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Standardization of doses, that is Matranischity of Pratham Triphala Rasayana in the management of Mutraghata with special reference to Chronic Renal Failure.

Sanjivani N. Rathod*¹, Rajan B. Kulkarni²

- 1. Principal Investigator, Ph-D Scholar and Assistant Professor,
- 2. Guide, HOD & Professor,

Kayachikitsa Dept. Ayurved Seva Sangh Ayurved mahavidyalaya, Nashik 422003.

*Corresponding author: Email id: sanjivanirathod431@gmail.com

Abstract: In today's era due to unending process of globalization, we are acquiring the western culture blinding like eating fast food, preserved food, late night sleeping or shifting duties and secondary life style with lot of stress, due to this, disturbances in metabolism occurs hence there is increasing incidences of life style disorders like Hypertension, Diabetes mellitus, Obesity etc. later in chronic condition this patients with comes chronic kidney diseases. As per Ayurveda CKD is disease of mutravaha strotasa and It correlated with Mutraghata.

Formation and Excretion of urine is takes place in pakwashaya. Basti is one of the main marma out of three *marma*. If problem takes place in these *marma* it becomes life threatening. Hence

it is need of era to find out supportive, rejuneuating treatment for such patients to expel the toxins from the body. Hence Pratham triphala rasayana this drug is chosen for CKD patients. It is Anulomak, its action on pakwashaya, it regulates Apana vayu hence toxins expel out from the body, because of rasayana effect datu vardhana also takes place. Pratham triphala rasayana contains Survary Haritaki, Aamalaki, Bibhitaki. As per Charak Aacharya one Surwari Haritaki is given in the morning empty stomach,2 Bibhitaki is given before meal and 4 Aamalaki is given after meal with honey and ghee respectively. Here Charakacharya has mentioned this does in the form of phala or fruit, since the size and weight of every fruit of triphala

differs hence it is highly impossible to conduct clinical trial on it. Therefore we have decided to standardize the fruit (*phala*) and convert it into its *churna* form so that equal dose of this *rasayana* can be given to the patients which are under trial.

Keyword: Life style disorders, Diabetes, Hypertension, Chronic renal failure, Standardization of doses, *Pratham triphala rasayana*, *Mutraghata*, *Rasayana*.

Introduction: While entering into 21st century ,human life is becoming so fast that we are totally ignoring our day to day healthy activities or in other words we are not adopting classical dinacharya and rutucharya described in Ayurvedic Samhitas. In the unending process of Globalization we are acquiring western culture blindly like eating fast food, preserved food, late night sleeping or shifting duties and secondary life style with lot of stress. This all ultimately results in increasing prevalent rate of Diabetes mellitus, Hypertension, and Obesity even in younger generation. Since early age groups are the victims of those life style disorder it is finally ends in its grove complications mainly acute and chronic renal failure.

For this burning problem of society, modern science interventions like

Dialysis or Kidney transplant has got its own limitations in the form of its complications, cost, recurrence and quality of life.

Hence I have decided to work on the burning problem of society due to increasing incidence of chronic renal We have undertaking failure. research trial in whish we have been giving pratham triphala rasayana as an adjuvant therapy in the management of chronic renal failure. Before starting clinical trials, it was a big research question regarding dose or matra of pratham triphala rasayana. In Ayurvedic text, it is described matra the dose of pratham triphala rasayana is 1:2:4,i.e.1 Surwari haritaki,2 Bibhitaki, and Aamalaki phal(fruits) to be given empty stomach in the morning, before meal, and meals respectively. Hence after charakcharya has mentioned this dose in the form of phala or fruit. Since the size and weight of every fruit of triphala differs, it is highly impossible to conduct clinical trial on it. Therefore we have decided to standardize the fruit(phala) and convert it into its churna form. So that equal dose of this rasayana can be given to the patients which are under trial.

Aims: Standardization of doses, that is Matranischity of Pratham Triphala

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Rasayana in the management of Mutraghata with special reference to Chronic Renal Failure.

Objectives: To standardize the dose of each phala in the proportionate of 1:2:4 in terms of its churna form.

Materials and Methods: Raw Material of Haritaki, Bibhitaki, Aamalaki



Materials:

- Haritaki,Bibhitaki, and Aamalaki phala(fruits) were purchased as form of raw material from the GMP certified company.
- Ulukhalyantra(kuttanakyantra)
- Electronic weighing machine.
- Mixer grinder

Methodology:

 From the purchased raw material, we have selected five phala of Survari Haritaki

- which looks approximately same size.
- Then we have taken the weight
 of each phala on electronic
 weighing machine and its
 weights are recorded
 accordingly.
- Then these phala are converted into bharad churna by processing it into Ulukhalyantra(kuttanakyantra)
- After these the bharad churna is taken in mixer grinder pot and fine churna is prepared.
 Weight of fine churna is taken and recorded.

Same procedure repeated for Bibhitaki and Aamalaki.

HARITAKI



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Observations: Part 1

• Average weight of 05 Surwari haritaki sample

Sample	01	02	03	04	05	Total
No.						weight
Weight in	8.3045	8.6030	8.2592	8.3568	8.9020	42.4255
gms						

• Average weight of 05 Bibhitaki sample

Sample	01	02	03	04	05	Total
No.						weight
Weight in	3.3045	2.8030	3.2500	3.3500	2.9820	15.6895
gms						

• Average weight of 05 Aamalaki sample



Sample	01	02	03	04	05	1 otal
No.						weight
Weight in	2.0545	1.8030	1.9860	2.2500	1.9820	10.0755
gms						

Part 2 - After removing seed of each phala(fruit) fine churna is prepared in mixer grinder.

• Average weight of fine powder of each sample

Sr. No.	Name of Drugs	Weight of fine churna made	Weight of fine churna	
		from 5 fruits of each in gms	of singal phala in gms	
1	Haritaki	25 gms	5 gms	
2	Bibhitaki	12 gms	2.4 gms	
3	Aamalaki	6.5 gms	1.3 gms	

Discussions: On the basis of above observations

- Even if we take the sample of Drug which looks approximately same in size and shape, its weight on electronic weighing machine is different
- Weight of bharad is also differs in comparison with fine powder churna.

Conclusion: On the basis of stastical calculations and observations we can conclude and can standardize the doses or matranischity of pratham triphala rasayana in the management of mutraghata with special reference to chronic renal failure as under.

- Surwari haritaki 01 phala means
 5 gms of churna
- Bibhitaki -02 phala means 4.8 gms of churna.
- Aamalaki-04 phala means 5.2 gms of its churna.

Finally we have fix the dose of pratham triphala rasayana in proportionate of 1:2:4 phala will be in proportionate of 5 gms: 4.8 gms: 5.2 gms in its churna form in the clinical trial.

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