



STUDY OF HRIDAYA SHARIR WITH SPECIAL REFERENCE TO HRIDVIKRUTI IN 'AMAVATA'

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ABSTRACT:

The concept of *Trimarma* is unique concept of *Ayurveda*. Out of 107 *Marmas*, *Shira*, *Hridaya*, *Basti* have special significance because any traumatic injury to them leads to instant death. *Hridaya* is origin of *Rasavaha*, *Pranavaha Srotasa* as well as it is site of *Atma*, *Chetana*, *Mana*, *Oja*, *Sadhaka Pitta*, *Avalambaka Kapha*, *Prana* and *Vyana Vayu*. The mortality and morbidity due to Heart diseases is increasing day by day. 'Amavata' is a common disease in India. It is said that *Amavata* 'leaks the joints and bites the whole heart.' Radiological and 2 D Echo finding suggest that *Amavata* produces structural changes in heart. The change is in size of heart i.e. increased size of Left Atrium, Cardiomegaly, widening of carinal angle. The valvular changes are seen in mitral valve.

Key Words: Hridaya, Amavata, Marma, Hridvikruti.

INTRODUCTION:

Charaka, *Sushruta*, *Vagbhata* all three *Acharyas* have described 107 *Marmas*¹. Out of which *Shira*, *Hridaya*, *Basti* have special significance because any traumatic injury to them leads to instant death. Hence they are called '*Sadyah Pranahara Marma*'. *Hridaya* is origin of *Rasavaha*, *Pranavaha Srotasa*³ as well as it is site of *Atma*, *Chetana*, *Mana*, *Oja*, *Sadhaka Pitta*, *Avalambaka Kapha*, *Prana* and *Vyana Vayu*⁴. The mortality and morbidity due to Heart diseases is increasing day by day. 'Amavata'⁵ is a common disease in India. It is a crippling disease as it needs repeated hospitalization, puts economic burden on family members and leads to poor quality of life. It is said that *Amavata* 'leaks the joints and bites the whole heart'¹². This study is mainly planned to study changes in heart due to *Amavata*.⁶

AIMS AND OBJECTIVES:

1) To study *Hritvikruti* (Anatomical changes) in *Hridaya Sharira* due to *Amavata*.

MATERIALS & METHODS:

1) For review of Literature of *Ayurvedic* concepts ancient *samhita* like *Charaka Samhita*, *Sushrut Samhita*, *Ashtang*

Sangrah, *Ashtang Hridaya*, *Sharangdhar Samita* and for modern concept Grey's Anatomy, Human Anatomy, Human Physiology books were referred.

2) 60 Patients diagnosed with *Amavata* fulfilling inclusion criteria were selected for study. Further these patients were divided into 2 groups named Trial group and Control group.

METHODOLOGY:

1) After giving total idea of project consent and history of patient was taken.

2) Patients diagnosed with *Amavata* since 5 years having clinical manifestation *Ayasen Shwasa* (Dyspnoea), *Shotha* (Oedema on dependant part), *Klama* (Fatigue) and *Hrid Drava* (Palpitation) were taken in Trial Group. Patients not having *Amavata* were taken in Control Group.

3) These clinical manifestation were studied by *Darshana*, *Sparshana*, *Prashna* Pariksha in CRF.

4) Present manifestation was recorded as Yes and absent as No. After studying these manifestation observations were made.

5) These patients were undergoes radiological and 2 D Echo evaluation to study Anatomical changes.

OBSERVATIONS & RESULT:

Table 1. Sexwise Upadrava Lakshana of Amavata in both groups.

Sex	Trial Group				Control Group			
	<i>Ayasen Shwasa</i>	<i>shotha</i>	<i>Klama</i>	<i>Hrid drava</i>	<i>Ayasen Shwasa</i>	<i>shotha</i>	<i>klama</i>	<i>Hrid drava</i>
Male	15	15	12	15	2	6	8	3
Female	10	11	12	11	4	3	4	2
total	25	26	24	26	6	9	12	5

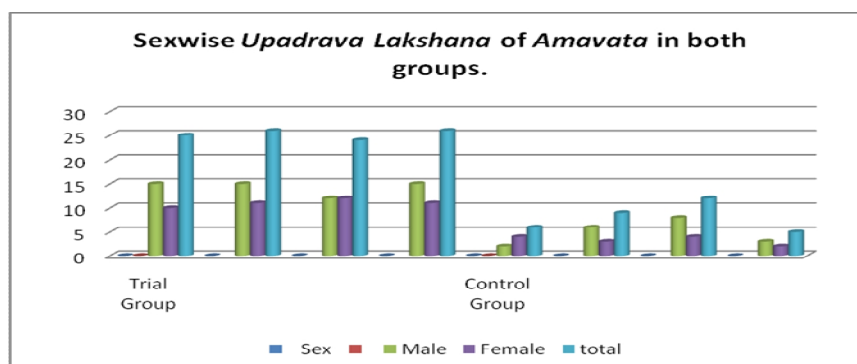


Table 2. Sexwise Radiological findings in both groups.

Sex Findings	Trial Group			Control Group		
	Atrial Enlargement	cardiomegaly	Widening of Carnial Angle	Atrial Enlargement	cardiomegaly	Widening of Carnial Angle
Male	11	16	15	0	0	0
Female	12	10	9	0	0	0
Total	23	26	24	0	0	0

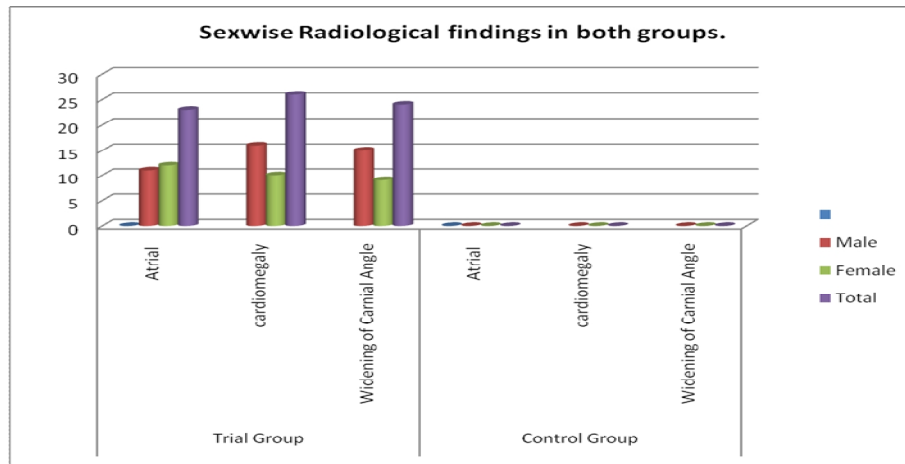
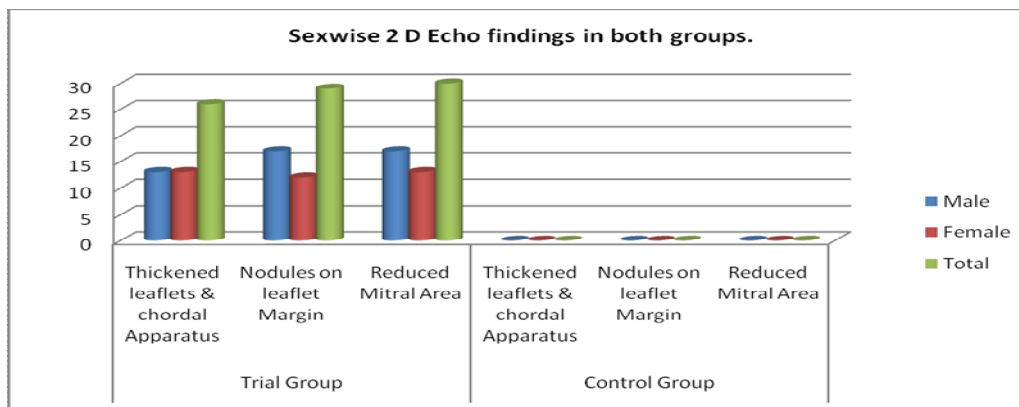


Table 3. Sexwise 2 D Echo findings in both groups

Sex Findings	Trial Group			Control Group		
	Thickened leaflets & chordal Apparatus	Nodules on leaflet Margin	Reduced Mitral Area	Thickened leaflets & chordal Apparatus	Nodules on leaflet Margin	Reduced Mitral Area
Male	13	17	17	0	0	0
Female	13	12	13	0	0	0
Total	26	29	30	0	0	0



STATISTICS:

For statistical Analysis Z test was used. It was used to compare two proportion created by two random samples or two sub groups of one random sample. Null hypothesis two proportion created by two random samples or two sub groups of one random sample. Null hypothesis was rejected at *Lakshana* of was rejected at *Lakshana* of *Amavata*, Radiological findings, 2 D Echo findings. P value < 0.05 level of significance so null hypothesis was rejected.

CONCLUSION:

The *Amavata* is the condition which affects the heart. It is found that Males are more prone to this disease as compared to females. *Vishroopi Ama* produces structural changes in *Hridaya*. It mainly affects *Dwidalpatrikapatika mandal sandhi* i.e. Bicuspid valve reducing its orifice and thickening of leaflets, cups and chordae tendinae. *Hridvikruti* i.e. anatomical changes in *Hridaya sharira* are enlarged Left Atrium, Cardiomegaly, and widening of carnial angle. The 2 D Echo detects the changes in *Amavata* those are Thickened

leaflets & chordal Apparatus, Nodules on leaflet Margin, Reduced Mitral Area. *Hridya* and cardioprotective dravyas would be used right from beginning of treatment of *Amavata*. The management concept mentioned in Ayurveda for *Amvata* is effective if planed and used properly.

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