

GAVI KALPATARU

AYURVEDA E MAGAZINE



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GAVISIDDDESHWARA

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ACKNOWLEDGMENT

*With immense gratitude and humility, we offer our sincere thanks to **Shree Jagadguru Gavisiddeswara Swamiji**, whose divine presence and spiritual vision continue to inspire and guide us on our path of Ayurvedic wisdom and holistic well-being.*

*We bow with reverence to **Lord Dhanvantari**, the divine physician, whose eternal light illumines our understanding of seasonal balance and the healing rhythms of nature.*

*Our deepest appreciation goes to our respected **Chairman, Shri Sanjay Kotbal Sir**, for his unwavering encouragement and steadfast support. We are especially thankful to our **Chief Editor, Dr. M.M. Salimath Sir**, whose scholarly insight, and editorial excellence have once again shaped this edition with depth, precision, and clarity.*

*We gratefully acknowledge the sincere efforts of the **Editorial Committee**, whose thoughtful planning, dedication, and creative collaboration.*

*Special thanks are due to the **teaching and non-teaching staff, PG scholars, UG students, and interns of SJGAMC**, whose enthusiastic contributions enriched the magazine with insightful articles, reflections, and artistic expressions.*

*We are deeply grateful to our **Principal and Vice Principal** for their steadfast leadership, which continues to propel this initiative forward with integrity and purpose.*

To our beloved readers, your enduring support and appreciation uplift our spirits and inspire us to delve deeper into the timeless science of life.

*Finally, heartfelt thanks to the entire **GAVI KALPATARU** team, whose spirit of unity, dedication, and commitment have transformed this edition into a vibrant celebration of Ayurveda's purity and its healing touch across the world.*

With Warm regards,
The Editor In charge
Dr. Shridharaiah MH
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Principal & Editor's Letter



Dear Readers,

It gives us immense pleasure to present **Volume 2, Edition 7 of *Gavikalpataru***. This publication reflects the collective efforts, intellectual curiosity, and creative spirit of our faculty members, students, and interns who continuously contribute to the enrichment and dissemination of Ayurvedic knowledge.

We sincerely appreciate the dedication and enthusiasm of all contributors, the editorial team, and everyone involved in bringing out this edition. We hope this issue inspires readers to deepen their understanding of Ayurveda and encourages continued exploration of this timeless science.

We wish all our readers an enriching and enjoyable reading experience

Warm regards,

Dr. M. M. Salimath

Principal & Chief Editor

The image features a globe as the central element, showing the Americas and parts of Europe and Africa. The globe is set against a background of a newspaper with various headlines. A white rectangular box with a thin blue border is centered over the globe, containing the title 'News Bites' and a subtitle.

News Bites

A cozy spot for latest updates.

Street Play on Drug Abuse Awareness Conducted at Koppal Central Bus Stand



Koppal, July 1, 2026: As part of the observance of the **International Day Against Drug Abuse and Illicit Trafficking**, the **Department of Agadatantra** in association with the **NSS Unit of Shree Jagadguru Gavisiddeshwara**

Ayurvedic Medical College & Hospital, Koppal, organized a **street play** on **1st July 2026** at the **Koppal Central Bus Stand**.

The awareness program was presented by the **Second Professional BAMS students (2024 Batch)**, who effectively highlighted the harmful effects of drug abuse, its impact on individuals, families, and society, and the importance of leading a healthy, addiction-free life. Through powerful performances and thought-provoking messages, the students encouraged the public, especially the youth, to stay away from substance abuse and adopt positive lifestyle choices.

The street play attracted the attention of commuters and members of the public, creating awareness about the serious consequences of drug addiction and emphasizing the need for collective efforts to build a drug-free society.



Doctors' Day Celebrated with Blood Donation Drive at SJG Ayurvedic Medical College & Hospital



Koppal, July 1, 2026: Doctors' Day was celebrated with great enthusiasm at **Shree Jagadguru Gavisiddeshwara Ayurvedic Medical College & Hospital, Koppal**, on **1st July 2026**, recognizing the invaluable service and dedication of medical professionals to society.

The celebration featured a **voluntary blood donation drive**, organized to promote the noble message of saving lives through blood donation. Faculty members, students, interns, and staff actively participated in the initiative, demonstrating their commitment to social



responsibility and humanitarian service.

As a mark of respect and gratitude, the students of **Shri Shivashantaveera Public School** felicitated the doctors of the institution in appreciation of their selfless service, compassion, and unwavering dedication to patient care. The

gesture added warmth and significance to the celebration.

The program was held in the presence of **Principal Dr. Mahantesh M. Salimath**, faculty members, staff, and students. The management appreciated the efforts of all the blood donors and organizers for making the event meaningful and successful.

Varsha Ritu Basti Camp Inaugurated at SJG Ayurvedic Medical College & Hospital



Koppal, July 8, 2026: The Department of Panchakarma of **Shree Jagadguru Gavisiddheshwara Ayurvedic Medical College & Hospital, Koppal**, inaugurated the **Varsha Ritu Basti Camp** on **8th July 2026**. The camp is being conducted from **8th July to 15th September 2026** with the objective of

promoting seasonal Ayurvedic healthcare and preventive wellness.

The program commenced with the ceremonial inauguration in the presence of the Principal, faculty members, postgraduate scholars, interns, and students. During the inaugural session, the significance of **Varsha Ritu Charya** and the therapeutic benefits of **Basti Karma**, one of the prime Panchakarma procedures for balancing aggravated **Vata Dosha** during the rainy season, were highlighted.

The camp offers specialized Ayurvedic consultation and scientifically planned **Basti therapies** to eligible patients under the supervision of experienced Panchakarma physicians. The initiative aims to enhance public awareness about seasonal detoxification, disease prevention, and the importance of adopting Ayurvedic regimens for maintaining health.

The Department expressed its gratitude to the **Management, Principal Dr. Mahantesh M. Salimath**, and the faculty members for their continuous encouragement and support in organizing the camp successfully. The program reflects the institution's commitment to promoting the preventive and curative principles of Ayurveda for the benefit of the community.

Department of Agadatantra Observes World Allergy Day with Quiz Competition



Koppal, July 8, 2026: The Department of Agadatantra of Shree Jagadguru Gavisiddheshwara Ayurvedic Medical College & Hospital, Koppal, observed World Allergy Day 2026 on 8th July 2026 by organizing an Inter-BAMS Quiz Competition to create awareness about allergic disorders and enhance students' understanding of their Ayurvedic concepts.

The program commenced with a **screening round**, in which enthusiastic participation was witnessed from BAMS students.

Based on their performance, **18 students** were shortlisted for the final round and were divided into **three teams**, each comprising six participants. The quiz covered topics related to modern concepts of allergy as well as Ayurvedic perspectives, including **Garavisha, Dushivisha, and Vishopadrava**.

The competition provided an engaging platform for students to strengthen their academic knowledge, improve analytical thinking, and relate contemporary allergic disorders with Ayurvedic principles. The interactive format encouraged active learning and healthy competition among the participants.

The event concluded with the distribution of prizes to the winning teams and a vote of thanks, expressing gratitude to the **Management, Principal Dr. Mahantesh M. Salimath**, faculty members, and all the participants for making the program a grand success.

59th Punyasmaranotsava of His Holiness Sri Marishantaveera Mahaswamiji Observed with Reverence at SJG Ayurvedic Medical College & Hospital

Koppal, July 10, 2026: The 59th Punya smaranotsava of His Holiness Sri Marishantaveera Mahaswamiji was observed with profound



devotion, gratitude, and reverence at **SJGAMC, Koppal**, on **10th July 2026**. The program brought together the principal, senior faculty members, postgraduate scholars, teaching, and non-teaching staff to pay homage to the revered visionary whose ideals continue to inspire.

The program commenced with a floral tribute to the portrait of **His Holiness Sri Marishantaveera Mahaswamiji**, symbolizing respect and gratitude for his remarkable contribution to society. The gathering remembered his lifelong commitment to education, healthcare, and selfless service, which laid the strong foundation for the growth of the Sri Gavisiddheshwara educational and healthcare institutions.

Delivering the introductory address, **Dr. Suresh Hakkandi** highlighted the history and remarkable development of the **Sri Gavisiddheshwara Vidyavardhaka Trust (SGVVT)**. He recalled the noble vision of His Holiness, who dedicated his life to uplifting the poor and underprivileged by establishing a tradition of **free education, free hostel facilities, free meals (Annadasoha), free healthcare services, and compassionate social welfare**. He emphasized that thousands of students and economically weaker sections of society have transformed their lives through the opportunities created by the Trust under the guidance of the revered saint.

Speaking on the occasion, **Dr. K. B. Hiremath**, Senior Professor of the institution, elaborated on the inspiring life and achievements of **Sri Marishantaveera Mahaswamiji**. He described the Mahaswamiji's educational journey, his deep knowledge of Ayurveda and Sanskrit, and his far-sighted vision in establishing institutions of excellence in education and healthcare. He noted that, because of His Holiness's relentless efforts, **Koppal has emerged as a prominent centre for higher education**, enabling students to pursue quality education locally instead of migrating to distant cities.

Presiding over the programme, **Principal Dr. Mahantesh M. Salimath** spoke about the significance of observing the Punyasmaranotsava and urged everyone to imbibe the ideals of selfless service, dedication, and compassion exemplified by His Holiness. He encouraged students to excel in academics while developing a strong sense of social responsibility and service to humanity, stating that living according to the values of the revered saint would be the greatest tribute to his legacy. He also emphasized that every member of the institution has an important role in carrying forward the noble service tradition of the Sri Gavisiddheshwara Vidyavardhaka Trust.

The programme concluded with a renewed commitment by the faculty, staff, and students to uphold the ideals of **service, education, compassion, and human welfare** cherished by **His Holiness Sri Marishantaveera Mahaswamiji**, ensuring that his inspiring legacy continues to guide future generations.

Celebration of Sushruta Jayanti & World Plastic Surgery Day 2026 at SJG AMC, Koppal

The Department of Shalya Tantra, Sri Jagadguru Gavisiddheshwara Ayurvedic Medical College & Hospital, Koppal, celebrated **Sushruta Jayanti and World Plastic Surgery Day 2026** with great enthusiasm on **15th July 2026** by organizing a series of academic, creative, and service-oriented activities for undergraduate students, postgraduate scholars, interns, and the public.

As a part of the celebrations, a **Rangoli Competition** and **Face Painting Competition** were conducted on **13th July 2026**, followed by an **Essay Writing Competition** on **14th July 2026**. The competitions provided a platform for participants to express their creativity and deepen their

understanding of the remarkable contributions of **Acharya Sushruta**, revered as the Father of Surgery.

The main celebration was held on **15th July 2026**, beginning with **Samhita Shloka Patana** by postgraduate scholars, paying tribute to the rich surgical heritage of Ayurveda. On the occasion, the Department of Shalya Tantra, in collaboration with the Department of Shalakyia Tantra, organized a **guest**

understanding of the remarkable contributions of **Acharya Sushruta**, revered as the Father of Surgery.

The main celebration was held on **15th July 2026**, beginning with **Samhita Shloka Patana** by postgraduate scholars, paying tribute to the rich surgical heritage of Ayurveda. On the occasion, the Department of Shalya Tantra, in collaboration with the Department of Shalakyia Tantra, organized a **guest lecture** by **Dr. Vinayak Chavan, Consultant Plastic Surgeon, Hubballi**, on the topic “**Application of Plastic Surgery in Different Conditions.**” The lecture highlighted the practical applications of plastic surgery in modern healthcare while emphasizing the enduring relevance of the surgical principles described by Acharya Sushruta.

The celebration concluded with the distribution of prizes to the winners of the various



competitions. The event served as a fitting tribute to the timeless legacy of Acharya Sushruta and reinforced the significant role of **Shalya Tantra** in the advancement of surgical science. The institution expressed its sincere gratitude to the esteemed Management, Principal, faculty members, organizing departments, and all participants for making the celebration a grand success.

Free Surgical Camp Conducted on the Occasion of Sushruta Jayanti 2026



Koppal, July 15–31, 2026: As part of the **Sushruta Jayanti 2026** celebrations, the **Department of Shalya Tantra**, successfully organized a **Free Surgical Camp** from **15th July to 31st July 2026**. The camp was conducted with the objective of extending quality and affordable surgical healthcare services to the community while commemorating the invaluable contributions of **Acharya Sushruta**, revered as the Father of Surgery.

The camp provided **free surgical consultation, clinical examination, diagnostic evaluation, and treatment** for patients suffering from a wide range of surgical disorders. Special attention was given to **anorectal diseases such as piles (Arsha), fistula-in-ano (Bhagandara), fissure-in-ano (Parikartika), pilonidal sinus, varicose veins, non-healing ulcers, and other general surgical conditions**. Patients requiring surgical intervention were thoroughly assessed, counselled, and managed under the supervision of experienced Shalya Tantra specialists.

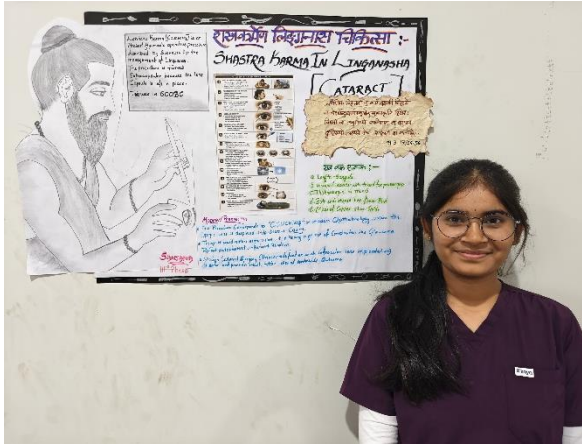
Dept. of Shalakyia Tantra Conducts Samhita Pathana and Poster Presentation Competition on Sushruta Jayanti

Koppal, July 15–16, 2026:

As part of the **Sushruta Jayanti 2026** celebrations, the **Department of Shalakyia Tantra**, in association with the **Vaidyabhoosha Sanskrit Club**, organized a series of academic activities to commemorate the birth anniversary of **Maharishi Sushruta**, the Father of Surgery.

On **15th July 2026**, the department conducted **Samhita Pathana**, where faculty members, postgraduate scholars,





interns, and undergraduate students enthusiastically participated in the recitation of selected verses from the classical Ayurvedic texts. The program highlighted the importance of preserving and promoting the rich literary and scientific heritage of Ayurveda while inspiring students to deepen their understanding of the timeless teachings of Maharishi Sushruta.

Continuing the celebrations, a **Poster Presentation Competition** was organized on **16th July 2026** for **III Phase BAMS students**. Students presented informative and creative posters on various topics related to **Shalaky Tantra, Sushruta's surgical principles, and Ayurvedic ophthalmology**, demonstrating their academic knowledge, creativity, and presentation skills.

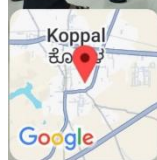
The competition provided an excellent platform for students to enhance their research aptitude, scientific communication, and confidence.

Faculty members evaluated the presentations based on scientific content, originality, presentation, and relevance to the theme.

The celebrations concluded with the distribution of certificates and prizes to the winners, followed by a vote of thanks. Gratitude was expressed to the **college management, Principal Dr. Mahantesh M. Salimath**, faculty members, organizers, judges, and all the participants for their valuable support in making the Sushruta Jayanti celebrations meaningful and successful.

Department of Agadatantra Observes World Snake Day 2026 with Reels Competition

Koppal, July 16, 2026:
The **Department of Agadatantra**, Shree Jagadguru Gavisiddeshwara Ayurvedic Medical College & Hospital, Koppal, observed **World Snake Day 2026** by organizing a **Reels Making Competition** for **Jeevaka Batch students** with the objective of creating awareness about snake conservation, snakebite prevention, first aid, and



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the importance of timely medical management.

The program commenced with an awareness session highlighting the ecological significance of snakes and dispelling common myths associated with them. Faculty members emphasized that snakes play a vital role in maintaining ecological balance and that unnecessary fear and misinformation often lead to harm to both humans and wildlife. Students were also educated on the principles of first aid in snakebite cases and the importance of immediate medical attention to reduce morbidity and mortality.

As part of the event, students enthusiastically participated in the **Reels Making Competition**, presenting creative and informative videos conveying the message of snake conservation and the prevention of snakebite-related deaths. The competition encouraged students to combine scientific knowledge with digital creativity to promote public health awareness through social media.

The Department expressed its sincere gratitude to the **college management, Principal Dr. Mahantesh M. Salimath**, faculty members, organizers, and all the participants for their valuable support in making the World Snake Day celebration informative, meaningful, and successful.

Department of Kriya Shareera Organizes Shloka Recitation Competition

Koppal, July 2026: The **Department of Kriya Shareera**, successfully organized a **Shloka Recitation Competition** with great enthusiasm, devotion, and active participation. The event aimed to encourage students to appreciate and preserve the rich heritage of Sanskrit literature and the timeless wisdom of Ayurveda.



The program was graced by **Principal Dr. Mahantesh M. Salimath, Chief Guests Dr. K. B. Hiremath and Dr. Hemasundari**, whose inspiring addresses motivated the participants to uphold and promote the cultural and scientific legacy of Sanskrit and Indian tradition.

The competition was judged by **Dr. Akkamahadevi, Dr. Savita M., and Dr. Sandeep Achar**, who appreciated the participants' dedication and provided valuable feedback that enriched the learning experience.

The competition witnessed the enthusiastic participation of **19 contestants**, while **more than 100 delegates**, including undergraduate students and postgraduate scholars, attended the

program, making it a grand academic and cultural event.

The winners were felicitated with certificates and prizes, and all participants were appreciated for their sincere efforts and devotion. The program concluded with a vote of thanks, expressing heartfelt gratitude to the **college management, Principal Dr. Mahantesh M. Salimath**, the Chief Guests, judges, faculty members, coordinators, moderators, volunteers, participants, and delegates for their invaluable support in making the event a memorable success.

Department of Kriya Shareera Organizes “Physio Fest–2026” Model Making Competition



Koppal, July 29, 2026: The **Department of Kriya Shareera**, successfully organized **Physio Fest–2026**, a **Model Making Competition**, to encourage students to explore physiological concepts through creativity, innovation, and scientific thinking.



The program was inaugurated in the presence of **Principal Dr. Mahantesh M. Salimath**, **Vice Principal Dr. Suresh Hakkandi**, **Dr. G. G. Patil**, and **Dr. K. B. Hiremath**, who appreciated the efforts of the department in providing

students with an interactive platform to apply theoretical knowledge through innovative models. In their addresses, the dignitaries encouraged students to cultivate scientific curiosity and practical understanding, emphasizing the importance of experiential learning in medical education.

Students enthusiastically presented a variety of working and static models illustrating different concepts of human physiology. The models were evaluated by the esteemed panel of judges based on scientific accuracy, originality, innovation, presentation, and practical relevance.

Celebrates Guru Purnima with Devotion and Reverence

Koppal, July 29, 2026: SJGAMC, Koppal, celebrated **Guru Purnima** with great devotion and reverence, paying tribute to the timeless Guru–Shishya tradition that forms the foundation of Indian education and culture.



The program commenced with the ceremonial lighting of the lamp and floral tributes to the revered Guru, symbolizing respect, gratitude, and the pursuit of knowledge. Faculty members, postgraduate scholars, interns, and undergraduate students gathered in large

numbers to honor the invaluable role of teachers in shaping knowledge, character, and values.

On the occasion, the speakers highlighted the significance of Guru Purnima as a day to express gratitude towards mentors who illuminate the path of learning and inspire students to strive for excellence. They emphasized that the Guru–Shishya tradition continues to be the cornerstone of Ayurveda, where knowledge is transmitted with discipline, dedication, and compassion.

The program concluded with a vote of thanks, expressing heartfelt gratitude to the college management, **Principal Dr. Mahantesh M. Salimath**, faculty members, staff, and students for their wholehearted support and participation in making the celebration meaningful and memorable.

Pharmacovigilance Cell Conducts Awareness Program for Hospital Patients



Koppal, July 30, 2026: The **Pharmacovigilance Cell** of SJGAMC, Koppal, successfully organized a **Pharmacovigilance Awareness Program** for hospital patients on **30th July 2026**. The program was conducted with the objective of creating awareness about the safe and rational use of medicines, the importance of reporting adverse drug reactions (ADRs), and promoting patient

safety.

The awareness session was delivered by **Dr. Shashidhar J., Professor, Department of Rasashastra & Bhaishajya Kalpana (RSBK)**, who explained the significance of pharmacovigilance in ensuring the safe use of medicines. He educated the patients on recognizing possible adverse drug reactions, the importance of taking medicines only as prescribed, avoiding self-medication, and promptly informing healthcare professionals about any unexpected effects experienced during treatment.

The program witnessed active participation from hospital patients, and gained valuable knowledge regarding medication safety and responsible medicine use. The initiative helped strengthen patient awareness and encouraged greater participation in the reporting of adverse drug reactions, thereby contributing to improved healthcare quality.

Pharmacovigilance Cell Conducts Awareness Program for Hospital Patients



Belagavi Jamboti, 18 July 2026:

The Department of Panchakarma, organized an educational field visit to Belagavi–Jamboti on 18 July 2026 for the collection of Madanaphala Dravya. The field visit provided students with valuable hands-on exposure to medicinal plant identification, drug collection methods, and the practical aspects of Ayurvedic principles related to medicinal plant collection. Students actively participated in observing and identifying the plant material and understanding the appropriate methods of collection.

The visit served as an effective bridge between classroom learning and practical experience, enabling students to gain firsthand knowledge of medicinal plants and their significance in Ayurveda.

The program was successfully conducted with the active participation of the faculty members and students of the Department of Panchakarma. Such field-based learning activities contribute significantly to developing students' practical skills, botanical knowledge, and understanding of traditional Ayurvedic drug collection practices.

“DRAVYA JNANAM – Made Easy” Book Published by SJGAMC Faculty



Koppal, 28 July 2026: A new academic resource titled “DRAVYA JNANAM Made Easy”, authored by Dr. Shirurmath, faculty member of Shree Jagadguru Gavisiddeshwara Ayurvedic Medical College & Hospital, Koppal, was published on 28 July 2026.

The book has been developed as a concise and student-friendly learning resource to support the NCISM Dravyaguna Vijnana syllabus. Covering 97 important Ayurvedic drugs, the book systematically presents classical Ayurvedic concepts, botanical identification, therapeutic applications, pharmacognostic details, and visual learning resources in an easy-to-revise format.

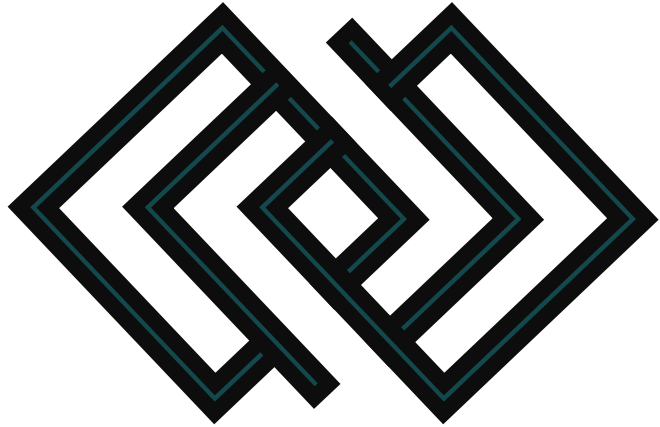
A key feature of the book is its three-domain Dravyaguna framework, integrating Naamarupa Vijnana, Gunakarma Vijnana, and Prayoga Vijnana to provide students with a comprehensive

understanding of medicinal plants and drugs.

The book follows a “Drug-at-a-Glance” format, bringing together botanical identity, Rasapanchaka, Dosha Karma, indications, formulations, morphology, habitat, phytoconstituents, safety alerts, and classical references in a structured presentation. High-quality botanical illustrations and QR-enabled digital resources further enhance practical identification and interactive learning.

Designed as an exam-oriented ready reckoner, “DRAVYA JNANAM – Made Easy” will be useful for undergraduate Ayurveda students for quick revision, university examination preparation, and development of practical drug-identification skills.

On this occasion, Dr. Shirurmath expressed heartfelt gratitude to the management of SGVV Trust for their continuous encouragement and support in promoting academic and professional excellence. He also conveyed sincere gratitude to the respected Principal, Dr. Mahantesh M. Salimath, for his valuable guidance, motivation, and constant encouragement towards faculty academic initiatives and scholarly contributions.



Knowledge Hub

**EXPLORING IDEA AND
DISCOVERIES BY STAFF AND
STUDENTS**

HRUDAYA MARMA IN AYURVEDA: CLASSICAL FOUNDATIONS, CLINICAL SIGNIFICANCE, AND THERAPEUTIC PERSPECTIVES

Divyashree C. Shivappayyanamath¹, Dr Suhas²

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ABSTRACT

Marma refers to a vital anatomical region where structures such as *Mamsa* (muscle), *Sira* (vessels), *Snayu* (ligaments and tendons), *Asthi* (bone), and *Sandhi* (joint) converge. These sites are considered important centres of *Prana* and *Cetana*; therefore, injury may cause severe pain, functional impairment, deformity, or death. Among the 107 *Marma* points described in *Ayurveda*, *Hrudaya Marma* is especially significant because of its association with circulation, consciousness, mental activity, and the maintenance of life. This article presents its classical features, functions, injury manifestations, relationship with *Hrudroga*, preventive importance, and therapeutic perspectives. It also highlights the need to distinguish classical Ayurvedic concepts from unverified biomedical equivalences.

Keywords: *Hrudaya Marma, Marma Shareera, Hrudroga, Prana, Manas, Ayurveda, Marma therapy*

INTRODUCTION

A *Marma* is a vital anatomical site formed by the convergence of important bodily structures. Classical *Ayurveda* describes these regions as specialised seats of *Prana*, the life-sustaining principle, and *Cetana*, consciousness or sentience. Trauma to a *Marma* may therefore produce consequences far more serious than injury to an ordinary body part. Depending on the site involved, injury may result in immediate or delayed death, permanent disability, deformity, severe pain, or loss of function.

Acarya Caraka explains that injury to vital regions causes intense suffering because *Cetana* is especially concentrated there. The study of *Marma* is therefore relevant to anatomy, surgery, prognosis, preventive care, and therapeutic planning.

Etymology and Classification

According to *Vacaspatyam*, the word *Marma* is derived from the verbal root *Mru*, “to die,” with the suffix *Manin*. The *Amarakosha* similarly associates it with death or loss of life. Thus, *Marma* denotes a vulnerable site whose injury may cause grave consequences.

Marma points are classified in three principal ways:

<i>MARMA VASTU ANUSARA BHEDA</i>	<i>SHADANGA ANUSARA BHEDA</i>	<i>VIKALPA ANUSARA BHEDA</i>
<i>Mamsa marma</i>	<i>Shaka (Bahu &Sakti) marma</i>	<i>Sadhyapranahara marma</i>
<i>Sira marma</i>	<i>Udara marma</i>	<i>Kalantarapranahara marma</i>
<i>Snayu marma</i>	<i>Prushta marma</i>	<i>Vishalyagna marma</i>
<i>Asthi marma</i>	<i>Jatroordhva marma</i>	<i>Vaikalyakara marma</i>
<i>Sandhi marma</i>		<i>Rujakara marma</i>
<i>Dhamani marma</i>		

Ayurveda describes 107 *Marma* points. *Hrudaya*, *Basti*, and *Shiras* is especially important because of their close association with *Prana*. Their injury or disease can endanger life, reflecting *Ashraya–Ashrayi Bhava*: damage to a supporting organ compromises its dependent functions.

Sadyah-pranahara Marma

Sadyah-pranahara marma denotes vital sites in which injury may produce rapid deterioration and death. Classical descriptions associate these points with the predominance of *Agni Mahabhuta*. Though *Sadyah* literally means “immediately,” commentarial interpretation may include death occurring within seven days. By contrast, injury to *Kalantara-pranahara marma* may prove fatal after approximately fifteen days or one month.

Hrudaya Marma

Hrudaya Marma is situated in the central thoracic region between the breasts. It is associated with the heart, major vessels, circulation, consciousness, emotional activity, and the maintenance of life. It is described as:

- Located in the thorax
- Approximately four *Angula* in extent
- Shaped like an inverted lotus
- Classified regionally as an *Uras Marma*
- Commonly classified structurally as a *Sira Marma*
- Influenced by *Matruja Bhava* in Ayurvedic embryology
- Categorized as *Sadyah-pranahara*

The term *Hrudaya* is traditionally interpreted as *hr̥/harati*—to receive; *da/dadāti*—to give; and *ya/yamayati*—to regulate. It symbolically denotes a centre that receives, distributes, and controls. The classical concept is broader than the anatomical heart and includes physiological, psychological, and consciousness-related dimensions.

Formation and Functions

Hrudaya is described as developing from the essence of *Rakta* and *Kapha* and supporting channels carrying *Prana*. This Ayurvedic embryological description should not be equated directly with modern embryology.

Hrudaya is regarded as an important seat of:

1. ***Prana*** — the vital life principle
2. ***Ojas*** — vitality, stability, and resistance
3. ***Manas*** — mind
4. ***Buddhi*** — intellect and discrimination
5. ***Cetana*** — consciousness
6. **Major *Dhamanis*** — principal vessels connected with *Hrudaya*

Acarya Caraka compares these life-sustaining factors to spokes connected to the hub of a wheel, illustrating the central importance of *Hrudaya*.

It is also associated with:

- ***Vyana Vayu***, which governs circulation and distribution
- ***Sadhaka Pitta***, associated with understanding, courage, motivation, and emotional processing
- ***Avalambaka Kapha***, which supports and stabilizes the thoracic region
- ***Ojas***, which maintains vitality and integrity

These are broad Ayurvedic functional principles and should not be reduced to individual biomedical structures, enzymes, or fluids.

Hrudaya and Consciousness

Classical texts describe *Hrudaya* as a special seat of *manas* and *Cetana*, although consciousness pervades the body. The sense organs perceive only when coordinated by *manas*, while *Buddhi* performs discrimination and judgement. Cognition is therefore presented as an integrated process involving the senses, mind, intellect, and vital centers. Modern heart–brain communication offers a useful comparison but is not identical to the classical concept.

Hrudaya Marma Abhigata Lakshana

Injury to *Hrudaya Marma* may produce severe systemic manifestations, including:

- ***Kasa*** — cough
- ***Shvasa*** — breathlessness

- **Bala-kshaya** — loss of strength
- **Kantha-, mukha-, and talu-shosha** — dryness of the throat, mouth, and palate
- **Kloma-karshana** — severe thoracic distress or pulling pain
- **Jihva-nirgama** — protrusion of the tongue
- **Apasmara** — episodic loss of consciousness or seizure-like manifestations
- **Unmada** — severe disturbance of mental functions
- **Pralapa** — incoherent speech
- **Citta-nasha** — loss of mental integrity or consciousness
- **Ama** and disturbed digestion or metabolism
- Emaciation
- Trauma
- Improper progression or management of existing disease

These features indicate severe respiratory, circulatory, and neurological disturbance. Suspected chest or cardiac injury requires immediate hospital evaluation.

Hrudaya Marma Paripalana

Protection of *Hrudaya Marma* includes:

1. Avoiding trauma and other injurious factors
2. Following *Svasthavrutta*, including appropriate diet, activity, sleep, and conduct
3. Avoiding excessive physical exertion and prolonged inactivity
4. Regulating fear, anxiety, anger, and chronic stress
5. Diagnosing cardiovascular and systemic disorders early
6. Promptly treating conditions affecting vital regions
7. Controlling body weight, blood pressure, blood glucose, and lipid levels through evidence-based care

Hrudroga

Hrudroga is the Ayurvedic term for diseases affecting *Hrudaya*. Its causes may include:

- Excessive exercise
- Improper use of strong purification therapies
- Anxiety, fear, psychological shock, and stress
- Suppression of vomiting and other natural urges

Common features include altered complexion, fainting, fever, cough, hiccup, dyspnoea, thirst, vomiting, pain, anorexia, Kapha aggravation, and altered consciousness. Chest pain, breathlessness, fainting, sweating, palpitations, or altered consciousness require urgent assessment.

Hrudroga is classified into *Vataja*, *Pittaja*, *Kaphaja*, *Sannipataja*, and *Krumija* types. In *Sannipataja Hrudroga*, treatment is planned after assessing the relative predominance of the three *Doshas*. General principles include suitable *Langhana*, non-aggravating diet, correction of *Agni* and *Ama*, and individualised management based on strength, age, disease stage, and complications.

Krumija Hrudroga is described as arising after *Doshic* disturbance and excessive or unsuitable intake of substances such as *Tila*, *Ksheera*, and *Guda*. Classical features include pricking, cutting, itching, crawling, or biting sensations and *Granthi*-like discomfort in the cardiac region. The term *Krumi* should be interpreted in its classical context and not automatically equated with visible worms in the anatomical heart.

Physical, Psychological, and Spiritual Dimensions

Ayurveda presents *Hrudaya* as more than a mechanical pump, associating it with circulation, vitality, mind, consciousness, and emotion. Some spiritual traditions also describe a symbolic heart associated with *Atman*, compassion, and inner awareness; this belongs to philosophical, not anatomical, discourse.

Marma Therapy

Marma therapy involves gentle stimulation of selected points using light, circular, sustained, or rhythmic

pressure, sometimes with suitable oils. Its intended supportive effects include relaxation, reduction of muscular tension, improved body awareness, and calming of autonomic arousal.

Claims that *Marma* therapy treats cardiovascular, psychiatric, or neurological disease require clinical trials. Forceful pressure should not be applied over the cardiac region or other vulnerable tissues, and Marma therapy must not replace emergency or evidence-based medical care.

Discussion and Conclusion

Hrudaya Marma represents an important intersection of anatomy, physiology, psychology, and consciousness in *Ayurveda*. *Hrudaya* was understood as a central functional region involved in circulation, vitality, emotional experience, cognition, and the coordination of life processes. Its classification as *Sadyah-pranahara* reflects recognition that severe injury to the central thoracic region can rapidly threaten life.

The classical description of *Hrudaya* as the seat of *Prana*, *Ojas*, *Manas*, *Buddhi*, and *Cetana* reflect an integrated understanding of bodily and mental functions. Yet *Vyana Vayu* cannot be equated solely with blood circulation, *Sadhaka Pitta* cannot be reduced to cardiac enzymes, and *Avalambaka Kapha* should not be identified simply as interstitial fluid. These are broad functional concepts that may overlap with several physiological mechanisms.

Future research should address textual interpretation, heart–brain communication, the standardisation and safety of *Marma* procedures, and clinical outcomes such as stress, autonomic balance, heart-rate variability, and quality of life.

Hrudaya Marma is a vital anatomical and functional concept relevant to trauma, prognosis, prevention, mental health, and cardiovascular understanding. It should be preserved accurately, interpreted cautiously, and evaluated through rigorous research.

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PRESERVING AYURVEDIC KNOWLEDGE: OUR EXPERIENCE AT A WORKSHOP ON MANUSCRIPT TRANSCRIPTION AND TRANSLITERATION

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ABSTRACT

A manuscript is traditionally understood as a document written by hand, especially one produced before the widespread use of printing. The word *Manuscript* is derived from the Latin words *Manu*, meaning “by hand,” and *Scriptus*, meaning “written.” Manuscripts constitute valuable sources of historical, cultural, literary, scientific, medical, philosophical, and religious knowledge. In India, manuscripts were prepared on various materials, including palm leaves, birch bark, cloth, copper plates, and handmade paper. They preserve significant works related to *Ayurveda*, philosophy, astronomy, mathematics, literature, grammar, and religion. These documents provide valuable information about the languages, traditions, beliefs, practices, and intellectual systems of earlier periods. A two-day workshop on Ayurvedic manuscript transcription and transliteration provided participants with theoretical knowledge and practical exposure to manuscript scripts, writing materials, cataloguing, conservation, digitization, transcription, and scholarly editing. The program enhanced our understanding of India’s manuscript heritage and emphasized the responsibility of preserving ancient knowledge accurately for future generations.

Keywords: Ayurvedic Manuscripts, Transcription, Transliteration, Manuscriptology, conservation, digitization, Sanskrit

INTRODUCTION

A two-day workshop entitled “**Ayurvedic Manuscript Transcription and Transliteration**” was conducted on **29 and 30 May 2026** at Karnataka Samskrit University, Bengaluru. The programme also included the signing of a Memorandum of Understanding between the **CCRAS–National Institute of Indian Medical Heritage, Hyderabad**, and **Karnataka Samskrit University, Bengaluru**.

The workshop was organised to promote the preservation, systematic study, and dissemination of India’s rich Ayurvedic manuscript heritage. It brought together scholars and students of Ayurveda and Sanskrit and introduced them to the fundamental principles of manuscript reading, transcription, transliteration, documentation, conservation, digitisation, and textual editing.

The sessions combined conceptual instruction with practical demonstrations. Participants were introduced to different manuscript materials, scripts, scribal practices, physical characteristics, methods of cataloguing, and techniques for handling fragile manuscripts. The workshop helped us appreciate manuscripts not merely as old documents but as living records of India’s intellectual and cultural history.

Aim of the Workshop

The principal aim of the workshop was to promote the preservation, study, and dissemination of Ayurvedic manuscripts through systematic and accurate transcription and transliteration.

Its major objectives were to:

- Introduce participants to the material and intellectual culture of Indian manuscripts

- Familiarise them with important manuscript scripts
- Explain the differences between transcription, transliteration, and translation
- Provide guidelines for accurate transcription
- Demonstrate the role of Sanskrit grammar in reconstructing manuscript readings
- Develop basic skills in cataloguing, documentation, conservation, and digitisation
- Encourage ethical and transparent practices in textual editing
- Promote interdisciplinary collaboration between Ayurveda and Sanskrit scholars

Understanding Translation, Transliteration, and Transcription

Translation, transliteration, and transcription are related but distinct scholarly processes.

i) Translation: Translation is the transfer of meaning from one language into another. Its primary purpose is to communicate the meaning and context of the source text in the target language, even when the sentence structure or phrasing must be modified.

For example, rendering a Sanskrit Ayurvedic passage into English while preserving its meaning is translation.

ii) Transliteration: Transliteration is the conversion of characters from one script into another. It seeks to preserve the pronunciation and orthographic structure of the original word rather than translate its meaning.

For example: नमस्ते → namaste

Here, the word remains in the same language, but it is represented in the Roman script instead of Devanagari.

iii) Transcription: In manuscript studies, transcription is the process of reproducing the text of a manuscript in a clear and readable form while remaining faithful to the original source. The transcriber records the text as it appears, including unusual spellings, omissions, additions,

corrections, abbreviations, and scribal variations.

Transcription may involve reproducing a manuscript in the same script or converting it into a more accessible script according to clearly defined editorial conventions. It differs from translation because it preserves the original language rather than transferring its meaning into another language.

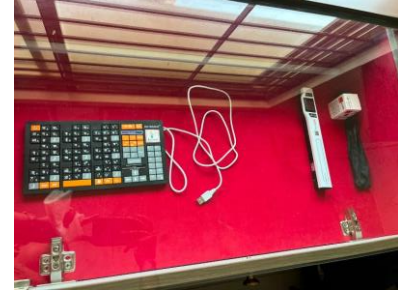


Figure 1. Digitisation and documentation setup used in manuscript studies.

Material Culture of Manuscript Writing

Indian manuscripts were written on a variety of materials depending on the period, geographical region, availability of resources, and local scribal traditions. Important writing materials included:

- Palm leaves
- Birch bark
- Handmade paper
- Cloth
- Copper plates
- Wooden tablets and other prepared surfaces

The workshop introduced participants to traditional scribal instruments and manuscript-preparation techniques. Palm leaves, for example, were processed, cut, polished, inscribed, and often treated with protective substances. Individual folios were commonly tied together through holes using cords and preserved between wooden covers.



Figure 2. Traditional scribal instruments used in manuscript preparation.



Figure 3. Material culture associated with manuscript writing and preservation.

Important Characteristics of Manuscript Writing

Manuscripts differ considerably from modern printed texts. Their correct interpretation requires familiarity with scribal practices and historical writing conventions.

1. Absence or Limited Use of Punctuation

Many manuscripts contain little or no punctuation. Words and sentences may appear continuously, requiring the reader to identify meaningful divisions through grammar and context.

For example: रामोवनंगच्छति

The transcriber must recognise the intended separation as:

रामो वनं गच्छति।

2. Use of Abbreviations

Scribes frequently shortened commonly occurring words or expressions to save space and time. The meaning of an abbreviation must be determined from the manuscript's scribal convention and textual context.

For example, श्री may appear in an abbreviated form such as श्र, depending on the manuscript.

3. Scribal Corrections

Corrections may appear in several forms, including:

- Overwriting
- Interlinear additions
- Marginal additions
- Erased or deleted text

- Symbols indicating where omitted text should be inserted
- Alternative readings written above or below a line

These corrections must be recorded carefully rather than silently incorporated into the main text.

4. Orthographic Variations

The spelling of the same word may differ across manuscripts due to regional pronunciation, historical usage, or scribal habit.

For example: विष्णु / बिष्णु

Such forms should not be automatically treated as errors. They may represent regional or historical orthographic traditions.

5. Decorative and Illustrative Features

Some manuscripts contain ornamental borders, illustrations, coloured headings, floral designs, symbols, or decorated opening and concluding folios. These elements may provide information about the manuscript's region, patronage, religious affiliation, and artistic tradition.



Figure 4. Illustrated and decorated manuscript folios.

Preliminary Steps Before Transcription

Accurate transcription begins with careful examination of the manuscript.

Step 1: Identify the Script

The transcriber must first identify the script in which the manuscript is written. Common scripts encountered in Indian manuscripts include:

- i. *Devanagari*
- ii. *Nandinagari*
- iii. *Grantha*
- iv. *Telugu-Kannada*
- v. *Sharada*



Figure 5. Textual layout and scribal features in manuscript folios.

Knowledge of historical letter forms, ligatures, regional variations, and scribal abbreviations is essential.

Step 2: Understand the Historical Context

Available information concerning the following should be documented:

- Probable date
- Geographical region
- Author or scribe
- Title and subject
- Lineage or ownership
- Colophon details
- Institutional or private collection

Historical context can assist in interpreting script forms, vocabulary, terminology, and orthographic variations.

Step 3: Examine the Physical Features

The manuscript should be assessed for:

- Folio numbers and sequence
- Dimensions and writing material
- Number of lines on each folio
- Ink colour
- Holes, stains, cracks, or broken edges
- Faded or erased writing
- Marginalia and later additions
- Decorative or ownership marks

Step 4: Read the Entire Folio

A manuscript should not be transcribed mechanically, word by word, without understanding the context. The entire folio or passage should first be examined to identify sentence divisions, grammatical relationships, metre, subject matter, and continuity with the preceding and following folios.

Core Principles of Accurate Transcription

i) Preserve the Original Reading: The reading of the manuscript must be preserved as faithfully as possible. The transcriber should not modernise spelling, grammar, or expression merely because the original form appears unusual.

ii) Maintain the Original Sequence: The order of lines, folios, verses, and paragraphs should be followed accurately. Missing, misplaced, or repeated folios must be documented.

iii) Mark Unclear Portions: Illegible, damaged, doubtful, or missing portions should be represented using clearly defined editorial symbols. Conjectural readings must never be presented as certain readings.

iv) Record Scribal Features: Corrections, overwriting, marginal additions, deletions, abbreviations, and alternative readings should be documented systematically.

v) Distinguish Transcription from Editing: Transcription records what is present in the manuscript. Editing evaluates readings, compares manuscript witnesses, and may propose corrections. These two stages should not be confused.

vi) Sanskrit Grammar as a Tool for Manuscript Study:

A sound knowledge of Sanskrit grammar is indispensable for accurate manuscript transcription and textual reconstruction.

- **Sandhi:** Knowledge of *Sandhi* helps identify word boundaries and reconstruct combined forms. **For**

example: देवोऽपि = देवः + अपि

- **Vibhakti:** Recognition of case endings helps establish the relationship between words. **For example:** रामस्य indicates the genitive singular form.
- **Verbal Agreement:** The person and number of a verb can help identify its subject and reveal possible scribal omissions. **For example:** गच्छति is a singular verb form.
- **Chandas:** Knowledge of poetic metre assists in restoring damaged or incomplete verses. A missing or excessive syllable may indicate an omission, addition, or incorrect reading.

Note: Grammar should be used as an interpretative aid, but it should not become a justification for silently altering the manuscript.

Ethical Principles in Manuscript Editing

Manuscript work demands scholarly discipline and ethical responsibility.

i) Avoid Excessive Correction: The editor should not rewrite the author or scribe according to modern expectations. A reading that appears grammatically irregular may preserve an older, regional, technical, or context-specific usage.

ii) Respect Scribal Traditions: Not every variation is an error. Some differences may reflect regional pronunciation, script conventions, textual transmission, or historical linguistic practice.

iii) Maintain Transparency: Every editorial intervention must be clearly documented. Suggested corrections, restored readings, omissions, additions, and uncertain passages should be distinguished from the original manuscript text.

These difficulties require patience, contextual reading, grammatical competence, and, wherever possible, comparison with other manuscript copies or printed editions.

difficulties require patience, contextual reading, grammatical competence, and, wherever possible, comparison with other manuscript copies or printed editions.



Figure 6. Preserved manuscript bundles with protective supports.

Challenges in Manuscript Transcription

Manuscript transcription involves several physical, linguistic, and scribal challenges that can affect the accurate reading, interpretation, and reconstruction of a text.

Category	Specific Challenges	Possible Effect on Transcription
Physical Challenges	Holes caused by insects or binding	Loss of letters, words, or portions of the text
	Faded ink	Difficulty in identifying characters accurately
	Broken or missing folios	Loss of textual continuity
	Stains, cracks, and damaged edges	Obscuring or destruction of written material
	Folios placed in the wrong sequence	Disturbance of the logical or narrative order
Linguistic Challenges	Regional forms of Sanskrit	Difficulty in recognising non-standard vocabulary and usage
	Mixed Sanskrit and Prakrit forms	Complications in grammatical and linguistic interpretation

	Technical Ayurvedic terminology	Need for subject-specific knowledge and contextual understanding
	Obsolete expressions	Difficulty in determining the intended meaning
	Irregular grammar or spelling	Risk of misreading regional, historical, or scribal variations as errors
Scribal Challenges	Abbreviations	Difficulty in expanding shortened words correctly
	Overwriting	Uncertainty regarding the original or corrected reading
	Marginal corrections and additions	Difficulty in identifying their intended position in the text
	Similar-looking characters	Possibility of misidentification and incorrect transcription
	Inconsistent letter forms	Difficulty in recognising characters written differently by the same scribe
	Accidental repetition or omission	Addition or loss of letters, words, lines, or passages

Our Learning Experience

The workshop provided us with valuable knowledge about ancient manuscripts and their preservation. We learned about traditional writing materials such as palm leaves, birch bark, and handmade paper. Experts explained the characteristics of different scripts, methods of cataloguing, conservation procedures, digitisation techniques, and the basic principles of transcription and transliteration.

The practical sessions allowed us to observe manuscript features and understand the precautions required when handling fragile documents. We learned that even a minor mark, marginal note, alteration, or scribal symbol may

have textual importance. The experience also demonstrated that manuscript study requires cooperation among experts in Ayurveda, Sanskrit, palaeography, linguistics, history, conservation, and digital documentation.

The workshop significantly enhanced our appreciation of India's literary, medical, and cultural heritage. It showed us that manuscripts are not merely objects of antiquity; they are repositories of knowledge that may contain unpublished interpretations, regional medical practices, formulations, commentaries, and intellectual traditions.



Figure 7. Palm-leaf manuscripts showing traditional bundling, binding, and conservation.

Key Takeaways

I. Accurate transcription is:

- A scholarly discipline
- A foundation for critical editing
- A means of making manuscript knowledge accessible
- A cultural and intellectual responsibility

II. Sanskrit grammar is indispensable because it:

- Clarifies meaning
- Helps identify word divisions
- Supports the restoration of missing readings
- Assists in recognising scribal errors
- Prevents inappropriate editorial intervention

“Every manuscript is a living witness to intellectual history. The transcriber's duty is preservation with

precision.”

Conclusion

The two-day initiative jointly conducted by the CCRAS–National Institute of Indian Medical Heritage and Karnataka Samskruta University represented a meaningful step towards the preservation, documentation, and scholarly study of India’s Ayurvedic manuscript heritage.

The workshop encouraged collaboration between Ayurveda and Sanskrit scholars and strengthened participants’ understanding of manuscript scripts, transcription, transliteration, documentation, conservation, and editing. It also highlighted the importance of preserving the original reading while maintaining transparency in every editorial intervention.

Systematic training in manuscriptology can facilitate the identification, study, digitisation, and future publication of unpublished Ayurvedic works. Such initiatives safeguard traditional knowledge, strengthen literary and historical research in Ayurveda, and make India’s medical heritage more accessible to future scholars.

Overall, the workshop was an informative, practical, and enriching academic experience. It deepened our respect for manuscript traditions and reinforced the responsibility of preserving ancient knowledge with accuracy, sensitivity, and scholarly integrity.

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DIET AND LIFESTYLE IN PRAKRUTI: A THERAPEUTIC UTILITY FOR EVIDENCE BASED PRACTICE

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ABSTRACT

Ayurveda has a unique way of classifying humans which is used in the clinical management of health and disease. Humans are classified into three fundamental types of constitution or prakriti called Vata, Pitta and Kapha, based on their anatomical, physiological, and psychological characters.

According to ayurveda prakriti of a person is determined at the time of conception and does not change until death. Recommendations on diets, lifestyles, and drugs vary depending on prakriti of an individual.

An individual's prakriti is another important determinant of the effect of food on the system. prakriti of an individual is characterized by a set of physical, physiological and attributes. For example, based on taste preference, individuals can be grouped as vata having affinity for (sweet, sour & salty tastes), Pitta (liking for sweet, bitter & astringent taste) and Kapha (for pungent, bitter & astringent tastes) whereas these tastes mitigate any negative effects of the inherited constitution, usage of tastes in the reverse order can cause imbalance in the body. For example, if a vata constitution person continuously consumes pungent, bitter, and astringent (pitta affinity) tasting materials it could lead to rapid aging and degeneration of the body.

Every living being in this universe is composed of Panchamahabhutas, the panchabhoutika components of ingested food nourishes their respective tissue elements in the body. Ahara is the best medicine and is considered one among the sub pillars of ayurveda (Thrayo-upasthamba) the ahara (food), Vihara (lifestyle) which are congenial to the channels, constitution and strength of an individual is termed as pathya (wholesome) and which is non congenial is termed as apathya (unwholesome). Vihara (lifestyle) - A lifestyle is a characteristic bundle of behaviours that makes sense to both others and oneself in a given time and place, including social relations, consumption, entertainment and such other behaviours. The preventive and curative aspects of ayurveda revolve around the central theme of pathya ahara and vihara. Individual health status is mainly depends on Diet (ahara) and Life style (Vihara) of a person.

The analysis of prakriti is like the key or a secret code that can unfold the mystery of diseases an individual. For example if an individual of vataja prakriti indulged in vata provoking diet and lifestyle, he will be prone to vataja diseases which will be troublesome to cure. This means vataja prakriti person is more prone to disease caused by vitiated vata. Dietary habits reflect individual food preferences and are often related to culture, education, socioeconomic background and health status. Hence, this study promotes the ideas of prevention of disease with the practice of prakriti assessment and its essential factors in disease treatment protocol.

Keywords: Prakriti, Ahara, Vihara, Pathya, Apathya.

INTRODUCTION

Ayurvedic theories and practices on health, food and nutrition are quite different from those of biomedicine and modern nutrition. Systemic exploration can provide new

insights to health and nutritional sciences to provide contemporary solutions in health care, for instance, how one can modulate the diet and lifestyle to suit one's prakriti.

“Praninam punarmulamahara balavarnauojasam cha” Food is the cause of strength, complexion of person and vitality of all living beings. It is made clear from above statement that how important it is to consume food which is nutritious and provides good health. Ayurveda has focused on the concept of ‘Agni’ digestive fire along with the proper food consumption. Every single human has different digestive capacity according to their prakriti, body type, body physique etc. so what you eat on the daily basis becomes even more important in terms of maintaining good health. Diet regimen, how to eat, what to eat, when to eat etc. all these concepts have been made clear in Ayurved textbooks. The way food impacts our daily activities is remarkable and however busy our routine lives may have become, we need to draw our attention to what we eat and how is it beneficial to our overall health, is it providing all the Rasa’s that are required for growth & development, is it providing enough energy to perform daily activities, is it keeping you active all day etc. Even modern science cannot deny that impact of the diet on human health. A German philosopher Ludwig Feuerbach coined a famous phrase ‘We are what we eat’ which ayurveda approves of and supports with many theories. This article focuses on Acharya Sushruta’s perspective of ‘Hita-Ahita Ahara’ along with pathyam Ahara and Vihara and how it directly impacts human health.

Concept of Hita-Ahita

Some Acharya suggest that the substances which are beneficial for vata Dosha can cause disturbance in pitta dosha and this is the reason that no substance can be completely beneficial i.e. Hita or completely non-beneficial i.e., ahita. Acharya Sushruta has quoted otherwise. According to him, substances can be completely beneficial (Hita) or completely non-beneficial to the living beings (Ahita) naturally or by combination ‘swabhavataha’ i.e. due to its basic ‘prakriti’. In all the state of the substances is true nature i.e., ‘prakriti’ remains the same.

Term	Definition	Example
Hita	The Ahara or Vihara which is suitable, beneficial, can provide proper nutrition either by its true nature or by any combination is called ‘Hita’;	Jala, Ghrita, Dugdha etc
Ahita	The Ahara or Vihara which is unsuitable, disadvantageous for human health is called ‘Ahita’.	Agni, kshara, visha.

CONCEPT OF PRAKRUTI:

To understand the concept of prakriti we should know how ayurveda views the body. Individuals are considered to take form as a result of three life giving forces and these forces are called “*doshas*” namely vata, pitta and kapha. They are considered simply as the inherent intelligence of the body, thus shaping how we look, how our metabolic processes function, how we respond to different surroundings, even how we think and feel. Bringing balance and health to the whole system of dosha’s, dhatu’s and mala’s is the fundamental principle of *ayurvedic* healing and as stated by Acharya Sushruta ‘dosha, dhatu, malamulam hi shareeram’ your prakriti does not change; it remains constant throughout life. The state of the doshas can change. This changed pattern is called vikriti or conditional state, as it does not match the original pattern and thus causes disruptions that eventually result in some kind of disorder.

The attributes given to vata, pitta and kapha exist all around us. They manifest in living conditions, emotional atmosphere and in the foods we eat. These qualities from our environment act on our bodies, bringing to it their qualities. The outer elements are directly changing the balance of inner elements. This is known as the principle of like increasing like. By the same logic, influences of opposite qualities to the dosha will help to maintain balance.

These are fundamental principles of healing in Ayurveda and the key to making correct choices to support the health and beauty of the body. This study is presenting the effort of collection of dietary sources which are favourable for three doshic prakriti to be followed by the individuals will result in a healthy mind as well as body.

Vata prakriti:

Vata represents dry, mobile, light, expansible, cold, quick, clear, rough and a bit astringent in taste, vata individuals are lightly built, will have dry and rough skin, very quick in mental process and take initiative actions. Vata is usually manifested as dry skin with a thin structure or a lean body, the nails, hair, eyes, and teeth appear dry. Voice is low, weak, hoarse and crackling. Vata individuals are hyperactive and can work with lesser sleep, due to the quick action, the person will show newer initiatives in work. But, the dry quality makes them lose strength and get tired soon.

Pitta prakriti:

Pitta is usually hot, liquid, slightly foul smelling, sour and pungent in taste so pitta individuals sweat a lot and have a higher body temperature than normal ones. These individuals have a higher metabolic rate, they drink and eat a lot and are very often thirsty. They have moles or skin eruptions. They have scanty and soft hair and tend to the grey and bald prematurely. They can't bear minimum amount of heat, they get provoked easily and upset about it. The fluid nature makes the muscles and joints, the body parts very soft and flabby, their higher metabolic rate leads to excess excretion and perspiration. The foul smell tends to give it strong body odour to them.

Kapha prakriti:

Kapha is unctuous, smooth, sweet in taste, dense, soft, rigid, stable and slow. Kapha individuals have soft limbs, slower gait and are usually slow to understand, this cold quality implies that their digestive power or agni is low.

Kapha individuals possess unctuous, soft, and oily skin.

The steady and stable quality endows with a well-built, steady body. The dense nature of kapha provides fullness to the organs and body. They are usually slow in their activities. They have strong perseverance and are also emotionally very mild.

GENERAL GUIDELINES FOR SELECTION OF FOOD:

When the rishis wrote about ahara, they were living in a simpler, less polluted world. Times have changed and many issues need consideration when addressing diet. The suggestions that follow are not necessarily traditional, but are keeping in spirit of ayurveda.

- 1) Select organic foods when possible because these are richer in nutrients, especially trace elements.
- 2) Eat foods that grow in the area in which you live or within a 400 mile radius because they form a similar climate zone and flourish in your local area, so will you.
- 3) Eat foods that are in season so they are freshest and naturally most suited to the climate in the particular time that you are in.
- 4) Select foods appropriate to your dosha depending upon the season, time of the day when a particular dosha is naturally higher for example vata is higher in autumn and winter and daily in the afternoon. Pitta is higher in summer and daily at midday. Kapha is higher in the spring and daily in the early morning and evening.

DIET ACCORDING TO DOSHA:

An ayurvedic diet is based more on the intuitive sense of what is attractive to the individual by colour, smell, temperature, taste, and texture; trusting that when the body is in balance, it will be attracted to foods by its own innate intelligence. Foods for a particular dosha are there not to enhance or make the dosha more that way, but to balance its tendencies with opposite qualities and resultant tendencies. Ayurveda honours what has basically worked as the most life sustaining foods and food proportions for humans over the course of history; a diet of 40-60% whole

cereal grains, 30-50% fresh fruits and vegetables and 10-20% high Quality proteins.

Prakriti and Ayurvedic diet conditions:

Everyone cannot eat the same thing, the prakriti they have helps in deciding the appropriate dietary requirements for them. Patients have to modify their regular food intake if needed. In general, individuals with vata prakriti should take warm, unctuous and sweet substances. Pitta prakriti individuals should take heavy, cool bitter, sweet and astringent food articles. Kapha prakriti individuals should consume warm, dry, light, bitter, pungent and astringent food items.

Ayurvedic dietary suggestions for vata-pitta, pitta-kapha, kapha-vata type individuals usually follow a common sense approach. They need to make small changes in their food choices and the eating habits. A wholesome diet which includes all the food group is very important. Also there are guidelines on foods and beverages which should be avoided or limited. There are recommended based on the unique properties of the dominant dosha of the individual and analysis of the properties of foods. Because the food intake directly influences the doshas and thus results in illness.

Ahara Vihara according to prakriti:

Vata prakriti:

If vata is your predominant dosha, then follow the diet and lifestyle measures to keep your dosha balanced.

Diet for vata prakriti

- Sweet, salt, sour-include foods or ingredients that are sweet, salt and sour in your diet. What is suitable for your diet? Rice, wheat, uraddal, milk, Ghee, Oil, Curd, Chicken, mutton, dry fruits etc.
- Always make sure that you have got enough for content in your diet.
- Prefer eating warm and freshly prepared foods. Foods directly from refrigerator are not good for Vata prakriti.

- Avoid bitter, astringent or pungent (spicy foods/ingredients) taste in your diet. For example millets, certain varieties of fish, dry fish, etc. you can include them once in while in your diet, But not advisable for regular meals.
- Most importantly, include ingredients like as afoetida, cumin seeds (jeera), ginger, black salt, jaggery and caram seeds (amam), in your regular diet.

Lifestyle activities for Vata prakriti:

- Regular oil massage –this greatly helps vata prakriti people for their entire life. Precisely, there must be oil always behind the ears, on the soles, and scalp. Apart from this vata prakriti can also practice oil pulling or adding oil to nostrils, etc for better health.
- Must avoid excessive exercise. Don't spend too much at the gym and exert your body. In addition involve yourself in strength training, sports and swimming rather than cardio workouts.
- Never stay awake for a long time at night.

Healthy food and good sleep are very important for Vata prakriti, so never compromise on that.

Pitta Prakriti

If pitta is your predominant dosha, then follow the diet and lifestyle measures to keep your dosha balanced.

Diet for Pitta prakriti:

- Sweet, Bitter, Astringent include foods/ingredients that are sweet, bitter and astringent in your diet, naturally those with pitta prakriti have a higher body temperature, so reducing hot and spicy foods and foods with a lot of salt and sour taste is good for your health.
- What is suitable for your diet? Rice, Wheat, mung bean. Toor dal (pigeon, pea), Amla, Ghee, Milk, pomogranate, ashgaurd, pumpkin, beans varieties etc.

- Avoid chilies or foods that are too spicy such as pickles, etc. Also avoid too much of oily foods.
- Do not hesitate to include bitter taste as much as you can, because bitter helps in keeping pitta in balance.
- Apart from this, include these ingredients in your regular diet, -Ghee, Lemon, cardamom, fenugreek, and nutmeg (jaticai)

Lifestyle activities for Pitta prakriti:

- Just like vata prakriti excessive exercise is not good for pitta prakriti too.
- Too much exposure to AC (air conditioner) is also not good for pitta prakriti.
- Always keep your anger, irritation, stress/tension, under control.
- Spiritual involvement helps in balancing pitta dosha more than vata or kapha dosha.
- Listening to calming music or performing fine art activities helps in keeping pitta in balance.

Kapha prakriti:

If kapha is your predominant dosha, then follow the below diet and lifestyle measures to keep your dosha balanced.

Diet for Kapha prakriti:

- Bitter, pungent, Astringent-include food /ingredients that are bitter, pungent, and astringent in your diet. reduce your intake of food that, taste sweet and sour in your regular meal

What is suitable for your diet? Mung bean, Rice & Wheat older than one year. Barley, Little millet (sama), finger millet (kezhvaragu / ragi), pearl millet (kambu), Buttermilk, bitter tasting leafy vegetables, sweet potato, Elephant foot yarn (sanai kilangu), etc.

- Make sure that you include a lot of fiber content in your diet.
- Apart from this, include these ingredients in your

regular diet –ginger, cumin seeds (jeera) carom seeds (omami), turmeric, and cloves.

- Avoid sweets, backed items, and cold foods, They might disturb your kapham.

Life style activities for kapha prakriti :

- Always keep yourself active, it is very important for kapha dosha.
- Avoid a sedentary lifestyle, daytime sleep, taking too much rest, and keeping your mind idle. This can even stimulate metabolic disorders in people with kapha prakriti.
- Most importantly, people with kapha prakriti must do cardiac workouts daily at least for 20 minutes.
- Exposure to sunlight is very much needed for kapha.
- Keep your brain engaged with lots of productive work.

Importance of Prakriti pareeksha :

In Ayurveda Pareeksha is explained as ‘Rogamadou Pareekshet Tathonantarum Aoushadham’. In order to fulfill this demand it is necessary to go through our ancient science. Dashavidha pareeksha declared by Acharya Charaka is the crucial art of examination which may be helpful for it. dashavidha pareeksha is very essential to know the nature of the disease and status of the patient before deciding any treatment protocol or before administration of any medicine. It is very essential that before planning any treatment one should have complete knowledge of Roga and Rogi bala. The purpose of examination is obtaining knowledge regarding span of life, strength, and intensity of morbidity. Dashavidha Pareeksha includes examination of prakriti (Body constituent), Vikruti (Pathological examination), saara (Examination of elemental tissue & mind), samhana (examination of compactness of body), Pramana (measurement), Satmya (Suitability), Satva (Examination of mental constitution), Aahara shakti (Examination of digestive power), Vyayama shakti (examination of

strength by exercise), vaya (Examination of age). Among these Dashavidha pareeksha except vikruti pareeksha is to be done to understand the overview condition of the person. Vikruti pareeksha is to be done to elicit the factors which are responsible for the pathogenesis of the disease.

Prakriti pareeksha is an integral part of Dashavidha pareeksha. It includes both shareera & Manasik bhavas, bala (strength), Agni (Digestive fire), Satva (Mental strength), and satmya (beneficial to health), are nothing but constituents of prakriti. Prakriti is the swabhava or nature of an individual and it is an inherent characteristic. Foetus is developed on many factors such as prakriti of shukra (sperm), shonita (ovum), kala (time of conception) and Garbhashaya (uterus). prakriti is also affected by the food habits and lifestyle followed by the mother at the time of conception and during the entire gestational period. These factors are in turn completely dependent on the Dosha. Thus, foetus is dependent on the dosha and its prakriti is decided by the prominent Dosha/Doshas at the time of conception. The one or more doshas predominant in the above said factors from the Janmajaat dosha prakriti (body constitution by birth) of the foetus. Hence some persons are of kapha/pitta/vata constitution or balanced tridosha constitution by birth.

The favorable and unfavorable things(pathyapathya) for particular type of prakriti could be advised to the individual on the basis of prakriti. e.g. vata prakriti individual should not consume dry, rough, cold, astringent substances. similarly, pitta prakriti individuals should avoid hot, sour, salty substances and the social environment that will rise his anger and kaphaja should be asked to take regular exercise and to avoid cold environment. Equally balanced (sama) prakriti is usually healthy and remain disease free and even if gets diseased; recovers soon. So knowledge of prakriti has prime importance in both healthy and diseased persons.

Some examples of diseases due to the Ahara vihara – vatarakta, raktapitta. While describing Vatarakta it is a lifestyle disorder,

nidana of Vatarakta -Acharyas explained the Aharaja and Viharaja -Aharaja nidana -Excessive intake of Rasa such as Katu, Tikta, Kashaya, amla, Lavana, Kshara, Excessive intake of Ahara which is snigdha, Ushna, Ruksha in guna and kleena, shushka, anupmasa, kulatha, masha, Ikshu. Due to faulty dietary pattern such as Adhyashana, Abhojana, Mishtana, sukhabhojana.

Viharaja nidana-Ativyayama, Krodha, Divaswapna, Ratrijagarana, achankramanasheela, abhighata, plavana, veganigrahana, Travelling on Elephant, Horse, camel, etc.

While treating vatarakta-First line of treatment is Nidana parimarjana and follow the pathya and apathya.

Another disease, Raktapitta-nidana are, aharaja, Viharaja Aharaja -rasa -Excessive consumption of Diet that are Amla (Sour), Katu (pungent), Lavana (salt), Intake of excessive vidahi (improper digestion leading to burning sensation of food), Tikshna (sharp), Ushna (hot), Khara (Akalies).

Vihara-aatapa-Exposure to heat of sun, Vyayama (Excessive physical exercise). Chikitsa and pathya apathya are-Nidana parimarjana, santarpana /apatarpana chikitsa. Mridu, sheetala guna aahara, Madhura, Tikta kashaya rasa aahara. Pradeha, avagaha, parisheka, samsparhana, etc.

Discussion :

Ahara, Vihara, and Dinacharya are topics that Ayurveda explores in detail. it merely highlights the importance of Ahara, for promoting health and treating illness, as per the well-known Ayurvedic principles out lined by Acharya charaka. According to Ayurveda, the inner(mind) and outer (physical) aspects of the organisms are symbiotically linked. The aspect was altered by one's derangement. Contrary to current anatomy, which includes different levels of cells, tissues, organs, organ systems in a human body. The human body inherently composed of the three dosha's of vata, pitta and kapha. These three Dosha's, referred to as tryaupasthambha by acharya charaka, are

how Ayurveda encapsulates all of the elements that make up the body. When body is in harmony, it seeks healthy nutrients, but when the body or mind are out of balance, we no longer connection between our exterior body and inner intelligence, and as a result, we seek meals that are in opposition to our Doshas Prakriti. This is known as ‘samanyam Vriddhikaranam’ Concept, which states that ‘like attracts like’ meals that lessens a doshas intensity are thought to sooth it, whereas food that enhance it are seen to agitate it. For instance, if pitta grows in the body, we will have a tendency to seek more pitta-vitiated food, leading to more Meals that are sweet, sour and salty balance vata, while foods that are sweet, pungent and bitter balance pitta and balance kapha, hence it becomes more important to know our prakriti and have ahara and vihara according to it to live a peaceful and a healthy life according to our Ayurvedic guideline.

Conclusion:

Ahara- Vihara and pathya apathya for different prakriti is mentioned so that One should know the Suitability for ahara towards their body. Hence while diagnosing and treating the diseases Physician must have the Knowledge of Ahara -vihara and pathya apathya for different prakriti is very essential and our Ancient Acharyas has explained in detail about Treatment and which diet, and lifestyles must follow to bring back the normalcy.

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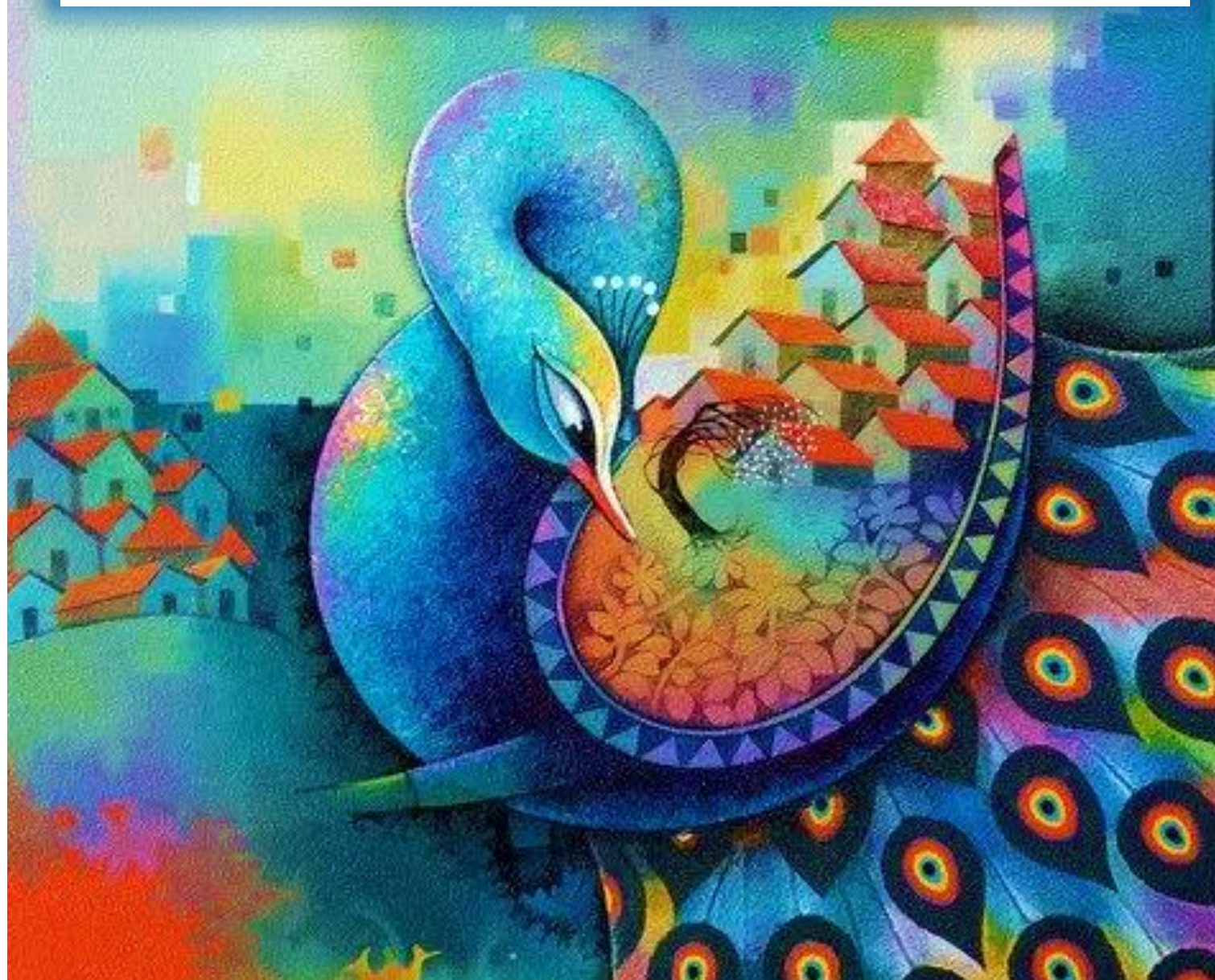
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FROM THOUGHT TO VERSE

ಶೀರ್ಷಿಕೆ: ಶಸ್ತ್ರಚಿಕಿತ್ಸೆಯ ಬ್ರಹ್ಮ ಸುಶ್ರುತ

ಗಂಗೆಯ ತಟದಲಿ ಕಾಶಿಯ ಮಣ್ಣಲಿ,
ಬೆಳಗಿತು ಒಂದು ದಿವ್ಯ ಜ್ಯೋತಿ,
ಶಸ್ತ್ರಚಿಕಿತ್ಸೆಯ ಜಗತ್ತಿಗೆ ಅಂದು,
ನೀಡಿತು ಹೊಸದೊಂದು ಪ್ರೀತಿಯ ಪ್ರೀತಿ.

ಕತ್ತಿ-ಕಟಾರಿಗಳ ಯುದ್ಧದ ಕಾಲದಿ,
ಗಾಯದ ನೋವಿಗೆ ಮರುಗಿದ ಯೋಗಿ,
ಮನುಜರ ಅಂಗವ ಮರುರೂಪಗೊಳಿಸಲು,
ಹುಟ್ಟಿದ ಶಸ್ತ್ರ ವೈದ್ಯರ ತ್ಯಾಗಿ.

ನೂರು ಯಂತ್ರಗಳ ವಿನ್ಯಾಸಗೊಳಿಸಿ,
ಮಾನವ ಹಸ್ತವೇ ಶ್ರೇಷ್ಠವೆಂದಿ ಭಜಿಸಿ,
ಹರಿದ ಮೂಗಿಗೆ ಕೆನ್ನೆಯ ಚರ್ಮವ ತಂದು,
ಪ್ಲಾಸ್ಟಿಕ್ ಸರ್ಜರಿಯ ಜಗಕೆ ತಂದೆ ಇಂದು.

ಅರಿವಳಿಕೆಯ ಹನಿ ನೀಡಿ ರೋಗಿಗೆ,
ರಕ್ತದ ಹರಿವನು ನಿಯಂತ್ರಣ ಮಾಡಿ,
ಸಂಶೋಧನೆಯ ಮಹಾ ಪಥವನು ತೋರಿದ,
ಗುರು ಸುಶ್ರುತನ ಪಾದಕೆ ಶಿರಬಾಗಿ ಪಾಡಿ.

ಸಾವಿರ ವರ್ಷಗಳ ಭವ್ಯ ಪರಂಪರೆ,
ಶಲ್ಯ ತಂತ್ರದ ಅಮೃತ ಧಾರೆ,
ನಿನ್ನಯ ಕೀರ್ತಿಯು ಜಗದಗಲ ಹರಡಿದೆ,
ಓ ಜಗದ ಪ್ರಥಮ ವೈದ್ಯ ಶಿಕಾಮಣಿಯೇ!

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