



AETIOLOGICAL STUDY OF HYPERTENSION IN AYURVEDA

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ABSTRACT

Hypertension is a major health problem that affects approximately 29% of adult population worldwide which is expected to be 2.5 billion in the year 2024. Hypertension may lead to different cardiovascular diseases, cerebro vascular diseases and peripheral vascular diseases. There is no specific cause identified till date which may cause hypertension and these group of patients are known as essential or primary hypertension. Modern civilization and life style welcoming do many diseases. Ayurveda emphasizes that whatever may be the causative factor, it should imbalance the doshas, then only patient may suffer from any diseases. So, identification of aetiological factors like diet, physical activities, behavior etc. are highly essential for every diseases even for hypertension also. An aetiological study was conducted among 200 number of patients of hypertension according to aharaja, viharaja and manasik nidanas which were randomly selected from OPD & IPD of Govt Ayurvedic college & hospital, Jalukbari, ghy.

KEYWORDS : cerebro vascular diseases ,primary hypertension, aharaja, viharaja, manasik nidana.

INTRODUCTION:

Ayurveda the ancient holistic science emphasise on both preventive and curative aspects of diseases. The human being are suffering from different diseases were approached from the ancient time by analyzing the aetiological factors (Hetu), clinical features (Linga), and ultimately treat the suffering (Ausadh). These three approach is known as Trisuta in Ayurveda. Identification of the aetiological factors helps to avoid it (Nidana Parivarjanam) and ultimately stop the further progression of the disease. So, Ayurveda gives more importance for the identification of the different aetiological factors (Nidana).

Worldwide approximately 29% (1 billion) of Indian population are suffering from hypertension which is expected to be increased upto 2.5 billion in the year 2024. Hypertension may lead to different cardiovascular diseases, cerebro vascular diseases and also peripheral vascular diseases. It may also cause cardiac abnormality and even heart may fail to pump out in advanced state of uncontrolled hypertension. Interesting fact is that there is no specific cause identified till date which may cause hypertension and this group of hypertensive patients are known as Essential hypertension or Primary hypertension. Multiple research and study has identified some provoking factors for hypertension i.e. obesity, excessive salt intake, genetic cause, stress factor, unhealthy diet & life styles etc. Keeping that view of all causative factors of hypertension multiples modern medicines are being discovered to control hypertension but can not able to stabilize the blood pressure for longer time without medication, so patient once started to take antihypertensive medicine should continue till their death.

AIMS & OBJECTIVES:

Aetiological study of Hypertension in Ayurveda

MATERIALS & METHODS:

An aetiological study was carried out on patients attending OPD & IPD of Govt. Ayurvedic college & hospital, jalukbari, ghy-14. The patients suffering from hypertension were enrolled for the present work. A total number of 200 patients were taken for the study based on a special proforma prepared on the basis of Aharaja, viharaja & manasik nidanas (etiologies related to dietary habits, physical exercises and psychological behavior)

DEMOGRAPHIC PROFILE ON AETIOLOGICAL STUDY OF 200 CASES OF HYPERTENSION

A. Table 1: Age wise distribution of 200 patients of Hypertension

Age (Years)	No. of patients	Percentage
18-30	03	1.5%
30-40	30	15%
41-50	60	30%
51-60	52	26%
61-70	52	26%
>70	03	1.5%
Total	200	100%

Comments- The study shows that Maximum number of hypertension cases were found between the age group 41-50 years.

Table 9: Addiction wise distribution in 200 patients

Addiction	N	Percentage
Alcohol	38	19%
Betel nut	89	44.5%
Pan masala	10	05%
Pica	01	0.5%
Smoking	18	09%
Tea	32	16%
Tobacco	10	05%
No addiction	00	00

Comment: The study shows highest incidence of addiction towards betel nuts (44.5%), 19% were addiction of alcohol, 16% had addiction of tea, followed by 9% addiction of smoking. Aetiological study on 200 patients

1. Vataja Nidan

Aharaja Nidan:

Aharaja Nidan	N(n=200)	Percentage
Atiruksha	92	46%
Atitakta	20	10%
Asti kashay	40	20%
Atisheeta	16	8%

Comments: Among the vata prokopak Aharaja nidana -Ati Ruksha ahar was found more predominant (46%), followed by ati kashaya (20%), ati takta (10%), ati sheeta (8%)

Viharaja Nidan:

Viharaja nidana	N(n=200)	Percentage
Ayam	52	26%

Ativiyam	72	36%
Ratrijagarana	64	32%
Vegadharan	44	22%
Upavash	20	10%
Atisrava	68	34%
Adhyasan	04	2%
Ajeernasan	16	8%
Karshana	04	2%

Comment: Among the viharaja nidana Avyam 26%, Atisrama 34%, Ratrijagarana 32%, Vegadharana 22%, were found predominant.

Mansik Nidan:

Manasika Nidan	N(n=200)	Percentage
Atichinta	124	62%
Atisoka	52	26%
Bhoy	12	6%

Comment: Among the Manasik nidana Atichinta found predominant (62%) followed by Atisoka (26%) then bhoy (6%)

Pittaja Nidan

i.Aharaja:

Aharaja Nidan	N(N=200)	Percentage
Atikatu	76	38%
Atiamla	48	24%
Atilavana	84	42%
Ushnabhajan	36	18%
Tikshnabhajan	76	38%
Dadhi	44	22%
Sura	28	14%

Comment: Among the Pittaja Aharaja nidana Atilavan found predominant (42%) followed by Tikshnabhajan (38%) then Atikatu (38%) then Atiamla (24%).

ii.Viharaja Nidan

Viharaja Nidan	N(N=200)	Percentage
Krodha	100	50%
Upavash	20	10%
Atopasevan	32	16%

Comment: Among Pittaja Viharaja nidana Atopasevan (16%), Upavash (10%) were found predominant and in Manasik nidana krodh (50%) was found

2.Kaphaja Nidan

i.Aharaja Nidan

Aharaja Nidan	N(N=200)	Percentage
Ati guru	8	4%
Atimadhur	28	14%
Atisnigdha	32	16%
Viruddhabhojan	100	50%
Asatmyabhajan	40	20%

Comment: Among the Aharaja nidana viruddhabhojan (50%), then Atisnigdha (16%), then Atimadhur (14%) were found predominant.

Viharaja Nidan:

Viharaja Nidan	N(N=200)	Percentage
Adhiknidra	18	9%
Dibaswapna	36	18%
Visamasan	32	18%

Comment: Among the Kaphaja Viharaja nidana Dibaswapna (18%), then Visamasan (18%) then Atinidra (9%) were found predominant

DISCUSSION ON AETIOLOGICAL STUDY:

a.viharaja and Manasik nidana with the involvement of dosha ,dhatu and srotas . Under

- a. Vataja: Aharaja nidanas are Ati ruksha (46%), ati tikta (20%), ati kashay (20%) & ati sheThe aetiological study was carried on 200 patients on the basis of Aharajeta 8%.Viharaja nidanas are avyam 26%, ativiyam 36%, ratrijagaran 32%, vegadharan 22%, upavash 10%, atisrava 34%, adhyasan 2%. Manashik nidanas are ati chinta 62%,ati soka 26%, bhoy 6% hence, under vataja nidana, manashik nidana,ati chinta i.e. 62% is seemed to be more than that of aharaja and viharaja nidana.
- b. Pittaja: aharaja nidanas are ati katu(38%), ati amla 24%,ati lavana 42%, ushna bhajan 18%, tikshna bhajan (38%), dadhi 22%,sura 14%. Viharaja nidanas are krodh 50%, upavash 10%, atopasevan 16%.

Hence under pittaja nidana,in aharaja nidana ati katu and tikshna bhajan is found more. i.e.38% & in viharaja nidana krodh is found more i.e 50%

- c. Kaphaja: Aharaja nidanas are ati guru 4%, ati madhur14%, Atisnigdha 16%, viruddha bhajan 50%, asatmya bhajan 20%. Viharaja nidanas are ati nidra 9%, dibaswapna 18%,visamasan 18%it was seen in the study that aharaja nidana were related to viharaja nidana, which in turn related to manashik nidana, hence we can say that all the aharaja, viharaja manasik nidana were interrelated to each other.

CONCLUSION:

There is definite role of dosha,dushya, dhatu,mala, srota, avarana in the manifestation of the disease Hypertension.The sedentary life style & the food habits are the main cause of Hypertension in today's life. Excessive salt intake, alcohol,smoking are the triggering factors in the pathogenesis of hypertension.The aharaja nidana,viharaja nidana as well as manasik nidanas which vitiate vata,pitta & kapha are equally responsible for the manifestation of disease hypertension.

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