

Profile of Patients Attending Panchkarma O.P.D. at Dhanvantari Ayurved Medical College and Hospital, Udgir

Alka K. Bhandare^{1*}, R. R. Kurawar², Dattatraya Patil³, Satis Haridas⁴, Jitendra Surwade⁵

{¹Associate Professor, Department of Rachana Sharir, ²Assistant Professor, Department of Panchkarma,

³Associate Professor, Department of Samhita Sidhant}

Dhanvantari Ayurved College, Udgir. Latur. INDIA.

⁴PG Resident, ⁵Assistant Professor, Department of Community Medicine, MIMSR Medical College, Latur, Maharashtra, INDIA.

*Corresponding Address:

bakreader_10@rediffmail.com

Research Article

Abstract: Ayurveda teaches that health is maintained by the balance of three subtle energies, known as vata, pitta and kapha, and these three doshas are also responsible for illness of human being when they are in imbalanced condition. As each individual has its own particular balance of these three forces called as Prakruti or constitution, Ayurvedic treatments are specific to every individual. Such an approach has proven effective over the centuries and as a result, these healing regimens are becoming more and more popular all over the world. The aggravated doshas which are hiding in the cells do not come out easily, by the simple treatment. Such vitiated doshas also don't allow the various effective and good medicines to act on the body tissues because of the obstructive phenomena. Hence, it becomes absolutely necessary to remove them by some special process from the body. This is known as Panchakarma. Hence we have undertaken this study for analysis of patients coming to Panchkarma O.P.D. The study was conducted on patients coming to panchakarma O.P.D. from April 2013 to Aug 2013. The statistical analysis showed that more patients were found between the age group of 20-40 years that is 58.89 %. maximum patients were male that is 57.45%, more patients from urban that is 81.42%, disease wise distribution shows maximum patients were of vatavyadhi that is 55.06% and G.I.T that is 30.45%. to overcome these problems, there is a strong need to create awareness to follow the rules of DINACHARYA and RITUCHARYA as advised by ayurveda. This also highlights effectiveness of Panchkarma more in vatavyadhi.

Key words: panchkarma OPD, Vata vyadhi

Introduction

Ayurveda is one of the oldest scientific medical systems in the world. This science was first recorded before 5000 years back and it is a part of great vedic tradition. It has a long record of clinical experience and is truly a holistic medicine. However it is not only the system of medicine in the conventional sense of curing the disease, but also a way of life that teaches us how to maintain and protect health. It describes the diet, medicines and behavior that is beneficial or harmful for life. It classifies not only individuals but also food, herbs,

emotions, climates and life-style suitable to individual. Body constituents- Dosha-Dhatu-Mala. Health is maintained by the balance of three subtle energies, known as vata, pitta and kapha. Biological water humour or Kapha is responsible for strength and immunity. It also provides the basic substratum to all tissues of the body, biological fire humour or pitta is responsible for digestion and metabolism whereas biological air humor or vata is responsible for all the movements-gross and subtle-in the body. Physical and mental diseases occur due to the variation of somatic doshas vata , pitta, kapha and due to mental doshas Rajas and Tamas. Panchkarma means-medicated emesis, medicated purgation medicated enemas, nasal medication and bloodletting are the five purification procedures for removing accumulated toxins and other materials in the body. Panchkarma play a vital role in ayurvedic system of medicine. The importance of Panchkarma in Ayurveda is testified by the fact that it is applicable to all cases covering a wide range of curative, preventive, and promotive conditions. Panchkarma is meant for elimination of malas.

Panchkarma includes

1. Vaman meaning emesis: for elimination of Kapha
2. Virechna meaning purgation: for elimination of pitta
3. Basti meaning enema: for elimination of vata.
4. Nasya meaning head evacuation: for cleaning the sinuses and thereby improves the functions of sense organs.
5. Raktamokshna meaning bloodletting: for diseases related to Ras-rakt dhatu.

Panchkarma present a unique approach of Ayurveda to therapy with specially designed five

procedures of internal purification of the body through the gross channels like G.I. Tract, Respiratory Tract etc. up to the subtlest levels such as cells, molecules, cells membranes etc. Such purification permits the biological system to return to normalcy and to rejuvenate spontaneously and also facilitates the desired pharmacokinetic effect of curative remedies administered thereafter. It eliminates toxins and stagnated Malas and metabolites from the body, cleans the macro and micro channels, maximizes the absorption and metabolism of nutrients and drugs and helps in minimizing their dose and toxicity. It facilitates the transport of ions and molecules through the cell membrane. Panchkarma therapy is not only a prerequisite for all the therapeutic procedures and medications but has also a full therapy role as a promotive, preventive, curative and rehabilitative procedure. Now a days due to fast and urbanized lifestyle with faulty habits like late night sleeping, fast food consumption etc. more vata vridhi is seen in the general population. Due to some limitations of allopathy more and more patients are seeking the ayurvedic medicines and attending the Panchkarma

Results

O.P.D. So the present study undertaken to analyse the profile of the patients attending O.P.D. of Panchkarma in a ayurved medical college and Hospital.

Aims and Objective

To Analyse the Profile of Patients Attending Panchkarma O.P.D. at Dhanvantari Ayurved Medical College and Hospital. Udgir.

Methodology

Type of study-cross-sectional study. The O.P.D. record of Panchkarma department was used as the baseline data. study was conducted by using the O.P.D. data from april 2013 to Aug 2013. Chronically ill patients and patients less than eighteen years old were excluded from the study. Thus the total sample size was 1540 patients. The permission was taken from the appropriate authority. Data analysis was done using Microsoft excel. Out of total 13 srotas patients of Vata vyadhi, Mahasrotas, Twakvikar and Pranvahasrotas were more as compared to others. So patients of remaining srotas were included in other category while doing the data analysis.

Table 1: Demographic distribution of study population

Sr no.	Variable	Male	Female	Total
1	Age	<20	21(2.36%)	11(1.69%)
		20-40	483(54.21%)	424 (65.33%)
		40- 60	309 (34.68%)	174 (26.81%)
		≥60	78 (8.75%)	40 (6.16%)
2	Residence	Urban	704 (79.01%)	550 (84.75%)
		Rural	187 (20.99%)	099 (15.25%)
3	Total	891 (57.86%)	649 (42.14%)	15400 (%)

Table 2: Sexwise distribution of study population

Sr no	System	Sex		Total
		Male	Female	
1	Vata vyadhi	501 (56.23%)	347 (53.47%)	848 (55.06%)
2	Mahasrotas/ GIT	271 (30.42%)	198 (30.51%)	469 (30.45%)
3	Twakvikar/ Skin diseases	13 (1.46%)	19 (2.93%)	32 (2.08%)
4	Pranvahasrotas / RS	42 (4.71%)	18 (2.77%)	60 (3.90%)
5	Others	64 (7.18%)	67 (10.32%)	131 (8.51%)

Sexwise distribution of study population

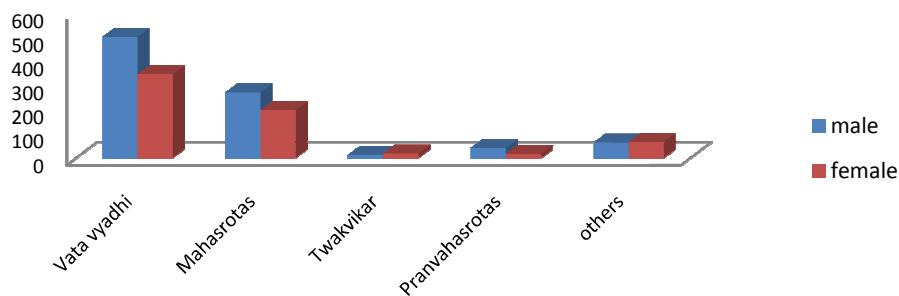
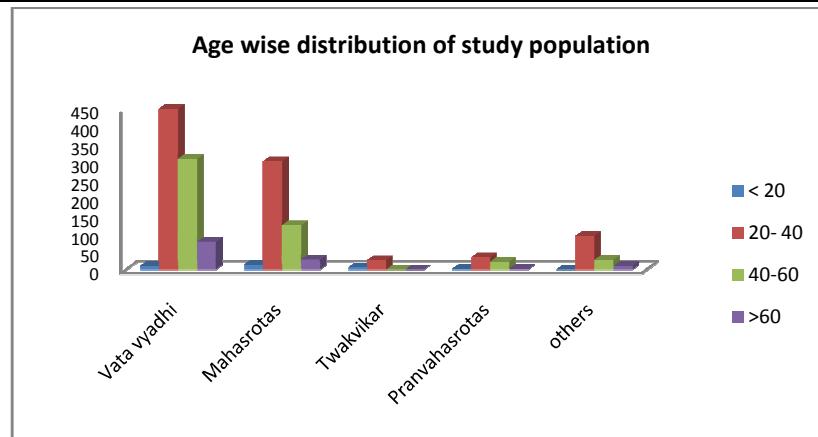


Table 3: Age wise distribution of study population

Sr No	System	Age				Total
		< 20	20- 40	40-60	≥60	
1	Vata vyadhi	10	450	310	78	848
2	Mahasrotas/ GIT	14	303	124	28	469
3	Twakvikar/ Skin diseases	06	26	00	00	32
4	Pranvahasrotas/ RS	02	34	22	02	60
5	others	00	94	27	10	131



1. The patients between the age group 20-40yrs were more i.e. 58.89%
2. The patients as per sex male were more i.e. 57.86%
3. As far the residence was considered the patients from urban area were more i.e. 81.43%
4. Disease wise analysis shows that, patients of vata vyadhi were found to be more i.e. 55.06 %. After that patients suffering from G.I.T. were 30.45 %.

Discussion and Conclusion

This analysis shows that more patient coming to O.P.D. were between age of 20- 40; may be due to heavy competition of today's life and faulty habits of life style, increased ingestion of junk food...etc. Male patients were abundant due to their addiction and sedentary life-style. Awareness about Ayurveda found to be more in urban area, hence patients coming from urban area were more, and so there is need for awareness about Ayurvedic treatment in rural area. Also study shows that the patients of vata-vyadhi were significantly more, it means Vata is provoked because of sedentary life – style. All this study reveals that there is a strong need to create awareness to follow the rules of DINACHARYA and RITUCHARYA as advised by ayurveda, to maintain healthy and longevity of once precious life.

Acknowledgement

We are grateful to trustees of **Dhanwantari** Ayurved College and Hospital, Udgir, Latur for allowing and supporting me to conduct this research work in their hospital. We are very much thankful to the patients without whom this study would have not been completed.

References

1. Acharya Charaka - Charaka Samhita with Hindi commentary Charaka Chandrika by Dr. Brahmanand Tripathi, Published by Chaukhamba Surabharati, in 1996.
2. Acharya Charaka - Charaka Samhita with Sanskrit commentary Ayurved Dipika commentator Chakrapanidatta, Edited by Yadavji Trikamaji Acharya, Published by Chaukhamba Sanskrit Sansthan, III edition, 1994.
3. Acharya Sushruta - Sushruta Samhita with Hindi commentary Ayurvedatwasandipika by Kaviraj Ambikadatta Shastri, Published by Chaukhamba Surabharati, in 1996.
4. Acharya Sushruta - Sushruta Samhita with Sanskrit commentary Nibandhasangraha by Dalhana, edited by Yadavji Trikamaji Acharya, Published by Chaukhamba Surabharati, in 1994.
5. Acharya Vaghbata - Ashtangahrudaya with Marathi commentary Sartha Vaghbata., by Dr. G. K. Garde published by Anmol Prakashana, Pune, in 1985.
6. Acharya Vaghbata - Ashtangasangraha with Sanskrit commentary Shashileka by Indu, edited by Dr. Shivprasada Sharma, Published by Chaukhamba Series, First edition, in 2006.
7. Panchakarma and ayurvedic massage – by Dr. Avinash Lele, Dr. subhash Ranade and Dr. Abbas Qutab Published by International Academy of Ayurveda.
8. Panchakarma Therapy – By prof R. H. Singh and prof. P.V. Sharma
9. B. K. Mahajan Methods in Biostatistics Published by Jaypee publication, 6th edition, in 2003.