MAHARAO SHEKHAJI
REGIONAL AYURVEDA RESEARCH INSTITUTE

BANI PARK, JHOTWARA ROAD, JAIPUR-302016 (RAJASTHAN)

ANNUAL PROGRESS REPORT
2021 - 2022



CENTRAL COUNCIL FOR RESEARCH IN AYURVEDIC SCIENCES

(Ministry of AYUSH, Government of India)

NEW DELHI

INDEX

S.No.	SUBJECT	PAGE No.
	GENERAL INFORMATION	
1.	Administrative Report	1-5
2.	Technical Report	6-20
	CLINICAL RESEARCH DIVISION	
3.	Clinical Research carried since inception up to 2021-22	21-42
4.	**Clinical Research 2021-22:**	
	A. Impact of Ayurveda Based Lifestyle Advocacy and Practices among apparently healthy individuals across selected cities in India- A Cluster Randomized Parallel group study	43-45
	B. A Prospective Open Labelled Observational Study To Document The Potential Safety Issues And Prescription Trends In Selected Rasausadhi's In Ccras -Opd's Across India.	46-47
	C. Second phaseValidation and reliability testing of diagnostic methods in Ayurveda (Prameha and Pandu)	48-49
	D. Randomized, Placebo control, Double blind clinical trial to evaluate the effect of Trikatu in Subclinical Hypothyroidism	50-52
	E. Clinical Evaluation of Vidanga Churna and Vyoshadi Guggulu in the Management of Medoroga (Obesity)	53-55
	F. Effectiveness of Ayurveda based diet and Lifestyle advocacy on health related Quality of life in schedule Caste population in India- a Community based, cluster randomized controlled study" (IMR project under AMHCP-SCSP-2021-22)	56-58
	G. "A Prospective Community Based Study for the evaluation of Punarnavadi Mandura in Anemia (Pandu) (IMR project under AMHCP-SCSP-2021-22)	59-61
	H. A prophylactic community based study to assess the impact of Ayu Raksha Kit in COVID-19 (IMR project under SCSP-2021-22)	62-65
	I. "A prospective community based study for the evaluation of RajapravartaniVati in the Management of Primary Dysmenorhoea" (IMR project under RCH-SCSP-2021-22)	66-68
	J. Effectiveness of Ayurveda based diet and Lifestyle advocacy on health related Quality of life in Women's of schedule Caste population in India- a Community based, cluster randomized controlled study" (IMR project under RCH-SCSP-2021-22):	69-71
	K. K. Impact of Ayuraksha Kit in Covid-19- Community Based Prophylactic Study In Tribal population (IMR project THCRP under Tribal Sub-Plan-2021-22)	72-73
	L. A prospective community based study for the evaluation of DhatriLoha in the Management of Anemia (Pandu) (IMR project THCRP under Tribal Sub-Plan-2021-22)	74-75
	M. "Effectiveness of Ayurveda based diet and Lifestyle advocacy on health related Quality of life in schedule Tribe population in India- a Community based, cluster randomized controlled study" (IMR project THCRP under Tribal Sub-Plan-2021-22)	76-77
	N. A prospective community based study for the evaluation of Yograj Guggulu, Ashwagandha Churna and Narayan Taila in Osteoarthritis Knee (Janugat Sandhivata)	78-79
	O. PHARMACO -VIGILANCE PROGRAMME	80
5.	Laboratory: Path./Chem./Bio-Chem., Hospital Status, Details of Medicines Purchased and Equipments	81-92
6.	Tribal Health Care Research Project (THCRP)	93-112
7.	Ayurveda Mobile Health Care Programme under Scheduled Castes Sub Plan (SCSP)	113-124
8.	Reproductive and Child Health Care (RCH) Programme	125-133
9.	Integration of AYUSH (Ayurveda) with National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS)	134-137
10.	Library	138
	HOSPITAL STATISTICS	
11.	Out-Patient Department	139-140
12.	**In- Patient Department**	141-142
	A.Disease-wise statement of patients admitted/ discharged during last five years excluding	143-148

	the reporting year 2021-22	
	B. Results of treatment for discharged patients during last five years excluding the reporting year 2021-22	149-153
	C. Percentage of yearly bed occupancy during different years since inception upto the reporting year 2021-22	154-155
	D. Statement of patients admitted/discharged during the reporting year 2021-22	156-157
	E. Results of treatment for the patients discharged during the reporting year 2021-22	
	F. Disease wise average duration of hospitalization (based on days of care to the patients discharged excluding cases of Death and LAMA during the reporting year 2021-22	
13.	Statement of patients Attended Out Patient Department (OPD) during the reporting year 2021-22	158-162
14.	Geriatric OPD and OPD for Flu-like illnesses during the reporting year 2021-22	163-164
15.	Karma wise Panchkarma during the reporting period 2021-2022	
16.	Guggulu Herbal farm, Mangliawas	165-172
17.	Summary (Hindi & English)	173-189
18.	Photo Gallery	190-214
19.	Promotions/Joining/Transfers/Retirements during the reporting period 2021-22	215

ANNUAL PROGRESS REPORT 2021-2022

1. Name and Address: **M.S. Regional Ayurveda Research Institute,**
Indira Colony, Banipark, Jhotwara Road, Jaipur- 302016 (Raj.)

2. Year of Establishment: 1972

I. ADMINISTRATIVE REPORT

1. Staff pattern:

S. No.	Name of the Sanctioned Post	No. of Posts Sanctioned	Name and Designation of the persons working against Post	No. of Posts Vacant	Sex M/F	Whether SC/ST/ OBC	Remarks
1.	Assistant Director (Ay.)	**01**	Dr. B.R. Meena, Assistant Director Incharge	-	M	ST	-
2.	R.O. (Ay.)	**06**	1. Dr. B. K. Sharma	-	M	Gen	Attached with N.I.A., Jaipur w.e.f. 09.08.2019
			2. Dr. V.B. Kumawat	-	M	OBC	-
			3. Dr. S. K. Vedi	-	M	SC	-
			4. Dr. D.S. Rotwar	-	M	Gen	Joined on dated 02.09.2021
			5. Dr. Swati Sharma	-	F	Gen	Relived to CCRAS HQ on dated 30.09.2021
			6. Dr. Monika Kumari	-	F	OBC	-
			7. Dr. Indu P.P.	-	F	OBC	Relived to NAPRI, Cheruturuthi on dated 21.08.2021
			8. Dr. Suhas A. Chaudhary	-	M	ST	-
			9. Dr. Kishor A. Gavali	-	M	SC	Joined on dated 28.09.2021
3.	R. O. (Botany)	**Nil ***	Sh. S.K. Gaur	-	M	OBC	-
4.	R.O. (Bio-Chemistry)	**01**	**Vacant**	**01**	-	-	-
5.	R.O. (Pathology)	**01**	**Vacant**	**01**	-	-	-
6.	A.R.O. (Bio-Chemistry)	**01**	**Vacant**	**01**	-	-	-
7.	R. A. (Bio-Chemistry)	**01**	**Vacant**	**01**	-	-	-
8.	R. A. (Curator)	**01**	**Vacant**	**01**	-	-	-
9.	Sister In-charge	**01**	Sh. S.K. Sharma	-	M	Gen	
10.	Staff Nurse	**04**	1. Sh. R.K. Mishra, Sister Incharge	**02**	M	Gen	-
			2. Sh. Vasid Ali, Staff Nurse		M	EWS	-
11.	Assistant	**01**	Sh. G.C. Behera	-	M	SC	Joined on dated 10.06.2021
12.	Pharmacist Grade-I	**03**	1. Sh. K. C. Verma	**01**	M	SC	-
			2. Sh. Navratan Singh		M	ST	
13.	Social Worker	**01**	Smt. Meena Meena	-	F	ST	-
14.	Lab. Technician	**03**	1. Sh. B.K.Meena	**02**	M	ST	-
			2. Sh. PrahladMahto		M	OBC	Relived on dated 31.03.2022 to join at RARI, Patna
15.	Stenographer Gr.-II	**01**	**Vacant**	**01**	-	-	-
16.	UDC	**03**	1. Sh. Sunil Saini (on deputation)	**02**	M	Gen.	Relived on dated 30.09.2021 to join his parental department
			2. Sh. Namonarayan Meena		M	ST	Fresh appointment joined on dated 31.12.2021

17.	LDC	**03**	**Vacant**	**03**	-	-	**-**
18.	Driver	**01**	**Vacant**	**01**	-	-	**-**
19.	Lab. Attendant	**04**	1. Sh. Anurag Pathak 2. Sh. Sumit Kumawat 3. Sh. Rakesh Teli 4. Sh. Sunil Kumar	-	M M M M	Gen. OBC OBC OBC	**-**
20.	M.T.S. (Cook)	**01**	**Vacant**	**01**	-	-	-
21.	M.T.S. (Dresser)	**01**	**Vacant**	**01**	-	-	-
22.	M.T.S. (Female Attendant)	**01**	Smt. Renu Sharma	-	F	Gen.	-
23.	M.T.S. (Attendant)	**02**	1. Sh. R. S. Meena 2. Sh. Vikram Gurjar	-	M M	ST OBC	-
24.	M.T.S. (Ward Aya)	**03**	Smt. Beena Devi	**02**	F	SC	**-**
25.	M.T.S. (Panchkarma Attendant)	**02**	**Vacant**	**02**	-	-	**-**
26.	M.T.S. (Chowkidar)	**01**	Sh. Sitaram Mehra	-	M	OBC	**-**
27.	M.T.S. (Kitchen Servant)	**02**	**Vacant**	**02**	-	-	**-**
28.	M.T.S. (Ward Boy)	**03**	1. Sh. Sohan Singh	**01**	M	OBC	**-**
			2. Sh. Brijesh Kumar Sharma		M	Gen.	Under court case
29.	M.T.S. (Safaiwala)	**03**	**Vacant**	**03**	-	-	**-**
30.	M.T.S. (Farm Attendant/ Labourer)	**04**	1.Sh.Chothu Ram Meena 2. Sh. R.K. Daiya 3. Sh. Shankar Lal Mali 4. Sh. Naveen Kumar	-	M M M M	ST OBC OBC SC	-
31.	M.T.S. (Peon)	**02**	Smt. Nisha Devi	**01**	F	OBC	**-**
TOTAL		**62**	**32**	**30**	**-**	**-**	**-**

Note :-

1. *One post of Research Officer (Botany) has been transferred temporarily from Ayurvedic Research Centre, Nagaland University, Lumami, Nagaland.

2. No. of staff according to group:

S. No.	Group	Number of staff						Whether roster maintained or not
		General	SC	ST	OBC	EWS	TOTAL	
1.	**I**	1	2	2	2	**-**	**7**	Yes
2.	**II**	2	1	-	-	1	**4**	
3.	**III**	3	3	6	9	**-**	**21**	
TOTAL		**6**	**6**	**8**	**11**	**1**	**32**	

3. Expenditure:

S. No.	Components	ST Category (In Rs.)	Others (In Rs.)	TOTAL (In Rs.)
1.	Male Component	6221319.00	20211766.00	26433085.00
2.	Female Component	1151472.00	3930318.00	5081790.00
	TOTAL	**7372791.00**	**24142084.00**	**31514875.00**

4. Resources generated from OPD/IPD/Lab./Panchkarma/Sale of CCRAS publication etc. during the reporting year 2021-22:

S. No.	Section	Amount (Rs.)	Remarks
1.	OPD	**106414.00**	Amount generated from OPD Patient Registration
2.	Laboratory	**143048.00**	Amount generated from Laboratory Investigations
3.	IPD	**67076.00**	Amount generated from IPD Admission and Sale of medicines
4.	Panchkarma	**90967.00**	Amount generated from Panchkarma Therapy
5.	Library	**221422.00**	Amount generated from sale of Council's Publications
TOTAL		**628927.00**	

5. Details of Budgetary Provision to the Institute during reporting period 2021-22:

Scheme	Budget Estimate (in Rs.)	Funds received (in Rs.)	Actual expenditure (in Rs.)
(i) GIA	10322000.00	10322000.00	10229279.00
(ii) Research Activity	4440000.00	4440000.00	4396586.72
(iii) Salary	31975000.00	32034255.00	32034255.00
TOTAL	**46737000.00**	**46796255.00**	**46660120.72**
Others Allotted Programmes (in Rs.)			
(i) THCRP	5701000.00	5701000.00	5266405.00
(ii) SCSP	5420520.00	5420520.00	5264883.00
(iii) NPCDCS, Bhilwara	-	8686476.00	8686476.00

6. List of Scientific Advisory Committee and Institute Ethical Committee:

(a) Name of the Scientific Advisory Committee Members:

1. Dr. G. S. Lavekar, **Chairman,** Former Director General, CCRAS, New Delhi
2. Prof. Dr. Shriram S. Savrikar, **Member,** Former Vice Chancellor GAU, Jamnagar
3. Prof. Manjari Dvivedi, **Member**, Former Professor, Striroga & Prasuti Tantra, BHU, Varanasi, Kalyanika Himalaya Devastahanam, Uttarakhand
4. Dr. Sanjeev Sharma, **Member**, Director, National Institute of Ayurveda, Jaipur
5. Prof. Anup Thakar, **Member**, Director, Institute of Post Graduate Teaching & Research in Ayurveda, Gujarat Ayurved University, Jamnagar, Gujarat
6. Prof. Dr. Tanuja Manoj Nesari, **Member**, Director, All India Institute of Ayurveda (AIIA) New Delhi
7. Dr. Prasanna Rao, **Member**, Principal, SDM College of Ayurveda & Hospital, Karnataka
8. Dr. M. M. Padhi, **Member**, Former Deputy Director General, CCRAS, Bhubaneswar
9. Prof. Dr. P. K. Prajapati,**Member**, Dean & HoD Dept. of Rasashastra &Bhaishajya Kalpana, All India Institute of Ayurveda, New Delhi
10. Dr. V. K. Kapoor, **Member**
11. Dr. V. Ravichandiran, **Member,** Director, National Institute of Pharmaceutical Education and Research, Kolkata
12. Ms. Vandana Mody, **Member,** Dept. of Phyto-chemistry, Vice President CADILA, Ahmedabad
13. Dr. Kishor Patwardhan, **Member,** Professor, Department of Kriya Sharir, Faculty of Ayurveda, Institute of Medical Sciences, Varanasi
14. Director General, CCRAS, **Member Secretary**

(b) Name of the Institutional Ethical Committee Members:

1. Prof. Banwari Lal Gaur, **Chairman**, Former Vice Chancellor, Rajasthan Ayurved University, Jodhpur
2. Prof. S.P. Agnihotri, **Member,** Professor, Institute of Respiratory Diseases, S.M.S Medical College, Jaipur
3. Dr. Ram Kishore Joshi, **Member,** Prof.& Head, PG Dept. of Kayachikitsa, National Institute of Ayurveda, Jaipur
4. Dr. Lokendra Sharma**, Member,** Professor, Dept. of Pharmacology, S.M.S. Medical College, Jaipur

5. Dr. Yogesh Kumar Gupta**, Member,** Associate Professor, Dept. of Pathology, S.M.S Medical College, Jaipur
6. Sh. Pawan Kumar Vashistha**, Member,** Legal Expert, Assistant Public Prosecutor, 230/132, Pratap Nagar, Sanganer, Jaipur
7. Sh. Jagdish Prasad Sharma, **Member,** Social Worker, Murlipura, Jaipur
8. Sh. ParmanandPawar, **Member,** Nehru Nagar, Panipech, Jaipur
9. Dr. B.R. Meena, **Member Secretary**, Assistant Director, Incharge (Institute), MSRARI, Jaipur

II. Technical Report

1. Programmes allotted/completed during the reporting period 2021-22:

S. No.	Name of the Programme	New Programme	
		Annual Target	Target Achieved
1.	Impact of Ayurveda Based Lifestyle Advocacy and Practices among apparently healthy individuals across selected cities in India- A Randomized Parallel Group Study	Feasibility study has been done in November, 2019. 1st Installment of total allotted budget to Institute has been received on 04.11.2019. Ethical Clearance has been obtained on 13.03.2020. CTRI has been done. Project could not be initiated during the year 2021-22, because of non receipt of the consumables to be used in study.	
2.	A Prospective Open Labelled Observational Study to Document the Potential Safety Issues and Prescription Trends in Selected Rasausadhi's in CCRAS -OPD's Across India	The project has been allotted and under IMR annual action plan 2019-20. Target was of 110 subjects. 116 cases were screened, 108 cases have been enrolled, 92 cases have completed and 16 were dropout. The study has been completed in march 2021.	
3.	Clinical Evaluation of Vidanga Churna and Vyoshadi Guggulu in the Management of Medoroga (Obesity)	10 cases were screened, out of which 06 cases were enrolled, 01 case were completed and 01 cases were dropout. 04 cases were continued.	
4.	Randomized, Placebo Controlled, Double-Blind Clinical Trial to Evaluate the Effect of Trikatu in Sub-Clinical Hypothyroidism	The project has been initiated in the month of March 2022. Target 90 cases in two groups (each group 45 cases). During the reporting period, 14 patients were screened for Hypothyroidism. No subject was enrolled in this study.	
5.	Validation and reliability testing of diagnostic methods in Ayurveda (Prameha, Pandu)	The project has been allotted/extended by the Council to the NIA, Jaipur under IMR as per research policy of CCRAS. Target: 30 cases of each disease Pandu: completed Prameha:Preparatory work completed. Yet to be initiated.	
6.	Documentation of efficacy of select Ayush Interventions Ayush-64 and Kabasura Kudineer in asymptomatic & mild to moderate Covid-19 patients in home isolation through a mobile app: A prospective multicenter Community based study)	Total 2,221 subjects were enrolled; among them 09 were dropped-out and 2,212 were completed till 21.08.2022.	
7.	Distribution campaign of Prophylactic Ayush medicines and Guidelines on diet and lifestyle with special focus on geriatric population under Azadi ka Amrit Mahotsav-India@	Total 10,000 individuals was benefited through such AKAM activities and received Prophylactic Ayush medicines from 30.08.2021 to 05.09.2021. ❖ For target of One Lakh beneficiaries; from 08.10.2022 to 31.03.2022, following activities were carried out: ➢ Total 66,429 individuals were benefited through such AKAM activities. Among them 49,043 individuals have received Samshamani Vati; 9,147 individuals have received advocacy/guideline/IEC material and 8,239	

		have received Ashwagandha Ghan Vati. ➢ 500 Ayuraksha Kit distributed to general population. ➢ Ayush-64 was given to 534 subjects with covid like symptoms as well as asymptomatic, mild and moderate symptoms having covid-19 positive. Total 05 webinars were conducted	
8.	AYUSH-Hospital Management Information System (A-HMIS)	A-HMIS Project has been initiated in the Institute's Hospital from the April, 2019. During the reporting period, 2021-22 total 18,602 patients of various diseases consulted in the A-HMIS OPD. The system is functioning sucecssfully in the Hospital.	
9.	Tribal Health Care Research Programme (THCRP) Following clinical projects under THCRP:	5910 population and 8 folk claims	Achieved
	1. A prospective community based study for the evaluation of Dhatri lauha in Anemia (Pandu)	72 cases were screened and 35 were enrolled and completed the study.	Achieved
	2. A prospective community based study for the evaluation of Yograj Guggulu, Ashwagandha Churna and Narayan Taila in Osteoarthritis Knee (Janugat Sandhivata):	91 cases were screened and 35 were enrolled and completed the study.	Achieved
	3. Effectiveness of Ayurveda based diet and lifestyle advocacy on health related quality of life in schedule tribe population in india-a Community based, cluster randomized controlled study	125 cases were screened and 70 (35 in each group) were enrolled and completed the study	Achieved
	4. **A Prophylactic Community Based Study to assess the impact of Ayu Raksha Kit in Covid-19:-** This project started from 16-02-2022 and completed on 28-03-2022. under this programme.	Total target of 2640 subjects (2400 Group-I & 240 Group-II) covered under this programme. Total subjects 2640 enrolled / successfully completed	Achieved
10.	**Ayurveda Mobile Health Care Programme under Scheduled Castes Sub Plan (SCSP)- 2020-21**	5905 population covered	Achieved
	1. A Prospective Community Based Study for the evaluation of Punarnavadi Mandura in Anemia (Pandu).	50 patients of anemia were enrolled; 44 patients were completed in study. 01 patient was drop out. Presently 05 patients are continued for follow up visit of 112th days.	Achieved

	2. Effectiveness of Ayurveda based diet and lifestyle advocacy on health related quality of life in schedule caste population in India-a Community based, cluster randomized controlled study: 3. A Prophylactic Community Based Study to Assess the impact of Ayu Raksha Kit in Covid-19	70 subject (Gr-I-35& G-II-35) were enrolled and completed the study. Target 693 population was covered in two group (Gr-I-630-Intervention & Gr-II-63-Control)	Achieved Achieved
11.	Reproductive and Child Health Care Programme (RCH)under Scheduled Caste Sub Plan (SCSP)- 2020-21 Following are the clinical projects under RCH 1. A Prospective Community Based Study for the evaluation of Rajpravartani Vati in the management of primary Dysmenorhoea 2. Effectiveness of Ayurveda based diet and lifestyle advocacy on health related quality of life in schedule caste population in India-a Community based, cluster randomized controlled study	5890 SC population surveyed. 4088 Patients treated. 4765 Investigations done. Total patients screened 54 and enrolled 50 Target 70 (Gr-I-35& G-II-35) covered under this programme. Total patients screened 78 and enrolled 70	Achieved
12.	Integration of AYUSH (Ayurveda) with National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) at Bhilwara (Rajasthan)	Total 7,969 patients were screened among them 491 patients were enrolled in diseases mentioned in program. Total 142 Diabetic patients, 162 Hypertensive patients and 187 Dyslipidemia patients were enrolled while no patients were completed treatment course of six months. As an activity of AYUSH-NPCDCS as well as to prevent the spread of NCDs; total 4,129 persons registered for Daily Morning Yoga classes.	
13.	National Pharmaco-vigilance program for ASU drugs	During the current reporting year 18602 subjects were studied to evaluate the suspected adverse drug reactions. None of the patients reported any ADR of the drugs being used.	

2. Publications/Research papers/Articles (Publication in reputed National/ International Journals only are to be furnished):

S. No.	Name of the Author/Co-Author	Title of paper	Name of Journal/ Bulletin	National/ International	Date of Publication
1.	Dr. Swati Sharma, R.O. (Ay.)	Critical analysis of amlakyadigana in eye disorders	IJRAP	International	Vol 12, issue 2, 2021
2.	Dr. V. B. Kumawat, R.O. (Ay.)	"A multicenter clinical trial on the anti-diabetic efficacy and safety profile of Saptavimshatika Guggulu and Haridra Churna in the management of type 2 diabetes mellitus	Journal of Research in Ayurvedic Sciences	International	December, 2021
3.	Dr. Kishor Gavali, R.O. (Ay.)	An observational study on health related demography of women and children belonging to scheduled caste population in selected areas of Thiruvananthapuram district of Kerala state, India.	Journal of Research in Ayurvedic Sciences	International	14.12.2021
4.	Dr. Dara Singh Rotwar, R.O. (Ay.)	Diospyros exsculpta Buch.-Ham. an underutilized plant: Comparative determination of mineral, antimicrobial, antioxidant, and protein-binding qualities of different parts of plant	JDRAS	International	14.12.2021

3. Seminar/Conference/Workshop/Meeting organized by the Institute:

S.No.	Title of Seminar/ Conference/Workshop	Institute/National/ International	Date
1.	Sensitization training regarding "Agni Assessment Tool" was organized in the institute, in which all the Research officers of the Institute participated.	Institute level	13.04.2021
2.	Inauguration and pledge taking ceremony in connection with the observance of "Anti-Terrorism Day at MSRARI, Jaipur complying with the preventive measures against the ongoing COVID-19 Pandemic was conducted in the institute.	Institute level	21.05.2021
3.	The Institute organised webinar on "Be with Yoga, Be at Home"	Institute level	29.05.2021
4.	On the occasion of "World No Tobacco Day, Dr. B.R. Meena, A.D., I/C, administered the pledge to all the staff and officials of the MSRARI, Jaipur against the no tobacco use.	Institute level	31.05.2021
5.	Webinar on "Role of Ayurveda in COVID-19 Pandemic" on the occasion of Amrit Mahotsav was conducted by MSRARI, Jaipur	Institute level	11.06.2021
6.	"International Yoga Day 2021" was celebrated with common yoga protocol practice under the guidance of Yoga Expert and whole staff participated in it.	Institute level	21.06.2021
7.	Institutional Ethics Committee Meeting for various projects under THCRP, SCSP, RCH was organized in the Institute through Video conferencing.	Institute level	22.06.2021
8.	Quarterly Hindi workshop on the topic "कार्यालय में राजभाषा नीति का कार्यान्वयन" organised at the Institute.	Institute level	26.06.2021
9.	The Institute celebrated"Azadi ka Amrut Mahotsava- India@75"by large scale distribution of Ayush prophylactic medicines(Samshamani vati and ashwagandha churna) and general guidelines 10,000population in the week from 30/08/2021 to 05/09/2021. The programme has been extended till August 2022 to benefit the target of one lakh population.	Institute level	30.08.2021 to 05.09.2021
10.	Launching program of "Azadi ka Amrut Mahotsava-India@75" was organized by the Institute in its campus.	Institute level	02.09.2021
11.	"Hindi Pakhawara" was celebrated by the Institute	Institute level	14.09.2021 to 28.09.2021
12.	The Institute celebrated Poshan Maah from 1stSeptember to 30thSeptember 2021 by daily awareness lectures regarding nutrition, nutrition camps, plantation activity, distribution of saplings, yoga training to patients in institute OPD and distribution of nutritive diets viz. as Poshak laddus to malnourished kids in peripheral areas.	Institute level	01.09.2021 to 30.09.2021

13.	Quarterly Hindi workshop organised on the topic entitled "**Unicode dvara Computer par Hindi me Karya**" at the Institute.	Institute level	14.09.2021
14.	Swachhata Pakhwada was observed by the Institute	Institute level	16.10.2021 to 31.10.2021.
15.	Vigilance Awareness week was observed by the Institute.	Institute level	27.10.2021 to 02.11.2021
16.	Sensitization workshop was organized in the Institute during observance of Vigilance Awareness Week on THE TOPIC "policies and procedures of preventive vigilance measures".	Institute level	02.11.2021
17.	Webinar on 'Ayurveda ke anusar Poshak ahara' was organized by the institute for general public awareness during celebration of 6th Ayurveda day 2021.	Institute level	30.10.2021
18.	6th Ayurveda Day with theme 'Ayurveda for Poshan' was celebrated in the institute, in which various activities such as awareness lectures in OPD and outreach programmes regarding nutrition, nutrition camps, distribution of saplings, essay writing competition and poster competition and distribution of nutritive biscuits were conducted by the institute.	Institute level	18.10.2021 to 31.12.2021
19.	The Institute has participated and placed a stall on behalf of CCRAS in "6th Ayurveda Day-2021" organized at National Institute of Ayurveda, Jaipur	Institute level	01.11.2021 to 02.11.2021
20.	Quarterly Hindi workshop organised on the topic "हिंदी में पत्राचार एवं संघ की राजभाषा नीति" at the Institute.	Institute level	31.12.2021
21.	Institutional Ethics Committee Meeting for Ayuraksha Kit in COVID-19" under SCSP 2021-22, Ayuraksha Kit in COVID-19 Community Based Prophylactic Study" Under THCRP and Lekhaniya Gana Kashaya and Arogyavardhini Gutika in the management of Medoroga (Obesity) was organized in the Institute through Video conferencing.	Institute level	24.01.2022
22.	This Institute has organised a Camp for free distribution of prophylaxis medicine for covid-19 under Azadi Ka Amrit Mahostav at Collectorate Office, Jaipur.	Institute level	23.02.2022
23.	This institute has organised a Webinar on "Science and Traditional Medicine in India"	Institute level	26.02.2022
24.	Quarterly Hindi workshop organized on the topic entitled **भारत सरकार की राजभाषा नीति के कानूनी प्रावधान** at the Institute.	Institute level	26.03.2022

4. Seminar/Conference/Workshop/Meeting participated by the Officers:

S.No.	Name of the participant	Name of Seminar/ Conference/Workshop/Meeting	National/ International	Date of participation
1.	All the Research Officers	Lecture and interactive session on the topic "Generation of Robust Scientific Evidence through Trans-disciplinary and Translational Research - Scope and Way forward" through Video Conference organised by CCRAS Hqrs. Office, New Delhi.	National	16.04.2021
2.	Dr. S.K. Vedi, R.O. (Ay.)	Re-orientation training regarding AYUSH COVID Helpline	National	01.05.2021
3.	All the Research Officers	"Ayush Clinical Case Repository portal and Ayush Sanjivani mobile App (3rd version)" through video conferencing by CCRAS Hqrs. Office, New Delhi.	National	27.05.2021
4.	Dr. B.R. Meena, Assistant Director Incharge	"Review meeting for distribution of AYUSH 64/Kabasura Kudineer" through VC organised by the CCRAS Hqrs. Office, New Delhi.	National	31.05.2021
5.	Dr. Swati Sharma, R.O. (Ay.)	"Tobacco addiction" on the occasion of "World no Tobacco Day" organised by PG department of Agad Tantra, National Institute of Ayurveda , Jaipur	National	31.05.2021
6.	All the Research Officers	Training for the "Use of AYUSH-Sanjivani App" through virtual conference organised by the CCRAS Hqrs. Office, New Delhi.	National	09.06.2021
7.	Dr. V.B. Kumawat, R.O. (Ay.), Dr. S. K. Vedi, R.O. (Ay.), Dr. Swati Sharma, R.O. (Ay.), Dr. Monika Kumari, R.O.(Ay.)	"Training session regarding execution of outreach programme (AMHCP, RCH, THCRP and Ayurveda health centre (NE)" through VC organised by the CCRAS Hqrs. Office, New Delhi.	National	14.06.2021
8.	All the Research Officers and Staff	Webinar on "Benefits of Yoga in COVID-19 pandemic" organised by Institute for celebration of IDY 2021.	Institute level	15.06.2021
9.	Dr. B.R. Meena, Assistant Director Incharge, Dr. S.K.	"NABH Training Programme" held from 16th		16.06.2021 to

	Vedi, R.O. (Ay.)	June 2021 to 18th June 2021 organised by the CCRAS Hqrs. Office, New Delhi.		18.06.2021
10.	Dr. Monika Kumari, R.O. (Ay.)	"National Webinar on Manuscriptology" organized by Department of Samhita & Siddhant, Mahatma Gandhi Ayurved College, Hospital and Research Centre (MGACHRC).	National	30.06.2021
11.	Dr. V. B. Kumawat, R.O.(Ay.), Dr. Dara Singh Rotwar, R.O. (Ay.), Dr. Monika Kumari, R.O.(Ay.) and Dr. Sugriv Kumar Gaur, R.O. (Botany)	Online Training Programme on **"**Medicinal Plant Research Training-I**"** coordinated by Central Ayurveda Research Institute (CCRAS),Ministry of AYUSH, Govt. of India, Kolkata	National	01.07.2021
12.	Dr. B. R. Meena, Assistant Director, Incharge of the Institute and all Research Officers of the Institutes	Meeting ON "Decentralization of technical work through formation of focused group" organised by the CCRAS Hqrs., New Delhi. through Video conferencing	National	13.07.2021
13.	All the Research Officers	Virtual meeting to discuss the various logistic issues faced by the nodal officers in the study entitled "Documentation of efficacy of select Ayush drugs (AYUSH-64 and Kabasura Kudineer) in COVID-19 patients in home isolation"	National	14.07.2021
14.	Dr. S. K.Vedi, R.O.(Ay.), Dr V. B. Kumawat, R.O.(Ay.), Dr. Swati Sharma, R.O.(Ay.), Dr. Monika Kumari, R.O.(Ay.)	Review meeting of "Outreach projects outreach activities (AMHCP-SCSP, THCRP, RCH, NE)" through VC.	National	14.07.2021
15.	Dr. V. B. Kumawat, R.O.(Ay.), Dr. Monika Kumari, R.O.(Ay.)	Review meeting on "THCRP" organized by RARI Gwalior.	National	06.08.2021
16.	Dr. Monika Kumari, R.O.(Ay.)	Webinar on the occasion of Charak Jayanti entitled "Charaka Samhita – Principles To Practice" organized by ITRA Jamnagar	National	13.08.2021
17.	Dr. S. K. Vedi, R.O.(Ay.), and Dr. Swati Sharma, R.O. (Ay.)	Virtual meeting for "Swasthya Assessment Scale in QOL project under SCSP and RCH" organized by CCRAS Hqrs., New Delhi	National	04.08.2021
18.	Dr. B.R. Meena, Assistant	Delivered lecture on	National	13.08.2021

	Director Incharge	"Ayurveda for COVID-19" under celebration of Ayursamvad to CAT Office, Jaipur through video conferencing.		
19.	Dr. B.R. Meena, Assistant Director Incharge	Participated in the meeting on"GIA Capital", organized by the CCRAS Hqrs. Office, New Delhi.	National	13.08.2021
20.	Dr. Suhas A. Chaudhary, R.O. (Ay.)	Virtual Meeting for discussion of e-Office implementation organized by CCRAS Headquarter, New Delhi.	National	13.08.2021
21.	Dr. V.B. Kumawat, R.O. (Ay.) and Dr. Monika Kumar, R.O.(Ay.)	Participated in "THCRP status review meeting" organized by RARI Gwalior.	National	06.08.2021, 31.08.2021, 24.09.2021
22.	Dr. S.K. Vedi R.O. (Ay.) and Dr. Swati Sharma R.O. (Ay.)	Participated in AMHCP& RCH status review meeting organized by CARI Bhuvneshwar.	National	26.08.2021
23.	All the Research Officers	Virtual review meeting on "distribution campaign of Ayush Prophylactic medicine and Discussion on strategy for celebrating Poshan Maah" organized by CCRAS Hqrs., New Delhi.	National	06.09.2021
24.	All the Research Officers	National Webinar on "Importance of Poshan Vatika/Nutrigarden in Alleviation of Malnutrition" and Release of Ayush Videos and Janani Calendar organised by National Institute of Ayurveda deemed to be university through video conferencing.	National	07.09.2021
25.	Dr. S. K. Vedi R.O. (Ay.), Dr. V. B. Kumawat, R.O. (Ay.), Dr. Dara Singh Rotawar, R.O. (Ay.), Dr. Swati Sharma, R.O. (Ay.) , Dr. Monika Kumari, R.O. (Ay.) and Dr. Sugriv Kumar Gaur, R.O. (Botany)	Meeting on LHT through VC regarding method of documentation of LHT and Ethnomedical practices organized by Medicinal Plant Research Section, Central Council for Research in Ayurvedic Sciences, New Delhi.	National	16.09.2021
26.	Dr. Monika Kumari, R.O.(Ay.)	Meeting for discussion on various issues relating to Ayush Clinical Case Repository Portal (ACCR	National	21.09.2021

		Portal) through Video Conferencing organized by CCRAS, New Delhi.		
27.	Dr. Dara Singh Rotwar, R.O.(Ay.)	VC meeting of focused group for preliminary discussion GIT related research organized by CARI, Guwahati.	National	29.09.2021
28.	Dr. S.K.Vedi, R.O. (Ay.) and Dr. Monika Kumari, R.O. (Ay.)	Preliminary meeting of focused group for endocrine disorders related research.	National	30.09.2021
29.	Dr. Kishor Gavali, R.O.(Ay.) and Dr. Suhas A. Chaudhary, R.O.(Ay.)	VC meeting of focused group for preliminary discussion on paediatric related research organized by CARI,Mumbai.	National	30.09.2021
30.	Dr. Dara Singh Rotwar, R.O. (Ay.) and Dr. V. B. Kumawat, R.O. (Ay.)	1st meeting of Medicinal Plant Research Coordinators organised by CARI, Guwahati.	National	30.09.2021
31.	Dr. V.B. Kumawat R.O. (Ay.) and Dr. Monika Kumari, R.O.(Ay.)	Participated in THCRP review meeting organized by RARI, Gwaliar	National	22.10.2021
32.	Dr. B. R. Meena, Assistant Director, Incharge of the Institute and all Research Officers of the Institutes	Web lecture on PIDPI organised by the CCRAS Hqrs., New Delhi.	National	27.10.2021
33.	Dr. Monika Kumari, R.O.(Ay.)	VC meeting to review the status of the project entitled "Impact of Ayurveda based lifestyle advocacies among apparently healthy individuals across selected cities in India – A Randomized parallel group study".	National	01.11.2021
34.	Dr. Suhas Chaudhary, R.O. (Ay.) and Dr. S.K. Vedi, R.O.(Ay.)	VC meeting of NABH Accreditation		11.11.2021
35.	Dr. B. R. Meena, Assistant Director Incharge	Participated in the "अखिल भारतीय राजभाषा सम्मेलन, वाराणसी", organised by the Department of Official Language, Ministry of Home Affairs, Govt. of India.	National	13.11.2021 and 14.11.2021

36.	Dr. S.K. Vedi, R.O.(Ay.) and Dr. Kishor A. Gavali, R.O.(Ay.)	Participated in AMHCP and RCH review meeting through VC organized by RARI, Gwalior.	National	25.11.2021 and 28.12.2021
37.	Dr. V.B. Kumawat, R.O.(Ay.) and Dr. Monika Kumari, R.O.(Ay.)	Participated in THCRP review meeting organized by CCRAS Hqrs.	National	26.11.2021
38.	Dr. S.K. Vedi, R.O.(Ay.)	Participated in "Kshetriya Rajbhasha sammelan and award distribution ceremony at Kailash bhawan Auditorium , chandrashekhar Ajad krishi and prodyogiki university Kanpur"	National	27.11.2021
39.	Dr. B. R. Meena, Assistant Director Incharge and Dr. S.K. Vedi, R.O.(Ay.)	Participated in the "E-Nirikshan Meeting (Rajabhasha)" through VC, organised by the CCRAS Hqrs. Office, New Delhi.	National	07.12.2021
40.	Dr. Suhas Chaudhary, R.O.(Ay.) and Dr. Kishor Gavali, R.O. (Ay.)	Participated in meetings of focused group for Respiratory Disorders	National	07.10.2021, 18.11.2021 and 16.12.2021
41.	Dr. S.K. Vedi, R.O.(Ay.), Dr. Suhas Chaudhary, R.O.(Ay.) and Dr V.B. Kumawat R.O.(Ay.)	VC meeting of "Distribution campaign of Prophylactic Ayush medicines and Guidelines on diet and lifestyle with special focus on geriatric population under Azadi ka Amrit Mahotsav-India@75"	National	01.12.2021
42.	Dr V.B. Kumawat R.O.(Ay.), Dr. Monika Kumari, R.O.(Ay)	Participated in training on LHT organized by Medicinal Plant Research Section, Central Council for Research in Ayurvedic Sciences, New Delhi.	National	09.12.2021
43.	Dr. V.B. Kumawat, R.O.(Ay.) and Dr. Monika Kumari, R.O.(Ay.)	Participated in THCRP review meeting organized by RARI, Gwaliar	National	17.12.2021
44.	Dr. B. R. Meena, Assistant Director,	VC Meeting for Post-doctoral fellowship	National	21.12.2021

	Incharge of the Institute and all Research Officers of the Institutes	organized by Medicinal Plant Research Section, Central Council for Research in Ayurvedic Sciences, New Delhi.		
45.	Dr. Monika Kumari, R.O. (Ay.) and Dr S. K. Vedi, R.O. (Ay.)	Participated in virtual meeting to discuss the status of preparatory activities of the project entitled "Impact of ayurveda based lifestyle advocacies among apparently healthy individuals across selected cities in India - A randomised parallel group study".	National	06.01.2022
46.	All the Research Officers	Participated in brief Sensitization Meeting through VC on topic "CPE presentation on a short term training course" for Training Programme on Capacity building of CCRAS Scientists on Research Integrity and Publication Ethics in collaboration with Centre for Publication Ethics and Centre for Complimentary and Integrative Health (CCIH), Department of Health Sciences, Savitribai Phule Pune University, Pune.	National	11.01.2022
47.	Dr. B. R. Meena, Assistant Director Incharge	VC Meeting on "upgradation of Clinical Laboratories", organised by the CCRAS Hqrs. Office, New Delhi.	National	12.01.2022
48.	Dr. Suhas A. Chaudhary, R.O. (Ay.) and Dr. Kishor Gavali R.O. (Ay.)	4th and 5th meeting of the focused group for "Respiratory disorders related research" through V.C. would be organised to discuss the formulation of concept note/ projects related to respiratory disorders.	National	13.01.2022 and 11.02.2022
49.	All the Research Officers	Virtual meeting to discuss about the study on "Ayu Raksha Kit through Outreach Activity" organized by CCRAS Hqrs.	National	13.01.2022

50.	Dr S.K. Vedi, R.O.(Ay.) and Dr. Suhas A. Chaudhary, R.O. (Ay.)	VC training of "Research Integrity & Publication Ethics" organised by CCRAS & in collaboration with Centre for Publication Ethics and Centre for Complimentary and Integrative Health (CCIH), Department of Health Sciences, Savitribai Phule Pune University, Pune.	National	18.01.2022 to 21.01.2022.
51.	Dr. S.K.Vedi, R.O. (Ay.)	Training programme of AYUSH Counseling helping (14443)	National	22.01.2022
52.	Dr. B. R. Meena, Assistant Director Incharge and All the Research Officer	Training for upgraded version of AHMIS	National	25.01.2022
53.	Dr. B. R. Meena, Assistant Director Incharge	VC Meeting regarding the "Distribution of medicines", organised by the CCRAS Hqrs. Office, New Delhi.	National	28.01.2022
54.	Dr. V.B. Kumawat R.O.(Ay.) and Dr. Monika Kumari, R.O.(Ay.)	THCRP and NE plan status review meeting	National	31.01.2022 and 07.03.2022
55.	Dr. S.K. Vedi, R.O. (Ay.), Dr. Monika Kumari, RO.(Ay.), Dr. Kishor Gavali, R.O. (Ay.) and Dr. Suhas A. Chaudhary, R.O. (Ay.)	Given presentation as resource person on topic of "Initiatives of Ministry of Ayush in Covid-19 & evidence-based approach for prophylaxis and management of COVID-19 through Ayurveda interventions"	National	07.02.2022, 12.02.2022 and 25.03.2022
56.	Dr S.K. Vedi, R.O. (Ay.) and Dr. Kishor Gavali, R.O. (Ay.)	"Review meeting of AMHCP & RCH – SCSP"	National	07.02.2022 and 09.03.2022
57.	All the Research Officers	Revised Agni Assessment tool and the web application a sensitization program through video conferencing organized by CCRAS Hqrs.	National	17.02.2022
58.	Dr. Dara Singh Rotwar, R.O. (Ay.) and Dr. Monika Kumari, RO.(Ay.),	4 days VC training programme for capacity building of its Scientists regarding importance of enhancing research integrity and publication ethics at centre for publication ethics, Savitribhai Phule, Pune University.	National	22.02.2022 to 25.02.2022
59.	Dr. Monika Kumari, R.O.(Ay.) and Dr S.K. Vedi, R.O. (Ay.)	VC Meeting for the project - "Impact of ayurveda based lifestyle advocacies among	National	24.02.2022

		apparently healthy individuals across selected cities in India - A randomised parallel group study.		
60.	Dr S.K. Vedi, R.O.(Ay.) and Dr. Kishor Gavali, R.O.(Ay.)	VC regarding discussion on initiation of the project titled, "A Randomized, Placebo-controlled, Double-blind clinical trial to evaluate the effect of Trikatu in Subclinical Hypothyroidism"	National	24.02.2022
61.	Dr. B. R. Meena, Assistant Director Incharge	VC Meeting chaired by DG, CCRAS with heads of all CCRAS Institutes/Centres, organised by the CCRAS Hqrs. Office, New Delhi.	National	04.03.2022
62.	Dr V. B. Kumawat, R.O. (Ay.) and Dr. Suhas A. Chaudhary, R.O. (Ay.)	Review meeting (through VC) of the activity "Distribution of Ayush prophylactic medicines and Guidelines on diet and lifestyle with special focus on geriatric population under Azadi Ka Amrit Mahotsav-India@75".	National	04.03.2022
63.	Dr V.B. Kumawat, R.O.(Ay.) and Dr. Kishor Gavali, R.O.(Ay.)	4 days VC training programme for capacity building of its Scientists regarding importance of enhancing research integrity and publication ethics at centre for publication ethics, Savitribhai Phule, Pune University.	National	08.03.2022 to 11.03.2022
64.	Dr. B. R. Meena, Assistant Director Incharge	"Weekly Expenditure status meeting" through VC, organised by the CCRAS Hqrs. Office, New Delhi.	National	09.03.2022
65.	Dr. B. R. Meena, Assistant Director Incharge	VC Meeting, organised by the CCRAS Hqrs. Office, New Delhi.	National	10.03.2022
66.	Dr V.B Kumawat R.O.(Ay.) and Dr. Monika Kumari, R.O.(Ay.)	VC on THCRP Proposal 2022-2023 discussion.	National	16.03.2022 and 24.03.2022
67.	Dr. B. R. Meena, Assistant Director Incharge	"Expenditure review meeting" through VC, organised by the CCRAS Hqrs. Office, New Delhi.	National	16.03.2022
68.	Dr S.K. Vedi, R.O.(Ay.) and Dr. Kishor Gavali, R.O.(Ay.)	Review meeting of SCSP (AMHCP & RCH) regarding Budget Estimate for 2022-23.	National	21.03.2022 and 24.03.2022

69.	Dr. B. R. Meena, Assistant Director Incharge	"Weekly Expenditure meeting" through VC organised by the CCRAS Hqrs. Office, New Delhi.	National	24.03.2022
70.	Dr. Suhas A. Chaudhary, R.O. (Ay.) and Dr. Kishor Gavali, R.O.(Ay.)	4th meeting of the focused group for Kaumarbhritya related research through V.C.	National	28.03.2022

5. Organized Arogya Mela/ Exhibition/ Camps/ Others:

S. No	Name of Mela/Exhibition/ Camp	Organizer	Duration & Place	Activities
1.	"Yoga fest"	Gayatri Parivaar Trust	08 to 10 January, 2022 at Nathdwara	To set-up council's stall, Exhibition of council's research activities and patent products, Free medical camp, Free distribution of medicine, Free distribution of CCRAS publications and IEC materials.
2.	IDY -2021	MSRARI, Jaipur	21 June, 2021	Daily Yoga Session for Staff and other stakeholders of Ayurveda. Conducted two webinars. Internatonal Yoga Day -2021 Programme.
3.	Poshan Maah (with theme Kuposhan Mukt Bharat)	MSRARI, Jaipur	9 to 30 September, 2021 at Jaipur	Various lectures has been given to the patients at OPD, IPD and outreach project level on Importance of Nutrition during Ante natal Care, Post-natal care & lactating phase; Importance of Nutrition for the optimal growth of children and in geriatric population. Nutrition related plants were distributed to general population and plantation done in various schools of Jaipur. Free distribution of nutritional biscuits was carried out.
4.	"Ayush Expo and Food Festival"	National Institute of Ayurveda, jaipur	11 to 13 March, 2022 at Jaipur	To set-up council's stall, Exhibition of council's research activities and patent products, Free medical camp, Free distribution of medicine, Free distribution of CCRAS publications and IEC materials, Free distribution of Ayush Tear and medicinal buttermilk.
5.	Camp for free distribution of prophylaxis medicine for covid-19 under Azadi Ka Amrit Mahostav at Collectorate office, Jaipur.	MSRARI, Jaipur	23.02.2022 at Jaipur	Free distribution of prophylaxis medicine for covis-19.
6.	Ayurveda Day - 2021			Poster competition held at Shri Shirdi Sai Baba Ayurveda College & Hospital, Renwal on 14.12.2021.

3. CLINICAL RESEARCH

i. Clinical Research(in brief): Brief resume of the clinical work carried out (Disease wise) since inception up to 2020-21

(1) Title of the Project:Clinical study on Amavata

➢ Year and month of starting the study	1973-74
➢ Year and month of closure of the study	1974
➢ Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	Shuddha Guggulu
➢ Duration of treatment	6 weeks
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. of Group-I No. of cases: 18
➢ Whether the study is continuing? If not, reasons thereof:	Study completed
➢ Specific observation if any:	None

(2) Title of the project : **To evaluate the therapeutic efficacy of Ayurvedic formulation in the management of TamakSwasa**

➢ Year and month of starting the study	1974-75
➢ Year and month of closure of the study	1975
➢ Principal Drugs therapies taken for clinical evaluation/ trial and supporting therapy	Swaskuthara Rasa + Kaphaketu Rasa + Sunthi Churna + Somlata Churna
➢ Duration of treatment	4 weeks
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. of Group-I No. of Cases: 13
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(3) Title of the project :**Clinical study on Amavata**

➢ Year and month of starting the study	1974-75
➢ Year and month of closure of the study	1975
➢ Principal Drugs therapies taken for clinical evaluation/ trial and supporting therapy	Sunthi+Guggulu
➢ Duration of treatment	6 weeks
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. of Group-I No. of cases: 18
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(4) Title of the project:Role of Pippali+Haritaki Yoga in Shula Roga

➢ Year and month of starting the study	1978
➢ Year and month of closure of the study	1985
➢ Principal Drugs therapies taken for clinical evaluation/ trial and supporting therapy	Pippali+Haritaki Yoga
➢ Duration of treatment	4 weeks
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. of Group-I No. of Cases: 132
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(5) Title of the project:Multicentric Clinical trial of AYUSH-64 on Malaria

➢ Year and month of starting the study	1980-1981
➢ Year and month of closure of the study	1999-2000
➢ Principal Drug therapies taken for clinical evaluation and supporting therapy(s)	AYUSH-64
➢ Duration of treatment	3-7days
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. ofGroup – I No. of cases: 820
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(6) Title of the project:To evaluate the therapeutic efficacy of coded drug AYUSH-56 in the management of Apasmara (Epilepsy)

➢ Year and month of starting the study	1981
➢ Year and month of closure of the study	1985
➢ Principal Drug therapies taken for clinical evaluation and supporting therapy(s)	AYUSH-56
➢ Duration of treatment	90 days
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No.of Group- I No. of Cases: 26
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(7) Title of the project:Clinical study on Amavata

➢ Year and month of starting the study	1982-83
➢ Year and month of closure of the study	1983
➢ Principal Drug therapies taken for clinical evaluation and supporting therapy(s)	ShuddhaGuggulu+Guducchyadi Kwath
➢ Duration of treatment	6 weeks
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. of Group: I No. of cases: 05
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(8) Title of the project:To evaluate the therapeutic efficacy of Vasavaleha in the management of TamakSwasa

➢ Year and month of starting the study	1980-81
➢ Year and month of closure of the study	1984
➢ Principal Drug therapies taken for clinical evaluation and supporting therapy(s)	Vasavaleha
➢ Duration of treatment	4 weeks
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. of Group-I No. of cases: 47
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(9) Title of the project:To evaluate the therapeutic efficacy of Vasa Ghanvati in the management of TamakSwasa

➢ Year and month of starting the study	1982-83
➢ Year and month of closure of the study	1984
➢ Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	Vasa Ghanvati
➢ Duration of treatment	4 weeks
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	**No. of Groups- I** **No. of cases: 08**
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(10) Title of the project: To evaluate the therapeutic efficacy of Ayurvedic formulation in the management of TamakSwasa

➢ Year and month of starting the study	1983-84
➢ Year and month of closure of the study	1984
➢ Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	Bharangi+SunthiChurna
➢ Duration of treatment	4 weeks
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. of Group-I No. of cases: 22
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(11) Title of the project: Role of Aralu in the cases of Udara KrimiRoga (Intestinal worm infestation)

➢ Year and month of starting the study	1983
➢ Year and month of closure of the study	1987
➢ Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	Aralu
➢ Duration of treatment	4 weeks
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. ofGroup-I No. of cases: 42
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(12) Title of the project:Clinical evaluation of compound formulation in the management of Sweta pradara

➢ Year and month of starting the study	1991
➢ Year and month of closure of the study	1992
➢ Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	Ashwagandha Churna+Patrangasava+Nirgunditail
➢ Duration of treatment	6 weeks
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. ofGroup-I No. of cases: 21
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(13) Title of the project:Trial of Ashwagandha Churna in Amavata

➢ Year and month of starting the study	1998
➢ Year and month of closure of the study	1999
➢ Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	Ashwagandha Churna
➢ Duration of treatment	6 weeks
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. of Groups: I No. of cases: 20
➢ Whether the study is continuing? If not, reasons thereof	Study completed

- Specific observation if any — None

(14) Title of the project: To evaluate the therapeutic efficacy of single/compound Ayurvedic preparation in the management of Gridhrasi (Sciatica)

Year and month of starting the study	1986-87
Year and month of closure of the study	1987
Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	ShephaliGhanVati
Duration of treatment	6 weeks
Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
Number of groups and number of cases under each group	No. of Groups-I No. of cases: 05
Whether the study is continuing? If not, reasons thereof	Study completed
Specific observation if any	None

(15) Title of the project: Clinical evaluation on the effect of Ayush-64+Guduchi Sattva+ Sphatika and SaptaparnaGhanVati in VishamJwara (Malaria)

Year and month of starting the study	2000-01
Year and month of closure of the study	2007-08
Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	**Group-I** Ayush-64+Guduchi Sattva+Sphatika **Group-II** SaptaparnaGhanVati
Duration of treatment	6 weeks
Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
Number of groups and number of cases under each group	No. of Groups: 02 Total number of cases under each group: Group-I : 186 Group-II: 158
Whether the study is continuing? If not, reasons thereof	Study completed

- Specific observation if any — None

(16) Title of the project: Clinical Evaluation of Shamana Chikitsa in the management of Amavata (Rheumatoid arthritis)

- Year and month of starting the study — 2000-01
- Year and month of closure of the study — 2007-08
- Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy — **Group-I**- Sunthi+Guggulu+Godanti **Group –II**- Shallaki+Suranjan
- Duration of treatment — 6 weeks
- Diagnosis and response of therapy based on — Both Ayurveda and modern parameters
- Number of groups and number of cases under each group — **No. of Group**: **02** Total No. of cases under each Group: **Group- I- 175; Group-II- 144**
- Whether the study is continuing? If not, reasons thereof — Study completed
- Specific observation if any — None

(17) Title of the project: Assessment of therapeutic efficacy of Shirish TwakKwath without Shodhana therapy in the management of TamakSwasa (Bronchial Asthma)

- Year and month of starting the study — 2000-01
- Year and month of closure of the study — 2007-08
- Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy — Shirish TwakKwath
- Duration of treatment — 6 weeks
- Diagnosis and response of therapy based on — Both Ayurveda and modern parameters
- Number of groups and number of cases under each group — No. of Group–01 No. of cases: **172**
- Whether the study is continuing? If not, reasons thereof — Study completed
- Specific observation if any — None

Reproductive Child Health Care Programme

(18) Title of the project:Assessment of therapeutic efficacy of Ayurvedic drugs prescribed in the management of General debility(Daurbalya) without any apparent cause or due to malnutrition

➢ Year and month of starting the study	2000-2001
➢ Year and month of closure of the study	2007-2008
➢ Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	Group-I ManduradiAvaleha Group-II ManduradiVati
➢ Duration of treatment	12th weeks
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. of Groups-02 No. of Cases under each group: Group-I: 56; Group-II: 45
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(19) Title of the project:To study the efficacy of certain drugs in the management of Balatisara

➢ Year and month of starting the study	2001-02
➢ Year and month of closure of the study	2007-08
➢ Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	Group-I Vatsakadi GhanVati + Mustakarishta Group-II JatiphaladiVati+ Mustakarishta
➢ Duration of treatment	7 -10 days
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. of Groups- **02** No. of cases under each group: Group-I:**73;** Group-II:**45**
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(20) Title of the project:Evaluation of therapeutic efficacy of Ayurvedic management of Non specific cough and cold in children–Bala Kasa (0-5yr).

➢ Year and month of starting the study	2001-02
➢ Year and month of closure of the study	2007-08
➢ Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	Group-I :Vasavaleha Group-II :Kantakariavaleha Group-III:Yastimadhu+Dadim+BanafsaChurna
➢ Duration of treatment	7 – 10 days
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. of Groups: 03 Cases under each Group: Group-I: **139;** Group-II: **91;** Group-III: **50**
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

(21) Title of the project:Evaluation of therapeutic efficacy of non specific cough and cold in children-BalaKasa (6 - 12yrs)

➢ Year and month of starting the study	2000-01
➢ Year and month of closure of the study	2007-08
➢ Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	Group-I: Chandramrita Rasa + Talisadi Churna Group-II: NardiyaLaxmivilas + Tankan + GodantiBhasma Group-III :Vasavaleha
➢ Duration of treatment	7 – 10 days
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each group	No. of Groups**: 03** No. of Cases under each group: Group-I: **189;** Group-II: **62** Group-III:**76**
➢ Whether the study is continuing? If not, reasons thereof	Study completed
➢ Specific observation if any	None

Family Welfare Clinical Research Programme

(22) Title of the project: **Evaluation of therapeutic efficacy as an oral contraceptive**

- Year and month of starting the study — 2000-01
- Year and month of closure of the study — 2007
- Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy — 1. AC-4
  2. Group-I Pippalyadi Yoga
  Group-II- Neem Oil (Local contraceptive**)**
- Duration of treatment — Not defined
- Diagnosis and response of therapy based on — Both Ayurveda and modern parameters
- Number of groups and number of cases under each group — No. of Groups:
  1. AC-4- No. of Cases: **680**
  Group-I (Pippalyadi Yoga):
  No. of cases: **127**
  Group-II (Neem Oil):
  No. of cases: **25**
- Whether the study is continuing? If not, reasons thereof — Study completed
- Specific observation if any — None

Table I

S.No.	Year	Group	Drug	No. of cases
1.	1978-2001	-	AC-4	680

(23) Title of the Project:Multicentric Open Clinical trial on Dhatrilauha in Iron deficiency Anaemia

- Year and month of starting the study — 31-03-2009
- Year and month of closure of the study — 27-12-2007
- Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy — Dhatrilauha
- Duration of treatment — 45days
- Diagnosis and response of therapy based on — Both Ayurveda and modern parameters
- Number of cases: — 40 cases completed
- 3 cases dropout
- Specific observation if any — None

(24) Title of the project:Multicentric Open Clinical trial on Dhatrilauha in Iron deficiencyAnaemia

➢ Year and month of starting the study	27-08-2008
➢ Year and month of closure of the study	31-03-2009
➢ Principal Drug(s) therapies taken for clinical evaluation/ trial and supporting therapy	Dhatrilauha
➢ Duration of treatment	90days
➢ Diagnosis and response of therapy based on	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each	No. of Group-01 No. of cases: 42 cases completed 9 cases dropout
➢ Specific observation if any	None

Vector borne diseases of Ayurveda and Siddha

(25) Title of the project:Documentation of reported episodes of treatment of vector bornediseases of Ayurveda and Siddha:

➢ Year and month of starting the study	13-05-2008
➢ Year and month of closure of the study	2010
➢ Total Claims	5 claims on Chikungunya and 11 claims on Malaria
➢ Specific observation if any	None

Pharmaco-Vigilance Programme

(26) Title of the project:National Pharmaco-vigilance programme for ASU drugs

➢ Year and month of starting the study:	21-01-2008
➢ Year and month of closure of the study:	Continue
➢ Diagnosis and response of therapy based on:	Both Ayurveda and modern parameters
➢ Total No. of Patients/cases	642
➢ Remarks	None of the cases showed any adverse effects.Mostly ADRs found in study are mild type which was subsiding after withdrawal of suspected drugs.

(27) Title of the project:**Effect of "AYUSH QOL 2C" (Ayurvedic coded drug) in Stage III and IV Non Small Cell Lung Cancer to prevent side effects of Chemotherapy-A Randomized Phase II Feasibility & tolerability study**

- Year and month of starting the study: 01-07-2010
- Year and month of closure of the study: March 2013
- Diagnosis and response of therapy based on: Both Ayurveda and modern parameters
- Total No. of Patients/cases 16 cases completed and 13 cases dropout

(28) Title of the project:Clinical evaluation of Punarnavadi Mandura and DadimadiGhrita in the management of iron deficiency Anaemia

- Year and month of starting the study: June 2011
- Year and month of closure of the study: May 2012
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: Punarnavadi Mandura and Dadimadi Ghrita
- Duration of treatment: 84days
- Diagnosis and response of therapy based on: Both Ayurveda and modern parameters
- Number of groups and number of cases under each: No. of Group: 01
No. of cases: 32 cases completed and 03 cases dropout
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

(29) Title of the project: Clinical Evaluation of Vyaghri Haritaki in the management of Bronchial Asthma (Tamaka Swasa)

- Year and month of starting the study: June 2011
- Year and month of closure of the study: May 2012
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: Vyaghri Haritaki
- Duration of treatment: 84 days
- Diagnosis and response of therapy based on: Both Ayurveda and modern parameters
- Number of groups and number of cases under each: No. of Group: 01
No. of cases: 40 cases completed.
01 cases dropout
- Whether the study is continuing? If not, reasons thereof: Study completed

- Specific observation if any: None

(30) Title of the Project:Clinical Evaluation of SaptavinshatikaGuggulu and HaridraChurnain the Management of Type II Diabetes Mellitus

- Year and month of starting the study: June 2011
- Year and month of closure of the study: May 2012
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: Saptavimshatika Guggulu and Haridra Churna
- Duration of treatment: 84 days
- Diagnosis and response of therapy based on: Both Ayurveda and modern parameters
- Number of groups and number of cases under each: No. of Group: 01
No. of cases: 34 cases completed
06 cases dropout
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

(31) Title of the project:Multi Centric Open Clinical Trial of Rajah Pravartini Vati in Kastarthava (Dysmenorrhea)

- Year and month of starting the study: July 2011
- Year and month of closure of the study: August 2012
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: Rajah Pravartini Vati
- Duration of treatment: 90 days
- Diagnosis and response of therapy based on: Both Ayurveda and modern parameters
- Number of groups and number of cases under each: No. of Group: 01
No. of cases: 36 cases completed.
02 cases dropout

(32) Title of the project:Clinical Evaluation of Vatari Guggulu, Rasna Saptaka Kashaya and Brihat Saindhavadi Taila in the Management of Rheumatoid Arthritis

- Year and month of starting the study: September 2013
- Year and month of closure of the study: March 2015
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy:

  Group – I
  1. Vatari Guggulu (AFI- Part I)
  2. Rasna Saptaka Kashaya (Sahasra Yoga)

  Group –II
  1. Vatari Guggulu (AFI- Part I)

2. Rasnasaptaka Kashaya (Sahastra Yoga)
3. Brihat Saindhavadi Taila (AFI-Part I)

- Duration of treatment: 84 days
- Diagnosis and response of therapy based on: Both Ayurveda and modern parameters
- Number of groups and number of cases under each: Target 60 patients
  53 cases completed07 cases dropout
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

(33) Title of the project: Clinical Evaluation of Vasavleha in the Management of Stable Chronic Bronchitis

- Year and month of starting the study: January 2015
- Year and month of closure of the study: January 2016
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: Vasavleha (API- Part II, Volume I)
- Duration of treatment: 84 days
- Diagnosis and response of therapy based on: Both Ayurveda and modern parameters
- Number of groups and number of cases under each
  No. of Group – 01
  Target 42 patients
  41 cases completed
  01 case dropout
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

(34) Title of the project: Clinical Evaluation of Navayasa Churna in the management of Iron Deficiency Anaemia

- Year and month of starting the study: December, 2014
- Year and month of closure of the study: September 2016
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: Navayasa Churna (API-Part -II, Volume I, pg 49)
- Duration of treatment: 90 days
- Diagnosis and response of therapy based on: Both Ayurveda and modern parameters
- Number of groups and number of cases under each
  No. of Group – 01
  Target 50 patients
  49 cases completed
  01 case dropout

- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

(35) Title of the project: Clinical evaluation of Kanakasava and Trivrit Churna in the management of Bronchial Asthma (Tamaka Swasa)

- Year and month of starting the study: January 2015
- Year and month of closure of the study: June 2016
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: Kanakasava (API-Part-II; Vol.-II: Pg. 31)
  Trivrita Churna (API-Part-I; Vol.-III; Pg. 213)
- Duration of treatment: 84 days
- Diagnosis and response of therapy based on: Both Ayurveda and modern parameters
- Number of groups and number of cases under each: No. of Group – 01
  Target 70 patients
  68 cases completed
  02 case dropout
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

(36) Title of the project: Clinical evaluation of Rudraksa Churna in the management of Essential Hypertension (Uccha Raktachapa)

- Year and month of starting the study: July 2015
- Year and month of closure of the study: June 2017
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: Rudraksa Churna (API-Part-I; Vol.-IV: Pg. 104-105)
- Duration of treatment: 84 days
- Diagnosis and response of therapy based on: Both Ayurveda and modern parameters
- Number of groups and number of cases under each: **No. of Group – 01**
  Target 76 patients
  69 cases completed
  06 case dropout
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

(37) Project title: **Multicentric Placebo Controlled Clinical Study of Ayurvedic Coded Drug "AYUSH-A" in the management of Mild Bronchial Asthma (Tamaka Shwasa)**

➢ Approval of IMCRP:	Clinical Project 2015-16 (Claim Drug)
➢ Year and month of starting the study:	30.04.2016
➢ Name of Principal Investigator:	Dr. Avinash Kumar Jain, R.O. (Ay.)& Dr. Anu Bhatnagar, R.O. (Ay.),
➢ Name of Co- Investigator:	Dr. Gulab Singh Yadav,Asstt. Prof., Institute ofRespiratory Diseases, Jaipur Dr. H.M.L.Meena, R.O. (Ay.) Dr. B.R. Meena, R.O. (Ay.)
➢ Study Design:	Study Centres: 03 Sample Size: A total of 300 patients to be enrolled (100 patients per centre with 50 patients in each Group)
➢ Study Groups:	**Group-1:** Ayurvedic Treatment i.e.AYUSH-A (Coded Ayurvedic Herbal preparation) 2gm/day (Tablets of equal size three times in a day) **Group-2:** Patients taking Allopathic medicine + Matching placebo of Ayurvedic Treatment
➢ Duration of treatment:	14 weeks
➢ Interventions:	Ayurvedic Coded Drug "AYUSH-A"- 001 Matching placebo of Ayurvedic Treatment "AYUSH-A" – 002
➢ Date of IEC approval:	01.01.2016
➢ CTRI Registration Reference (for Clinical Trials) :	CTRI/REF/2016/03/011065

Chronological timeline & deliverables:

S. No.	Target	Time line	Achieved/ Not achieved	Causes of deviation, if any
1.	Group-1	1-6 months	Achieved	-
	Group-2		Not achieved	Non-availability of the patients due to Inclusion criteria
2.	Group-1	7-12 months	Achieved	-
	Group-2		Not achieved	Non-availability of the patients due to Inclusion criteria

Brief Summary of the Project during 2016-17:

i.	Study Screened Subjects:	34
ii.	Enrolled Subjects:	31
iii.	Study completed Subjects:	30
iv.	Drop out Subjects:	Nil
v.	Study stopped	01

Summary of the project:

This Multicentric Research project is commenced under Clinical Project 2015-16.The target fixed in the study is 100 subjects in two groups: Group-1 (Only Ayurvedic Treatment **i.e.** Tab.AYUSH-A-001 (Coded Ayurvedic Herbal preparation) 2gm/day) and Group-2 (Allopathic medicine +Matching placebo of Ayurvedic Treatment i.e. Tab. AYUSH-A-002). The subjects presenting with the signs and symptoms of Mild Bronchial Asthma between age 18-60 years are selected from OPD of the Institute. Subjects fulfilling the Inclusion and Exclusion criteriaas per protocol and Case Record Form are registered in the study. The enrolled subjects are advised to take Tab. AYUSH A-001 (Ayurvedic Coded Drug) in Group-1 and Tab. AYUSH A-002(Matching placebo of Ayurvedic Treatment) in Group-2 in the dose of 3 tablets thrice a day for 84 days. After that, subjects are called to visit on every 14th day interval for next examination till 84th day along with the follow-up at the end of 14 weeks. During the reporting period 2016-17, 34 subjects have been screened, out of which 31 subjects are enrolled for the study i.e. 26 in Group-1 and 05 in Group-2 while 03 subjects were screen failure. Out of total enrolled 31 subjects, 26 subjects in Group-I and 04 subjects in Group-2 have completed the study and 01 subject was stopped the study because the project has been closed in May, 2017 under the guidelines of CCRAS Hqrs due to non-availability of subjects according to inclusion criteria. This drug has not shown any major adverse effect. **Project has been closed in May, 2017 under the guidance of CCRAS HQ.**

(38) Clinical Evaluation of RasnadiKvathaChurna (Maha), Trayodashanga Guggulu and BrihatSaindhavadya Taila in the Management of Osteoarthritis of Knee (JanugataSandhivata)

➢ Year and month of starting the study:	15.12.2017
➢ Year and month of closure of the study:	27th June, 2019
➢ Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy:	RasnadiKvatha Churna(Maha) (AFI – Part I, 4 : 28) Trayodashanga Guggulu (AFI – Part I, 5 : 4): BrihatSaindhavadyaTaila(AFI – Part I, 8 : 40).
➢ Duration of treatment:	12 weeks
➢ Diagnosis and response of therapy based on:	Both Ayurveda and modern parameters
➢ Number of groups and number of cases under each	No. of Group – 01 Target 60 patients

Total cases Screened- 93,
Enrolled-60, Completed-58
Dropped out-02.

- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

(39) Validation of Prakriti Assessment Questionnaire/Scale

- Year and month of starting the study: March, 2017
- Year and month of closure of the study May, 2019

- Whether the study is continuing? If not, reasons thereof: Study completed
- No of cases completed: 60
- Specific observation if any: None

(40) Testing and validation of Tvak vikar proforma under Validation and Reliability testing of Ayurveda Diagnostic tools

- Year and month of starting the study:- March, 2018
- Year and month of closure of the study:- April, 2018
- Whether the study is continuing? If not, reasons thereof: - Study completed
- Specific observation if any: - None

- No of cases completed 10

(41) Testing and validation of Pranavaha sroto vikar proforma under Validation and Reliability testing of Ayurveda Diagnostic tools

- Year and month of starting the study: June, 2018
- Year and month of closure of the study: June, 2018
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None
- No of cases completed: 10

(42) Testing and validation of grahani roga rogi pareeksha proforma under Validation and Reliability testing of Ayurveda Diagnostic tools

- Year and month of starting the study: November, 2019
- Year and month of closure of the study: November, 2019
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None
- No of cases completed 10

(43) Pharmacoepidemiological study on safety and effectiveness of Rasaushadhies - Retrospective analysis

- Year and month of starting the study: April, 2018
- Year and month of closure of the study: March, 2019
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None
- No of cases completed: Retrospective data of IPD patients from 01-04-2012 to 31-03-2017 were compiled in given excel format and sent to headquarters time to time.

(44) Knowledge, Attitude and Practice towards Ayurvedic medicine use among the Diabetics - a cross sectional study in India

- Year and month of starting the study: **28.11.2018**
- Year and month of closure of the study: Nov.2020

- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: - A cross-sectional**,** mult centric observational study
- Duration of treatment: -
- Diagnosis and response of therapy based on: -
- Number of groups and number of cases under each -664 cases surveyed
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

(45) Testing and validation of Pandu Proforma under Validation and Reliability testing of Ayurveda Diagnostic tools

- **Objectives:** Validation of ***Pandu Proforma*** under Validation and Reliability testing of Ayurveda Diagnostic tools
- **Sample Size:** 10
- **Intervention**: NA
- Date of initiation of the study: 01.03.2021
- Date of completion of the study: 27.03.2021

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(46) Clinical Evaluation of Drakshasava in the Management of Pandu (Iron Deficiency Anaemia

- Year and month of starting the study: **17.09.2018**
- Year and month of closure of the study: March 2021
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: -Drakshasava (Bhaisajyaratnavali, Arsorogadhikara: 170-174 AFI Part II)
- Duration of treatment: -84 days
- Diagnosis and response of therapy based on: - Both Ayurveda and modern parameters
- Number of groups and number of cases under each -01, target 60, enrolled 58 completed 46, dropout 12
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

(47) A prospective non-randomized open label controlled interventional study on the effect of GuduchiGhanVati/ Sudarshan GhanVati as a prophylactic measure among Containment Zone population exposed to COVID 19" (at Bhilwara District, Rajasthan)

- Year and month of starting the study: 06.06.2020
- Year and month of closure of the study: 20.08.2020
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: Group 1: GuduchiGhanVati/ Sudarshan GhanVati+ Standard Prophylactic Care
  Group 2: Standard Prophylactic Care + Sanitizer, mask and also printed IEC material
- Duration of treatment: -30 days
- Diagnosis and response of therapy based on: - Both Ayurveda and modern parameters
- Number of groups and number of cases under each: -02, target 1500, 1472 were completed and 28 were dropped
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

(48) A prospective non-randomized open label controlled interventional study on the effect of *Guduchi Ghan Vati/ Sudarshan Ghan Vati* as a prophylactic measure among Containment Zone population exposed to COVID 19 (at Ramganj area, Jaipur District, Rajasthan)

- Year and month of starting the study: 06.06.2020
- Year and month of closure of the study: 20.08.2020
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: Group 1: GuduchiGhanVati/ Sudarshan GhanVati+ Standard Prophylactic Care
  Group 2: Standard Prophylactic Care + Sanitizer, mask and also printed IEC material

- Duration of treatment: -30 days
- Diagnosis and response of therapy based on: - Both Ayurveda and modern parameters
- Number of groups and number of cases under each: -02, target 1500, 147 were completed and 28 were dropped
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

(49) A prospective open label controlled interventional study on the effect of *Ayurvedic* intervention *(Ayurveda Raksha Kit)* as a prophylactic measure in the Pandemic of COVID-19 - A community-based study

- Year and month of starting the study: 12 October, 2020
- Year and month of closure of the study: January, 2021.
- Principal Drugs therapies taken for Clinical evaluation/ trial and supporting therapy: **Group-A (Intervention group):** Participants will receive ***Ayurvrda Raksha Kit*** Group 2: **follow Standard preventive measures of COVID-19** (liquid soap/soaps for hand wash and mask/masks will be provided)
- Duration of treatment: -30 days
- Diagnosis and response of therapy based on: - Both Ayurveda and modern parameters
- Number of groups and number of cases under each: -02, sample size for Intervention group and control group were 890 and 1100 respectively
- Whether the study is continuing? If not, reasons thereof: Study completed
- Specific observation if any: None

PART-A

A. Name of the Project: Impact of Ayurveda Based Lifestyle Advocacy and Practices among apparently healthy individuals across selected cities in India- A Cluster Randomized Parallel group study.

1. **Objective:**
   - **Primary: To assess the impact of Ayurveda based lifestyle advocacy and practices on physical and psychological well-being of individuals across selected cities in India.**
   - **Secondary**:
     i. To assess the impact of Ayurveda based lifestyle advocacy and practices on Ayurvedic parameters.
     ii. To assess the impact of Ayurveda based lifestyle advocacy and practices on haematological and biochemical parameters.
     iii. To assess the impact of Ayurveda based lifestyle advocacy and practices on inflammatory parameters.
     iv. To assess the impact of Ayurveda based lifestyle advocacy and practices on biomarkers of vascular disease.
     v. To assess the impact of Ayurveda based lifestyle advocacy and practices on biomarkers of bone health.

2. **Study outcome measures:**
   - **Primary outcome measure:** Change in Physical and Psychological parameters in terms of SF-36 HRQOL Questionnaires at baseline & at the end of every 3rd month.
   - **Secondary outcome measure:**
     i. Change in Oral Health Assessment Tool (OHAT) at baseline and at the end of every 3rd month.
     ii. Change in Hair Whitening Scale (HWS) at baseline and at the end of every 3rd month.
     iii. Change in Perceived Stress Scale (PSS) at baseline and at the end of every 3rd month.
     iv. Change in Pittsburgh Sleep Quality Index (PSQI) at baseline and at the end of every 3rd month.
     v. Change in Wrinkle Severity Rating Scale (WSRS) at baseline and at the end of every 3rd month.
     vi. Change in Haematological parameters viz, CBC, ESR at baseline, at the end of 6 months, at the end of 12 months and at the end of 24 months.
     vii. Change in biomarkers of Vascular disease viz. NT-pro BNP, hs-CRP, Homocysteine, Fibrinogen at baseline and at the end of 12 months.
     viii. Change in biomarkers of Bone health viz. Vit D, Serum Calcium, Serum Phosphorus at baseline, at the end of 6 months, at the end of 12 months and at the end of 24 months.
     ix. Change in Liver function test (LFT) & Renal function test (RFT) at baseline, at the end of 6 months, at the end of 12 months and at the end of 24 months.

x. Change in Lipid profile at baseline, at the end of 6 months, at the end of 12 months and at the end of 24 months.
xi. Change in metabolic profiles viz. HbA1c at baseline, at the end of 6 months, at the end of 12 months and at the end of 24 months.

3. **Study Design:** Cluster Randomized Parallel-Group Study
4. **Grouping :**02
5. **Sample Size:** 240 (120 in each group)
6. **Approval of IMR :**IMR Annual action plan 2019-20
7. **Target given by CCRAS head quarters:** 3year
8. **Timelines:**

   Total Study Period: 36 months
   Preparatory period: 2 months
   Recruitment :9 months
   Intervention Period: 12 months
   Follow-Up Period: 12 months
   Statistical Analysis :1 Month
9. **Lifestyle intervention (Ayurveda lifestyle advocacy pakage): Dincharya ,ritucharya, sadvritta and aharavidhividhan**
10. **Participating centre along with PI:** MSRARI, Jaipur,Rajasthan; PI: Dr.MonikaKumari, R.O (Ay.)
11. **IEC approval**:Ref.F.5/Lab/Pre-iron/Ethics/2007-08CRAI-JPR, Date:13/03/2020
12. **CTRI registration No**: CTRI/2021/05/033785
13. **Date of initiation of the project**: yet not initiated
14. **Budget allocated**: Rs 1,19,86,560/-

    Installment wise release:-

S.No	Installment	Sanctioned order	Date	Date of receipt of fund
1.	Ist :Rs. 71,91,936	Mi.Si.4-117/2019/RARISD/VIJ/TECH/AY.lifestyle/1185	26/10/2019	04/11/2019

15. **Chronological timeline &deliverables :-**

S.No.	Time line	Achieved /Not achieved	Causes of deviation,if any
1.	1-2 months	Achieved	-
2.	3-12 months	-	-
3.	12-24 months	-	-
4.	24-36 months	-	-

16. **Current status of the study:** Ethically approved
17. **Summary of the Project:** This IMR project entitled "***Impact of Ayurveda Based Lifestyle Advocacy and Practices among apparently healthy individuals across selected cities in India- A Cluster Randomized Parallel Group Study***" was allotted under IMR Annual action plan 2019-20. This is an cluster study **Cluster Randomized Parallel-Group Study** of a 2 groups of sample size 240.The

study aims to assess the impact of Ayurveda based lifestyle advocacy and practices on health of apparently healthy volunteers. The total duration of the study is 3 years. The budget sanctioned for the project is Rs. 1,19,86,560. The first installment of Rs. 71,91,936 has been received on 04/11/2019for the Initiation of the study. The ethical approval for the study has been obtained on 13/03/2020. The CTRI of the the project has been done. Lab has been identified.CRF printing has been done.The recruitment of subjects has not been initiated.

18. **Relevant information if any**,

1)	Name of the institute	:	MSRARI, Jaipur
2)	Date of ethical approval of the study:		13.03.2020
3)	Duration of the study	:	3 years
4)	Name of the Principal Investigator	:	Dr. Monika Kumari R.O (Ay.)
5)	Name of the Co Investigator	:	Dr. S. K. Vedi R.O (Ay.)

B. Name of Project: A Prospective Open Labelled Observational Study To Document The Potential Safety Issues And Prescription Trends In Selected Rasausadhi's In Ccras -Opd's Across India.

1. **Objectives**
   - **Primary Objectives:** Development of an Ayurvedic informatics database of selected *Rasausadhi's* in terms of clinical safety.
   - **Secondary Objectives:** Prospective documentation and analysis of information related with prescription trends of selected *Rasausadhi's* in a structured format to draw the meaningful possible outcomes and conclusions.
2. **Outcomes Measures**
   - **Primary Outcome Measure:**Generation of data for safety of *Rasausadhi's* assessed through Blood investigations, LFT and KFT/RFT.
   - **Secondary Outcome Measures:**
     i. Observe, document and reporting to pharmaco- vigilance team about possible ADR/AE
     ii. Prescription trends of *Rasausadhi's*& its effectiveness and rational use.
3. **Study Design:** Open label not controlled prospective observational study
4. **Sample Size:** 110
5. **Approval of IMR :**IMR Annual action plan 2019-20
6. **Target given by CCRAS head quarters:** 1 year
7. **Timelines:**

Total Study Period	**:**	12 months
Recruitment	**:**	11 months
Statistical Analysis	**:**	1 Month

8. **Interventions:**List of formulations to be evaluated for clinical safety:
   i. *Laxmi Vilas rasa (Naradiya)*-A.F.I, Part-I, 20:39,
   ii. SutasekharRasa- A.F.I, Part-I, 20:52,
   iii. Tribhuvankirti Rasa- A.F.I, Part-I, 20:20
   iv. Swasakuthar Rasa- A.F.I, Part-I, 20:39,
   v. ChandraprabhaVati- A.F.I, Part-I, 12:10,
   vi. GandhakaRasayana- - A.F.I, Part-II, 7:5
   vii. Rasa manikya Rasa- A.F.I, Part-I, 20:33,
   viii. Smritisagara Rasa- A.F.I, Part-II, 16:64,
   ix. ArogyavardhiniGutika 250mg- A.F.I, Part-I, 20:4,
   x. Mahayogarajaguggulu- A.F.I, Part-I, 5:6,
   xi. *PrabhakarVati- A.F.I, Part*-I, 12:15.

Dose	**:**	**As per classical references**
Route of Administration	**:**	Oral
Time of Administration	**:**	as per classical references
Duration of therapy	**:**	1week-6 Weeks

9. **Participating centre along with PI:** MSRARI, Jaipur, Rajasthan; PI: Dr. Monika Kumari R.O (Ay.)
10. **IEC approval** :Ref.F.5/Lab/Pre-iron/Ethics/2007-08CRAi-JPR, Date:13/03/2020)
11. **CTRI registration no**: CTRI/2020/09/027526
12. **Date of initiation of the project**: 08.01.2021
13. **Budget allocated** :Rs. 6,21,000/-

Installment wise release:-

S.No	Installment	Sanctioned order	Date	Date of receipt of fund
1.	Ist :Rs. 6,21,000/-	F.No-84-1/2019-CCRAS/Admin/HQ/7470	19.02.2020	28.02.2020

14. **Chronological timeline &deliverables:-**

S.No.	Time line	Achieved /Not achieved	Causes of deviation,if any
1.	1-2 months	Initiated on 08.01.2021	-
2.	3-11 months	achieved	-
3.	11-12months	**Achieved**	-

15. **Current status of the study:**

No of cases screened	No of cases enrolled	Screening failure	No of cases completed	Drop outs	No of cases continuing
117	108	09	92	16	0

16. **Summary of the project:** This IMR project entitled "***A prospective open labelled observational study to document the potential safety issues and prescription trends in selected Rasausadhi's in CCRAS - OPD's across India***"was allotted under IMR Annual action plan 2019-20.This is an open labeled, non controlled, prospective, observational study of a single group of sample size 110.The study aims to Develop an Ayurvedic informatics database of selected Rasausadhi's in terms of clinical safety. The total duration of the study is one year. The budget sanctioned for the project is Rs. 6,21,000/- which has been received on 28.02.2020 for the Initiation of the study. The study has been ethically approved on 13.03.3020. The study has been initiated on 08.01.2021. 117 cases were screened out of which 108 cases were enrolled, 92 ases completed the study and 16 were dropout. The project has been completed in 1st week of March 2022.
17. **Relevant information if any,**

1) Name of the institute : MSRARI, Jaipur
2) Date of initiation of the study : 08.01.2021
3) Duration of the study : 1year
4) Name of the Principal Investigator : Dr. Monika Kumari, R.O (Ay.)
5) Name of the Co Investigator : Dr. S. K. Vedi, R.O (Ay.)

C. Name of Project: Second phaseValidation and reliability testing of diagnostic methods in Ayurveda (Prameha and Pandu)

Second phase validation and reliability testing of diagnostic methods in Ayurveda project was allotted by the council to the **National Institute of Ayurveda**, Jaipur through this Institute in the year 2019-20in collaboration under CCRAS Research policy and continued in 2020-21. It is multicentre project and being executed at 06 reputed institute of Ayurveda.

1. **OBJECTIVES:**
    1) To develop **Standardized Ayurvedic Case Taking Protocol (SACTP)** in consideration with elements of diagnosis/case recording from Ayurveda and Standard health records format(s).
    2) Development of standard diagnostic protocols for selected diseases frequently managed through Ayurveda.
    3) To develop interface for integration/ customization and development of diagnostic gadgets which are aptly integrated with latest Information Technology tools *for* Ayurveda specific diagnostic requirements.
2. **OUTCOMES MEASURES**
    - **Primary Outcome Measure:**Validation of Ayurveda Case Taking Protocol (SACTP)" integrated with Electronic Health Record.
    - **Secondary Outcome Measures:**
        1) Validation of diagnostic tool of selected disease condition.
        2) Development of diagnostic criteria for selected disease conditions.
        3) Interface for integration/ customization and development of diagnostic gadgets based on Internet of Things.
3. **Study Design:** NA
4. **Sample Size:** 30 patients per disease.
5. **Approval of IMR:** IMR Annual action plan 2019-20.
6. **Target given by CCRAS head quarters:** 03 year
7. **Timelines:** 03 years
8. **Interventions:** Issue of treatment as per the diagnosis.
9. **Participating centre along with PI:** National Institute of Ayurvea,Jaipur,Rajasthan; PI: Dr. Bharat Padhar, Assistant Professoer, Departmentt of Kayachikitsa, NIA, Jaipur (for Prameha and Pandu testing).
10. **MoU:** MoU between NIA & this institute was signed on 06.09.2019
11. **IEC approval** :28.11.2019 by the IEC of NIA [Ref. IEC/ACA/2019/3-9, Date:29/11/2019]
12. **Date of initiation of the project**: The project was Initiated in January, 2020 for selected diseases.
13. **Budget allocated** :Rs. 17,76,000/-

Installment wise release:-

S.No	Installment	Sanctioned order	Date	Date of receipt of fund
1.	Ist :Rs. 5,92,000/-	F.No.3-31/2018-CCRAS/Admin/V&RT/6078	29.03.2019	29.03.2020

14. **Summary & Current status of the study:**

The project entitled "***Validation and reliability testing of diagnostic methods in Ayurveda***" was allotted by the Council to the National Institute of Ayurveda, Jaipur in collaboration through this institute under IMR Annual action plan 2019-20 as "**Second phase of validation and Reliability Testingof Ayurveda Diagnostic Methods (Kasa, Shwasa and Jwara)** and during the year 2020-21, **Second phase of validation and Reliability Testing of Ayurveda Diagnostic Methods (for Grahani)** was allotted by the council on 07/09/2020 and for disease **Prameha and Pandu** was also allotted on 11.11.2020 **.**

This is an observational study. The study aims to develop Standardized Ayurveda Case Taking Protocol (SACTP) in consideration with elements of diagnosis/case recording from Ayurveda and Standard health records format (s), standard diagnostic protocols for selected diseases frequently managed through Ayurveda and to develop interface for integration/customization and development of diagnostic gadgets which are aptly integrated with latest Information Technology tools for Ayurveda specific diagnostic requirements.

The total duration of the study is three year. The budget sanctioned for the project is Rs. 5,92,000/- (First Installment) which has been released to the Director, National Institute of Ayurveda, Jaipur through Mutlticity Cheque No. 218353 dated 04.11.2019 vide this Instittute letter No. 2-4/2005-CRI/JPR/Accounts/DD/4506 dated 06.11.2019 for the Initiation of the study. The study has been ethically approved. The project (for **Prameha and Pandu**) was initiated in November, 2020 and as per the informed by the Principal Investigator, up to March, 2022 status of project is as under:

Name of the disease	Total no. of cases to be completed	Case completed in upto 31st March, 2022
Prameha	30	30
pandu	30	30

Relevant information if any,

Name of the institute	• National Institute of Ayurveda, Jaipur • MSRARI, Jaipur
Duration of the study	• 03 years
Name of the Principal Investigator	• Dr. Bharat Padhar, Assistant Professoer, Deptt. Of Kayachikitsa, NIA, Jaipur (For Prameha and pandu roga)
Name of the Co Investigator	• Dr.S.K.Vedi, Research Officer (Ay.), MSRARI, Jaipur

D. Name of Project: "Randomized, Placebo control, Double blind clinical trial to evaluate the effect of Trikatu in Subclinical Hypothyroidism"

OBJECTIVES:

Primary Objective

To evaluate the efficacy of Trikatu in the management of Subclinical Hypothyroidism.

Secondary Objective

To study the safety of Trikatu in the management of Subclinical Hypothyroidism.

OUTCOMES:

Primary Outcome Measures

Change in TSH

Secondary Outcome Measures

1) Change in Antithyroid antibody
2) Change in fT3 and fT4
3) Change in Lipid profile.
4) Clinical assessment of safety profile through LFT and RFT.
5) The advent of any biological intolerability/ADR/AE.
6) Change in status of Agni (Jatharagni Assessment).
7) Change in Quality of Life (SF-36) score.

STUDY DESIGN:

Study type	:	Randomized, Placebo control, Double blind
Purpose	:	Treatment
Masking	:	Blinded
Control	:	Placebo
Timing	:	Prospective
End point	:	Efficacy and Safety
No. of Groups	:	Two
Sample size	:	270 (90 at each centre and 45 in each group)

TIMELINES:

Total Study Period	:	2 years
Preparatory Period	:	6 months
Recruitment	:	13 months
Treatment Period	:	84 days
Follow-Up Period	:	28 days after stopping the trial drug
Statistical Analysis	:	1 month

INTERVENTIONS:

Group I- Trikatu

Dose	:	1000 mg Powder
Dosage form	:	Tablet
Route of Administration	:	Oral

Anupana	:	Water
Time of Administration	:	Twice a day, 30 minutes before food
Duration of therapy	:	84 days
Packing	:	30 Tb

Group II- Placebo (Starch Powder/MCC)

Dose	:	1000 mg Powder
Dosage form	:	Tablet
Route of Administration	:	Oral
Anupana	:	Water
Time of Administration	:	Twice a day, 30 minutes before food
Duration of therapy	:	84 days
Packing	:	30 Tablet.

Participating centre along with PI and CO-I

S.No.	Name of the participating centre	Name of PI	Name of Co-I
1.	M. S. Regional Ayurveda Research Institute, Jaipur	Dr. Kishor Gavali	Dr. S.K.Vedi

- **Date of IEC approval**: 04/07/2020 (F.5/Lab./Ethic.com. /2007-08CRIA/JPR/Tech./1536
- **CTRI Registration/Reference (for clinical trials)**:CTRI/2022/02/040430 [Registered on: 18/02/2022]
- **Date of initiation: 0**8.03.2022
- **Budget allocated:**Rs.2446400/- (Council'sOrder F.N 3-69/2020/-CCRAS/Admn/IMR/1670dated 23-7-2020.

Installment wise release:

S. No.	Installment	Sanctioned order	Date	Date of receipt of fund
1.	1st	Council's letter no.F.No.3-69/2020-CCRAS/Admn/IMR/1670 dated 23-7-2020	23-7-2020	30-7-2020
2.	2nd	Council's letter no.F.No.3-26/ 2019- CCRAS/ Admn/IMR/Tripitika/6955 dated 18-3-2021	18.03.2021	Spared

Chronological timeline & deliverables:

Preparatory Period :6 months (Procurement of medicines and preparation of CRF completed)

Recruitment (next 13 months): Screening and enrolment started.

Summary and current status of the project:

This Research Project was allocated to institute under annual action plan 2019-20 on 16th March, 2020. As per instructions of the council, proposal according to IMR format under CCRAS research policy was submitted to Headquarters on 18-3-2020.Budget allocated wasRs.2446400 (Council's order no. F.N 3-69/2020/-CCRAS/Admn/IMR/1670 dated 23-7-2020), out of which 1st installment was released by Headquarters videCouncil's letter F.No.3-69/2020-CCRAS/Admn/IMR/1670 dated 23-7-2020. CTRI registration is in process by nodal centre RARIMD, Bengaluru.IEC approval has been taken on 4.07.2020.. Order of the medicine has been placed in CCRAS Headquarters via F.N.3-69/2020-CCRAS/Admn./2720 dated 11-9-2020. Medicines received and project has been initiated from 7th March 2022.

Relevant information, if any:

1. Name of the Institute/Unit : M.S.R.A.R.I, Jaipur
2. Name of Principal Investigator : Dr. Kishor Gavali, R.O. (Ay.)
3. Name of Co- Investigator : Dr. S.K.Vedi, R.O. (Ay.)

E. Name of Project: Clinical Evaluation of Vidanga Churna and Vyoshadi Guggulu in the Management of Medoroga (Obesity)

Objectives:

Primary Objective

To assess the clinical efficacy of *Vyoshdi Guggulu* and *Vidanga Churna* in the Management of *Medoroga* (Obesity)

Secondary Objective

To assess the clinical safety of *Vyoshadi Guggulu* and *Vidanga Churna* in the patients of *Medoroga* (Obesity)

OUTCOMES:

Primary outcome measures:

1) Changes in BMI
2) Change in waist circumference
3) Mean change in body weight from baseline
4) Percentage of participants who achieve a minimum of 10% of wight loss

Secondary outcome measures:

1) Changes in percentage of body fat assessed by DEXA Scan.
2) Change in Obesity Weight loss Quality of Life Instrument (OWL-QoL)
3) Change in Lipid Profile.
4) Change in HbA1c

STUDY DESIGN:

Study Type	Interventional
Purpose	Treatment
Masking	Open label
Control	Not controlled
Timing	Prospective
End Point	Efficacy and Safety
No. of Groups	Single
Sample size	50 at each centre (02 centres- 100 subjects)

TIMELINES:

Total Study period	24 months
Pre-trial preparation	6 months
Recruitment	13 months
Treatment period	12 weeks
Follow up period	2 weeks
Statistical Analysis	6 weeks

INTERVENTIONS:

1. **Vyoshadi Guggulu** (AFI-Part-I, 5:9; API, Part-II, Vol.-II)
   Dose : 1 gm (2 Tablets of 500 mg each) thrice daily
   Dosage form :Tablet
   Route of Administration : Oral
   Time of Administration : Thrice a day after food
   Anupana : Lukewarm water
   Duration of therapy : 12 weeks

2. **Vidanga Churna** (API , Part –I, Vol. –II)
   Dose : 3 gm.
   Dosage form : Powder
   Route of administration: Oral
   Time of Administration : Twice a day after food
   Duration of Therapy : 12 weeks

Participating centre along with PI and CO-I :

S.No.	Name of the participating centre	Name of PI	Name of CoI
1.	M.S.Regional Ayurveda Research Institute, Jaipur	Dr.S.K.Vedi, R.O.(Ay.)	Dr. Kishor A Gavali R.O.(Ay.)

- **Date of IEC approval**: 04/07/2020
- **CTRI Registration/Reference (for clinical trials)**: Applied by nodal centre vide Ref. No.-REF/2020/10/037389.
- **Date of initiation:** 24.11.2021
- **Budget allocated:** BudgetRs.16,90,000 was sanctioned vid Council,s letter.F.No.3-53/2020-CCRAS/Admn/IMR/8304 –A dated 30-03-2020

Installment wise release:

S. No.	Installment	Sanctioned order	Date	Date of receipt of fund
1.	1st	Council's letter No.F.No.3-53/2020-CCRAS/ Admn/ IMR/ 8304 –A dated 30-03-2020	30-03-2020	02-04-2020

Summary and current status of the project:

This multicentre Research Project was allocated to institute under annual action plan 2018-19 on 6th March, 2020 vide CCRAS F.No.13-17/2019-CCRAS/Tech/Hq/17934. As per instructions of the council, proposal according to IMR format under CCRAS research policy, was submitted to Headquarters on 23-3-2020.Budget Rs.16,90,000/- was sanctioned vide Council's Order No. F.N 3-69/2020/-CCRAS/Admn/IMR/1670 dated 23-7-2020, out of which 1st installment was released by Headquarters of amount Rs.10,15,000/- on 02-04-2020. IEC approval had been taken on 4.07.2020. For CTRI registration had been applied by nodal centre RARIMD, Bengaluru and REF No. is REF/ 2020/10/037389.

The project has been initiated on 24.11.2021. Till 31st March, 2022 total 10 subjects have been screened, out of which, 06 subjects have been enrolled; 01 subject has been successfully completed the study, 01 subject has been drop out and 04 patients are continue in the study.

Relevant information, if any:

1. Name of the Institute/Unit : M.S.R.A.R.I., Jaipur
2. Name of Principal Investigator : Dr. S.K.Vedi R.O. (Ay.)
3. Name of Co- Investigator : Dr. Kishor A Gavali, R.O. (Ay.)

F. Name of Project: "Effectiveness of Ayurveda based diet and Lifestyle advocacy on health related Quality of life in schedule Caste population in India- a Community based, cluster randomized controlled study" (IMR project under AMHCP-SCSP-2021-22):

Objectives-

Primary Objectives:

i. To assess the effectiveness of Ayurvedic diet and Lifestyle advocacy on Quality of Life among schedule Caste population.

Secondary Objectives:

i. To assess the effectiveness of Ayurvedic diet and Lifestyle advocacy on Ayurvedic health assessment parameters.
ii. To evaluate acceptability and adherence to Ayurvedic diet and Lifestyle advocacy among schedule Caste population

Inclusion criteria:

i. Participants of scheduled Caste community of any gender in the age group 18 to 65 years.
ii. Participants willing to provide written informed consent and participate in the study for 3 months

Exclusion criteria

i. Pregnant women/ women who are planning for conception/lactating women
ii. Participants with known history or a confirmed or suspected diagnosis of Cardiac diseases, Autoimmune diseases, cancer and Acute inflammatory conditions
iii. Known case of mental disorder like bipolar depression, Schizophrenia etc.
iv. Participants who are suffering from chronic diseases and under multiple drug regimen.
v. Participants with addictions to alcohol, marijuana etc.
vi. Any other condition which PI may think can jeopardize the study.

Brief Research Plan/ Methodology- In selected SC dominant villages/ areas OPD camps was organized along with door to door health survey. Participants were selected from the OPD camp and survey population. After randomization, Participants were enrolled into either Group (I & II) as per Convenience sampling. In Group I, participants (intervention) were advised Ayurveda based diet and lifestyle on monthly basis. In Group II, participants (Control) were advised to practice their routine diet and lifestyle during the study period.

Outcomes measures:

Primary outcomes:

i. Change in Quality of Life assessed through WHO-QOL BREF

Secondary outcomes:

Change of health status assessed through Ayurveda Swasthya Assessment Scale (SAS)

Intervention-

Ayurveda diet and lifestyle advocacies

The Ayurveda based Lifestyle Advocacy and Practices (ALAP) was given only for Group I.

Milestone with deliverables:

Total Study Period: 10 months

i. **Preparatory Period** (CRF, Medicine procurement etc.) :1 month
ii. **Recruitment and Follow up: 6 months**

Intervention Period: 12 weeks (84 days)

Follow-Up: every 4 weeks, up to 12 weeks

Statistical Analysis: 1 months

Methodology:

Study Type	Open label, cluster randomized controlled Interventional study
Control:	Controlled
Timing:	Prospective
Number of groups:	Two
Centers:	Multi-Centric (20 Centers of CCRAS)
Sample size:	1400 in 20 centers of CCRAS i.e. 70 in each centre (35 in each group)

Milestone with deliverables:

Total Study Period: 10 months

i. **Preparatory Period** (CRF, Medicine procurement etc.) :1 month
ii. **Recruitment and Follow up: 6 months**

Intervention Period: 12 weeks (84 days)

Follow-Up: every 4 weeks, up to 12 weeks

Statistical Analysis: 1 months

Participating centre along with PI and CO-I :

S.No.	Name of the participating centre	Name of PI	Name of CoI
1.	M.S.Regional Ayurveda Research Institute, Jaipur	Dr.S.K.Vedi, R.O.(Ay.)	Dr. Kishor Gavali, R.O.(Ay.)

Date of IEC approval: Ref.No.F.5/Lab/Pre-iron/Ethics/2007-08 CRAI-JPR/1270 dated 16.07.2021

CTRI registration: **CTRI/2021/07/034952 [Registered on: 19/07/2021]**

Date of initiation: 14.09.2021

Date of completion: project completed on 09.03.2022

Chronological timeline & deliverables: Project had been initiated on 14.09.2021 (Total duration of project was 10 months)

Summary and current status of the project:

This IMR clinical project was allotted by the council as a component of AMHCP (SCSP) 2021-22 and was initiated on 14.09.2021. Total target was 70 subjects (Gr.-I-35& Gr.-II-35) to be covered under this project. Total 119 numbers of patients were screened and 70 enrolled (35 in each group) under this project. Under Group –I subjects were instructed to follows the The Ayurveda based Lifestyle Advocacy and Practices (ALAP) and Anu taila was given for Nasya as per protocol. The study has been completed on 09.03.2022. While under Group-II, the enrolled subjects were advice to follow their routine diet and life style.

G. Name of project: - "A Prospective Community Based Study for the evaluation of Punarnavadi Mandura in Anemia (Pandu) (IMR project under AMHCP-SCSP-2021-22):

Objectives-

Primary Objectives:

i. To examine the role of Ayurvedic formulation '*PunarnavadiMandura'* in Anaemia (Pandu)

Secondary Objectives:

i. To assess the change in disease specific symptoms.

ii. To evaluate the tolerability of Ayurvedic formulation '*PunarnavadiMandura'*

Inclusion criteria:

iii. Participants of scheduled Caste community of any gender in the age group 18 to 55 years.
iv. Hemoglobin index (Hb gm % ranging ≥8gm - ≤10gm.%)
v. Willing to provide informed written consent.

Exclusion criteria:

i. Recent history of blood loss from the gastro intestinal or other sources in the form of Haematemesis, Melena, Bleeding Piles, Hemoptysis, Menorrhagia, etc.
ii. History or evidence of intestinal mal-absorption
iii. History of Major co-morbidity/ serious chronic Renal/ Hepatic/ cardiac/ pulmonary diseases etc.
iv. Known / diagnosed case of any other type of anaemia (sickle cell disease, thalassemia, other hemolytic anemia, bone marrow failure, etc). [apparent by history, physical examination, and/or laboratory tests if required.]
v. Patients on prolonged (> 6 weeks) medication for any chronic disease that may have an influence on the outcome of the study
vi. Patient with diagnosis/ known history of Myelodysplastic syndromes, cancer etc.
vii. Patients already on iron supplements at present or during the last 3 months
viii. Pregnant women/ women who are planning for conception/lactating women
ix. Any current medical condition, which the investigator considers would put the subject at unacceptable risk or affect study compliance.

Diagnostic criteria:

Anemia documented by Hemoglobin index i.e. Hb gm% ranging 8gm-10gm. %

Outcomes measures:

Primary Outcomes

i. Mean Change in hemoglobin percentage from baseline.
[Time frame: at baseline, 8th and 12th week]

Secondary Outcomes:

i. Assessment of changes in disease specific symptoms. [Time frame: at baseline, 4th, 8th, 12th week and end of the 16th week]
ii. Tolerability assessed by proportion of recruited participants remaining in the trial intervention.
iii. Change in FACIT –Fatigue Scale.

Methodology:

Study Type	Single arm, Interventional, Multi centric , Prospective study
Control:	Non-Controlled
Timing:	Prospective
End Point:	Treatment, Tolerability
Number of groups:	One
Centers:	Multi-Centric (10 Centers of CCRAS) including this centre
Sample size:	**50**

Drug/Intervention:

Punarnavadi Mandura- AFI Part- I, 19:1; API, Part-II, Vol.III)
Dose: 500 mg Twice daily.
Dosage form: Tablet
Rout of Administration: Oral
Time of Administration: Twice daily just after food.
Packing form: Pack of 60 tabs.
Anupana: Water
Duration ofTherapy: 12 weeks

Milestone with deliverables:

Total Study Period: 9 months

Recruitment: 4 ½ months
Treatment Period: 12 weeks (84 days)
Follow-visits: every 4 weeks
Follow-Up without intervention**:** 4 weeks
Statistical **Analysis**: ½ months

Participating centre along with PI and CO-I :

S.No.	Name of the participating centre	Name of PI	Name of CoI
1.	M.S.Regional Ayurveda Research Institute, Jaipur	Dr.S.K.Vedi, R.O.(Ay.)	Dr. Kishor Gavali, R.O.(Ay.)

Date of IEC approval: Ref.No.F.5/Lab/Pre-iron/Ethics/2007-08 CRAI-JPR/1270 dated 16.07.2021

CTRI registration: CTRI/2021/07/034967 [Registered on: 19/07/2021]

Date of initiation: 12.10.2021

Date of completion: project is continued till 31st March, 2022 and shall be completed on 20.04.2022

Chronological timeline & deliverables: Project had been initiated on 12.10.2021 (Total duration of project was 9 months)

Summary and current status of the project:

This IMR clinical project was allotted by the council as a component of AMHCP(SCSP) 2021-22 and was initiated on 12.10.2021. This was a single arm, interventional, multi centric, prospective study. Under this project, total target to be covered was 50 subjects of anaemia (Pandu) diagnosed on the basis of level haemoglobin ≥ 8.0 gm to ≤ 10 gm. Drug intervention tablet of Punarnavadi Mandura (500mg) twice daily after food with water for 12 weeks (84 days) was given to the enrolled subjects and 28 days follow up without medication were performed. During the reporting period, total 500 numbers of subjects were screened for anemia, out of which 50 patients of anemia as per diagnostic criteria were enrolled; Till 31st March, 2022, 44 patients were completed in study. 01 patient was drop out. Presently 05 patients are continued for follow up visit of 112th day (without medication). The project is presently continued and shall be completed on dated 20.04.2022.

H. Name of project: A prophylactic community based study to assess the impact of Ayu Raksha Kit in COVID-19 (IMR project under SCSP-2021-22)

OBJECTIVES:

Primary objective

i) To assess the efficacy of Ayu Raksha Kit in preventing the incidence of COVID-19 like symptoms in scheduled castes predominant areas/villages across India

Secondary objectives:

1) To assess the efficacy of Ayu Raksha Kit in preventing the incidence of RT-PCR confirmed COVID-19 cases in a subset of population randomly selected from the study population.
2) To assess the effect of Ayu Raksha Kit on Hematological and Biochemical parameters of a subset of population randomly selected from the study population
3) To assess the effect of Ayu Raksha Kit on severity of upper respiratory symptoms if developed during the study period
4) To assess the effect of Ayu Raksha Kit on the clinical outcome of the participants developing COVID-19 like symptoms or COVID-19 illness diagnosed by RT-PCR, during the study period.
5) To assess the impact of Ayu Raksha Kit on the psychological distress as an impact of COVID-19 exposure, among the study population
6) To compare the incidence of Adverse Events in both the groups.

Outcome Measures:

Primary Outcomes Measures:

- Comparison of proportion of participants developing COVID-19 like symptoms in both the groups during the study period.[Number of participants with fever, cough, or other respiratory/systemic symptoms (including but not limited to fatigue, myalgias, arthralgias, shortness of breath, sore throat, headache, chills, coryza, nausea, vomiting, diarrhoea)]

Secondary Outcomes Measures:

1) Comparison of incidence of RT-PCR diagnosed cases in both the groups in a subset of population randomly selected from the study population. [RT-PCR test of the nasopharyngeal swab of the participants in the subset of population randomly selected from the study population will be done at the time of screening and as and when

participants report incidence of symptoms or at 30th day if they remain asymptomatic through-out the study period].

2) Any change in CBC (Hemoglobin, RBC count, TLC, DLC, Platelet count and Hematocrit), LFT (AST, ALT, ALP, Serum Bilirubin, Serum Albumin and Serum Globulin) and RFT (Serum Creatinine, Blood Urea, Serum Uric Acid, eGFR) at baseline and at the end of study period in a subset of population randomly selected from the study population.

3) Comparison of the severity of Respiratory symptoms if developed in both the groups through Wisconsin Upper Respiratory Symptoms Survey (WURSS-24) questionnaire. [Time frame: Daily- As soon as the participant reports of being symptomatic till they become asymptomatic or till 07 days whichever earlier.]

4) Comparison of the clinical outcome of the participants developing COVID-19 like symptoms in both the groups, during the study period as per WHO Clinical progression scale (10 point).

5) Any change in psychological distress as an impact of exposure to COVID-19 among participants of both the groups assessed by using Kessler Psychological Distress Scale (K10). [Time frame: Baseline and at 30th day]

6) Percentage of drug compliance

7) Proportion of participants exhibiting Adverse Events of any grade at 15th and 30th day in both the groups.

8) Occurrence of Treatment Emergent Adverse Events (TEAEs)

METHODOLOGY :

Study Type	Interventional
Purpose	Prophylaxis
Masking	Nil
Control	Controlled
Timing	Prospective
No. of Groups	Two
Sample Size	8316 (Intervention 7560 + Control 756) (Intervention 630 + Control 63 at each centre)
Sampling	Cluster Sampling
Randomisation	Out of 20 identified clusters, 10 will be randomly selected
Allocation Concealment	None
Blinding	None

Centers	**Multi-Centre (12 Institutes of CCRAS)**
Study Period (Duration of intervention)	**1 month**
Follow-ups	Biweekly for 4 weeks (daily if any Covid-19 like symptoms developed during the study)
Total Study duration	2 months

Study Groups:

- **Group-I (Intervention group):** Participants will receive ***Ayu Raksha Kit*** **as add on to the Standard preventive measures of COVID-19**. (Instructions to follow Hand hygiene and respiratory etiquettes; Soap for hand wash and masks will be provided to all the participants)

  Components of Ayu Raksha Kit (recommended by M/o AYUSH)

  1) Chyawanprash- 6 gm OD in the morning
  2) Ayush kwath - 3 gm boiled in 150 ml of water filtered and consume once a day
  3) Samshamani Vati - Two tabs (250 mg each) twice a day with normal water
  4) Anu taila - two drops in each nostril once a day

  The Ayu Raksha Kit will be procured from IMPCL, a GMP certified Ayurveda Pharmaceutical Company under M/o AYUSH, Govt. of India.

- **Group-II (control arm): Standard preventive measures of COVID-19** (Instructions to follow Hand hygiene and respiratory etiquettes; Soap for hand wash and masks will be provided to all the participants)

  Standard Preventive measures as per MOHFW, Govt of India guidelines

Participating centre along with PI and CO-I :

S.No.	Name of the participating centre	Name of PI	Name of CoI
1.	M.S.Regional Ayurveda Research Institute, Jaipur	Dr. S.K.Vedi, R.O.(Ay.)	Dr. Kishor Gavali, R.O.(Ay.)

- **Date of IEC approval**: Ref.No.F.5/Lab/pre-iron/Ethics/2007-08 CRAI-JPR/4117 dated 24.01.2022
- **CTRI registration**: CTRI/2022/02/040156 [Registered on: 10/02/2022]
- **Date of initiation: 15.02.2022**
- **Budget sanctioned**: Rs.3,88,520/- vide CCRAS Office No.1019/2021-22 (F.No.65-1/2021-CCRAS/Admn./SCSP) dated 28.01.2022

Installment wise release:

S. No.	Installment	Sanctioned order	Date	Date of receipt of fund
1.	1st	Council's letter F.No.65-1/2021-CCRAS/ Admn/ SCSP/5885	10.02.22	25-02-2022
2.	2nd	Council's letter F.No.65-1/2021-CCRAS/ Admn/ SCSP/6248	03.03.22	07.03.2022

Chronological timeline & deliverables: Project has been initiated on 24.11.2021 (Total duration of project is 2 years)

Summary and current status of the project:

This multicentre Clinical Research Project was allocated to institute as a component of Ayurveda Mobile Health Care programme (under SCSP) vide CCRAS E-mail dated 17.01.2022. Budget Rs.3,88,520/- was sanctioned to this institute vide CCRAS Office No.1019/2021-22 (F.No.65-1/2021-CCRAS/Admn./SCSP) dated 28.01.2022. IEC approval has been taken on 24.01.2022. CTRI registration is CTRI/2022/02/040156 [Registered on: 10/02/2022]. The Study was initiated on dated 15.02.2022.The target 693 population was to be covered under two groups [Gr-I-630 (Intervention) & Gr-II-63 (Control)]. In Group-I (Intervention), Ayu Raksha Kit (Chyawanprash 6 gm daily in morning, Ayush Kwath Churna (3gm) decoction made in 150 ml of water- once in a day, Samshamani Vati – 2 Tablets (250 mg) BD after food with normal water, two drops in each nostril once a day) was distributed to the enrolled 630 subject along with Soaps & Masks; while only Soaps & Masks were distributed to the 63 enrolled patients under group-II (Control group). Both the groups under study were instructed to follow Govt. standard guidelines for Covid-19 protection. The Study was completed on dated 22.03.2022

Relevant information, if any:

1. Name of the Institute/Unit : M.S.R.A.R.I., Jaipur
2. Name of Principal Investigator : Dr. S. K. Vedi, R.O. (Ay.)
3. Name of Co- Investigator : Dr. Kishor Gavali, R.O. (Ay.)

I. Name of Project:"A prospective community based study for the evaluation of RajapravartaniVati in the Management of Primary Dysmenorhoea" (IMR project under RCH-SCSP-2021-22):

OBJECTIVES:

Primary Objectives:

vii. To assess the role of RajahpravartiniVati in the subjective pain outcomes of Primary Dysmenorrhea.

Secondary Objectives:

i. To evaluate the tolerability of Ayurvedic formulation Rajatpravartini Vati in the management of Primary Dysmenorrhea.

OUTCOMES MEASURES:

Primary Outcomes

i. Change in Visual Analog Scale (VAS) for pain.

Secondary Outcomes

i. Change in disease specific symptoms by means of total WaLLID score.
ii. Change in Hb status of the subject from the baseline to the end of trial -12 weeks.
iii. Tolerability assessed by proportion of recruited participants remaining in the trial intervention, during the trial.

Use of Analgesic medication (dosage & frequency of medication used) [Time Frame: Assessed via questionnaire after every menstrual cycle]

STUDY DESIGN:

Study Type	Interventional
Purpose	Treatment
Masking	Open label
Control	Not controlled
Timing	Prospective
End Point	Treatment ,Tolerability
No. of Groups	Single
Sample size	50 at each centre (Total sample size:- 500)

TIMELINES:

Total Study period	9 months
Pre-trial preparation	1 months
Recruitment	4 ½ months
Treatment period	3 menstrual cycles
Follow up period	4 weeks
Statistical Analysis	15 days

INTERVENTIONS:

RajahpravartiniVati (Bhaishajyaratnavali, Strirogadhikar)(AFI – Part I, 12 :25)

Dose: 500mg twice daily

Dosage form: Tablet of 250 mg each

Route of Administration: Orally

Time of Administration: Before 07 days of the expected date of menstrual cycle and continued up to 03 days of the menstruation.

Anupana: Lukewarm Water

Duration of therapy: 3 Cycles with medicine and 1 cycle without medicine.

Participating centre along with PI and CO-I:

S.No.	Name of the participating centre	Name of PI	Name of CoI
1.	M.S.Regional Ayurveda Research Institute, Jaipur	Dr. Kishor Gavali , R.O.(Ay.)	Dr. S.K.Vedi, R.O.(Ay.)

Date of IEC approval: 16/07/2021
CTRI Registration/Reference (for clinical trials):
Date of initiation: 19.07.2021
Budget allocated: BudgetRs.30,32,000 was sanctioned vid Council's letter.F.No.74-11/2021-CCRAS/ Admn./ SCSP-RCH/ 1072 –A dated 11.06.2021

Installment wise release:

S. No.	Installment	Sanctioned order	Date	Date of receipt of fund
1.	1st	F.No.74-11/2021-CCRAS/ Admn./ SCSP-RCH/ 1073	11.06.2021	02-04-2020

2.	2nd	F.No.74-11/2021-CCRAS/ Admn./ SCSP-RCH/ 470	13.09.21	
3.	3rd	F.No.74-11/2021-CCRAS/ Admn./ SCSP-RCH/ 950	29.12.2021	
4.	4th	F.No.74-11/2021-CCRAS/ Admn./ SCSP-RCH/ 950	9.03.2022	14.03.22

Chronological timeline & deliverables: Project completed.

Summary and current status of the project:

This multicentre Research Project was allocated to institute as a component of Reproductive and Child Health programme (RCH) under Council's letter.F.No.74-11/2021-CCRAS/ Admn. / SCSP-RCH/ 1072 –A dated 11.06.2021. As per instructions of the council, proposal according to IMR format under CCRAS research policy, was submitted to Headquarters. Common budgetofRs.30,32,000 for RCH (SCSP) was sanctioned vid Council's letter.F.No.74-11/2021-CCRAS/ Admn. / SCSP-RCH/ 1072 –A dated 11.06.2021, out of which 1st installment was released by Headquarters of amount Rs.7,58,000/- on 11.06.21. IEC approval has been taken on 16.07.2021. CTRI registration was done by nodal centre RARI, Mandi. Order of the medicine has been placed in CCRAS Headquarters. The project has been completed with total enrollment and follow up of 50 participants.

Relevant information, if any:

1) Name of the Institute/Unit : M.S.R.A.R.I., Jaipur
2) Name of Principal Investigator : Dr. Kishor Gavali R.O. (Ay.)
3) Name of Co- Investigator : Dr. S. K. Vedi R.O. (Ay.)

J. NAME OF PROJECT:- Effectiveness of Ayurveda based diet and Lifestyle advocacy on health related Quality of life in Women's of schedule Caste population in India- a Community based, cluster randomized controlled study" (IMR project under RCH-SCSP-2021-22):

OBJECTIVES

Primary Objectives:

i. To assess the effectiveness of Ayurvedic diet and Lifestyle advocacy on Quality of Life among Women's of schedule Caste population

Secondary Objectives:

i. To assess the effectiveness of Ayurvedic diet and Lifestyle advocacy on Ayurvedic health assessment parameters.
ii. To evaluate acceptability and adherence to Ayurvedic diet and Lifestyle advocacy among Women's of schedule Caste population

OUTCOMES MEASURES:

Primary Outcomes

i. Change in Quality of Life assessed through WHO-QOL BREF

Secondary Outcomes

i. Change of health status assessed through Ayurveda Swasthya Assessment Scale (SAS).

STUDY DESIGN:

Study Type	**:** Interventional study
Study label	**:** Community
Purpose	**:** Survey
Masking	**:** Nil
Control	**:** Controlled
Timing	**:**Prospective
No. of Groups	**:** two (women age between, 18-65yrs)
Sample size	**:** 70 (35 in each group)

Sampling **:** Convenience sampling through medical camps

TIMELINES:

Total Study period	9 months
Pre-trial preparation	1 months
Recruitment	4 ½ months
Treatment period	3 Months
Follow up period	4 weeks
Statistical Analysis	15 days

INTERVENTIONS:

Ayurveda diet and lifestyle advocacies along with Anu Taila for 3 months in intervention group.

Participating centre along with PI and CO-I :

S.No.	Name of the participating centre	Name of PI	Name of CoI
1.	M.S.Regional Ayurveda Research Institute, Jaipur	Dr. Kishor Gavali , R.O.(Ay.)	Dr. S.K.Vedi, R.O.(Ay.)

- **Date of IEC approval**: 16/07/2021
- **CTRI Registration/Reference (for clinical trials)**: Applied by nodal centre vide Ref. No.-REF/2020/10/037389.
- **Date of initiation:** 19.07.2021
- **Budget allocated:** BudgetRs.30,32,000 was sanctioned vid Council's letter.F.No.74-11/2021-CCRAS/ Admn./ SCSP-RCH/ 1072 –A dated 11.06.2021

Installment wise release:

S. No.	Installment	Sanctioned order	Date	Date of receipt of fund
1.	1st	F.No.74-11/2021-CCRAS/ Admn./ SCSP-RCH/ 1073	11.06.2021	02-04-2020
2.	2nd	F.No.74-11/2021-CCRAS/ Admn./ SCSP-RCH/ 470	13.09.21	
3.	3rd	F.No.74-11/2021-CCRAS/ Admn./ SCSP-RCH/ 950	29.12.2021	

4.	4th	F.No.74-11/2021-CCRAS/ Admn./ SCSP-RCH/ 950	9.03.2022	14.03.22

Chronological timeline & deliverables: Project completed.

Summary and current status of the project:

This multicentre Research Project was allocated to institute as a component of Reproductive and Child Health programme (RCH) under Council's letter.F.No.74-11/2021-CCRAS/ Admn. / SCSP-RCH/ 1072 –A dated 11.06.2021. As per instructions of the council, proposal according to IMR format under CCRAS research policy, was submitted to Headquarters. Common budget for RCH (SCSP) ofRs.30,32,000 was sanctioned vid Council's letter.F.No.74-11/2021-CCRAS/ Admn. / SCSP-RCH/ 1072 –A dated 11.06.2021, out of which 1st installment was released by Headquarters of amount Rs.7,58,000/- on 11.06.21. IEC approval has been taken on 16.07.2021. CTRI registration was done by nodal centre RARI, Mandi. Order of the medicine has been placed in CCRAS Headquarters. The project has been completed with total enrollment and follow up of 70 participants (Both Groups).

Relevant information, if any:

1. Name of the Institute/Unit : M.S.R.A.R.I., Jaipur
2. Name of Principal Investigator : Dr. Kishor Gavali R.O. (Ay.)
3. Name of Co- Investigator : Dr. S. K. Vedi R.O. (Ay.)

K. Impact of Ayuraksha Kit in Covid-19- Community Based Prophylactic Study In Tribal population (IMR project THCRP under Tribal Sub-Plan-2021-22):

1. Objectives

- **Primary objective:** To assess the efficacy of AyuRaksha Kit in preventing the incidence of COVID-19 like symptoms amongtribal population across India
- **Secondary objectives**

i) To assess the effect of Ayuraksha Kit on severity of respiratory symptoms if developed during the study period

ii) To assess the impact of Ayuraksha Kit on the psychological distress as an impact of COVID-19 exposure, among the study population

iii) To compare the incidence of Severe Adverse Events among both groups

2. Study outcome measures:

- **Primary Outcome measures:** Comparison of proportion of participants developing COVID-19 like symptoms in both the groups during the study period. [Number of participants with fever, cough, or other respiratory/systemicsymptoms (including but not limited to fatigue, myalgias, arthralgias, shortness of breath, sore throat, headache, chills, coryza, nausea, vomiting, diarrhoea)]
- **Secondary Outcome Measure:**

i) Comparison of the severity of Respiratory symptoms if developed in both the groups throughWisconsin Upper Respiratory Symptoms Survey (WURSS-24) questionnaire. [Time frame:Daily- As soon as the participant reports of being symptomatic till they become asymptomaticor till 07 days whichever earlier.]

ii) Comparison of the clinical outcome of the participants developing COVID-19 like symptomsin both the groups, during the study period as per WHO Clinical progression scale (10point). 14 (Annexure 1)

iii) Any change in psychological distress as an impact of exposure to COVID-19 amongparticipants of both the groups assessed by using Kessler Psychological Distress Scale (K10). [Time frame: Baseline and at 30 th day].

iv) Percentage of drug compliance

v) Proportion of participants exhibiting Adverse Events of any grade at 15 th and 30 th day in bothgroups

vi) Occurrence of Treatment Emergent Adverse Events (TEAEs). : 2 months

3. Study design: Randomized controlled

4. Grouping :02

5. Sample Size: 2640 (**2400 -intervention group, 240-control group)**

6. Approval of IMR :IMR Annual action plan 2021-22

7. Target given by CCRAS head quarters: 2 months

8. Timelines:

Total Study Period: 2 months
Preparatory period: 15 days
Recruitment :1 month

Intervention Period: 1 months
Follow-Up Period: 1 month
Statistical Analysis :1 Month

- **Intervention (*AyuRaksha Kit* as add on to the Standard preventive measures of COVID-19.** **(**Instructions to follow Hand hygiene and respiratory etiquettes; Soap for hand wash, sanitizer and masks will be provided to all the participants)

Components of Ayuraksha Kit (recommended by M/o AYUSH)

Chyawanprash- 6 gm OD in the morning

Ayushkwath - 3 gm boiled in 150 ml of water filtered and consume once a day

SamshamaniVati - Two tabs (250 mg each) twice a day with normal water

Anutaila – Two drop in each nostril once a day

- **Participating centre along with PI:** MSRARI, Jaipur, Rajasthan; PI: Dr.V. B. kumawat R.O (Ay.), Co-I: Dr. Monika Kumari, R.O (Ay.)

9. IEC approval: Ref.F.5/Lab/Pre-iron/Ethics/2007-08 CRAI-JPR/4118, Date:24.01.22

10. CTRI registration No: REF/2022/01/051119

11. Date of initiation of the project16.02.2022

12. Budget allocated: Rs1638000/-

13. Chronological timeline &deliverables :-

S.No.	Time line	Achieved /Not achieved	Causes of deviation,if any
1.	1-2 months	Achieved	-

14. Current status of the study: COMPLETED

- **Summary of the Project:** This IMR project entitled **Impact of Ayuraksha Kit in Covid-19- Community Based Prophylactic Study In Tribal populatioL**" was allotted under IMR Annual action plan 2021-22. This is prospective **Randomized controlled Study** of a 2 groups of sample size 2640.The study aims to assess the efficacy of AyuRaksha Kit in preventing the incidence of COVID-19 like symptoms among tribal population across India. The total duration of the study was 2 months. The budget sanctioned for the project is Rs. 1638000/-.Total 2355 subjects have completer the study in group 1 where as 45 were dropouts, and 236 have completed the study in group 2 and 4 were dropout. The study has been completed.

15. Relevant information if any,

1) Name of the institute : MSRARI, Jaipur
2) Duration of the study : 2 monts
3) Name of the Principal Investigator : Dr. V. B. Kumawat R.O (Ay.)
4) Name of the Co Investigator : Dr. Monika Kumari R.O (Ay.)

L. Title: A prospective community based study for the evaluation of DhatriLoha in the Management of Anemia (Pandu) (IMR project THCRP under Tribal Sub-Plan-2021-22):

1. OBJECTIVES

- **Primary Objectives:** To examine the role of Ayurvedic formulation DhatriLauha in Anaemia (Pandu)
- **Secondary Objectives:**
  1. To assess the change in disease specific symptoms.
  2. To evaluate the tolerability of Ayurvedic formulation DhatriLauha

2. Study outcome measures:

- **Primary Outcome measures:** Mean Change in hemoglobin percentage from baseline.[Time frame: at baseline, 8th and 12th week]
- **Secondary Outcomes**
  i) Assessment of changes in disease specific symptoms. [Time frame: at baseline, 4th, 8th, 12th week and end of the 16th week]
  ii) Tolerability assessed by proportion of recruited participants remaining in the trial intervention.
  iii) Change in FACIT –Fatigue scale

3. Study design: Open labelled non controlled
4. Grouping :01
5. Sample Size: 35
6. Approval of IMR :IMR Annual action plan 2021-22
7. Target given by CCRAS head quarters: 12 months
8. Timelines:

Total Study Period	**:**	9 months
Preparatory Period (CRF, Medicine procurement etc.)	**:**	2 month
Recruitment	**:**	4 ½ months
Treatment Period	**:**	12 weeks (84 days)

Follow-Up: every 4 weeks [at the end 4th week, 8th week and 12th week]
Follow-Up without intervention: 4 weeks (i.e. at the end of 4th menstrual cycle)
Statistical Analysis : ½ months

9. Intervention

Dhatri Lauha - API, Part- I, 21:2 pg- 743-744

Dose: 500mg Twice daily.
Dosage form: Tablet
Rout of Administration: Oral

Time of Administration: Twice daily just after food.
Packing form: Pack of 60 tabs.
Anupana: Honey
Duration of Therapy: 12 weeks

10. Participating centre along with PI: MSRARI, Jaipur, Rajasthan; PI: Dr.V. B. Kumawat R.O (Ay.), Co-I: Dr. Monika Kumari, R.O (Ay.)

11. IEC approval: Ref.F.5/Lab/Pre-iron/Ethics/2007-08 CRAI-JPR/1271, Date:16.07.21
12. CTRI registration No: CTRI/2021/07/034767
13. Date of initiation of the project 09.10.2021
14. Budget allocated: Rs56,10,000/-
15. Chronological timeline &deliverables :-

S. No.	Time line	Achieved /Not achieved	Causes of deviation, if any
1.	1-2 months	Achieved	-
2.	3-12 months	Achieved	-
3.	12-24 months	-	-
4.	24-36 months	-	-

16. Current status of the study: COMPLETED

- **Summary of the Project:** This IMR project entitled **"A prospective community based study for the evaluation of DhatriLoha in the Management of Anemia (Pandu)"** was allotted under IMR Annual action plan 2021-22. This is prospective **Single arm, Interventional, Multi centric , Prospective study** of a one groups of sample size 35. The total duration of the study was 9 months. The budget sanctioned for the project is Rs. 56,10,000/-Total 35 subjects have completed the study. The study has been completed.

17. Relevant information if any,

1) Name of the institute : MSRARI, Jaipur
2) Duration of the study : 9 monts
3) Name of the Principal Investigator : Dr.V. B. Kumawat R.O (Ay.)
4) Name of the Co Investigator : Dr.Monika Kumari R.O (Ay.)

M. Name of the Project: "Effectiveness of Ayurveda based diet and Lifestyle advocacy on health related Quality of life in schedule Tribe population in India- a Community based, cluster randomized controlled study" (IMR project THCRP under Tribal Sub-Plan-2021-22):

1. **Objectives-**

Primary Objectives:

ii. To assess the effectiveness of Ayurvedic diet and Lifestyle advocacy on Quality of Life among schedule Tribe population.

2. **Secondary Objectives:**

i. To assess the effectiveness of Ayurvedic diet and Lifestyle advocacy on Ayurvedic health assessment parameters.

ii. To evaluate acceptability and adherence to Ayurvedic diet and Lifestyle advocacy among schedule Tribe population.

3. **Study outcome measures:**

Primary outcomes:

i. Change in Quality Of Life assessed through WHO-QOL BREF

Secondary outcomes:

i. Change of health status assessed through Ayurveda Swasthya Assessment Scale (SAS) **Study Design:** Cluster Randomized Parallel-Group Study

4. **Grouping :**02
5. **Sample Size: 70 in each centre (35 in each group)**
6. **Approval of IMR :**IMR Annual action plan 2021-22
7. **Target given by CCRAS head quarters:** 10 months
8. **Timelines:**

Total Study Period	**:** 10 months
Preparatory period	**:** 1 months
Recruitment	**:** 6 months
Intervention Period	**:** 12 week (84 days)
Follow-Up Period	**:** every 4 weeks, up to 12 weeks
Statistical Analysis	**:**1 Month

9. **Lifestyle intervention (Ayurveda lifestyle advocacy pakage):** Change in quality Of Life after adopting Ayurveda based Diet and Lifestyle advocacy.
10. **Participating centre along with PI:** MSRARI, Jaipur, Rajasthan; PI: Dr. V. B. Kumawat, R.O (Ay.), Co-I Dr. Monika Kumari, R.O (Ay.)
11. **IEC approval**:Ref.F.5/Lab/Pre-iron/Ethics/2007-08/CRAI-JPR/1271 Date:22/06/2021
12. **CTRI registration No**: CTRI/2021/07/034702

13. **Date of initiation of the project**: yet not initiated
14. **Budget allocated**: Rs 56,10,000/-
15. **Chronological timeline &deliverables :-**

S. No.	Time line	Achieved /Not achieved	Causes of deviation, if any
1.	1-2 months	Achieved	-
2.	3-12 months	Achieved	-
3.	12-24 months	-	-
4.	24-36 months	-	-

16. **Current status of the study:** Ethically approved
17. **Summary of the Project:** This IMR project entitled **"Effectiveness of Ayurveda based diet and Lifestyle advocacy on health related Quality of life in schedule Tribe population in India- a Community based, cluster randomized controlled study"** was allotted under IMR Annual action plan 2021-22. This is an cluster study **Open label, cluster randomized controlled Interventional study** of a 2 groups of sample size 70 in each center (35 in each group). The study aims to assess the impact of Ayurveda based lifestyle advocacy and practices on health of apparently healthy volunteers. The total duration of the study is 10 months. The budget sanctioned for the project is Rs. 56,10,000. The ethical approval for the study has been obtained on 22/06/2021. The CTRI of the the project has been done. Lab has been identified.CRF printing has been done. The recruitment of subjects has not been initiated.

18. **Relevant information if any**,

1)	Name of the institute	:	MSRARI, Jaipur
2)	Date of ethical approval of the study	:	22.06.2021
3)	Duration of the study	:	10 months
4)	Name of the Principal Investigator	:	Dr. V. B. Kumawat, R.O (Ay.)
5)	Name of the Co Investigator	:	Dr. Monika Kumari, R.O (Ay.)

N. Name of the Project: A prospective community based study for the evaluation of Yograj Guggulu, Ashwagandha Churna and Narayan Taila in Osteoarthritis Knee (Janugat Sandhivata) (IMR project THCRP under Tribal Sub-Plan-2021-22):

1. Objective:

- **Primary:** To assess the role of Ayurvedic formulations Yograj Guggulu, Ashwagandha Churna and Narayan Taila in the subjective outcomes of Osteoarthritis Knee (Sandhigat Vaat).

- **Secondary**:

(i) To assess the role of the intervention in disease specific symptoms.
(ii) To evaluate the tolerability of Ayurvedic formulation Yograj Guggulu, Ashwagandha Churna and Narayan Taila in the management of Osteoarthritis Knee.

2. Study outcome measures:

- **Primary outcome measure:** Changes in Western Ontario and McMaster University osteoarthritis (**WOMAC**) total score [**Time frame:** from base line to end of 4^{th}, 8^{th}, 12^{th} week, 16^{th} week] Indian WOMAC (Modified –CRD Pune Version)
- **Secondary outcome measure:**
    i) Change in the Visual Analogue Scale (VAS) for pain [Time **frame:** at baseline, 4th, 8th,12th week and end of the 16th week]
    ii) Assessment of changes in Ayurvedic disease specific symptoms of sandhi vata (sandhishula , Sandhishotha , Akunchana prasaranayoh vedana, **Stambha,** sandhisphutana) [Time **frame:** at baseline, 4^{th}, 8^{th}, 12^{th} week and end of the 16^{th} week]
    iii) Frequency of use of no. of NSAID / analgesic medication [Time frame: at baseline, 4th, 8th,12th week and end of the 16th week]
    iv) Change in WOMAC Pain, stiffness, physical activity score [Time frame: at baseline, 4th, 8th,12th week and end of the 16th week]
    v) Tolerability assessed by proportion of recruited participants remaining in the trial intervention, during the trial.

3. Study Design: Single arm, Interventional, Multi centric , Prospective study.
4. Grouping : One
5. Sample Size: i.e. 35 in each centre
6. Approval of IMR :IMR Annual action plan 2021-22
7. Target given by CCRAS head quarters: 9 Months
8. Timelines:

Total Study Period: 9 months
Preparatory period: 1 months
Recruitment : 4 ½ months
Intervention Period: 3 months
Follow-Up Period: 1 months
Statistical Analysis : ½ months

9. **Lifestyle intervention (Ayurveda lifestyle advocacy pakage): Dincharya ,ritucharya, sadvritta and aharavidhividhan**
10. **Participating centre along with PI:** MSRARI,Jaipur, Rajasthan: PI: Dr. V. B. Kumawat, R.O. (Ay.), Co-I: Dr.Monika Kumari, R.O (Ay.)
11. **IEC approval**:Ref.F.5/Lab/Pre-iron/Ethics/2007-08/CRAI-JPR/1271 Date:16/07/2021
12. **CTRI registration No**: REF/2021/07/044990
13. **Date of initiation of the project**: 09.10.2021
14. **Budget allocated**: Rs 56,10,000/-
15. **Chronological timeline &deliverables :-**

S.No.	Time line	Achieved /Not achieved	Causes of deviation,if any
1.	1-2 months	Achieved	-
2.	3-12 months	Achieved	-
3.	12-24 months	-	-
4.	24-36 months	-	-

16. **Current status of the study: Ethically approved**

17. **Summary of the Project:** This IMR project entitled **"A prospective community based study for the evaluation of Yograj Guggulu, Ashwagandha Churna and Narayan Taila in Osteoarthritis Knee (Janugat Sandhivata)"** was allotted under IMR Annual action plan 2021-22. This is an cluster study **Single arm, Interventional, Multi centric , Prospective study** of a One groups of sample size 35.The study aims to assess the impact of Ayurveda based lifestyle advocacy and practices on health of apparently healthy volunteers. The total duration of the study is 1 years. The budget sanctioned for the project is Rs. 56,10,000/-. The ethical approval for the study has been obtained on 22/06/2021. The CTRI of the the project has been done. Lab has been identified.CRF printing has been done.The recruitment of subjects has not been initiated.

18. **Relevant information if any**,

1) Name of the institute : MSRARI, Jaipur
2) Date of ethical approval of the study: 22.06.2021
3) Duration of the study : 9 Month
4) Name of the Principal Investigator : Dr. V. B. Kumawat, R.O (Ay.)
5) Name of the Co Investigator : Dr. Monika Kumari, R.O (Ay.)

O. PHARMACO -VIGILANCE PROGRAMME:

- Pharmaco-Vigilance Program for ASU Drugs: 2021-22
- Total no. of cases screened: 18602
- Total no. of cases reported ADRs: Nil

During the reporting year, total 110 umber of different medicines/ formulations of various manufacturersviz.IMPCL, IMPCOPS, NARIDD, KOLKATAwere prescribed to18602beneficiaries in clinical practice at institute. No any Adverse Drug Reaction (ADR) was come in to the notice.

5. LABORATORY: PATHOLOGY/BIO-CHEMISTRY/RADIOLOGY:

The Clinical Laboratory of the Institute is well equipped with modern equipments. All the investigations are on the basis of charges fixed by the Council except Research, BPL patients and concession to senior citizens. Emphasis is given for timely supply of investigation reports. The investigations are done in the laboratory keeping in view the Research Programme allotted to the Institute. The details of the investigation done during the reporting year 2021-22 are as under:

i) Clinical Laboratory

Annual Report Summary from 1st April, 2021 to 31st March, 2022

S.No.	Investigations	Total (Male)	Total (Female)	Grand Total
1	Pathological Investigations	**2525**	**3678**	**6203**
2	Biochemical Investigations	**2276**	**2543**	**4819**
3	Radiological Investigations	**35**	**29**	**64**
4	Other Investigations viz ECG, Ultra sound, Endoscopies etc.	-	-	-
Total		**4836**	**6250**	**11086**

a) Table showing No. of Investigations done

S.No.	Investigations	Total (Male)	Total (Female)	Grand Total
1	Pathological Investigations	1747	3111	**4858**
2	Biochemical Investigations	1448	1959	**3407**
3	Radiological Investigations	30	17	**47**
4	Other Investigations viz ECG, Ultra sound, Endoscopies etc.	-	-	-
Total		**3225**	**5087**	**8312**

b) PATHOLOGICAL INVESTIGATIONS REPORT (GENERAL O.P.D.)

S.No.	Type of Investigations	MALE	FEMALE	TOTAL
1	C.B.C	115	207	**322**
2	Hemoglobin	115	207	**322**
3	RBC	115	207	**322**
4	TLC	115	207	**322**
5	DLC	535	1027	**1562**
6	E.S.R.	115	207	**322**

7	Platelet count	115	207	**322**
8	M.P.	3	1	**4**
9	TEC/VEC	0	0	**0**
10	G.B.P.	0	0	**0**
11	B.T. / C.T.	3	1	**4**
12	Reticulocyte Count	0	0	**0**
13	PCV	115	207	**322**
14	MCV	115	207	**322**
15	MCHC	115	207	**322**
16	RH & ABO Grouping	3	5	**8**
17	Blood Sugar	100	130	**230**
18	Blood Urea	75	88	**163**
19	S. Creatinine	75	88	**163**
20	S.Uric Acid	75	88	**163**
21	S. Bilirubin Total	66	71	**137**
22	S. Bilirubin Direct	66	71	**137**
23	S. Bilirubin Indirect	66	71	**137**
24	S. Cholesterol	46	52	**98**
25	S. Triglycerides	46	52	**98**
26	S. LDL	46	52	**98**
27	S. HDL	46	52	**98**
28	VLDL	46	52	**98**
29	Alkaline Phosphates	66	71	**137**
30	Total Protein	66	71	**137**
31	Albumin	66	71	**137**
32	Globulin	66	71	**137**
33	A.G. Ratio	66	71	**137**
34	SGOT	61	71	**132**
35	SGPT	61	71	**132**
36	R.A. Factor	38	84	**122**
37	C.R.P.	37	81	**118**
38	ASO Titre	36	80	**116**
39	Widal	15	26	**41**
40	Mantoux Test	2	1	**3**
41	VDRL	0	0	**0**
42	Routine & Microscopic	28	35	**63**
43	Urine B.S./B.P.	28	35	**63**
44	Urine Sugar	28	35	**63**
45	Urine Albumin	28	35	**63**
46	Urobilinogen	28	35	**63**
47	Ketone bodies	28	35	**63**
48	Gravindex Test	0	4	**4**
49	Ova & Cyst	0	0	**0**
50	Occult Blood	0	0	**0**
51	Stool (Conc. Method)	0	0	**0**

52	For AFB	0	0	**0**
53	Sperm count/motility	0	0	**0**
54	Sickling	0	0	**0**
55	X-Ray.	30	17	**47**
56	T3	26	89	**115**
57	T4	26	89	**115**
58	TSH	26	89	**115**
59	FSH	0	11	**11**
60	LH	0	11	**11**
61	BHCG	0	0	**0**
62	PSA	1	0	**1**
63	Testosterone	2	1	**3**
64	Prolactine	0	8	**8**
65	HbA1C	27	21	**48**
66	S. Sodium	0	0	**0**
67	S. Potassium	0	0	**0**
68	S. Calcium	7	4	**11**
	Total Investigations	**3225**	**5087**	**8312**

a) Table showing No. of Investigations done

S.No.	Investigations	Total (Male)	Total (Female)	Grand Total
1	Pathological Investigations	708	355	**1063**
2	Biochemical Investigations	749	352	**1101**
3	Radiological Investigations	5	5	**10**
4	Other Investigations viz ECG, Ultra sound, Endoscopies etc.	-	-	-
Total		**1462**	**712**	**2174**

b) PATHOLOGICAL INVESTIGATIONS REPORT (GERATICS O.P.D.)

S.No.	Type of Investigations	MALE	FEMALE	TOTAL
1	C.B.C	43	25	**68**
2	Hemoglobin	43	25	**68**
3	RBC	43	25	**68**
4	TLC	43	25	**68**
5	DLC	198	118	**316**
6	E.S.R.	43	25	**68**
7	Platelet count	43	25	**68**
8	M.P.	2	0	**2**

9	TEC/VEC	0	0	**0**
10	G.B.P.	0	0	**0**
11	B.T. / C.T.	0	0	**0**
12	Reticulocyte Count	0	0	**0**
13	PCV	43	21	**64**
14	MCV	43	21	**64**
15	MCHC	43	21	**64**
16	RH & ABO Grouping	1	0	**1**
17	Blood Sugar	71	33	**104**
18	Blood Urea	38	21	**59**
19	S. Creatinine	38	21	**59**
20	S.Uric Acid	38	20	**58**
21	S. Bilirubin Total	31	12	**43**
22	S. Bilirubin Direct	31	12	**43**
23	S. Bilirubin Indirect	31	12	**43**
24	S. Cholesterol	25	10	**35**
25	S. Triglycerides	25	10	**35**
26	S. LDL	25	10	**35**
27	S. HDL	25	10	**35**
28	VLDL	25	10	**35**
29	Alkaline Phosphates	31	12	**43**
30	Total Protein	31	12	**43**
31	Albumin	31	12	**43**
32	Globulin	31	12	**43**
33	A.G. Ratio	31	12	**43**
34	SGOT	31	12	**43**
35	SGPT	31	12	**43**
36	R.A. Factor	24	14	**38**
37	C.R.P.	22	12	**34**
38	ASO Titre	22	13	**35**
39	Widal	4	2	**6**
40	Mantoux Test	0	1	**1**
41	VDRL	0	1	**1**
42	Routine & Microscopic	20	4	**24**
43	Urine B.S./B.P.	20	4	**24**
44	Urine Sugar	20	4	**24**
45	Urine Albumin	20	4	**24**
46	Urobilinogen	20	4	**24**
47	Ketone bodies	20	4	**24**

48	Gravindex Test	0	0	**0**
49	Ova & Cyst	0	0	**0**
50	Occult Blood	0	0	**0**
51	Stool (Conc. Method)	0	0	**0**
52	For AFB	0	0	**0**
53	Sperm count/motility	0	0	**0**
54	Sickling	0	0	**0**
55	X-Ray.	5	5	**10**
56	T3	11	11	**22**
57	T4	11	11	**22**
58	TSH	11	11	**22**
59	FSH	0	0	**0**
60	LH	0	0	**0**
61	BHCG	0	0	**0**
62	PSA	1	0	**1**
63	Testosterone	0	0	**0**
64	Prolactine	0	1	**1**
65	HbA1C	20	7	**27**
66	S. Sodium	0	0	**0**
67	S. Potassium	0	0	**0**
68	S. Calcium	3	3	**6**
	Total Investigations	**1462**	**712**	**2174**

a) Table showing No. of Investigations done

S.No.	Investigations	Total (Male)	Total (Female)	Grand Total
1	Pathological Investigations	42	138	**180**
2	Biochemical Investigations	59	184	**243**
3	Radiological Investigations	0	6	**6**
4	Other Investigations viz ECG, Ultra sound, Endoscopies etc.	-	-	-
Total		**101**	**328**	**429**

b) PATHOLOGICAL INVESTIGATIONS REPORT (GENERAL I.P.D.)

S.No.	Type of Investigations	MALE	FEMALE	TOTAL
1	C.B.C	3	10	**13**
2	Hemoglobin	3	10	**13**

3	RBC	3	10	**13**
4	TLC	3	10	**13**
5	DLC	15	35	**50**
6	E.S.R.	3	14	**17**
7	Platelet count	3	10	**13**
8	M.P.	0	0	**0**
9	TEC/VEC	0	0	**0**
10	G.B.P.	0	0	**0**
11	B.T. / C.T.	0	0	**0**
12	Reticulocyte Count	0	0	**0**
13	PCV	3	10	**13**
14	MCV	3	10	**13**
15	MCHC	3	10	**13**
16	RH & ABO Grouping	0	0	**0**
17	Blood Sugar	9	17	**26**
18	Blood Urea	3	8	**11**
19	S. Creatinine	3	8	**11**
20	S.Uric Acid	3	8	**11**
21	S. Bilirubin Total	2	8	**10**
22	S. Bilirubin Direct	2	8	**10**
23	S. Bilirubin Indirect	2	8	**10**
24	S. Cholesterol	1	7	**8**
25	S. Triglycerides	1	7	**8**
26	S. LDL	1	7	**8**
27	S. HDL	1	7	**8**
28	VLDL	1	7	**8**
29	Alkaline Phosphates	2	8	**10**
30	Total Protein	2	8	**10**
31	Albumin	2	8	**10**
32	Globulin	2	8	**10**
33	A.G. Ratio	2	8	**10**
34	SGOT	2	8	**10**
35	SGPT	2	8	**10**
36	R.A. Factor	4	6	**10**
37	C.R.P.	4	6	**10**
38	ASO Titre	4	6	**10**
39	Widal	1	0	**1**
40	Mantoux Test	0	0	**0**
41	VDRL	0	0	**0**
42	Routine & Microscopic	0	1	**1**
43	Urine B.S./B.P.	0	1	**1**
44	Urine Sugar	0	1	**1**
45	Urine Albumin	0	1	**1**
46	Urobilinogen	0	1	**1**
47	Ketone bodies	0	1	**1**
48	Gravindex Test	0	0	**0**
49	Ova & Cyst	0	1	**1**
50	Occult Blood	0	1	**1**

51	Stool (Conc. Method)	0	1	**1**
52	For AFB	0	0	**0**
53	Sperm count/motility	0	0	**0**
54	Sickling	0	0	**0**
55	X-Ray.	0	6	**6**
56	T3	0	2	**2**
57	T4	0	3	**3**
58	TSH	0	2	**2**
59	FSH	0	0	**0**
60	LH	0	0	**0**
61	BHCG	0	0	**0**
62	PSA	0	0	**0**
63	Testosterone	0	0	**0**
64	Prolactine	0	0	**0**
65	HbA1C	3	3	**6**
66	S. Sodium	0	0	**0**
67	S. Potassium	0	0	**0**
68	S. Calcium	0	0	**0**
	Total Investigations	**101**	**328**	**429**

a) Table showing No. of Investigations done

S.No.	Investigations	Total (Male)	Total (Female)	Grand Total
1	Pathological Investigations	28	74	**102**
2	Biochemical Investigations	20	48	**68**
3	Radiological Investigations	0	1	**1**
4	Other Investigations viz ECG, Ultra sound, Endoscopies etc.	-	-	-
	Total	**48**	**123**	**171**

b) PATHOLOGICAL INVESTIGATIONS REPORT (GERATICS I.P.D.)

S.No.	Type of Investigations	MALE	FEMALE	TOTAL
1	C.B.C	2	4	**6**
2	Hemoglobin	2	4	**6**
3	RBC	2	4	**6**
4	TLC	2	4	**6**
5	DLC	10	12	**22**
6	E.S.R.	2	12	**14**
7	Platelet count	2	4	**6**
8	M.P.	0	0	**0**
9	TEC/VEC	0	0	**0**
10	G.B.P.	0	0	**0**

11	B.T. / C.T.	0	0	**0**
12	Reticulocyte Count	0	0	**0**
13	PCV	2	4	**6**
14	MCV	2	4	**6**
15	MCHC	2	4	**6**
16	RH & ABO Grouping	0	0	**0**
17	Blood Sugar	1	3	**4**
18	Blood Urea	1	5	**6**
19	S. Creatinine	1	4	**5**
20	S.Uric Acid	1	4	**5**
21	S. Bilirubin Total	1	2	**3**
22	S. Bilirubin Direct	1	2	**3**
23	S. Bilirubin Indirect	1	2	**3**
24	S. Cholesterol	1	0	**1**
25	S. Triglycerides	1	0	**1**
26	S. LDL	1	0	**1**
27	S. HDL	1	0	**1**
28	VLDL	1	0	**1**
29	Alkaline Phosphates	1	2	**3**
30	Total Protein	1	2	**3**
31	Albumin	1	2	**3**
32	Globulin	1	2	**3**
33	A.G. Ratio	1	2	**3**
34	SGOT	1	2	**3**
35	SGPT	1	2	**3**
36	R.A. Factor	0	2	**2**
37	C.R.P.	1	2	**3**
38	ASO Titre	0	2	**2**
39	Widal	0	0	**0**
40	Mantoux Test	0	0	**0**
41	VDRL	0	0	**0**
42	Routine & Microscopic	0	3	**3**
43	Urine B.S./B.P.	0	3	**3**
44	Urine Sugar	0	3	**3**
45	Urine Albumin	0	3	**3**
46	Urobilinogen	0	3	**3**
47	Ketone bodies	0	3	**3**
48	Gravindex Test	0	0	**0**
49	Ova & Cyst	0	0	**0**
50	Occult Blood	0	0	**0**
51	Stool (Conc. Method)	0	0	**0**
52	For AFB	0	0	**0**

53	Sperm count/motility	0	0	**0**
54	Sickling	0	0	**0**
55	X-Ray.	0	1	**1**
56	T3	0	2	**2**
57	T4	0	2	**2**
58	TSH	0	2	**2**
59	FSH	0	0	**0**
60	LH	0	0	**0**
61	BHCG	0	0	**0**
62	PSA	0	0	**0**
63	Testosterone	0	0	**0**
64	Prolactine	0	0	**0**
65	HbA1C	0	0	**0**
66	S. Sodium	0	0	**0**
67	S. Potassium	0	0	**0**
68	S. Calcium	0	0	**0**
	Total Investigations	**48**	**123**	**171**

ii) Hospital Status: O.P.D. I.P.D (No of beds sanctioned):

OPD			IPD		No. of beds sanctioned
New	Old	**TOTAL**	Admitted	Discharged	
9353	6678	16031	11	-	20

iii) Pharmacy as per format given below: Nil

S.No.	Name of the Trial & general medicine	Quantity prepared	Quantity supplied to other Instt/ Centre/ Units of the Council.	Quantity used in own OPD/IPD etc.	Balance	Remarks
-	-	-	-	-	-	-
-	-	-	-	-	-	-

iv) Details of Medicines Purchased 2021-22:

S.No.	Name of thefirm	Cost of medicine	Amount paid	Bill pending, if any
1.	IMCOPS	2,34,821	2,34,821	Nil
2.	IMPCL	60,03,531	60,03,531	Nil
3.	OTHERS	14,707	14,707	Nil
TOTAL		**62,53,059**	**62,53,059**	

v) Condition of major equipments lying in the institute up to previous year:

S. No.	Name of equipment	Purpose for which it was purchased	Year of purchase	Condition of the equipment	Remark
1.	PanchkarmaEquipments	Development of Hospital facility	2014-15	Working	-
2.	Digital X-Ray Machine & Vertical Bucky Stand	----do----	2014-15	Working	-
3.	Computer Desktop, Printer & UPS	----do----	2014-15	Working	-
4.	ACs (Two Ton) & Stabilizer	----do----	2014-15	Working	-
5.	Water Purifier (R.O.)	----do----	2014-15	Working	-
6.	Hot Air Oven	Lab. Diagnostic	1993-94	Not Working	Not repairable
7.	Spectrophotometer	Lab. Diagnostic	1984-85	Not Working	Not repairable
8.	Tally Counter(TLC)	Lab. Diagnostic	1984-85	Not Working	Not repairable
9.	Blood Cell Counter(DLC)	Lab. Diagnostic	1985-86	Not Working	Not repairable
10.	Binocular Microscope	Lab. Diagnostic	1985-86	Not Working	Not repairable
11.	Monocular Microscope	Lab. Diagnostic	1972-73	Not Working	Not repairable

12.	Microscope LX-400 Labomed	Lab. Diagnostic	2011-12	Working	Not repairable
13.	Pointer eye Piece	Lab. Diagnostic	1998-99	Not Working	Not repairable
14.	Centrifuge Machine (4 tube)	Lab. Diagnostic	1983-84	Not Working	Not repairable
15.	Centrifuge Machine(8 tube)	Lab. Diagnostic	2002-03	Not Working	Not repairable
16.	Semi Auto Analyzer(RECL)	Lab. Diagnostic	2008-09	Not Working	Not repairable
17.	Polirimeter	Lab. Diagnostic	29/03/1973	Not Working	Not repairable
18.	Refctrometer (Abbe's)	Lab. Diagnostic	1972-73	Not Working	Not repairable
19.	Hair Dryer	Lab. Diagnostic	1973-74	Not Working	Not repairable
20.	TLC KIT	Lab. Diagnostic	1973-74	Not Working	Not repairable
21.	Needle Cutter(Electric)	Lab. Diagnostic	2002-03	Not Working	Not repairable
22.	Analytical Balance	Lab. Diagnostic	1972-73	Not Working	Not repairable
23.	Refrigerator(BPL)	Lab. Diagnostic	2002-03	Not Working	Not repairable
24.	Peak Flow Meter Digital	Lab. Diagnostic	2014-15	Not Working	Not repairable
25.	Fully Automated Biochemistry Analyzer (XL-200)	Lab. Diagnostic	2014-15	Working	-
26.	Hematology Analyzer (XL-100) Fully Automated-3 Part Differentiol	Lab. Diagnostic	2014-15	Working	-
27.	E.S.R. Analyzer	Lab. Diagnostic	2014-15	Working	-
28.	Protein Analyzer(Nephstar)	Lab. Diagnostic	2014-15	Working	-
29.	Urine Analyzer	Lab. Diagnostic	2014-15	Working	-
30.	Harmone analyzer(I-Choroma)	Lab. Diagnostic	2014-15	Working	-
31.	Incubator (Digital)	Lab. Diagnostic	2014-15	Working	-
32.	Centrifuge Machine(Digital)	Lab. Diagnostic	2014-15	Working	-
33.	Needle Destroyer(Electric)	Lab. Diagnostic	2014-15	Working	-
34.	Deep Freezer	Lab. Diagnostic	2014-15	Working	-
35.	LG Refrigerator	Lab. Diagnostic	2018-19	Working	-

vi) List of Panchakarmaequipments in the Institute:

S. No.	Name of the Equipment	Purpose for which it was purchased	Year of purchase	Cost of equipment (In Rs.)	Condition of the equipment	Remarks
1.	Steam Bath Cabinet (Laying	Development of	2014-15	59650.00	Working	

	type) -01	Hospital facility				
2.	Steam Bath Cabinet (Sitting type) -01	------do-----	2014-15	45650.00	Working	
3.	Steam Generator Fully Automatic (Electric) -02	------do-----	2014-15	103600.00	Working	
4.	ShirodharaYantra (Fully Automatic)- 02	------do-----	2014-15	97300.00	Working	
5.	Hi-low Tilt Steel Table WithDharapathy (Shirodhara type) -02	------do-----	2014-15	106100.00	Working	
6.	Soft Bed for Dharapathy -02	------do-----	2014-15	1800.00	Working	
7.	Abhyanga Table (Massage Table)- 02	------do-----	2014-15	68200.00	Working	
8.	BastiYantra -02	------do-----	2014-15	2100.00	Working	
9.	BastiYantra (Disposable Set) - 02	------do-----	2014-15	2544.00	Working	
10.	Vamanpeeth (Stainless Steel) -02	------do-----	2014-15	44900.00	Working	
11.	Nasyapeeth (Stainless steel with raisable leg support) --02	------do-----	2014-15	53000.00	Working	
12.	Virechana Chair (Stainless Steel) --02	------do-----	2014-15	39800.00	Working	
13.	Rectum steam chair --02	------do-----	2014-15	52950.00	Working	
14.	NadiswedanaYantra --02	------do-----	2014-15	44400.00	Working	
15.	Shirobasti Cap --02	------do-----	2014-15	4200.00	Working	
16.	Panchakarma Accessories --02	------do-----	2014-15	46500.00	Working	
17.	MatraBasti -08	------do-----	2014-15	4800.00	Working	
18.	Basti Tips -50	------do-----	2014-15	500.00	Working	
19.	Spine Bath with Groove --02	------do-----	2014-15	23150.00	Working	
20.	Hip Bath -01	------do-----	2014-15	6700.00	Working	
21.	Massage Stool -02	------do-----	2014-15	8350.00	Working	
22.	Kinetiser Heater with Flaturuli (Vessel) -02	------do-----	2014-15	29400.00	Working	
23.	Shalaka -02	------do-----	2014-15	2800.00	Working	
24.	Basti --02	------do-----	2014-15	6700.00	Working	

vii) List of equipments purchased during the reporting year 2021-22:

S.No.	Name of the Equipment	Purpose for which it was purchased	Year of purchase	Condition of the equipment	Remarks
1.	ERBA Both manual and automatic Automated Hematology Analyser (5 Part) (H 560 with 2 Year Warranty)	Lab. Diagnostic	2022	Working	-

6. TRIBAL HEALTH CARE RESEARCH PROGRAMME

Introduction

India is the second most populous country in the world with over 1.35 billion people, more than a sixth of the world's population. It is one of the world's oldest civilizations. The Indian culture, often labeled as an amalgamation of several various cultures, spans across the Indian subcontinent and has been influenced and shaped by a history that is several thousand years old. Since ancient times, the spiritual land of India has displayed varied hues of culture, religion, race, language, and so on. This variety in race, culture, religion, etc. accounts for the existence of different ethnic groups who, although, live within the sanctums of one single nation, profess different social habits and characteristics. Tribes constitute 8.61% of the total population of the country and cover about 15% of the country's area. The fact that tribal people need special attention can be observed from their low social, economic and participatory indicators. Whether it is maternal and child mortality, size of agricultural holdings or access to drinking water and electricity, tribal communities lag far behind the general population.

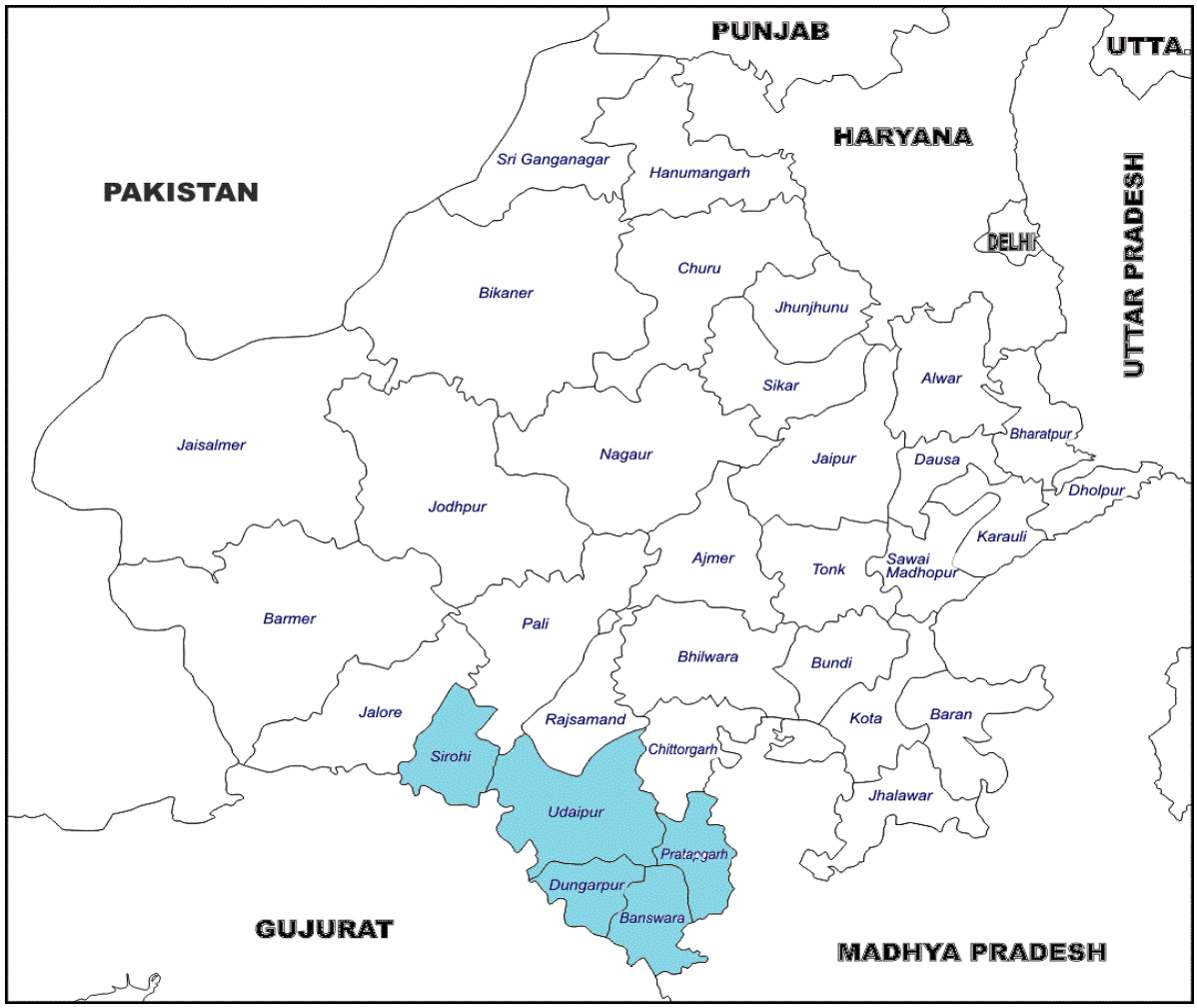
Tribal Health Care Research Programme was initiated by C.C.R.A.S. in 1982 and continued at 06 peripheral Institutes till 2013-14. Thereafter, this programme has been extended to 14 states through 14 peripheral Institutes in 2014-15 under Tribal Sub Plan(TSP).THCRP was initiated in the institute (**MSRARI, JAIPUR)** with effect from 29th November, 2014.The primary concern of this programme is to study the living conditions of tribal people and collect information related to health statistics. Tribal health care research programme also provides Ayurvedic treatment apart from the health awareness. This study highlights the salient features of the health survey, life style and socio-medical necessities of the tribal population.

Objectives of the project

The objectives of this programme are to provide affordable and accessible health care to the people in the hills forest, desert region and to make them participants in their health care by improving their social and developmental indicators.

Activities of THCRP:

- To study the living conditions of tribal people
- To collect information related to health statistics
- Study of dietetic habits
- Nature and frequency of prevalent diseases
- Use of common medicinal plants in the area
- To provide medical aid at their door steps
- Propagation of knowledge about Ayurvedic concept of Pathya-Apathya including hygiene habits and dietary practices
- Prevention of diseases by adopting healthy way of living and clean environment (Swachhata)
- To collect folk medicines/ traditional practices prevalent in the area



Tribal Districts covered in THCRP Project (Rajasthan)

Tribes in Rajasthan

Rajasthan tribes constitute around twelve percent of the total population of the state. The tribes of Rajasthan, India constitutes of mainly Bhils and the Minas. Infact, they were the original inhabitants of the area where Rajasthan stands now. Apart from these main tribes, there are also a number of smaller tribes in Rajasthan. However all Rajasthan tribes share certain common traits, the variations being in their costumes, jewellery, fair and festivals etc.

The main tribes and nomads of Rajasthan:

1. **Bhil**

   Around 39% of Rajasthan tribals comprises of Bhil. Dominating in the Banswara area of Rajasthan, the Bhil are believed to be fine archers. Infact, Bhil bowmen even found a reference in the great epics, Mahabharata and Ramayan. The Bhils were originally food gatherers. However, with the passage of time, they took up small-scale agriculture, city residence and employment. The major festivals of Bhils are Baneshwar fair (held near Dungarpur) and Holi.

2. **Mina**

   The second largest tribal group of Rajasthan is that of the Minas. The original inhabitants of the Indus Valley civilization, Minas have a tall, athletic build with sharp features, large eyes, thick lips and a light brown complexion. They are found dominating the regions of Shekhawati and eastern Rajasthan. Minas solemnize marriage in the younger years of the children.

3. **Gadiya Lohar**

   GadiyaLohar are wandering blacksmiths who are named after their attractive bullock carts called gadis. Initially a martial Rajput tribe, they left their homeland when Emperor Akbar ousted MaharanaPratap from Chittorgarh.

4. **Garasia**

   Garasia is a small Rajput tribe inhabiting Abu Road area of Southern Rajasthan.

5. **Sahariya**

   Sahariyas, the forest dwellers, are considered as the most backward tribe in Rajasthan. Believed to be of Bhil origin, they inhabit the areas of Kota, Dungarpur and Sawai Madhopur in the South-east of Rajasthan. Their main occupations include working as shifting cultivators, hunters and fishermen.

6. Damor

Belonging to the Dungarpur and Udaipur districts, Damor are mainly cultivators and manual laborers.

7. Rajasthan tribes include the following also:

Meo and Banjara (the traveling tribes)

Kathodi (found in Mewar region)

Rabari (cattle breeders, found in Marwar region)

Sansi

Kanjar

Highlights of the Current Study:

Total 81 villages within 05 tribal districts of Rajasthan were covered under current THCRP programme since inception up to March 2021. A total number of **62,813** populations has been covered. Out of the total population **21,720** patients of various diseases identified and treated through medical camps with follow-up by distributing free medicines. 98 Folklore Claims were collected.

During reporting year 2021-2022 Ten Villages have been covered in Peepalkhoot Block Pratapgarh Rajasthan. Total Population 5910 was covered out of 3101 patients were treated and 10 folklore claims were collected.

A. Statement of population covered since inception up to: 2021-2022

S. No.	Type of Programme	No. of villages Covered	Total population covered				No. of patients treated		
			SC	ST	Others	TOTAL	New	Old	TOTAL
1.	THCRP 2014-15	05	21	5730	75	5826	1009	34	1043
2.	THCRP 2015-16	22	50	10964	309	11323	2708	222	2930
3.	THCRP 2016-17	20	66	9657	352	10075	2581	248	2829
4.	THCRP 2017-18	09	00	7612	232	7844	1854	2273	4127
5.	THCRP 2018-19	03	00	7650	00	7650	2469	1523	3992
6.	THCRP 2019-20	07	00	7103	00	7103	1084	507	1591
7.	THCRP 2020-21	05	00	7082	00	7082	1279	828	2107
8.	THCRP 2021-22	10	00	5910	00	5910	2582	519	3101
TOTAL		**81**	**137**	**61708**	**968**	**62813**	**15566**	**6154**	**21720**

B. Statement of work carried out during 2014-15 of villages allocated and covered:

S. No.	Name of village	Distance from the Institute (In km)	No. of visits made	Population covered				No. of patients treated											
				SC	ST	Other	TOTAL	New				Follow-up				TOTAL			
								SC	ST	Others	TOTAL	SC	ST	Others	TOTAL	SC	ST	Others	TOTAL
1.	Jhol	40	02	06	740	75	821	-	156	14	170	-	02	01	03	-	158	15	173
2.	Bori	500	02	15	1613	-	1628	-	225	-	225	-	17	-	17	-	242	-	242
3.	Dhanakawara	500	02	-	1442	-	1442	-	243	-	243	-	14	-	14	-	257	-	257
4.	Amarpura	500	01	-	1252	-	1252	-	238	-	238	-	-	-	-	-	238	-	238
5.	Athamanakotra	500	01	-	683	-	683	-	133	-	133	-	-	-	-	-	133	-	133
TOTAL		**2040**	**08**	**21**	**5730**	**75**	**5826**	**-**	**995**	**14**	**1009**	**-**	**33**	**01**	**34**	**-**	**1028**	**15**	**1043**

C. Statement of work carried out during 2015-16 of villages allocated and covered:

S. No.	Name of village	Distance from the Institute (In km)	No. of visits made	Population covered				No. of patients treated											
				SC	ST	Others	TOTAL	New				Follow-up				TOTAL			
								SC	ST	Others	TOTAL	SC	ST	Others	TOTAL	SC	ST	Others	TOTAL
1.	Nevaphala	510	02	-	878	-	878	-	186	-	186	-	02	-	02	-	188	-	188
2.	Kesharpura	520	02	-	683	-	683	-	127	-	127	-	09	-	09	-	136	-	136
3.	Athamanakotra	500	01	-	-	-	-	-	15	-	15	-	02	-	02	-	17	-	17
4.	Amarpura	500	01	-	40	-	40	-	21	-	21	-	13	-	13	-	34	-	34
5.	Amba	530	02	-	517	-	517	-	29	03	32	-	03	-	03	-	32	03	35
6.	NichaliBor	510	02	-	511	-	511	-	92	-	92	-	02	-	02	-	94	-	94
7.	Padala	550	02	-	1179	32	1211	-	241	01	242	-	48	-	48	-	289	01	290
8.	Kushalpura	520	02	-	317	253	570	-	88	71	159	-	04	03	07	-	92	74	166
9.	Rada	510	02	-	583	-	583	-	112	-	112	-	-	-	-	-	112	-	112
10.	Chotila	510	02	-	671	-	671	-	177	-	177	-	-	-	-	-	177	-	177
11.	Amlikakhera	530	02	42	529	-	571	06	199	-	205	-	03	-	03	06	202	-	208
12.	Forest Chotila	510	02	-	345	-	345	-	94	-	94	-	13	-	13	-	107	-	107
13.	Ajanda	580	02	-	519	-	519	-	211	-	211	-	15	-	15	-	226	-	226

14.	Bamariya	520	02	-	627	04	631	-	88	03	91	-	10	-	10	-	98	03	101
15.	Jeevatala	580	02	-	583	20	603	-	202	09	211	-	26	01	27	-	228	10	238
16.	Ranora	530	02	-	509	-	509	-	100	-	100	-	12	-	12	-	112	-	112
17.	Gamet	535	02	08	413	-	421	02	108	-	110	01	11	-	12	03	119	-	122
18.	Buja	540	02	-	568	-	568	-	115	-	115	-	08	-	08	-	123	-	123
19.	Ghaskhera	520	02	-	302	-	302	-	91	-	91	-	19	-	19	-	110	-	110
20.	Buyela	570	02	-	469	-	469	-	122	-	122	-	17	-	17	-	139	-	139
21.	Bagerihareg	580	01	-	456	-	456	-	90	-	90	-	-	-	-	-	90	-	90
22.	Satora	570	01	-	265	-	265	-	105	-	105	-	-	-	-	-	105	-	105
TOTAL		**11725**	**40**	**50**	**10964**	**309**	**11323**	**08**	**2613**	**87**	**2708**	**01**	**217**	**04**	**222**	**09**	**2830**	**91**	**2930**

D. Statement of work carried out during 2016-17 of villages allocated and covered:

S. No.	Name of village	Distance from the Institute (In km)	No. of visits made	Population covered				No. of patients treated											
								New				Follow-up				TOTAL			
				SC	ST	Others	TOTAL	SC	ST	Others	TOTAL	SC	ST	Other	TOTAL	SC	ST	Others	TOTAL
1.	Phati Khan	540	02	-	466	78	544	-	89	05	94	-	03	-	03	-	92	05	97
2.	Bagerihareg (F)	544	01	-	-	-	-	-	25	-	25	-	08	-	08	-	33	-	33
3.	Baron kaSher	571	02	-	542	-	542	-	169	-	169	-	05	-	05	-	174	-	174
4.	Satora (F)	500	01	-	-	-	-	-	10	-	10	-	17	-	17	-	27	-	27
5.	HingoniyaGara	535	02	09	335	166	510	02	91	46	139	-	04	04	08	02	95	50	147
6.	BhojatPhala	557	02	04	404	-	408	01	72	-	73	-	10	-	10	01	82	-	83
7.	Barliya	538	02	-	494	14	508	-	147	05	152	-	04	01	05	-	151	06	157
	¤ Khumanpura	568	02	-	422	-	422	-	86	-	86	-	07	-	07	-	93	-	93
8.	Amarpura	547	02	13	267	23	303	-	119	10	129	-	09	-	09	-	128	10	138
9.	BhehanBeri	563	02	-	505	-	505	-	125	-	125	-	13	-	13	-	138	-	138
10.	Devlia	536	02	26	585	34	645	09	171	11	191	03	15	01	19	12	186	12	210
11.	Kakradara	555	02	-	628	-	628	-	87	-	87	-	4	-	04	-	91	-	91
12.	Adarsh Nagar	546	02	-	566	-	566	-	190	-	190	-	10	-	10	-	200	-	200
13.	Sindwai	565	02	-	434	04	438	-	82	01	83	-	08	-	08	-	90	01	91
14.	Goradi	546	02	14	590	06	610	06	182	02	190	-	21	-	21	06	203	02	211
15.	Detko ka Vela	548	02	-	545	-	545	-	154	-	154	-	34	-	34	-	188	-	188
16.	NarelaPada	545	02	-	211	-	211	-	124	-	124	-	29	-	29	-	153	-	153

17.	Patdi	567	02	-	534	-	534	-	96	-	96	-	11	-	11	-	107	-	107
18.	Kodiyat	430	02	-	679	27	706	-	112	-	121	-	4	-	04	-	116	-	125
19.	Himmatpura	560	02	-	340	-	340	-	149	-	149	-	15	-	15	-	164	-	164
20.	Aadiseri	483	02	-	255	-	255	-	88	-	88	-	08	-	08	-	96	-	96
21.	Chak Maudi	557	01	-	855	-	855	-	106	-	106	-	-	-	-	-	106	-	106
TOTAL		**11901**	**41**	**66**	**9657**	**352**	**10075**	**18**	**2474**	**89**	**2581**	**3**	**239**	**6**	**248**	**21**	**2713**	**95**	**2829**

E. Statement of work carried out during 2017-18 of villages allocated and covered:

S. No.	Name of village	Distance from the Institute (In km)	No. of visits made	Population covered				No. of patients treated											
								New				Follow-up				TOTAL			
				SC	ST	Others	TOTAL	SC	ST	Others	TOTAL	SC	ST	Other	TOTAL	SC	ST	Others	TOTAL
1.	Dhodhara	605	18	0	849	227	1076	0	146	76	222	0	78	58	136	0	224	134	358
2.	Gelan	605	18	0	1602	0	1602	0	282	0	282	0	193	0	193	0	475	0	475
3.	Patthar Bol	610	17	0	1103	0	1103	0	280	0	280	0	192	0	192	0	472	0	472
4.	Makda Falan	609	17	0	945	0	945	0	221	0	221	0	231	0	231	0	452	0	452
5.	Metwala	611	17	0	470	0	470	0	164	0	164	0	139	0	139	0	303	0	303
6.	Kopa	605	11	0	520	0	520	0	154	0	154	0	347	0	347	0	501	0	501
7.	Bhandara	607	11	0	937	0	937	0	220	0	220	0	268	0	268	0	488	0	488
8.	Holi Falan	610	11	0	685	5	690	0	185	2	187	0	441	9	450	0	626	11	637
9.	Aamediya Falan	611	11	0	501	0	501	0	124	0	124	0	317	0	317	0	441	0	441
TOTAL		**5473**	**131**	**0**	**7612**	**232**	**7844**	**0**	**1776**	**78**	**1854**	**0**	**2206**	**67**	**2273**	**0**	**3982**	**145**	**4127**

F. Statement of work carried out during the reporting year 2018-19: Statement of villages allocated and covered

Name of the Institute	Name of Block	Name of Villages Covered	Total Days of tour	Population Covered				Patients Treated									No. of LHTs/Folk Claim documented
								New				Old				Grand Total	
				SC	ST	Others	Total	SC	ST	Others	Total	SC	ST	Others	Total		
MSRARI, Jaipur	Bagidora (Banswara)	Ummedgarhi	83 Days	-	3646	-	3646	-	1101	-	1101	-	609	-	609	1710	08
		Sogapura	96 Days	-	2940	-	2940	-	1001	-	1001	-	898	-	898	1899	07
		Pindarama	21 Days	-	1064	-	1064	-	367	-	367	-	16	-	16	383	-
Total			**200 Days**	**-**	**7650**	**-**	**7650**	**-**	**2469**	**-**	**2469**	**-**	**1523**	**-**	**1523**	**3992**	**15**

G. Statement of work carried out during the reporting year 2019-2020: Statement of villages allocated and covered

Name of the Institute	Name of Block	Name of Villages Covered	Total Days of tour	Population Covered				Patients Treated									No. of LHTs/Folk Claim documented
								New				Old				Grand Total	
				SC	ST	Others	Total	SC	ST	Others	Total	SC	ST	Others	Total		
MSRARI, Jaipur	Bagidora (Banswara)	BHOYAN	13	-	337	-	337	-	100	-	100	-	22	-	22	122	-
		NAYA PADARIYA	20	-	844	-	844	-	169	-	169	-	39	-	39	208	01
		CHIROLA BADA	27	-	952	-	952	-	217	-	217	-	63	-	63	280	02
		HAMEERAPURA BADA	27	-	1028	-	1028	-	227	-	227	-	68	-	68	295	11
		GHATIGADA	24	-	1657	-	1657	-	166	-	166	-	162	-	162	328	01
		KUNDI	22	-	1217	-	1217	-	109	-	109	-	87	-	87	196	-
		JHAMBURI	14	-	1068	-	1068	-	96	-	96	-	66	-	66	162	-
Total			**147**		**7103**		**7103**		**1084**		**1084**		**507**		**507**	**1591**	**15**

H. Statement of work carried out during the reporting year 2020-2021: Statement of villages allocated and covered

Name of the Institute	Name of Block	Name of Villages Covered	Total Days of tour	Population Covered				Patients Treated								Grand Total	No. of LHTs/Folk Claim documented
								New				Old					
				SC	ST	Others	Total	SC	ST	Others	Total	SC	ST	Others	Total		
MSRARI, Jaipur	Peepalkhoot (Pratapgarh, Rajasthan)	KACHOTIYA	47	-	1792	-	1792	-	357	-	357	-	233	-	233	590	14
		SUHAGPURA	41	-	1446	-	1446	-	336	-	336	-	261	-	261	597	-
		PADALIYA	26	-	1279	-	1279	-	262	-	262	-	196	-	196	458	1
		VEERPUR	27	-	1973	-	1973	-	227	-	227	-	109	-	109	336	-
		PATELIYA	10	-	592	-	592	-	97	-	97	-	29	-	29	126	-
Total			**151**		**7082**		**7082**		**1279**		**1279**		**828**		**828**	**2107**	**15**

I. Statement of work carried out during the reporting year 2020-2021: Statement of villages allocated and covered

Name of the Institute	Name of Block	Name of Villages Covered	Total Days of tour	Population Covered				Patients Treated									No. of LHTs/Folk Claim docum Ented
								New				Old				Grand Total	
				SC	ST	Others	Total	SC	ST	Others	Total	SC	ST	Others	Total		
M.S. R.A.R.I. Jaipur	Peepalkhoot (Pratapgarh, Rajasthan)	RATANPURIYA	14	-	594	-	594	-	322	05	327	-	50	-	50	377	-
		PIPALIYA ABAD	13	-	555	-	555	-	213	-	213	-	64	-	64	277	02
		SODALPUR	15	-	715	-	715	-	296	17	313	-	83	01	84	397	-
		MOTA MAHENJA	15	-	774	-	774	-	321	-	321	-	70	-	70	391	06
		MOTA DHAMANIYA	11	-	642	-	642	-	217	32	249	-	32	-	32	281	-
		MOTI KHERI	10	-	582	-	582	-	234	-	234	-	39	-	39	273	-
		SEMALIYA	12	-	654	-	654	-	242	19	261	-	34	-	34	295	-
		DETEEYAR	11	-	486	-	486	-	201	-	201	-	43	-	43	244	-
		GHANTALI	11	-	461	-	461	-	232	02	234	-	45	-	45	279	-
		RAMPURIYA	11	-	447	-	447	-	229	-	229	-	58	-	58	287	-
Total			**123**	**-**	**5910**	**-**	**5910**	**-**	**2507**	**75**	**2582**	**-**	**518**	**01**	**519**	**3101**	**08**

CENTRAL COUNCIL FOR RESEARCH IN AYURVEDIC SCIENCES

Status of Programme during the ANNUAL REPORT 2021 - 2022 (Format A to F)

Name of Institute: MSRARI JAIPUR

Format: A- Population Served Status of "Tribal Health care Research Programme" under TSP

S. No.	Name of Village/ Area	No. of Tours	Population Served						Total			Grand Total
			ST		SC		Others					
			M	F	M	F	M	F	ST	SC	Others	
1.	Ratanpuriya (Pratapgarh)	14 Tour	303	291	-	-	-	-	594	-	-	594
2	Pipaliya Abad (Pratapgarh)	13 Tour	290	265	-	-	-	-	555	-	-	555
3.	Sodalpur (Pratapgarh)	15 Tour	374	341	-	-	-	-	715	-	-	715
4.	Mota Mahenja (Pratapgarh)	15 Tour	400	374	-	-	-	-	774	-	-	774
5.	Mota Dhamaniya (Pratapgarh)	11 Tour	344	298	-	-	-	-	642	-	-	642
6.	Moti Kheri (Pratapgarh)	10 Tour	303	279	-	-	-	-	582	-	-	582
7.	Semaliya (Pratapgarh)	12 Tour	328	326	-	-	-	-	654	-	-	654
8.	Deteeyar (Pratapgarh)	11 Tour	258	228	-	-	-	-	486	-	-	486
9.	Ghantali (Pratapgarh)	11 Tour	250	211	-	-	-	-	461	-	-	461
10.	Rampuriya (Pratapgarh)	11 Tour	243	204	-	-	-	-	447	-	-	447
	Total	123 Tour	**3093**	**2817**	**-**	**-**	**-**	**-**	**5910**	**-**	**-**	**5910**

Format: B- Patients treated Status of "Tribal Health care Research Programme" under TSP

S. No.	Name of Village/ Area	Patients treated																						
		New						Follow up						Total								Total		Grand Total
		ST		SC		Others		ST		SC		Others		ST			SC			Others				
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total	M	F	Total	M	F	Total	M	F	
1.	Ratanpuriya (Pratapgarh)	157	165	-	-	04	01	20	30	-	-	-	-	177	195	372	-	-	-	04	01	05	181	196	**377**
2.	Pipaliya Abad (Pratapgarh)	128	85	-	-	-	-	38	26	-	-	-	-	166	111	277	-	-	-	-	-	-	166	111	**277**
3.	Sodalpur (Pratapgarh)	165	131	-	-	08	09	50	33	-	-	01	-	215	164	379	-	-	-	09	09	18	224	173	**397**
4.	Mota Mahenja (Pratapgarh)	138	183	-	-	-	-	27	43	-	-	-	-	165	226	391	-	-	-	-	-	-	165	226	**391**
5.	Mota Dhamaniya (Pratapgarh)	121	96	-	-	16	16	18	14	-	-	-	-	139	110	249	-	-	-	16	16	32	155	126	**281**
6.	Moti Kheri (Pratapgarh)	135	99	-	-	-	-	23	16	-	-	-	-	158	115	273	-	-	-	-	-	-	158	115	**273**
7.	Semaliya (Pratapgarh)	125	117	-	-	10	09	17	17	-	-	-	-	142	134	276	-	-	-	10	09	19	152	143	**295**
8.	Deteeyar (Pratapgarh)	123	78	-	-	-	-	24	19	-	-	-	-	147	97	244	-	-	-	-	-	-	147	97	**244**
9.	Ghantali (Pratapgarh)	127	105	-	-	00	02	22	23	-	-	-	-	149	128	277	-	-	-	00	02	02	149	130	**279**
10.	Rampuriya (Pratapgarh)	129	100	-	-	-	-	34	24	-	-	-	-	163	124	287	-	-	-	-	-	-	163	124	**287**
	Total	**1348**	**1159**	**-**	**-**	**38**	**37**	**273**	**245**	**-**	**-**	**01**	**-**	**1621**	**1404**	**3025**	**-**	**-**	**-**	**39**	**37**	**76**	**1660**	1441	**3101**

Format: C- Lab Investigations

S. No.	Name of Village/ Area	CBC	HB%	Blood-sugar	Urine	Stool	Any other	Total
1.	Ratanpuriya	-	156	83	-	-	-	239
2.	Pipaliya Abad	-	61	44	-	-	-	105
3.	Sodalpur	-	169	137	-	-	-	306
4.	Mota Mahenja	-	244	226	-	-	-	470
5.	Mota Dhamaniya	-	136	201	-	-	-	337
6.	Moti Kheri	-	70	111	-	-	-	181
7.	Semaliya	-	190	185	-	-	-	375
8.	Deteeyar	-	76	46	-	-	-	122
9.	Ghantali	-	104	65	-	-	-	169
10.	Rampuriya	-	94	49	-	-	-	143
Total		-	1300	1147	-	-	-	**2447**

STUDY AT A GLANCE: REPORT 2021-2022

S. No.	Particulars	Consolidated data of the study
1.	Durations of the study	One Year
2.	Villages covered	10
3.	Visits made	123
4.	ST Population covered	5910
5.	No. of patients treated	3101
6.	No. of ST patients treated	3025
7.	No. of Other patients treated	76
8.	No. of ST Adults treated	2542
9.	No. of ST Children treated	483
10.	No. of Other Adults treated	66
11.	No. of Other Children treated	10
12.	No. of Investigations (Hb& B.Sugar)	2447

I. Statement of investigations carried out during the reporting year 2021-2022:

S. No.	Investigations carried out	
	Type of investigations	No. of investigations carried out
1.	Blood (Hemoglobin)	1300
2.	Urine	-
3.	Stool	-
4.	Blood sugar	1147
5.	Others (Specify)	-

II. No. of patients from Maximum to Minimum during the reporting year 2021-2022

S. No.	Disease	No. of patients
1.	सन्धिवातः AAE-16	311
2.	कासः EA-3	306
3.	अम्लपित्तम् EB-4	214
4.	कुष्ठम् ED-4	201
5.	दौर्बल्यम् MD-11	195
6.	त्रिकग्रह/ कटिशूल AAB-80	146
7.	ज्वरः EC-3	138
8.	कण्डूः ED-2.2	134
9.	दद्रु-कुष्ठः ED-4.3.6	126
10.	शिरःशूल / शिरोरुक् F	113
11.	शूलः EB-10	111
12.	श्वासः EA-4	106
13.	पाण्डुरोगः EC-5	75
14.	मधुमेहः EF-2.4.4	71
15.	प्रतिश्यायः /पीनसः I-1	68
16.	अर्शः EE-3	55
17.	मूत्रकृच्छ्रम् EJ-4	52
18.	व्रणः K	50
19.	अग्निमान्द्यम् ACB-23	47
20.	भ्रमः EM-11	44
21.	पिडका EF-4	42
22.	रक्तप्रदरः/असृग्दरः EL-4	33
23.	विबन्ध AAC-12.4	32
24.	मुखपाकः GG	28
25.	ग्रन्थिः EE-4	26
26.	श्वेतप्रदरः EL-5	26
27.	परिणामशूलः EB-10.10	25
28.	दन्तरोगः GC	21
29.	अजीर्णम् EB-3	18
30.	उरःक्षतः / क्षतक्षीण EA-6	18
31.	अतिसारः EB-2	16

32.	गृध्रसीAAC-20	15
33.	कर्णपाकः J-10	14
34.	कर्णरोगः J	13
35.	श्वयथुः/शोथः/शोफः EK-3	13
36.	युवानपिडका (मुखदूषिका)O-35	12
37.	हृद्रोगः EC-2	12
38.	अक्षिरोगः/नेत्ररोगः H	11
39.	दाहः ABB-24	11
40.	अश्मरीEJ-2	10
41.	श्वित्रः ED-5	10
42.	आर्तवक्षयः BA-3.1	9
43.	कृमिः/सङ्घातकृमिN	9
44.	भगन्दरः ED-16	8
45.	अभिघातः L	7
46.	कर्णशूलः J-20	7
47.	आध्मानम्/ आनाहः AAC-12	6
48.	दन्तमूलरोगः GB	5
49.	वातव्याधिः AA	5
50.	विश्वाचीAAC-35	5
51.	आमवातः EC-6	4
52.	कामलाED-3	4
53.	ग्रहणीदोषः EB-7	4
54.	अर्धावभेदकः F-8	3
55.	अवबाहुकः AAC-8	3
56.	ऊरुस्तम्भः AAC-9	3
57.	परिकर्तिकाEB-12	3
58.	बाधिर्यम्J-19	3
59.	स्तन्यक्षयः BA-4.1	3
60.	स्वरभेदः EA-5	3
61.	उदर्दः ED-15	2
62.	उन्मादः EM-2	2
63.	कण्ठरोगः GF	2
64.	कदरः O-14	2

65.	गुल्मःEB-8	2
66.	छर्दिःEB-6	2
67.	पक्षाघातः/पक्षवधःAAC-24	2
68.	पार्श्वशूलःEB-10.15	2
69.	मन्यास्तम्भःAAC-32	2
70.	मेदोरोगःEF-3	2
71.	रक्तपित्तम्ED-7	2
72.	शीतपित्तम्ED-14	2
73.	हृदयशूलःEB-10.14	2
74.	अन्नद्रवशूलःEB-10.11	1
75.	निद्रानाशः / अनिद्राED-2.8	1
76.	पालित्यABB-26	1
77.	प्रवाहिकाEB-9	1
78.	बद्धगुदोदरःEK-4.7	1
79.	मूत्राघातःEJ-3	1
80.	योनि-अर्शःEL-2.28	1
81.	वन्ध्याEL-2.24	1
82.	वातरक्तम्ED-8	1
83.	विपादिकाED-4.3.4	1
84.	विषमज्वरःEC-3.10	1
85.	शिरोग्रहःAAC-37	1
TOTAL		**3101**

III. Disease wise and Sex wise classification of patients during the reporting year 2021-2022:

S.NO.	NAMC CODE	Disease	No. of Patients Treated														Grand Total (M+F)
			New						Follow up						Total		
			Adult		Child		Total		Adult		Child		Total				
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	
1.	H	अक्षिरोगः/नेत्ररोगः	03	05	01	01	04	06	00	01	00	00	00	01	04	07	**11**
2.	ACB-23	अग्निमान्द्यम्	19	16	02	00	21	16	07	03	00	00	07	03	28	19	**47**
3.	EB-3	अजीर्णम्	09	04	01	01	10	05	01	02	00	00	01	02	11	07	**18**
4.	EB-2	अतिसार	04	07	02	03	06	10	00	00	00	00	00	00	06	10	**16**
5.	EB-10.11	अन्नद्रवशूल	01	00	00	00	01	00	00	00	00	00	00	00	01	00	**01**
6.	L	अभिघात	03	01	01	00	04	01	02	00	00	00	02	00	06	01	**07**
7.	EB-4	अम्लपित्तम्	85	71	09	05	94	76	20	19	03	02	23	21	117	97	**214**
8.	F-8	अर्धावभेदक	02	00	00	00	02	00	01	00	00	00	01	00	03	00	**03**
9.	EE-3	अर्श	33	08	01	00	34	08	11	02	00	00	11	02	45	10	**55**
10.	AAC-8	अवबाहुक	01	02	00	00	01	02	00	00	00	00	00	00	01	02	**03**
11.	EJ-2	अश्मरी	05	02	00	00	05	02	02	01	00	00	02	01	07	03	**10**
12.	AAC-12	आध्मानम्/ आनाह	03	03	00	00	03	03	00	00	00	00	00	00	03	03	**06**
13.	EC-6	आमवात	01	02	00	00	01	02	00	01	00	00	00	01	01	03	**04**
14.	BA-3.1	आर्तवक्षय	00	06	00	00	00	06	00	03	00	00	00	03	00	09	**09**
15.	ED-15	उदर्द	01	01	00	00	01	01	00	00	00	00	00	00	01	01	**02**
16.	EM-2	उन्माद	01	00	01	00	02	00	00	00	00	00	00	00	02	00	**02**
17.	EA-6	उरःक्षतः / क्षतक्षीण	06	07	00	00	06	07	02	03	00	00	02	03	08	10	**18**
18.	AAC-9	ऊरुस्तम्भ	01	01	00	00	01	01	00	01	00	00	00	01	01	02	**03**
19.	GF	कण्ठरोग	00	01	00	01	00	02	00	00	00	00	00	00	00	02	**02**
20.	ED-2.2	कण्डू	57	22	21	16	78	38	12	02	02	02	14	04	92	42	**134**
21.	O-14	कदर	01	00	00	01	01	01	00	00	00	00	00	00	01	01	**02**
22.	J-10	कर्णपाक	04	03	02	04	06	07	00	00	01	00	01	00	07	07	**14**
23.	J	कर्णरोग	02	04	03	02	05	06	01	01	00	00	01	01	06	07	**13**
24.	J-20	कर्णशूल	02	01	01	02	03	03	00	00	00	01	00	01	03	04	**07**
25.	ED-3	कामला	01	02	00	01	01	03	00	00	00	00	00	00	01	03	**04**
26.	EA-3	कास	118	83	62	29	180	112	06	05	03	00	09	05	189	117	**306**

27.	ED-4	कुष्ठम्	75	37	35	14	110	51	24	11	03	02	27	13	137	64	**201**
28.	N	कृमिः/सञ्जातकृमि	02	00	04	02	06	02	00	00	01	00	01	00	07	02	**09**
29.	EB-8	गुल्म	00	02	00	00	00	02	00	00	00	00	00	00	00	02	**02**
30.	AAC-20	गृध्रसी	05	06	00	00	05	06	01	03	00	00	01	03	06	09	**15**
31.	EE-4	ग्रन्थि	08	05	02	02	10	07	04	02	01	02	05	04	15	11	**26**
32.	EB-7	ग्रहणीदोष	02	01	00	00	02	01	01	00	00	00	01	00	03	01	**04**
33.	EB-6	छर्दि	00	01	01	00	01	01	00	00	00	00	00	00	01	01	**02**
34.	EC-3	ज्वर	47	54	19	14	66	68	03	01	00	00	03	01	69	69	**138**
35.	AAB-80	त्रिकग्रह/ कटिशूल	61	48	02	01	63	49	19	15	00	00	19	15	82	64	**146**
36.	ED-4.3.6	दद्रु-कुष्ठ	56	24	19	02	75	26	13	08	04	00	17	08	92	34	**126**
37.	GB	दन्तमूलरोग	02	03	00	00	02	03	00	00	00	00	00	00	02	03	**05**
38.	GC	दन्तरोग	09	06	03	01	12	07	01	00	01	00	02	00	14	07	**21**
39.	ABB-24	दाह	00	07	00	00	00	07	00	04	00	00	00	04	00	11	**11**
40.	MD-11	दौर्बल्यम्	52	100	04	06	56	106	11	21	00	01	11	22	67	128	**195**
41.	ED-2.8	निद्रानाशः / अनिद्रा	01	00	00	00	01	00	00	00	00	00	00	00	01	00	**01**
42.	AAC-24	पक्षाघातः/पक्षवध	01	00	00	00	01	00	01	00	00	00	01	00	02	00	**02**
43.	EB-12	परिकर्तिका	02	01	00	00	02	01	00	00	00	00	00	00	02	01	**03**
44.	EB-10.10	परिणामशूल	08	11	03	03	11	14	00	00	00	00	00	00	11	14	**25**
45.	EC-5	पाण्डुरोग	03	46	00	05	03	51	01	19	00	01	01	20	04	71	**75**
46.	EB-10.15	पार्श्वशूल	02	00	00	00	02	00	00	00	00	00	00	00	02	00	**02**
47.	ABB-26	पालित्य	00	01	00	00	00	01	00	00	00	00	00	00	00	01	**01**
48.	EF-4	पिडका	09	05	14	10	23	15	01	02	01	00	02	02	25	17	**42**
49.	I-1	प्रतिश्यायः /पीनस	25	16	20	06	45	22	00	00	00	01	00	01	45	23	**68**
50.	EB-9	प्रवाहिका	00	01	00	00	00	01	00	00	00	00	00	00	00	01	**01**
51.	EK-4.7	बद्धगुदोदर	00	01	00	00	00	01	00	00	00	00	00	00	00	01	**01**
52.	J-19	बाधिर्यम्	03	00	00	00	03	00	00	00	00	00	00	00	03	00	**03**
53.	ED-16	भगन्दर	03	02	00	00	03	02	02	01	00	00	02	01	05	03	**08**
54.	EM-11	भ्रम	05	33	00	01	05	34	00	05	00	00	00	05	05	39	**44**
55.	EF-2.4.4	मधुमेह	32	16	00	00	32	16	13	10	00	00	13	10	45	26	**71**
56.	AAC-32	मन्यास्तम्भ	00	02	00	00	00	02	00	00	00	00	00	00	00	02	**02**

57.	GG	मुखपाक	09	08	04	01	13	09	03	02	01	00	04	02	17	11	**28**
58.	EJ-4	मूत्रकृच्छ्रम्	25	11	05	00	30	11	10	00	01	00	11	00	41	11	**52**
59.	EJ-3	मूत्राघात	01	00	00	00	01	00	00	00	00	00	00	00	01	00	**01**
60.	EF-3	मेदोरोग	00	01	00	00	00	01	00	01	00	00	00	01	00	02	**02**
61.	O-35	युवानपिडका (मुखदूषिका)	02	03	05	01	07	04	00	01	00	00	00	01	07	05	**12**
62.	EL-2.28	योनि-अर्श	00	01	00	00	00	01	00	00	00	00	00	00	00	01	**01**
63.	ED-7	रक्तपित्तम्	01	01	00	00	01	01	00	00	00	00	00	00	01	01	**02**
64.	EL-4	रक्तप्रदरः/असृग्दर	00	21	00	04	00	25	00	06	00	02	00	08	00	33	**33**
65.	EL-2.24	वन्ध्या	00	01	00	00	00	01	00	00	00	00	00	00	00	01	**01**
66.	ED-8	वातरक्तम्	01	00	00	00	01	00	00	00	00	00	00	00	01	00	**01**
67.	AA	वातव्याधि	02	03	00	00	02	03	00	00	00	00	00	00	02	03	**05**
68.	ED-4.3.4	विपादिका	00	00	01	00	01	00	00	00	00	00	00	00	01	00	**01**
69.	AAC-12.4	विबन्ध	19	09	01	00	20	09	02	01	00	00	02	01	22	10	**32**
70.	AAC-35	विश्वाची	04	01	00	00	04	01	00	00	00	00	00	00	04	01	**05**
71.	EC-3.10	विषमज्वर	00	01	00	00	00	01	00	00	00	00	00	00	00	01	**01**
72.	K	व्रण	17	04	16	06	33	10	04	01	02	00	06	01	39	11	**50**
73.	F	शिरःशूल / शिरोरुक्	38	47	06	05	44	52	10	07	00	00	10	07	54	59	**113**
74.	AAC-37	शिरोग्रह	01	00	00	00	01	00	00	00	00	00	00	00	01	00	**01**
75.	ED-14	शीतपित्तम्	01	00	00	01	01	01	00	00	00	00	00	00	01	01	**02**
76.	EB-10	शूल	33	49	03	03	36	52	10	12	00	01	10	13	46	65	**111**
77.	EK-3	श्वयथुः/शोथः/शोफ	04	06	01	00	05	06	00	02	00	00	00	02	05	08	**13**
78.	EA-4	श्वास	48	24	08	01	56	25	20	05	00	00	20	05	76	30	**106**
79.	ED-5	श्वित्र	02	04	00	03	02	07	00	01	00	00	00	01	02	08	**10**
80.	EL-5	श्वेतप्रदर	00	23	00	00	00	23	00	03	00	00	00	03	00	26	**26**
81.	AAE-16	सन्धिवात	100	131	06	04	106	135	27	40	02	01	29	41	135	176	**311**
82.	BA-4.1	स्तन्यक्षय	00	02	00	00	00	02	00	01	00	00	00	01	00	03	**03**
83.	EA-5	स्वरभेद	01	01	00	00	01	01	01	00	00	00	01	00	02	01	**03**
84.	EB-10.14	हृदयशूल	02	00	00	00	02	00	00	00	00	00	00	00	02	00	**02**
85.	EC-2	हृद्रोग	08	03	00	00	08	03	01	00	00	00	01	00	09	03	**12**
Total			**1095**	**1036**	**289**	**162**	**1384**	**1198**	**248**	**229**	**26**	**16**	**274**	**245**	**1658**	**1443**	**3101**

7. *Ayurveda Mobile Health Care ProgrammeUnder Schedule Castes Sub-Plan (SCSP)*

AMHCP (SCSP) Programme was allotted to the Institute under Schedule Caste Sub-Plan (SCSP) in October 2015 by the Council and it was initiated in November 2015. It is a social survey and data documentation program though conducting health care camps in different SC dominant localities for awareness about health and dispensing Ayurvedic medicine to the people for common ailment for treatment purpose and encourages them to prefer the Ayurveda for prevention and cure of common diseases. The core objectives of the programme comprise; to study the living conditions, geographical and environmental profile of Scheduled Caste people in the selected area, to study of dietetic habits, socio-demographic profile, nature and frequency of prevalent diseases and collection of information related to health status, propagation of knowledge about hygiene and prevention of diseases and provide medical aid at their door steps etc. Under this programme, the Institute identified 05 SC population dominated areas/ Tehsils of Jaipur district within convenient distance as per list provided by Department of Social Justice and Empowerment, Govt. of Rajasthan. The Institute conducted tours and extended health care services, documented information from time to time as per the format. Door to door surveys were conducted for collection of demographic data. Besides, door to door survey, health awareness camps were conducted at one identified place such as Panchayat office/ School/ community centre/ PHC/CHC etc. and provided health check-up facilities. During the camps, patients who were suffering from different type of diseases were treated and free of cost medicines were also given. In each village medical camps have been organized and follow up camps have been organized after a regular interval of 07 days. The patients were also informed to visit the Institute for further follow up or any other health check up in future. Prior to holding tour, the objectives, activities and schedule of programme were propagated through panchayat/ village/colony level representatives and distribution of IEC materials including announcement through loud speaker.

Total of 05 Villages covered under this programme during the reporting period i.e. from 16 July 2021 to till 31 March 2022. Total 5905 population was covered through door to door survey and 3874 patients of various diseases were identified and treated through medical camps. The facility of investigation like Blood Sugar and Hemoglobin test was provided during the camps.

Objectives

1. To provide primary health care services through Health Camps based on principles of Ayurveda especially to SC community.
2. To collect information related to Health and Nutrition status of scheduled caste people.
3. Documentation of Nature and Frequency of prevalent diseases.
4. Creating awareness about nutrition, health, hygiene, prevention of Life style disorders, use of common medicinal plants available in the area.

5. Propagation of knowledge about Ayurvedic concept of Pathyapathya, Dinacharya, Ritucharya, dietary practice through behavior change counseling (BCC) for prevention of diseases and promotion of health by providing IEC material.

Study duration: One year

Methodology: (As per guidelines received from the CCRAS Hqrs.)

Study Site: Minimum Five villages/areas with majority of SC population were preferably be taken under this programme.

Methods: The study was conducted after obtaining the approval of Institutional Ethics Committee. One Research Officer (Ay.) of the Institute monitored the work under the supervision of Institute In-charge and a separate name plate affixed in the space allocated for this purpose within the institute. The unit conducted tours to extend health care services and documentation of information on regular basis.

1. **Providing health care services:** Primary health care services provided through Health Camps based on principles of Ayurveda. Relevant disease information documented in specially designed formats with regards nature & frequency of prevalent diseases and treatment outcomes. Awareness regarding Ayurvedic concept of *Pathyapathya, Dincharya, Rirucharya,* dietary practice etc. for prevention of diseases and promotion of health will be created through behaviour change counselling (BCC) and by providing IEC material
2. **Documentation of Health related Information-** The information regarding the (A) Village/ Area, (B) Houses (C) **Health Related information** of subjects with age above 18 years was collected in specially designed formats.
    - **General Information:** General information on Name, age, sex, marital status, education, physical activity status, dietetic habits, addiction will be collected.
    - **Health information:** Personal Health Information like presence of any Non Communicable disease, Anthropometric measurements like height, weight and BMI will be recorded, blood pressure, hemoglobin, blood sugar levels will be documented.

      Management was provided and periodical assessment was done in specially designed formats where abnormal findings will be observed in case of anaemia. In case of hypertension and diabetes screening will be done and Ayurvedic treatment was provided.

Conditions	**Screening Target**
Anemia	1000
Hypertension	1500
Diabetes/Pre-diabetes	1500

3. Health check up of children (0-18 years):

After identification of eligible children in household information on the following points will be collected:

- **General information:** Information on name, age, education (School going status), recurrent infection status (Respiratory Tract Infections, Gastrointestinal Tract Infections and Skin Infections), age of menarche (in female) are included in order to track the health of individual child and to assess the trend in puberty pattern and menstrual health in girl.
- **Information on growth of children:** Information on growth of child include Anthropometry measurement viz. Height, weight of all eligible children and upper mid arm circumference up to the age of 5 years was assessed to determine nutrition and growth status of a child.

  Management was provided and periodical assessment was done where abnormal findings will be observed for Anaemia and Malnutrition-

Conditions	Screening Target
Anemia	500

A. Number of Tours, Population Surveyed, Patients treated, Investigations done and folk claims (M/F distribution)

	No. of villages covered	No. of House Surveyed	No. of tours	Population Surveyed (SC)			Patient treated											
							New				Follow Up				Total			
							SC		Other		SC		Other		SC		Other	
				M	F	Total	M	F	M	F	M	F	M	F	M	F	M	F
MSRARI, Jaipur	Achrol	135	33	635	531	1166	261	271	01	0	97	136	0	0	358	407	01	0
	Samod	155	34	643	567	1210	222	372	06	09	80	165	0	0	302	537	06	09
	Jaisinghpura	173	34	638	554	1192	193	249	12	23	85	128	03	01	278	377	15	24
	Kaladera	136	33	574	504	1078	480	265	18	20	107	69	05	05	587	334	23	25
	Kanota	136	28	667	592	1259	218	222	01	0	55	95	0	0	273	317	01	0
	Total	**735**	**162**	**3157**	**2748**	**5905**	**1374**	**1379**	**38**	**52**	**424**	**593**	**08**	**06**	**1798**	**1972**	**46**	**58**

B. Number of Tours, Population Surveyed, Patients treated, Investigations done and folk claims

Name of the Institute	Name of Villages covered	No. of tour conducted	SC Population Surveyed/Screened	Patient treated									Investigations (Survey + OPD)	Folk claims
				New			Old			Total				
				SC	Other	Total	SC	Other	Total	SC	Other	Total		
MSRARI, Jaipur	Achrol	33	1166	532	01	533	233	0	233	765	01	766	733	0
	Samod	34	1210	594	15	609	245	0	245	839	15	854	847	0
	Jaisinghpura	34	1192	442	35	477	213	04	217	655	39	694	717	0
	Kaladera	33	1078	745	38	783	176	10	186	921	48	969	741	0
	Kanota	28	1259	440	01	441	150	0	150	590	01	591	682	0
	Total	**162**	**5905**	**2753**	**90**	**2843**	**1017**	**14**	**1031**	**3770**	**104**	**3874**	**3720**	**0**

C. Screening for Anaemia, Malnutrition, Hypertension and Diabetes

Sr. No	No. of villages covered	Screening											
		Anaemia (Hb)						Malnutrition		Diabetes Mellitus (BSL)		HTN (Blood pressure)	
						TOTAL		MC	FC	M	F	M	F
		MC	M	FC	F	M	F						
1.	Achrol	65	108	61	89	173	150	0	0	194	164	408	352
2.	Samod	69	109	50	108	178	158	0	0	212	203	444	423
3.	Jaisinghpura	63	94	58	87	157	145	0	0	184	159	409	364
4.	Kaladera	68	81	54	80	149	134	0	0	208	183	359	349
5.	Kanota	67	75	53	73	142	126	0	0	187	161	419	382
	Total	**332**	**467**	**276**	**437**	**799**	**713**	**0**	**0**	**985**	**870**	**2039**	**1870**

D. Total Lab Investigations (Survey + OPD)

Sr. No	No. of villages covered	Investigations/Screening																											
		Hb										Blood Sugar Level						Other						Total Investigations					
		SC				Other				Total		SC		Other		Total		SC		Other		Total		SC		Other		Total	
		MC	M	FC	F	MC	M	FC	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
1.	Achrol	66	117	62	107	0	0	0	0	183	169	205	176	0	0	205	176	0	0	0	0	0	0	388	345	0	0	388	345
2.	Samod	70	120	58	150	0	0	0	01	190	209	219	228	0	01	219	229	0	0	0	0	0	0	409	436	0	02	409	438
3.	Jaisinghpura	65	102	59	109	0	01	0	0	168	168	197	181	01	02	198	183	0	0	0	0	0	0	364	349	02	02	366	351
4.	Kaladera	72	88	55	94	0	0	0	0	160	149	222	202	03	05	225	207	0	0	0	0	0	0	382	351	03	05	385	356
5.	Kanota	77	85	56	93	0	0	0	0	162	149	196	175	0	0	196	175	0	0	0	0	0	0	358	324	0	0	358	324
Total		**350**	**512**	**290**	**553**	**0**	**01**	**0**	**01**	**863**	**844**	**1039**	**962**	**04**	**08**	**1043**	**970**	**0**	**0**	**0**	**0**	**0**	**0**	**1901**	**1805**	**05**	**09**	**1906**	**1814**

STUDY AT A GLANCE

S. No.	Particulars	Consolidated data of the study
1.	Durations of the study	16st July, 2021 to 31st March, 2022
2.	Villages covered	05
3.	Visits made	162
4.	SC Population covered	5905
5.	No. of patients treated	3874
6.	No. of SC patients treated	3770
7.	No. of SC Adults treated	3377
8.	No. of SC Children treated	497
9.	No. of Investigations done	3720

E. Status of IMR Projects under AMHCP-SCSP

Name of the project	Date of initiation	Target		No. of Patients Screened	No. of Patients enrolled	No. of patients successfully completed	No. of drop out patients	Reason for Dropout	Remarks
"Effectiveness of Ayurveda based diet and lifestyle advocacy on health related quality of life in schedule caste population in India-a Community based, cluster randomized controlled study"	**14.09.2021**	**70**	Gr.I-35	**62**	**35**	**35**	**0**	**0**	**0**
			Gr.II-35	**57**	**35**	**35**	**0**	**0**	**0**
"A Prospective Community Based Study for the evaluation of Punarnavadi Mandura in Anemia (Pandu)"	**12.10.2021**	**50**	-	**500**	**50**	**44**	**01**	**Death**	**Suicide on dated 25.12.21**
Osteoarthritis		**50**		NA	NA	NA	NA	NA	NA
Aswagandha		**120**	Gr.I-60	NA	NA	NA	NA	NA	NA
			Gr.II-60	NA	NA	NA	NA	NA	NA
"A Prophylactic Community Based Study to Assess the impact of Ayu Raksha Kit in Covid-19"	**15.02.2022**	**693**	Gr.I-630	**636**	**630**	**0**	**0**	**0**	**0**
			Gr.II-63	**63**	**63**	**0**	**0**	**0**	**0**

During the reporting year total 03 Clinical Studies/ Project executed under this programme.

I. Project Title:- "**A Prospective Community Based Study for the evaluation of Punarnavadi Mandura in Anemia (Pandu)**". This clinical projected was initiated on 12.10.2021. Total target to be covered was 50 patients, till 31st March, 2022, total numbers of 500 patients were screened out of which 50 patients of anemia were enrolled; 44 patients were completed in study. 01 patient was drop out. Presently 05 patients are continued for follow up visit of 112th days. The project shall be completed on dated 20.04.2022.

II. Project Title:- "**Effectiveness of Ayurveda based diet and lifestyle advocacy on health related quality of life in schedule caste population in India-a Community based, cluster randomized controlled study**". This Project was started from 14.09.2021. Total target 70 subject (Gr-I-35& G-II-35) covered under this programme. Total 119 numbers of patients were screened and enrolled 70 under this programme. The study has been completed on dated 09.03.2022.

III. Project Title:- "**A Prophylactic Community Based Study to Assess the impact of Ayu Raksha Kit in Covid-19**". The Study was initiated on dated 15.02.2022 and target 693 population was to be covered and two group (Gr-I-630-Intervention & Gr-II-63-Control). In Intervention Group, Ayu Raksha Kit were distributed to the enrolled 630 subject along with Soaps & Masks; while only Soaps & Masks were distributed to the 63 enrolled patients under group-II (Control group). Both the groups under study were instructed to follow Govt. standard guidelines for Covid-19 protection. The Study was completed on dated 22.03.2022.

E. Adult population (Above 18 years) treated for different disease conditions Maximum to Minimum (First 20):

S.No.	Disease	Disease code	No. of total patients from Maximum to Minimum		
			M	F	Total
1.	Sandhivata	AAE-16	148	251	399
2.	Dourbalya	MD-11	153	208	361
3.	Amlpitta	EB-4	162	130	292
4.	Kasha	EA-3	119	73	192
5.	Swet Pradara	EL-5	0	156	156
6.	Arsh	EE-3	78	76	154
7.	Vibhandh	AAC-12.4	93	52	145
8.	Shwas	EA-4	71	66	137
9.	Aamvta	EC-6	34	99	133
10.	Madhumeh	EF-2.4.4	74	49	123
11.	Kushtam	ED-4	68	48	116

12.	Pratishay/Pinas	I-1	60	44	104
13.	Ajirnam	EB-3	79	15	94
14.	Trikgrah/Katishula	AAB-80	45	44	89
15.	Shirahshul/Shiroruk	F	15	73	88
16.	Kandu	ED-2.2	44	40	84
17.	Dadru-Kusht	ED-4.3.6	52	21	73
18.	Vatavyadhi	AA	37	33	70
19.	Sandhimuktam	LA-1	20	36	56
20.	Mutrakriccham	EJ-4	22	15	37
Total			**1374**	**1529**	**2903**

F. Children (0-18 years) treated for different disease conditions Maximum to Minimum (First 10):

Sr.No.	Disease	Disease code	No. of total patients from Maximum to Minimum
1.	Dourbalya	MD-11	97
2.	Kasha	EA-3	43
3.	Aruchi	EC-7	37
4.	Dadru-Kusht	ED-4.3.6	36
5.	Kandu	ED-2.2	35
6.	Pratishay/Pinas	I-1	32
7.	Jwar	EC-3	29
8.	Kushtam	ED-4	25
9.	Amlpitta	EB-4	19
10.	Udavart	EB-11	19
Total			372

G. Result for the given Treatment:

S. No.	Disease	Result of treatment		
		Improvement	No change	Deteriote
1.	Sandhivata	**88**	11	**01**
2.	Dourbalya	123	07	02
3.	Amlpitta	112	04	01
4.	Kasha	45	04	01
5.	Swet Pradara	52	06	0
6.	Arsh	54	04	0
7.	Vibhandh	42	04	02
8.	Shwas	37	05	01
9.	Aamvta	42	04	0
10.	Madhumeh	29	02	0
11.	Kushtam	16	04	02
12.	Pratishay/Pinas	33	0	0
13.	Ajirnam	04	01	0
14.	Trikgrah/Katishula	17	01	0
15.	Shirahshul/Shiroruk	23	03	0
16.	Kandu	44	0	0
17.	Dadru-Kusht	24	01	0
18.	Vatavyadhi	09	01	0
19.	Sandhimuktam	17	03	0
20.	Mutrakriccham	11	0	0
21.	Aruchi	11	0	0
22.	Agnimadh	0	01	0
23	Atisar	0	01	0
24.	Anndravshul	01	0	0
25.	Avbahuk	04	0	0
26.	Ashmari	13	02	0
27.	Adhman	01	0	01
28.	Artavkshay	02	0	0

29.	Udard	03	0	0
30.	Udavart	18	0	0
31.	Udavartani	03	0	0
32.	Unmad	04	0	0
33.	Urchat	02	0	0
34.	Krami	01	0	0
35.	Khalitay	08	02	0
36.	Jwar	07	0	0
37.	Dantmul roga	02	0	0
38.	Dant roga	02	0	0
39.	Pangu(Kevalvat)	02	0	0
40.	Pandu roga	05	0	01
41.	Palitya	01	0	0
42.	Medoroga	03	0	0
43.	Yuvanpidika	02	0	0
44.	Yoni arsh	0	01	0
45.	Yonikand	0	01	0
46.	Raktpittam	01	0	0
47.	Raktpradara	0	03	0
48.	Bandhya	01	0	0
49.	Vatraktam	03	0	0
50.	Visham Jwara	02	0	0
51.	Vyang	01	0	0
52.	Vyanvaatkop	02	0	0
53.	Shitpittam	06	0	0
54.	Shul	01	01	0
55.	Shoth	01	0	0
56.	Switra	05	0	0
57.	Hardyashul	01	0	0
58.	Hardya roga	01	0	0
Total		**942**	**77**	**12**
Percentage		**91.37**	**7.47**	**1.16**

Summary-

During the reporting period, tours were organised at 5 villages namely Achrol, Samod, Jaisinghpura, Kaladera and Kanota. Total 735 numbers of houses were surveyed. Total 162 numbers of tours were conducted in SC dominant area. Total 5905 number of population was covered in which 2039 were Adult male and 1118 Child male, 1870 were Adult female and 878 Child female population. Total 3874 numbers of patient were treated in which 1844 were male and 2030 were female patient treated during the visit. During the reporting period, total 162 tours were conducted in which total 5905 number of SC population were surveyed and total 3874 number of patient were treated. Total 3720 number of investigation were performed. During the reporting period, screening test for anemia were carried out in 799 number of male and 713 number of female. Screening for diabetes was carried out among 985 number of male and 870 number of female. Screenings of HTN were carried out in 2039 number of male, 1870 number of female.

During the reporting period, total investigation of HB were performed was 1706 in which 844 number of female and 863 number of male. Total blood Sugar investigations were carried out is 2013 in which 970 in female and 1043 in male. Total HTN investigations were carried out is 3909 in which 1870 in female and 2039 in male. Thus we can conclude that total 1906 number of investigation were performed in male and total 1814 number of investigation were performed in female.

Thus, maximum numbers of SC population were surveyed and maximum numbers of SC patient were provided health benefits through this programme. The above data shows that total 2903 (1374 male and 1529 female) number of adult populations above 18 years with prevalence of first 20 disease conditions (in order from maximum to minimum) were treated during the reporting period. The maximum 399 patients were suffering from as most prevalent disease Sandhivata, followed by 292 patients of Amlapitta (acid-peptic disorder), 192 patients of Kasa (cough) and so on as shown above. 156 female patients were having complaint of Somroga /shwetapradar (leucorrhoea), Total 116 patients were suffering from Kushtha(skin disease), 88 patients of Sirahsula (headache), Treatment regimen of above mentioned disease involves use of Trayodashanga Guggulu, Ajmodadi Churna, Rasnadi Churna, Yograj Guggulu, Pushyanug Churna, Ashokarishta, Kaishora Guggulu, Arogyavardini Vati etc. Effectiveness of Ayurvedic medicine shows

moderate to mild relief in the symptoms of that particular disease. It was observed that Ayurvedic medicines take longer duration in showing results. During the reporting period, total 372 child patients between the age 0-18 years suffering from first 10 prevalent disease conditions in order to maximum to minimum were treated. It was observed that there was maximum 97 number of child patients was suffering from Daurbalya and 43 number of patients were of Kasa (cough). 37 number of child patients were having Aruchi, followed by Dadru kustha, Kandu, Pratishyaya /Pinas (common cold), Jvara (fever), Kustham, Amlapittam, Udavart.

Treatment regimens provided in above mentioned disease include aswagandha churan ,balchaturbhadra churan,syrup m –liv, Lakshmivilas Rasa,Sitopaladi Churna, Syrup M Vasaco, Arvindasava, Vidangarishta, Chyavanprasha, Dhatrilauha, Pushyanuga Churna and Tryodashanga Guggulu etc. Effectiveness of Ayurvedic medicine shows moderate to mild relief after using continuously for one week.

The data of above table shows that, among total 1031 (26.61%) number of patients treated, 942 (91.37%) numbers of patients were having Improvement, 77 (7.47%) numbers of patients shown No Change, 12 (1.16%) numbers of patients deteriote. The main Ayurvedic treatment regimen used for the treatment of above disease involves Trayodashanga Guggulu, Ajmodadi Churna, Rasnadi Churna, Yograj Guggulu, Pushyanug Churna, Ashokarishta, Kaishor Guggulu, ArogytavardiniVati, Lakshmivilas Rasa, Sitopaladi Churna, Syrup M Vasaco, Arvindasava, Vidangarishta, Chyavanprasha, Dhatrilauha, Pushyanuga Churna and Tryodashanga Guggulu etc. Effectiveness of Ayurvedic medicine shows moderate to mild relief in the symtoms of that particular disease. It was observed that Ayurvedic medicines take longer duration in showing results. Health seeking behavior of total population shows that most of the people seeking allopathic medicine consultation followed by Ayurvedic and homeopathic consultation.

8. Reproductive and Child Health Care (RCH) Programme

Introduction

The women and children are important constituents of any society. In India, from the ancient time, they are considered as a very important segment of society. They also constitute a large population group. From Reproductive and Child Health (RCH) view, this group is vulnerable and at more risk. Despite commendable work done in the field by the Government and NGOs, the health of the mother and child still form one of the most serious problems affecting the community. This situation is graver in the women and children of SC/ST community.

The total population of India, according to 2011 census is 121.08 crores of which Scheduled Castes is 20.13 crores, constituting 16.62 per cent of the population of India. The total number of SCs as per 2011 census is 201,378,372, of which males constitute 103,535,314 while females are 97,843,058. (Ref: https://www.census2011.co.in/scheduled-castes.php)

UN report says that the average *Dalit* woman in India dies 14.6 years younger than women from higher castes. A woman's caste in India increases her exposure to mortality because of poor sanitation and inadequate healthcare.

The condition of SC women in India needs more attention. The World Health Organization defines health as a "state of complete physical, mental, social and spiritual well-being and not just the absence of disease and infirmity". In case of SC women, it may be defined as a function of nutrition, education, employment housing, and access to drinking water, sanitation and hygiene among others. Generally, women and children are vulnerable groups and it increases manifold in case of SC women. By providing proper nutrition, appropriate pregnancy care, care during delivery, post-natal care and care for other gynecological problem, sanitation and immunization to Sc women and children may help to reduce the morbidity and mortality of them.

Ayurveda the ancient tradition of Indian Systems of Medicine has sustained the population for centuries, with effective cures and remedies for numerous conditions, including those relating to women and children, with minimal side effects.

As an apex body of research in *Ayurveda*, under the programme Schedule Caste sub-plan CCRAS is providing health care services and creating awareness for maintenance and promotion of health of SC communities by *Ayuvedic* approaches through its different Institutes across the country. Considering the strength of *Ayurveda* in the management of health related problems of women and children, the Council has also decided extend its activities specially for women and children under SCSP programme with following aim and objectives-

Aims and Objectives

Aims-

To provide mother and child health care awareness and medical services in the Schedule Caste (SC) dominant community.

Objectives-

1. Providing primary health care services through Health Camps based on principles of *Ayurveda* especially to women and children of SC community.
2. Documentation on Nature and Frequency of prevalent diseases.
3. Creating Health awareness about nutrition, Hygiene, prevention of Life style disorders and use of common medicinal plants available in the area.
4. Screening of nutrition status, anaemia, recurrent infection status in all SC children and their management through *Ayurveda*.
5. Propagation of knowledge about *Ayurvedic* concept of *Pathyapathya, Dincharya, Rirucharya,* dietary practice, prevention of diseases and health promotion through behaviour change counselling (BCC) by Providing IEC material.

Methodology

Study Site

Five villages/areas with majority of SC women & children (minimum 5000) were preferably selected for this programme.

Methods

The study was conducted after obtaining the approval of Institutional Ethics Committee. One Research Officer (Ay.) of the Institute has monitored the work under the supervision of Institute In-charge and a separate nameplate has been affixed in the space allocated for this purpose within the institute. This unit has conduct tours to extend health care services and documented the information on regular basis.

Following activities have been conducted under this programme-

1. **Providing health care services-**

Primary health care services have been provided to SC women and children through Health camps based on principles of *Ayurveda*. Relevant diseases information has been documented in specially designed formats with regards nature & frequency of prevalent diseases and treatment outcomes with *Ayurveda*. Ante Natal Care has been also provided to pregnant women. Awareness regarding *Ayurvedic* concept of *Pathyapathya, Dincharya, Rirucharya,* dietary practice etc., for prevention of diseases and promotion of health have been created through behaviour change counselling (BCC) and by providing IEC material.

2. **Documentation of health related information**

Following information have been collected in specially designed formats-

A. **Village/ area information-**The cluster (village/ area) that have been selected under RCH(SCSP) programme have been visited to collect information using a specially designed questionnaire. The information's have been collected from the resourceful person of the cluster like *Sarpanch* / *Gram-panchayat* member and also from relevant govt. documents.

B. **House information-** House information like type of house, ventilation, drinking water source, drinking water purification method, toilet facilities, vector born disease prevention, drainage facility etc. have been documented in specially designed formats to get idea about health related conditions and its relation with living condition.

C. Health related information of women with age above 18 years-

General Information -Information on name, age, sex, marital status, education, physical activity status, dietetic habits, addiction have been collected.

Health Information-Personal health information like presence of any Non Communicable disease (NCDs), anthropometric measurements like height, weight, blood pressure, hemoglobin, blood sugar levels etc. have been recorded.

Screening programme and treatment –Screening for anemia, hypertension and diabetes mellitus in females (above 30 years) have been done. Management has been provided and periodical assessment has been done.

D. Health checkup of children (0-18 years)-After identification of eligible children in household information on the following points will be collected:

General Information-Information on, age, education (school going status), recurrent infection status (Respiratory Tract Infections, Gastrointestinal Tract Infections and Skin Infections), age of menarche (in female) were included in order to track the health of individual child and to assess the trend in puberty pattern and menstrual health in girl.

Information on Growth of children-information on growth of child include anthropometry measurement viz. height, weight of all eligible children and upper mid arm circumference up to the age of 5 years have been assessed to determine nutrition and growth status of a child. **Screening programme and treatment-** Screening for anemia and malnutrition in children have been done and management have been provided accordingly.

3. Awareness classes also have been conducted for women and children on maintenance of hygiene, diet, life style and immunization on regular basis

RCH-SCSP team has organized lectures/awareness programs related to prevalent infection COVID-19, immunity, maintenance of hygiene, diet and life style etc. in the selected scheduled caste populated villages. on regular basis.

4. Laboratory Investigations

Hb gm%, Blood sugar test have been carried out at their doorstep/ medical camps.

5. **Clinical projects**

During the reporting period following studies were completed

A. "Effectiveness of Ayurveda based diet and Lifestyle advocacy on health related Quality of life in Women's of schedule Caste population in India- a Community based, cluster randomized controlled study". The objectives of the study were,

Primary Objectives:

i. To assess the effectiveness of Ayurvedic diet and Lifestyle advocacy on Quality of Life among Women's of schedule Caste population.

Secondary Objectives:

ii. To assess the effectiveness of Ayurvedic diet and Lifestyle advocacy on Ayurvedic health assessment parameters.

iii. To evaluate acceptability and adherence to Ayurvedic diet and Lifestyle advocacy among Women's of schedule Caste population

B. "A prospective community based study for the evaluation of *Rajapravartani Vati* in the Management of Primary Dysmenorhoea." The objectives of the study were,

Primary Objectives:

i. To assess the role of *RajahpravartiniVati* in the subjective pain outcomes of Primary Dysmenorrhea.

Secondary Objectives:

ii. To evaluate the tolerability of Ayurvedic formulation *Rajatpravartini Vati*in the management of Primary Dysmenorrhea.

Efforts taken-

The Schedule caste females and children of the selected area were surveyed and their demographic details and medical history were recorded in the given proforma and analyzed. Primary health care services have been provided to SC women and children through health

camps based on principles of *Ayurveda*. Relevant diseases information's have been documented in specially designed formats with regards nature & frequency of prevalent diseases and treatment outcomes with *Ayurveda*. People were sensitized about importance of appropriate diet & life style as per the principles of *Ayurveda* for promotion of health and boosting immunity by delivering lectures and one to one interaction. Awareness regarding health, nutrition and ante natal care was created by distributing IEC materials. After understanding/ learning the local dietetic habits, appropriate modifications in the diet as per the principles of *Ayurveda* and some current guidelines, were suggested.

Details of the Achievements during 2021-2022:

Table No:1- Number of Tours, Population Surveyed & Patients treated.

Name of the Institute	Name of villages covered	No. of tours	Population Surveyed (SC)					Patient treated																	
								New						Follow Up						Total					
			Mc	Fc	F	Total		SC			Other			SC			Other			SC			Other		
						M	F + Fc	Mc	Fc	F	Mc	Fc	F	Mc	Fc	F	Mc	Fc	F	Mc	Fc	F	Mc	Fc	F
MSRARI, Jaipur	**Niwaru**	34	381	258	672	381	930	84	73	574	0	4	24	3	3	125	0	1	3	87	76	699	0	5	27
	Chitwari	32	314	205	568	314	773	91	91	497	4	0	4	15	7	61	0	0	0	106	98	558	4	0	4
	Kalwar	33	346	202	584	346	786	80	112	557	0	5	5	9	13	81	0	0	0	89	125	638	0	5	5
	Chandlai	33	366	268	694	366	962	81	95	569	0	1	2	8	13	93	0	0	0	89	108	662	0	1	2
	Muhana	31	256	213	563	256	776	51	60	491	0	0	8	0	2	88	0	0	0	51	62	579	0	0	8
Total		**163**	**1663**	**1146**	**3081**	**1663**	**4227**	**387**	**431**	**2688**	**4**	**10**	**43**	**35**	**38**	**448**	**0**	**1**	**3**	**422**	**469**	**3136**	**4**	**11**	**46**

Table No.2 Number of Tours, Population Surveyed, Patients treated, Investigations done, ANC visit and awareness activities

Name of the Institute	Name. of villages covered	No. of tours	Population Surveyed (SC)			Patient treated						ANC visits	Total investigations	Awareness activities
						Women		Child		Total				
			Women	Child	Total	SC	Other	SC	Other	SC	Other			
MSRARI Jaipur	**Niwaru**	34	672	639	1311	699	27	163	5	862	32	8	1145	10
	Chitwari	32	568	519	1087	558	4	204	4	762	8	9	801	13
	Kalwar	33	584	548	1132	638	5	214	5	852	10	7	798	11
	Chandlai	33	694	634	1328	662	2	197	1	859	3	8	1124	12
	Muhana	31	563	469	1032	579	8	113	0	692	8	7	897	10
Total		**163**	**3081**	**2809**	**5890**	**3136**	**46**	**891**	**15**	**4027**	**61**	**39**	**4765**	**56**

Table No.3 Screening of Anemia, Malnutrition, Hypertension and Diabetes

Name. of villages covered	Screening								
	Anaemia (Hb%)					Malnutrition		Diabetes Mellitus (BSL)	HTN (High Blood pressure)
				TOTAL					
	Mc	Fc	F	M	F	Mc	Fc	F	F
Niwaru	168	127	324	168	451	381	258	356	672
Chitwari	111	78	250	111	328	314	205	242	568
Kalwar	132	75	239	132	314	346	202	240	584
Chandlai	170	133	340	170	473	366	268	359	694
Muhana	96	85	301	96	386	256	213	298	563
Total	**677**	**498**	**1454**	**677**	**1952**	**1663**	**1146**	**1495**	**3081**

Table No.4- Total Lab Investigations (Survey + OPD)

Name. of villages covered	Investigations/Screening																	
	Hb						Blood Sugar Level			Other			Total Investigations					
	SC		Other		TOTAL		SC	Other	Total	SC	Other	TOTAL	SC		Other		TOTAL	
	MC	Fc + F	Mc	Fc+ F	M	Fc+ F	F	F	F	F	F	F	M	Fc + F	M	Fc + F	M	Fc + F
Niwaru	178	542	0	1	178	543	424	0	424	0	0	0	178	966	0	1	178	967
Chitwari	123	395	1	0	124	395	282	0	282	0	0	0	123	677	1	0	124	677
Kalwar	138	386	0	1	138	387	273	0	273	0	0	0	138	659	0	1	138	660
Chandlai	181	540	0	0	181	540	403	0	403	0	0	0	181	943	0	0	181	943
Muhana	102	450	0	1	102	451	344	0	344	0	0	0	102	794	0	1	102	795
Total	**722**	**2313**	**1**	**3**	**723**	**2316**	**1726**	**0**	**1726**	**0**	**0**	**0**	**722**	**4039**	**1**	**3**	**723**	**4042**

Table No.5- Status of IMR Projects under RCH-SCSP

Name of the project	Date of initiation	Target		No. of Patients Screened	No. of Patients enrolled	No. of patients successfully completed	No. of drop out patients
1. "Effectiveness of Ayurveda based diet and Lifestyle advocacy on health related Quality of life in Women of schedule Caste population in India- a Community based, cluster randomized controlled study".	**26/08/21**	**70**	**Gr. I-35**	39	35	35	0
	26/08/21		**Gr.II-35**	39	35	35	0
2. "A prospective community based study for the evaluation of *Rajapravartani Vati* in the Management of Primary Dysmenorrhea."	**27/09/21**	**50**		54	50	50	0

Summary:

The RCH programme under SCSP has been conducted by this institute in SC population dominant five area/ localities of Jaipur district of Rajasthan namely Niwaru, Chtwari, Kalwar, Chandlai and Muhana. Under this programme, the team of RARI, Jaipur has done door to door survey of the localities, health camps and collected different data as per format particularly of women and children; also distributed free medicine for different diseases at the door step. During Survey Village information, House information, information of women and Children related to health was collected. Screening was conducted for anemia (Total:2629), Diabetes Mellitus (Total:1495), Hypertension (Total:3081) and Malnutrition status among children (Total:2809). Total 5890 SC women and Children were surveyed to get health related demography. Total 4088 women and children were treated through mobile health camps, of which 3136 were SC women whereas 891 were SC children. Total 4765 number of investigation were carried out as per need of the patients. Total 56 awareness activities were carried out during the year. According to the data available, the maximum number of women were found to be suffering from *Sandhivata* (Osteoarthritis), *Swetapradar* (Leucorrhoea), *Vibandha* (Chronic constipation), *Daurbalya* (Weakness*), Ajeerna* (Indigestion), *Katishoola* (Backache), *Kasa (Cough), Arsha* (Piles), *Kandu* (Itching), *and Jwara* (fever), whereas in children *Daurbalya* (Weakness*), Kasa* (Cough), *Krimi* (Worm infestation), *Pratishayay* (Rhinitis), *Jwara* (Fever), *Aruchi* (Anorexia), *Ajeerna* (Indigestion), *Vibandha* (Chronic constipation), *Kandu* (Itching), *Kushtha* (Skin Diseases) were among the top diseases treated. Patients were satisfied by the Ayurvedic treatment received for common ailments given to them.

9. INTEGRATION OF AYUSH (AYURVEDA) WITHNATIONAL PROGRAM FOR PREVENTION AND CONTROL OF CANCER, DIABETES,CARDIOVASCULAR DISEASES& STROKE(2021-22)

INTRODUCTION

To Prevent and contain the projected increase in the burden of Non-Communicable Diseases, Ministry of Health and Family Welfare, Govt. of India has launched the National Programme for prevention and control of Cancer, Diabetes, Cardiovascular disease and Stroke (NPCDCS) in 2008 on Pilot basis. The implementation of integration of AYUSH (Ayurveda) with NPCDCS programme was initiated in 2015-2016 in collaboration with Ministry of Health and Family Welfare, Govt. of India in Rajasthan State. The programme has been launched in District Bhilwara at District Hospital and 22 Community Health Centers.

AIMS & OBJECTIVES

The programme was started with the following Aims & objectives:-

- To integrate Ayurveda to the existing healthcare system for promotion, prevention and control of Non-communicable diseases through NPCDCS programme.
- To ensure early diagnosis of NCDs for management through life style and behavioral changes through the principles of Ayurveda.
- To reduce drug dependency in chronic cases through Ayurveda, Yoga practices and Lifestyle changes.
- To provide as an adjuvant therapy to reduce complications and associated symptoms.
- To carry out capacity building of human resources.
- To ensure Evaluation, Monitoring and Surveillance of NCDs though this project in terms of the components of the project.

Summary

During the year 2021-22; total 7,969 patients were screened among them 491 patients were enrolled in diseases mentioned in program. Total 142 Diabetic patients, 162 Hypertensive patients and 187 Dyslipidemia patients were enrolled while no patients were completed treatment course of six months. As an activity of AYUSH-NPCDCS as well as to prevent the spread of NCDs; total 4,129 persons registered for Daily Morning Yoga classes. As per direction of council; closure of program took place on 30th April, 2021 vide letter F. No. 63-1/2015-CCRAS/Admin./NPCDCS/Jaipur/Vol.-1/431 on date 23.04.2021.

NPCDCS AYUSH CLINICS SELECTED FOR NPCDCS PROGRAMME IN DISTT. BHILWARA, RAJASTHAN:

Name of the District Hospital	
1.Mahatma Gandhi District Hospital, Bhilwara	
Name of Satellite Hospital	
2. Govt. Satellite Hospital, Shahpura	
Name of Community Health Centres	
3. Gulabpura	4. Kotri
5. Bigod	6. Gangapur
7. Asind	8. Badnor
9. Mandal	10. Bijoliya
11. Suwana	12. Koshithal
13. Potlan	14. Bagor
15. Pander	16. Hamirgarh
17. Kachola	18. Jahajpur
19. Banera	20. Mahuwa
21. Kareda	22. Raipur
23.Mandalgarh	

CENTRAL COUNCIL FOR RESEARCH IN AYURVEDIC SCIENCES

"Integration of AYUSH (Ayurveda) with National Program for Prevention and Control of Cancer, Diabetes, Cardio-vascular diseases & Stroke"

(NPCDCS - AYUSH)

Name of the District (State): - BHILWARA (RAJASTHAN) **Annual report of Bhilwara District (Year 2021-22)**

Total No. of patients visited AYUSH-NPCDCS clinic: 14,133

S. No.	Disease		No. of patients Screened	No. of patients Registered/Enrolled		Treatment group (Wherever applicable)				No. of patients during the current month		Referred (If any)
				Newly enrolled in the current month	Already enrolled came for follow up	A-1	A-2	B-1	B-2	Completed	Drop outs*	
1	Diabetes	M	722	82	344	12	13	2	55	0	14	0
		F	742	60	209	9	10	1	40	0	11	0
2	Hypertension	M	1310	92	427	26	17	3	46	0	26	0
		F	1325	70	262	20	11	6	33	0	14	0
3	Dyslipidemia	M	209	105	464	17	16	14	58	0	27	0
		F	238	82	309	9	8	9	56	0	13	0
4	Hemiplegia	M	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0
5	Cancer	M	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0
6	RHD	M	0	0	0	0	0	0	0	0	0	0
		F	0	0	0	0	0	0	0	0	0	0
7	COPD	M	188	0	0	0	0	0	0	0	0	188
		F	164	0	0	0	0	0	0	0	0	164
8	Others	M	1264	0	0	0	0	0	0	0	0	1264
		F	1807	0	0	0	0	0	0	0	0	1807
TOTAL			7969	491	2015	93	75	35	288	0	105	3423

Drop out - if patient fail as to visit for 02 consecutive months

No. of health cards filled	**204**	
Total No. of persons enrolled/registered for Yoga Classes	**4129**	
Total No. of Camps conducted	**Medical Camp**	**Yoga Camp**
	0	**0**
Total No. of persons attended the camps	**0**	**0**

Total no. of Patients Enrolled

	Diabetes	Hypertension	Dyslipidemia	Hemiplegia	Cancer
Enrolled	142	162	187	0	0
A1	21	46	26	0	0
A2	23	28	24	0	0
B1	3	9	23	0	0
B2	95	79	114	0	0
Completed	0	0	0	0	0
Dropout	25	40	40	0	0

10. Library

i) No. of books available upto previous year:1497

ii) No. of books purchased during the reporting year: 20

iii) No. of CD purchased during the reporting year: Nil

S.No.	Name of books	Amount (Rs.)
1.	Swamy Hand book-2021	450.00
2.	Swamy Hand book-2021	450.00
3.	swamy Hand book -2021	450.00
4.	Swamy Hand book -2021	450.00
5.	T.A. Rules made Easy swamy	220.00
6.	Medical Attendence Rule swamy	430.00
7.	List of Medicines(Admissible or Inadmissible	110.00
8.	Conduct Rules swamy	330.00
9.	Leave Travel concession Rules swamy	250.00
10.	General Rules of finnace 2017	300.00
11.	Seniority and Promotion swamy	470.00
12.	Right to Information swamy	320.00
13.	Right to Information swamy	260.00
14.	Leave Rules(FR and SR) part-3	320.00
15.	Establishment and Administrative	1480.00
16.	Pension Compilation	485.00
17.	Classical uses of medicinal Plants	641.75
18.	Classical uses of medicinal Plants	641.75
19.	Dravyaguna vigyan	378.25
20.	Dravyaguna vigyan	378.25
	Total	**8,815/-**

PART – B

HOSPITAL STATISTICS

11. Out Patient Department:

Statement of patients attended OPD during different years (Since inception up to 2021-22):

S. No.	Year	No. of patients attended OPD													
		New						Old						GRAND TOTAL	
		Adult		Child		TOTAL		Adult		Child		TOTAL			
		M	F	M	F	M	F	M	F	M	F	M	F	M	F
1.	**1972-73**	62	62	09	03	71	65	10	05	04	-	14	05	85	70
2.	**1973-74**	79	352	98	57	177	409	237	110	69	-	306	110	483	519
3.	**1974-75**	754	654	73	59	827	713	3973	3508	696	-	4669	3508	5496	4221
4.	**1975-76**	602	372	243	175	845	547	4744	2555	793	-	5537	2555	6382	3102
5.	**1976-77**	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6.	**1977-78**	108	177	29	13	137	190	476	740	30	-	506	740	643	930
7.	**1978-79**	518	376	85	86	603	462	136	165	39	-	175	165	778	627
8.	**1979-80**	187	147	26	33	213	180	57	62	22	-	79	62	292	242
9.	**1980-81**	1161	971	130	120	1291	1091	465	522	107	-	572	522	1863	1613
10.	**1981-82**	1143	1072	193	177	1336	1249	633	905	100	96	733	1001	2069	2250
11.	**1982-83**	1118	1422	282	167	1400	1589	932	178	217	111	1149	289	2549	1878
12.	**1983-84**	1754	2151	433	331	2187	2482	1514	3123	412	392	1926	3515	4113	5997
13.	**1984-85**	1864	2079	344	310	2208	2389	1633	2828	261	241	1894	3069	4102	5458
14.	**1985-86**	2036	2059	401	356	2437	2415	1434	2492	267	191	1701	2683	4138	5098
15.	**1986-87**	1629	1761	342	255	1971	2016	1136	2038	225	220	1361	2258	3332	4274
16.	**1987-88**	1548	1852	306	251	1854	2103	1245	2094	214	159	1459	2253	3313	4356
17.	**1988-89**	1454	1578	293	205	1747	1783	1398	1676	193	148	1591	1824	3338	3607
18.	**1989-90**	1077	1165	1371	179	2448	1344	1073	1155	118	67	1191	1222	3639	2566
19.	**1990-91**	1146	1103	167	148	1313	1251	876	1046	163	207	1039	1253	2352	2504
20.	**1991-92**	1095	1112	167	139	1262	1251	888	1333	170	170	1058	1503	2320	2754
21.	**1992-93**	1063	1027	155	144	1218	1171	697	1148	119	75	816	1223	2034	2394

22.	**1993-94**	837	871	103	72	940	943	585	895	66	44	651	939	1591	1882
23.	**1994-95**	776	844	60	62	836	906	432	671	50	35	482	706	1318	1612
24.	**1995-96**	841	870	43	48	884	918	377	433	24	13	401	446	1285	1364
25.	**1996-97**	1341	1205	65	66	1406	1271	423	552	11	07	434	559	1840	1830
26.	**1997-98**	1173	1060	57	44	1230	1104	316	479	10	06	326	485	1556	1589
27.	**1998-99**	1620	1213	148	82	1768	1295	591	649	53	28	644	677	2412	1972
28.	**1999-00**	5869	4587	774	771	6643	5358	4831	4860	384	369	5215	5229	11858	10587
29.	**2000-01**	6310	5161	646	531	6956	5692	5767	6784	334	314	6101	7098	13057	12790
30.	**2001-02**	5473	4465	629	510	6102	4975	5403	5629	465	224	5868	5853	11970	10828
31.	**2002-03**	7454	7432	1196	951	8650	8383	8252	9663	690	529	8942	10192	17592	18575
32.	**2003-04**	7585	6337	1079	842	8664	7179	8796	9787	680	504	9476	10291	18140	17470
33.	**2004-05**	3635	2949	384	273	4019	3222	4159	5125	330	224	4489	5349	8508	8571
34.	**2005-06**	4207	3030	438	282	4645	3312	4935	4430	186	112	5121	4542	9766	7854
35.	**2006-07**	5215	3614	360	267	5575	3881	4385	3958	157	93	4542	4051	10117	7932
36.	**2007-08**	4982	3267	293	233	5275	3500	5386	3652	136	113	5522	3765	10797	7265
37.	**2008-09**	5788	4049	414	340	6202	4389	6950	5860	177	232	7127	6092	13329	10481
38.	**2009-2010**	5857	4039	403	297	6260	4336	8352	5957	292	268	8644	6225	14904	10561
39.	**2010-2011**	4814	3191	296	192	5110	3383	9248	6105	341	269	9589	6374	14699	9757
40.	**2011-2012**	5755	3844	260	218	6015	4062	10822	7311	349	317	11171	7628	17186	11690
41.	**2012-2013**	7593	4943	314	227	7907	5170	9302	5752	244	162	9546	5914	17453	11084
42.	**2013-2014**	8510	5787	357	313	8867	6100	10120	7250	282	193	10402	7443	19269	13543
43.	**2014-2015**	8773	5768	360	287	9133	6055	8607	6289	242	191	8849	6480	17982	12535
44.	**2015-2016**	8536	5970	376	263	8912	6233	7904	6019	215	171	8119	6191	17031	12424
45.	**2016-2017**	8960	6213	296	254	9256	6467	7427	5487	153	125	7580	5612	16836	12079
46.	**2017-2018**	7289	5291	248	205	7537	5496	6039	4801	100	111	6139	4912	13676	10408
47.	**2018-2019**	8783	7117	413	281	9196	7398	7894	7568	184	124	8078	7692	17274	15090
48.	**2019-2020**	8373	6917	343	247	8716	7164	8043	7058	202	127	8245	7185	16961	14349
49.	**2020-2021**	6229	4446	163	103	6392	4549	2902	2100	59	29	2961	2129	9353	6678
50.	**2021-2022**	**7001**	**5583**	**141**	**170**	**7142**	**5753**	**3077**	**2545**	**39**	**46**	**3116**	**2591**	**10258**	**8344**
G. TOTAL		**179977**	**141555**	**15806**	**11639**	**195783**	**153194**	**184882**	**165352**	**10674**	**7057**	**195556**	**172410**	**391339**	**325604**

12. In-Patient Department:

Statement of patients admitted / discharged during different years (Since inception up to 2021-22):

S. No.	Year	Number of patients attended IPD											
		Admitted						Discharged					
		Adult		Child		TOTAL		Adult		Child		TOTAL	
		M	F	M	F	M	F	M	F	M	F	M	F
1.	1974-75	118	98	03	01	121	99	110	90	02	01	112	91
2.	1975-76	123	128	13	08	137	136	117	127	13	08	130	135
3.	1976-77	65	82	6	09	71	91	62	75	06	09	68	84
4.	1977-78	51	79	08	05	59	84	49	75	08	05	57	80
5.	1978-79	35	33	-	01	35	34	32	30	-	01	32	31
6.	1979-80	41	32	05	01	46	33	38	32	06	01	44	33
7.	1980-81	42	58	05	05	47	63	42	58	04	05	46	63
8.	1981-82	61	59	05	03	66	62	56	59	05	03	61	62
9.	1982-83	70	80	07	05	77	85	67	73	07	04	74	77
10.	1983-84	117	97	04	06	121	103	113	98	04	07	117	105
11.	1984-85	97	114	10	06	107	120	96	118	10	05	106	123
12.	1985-86	97	103	07	4	104	107	99	104	06	05	105	109
13.	1986-87	85	66	07	15	92	81	88	67	08	15	96	82
14.	1987-88	65	67	02	03	67	70	63	63	02	03	65	66
15.	1988-89	57	58	03	02	60	60	58	63	03	02	61	65
16.	1989-90	35	31	01	-	36	31	37	28	01	-	38	28
17.	1990-91	46	51	04	01	50	52	44	53	04	01	48	54
18.	1991-92	41	52	05	01	46	53	43	52	05	01	48	53
19.	1992-93	42	43	-	01	42	44	40	42	-	-	40	42
20.	1993-94	39	36	01	01	40	37	40	39	01	02	41	41
21.	1994-95	42	35	-	01	42	36	42	30	-	01	42	31
22.	1995-96	61	44	05	-	66	44	59	46	05	-	64	46
23.	1996-97	61	44	01	01	62	45	61	44	01	01	62	45

24.	**1997-98**	50	27	02	02	52	29	51	29	02	02	53	31
25.	**1998-99**	37	34	01	-	38	34	38	36	01	-	39	36
26.	**1999-2000**	42	37	-	-	42	37	42	33	-	-	42	33
27.	**2000-01**	56	37	04	-	60	37	55	37	04	-	59	37
28.	**2001-02**	65	65	-	01	65	66	65	63	-	01	65	64
29.	**2002-03**	213	210	10	-	223	210	215	202	09	-	224	202
30.	**2003-04**	154	164	07	05	161	169	152	155	07	05	159	160
31.	**2004-05**	63	84	-	-	63	84	60	90	-	-	60	90
32.	**2005-06**	73	72	-	-	73	72	70	69	-	-	70	69
33.	**2006-07**	156	112	04	01	160	113	149	109	04	01	153	110
34.	**2007-08**	133	115	04	03	137	118	132	105	04	03	136	108
35.	**2008-09**	68	57	-	03	68	60	62	53	-	03	62	56
36.	**2009-10**	47	44	-	-	47	44	45	43	-	-	45	43
37.	**2010-11**	50	33	01	-	51	33	48	33	01	-	49	33
38.	**2011-12**	45	29	-	-	45	29	46	28	-	-	46	28
39.	**2012-13**	48	22	-	-	48	22	49	24	-	-	49	24
40.	**2013-14**	43	25	06	01	49	26	43	25	06	01	49	26
41.	**2014-15**	33	16	03	01	36	17	32	16	03	0	35	16
42.	**2015-16**	58	45	-	01	58	46	60	45	-	02	60	47
43.	**2016-17**	35	20	-	-	35	20	36	20	-	-	36	20
44.	**2017-18**	43	47	-	-	43	47	41	44	-	-	41	44
45.	**2018-19**	145	183	09	01	154	184	139	177	09	01	148	178
46.	**2019-20**	140	161	0	3	140	164	148	170	0	3	148	173
47.	**2020-21**	6	5	0	0	6	5	6	5	0	0	6	5
48.	**2021-22**	**29**	**48**	**0**	**0**	**29**	**48**	**28**	**46**	**0**	**0**	**28**	**46**
TOTAL		**3323**	**3182**	**153**	**102**	**3476**	**3284**	**3268**	**3123**	**151**	**102**	**3419**	**3225**

- **Note: During the year 2021-22, less number of patients could be admitted in the Institute's Indoor Patient Door (IPD) Department due to the COVID-19 pandemic situations.**

A. Disease-wise statement of patients Admitted/ Discharged during last five years excluding reporting period:

YEAR 2016-17

S. N.	Code	Disease	Admitted Patients						Discharged Patients					
			M	F	MC	FC	Total Male	Total Female	M	F	MC	FC	Total Male	Total Female
1.	07	Amavata	02	05	-	-	02	05	02	05	-	-	02	05
2.	28	Kasa	01	-	-	-	01	-	01	-	-	-	01	-
3.	33	Katishula	05	02	-	-	05	02	05	02	-	-	05	02
4.	47	Prameha	02	-	-	-	02	-	02	-	-	-	02	-
5.	54	Shwasa	01	-	-	-	01	-	01	-	-	-	01	-
6.	58	Sandhivata	01	05	-	-	01	05	01	05	-	-	01	05
7.	59	Shotha	-	01	-	-	-	01	-	01	-	-	-	01
8.	61	Sandhishula	05	01	-	-	05	01	06	01	-	-	06	01
9.	76	Vatavyadhi	03	01	-	-	03	01	03	01	-	-	03	01
10.	26	Jwara	-	01	-	-	-	1	-	01	-	-	-	01
11.	2	Arsha	03	-	-	-	03	-	03	-	-	-	03	-
12.	6	Amla pitta	01	-	-	-	01	-	01	-	-	-	01	-
13.	64	Twakroga	01	-	-	-	01	-	01	-	-	-	01	-
14.	53	Rajodosha	-	01	-	-	-	01	-	01	-	-	-	01
15.	55	Shirahshula	01	-	-	-	01	-	01	-	-	-	01	-
16.	22	Gridhrasi	05	01	-	-	05	01	05	01	-	-	05	01
17.	08	Ashmari	01	-	-	-	01	-	01	-	-	-	01	-
18.	84	Others	3	2	-	-	03	02	03	02	-	-	03	02
TOTAL			35	20	-	-	35	20	36	20	-	-	36	20

YEAR 2017-18

S. No.	Code	Disease	Admitted Patients						Discharged Patients					
			M	F	MC	FC	Total Male	Total Female	M	F	MC	FC	Total Male	Total Female
1.	61	SandhiShool	3	10	-	-	3	10	3	9	-	-	3	9
2.	40	ManyaStambh	-	1	-	-	-	1	-	1	-	-	-	1
3.	33	Kati Grah/Kati Shool/Kati Vat	8	4	-	-	8	4	8	4	-	-	8	4
4.	58	Sandhi Vat	6	6	-	-	6	6	6	6	-	-	6	6
5.	48	Pakshaghat	1	1	-	-	1	1	1	1	-	-	1	1
6.	53	Anartau	-	2	-	-	-	2	-	2	-	-	-	2

7.	**7**	**Amvat**	1	5	-	-	1	5	1	5	-	-	1	5
8.	**76**	**Vat Vikar/Vat Vyadhi**	5	3	-	-	5	3	5	3	-	-	5	3
9.	**43**	**Pratisyay**	2	-	-	-	2	-	2	-	-	-	2	-
10.	**84**	**JanuShool**	1	-	-	-	1	-	1	-	-	-	1	-
11.	**84**	**Raktrash**	1	-	-	-	1	-	1	-	-	-	1	-
12.	**02**	**Arsh**	2	-	-	-	2	-	2	-	-	-	2	-
13.	**77**	**Vat Rakt**	1	1	-	-	1	1	1	1	-	-	1	1
14.	**22**	**Gridhrasi**	5	1	-	-	5	1	5	1	-	-	5	1
15.	**45**	**ShwetPradar**	-	1	-	-	-	1	-	1	-	-	-	1
16.	**84**	**JanuShoth**	-	1	-	-	-	1	-	1	-	-	-	1
17.	**84**	**Artav Shay**	-	1	-	-	-	1	-	1	-	-	-	1
18.	**14**	**Bhagandar**	1	-	-	-	1	-	1	-	-	-	1	-
19.	**84**	**JaraVyadhi**	-	1	-	-	-	1	-	1	-	-	-	1
20.	**84**	**Parikartika**	1	-	-	-	1	-	1	-	-	-	1	-
21.	**84**	**Asthi Vat**	1	-	-	-	1	-	1	-	-	-	1	-
22.	**84**	**Daurbalaya**	-	2	-	-	-	2	-	2	-	-	-	2
23.	**19**	**Galgand**	-	1	-	-	-	1	-	1	-	-	-	1
24.	**66**	**UdarShool**	1	-	-	-	1	-	1	-	-	-	1	-
25.	**54**	**TamakSwas**	1	-	-	-	1	-	1	-	-	-	1	-
26.	**33**	**PristhGrah/PrigthShool**	-	3	-	-	-	3	-	2	-	-	-	2
27.	**55**	**ShiroRog**	-	1	-	-	-	1	-	-	-	-	-	-
28.	**84**	**VranShof**	1	-	-	-	1	-	-	-	-	-	-	-
29.	**84**	**Kastartav**	-	1	-	-	-	1	-	1	-	-	-	1
30.	**84**	**Kitibh**	1	-	-	-	1	-	-	-	-	-	-	-
31.	**84**	**Bandhaytw**	-	1	-	-	-	1	-	1	-	-	-	1
TOTAL			**43**	**47**	**0**	**0**	**43**	**47**	**41**	**44**	**0**	**0**	**41**	**44**

YEAR 2018-2019

S. No.	NAMC ID	NAMC Code	Disease	Admitted Patients						Discharged Patients					
				M	F	MC	FC	Total Male	Total Female	M	F	MC	FC	Total Male	Total Female
1.	1914	KA	व्रणशोफः	1	0	0	0	1	0	1	0	0	0	1	0
2.	78	AAB-61	पृष्ठग्रहः	34	26	0	0	34	26	33	25	0	0	33	25
3.	248	AAE-16	सन्धिवातः	23	55	0	1	23	56	22	54	0	1	22	55
4.	897	ED-4.3.3	किटिभः	0	3	0	0	0	3	1	3	0	0	1	3
5.	178	AAC-36	कम्पः/वेपथुः	1	0	0	0	1	0	1	0	0	0	1	0
6.	823	EC-6	आमवातः	5	19	0	0	5	19	5	19	0	0	5	19
7.	4	AA	वातव्याधिः	17	30	2	0	19	30	16	28	2	0	18	28
8.	157	AAC-20	गृध्रसी	8	18	0	0	8	18	8	18	0	0	8	18
9.	2171	MD-12	कुमारशोषः	0	0	1	0	1	0	0	0	1	0	1	0
10.	639	EB-10.6	कुक्षिशूलः	3	3	0	0	3	3	3	3	0	0	3	3
11.	1522	F	शिरःशूलः / शिरोरुक्	1	6	1	0	2	6	1	6	1	0	2	6
12.	49	AAB-33	ग्रीवास्तम्भः (केवलवात)	2	3	0	0	2	3	1	3	0	0	1	3
13.	141	AAC-8	अवबाहुकः	0	3	0	0	0	3	0	3	0	0	0	3
14.	1377	EL-2.27	योनिकन्दः	0	1	0	0	0	1	0	1	0	0	0	1
15.	1074	EE-3	अर्शः	4	0	0	0	4	0	4	0	0	0	4	0
16.	1033	ED-16	भगन्दरः	10	1	0	0	10	1	10	1	0	0	10	1
17.	163	AAC-24	पक्षाघातः	1	0	0	0	1	0	1	0	0	0	1	0
18.	1383	EL-3	आर्तवदुष्टिः	0	2	0	0	0	2	0	2	0	0	0	2
19.	1248	EJ-2	अश्मरी	0	1	0	0	0	1	0	1	0	0	0	1
20.	489	EA-4	श्वासः	1	0	0	0	1	0	1	0	0	0	1	0
21.	956	ED-8	वातरक्तम्	2	1	0	0	2	1	2	0	0	0	2	0
22.	167	AAC-25	पाददाहः	1	1	0	0	1	1	1	1	0	0	1	1
23.	174	AAC-32	मन्यास्तम्भः	0	2	0	0	0	2	0	1	0	0	0	1
24.	2170	MD-11	दौर्बल्यम्	4	3	5	0	9	3	4	3	5	0	9	3
25.	1266	EJ-3.6	वाताष्ठीला	2	0	0	0	2	0	2	0	0	0	2	0
26.	676	EB-12	परिकर्तिका	8	1	0	0	8	1	8	1	0	0	8	1
27.	147	AAC-12	आध्मानम्/आनाहः	1	1	0	0	1	1	1	1	0	0	1	1
28.	601	EB-7	ग्रहणीदोषः	1	0	0	0	1	0	1	0	0	0	1	0
29.	135	AAC-4	अर्दितः	3	0	0	0	3	0	2	0	0	0	2	0

30.	**480**	**EA-3**	**कासः**	2	0	0	0	2	0	2	0	0	0	2	0
31.	**812**	**EC-5**	**पाण्डुरोगः**	0	1	0	0	0	1	0	1	0	0	0	1
32.	**1374**	**EL-2.24**	**वन्ध्या**	0	2	0	0	0	2	0	2	0	0	0	2
33.	**4079**	**J30.4**	**Allergic rhinitis, unspecified**	1	0	0	0	1	0	1	0	0	0	1	0
34.	**1304**	**EK-3**	**श्वयथुः**	1	0	0	0	1	0	0	0	0	0	0	0
35.	**471**	**EA-2**	**हिक्का**	1	0	0	0	1	0	1	0	0	0	1	0
36.	**287**	**ABB-26**	**पालित्यम्**	1	0	0	0	1	0	1	0	0	0	1	0
37.	**2983**	**AAC-12.4**	**विबन्धः**	2	0	0	0	2	0	2	0	0	0	2	0
38.	**1457**	**EM-3**	**अपस्मारः**	1	0	0	0	1	0	1	0	0	0	1	0
39.	**XIV**	**N18**	**Chronic kidney disease**	1	0	0	0	1	0	1	0	0	0	1	0
40.	**2280**	**O-35**	**युवानपिडका (मुखदूषिका)**	1	0	0	0	1	0	1	0	0	0	1	0
41.	**177**	**AAC-35**	**विश्वाची**	1	0	0	0	1	0	0	0	0	0	0	0
TOTAL				**145**	**183**	**9**	**1**	**154**	**184**	**139**	**177**	**9**	**1**	**148**	**178**

YEAR 2019-20

S. No.	NAMC ID	NAMC Code	Disease	Admitted Patients				Total		Discharged Patients				Total	
				M	F	M/C	F/C	M	F	M	F	M/C	F/C	M	F
1.	823	EC-6	आमवातः	2	18	0	0	2	18	2	18	0	0	2	18
2.	1033	ED-16	भगन्दरः	6	0	0	0	6	0	6	0	0	0	6	0
3.	53	AAB-37	गृध्रसी (केवलवात)	12	17	0	0	12	17	12	17	0	0	12	17
4.	248	AAE-16	सन्धिवातः	33	63	0	1	33	64	34	65	0	1	34	66
5.	4	AA	वातव्याधिः	21	21	0	0	21	21	23	23	0	0	23	23
6.	676	EB-12	परिकर्तिका	6	1	0	0	6	1	6	1	0	0	6	1
7.	2170	MD-11	दौर्बल्यम्	1	4	0	1	1	5	1	4	0	1	1	5
8.	639	EB-10.6	कुक्षिशूलः	1	0	0	0	1	0	1	0	0	0	1	0
9.	78	AAB-61	पृष्ठ-ग्रहः(केवलवात)	12	7	0	0	12	7	13	9	0	0	13	9
10.	135	AAC-4	अर्दितः	1	0	0	0	1	0	2	0	0	0	2	0
11.	897	ED-4.3.3	किटिभः	3	0	0	0	3	0	3	0	0	0	3	0
12.	1522	F	शिरःशूलः	3	5	0	0	3	5	3	6	0	0	3	6
13.	956	ED-8	वातरक्तम्	1	1	0	0	1	1	1	2	0	0	1	2
14.	2584	RA-1	निद्रानाशः/अस्वप्नः	1	0	0	0	1	0	1	0	0	0	1	0
15.	174	AAC-32	मन्यास्तम्भः	2	1	0	0	2	1	2	2	0	0	2	2
16.	1304	EK-3	श्वयथुःशोफः/शोथः/	1	1	0	0	1	1	1	1	0	0	1	1
17.	49	AAB-33	ग्रीवास्तम्भः(केवलवात)	2	2	0	0	2	2	3	2	0	0	3	2
18.	163	AAC-24	पक्षाघातः	5	2	0	0	5	2	5	2	0	0	5	2
19.	489	EA-4	श्वासः	5	1	0	0	5	1	5	1	0	0	5	1
20.	2171	MD-12	कुमारशोष	0	0	0	1	0	1	0	0	0	1	0	1
21.	1457	EM-3	अपस्मारः	0	1	0	0	0	1	0	1	0	0	0	1
22.	-	-	व्रण	1	0	0	0	1	0	2	0	0	0	2	0
23.	883	ED-4	कुष्ठम्	2	1	0	0	2	1	2	1	0	0	2	1
24.	1869	J-9	कर्णनादः-	1	0	0	0	1	0	1	0	0	0	1	0
25.	1074	EE-3	अर्शः	6	3	0	0	6	3	6	3	0	0	6	3
26.	1139	EF-2.4.4	मधुमेहः	3	4	0	0	3	4	3	4	0	0	3	4
27.	1383	EL-3	आर्तवदुष्टि	0	2	0	0	0	2	0	2	0	0	0	2
28.	812	EC-5	पाण्डुरोगः	1	1	0	0	1	1	1	1	0	0	1	1
29.	1324	EK-4	उदर/उदररोगः	0	2	0	0	0	2	0	2	0	0	0	2
30.	515	EB-2	अतिसार	1	0	0	0	1	0	1	0	0	0	1	0
31.	1095	EE-4	ग्रन्थिः	1	0	0	0	1	0	1	0	0	0	1	0
32.	838	ED-2.2	कण्डूः	2	0	0	0	2	0	2	0	0	0	2	0
33.	1377	EL-2.27	योनिकन्दः	0	1	0	0	0	1	0	1	0	0	0	1

34.	1543	FA-3	खलित्यम्	0	1	0	0	0	1	0	1	0	0	0	1
35.	139	AAC-6	अस्थिशोषः	0	1	0	0	0	1	0	1	0	0	0	1
36.	1422	EM-1	मनोवहस्रोतोदुष्टिः	4	0	0	0	4	0	4	0	0	0	4	0
37.	177	AAC-35	विश्वाची	0	0	0	0	0	0	1	0	0	0	1	0
Total				**140**	**161**	**0**	**3**	**140**	**164**	**148**	**170**	**0**	**3**	**148**	**173**

YEAR 2020-21

S. No.	NAMC ID	NAMC Code	Disease	Admitted Patients				Total		Discharged Patients				Total	
				M	F	M/C	F/C	M	F	M	F	M/C	F/C	M	F
1.	248	AAE-16	सन्धिवातः	0	2	0	0	0	2	0	2	0	0	0	2
2.	1074	EE-3	अर्शः	0	1	0	0	0	1	0	1	0	0	0	1
3.	1457	EM-3	अपस्मारः	3	0	0	0	3	0	3	0	0	0	3	0
4.	157	AAC-20	गृध्रसी	1	1	0	0	1	1	1	1	0	0	1	1
5.	141	AAC-8	अवबाहुकः	0	1	0	0	0	1	0	1	0	0	0	1
6.	1522	F	शिरःशूल / शिरोरुक्	2	0	0	0	2	0	2	0	0	0	2	0
Total				**6**	**-**	**-**	**0**	**6**	**5**	**6**	**5**	**0**	**0**	**6**	**5**

B. Results of treatment for discharged patients (last five years excluding reporting period):

YEAR 2016-17

S. No.	Disease	Code No.	Good Resp.	Fair Resp.	Poor Resp.	No Resp.	LAMA	Ref.	TOTAL
1.	**Amavata**	**07**	06	-	-	01	-	-	07
2.	**Kasa**	**28**	01	-	-	-	-	-	01
3.	**Katishula**	**33**	06	-	-	-	01	-	07
4.	**Shwasa**	**54**	--	-	-	01	-	-	01
5.	**Sandhivata**	**58**	04	-	-	01	01	-	06
6.	**Shotha**	**59**	01	-	-	-	-	-	01
7.	**Sandhishula**	**61**	05	01	-	01	-	-	07
8.	**Vatavyadhi**	**76**	03	-	-	01	-	-	04
9.	**Jwara**	**26**	-	-	-	01	-	-	01
10.	**Arsha**	**02**	03	-	-	-	-	-	03
11.	**Amlapitta**	**06**	01	-	-	-	-	-	01
12.	**Twakroga**	**64**	-	-	01	-	-	-	01
13.	**Prameha**	**47**	02	-	-	-	-	-	02
14.	**Rajodosha**	**53**	01	-	-	-	-	-	01
15.	**Shirahshula**	**55**	01	-	-	-	-	-	01
18.	**Gridhrasi**	**22**	06	-	-	-	-	-	06
17.	**Ashmari**	**08**	-	-	-	01	-	-	01
18.	**Others**	**84**	04	-	01	-	-	-	05
TOTAL			**44**	**01**	**02**	**07**	**02**	**-**	**56**

YEAR 2017-18

S. No.	Disease	Code No.	Good Resp.	Fair Resp.	Poor Resp.	No Resp.	LAMA	Ref.	TOTAL
1.	**SandhiShool**	**61**	7	2	2	1	0	0	12
2.	**ManyaStambh**	**40**	1	0	0	0	0	0	1
3.	**Kati Grah/Kati Shool/KatiVat**	**33**	11	1	0	0	0	0	12
4.	**Sandhi Vat**	**58**	9	0	3	0	0	0	12
5.	**Pakshaghat**	**48**	0	1	0	1	0	0	2
6.	**Anartav**	**53**	1	1	0	0	0	0	2
7.	**Amvat**	**07**	4	0	1	1	0	0	6
8.	**Vat Vikar/Vat Vyadhi**	**76**	1	6	0	1	0	0	8
9.	**Pratisyay**	**43**	2	0	0	0	0	0	2
10.	**JanuShool**	**84**	1	0	0	0	0	0	1
11.	**Raktarsh**	**84**	1	0	0	0	0	0	1
12.	**Arsh**	**02**	2	0	0	0	0	0	2
13.	**Vat Rakt**	**77**	0	1	1	0	0	0	2
14.	**Gridhrasi**	**22**	4	0	1	1	0	0	6
15.	**ShwetPradar**	**45**	0	0	0	1	0	0	1
18.	**JanuShoth**	**84**	1	0	0	0	0	0	1
17.	**Artav Shay**	**84**	1	0	0	0	0	0	1
18.	**Bhagandar**	**14**	1	0	0	0	0	0	1
19.	**JaraVyadhi**	**84**	1	0	0	0	0	0	1
20.	**Parikartika**	**84**	1	0	0	0	0	0	1
21.	**Asthi Vat**	**84**	1	0	0	0	0	0	1
22.	**Daurbalya**	**84**	1	1	0	0	0	0	2
23.	**Galgand**	**19**	1	0	0	0	0	0	1
24.	**UdarShool**	**66**	0	1	0	0	0	0	1
25.	**TamakSwas**	**54**	1	0	0	0	0	0	1
26.	**PristhGrah/ PristhShool**	**33**	2	0	0	0	0	0	2
27.	**ShiroRog**	**55**	0	0	0	0	0	0	0
28.	**VranShof**	**84**	0	0	0	0	0	0	0
29.	**Kastartav**	**84**	1	0	0	0	0	0	1
30.	**Bandhayatv**	**84**	1	0	0	0	0	0	1
TOTAL			**57**	**14**	**8**	**6**	**0**	**0**	**85**

YEAR 2018-19

S. No.	NAMC ID	NAMC No.	Disease	Good Res.	Fair Res.	Poor Res.	No Res.	Ref.	LAMA	Total
1	**1522**	**F**	**शिरःशूलः**	7	0	0	1	0	0	**8**
2	**1914**	**KA**	**व्रणः**	1	0	0	0	0	0	**1**
3	**178**	**AAC-36**	**कम्पः/वेपथुः**	1	0	0	0	0	0	**1**
4	**823**	**EC-6**	**आमवातः**	19	2	1	2	0	0	**24**
5	**157**	**AAB-37**	**गृध्रसी (केवलवात)**	24	1	0	1	0	0	**26**
6	**2171**	**MD-12**	**कुमारशोषः**	1	0	0	0	0	0	**1**
7	**49**	**AAB-33**	**ग्रीवास्तम्भः (केवलवात)**	4	0	0	0	0	0	**4**
8	**639**	**EB-10.6**	**कुक्षिशूलः**	5	0	0	0	0	1	**6**
9	**1350**	**EL-2**	**योनिरोगः/योनि-व्यापदः**	0	1	0	0	0	0	**1**
10	**163**	**AAC-24**	**पक्षाघातः/पक्षवधः**	1	0	0	0	0	0	**1**
11	**141**	**AAC-8**	**अवबाहुकः**	2	1	0	0	0	0	**3**
12	**1074**	**EE-3**	**अर्शः**	4	0	0	0	0	0	**4**
13	**1383**	**EL-3**	**आर्तवदुष्टिः**	2	0	0	0	0	0	**2**
14	**1033**	**ED-16**	**भगन्दरः**	10	0	0	1	0	0	**11**
15	**956**	**ED-8**	**वातरक्तम्**	2	0	0	0	0	0	**2**
16	**1248**	**EJ-2**	**अश्मरी**	1	0	0	0	0	0	**1**
17	**489**	**EA-4**	**श्वासः**	1	0	0	0	0	0	**1**
18	**167**	**AAC-25**	**पाददाहः**	2	0	0	0	0	0	**2**
19	**174**	**AAC-32**	**मन्यास्तम्भः**	0	0	0	1	0	0	**1**
20	**2170**	**MD-11**	**दौर्बल्यम्**	11	0	0	1	0	0	**12**
21	**140**	**AAC-7**	**वाताष्ठीला**	2	0	0	0	0	0	**2**
22	**676**	**EB12**	**परिकर्तिका**	8	0	0	1	0	0	**9**
23	**147**	**AAC-12**	**आध्मानम्/आनाहः**	1	1	0	0	0	0	**2**
24	**601**	**EB-7**	**ग्रहणीदोषः**	0	0	0	1	0	0	**1**
25	**135**	**AAC-4**	**अर्दितः**	2	0	0	0	0	0	**2**
26	**480**	**EA-3**	**कासः**	1	0	0	1	0	0	**2**
27	**812**	**EC-5**	**पाण्डुरोगः**	1	0	0	0	0	0	**1**
28	**2983**	**AAC-12.4**	**विबन्धः**	1	0	0	1	0	0	**2**

29	**471**	**EA-2**	**हिक्का**	1	0	0	0	0	0	**1**
30	**287**	**ABB-26**	**पालित्यम्**	1	0	0	0	0	0	**1**
31	**1374**	**EL-2.24**	**वन्ध्या**	2	0	0	0	0	0	**2**
32	**4079**	**J30.4**	**Allergic rhinitis, unspecified**	1	0	0	0	0	0	**1**
33	**1457**	**EM-3**	**अपस्मारः**	1	0	0	0	0	0	**1**
34	**XIV**	**N18**	**Chronic kidney disease**	1	0	0	0	0	0	**1**
35	**78**	**AAB-61**	**पृष्ठग्रहः (केवलवात)**	53	5	0	0	0	0	**58**
36	**248**	**AAE-16**	**सन्धिवातः**	65	8	1	1	0	2	**77**
37	**4**	**AA**	**वातव्याधिः**	37	5	0	3	0	1	**46**
38	**2280**	**O-35**	**युवानपिडका (मुखदूषिका)**	1	0	0	0	0	0	**1**
39	**897**	**ED-4.3.3**	**किटिभः**	3	0	1	0	0	0	**4**
40	**1304**	**EK-3**	**श्वयथुः/शोफः/शोथः**	0	0	0	0	0	0	**0**
Total				**280**	**24**	**3**	**15**	**0**	**4**	**326**

YEAR 2019-20

Sr. No.	Dis_id	Dis_code	Dis_name	Good Resp.	Fair Resp.	Poor Resp.	NO Resp.	LAMA	Ref.	Total
1.	823	EC-6	आमवातः	16	-	1	3	-	-	20
2.	1033	ED-16	भगन्दरः	5	1	-	-	-	-	6
3.	53	AAB-37	गृध्रसी (केवलवात)	28	1	-	-	-	-	29
4.	248	AAE-16	सन्धिवातः	91	3	2	4	-	-	100
5.	4	AA	वातव्याधिः	36	2	3	3	2	-	46
6.	676	EB-12	परिकर्तिका	5	2	-	-	-	-	7
7.	2170	MD-11	दौर्बल्यम्	4	1	1	-	-	-	6
8.	639	EB-10.6	कुक्षिशूलः	1	-	-	-	-	-	1
9.	78	AAB-61	पृष्ठ-ग्रहः (केवलवात)	20	1	-	1	-	-	22
10.	135	AAC-4	अर्दितः	2	-	-	-	-	-	2
11.	897	ED-4.3.3	किटिभः	3	-	-	-	-	-	3
12.	1522	F	शिरःशूलः	8	-	-	1	-	-	9
13.	956	ED-8	वातरक्तम्	-	2	-	1	-	-	3
14.	2584	RA-1	निद्रानाशः/अस्वप्नः	-	1	-	-	-	-	1
15.	174	AAC-32	मन्यास्तम्भः	2	2	-	-	-	-	4
16.	1304	EK-3	श्वयथुः/शोथः/शो	2	-	-	-	-	-	2

			फः							
17.	49	AAB-33	ग्रीवास्तम्भः (केवलवात)	5	-	-	-	-	-	5
18.	163	AAC-24	पक्षाघातः	6	-	1	-	-	-	7
19.	489	EA-4	श्वासः	5	-	-	1	-	-	6
20.	2171	MD-12	कुमारशोष	1	-	-	-	-	-	1
21.	1457	EM-3	अपस्मारः	-	-	1	-	-	-	1
22.	-	-	व्रण	-	-	1	1	-	-	2
23.	883	ED-4	कुष्ठम्	2	1	-	-	-	-	3
24.	1869	J-9	कर्ण-नादः	1	-	-	-	-	-	1
25.	1074	EE-3	अर्शः	7	1	-	1	-	-	9
26.	1139	EF-2.4.4	मधुमेहः	5	1	-	1	-	-	7
27.	1383	EL-3	आर्तवदुष्टि	2	-	-	-	-	-	2
28.	812	EC-5	पाण्डुरोगः	2	-	-	-	-	-	2
29.	1324	EK-4	उदर/उदररोगः	1	-	-	1	-	-	2
30.	515	EB-2	अतिसार	-	-	-	1	-	-	1
31.	1095	EE-4	ग्रन्थिः	-	-	1	-	-	-	1
32.	838	ED-2.2	कण्डूः	2	-	-	-	-	-	2
33.	1377	EL-2.27	योनिकन्दः	1	-	-	-	-	-	1
34.	1543	FA-3	खलित्यम्	1	-	-	-	-	-	1
35.	139	AAC-6	अस्थिशोषः	1	-	-	-	-	-	1
36.	1422	EM-1	मनोवहस्रोतोदुष्टिः	4	-	-	-	-	-	4
37.	177	AAC-35	विश्वाची	-	-	1	-	-	-	1
Total				269	19	12	19	2	0	321

YEAR 2020-21

Sr. No.	Disease ID	Disease Code	Disease Name	Good Resp.	Fair Resp.	Poor Resp.	No Resp.	LAMA	Ref.	Total
1.	**248**	**AAE-16**	**सन्धिवातः**	**2**	**-**	**-**	**-**	**-**	**-**	**2**
2.	**1074**	**EE-3**	**अर्शः**	**1**	**-**	**-**	**-**	**-**	**-**	**1**
3.	**1457**	**EM-3**	**अपस्मारः**	**-**	**-**	**-**	**3**	**-**	**-**	**3**
4.	**157**	**AAC-20**	**गृध्रसी**	**2**	**-**	**-**	**-**	**-**	**-**	**2**
5.	**141**	**AAC-8**	**अवबाहुकः**	**1**	**-**	**-**	**-**	**-**	**-**	**1**
6.	**1522**	**F**	**शिरःशूल / शिरोरुक्**	**-**	**-**	**-**	**2**	**-**	**-**	**2**
Total				**6**	**-**	**-**	**5**	**-**	**-**	**11**

C. Percentage of yearly bed occupancy during different years since inception upto the reporting year 2021-22:

S. No.	Year	No. of beds available	Percentage of yearly bed occupancy
1.	**1972-73**	20	00.00
2.	**1973-74**	20	00.00
3.	**1974-75**	20	71.10
4.	**1975-76**	20	75.49
5.	**1976-77**	20	41.47
6.	**1977-78**	20	48.70
7	**1978-79**	20	10.02
8.	**1979-80**	20	27.60
9.	**1980-81**	20	28.83
10.	**1981-82**	20	34.95
11.	**1982-83**	20	44.61
12.	**1983-84**	20	72.17
13.	**1984-85**	20	60.10
14.	**1985-86**	20	59.87
15.	**1986-87**	20	50.25
16.	**1987-88**	20	44.27
17.	**1988-89**	20	36.36
18.	**1989-90**	20	18.95
19.	**1990-91**	20	30.06
20.	**1991-92**	20	32.35
21.	**1992-93**	20	26.87
22.	**1993-94**	20	29.10
23.	**1994-95**	20	20.88
24.	**1995-96**	20	33.78
25.	**1996-97**	20	37.69
26.	**1997-98**	20	33.21
27.	**1998-1999**	20	33.62
28.	**1999-2000**	20	32.24

29.	**2000-2001**	20	34.00
30.	**2001-2002**	20	39.00
31.	**2002-2003**	20	70.97
32.	**2003-2004**	20	73.75
33.	**2004-2005**	20	44.00
34.	**2005-2006**	20	34.03
35.	**2006-2007**	20	50.03
36.	**2007-2008**	20	44.00
37.	**2008-2009**	20	30.00
38.	**2009-2010**	20	22.00
39.	**2010-2011**	20	14.00
40.	**2011-2012**	20	21.45
41.	**2012-2013**	20	11.04
42.	**2013-2014**	20	19.47
43.	**2014-2015**	20	17.69
44.	**2015-2016**	20	17.47
45.	**2016-2017**	20	14.78
46.	**2017-2018**	20	15.87
47.	**2018-2019**	20	42.63
48.	**2019-2020**	20	48.78
49.	**2020-2021**	20	8.125
50.	**2021-2022**	20	11.38

Standard Formula for calculation of Bed occupancy:

$$= \frac{\text{Total days of the care to the patients during the year x 100}}{\text{No. of beds x Total No. of days in the year}}$$

- **Due to COVID-19 pandemic, the IPD services were very low.**
- **The average Bed Occupancy is** $= \frac{831\ x\ 100}{20\ x\ 365} = 11.38\%$

D. Statement of Patients Admitted/Discharged during the reporting period 2021-22

Sr. No.	dis_id	dis_code	dis_name	Pre. Year		Admitted Patients				Total		Discharged Patients				Total		Patient in current year	
				M	M	M	F	M/C	F/C	M	F	M	F	M/C	F/C	M	F	M	F
1	248	AAE-16	सन्धिवातः	0	0	4	13	0	0	4	13	4	13	0	0	4	13	0	0
2	1374	EL-2.24	वन्ध्या	0	0	0	3	0	0	0	3	0	3	0	0	0	3	0	0
3	633	EB-10	शूलः	0	0	0	1	0	0	0	1	0	1	0	0	0	1	0	0
4	157	AAC-20	गृध्रसी	0	0	2	7	0	0	2	7	2	7	0	0	2	7	0	0
5	163	AAC-24	पक्षाघातः पक्षवधः/	0	0	6	0	0	0	6	0	5	0	0	0	5	0	1	0
6	956	ED-8	वातरक्तम्	0	0	0	1	0	0	0	1	0	1	0	0	0	1	0	0
7	4	AA	वातव्याधिः	0	0	9	11	0	0	9	11	9	10	0	0	9	10	0	1
8	78	AAB-61	पृष्ठ ग्रहः-(केवलवात)	0	0	0	1	0	0	0	1	0	1	0	0	0	1	0	0
9	141	AAC-8	अवबाहुकः	0	0	0	1	0	0	0	1	0	1	0	0	0	1	0	0
10	897	ED-4.3.3	किटिभः	0	0	1	0	0	0	1	0	1	0	0	0	1	0	0	0
11	823	EC-6	आमवातः	0	0	2	5	0	0	2	5	2	4	0	0	2	4	0	1
12	49	AAB-33	ग्रीवास्तंभ :	0	0	2	1	0	0	2	1	2	1	0	0	2	1	0	0
13	1398	EL-5	श्वेतप्रदरः	0	0	0	1	0	0	0	1	0	1	0	0	0	1	0	0
14	1033	ED-16	भगन्दरः	0	0	2	0	0	0	2	0	2	0	0	0	2	0	0	0
15	174	AAC-32	मन्यास्तम्भः	0	0	0	1	0	0	0	1	0	1	0	0	0	1	0	0
16	147	AAC-12	आध्मानम्आनाहः /	0	0	0	1	0	0	0	1	0	1	0	0	0	1	0	0
17	410	BA-3.1	आर्तवक्षयः	0	0	0	1	0	0	0	1	0	1	0	0	0	1	0	0
18	1522	F	शिरःशूल / शिरोरुक्	0	0	1	0	0	0	1	0	1	0	0	0	1	0	0	0
Total				**0**	**0**	**29**	**48**	**0**	**0**	**29**	**48**	**28**	**46**	**0**	**0**	**28**	**46**	**1**	**2**

E. Statement of Result of Treatment for the patients discharged during the reporting period 2021-22:

Sr. No.	Disease ID	Disease Code	Disease Name	Good Resp.	Fair Resp.	Poor Resp.	No Resp.	LAMA	Ref.	Total
1.	248	AAE-16	सन्धिवातः	0	17	0	1	0	0	**18**
2.	1374	EL-2.24	वन्ध्या	0	2	0	1	0	0	**3**
3.	633	EB-10	शूलः	0	0	1	0	0	0	**1**
4.	157	AAC-20	गृध्रसी	3	4	2	0	0	0	**9**
5.	163	AAC-24	पक्षाघातःपक्षवधः/	1	6	0	0	0	0	**7**
6.	956	ED-8	वातरक्तम्	0	1	0	0	0	0	**1**
7.	4	AA	वातव्याधिः	3	11	2	1	2	0	**19**
8.	78	AAB-61	पृष्ठ ग्रहः-(केवलवात)	1	0	0	0	0	0	**1**
9.	141	AAC-8	अवबाहुकः	0	1	0	0	0	0	**1**
10.	897	ED-4.3.3	किटिभः	0	1	0	0	0	0	**1**

11.	823	EC-6	आमवातः	1	5	0	0	0	0	**6**
12.	49	AAB-33	ग्रीवास्तंभ:	0	3	0	0	0	0	**3**
13.	1398	EL-5	श्वेतप्रदरः	1	0	0	0	0	0	**1**
14.	1033	ED-16	भगन्दरः	0	1	0	1	0	0	**2**
15.	174	AAC-32	मन्यास्तम्भः	0	0	0	1	0	0	**1**
16.	147	AAC-12	आध्मानम्/ आनाहः	0	1	0	0	0	0	**1**
17.	410	BA-3.1	आर्तवक्षयः	0	1	0	0	0	0	**1**
18.	1522	F	शिरःशूल / शिरोरुक्	0	1	0	0	0	0	**1**
Total				**10**	**55**	**5**	**5**	**2**	**0**	**77**

F. Disease wise average duration of hospitalization (based on days of care to the patients discharged excluding cases of Death and LAMA (2021-2022) :
Average duration at hospitalization (of a particular disease)

Sr. No	Dis_id	Dis_code	Dis_Name	Average duration of hospitalization
1.	248	AAE-16	सन्धिवातः	211
2.	1374	EL-2.24	वन्ध्या	20
3.	633	EB-10	शूलः	5
4.	157	AAC-20	गृध्रसी	128
5.	163	AAC-24	पक्षाघातःपक्षवधः/	70
6.	956	ED-8	वातरक्तम्	1
7.	4	AA	वातव्याधिः	191
8.	78	AAB-61	पृष्ठ(केवलवात) ग्रहः-	19
9.	141	AAC-8	अवबाहुकः	9
10.	897	ED-4.3.3	किटिभः	9
11.	823	EC-6	आमवातः	57
12.	49	AAB-33	ग्रीवास्तंभ:	45
13.	1398	EL-5	श्वेतप्रदरः	7
14.	1033	ED-16	भगन्दरः	23
15.	174	AAC-32	मन्यास्तम्भः	9
16.	147	AAC-12	आध्मानम्/ आनाहः	5
17.	410	BA-3.1	आर्तवक्षयः	8
18.	1522	F	शिरःशूल / शिरोरुक्	14
			Total	**831**

13. Statement of Patients attended Out Patient Department (OPD) during reporting year 2021-22:

S.No.	NAMC ID	Disease	NAMC Code	No. of patients attended													
				New						Old						Grand	
				Adult		Child		Total		Adult		Child		Total		Total	
				M	F	M	F	M	F	M	F	M	F	M	F	M	F
1	147	आध्मानम्/ आनाहः	AAC-12	200	107	1	2	201	109	83	41	1	0	84	41	285	150
2	2983	विबन्ध	AAC-12.4	328	100	6	3	334	103	128	29	2	0	130	29	464	132
3	152	एकाङ्गवातः	AAC-15	6	0	0	0	6	0	4	0	0	0	4	0	10	0
4	157	गृध्रसी	AAC-20	69	102	0	0	69	102	26	56	0	0	26	56	95	158
5	163	पक्षाघातः/पक्षवधः	AAC-24	13	2	0	0	13	2	6	0	0	0	6	0	19	2
6	134	अपतानकः	AAC-3	1	0	0	0	1	0	0	0	0	0	0	0	1	0
7	174	मन्यास्तम्भः	AAC-32	28	41	0	0	28	41	7	15	0	0	7	15	35	56
8	177	विश्वाची	AAC-35	0	2	0	0	0	2	1	0	0	0	1	0	1	2
9	179	शिरोग्रहः	AAC-37	8	21	0	0	8	21	4	3	0	0	4	3	12	24
10	135	अर्दितः	AAC-4	1	2	0	0	1	2	1	1	0	0	1	1	2	3
11	139	अस्थिशोषः	AAC-6	4	7	0	0	4	7	1	5	0	0	1	5	5	12
12	141	अवबाहुकः	AAC-8	7	11	0	0	7	11	2	4	0	0	2	4	9	15
13	142	ऊरुस्तम्भः	AAC-9	4	1	0	0	4	1	3	0	0	0	3	0	7	1
14	248	सन्धिवातः	AAE-16	677	957	0	0	677	957	360	529	1	0	361	529	1038	1486
15	285	दाहः	ABB-24	8	4	0	0	8	4	0	0	0	0	0	0	8	4
16	287	पालित्य	ABB-26	10	18	1	0	11	18	2	8	0	0	2	8	13	26
17	348	अग्निमान्द्यम्	ACB-23	181	86	16	13	197	99	83	37	6	3	89	40	286	139
18	410	आर्तवक्षयः	BA-3.1	0	91	0	2	0	93	0	38	0	0	0	38	0	131
19	413	स्तन्यक्षयः	BA-4.1	0	1	0	0	0	1	0	0	0	0	0	0	0	1
20	420	राजयक्ष्मा	BI	0	1	0	0	0	1	0	0	0	0	0	0	0	1
21	471	हिक्का	EA-2	2	0	0	0	2	0	0	0	0	0	0	0	2	0
22	480	कासः	EA-3	494	251	14	17	508	268	114	81	4	6	118	87	626	355
23	489	श्वासः	EA-4	140	106	0	2	140	108	65	36	0	1	65	37	205	145
24	500	स्वरभेदः	EA-5	4	0	0	0	4	0	1	0	0	0	1	0	5	0

25	633	शूलः	EB-10	13	13	0	1	13	14	3	4	0	0	3	4	16	18
26	643	परिणामशूलः	EB-10.10	2	4	0	0	2	4	0	0	0	0	0	0	2	4
27	647	अन्नद्रवशूलः	EB-10.11	1	5	0	0	1	5	0	2	0	0	0	2	1	7
28	650	हृदयशूलः	EB-10.14	1	0	0	0	1	0	1	0	0	0	1	0	2	0
29	651	पार्श्वशूलः	EB-10.15	2	0	0	0	2	0	0	0	0	0	0	0	2	0
30	656	उदावर्तः	EB-11	2	1	0	0	2	1	1	0	0	0	1	0	3	1
31	676	परिकर्तिका	EB-12	132	87	0	1	132	88	55	41	0	0	55	41	187	129
32	515	अतिसारः	EB-2	17	14	3	0	20	14	6	5	0	0	6	5	26	19
33	524	आमातिसारः	EB-2.8	0	1	0	0	0	1	0	1	0	0	0	1	0	2
34	536	अजीर्णम्	EB-3	121	74	1	4	122	78	43	23	1	0	44	23	166	101
35	558	अम्लपित्तम्	EB-4	323	215	1	2	324	217	128	104	0	0	128	104	452	321
36	586	छर्दिः	EB-6	1	2	0	0	1	2	0	0	0	0	0	0	1	2
37	601	ग्रहणीदोषः	EB-7	52	26	2	1	54	27	30	8	0	1	30	9	84	36
38	611	गुल्मः	EB-8	0	0	0	0	0	0	1	0	0	0	1	0	1	0
39	628	प्रवाहिका	EB-9	37	9	0	0	37	9	24	7	0	0	24	7	61	16
40	681	हृद्रोगः	EC-2	25	13	0	0	25	13	10	2	0	0	10	2	35	15
41	689	ज्वरः	EC-3	285	192	3	7	288	199	46	47	0	1	46	48	334	247
42	761	विषमज्वरः	EC-3.10	0	3	0	0	0	3	0	3	0	0	0	3	0	6
43	812	पाण्डुरोगः	EC-5	24	54	1	2	25	56	12	25	0	1	12	26	37	82
44	823	आमवातः	EC-6	70	228	1	0	71	228	41	129	0	0	41	129	112	357
45	828	अरुचिः	EC-7	11	3	4	2	15	5	1	1	0	0	1	1	16	6
46	997	विसर्पः	ED-10	2	0	1	0	3	0	2	0	0	0	2	0	5	0
47	1017	प्लीहोदरः	ED-12	14	1	0	0	14	1	7	1	0	0	7	1	21	2
48	1024	श्लीपदः	ED-13	1	1	0	0	1	1	0	0	0	0	0	0	1	1
49	1029	शीतपित्तम्	ED-14	22	25	1	0	23	25	6	11	0	0	6	11	29	36
50	1031	उदर्दः	ED-15	0	0	0	0	0	0	1	0	0	0	1	0	1	0
51	1033	भगन्दरः	ED-16	74	24	0	0	74	24	26	15	0	0	26	15	100	39
52	838	कण्डूः	ED-2.2	141	86	8	10	149	96	60	43	1	0	61	43	210	139
53	850	निद्रानाशः / अनिद्रा	ED-2.8	19	11	0	0	19	11	4	9	0	0	4	9	23	20
54	874	कामला	ED-3	2	1	0	0	2	1	2	0	0	0	2	0	4	1

55	883	कुष्ठम्	ED-4	228	179	8	8	236	187	142	83	1	1	143	84	379	271
56	905	विचर्चिका	ED-4.3.10	33	19	1	0	34	19	11	3	0	0	11	3	45	22
57	897	किटिभः	ED-4.3.3	6	5	0	2	6	7	3	6	0	0	3	6	9	13
58	898	विपादिका	ED-4.3.4	3	1	0	0	3	1	4	0	0	0	4	0	7	1
59	900	दद्रु-कुष्ठः	ED-4.3.6	82	36	2	4	84	40	39	18	0	0	39	18	123	58
60	902	पामा	ED-4.3.8	8	3	2	1	10	4	3	0	0	0	3	0	13	4
61	919	श्वित्रः	ED-5	20	10	0	5	20	15	5	9	1	3	6	12	26	27
62	942	लघु-मसूरिका	ED-6.8	0	1	0	0	0	1	0	0	0	0	0	0	0	1
63	944	रक्तपित्तम्	ED-7	2	2	1	0	3	2	0	0	0	0	0	0	3	2
64	956	वातरक्तम्	ED-8	37	48	0	0	37	48	10	13	0	0	10	13	47	61
65	972	विद्रधिः	ED-9	4	6	0	0	4	6	0	3	0	0	0	3	4	9
66	1064	अर्बुदः	EE-2	2	2	0	0	2	2	0	0	0	0	0	0	2	2
67	1074	अर्शः	EE-3	451	182	0	1	451	183	237	87	0	0	237	87	688	270
68	1095	ग्रन्थिः	EE-4	48	61	3	1	51	62	24	29	0	0	24	29	75	91
69	1139	मधुमेहः	EF-2.4.4	646	256	0	9	646	265	465	160	0	7	465	167	1111	432
70	1161	मेदोरोगः	EF-3	43	58	3	1	46	59	18	23	2	1	20	24	66	83
71	1163	पिडका	EF-4	1	2	1	1	2	3	1	3	0	0	1	3	3	6
72	1173	क्लैब्यम्	EI-2	3	0	0	0	3	0	5	0	0	0	5	0	8	0
73	1244	अन्त्र-वृद्धिः	EI-6.8	0	0	0	0	0	0	0	0	0	0	0	0	0	0
74	1245	अण्ड-वृद्धिः	EI-6.9	2	0	0	0	2	0	0	0	0	0	0	0	2	0
75	1248	अश्मरी	EJ-2	57	25	0	0	57	25	13	9	0	0	13	9	70	34
76	1258	मूत्राघातः	EJ-3	5	1	0	0	5	1	1	0	0	0	1	0	6	1
77	1266	वाताष्ठीला	EJ-3.6	42	0	0	0	42	0	29	0	0	0	29	0	71	0
78	1278	मूत्रकृच्छ्रम्	EJ-4	122	62	5	2	127	64	58	45	1	1	59	46	186	110
79	1291	तृष्णा	EK-2	0	0	0	0	0	0	0	0	0	0	0	0	0	0
80	1304	श्वयथुः/शोथः/शोफः	EK-3	14	18	0	1	14	19	6	20	0	0	6	20	20	39
81	1337	यकृद्दाल्युदरः	EK-4.6	9	11	0	0	9	11	1	8	0	0	1	8	10	19
82	1360	उदावर्तिनी	EL-2.10	0	1	0	0	0	1	0	0	0	0	0	0	0	1

83	1374	वन्ध्या	EL-2.24	0	25	0	0	0	25	0	13	0	0	0	13	0	38
84	1377	योनिकन्दः	EL-2.27	0	2	0	0	0	2	0	2	0	0	0	2	0	4
85	1359	अरजस्का	EL-2.9	0	4	0	0	0	4	0	2	0	0	0	2	0	6
86	1392	रक्तप्रदरः/असृग्दरः	EL-4	0	46	0	1	0	47	0	25	0	0	0	25	0	72
87	1398	श्वेतप्रदरः	EL-5	0	187	0	5	0	192	0	77	0	0	0	77	0	269
88	1521	भ्रमः	EM-11	1	3	0	0	1	3	1	2	0	0	1	2	2	5
89	1457	अपस्मारः	EM-3	4	14	0	0	4	14	1	11	0	0	1	11	5	25
90	1522	शिरःशूल / शिरोरुक्	F	38	80	0	3	38	83	22	31	0	0	22	31	60	114
91	1530	अर्धावभेदकः	F-8	0	4	0	0	0	4	0	3	0	0	0	3	0	7
92	1543	खलित्यम्	FA-3	36	45	0	1	36	46	9	8	0	1	9	9	45	55
93	1548	दारुणकः	FA-4	14	18	0	1	14	19	1	5	0	1	1	6	15	25
94	1583	दन्तरोगः	GC	17	10	0	1	17	11	2	2	0	0	2	2	19	13
95	1604	गलशुण्डिका	GE-1	3	2	3	0	6	2	3	0	0	0	3	0	9	2
96	1616	कण्ठरोगः	GF	4	1	0	0	4	1	2	0	0	0	2	0	6	1
97	1643	गलगण्डः	GF-19	18	23	0	0	18	23	4	9	0	0	4	9	22	32
98	1649	मुखपाकः	GG	18	12	1	3	19	15	13	3	0	0	13	3	32	18
99	1662	अक्षिरोगः/नेत्ररोगः	H	11	3	0	1	11	4	2	1	0	0	2	1	13	5
100	1761	तिमिरः	HG-1	3	0	0	1	3	1	0	0	0	0	0	0	3	1
101	1814	प्रतिश्यायः /पीनसः	I-1	286	162	18	14	304	176	97	58	6	5	103	63	407	239
102	1852	नासागत-रक्तपित्तम्	I-15	1	0	0	0	1	0	0	0	0	0	0	0	1	0
103	1853	नासार्शः	I-16	1	0	0	0	1	0	0	0	0	0	0	0	1	0
104	1832	अपीनसः	I-6	40	29	3	0	43	29	7	11	3	0	10	11	53	40
105	1860	कर्णरोगः	J	5	2	1	0	6	2	3	0	0	0	3	0	9	2
106	1880	कर्ण-स्रावः	J-14	1	0	0	0	1	0	0	0	0	0	0	0	1	0
107	1897	कर्णशूलः	J-20	8	6	0	0	8	6	2	2	0	0	2	2	10	8
108	1913	व्रणः	K	8	12	0	0	8	12	5	4	0	0	5	4	13	16
109	1961	नाडीव्रणः	K-14	2	2	0	0	2	2	1	1	0	0	1	1	3	3
110	1971	भग्नः (अस्थिभग्नः)	LA	2	1	0	0	2	1	2	0	0	0	2	0	4	1

111	1972	सन्धिमुक्तम्	LA-1	1	0	0	0	1	0	0	0	0	0	0	0	1	0
112	2170	दौर्बल्यम्	MD-11	378	281	14	15	392	296	138	104	7	7	145	111	537	407
113	2164	गुदपाकः	MD-7	1	1	0	0	1	1	0	0	0	0	0	0	1	1
114	2184	कृमिः/सञ्जातकृमि	N	1	1	1	3	2	4	0	0	1	0	1	0	3	4
115	2250	कदरः	O-14	1	0	0	0	1	0	0	0	0	0	0	0	1	0
116	2251	कुनखः	O-15	1	2	0	0	1	2	0	5	0	0	0	5	1	7
117	2280	युवानपिडका (मुखदूषिका)	O-35	34	68	1	3	35	71	10	19	0	1	10	20	45	91
118	2287	व्यङ्गः	O-42	20	18	0	0	20	18	3	7	0	1	3	8	23	26
119	2243	अरूंषिका	O-7	8	8	0	2	8	10	4	0	0	0	4	0	12	10
120	4	वातव्याधिः	AA	303	321	1	1	304	322	172	149	0	0	172	149	476	471
121	639	कुक्षिशूलः	EB-10.6	44	43	1	5	45	48	19	16	1	2	20	18	65	66
122	78	पृष्ठ-ग्रहः (केवलवात)	AAB-61	28	39	0	0	28	39	11	17	0	0	11	17	39	56
123	XIV	रजोनिवृति लक्षण	N95.1	2	4	0	0	2	4	0	0	0	0	0	0	2	4
124	1606	तुण्डिकेरी	GE-3	1	2	2	0	3	2	1	1	0	0	1	1	4	3
125	114	शुक्रक्षयः (केवलवात)	AAB-97	37	0	0	0	37	0	16	0	0	0	16	0	53	0
126	1188	रेतोदोषः	EI-3	3	0	0	0	3	0	0	0	0	0	0	0	3	0
127	245	शुक्रगतवातः	AAE-13	25	0	0	0	25	0	4	0	0	0	4	0	29	0
128	178	कम्पः/वेपथुः	AAC-36	19	0	0	0	19	0	5	0	0	0	5	0	24	0
129	2171	कुमारशोषः	MD-12	0	0	0	2	0	2	0	0	0	0	0	0	0	2
130	895	एककुष्ठः	ED-4.3.1	10	3	0	0	10	3	1	8	0	0	1	8	11	11
131	1422	मनोवहस्रोतोदुष्टिः	EM-1	33	31	0	2	33	33	11	18	0	1	11	19	44	52
132	240	असृग्गतवातः/रक्तगतवात	AAE-8	49	32	0	0	49	32	15	23	0	0	15	23	64	55
133	-	अनुर्जता	J30.1	3	1	0	0	3	1	2	0	0	0	2	0	5	1
134		कार्श्य	AAB-22	30	6	5	1	35	7	12	1	0	1	12	2	47	9
135	1383	आर्तवदृष्टि	EL-3	0	36	0	0	0	36	0	24	0	0	0	24	0	60
136	XIV	वृक्क विकार	NO3	1	0	0	0	1	0	0	0	0	0	0	0	1	0
Total				**7001**	**5583**	**141**	**170**	**7142**	**5753**	**3077**	**2545**	**39**	**46**	**3116**	**2591**	**10258**	**8344**

14. Geriatric OPD and other OPDs, if any:

Disease wise Statement of patients of Geriatric OPD during the reporting period, 2021-2022:

S.No	NAMC ID	NAMC Code	Name of Disease	No. of patients attended						
				New Adult		Old Adult		Total		Grand Total
				M	F	M	F	M	F	
1.	2983	AAC-12.4	विबन्ध	41	12	20	4	61	16	77
2.	157	AAC-20	गृध्रसी	1	2	1	2	2	4	6
3.	348	ACB-23	अग्निमान्द्यम्	8	2	6	1	14	3	17
4.	1643	GF-19	गलगण्डः	1	0	0	0	1	0	1
5.	480	EA-3	कासः	36	10	19	2	55	12	67
6.	489	EA-4	श्वासः	12	1	5	1	17	2	19
7.	628	EB-9	प्रवाहिका	1	1	0	0	1	1	2
8.	689	EC-3	ज्वरः	6	2	0	1	6	3	9
9.	823	EC-6	आमवातः	0	3	0	1	0	4	4
10.	883	ED-4	कुष्ठम्	10	11	7	1	17	12	29
11.	1662	H	अक्षिरोगः/नेत्ररोगः	1	0	0	0	1	0	1
12.	1074	EE-3	अर्शः	16	7	8	5	24	12	36
13.	1139	EF-2.4.4	मधुमेहः	40	7	20	9	60	16	76
14.	1278	EJ-4	मूत्रकृच्छ्रम्	13	0	14	2	27	2	29
15.	1522	F	शिरःशूल / शिरोरुक्	2	0	2	0	4	0	4
16.	1583	GC	दन्तरोगः	2	0	0	0	2	0	2
17.	1814	I-1	प्रतिश्यायः /पीनसः	9	2	5	2	14	4	18
18.	2170	MD-11	दौर्बल्यम्	27	11	12	3	39	14	53
19.	4	AA	वातव्याधिः	7	2	5	2	12	4	16
20.	248	AAE-16	सन्धिगतवातः	71	63	46	29	117	92	209
21.	240	AAE-8	असृग्गतवातः/रक्तगतवातः	3	1	1	0	4	1	5
22.	1266	EJ-3.6	वाताष्ठीला	2	0	2	0	4	0	4
23.	78	AAB-61	पृष्ठ-ग्रहः (केवलवात)	0	2	0	0	0	2	2
24.	178	AAC-36	कम्पः/वेपथुः	4	0	0	0	4	0	4
25.	1161	EF-3	मेदोरोगः	1	0	0	0	1	0	1
26.	558	EB-4	अम्लपित्तम्	18	4	12	2	30	6	36
27.	1897	J-20	कर्णशूलः	1	2	2	0	3	2	5
28.	174	AAC-32	मन्यास्तम्भः	1	1	1	0	2	1	3
29.	147	AAC-12	आध्मानम्/ आनाहः	7	3	7	2	14	5	19
30.	1324	EK-4	उदर/उदररोगः	3	2	0	0	3	2	5
31.	163	AAC-24	पक्षाघातः/पक्षवधः	1	0	0	0	1	0	1
32.	515	EB-2	अतिसार	3	0	1	0	4	0	4
33.	1304	EK-3	श्वयथुः/शोथः/शोफः	2	0	0	0	2	0	2
34.	45	AAB-22	कार्श्य	2	0	0	0	2	0	2

35.	956	ED-8	वातरक्तम	0	1	0	0	0	1	1
36.	894	ED-4.3	श्वुद्रकुष्ठ	3	0	6	3	9	3	12
37.	681	EC-2	हृद्रोग	1	0	0	1	1	1	2
38.	XIV	N95.1	अश्मरी	0	0	1	0	1	0	1
39.	1649	GG	मुखपाकः	0	1	2	0	2	1	3
40.	1095	EE-4	ग्रन्थिः	0	1	1	2	1	3	4
Total				**356**	**154**	**206**	**75**	**562**	**229**	**791**

15. Karma wise Panchkarma during the reporting period, 2021-2022:

S.No.	Disease	Male	Female	Total
1	Abhyang	227	356	**583**
2	Swedan	145	353	**498**
3	Kati Basti	62	162	**224**
4	Janu Basti	1	53	**54**
5	Matra Basti	56	145	**201**
6	Shirodhara	29	2	**31**
7	Baluka Swedan	0	33	**33**
8	Kwath Basti	30	72	**102**
9	Akshitarpan	10	15	**25**
10	Pichhu	0	17	**17**
11	Griva Basti	43	41	**84**
12	Patra Pind Swedan	0	41	**41**
13	Raktmokshan	0	1	**1**
14	Kshar Sutra	2	0	**2**
15	Virechan Karma	0	0	**0**
16	Udvartan	2	28	**30**
17	Nasya	0	19	**19**
18	Dressing	1	0	**1**
19	Sastik Shali Pind Swedan	83	17	**100**
20	Chooran Potli swedan	0	0	**0**
21	Sheer Basti	0	11	**11**
Grand Total		**691**	**1366**	**2057**

16. GUGGULU HERBAL FARM, MANGLIAWAS, AJMER
(YEAR 2021-2022)

1. Name and Address of the Institute:

Guggulu Herbal farm, Mangliawas Distt.- Ajmer, **Under M.S. Regional Ayurveda Research Institute Jaipur** CCRAS (Ministry of Ayush, Govt. of India).

2. Date of starting the Cultivation:-

Guggulu Herbal Farm Mangliawas was started in 1st April 1972 in which research, development and extensive cultivation of Guggulu plants were done till 31st December 2007 through plant cuttings, air layering and seedlings. But due to very low Guggulu gum exudation severe drought favouring since long time and regular audit objections it was handed over to **National Institute of Ayurveda Jaipur** on dt. 1st January 2008 as per instruction of Ministry of Auyush. Since then it was under National Institute of Ayurveda Jaipur till October 2016. During this period no development and cultivation of Guggulu Herbal Farm were done by NIA Jaipur. It was further returned back by NIA Jaipur on dt. 9th November 2016.

3. Details of Land Under Cultivation:-

(i) The land of Guggulu Herbal Farm Mangliawas, Distt. Ajmer is under control of M.S.R.A.R.I. Jaipur (CCRAS, New Delhi).

(ii) At present there is about $^{-}_{+}$142 acres of land under Guggulu Herbal Farm Mangliawas for cultivation of medicinal plants especially for extensive cultivation of Guggulu. Out of which 140 Acres of land is forest land which is in our possession and cultivation of Guggulu is being carried out since inception but document related to land is not available with us. Document related to 2 Acres of land (6 Bighas) is available with us which has been allotted to us by Government of Rajasthan during 1983 in which tube-well is established. Out of total 142 Acres of land $1/3_{rd}$ land is brought under cultivation of medicinal plants while $2/3_{rd}$ area of the land is occupied by natural flora of medicinal importance.

(iii) At present only one tube well is functional which has been repaired during the month of February 2020 which is not discharging sufficient water and also drying during summer season due to severe drought favoring since long time due to which nursery development and future course of cultivation programme is not being started. At present such water is used only for drinking purpose of working staff.

(iv) The Farm is situated along the main chains of Aravali hills which has several hills and hillocks containing rocks, boulders and gravels. The soil of the Farm is more or less poor in respect of mineral nutrients.

4. Details of staff engaged in the cultivation programme at Guggulu Herbal Farm Mangliawas, Ajmer.

Sl. No.	Name and Designation	Date of Joining	Qualification	Duties Assigned
1.	Sh.S.K. Gaur R.O. (Bot.)	23/12/2016	M.Sc. (Bot.)	Supervision of overall activities
2.	Sh. Radheshyam Meena Attendant	-	Literate	Agricultural practices

3.	Sh. Chouthu Ram Meena Labourer, (MTS)	15/01/1993	VIII Std.	-do-
4.	Sh. Rajendra Kumar Dia Labourer, (MTS)	25/07/2001	10th Std.	-do-
5.	Sh. Shanker Lal Mali Labourer, (MTS)	02/01/2003	8th Std.	-do-
6.	Sh. Sohan Singh Rawat Trainee (MTS)	-	8th Std.	-do-

5. Brief description of the land under cultivation, giving its detail of Geographical, Ecological and Edaphic status, type of soil and erosion etc.

Land:- Agro-climatically Guggulu Herbal Farm Mangliawas is situated at 74^0N latitude and 26^0E longitude, in Village Mangliawas on National Highway No. 8 between Ajmer and Beawar about 26 Km. away from Ajmer. It is located along the foot hills of the Aravalli range on the south-east about 4 Km. away from the village Mangliawas towards south east direction. The farm is situated at an average altitude of 470.7 M.. It comprises the foot-hills, hillocks and slopes of the hill situated along the main chain of the Aravali range.

Climate:-The climate of the area is typically semi-arid with an average rain fall of 350-500 mm. About 70% of the rainfall received during the month of july to August and normally little or no rains occur during the winter months. The humidity of Mangliawas is low indicating presence of extreme hot temperature in summer month, the maximum temperature reaches upto 46^0C and it is as low as 5-6^0C during winter month.

Geography & Ecology:- The total area of Guggulu Herbal Farm Mangliawas is about 142 acres with undulated topography. The Farm is divided into 20 Blocks based on topographically characteristic terrain situated on foot-hill, hillocks and plains. The wind direction for most part of the year is from south to North-East. Wind velocity is higher in the month of May June and lower in the month of December. During the winter winds are low and variable. Frost also occurs during winter.

Basaltic rocks are dominant in the area given rise to a variety of minerals like horn blend along with granite, quartzite with feldspar, calcareous and ferugenous are quite common in the lower horizons of the soil.

The grazing and afforestation have adversely affected the biotic factor of the region outside the farm area. The natural vegetation mostly of medicinal importance also exists in the farm i.e. ***Azadirachta indica, Asparagus racemosus, Drimia indica, Tinospora cordifolia, Tephrosia purpurea, Tribulus terrestris, Gloriosa superba, Grewia tenax, Euphorbia nivulia, Balanites aegyptica, Rhus mysoorensis, Calotropis procera, Capparis decidua, Zizyphus jujuba, Acacia nilotica, Acacia senegal*** etc.

Soil:- The soil of the farm is almost sandy and sandy loam with presence of rock stones and boulders. It is poor in respect of nutritional status, chemical composition and textural structure. Two types of soil erosion such as surface and gully erosion were observed in this region.

6. Lay out of Farm Giving details of the Plants Cultivated under Experimental/ Mass cultivation.

S. No.	Sanskrit Name	Regional/ Local Name	Botanical Name	Total No. of plants in the field	Average yield
1	Guggulu	Guggul	*Commiphora wightii* (Arn.) Bhand.	2299	150-200 Gm./Plant
2	-	Chittor Guggul	*Commiphora madagascariensis* Jacq. Sy. *Commiphira agallocha* Engl.	10	-
3	Irimeda	Safed Kikar	*Acacia leucophloea* (Roxb) Willd.	Abundant	-
4	Babbula	Babool	*Acacia nilotica* (L.) Dell.	Abundant	-
5	Apamarga	Latjira	*Achyranthes aspera* L.	Abundant	-
6	-	Kumat	*Acacia Senegal* L. Willd.	Abundant	-
7	Gorakhganja	-	*Aerva javanica* (Bum. F.) Juss. Ex. Schultz.	Scattered	-
8	Dhava	Dhokra	*Anogeissus pendula* Edgew.	Abundant	-
9	Satavari	Narkanta	*Asparagus racemosus* Willd.	Scattered	-
10	Nimba	Neem	*Azadirachta indica* A.Juss.	Abundant	-
11	Ingudi	Hingot	*Balanites aegyptica* (L.) Delile.	Abundant	-
12	Peet Sariak	Bajradanti	*Barleria prionites* L.	Scattered	-
13	Shwet Sariak	Bajradanti	*Barleria cristata* L.	Scattered	-
14	Punarnava	Sathi	*Boerhavia diffusa* L.	Scattered	-
15	-	Sathi	*Boerhavia verticillata* L.		-
16	Shallaki	Shalar	*Boswellia serrata* Roxb. ex. Colebr.	3	-
17	Shivlingi	-	*Breynia laciniosa* L.	Scattered	-
18	-	-	*Bursera hindsiana*(Benth.) Engl.	12	-
19	Raktark	Aankra	*Calotropis procera* (Ait.) Dryand.	Frequent	-
20	Karir	Kair	*Capparis decidua* (Forssk.) Edgew.	Abundant	-
21	Karnsphota	-	*Cardiospermum halicacabum* L.	Scattered	-
22	Shankhpushpi	-	*Convolvulus prostratus* Forsk.	Scattered	-
23	-	Mirchiakand	*Corallocarpus epigaeus* (Rottl.) Hook.f.	Scattered	-
24	Sahadevi	-	*Cyanthillium cinereum* (L.) H.Roxb.	Scattered	-
25	Virataru	-	*Dichrostachys cinneria* W.&A.	Several	-

26	Darbha	Dabh	*Desmostachya bipinnata* (L.) Sapf.	Abundant	-
27	Van Palandu	Jangali Kanda	*Drimia indica* (Roxb.) Josseph.	Scattered	-
28	Brihat Dugdhika	Dudhi	*Euphorbia hirta* L.	Scattered	-
29	Patrasnuhi	Danda thor	*Euphorba nivulia* Buch. Ham.	Abundant	-
30	Yavashak	Javasa	*Fagonia cretica* L.	Rare	-
31	Gangeruki	Gangan	*Grewia tenax* (Forssk.) Fiori	Abundant	-
32	Langli	Raja rad	*Gloriosa superba* L.	Scattered	-
33	Chirvilva	Chilbil	*Holoptelea integrifolia* Planch.	Scattered	-
34	Nili	Neel	*Indigofera tinctoria* L.	Abundant	-
35	Vikankat	Kakira	*Gymnosporia emarginata* (Willd.) Thwaites.	Abundant	-
36	Madyantika	Mehandi	*Lawsonia innermis* L.	10	-
37	-	Khimp	*Leptadenia pyrotechnica* (Forssk.)Decne.	Scattered	-
38	Piluparni	-	*Maerua arenaria* Hook. F. &Thom.	Scattered	
39	-	Babchi	*Ocimum americanum* L.	Frequent	-
40	Vrishikali	Dudhi	*Pergularia daemia* (Forssk.) Choiv.	Scattered	-
41	Kakjungha	-	*Peristrophe bicalyculata* (Retz.) Nees.	Scattered	-
42	Shami	Khejri	*Prosopis cinnerea* (L.) Druce.	Abundant	-
43	-	Dasria	*Rhus mysoorensis* B.Heyne ex. W.&A.	Abundant	-
44	Banpilu	Pilu	*Salvadora oleoides* Dcne.	Scattered	-
45	Somlata	Angulia thor	*Sarcostemma acidum* (Roxb.) Voigt.	Scattered	-
46	Chakramard	Chakunda	*Senna tora* (L.) Roxb.	Scattered	-
47	Bala bhed	-	*Sida acuta* Burm.f.	Scattered	-
48	Bala	-	*Sida cordifolia* L.	Abundant	-
49	-	-	*Solanum incanum* L.	Scattered	-
50	Kantkari	Kantali	*Solanum virginianum* L.	Abundant	-
51	Sarponkha	Khirna	*Tephrosia purpurea* (L.) Pers.	Abundant	-
52	-	-	*Tephrosia pumila* (Lam.) Pers.	Scattered	-
53	Karvira	Kaner	*Thevetia peruviana* (Pers.) K.Schum.	10	-
54	Gokshura	Gokhru, Kanti	*Tribulus terrestris* L.	Abundant	-
55	Guduchi	Giloy	*Tinospora cordifolia* Willd.	Frequent	-
56	Adhopushpi	-	*Trichodesma indicum* (L.)	Scattered	-

			Lehm.		
57	Rohitak	Rohida	*Tecomella undulata* (Sm.) Seem.	2	-
58	Kutaj	Dudhi	*Wrightia tinctoria* R.Br,.	Several	-
59	Badar	Bor, Ber	*Zizyphus jujuba* Lam.	Several	-
60	-	Jhar bor	*Zizyphus numularia* W.&A.	Scattered	-

7. Raw Drug materials collected:

The following Raw Drug Samples were collected during this period as per availability and demand.

Sl. No.	Botanical Name	Sanskrit Name	Local Name	Parts Collected	Quantity Collected (Fresh)	Quantity In stock (Dried)	Balance in stock
1.	*Commiphora wightii* (Arn.) Bhand.	Guggulu	Guggal	Gum-oleo-resin	1.500 Kg.	47.190 Kg.	48.690 Kg.
2.	*Bougainvillea spectabilis* Willd.	-	-	Leaves	2.500 Kg.	1.00 Kg.	1.00 Kg.
3.	*Grewia flavescens* Juss.	-	-	Stem	2.00 Kg.	1.00 Kg.	1.00 Kg.
4.	*Calotropis procera* (Ait.) R.Br.	Shwetark	Ankra	Flowers	1.00 Kg	0.125 Kg	0.125 Kg

8. Raw Drug materials supplied.

The following raw drug material was supplied to various CCRAS Hq. as per as per instruction of CCRAS Hq. New Delhi.

Sl. No.	Botanical Name	Sanskrit Name	Local Name	Parts Collected	Quantity collected (Fresh)	Quantity Supplied (Dried)	Balance in stock	To whom supplied
1.	*Commiphora wightii* (Arn.) Bhand.	Guggulu	Guggal	Gum-oleo-resin	1.500 Kg.	47.00 Kg.	1.690 Kg.	CARI Jhansi
2.	*Bougainvillea spectabilis* Willd.	-	-	Leaves	2.500 Kg.	1.00 Kg.	Nil	RARI Gwalior
3.	*Grewia flavescens* Juss.	-	-	Stem	2.00 Kg.	1.00 Kg.	Nil	RARI Gwalior
4.	*Calotropis procera* (Ait.) R.Br.	Shwetark	Ankra	Flowers	1.00 Kg	0.125 Kg	Nil	RARI Jammu

9. Plant mortality in the field:

Due to drought and termite attack a large number of Guggulu plants were dried during summer season which were observed and counted during this period. Total 282 (Two hundred eighty two only) plants were dried in the field in different blocks remaining balance of 2299 (two thousand two hundred ninety nine only) plants in the field.

TABLE-SHOWING DETAILS OF GUGGULU PLANTS IN DIFFERENT BLOCKS AT GUGGULU HERBAL FARM MANGLIAWAS AJMER

Sl. No.	Name of Block in GHF Manglia was	Total no. of Guggulu Plants in the field A	Date of counting of Dried Guggulu Plants	Total no. of Guggulu plants dried due to Tapping	Total no. of Guggulu plants dried naturally in the field B	Total no. of Balance Guggulu plants in the field A-B=C	Remark
1.	1	376	13/07/2021	-	21	355	Due to drought favoring since long time and termite attack plants dried naturally in the field.
2.	2	186	13/07/2021	-	23	163	
3.	3	292	13/07/2021	-	31	261	
4.	4	74	14/07/2021	-	9	65	
5.	5	138	14/07/2021	-	40	98	
6.	6	83	14/07/2021	-	9	74	
7.	7	71	15/07/2021	-	5	66	
8.	8	143	15/07/2021	-	8	135	
9.	9	117	16/07/2021	-	7	110	
10.	10	64	16/07/2021	-	6	58	
11.	11	105	16/07/2021	-	9	96	
12.	12	134	17/07/2021	-	4	130	
13.	13	144	17/07/2021	-	8	136	
14.	14	104	20/07/2021	-	9	95	
15.	15	47	20/07/2021	-	2	45	
16.	16	45	22/07/2021	-	2	43	
17.	17	175	22/07/2021	-	41	134	
18.	18	99	22/07/2021	-	17	82	
19.	19	85	23/07/2021	-	22	63	
20.	20	99	23/07/2021	-	9	90	
	G. TOTAL	**Total 2581 Plants surviving in the field till July 2020**		**Note- Guggulu Plants were not tapped during this year.**	**282 Plants dried due to drought and termite attack upto July 2021.**	**Total 2299 Plants surviving in the field till July 2021**	

10. WORKSHOP/TRAINING PROGRAMME-

(i) Attended online Training Programme on "Medicinal Plants Research Training-I" on 1st July 2021 which was organized by CCRAS Hq. New Delhi and co-ordinated by CARI Kolkata.

(ii) Attended online Training Programme on "Medicinal Plants Research Training-II"(Pharmacognosy) on 30th July 2021 which was organized by CCRAS Hq. New Delhi and co-ordinated by CARI Kolkata and CSMCARI Chennai.

(iii) Attended A short Term Training Programme on "Research Integrity and Publication Ethics" since 22nd February to 25 February 2022 (Batch 2) by Center for Publication Ethics Savitribai Phule Pune University Pune.

11. VISIT -

(i) Dr. B. Venkatswarlu Assistant Director (Ay.) and Programme officer, Dr. Ravindra Singh Assistant Director (Chemistry), Sh. A.K. Meena Administrative Officer (Admn.), Dr. N. Siddhamallayya R.O. (Bot.), from CCRAS Head Quarter and Dr. B.R. Meena Assistant Director Incharge RARI Jaipur were visited the Guggulu Herbal Farm Mangliawas to see the developmental activities and its future course of development during this period.

(ii) Respected Director General CCRAS and Dr. B.R. Meena, Assistant Director Incharge RARI Jaipur were visited the Guggulu Herbal Farm Mangliawas to see the developmental activities and its future course of development during this period.

12. Development of Nursery set up

An amount of Rs. 1270000/ (Twelve Lac seventy thousand Rs. Only) was sanctioned by the council for development of following nursery set up which has been handed over to PWD Ajmer and the work was not initiated by PWD Ajmer till reporting period. Further new revised DPR for Rs. 22.60 Lac was submitted by PWD Ajmer during the month of September 2021 and asked for difference of Rs. 9.90 Lac which has already been submitted to CCRAS Hq. but such difference amount has not been received till date and the work is not initiated by PWD Ajmer till date. The following work will be carried out by PWD Ajmer for developing nursery set up.

(i) Fencing of nursery area (50mt.x50mt.x6ft.) with barbed wires along with pillars and iron Engles with iron gate and 3feet trenching outside the nursery areas which is needed for protection of nursery areas.

(ii) Iron net inside the nursery area (25mt.x50mt.x6ft.) covered with plastic nets (Net house) is needed for development of plants in the nursery areas.

(iii) An underground water storage tank with capacity of 50000/(Fifty thousand only) litres with watering facility in the nursery areas for development of plants in the nursery areas.

(iv) Connection of water storage tank with nursery area along with pipelines and motor etc. for watering facility.

13. Other activities.

(i) Routine work of Guggulu Herbal Farm Mangliawas, like watching and general maintenance were done.

(ii) Repair of boundary wall in different block like 2,3, 4, 5, 16,17,18,19, and 20 were done with stones and spiny branches from time to time as and when required.

(iii) Repair of pathways in blocks no. 1,2,16,17,18 & 19 were done by cutting of spiny branches along the pathways for motorable condition.

(iv) Counting of dried Guggulu Plants in the field was done during the month of July 2021. Total 282 plants were dried naturally due to severe drought and termite attack in the field remaining the total stock of 2299 plants are surviving in the field.

14. Requirements for further development.

(i) At present there is only one tube well in the farm which is out of order since March 2018 which is repaired during the month of February 2020 but not discharging sufficient water and also drying during summer season due to severe drought favoring since long time due to which nursery development and future course of cultivation programme is not being started. For development of nursery and development of

plants in nursery and transfer of developed plants in the field, an alternative and permanent watering facility must be done.

(ii) At present farm is protected with 'Kachcha' boundary wall which is destroyed by wild animals like Blue Bulls. For protection of farm, Pucca boundary wall with four iron gates are necessary. At present office is running in the village Mangliawas in the rented room of Gram Panchayat. At least 3-4 rooms are required for running of office and store.

(iii) Electrification is also essential for proper lighting in the office room and for protection of farm.

(iv) Telephone facility and proper office set up is required.

(v) At present no any clerckial staff is posted at the farm. At least one LDC must be posted.

(vi) At present only 5 labourers (MTS) are working, out of which two are regularly engaged in night duty watching of farm. Remaining three is working in day duty for watching and general maintenance of such a large area of the farm. For development of the farm at-least 5 more labourer are required for its development.

(vii) At present only 'Kachcha' approach road is available for the farm. A dammered approach road is necessary, since the farm is 4 Km. away from the National Highway No. 8.

म.शे. क्षेत्रीय आयुर्वेद अनुसंधान संस्थान, जयपुर

वार्षिक प्रतिवेदन सारांश- 2021-22

महाराव शेखाजी क्षेत्रीय आयुर्वेद अन्त:स्रावी ग्रन्थि विकार अनुसंधान संस्थान, जयपुर की स्थापना 01 अप्रैल,1972 को **क्षेत्रीय आयुर्वेद संस्थान (आयुर्वेद)** के रूप में केन्द्रीय आयुर्वेद एवं सिद्ध अनुसंधान परिषद (वर्तमान में केन्द्रीय आयुर्वेदीय विज्ञान अनुसंधान परिषद, आयुष मंत्रालय), भारतीय चिकित्सा पद्धति एवं होमियोपैथी विभाग (वर्तमान में आयुष मंत्रालय), भारत सरकार के अधीनस्थ हुई थी जिसका उद्देश्य वैज्ञानिक आधार पर नैदानिक/चिकित्सकीय एवं औषध विकास अध्ययन के माध्यम से आयुर्वेद को प्रोन्नत करना था। वर्ष 1999 में सी.सी.आर.ए.एस. के पुनर्गठन की प्रक्रिया के अन्तर्गत इस संस्थान को "**केन्द्रीय आयुर्वेद अनुसंधान संस्थान**" के रूप में क्रमोन्नत किया गया। वर्ष 2010 में इस संस्थान को "**आयुर्वेद केन्द्रीय अनुसंधान संस्थान**" नाम से पुनर्नामित किया गया। तत्पश्चात, परिषद के परिधीय इकाईयों के पुनर्गठन की प्रक्रिया के अन्तर्गत अप्रैल, 2016 में संस्थान का पुनर्नामकरण "**क्षेत्रीय आयुर्वेद अन्त:स्रावी ग्रन्थि विकार अनुसंधान संस्थान**" किया गया। जनवरी, 2021 से संस्थान का नाम पुन: "**क्षेत्रीय आयुर्वेद अनुसंधान संस्थान**" कर दिया गया है। इसकी स्थापना के बाद से संस्थान द्वारा विभिन्न नैदानिक शोध अध्ययन किये गये हैं।

प्रतिवेदन वर्ष 2021-22 के दौरान निम्नलिखित परियोजनायें प्रारंभ की गयीं हैं:

1. आईएमआर परियोजना शीर्षक **"मेदोरोग (ओबेसिटी) के प्रबंधन में विडंग चूर्ण और व्योषादि गुग्गुलु का नैदानिक मूल्यांकन"** ।
2. आईएमआर परियोजना शीर्षक "**उप-नैदानिक हाइपोथायरॉयडिज़्म में त्रिकटु के प्रभाव का मूल्यांकन करने के लिए "याद्दृच्छिक, प्लेसबो नियंत्रित, डबल-ब्लाइंड नैदानिक परीक्षण"** ।
3. अनुसूचित जाति उप योजना (एससीएसपी) के अन्तर्गत "**आयुर्वेद चल स्वास्थ्य रक्षा कार्यक्रम (एएमएचसीपी)**" के अन्तर्गत निम्नलिखित 03 आईएमआर परियोजनायें प्रारंभ की गयीं एवं पूर्ण की गयीं:
    a) **स्वास्थ्य सर्वेक्षण (एएमएचसीपी): भारत भर में चयनित राज्यों में अनुसूचित जाति की आबादी में जनसांख्यिकी, स्वास्थ्य स्थिति और गैर संचारी रोगों की रूपरेखा- एक वर्णनात्मक, पार अनुभागीय, महामारी विज्ञानीय अध्ययन।**

    b) **एनीमिया (पांडु) में पुनर्नवादि मंडूर के मूल्यांकन के लिए एक संभावित समुदाय आधारित अध्ययन।**

    c) **भारत में अनुसूचित जाति की आबादी में स्वास्थ्य संबंधित जीवन की गुणवत्ता पर आयुर्वेद आधारित आहार और जीवन शैली के प्रतिपालन की प्रभावशीलता- एक समुदाय आधारित, समूह यादृच्छिक नियंत्रित अध्ययन।**

4. आदिवासी उप योजना 2021-22 के अन्तर्गत आदिवासी स्वास्थ्य रक्षा अनुसंधान कार्यक्रम (टीएचसीआरपी) के अन्तर्गत निम्नलिखित 04 आईएमआर परियोजनाएं शुरू की गईं और पूरी की गईं:
    a) **एनीमिया (पाण्डु) में धात्री लौह के मूल्यांकन के लिये एक संभावित समुदाय आधारित अध्ययन।**

    b) **ऑस्टियोआर्थ्राईटिस (जानुगत संधिवात) में योगराज गुग्गुलु, अश्वगन्धा चूर्ण एवं नारायण तैल के मूल्यांकन के लिये एक भविष्यदपेक्षक समुदाय आधारित अध्ययन।**

    c) **भारत में आदिवासी आबादी में स्वास्थ्य संबंधित जीवन की गुणवत्ता पर आयुर्वेद आधारित आहार एवं जीवन शैली प्रतिपालन की प्रभावशीलता- एक समुदाय आधारित, समूह याद्दृच्छिक नियंत्रित अध्ययन।**

d) **भारत भर में चयनित राज्यों में अनुसूचित जनजाति की आबादी में जनसांख्यिकी, स्वास्थ्य स्थिति और गैर संचारी रोगों की रूपरेखा- एक वर्णनात्मक, पार अनुभागीय, महामारी विज्ञानीय अध्ययन**।

5. अनुसूचित जाति उप योजना के अन्तर्गत "**आयुर्वेद चल स्वास्थ्य रक्षा कार्यक्रम"** 2021-22 **के अन्तर्गत "प्रजनन एवं शिशु स्वास्थ्य रक्षा कार्यक्रम (आरसीएच)**" के तहत निम्नलिखित आईएम आर परियोजनायें प्रारंभ की गयीं एवं पूर्ण की गयीं:

a) **भारत में अनुसूचित जाति आबादी की महिलाओं में स्वास्थ्य संबंधित जीवन की गुणवत्ता पर आयुर्वेद आधारित आहार एवं जीवन शैली प्रतिपालन की प्रभावशीलता- एक समुदाय आधारित, समूह याद्दृच्छिक नियंत्रित अध्ययन**।

b) **प्राथमिक कष्टार्तव के प्रबंधन में रज:प्रवर्तिनी वटी के मूल्यांकन के लिये एक संभावित समुदाय आधारित अध्ययन**।

6. टीएचसीआरपी 2021-22 के अन्तर्गत नैदानिक अनुसंधान परियोजना शीर्षक **"कोविड-19 में आयुरक्षा किट का प्रभाव- एक समुदाय आधारित रोगनिरोधी अध्ययन"** 16.02.2022 को शुरू किया गया था। परियोजना पूरी हो चुकी है।

7. एससीएसपी, 2021-22 के अन्तर्गत नैदानिक अनुसंधान परियोजना शीर्षक "**कोविड-19 में आयु रक्षा किट के प्रभाव का आकलन करने के लिये एक रोगनिरोधी समुदाय आधारित अध्ययन**" 15.02.2022 को प्रारंभ किया गया. यह परियोजना पूर्ण हो चुकी है।

8. **एक मोबाइल ऐप के माध्यम से होम आइसोलेशन में अलाक्षणिक एवं हल्के से मध्यम कोविड -19 रोगियों में चयनित आयुष औषधियों आयुष -64 और कबासुरा कुडिनीर की प्रभावकारिता का प्रलेखीकरण: एक भविष्यदपेक्षक बहुकेन्द्रीय समुदाय आधारित अध्ययन**।

9. आजादी का अमृत महोत्सव-इंडिया@75 के तहत वृद्धावस्था आबादी पर विशेष ध्यान देने के साथ रोगनिरोधी आयुष औषधियों एवं आहार तथा जीवन शैली पर दिशानिर्देशों का वितरण अभियान।

10. आईएमआर (सहयोगी) परियोजना **"प्रमेह एवं पाण्डु रोग के लिए आयुर्वेद में निदान विधियों का द्वितीय चरण वैधता और विश्वसनीयता परीक्षण"** (एनआईए, जयपुर के सहयोग से) के अन्तर्गत – प्रमेह एवं पांडु के 30-30 रोगियों को लक्ष्य के अनुसार पूरा किया गया।

पिछले रिपोर्टिंग वर्ष 2020-21 से निम्नलिखित अनुसंधान परियोजनाओं को आगे बढ़ाया गया है:

1. आईएमआर परियोजना शीर्षक **" भारत में सीसीआरएएस-बहिरंग रोगी विभागों में चयनित रसौषधियों के संभावित सुरक्षा मुद्दों एवं निर्धारित औषधि प्रचलनों का प्रलेखीकरण के लिये एक भविष्यदपेक्षक ओपन लेबल पर्यवेक्षण अध्ययन**" 08.01.2021 को शुरू किया गया था। यह परियोजना मार्च**,** 2022 में पूर्ण हो चुकी है।

उपर्युक्त परियोजनाओं के अतिरिक्त, अन्य संचालित हुई/ संचालित की जा रही आऊटरीच अनुसंधान कार्यक्रम/ परियोजनायें हैं:

1. भीलवाड़ा (राजस्थान) में **कैंसर, मधुमेह, हृदयवहिनी रोग और स्ट्रोक की रोकथाम और नियंत्रण के लिए राष्ट्रीय कार्यक्रम (एनपीसीडीसीएस) के साथ आयुष (आयुर्वेद) का एकीकरण**। कार्यक्रम अप्रैल 2021 में बंद कर दिया गया है।

2. आयुर्वेद, सिद्ध एवं यूनानी (एएसयू) औषधियों के लिये राष्ट्रीय भेषज सतर्कता कार्यक्रम (जारी है)।

<u>आबंटित अनुसंधान परियोजनायें जो प्रारंभ होनी हैं:-</u>

1. **भारत के चयनित शहरों में स्पष्ट रूप से स्वस्थ व्यक्तियों के बीच आयुर्वेद आधारित जीवन शैली प्रतिपालन एवं अभ्यासों का प्रभाव-एक यादृच्छिक समानांतर समूह अध्ययन।**
2. **मेदोरोग (ओबेसिटी) के प्रबंधन में लेखनीय गण महाकषाय एवं आरोग्यवर्धिनी गुटिका का नैदानिक मूल्यांकन।**
3. **अग्निमांद्य के प्रबंधन में लशुनादि वटी एवं पिप्पल्याद्यासव का नैदानिक मूल्यांकन।**

<u>अनुसंधान परियोजनाओं एवं कार्यक्रमों का संक्षिप्त वर्णन</u>:

1. **आयुष-अस्पताल प्रबंधन सूचना प्रणाली (ए-एचएमआईएस)**:- अप्रैल, 2019 से संस्थान के अस्पताल में ए-एचएमआईएस परियोजना शुरू की गई थी। समीक्षाधीन अवधि 2021-22 के दौरान, विभिन्न रोगों के कुल 18,602 रोगियों ने ए-एचएमआईएस- ओपीडी में परामर्श किया। यह पद्धति अस्पताल में सफलतापूर्वक काम कर रही है।

2. **भारत में सीसीआरएएस-बहिरंग रोगी विभागों में चयनित रसौषधियों के संभावित सुरक्षा मुद्दों एवं निर्धारित औषधि प्रचलनों का प्रलेखीकरण के लिये एक भविष्यदपेक्षक ओपन लेबल पर्यवेक्षण अध्ययन:-** यह परियोजना आईएमआर वार्षिक कार्य योजना 2019-20 के अन्तर्गत आबंटित की गयी थी। 28.02.2020 को संस्थान को बजट आबंटित किया गया था। 13.03.2020 को नैतिक मंजूरी प्राप्त कर ली गई है। परियोजना 08.01.2021 को प्रारंभ हुई। 117 रोगियों की जांच की गई, जिनमें से 108 रोगी नामांकित किए गए, 92 रोगी पूर्ण हुए और 16 रोगी बीच में अध्ययन छोड़ गए। यह परियोजना मार्च, 2022 में पूरी हो चुकी है।

3. **आईएमआर परियोजना शीर्षक- मेदोरोग (ओबेसिटी) के प्रबंधन में विडंग चूर्ण एवं व्योषादि गुग्गुलु का नैदानिक मूल्यांकन:-** यह परियोजना आईएमआर वार्षिक कार्य योजना 2018-19 के अन्तर्गत आवंटित की गयी है। परियोजना 24.11.2021 को शुरू की गई । 31 मार्च, 2022 तक 10 प्रतिभागियों की जांच की गई, जिनमें से 06 प्रतिभागी नामांकित किए गए, 01 प्रतिभागी ने अध्ययन पूर्ण किया और 01 प्रतिभागी ड्रॉपआउट हुआ। 04 प्रतिभागी का अध्ययन जारी है।

4. **आईएमआर परियोजना शीर्षक - उप-नैदानिक हाइपोथायरायडिज़्म में त्रिकटु के प्रभाव का मूल्यांकन करने के लिए यादृच्छिक, प्लेसबो नियंत्रित, डबल-ब्लाइंड नैदानिक परीक्षण: -** यह परियोजना मार्च 2022 के महीने में शुरू की गई है। प्रतिवेदन अवधि के दौरान, हाइपोथायरायडिज़्म के लिए 14 रोगियों की जांच की गई। मार्च, 2022 के अंत तक, इस अध्ययन में किसी भी प्रतिभागी का नामांकन नहीं किया गया।

5. **एक मोबाइल ऐप के माध्यम से होम आइसोलेशन में अलाक्षणिक और हल्के से मध्यम कोविड -19 रोगियों में चयनित आयुष औषधियों आयुष -64 और कबासुरा कुडिनीर की प्रभावकारिता का प्रलेखीकरण: एक संभावित बहुकेन्द्रीय समुदाय आधारित अध्ययन:-** 10.05.2021 से नामांकन प्रारंभ हुआ था। परिषद के पत्र फा.सं. 3-42/2021/सीसीआरएएस-प्रशा./1964, दिनांक 27.07.2021 के अनुसार; अंतिम नामांकन 31.07.2021 को किया गया एवं फॉलोअप 21.08.2021 को किया गया। कुल 2,221 प्रतिभागियों का नामांकन किया गया; उनमें से 09 ने बीच में अध्ययन छोड़ दिया (ड्रॉप आऊट हुए) तथा 21.08.2021 तक 2,212 ने अध्ययन पूर्ण किया। निर्धारित एक्सेल शीट लिंक में डाटा मुख्यालय को प्रस्तुत कर दिया गया है।

6. **आज़ादी का अमृत महोत्सव- भारत@75 के अन्तर्गत वृद्धावस्था जनसंख्या पर विशेष ध्यान देने के साथ रोगनिरोधी आयुष औषधियों एवं आहार व जीवन शैली पर दिशा-निर्देशों का वितरण अभियान**:- इस तरह

की एकेएएम गतिविधियों के माध्यम से कुल 10,000 व्यक्तियों को लाभान्वित हुए तथा 30.08.2021 से 05.09.2021 तक रोगनिरोधी आयुष दवाएं प्राप्त की।

- एक लाख लाभार्थियों के लक्ष्य के लिए 08.10.2022 से 31.03.2022 तक, निम्नलिखित गतिविधियाँ की गईं:
- एकेएएम गतिविधियों के माध्यम से कुल 66,429 व्यक्ति लाभान्वित हुए। इनमें से 49,043 व्यक्तियों ने संशमनी वटी प्राप्त कर चुके हैं; 9,147 व्यक्तियों ने प्रतिपालन/दिशानिर्देश/आईईसी सामग्री प्राप्त की है और 8,239 लोगों ने अश्वगंधा घन वटी प्राप्त की है।
- सामान्य आबादी में 500 आयु रक्षा किट का वितरण किया गया।
- कोविड जैसे लक्षणों के साथ-साथ अलाक्षणिक, हल्के और मध्यम लक्षणों वाले कोविड-19 पॉज़िटिव 534 प्रतिभागियों को आयुष-64 दिया गया।
- कुल 05 वेबीनारों का संचालन किया गया।

7. **आदिवासी स्वास्थ्य सुरक्षा अनुसंधान कार्यक्रम (टीएचसीआरपी):-** यह कार्यक्रम संस्थान को वार्षिक कार्य योजना 2014-2015 की आदिवासी उप योजना के तहत आवंटित किया गया था। प्रतिवेदन वर्ष 2021-22 में राजस्थान के प्रतापगढ़ जिले के 10 गांवों में कुल 123 स्वास्थ्य शिविर और सर्वेक्षण किए गए। आदिवासी आबादी के इन सर्वेक्षणों में कुल 5910 आबादी को सम्मिलित किया गया है। इन गांवों में जांचें की गईं और आदिवासी आबादी के 3101 रोगियों को निशुल्क औषधियां दी गईं। कुल 08 लोकप्रचलित दावों के प्रलेख एकत्र किये गये। स्थापना के बाद से, कुल 81 गांवों में 62813 आबादी को सम्मिलित किया गया तथा कुल 21720 रोगियों की चिकित्सा की गयी; कुल 98 लोकप्रचलित दावे एकत्र किए गए। यह कार्यक्रम अभी भी जारी है। इस कार्यक्रम के तहत कुल 04 नैदानिक अध्ययन परियोजना सम्मिलित की गईं है।

a) **एनीमिया (पांडु) में धात्री लौह के मूल्यांकन के लिए एक भविष्यदपेक्षक समुदाय आधारित अध्ययन:-** यह परियोजना 09-10-2021 से प्रारंभ हुई तथा 31-01-2022 को पूर्ण हुई। इस कार्यक्रम के अन्तर्गत कुल 35 रोगियों का लक्ष्य सम्मिलित किया गया। कुल 72 रोगियों की जांच की गई, जिनमें से 35 रोगी इस कार्यक्रम के अन्तर्गत नामांकित हुए/सफलतापूर्वक अध्ययन में पूर्ण हुए।

b) **ऑस्टियोआर्थराइटिस जानु (जानुगत संधिवात) में योगराज गुग्गुलु, अश्वगंधा चूर्ण और नारायण तेल के मूल्यांकन के लिए एक भविष्यदपेक्षक समुदाय आधारित अध्ययन**:- यह परियोजना 09-10-2021 से प्रारंभ हुई और 14-02-2022 को पूर्ण हुई। कुल 35 रोगियों का लक्ष्य इस कार्यक्रम के अन्तर्गत सम्मिलित किया गया। कुल 91 रोगियों की जांच की गई, जिनमें से 35 रोगी नामांकित हुए तथा इस कार्यक्रम के अन्तर्गत सफलतापूर्वक अध्ययन में पूर्ण हुए।

c) **भारत में अनुसूचित जनजाति आबादी में जीवन की स्वास्थ्य संबंधी गुणवत्ता पर आयुर्वेद आधारित आहार और जीवन शैली के प्रतिपालन की प्रभावशीलता - एक समुदाय आधारित, समूह यादृच्छिक नियंत्रित अध्ययन**:- यह परियोजना 08-09-2021 से प्रारंभ हुई और 17-01-2022 को पूर्ण हुई। इस कार्यक्रम के तहत कुल 70 प्रतिभागियों (समूह- I और समूह- II) का लक्ष्य सम्मिलित किया गया। इस कार्यक्रम के अन्तर्गत कुल 125 व्यक्तियों की जांच की गयी तथा सफल 70 प्रतिभागियों को नामांकित किया गया।

d) **कोविड-19 में आयु रक्षा किट के प्रभाव का आकलन करने के लिए रोगनिरोधी समुदाय आधारित अध्ययन**:- यह परियोजना 16-02-2022 से शुरू हुई और 28-03-2022 को पूरी हुई। इस कार्यक्रम के तहत कुल 2640 विषयों (2400 समूह- I और 240 समूह- II) का कुल लक्ष्य शामिल है। इस कार्यक्रम के तहत कुल 2640 रोगियों की जांच की गई और 2640 रोगियों का नामांकन किया/ सफलतापूर्वक पूर्ण किया गया।

8. **अनुसूचित जाति उप योजना (एससीएसपी) के अन्तर्गत "आयुर्वेद मोबाइल स्वास्थ्य देखभाल कार्यक्रम (एएमएचसीपी)":-** आयुर्वेद चल स्वास्थ्य रक्षा कार्यक्रम (एएमएचसीपी) इस संस्थान को अनुसूचित जाति उप योजना (एससीएसपी) के अन्तर्गत इस संस्थान को आवंटित किया गया था और इसे 28 नवंबर, 2015 को प्रारंभ किया गया था। प्रतिवेदन वर्ष 2021-22 के दौरान, इस कार्यक्रम के अन्तर्गत आरएआरआई, जयपुर के एक दल ने राजस्थान राज्य के जयपुर जिले के 05 चयनित अनुसूचित जाति आबादी बाहुल्य गावों - अचरोल, सामोद, जयसिंहपुरा, कालाडेरा और कनोता में घर-घर सर्वेक्षण, स्वास्थ्य शिविरों का संचालन किया और विशेष रूप से अनुसूचित जाति की आबादी के विभिन्न जनसांख्यिकीय और अन्य डेटा निर्धारित प्रारूप के अनुसार एकत्र किए; विभिन्न रोगों के लिये उनके दरवाज़े पर जाकर निशुल्क औषधियों का वितरण भी किया। सर्वेक्षण के दौरान, गांव की सूचना, घरों की सूचना, अनुसूचित जाति आबादी की स्वास्थ्य संबंधित जानकारी एकत्र की। प्रतिवेदन वर्ष में, कुल चयनित गांवों में 162 सर्वेक्षण दौरे/ स्वास्थ्य शिविरों का आयोजन किया तथा कुल सर्वेक्षण के माध्यम से कुल 5905 अनुसूचित जाति आबादी को सम्मिलित किया गया। एनीमिया (कुल 1512), मधुमेह (कुल 1855) एवं उच्च रक्तचाप (कुल 3909) के लिये जांच की गयी। स्वास्थ्य शिविरों में विभिन्न रोगों के कुल 3874 रोगियों की पहचान एवं चिकित्सा की गयी, जिनमें से 3770 रोगी अनुसूचित जाति वर्ग से थे। उनको निशुल्क आयुर्वेदिक औषधियां प्रदान की गयीं। कुल 3720 जाचें (एचबी एवं रक्त शर्करा की जांचें) रोगियों की आवश्यकता के अनुसार की गयीं। वर्ष के दौरान विभिन्न जागरूकता गतिविधियां की गयीं। इस कार्यक्रम के प्रारंभ से, 64,431 अनुसूचित जाति आबादी के लिये कुल 83 गावों को सम्मिलित किया गया एवं कुल 34,190 अनुसूचित जाति के रोगियों की चिकित्सा की गयी. यह कार्यक्रम वार्षिक आधार पर अभी भी जारी है।

इसके अलावा, स्वास्थ्य सर्वेक्षण के अतिरिक्त, प्रतिवेदन अवधि के दौरान एएमएचसीपी (एससीएसपी) के अन्तर्गत कुल 03 नैदानिक अध्ययन/परियोजनाएं निष्पादित की गईं, जो निम्नानुसार हैं:

a) **एनीमिया (पांडु) में पुनर्नवादि मंडूर के मूल्यांकन के लिए एक संभावित समुदाय आधारित अध्ययन**:- यह नैदानिक परियोजना 12.10.2021 को शुरू की गई थी। सम्मिलित किए जाने का कुल लक्ष्य 50 रोगियों का था। 31 मार्च, 2022 तक, कुल 500 रोगियों की जांच की गई, जिनमें से 50 रोगियों को एनीमिया के लिए नामांकित किया गया; 44 रोगियों ने अध्ययन पूर्ण किया; 01 मरीज अध्ययन से बाहर (ड्रॉप आउट) हो गया। वर्तमान में 05 रोगी 112वें दिन की अंतिम अनुवर्ती विज़िट (बिना दवा के) के लिए अध्ययन में जारी है। परियोजना जारी है और दिनांक 20.04.2022 को पूर्ण हो जाएगी।

b) **भारत में अनुसूचित जाति आबादी में जीवन की स्वास्थ्य संबंधी गुणवत्ता पर आयुर्वेद आधारित आहार और जीवन शैली के प्रतिपालन की प्रभावशीलता - एक समुदाय आधारित, समूह यादृच्छिक नियंत्रित अध्ययन**:- यह परियोजना 14.09.2021 से शुरू की गई थी। इस कार्यक्रम के तहत 70 प्रतिभागियों (समूह-I-35 और समूह-II-35) का कुल लक्ष्य सम्मिलित किया गया था। इस कार्यक्रम के अन्तर्गत कुल 119 लोगों की जांच की गई और 70 प्रतिभागी नामांकित/सफलतापूर्वक पूर्ण हुए। अध्ययन दिनांक 09.03.2022 को पूरा कर लिया गया है।

c) **कोविड -19 में आयु रक्षा किट के प्रभाव का आकलन करने के लिए एक रोगनिरोधी समुदाय आधारित अध्ययन**: - यह अध्ययन दिनांक 15.02.2022 से शुरू किया गया था और दिनांक 22.03.2022 को पूर्ण किया गया। कुल लक्ष्य 693 जनसंख्या को दो समूहों के अन्तर्गत सम्मिलित किया जाना था [समूह- I-630 (औषध) और समूह-II-63 (नियंत्रण)]। समूह- I (औषध) के तहत नामांकित 630 प्रतिभागियों को साबुन और मास्क के साथ आयु रक्षा किट वितरित की गई; जबकि समूह-II (नियंत्रण समूह) के अन्तर्गत नामांकित 63 रोगियों को केवल साबुन और मास्क वितरित

किए गए। अध्ययन के तहत दोनों समूहों को सरकार के कोविड -19 सुरक्षा के लिए मानक दिशानिर्देशों का पालन करने का निर्देश दिया गया था।

9. **प्रजनन और बाल स्वास्थ्य सुरक्षा कार्यक्रम (आरसीएच)** - एससीएसपी के अन्तर्गगत आरसीएच कार्यक्रम राजस्थान के जयपुर जिले के अनुसुचित जाति बाहुल्य पांच क्षेत्रों/ इलाकों - निवारू, छतवारी, कलवार, चांदलाई और मुहाना में संचालित किया गया है। इस कार्यक्रम के अन्तर्गत, आरएआरआई, जयपुर की टीम ने इन क्षेत्रों में घर-घर सर्वेक्षण, स्वास्थ्य शिविरों का आयोजन किया एवं विशेष रूप से महिलाओं और बच्चों का प्रारूप के अनुसार विभिन्न डेटा एकत्र किया; घर-घर जाकर विभिन्न रोगों की नि:शुल्क दवा का वितरण भी किया। सर्वेक्षण के दौरान गांव की जानकारी, घर की जानकारी, महिलाओं और बच्चों की स्वास्थ्य संबंधी जानकारी एकत्र की गई। एनीमिया (कुल: 2629), मधुमेह (कुल: 1495), उच्च रक्तचाप (कुल: 3081) और बच्चों में कुपोषण की स्थिति (कुल: 2809) के लिये जांच की गई। स्वास्थ्य संबंधी जनसांख्यिकी प्राप्त करने के लिए कुल 5890 अनुसूचित जाति महिलाओं और बच्चों का सर्वेक्षण किया गया। चल स्वास्थ्य शिविरों के माध्यम से कुल 4088 महिलाओं और बच्चों की चिकित्सा की गयी, जिनमें से 3136 अनुसूचित जाति की महिलाएं थीं, जबकि 891 अनुसूचित जाति के बच्चे थे। रोगियों की आवश्यकता के अनुसार कुल 4765 जांचें की गयीं। वर्ष के दौरान कुल 56 जागरूकता गतिविधियों का आयोजन किया गया। इस कार्यक्रम के तहत कुल 02 नैदानिक अध्ययन परियोजना शामिल है।

   a) **प्राथमिक कष्टार्तव के प्रबंधन में राजप्रवर्तनी वटी के मूल्यांकन के लिए एक भविष्यदपेक्षक समुदाय आधारित अध्ययन**:- यह परियोजना 27.09.2021 से शुरू होकर 15.03.2022 तक पूरी हुई। इस कार्यक्रम के अन्तर्गत कुल लक्ष्य 50 को सम्मिलित किया गया। इस कार्यक्रम के तहत कुल रोगियों ने 54 की जांच की और 50 को नामांकित किया।

   b) **भारत में अनुसूचित जाति आबादी में जीवन की स्वास्थ्य संबंधी गुणवत्ता पर आयुर्वेद आधारित आहार और जीवन शैली के प्रतिपालन की प्रभावशीलता - एक समुदाय आधारित, समूह यादृच्छिक नियंत्रित अध्ययन**:- यह परियोजना 26.08.2021 से शुरू हुई और 15.02.2022 तक पूरी हुई। इस कार्यक्रम के अन्तर्गत कुल लक्ष्य 70 (समूह-I-35 और समूह-II-35) सम्मिलित थे। इस कार्यक्रम के तहत कुल 78 रोगियों की जांच की तथा 70 को नामांकित किया।

10. **भीलवाड़ा (राजस्थान) में कैंसर, मधुमेह, हृदयवाहिनी रोगों और स्ट्रोक की रोकथाम और नियंत्रण के लिए राष्ट्रीय कार्यक्रम (एनपीसीडीसीएस) के साथ आयुष (आयुर्वेद) का एकीकरण:-** आयुष-एनपीसीडीसीएस कार्यक्रम की स्थापना 2015-2016 में राजस्थान राज्य में स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के सहयोग से कैंसर, हृदयवाहिनी रोगों एवं स्ट्रोक की रोकथाम एवं नियंत्रण कार्यक्रम (एनपीसीडीसीएस) के साथ आयुष (आयुर्वेद) के एकीकरण के रूप में भीलवाड़ा, राजस्थान में की गयी थी। यह कार्यक्रम राजस्थान के भीलवाड़ा जिले के जिला अस्पताल और 22 सामुदायिक स्वास्थ्य केंद्रों में शुरू किया गया था।

    वर्ष 2021-22 के दौरान, कुल 7,969 रोगियों की जांच की गयी, जिनमें से 491 रोगी इस कार्यक्रम में उल्लिखित रोगों के नामांकित किये गये थे। कुल 142 मधुमेह रोगी, 162 उच्चरक्तचाप के रोगी एवं 187 डिस्लिपिडिमिया के नामाकित किये गये जबकि कोई भी रोगी 6 माह का चिकित्सा कोर्स पूरा नहीं कर पाया। आयुष-एनपीसीडीसीएस की गतिविधि के साथ-साथ एनसीडी (गैर संचारी रोगों) के प्रसार को रोकने के लिए; प्रतिदिन प्रात: योग कक्षाओं के लिए कुल 4,129 व्यक्तियों का पंजीकरण किया गया। परिषद के निर्देशानुसार; पत्र फा. सं. 63-1/2015-सीसीआरएएस/ एडमिन./ एनपीसीडीसीएस/ जयपुर/ वॉल्यूम-1/431 दिनांक 23.04.2021 के माध्यम से इस कार्यक्रम का समापन 30 अप्रैल, 2021 को हो गया।

11. **आयुर्वेद सिद्ध एवं यूनानी (एएसयू) औषधियों के लिए राष्ट्रीय भेषज-सतर्कता कार्यक्रम:-** वर्तमान प्रतिवेदन वर्ष के दौरान, संदिग्ध प्रतिकूल औषधि प्रतिक्रियाओं को नोटिस करने के लिए 18602 रोगियों का अध्ययन किया गया। किसी भी रोगी ने प्रयोग की जा रही आयुर्वेद औषधियों के किसी भी प्रतिकूल औषधि प्रतिक्रिया (एडीआर) की सूचना नहीं दी।

चिकित्सालय अनुभाग:

संस्थान में बहिरंग रोगी विभाग (ओपीडी), अंतरंग रोगी विभाग (आईपीडी) और पंचकर्म की सुविधायें उपलब्ध हैं।

बहिरंग इकाई:

संस्थान की बहिरंग इकाई सभी कार्य दिवसों में प्रातः 9:00 बजे से दोपहर 1:00 बजे तक प्रतिदिन चलाई जा रही है। सभी आतुरों को आवश्यकतानुसार परामर्श के साथ-साथ नि:शुल्क आयुर्वेदिक औषधि वितरण भी किया जाता है। प्रतिवेदन वर्ष 2021-22 में बहिरंग विभाग में कुल 18602 (10258 पुरुष एवं 8344महिलायें) आतुरों का परीक्षण एवं चिकित्सा की गयी। जरा बहिरंग इकाई में कुल 791आतुरों को चिकित्सा उपलब्ध करायी गई, जिसमें 562 पुरुष एवं 229 महिलायें थीं।

अन्तरंग इकाई -

संस्थान में 20 शय्याओं वाले अंतरंग रोगी विभाग की सुविधा है, जिसमें से 10 शैय्या पुरुष वार्ड एवं10 शैय्या महिला वार्ड के लिए आबंटित हैं। कोविड-19 महामारी की स्थिति में प्रतिवेदन वर्ष 2021-22 में अंतरंग रोगी विभाग सेवायें अधिकांश अवधि में स्थगित रहीं। माह फरवरी, 2021 से अंतरंग रोगी सेवायें पुन: प्रारंभ की गयीं एवं संस्थान के अंतरंग रोगी विभाग में कुल 74 रोगियों (28 पुरुष एवं 46 महिलायें) को भर्ती किया गया एवं चिकित्सा की गयी।

पंचकर्म इकाई -

प्रतिवेदन वर्ष में संस्थान की पंचकर्म इकाई में कुल 2057 पंचकर्म की विभिन्न चिकित्सा प्रक्रियायें (पुरुषों में 691 एवं महिलाओं में 1366) सम्पादित की गयी।

प्रयोगशाला अनुभाग –

संस्थान में एक अच्छे प्रकार से उपकरणों से सुसज्जित नैदानिक प्रयोगशाला है। प्रयोगशाला में जैवरासायनिक एवं विकृति विज्ञानीय दो प्रखण्ड हैं। प्रयोगशाला में विभिन्न परीक्षण आवंटित अनुसंधान कार्यक्रमों को ध्यान में रखते हुए किये जाते हैं। अनुसंधान रोगियों और बीपीएल रोगियों को छोड़कर, परीक्षण शुल्क भुगतान के आधार पर किये जाते हैं। जनवरी 2017 से वरिष्ठ नागरिकों को परीक्षणों पर 60 प्रतिशत शुल्क में छूट दी जा रही है।

वार्षिक सारांश				
जांच रिपोर्ट (सामान्य बहिरंग + अन्तरंग + जरा बहिरंग + अन्तरंग)				
माह- अप्रैल, 2021- मार्च 2022				
कुल किये गये प्रयोगशालीय जांचों का विवरण				
क्र.स	**जांच**	**कुल (पुरुष)**	**कुल (महिला)**	**कुल योग**
1.	**विकृति विज्ञानीय जांच**	2525	3678	6203
2.	**जैव-रसायन जांच**	2276	2543	4819
3.	**रेडियोलॉजिकल जांच**	35	29	64
		4836	**6250**	**11086**

वर्तमान प्रतिवेदन वर्ष 2021-22 के दौरान विकृति विज्ञान, सीरम विज्ञान एवं जैव रसायन (रक्त, मल, मूत्र, वीर्य एवं थूक आदि) से संबन्धित कुल 11086 जाँचें की गयी। संस्थान में एक रेडियोग्राफी ईकाई भी है। जिसमें प्रतिवेदन अवधि में कुल 64 क्ष-किरण (एक्स-रे) से सम्बंधित जांचें सम्पादित की गयीं।

अन्य गतिविधियाँ-

1. **गुग्गुलु हर्बल फार्म, मांगलियावास, अजमेर -** राजस्थान के अजमेर जिला के ग्राम मांगलियावास में इस संस्थान के नियंत्रण में एक गुग्गुलु हर्बल फार्म भी कार्य कर रहा है, जिसे 9 नवंबर, 2016 को राष्ट्रीय आयुर्वेद संस्थान, जयपुर द्वारा सी.सी.आर.ए.एस. को वापस हस्तान्तरित कर दिया गया। यह फार्म 1 अप्रैल,1972 को शुरू हुआ था, जिसमें 31 दिसम्बर, 2006 तक गुग्गुलु के पौधों का अनुसंधान, विकास और व्यापक कृषि पौधों की कटिंग, एयर लेयरिंग और पौध (अंकुरण) के माध्यम से की गई थी। फार्म में गुग्गुलु सहित अन्य औषधीय पौधों की लगभग 60 प्रजातियों की खेती की जा रही हैं। प्रतिवेदन वर्ष 2021-22 के दौरान, 1.5 कि.ग्रा. गुग्गुलु गोंद निर्यास एकत्र किया गया। 190 ग्राम गुग्गुलु गोंद निर्यास भण्डार में शेष था। इस मात्रा को सम्मिलित करते हुए वर्तमान में कुल 1.690 कि.ग्रा. गुग्गुलु गोंद निर्यास भण्डार में है। इस अवधि के दौरान कुल 47.00 कि.ग्रा. गुग्गुलु गोंद निर्यास की आपूर्ति सीएआरआई, झांसी को की गयी। 03 पादपों के कुल 5.500 किग्रा. ताज़ा कच्ची औषधियों के नमूने एकत्र किये गये तथा 3 पादपों के 2.125 किग्रा. शुष्क पादप नमूनों की आपूर्ति सीसीआरएएस के विभिन्न संस्थानों को की गयी।

2. **आयोजित कार्यशालायें/ कार्यक्रम/ मेला/ बैठकें:-**
   1) एमएसआरएआरआई, जयपुर में, चल रही कोविड-19 महामारी के विरुद्ध निवारक उपायों का अनुपालन करते हुए "आतंकवाद विरोधी दिवस (21.05.2021)" के पालन के संबंध में उद्घाटन और शपथ समारोह संस्थान में आयोजित किया गया।

   2) संस्थान ने 29 मई 2021 को "बी विद योग, बी एट होम" पर वेबिनार का आयोजन किया।

   3) "**विश्व तंबाकू निषेध दिवस 31 मई, 2021**" के अवसर पर डॉ. बी.आर. मीणा, प्रभारी सहायक निदेशक, ने एमएसआरएआरआई, जयपुर के सभी कर्मचारियों और अधिकारियों को तंबाकू के सेवन के खिलाफ शपथ दिलाई।

   4) एमएसआरएआरआई, जयपुर द्वारा दिनांक 11 जून, 2021 को अमृत महोत्सव के अवसर पर **"कोविड -19 महामारी में आयुर्वेद की भूमिका"** पर वेबिनार का आयोजन किया गया था।

   5) 21 जून 2021 को योग विशेषज्ञ के मार्गदर्शन में सामान्य योग प्रोटोकॉल अभ्यास के साथ **"अंतर्राष्ट्रीय योग दिवस 2021**" मनाया गया और इसमें संपूर्ण कर्मचारियों ने भाग लिया।

   6) संस्थान द्वारा 04 तिमाही हिंदी कार्यशालाओं का भी आयोजन किया गया।

   7) संस्थान द्वारा 30/08/2021 से 05/09/2021 तक सप्ताह में 10,000 जनसंख्या के लिए आयुष रोगनिरोधी दवाओं (संशमनी वटी और अश्वगंधा चूर्ण) और सामान्य दिशानिर्देशों के बड़े पैमाने पर वितरण द्वारा **"आज़ादी का अमृत महोत्सव- भारत@75**" मनाया। एक लाख आबादी के लक्ष्य को लाभ पहुंचाने के लिए कार्यक्रम को अगस्त, 2022 तक बढ़ा दिया गया है।

   8) संस्थान द्वारा अपने परिसर में 02/09/2021 को **"आज़ादी का अमृत महोत्सव-भारत@75**" का शुभारंभ कार्यक्रम आयोजित किया गया।

   9) संस्थान में 14.09.2021 से 28.09.2021 तक "हिंदी पखवाड़ा" मनाया गय।

   10) संस्थान में 01.09.2021 से 30.09.2021 तक "पोषण माह" मनाया गया।

11) संस्थान द्वारा 16.10.2021 से 31.10.2021 तक “स्वच्छता पखवाड़ा” मनाया गया।

12) 27.10.2021 से 02.11.2021 के दौरान “**सतर्कता जागरूकता सप्ताह, 2021”** मनाया गया, जिसमें इस संस्थान में 02.11.2021 को **"निवारक सतर्कता उपायों की नीतियां और प्रक्रियाएं"** विषय पर आयोजित कार्यशाला शामिल है।

13) संस्थान में 18.10.2021 से 31.12.2021 तक “**पोषण के लिए आयुर्वेद**” विषय पर छठा आयुर्वेद दिवस मनाया गया, जिसमें संस्थान द्वारा विभिन्न गतिविधियां यथा ओपीडी और आउटरीच कार्यक्रमों में पोषण के संबंध में जागरूकता व्याख्यान, पोषण शिविर, पौधों का वितरण, निबंध लेखन प्रतियोगिता एवं पोस्टर प्रतियोगिता तथा पोषक बिस्किट्स का वितरण, का आयोजन किया गया।

14) संस्थान द्वारा 30.10.2021 को 6वें आयुर्वेद दिवस 2021 के उत्सव के दौरान आम जनता में जागरूकता के लिए '**आयुर्वेद के अवसर पोषक अहार**' पर वेबिनार का आयोजन किया गया।

15) संस्थान ने राष्ट्रीय आयुर्वेद संस्थान, जयपुर में 1 से 2 नवंबर, 2021 तक आयोजित **"छठे आयुर्वेद दिवस-2021**" में सीसीआरएएस की ओर से भाग लिया और एक स्टॉल लगाया।

16) संस्थान ने 08.01.2022 से 10.01.2022 तक नाथद्वारा, राजसमंद, राजस्थान में गायत्री परिवार ट्रस्ट द्वारा आयोजित "योग उत्सव" में भाग लिया।

17) इस संस्थान द्वारा 23.02.2022 को कलेक्ट्रेट कार्यालय, जयपुर में आज़ादी का अमृत महोत्सव के अन्तर्गत कोविड-19 के लिए रोगनिरोधी औषधियों के निशुल्क वितरण के लिए एक शिविर का आयोजन किया गया।

18) इस संस्थान ने राष्ट्रीय आयुर्वेद संस्थान, जयपुर मानित विश्वविद्यालय द्वारा जवाहर कला केंद्र, जयपुर राजस्थान में आयोजित "आयुष प्रदर्शनी और खाद्य उत्सव" में दिनांक 11.03.2022 से 13.03.2022 तक भाग लिया।

3. <u>वेबीनार/ सेमीनार/बैठकें/प्रशिक्षण/कार्यशाला/शोधपत्र:-</u>

डॉ.बी.आर.मीणा, प्रभारी सहायक निदेशक, डॉ.वी.बी.कुमावत, अनुसंधान अधिकारी (आयु.), डॉ. एस.के.वेदी, अनुसंधान अधिकारी (आयु.), डॉ.डी.एस. रोतवार, अनुसंधान अधिकारी (आयु.), डॉ.मोनिका कुमारी, अनुसंधान अधिकारी (आयु.), डॉ.किशोर ए. गवली, अनुसंधान अधिकारी (आयु.) एवं डॉ.सुहास ए चौधरी, अनुसंधान अधिकारी (आयु.) ने इस संस्थान/ अन्य संस्थानों द्वारा विभिन्न विषयों पर आयोजित की गयी लगभग 50 वेबीनार/ सेमीनार/बैठकें/प्रशिक्षण/कार्यशालाओं में प्रतिभागिता की तथा कुछ अधिकारियों ने शोध पत्र प्रस्तुत किये व व्याख्यान दिये।

4. **प्रकाशन:-**

इस संस्थान के अनुसंधान अधिकारियों द्वारा 04 शोध लेख/पत्र अंतर्राष्ट्रीय पत्रिकाओं में प्रकाशित किए गए।

M.S. REGIONAL AYURVEDA RESEARCH INSTITUTE, JAIPUR

Annual Report Summary 2021-2022

M.S.Regional Ayurveda Research Institute for Endocrine Disorders (MSRARIED), Jaipur was established on 1st April,1972 as **Regional Research Institute (RRI)** for Ayurveda under Central Council for Research in Ayurveda and Siddha (CCRAS) (now Central Council for Research in Ayurvedic Sciences), Department of Indian System of Medicine and Homoeopathy (now Ministry of AYUSH), Government of India, with the objective to promote Ayurveda on scientific ground by means of clinical as well as drug development studies. In the year 1999, under the process of re-organization of CCRAS, this institute was upgraded as **Central Ayurveda Research Institute (CARI)**. In the year 2010, the Institute was again renamed as **Ayurveda Central Research Institute (ACRI)**. There after under the process of re-organization of Council's peripheral units, the institute was renamed as "**Regional Ayurveda Research Institute for Endocrine Disorders** (**RARIED**)"in April 2016. The institute has been renamed once again as **'Regional Ayurveda Research Institute (RARI)'** since January, 2021. Various Clinical Research studies have been conducted by this Institute since its inception.

During the reporting year 2021-2022, the following research projects have been initiated:

1. IMR project entitled "Clinical Evaluation of Vidanga Churna and Vyoshadi Guggulu in the Management of Medoroga (Obesity)".
2. IMR project entitled "Randomized, Placebo Controlled, Double-Blind Clinical Trial to Evaluate the Effect of Trikatu in Sub-Clinical Hypothyroidism".
3. Following 03 IMR projects under Ayurveda Mobile Health Care Programme (AMHCP) under Scheduled Castes Sub Plan (SCSP) 2021-22 were initiated and completed.
    a) Health Survey (AMHCP): Profiling of Demographic, health status and Non communicable Diseases among Scheduled Caste population in selected states across India- A descriptive, Cross sectional Epidemiological study.
    b) A prospective community based study for the evaluation of Punarnavadi Mandoor in Anemia (Pandu).
    c) Effectiveness of Ayurveda based diet and Lifestyle advocacy on health related Quality of life in schedule Caste population in India- a Community based, cluster randomized controlled study.
4. Following 04 IMR projects under Tribal Health Care Research Programme (THCRP) under Tribal Sub Plan 2021-22 were initiated and completed.
    a) A prospective community based study for the evaluation of Dhatri lauha in Anemia (Pandu).
    b) A prospective community based study for the evaluation of Yograj Guggulu, Ashwagandha Churna and Narayan Taila in Osteoarthritis Knee (Janugat Sandhivata).
    c) Effectiveness of Ayurveda based diet and lifestyle advocacy on health related quality of life in schedule tribe population in India - a Community based, cluster randomized controlled study.

d) Profiling of Demographic, health status and Non communicable Disease among Scheduled Tribe population in selected states across India- A descriptive, Cross sectional, Epidemiological study.

5. Following IMR projects under Reproductive and Child Health Care Programme (RCH) under "Ayurveda Mobile Health Care Programme under Scheduled Castes Sub Plan (SCSP) 2021-22 were initiated and completed.
    a) Effectiveness of Ayurveda based diet and Lifestyle advocacy on health related Quality of life in Women's of schedule Caste population in India- a Community based, cluster randomized controlled study.
    b) A prospective community based study for the evaluation of Rajapravartani Vati in the Management of Primary Dysmenorhoea.
6. Clinical Research Project is entitled "Impact of Ayuraksha Kit in COVID-19 Community Based Prophylactic Study" Under THCRP 2021-22 was initated on 16.02.2022. The project has been completed.
7. Clinical Research Project is entitled "A prophylactic community based study to assess the impact of Ayuraksha Kit in COVID-19" under SCSP, 2021-22 was initated on 15.02.2022. The project has been completed.
8. Documentation of efficacy of select Ayush Interventions Ayush-64 and Kabasura Kudineer in asymptomatic & mild to moderate Covid-19 patients in home isolation through a mobile app: A prospective multicenter Community based study.
9. Distribution campaign of Prophylactic Ayush medicines and Guidelines on diet and lifestyle with special focus on geriatric population under Azadi ka Amrit Mahotsav-India@75.
10. Under IMR (Collaborative) project "Second phase validation and reliability testing of diagnostic methods in Ayurveda for disease Prameha" (in collaboration with NIA, Jaipur) - 30 patients of Pandu completed as per target.

Following Research projects have been carried forwarded from last reporting year 2020-21:

1. IMR Project entitled "A Prospective Open Labelled Observational Study to Document the Potential Safety Issues and Prescription Trends in Selected Rasausadhi's in CCRAS-OPD's Across India", was initiated on 08.01.2021. The project has been completed in March, 2022.

Apart from above projects, other outreach Research programmes/ projects executed/ being executed in the Institute are:

1. Integration of AYUSH (Ayurveda) with National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (**NPCDCS**) at Bhilwara (Rajasthan). The programme has been closed in April 2021.
2. National Pharmaco-Vigilance Program for ASU drugs (continuing).

Research Projects allotted and to be initiated:-

1. Impact of Ayurveda Based Lifestyle Advocacy and Practices among apparently healthy individuals across selected cities in India- A Randomized Parallel Group Study.

2. Clinical Evaluation of Lekhaniya Gana Kashaya and Arogyavardhini Gutika in the management of Medoroga (Obesity).
3. Clinical evaluation of Lashnadi Vati and Pippaldyasava in the management of Agnimandya.

Brief description of Research Projects and Programmes:

1. **AYUSH-Hospital Management Information System (A-HMIS):-** A-HMIS Project had been initiated in the Institute's Hospital from the April, 2019. During the reporting period, 2021-22, total 18,602 patients of various diseases consulted in the A-HMIS OPD. The system is functioning sucecssfully in the Hospital.

2. **A Prospective Open Labelled Observational Study to Document the Potential Safety Issues and Prescription Trends in Selected Rasausadhi's in CCRAS -OPD's Across India:-** The project had been allotted under IMR annual action plan 2019-20. The budget has been allotted to Institute on 28.02.2020. The Ethical Clearance has been obtained on 13.03.2020. The project had been initiated on 08.01.2021. 117 Cases were screened, out of which 108 cases were enrolled, 92 cases were completed and 16 cases were drop out. The project has been completed in March, 2022.
3. **IMR project entitled "Clinical Evaluation of Vidanga Churna and Vyoshadi Guggulu in the Management of Medoroga (Obesity):-**The project has been allotted under IMR annual action plan 2018-19. The project has been initiated on 24.11.2021. Up to 31st March, 2022, 10 cases were screened, out of which 06 cases were enrolled, 01 case were completed and 01 cases were dropout. 04 cases were continued.
1. **IMR project** e**ntitled-Randomized, Placebo Controlled, Double-Blind Clinical Trial to Evaluate the Effect of Trikatu in Sub-Clinical Hypothyroidism:-**The project has been initiated in the month of March 2022. During the reporting period, 14 patients were screened for Hypothyroidism. Till the end of March, 2022, no subject was enrolled in this study.
2. **Documentation of efficacy of select Ayush Interventions Ayush-64 and Kabasura Kudineer in asymptomatic & mild to moderate Covid-19 patients in home isolation through a mobile app: A prospective multicenter Community based study**:- Enrollment was started on 10.05.2021. As per Council's letter no. F.No. 3-42/ 2021/ CCRAS-Admin/1964 on dated 27.07.2021; last enrollment was done before 31.07.2021 and follow-up was carried out before 21.08.2022. Total 2,221 subjects were enrolled; among them 09 were dropped-out and 2,212 were completed till 21.08.2022. The data in prescribed excel sheet link has been submitted to headquarter.
3. **Distribution campaign of Prophylactic Ayush medicines and Guidelines on diet and lifestyle with special focus on geriatric population under Azadi ka Amrit Mahotsav-India@75:-**Total 10,000 individuals was benefited through such AKAM activities and received Prophylactic Ayush medicines from 30.08.2021 to 05.09.2021.
   - For target of One Lakh beneficiaries; from 08.10.2022 to 31.03.2022, following activities were carried out:
     - Total 66,429 individuals were benefited through AKAM activities. Among them 49,043 individuals have received Samshamani Vati; 9,147 individuals have received advocacy/guideline/IEC material and 8,239 have received Ashwagandha Ghan Vati.
     - 500 Ayuraksha Kit distributed to general population.

- Ayush-64 was given to 534 subjects with COVID like symptoms as well as asymptomatic, mild and moderate symptoms having COVID-19 positive.
- Total 05 webinars were conducted.

4. **Tribal Health Care Research Programme (THCRP):-** This Programme was allotted to the Institute under Tribal Sub Plan ofAnnual Action Plan 2014-2015. In the reporting year 2021-22, total 123 health camps and surveys were conducted in 10 villages of district Pratapgarh of Rajasthan. Total 5910 populations have been covered in these surveys of tribal population. In these villages, investigations were carried out and free medicines were given to 3101 patients belonging to tribal population. Total 08 Folklore claims documentation were collected. Since inception, total 81 villages covered on 62813 populations and total 21720 patients were treated; total 98 folklore claims were collected. This programme is still continuing.Total 04 Clinical Studies Project covered under this programme.
    a) **A prospective community based study for the evaluation of Dhatri lauha in Anemia (Pandu):-** This project started from 09-10-2021 and completed on 31-01-2022. Total target of 35 subjects covered under this programme. Total 72 patients were screened, out of which 35 patients enrolled /successfully completed under this programme.
    b) **A prospective community based study for the evaluation of Yograj Guggulu, Ashwagandha Churna and Narayan Taila in Osteoarthritis Knee (Janugat Sandhivata):-** This project started from 09-10-2021 and completed on 14-02-2022. Total target of 35 subjects covered under this programme. Total 91 patients were screened, out of which 35 patients enrolled & successfully completed under this programme.
    c) **Effectiveness of Ayurveda based diet and lifestyle advocacy on health related quality of life in schedule tribe population in india-a Community based, cluster randomized controlled study:-** This project started from 08-09-2021 and completed on 17-01-2022. Total target of 70 subjects (Group-I & Group-II) covered under this programme. Total successfully completed patients screened 125 and enrolled 70 under this programme.
    d) **A Prophylactic Community Based Study to assess the impact of Ayu Raksha Kit in Covid-19:-** This project started from 16-02-2022 and completed on 28-03-2022. Total target of 2640 subjects (2400 Group-I & 240 Group-II) covered under this programme. Total patients were screened 2640 and 2640 enrolled / successfully completed under this programme.
5. **Ayurveda Mobile Health Care Programme (AMHCP) under Scheduled Castes Sub Plan (SCSP):-** The AMHCP programme was allotted to this institute under SCSP and it was initiated on 28th November, 2015. During the reporting year 2021-22, under this programme a team of RARI, Jaipur conducted door to door survey, health camps in 05 selected SC population dominant villages of Jaipur district of Rajathan state namely - *Achrol, Samod, Jaisinghpura, Kaladera* and *Kanota* and collected different demographic and other data as per prescribed format particularly of SC population; also distributed free medicine for different diseases at their door step. During Survey, village information, house information, information related to health of SC population was collected. In the reporting years, total 162 survey tours / health camps were conducted in selected villages and total 5905 SC population was covered in selected villages/areas through surveys. Screening was conducted for Anemia (Total: 1512), Diabetes Mellitus (Total: 1855), and Hypertension (Total: 3909). Total 3874 number of patients were identified and treated in health camps for different diseases, out of which 3770 patients were belonging to SC category. They were provided free Ayurvedic medicines. Total 3720 numbers of investigations (Hb & Blood sugar tests) were carried out as per need of patients. Various

awareness activities were carried out during the year. Since inception of this programme, total 83 villages have been covered for 64,431 scheduled caste population and total 34,190 scheduled caste patients were treated. The programme is still continuing on yearly basis.

Further, besides health survey, total 03 Clinical Studies/ Projects were executed under AMHCP (SCSP) during the reporting period, which are as under:

a) **A Prospective Community Based Study for the evaluation of *Punarnavadi Mandura* in Anemia (Pandu)**:- This clinical project was initiated on 12.10.2021. Total target to be covered was 50 patients. Till 31st March, 2022, total 500 numbers of patients were screened, out of which 50 patients of anemia were enrolled; 44 patients were completed in study; 01 patient was drop out. Presently 05 patients are continued for last follow up visit (without medicine) of 112th day. The project is continued and will be completed on dated 20.04.2022.

b) **Effectiveness of Ayurveda based diet and lifestyle advocacy on health related quality of life in schedule caste population in India - a Community based, cluster randomized controlled study**:- This project was started from 14.09.2021. Total target of 70 subjects (Gr-I-35& G-II-35) was covered under this programme. Total 119 numbers of subjects were screened and 70 enrolled/successfully completed under this programme. The study has been completed on dated 09.03.2022.

c) **A Prophylactic Community Based Study to assess the impact of Ayu Raksha Kit in Covid-19**:- The Study was initiated from dated 15.02.2022 and completed on dated 22.03.2022. Total target 693 population was to be covered under two groups [Gr-I-630 (Intervention) & Gr-II-63 (Control)]. Ayu Raksha Kit along with soaps & masks were distributed to the enrolled 630 subjects under group-I (intervention); while only soaps & masks were distributed to the 63 patients enrolled under group-II (Control group). Both the groups under study were instructed to follow the Govt. standard guidelines for Covid-19 protection.

6. **Reproductive and Child Health Care Programme (RCH)-**The RCH programme under SCSP has been conducted by this institute in SC population dominant five area/ localities of Jaipur district of Rajasthan namely Niwaru, Chtwari, Kalwar, Chandlai and Muhana. Under this programme, the team of RARI, Jaipur has done door to door survey of the localities, health camps and collected different data as per format particularly of women and children; also distributed free medicine for different diseases at the door step. During Survey Village information, House information, information of women and Children related to health was collected. Screening was conducted for anaemia (Total:2629), Diabetes Mellitus (Total:1495), Hypertension (Total:3081) and Malnutrition status among children (Total:2809). Total 5890 SC women and Children were surveyed to get health related demography. Total 4088 women and children were treated through mobile health camps, of which 3136 were SC women whereas 891 were SC children. Total 4765 numbers of investigations were carried out as per need of the patients. Total 56 awareness activities were carried out during the year. Total 02 Clinical Studies Project covered under this programme.

   a) **A Prospective Community Based Study for the evaluation of Rajpravartani Vati in the management of primary Dysmenorhoea**:- This Project Started from

27.09.2021 and completed to 15.03.2022. Total target 50 covered under this programme. Total patients screened 54 and enrolled 50 under this programme.

b) **Effectiveness of Ayurveda based diet and lifestyle advocacy on health related quality of life in schedule caste population in India-a Community based, cluster randomized controlled study:-** This Project Started from 26.08.2021 and completed to 15.02.2022. Total target 70 (Gr-I-35& G-II-35) covered under this programme. Total patients screened 78 and enrolled 70 under this programme.

7. **Integration of AYUSH (Ayurveda) with National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) at Bhilwara (Rajasthan):-** The AYUSH-NPCDCS Programme was established in 2015-2016 as an integration of AYUSH (Ayurveda) with National Programme for prevention and control of Cancer, Diabetes, Cardiovascular Diseases and Storke programme in Bhilwara, Rajasthan in collaboration with Ministry of Health and Family Welfare, Govt. of India in Rajasthan State. The programme had been launched in District Hospital and 22 Community Health Centres of District Bhilwara, Rajasthan.

   During the year 2021-22; total 7,969 patients were screened among them 491 patients were enrolled in diseases mentioned in program. Total 142 Diabetic patients, 162 Hypertensive patients and 187 Dyslipidemia patients were enrolled while no patients were completed treatment course of six months. As an activity of AYUSH-NPCDCS as well as to prevent the spread of NCDs; total 4,129 persons registered for daily morning Yoga classes. As per direction of council; closure of program took place on 30th April, 2021 vide letter F. No. 63-1/2015-CCRAS/Admin./NPCDCS/Jaipur/Vol.-1/431 dated 23.04.2021.

8. **National Pharmaco-vigilance program for ASU drugs:-** During the current reporting year, 18602 subjects were studied to notice the suspected adverse drug reactions. None of the patients reported any ADR of the Ayurveda drugs being used.

Hospital Section:

The Institute has Out Patient Door (OPD), In Patient Door (IPD) and Panchakarma facilities**.**

OPD Unit

OPD of the Institute is running daily from 9:00 AM-1:00 PM on all working days. Ayurvedic medicines are dispensed at free of cost to all patients as per need along with consultation. During the reporting year 2021-22, total 18602 (10258 males and 8344 females) patients were examined and treated at OPD level. In the Geriatric OPD, total 791 patients were treated out of which 562 were males and 229 were females.

IPD Unit

Institute has 20 beded IPD facility, out of which 10 beds are allotted to each Male and Female ward. During the reporting year 2021-22, due to COVID-19 pandemic situation, most of the period, indoor services remain closed. However, from February 2021, IPD services restarted in the hospital and total 74 patients (28 males & 46 females) were admitted and treated in the IPD of the Institute.

Panchakarma Unit

During the reporting year, in Panchakarma unit of the institute**,** total 2057 number of different Panchakarma therapy procedures (691 on males and 1366 on females) were performed.

Diagnostic Laboratory:

The Institute is having a well-equipped Clinical Laboratory. In the laboratory, there are Bio-chemistry and Pathology sections. The various investigations are done in the laboratory keeping in view the allotted Research programs. The investigations are done on payment basis except Research cases and BPL patients. 60% concession is provided to Senior Citizens on all investigations since January, 2017.

ANNUAL SUMMARY				
INVESTIGATIONS REPORT (General OPD + IPD +GERIATICS O.P.D. + IPD)				
MONTH:- APRIL 2021 - MARCH 2022				
a. Table showing No. of Investigations done				
S.No.	**Investigations**	**Total (Male)**	**Total (Female)**	**Grand Total**
1.	Pathological Investigations	**2525**	**3678**	**6203**
2.	Biochemical Investigations	**2276**	**2543**	**4819**
3.	Radiological Investigations	**35**	**29**	**64**
	Total	**4836**	**6250**	**11086**

During the current reporting year 2021-22, total 11086 investigations related to Pathology, Serology and Biochemistry (Blood, Stool, Urine, Semen and Sputum etc.) were carried out. The institute is also having a Radiography unit where during the reporting years, total 64 radiological investigations were performed.

Other activities:

1. Guggulu Herbal Farm,Mangliawas, Ajmer:-

A Guggulu Herbal Farm is also working under control of this institute at village Mangliawas, District Ajmer of Rajasthan, which was handed over back to CCRAS by National Institute of Ayurveda, Jaipur on 9th November 2016. The farm was started in 1st April 1972 in which research, development and extensive cultivation of Guggulu plants were done till 31st December 2006, through plant cuttings, air layering and seedlings. About 60 species of various medicinal plants are being grown/ cultivated including Guggulu plants. During the reporting year 2021-2022, 1.5 Kg. Guggulu gum-oleo resin was collected. 190 gm Guggulu gum-oleo resin was remaining in the stock. On including this quantity, total 1.690 Kg. Guggulu gum-oleo resin is presently in the stock. Total 47.00 Kg. of Guggulu gum-oleo resin was supplied to CARI Jhansi during this period. Total 5.500 Kg. of fresh raw drugs of 3 plant samples were collected and 2.125 Kg. dried plants samples of 3 plants were supplied to various institutes of CCRAS.

2. Workshop/Programmes/Mela/Meetings organized:-

1) Inauguration and pledge taking ceremony in connection with the observance of "Anti-Terrorism Day (21.05.2021) at MSRARI, Jaipur complying with the preventive measures against the ongoing COVID-19 Pandemic was organized in the institute.
2) The Institute organised webinar on "Be with Yoga, Be at Home" on 29th May 2021.
3) On the occasion of "World No Tobacco Day 31st" May, 2021, Dr. B.R. Meena, A.D., I/C, administered the pledge to all the staff and officials of the MSRARI, Jaipur against the no tobacco use.
4) Webinar on "Role of Ayurveda in COVID-19 Pandemic" on the occasion of Amrit Mahotsav was conducted by MSRARI, Jaipur on dated 11th June, 2021.

5) "International Yoga Day 2021" was celebrated with common yoga protocol practice under the guidance of Yoga Expert on 21st June 2021 and whole staff participated in it.
6) 04 Quarterly Hindi workshops were also organized by the Institute.
7) The Institute celebrated"Azadi ka Amrut Mahotsava- India@75" by large scale distribution of Ayush prophylactic medicines (Samshamani vati and ashwagandha churna) and general guidelines to 10,000 population in the week from 30/08/2021 to 05/09/2021. The programme has been extended up to August, 2022 to benefit the target of one lakh population.
8) Launching program of "Azadi ka Amrut Mahotsava-India@75" was organized by the Institute on 02/09/2021 in its campus.
9) Hindi Pakhwada was observed in the institute from 14.09.2021 to 28.09.2021.
10) Poshan Maah was celebrated in the institute from 01.09.2021 to 30.09.2021
11) Swachhata Pakhwada was observed by the Institute from 16.10.2021 to 31.10.2021.
12) Vigilance awareness week, 2021 was observed during the 27.10.2021 to 02.11.2021. Including the workshop orgainsed in this Institute on the topic "Policies and procedures of preventive vigilance measures" on 02.11.2021.
13) 6th Ayurveda Day with theme 'Ayurveda for Poshan' was celebrated in the institute from 18.10.2021 to 31.12.2021 in which various activities such as awareness lectures in OPD and outreach programmes regarding nutrition, nutrition camps, distribution of saplings, essay writing competition and poster competition and distribution of nutritive biscuits were conducted by the institute.
14) Webinar on 'Ayurveda ke anusar Poshak ahara' was organized by the institute on 30.10.2021 for general public awareness during celebration of 6th Ayurveda day 2021.
15) The Institute has participated and placed a stall on behalf of CCRAS in "6th Ayurveda Day-2021" organized at National Institute of Ayurveda, Jaipur from 1th-2th November, 2021.
16) The Institute has participated in "Yoga Fest" at Nathdwara, Rajsamand, Rajasthan organized by Gayatri Parivar Trust from 08.01.2022 to 10.01.2022.
17) This Institute has organised a Camp for free distribution of prophylaxis medicine for covid-19 under Azadi Ka Amrit Mahostav on 23.02.2022 at Collectorate Office, Jaipur.
18) This Institute has participated in "AYUSH EXPO AND FOOD FESTIVAL" at Jawahar Kala Kendra, Jaipur Rajasthan on 11.03.2022 to 13.03.2022 organized by National Institute of Ayurveda, Jaipur Deemed to be University.

3. Webinar/Seminar/Meetings/Trainings/Workshops attended/Paper presented:

Dr. B.R. Meena, Assistant Director Incharge, Dr. V.B. Kumawat, R.O. (Ay.), Dr. S.K. Vedi, R.O. (Ay.), Dr. D.S. Rotwar, R.O. (Ay.), Dr. Monika Kumari, R.O. (Ay.), Dr. Kishor A. Gavali, R.O. (Ay.) and Dr. Suhas A. Chaudhary have participated in about 50 Webinars/ Seminars/ Meetings/ Trainings/ Workshops organized by this Institute/other Institute's/ organizations on different subjects and also some officers presented Research Papers and delivered lectures.

4. Publications:-04 Research Articles/papers have been published in International journals by the Research Officers of this Institute.

PHOTO GALLERY

दैनिक भास्कर जयपुर 30-04-2021

जयपुर के क्षेत्रीय आयुर्वेद संस्थान में निशुल्क मिलेगी 'आयुष-64'

जयपुर | कोविड का होम आइसोलेशन में इलाज ले रहे मरीजों के लिए राहत वाली खबर बै। जयपुर के झोटवाड़ा स्थित आयुर्वेद क्षेत्रीय आयुर्वेद संस्थान होम आइसोलेशन वाले मरीजों के लिए परिजन सुबह 9 से दोपहर एक बजे तक निशुल्क आयुष-64 प्राप्त कर सकते है। संस्थान के सहायक निदेशक डॉ.बी.आर.मीणा ने बताया कि कोई भी कोविड मरीज जिसके हल्के से मध्यम लक्षण हो। लेकिन अस्पताल में भर्ती नहीं होना चाहिए। उसके परिजन संस्थान की ओपीडी से मरीज की पॉजिटिव रिपोर्ट तथा आधार कार्ड की फोटोकॉपी के साथ पंजीकरण करवाकर निशुल्क आयुष-64 ले सकता है। डॉ.मीणा ने बताया कि शोध के आधार पर मलेरिया, फ्लू और बुखार के लिए आयुष-64 कारगर दवा साबित हुई है।



One month Celebrations of International Day of Yoga-2021 was initiated on 21.05.2021 at MSRARI, Jaipur. Common Yoga Protocol' published by Ministry of Ayush was practiced by the Officers and Officials of the institute. COVID Appropriate Behavior was followed during the program.



On the occasion of World No Tobacco Day 31st May, 2021, Dr. B.R. Meena, A.D., I/C, gave the pledge to all the staff and officials of the MSRARI, Jaipur against the tobacco use.





दिनांक 21.06.2021 को सातवे अंतर्राष्ट्रीय योग दिवस 2021 के अवसर पर एम.एस. क्षेत्रीय आयुर्वेद अनुसाधन संस्थान, जयपुर के संस्थान परिसर में समस्त अधिकारियों एवं कर्मचारियों द्वारा योगाभ्यास कर के योग दिवस मनाया गया। जिसका प्रतिपादन संस्थान के सहायक निदेशक प्रभारी डॉ. बी. आर. मीणा द्वारा किया गया एवं संचालन डॉ. वी. बी. कुमावत, अनु. अधिकारी (आयु.) द्वारा किया गया।



दिनांक 12.07.2021 को क्षेत्रीय आयुर्वेद अनुसंधान संस्थान, जयपुर द्वारा Awareness campaign (AYU SAMVAD) Ayurveda for Covid-19 Pandemic" का शुभारम्भ डॉ. बी.आर.मीणा, प्रभारी सहायक निदेशक महोदय द्वारा किया गया। महोदय ने OPD में आये रोगियों को आयुर्वेद के माध्यम से रोग प्रतिरोधक क्षमता बढ़ाने हेतु प्रेरित किया एवं कोविड-19 से बचाव एवं सावधानियों के प्रति जागरूक रहने के लिए व्याख्यान दिया।



Ayurveda Mobile Health Care Programme (AMHCP) under Scheduled Caste Sub Plan (SCSP) for the year 2021-22 was initiated on 16.07.2021.



डॉ. बी. आर. मीणा, प्रभारी सहायक निदेशक महोदय, दिनांक 20.07.2021 को नगर राजभाषा कार्यान्वयन समिति जयपुर द्वारा संस्थान को राजभाषा हिंदी में सर्वाधिक कार्य करने के लिए वर्ग 'ख' में वर्ष 2019-20 का पुरस्कार प्राप्त करते हुए।



Lecture using PPT by Dr. V.B. Kumawat on "Ayurveda for covid-19 pandemic" in the series of Ayusamvad in OPD on 24.07.2021.



A public/ PPT lecture is delivered today dated on 29.07.2021 on the subject "Ayurveda for COVID 19 pandemic" by Dr. S. K. Vedi, RO(Ay.), MSRARI, Jaipur, as a part of Lecture Series on Mera Swasthya Meri Jimmedari.



Lecture using PPT presentation conducted at community center vill Kalvad, Jaipur on 04.08.21 by Dr. Monika Kumari, Research Officer.



Lecture using PPT presentation conducted on 06.08.21 by Dr. Suhas Chaudhary, Research Officer (Ay.).



दिनांक 11.08.2021 को एम. एस. आर. ए. आर. आई. जयपुर के बहिरंग विभाग मे डा.एस. के. वेदी, अनुसंधान अधिकारी द्वारा आयुष संवाद व्याख्यान माला के अन्तर्गत "आयुर्वेद फार कोविड 19 " विषय पर व्याख्यान पी. पी. टी. के माध्यम से संस्थान के बहिरंग विभाग में आयोजित किया गया!



संस्थान द्वारा आयोजित आजादी का अमृत महोत्सव कार्यक्रम की झलकियां।



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महापौर मुनेश गुर्जर ने इम्यूनिटी बूस्टर निःशुल्क औषधि बांटी



केन्द्रीय आयुष मंत्रालय की ओर से फ्रंट लाइन वर्कर्स व वरिष्ठ नागरिकों के लिए इम्यूनिटी बढाने वाली आयुर्वेदीय औषधि संशमनी वटी तथा अश्वगंधा बांटी जा रही है। जयपुर में इस अभियान का शुभारंभ गुरूवार को नगर निगम हैरीटेज की महापौर मुनेश गुर्जर ने किया।

जयपुर (कासं)। केन्द्रीय आयुष मंत्रालय की ओर से फ्रंट लाइन वर्कर्स और वरिष्ठ नागरिकों के लिए इम्यूनिटी बढाने वाली आयुर्वेदीय औषधि संशमनी वटी तथा अश्वगंधा बांटी जा रही है। जयपुर में इस अभियान का शुभारंभ गुरूवार को नगर निगम हैरीटेज की महापौर मुनेश गुर्जर ने किया।

बनीपार्क स्थिति क्षेत्रीय आयुर्वेद अनुसंधान संस्थान में प्रभारी सहायक निदेशक डॉ. बी. आर. मीणा ने कहा कि आजादी के अमृत महोत्सव के अन्तर्गत देशभर में आयुर्वेद द्वारा कोविड-19 से बचाव के लिए आम नागरिकों तथा फ्रंट लाइन वर्कर को जागरुक किया जा रहा है। करोना महामारी के दौरान पूर्व में भी आयुष-64 टेबलेट देशभर में बांटी गई थी। इससे करोना के हल्के से मध्यम लक्षणों वाले रोगियों को फायदा मिला था। इसी श्रृंखला में 'आयु संवाद' कार्यक्रम के अन्तर्गत करीब पांच लाख व्याख्यानों द्वारा एक करोड लोगों को आयुर्वेद से कोविड के बचाव के लिए जागरुक किया गया है।

उन्होंने बताया कि आयुर्वेदीय इम्यूनिटी बूस्टर औषधि गिलोय वटी तथा अश्वगंधा अब वरिष्ठ नागरिको और फ्रंट लाइन वर्कर्स को बांटी जा रही है। यह दवा 12 वर्ष से ऊपर के सभी लोग ले सकते हैं। दवा वितरण का यह अभियान आगामी 15 अगस्त 2022 तक चलाया जायेगा। इस कार्यक्रम के अन्तर्गत (कोरोना की संभावित तीसरी लहर से बचाव हेतु) 75 लाख लोगों को इम्यूनिटी बूस्टर औषधि गिलोय वटी (संशमनी वटी) तथा अश्वगंधा वितरण का लक्ष्य निर्धारित किया गया है। आगाम 5 सितम्बर तक एक विशेष अभियान चलाकर एक सप्ताह में ढाई लाख लोगों को दवा वितरण का लक्ष्य रखा है।

मकान का
ल्टी माफ
लोगों को मिलेगा
शि पर ब्याज
प्रतिशत छूट

र्ग्रहण शुल्क में भी 60 फीसदी
दी, ताकि लोग अपने भूखंड़ पर
र्माण अवधि बढ़वा सकें।
रूपांतरण, उप विभाजन पर भी
ज दर में कटौती की गई है।

धित प्रक्रियाओं में ब्याज को घटाया गया
5 या 12 प्रतिशत ब्याज लगता था, जिसे
9 प्रतिशत कर दिया गया है। 'प्रशासन
' अभियान के चलते यह कमी गई है।
विभाग ने पुनर्ग्रहण शुल्क में 60 प्रतिशत
है। इस राहत के साथ यह शुल्क जमा
मार्च, 2022 तक निर्माण अवधि को
गा। विभाग की ओर से भूखंड पर तय
ण नहीं करने पर यह शुल्क लगाया जाता
ण अनुज्ञा अवधि में इसी अनुसार बढ़ोतरी
निर्माण अवधि बढ़ाने की यह छूट पहले
र तक लागू थी।

ने ध्यानाकर्षण
गेट मीटिंग की

ज्य से जयपुर स्थित विभागों में गेट मिटिंग्स

क्षेत्रीय आयुर्वेद अनुसंधान संस्थान में इम्युनिटी बढ़ाने के लिए निःशुल्क औषधि वितरण

आयुष-64 के देशभर में सकारात्मक परिणाम

नगर निगम हेरिटेज की मेयर मुनेश गुर्जर ने किया शुभारम्भ

जागरूक जनता
jagrukjanta.net



प्रो. संजीव शर्मा, डॉ. आर.के.जोशी ने मंत्री को राजस्थानी और स्मृति चिन्ह भेंटकर। इस अवसर पर द्रीय मंत्री का आयुर्वेद म्स नई दिल्ली के ों के बराबर इंटर्नशिप लिए आभार व्यक्त हा कि इससे छात्रों में थ कार्य करने की प्रेरणा



जयपुर। आयुष मंत्रालय भारत सरकारने कोविड-19 महामारी में अग्रिम पंक्ति के कार्यकर्ताओं (फ्रंट लाइन वर्कर) तथा वरिष्ठ नागरिकों को ध्यान में रखते हुए आम नागरिकों के लिए इम्युनिटी बढ़ाने वाली आयुर्वेदीय औषधि संशमनी वटी तथा अश्वगंधा के व्यापक वितरण का बनीपार्क स्थित क्षेत्रीय आयुर्वेद अनुसंधान संस्थान में मुख्य अतिथि जयपुर नगर निगम (हेरिटेज) महापौर मुनेश गुर्जर ने शुभारम्भ किया।

कार्यक्रम की जानकारी देते हुए संस्थान के प्रभारी सहायक निदेशक डॉ. बी.आर. मीणा ने कहा कि आयुष मंत्रालय भारत सरकार द्वारा 'आजादी के अमृत महोत्सव' के अन्तर्गत देशभर में आयुर्वेद द्वारा महामारी के दौरान आम आदमी तथा फ्रंट लाइन वर्कर को जागरूक किया जा रहा है जिसके अन्तर्गत कोविड-19 के दौर में पहले भी मंत्रालय द्वारा आयुष-64 टेबलेट का देशव्यापी वितरण किया जा चुका है। जिससे औषधि के सकारात्मक परिणाम सामने आए। उन्होंने बताया कि आयु संवाद कार्यक्रम के अन्तर्गत देशभर में बड़ी संख्या में व्याख्यानों के जरिए एक करोड़ से अधिक लोगों को आयुर्वेद से कोविड के बचाव की जानकारी दी गई।

कार्यक्रम की अध्यक्षता करते हुए डॉ. डी.एन. पाण्डेय, प्रधान मुख्य वन संरक्षक राजस्थान सरकार ने इस समारोह में आयुर्वेद के सटीक पौराणिक वैज्ञानिक देकर लोगों का उत्साहवर्धन किया। कार्यक्रम की मुख्य अतिथि मुनेश गुर्जर महापौर नगर निगम जयपुर हेरिटेज ने अपने वक्तव्य में कहा कि मैं इस कार्यक्रम में आकर गौरवान्वित महसूस कर रही हूं। कोरोना महामारी के दौरान इम्युनिटी बढ़ाने में आयुर्वेद ने बहुत बड़ी भूमिका निभाई है। उन्होंने संस्थान द्वारा किए जा रहे कार्यों की प्रशंसा की। कार्यक्रम के विशिष्ट अतिथि मुकेश मीणा अध्यक्ष पिंकसिटी प्रेस क्लब ने आयुष मंत्रालय द्वारा कोविड-19 महामारी में किए जा रहे प्रबंधन और बचाव कार्यों की सराहना की। इस अवसर पर डॉ. वीबी कुमावत, अनुसंधान अधिकारी (आयु.) ने सभी को औपचारिक धन्यवाद दिया।

कार्यक्रम के अंत में कार्यक्रम में उपस्थित हुए आम एवं वरिष्ठ नागरिकों को संशमनी वटी एवं अश्वगंधा चूर्ण, तुलसी, गिलोय, मीठा नीम आदि औषधीय पौधों का वितरण किया गया।



राष्ट्रीय पोषण माह अभियान



राष्ट्रीय पोषण माह अभियान



राष्ट्रीय पोषण माह अभियान सितंबर 2021 के अंतर्गत निशुल्क पोषक आहार वितरण कार्यक्रम।



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संस्थान द्वारा दिनांक 22.09.2021 को राजभाषा हिंदी पखवाड़ा के अंतर्गत हिंदी कविता पाठ प्रतियोगिता का आयोजन किया गया!

कालवाड: कुपोषित बच्चों को पोषक लड्डु निशुल्क वितरित



कालवाड। पोषण किट वितरित करते चिकित्सक।

भास्कर न्यूज | कालवाड़

बच्चों के पोषण संबंधित समस्याओं के प्रबंधन के लिए इस अभियान की शुरुआत की गई है। अभियान के अन्तर्गत राष्ट्रीय पोषण माह मनाया गया। इस दौरान कुपोषण छोड़ पोषण की ओर थामे क्षेत्रीय भोजन की डोर की ओर जोर दिया। इस अवसर पर आरएआरआई के द्वारा पोषण संबंधित फलदार पौधों का रोपण, महिलाओं के लिए रोग विशेषज्ञ द्वारा योग प्रशिक्षण की निशुल्क जांच की सुविधा, पोषण जागरूकता संबंधित जागरूकता अभियान चलाया। इस अवसर पर संस्था के द्वारा आंगनबाड़ी केंद्र कालवाड़ पर करीब 150 गर्भिणी महिलाओं तथा कुपोषित बच्चों को क्षेत्रीय आहार कीट के रूप में सूखे मेवों से बने लड्डुओं का वितरण किया गया। इस अवसर पर संस्था के प्रभारी डॉ बी.आर.मीणा, वी.वी. कुमावत, योगराज जैमन, आरती शर्मा, संतोष कुमार शर्मा, राजकुमार, हिमांशु वर्मा, दयाल चंद बालोटिया, शशि योगी सहित सैकड़ों ग्रामीण उपस्थित रहे।



पोषण माह अभियान के उपलक्ष्य में च्यवनप्राश एवं फलों का निशुल्क वितरण प्रभारी सहायक निदेशक डॉ. बी. आर. मीणा द्वारा किया गया। उक्त कार्यक्रम का आयोजन नोडल अधिकारी, पोषण माह डॉ. वी. बी. कुमावत द्वारा किया गया।

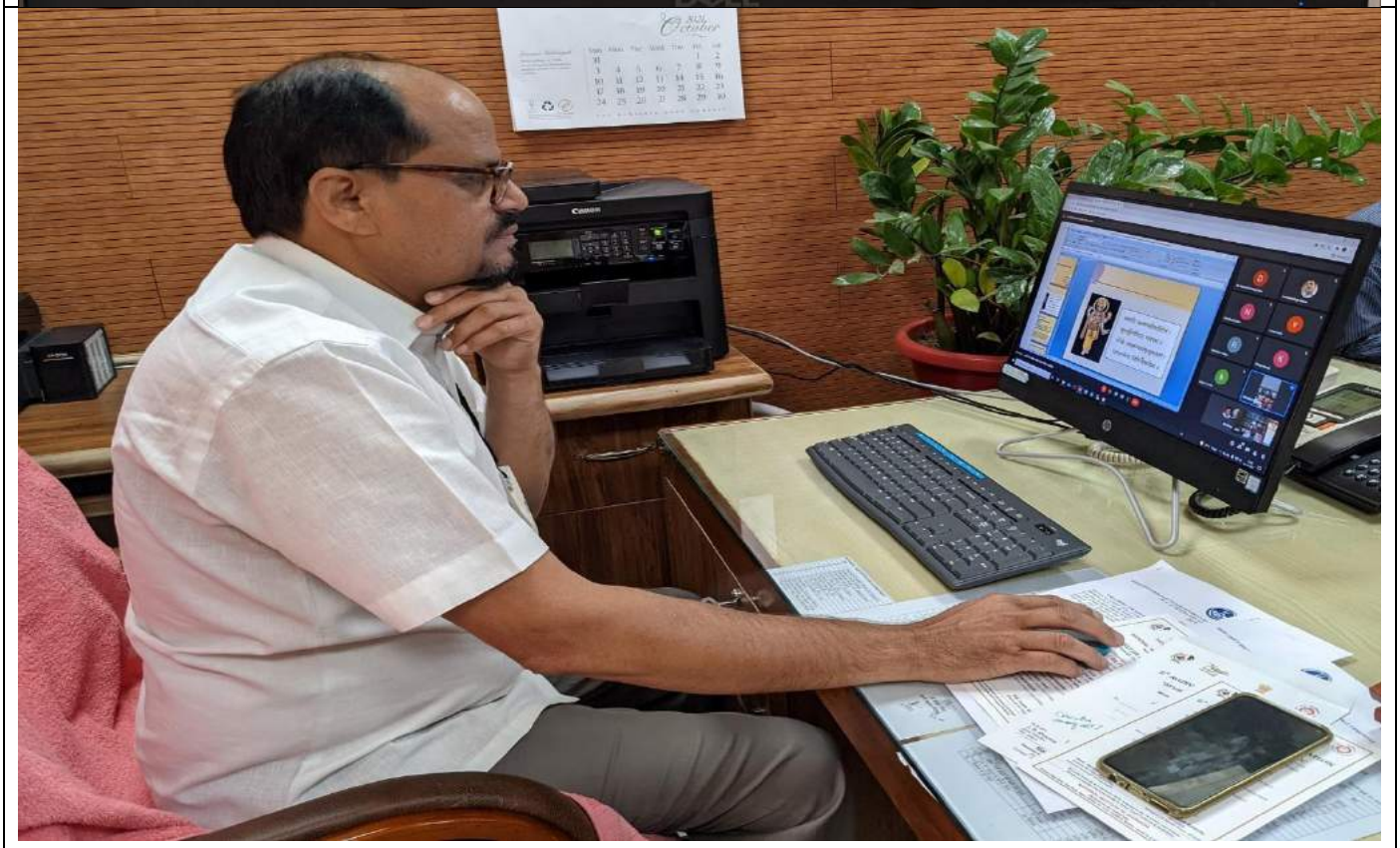


On the occasion of Vigilance Awareness Week, 2021, on 26-10-2021, Vigilance Pledge was administered by Dr. B.R. Meena, A.D., In-Charge to all the Officers and staffs of MSRARI, Jaipur.



दिनांक 28.10.2021 को संस्थान के बहिरंग रोगी अनुभाग में डॉ. दारा सिंह रोतवार, अनुसंधान अधिकारी (आयु) द्वारा पोषण के लिए आयुर्वेद विषय के अन्तर्गत " आयुर्वेद के अनुसार ऋतु संधिकाल में पोषण आहार के महत्व" पर व्याख्यान दिया गया!





संस्थान द्वारा दिनांक 30.10.2021 को 6th आयुर्वेद दिवस 2021 के उपलक्ष्य पर वेबीनार का आयोजन , जिसमें मुख्य अतिथि/वक्ता डॉ. हेतल दवे, एसोसिएट प्रोफेसर, राष्ट्रीय आयुर्वेद संस्थान डीम्ड यूनिवर्सिटी, जयपुर द्वारा "आयुर्वेद के अनुसार पोषक आहार" विषय पर व्याख्यान दिया गया!



Glimpses of 6th Ayurveda Day 2021 Celebration at NIA, Jaipur



Glimpses of 6th Ayurveda Day 2021 Celebration at NIA, Jaipur



डॉ. बी. आर. मीणा, प्रभारी सहायक निदेशक महोदय के द्वारा संस्थान के बहिरंग विभाग में मरीजों को चिकित्सा परामर्श देते हुये।



Glimpses of Essay competition held in MJF Ayurveda college Chomu on 17.12.2021

निबंध में 73 विद्यार्थियों ने दिखाई प्रतिभा



महात्मा ज्योतिबा फुले आयुर्वेद महाविद्यालय चौमूं

चौमूं @ पत्रिका. महात्मा ज्योतिबा फुले आयुर्वेद महाविद्यालय चौमूं के 73 विद्यार्थियों ने निबंध प्रतियोगिता में भाग लिया। प्राचार्य डॉ. बृजेश कुमार शर्मा ने बताया कि प्रतियोगिता का आयोजन क्षेत्रीय आयुर्वेद अनुसंधान संस्थान जयपुर की ओर से 6वां आयुर्वेद दिवस 2021 के उपलक्ष्य में अनुसंधान अधिकारी डॉ. एसके वेदी एवं डॉ. मोनिका वर्धन की उपस्थिति में किया गया। प्रतियोगिता के अंत में विद्यार्थियों को प्रमाण पत्र एवं पारितोषिक वितरित किए। प्रथम विजेता अभिषेक रंजन को 1500, द्वितीय विजेता प्रिया सिंह 1100 व तृतीय दिव्यांशी जांगिड़ 700 रुपए और रजा साहनी खान व हर्षित शर्मा को सांत्वना पुस्कार 500 रुपए से सम्मानित किया गया। कार्यक्रम में महाविद्यालय के प्राचार्य डॉ.बृजेश कुमार शर्मा ने अतिथियों का आभार जताया।





संस्थान द्वारा आउटरीच कैंपों के माध्यम से नि:शुल्क पोषक बिस्कुट का वितरण।



आज़ादी के अमृत महोत्सव के तहत मकर संक्राति के पावन अवसर “सूर्यनमस्कार जीवनी शक्ति का आधार” “Surya Namaskar For Vitalilty” इस थीम के तहत सूर्यनमस्कार आसन (कुल 12 क्रम में कालानुक्रमिक आसन) दिंनाक 14 जनवरी 2022 को किया गया।



Dr. B. R. Meena, Asstt. Director Incharge, RARI, Jaipur distributing Ayu raksha kit to State Minister, Govt of Rajasthan-Technical Education and Ayurveda and Indian Medicine.



आयु रक्षा किट, सैनिटाइजर, साबुन, मास्क का वितरण करते हुए टीएचसीआरपी टीम।



आयु रक्षा किट, सैनिटाइजर, साबुन, मास्क का वितरण करते हुए संस्थान की एससीएसपी टीम।



MSRARI, Jaipur Participating in AYUSH EXPO & FOOD FESTIVAL on 11, 12 & 13 March at Shilpagram, Jawahar Kala Kendra Jaipur.



Hon'ble Secretary AYUSH Vd. Dr Rajesh Kotecha participating in distributing the Immune booster kit to senior citizens during AYUSH EXPO & FOOD FESTIVAL.



Dr. B.R.Meena, Assistant Director Incharge of the Institute distributing the Immune booster kit to senior citizens during AYUSH EXPO & FOOD FESTIVAL.

Promotions/Joining/Transfers/Deputation/ Retirements:

1.	Promotions	-
2.	Joining	1. Sh. Gopal Chandra Behera, Assistant joined in this Institute on 10.06.2021, he has transferred from RARI, Patna. 2. Dr. Dara Singh Rotwar, R.O. (Ay.) joined in this Institute on 02.09.2021, he has transferred from RARI, Patna. 3. Dr. Kishor Gavali, R.O. (Ay.) joined the Institute on 28.09.2021, he has transferred from CCRAS, Hqrs. New Delhi. 4. Sh. Namonarayan Meena, UDC joined in this Institute on 31.12.2021.
3.	Transfers	1. Dr. Swati Sharma, R.O. (Ay.) has been transferred to CCRAS Hqrs., New Delhi on 30.09.2021. 2. Sh. Sunil Saini, UDC (on deputation basis) has been transferred to LT. Governor's Secretariat, GNCT, Delhi on 30.09.2021 3. Sh. Prahlad Mahto, Laboratory Technician has been transferred from this institute to RARIID, Patna and relieved from the Institute on 31/03/2022.
4.	Deputation	-
5.	Retirements	-