the texts of Āyurveda.

Aim: To describe the concept of Marma-Śārīra w.s.r to traumatology.

Discussion: Ācārya Sūruta explained the concept of Marma focusing on different possible trauma. Marma are those anatomical sites in the body which gets their vitality due to the special presence of Prāṇa. There are 107 Marma in the body and they produce varied sets of complications on injury. Based on effects of injury the Marma are of five kinds; Sadyaprāṇahara-Marma, Kālāntaraprāṇahara-Marma, Viśalyaghna-Marma, Vaikalyakara-Marma, Rujākara-Marma. Among these five types of Marma, first three Marma are fatal where death is inevitable if not treated properly; disability is certain if Kālāntaraprāṇahara-Marma gets injured and severe intolerable pain in case of Rujākara-Marma. On injury to Marma the components of Marma (Māṁsa, Sirā, Snāyu, Asthi, and Sandhi) gets destructed resulting in aggravation of Doṣa and produce the fatal effects.

Conclusion: The Marma-Sharira is that section in Ayurveda which brief about the concept of traumatology, but there is a need of understanding these concepts with present day trauma situations. In the presentation an approach will be made to elaborate the concepts of Marma injury and its application in present day with few examples.

Keywords: Traumatology, Prāṇa, Vaikalyakara-Marma, Rujākara-Marma

FORENSIC AND LEGAL ISSUES OF TRAUMA CARE W.S.R TO VICTIM OF RAPE

Dr.Amit L Tamadaddi¹

1. Associate Professor, J.S. Ayurved Mahavidyalaya & P.D. Patel Ayurveda Hospital, Nadiad, 9844285075, amitdoc03@gmail.com

Abstract:

Sexual assault / Rape is an act of sexual intimacy done without the consent of the victim, or where consent has been obtained by means of threat, fear or fraud. In India, sexual assault is a serious offence and its seen that number of offences are increasing in a alarming way. According to National Crime Records Bureau Report (NCRB) in 1998, there were 15,033 rape cases reported in

India. Madhya Pradesh reported the highest incidence accounting for 22.3 percent of total cases. Among the cities, Delhi and Mumbai recorded more crimes numbering 365 and 118, respectively. In rates, Mizoram [9.3] led the table followed by Madhya Pradesh [4.3], Dadra and Nager Haveli [3.9] and Delhi [3.4]. Victims of rape were found maximum in the age group of 16–30 years accounting for 8,414 out of 15,033 reported cases. In 2016 According to the data collected by the NCRB, Madhya Pradesh with 4,391 cases, Maharashtra with 4,144, Rajasthan with 3,644, Uttar Pradesh with 3,025, and Odisha with 2,251 and Delhi with 2,199 recorded the highest number of reported rape cases. Hence the present article for presentation is intended to bring the awareness to registered medical practitioners about the forensic and medico-legal issues concerned in sexual assault with special references to victim of rape to get the maximum evidences against the offender.

Keywords: Rape, NCRB

INTERPRETATION OF HAEMORRHAGIC CVA ON THE BASIS OF CHARAKOKTA ATIASRIK SRAVANA AS A NIDANA - A CASE STUDY

Dr. Divya S. Deva¹

Dr. Sachin Deva²

1. Lecturer & Consultant, Parul Institute of Ayurveda & Research, Ishwarpura, Vadodara, 9844810958, dr.divyadeva3@gmail.com
2. Reader & HOD, PG Dept of Roga Nidana, Parul Institute of Ayurveda, Limda, Vadodara, 9844810957, dr.sachindeva30@gmail.com

Abstract:

Charaka while mentioning about Nidanas of Vatavyadhi very clearly suggests Asrik Sravana as one prime Hetu. Asrik Sravana causes Vata Vriddhi along with Dhatu Kshaya leads to Pakshavadhya, Pakshaghata, and Ekangavata etc conditions. Cerebral haemorrhage can be considered as abhyantara Asrik Srava. It can manifest Hemi/Para etc paresis or even plegia. It is very important to note here that Dhatu Kshaya is a major cause for Vatavyadhi along with its other Nidanas like Avarana, Kevala/Swahetu or Abhighata.

In this presentation a CVA (Haemorrhage) case study by keeping Charakokta Ati Asrik Sravana as a hetu will be thoroughly analyzed and its treatment gist will also be discussed.

Keywords: Atiasrik Sravana, CVA.

AYURVEDIC MANAGEMENT OF DYSMENORRHOEA CAUSED BY TRAUMA

Dr. Madhu M¹

1. Assistant Professor, Department of PTSR, PIA, Parul University, Limda; Ph. D. Scholar, SCSVMV, Kanchipuram

Abstract:

Dysmenorrhoea is a gynecological disorder characterized by severe uterine pain during menstruation manifesting as cyclical lower abdominal pain. It is commonly classified into primary dysmenorrhea where there is no underlying pathology and secondary dysmenorrhea when there is identifiable pathological condition. It has its main impact on the quality of women's life. In spite of these types, the dysmenorrhoea even results as a complication of gynecological procedures like D & C, cervical cauterization etc. It is caused due to injury to the cervix or basal endometrium due to improper conduction of procedures. The treatment plan is based on the underlying pathology manifested. It comprises of cervical dilatation etc.. So this paper is to highlight the methods of treatment of traumatic dysmenorrhoea both in Ayurvedic and contemporary science.

Keywords: Dysmenorrhoea, Trauma, D & C, Cervical Cauterisation.

A CASE STUDY – MANAGEMENT OF PAKSHAGATA (CVA) THROUGH AYURVEDA

Dr. Vikas Chauhan¹

1. Reader, Dept. of Kayachikitsa, Shri Baba Mastnath Ayurvedic College&Hospital, Asthal Bohar, Rohtak, Haryana, chauhanvikas2808@gmail.com

Abstract:

Purpose: Stroke is one of the leading causes of death and disability in India. Stroke is not a disease in itself but is heterogeneous group of disorders. This disease has posed a great problem to the medical field as far as its treatment is concerned. There is a wealth of information available on the cause, prevention, risk, and treatment of stroke. Even then much, less is known about the treatment of the stroke, there is no any satisfactory and widely acceptable measure for the stroke. Many studies were being conducted in the field of Ayurveda as well as in contemporary fields for achieving the better line of management for Cerebro Vascular accident (CVA).

Method: A CVA case was admitted, with the complaints of loss of strength in the right side of the body, associated with slurred speech, irritability, heaviness and reduced sleep, on examination found Glasgowcoma scale was 9/15 (E – 3, M – 2, V – 4), and

with the help of CT and laboratory investigations, case was diagnosed as Abhighata janya Pakshaghata with Pittakaphaavruta. Various treatment procedures like shirodhara, nasya, shirosthalam, kavala etc. with oral medicines were adopted at various condition of the disease.

Result: A significant result was obtained from this treatment protocol in CVA case.

Discussion: As CVA can be correlated as pittaavrutavatajapakshaghata. Because of pitta avruta, pittaharatreatment should be adopted first and then followed by vatahara treatment.

Conclulsion: There was a remarkable improvement in the subjective and objective clinical features. Result are encouraging for the further advance research in CVA.

Keywords: Stroke, Pakshaghata, Cerebro Vascular Accident.

ABHIGHATA JANYA VIKARAS – AYURVEDIC MANAGEMENT

Dr. S. Gnanaprasuna¹

1. Associate Professor, Hod, Dept. Of Kayachikitsa, S.V.Ayurveda College, Ttd, Tirupati; drsqprasuna@gmail.com, 9989480297

Abstract:

The term “ABHIGHATA” is of great clinical importance in Ayurveda as the patient suffers much more prior to the Dosha- Dushya vitiation. Abhighata does not only simply injure the patient; it may prone the patient to suffer from various diseases as complications due to abhighata. While mentioning many Sareeraka and Manasika Vikaras, Abhighata was identified as one of the Nidanas for many such Vyadhis. They may range from a simple Jwara to the most complicated Bhagnas or hemorrhagic conditions. The presentation of the patient varies as various tissues of the body become vulnerable to abhighata. Skin (Twak) may manifest as a simple abrasion or a contusion after an injury. Rakta may manifest in the form of Srava (bleeding) after the injury. Muscle (Mamsa) may manifest in the form of a swelling or a tear after an injury. Bone (Asthi) may manifest in the form of a fracture, swelling and the like. Bone marrow (Majja) may be injured in compressive bone injuries. Ligaments and Tendons (Snayu) may manifest in the form of a tear or sprain. So the management of Abhighata Janya Vikaras depends on the tissue involved. It may be an emergency or non-emergency management. Non – emergency management of Abhighata Vikaras is considered for this paper. Ayurveda advocates many treatment modalities depending on the depth of the injury and the tissue involved. Here an attempt is made to focus a few of these treatment modalities and medicaments and will be discussed in the full paper.

Keywords: Abhighata, Vikaras, Management.

CASE REPORT ON MANAGEMENT OF KUSHTA (PSORIASIS) WITH VIRECHANA KARMA (INDUCED PURGATION) AND RASAYANA (REJUVENATION) THERAPY

Dr Mahesh Parappagoudra¹

Dr. Navoday Raju²

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Abstract:

In this present clinical study, a case of Kushta (Psoriasis) patient was registered from the I.P.D., Department of Panchakarma, Parul Institute of Ayurved, and Parul University Vadodara and completed the treatment. The aim of the study was to evaluate the role of Ayurvedic management on Kushta (Psoriasis) with Virechana Karma (Induced Purgation) and Rasayana (Rejuvenation) therapy. The treatment schedule was Pachana and Deepana (Carminative therapy), Snehapana (Orally intake of Ayurvedic medicated oil), Niragni Swedana (Sweating by without heat), Virechan Karma (Induced purgation by Ayurvedic procedure) and VardhamanaKhadhira Churna RasayanaSevana (Rejuvenation with orally intake of Acacia Catechudried powder in gradual increased and decreased dose). In this clinical study 70% patient complaints got major improvement, 30% patient complaints got minor improvement. Any complication was not found in this clinical study.

Though a single case is not enough to prove the efficacy, here we had tried to share our experience through this report to state that Ayurvedic treatment for Kushta with Panchakarma and Rasayana Chikitsa is very effective and enhances the quality of life of patient without creating any side effects.

Keywords: Psoriasis, Kushta, Virechana Karma and Rasayana Chikitsa.

EFFEET OF MANTRA CHIKITSA IN THE MANAGEMENT OF PSYCHOLOGICAL TRAUMA

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Dr. Niranjan Y²

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2. Associate Professor, Department of Kayachikitsa, Parul Institute of Ayurved, Limda, Waghodia, Vadodara, Gujarat.

Abstract:

Introduction: Management of any ailment with verses (Mantra) is Mantra Chikitsa (treatment). Even though it is not in regular practice nowadays, it is having its own importance in many places, communities, regions and religions across the world with its beneficial effects serving many. Trauma is disturbance. Psychological trauma is mental disturbance. Mantra Chikitsa can be better utilized for the management of psychological trauma because of many secondary advantages viz. simplicity, practical applicability, non-invasive, time saving benefits along with primary benefit.

Aim & Objective: Proving the effectiveness of Mantra Chikitsa in the management of psychological trauma.

Material & Methods: Classical texts and contemporary books along with different research works are reviewed and establishment of the fact is done after proper analysis.

Discussion: Beneficial effects of Mantra Chikitsa in Psychological trauma will be discussed elaborately.

Conclusion: Effect of Mantra Chikitsa on Psychological Trauma will be concluded.

Keywords: Mantra, Verses, Chikitsa, Psychological, Trauma

PSYCHOLOGICAL TRAUMA & ITS MANAGEMENT

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Abstract:

Psychological trauma is a type of damage to the mind, that occurs as a result of severely distressing event. The severity of this kind of trauma differs between individuals. Not all people get traumatized with same event to the same extent. Basically all psychological traumas originate from stress. Ayurveda explains human body as a combination of body, mind & spirit. So a person who has suffered an emotional trauma is disturbed in body-mind-spiritual balance. Whenever anything unexpected happens, Vata is provoked & it disturbs balance of other body entities including mind. Psychological trauma can be considered as 'Sadhaka-Pitta' Dushti along with Vata vitiation. Both are responsible for control over emotional behaviour of individual. Psychologically traumatized person is at a risk of wide range of problems & symptoms such as shame, anger, loss of confidence, depression, anxiety, dissociation, loss of desire to live and at the most extreme suicidal tendency too. With the help of Ayurveda, we can actively overcome this condition by practicing Vata-upakrama, some remedies specially acting on mind health and proper counselling.

Keywords: Trauma, Mind, Vata, Sadhaka Pitta, Ayurveda

LABOUR - A PHYSIOLOGICAL TRAUMA & ITS CARE

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Abstract:

Labour is a word which itself denotes physical trauma. The most common way of childbirth is a vaginal delivery. Labour involves successive incidences such as abdominal & back pains, uterine & cervical dilatation, amniotic membrane rupture, placental expulsion, sometime episiotomy or perineal tear. Almost every woman's lifespan she is going to experience this physiological trauma of childbirth, once or more. A human body can bear only up to 45del (unit) of pain. Yet at labour a mother feels up to 57 Del (unit) of pain, which is similar to 20 bones getting fractured at a time. After labour also the woman's body has to heal physically & mentally. Ayurveda have beautifully described care of such trauma under the heading of 'Sutika-Paricharya'. It helps the best recovery of sutika.

This trauma cannot be avoided, as labour is a physiological process, but we can have its good management during puerperium & avoid unnecessary complications. It could be a nice way to manage this beautiful pain to be a power with miraculous effects of Ayurvedic science.

Keywords: Labour, Trauma, Pain, Ayurveda, Care

SURGERY INDUCED TRAUMA IN KEY WOMEN-SPECIFIC CANCER AND CARE THROUGH AYURVEDA: A COMPREHENSIVE APPROACH FOR INDIAN SCENARIO

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Abstract:

Background: India ranks among the top two countries globally on mortality for key women-specific cancers and reported to be second highest incidence for ovarian cancer globally.

Introduction: In Indian scenario unfortunately women's sexual health is most neglected due to varied reasons. Living as a breast and genital cancers sufferer or survivor is a big trauma affecting women physically, psychologically and socially, thus hampering their quality of life (QOL). Surgery or surgery along with chemotherapy, radiation is one of the conventional treatment approach.

Material& methods: A search was undertaken in Google scholar, Science Direct, MEDLINE PUBMED, SCOPED and other relevant databases, using keywords like 'women's sexual health', 'breast cancer', 'genital cancer', 'statistics', 'India', 'QOL', 'trauma' etc. with their corresponding mesh terms in combination like 'OR','OF','AND'.

Result & discussion: Lumpectomy, mastectomy or complete breast removal and salpingo-oophorectomy, hysterectomy etc. done as a prophylaxis or curative purpose for the management of breast and genital cancer respectively. The surgery involves side effects like bleeding pain, vaginal discharge, bowel problems, constipation, painful coitus, lymph fluid buildup, disfigurement and fertility related issues includes both short term and post recovery side effects. These leads to physical, sexual, mental and cosmetic trauma to women leading to deprived QOL. As per Ayurveda the symptoms can be considered as *Upadrava* (complication of surgery). Ayurveda offers *Shamana* (pacifying), *Satvavajaya* (psychotherapy) and *Panchakarma* procedures for the management of these symptoms. The details will be furnished in presentation.

Conclusion: A comprehensive Ayurvedic approach is expected for the management of surgery induced trauma in women specific cancer.

Key words: Trauma, women specific cancer, QOL, Indian scenario.

A COMPARATIVE CLINICAL MANAGEMENT OF AAMASHAYAGATA ABHIGHATA DUE TO AMLAPITTA WITH KHANDA KUSHMANDA AVALEHA& NARIKELA KHANDA AVALEHA

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Abstract:

One of the very common diseases caused by unhealthy food habits and lifestyle activities is Amlapitta. A comparative clinical trial was conducted to manage the disease through KhandaKushmandaAvaleha and NarikelaKhandaAvaleha. 50 patients, diagnosed as Amlapitta were selected from OPD and IPD of Ayurveda Mahavidyalaya, Hubli, Karnataka who fulfilled the inclusion criteria and randomly categorized in 2 groups, namely Group A and Group B, with each group consisting of 25 subjects. Special clinical proforma, based on criteria of selection and parameter, for assessment of subjects was prepared. 25 patients in Group A were given 25 gms of KhandaKushmandaAvaleha along with SukhoshnaDugdha as anupana for 30 days and 25 patients in Group B were given 25 gms of NarikelaKhandaAvaleha along with SukhoshnaDugdha as anupana for 30 days.

Both the groups showed statistically significant results. Out of 50 subjects, 80% subjects showed excellent response in both the groups. 12% subjects in group A and 16% subjects in group B showed good response. Moderate response was shown by 8% subjects in Group A and 4% subjects in Group B. The study revealed that both KhandaKushmandaAvaleha and NarikelaKhandaAvaleha showed excellent results in the management of Amlapitta and both groups showed almost same results on objective and subjective parameters.

Keywords: Amlapitta, Khanda Kushmanda Avaleha, Narikela Khanda Avaleha.

PAIN MANAGEMENT THROUGH MARMA CHIKITSA

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Abstract:

Pain is a subjective symptom and is the commonest complaint for which patients visit the doctor. It is unpleasant sensory or emotional experience associated with actual or potential tissue damage. It is denoted by the term *Ruja/Vedna/Shool* in Ayurveda.

Vatadosha derangement is the main compulsory factor and therefore, the management is also targeted at pacifying the vatadosha and maintaining the harmony. Analgesia i.e. management of pain is unusually believed to be the missing weapon in armoury of our science. But this is an understatement, we have some potent methods/therapies to counter pain and even give immediate relief. Basic pain controlling measures are categorised in 2 categories-

- Pharmacological: Medicines, oils, pastes, fomentation, basti treatment and other Panchakarma procedure.
- Non- pharmacological: Marma therapy, Agnikarma, Cupping therapy

These treatment modalities can be used alone or in combination to provide analgesia. The most beautiful and unique aspect of Ayurveda is its capability to work on psychological or sub-conscious level of patient and for complete wellbeing. Marmachikitsa is a potent tool to provide a cost effective and harmless solution to manage pain. It works through manipulation of subtle energy (prana) in the body for the purposes of supporting the healing process.

Conclusion: We need to work hard in a focussed manner to break this myth that pain can not be managed with pure Ayurvedic treatment; rather it can be a high potential and satisfying field to work upon. **"Divine is the task to relieve pain"**.

Key words: Ruja, Marmachikitsa.

AYURVEDIC MANAGEMENT OF LOW BACK ACHE (KATI SHOOL)

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Abstract:

Backache is one of the commonest challenges encountered in clinical practice. It leads to impaired daily routine and big financial burden many times. The aetiology includes congenital, inflammatory, infective, traumatic, metabolic, degenerative causes and tumours. Trivial traumas can often cause chronic backaches. It is often occupational overuse syndrome. There is respective pulling and straining of back muscles and ligaments, leading to their weakness and liability to get additional injuries. Ayurveda has a commanding role in dealing with post-traumatic and other backaches and is an efficient way to deal with majority of cases. Aggravated Vata Dosha is believed to be cause of pains and treatment aims at maintaining the harmony of Vata. Ayurvedic management incorporate 2 components which are Therapeutic and preventive aspect.

Treatment options include Nidan Parivarjana, Snehana (Abhyanga, Kati Vasti), Swedana (Patra, Potli, Baluka or Naadi Swedana), Cupping therapy (Shringa, Alabu, Ghatyantra), Marma Chikitsa and Medication (oral drugs and local applications- lepa). Preventive aspect comprises Life style management, Yogasanas and Marma chikitsa.

Conclusions: Ayurvedic management is a potent way to deal with this menace and provides a cost-effective and non-surgical management and helps in preventing the recurrence.

Keywords: Katishula, Treatment and Prevention.

CONCEPTS OF ABHIGHATOPACHAR IN DAMSTRA CHIKITSA WITH ITS SIGNIFICANCE IN PRESENT ERA

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Abstract:

"Damstra chikitsa" the term coined by Maharshi Vagbhata for Ayurvedic toxicology, which deals with the science of poison. Here 'Damstra' refers to the teeth's/fangs of poisonous animals like snake, insects etc...

"Damstra chikitsa" is an emergency management in Ayurveda to regain the normalcy of hampered physiological and physical health of a patient. Trauma is an emotional or physical damage to the body caused by violence, accident etc. here the importance is for both physical and psyche of patient.

The Traditional medicine and Ayurveda are very well explained about the concept of Abhighatopachar in Damstra chikitsa, such as Mantra, Raktamokshana, Nasyakarma, Anjana, Oota chikitsa, Lepana, Aristabandhana etc... And some of the keralian traditional texts like Kriya Koumudi, Prayoga samuchchaya, Visha Vaidya Sara Samuchchaya mentioned important herbo-mineral formulations like Jeevarakshaka Gulika, Visha vilwadi Gulika and Garudanjana which plays paramount role to decrease the mortality rate. So in this presentation I want to highlight the concept and importance of Agada yoga in Trauma care (with reference to Damstra Chikitsa) which are mentioned in classics.

Keywords: Damstra Chikitsa, Traditional methods, Jeevaraksha Gulika, Agada yoga.

ROLE OF MATRABASTI IN THE MANAGEMENT OF SANDHIGATAVATA

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Abstract:

Sandhigataavata is oftenly co-related with Osteoarthritis (OA) on the basis of parity. Abhigata is also considered as Nidan for this disease. Sandhishool, Sandhisotha are few of the lakshana. OA in allopathy is a challenging disorder as it stands second foremost cause of work disability and the management is mainly symptomatic. On the other hand various treatment modalities are mentioned in Ayurved for this disease.

Therefore the treatment repository for this disease mentioned in Ayurved needs to be explored so that right treatment can be adopted amongst the conflicting choices. With this aim a study was conducted to evaluate the role of Balatail Matrabasti in the management of this disease. The details and the results will be presented during the seminar.

Keywords: Sandhigataavata, Osteoarthritis, Balataila, Matrabasti

ABHIGATAJANYA BASTI VYAPADA AND ITS MANAGEMENT

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Abstract:

In the Ayurvedic management Panchkarma Chikitsa plays a key role to eradicate the disease from its root. Among 5 karmas Basti is considered as half Chikitsa especially in Kaya-anga. As success of Chikitsa depends upon Chikitsa Chatushpada (Vaidya, Paricharaka, Aushdhi, Rugna), reason behind its failure is caused by the same. Here, alone Basti-karma has 76 Vyapadas as described by Acharya Sushruta. Some of these are caused due to improper administration of Basti. These complications are as simple as anal pain to severe per rectal bleeding. Vaidya should be able to handle such situations. In this presentation importance is given to Basti Vyapada and its management.

Keywords: Panchkarma, Basti, Vyapada, Chikitsa

PANCHAKARMA UPACHARA IN ABHIGATAJANYA PANGUVATA

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Abstract:

In Ayurveda certain diseases have been described which are of Abhigata (traumatic) in origin. These are called Agantuja Vikaras or Kshataja vikaras. They can be seen in Brihatrayaee from Jwara to Upadamsa. Traumatic injuries are those which may be in the form of a simple abrasion or even death. Much attention is to be given when it is an emergency condition and the life of the patient is in trouble. A few of the traumatic injuries physically disables the patient for a long time, sometimes even throughout the life. Paraplegia is one such disease in which the patient may suffer for his whole life both physically and mentally. Panguvata (paraplegia) is one of the abhigatajanya vyadhis which is mainly due to injury to lower spinal cord. In this there is loss of function of both the lower limbs and in some cases there is also loss of sphincter control along with sensory changes. If the upper spinal cord is injured it may result in quadriplegia, where all the four limbs are paralyzed. Depending upon the injury to the spinal cord the prognosis can be assessed. In partial spinal cord injuries prognosis may be good but if it is a complete spinal cord injury the prognosis would be poor.

Treatment in such cases may be conservative or surgical management. Both of these treatment modalities along with physiotherapy will help the patient to a certain extent only. Ayurveda, a holistic system of medicine gives a ray of hope to such patients in improving their quality of life. The various Bahirparimarjana and Antahparimarjana Chikitsas applied in such patients definitely gains the confidence of the patient. The different treatment modalities adopted by me in my clinical practice will be discussed in detail in the full paper.

Keywords: Agantuja Vikaras, Panguvata, Bahirparimarjana, Antahparimarjana

ROLE OF YOGA IN THE MANAGEMENT OF ASTHIABHGHATA - FRACTURE

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Abstract:

In the management of fracture 4 R's play important role e.g. Resuscitation, Reduction, Retention, Rehabilitation. After the 1st three the most important is Rehabilitation as in this period only both mind and body tries to come to normal state. This is the same period in which patient may go into depression as recovery period is longer. It may take minimum 3 wks to 3 months depending upon type of fracture. Yoga is considered to be a low-impact activity that can provide the same benefits as "any well-designed exercise program, increasing general health and stamina, reducing stress, and improving those conditions brought about by sedentary lifestyles". It is particularly promoted as a physical therapy routine, and as a regimen to strengthen and balance all parts of the body. Only the yoga therapy should be carried out under observation of its expert. Here in this study importance of yoga will be discussed in the management of fractures.

Keywords: Yoga, Asthi-Abhghata, Fracture, Rehabilitation

TREATMENT MODALITIES IN TRAUMA

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Abstract:

Trauma or injury is one of the types of cause of disease which is occurred due to different external causes. So Agantu Vikara can be treated according to its cause specifically in the form of shaman & shodhana chikitsa. External application of drugs as well as internal medication is important while treating disease. Our texts classifies these medicines on the basis of function what they do to recover injury. In case of shaman various gana are stated by Acharya. In Charaksamhita it is stated in sutrasthana mahakashyadhya as well as in different chapters as indicated. In Sushruta samhita details about vran bandh vidhi as well as different modalities of treatments in treating wounds or injuries has been mentioned. Also Panchakarm can help in healing & treating injuries. Sushruta stated rules & regulations specifically for injured patients. Lepa, Pralep, Pradeha, Pratisaran, Agnikarm, Ksharkarm are best modalities to treat trauma or injuries.

Keywords: Trauma, Shodhana & Shaman.

AYURVEDA AND MODERN PERSPECTIVE IN THE MANAGEMENT OF FRACTURE

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Abstract:

In Ayurvedic classics a separate chapter is being mentioned for the management of skeletal injuries. Due to trauma skeletal injuries are most common that is a major problem for modern medicine to manage. Such orthopaedic conditions are well explained and documented in the Ayurvedic literature Sushruta Samhita's chapter named *Bhagna Chikitsa*. In absence of radiological examination Sushruta had evolved most logical and useful method of determining the types of fracture by inference and has explained their management through traction and manipulation by pressure, by reduction and immobilization. Many of the fracture treatments are being defined centuries ago and are still relevant and used in the conventional fracture management. The use of specific type of splint in the form of bark of different trees, the use of decoctions and the role of diets are some of the distinguishing features of traditional treatment. In this paper a historic perspective in comparison to modern view for the management of bone fracture has been mentioned.

Keywords: Ayurveda, *Bhagna*, Bone fracture, Immobilization, Reduction.

ANTERIOR CRUCIATE LIGAMENT INJURY AND ITS AYURVEDIC MANAGEMENT

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Abstract:

The knee joint is one of the strongest joint in human body which is formed by three bones the femur, tibia and patella. The joints stay strongest due to the presence of major ligaments. Ligaments are short band of tough fibrous connective tissue which connects bone to bone. Anterior cruciate ligament is one of the main ligaments in knee joint which connects shin bone to thigh bone. The tearing of particular ligament is one of the common sports injuries which happen due to different improper activities like sharp change in direction and blunt force hitting. ACL tear causes inflammatory response which leads to immobility of joint. Ayurveda is well known for the management of ACL injury. Depending upon the tearing of ligaments it is graded, grade 1: tearing of minimum fibers, grade 2: more disruption but no instability, grade 3: complete disruption.

In sports medicine, they have the acronym RICE for traumatic injuries R–rest (to calm Vata), I–ice (reduces Pitta), C–compression (reduces Kapha), and E–elevation (improves circulation, Tridosha Shamana). As a part of effective treatment it is essential to arrive in a confirmed diagnosis through various clinical tests and investigations. Treatment protocol includes internal medications, external therapies like Lepanas, Upanahas, Kizhi, Januvasthi, Bandana etc. In sports injury Bandhana and Januvasthi with Murivenna is considered to be most important procedures. Bandhanas are of different types and it enables the joint immobility and stability. Murivenna is commonly used for Bandhana which reduces pain and promote healing process.

Keywords: Anterior Cruciate ligament, Bandhana, Murivenna

CONCEPT & MANAGEMENT OF TRAUMA - AYURVED CONSIDERATIONS

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Abstract:

As far as concern concept of Trauma in Ayurved aspect, it is described in early beginning of basic concepts of Ayurveda in classifying the diseases as Nij (Innate), Agantu (Exogenous) & Manasa (Psychic). Out of these Agantu or exogenous is type of diseases caused by external injury such as poisoned air, fire, trauma & bhuta (spirits & Organisms). The term used by sushruta for exogenous Vyadhi is Adhibhautik type or Sanghatbalpravrutta Vyadhi i.e. it includes diseases that are caused by an external blow or are due to wrestling with an antagonist of superior strength. Some diseases like Jwara etc are having types according to type of injury e.g. abhishangaj, abhigatj jwar etc.

It is also stated as Nij & Angantu are interdependent on each other for causing signs & Symptoms as well as in treating the diseases. Yuktivyapashrya, daivvyapashrya & Satwavajya are basic 3 line of treatment out of these yukti & Daivvyapashrya can be used to treat according to cause of disease. So, basic classification & treatment of Abhigatj diseases is based on cause. So cause should be considered while treating diseases.

Keywords: Agantu, Vyadhi, Adhibhautik.

ROLE OF PANCHAKARMA IN PAKSHAGHATA: A CASE REPORT

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Abstract:

Stroke is the rapid loss of brain function due to disturbance in the blood supply to the brain. It is not a disease in itself but is heterogeneous group of disorders. Term stroke is used to describe an abrupt loss of function of some parts of CNS due to vascular lesions. Recent estimates in 2005 have shown that Cardiovascular diseases, predominantly heart disease and stroke, caused 17.5 million death. Among them, Stroke is the second leading single cause of death, with 5.8 million fatal cases per year, 40% of which are in people younger than 70 years. Paraplegia is one of the most frequent clinical presentations of stroke (CVA).

Pakshaghata can be correlated with paraplegia or hemiplegia where stroke may be the main etiological factor. It is included among 80 Vata-vyadhis and being one among mahagadas, is capable of making cheshtahani, karmendriyakriyahani. It is an important disease of modern era as a result of so many health problems such as Hypertension, Atherosclerosis, hyperglycemia etc. induced

due to modern life style. As it is a complication of other diseases, it needs Shodhana therapy, wellworsed under the umbrella of Panchakarma.

This case report belongs to a female patient aged 70 yrs. with paraplegia who was treated with nasya and basti.

Key Words: Pakshaghata, Paraplegia, Nasya, Basti

ROLE OF RASAYANA IN ABHIGHATJANYA VATAVYADHI

Dr. Aboli Patil¹

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Abstract:

Abhigatajanya Vatavyadhi is increasing day by day in today's speedy lifestyle. Abhigata first causes vitiation of Rakta and then leading to vitiation of Tridosha. These vitiated Doshas get lodged in the place of Khavaigunya produced by Abhigata. The symptoms may include Shotha, which is palpable as air filled bag (Vata Purna Driti Sparsha) and Pain on flexion and extension of the joints (Akunchana Prasarane Vedana) and Karyaakshamta.

Abhigatajanya vatavyadhi may cause sensory and motor dysfunction. It is characterized by cartilage loss and inflammation of articular and periarticular structures. An Alongwith therapeutic choice like Snehana and Swedana, Basti, Mruduvirechana, Upanaha, Bandhana and Unmardana there is a strong need of such types of treatment modalities, which could retard cartilaginous degeneration and disease progression. In Ayurveda, Rasayana are considered as nutritional entities responsible for rejuvenation of wear out cells and removal of toxins and free radicals.

Various researches have proved that Rasayana drugs act as adaptogenic, chondroprotective, analgesic, free radical scavenging and immunomodulator. Many rasayana like Guggulu, Ashwagandha, Bala, Guduchi etc. and preparations like Amalaki rasayana, Chyawanprasha, Amrita bhallataka, Bhallataka rasayana, Bala rasayana, Amrita Rasayana, Triphala Rasayana, Pippali rasayan, and various Rasaushadhis can be used.

Keywords: Abhigata, Vatavyadhi, Rasayana

CLINICAL EVALUATION OF MATRABASTI WITH KSHEERBALATAILA AND DASHMULATAILA IN ABHIGHATAJANYASANDHIGATAVATA (OSTEOARTHRITIS W.S.R TO KNEE JOINT)

Dr.Varghese Jibithankachan¹

1. Ph.D. Scholar (Kayachikitsa), Associate Prof., Department of Kayachikitsa, Dr. D.Y. Patil College of Ayurveda & Research Centre, Pimpri –Pune

Abstract:

Kshaya or degeneration is a gradually progressive deterioration and loss of function in the tissues. As vriddhavastha proceeds it leads to Kshaya of all the Dhatus further leading to Vataprakopa and causing Vatavyadhi. Abhigata is also causative factor for Vatavyadhi. It disturbs immediately the Doshic balance. The cases are treated as per the emergence condition but there remains a place for pathology as we well say as 'KhaVaigunya'.

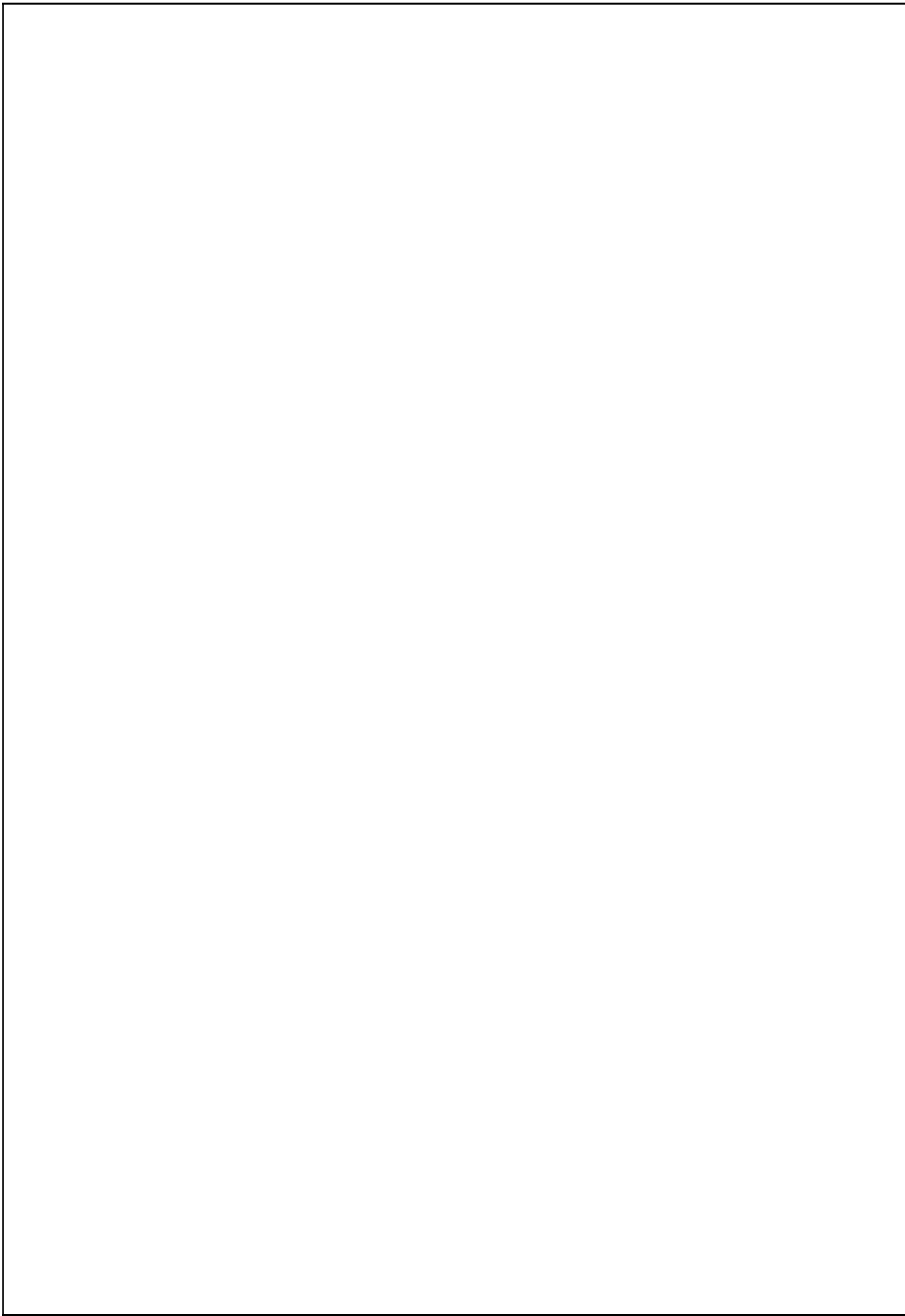
Sandhigataavata is a disorder which nearly affects all the aged people. On the basis of symptomology it resembles with that of osteoarthritis. Vatavyadhi is best treated by Bastichikitsa. Matrabasti is a type of Snehabasti which provides nutrition as well it pacifies the morbid Vatadosha.

In this study cases were taken on the basis of having previous history of Abhigata (external trauma) to the knee joint. 30 patients of Abhigatajanya Janu Sandhigataavata were divided equally in two groups Group A-Matrabasti of Ksheerbalatailaand Group B- Matrabasti with Dashmulataila. Group A with Matrabasti of Ksheerbalataila showed good results in pain, swelling and tenderness thus increasing the function of knee joint as compared to Group B which was given with Matrabasti of DashmulaTaila

Keywords: Matrabasti, Sandhigataavata, Osteoarthritis, Ksheerbalataila, Dashmulataila

ABSTRACTS

PG SCHOLARS



BEHAVIOR BASED SAFETY APPROACH THROUGH SADVRITTA & PRAJNAPARADHA IN PREVENTION OF ABHIGHATA

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Introduction: Ayurveda gives strong emphasis on the observance of the laws of Swasthavritta i.e. the code for a healthy conduct. It's the regime of abiding in one's own nature. As the prime motto of Ayurveda is Swasthasya Swasthya rakshanam, this gives the knowledge of Dinacharya, Rutucharya, Sadvritta and much more for the benefit of public health. Health of body is dependent on healthy body and balanced state of mind. Healthy behaviors impact upon individual's quality of life. Any interventions done are matched with the needs of each individual in an ethical and respected manner and making individuals aware of the severity of such negative health behavior outcomes through Sadvritta Paripalana and Achara Rasayana as well as by rectifying improper physical, vocal and mental actions which will be leading in to Prajnaparadha i.e. crime against wisdom.

Aim & Objective: "To study Sadvritta (code of conduct) & Prajnaparadha and its role in prevention of Abhighata

Materials & Methods: Ayurvedic Samhitas, literatures, journal articles and internet websites

Discussion: We as humans often go against our intuition and common sense, forgetfulness, inattention, poor motivation, carelessness, negligence and recklessness such human errors that lead to accidents that can later result in more serious effects.

Conclusion: Obeying the rules & regulations mentioned in Sadvritta play major role in preventing Abhighata. This presentation will give us a way to think about prevention of Abhighata which are very prevalent these days by Sadvritta Paripalana & having control on Indriyas. Implementations of Ayurvedic Principles mentioned in this context give a new aspect to behave and correct ourselves to have a society healthy by all means.

Keywords: Sadvritta, Achara Rasayana, Prajnaparadha, Abhighata

AN ANALGESIC EFFECT OF YASHTIMADHU GHrita IN THE MANAGEMENT OF TRAUMATIC OPEN WOUND-A CASE STUDY

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Abstract:

In today's era traumatic injuries are more common and these injuries manifest as pain and swelling in involved tissues. Management of these injuries in modern science involves mainly prescription of non-steroidal anti-inflammatory drugs/ opioids / steroids etc. but it has many adverse effects this fact necessitate searching for a better remedy from the natural resources like herbs and minerals and other measures of Ayurveda. Hence present study was planned for the management of Abhigatajashoola/Traumatic pain by Ayurvedic management i.e. Yastimadhu Ghrita & results of the study were encouraging and it is concluded that Ayurvedic management is effective and having no adverse effects on the patients under clinical trial.

Here, a single case study of a 23 years old male is being presented, who came with complaints of traumatic wound over left knee joint with Pain & Burning sensation. Considering the signs and symptoms of Sadhyovrana; the treatment of Abhigatajashoola was planned according to Acharya Sushruta i.e. Yastimadhu Ghrita application and marked reduction in pain and burning sensation were found.

Keywords: Abhigataj Shoola, Yastimadhu Ghrita

UNKINKING THE ROLE OF MANOABHIGHATA JAHETU IN FIBROMYALGIA AND ITS DIAGNOSTIC LIMITATIONS-A CASE REPORT

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Abstract:

Introduction: Abhighata contextually implies a spectrum of conditions ranging from physical to those at the level of psyche. Manodoshas are mainly due to asatmya indriyarthasamyoga, prajnaparadha and parinama. Manoabhighata (stressful life events)

is due to Vishada, Udwega etc. One such disease which may cause due to this sort of Nidanas is fibromyalgia. Fibromyalgia is a commonly encountered disorder characterised by widespread musculoskeletal pain, stiffness, paraesthesia, nonrestorative sleep, easy fatigability, hypochondriasis along with multiple tender points which are widely and symmetrically distributed. Many causes like disturbed sleep, low levels of serotonin, depression, anxiety etc have been told for its cause. But lab investigations show no abnormalities or very little changes in electro encephalographic studies alone. So in this paper the impact of mano abhigata hetu in fibromyalgia and its diagnostic limitations will be highlighted.

Aim and Objective: To analyse the mano abhigata hetu in fibromyalgia.

Materials and Methods: A case with symptoms of fibromyalgia has been included for the study.

Keywords: Mano Abhigata, Fibromyalgia

CONCEPT AND MANAGEMENT OF TRAUMA IN AYURVEDA

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Abstract:

Sushruta, the father of surgery has explained in detail about trauma and wound healing. Trauma means "injury" which is caused due to many reasons like road accident, fires, burns, falls, etc. These Nidanas disrupt the local structures i.e. Twak, Mamasa, Sira, Snayu, Asthi, Marma and also considerable amount of Dhatus are also destroyed. Due to which Doshas are deranged and various clinical manifestations are found like pain and swelling due to Vata imbalance, burning due to Pitta imbalance and accumulation and vitiation of fluids due to Kapha imbalance. Different treatment methods for wound management are also enumerated in our classics for the trauma management like use of Nirgundi and Rasna for controlling muscular spasm and pain reduction, use of Blala and Shatavari for nerve relaxation, use of Lodhra Churna and Jatyadi Taila for wound healing as well as Panchakarma therapies, Yogik Kriyas, and surgical processes.

This scientific presentation will include all relevant details regarding concept and management of trauma enumerated in Ayurved classics.

Keywords: Concept of Trauma, Wound Healing and Wound Management

ROLE OF AYURVEDA IN EMERGENCY TREATMENT

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Abstract:

It is believed that emergency treatment is not enumerated or less practised in Ayurveda. This belief in society and Ayurvedic physicians has arrested development of Ayurveda, and limiting its role as adjuvant therapy. Ayurveda to become main line of medicine needs to have emergency management. The emergency management was described in Ayurveda, which needs only enlightenment. It is an attempt has been made to understand Ayurvedic basics of emergency management. It includes understanding emergency condition according to Ayurveda and management accordingly. It is important to note that mild to moderate emergency can very well be managed according to Ayurveda.

Key Words: Ayurveda, Treatment, Emergency.

MANAGEMENT OF JIVADANAM W.S.R TO VAMANA

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Abstract:

Jivadanam is one among the Vyapad classification of Vamana and Virechana Karma. Vyapad indicates meaning like destruction, ruin, death. Due to Akala, Alpamatra, and Atimatra etc. this condition can occur. Jivadanam means appearance of blood in vomitus, if we consider Vamana; it refers to an injury caused by Vamana, due to administration of Ati-Tikshna Aushadha given in

Mrdukostha and Alpadosha person. There will be injury to the upper GI tract which may lead to the active bleeding from the mouth by which the patient may die. In classics, Pittaharii Kriya is advised to manage Jivadanam. Here in this presentation attempt has been made to understand the importance of the Vamnottar Jivadan and its Ayurvedic Management.

Key Words: Jivadanam, Atitikshna Aushadha, Pitahari Kriya Chikitsa

TRAUMATOLOGICAL IMPORTANCE OF MARMA AROUND THE NETRA

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Introduction: Ayurveda shows us the precise pathway of life. It also preaches us to prevent pathology in our body by taking proper care of the constituents of the body. The body is made up of 16 Vikara and 8 Prakriti. Pancha Jnanendriyas are included in 16 Vikara and they are Chaksu, Shrota, Ghrana, Rasana, and Sparsha. All these special senses are a boon to mankind. The sense organs not only receive these senses but also help in improving the intellect of the individual. Netra is one of the Jnanendriya and Acharya Sushruta describes its anatomy in detail. We can retain only 10-20% of spoken or written information but almost 65% of visual information. Vision is extremely important to human survival.

Aims & Objective: To do the literary review of Marma around the eye with its regional anatomy as well as to relate the injury consequences of these Marmas with sports injury of eye.

Discussion: In the context of Marmas, we can get references of few Marmas which are located in and around the eye and which if injured may cause disturbance in the vision. In very high risk sports that include direct face to face contact like boxing, wrestling and martial arts, several types of eye injuries are common. They may be blunt injuries or penetrating injuries.

Conclusion: The involvement of Marma in such injuries along with its consequences and the anatomical structures which it encompasses will be discussed in the present paper.

Key Words: Eye injury, Marma, Trauma

EMERGENCY AIRWAY MANAGEMENT IN THE TRAUMA PATIENTS

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Introduction: Trauma has assumed epidemic proportion. 10% of global road accident deaths occur in India. Hypoxia and airway mismanagement are known to contribute up to 34% of pre-hospital deaths in these patients. A high degree of suspicion for actual or impending airway obstruction should be assumed in all trauma patients. Basic airway management are the set of medical procedures performed in order to prevent airway obstruction and thus ensuring an open pathway between a patient's lungs and outside world. Several studies have shown that 7 to 28% of patients with trauma require definitive airway management in the form of either endotracheal intubation (ETI) or a surgical airway. Although emergency definitive airway management is known to be associated with complications, avoiding it results in unacceptably high morbidity and mortality.

Aim & Objective: To understand the recent theoretical and practical information that pertains to airway management in victims of trauma.

Materials & Methods: All the modern text books, internet and related journals.

Discussion: why do trauma patients die?

Conclusion: The best strategy to salvage patients with trauma is to provide them with immediate trauma care, including airway management in the pre-hospital setting and advance trauma care within the first hour of trauma or the so-called Golden Hour.

Key Words: Airway management, Trauma, Hypoxia

ROLE OF AYURVEDA IN MANAGEMENT OF SPORTS INJURY

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Abstract:

Introduction: Sports injuries are injuries that occur in athletic activities or exercising. Poor training practice, accidents etc. cause injuries like Sprains, Strains, Dislocations, Knee injuries, ACL tear etc.

Aims and Objectives: To give supportive care in sports injury and helps in early recovery.

Material and Methods: Materials like Chakra Taila, Nyagrodhadi Gana Kashaya, Panchamooli Pakva Ksheera are used for Parisheka. Sneha Dravya, Shothahara Dravya etc are used for treatment. In the present paper detail management of inflammation, Dislocations, Pain through Ayurveda are highlighted which will be based on the information collected from various Ayurveda, modern texts and published papers

Discussion: Sports injury can be one type of Abhighatajanya Vyadhi So Vata and Rakta are vitiated in it. Treatment should be given accordingly. Acharya Shushruta describes treatment of Sandhi Vishlesha. In inflammation external application of Lepa Gutti should be advised. In ligament tear external oil application and internal some medicines are given. Sheeta Pradeha and Parisheka should be used in Sprain. Diet restriction during injury and recovery phase is also described.

Conclusion: It can be concluded that Pradeha, Parisheka, Lepa, oil application should be given according to severity of injury and Prakruti of the patient. Some internal medicines like Abha Gugglu, Laksha Gugglu, and Punarnavashtaka Kashaya etc. are used in sports injury. Principles of treatment and its detail will be described in full paper.

Keywords: Sports injury, Inflammation, Pradeha, Parisheka, Lepa

MANAGEMENT OF MARMAABHIGHATA IN SHALAKYA TANTRA

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Abstract:

Marma are the most vital part of our body. They are highly vulnerable to injuries. These points are graded in terms of their prognostic importance after trauma into five distinguished classes. Different body parts have different response to trauma. Total Marma area was calculated as per the Angulaparman mentioned in Ayurveda text.

Acharya Charaka has mentioned three important organs which can cause death or major impairment in the function of the person by injury to them which are termed as Trimarma. Among the Trimarma, Shiras is considered as Uttamanga. Injuries to this Shiromarma due to external or internal factors are considered as Shiromarma Abhighata. Marma Chikitsa is also used for the management of various disorders related musculoskeletal and nervous system like cervical neck pain, migraine, and paralysis, stress etc. relief from acute or chronic pain both locally or distally.

This presentation elaborates different types of Marmas in Shiras, Abhighata and its management.

Keywords: Marma, Marmabhighata

BASTI IN ARTH MARMA PARIPALANA

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Abstract:

Arth means Heart which is amongst the Trimarmas and Sadhyopranahar Marma, and all Trimarmas are under high risk of aggravated Vata Dosha, Prana is situated in this so that Ayurveda pays special attention to save heart from any direct or indirect trauma. 50% heart diseases are asymptomatic till it does not reach to vital loss, so that prevention is important to save vital organs.

The vital centre like heart is required to be protected particularly from the morbid effects of Vata Dosha, because this aggravated Vata is responsible for the aggravation of Pitta and Kapha and becomes responsible for pathogenesis of Hridroga. Prana of the

body also depends upon this Vayu therefore, there is none other than Basti therapy can safeguard the vital organ like Heart; Basti is known to be the best therapy for balancing Vata dosha.

Lekhan Basti, Anuvasan Basti Niruh Basti and Hrud Basti will help in reducing aggravated Dosha but also to prevent Dosha Abhigata to Hridaya Marma that means Arth Marma Paripalan. This paper tries to explore the preventive role of Basti in Heart diseases.

Keywords: Basti, Artha marma, Hridaya

MARMABHIGHATA – CARE OF DISABILITIES

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Abstract:

Ayurveda is India's traditional healing system. It's a profound system of mind-body medicine and natural living. The science of Marma (vital point), i.e., Marma Vidyaniyam is an extraordinary and dynamic part mentioned in Ayurvedic texts. The knowledge of the position of Marma and Marmabhighata (injuries to vital points) symptoms is essential to cope with physical disabilities of an individual. Marmas can alter both the organic functions and structural conditions of the body. Little injuries to these Marma points or anatomical areas can be fatal comparing with major injuries at anywhere else in the body, so detailed knowledge of these Marma points is crucial for understanding to provide the life support for better living. In the ancient era, even after the best treatment available at that time, some sort of disability remained at end of the therapy. Nowadays, though super specialty modalities are available, is modern science capable of taking care of these disabilities in well being of life.

Keywords: Marmabhighata, Physical Disabilities.

MANAGEMENT OF RUJAKAR MARMAGHAT IN AYURVEDA WITH SPECIAL REFERENCE TO SPORTS INJURY

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Abstract:

Site of Rujakar Marmas are Gulf (ankle), Manibandha (wrist), Kurchshira (middle of palm and foot). These are most common sites of sport injury. Symptoms of Rujakar Marmaghat is similar to sport injury like sprain strain and hairline fracture. Ayurveda can help in this Marmaghat by various treatment modalities like Bandhana, Agnikarma, Raktmokshana, Lepan, Pidan, Seka and various medicines like Ajmoda, Parsikyavani, etc are mentioned for curing these Marmaghat. Therefore, in the management of sport injuries these treatment modalities can be implemented and can be utilized because of their safety and cost effectiveness.

Key Words: sports injury, sprain-strain, sports medicine, rujakar marma, para surgical procedure.

AYURVEDIC MANAGEMENT OF SHIROMARMA ABHIGHATA

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Abstract:

Acharya Charaka has emphasized 3 important organs which can cause death or major impairment in the functions of the person by injury to them which are termed as Trimarma. They are Shiras, Hridaya and Basti. Among the Trimarma Shiras is considered as Uttamanga and one among Dasa-pranayatana. Injury to this Shiro Marma due to external or internal factor is considered as Shiro-Marma Abhighata. Shiromarma Abhighata can be considered as one among the traumatic Brain Injury. Approximately 1.5-1.7 million people are suffering with neurological disabilities every year due to Traumatic brain injury in INDIA. Shiro-Marma-Abhighata is also mentioned as one of the cause for manifestation of various Vatavyadhi like Pakshavadhya, Sarvangavata, Ekangavata etc. In

acute stage, the patient can be managed by allopathic medicine but there are no much treatment modalities to treat the residual spasticity of a chronic patient of Shiro Marma Abhighata.

Key Words: Shiro-Marma Abhighata, Traumatic Brain Injury, Trimarma

POST TRAUMATIC STRESS DISORDER IN REPRODUCTIVE AGE

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Abstract:

Post Traumatic Stress Disorder is a mental disorder that develops after experiencing or witnessing a traumatic event which can involve threat of death or injury to the person or others and later caused feeling of helplessness, horror, or extreme fear. The prevalence of Post Traumatic Stress Disorder in India is more than 10 million cases per year. The preponderance of Post Traumatic Stress Disorder in women may be attributable to factors other than direct trauma, such as sensitization of stress hormone systems, in response to early adverse experiences, inherent endocrine factors, subjective interpretation of the event and peritraumatic dissociation. Women with Post Traumatic Stress Disorder arguably experience a greater symptom burden, longer course of illness and have worse quality of life outcomes than men. Fear, anxiety, anger, depression, guilt – all are common reaction to trauma leading to stress. Stress can't be completely eliminated, but can control how much it affects the body which is explained in Ayurveda. The intention is to highlight the disease in females from reproductive age group and its ayurvedic management i.e Manasik Chikitsa.

Key Words: Post Traumatic Stress Disorder, trauma, Manasik chikitsa.

A REVIEW STUDY OF BIRTH TRAUMA (CRANIAL INJURY)

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Abstract:

Birth trauma (BT) refers to damage of the tissues and organs of a newly delivered child, often as a result of physical pressure or trauma during childbirth. The term also encompasses the long term consequences, often of a cognitive nature, of damage to the brain or cranium. Birth trauma is a general term used to describe any cuts, fractures, or other injuries sustained by a newborn baby during labour or delivery. Birth trauma is more common in developing nations in Africa, Asia, and Latin America. Birth trauma occurs more frequently among larger-than-average babies, particularly in cases where the baby's size may be too large in relation to the mother's pelvic area. Deliveries of larger, heavier babies often require doctors to use their hands, forceps, or vacuums to ease their passage through the birth canal. In these situations, neonatal injuries can occur if a doctor uses too much physical force while handling the baby or is not careful with birthing instruments. Here we describe the types of birth injury and most commonly found cranial injury, its clinical features and management.

Key Words: Caput Succedaneum, Cephalohaematoma, Subgaleal Hematoma.

HEAT TRAUMA - TAPA ABHIGHATA

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Abstract:

There are many types of heat injury ranging from mild heat cramps to life threatening heat stroke. Heat related illness like sunstroke has claimed more than 4620 lives in last 4 years in India. Heat trauma is preventable, begins with understanding the cause. Knowing the signs of heat injury and treating it immediately will reduce the number of severe cases. It includes hyperthermia, heat cramps, miliaria rubra, heat exhaustion and heat stroke etc. and immediate aids have been advised in these conditions to reduce the further consequences. In Ayurveda, in Bhaishajya Ratnavali, under Amshughata Chikitsa Prakarnam, sunstroke and its features along with its management have been described along with medications, panakam etc. Acharyas have also described in different Samhitas about Ritucharya and the proper lifestyle to be followed in Adana Kala. This presentation elaborates the effects of different conditions of heat trauma, its signs and symptoms in our body.

Key Words: Heat Trauma, Anshughata

TO STUDY THE EFFICACY OF PANCHAVALKALA SIDDHA GHRITA APPLICATION COMPARED WITH BETADINE OINTMENT IN YONIGATA SADHY VRANA DURING PRAKRUT PRASAVA (EPISIOTOMY)

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Abstract:

Episiotomy is defined as a deliberate incision taken on perineum to avoid perineal tear. Now-a-days the term episiotomy comes into consideration because the perineal tears can give many complications, like infection, sepsis. But healing becomes problematic even after suturing (As the vaginal PH becomes alkaline in post partum period acc. to modern science) there may be soiling by faecal matter & it gives complications.

As episiotomy wound can be considered as Sadya Vrana, Ropan Karma should be done on that Sadya Vrana. In present study Panchavalkala Siddha Ghruta was used as a trial drug for this study. The clinical study was conducted on 8 patients who were selected randomly and divided into 2 groups. In trial group, patients were treated with "Panchavalkala Siddha Goghrita Lepa" which was applied on wound. In control group, patients were treated with application of "Betadine" ointment. The clinical assessment was done on the basis of grading criteria with specific symptomatology of patients like Pain, Swelling, Discharge, Edges, and Smell of Sadya Vrana. According to observations and results conclusion was done that applying "Panchavalkala Siddha Goghrita Lepa" in Yonigata Sadya Vrana during Prakrut Prasava (i.e. episiotomy) is quite effective than that of application of "Betadine" ointment reducing the Pain, Swelling, Discharge, Edges, and Smell of Sadya Vrana.

Key Words: Episiotomy, Panchavalkala Siddha Goghrita Lepa, Sadya Vrana, Betadine

AYURVEDIC MANAGEMENT OF YONIKANDA W.S.R. TO BARTHOLIN'S ABSCESS

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Abstract:

Genitalia is a very sensitive and important part of the female body. The Yonikanda is one of the diseases of vulva or lower vaginal canal caused due to an injury (Aaghata) or ulcerations by Nakha, Danta etc. The Vatadi Doshas aggravated due to their respective causes, produces a Kanda which is having Puya and Rakta. As this disease is characterized with Puya (pus) or Rakta (blood), hence it can be equated with Bartholin's abscess. Bartholin's abscess is the build up of pus that forms a lump (swelling) in one of the Bartholin gland. Bartholin's abscess is common problem in women of reproductive age. Women with childbearing age are the most affected population, with nearly two percent of women experiencing a Bartholin's abscess in their life time. In Ayurveda literature the management of Yonikanda are given in a systemic way, which is used in the form of locally application and orally medication.

Key Words: Yonikanda, Bartholin's abscess, Aaghata, Trauma.

VIRECHAN VYAPADA AND ITS MANAGEMENT

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Abstract:

Vibramsha (rectal prolaps or mental prolaps) is a serious condition where patient feels uneasiness and disturbed. In this conditions degree of discomfort and pain is very high.

Virechana is a very famous Panchkarma therapy for elimination of Vikruta Pitta Dosha from Amashaya. If rules and regulations are not followed properly in Virechana therapy then it may lead to many complications like Aadhma, Parikartika, Hrud Shoola, Vibramsha etc. In Ayurveda there is better option for treating the patients of these complications specially Vibramsha conditions. Vibramsha can be correlated with rectal prolaps or mental prolaps (Sangnanasha). In rectal prolaps usage of Saurashtri, Lodhra Choorna along with Jatyadi Taila is very beneficial and in Sangnanasha, recitation of Samaveda singing, the pleasant songs etc. type of treatment and Viharas advised.

Key Words: Virechana, Rectal Prolaps, Vibramsha.

NAYANAABHIGHAATA UPACHAARA

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Abstract:

Being one of the important organs in the living beings, it is very important to manage the injury of eyes with or without any complications. In Ayurveda, the term Abhyaahatanayana covers all the types of ocular injuries like mechanical, chemical, thermal, electrical & radiational (e.g. Makshikamashakasparsa, Teekshnaanajana, Dhooma, Raja Sevana, Atipraklishtanetra). Based on the efficiency of the injury & damage to the eyeball, the treatment has been advised. With such limitations, Ayurveda explains the treatment modalities for Netraabhighaata with the treatments viz. Akshiprakshalana, Shalyanirharana, Akshisthapana, Ashchyotana, Tarpana, and Bandhana etc. By this way any condition due to Netraabhighaata can be managed by keeping the prognosis in view with due care.

Key Words: Abhighataupachaara, Abhyaahatanayana, Ocular injuries

SPORTS INJURIES AND THEIR MANAGEMENT BY AYURVEDA

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Abstract:

The Ayurveda being one of the leading systems of Alternative Medicines cannot be away from new inventions to enter into new fields. The sports Medicine is one of such fields where it has to show its power of cure and power of preventing diseases. Sports-related soft tissue injuries such as sprains, strains and contusions are a common painful condition. Current treatment includes oral non steroidal anti-inflammatory drugs (NSAIDs), which have a high incidence of intolerable gastrointestinal side effects. Ancient Indian healing system, Ayurveda addresses the need of sports medicine up to certain extent. In practice, there are different treatment modalities for injuries, uses of drugs and dietetics as well as practices of Rehabilitation. The Ayurveda can be effectively incorporated in all the fields of sports beginning from training to the treatment. The curriculum of the sports training can be effectively modified by including the Ayurvedic concepts of healthy living by following the Regime. The exercises and diet can be designed based on Ayurveda and Yoga for strong physique and mind for better performances. It can also incorporate Rasayana Therapy for building the required stamina according to the personalized needs and requirements. The classical and various proprietary medicines of Ayurveda and the applications of various less used methods like Agnikarma can be effectively included for better results. The incorporation of the successful methods and medicines of alternative medicines can minimize the usage of modern medicines and hence avoid the risk of side effects for a better career and performances.

Key Word: Alternative Medicines, Ayurveda, Sports Medicines

DEFINITIVE CARE FOR TRAUMA IN AYURVEDA

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Abstract:

Apart from severity of injury probably the single most important factor determining the outcome of a trauma patient is the time interval from the moment the injuries are received to the provision of definitive care. Definitive care for the trauma patient implies achieving a clear airway and effective ventilation, haemorrhage control and restoration of an adequate blood volume. A recent retrospective study of pre-hospital trauma deaths reported that, airway obstruction had been present in two-third of those patients. Basic and advanced life supports for the trauma patient are fundamentally the same as that for the patient with a primary cardiac arrest, with focus on support of airway, breathing and circulation.

There is a trend that Ayurvedic science does not have any kind of emergency management. But in ancient texts the management was quoted along with the different modalities irrespective of its general care. The empirical quotes denote the Chikitsa of airway management which resembles to CPR. So this paper tries to enlighten the Ayurvedic basics of emergency management in trauma.

Keywords: Ayurveda, Emergency management, airway management, trauma.

ASATMYA INDRIYA ARTH SANYOG WITH REFERENCE TO LOUD HEARING AND ITS HAZARDS TO HUMAN HEALTH

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Abstract:

Noise induced hearing loss is a permanent hearing impairment resulting from prolonged exposure to high levels of noise. One among 10 Americans suffers this hearing loss that affects his or her ability to understand normal speech. Excessive noise exposure is most common cause of hearing loss. Recent studies show an alarming increase in hearing loss in youngsters. Evidence suggests that loud rock music along with increased use of portable radios with earphones may be responsible for this phenomenon. The sound of 30db-140db frequency is not harmful to hearing sense but beyond that louder frequency may be harmful. In Charaka Samhita in Indriyopakramaniya Adhyaya, Hina, Ati and Mithya Yoga of All the sense organs are described in detail and based on that an attempt has been made to understand the loud hearing and its hazard on human life.

Key Words: Noise Induced Hearing impairment, Asatmya indriyaarth Sanyog

ABHIGHATOPACHARA IN SHALAKYATANTRA

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Abstract:

Acharya Sushruta considers Shalya as the Shreshta Anga among all the Ashtanga Ayurveda on the basis of Chaturvidha Pramana. He mentioned "Abhigata vrana sanrohana" of Yagnashira as the foremost cause of the derivation of Sharira Vyadhi. In the four types of Vyadhi initially he has given Agantuja Vyadhi, which is Abhigatanimittaja. Acharya Sushruta described many diseases of Shalakya tantra in detail where he mentioned Agantuja Vyadhi of Netra, and Dantamula like Abhigata vrana Drashti, Kshataja Oshta, Dantavaidarbha, Shalyanimittaja Nadi (Dantanadi), And also treatment of this diseases. In Uttaratantra, while describing Nidana of some diseases of Shalakya; he stated Abhigata; for example Karnasrava, Karnavidradhi. He declared in Chikitsasthana that in Abhigata, Sadhyovrana Chikitsa should be done. A separate adhyaya named Nayanabhigata Pratishedhadhyaya; with detailed description and management of Traumatic Eye Diseases has been given. While describing six types of Sadhyovrana in Chikitsa sthana he has given treatment of Chinna vrana in karna, Bhinna vrana in netra, shalya in shiraha Pradesh, and sarvanetra abhigata. So, The Symptoms and Samprapti in Abhigata Diseases of Shalakya tantra and its management described by Acharya Sushruta should also be analysed and evaluated. Although it is not plasticized systematically in common practice, it should use in manner which pursued by Acharya Sushruta.

Key Words: Abhigata, Shalakya tantra, Samprapti in Abhigata diseases.

AYURVEDIC MANAGEMENT OF ABHIGATAJ BADDHIRYA

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Abstract:

Hearing loss can occur through various reasons like hereditary, aging process, fluid in the middle ear as a result of colds, ruptured eardrum due to trauma. Here we discuss about traumatic hearing loss. Worldwide, 16% of the disabling hearing loss in adult is due to occupational noise. Noise induced hearing loss (NIHL) is the second most common form of acquired hearing loss after age related loss. In Ayurveda hearing loss is called Karnabaddhira. It occurs when disturbance in Vata Dosha (Prana Vata), sound is not transmitted from ear to the brain. The hearing ability of one goes on dropping gradually and may be lost completely. Ayurveda is an ancient system of medicine that makes use of herbs. The herbs for hearing loss help take aid hearing in an herbal natural way. The Ayurvedic herbs for improving hearing power help strengthen the ear muscles and also increase the amplifying capacity of the ear muscles and proper functioning of the nerves that control the ear. The drugs which help in pacifying the Vata Dosha are used in the management.

Key Words: Ayurveda, Abhigatopachara, Karnabaddhira

ROLE OF MARMA CHIKITSA IN THE MANAGEMENT OF CARPEL TUNNEL SYNDROME

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Abstract:

Carpel tunnel syndrome (CTS) is a cumulative trauma disorder because of repetitive forces. The entity represents compression neuropathy of median nerve in the carpal tunnel leading to a subsequent functional impairment and local ischemia of nerve. Sensory fibres are affected first followed by motor fibres. High carpal tunnel pressure causes obstruction to venous outflow, oedema formation and ultimately ischemia in nerve.

The worldwide incidence of CTS among computer users (both vocational and recreational) is estimated to be about 15-25%. The incidence rate is more commonly seen in females and age around 45-60 years. Physical examination rules out the diagnosis. Electromyography (EMG) and Nerve Conduction Studies (NCS) are first line investigations and also using MRI. Allopathic treatment is directed to relieve symptoms and prevent further damage to the nerve. Management options range from nonsurgical measures to various described surgical tunnel release including endoscopic methods.

Ayurvedic treatment concentrates on Manibandhamarma. It aims for Marmaprasadana and Nadibalyakara through Marma stimulation and Bandhana.

Key Words: Carpel Tunnel Syndrome, Manibandhamarma, Marmachikitsa.

MANO ABHIGHATA-CHANGING TRENDS

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Abstract:

Vyadhi in the Ayurveda has been defined by various authors. All of them have used it as state in which both the mind and the body are afflicted. Charaka says Manas and Sarira along with Indriyas are the Adhithana (seat) of Vedana, and Manas have been regarded as the ashraya of Rogas along with body. Psychological trauma is a type of damage to the mind that occurs as a result of a severely distressing event. Trauma is often the result of an overwhelming amount of stress that exceeds one's ability to cope. Psychological distress has become a modern day companion in everybody's life intentionally or unintentionally, which significantly affects the potentiality of life of an individual. Trauma happened years ago or yesterday, one can make healing changes and move on with the life with these self-help strategies and support.

Key Words: Mano Abhighata, Psychological Trauma.

REHABILITATION IN TRAUMA

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Abstract:

Introduction: Trauma is an injury to living tissue caused by an extrinsic agent. Trauma most often refers to Physical trauma & Psychological trauma. Physical injury caused by an external source & Psychological trauma, a type of damage to the psyche that occurs as a result of severely distressing events. A traumatic event is an incident that causes physical, emotional, spiritual, or psychological harm. The person experiencing the distressing event may feel threatened, anxious, or frightened as a result. In some cases, they may not know how to respond, or may be in denial about the effect such an event has happened. The person will need support and time to recover from the traumatic event and regain emotional and mental stability. Main aim of trauma treatment is to not only to solve the existing symptoms but also to help in maintaining the normal functions of individual even in his future. Management includes Physical therapy, Occupational therapy, Speech therapy, Psychosocial counselling etc. In our Ayurveda any kind of Aagantuja Nidan leads to Vata Roga. Vata dominance may lead to different kind of diseases like Pakshaghata, Shoola, Grudhrasi, Ardita etc. All these conditions may be prevented by Vata Shaman Chikitsa.

Hence Physical therapy, Occupational therapy, Speech therapy, psychosocial counselling and Vata Shaman Chikitsa will be highlighted in full paper.

Aims & Objectives: To help in maintaining the normal functions of individual even in his future by rehabilitation in trauma.

Materials & Methods: Charak Samhita, Sushrut Samhita, A Concise textbook of Surgery, and Google.com will be referred.

Keywords: Trauma, Rehabilitation, Vata Shaaman Chikitsa

BONE FRACTURES AND ITS PAIN MANAGEMENT THROUGH AYURVED

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Abstract:

Introduction: Incidence of fractures either due to household works or road accidents are always at increase in recent circumstances. Due to increased life expectancy and rise in elderly population, epidemiology of hip fractures is also at higher extent. With this epidemiology of osteoporosis and osteoporotic fractures, vertebral fractures in women, fractures of forearm, postmenopausal spinal and long bone fractures, etc are also increasing in current era. Any type of fracture whether traumatic or pathological always presents pain as a major complain in all the patients. Hence, pain management in care of the patients of fracture is essential and inevitable task.

Aims and Objectives: To study the Ayurved literature for Bhagna Chikitsa and compile the useful, safe, effective and cost economical formulations these can be utilized in the pain management of the patients of fractures.

Material and Methods: The Ayurved literature starting from the ancient era to recent era will be studied for this presentation to assemble the entire information in context to pain relief in the management of fractures.

Discussion and Conclusion: Discussion will be made on the basis of studied literature of pain relief in fractures in regard to various formulations enumerated in various treatises and conclusion will be drawn how these formulations can be utilized in present age.

Keywords: Fractures, Bhagna Chikitsa, Pain Management.

LIMITATION OF RADIATION IN TRAUMA IMAGING

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Abstract:

The use of radiological imaging techniques has transformed healthcare over the years. Radiation is the emission or transmission of energy in the form of waves or particles through space or through a material medium. Radiation and radioactive substances are used for diagnosis, treatment and research. Radiation passes through muscles and other soft tissue but is stopped by dense materials. A Physician also find certain diseases by injecting a radioactive substance and monitoring the radiation given off as the substance moves through the body. Trauma patients are exposed to a large amount of ionizing radiation. Ionizing radiation is harmful and potentially lethal to living beings but can have health benefits in radiation therapy for the treatment of cancer and thyrotoxicosis. The radiation therapy is highly effective in its selective dose. The radiation out of dose may cause much more adverse health effects. Exposure to ionizing radiation causes damage to living tissue and can result in mutation, radiation sickness, cancer and death.

Keywords: Radiation, Diagnosis, Trauma, Adverse health effects

ROLE OF AGNI KARMA IN SNAYU VIKARA WITH SPECIAL REFERENCE TO TENNIS ELBOW - A CONCEPTUAL STUDY

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Abstract:

Tennis elbow is a painful condition and causes restricted movement of forearm which requires treatment for long period. Till date only symptomatic treatments are available like use of anti-inflammatory, analgesic drugs, steroids injection, physiotherapy exercise

etc. But none of these provide satisfactory result. Long term use of anti-inflammatory, analgesic drugs and steroids injection is also not free from the adverse effects. In Sushruta Samhita, Agni Karma has been mentioned for disorders of Snayu (ligaments and tendons), Asthi, and Sandhi. In Ayurveda, Snayu Vikara can be correlated with the condition of tennis elbow. Agnikarma therapy provided Considerable relief in pain and movement of elbow joint.

Keywords: Snayu Vikara, Agni Karma, Tennis Elbow

AYURVEDIC DIAGNOSTIC TECHNIQUES OF TRAUMA

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Abstract:

Ayurveda is well established science with ageless concrete. There is very vivid description of Abhighataj Vrana, its diagnosis, classification and management including various local and systemic measures. Diagnosis is the important aspect in Ayurveda, since it treats the root cause of the disease and not just the symptoms. The management of disease needs proper diagnosis and selection of appropriate treatment regimen. There are various investigational methods (Pariksha) available for the identification of pathological condition such as: Trividha Pariksha (Darsana, Sparsana, and Prashna), Chaturvidha pariksha (Pratyaksha, Anumana, Aaptopdesha, and Yukti), Shadavidha Pariksha (Pancha Gyanendriya & Prashna), Astavidha Pariksha (Nadi, Mala, Mutra, Jihva, Shabda, Sparsa, Netra, and Aakriti) and Dasavidha pariksha (Prakriti, Vikriti, Sara, Samhanana, Pramana, Sattva, Satmya, Aahar shakti, Vyayama shakti and Vaya) are mainly and widely used. In diagnosis, all the physical, psychic, physiological and behavioural aspects are taken into consideration along with the climatic changes and environment.

Keywords: Ayurved, Pariksha

SPORTS INJURY AND ITS MANAGEMENT-CASE STUDY

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Abstract:

Introduction: This presentation deals with the case study of tennis elbow/lateral epicondylitis, its Ayurvedic correlation and treatment according to classical text along with the probable mode of action.

Problem Statement: How can we implement Ayurvedic parasurgical procedures in the management of Sports injuries? This case involves a 23 year old student, was completely healthy 2 months ago. He gradually developed severe pricking pain in the lateral epicondyle of his left hand radiating to the fore arm while undergoing training for a power lifting competition. He is unable to identify a specific traumatic episode leading to the pain. He states the pain radiates down the posterior aspect of his forearm with stiffness and without associated numbness or tingling. At the onset, he ignored the condition and self managed with cold packs and soothing agents which gave him a temporary symptomatic relief and continued his practice. In due course of time, lifting heavy weights and vigorous practices worsened the pain and gradually swelling and stiffness developed at the elbow. Inactivity stiffness was prominent in the morning which subsided spontaneously. He has not noticed a decrease in his grip strength. Pain worsens on indulging in activities which involves the movement of elbow joint and wrist. For these complaints, he consulted here for complete cure. We planned a treatment for 8 days including upanaha, tailapichu and agnikarma. We expect a complete pain relief after the treatment.

Procedures and Interventions: Upanaha with Kottamchukkadi Churna, Kottamchukkadi Taila and Dhanyamla, Pichu with Kottamchukkadi Taila, Agnikarma

Outcome: We had an extensive discussion with the patient regarding his diagnosis and appropriate treatment options for lateral epicondylitis. After further discussion, we preceded with the treatment as explained in the classics. Patient got 100% pain relief after treatment. Superficial multiple wounds produced by Agnikarma healed within 5-7 days. The scars of wound started to disappear considerably and there was no untoward effect noted. Patient was advised not to lift any heavy objects and perform any twisting movement for further 3 months.

Conclusion: Patient presented with severe tenderness, swelling along with stiffness of left lateral epicondyle. On examination, the condition was diagnosed as Tennis elbow or Lateral epicondylitis. Diagnosis was done based on physical examination, Cozen's test and Mill's manoeuvre. It was correlated as Snayugatavata in Ayurveda and treatment was planned accordingly. According to Ashtangahridaya Vatavyadhi Chikitsa, Snehana, Upanaha and Agnikarmawas done and he attained complete relief. Pain and swelling subsided and range of movements improved considerably.

Key Words: Epicondylitis, Snayugata Vata, Ayurved Para-surgical procedures

ETIOLOGY OF TRAUMA-AN AYURVEDIC VIEW

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Abstract:

Trauma is a physical or emotional injury. A physical trauma caused by external sources and that has potential to cause traumatic injuries like wound, contusion, and prolonged disability or death.

In Ayurveda treatise, it is described under abhigataj vyadhi under the heading of agantuja vyadhi. It is both sharira and manas adhishthita vyadhi. Sushrut has mentioned 7 types of vyadhi, and under that classification, "sanghat bala pravrita vyadhi" is mentioned. It is nothing but exogenous vyadhi. It is subdivided into two types, shashtra krut and vyaala krita. It may cause blunt and penetrating kind of major trauma and may cause wound and contusion like traumatic injuries. Charak Acharya has mentioned Abhigataj Vyadhi under the heading of Agantuj Vyadhi in Maharog Adhyaya of Sutrasthan which causes due to Nakha, Patan, Dashan, Pidan, Bandhan, Veshtana etc. Vagbhattacharya has also described under Pidaaja Vyadhi. The etiology of Agantuja Shopha, Agantuja Vrana, Kand Bhagna, Sandhi Chyuti, and Dagda are the etiology of trauma according to ayurveda. Shoka, krodha, bhaya etc are the causes of emotional injuries. More description regarding etiology of trauma according to Ayurveda will be discussed in full paper presentation.

Key Words: Trauma, etiology, Abhigataj Vyadhi.

ROLE OF PHYSIOTHERAPY IN POST FRACTURE CONDITION

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Abstract:

Physical therapy, mostly known as Physiotherapy, is a branch of medicine that, by using mechanical force and movements [Bio-mechanics] Manual therapy, exercise therapy, and electrotherapy, remediates impairments and promotes mobility and function. Physical therapy is used to improve a patient's quality of life through physical intervention. Most fractured bones will heal in usually six weeks, but that is only half of the problem. Unfortunately, when you have enough stress placed on your body to fracture a bone, there are usually a lot of other soft tissues and structures that are damaged in the process. In addition, to that the common use of immobilisation in plaster, there will be joint stiffness and considerable muscle weakness. This may even affect joints that don't seem related to the break.

Orthopaedic physical therapists manage, and treat disorders and injuries of the musculoskeletal system including rehabilitation after orthopaedic surgery. Orthopaedic therapists are trained in the treatment of post-operative orthopaedic procedures, fractures, acute sports injuries, arthritis, sprains, strains, back and neck pain, spinal conditions, and amputations. Joint and spine mobilization/manipulation, dry needling (similar to acupuncture), therapeutic exercises neuromuscular techniques, muscle re-education, hot/cold packs, and electrical muscle stimulation (e.g. cryotherapy, electrotherapy) are modalities employed for recovery in the orthopaedic setting. Ayurveda has specialized therapies like Pizichil, Abhyanga, Janu Basti followed by Ela Kizhi and Navara Kizhi can help heal the ligaments and bring back normalcy in no time.

Keywords: Physiotherapy, fracture, Ayurvedic techniques.

MANAGEMENT OF POST DRAINAGE WOUND OF ABSCESS BY AYURVEDA -A CASE STUDY

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Abstract:

Healing of wound is a challenging task to surgeon in ancient time and even in today's era. Healing is protective mechanism of our body to invade against infection. In modern science many antibacterial formulations are available with their own limitations. Ayurveda is a science of medicine where there are so many formulations available to treat wound without any complication. In this case study we successfully treated patient of post drainage wound of abscess by different Ayurvedic formulations. Ayurvedic medication was given to patient orally as well as dressing done with Ayurvedic formulation. A 59 year old male patient with post drainage wound of Abscess treated At Parul Ayurveda hospital Vadodara in Shalya Tantra department successfully.

Keywords: Post drainage wound, Ayurveda

POST TRAUMATIC STRESS DISORDER & ITS AYURVEDIC MANAGEMENT

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Abstract:

Post Traumatic Stress Disorder (PTSD) is an anxiety disorder that can develop after experiencing or witnessing a traumatic event, or learning that a traumatic event has happened to a loved one. Examples include: Being involved in or witnessing, a car accident. Undergoing major surgery, Experiencing or witnessing natural disasters, Violent crimes (kidnapping, physical assault, or assault or murder of a parent or loved one), Community violence, Chronic physical or sexual abuse

To manage post trauma stress disorder is as important as to manage trauma. Vata provocation and majja gati vata (invasion of Vata into Majja Dhatu) are central to this condition, treatment approaches are likely to involve vata soothing diet and lifestyle interventions. In chronic PTSD, symptoms are watched of Vata Ojo Vyapat (invasion of Vata into Ojas), such as extreme fatigue, memory issues and reversal of the diurnal cycle (awake by day and asleep by night). However, because the amygdale is involved with anger as well as fear, there may well be a strong Pitta component or even Pitta Ojo Vyapat. Appropriate diet and lifestyle suggestions should thus be individually tailored within the Prakruti-Vikruti paradigm

Keywords: Traumatic stress disorder, Ojo Vyapat

TRAUMATIC BURN IN CHILDREN & ITS AYURVEDIC MANAGEMENT

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Abstract:

Traumatic Burns and scalds account for 6% of paediatric injuries. The majority involve pre-school children, burns being most common between 1-2 yrs, flame burns bet 5-18yrs. Scalds are most commonly associated with hot drinks in toddlers, also occur with overheated bath water and hot cooking oil. Children have nearly 3 times BSA: BM ratio of adults, consequently greater fluid requirements and more evaporative water loss than adults. In Ayurveda Acharya Sushruta explained briefly about Agni Dagdhha Vrana, in Sutrasthan, chapter 12 Agnikarma Vidhi Adhyaya in detail. He has mentioned in detail about the Prakara, Lakshanas, and the management of Agni Dagdhha Vrana. Similarly other Acharyas also mentioned Agni Dagdhha in their respected Samhitas in brief. Sushrutacharya has mentioned Agni Dagdhha as Pramad Dagdhha or Etaratha Dagdhha. This Pramad Dagdhha has four types. i. Plushtadagdhha ii. Durdagdhha iii. Samyakdagdhha iv. Atidagdhha. Also the treatment mentioned in Sushrut Samhita is different according to the type of Agni Dagdhha

Keywords: Traumatic burn in children, Dagdhha

POSTPARTUM HAEMORRHAGE RESULTING FROM PLACENTA PRAEVIA AND MANAGING THROUGH AYURVEDA

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Abstract:

Introduction: Classically, Placenta praevia presents painless bleeding and occurs due to implantation of the placenta in lower part of uterus nearer to internal cervical os. So Uttarbasti using Kashaya rasatmak dravya proves effective due to its Stambhan Karma in profuse bleeding. Various other methods of management have also been considered for Post-Partum Haemorrhage due to Placenta Praevia.

Aim & Objective: To evaluate the efficacy of Uttarbasti and other methods of Ayurvedic Management in Prasavottar Rakta Strav w.s.r. Post-partum Haemorrhage resulting from Placenta Praevia.

Result: The management methods proved effective in reducing the signs and symptoms of Post-Partum Haemorrhage.

Discussion: Probable action of Uttarbasti and Yonidhavan and various other methods of management based on curative and preventive aspect of disease i.e. Post-Partum Haemorrhage resulting from Placenta Praevia.

Conclusion: Specific marked reduction in signs and symptoms like Raktasrava, Daha, Raktapitta, etc. in the patient can be observed. Bleeding can be restricted and other symptoms can be managed using Uttarbasti, Yoni Dhavan, and other methods of management

Keywords: Placenta Praevia, Post – Partum Haemorrhage, Uttarbasti

A CASE STUDY ON THE EFFICACY OF MANJISTHADI LEPA AND LAKSHADI GUGGULU IN THE MANAGEMENT OF ABHIGHATAJ SHOOL W.S.R. TO HAIRLINE FRACTURE

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Abstract:

Fracture is a very common entity, which may occur due to any trauma or systemic pathology, which impairs the normal day to day activities and requires prolonged ambulatory period. Fracture presents with pain, swelling, deformity, echymosis, loss of function, tenderness, abnormal movements, etc. Management of fracture includes pain management, reduction, immobilization and rehabilitation. Sushruta has been described the same principal like Anchhana (Traction), Peedana (Counter traction) Sankshepana (Correction of deformity) and Bandhana (Immobilization) for Bhagna. The aim of this study is to return the patient to their prefracture activity as early as possible, make them independent, to reduce the time of rest or immobilization, to overcome complication, reduce confinement to bed, prevention of deformity and disability due to non-union and delayed union. This case study will be adopted for assessing the efficacy of Manjishthadi Lepa and Lakshadi Guggulu in long bone fracture healing.

20 years old female patient having complains of pain and swelling over right ankle diagnosed as hairline fracture of metatarsal bone. She was treated with Manjishthad Lepan, Lakshadi Guggulu orally and advised for immobilization for around 20 days. Complains were relieved after 14 days.

Keywords: Hairline fracture, Manjishthadi Lepa, Lakshadi Guggulu

DIAGNOSTIC TOOLS TO ACCESS TRAUMA IN CHILDREN

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Abstract:

Unique anatomic features predispose children to a variety of injuries, while particular mechanisms, such as bicycle accidents, pedestrian trauma, non accidental trauma, and lap belt complex, lead to specific injuries that might be difficult to identify and cannot express due to fear of critical management. Compared with the adult patient, the child's organs are proportionally larger and are in relatively close proximity to each other. The need for thorough and accurate assessment of trauma in the lives of children has become extremely important for the implementation of appropriate interventions. Instruments are divided into four domains: those that screen for (1) both a history of exposure to traumatic events and the presence of symptoms of trauma; (2) only a history of exposure; (3) symptoms of posttraumatic stress disorder (PTSD) or Dissociations; and (4) multiple symptoms of trauma (i.e. depressions, anger, sexual concerns, as well as PTSD). Child PTSD frequently presents with psychiatric disorders including anxiety disorder, Depression, Externalizing behaviour problems. Enlisting of certain devices and technologies like CT, MRI, X-RAY etc. will be done in the presentation

Key Words: Trauma in children, Standardized assessment measures.

HERBS COMMONLY USED IN ABHIGHATOPACHAR

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Abstract:

In the Ayurvedic view, a person who has narrowly escaped death, been injured or suffered an emotional shock is disturbed in body, mind and spirit. "Whenever anything unexpected happens, vata is provoked," When it is provoked, a person may feel "spacey" or restless and notice pain that moves throughout the body. One may feel anxious or depressed or experience chills, heart palpitations or constipation. She may think painful thoughts continuously, how Ayurved explains the Abhighat and its treatments.

Some herbal formulations which settles the Vata provocation, and make symptomatic relief; also make Tridosha Samyata, Dhatu Samyata and thus Abhighat symptoms gets settled down.

Key Words: Abhighat, Herbs, Abhighatopachar, Trauma.

MULTIDEMENSIONAL APPROCH OF ABHIGATA WITH SPECIAL REFERENCE TO LEVELS OF PREVENTION - AN AYURVEDIC VIEW

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Abstract:

Introduction: Ayurveda is a primary science for shealth promotion, disease prevention, disability limitation & rehabilitation. It mainly puts emphasis on promotion of positive health & prevention of disease by following proper Dinacharya, Ritucharya, Sadvritta, Pathya and Yoga. Abhigata can be prevented at 4 levels-Primordial, Primary, Secondary and Tertiary. As today's highly modernized, mechanized and stress full life, made people more prone for Abhigata, it may be due to accidents or disability caused by set of diseases so to prevent it, at its Primordial level Dinacharya, Ritucharya, BahirangaYoga should be practiced, at Primary Level by propagation of all charya's to the community with both mass strategies and high risk strategies should be implemented. At Secondary level by Proper usage of Pathya kalpana along with Oushada's & at Tertiary level rehabilitation with all Charya's, Yama, Niyama & Pranayama must be practiced.

Aims & Objectives: To understand Preventive Principles of Ayurveda according to different levels of prevention w.s.r Abhigata.

Material & Methods: Classical text, journals, website etc.

Discussion: As Acharyukta preventive principles is easy, accessable, affordable and accountable to prevent Abhigata, so all should give importance to Swasthavritta Paripalana as it prevents abhigata from its root cause.

Conclusion: Ayurveda, which is Anadi, Anantha & Amara not only emphasized on treatment aspect but also on all aspects of healing and maintaining health. But knowledge is scattered around vast samhitha's. It should be analyzed according to once need with proper yukthi and should be implemented to prevent Abighata or any other vikaras.

Key Words: Abhigata, Dinacharya, Ritucharya, Sadvritta, Pathya, Yoga, levels of prevention.

EPISIOTOMY MANAGEMENT THROUGH AYUREVDA

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Abstract:

Episiotomy procedure is introduced in obstetrical practice more than 200 years ago but is put in frequent practice in the 20th century. Postnatal complications were more common among women who had episiotomy compared to those who did not have episiotomy; hence postpartum care of episiotomy wound should begin as soon as possible. So the present study has been done on episiotomy wound healing. Basically two things Shodhana (cleaning) and Ropana (healing) are desirable for proper healing. Many single drugs and compound formulations have been described in the classics for wound healing.

There is no directly reference for episiotomy in our classics only coin term like Mooladhara chedana or vitapa chedan have been maintained, and also concept of Utkartana explained in Moodha garbha can be correlatd to episiotomy and but Vrana (wound) is described very well and hence it can be considered as Shuddha Agantujavrana or Vaidyakritvrana or Sadhyovrana. According to Sushruta Alepa (application of paste) is the first line of treatment for wounds and inflammations. Sushruta said "just as fire of a burning house is immediately controlled by spraying of water, similarly the pain (of the wound) is removed by the application of the Alepa". The application of Alepa on wound is soothing; it cleanses the wound, reduces the swelling, fills up the wound and heals it.. Dhupana karma is also effective for the management of in episiotomy wound. In this method medicated drugs should be taken for the dhupana karma, It dramatically improve healing help in involution of uterus and suppression pain and it also works as anti-inflammatory action. So Episiotomy wound can be treated on the lines of Sadhyovrana.

Key Word: Episiotomy, Vrana, Alepa, Dhupana, etc.

PANCHAKARMA UPACHARA IN ABHIGHATA

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Abstract:

Frozen shoulder, also known as periarthritis or adhesive capsulitis cause a significant loss in range of motion typically occurs in cycle of 3 stages. It predominantly occurs in females in their fifties in textual references of Auyurveda frozen shoulder is closely related to avabahuka. In this condition, vata is localized in the shoulders constricts the siras present there and causes avabahuka. Modern medical science plays very less role in the management of frozen shoulder in auyurveda various para- surgical procedures were mentioned for diseases of vata and kapha in which agni karma is one of them that has been recommended in various musculoskeletal disorders.

Keywords: Avabahuka, Frozen shoulder, Agni-Karma, Para, surgical procedure.

INFLAMMATION IN AYURVEDA

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Abstract:

Inflammation- a localized protective reaction of tissue to irritation, injury or infection, characterized by Celsus cardinal signs is not a bad thing as everyone understands. It is a protective phenomenon of classical stimulus- response mechanism vital in the maintenance of homeostasis. This response is a signal of an active immune system having recognized the invading pathogen in case of a trauma. However Charaka attributes that this system also gets activated on as a positive feedback mechanism of a classic homeostatic system functioning to maintain organ and organism functions. The removal of senile cells and its replacement by younger ones is also characterized by inflammation in a subtle way. This paper tries to peek in to the protective outcomes of inflammation in healthy and in unhealthy.

Keywords: Inflammation, Shotha, Jwara, Homeostasis

AYURVEDIC MANAGEMENT OF ABHIGHATAJA NASAGATA RAKTASRAVA

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Abstract:

Introduction: Any minor trauma to nose causes bleeding from the nose its called epistaxis which a common disorder is occurring in any age group. Kiesselbach's plexus or little's area is a common site for epistaxis. Here the vessels are situated submucosally and are exposed to atmospheric air. Its treatment is generally aimed at controlling the frequency and severity of nasal haemorrhage and involves topical treatment, transcatheter, embolization, surgery (very rarely) or a combination based on the type (either ant. or post.). Bleeding from the nose may occur as a result of the variety of causes ranging from insignificant trauma to malignancy, and a blood loss may vary from a few drops to a massive loss of the many litres. According to that treatment should be administered. In a perennial science of life Ayurveda has indicated various types of chikitsa for the management of this disease. Among the chikitsa mentioned, "shadvidh upakrama" bears lot of significance. In these "stambhana chikitsa" plays an important role to manage the condition of "nasagata raktasrava" stambhana has been explained as a last upakrama so in any of the disease or in any uncontrolled disease, stambhana played important role (eg. Sarkarajala nasya) In nasagata raktasrava stambhana chikitsa can be considered a part of "yuktivyapasraya chikitsa", among the "chaturvidh chikitsa".

Keywords: Ayurveda, Nasagata raktasrava, Epistaxis, Stambhana chikitsa

AYURVEDIC TRAUMA CARE IN PREGNANCY

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Abstract:

It is crucial to take special care of yourself and the growing baby for a healthy pregnancy. Being pregnant for the first time can be difficult due to the pregnancy stress and mood swings. Trauma occurs relatively frequently among pregnant patients. Various anatomic and physiologic changes of pregnancy may alter the type of injury experienced by pregnant women. These changes may also alter the manifestations of given injuries and the treatment required to reestablish maternal-fetal homeostasis. Fortunately, most traumas experienced by pregnant individuals is minor and is associated with good prognosis for both the mother and her fetus. Trauma complicates one in 12 pregnancies, and is the leading non obstetric cause of death among pregnant women. The most common traumatic injuries are motor vehicle crashes, assaults, falls, and intimate partner violence. Pain in abdomen and bleeding during pregnancy can hint towards miscarriage. While not all cases of trauma during pregnancy are dangerous, good care of the mother should be taken to avoid complications. Many Ayurvedic combinations of herbs are explained in Ayurvedic text to treat this condition. To prevent and cure the condition here is an attempt to discuss possible treatment.

Keywords: Trauma in pregnancy, Cause, Ayurvedic Care.

ROLE OF MARMA CHIKITSA IN TRAUMA

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Abstract:

The word Marma comes from Sanskrit origin word 'Mri' which means death. The Sanskrit phrase, Marayanti Iti Marmani', also means death or serious damage to body or health after infliction to the point of their situation. Hence these areas are called Marma.

Marmas are vital point in the body, when they hurt, ultimately leads to death of the person, or certain disability or pain in the respective parts. They are the sites where the Mamsa, Sira, Snayu, Asthi, Sandhi (Dhamani also, according to Vagbhata) combine together; they are also the sites of Prana. Vishalyghna Marma is Vayupradhana i.e. dominated by Vata. Hence, after trauma, the shalya which is impacted in vital parts gives protection to Prana until the wound heals normally. Rujakara Marma is Vayu and Agni - dominated; Agni is diminished due to trauma but Vayu gives rise to constant pain at the affected part. Marma Vigyan is collection of fundamental knowledge of Marma. Marma therapy focuses on the body to relieve trauma, illness & pain related diseases. Hence the complete knowledge of the Marma and its clinical application in trauma can play a important role in treatment of abhigat chikitsa.

Keywords: Marma and Trauma

CONTRIBUTIONS TO ABHIGHATOPACHARA: FROM SHARANGDHARA SAMHITA

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Abstract:

Abhigata, the trauma is a collective term to describe an injury caused by extrinsic agent; in some cases it includes mental disturbances too. In a classification perspective, a result trauma is divided into cut injury, poisoning, fracture, contusion, bruise and laceration. According to causative factors trauma is classified into ballistic injury, animal or vegetable poisoning, sports injury, etc. The science of life, Ayurveda has described several remedy techniques and medicines to treat every kind of abhigata, right from treating a fresh trauma to managing a complication. Sharangdhara Samhita, a Laghu Trayee has contributed 17 formulations to manage different types of abhigata. The Madhyama Khanda of Sharangdhara Samhita is referred for collection, compilation and classification of the trauma relevant formulations based on their indication. The formulations are classified for fresh open injuries, putrefied wounds, inflammations, fractures, animal poisons and herbal poisons.

Keywords: Abhigata, Laghu trayee, Sharangdhara Samhita

REHABILITATION IN TRAUMA

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Abstract:

Ayurveda has many traditional modalities using physical methods. Ayurveda being holistic, physical methods are always free with medication. Ayurveda uses Drug delivery by physical medicine routes to affect Neuro-Immuno- Endocrine axis. Same physical methods can be used to achieve diametrically opposite therapeutic targets.

WHO – is defining Rehabilitation as "a set of process that help persons, who experience are liable to experience disability, to attain and continue optimum functioning in interaction with their environments" (WHO, 2011), is helpful in enabling people with limitations in functioning to remain in or return to their home or community, live independently, and participate in education, the labour market and civic life.

In Ayurved lots of the Rehabilitation method for treating the various types of addiction and disease has been mentioned hence in this paper I have described the process of Rehabilitation in Trauma and other disease.

Keywords: Trauma & Rehabilitation

USE OF AYURVEDA IN CASE OF AVASCULAR NECROSIS A HOSPITAL BASED STUDY

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Abstract:

Avascular necrosis (AVN) is a disease where there is cellular death of bone component due to interruption of the blood supply. Without the supply of blood, the bone tissue died and the bone collapses. The disease found mostly in age group 35 to 45 years. Head of the femur is classical site of AVN. Avascular necrosis of bone is caused mainly by trauma, excessive use of corticosteroids, SLE, alcoholism, sickle cell anemia and infiltrative diseases. A case history of known case of avascular necrosis grade-III of left femoral head confirmed by MRI in 36 years old female was at admitted at Akhandanand Ayurveda Hospital. She has pain in both hip joints (more in left leg) and difficult to walk since 6 months. She has taken some allopathy medicine but not got relief and she had advised for hip replacement therapy. She was treated with oral medications.i.e Kaishor guggulu, Samshamni vati, Guduchyadi kwath, Swadishtavirechan churna and Agnikarma was done at site of pain. She got the satisfactory results in pain and walking without consuming pain killer. Movement of hip joint moderately improved and got symptomatic relief.

Keywords: Avascular necrosis, Shamanaushadh, Agnikarma

NIRUHA BASTI ABHIGHATA AND ITS MANAGEMENT

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Abstract:

Trauma is of two types, physical trauma and mental trauma. Any injury, damage, wound, sore, bruises, cut, laceration, lesion, abrasion are known as physical trauma. Fissure is a condition which can occur by many reasons. It can be occur as a complication of a particular treatment of Ayurveda.Niruha Basti is one among that treatment in which fissure can occur if it is administered improperly.

Niruha Basti is a very famous Panchkarma treatment which is helpful in so many diseases. Acute fissure is one of the complications of Niruha Basti. Fissure is a very painful condition to the patient. Bleeding, itching, malodorous discharge is main symptoms of it. In Ayurveda it's clearly coated that the type of pain in fissure is Kartika Vat that is like sessor cutting pain.

Ayurveda mentioned very effective and progressive treatment in fissure wound healing. And it's very essential to treat the patient of fissure which is produced as a complication of one treatment.

Treatment for this complication can also be a type of Basti mentioned by our Acharyas. Specified drugs should be used for preparation of this basti.

Keywords: Niruha, Abhighata, Fissure

APPLIED ASPECT OF RUJAKAR MARMA

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Abstract:

In Ayurveda science concept of Marma is mentioned. Marma are the vital areas of body. The word Marma comes from Sanskrit origin word. 'Mri' means death. The Sanskrit phrase, 'Maryanti Iti Marmani', means death or serious damage led to body or health after inflication to that point. Acharya Sushruta described 107 Marmas in human body.

In Ayurveda there are eight Rujakar Marmas described by Sushruta Acharya. In which two Gulph Marmas, two Manibadh Marmas and four Kurch shira Marmas are situated in Upper and lower limbs of human body which cover some of important part of limbs of human body which are most important for daily movement especially those related to movement or locomotion. So it is necessary to understand Marmabhighat lakshna that which conditions are developed due to trauma of that particular Marmas or Rujakar Marmas. As well as in contemporary science Co related structures are injured due to trauma. Along with it is management.

Keywords: Rujakar Marma, Trauma, Marmabhighat

CONCEPT AND MANAGEMENT OF TRAUMA IN AYURVEDA

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Abstract:

Introduction: This presentation deals with the case study of Traumatic ulcer, its Ayurvedic correlation and treatment according to classical text along with the probable mode of action.

Problem Statement: How can we implement Sadyovrana chikitsa by acharya Sushruta in the management of Traumatic ulcer? I have included a case study of 14yr old boy with history of fall from bike. This case involves a 14 year old boy who met with a road traffic accident resulting in an avulsion wound which was not able to be sutured. Tendons were exposed but functionality of the tendons was not affected. Plastic surgeon at Apollo hospital advised the patient to go for plastic surgery (flap reconstruction). Patient due to his poor socio economic status opted for ayurvedic treatment. Plastic surgeon was called to see the status of the patient and after seeing the wound healing, he suggested silicone gel sheath application and physiotherapy treatment to avoid contracture after the healing of wound.

Procedures & Outcome: Daily cleaning of the wound with normal saline and dressing of the wound with Jatyadi Taila for 7days followed by dressing with Jatyadi Taila and Yastimadhu Taila from 8th day. After the 7th day of wound dressing with jatyadi taila healthy granulation was seen, after using Yastimadhu Taila along with Jatyadi Taila significant relief from burning sensation was seen from 10th day.

Conclusion: Patient presented with wound over lateral part of right lower limb along with pain and severe burning sensation. On examination, the condition was diagnosed as traumatic ulcer. Diagnosis was done based on physical examination. It was correlated as sadyovrana in Ayurveda and treatment was planned accordingly. According to acharya Sushruta, sadyovrana line of treatment was adopted and 90 percent of the ulcer was healed within 2 weeks. Healthy granulation started seeing by 7th day of dressing and by 10th day burning sensation sensation was significantly reduced.

Keywords: Traumatic ulcer, Sadyovrana, flap reconstruction

SUSCEPTIBILITY OF TRAUMA IN DIFFERENT PRAKRUTI

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Abstract:

Sharir is made up of Dosha, Dhatu and Mala. Predominant Dosha during the time of conception will decide the specific nature of the individual, which is inseparable characters from birth to death, also it is pillars of life (tristhamba) supports the body. Ayurveda (Science of life), explained that the concept of different dehaprakruti, there is a plenty of reference regarding Akruiti, Avayava, Bala,

Manas, Svabhavaavailable in different samhitas. All these characters are different from each individual based on those dehaprakruti. Trauma (abhigata) is the most acute condition, which provides unpleasant sensation to the body, mind and both. The parallel intensity of trauma causes different degree of pain, including various signs and symptoms as per individuals Prakruti. In this paper, scrutinized specific features of different Prakruti and how those characters react on their health and trauma.

Keywords: Trauma (abhigata), Prakruti.

IMPORTANCE OF RAKTAMOKSHAN AS A FIRST AID MEASURE IN POISONOUS SNAKE BITE

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Abstract:

Introduction: Ayurveda has its own way of approach towards the management of visha, which is unique and parlance with the concepts of current science. About 70% of Indian population lives in villages and forest area where agriculture is the main occupation. These people are prone to incidence of snake bite and estimation of snake bite mortality in India varies from approximately 50000 Indians mostly poor villagers die in 250000 incidences of snake bites. Raktamokshan (bloodletting) one among the panchavidha shodhan chikitsa (five purifactory treatment modalities) mentioned by Brihatrayee. Raktamokshan (bloodletting) aims to eliminate vitiated blood, as poison enters blood and spreads all over body very fast.

Aims and Objectives: The main objective of present paper was to study the role of raktamokshan in poisonous snake bite and establish it as a first aid measure in acute cases.

Materials and Methods: In principle, the ayurvedic approach to the treatment of disease consists of two major procedures As Sanshodhana chikitsa (purifactory) And Sanshamana chikitsa (palliative)

Result: Raktamokshan (bloodletting) stops further spread of poison like in 1st visha vega by eliminating vitiated blood along with vitiated dosha.

Keywords: Raktamokshana, Bloodletting, poisonous snake bite.

REVIEW OF ANATOMICAL CHANGES IN SKIN IN DAGDHA VRANA

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Abstract:

Introduction: Twak is one among the Jnanendriya the function of which is to perceive the sense of Sparsha. Twak protects the body from hazardous factors which are present in external environment. Burn is one type of trauma where the protective cover of the body which get involved & leads to several complications.

Aim: Review of anatomical changes in skin in Dagdha Vrana

Objective: to study the literary review related changes in skin in Dagdha Vrana

Discussion: Dagdha vrana has been described by ancient Ayurvedic acharyas in the context of Agnikarma vidhi. Acharya Sushruta has mentioned the 4 type of Agnidagdha. These are 1) Plushta 2) Durdagdha 3) Samyagdaghda 4) Atidagdha and also described 2 type of Dagdha acc. to yoni of dravya like 1) Snigdha 2) Ruksha. In contemporary science, there are two type injury burn and scald. There are 3 stages of burn 1) first degree (superficial) 2) Second degree (epidermis and dermis) 3) Third degree (dermis and deeper tissues). In burn, skin is the first organ to get damaged, so it is important to study the changes in skin during burn. On the basis of change in skin, the degree of burn can be analyzed. So the study of changes in the skin exposed to burn is an important aspect.

Conclusion: In the present paper an effort will be made to understand the burn injury with the anatomical changes in skin.

Keywords: Twak, Dagdha, Vrana, Agnikarma

MANAGEMENT OF INCREASED INTRAOCULAR PRESSURE DUE TO TRAUMA

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Abstract:

Day and night are similar for a blind person and all the wealth in the world seems to be of no use. Hence to lead a desired life one should always try to protect the eye. Blunt trauma may cause a raise in pressure may go on inside the eye. This raised pressure may go on to cause glaucoma straight away or take some time. A blow to the eye such as a punch, car accident or Head injury can cause damage to the drainage mechanism in the eye. This may be seen as bleeding, inflammation within the eye. Which in Ayurveda is demoted by raga, samrambha, tumula as the primary symptoms in Netraabhighata? There may be direct damage to the drainage pathway or to the optic nerve itself this generally settles with initial treatment. But it may leads to develop a late rise in the intraocular pressure. In Ayurveda, rakta-mokshna (jalokaawacharana) is described as line of treatment for the raktajadhimantha by Acharya chakradatt.

Keywords: Ocular injury, intraocular pressure, Netra-abhigata, Rakta-mokshana.

MANAGEMENT OF SUBCONJUNCTIVAL HAEMORRHAGE DUE TO TRAUMA

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Abstract:

Eye is protected from direct injury by lids, eyelashes and projecting margins of the Orbit. Nevertheless, it can be injured by many different ways; by Chemical, Heat, Radiation and Mechanical Trauma. Subconjunctival haemorrhage is very common occurrence. It may vary in extent from small petechial haemorrhage to an extensive one spreading under the whole bulbar conjunctiva and thus making the white sclera of eye invisible. Subconjunctival haemorrhage occur due to Local Trauma to Conjunctiva, Eyeball, and Orbit. In Ayurveda, Shusruta has given a separate chapter for treatment of Ocular Trauma in the name of Nayanaabhighatam. In which, Anjanam, lepa, Aashcyotana and raktamokshanam are mentioned as a treatment.

Keywords: Subconjunctival Haemorrhage, Trauma, Raktamokshanam.

A CASE STUDY ON THE EFFECT OF CHEDAN KARMA FOLLOWED BY TAILADAHA IN THE MANAGEMENT OF KADAR (CORN)

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Abstract:

The disease Kadar (corn) is a localized hyperkeratosis. It usually occurs at the site of pressure e.g. on the soles and toes, occurring due to defective wearing of shoes, thorn prick, etc. There is usually horny induration of the cuticle with a hard centre. Corn has tendency to reoccur after excision. It has a deep central core which reaches to the deeper layers of dermis. In Modern science excision of corn is advised. But reoccur is more in modern treatment. In Ayurveda, Acharya Sushruta has described taila daha. There is no recurrence of corn after chhedan followed by Taila daha. Here, A case study Of a 22 Years old female patient is being presented, who came with complain of hard nodule in right foot with pain in walking, considering the sign and symptoms of kadar, the treatment of kadar was planned acc to Acharya Sushruta, chedan karma followed by tail daha complete, remission in sign and symptoms of kadar were found.

Keywords: Kadar, corn, chedan, taildaha

SPORT MEDICINE AND AYURVEDA

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Abstract:

Sports and the Ayurveda, these two are in existence since a very long time. Sports and injuries go hand in hand. Ayurveda, the science of life, is one among the oldest systems of medicine. Sports medicine deals with physical fitness, the treatment and prevention of injury related to sport and exercise. There is no direct reference of sport medicine; neither in modern medicine nor in ancient science. Therefore, in sport medicine we just apply various principles of the respective science. Also in Ayurvedic texts or samhitas, no specific branch is there for management and prevention of sports injuries. And no clear-cut principles are defined. After keen observation and correct interpretation of various ayurvedic texts, we can come up with ideas for sports medicine. The aim of this paper is to explore and throw light on various hidden references and scope of Ayurveda in sport medicine.

Keywords: Ayurveda, Sports medicine.

DAGDHA VRANA (BURNS) - A CASE STUDY

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Abstract:

Burns are a global public health problem, accounting for an estimated 180 000 deaths annually, where the rates are similar for males and females. A burn is a type of injury to skin, or other tissues, caused by heat, cold, electricity, chemicals, friction, or radiation. Most burns are due to heat from hot liquids, solids, or fire. Burns are an important cause of injury, being the third most frequent cause of injury resulting in death behind motor vehicle accidents and drowning. Burn injuries account for the greatest length of stay of all hospital admissions for injuries and costs associated with care are substantial. Burns that affect only the superficial skin layers are known as superficial or first-degree burns, they appear red without blisters and pain typically lasts around three days. When the injury extends into some of the underlying skin layer, it is a partial-thickness or second-degree burn. Blisters are frequently present and they are often very painful. Hence the treatment depends on the severity of burn.

Our Acharya has very well defined the concept of "Dagdha Vrana", where Acharya Sushruta has considered it as Itaratha Dagdha and Acharya Vagbhata has addressed it as Pramadh dagdha, and has very well classified the stages of Dagdha and its management.

The present paper is the case presentation of a male hemiplegic patient who met with an accident and had second degree burn and was treated with Ayurvedic management.

Keywords: Burns, Dagdha Vrana, Itaratha Dagdha Pramadh Dagdha.

AYURVED MANAGEMENT OF KARNINI YONIVYAPADA W.S.R CERVICAL EROSION

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Abstract:

Karnini yonivyapad is one of the vinshati yoni vyapad. Acharya Sushrat and Charak both have the slight difference about etiology of disease described Vata, Kaphaja. Sushrata mentioned as Kaphaja. Cervical Erosion can be correlated with Karnini yoni vyapada in Ayurvedic classics description of yoni vyapad has been describes in Brihatrayee and Laghutrayee. Aakala Pravahan during Prasav leads to morbidity of Vata dosha which inturns Karnikakar granthi. Trauma (through Intercourse, Tampoon insertion, Foreign objects in the vagina or speculum insertion these are factor which may damage the defense mechanism of the cervix and leads to cervical erosion. Cervical erosion is condition in which Squamous epithilium is replaced by Columnar epithelium.

Ayurved management of topical use of Shodhan varti, Uttar vasti, and Kshara Karma is mentioned for Karnini yonivyapad. Modern science there is cauterization, cryosurgery or laser vaporization procedure are being may be carried out and these are certain complication like sero sanguineous discharge for about 2-3 weeks, secondary Haemorrhage, either infection or cervical stenosis. Though, there is no explanation regarding Abhigata as nidana for Karnini yoni vyapad. But it can be substantiated that due to Akala Pravaharnd garbha Shiras will create Abhigata at yoni pradesha.

Keywords: Karnini Yonivyapad, Cervical erosion, cervical ectopy cervical infection, Karnini Chikisha.

PATHOPHYSIOLOGY OF INFLAMMATION ACCORDING TO AYURVEDA AND MODERN SCIENCE AND ITS MANAGEMENT

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Abstract:

Inflammation is a localized protective reaction of tissue to irritation, injury, or infection. It is characterized by pain, redness, swelling, commonly. Inflammation is part of the complex biological response of body tissues to harmful stimuli, such as pathogens, damaged cells, or irritants. It is a protective response involving immune cells, blood vessels, and molecular mediators. The function of inflammation is to eliminate the initial cause of cell injury, clear out necrotic cells and tissues damaged from the original insult and the inflammatory process, and initiate tissue repair. In Ayurveda Acharyas also explained about shotha (inflammation). According to Ayurveda, vatadosha is responsible for shotha. Due to vitiated vatadosha, shotha is produced. In Ayurveda 2 types of Shotha (inflammation) are explained by Acharyas. 1. Nija 2. Agantuj. Agantuj shotha is produced by any kind of trauma. In Ayurveda treatment of Shotha (inflammation) is also explained beautifully.

Keywords: Shotha, Inflammation in Ayurveda

AYURVEDIC MANAGEMENT OF POST-TRAUMATIC STRESS DISORDER

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Abstract:

Post-traumatic stress disorder (PTSD) is a mental disorder that can develop after a person is exposed to a traumatic event, such as sexual assault, warfare, traffic collisions, or other threats on a person's life. Due to that, thoughts, feelings or dreams related to the events, mental or physical distress to trauma-related cues, etc. disturb the patient. In today's era, traumatic events are happening vigorously so PTSD is also widely spread in society now a day. Psychotherapy, cognitive and behavioral therapy, individual and family counseling, and medications constitute the line of treatment for PTSD, and this can be achieved with Ayurvedic principles. Ayurvedic treatment focusses on both, mental and physical, levels. Here, this paper is an attempt to elaborate the treatment principles of Ayurveda in context of PTSD.

Keywords: Post-traumatic stress disorder, Ayurveda

ABHIGATOPACHARA IN TRAUMATIC TYMPANIC MEMBRANE PERFORATION

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Abstract:

Traumatic tympanic membrane perforation may be caused by e.g. direct trauma or acute & chronic middle ear infections. Perforation causes hearing loss (conductive). Since it predisposes to infections, it is important to keep the ear dry. In most of the cases traumatic perforation heals (spontaneously) as its own infections are treated with antibiotics. Chronic perforations occur due to chronic middle ear infections and will not heal without surgery. Most of the ENT consultation is needed when there is continuous pain, vertigo or facial paralysis. So we can take care of these patients in o.p.d for keeping the ear (dry) in its proper condition. The commonest cause of perforation is slap injuries (2.9%), perforation by solid objects (25.8%), explosion (16.8%), fall from height (12.9%), road traffic accidents (9.7%), aural syringing (4.85%) & swimming (1.6%). The healing rate of perforated TM after three months of follow up was 82.3%. There is no statistically significant difference between patients with or without spontaneous healing of TM regarding the gender of patient.

As per the symptoms we can use gugullu kalp for reducing the pain in the TM perforation such as Triphla Guggulu 250mg tds for 5 days. By using triphla we can avoid the infection which may occur due to TM perforation. According to modern also we are giving symptomatic treatment only for e.g. (analgesics & anti-inflammatory). Very rarely we use antibiotics.

Keywords: Traumatic, Tympanic Membrane, Perforation, Spontaneous healing.

MANAGEMENT OF VENOUS ULCER WITH AYURVEDA

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Abstract:

Ulcer formations are commonly observed cases at OPD level all across India and many times need urgent and immediate intervention to avoid further disease prognosis. They can be categorised under Vrana in Ayurveda. Venous Ulcers specially non healing were studied with ayurvedic line of treatment viz vrana karma, raktamokashan, internal oral medications along with pathaapathya which gave desired relief in healing as well as prohibiting further bad prognosis.

Keywords: Venous Ulcer, Vrana, Vrana Karma

BALA-ABHIGHATAOPACHARA MANAGEMENT WITH AYURVEDA RASA-AUSHADHI

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Abstract:

Introduction: According to Ayurveda Dosha Prakopa is very primary cause for kind of diseases including Abhighata. Abhighata leads to Vata and Pitta Dosha Prakopa and Rasa, Rakta, Mamsa and Meda Dhatu Dushti in general. In case of children Kapha Dosha Dushtis additional and severity of trauma is more though the traumatic forces are less as children are in growing phase.

Aims and Objectives: To highlight the role of Rasa Aushadhi in Ayurveda Bala Abhighata Chikitsa

Material and Methods: Different Ayurveda classical texts books, Samhita, Rasa Shastra text books and reference books, pediatric reference and text books, internet references and journals etc.

Discussion and Conclusions: Considering etiology and fundamentals regarding Bala-Abhighata, the use of Rasa Aushadhi is looks more promising. Use of preparations containing Swarna, Swarna-Makshika, Yashada, Mukta, Pravala, Mandoora, Loha etc is very fruitful as these preparations produces fast results in reducing pain, enhance the growth of body tissues and blood components, strengthens the immunity of and finally requires minimal dose, which ultimately solve the problems regarding palatability in children. Kumara Kalyana Rasa, Ekangaveera Rasa, Samira Pannaga Rasa, Vatavidhvamsa Rasa and Punamava Mandoora are such a five Rasa Aushadhis has been discussed in this article in detailed. Kumara Kalayana Rasa and Punamava Mandoora are useful as both of these preparations nourish the tissues and improve cellular health. Ekangaveera Rasa and Vatavidhvamsa Rasa are useful to control the Vata and pain symptoms in Bala Abhighata while Sameera Pannaga is useful in Avaran Janya condition of Bala Abhighata Upadrava. All these five Kalpa should be used with caution and dose should be decided according to the disease, age, and Prakriti of child and season. This article is a key message to Ayurveda physician for the judicious use of Rasa Aushadhi in Bala Abhighata.

Keywords: Ayurveda, Bala, Abhighata, Rasa Aushadhi

REVIEW OF KARNASANDHAN

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Abstract:

Karnaabhighat such as chhina, vidhdha, pichchit vrana caused due to wearing heavy ornaments, Bite, sporting injury etc. have an impact in the misshaping of the ear. This is described as karnapali bhedha in ayurveda which could be manage by karnasandhan, described by the great sage and the father of surgery acharya sushruta in the 16 chapter of sutra sthan. 15 Type of karnasandhan vidhi is described, but in the present era this ayurveda sandhan vidhi is not in use, so in present day the trauma being the leading cause of earlobe tear can be corrected by auroplasty viz. 1. After giving local anesthesia 2. Cleaning with betadine 3. Cut the ear edges and suture by 5.0 black silk 4. Close the wound by gauze piece and sticking. The detail of surgical anatomy and surgical technique of sushrutacharya regarding Karnasandhan with respect to modern surgical technique (auroplasty) need to review for the better understanding of ayurveda.

Keywords: Karnasandhan, Trauma, Auroplasty

AYURVEDA MANAGEMENT OF RADIAL NERVE PALSY IN NEW BORN

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Abstract:

Radial nerve palsies presenting at birth can be stressing for families and care providers. It is therefore important to be able to identify child whose diagnosis is compatible with full recovery so that their families can be reassured. The reported incidence of this type of injury varies from 0.1%-4.0% of live births. The radial nerve originates from the posterior cord of the brachial plexus (C5 through T1). Radial nerve palsy is procreated by pressing radial nerve resulting from excessive pressure either in the uterus or during the labor. Isolated nerve palsy should be considered different from brachial plexus damages. In brachial plexus damages depending on the damage degree and involving spinal roots, resulting disability in brachial abduction, disability in elbow, wrist and digital flexion and extension may be observed. In isolated nerve palsy depending on the level of pressure and damage, different symptoms are suspected but most common symptom is inability in extension of wrist and fingers, which is called wrist drop. By prescribing physical therapy modalities including IR (infrared), Gentle massage, Electrical stimulation, Gentle range of motion, the patients were completely revealed from the disease. According to Ayurveda Vata is the deranged Dosha in this particular condition causes numbness, tingling, weakness, hence procedures like Swedana and Abhyanga will be helpful to relieve symptoms. It is equally important to reduce the cause of this condition in order to prevent recurrence of this condition.

Keywords: Ayurveda, Abhyanga, Radial nerve palsy, Swedana, Vata Dosha

UNDERSTANDING OF CEPHALOHEMATOMA THROUGH AYURVEDA AETIOLOGY

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Abstract:

Cephalohematoma is a medical condition in which haemorrhage occurs in babies during delivery, between the skull and the periosteum secondary to rupture of blood vessels crossing the periosteum. Birth trauma is one of the main risk factor which is observed in Primigravida, difficult prolonged labor, cephalopelvic disproportion. This condition is usually apparent because of an unnatural bulge on the baby's head. When there is a small amount of blood collection, the bulge will be soft and large masses are typically firm to the touch. Children with cephalohaematoma are at a higher risk of developing pathological jaundice, severe infection and anaemia. According to Ayurveda, it can be co-related with Aagantuj Abhigataja Vidhradhi which is caused due to kshata (trauma) and signs resemble to Agantuja Pittaja Vidhradhi which looks like Pakwa Audumber (swelling of the cephalohaematoma).

Cephalohaematoma is one of the important prashav kaalin abhigataja vyadhi which can be diagnosed clinically and has complications such as jaundice, infection and anaemia. Modern medical sciences do not include direct treatment of cephalohaematoma but has advised to treat the complications of the same. Complications of cephalohaematoma viz. anaemia and jaundice are included in pittaj vyadhis. According to Acharya Sushruta aagantuj vidradhi should be treated like pittaj vidradhi. And so, the complications of cephalohaematoma can be treated accordingly.

Keywords: Aagantuj Vidradhi, Abhigataja Vyadhi, cephalohaematoma, Prasavkaalin

MANAGEMENT OF AAGHATAJ BHAGNA THROUGH SUSHRUTAS GENERAL PRINCIPLE OF FRACTURE

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Abstract:

Ayurveda is science of life. Ayurveda tells about the principles of prevention of Disease and Free from various diseases. World, especially Indian Subcontinent; with most population faces problems and challenges of management of Trauma through Ayurveda. Trauma with its versatile meaning is the most affecting part in the field of Orthopedics. One of the leading causative factors of Fracture is Trauma especially in India. In the Era of liberalization-Privatization-Globalization and Increasing Urbanization with Automobile industry and vehicle; incidence of RTA (accidents) involving fracture and soft tissue injuries statistics goes on increasing it is one the Catastrophic challenge to Human being. Such skeletal injuries are well explain with there classification and treatment in classical literature of ayurveda in the name of "Bhagna Chikitsa".

Fracture is a linear deformation or discontinuity of bone produced by forces exceeding modular elasticity. Even Ayurvedic texts have illustrated Fracture as being the loss in the continuity of the bone due to pressure. The Father of surgery, Acharya Sushruta also has quoted the treatment of fracture as immobilization, reduction and rehabilitation, which is yet practiced by modern orthopaedic surgeons. Moreover, a number of Ayurvedic traditional medicines are mentioned in the contest of fracture management to promote union.

Keywords: Fracture, Sushruta principles, Ayurveda, Traditional Indian Medicine.

A BIRDEYE VIEW ON SOME POTENT DRAVYAS WHICH IS USED IN WOUND HEALING

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Abstract:

Healing of wounds whether from accidental injury or surgical intervention involves the activity of an intricate network of blood cells, tissue type cytokines and growth factor. The traditional Indian medicine – ayurveda describes various herbs, fat, oil and minerals with wound healing as well as rasayana properties. Wound healing can be defined as a complex dynamic process results in the restoration of anatomical continuity and function. Various phytoactive compounds and plants products have been used in treatment of wounds over the years. Wound healing herb extracts promotes blood clotting, fight infection, and accelerate the healing of wounds. Hence in current review, a list of the plants used in ayurveda for the treatment of wounds was screened.

Keywords: Wound healing, Dravya, Vranaropana.

AYURVEDIC MANAGEMENT OF ANKLE SPRAIN W.S.R. TO GULPHA MARMA ABHIGHATA

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Abstract:

Marma sthan is the vital point on which abhighata can lead to death. Among the detailed and broad classification of marma by Acharya Sushruta mention in "Sareerasthana". Ankles sprain is a common injury and usually results when the ankle is twisted or inverted. The term sprain signifies injury to the soft tissues & the ligament of the ankle. Ancient science to deal with the gulpha marma abhighata from of treatment believes that an ailment or injury occurs, when the delicate balance between "vata [energy of movement], pitta [energy of metabolism] & kapha [energy of forming body structure]". So, ayurvedic traditional medicine management to treat the gulpha marma abhighata will be elaborated in the presentation.

Keywords: Ankle sprains, Traditional Indian Medicine

POST TRAUMATIC STRESS DISORDER W.R.S TO SHOKAJADI UNMADA

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Abstract:

Post Traumatic Stress Disorder (PTSD) is a disorder that develops in some people who have experienced a shocking, scary or dangerous event. PTSD is a common response to traumatic events. Many people recover in the ensuing months, but in a significant sub groups the symptoms persists, often for years. 7.7 million Americans aged 18 and above have PTSD. 67% of people exposed to mass violence have been shown to develop PTSD, a higher rate than those exposed to natural disaster or other types of traumatic events.

Under this title I will describe a new approach to understand PTSD through ayurveda. PTSD has no direct reference in ayurvedic literature, but looking at the pattern of the disease it can be considered under manas vikara i.e shokajadi unmada. Unmada is caused due to mano-abhighat. The treatment protocol for PTSD as per Ayurveda is adravyabhut chikitsa.

Keywords: PTSD, Mano-abhighat, Shokajadi unmada, adravyabhut chikitsa.

MANAGEMENT OF CONGENITAL FACIAL PARALYSIS THROUGH AYURVEDA

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Abstract:

Congenital facial paralysis is cranialnerve paralysis that results from pressure over the facial nerve in utero, efforts during labor or forcep use during delivery. The incidence of facial paralysis in live births is 0.8-2.1 per 1000 births and of these 88% is associated with difficult labor. The Mobius syndrome is developmental cause of the CFP which is 1 out of 50000 births. The CFP is classified as traumatic or developmental, unilateral or bilateral and complete or incomplete.

The asymmetric faces, mouth deviated to the unaffected side, nasolabial fold is absent on affected side, corners of the mouth droops, the forehead does not wrinkles on the affected side are the presentations of the CFP.

According to Ayurveda it can be compared with Arditi roga, which is defined as the total loss of all voluntary movements on one or both side of face. Arditi mean vyakul or yachana as said by Amarkosha. It is disease caused due to the vata, which is controller of all body movements. Vata are main dosha in vata-vaha-nadi samsthana.

The vitiated vayu when gets lodged in in the head,nose,lips,chin,forehead and joints of the eye causes severe troublesome disturbance and causes deviation of face to one side. When the excessively vitiated vayu gets localized in one half of the head and face, it depletes the blood and hence causes contractures in the upper and lower limbs and knee joints.

Keywords: Arditiroga, Amarkosha, Facial palsy, Vyakul, Yachana.

ROLE OF VARIOUS BASTI YOGAS IN SPORTS INJURIES

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Abstract:

Sports injuries refer to the kinds of injury that occur during sports or exercise. While it is possible to injure any part of the body when playing sports, the term sports injuries is commonly used to refer to injuries of the musculoskeletal system. Some of the most common sports injuries include Sprains, Strains, Shin splints, Achilles tendonitis or rupture of the Achilles tendon, Fractures of the bones, Dislocation of joints. In Ayurveda we can correlate sports injury with Snayugat Vyadhi and Asthi Ashrit Vyadhi. Basti is main treatment for Asthi Ashrit Vyadhi as mentioned by Acharya Charaka. Basti is a Ardha Chikitsa as mentioned by Acharyas. Various Bastis like Kshira Basti, Vaitran Basti, Tikta Ghrita Kshira Basti, Matra Basti, Panch Prasutiki Basti, Yapan Basti, Mustadi Yapan Basti, Erandmuladi Basti, Madhu Tailik Basti have tremendous effects for Sadhya Balajanana (increase strength), Brimhanan (nourishment to Dhātu) properties increasing in muscle tone, muscular strength. It can also rejuvenate the new cell formation which is helpful in injuries. In out door sports like volleyball, football, cricket, tennis, golf, archery, cycling, gymnastics, athletics, wrestling there is essential to the person for good tone and power in muscles of upper and lower limb, as described in our texts Basti treatment gives power to Shakha means upper limb and lower limb. so Basti is a very useful for prevention in sports injury and if injury occurs than Basti is also very useful to it.

Keywords: Sport injuries, various Basti yoga, Panchkarma

A REVIEW STUDY FOR SINGLE AND SIMPLE FORMULATION USED IN ABHIGHATOPACHARA

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Abstract:

In Maharogadhyay of Sutrasthana, Acharya Charak has mentioned Agantuja vyadhi among four types of vyadhis. In this review, different treatments containing single drugs and simple remedies mentioned in different types and stages of Vrana were collected from Charak samhita, Sushruta samhita, Ashtanga samgraha, Ashtanga hriday, Chakradutta, Bhavprakash samhita, Yogaratnakar etc. Chikitsa Granthas. Acharyas have mentioned different treatments like Masurabeeja (Lens culinaris Medik.) for Vranapidanartha, Shatdhauta ghrita for Raktapittavran, Dhatakipushpa (Woodfordia fruticosa (L.) Kurz) for Vranaropana, Payah sharpi for Vedanayuktavran, Yavabeeja (Hordeum vulgare L.) churna for Daha shoola yukt Vrana Ropana, Sariva Moola

(Hemidesmus indicus (L.)R. Br.) for Vrana vishodhana, Saptaladala dugdha (Acacia concinna DC.) for Dushtavranalepana, Narikela Taila (Cocos nucifera L.) for Vrananashana, Panchamooli Kshira for Vranaparisechna. We found in our review study that the plants indicated as single and simple formulations used in Abhigatopachara were having mostly Vedna Sthapana and Shothahara properties with Ushna Veerya and Katurasa, whereas Vranaropana properties with Sheeta Veerya and Kashaya Rasa.

Keywords: Abhigata, Charaksamhita, Sushrutasamhita, Vrana.

ABHIGATOPACHARA IN KARNA ROGA

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Abstract:

Ayurveda is the most practical medicinal branch dealing with the nija as well as agantuja roga. Sushruta samhita is a samhita dealing the most with the agantuja roga. Shalakya tantra diseases are described in Sushruta samhita, Karna roga is one of them. Acharya Sushruta has described many Karnaroga like Karnashoola, Karnakshveda, Karnasrava, and Karnavidradhi with agantuja nidana or traumatic causes and also described Chikitsa for them. In Swastha charya- Dincharya also, there is a description of the procedures which may help to avoid the noise trauma. Nowadays where there is "so called" limitations in treating emergency condition with ayurveda, this can be a banchmark.

Keywords: Karnaroga, Agantuja NIdana, Chikitsa

MANAGEMENT OF TRAUMA (ABHIGAT JANYA VRAN) IN AYURVEDA W.S.R. TO SHADVIDH UPAKRAMAS

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Abstract:

In present era, so many advancements are discovered / explored in emergency condition like trauma by different Pathies (healthcare services). The motto of all therapy / procedure / management is to heal traumatic wound early, properly and without complication. Because of improper care general health and wound get vitiated by vata-pitta-kapha-rakta & leads to symptoms and complication which may convert into Dustavran & it can take long time to heal. As per Ayurvedic perspective treatment of wound healing should be followed the fundamental principle of treatment that is Nidan Parivarjan, Shadvidh Upakram (Dhatu Samya Kriya) and Chikitsa Sutra. In which Nidan parivarjan is withdrawal of causative / infectious factor, Shadvidh Upakram provide suitable (responsive and reversible) environment and the wound healing process/therapy and medicines are used under Chikitsa Sutra.

Aims & Objectives: To provide comprehensive review of the fundamental principle of treatment that is Nidan Parivarjan, Shadvidh Upakram and Chikitsa Sutra and to provide Shadvidh Upakram's probable mode of actions and efficacy in wound healing.

Materials and Methods: A thorough search was made with the help of Ayurved Samhita and their commentaries.

Conclusion: In Trauma (External Injury) firstly vitiation of Rakta Dhatu and Pitta takes place then vitiation of Kapha and Vata occurs, which leads to local Dhatu Vidahitvat and formation of Puya (Pus). Management of Trauma Wound (Abhigat Janya Vran) by Langhan and Rukshan Upakram(In form of Diet/Drug/Procedure/Management) which stops the further vitiation and boost the healing process. Detail discussion will be presented in oral presentation.

Keywords: Abhigata, Vrana, Wound healing.

AN AYURVEDIC APPROACH TO MOUNTAINEERING AND ITS RELATED INJURIES

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Abstract:

Mountain climbing is a popular recreational activity with a growing number of participants worldwide. While it is an activity with numerous intrinsic challenges and rewards, it also carries inherent risks. There are much more chances of being injured during

climbing. Injury sites and severity differs from person to person. Most of the time, injuries in sports climbing are over strained injuries of the upper extremities. The majority of mountain climbing injuries are minor to moderate; however some casualties have life threatening medical problems, which may have long term implication to return to general well being.

In the modern era, there are numerous medical treatments for those who are injured or ill. But the treatment doesn't offer much help to the climber having the effects of the trauma on his mind or the deeper levels of the body. In Ayurvedic view, a person who has narrowly escaped death, been injured or suffered an emotional shock; will have a disturbed body, mind and soul. The Ayurvedic remedies like, Nigundipatra pindasweda or ShashtikaShali pindasweda or Pizhichil, Shirodhara, etc not only restores the climber's body, it strengthens the spirit and wards away negative forces and brings peace to the depressed and anxious mind.

This presentation will summarize the spectrum of injuries during wilderness sports, especially mountain climbing and it's modern as well as Ayurvedic treatment.

Keywords: Mountain climbing, Pizhichil, Shirodhara, Wilderness sport

REHABILITATIVE POTENTIAL OF AYURVEDA FOR NEUROLOGICAL DEFICITS CAUSED BY TRAUMATIC HEAD INJURY

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Abstract:

Head Injury is associated with worst outcomes and requires a prolonged rehabilitation. Ayurvedic indigenous methods of rehabilitation are often utilized to treat such conditions. A case of Head Injury was followed up for 6 months upon an Ayurvedic composite intervention and subsequently reported. The composite treatment plan involved Ayurvedic oral medications as well as a few selected external and internal pancha karma procedures. A substantial clinical and patient centered outcome improvement in existing neurological deficits and quality of life was observed after 6 months of the Ayurvedic treatment given to this case.

Keywords: Practice-based evidence, patient centered outcome, quadriplegia, rehabilitation, Head injury

REHABILITATION IN TRAUMA W.S.R TO ADRAVYBHUTA CHIKITSA

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Abstract:

Trauma is either an injury or mental stress or emotional stress. Trauma is a foremost cause of disability and death. After a severe injury, illness or surgery, patient may recuperate slowly. Patient may need to recover their strength, relearn skills or find new ways of doing things patient did before. This progression is rehabilitation.

Rehabilitation focuses on Physical therapy, Occupational therapy, Speech-language therapy and psychological counselling. In Ayurvedic literature, Acharya Sushruta mentioned detailed description regarding rehabilitation of trauma patient in sutrasthana namely Vranitopasaniya Adhyaya. After following the regimen, the rehabilitation process occurs early and without any complications.

Keywords: Trauma, rehabilitation, Vraniticharya, Shushrut Samhita, Aadravyabhuta Chikitsa.

AYURVEDIC MANAGEMENT OF TRAUMA DUE TO COMMON GYNAECOLOGICAL PROCEDURE

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Abstract:

A female is not only the beautiful but also one of the most important creations of God. Owing to the ability to reproduce, the female body is blessed with a unique reproductive sex organ- the Uterus. The minor surgeries or procedures carried out for certain abnormalities comprehend a broad range of procedures with goals right from diagnosis to treatment. The complexity of the pelvis

leads to easy trauma during conduction of the procedures. Due to the proximity of uterus and ovaries to other pelvic structures the extent of complications due to the trauma, vary from haemorrhage to infection to visceral damage. Most commonly used gynaecological procedures and surgeries are dilatation & curettage, cervical biopsy, etc. Ayurveda considers 'Garbhashaya' as the 'Ashtama ashaya' which is subjective to the stree sharira. Ayurveda has also described various stages and phases in the life of a stree and the regimen which is to be suitably followed. This paper aims to highlight the principles of ayurveda which may be beneficial in counter acting the complications of the commonly used gynaecological procedures. The sthanik karmas described in ayurvedic classics will not only help in healing but also additionally render a healing in-vitro environment.

Keywords: Gynaecological procedures, complications, Ayurved, Sthanik Karmas.

CONCEPT & MANAGEMENT OF TRAUMA IN AYURVEDA

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Abstract:

In Medical world there are two kinds of trauma, like physical trauma & mental trauma. In case of trauma, there are solutions in Ayurveda Applicable to the problems on permanent basis without side effects. There are various methods to deal with physical trauma & mental trauma.

Physical Trauma: Below mentioned solutions can be utilised-

- In physical trauma for anaesthetical purposes. Belladonna can be used. Then after operation can be executed.
- In case of injury, if dressing is required 'trifala' can be used as antiseptic.
- In case of banded required, healing oils & malum can be used.
- In case of injury & wounds botanical produces, Leaves, Stem, Skin, Bark & Seed (Panchang) can be used.

Mental Trauma: Ayurveda considers the whole body mind & spirit – while dealing with maintenance of health & treatment.

Ancient Ayurvedic system has developed traditionally Rasayan drugs & the treatment is known as Rasayan Chikitsa, this group of plants possess strong antioxidant activity. Only few investigated in detailed. Over about hundred disorders like Rheumatoid arthritis, Hemorrhagic shock, CVS disorders, Cystic fibrosis, Metabolic disorders etc. In these diseases, Rasayan plants with great potential antioxidant activity have been reviewed for their traditional uses and mechanism of antioxidant action. Fifteen plants have been dealt with in detail.

Keywords: Ayurvedic Medicine, Botanicals, Herbs Treatment.

FETAL BIRTH INJURIES

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Abstract:

Birth injury is defined as the structural destruction or functional deterioration of the neonate's body due to a traumatic event at birth. Birth injuries are mechanical traumas which occurs during the process of labor and delivery. A traumatic delivery is more likely when the mother has small pelvic measurements, when the infant seems large for gestational age (often the case with diabetic mothers), or when there is a breech or other abnormal presentation, especially in a primipara. The reported incidence of birth injuries is about 2 and 1.1 percent in singleton vaginal deliveries of foetus in a cephalic position and in caesarean deliveries, respectively. If foetal distress is detected, the mother should be positioned on her side and given O₂. If foetal distress persists, an immediate caesarean delivery should be done. Now a day birth injury and neonatal care injuries have to be considered as significant cause of neonatal morbidity and mortality. So prevention of these types of injuries we should take proper history like PV Leaking fetal Heart rate, with maternal illness, general examination before delivery and radiological investigation. Finally, counselling with parents and relatives should be carried out for situation of baby and related disorders.

Keywords: Birth injuries, Incidence, Prevalence

MANAGEMENT OF BURN INJURY THROUGH AYURVEDA W.S.R TO "AGNI DAGDHA VRANA"

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Abstract:

Burns are an important cause of injury faced by us in our day to day life. Burn is a skin injury caused by flames, heat, sun rays, electrical energy, laser, chemicals, radiation etc. These burns leave burn scars making a temporary or permanent spot on the skin which affects one's mental and physical health status. The estimated annual burn incidences in India is approximately 6-7 million per year, which is the second largest group of injuries after road accidents. The world health organisation says that nearly 1.95 lakh deaths every year are caused by burns. Studies revealed that 80 to 85 % burn cases are accidental and children below five years and females are the usual victims. Among all traumas, burn cases have highest duration of hospital bed occupancy. Cost of hospitalized burn injury case management is extremely high which may cause enormous financial burden. That is where Ayurveda has an answer. By far the most common organ affected by the burn injury is skin. Acharya Sushruta has explained briefly about Agni Dagdha Vrana as well as many herbal drugs for the management of Agni Dagdha (burn). Treatment of burn is highly dependent on degree of burns and Ayurveda provides a range of remedies for first and second degree burns. Comparing to the allopathic burn treatment Ayurvedic medicines are cheaper, effective and make no side effects.

Keywords: Burn, Agni dagdha Vrana, Ayurved

NEONATAL TRAUMA DUE TO INSTRUMENTAL DELIVERY AND ITS MANAGEMENT

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Abstract:

Background: Operative vaginal delivery has been maligned since the days of W. J. Little with the word "Forceps". "Birth Injury" and "Cerebral palsy" as sequel is quite common with instrumental vaginal deliveries. In most of instances it is applied in a long, obstructed labor performed for maternal benefits and to avoid destructive procedures to the fetus.

Aims and objectives: To highlight the neonatal trauma as a complication of forceps vaginal delivery and its complications.

Methods: Different reference and classical text books of neonatology and pediatrics have been thoroughly reviewed and studied. References were compiled from the same.

Discussions: In most of clinical emergencies forceps and vacuum delivery are preferred over caesarean section as there is scarcity of facilities. Head injury and birth asphyxia is the common and lethal among all the birth injury. Management includes extensive NICU management of asphyxia and ischemia

Conclusions: As Instrumental Vaginal Delivery is procedure, easily available and accessible everywhere especially in low resource country like India where the need is high and caesarean section as alternative is not always available. But neonatal trauma especially birth asphyxia is more lethal outcome of the same and therefore should be managed in with extensive NICU protocol guidelines, details of which will be furnished in full text.

Keywords: Instrument delivery, Neonatal Trauma, NICU

ROLE OF YOGA IN TRAUMATIC STRESS

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Abstract:

Introduction: The majority of people will be exposed to traumatic stress at some point during their lives, and many will go on to experience a range of negative after effects as a result of this exposure. Trauma has a potential to negatively alter individual's internal bodily and affective sensation and reaction, cognitive schemes and their ability to have meaningful relationship with others, and associated with range of psychiatric and physical health problems. Regardless of the severity of specific presentation of problem it is important to recognize that trauma impacts the whole person – body, mind and spirit. Yoga is one intervention that appears promising for the improving arousal tolerance and regulation, connecting with the body in a positive way, and helping individuals stay oriented in their present moment experience.

Aim and Objective: To study the role of yoga in traumatic stress.

Material and Method: Swasthavritta Text Books, Articles, Journals of Clinical Psychiatry.

Conclusion and Discussion: Yoga has a major role to play in curing traumatic stress. Individuals with mental health problems are increasingly turned to yoga as a mean to cope and heal. Yoga is highly accessible and relative low cost.

Keywords: Yoga, Traumatic Stress, Mind.

BASTI NETRA ABHIGHATA AND ITS MANAGEMENT

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Abstract:

Any kind of injury like cut, abrasions, bleeding etc. is generally known as trauma conditions. It can be of two types, Physical trauma and mental trauma. Basti is very famous and wellknown Panchkarma treatment through which many diseases are treated with high percentage of successive results. Basti Netra is a main tool for administration of Basti Dravya. If Basti is not administered properly or if the Basti Netra is having diformities like tanu Netra, Sthula Netra, Jirna Netra, Vakra Netra etc then it may causes the complications like kshobh, Karshana, Kshanana etc. It is very essential to treat such comlications. For that, usage of mediated Grita application, Avagaha, Seka, Pichu etc are good choice of treatments.

Keywords: Basti Netra, Abhighata, Avagaha, Seka, Pichu.

A STUDY ON THE EFFICACY OF GUGGULU ALONG WITH HARIDRA AND RASNA-DASHMOOLADIKASHAYA AND SIRAVYADHA IN KROSTUKASIRSA W.S.R. TO NON- SPECIFIC KNEE EFFUSION

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Abstract:

Non-Specific knee effusion is a disease secondary to degenerative changes /excessive body weight / excessive wear and tear / trivial or evident trauma to the knee joint or other conditions associated with Non-specific knee athropathies. The condition can be defined as the abnormal accumulation of the fluid in the knee capsule or the adjoining supra-patellar bursa secondary to the irritation/inflammation of sub-acute strength in the joint synovium. This condition could be correlated with the Janu Sandhi Shleshmadhara Kala Shoth. This condition is usually found to be associated with the diseases like Amavatta, Vatrakta, SandhigataVata, Krostukasirsaand other related arthropathies explained in Ayurveda. Krostukasirsaas described in Ayurveda, can be correlated with Non specific knee effusion. Currently available conservative treatment modes for Non-specific knee effusion are mainly restricted to non-steroidal anti-inflammatory drugswhich exhibit numerous side effects and are only temporarily effective. A series of clinical studies had been planned to evaluate anti-inflammatory effect of various formulations viz. Commiphora wightii and Boswellia serrate individually along with Curcumalonga, Guggulu and Sallaki along with Haridra and Guduchi Kashaya, Brhatsimhanada Guggulu, Godanti, Rasamanikya with Maharasnadi. Taking the leads from previous studies and following the references of Chakradutta and Sushruta for Rasna-Dashmooladi Kashaya and Siravydha respectively a study has been planned to assess the efficacy of Guggulu along with Haridra and Rasna-Dashmooladikashaya and Siravyadha in Krostukasirsa w.s.r. to non-specific knee effusion to design some standard protocol.

Keywords: Krostukasirsa, Non-specific knee effusion, Commiphora wightii, Guduchi Kashaya

MANAGEMENT OF CHRONIC NON-HEALING WOUND BY JALAUKAVACHARAN

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Abstract:

A chronic wound is a wound that does not heal in a orderly set of stages & in a predictable amount of time or wound that do not heal within "three" month or often considered chronic. Chronic wound often remain in the inflamatory stage for too long & may never heal or take many years, chronic wound patients often report persistant pain as a main problem with chronic ulcer many wound pose no challenge to the body's innate ability to heal easily either because of the severity of the wound. In sushrut Samhita, sushruta described Dustavrana (chronic wounds), which is difficult to heal. Dusta is one in which there is localization of three Dosha. Vrana, which had a bad odour, has abnormal colour, with profuse discharge, intense pain & takes a long period to heal.

Keywords: Jalaukavacharan; Wound; Chronic; Healing.

EMERGENCY TRAUMA CARE IN SHALAKYA TANTRA THROUGH AYURVEDA

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Abstract:

It is believed that emergency treatment in Ayurveda is not present and in emergency one need to take only allopathic medicines, and Ayurveda has limited role to play in chronic ailments only. This belief in society and Ayurvedic physicians has arrested development of ayurveda, and limiting its role as adjuvant therapy. Ayurveda to become main line of medicine needs to have emergency management. The emergency management was described in Ayurveda, which needs only enlightenment. In this presentation an attempt has been made to understand Ayurvedic basics of emergency management in to Shalakyatantra. It includes understanding emergency condition according to ayurveda and management accordingly. It is important to note that mild to moderate emergency can very well be managed according to Ayurveda.

Keywords: Emergency care, trauma, Shalakyatantra

ROLE OF PANCHKARMA IN ABHIGATAJ JWARA

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Abstract:

“JWARA” is important and critical among all the diseases because it affects each and every living being. Hence it has been given first place in the classical text of Ayurveda. Mainly Jwara is of two types, Nija and Agantu. Among them Agantuj Jwara is of four types. 1) Abhigataj 2) Abhisangaj 3) Abhicharaj 4) Abhishapaj. Abhigataj Jwara caused by troma. Vitiated Vata causes Rakta Dusti which causes pain Odema, discoloration followed by Jwara. The treatment for Abhigataj Jwara is Ghritapan, Abhyanga, and Raktamokshna. Madyapan is also indicated for pain relief in Jwara Chikitsa for the patients who have Satmya to Madya.

Keywords: Abhigataj Jwara, Raktamokshna, Ghritapan, Madyapan.

ROLE OF MARMA CHIKITSA IN ABHIGATUPACHARA

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Abstract:

The Health of people reflects the social welfare parameters of any civilized area. It is the key component of social values and indications of concern for the welfare of the society. In thousands of years of the Indian history from Vedas to the present times, Indian society has proved that the Vedic system can develop and provide a truly humane and efficient health service. Pain is one of the most common features of variety of diseases and understanding of its nature and properties is important for its successful management. In Ayurvedic Medicinal therapy, this is only lacuna that is the immediate management of pain. Being an untouched method of pain management, more and more working hands are needed to spread the knowledge and benefit of this science. This article serves to throw light on the potentials of Marma therapy that can be used in the perspective of different physiological stages of pain to promote health.

Keywords: Pain, Marma Chikitsa, Trauma

GUDA MARMA AND ITS APPLIED ASPECT

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Abstract:

The word Marma (vital area) is described in the Hindu scripture Atharva Veda. The vital areas are prone to complications caused by injury than other parts of the body. With the advancement and progress of modern surgery and medicine, it has become an essential part of the duty of an Ayurveda anatomist to explore the pre-clinical and clinical value of these vital areas in the human body. Guda is defined as the passage through which excretion of faeces and flatus takes place. Acharya Sushruta has considered

Gudaas a Mansa Marma and Acharya Vagbhata has mentioned it as Dhamani Marma. One of the vulnerable spot "Guda Marma" which is Sadhyopranahara innature and measures four angula.

Blunt and penetrating injuries to the anus and rectum are uncommon. In adults direct trauma to the anus and rectum originates mostly from gun shots, road traffic accidents, autoeroticism or sexual abuse. Considerable debate remains regarding the optimal treatment of rectal injuries. Treatment often requires a multidisciplinary approach. No primary reconstructive surgery should be tried. After recovery of the patient dedicated functional testing to reconstructive measures which include sphincter reconstruction. With this concept mortality is low, but functional outcome is variable.

Keywords: Guda, Guda Marma, trauma

PRAMEH VRANA AND ITS AYURVED MANAGEMENT

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Abstract:

Constantly since the originated human being has been prone to injury which made him to think about healing from very early stage of development. Prameh Vranas are associated with increased mortality, illness and reduced quality of life. As far as management of Prameh Vrana is concerned, various treatment modalities are described in Ayurveda. Ayurveda described Prameh Vrana management like internal medicine, external and internal procedures. This presentation elaborates the various Ayurved modalities

Keywords: Prameh Vrana, Aushadhi, external procedures, Dincharya

NALAKASTHI ABIGHATYA BHAGNA MANAGEMENT THROUGH AYURVEDA.

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Abstract:

Femoral shaft fractures are severe injuries and are often associated with a high impact trauma mechanism which is frequently seen in multiple injured patients. In contrast an indirect trauma mechanism can lead to a complex femoral shaft fracture especially in elderly patients with minor bone stock quality. Hence, management of femoral shaft fractures through Ayurveda with special reference to Shushrut Bhagna Chikitsa shathna. Fracture is a linear deformation or discontinuity of bone produced by forces exceeding modular elasticity. Acharya mention the treatment of fracture as immobilization, reductions and rehabilitation which is yet practiced by modern orthopaedic surgeon. So ayurvedic traditional medicine promotes the union of nalakasthi bhagna.

Keywords: Femoral shaft fracture, Bhagna Chikitsa, Ayurvedic traditional medicine.

AN ANATOMICAL VIEW ON SPORTS INJURY WITH SPECIAL REFERENCE TO KURPARA MARMA

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Abstract:

Marma Vjyaniam is a dynamic part mentioned in Ayurvedic texts that has a tremendous value while performing surgery as well as panchakarma therapy. Marmas are certain vital points which are spread all over the surface of the human body. Kurpara is one of vaikalyakara marma injury to which leads to kunthatha i.e Functional deformity. An injury to kurpara marma causes dislocation, subluxation, sprain, leading to severe pain stiffness and functional deformity which may disturb the routine life of individual. Kurpara marma is located near elbow joint. In Sports person elbow joint is more prone for trauma due to overuse of elbow joints, as well as fall on the floor while diving. Injury to elbow joints leads to tennis elbow, golfers elbow.

Keywords: Kurpara Marma, tennis elbow, golfers elbow

AIRWAY MANAGEMENT AND RESUSCITATION

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Abstract:

Airway trauma is a life threatening condition which may be a result of blunt and penetrating trauma to the neck and chest. Airway (URT+LRT) injuries are the major causes of death in trauma. Maintenance of the patient and prevention of aspiration are essential for the management of the trauma patient. It involves ensuring that the patient has a patent airway through which the effective ventilation takes place, by different techniques as laryngoscopic vision, stellate tracheal intubation etc. Resuscitation is the technique of reviving someone from the unconsciousness. CPR is an emergency treatment used when heart and/or breathing stops. So, this paper is presented to tell the management of airway and Resuscitation from different techniques.

Keywords: Airway management, Trauma, Resuscitation, CPR

EFFECT OF AGNIKARMA IN MUSCULOSKELETAL INJURIES

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Abstract:

Agnikarma (Thermal therapy) is 2nd important anushashtra karma (para-surgical procedure) described by all acharyas. There are so many tools for agnikarma which used in ayurvedic surgical practice. Agnikarma can be useful in management of several types of musculoskeletal injuries. Nowadays use of NSAIDs, analgesics, steroid injection etc. are increased. Agnikarma is better alternative in sprain & pain caused by musculoskeletal injuries in human body.

According to acharya shushrut snayugata vata & sandhigata vata can be correlated with conditions of musculoskeletal injuries. Acharya Shushrut advised Agnikarma for disorders of snayu, Asthi, Sandhi etc.

This paper presentation focus on the mode of action & physio-anatomical aspect of Agnikarma in sprain & pain caused by musculoskeletal injuries. Highlighting the effect of this ayurvedic parasurgical procedure in day to day ayurvedic practice on opd basis will be helpful.

Keywords: Agnikarma, Musculoskeletal Injuries, Anushashtra Karma, Parasurgical

ROLE OF PANCHKARMA IN MAJJA VAHA STROTO DUSHTI

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Abstract:

In Ayurveda diagnosis of all diseases are based on the affected Srotas. There are 13 Moola Srotas in human body. Men have 13 and women have 15 groups of Srotas. The first three Srotas are governed by Vata, Pitta and Kapha. Seven groups of Srotas service each of the Seven Dhatus. Through these Srotas Dosha, Dhatu and Malla circulate. Among all the Srotas the Dushti of Majja Vaha Srotas is caused by Abhighata, causes Parvabheda, Bhrama, Moorcha intum affect the Bone marrow. To treat Majjavaha Srotas, best treatment is Marma Point Therapy. Basti over the lower back region will be beneficial.

Keywords: Srotas, Dosha, Dhatu, Malla, Parvabheda, Marma

MEDICO LEGAL ISSUES DURING TRAUMA CARE IN OPHTHALMOLOGY

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Abstract:

Medico legal case (MLC) has been defined as “a case of injury/illness where the attending doctor, after eliciting history and examining the patient, thinks that some investigation by law enforcement agencies is essential to establish and fix responsibility for the case in accordance with the law of the land.” Encountering such cases is not uncommon in ophthalmic practice. However, there is a dearth of literature on the data of MLCs in Ophthalmology.

MLCs represent an important aspect of clinical ophthalmological practice. The medico legal report forms the basis for the documentary medical evidence in court. It has to be structured, detailed, accurate, and unbiased. A proper medico legal report demands minute professional examination along with clear documentation. MLC may imply further litigation against the accused, insurance claims, medical negligence claims, and workers' compensation issues. The consequences have many facets including legal, social, and economic.

The author has tried to describe the pattern of ophthalmological medicolegal cases with emphasis on cases of the assault, and acquaint ophthalmologists with rules pertaining to expert testimony and medical reports.

Keywords: Medico legal, ophthalmology, documentation

MEDICOLEGAL ASPECTS OF TRAUMA

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Abstract:

An injury is any harm, whether illegally caused to any person in body, mind, reputation or property. Trauma is an injury inflicted by force on a living tissue. Forensic or legal medicine deals with the application of knowledge to aid in the administration of justice. In most of the cases filed in court of law, for medical negligence of treating doctor, are proven against him due to lack of specific consent of patient/ relatives to undergo treatment procedure.

In this presentation we will cover the topics like consent, types of injuries and their medicolegal aspects.

Keywords: Trauma, medicolegal aspects

CONCEPT & MANAGEMENT OF TRAUMA IN AYURVEDA

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Abstract:

In Suhruta Samhita, Sutrasthan, adhyaye 1, Acharya Sushruta has mentioned Beejchatushka i.e. Purush, Vyadhi, Aushadh, Chikitsa. These are the four things of samagrachikitsa after which 124 chapters are mentioned. In these four things Acharya Sushruta has further classified vyadhi types-Agantuja, Shaareerika, Maanasa, Svabhaavika. So trauma can be co-related with Agantuja Vyadhi. These injuries are caused due to sharp instruments, bamboo sticks, pashan etc.

In Charak Samhita, sutrasthan chapter 20, Acharya Charak has mentioned Agantujavyadhi's are caused due to the Bhuta – supernatural forces like deva, rakshasa (demons), yaksha, pishacha etc. Visha – varieties of poisons, poison may enter the body through oral consumption, touch (contact), bite and sting of poisonous insects and animals etc. Vaayu, Vidhyut, Samprahara, Nakhaaghata, Dantaaghata, Abhishaapa, Abhishanga, Bandhana

In Ashtang Hrudya, Sutrasthan, chap 4, Acharya Vagbhat has mentioned Agantujaroga due to bhutavesh, visha, vayu, burn due to fire, Kshata, Angabhighata, Bhanga etc. The description & causes of agantujavyadhi's are different acc to different acharyas, so the management is different which will be further explained in the presentation.

Keywords: Trauma in Ayurveda, Agantuja Vyadhi

MANAGEMENT OF STANYA VIDRADHI IN AYUREVDA

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Abstract:

A breast abscess is a painful infection brought on by bacteria. The type of bacteria that most frequently produces breast infection is *Staphylococcus aureus*. Bacteria can enter through a crack in the skin of the breast or on the nipple. The resulting infection, called mastitis, invades the fatty tissue of the breast, leading to swelling and pressure on the milk ducts. An abscess is a hollow space in the breast that becomes filled with pus from the infected milk ducts. A breast abscess can develop in the presence of severe mastitis.

In Ayurveda it is correlated with Stana Vidradhi. In *SusrutSamhitas*, *MadhavNidan* and *Bhavprakash* this disease with the name of *Stanavidradhi* is described. It is also described in *VagbhataSamhitas*. All the authors have mentioned that clinical feature of breast abscess are the same as described for external abscess. Except *Vagabhata*, others have mentioned that abscess due to rakta does not develop in breast. In *Ayurveda* there are lots of *Shaman Ausadhi* as well as the *SodhanChikitsa* have mentioned according to the types of *Stanyavidradhi*. It may be in the form of *Lepa*, *Kwath*, *Guggul* preparation, etc and in *Sodhana Chikitsa Raktmokshana* after *Swedan*.

Keywords: StanaVidradhi, Lepa, Kwath, Guggul, Shodhan, Shaman

GENERAL MANAGEMENT OF TRAUMA

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Abstract:

In this fast and rapid growing of life style, people have stress and heavy work load. Due to these conditions people suffer from trauma. Trauma means any injury caused to the body. The injury may be caused due to many reasons like Road Traffic Accident, fires burns, acts of violence etc. Among of all Road Traffic Accident is leading cause of trauma across the world. Particularly in India every minutes 16 die due to road traffic accidents. And 25% accidents are occurs with two wheelers motorcycle. Every year approx. 5 million people are die from injury across the world or particular in India 1 million people are die and 20 million people are hospitalized due to injuries. It is just because of highly increasing population and hurry work schedule, use of mobile phone during driving, drunken and drive, unconscious of mind. And for these situations our first aim is to get right patient to the right hospital in the right time. For good management of trauma we should take few steps like pre-hospital-triage (physiology, Anatomy, Mechanism of injury) and hospital management ATLS. Therefore prevention of all this injuries Government of India celebrated world trauma day on 17 October.

Keywords: Prevention, Road traffic accident, Trauma, Treatment

AYURVEDIC CARE OF TRAUMA OF FEMALE GENITALS

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Abstract:

The study of trauma has become important in medical practice. Although trauma associated with childbirth remains the most common cause of injury in the female genital tract injuries, traumas due to non-obstetrics origin are quite frequent. The pattern of injury largely depends on age, marital status, residential location, leisure and sports activity, sexual behavior and socio-economic status. Some of these injuries are unique and poses diagnostic and management challenges to the physician. Severe coital and other traumatic injuries of the genital tract do occur and sometime fatal. These injuries may cause various emergency condition which needs emergency management told in classical texts and sometimes needed help of allied sciences. In this paper we are explaining about causes of trauma of genitals and possible management according to Ayurveda and modern science. Two case studies will also be explained in which each patient is of different age group and cause of trauma is also different.

Keywords: Ayurveda, Trauma Care, Genitals, Management.

BHAGNA - GENERAL PRINCIPLES OF MANAGEMENT OF ASTHI BHAGNA IN SUSHRUT SAMHITA

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Abstract:

In Ayurveda, the term Abhighata means trauma. Because of Abhighata (Trauma) Fractures are most commonly found in today's life. Or we can say that the most common cause of Fracture is Abhighata. There are two types of Fractures or Bhagna described by Acharya Sushruta.

In the context of Asthi Bhagna (Fractures), Acharya Sushruta described in details the principles for the management of Asthi Bhagna. General principles of management of different kinds of Bhagnas like different types of Lepas, Drugs, Bandhas (splints), Sarpi, Taila etc.

Keywords: Asthi Bhagna, Fracture, Trauma Sushruta Samhita

AYURVEDIC MANAGEMENT IN NIJA DOSHABHIGATA DUE TO SMOKING W.S.R INTERMITTENT CLAUDICATION (TAO – THROMBOANGIITIS OBLITERANS)

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Abstract:

Thromboangiitis Obliterans, also known as Buerger Disease, is a recurring progressive Inflammation and Thrombosis (Clotting) of Small and Medium Arteries and Veins of the Hands and Feet. It is strongly associated with use of Tobacco Products, primarily from Smoking, but is also associated with Smokeless Tobacco. The main Symptom is Pain in the affected areas, at rest and while walking (Claudication). The Impaired Circulation increases Sensitivity to Cold. Peripheral Pulses are diminished or absent. There are Color changes in the Extremities. The Color may range from Cyanotic Blue to Reddish Blue. Skin becomes Thin and Shiny. Hair Growth is reduced. Ulcerations and Gangrene in the Extremities are common Complications, often resulting in the need for Amputation of the involved Extremity. In Ayurveda, it can be co-related with Vata Rakta. Vata Rakta has been explained in various Samhita's especially in Charak Samhita, Chikitsa Sthana, 29th Chapter, Vata Rakta Chikitsa has been explained beautifully by Charak Acharya. Looking forward towards the treatment aspect, Siravedhana (Venesection) can be carried out in case of Vata Rakta. This Abstract highlights some of the important aspects in the Management through Ayurveda.

Keywords: Thromboangiitis Obliterans, Buerger Disease, Vata Rakta, Peripheral Vascular Disease, Thrombosis, Claudication.

ROLE OF VEDANASTHAPANA MAHAKASHAY (DECOCTION), KATI BASTI AND YOGA MODALITIES IN THE MANAGEMENT OF ACUTE LUMBOSACRAL SPRAIN/STRAIN

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Abstract:

Low back pain is one of the most common musculoskeletal problems in modern society. The most common causes of low back pain are musculo-ligamentous sprains and strains, which occur mainly at the Lumbo-sacral region secondary to various injuries. Typical symptoms are pain and spasm range from sharp and stabbing to a dull ache are localized over the posterior lumbar spinal muscle bellies lateral to the spinous process or at the insertion of the muscle at the iliac crest. Aims of present clinical study are to scrutinize the available literature for related conditions in Ayurveda & Lumbosacral Sprain/strain in contemporary science and to study the efficacy of Vedanasthapana Mahakashay (Decoction), Kati Basti with Dashmool taila (PNF) passive/active stretching & Yoga modalities in the management of Lumbosacral Sprain/strain on clinical parameters and to establish the protocol.

Keywords: Lumbosacral Sprains and Strains, Vedana Sthapana, Kati Basti

ACUTE PAIN IN ABHIGHATA AND ITS UPACHARA

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Abstract:

Pain is one of the most common features of variety of diseases and understanding of its nature and properties is important for its successful management. In Ayurvedic Medicinal therapy, this is only a major lacuna, that is the ayurvedic immediate management of pain. Marma science and therapy has an answer to it and hence if we incorporate marma science in broad field of ayurvedic therapy, we can overcome this lacuna.

Therefore further development and expansion of such a viable Vedic medical system in terms of marma science is highly humane and widely accessible in all aspects for all. Forming a Bridge across time, people became involved in the fight against pain in the management of Abhigat Upchara with marma therapy

Keywords: Marma Chikitsa, Pain, Trauma

CONCEPT OF SKELETAL INJURIES AS PER AYURVEDA

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Abstract:

Concept of Bhagana (Trauma) in Ayurveda includes Sandhimukta (Subluxation/Dislocations & Associated soft tissue injuries) and Kandbhagana (Fractures). Concerning the Etiopathogenesis violence is attributed as the chief cause of Bhagana and in addition intake of poison and burns along with violence has also been mentioned as other factors leading to skeletal injuries. Asthimajjanugata Vidharadhi, Adhyasthi, Asthisunyata, Asthikshaya & Majjakshaya respectively may be considered similar to the category of pathological fractures. Concerning the symptomatology terms like Kshavathubahulyam (swelling), Spandan, Vivartan, Sparashasahishunatvam (pain to touch & movements), Avedyammaneshabad (crepitation) Srastangta (deformity), Vividhvednapradurbhav (pain of different kinds), Sarvasav avasthanashramlabh (discomfort in all positions), Prasaran-Akunchan-Vivartan-Akshepanashakti (restricted movements), Ugar-rujatvam (severe pain), Spars-asahisnutvam (tenderness) are very elaborately described. While talking of management principle, techniques concerning reduction, immobilization along with various formulations for local as well as internal usage have been described along with the stress given on fundamentals of rehabilitation. There is a potential sphere in Ayurveda concerning the research in various aspects regarding the betterment in the field of trauma management.

Keywords: Bhagana, sandhimukta, Kandbhagana, Reduction, Immobilization, Rehabilitation.

USE OF LEECH IN PAIN MANAGEMENT AND WOUND HEALING

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Abstract:

Leech is a hematophagous animal which has been known to possess biologically active compounds in their saliva. It has been used for therapeutic purpose since the beginning of the civilization. Ancient Indians used Leech for various purposes. Leech therapy has been practiced since thousands of years. According to Ayurveda, Leech only sucks impure blood. It is a method in which localized impure blood is removed out from the tissue which allows new blood circulation. Leech therapy is a Parasurgical treatment modality according to Ayurveda. Leech therapy is mentioned under Raktamokshana or blood letting. Our Acharyas have included this procedure under the five bio purification (Panchakarma) procedures. Studies have already shown the effect of Leech therapy in improving the blood circulation of the area by removing the impure blood which helps in pain management and wound healing. It also aids in relieving swelling and tenderness. In the 21st century, Leech therapy has established itself in plastic surgery and microsurgery as a protective tool. Many clinics for plastic surgery all over the world have started the use of Leech for cosmetic purposes. As it involves no surgical instrumentation and results in limited to no scarring, it serves the purpose of cosmetic procedures well. The paper aims at identifying the positive role Leech therapy can play in treating the diseases by pain management and wound healing.

Keywords: Leech, Pain Management, Wound Healing, Raktamokshana

MANAGEMENT OF TRAUMA IN SECOND STAGE OF LABOR

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Abstract:

Labor is a series of events taking place in the female genital organs in an effort to expel the viable products of conception through the vaginal passage. It comprises of three stages which include regular uterine contractions, cervical dilatation, effacement, fetal descent followed by expulsion of fetus and placenta. Out of these stages, the second stage of labor is exclusively concerned with descent and expulsion of the fetus owing to propulsive and refractory forces of the uterine and pelvic muscles. Traumatic injuries to the cervix or vaginal canal are commonly found in this stage, whereas uterine rupture is found in rare cases. Such injuries have a significant risk of maternal morbidity and mortality. It thus becomes crucial for an obstetrician to manage traumatic conditions by adapting principles of prevention, early detection and prompt as well as effective curative measures. The Ayurveda way of management has a yet wider scope including specific Garbhini Paricharya, Abhyantara Chikitsa, Vrana Chikitsa including Sthanika Chikitsa like Yoni Pichu, Yonidhoopana and Pathyapathya to fasten the rate of Vranaropan. This paper thus intends to discuss about line of management according to Modern medicine and to emphasize on potentiality of Ayurveda in management of traumatic conditions during the second stage of labor.

Key words: Second stage of labor, traumatic injuries, management, Sthanik Chikitsa.

ABHIGHATAJA OSTHAROGA

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Abstract:

Traumatic lip injuries present major challenges in terms of reconstructive options and the outcomes of surgical management. In modern terminology it's correlated with cheilitis i.e. inflammation of lips. It is general term and there are many recognized types and different causes. Cheilitis can be either acute or chronic. Most cheilitis is caused by exogenous factor such as dryness, human bite, dentures that don't fit well. Symptoms of cheilitis are like cracking of lips, painful inflammation, and bleeding, blistered, itchy and scaly lips. According to Sushruta Acharya it is treated with Raktmokshan (Su.chi.22/6) and according to Astanga Hridaya it is treated with Anjana (AH.Ut.22/6). Again Pittaja Vidhradi Chikitsa should be administered as an acute management of Abhigatajaoshtaroga. This Study elaborates Ayurvedic management of Abhigataja Oshtaroga.

Keywords: Abhigataja Oshtaroga, Cheilitis, Pittaja Vidhradi.

MARMA CHIKITSA – A REJUVINATIVE THERAPY IN POST TRAUMATIC CARE

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Abstract:

Marma are the pivot of vital forces which holds the Prana in it; confining whole body to an axis of multidimensional field. Acharya Sushruta has considered it as site of Tridosha element & has enumerated strongly about Marma Abhigata (assault of vital points), as these withhold Soma, Vayu, Manoguna's & Atma. Anatomically, these are juncture points of Mamsa (muscle), Snayu (tendon), Sira (blood vessels), Asthi (bone) & Sandhi (joints). So, any injury to these points may lead to severe Disability, Deformity & Death. According to the classification of 107 Marmaas stated by Acharya's, only Vaikalyakara & Rujakara Marmas are considerable for Chikitsa. Marma Chikitsa is a traditional therapy for the management of vital points by the means of Abhyanga (massage) & Mardana (acupressure) etc. It is much related to musculoskeletal & nervous systemic disorders. It dwells the process of rejuvenation & strengthening of every Dooshikara Dhatu due to Abhigata of Marma & helps to achieve an ideal health with longevity. This study is an endeavour to analyse the different aspects of Marma Chikitsa especially for Vaikalyakara & Rujakara Marma and deprivation of 3 D's as Abhigatopachara.

Keywords: Abhigata, Marma Chikitsa, Prana, Rejuvenation

APPLICATION OF MANJISTHADI LEPA AND LAKSHA GUGGULU IN SPORTS INJURIES

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Abstract:

Acharya Sushruta has explained very clearly about the diagnosis and management of Bhagna (Fracture), stating the basic principles involved in its healing. In the context of Bhagna, Chikitsasthana of Sushruta Samhita, the entire protocol for management of different kinds of fracture is elaborated. With the rise of sports buzz, in the same proportion propensity for injuries is inclining especially in the areas of Rujakara Marma Pradesha. When we consult the Ayurvedic Vaidyas definitely do not find direct references regarding a speciality called sports medicine (or) Krida Ayurveda and there is no readymade management of sports related ailments. The combined effect of Manjisthadi Lepa with Laksha Guggulu will be essential in the management of Rujakara Marma Kshata Lakshanas (Sports injuries). In Ayurveda application of Lepa and Guggulu formulations is effective in early bone healing. The current study is done to justify the application of Manjisthadi Lepa & intake of Laksha Guggulu in bone healing process with regards to its properties. It is effective in all kinds of symptoms related to sports injuries like pain, swelling, tenderness and loss of function. This ancient method of management is safe, easily available; less complicated and has better acceptability.

Keywords: Bhagna, Laksha Guggulu, Manjisthadi Lepa, Rujakara Marma

BIRD EYE VIEW ON CISSUS QUADRANGULARIS IN FRACTURE MANAGEMENT

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Abstract:

Since ancient ages plants have served human being as natural source of a treatment and therapies, amongst them medicinal herbs have gained attention because of its wide use and less side effects. In current scenario focus on plant research has increased throughout the world and huge amount of evidences have been collected to show immense potential of medicinal plants used in various traditional systems. Major trauma (Abhighata) is any injury that has the potential to cause prolonged disability or death. There are many causes of major trauma, blunt, bone fracture and penetrating, including falls depending on the severity of injury. Fractures are normally managed with reduction, retention and rehabilitation for the proper union. It takes three weeks for a fracture to heal. In Ayurvedic medical science, there are many herbs that accelerate the fracture healing and make the patient independent. Cissus quadrangularis also known as Asthi Shrunkala is one of each effective herb that has been experimented and proved to be effective through research studies. With the intention of creating awareness of this herb so that this can be used clinically. A clinical study on patients with various types of fractures were treated in study group and thus Cissus quadrangularis build up the chemical composition of the fractured bone namely its mucopolysaccharides, collagen, calcium, phosphorus and other as well as its functional efficiency. Cissus quadrangularis is good bone fracture healing activity, analgesic activity, anti-osteoporotic activity and anti-inflammatory activity.

Keywords: Cissus quadrangularis, phytochemical constituents, pharmacological activities.

ROLE OF RAKTAMOKSHANA IN ABHIGHATAJ VATARAKTA

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Abstract:

Vatarakta is disease of Locomotor system. It can be compared with gout and other crystal arthropathies, characterized by recurrent attack of acute inflammatory arthritis a red, tender, hot, swollen joints with elevated level of uric acid. According to Ayurveda vitiated Vata and Rakta plays important role in development of Vatarakta generally. In any Abhighataj condition also there is Vata and Raktadushti. Raktamokshana (Siravedhan) is one of the best emergency line of treatment described in Abhighataj Vatarakta by Acharyas. The reason behind it is it removes impure blood from affected area and removes Avarana of Vata. Here Role of Raktamokshana in Abhighataj Vatarakta will be explained.

Keywords: Abhighataj Vatarakta, Raktamokshana, Vata, Rakta.

HEMIPLEGIA AND ITS MANAGEMENT THROUGH PANCHKARMA

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Abstract:

Hemiplegia is paralysis of either the left or right side of the body with loss of function. It is also associated with poor balance, speech deficit and loss of function which results from any injury to motor centers of the brain either due to ischemia or haemorrhage. Ayurveda it can be clinically compared with Pakshaghata due to much resemblance in their clinical symptoms. The Treatment of Hemiplegia is focused on improving sensation, motor abilities allowing the patients to better manage their activities of daily living. In acute stage the patient can be managed by allopathic medical science, but there are no much treatment modalities to treat the residual spasticity of a chronic patient of Hemiplegia. Hence it is the need of time to find out more effective and safe treatment for Hemiplegia (Pakshaghata). Ayurveda play an important role in such situation. As per Ayurveda classics, Acharya has described the involvement of vitiated Vata Dosha in pathogenesis of Pakshawadha, so Snehana, Swedan, Mridu Virechana, Basti etc. are considered the best way to treat a patient of Hemiplegia. In addition Samana Yogas are also very beneficial for promotion and preservation of health. In this present paper Ayurvedic approach in the management of Hemiplegia is discussed in a scientific way.

Keywords: Panchakarma, Hemiplagia

ROLE OF HONEY IN THE MANAGEMENT OF DUSTA VRANA

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Abstract:

Honey or madhuis indicated for Vranaropanaie wound healing by the great Acharya Sushrut. Dressing wounds with honey was standard practice in past times but went out of fashion when antibiotics came into use. There has been a renaissance in its usage now that antibiotic- resistant bacteria have become a widespread clinical problem. Many studies have shown that honey is a very effective broad spectrum anti-bacterial agent with no adverse effects on wound tissue. Apart from the qualities mentioned by Acharya Sushrut, according to modern studies besides having an anti-bacterial action, honey has several other activities that are beneficial to the wound healing process. It gives rapid autolytic debridement and deodorizing of wounds and stimulates the growth of wound tissue and hastening healing and starting of healing process in dormant wounds. Its anti-inflammatory activity rapidly reduces pain, edema, and exudate and minimizes hypertrophic scarring. It also provides a moist healing environment for wound tissues with no risk of maceration of adjacent surrounding skin and completely prevents adherence of dressing to the wound bed so that there is no pain and no tissue damage when dressings are changed. Thus honey has tremendous role to play in the management of simple as well as infected wounds.

Keywords: Wound, Dressing, Honey, Ayurveda.

EFFECT OF INTRAOCULAR PENETRATION OF "TRIPHALA GHRITA" ON DIGITAL EYE STRAIN CAUSED BY BLUE LIGHT

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Abstract:

Computer, the knowledge bank of modern life, has emerged as a profession causing vision-related discomfort, ocular fatigue, double vision, blurred vision and systemic effects. Digital Eye Strain is the new nomenclature to the visual, ocular, and systemic symptoms arising due to the exposure to Blue light for long time and improper working on the computer and is emerging as a pandemic in the 21st century. Our Acharyas have described many causative factors for eye disorder which include "Sukshmanirikshnat", "Abhigatat", "Swapnaviparyayach". Though this disease is gift of modern life style; the Samanya Chikitsa for Netravikara given by Acharyas work very effectively on the symptoms. This study includes pathophysiology of effect of blue light on eyes according to Ayurveda and effect of intraocular penetration of Triphala Ghrita.

Key words: Digital eye strain, Triphala Ghrita.

THE ACTION OF WOODFORDIAFRUTICOSA IN TRAUMATIC WOUND HEALING

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Abstract:

The antibacterial activity of the herbal medicine represents one of the most important fields of traditional medicine all over the world. Recently, multiple drug resistance has developed due to indiscriminate use of commercial antimicrobial drugs commonly used in the treatment of infectious disease making it global growing problem. Isolation of microbial agents susceptible to regular antibiotics and recovery increasing resistance isolates during antimicrobial therapy is rising throughout the world which highlights the need for new principles. Natural products of higher plants may give new sources of antimicrobial agents with possibly novel mechanism of action. Contrary to the synthetic drugs, antimicrobial of plant origin are not associated with many side effects and have enormous therapeutic potential to heal infectious disease. For example: The *Woodfordiafruticosa* against an array of human pathogens. The crude menthol extract of the flower of *Woodfordiafruticosa* was evaluated for the potential antibacterial property. The dried flowers are powdered and sprinkled over ulcers and wounds diminish discharge and promote granulation.

Keywords: *Woodfordiafruticosa*, Antimicrobial, Synthetic Drugs, Pathogens.

MODE OF ACTION OF MURIVENNA TAILAM IN THE MANAGEMENT OF SOFT TISSUE INJURY

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Abstract:

A Soft tissue injury (STI) is the damage of muscles, ligaments and tendons throughout the body due to sprain, strain or blow resulting in a contusion or overuse of a particular part of the body. Soft tissue injuries can result in pain, swelling, bruising and loss of function. Early management of Soft Tissue Injury is described in Ayurveda classics and provides better functional restoration. Murivenna oil is traditionally practiced in trauma by Ayurvedic Physicians. Local application of Murivenna and resting the affected part is to be followed during the course of management. It has a very good healing property and will give a good result in condition of soft tissue injury and also reduces swelling and inflammation of affected parts. It has anti-inflammatory and analgesic property. The active principles in Murivenna provide Synergistic action in relieving the symptoms of Soft tissue injuries. The concepts are not discrete in Ayurveda, but understanding, updating and interpreting them is the need of the hour. Sensible diagnosis and apt treatment plan gives an answer to soft tissue injuries through Ayurveda.

Keywords: Murivenna Taila, Soft tissue injury.

ROLE OF RASAUSHADHIES IN MANAGEMENT OF VRANA

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Abstract:

Rasashastra (Science of Mercury) is study of science which deals with process of purifying and combining the herb with various metals, minerals, gemstones and other substances including mercury to treat illness. Rasaushadhis are acknowledged in Ayurveda for its low dose, good palatability and quick action. Rasaushadhis also known for Jantugna and Krimigna activity. Rasayana effects of metallic Bhasmas have potential to rejuvenate the diseased cell. Bhasmas are also called Nanomedicine. Most of these mineral drugs are converted into nano particles having smaller size and high surface area through process of Sodhana and Marana process. Acharya Sushruta has mentioned various types of Vrana & its management. Acharya has also given in depth and beautiful description of wound and wound healing. For good healing the drug must have properties like Sodhana and Ropana. Bhasmas like Yashada bhasma, Tamra bhasma etc. mainly associated with Jantugna and Krimigna activities are used for wound cleaning (Vrana Sodhana) and wound healing (Vrana Ropana).

Keywords: Rasashastra, Rasaushadhis, Bhasma, Vrana Sadhana and Vrana Ropana.

ETIOLOGY OF TRAUMA AN AYURVEDA VIEW

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Abstract:

Introduction: In ancient Ayurveda text, Acharyas mentioned description of trauma as a Varna and Shoth. There are two types of etiology (Nija & Aagantuja / Abhighataja) which leads to Samprapti (Pathologogenesis) & Sadhya Asadhyatva (Prognosis) of all types of Varna and Shoth. Trauma is a nidana which disturbs a samvayata (Normal physiology and Anatomy) of the sharir (body). Traumatic agent like knife, guns, micro-organism, indigested-food (Aam) which disturbs a normal body functions. In modern Science, Trauma is an injury to living tissue caused by an extrinsic agent. Trauma most often refers to Physical trauma & Psychological trauma. Physical injury caused by an external source & Psychological trauma, a type of damage to the psyche that occurs as a result of severely distressing events. Hence, aetiology (Nija & Aagantuka) & Prognosis (Sadhya Asadhyatva) of Trauma (Vrana & Shotha) will be highlighted in full paper.

Aims and Objects: To understand etiology of trauma as Ayurveda view.

Materials and Methods: Charak Samhita, Sushrut Samhita & Astang Hridaya

Keywords: Trauma, Nidana (Nija & Aagantuka), Body response, Prognosis.

WOUND CARE – AN AYURVEDIC PERSPECTIVE

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Abstract:

Wound Care is a major health care concern that affects many individuals with different types of wounds and consumes vast resources. Wounds have varying effects on the quality of life of those affected, their families and caregivers. Providing skin and wound care is a major common consideration in the day to day caring of patients with wounds whether in acute, long term or community based environment. For the past two decades, many changes have occurred in the art of science on how wounds are managed. There has been great advancement in wound technology, research and development of sound policies and standards of care based on research and clinical evidence to achieve positive outcomes in wound healing.

A useful step in this regard is the use of traditional medicinal remedies and plants. The World Health Organization (WHO) also supports, promotes, and encourages the use of various traditional medicines in primary health care due to easy accessibility, cost efficiency, safety, and trust of the public in them. Since many centuries, Ayurvedic medicines have been used by people due to its ability to enhance immunity and prevent diseases. Acharya Susrutha, regarded as father of surgery, has mentioned in Susrutha Samhita, especially about care for wound and its treatment for different stages of the wound. At the moment, scientific research on medicinal plants is performed most intensely in research institutes, universities, and pharmaceutical laboratories as well as in the clinics of various developed countries.

Keywords: Ayurveda, Wound care, Traditional medicine.

THE INITIAL APPROACH TO PATIENTS WITH MODERATE TO SEVERE TRAUMATIC BRAIN INJURY

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Abstract:

Traumatic Brain Injury (TBI) is a significant source of Morbidity and Mortality in the adult population. The management of traumatic brain injury depends on its severity that Glasgow Coma Score (GCS) of 9-12 is moderate TBI, and GCS of 3-8 is severe TBI. Management is based on avoidance of secondary injury, maintenance of cerebral perfusion pressure, and optimization of cerebral oxygenation. Evidence-based guidelines and management protocols help to guide target-driven care and are associated with better outcome. Multimodality monitoring of the injured brain enables individualized therapeutic targets to be set to optimize patient management. Patients with moderate or severe brain injury should be managed in a specialist neurosurgical centre.

Keywords: Brain Injury and Trauma.

PARIHARYA GARBHASRAVA (THREATENED ABORTION) & IT'S MANAGEMENT BY AYURVEDIC PRINCIPLES

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Abstract:

Pregnancy is a major life event. The purpose of pregnancy is to develop a healthy baby and keep the mother healthy. Threatened Abortion is a condition when bleeding per vagina and occasional abdominal pain occurs still it is less harmful to the product of conception. Bleeding per vaginam is usually slight and may be brownish or bright red in colour. If this condition is left untreated or neglected or if Garbhini keeps consumption of Nidana, it may lead to brisk bleeding per vagina followed by complete Abortion. Hence prevention and management is necessary at this stage. Ayurveda, the most ancient science of medicine has described regarding PariharyaGarbhasrava which can be correlate with Threatened Abortion. Acharya Susrutawhile mentioning Nidana of Garbhasrava says that due to Abhighata caused by Prapatana, Prapidana, Dhavana etc. Are responsible for Garbhasrava. We also have detailed description in classics about Chikitsa at different stages of Garbhasrava. In which Chikitsa of PariharyaGarbhasrava we can implement in Threatened abortion. Through this paper, we have tried to highlight the treatment principles in the management of Pariharya Garbhasrava.

Keywords: Pariharya Garbhasrava, Threatened Abortion, Abhighata, Trauma.

AYURVEDIC APPROACH IN THE MANAGEMENT OF TRAUMATIC INJURY WITH THE HELP OF WITHANIA SOMNIFERA

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Abstract:

Trauma is complex and cannot be entirely defined by events or by symptoms. In modern times, there are numerous medical treatments for those who are injured or ill, but the treatments don't offer much to help with the effects of trauma on the mind or the deeper levels of the body. In the Ayurvedic view, a person who has narrowly escaped death, been injured or suffered an emotional shock is disturbed in body, mind and spirit. Whenever anything unexpected happens, vata is provoked. When it is provoked, a person may feel "spacey" or restless and notice pain, anxious or depressed or experience chills, heart palpitations or constipation. Since Vata provocation and Majjagat vata (invasion of Vata into Majja Dhatu) are central to this condition, treatment approaches are likely to involve vata soothing diet and lifestyle interventions. Ayurveda traditions refer to Ashwagandha (Withania Somnifera) as an adaptogen. This category of medicine is specifically used to block stress and anxiety responses in the body, at the chemical level. Ashwagandha mainly used to lower levels of cortisol, the hormone responsible for the "fight or flight" reaction. Over 200 studies have shown Ashwagandha benefits in memory, immunity, insomnia, blood sugar stabilization, lowering cholesterol, increased libido as well as stress reduction. In terms of herbal therapies, Ashwagandha is always of use where there is vata in Majja Dhatu and is known to increase dopamine levels thus mitigating the over-activation of the amygdale. One of the key ideas behind adaptogens is that they should be consumed before any known environmental stress triggers are experienced. Various pre-clinical studies investigating the use of W. somnifera in modulation of neuroplasticity, anxiety, neuroinflammation and neuroprotection have been discussed in detail. A plethora of studies confirm the use of W. somnifera and its active phychemical alone or in combination as potential therapeutic agents. W. somnifera can be incorporated as an important dietary supplement for management of anxiety and associated cognitive and functional impairment. Use Ashwagandha to treat anxiety in daily doses, taking especially at bedtime.

Keywords: Withania somnifera, Active phytochemicals, combinatorial effect, Dietary supplement, Anxiety management.

A REVIEW STUDY ON PATHYAPATHYA INDICATED IN ABHIGHATOPACHARA

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Abstract:

Ever since the life originated, human being has susceptible to injury, which made him to think about healing from very early stage to development. Vranas are a frequently encountered problem in present era produced mainly due to trauma and may cause long term agony to patient. The importance of Pathya and Apathya in Ayurveda can be deduced from the fact that Charakacharya had stated pathya as a synonym for treatment in Abhayamalakiya adhyaya. Vaidya Lolimbajra indicated the importance of Pathya aahara by stating that if a patient intakes wholesome food then there is no need of medicine and if a patient continuously

consumes unwholesome food then also there is no need of medicine, because in latter case medicine will not be effective. In this review, Pathyapathya in Vrana caused by Abhighata were collected from Charak samhita, Sushruta samhita, Ashtanga samgraha, Ashtanga hridaya, Yoga ratnakara, Bhaisajya ratnavali, different Chikitsa granthas and Nighantus. So, according to different Acharyas mainly Natishita, Nati guru, Nati snigdha, Avidahi, Jima shaliodana, Jangala mamsa, Tanduliya, Jivanti, Dadima, Amalaki, Saindhava, Mudga rasa, Sruta shita jala were included in pathya ahara where as mainly Shukla vastra, Dhoopa, Homa were included in Pathya vihara. New dhanya, Masha, Tila, Kalaya, Sushka shaka, Vallu, Aja mamsa etc. were included in Apathya ahara. Diva svapna, Maithuna, Aayasa, Jagarana etc. were included in Apathya vihara. So, we can conclude that Aahara having Lavana-amlakatu rasa, Ushna virya, Guru guna and Rakta-mansa pradoshak properties whereas Vihara which aggravate Vata are contraindicated. Snigdha, Alpa ushna, Tridosahara aahara and Vatashamaka vihara are indicated.

Keywords: Abhighata, Apathya, Pathaya, Vrana.

ROLE OF RASAYANA IN THE MANAGEMENT OF TRAUMATIC BRAIN INJURY

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Abstract:

Traumatic brain injury is an impact injury of the brain in which there is diffuse damage to the brain cells causing severe deficit which can be physical, cognitive, behavioural as well as emotional. The management of such individuals constitutes a medical crisis as well as a long-term challenge, since the brain damage affects the entire body, and healing and recovery is very rare. Traumatic brain injury (TBI) is one of the leading causes of death and disability in the world, especially amongst the young. In 2013, about 2.8 million TBI-related emergency department (ED) visits, hospitalizations, and deaths occurred and it is nearly 50,000 people. While the acute and critical phase of the condition is best managed in the intensive care of a hospital, once the patient has been stabilized, it is best to Ayurvedic treatment at the earliest, so that the affected individual can get the maximum possible benefit from it. Ayurvedic herbal treatment can be given in the form of various modalities for the treatment of traumatic brain injury. And it provides a significant contribution in the treatment and healing of patients with traumatic brain injury. Rasayanas are the medicine which gives to strengthen the nervous system, prevent degeneration of the damaged brain cells, and start the process of healing and regeneration. It is also given to promote neuromuscular coordination as well as to improve muscular tone and strength. And also to maintain the immune power of the patient as well as to ensure an optimum functioning of all important systems of the body.

Keywords: Traumatic brain injury (TBI), Rasayana.

MARMA CHIKITSA USEFUL IN SPORTS INJURY REHABILITATION

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Abstract:

Marma is the vital areas of the body. The word Marma comes from Sanskrit origin word 'Mri' meaning death. The Sanskrit phrase, 'Marayanti Iti Marmani', also means death or serious damage to body or health after infliction to the point of their situation. Hence these areas are called Marma. Marma therapy focuses on energizing the body to relieve occupational illness and stress related diseases. Hence the complete knowledge of the basic principles of Marma and its clinical application can play an important role in treatment modalities. Sports injuries are worst for any sports person. Rehabilitation is the action of restoring someone to health or normal life. It's very important for sport person. Marmachikitsa can play a vital role in that.

Keywords: Sport Injuries, Rehabilitation.

MANAGEMENT OF INFECTED WOUND WITH AYURVED

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Abstract:

Infection is one of the most important factors that cause delayed wound healing. Wound healing occurs as a fundamental response to tissue injury. In Ayurveda infected wound is similar to the dusta vrana, which is a common and frequently encountered problem

faced in surgical practice. The presence of Dushta vrana worsens the condition of the patient with different complications and may become fatal as the local factors on wound like slough, infection and foreign body affect the normal process of healing. This study is done to propose a treatment guideline for management of Dushta vrana through a case study, with principles and prescriptions from Sushrut Samhita. A 65 year old female was admitted with history of uncured Dushta vrana in her right foot for 6 months. She was advised for amputation by allopathic doctors and was cured with Ayurvedic treatments for a period of 4 months.

Keywords: Dusta vrana, Sushrut samhita

FORENSIC & LEGAL ISSUES OF TRAUMA CARE

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Abstract:

"Trauma" can be defined as- An injury to living tissues caused by an extrinsic agent. In olden days, Law & Medicine were worked upon as two different professions, & the Lawyers & Doctors were supposed to frame their views of life & conduct by rules that were different to those which regulated the dealings of others engaged in making a living by trade. "Kautilya Arthashastra" (an ancient treatise) explains regarding, how Law & Order used to work in ancient era, & how punishments were decided for various offences (under the heading "Dand Nitti").

In today's era, both the fields (Law & Medicine) are merged together to form, "Medical Jurisprudence". This has proved to be beneficial for the victim of a trauma, by helping in proving the main accused as guilty. Various injuries that are caused in physical form can be taken as consequence of motor vehicle crashes, falls, drowning, gun shots, fire & burns, stabbing or blunt assault, etc. But, the discussion in the presentation will specially focus on-

- Medical Negligence & consumer protection act
- Traffic injuries & Medico legal aspect of wounds
- "Dand Nitti" mentioned in "Kautilya Arthashastra"

Keywords: Trauma, Medical Negligence, Medico legal, Traffic Injuries, Dand Nitti.

AYURVEDIC MANAGEMENT OF POST - TRAUMATIC ARTHRITIS OF KNEE

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Abstract:

The most common types of arthritis are osteoarthritis and rheumatoid arthritis. Osteoarthritis is the most common form of arthritis in the knee. It is a degenerative 'wear-and-tear' type of arthritis that occurs most often in people 50 year of age and older, but may occur in younger people too. Post - traumatic arthritis is common form of osteoarthritis (OA). The most common cause of previous injury or trauma. The injury could be from sports, a fall, a vehicle accident and any other source of physical trauma. In this, injury can damage the cartilage and the bone. Arthritis of the knee can lead to difficulty in conducting many activities such as walking and climbing stairs etc. Osteoarthritis is known as Agantujavata Vyadhi in classics. In Ayurveda 2 type of treatment are given shaman and Shodhan. In Shodhan mainly Panchakarma procedure like Basti, Vaman, Virechana etc. are included. Basti and Sneha Swedan were found beneficial in reducing the swelling, pain, restriction of movements and for improving the quality of life in acute knee injury with meniscus tear.

Keyword: Osteoarthritis, Agantujavata Vyadhi, Trauma, Ayurveda Management.

CRITICAL REVIEW ON ABHIGATA (TRAUMA) IN AYURVEDA

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Abstract:

With the advancement of science and technology man became a victim to diseases these are metabolic, occupational, infectious, traumatic etc. Trauma is the fifth leading cause of death in present scenario, the care of the injured in casualty is based on the cause of injury. These causes are described by Acharya Sushruta in 2 groups those are intrinsic and extrinsic factors like burn, trauma, accidents, animal bites. The resultants of all these causes are in the form of Chinna (associated with separation of part of body), Bhinna (injury to body cavities resulting in discharge), Viddha (body cavity pierced by sharp pointed weapon), Kshata (neither excessively excised nor excessively incised), Picchita (due to severe blow and pressure), Ghrista (skin gets peeled off due to rubbing injury). In spite of all these the man did not lose the battle with disease this made the advent of medical system to come with the new ideas hence the concepts which helps to increase the quality of life in an individual has to be known as the 5th leading cause of death is trauma it has to be reviewed in detail for further scope of management.

Keywords: Trauma, Agantuja Vrana, Injury

GARBHASTRAV DUE TO ABHIGHATA AND ITS MANAGEMENT

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Abstract:

Pregnancy is truly amazing and glorious time in a woman's life. For woman to create grow and give birth to another life rather extraordinary. Abortion, Miscarriage and Infertility are most common nowadays. People in nowadays exposed to different requirements and stresses in their everyday working life, which leads to mental trauma related to abortions. Abortion is the expulsion or extraction from its mother of an embryo weighing 500 gm or less when it is not capable of independent survival. When the entire products of conception are not expelled, instead the uterine cavity it called incomplete abortion. Trauma caused maternal deaths in 46.5% of the 95 cases. Abortion has been established as traumatic event that can lead to developments of Posttraumatic stress disorder. In Ayurveda, it is correlated with Garbhasrava. In Sushruta the main causes are Krimi Vat Abhighat describe. Manasik causative factors are also describe by acharyas like Krodha, Shoka, Asuya, Irasa, Bhaya, Trasa etc. Thus physical and mental trauma can be lead to Garbhasrava. In Ayurved, Management of Garbhasrava is given, i.e (1) Garbhakoshtha shudhi, (2) Vedanavismarana and (3) Deepan Pachan dravyas. There is also given use of Raktastambhak, Balyaj, and Jivaniya Darvyas. Acharya also indicates Garbhasrav vednachikitsa. Here in this paper, the causative factors of Garbhasrava and its treatment in ayurvedic point of view is discussed.

Keywords: Garbhasrava, Nidra (Saririt and Mansik Abhighat), Chikitsa

RASA SHAstra PREPARATION FOR ABHIGHATA: JATYADI TAILA

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Abstract:

Vrana, the ulcer is defined as a break in skin or mucous membrane with loss of surface tissue, disintegration and necrosis of epithelial tissue and often pus. Ayurveda has described several formulations for management of ulcers and one such formulation is Jatyadi taila. Jatyadi taila is one among the formulations prescribed in both fresh and putrefied wounds by Acharya Sharangdhara and this work is done to describe the action of Jatyadi taila in ulcers. Ayurvedic and modern pharmacology texts are referred for collection of action of individual drugs for the vranaropana and vrana shodhanaproperty of the formulation. An attempt for detailed description of individual drugs, their pharmacological actions and contraindications is done.

Keywords: Jathyadi taila, Sharangdhara samhita, Vrana

CONTRIBUTIONS TO ABHIGHATOPACHARA: FROM SHARANGDHARA SAMHITA

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Abstract:

Abhighata, the trauma is a collective term to describe an injury caused by extrinsic agent; in some cases it includes mental disturbances too. In a classification perspective, a result trauma is divided into cut injury, poisoning, fracture, contusion, bruise and

laceration. According to causative factors trauma is classified into ballistic injury, animal or vegetable poisoning, sports injury, etc. The science of life, Ayurveda has described several remedy techniques and medicines to treat every kind of Abhigata, right from treating a fresh trauma to managing a complication. Sharangdhara Samhita, a Laghu Trayee has contributed 17 formulations to manage different types of abhigata. The Madhyama Khanda of Sharangdhara Samhita is referred for collection, compilation and classification of the trauma relevant formulations based on their indication. The formulations are classified for fresh open injuries, putrefied wounds, inflammations, fractures, animal poisons and herbal poisons.

Keywords: Abhigata, Laghu trayee, Sharangdhara Samhita

ANALYSIS OF VRANAROPANA PROPERTY OF KASHAYA RASA IN VARIOUS ABHIGHTAJA VRANA

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Abstract:

Trauma is defined as the tissue injury that occurs more or less suddenly as a result of some external factors and it will initiate the hypothalamic pituitary -adrenal axis which is responsible for the metabolic activities to restore the homeostasis. Tissue injury, hemorrhage, pain are the key components of any traumatic event. In Ayurveda, Susruta quoted trauma under abhigataja vyadhi. Some Abhigata may cause tissue injury or vrana in our body. Shopha, Raga and Daha are the symptoms occur in vrana due to the accumulation of Pitta Kapha Dosha. Susruta explained the Shashti Upakrama for Vranaropana; most of the upakrama done by the drugs are having kashaya rasa property. It is based on their Panchamahabhouthika combination, Guna and Karma. This abstract which helps to analyses, how the Kashaya rasa is acting on reduction of pain during Vranaropana.

Keywords: Vranaropana, Kashaya Rasa.

AYURVEDIC DIAGNOSTIC TECHNIQUES OF AYURVEDA

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Abstract:

Introduction:

This is an analytical study of the diagnostic methods prescribes in Ayurveda. As in the case of disease and treatments the concept of diagnosis also is unique in Ayurveda. It goes to the Nidan of doshik imbalance by studying the physical, physiological, psychic and behavioural aspects of the patient. Diagnosis is a very vital aspect of ayurvedic treatment. Diagnosis according to Ayurveda is to find out the root cause of a disease. Unless the proper diagnosis is done it is difficult to provide medicine and cure the diseases. It is not necessary that the root cause is internal (doshik), it may be external (trauma) also. The various diagnostic methods Enunciated in sastras are turned out to be a fore- runner of any of modern diagnostic methods: Hence the concept of ayurvedic diagnostic techniques of trauma discussed in full paper.

Aims and Objectives: To study the ayurvedic techniques diagnostic techniques of trauma.

Materials and Methods: Charaka samhita, Susruta samhita, a concise text book of Surgery and Google.com will be referred.

Keywords: Ayurveda, Nidan, Doshik, Sastras.

A SYSTEMATIC REVIEW ON CONTEMPORARY AND AYURVEDIC APPROACH TO "CRACKED NIPPLES"

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Abstract:

Cracked nipples also called as Nipple trauma is a condition that can occur in breastfeeding women making it a painful experience. It is a condition caused by trauma from baby's mouth due to incorrect attachments to the breasts. it typically appears in early days (i.e. 3 to 5) of breastfeeding and its prevalence is in 80-90% of breastfeeding women. Developing a cracked nipple results in soreness, dryness, irritation and bleeding from one or both the nipples. Mother with cracked nipples can have severe nipple pain

while feeding the baby which is disincentive for continued breastfeeding. The exact pathology is loss of surface epithelium with formation of raw area on nipple or formation of fissure situated either at tip or base of nipple, if infected leads to mastitis and breast abscess. Treatment aims at reversing the pathology, relieving pain and preventing complications.

In Ayurveda, all the breast disorders are included under the broad heading "Stana Rogas". Cracked nipples can be considered as Agantuja Stana Vrana. Treatment is Nidan Parivarjana and Vrana Ropan Chikitsa.

This study contributes to the improvement of health of lactating mothers with nipple trauma care consequently increasing successful breast feeding.

Keywords: Cracked nipples, Breastfeeding, Stanaroga, Agantuja stana vrana

AN AYURVEDIC VIEW ON DURDAGDHAVRANA AND ITS MANAGEMENT WITH SPECIAL REFERENCE TO 2ND DEGREE BURN INJURY

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Abstract:

Even since man has discovered the fire by accidental friction of stone he is experiencing both advantages and disadvantages of its utility on one side it is used as main source of energy on the other side it can cause most disastrous effect. In today's life due to advancement, industrialization, rapidly expose to chemicals, explosion of cell phone battery burn injury become very common. In Samhitas, Acharyas elaborately explained Agnidagdhavrana which are Categorized in Plushtadaghdha, Durdaghdha, samyakdaghdha and atidaghdha and its chikitsa. Modern medicine like chlorhexidine and bactigauze had proved their efficacy in the 1st and 2nd degree burn management, but they have certain limitations like it cannot avoid scar. In Ayurveda various types of aushdha like Varnaprasadan, Vranasodhana and vranaropana are described which may become a rays of hope for removing scar after burn injury.

Keywords: Durdagdhavrana, 1st and 2nd degree Burn injury, Agnidaghdha chikitsa

CONCEPT AND MANAGEMENT OF TRAUMA IN AYURVEDA

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Abstract:

Traumatic injury is a term which refers to physical injuries of sudden onset and severity which require immediate medical attention. The insult may cause systemic shock called shock trauma and may require immediate resuscitation and interventions to save life and limb traumatic injuries are the result of wide variety of blunt, penetrating and burn mechanism. According to Ayurveda, Acharya Sushruta has very well explained in Sushruta Samhita, the concept of Vrana on that basis has explained the Shashtiupakrama. Hence the motto of this paper is to explain the concept of Vrana and its Ayurveda management in present era.

Keywords: Trauma, Ayurvedic Management, Shashtiupakrama

NUTRITION AND WOUND HEALING

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Abstract:

Nutrition plays an essential role in wound healing and care. Nutritional support needs to be considered as a fundamental part of wound management. Poor nutrition before or during the healing process can delay healing and impair wound strength making it prone to breakdown. Wound healing is achieved through coordination and overlapping phases. This complex process can be disrupted by local or systemic risk factors, resulting in delayed healing of the wound. Wound healing is a major problem in a surgical practice because of increase of traumatic cases. A wound causes a number of changes in the body that can affect the healing process, including changes in energy, protein, carbohydrate, fat, vitamin and mineral metabolism.

According to Ayurveda, Sushrutsamhita has mentioned about the diet for the person suffering from wound, and acharyamentioned that diet plays a very important role in the wound healing process. Sushruta-The father of surgery has scientifically classified it in a

systemic manner, whose wealth of clinical material and the principles of management are valid even today. Surgical and para-surgical techniques have been discussed for various diseases in Ayurvedic Treatises of Shalya Tantra. Vrana (wound) is one of them, which has been managed by human being. Among many circumstances, the first thing which the men came across was the injury from different sources which caused him the vrana. Vrana is seen as debilitating and scaring disorder, usually seen affecting the human being at any age. Well balanced nutrition plays an essential role in the wound healing.

Keywords: Ayurveda, Nutrition, Wound healing

MANAGEMENT OF ANTAA JANGHASTHI BHAGAN (TIBIAL SHAFT FRACTURES) WITH REAMED INTERLOCK INTRAMEDULLARY NAILING

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Abstract:

Ayurvedic Shalya Chikitsa ranges from small wound management to large n extensive surgical procedures like laprotomies, cataract surgeries, plastic surgeries n management of musculoskeletal injuries. Different types of techniques of reduction n immobilization of fractured bones are mentioned in ayurvedic science. The etiology of Bhagan (fracture n dislocations) mentioned by Acharya Sushruta remains same till to date. In Nidan sthan chapter 15/3; it is written that “patan peedan prahar aakshepan vyal mrig dashan prabhriti abhigat vishesh anekvidham astananaam bhaganamupdishanti.”

With the advancement of technology n machinery the incidences of fractures has increased many folds,even than the causative factors of fracture and dislocations remains same as mentioned in sushruta samhita. In current scenario we can classify all these factors under five subheadings; like Fall, Sports Injuries, Direct blows or assaults, Motor vehicle accidents and firearm injuries. Antaa janghasthi bhagan i.e. tibial diaphyseal fractures have always held a particular interest for orthopedic surgeons. Not only are they relatively common but they are often difficult to treat. The subcutaneous location of the anteromedial surface of the tibia means that severe bone and soft tissue injury is not infrequent and there is a high incidence of open fractures compared with other long bones. Tibial diaphyseal fractures commonly affect young males, and a severe fracture complicated by nonunion or infection often results in loss of employment or other social and economic problems. These complications also place a considerable strain on the health services of all countries.

The treatment mentioned in ayurveda for bhagan is with generalized and localized means according to the ritu, kaal n prakruti of the patient. The mainsteps of Bhagan Chikitsa are aanchan peedan sankshepan and bandhan (Su.ch.3/18).

In today's context we have four principal methods of treating tibial diaphyseal fractures, although each method has a number of variants. Non operative management can be undertaken using either long leg casts, patellar tendon bearing casts, which allow knee movement ,or functional braces, which permit both knee and hindfoot movements.

The three basic operative techniques are plating, intramedullary nailing and external fixation. It is very surprising to note that even while treating fractures of long bones of lower extremity (jangha and urvasthi bhagan) Acharya Sushruta advises the use of kapatshayanam with panchkeelak. It has a close proximity to the fixation of long bone fractures with external fixators and internal fixation with nails and plates.

Now a day intramedullary nailing of tibial fractures is usually undertaken with an interlocking intramedullary nail. Different studies by different authors suggest better outcomes with reamed intramedullary interlock nailing. The chances of infection, non union and compartment syndrome is low. The striking features of this paper are the relatively low incidence of joint stiffness, suggesting that the functional outcome is better than cast managed fractures. In the present case, I am going to discuss about the technique of reamed interlock nailing in tibia diaphyseal fractures. The details will be discussed at the time of paper presentation.

Keywords: Diaphyses, Reduction, Intramedullary, Interlocking, Bhagan, Antaa Janghasthi, Kapatshayanam

EMERGENCY MANAGEMENT THROUGH AYURVEDA

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Abstract:

Emergency is an unforeseen combination of circumstances or the resulting state of that calls for immediate action on current state, the Modern science is chosen for an emergency management. Ayurvedic and other system practitioners refer to the patients

hoping for skilled hands. One of our Brihatryee treatises Sushruta the father of Indian surgery has described about emergency management like for e.g. Sadhovrana chikitsa (immediate wound care), Bhagna (fracture and dislocation) management, Agantu and pranashta shalya (foreign bodies) and foreign bodies extracting, suturing techniques but remain a barricade of our hands in emergency management. These studies are attributed to discuss and understand emergency management and now a day's what limitations we are having with our science compare to Modern medicine.

Keywords: Emergency, Sadhovrana, Bhagna, Pranashta shalya.

AYURVEDIC MANAGEMENT OF MRUTAGARBHA W.S.R. INTRAUTERINE DEATH

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Abstract:

Life is a liable entity in a world of flux and change, health and disease are linked aspects of that all pervading instability. They are the expression of an ever changing relationship between the different components making up the living body and between that living body and outer world.

Intrauterine fetal death embraces all fetal deaths weighing 500 grams or more occurring both during pregnancy and during labour however death occurring beyond 28 weeks it can be termed as IUD. In classic all Brhutraya have explained concept of Mrutagarbha in which nidana's like Abhighata, Sampidana etc. which can be correlated with external version, external trauma to the fetus in present era. A part from this detail description of Nidan, Laxana, Samprapti, Chikitsa of Mrutagarbha also explain in our classics which I am going to explain in this paper.

Key Words: Mrutagarbha, Intra uterine fetal Death, Abhighata, Chikitsa

EFFECTIVENESS OF JALAUKAVACARAṆA (LEECH THERAPY) IN ACUTE INFLAMMATORY JOINT DISORDERS

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Abstract:

Leech therapy or Jalaukavacharan is one of the modalities of asastrakṛtāraktamokṣaṇa karma (bloodletting without sharp instruments) for treating localized pain. Acharya Sushruta mentioned it in Pittaduṣṭarakta (blood vitiated by Pitta), Avagādhaduṣṭapittavyadhi (deep seated vitiated Pitta disease), toda (pain), etc. Traditionally in practice it is elicited that it effectively alleviates pain and relieves joint inflammation rapidly and improves joint functions as well. Salivary glands of leeches also produce pharmacologically active substances including antihistaminic, protease, and anesthetic, antitriptic molecules. And also leech therapy (jalaoukavacharana) very effective and good results Insandhi-Asthigatavata (Osteo-Arthritis, Synovitis, and Bursitis) and Snayugatavata (tendinitis). Thus we can find that Jalouka/ leech is very effective in these conditions and also pain is relieved due to their (leech's saliva) property.

Keywords: Leech, Tendinitis, Synovitis, Osteoarthritis Ayurvedic Medicine

PANCHAKARMA IN ABHIGHATOPACHARA

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Abstract:

Abhighata is one of the Causative factors for the development of Acute or Severe conditioned Diseases. In Ayurved Acharya Sushruta is considered as a Best Physician to such conditions. He has described 6 different type of Vrana (Wounds) named as chhina, Bhinna, Vidhha, Kshata, Pichhita, Ghrushta. To treat such conditions, other than Shalya Karma some PanchaKarma procedures play an important role viz. Snehapana, Parishkeha, Upanaha, Dhanya Sweda, Snigdha Lepa and Vataghna Basti are given. In this presentation these procedures will be highlighted, to fasten the recovery phase.

Keywords: Abhighata, 6 types of Vrana, Snehapana adi PanchaKarma treatment.

WOUND HEALING PROPERTY OF HONEY

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Abstract:

Introduction: According to the Ayurveda, Vrana (wounds or ulcers) is the discontinuation of lining membrane that after healing leaves a scar for life closely resembling the modern definition of wounds. Various types of wounds as mentioned in Ayurveda among them some are origin due to Trauma, such as Viddha (punctured wound), Chinna (cut wound), Bhinna(perforated wound), Picchita (contusion), Kshata (lacerated wound), and Ghrishta(abrasion wound).

Aim and Objective: Keeping the properties of honey in mind, Evaluate wound healing qualities of honey on traumatic wounds (Sadhyo Vrana).

Qualities of Madhu and Its Function: Madhu has Vranaropaka properties as per the principles of the sixty Upakramas of Vrana management described in the Sushruta Samhita. Madhu is believed to act by 'pacifying' the three vitiated Tridosha by multiple actions like pacifies Pitta Dosha by effect of its Madhura Rasa and Sheeta Guna gives nutrition to the tissue, which helps in granulation tissue formation, while Kapha Dosha pacifies by Kashaya Rasa and provides Lekhanat that helps in de-sloughing, Ruksha Guna, Sheeta Virya, Madhura Vipaka and Sukshma Marganusari Prabhav (ability to permeate in micro channels) preparing the wound for healing. Thus, Madhu has excellent properties to heal the wound by virtue of its Sodhana (purification), Ropana (healing), and Sandhana (union) actions which accelerate healing.

As per modern study Honey is a hyperosmolar medium, preventing bacterial growth. Because of its high viscosity it forms a physical barrier, and the presence of the enzyme 'Catalase' gives honey antioxidant properties. There were no adverse events throughout the management and healing occurred uneventfully. The mode of treatment was found to be cost-effective, safe, and easy to implement

Keywords: Madhu, Sadhyo Vrana, Wound Healing

MANAGEMENT OF DUSHTA VRANA BY JATYADI GHRITA

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Abstract:

Wound is a discontinuity, often excavation of skin exhibiting loss of epidermis and portion of the dermis and even subcutaneous fat. Under normal physiological condition healing is inevitable. The process of healing is divided into four phases viz. homeostasis, inflammation, and proliferation and remodeling. Among various factors affecting process of healing oxygenation, infection, age and sex hormones, stress, diabetes, obesity, medications, alcoholism, smoking, and nutrition of which infection is our prime concern. In ayurveda particularly Acharya Sushruta, who is considered as father of surgery, has mentioned various types of Vranas and their management. This is of prime importance in any surgical procedures. Vranas are again classified into two on basis of Dosha Dushti. They are Shuddha Vrana i.e., a healthy wound and Dushta Vrana i.e., an infectious or complicated wound in due course of time. In ancient text, a number of drugs and techniques are discussed. Many formulations are in use for centuries. One of them is medicated Gritha preparation names Jathyadi Ghritha.

Keywords: Ayurveda, Jaythyadi Gritha, Wound Healing

PATHOPHYSIOLOGY OF RESPIRATORY FAILURE IN AIRWAY TRAUMA

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Abstract:

Airway trauma is life threatening which includes blunt or penetrating injuries types of injuries leads to respiratory failure. Respiratory failure can arise from an abnormality in any of the components of respiratory system. Chest wall, alveoli, airway etc., during any trauma to any of these areas; lead to respiratory failure. The physiology of respiration happens in transfer of oxygen, transport of oxygen, removal of carbon dioxide, so when a trauma occurs to airway it hampers the function and thus leads to respiratory failure. where in Ayurveda it has been said that when Pranavahasrothas gets obstructed due to Abhighata this results in obstruction of all types of vata and it leads to Pranadhusthi which in therefore leads to death of the individual this paper is going to convey about how this aetiology is causing in a pathophysiological way

Keywords: Air way trauma, Respiratory Failure, Pranavahasrothodhusthi Pathophysiology

ROLE OF AYURVEDIC FORMULA IN DIABETIC FOOT

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Abstract:

Diabetes Mellitus and its Complication type of non-healing wound is a challenge to the surgeon. In Diabetic foot Complications are more common. Acharya Sushruta has mentioned this type of vrana as Dushta vrana and Diabetic foot is correlated with madhumehj vrana. Acharya sushrut stated that the management of these vranas are Difficult i.e. kastasadhya. According to Acharya Sushrut, Meda and Rakta along with other Dosha and dushya lead to the Formulation of Prameha Pidika which later converted to non-healing wounds and also further Specified that wounds over lower limb are difficult to heal. So Acharya has described 60 measures for the effective practical applied management for all type of Vrana (wounds) which shows unique therapeutics approach for management of wound.

Keywords: Vrana, Diabetes Mellitus, Kastasadhya, Prameha Pidika

GUNSHOTS WOUND - IS IT BETTER TO LEAVE A BULLET IN??

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Abstract:

Introduction: In Bollywood movies: yes the removal of bullet symbolizes the recovery from the shooting. Will he live? Will he die? But in reality; No, it will depend on the circumstances. When a bullet penetrates a person body sometimes it follows a clean path and lands in harmless place. Death due to gunshots are ultimately caused either by destruction of critical organ or by blood loss. Sometimes doctors decide that there will be less risk in leaving bullet inside than to attempt to remove it. Thousands of asymptomatic soldier walk around with a great deal of metal in their body.

Even our Acharyas tries to emphasize on the concept without removing the Shalya (foreign body) person can survive. At that time commonest weapon used in wars were arrow, sword etc which used to pierce the body and act as foreign material leading to suffering of patient. When any Shalya (foreign body) is impacted in Twacha or any part of body, and it tears the vessels or enters into them. Vishalyaghna Marma kills the person once the Shalya or foreign body stuck in the site of Marma is removed.

Aims and Objectives: To study the concept of Shalya (foreign body) impacted in body to be removed or not.

Material and Methods: Charak Samhita, Susuruta Samhita, Astang Hridaya and Other Internet sources.

Conclusion and Discussion: Shalyas as long as present there will be no bleeding but if extracted forcibly, Siras and Dhamini is going to open and start to bleed. Thus Prana in the form of Rakta is going to flow out. Thus this paper is going to highlight when it is better to leave a Shalya (bullet) in the body both according to Modern and Ayurveda point of view.

Keywords: Gunshots, Shalya, Vishalyaaghna Marma

HEMORRHAGE AND ITS MANAGEMENT

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Abstract:

Trauma is one of the major causes for blood loss. Blood is a specialized bodily fluid that delivers necessary substances to the body cells - Raktam jeevam iti. Bleeding severity can range from mild local bleeding at a small injury to massive hemorrhage. Hemorrhage means copious or heavy discharge of blood from the blood vessels. Main Causes for Hemorrhage are trauma to vessels wall, bleeding from chronic ulcers, vascular disease, elevated pressure within the vessels, etc. The effect of blood loss depends on amount, speed and site of bleeding. Clinical Features of Hemorrhage Weakness, Faintness, Nausea, Sweating, Restless, Cold and clammy extremities, Patient may go in shock, Increasing pallor, Deep sighing respiration, Increased and feeble pulse, Low blood pressure, Urinary output becomes low. Main line of treatment is Easy to understand, requires immediate management, by airway breathing and circulation, measures to Stop blood loss, immediate fluid replacement etc. So, this paper is presented to establish the utility of SANDHAN, SKANDAN, PACHAN and DAHAN hemorrhage.

Keywords: Blood, Hemorrhage, Bleeding, Rakta

REHABILITATION IN TRAUMA

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Abstract:

Spinal cord injury requires a prolonged rehabilitation. Ayurvedic indigenous methods of rehabilitation are often utilized to treat such conditions. There is no satisfactory treatment available in biomedicine with only limited treatments only for enhancement of spinal cord function. The composite treatment plan involves Ayurvedic oral medications as well as a few selected external and internal Pancha Karma procedures with a substantial clinical and patient centered outcome improvement in existing neurological deficits.

Keywords: Rehabilitation and Trauma

ABSTRACTS

POSTER PRESENTATION



BENEFITS OF NIDRA IN PSYCHOLOGICAL TRAUMA

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Abstract:

Introduction: Ayurveda emphasizes on Trayopasthambha (Ahara (food), Nidra (sleep) and Brahmacharya (abstinence)) in the maintenance of Swasthyam (health). It provides Sukha (happiness), Pushti (nourishment), Bala (strength), Vrushata (aphrodisiac), Jnana (knowledge), Jeevita (life). Psychological health is one among the different dimensions of Swasthyam which is having intimate relationship with Nidra. Psychological Trauma is disturbance at mental level. Even the contemporary medicine targets at correction or induction of Nidra in Psychological trauma.

Aim & Objective: To understand the concept of Nidra and its benefits in Psychological Trauma.

Material & Methods: Conceptual review from classical Ayurvedic texts, Online Sources and Contemporary medical books will be done.

Discussion: Benefits of Nidra in Psychological Trauma will be discussed elaborately.

Conclusion: Beneficiary effects of Nidra in Psychological Trauma will be concluded.

Keywords: Nidra, Sleep, Psychological, Trauma

BIRTH INJURIES: CLAVICULAR AND CALVARIUM FRACTURES AND AYURVED MANAGEMENT

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Abstract:

Introduction: Birth injuries are an impairment of the infant's baby function or structure due to adverse influences that occurs at birth. Injury commonly occurs during labor and delivery. In ayurveda it is grossly compared with "Bhagna".

Aim and objective: To highlight the importance of ayurved treatment for birth injuries mainly in clavicular and calvarium fractures. Cause, prevalence, mechanism and clinical features will also be analysed.

Materials and Methods: Ayurved samhitas (Sushrut Samhita) and other contemporary textbooks of pediatrics and obstetrics and Internet will be used.

Discussion and Conclusion: Clavicle fracture is the commonest bone injury in neonates and Calvarium fracture is due to forceps delivery in disproportion. Neurological manifestation may occur due to these types of injuries. Birth injuries may be severe enough to cause neonatal deaths, still birth or numbers of morbidities.

This poster will highlight birth injuries clavicle and calvarium fractures.

Keywords: Birth injuries, clavicle, calvarium, Bhagna.

AYURVEDA AS SPORTS MEDICINE- SCOPE AND OPPORTUNITIES

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Abstract:

Introduction: Ayurveda is a unique life science. All the dimensions of life are dealt with here in some or the other way. This is the only science which was in practice for centuries for the management of different ailments of various causations. Sports medicine, also known as sport and exercise medicine (SEM), a branch of medicine that deals with physical fitness and the treatment and prevention of injuries related to sports and exercise. It emerged as a distinct field of health care only in late 20th century.

Aim & Objective: To understand the scope and opportunities for Ayurveda to get established as Sports Medicine.

Material & Methods: Classical Ayurveda treatises, Online Sources and contemporary medical textbooks will be referred and reviewed for understanding scope and opportunities for Ayurveda to get established as Sports Medicine.

Discussion: Scope and opportunities for Ayurveda to get established as Sports Medicine will be discussed elaborately.
Conclusion: Scope and opportunities for Ayurveda to get established as Sports Medicine will be concluded as discussed.

Keywords: Ayurveda, Sports, Medicine

EFFECT OF PRANAYAMA IN THE MANAGEMENT OF PSYCHOLOGICAL TRAUMA

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Abstract:

Introduction: "Pranayama is control of Breath". "Prana" is Breath or vital energy in the body. On subtle levels Prana represents the pranic energy responsible for life or life force, and "ayama" means control. So Pranayama is "Control of Breath". Psychological trauma is a type of damage to the mind that occurs as a result of a severely distressing event. Trauma is often the result of an overwhelming amount of stress that exceeds one's ability to cope, or integrate the emotions involved with that experience. Pranayama is unique and specific by its nature for the management of psychological ailments.

Aim & Objective: To establish the effect of Pranayama in the management of psychological trauma.

Material & Methods: Classical Yoga and Pranayama treatises, Online Sources and contemporary medical textbooks will be referred and reviewed for understanding the efficacy of Pranayama in the management of psychological trauma.

Discussion: Effect of Pranayama in the management of psychological trauma will be discussed elaborately.

Conclusion: Effect of Pranayama on psychological trauma will be concluded.

Keywords: Pranayama, Trauma, Psychological, Ashtangayoga, Yoga

ROLE OF SURYANAMASKAR IN PREVENTION AND MANAGEMENT OF PSYCHOSOMATIC TRAUMA

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ABSTRACT:

Introduction: In present era a person is not only trying to get success but trying hard to set a benchmark. For this people are spending several nights to explore newer ideas. In this phenomenon mind and body are getting exhausted unknowingly. As a result, people are facing to the psychosomatic trauma. There is no underline organic pathology. These symptoms are concerned with bodily symptoms caused by mental disturbance. Though in psychosomatic trauma mind is involved, most of the times only physical symptoms of are managed. Where, Ayurveda always consider mind in pathophysiology of diseases. It ways recommends integral therapy of medicine, panchakarma, yoga etc. Suryanamaskar is a part of yoga.

Aim: Hence this descriptive study was aimed to evaluate role of Suryanamaskar in prevention and management of psychosomatic trauma.

Material and Method: Literature of modern science and Ayurvedic text were reviewed to conceptualize the study. Observation-Suryanamaskar is a set of sequential yogic postures. It strengthens the body, improves posture, flexibility, blood circulation etc. It helps to cope with insomnia, to relax mind etc.

Discussion: Suryanamaskar, a set of 12 asanas, that are each beneficial in their own way and together make for an exercise for the body and mind. And if the mantras of the Suryanamaskar are chanted along the physical movements, it makes powerful exercise because it then transcends to the spiritual plane.

Conclusion: Suryanamaskar is an ideal and flexible start towards fitness of mind and body. Suryanamaskar plays an important role in Prevention and management of psychosomatic trauma.

Key words: Body, Mind, psychosomatic, Suryanamaskar, trauma.

HETU OF MANOABHIGHATA

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Abstract:

Introduction: Have you ever wondered just how much impact your state of mind has on your health and what are the causes for that? According to ayurveda, that is the Manas have a very powerful influence on our overall health and well being. Aim of Ayurveda is, *Praythojanam Cha Aasya Swasthasya Swastharakshanam Aaturasya Vikar Prasamanm Cha*, and WHO defines health as "Health is a state of complete physical, mental, social, spiritual well being and not merely the absence of disease or infirmity." Ayurveda defines health not only as absence of disease, but also as a very holistic level of vitality throughout our lives. As a result, the ayurvedic approach to treating any single aspect of our health begins with taking into account the whole of who we are – body, mind, and spirit – can either support or undermine our well being, making the mind(Mana) one of three equally influential players in our overall health.

Aims and objective: To analyze the nidanas in Mansika Abhighata.

Materials and Methods: Bhritrayi, Laguthrayi, Manasa vigyana reference books and other internet resources will be referred.

Discussion and Conclusion: Ayurveda considers even minor disturbances in the mind to deeply influential, with the very real potential to compromise the quality of our lives, and to more directly cause any number of diseases. So here Hetu of manoabhighata will be analyzed.

Keywords: Hetu, Manoabhighata.

ANALYZING VATAKANTAKA HETU AND ITS FIRST LINE OF MANAGEMENT

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Abstract:

Ayurveda the science of life with its eight branches classifies and organises the diseases and their treatment. Vatakantaka is one among the vatavyadhi, which produce pain in Gulpha (ankle joint) when foot is placed unevenly on the ground. Sprain is defined as stretching or tearing of ligaments characterised by pain, swelling, bruising and difficulty in movements. Strain is a stretching or tearing of muscles or tendon characterised by pain, swelling, muscle spasm and difficulty in movements. In Ayurveda Sprain and Strain of ankle joint both can be correlated and described under vatakantaka lakshanas. Management of such conditions should always be initiated immediately may it be Strain or Sprain. This helps to provide instant relief of pain, swelling etc symptoms temporarily and also avoid further complications like continuity of pain, dislocation of joints etc. In full paper common nidanas of vatakantaka will be analysed and also first line management of the same will be highlighted.

Keywords: Vatakantaka, Sprain, Strain, First line of treatment.

UNDERSTANDING OF ETIOLOGY OF BELL'S PALSY

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Abstract:

Introduction: Bell's palsy is acute, apparently, isolated lower motor neuron. Exact pathology of Bell's pathology however not mentioned in Ayurved yet symptoms of Bell's palsy simulates with Lakshana of Ardita. Diabetes mellitus, severe hypertension, exposure to cold, herpes zoster, head injury etc are common cause mention for Bell's palsy. In Ayurveda Kathina or hard intake of food wide mouth shouting, excessive yawning, carrying heavy load cause which are mention.

Aims & Objectives: To Analysis the Nidana of Ardita / Bell's palsy.

Material & Methods: Ayurveda Samhita, Contemporary textbook Gollwal, Harrison's, Internet Recourses

Discussion & Conclusion: Even through modern textbook have mention exact cause can be found for Bell's palsy. Etiology which mention above have got a pivotal role causing the disease pictorial representation of same in poster.

Keywords: Ardita, Bell's palsy, Etiology.

BALA ABHIGHATA – EKANGA VATA AND ITS MANAGEMENT WSR TO ERB'S PALSY

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Abstract:

Introduction: Abhighata is an AgantuVyadhi or disease explained in Ayurveda. Birth is a crucial time during which individual is more prone to different Abhighata due to passage of baby through very narrow birth canal. Brachial plexus injury is very common among all the birth injuries. Injury to brachial plexus during birth damages the spinal nerve roots-C5 to C7.

Aims and Objectives: To study the Ayurveda aspect of birth injury and Erb's Palsy.

Materials and Methods: All classical Ayurveda text books, text books of paediatrics, journals, internet references

Discussions and Conclusions: Shoulder dystocia excessive pulling on shoulder in vertex presentation; pressure on arms during breech delivery; clavicle fracture is etiological factors of Erb's palsy. Clinical features includes waiter tip position; limb falls to side of body when passive adducted; Moro's, biceps, Radial reflexes are absent; loss of sensation in arms; atrophy of deltoid, biceps, brachialis muscles; grasp reflex is intact. Management includes paediatric neurosurgery for avulsion fracture repair and physiotherapeutic care. The term Ekanga Vata explained in Ayurveda Vata Vyadhi resembles the Erbs palsy. Lakshana are Pada and Hasta Sankocha; Ardha Sharira Shira Snayu Vishoshya; Shula and Toda. Chikitsa is Snehana and Swedana, Anuvasana Basti and Niruha Basti, and Raktamokshana with Shringa. This article highlights the importance and safety of Ayurveda Chikitsa in the management of Ekanga Vata.

Keywords: Ayurveda, Brachial plexus, Ekanga Vata, Erbs Palsy

MYSTERY OF DEATH BOUNCER

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Abstract:

Losing is part of a game but losing life is not. Cricket is the most common game played in India and is very popular around the world. Nowadays the game is played with safety equipment which in the past was not available, and cost players their lives. A ball bowled fast and short so it can raise high after pitching is called a 'bouncer'. The occurrence of death of a batsman due to fatal injury from this type of bowling in cricket is known as "death bouncer." Depending on the nature of the injury, a hit on the head can be fatal. Most of the head injuries at the head, orbital and neck region cause death. This is usually as a result of vagus stimulation leading to cardiac shock or due to a subarachnoid/subdural hemorrhage.

The intention of this presentation is to explore how injuries to particular anatomical structures can result in death; from this we hope to deduce further safety measures which can be implemented to help protect these cricketers from such devastating consequences.

Keywords: Cricket, Bouncer, Vital points

BASIC AIR WAY MANAGEMENT BY MANEUVER IN SPINAL INJURIES

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Abstract:

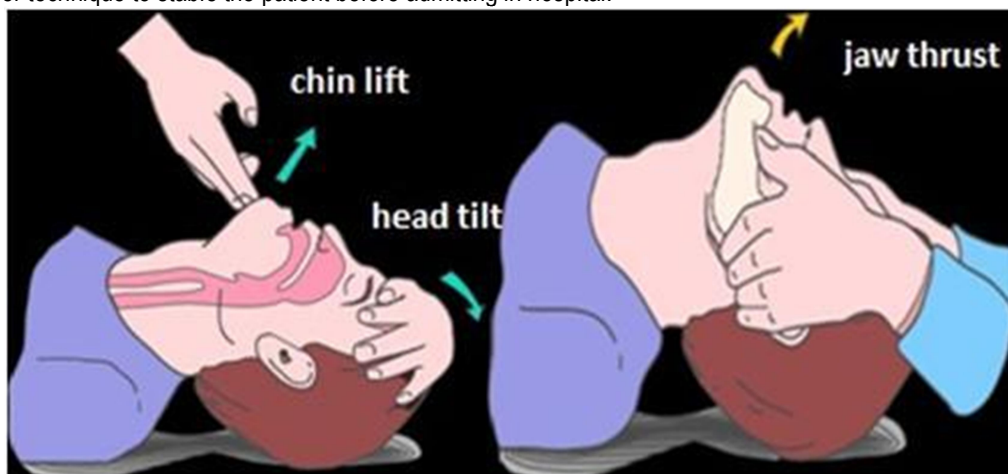
Introduction: Now a day in India death ratio is increased due to road accidents. The physician should have the knowledge of first aid treatment in such conditions to save his life. The persons will die due to mismanagement of airway. A high degree of suspicion for actual or impending airway obstruction should be assumed in all trauma patients. Simple techniques for establishing and maintaining airway patency include jaw thrust maneuver especially in cervical spine injury. Jaw thrust maneuver is the procedure done to prevent the tongue from airway obstruction. This activity usually used in cervical spinal injuries. The pre-hospital use of stabilization techniques improves the chances of a person surviving the journey to the nearest trauma-equipped hospital. Emergency medicine services determines which people need treatment at a trauma center as well as provide primary stabilization by checking and treating airway, breathing, and circulation. Conditions such as impending airway obstruction, neck hematoma, or unconsciousness require intubation. However, if this is best performed before reaching hospital or in the hospital can save patient life.

Aim and Objective: To save the person's life in emergency before admitting in hospital as a first aid treatment. Each and every medical and paramedical person should have the knowledge of air way management procedures. In poster presentation it will be in detail with proper pictures of this procedure. In this activity, during spinal injuries due to trauma there will be fall of tongue in oral cavity leads to airway blockage, in such status it will be cleared by Jaw thrust maneuver.

Materials and Method: Related books where the procedure and its benefit is given

Result: By this process airway blockage is removed.

Discussion and Conclusion: In emergency specially in road accidents there are many techniques and procedures for clearing the airway blockage depends on conditions, but jaw thrust maneuver is the most beneficial and simplest one every body can do this without any complication. In spinal injuries to clear the airway where the dropped tongue leads to obstruction of oro pharynx, make the patient in supine position and follow the process. The maneuver is performed by placing the index and middle fingers to push the posterior aspects of the mandible upwards while their thumbs push down on the chin to open the mouth. Many persons loose their life due to lack of facility in crisis condition. Each and every person even non medical person also have the knowledge of jaw thrust maneuver technique to stable the patient before admitting in hospital.



Keywords: Cervical spine, airway, trauma, obstruction.

PROTECTION OF MARMA IN PAST AND PRESENT

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Abstract:

Marmas are vital points which cause serious illness or defect and that become even may fatal when they subject to any injury. It is given prime importance in Ayurvedic system of medicine. Marma can be defined as anatomical site where muscle, veins, ligaments, bones and joints meets together. Marma vidya is an excellent part of Ayurveda which deals with the protection, self-defense, enhance the health and for the promotion of healing mechanism. In Ayurveda, 107 marma has been explained.

Practical and non-medicinal treatment technique of marma is being practiced in India and throughout the world since the ancient time depends upon their need and nature of their profession. And even in modern era, the protection of marma can be seen. But only the method of protection is only changed.

This poster tries to explore the need and importance of protection of marma points during the various occasions.

Keywords: Marma, Protection and Self-Defense

AN AYURVEDIC DIAGNOSTIC APPROACH TO ABHIGHATA (DASHAVIDHA PARIKSHA)

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Abstract:

Ayurveda system of Indian medicine considered the diseases of types viz Nija and Agantu. Agantu Vyadhi includes the traumatic clinical entities. Irrespective of the kind and nature of the disease there is important of assessment and therefore one should adapt

DashavidhaPariksha, Trividha Pariksha for diagnostic purpose. Assessment ofPrakruti, in abhigatais essential as there is more effect of Abhigata in VataPrakruti people compare to others; as Vata Prakriti people have Ruksha and Apachita Sharira (Asthenic or undernourished body). Kapha Prakruti has Saara, Samhata and Sthira Sharira and Upachita Paripurna Gatra and hence they will be less affected by Abhigata. Vikruti Pariksha includes inspection of Hetu, Dosha, Dushya, Desha, Kala, Bala etc. Person having Pravara Sarata will have less effect of Abhigata due to compact constitution of body. In addition the person having Sama Suvi bhakta Asthi (well-nourished and aligned bones), Subaddha Sandhi, Sunivishtha Mamsa, Shonit, Susamhata Sharira will have more pain and trauma bearing capacity. Person having Susamhata Sharira have more calliper and ability to overcome Abhigata. Person having proportionate measurement of all body parts/organs has better withstanding capacity and recovery from trauma. Pravara Sattva people have increased threshold to bear Abhigata even though he has lean and thin body, due to their enough will power. Ahara Shakti measurement is necessary for Santarpana, Deepana, and Pachana etc treatment. Vyayama Shakti is required in many post traumatic cases to follow the physiotherapy like treatments. Considering all these facts it very clear that pediatric and geriatric population can't bear Abhigata due to Aparipakva Dhatu and Hriyamana Dhatu respectively. This article (poster) highlights the importance of adapting the Dashavidha Pariksha to understand, diagnose and to manage the Abhigata more effectively than present conventional practices.

Keywords: Abhigata, Ayurveda, Dashavidha Pariksha, Diagnose

ABHIGHAT UPCHAAR IN AYURVED - BIRTH ASPHYXIA/ JANMA KALINA SHWASANA AVARODHA

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Abstract:

Introduction: According to WHO, birth injury is a major public health problem that requires urgent attention. Asphyxia is one among them. Asphyxia is characterised by progressive Hypoxia, Hypercapnia, and metabolic Acidosis. Asphyxia may lead to multi organ dysfunction including Hypoxic Ischemic Encephalopathy.

Aims & objectives: To highlight (a) The causes including three types; labour related causes, mother related causes and Foetus related causes, (b) Clinical features, (c) Management exclusively according to Ayurved.

Materials and Methods: Ayurveda Samhitas like Charaka Samhita and other related texts; modern texts like Essential of Pediatrics (O.P.Ghai); Internet Resources.

Discussion and Conclusion: To sum up that, birth asphyxia is managed by both preventive & curative aspect and the root of modern protocol for resuscitation a neonate lie in a method of Prana-pratyagaman of Ayurved.

This poster will highlight the birth asphyxia/janmakalinashwasanaavarodha.

Key Words: Ayurved, Birth Asphyxia, Janma Kalia Shwasana Avarodha, Hypoxic ischemic encephalopathy, Prana-Pratyagaman.

EFFECT OF YOGA IN THE MANAGEMENT OF PSYCHOLOGICAL TRAUMA

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Abstract:

Introduction: "Health" is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity, according to World Health Organization (WHO). Trauma can be any distressing experience at the level of Physical Health or Mental Health. Yoga is a group of physical, mental, and spiritual practices or disciplines (Ashtangayoga) which originated in ancient India. It has been studied and may be recommended to promote health of the individuals in multiple dimensions viz. physical, psychological etc.

Aim & Objective: To analyze the effect of Yoga in the management of Psychological Trauma.

Material & Methods: Classical Yoga treatises and contemporary medical textbooks will be referred and cross checked for proving the conceptual hypothesis.

Discussion: Overall effect of Yoga on body and health with special reference to psychological health will be discussed elaborately.

Conclusion: Effect of Yoga in the management of Psychological Trauma will be concluded.

Keywords: Yoga, Trauma, Psychological, Health, Ashtangayoga

RASA SHASTRA FORMULATIONS USED IN MANAGEMENT OF TRAUMA

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Abstract:

Ayurveda- A science of life merely deals with preventive and curative aspect of the human body. For that so many formulations and pathya~apathya are described in different ways. Different disease conditions wise curative treatments are also covered in Ayurveda which is part of Rasa Shastra and Bhaishajya Kalpana. Abhighata (trauma) is among them and its management is also important. Enormous amount of formulations are mentioned in Ayurvedic literature to manage trauma. In this study more than 10 formulas were compiled which are used for management of trauma followed by its ingredients and uses. In my experience for compilation, Guggulu Kalpana is frequently used.

Reference: Yogratnakara, Bhaishajyaratnavali.

ABHIGHATAJA VRANA CHIKITSA FROM THE PERSPECTIVE OF KASHYAPA SAMHITA

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Abstract:

Abhighata is explained in Ayurveda as the AgantuVyadhi and in most of instances there formation of wound after Abhighata. Wound is popularly known as Vrana in Ayurveda. In KashyapaSamhita management of Vrana is explained thoroughly under the DvivranayaChikitsa Adhyaya. Important thing is that along with child treatment for mother as well as child andDhatri is also mentioned in Ayurveda. After trauma there is disintegrity in skin, muscle, ligament, joint, Marma (vital points), Koshtha, bones, Sira. Nija Vrana is due to internal imbalance of Vata, Pitta and Kapha and their combination (Sannipatija). Agantu Vrana is due to fractures, cutting, fire, weapons, woods, nails etc. According to basic fundamentals of Ayurveda Vrana can't be possible without Dosha irrespective of Agantu or Nija Vrana. There is Dosha dominance in each and every Vrana. In Kashyapa Samhita the general treatment for Vrana is Samshamana, Shodhana, Ropana, Kalka Pranidhana, and Svarnikarana. In Vataja Vrana treatment includes Snehapana, Upanaha (poultice), Swedana, Parisheka etc. Pittaja Vrana treatment includes Shitodaka Parisechana, Dugdha Parisheka, Shita Pralepa (paste), and Ghratapana Madhura Kashaya etc. Kaphaja Vrana treatment includes Sanshodhana, Swedana, Ushana Vari Parisheka, Langhana etc. In Pakwa Avshtha i.e. in later stage of Vrana Sravana, Patana, Dahana, Sivana, Eshana etc. should be follow considering the age and strength of child. Bandhana is applied to protect wound from dust, insect, wind, sunrays. Formulation like Kalka and Kashaya are useful to enhance the healing of wounds. If Vrana occurred at vital points avoid treatment in child andadministered the medicines to Dhatri. In additionVranapurana with curdand rock salt is special invention of Acharya Kashyapa. After healing for cosmetic purposeSavarnikarana and Iomtopadana (regeneration of hair) is explained. The details of all children Vrana Upakrama will be furnish in full text article.

Keywords: Abhighata, Ayurveda, Kashyapa Samhita, Vrana

ANALYSING THE ETIOPATHOGENESIS OF LUMBAGO SCIATICA SYNDROME (GRIDHRASI)

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Abstract:

Introduction: Sciatica is a pain in the distribution of sciatica nerve or its component nerve roots. This syndrome is now accepted as being caused by lumbar disc prolapse. In Ayurveda it is grossly compared with the Lakshanas of Gridhrasi where pain is radiating from Sphik purva katitill pada.

Aims and Objectives: To highlight the importance of etiology in the production of Lumbago Sciatica Syndrome (LSS) / Gridhrasi. Pathophysiology/Samprapti of LSS /Gridhrasi will also analysed.

Materials and methods: Ayurveda Samhitas; other contemporary textbooks like Golwalla, Davidson, etc. and internet resources will be used.

Discussion and Conclusion: True sciatic neuritis is commonly caused by nerve injury due to infections or trauma. Mechanical pressure on nerve roots causes sciatic pain e.g. Protruded intervertebral discs due to trauma etc. This poster will highlight the etiopathogenesis of LLS / Gridhrasi.

Keywords: Sciatica, Gridhrasi.

IMPORTANCE OF SADACHARA IN THE PREVENTION OF PSYCHOLOGICAL TRAUMA

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Abstract:

Introduction: Ayurveda uniquely emphasized on Dinacharya in which Sadachara is having its own importance. Sadachara is a most neglected area, which is truly of utmost importance. Classical texts elaborated the points to consider in day to day life. Sadachara is one such concept, which enormously helpful for preventing trauma especially psychological trauma.

Aim & Objective: To understand and interpret the importance of Sadachara in preventing psychological trauma.

Material & Methods: Classical Ayurvedic texts, Online Sources and contemporary medical textbooks will be referred and reviewed for understanding importance of Sadachara in the prevention of psychological trauma.

Discussion: Importance of Sadachara in the prevention of psychological trauma will be discussed elaborately.

Conclusion: Importance of Sadachara in the prevention of psychological trauma will be concluded as per discussion.

Keywords: Sadachara, Psychological, Trauma, Dinacharya, Sadvrutta

SCOPE OF BALLISTIC TRAUMA CARE IN AYURVEDA-AN OVERVIEW

Khasarya Nainika¹ **Mali Kavya**² **Bhokan Archana**³ **Brahmabhatt Anjali**⁴ **Dr. Shyamasundaran K**⁵ **Dr. Eshwari Salian**⁶

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Abstract:

The absolute number of war deaths has been declining since 1946. In some years in the early post-war era, around half a million people died in wars. By 2007, the number of all war deaths was down by 22.13%. This drastic down fall in the mortality due to ballistic trauma can be ascribed to the advancements in the current techniques of military medicine. The roots of these techniques developed in different orders of chronology can be traced in our ancient classical texts. There is highly advanced wisdom of trauma care of our ancestors, a glimpse of which is available to us through the manifold ancient manuscripts. An effort has been made in this presentation to brief the techniques of Ayurvedic ballistic trauma care in parlance to Modern Medical Science.

Keywords: War, Ballistic Trauma, Care in Ayurved.

ગોરલ આયુર્વેદ

એનોરેકટલ એન્ડ ચાર્જેડ ફેર સેન્ટર

F-12, મહેશનગર, શ્રીશ્રી રેસીડેન્સીની સામે, સોમા તલાવ ચાર રસ્તા પાસે,
વાલોડીયા રીંગ રોડ, વડોદરા - ૩૬૦ ૦૨૫. Mob. : 95587 79737

ડૉ. નિલેશ જેઠવા

M.S. (Ayu.)

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ભાગરોગ નિષ્ણાત

રોગોના નિષ્ણાત

સમય : સોમથી શનિ સાંજે ૫.૩૦ થી ૮.૩૦ (રવિવારે OPD બંધ રહેશે.)

અતિ આધુનિક સાધન સુવિધાઓથી સજ્જ ઓપરેશન થીયેટર સાથેની મળમાર્ગની હોસ્પિટલ

હરસ : મળત્યાગ વખતે કંઈક ભાગ જેવું બહાર આવવું.

મળમાર્ગ દુઃખાવો થવો, સોજો આવવો.
મળમાર્ગ લોહી પડવું (ધાર ટપકો)

ભાગંદર : મળમાર્ગ આશુભાગ્ય વારંવાર ફોલી,
ગાંઠખૂંટ જેવું થવું.
તેમંથી પડ-ચિકારા-લોહી પડવું, ખંજવાળ આવવી.

હીથર : મળમાર્ગ બળતરા સાથે દુઃખાવો થવો
મળ સાથે ચોંટીને લોહી પડવું કે
ટપકે પડવું.

પાઈલોનીડલ સાયનસ : કમરના ભાગે ગુમડા જેવું કે
ચીરા જેવું લેવું.
કમરના ભાગમાં દુઃખાવો થવો.

- હરસ, મસા, ભાગંદર, કબજિયાત જેવા મળમાર્ગના રોગો માટેની સુપર સ્પેશીયાલીટી સગવડો.
- ક્ષારચુર પદ્ધતિ વડે હરસ-મસાનું ઓપરેશન
- લેસર પદ્ધતિ વડે હરસ-મસાના ઓપરેશનની સગવડ.
- સ્ટેપલર પદ્ધતિ વડે હરસ-મસાના ઓપરેશનની સગવડ.
- Radio Frequency પદ્ધતિ વડે હરસ-મસાના ઓપરેશનની સગવડ.
- ભાગંદરની સર્જરી માટેનું અતિ આધુનિક સેન્ટર.
- સંકેતોને કંટ્રોલ ન જાય તેવા પ્રકારના ઓપરેશન.

બાળરોગ વિભાગની સુવિધાઓ

- બાળકોની ચાદશક્તિ વધારવા માટેના આયુર્વેદ લેહન યોગ (ચાદશ).
- બાળકોને વારંવાર થતા શરદી-ઉધરસની સારવાર.
- બાળકોનું વજન ઓછું લેવું, ભૂખ ઓછી લાગવી, કબજિયાત રહેવી વગેરે સમસ્યાઓની સારવાર.
- “સુવર્ણપ્રાશન” ની સુવિધા.
- બાળકોના વિવિધ રોગો જેવા કે ખંચ, સફેદ કોઢ, અને ચામડીના રોગોની પંચકર્મ દ્વારા સારવાર.

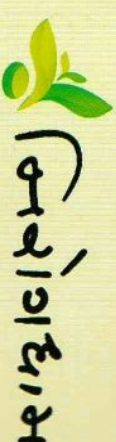
રોડીકલેમ ની સુવિધા ઉપલબ્ધ

રપેરચાલીટી

- * પંદયત્વ નિવારણ અને ઉત્તમ સંતાન પ્રાપ્તિ માટે ગર્ભાધાન સંસ્કાર
- * રસાયન અર્ન પંચકર્મ ચિકિત્સા
- * હાડકા તથા સાંધાના રોગો
- * વાળ અને ત્વચાને લગતા રોગો
- * ગર્ભાશયના રોગો તથા Tubal Blockage, બીજવું ન બનવું વિગેરે રોગો.

ઉપલબ્ધ સુવિધાઓ

- * અત્યાધુનિક પંચકર્મ કક્ષ
- * દરેક કક્ષમાં પ્રકૃતિને અનુરૂપ હળવું સંગીત
- * આયુર્વેદના સિદ્ધાંતો મુજબ રોગ નિદાન તેમજ ઉચ્ચ ગુણવત્તા યુક્ત પ્રમાણિત આયુર્વેદિક ચિકિત્સા
- * નાડી નિદાન તેમજ પ્રકૃતિ પરિક્ષણ
- * દર્દીને દાખલ કરવા માટે રપેરચલ રૂમની સુવિધા
- * રવરથ વ્યક્તિ માટે જરૂરી એવી દિનચર્યા, અતુચર્યા, આહારનુ માગદર્શન



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એ-4, નિલામ્બર બંગ્લોઝ, નારાયણ સ્કૂલ સામે, પરિવાર ચાર રસ્તા પાસે,
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Dr.HR's Ksharasutra

FEATURES:

- Ksharasutra prepared in UV chamber (Special Design) with 21 Coating (Bhavna).
- 7 Bhavna with Apamarga KShara (Collected and prepared by self)
- Three Bhavna with Haridra (Dried and powered by self).
- Packed in air tight attractive plastic container.
- 11 Bhavna with snuhi Kshera (freshly collected).

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