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Bhavaprakash nighantu - hridaya rogahara dravyas (Cardio-Protective Drugs)

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Abstract:

Cardiovascular disease is now a days the leading cause of death for men and women both in the developed and developing countries and is caused by disorders of the heart and blood vessels, and includes coronary heart disease (heart attacks), cerebrovascular disease raised (stroke). blood pressure (hypertension), peripheral artery disease, rheumatic heart disease, congenital heart disease and heart failure. The major causes of cardiovascular disease are tobacco use, physical inactivity, an unhealthy diet and harmful use of alcohol. Cardiovascular disease is the leading cause of deaths worldwide. Any disease which affects the cardio-vascular system or which involve the heart, the blood vessels or both is called as cardiovascular disease. The factors like gender, high blood pressure, age, hyperlipidemia, diabetes mellitus, tobacco smoking, processed meat consumption, sugar consumption, obesity, psychosocial factors, lack of physical activity, air pollution etc lead to diseases. Some cardiovascular

metabolic abnormalities are more prevalent among them, including high triglyceride concentration. increased total cholesterol and high-density lipoprotein ratio, 2 diabetes. type mellitus, and obesity. For men and women, cardiovascular risk is known to increase with smoking, age, hypertension, blood lipids and glucose levels, and obesity.

Keywords: Cardiovascular disease, obesity, *hyperlipidemia bhavprakasha nighantu*

INTRODUCTION;-

Cardiovascular disease is now a days the leading cause of death for men and women both in the developed and developing countries and is caused by disorders of the heart and blood vessels, and includes coronary heart disease (heart attacks), cerebrovascular disease (stroke), raised blood pressure (hypertension), peripheral artery disease, rheumatic heart disease, congenital heart disease and heart failure. The major causes of cardiovascular disease are tobacco use, physical inactivity, an unhealthy diet and

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harmful use of alcohol. Cardiovascular disease is the leading cause of deaths worldwide. Any disease which affects the cardiovascular system or which involve the heart, the blood vessels or both is called as cardiovascular disease. The factors like age, gender, high blood pressure, hyperlipidemia, diabetes mellitus, tobacco smoking, processed meat consumption, sugar consumption, obesity, psychosocial factors, lack of physical activity, air pollution etc lead to cardiovascular diseases.

Some metabolic abnormalities are more prevalent among them, including high triglyceride concentration, increased total cholesterol and high-density lipoprotein ratio, type 2 diabetes mellitus, and obesity. For men and women, cardiovascular risk is known to increase with age, smoking, hypertension, blood lipids and glucose levels, and obesity.

Many treatment modalities have been explained in Brihatrayi (Charaka, Sushruta, Vagbhata) and Laghutrayi (Bhavaprakash and Madhav Nidan). Bhavamishra mentions numerous drugs acting on cardiac disorders in his book Bhavaprakash Nighantu. The present study is designed to screen the drugs with hrudya, hrudamaya hara, hrudaya shodhana, hrudaya nashaka, hrudruja hara, hrudpida hara and hrudroga hara properties. Out of 426 drugs 80 were described for the treatment of cardiovascular diseases throughout the text which includes herbal, mineral and animal origin drugs.

The current therapies to prevent or cure cardiovascular diseases are not without adverse effects. Hence safer, effective and economical drugs should be used from natural sources. In classical texts we find explanation of *Hrudya Dashemaani* by *Acharya Charaka, Parushakadi gana* by *Acharya Sushruta* and *Vidaryadi gana* by *Acharya Vagbhata* respectively which are proof to the fact of prevalence and treatment of *Hrudroga* (cardiac disorders) even in that period.

MATERIALS AND METHODS:

Bhavaprakash Nighantu is considered mainly on cardioprotective drugs. Bhavaprakash Nighantu mentions total 80

drugs which act as cardioprotective. *Bhavamishra* has given various drugs to treat this disease. *Bhavamishra* directly mentions the *karma* or action of these drugs as *Hrudya* (cardioprotective). There are herbal drugs as well as animal and mineral origin drugs which act as cardioprotective.

Drugs from *Bhavaprakash Nighantu* were screened for the action *Hrudya*. Obtained data is presented as per *Hrudya* action with respect to herbal, mineral and animal origin drugs which belong to different *vargas* (chapter wise classification) with corresponding reference.

DISCUSSION:

Acharya Charaka classified Hrudroga into five types viz. vataja, pittaja, kaphaja, sannipataja and krimija respectively. The same classification is found in Ashtanga hrudaya. Acharya vagbhata mentioned lakshanas of each type of Hrudroga. In vatika hrudroga patient, there will be acute pain in the heart area, the pain is like that of cutting or stretching. In Paittika Hrudroga patient, there will be thirst, burning sensation, sweating, dryness of mouth and fainting. In Kaphaja Hrudroga patient, there will be feeling of seizure in the heart, heaviness in the body, excessive secretion of phlegm, loss of appetite, sweet taste in the mouth. In Sannipatika Hrudroga patient, there will be mixed symptoms described in Vatika, Paittika and Kaphaja types of Hrudroga. In Krimija Hrudroga patient, there will be acute pain and itching in the heart area as main symptoms. In this study drugs explained directly the cardioprotective by Bhavamishra is screened and documented and which can be more helpful for better treatment modalities and results.

Though cardiovascular system was not envisaged by Ayurveda in the way in which it is being described presently in modern medicine, it appears that the various references pertaining to cardiovascular activities indicate that ancient Ayurvedists had a similar concept. References to the actual act of

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circulation are available in the Samhitas. The fluid that circulates in the body is spoken as Rasa because it is always going that is ever circulating. The Rasa circulates round the body, like a rotating wheel. Sushruta states that the nutrient fluid circulates throughout the body with variable velocity, like the speed of light, sound and water. Bhela states that the nutrient fluid comes into circulation from the heart spreads all over the body through Siras. circulation described in Ayurvedic classics may be too sketchy as it does not describe portal circulation. circulation, etc. Alteration of the degree of circulation to the peripheral areas was described in Sushruta's description of flowing out freely not Siravyadha (venesection). Charaka mentions that if the places where pulsations of vessel generally seen, if suddenly become free from pulsations it indicates a very bad prognosis. Dhamani Pratichaya described under Kaphaja Nanatmaiavikara. is similar atherosclerosis. Hypertension, which is the most important condition contributes for cardiovascular or cerebrovascular disorders was not described in Ayurveda and can be interpreted with different conditions

like Raktavata, Raktagatavata, Siravata, Kaphavrita Vyana etc.

Ayurvedic treatise documented drugs employed in Hridroga (Heart disease). Charaka introduced ten drugs under Hridva Mahakashaya group that comprises mostly like ascorbic acid of citrus fruits in it. It is proven that certain phytoconstituents present in these herbs help to maintain a healthy state of blood vessels including coronary arteries. Heart categorized diseases are according to *Dosha* dominance and Krimi. Tt. appears to be very difficult to cardiovascular incorporate all the conditions described by modern medical

science into these varieties. A critical analysis of the herbal knowledge utilized in the management of *Hridroga* (Heart disease) like *Arjuna*(*Terminalia* arjuna (Roxb.) Wight and Pushkarmoola (Inula racemosa Hook. f.), Bala (Sida cordifolia Linn.), Nagabala (Sidahumilis Linn.), Sh unthi (Zingiberofficinale Roscoe.), Pippa li (Piperongum Linn.), Yashtimadhu (Gly ccerrhizaglabra Linn.), Haritaki (Termin aliachebula Retz.) and Dashmoola, etc., clearly indicates that they are possessing hypotensive. hypocholestremic, antiplatelet and thrombolytic activities which play a crucial role in management of cardiovascular and cerebrovascular disorders.

Bhavaprakash Nighantu is considered to be most frequently referred nighantu of present era, in Ayurveda. Drugs, noted in this nighantu, have been proved to be most efficious for various diseases like diabetes, obesity, skin problems. Hence in the present paper an attempts has been made to find out the contribution of Bhavaprakasha towards Hridayarogahara dravyas (drugs for cardiovascular diseases)..

Out of 426 drugs described by Bhavprakash, 80 were described as hridayarogahara dravyas (drugs cardiovascular diseases). Among these 70 are herbal, 8 animal and 2 drugs are of mineral origin. Out of the 70 herbal drugs 29 have been reported for their cardio protective activity. Out of 80 drugs 15 (18.51%) belong to Haritakyadi varga, 7 (8.64%) of drugs from Karpuradi varga, 21 (25.92%) belong to Guduchyadi varga, Pushpa varga has 6 (7.4%), Vatadi varga 2 (2.46%) are stated, Amradiphala varga 11 (13.58%), Dhatvadi varga 1 (1.23%), Shaka varga 5 (6.17%), Mamsa varga 6 (7.40%), Vari varga 2 (2.46%), Dugdha varga 1 (1.23%), Dadhi varga 1 (1.23%), Taila varga 1 (1.23%) and Sandhana varga 2 (2.46%).

Table 1: Cardioprotective drugs of *Haritakyadivarga* with respective references:

Sr.N	Drug Name	Family		
0.	Ç	·	Action of drug	Corresponding reference #
	Haritaki (Terminalia chebula	Combretaceae		
1.	Retz, Terminalia cetrina Roxb)		Hrudamaya hara	B.P.N.1/21
2.	Shunthi (Zingiber officinale Roscoe)	Zingiberaceae	Hrudamaya hara	B.P.N.1/46
	Pippali	8		
3.	(Piper longum Linn.,Chavica roxburghii)	Piperaceae	Hrudya	B.P.N.1/58
	Ajamoda (Apium graveolens			
4.	Linn.)	Umbelliferae	Hrudya	B.P.N.1/78
	Shatapushpa (Anethum sowa			
5.	Kurz.)	Umbelliferae	Hrudya	B.P.N.1/92
	Kulinjana (Alpinia galanga		Hrudaya shodhana	
6.	Willd.)	Zingiberaceae		B.P.N.1/105
	Aragwadha (Cassia fistula		Hrudrog nashaka	
7.	Linn.)	Leguminosae		B.P.N.1/92
8.	Katuki (<i>Picrorhiza kurroa</i> Royle ex Benth.)	Scrophulariaceae	Hrudya	B.P.N.1/152
	Pashanbheda (Saxifraga ligulata			
9.	Wall)	Saxifragaceae	Hrudruja hara	B.P.N.1/185
	Bakuchi (Psoralea corylifolia			
10.	Linn.)	Leguminosae	Hrudya	B.P.N.1/208
11.	Chakramarda (<i>Cassia tora</i> Linn.)	Leguminosae	Hrudya	B.P.N.1/212
	Lashuna	8	Hrudroga hara	
12.	(Allium sativum	Liliaceae		B.P.N.1/223
	Linn.)			
13.	Bida lavana	-	Hrudroga	B.P.N.1/247
14.	Yavakshara (Potasii carbonas)		Hrudamaya hara	
	,	-		B.P.N.1/254
15.	Chukram	-	Hrudpida hara	B.P.N.1/261

Table 2: Cardioprotective drugs of *Guduchyadi varga* with respective references:

Sr.No.	Drug Name	Family	Action of drug	Corresponding reference #
1.	Guduchi (<i>Tinosporacordifolia</i> Willd.)	Menispermiaceae	Hrudroga hara	B.P.N.3/10
2.	Patala pushpa (Stereospermum suaveolens DC.) Shyonak balaphala (Oroxylum	Bignoniaceae	Hrudya	B.P.N.3/22
3.	indicum Vent.)	Bignoniaceae	Hrudya	B.P.N.3/28
4.	Brihati (<i>Solanum indicum</i> Linn.)	Solanaceae	Hrudya	B.P.N.3/36
5.	Kantakari (Solanum xanthocarpum Schrad & Wendl)	Solanaceae	Hrudamaya hara	B.P.N.3/41

	Gokshur		Hrudroga hara	
6.	(Tribulus terrestris	Zygophyllaceae		B.P.N.3/46
	Linn.)			
	Atarusha (Adhatoda vasica Nees)			
7.		Acanthaceae	Hrudya	B.P.N.3/90
	Shobhanjana (Moringa			
8.	pterygosperma Gaertn)	Moringaceae	Hrudya	B.P.N.3/106
9.	Nala	Gramineae	Hrudpida hara	B.P.N.3/157
	(Phragmites kirka)		_	
	Katruna (Cymbopogon		Hrudroga hara	
10.	schoenanthus Linn)	Gramineae		B.P.N.3/168
	Shatavari (Asparagus racemosus			
11.	Willd.)	Liliaceae	Hrudya	B.P.N.3/187
	Patha		Hrudruja hara	
12.	(Cissampelos pareira Linn)	Menispermaceae		B.P.N.3/193
	Apamarga (Achyranthes aspera		Hrudruja hara	
13.	Linn.)	Amaranthaceae		B.P.N.3/220
14.	Trayamana (Delphinium zalil		Hrudroga hara	
	Aitch & Hemsl)	Rananculaceae		B.P.N.3/243
	Moorva (Marsdenia tenacissima W			
15.	& A)	Asclepiadaceae	Hrudroga hara	B.P.N.3/245
	Kakamachi (Solanum nigrum		Hrudroga hara	
16.	Linn)	Solanaceae		B.P.N.3/247
	Akashavalli (Cuscuta reflexa			
17.	Roxb)	Convolvulaceae	Hrudya	B.P.N.3/259
	Hingupatri (Gardenia gummifera		Hrudroga hara	
18.	Linn.)	Rubiaceae		B.P.N.3/264
19.	Vamshapatri	-	Hrudroga hara	B.P.N.3/265
	Jalapippali (Lippia nodiflora			
20.	Mich)	Verbenaceae	Hrudya	B.P.N.3/295
	Gojihva (Elephantopus scaber			
21.	Linn)	Compositae	Hrudya	B.P.N.3/298

Table 3: Cardionrotective drugs of *Karnuradi yarga* with respective references

	Drug Name	Family	Action of drug	Corresponding
•	0	v		reference #
	Jatiphala (Myristica		Hrudruja hara	
1.	fragrans Houtt)	Myristicaceae	-	B.P.N.2/55
	Twakpatra (Cinnamomum	-	Hrudroga hara	
2.	cassia Blume)	Lauraceae	_	B.P.N.2/65
	Baalam (Sugandhabala)			
3.	(Pavonia odorata Willd)	Malvaceae	Hrudya	B.P.N.2/83
	Shaileyam (Parmelia			
4.	perlata Ach.)	Parmeliaceae	Hrudya	B.P.N.2/91
	Choraka (Angelica glauca			
5.	Edgw)	Umbelliferae	Hrudya	B.P.N.2/113
	Kankola (Piper cubeba			

6.	Linn.f)	Piperaceae	Hrudya	B.P.N.2/116
7.	Elavaluka (Prunus cerasus linn)	Rosaceae	Hrudruja hara	B.P.N.2/121

Table 4: Cardioprotective drugs of *Pushpa varga* with respective references:

Sr.No.	Drug Name	Family	Action of drug	Corresponding
				reference #
	Shatapatri (Rosa centifolia			
1.	Linn)	Rosaceae	Hrudya	B.P.N.4/23
	Yuthika (Jasminum			
2.	auriculatum Vahl)	Oleaceae	Hrudya	B.P.N.4/30
3.	Tulsi			
	(Ocimum sanctum	Labiateae	Hrudya	B.P.N.4/63
	Linn)			
4.	Marubaka (Origanum			
	majorana Linn)	Labiateae	Hrudya	B.P.N.4/65
5.	Damanaka (Artemisia			
	vulgaris Linn)	Compositae	Hrudya	B.P.N.4/68
6.	Barbari (Ocimum			
	basilicum Linn)	Labiateae	Hrudya	B.P.N.4/71

Table 5: Cardioprotective drugs of *Vatadi varga* with respective references:

Sr.No.	Drug Name	Family	Action of	Corresponding
			drug	reference #
	Kukubha (Arjuna)			
1.	(Terminalia	Combretaceae	Hrudya	B.P.N.5/27
	arjuna W&A)			
2.	Jingini (Odina	Anacardiaceae	Hrudroga hara	B.P.N.5/43
	woodierRoxb)			

Table 6: Cardioprotective drugs of *Amradiphala varga* with respective references:

Sr.No.	Drug Name	Family	Action of	Corresponding
			Drug	reference #
	Pakwa amraphala & amra			
1.	beeja (Mangifera	Anacardiaceae	Hrudya & hrudaya	B.P.N.6/5,17
	indica Linn)		daha hara	
2.	Narikela jala (Cocos	Palmae	Hrudya	B.P.N.6/41
	nucifera Linn)			
3	Priyala majja (Buchanania	Anacardiaceae	Hrudya	B.P.N.6/85
	latifolia Roxb)			
4	Parushaka (<i>Grewia</i>	Tiliaceae	Hrudya	B.P.N.6/99
	asiatica Linn)			
5	Dadima phala (Punica			
	granatum	Punicaceae	Hrudroga	B.P.N.6/102
	Linn)			
6	Kharjura (Phoenix	Palmae	Hrudya	B.P.N.6/118
	sylvestris Roxb)			

7	Beejapura (Citrus media	Rutaceae	Hrudaya shodhana	B.P.N.6/131
	Linn)			
8	Jambira (Citrus limon	Rutaceae	Hrudpida hara	B.P.N.6/134
	Linn)			
9	Amlavetasa (Garcinia			
	pedunculata	Guttiferae	Hrudroga hara	B.P.N.6/145
	Roxb)			
10	Vrukshamla (Garcinia	Guttiferae	Hrudroga hara	B.P.N.6/149
	indica Chois)			

Table 7: Cardioprotective drugs of *Dhatwadi varga* with respective references:

Sr.No	Drug Name	Action of drug	Corresponding reference #
1.	Samyak marita suvarna	Hrudya	B.P.N.7/10

Table 8: Cardionrotective drugs of Shaka varga with respective references:

Sr.No.	Drug Name	Family	Action of drug	Corresponding
				reference #
	Alabu (Lagenaria			
1.	vulgaris Ser.)	Cucurbitaceae	Hrudya	B.P.N.9/58
	Katutumbi (Lagenaria			
2.	vulgaris Ser.)	Cucurbitaceae	Hrudya	B.P.N.9/59
	Patola (Trichosanthes			
3.	dioica Roxb)	Cucurbitaceae	Hrudya	B.P.N.9/70
	Aaluki (Calocasia			
4.	antiquorum Schott.)	Araceae	Hrudkapha nashini	B.P.N.9/98
	Kemuka (Costus speciosus			
5.	Sm.)	Zingiberaceae	Hrudya	B.P.N.9/111

Table 9: Cardioprotective drugs of *Mamsa varga* with respective references:

Sr.No.	Drug Name	Action of drug	Corresponding reference
1.	Mamsa	Hrudya	B.P.N.10/1
2	Lava mamsa	Hrudamaya hara	B.P.N.10/57
3	Prasuta aja mamsa	Hrudya	B.P.N.10/77
4	Edaka mamsa	Hrudya	B.P.N.10/83
5	Shilindhra matsya mamsa	Hrudya	B.P.N.10/106
6	Shashkuli matsya mamsa	Hrudya	B.P.N.10/112

Table 10: Catrdioprotective drugs of *Vaari varga* with respective references:

	Sr.No.	Drug Name	Action of drug	Corresponding reference
Ī	1.	Paniya	Hrudya	B.P.N.12/2

2.	Bhaumabhedasya jangaladi jalatraya	Hrudya	B.P.N.12/30	
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Table 11: Cardioprotective drugs of *Dugdha varga* with respective references:

Sr.No.	Drug Name	-	Corresponding reference #
1.	Piyusha,kilata,ksheerashaka & takrapinda	Hrudya	B.P.N.13/33

Table 12: Cardioprotective drugs of *Dadhi varga* with respective references:

Sr.N	Io. Drug Name	Action of drug	Corresponding reference #
1.	Go Dadhi	Hrudya	B.P.N.14/10

Table 13: Cardioprotective drugs of *Taila varga* with respective references:

Sr.No.	Drug Name	Action of Drug	Corresponding reference #
1.	Eranda taila	Hrudroga Hara	B.P.N.19/24

Table 14: Cardioprotective drugs of Sandhana varga with respective references:

Sr.No.	Drug Name	Action of Drug	Corresponding reference #
1.	Tushambu	Hrudya	B.P.N.20/7
2.	Purana madira	Hrudya	B.P.N.20/31

- B.P.N. - Bhavaprakash Nighantu, by Chunekar KC, Reprint edition 2004, Chaukhambha bharati academy, Varanasi. First number is corresponding number of varga and second number is respective verse.

CONCLUSION:

The present review on cardio-protective drugs of *Bhavaprakash Nighantu* can be useful to know about the different drugs which can be used in the treatment of *Hrudroga*. Total 80 drugs are mentioned in *Bhavaprakash Nighantu* comprising herbal, mineral and animal origin drugs. All the drugs have been mentioned as *Hrudya*, but the mode of action has not been explained in detail. A detailed clinical study is required to understand the mode of action of these drugs and their efficacy.

For the prevention of heart diseases and cerebrovascular diseases, a herbal polypill can be developed by incorporating Ayurvedic herbs with

known and proven value like – Guggulu, Arjuna, Pushkarmoola, Lasun a, Amalaki and Jatamansi for managing risk factors of cardiovascular conditions. Adaptation of performing Suryanamaskara (Sun salutation) may have added value in the programme of prevention of cardiovascular diseases.

REFERENCES:-

- 1. Available from http://www.who.int/cardiovascular_di seases/en/ Date- 6/10/2014 |
- 2. Available from http://www.ncbi.nlm.nih.gov/pmc/arti cles/ PMC2945204/ Date- 4/10/2014
- 3. Agnivesha treatise refined and annoted by Charaka, redacted by Dhridhabala, | Ayurveda Deepika commentary by Chakrapanidatta, edited by YadavjiTrikamji | Acharya,Charakasamhita, Re-print 2005, Varanasi Chaukhambha | Surabharati Prakashana, Sutra

- sthana 4thchapter, shloka. No-10, Page -61.
- 4. Sushruta, Sanskrit text with Nibandhasangrahavyakhya by Dalhana and | NyayachandrikaPanjikavyakhya by Gayadasa, Sushruta Samhita, | Reprint 4th edition-1980, Varanasi; ChaukhambaSurabharathiPrakashan a, | Sutra sthana 38th chapter, Shloka.No-43-44, Page-167.|
- 5. Vagbhata, Sanskrit text with SarvangaSundarivyakhya, Arunadattavicharita and | Ayurveda Rasayanateeka by Hemadriannoted by Dr.Anna Moreshwar Kunte and | Krishna Ramachandra ShastriNavre edited by Pt.HarisadashivaShastri |

- Paradkar Bhishagacharya, AshtangaHridaya, Edition 2010, Varanasi | Chaukhamba Surabharathi Prakashana,Sutra sthana 15th Chapter, | Shloka. No-10, Page -234. |
- 6. Shukla Acharya Vidyadhar, Charaka samhita of Agnivesha, Vol. 1, Chaukhambha | Sanskrit pratishthan, Delhi, reprint edition 2010, Ashtodariya adhyaya, shloka.no. 3, | Page- 284 |
- 7. Gupta Kaviraj Atrideva, Ashtanga Hrudayam of Vagbhatta, Chaukhambha | prakashan, Varanasi, reprint edition 2011, Rajayakshmadi nidanadhyaya, shloka.no. 38, Page- 323.

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