

A COMPREHENSIVE STUDY ON “HRIDAYA AS PRANAYATAN”



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Ayurveda Vachaspati

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Abstract

In *Ayurveda Acharya Charaka* was the first person who briefly highlighted the importance of *Pranayatana*. According to his view, regarded as the vital components and dedicated a special chapter on *Pranayatana* in *Sutrasthana* as “*Dashapranayatana*” along with a little reference in *Shareera sthana*. There are many concepts in which acharyas spoke about delicacy and vitality of body (*Prana*) i.e.: *Marma*, *Pranayatana* etc. The word *Pranayatana* is formed by two words – *Prana* + *Ayatana*. Here *Ayatana* means *Asraya Sthana* (Seat) and *Prana* is a life. So, the *Sthana* which gives seat for *Prana* is called as *Pranayatana* (Seats of life). *Pranayatana* are 10 in number, viz. *Murdha*, *Kantha*, *Hridaya*, *Nabhi*, *Guda*, *Basti*, *Oja*, *Shukra*, *Shonita* and *Mamsa*.

Pranayatan is a delicate and vital part of the body & its' trauma or complication results in death. Its concept needs to be studied substantially. *Acharya Charak* also described *Hridaya* as one of *Trimarma* & *Acharya Shushrut* designated *Hridaya* as *Marma sthan* of *Sadhyapranhar* variety. Both *Acharyas* had not described detail anatomy of this region. They have concluded this region as *Pranayatan*. They had not explained whether *Hridaya Pranayatan* is a single structure or complex; which needs to be analyzed the vitality of this region. In these regard, recent article on “epidemiology of cardiovascular disease” claimed that – “More than 80 percent of the deaths occurred in low- and middle-income countries in CVD (WHO, 2009e). The World Health Organization (WHO) estimated there would be about 20 million CVD deaths in 2015, accounting for 30 percent of all deaths worldwide (WHO, 2005).”

Aim: Study on *Hridaya* as *Pranayatan*

Objectives:

- Study of regional & applied anatomy of Heart.
- Study of pathology of Coronary Artery Disease.
- Survey of Quality of life in cases of CAD.
- To establish the vitality of *Hridaya* as *Pranayatan*

Design :

Observational study

Methods :

- 30 diagnosed patients of Coronary artery Disease will be selected according to inclusion criteria.

Written informed consent of the patient will be taken prior to case taking

- 30 Healthy Individuals will be selected.
- Case history of the patient & healthy individuals will be taken with special case proforma with the help of data from SF-36 questionnaire. we will study quality of life of each group.

Conclusion:

From this observational study we can conclude that *Hridaya* is the most Vital organ and the concept of *Hridaya* as *Pranayatan* is relevant in modern era.

Keywords: *Hridaya,Pranayatan,Quality of Life, Coronary artery Disease*