



CURRENT ISSUES, CASE STUDY, RESEARCH ACTIVITIES, STUDENTS ARTICLES, COLLEGE ACTIVITIES, QUIZ, HOME REMEDIES

प्रज्वलितो ज्ञानमयो प्रदीपः ।



Editorial



आहार is one among the three pillars which upholds the life.

तुष्टिः पुष्टिर्बलं मेधा सर्वमन्ते प्रतिष्टितम्..... । । (Cha. Su. 27)

Satisfying the body needs, enhancement of both physical and mental strength, promotion of intelligence are the innate qualities of food.

The present issue is also dedicated to highlight the Ashadha maasa special camp, Independence day celebration and other cultural activities of our institution.



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"Empty vessels make the most noise"

PRINCIPLES OF HUMAN NUTRITION

KAC UAND NEMS



Dr. Vijayalaxmi P. B, B.A.M.S, M.D (Ayu.), P.G.D.N.D, Reader, Dept. of Dravya Guna

INTRODUCTION

Nutrition is a science of food and its relationship to health. The Nutritional science deals with the nutrients which are present in foods. Nutrients are chemical compounds present in foods and they are absorbed and used to nourish the body and promote the health. Food is anything that we consume and drink. Foods nourish, repair and help to maintain health of our body. Food is associated with satisfaction of hunger, love and affection. Food always linked with physiological functions, social functions and psychological functions. Food also helps to remember God, festivals, family or social functions. It is also a media to show positive and negative emotions. Foods are the substances which we eat and drink everyday in cereal and pulse proportions, vegetables, fruits, milk, milk products, egg, meat, tea, coffee.

Food groups

All the foods we consume are grouped into three based on functions of the foods.

- Energy rich foods: carbohydrates and fats
 Eg:- cereals, millets, pulses, fat, oils, oil seeds, sugar, jaggery
- Body building foods:- proteins, minerals and vitamins
 Eg:- pulses, nuts, oil seeds, milk, milk products, meat, fish and poultry.
- Protective foods: vitamins and minerals
 Eg:- green leafy vegetables, fruits, milk and milk products, egg and flesh foods.

Another classification of food groups is suggested for the use of common man.

	Group	Major nutrients
1	Cereals, millets and their products	Energy, protein, thiamine, riboflavin, folic acid, iron and fiber
2	Pulses and legumes	Energy, protein, invisible fat, thiamine, folic acid, calcium, iron and fiber
3	Milk, meat products, flesh, poultry, egg	Protein, fat, riboflavin and calcium
4	Fruits and vegetables	Carotenoids, vitamin C, folic acid, fiber, calcium, iron
5	Fats and sugars	Energy, fat, essential fatty acids

NUTRIENT FOODS

Foods are made up of various chemical substances called nutrients. These are organic materials which help in nourishing the body. Nutrients are generally divided into macronutrients and micronutrients.

Macronutrients constitute the bulk of the diet and are needed in large quantity. It supplies energy, maintenance of growth and activity. Eg., carbohydrates, fats, proteins.

Minerals and vitamins are micronutrients and are essential to the body in small quantities.

NON-NUTRIENT FOODS

Foods contain non-nutrients substance. They do not carry out any nourishing functions, but they maintain health in various ways. Some of the phytochemicals like plant pigments, anti oxidants, pol phenols, ticopherols, linolic acid, omega3 fatty acids are present in plant foods. They are easily obtained from cereals, pulses, spices, vegetables and fruits. They helps in prevention of diabetes, cardiovascular disease and cancer.

RECOMMENDED DIETARY ALLOWANCES (RDA)

A well balanced diet helps in obtaining all the daily required nutrients in desirable quantity to maintain health through healthy combinations of foods from various food groups. Everybody has different nutritional

"An idle brain is the devil's workshop"



requirements depending on their age, sex and body weight. Desirable level of nutrition can be obtained by following dietary guidelines to maintain health and to free from deficiency disorders. CMR has recommended dietary allowances for general population for various age groups.

Food	Man	Woman	Lactating woman	Pregnant woman	School children
Cereals & millets	420g	300g	330g	300g	120-210g
Pulses	60g	60g	90g	60g	30-45g
Roots & tubers	200g	100g	100g	100g	100g
Fruits	100g	100g	200g	200g	50g
Fat & oils	20g	20g	30g	30g	20-25g
Milk	300ml	300ml	500ml	500ml	500ml
Meat, fish, egg	50g	50g	80g	80g	60g

RECOMMENDED DIETARY ALLOWANCES

Conclusion

Food contains nutrients and other materials and they help in maintaining health. Various food groups provide energy, repair of body tissues and protect from various disorders. A well balanced diet helps in obtaining all the daily required nutrients. The one gram of carbohydrate gives 4Kcal, fat gives 9Kcal and protein 4Kcal of energy. Energy requirement is based on the physical activity. Energy balance is essential for maintaining good health.



A CASE STUDY ON GRIDRASI WITH THE INVOLVEMENT OF PITTA

Dr. Bhagyesh. K, MD(Ayu) Treating Physician, Dept. of Kayachikitsa Attending P.G Scholars : Dr. Nikitha sharma Dr. Lavanya

Dr. Anishma Devi

A 53 year old female resident of kasargod working as beedi worker presented with low back ache since 8 years and radiating pain to both legs since 3 years. She also complained of pain radiating from neck to right arm, burning sensation in soles, stiffness of joints mainly lumbar spine, occasional episodes of fever on severe pain. Patient had sleeplessness due to intense pain. She was not able to sit straight nor walk due to pain. In spite of regular medication for past few year patient had no relief. On examination of locomotor system, pain and tenderness was found in cervical and lumbar. SLR was found to be positive bilaterally (Rt-10', Lt-10')

CT scan report :- Posterior disc bulge in C3-C4, C5-C6, L3-L4, L5-S1 with indentation in L5-S1, loss of lumbar curvature

Diagnosis: - The case was diagnosed as pittanubandhita gridrasi with vishwachi

Treatment plan:- Initially patient was treated with Choorna pinda sweda with Kolakulattadi choorna with mild temperature for 2 days. Siravyadhana was performed on 20/4/2015. Next day itself intensity of pain, stiffness, burning sensation was reduced. 1 day later virechana with Gandharvahastadi eranda taila 25ml + milk 20ml on 21/4/2015 & 22/4/2015, later patient was treated with abhyanga with pinda taila and Drava sweda with Dashamoola ksheera dhara followed by Niruha basti with Panchatikta ksheera and Anuvasana with Ksheerabala tailam in the pattern of yoga basti. Another set of siravyadhana was done on 29/5/2015. Patient was internally administered with Gandharvahastadi kashaya 2tsp(o/d) at morning, Rasnaerandadi kashaya 2tsp(o/d) at night, Chandraprabha vati 2tab (B/D), Marmani lepa externally with egg yolk.

During course of treatment presenting symptoms of patients such as pain, stiffness and radiating pain are gradually reduced and at the day of discharge patient feels 95% of relief from pain.

Treatment was planned on the basis of patients presentation such as shoola, daha, jwara indicating the involvement of vata with rakta, In Charaka samhita reference of involvement of Pitta dosha in Gridrasi is not



mentioned but has mentioned Siravyadhana as chikitsa for Gridrasi. But Sushrutha has explained in samprapti as vata vitiating kandara in both Gridrasi and vishwachi, where kandara being upadhatu of Rakta. But Hareeta has clearly explained Gridrasi as vata-raktaja vikara. So the above patient was treated with vata-raktahara chikitsa such as Siravyadhana, Virechana, Pinda taila abhyanga, Drava sweda, Yoga basti & application of marmani lepa and internal administration of vata-raktahara yogas.



"A CLINICAL COMPARITIVE STUDY OF AGNIKARMA WITH LOHA SOOCHI & PANCHALOHA SHALAKA IN THE MANAGEMENT OF SNAYUGATHA VATA W.S.R TO TENNIS ELBOW"



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Dr. Hariprasad Shetty, MS (Ayu.) Co-Guide

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ABSTRACT

BACKGROUND AND OBJECTIVES

Tennis elbow is one of the commonest causes of elbow joint pain which we see in our OPD, as the disease is very difficult to cure with medications. The prevalence is more among the manual laborers and house wives in our country who need a cheaper, quick and effective treatment. Tennis elbow is a disease which disturbs a person's regular day to day activities because in this condition forearm movements are restricted due to pain.

Tennis elbow is painful inflammation of the origin of the common extensor tendon of the lateral epicondyle of the humerus caused by the overuse of forearm muscles. Since it is a tendinitis it can be considered as snayugatavatavyadhi which is very well explained in ayurvedic texts and the treatment mentioned is agnikarma. Presently in modern medicine, there are many treatment methods for tennis elbow which are widely practiced. They are achieved sometimes by splinting the adjacent joint, rest, massage and local corticosteroid injections into the tender area around the tendon and mostly these treatment methods do not provide satisfactory results and if the symptoms do not settle; surgery is required. But it goes with the limitations like,

- 1. Risk of recurrence.
- 2. Risk of surgical and post surgical complications
- 3. Chance of infections
- 4. Postoperative immobilization and long ambulatory period.

With such a treatment scenario ayurvedic treatment with agnikarma provides good and satisfactory results.

METHOD

The effects of Agnikarma with soochi&shalaka procedures are evaluated clinically in 30 patients, having Tennis Elbow, 15 in each group. Both procedures carried out for single sittings. The assessment&valuation of the symptoms of the disease ie pain and tenderness were done before treatment, after 7 days and 14th day. **RESULT**

The agnikarma with shalaka showed highly significant result than such i in the treatment of Tennis Elbow.

INTERPRETATION AND CONCLUSION

The agnikarma with shalaka was highly effective on both the symptoms of Tennis Elbow.

KEY WORDS

Snayugathavata: vatavyadhi; Agnikarma.



"PHARMACOGNOSTICAL AND ANALYTICAL STUDY OF KAMPILLAKA (Mallotus philippensis Muell. Arg.) W.S.R. TO DIFFERENT MARKET SAMPLES"



Dr. Ritu Saini P.G. Scholar Dept. of Dravyaguna Dr. Avinash K. V. Co- Guide Dr. Leeladhara D. V. Guide

Ayurveda is ancient & holistic science of Indian medicine. It is considered as Upaang (subunit) of Atharvaveda. The earliest mention of medicinal use of plants is found in Rig-Veda, perhaps the oldest repository of human knowledge.

The pharmaceutical industries, traditional Ayurvedic physicians and research institutions are dependent on drug traders for their need. Current industrial practice of manufacturing herbal products requires large quantities of plant materials since the demand is high. This is the main cause of adulteration. The efficacy of many drugs is fading because of adulteration. Adulteration in market samples is one of the greatest drawbacks in promotion of herbal products.

Kampillaka (Mallotus philippensis Muell. Arg.) is one of the herbs mentioned in all ancient scriptures of Ayurveda. Its various medicinal preparations are mentioned by different Acharyas.

OBJECTIVES

- To procure the different market samples of Kampillaka Phalaraja and genuine sample from natural habitat
- To compare the market samples with genuine sample by Pharmacognostical and Phyto-chemical parameters.Materials and Methods
- Collection of Kampillaka (Mallotus philippensis Muell. Arg.) Phalaraja from natural habitat and procurement
 of different market samples of Kampillaka.
- Pharmacognostic study of market and genuine samples
- Market samples are collected from the different parts of India such as Kolkata, Haryana, Gujarat and
 Kerala for the present study.
- Aqueous, Acetone, Chloroform and alcoholic extraction of all the samples were carried out.
- Physicochemical and phyto-chemical study of Market and Genuine sample was done.
- Qualitative analysis by HPTLC of alcohol extract was carried out for all samples.
- For the HPTLC work TLC chamber, silica gel G precoated plate, UV chamber, automotive sample applicator and HPTLC scanner are used.

RESULT

After the pharmacognostic and analytical study Gujarat market sample values are very nearer to Genuine sample. Keywords : Pharmacognostical, Analytical, Kolkata, Haryana, Gujarat, Kerala.

"PROSPECTS OF RECOVERING ARKA AS A BYPRODUCT IN THE PREPARATION OF KWATHA" - A PHARMACEUTICO ANALYTICAL STUDY W.S.R. TO PATHYA SHADANGA KASHAYA.



Dr. Satheesh S. P. G. Scholar Dept. of RS & BK Dr. Purushotham K. G.

Dr. Harshitha M. Co-Guide Dr. Rohini D. Bharadwaj H.O.D.

BACKGROUND & OBJECTIVE : Ayurvedic Pharmaceutical industry depends on plant materials for preparing medicines. Deforestation and urbanization reduced availability of the plant materials. This Scarcity of raw materials seriously started affecting productivity of industry. To Avoid Scarcity of raw materials if one can increase

the productivity from a given sample it can help to reduce use of available recourses. Kwatha kalpana and Arka kalpana are two important preparations in Ayurvedic pharmaceutics. Acharya Ravana explains details of many arka preparations. Many Physicians use arka for their practice. Kwatha kalpana and Arka kalpana was having same principles of preparation. So combining these principles may produce Kwatha and Arka from a given amount of drugs. This will help reduction of using raw material. For the trial Pathya Shadanga Kwatha from Sharangadhara Samhita is taken and arka is prepared while preparing kwatha for this study kashaya is made in three different processes and all samples analyzed physico chemically.

Result: physico chemical parameters shown similarities and HPTLC shown 5 peaks with similar Rf and Area under the curve.

CONCLUSION: Similarity in these physico chemical parameters and HPTLC shows that qualitatively and quantitatively these samples are equal. This equality shows that it is possible to recover arka as a byproduct during the preparation of kwatha.

A COMPARATIVE CLINICAL STUDY ON NASYA WITH MASHABALADI KWATHA AND MASHABALADI TAILA IN MANYASTHAMBA



Dr. Litty C. J. P.G. Scholar Dept. of Panchakarma **Dr. Bhagyesh K.** Co- Guide Dept. of Kayachikitsa Prof. Dr. N. S. Shettar Guide Dept. of Panchakarma

KAC UANT NEM?

This study focused on important procedure i.e. Nasyakarma and also focused on common clinical entity Manyasthamba.

Being Manyasthamba is a Vataja Nanatmaja Vikara, which occurs in Urdhwajatru Pradesa, Nasya is considered as the best line of Panchakarma procedure, as "Nasahi Shiraso Dwaram" i.e nose is the gateway to head. So Nasyakarma is believed to have a noteworthy role in relieving Manyasthamba.

Mashabaladi Yoga described in Chakradutta and Vangasena for Manyasthamba, is the combination of drugs having the property of Ushnaveerya and Doshaghnatha as Kaphavatahara. Hence Mashabaladi Yoga was used here for Nasya. Main aim of this study was to find out the comparative effect of Nasyakarma in the form of Kwatha as well as Taila for the management of Manyasthamba. Therefore two groups were made and the results obtained in both the individual groups were compared.

A significant response was obtained in both groups with the percentage reduction in symptoms. After follow up Nasya with Mashabaladi Kwatha shows 93 % complete remission and 7%moderate response and Nasya with Mashabaladi Taila shows 46% complete remission and 27 % marked improvement as well as moderate improvement. Group-A overall result was 94.77% and Group-B overall result was 81.43%. From this we can conclude that, Nasya with Mashabaladi Kwatha having more result than Nasya with Mashabaladi Taila in the management of Manyasthamba.

In Manyasthamba, Mashabaladi Yoga is best advisable because Ingredients of Mashabaladi yoga are Brumhana Dravyas and having Kaphavata hara property carried by Saindhava which is having Sookshma,Ushna and mainly Vyavayi properties. So this can penetrate deep inside the body and mainly help in regeneration of degenerative tissues.

Key words : Manyasthamba, Cervical spondylosis, Nasya, Mashabaladi Kwatha, Mashabaladi Taila.

"He laughs best who laughs last"



RAC UAND NEMS

Samskara

"A COMPARATIVE ANALYTICAL STUDY OF JAYAPALA BEEJA (CROTON TIGLIUM LINN.)

SHODHANA W.S.R. TO NIMBU SWARASA BHAVANA"

Dr. Vijay Shankar M. R. P. G. Scholar

Dr. U. Santhosh Nayak Co-Guide

Dr. Bhagyalakshmi T. R. Guide & HOD, Dept. of PG studies in Agada Tantra

INTRODUCTION

Acharyas have mentioned various purification methods to retain the therapeutic efficacy of various toxic drugs. Jayapala which is one among the upavisha is widely used in many drug formulations. It is well known for its Virechana property. Jayapala seeds contain croton oil and toxic resin which is poisonous in nature. Hence its purification is necessary for therapeutic use. In Sharangadhara Samhita there is a reference regarding Jayapala Beeja Shodhana by using buffalo dung. Here Acharya have mentioned the importance of Bhavana with Nimbu Swarasa. It is mentioned that, more number of Bhavana will increase the potency of the drug. Taking this point the present study is carried out analytically to evaluate the changes in the Jayapala beeja while doing shodhana and repeated Bhavana.

AIM& OBJECTIVES OF THE STUDY

- Analytical study of the sample A before Jayapala Beeja Shodhana. 1.
- Analytical study of the sample B before Nimbu Swarasa Bhavana. 2.
- Analytical study of the sample Cafter one Bhavana with Nimbu Swarasa. 3.
- Analytical study of the sample D after seven Bhavana with Nimbu Swarasa. 4.
- Comparative analytical study of all the 4 samples. 5.

Dr. Pratima B. S

Dept. of Dravyaguna Vignana

P. G. Scholar

Keywords : Jayapala Beeja Shodhana, Nimbu Swarasa Bhavana , Virechana

The study is under progress

"A PHARMACO-CLINICAL EVALUATION OF DHANYAKA (Coriander SativumLinn) W.S.R. TO ITS MOOTRALAPROPERTY"



Dr. Avinash K. V. Co-Guide

Dr. Kavitha B. M. Guide

Dr. Rajashekhara N H.O.D.

Ayurveda being "Science of life" gives importance to ahara which plays an important role as pathya in swastha and athura. Dhanyaka is commonly used in Indian culinary as a spice . Ayurveda has emphasized many mootraladravyas which are easily available, cost-effective, no adverse effects, among which dhanyaka is also mentioned and can be used as mootraladravya.

Mootrala Dravyas are the one which enhances the quantity of urine. Mootra is composed of agni and jala mahabhuta, even the mootraladravya should also posses the same property. Sheetha veerya dravyas increases the quantity of urine by reducing the reabsorption of fluids through the urinary tubules. Agneya dravyas increases the Glomerular Filtration Rate. Thus, they increase overall volume of the urine. Hence, the present study is aimed to conduct scientific evaluation of the mootrala effect of Dhanyaka (CoriandrumsativumLinn.) belonging to Apiaceae family.

OBJECTIVE OF THE STUDY :

- Pharmacognostical and Analytical study of Dhanyaka (Coriandrum sativum Linn.) 1.
- To evaluate the mootrala karma of Dhanyaka shaka and phala in the form of Hima. 2.
- To compare the most effective form of drug , among the above two. 3.

MATERIALS AND METHODS

Literary Data will be collected from classical and modern literature, internet and other available sources of 1. information.

"Great haste makes great waste"

- 2. The drug Dhanyaka for the present study will be identified and collected.
- 3. Clinical assessment of mootrala karma of DHANYAKA (*Coriandrum sativumLinn.*) will be carried out on 60 healthy volunteers of age group ranging between 16-50 years divided in to control group and trial groups.
- 4. Trial groups will be administered with hima of dhanyaka shaka and phala in comparison with control group with plain water in a dose of 100ml.

ASSESSEMENT CRITERIA

Quantity of urine output and frequency will be monitored up to 24 hours in comparison with Control Group.

The study is under progress



QUALITY RISK MANAGEMENT IN PHARMACEUTICAL INDUSTRY

KAC UAND NEM?

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ABSTRACT

In the pharmaceutical industry every product and every process associated with risks. The Quality Risk Management (QRM) approach initiated by regulatory agencies with recognized management tools along with support of statistical tools in combination allows for a risk-based approach to quality management, thus ensuring that resources are deployed in a timely and expeditious manner to areas that need them most. QRM improves risk awareness and accelerates detection of potential issues by analyzing and comparing existing data from a quality perspective to manage product quality, manufacturing processes, validation and compliance within a risk based Quality Management System. In addition quality risk management improves decision making if a quality problem arises. It should include systemic processes designated to co-ordinate, facilitate and improve science-based decision-making with respect to risk.

INTRODUCTION

Risk management principles are effectively utilized in many areas of business and government including finance, insurance, occupational safety, public health, pharmacovigilance, and by agencies regulating these industries. Appropriate use of quality risk management can facilitate but does not obviate industry's obligation to comply with regulatory requirements and does not replace appropriate communications between industry and regulators.

PRINCIPLES OF QUALITY RISK MANAGEMENT

Two primary principles of quality risk management are:

- The evaluation of the risk to quality should be based on scientific knowledge and ultimately link to the
 protection of the patient; and
- The level of effort, formality and documentation of the quality risk management process should be commensurate with the level of risk.

GENERAL QUALITY RISK MANAGEMENT PROCESS

Quality risk management is a systematic process for the assessment, control, communication and review of risks to the quality of the drug (medicinal) product across the product lifecycle. Other models could be used. The emphasis on each component of the framework might differ from case to case but a robust process will incorporate consideration of all the elements at a level of detail that is commensurate with the specific risk.

- (1) Responsibilities (2) Initiating a Quality Risk Management Process
- (3) Risk Assessment (4) Risk Control (5) Risk Communication

RISK MANAGEMENT METHODOLOGY

Quality risk management supports a scientific and practical approach to decision-making. It provides documented, transparent and reproducible methods to accomplish steps of the quality risk management process based on current knowledge about assessing the probability, severity and sometimes detectability of the risk. Below is a non-exhaustive list of some of these tools:



- Basic risk management facilitation methods (flowcharts, check sheets etc.); .
- Failure Mode Effects Analysis (FMEA); .
- Failure Mode, Effects and Criticality Analysis (FMECA); .
- Fault Tree Analysis (FTA); .
- Hazard Analysis and Critical Control Points (HACCP); .
- Hazard Operability Analysis (HAZOP); .
- Preliminary Hazard Analysis (PHA); .
- Risk ranking and filtering; .
- Supporting statistical tools. .

INTEGRATION OF QUALITY RISK MANAGEMENT INTO INDUSTRY AND REGULATORY OPERATIONS

Quality risk management is a process that supports science-based and practical decisions when integrated into quality systems. As outlined in the introduction, appropriate use of quality risk management does not obviate industry's obligation to comply with regulatory requirements. However, effective quality risk management can facilitate better and more informed decisions, can provide regulators with greater assurance of a company's ability to deal with potential risks, and might affect the extent and level of direct regulatory oversight. In addition, quality risk management can facilitate better use of resources by all parties.



ABBE's REFRACTOMETER

Dr. Krishnendu. V PG Scholar Dept. of RS & BK



Refractometer : An optical instrument used to measure refractive index ("RI") or index of refraction. The method of measuring substances' refractive index is known as refractometry.

Refractive index (RI) : One of the fundamental physical properties to assess the composition or purity of substances. According to Snell's law it is defined as the ratio of velocity of light in air to the ratio of substance. RI is a unit less number, between 1.3000 and 1.7000 for most compounds.

Common uses of RI:

- Help identify or confirm the identity of a sample by comparing its refractive index to known values. .
- Assess the purity of a sample by comparing its refractive index to the value for the pure substance.
- Determine the concentration of a solute in a solution by comparing the solution's refractive index to a standard curve.

PRINCIPLE

Light refraction through liquids to determine the amount of dissolved solids in liquids and showing the refracted angle on a scale.

The Brix scale is defined as: the number of grams of pure sugar cane dissolved in 100 grams of pure water (grams sugar/100 grams H2O). In Abbe's Refractometer, the RI can be read directly, only a few drop of the liquid are needed, and either white or monochromatic light can be used. This Refractometer consist, mainly a telescope and two matched right angle prisms. The liquid is placed in contact with the prisms. A ray of light passing through the prism and liquid get refracted at a critical angle at the bottom surface of measuring prism. Hence , the prism must be rotated through an angle. And the rays may be parallel to the telescope. This angle of emergence determine the RI. By adjusting the light and dark portions of the field so that the line of demarcation is sharp and coincides with the cross hairs, the refractive index can be read directly on the scale. The prism box has a jacket so that temperature can be controlled and the telescope has a set of amici prism , for compensating light aberration. Since the RI of a pure substance is constant at constant temperature and pressure, it can be used as a means of identification. It is used to determine the purity of oils, fats, and waxes. It is used to determine the amount of sugar in sugar solutions and in general, for determining total solids in fruit juices, tomato products, honey, syrups and soda water.

"Spare the rod and spoil the child"



 MARMA GUTIKA (IV year BAMS)

 वरी विदारी जीवन्ति वाराहि मुस्तकं तथा |

 तवक्षीरं च आमलकी सरीवाथ गुडूचिका | |

 कुरुविक्कत दूर्वे च प्रत्येकस्य समाहरेत् |

 ख्वथयोरेतयोरन्त्यं तृतीयं पेषणं मतम् |

 गुटी मर्मगुटी नाम्ना सर्वमर्म विकरजित् ॥

(Ref. : Sahasra Yogam)

Vari, Vidari, Jeevanti, Varahi, Musta, Tavaksheera, Amalaki, Sariva, Guduchi, Kuruvikkanda (beeja churna of Kushmanda), Durva satwa of these drugs each 192gm

Churna of Madhuka & Chandanadwaya - each 192 gm

Churna of Garudashma, Shilajatu, Katini, Swetanirveshi, & Sahasravedhi - each 24gm

Mix all these ingredients together & give bhavana with kashayaa of Matsyakshi, Kataka, Murvamoola, Prasarini, Hreeberaka, Usheera, Gojihwa, Gokshura, shringa of Nyagrodha, Udumbara, Aswatha & Vata - each 92 gm churna & 9.2 litres of water.

2nd bhavana with Kashaya of Sushvi jambu, Lodhra, Ashwatha twak, Nyagrodha twak, Udmbara twak, Aswadha twak, Vata twak, Darvee twak, Karika twak.

Take Pashanabheda moola 384 gm & cook in12.2 litres of water and prepare another kwatha with mudga, Masha & Ela. These kwatha should be mixed together and 3rd bhavana is given. Then make pills and dry under shade. Indicated to all type of marma rogas.

SHARANGADHARA SAMHITA

(III year BAMS)

Ancient treatises of Ayurveda have been broadly classified into two groups viz, the Brihat trayee and the Laghu trayee. Sharangadhara samhita is one among Laghu trayee. It is assigned to the early part of 14th century A.D. It is written by Acharya Sharangadhara. The text predominantly deals with the Bhaishajya kalpana, Brief narration about the basic principles, anatomy and physiology, method of diagnosis of diseases, and enumeration of diseases. It is written in simple language. The book consists of 32 chapters with 2600 verses. The first section consists of 7 chapters and 585 verses, the second has 12 chapters and 1261 verses, and the third section consists of 13 chapters and 682 verses.

Prathama khanda has one chapter each for paribhasha, bhaishajya vyakhyana, nadi pareekshadi vidhi, deepana pachanadi, kaladikakhyana and roga jnana.

Madhyama khanda describes the composition, method of preparation, and uses of different kinds of formulations. It has one chapter each for swarasa, kwatha, phanta, hima, kalka, churna, gutika, avaleha, sneha, sandhana, dhatu shudhi, and rasa aushadhas.

Utara khanda- the third and the last section explains the different kinds of treatment in separate chapters viz, snehana, swedana, vamana, virechana, sneha basti, niruha basti, uttara basti, nasya, dhumapana, gandusha, lepa, shonita visruti, and netra prasadana.

	SATAVARI (IInd year BAMS)	
	: Asperagus racemosus FAMILY: liliaaceae	
SYNONYMS	: Satavari, Vari, Sukshmapatra, Shataveerya, Swadurasa.	
BOTANICAL DESCRIPTION	: A climber armed with recurved spines, because of which it is protected from external invasions.	



The leaves are thin linear and like the tongue of snakes. The tubers are many succulent, tuberous and full of juice. It is having many virya, useful in many diseases and it is recommended by sages from ancient time.

CHEMICAL COMPOSITION	:	Sugar, Glycosides, Saponin, Sitosterol.
PROPERTIES	:	RASA- Madhura, Tikta, GUNA-Guru, Snigdha, VIRYA - Sita, VIPAKA- Madhura
KARMA	:	Vatapittasamaka
INDICATION	:	Sotha, Raktapitta, Apasmara, Gulma.
PARTUSED	:	Root Tubers
IMPORTANT PREPARATION	:	Satavari Ghrta, Satavari Rasayana, Satavari Kalpa, Mahanarayana Taila.

IKSHU VARGA

(GROUP OF SUGARCANE JUICE AND ITS BY PRODUCTS)

(Ist year BAMS)

Juice of sugarcane is Sara, Guru, Snigdha, Brimhana, Seeta Virya, Madhura Rasa and Madhura Vipaka and it cause the increase of Kapha, Mutra and it is Vrishya. It cures bleeding diseases.

Poundraka- A variety of sugarcane and it is best because its Seeta Guna, Prasada Guna and Madhura rasa, next to it, is the Vamshika variety. Next are the Shataparvaka, Kantara, Naipala in respective order, are slightly alkaline and astringent in taste, Ushna virya and cause burning sensation.

PHANITA:

Phanita is heavy, Abhyshyandi, and cause increase of Doshas and cleanses the urine.

GUDA:

Purified Guda does not cause increase of Kapha, helps in easy elimination of urine and faeces, the unpurified variety causes worms and promotes growth of bone marrow, blood, fat, muscles, tissues and also of Kapha Dosha

Purana guda is good to heart and considered healthy. That which is newly prepared vitiate of Kapha and weakens digestive activity.

MATSYANDIKA:

Matysandika and Kanda sita in their succeeding order are better, are aphrodisiac, good for emaciated and wounded patients.

YASA SARKARA:

Yasa Sarkara has similar properties to sugar but it is bitter, sweet and astringent in taste.

All sugars cures burning sensation, thirst, vomiting, fainting, bleeding diseases. Among the products of sugarcane juice, sugar is the best and Phanita is the WORST.

Achievements

STAFF ACHIEVEMENT



Dr. Lakshmisha. K. S., Lecturer, Dept of Panchakarma gave a talk on folklore medicines- its usage, in Govt. Higher Primary school, Mandekolu, conducted by Lions & Lioners club Sullia in association with Kendriya Karmika Sikshan Mandali, Manglore.



Dr. Udayashankar,

Prof. Dept of Shalakya Tantra has written a book named "Hasi Maddu Khushi Maddu"

"Absence makes the heart grow fonder"

College Activities







Inauguration of "Aati camp"



Patients registering for the camp Independence Day Celebration







Drawing Competition



Collage Competition

"A bad workman always blames his tools"



College Activities

Cultural Competitions

















"Don't judge a book by its cover"







KVG AYUR NEWS Samskara

Field Visit





2nd year BAMS Dravyaguna field visit to Mandekolu forest



Shuttle badminton winners

Football Team



Cricket Team



1. Use of paste of hibiscus leaves and flower is good for dandruff and hair fal.

2. By chewing the leaves of Nirgundi, the mouth ulcer can be cured.

3. Intake of Garlic juice reduces the severity of cold.

Dr. Sreejith K.R, Internee

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- 2. Articles published here in are not to be reproduced any where without the consent of the publishers.
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То	BOOK POST	

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