ALL ORISSA SRI AUROBINDO STUDY CIRCLE COMMITTEE

Souvenir

37TH ALL ORISSA CONFERENCE
of
Sri Aurobindo Medical Association

12th & 13th September 2026

"GENESIS OF ILL HEALTH AND DISEASE"

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37TH ALL ORISSA CONFERENCE OF
SRI AUROBINDO MEDICAL ASSOCIATION

Matrubhaban, Sri Aurobindo Marg, Cuttack - 753013
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PRAYER

Sweet Mother,

Pranams at Thy Lotus Feet.

The Sri Aurobindo Medical Association is going to hold its 37th all Orissa Conference on 12th and 13th September 2026 on the theme "GENESIS OF ILL HEALTH AND DISEASE".

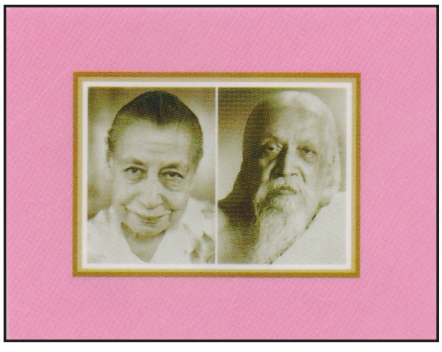
A Souvenir also willl be brought out for the occasion.

With this prayer accomanies the subtle participation of Thy Child Gadadhar Mishra by whose inspiration this forum of Thy Action had been initiated in 1976 by Dr. Braja Kishore Khandai and others.

Pray for Thy Grace, Blessings, Presence, Guidance throughout preparation and the two-day event.

Thy children

Members of the Sri Aurobindo Medical Association





Manoj Das Gupta
Sri Aurobindo Ashram Trust
Sri Aurobindo Ashram
Pondicherry

Dear Dr. Shyama Kanungo,

Your email regarding the 37th All Orissa Conference of Sri Aurobindo Medical Association to be held on the 12th and 13th September 2026, has been placed in Mother's Room.

We understand that a Souvenir will be published to mark the occasion and that the theme of the conference is "Genesis of Ill Health and Disease". We have no objection to your including excerpts and quotations from the Writings of Sri Aurobindo and the Mother in the Souvenir. Complete reference notes must be given for any excerpt taken from the original text and due acknowledgement made to the Sri Aurobindo Ashram Trust for the permission granted.

Any photographs of the Mother and Sri Aurobindo used must be printed inside the souvenir and not on its covers.

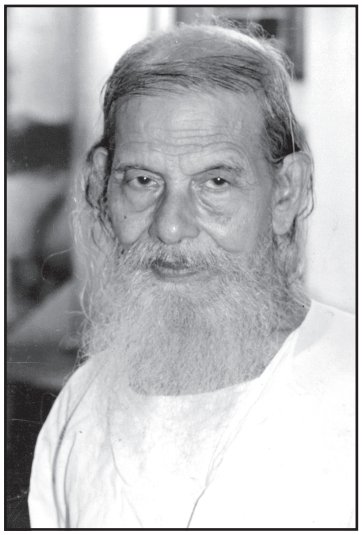
On publication of the souvenir, two copies may be sent to : The Copyright Department, Sri Aurobindo Ashram, Pondicherry 605 002.

With good wishes for the success of the conference,

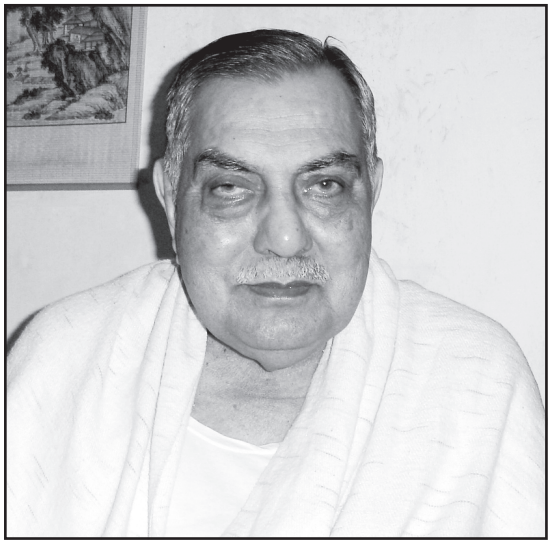
Yours sincerely,

Manoj Das Gupta
Copyright Department
Sri Aurobindo Ashram Trust

Sri Aurobindo Medical Association extends its gratitude to the Managing Trustee of Sri Aurobindo Ashram, Pondicherry for giving us permission to print the photograph of The Mother and Sri Aurobindo and their writings in this Souvenir.



Babaji Maharaj: "His inspirational messages and supplication to the Divine Mother for the Sri Aurobindo Medical Association will ever be our beacon light"



Dada: "He followed closely the entire activities of the Sri Aurobindo Medical Association and the Sri Aurobindo Health Squad Trainings closely. His abiding subtle participation to take this mission forward is ever with us".

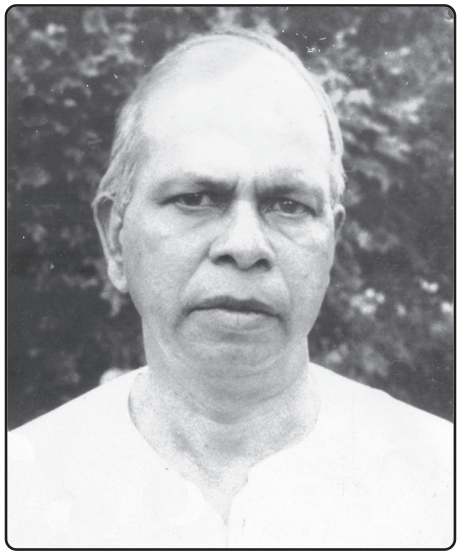


Message from A.S. Dalal, our guide and long time well wisher is with us in this endeavor:

"May we this day as each day grow, in Aspiration, Sincerity and Surrender. Best wishes for the successful annual conference."

- A.S. Dalal

(Dr. Dalal born in 17 February 1926 is now 100 years old as informed by son who works in NASA in the USA).



Prapatti: "He had always encouraged the medical professionals to organize themselves and give shape to the Mother and Sri Aurobindo's views on Health and Healing".



Prof. (Dr.) Durga Madhab Satapathy
Director Medical Education and Training,
Bhubaneswar, Govt. of Odisha.

Message

It gives me immense pleasure to commend the Sri Aurobindo Medical Association for its commendable pursuit of broadening the frontiers of health and healing, epitomized by the organization of this State-Level Annual Conference on Integrative Medicine.

True well-being transcends the mere mitigation of pathology; it encompasses the harmonious equilibrium of body, mind, and spirit. While the visionary efforts of Prof.

D.B. Bisht successfully enshrined the spiritual dimension into the global discourse on health as early as 1984, its meaningful assimilation into mainstream undergraduate medical pedagogy and community healthcare delivery remains an unfulfilled imperative.

Bridging this gap requires an intellectual renaissance. A comprehensive understanding of "Ill Health and Disease"—one that bridges empirical science with spiritual wisdom—stands today as a pressing necessity. Platforms of this calibre serve as vital crucibles, bringing together academic faculty, budding scholars, and esteemed AYUSH practitioners to foster an ethos of truly integrated patient care.

I applaud the organizers for their profound initiative and extend my warmest felicitations for a deeply fruitful, memorable, and successful conference.

Durga Madhab Satapathy

Prof. (Dr.) Durga Madhab Satapathy
DMET(O)

EDITORIAL

We look at 'Genesis of Ill-health and Disease' with a view to understand it as comprehensively as possible from all its aspects before we can find out means of effective conquest over them. Victory over suffering and ill-health to be in constant Bliss, has been the eternal longing of mankind vis-à-vis the aspiration for God, Light, Freedom and Immortality.

The genesis of ill health and disease is from error- error in understanding, error in thought, error in action, error in reaction, error in habits, error in upbringing, error in birth, error in lifestyle, error in attitude, error in traditions, error in family and societal traditions, error in outlook upon the world and the universe and creation, error in adherence to the divine destiny of the individual and the collectivity… in one word living in 'unconsciousness'.

Besides these illnesses can arise from disharmony, disorders, disequilibrium, erroneous interaction interchange with the environment. Then there are harmful microbes with harmful forces behind them. Weakness of the 'Nervous Envelope' and factors contributing to its weakness that create breach in its protective action. Wrong thinking, fear and adverse psychological roots in the 'subconscient' and still below in the darkest 'inconscient' need to be understood with clarity and precision to define their roles in the 'genesis of ill health and disease' before we can emerge with solutions to address them.

The contributors to this Souvenir, have thrown light on the multiple factors and viewpoints from disciplines like Naturopathy, Homoeopathy, Ayurveda, Yoga, several disciplines of Modern Medicine, Spirituality, Consciousness …hopeful that they throw light on aspirants yearning to evolve towards perfection.

Dr. Shyama Kanungo

NB: The facts and opinions expressed by contributors are their own. The editor is not responsible for the same.

The Mother and Sri Aurobindo on Causes of Illness

The Mother: If the whole being could simultaneously advance in its progressive transformation, keeping pace with the inner march of the universe, there would be no illness, there would be no death. [1]

The Mother says "Each spot of the body is symbolical of an inner movement; there is there a world of subtle correspondences…The particular place in the body affected by an illness is an index to the nature of the inner disharmony that has taken place. It points to the origin, it is a sign of the cause of the ailment. It reveals too the nature of the resistance that prevents the whole being from advancing at the same high speed…

The origin of an illness may be in the mind; it may be in the vital; it may be in any of the parts of the being. One and the same illness may be due to a variety of causes; it may spring in different cases in different sources of disharmony…And there may be too an appearance of illness where there is no real illness at all.

In short, the sources of illness are manifold and intricate; each can have a multitude of causes, but always it indicates where is the weak part of the being" [2]

Sri Aurobindo says,

"Disease is needlessly prolonged and ends in death oftener than is inevitable, because the mind of the patient supports and dwells upon the disease of the body", and I add, "An illness of the body is always the outer expression and translation of a disorder, a disharmony in the inner being; unless this inner disorder is healed, the outer cure cannot be total and permanent."[3]

Look for the inner causes of disharmony much more than the outer ones. It is the inside which governs the outside.[3]

The Mother: The ailments of the body are not always the outcome of a mental disorder, disharmony or wrong movement. The source of the malady may be something in the mind, it may be something in the vital; or it may be something more or less purely physical, as in illnesses that arise from an outer contact. Again, the disturbance may be the result of a movement in the Yoga, and in that case too there is a multitude of possible causes.[4]

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The Mother: Mental fear—all who have a little control over themselves or any human dignity can eliminate it; vital fear is more subtle and asks for a greater control; as for physical fear, a veritable yoga is necessary to overcome it, for the cells of the body are afraid of everything that is unpleasant, painful, and as soon as there is any unease, even if it is insignificant, the cells of the body become anxious, they don't like to be uncomfortable. And then, to overcome that, the control of a conscious will is necessary. It is usually this kind of fear that opens the door to illnesses. And I am not speaking of the first

two types of fear which, as I said, any human being who wants to be human in the noblest sense of the word, must overcome, for that is cowardice. But physical fear is more difficult to overcome; without it even the most violent attacks could be repelled. If one has a minimum of control over the body, one can lessen its effects, but that is not immunity. It is this kind of trembling of material, physical fear in the cells of the body which aggravates all illnesses.[5]

Subconscient and Illness

Sri Aurobindo: The subconscient is not the whole foundation of our nature; it is only the lower basis of the Ignorance and governs mostly the lower vital and physical exterior consciousness and these again affect the higher parts of the nature. While it is necessary to see what it is and how it acts, one must not be too preoccupied with this dark side or this apparent aspect of the instrumental being. One should rather regard it as something not oneself, a mask of false nature imposed on the true being by the Ignorance. The true being is the inner with all its vast possibilities of reaching and expressing the Divine and especially the inmost, the soul, the psychic Purusha which is always in its essence pure, divine, turned to all that is good and true and beautiful. The exterior being has to be taken hold of by the inner being and turned into an instrument no longer of the upsurgings of the ignorant subconscient Nature, but of the Divine. It is by remembering always that and opening the nature upwards that the Divine Consciousness can be reached and descend from above into the whole inner and outer existence, mental, vital, physical, the subconscient, the subliminal, all that we overtly or secretly are. This should be the main preoccupation. To dwell solely on the subconscient and the aspect of imperfection creates depression and should be avoided. One has to keep a right balance and stress on the positive side most, recognising the other but only to reject and change it. [6]

Sri Aurobindo: It is the habit in the Subconscient material that feels an artificial need created by the past and does not care whether it is harmful or disturbing to the nerves or not. That is the nature of all intoxicants(wine, tobacco, cocaine etc.), people go on even after the deleterious effects have shown themselves and even after all real pleasure in it ceased because of this artificial need (it is not real). The will has to get hold of this Subconscient persistence and dissolve it. [7]

Sri Aurobindo: The subconscient is the support of habitual action - it can support good habits as well as bad.[8]

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Physical consciousness and illness

Sri Aurobindo: The suggestions that create illness or unhealthy conditions of the physical being come usually through the subconscient—for a great part of the physical being, the most material part, is subconscient, i.e. to say, it has an obscure consciousness of its own but so obscure and shut up in itself that the mind does not know its movements or what is going on there. But all the same it is a consciousness and can receive suggestions from Forces outside, just as the mind and vital do. If it were not so, there would not be any possibility of opening it to the Force and the Force curing it; for without this consciousness in it it would not be able to respond. In Europe and America there are many

people now who recognise this fact and treat their illnesses by making conscious mental suggestions to the body which counteract the obscure secret suggestions of illness in the subconscient. There was a famous Doctor in France who cured thousands of people by making them persistently put such counter-suggestions upon the body. That proves that illness has not a purely material cause, but is due to a disturbance of the secret consciousness in the body.[9]

Sri Aurobindo: When a force is thrown on you or a vibration of illness, it carries to the body this suggestion. A wave comes in the body —with a certain vibration in it, the body remembers "cold" or feels the vibrations of a cold and begins to cough or sneeze or to feel chill—the suggestion comes to the mind in the form, "I am weak, I don't feel well, I am catching a cold." [10]

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Sri Aurobindo: The body consciousness responds to the suggestion or the medicine and one gets cured for the time being or it doesn't respond and there is no cure. How is it that the same medicine for the same illness succeeds with one man and not with another or succeeds at one time with a man and afterwards doesn't succeed at all? [11]

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Vital Consciousness and Illness

Sri Aurobindo: It is true that what one fears has the tendency to come until one is able to look it in the face and overcome one's shrinking.[12]

The Mother: And then, you know, most people when they get bored, instead of trying to rise a step higher, descend a step lower, they become still worse than what they were, and they do all the stupid things that others do, go in for all the vulgarities, all the meanness's, everything, in order to amuse themselves. They get intoxicated, take poison, ruin their health, ruin their brain, they utter crudities. They do all that because they are bored... When people get a big blow in their life, some misfortune (what men call "misfortune", there are people who do have misfortunes), the first thing they try to do is to forget it—as though one did not forget quickly enough! And to forget, they do anything whatsoever. When there is something painful, they want to distract themselves—what they call distraction, that is, doing stupid things, that is to say, going down in their consciousness, going down a little instead of rising up....[13]

The Mother: ....All your troubles, depression, discouragement, disgust, fury, all, all come from the vital. It is that which turns love into hate, it is that which induces the spirit of vengeance, rancour, bad will, the urge to destroy and to harm. It is that which discourages you when things are difficult and not to its liking. And it has an extraordinary capacity for going on strike! When it is not satisfied, it hides in a corner and does not budge. And then you have no more energy, no more strength, you have no courage left. Your will is like... like a withering plant. All resentment, disgust, fury, all despair, grief, anger—all that comes from this gentleman. For it is energy in action.[14]

Mental Consciousness and Illness

The Mother: Suppose that you want to make a progress regarding attachment to food, for example; well, almost constantly there will come to you thoughts particularly interested in food,

about what should be taken, what should not be taken, how it should be taken, how it should not be taken; and these ideas will come to you, they will seem quite natural to you. And the more you say within yourself, "Oh! how I would like to be free from all that, what a hindrance to my progress are all these preoccupations", the more will they come, quietly, until the progress is truly made within and you have risen to a level of consciousness where you can see all these things from above and put them in their place—which is not a very big place in the universe! And so on, for all things. Therefore, your occupations and affinities are going to put you almost contradictorily into contact not only with ideas having an affinity and relation with your way of being, but with the opposite. And if you don't take care from the beginning to keep an attitude of discernment, you will be turned into a mental battlefield.[15]

The Mother: If you know how to rise to a higher level, simply into a region of the speculative mind which is not quite the ordinary physical mind, you can see all this play and all this struggle, all this conflict, all these contradictions as a curiosity which does not touch or affect you. If you rise a step higher still and see the goal towards which you want to go, you will gradually come to discern between ideas favourable to your progress which you will keep, and ideas opposed to this progress which harm and impair it; and from above you will have the power to set them aside, calmly, without being otherwise affected by them. But if you remain there, at that level in the midst of that confusion and conflict, well, you risk getting a headache! ... But one must never remain on the same plane, it is a plane which is no good either for physical or moral health.[16]

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The Mother: With man there has begun this perpetual worrying about what is going to happen, and this worry is the principal, if not the sole cause of his torment. With this objectivising consciousness there has begun anxiety, painful imaginations, worry, torment, anticipation of future catastrophes, with the result that most men—and not the least conscious, the most conscious—live in perpetual torment. Man is too conscious to be indifferent, he is not conscious enough to know what will happen. Truly it could be said without fear of making a mistake that of all earth's creatures he is the most miserable. The human being is used to be like that because it is an atavistic state which he has inherited from his ancestors, but it is truly a miserable condition.[17]

The Mother: How can a problem be solved when one doesn't have the necessary knowledge? And the unfortunate thing is that man believes that he has to resolve all the problems of his life, and he does not have the knowledge needed to do it. That is the source, the origin of all his troubles—that perpetual question, "What should I do?..." which is followed by another one still more acute, "What is going to happen?" and at the same time,more or less, the inability to answer.[18]

The Mother: It is with the contradictions and doubts of the mind that one spoils everything, with this kind of notion which comes when one is in difficulties: "Oh, it is impossible! I shall never manage it. And if it is going to be aggravated, if this condition I am in, which I don't want, is going to grow still worse, if I continue to slide down farther and farther, if, if, if, if..." like that, and one builds a wall between oneself and the force one wants to receive.[19]

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HOMEOPATHY, ALLOPATHY, YOGA AND SAMADHI

(During a conversation between Sri Aurobindo and his disciples)

SRI AUROBINDO : Homeopathy is nearer to Yoga and Allopathy is more mechanical. Homeopathy deals with the physical personality, the symptoms put together making up the physical personality, while allopathy goes by diagnosis which does not consider the personality. The action of homeopathy is more subtle and dynamic.

DISCIPLE : Some Yogis go into Samadhi as a release from bodily pain and suffering. But there are those who don't do that and bear the pain.

SRI AUROBINDO : Yes. Yogis can go into Samadhi and put an end to the sensations. But it is not necessary to have a disease in order to go into Samadhi. Besides, when one decides to bear it, it seems to me a way of accepting the disease. But I don't understand the utility of going into Samadhi to escape from pain.

(On Medicine, EVENING TALKS WITH SRI AUROBINDO : A. B. Purani : 2018 : p.200)

20 December 1938

Unconsciousness in Genesis of Ill Health and Disease

Dr. Yogesh Mohan

The human body is a remarkable instrument. Every cell has its own intelligence and participates in maintaining the harmony of the whole. The body knows how to adapt, repair, protect and renew itself. Much of this happens without the intervention of our conscious mind. There is, within the physical being, a natural intelligence that constantly works towards balance and harmony.

Yet we are not fully conscious beings. A large part of our nature remains unconscious. Our thoughts, desires, fears, anxieties and emotional reactions constantly enter into the physical consciousness and influence the functioning of the body. The ordinary mind, instead of allowing the body to follow its natural intelligence, often interferes with it.

The mind is particularly powerful in creating fear. We fear illness, pain, old age and death. We imagine what may happen, repeatedly think about possible dangers and unconsciously live in anticipation of suffering. Such thoughts are not merely abstract movements of the mind. They create corresponding vibrations in the vital and physical consciousness. The cells themselves can begin to respond to these vibrations.

The Mother has repeatedly pointed out the importance of fear in the physical consciousness. Fear can disturb the natural functioning of the cells and weaken their harmony. When fear becomes habitual, the body begins to live in a state of tension and insecurity. Instead of responding naturally to circumstances, it reacts defensively. The quiet intelligence of the body is then increasingly replaced by the nervous and restless reactions of the ordinary mind and vital.

Sri Aurobindo observes: "Disease is needlessly prolonged… because the mind of the patient supports and dwells upon the disease of his body." The Mother's observation goes still deeper: "an illness of the body is always the outer expression and translation of a disorder, a disharmony in the inner being." These statements do not mean that every disease is caused by a wrong thought or that physical causes are unimportant. Rather, they point to the intimate relationship between consciousness and the physical body.

Desire also plays an important role. The ordinary vital mind is constantly seeking satisfaction, resisting what it does not like and demanding what it wants. This creates movements of tension, attraction and repulsion. When these movements become excessive, they disturb the equilibrium of the physical nature. The body is then no longer guided primarily by its own quiet intelligence, but becomes subject to the fluctuations of the mind and vital.

The deeper problem, therefore, is not simply disease but unconsciousness. Where there is unconsciousness, reactions happen automatically. A thought creates a fear; fear creates tension; tension affects the body; and the disturbed body further strengthens the thought and fear. A cycle is created.

The solution lies in increasing consciousness. Sri Aurobindo and the Mother point towards a transformation in which the physical being itself becomes conscious and receptive to a higher Force. The Mother speaks of bringing "the light of equilibrium, the light of peace, quietude and balance" into the cells.

As consciousness grows, the ordinary mental and vital control over the body can gradually be replaced by a deeper and higher consciousness. Fear can give way to trust, agitation to peace, and unconscious reaction to conscious response. The cells can progressively become receptive to a higher harmony.

Health, in this deeper sense, is not merely the absence of disease. It is an expression of harmony in the being. The movement towards health and transformation is therefore also a movement from unconsciousness towards consciousness—from the rule of fear and desire towards the quiet guidance of a higher consciousness.

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ILLNESS AND HEALTH

Your illness was not a mere accident.

You did not give sufficient attention to the inner change, a psychological change with a broadening of your consciousness.

You were satisfied with yourself.

You were shut up in your small shell and did not try to make any progress.

You said sadhana did not interest you and you thought that the little work that you were doing was quite sufficient for you and nothing more was needed.

It was this attitude that took you out of my protection.

I gave you a warning, but you challenged Nature by saying that nothing could touch you.

All these things combined and brought your mental difficulties, weakness and illness.

You must change. You must try to fulfil the conditions of Mahasaraswati, make your work more and more perfect, make progress and try for a psychological transformation.

Less than this will not help you.

This is the minimum and if you try sincerely, my help will always be there.

These days my work is going on at such a speed that unless you make a serious effort, you will be left far behind and not be able to remain with me. But if you do as I say, everything will be all right.

Integral Healing **- The Mother**

Towards the future

Dr. Alok Pandey

"Medicine is necessary for our bodies in disease only because our bodies have learned the art of not getting well without medicines. Even so, one sees often that the moment Nature chooses for recovery is that in which the life is abandoned as hopeless by the doctors." Distrust of the curative power within us was our physical fall from Paradise. Medical Science and a bad heredity are the two angels of God who stand at the gates to forbid our return and re-entry.

Medical Science to the human body is like a great Power which enfeebles a smaller State by its protection or like a benevolent robber who knocks his victim flat and riddles him with wounds in order that he may devote his life to healing and serving the shattered body.

Drugs often cure the body when they do not merely trouble or poison it, but only if their physical attack on the disease is supported by the force of the spirit; if that force can be made to work freely, drugs are superfluous.

-Sri Aurobindo

Sri Aurobindo gives us a striking description of the nightmare in which we live, in order to awaken within us an unwearying aspiration towards the salvation that comes from the true consciousness and an exclusive faith in the Divine's omnipotence.

The Mother

Introduction

These far-seeing words set the tone for the direction in which we, as a medical fraternity, must move. For the last couple of centuries mankind has entered deep inside the processes of the material body. But if we take the body as a car what we do not yet know are the energies that drive it and nothing about the driver himself, if any. For the strictly reductionist Science, there is no fuel other than the material food and air and, no driver save perhaps the material mind.

A precarious balance

Health, like everything else, is a state of dynamic equilibrium between the various physical, mental, emotional, vital, spiritual forces that impact us constantly and the various inner mechanisms that have evolved and are still evolving to create an equilibrium. This is a constantly ongoing process through which Nature maintains a precarious balance and a reasonably harmonious functioning that we call as health.

For what else is health but a state of inner harmony of the various processes within us and a harmony with the ever changing world outside. When the change is slow and predictable then the normal processes of the body are able to take care easily due to the force of past habit and experience. But adaptation and the adjustment become difficult either if the change is rapid or the normal processes slow down as in ageing or they become deficient due to certain afflictions.

The crux therefore is to find a way to augment the working of the bodily processes so that they work in a swift, smooth and harmonious functioning. At the same time one should avoid sudden extremes and excesses that challenge the human system by flooding it suddenly.

A good and balanced routine including diet, work, sleep and simple exercises prepare a good background for the smooth functioning

of the body. But since the body is primarily a machine driven by the vital which is the energy feeder, and the mind that drives the various processes as the software uses the hardware, it is important to understand the role of these elements in the health and healing processes. Its perfect harmony can be seen in the animal and the plant kingdom. But human beings somehow seem to have lost this natural balance.

Further possibilities

It is here that we must ponder as to what went wrong in the evolutionary process and what can be done to reclaim it. But to do this we need to dive deeper into the fundamental unit of life called the cell. It is nearly 400 years since mankind discovered the human cell opening the doors to a deeper understanding of the human body and how this basic unit of life functions and operates. But we know little beyond the biological aspects of the cell. We know the processes but not what really drives these processes. We know, to some extent the genetic switches but we do not know what switches them on or off, one way or the other. We know the effect of various physical substances and chemicals but we do not know the effect of thoughts and feelings, or of will and of passions, above all of the higher spiritual forces upon the cell.

If the universe is not just a material phenomenon but the end result of a number of events taking place at various levels in a multilayered creation, if what the senses see and study is simply an outer facade, a construct with a certain practical utility and not the ultimate reality, if the ultimate Reality is at its bottom spiritual and all physical, biological phenomenon are like the outer shell of a huge and complex building called the creation then it is legitimate to try to understand what is the impact of deeper, subtler forces and energies upon the cell.

But how are we to study these things since Science has limited itself to its self-chosen material field or the phenomenal reality alone. We may say that well even if there are subtler energies and forces (and even beings) how are we to confirm their existence, let alone study their impact. It is here that the yogis found an answer. They said that yes ordinarily our rational mind and the senses impose a certain limit. But there exists within man the possibility and the urge to exceed these limits. The microscope and the telescope are one means, outer instruments to go past these limits. The development, cultivation, evolution of subtler senses and the intuitive mind that sees in flashes of a truth light are the other means. These two approaches differentiate the approach, discoveries, methodology and treatment in the Western and Eastern medicine.

The former depends upon reason and the evidence of the gross senses. The latter depends upon intuition and the cultivation of the senses. Unfortunately there has been rather a lop-sided development along the lines of the Western approach, not necessarily because it is better but because it has been pushed aggressively by commercial interests and also meets the demand of instant success, - an equivalent of instant gratification, in the human mind.

The four fuels and the driver

This instant success is not necessarily because a great truth has been found or some ultimate formula of life discovered. It is so because entering into material realm we have discovered the end processes. It is somewhat like stopping a car instantly by applying the brakes suddenly. But the constant or often sudden application of brakes wears them off and takes a toll on the vehicle as well as on the driver who never quite learns to drive in a smooth manner.

This is equally true of our life. The vehicle is the body while the driver is the mind. A tamasic driver drives the car slowly but carelessly, unconsciously, almost blindly. He does not even know where is the car meant to be taken since the owner, the soul is asleep. A rajasic driver is reckless. He drives rashly, unthinkingly using the accelerator and the brake much more often. The result is a rapid wearing down of the systems and the engine. He sees life as a race which takes a toll upon the car and the driver. The Sattwic driver strikes a harmonious balance, drives the car smoothly and sets up the goals as per the rulebook of life that he has read. But the highest way is what is described in the Gita. It is to let the Divine be the charioteer, the driver and chose the goal.

In other words we are driven by three kinds of fuels or energies. But beyond these three types of fuels, there is a fourth one, the higher spiritual fuel with the Divine as the driver. To surrender the chariot or the car of life in His hands and be just the needed instrument is indeed the simplest and the best way to live.

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Everyone who is turned to the Mother is doing my Yoga. It is a great mistake to suppose that one can "do" the Purna Yoga– i.e. carry out and fulfil all the sides of the Yoga by one's own effort. No human being can do that. What one has to do is to put oneself in the Mother's hands and open oneself to her by service, by Bhakti, by aspiration; then the Mother by her light and force works in him so that the Sadhana is done.

(25/130) ***– Sri Aurobindo***

The Genesis of Pain in the matrix of Consciousness

Dr. Soumitra Basu

Pain is the first disharmony felt by the body, the first anguish felt by the mind and the first recoil from the Ananda of existence. It comes in myriad ways, warns us of dangers that attack us, makes us aware of our internal malfunctioning and instils in us the seed of caution. But it also motivates us to be free from its clutches and paves the way from disharmony to harmony.

From the perspective of the evolution of consciousness, pain is an ancient phenomenon. It can be traced to the time when Life-Energy or the Vital Force impinged on inert Matter. At first Matter evolved from the Inconscience but this was a consciousness that was inert, non-responsive and inanimate. Matter of course was divided into forms for the hallmark of the material consciousness was *"accomplished divisibility"*. (1) Yet without being energized, Matter would always remain in its quiescent status.

The first friction

At the next stage of evolution of consciousness, the Vital Force or Life-Energy impinged on Matter to animate it. It must have initially resulted in a tremendously violent reaction. The inertia of the original physical substrate that was the first to emerge from the Inconscience was a mighty slumber and carried the stain and stigma of the Inconscience. Moving it was not an easy task. There must have been a violent friction when the Life-Energy infiltrated the inert matrix of material consciousness to produce spectacular changes. That friction resulted in a riot of variety, colours, odors; it catapulted in a diversity of creative out flowerings that spanned from the amazing variety in nature to the myriad potentialities of the manifestation. That friction produced a change of gigantic proportions which is still out of our ordinary bounds to understand. That was the first friction in the matrix of evolutionary consciousness.

The memory of the friction in diseases

However that friction which resulted in the manifestation of the vital-physical plane of consciousness is still carried in our being as a terrestrial evolutionary memory. It is there, dormant and submerged in our bodily systems, in our organs, in our cells. It can surge up any time much like a surging up of past traumatic anxieties happen in Post-Traumatic Stress Disorder! (2) That is the memory of the original pain which we carry in the matrix of consciousness.

It is not only pain but the first mismatch between Life-Energy and the material consciousness that is also carried in the depths of our being. For it took time, albeit ages for the Life-Energy to be smoothly harmonized with the physical matrix. At first there was a lingering quiver when the momentum of vital energy forced the physical consciousness to get adjusted with it. That ancient quiver still persists in the vital-physical resulting in symptoms like nervous irritability and diseases like irritable bowel syndrome.

The dominance of the Vital

When Life-Energy had to animate the inert, lifeless, featureless matrix of Matter, it had to dominate over Matter. That dominance was

necessary to arouse Matter from its dull repose and slumber so as to produce a world of variegated multiplicities that spanned from the exuberance of flowers to the exaggeration of human emotions. And this led not only to wondrous capacities that allowed the human to aspire to the great heights, it also led to a distortion of the trend towards domination. Thus if human nature was endowed with love, beauty, generosity and compassion, it was also susceptible to desire, hatred, jealousy and aggression.

The resurgence of the hidden memory of the primal friction coupled with the deviation of the vital into the realm of emotional disharmony perhaps sowed the seeds of a new pattern of diseases called psychosomatic disorders where behind the somatic symptoms lurks the psychological factors.

The Vital-physical

No wonder Sri Aurobindo described that the vital-physical is responsible for many diseases of the body and is especially involved in the disorder of the nerves.

"The nervous part of the being is a portion of the vital –it is the vital-physical, the life-force closely enmeshed in the reactions, desires, needs, sensations of the body"(3)

"The vital-physical governs all the small daily reactions to outward things – reactions of the nerves and the body consciousness and the reflex emotions and sensations; it motives much of the ordinary actions of man and joins with the lower parts of the vital proper in producing lust, jealousy, anger, violence etc. In its lowest parts (vital-material) it is the agent of pain, physical illness etc."(4)

The Ananda factor

The friction produced by the leap of the Life-Energy on the bosom of inert Matter was not a stand-alone phenomenon. It was sanctioned by the Supreme Reality which decreed the manifestation. The Supreme Reality is Sachchidananda, a triune principle in three poises. There is the Existential poise of Sat that is represented as the essence of everything as the Self. There is the dynamic poise of Chit or Chi-Shakti which commissions the multiverses. And there is the value aspect in the poise of Ananda or Bliss which motivates the manifestation intrinsically.

This Ananda or Bliss-principle was there that motivated the Life-Energy to jump into the bosom of Matter, to awaken it to participate in the orchestra of creation. So the friction which vibrates to pain can also in a different denouement, in a different octave, vibrate to the sensation of pleasure. That is how yogis could turn pain into pleasure. In a way that is also the reason that even without the knowledge of yoga, medical science aims to alleviate pain so that pleasure can be achieved.

As Sri Aurobindo poignantly describes, "There is something in the being that enjoys illness, it is possible even to turn the pains of illness like any other pain into a form of pleasure; for pain and pleasure are both of them degradations of an original Ananda and can be reduced into the terms of each other or else sublimated into their original principle of Ananda."(5)

Modulating the vital-physical

The first task for a harmonious life must be to invoke the Force and Light into the vital-physical so that it can be properly modulated. "The peace and force must be called down into this vital-physical (nervous part) and the whole body until you feel the atmosphere and force pervading you and in you always in all the body and not only upon or around you. If you still find a difficulty, it is because of the past habit of reaction in the nervous being and a certain weakness there; but persevere, do not consent

to the invasion of the old forces. The habit will lessen and disappear and the true Force occupying the body will remove the weakness," (6)

At an optimal point in the journey of personal growth, the vital-physical can be offered for transformation. That will usher the reign of Ananda and the flowering of Superconscient values in the matrix of terrestrial consciousness. It would simultaneously usher a new level of harmony needed for perfect health.

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[Courtesy: *Namah*,Vol.29, 4]

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Never forget that the greater the difficulties, the greater also our possibilities. It is only those who have great capacities and a big future who meet with great obstacles and hardships.

The Lord's Love is always with you.

(WR/150) ***– The Mother***

Disequillibrium of the being and ill health

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The World Health Organization defined health in 1946 as "a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity." For many years the World Health Organization (WHO) has grappled with its definition of health, recognizing both its utopian perspective and its limitations. Repeatedly, WHO member states have called for a more realistic and holistic definition, and in particular for the inclusion of the spiritual dimension. While the formal definition has remained unchanged, the WHO acknowledges spiritual well-being in broader frameworks.

In view of the emerging lifestyle & environmental issues affecting human health, the so-called utopian perspective needs to be brought into sharper focus. At no point of time the need was greater than today. This brief review looks at the concept of harmony and equillibrium which is considered to be crucial for the holistic human health.

Disequillibrium of the being

Illness is only a disequillibrium...so says The Mother…In a state of disequillibrium, the microbes, which otherwise do not trouble you, find an opportunity to cause disease. Hence the root cause is disequilibrium.

Everything in this world correlates with equillibrium or disequillibrium, in other words harmony or disorder. Unreservedly surrendering to Divine will is the way to attain harmony or equillibrium or peace. This creates vibrations of harmony and equillibrium. Lack of it invites intrusion of disorder which is felt everywhere. Vibrations of harmony can correct a 'weak spot' in the body and stop the disorder.

If all the organs are in harmony with one another you are in perfect health. You should have, what The Mother says, triple equillibrium – mental, vital and physical. In this state, the immunity functions better to confer you with protection.

From the point of view of the body there are two ***types*** of disequillibrium – functional and organic.

· ***Functional disequillibrium*** – where the organs are in good condition but there is lack of proper functioning or balance in the functioning

· ***Organic*** – where the organ is disordered or ill

Generally functional imbalance is cured more easily and quickly.

Now we come to the ***causes*** of imbalance. They are either internal or external.

· ***Internal*** – Here the disorder may be with one of the organs or internal systems. Normally all the organs work in harmony and that does not depend on our conscious thought. Things go wrong when there is a disorder or disharmony. This may be physical, vital or mental. This leads to various symptoms.

· ***External*** – Internally you may be in a state of harmony but externally surrounded by disequillibrium. You emit your own vibrations in turn receive vibrations of others. These vibrations may be mental, vital or physical. They may be due to ignorance, beliefs and attitudes.

And then there are ***microbes***. They are the forces

of disintegration. They are always around you, within you, for years together but not hurting you. They are material expression of something living in a subtle physical world. They capitalize on disharmony and hurt you.

The most important question then is, ***how to restore the equillibrium***, how to cure. If you have will power, the resolution to recover, then you will recover. The first thing to do is calm oneself, bring peace and relax. We may recall how panic created havoc during the Covid-19 pandemic. So remaining calm and quiet is the most important first step. Very often we take pleasure in being ill. Negative feelings like anger, hatred & despair create disharmony. They invite illness.

Concept of health in Ayurved

समदोषः समाग्निश्च समधातुमलक्रिया:।

प्रसन्नात्मेन्द्रियमिा: स्वस्थ इत्यक्रिधीयते ?

The **Five Pillars** of Health in Ayurveda are–

- **Samadosha** (Balanced Doshas): Your body's three fundamental energies—**Vata** (movement), **Pitta** (metabolism), and **Kapha** (structure)—must be in a state of dynamic ***equilibrium***.
- **Samagni** (Balanced Digestive Fire): Agni, or your inner metabolic fire, must function properly to digest food, absorb nutrients, and convert them into energy without creating toxins
- **Samadhatu** (Balanced Body Tissues): All seven structural tissues of the body—ranging from plasma and blood to muscle, fat, bone, and reproductive fluid—must be properly nourished and stable.
- **Malakriya** (Proper Waste Elimination): The physiological systems must efficiently eliminate bodily waste, sweat, urine, and stool to prevent the buildup of toxins.
- **Prasanna Atma-Indriya-Manah** (Joyful Spirit, Senses, and Mind): True health requires deep mental clarity, emotional stability, and a sense of inner peace within the soul and the senses.

In Ayurveda, true health (**Swasthya**) is defined in the ***Sushruta Samhita*** as a complete state of physical, mental, and spiritual ***equilibrium***. The famous shloka cited above, states that a person is healthy when their bodily humors, digestive fire, tissues, and waste products are balanced, and their mind, senses, and soul are filled with inner bliss.

Panchkosh: The Five Layers of Human Existence & Holistic Well being

Panchkosh Theory, originating from the ***Taittiriya Upanishad***, explains human existence through ***five concentric layers or "sheaths"***. True well-being requires ***balance and harmony across all five dimensions—physical, energetic, mental, intellectual, and spiritual***—rather than focusing only on the physical body or material success.

The Five Layers (Panchkosh) are –

- **Annamaya Kosha (Physical Sheath):** The gross physical body sustained by food. Well-being here depends on proper nutrition, exercise, and rest.
- **Pranamaya Kosha (Energy Sheath):** The vital life force (*Prana*) that runs through breath and metabolic functions. Balanced breathing and Pranayama regulate this layer.
- **Manomaya Kosha (Mental Sheath):** The lower mind, emotions, and sensory processing. Harmony here means managing desires, fears, and daily reactions.
- **Vijnanamaya Kosha (Intellectual Sheath):** The higher intellect, conscience, and wisdom. It guides moral choices and discriminates right from wrong.
- **Anandamaya Kosha (Bliss Sheath):** The innermost core of pure joy, peace, and spiritual realization independent of external triggers.

Perspective from the Modern Medicine

Walter Cannon used the term ***Homeostasis*** in 1929 to describe the maintenance of nearly constant conditions in the internal environment of the human body (***milieu interior***). All the organs & tissues function to maintain this nearly constant condition of the internal environment. There exist powerful control mechanisms in the body which integrate actions of cells, tissues and organs to maintain the homeostasis.

Various body functions are regulated by the nervous system, including the autonomic nervous system and hormones. The motor, sensory and central nervous system regulates muscular and secretory functions; the autonomic nervous system regulates many functions of the internal organs, and the hormonal system regulates many metabolic functions. They function in an integrated manner. They are controlled by various feedback mechanisms, mainly the negative feedback.

Moreover, there are microorganisms living in the human body that do not always cause disease. They actually outnumber the human cells. But importantly they play a role in digestion and many other functions. Recent studies show that trillions of microbes living in your intestines produce vital chemicals, such as serotonin and short-chain fatty acids, which shape mood, immunity, and brain function.

Thus, human body is a well-orchestrated unit of about 35 to 40 trillion cells, which lives with perfectly harmonized systems. Each cell benefits from homeostasis and in turn each cell contributes its share towards maintenance of homeostasis. ***It is only when this harmonized state, the homeostasis, is disrupted that the disease occurs.***

A word about music

Music is also helpful because sound and rhythm trigger widespread brain activity, changing brain chemistry and body functions. It uses active playing or passive listening & help people heal from stress, illness, or injury. Music helps restore physical, emotional, and neurological equilibrium by lowering stress hormones, stabilizing heart rate, and rebalancing brain activity. Music is perhaps the best medium for meditation and concentration. Indian classical music attaches great importance to serenity and a thoughtful state of mind as its primary goal. As such, it helps in balancing the left and right hemispheres of the brain, which are assigned the functions of analysis and intuition respectively by the neurologists.

Moreover, ragas function as natural regulators of the mind and body. The alignment of ragas with specific times of day mirrors the body's circadian rhythms, creating synchronization between environment and physiology. For example, Todi's uplifting nature suits mornings when the body requires energy, while Bihag's soothing quality aligns with evening relaxation. Ragas bridge the domains of spirituality, psychology, and medicine, uniquely positioning them as holistic therapeutic tools.

Conclusion

The Mother has said, "An illness of the body is always the outer expression of and translation of a disorder, a disharmony in the inner being; unless this inner disorder is healed, the outer cure cannot be total and permanent." Unless we correct this disharmony, healing will not be achieved, cure may be.

It was William Osler who pointed out the limitations of modern medicine in 19th Century by saying "Cure sometimes, treat often, comfort always." Even today this saying is very relevant. Even though modern medicine talks about homeostasis, it still looks at the tangibles, physical and chemical processes, and not beyond. It is wisdom contained in our traditional knowledge (Ayurveda and Yoga) which gives us the concept of holistic health. This is advanced

further in recent times by Sri Aurobindo and The Mother. Conventional health care does not fully recognize the body's innate ability to self-repair and an appreciation for how we can control these self-healing mechanisms with the power of our own consciousness.

Mankind desperately needs to restore sanity at this crucial juncture in the history and turn to spiritual evolution on the path of ***Integral Yoga***.

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—there is a special personal tie between you and me, between all who have turned to the teaching of Sri Aurobindo and myself,—and, it is well understood, distance does not count here, you may be in France, you may be at the other end of the world or in Pondicherry, this tie is always true and living.

—The Mother

Understanding, Preventing and Detecting Liver Disease Early

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The liver is one of the most important organs in the human body, performing hundreds of functions that are essential for life. It helps digest and metabolise nutrients, regulates blood sugar and cholesterol, stores vitamins and minerals, produces important proteins and clotting factors, detoxifies harmful substances, and plays a central role in immunity. Despite its remarkable capacity to regenerate, the liver can be affected by a wide range of diseases, many of which remain silent until significant damage has occurred.

Liver disease is no longer a problem confined to people who consume alcohol. Changes in lifestyle, increasing obesity, diabetes, viral infections and the widespread use of medications and supplements have made liver diseases increasingly common in the general population. Fortunately, many liver diseases are preventable, and early diagnosis can significantly alter their course.

Fatty Liver Disease: The Most Common Liver Problem

Fatty liver disease has emerged as one of the most common liver disorders worldwide. It occurs when excess fat accumulates within liver cells. In people who consume little or no alcohol, this condition is commonly associated with obesity, diabetes, insulin resistance, high cholesterol and sedentary lifestyle.

The terminology has recently evolved, with metabolic dysfunction-associated steatotic liver disease (MASLD) being used for fatty liver associated with cardiometabolic risk factors.

A major challenge is that fatty liver is often silent. A person may have no symptoms despite significant liver fat accumulation or even advanced fibrosis. Some individuals may experience fatigue or vague discomfort in the right upper abdomen, but symptoms are neither reliable nor specific.

The important message is that fatty liver is not always harmless. A proportion of patients can develop inflammation, fibrosis, cirrhosis and, in some cases, liver cancer. The presence of diabetes, obesity and other metabolic risk factors increases the likelihood of progressive disease.

Weight reduction, regular physical activity, healthy eating, good control of diabetes and blood pressure, and management of cholesterol are central to treatment. Even modest, sustained weight loss can improve liver health.

Alcohol-Related Liver Disease

Alcohol remains an important cause of liver disease. Excessive and prolonged alcohol consumption can produce a spectrum ranging from simple fatty liver to alcoholic hepatitis, fibrosis and cirrhosis.

The amount of alcohol that causes liver injury varies between individuals. Factors such as sex, genetics, obesity, nutritional status and coexisting liver disease can influence susceptibility.

The disease may remain asymptomatic for years. When advanced disease develops, patients may develop jaundice, abdominal swelling, gastrointestinal bleeding, confusion, weight loss or weakness.

The most effective intervention is

abstinence from alcohol. Early identification of harmful alcohol use and timely medical support can prevent progression and may allow the liver to recover substantially.

Viral Hepatitis

Viral hepatitis remains an important public-health problem, particularly in developing countries.

Hepatitis B

Hepatitis B virus can cause both acute and chronic infection. Chronic hepatitis B may remain completely asymptomatic for many years while silently causing liver inflammation and fibrosis. Over time, it can lead to cirrhosis and hepatocellular carcinoma.

The good news is that hepatitis B is preventable through vaccination, and effective antiviral medicines are available for patients who require treatment. Individuals at risk should undergo appropriate testing, and family members of infected individuals should be screened and vaccinated when indicated.

Hepatitis C

Hepatitis C is another important cause of chronic liver disease. Unlike hepatitis B, there is currently no widely used vaccine for hepatitis C, but modern oral direct-acting antiviral medicines can cure the infection in the vast majority of appropriately treated patients.

Because chronic hepatitis C can remain silent for decades, targeted screening and diagnosis are important. Patients with established liver disease should also be assessed for the degree of fibrosis and other complications.

Cirrhosis: The Final Common Pathway

Cirrhosis is not a single disease; rather, it represents advanced scarring and architectural distortion of the liver resulting from long-standing liver injury.

It can develop because of MASLD, alcohol-related liver disease, chronic hepatitis B or C, autoimmune liver diseases, cholestatic disorders and several inherited or metabolic conditions.

In compensated cirrhosis, patients may have few or no symptoms. Once complications develop, however, the condition becomes much more serious. These complications include:

- o Ascites and swelling of the abdomen
- o Gastrointestinal bleeding from varices
- o Hepatic encephalopathy
- o Jaundice
- o Kidney dysfunction
- o Increased susceptibility to infections
- o Liver cancer

Importantly, cirrhosis is not necessarily the end of the road. Treating the underlying cause, avoiding alcohol and unnecessary hepatotoxic drugs, maintaining good nutrition, and appropriate surveillance can substantially improve outcomes.

Autoimmune and Cholestatic Liver Diseases

Some liver diseases occur when the immune system mistakenly attacks the liver or bile ducts. These include autoimmune hepatitis, primary biliary cholangitis and primary sclerosing cholangitis.

They are less common than fatty liver or viral hepatitis but are important because they may progress silently if not recognised.

Symptoms can include fatigue, itching, jaundice or abnormal liver tests. Some patients are diagnosed incidentally when routine blood investigations show persistent abnormalities in liver enzymes.

Early specialist evaluation is important because several of these diseases have effective treatments that can slow or prevent disease progression.

Drug- and Supplement-Induced Liver Injury

The liver metabolises many medicines and therefore can occasionally be injured by drugs. Liver injury can result from prescription medicines, over-the-counter preparations, herbal products or dietary supplements.

A common misconception is that "natural" means "safe." Herbal and bodybuilding supplements, traditional medicines and unregulated products can sometimes contain substances capable of causing significant liver injury.

Anyone developing jaundice, dark urine, severe itching, nausea or unexplained liver-test abnormalities after starting a new medicine or supplement should seek medical advice. Patients should also avoid stopping essential prescription medicines without consulting their doctor.

Liver Cancer

Hepatocellular carcinoma (HCC) is the most common primary liver cancer. The risk is particularly high in people with cirrhosis, although HCC can occasionally occur in patients without established cirrhosis, particularly in certain chronic liver diseases.

The best strategy is prevention and surveillance. Controlling hepatitis B and C, avoiding excessive alcohol, reducing metabolic risk factors and maintaining a healthy weight can reduce the risk of liver disease and its complications.

People with cirrhosis require regular surveillance for liver cancer according to their treating physician's recommendations.

How Can We Protect Our Liver?

Liver health is closely connected with overall health. A few simple principles can substantially reduce the risk of liver disease:

1. Maintain a healthy weight.

Obesity, particularly excess abdominal fat, is strongly associated with metabolic liver disease.

2. Stay physically active.

Regular aerobic and resistance exercise improves metabolic health and benefits the liver, even when significant weight loss does not occur.

3. Eat a balanced diet.

Emphasise vegetables, fruits, whole grains, legumes, nuts and appropriate sources of protein while limiting highly processed foods, sugar-sweetened beverages and excessive saturated fat.

4. Avoid harmful alcohol consumption.

For individuals with established liver disease, complete abstinence may be recommended.

5. Get vaccinated against hepatitis B when indicated.

6. Know your medications.

Do not take unnecessary medicines, herbal preparations or supplements without professional advice.

7. Check for viral hepatitis when appropriate.

People with relevant risk factors, abnormal liver tests or a family history of viral hepatitis should discuss screening with their doctor.

8. Do not ignore abnormal liver tests.

A mildly elevated ALT or AST should not automatically be dismissed as insignificant. Persistent abnormalities deserve appropriate evaluation.

When Should You See a Doctor?

Liver disease frequently produces no symptoms in its early stages. Therefore, waiting for symptoms before checking the liver may result in delayed diagnosis.

Medical evaluation is particularly important in people with obesity, diabetes, excessive alcohol consumption, a family history of liver disease, previous viral hepatitis, unexplained abnormal liver tests, or long-term exposure to potentially hepatotoxic medications.

Symptoms such as yellowing of the eyes or skin, abdominal swelling, vomiting blood, black stools, persistent confusion, severe itching or unexplained weight loss require prompt medical attention.

The liver is a remarkably resilient organ, but it is not invincible. The most common liver diseases in the community-particularly metabolic fatty liver disease, alcohol-related liver disease and viral hepatitis-are often preventable, treatable or controllable when detected early.

The most important shift is from treating liver disease late to identifying liver disease early. A healthy weight, regular exercise, responsible alcohol use, vaccination, appropriate screening and sensible use of medicines can go a long way towards protecting the liver.

Your liver may not complain until it is significantly damaged. So don't wait for symptoms-know your risk, check your liver when appropriate, and protect it for life.

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With good wishes one can change many things, only it must bean extremely pure and unmixed goodwill. It is quite obviousthat a thought, a perfectly pure and true prayer, if it is sent forth into the world, does its work. But where is this perfectly pure and true thought when it passes into the human brain? There are degradations. If through an effort of inner consciousness and knowledge, you can truly overcome in yourself a desire, that is to say, dissolve and abolish it, and if through inner goodwill,through consciousness, light, knowledge, you are able to dissolvethe desire, you will be, first of all in yourself personally, a hundred times happier than if you had satisfied this desire, and then it will have a marvellous effect. It will have a repercussion in the world of which you have no idea. It will spread forth. Forthe vibrations you have created will continue to spread. These things grow larger like the snowball. The victory you win in your character, however small it be, is one which can be gained in the whole world.

(5/19) ***—The Mother***

Understanding the Causes of Cancer: A Scientific Perspectives

Dr. Nalini Kant Pati
Associate Professor

Cancer is one of the most significant health challenges one can face at any point of life. Understanding why cancer develops is important not only for prevention and early detection, but also for helping individuals and families cope with the uncertainty that often accompanies a cancer diagnosis.

Modern medicine has identified many biological, environmental and lifestyle factors that can increase the risk of cancer. At the same time, cancer raises deeper philosophical and spiritual questions: Why does illness occur? Why do some people who live very healthy lives develop cancer while others with significant risk factors do not? Is there a deeper meaning to suffering and disease? These questions cannot always be answered by science alone.

A balanced understanding therefore requires us to distinguish between **scientifically established causes and risk factors** and **philosophical or spiritual interpretations of illness**. As we know topic is very well addressed in the writings of The Mother and Sri Aurobindo. This article is a mere attempt to reflect my perspective for common person's knowledge and may not be even enough to explain all aspects of scientific basis of cancer occurrence let alone the philosophical aspects of cancer pathogenesis.

What Causes Cancer?

Cancer develops when cells acquire changes in their DNA that allow them to grow and divide uncontrollably. These changes may arise through several mechanisms.

1. Genetic and hereditary factors: Some people inherit gene changes that increase their susceptibility to particular cancers. Examples include inherited changes involving the BRCA1 and BRCA2 genes, which can increase the risk of breast and ovarian cancers.

However, inherited susceptibility does not mean that cancer is inevitable. It means that an individual's underlying risk may be higher than that of the general population.

2. Tobacco : Tobacco smoking is one of the most important preventable causes of cancer. Smoking is strongly associated with lung cancer and contributes to cancers of the mouth, throat, oesophagus, pancreas, bladder, kidney and several other organs. So undeniably chronic tobacco smoking or chewing causes cancer of many organ system and pretty much it can said does not spare a system.

The evidence is particularly compelling because tobacco contains numerous chemicals capable of damaging DNA. Avoiding tobacco and quitting smoking are among the most effective ways of reducing cancer risk.

3. Alcohol: Alcohol consumption is associated with an increased risk of several cancers, including cancers of the breast, bowel, mouth, throat, oesophagus and liver. Risk generally increases with the amount consumed.

Reducing alcohol consumption therefore represents another important preventive measure.

4. Diet, body weight and physical activity: Diet and lifestyle can influence cancer risk in several ways. Excess body weight, physical inactivity and

diets low in nutritious plant foods may contribute to the development of certain cancers.

A healthy dietary pattern, regular physical activity and maintaining a healthy body weight can reduce the risk of several cancers and also improve cardiovascular and general health.

5. Radiation and environmental exposures

Ultraviolet radiation from sunlight is a major cause of skin cancer. Excessive exposure to ultraviolet radiation can damage DNA in skin cells which would be trigger for cancer occurrence.

Other environmental and occupational exposures, including asbestos and certain industrial chemicals, can also contribute to cancer.

6. Infections

Certain infectious organisms can cause or contribute to cancer. Human papillomavirus (HPV), hepatitis B and C viruses, Helicobacter pylori and some other infectious agents are examples.

Vaccination, appropriate screening and treatment of infections can therefore play an important role in cancer prevention.

7. Age and the natural accumulation of cellular damage: Cancer becomes more common with increasing age. One reason is that cells accumulate genetic and epigenetic changes over many years. However as we know no age is a bar for development of cancer.

Even in people who follow exceptionally healthy lifestyles, the biological processes associated with ageing can eventually result in abnormal cellular changes.

Epigenetics: How environment and other external factors control gene activity without changing the DNA sequence. Example how identical twin even though they carry same DNA sequence they develop different physical and personality traits as per their exposures.

"Double-Hit Theory" in cancer: This refers to Knudson's two-hit hypothesis, which explains how loss of tumour-suppressor gene function can initiate cancer development. When discussing cancer epigenesis, however, the concept can be broadened because either "hit" may occur through a genetic mutation or an epigenetic alteration.

Knudson's two-hit hypothesis:

A tumour-suppressor gene normally acts like a cellular brake: it controls proliferation, repairs DNA, or promotes apoptosis when cells are seriously damaged. Because most tumour-suppressor genes have two copies (alleles), loss of one copy may not be sufficient to abolish their protective function.

Cancer-promoting loss typically requires two hits:

First hit: one allele becomes inactive. This may occur through an inherited mutation, an acquired somatic mutation, deletion, or sometimes epigenetic silencing / controlling.

Second hit: the remaining functional allele is subsequently lost or inactivated through mutation, deletion, loss of heterozygosity, or epigenetic mechanisms.

Once both copies are functionally lost, the cell loses an important defence against malignant transformation.

A classic example is the RB1 tumour-suppressor gene in retinoblastoma (a type of eye cancer happens in early childhood). In hereditary retinoblastoma, a child inherits one defective RB1 allele—the first hit—so only one additional somatic event is required. In sporadic retinoblastoma, both hits must occur independently within the same susceptible retinal (internal eye) cell.

The epigenetic "second hit"

Importantly, the second hit does not always require alteration of the DNA sequence. A



structurally normal tumour-suppressor gene can effectively be switched off through epigenetic mechanisms.

For example:

Normal allele '! promoter hypermethylation '! transcription suppressed '! tumour-suppressor protein lost (leading to being prone to cancer development)

This gives several possible combinations:

First hit Second hit Result

Mutation Mutation/deletion Both alleles genetically inactivated

Inherited mutation Promoter methylation Genetic + epigenetic inactivation

Somatic mutation Epigenetic silencing Genetic + epigenetic inactivation

Epigenetic silencing Epigenetic silencing/other loss Functional loss without necessarily changing both DNA sequences

Genes such as BRCA1 (causing breast and ovarian cancer) can undergo epigenetic silencing in particular cancers.

Epigenesis is broader than the original two-hit model

Modern cancer biology shows that malignant transformation is usually more complicated than simply two molecular events. A tumour develops through the progressive accumulation and selection of multiple genetic and epigenetic abnormalities.

These can include oncogene activation, tumour-suppressor gene loss, DNA-repair defects, abnormal DNA methylation, histone modification, chromatin remodelling, altered non-coding RNAs, telomere dysfunction, immune evasion, and changes in the tumour microenvironment.

Therefore, it is useful to distinguish:

Knudson's two-hit hypothesis '! specifically describes the requirement for loss of both functional copies of certain tumour-suppressor genes.

Multistep carcinogenesis '! describes the much broader accumulation of multiple molecular abnormalities necessary for most cancers to develop and progress.

A useful conceptual model

The process can be represented as:

Normal cell"!

First genetic/epigenetic hit"!

Cell remains largely controlled but becomes vulnerable"!

Second hit to the remaining tumour-suppressor function"!

Loss of growth restraint / DNA repair / apoptosis !

Additional genetic and epigenetic alterations !

Clonal selection and expansion !

Premalignant lesion!

Further driver alterations!

Malignant cancer

An important feature of epigenetic hits is that, unlike DNA mutations, they do not necessarily change the nucleotide sequence and may theoretically be reversible. This is one reason epigenetic mechanisms have become important therapeutic targets in oncology. So cancer develops through an interaction between genetic susceptibility, acquired genetic damage, epigenetic dysregulation, environmental exposures and cellular selection over time—not simply from a single cause or event.

Also it is pertinent to know that cancer may not always have an identifiable cause. An important principle is that having a risk factor does not mean that a person will develop cancer, and not having an obvious risk factor does not guarantee protection from cancer. Cancer is usually the result of multiple interacting factors

rather than a single identifiable cause. Some cancers arise largely from chance changes occurring during cell division or from biological processes that cannot currently be predicted or prevented.

In the philosophical and spiritual perspective of **Sri Aurobindo**, disease may be understood not merely as a physical disturbance but as arising within the complex interaction of the physical, vital (life-energy), mental, and deeper spiritual dimensions of the human being. Applied cautiously to cancer, this perspective might view serious illness as reflecting disharmony, weakness, or disorder in the embodied consciousness, together with influences acting upon the physical nature. Modern medicine explains cancer primarily through accumulated genetic and epigenetic alterations influenced by ageing, inherited susceptibility, carcinogens, infections, radiation, lifestyle and chance cellular events. Thus, Sri Aurobindo's philosophy can offer a complementary framework for contemplating the deeper meaning of illness and the relationship between consciousness and the body, while medical science remains essential for explaining, preventing, diagnosing and treating cancer.

Conclusion

Cancer is a complex disease arising from interactions among genetic changes, ageing, environmental exposures, infections, lifestyle factors and, in some cases, seemingly random biological events. Many important risk factors are preventable, but not every cancer can be prevented and not every cancer has a clearly identifiable cause. Science provides the strongest evidence for understanding the biological causes and risk factors of cancer. Philosophy and spirituality can provide additional frameworks through which individuals may explore questions of suffering, meaning, mortality, hope and human resilience. The two approaches are truly complementary. Medicine can address the biological disease, while philosophy and spirituality can help address the human experience of illness. Ultimately, the most compassionate approach is one that combines scientific knowledge, preventive action, personal responsibility, acceptance of uncertainty, and respect for each person's spiritual beliefs.

Haemato – Oncologist

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... ... trust the Divine Power and she will free the godlike elements in you and shape all into the expression of Divine Nature.

- Sri Aurobindo

Genesis of Deafness and its Preventive Measures

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Introduction

Deafness, or hearing loss, is a significant public health concern affecting individuals across all age groups. It can impair communication, cognitive development, social integration, and quality of life. Understanding the genesis (origin and causes) of deafness is essential for effective prevention, early detection, and management.

Definition

Deafness refers to a partial or complete inability to hear.

It may be:

Conductive hearing loss – due to problems in the external or middle ear

Sensorineural hearing loss – due to inner ear or auditory nerve damage

Mixed hearing loss – combination of both

Genesis of Deafness

1. Prenatal Causes (Before Birth)-

These affect the foetus during intrauterine life:

- Genetic factors (hereditary deafness, syndromic and non-syndromic)
- Intrauterine infections (TORCH group): Rubella, Cytomegalovirus (CMV), Toxoplasmosis, Syphilis
- Maternal conditions: Diabetes mellitus, Hypothyroidism
- Ototoxic drug exposure: Aminoglycosides, Certain antiepileptics
- Radiation exposure, Malnutrition during pregnancy

2. Perinatal Causes (Around Birth)

These occur during or immediately after delivery:

- Birth asphyxia (lack of oxygen), Prematurity and low birth weight
- Neonatal jaundice, Birth trauma

Prolonged labour, Use of ototoxic drugs in neonates

3. Postnatal Causes (After Birth)

A. Infections: Otitis media (middle ear infection)

Meningitis, Measles, mumps

B. Environmental Factors

Excessive noise exposure (industrial, music, earphones), Head injury or trauma

C. Ototoxic Drugs

Aminoglycosides (e.g., gentamicin), Loop diuretics, Chemotherapy agents (cisplatin)

D. Age-related Changes

Presbycusis (age-related hearing loss)

E. Others

Wax impaction, Tumours (e.g., acoustic neuroma), Autoimmune disorders

Preventive Measures

1. **Primary Prevention (Preventing Occurrence)**

A. Antenatal Care

- Regular antenatal check-ups, Vaccination against rubella before pregnancy
- Avoidance of ototoxic drugs, Proper maternal nutrition
- Control of maternal diseases (diabetes, hypertension)

B. Safe Delivery Practices

- Institutional deliveries, Prevention of birth asphyxia

- Skilled obstetric care

C. Immunization

Measles, mumps, rubella (MMR vaccine), Prevention of meningitis -pneumococcal vaccine

D. Avoidance of Noise Exposure

- Limit use of headphones/earphones
- Use ear protection buds in noisy environments

2. Secondary Prevention (Early Detection and Treatment)

- Newborn hearing screening (OAE/BERA tests), Regular hearing assessment in children
- Early treatment of ear infections, Prompt removal of ear wax
- Early fitting of hearing aids if needed

3. Tertiary Prevention (Reducing Disability)

- Use of hearing aids and cochlear implants, Speech therapy and auditory training
- Special education and rehabilitation, Community awareness and support programs

Conclusion

Deafness is largely preventable when appropriate measures are taken at different stages of life. Early identification and timely intervention can significantly improve outcomes. A multidisciplinary approach involving healthcare providers, parents, and the community is essential to reduce the burden of hearing loss.

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If ever something torments you or you are in difficulty and you do not know what to do, quieten yourself at once and go inwards. That means, you enter within, and sincerely ask your inner being, the psychic being, and you will get the answer, — clear and precise, like this. It will tell you what is to be done. It will guide you invariably.... And there is also another means which is very effective and you will succeed each time you ask. If you are in difficulty or you want an answer, it could be anything, or if you are not feeling quite at ease or something is tormenting you or you have made a mistake which makes you feel uneasy, — supposing you become angry and are discontented, which may be very insignificant, quite ordinary and without any value, even for things of which you do not know the cause, if something is not all right, not as it should be, — at that time, if you want to get rid of this somewhat unhappy state, come directly to the Samadhi, and bow down your head at the Samadhi and speak frankly to Sri Aurobindo all that you have to say, without hesitation, without doubt, as you come to tell me — and you have seen so many times that your difficulties have disappeared at once, vanished completely the moment you spoke to me. You got rid of them because I chased them out of you. And you felt yourself free from these negative or even harmful formations and you felt light because I had removed from you this burden and you went back happy.

(B-O- G) ***—The Mother***

Early detection of hearing loss for better speech in children

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Early detection of hearing loss is crucial for normal speech and language development, especially in infants and young children.

Hearing is the foundation for learning how to speak, understand language, and communicate effectively.

Why early detection matters

1. **Critical period for speech development-**

The first 2–3 years of life are vital for brain development related to speech and language.

If hearing loss is not detected early, the child misses exposure to sounds, words, and speech patterns.

2. **Prevents speech delay-**

Undetected hearing loss leads to:

- Delayed or unclear speech
- Poor vocabulary development
- Difficulty forming sentences

3. Better brain development (Neuroplasticity)

The brain develops auditory pathways when it receives sound stimulation early.

Early use of hearing aids or cochlear implants in hearing impaired children helps the brain adapt and process sound effectively.

4. **Improves social and academic outcomes**

Early identification allows children to:

Communicate better with family and peers

- Perform well in school
- Avoid behavioural and emotional issues

Methods of early detection

1. Newborn hearing screening- (particularly important in high-risk infants)

Done soon after birth

Tests include:

OAE (Otoacoustic Emissions)

ABR (Auditory Brainstem Response)

2. Regular hearing check-ups

- Important in children with: Speech delay
- Recurrent ear infections
- Family history of hearing loss

3. Parental Observation-Watch for signs like:

Not responding to sounds or name

- Delayed speech milestones
- Turning up TV volume excessively

Early intervention -

Ideal timeline:

Screening by 1 month

Diagnose by 3 months

Intervene by 6 months

Interventions include:

Hearing aids

Cochlear implants

Speech therapy

Early detection of hearing loss ensures timely intervention during the critical period of language development, thereby preventing speech delay and improving cognitive, social, and academic outcomes.

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The Genesis of Ill Health and Diseases

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The sovereignty of mind has made humanity the slave of doctors and their remedies. And the result is that illnesses are increasing in number and seriousness.

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Medical science in different forms, i.e., most crude, and most refined, is exploring from an age-old time to understand the genesis of ill health and diseases by which humans suffer. When scientific medical research was not there, with human intelligence and speculations, causes of several types of illness and diseases have been described and accordingly preventive measures, cure and promotional health methods have been recommended. In the Indian scripture ***Bhagavat Geeta***, written more than five thousand years back, it has been described, how diseases can occur due to stale food and hence there is recommendation on foods beneficial for good health, also how a calm and peaceful mind can give sound health.

"Foods that are influenced by the mode of goodness, increases the life span, cleanses one's existence and gives strength, health, happiness and satisfaction…."- Bhagavat Geeta ch. 16 - verse 8.

"Food that is stale, tasteless, putrid, rotten, food consisting of remnants and unfit for pious service is dear to those in whom the mode of darkens dominates." - Bhagavat Geeta ch. 16 - verse 10.

If we review the historical documents of Morden medical sciences, we will find that causes of diseases are attributed mostly to germ theory, where microscopic and sub-microscopic, tiniest living pathogens cause the infections manifesting diseases. It was also a fact that once upon a time the infectious diseases were rampant gripping the world's population with suffering and killing and hence the infectious disease agents were the eye sore to medical scientists. As per the existing medical research evidence, cause of a disease is not due to a single factor. It is multifactorial and complex. The disease-causing agents attack the human body when the body has less fighting capacity i.e. immunity, which again depends upon many inherent factors including nutrition, water and air. The framework that explains this is called Epidemiological Triad which is mainly used for infectious and environmental diseases. In this model three factors play their role with complex interaction i.e. Agent (pathological, chemical, or physical), Host (human or animal and their age, immune status, nutritional status, prior exposure etc.), Environment (climate, sanitation, water, living conditions etc.). Over the years, efforts have been made under the Public Health Prevention and Control Measures and effective Antimicrobials, by which spread of infectious diseases could be limited and many infectious diseases could be halted– thus additional years could be added to the age of human population in varied degree across the globe. As human age in years increased, lifestyle changed under a massive shift in the name of enjoyment and newer noninfectious diseases cropped in, crippling the population.

The Epidemiological Triad model explains well about infectious diseases, but constraints explaining the noninfectious diseases like

hypertension, diabetes, obesity, cancer, mental health etc. In many patients, it becomes difficult to assess diseases using epidemiological triad model. Many components of such noninfectious diseases might be due to some specific factors, but there are other components for which no specific biological or physical factor can be ascertained. A female patient of 65-year-old, complained that she has burning sensation in her head and having headache most often along with other nonspecific symptoms. Her treating physician ignored, saying that these are psychological and there is no abnormality in laboratory diagnosis. The patient could not be healed by the doctor, but she could be healed to a great extent when she was given some placebo tablets with good counselling through an intimate talking – she was counselled with proper tone assuring that the disease will be over soon with the new medicine. She felt fine after some-days and appreciated the treatment.

All diseases are not due to biological or physical causes. There are many which are mixed up - biological (bodily or genetic) and psychological (thought, feeling, emotions etc.) and social (family, community, workplace, money, culture and religion etc.). The biopsychosocial model has been developed by Dr George Engel, a psychiatrist and Professor at the Rochester University and Dr John Romano, psychiatrist and medical educator in Rochester University in 1977. This model advocates that health problems come from a mix of above three factors and not just physical or biological issues. It is a comprehensive and holistic approach on which now a days many healing systems are operating at different parts of the globe.

Let us understand our body's functioning. In this earthly abode we are identified by our physical body which is a biological structure and seems solid. But when we analyse the body system, we find that it is filled with more than seventy five percent water, air, ether, and lesser quantity of solid elements. The invisible binding forces integrated with life force, structure our body, giving it agility for movements. This unique structure is governed by mind inculcating emotions and intelligence. This phenomenon is also seen in all higher animals on the evolution ladder. Lesser the mind develops among animals; more is the influence of nature in their day-to-day functioning. Thus, they move more by instinct, and less by intelligence. They follow nature's direction for their routine activities like waking up, sleeping, food consumption, and procreation. They use nature's healing herbs, water, air, and sun when they fall ill. If nature cannot heal, they suffer and succumb. When these animals are domesticated, they get influenced by human behavior and lose nature's direction- this affects their natural life, and they fall to the trap of unwanted ill health. Mind governs body and life and is vulnerable to be affected by the surroundings, where inanimate and animates play their role. Man is influenced, mostly by human surroundings, family members, community, educational institutions, workplace, political and administration, health of the state/ nation. Happiness and sorrow are both from environmental influences. Many a time knowingly, we enter such environment and sometimes unknowingly we get trapped. Environmental toxicity affects the mind and thus our bodily system get affected. But there is coping mechanism within our system. If we look within, when we are under the toxic effect of the surrounding, we get solace with healing effects. It occurs, because mind is under the influence of inner soul, which is a portion of the Universal Soul, the God, which is self-independent, uninfluenced by external factors like birth, suffering, joy, disease and death.

Human body is built up with innumerable (30 to 40 trillion) living cells which have their

own powerhouse. Each cell connects with other cells, they vibrate in their own natural rhythm, have their immune mechanism to fight against the external enemies as a united army. Thus, automatically innumerable disease-causing factors, though they exist in the human environment, cannot cause illness. This immune force does not only depend on the physical body's material property, but on the internal system from which healing chemicals and hormones are releases based on the mind's influence. If the mind knows how to stay connected with the inner soul, the release of the healing elements occurs as per the need of our body system to prevent, cure and promote overall health and wellbeing. We pass through various stages when we fall ill. When the disease symptom manifests, we are prompted to seek medical diagnosis and intervention. Then, we go to the next stage i.e. recovery or disability or death as final outcome. Disease prognosis is heavily dependent on our resilience and the timeliness of medical interventions.

We face turbulence in our mind due to environmental influence and self-unreadiness to resolve it. We face jealousy, rigidity, and unloving climate which implant restlessness, intolerance, anxiety and unwanted mental and physical disorder. Embracing a mindset of forgiveness, gratitude, inner change, accepting "let go" attitude is a powerful way to clear away inner toxicity and stress.

Louise Hay writes in her book; "You can heal yourself."

In the Infinity of life where I am,

all is perfect, whole, and complete.

I believe in a Power far greater than I am that flows through me every moment of every day.

I open myself to wisdom within, knowing that there is only One Intelligence in this Universe.

Out of this One Intelligence comes all the answers, all the solutions, all the healings, all the new creations.

I trust this Power and Intelligence,

knowing that whatever I need to

know is revealed to me,

and that whatever I need comes to me in the right time, space, and sequence.

All is well in my world.

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This delight, this wonderful laughter that dissolves every shadow, every pain, every suffering! You have only to go deep enough within yourself to find th inner Sun, to let yourself be flooded by it; and then nothing but a cascade of harmonious, luminous, sunlit laughter, which leaves no room for any shadow or pain…this Sun of divine laughter is at the centre ofall things, the truth of all things: we must learn to see it, to feel it, to live it.

- The Mother

Adverse Forces and Ill-health

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Preamble:

Sri Aurobindo says, "Each time that we have made a decisive step in our spiritual progress, the invisible enemies of the Divine always try to take their revenge, and when they cannot injure the soul, they strike the body. But all their efforts are in vain and will finally be defeated, for Divine Grace is with us."

Here Sri Aurobindo talks about the effects of adverse forces, referred to as invisible enemies, on the health of human beings, ultimately existing as obstacles in the Evolutionary process.

The term, adverse forces, with respect to ill health is not new.

Virtually every ancient civilization and traditional culture across the globe historically attributed physical and mental illnesses to adverse metaphysical or supernatural forces. Before the modern discovery of germ theory, disease was rarely viewed a random biological event; it was interpreted as a spiritual attack, divine punishment, or cosmic imbalance.

In fact, the Atharvaveda has been looked upon as the Veda of secret and occult knowledge. It is believed to be the origin of Ayurveda, the Indian science of medicine. It recognizes a number of diseases, and it attributes them not only to physical causes but also, and more importantly, to psychological causes, including Karma and influence of adversary forces. The Atharvaveda has three kinds of mantras, and out of the three, one kind are *those relating to the cure of diseases and destruction of wild animals, pishachas and adverse forces.*

If we go back to the history of Modern Medicine, we find that the world leaders of progressive thought in philosophy, education, science, and academics in early Greece assumed that events of life, including calamity and illness, were the result of metaphysical forces and mystical powers. In fact, they also believed that Apollo would send his invisible arrows to inflict pain and suffering on the condemned. So the history of this science did start from linking metaphysical powers with illnesses.

Amidst this milieu, however Hippocrates, a Greek physician challenged the popular paradigm that such powers with metaphysical forces were the driving force behind disease.

Adverse forces according to Sri Aurobindo and The Mother:

While all over the world, there are many cultures which attribute metaphysical forces to illness, there is hardly anyone who has described the adverse forces the way it has been explained by Sri Aurobindo and the Mother.

According to them, they are anti divine forces of the vital world that have descended on the earth and making use of it as their fields of action. But at the same time a new, higher, more powerful spiritual force has descended on earth, to bring a new life. This creates a kind of conflict between constructive forces of the ascending evolution and more powerful destructive forces.

Thus, the term "adverse force" should not be understood simply as a supernatural explanation for everything that goes wrong. It refers, in the Sri Aurobindonian vision, to forces

of consciousness that work against truth, harmony, progress and transformation. The important point is that the adverse force gains strength through a response within the individual.

As far as adverse forces and ill health are concerned, the Mother has said that all illnesses are not due to adverse forces. Adverse forces generally exploit the existing weaknesses rather than creating illness out of nothing.

There can be two types of factors that make a person ill, one that comes from outside and one that comes from the inner condition of a person. The inner condition becomes the cause of illness when there is a resistance or revolt or when there is some part in a person that does not respond to the protection or there may be something there that almost willingly and willfully calls the adverse forces. Even if there is slight movement of this kind in a person, the hostile forces attack and can cause illness. It is only by refusing to allow these wrong movements to take place in oneself that one can hope to get rid of the adverse influence and its disastrous effects.

It is jealousy, selfish dissatisfaction and hurt vanity that open the doors of the consciousness to the hostile attacks by pulling one out of the Divine's protection.

According to Sri Aurobindo, adverse forces affecting health are not caused fundamentally by physical germs or matter alone but originate as external suggestions or attacks from the lower nature. These forces exploit inner psychological weaknesses, fears, or disharmonies to pierce the body's nervous envelope and manifest as physical illness. The nervous envelop is a sort of protection round the body, if this remains strong and refuses entrance to the illness, then one can remain well even during plague or other epidemics. If the envelope is pierced or weak, then a person becomes ill.

If we want to know the purpose and the impact of an adverse force, what can be more appropriate example than an incidence of a fall Sri Aurobindo had just few hours before November Darshan in 1938?

On the eve of November Darshan in 1938, Sri Aurobindo fell down, due to a seemingly insignificant obstacle that revealed the mysterious interplay between the physical and the unseen. Even in a state of consciousness turned towards the Divine, the forces of opposition may seek an opening through the most ordinary circumstances. What appeared outwardly, a fall, did not signify defeat. In the deeper spiritual perspective, every such encounter could become part of the larger working of the Divine, transforming an apparent adversity into an instrument of a greater purpose.

Sri Aurobindo explained the incidence and the reason behind it : "The hostile forces had tried many times to prevent things like the Darshan, but I had succeeded in warding off all their attacks. At the time of the accident, I was more occupied with guarding the Mother and I forgot about myself. I didn't think the hostiles would attack me. That was my mistake……."

Thus Sri Aurobindo's fall has been viewed in integral yoga as a symbolic and occult collision with hostile world-forces rather than a mere physical accident.

The Mother also has, by sharing her experience during the influenza epidemic in Japan in January 1919, offers a remarkable illustration of her understanding of illness as having not only a physical dimension but also a psychological, vital and metaphysical dimension. She has described the pervasive atmosphere of fear, anxiety and panic during the epidemic and, during her own illness, an experience in which she perceived an adverse formation associated with the violent deaths that occurred during the war. Through concentrated consciousness and an active inner resistance, she experienced a

decisive reversal of her condition. For the Mother, this experience became an illustration of the possibility of confronting an illness not merely as a physical event but also at the level of consciousness.

This experience of the Mother explains how illness originated from the bodies from the beings who had been thrown out of their bodies.

Illness because of adverse forces could be due to a spiritual error opening the door for such forces. This could be through a movement of vanity, of anger, of hatred or of violence in a being. This is particularly more important for a person who is doing sadhana who needs to be conscious all the time. As slightest deviation from the alertness, can invite the attack by adverse forces as they can pierce the nervous envelop, a layer of protection encouraging the illness to become as bad as it can be. In such a case, one needs to add the Force of spiritual purification, which is an absolutely, perfectly constructive force.

According to the Mother, for the people who are doing yoga, they have divine protection around them. But to prevent illness or accident, they need to be conscious, all the time & vigilant because doubt, ill-will or revolt even for a short time, can take protection away from a person and cause illness or accident.

It is also important to know how to prevent illness from coming and how to cure it when a person falls ill. The mother said that it is important to resolve and will to be cured. It is important to be watchful as even a small part of oneself should not want illness. In case of illness, one needs to discover the disorder, the disharmony and then through the light, knowledge and spiritual force, needs to re-establish the harmony. One must face it with courage, calmness, confidence, with the certitude that illness is a falsehood and that if one turns entirely, in full confidence, with a complete quietude to the divine grace, it will settle in these cells as it establishes itself in the depths of the being, and the cells themselves will share in the eternal Truth and Delight.

A period of illness may reveal an imbalance, resistance, attachment, fear or unconscious movement that had previously remained unnoticed. This experience can therefore become an occasion for self-observation and transformation, an opportunity to discover an inner disequilibrium and make the necessary progress; the attitude adopted towards the experience can determine whether it becomes an occasion for growth or degradation.

Hostile forces are tolerated in the world only because they put man's sincerity to the test. The day that man becomes integrally sincere, they will pass away, for there will no longer be any reason for their existence.

A particularly important aspect of the Mother's teaching is that illness should not be regarded as a punishment deliberately imposed by the Divine.

The Mother's assurance is therefore of fundamental importance: ***the efforts of the forces opposed to the Divine are ultimately in vain, because the Divine Grace is with us.***

The true victory over illness, in this integral vision is the gradual emergence of a human being whose body, life, mind and soul become increasingly harmonious with the higher truth towards which evolution is moving.

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Genesis of Illness and Disease: A Naturopathic Perspective

Dr. Milind Parasar

Naturopathy views health as the natural state of the human body, maintained through harmony with the laws of nature. Disease is not considered an independent entity but a manifestation of the body's disturbed physiological equilibrium and an attempt to restore internal balance. The genesis of disease is therefore understood as a progressive process resulting from continuous deviation from natural living.

1. Violation of Nature's Laws

According to naturopathic philosophy, the primary cause of disease is the persistent violation of Nature's laws. Unhealthy dietary habits, sedentary lifestyle, inadequate sleep, chronic stress, environmental pollution, addictions, and suppression of the body's natural urges interfere with normal physiological functions. These disturbances impair digestion, metabolism, circulation, elimination, and cellular repair, gradually reducing the body's vitality.

2. Abnormal Composition of Blood

Classical naturopathy proposes that prolonged violation of natural laws leads to an abnormal composition of blood. Impaired digestion and metabolism result in the accumulation of incompletely metabolised waste products and altered biochemical constituents within the circulation. Since blood nourishes every tissue, its altered quality adversely affects cellular nutrition, oxygen delivery, immune competence, and tissue repair. This internal imbalance creates a favourable environment for the development of disease, including susceptibility to communicable infections.

3. Theory of Toxemia

The Theory of Toxemia forms one of the fundamental principles of naturopathy. It states that the accumulation of morbid matter or metabolic toxins within the body is the basic cause of disease. When the organs of elimination—such as the intestines, kidneys, skin, lungs, and liver—fail to efficiently remove metabolic wastes, these substances accumulate and interfere with normal cellular function. Inflammation, tissue degeneration, impaired immunity, and chronic illness are considered consequences of this toxic burden. Therefore, restoration of health depends upon enhancing the body's natural eliminative mechanisms through fasting, therapeutic nutrition, hydrotherapy, exercise, adequate hydration, breathing practices, and sufficient rest.

4. Unity of Disease

Naturopathy advocates the principle of Unity of Disease, which states that all diseases arise from the same underlying disturbance—accumulation of toxins, impaired vitality, and deviation from natural living. The names assigned to diseases merely represent different locations, stages, or manifestations of the same pathological process. Whether the presentation is arthritis, diabetes, hypertension, skin disorders, or respiratory illness, the underlying internal imbalance is fundamentally similar.

5. Unity of Cure

Corresponding to the Unity of Disease is the Unity of Cure, which emphasises that true healing occurs by removing the root causes rather than merely suppressing symptoms. The

body possesses an inherent self-healing capacity (Vis Medicatrix Naturae), which becomes effective when obstacles to health are eliminated. Natural therapies aim to support this intrinsic healing mechanism by restoring physiological balance, improving nutrition, enhancing elimination, correcting lifestyle, and strengthening vitality.

6. Panchamahabhuta Theory

Naturopathy also incorporates the ancient concept of the Panchamahabhutas (Five Great Elements)—Earth (Prithvi), Water (Jala), Fire (Agni), Air (Vayu), and Ether (Akasha). The human body, like the universe, is composed of these five elements. Each element contributes to structural integrity, metabolism, fluid balance, respiration, movement, communication, and consciousness. Disturbance in the proportion or function of these elements leads to physiological and psychological imbalance, eventually manifesting as disease. Naturopathic therapies—including mud therapy, hydrotherapy, sun therapy, air baths, fasting, and yoga—are designed to restore elemental harmony and optimise health.

7. Vital Force and Self-Healing

A central concept in naturopathy is the Vital Force, the inherent biological intelligence that regulates growth, repair, immunity, adaptation, and healing. Disease develops when this vital force is weakened by chronic stressors and unhealthy habits. Treatment therefore focuses not on combating disease directly, but on enhancing vitality, allowing normal physiological and immunological mechanisms to restore health.

Scientific Interpretation

Many classical naturopathic concepts can be interpreted in light of contemporary biomedical science. The "abnormal composition of blood" may correspond to chronic low-grade inflammation, oxidative stress, metabolic dysfunction, dysbiosis, altered lipid and glucose metabolism, and inflammatory mediators. Likewise, "toxemia" can be viewed as the accumulation of metabolic by-products, oxidative molecules, environmental pollutants, or impaired waste clearance resulting from compromised physiological function. While the traditional terminology differs from modern biomedical language, both perspectives recognise that lifestyle, nutrition, environmental exposures, chronic stress, and impaired physiological regulation contribute significantly to the development of both non-communicable and infectious diseases.

Conclusion

The naturopathic model considers disease to be a dynamic process arising from deviation from Nature's laws, impaired vitality, accumulation of toxic matter, abnormal internal milieu, and imbalance of the five natural elements. Rather than treating isolated symptoms, naturopathy seeks to identify and eliminate the root causes of illness while supporting the body's innate healing capacity. This holistic approach integrates lifestyle correction, natural therapies, and preventive healthcare to restore physiological balance and promote long-term wellness.

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Space, Order and Well-Being: From Material Clutter to Conscious Space

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Every act of life requires space. The body needs room to breathe and move; the mind needs room to attend and think; relationships require emotional room; and meaningful work requires an environment in which attention can settle. In Indian thought, akasha is not merely empty extension but the field in which manifestation becomes possible. A home or workplace can therefore be understood as more than a container for possessions: it is the material field in which health, behavior, work and consciousness unfold. Modern life steadily fills that field with objects, papers, devices, unfinished tasks, messages, photographs, emails, notifications and commitments. Physical accumulation is often accompanied by mental, emotional and digital congestion. Decluttering, in this wider sense, is not the pursuit of emptiness; it is the deliberate creation of usable, restorative and conscious space.

This becomes especially important when clutter is discussed in relation to ill-health. Scientific caution is essential: an untidy room is not a pathogen, and clutter should not be presented as a direct cause of hypertension, diabetes, depression or other chronic diseases. Yet living and working spaces can add to or reduce cognitive demand, perceived stress, sleep disruption, safety hazards and behavioral friction. Chronic environmental disorder is therefore best understood as one modifiable component of a much larger health burden. This framing resonates with Sri Aurobindo and The Mother's refusal to treat material life as spiritually irrelevant. The Mother wrote, 'The Divine is in things also and that is why they must be treated with care.'[1] Matter, in this view, is not an obstacle to consciousness; the way we inhabit and care for it is part of consciousness itself.

Environmental disorder, attention and the stress response

The brain does not passively observe its surroundings. It continuously selects, filters and interprets sensory information. A desk crowded with documents, cables, devices and unfinished work presents more competing cues than a coherent workspace. John Sweller's Cognitive Load Theory was developed in the context of learning, but its central principle is relevant: working memory is limited, and unnecessary information consumes resources that could otherwise support the task at hand.[2] In daily life, visible clutter may act in a similar way. Each object can imply an unfinished action - read this, move that, repair this, file that, do not forget this - and the cumulative effect is a field of competing signals. The Mother's deceptively simple answer to a disciple who repeatedly lost things, 'Because you do not keep things sufficiently in your consciousness,'[1] can be read as a spiritual formulation of attentional dispersion. Sri Aurobindo likewise wrote that physical things have a consciousness within them that responds to care, and that learning such carefulness marks a progress in consciousness.[3] Organisation thus becomes more than storage: it is attention extended into material life.

Stephen and Rachel Kaplan's Attention Restoration Theory adds the complementary idea that sustained directed attention becomes

fatigued, while coherent and gently engaging environments, especially natural ones, can help attentional recovery.[4] A decluttered room cannot substitute for sleep, nature or genuine rest, but reducing needless competition may make restoration easier. The Mother also cautioned that inner peace can be established in any surroundings,[5] reminding us that environment is a support, not the sovereign cause of consciousness. A healthy environment should therefore not be confused with an empty or sterile one. A plant, a family photograph, a book or a meaningful object may support calm, identity or beauty. The goal is coherence, not deprivation. Sri Aurobindo similarly rejected both material indulgence and ascetic contempt for material life: one should be able to live with few things, but also to live rightly with useful and beautiful things, without attachment.[3] Conscious simplicity is therefore not a war against possessions; it is freedom from being psychologically governed by them.

When disorder is experienced as persistent loss of control, unfinished work or environmental pressure, it may enter the physiology of stress. Bruce McEwen's concept of allostatic load describes the cumulative 'wear and tear' that can arise when adaptive stress systems are repeatedly activated without adequate recovery.[6] Temporary activation is protective; chronic activation is costly. Saxbe and Repetti found that women who described their homes with more stressful or unfinished-home language showed poorer mood and less favourable daily cortisol patterns.[7] This does not prove that clutter causes endocrine disease, but it supports a modest conclusion: the experience of home can correlate with stress physiology. In yogic language, persistent disorder may reinforce tamas - inertia and unconscious repetition - while deliberate order and rhythm support greater clarity.[8]

From stress burden to pathways of ill-health

The possible health effects of clutter are best understood as interacting pathways. Chronic psychosocial stress is associated with repeated sympathetic activation, altered cortisol regulation and adverse cardiovascular and metabolic processes.[6] Environmental disorder may add to that background burden when it repeatedly evokes frustration, loss of control or difficulty completing daily routines. It can also act indirectly through behavior. A chaotic kitchen may make meal preparation harder; disorganized medication storage may increase the chance of missed doses; overcrowded rooms may discourage movement; a cluttered bedroom may prevent psychological disengagement from daytime demands. Thus, the pathway is not 'clutter to disease' in one step, but rather environmental demand -> stress and cognitive burden -> disrupted routines and recovery -> greater vulnerability over time.

Sleep is a clear example of this interaction. The bedroom ideally signals rest and disengagement, yet it increasingly doubles as office, entertainment center and digital communication hub. Visible work, screens, alerts and unfinished tasks can prolong cognitive activation into the night. Poor sleep, in turn, worsens attention, emotional regulation and cardiometabolic health. Digital decluttering therefore belongs inside the same health framework as physical decluttering. Hundreds of unread emails, unnecessary browser tabs, duplicate files and persistent notifications can make an apparently clean desk cognitively crowded. The Mother's teaching that work should be done with full concentration in the present, rather than with the mind already pulled toward the next task,[5] has a direct contemporary relevance: a notification-saturated environment continuously fragments the very presence required for good work.

Physical clutter can also affect health more directly. Congested floors and stairs increase trip and fall hazards, especially for older adults and people with impaired mobility, vision or balance. Accumulated objects can obstruct exits and emergency access. Surfaces hidden by possessions are harder to clean, and fabrics, papers and inaccessible areas may collect dust or allergens; if dampness and poor ventilation coexist, mold exposure may become more likely. Decluttering is not treatment for asthma or allergy, but accessibility, cleanliness and ventilation are legitimate components of environmental health. Here, spiritual care and hygiene are not opposed. The Mother went so far as to write, 'Cleanliness is the first indispensable step towards the supramental manifestation,'[5] locating cleanliness not outside spiritual life but at its material foundation.

Clutter as unfinished decisions, emotional load and workplace fatigue

Possessions rarely function as neutral objects. They carry memories, identities, obligations, fears of scarcity and imagined future uses. An unused item may remain because 'I may need it someday,' because it was a gift, because discarding it feels wasteful, or because it represents an earlier version of oneself. Clutter can therefore be understood as accumulated deferred decisions. This is why indiscriminate disposal is not the essence of decluttering. The more useful question is: what deserves a place in my life, what purpose does it serve, and what am I continuing to carry without conscious reason? The Isha Upanishad's opening movement - to live in a world pervaded by the Divine without grasping at possession - gives this question a spiritual depth.[9] Non-attachment does not require rejecting matter; it requires freedom from possessiveness. The Mother similarly observed that when consciousness is centered more deeply, physical things lose much of their exaggerated importance.[5]

The same principle applies internally. Mental clutter includes unfinished tasks, repetitive worries, overcommitment and constant switching. Emotional clutter may include unresolved resentment, guilt, fear or attachment to identities that no longer serve constructive life. Physical objects often become containers for these states. Decluttering cannot mean suppressing difficult emotions or pretending that complex memories are disposable. It means creating enough inner space to recognize, process and integrate them without allowing them to govern every decision. The Mother's statement that 'external untidiness is always the expression and symbol of some inner confusion and lack of organization in the mental or vital'[5] should therefore not be used as a moral judgement against anyone whose home is untidy. Its deeper value is diagnostic and introspective: outer disorder can sometimes reveal where attention, energy or decision-making has become congested. Conversely, she also warned that outward change should be the expression of an inner transformation.[5] Rearranging a room without changing the habits that created the disorder merely resets the cycle.

Workplaces intensify these dynamics because physical and informational clutter coexist. Email, instant messaging, meetings, multiple applications, alerts and task-switching create a form of cognitive overcrowding. The result may be fatigue, errors, unfinished work and a growing sense of loss of control. In clinics, laboratories and other safety-critical settings, organization has an additional importance because misplaced materials, poorly structured information and visual overload can interfere with reliable workflow. Sri Aurobindo described order, harmony and organization in physical things as essential to efficiency and

perfection,[3] while The Mother taught that consciousness develops through work done as an offering.[5] These ideas converge with human-factors principles: order is valuable not because neatness is morally superior, but because a well-arranged environment allows attention and action to serve their intended purpose with less friction.

From healing environments to conscious environments

Research on healing environments shows that physical setting participates in recovery. Roger Ulrich's classic study reported better postoperative outcomes among patients with a view of natural scenery than among comparable patients facing a brick wall, helping establish evidence-based healthcare design.[10] The larger lesson is not that an aesthetic cures disease, but that light, noise, nature, safety and spatial organization can support or burden recovery. A healthy home or workplace should therefore offer order for movement and concentration, adequate light and ventilation, meaningful objects and access to restoration.

This perspective is closely aligned with the yogic idea of 'saucha', or cleanliness/purity, among Patanjali's 'niyamas'.[11] Saucha is not merely scrubbing surfaces; it is part of the cultivation of a condition in which clarity becomes possible. The Bhagavad Gita's language of sattva similarly associates clarity, harmony and luminosity with a higher mode of functioning, in contrast to restless rajas and inert tamas.[8] These categories should not be turned into simplistic labels for rooms or people, but they offer a useful philosophical map: compulsive accumulation can reflect restless acquisition; chronic neglect can reflect inertia; conscious order can support lucidity. In Integral Yoga the movement goes further. The division between 'ordinary life' and 'spiritual life,' The Mother wrote, is an 'outdated antiquity.'[5] Cleaning a desk, caring for an instrument, arranging a medicine shelf or filing a document can become spiritual practice when done with attention, care and the intention to make material life more truthful and functional.

This is also why decluttering should not become another perfectionism. A productive laboratory, a family home or a child's creative corner will periodically be untidy because life is taking place. Anxiety about maintaining an immaculate aesthetic can itself become a stressor. Nor should decluttering become consumerism in reverse, where functional objects are discarded only to be replaced by more fashionable 'minimalist' products. The Mother explicitly valued making use of things rather than uselessly destroying them,[1] and Sri Aurobindo emphasized self-control rather than asceticism.[3] The balanced principle is therefore: keep consciously, use carefully, organize meaningfully, maintain what serves, share what others can use and release deliberately what no longer has a rightful function. 'There can be no physical life without an order and rhythm,' The Mother wrote; the point is not novelty of arrangement, but an order that expresses inner growth.[5]

A practical philosophy of decluttering for health and flourishing

A sustainable approach begins with function rather than appearance. Physical space should permit safe movement, cleaning, ventilation, rest and the activity for which the space exists. Frequently used objects should be accessible; obsolete, broken or duplicate items should be repaired, reassigned, donated, recycled or discarded with judgement rather than impulse. Digital space should be governed by the same principle: disable non-essential notifications, reduce redundant applications and files, create a simple retrievable filing system, and protect periods in which screens do not

command attention. Mental space can be supported by externalizing tasks, prioritizing a small number of commitments and completing or consciously abandoning unfinished work. Emotional space requires a slower process of reflection, conversation, forgiveness, grieving or acceptance where necessary.

The aim is not only disease prevention but human flourishing. Martin Seligman's PERMA model describes well-being through positive emotion, engagement, relationships, meaning and accomplishment.[12] A coherent environment may support these indirectly by reducing interruptions, friction and conflict while preserving meaningful objects and restorative spaces. Possession clutter has been linked with poorer subjective well-being,[13] and household-chaos research reports adverse family associations that remain strongly shaped by social and economic context.[14] Decluttering is therefore not a moral obligation or a cure, but one way of making healthier routines and clearer attention easier as shown in Figure 1.

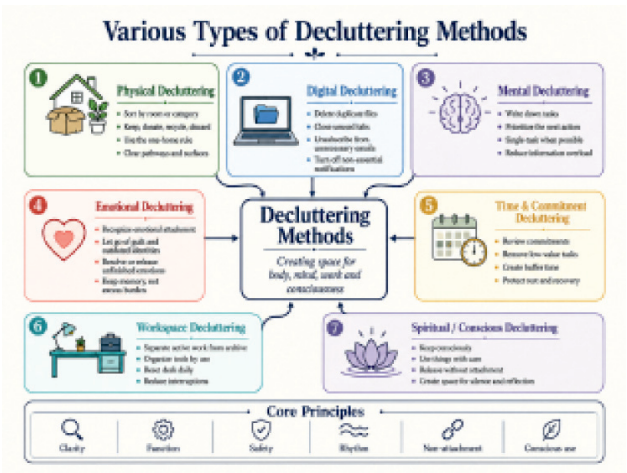


Figure 1. Schematic representation depicting types of decluttering and their core principles for creating a healthier, more conscious space.

The deepest change, however, is in the relationship between consciousness and matter. Sri Aurobindo and The Mother do not ask us to flee from material life but to transform our participation in it. The Mother wrote that material things should be cared for not from attachment but because they manifest something of the Divine Consciousness.[1] This single distinction prevents two opposite errors: hoarding because we cannot release, and careless disposal because we imagine spirituality requires indifference to matter. Conscious decluttering lies between them. It asks us to see each object, task and space clearly; to give the right thing the right place; to remove what obstructs life; and to bring order as an expression of inner growth. When work is approached as an offering, even the ordinary labor of cleaning, sorting and organizing can become a discipline of presence rather than a chore performed mechanically.[5]

Conclusion: making space for life

Clutter and overcrowding should neither be sensationalized as hidden causes of disease nor dismissed as mere aesthetics. By increasing competing stimuli, unfinished cues, stress, sleep disruption, cleaning difficulty, physical hazards and attentional fragmentation, environmental disorder may add to cumulative health burden. The science becomes richer when joined to a philosophy of conscious material life. Patanjali's saucha, the Gita's ideal of clarity, the Isha Upanishad's non-grasping relation to possession, and Sri Aurobindo and The Mother's insistence on care, order, rhythm and transformation converge on one insight: outer space and inner state continually influence one another.

Decluttering is therefore not primarily the art of having fewer things. It is the art of creating right relationship - between person and possession, task and attention, body and environment, inner aspiration and outward

action. Physical decluttering creates room for movement and safety; digital decluttering creates room for attention; mental and emotional decluttering create room for recovery and discernment. When unnecessary accumulation is released and what remains is cared for consciously, space becomes more than absence. It becomes a support for health, work, beauty, relationship and awareness. We shape our surroundings, and our surroundings continually shape us. The deeper destination of decluttering is not emptiness, but conscious space.

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Hypertension: Risk Factors and How to Overcome Them

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Hypertension, or high blood pressure, is one of the most important and preventable causes of heart, brain and kidney diseases worldwide. It is often called a "silent killer" because many individuals have no symptoms until significant damage has already occurred. Persistent elevation of blood pressure increases the risk of heart attack, brain stroke, heart failure, chronic kidney disease and premature death. The good news is that most of the major risk factors for hypertension are modifiable, which makes the disease preventable and ultimately preventing premature death.

Understanding the Risk Factors

Hypertension results from a complex interaction between genetic, environmental and lifestyle factors. Age and family history are important non-modifiable risk factors. Blood pressure tends to rise with advancing age because of increasing arterial stiffness. Individuals with a family history of hypertension are also at greater risk.

Among modifiable factors, **excess dietary salt intake** is particularly important. A high-sodium diet promotes fluid retention and increases vascular resistance, thereby raising blood pressure. Processed foods, pickles, papads, packaged snacks, instant foods and restaurant meals can contain substantial amounts of hidden salt and oil .

Overweight and obesity are major contributors to hypertension. Excess adiposity increases sympathetic activity, insulin resistance and activation of the renin-angiotensin-aldosterone system, all of which can contribute to elevated blood pressure. Even modest weight reduction can produce meaningful improvement in blood pressure.

Physical inactivity is another important risk factor. Regular exercise improves vascular function, insulin sensitivity and cardiovascular fitness. In contrast, a sedentary lifestyle contributes to weight gain and metabolic abnormalities.

Dietary habits also play a major role. A diet rich in saturated fat, refined carbohydrates, processed foods and sugary beverages, but low in fruits, vegetables, whole grains and potassium-rich foods, is associated with greater cardiovascular risk. Excessive alcohol consumption can raise blood pressure, while tobacco use causes vascular injury and substantially increases overall cardiovascular risk.

Psychological stress and inadequate sleep are increasingly recognized as contributors. Persistent stress can increase sympathetic nervous system activity and may encourage unhealthy behaviours such as overeating, smoking or excessive alcohol consumption. Obstructive sleep apnoea is another important, often underdiagnosed, cause of resistant hypertension.

Certain medications and substances can also increase blood pressure. These include non-steroidal anti-inflammatory drugs (pain killers), corticosteroids, some oral contraceptives, and certain immunosuppressive agents. Secondary

hypertension may result from renal diseases, primary aldosteronism, thyroid disorders, pheochromocytoma, Cushing syndrome and other conditions. Recognition of these causes is particularly important when hypertension occurs at a young age, is severe or remains uncontrolled despite appropriate treatment.

How Can We Overcome These Risk Factors?

The prevention and control of hypertension begins with lifestyle modification. These measures are not merely alternatives to medication; they form the foundation of cardiovascular prevention.

1. Reduce salt intake:

Salt consumption should be reduced, particularly by limiting processed and packaged foods. Avoid adding extra salt at the table and use herbs, spices, lemon and other natural flavouring agents instead. A diet emphasizing fresh, minimally processed foods is preferable. A total daily salt intake should be less than 5 grams.

2. Maintain a healthy body weight:

For people who are overweight or obese, gradual and sustained weight loss should be encouraged. Even a reduction of approximately 5–10% of body weight can improve blood pressure and metabolic health.

3. Exercise regularly:

Adults should aim for at least **150 minutes of moderate-intensity aerobic physical activity per week**, or 75 minutes of vigorous activity, together with muscle-strengthening activities on at least two days per week, according to individual fitness and medical status. Brisk walking, cycling, swimming and resistance exercises are practical choices.

4. Follow a heart-healthy diet:

The **DASH (Dietary Approaches to Stop Hypertension)** dietary pattern provides an excellent model. It emphasizes vegetables, fruits, whole grains, legumes, nuts, low-fat dairy products and appropriate protein sources while limiting salt, saturated fat, processed foods and added sugars.

5. Avoid tobacco:

Smoking and other forms of tobacco use accelerate vascular damage and increase cardiovascular risk. Complete cessation is far more beneficial than simply reducing the number of cigarettes smoked.

6. Limit alcohol:

People who consume alcohol should do so within recommended limits, while individuals who do not drink should not start for cardiovascular benefits which is a myth. Complete cessation of any forms alcohol is most beneficial.

7. Improve sleep and manage stress:

Adequate, regular sleep and effective stress-management strategies should become part of hypertension prevention. Relaxation techniques, yoga, meditation, breathing exercises and regular physical activity can be useful. Patients with loud snoring, witnessed apnoeic episodes or excessive daytime sleepiness should be evaluated for obstructive sleep apnoea.

8. Monitor blood pressure regularly:

Blood pressure measurement should become a routine component of adult health care. Home blood-pressure monitoring can be particularly useful for confirming hypertension, detecting masked hypertension and assessing treatment response. Proper technique and a validated device are essential.

9. Take prescribed medication regularly:

When lifestyle modification alone is

insufficient, antihypertensive medication should be taken consistently. Treatment should be individualized according to age, cardiovascular risk, kidney function, diabetes and associated diseases. Patients should not discontinue medication simply because they feel well, without doctors' advice.

A Community Approach

Hypertension cannot be addressed only in the doctor's chamber. It requires a partnership between individuals, families, healthcare professionals, schools, workplaces and communities. Greater awareness of hidden dietary salt, availability of healthier food choices, opportunities for physical activity and routine blood-pressure screening can substantially reduce the population burden.

A particularly important message is that **hypertension is preventable, detectable and treatable**. Small, sustained changes in daily habits can have a large impact on long-term health. Prevention should begin before blood pressure becomes persistently elevated, while early diagnosis and appropriate treatment can prevent complications in those who already have hypertension.

Conclusion

Hypertension is not simply a number recorded on a blood-pressure machine. It is a lifelong cardiovascular risk factor whose consequences accumulate silently over time. Age and heredity cannot be changed, but salt intake, body weight, physical activity, diet, tobacco, alcohol, sleep, stress and treatment adherence can be modified. The most effective strategy is therefore a combination of **healthy lifestyle, regular blood-pressure monitoring, early detection and evidence-based treatment**.

The goal should not merely be to treat high blood pressure after it appears, but to create a culture of prevention. In the fight against hypertension, healthier choices made every day can translate into fewer heart attacks, fewer strokes, healthier kidneys and longer, more productive lives.

❖

DOCTORS ARE SOLDIERS, DOCTORS ARE PRIESTS

Truth is supreme harmony and supreme delight.

All disorder, all suffering is falsehood.

Thus it can be said that illnesses are falsehoods of the body, and consequently doctors are soldiers of the great and noble army fighting in the world for the conquest of Truth.

- The Mother

Risk Factors for Diabetes Mellitus: An Integrated Clinical and Pathophysiological Review

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Abstract. Diabetes mellitus arises from heterogeneous interactions between genetic susceptibility, beta-cell dysfunction, insulin resistance, adiposity, age, reproductive and developmental factors, medications, behavior, and the social environment. Type 2 diabetes mellitus (T2DM) accounts for the largest burden and is best understood as failure of beta-cell compensation in the face of metabolic stress. Visceral and ectopic adiposity, prediabetes, family history, age, physical inactivity, unhealthy dietary patterns, gestational diabetes, polycystic ovary syndrome, sleep disruption, smoking, and selected diabetogenic drugs are major risk determinants. In South Asians, diabetes often develops at younger ages and lower BMI because BMI does not fully capture central adiposity, ectopic fat, lower lean mass, and limited beta-cell reserve. Risk assessment should therefore move beyond simple checklists toward integrated metabolic phenotyping and early prevention.

Keywords: diabetes mellitus; type 2 diabetes; risk factors; obesity; visceral adiposity; prediabetes; South Asians; gestational diabetes; prevention

1. Introduction

Diabetes is one of the most important non-communicable diseases worldwide, and its burden continues to rise. The International Diabetes Federation estimates that hundreds of millions of adults are living with diabetes, while India carries one of the largest national burdens. The ICMR-INDIAB study further demonstrated that diabetes in India exists within a broader epidemic of prediabetes, central obesity, hypertension, and dyslipidaemia.

The phrase "risk factors for diabetes" must, however, be used carefully. Diabetes is not a single disease. Type 1 diabetes is primarily autoimmune; T2DM develops through progressive beta-cell failure in the setting of varying insulin resistance; gestational diabetes mellitus (GDM) appears when pregnancy-related insulin resistance exceeds maternal beta-cell reserve; and pancreatic, endocrine, genetic, or drug-related disorders can produce secondary diabetes. This review therefore emphasizes T2DM while distinguishing other clinically relevant pathways.

2. A Unifying Concept: Beta-Cell Vulnerability Meets Metabolic Stress

T2DM develops when pancreatic beta-cells can no longer secrete enough insulin to compensate for metabolic demand. Insulin resistance may precede overt hyperglycaemia by years. During this phase, compensatory hyperinsulinaemia maintains near-normal glucose levels; diabetes appears when beta-cell compensation becomes inadequate.

This model explains why risk differs substantially between individuals with apparently similar lifestyles. Intrinsic susceptibility includes genetics, family history, ancestry, age, beta-cell reserve, and developmental influences. Acquired metabolic stress includes visceral adiposity, ectopic fat, physical inactivity, poor diet, sleep disruption, certain drugs, and endocrine or pancreatic disease. Risk is therefore the product of susceptibility and exposure rather than a single cause.

3. Major Risk Factors for Type 2 Diabetes

3.1 Adiposity, Fat Distribution and Ectopic Fat

Excess adiposity is the most important modifiable population-level driver of T2DM, but BMI alone is an incomplete measure of metabolic risk. Visceral fat promotes free-fatty-acid flux, inflammation, hepatic insulin resistance, dyslipidaemia, and ectopic lipid deposition. Hepatic fat is particularly important because it is strongly associated with increased hepatic glucose production and impaired insulin action. Waist circumference, recent weight gain, fatty liver, triglyceride/HDL pattern, and body composition can therefore reveal risk not apparent from BMI. Clinically, central and ectopic adiposity are often more informative than body weight alone.

3.2 South Asian Susceptibility

South Asians develop T2DM at younger ages and lower BMI than many populations of European ancestry. At a comparable BMI, they often have more abdominal and hepatic fat and less skeletal-muscle mass. This combination may produce greater insulin resistance and lower metabolic reserve despite an apparently "normal" body size.

For Indian patients, the absence of severe generalized obesity should therefore never be interpreted as protection from diabetes. Central adiposity, family history, fatty liver, low muscle mass, and glycaemic trajectory deserve greater attention.

3.3 Genetics, Family History and Age

T2DM is highly polygenic. Numerous genetic variants influence insulin secretion, beta-cell development, adiposity, and insulin action. In practice, family history is a simple but powerful marker because it reflects both inherited susceptibility and shared environmental exposure.

Ageing further increases risk through declining beta-cell reserve, sarcopenia, visceral fat accumulation, reduced physical activity, and multimorbidity. Yet the increasing frequency of young-onset T2DM shows that severe metabolic exposure can accelerate this process. Young-onset disease is particularly concerning because it implies prolonged lifetime exposure to hyperglycaemia and vascular risk.

3.4 Prediabetes: The Most Immediate Warning State

Prediabetes is not merely "borderline diabetes"; it indicates that the balance between insulin demand and beta-cell capacity is already failing. Risk is highest when glycaemia approaches the diabetic threshold, particularly in the presence of obesity, previous GDM, strong family history, or progressive weight gain.

Prediabetes is also the most important intervention window. Evidence from the Diabetes Prevention Program and the Finnish Diabetes Prevention Study demonstrates that structured lifestyle intervention can reduce progression to T2DM by roughly half or more in high-risk individuals.

3.5 Physical Inactivity, Sedentary Behaviour and Low Muscle Mass

Skeletal muscle is the major site of insulin-mediated glucose disposal. Physical inactivity reduces insulin sensitivity, promotes visceral adiposity, and accelerates loss of lean mass. Sedentary behaviour is not identical to lack of exercise: an individual may complete a brief daily exercise session yet remain metabolically inactive for most of the day.

Preservation of muscle mass and regular muscular activity are therefore central to prevention. This may be particularly important in South Asians, in whom lower lean mass is common.

3.6 Diet, Sleep, Smoking and Psychosocial Factors

Diet influences diabetes risk through energy balance, adiposity, hepatic metabolism, and insulin demand. Risk is associated with sustained excess energy intake, sugar-sweetened

beverages, refined and ultra-processed foods, low fibre intake, and poor overall dietary quality. The most defensible clinical approach is to emphasize a sustainable, minimally processed, fibre-rich dietary pattern rather than blaming a single nutrient.

Short sleep, poor sleep quality, circadian disruption, and shift work are increasingly recognized as metabolic risk factors through effects on sympathetic activity, cortisol, appetite regulation, and insulin sensitivity. Smoking also increases T2DM risk through inflammation, oxidative stress, and adverse fat distribution. Depression, chronic stress, and socioeconomic disadvantage can amplify risk through behavioral, neuroendocrine, and access-to-care pathways.

4. Women-Specific and Life-Course Risk

Pregnancy acts as a natural metabolic stress test. GDM develops when pregnancy-related insulin resistance exceeds maternal beta-cell capacity. A history of GDM identifies women at markedly increased future risk of T2DM and should prompt lifelong surveillance. It also carries intergenerational implications because intrauterine hyperglycaemia may influence future obesity and dysglycaemia in the offspring.

Polycystic ovary syndrome (PCOS), particularly when accompanied by obesity or a family history of diabetes, is another important marker of insulin resistance and future dysglycaemia. Beyond adulthood, birth weight and early-life nutrition may influence later diabetes risk, supporting a life-course model in which metabolic susceptibility begins well before clinical diagnosis.

5. Cardiometabolic Clustering and Secondary Causes

Hypertension, hypertriglyceridaemia, low HDL cholesterol, fatty liver, and central obesity often cluster with insulin resistance. These conditions should not simply be viewed as independent diseases; together they may signal a common metabolic phenotype with increased likelihood of prediabetes or T2DM.

Clinicians must also identify secondary diabetes. Chronic pancreatitis, pancreatic surgery or cancer, haemochromatosis, Cushing syndrome, acromegaly, and post-transplant states are important examples. Sudden hyperglycaemia with weight loss, abdominal symptoms, or an atypical phenotype should prompt reconsideration of conventional T2DM.

6. Diabetogenic Medications

Medication exposure is a frequently overlooked risk factor. Glucocorticoids increase hepatic glucose production and insulin resistance; postprandial hyperglycaemia may develop before fasting abnormalities. Several second-generation antipsychotics can produce substantial weight gain and metabolic deterioration. Selected antiretroviral regimens, thiazide diuretics, calcineurin inhibitors, and other agents may also worsen glycaemia.

Statins are associated with a small increase in diabetes risk in susceptible individuals, but this should not lead to inappropriate discontinuation when cardiovascular benefit is substantial. The appropriate response is risk recognition and metabolic surveillance.

7. Type 1 Diabetes: A Different Risk Architecture

Type 1 diabetes should not be framed as a lifestyle disease. It results predominantly from autoimmune destruction of pancreatic beta-cells in genetically susceptible individuals. HLA-associated genetic susceptibility, family history, and the development of islet autoantibodies are the strongest established predictors.

Persistent multiple islet autoantibodies identify a high probability of progression to clinical disease. Environmental triggers, including viral exposures, continue to be investigated, but current evidence does not justify attributing type 1 diabetes to obesity, diet, or physical inactivity.

8. Practical Clinical Risk Stratification

Clinical feature	Risk implication	Practical response
Prediabetes / rising HbA1c	Very high	Annual or more frequent review; intensive prevention
Central/visceral adiposity, fatty liver	High	Weight and waist reduction; assess metabolic syndrome
Previous GDM / PCOS	High	Lifelong glucose surveillance; address weight and CV risk
Strong family history / South Asian ancestry	Moderate-high	Earlier and lower-threshold screening
Physical inactivity / low muscle mass	Moderate-high	Aerobic + resistance activity; reduce sitting time
Steroids / antipsychotics / selected drugs	Variable-high	Baseline and follow-up glucose monitoring
Atypical hyperglycaemia	Context dependent	Consider pancreatic, endocrine, or autoimmune diabetes

9. Screening and Prevention: Translating Risk Into Action

Risk-factor identification matters only if it changes management. Contemporary recommendations support earlier testing in adults with overweight or obesity plus additional risk factors such as family history, high-risk ancestry, hypertension, adverse lipid profile, PCOS, cardiovascular disease, or physical inactivity; routine age-based screening is also recommended. Individuals with prediabetes require regular reassessment, and women with previous GDM require lifelong periodic screening. Prevention should target the dominant modifiable phenotype: reduction of excess weight and waist circumference, improved diet quality, regular physical activity, preservation of muscle mass, adequate sleep, smoking cessation, and treatment of associated cardiovascular risk factors. In selected high-risk individuals, pharmacological prevention—most notably metformin—may be appropriate. The key principle is early intervention before substantial beta-cell failure becomes irreversible.

10. Conclusion

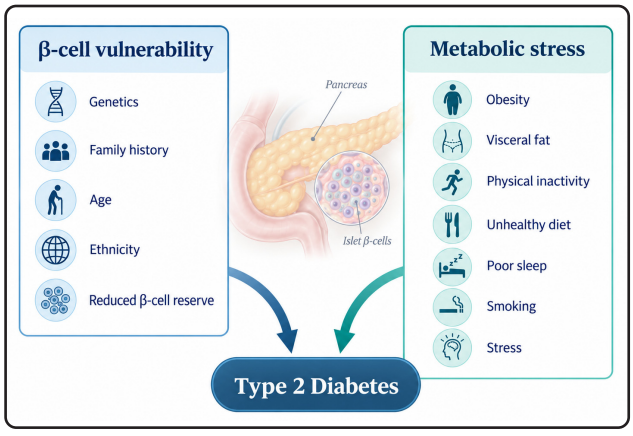
Diabetes risk is best understood as the interaction of beta-cell vulnerability with cumulative metabolic stress. For T2DM, visceral and ectopic adiposity, prediabetes, family history, age, physical inactivity, low muscle mass, unhealthy dietary patterns, GDM, PCOS, sleep disruption, smoking, and diabetogenic medications are among the most clinically important determinants. In South Asians, risk often becomes evident at lower BMI, making central adiposity, body composition, fatty liver, and family history especially important.

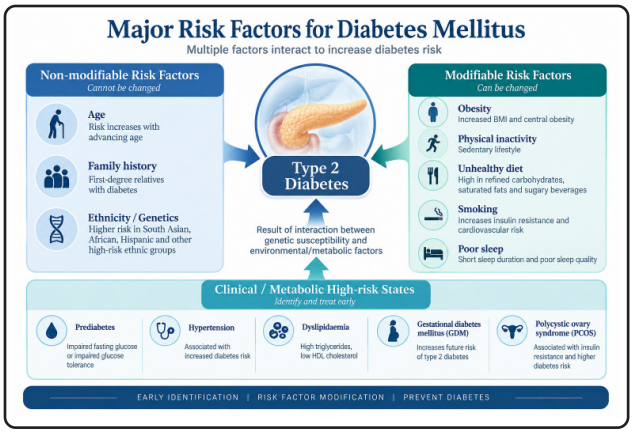
The clinician should therefore move beyond simple risk-factor counting toward integrated metabolic phenotyping. The practical question is not merely whether a patient "has a risk factor," but how much beta-cell vulnerability, insulin resistance, and cumulative metabolic stress are present—and which components can still be modified. That approach provides the most rational basis for earlier detection and prevention.

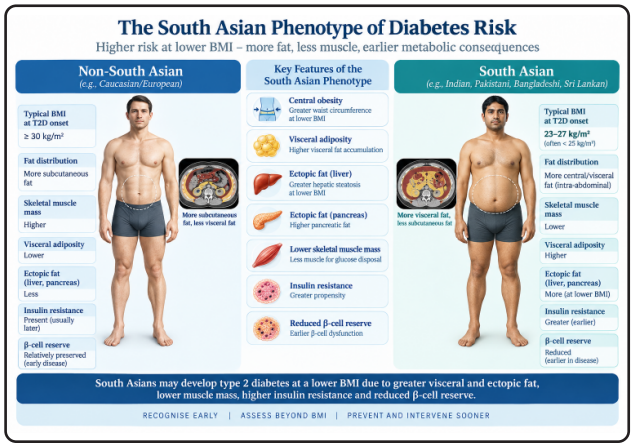
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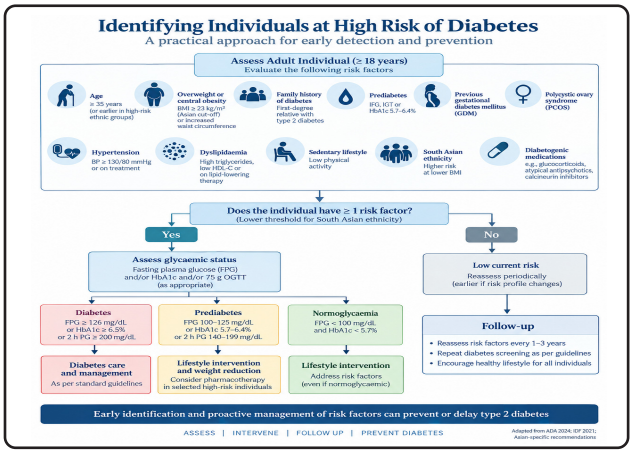
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Understanding the Children's Changing Minds: Mental Health Across Age Groups

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Childhood is a journey of rapid brain development and shifting social worlds. As children grow, the psychological challenges they face change drastically. What causes an emotional breakdown in a 6-year-old is completely different from what triggers an anxiety attack in a 16-year-old.

According to global data from the World Health Organization (WHO), 1 in 7 adolescents experiences a mental health condition

To protect young minds, we must understand the specific psychological issues and emotional hurdles unique to each stage of childhood.

1. Early Childhood (Ages 3 to 6 Years)

At this stage, children are moving from the total safety of home into their first structured social environments, like preschool.

[Family Comfort] ————————>

[New School World]

(Separation Anxiety Trigger)

Major emotional challenges

1. Separation Anxiety: Intense fear of being away from parents, making morning school drop-offs a battle of tears and tantrums.

2. Emotional Regulation Difficulties: Brains at this age are still learning to control big emotions. This can lead to severe temper tantrums, biting, or hitting when frustrated.

3. Phobias and Night Terrors: Active imaginations can twist everyday things into massive fears, such as a fear of the dark, monsters, or loud school bells.

Warning signs to watch for

· Frequent, uncontrollable tantrums.

· Refusing to eat or sleep unless a parent is physically holding them.

· Regression in milestones, such as sudden bedwetting after being fully toilet-trained.

2. Middle Childhood (Ages 7 to 11 Years)

During these primary school years, a child's focus shifts from family to peers. They begin to compare themselves to their classmates, both academically and socially.

Major emotional challenges

1. Performance and Exam anxiety: Children begin to tie their self-worth to grades, leading to a deep fear of failure and letting their parents down.

2. School refusal: Driven by a fear of being judged, bullied, or failing, some children experience severe anxiety that shows up as mysterious stomach aches or headaches every school morning.

3. Peer rejection and Bullying: Being left out during recess or teased by classmates can trigger early symptoms of depression and low self-esteem.

4. Unmasked ADHD: As schoolwork gets harder, children who struggle with attention difficulties or hyperactivity face constant reprimands, making them feel "stupid" or "bad."

Warning signs to watch for

· Frequent somatic complaints (headaches, stomach aches) with no medical cause.

· A sudden, sharp drop in school grades or a total refusal to participate in class.

· Withdrawing from friends and preferring to sit alone.

3. Early Adolescence (Ages 12 to 14 Years)

This is a period of massive hormonal changes and the transition to middle or high school. The brain goes through a major rewiring phase,

Major Emotional Challenges

1. Smartphone overuse: Unregulated screen time exposes young teens to toxic social comparison and cyberbullying. The constant need for online validation deeply disrupts their sleep patterns and spikes anxiety.

2. Body image distortion: Rapid physical changes can lead to intense self-consciousness, self-doubt, or early signs of eating disorders.

3. Mood disturbance: Hormonal surges can cause intense mood swings, making them switch from high energy to deep irritability within hours.

Warning signs to watch for

· Staying up late scrolling on phones, leading to daytime exhaustion and chronic irritability.

· Drastic changes in eating habits or obsessing over body weight in front of the mirror.

· Extreme sensitivity to criticism or total isolation from the family unit.

4. Late Adolescence (Ages 15 to 18 Years)

Older teenagers face the heavy pressure of impending adulthood, high-stakes board or entrance exams, and complex social relationships.

Major emotional challenges

1. Clinical Depression: In older teens, depression looks closer to adult depression—persistent sadness, feelings of hopelessness, and a lack of energy to do things they used to love.

2. Academic burnout and exam stress: The immense pressure to secure college admissions can lead to chronic fatigue, panic attacks, and a sense of complete helplessness.

3. Maladaptive coping: To escape emotional pain or fit in, some teens turn to vaping, substance use, or self-harming behaviors.

Warning signs to watch for

· Giving away favorite possessions, expressing a sense of worthlessness, or talking about wanting to disappear.

· Signs of self-injury, such as wearing long sleeves in hot weather to hide cuts or burns.

· A complete change in behaviour, switching peer groups, or getting caught using substances.

How We Can Help: Action Plan

Mental health issues do not go away on their own. We need to act early.

1. At Home (For Parents)

· **Put phones away:** Have rules where no one uses gadgets during dinner or one hour before bedtime.

· **Praise the effort, not the score:** Say, *"I am proud of how hard you studied,"* instead of, *"Why didn't you get an A?"*

· **Listen more, lecture less:** Let your child talk about their fears without interrupting or judging them.

Avoid saying, *"It's no big deal."* Instead, say, *"I can see you are feeling overwhelmed, and I am here to help you."*

2. At School (For Teachers)

· **Reduce exam fear:** Teach students that exams are just a test of knowledge, not a test of their life.

· **Watch the quiet children:** Pay attention to the students who withdraw, not just the ones who cause trouble.

· **Teach simple calming tricks:** Use these quick exercises in class to lower stress:

Name of Exercise	How to Do It
Balloon Breathing	Breathe in slowly to fill your belly like a balloon, then let the air out slowly.

5-Senses Check: Look around your current surroundings to break the cycle of anxious thoughts. Name aloud **5 things you can see, 4 things you can physically touch, 3 distinct sounds you can hear, 2 scents you can smell,** and **1 taste you can experience**.

No matter the age of the child, the path to healing relies on early action, open communication, and structured routines. **Seek Professional Help** if a child's behavioral changes last more than two weeks and disrupt their daily life. Do not hesitate to consult a Psychiatrist or other mental health professional.

Conclusion

Psychological issues among school children are real and require urgent attention. Mental health must be prioritized alongside physical health, as both are essential for holistic development of a child. By recognizing early warning signs, addressing underlying causes, and providing timely interventions, schools and families can create a supportive ecosystem for optimal development of children.

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If the body is considered as the tabernacle of the Lord, then medical science, for example, becomes the initiatory ritual for the temple service and doctors of all categories are priests officiating in the different rituals of worship. Thus medicine is truly a priesthood and should be treated as such.

- The Mother

Causes of Common Gynaecological diseases

Emeritus Prof. (Mrs) S.N. Tripathy

Om

Aa no bhadraah kratavo yantu vishvatah. Let noble thoughts come to us from every side. Rigved,1-89-i

The true voyage of discovery is not seeing new lands, but in seeing with new eye.

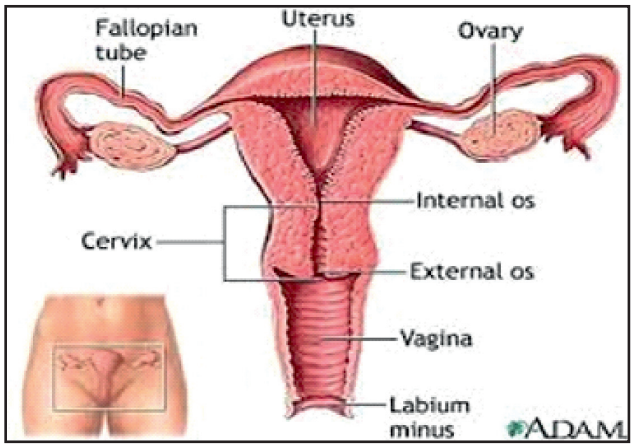
Murel Prost.

Disease is the term broadly used to any condition that hampers the functioning of the body. If it affects the gynecological organs, it is known as gynecological diseases. Causes of Gynecological diseases are as many as the gynecological organs and the nearby organs like bladder, rectum and anal canal.

We take about roughly 3 years to teach in detail to our undergraduate students and 3 years to post graduates.

The Genital Organs consists of, Uterus, Ovaries, Fallopian Tubes, Cervix, Vagina, Vulva along with the surrounding structures like bladder, urethra and rectum and anal canal which sometimes get involved.

When Shyama rang me up to write an article for the forth coming Annual Conference of the Sri Aurobindo Medical Association on the Theme "GENESIS OF ILLHEALTH AND DISEASE" The name of the topic I was supposed to write: 'Causes of common gynecological disorders' ,, I spontaneously told yes. Such a common subject, they are well known, At night I thought about the subject. When I got up in the morning, I realized, Shyama has not told me to write an article , she has told me to write a book "On Causes of Common diseases of Gynecology.' It is so vast a subject which in the beginning I was thinking small and common.



Women face many gynaecological problems from menarche to menopause.

The common gynaecological disorders involves all the gynaecological organs and the surrounding organs from childhood to post menopausal Age.' From Womb to Tomb.

They are-

Uterus - Fibroids, Adenomyosis. Endometrial carcinoma.

Ovary-Benign Tumors, Poly Cystic Ovarian Syndrome(PCOS), Malignant Ovarian Tumours.

Fallopian Tubes- Infections and carcinoma.

Cervix- Benign leisons and cervical Carcinoma.

Vaginal Diseases, Vulval diseases- organic and infections

Mixed -Chronic Pelvic Pain(CPP), Peri Menopausal Problems, Dysmenorrhoea

Infectious diseases- Sexually Transmitted Disease(STD), Pelvic Inflammatory Disease(PID), Genital Tuberculosis

Menopausal women-

Midlife syndrome, post menopausal syndrome which involves all organs of the body

Metabolic diseases accompany gynaecological diseases at this period of life. Carcinoma of all the genital organs are common in this period of women's life.

The other diseases are Uro gynaecology, Pelvic organ prolapse, Urinary incontinence like stress incontinence , urge incontinence, overactive bladder etc.

The age old causes we know, but new causes are peeping up as science is advancing in tremendous speed in genetics, in environmental conditions, in life style changes etc. They have profound effects in causing gynaecological diseases so also we are discovering new horizons like cancer cervix is due to a virus infection. With challenges in understanding the multi factorial aetiologies of disease and individual treatment effect , over the past four decades, much has been known on how physical, chemical and social environments affect human health, so also the gynaecological disorders. predisposing certain subpopulations to adverse health outcomes.. All gynaecological diseases occur broadly from the following causes.

Hormonal imbalances-

PCOS, Menstrual disorders - Abnormal Uterine Bleeding(AUB), Menorrhagia, Secondary Amenorrhea, etc

Hormonal Imbalance and Tissue growth.

Endometriosis, Fibroid.

Infections,

Pelvic inflammatory diseases (PID), Cervicitis, Vaginitis, Genital

Tuberculosis etc

Genes and epigenetics.

Genes and epigenetics play an important role in gynaecological diseases. Epigenetics is the study of how behaviours and environment can cause changes that affect the way the genes work. Unlike genetic changes, epigenetic changes are reversible and do not change the DNA sequence, but they can change how the body reads a DNA sequence. Epigenetic changes affect gene expression to turn genes "on" and "off." Environment and behaviours, such as diet and exercise, can result in epigenetic changes, The environmental influence on gene expression includes physical, chemical, physicochemical and recently social environment. However, we have not come to a definite conclusion whether spirituality affects the gene or not, Research is in progress.

Obesity.

'Imprisoned in every fat man, a thin one is wildly signalling to be let out.'
- Cyril Connolly

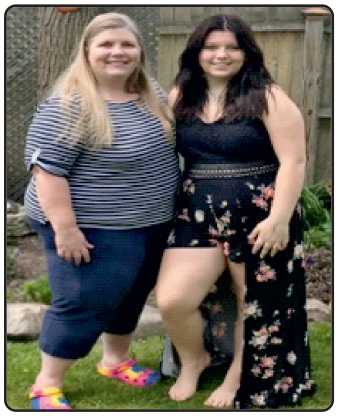
Obesity is defined as a body mass index (BMI) equal to or greater than the 95th percentile for age and gender. Obesity today is officially an epidemic; it is arguably the most pressing, public health problem we face. Worldwide obesity has nearly tripled since 1975 . Urban women were more obese than rural women in India, and that too in post menopausal age. Women face obesity from their childhood to death more so, in adolescence, after child birth ie postpartum period, in midlife and menopause. Though the causative factors are different in the three phases of a woman's life, the basic management is the same apart from the different specific measures adopted in the three phases.

Rising obesity rates around the world have had a profound impact on female reproductive health. Childhood obesity is associated with early onset of puberty, menstrual irregularities during adolescence and polycystic ovary syndrome. Women of reproductive age with high BMIs have a higher risk of ovulatory problems

and tend to respond poorly to fertility treatment. Strategies for fertility control can also be complex since the efficacy and safety of hormonal contraceptives can be compromised by increased body weight. Obesity can aggravate symptoms of pelvic organ prolapse, stress urinary incontinence and increase the risk of endometrial polyps and symptomatic fibroids. Weight reduction enhances reproductive outcomes, diminishes symptoms of urinary incontinence and reduces morbidity following gynaecological surgery. Sustained and substantial weight loss is difficult to achieve with the lifestyle and dietary measures that are currently available along with a number of pharmacological treatment options. There are emerging data on reproductive outcomes following surgical treatment for obesity.



Middle age Obesity.



Adolescent Obesity.

Life Style Changes

Any new life styles solves the old problems, but new problems crop up. Women's emancipation has resulted in many gynaecological disorders like infertility, scar endometriosis etc.as a result of aspirations for better carrier leading to late marriage, delayed child bearing, Stress and, over worked.



Environmental pollutions.

Environmental pollution is another big problem for gynecological diseases. They are, ambient air pollution, hidden toxins in water and the soil, naturally occurring disasters like volcanic events, Earth quakes, tsunamis having devastating effects on ecosystem and environment. , Progressive increase in urbanization and industrializations, Atmospheric Air Pollutants like Particulate materials , PM 10, PM2.5, Nitrogen dioxide(NO2) and ozone O3. It affects the entire reproductive cycle of a woman from menarche, pregnancy, midlife and menopause. It also causes respiratory, metabolic and endocrine disorders.

Volatile Agricultural pollutants like Pesticides, herbicides, and fertilizers. disrupt the Hypothalamic Pituitary Ovarian(HPO) axis, leading to early menarche and fertility problems.

Persistent organic pollutants. (POPS) are 'forever pollutants.' They are resistant to degradation and cause immune suppression, reproductive dysfunctions, developmental toxicity and cancer. They all have disastrous Impact across the total life Span of a woman.

Menarche- Precocious Puberty, early menarche and irregular cycles, life time risk of breast cancer and metabolic diseases.

Adolescence- Hormonal deregulations, disrupts folliculo-genesis, immune system maturations and endocrine balance.

Midlife- Leads to the development Systemic diseases like cardiovascular, thyroid and cancer in different systems.

Menopause= Intensify menopausal symptoms, osteoporosis and cardiovascular diseases. Environmental pollution has become

an worldwide problem so also in India its impact on human health is harmful. Epigenetic changes, endocrine dysfunction, oxidative stress, DNA mutations are the harmful effects. Research should be done to avoid this catastrophe in each country of the world. Society and the health care personnel must evolve in maturity to handle these new age crises.

The gynaecological diseases faced can be classified according to the different phases of the life cycle of a woman.

Diseases

Adolescents-

Precocious puberty, Virilising, Amenorrhoea, both primary and secondary, Hirsutism, congenital malformations, Intersex, PCOS

Adult women,

PCOS, Infertility, Chronic pelvic pain, vaginitis etc,

Premenopausal- Fibroid, Adenomyosis Endometriosis, Cancer cervix,

Menopausal and Post menopausal-, Menopausal syndrome, Urinary tract infection, senile vaginitis

Our duty is to know the cause , it becomes easier to help. them and help the woman from pain in CPP, endometriosis, dysmenorrhea, fulfil the desire to help them to get a child and eliminate most of the cancer, for that to diagnose the cases from very beginning. Cause known, elimination of cause known and unknown becomes easier. Treat with whatever best treatment is available at that point of time. .

Some Gynaecological Disorders and their etio- pathology

'We should learn from the past and research the present to predict the future, '

Hippocrates,

PCOS-

Previous names Stien Leventhal, Hyperandrogenism. PCOS. Now organizations are working hard to change the name again to PMOS, (Polyendocrine metabolic ovarian syndrome.). The main criteria are oligo ovulation. Hyperandrogenism, Polycystic ovaries having follicles from 15 to 20 in some cases.

Insulin resistance is considered as the main causative factor which results in hyperandogenism, dysovulation and resultant polycystic ovarian pattern almost all the organs are affected. Adolescent PCOS have any two criteria, in adult woman we now include AMH estimation.

Arrests of follicular development results in poly cystic ovaries. They are atretic follicles due to prolonged dysovulation. In reproductory front there are ovulatory disturbances, irregular menstruation, infertility, pregnancy complications, endometrial carcinoma, they have dermatological symptoms like acne, alopecia, hirsutism .

There are many metabolic defects too, like obesity, dyslipidemia, type II diabetes, hypertension , cardiovascular disease and sleep apnea. It has a genetic factor which is inherited from the father. All this results in psychological, depression, anxiety, poor quality of life, eating disorders . Though we know that PCOS is an endocrine and metabolic syndrome (MS) with a complex ethology, yet its pathogenesis is not clear.

In recent years, the gut microbiota is a potential pathogenetic factor in the development of PCOS. The correlation between gut microbiota (GM) and metabolic disease has become a hot topic in research, leading to a number of new ideas about the etiologic and pathological mechanisms of PCOS. The literature shows that GM can cause insulin resistance, hyperandrogenism, chronic inflammation and metabolic syndrome (obesity, diabetes) and may contribute to the development of PCOS by

influencing energy absorption, the pathways of short chain fatty acids (SCFA), lipopolysaccharides, choline and bile acids, intestinal permeability and the brain–gut axis. As part of the treatment of PCOS, fecal microbiota transplantation, supplementation with prebiotics and traditional Chinese medicine can be used to regulate GM and treat the disorders.

Over all it has multisystem health impacts and represent a growing health and economic burden to the country. Weight and BMI are more in these cases. Few countries of the world and our organization FOGSI is trying hard to change the name to PMOS. My opinion

'What is in a name, A rose is a Rose.' The disorder is multifactorial.

Endometriosis

As we discuss Endometriosis, the known causes are, Retrograde menstruation (Sampson's theory), Hematogenous or lymphatic spread, Coelomic metaplasia, Iatrogenic dissemination. Endometriosis has been found in cesarean section scar, Immunologic defects, Genetic predisposition and Stem Cells Plasticity. It is a polygenic, multi-factorial disease.

Now the latest fact is Fusobacterium infection facilitates the development of endometriosis through the phenotypic transition of endometrial fibroblasts activated transforming growth factor-â (TGF-â) signalling resulting from Fusobacterium infection of endometrial cells led to the transition from quiescent fibroblasts to transgelin (TAGLN)-positive myofibroblasts, which gained the ability to proliferate, adhere, and migrate in vitro.

Dysmenorrhea –

Dysmenorrhea is of two types, Primary and secondary. Primary dysmenorrhea is due to natural uterine contractions and high chemical levels. The causes are prostaglandins and leukotrienes. High levels of prostaglandin contract the muscles strongly and reduces the blood flow to the muscles and causing pain, leukotriene works along with prostaglandin and increase uterine cramps. The other risk factors are early age of menarche, menorrhagia, stress and smoking.

Causes of secondary dysmenorrhea are Pelvic Adhesions, Serositis, Functional or neoplastic ovarian cyst, Pelvic inflammatory Disease, Uterine malformation etc.

Cervical cancer

Cervical cancer is one of the most common malignancies in women. Our understanding of cancer cervix has made a somersault. Almost all cases of cervical cancer can be linked to a persistent infection with carcinogenic HPV virus transmitted via sexual contact. The majority of HPV infections regress spontaneously. More than 100 different genotypes have been identified. The most prevalent genotypes are HPV 16, 18, 31 and 45. Other carcinogenic genotypes are HPV 31, 33, 35, 39, 51, 52, 56, 58, and 59, plus the potentially carcinogenic genotype 68. Cofactors increasing the risk of development of cancer include smoking, long-term use of hormonal contraceptives, multiparty, multiple sexual partners and human immunodeficiency virus (HIV) infection. Use of OC Pills and smoking as risk factors, there are many explanations how they are responsible. Cancer cervix takes a long time to manifest itself as a dangerous cancer. The four major steps in the development of cervical cancer are as follows: infection of the metaplastic epithelium at the cervical transformation zone, persistent HPV infection, progression of persistently infected epithelium to cervical pre cancer, and invasion through the basement membrane of the epithelium. Creating cancer consciousness by propagandas and proper health Education. Motivate for screening, Cervical cancer vaccines protect against

infection with human papillomavirus types which most commonly leads to cancer. These vaccines can only work to prevent HPV infection. They cannot treat an HPV infection on the cervix which is already present. That is why cervical cancer vaccines should be given before a woman is exposed to HPV or before the onset of sexual activity. It is also important to know that no vaccine can provide complete protection against all cancer-causing HPV virus. So even after vaccination, routine PAP Test Is important. The Vaccinations of Adolescent girls from 12 to 14 years, and the awareness about the disease is in full swing both in private and Government organisations. The Indian vaccine Cerva vac is going to be a game changer to bring down the incidence of cervical cancer because of its much lower cost. Two doses spaced at 6 months are enough in 9-14 years age group whereas three dose regimen (0, 1-2, 6 months) are recommended in age group 15-26 years" Artificial Intelligence (AI) is a great help in prevention and detection of cervical cancer.

Chronic Pelvic Pain-(CPP)

Persistent discomfort in the pelvis for more than 6 months is known as Chronic pelvic pain. It is a very frustrating symptom as well as a disease. The cases encompass the disease of the whole abdomen, the reproductive organs and the diseases of the surrounding organs, Gynaecological conditions include PID, Endometriosis, adenomyosis, scar adhesions, fibroid, cervical stenosis with hematometra, malignant gynaecological diseases, dysmenorrhoea, and ovulation pain. The urological conditions are painful bladder syndrome, chronic urinary tract infection, malignancy of urological system. Gastrointestinal causes are irritable bowel syndrome, chronic constipation, malignant conditions of the small intestine and psychological disorder. The most common cause is endometriosis.

Infertility

Infertility results from the following female related causes. Ovulatory dysfunction like PCOS'. Uterine factors consist of Malformation of Uterus, Uterine fibroid, uterine polyps, Tuberculosis Endometritis etc. Fallopian tubal block by various infections causes infertility (PID), and endometriosis. If there is defect in the HPO axis infertility may result Life style changes and environment also help in causing infertility like age more than 35 years, obesity, substance abuse and exposure to toxins. If all the genital organs are healthy and she is infertile we call it unexplained infertility and there we have to search for immunological disorder ie search for defects in T1, T2, T helper cells, NK cells etc.

Pelvic organ prolapse:

This happens when the muscles and tissues supporting the pelvic organs become weak or loose so that the uterus, bladder and rectum come out of vagina. Causes are, due to attenuation of the supportive structures by tears or breaks or by both.

The acquired causes are, pregnancy and childbirth, menopause, under nutrition, following surgery, increased abdominal pressure by chronic cough, chronic constipation and prolonged weight lifting., dragging of the uterus may be done by cervical fibroid, then comes nulliparous prolapse, it may be congenital or in menopause. If I will go on writing about the causes of all the gynaecological disorders really it will become a book, so I stop here.

Conclusion-

The gynaecological diseases are there as before which I was talking way back in seventies. But they are named, renamed and again named like PCOS, now PMOS. The most important thing is now we know what causes these diseases and in treatment front we have excelled so to say, but the diseases are still

there, not eliminated, new causes are cropping up along with new treatments. To eliminate few and better management in others. A disease known is half cured.

'Knowledge is a treasure; Practice is key to it.' Prevention is better than cure. Many of the gynaecological diseases can be prevented if we are careful. But must consult a gynaecologist.

Present day Santha Balia Baba advises – 'Take Tulasi, pray to the Lord but show to a doctor. To which ever branch the disease belongs'.

The Mother and Sri Aurobindo have put great stress in Integral Healing and the ultimate opinion is, God Heals, to reach Him is by Yoga and spirituality.

Health is the only wealth and the cause of our Happiness.

Jai Jagnnath.

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All disease is a means towards some new joy of health, all evil & pain a tuning of Nature for some more intense bliss &good, all death an opening on widest immortality.Why and how this should be so, is God's secret which only the soul purified of egoism can penetrate.

(Essays Divine and Human- 438) ***- Sri Aurobindo***

Identifying Major Causes of Ill-health in Pregnant Mothers and Newborn in the Country

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A healthy mother gives her baby the best possible start in life. The encouraging part is that most serious problems in pregnancy and a baby's first month can be prevented, or caught early enough to treat safely — through early registration, regular check-ups, good food, medicines as advised, delivery at a health facility, breastfeeding, and quick action when danger signs appear.

Why Pregnant Mothers Become Ill

- **Anaemia —** is one of the most common problems in pregnancy. It can leave a woman feeling tired, dizzy, breathless, or weak, and looking pale. It's usually the result of poor diet, skipping iron and folic acid tablets, worm infestation, malaria in affected areas, having many pregnancies, pregnancies spaced too close together, or being pregnant very young — heavy bleeding during menstrual cycles can bring it on too.
- **High blood pressure —** is another condition worth watching closely, and it doesn't always announce itself early. That's exactly why blood pressure is checked at every antenatal visit: catching it before it turns into severe headache, blurred vision, swelling of the face or hands, pain in the upper abdomen, or fits, is what keeps it from becoming an emergency.
- **Bleeding and infection — bleeding**, whenever it happens during pregnancy, delivery, or afterward, can turn dangerous very quickly and always deserves urgent attention. Infection is another risk to watch for, often showing up as fever, a burning feeling when urinating, pain low in the belly, foul-smelling discharge, or fluid leaking before labour begins.
- **Existing health conditions —** can raise the risk further, including severe vomiting, poor nutrition, diabetes, heart disease, TB, HIV, thyroid problems, and epilepsy. If any of these apply, it's worth mentioning to a health worker early, so extra care can be planned around them.
- **Life circumstances —** matter just as much as physical health. Early marriage, being pregnant very young, heavy physical work, tobacco or alcohol use, domestic violence, poverty, weak family support, and no easy way to reach a hospital can all raise the risk of illness. These aren't always easy things to talk about but sharing them openly with a health worker or health facility means better, more tailored care.

Danger Signs During Pregnancy

Go to a health facility immediately if she has:

- Bleeding from the vagina, at any time
- Fits, unconsciousness, or abnormal behaviour
- Severe headache, blurred vision, or swelling of face and hands
- Severe abdominal pain
- Fever, chills, or foul-smelling vaginal discharge

- Severe weakness, paleness, fainting, or breathlessness
- Repeated vomiting and inability to eat or drink
- Water leaking from the vagina before labour begins
- Baby moving less than usual, or not at all
- Labour pain before nine completed months
- Labour pain that goes on a long time without delivery

Don't wait until the next day. Arrange transport and go to the nearest public health facility right away.

Why Newborn Babies Become Ill

A baby's first 28 days are a delicate time — a newborn can go from well to seriously ill very quickly, which is why this period deserves extra watchfulness. Babies born early, weighing under 2.5 kg, born as twins, or who struggled to breathe at birth need especially close care.

– **Common causes —** newborn illness can come from several directions: being born too early or too small, infection, cold, poor feeding, jaundice, diarrhoea, pneumonia, or a birth defect.

– **Infection —** in particular tends to take hold when delivery practices aren't clean, the umbilical cord isn't kept clean and dry, or treatment is delayed.

– **Cold —** the good news is that much of this can be prevented with simple care. A baby who's left uncovered, bathed too soon, or kept apart from the mother can get cold quickly — so keep the baby warm with skin-to-skin contact on the mother's chest, both of you covered well, and hold off on bathing for at least 24 hours.

– **Feeding —** matters just as much. Breastfeeding should begin within the first hour of life, and for the first six months, breastmilk alone is all a baby needs — no honey, water, gripe water, animal milk, or anything else beforehand. These can introduce infection and get in the way of the baby learning to breastfeed well.

Danger Signs in a Newborn

A newborn can't say something is wrong. Get the baby to a facility urgently if the baby:

- Is not feeding, or sucking poorly
- Is very sleepy, weak, limp, or hard to wakei% Has fast or difficult breathing
- Has chest indrawing while breathing
- Feels hot or cold to the touch
- Has fits or abnormal movements
- Has repeated vomiting
- Has loose stools with blood
- Has yellow palms or soles
- Has redness, swelling, pus, or foul smell around the cord
- Has many pus-filled spots on the skin
- Is passing very little urine, or seems unusually unwell

Never rely on home remedies. Keep the baby warm and go to the nearest public health facility without delay.

Keeping Mother and Baby Safe

– **Antenatal care —** register the pregnancy as early as possible. From there, regular check-ups — blood pressure, blood and urine tests, weight, and anything else advised — become the routine that catches problems before they grow.

– **KMC —** Kangaroo care is a method of holding your baby to your chest. Your baby wears only a diaper and possibly a hat and socks to help stay warm. They rest against your bare chest, allowing for skin-to-skin contact.

This type of touch is a special experience that doesn't help you and your baby bond, but has medical benefits for the baby like stabilizing your baby's heart rate, improving your baby's breathing, lowering your baby's risk of hypothermia and serious infections.

- **Daily care —** Iron-folic acid and Calcium tablets, a balanced diet, safe drinking water, enough rest, and a mosquito net in malaria-prone areas all support a healthy pregnancy.
- **Plan ahead —** it helps enormously to plan ahead of the due date: know which health facility you'll deliver at, arrange transport in advance, keep emergency numbers close by, set aside money for travel, and decide who will accompany the mother. When an emergency arrives, there's no time to work these things out.
- **After delivery —** care doesn't stop at delivery. In the days after, watch the mother for heavy bleeding, fever, severe pain, headache, breathlessness, or sadness and behaviour that seems unusual. Watch the baby too — how they're feeding, whether they're warm enough, how they're breathing, the condition of the cord, and their urine, stool, and weight gain.

Listen carefully, watch for danger signs, and seek help early. Quick action protects both mother and baby.

Quick Facts to Remember

As soon as possible
Start breastfeeding KMC

28 days
A newborn's most delicate period
Alert for warning signs

9 months + 6 weeks
Pregnancy and postpartum period
Be watchful throughout.

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Medical Science has been more a curse to mankind thana blessing. It has broken the force of epidemics and unveiled amarvellous surgery; but, also, it has weakened the natural healthof man and multiplied individual diseases; it has implanted fearand dependence in the mind and body; it has taught our healthto repose not on natural soundness but a rickety & distastefulcrutch compact from the mineral and vegetable kingdoms.

(Essays Divine and Human- 475) ***- Sri Aurobindo***

Important Risk Factors for Cardiac Problems

Dr. Dipak Ranjan Das
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Heart disease remains the leading cause of death worldwide, yet many of its risk factors are preventable or manageable. Understanding these risks empowers everyone—whether one works in healthcare or not—to take meaningful steps toward protecting heart health.

Modifiable Risk Factors: What You Can Change

The most important risk factors for heart disease, which have been proven by scientific studies conducted across all continents involving all ethnic populations in more than 100 different countries are being discussed herewith. These lifestyle choices directly influence your cardiovascular health and are within your control.

High blood pressure (hypertension) affects nearly half of all adults and often shows no symptoms until damage occurs. The common misconception that symptoms like headache or heaviness of head or breathlessness may precede the detection of high blood pressure needs to be seriously discarded by all. The proportion of such findings vary from 10 to 15% in all community based studies. Once a person is diagnosed, regular monitoring, adherence to medical advice and lifestyle changes can keep blood pressure in a healthy range.

High cholesterol leads to plaque buildup in arteries, narrowing blood vessels and increasing the risk of heart attack and stroke. A diet low in saturated fats and regular exercise help maintain healthy cholesterol levels. All individuals above the age of thirty should have at least get their Lipid profile tested once annually to ensure this. Consulting your doctor for abnormal lipid profile reports will help relieve the unnecessary anxiety over a completely treatable condition.

Smoking damages blood vessel walls, reduces oxygen in the blood, and dramatically increases heart disease risk. Quitting smoking is one of the most powerful steps you can take for heart health. If a person is unable to quit despite multiple attempts, he/she should not hesitate to take a professional counsellor's help.

Diabetes and high blood sugar damage blood vessels over time, making heart complications more likely. Managing blood glucose through diet, exercise, and medication when needed is essential. The complacency of not monitoring the blood sugar regularly can lead to cardiac complications, even if one takes tablets daily.

Obesity and excess weight strain the heart and contribute to other risk factors like high blood pressure and diabetes. Even modest weight loss can significantly reduce cardiac risk. Crash weight reduction courses offered by self-styled nutritionists can be harmful. A proper medical advice is always beneficial.

Physical inactivity weakens the heart muscle and contributes to weight gain, high blood pressure, and poor cholesterol levels. Aim for at least 30 minutes of moderate intensity aerobic physical activity daily or 150 minutes of activity weekly as recommended by all international guidelines at present.

Unhealthy diet high in salt, sugar, and saturated fats/ trans-fat promotes inflammation, weight gain, and metabolic problems. Emphasize fruits, vegetables, whole grains, and lean proteins.

Excessive alcohol consumption raises blood pressure and contributes to weight gain and heart muscle damage.

Non-Modifiable Risk Factors: What You Cannot Change

Some risk factors cannot be altered but deserve awareness. **Age** increases risk, with cardiovascular disease mainly affecting people over 50. But Indians tend to develop cardiac problems one decade earlier than their western counterparts. So a heightened awareness is needed in our population above the age of 40 years. **Family history** of early heart disease (before age 55 in men or 65 in women) indicates genetic susceptibility. **Sex** matters—men face higher risk earlier in life, though women's risk increases after menopause and almost equalises with men by the age of 50 yrs in our population.. **Ethnicity** also plays a role, with South Asian, Black African, and African Caribbean backgrounds carrying higher risk.

The Role of Stress and Mental Health

Psychosocial factors including chronic stress, depression, anxiety, and social isolation independently increase cardiac risk. Managing stress through healthy coping strategies is an important part of heart disease prevention.

Spiritual Discipline and Heart Health

Beyond medical and lifestyle factors, spiritual discipline offers profound benefits for cardiovascular wellness. Regular practices such as meditation, prayer, mindful breathing, or contemplative reflection activate the body's relaxation response, lowering stress hormones like cortisol and adrenaline that damage blood vessels over time. These practices foster emotional resilience, reduce anxiety, improve sleep quality, and promote a sense of purpose—all factors that indirectly protect the heart. Many spiritual traditions also encourage community connection, compassionate living, and moderation in habits, creating a holistic environment for heart health. While spiritual discipline complements rather than replaces medical care, it addresses the often-overlooked mind-body-spirit connection essential for true wellness

Taking charge of modifiable risk factors while accepting what cannot be changed, and nurturing spiritual well-being, creates a comprehensive approach to preventing cardiac problems and living a longer, healthier life.

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In 1919 Sri Aurobindo wrote that the chaos and the calamities were perhaps the pangs of the birth of a new creation. How long is this going to continue? In the Ashram, in India and eventually in the world?

It will continue until the world is ready and willing to receive the new creation; the consciousness of this new creation is already at work upon earth since the beginning of this year. If instead of resisting, people were collaborating, it would be quicker.

But stupidity and ignorance are very obstinate!

29 November 1969 ***- The Mother***

Sri Aurobindo Medical Association (SAMA) : A Platform for Integration of The Different Systems of Healing

Dr. Alekha Chandra Sahu, MS
Bhubaneswar

With the blessings of The Mother this year the SAMA conference has a topic of views of different systems of Healing in one forum. As far as I recollect the integration of the different systems of healing was initiated in 1976 (50 years from the current year) at SCB Medical College lecture theatre-II.

There was a weekly study circle in a room on the top of the T-shaped building where Dr. Ashok Das, Dr. Braja Kishore Khandai, Dr. Pratap Rath, Dr.Sudhir Brahma, Dr. Shyama Kanungo, Dr. Salila Pattnayak, Dr. Reba Kanungo, Dr. Bijayeeni Mohapatra (who was an instrument of The Mother to initiate me to this circle), Dr. Biranchi Narayan Mohapatra, Dr. Gayatri Satapathy, Dr. Madan Mohan Pradhan, Dr. Archana Modi, Dr.Nalini Pati, Dr. Kishore Chandra Mohapatra and few students of his batch, Bijay Kumar Sahoo, Tophan Pati, myself, Subhra Apa (staff sister) and few others participated on each Sunday morning (7 am to 8 am). Probably some of this few could get inspiration and aspired to organize such a meeting.

Professor Madhusudan Khadanga, the then Principal, SCB Medical College accepted our invitation to preside over the meeting. The eminent speakers invited from the different disciplines were Prof. Akulananda Sarangi, Prof. of Medicine, SCB Medical College for Allopathy; Prof. Rakshit, Principal of Dr. Abhinna Chandra Homoeopathic Medical College, Bhubaneswar for homoeopathy; Prof. Hakim, Principal of Gopabandhu Ayurvedic Medical College, Puri for Ayurveda; and Sri Mukunda Mishra, Principal, Nirakarpur College for Naturopathy. Prof. Chitta Ranjan Das, a devoted follower of The Mother and Sri Aurobindo were invited for "The synthesis of different systems of Healing". I think mamu (Gadadhar Mishra) offered the vote of thanks. The whole lecture theatre was filled with students, nursing students and teachers of SCB Medical College and aspirants from Matrubhaban, Cuttack.

I think that was during the early shaping of SAMA which has organized conferences with experts from different branches of Odisha and India each year. It has grown in caliber with the encouragement of Babaji Maharaj, Sri Prapatti, Sri Pranab Kumar Bhattacharya, Sri Gadadhar Mishra who was himself an intuitive healer in homoeopathy but above all the Grace, Blessings and sanction of The Divine Mother Herself.

Now a-days different zones of Sri Aurobindo Study Circle are organizing SAMA Zonal meetings with reported huge participation.

Pray The Mother for a "real synthesis of the different systems of Healing" which can serve a real service to the different categories of people according to their constitution, faith and belief in the systems but above all the Divine's healing Force to liberate mankind from suffering, disease and finally death.

Bande Mataram.

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Microbes and Health

Dr. Reba Kanungo, MD,PhD
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To be cured is good, but to avoid being ill is better. -The Mother
(Thoughts and Aphorisms)

Good health is vital to for man to pursue a holistic physical, mental and spiritual life. Microbes, (microscopic organisms) are a major part of our environment which affects our health and disease. Almost every aspect of human, animal, and plant biology and health is influenced by host-associated microbial populations. These microorganisms include bacteria, viruses, and fungi. Ancient classification in Charaka Samhita these were recognised as kirmi; the *yukta kirmi* (external) and *anuyukta kirmi* (internal).

These microbes are found outside as well as inside our body in trillions. A colony of this, in our body, is known as the microbiome. The external sites where microorganisms colonise, include the skin, nails, hair, and eyes. Microbes from the environment and external sites enter the body through the respiratory tract (mouth and nose), gastrointestinal tract (oral cavity), urogenital tract, and any break in surface of the skin like cuts and bruises. Meanwhile, the internal parts of the body that the microbes occupy or colonise include the lungs, gut, bladder, kidneys, and vagina and lower urinary tract (urethra).

Soon after birth, the microorganisms colonise areas which is conducive for their growth. They are found in the environment both inside and outside the body. They depend on factors such as body temperature, pH, oxygen concentration, and source of nutrients including the dense layer of mucus that covers the intestinal epithelium which serves as source of carbon and other essential nutrients for microbes. The intestinal lining also provides attachment sites for bacteria. Other factors which influence the microbiome include genetics, gender, and age. External factors such as diet, lifestyle, medication, geographic location, climate, can also change the microbial community. Another interesting fact that influences the microbiome is the mode of delivery during birth. For example, newborns delivered via the vaginal, versus Caesarean delivery possess different groups of dominating gut microbiome. By the age of 3 years, the gut microbiome resembles that of the adult's . Beyond the age of 70, the ability to digest food and absorb nutrients in the gut changes, affecting the composition of the gut microbiome.

Beneficial effects of the microbiomes: Recent studies of the microbiomes have revealed valuable information on their role in our physical as well as mental wellbeing. Some of the interesting outcome of the studies show the role of microbiomes in :

· Digestion of food: The microbiome plays a crucial role in digestion and metabolism, particularly in the gut. It breaks down complex fibres to easily digestible sugars and essential nutrients.

· Skin and oral microbiomes suppress harmful bacteria and virus by producing certain enzymes and antimicrobial substances.

· Immunity and its influence on the immune system by activating immune cells and significantly impacting immune development and function. It is critical in training the immune system to distinguish between harmless and harmful microorganisms in the body.

· Microbiomes influence mental wellbeing by stimulating gut cells to secrete certain neurostimulants that influence mood, and behaviour of an individual.

· By forming a lining of healthy bacteria on the mucosal surface of the respiratory tract, and urogenital tract they protect against harmful germs, like virus, bacteria and fungi which cause serious infections.

When the natural environment of the body is altered, composition and diversity of the microbial population also changes resulting in disease. Change in the microbiome has now been linked to obesity, diabetes, allergies, and gut disorders.

The balance of good bacteria of the body can be disturbed and destroyed by overuse of antibiotics, poor diet and stress

A healthy balance can be maintained by maintaining good personal and environmental hygiene.

Hand washing is one of the most common and easy ways to prevent transfer of harmful microorganisms from person to person or inanimate objects to humans. These harmful microorganisms replace the protective microbiome of the body, making the person susceptible to infections.

A crucial factor that influences human microbiome is the indiscriminate use of antibiotics. When antibiotics are consumed they not only kill the infecting bacteria but also some of the resident good microbes of the gut. Over prescribing of antibiotics by doctors, indiscriminate use by individuals by self medication for minor ailments like cough and cold (seasonal, allergic or mild viral infections) result s in killing of good gut microbes. Consuming food laced with antimicrobial agents as preservatives also contributes to the degradation of gut microbiome.

Diet also influences the microbial colonization of the human body. A diet of whole plant foods, fruits, and vegetables promotes intestinal microbiome. High fat diet on the other hand is harmful for the intestinal microbes.

When the natural microbes are replaced by foreign or different microbes they are associated with several disorders in the body. Some of the recent research has established their association with chronic diseases like Type 2 diabetes, inflammatory bowel disease, (IBD) psoriasis, Parkinson's disease and irritable bowel syndrome. Another common disorder which many are afflicted with is the acid reflux due to change in the normal microbiome. The other serious condition that has been linked to altered microbiome of the intestine is cancer of the intestine. The altered microbes are thought to carry the cancer causing property to other parts of the body and establish tumours in other areas too.

Infections caused by changing normal microbial population of lining membranes in the gut, respiratory tract, urinary and genital tracts also is a major outcome of altered microbial protective flora.

To conclude the collection of all microbes and their genes that reside on and within our bodies is known as the microbiome. By assisting in the development of our immune systems, defending us against infections, and facilitating proper food digestion, the microbiome promotes human health and wellness. However, altered microbiome is also associated with disease conditions like cancer, Type 2 and diabetes and mental health besides several other illnesses. Because it regulates digestion and enhances other areas of health, the gut microbiome is particularly significant for overall health. A knowledge of the human body's interaction with the microbes will help in understanding the interdependence of essential microbes distinctly from harmful ones to pave the ways to avoid them in order to lead a healthy and holistic life.

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Role of Karma and Astrology in the Genesis of Ill Health and Disease

Dr. Gopal Chandra Dash, M.D

Modern medicine explains disease through genetics, infections, lifestyle, environmental factors, and ageing. However, the ancient Indian philosophy as per the Vedas, Upanishads, Bhagavad Gita, Ayurveda and Astrology present a broader perspective of health. As per their view, health is not merely a physical state but the harmonious functioning of the **body, mind, intellect, and soul**. According to this holistic philosophy, karma and astrology are not contradictory to medical science, rather they offer additional dimensions for understanding the human suffering.

The **law of karma** is one of the fundamental principles of Sanatana Dharma. Human life is governed by both **destiny (Prarabdha Karma)** and **free will (Purushartha)**. The Bhagavad Gita teaches that no action is ever lost and that every individual experiences the results of past deeds according to the immutable law of cause and effect. From this standpoint, illness may sometimes be understood as the manifestation of past karmic influences. One may not be able to alter all past karma but certainly possesses the freedom to shape the future through righteous actions, healthy living, disciplined habits, prayer, meditation, charity, and selfless service. Ayurveda beautifully complements this philosophy. It teaches that disease arises from the imbalance of the three doshas—Vata, Pitta, and Kapha, which occurs due to improper diet, unhealthy lifestyle, emotional disturbances, and environmental factors.

There is an important distinction between **astronomy** and **astrology**. A**stronomy (Khagola Vidya)** is a scientific discipline for understanding celestial bodies, seasons, calendars, eclipses, and the orderly movements of planets in the universe; while **Astrology (Jyotisha Vidya)**, the birth chart **(Horoscope**) is considered as a symbolic map indicating periods of health, vulnerability, opportunities, and challenges. Astrology does not diagnose disease in the medical sense; rather, it is believed to indicate periods of susceptibility or resilience based on planetary positions and their relationship to the horoscope. The planets do not cause disease; they merely reflect the karmic tendencies with which a person is born. Contrary to common misconceptions, astrology does not create or alter destiny. Human life is governed primarily by God's justice, natural laws, and one's own karma; not by planetary influence. According to Maharshi Dayananda in his book **Satyartha Prakash** (Chapter 2)**,** planets are material objects, so they cannot reward or punish human beings. Horoscope matching, gemstone prescriptions, and fatalistic predictions have no authority in the Vedas. Instead of self-effort, sole dependence on astrology weakens human character. Thus, while astronomy is science, predictive astrology cannot replace rational thinking, moral conduct, or medical treatment.

Sri Aurobindo gave a balanced and subtle view on karma, illness & astrology. According to him Karma is not an absolute fatality. Illness is not because of past-life karma. Karma influences

the circumstances of life, but it does not mean that human beings are helpless prisoners of the past. Karma may influence our circumstances, but consciousness gives us the power to transform our response to them. There is no single explanation for illness as disease is multifactorial - physical, vital, mental & environmental. Illness can be an outer expression of a disorder or disharmony in the inner being. Astrology having some predictive value but not an absolute or deterministic power for ill health & disease. He focused on transformation based on three important principles:

1. Never become a slave to astrology, 2. Never interpret illness simply as punishment of past Karma & 3. Use consciousness, knowledge, medical science and spiritual practice for transformation.

In conclusion, the genesis of disease is multifactorial. Modern medicine explains its biological mechanisms, while the Vedic doctrine of karma provides a moral and spiritual framework for understanding human experience. Maharshi Dayananda accepted the eternal law of karma but rejected fatalistic Astrology that attributes disease or destiny to planetary positions. His message remains profoundly relevant today. Health is protected not by fear of planets but by righteous conduct, disciplined living, scientific knowledge, and unwavering self-effort under the benevolent justice of God. Karma explains the moral law of cause and effect, while astrology symbolically reflects the unfolding of karmic tendencies through time. Predictive astrology has no authority to determine genesis of ill health and disease. Together they offer a philosophical framework for understanding suffering, without denying the indispensable role of modern medicine. Thus, astrology should complement—not substitute—modern medicine. Let us therefore cultivate healthy habits, noble actions, and spiritual wisdom while making full use of the blessings of modern medical science.

Om Sarve Bhavantu Sukhinah, Sarve Santu Niramayah *"May all be happy; may all be free from disease."*

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*Mother, "The world is preparing for a big change, will you help?"*4 *What is this great change of which you speak? And how are we to be of help to it?*

This great change is the appearance upon earth of a new race which will be for man what man is for the animal. The consciousness of this new race is already at work upon earth to enlighten all who are able to receive it and heed it.

1970

- The Mother

Genesis of Illness & Disease From Homeopathy View Point

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In homeopathy, health is defined as a dynamic state of complete physical, mental, emotional, and spiritual harmony rather than just the absence of disease.

- **Health :** Homeopathy views health as the harmonious operation of the **"vital force"** (an inner life energy or dynamic power) that animates the mind and body. When this force is balanced, the person is healthy.
- Samuel Hahnemann written in the *Organon of Medicine* : APH 9: During health a spiritual power (autocracy, vital force) animates the organism and keeps it in harmonious order.
- APH10: Without this animating, spirit like power the organism is dead.
- **Disease** starts when this invisible energy (vital force) gets deranged by morbific, noxious, invisible influences, dynamic (energetic) agents expressing themselves through altered sensations and functions. APH 6: For the physician, the disease consists only of the totality of its symptoms.

Note –the old school's futile attempts to discover the essential nature disease (prima causa)

- **Totality of Symptoms:** Symptoms are not the disease itself, but the outward, visible language and expression of the internal derangement of the vital force. Homeopaths treat the whole person based on the "totality of symptoms" through individualization basing on the principle of "Similia Similibus Curantur".
- **Individualization:** Homeopaths do not treat a named disease label (like "arthritis" or "migraine"). They treat the Man as a whole, matching a remedy to the patient's unique emotional traits, physical sensitivities, lifestyle, and hereditary characters
- APH 8:If all the symptoms be eradicated, the disease is always cured internally also.
- APH 12: By the disappearance of the totality of the symptoms by the cure, the affection of the vital force, that is to say, the whole internal and external morbid state is also removed.
- APH 15: The affection of the diseased vital force and the disease symptom thereby produced constitute an inseparable whole – they are one and the same.

o Disease process may be acute or chronic.

In **acute illness** or in acute exacerbations, genesis of disease may be from following factors : APH 5: Attention to exciting and fundamental causes and other circumstances, as helps to cure.

Exciting Causes (The Trigger for Acute Disease) e.g

- **Physical Factors:** Sudden exposure to cold, wet weather, dampness, excessive heat,
- **Dietary Indiscretions:** Overeating, malnutrition, or consuming spoiled or overly rich foods.
- **Emotional and Mental Shocks:** Grief, fear, anger, disappointment, or sudden intense joy.
- **Lifestyle Habits:** Lack of sleep, physical exhaustion, or a sedentary routine.

Maintaining Causes (Obstacles to Recovery)

Maintaining causes are ongoing circumstances in a patient's life that perpetuate the disease state and prevent healing.

- Continued exposure to environmental toxins or damp living conditions.
- Ongoing poor diet or destructive personal habits.

· Unresolved stressful life situations or toxic relationships.

· **Fundamental Causes (The Root Cause of Chronic Disease)** :

· **Miasms:** Chronic diseases are believed by classical homeopathy (founded by Samuel Hahnemann) to stem from deep-seated, inherited or acquired energetic predispositions called *miasms* (underlying spiritual or constitutional taints like Psora, Sycosis, and Syphilis) which allows chronic diseases to develop and persist in the body.

· **Psora:** Considered the basic and most frequent miasm, linked to functional disturbances, lack of tone, and chronic skin conditions like itching or itch-mite suppressions.

· **Sycosis:** Associated with over-formation, growths, or wart-like manifestations.

· **Syphilis:** Associated with destruction, ulceration, and structural decay

A perverted force is always there in all human beings. The basic chronic poison in the form of a dynamis has been designated by Hahnemann's psora.it is existent in all human beings in a latent state and is the parent of innumerable diseases, it may manifest itself in itching eruptions and skin diseases, in which pruritus (itching) is a prominent feature. But, they themselves do not constitute psora but are tantamount to one of the various manifestations of Psora. Quite a healthy man may pass off as devoid of psora, but it is there in slumbering state and an outburst of the miasm may take place by exposure to abnormal heat or or cold, excessive exertion of the mind of the body, overloading of the stomach and so forth , and chronic diseases form.

According to superficial symptoms, one may prescribe short – acting remedies, which may often be of temporary help. A chronic nasal catarrh, for instance, may be warded off from time to time, with acute short acting remedies which fail to reach the depth of the organism where the chronic miasm is responsible for such acute outbursts. Here it is to be noted that a medicinal force neutralizes a disease force in conformity with the law, Similia Similibus Curantur.

Now, the question is whether these micro-organisms represent a disease? They do not; by killing them you kill not the disease but the products of the disease. Or drugs in potencies kill the disease and instantly the germs are rendered harmless, and gradually die an automatic death.

When the primary syphilitic sore or chancre has been maltreated by local application or by injections, it often disappears, but it then invades the deeper planes of the organism. Syphilis then becomes latent or dormant in the system. Similarly, gonorrheal discharge may vanish under the action of injections, but the chronic conditions thereby produced get themselves lodged in the organism in the shape of the chronic miasm, we call sycosis.

Psora is the mother of all chronic diseases.So in every chronic miasm we are to deal with (i) psora (ii) psora and syphilis (iii) psora and sycosis. Here we have to think of anti-miasmatic treatment. That means we have to select anti-miasmatic remedy or remedies to combat the miasmatic states. Careful study of drugs from Materia Medica will help for selection of anti miasmatic constitutional remedy. There is absolutely no other way to eradicate chronic miasms from the human system.

· **Danger of Suppression:** Homeopathic philosophy asserts that treating external signs of a disease—like rashes or discharges—with harsh local remedies forces the dynamic illness inward. This suppression drives the disturbance deeper into vital internal organs, turning a surface problem into a severe chronic disease. Psora, Sycosis & Syphilis have individual characteristic manifestations to differentiate from each others touching symptoms from

physical, mental and pathological spheres. Few examples given below :

Characteristics of psora miasm :

Psora has an overwhelming action on everything mental and physical.

· **Mechanism:** It operates purely on a dynamic, functional level. It represents the body's struggle or defense against environmental stressors through elimination (e.g., skin eruptions, sweat, or basic discharges).

· **Physical Expression:** It produces "burning" sensations, functional pains, and nutritional deficiencies (malassimilation) without destroying organs or forming new tissue.

1. Active, bright, quick in movements and performances.
2. Hopelessness and incurability.
3. Timidity &great tendency to be frightened.
4. Psoric attacks are relieved by some physiological eliminative process, such as diarrhea, copious urination, or perspiration.
5. Desire for sweets and sour things. Marked craving for salts
6. Desire and craving for tea, coffee, tobacco or any stimulants.
7. Burning anditching of parts , worse from warmth of bed, sweat, scratching
8. Ravenous or capricious appetite: Excessive hunger, sometimes waking the patient at night or prominent in the morning.
9. Cravings: Strong desires for sweets, sour/ acidic things, fat foods, and hot or spiced dishes.

2. Sycosis (The Syco-condylomatous Miasm)

This miasm classically stems from suppressed or mishandled gonorrhoeal infections.

Mechanism: When the body fails to eliminate an irritant, it resorts to **retention and storage**. The defense mechanism attempts to wall off the issue, resulting in internal or external physical overgrowths.

· **Physical Expression:** Fibroids, tumors, keloids, thick skin, heavy mucus production, and conditions like osteoarthritis with heavy joint thickening.

1. Cross, irritable.
2. Fixed ideas
3. Memory is disastrously affected.
4. Although the patient loses remembrances of passing occurrences, names, dates etc, distinctly remembers occurrences previous to his illness.
5. Weeping without cause.
6. Inclination to commit a crime is a manifestation of a combination of psora and sycosis.
7. Motion ameliorates conditions arising from sycotic taint.
8. Any kind of food brings on derangement of stomach.
9. Greasy skin of the face.

3. Syphilis (The Destructive Miasm)

This miasm is historically rooted in suppressed or inherited syphilitic infections.

· **Mechanism:** This is the most dangerous state where the defense mechanisms collapse, leading to an **unstable, deviant, and precipitous decline**. Rather than trying to fight or isolate the problem, the tissue succumbs to destruction.

· **Physical Expression:** Deep-seated structural lesions, bone caries (necrosis), congenital deformities, aneurysms, and blindness.

1. Syphilitic eruptions, ulcers, throat affections, bone pain.
2. Cannot bear either heat or cold
3. Everything is done hastily
4. Very debilitating night sweats
5. Copper colour spots and eruptions
6. Headache worse from warmth, rest ad while attempting to sleep.

Selection ofan anti miasmatic remedy is difficult but cures the patient as a whole permanently.

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Kala, Artha and Karma: Fundamental Causes of Disease in Ayurveda

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Ayurveda views health as a state of equilibrium of Dosha, Dhatu, Mala, Agni, and Manas. Disease arises when this balance is disturbed. Among the fundamental causes of disease, Ayurveda describes Kala (Time), Artha (Improper Use of Sense Objects), and Karma (Actions) as important factors influencing the origin and progression of illness.

1. Kala (Time)

Kala refers to the influence of time, including seasons, age, and natural biological rhythms. Time continuously affects the body and mind.

- Seasonal variations influence Dosha balance. For example, Vata aggravates during the rainy season, Pitta during autumn, and Kapha during spring.
- Age-related changes also affect health. Childhood is Kapha-dominant, adulthood Pitta-dominant, and old age Vata-dominant.
- Ignoring seasonal regimens (Ritucharya) and daily routines (Dinacharya) can lead to disease. Modern science recognizes similar influences through circadian rhythms, seasonal illnesses, ageing, and biological clocks.

2. Artha (Sense Objects)

Artha refers to the objects perceived by the five senses—sound, touch, sight, taste, and smell. Disease may arise due to Atiyoga (excessive use), Ayoga (insufficient use), or Mithyayoga (improper use) of the senses.

Examples include excessive screen exposure, loud noise, unhealthy food, and toxic environments affecting physical and mental health.

Thus, improper interaction between the senses and their objects becomes a major cause of disease.

3. Karma (Actions)

Karma refers to physical, verbal, and mental actions.

Improper actions include unhealthy dietary habits, sedentary lifestyle or excessive exertion, mental stress, anger, fear, greed, anxiety, unethical conduct, and suppression of natural urges.

According to Ayurveda, such actions disturb the Doshas and impair Agni, eventually leading to disease. Karma also includes the cumulative effects of past and present actions that influence health and susceptibility to illness.

Interrelationship of Kala, Artha and Karma

Kala, Artha, and Karma interact continuously. Eating heavy food during an unsuitable season and leading a sedentary lifestyle may result in obesity and metabolic disorders. Mental stress, disturbing sensory inputs, and inadequate sleep may contribute to psychosomatic diseases.

Relevance in Modern Times

Modern lifestyle disorders such as obesity, diabetes, hypertension, anxiety, depression, and sleep disorders can be understood through the framework of Kala, Artha, and Karma. Ayurveda therefore emphasizes Dinacharya, Ritucharya, proper use of the senses, and ethical conduct.

Conclusion

Kala, Artha, and Karma constitute a profound Ayurvedic explanation of disease causation. Time influences biological processes, sensory experiences affect the mind and body, and actions determine health outcomes. Understanding and harmonizing these three factors can help prevent disease and promote long-term health and well-being.

Suman Volunteers: Bridging The Community And Health System

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A community partnership for safe motherhood, newborn care and assured services

SUMAN: From Service Delivery to Service Assurance

Surakshit Matritva Aashwasan (SUMAN) is a Government of India initiative for safe pregnancy, childbirth, postpartum care and newborn care. Its vision is to create a responsive health system that works towards zero maternal and infant deaths through quality care with dignity and respect. Its goal is to end all preventable maternal and newborn deaths. SUMAN seeks to assure free, quality and respectful care for every woman and newborn using public health services.

The SUMAN Guidelines recognise that good services at health facilities are only one part of the solution. Women and families also need correct information, timely referral, transport, support during emergencies and a way to raise concerns when services are not received. Community participation is therefore a critical part of SUMAN. The SUMAN Volunteer has been introduced to strengthen this community link.

Why SUMAN Volunteers are Needed

The Guidelines note that challenges remain, especially in remote and difficult areas. These include out-of-pocket expenditure, delay in ambulance or referral transport, lack of timely information during emergencies, multiple referrals, inadequate antenatal care, poor nutrition, home deliveries, and myths and misconceptions. Respectful care is also important. A trusted person from the same community can help families understand their rights and reach the right service at the right time.

The central idea is simple: the volunteer acts as a bridge between the community and the public health system. The volunteer does not replace ASHA, ANM, doctors, nurses or other health workers. Instead, the volunteer supports families to use the services and entitlements available under SUMAN and helps the health system hear the community's experience.

Who Can Become a SUMAN Volunteer?

The Guidelines provide an inclusive approach to selection. An empowered and well-respected member of the community can opt to become a SUMAN Volunteer if the person is committed to the cause and willing to devote time to the work. Volunteers can be of any gender.

- PRI representatives and other local public representatives.
- Opinion leaders and respected community members.
- School teachers.
- Representatives of civil society.
- Members of Self-Help Groups (SHGs).
- Other committed and respected persons from the local population.

The most important qualities are commitment, willingness to give time, community acceptance and the ability to work constructively with local health providers. The selection should aim to include people who can reach and support families, particularly where distance, social barriers or lack of information affect access to care.

Selection, Registration and Orientation

The Guidelines provide for a community-based registration process. Every Anganwadi Centre, Sub-Centre, Health and Wellness Centre (HWC) and Primary Health Centre (PHC) should conduct a drive to register volunteers and maintain a village-wise list. The names of registered volunteers should be displayed at these facilities and shared with pregnant women and their families at the time of registration with the Mother and Child Protection (MCP) Card.

Districts and Blocks can organise a half-day orientation for registered volunteers. The orientation should explain SUMAN entitlements, the expected role of the volunteer, community mobilisation, referral support, feedback and grievance reporting. Regular contact with the local Medical Officer, Community Health Officer, ANM/HW(F), ASHA, AWW and other service providers is important so that volunteers know where to direct families and how to seek help.

Core Roles and Responsibilities

- Give time to support women, newborns and families in obtaining services available under SUMAN.
- Maintain good liaison with government health facilities and local service providers.
- Participate in Village Health Sanitation Nutrition Committee (VHSNC), Panchayat and MAS meetings and help members understand SUMAN entitlements.
- Support community awareness on free and cashless maternal and newborn services.
- Meet families and explain how they can support a pregnant woman for safe motherhood.
- Help ensure that all pregnant women are registered and receive their entitled services.
- In an emergency, help the family obtain referral transport and reach the appropriate health facility in time.
- Visit nearby and referral facilities to understand available services and identify problems such as gaps in drugs, diagnostics and equipment.
- Discuss service gaps with the RKS and PRIs so that local action can be taken to improve services.
- Every quarter, obtain feedback from pregnant women about their experience of care, document it and share it with the local Medical Officer, Community Health Officer ANM, ASHA, AWW and other concerned workers.
- Report achievements and deficiencies in services and, as applicable, share service-delivery information through the programme's approved channels.
- Report denial of SUMAN services, informal payments, lack of cashless care or lack of respectful care through the appropriate grievance mechanism.

What Entitlements Should Volunteers Help Families Understand?

Volunteers should be familiar with the key SUMAN service guarantees so that they can guide families correctly. These include respectful care with privacy and dignity; the Safe Motherhood booklet and MCP Card; antenatal care including four ANC check-ups and a PMSMA (**Pradhan Mantri Surakshit Matritva Abhiyan)** check-up; free referral transport; cashless delivery and management of complications; breastfeeding support; cashless services for sick neonates and infants; birth-dose vaccination; postnatal care and counselling; family planning services; and time-bound grievance redressal.

The volunteer's role is to facilitate access, not to provide clinical treatment. Any woman or

newborn with a danger sign or emergency should be directed promptly to the appropriate health facility. Clinical decisions remain the responsibility of trained health professionals.

The Volunteer as a Community Accountability Partner

SUMAN places importance on community feedback and grievance redressal. Volunteers can help women and families speak up when an entitled service is denied or when they face problems such as informal payments or lack of respectful care. The Guidelines allow volunteers and other community stakeholders to register grievances. Volunteers should help the beneficiary use the designated SUMAN grievance channels and follow up through the established system.

The volunteer should also listen carefully and respectfully. Feedback should be factual and shared through the proper mechanism. The purpose is not to blame individuals. It is to identify gaps and help improve the quality, availability and responsiveness of services.

Working with the Health System

Successful SUMAN implementation requires teamwork. Volunteers should maintain a positive working relationship with ASHA, ANM, AWW, Community Health Officers, Medical Officers, nurses, facility teams, RKS (Rogi Kalyan Samiti), JAS (Jana Arogya Samiti), VHSNCs and PRIs. Community platforms can support awareness, social mobilisation and accountability. Volunteers can also encourage families to attend ANC, use public facilities, seek timely referral and provide a supportive environment for pregnant women.

Facility visits are particularly useful. By understanding what services are available and what problems providers face, volunteers can communicate community needs and help connect local concerns with RKS and PRI platforms. This two-way communication can improve trust between families and health facilities.

Recognition: SUMAN Champion

The Guidelines also provide for recognition of good performance. A SUMAN Champion may be a volunteer or another person from the community or health system who has done exemplary work to save the lives of mothers and infants. Districts may identify good-performing volunteers and recognise them with certificates, mementos or other forms of appreciation. Recognition should encourage sustained community service and motivate more respected citizens to participate.

Conclusion: A Trusted Link for Safer Motherhood

A SUMAN Volunteer is more than an awareness worker. The volunteer is a trusted community link who helps families understand their entitlements, reach services, obtain timely referral support, share their experiences and raise genuine concerns. When volunteers work closely with health workers, PRIs, VHSNCs, JAS, RKS and other community groups, they can strengthen the last-mile connection between the health system and the people.

The success of SUMAN depends on assured services, respectful care and community ownership. A committed SUMAN Volunteer can help turn these principles into practical support for every pregnant woman and newborn. The message is clear: know the entitlement, reach the service on time, support the family, listen to the community and help the health system improve.

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ଅସୁସ୍ଥତା ସୃଷ୍ଟିର୍ ଅନ୍ତରାଳେ

ଡ. ନିତ୍ୟାନନ୍ଦ ସାଇଁ

ଶ୍ରୀଅରବିନ୍ଦଙ୍କ ଭାଷାରେ - "କୁହାଯାଇଥାଏ ଯେ ପଶୁ ହେଉଛି ଏକ ଜୀବନ୍ତ ଗବେଷଣାଗାର। ସେହି ଗବେଷଣାଗାରରେ ପ୍ରକୃତି ମଣିଷକୁ ଗଢ଼ିଥିଲା। ମଣିଷ ନିଜେ ମଧ୍ୟ ଏକ ଚିନ୍ତାଶୀଳ ଏବଂ ଜୀବନ୍ତ ଗବେଷଣାଗାର ଯେଉଁଠି ମଣିଷର ସହଯୋଗରେ ପ୍ରକୃତି ଅତିମାନବକୁ ଗଢ଼ିଦେବ। ତାକୁ ଗଢ଼ିଦେବ ଈଶ୍ୱରଙ୍କ ପ୍ରତିଭୂ ଭାବରେ।"

ତାହାହେଲେ ଏଥିରେ ବାଧା କେଉଁଠି ? ଅତିମାନବର ଆବିର୍ଭାବ କାହିଁକି ଏଯାବତ୍ ସମ୍ଭବ ହୋଇପାରିନି ? କାହିଁକି ଅବା ତ୍ୱରାନ୍ୱିତ ହେଉନି ସେହି ଗଠନ ପ୍ରକ୍ରିୟା ? ବାଧାଟି ହେଉଛି - ମନୁଷ୍ୟ ଶରୀରରେ କେତେ ନା କେତେ ସୀମିତତା। ତା'ର ମନଠାରେ ଅକ୍ଷମତା ଅନେକ। ଏହା ପୁଣି ରହିଆସିଛି ସଂସାରରେ ତା'ର ସୃଷ୍ଟି ସମୟରୁ। ଯେପର୍ଯ୍ୟନ୍ତ ତା'ର ଅବଚେତନ ମନ ଓ ଜୀବନୀଶକ୍ତି ଜଡ଼ତାରୁ ସଂପୂର୍ଣ୍ଣ ତଥା ମୌଳିକ ଭାବରେ ମୁକ୍ତ ନ ହୋଇଛି, ତା'ର ସେହି ଅସାମର୍ଥ୍ୟତା ତିଷ୍ଠି ରହିଥିବ। ମାତ୍ର ସେହି ଅସାମର୍ଥ୍ୟତା ମଣିଷର ଉଚ୍ଚତର ଉତ୍ତରଣରେ ବିରାଟ ପ୍ରତିବନ୍ଧକ।

ଆମ ଶରୀର ଏକ ପାର୍ଥିବ ଉପକରଣ। ମସ୍ତିଷ୍କ, ହୃତ୍‌ପିଣ୍ଡ, ଆବେଗ, ଉଦ୍ଦୀପନା, ପଞ୍ଚଇନ୍ଦ୍ରିୟ, ଶରୀରର ଯାବତୀୟ କ୍ରିୟାପ୍ରକ୍ରିୟା, କାମନାବାସନା, ଆହାର, ନିଦ୍ରା, କ୍ଲାନ୍ତି ଇତ୍ୟାଦି ଶରୀରସହ ଅତି ଦୃଢ଼ଭାବରେ ଛନ୍ଦି ହୋଇରହିଛି। ଫଳରେ ଆମେ ହୋଇପଡୁ ଅତିମାତ୍ରାରେ ଅସୁରକ୍ଷିତ। ତେଣୁ ଆମେ ଅନେକ ସମୟରେ ସମ୍ପୂର୍ଣ୍ଣ ସୁସ୍ଥ ବୋଲି ପ୍ରତୀତ ହେଉଥିବା ସତ୍ତ୍ୱେ ଆମ ଶରୀରର ଶକ୍ତି ବଡ଼ ଅନିଶ୍ଚିତ ଓ ସଙ୍କଟପୂର୍ଣ୍ଣ। କାରଣ ଅନ୍ତରସ୍ଥ ଦୋଳାୟମାନ ଅବସ୍ଥା ଓ ବାହ୍ୟ ଆକ୍ରମଣର ପ୍ରଭାବରେ ସେହି ଶକ୍ତି ଯେକୌଣସି ମୁହୂର୍ତ୍ତରେ ଚୂର୍ଣ୍ଣବିଚୂର୍ଣ୍ଣ ହୋଇଯାଇପାରେ। ମାତ୍ର ଆମେ ଯଦି ଆମ ସୀମିତତାର ପ୍ରତିବନ୍ଧକକୁ ଅତିକ୍ରମ କରିପାରିବୁ, ତେବେ ଆମର ଅଗ୍ରଗତି ଏବଂ ପୂର୍ଣ୍ଣତାପ୍ରାପ୍ତି ସମ୍ଭବ ହୋଇପାରିବ।

ପୃଥିବୀର ଲମ୍ବା ଇତିହାସରେ ଆମେ ଏକ ସନ୍ଧିକ୍ଷଣ ମୁହୂର୍ତ୍ତରେ ଅବସ୍ଥାନ କରୁଛୁ। 'ମୁହୂର୍ତ୍ତ' ବୋଲି ଉଲ୍ଲେଖ କରିବାର ତାତ୍ପର୍ଯ୍ୟ ହେଉଛି, ସମୟର ଅନ୍ତହୀନତା ନିକଟରେ ଏହି ସନ୍ଧିକ୍ଷଣର ଅବଧି ଅତି ସ୍ୱଳ୍ପ-ଏକ ମୁହୂର୍ତ୍ତ ମାତ୍ର। ପୁଣି ଆମ ଜୀବନକାଳର ଅବଧି ସହ ତୁଳନା କଲେ ଉକ୍ତ ମୁହୂର୍ତ୍ତଟି ବେଶ୍ ଦୀର୍ଘ।

ଜଡ଼ରୁ ଜୀବନର ଜନ୍ମ। ଜଡ଼ ଏବେ ଦ୍ରୁତ ଗତିରେ ପରିବର୍ତ୍ତିତ ହେବାରେ ଲାଗିଛି। ନୂତନ ଭାବରେ ପ୍ରତିଭାତ ହେବା ନିମନ୍ତେ ଏହା ନିଜକୁ ପ୍ରସ୍ତୁତ କରିବାରେ ଲାଗିପଡ଼ିଛି। କିନ୍ତୁ ଆମ ଶରୀର ବିଶେଷ ନମନୀୟ ନୁହେଁ। ପ୍ରତ୍ୟାଶିତ ସେହି ଅନୁକୂଳ ପରିବର୍ତ୍ତନକୁ ବିରୋଧ କରିବାରେ ଆମ ଶରୀର ବେଶ୍ ସକ୍ରିୟ। ଏହି କାରଣରୁ ଆମେ ନାନା ଦୁର୍ବୋଧ ସମସ୍ୟାର ସମ୍ମୁଖୀନ ହେଉଛୁ। ରୋଗବ୍ୟାଧି ବୃଦ୍ଧି ପାଇବାରେ ଲାଗିଛି। ଫଳରେ ଏହା ଚିକିତ୍ସା-ବିଜ୍ଞାନ ପାଇଁ ଉଭା ହୋଇପଡ଼ିଛି ଏକ ସମସ୍ୟା ତଥା ଆହ୍ୱାନରୂପେ।

ମାତ୍ର ବଡ଼ ଆଶ୍ୱାସନାର କଥା ଯେ ସମ୍ପ୍ରତି ଦିବ୍ୟଶକ୍ତି ଖୁବ୍ ସକ୍ରିୟ। ପ୍ରଚଣ୍ଡ ବିଶ୍ୱାସ ଓ ଅତିମାନସିକ ପ୍ରଶାନ୍ତି ସହ ଏହି ଦିବ୍ୟଶକ୍ତି ସାଙ୍ଗରେ ସଂଯୁକ୍ତ ହୋଇପାରିଲେ ଅସୁସ୍ଥତାର ସଂପୂର୍ଣ୍ଣ ବିଲୁପ୍ତି ସମ୍ଭବ।

ମା' କହୁଛନ୍ତି, "ମଣିଷ ଯେତେବେଳେ ତା'ର ସାମ୍ୟାବସ୍ଥାରେ ଅବସ୍ଥାନ କରିଥାଏ ଏବଂ ଏକ ସୁସ୍ଥ ଶାରୀରିକ ସୁସଙ୍ଗତି ଉପଭୋଗ କରିଚାଲିଥାଏ, ସେତେବେଳେ ଅସୁସ୍ଥତାର ପ୍ରତିରୋଧ କରିବା ପାଇଁ ତା'ଠାରେ ଥାଏ ଅମାପ ସାମର୍ଥ୍ୟ। ତେବେ ସମ୍ପୂର୍ଣ୍ଣ ବାହ୍ୟ ଦୃଷ୍ଟିକୋଣରୁ ବିଚାର କଲେ, ତା'ର ସମସ୍ତ ଅଙ୍ଗ ନିଜ ନିଜ ମଧ୍ୟରେ ଯଥେଷ୍ଟ ସଙ୍ଗତି ତଥା ସମନ୍ୱୟ ରକ୍ଷାକରି କାର୍ଯ୍ୟ କରୁଥିଲେ ଓ ସେ ଯଥେଷ୍ଟ ମନସ୍ତାତ୍ତ୍ୱିକ ସନ୍ତୁଳନ ଉପଭୋଗ କରିଚାଲିଥିଲେ, ରୋଗବ୍ୟାଧିଗୁଡ଼ିକର ସଫଳ ମୁକାବିଲା କରିବା ତା'ପକ୍ଷେ ଖୁବ୍ ସୁଗମ ହୋଇଯାଏ। ମାତ୍ର କୌଣସି କାରଣରୁ ତା'ର ସେହି ସନ୍ତୁଳିତ ଅବସ୍ଥା, ଯଦି ଅସନ୍ତୁଳିତ ହୋଇପଡ଼େ ଏବଂ ବିଷାଦ, ଅସନ୍ତୋଷ, ନୈତିକସ୍ଖଳନ, ଅସ୍ୱାଭାବିକ କ୍ଲାନ୍ତି ଇତ୍ୟାଦିର ପ୍ରଭାବରେ ଦୁର୍ବଳ ହୋଇଯାଏ, ତେବେ ହ୍ରାସ ପାଇଯାଏ ତା' ଶରୀରର ପ୍ରତିରୋଧ କ୍ଷମତା।

ହେଲେ, ଯୋଗସାଧନାରେ ବ୍ରତୀ ସାଧକମାନଙ୍କ କ୍ଷେତ୍ରରେ ଏହି ସାଧାରଣ ନିୟମ ପ୍ରଯୁଜ୍ୟ ନୁହେଁ। କାରଣ ସେମାନଙ୍କ ଶରୀରରେ ସାମ୍ୟାବସ୍ଥାର ପ୍ରକୃତି ହେଉଛି ଭିନ୍ନ। ବରଂ ସାଧକମାନଙ୍କ କ୍ଷେତ୍ରରେ ଶରୀରର ଅଭ୍ୟନ୍ତରସ୍ଥ ସମସ୍ୟା ହିଁ ସନ୍ତୁଳନ ବିପର୍ଯ୍ୟସ୍ତ ହୋଇପଡ଼ିବାର ହେତୁ। ଏହି ବିପର୍ଯ୍ୟସ୍ତ ଅବସ୍ଥାକୁ ଆୟତ୍ତ କରିବା ହେଉଛି ସମସ୍ୟାର ପ୍ରକୃତ ସମାଧାନ।"

ଅସୁସ୍ଥତାର କାରଣ ନିହିତ ଥାଇପାରେ ଶରୀରର ଯେକୌଣସି ଅଂଶରେ। ଏହା ମଧ୍ୟ ମନ କିମ୍ବା ପ୍ରାଣରେ ବି ନିହିତ ଥାଇପାରେ। ସେହି ସମାନ ଅସୁସ୍ଥତାର କାରଣ ମଧ୍ୟ ହୋଇପାରେ ଭିନ୍ନ ଭିନ୍ନ। ବିଭିନ୍ନ ବ୍ୟକ୍ତିଙ୍କଠାରେ ଏହାର ଉତ୍ସ ହୋଇପାରେ ଅଲଗା ଅଲଗା ପ୍ରକାରର ଅସଙ୍ଗତି। ପୁଣି ଆଦୌ କୌଣସି ଅସୁସ୍ଥତା ନ ଥାଇ ବି ଆମେ ଅସୁସ୍ଥତା ଅନୁଭବ କରିପାରୁ ଏବଂ ଖୁବ୍ ସଚେତନ ରହିଥିଲେ ଏହି ଅସଙ୍ଗତିକୁ ଚିହ୍ନିପାରୁ। ସେହି ଅସଙ୍ଗତିକୁ ସଂଶୋଧନ କରିଦେଲେ ଅସୁସ୍ଥତାରୁ ଆରୋଗ୍ୟ ମିଳିଯାଏ।

ଏହା ସ୍ୱୀକାର୍ଯ୍ୟ ଯେ ଆମେ ଅବସ୍ଥାନ କରୁଛୁ ରୋଗବ୍ୟାଧିର ଏକ ମହାସମୁଦ୍ରରେ। ରୋଗବ୍ୟାଧିର କାରକମାନ ଆମକୁ ଚତୁର୍ପାର୍ଶ୍ୱରୁ ଘେରି କରି ରହିଛନ୍ତି। ମାତ୍ର ପ୍ରଶ୍ନଉଠେ, ପୂର୍ବରୁ କୌଣସି ଅସୁସ୍ଥତାର ସୂଚନା ନ ଥାଇ ଆମେ ହଠାତ୍ ଅସୁସ୍ଥ ହୋଇପଡୁ କାହିଁକି ? ଆମେ ହୁଏତ କହିପାରୁ ଯେ ଜୀବନୀଶକ୍ତିର ହ୍ରାସ ହିଁ ରୋଗସୃଷ୍ଟିର କାରଣ। ମାତ୍ର ସେହି ଜୀବନୀଶକ୍ତିର କାହିଁକି ହ୍ରାସ ଘଟିଲା ? କଅଣ ଏହାର ଉତ୍ସ ? ରୋଗାକ୍ରାନ୍ତ କରିବା ପାଇଁ କୌଣସି ନା କୌଣସି ଅସଙ୍ଗତି ଦାୟୀ ବୋଲି ପୂର୍ବରୁ କୁହାଯାଇଛି। ତେବେ ସଂକ୍ଷେପରେ ଏତିକି କୁହାଯାଇପାରେ ଯେ ଦିବ୍ୟଶକ୍ତିକୁ ଯଥାଯଥ ଭାବରେ ଗ୍ରହଣ କରିବାରେ ଆମର ଅକ୍ଷମତା ହିଁ ଆମଠାରେ ରୋଗବ୍ୟାଧି ଜାତ କରିବାରେ ମୁଖ୍ୟତଃ ଦାୟୀ।

ପୁନଶ୍ଚ ଏହା ମଧ୍ୟ ଜାଣିରଖିବା ଦରକାର ଯେ ରୋଗରେ ପଡ଼ିବାଟା ସବୁବେଳେ ଶାରୀରିକ କାରଣରୁ ନ ହୋଇପାରେ। ଉଦାହରଣସ୍ୱରୂପ, ଯୋଗସାଧକମାନଙ୍କ ସାଧନାରେ କୌଣସି ସମସ୍ୟା ଦେଖାଦେଲେ ସେମାନେ ରୋଗଗ୍ରସ୍ତ ହୋଇପାରନ୍ତି । ମାତ୍ର ଆମଭଳି ସାଧାରଣ ବ୍ୟକ୍ତିମାନଙ୍କ କ୍ଷେତ୍ରରେ ରୋଗାକ୍ରାନ୍ତ ହେବାଟା ମୁଖ୍ୟତଃ ବ୍ୟକ୍ତି ନିର୍ଭରଶୀଳ। ସମାନ ରୋଗଟିର ପ୍ରକୃତି ମଧ୍ୟ ସବୁ ରୋଗୀଙ୍କ କ୍ଷେତ୍ରରେ ସମାନ ନ ହୋଇପାରେ। ଆମ ଚେତନାର ସ୍ତର ଓ ଆମ ଜୀବନଧାରଣର ପଦ୍ଧତି ଉପରେ ନିର୍ଭର କରିଥାଏ ଆମଠାରେ ରୋଗଟିର ପ୍ରକୃତି।

ଆମମାନଙ୍କ ମଧ୍ୟରୁ ଯେଉଁମାନେ ବହୁ ସମୟରେ ବିଷାଦଗ୍ରସ୍ତ, ନୈରାଶ୍ୟ-ଜର୍ଜରିତ, ଭୀରୁ ସ୍ୱଭାବର, ଯେଉଁମାନଙ୍କର ନିଜ ଉପରେ ତଥା ଈଶ୍ୱରଙ୍କ ଉପରେ ବିଶେଷ ବିଶ୍ୱାସ ଓ ନିର୍ଭରତା ନ ଥାଏ, ସେମାନେ ସହଜରେ ରୋଗଗ୍ରସ୍ତ ହୋଇପଡ଼ନ୍ତି।

ଆମଭଳି ସାଧାରଣ ଚେତନା ସ୍ତରର ବ୍ୟକ୍ତିମାନେ ଅଧିକାଂଶ ସମୟରେ ଆଶଙ୍କା ଭିତରେ ରହିଥାନ୍ତି। ଆମେ ଯଦି ଆମ ଚିନ୍ତାଭାବନାଗୁଡ଼ିକୁ ଅନ୍ତତଃ ୧୦ ମିନିଟ୍ ଧରି ଖୁବ୍ ଏକାଗ୍ରତାର ସହ ନିରୀକ୍ଷଣ କରିବା, ତେବେ ଜାଣିପାରିବା ଯେ ପ୍ରତି ୧୦ଟା ଭିତରୁ ୯ଟି ଚିନ୍ତାଭାବନା ବିବିଧ ଭୟରେ ଭରା। ଏହି ଭୟ ହୋଇପାରେ ଅତି ସମାନ୍ୟ କିମ୍ବା ଅତି ଭୀଷଣ। ଏହା ହୋଇପାରେ ଆମର ନିକଟବର୍ତ୍ତୀ କିମ୍ବା ଦୂରବର୍ତ୍ତୀ, ହୋଇପାରେ ଦୃଶ୍ୟମାନ, କିମ୍ବା ଅବସ୍ଥାନ କରିପାରେ ଅଦୃଶ୍ୟମାନ ଭାବରେ। ଆମେ ସବୁବେଳେ ସଚେତନ ନ ରହିଥିଲେ ମଧ୍ୟ ଭୟ ସବୁବେଳେ ଆମକୁ ଘେରିକରି ରହିଛି। କେବଳ ନିରବଚ୍ଛିନ୍ନ ଦୃଢ଼ ଉଦ୍ୟମ ଓ ଶୃଙ୍ଖଳା ବଳରେ ହିଁ ଭୟ ଉପରେ ବିଜୟପ୍ରାପ୍ତି ସମ୍ଭବ।

ସେହିପରି ଆମର ଚିନ୍ତାଭାବନା ଯଦି ସ୍ୱଚ୍ଛ ନୁହେଁ, ଆମର ଅନୁଭବ ଏବଂ ମନୋଭାବ ଯଦି କଳୁଷିତ, ଆମେ ଯଦି ଖରାପ ବହିସବୁ ପଢ଼ାପଢ଼ି କରୁଥାଉ, ଆମ କଥାବାର୍ତ୍ତାରେ ଯଦି ଶାଳୀନତା ନ ଥାଏ ଆମ ନିଜ ଉପରେ ବି ଆମର ଯଦି ନିୟନ୍ତ୍ରଣ ନ ଥାଏ, ତେବେ ଆମ ଶରୀରଟା ହୁଏତ ସୁସ୍ଥ ମାଲୁମ ପଡ଼ିପାରେ । କିନ୍ତୁ ଆମକୁ ସମ୍ପୂର୍ଣ୍ଣ ସୁସ୍ଥ ବୋଲି କୁହାଯାଇପାରିବନି।

ସେହିପରି ଆମର ପ୍ରାଣ ଓ ମନ ଯଦି ଆମର ସମସ୍ତ କାର୍ଯ୍ୟ ଉପରେ ପ୍ରଭୁତ୍ୱ ବିସ୍ତାର କରୁଥା'ନ୍ତି, ତେବେ ତାହା ଆମ ଶରୀରକୁ ବାରମ୍ବାର ଆକ୍ରମଣ କରି ତା'ର ପ୍ରଶାନ୍ତି ଓ ଭାରସାମ୍ୟ ତଥା ସନ୍ତୁଳିତ ଅବସ୍ଥାକୁ ବିପର୍ଯ୍ୟସ୍ତ କରିପକାନ୍ତି। ବିପନ୍ନ କରିପକାନ୍ତି ସ୍ୱାସ୍ଥ୍ୟକୁ। ବଡ଼ କ୍ଷୋଭର ବିଷୟ ଯେ ଶରୀର ନିଜେ ତା'ର ସନ୍ତୁଳିତ ସ୍ଥିତିକୁ ସଙ୍କଟ ଭିତରକୁ ନିକ୍ଷେପ କରିବାରେ ଅଭ୍ୟସ୍ଥ। ଏହି ସନ୍ତୁଳିତ ସ୍ଥିତିର ଅସନ୍ତୁଳନ ଅବସ୍ଥାକୁ ଆମେ ଅସୁସ୍ଥତା ବୋଲି କହିପାରୁ। ଆମ ଶରୀରର ଯାବତୀୟ ବଦଭ୍ୟାସ ଆମକୁ ଅସୁସ୍ଥ କରିଦେବାରେ ଅଧିକ ପରିମାଣରେ ଦାୟୀ। ଦିବ୍ୟଶକ୍ତି ଉପରେ ଆସ୍ଥାରଖି ଏହି ଶକ୍ତିକୁ ସମସ୍ତ ତ୍ରୁଟିବିଚ୍ୟୁତି ଉପରେ

ପ୍ରୟୋଗ କଲେ ମଧ୍ୟ ବହୁ ସମୟରେ ତ୍ରୁଟିବିଚ୍ୟୁତିଗୁଡ଼ିକର ସମ୍ପୂର୍ଣ୍ଣ ମୂଳୋତ୍ପାଟନ ହୋଇ ନ ଥାଏ। ସେଗୁଡ଼ିକ ସୁଯୋଗ ଜାଣି ପୁନଶ୍ଚ ଅବଚେତନ ଭିତରକୁ ଅନୁପ୍ରବେଶ କରିଥା'ନ୍ତି ଏବଂ ଆମେ ସେତେବେଳେ ଯଦି ଅସତର୍କ ଥାଉ ଓ ତା'ର ସନ୍ଧାନ ପାଇଲେ ତା'କୁ ପ୍ରତ୍ୟାଖ୍ୟାନ କରିବାରେ ଯଥେଷ୍ଟ ଏକାଗ୍ର ନ ରହୁ, ତେବେ ଏହା ମୁଣ୍ଡଟେକି ପୁନର୍ବାର ଉଭା ହୋଇପଡ଼େ ଓ ଆମକୁ ଅସୁସ୍ଥ କରିପକାଏ। ଏପରି ବି ହୋଇପାରେ ଯେ ଆମେ ଯେଉଁ ଅସୁସ୍ଥତା ଭୋଗି ଆସୁଥିଲୁ, ସେଥିରୁ ସଂପୂର୍ଣ୍ଣ ଆରୋଗ୍ୟ ଲାଭ କରିଛୁ ବୋଲି ହୁଏତ ମାସ ମାସ କି ବର୍ଷ ବର୍ଷ ଧରି ଭାବିନେଇ ତା' କଥା ସମ୍ପୂର୍ଣ୍ଣ ଭୁଲିଯାଇଥାଉ। ମାତ୍ର ଆମକୁ ବିସ୍ମୟାଭିଭୂତ କରିଦେଇ ତାହା ଅବଚେତନ ଭିତରୁ ଆକସ୍ମିକ ଭାବରେ ଆବିର୍ଭାବ ହୋଇପଡ଼ିବା ଆଦୌ ଅସମ୍ଭବ ନୁହେଁ।

ବାସ୍ତବ ଦୃଷ୍ଟିକୋଣରୁ ବିଚାର କଲେ, ଅସୁସ୍ଥତା ହେଉଛି ଏକ ସୂଚକ। ଏକ ବାର୍ତ୍ତାବହ। ବାର୍ତ୍ତାବହ ଅନ୍ତରସ୍ଥ ଅସନ୍ତୁଳିତ ଅବସ୍ଥାର। ପୁଣି ମନସ୍ତାତ୍ତ୍ୱିକ ଦୃଷ୍ଟିକୋଣରୁ ଦେଖିଲେ, ଆମମାନଙ୍କ ମଧ୍ୟରୁ ଯେଉଁ ରୋଗୀମାନେ ଆରୋଗ୍ୟ ଲାଭ କରିବେ ବୋଲି ଅତି ଦୃଢ଼ ଭାବରେ ଆଶାବାଦୀ ରହି ନଥା'ନ୍ତି, ସେମାନେ ଆରୋଗ୍ୟ ଲାଭ କରିବାରେ ସମସ୍ୟା ଉପୁଜିପାରେ। ଆମେ ଯଦି ଦିବ୍ୟଶକ୍ତି ଓ ଦିବ୍ୟଆଲୋକକୁ ଆତୁଆଳରେ ରଖି ତା' ପ୍ରତି ଉନ୍ମୁକ୍ତ ନ ରହୁ, ତେବେ ବିଷାଦ ଆମକୁ କବଳିତ କରିପକାଏ। ବିଷାଦଗ୍ରସ୍ତ ହୋଇପଡ଼ିଲେ ରୋଗ ଆକ୍ରମଣପାଇଁ ମିଳିଯାଏ ଅନୁକୂଳ ପରିବେଶ। ପୁଣି ସନ୍ଦେହ, ବିଷର୍ଣ୍ଣତା, ଅବସାଦ, ଅବିଶ୍ୱାସ, ସ୍ୱାର୍ଥପରତା ଇତ୍ୟାଦି ପ୍ରତିକୂଳ ମନୋଭାବ ଆମକୁ ଦିବ୍ୟଶକ୍ତି ଓ ଦିବ୍ୟଆଲୋକଠାରୁ ବିଚ୍ଛିନ୍ନ କରିପକାଏ। ଏହାର ପରିଣାମରେ ରୋଗସୃଷ୍ଟି ପ୍ରୋତ୍ସାହନ ପାଇଯାଏ। ଏହାହିଁ ହେଉଛି ରୋଗାକ୍ରାନ୍ତ ହୋଇପଡ଼ିବାର ଅନ୍ୟତମ ପ୍ରଧାନ କାରଣ। ଏଥପାଇଁ ଜୀବାଣୁ ଭୂତାଣୁଗୁଡ଼ିକ ଉପରେ ଦୋଷ ଲଦିଦେବା ଆଦୌ ବାଞ୍ଛନୀୟ ନୁହେଁ।

ଏହା ବି ଜାଣିରଖିବା ଉଚିତ ଯେ ଆମକୁ ଘେରିରହିଛି ଏକ ସୁରକ୍ଷା ବଳୟ। ଆମେ ଏହାକୁ 'ନର୍ଭସ ଏନ୍‌ଭଲପ୍' ବା ସ୍ନାୟବିକ ଆବରଣ ବୋଲି କହିଥାଉ। ଏହି ସୁରକ୍ଷା ବଳୟଟି ଯେପର୍ଯ୍ୟନ୍ତ ସୁଦୃଢ଼ ରହିଥାଏ ଏବଂ ରୋଗ-ଶକ୍ତିର ଅନୁପ୍ରବେଶକୁ ପ୍ରତିହତ କରିଚାଲିଥାଏ, ସେପର୍ଯ୍ୟନ୍ତ ଆମେ ସୁସ୍ଥ ରହିଥାଉ। ଏପରିକି ସୁସ୍ଥ ରହିଥାଉ ଭୀଷଣ ମହାମାରୀ ବ୍ୟାପିଥିବା ସମୟରେ ମଧ୍ୟ। ଉକ୍ତ ଆବରଣଟିରେ ଛିଦ୍ର ସୃଷ୍ଟି ହେଲେ କି ତାହା ଦୁର୍ବଳ ହୋଇପଡ଼ିଲେ ଅସୁସ୍ଥତାର ପରିପ୍ରକାଶ ସୁଗମ ହୋଇଯାଏ।

ମାନସିକ ଅବସାଦ ଅବସ୍ଥା ରୋଗସୃଷ୍ଟିପାଇଁ ଖୁବ୍ ଅନୁକୂଳ। କାରଣ ଏହା ଆମର ସେହି ସୁରକ୍ଷା ଆବରଣରେ ଛିଦ୍ର ସୃଷ୍ଟି କରି ତା'କୁ ଦୁର୍ବଳ କରିଥାଏ ଏବଂ ବିରୋଧିଶକ୍ତିର ଆକ୍ରମଣପାଇଁ ପଥ ଉନ୍ମୁକ୍ତ କରିଦିଏ। ଅନିଶ୍ଚିତତାର ଅନୁଭବ, ଅସ୍ୱସ୍ତି, ବିବିଧ ପ୍ରକାରର ସମସ୍ୟା-ଏହିସବୁ ପ୍ରତିକୂଳ ପରିସ୍ଥିତିରେ ଉତ୍କଣ୍ଠିତ ତଥା ଉଦ୍‌ବିଗ୍ନ ରହିଲେ ତାହା ଅସୁସ୍ଥତାକୁ ଆମନ୍ତ୍ରଣ କରିଆଣେ। ସେହିପରି ପ୍ରତିକୂଳ କାମନାବାସନା ମଧ୍ୟ ଅଙ୍ଗପ୍ରତ୍ୟଙ୍ଗଗୁଡ଼ିକର କାର୍ଯ୍ୟକୁ ପ୍ରଭାବିତ କରି ରୋଗ ଜାତ କରିପକାଏ।

ଏତଦ୍ ବ୍ୟତୀତ, ଶରୀର ସମସ୍ତ ଅଂଶର ପାରସ୍ପରିକ କ୍ରିୟାରେ ସଙ୍ଗତି, ସନ୍ତୁଳନ ତଥା ଶୃଙ୍ଖଳା ନ ରହିଲେ, ସମସ୍ତ ଅଂଶ ସମାନ ସମୟରେ ତଥା ସମଭାବରେ ପ୍ରଗତି କରି ନ ପାରିଲେ, ସମତାଳରେ କାମ କରି ନ ପାରିଲେ ଏବଂ କେଉଁଠି ନା କେଉଁଠି ଅସ୍ୱାଭାବିକତା ଓ ଅସଙ୍ଗତି ଉପୁଜିଲେ, ସେହି ସ୍ଥାନରେ ରୋଗ ସୃଷ୍ଟିପାଇଁ ବୃଦ୍ଧି ପାଇଯାଏ ସମ୍ବେଦନଶୀଳତା। ସେହି ଅସ୍ୱାଭାବିକତା, ଅସଙ୍ଗତି ଓ ତ୍ରୁଟିବିଚ୍ୟୁତିର ପ୍ରକାର ଓ ପ୍ରକୃତି ଉପରେ ନିର୍ଭର କରିଥାଏ ରୋଗର ପ୍ରକୃତି। କେଉଁ ତ୍ରୁଟିବିଚ୍ୟୁତି ମନକୁ ଆକ୍ରାନ୍ତ କରିଥାଏ ତ ଅନ୍ୟ କେଉଁ ତ୍ରୁଟିବିଚ୍ୟୁତି ଆକ୍ରାନ୍ତ କରିପକାଏ ଶରୀରକୁ। ମନକୁ ଆକ୍ରାନ୍ତ କଲେ ଜାତ ହୋଇପାରେ ଗୁରୁତର ଧରଣର ମାନସିକ ରୋଗ। ଶରୀର ଆକ୍ରାନ୍ତ ହୋଇପଡ଼ିଲେ ଅତି ସାଧାରଣ ବ୍ୟାଧିଠାରୁ ଆରମ୍ଭ କରି ମାରାତ୍ମକ ବ୍ୟାଧି ମଧ୍ୟ ଜାତ ହୋଇପାରେ।

ସୁତରାଂ ସଙ୍ଗତି ତଥା ସମନ୍ୱୟରେ ତ୍ରୁଟି ହିଁ ଯାବତୀୟ ରୋଗ ସୃଷ୍ଟିର ମୂଳ କାରଣ। ଏହି ତ୍ରୁଟି ପରିଲକ୍ଷିତ ହୋଇପାରେ ଶରୀରରେ, ପ୍ରାଣରେ ଏବଂ ମନରେ ମଧ୍ୟ। ଶରୀରରେ ତ୍ରୁଟି ଜାତ ହେଲେ ତ୍ରୁଟିଯୁକ୍ତ ହୋଇପଡ଼େ କୌଣସି ନା କୌଣସି ଅଙ୍ଗର କାର୍ଯ୍ୟ। କୌଣସି ଏକ ନିର୍ଦ୍ଦିଷ୍ଟ ଅଙ୍ଗ ରୋଗାକ୍ରାନ୍ତ ହୋଇପଡ଼ିଲେ, ତାହା ଶରୀରର ଅନ୍ୟ ଅଙ୍ଗଗୁଡ଼ିକର କାର୍ଯ୍ୟଧାରାକୁ ମଧ୍ୟ ପ୍ରତିକୂଳ ଭାବରେ ପ୍ରଭାବିତ କରିଥାଏ। ପୁଣି ରୋଗର ପ୍ରାବଲ୍ୟ ହୋଇପାରେ ଅତି ମାମୁଲି କିମ୍ବା ଅତି ମାରାତ୍ମକ।

ଆମକୁ ସୁରକ୍ଷିତ ରଖିବାରେ ଶରୀରର ନିଜସ୍ୱ ପ୍ରତେଷ୍ଟା ମଧ୍ୟ ବେଶ୍ ବିସ୍ମୟକର। ଉଦାହରଣସ୍ୱରୂପ, କୌଣସି ଖାଦ୍ୟଗ୍ରହଣ ଶରୀରପ୍ରତି କ୍ଷତିକାରକ ବୋଲି ଶରୀର ବିଚାରିଲେ, ସେ

ଖାଦ୍ୟଗ୍ରହଣ ନ କରିବା ପ୍ରତି ସଚେତନ ରହିଥାଏ। ନିଦମାଡ଼ିଲେ ଶୋଇବାପାଇଁ ପ୍ରରୋଚିତ କରେ। କାମ କରିବା ଦରକାର ପଡ଼ିଲେ କାମ କରେ। ତେଣୁ ଶରୀରର ପ୍ରବୃତ୍ତିରେ ଥାଏ ଏକ ନିଶ୍ଚିତତା। କିନ୍ତୁ ମନ ଓ ପ୍ରାଣ ଶରୀର ଉପରେ ପ୍ରଭୁତ୍ୱ ବିସ୍ତାରକରି ଶରୀରର ପ୍ରାକୃତିକ ପ୍ରବୃତ୍ତିକୁ ବିଶୃଙ୍ଖଳ କରିପକାନ୍ତି। ଫଳରେ ବ୍ୟକ୍ତି କ୍ଷତିକାରୀ ବିବେଚିତ ଖାଦ୍ୟକୁ ଖାଇପକାଏ, ନିଦ ନ ମାଡ଼ିଲେ ବି ଶୋଇପଡ଼େ, ଶୋଇଗଲେ ବି ବିଛଣା ଛାଡ଼ିବାର ନାଆଁ ଧରେନି ଏବଂ ସ୍ୱାସ୍ଥ୍ୟପ୍ରତି ପ୍ରତିକୂଳ ହେଉଥିବା କାର୍ଯ୍ୟଗୁଡ଼ିକୁ କରିବାରେ ଦ୍ୱିଧାବୋଧ କରି ନଥାଏ।

ଭୌତିକ ଶରୀରକୁ ଘେରିରହିଛି 'ଭାଇଟାଲ ବଡ଼ି' ବା ପ୍ରାଣିକ ଶରୀର। ଏହା ଶରୀରକୁ କ୍ଲାନ୍ତି, ଦୁର୍ଘଟଣା ଏବଂ ଏପରିକି ସଂକ୍ରମଣରୁ ସୁରକ୍ଷିତ ରଖୁଥାଏ। ଏହି ପ୍ରାଣିକ ଶରୀର ସୁରକ୍ଷିତ ରହିଥିବା ପର୍ଯ୍ୟନ୍ତ ସୁରକ୍ଷା ଉପଭୋଗ କରି ଚାଲିଥାଏ ଆମ ଭୌତିକ ଶରୀର। କିନ୍ତୁ ବେଶିମାତ୍ରାରେ ଆବେଗଗ୍ରସ୍ତ ହୋଇପଡ଼ିଲେ, ସାମାନ୍ୟ କ୍ଲାନ୍ତି ଅନୁଭବ କଲେ କି ମନରେ କିଛି ନା କିଛି ଅସନ୍ତୋଷଭାବର ଉଦ୍ରେକ ହେଲେ, ପ୍ରାଣିକ ଶରୀରର ସେହି ସୁରକ୍ଷା ବଳୟ ଦୁର୍ବଳ ହୋଇପଡ଼ି ରୋଗର ଅନୁପ୍ରବେଶପାଇଁ ପଥ ପରିଷ୍କାର କରିଦିଏ। ଆଧୁନିକ ଚିକିତ୍ସା ବିଜ୍ଞାନ ମଧ୍ୟ ଏକମତ ଯେ ପ୍ରାଣର ସାମ୍ୟାବସ୍ଥା ଅତୁଟ ରହିଥିବା ପର୍ଯ୍ୟନ୍ତ ରୋଗ ସୃଷ୍ଟି ହେବାର ସମ୍ଭାବନା ଅତ୍ୟନ୍ତ କ୍ଷୀଣ।

କିନ୍ତୁ ଯେଉଁମାନେ ଆଧ୍ୟାତ୍ମିକ ସାଧନାରେ ବ୍ରତୀ, ସେମାନେ ପ୍ରାୟତଃ ଦୃଢ଼ତାର ସହ ସକଳ ପ୍ରତିକୂଳ ପରିସ୍ଥିତିର ମୁକାବିଲା କରିପାରନ୍ତି। କିନ୍ତୁ ଯେଉଁମାନଙ୍କରେ ମାନସିକ ଦୃଢ଼ତା ବଦଳରେ ଦୋଦୁଲ୍ୟମାନ ଅବସ୍ଥା ସବାର ହୋଇଥାଏ, ଯେଉଁମାନଙ୍କୁ ସନ୍ଦେହ କବଳିତ କରି ରଖିଥାଏ, ସେପରି ଅବସ୍ଥାରେ ସେମାନଙ୍କଠାରେ ଭାରସାମ୍ୟ ଅବସ୍ଥା ବିପର୍ଯ୍ୟସ୍ତ ହୋଇପଡ଼ି ସେମାନଙ୍କ ପ୍ରଗତିକୁ ବ୍ୟାହତ କରିପକାଏ। ଭାରସାମ୍ୟରେ ବିପର୍ଯ୍ୟୟ ମନ ଓ ପ୍ରାଣକୁ ବିଶୃଙ୍ଖଳିତ କରିପକାଏ ଏବଂ ରୋଗସୃଷ୍ଟିପାଇଁ ଯୋଗାଇଦିଏ ଅନୁକୂଳ ପରିବେଶ। ଏହା ବି ଅବଗତ ହେବା ବାଞ୍ଛନୀୟ ଯେ ନିଷ୍କ୍ରିୟତା ହେଉଛି ଶରୀରର ପ୍ରଧାନ ଶତ୍ରୁ ଓ ଅସୁସ୍ଥତାର ପ୍ରଧାନ ମିତ୍ର।

ସେହିପରି ମନ ବି ଯଦି ନମନୀୟ ନ ରହି ନିଜର ପାରମ୍ପରିକ ଧାରଣା ଓ କୁସଂସ୍କାରରେ ସଂଶୋଧନ ନ ଆଣିବାପାଇଁ ଜିଦ୍ ଧରେ, ତେବେ ତାହା ଅସୁସ୍ଥତା ସୃଷ୍ଟି ନିମନ୍ତେ ପ୍ରଦାନ କରିଥାଏ ସୁଦୃଢ଼ ଭିତ୍ତିଭୂମି।

ଅସୁସ୍ଥତା ଏକ ଆକସ୍ମିକ ଦୁର୍ଘଟଣା ନୁହେଁ। ଆମେ ହିଁ ଆମ ଅସୁସ୍ଥତାର ସ୍ରଷ୍ଟା। ତା'ର ଭିତ୍ତି ସ୍ଥାପନର ସ୍ଥପତି। କାରଣ ଆମେ ନିଜର ନିମ୍ନତର ଚେତନାକୁ ନେଇ ସନ୍ତୁଷ୍ଟ। ଚେତନାକୁ ପ୍ରସାରିତ କରିବା ଏବଂ ଉଚ୍ଚତର ସୋପାନକୁ ଉନ୍ନୀତ କରାଇବାରେ ଆମେ ବିଶେଷ ଧ୍ୟାନ ଦେଇ ନ ଥାଉ। ନିଜର ସେହି ସୀମିତ କ୍ଷୁଦ୍ର, ଖୋଳଟି ଭିତରେ ଆବଦ୍ଧ ରହିଥିବା ସତ୍ତ୍ୱେ ପ୍ରଗତିପାଇଁ ପ୍ରୟାସ କରିବାରେ ଆମେ ବୀତସ୍ପୃହ। ସାଧନା ଆମକୁ ବିଶେଷ ଉତ୍ସାହିତ କରି ନଥାଏ। ଆମ ପାରମ୍ପରିକ ସ୍ଥିତି ଆମ ପାଇଁ ବେଶ୍ ଅନୁକୂଳ ବୋଲି ଆମର ଯେଉଁ ଆତ୍ମସନ୍ତୋଷଭାବ, ତାହା ଆମର ପ୍ରକୃତି ପ୍ରଦତ୍ତ ସୁରକ୍ଷା ବ୍ୟବସ୍ଥାକୁ କରିପକାଏ ଅତିମାତ୍ରାରେ ଅସୁରକ୍ଷିତ। ସେଥିପାଇଁ ଅସୁସ୍ଥତା ତଥା ରୋଗବ୍ୟାଧି ଆମ ସହ ଛାଇ ଭଳି ରହିଆସିଛି।

ମାତ୍ର ରୂପାନ୍ତରିତ ହେବାପାଇଁ ପ୍ରୟାସୀ ନ ହୋଇ ଚିର ସୁସ୍ଥତାର ସପ୍ନ ଦେଖିବା ସମ୍ପୂର୍ଣ୍ଣ ନିରର୍ଥକ ।

ସେଥିପାଇଁ 'ଏହି ସଂସାରରେ ସବୁ ବ୍ୟକ୍ତି ସବୁ ସମୟରେ ଅସୁସ୍ଥ' ବୋଲି ଶ୍ରୀମାଙ୍କ ଉକ୍ତି ସମ୍ପୂର୍ଣ୍ଣ ଯଥାର୍ଥ। ତେବେ ଦିବ୍ୟକୃପା ତଥା ଦିବ୍ୟଶକ୍ତି ଉପରେ ଗଭୀର ଆସ୍ଥା ପୋଷଣପୂର୍ବକ ସମର୍ପଣ କରିପାରିଲେ ବ୍ୟାଧି-ଯନ୍ତ୍ରଣାର ଉପଶମ ପ୍ରକ୍ରିୟା ସୁଗମ ହୋଇଯାଏ। ମା' ଏହା ମଧ୍ୟ କହିଛନ୍ତି, "ଭଗବତ୍ ବିଶ୍ୱାସ ଉପରେ ତୀବ୍ର ଭରସା ରଖି ତା'ର ପ୍ରୟୋଗ ବିଧି ଜାଣିନେଲେ, ଏପରି କୌଣସି ଅସୁସ୍ଥତା ନାହିଁ ଯାହା ସମ୍ପୂର୍ଣ୍ଣ ଆରୋଗ୍ୟ ହୋଇପାରିବନି।"

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ଅସୁସ୍ଥତା ଏବଂ ପୂର୍ଣ୍ଣଯୋଗ: ଶ୍ରୀଅରବିନ୍ଦ ଓ ଶ୍ରୀମା'ଙ୍କ ଦିବ୍ୟବାଣୀର ଏକ ସମନ୍ୱୟ

ଡଃ ସମ୍ପଦାନନ୍ଦ ମିଶ୍ର, ପଣ୍ଡିଚେରୀ

ଶ୍ରୀଅରବିନ୍ଦ ଏବଂ ଶ୍ରୀମା'ଙ୍କ ଦ୍ୱାରା ପ୍ରବର୍ତ୍ତିତ ପୂର୍ଣ୍ଣଯୋଗର ଅନ୍ତର୍ଦୃଷ୍ଟି ଅନୁଯାୟୀ, ମାନବ ସତ୍ତା କେବଳ ଜୈବିକ ନିୟମାବଳୀ ଦ୍ୱାରା ନିୟନ୍ତ୍ରିତ ଏକ ସାଧାରଣ ଶାରୀରିକ ଜୀବ ନୁହେଁ; ବରଂ ଏହା ଭୌତିକ, ପ୍ରାଣିକ, ମାନସିକ, ସୂକ୍ଷ୍ମ-ଭୌତିକ ଏବଂ ଚୈତ୍ୟ ସତ୍ତାର ସମାହାରରେ ଗଠିତ ଏକ ବହୁମୁଖୀ ସଂକୀର୍ଣ୍ଣ ଚେତନା। ପରିଣାମସ୍ୱରୂପ, ସ୍ୱାସ୍ଥ୍ୟ ଏବଂ ରୋଗ କେବଳ କୌଣସି ଜୈବିକ କିମ୍ବା ଶାରୀରିକ କ୍ରିୟାପ୍ରକ୍ରିୟା ନୁହଁନ୍ତି; ବରଂ ଏଗୁଡ଼ିକ ଚେତନାର ଅବସ୍ଥା, ସତ୍ତାର ବିଭିନ୍ନ ଭାଗ ମଧ୍ୟରେ ଥିବା ସମତୁଲତା ଏବଂ ଦିବ୍ୟ ଚେତନା ପ୍ରତି ସାଧକର ଗ୍ରହଣଶୀଳତାର ପରିପ୍ରକାଶ।

ଶ୍ରୀଅରବିନ୍ଦ ଓ ଶ୍ରୀମା'ଙ୍କ ରଚନାବଳୀ ଉପରେ ଆଧାରିତ ଏହି ଆଲେଖ୍ୟଟି ଅସୁସ୍ଥତା ବା ରୋଗର ମୂଳ କାରଣ, ନିବାରଣ, ଏବଂ ପୂର୍ଣ୍ଣଯୋଗାତ୍ମକ ଆଧ୍ୟାତ୍ମିକ ସାଧନା ମାଧ୍ୟମରେ ଦିବ୍ୟ ଆରୋଗ୍ୟ ତଥା ଅତିମାନସିକ ରୂପାନ୍ତରର ପଥ ପ୍ରଦର୍ଶନ କରେ।

୧. ଅସୁସ୍ଥତାର ଆଧିଭୌତିକ ଏବଂ ମାନସିକ ଉତ୍ପତ୍ତି

ଅସମତା ଏବଂ ବିଷମତାର ପ୍ରତୀକ – ରୋଗ

ପୂର୍ଣ୍ଣଯୋଗର ଦର୍ଶନରେ, ସ୍ୱାସ୍ଥ୍ୟ ହେଉଛି ଆନ୍ତରିକ ସାମଞ୍ଜସ୍ୟର ଏକ ସ୍ୱାଭାବିକ ବାହ୍ୟ ପ୍ରକାଶ—ଯାହା ମାନବ ସତ୍ତା ଏବଂ ବ୍ରହ୍ମାଣ୍ଡର ଶକ୍ତିଗୁଡ଼ିକ ମଧ୍ୟରେ ଏକ ସୁଷମ ଏବଂ ସଙ୍ଗଠିତ ସମତୁଲତା ରକ୍ଷା କରେ। ଅପରପକ୍ଷରେ, ରୋଗ ହେଉଛି ଏହି ଗଭୀର ଆନ୍ତରିକ ଭାରସାମ୍ୟର ବିଚ୍ୟୁତି।

ସାଧାରଣ ଅଜ୍ଞାନୀ ମାନବ ପାଇଁ, ଯାହାର ଚେତନା କେବଳ ସ୍ଥୂଳ ଶରୀର ମଧ୍ୟରେ ସୀମାବଦ୍ଧ, ରୋଗ କେବଳ ଜୈବିକ ଅଙ୍ଗପ୍ରତ୍ୟଙ୍ଗର ବିଫଳତା କିମ୍ବା ବାହ୍ୟ ଜୀବାଣୁଙ୍କ ଆକ୍ରମଣ ପରି ମନେହୁଏ। କିନ୍ତୁ ଯେତେବେଳେ ବ୍ୟକ୍ତି ଆଧ୍ୟାତ୍ମିକ ଜୀବନ ଓ ଯୋଗ ସାଧନାରେ ବ୍ରତୀ ହୁଏ, ରୋଗର ମୂଳ କାରଣ ପରିବର୍ତ୍ତିତ ହୋଇଯାଏ। ଏହା ସତ୍ତାର ଭିନ୍ନ ଭିନ୍ନ ଅଂଶ ମଧ୍ୟରେ ଉପୁଜୁଥିବା ଅସମତାର ପରିଣାମ ଭାବେ ଦେଖାଦିଏ—ବିଶେଷକରି ସାଧକର ଉର୍ଦ୍ଧ୍ୱମୁଖୀ ଅନ୍ତର-ଆକାଂକ୍ଷା ଏବଂ ବାହ୍ୟ ସ୍ଥୂଳ ଶରୀର ତଥା ଅବଚେତନାର ଜଡ଼ତା, କାଠିନ୍ୟ ଓ ପ୍ରତିରୋଧ ମଧ୍ୟରେ ସୃଷ୍ଟି ହେଉଥିବା ସଂଘର୍ଷର ପ୍ରତୀକ ସାଜେ।

ସୂକ୍ଷ୍ମ-ଶାରୀରିକ ଆବରଣ ଓ ରୋଗର ପ୍ରବେଶ ପଥ

ଶ୍ରୀଅରବିନ୍ଦଙ୍କର ଏକ ମୌଳିକ ଦିବ୍ୟ ଅନ୍ତର୍ଦୃଷ୍ଟି ହେଉଛି—ରୋଗ କେବେହେଲେ ସ୍ଥୂଳ ଶରୀରରେ ପ୍ରଥମେ ଉତ୍ପନ୍ନ ହୁଏ ନାହିଁ। ଶାରୀରିକ ଲକ୍ଷଣ ରୂପେ ପ୍ରକାଶ ପାଇବା ପୂର୍ବରୁ, ରୋଗ ପ୍ରାଣିକ-ଶାରୀରିକ କୋଷ କିମ୍ବା ଶରୀରକୁ ଘେରି ରହିଥିବା ସୂକ୍ଷ୍ମ ବାୟୁମଣ୍ଡଳ (Subtle-Physical Atmosphere) ମାଧ୍ୟମରେ ଅତିକ୍ରମ କରେ।

- **ସୂକ୍ଷ୍ମ ସୁରକ୍ଷା ବଳୟ:** ଯଦି ଜଣେ ସାଧକ ସୂକ୍ଷ୍ମ ଚେତନାରେ ଜାଗ୍ରତ ଓ ସଚେତନ ରହେ, ତେବେ ସେ ରୋଗର କମ୍ପନ କିମ୍ବା ଆଗମନକୁ ଏହି ସୂକ୍ଷ୍ମ ସୀମାରେ ହିଁ ଚିହ୍ନଟ କରିପାରେ ଏବଂ ତାହା ସ୍ଥୂଳ ଶରୀରକୁ ଆକ୍ରାନ୍ତ କରିବା ପୂର୍ବରୁ ପ୍ରତିହତ କରିଦିଏ।

- **ସୁରକ୍ଷାରେ ଶିଥିଳତା:** ନିଦ୍ରା ସମୟରେ, ଅବଚେତନାର ଦୁର୍ବଳ ମୁହୂର୍ତ୍ତରେ, କିମ୍ବା ଅସାବଧାନତା, ମାନସିକ ଶ୍ରାନ୍ତି ଓ ଅଚେତନତାରେ ଯେତେବେଳେ ସୁରକ୍ଷା ଆବରଣ ଭଙ୍ଗ ହୁଏ, ସେତେବେଳେ ରୋଗ ସ୍ଥୂଳ ଶରୀରରେ ଗ୍ରହଣୀୟ ହୋଇ ପ୍ରବେଶ କରେ।

ପ୍ରାଣିକ ଅବସାଦ, ଗ୍ରହଣଶୀଳତା ଏବଂ ପ୍ରତିକୂଳ ଶକ୍ତିର ଆକ୍ରମଣ

ଶ୍ରୀମା ଦର୍ଶାଇଛନ୍ତି ଯେ କ୍ଷୁଦ୍ର ଜୀବାଣୁ ଓ ଭୂତାଣୁ କେବଳ ଗୌଣ ମାଧ୍ୟମ ମାତ୍ର; ରୋଗ ସୃଷ୍ଟି ପାଇଁ ସେମାନଙ୍କୁ ଶରୀରରେ ଏକ 'ଅନୁକୂଳ କ୍ଷେତ୍ର' ଆବଶ୍ୟକ ହୋଇଥାଏ। ଯେତେବେଳେ ଜଣେ ବ୍ୟକ୍ତିର ପ୍ରାଣିକ ଶକ୍ତି ହ୍ରାସ ପାଏ କିମ୍ବା ଦିବ୍ୟ ଆଲୋକ ଓ ଶକ୍ତି ପ୍ରତି ଗ୍ରହଣଶୀଳତା କମିଯାଏ, ସେତେବେଳେ ଏହି ଅନୁକୂଳ କ୍ଷେତ୍ର ପ୍ରସ୍ତୁତ ହୁଏ।

- **ପ୍ରାଣିକ ଅବସାଦର କାରଣ:** ବିଷାଦ, ସଂଶୟ, ଭୟ, ଚିନ୍ତା, ନିରାଶା, ଅହଂକାରପୂର୍ଣ୍ଣ ଆତ୍ମକେନ୍ଦ୍ରିକତା ଏବଂ ଆନ୍ତରିକ ବିଷମତା ମଣିଷକୁ ବ୍ରହ୍ମାଣ୍ଡର ମହାପ୍ରାଣଶକ୍ତି ଏବଂ ଦିବ୍ୟ କୃପାରୁ ବିଚ୍ଛିନ୍ନ କରିଦିଏ।

- **ବିରୋଧୀ ଶକ୍ତିର ଆକ୍ରମଣ:** ପୂର୍ଣ୍ଣଯୋଗର ପରିପ୍ରେକ୍ଷୀରେ, ଅନେକ ସମୟରେ ରୋଗ ହେଉଛି ବିରୋଧୀ କିମ୍ବା ପ୍ରତିକୂଳ ଶକ୍ତିମାନଙ୍କର ଆକ୍ରମଣ—ଯାହାର ଲକ୍ଷ୍ୟ ହେଉଛି ସାଧକର ସହନଶୀଳତାକୁ ପରୀକ୍ଷା କରିବା, ବିଶ୍ୱାସକୁ କ୍ଷୁଣ୍ଣ କରିବା ଏବଂ ଆଧ୍ୟାତ୍ମିକ ପ୍ରଗତିରେ ବାଧା ସୃଷ୍ଟି କରିବା। ରୋଗାକ୍ରାନ୍ତ ହେବା କୌଣସି ଦିବ୍ୟ ଦଣ୍ଡ ନୁହେଁ; ବରଂ ଏହା ଏକ ଆହ୍ୱାନ, ଯାହାକୁ ଗଭୀର ଶ୍ରଦ୍ଧା, ଧୈର୍ଯ୍ୟ ଏବଂ ଆନ୍ତରିକ ସଚେତନତା ଦ୍ୱାରା ଜୟ କରିବାକୁ ହୋଇଥାଏ।

୨. ଆରୋଗ୍ୟ ଓ ନିବାରଣ ପାଇଁ ଯୌଗିକ ଦୃଷ୍ଟିକୋଣ

ସମତା ଏବଂ ପ୍ରଶାନ୍ତିର ସାଧନା

ଶାରୀରିକ-ପ୍ରାଣିକ ସତ୍ତାରେ ଏକ ପ୍ରଶାନ୍ତ, ସ୍ଥିର ଏବଂ ସୁଦୃଢ଼ ଭିତ୍ତି ସ୍ଥାପନ କରିବା କେବଳ ରୋଗ ନିବାରଣ ପାଇଁ ନୁହେଁ, ବରଂ ଉଚ୍ଚତର ଆଧ୍ୟାତ୍ମିକ ଶକ୍ତିକୁ ଧାରଣ କରିବା ପାଇଁ ନିତାନ୍ତ ଆବଶ୍ୟକ। ଯେତେବେଳେ ଦିବ୍ୟ ଆନନ୍ଦ କିମ୍ବା ଉଚ୍ଚତର ଆଧ୍ୟାତ୍ମିକ ଶକ୍ତି ଏକ ସ୍ଥିରତାହୀନ କିମ୍ବା ବିଷମ ଶରୀରରେ ଅବତରଣ କରେ, ସେତେବେଳେ ନାଡ଼ୀସଂସ୍ଥାନ ଅତ୍ୟଧିକ ସଂକୁଚିତ ହୋଇପଡ଼େ। ଶରୀରରେ ପ୍ରଶାନ୍ତି ନଥିଲେ ସାଧକ ସେହି ଦିବ୍ୟ ସାମର୍ଥ୍ୟକୁ ସମ୍ଭାଳି ନପାରି ଅସ୍ଥିରତା, ମାନସିକ ବିପର୍ଯ୍ୟୟ କିମ୍ବା ଶାରୀରିକ ରୋଗର ଶିକାର ହୁଏ।

ତେଣୁ ଶରୀର-ଚେତନାରେ ଶାନ୍ତି, ନିଶ୍ଚଳତା ଏବଂ ସମତା ରକ୍ଷା କରିବା—ସୁନିଦ୍ରା, ପରିମିତ ଆହାର, ଏବଂ ବାହ୍ୟ ପରିସ୍ଥିତି ଦ୍ୱାରା ନାଡ଼ୀମଣ୍ଡଳକୁ ଅବିଚଳିତ ରଖିବା ପ୍ରକୃତ ସ୍ୱାସ୍ଥ୍ୟର ମୂଳଦୁଆ।

ରୋଗକୁ ଆଧ୍ୟାତ୍ମିକ ଅଗ୍ରଗତିରେ ରୂପାନ୍ତରିତ କରିବା

ରୋଗାକ୍ରାନ୍ତ ହେଲେ ଶ୍ରୀଅରବିନ୍ଦ ଓ ଶ୍ରୀମା ସାଧକମାନଙ୍କୁ ନିରାଶା କିମ୍ବା ଆତ୍ମ-ସହାନୁଭୂତିରେ କାଳାତିପାତ ନକରିବାକୁ ପରାମର୍ଶ ଦିଅନ୍ତି। ଏହା ପରିବର୍ତ୍ତେ, ଏକ ସକାରାତ୍ମକ ଓ ଗତିଶୀଳ ଦୃଷ୍ଟିକୋଣ ଗ୍ରହଣ କରିବା ବିଧେୟ:

୧. ଆତ୍ମ-ସମୀକ୍ଷା: ବୁଝିବାକୁ ହେବ ଯେ ରୋଗ ହେଉଛି ସତ୍ତାର କୌଣସି ଅନ୍ଧକାରାଚ୍ଛନ୍ନ କ୍ଷେତ୍ର, ଅବଚେତନ ଗତିବିଧି କିମ୍ବା ପ୍ରତିରୋଧର ସୂଚନା—ଯାହା ଆଲୋକ ଓ ରୂପାନ୍ତର ଆବଶ୍ୟକ କରେ।

୨. ଭୟର ବର୍ଜନ: ଭୟ ହେଉଛି ରୋଗର ସବୁଠାରୁ ବଡ଼ ଉତ୍‌ପ୍ରେରକ, କାରଣ ଏହା ଶାରୀରିକ ଚେତନାକୁ ସେହି ସମସ୍ତ ବିପଦପୂର୍ଣ୍ଣ ସୂଚନା ଓ କମ୍ପନ ପ୍ରତି ଅନାବୃତ କରିଦିଏ ଯାହାକୁ ସେ ଭୟ କରେ।

୩. ଗ୍ରହଣଶୀଳତାର ପୁନଃସ୍ଥାପନ: ଅବସାଦ ଓ ସ୍ୱାର୍ଥପର ଚିନ୍ତାରୁ ମୁକ୍ତ ହୋଇ ଚେତନାକୁ ଦିବ୍ୟ କୃପା ଆଡ଼କୁ ଉନ୍ମୁକ୍ତ କରିବା ଏବଂ ରୋଗାକ୍ରାନ୍ତ ଶରୀରରେ ଦିବ୍ୟ ଶାନ୍ତି, ଆଲୋକ ଓ ଶକ୍ତିର ଅବତରଣ ପାଇଁ ପ୍ରାର୍ଥନା କରିବା।

ଏହିପରି ଭାବେ, ପ୍ରତ୍ୟେକ ରୋଗ ଆତ୍ମ-ସମୀକ୍ଷା ଏବଂ ଆଧ୍ୟାତ୍ମିକ ପ୍ରଗତିର ମାଧ୍ୟମ ପାଲଟିଯାଏ, ଯାହା ସାମୟିକ ବିପର୍ଯ୍ୟୟକୁ ଦିବ୍ୟ ସତ୍ୟର ବିଜୟରେ ପରିଣତ କରେ।

୩. ମନ, ଔଷଧ ଏବଂ ଚିକିତ୍ସା ବିଜ୍ଞାନର ଭୂମିକା

ମାନସିକ ଦାସତ୍ୱ ଏବଂ ଚିକିତ୍ସାତ୍ମକ ସଂସ୍କାର

ଶ୍ରୀମା ଲକ୍ଷ୍ୟ କରିଛନ୍ତି ଯେ, ଆଧୁନିକ ମାନବ ଚିକିତ୍ସା ବିଜ୍ଞାନ ଓ ମାନସିକ ଜ୍ଞାନ ଉପରେ ଅତ୍ୟାଧିକ ନିର୍ଭରଶୀଳ ହୋଇ ଡାକ୍ତର ଏବଂ ଔଷଧର ଦାସ ହୋଇପଡ଼ିଛି। ମାନବ ମନ ରୋଗର କାରଣ ଏବଂ ନିରାକରଣ ସମ୍ପର୍କରେ କେତେକ ଦୃଢ଼ ଧାରଣା ସୃଷ୍ଟି କରିନିଏ। ପ୍ରତ୍ୟେକ ଦଶନ୍ଧିରେ ଚିକିତ୍ସା ସିଦ୍ଧାନ୍ତ ବଦଳିଯାଏ—ଯାହା ପୂର୍ବରୁ କ୍ଷତିକାରକ ଥିଲା, ତାହା ପରବର୍ତ୍ତୀ ସମୟରେ ଉପକାରୀ ଭାବେ ଗ୍ରହଣ କରାଯାଏ; ତଥାପି ମନ ଏହି ସିଦ୍ଧାନ୍ତଗୁଡ଼ିକୁ ପୂର୍ଣ୍ଣ ସତ୍ୟ ଭାବେ ଗ୍ରହଣ କରେ।

ରୋଗ ଏବଂ ଚିକିତ୍ସା ପ୍ରତି ଏହି ମାନସିକ ଆସ୍ଥା ଶରୀରର ସ୍ୱାଭାବିକ ଆରୋଗ୍ୟ ଶକ୍ତିକୁ ନଷ୍ଟ କରିଦିଏ। ଯେତେବେଳେ ମନ ଗ୍ରହଣ କରେ ଯେ କୌଣସି ପରିସ୍ଥିତି ରୋଗ ସୃଷ୍ଟି କରିବ କିମ୍ବା ନିର୍ଦ୍ଦିଷ୍ଟ ଔଷଧ ବିନା ଆରୋଗ୍ୟ ସମ୍ଭବ ନୁହେଁ, ସେତେବେଳେ ଶରୀର ମନର ଏହି ଆଦେଶ ନିକଟରେ ଆତ୍ମସମର୍ପଣ କରେ।

ଔଷଧର ପ୍ରକୃତ କାର୍ଯ୍ୟକାରିତା

ଶ୍ରୀଅରବିନ୍ଦ ଏବଂ ଶ୍ରୀମା'ଙ୍କ ମତରେ, ଔଷଧଗୁଡ଼ିକ କେବଳ ସେମାନଙ୍କର ସାପେକ୍ଷିକ ରାସାୟନିକ ପ୍ରକ୍ରିୟା ଦ୍ୱାରା ରୋଗ ଭଲ କରନ୍ତି ନାହିଁ। ବରଂ, ସେଗୁଡ଼ିକ ଶରୀରର ବିଶ୍ୱାସ ପାଇଁ ଏକ ମାନସିକ ସାହାରା କିମ୍ବା 'ଅବଲମ୍ବନ' ଭାବରେ କାର୍ଯ୍ୟ କରନ୍ତି:

- **ମାନସିକ ସେତୁ:** ଯେତେବେଳେ ଜଣେ ବ୍ୟକ୍ତି ଔଷଧ ଗ୍ରହଣ କରେ, ଶରୀର ନିଜକୁ ଆଶ୍ୱାସନା ଦିଏ, 'ମୁଁ ଔଷଧ ଖାଇଛି, ତେଣୁ ମୁଁ ସ୍ୱସ୍ଥ ହୋଇଯିବି।' ଏହି ମାନସିକ ଆଶ୍ୱାସନା ଶରୀରର ଅନ୍ତର୍ନିହିତ ସ୍ୱ-ଆରୋଗ୍ୟ ଶକ୍ତିକୁ ଜାଗ୍ରତ କରେ।

- **ଆରୋଗ୍ୟର ସାମର୍ଥ୍ୟ:** ସାଧକର ଚେତନାରେ ଅନେକ ସ୍ତର ଥାଏ—ସାଧାରଣ ବ୍ୟକ୍ତି ଯିଏ ସାମାନ୍ୟ ଅସୁସ୍ଥତା ପାଇଁ ଚିକିତ୍ସା ଉପରେ ନିର୍ଭର କରେ, ତାହାଠାରୁ ଆରମ୍ଭ କରି ଜଣେ ଉଚ୍ଚକୋଟୀର ଯୋଗୀ ଯିଏ କେବଳ ଆନ୍ତରିକ ଆଧ୍ୟାତ୍ମିକ ସାମର୍ଥ୍ୟ ଦ୍ୱାରା ବିଷକୁ ବିନଷ୍ଟ କରିପାରନ୍ତି କିମ୍ବା ଶାରୀରିକ କ୍ଷତକୁ ସମ୍ପୂର୍ଣ୍ଣ ଶାନ୍ତ କରିପାରନ୍ତି।

ଯଦିଓ ସ୍ଥୂଳ ଶରୀର-ଚେତନାରେ ପର୍ଯ୍ୟାପ୍ତ ଶ୍ରଦ୍ଧା କିମ୍ବା ଯୌଗିକ ଶକ୍ତିର ଅଭାବ ଥିଲେ ବାହ୍ୟ ଚିକିତ୍ସା କରାଯାଇପାରେ, ତଥାପି ଏହା ଏକ ସାମୟିକ ସାହାଯ୍ୟ ମାତ୍ର, ଚୂଡ଼ାନ୍ତ ସମାଧାନ ନୁହେଁ।

- ଯନ୍ତ୍ରଣା ଏବଂ ଅବଚେତନାର ପ୍ରତିରୋଧର ସମ୍ମୁଖୀନ

ଯନ୍ତ୍ରଣା ପ୍ରତି ମାନସିକ ଦୃଷ୍ଟିକୋଣ

ଯନ୍ତ୍ରଣା ହେଉଛି ସ୍ଥୂଳ ପଦାର୍ଥ କିମ୍ବା ଶରୀରର ପ୍ରତିରୋଧର ପ୍ରତୀକ, ଯେତେବେଳେ ଏହା ଉପରେ ଏପରି ଶକ୍ତିର ପ୍ରଭାବ ପଡ଼େ ଯାହାକୁ ସେ ସୁଷମ ଭାବେ ଆତ୍ମସାତ୍ କରିପାରେ ନାହିଁ। ପୂର୍ଣ୍ଣଯୋଗରେ, ଶାରୀରିକ ଯନ୍ତ୍ରଣାର ସମ୍ମୁଖୀନ ହେବା ପାଇଁ ଆବଶ୍ୟକ:

- **ଅନାସକ୍ତି ଏବଂ ଆତ୍ମ-ବିଚ୍ଛେଦ:** ବାସ୍ତବ ସତ୍ତା (ଆତ୍ମା କିମ୍ବା କେନ୍ଦ୍ରୀୟ ଚେତନା) କୁ ସ୍ଥୂଳ ଶରୀରଠାରୁ ପୃଥକ୍ କରିବା। ଭୟ କିମ୍ବା ଉତ୍ତେଜନା ଦ୍ୱାରା ଯନ୍ତ୍ରଣାକୁ ନବଢ଼ାଇ, ତାହାକୁ ନିରପେକ୍ଷ ଭାବେ ନିରୀକ୍ଷଣ କରିବା।

- **ଶାନ୍ତିର ଅବତରଣ:** ଆକ୍ରାନ୍ତ ଶାରୀରିକ ଅଞ୍ଚଳରେ ନାଡ଼ୀଗତ ଉତ୍ତେଜନା ବଦଳରେ ଶାନ୍ତ, ପ୍ରଶାନ୍ତ ଏବଂ ସ୍ଥିର ଦିବ୍ୟ ଶକ୍ତିକୁ ସ୍ଥାପନ କରିବା।

ଅବଚେତନାର ମୂଳ

ଶାରୀରିକ ରୋଗର ଏକ ବଡ଼ ଅଂଶ ଅବଚେତନା (Subconscient)—ଯାହା ଅତୀତର ଅଭ୍ୟାସ, ବଂଶାନୁକ୍ରମିକ ସଂସ୍କାର, କାୟିକ ଯାନ୍ତ୍ରିକତା ଏବଂ ଗୁପ୍ତ ଭୟର ଆଧାର—ସେଠାରେ ନିହିତ ଥାଏ। ଜାଗ୍ରତ ମନ ଏବଂ ପ୍ରାଣ ଆରୋଗ୍ୟ ପାଇଁ ଆକାଂକ୍ଷା କଲେ ମଧ୍ୟ, ଶରୀରର ଅବଚେତନ ସଂସ୍କାର ରୋଗ କିମ୍ବା ଦୁର୍ବଳତାର ଅଭ୍ୟାସକୁ ଧାରଣ କରିରଖେ। ପୂର୍ଣ୍ଣଯୋଗରେ ଏହି ଅବଚେତନା ସ୍ତରରେ ଦିବ୍ୟ ଆଲୋକ ପ୍ରବେଶ କରାଇ ସେହି ସଂସ୍କାରଗୁଡ଼ିକୁ ରୂପାନ୍ତରିତ କରିବାକୁ ପଡ଼ିଥାଏ।

୫. ପୂର୍ଣ୍ଣ ସ୍ୱାସ୍ଥ୍ୟ ଏବଂ ଅତିମାନସିକ ରୂପାନ୍ତର

ଆପେକ୍ଷିକ ଯୌଗିକ ରୋଗ-ପ୍ରତିରୋଧକତା ଏବଂ ଅତିମାନସିକ ସୁରକ୍ଷା

ଶ୍ରୀଅରବିନ୍ଦ ଯୌଗିକ ଇଚ୍ଛାଶକ୍ତି ଦ୍ୱାରା ପ୍ରାପ୍ତ ସ୍ୱାସ୍ଥ୍ୟ ଏବଂ ଅତିମାନସିକ ରୂପାନ୍ତର (Supramental Transformation) ଦ୍ୱାରା ସାଧିତ ଅଭେଦ୍ୟ ସୁରକ୍ଷା ମଧ୍ୟରେ ଏକ ସ୍ପଷ୍ଟ ପାର୍ଥକ୍ୟ ଦେଖାଇଛନ୍ତି:

ସୁରକ୍ଷାର ପ୍ରକାର କ୍ରିୟାବିଧିବିଶେଷତା ଏବଂ ସୀମାବଦ୍ଧତା

ଯୌଗିକ / ମାନସିକ-ପ୍ରାଣିକ ସୁରକ୍ଷା ସଚେତନ ପ୍ରଚେଷ୍ଟା, ଜାଗରୁକତା ଏବଂ ଯୌଗିକ ଶକ୍ତି ପ୍ରୟୋଗ ଦ୍ୱାରା ପ୍ରାପ୍ତ। ପ୍ରଭାବଶାଳୀ ଏବଂ ବ୍ୟାବହାରିକ, କିନ୍ତୁ ଆପେକ୍ଷିକ। ଏହା ସତତ ସମତା ଉପରେ ନିର୍ଭର କରେ। ସମତା ବିଘ୍ନ ପ୍ରତିହତ ହେଲେ (ଯଥା: ଗଭୀର ନିଦ୍ରା କିମ୍ବା ଅବଚେତନାର ଆକ୍ରମଣ ସମୟରେ) ରୋଗ ପ୍ରବେଶ କରିପାରେ।

ଅତିମାନସିକ ସୁରକ୍ଷା ଅତିମାନସିକ ଆଲୋକ ଓ ଶକ୍ତି ଦ୍ୱାରା ସ୍ଥୂଳ ପଦାର୍ଥର ସମ୍ପୂର୍ଣ୍ଣ ରୂପାନ୍ତର ଦ୍ୱାରା ପ୍ରାପ୍ତ। ଅବିଚଳିତ, ସ୍ୱୟଂକ୍ରିୟ ଏବଂ ଚୂଡ଼ାନ୍ତ। ଏହା ଅନ୍ୟ ଶକ୍ତି ବିରୋଧରେ ସଂଗ୍ରାମ ନୁହେଁ, ବରଂ ନୂତନ ଅତିମାନସିକ ଶାରୀରିକ ପ୍ରକୃତିର ମୌଳିକ ନିୟମ, ଯେଉଁଠାରେ ରୋଗର ଅସ୍ତିତ୍ୱ ଅସମ୍ଭବ।

ପୂର୍ଣ୍ଣ ସ୍ୱାସ୍ଥ୍ୟର ଦିବ୍ୟ ଦୂରଦୃଷ୍ଟି

ପୂର୍ଣ୍ଣଯୋଗରେ ପୂର୍ଣ୍ଣ ସ୍ୱାସ୍ଥ୍ୟ କେବଳ ରୋଗର ଅଭାବ ନୁହେଁ; ବରଂ ଏହା ଶାରୀରିକ ସିଦ୍ଧିର ଏକ ସକ୍ରିୟ ସ୍ୱରୂପ, ଯାହାର ବିଶେଷତା ହେଉଛି:

୧. ଅକ୍ଷୟ ଶକ୍ତି ଏବଂ ନମନୀୟତା: ସ୍ଥୂଳ ଶରୀର ଅତ୍ୟନ୍ତ ନମନୀୟ, ଗ୍ରହଣଶୀଳ ଏବଂ କ୍ଲାନ୍ତି ବିନା ଉଚ୍ଚତର ଆଧ୍ୟାତ୍ମିକ କମ୍ପନକୁ ସହ୍ୟ କରିବାକୁ ସମର୍ଥ ହୁଏ।

୨. ସୁଷମ ସମନ୍ୱୟ: ଦିବ୍ୟ ନିର୍ଦ୍ଦେଶନାରେ ଶାରୀରିକ, ପ୍ରାଣିକ, ମାନସିକ ଏବଂ ଚୈତ୍ୟ ସତ୍ତାର ସମ୍ପୂର୍ଣ୍ଣ ଐକ୍ୟ ଓ ସାମଞ୍ଜସ୍ୟ।

୩. ଜଡ଼ ପଦାର୍ଥର ରୂପାନ୍ତର: ସ୍ଥୂଳ ପଦାର୍ଥରେ ଅତିମାନସିକ ଶକ୍ତିର ପ୍ରତିଷ୍ଠା ଦ୍ୱାରା ରୋଗ, ଜରା ଏବଂ ମୃତ୍ୟୁ ଉପରେ ଚୂଡ଼ାନ୍ତ ବିଜୟ।

ଉପସଂହାର

ସଂକ୍ଷେପରେ, ଶ୍ରୀଅରବିନ୍ଦ ଏବଂ ଶ୍ରୀମା ସ୍ୱାସ୍ଥ୍ୟ ଓ ରୋଗ ସମ୍ପର୍କରେ ଏପରି ଏକ ଦିବ୍ୟ ଦୃଷ୍ଟିକୋଣ ପ୍ରଦାନ କରିଛନ୍ତି ଯାହା ପାରମ୍ପରିକ ଚିକିତ୍ସା ବିଜ୍ଞାନ ଏବଂ ସନ୍ୟାସ ମାର୍ଗର ସୀମାକୁ ଅତିକ୍ରମ କରେ। ରୋଗ କୌଣସି ଆକସ୍ମିକ ସ୍ଥୂଳ ଘଟଣା ନୁହେଁ କିମ୍ବା ମାନବଜାତି ପାଇଁ ଚିରନ୍ତନ ଅଭିଶାପ ନୁହେଁ; ବରଂ ଏହା ଏକ ସାମୟିକ ଅସମତା ଏବଂ ଆତ୍ମ-ସଂଶୋଧନର ଆହ୍ୱାନ।

ସମତା ଅବଲମ୍ବନ, ମନକୁ ଭୟ ଓ ମାନସିକ ସଂସ୍କାରରୁ ମୁକ୍ତ କରିବା, ସୂକ୍ଷ୍ମ-ଶାରୀରିକ ସ୍ତରରେ ସଚେତନ ରହିବା ଏବଂ ଶାରୀରିକ ଚେତନାକୁ ନିରନ୍ତର ଦିବ୍ୟ କୃପା ଆଡ଼କୁ ଉନ୍ମୁକ୍ତ ରଖିବା ଦ୍ୱାରା, ପୂର୍ଣ୍ଣଯୋଗର ସାଧକ ବାହ୍ୟ ନିର୍ଭରଶୀଳତାରୁ ନିଜର ଆନ୍ତରିକ ସାମର୍ଥ୍ୟ ଆଡ଼କୁ ଅଗ୍ରସର ହୁଏ—ଯାହା ଅତିମାନସିକ ସ୍ୱାସ୍ଥ୍ୟ ଏବଂ ଶାରୀରିକ ରୂପାନ୍ତରର ପଥ ପ୍ରଶସ୍ତ କରେ।

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ସବୁ ସମୟରେ ମା' ଆମ ସାଥିରେ ରହି ସମସ୍ତ ବସ୍ତୁ ଦେଖୁଛନ୍ତି- ଏହି ଧାରଣାକୁ ଅଭ୍ୟାସ କଲେ ବହୁତ ଅନ୍ୟାୟ କାର୍ଯ୍ୟରୁ ମୁକ୍ତ ହୋଇ ପାରିବେ। ଯଥାର୍ଥରେ ଭଗବାନ୍ ସର୍ବସ୍ଥାନରେ ରହି ସବୁକିଛି ଦେଖୁଛନ୍ତି। ଯଦି ଈଶ୍ୱର ଭରସା କରିପାରିବେ, ତେବେ କ୍ରମଶଃ ଭୟ ଦୂର ହେବ ଏବଂ ନିର୍ଭୟତା ବଢ଼ିବ। ଏହାଫଳରେ କ୍ରମଶଃ ସତ୍ୟମାର୍ଗରେ ଅଗ୍ରସର ହେବାକୁ ଲାଗିବେ। ଏହା ବିକଶିତ ହେଲେ ଜୀବନର ପରମ ଲକ୍ଷ୍ୟ ପରମାନନ୍ଦ, ପରମଶାନ୍ତି, ପରମ ଜ୍ଞାନ ସ୍ୱରୂପ ଭଗବାନଙ୍କୁ ପ୍ରାପ୍ତ ହୋଇପାରିବେ। ଜୀବନ ହେବ ଆନନ୍ଦମୟ। ଭଗବାନଙ୍କୁ ଭରସା କଲେ ଭଗବାନ୍ ପ୍ରାପ୍ତ ହୁଅନ୍ତି ଏବଂ ଜୀବନର ପ୍ରତ୍ୟେକ ଛୋଟ ବଡ଼ ଘଟନାରେ ପୂର୍ଣ୍ଣ ସାହାଯ୍ୟ କରନ୍ତି।

ଶ୍ରୀ ରାମକୃଷ୍ଣ ଦାଶ

ଜଗନ୍ନାଥଙ୍କୁ ଜ୍ୱର୍

ଡାକ୍ତର ଆଶୁତୋଷ ପ୍ରସାଦ ମିଶ୍ର

ମହାପ୍ରଭୁ ଶ୍ରୀଜଗନ୍ନାଥ କେଉଁ ଅନାଦିକାଳରୁ ଶ୍ରୀକ୍ଷେତ୍ରରେ ମନୁଷ୍ୟ ଲୀଳା ପରିପ୍ରକାଶ କରୁଛନ୍ତି। ସ୍କନ୍ଦପୁରାଣ ଉତ୍କଳଖଣ୍ଡ ପୁରୁଷୋତ୍ତମ ମାହାତ୍ମ୍ୟର ପ୍ରଥମ ଅଧ୍ୟାୟ ଦ୍ୱିତୀୟ ଶ୍ଲୋକ ଅନୁସାରେ-

"ପୁରୁଷୋତ୍ତମାଖ୍ୟଂ ସୁମହତ୍ କ୍ଷେତ୍ରଂ ପରମପାବନମ୍
ଯତ୍ରାସ୍ତେ ଦାରୁବତନୁଃ ଶ୍ରୀଶୋ ମାନୁଷ୍ୟଲୀଳୟା।"

(ସ୍କ.ପୁ. ୧/୨)

ସ୍ୱୟଂ ଶ୍ରୀପୁରୁଷୋତ୍ତମ ନୀଳାଦ୍ରି ମଣ୍ଡଳରେ ଦାରୁରୂପକୁ ଧାରଣ କରି ମନୁଷ୍ୟଲୀଳାକୁ ପରିପ୍ରକାଶ କରୁଛନ୍ତି। ପ୍ରଭୁଙ୍କର ପ୍ରତ୍ୟେକ ଲୀଳାରେ ମାନବୀୟ ଛଟା ସ୍ପଷ୍ଟ ରୂପରେ ପରିଲକ୍ଷିତ। କୋଟିଏ ବ୍ରହ୍ମାଣ୍ଡର ନାଥ ମଣିମା ମହାବାହୁ ନିଜେ ମାନବଲୀଳାରେ ବିଳସିତ ହେବା ଛଳରେ ଭକ୍ତଜନଙ୍କୁ ଶିକ୍ଷା ଓ ଆନନ୍ଦ ଯୁଗପତ୍ ପ୍ରଦାନ କରୁଛନ୍ତି। ମହାପ୍ରଭୁଙ୍କର ମହାର୍ଘ ମନୁଷ୍ୟଲୀଳାର ଏକ ଅଂଶ ବ୍ୟାଧି। ଯେଉଁ ପ୍ରଭୁଙ୍କର ନାମୋଚ୍ଚାରଣ ମାତ୍ରକେ ଜୀବର ସମସ୍ତ ବ୍ୟାଧି, ଆଧି, ଉପାଧି ବିନିର୍ମୁକ୍ତ ହୁଏ, ସେ ପୁଣି ବ୍ୟାଧିଗ୍ରସ୍ତ ହେବା ପରମ ଆଶ୍ଚର୍ଯ୍ୟପୂର୍ଣ୍ଣ। ବିଷ୍ଣୁସହସ୍ରନାମ ଅନୁସାରେ -

"ଯସ୍ୟ ସ୍ମରଣ ମାତ୍ରେଣ ଜନ୍ମ ସଂସାର ବନ୍ଧନାତ୍
ବିମୁଚ୍ୟତେ ନମସ୍ତସ୍ମୈ ବିଷ୍ଣବେ ପ୍ରଭୋ ବିଷ୍ଣବେ।"

ଏହା ହିଁ ଶ୍ରୀଜଗନ୍ନାଥ ସଂସ୍କୃତିର ବୈଶିଷ୍ଟ୍ୟ ଓ ସ୍ୱତନ୍ତ୍ରତା। ପାଣ୍ଡବଗୀତା ଅନୁସାରେ ଯେଉଁ ମନୁଷ୍ୟ ପ୍ରତିନିତ୍ୟ ପ୍ରଭୁଙ୍କର ତିନିଗୋଟି ନାମ - ଗୋବିନ୍ଦ, ଅଚ୍ୟୁତ, ଅନନ୍ତଙ୍କ ଶ୍ରଦ୍ଧାଚାଟକ ଜପକରେ, ସେ ନୀରୋଦ ହୋଇଥାଏ। କିନ୍ତୁ ସେହି ମହାପ୍ରଭୁ ନିଜେ ଜ୍ୱରାତୁର ହେବା ରହସ୍ୟପୂର୍ଣ୍ଣ। ସ୍ନାନପୂର୍ଣ୍ଣିମା ଦିନ ସକାଳଧୂପ ପୂଜା ବଢ଼ିବା ପରେ ସାହାଣମେଲା ଦର୍ଶନ ହୋଇ ହାତୀବେଶ ମଇଲମ ହେବା ଉତ୍ତାରେ ଶ୍ରୀଅଙ୍ଗରେ ଜ୍ୱରାନୁଭୂତି ହୋଇଥାଏ। ଏହାପରେ ବାହୁଡା ପହଣ୍ଡି ହୋଇ ଚତୁର୍ଦ୍ଧା ବିଗ୍ରହ ଅନବସର ଗୃହରେ ଅବସ୍ଥାନ କରନ୍ତି। ତେବେ ପ୍ରକୃତରେ କ'ଣ ଶ୍ରୀଜଗନ୍ନାଥଙ୍କୁ ଜ୍ୱର ହୁଏ ?

ସ୍ନାନ ପୂର୍ଣ୍ଣିମା ପୂର୍ବର ଚାରିଦିନ ଠାରୁ ଅର୍ଥାତ୍ ରକ୍ମିଣୀହରଣ ଏକାଦଶୀ ଦିନ ନିଜେ ମହାପ୍ରଭୁ ମଦନମୋହନ ରୂପରେ ବୀରବେଶରେ ବିଭୂଷିତ ହୋଇ ବିମଳାଙ୍କ ମନ୍ଦିର ନିକଟରୁ ରକ୍ମିଣୀଙ୍କୁ ହରଣ କରି ଆଣିବା ବେଳେ ମାର୍ଗରେ ସରସ୍ୱତୀ ମନ୍ଦିର ସମ୍ମୁଖରେ ବରବେଶରେ ଆସିଥିବା ଶିଶୁପାଳକୁ ବନ୍ଦୀ କରନ୍ତି। ମଙ୍ଗୁଳା କନ୍ୟାଙ୍କୁ ଅପହରଣ କରି ଆସିଥିବାରୁ ମଧ୍ୟ ରାତ୍ରରେ ମହାପ୍ରଭୁଙ୍କ ସହିତ ବିବାହ ଅନୁଷ୍ଠିତ ହୁଏ। ଅର୍ଥାତ୍ ଚିନ୍ତା, ଅକ୍ଲାନ୍ତ ପରିଶ୍ରମ, ରାତିଅନିଦ୍ରା ଏସବୁ ଜ୍ୱରର ମୂଳକାରଣ ବୋଲି ବିବେଚିତ ହୁଏ।

ତା'ପରଦିନ ଦେବଦମ୍ପତ୍ତି ଶ୍ରୀକ୍ଷେତ୍ର ନଗର ପରିକ୍ରମାରେ ଯାଇ ରାତିସାରା ଭିନ୍ନ ଭିନ୍ନ ସେବକ, ଶ୍ରୀ ଯମେଶ୍ୱର ମହାଦେବଙ୍କ ମନ୍ଦିରରେ ପଞ୍ଚୁଗ୍ରାସୀ କରି ଅର୍ଦ୍ଧରାତ୍ରିରେ ମନ୍ଦିରକୁ ପ୍ରତ୍ୟାବର୍ତ୍ତନ କରନ୍ତି। ସେଦିନ ମଧ୍ୟ ଭିନ୍ନ ପ୍ରକାରର ଭୋଜନ ଗ୍ରହଣ, ପରିଭ୍ରମଣ ଏବଂ ରାତ୍ରିଅନିଦ୍ରାରେ ଦିନଟି ବ୍ୟତୀତ ହୁଏ। ତା'ର ଦୁଇଦିନ ପରେ ଚତୁର୍ଥୀର ଲାଜା ହୋମ କାର୍ଯ୍ୟ ବଢ଼ିବା ପରେ ଚତୁର୍ଦ୍ଦଶୀର ମଧ୍ୟରାତ୍ରରେ ଚତୁର୍ଦ୍ଧା ବିଗ୍ରହ ଛେଚାକଚା ଖାଇ ଧାଡ଼ି ପହଣ୍ଡି କ୍ରମରେ ସ୍ନାନମଣ୍ଡପରେ ବିରାଜମାନ କରନ୍ତି। ଅଚଳ ମହାମେରୁ ଚଳଚଞ୍ଚଳ ହେବାରୁ ଶ୍ରୀଅଙ୍ଗରୁ ଗମଗମ ଗଳଦଘର୍ମ ବହି ଆସେ, ସେ ଲାଗି ଦତ୍ତ ମହାପାତ୍ର ସେବକମାନେ ଝାଳକୁ ପୋଛି ଦେବା ପାଇଁ ଅଧରପୋଛା କରିଥାନ୍ତି। ତା ପରେ ସାରାବର୍ଷ ନିରୋଧନ ହୋଇଥିବା ସୁନାକୁଅରୁ ଅଷ୍ଟୋତ୍ତର ଶତ ଜଳକୁମ୍ଭ ଉତ୍ତୋଳନ ହୁଏ। ସେଥିରେ ପୁଣି ଚନ୍ଦନ, କର୍ପୁର, କେଶର ଓ ଚୁଆ ଇତ୍ୟାଦି ଚାରୋଟି ଶୀତଳ ଦ୍ରବ୍ୟ ମିଳିତ ହୁଅନ୍ତି। ଜଳକୁ ମାଟିପାତ୍ରରେ ରଖାଯାଇଥାଏ। ପରେ ଜଳପୂଜା ହୋଇ ୧୦୮ କୁମ୍ଭଜଳକୁ ଶ୍ରୀଅଙ୍ଗରେ ଅଭିଷେକ କରାଯାଏ। ବର୍ଷରୁ ଥରେ ପ୍ରତ୍ୟକ୍ଷ ସ୍ନାନ

କରନ୍ତି ମହାପ୍ରଭୁ, ସନ୍ଧ୍ୟା ୬ଟା ସୁଦ୍ଧା ୫ଥର ଭୋଜନ ଗ୍ରହଣ କରୁଥିବା ଠାକୁର ସେଦିନ ଖାଡା ଉପାସରେ ଥାନ୍ତି। ଏଣେ ଜ୍ୟେଷ୍ଠ ପୂର୍ଣ୍ଣିମାର ପ୍ରଚଣ୍ଡ ରୌଦ୍ରତାପ, ମଥାନ ଉପରେ ସୂର୍ଯ୍ୟ, ଖାଲିପେଟ ଓ ୧୦୮ ଦଣ୍ଡା ଅତୁଠ ଜଳକୁମ୍ଭରେ ସ୍ନାନପରେ ଶ୍ରୀଅଙ୍ଗରେ ଜ୍ୱର ଆସିଯାଏ। ଜ୍ୱରର ସମସ୍ତ ଲକ୍ଷଣ ପରିପ୍ରକାଶ ହୁଏ କଳାଶ୍ରୀମୁଖର। ଉପରୋକ୍ତ ଯେଉଁ କାରଣମାନ ବର୍ଣ୍ଣିତ ହେଲେ, ଯଦି କୌଣସି ମନୁଷ୍ୟ ସହିତ ୫ ଦିନ ଧରି ଉକ୍ତ ଘଟଣାମାନ ଘଟିଯାଏ, ତେବେ ସେ ନିଶ୍ଚୟ ଜ୍ୱରାନ୍ୱିତ ହେବ। କହିବା ବାହୁଲ୍ୟ, ଆମ ମଣିଷ ରୂପୀ ମଣିମା ମଧ୍ୟ ଜରେଇ ଥାଆନ୍ତି।

କେତେକ ସେବକ ମତପ୍ରକାଶ କରନ୍ତି ସ୍ନାନପୂର୍ଣ୍ଣିମା ଦିନ ରାତିରେ ଶ୍ରୀଅଙ୍ଗରେ ତାପମାତ୍ରା ଅନୁଭବ ହୁଏ। ଲାଗି ତୁଳସୀପତ୍ର ଦେହର ତାପରେ ମଉଳି ଯାଆନ୍ତି। ପରେ ପ୍ରଭୁ ବାହୁଡା ପହଣ୍ଡି କ୍ରମରେ ଅନବସର ଗୃହରେ ଅବସ୍ଥାନ କରନ୍ତି। ଏକ ପକ୍ଷ ପର୍ଯ୍ୟନ୍ତ ପ୍ରଭୁଙ୍କର ଜ୍ୱରୋପଚାର ଆରମ୍ଭ ହୁଏ। ଫୁଲୁରି ତେଲଲାଗି, ଓଷୁଅଲାଗି, ଦଶମୂଳ ମୋଦକ ମଣୋହି, ଖଳିଲାଗି, ଖଡ଼ିଲାଗି ପରେ ଠାକୁର ସୁସ୍ଥ ହୋଇ ନବଯୌବନ ବେଶରେ ଭକ୍ତଙ୍କୁ ଦର୍ଶନ ଦିଅନ୍ତି। ଅନବସର ଗୃହ ପାଲଟିଯାଏ ଆୟୁର୍ବେଦର ରସାୟନଶାଳା। ସତରେ ଏ ଲୀଳା ଜଗତରେ କୌଣସି ସ୍ଥାନରେ ଦେଖିବାକୁ ମିଳେ ନାହିଁ। ସମ୍ପୂର୍ଣ୍ଣ ସତନ୍ତ୍ର।

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ଜଣେ ଯେତେବେଳେ ବାହ୍ୟ ପରିବର୍ତ୍ତନ ଆବଶ୍ୟକ କରୁଥାନ୍ତି, ଏହାର ଅର୍ଥ ଏହି ଯେ ତାଙ୍କର ଆଦୌ ଆନ୍ତର ଉନ୍ନତି ହେଉ ନାହିଁ। କାରଣ ଯାହାର ଆନ୍ତର ଉନ୍ନତି ହେଉଥାଏ ସେମାନେ ସର୍ବଦା ସେହି ଏକା ବାହ୍ୟ ପରିବେଶରେ ବେଶ୍ ଭଲରେ ଜୀବନଯାପନ କରିପାରିବେ ଏବଂ ସେହି ଏକା ବାହ୍ୟ ପରିବେଶ ନିରନ୍ତର ସେମାନଙ୍କ ସମ୍ମୁଖରେ ନୂଆ ନୂଆ ସତ୍ୟ ସ୍ଫୁରଣ କରୁଥିବ।

ସମସ୍ତ ବାହ୍ୟ ପରିବର୍ତ୍ତନ ଆନ୍ତର ରୂପାନ୍ତରର ଏକ ସ୍ୱତଃସ୍ଫୂର୍ତ୍ତ ଏବଂ ଅପରିହାର୍ଯ୍ୟ ପରିପ୍ରକାଶ ହେବା ଏକାନ୍ତ ବାଞ୍ଛନୀୟ। ସାଧାରଣତଃ ସାଂସାରିକ ଜୀବନରେ ସକଳ ଉନ୍ନତି ଆମେ ଯାହା ଅନ୍ତରରେ ଅଗ୍ରଗତି କରିଛୁ ତାହାର ଏକ ବାହ୍ୟ ପ୍ରସ୍ଫୁଟନ ହେବା ଉଚିତ।

୨୯ ମାର୍ଚ୍ଚ, ୧୯୫୮ ***ଶ୍ରୀମା***

ସ୍କୁଲ୍ ପିଲାଙ୍କ ବିକାର୍ ଓ ବିଶୃଙ୍ଖଳାର୍ ଉତ୍ସ

ଡାକ୍ତର ପ୍ରଶାନ୍ତ କୁମାର ପାତ୍ର

ସ୍ୱାସ୍ଥ୍ୟ ହିଁ ଏକମାତ୍ର ସମ୍ପଦ। ସୁସ୍ଥ ଜୀବନ ପାଇଁ ସତ୍ତାର ବିଭିନ୍ନ ଅଂଶ ମଧ୍ୟରେ ପାରସ୍ପରିକ ସଙ୍ଗତି ଅନିବାର୍ଯ୍ୟ। ଆଉ ଏହି ସଙ୍ଗତି ବଦଳିଯାଉଥିବା ଆମ ପରିବେଶ, ପରିସ୍ଥିତି ଏବଂ ବାହ୍ୟ ଶକ୍ତିରାଜି ସହ ବଜାୟ ରହିବା ଚାହି ଏକ ସମୟ ଗତିଶୀଳ ଅବସ୍ଥରେ। ଅର୍ଥାତ୍ ଆମ ସତ୍ତାର ଶରୀର, ମନ, ପ୍ରାଣ ଓ ଆଧ୍ୟାତ୍ମିକ ପରିସର ମଧ୍ୟରେ ଗୋଟାଏ ପାରସ୍ପରିକ ଗତିଶୀଳ ଅଥଚ ଚିରନ୍ତନ ସାମ୍ୟାବସ୍ଥା ବଜାୟ ରହିଲେ ଯାଇ ଅତୁଟ ସ୍ୱାସ୍ଥ୍ୟର ମାଧୁର୍ଯ୍ୟକୁ ଆମେ ଉପଭୋଗ କରିପାରିବା।

ଶ୍ରୀମା କୁହନ୍ତି - "ଶରୀର, ପ୍ରାଣ ଓ ମନ ସମ୍ପୂର୍ଣ୍ଣ ସଙ୍ଗତି, ସମନ୍ୱୟ, ଶୃଙ୍ଖଳା, ସମତା, ଶାନ୍ତି ଓ ସ୍ଥିରତାର ପରିବେଶରେ ଅବସ୍ଥାନ କରିବାହିଁ ସୁସ୍ଥାବସ୍ଥା।"

ଶାସ୍ତ୍ରରେ କୁହାଯାଇଛି - "ରୋଗ ଶୋକ ପରିତାପ ବନ୍ଧନ ବ୍ୟସନାନି ଚ, ଆତ୍ମାପରାଧ ବୃକ୍ଷାଣାମ୍ ଫଳାନ୍ୟେତାନି ଦେହିତମ୍" ନିଜ ଅପରାଧ ବୃକ୍ଷର ଫଳ ସରୂପ, ରୋଗ, ଶୋକ, ପରିତାପ, ବନ୍ଧନ, ବିପର୍ଯ୍ୟୟ ଇତ୍ୟାଦି ସବୁ ଆସିଥାଏ। ତେବେ ସରଳ ନିଷ୍ପାପ ଶିଶୁମାନେ ବିଶେଷ କରି ବିଦ୍ୟାଳୟର ଛାତ୍ରଛାତ୍ରୀଗଣ ଯେଉଁମାନେ ସାଧାରଣ ସମର୍ଥ ଓ ସକ୍ରୀୟ, ଯେକୌଣସି ପରିସ୍ଥିତିରେ ସତଃସ୍ଫୁର୍ତ୍ତ ଖୁସୀର ବାର୍ତ୍ତାବହ, ସେମାନେ କିଛି ତଥା କଥିତ ଅପରାଧ ନକରିବି ଅନେକ ବିକାର ବିଶୃଙ୍ଖଳାର ଶୀକାର ହୁଅନ୍ତି। ଏହାର କାରଣ ଶରୀରର ଅସୁସ୍ଥତା ବିଷୟରେ ସେମାନଙ୍କ ଅଜ୍ଞାନତା, ଅବଚେତନା ଉତ୍ସାରିତ ତ୍ରୁଟିପୂର୍ଣ୍ଣ ଜୀବନଶୈଳୀ ତଥା ପ୍ରାଣର ଉଦ୍ଦାମତା ଯୋଗୁଁ ହୋଇପାରେ। ଅବଶ୍ୟ ଏହା ସତ୍ୟ ଯେ ଶରୀରର କୌଣସି ବିକାର ହେଉ ଅବା ସତ୍ତାର କିଛି ବି ବିଶୃଙ୍ଖଳା ଦୀର୍ଘସମୟ ଧରି ସେମାନଙ୍କଠାରେ ତିଷ୍ଠିପାରେ ନାହିଁ, କାରଣ ରୋଗ ବିଷୟରେ ସଚେତନ ନଥାଇ ପୁନଶ୍ଚ ସ୍ୱାସ୍ଥାବସ୍ଥାକୁ ଫେରିପାଇବାକୁ ସେମାନେ ବିକଳ ହୁଅନ୍ତି। ଫଳରେ ରୋଗ ହାରମାନେ ଛୋଟ ପିଲାମାନଙ୍କର ସରଳ ଓ ସ୍ଥିର ଆସ୍ଥହା ନିକଟରେ।

ମନେପଡ଼େ ଜୁଲ୍‌ସ୍ ରୋମେନ୍‌ଙ୍କ ହାସ୍ୟରସାତ୍ମକ ନାଟକ "ଡକ୍ଟର ନକ୍" ଯେଉଁଥିରେ ଜଣେ "ସୁସ୍ଥ ମଣିଷ"ର ସଂଜ୍ଞା ନିରୁପିତ ହୁଏ ଏକ ରୋଗଗ୍ରସ୍ତ ମଣିଷ ରୂପେ ଯେ କି ନିଜ ବିକାର ସମ୍ବନ୍ଧରେ ଅଜ୍ଞ।

ଏହି ପରିପ୍ରେକ୍ଷୀରେ ଆମେ ଜାଣି ରଖିବା ଦରକାର ଯେ ବୟସ୍କମାନଙ୍କ ଅଚେତନତା ଓ ଅସାବଧାନତା ପିଲାଙ୍କ ପ୍ରତ୍ୟକ୍ଷ ଯତ୍ନରେ ଜଡ଼ିତ ବାପାମାଆ ଜ୍ଞାତି ପରିଜନ, ସ୍କୁଲର ଶିକ୍ଷକମାନଙ୍କର ସ୍ୱାସ୍ଥ୍ୟପ୍ରତି ଦୃଷ୍ଟିକୋଣ, ଯଥାର୍ଥ ମନୋବୃତ୍ତି ତଥା ଶ୍ରଦ୍ଧାଶୀଳ ଆତ୍ମୀୟତାର ଅଭାବ ସାଙ୍ଗକୁ ବନ୍ଧୁ ଓ ସହପାଠୀଙ୍କ ତ୍ରୁଟିପୂର୍ଣ୍ଣ, ହାଲୁକା ପରାମର୍ଶ ଏବଂ ସମସାମୟିକ ସ୍ୱାସ୍ଥ୍ୟ ବ୍ୟବସ୍ଥା ଅଧିକାଂଶ ରୋଗ ଓ ବିଭ୍ରାଟକୁ ସୃଷ୍ଟି କରିଥାଏ।

ସାଧାରଣଭାବେ ସ୍କୁଲ ପିଲାଙ୍କୁ ଆକ୍ରାନ୍ତ କରୁଥିବା କିଛି ମୁଖ୍ୟ ବିକାର ଓ ବିଶୃଙ୍ଖଳାକୁ ନିମ୍ନଶ୍ରେଣୀଭୁକ୍ତ ପୂର୍ବକ କରାଯାଇପାରେ। ପ୍ରାସଙ୍ଗିକତା ଦୃଷ୍ଟିରୁ ପ୍ରଥମେ ବିଶୃଙ୍ଖଳା ବିଷୟରେ ଆମେ ସ୍ପଷ୍ଟ ହୋଇଯିବା ଉଚିତ।

ଶରୀରକୁ ସୁସ୍ଥ ରଖିବାପାଇଁ ଅହରହ କ୍ରିୟାରତ ଆମର ସମସ୍ତ ମୁଖ୍ୟ ଅଙ୍ଗ ପ୍ରତ୍ୟଙ୍ଗ ତଥା ଏକାଧିକ ଅଙ୍ଗାଦିର ସମଷ୍ଟିରେ ପ୍ରସ୍ତୁତ ସମସ୍ତ ପ୍ରଣାଳୀ। ଏକ ନିର୍ଦ୍ଦିଷ୍ଟ ତାପମାତ୍ରା (୩୭ ଡିଗ୍ରୀ ସେଣ୍ଟିଗ୍ରେଡ଼) ନିର୍ଦ୍ଦିଷ୍ଟମାତ୍ରାରେ ରକ୍ତରେ ଗ୍ଲୁକୋଜ (ଶର୍କରା), ଅମ୍ଳଜାନ ତଥା ଅନ୍ୟାନ୍ୟ ଲବଣାଂଶ, ହରମୋନ୍, ପାଚକରସ ଇତ୍ୟାଦିକୁ ବଜାୟ ରଖିବା ପାଇଁ ଏକ ବିଦ୍ଧିବଧ ଅଥଚ ଅତି ସୂକ୍ଷ୍ମ ଭାରସାମ୍ୟ ନିତ୍ୟ ଚାଲିଥାଏ ଏକ ନିର୍ଦ୍ଦିଷ୍ଟ ଶୃଙ୍ଖଳାରେ...। ଏହି ଶୃଙ୍ଖଳାର ଟିକିଏ ବି ବିଚ୍ୟୁତି ଘଟିଲେ ବିରାଟ ପରିବର୍ତ୍ତନ ବା ବିଭ୍ରାଟ ଦେଖାଦିଏ, ଯାହା ରୋଗର ଲକ୍ଷଣରୂପେ ପ୍ରକାଶିତ ହୋଇଥାଏ। ଏହିପରି କିଛି ବିଶୃଙ୍ଖଳା

ଯାହା ସାଧାରଣ ଭାବେ ସ୍କୁଲ ପିଲାଙ୍କଠାରେ ଦେଖାଯାଏ, ସେଗୁଡ଼ିକ ହେଲା ଜ୍ୱର, ପେଟବ୍ୟଥା, ମୁଣ୍ଡବ୍ୟଥା, ବାନ୍ତିହେବା, ହଠାତ୍ ଅଚେତ ହୋଇଯିବା, ନାକରୁ ରକ୍ତ ପଡ଼ିବା, ହଠାତ୍ ଅଣନିଶ୍ୱାସୀ ଲାଗିବା, ଛାତି ଦରଜ ଇତ୍ୟାଦି।

୧) ଜ୍ୱର :- ଜ୍ୱର କୌଣସି ରୋଗ ନୁହେଁ, ବରଂ ରୋଗର ଲକ୍ଷଣ ରୂପେ ଆସିଥାଏ। ଡାକ୍ତରୀ ପରାମର୍ଶର ମୁଖ୍ୟ କାରଣ ରୂପେ ଜ୍ୱର ହିଁ ରହି ଆସିଛି। ବାହାରୁ ଆସି ଶରୀରରେ ପ୍ରବେଶ କରିଥିବା ଭୂତାଣୁ, ଜୀବାଣୁ ଏବଂ ଅନ୍ୟ ରୋଗ ସୃଷ୍ଟିକାରୀ ତତ୍ତ୍ୱ ବିରୁଦ୍ଧରେ ଆମ ଶରୀରର ପ୍ରତିରକ୍ଷା ମୂଳକ ପ୍ରତିକ୍ରିୟା (ସାଇଟୋକାଇନ୍ କ୍ଷରଣ ଯଥା – IL-1, IL-16, TNF ଏବଂ PGE2 ଇତ୍ୟାଦି)। ଫଳରେ ମସ୍ତିଷ୍କର ହାଇପୋଥାଲାମସ୍ରେ ଥିବା ତାପମାତ୍ରା ନିୟନ୍ତ୍ରକ (Thermostat) ଏକ ଉଚ୍ଚତର ଅବସ୍ଥାକୁ ଉନ୍ନୀତ ହୁଏ, ଯାହା ଫଳରେ ଶରୀରର ସାଧାରଣ ତାପମାତ୍ରା ବୃଦ୍ଧିପାଇ ଉଚ୍ଚତର ମାତ୍ରା ହାସଲକରେ (= 100°F) ଯାହାକୁ ଆମେ ଜ୍ୱର ବୋଲି ଅଭିହିତ କରିଥାଉ। ଏହାର ପରିଣାମ ସ୍ୱରୂପ ଦେହର ରକ୍ତ ଉତ୍ତପ୍ତ ହୁଏ ଯେଉଁଥିରେ ଅଣୁଜୀବାଣୁ ବିନାଶ ହୁଏ। ତେଣୁ ଜ୍ୱର ଆମ ଶତ୍ରୁ ନୁହେଁ, ଶରୀରର ମିତ୍ର ରୂପେ ଆସିଥାଏ। ରୋଗ ରକ୍ଷାକାରୀ ଶକ୍ତି (Immunity) ସକ୍ରିୟ ଥିଲେ ହିଁ ଜ୍ୱର ଭଳି ପ୍ରତିକ୍ରିୟା ଶରୀର ଦେଖାଇଥାଏ।

୨) ପେଟବ୍ୟଥା :- ପେଟଭିତରର ଅଙ୍ଗପ୍ରତ୍ୟଙ୍ଗ ବିଶେଷ କରି ଆମ ପାଚନ ପ୍ରଣାଳୀ ସିଧାସଳଖ ମନ ଦ୍ୱାରା ସତତ ପ୍ରଭାବିତ ହୋଇପାରେ। ମନର ଉଦ୍‌ବିଘ୍ନତା, ଭୟ, ଦ୍ୱନ୍ଦ, ସାଧାରଣ ପେଟବ୍ୟଥାକୁ ଜଟିଳ କରିଦିଏ ଏବଂ ଦୀର୍ଘସ୍ଥାୟୀ ବି କରିପାରେ। ସରଳ ଭାଷାରେ କହିଲେ – ଶରୀର ଓ ପ୍ରାଣ (ଭାବମୟ ସତ୍ତା) ମଧ୍ୟରେ ଅସଙ୍ଗତି ଯୋଗୁଁ ଏହା ହୁଏ। କାରଣ ମନର ନୀରବତା ଓ ପେଟବ୍ୟଥା ସହ ଅସଂଲଗ୍ନତା ଫଳରେ ଏହା ଦୂରୀଭୂତ ହୁଏ ଅଥବା ତା'ର ତୀବ୍ରତା ଯଥେଷ୍ଟ କମିଯାଏ।

୩) ମୁଣ୍ଡବ୍ୟଥା :- "ଶିରୋନାସ୍ତି ଶିରୋପୀଡ଼ା"। ମୁଣ୍ଡବ୍ୟଥା ଅତି ସାଧାରଣ ଅନୁଭୂତି ପ୍ରାୟ ସଭିଙ୍କର। ତେବେ ଅସହ୍ୟ ମୁଣ୍ଡବ୍ୟଥା, ବିଶେଷ କରି କପାଳରେ ହେଉଥିଲେ ଆଖିର ଦୃଷ୍ଟିଶକ୍ତି ପରୀକ୍ଷା କରିନେବା ଜରୁରୀ। ଆଜିକାର "ସୋସିଆଲ ମିଡ଼ିଆ" ଯୁଗରେ ଅତ୍ୟଧିକ ସ୍କ୍ରିନ୍‌ଟାଇମ୍ ହେତୁ ସ୍କୁଲପିଲାମାନଙ୍କଠାରେ ମୁଣ୍ଡବ୍ୟଥାର ପ୍ରକୋପ କ୍ରମଶଃ ବଢୁଥିବାର ମନେ ହୁଏ।

୪) ବାନ୍ତି ହେବା :- ଏହା ଶରୀର ପ୍ରାଣ ଏବଂ ମନର ଅସଙ୍ଗତି ଯୋଗୁଁ ସଂଘଟିତ ହୁଏ। ମନ ଓ ପ୍ରାଣର ଅନିୟନ୍ତ୍ରିତ କ୍ରିୟା ହେତୁ ଶରୀର ଖାଦ୍ୟ ଗ୍ରହଣ ଏବଂ ପାଚନ ନିମନ୍ତେ ପ୍ରସ୍ତୁତ ନଥାଏ। ଫଳରେ ଅନାବଶ୍ୟକ ଖାଦ୍ୟ ପଦାର୍ଥ କିମ୍ବା ଆଂଶିକ ହଜମ ହୋଇଥିବା ପଦାର୍ଥ ବାନ୍ତି ଆକାରରେ ବାହାରିଯାଏ।

୫) ହଠାତ୍ ଅଚେତ୍ ହୋଇଯିବା :- ପ୍ରାର୍ଥନା ବେଳେ ଠିଆ ହୋଇଥିବା ଛାତ୍ରଟିଏ ଅଥବା ପ୍ୟାରେଡ୍ ଗ୍ରାଉଣ୍ଡରେ ଅଧିକ ସମୟ ଜାଗ୍‌ତିଆର ହୋଇ ଦଣ୍ଡାୟମାନ ଛାତ୍ରଟିଏ ହଠାତ୍ ବେହୋସ୍ ହେବା ଦେଖାଯାଏ। ଖାଲିପେଟରେ ବେଶୀ ସମୟ ରହିବା, ଅଧିକ ସମୟ ଠିଆ ହୋଇ ରହିବା ଦ୍ୱାରା ମସ୍ତିଷ୍କକୁ ଆବଶ୍ୟକୀୟ ରକ୍ତ ସଞ୍ଚାଳନ ଏବଂ ଫଳତଃ ନିତ୍ୟ ଅନିବାର୍ଯ୍ୟ ଗ୍ଲୁକୋଜ କିଛି ମୁହୁର୍ତ୍ତ ସକାଶେ ପହଞ୍ଚିପାରେ ନାହିଁ। ସେଥିପାଇଁ କିଛି କ୍ଷଣ ପାଇଁ ଜଣେ ବେହୋସ୍ ହୋଇଯାଇପାରେ। ତୁରନ୍ତ ନିକଟସ୍ଥ ଛାୟାପ୍ରଦ ସ୍ଥାନରେ ଲମ୍ବକରି ଶୋଇଦେବା ଫଳରେ ଏବଂ ପିନ୍ଧିଥିବା ବସ୍ତ୍ର, ବେଲଟ୍ ଓ ଜୋତା ଆଦିକୁ ହୁଗୁଳା କରିଦେଲେ ପିଲାଟି ଚେତା ଫେରିପାଏ। କ୍ୱଚିତ କେବେ ବୃକ୍କୀୟ ଧମନୀର ଗଠନଗତ ସଂକୋଚନ ଯୋଗୁଁ ବର୍ଦ୍ଧିଷ୍ଣୁ ଉଚ୍ଚ ରକ୍ତଚାପ ଫଳରେ ବି ଏହା ହୋଇପାରେ।

୬) ନାକରୁ ରକ୍ତ ପଡ଼ିବା :- ଅବଚେତନା ବା ନିଶ୍ଚେତନା ଯୋଗୁଁ ହୁଏ। ଅନ୍ୟ ମନସ୍କ ଭାବରେ ଆଙ୍ଗୁଠି ପୁରାଇ ନାକପୁଡ଼ା ସଫା କରିବାର ବଦଭ୍ୟାସ ହିଁ ମୁଖ୍ୟ କାରଣ।

୭) ଅଣନିଃଶ୍ୱାସୀ ଲାଗିବା :- ବିଚଳିତ ମନ, ଅତ୍ୟଧିକ ଭାବାବେଗ, ଉତ୍ତେଜନା, ହିଂସ୍ର ଆଚରଣ ଏବଂ ଅସୁମାରୀ ପୁନଃ ପରିପ୍ରକାଶ ରୂପେ ଅନୁଭୂତ ହୁଏ। ନିଃଶ୍ୱାସରେ କଷ୍ଟ ହେଲେ ତୁରନ୍ତ ନିକଟସ୍ଥ ସ୍ୱାସ୍ଥ୍ୟ କେନ୍ଦ୍ରକୁ ଯାଇ ପରାମର୍ଶ ଲୋଡ଼ିବା ବାଞ୍ଛନୀୟ।

୮) ଛାତିଦରଜ :- ସାଧାରଣତଃ ଆଗରୁ କେବେ କରିନଥୁବା ଭାରି କାମ କରିବା ଫଳରେ ପଞ୍ଜରାସ୍ଥି ମଧ୍ୟରେ ଥିବା ପତଳା, ନମନୀୟ ମାଂସପେଶୀ ଟାଣି ହେବା ଫଳରେ ହୋଇପାରେ, ଯାହାକୁ "କଷ୍ଟ୍ରୋକଣ୍ଡ୍ରାଇଟିସ୍" ବୋଲି ଡାକ୍ତରମାନେ କହିଥାନ୍ତି। ନିଜ ସାମର୍ଥ୍ୟଠୁ ବଳି ଅଧିକ ଓଜନ ଉଠାଇ ଅନ୍ୟର ପ୍ରଶଂସାର ପାତ୍ର ହେବାର ମାନସିକତା ଯୋଗୁଁ, ଶରୀରର ଏହା ଏକ ପ୍ରକାର କ୍ରୋଧଭରା ଅଭିମାନ। କିଛି ଆଘାତ ଜନିତ ବ୍ୟଥା ବି ଛାତିରେ ହୋଇପାରେ ଆଉ ଯଦି ଛାତିର ମଧ୍ୟ ଭାଗରେ ଭୀଷଣ ବ୍ୟଥା ସାଙ୍ଗକୁ ଅଣନିଃଶ୍ୱାସି ଲାଗିବା ଓ ପ୍ରଚୁର ଝାଳ ବହିବା ଦେଖାଯାଏ, ତେବେ ଏହା ହୃଦ୍‌ଘାତର ଲକ୍ଷଣ ହୋଇପାରେ, ଯଦିଓ ୨୦ ବର୍ଷ ପୂର୍ବରୁ ଏହାର ସମ୍ଭାବନା କମ୍।

ଚାଲନ୍ତୁ, ବର୍ତ୍ତମାନ କେତୋଟି ମୁଖ୍ୟ ବିକାର ସମ୍ବନ୍ଧରେ ଆଲୋଚନା କରିବା।

୧) ସଂକ୍ରାମକ ରୋଗ

☐ **ତରଳ ଝାଡ଼ା:** ଦୁଇ କିମ୍ବା ତା'ଠୁ ଅଧିକଥର ପାଣି ଭଳି ଝାଡ଼ାହେବା। ଝାଡ଼ା ସହ ଜ୍ୱର ହୋଇପାରେ ଏବଂ ରକ୍ତବି ପଡ଼ିପାରେ।

☐ **କାରଣ:** ମୂଖ୍ୟତଃ ଦୂଷିତ ଖାଦ୍ୟ ଓ ପାନୀୟ ତଥା ହାତର ସ୍ୱଚ୍ଛତା ପ୍ରତି ଅଚେତନତା, ଶରୀରର ଆବଶ୍ୟକତା ଅନୁସାରେ ନଖାଇ ଲୋଭର ବଶବର୍ତ୍ତୀ ହୋଇ ଅତ୍ୟଧିକ ତଥା ଅନାବଶ୍ୟକ ଖାଦ୍ୟ ଗ୍ରହଣ କରିବା। ହାତଧୋଇବାର ଉପଯୁକ୍ତ ସ୍ଥାନ ଓ ଉପକରଣ (ତରଳ ସାବୁନ୍ ସକ୍ରିୟ ଥିବା ପାଣିକଳ, "ଓ୍ୱାସ୍ ବେସିନ" ଇତ୍ୟାଦି) ର ଅଭାବ ଅଥବା ଶିକ୍ଷକମାନେ ନିଜେ ଯଦି ଏହା ଆଚରଣ କରୁନଥିବେ।

☐ **ଜଣ୍ଡିସ୍:** ଭୂତାଣୁ ସଂକ୍ରମଣ ଜନିତ ଯକୃତର ପ୍ରଦାହ, ଯେଉଁଥିରେ ଆଖି ଓ ସମଗ୍ର ଦେହ ହଳଦୀ ରଙ୍ଗ ପଡ଼ିଯାଏ ଏବଂ ପରିସ୍ରା ବି ହଳଦୀ ରଙ୍ଗ କିମ୍ବା ସୋରିଷ ତେଲ ଭଳି ଲାଲ୍ ହୁଏ। ଜ୍ୱର ସହିତ ଆରମ୍ଭ ହେଉଥିବା ଏହି ରୋଗରେ ପିଲାମାନେ ବେଶୀ କଷ୍ଟ ପାଆନ୍ତି। ଶରୀର ଦୁର୍ବଳ ଲାଗେ, ବାନ୍ତି ଲାଗେ, ଭୋକ ଲାଗେ ନାହିଁ, ଫଳରେ ଶରୀର ଶୁଖିଯାଏ, ଦୁର୍ବଳ ଲାଗେ।

ସାଧାରଣତଃ ହେପାଟାଇଟିସ୍ A, C ଏବଂ E ଭୂତାଣୁ ଯୋଗୁଁ ଅଧିକାଂଶ ଜଣ୍ଡିସ୍ ହୋଇଥାଏ। ମୁଖ୍ୟ କାରଣ ସଂକ୍ରମିତ ଖାଦ୍ୟ, ପାନୀୟ ଯଥା ରାସ୍ତାକଡ଼ରେ ମିଳୁଥିବା ଖାଦ୍ୟପଦାର୍ଥ ମାଧ୍ୟମରେ ଏହା ପିଲାମାନଙ୍କ ଦେହକୁ ଆସିଥାଏ। ଖାଦ୍ୟ ପ୍ରସ୍ତୁତକାରୀ ଓ ପରଷି ଦେଉଥିବା ଲୋକଙ୍କର ଅଚେତନତା ଏବଂ ଅସ୍ୱଚ୍ଛ ହାତ ମାଧ୍ୟମରେ ଅନ୍ୟ ଏକ ବିପଜ୍ଜନକ ଜଣ୍ଡିସ୍ ବି ଆକ୍ରାନ୍ତ କରିପାରେ ପିଲାମାନଙ୍କୁ ଯଦିଓ ସମ୍ଭାବନା ଅପେକ୍ଷାକୃତ କମ୍। ଏହା ହେପାଟାଇଟିସ୍ 'ବି' ଏବଂ 'ଡି' ଭୂତାଣୁ ଯୋଗୁଁ ହୋଇଥାଏ, ଯାହାକି ସଂକ୍ରମିତ ରକ୍ତ କିମ୍ବା ଇଞ୍ଜେକ୍‌ସନ ମାଧ୍ୟମରେ, ନିଶାସେବନ, ଅସୁରକ୍ଷିତ ଯୌନକ୍ରିୟା ଯୋଗୁଁ ସଂକ୍ରମିତ ବ୍ୟକ୍ତିଠାରୁ ଆସିପାରେ।

କିଶୋର କିଶୋରୀ ମାନଙ୍କୁ ଯଥେଷ୍ଟ ପୂର୍ବରୁ ଏନେଇ ସ୍ୱାସ୍ଥ୍ୟ ସଚେତନତାର ଅଭାବ ସାଙ୍ଗକୁ ଶସ୍ତା ଏବଂ ବିପଦପୂର୍ଣ୍ଣ ବିଜ୍ଞାପନ, ସୋସିଆଲ ମିଡ଼ିଆର ଲଗାମଛଡ଼ା ଭିଡିଓ ପ୍ରଚଳନ ଦ୍ୱାରା ଏହା ଅଧିକ ବ୍ୟାପକ ହେବାର ସମ୍ଭାବନା ବଢ଼ିଯାଏ।

୨) ଶ୍ୱାସକ୍ରିୟା ଜନିତ ବିକାର :-

ଶରୀରର ଯେଉଁସବୁ ଅଙ୍ଗ ପ୍ରତ୍ୟଙ୍ଗ ଆମ ଶ୍ୱାସକ୍ରିୟାକୁ ପ୍ରତ୍ୟକ୍ଷ କିମ୍ବା ପରୋକ୍ଷ ଭାବରେ ପ୍ରଭାବିତ କରିଥାଏ, ସେଗୁଡ଼ିକର ସଂକ୍ରମଣ ବା ପ୍ରଦାହ ଯୋଗୁଁ ଏସବୁ ସଂଘଟିତ ହୁଏ ଯଥା –

କ) କାନ ପାଚିବା

ଖ) ଟନ୍ସିଲ ଏବଂ ଗଳାର ସଂକ୍ରମଣ, ସାଧାରଣ ଥଣ୍ଡା, ସର୍ଦ୍ଦି ଠାରୁ ଆରମ୍ଭ କରି ନିମୋନିଆ (ଫୁସ୍‌ଫୁସ୍ ସଂକ୍ରମଣ) ଯାହା ଖୁବ୍ ସାଙ୍ଘାତିକ ଏବଂ ଛୋଟପିଲାମାନଙ୍କ ମୃତ୍ୟୁର ମୁଖ୍ୟ କାରଣ।

ଗ) ଆସ୍ଥମା (ଆଲର୍ଜି ଜନିତ ଶ୍ୱାସନଳୀ ପ୍ରଦାହ ଏବଂ ବାରମ୍ବାର ଅଣନିଃଶ୍ୱାସୀ ହେବା ଓ ପେଲି ହେବା)। ଶ୍ରେଣୀ ଗୃହ ବା ଘର ଭିତରର ଅସ୍ୱଚ୍ଛତା, ସନ୍ତସନ୍ତିଆ ପରିବେଶ, ଲୋମଶ ଗୃହ ପାଳିତ ପଶୁ ଯଥା - ପୋଷା କୁକୁର, ବିଲେଇ ଇତ୍ୟାଦିଙ୍କ ସଂସ୍ପର୍ଶ, ଯଥେଷ୍ଟ ଆଲୋକ ଏବଂ ବାୟୁ ଚଳାଚଳର ଅଭାବ ଯୋଗୁଁ ଭୂତାଣୁ ଓ ଜୀବାଣୁ ସଂକ୍ରମଣର ଆଶଙ୍କା ବଢ଼ିଯାଏ ଅଥବା ଜଣଙ୍କ ଶ୍ୱାସନଳୀକୁ ସୁହାଉନଥିବା କିଛି ପଦାର୍ଥ

(ଘରର ଧୂଳି, ପଶୁର ଲୋମ ଇତ୍ୟାଦି) ବିଶୃଙ୍ଖଳାକୁ ବଢ଼ାଇଥାଏ। ସର୍ବୋପରି ଘରେ ବା ହଷ୍ଟେଲରେ ଅତ୍ୟଧିକ ଗହଳି ପରିବେଶରେ ଅବସ୍ଥାନ, ଶ୍ୱାସ ନଳୀ ସୁରକ୍ଷା ସମ୍ବନ୍ଧୀୟ ସ୍ୱାସ୍ଥ୍ୟ ନିର୍ଦ୍ଦେଶାବଳୀକୁ ନମାନିବା ବା ଅଣଦେଖା କରିବାର ମାନସିକତା, ରୋଗର ସଂକ୍ରମଣ ଏବଂ ଆତ୍ମ ସୁରକ୍ଷା ନେଇ ସଚେତନତାର ଅଭାବ ଅଧିକାଂଶ ଶ୍ୱାସକ୍ରିୟା ଜନିତ ବିକାର ପାଇଁ ରାସ୍ତା ଖୋଲିଦିଏ। ଅବଶ୍ୟ ଜିନ୍‌ଗତ ତ୍ରୁଟି ହେତୁ ବଂଶାନୁକ୍ରମିକ ଭାବେ ଆସ୍ଥମା ପ୍ରକାଶିତ ହେବାର ସମ୍ଭାବନା ଅଧିକ, ଯାହାକୁ ଅନ୍ତର୍ନିହିତ ଆସ୍ଥମା (intrinsic asthma) କୁହାଯାଏ। ଧୂମପାନ - ପ୍ରତ୍ୟକ୍ଷ ଅବା ପରୋକ୍ଷ, ଶ୍ୱାସନଳୀ ତଥା ଫୁସ୍‌ଫୁସ୍‌ର ଯଥେଷ୍ଟ କ୍ଷତି କରିଥାଏ।

୩) ପୁଷ୍ଟିହୀନତା ବା ଅପପୁଷ୍ଟି ଜନିତ ବିକାର : -

ଶରୀରର ପୂର୍ଣ୍ଣ ବିକାଶ ଓ ସାମର୍ଥ୍ୟ ନିମନ୍ତେ ପୁଷ୍ଟିସାଧନ ଏକାନ୍ତ ଜରୁରୀ। ପୌଷ୍ଟିକତା ଦୃଷ୍ଟିରୁ ଖାଦ୍ୟଚୟନ, ସନ୍ତୁଳିତ ଆହାର ଏବଂ ସଚେତନ ଖାଦ୍ୟ ଗ୍ରହଣ ଏଥିପାଇଁ ଅପରିହାର୍ଯ୍ୟ। ଖାଦ୍ୟର ପୌଷ୍ଟିକତା ସମ୍ବନ୍ଧରେ ଅଜ୍ଞାନତା ଏବଂ ସଚେତନତାର ଅଭାବ ଯୋଗୁଁ ପିତାମାତା ପିଲାଙ୍କ ବୃଦ୍ଧି ଓ ବିକାଶକୁ ଦୃଷ୍ଟିରେ ରଖି ଉପଯୁକ୍ତ ଘରୋଇ ଖାଦ୍ୟ ଚୟନ ନ କରିବା, ମୋବାଇଲ ବା ଟେଲିଭିଜନ ସ୍କ୍ରିନ୍ ପ୍ରତି ଆକର୍ଷିତ କରାଇ ପିଲାଙ୍କ ଖାଦ୍ୟଗ୍ରହଣ ପ୍ରକ୍ରିୟାରେ ନିଶ୍ଚେତନା ଭରିଦେବାର ଅଦ୍ଭୁତ ମାନସିକତା ଫଳରେ ଅପପୁଷ୍ଟି ଜନିତ ବିକାର ଆଜି ବହୁଳ ପରିମାଣରେ ବଢ଼ିଚାଲିଛି। ମେଦବହୁଳତା, ରକ୍ତଶୂନ୍ୟତା ତଥା ଭିଟାମିନ୍ ତଥା ଧାତବଲବଣ ଅଭାବ ଜନିତ ବିକାର ପ୍ରାୟ ଶତକଡ଼ା ୩୦ ଭାଗରୁ ଉର୍ଦ୍ଧ୍ୱ ସ୍କୁଲ ପିଲାଙ୍କଠାରେ ପରିଲକ୍ଷିତ ହେଲାଣି। ବିଦ୍ୟାଳୟ ପିଲାଙ୍କ ମଧ୍ୟରେ ବ୍ୟବହାରଗତ ତ୍ରୁଟି, ଚିଡ଼ଚିଡ଼ାପଣ, ପାଠପଢ଼ାରେ ମନଯୋଗୀ ନହେବା, ସ୍ମୃତିଶକ୍ତିରେ ହ୍ରାସ ତଥା କର୍ମରେ ଆଗ୍ରହ ନ ଦେଖାଇବା କିମ୍ବା ନିଷ୍କ୍ରିୟତା ଭଳି ବିଶୃଙ୍ଖଳା ଖାଦ୍ୟରେ ଲୌହସାର, ଧାତବଲବଣ, ଭିଟାମିନ୍ ବି କଂପ୍ଲେକ୍ସ ଇତ୍ୟାଦିର ଅଭାବ ଅଥବା ମଇଦା ପ୍ରସ୍ତୁତ ଖାଦ୍ୟ, ଜଙ୍କ୍‌ଫୁଡ୍ ଓ ଫାଷ୍ଟଫୁଡର ଆଧିକ୍ୟ ଯୋଗୁଁ ହୋଇଥାଏ।

୪) ବିକାଶମୂଳକ ଓ ବ୍ୟବାହାରିକ ବିକାର :-

ଆମ ମସ୍ତିଷ୍କର ପ୍ରାୟ ଶତକଡ଼ା ୬୦ ରୁ ୭୦ ଭାଗ ବିକାଶ ପ୍ରଥମ ୬ ମାସ ଭିତରେ ହୋଇଥାଏ ଏବଂ ଅବଶିଷ୍ଟ ୩୦ ରୁ ୪୦ ଭାଗ ଦୁଇବର୍ଷ ମଧ୍ୟରେ ସଂଘଟିତ ହୁଏ। ବୃଦ୍ଧି ଓ କ୍ରମବିକାଶର ଧାରା ପ୍ରତିଫଳିତ ହୁଏ ଶିଶୁଟିର ଜନ୍ମୋତ୍ତର ସମୟ ବା ବୟସାନୁଯାୟୀ କିଛି ନିର୍ଦ୍ଦିଷ୍ଟ ମାଇଲ ଖୁଣ୍ଟ ହାସଲ କରିବାରେ। ସ୍କୁଲପିଲାଙ୍କର ବିଶେଷ କରି ୩ ରୁ ୫ ବର୍ଷ ବୟସ ମଧ୍ୟରେ ଯଦି ଶାରୀରିକ ବୃଦ୍ଧିରେ ବାଧା କିମ୍ବା ମାନସିକ ଏକାଗ୍ରତାର ଅଭାବ ପରିଲକ୍ଷିତ ହୁଏ ତେବେ ତାହାର କାରଣ ଗର୍ଭସ୍ଥ ସମୟରୁ ଆରମ୍ଭକରି ଜନ୍ମର ପ୍ରଥମ ୬ ମାସରୁ ୨ ବର୍ଷ ମଧ୍ୟରେ କୌଣସି ଅସଙ୍ଗତି ବା ଅପରିହାର୍ଯ୍ୟ ହେଉଥିବା ହରମୋନ୍, ଭିଟାମିନ୍ କିମ୍ବା ଧାତବ ଲବଣର ଅଭାବ ଜନିତ ହୋଇପାରେ। ମସ୍ତିଷ୍କର ଗଠନଗତ ତ୍ରୁଟିବିଚ୍ୟୁତି ଥାଇପାରେ। ବ୍ୟବହାରିକ ତ୍ରୁଟି ବିଚ୍ୟୁତି ଆଜିକାଲି ବହୁଳ ଭାବରେ ଦେଖାଗଲାଣି। ଜନ୍ମ ପୂର୍ବର ଶିକ୍ଷା ନେଇ ଅଚେତନ ମା, କର୍ମଜୀବୀ ଉଭୟ ବାପା-ମା, ପିଲାଟି ପାଇଁ ହୃଦୟରୁ ଯତ୍ନଶୀଳ, ଭାବପୂର୍ଣ୍ଣ ମାନୁଷୀ ସ୍ପର୍ଶ ନଦେବା, ଶିଶୁଟିକୁ ଅଧିକାଂଶ ସମୟ ଚାକର ବା ଆୟାର ତତ୍ତ୍ୱାବଧାନରେ ଛାଡ଼ିବା ଏବଂ ସ୍ନେହପୂର୍ଣ୍ଣ ସଚେତନ ତରଙ୍ଗ ସୃଷ୍ଟି ବଦଳରେ ମୋବାଇଲ ଆଉ ସୋସିଆଲ ମିଡ଼ିଆର ନିଶ୍ଚେତନାଭରା ଦୁନିଆରେ ଜାଣିଶୁଣି ଆବଦ୍ଧ କରିବା ଫଳରେ "ଅଟିଜିମ୍", ଏ.ଡି.ଏଚ୍.ଡି (Attention Deficit Hyperactive Disorder), Tantrum, ଅକର୍ମଣ୍ୟତା ତଥା ପାଠପଢ଼ା ବା କିଛି ଶିଖିବା ନେଇ ଅସାମର୍ଥ୍ୟ ଇତ୍ୟାଦି ଦେଖାଦେଇପାରେ।

ଖାଦ୍ୟ ଗ୍ରହଣ ଜନିତ ବିସଙ୍ଗତି

ଏଣିକି ବହୁଳ ମାତ୍ରାରେ ସ୍କୁଲ ପିଲାଙ୍କ ଠାରେ ଦେଖାଗଲାଣି ପ୍ୟାକେଟ ଖାଦ୍ୟପଦାର୍ଥ ଏବଂ ହୋଟେଲ ବା ଫାଷ୍ଟଫୁଡ ଦୋକାନର ରନ୍ଧନ ଖାଦ୍ୟର ଭୟାବହତା ବିଷୟରେ ଅଚେତନତା ଅଥବା ସେହି ସବୁ ଅଖାଦ୍ୟର ପ୍ରୋତ୍ସାହନ, ଖାଇବା ସମୟରେ ମୋବାଇଲ ସ୍କ୍ରିନ ଦେଖିବା ବା ଦେଖାଇବା, ପରିବାରରେ ସଚେତନ ଖାଦ୍ୟ ଗ୍ରହଣ ପ୍ରତି ଉଦାସିନ ରହିବା ଫଳରେ ପୁଷ୍ଟିହୀନତା ଜନିତ ବ୍ୟାଧି ଅଥବା ମେଦବହୁଳତା

ହେବାର ବାଟ ଫିଟିଯାଏ ଯାହା ହୃଦରୋଗ, ଡାଇବେଟିସ ହେବାର ସମ୍ଭାବନାକୁ ବଢ଼ାଇ ମାନସିକ ସ୍ୱାସ୍ଥ୍ୟକୁ ବିପର୍ଯ୍ୟସ୍ତ କରିଥାଏ।

ନିଦ୍ରାଜନିତ ବିସଙ୍ଗତି ବା ବିଶୃଙ୍ଖଳା

ଯଥେଷ୍ଟ ନିଦ୍ରା (ଅନ୍ତତଃ ୭ରୁ ୮ ଘଣ୍ଟା) ଉତ୍ତମ ସ୍ୱାସ୍ଥ୍ୟ ପାଇଁ ଅପରିହାର୍ଯ୍ୟ। ତେବେ ଆଜିକାର ସ୍କୁଲ ଜୀବନରେ ପାଠ ପଢ଼ାର ଅଯଥା ଚାପ, ପ୍ରତିଦ୍ୱନ୍ଦିତା ମୂଳକ ବ୍ୟବସ୍ଥା, ମୋବାଇଲ ବ୍ୟବହାରର ସ୍ୱାଧୀନତା, ପାରିବାରିକ କଳହ ଓ ନାନାଦି ସଙ୍କଟ ପିଲାମାନଙ୍କ ଭିତରେ ଗୋଟିଏ ପ୍ରକାର ଅସ୍ଥିରତା, ଭାବଗତ ସ୍ଖଳନ ସୃଷ୍ଟି କରି ନିଦ୍ରାରେ ବ୍ୟାଘାତ ଆଣିଥାଏ। ଅତ୍ୟଧିକ ଚା କଫି ପିଇବାର ବଡ଼ ଅଭ୍ୟାସ ବି ନିଦ୍ରା ଜନିତ ବିସଙ୍ଗତିକୁ ଡାକି ଆଣିପାରେ।

କୈଶୋର ଅବସ୍ଥାରେ (୧୦ରୁ ୧୮ବର୍ଷ) ସାମୟିକ ବିଚ୍ୟୁତି :-

ଦ୍ରୁତ ପରିବର୍ତ୍ତନ ଶାରୀରିକ ଓ ମାନସିକ ସ୍ତରରେ ଘଟେ, ଯାହା ଅସଙ୍ଗତି ସୃଷ୍ଟି କରିପାରେ। ବିଶେଷ କରି ନିଜ ଶରୀର ଓ ସୌନ୍ଦର୍ଯ୍ୟକୁ ନେଇ ଅତ୍ୟଧିକ ଚିନ୍ତା, ଜାଣିଶୁଣି ଅଯଥା ଦୁଃସାହସ ଦେଖାଇବା ଓ ବିପଦପୂର୍ଣ୍ଣ ରାସ୍ତାକୁ ଆପଣେଇ ନେବା, ଡିଜିଟାଲ ଦୁନିଆ ତଥା ସୋସିଆଲ ମିଡ଼ିଆରେ ମଜ୍ଜିରହି ଆନନ୍ଦନେବା ଓ ବିପଜ୍ଜନକ ବା ନିଷିଦ୍ଧ କାର୍ଯ୍ୟ ଦ୍ୱାରା କାମନା ବାସନା ମେଣ୍ଟାଇବା ଇତ୍ୟାଦି। ଝିଅମାନେ ପ୍ରାକୃତିକ ଋତୁସ୍ରାବ ଜନିତ ସାମୟିକ ଅସୁବିଧାରେ ବ୍ୟତିବସ୍ତ ହୋଇ ପଡ଼ିବା, ଏପରିକି ବିଷାଦଗ୍ରସ୍ତ ହୋଇପଡ଼ିବା ସାଧାରଣଭାବରେ ଦେଖାଯାଇଥାଏ। ଶରୀରରେ ଅତ୍ୟଧିକ ହରମୋନ କ୍ଷରଣ ଯାହାକି ଶରୀରକୁ ଅଧିକ ବିକଶିତ କରି ସାମର୍ଥ୍ୟ ଭରିଦେବା, ବିଶେଷକରି ବାପା ମା ଶିକ୍ଷକ ଶିକ୍ଷୟିତ୍ରୀମାନେ କୈଶୋର ଅବସ୍ଥା ପ୍ରାପ୍ତ ହେବାପୂର୍ବରୁ ଅର୍ଥାତ୍ ୫ବର୍ଷରୁ ୯ବର୍ଷ ମଧ୍ୟରେ ପିଲାମାନଙ୍କୁ ଏପ୍ରକାର ଦ୍ରୁତ ପରିବର୍ତ୍ତନ ବିଷୟରେ ବୁଝାଇ ପ୍ରସ୍ତୁତ ନକରିବା ଫଳରେ ଏବଂ ସର୍ବୋପରି ଜୀବନର ପ୍ରକୃତ ଉଦ୍ଦେଶ୍ୟ ସେମାନଙ୍କ ବୁଝିବାଭଳି ଭାଷାରେ କହି ବିଶ୍ୱାସ ନ ଜନ୍ମାଇବା ଯୋଗୁଁ ଅସଙ୍ଗତି ଆସିଥାଏ।

ଶ୍ରୀଅରବିନ୍ଦଙ୍କ ପ୍ରଦର୍ଶିତ ପୂର୍ଣାଙ୍ଗ ଶିକ୍ଷା ତତ୍ତ୍ୱ ଅନୁସାରେ ଶିଶୁଟିକୁ ଶାରୀରିକ ସକ୍ଷମ, ମାନସିକ ଭାବରେ ସତର୍କ, ସାମାଜିକ ଦୃଷ୍ଟିକୋଣରୁ ଅନୁକୁଳନୀୟ ଏବଂ ଆଧାତ୍ମିକ ଅନୁରାଗୀ କରି ଗଢ଼ିତୋଳିବାରେ ନିହିତ ଆତ୍ମମାନଙ୍କ ଭୂମିକା। ଏହାହିଁ ପୂର୍ଣାଙ୍ଗ ସ୍ୱାସ୍ଥ୍ୟ ଚେତନାର ମୂଳ ଉଦ୍ଦେଶ୍ୟ।

ସଚେତନ ମାତୃତ୍ୱଠାରୁ ଆରମ୍ଭ କରି, ପିତାମାତାଙ୍କ ଆଧାତ୍ମିକ ଅନୁରାଗ, ଘର ଓ ପରିବେଶର ସ୍ୱଚ୍ଛତା, ସ୍କୁଲର ଶୈକ୍ଷିକ ବାତାବରଣ ସାଙ୍ଗକୁ ଶିକ୍ଷକ, ଶିକ୍ଷୟିତ୍ରୀ ମାନଙ୍କ ଆତ୍ମୀୟତା ଓ ଭଲପାଇବାର ଭାବନେଇ ସହର୍ଷ ଶିକ୍ଷାଦାନ ଏବଂ ବିଶେଷକରି ସ୍ୱାସ୍ଥ୍ୟ ଚେତନଶୀଳ ବ୍ୟକ୍ତିତ୍ୱ ଗଠନ ପାଇଁ ନିରନ୍ତର ପ୍ରଚେଷ୍ଟା ସ୍କୁଲପିଲାଙ୍କ ଅଧିକାଂଶ ବିକାର ଓ ବିଶୃଙ୍ଖଳାକୁ ଏଡ଼ାଇ ଦେଇ ପାରିବ।

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ଜୀବନର ଗୋଟାଏ ଉଦ୍ଦେଶ୍ୟ ଅଛି।

ଏହି ଉଦ୍ଦେଶ୍ୟ ହେଲା ଭଗବାନଙ୍କୁ ଲାଭ କରିବା ଏବଂ ତାଙ୍କର ସେବା କରିବା।

ଭଗବାନ ଆମଠାରୁ ଦୂରରେ ନାହାନ୍ତି। ସେ ଆମ ଭିତରେ ଅଛନ୍ତି; ଆମ ହୃଦୟର ଗଭୀରରେ, ଆମ ଚିନ୍ତା ଓ ଅନୁଭବର ଊର୍ଦ୍ଧ୍ୱରେ ସେ ବିଦ୍ୟମାନ। ଭଗବାନଙ୍କଠାରେ ହିଁ ରହିଛି ଶାନ୍ତି ଓ ନିଶ୍ଚୟତା ଏବଂ ଏପରିକି ଆମର ସକଳ ସମସ୍ୟାର ସମାଧାନ।

ଶ୍ରୀମା

ବିଦ୍ୟାଳୟ ପିଲାଙ୍କ ସାଧାରଣ ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟା

ପ୍ରଫେସର ଡାକ୍ତର ଜ୍ୟୋତିରଞ୍ଜନ ଚମ୍ପତିରାୟ

ପ୍ରଫେସର ଓ ବିଭାଗୀୟ ମୁଖ୍ୟ, ଶିଶୁରୋଗ ବିଭାଗ, ଫକୀରମୋହନ ମେଡ଼ିକାଲ କଲେଜ, ବାଲେଶ୍ୱର

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'କେଡ଼େ ସୁଖର ଆହା ବାଳ କାଳ, ଛୁଏଁ ନାହିଁ ମନେ ସଂସାର ଜଞ୍ଜାଳ। ଦଂଶେ ନାହିଁ ହୃଦ ଫୁଲେ ଚିନ୍ତାକୀଟ, ହରେ ନାହିଁ ମଧୁ ଦୁଃଖ-ମଧୁଲିଟ। ଆନନ୍ଦରେ ସଦା କଟଇ ସମୟ, ଭବେ ବାଲ୍ୟ ପ୍ରାଣ ମହାସୁଖମୟ' – କବି ଚିନ୍ତାମଣି ମହାନ୍ତିଙ୍କ ଏହି କାଳଜୟୀ ସ୍ମରଣୀୟ ଧାଡ଼ିଟି ଆନନ୍ଦ ସୁଖପୂର୍ଣ୍ଣ ପିଲାଦିନର ଯେଉଁ ଭାବପୂର୍ଣ୍ଣ ବର୍ଣ୍ଣନା ତାହା ବାସ୍ତବରେ ଅନୁପ୍ରେରଣୀୟ। ଅମୃତର ଶିଶୁ, ଶିଶୁମାନେ ହିଁ ଆମ ଭବିଷ୍ୟତ। ଶିଶୁମାନଙ୍କୁ ଆଧ୍ୟାତ୍ମିକ, ନୈତିକ, ସ୍ୱାସ୍ଥ୍ୟପ୍ରଦ ଓ ପ୍ରଶାନ୍ତମୟ ଶିକ୍ଷା ଦେବା ପିତାମାତାଙ୍କ ଠାରୁ ପରିଜନ ସର୍ବୋପରି ଏ ସମାଜର ସମସ୍ତଙ୍କର ଦାୟିତ୍ୱ। ପିଲମାନଙ୍କର ବାଲ୍ୟକାଳ ଅତୀବ ଗୁରୁତ୍ୱପୂର୍ଣ। ପିଲାମାନେ ବିଦ୍ୟାଳୟ ଯିବା ସମୟରେ ଏବଂ ବିଦ୍ୟାଳୟରେ ଥିବାବେଳେ ଅନେକ ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟାକୁ ସାମ୍ନା କରିଥା'ନ୍ତି। ବୟସ ଦୃଷ୍ଟିରୁ ଅନେକ ସମୟରେ ସେମାନେ ସେମାନଙ୍କର ପ୍ରାଥମିକ ସମସ୍ୟା, ଆଘାତ, ଯନ୍ତ୍ରଣା ସମ୍ପର୍କରେ ଅଭିଭାବକ ଓ ବିଦ୍ୟାଳୟ କର୍ତ୍ତୃପକ୍ଷଙ୍କୁ ଜଣାଇ ନଥା'ନ୍ତି। ପରବର୍ତ୍ତୀ ସମୟରେ ସେମାନଙ୍କର ଛୋଟିଆ ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟାଟି ବଡ଼ ଆକାରର ରୂପ ନେଇପାରେ।

ବିଦ୍ୟାଳୟରେ ପିଲାମାନଙ୍କ ସାଧାରଣ ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟା ସମ୍ପର୍କରେ ଆମେ ଆଲୋଚନା ଉପସ୍ଥାପନ କଲାବେଳେ ସର୍ବପ୍ରଥମେ ପିଲାଟିର ପୋଷଣ ଓ ଦୈନନ୍ଦିନ ଜୀବନ ଚର୍ଯ୍ୟାକୁ ଦେଖିବା ଉଚିତ । ଅନେକ ପିଲା ଖାଦ୍ୟ ପାଇଁ ପ୍ରତିଦିନ ସଂଘର୍ଷ କରୁଥିବାବେଳେ ସେମାନଙ୍କ ପାଇଁ ବିଦ୍ୟାଳୟର କୌଣସି ଗୁରୁତ୍ୱ ନଥାଏ। ତେବେ ପିଲାମାନଙ୍କୁ ଉତ୍ତମ ସ୍ୱାସ୍ଥ୍ୟଗତ ପରିବେଶ ବିଶେଷକରି ବିଦ୍ୟାଳୟରେ ଦେଖିବା ପାଇଁ ଚାହୁଁଥିଲେ ଏ କ୍ଷେତ୍ରରେ ବାପାମାଆଙ୍କ ଦାୟିତ୍ୱ ହେଉଛି ପିଲାଟିକୁ ସବୁବେଳେ ଘରୋଇ ଖାଦ୍ୟ, ଋତୁକାଳୀନ ଖାଦ୍ୟ, ସୁଷମ ଖାଦ୍ୟ ଓ ଫଳ ଦିଅନ୍ତୁ। ଉତ୍ତମ ପୋଷଣଯୁକ୍ତ, ସାମର୍ଥ୍ୟପୂର୍ଣ୍ଣ ପିଲା ଜଣେ ବିଦ୍ୟାଳୟରେ ବୌଦ୍ଧିକ କ୍ଷେତ୍ରରେ ଗଭୀର ଅଧ୍ୟବସାୟ ସହିତ ସମୟ ନିର୍ବାହ କରିପାରିବ। ବିଦ୍ୟାଳୟରେ ପିଲାମାନଙ୍କ ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟା ସମ୍ପର୍କରେ ପ୍ରଥମ ଭାଗରେ ନିୟମିତ ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟା ସଚେତନତା ଚିକିତ୍ସା ଓ ଦ୍ୱିତୀୟ ଭାଗରେ ଋତୁକାଳୀନ ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟା ସମ୍ପର୍କରେ ଆଲୋଚନାଟି ରଖୁଛି।

ନିୟମିତ ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟା : ପିଲାମାନେ ବିଦ୍ୟାଳୟ ଯିବା ପୂର୍ବରୁ ପ୍ରତ୍ୟୁଷରୁ ଉଠିବା, ବୟସ ଅନୁଯାୟୀ ଯୋଗାସନ କରିବା, କୌଣସି ଦୌଡ଼କୁଦରେ ସାମିଲ ହୋଇ ପରବର୍ତ୍ତୀ ସମୟରେ କିଛି ସମୟ ପାଠପଢ଼ାରେ ବିତାଇ ବିଦ୍ୟାଳୟକୁ ଆସିଥା'ନ୍ତି। ପିଲାମାନଙ୍କୁ ପ୍ରତ୍ୟୁଷର ନିତ୍ୟକର୍ମ ସହିତ ସେମାନଙ୍କ ସକାଳର ଯୋଗାସନ ବା ବ୍ୟାୟାମ ଅଭ୍ୟାସ ସହିତ ପାଠପଢ଼ା ଠାରୁ ଆଉ ଗୋଟିଏ ବଡ଼ ଦାୟିତ୍ୱ ଥାଏ ସେମାନଙ୍କ ଖାଇବା ପିଇବା। ପ୍ରାୟତଃ ପିଲାମାନେ ସକାଳର ଖାଇବାରେ ସେମାନଙ୍କ ଦିନର ମୁଖ୍ୟ ଖାଦ୍ୟ ଭାତ, ରୁଟି, ଡାଲି, ପନିପରିବାର ତରକାରୀ, ସାଲାଡ଼, ଦହି, ଖାଇଥା'ନ୍ତି। ବିଦ୍ୟାଳୟର ମଧ୍ୟାହ୍ନ ବିରତି ପାଇଁ ଜଳଖିଆରେ ଅଧିକାଂଶ ପିଲା ଘରୁ ଟିଫିନ୍ ନେଇଥା'ନ୍ତି। ଘରୋଇ ପ୍ରସ୍ତୁତ ଖାଦ୍ୟ ସବୁଠାରୁ ଭଲ। ବିଦ୍ୟାଳୟରେ ଥିବା ସମୟରେ ପିଲାମାନେ ଯଦି ଅବରୋଧ ହୋଇଥିବା ସ୍ଥାନରେ ବା ସନ୍ତସନ୍ତିଆ ଜାଗାରେ ବସନ୍ତି ସେମାନଙ୍କର ଦେହ ହାତ ଘୋଳାବିନ୍ଧା, ମୁଣ୍ଡବିନ୍ଧା, ଦେହ ଅସ୍ୱସ୍ତିକର ଓ ଆଖିରେ ଜଳାପୋଡ଼ା ହୋଇଥାଏ। ପିଲାମାନଙ୍କ ବିଦ୍ୟାଳୟର କୋଠରି ପ୍ରଶସ୍ତ, ମୁକ୍ତ ବାୟୁ ଚଳାଚଳ ହେବା ସହିତ ଉଜ୍ଜ୍ୱଳ ଆଲୋକ ମଧ୍ୟ ଜରୁରୀ। କେତେକ ପିଲା ସକାଳର ଖାଇବା କାରଣରୁ କିମ୍ବା ମଧ୍ୟାହ୍ନ ଟିଫିନରେ ଖାଇବାର ବିଳମ୍ବଜନିତ ଖାଦ୍ୟର କୌଣସି ପ୍ରତିକ୍ରିୟା ରହିଥିଲେ କେତେକ କ୍ଷେତ୍ରରେ ପିଲାମାନଙ୍କର ବାନ୍ତି ସମସ୍ୟା ରହିଥାଏ। ସେହିପରି ବଦହଜମୀ ସହିତ ପେଟ ଜଳାପୋଡା ହୋଇ ଝାଡ଼ା ହେବା ପରିସ୍ଥିତି ହୋଇଥାଏ। କେବଳ ଖାଦ୍ୟର ପ୍ରତିକ୍ରିୟା ନୁହେଁ ପୂର୍ବଦିନର ଗରିଷ୍ଠ, ବାସୀ ଖାଦ୍ୟ ଅତ୍ୟଧିକ ଜଙ୍କ୍‌ଫୁଡ ସହିତ ପିଲାଟି ଯଦି ପୂର୍ବରାତ୍ରିରେ ଭଲ ଭାବେ ନିଦ୍ରା ଯାଇନଥାଏ ଏହା ମଧ୍ୟ ବିଦ୍ୟାଳୟରେ ତା'ର ବାନ୍ତି ସମସ୍ୟା ସୃଷ୍ଟି କରିପାରେ। କେତେକ ପିଲା ଅତି ଭୋର୍ ସମୟରୁ ଉଠି ପଢ଼ାପଢ଼ି କରନ୍ତି। କିନ୍ତୁ ଉଜ୍ଜ୍ୱଳ ଆଲୋକରେ ପଢ଼ିବା ଜରୁରୀ, ସକାଳର ସୂର୍ଯ୍ୟୋଦୟ ସବୁଠାରୁ

ଭଲ । କିନ୍ତୁ ମୋବାଇଲ ଲାଇଟ ଦ୍ୱାରା ବିଶେଷକରି ଘର ଅନ୍ଧାରକରି ପିଲାମାନେ ଘରେ ପଢୁଥିଲେ ଏହା ସେମାନଙ୍କର ଆଖି ସମସ୍ୟାର ବଡ଼ କାରଣ ହୋଇଥାଏ । ପ୍ରଥମତଃ ଅତି ଭୋରରୁ ଉଠିବା ଏବଂ କମ୍ ଆଲୋକରେ ଅନ୍ଧାର ଭିତରେ ବହି ପଢ଼ିବାର ପ୍ରଭାବ ବିଦ୍ୟାଳୟରେ ହିଁ ପଡ଼ିଥାଏ । କେତେକ ପିଲା ପାଠପଢ଼ା ସମୟରେ ଢୋଳାଉଥାନ୍ତି ଆଉ କେତେକ ପିଲା ଏକ ପ୍ରକାର ଶୋଇପଡ଼ନ୍ତି ।

ବିଦ୍ୟାଳୟରେ କୌଣସି ଭୋଜି ବା ଖାଦ୍ୟ ସମାବେଶର କାର୍ଯ୍ୟକ୍ରମ ଥିଲେ ପୂର୍ବ ଦିନରୁ ପିଲାମାନେ ପ୍ରସ୍ତୁତ ହୋଇ ଘରୁ ଟିଫିନ ନେଇନଥା'ନ୍ତି । କେତେକ କ୍ଷେତ୍ରରେ ଭୋଜି ହେଉଥିବାରୁ ଖାଇବାର ଅନେକ ତାଲିକା ଲମ୍ବା ହୋଇଥାଏ । ଅତ୍ୟଧିକ ତେଲ ମସଲା ଓ ବିଭିନ୍ନ ରଙ୍ଗ ସହିତ ଖାଦ୍ୟ ପଦାର୍ଥ ଯଦି ବିଷାକ୍ତ ବା ନିମ୍ନମାନର, ବାସି ହୋଇଥାଏ ତେବେ ପରବର୍ତ୍ତୀ ସମୟରେ ପାର୍ଶ୍ୱ ପ୍ରତିକ୍ରିୟା କାରଣରୁ କେତେକ କ୍ଷେତ୍ରରେ ଝାଡ଼ାବାନ୍ତି ହେବାର ସମସ୍ୟା ଦେଖାଦେଇଥାଏ । ସେହିପରି ଅବହେଳାରୁ ଖୋଲା ଖାଇବା ଉପରେ କୌଣସି ଝିଟିପିଟି ବା ବିଷାକ୍ତ ଛୋଟିଆ ଜୀବ ପଡ଼ିଯାଆନ୍ତି । ଏହା ଖାଦ୍ୟକୁ ବିଷାକ୍ତ କରି ପିଲାମାନଙ୍କ ପରିସ୍ଥିତି ସଙ୍ଗୀନ କରିଦେଇଥାଏ । ତେଣୁ ଆଜିକାଲି ଅନେକ କ୍ଷେତ୍ରରେ କ୍ୟାଟେରିଂ ସେବାକାରୀମାନଙ୍କୁ ଖାଇବା ଦାୟିତ୍ୱ ଦିଆଯାଉଥିବାରୁ କର୍ତ୍ତୃପକ୍ଷ ପିଲାମାନଙ୍କ ଉତ୍ତମ ସ୍ୱାସ୍ଥ୍ୟକୁ ସ୍ୱାସ୍ଥ୍ୟ ପାଇଁ ପୋଷଣମାନର ଖାଦ୍ୟ, ପନିପରିବା ବ୍ୟବହାର କରନ୍ତୁ ।

ପିଲାଟି ବିଦ୍ୟାଳୟରେ ପାଖାପାଖି ଛଅ ଘଣ୍ଟାରୁ ସାତ ଘଣ୍ଟା ସମୟ ଅତିବାହିତ କରିଥାଏ, ଏତେ ଲମ୍ବା ସମୟ ଭିତରେ ମଧ୍ୟାହ୍ନ ବିରତି ସହିତ ପିଲାଟି ପ୍ରାୟତଃ ପାଣି ପିଇନଥାଏ । ଅନେକ ପିଲା ଘରୁ ପାଣି ନେଇଥା'ନ୍ତି କିନ୍ତୁ ପ୍ରାୟତଃ ବିଦ୍ୟାଳୟରେ ଉନ୍ନତମାନର ଜଳ ବିଷୋଧକ ପାନୀୟ ଜଳର ବ୍ୟବସ୍ଥା ରହିଛି । ପିଲାଟି ପାଇଁ ପିଇବା ପାଣି ଯେତିକି ଜରୁରୀ ସମାନ ପରିମାଣର ଏହା ବିଶୁଦ୍ଧତା ହେବା ମଧ୍ୟ ଜରୁରୀ । ପାଣିର କୌଣସି ଦୂଷିତ ସମସ୍ୟା ରହିଲେ ଏହା ପିଲାଟିର ପେଟ ସମସ୍ୟା ସହିତ ବାନ୍ତି ପରି ସମସ୍ୟାକୁ ସୃଷ୍ଟି କରିଥାଏ । ତେଣୁ ପିଇବା ପାଣି ସମ୍ପୂର୍ଣ୍ଣ ବିଶୋଧିତ ହୋଇଥିବା ଦରକାର । କେତେକ ଅଭିଭାବକ ପିଲାଙ୍କୁ ଗ୍ଲୁକୋଜ ପାଣି, ଏନର୍ଜି ଡ୍ରିଙ୍କସ୍ ଓ ଫଳରସ କ୍ୟାରିୟରରେ ବିଦ୍ୟାଳୟରେ ଖାଇବା ସମୟରେ ପିଇବାକୁ ଦେଇଥା'ନ୍ତି । ତେବେ କୌଣସି ପରିସ୍ଥିତିରେ ଯଦି ବିଳମ୍ବ ହୋଇଥାଏ, ଏହାର କ୍ୟାରିୟର ଆଘାତ ପ୍ରାପ୍ତ ହୋଇ ଫାଟି ଯାଇଥାଏ କିମ୍ବା କୌଣସି ପରିପାର୍ଶ୍ୱିକ କାରଣରୁ ଯଦି ଫୁଡ ପଏଜନ ହୁଏ ଏହା ଗୋଟିଏ ଗମ୍ଭୀର ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟା ସୃଷ୍ଟି କରେ । ଯାହାଫଳରେ ପିଲାଟି ପାଠ ପଢ଼ି ପାରିନଥାଏ ଏବଂ ବାନ୍ତି ବା ଝାଡ଼ାରେ ତାର ଦେହ ଦୁର୍ବଳ ହୋଇଯାଏ । ତେଣୁ ଏହାର ବ୍ୟବହାର ନିର୍ଦ୍ଦିଷ୍ଟ ସମୟ ଭିତରେ ହେବା ଜରୁରୀ ।

କେତେକ ପିଲା ବିଶେଷକରି ବର୍ଷାଦିନରେ ଏକ ପ୍ରକାର ତିନ୍ତି ଯାଇ ବିଦ୍ୟାଳୟରେ ପହଞ୍ଚି ପାଠପଢ଼ାରେ ସାମିଲ ହୋଇଥା'ନ୍ତି । ଅନେକ କ୍ଷେତ୍ରରେ ପିଲାମାନଙ୍କୁ ଦୀର୍ଘ ସମୟ ଧରି ଭିଜା କପଡ଼ା ଶରୀରରେ ରହିବାରୁ ପ୍ରଥମେ ଜ୍ୱର ପରେ କମ୍ପଜ୍ୱର, ମୁଣ୍ଡବିନ୍ଧା ଓ ଘୋଳାବିନ୍ଧା ହୋଇଥାଏ । ତେଣୁ ବର୍ଷା ଦିନରେ ପିଲାମାନେ ନିଶ୍ଚିନ୍ତ ଭାବରେ ରେନି କୋର୍ଟ ବା ଛତା ବ୍ୟବହାର କରିବା ସହ ଯେପରି ଏକ ଶୁଖିଲା ଟାଓ୍ୱେଲ ସାଙ୍ଗରେ ନିଏ ସେ ଦିଗକୁ ମଧ୍ୟ ଦେଖନ୍ତୁ । ପିଲାମାନଙ୍କର ଆଖି ସମସ୍ୟା ଥିଲେ ବିଦ୍ୟାଳୟରେ ବ୍ଲାକବୋର୍ଡ଼ ଯଦି ଦୂରରେ ରହିଥାଏ ପିଲାଟିର ଟେବୁଲ୍ ଅନ୍ଧାର ଜାଗାରେ ଥାଏ, ସୂର୍ଯ୍ୟ କିରଣ କିମ୍ବା କୌଣସି ଆଲୋକର ବ୍ୟବସ୍ଥା ନଥାଏ ତେବେ ପିଲାମାନେ ଏହାକୁ ଦୀର୍ଘ ସମୟ ସହିବା ପରେ ଆଖି ସମସ୍ୟାକୁ ସାମ୍ନା କରିଥାନ୍ତି । ବିଳମ୍ବ କଲେ ପିଲାମାନଙ୍କ ପାଇଁ ଲେନ୍ସର ମାପ ମଧ୍ୟ ବଢ଼ିଯାଏ । ପିଲାମାନଙ୍କୁ ଅତ୍ୟଧିକ ଶ୍ରଦ୍ଧା କରି ଅଧିକ ପ୍ରୋଟିନ ଦେବା ଦ୍ୱାରା ବା କୌଣସି ସ୍ୱାସ୍ଥ୍ୟଗତ କାରଣରୁ ଯଦି ମେଦବହୁଳ ଦେଖାଦିଏ ଏହା ପିଲାମାନଙ୍କ ପାଠପଢ଼ା ପାଇଁ ମଧ୍ୟ ସମସ୍ୟା ହୋଇଥାଏ । କେତେକ କ୍ଷେତ୍ରରେ ସେମାନଙ୍କୁ ଏକ ପ୍ରକାର ମାନ୍ଦା ମାନ୍ଦା ଲାଗିଥାଏ, ଥକ୍କା ଓ ନିଦ ଅନୁଭବ ହୁଏ । ପାଠପଢ଼ା କ୍ଷତିଗ୍ରସ୍ତ ହୋଇଥାଏ । ବର୍ଷାରେ ତିନ୍ତିବା କାରଣରୁ କୌଣସି କ୍ଷତ କାରଣରୁ, ଯେ କୌଣସି ଅନ୍ୟ କାରଣରୁ ପିଲାମାନଙ୍କର କାନ ସମସ୍ୟା ଥିଲେ ସେମାନେ ଶିକ୍ଷକଙ୍କ ପାଠପଢ଼ା ଭଲ ଭାବେ ଶୁଣିପାରି ନଥା'ନ୍ତି । ତେଣୁ କୌଣସି ପିଲାର ଏ ସମସ୍ୟା ଥିଲେ ଏହାର ଚିକିତ୍ସା କରି ବିଦ୍ୟାଳୟ ପଠାନ୍ତୁ ।

କୌଣସି ପିଲାମାନଙ୍କର ବଂଶଗତ କାରଣ, ପୂର୍ବ କାରଣରୁ ହୃଦରୋଗ ସମସ୍ୟା ଥିଲେ ଏପରି ଏକ ଉତ୍କଟ ସ୍ୱାସ୍ଥ୍ୟ ସଙ୍କଟ ବିଦ୍ୟାଳୟ କ୍ଷେତ୍ର ପାଇଁ ଭାରି ଗୁରୁତ୍ୱପୂର୍ଣ୍ଣ । ବିଳମ୍ବ ହୋଇଗଲେ ଅବସ୍ଥା ନିୟନ୍ତ୍ରଣାଧୀନ ହୋଇନଥାଏ । ସେହିପରି ପିଲାଟିର ଶ୍ରେଣୀ କକ୍ଷ ଉପରମହଲାରେ ହୋଇ ଅତ୍ୟଧିକ ସିଡ଼ି ଥିଲେ, ଅତ୍ୟଧିକ ଖେଳକୁଦ ବା ବିଦ୍ୟାଳୟକୁ ଯିବା ଆସିବା ସମୟରେ ଧାଁ ଧଉଡ ଦ୍ୱାରା ଏପରି ବିଭିନ୍ନ ସମୟରେ ପିଲାମାନଙ୍କର ଏକ ସାମୟିକ

ଛାତି ଓ ହୃଦ ସମସ୍ୟା ଦେଖାଦେଇଥାଏ। ତେଣୁ ଏ କ୍ଷେତ୍ରରେ ସତର୍କତା ଜରୁରୀ। ପିଲାମାନଙ୍କୁ କୌଣସି କାଛୁ, କୁଣ୍ଡିଆ, ଯାଦୁ, ସଂକ୍ରାମକ ରୋଗ ହୋଇଥିଲେ ଏହା ଆରୋଗ୍ୟ ଲାଭ ନ ହେବା ପର୍ଯ୍ୟନ୍ତ ବିଦ୍ୟାଳୟକୁ ଆସିବା ଅନୁଚିତ। ପ୍ରଥମତଃ ପିଲାଟିର ସଂକ୍ରମଣ ଓ ଯନ୍ତ୍ରଣା ସମସ୍ୟା ରହିଥାଏ ଦ୍ୱିତୀୟତଃ ଏହା ଅନ୍ୟ ପିଲାଙ୍କୁ ସଂକ୍ରମିତ କରିବାର ମଧ୍ୟ ଆଶଙ୍କା ରଖୁଥାଏ।

ପିଲାମାନଙ୍କ ପାଇଁ ମାନସିକ କ୍ଷେତ୍ରକୁ ଯଥେଷ୍ଟ ଗୁରୁତ୍ୱ ଦେବା ଜରୁରୀ। ଘରେ ଅଭାବବୋଧ, ପିତାମାତାଙ୍କ କଳହ, କୌଣସି ପାରିବାରିକ କଳଙ୍କ, ଅପନିନ୍ଦା, କୁସଂସ୍କାର ଅନେକ ପିଲାଙ୍କୁ ବିଦ୍ୟାଳୟରେ ପହଞ୍ଚିବା ପାଇଁ ବାଧବାଧକତା ରଖୁଥିଲେ ମଧ୍ୟ ପାଠପଢ଼ା ସମୟରେ ଏବଂ ଅବଶିଷ୍ଟ ସମୟରେ ପିଲାଟି ନିଜ ପରିବେଶର ମାନସିକ କ୍ଷତବିକ୍ଷତକୁ କେବେ ବି ଭୁଲି ପାରିବ ନାହିଁ ଯାହାର ଫଳସ୍ୱରୂପ ପାଠରେ ମନୋନିବେଶ ଓ ଅଧ୍ୟବସାୟ ସହ ଆଗ୍ରହ ମଧ୍ୟ ରଖିବନାହିଁ । ଅନେକ ସମୟରେ କିଛି ପିଲା ଅନେକ ଅଭାବବୋଧ, ଯନ୍ତ୍ରଣାକୁ ସହି ସମାଜର ଏକ ନୂତନ ଦିଗନ୍ତ କ୍ଷେତ୍ରରେ ପହଞ୍ଚି ପାରୁଛନ୍ତି । ସେହିପରି ଅନେକ କ୍ଷେତ୍ରରେ କିଛି ପିଲାମାନଙ୍କର ବଣମଲ୍ଲୀ ପରି ପ୍ରତିଭା ଥାଇ ମଧ୍ୟ ଆଲୋକକୁ ଆସି ପାରିନଥାଏ । ତେଣୁ ପିଲାମାନଙ୍କର ପାଠପଢ଼ା କ୍ଷେତ୍ର ବିଦ୍ୟାଳୟ ହେଉ ବା ଘର ନିଜ ଜୀବନର ଆଖପାଖର ପରିବେଶ ଏହା ବଡ଼ ପ୍ରଭାବର କାରଣ ମଧ୍ୟ ହୋଇଥାଏ ।

ପିଲାମାନେ ବିଦ୍ୟାଳୟକୁ ଯିବା ଆସିବା ସମୟରେ କେତେକ ପିଲା ଚାଲି ଚାଲି, ଅଭିଭାବକଙ୍କ ଗାଡ଼ିରେ, ନିଜେ ସାଇକେଲରେ ବା ବିଦ୍ୟାଳୟର ଗାଡ଼ିରେ ଯିବା ଆସିବା କରିଥାନ୍ତି। ପାଠପଢ଼ା ପୂର୍ବ ଠାରୁ ବାପାମାଆଙ୍କ ବେଶୀ ଚିନ୍ତା ପିଲାଟିର ଯିବା ଆସିବା ସମୟକୁ ଦେଖିରହିଥାଏ। ଆଜିକାଲି ରାସ୍ତା ଭିଡ଼, ଖରାପ ରାସ୍ତା, କୌଣସି ଅଚାନକ ଦୁର୍ଘଟଣା ବିଭିନ୍ନ ସମୟରେ ପିଲାଟିର ବିଦ୍ୟାଳୟ ସମୟ ପାଇଁ ସମ୍ପୂର୍ଣ ରୁଟିନକୁ ବିଗାଡ଼ି ଦେଇଥାଏ । କେତେକ କ୍ଷେତ୍ରରେ ପିଲାମାନେ ସେମାନଙ୍କ ପରୀକ୍ଷାରେ ନିର୍ଦ୍ଧାରିତ ସମୟରେ ପହଞ୍ଚି ପାରିନଥାନ୍ତି। ସେହିପରି କୌଣସି ଦୁର୍ଘଟଣାର କାରଣ ମଧ୍ୟ ପିଲାଟିର ପରବର୍ତ୍ତୀ ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟା ଓ ତାର ନିତିଦିନିଆ ପାଠପଢ଼ା ଉପରେ ଗୁରୁତ୍ୱ ପକାଇଥାଏ। ପିଲାମାନେ ବିଦ୍ୟାଳୟର ପୋଷାକ ପିନ୍ଧୁଥିବାରୁ ବେଶୀ ଟାଇଟ, ବେଶୀ ଢିଲା ପୋଷାକ, ଲମ୍ବା ତା' ଯିବା ଆସିବା ପାଇଁ ମୁକ୍ତ ପ୍ରଚଳନ କ୍ଷେତ୍ରରେ ବାଧକ ହେଉଥିବା କୌଣସି ପୋଷାକ ବଡ଼ ସମସ୍ୟାର କାରଣ ହୋଇଥାଏ । ପ୍ରଥମତଃ ପିଲାଟି ପଢ଼ିବା ବେଳେ ଅଶ୍ୱସ୍ତିକର ଅନୁଭବ କରେ। ଦ୍ୱିତୀୟତଃ ଏହା କୌଣସି ଛୋଟିଆ ମୋଟିଆ ଦୁର୍ଘଟଣାର କାରଣ ମଧ୍ୟ ହୋଇଥାଏ । ପିଲାମାନଙ୍କ ଦାନ୍ତ ସମସ୍ୟା ଥିଲେ କେତେକ ପିଲା ପାଠ ପଢ଼ିବା ସମୟରେ ଦାନ୍ତ ରଗଡ଼ି ଥାଆନ୍ତି। ପରେ ଏହା ଦାନ୍ତ କ୍ଷୟ ହୋଇଥାଏ ଏବଂ ଏହା ସେମାନଙ୍କ ଦାନ୍ତରୋଗର କାରଣ ମଧ୍ୟ ହୋଇଥାଏ।

ଛୋଟପିଲା ଅର୍ଥାତ୍ ପ୍ଲେ-ସ୍କୁଲ ଯାଉଥିବା ପିଲାମାନଙ୍କ ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟାର ବେଶୀ ଭାଗ ପିଲାଟି ଉପରେ ନୁହେଁ ବରଂ ତାଙ୍କ ବାପା ମାଆଙ୍କ ଉପରେ। ଛୋଟ ପିଲା ହୋଇଥିବାରୁ ସେମାନଙ୍କ ପାଠପଢ଼ାର ସମୟ କମ ଥାଏ ଏବଂ ପ୍ରାୟତଃ ଖେଳ ମନୋରଞ୍ଜନ ସହିତ ଅନେକ କ୍ଷେତ୍ରରେ ପାଠ ସହିତ ଖେଳ ରହିଥାଏ। ଛୋଟିଆ ମୋଟିଆ ଦୁର୍ଘଟଣା କେତେକ କ୍ଷେତ୍ରରେ ପିଲାଟିର କ୍ଷତ ପରବର୍ତ୍ତୀ ସମୟରେ ଏକ ଆଘାତ ଜନିତ କାରଣ ମଧ୍ୟ ହୋଇଥାଏ। ଯିବା ଆସିବା ସମୟରେ ପିଲାଟିକୁ ସୁରକ୍ଷିତ ଭାବେ ନେବା ଆଣିବା କରନ୍ତୁ।

ଋତୁକାଳୀନ ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟା : ଆମ ସମସ୍ତଙ୍କ ପାଇଁ ଭଗବାନଙ୍କ ସୃଷ୍ଟିରେ ଛଅଟି ଋତୁ ଥିଲେ ମଧ୍ୟ ବାସ୍ତବରେ ଆମେ ତିନୋଟି ଋତୁ ହିଁ ଅନୁଭବ କରିଥାଉ। ଠିକ ସେହିପରି ପିଲାମାନଙ୍କ ପାଇଁ ବର୍ଷା, ଖରା ଓ ଶୀତ, ଏହିପରି ଭାବେ ତିନୋଟି ଋତୁ ରହିଥାଏ । ପ୍ରାୟତଃ ଅନେକ ବିଦ୍ୟାଳୟରେ ଏହି ଋତୁ ଜନିତ ସମୟକୁ ଦେଖି ପିଲାମାନଙ୍କର ପାଠ୍ୟ ନିର୍ଘଣ୍ଟ ପ୍ରସ୍ତୁତ ହେଉଛି। ସମ୍ଭାବ୍ୟ ପାଣିପାଗକୁ ଦେଖି ବର୍ଷା ପାଇଁ ଆଗୁଆ ବିଦ୍ୟାଳୟ ବନ୍ଦ କରାଯାଉଛି, ଆଗୁଆ ଅଂଶୁଘାତକୁ ମୁକାବିଲା କରିବା ପାଇଁ ଖରାଦିନରେ କେଉଁଠି ବିଦ୍ୟାଳୟ ଆଗୁଆ ଛୁଟି ଘୋଷିତ ହେଉଛି ତ କେଉଁଠି ଶୀତ ଦିନରେ ଥଣ୍ଡା ଓ କୁହୁଡ଼ିକୁ ଦେଖି ବିଦ୍ୟାଳୟର ସମୟ ପରିବର୍ତ୍ତନ ହେଉଛି କିମ୍ବା ସ୍ଥଗିତ ରହୁଛି।

ବର୍ଷା ଋତୁ : ପ୍ରାୟତଃ ପିଲାମାନେ ବିଶେଷକରି ଛୋଟ ପିଲାମାନେ ବର୍ଷା ଦିନରେ ଟିକିଏ ତିନ୍ତିବା ପାଇଁ ତିନ୍ତିତିନ୍ତି କୌତୁହଳ ହୋଇ ଧାଁ ଧଉଡ଼ କରନ୍ତି। ଯେ କୌଣସି ପରିସ୍ଥିତିରେ ହେଉନା କାହିଁକି ପିଲାଟି ଯଦି ବିଦ୍ୟାଳୟ ଯାଉଥାଏ ତେବେ ଓଦା ହେଲେ ଏହା ଶ୍ରେଣୀ କକ୍ଷରେ ପାଠପଢ଼ାରେ ବାଧକ ହୋଇଥାଏ ଏବଂ ଜ୍ୱର ଓ ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟାର କାରଣ ହୋଇଥାଏ। ଏହି ଋତୁରେ ପିଲାମାନଙ୍କ ହଜମ ପ୍ରକ୍ରିୟା ସାମାନ୍ୟ ବାଧାପ୍ରାପ୍ତ ହୋଇଥାଏ ତେଣୁ ଲଘିଷ୍ଟ ଖାଦ୍ୟ ଦିଅନ୍ତୁ, ଋତୁ କାଳୀନ ଫଳ ଦିଅନ୍ତୁ ଏବଂ

ଏହି ସମୟରେ ପିଇବା ପାଣି ଦୂଷିତ ହେବାର ସମସ୍ୟା ରହିଥିବାରୁ ପିଲାଟି ଯେପରି ବିଶୋଧିତ ପାଣି ପିଏ ସେ ଦିଗକୁ ଦେଖନ୍ତୁ । ପିଲା ମାନଙ୍କର ମୁଣ୍ଡ ଓଦା ହେବା ବିଦ୍ୟାଳୟ କକ୍ଷରେ କେବଳ ମୁଣ୍ଡ ବିନ୍ଧାର କାରଣ ହୋଇନଥାଏ ପରେ ଏହାର ପ୍ରକୋପରେ ଜ୍ୱର ହୋଇଥାଏ ଏବଂ ଅଧିକ ସମୟ ଧରି ଚୁଟି ଓଦା ରହିଲେ ଏହା ପରବର୍ତ୍ତୀ ସମୟରେ ବାଳ ଝଡ଼ିବାର କାରଣ ହୋଇଥାଏ । ଏହି ଋତୁରେ ପ୍ରାୟତଃ ଫୁଡ୍ ପଏଜନ୍‌ର ସମସ୍ୟା ପିଲାମାନେ ଅଧିକ ସାମ୍ନା କରିଥା'ନ୍ତି।

ଗ୍ରୀଷ୍ମ ଋତୁ : ପିଲାମାନଙ୍କ ପାଇଁ ଗ୍ରୀଷ୍ମ ଋତୁରେ ହିଁ ଲମ୍ବା ଭେକେସନ୍ ରହିଥାଏ । ତଥାପି ପିଲାମାନେ ଯେଉଁ ଅବଶିଷ୍ଟ ଦିନ ଗୁଡ଼ିକ ବିଦ୍ୟାଳୟରେ କଟାଇଥା'ନ୍ତି ତାହା ସେ ସମୟର ତାପମାତ୍ରା ଓ ପାଣିପାଗକୁ ଦେଖି ଚିନ୍ତା କଲାବେଳକୁ ଗୁରୁତ୍ୱପୂର୍ଣ୍ଣ ଦିଗଟି ହେଉଛି ଯଦି ପିଲାଟି ଟାଣ ଖରାକୁ ସାମ୍ନା କରେ ତେବେ ତା'ର ଶରୀରରୁ ଜଳୀୟ ଅଂଶ ହ୍ରାସ କରିଦେଇ ଦୁର୍ବଳ କରିଦିଏ । କୌଣସି ପିଲା ଯଦି ଶାରୀରିକ ଭାବେ ରୁଗ୍‌ଣ ଥାଆନ୍ତି ତେବେ ସେମାନଙ୍କର ଏହି ସମୟରେ ଅଧିକ କଷ୍ଟ ଦେଇଥାଏ । ଖରାଦିନରେ ପିଲାମାନେ ଥଣ୍ଡା ପିଇବା ପାଇଁ ରୁଚି ରଖୁଥା'ନ୍ତି। ତେବେ ଘରୋଇ ପ୍ରସ୍ତୁତ ଥଣ୍ଡା ସବୁଠାରୁ ଭଲ। କେତେକ ଥଣ୍ଡାପାନୀୟରେ ରାସାୟନିକ ମାତ୍ରା ପିଲାମାନଙ୍କ ସ୍ୱାସ୍ଥ୍ୟ ବିଗାଡ଼ି ଦେଇଥାଏ । ଖରା ଦିନ ପିଲାମାନଙ୍କ ଦେହରୁ ଅଧିକ ଝାଳ ବୋହିଥାଏ ଓ କେତେକ ପିଲାଙ୍କ ଦେହରେ ଘିମିରି ହୋଇଯାଇଥାଏ। ପାଠପଢ଼ା ସମୟରେ ଏହା କେବଳ ଅସ୍ୱସ୍ତିକରର କାରଣ ହୋଇନଥାଏ ବରଂ ଅନ୍ୟ ମାନଙ୍କ ପାଇଁ ସମସ୍ୟା ସୃଷ୍ଟି କରିଥାଏ। କୌଣସି ପରିସ୍ଥିତିରେ ଟାଣ ଖରାରେ ପିଲାମାନଙ୍କୁ ବିଦ୍ୟାଳୟରେ ଯୋଗ ଦେବାକୁ ପ୍ରୋତ୍ସାହିତ କରନ୍ତୁ ନାହିଁ । ଏହା ଅଂଶୁଘାତ ପରିସ୍ଥିତି ସୃଷ୍ଟି କରିପାରେ।

ଶୀତ ଋତୁ : ଶୀତ ଋତୁର ଥଣ୍ଡା ପରିବେଶ, କୋହଲା ପାଗ, ତୁଷାର ପାତ, କୁହୁଡ଼ି ପିଲାମାନଙ୍କ ବିଦ୍ୟାଳୟର ଯିବା ଆସିବା ସମୟକୁ ପ୍ରଭାବିତ କରିଥାଏ। ବିଶେଷକରି କୁହୁଡ଼ିରେ ପିଲାମାନେ ବିଦ୍ୟାଳୟ ଯିବା ସମୟରେ ରାସ୍ତା ଦୃଶ୍ୟମାନ ହୋଇନଥାଏ। ଏବଂ ଶରୀରରେ ବିଶେଷକରି ନାକ କାନରେ କୁହୁଡ଼ି ପଶି ଏହା ଥଣ୍ଡାର କାରଣ ହୋଇଥାଏ। ପିଲାମାନଙ୍କୁ ଶୀତ ଦିନିଆ ଉଲ୍ ବସ୍ତ୍ର ପିନ୍ଧାଇ ବିଦ୍ୟାଳୟକୁ ଛାଡ଼ନ୍ତୁ। ବିଦ୍ୟାଳୟରେ ବି ଥଣ୍ଡା ପରିବେଶରେ ସେ ନିଜେ ଅସ୍ୱସ୍ତିକର, ଶାରୀରିକ ଭାବେ ଅସହଜ ମନେକରିଥାଏ ଥଣ୍ଡା, ସର୍ଦ୍ଦି, ଛିଙ୍କ ମଧ୍ୟ ହୋଇଥାଏ। ଶୀତ ଋତୁ ମଧ୍ୟ ଅନେକ ଖାଦ୍ୟ ପାଇଁ ଏକ ପ୍ରକାର ବାରଣ ରଖୁଥାଏ। ଏହି ଋତୁରେ ପିଲାମାନଙ୍କ ହଜମ ସମସ୍ୟା ଟିକେ ଧୀମା ରହିଥାଏ। ତେଣୁ ଅତ୍ୟଧିକ ଖାଦ୍ୟ ବିଶେଷକରି ଅଧିକ ଏନର୍ଜି ଡ୍ରିଙ୍କସ୍, ଫାଷ୍ଟଫୁଡ, ଆମିଷ ଖାଦ୍ୟ ଶରୀର ପାଇଁ କ୍ଷତିକାରକ ସାବ୍ୟସ୍ତ ହୋଇଥା'ନ୍ତି। ପ୍ରାୟତଃ ବିଦ୍ୟାଳୟରେ ଏହି ଋତୁରେ ବାର୍ଷିକ ଦୌଡ଼କୁଦ ସମାବେଶ ରହିଥାଏ। ପିଲାମାନେ ଏଥିରେ ସାମିଲ ହୋଇ ନିଜ ଉତ୍ତମ ସ୍ୱାସ୍ଥ୍ୟ ପ୍ରଦର୍ଶନର ସୁଯୋଗ ପାଇଥା'ନ୍ତି ଏବଂ ପ୍ରତିଯୋଗିତା ସେମାନଙ୍କୁ ପ୍ରତିଭାର ଏକ ଅନ୍ୱେଷଣର ଦିଗକୁ ନେଇଥାଏ।

ବିଦ୍ୟାଳୟରେ ପିଲାମାନଙ୍କ ପାଇଁ ଏକ ସ୍ୱାସ୍ଥ୍ୟପ୍ରଦ ପରିବେଶ ନିମିତ୍ତ କେବଳ ପିଲାଟି ଉପରେ ଦାୟିତ୍ୱ ଛାଡ଼ିଲେ ହେବନାହିଁ । ପିଲାଟିର ବାପା ମାଆଙ୍କ ଠାରୁ ଶ୍ରେଣୀ ଶିକ୍ଷକ, ତା ସହପାଠୀ ସହପାଠିନୀଙ୍କ ଠାରୁ ବିଦ୍ୟାଳୟର ଅଧ୍ୟକ୍ଷ, ଗେଟ୍ କିପର୍ ହୁଅନ୍ତୁ ବା ଗାଡ଼ି ଚାଳକ, ସମସ୍ତଙ୍କର ନିଜ ନିଜ କ୍ଷେତ୍ରରେ ପିଲାଟିର ଉତ୍ତମ ବୌଦ୍ଧିକ ବିକାଶ ପାଇଁ ଗୁରୁତ୍ୱପୂର୍ଣ୍ଣ ଭୂମିକା ରହିଛି। ପିଲାଟିକୁ ସବୁବେଳେ ଈଶ୍ୱରଭାବ ସମ୍ପନ୍ନ ଓ ଚିନ୍ତା ସମ୍ପନ୍ନ କରନ୍ତୁ। ସତ୍‌ଶିକ୍ଷା ଓ ସଦାଚାର, ଜୀବନର ନୈତିକ ଶିକ୍ଷା ପିଲାଟିକୁ ଅସଲ ମର୍ମରେ ବୁଝାନ୍ତୁ। ପିଲାଟି କେବଳ ନିଜ, ବାପାମାଆ ପରିବାର, ବିଦ୍ୟାଳୟ, ବନ୍ଧୁବର୍ଗଙ୍କ ପାଇଁ ନୁହଁ ତାର ଉତ୍ତମ ଅଭିବୃଦ୍ଧିର ବିକାଶ ଏକ ବୃହତ ସମାଜ, ରାଜ୍ୟ, ଦେଶ ପାଇଁ ଅନେକ ଗୁରୁତ୍ୱପୂର୍ଣ୍ଣ । ମାନବ ସେବାରେ ନିଜକୁ ନିୟୋଜିତ କରି ସବୁବେଳେ ଜନକଲ୍ୟାଣ ପାଇଁ, କାହାର ସାମାନ୍ୟତମ ଅନିଷ୍ଟ ନକରି ସାଧୁତାପୂର୍ଣ୍ଣ ନୀତି, ଅଧ୍ୟବସାୟର ନୈତିକ ଶିକ୍ଷା ବିଦ୍ୟାଳୟର ପରିବେଶ ଭିତରୁ ଝଙ୍କୃତ ହେଉ, ଅନୁପ୍ରେରିତ ହେଉ।

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ଚର୍ମର୍ ଯତ୍ନ୍

ଡ: ପ୍ରତାପ ଚନ୍ଦ୍ର ରଥ

ଚର୍ମ (Skin) ଦେହର ଗୋଟିଏ ବଡ଼ ଅଂଶ। ଚର୍ମ ୩ଭାଗରେ ବିଭକ୍ତ। ଗୋଟିଏ ବାହ୍ୟ ଚର୍ମ (Epidermis), ଦ୍ୱିତୀୟ ସୂକ୍ଷ୍ମଚର୍ମ (Dermis) ଆଉ ତୃତୀୟ Inner skin/ Subcutis । ଉପର ଚର୍ମ ବା ବାହ୍ୟଚର୍ମ ୫ ସ୍ତର ହୋଇଥାଏ।

ଚର୍ମର କାର୍ଯ୍ୟ (Function) :

୧. ଶରୀରର ସୌନ୍ଦର୍ଯ୍ୟ ରକ୍ଷା କରିଥାଏ।

୨. ବାହ୍ୟ ଜୀବାଣୁକୁ ଶରୀର ଭିତରକୁ ପ୍ରବେଶ କରିବାକୁ ଦେଇ ନଥାଏ।

୩. ଶରୀର (Body) ର ତାପମାତ୍ରା(Temperature)କୁ ସନ୍ତୁଳନ (Regulate)କରିଥାଏ।

୪. ଶରୀର (Body) ଭିତରେ ଥିବା ଦୁଷିତ ପଦାର୍ଥ (Toxin) ଝାଳ ଆକାରରେ ଲୋମ କୂପ ଦେଇ ବାହାର କରିଦିଏ।

୫. ସକାଳ ଖରା ଚର୍ମରେ ପଡ଼ିବା ଦ୍ୱାରା VIT-Dଚର୍ମଦ୍ୱାର ମାଧ୍ୟମରେ Synthesis ବା ପ୍ରସ୍ତୁତ ହୋଇଥାଏ।

୬. ସମସ୍ତ Sensation ବା ସ୍ପର୍ଶ ଚର୍ମ ଦ୍ୱାରା Brainକୁ ପଠାଏ। ଚର୍ମ ଓ Brain Neural Crestରୁ develop ହୋଇଥାଏ। ତେଣୁ ଚର୍ମ ଓ Brain ଅଙ୍ଗାଙ୍ଗୀ ଭାବେ ଜଡିତ।

ତେଣୁ ଆମ ସମସ୍ତଙ୍କର କର୍ତ୍ତବ୍ୟ ଚର୍ମକୁ ରକ୍ଷଣାବେକ୍ଷଣ (Maintain) କରି ରଖିବା।

ଯେହେତୁ ଚର୍ମ ଗୋଟିଏ ବାହ୍ୟ ଆବରଣ ଚର୍ମରେ ଖରା, ପବନ, ଥଣ୍ଡା, ବର୍ଷା, ଧୂଳି ସବୁବେଳେ ବାଜିଥାଏ। ତେଣୁ ଚର୍ମରେ ବିଭିନ୍ନ ପ୍ରକାର ରୋଗ ଦେଖାଯାଇଥାଏ।

ପରିଷ୍କାର ପରିଚ୍ଛନ୍ନ ରହିବାଦ୍ୱାରା ଚର୍ମରେ ରୋଗ ପରିମାଣ କମ୍ ହୋଇଥାଏ। ଶୀତଦିନେ ଚର୍ମରେ ବିଭିନ୍ନ ପ୍ରକାର ରୋଗ ଯଥା ଏକ୍‌ଜିମା, ଯାଦୁ, କାଛୁ, କୁଣ୍ଡିଆ, ରୂପୀ, ମୁଣ୍ଡରେ ଉକୁଣୀ, ନଖପାଚିବା, ଧଳାଛଉ, Herpis ପ୍ରଭୃତି ସାଧାରଣ ରୋଗ ହୋଇଥାଏ।

ଆମେ ଯେତେ ଅଧିକ ସଚେତନ (Conscious) ହେବା ଏବଂ ଚର୍ମର ଯତ୍ନ୍ ନେବା ସେତେ ଚର୍ମ ରୋଗରୁ ମୁକ୍ତ ହୋଇପାରିବା।

ଅଧିକାଂଶ ଚର୍ମ ରୋଗ ଶୀଘ୍ର ଭଲ ହୋଇ ନଥାଏ। ତେଣୁ ଚର୍ମରୋଗୀମାନେ ବ୍ୟତିବ୍ୟସ୍ତ ହୋଇପଡ଼ନ୍ତି ଓ ଚିନ୍ତିତ ହୋଇଯାଆନ୍ତି। ଜ୍ୱର, ଝାଡ଼ା, କାଶ, କଫ ଯେପରି ଶୀଘ୍ର ଭଲ ହୋଇଥାଏ, ଚର୍ମରୋଗ ସେତେ ଶୀଘ୍ର ଭଲ ହୋଇନଥାଏ ଏବଂ ପ୍ରାୟ ଚର୍ମରୋଗ Chronic ହୋଇଯାଏ। ଚର୍ମ (Skin)ଆଉ ମସ୍ତିଷ୍କ (Brain)ରୁ Neural Crestରୁ develop ହୋଇଥିବାରୁ ଚର୍ମରୋଗୀମାନେ ଚିନ୍ତିତ ହୋଇପଡ଼ନ୍ତି ଓ ଧୈର୍ଯ୍ୟ ହରାଇଥାନ୍ତି।

ତେଣୁ ଚର୍ମରୋଗ ବିଶେଷଜ୍ଞମାନେ ଚର୍ମରୋଗୀଙ୍କୁ ଚିକିତ୍ସା କଲାବେଳେ ରୋଗୀମାନଙ୍କୁ ପ୍ରଥମେ Counselling କରିଥା'ନ୍ତି। ପ୍ରଥମରୁ ରୋଗୀମାନଙ୍କୁ Counselling କରିବା ଦ୍ୱାରା ତାଙ୍କ ମନ ଭିତରୁ ଭୟ କମିଥାଏ ଏବଂ ସେମାନେ ସଚେତନ ହୋଇଥା'ନ୍ତି।

ସମସ୍ତ ଚର୍ମରୋଗ ଔଷଧ ଦ୍ୱାରା ଭଲ ହୋଇ ନଥାଏ। ନିଜ ଉପରେ ଆସ୍ଥା ଓ ବିଶ୍ୱାସ ହରାଇବା ଦ୍ୱାରା ଚର୍ମରୋଗ ଭଲ ହେବା କଷ୍ଟକର ହୋଇଥାଏ।

ଚିକିତ୍ସା କରିବା ପୂର୍ବରୁ ଚର୍ମରୋଗୀମାନେ ନିଜକୁ ସଚେତନ କରାଇବା ଉଚିତ। ଭଗବତ ଶକ୍ତି ଉପରେ ଭରସା ରଖିବା ଉଚିତ।

ଯେପର୍ଯ୍ୟନ୍ତ ଚର୍ମରୋଗୀମାନେ ନିଜେ ସଚେତନ ନହେବେ ଭଗବତ ଶକ୍ତି ଉପରେ ବିଶ୍ୱାସ ନରଖିବେ, ରୋଗ ଶୀଘ୍ର ଭଲ ହେବାପାଇଁ ସମସ୍ୟା ହୁଏ।

ଚର୍ମରୋଗ ବିଶେଷଜ୍ଞଙ୍କ ଉପରେ ବିଶ୍ୱାସ ରଖି ଚର୍ମରୋଗୀମାନେ ଔଷଧ ଖାଇବା ପୂର୍ବରୁ ଭଗବାନଙ୍କୁ ସମର୍ପଣ କରି ଔଷଧ ଖାଇବା ଦ୍ୱାରା ନିଜ ଉପରେ ଥିବା ବିଶ୍ୱାସ ବଢ଼ିଯାଇଥାଏ ଏବଂ ଏହି ରୋଗ ଶୀଘ୍ର ଭଲ ହେବାରେ ସାହାଯ୍ୟ କରିଥାଏ।

ସବୁବେଳେ ପରିଷ୍କାର ପରିଚ୍ଛନ୍ନ ରହିବାଦ୍ୱାରା ଚର୍ମରୋଗ କମ୍ ହୋଇଥାଏ। ପ୍ରତ୍ୟେକ ଦିନ ଦେହରେ ତେଲ ଲଗାଇ ଗାଧୋଇବା ଦ୍ୱାରା ଚର୍ମ ଚିକ୍କଣ ରହିଥାଏ ଏବଂ ଲୋମକୂପ ସଫା ରହିଥାଏ।

ବଜାରରେ ମିଳୁଥିବା ବହୁଳ ପ୍ରଚାରିତ ଫେସ୍ ୱାସରେ ମୁହଁ ଧୋଇବା ଉଚିତ ନୁହେଁ। ଆମ୍ଭେମାନେ ଯଦି ମୁହଁକୁ ପାଣିରେ ଦିନକୁ ୪/୫ଥର ଧୋଇବା ତ'ହେଲେ ମୁହଁ ସଫା ରହିବ, ଧୂଳିମଳି ବାହାରିଯିବ। ମୁହଁରେ ଚିକ୍କଣତା ଓ ସୁନ୍ଦରତା ବଢ଼ିଯାଏ। ଫେସ୍ ୱାସରେ ମୁହଁ ଧୋଇବାକୁ ଚାହୁଁଥିଲେ ଚର୍ମରୋଗ ବିଶେଷଜ୍ଞଙ୍କ ସାଙ୍ଗରେ ପରାମର୍ଶ କରି ଲଗାଇବା ଉଚିତ।

ମୁଣ୍ଡକୁ ସବୁବେଳେ ସଫା ରଖିବା ଉଚିତ। ଝିଅପିଲାମାନେ ସପ୍ତାହକୁ ଦୁଇଥର ମୁଣ୍ଡ ଧୋଇ ସଫା କରିବା ଉଚିତ। ମୁଣ୍ଡରେ ଅତ୍ୟଧିକ ସାମ୍ପୋ ବ୍ୟବହାର କରିବା ଅନୁଚିତ। ଚର୍ମରୋଗ ବିଶେଷଜ୍ଞଙ୍କ ସାଙ୍ଗରେ ପରାମର୍ଶ କରି ସାମ୍ପୋ ବ୍ୟବହାର କଲେ କେଶ ସୁରକ୍ଷିତ ରହିବ, ରୂପି ହେବ ନାହିଁ, ଉକୁଣୀ ହେବ ନାହିଁ ଓ କେଶ ଝଡ଼ିବ ନାହିଁ। ମୁଣ୍ଡରେ ସବୁବେଳେ ତେଲ ଲଗାଇଲେ କେଶ ଭଲ ରହେ ଓ ଭଲ ବଢିଥାଏ।

କେତେଗୁଡ଼ିଏ ଚର୍ମରୋଗ ଡିଆଁରୋଗ। ଶୀତଦିନେ ଡିଆଁରୋଗ ଅଧିକ ହୋଇଥାଏ। ତା'ର କାରଣ ଅଧିକାଂଶ ଲୋକ, ହଷ୍ଟେଲରେ ରହୁଥିବା ପିଲାମାନେ ଶୀତକୁ ଡରି ସବୁଦିନ ଗାଧାନ୍ତି ନାହିଁ। ନିଜର ଜାମାକୁ ସଫାସୁତୁରା ରଖନ୍ତି ନାହିଁ। ଯାହାଫଳରେ ଚର୍ମ ସଫା ହୋଇନଥାଏ, ଲୋମକୂପରେ ମଳି ଜମିଯାଏ ଓ ଚର୍ମରୋଗ ହୋଇଥାଏ। କାଛୁ, କୁଣ୍ଡିଆ, ଯାଦୁ, ମୁଣ୍ଡର ରୂପୀ, ଉକୁଣୀ ଏ ସବୁ ଅପରିଷ୍କାର ରହିବା ଦ୍ୱାରା ହୋଇଥାଏ। ତେଣୁ ସମସ୍ତେ ସଚେତନ ରହିଲେ, ପ୍ରତ୍ୟେକଦିନ ତେଲଲଗାଇ ସ୍ନାନ କଲେ, ପରିଷ୍କାର ପୋଷାକ ପରିଧାନ କଲେ ଚର୍ମରୋଗ ହୋଇନଥାଏ।

ଚର୍ମରୋଗ ହେଲେ କୌଣସି ଔଷଧ ଦୋକାନୀ ପାଖକୁ ନଯାଇ ଚର୍ମରୋଗ ବିଶେଷଜ୍ଞଙ୍କ ସାଙ୍ଗରେ ପରାମର୍ଶ କରନ୍ତୁ ଏବଂ ବିଶ୍ୱାସ ରଖି ଔଷଧ ସେବନ କରନ୍ତୁ ରୋଗରୁ ନିଶ୍ଚୟ ଆରୋଗ୍ୟ ହେବେ।

ଅଧିକାଂଶ ଲୋକଙ୍କର ମତ, ଦେହରେ ସବୁଦିନ ସାବୁନ ଲଗାଇ ଗାଧୋଇଲେ ଚର୍ମ ସଫା ରହେ, କିନ୍ତୁ ଏହା ଠିକ୍ ନୁହେଁ। ବଜାରରେ ବହୁତ ପ୍ରକାରର ସାବୁନ ମିଳିଥାଏ। ତାହା ଲଗାଇବା ଦ୍ୱାରା ଚର୍ମର ଚିକ୍କଣତା ନଷ୍ଟ ହୋଇଥାଏ। ଚର୍ମ ଶୁଷ୍କ ହୋଇଥାଏ। ତେଣୁ ସମସ୍ତେ ଦେହରେ ତେଲ ଲଗାନ୍ତୁ। ଚର୍ମକୁ ଚିକ୍କଣ ରଖନ୍ତୁ। ଚର୍ମରୋଗ ବିଶେଷଜ୍ଞଙ୍କ ସହିତ ପରାମର୍ଶ କରି ଚର୍ମକୁ ଆବଶ୍ୟକ ଥିବା ଭଳି ସାବୁନ ମାସକେ ଥରେ ଲଗାନ୍ତୁ।

ନଖ ବଢହେଲେ ତାକୁ କାଟି ଦେବା ଉଚିତ। କାରଣ ନଖତଳେ ମଳି ରହିଥାଏ। କୁଣ୍ଡାଇଲେ Infection ହେବାର ସମ୍ଭାବନା ଥାଏ। କେଶ ବଢ଼ିଗଲେ ତାକୁ ଠିକ୍ ସମୟରେ କାଟି ସଫା ରଖିଲେ ମୁଣ୍ଡ ପରିଷ୍କାର ରହିଥାଏ।

ଚର୍ମ ପ୍ରକୃତିର ଦାନ। ଯଦି ଆମେ ସଚେତନ ହୋଇ ପ୍ରକୃତି ପ୍ରଦତ୍ତ ଅଂଶକୁ ସୁରକ୍ଷିତ ରଖିବା, ବହୁଳ ପ୍ରଚାରିତ ତଥା ବିଜ୍ଞାପିତ ପ୍ରସାଧାନଠାରୁ ଦୂରେଇ ରହିବା, ପରିଷ୍କାର ପରିଚ୍ଛନ୍ନ ରହିବା, ଚର୍ମରେ ତେଲ ଲଗାଇ ଚିକ୍କଣ ରଖିବା ତାହେଲେ ଆମର ଚର୍ମ ସୁରକ୍ଷିତ ରହିପାରିବ।

ଚର୍ମକୁ ସୁସ୍ଥ ରଖନ୍ତୁ, ଭଲ ରୁହନ୍ତୁ, ଖୁସି ରୁହନ୍ତୁ।

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ଆୟୁର୍ବେଦ ଦୃଷ୍ଟିକୋଣରୁ ଅସୁସ୍ଥତା ଓ ରୋଗର ଉତ୍ପତ୍ତି

ଡ. ହରପ୍ରିୟା ଧଳ
BAMS, Aurveda Practitioner

ଅସୁସ୍ଥତା: ଆୟୁର୍ବେଦ ଅନୁସାରେ ସ୍ୱାସ୍ଥ୍ୟ କେବଳ ରୋଗ ନଥିବା ଅବସ୍ଥା ନୁହେଁ, ବରଂ ଶରୀର, ମନ ଓ ଇନ୍ଦ୍ରିୟର ଅସନ୍ତୁଳିତ ଅବସ୍ଥା। ଯେତେବେଳେ ଶରୀରର ବାତ, ପିତ୍ତ ଓ କଫ ଦୋଷର ସନ୍ତୁଳନ ନଷ୍ଟ ହୁଏ, ଅଗ୍ନି ବିକୃତ ହୁଏ ଏବଂ ଶରୀରରେ ଆମ (ଅପାଚିତ ଦ୍ରବ୍ୟ) ସଞ୍ଚୟ ହୁଏ, ସେତେବେଳେ ଅସୁସ୍ଥତାର ଆରମ୍ଭ ହୁଏ।

ରୋଗର ଉତ୍ପତ୍ତି:

୧. ତ୍ରିଦୋଷ (ବାତ, ପିତ୍ତ ଓ କଫ)ର ଅସନ୍ତୁଳନ:

ଆୟୁର୍ବେଦ ଅନୁସାରେ ତ୍ରିଦୋଷର ସନ୍ତୁଳନ ଭଙ୍ଗ ହେଲେ ରୋଗ ସୃଷ୍ଟି ହୁଏ। ଯେପରିକି ବାତ ଦୋଷର ଅସନ୍ତୁଳନ ହେଲେ- ଶରୀରରେ ଶୁଷ୍କତା, କୋଷ୍ଠକାଠିନ୍ୟ, ଗ୍ୟାସ, ଚିନ୍ତା, ଅଶାନ୍ତି, ନିଦ୍ରା ସମସ୍ୟା, ଶରୀରରେ ବେଦନା ଦେଖାଯାଇ ପାରେ। ପିତ ଅସନ୍ତୁଳନ ହେଲେ- ଅତ୍ୟଧିକ ଉଷ୍ମା, ଅଜୀର୍ଣ୍ଣ, ଚର୍ମରେ ଲାଲିମା ଅତ୍ୟଧିକ କ୍ରୋଧ ଓ ଚିଡ଼ଚିଡ଼ା ପଣ ହୋଇଥାଏ।

କଫ ଅସନ୍ତୁଳନ ହେଲେ- ଆଳସ୍ୟ, ଭାରୀପଣ, ଓଜନ ବୃଦ୍ଧି ଏବଂ ମାନସିକ ଜଡ଼ତା ଭଳି ଲକ୍ଷଣ ଦେଖାଯାଏ।

ଏହାର ମୁଖ୍ୟ କାରଣ- ଅନିୟମିତ ଖାଦ୍ୟ ଓ ଜୀବନଶୈଳୀ ଅତ୍ୟଧିକ ଚାପ ଓ ଚିନ୍ତା, ନିଦ୍ରା, ଅସନ୍ତୁଳିତ ଖାଦ୍ୟ, ଶାରୀରିକ କାର୍ଯ୍ୟକଳାପରେ ଅଭାବ।

୨. ଅଗ୍ନିରେ ଦୁର୍ବଳତା : ଆୟୁର୍ବେଦ ଅନୁସାରେ ଅଗ୍ନି ହେଉଛି ଶରୀରର ପାଚନ ଓ ମେଟାବୋଲିଜିମ୍‌ର ମୁଖ୍ୟ ଶକ୍ତି। ଅଗ୍ନି ଦୁର୍ବଳ ହେଲେ ଖାଦ୍ୟ ଠିକ୍ ଭାବେ ପାଚନ ହୋଇପାରେ ନାହିଁ। ଏହାର ପ୍ରମୁଖ କାରଣ- ଅତ୍ୟଧିକ ଓ ଅନିୟମିତ ଭୋଜନ, ଅତ୍ୟଧିକ ଭାରୀ ଓ ଗୁରୁ ଖାଦ୍ୟ, ବାରମ୍ବାର ଖାଇବା, ବ୍ୟାୟାମର ଅଭାବ, ଅତ୍ୟଧିକ ମାନସିକ ଚାପ, ଅନିୟମିତ ନିଦ୍ରା, ଥଣ୍ଡା ଖାଦ୍ୟ ପାନୀୟ, ଦିନଚର୍ଯ୍ୟା ଓ ଋତୁଚର୍ଯ୍ୟା ପାଳନ ନହେବା।

୩. ଆମର ସଞ୍ଚୟ: ଆୟୁର୍ବେଦ ଅନୁସାରେ ଅଗ୍ନି ଦୁର୍ବଳ (ମନ୍ଦାଗ୍ନି) ହେଲେ ଖାଦ୍ୟ ସଠିକ୍ ଭାବରେ ପାଚନ ହୋଇପାରେ ନାହିଁ। ଏହି ଅପାଚିତ ଅଂଶରୁ "ଆମ" ବୋଲି କୁହାଯାଏ। ଆମ ସଞ୍ଚୟର ମୁଖ୍ୟ କାରଣ ପାଚନ ଶକ୍ତିର ଦୁର୍ବଳତା, ଅପାଚ୍ୟ ଖାଦ୍ୟ ଖାଇବା, ଅସମୟରେ ଭୋଜନ, ଦିନରେ ଅତ୍ୟଧିକ ଶୋଇବା, ଅତ୍ୟଧିକ ମାନସିକ ଚାପ ଓ ଅନିୟମିତ ଦିନଚର୍ଯ୍ୟା ଓ ନିଦ୍ରା।

"ଆମ"ର ସଂଚୟ ହେଲେ - ଆମବାତ, ଅଜୀର୍ଣ୍ଣ, ଅରୁଚି, କୋଷ୍ଠକାଠିନ୍ୟ ଆଦି ରୋଗ ସୃଷ୍ଟି ହୋଇଥାଏ।

୪. ଅସ୍ୱାସ୍ଥ୍ୟକର ଜୀବନଶୈଳୀର କାରଣ-

ଅନିୟମିତ ଖାଦ୍ୟପାନ

ଅଧିକ କିମ୍ବା କମ ନିଦ୍ରା

ଅଧିକ ଚିନି ଓ ଲୁଣ ସେବନ

ବ୍ୟାୟାମର ଅଭାବ

ଧୂମପାନ ଓ ମଦ୍ୟପାନ

ଦିନଚର୍ଯ୍ୟା ଓ ଋତୁ ଚର୍ଯ୍ୟାକୁ ପାଳନ କରିବାଦ୍ୱାରା ଅଧିକ ଓଜନ/ସ୍ଥୂଳତା, ଟାଇପ-୨ ଡାଇବେଟିସ୍, ଉଚ୍ଚରକ୍ତ ଚାପ, ହୃଦରୋଗ, ପାଚନ ସମସ୍ୟା ଆଦି ଦେଖାଯାଇପାରେ।

୫.ପ୍ରଜ୍ଞାପରାଧ – ଆୟୁର୍ବେଦରେ ପ୍ରଜ୍ଞାପରାଧ ଅର୍ଥ ହେଉଛି ଠିକ୍ କଥା ଜଣିଥିଲେ ମଧ୍ୟ ତାହାର ବିପରୀତ ଆଚରଣ କରିବା, ଯେପରିକି- ଅସ୍ୱାସ୍ଥ୍ୟକର ଖାଦ୍ୟ ଶରୀର ପାଇଁ ଭଲ ନୁହେଁ ଜାଣି ମଧ୍ୟ ଅତ୍ୟଧିକ ଖାଇବା, ନିଦ୍ରା ଆବଶ୍ୟକ ଜାଣି ମଧ୍ୟ ଡେରିରେ ଶୋଇବା, ଶରୀରକୁ ବିଶ୍ରାମ ନଦେବା, ଶରୀରର ପ୍ରାକୃତିକ ବେଗ (ମଳ, ମୂତ୍ର)କୁ ଅଟକାଇବା, ରୋଗ ଲକ୍ଷଣ ଥିଲେ ମଧ୍ୟ ଅବହେଳା କରିବା, ପ୍ରଜ୍ଞାପରାଧରୁ ହେଉଥିବା ରୋଗ- ଅନିଦ୍ରା, ପାଚନ ସମସ୍ୟା, ଉଚ୍ଚରକ୍ତଚାପ, ଡାଇବେଟିସ୍, ଗଣ୍ଠି ଓ ଶରୀରରେ ବେଦନା।

୬. କାଳ ଓ ପରିବେଶର ପ୍ରଭାବ: ଆୟୁର୍ବେଦରେ କାଳ (ଋତୁ) ଓ ପରିବେଶ ଶରୀରର ସ୍ୱାସ୍ଥ୍ୟ ଉପରେ ପ୍ରଭାବ ପକାଉଥିବା ମୁଖ୍ୟ କାରକ ଭାବେ ବିଚାର କରାଯାଏ। କାଳ ଓ ପରିବେଶ ଜନିତ କାରଣ- ଅତ୍ୟଧିକ ଗରମ କିମ୍ବା ଥଣ୍ଡା ପାଗ, ହଠାତ ଋତୁ ପରିବର୍ତ୍ତନ, ଅତ୍ୟଧିକ ଶୁଷ୍କ ପରିବେଶ, ଦୂଷିତ ପାଣି, ଅପରିଷ୍କାର ପରିବେଶ, ଅତ୍ୟଧିକ ଶବ୍ଦ ପ୍ରଦୂଷଣ।

ଏଥିରୁ ହେଉଥିବା ରୋଗ- ସର୍ଦ୍ଦି, କାଶ, ଶ୍ୱାସ, ଆଲର୍ଜି, ଚର୍ମରୋଗ ବା ଚର୍ମରେ ଜ୍ୱଳନ, ଜ୍ୱର ଓ ସଂକ୍ରମଣ ଜନିତ ରୋଗ, ଥଣ୍ଡାରେ ଗଣ୍ଠି ଓ ମାଂସପେଶୀ କଠିନତା, ଶ୍ୱାସନଳୀରେ ସମସ୍ୟା ଆଦି ରୋଗ ସୃଷ୍ଟି ହୋଇପାରେ।

ଉପସଂହାର:

ଆୟୁର୍ବେଦ ଦୃଷ୍ଟିକୋଣରୁ ଅସୁସ୍ଥତା ଓ ରୋଗ ଉତ୍ପତ୍ତି ଏକ ଦୀର୍ଘ ପ୍ରକ୍ରିୟା, ଯାହା ଶରୀର ଓ ମନର ସ୍ୱାଭାବିକ ସନ୍ତୁଳନ ବିଗିଡ଼ିବା ଆରମ୍ଭ ହୋଇଯାଏ। ତେଣୁ ଆୟୁର୍ବେଦର ମୁଖ୍ୟ ଲକ୍ଷ୍ୟ କେବଳ ରୋଗର ଚିକିତ୍ସା ନୁହେଁ ବରଂ ରୋଗକୁ ନିରୁପଣ କରିବା, ରୋଗକୁ ରୋକିବା ଏବଂ ସ୍ୱାସ୍ଥ୍ୟକୁ ଦୀର୍ଘସ୍ଥାୟୀ କରିବା।

"ସ୍ୱାସ୍ଥ୍ୟର ସୁରକ୍ଷା ହେଉଛି ଆୟୁର୍ବେଦର ପ୍ରଥମ ପ୍ରାଥମିକତା"

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ଜୀବନର ଲକ୍ଷ୍ୟ କ'ଣ ସୁଖଲାଭ କରିବା ?

ଏହାହିଁ ସବୁକିଛିକୁ ଗୋଳମାଳ କରିଦିଏ।

ମାନବଜୀବନର ଲକ୍ଷ୍ୟ ହେଲା ଭଗବାନଙ୍କୁ ଆବିଷ୍କାର କରିବା ଏବଂ ତାଙ୍କୁ ଅଭିବ୍ୟକ୍ତ କରିବା। ଏହି ଆବିଷ୍କାର ସ୍ୱାଭାବିକ ଭାବରେ ଆମକୁ ସୁଖ ଆଡ଼କୁ ପରିଚାଳିତ କରିନିଏ। ମାତ୍ର ଏହି ସୁଖ ଗୋଟିଏ ପରିଣତି ମାତ୍ର, ଏହା ଆଦୌ ଲକ୍ଷ୍ୟ ନୁହେଁ। ଆଉ ସାଧାରଣ ଗୋଟିଏ ପରିଣତିକୁ ଜୀବନର ଲକ୍ଷ୍ୟ ବୋଲି ଗ୍ରହଣ କରିବାର ଏହି ଭ୍ରାନ୍ତିରେହିଁ ମାନବଜୀବନକୁ ବିପର୍ଯ୍ୟସ୍ତ କରୁଥିବା ଅଧିକାଂଶ ଦୁଃଖଦୁର୍ଦ୍ଦଶାର ମୂଳ ବୀଜ ନିହିତ।

୨୮ ମାର୍ଚ୍ଚ, ୧୯୭୦ ***ଶ୍ରୀମା***

ଶ୍ରୀଅରବିନ୍ଦ ପାଠଚକ୍ରର କର୍ମୀମାନେ କିପରି ସମଯୁକ୍ତମେ ପଦକ୍ଷେପ ନେଇ ସୁମନ ସ୍ୱେଚ୍ଛାସେବୀରେ ଅଂଶଗ୍ରହଣ କରି ପାରିବେ

ଶ୍ରୀମତୀ ମନୋରମା ନାୟକ

ସମଗ୍ର ଓଡ଼ିଶାରେ ମା'ଙ୍କ କାର୍ଯ୍ୟର ବିଭିନ୍ନ ଧାରାର ଭିତ୍ତିଭୂମି ହେଉଛି ଶ୍ରୀଅରବିନ୍ଦ ପାଠଚକ୍ର ସଙ୍ଗଠନ। ଏହା ଯେତିକି ଦୃଢ଼ ହୋଇ ଉଠିବ ବିଭିନ୍ନ ଧାରା ମଧ୍ୟ ସେତିକି ଦୃଢ଼ଭାବେ ସଙ୍ଗଠିତ ହୋଇ ଉଠିବେ।

ନୂତନ ଜଗତ ସୃଷ୍ଟିପାଇଁ ମା' ଓ ପ୍ରଭୁଙ୍କର କରୁଣାର ଧାରା ଅବାରିତ ଭାବେ ଝରି ପଡୁଛି। ଏହି କାର୍ଯ୍ୟର ମୁଖ୍ୟ ଯନ୍ତ୍ର ପୂଜ୍ୟ ବାବାଜି ମହାରାଜ, ପୂଜ୍ୟ ପ୍ରପତ୍ତି ମହାଶୟ ଓ ଆତ୍ମମାନଙ୍କର ପ୍ରିୟ ପୂଜ୍ୟ ମାମୁଁଙ୍କର ତପସ୍ୟା ଜାରି ରହିଛି। ସୂକ୍ଷ୍ମ ଭାବରେ ପ୍ରତ୍ୟେକ କାର୍ଯ୍ୟରେ ମାମୁଁଙ୍କର ଉପସ୍ଥିତି ରହିଛି।

ଆଜି ସୁମନ ସ୍ୱେଚ୍ଛାସେବୀମାନଙ୍କର କାର୍ଯ୍ୟର ଧାରାକୁ ଆତ୍ମମାନଙ୍କ ଆଗରେ ଯେଭଳି ଭାବରେ ପ୍ରଦର୍ଶନ କରାଯାଇ ପାରିଛି ଏହାର ପଶ୍ଚାତ୍‌ରେ ପୂଜ୍ୟ ମାମୁଁ (ଶ୍ରୀ ଗଦାଧର ମିଶ୍ର) ଚିର ସ୍ମରଣୀୟ ହୋଇ ରହିବେ। ପ୍ରତ୍ୟେକ କାର୍ଯ୍ୟର ଧାରାହିଁ ମା'ଙ୍କ କାର୍ଯ୍ୟ ପୂର୍ଣ୍ଣ ରୂପରେଖ। ଧିରେ ଧିରେ ପୂଜ୍ୟ ମାମୁଁହିଁ ଏହାକୁ ଆତ୍ମମାନଙ୍କ ଆଗରେ ଦର୍ଶାଇ ଦେଲେ।

ସୁମନ-ସୁରକ୍ଷିତ ମାତୃତ୍ୱ ଆଶ୍ୱାସନ।

ମା' କହୁଛନ୍ତି- ନାରୀର ଯଥାର୍ଥ କ୍ଷେତ୍ର ହେଉଛି ଆଧ୍ୟାତ୍ମିକତା। ଏକ ନୂତନ ଚେତନା ଓ ନୂତନ ଜୀବନର ପ୍ରକାଶ ପାଇଁ ନିଜକୁ ପ୍ରସ୍ତୁତ କରିବା ଲକ୍ଷ୍ୟରେ ଆମେ ଏଠାରେ ରହିଛୁ। ନୂତନ ଜାତିର ପ୍ରଥମ ନମୂନାକୁ ଏହି ପୃଥିବୀରେ ଜନ୍ମ ଦେବା ହେଉଛି ତା'ର ସତନ୍ତ୍ର କାର୍ଯ୍ୟ। ନାରୀହିଁ ଅତିମାନବକୁ ଜନ୍ମ ଦେବ। ଏହି କାର୍ଯ୍ୟଟି ନାରୀ ଉପରେ ହିଁ ନ୍ୟସ୍ତ କରାଯାଇଛି।

କଟକ ଜିଲ୍ଲାରେ ସର୍ବମୋଟ ୧୪ଟି ବ୍ଲକ। ବହୁ ଆଗରୁ ବିଭିନ୍ନ ବ୍ଲକର ଗ୍ରାମମାନଙ୍କରେ ପାଠଚକ୍ର ଗଢ଼ି ଉଠିଥାଏ। ପ୍ରଭୁଙ୍କର ୧୫୦ତମ ଜନ୍ମଜୟନ୍ତୀ ପାଳନ ଅବସରରେ ଇଚ୍ଛାକଲୁ କଟକ ଜିଲ୍ଲାର ପ୍ରତ୍ୟେକ ପଞ୍ଚାୟତ ମାନଙ୍କରେ ପାଠଚକ୍ର ସଙ୍ଗଠକମାନଙ୍କୁ ପ୍ରସ୍ତୁତ କରିବା। କଟକ ଜିଲ୍ଲାରେ ସର୍ବମୋଟ ୩୭୩ଟି ଗ୍ରାମ ପଞ୍ଚାୟତ, ୨ଟି ମ୍ୟୁନିସ୍ ପାଲ୍‌ଟି ଏବଂ ୨ଟି ଏନ୍‌ଏସି। ଏହି କାର୍ଯ୍ୟର ପଛରେ ପୂଜ୍ୟ ମାମୁଁଙ୍କର ଉଦ୍ୟମ ଜାରି ରହିଥାଏ। ନୂତନ ପାଠଚକ୍ରମାନଙ୍କ ପାଇଁ ମା'ଙ୍କର ଓ ପ୍ରଭୁଙ୍କର ଫଟୋ, ମା'ଙ୍କର ପ୍ରଭୁଙ୍କର ବାଣୀ, ବ୍ଲେସିଙ୍ଗସ୍ ପ୍ୟାକେଟ୍ ଏବଂ ପାଠଚକ୍ର ଗଠନର ଫର୍ମ ଆତ୍ମମାନଙ୍କୁ ଯୋଗାଇ ଦେଇଥାନ୍ତି।

୨୦୨୨ ମସିହାରେ କଟକ ଜିଲ୍ଲାର ସବୁ ପଞ୍ଚାୟତମାନଙ୍କରେ ନୂତନ ପାଠଚକ୍ର ଗଢ଼ିଉଠିଲା। ୧୪ଟି ବ୍ଲକର ସଙ୍ଗଠକ ଅପାଭାଇମାନଙ୍କର ସହଯୋଗ ଭୁଲିହେବ ନାହିଁ, ପୂଜ୍ୟମାମୁଁ ବହୁତ ଖୁସି ହୋଇଗଲେ।

ମା' ଆଖି ଆଗରେ ଏକ ନୂତନ ମାର୍ଗ ଦେଖାଇ ଦେଲେ "SUMAN VOLUNTEER"କାର୍ଯ୍ୟ। ପୂର୍ବତନ ସ୍ୱାସ୍ଥ୍ୟ ସଚୀବ ଶାଳିନୀ ପଣ୍ଡିତ, IAS dt 23.4.24ରେ Sri Prasad Tripathy, Secretary NLET, Odisha ଙ୍କୁ ଏକ Letter issue କରିଥିଲେ। ସେଥିରେ ବିଭିନ୍ନ ସ୍ୱାସ୍ଥ୍ୟ କାର୍ଯ୍ୟକ୍ରମ ଏବଂ Schemes ସହିତ SUMAN VOLUNTEER Training Programର ସୁବିଧା ଦର୍ଶାଇଥିଲେ। ସରକାରଙ୍କ ତରଫରୁ ଆତ୍ମମାନଙ୍କ ପାଇଁ ତାଙ୍କର ଅବଦାନ ପାଇଁ ଆମ୍ଭେମାନେ କୃତଜ୍ଞତା ଜଣାଉଛୁ। CDMO Office ରେ ସରୋଜ ପାଣିଗ୍ରାହୀ ସାର୍ (RMNCHA consultant) ତାଙ୍କର ପ୍ରଚେଷ୍ଟା ଜାରିରଖି ୧୭.୧୨.୨୦୨୪ରେ କଟକ ଜିଲ୍ଲାର ୧୪ଟି ବ୍ଲକ୍ ପାଇଁ Office order ବାହାର କରିନେଲେ। ଏଥି ନିମନ୍ତେ ମା'ଙ୍କ ପାଖରେ ଆମେ କୃତଜ୍ଞତା ଜଣାଉଛୁ। ପରବର୍ତ୍ତୀ ସମୟରେ CDMO officeରୁ ୧୪ଟି ବ୍ଲକ୍‌ର ୧୪ଟି (ଗୋଷ୍ଠୀ ସ୍ୱାସ୍ଥ୍ୟ କେନ୍ଦ୍ର)ମାନଙ୍କର ବ୍ଲକ୍ ପ୍ରୋଗ୍ରାମ ମ୍ୟାନେଜରମାନଙ୍କର ନାମ ଏବଂ ଫୋନ ନଂ. ତାଲିକା ସଂଗ୍ରହ କରିନେଲୁ। କଟକ ଜିଲ୍ଲାରେ ସମୁଦାୟ ସବ୍ ସେଣ୍ଟର ୩୩୨ଟି ଥିବାର ତାଲିକା ମଧ୍ୟ ସଂଗ୍ରହ କରି ନେଇଥିଲୁ। ପ୍ରତ୍ୟେକ ବ୍ଲକରେ ଆମେ କେତେଜଣ ପାଠଚକ୍ର ଅପା ଭାଇମାନଙ୍କୁ ଦେଇ ପାରିବା ତାହାର ତାଲିକା ମଧ୍ୟ ପ୍ରସ୍ତୁତ କରି ନେଉଥିଲୁ।

ଟ୍ରେନିଂ କାର୍ଯ୍ୟଟିକୁ ପ୍ରତ୍ୟେକ ବ୍ଲକରେ ଆରମ୍ଭ କରିବା ପୂର୍ବରୁ ଆମକୁ ପ୍ରଥମେ ବ୍ଲକର ପ୍ରୋଗ୍ରାମ ମ୍ୟାନେଜରଙ୍କୁ ସାକ୍ଷାତ

କରିଥିଲୁ। ଟ୍ରେନିଂ ତାରିଖଟି ନିର୍ଦ୍ଧାରିତ କରିବା ପାଇଁ ସଙ୍ଗରେ CDMOଙ୍କ Order ଏବଂ Health Secretary ଙ୍କ Letter ଟିକୁ ଦେଖାଇଥାଉ। ଏହା ସହିତ କେଉଁମାନେ ଟ୍ରେନିଂ ନେବେ ତାହାର ତାଲିକା ମଧ୍ୟ ନେଇଥାଉ। ଉପରୋକ୍ତ ଦୁଇଟି ଚିଠିକୁ ଦେଖି CHCର ସୁପରିଟେଣ୍ଡେଣ୍ଟ ଆମ ଜିଲ୍ଲାର ଜିଲ୍ଲା ସଙ୍ଗଠକଙ୍କ ନାମରେ ଗୋଟିଏ ଚିଠି ଟ୍ରେନିଂ ତାରିଖ ନିର୍ଦ୍ଧାରିତ କରି issue କରି ଦେଇଥା'ନ୍ତି ତଥା CDMOଙ୍କୁ ମଧ୍ୟ copy forward କରିଦେଇଥା'ନ୍ତି।

ପାଠଚକ୍ରର କେଉଁ ଅପାଭାଇମାନେ SUMAM Volunteer Training ନେବେ ତାହାର listଟି ଏକ ନିର୍ଦ୍ଧାରିତ ଫର୍ମରେ ଆମ୍ଭେମାନେ ପୂରଣ କରିଦେଇଥାଉ ଯେଉଁ ଫର୍ମଟି ସରୋଜ ପାଣିଗ୍ରାହୀ ସାର୍ ଆମ୍ଭମାନଙ୍କୁ ପ୍ରଦାନ କରିଥିଲେ। CHCରୁ Letter ପାଇ ସାରିବା ପରେ ନିର୍ଦ୍ଧାରିତ ତାରିଖ ତଥା କେଉଁ ସମୟରେ ପାଠଚକ୍ର ସଙ୍ଗଠକ ଅପାଭାଇମାନେ CHCରେ ପହଞ୍ଚିବେ ତାହା ସେମାନଙ୍କୁ ସୁମନ ସ୍ୱେଚ୍ଛାସେବୀ ଟ୍ରେନିଂ ଦିଆସାରିଥାଏ

ସର୍ବମୋଟ ୧୨ଟି CHCରୁ ସ୍ୱେଚ୍ଛାସେବୀମାନଙ୍କର ଟ୍ରେନିଂ ସାର୍ଟିଫିକେଟ ଆମ୍ଭମାନଙ୍କ ପାଖକୁ ଆସି ସାରିଛି। କିଛି ଅଂଶରେ ଅପାଭାଇମାନଙ୍କୁ ସାର୍ଟିଫିକେଟ ଦିଆସରିଛି। ଅନ୍ୟମାନଙ୍କୁ ଦେବାପାଇଁ ପ୍ରଚେଷ୍ଟା ଜାରି ରହିଛି।

ପ୍ରତ୍ୟେକ CHCରେ ଯୋଗାଯୋଗ ରଖି Level କାମ ଆରମ୍ଭ ହେବାପାଇଁ ପ୍ରସ୍ତୁତି ଜାରି ରହିଛି।

ଏଥିପାଇଁ ଓଡ଼ିଶାର ପ୍ରତ୍ୟେକ ଜିଲ୍ଲାରେ ଏହି କାର୍ଯ୍ୟର ଏକ ପୂର୍ଣ୍ଣରୂପ ପ୍ରକାଶ ପାଇବାପାଇଁ ସମଗ୍ର ଓଡ଼ିଶାର ମାତୃପ୍ରେମୀ ଭାଇଭଉଣୀମାନଙ୍କ ତରଫରୁ ମା'ଙ୍କ ପାଦପଦ୍ମରେ ପ୍ରାର୍ଥନା ଓ କୃତଜ୍ଞତା ଜଣାଉଛି। ମା'ଙ୍କର ବିଶ୍ୱରେ ଜୟହେଉ।

❖

Sweet Mother, what are the "supreme faculties"?

It is difficult to reply without seeing the context. Which "supreme faculties" does it refer to? Those of man on the way to becoming superman, or those which the supramental being will possess when he appears on earth?

In the first case, they are faculties that develop in man as he opens to the higher mind and overmind and through them receives the light of Truth. These faculties are not a direct expression of the supreme Truth but a transcription, an indirect reflection of it. They include intuition, foreknowledge, knowledge by identity, and certain powers such as those of healing and of acting upon circumstances to a certain extent.

If it refers to the supreme faculties of the supramental being, we cannot say much about them, for all we can say at the moment belongs more to the realm of imagination than to the realm of knowledge, since this being has not yet manifested on earth.

23 April 1960 ***- The Mother***

ରୋଗ ବିକାର୍ ଗୁଡ଼ିକର୍ ଉତ୍ପତ୍ତି ଏବଂ ଅସୁସ୍ଥତା

ଡାକ୍ତର ପ୍ରଶାନ୍ତ କୁମାର ନନ୍ଦ

ରୋଗ ବିକାର ଓ ଶାରୀରିକ ଅବ୍ୟବସ୍ଥାର ମୂଳକାରଣ ବା ଉତ୍ପତ୍ତି ଏବଂ ଅସୁସ୍ଥତା ସକଳ ବିଷୟରେ ମା' କହୁଛନ୍ତି, ଯଦି ସମଗ୍ରସତ୍ତା ବିଶ୍ୱର ଆନ୍ତର ଅଗ୍ରଗତି ସହ ସମଛନ୍ଦ ରଖି ଏହାର ପ୍ରଗତିଶୀଳ ରୂପାନ୍ତର କ୍ଷେତ୍ରରେ ଯୁଗପତ ଅଗ୍ରଗତି କରିପାରନ୍ତା, ତାହେଲେ କୌଣସି ଅସୁସ୍ଥତା ବା ମୃତ୍ୟୁ ରହନ୍ତା ନାହିଁ।

ଅବ୍ୟବସ୍ଥା ବା ବିକାରଗୁଡ଼ିକର ଉତ୍ପତ୍ତି

ଶ୍ରୀଅରବିନ୍ଦ କୁହନ୍ତି, ବଞ୍ଚିବାର ସମସ୍ତ ସମସ୍ୟା ବାସ୍ତରେ ସଙ୍ଗତିର ସମସ୍ୟା ମଧ୍ୟରେ ରହିଛି। ଏ ସଂସାରରେ ପ୍ରତ୍ୟେକଟି ଘଟଣା ଏକ ସମତା ବା ଅସମତା ଉପରେ ନିର୍ଭର କରେ। ଅସମଞ୍ଜସତା ହିଁ ପରିବେଶର ଅସମତା, ଯଥା ରୋଗ, ଆକସ୍ମିକ ଦୁର୍ଘଟଣା ଆଦି ସୃଷ୍ଟି କରିଥାଏ। ଏହା ହୋଇପାରେ ସମଷ୍ଟିଗତ ସ୍ତରରେ। ଭଗବାନଙ୍କ ଇଚ୍ଛା ପାଖରେ ନିଜ ମଧ୍ୟରେ ସମତା, ଶାନ୍ତି ଓ ସମଞ୍ଜସତା ଭାବକୁ ଐକାନ୍ତିକ ସମର୍ପଣ ମାଧ୍ୟମରେ ବିକଶିତ କଲେ ଏହା ସାଧିତ ହୁଏ।

ଆମର ଉଚ୍ଚତମ ଅଂଶରୁ ସମଞ୍ଜସତା ଆସିନଥାଏ, ଶକ୍ତି, ପ୍ରେମ ଇତ୍ୟାଦି ରୂପରେ, କିନ୍ତୁ ଦୈହିକ ସ୍ତରରେ ଏହା ଶାରୀରିକ ସୌନ୍ଦର୍ଯ୍ୟ ପରିପ୍ରକାଶମୟ ଆଧାତ୍ମିକ ସୌନ୍ଦର୍ଯ୍ୟ ପାଇଁ ବାଟ ଫିଟାଏ।

ଏହି ଅସମଞ୍ଜସତା ସକଳର ଉତ୍ପତ୍ତି ଓ ସେସବୁର ଉତ୍ପନ୍ନ ଅସାସ୍ଥ୍ୟକର ଜୀବନ ଓ ପରିବେଶ ପାଇଁ ଆମକୁ ସତ୍ୟ ଆଡ଼କୁ ସର୍ବଦା ବଢ଼ିଚାଲିବା, କଦାପି ସ୍ଥିତାବସ୍ଥାରେ ନରହିବାର ଆବଶ୍ୟକତା ରହିଛି। ସାମଗ୍ରିକ ପୂର୍ଣ୍ଣତାର ଏହାହିଁ ହେଉଛି ଆବଶ୍ୟକତା।

ସର୍ବପ୍ରଥମେ ରୋଗବ୍ୟାଧି ସକଳ ବାସ୍ତବରେ ଅସମଞ୍ଜସତା ହେତୁ ହୋଇଥାଏ ବୋଲି ଆମେ ଜାଣିଲେ। ପ୍ରାଚୀନ ଭାରତୀ ଚିକିତ୍ସା ବିଜ୍ଞାନର ଋଷି ଶୁଶ୍ରୁତ କୁହନ୍ତି ଆମ ଦେହରେ ଥିବା ଦୋଷ (ବାତ, ପିତ୍ତ, କଫ) ଧାତୁ (ରସ, ରକ୍ତ, ମାଂସ, ମେଦ, ଅସ୍ଥି, ମଜ୍ଜା ଓ ଶୁକ୍ର, ଏଥି ସହିତ ଓଜ ଏବଂ ସ୍ତ୍ରୀଲୋକମାନଙ୍କର ଅରତବ, ତମୋ ଆଦି ମାନସିକ ଦୋଷ, ସମସ୍ତ ଅଗ୍ନି, ଚୟାପଚୟ କ୍ରିୟା ଠିକ ଭାବରେ ହେଉଥିଲେ ଆତ୍ମା, ଇନ୍ଦ୍ରିୟ, ମନ ସ୍ୱିକାର୍ଯ୍ୟରେ ଯଥାରୀତି ସମ୍ପନ୍ନ ହେଉଥିଲେ ଆମେ ସୁସ୍ଥ ଅଟ। W.H.Oର ପରିଭାଷାରେ ସ୍ୱାସ୍ଥ୍ୟ ହେଉଛି ସମ୍ପୂର୍ଣ୍ଣ ଏକ ଦୈହିକ, ମାନସିକ, ସାମାଜିକ ଓ ଆଧାତ୍ମିକ ସୁସ୍ଥତାରେ ରହି କୌଣସି ରୋଗ ନଥିବା ଅବସ୍ଥାକୁ ସ୍ୱାସ୍ଥ୍ୟ କୁହାଯାଏ। ଏଣୁ ସୁସ୍ଥ ଜୀବନ ପାଇଁ ମାନବ ସମାଜ ସ୍ୱାସ୍ଥ୍ୟ ନିୟମ ପାଳନ କରିବା ଉଚିତ।

Disorders: ସମସ୍ତ ବ୍ୟବହାରିକ ବିକାର ବା ଅବ୍ୟବସ୍ଥା କିମ୍ବା ଓଲଟ ପାଲଟ ଅବସ୍ଥାକୁ disorder କୁହାଯାଏ। କୁହାଯାଏ ଯେ ଜଣେ ସୁସ୍ଥ ଲୋକ ହେଉଛି ସେ, ଯେ ଜାଣେ ନାହିଁ ସେ ଅସୁସ୍ଥ। ଆମ ଶରୀରରେ କୌଣସି ସ୍ଥାନରେ ଗୋଟିଏ ଗୋଟିଏ ଛୋଟ ଭୁଲ ହୁଏ। ଯଦି ଆମେ ଅନେକ ସମୟ ଯାଏଁ ଏହା ଉପରେ ଦୃଷ୍ଟିପାତ ନକରିଥାଉ କିମ୍ବା କାହାରିକୁ କହିନଥାଉ ଏବଂ ପ୍ରଭୁଙ୍କ ଉପରେ ଛାଡ଼ି ଦେଇଥାଉ, ଏହା ଠିକ ହୋଇଯାଏ। କୌଣସି ସ୍ଥାନରେ ଏହା ଏକ ବିଶୃଙ୍ଖଳା ହୋଇଥାଏ।

ଏହି ବିଶୃଙ୍ଖଳାଗୁଡ଼ିକୁ ୭ଭାଗରେ ବିଭକ୍ତ କରାଯାଇଛି। ସେଗୁଡ଼ିକ-

୧. Anxiety: ଏହା ଉଦ୍‌ବେଗ, ଚିନ୍ତା, ଅସ୍ଥିରତା, ଅତ୍ୟଧିକ ବ୍ୟସ୍ତତା ଆଦି ମାନସିକ ଓ ଶାରୀରିକ ରୋଗ। ଭୟ ଆଶଙ୍କା ଜନିତ ବ୍ୟସ୍ତତା ହେତୁ ଉଦ୍‌ବେଗ ପ୍ରକାଶ କରିବା, ସଦା ଦୁଃଖିତ ରହିବା।

୨. Mood disorders or effective disorders: ଏହା ସାଧାରଣ ଅବ୍ୟସ୍ଥତା ଠାରୁ ଉର୍ଦ୍ଧ୍ୱରେ ଏବଂ ସମୟ ସମୟରେ ସ୍ଥାୟୀ ଦୁଖିତ ଅବସ୍ଥାରେ, ବହୁ ସମୟରେ ମାନସିକ ଅବସାଦ ଯୋଗୁ ହୋଇଥାଏ।

୩. Psychic disorders: Perception of Reality, Frequency, rest of contact with real worth.

୪. Trauma related disorders: ଏହା ମାନସିକ ସ୍ୱାସ୍ଥ୍ୟର ଅବସ୍ଥା। ବ୍ୟସ୍ତ ବହୁଳ ଜୀବନ ଉପରେ ଆଘାତ ପ୍ରାପ୍ତ ଘଟଣା ସମ୍ବନ୍ଧୀୟ ଆଘାତ ଜନିତ ବିକାର- ଭଲ ଭାବେ ମନେ ନ ରଖିବା, ଅସ୍ୱାଭାବିକ ମନେ ନ ରଖିବା ଓ ଉଚ୍ଚିତ ଘଟଣାଗୁଡ଼ିକୁ ମନେରଖିବାକୁ Avoid କରିବା।

୫. Obessive compulsive and related disorders: ଏଥିରେ ଅନାବଶ୍ୟକ ଚିନ୍ତା ସବୁ ବାରମ୍ବାର ଆସିବ ଯେପରିକି ତୁମେ ତୁମକୁ ତୁମ ଜଣାଶୁଣା କେହି ବ୍ୟକ୍ତିକୁ ସେମାନେ ଯଦି ଏହି ଅବସ୍ଥାରେ ପଡ଼ି ଚିକିତ୍ସିତ ହେଉଥାନ୍ତି ତା ପାଇଁ ସାମାଜିକ ସହଯୋଗ ବା ତତ୍ୟଭିତ୍ତିକ ଖବର ରଖିବା ଇତ୍ୟାଦି।

ଆମକୁ ଯେତେବେଳେ ଶାରୀରିକ ବିଶୃଙ୍ଖଳା ଆକ୍ରମଣ କରେ ସେତେବେଳେ ଆମେ ଭୀତତ୍ରସ୍ତ ହେବା ନାହିଁ। ଏଥିରୁ ନିବୃତ୍ତ ରହି ସାହସ, ସ୍ଥିରତା, ବିଶ୍ୱାସ ସହିତ ଏହାର ସମ୍ମୁଖୀନ ହେବା ଓ ନିଶ୍ଚିତ ହେବା ଯେ ରୋଗ ହେଉଛି ଏକ ମିଥ୍ୟା। ସମ୍ପୂର୍ଣ୍ଣ ବିଶ୍ୱାସ ରଖି ପୂର୍ଣ୍ଣ ସ୍ଥିରତା ସହିତ ଯଦି ଭଗବତ କରୁଣା ଉପରେ ନିର୍ଭର ରଖିବା, ତେବେ ଏହି ଦିବ୍ୟ କରୁଣା ଆମ ସତ୍ତାର ଗଭୀରତାରେ ଯେପରି ପ୍ରତିଷ୍ଠିତ ହୋଇଛି, ସେହିପରି କୋଷଗୁଡ଼ିକ ମଧ୍ୟରେ ପ୍ରତିଷ୍ଠିତ ହେବ ଓ ସେମାନେ ନିଜେ ଚିରନ୍ତନ ସତ୍ୟ ଓ ଭଗବତ ଆନନ୍ଦରେ ଅଂଶଗ୍ରହଣ କରିବେ।

ଭାଗବତ ସୂର୍ଯ୍ୟ, ଏହି ଦିବ୍ୟ ହାସ୍ୟର ସୂର୍ଯ୍ୟ, ଯାହା ସକଳ ବସ୍ତୁର କେନ୍ଦ୍ରରେ ହିଁ ବିଦ୍ୟମାନ, ତାହାହିଁ ସକଳ ବସ୍ତୁର ସତ୍ୟ। ଏହାକୁ ଦେଖିବା ଲାଗି, ଅନୁଭବ କରିବା ଲାଗି ଏବଂ ଏହାକୁ ନେଇ ବଞ୍ଚିବା ପାଇଁ ଆମକୁ ଶିକ୍ଷା କରିବାକୁ ପଡ଼ିବ ଯଦ୍ୱାରା ରୋଗ ବିକାରଗୁଡ଼ିକର ଉତ୍ପତ୍ତି ଓ ସମସ୍ତ ଅସୁସ୍ଥତାର ସମ୍ମୁଖୀନ ହେଉଥିବା ବେଳେ ସେ ମଧ୍ୟରୁ ବାହାରି ଆସି ଆମେ ଶାନ୍ତିରେ ଏ ସଂସାରରେ ଜୀବନ ବଞ୍ଚିପରିବା।

❖

Man is a transitional being upon earth and hence, in the course of his evolution, he has had several successive natures which have followed an ascending curve and will continue to do so till he reaches the threshold of the supramental nature and is transformed into superman. This curve is the spiral of mental development. We tend to call "natural" any spontaneous manifestation which is not the result of a choice or a premeditated decision, that is to say, which is without the intrusion of mental action.

That is why, when a man has a vital spontaneity which is not very mentalised, he seems to us more "natural" in his simplicity.

But it is a naturalness which is much like that of the animal and is at the very bottom of the human evolutionary scale.

- The Mother

ବିଦ୍ୟାଳୟ ଛାତ୍ରଛାତ୍ରୀଙ୍କଠାରେ ଦେଖାଯାଉଥିବା ସାଧାରଣ ଆଖି ରୋଗ, ଏହାର କାରଣ ଓ ପ୍ରତିକାର

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ଶିଶୁର ସାମଗ୍ରିକ ବିକାଶ, ଶିକ୍ଷାଗ୍ରହଣ ଏବଂ ଦୈନନ୍ଦିନ କାର୍ଯ୍ୟକଳାପରେ ଚକ୍ଷୁ ବା ଆଖିର ଭୂମିକା ଅତ୍ୟନ୍ତ ଗୁରୁତ୍ୱପୂର୍ଣ୍ଣ। ବିଦ୍ୟାଳୟରେ ପଢୁଥିବା ଛାତ୍ରଛାତ୍ରୀଙ୍କ କ୍ଷେତ୍ରରେ ପ୍ରାୟ ୮୦ ପ୍ରତିଶତ ଶିକ୍ଷାଗ୍ରହଣ ଦୃଷ୍ଟିଶକ୍ତି ମାଧ୍ୟମରେ ହୋଇଥାଏ। ତେବେ ବର୍ତ୍ତମାନ ସମୟରେ ବଦଳୁଥିବା ଜୀବନଶୈଳୀ, ପୋଷଣର ଅଭାବ, ସ୍କ୍ରିନ୍‌ର ଅତ୍ୟଧିକ ବ୍ୟବହାର ଏବଂ ସଂକ୍ରମଣ କାରଣରୁ କୋମଳମତି ଶିଶୁଙ୍କଠାରେ ବିଭିନ୍ନ ପ୍ରକାରର ଆଖି ରୋଗ ଦେଖାଯାଉଛି। ଠିକ୍ ସମୟରେ ଏଗୁଡ଼ିକର ଚିହ୍ନଟ ଓ ଚିକିତ୍ସା ନ ହେଲେ ଏହା ଶିଶୁର ପାଠପଢ଼ା, ମାନସିକ ବିକାଶ ଏବଂ ଭବିଷ୍ୟତ ଦୃଷ୍ଟିଶକ୍ତି ଉପରେ ଗମ୍ଭୀର ପ୍ରଭାବ ପକାଇଥାଏ।

୧. ବିଦ୍ୟାଳୟ ଛାତ୍ରଛାତ୍ରୀଙ୍କଠାରେ ଦେଖାଯାଉଥିବା ମୁଖ୍ୟ ଆଖି ରୋଗ ଓ କାରଣ

ରୋଗର ନାମ	ପ୍ରମୁଖ ଲକ୍ଷଣ	ମୁଖ୍ୟ କାରଣ
ଦୃଷ୍ଟିଦୋଷ (Refractive Errors)	ଦୂର କିମ୍ବା ପାଖ ଜିନିଷ ଅସ୍ପଷ୍ଟ ଦେଖାଯିବା, ମୁଣ୍ଡବିନ୍ଧା	ବଂଶଗତ, ଆଖି ଡୋଳାର ଆକୃତିଗତ ପରିବର୍ତ୍ତନ, ଦୀର୍ଘ ସମୟ ସ୍କ୍ରିନ୍ ଦେଖିବା
ଆଖି ଧରିବା (Conjunctivitis)	ଆଖି ଲାଲ୍ ପଡ଼ିବା, ପାଣି ବୋହିବା, ଲେଞ୍ଜେରା ଜମିବା	ଜୀବାଣୁ (Bacteria), ଭୂତାଣୁ (Virus), ଅସ୍ୱଚ୍ଛତା
ଅଳସୁଆ ଆଖି (Amblyopia)	ଗୋଟିଏ ଆଖିରେ ଦୃଷ୍ଟିଶକ୍ତି କମିଯିବା	ଅସ୍ପଷ୍ଟ ଦୃଷ୍ଟିଦୋଷର ଚିକିତ୍ସା ନ ହେବା, ଟେରା ଆଖି
ଟେରା ଆଖି (Strabismus)	ଦୁଇଟି ଆଖିର ସମାନ୍ତରତା ଅଭାବ	ଆଖି ମାଂସପେଶୀର ଦୁର୍ବଳତା, ବଂଶଗତ କାରଣ
ଭିଟାମିନ୍ "ଏ' ଅଭାବ (Bitot's Spots)	ସଞ୍ଜ ନଇଁଲେ ନ ଦେଖାଯିବା (ଅନ୍ଧାରକଣା), ଆଖି ଶୁଖିଯିବା	କୁପୋଷଣ, ସୁଷମ ଖାଦ୍ୟର ଅଭାବ
ଆଲର୍ଜିଜନିତ ଆଖି ରୋଗ (VKC)	ଆଖି କୁଣ୍ଡାଇ ହେବା, ଲାଲ୍ ପଡ଼ିବା, ଖରାରେ କଷ୍ଟ ହେବା	ଧୂଳି, ଧୂଆଁ, ଋତୁପରିବର୍ତ୍ତନ

(କ) ଦୃଷ୍ଟିଦୋଷ (Refractive Errors)

ବିଦ୍ୟାଳୟ ଯାଉଥିବା ପିଲାଙ୍କଠାରେ ଦୃଷ୍ଟିଦୋଷ ସବୁଠାରୁ ସାଧାରଣ ସମସ୍ୟା। ଏହା ମୁଖ୍ୟତଃ ତିନି ପ୍ରକାରର ହୋଇଥାଏ:

୧. ମାଇଓପିଆ (Myopia / Near-sightedness): ଏଥିରେ ପିଲାମାନେ ପାଖ ଜିନିଷ ସ୍ପଷ୍ଟ ଦେଖିପାରନ୍ତି, କିନ୍ତୁ କଳାପଟା (Blackboard) କିମ୍ବା ଦୂର ଜିନିଷ ଦେଖିବାରେ ଅସୁବିଧା ହୁଏ।

୨. ହାଇପରମେଟ୍ରୋପିଆ (Hyperopia / Far-sightedness): ଏଥିରେ ଦୂର ଜିନିଷ ସ୍ପଷ୍ଟ ଦେଖାଯାଏ, କିନ୍ତୁ ପାଖ ପଢ଼ିବା ସମୟରେ ଆଖି ଉପରେ ଚାପ ପଡ଼େ।

୩. ଆଷ୍ଟିଗ୍ମାଟିଜମ୍ (Astigmatism): ଚକ୍ଷୁ ଲେନ୍ସ କିମ୍ବା କୋର୍ନିଆର ଅସମାନ ଆକୃତି ଯୋଗୁଁ ଦୂର ଓ ପାଖ ଉଭୟ ଦୃଷ୍ଟି ଅସ୍ପଷ୍ଟ ହୋଇଥାଏ।

- **କାରଣ:** ବଂଶଗତ କାରଣ, ଆଖି ଡୋଳା (Eyeball) ର ଦୈର୍ଘ୍ୟ ବୃଦ୍ଧି ପାଇବା, କମ୍ ଆଲୋକରେ ପଢ଼ାପଢ଼ି କରିବା, ଏବଂ ବାହାରେ ଖେଳକୁଦ ନ କରି ଦୀର୍ଘ ସମୟ ମୋବାଇଲ୍ ବା ଟିଭି ଦେଖିବା।

(ଖ) ଆଖି ଧରିବା (Conjunctivitis / Pink Eye)

ଏହା ପିଲାଙ୍କ ମଧ୍ୟରେ ଅତି ଦ୍ରୁତ ଗତିରେ ବ୍ୟାପୁଥିବା ଏକ ସଂକ୍ରାମକ ରୋଗ।

- କାରଣ: ବ୍ୟାକ୍ଟେରିଆ, ଭୂତାଣୁ (Adenovirus) କିମ୍ବା ଆଲର୍ଜି। ଦୂଷିତ ହାତରେ ଆଖି ଛୁଇଁବା, ସଂକ୍ରମିତ ପିଲାର ରୁମାଲ, ଖାତା କିମ୍ବା ପୋଷାକ ବ୍ୟବହାର କରିବା ଦ୍ୱାରା ଏହା ବ୍ୟାପିଥାଏ।

(ଗ) ଅଳସୁଆ ଆଖି (Amblyopia / Lazy Eye)

ଶିଶୁର ମସ୍ତିଷ୍କ ଓ ଆଖି ମଧ୍ୟରେ ସଠିକ୍ ସମନ୍ୱୟ ନ ହେଲେ ମସ୍ତିଷ୍କ ଦୁର୍ବଳ ଆଖିର ଦୃଷ୍ଟି ସଙ୍କେତକୁ ଗ୍ରହଣ କରିବା ବନ୍ଦ କରିଦିଏ।

- କାରଣ: ଛୋଟବେଳୁ ଦୃଷ୍ଟିଦୋଷର ଚିକିତ୍ସା ନ ହେବା, ଟେରା ଆଖି ରହିବା କିମ୍ବା ଜନ୍ମଗତ ଆଖିର ପୋଟଳି (Congenital Cataract) ରହିବା।

(ଘ) ଟେରା ଆଖି (Strabismus / Squint)

ଏଥିରେ ପିଲାର ଦୁଇଟି ଆଖି ଏକ ସମୟରେ ଗୋଟିଏ ଦିଗକୁ ଦେଖିପାରନ୍ତି ନାହିଁ। ଗୋଟିଏ ଆଖି ସିଧା ରହିଥିବା ବେଳେ ଅନ୍ୟଟି ଭିତର, ବାହାର, ଉପର କିମ୍ବା ତଳ ଦିଗକୁ ଢଳିଥାଏ।

- କାରଣ: ଆଖି ନିୟନ୍ତ୍ରଣ କରୁଥିବା ସ୍ନାୟୁ ଓ ମାଂସପେଶୀର ଅସମତୁଲତା, ବଂଶଗତ କାରଣ କିମ୍ବା ଅତ୍ୟଧିକ ଚଷମା ନମ୍ବର ରହିବା।

(ଙ) ଭିଟାମିନ୍ "ଏ" ଅଭାବଜନିତ ସମସ୍ୟା (Xerophthalmia)

ଶରୀରରେ ଭିଟାମିନ୍ "ଏ' ର ଅଭାବ ହେଲେ ପ୍ରଥମେ ରାତିରେ କମ୍ ଦେଖାଯିବା (ଅନ୍ଧାରକଣା / Night Blindness) ଏବଂ ପରବର୍ତ୍ତୀ ସମୟରେ ଆଖିର ଧଳା ଭାଗରେ ତ୍ରିଭୁଜାକାର ଶୁଷ୍କ ଦାଗ (Bitot's Spots) ଦେଖାଯାଏ।

- **କାରଣ:** ସୁଷମ ଖାଦ୍ୟର ଅଭାବ, ସବୁଜ ପରିବା, କ୍ଷୀର, କଦଳୀ ଓ କଲିଜା ଜାତୀୟ ପୋଷକ ଖାଦ୍ୟ ନ ଖାଇବା।

(ଚ) ଡିଜିଟାଲ୍ ଆଇ ଷ୍ଟ୍ରେନ୍ (Digital Eye Strain)

ଅନ୍‌ଲାଇନ୍ ପାଠପଢ଼ା ଏବଂ ମୋବାଇଲ୍ ଗେମ୍ ଯୋଗୁଁ ଆଜିକାଲି ଛାତ୍ରଛାତ୍ରୀଙ୍କଠାରେ ଆଖି ଶୁଖିଯିବା, ପୋଡ଼ାଜଳା କରିବା, ଆଖି ନାଲି ହେବା ଓ ମୁଣ୍ଡବିନ୍ଧା ଭଳି ଲକ୍ଷଣ ଦେଖାଯାଉଛି।

- କାରଣ: ଦୀର୍ଘ ସମୟ ପର୍ଯ୍ୟନ୍ତ ନିରବଚ୍ଛିନ୍ନ ଭାବେ ଡିଜିଟାଲ୍ ସ୍କ୍ରିନ୍ ଦେଖିବା ଏବଂ ଆଖିର ପାପୁଡ଼ି (Blinking) କମ୍ ପକାଇବା।

୨. ଶିଶୁର ବିକାଶ ଓ ପାଠପଢ଼ାରେ ଆଖି ସମସ୍ୟାର ପ୍ରଭାବ

ଆଖି ସମସ୍ୟା ଯୋଗୁଁ ବିଦ୍ୟାଳୟରେ ଛାତ୍ରଛାତ୍ରୀମାନେ ନିମ୍ନଲିଖିତ ଅସୁବିଧାର ସମ୍ମୁଖୀନ ହୁଅନ୍ତି:

- **ପାଠପଢ଼ାରେ ଅବନତି:** କଳାପଟା ଅକ୍ଷର ସ୍ପଷ୍ଟ ନ ଦେଖାଯିବା ଯୋଗୁଁ ପିଲାମାନେ ଲେଖିବାରେ ପଛେଇ ଯାଆନ୍ତି।
- **ମାନସିକ ଚାପ:** ପାଠ ନ ବୁଝିପାରିବା ଓ ବାରମ୍ବାର ମୁଣ୍ଡବିନ୍ଧା ହେବା ଯୋଗୁଁ ପିଲାଙ୍କ ମନରେ ଚିଡ଼ଚିଡ଼ାପଣ ଓ ଅବସାଦ ସୃଷ୍ଟି ହୁଏ।
- **ଖେଳକୁଦରେ ଅସମର୍ଥତା:** ଦୃଷ୍ଟିସଂକ୍ରାନ୍ତୀୟ ସମସ୍ୟା ଯୋଗୁଁ ପିଲାମାନେ ବାହାରେ ଖେଳିବାକୁ ଆଗ୍ରହ ପ୍ରକାଶ କରନ୍ତି ନାହିଁ, ଯାହା ସେମାନଙ୍କ ଶାରୀରିକ ବିକାଶକୁ ବାଧାପ୍ରାପ୍ତ କରେ।

୩. ପ୍ରତିଷେଧକ ବ୍ୟବସ୍ଥା ଓ ଚିକିତ୍ସା

ବିଦ୍ୟାଳୟ ଛାତ୍ରଛାତ୍ରୀଙ୍କ ଆଖି ସୁରକ୍ଷିତ ରଖିବା ପାଇଁ ଅଭିଭାବକ, ଶିକ୍ଷକ ଏବଂ ସ୍ୱାସ୍ଥ୍ୟକର୍ମୀଙ୍କ ଯୌଥ ପ୍ରଚେଷ୍ଟା ଆବଶ୍ୟକ।

(ଆଖି ସୁରକ୍ଷାର ମୁଖ୍ୟ ସୋପାନ)

୧. ବାର୍ଷିକ ଆଖି ପରୀକ୍ଷା (ସ୍କୁଲ ଆଖି ପରୀକ୍ଷା ଶିବିର)

୨. ପୋଷଣଯୁକ୍ତ ଆହାର (ଭିଟାମିନ୍ "ଏ", ଶାକସବଜୀ)

୩. ଡିଜିଟାଲ୍ ନିୟନ୍ତ୍ରଣ (୨୦-୨୦-୨୦ ନିୟମ ପାଳନ)

୧. ନିୟମିତ ଚକ୍ଷୁ ପରୀକ୍ଷା: ପ୍ରତ୍ୟେକ ଶିଶୁର ବର୍ଷକୁ ଅନ୍ତତଃ ଥରେ ନିୟମିତ ଆଖି ପରୀକ୍ଷା କରାଯିବା ଉଚିତ୍।

୨. ସୁଷମ ଆହାର: ଖାଦ୍ୟରେ ଗାଜର, ପାଳଙ୍ଗ ଶାଗ, ପପେୟା, କ୍ଷୀର, ଅଣ୍ଡା, ଏବଂ କଳା ଶାଗ ଅନ୍ତର୍ଭୁକ୍ତ କରିବା ଆବଶ୍ୟକ।

୩. ୨୦-୨୦-୨୦ ନିୟମ: ଡିଜିଟାଲ୍ ସ୍କ୍ରିନ୍ ବ୍ୟବହାର ସମୟରେ ପ୍ରତି ୨୦ ମିନିଟ୍‌ରେ ୨୦ ସେକେଣ୍ଡ ପାଇଁ ୨୦ ଫୁଟ୍ ଦୂରତାକୁ ଦେଖିବା ଉଚିତ୍।

୪. ପର୍ଯ୍ୟାପ୍ତ ଆଲୋକ: ପଢ଼ିବା ସମୟରେ ଘରେ ସଠିକ୍ ଆଲୋକର ବ୍ୟବସ୍ଥା ରହିବା ଆବଶ୍ୟକ।

୫. ବ୍ୟକ୍ତିଗତ ସ୍ୱଚ୍ଛତା: ଆଖିକୁ ବାରମ୍ବାର ଦୂଷିତ ହାତରେ ନ

ଛୁଇଁବା ଏବଂ ପରିଷ୍କାର ପାଣିରେ ଧୋଇବା ପାଇଁ ପିଲାଙ୍କୁ ଶିକ୍ଷା ଦେବା ଉଚିତ୍।

୬. ପ୍ରାରମ୍ଭିକ ଚିହ୍ନଟ: ଯଦି ପିଲା ଆଖି ମଳୁଥାଏ, ବାରମ୍ବାର ଆଖି ଚିପିଚିପି ହେଉଥାଏ କିମ୍ବା ବହିକୁ ଆଖିର ଅତି ପାଖକୁ ଆଣି ପଢୁଥାଏ, ତେବେ ତୁରନ୍ତ ଚକ୍ଷୁ ବିଶେଷଜ୍ଞଙ୍କ ପରାମର୍ଶ ନେବା ଉଚିତ୍।

୪. ଉପସଂହାର

ବିଦ୍ୟାଳୟ ଛାତ୍ରଛାତ୍ରୀଙ୍କ ସୁସ୍ଥ ଦୃଷ୍ଟିଶକ୍ତି ସେମାନଙ୍କ ଉଜ୍ଜ୍ୱଳ ଭବିଷ୍ୟତର ଆଧାର। ବହୁତଗୁଡ଼ିଏ ଆଖି ସମସ୍ୟା ପ୍ରାରମ୍ଭିକ ଅବସ୍ଥାରେ ଚିହ୍ନଟ ହେଲେ ସହଜରେ ଆରୋଗ୍ୟ ହୋଇପାରିବ। ସ୍କୁଲଗୁଡ଼ିକରେ ନିୟମିତ ଆଖି ପରୀକ୍ଷା ଶିବିର (School Eye Screening) ଆୟୋଜନ କରିବା ଏବଂ ଅଭିଭାବକଙ୍କ ମଧ୍ୟରେ ସଚେତନତା ସୃଷ୍ଟି କରିବା ଦ୍ୱାରା ଆମେ ଆମର ପିଲାମାନଙ୍କ ଦୃଷ୍ଟିଶକ୍ତିକୁ ସୁରକ୍ଷିତ ରଖିପାରିବା।

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ମାତ୍ର କେତୋଟି ଆବଶ୍ୟକତାର ପରିପୂରଣରେ ହିଁ ପଶୁ ସନ୍ତୁଷ୍ଟ ହୋଇଯାଏ; ନିଜର ଐଶ୍ୱର୍ଯ୍ୟ ବୈପୁଲ୍ୟରେ ଦେବତାମାନେ ସନ୍ତୁଷ୍ଟ ରୁହନ୍ତି। ମାତ୍ର କୌଣସି ପରମଶିବର ପ୍ରାପ୍ତି ସମ୍ଭବ ନହେବାଯାଏ ମନୁଷ୍ୟ ନିଶ୍ଚିନ୍ତ ହୋଇ ବସିପାରେ ନାହିଁ। ଏ ଜଗତରେ ମନୁଷ୍ୟ ହେଉଛି ଶ୍ରେଷ୍ଠ ଜୀବ, କାରଣ ସେ ସବୁଠାରୁ ବେଶୀ ଅସନ୍ତୁଷ୍ଟ, ସୀମାବଦ୍ଧ ହୋଇରହିବାର ଜ୍ୱାଳାକୁ କେବଳ ମନୁଷ୍ୟହିଁ ଅଧିକ ଉତ୍କଟ ଭାବରେ ଅନୁଭବ କରିଥାଏ ଓ କୌଣସି ଦୂରନ୍ତ ଆଦର୍ଶର ଦିବ୍ୟଉନ୍ମାଦନାକୁ ଅନୁଭବ କରିବାଲାଗି ସମର୍ଥ ହୋଇଥାଏ।

– ଶ୍ରୀଅରବିନ୍ଦ

'ସଂସ୍କାର'
(Good Character Building)

ଡ. ନିଳୋତ୍ପଳା ରାଉତ
ଶାସ୍ତ୍ରୀନଗର, ନୟାବଜାର, କଟକ - ୭୫୩୦୦୪

ସଂସ୍କାର ଶବ୍ଦର ସଂଜ୍ଞା (Definition) ଏବଂ କ୍ରିୟା (Activity) ଏହି ଦୁଇଟି ଅର୍ଥରେ ପ୍ରଯୁକ୍ତ ଅଟେ । ସଂଜ୍ଞା (Definition) ରେ ଏହାର ଅର୍ଥ ପ୍ରାଣୀର ମନୋଦୈହିକ ତନ୍ତ୍ର (Psychophysical Organism) ଉପରେ ପଡୁଥିବା ଏହାର ପ୍ରଭାବକୁ ବୁଝାଏ । ମନୁଷ୍ୟ ଯେଉଁସବୁ କର୍ମ କରିଥାଏ, ସେହି ଅନୁସାରେ ତାର ପ୍ରବୃତ୍ତି ନିର୍ମାଣ ହୋଇଥାଏ । ଆମକୁ ପ୍ରତ୍ୟକ୍ଷ ଭାବରେ ଏପରି ଲାଗେ ଯେ କର୍ମ ସରିଯିବା ପରେ ପ୍ରବୃତ୍ତି ସମାପ୍ତ ହୋଇଯାଏ । କିନ୍ତୁ ବସ୍ତୁତଃ ସେପରି ହୋଇନଥାଏ । ଏହି କର୍ମର ପ୍ରଭାବ ସୂକ୍ଷ୍ମରୂପରେ ପ୍ରାଣୀର ଚିତ୍ତ ମଧ୍ୟରେ ରହିଥାଏ । ଚିତ୍ତରେ ନିହିତ ଥିବା ଏହି ପ୍ରବୃତ୍ତିର ଅବେଶଷକୁ ହିଁ ସଂସ୍କାର କୁହାଯାଏ ।

ଚିତ୍ତ ବୃତ୍ତିରୁ ହିଁ ସଂସ୍କାର ଉତ୍ପନ୍ନ ହୋଇଥାଏ ଏବଂ ପୁନଶ୍ଚ ସଂସ୍କାର ଦ୍ୱାରା ହିଁ ପ୍ରବୃତ୍ତିର ଉଦୟ ହୋଇଥାଏ । ସଂସ୍କାର ପ୍ରବୃତ୍ତିଗୁଡିକର ପ୍ରେରକ (Motives) ରୂପରେ କାର୍ଯ୍ୟ କରିଥାଏ ।

ସଂସ୍କାର ଅବ୍ୟକ୍ତ ରୂପରେ ପ୍ରାଣୀ ମଧ୍ୟରେ ରହିଥାଏ । ଏହାର ଶକ୍ତି ପ୍ରବଳ ଅଟେ । ଏହା ଜାଣତରେ ବା ଅଜାଣତରେ ପ୍ରାଣୀର ବ୍ୟବହାରକୁ ପ୍ରଭାବିତ କରିଥାଏ । ଅନୁକୂଳ ପରିବେଶ ମିଳିବାମାତ୍ରେ ଏହାର ଉଦଦ୍‌ବୋଧକ ହେତୁ (Appropriate Stimulus)ର ସହଯୋଗ ପାଇଁ ଏହି ସୂକ୍ଷ୍ମ ସଂସ୍କାରଟି ସ୍ଥୂଳ ବୃତ୍ତି ରୂପ ଧାରଣ କରିଥାଏ ଏବଂ ପ୍ରାଣୀର ବ୍ୟବହାର ପରିବର୍ତ୍ତନ ହୋଇଯାଇଥାଏ । ଏହି ସଂସ୍କାର ହିଁ ଉତ୍ତମ ବ୍ୟବହାରର ନିୟନ୍ତ୍ରକ ହୋଇଥାଏ । ଏଣୁ ଆର୍ଯ୍ୟ ସଂସ୍କୃତିରେ ଏହି ସଂସ୍କାରକୁ ସୁଧାରିବା ପାଇଁ ଅତ୍ୟଧିକ ଧ୍ୟାନ ଦିଆଯାଇଥାଏ ।

ଏହି ସଂସ୍କାର ପୂର୍ବଜନ୍ମର ମଧ୍ୟ ହୋଇପାରେ କିମ୍ବା ଏହି ଜନ୍ମର । ପୂର୍ବ ଜନ୍ମର ସଂସ୍କାରକୁ ପୂବର୍ଜନ୍ମ ସଂସ୍କାର ବା ସଞ୍ଚିତ ସଂସ୍କାର କୁହାଯାଏ । ଆୟୁର୍ବେଦର ପୂର୍ବଜନ୍ମର ସଂସ୍କାରକୁ 'ଦୈବ' ଏବଂ ଏହି ଜନ୍ମର ସଂସ୍କାରକୁ 'ପୁରୁଷକାର' କୁହାଯାଏ । ମାନବ ଯୁଗ ଯୁଗ ଧରି ଯେଉଁ ସଂସ୍କାରକୁ ଅର୍ଜନ କରି ଚାଲିଥାଏ ତାକୁ ମାନ-ଜାତୀୟ-ସଂସ୍କାର କୁହାଯାଏ । ଏହା ବଂଶାନୁକ୍ରମିକ ଭାବରେ ଗୋଟିଏ ପିଢିରୁ ଅନ୍ୟ ପିଢିକୁ ଯାଇଥାଏ ।

କ୍ରିୟା ରୂପରେ ସଂସ୍କାରର ଅର୍ଥ ହେଉଛି ସୁଧାରିବା, ପରିଷ୍କାର କରିବା, ପବିତ୍ର କରିବା, ଶରୀର ଓ ମନକୁ ପରିଷ୍କାର କରିବା, ସଭାବକୁ ଶୋଧନ କରିବା, ମାନସିକ ଶିକ୍ଷା ଆଦି । ସଂସ୍କୃତରେ ସଂସ୍କାର ଅର୍ଥ - ସମ୍ + କାର । ସମ୍ ଅର୍ଥ ପୂର୍ଣ୍ଣତା ବା ସଂପୂର୍ଣ୍ଣ, କାର ଅର୍ଥ କର୍ମ ବା କରିବା ଅର୍ଥାତ୍ Putting together, forming well, making perfect or purification. ସମ୍ - Well planned or well thought out, କାର - The action undertaken.

ଅନ୍ୟ ସମସ୍ତ ପଦାର୍ଥ ପରି ମନୁଷ୍ୟ ତା'ର ନିଜ ଜୀବନର ମଧ୍ୟ ଶୋଧନ କରିଥାଏ । ଜୀବନ ଶୋଧନର ଏହି ପ୍ରକ୍ରିୟା ଜନ୍ମରୁ ମୃତ୍ୟୁ ପର୍ଯ୍ୟନ୍ତ ଚାଲିଥାଏ । ଏହା ବ୍ୟକ୍ତି ଏବଂ ବାତାବରଣର ଘାତ-ପ୍ରତିଘାତ ମଧ୍ୟଦେଇ ବିକଶିତ ହୋଇଥାଏ ।

ମନୁଷ୍ୟର ସଂପୂର୍ଣ୍ଣ ଜୀବନ ଅବଧି (Life Span) ଏକ ଶହ ବର୍ଷ ବୋଲି କୁହାଯାଏ । ଏହି ସଂପୂର୍ଣ୍ଣ ଜୀବନ ଅବଧି ଗର୍ଭାବକ୍ରାନ୍ତି (Conception) ଠାରୁ ମୃତ୍ୟୁ (Cremation) ପର୍ଯ୍ୟନ୍ତ ବୃଦ୍ଧି ଓ ବିକାଶର ବିଭିନ୍ନ ସ୍ତର ମଧ୍ୟ ଦେଇ ଗତି କରିଥାଏ । ଯେପରି ମନୁଷ୍ୟ ପ୍ରଥମେ ଗର୍ଭରେ ସ୍ଥାପିତ ହୁଏ, ଜନ୍ମ ନିଏ, ନବଜାତ, ଶିଶୁ, କୁମାର, କିଶୋର, ତରୁଣ, ପୌଢ, ବୃଦ୍ଧ ଏବଂ ବୃଦ୍ଧରୁ ଜରାଜୀର୍ଣ୍ଣ ଅବସ୍ଥାକୁ ପ୍ରାପ୍ତ ହୋଇଥାଏ । ଜୀବନର ପ୍ରତ୍ୟେକଟି ପରିବର୍ତ୍ତନ ନୂଆ ନୂଆ ଭାବରେ ଆସିଥାଏ ।

ଆର୍ଯ୍ୟ ସଂସ୍କୃତିରେ ସମ୍ପୂର୍ଣ୍ଣ ଜୀବନ ଅବଧିକୁ ଚାରୋଟି ଆଶ୍ରମରେ ବିଭକ୍ତ କରାଯାଇଛି । (୧) ବ୍ରହ୍ମଚର୍ଯ୍ୟ, (୨) ଗୃହସ୍ଥ, (୩) ବାନପ୍ରସ୍ଥ, (୪) ସନ୍ନ୍ୟାସ । ପ୍ରତ୍ୟେକଟି ଆଶ୍ରମ ପଚିଶ (୨୫) ବର୍ଷ ବୋଲି ଧରାଯାଇଛି। ଏଥିରୁ ପ୍ରତ୍ୟେକ ଅବସ୍ଥାରେ ଅନେକ ମହତ୍ତ୍ୱପୂର୍ଣ୍ଣ ସ୍ତର ମଧ୍ୟ ଦେଇ ଗତି କରିବାକୁ ପଡିଥାଏ ଓ ଅନେକ ପରିବର୍ତ୍ତନର ସମ୍ମୁଖୀନ ହେବାକୁ ପଡିଥାଏ ।

ଆର୍ଯ୍ୟ ସଂସ୍କୃତିରେ ଜୀବନର ଏହି ପ୍ରତ୍ୟେକଟି ମହତ୍ତ୍ୱପୂର୍ଣ୍ଣ ପରିବର୍ତ୍ତନକୁ ସମାରୋହପୂର୍ବକ ଏକ ଧାର୍ମିକ ରୂପରେ ପାଳନ କରାଯାଇଥାଏ । ଏହାକୁ 'ସଂସ୍କାର' କୁହାଯାଏ । ଏହି ସଂସ୍କାର

କର୍ମ ତାକୁ ସ୍ମରଣ କରାଇଦିଏ ଯେ ବ୍ୟକ୍ତି ତା'ର ଏକ ମହତ୍ତ୍ୱପୂର୍ଣ୍ଣ ଅବସ୍ଥାକୁ ସଫଳତାପୂର୍ବକ ପୂର୍ଣ୍ଣକରି ଅନ୍ୟ ଏକ ଅବସ୍ଥାକୁ ପ୍ରବେଶ କରୁଛି । ଜୀବନରେ ଏହି ନୂତନ ଅବସ୍ଥାରେ ତା'ର ଏହି ସମାଜ ପ୍ରତି କ'ଣ କର୍ତ୍ତବ୍ୟ ରହିଛି, ସେ ଏହାକୁ କିପରି ନିର୍ବାହ କରିବ ତାହା ଜଣାଇ ଦିଆଯାଏ । ଏହି ସଂସ୍କାର କର୍ମ ହେଉଛି ଏକ ମାଇଲ ଖୁଣ୍ଟ (milestone) ସଦୃଶ । ଯାହାକି ମନୁଷ୍ୟକୁ ତା'ର କର୍ତ୍ତବ୍ୟ ଅକର୍ତ୍ତବ୍ୟ ବିଷୟରେ ଜଣାଏ ତଥା ନୂତନ ଅବସ୍ଥାକୁ ମଧ୍ୟ କିପରି ଭଲଭାବରେ ଅତିକ୍ରମ କରିପାରିବ ସେଥିପାଇଁ ଭଗବାନଙ୍କ ନିକଟରେ ପ୍ରାର୍ଥନା କରାଯାଏ ଓ ମଙ୍ଗଳ କାମନା କରାଯାଏ।

ସଂସ୍କାରର ପ୍ରକାର ଭେଦ :

ସଂସ୍କାରର ସଂଖ୍ୟା ସମ୍ବନ୍ଧରେ ଅନେକ ମତଭେଦ ରହିଛି । ବ୍ରହ୍ମ ସୂତ୍ର, ଧର୍ମସୂତ୍ର ଏବଂ ସ୍ମୃତିରେ ଏହାର ସଂଖ୍ୟା ୧୩ ରୁ ୪୦ ପର୍ଯ୍ୟନ୍ତ ରହିଛି। ଏଥିମଧ୍ୟରୁ ୧୬ଟି ବା ଷୋଡଶ ସଂସ୍କାର ମୁଖ୍ୟ ଅଟେ । ମହର୍ଷି ଦୟାନନ୍ଦ ନିଜର 'ସଂସ୍କାର ବିଧି'ରେ ଏହାର ବିସ୍ତୃତ ଭାବେର ବିବେଚନା କରିଛନ୍ତି । ଏହି ଷୋଡଶ ସଂସ୍କାର ହେଉଛି :

୧) ଗର୍ଭାଧାନ ସଂସ୍କାର (Conception) : ଏହା ଜୀବର ଅସ୍ତିତ୍ୱ ଆସିବା ପୂବର୍ରୁ ହିଁ କରାଯାଇଥାଏ । ଯେତେବେଳ ଜଣେ ସୁସ୍ଥ ପୁରୁଷ ପରିପକ୍ୱ ବୟସର ହୋଇଯାଏ (ଆୟୁର୍ବେଦ ଦୃଷ୍ଟିରୁ ଅତିକମ୍‌ରେ ୨୫ ବର୍ଷ) ସେତେବେଳେ ଜଣେ ସୁସ୍ଥ ପରିପକ୍ୱ ବୟସର ନାରୀ (ଅତିକମ୍‌ରେ ୧୮ ବର୍ଷ) ସହ ତା'ର ବିବାହ ସଂସ୍କାର କର୍ମ କରାଯାଇଥାଏ । ଏହାପରେ ସେହି ବିବାହିତ ପତି ଓ ପତ୍ନୀ ଶୁଭ ଦିନ, ଶୁଭ ବାର, ଶୁଭ ନକ୍ଷତ୍ର ଏବଂ ଶୁଭ ମୁହୂର୍ତ୍ତରେ ପ୍ରସନ୍ନ ମନରେ ସନ୍ତାନ ଉତ୍ପାଦନ ନିମନ୍ତେ ଯେଉଁ ସଂସ୍କାର କର୍ମ କରନ୍ତି ତାକୁ ଗର୍ଭାଧାନ ସଂସ୍କାର କୁହାଯାଏ। ଏଥପାଇଁ ପୁରଷର ବୀର୍ଯ୍ୟ (ପୁଂବୀଜ) ଓ ସ୍ତ୍ରୀ ଆତର୍ବ (ସ୍ତ୍ରୀବୀଜ) ଶୁଦ୍ଧ ହେବା ଅତ୍ୟନ୍ତ ଆବଶ୍ୟକ ।

୨) ପୁଂସବନ ସଂସ୍କାର (Fetal Protection) : ଗର୍ଭର ଉପସ୍ଥିତି ଜାଣିବା ପରେ ଦ୍ୱିତୀୟ ଓ ତୃତୀୟ ମାସରେ ପୁତ୍ରପ୍ରାପ୍ତି ନିମନ୍ତେ ଯେଉଁ ସଂସ୍କାର କର୍ମ କରାଯାଏ ତାହାକୁ ପୁଂସବନ ସଂସ୍କାର କୁହାଯାଏ । ଏହି ଅବସରରେ ଉଭୟ ପତି ଓ ପତ୍ନୀ ପ୍ରତିଜ୍ଞାବଦ୍ଧ ହୁଅନ୍ତି ଯେ ଆଜିଠାରୁ ସେମାନେ ଏମିତି କୌଣସି କାର୍ଯ୍ୟ କରିବେ ନାହିଁ ଯେଉଁଥିରେ ଗର୍ଭସ୍ଥ ସନ୍ତାନର କ୍ଷତି ହେବ ଏବଂ ଅସମୟରେ ଏହାର ପ୍ରସବ ହୋଇଯିବ । ଏହି ସମୟରେ ଗଭର୍ବତୀକୁ ଗର୍ଭର ବିକାଶ ନିମନ୍ତେ ସହାୟକ ଆହାର-ବିହାରର ବିଶେଷ ଧ୍ୟାନ ଦିଆଯାଇଥାଏ ।

୩) ସୀମନ୍ତୋନ୍ନୟନ ସଂସ୍କାର (Hair-parting for the mother) : ଏହି ସଂସ୍କାର ଗର୍ଭ ସ୍ଥାପନର ଚତୁର୍ଥ ମାସରେ (କିମ୍ବା ଷଷ୍ଠ ମାସରେ) ଶୁକ୍ଳ ପକ୍ଷରେ କରାଯାଇଥାଏ (ଚନ୍ଦ୍ରମାଯୁକ୍ତ ନକ୍ଷତ୍ରରେ) । ଏହି ସଂସ୍କାର ଗଭର୍ସ୍ଥ ଶିଶୁର ବୌଦ୍ଧିକ ଶକ୍ତିର ବୃଦ୍ଧି ନିମନ୍ତେ କାମନା କରି କରାଯାଇଥାଏ । ଏହି ସମୟରେ ଏପରି କାର୍ଯ୍ୟ କରିବା ଉଚିତ ଯେପରି ଗଭର୍ବତୀର ମନ ପ୍ରସବ କାଳ ପର୍ଯ୍ୟନ୍ତ ଅତ୍ୟନ୍ତ ପ୍ରସନ୍ନ ରହିବ ।

୪) ଜାତକର୍ମ ସଂସ୍କାର (Birth) : ସନ୍ତାନ ଜନ୍ମ ହେବାପରେ ଏହାକୁ ଜୀବିତ ଏବଂ ସୁସ୍ଥ ରଖିବା ନିମନ୍ତେ ଯେଉଁ କର୍ମ କରାଯାଏ ତାକୁ ଜାତକର୍ମ ସଂସ୍କାର କୁହାଯାଏ ।

୫) ନାମକରଣ ସଂସ୍କାର (Naming) : ସନ୍ତାନ ଜନ୍ମର ଦଶମ କିମ୍ବା ଦ୍ୱାଦଶ ଦିନ କିମ୍ବା ଦ୍ୱିତୀୟ ବର୍ଷ ଆରମ୍ଭ ହେବା ଦିନ (1st Birthday) ଏହି ସଂସ୍କାର କର୍ମ କରାଯାଇଥାଏ । ଏଥିରେ ସନ୍ତାନର ଏକ ନାମ ଦିଆଯାଇଥାଏ । ଭବିଷ୍ୟତରେ ସେ ସଂସାରରେ ସେହି ନାମରେ ପରିଚିତ ହୁଏ ।

୬) ନିଷ୍କ୍ରମଣ ସଂସ୍କାର (Taking Outside) : ଏହି ସଂସ୍କାର ଚତୁର୍ଥ ମାସରେ କରାଯାଏ । ଯେଉଁ ତିଥିରେ ସନ୍ତାନଟି ଜନ୍ମ ହୋଇଥାଏ ଠିକ୍ ସେହି ତିଥିରେ ହିଁ ଏହି କର୍ମ କରାଯାଏ । ଏହି ଅବସରରେ ଶିଶୁକୁ ପ୍ରଥମ ଥର ଘରୁ ବାହାରକୁ ନିଆଯାଏ। ମୁଖ୍ୟତଃ ଦେବସ୍ଥାନ ପର୍ଯ୍ୟନ୍ତ ନିଆଯାଏ। ସେହିଦିନଠାରୁ ସେ ବାହ୍ୟ ସୃଷ୍ଟି ସହ ପରଚିତ ହୁଏ।

୭) ଅନ୍ନପ୍ରାଶନ ସଂସ୍କାର (Complementary Feeding) : ଜନ୍ମ ଠାରୁ ଛଅ ମାସ ପର୍ଯ୍ୟନ୍ତ ଶିଶୁଟି କେବଳ ସ୍ତନ୍ୟପାନ କରିଥାଏ । ଛଅମାସ ପରେ ଶିଶୁକୁ ପ୍ରଥମ ଥର ଅନ୍ନ ଦିଆଯାଏ । ଏହାକୁ ଅନ୍ନପ୍ରାଶନ୍ନ ସଂସ୍କାର କୁହାଯାଏ । ସେହି ଦିନଠାରୁ ଶିଶୁ ତରଳ ପଦାର୍ଥ ସହ ଅନ୍ନ ମଧ୍ୟ ସେବନ କରିଥାଏ ।

୮) ଚୂଡାକର୍ମ ବା ମୁଣ୍ଡନ ସଂସ୍କାର (Hair Cut) : ଜନ୍ମର ତୃତୀୟ କିମ୍ବା ପଞ୍ଚମ ବର୍ଷ ଏହି ସଂସ୍କାର ସଂପନ୍ନ କରାଯାଏ । ଏହି ଅବସରରେ ଶିଶୁର ମସ୍ତକରୁ ଜନ୍ମ ସମୟର ଚୁଟି କଟା ଯାଇଥାଏ ।

୯) କର୍ଣ୍ଣବେଧ ସଂସ୍କାର (Ear-Piercing) : ଜନ୍ମର ତୃତୀୟ କିମ୍ବା ପଞ୍ଚମ ବଷରେ ଶିଶୁର କର୍ଣ୍ଣପାଳିକୁ ଛେଦନ

କରାଯାଇଥାଏ । ଏହାକୁ କର୍ଣ୍ଣ ଛେଦନ ବା କର୍ଣ୍ଣଭେଦ ସଂସ୍କାର କୁହାଯାଏ । ଏପରି ମଧ୍ୟ ବିଶ୍ୱାସ ଅଛି ଯେ ଏହି କର୍ଣ୍ଣଛେଦନ ସଂସ୍କାର ଦ୍ୱାରା ଶିଶୁଟି କିଛି ବିଶେଷ ରୋଗରୁ ରକ୍ଷା ପାଇଥାଏ ।

୧୦) ଉପନୟନ ସଂସ୍କାର (Thread Ceremony) : 'ଉପନୟନ'ର ଅର୍ଥ ନିକଟକୁ ଯିବା । ଏହି ସଂସ୍କାର ଦ୍ୱାରା ଶିଶୁଟି ଆଧ୍ୟାତ୍ମିକ ଜୀବନରେ ପ୍ରବେଶ କରିଥାଏ । ଏହାକୁ ଦ୍ୱିତୀୟ ଜନ୍ମ ବୋଲି ମଧ୍ୟ କୁହାଯାଏ ।

୧୧) ବେଦାରମ୍ଭ ସଂସ୍କାର (Start Learning) : ଉପନୟନ ସଂସ୍କାର ଦିନ କିମ୍ବା ଏହାର ଏକ ବର୍ଷ ମଧ୍ୟରେ ବାଳକଟିକୁ ଗୁରୁକୁଳରେ ଗୁରୁଙ୍କ ନିକଟରେ ବିଦ୍ୟା ଅଧ୍ୟୟନ ନିମନ୍ତେ ପଠାଯାଇଥାଏ । ଏହି ଦିନ ଯେଉଁ କର୍ମ ଗୁରୁକୁଳରେ କରାଯାଏ ତାହାକୁ ବେଦାରମ୍ଭ ସଂସ୍କାର କୁହାଯାଏ । ବେଦ ହେଉଛି ସମସ୍ତ ଜ୍ଞାନ ବିଜ୍ଞାନର ସ୍ରୋତ ।

୧୨) ସମାବର୍ତ୍ତନ ସଂସ୍କାର (Graduation Ceremony): ପଚିଶ ବର୍ଷ ବୟସ ପର୍ଯ୍ୟନ୍ତ ବ୍ରହ୍ମଚର୍ଯ୍ୟ ପୂର୍ବକ ଗୁରୁକୂଳରେ ରହି ବିଦ୍ୟା ଅଧ୍ୟୟନ କାର୍ଯ୍ୟ ସମ୍ପନ୍ନ ହେବାପରେ ଶିଷ୍ୟମାନଙ୍କର ଯେଉଁ ବିଦାୟ ସମାରୋହ (Farewell) ହୋଇଥାଏ ତାକୁ ସମାବର୍ତ୍ତନ ସଂସ୍କାର କୁହାଯାଏ । ସେହିଦିନ ଶିଷ୍ୟମାନେ ଗୁରୁଙ୍କ ଠାରୁ ଆଶୀର୍ବାଦ ଗ୍ରହଣ କରି ନିଜ ଗୃହକୁ ପ୍ରତ୍ୟାବର୍ତ୍ତନ କରି ଗୃହସ୍ଥ ଆଶ୍ରମରେ ପ୍ରବେଶ କରନ୍ତି ।

୧୩) ବିବାହ ସଂସ୍କାର (Marriage) : ଏହା ହେଉଛି ଗୃହସ୍ଥ ଆଶ୍ରମରେ ପ୍ରବେଶ କରିବାର ପ୍ରଥମ ସୋପାନ । ଏହାଦ୍ୱାରା ଏକ ସୁସ୍ଥ ଏବଂ ପରିପକ୍ୱ ପୁରୁଷ ଏକ ସୁସ୍ଥ ଓ ପରିପକ୍ୱ ନାରୀ ସହିତ ପ୍ରଜାତି ଉତ୍ପାଦନ ନିମନ୍ତେ ବିବାହ ବନ୍ଧନରେ ଆବଦ୍ଧ ହୋଇଥା'ନ୍ତି ।

୧୪) ବାନପ୍ରସ୍ଥ ସଂସ୍କାର (Forest Dweller) : ପଚିଶରୁ ପଚାଶ ବର୍ଷ ବୟସ ପର୍ଯ୍ୟନ୍ତ ଗୃହସ୍ଥ ଆଶ୍ରମର ସଫଳ ଜୀବନ ଅତିବାହିତ କରିବା ପରେ ତା'ର ସନ୍ତାନ ମଧ୍ୟ ସେତେବେଳକୁ ବିଦ୍ୟାଧ୍ୟୟନ ସମାପ୍ତ କରି ଗୃହକୁ ଫେରି ଆସିଥାଏ । ସେହି ସମୟରେ ପୁତ୍ରର ବିବାହ କାର୍ଯ୍ୟ ସମ୍ପନ୍ନ କରି ପୁତ୍ର ଓ ପୁତ୍ର-ବଧୂକୁ ଘରର ସମସ୍ତ ଦାୟିତ୍ୱ ପ୍ରଦାନ କରି ସପତ୍ନୀକ ପାରିବାରିକ ବନ୍ଧନରୁ ମୁକ୍ତ ହୋଇଯାଇଥା'ନ୍ତି । ସେ ତା'ର ଶେଷ ଜୀବନ ଆଧ୍ୟାତ୍ମ ଚିନ୍ତନ ଓ ସମାଜର ସେବାରେ ବ୍ୟତୀତ କରିଥାଏ । ବାନପ୍ରସ୍ଥ ସଂସ୍କାର କର୍ମ ଦ୍ୱାରା ସେ ବାନପ୍ରସ୍ଥ ଆଶ୍ରମରେ ପ୍ରବେଶ କରିଥାଏ ।

୧୫) ସନ୍ନ୍ୟାସ ସଂସ୍କାର (Renunciation or Monkhood) : ପଚାଶରୁ ପଞ୍ଚସ୍ତରୀ ବର୍ଷ ବୟସ ପର୍ଯ୍ୟନ୍ତ ବାନପ୍ରସ୍ଥ ଆଶ୍ରମର ଜୀବନ ବ୍ୟତୀତ କରିବା ପରେ ନିରନ୍ତର ଅଭ୍ୟାସ ଦ୍ୱାରା ସମସ୍ତ ମୋହମାୟାକୁ ତ୍ୟାଗ କରି ବ୍ୟକ୍ତି ପୂର୍ଣ୍ଣରୂପରେ ଆଧ୍ୟାତ୍ମିକ ସାଧନାରେ ଲାଗିଯାଏ । ବର୍ତ୍ତମାନ ତା'ର ଏକମାତ୍ର ଉଦ୍ଦେଶ୍ୟ ହେଉଛି ଜ୍ଞାନ ଓ ଭକ୍ତିର ପ୍ରକାଶରେ ମୋକ୍ଷ ପ୍ରାପ୍ତି । ସତ୍, ଚିତ୍ ଏବଂ ଆନନ୍ଦ ସରୂପ ବ୍ରହ୍ମଙ୍କୁ ପ୍ରାପ୍ତି ତଥା ଅନ୍ତିମ ରୂପରେ ତାଙ୍କ ସହ ଏକାକାର ହୋଇଯିବା।

୧୬) ଅନ୍ତ୍ୟେଷ୍ଟି ସଂସ୍କାର (Funeral Rites & Cremetion) : ଏହା ମରଣୋ-ପରାନ୍ତ କରାଯାଇଥାଏ । ଏହାକୁ ଦାହ ସଂସ୍କାର ମଧ୍ୟ କୁହାଯାଏ । ଏହା ପ୍ରାଣୀର ପାର୍ଥିବ ଶରୀରର ଅନ୍ତର ପ୍ରତୀକ । ଏହି କର୍ମ ଦ୍ୱାରା ଆତ୍ମାକୁ ଏକ ନୂତନ ଜୀବନ ପ୍ରାପ୍ତ ହୋଇଥାଏ ବୋଲି ବିଶ୍ୱାସ କରାଯାଏ ।

ଆୟୁର୍ବେଦର ସଂସ୍କାର ବର୍ଣ୍ଣନା :

'ହିତାହିତଂ ସୁଖଂ ଦୁଃଖଂ ଆୟୁସ୍ତସ୍ୟା ହିତାହିତମ୍
ମାନଂ ଚ ତତ୍ଚ ଯେତ୍ରାକ୍ତଂ ଆୟୁର୍ବେଦଃ ସ ଉଚ୍ୟତେ' ॥

(ଚରକ ସଂହିତା, ସୂତ୍ରସ୍ଥାନ ୧-୪୧)

ଆୟୁର୍ବେଦ ହେଉଛି ଆୟୁର ବେଦ । ଆୟୁର୍ବେଦର ଚରମ ଉଦ୍ଦେଶ୍ୟ ହେଉଛି ମନୁଷ୍ୟକୁ ଆୟୁଷ୍ମାନ କରିବା ତଥା ଜୀବନର ପ୍ରତ୍ୟେକ ସ୍ତରରେ ତାକୁ ସୁସ୍ଥ ଓ ସୁଖୀ ରଖିବା । ଏହା ଆୟୁକୁ ହିତାୟୁ ଓ ସୁଖାୟୁ କରିବାର ବିଜ୍ଞାନ ଅଟେ ।

Ayurveda is a science that describes the advantages, dis-advantages, happy and unhappy status of life, in addition to what is good and bad for life and its measurement.

ଆୟୁର୍ବେଦର ଆଠଟି ପ୍ରଧାନ ଅଙ୍ଗ ବା ଶାଖା ଅଛି । ଯଥା : ଶଲ୍ୟ (Surgery), ଶାଲାକ୍ୟ (ENT), କାୟଚିକିତ୍ସା (Medicine), ଭୂତବିଦ୍ୟା (Psychiatrics), କୌମାରଭୃତ୍ୟ (Paediatrics), ଅଗଦତନ୍ତ୍ର (Toxicology), ରସାୟନ (Rejuvenation) ଏବଂ ବାଜୀକରଣ (Aphrodisiac Therapy) ।

କୌମାରଭୃତ୍ୟ (Paediatrics) ଆୟୁର୍ବେଦର ଏକ ଶାଖା ଯାହା କୁମାର ବା ବାଳକର ଭରଣ ପୋଷଣ ତଥା ବାଲ୍ୟାବସ୍ଥାର ଉତ୍ପନ୍ନ ହେଉଥିବା ରୋଗ ଏବଂ ତା'ର ଚିକିତ୍ସା ସହ ସମ୍ବଳିତ

ଅଟେ। କୁମାର + ଭୃତ୍ୟ - କୌମାରଭୃତ୍ୟ। କୁମାର ଅର୍ଥାତ୍ ଷୋହଳ ବର୍ଷ ପର୍ଯ୍ୟନ୍ତ । ଭୃତ୍ୟ ଅର୍ଥାତ୍ ସେବକ ବା ଭରଣ ପୋଷଣ କରିବା ବ୍ୟକ୍ତି । ଏଠାରେ ଜଣେ ମାଆ ଗର୍ଭଧାରଣ କରିବା ଦିନଠାରୁ ଶିଶୁର ପରିପକ୍ୱାବସ୍ଥା (Age of maturity) ପର୍ଯ୍ୟନ୍ତ ତା'ର ଦେଖାଶୁଣା କରିବା, ଭରଣ ପୋଷଣ କରିବା ଏବଂ ଅବସ୍ଥା-ବିଶେଷରେ ହେଉଥିବା ରୋଗର ଉପଚାର କରିବା ଆଦି ବିଷୟ ବର୍ଣ୍ଣନା କରାଯାଇଅଛି। କାଶ୍ୟପ ସଂହିତା ହେଉଛି କୌମାରଭୃତ୍ୟତନ୍ତ୍ରର ଏକ ପ୍ରଧାନ ଗ୍ରନ୍ଥ । ଏହାକୁ ବୃଦ୍ଧ ଜୀବକ ରଚନା କରିଛନ୍ତି । ଏହି ଗ୍ରନ୍ଥରେ ସଂସ୍କାର ସମ୍ବନ୍ଧରେ ଯାହା ବର୍ଣ୍ଣନା ରହିଛି, ତାହା ଆମେ ଏଠାରେ କିଛି କିଛି ଆଲୋଚନା କରିବା।

ସାସ୍ଥ୍ୟ ଦୃଷ୍ଟିରୁ ଗର୍ଭାବସ୍ଥାରୁ (ଜୀବନର ଅସ୍ତିତ୍ୱ ଜାଣିବା ସମୟଠାରୁ) ବିବାହ ପର୍ଯ୍ୟନ୍ତ ସମୟ ହେଉଛି ଅତ୍ୟନ୍ତ ମହତ୍ତ୍ୱପୂର୍ଣ୍ଣ । ଏହି ସମୟରେ ସାସ୍ଥ୍ୟ ଠିକ୍ ରହିଲେ ତାହା ଭବିଷ୍ୟତ ନିମନ୍ତେ ପ୍ରଭାବ ପକାଇଥାଏ । ଏଥିପାଇଁ ଏହି ସମୟରେ ହେଉଥିବା ସଂସ୍କାର ଗୁଡିକୁ ମହତ୍ତ୍ୱ ଦିଆଯାଇଛି, ବିଶେଷ କରି ଶାରୀରିକ ଓ ମାନସିକ ସାସ୍ଥ୍ୟ ପ୍ରତି ଧ୍ୟାନ ଦିଆଯାଇଛି ।

ନାମକରଣ ସଂସ୍କାର :

'ଦଶମେ ଦ୍ୱାଦଶେ ବହ୍ନି ଗୋତ୍ରଋରୈଃ ଶୁଭୈଃ ଶୁଭେ ।
ସୂତା ସ୍ନାନାହ୍ୱଂ କୁର୍ଯାତ୍ ପିତାପିତ୍ୟସ୍ୟ ନାମ ଚ ॥
ଦିନେ ଶତତମେ ବାଖ୍ୟାଂ ପୂର୍ଣ୍ଣେ ସଂବତ୍ସରେଙ୍କଥବା ।
ବିଭ୍ରେତାଙ୍କଙ୍ଗୈର୍ଭନୋହ୍ୱାଳରୋଚନାଗରୁ ଚନ୍ଦନମ୍ ॥' (ଅ.ସଂ.ଉ-୧/୨୯-୩୦)

ଅର୍ଥାତ୍ ଦଶମ ବା ଦ୍ୱାଦଶ ଦିନରେ କୁଳ ଗୋତ୍ରର ମର୍ଯ୍ୟାଦା ଅନୁସାରେ ପ୍ରସୂତାର ସ୍ନାନ ଉତ୍ସବ ହୋଇଥାଏ । ବାଳକକୁ ସ୍ନାନ କରାଇ ତା'ର ଶରୀରରେ ସୁରକ୍ଷାତ୍ମକ ଏବଂ ସୁଗନ୍ଧିତ ପଦାର୍ଥ ଲେପ କରିଯାଏ । ବୃଦ୍ଧ ବାଗ୍‌ଭଟ୍ଟ ମନଃଶିଳା, ହରତାଳ, ଗୋରଚନ, ଅଗୁରୁ ଏବଂ ଚନ୍ଦନ ଆଦି ପଦାର୍ଥର ଲେପ ଦେବାପାଇଁ ବର୍ଣ୍ଣନା କରିଛନ୍ତି । ପିତା ବହୁତ ଚିନ୍ତା କରି ସନ୍ତାନର ନାମ କରଣ କରିଥା'ନ୍ତି ।

ନିଷ୍କ୍ରମଣ ସଂସ୍କାର :

'ଚତୁର୍ଥେ ସୂତିକାଗାରାହଅଗ୍ନିସ୍କନ୍ଦପୁରୋଗମାନ୍ ।
ମାସେ ନିଷ୍କାମୟେଦ୍ଧବାନ୍ ନମସ୍କର୍ତୁଂ ସଳଂକୃତମ୍ ॥'

(ଅ.ସଂ.ଉ-୧/୪୫)

ଅର୍ଥାତ୍ ଚତୁର୍ଥ ମାସରେ ସନ୍ତାନକୁ ଭଲଭାବରେ ଅଳଂକୃତ କରି ପରିଷ୍କାର ସୁନ୍ଦର ବସ୍ତ୍ର ପରିଧାନ କରାଇ ଦେବତାମାନଙ୍କୁ ନମସ୍କାର କରାଇବା ନିମନ୍ତେ ସୂତିକା ଗୃହରୁ ବାହାରକୁ ଆଣିବା ଉଚିତ୍ ।

'ଶରଚ୍ଛତଂ ଜୀବ ଶିଶୋ ! ତ୍ୱଂ ଦେବିରଭିରଓିତଃ।
ଦ୍ୱିଜୈରପ୍ୟାଶିଷା ପୂଣୋ ଗୁରୁଭିଶ୍ଚାଭିନନ୍ଦିତଃ ॥'

(କାଶ୍ୟପ ଖିଳସ୍ଥାନ-୧୨/୫)

ଅର୍ଥାତ୍ ହେ ଶିଶୁ ! ତୁମେ ଦେବତାମାନଙ୍କ ଦ୍ୱାରା ରକ୍ଷିତ, ବ୍ରାହ୍ମଣମାନଙ୍କର ଆଶୀର୍ବାଦରୁ ପବିତ୍ର, ତଥା ଗୁରୁଙ୍କ ଦ୍ୱାରା ପ୍ରଶଂସିତ ହୋଇ ଶହେ ବର୍ଷ ଜୀବିତ ରୁହ । ଏହି ମନ୍ତ୍ର ଦ୍ୱାରା ଶିଶୁକୁ ଗୁରୁଜନମାନେ ଆଶୀର୍ବାଦ ପ୍ରଦାନ କରିଥା'ନ୍ତି।

ଅନ୍ନପ୍ରାଶନ ସଂସ୍କାର :

'ଯଥା ସୁରାଣାମସୃତଂ ନାଗେନ୍ଦ୍ରାଣାଂ ଯଥା ସୁଧା ।
ତଥାଙ୍କଅନ୍ନଂ ପ୍ରାଣିନଂ ପ୍ରାଣା ଅନ୍ନଂ ଗୃହ୍ଣଃ ପ୍ରଜାପତିମ୍ ॥
ତ୍ରବୁଦ୍‌ଭବସ୍ତ୍ରି ବଗର୍ଣ୍ଣ ଲୋକାଶ୍ଚୈବ ଯଥା ହ୍ୟମି ।
ଜୁହୋମି ତସ୍ମାତ୍ତ୍ୱୟ୍ୟନ୍ନମେଗ୍ନଃଙ୍କମୃତସୁଖୋପଗମ୍ ।
ପ୍ରଜାପତିରନୁମନ୍ୟତାଂ ସାହା ॥'

ଯେପରି ଦେବତାମାନଙ୍କ ନିମନ୍ତେ ଅମୃତ, ଶ୍ରେଷ୍ଠ ହାତୀ ନିମେନ୍ତ ସୁଧା (ମଦ), ସେହିପରି ପ୍ରାଣୀମାନଙ୍କ ନିମନ୍ତେ ଅନ୍ନ ଅଟେ । ଯେପରି ତ୍ରିବର୍ଗ (ଧର୍ମ, ଅର୍ଥ, କାମ) ତଥା ଲୋକର ଉତ୍ପତ୍ତି ହୋଇଥାଏ ସେହିପରି ଅନ୍ନର ବି ଉତ୍ପତ୍ତି ହୋଇଥାଏ । ଏଣୁ ହେ ଅଗ୍ନିଦେବ ! ଅମୃତ ସଦୃଶ ସୁଖ ପ୍ରଦାନକାରୀ ଏହି ଅନ୍ନକୁ ମୁଁ ତୁମକୁ ଆହୁତି ଦେଉଛି। ଏହାକୁ ତୁମେ ଗ୍ରହଣ କର। ପ୍ରଜାପତି ଏହାର ଅନୁମୋଦନ କରନ୍ତୁ। ଅଗ୍ନିରେ ଆହୁତି ଦେବାପରେ ବଳକା ଅନ୍ନରୁ ଅଳ୍ପ ନେଇ ଭଲଭାବେ ବାଟି ନରମ କରି ବାଳକର ମୁଖରେ ତିନିଥର କିମ୍ବା ପାଞ୍ଚଥର ଦିଆଯାଏ। ତା'ପରେ ଜଳରେ ଆଚମନ କରାଯାଏ।

କର୍ଣ୍ଣବେଧନ ସଂସ୍କାର :

ମହର୍ଷି ସୁଶ୍ରୁତ କର୍ଣ୍ଣବେଧନର ବିଧି ଓ ଏଥିରୁ ହେଉଥିବା ଅସୁବିଧା ସମ୍ବନ୍ଧରେ ବିସ୍ତୃତ ଭାବରେ ଆଲୋଚନା କରିଯାଇଛନ୍ତି। ଯେପରି - 'ରକ୍ଷାଭୂଷଣନିମିତ୍ତଂ ବାଳସ୍ୟ କର୍ଣ୍ଣେ ବିଧ୍ୟେତେ ।

ତୌ ଷଷ୍ଠ ମାସି ସପ୍ତମେ ବା ଶୁକ୍ଲପକ୍ଷେ ପ୍ରଶସ୍ତେଷୁ ତିଥିକରଣ ମୁହୂର୍ତ୍ତ ନକ୍ଷତ୍ରେଷୁ କୃତମ୍ଙ୍ଗଳସ୍ୱସ୍ତିବାଚନଂ ଧାୟଙ୍କ କୁମାରଧରାଙ୍କେ ବା କୁମାରସୁପବେଶ୍ୟ ବାଳକ୍ରୀଡେକିଃ ପ୍ରଲୋଭ୍ୟ ଅଭିସାନ୍ତ୍ୟୟନ୍ ଭିଷଗ୍ୱାମହ ସ୍ତେନାକୃଷ୍ୟ କର୍ଣ୍ଣଂ ଦୈବକୃତେ ଛଦ୍ର ଆଦିତ୍ୟକରାବଭାସିତେ ଶନୈଃ ଶନୈ ର୍ଦକ୍ଷିଣ ହସ୍ତେନର୍ଜୁ ବିଧ୍ୟେତ୍, ପ୍ରତନୁଙ୍ଗ ସୂଚ୍ୟା, ବହଳମାରୟା, ପୂର୍ବ ଦକ୍ଷିଣଂ କୁମାରାସ୍ୟ, ବାମଂ କୁମାର୍ଯ୍ୟାଃ, ତତଃ ପିଚୁବର୍ତ୍ତି ପ୍ରବେଶୟେତ୍ ।'(ସୁଶ୍ରୁତ, ସୂତ୍ର - ୧୬/୩)

ଅର୍ଥାତ୍ - ଶିଶୁର ସୁରକ୍ଷା ନିମନ୍ତେ ଓ ଆଭୂଷଣ (ଅଳଙ୍କାର) ଧାରଣ ନିମେନ୍ତ କର୍ଣ୍ଣବେଧନ କରାଯାଇଥାଏ। (Acupuncture ଦୃଷ୍ଟିରୁ ଏହାର ଚିକିତ୍ସାତ୍ମକ ମହତ୍ତ୍ୱ ମଧ୍ୟ ରହିଛି) । ଷଷ୍ଠ କିମ୍ବା ସପ୍ତମ ମାସରେ ଶୁକ୍ଲପକ୍ଷରେ ଶୁଭଦିନ, କରଣ, ନକ୍ଷତ୍ର, ମୁହୂର୍ତ୍ତ ଆଦି ଦେଖି ମଙ୍ଗଳାଚରଣ ପୂବର୍କ ସସ୍ତିବାଚନ କରି ବାଳକକୁ ଧାୟେଙ୍କ (ଧାଇ କୋଳରେ) କିମ୍ବା କୁମାର ଧରାଙ୍କେ (କୁମାରାଧାର କୋଳରେ) ବସାଇବେ । ଶିଶୁକୁ ତା'ର ଖେଳନା (କ୍ରୀଡନକ) ଆଦି ଧରାଇବେ ଯେପରି ଶିଶୁଟି ଅନ୍ୟମନସ୍କ ରହିବ । ଏହାପରେ ବୈଦ୍ୟ ତାଙ୍କର ବାମ ହସ୍ତରେ ଶିଶୁର କାନକୁ ଧରି ସ୍ପଷ୍ଟ ସୂର୍ଯ୍ୟକିରଣ ପଡୁଥିବା ସ୍ଥାନରେ କର୍ଣ୍ଣପାଳୀର ମଝିରେ ଧୀରେ ଧୀରେ ଛିଦ୍ର କରିବେ। ଏହି ଛିଦ୍ର ଯେପରି ଉପରକୁ, ତଳକୁ କିମ୍ବା ଏକ ପାର୍ଶ୍ୱକୁ ନହୁଏ ତାହା ସୁନିଶ୍ଚିତ କରିବେ । ପୁତ୍ର ସନ୍ତାନ ହୋଇଥିଲେ ପ୍ରଥମେ ଦକ୍ଷିଣ କର୍ଣ୍ଣ (Right ear) ଏବଂ କନ୍ୟା ସନ୍ତାନ ହୋଇଥିଲେ ପ୍ରଥମେ ବାମ କର୍ଣ୍ଣ (Left ear) ଛିଦ୍ର କରିବେ। ଛିଦ୍ର ହେବାପରେ ସେଥିରେ ଔଷଧଯୁକ୍ତ ସୂତା ଲଗାଇବେ।

ଏହି ଛିଦ୍ର ଯଦି ସଠିକ୍ ସ୍ଥାନରେ ନହୁଏ ତେବେ ସେଥିରୁ ରକ୍ତସ୍ରାବ ହୁଏ ଓ କଷ୍ଟ ହୁଏ । ସେତେବେଳେ ତୁରନ୍ତ ସେଥିରୁ ସୂତାକୁ ବାହାର କରି ମୂଳେଠୀ, ଏରଣ୍ଡମୂଳ, ମଞ୍ଜିଷ୍ଠା, ଯବ ଓ ତିଳକୁ ବାଟି ତଥା ଘୃତ ଓ ମଧୁରେ ମିଶାଇ ସେଠାରେ ଲଗାଇବେ। ଭଲ ହେବାପରେ ପୁନଶ୍ଚ ସଠିକ୍ ବିଧ୍ରେ ଛିଦ୍ର କରିବେ।

ବେଦାରମ୍ଭ ସଂସ୍କାର :

'ବେଦ' ଜ୍ଞାନର ପ୍ରତୀକ ଅଟେ । ଯେତେବେଳେ ବାଳକ ପଢିବା ଯୋଗ୍ୟ (School going age) ହୋଇଯାଏ ସେତେବେଳେ ଗୁରୁଙ୍କ ଦ୍ୱାରା ତା'ର ବେଦାରମ୍ଭ ସଂସ୍କାର କରାଯାଇଥାଏ ।

ଶକ୍ତିମନ୍ତ୍ର ଯଥାବର୍ଣ୍ଣ ବିଦ୍ୟାମଧ୍ୟାପୟେତ୍ ତତଃ
ଅନୁଶିଷ୍ୟାତ୍ ସଦା ଙ୍ଗୈନଂ ଧର୍ମାୟ ବିନପାୟଚ ॥
ଯଥା ନୈନ୍ଦ୍ରିୟଦୁଷ୍ଟା ଶ୍ୱେହ୍ନିୟତେ ଯୌବନା ଗମେ । (ଅ.ସଂ.ଉ. ୧/୭୭)

ଯେତେବେଳେ ବାଳକଟି ଶାରୀରିକ ଓ ମାନସିକ ଦୃଷ୍ଟିରୁ ବିଦ୍ୟାଧ୍ୟୟନ ନିମନ୍ତେ ସମର୍ଥ ହୋଇଯାଏ, ସେତେବେଳେ ତା'ର ବର୍ଣ୍ଣ ଅନୁସାରେ ବିଦ୍ୟାଧୟନ କରବା ଆବଶ୍ୟକ । ତା'ର ବ୍ୟକ୍ତିତ୍ୱର ସର୍ବତୋମୁଖୀ ବିକାଶ ନିମନ୍ତେ ତାକୁ ଧର୍ମ ଓ ସଦାଚାର ବିଷୟରେ ବ୍ୟାପକ ଭାବେ ଶିକ୍ଷା ଦିଆଯିବା ଉଚିତ । ଯାହା ଫଳରେ ସେ ଯୌବନାବସ୍ଥାରେ ଦୁଷ୍ଟ ଇନ୍ଦ୍ରିୟରୂପୀ ଅଶ୍ୱର ବଶୀଭୂତ ନହୋଇ ସ୍ୱଂ ତା' ଉପରେ ନିୟନ୍ତ୍ରଣ ପ୍ରାପ୍ତ କରି ନିଜ ଇଚ୍ଛା ଅନୁସାରେ ତା'ର ସଞ୍ଚାଳନ କରିପାରିବ ।

ଏହିପରି ଭାବରେ ଆୟୁର୍ବେଦର ସମସ୍ତ ପ୍ରକାର ସଂସ୍କାରର ବିସ୍ତୃତ ଭାବରେ ବର୍ଣ୍ଣନା କରାଯାଇଅଛି । କିନ୍ତୁ ବିଷୟବସ୍ତୁର ବ୍ୟାପକତାକୁ ଦୃଷ୍ଟିରେ ରଖି ଏଠାରେ ଅଳ୍ପ କେତେକ ସଂସ୍କାର ସଂକ୍ଷେପରେ ଆଲୋଚନା କରାଗଲା । ସ୍ୱାମୀ ଦୟାନନ୍ଦ ସରସ୍ୱତୀ 'ସଂସ୍କାର ବିଧି' ପୁସ୍ତକରେ କେଉଁ ସଂସ୍କାର ନିମନ୍ତେ କେଉଁ ବିଧି ରହିଛି ଏବଂ କେଉଁ କେଉଁ ମନ୍ତ୍ରରେ ଯଜ୍ଞାହୁତି ଦିଆଯିବ ତାହାର ବିସ୍ତୃତ ଆଲୋଚନା କରିଛନ୍ତି । ନିମ୍ନରେ ଉଦାହରଣ ସ୍ୱରୂପ ପୁଂସବନ ସଂସ୍କାରର କିଛି ମନ୍ତ୍ର ଦିଆଗଲା ।

ପୁମାଗୁଂସୌ ମ୍ରିବରୁଣୌ ପୁମାଗୁଂସାବଶ୍ୱିନାବୁଭୌ ।
ପୁମାନଗ୍ନିଶ୍ଚ ବୟୁଶ୍ଚ ପୁମାନ୍ ଗର୍ଭସ୍ତବୋଦରେ ॥୧॥
ପୁମାନଗ୍ନିଃ ପୁନାନିଦ୍ରଃ ପୁମାନ୍ ଦେବୋ ବୃହସ୍ପତିଃ ।
ପୁମାଗୁଂସଂ ପୁତ୍ରଂ ବିନ୍ଦସ୍ୱ ତଂ ପ୍ରମାନନୁ ଦାୟତାମ୍ ॥୨॥
(ସାମବେଦ ମନ୍ତ୍ର ବ୍ରାହ୍ମଣ ୧/୪/୮,୯)

ଶେଷରେ ଆମେ ଏହି ନିଷ୍କର୍ଷରେ ପହଞ୍ଚିଲେ ଯେ ସଂସ୍କାର ବିନା ଆମ ଜୀବନ ଅସମ୍ପୂର୍ଣ୍ଣ । ଜୀବନର ପରିପୂର୍ଣ୍ଣତା ନିମନ୍ତେ ସଂସ୍କାରର ଆବଶ୍ୟକତା ଅନିବାର୍ଯ୍ୟ ।

❖

ଜୀବାଣୁ - ଆମର ଅତି ଉପକାରୀ ମିତ୍ର

ଡାକ୍ତର ପିତବାସ ସାହୁ
ପ୍ରାକୃତିକ ଚିକିତ୍ସକ, ଢେଙ୍କାନାଳ

ଜୀବାଣୁମାନେ ଆମର ଶତ୍ରୁ ନୁହନ୍ତି ବରଂ ମିତ୍ର ଅଟନ୍ତି। କାରଣ ଜୀବାଣୁମାନେ ରୋଗ ସୃଷ୍ଟି କରନ୍ତି ନାହିଁ ବରଂ ରୋଗ ଦୂର କରିବାରେ ସହାୟକ ହୋଇଥାନ୍ତି। ଯେପରି ପ୍ରକୃତି ବାହାର ଜଗତକୁ ନିର୍ମଳ ରଖିବା ପାଇଁ କୁଆ, ଶାଗୁଣା ଓ ବିଲୁଆ ଆଦି ଜୀବଙ୍କୁ ଝାଡୁଦାର ରୂପେ ସୃଷ୍ଟି କରିଛି ସେହିପରି ଶରୀର ଭିତରକୁ ନିର୍ମଳ ରଖିବା ପାଇଁ ମଧ୍ୟ ପ୍ରକୃତି ଜୀବାଣୁମାନଙ୍କୁ ଝାଡୁଦାର ରୂପେ ସୃଷ୍ଟି କରିଛି।

ଶରୀର ମଧ୍ୟସ୍ଥ ଆବର୍ଜନାକୁ ଖାଇ ଶରୀରକୁ ନିର୍ମଳ ରଖିବା ହେଲା ଜୀବାଣୁ ମାନଙ୍କର କାମ। ତେଣୁ ଯେତେବେଳେ ଶରୀରରେ ଆବର୍ଜନାର ପରିମାଣ ଅଧିକ ହୋଇଯାଏ, ସେତେବେଳେ ସେ ଅବର୍ଜନାକୁ ଖାଇ ଶରୀରକୁ ନିର୍ମଳ କରିବା ପାଇଁ ଜୀବାଣୁମାନେ ସୃଷ୍ଟି ହୋଇଥାନ୍ତି।

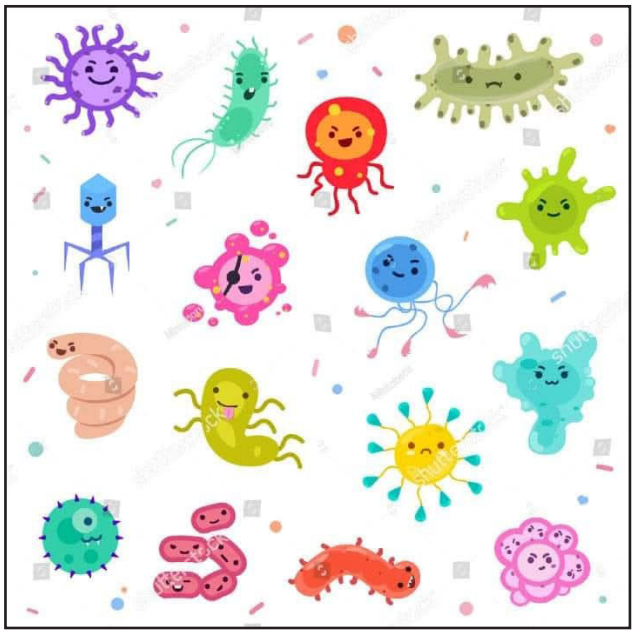
ତେଣୁ ଜୀବାଣୁ ମାନଙ୍କୁ ମାରିବା ପାଇଁ ଚେଷ୍ଟା ନକରି ବରଂ ଶରୀରସ୍ଥ ଆବର୍ଜନାକୁ ବାହାର କରିଦେଲେ ଜୀବାଣୁ ଆପେ ଆପେ ଦୂର ହୋଇଯିବେ।

ଆଜିର ଔଷଧ ବିଜ୍ଞାନ ଜୀବାଣୁ ମାନଙ୍କୁ ହିଁ ରୋଗ ସୃଷ୍ଟିର କାରଣ ମାନୁଛି ଏବଂ ଅତିଶୟ ପ୍ରଚାର ଫଳରେ ଆମେମାନେ ମଧ୍ୟ ଏହାକୁ ବିଶ୍ୱାସ କରିନେଇଛୁ।

ତେଣୁ ବର୍ତ୍ତମାନ ଆମମାନଙ୍କୁ ଜୀବାଣୁ ସମ୍ବନ୍ଧୀୟ ଏହି ତଥ୍ୟ ନିଶ୍ଚୟ ହାସ୍ୟାସ୍ପଦ ପ୍ରତୀତ ହେବ। କିନ୍ତୁ ନିମ୍ନ ଉଦାହରଣରୁ ଉପରୋକ୍ତ କଥାର ସତ୍ୟତା ଜଣାପଡିଯିବ।

ଯେତେବେଳେ ଫଳ ପଚିଯାଇଥାଏ, ସେତେବେଳେ ତାକୁ ଖାଇବା ନିମନ୍ତେ ସେଥିରେ ଜୀବାଣୁ ଲାଗିଥାନ୍ତି।କାରଣ ଜୀବାଣୁ ମାନଙ୍କର କାମ ହେଉଛି ଆବର୍ଜନା ସଫା କରିବା।ଶରୀରରେ ମଧ୍ୟ ସେମାନେ ଏହି କାରଣରୁ ସୃଷ୍ଟି ହୋଇଥାନ୍ତି।

ଜୀବାଣୁ ଆବର୍ଜନାଯୁକ୍ତ ଶରୀରରେ ସେହି କାମ କରିଥାନ୍ତି ଯାହା ସେମାନେ ପଚା ଫଳରେ କରିଥାନ୍ତି। ଜୀବାଣୁ ମାନଙ୍କ କାରଣରୁ ଫଳ ପଚି ନଥାଏ ବରଂ ଜୀବାଣୁ ମାନେ



ସେମାନଙ୍କ ଖାଦ୍ୟ ପାଇଁ ଏପରି ଫଳ ଖୋଜୁଥାନ୍ତି ଯିଏକି ପଚୁଥାଏ।

ଜୀବାଣୁମାନେ ସୁସ୍ଥ ରକ୍ତ ମାଂସ ର କୌଣସି କ୍ଷତି କରିପାରି ନଥାନ୍ତି, କିନ୍ତୁ ଯେତେବେଳେ ଶରୀରରେ ଏପରି ଜିନିଷ ଜମା ହୋଇଯାଏ ଯାହାକି ଜୀବାଣୁ ମାନଙ୍କର ଖାଦ୍ୟ ଉପଯୋଗୀ ସେତେବେଳେ ସେମାନେ ସେଥିରେ ସୃଷ୍ଟି ହୁଅନ୍ତି।

ଶୁଦ୍ଧ ଶରୀରରେ ଯଦି କୋଟି କୋଟି ସଂଖ୍ୟକ ଜୀବାଣୁ ପ୍ରବେଶ କରାଇଦିଆଯାଏ, ତେବେ ମଧ୍ୟ ସେମାନେ ସେଠାରେ ଯାଇ କୌଣସି କ୍ଷତି କରିପାରିବେ ନାହିଁ ବରଂ ଖାଦ୍ୟ ଅଭାବରେ ମରିଯିବେ, କାରଣ ସେଠାରେ ସେମାନଙ୍କ ଖାଇବା ଉପଯୋଗୀ ପଦାର୍ଥ ସେମାନଙ୍କୁ ମିଳିବ ନାହିଁ।

ଜୀବାଣୁ ମାନଙ୍କର ଜନ୍ମ ହେବା ଓ ବୃଦ୍ଧି ପ୍ରାପ୍ତ କରିବା ନିମନ୍ତେ ଉପଯୁକ୍ତ ସାମଗ୍ରୀ-ଅର୍ଥାତ ଆବର୍ଜନା ଯୁକ୍ତ ଶରୀର ଆବଶ୍ୟକ। ଯଦି ଶରୀର ଆବର୍ଜନା ମୁକ୍ତ ଥାଏ, ତେବେ ଜୀବାଣୁ ମାନେ ଶରୀରରେ ସେମାନଙ୍କର ବଂଶ ବୃଦ୍ଧି କରିପାରିବେ ନାହିଁ।

ଏହା ଦେଖାଯାଇଛି ଯେ, ପୃଥିବୀରେ ଯେତେପ୍ରକାର ରୋଗ ଜୀବାଣୁ ଅଛନ୍ତି ସେ ସମସ୍ତ ସୁସ୍ଥ ଶରୀରରେ ମିଳି ଥାନ୍ତି। କିନ୍ତୁ ଏହା ସତ୍ତ୍ୱେ ସେମାନେ ଶରୀରର କିଞ୍ଚିତ ମଧ୍ୟ କ୍ଷତି କରିପାରନ୍ତି ନାହିଁ।

ବାସ୍ତବରେ ଏପରି ମନୁଷ୍ୟ ମିଳିବେ ନାହିଁ ଯାହା ଶରୀରରେ ବିଭିନ୍ନ ରୋଗ ଜୀବାଣୁ ନାହାନ୍ତି।ଆମେ ଜୀବାଣୁ ମାନଙ୍କୁ ଶରୀରରୁ ଦୂରରେ ରଖି ପାରିବୁ ନାହିଁ। କାରଣ ପାଣି, ପବନ ଏବଂ ଭୋଜନ ଦ୍ୱାରା ପ୍ରତି ମୁହୂର୍ତ୍ତରେ ଲକ୍ଷ ଲକ୍ଷ ସଂଖ୍ୟକ ଜୀବାଣୁ ଆମ ଶରୀର ମଧ୍ୟକୁ ପ୍ରବେଶ କରିଥାଏ।

ତଥାପି ଆମେ ରୋଗରୁ ମୁକ୍ତ ରହିଥାଉ। କାରଣ ଯଦି ଶରୀର ମଧ୍ୟରେ ଏହି ଜୀବାଣୁ ମାନଙ୍କ ବଂଶ ବୃଦ୍ଧି ଏବଂ ପୋଷଣ ନିମନ୍ତେ ଅନୁକୂଳ ପରିସ୍ଥିତି ନଥିବ ତେବେ ରୋଗ ହେବ ନାହିଁ।

ମନୁଷ୍ୟ ଅନ୍ୟ ପ୍ରାଣୀ ମାନଙ୍କ ପରି ଏକ ଜୀବ। ଜନ୍ମ ହେବା, ବଢିବା, ଖାଇବା, ବଂଶବୃଦ୍ଧି, ମରିବା ଆଦି ବିଷୟରେ ତାର ଅନ୍ୟାନ୍ୟ ପ୍ରାଣୀ ମାନଙ୍କ ସହିତ ମେଳ ରହିଛି। ସେହି ଦୃଷ୍ଟିରୁ ରୋଗର କାରଣ ସମ୍ପର୍କରେ ମଧ୍ୟ ତାହାର ଅନ୍ୟ ପ୍ରାଣୀମାନଙ୍କ ସହିତ ମେଳ ରହିବା ଦରକାର।

ମାତ୍ର ଯାହା ଦେଖାଯାଏ, ମନୁଷ୍ୟେତର ପ୍ରାଣୀ ମାନଙ୍କର ଜୀବାଣୁ ପ୍ରତି ଆଦୌ ଭୟ ନଥାଏ। ସେମାନଙ୍କ ମଧ୍ୟରୁ ଅନେକ ଭୂଇଁରୁ, ପାଣିରୁ, ନାଳ ନର୍ଦ୍ଦମାରୁ, ଅଳିଆ ଗଦାରୁ ଏବଂ ଏଠୁ ସେଠୁ ଖାଦ୍ୟ ସଂଗ୍ରହ କରିଥାନ୍ତି। ସେମାନେ ଯେଉଁଠି ମନ ସେଠି ଗଡି ପଡ଼ନ୍ତି ଏବଂ ଚାଲ ବୁଲ କରନ୍ତି କିନ୍ତୁ କାହିଁ ଜୀବାଣୁ ତ ତାଙ୍କର କିଛି ଅନିଷ୍ଟ କରିପାରୁ ନାହିଁ।

ଅନେକ ଲୋକ ଜୀବନ ତମାମ ଖାଲି ପାଦରେ ଚାଲି ମଧ୍ୟ ତାଙ୍କ ଠାରେ ହୁକୱର୍ମ ର ସତ୍ତା ଦେଖିବାକୁ ମିଳେ ନାହିଁ,ଅଥଚ ଶୀତତାପ ନିୟନ୍ତ୍ରିତ ଗୃହରେ ଜୀବନ ତମାମ କଟାଇ, ଭୂମିରେ ଖାଲି ପାଦ କେବେହେଲେ ନପକାଇ ଏବଂ ସର୍ବଦା ସୁଷମ ଖାଦ୍ୟ ଖାଉଥିବା ବ୍ୟକ୍ତିର ଦେହରେ ମଧ୍ୟ ହୁକ ୱର୍ମ ହେବାର ଅନେକ ସମୟରେ ଦେଖା ଯାଇଥାଏ।

ସେହିପରି ଆମ ସମାଜରେ ଅନେକ ପାଗଳ ଅଛନ୍ତି ଯେଉଁମାନେ ଯାହା ତାହା ଯେଉଁଠୁ ସେଠୁ ପାଆନ୍ତି, ଖାଇଥାନ୍ତି। ଏପରିକି ନର୍ଦ୍ଦମାରୁ ଓ ଅଳିଆ ଗଦାରୁ ମଧ୍ୟ ପତ୍ର ଚାଟି ଖାଇବାର ଦେଖାଯାଏ। ଅନେକ ଭିକାରୀ ମଧ୍ୟ ରାସ୍ତା କଡରେ ଦୀନ ହୀନ ଅବସ୍ଥାରେ ଖରା କାକରରେ ପଡି ରହିଥିବା ଦେଖାଯାଏ। ମାତ୍ର ଏସବୁ ସତ୍ତ୍ୱେ ଜୀବାଣୁ ସେମାନଙ୍କର କୌଣସି କ୍ଷତି କରିପାରେ ନାହିଁ ଏବଂ ସେମାନେ ଦୀର୍ଘ ଦିନ ବଞ୍ଚି ରହିଥିବାର ଦେଖାଯାଏ।

ସେହିପରି ମଇଳା ସଫା କରିବା ଯେଉଁମାନଙ୍କର ଏକମାତ୍ର ପେଶା ଅଟେ ସେହି ମେହେନ୍ତର ମାନେ, ପ୍ରତି ପଦରେ ରୋଗ ଜୀବାଣୁଙ୍କୁ ଡରୁଥିବା ଲୋକଙ୍କ ଅପେକ୍ଷା ଅଧିକ ସୁସ୍ଥ ଥାନ୍ତି।

ତେଣୁ ସାରା ଜୀବନ ଜୀବାଣୁ ଭୟରେ କଟାଇବା ଅପେକ୍ଷା ଜୀବାଣୁ ମାନଙ୍କ ଖାଦ୍ୟ ଅର୍ଥାତ ଆବର୍ଜ୍ଜନା ଯେପରି ଆମ ଶରୀରରେ ଜମା ହୋଇ ନପାରେ ସେ ବ୍ୟବସ୍ଥା କରିବା ଉଚିତ।

ଏବଂ ଯଦି କେବେ ରୋଗ ହୋଇଯାଏ ତେବେ ଔଷଧ ଖାଇ ଜୀବାଣୁକୁ ମାରିବା ପାଇଁ ଚେଷ୍ଟା କରିବା ଅପେକ୍ଷା ବରଂ ଶରୀରରୁ ଯେପରି ଆବର୍ଜ୍ଜନା ଦୂର ହେବ ସେ ବ୍ୟବସ୍ଥା କରିବା ଉଚିତ।

କାରଣ ଶରୀରରୁ ଖାଦ୍ୟ (ଆବର୍ଜ୍ଜନା) ଦୂର ହୋଇଗଲେ, ଜୀବାଣୁ ଆପେ ଆପେ ଦୂର ହୋଇଯିବେ।

ଜୀବାଣୁ ନାଶକ ଔଷଧ ଗ୍ରହଣ କରିବା ଦ୍ୱାରା ରୋଗର ଲକ୍ଷଣ କେବଳ ଦୂର ହୋଇଥାଏ, ଯାହାକୁ ଆମେ ଭ୍ରମବଶତଃ ରୋଗମୁକ୍ତି ମନେକରିଥାଉ।ଏସବୁ ଔଷଧ ଶରୀରର ରୋଗ ପ୍ରତିକାରକ ଶକ୍ତିକୁ କ୍ଷୀଣ କରି ଦେଇଥାନ୍ତି। ପରିଣାମ ସ୍ୱରୂପ ଶରୀର ରୋଗ ନିବାରଣର ସକ୍ରିୟ ପ୍ରଯତ୍ନ (ଯାହାକୁ ଆମେ ରୋଗର ଲକ୍ଷଣ କହିଥାଉ) କୁ ଛାଡ଼ି ଦେଇଥାଏ। ଏହାଦ୍ୱାରା ଉଗ୍ର ରୋଗ ଦବି ଯାଇ ଜୀର୍ଣ୍ଣ ରୋଗରେ ପରିଣତ ହୋଇଯାଇଥାଏ। କିନ୍ତୁ ଆମେ ଭ୍ରମ ବଶତଃ ଏହାକୁ ଆରୋଗ୍ୟ ଲାଭ ମନେକରିଥାଉ।

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ରୋଗ

ପ୍ରସାଦ ତ୍ରିପାଠୀ

ରୋଗ ରୋଗ ରୋଗ
ଘୋଷି ହେଉଥିଲେ
ମାଡ଼ି ଆସିବ ସେ ରୋଗ
ରୋଗକୁ ଭୁଲିଲେ
ବାଟ ଖୋଲିଯିବ
କରିବା ପାଇଁ କି ଯୋଗ। (୧)
ସବୁ ରୋଗର ତ
ଗୋଟିଏ କାରଣ
ମନରେ ରଖିଲେ ଭୟ
ସୁସ୍ଥ ରହିବି ମୁଁ
ନିଶ୍ଚୟ ରହିବି
ଏଥିପାଇଁ କର ଲୟ। (୨)
ଶରୀର ଆମର
ଏପରି ପ୍ରସ୍ତୁତ
ତା'ସହିତ ମନ ପ୍ରାଣ
ରୋଗକୁ ସେମାନେ
ଘରେ ପାଳିଛନ୍ତି
ରଖିବାକୁ ଚିରଦିନ। (୩)
ମାତ୍ର ଯଦି ଆମେ
ଯୋଗ ସାଥେ ଥିବୁ
ରୋଗ ଚାଲିଯିବ ଡରି
କିଛି ବି ଆମର
କରି ପାରିବନି
ଚାଲିଥିବା ହସି ଖେଳି। (୪)

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ସମର୍ପଣ ମଣ୍ଡଳ ସ୍ତରୀୟ ଦ୍ୱିତୀୟ ଶ୍ରୀଅରବିନ୍ଦ ମେଡିକାଲ୍ ଆଲୋଚନାଚକ୍ର

୧୯.୧୦.୨୦୨୫ରିଖ ରବିବାର ଦିନ Samarpan ଉଦ୍ଘାଟନୀ ଉତ୍ସବରେ ମାନ୍ତ୍ରିକ ଆବାହନୀ ଗାନ କରିଥିଲେ ସୁଶ୍ରୀ ଅସମ୍ମିତା ପୋଦାର। ସ୍ୱାଗତ ଭାଷଣ ପ୍ରଦାନ କରିଥିଲେ ମଣ୍ଡଳ ସଂଗଠକ ଶ୍ରୀଯୁକ୍ତ ସୁରେଶ ଚନ୍ଦ୍ର ମିଶ୍ର। ଶ୍ରୀଅରବିନ୍ଦ ମେଡିକାଲ ପରିଷଦର ଉଦ୍ଦେଶ୍ୟ ସମ୍ପର୍କରେ ଆଲୋଚନା କରିଥିଲେ ଡକ୍ଟର ଶ୍ୟାମା କାନୁନ୍‌ଗୋ। ସମର୍ପଣ ମଣ୍ଡଳର ଅନ୍ୟତମ ସଂଗଠକ ଶ୍ରୀଯୁକ୍ତ ପ୍ରଶାନ୍ତ କୁମାର ସାଇଁ ସମର୍ପଣ ମଣ୍ଡଳର ବିବରଣୀ ପାଠ କରିଥିଲେ ଓ ଧନ୍ୟବାଦ ଜ୍ଞାପନ କରିଥିଲେ କୋରାପୁଟ ଜିଲ୍ଲା ସଂଗଠକ ଶ୍ରୀମତୀ ସୁଜାତା ପତି।

ଦ୍ୱିତୀୟ ଅଧିବେଶନ

ବିଷୟ :'ସୁମନ ସ୍ୱେଚ୍ଛାସେବି ଭାବେ ଶ୍ରୀଅରବିନ୍ଦ ପାଠଚକ୍ର ସଂଗଠକମାନଙ୍କ ଭୂମିକା ଓ ଦାୟିତ୍ୱ' ଆଲୋଚନା କରିଥିଲେ: ଶ୍ରୀଯୁକ୍ତ ସରୋଜ କୁମାର ପାଣିଗ୍ରାହୀ,

'ପୂର୍ଣ୍ଣାଙ୍ଗ ସ୍ୱାସ୍ଥ୍ୟ ଚେତନା ପ୍ରତି ସମାଜକୁ ଅନୁଭବକ୍ଷମ କରାଇବା' ବିଷୟରେ ଆଲୋଚନା କରିଥିଲେ ଅନୁଗୁଳ ମେଡିକାଲ CDM ଡ: ମଦନ ମୋହନ ପ୍ରଧାନ।

'ଦାନ୍ତର ସ୍ୱାସ୍ଥ୍ୟ ପାଇଁ ଆହ୍ୱାନ' Dental Health & Challenges ବିଷୟରେ SCB Dental College, କଟକର Head of the Department- ପ୍ରଫେସର ହେମାମାଳିନୀ ରଥ ଆଲୋଚନା କରିଥିଲେ ।

ବିଦ୍ୟାଳୟର ଛାତ୍ର ଛାତ୍ରୀଙ୍କ ପାଇଁ ଆଖିର ସ୍ୱାସ୍ଥ୍ୟ ଓ ପ୍ରତିକାର ପାଇଁ HOD, Dept. Ophthalmology SCBMC,Cuttack- ପ୍ରଫେସର ରମାମଣି ଦଳାଇ ଆଲୋଚନା କରିଥିଲେ ।

'କାନ,ନାକ ଓ ଗଳାର ସ୍ୱାସ୍ଥ୍ୟ', 'ବିଦ୍ୟାଳୟ ପିଲାମାନଙ୍କ ମାନସିକ ସ୍ୱାସ୍ଥ୍ୟ' ' Reproductive healthiness School Children ' 'ବିଦ୍ୟାଳୟ ଛାତ୍ରଛାତ୍ରୀମାନଙ୍କ ସାଧାରଣ ସ୍ୱାସ୍ଥ୍ୟ' ବିଷୟରେ ଯଥାକ୍ରମେ ପ୍ରଫେସର ସ୍ମୃତି ସାଇଁ,HOD Dept of ENT, ଡଃ ସିମା ପରିଜା, Associate professor, HOD, Dept of Psychiatry; ପ୍ରଫେସର ମଧୁସ୍ମିତା ପ୍ରଧାନ, HOD, O& G ଏବଂ ଡଃ ପ୍ରଶାନ୍ତ ପାତ୍ର Superintendent, SDH, Chhatrapur ପ୍ରମୁଖ ଆଲୋଚନା କରିଥିଲେ ।

ଅପରାହ୍ନ ଅଧିବେଶନରେ LIVING HEALTHY TO EVOLVE - ପ୍ରସଙ୍ଗରେ ପ୍ରଫେସର ଯୋଗେଶ ମୋହନଙ୍କ ଆଲୋଚନା ପରେ ଶ୍ରୀଯୁକ୍ତ ପ୍ରତାପ ଦେଓ୍ୱାନ, କୋରାପୁଟ ଜିଲ୍ଲା ସଙ୍ଗଠକ; ଶ୍ରୀଯୁକ୍ତ ବିଜୟାନନ୍ଦ ଦାସ ମାଲକାନାଗିର ଜିଲ୍ଲା ସଂଗଠକ, ଶ୍ରୀଯୁକ୍ତ ଗୋପିଚାନ୍ଦ ବାଘ, ଧର୍ମଗଡ, କଳାହାଣ୍ଡି ସଂଗଠକ; ଶ୍ରୀଯୁକ୍ତ ନବିନ ଚନ୍ଦ୍ର ଦିଶାରୀ, ନବରଙ୍ଗପୁର ଏବଂ ସୁଶ୍ରୀ ସଂଯୁକ୍ତା ମାଦଳା, ରାୟଗଡା ଜିଲ୍ଲା ପ୍ରମୁଖ ଯଥାକ୍ରମେ 'ବ୍ୟାୟାମ ଓ ଯୋଗ', ' ଖାଦ୍ୟ, 'କର୍ମ ଓ ଅଧ୍ୟୟନ, ' ବିଶ୍ରାମ ଓ ନିଦ୍ରା' ଏବଂ 'ଧ୍ୟାନ ଓ ନାମଜପ' ବିଷୟରେ ଆଲୋଚନା କରିଥିଲେ ।

ଶେଷରେ ଉଦ୍‌ଯାପନୀ ଉତ୍ସବରେ ଶ୍ରୀଯୁକ୍ତ ଗଣେଷ ପ୍ରସାଦ ଓ ଶ୍ରୀଯୁକ୍ତ ସୁରେଶ ଚନ୍ଦ୍ର ମିଶ୍ରଙ୍କ ଅଧ୍ୟକ୍ଷତାରେ, ପ୍ରଫେସର ତୋଫାନ ପତିଙ୍କ ଆଲୋଚନା ପରେ 'ପୂର୍ଣ୍ଣାଙ୍ଗ ସ୍ୱାସ୍ଥ୍ୟ- ରୁପାନ୍ତର ପାଇଁ ଏକ ସ୍ପ୍ରିଙ୍ଗ୍ ବୋର୍ଡ' ବିଷୟରେ ପ୍ରଫେସର ଆଲୋକ ପାଣ୍ଡେ ଅଭିଭାଷଣ ରଖିଥିଲେ । ପ୍ରଫେସର ଯୋଗେଶ ମୋହନଙ୍କ ଦ୍ୱାରା guided meditation କରାଯିବାପରେ ଉଦଯାପନୀ ସଙ୍ଗୀତ ପରିବେଷଣ କରିଥିଲେ ସମର୍ପଣ ମଣ୍ଡଳ ସଙ୍ଗଠକ ଶ୍ରୀଯୁକ୍ତ ସୁରେଶ ଚନ୍ଦ୍ର ମିଶ୍ର। ସମର୍ପଣ ଓଡ଼ ରେ ଉକ୍ତ କାର୍ଯ୍ୟକ୍ରମ ପରିଚାଳନା କରିଥିଲେ ଅନ୍ୟତମ ସମର୍ପଣ ମଣ୍ଡଳ ସଙ୍ଗଠକ ଶ୍ରୀଯୁକ୍ତ ପ୍ରଶାନ୍ତ କୁମାର ସାଇଁ ।

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ସ୍ୱାସ୍ଥ୍ୟ ସେବା : ୨୮.୦୯.୨୦୨୫ ମାଥାଲପୁଟ ଗୋଷ୍ଠୀ ସ୍ୱାସ୍ଥ୍ୟକେନ୍ଦ୍ରର RBST Team କୋଲାବନଗର ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର ପରିଦର୍ଶନ କରି ସମସ୍ତ ଛାତ୍ରଛାତ୍ରୀମାନଙ୍କୁ ସ୍ୱାସ୍ଥ୍ୟସେବା ଯୋଗାଇ ଦେଇଥିଲେ।

ପ୍ରାଥମିକ ଚିକିତ୍ସା: ୧୧.୧୦.୨୦୨୫ରିଖ କୋଟପାଡ

ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ରର ଛାତ୍ରଛାତ୍ରୀମାନଙ୍କୁ ପ୍ରାଥମିକ ଚିକିତ୍ସା କିପରି ଦିଆଯିବ ଆଲୋଚନା ସହ ବ୍ୟବହାରିକ ପ୍ରୟୋଗ କରାଯାଇଥିଲା।

କୈଶୋର ଅବସ୍ଥା କାର୍ଯ୍ୟକ୍ରମ:୮.୧୧.୨୦୨୫ରିଖରେ କୋଟପାଡ ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ରର ଷଷ୍ଠ ଶ୍ରେଣୀରୁ ଦଶମ ଶ୍ରେଣୀ ଛାତ୍ର ଛାତ୍ରୀଙ୍କ ମଧ୍ୟରେ କୈଶୋର ଅବସ୍ଥାର ଯତ୍ନ ବିଷୟରେ ଶ୍ରୀମତୀ ସୁନିତା ରାଣୀ ବ୍ରହ୍ମା ଓ ଶ୍ରୀମତୀ ଅମରେଶ୍ୱରୀ ପଟ୍ଟନାୟକ ଆଲୋଚନା କରିଥିଲେ।

ସିକିଲିନ୍ ପରୀକ୍ଷା:୧୨.୧୧.୨୦୨୫ରିଖ ଦାମନଯୋଡି ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ରର ଶ୍ରୀମତୀ ସଞ୍ଜୁଲତା ଲେଙ୍କା ଓ ସୁଶ୍ରୀ ଶେଫାଳିକା ପଟ୍ଟନାୟକଙ୍କ ସହଯୋଗରେ କୁନ୍ଦୁଲି CHC ସ୍ୱାସ୍ଥ୍ୟକର୍ମୀ ମାନଙ୍କ ଦ୍ୱାରା DBS KIT ମାଧ୍ୟମରେ ଛାତ୍ରଛାତ୍ରୀଙ୍କ ସିକିଲିନ୍ ଟେଷ୍ଟ କରାଯାଇଥିଲା।

ରକ୍ତ ପରୀକ୍ଷା: କୋଲାବନଗର ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର ଠାରେ ୨୧.୧୧.୨୦୨୫ ରିଖ ଦିନ ଛାତ୍ରଛାତ୍ରୀମାନଙ୍କ ରକ୍ତ ପରୀକ୍ଷା ପାଇଁ ରକ୍ତ ନମୁନା ସଂଗ୍ରହ କରାଯାଇଥିଲା।

କୃମି ନାଶକ ଦିବସ : ୧୦.୦୨.୨୦୨୬, ୧୭.୦୨.୨୦୨୬,୧୦.୮.୨୦୨୬, ୧୭.୦୮.୨୦୨୬ ଓ ୧୮.୦୮.୨୦୨୬ ରେ କୋଟପାଡ, କୋରାପୁଟ, ଦାମନଯୋଡି ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର ମାନଙ୍କରେ କୃମି ନାଶକ ଔଷଧ ବଣ୍ଟନ କରାଯାଇଥିଲା। କୋଟପାଡ ଶିକ୍ଷାକେନ୍ଦ୍ରରେ ଶ୍ରୀଯୁକ୍ତ ଦିପକ କୁମାର ପ୍ରହରାଜ ଓ ଅମରେଶ୍ୱରୀ ପଟ୍ଟନାୟକ, କୋରାପୁଟ ଶିକ୍ଷାକେନ୍ଦ୍ରରେ ଶ୍ରୀମତୀ ରେବତୀ ପାତ୍ର ଓ ଦାମନଯୋଡି ଶିକ୍ଷାକେନ୍ଦ୍ରର ଶେଫାଳିକା ପଟ୍ଟନାୟକ ଓ ଶ୍ରୀମତୀ ସଞ୍ଜୁଲତା ଲେଙ୍କା ପ୍ରମୁଖ କୃମି ନାଶକ ଔଷଧର ଉପାଦେୟତା, ସଚ୍ଛ ପରିବେଶ, ହାତ ଓ ପୋଷାକର ସଚ୍ଛତା ବିଷୟରେ ଆଲୋଚନା କରିଥିଲେ।

ଅଭିଭାବକ ସଚେତନତା କାର୍ଯ୍ୟକ୍ରମ: ଗତ ତା୨୮.୦୩.୨୦୨୬ ରିଖରେ କୋଟପାଡ ଠାରେ ୧୪ ବର୍ଷରୁ ଅଧିକ ବୟସ ଝିଅମାନଙ୍କ ଅଭିଭାବକମାନଙ୍କୁ ଡକାଇ ଜରାୟୁ କ୍ୟାନସର ପ୍ରତିରୋଧକ ଟିକା, କିଶୋର ଅବସ୍ଥାର ବିଭିନ୍ନ ଦିଗ ବିଷୟରେ, ସୁସ୍ଥ ପରିବେଶଜନିତ ସଚେତନତା ବିଷୟରେ ଶ୍ରୀମତୀ ଅମରେଶ୍ୱରୀ ପଟ୍ଟନାୟକ ଓ ଶ୍ରୀଯୁକ୍ତ ଦିପକ ପ୍ରହରାଜ ଆଲୋଚନା କରିଥିଲେ।

ସଚେତନତା କାର୍ଯ୍ୟକ୍ରମ : ୯.୪.୨୦୨୬ ଓ ତ୧୪.୭.୨୦୨୬ ଯଥାକ୍ରମେ ଦାମନଯୋଡି ଓ କୋରାପୁଟ ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ରଠାରେ ଅଷ୍ଟମ ଠାରୁ ଦଶମ ଶ୍ରେଣୀ ପିଲାମାନଙ୍କ ମଧ୍ୟରେ HPV vaccine ବିଷୟରେ ସଚେତନ କାର୍ଯ୍ୟକ୍ରମ କରାଯାଇ ଥିଲା। କୋରାପୁଟର ଗାନ୍ଧୀନଗର ଆୟୁଷ୍ମାନ ଆରୋଗ୍ୟ ମନ୍ଦିର ତରଫରୁ ଏହି ସଚେତନ କାର୍ଯ୍ୟକ୍ରମ କରାଯାଇ ଥିଲା।

ହିମୋଗ୍ଲୋବିନ ପରୀକ୍ଷା : କୋଟପାଡ, କୋରାପୁଟ, ଦାମନଯୋଡି ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର ପିଲାମାନଙ୍କର ହିମୋଗ୍ଲୋବିନ ଟେଷ୍ଟ ଓ ଝିଅମାନଙ୍କ ଋତୁସ୍ରାବ କ'ଣ, କାହିଁକି ଓ ଏହିସମୟରେ କିପରି ସଚେତନ ହେବାକୁ ହେବ ଏହି ବିଷୟଗୁଡ଼ିକ ଝିଅମାନଙ୍କ ସ୍ୱତନ୍ତ୍ର ଆଲୋଚନା କରାଯାଇଅଛି।

ମାଲକାଗିରି ଜିଲ୍ଲା ଶ୍ରୀଅରବିନ୍ଦ ମେଡିକାଲ ଆସୋସିଏସନ

୨୨.୩.୨୬ରେ ସ୍ଥାନୀୟ ସରସ୍ୱତୀ ଶିଶୁ ବିଦ୍ୟାମନ୍ଦିର ପରିସରରେ, ମାଲକାନାଗିରି ଶ୍ରୀଅରବିନ୍ଦ ପାଠଚକ୍ର ସଂଗଠନ ଆନୁକୂଲ୍ୟରେ ଶ୍ରୀଅରବିନ୍ଦ ମେଡ଼ିକାଲ ଆସୋସିଏସନ୍‌ର ଏକ ସ୍ୱାସ୍ଥ୍ୟ ସମ୍ମିଳନୀ ଅନୁଷ୍ଠିତ ହୋଇଯାଇଛି। ଏଥିରେ "ପୂର୍ଣ୍ଣାଙ୍ଗ ନିରାମୟତା ଓ ପୂର୍ଣ୍ଣାଙ୍ଗ ଯୋଗ" ସମ୍ପର୍କରେ ଆଲୋଚନା କରାଯାଇଥିଲା। ଶ୍ରୀ ବିଜୟାନନ୍ଦ ଦାସ, ଡ.ଦୁର୍ଗା ପ୍ରସାଦ ରାଜ, ଡ.ପ୍ରପତି ମହାରଣା, ବକ୍ତାମାନେ ପୂର୍ଣ୍ଣାଙ୍ଗ ନିରାମୟତା, ଅତିମାନସ ରୂପାନ୍ତର ନିମନ୍ତେ ଶରୀରର ସାଧନା ସମ୍ପର୍କରେ ଆଲୋଚନା କରିଥିଲେ। ଶ୍ରୀ ଦିଲୀପ ଓଝା ପରିଚାଳନା କରିଥିଲେ। ଶ୍ରୀ ବିଚିତ୍ରାନନ୍ଦ ରାଉତ ପ୍ରାରମ୍ଭିକ ସୂଚନା ପ୍ରଦାନ ସହ ସ୍ୱାଗତ କରିଥିଲେ।

କାର୍ଯ୍ୟକ୍ରମରେ ସିତୁନ ବେହେରା, ସନ୍ତୋଷ ପତି,ଗଣେଶ ଜେନା,କଳ୍ପତରୁ ନାୟକ, ଭାସ୍କର ରାଓ, ଶ୍ରୀ ରବିନ୍ଦ୍ର ମହାରଣା,ଲକ୍ଷ୍ମୀଧର ଭାଇ, ବସନ୍ତ ରଣା,ବଂଶୀଧର ଭାଇ, ସଞ୍ଜୟ ଭାଇ, ଅଶୋକ ଜଂଶରାଲି ଭାଇ,ପଦ୍ମାଅପା, ଶିବଲକ୍ଷ୍ମୀ ଅପା,ଓ କାଲିମେଳା, ବାଲିମେଳା, ଜିଲ୍ଲାର ବିଭିନ୍ନ ପାଠଚକ୍ରର ଅପା ଭାଇ ମାନେ ଯୋଗଦେଇଥିଲେ।

ସ୍ୱାସ୍ଥ୍ୟ ଶିବିରରେ ସ୍ୱାସ୍ଥ୍ୟ ପରୀକ୍ଷା କରାଯାଇ ହୋମିଓପାଥିକ ଔଷଧ ବଣ୍ଟନ, ରକ୍ତ ମଧୁମେହ ପରୀକ୍ଷା, ରକ୍ତ ଚାପ ପରୀକ୍ଷା ଓ ବଡ଼ି ମାସ ଇଣ୍ଡେକ୍ସ ପରୀକ୍ଷା କରାଯାଇ, ଉତ୍ତମ

ସ୍ୱାସ୍ଥ୍ୟ ରକ୍ଷା ନିମନ୍ତେ ଅଭିଜ୍ଞ ପରାମର୍ଶ ଦାତାମାନେ ପରାମର୍ଶ ଦେଇଥିଲେ। ମା'ଙ୍କୁ କୃତଜ୍ଞତା ଜ୍ଞାପନ କରାଯାଇ କାର୍ଯ୍ୟକ୍ରମ ସାଙ୍ଗ କରାୟାଥିଲା।

୩) ନବରଙ୍ଗପୁର ଜିଲ୍ଲା ଶ୍ରୀଅରବିନ୍ଦ ମେଡିକାଲ ଆସୋସିଏସନ କାର୍ଯ୍ୟକ୍ରମ

ନବରଙ୍ଗପୁର ଜିଲ୍ଲା ଅନ୍ତର୍ଗତ ଖାତିଗୁଡା ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷା କେନ୍ଦ୍ରର ୨୮.୩.୨୦୨୬ରେ ଶ୍ରୀଅରବିନ୍ଦ ମେଡିକାଲ ଆସୋସିଏସନର ବାର୍ଷିକ ସମ୍ମିଳନୀ ଅନୁଷ୍ଠିତ ହୋଇଯାଇଛି । ଏଥିରେ 'ସଚେତନ ଜୀବନ ହିଁ ନିରୋଗ ଜୀବନ' ବିଷୟ ଉପରେ ଶ୍ରୀ ନବୀନ ଚନ୍ଦ୍ର ଦିଶାରୀ ଆଲୋଚନା କରିଥିଲେ । ତତ୍ ସହିତ ବିଭିନ୍ନ ରୋଗର ପ୍ରତିକାର ତଥା ପ୍ରତିଷେଧକ ବ୍ୟବସ୍ଥା ଆୟୁର୍ବେଦିକ ଚିକିତ୍ସା ମାଧ୍ୟମରେ କିପରି କରାଯାଇ ପାରିବ, ତା'ର ଏକ ପ୍ରଶ୍ନୋତ୍ତର ଭିତ୍ତିକ କାର୍ଯ୍ୟ କ୍ରମର ଦିଗଦର୍ଶନ ଦେଇଥିଲେ । ଶ୍ରୀ ସନ୍ତୋଷ କୁମାର ଗାହାଣ ସ୍ୱାସ୍ଥ୍ୟ ଏବଂ ଆଧ୍ୟାତ୍ମିକ ଉପଲବ୍ଧି ଦିଗରେ ସମସ୍ତଙ୍କ କର୍ତ୍ତବ୍ୟ ଉପରେ ଆଲୋଚନା କରିଥିଲେ । ସୁମନ କାର୍ଯ୍ୟକ୍ରମ ମାଧ୍ୟମରେ ଗର୍ଭବତୀ ମହିଳା ତଥା ଶିଶୁ ମାନଙ୍କ ସ୍ୱାସ୍ଥ୍ୟ ସଚେତନତା ତଥା ଶ୍ରୀଅରବିନ୍ଦ ପାଠଚକ୍ରର ପ୍ରସାର ପାଇଁ ଏକ ପ୍ରସ୍ତୁତି ସମ୍ପର୍କରେ ଶ୍ରୀ ସୁରେଶ ଚନ୍ଦ୍ର ମିଶ୍ର ଆଲୋକପାତ କରିଥିଲେ । ପରିଶେଷରେ ଅଧକ୍ଷା ସ୍ୱର୍ଣ୍ଣଲତା ମହାକୁଡ କୃତଜ୍ଞତା ଅର୍ପଣ କରିଥିଲେ।

ନବରଙ୍ଗପୁର ଜିଲ୍ଲାର ପ୍ରାୟ ପ୍ରତ୍ୟେକ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ରରେ ସରକାରୀ ସ୍ୱାସ୍ଥ୍ୟ ବିଭାଗ ଆନୁକୁଲ୍ୟରେ dewarming tablet ବଣ୍ଟନ ଓ ଟୀକାକରଣ ନିୟମିତ ଭାବେ କରାଯାଇ ଆସୁଅଛି। Folic Acid ବଣ୍ଟନ ହୋଇଛି।

୨୦୨୬-୨୭ କାର୍ଯ୍ୟକ୍ରମରେ ସୁମନ ସ୍ୱେଚ୍ଛାସେବୀ ମାନଙ୍କ ଗହଣରେ ଏକ ଜିଲ୍ଲାସ୍ତରୀୟ ପାଠଚକ୍ର କରାଯାଇ ବିଶେଷତଃ ଅଧିକ ସଂଖ୍ୟାରେ ଗର୍ଭବତୀ ମାଆ ଭଉଣୀମାନଙ୍କୁ ଏକତ୍ରିତ କରାଇ ସଚେତନତା ପାଇଁ ସଂକଳ୍ପ କରାଯାଇଛି।

୪) କଳାହାଣ୍ଡି ଜିଲ୍ଲା ଶ୍ରୀଅରବିନ୍ଦ ମେଡିକାଲ ଆସୋସିଏସନ

୩୦.୦୧.୨୦୨୬ ରେ କଳାହାଣ୍ଡି ଜିଲ୍ଲାର ଜୁନାଗଡ ବ୍ଲକସ୍ଥିତ ବୋରଗୁଡା ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ରଠାରେ ଜିଲ୍ଲା ସ୍ତରୀୟ ସ୍ୱାସ୍ଥ୍ୟ ମେଳା ଅନୁଷ୍ଠିତ ହୋଇଯାଇଛି। ଏହି କାର୍ଯ୍ୟକ୍ରମର ଆୟୋଜକ ତଥା ସଭାପତି ଶ୍ରୀଯୁକ୍ତ ପୂର୍ଣ୍ଣଚନ୍ଦ୍ର ପାଢୀ ଏହାକୁ ଉଦ୍‌ଘାଟନ କରିଥିଲେ। 'ଉତ୍ତମ ସ୍ୱାସ୍ଥ୍ୟ କିପରି ଦିବ୍ୟ ଜୀବନ ଗଢିବାରେ ସହାୟକ ହୋଇପାରେ' ବିଷୟଟିକୁ ସୁନ୍ଦର ଭାବେ ଆଲୋଚନା କରିଥିଲେ। କଳାହାଣ୍ଡି ଜିଲ୍ଲାର ପାଠଚକ୍ରର ଅପାଭାଇ, ସୁମନ ଭଲେଣ୍ଟିୟର, ଶିକ୍ଷାକେନ୍ଦ୍ରର ଅପାଭାଇ ,ଛାତ୍ରଛାତ୍ରୀ ତଥା ବୋରଗୁଡା ଗ୍ରାମବାସୀ ବୃନ୍ଦ ଏହି କାର୍ଯ୍ୟକ୍ରମରେ ଉପସ୍ଥିତ ରହିଥିଲେ।

ତା୧୨.୦୨.୨୦୨୬ରିଖ ଦିନ କେସିଙ୍ଗା ବ୍ଲକର ବୋରିଆ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ରରେ ସୁମନ ଭଲେଣ୍ଟିୟର ପ୍ରଶିକ୍ଷଣ କାର୍ଯ୍ୟକ୍ରମ ଅନୁଷ୍ଠିତ ହୋଇ ଥିଲା । କେସିଙ୍ଗା PSC ର ଡାକ୍ତରମାନେ ଉପସ୍ଥିତ ରହି ସୁମନ ଭଲେଣ୍ଟିୟର ମାନଙ୍କୁ ତାଲିମ ପ୍ରଦାନ କରିଥିଲେ।

୫) ରାୟଗଡା ଜିଲ୍ଲା ଶ୍ରୀଅରବିନ୍ଦ ମେଡିକାଲ ଆସୋସିଏସନ

ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର,ମାତୃ ବିହାର, ବାରିଝୋଲା ଠାରେ ସରକାରଙ୍କ ତରଫରୁ ୨୦୦ ମଶାରୀ, ପ୍ରତି ୬ମାସରେ କୃମି ବଟିକା ଓ ପ୍ରତି ୩ ମାସରେ ଜଈଝକ ଟିମ ଆସି ପିଲାଙ୍କ Hemoglobin ଟେଷ୍ଟ କରନ୍ତି, Sicking test ଓ ଅନ୍ୟ Test ମଧ୍ୟ କରନ୍ତି, Height, weight ନିଅନ୍ତି । ପିଲାଙ୍କ ସ୍ୱାସ୍ଥ୍ୟ ଅବସ୍ଥାକୁ Referal କରନ୍ତି ଓ ତାଙ୍କର ଗାଡ଼ି ପଠାଇ ଶୁକ୍ରବାର ଦିନ ପିଲାଙ୍କୁ ହେଡ଼ କ୍ୱାଟର ହସପିଟଲ କୁ ନେଇ specilist ମାନଙ୍କୁ ଦେଖାଇ ଔଷଧ ଦେଇ ପୁଣି ଗାଡ଼ିରେ ଆଣି ଛାଡ଼ିଦିଅନ୍ତି । Iron folic ବଟିକା କିନ୍ତୁ ଦେଇ ନାହାନ୍ତି । ୫ମ ଓ ୧୦ମ ଶ୍ରେଣୀ ପିଲାଙ୍କୁ ଟିଟାନସ ଇଞ୍ଜକସନ ଦେଇଛନ୍ତି । ଇଘଗ ଦିଦି ମଝିରେ ମଝିରେ ଆସି ପିଲାଙ୍କ ସ୍ୱାସ୍ଥ୍ୟ ଅବସ୍ଥା ତଦାରଖ କରି ଯାଆନ୍ତି ।

୩.୦୮.୨୬ - ଜେ.କେ. କାଗଜକଳ ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର, ରାୟଗଡା ସହର ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର, ଆମ୍ବାଦୋଳା ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର,ଓ ଗୁଣୁପୁର ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର ମାନଙ୍କରେ ସ୍ୱାସ୍ଥ୍ୟ ସଚେତନତା କାର୍ଯ୍ୟକ୍ରମ (awareness programme) କରାଯାଇଛି ।

୧୦ ରୁ ୧୨ ଅଗଷ୍ଟ ୨୦୨୬ ତାରିଖ ମଧ୍ୟରେ- କୃମି ଔଷଧ ଛାତ୍ରଛାତ୍ରୀ ମାନଙ୍କୁ ବଣ୍ଟନ କରାଯାଇଥିଲା ।

ତରୁଣ ତାଣ୍ଡି ଓ ଶର୍ମିଳା ବେହେରା ରାୟଗଡା ସହର ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର ତରଫରୁ ସୁମନ ଭଲେଣ୍ଟିୟର ଭାବରେ କାର୍ଯ୍ୟ କରିବାପାଇଁ ସହମତି ପ୍ରଦାନ କରିଛନ୍ତି ।

❖

ଆସ୍ଥା ଜୋନାଲସ୍ତରୀୟ ଶ୍ରୀଅରବିନ୍ଦ ମେଡ଼ିକାଲ୍ ଆସୋସିଏସନର ବାର୍ଷିକ ସମ୍ମିଳନୀ - ୨୦୨୫

ନଭେମ୍ବର ୧୫ ଓ ୧୬, ୨୦୨୫

ନଭେମ୍ବର ୧୫ ଓ ୧୬, ୨୦୨୫ ଦିନ ଭଦ୍ରକ ଜିଲ୍ଲାର ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର, ମାତୃପଲ୍ଲୀ, ଚରମ୍ପାଠାରେ ଆସ୍ଥା ଜୋନାଲ ସ୍ତରୀୟ ଶ୍ରୀଅରବିନ୍ଦ ମେଡ଼ିକାଲ ଆସୋସିଏସନର ବାର୍ଷିକ ସମ୍ମିଳନୀ ଅନୁଷ୍ଠିତ ହୋଇଯାଇଛି। ଏଥିରେ ପ୍ରଥମ ଅଧିବେଶନରେ ଡ. ଗୋଲକ ବିହାରୀ ସାହୁ ଓ ନିରୁପମା ନାୟକଙ୍କ ଅଧ୍ୟକ୍ଷତାରେ ଡା: କିଶୋର ଚନ୍ଦ୍ର ମହାପାତ୍ର ଓ ବିପିନ୍ ବିହାରୀ କରଙ୍କ ଦ୍ୱାରା "ପ୍ରାଥମିକ ଚିକିତ୍ସା ଓ ଆକସ୍ମିକ ଜୀବନରକ୍ଷା ପଦ୍ଧତି" କୁ ସରଳଭାବେ ଉପସ୍ଥାପନ କରାଯାଇଥିଲା। ଏହାପରେ ଉଦ୍‌ଘାଟନୀ କାର୍ଯ୍ୟକ୍ରମ ଜୋନ୍ ଆବାହକ ଶଶୀକାନ୍ତ ଭୋଇଙ୍କ ଅଧ୍ୟକ୍ଷତାରେ ଅନୁଷ୍ଠିତ ହୋଇଯାଇଥିଲା। ଏଥିରେ ମୁଖ୍ୟ ଅତିଥି IMA President ଡା: ହରେକୃଷ୍ଣ ନାୟକ, ବିଶିଷ୍ଟ ଅତିଥି CDMO, Bhadrak ଡ: ସୁଧିର ନାୟକ, ସମ୍ମାନୀତ ଅତିଥି ଭାବେ ଜିଲ୍ଲା ଆବାହକ ପ୍ରଦୀପ କୁମାର ଜେନା, ଡ.ଗୋଲକ ବିହାରୀ ସାହୁ ଯୋଗଦେଇ "ଶ୍ରୀଅରବିନ୍ଦଙ୍କ ପୂର୍ଣ୍ଣଯୋଗରେ ମେଡ଼ିକାଲ" ସମ୍ମିଳନୀ ସମ୍ପର୍କରେ ଆଲୋକପାତ କରିଥିଲେ। ଏହାପରେ "ଆମ ଦୈନନ୍ଦିନ ଜୀବନଶୈଳୀ ପାଇଁ ସ୍ୱାସ୍ଥ୍ୟ ଓ ଖାଦ୍ୟ" ସମ୍ପର୍କରେ ପ୍ରଦୀପ କୁମାର ଧଳ ଆଲୋଚନା କରିଥିଲେ। ଉକ୍ତ ଆଲୋଚନାରେ ଅଂଶଗ୍ରହଣକାରୀ ମଧ୍ୟ ସକ୍ରୀୟ ଭାଗ ନେଇଥିଲେ। ଅପରାହ୍ନ ଅଧିବେଶନରେ ଜୟନ୍ତୀ ସର୍ଦ୍ଦାର ଓ ଡ: ବାସୁଦେବ ବାରିକଙ୍କ ଅଧ୍ୟକ୍ଷତାରେ ବିଶେଷଜ୍ଞ ଡାକ୍ତରମାନଙ୍କ ଦ୍ୱାରା ବିଦ୍ୟାଳୟ ଛାତ୍ରଛାତ୍ରୀଙ୍କ ନିମନ୍ତେ ଆଖି, ଦାନ୍ତ, ମାନସିକ ସ୍ୱାସ୍ଥ୍ୟ, ENT, ଶିଶୁ ଓ ପ୍ରଜନନ ଆଦି ବିଷୟବସ୍ତୁଗୁଡ଼ିକ ଉପରେ ଭିଡ଼ିଓ ପ୍ରଦର୍ଶନ କରି ଡା. କିଶୋର ଚନ୍ଦ୍ର ମହାପାତ୍ର ବୁଝାଇଥିଲେ।

ସ୍ୱାସ୍ଥ୍ୟ ସଚେତନତା ଶିବିର, ପପଙ୍ଗ







ଦ୍ୱିତୀୟ ଶ୍ରୀଅରବିନ୍ଦ ମେଡିକାଲ୍ ଏସୋସିଏସନ୍ (ଶାନ୍ତି ମଣ୍ଡଳ) ବାର୍ଷିକ କାର୍ଯ୍ୟକ୍ରମ

ଅଗଷ୍ଟ ୮ ଓ ୯ ତାରିଖ, ୨୦୨୬ ମସିହା, ପାଟଣାଗଡ଼

ଶ୍ରୀଯୁକ୍ତ ମଦନ ମୋହନ ଦାନୀ (ଶାନ୍ତି ମଣ୍ଡଳ ଆବାହକ)

ବ୍ୟକ୍ତିଗତ ପ୍ରଚେଷ୍ଟା ଓ ଦିବ୍ୟ ସଂକଳ୍ପ

ଏଥର ସୁବର୍ଣ୍ଣପୁର ଜିଲ୍ଲାର ସାଂଗଠନିକ ପ୍ରସ୍ତୁତି ବୈଠକରେ ସ୍ଥିର ହେଲା ଜିଲ୍ଲା ସ୍ୱାସ୍ଥ୍ୟ କର୍ମଶାଳା ବୀରମହାରାଜପୁର ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣାଙ୍ଗ ଶିକ୍ଷା କେନ୍ଦ୍ରରେ ଅଗଷ୍ଟ ୨ ତାରିଖ ରବିବାର ଦିନ ଅନୁଷ୍ଠିତ ହେବ। କିନ୍ତୁ ତା' ବହୁ ପୂର୍ବରୁ ଅଗଷ୍ଟ ମାସ ଦ୍ୱିତୀୟ ସପ୍ତାହାନ୍ତ ୮ ଓ ୯ ତାରିଖରେ ମଣ୍ଡଳସ୍ତରୀୟ SAMA ସମ୍ମିଳନୀ କରିବା ସ୍ଥିର ହୋଇଥାଏ। ଲଗାଏତ ଦୁଇଟି ରବିବାର ସ୍ୱାସ୍ଥ୍ୟ କାର୍ଯ୍ୟକ୍ରମ କରାଇବା ନିଶ୍ଚୟ ଏକ ଆହ୍ୱାନ। ୨ ଅଗଷ୍ଟ ଦିନ ଜିଲ୍ଲାସ୍ତରୀୟ କର୍ମଶାଳା, ସୁବର୍ଣ୍ଣପୁର ଜିଲ୍ଲାର ଦୁଇଜଣ ବରିଷ୍ଠ ଚିକିତ୍ସକ ଡାକ୍ତର ରମେଶ ଚନ୍ଦ୍ର ସାଇଁ ଓ ଡାକ୍ତର ଅମିତ କୁମାର ଦଳେଇଙ୍କ ଯୋଗଦାନ ଓ ଜିଲ୍ଲାର କର୍ମୀ ଭାଇ ଅପାମାନଙ୍କ ସହଯୋଗ କ୍ରମେ ଶେଷ ହେଲା।

ଅଗଷ୍ଟ ୩ ତାରିଖ ମୁଁ ପ୍ରାର୍ଥନା କରୁଥାଏ – ମା' ଏହି ଶାନ୍ତି ମଣ୍ଡଳସ୍ତରୀୟ କାର୍ଯ୍ୟକ୍ରମଟି କିପରି ସୁଚାରୁ ରୂପେ ସମ୍ପନ୍ନ ହେବ। ପୂର୍ବରୁ ଏହି କାର୍ଯ୍ୟକ୍ରମ ବିଷୟ ବଲାଙ୍ଗୀର ଓ ନୂଆପଡ଼ା ଜିଲ୍ଲା କର୍ମକର୍ତ୍ତାଙ୍କୁ ଜୁଲାଇ ମାସ ସାଙ୍ଗଠନିକ ସମ୍ମିଳନୀରେ ସୂଚିତ କରିଥିଲି ଏବଂ କାର୍ଯ୍ୟକ୍ରମ ସ୍ଥାନ ପାଟଣାଗଡ଼ ଶିକ୍ଷା କେନ୍ଦ୍ର ବୋଲି ସ୍ଥିର କରିଥିଲି। ପାଟଣାଗଡ଼ ଶିକ୍ଷାକେନ୍ଦ୍ର କାର୍ଯ୍ୟକ୍ରମକୁ ସଫଳ ରୂପାୟନ ନିମିତ୍ତ ଆଗ୍ରହୀ ହୋଇ ସାହାଯ୍ୟ କରିଥିଲେ।

ସ୍ଥାନୀୟ ବରିଷ୍ଠ ବିଶେଷଜ୍ଞ ଚିକିତ୍ସକମାନଙ୍କ ସହିତ ଯୋଗାଯୋଗ କରି ସମୟ ନିର୍ଘଣ୍ଟ ସ୍ଥିର କରିଥିଲେ। ପ୍ରକୃତ ସମସ୍ୟା ହେଉଛି ସମସ୍ତ ଚିକିତ୍ସକବୃନ୍ଦ ଆମ କର୍ମଧାରା ସହ ସମ୍ପୃକ୍ତ ନଥାନ୍ତି ଏବଂ ଦ୍ୱିତୀୟ ସପ୍ତାହାନ୍ତ ସମୟ (ସରକାରୀ ଛୁଟି) ଘରୋଇ ଚିକିତ୍ସା ପାଇଁ ନିଜ ପାଇଁ ସମୟ ସ୍ଥିର କରି ରଖୁଥାନ୍ତି ଏବଂ ରୋଗୀମାନଙ୍କ ପରାମର୍ଶ ସମୟ ମଧ୍ୟ ଆଗତୁରା ସ୍ଥିର କରନ୍ତି। ଏଣୁ ଆମ କାର୍ଯ୍ୟସୂଚୀ ଅନୁସାରେ ଯୋଗଦେବା ସେମାନଙ୍କ ପାଇଁ କଷ୍ଟକର ହୋଇଥାଏ । ଯଦିଓ ବ୍ୟକ୍ତିଗତ ଭାବେ ସେମାନଙ୍କର ସହଯୋଗ ନିଶ୍ଚୟ ପ୍ରଶଂସନୀୟ, ଏସବୁ ମଧ୍ୟରେ ଆମ ସଙ୍ଗଠନ ସହ ଗଭୀର ସମ୍ପର୍କ ରଖିଥିବା ବଲାଙ୍ଗୀର ମେଡିକାଲ କଲେଜର ସ୍ତ୍ରୀ ଓ ପ୍ରସୂତି ବିଭାଗର ମୁଖ୍ୟ ଡାକ୍ତର ମଧୁସ୍ମିତା ପ୍ରଧାନ ଅପା ଓ ସୋନପୁର ଜିଲ୍ଲା ମୁଖ୍ୟ ଚିକିତ୍ସାଳୟର ବରିଷ୍ଠ ଚିକିତ୍ସକ ତଥା ଶଲ୍ୟ ବିଭାଗର ମୁଖ୍ୟ ଡାକ୍ତର ଦୁର୍ଗାଦତ୍ତ ଦାସ ଭାଇଙ୍କର ସହଯୋଗ ସ୍ମରଣୀୟ।

ଅଗଷ୍ଟ ୩ ତାରିଖ ବିଳମ୍ବିତ ରାତିରେ ପରମ ହିତୈଷୀ ମାଇଁ, ରାଜ୍ୟ ମେଡିକାଲ ସଙ୍ଗଠନ ଆବାହିକା ଡକ୍ଟର ଶ୍ୟାମା କାନୁନଗୋ ମନେ ପକାଇଦେଲେ ମାଆଙ୍କ ନିକଟକୁ ପ୍ରାର୍ଥନା ପତ୍ର ପଠାଇବା ପାଇଁ । ଅତି ଅଳ୍ପ ସମୟ ଥାଏ ରାତି ୧୨ଟା ବାଜିବାକୁ। ମୋର ମଧ୍ୟ ଲେଖା ଟାଇପ୍ କରିବାର ସାମର୍ଥ୍ୟ ସୀମିତ। କିନ୍ତୁ ମନ ମଧ୍ୟରେ ସଙ୍କଳ୍ପ ଆସିଲା ଆଜି ଦିନର ସୀମା ରାତି ୧୨ଟା ମଧ୍ୟରେ ଆଶ୍ରମ ନବଜ୍ୟୋତିକୁ ନିଶ୍ଚୟ ପ୍ରାର୍ଥନା ପତ୍ରଟି ଟାଇପ୍ କରି ପଠାଇବି । ସାହାଯ୍ୟ କରିବା ପାଇଁ ପାଖରେ କେହି ନାହାନ୍ତି, ପୁଣି ନୂଆ ଫୋନ୍ ସେଟ୍ ମାଧ୍ୟମରେ କାମ କରିବା ବଡ଼ ଅସହଜ ଲାଗୁଥାଏ । କିନ୍ତୁ ସେଇ ନିର୍ଦ୍ଦିଷ୍ଟ ସମୟ ମଧ୍ୟରେ ମଧ୍ୟରାତ୍ରିର ଦୁଇ ମିନିଟ୍ ପୂର୍ବରୁ ସବୁ କାମ ସାରି ପ୍ରାର୍ଥନା ପତ୍ରଟି ପଠାଇଲି ଏବଂ ଆଶ୍ରମର ଜଣେ ବନ୍ଧୁଙ୍କୁ ଅନୁରୋଧ କରି ମେସେଜ ପଠାଇଲି। ପରଦିନ ସକାଳୁ ସକାଳୁ ନବଜ୍ୟୋତି ଯାଇ ଜୟନ୍ତୀ ଅପାଙ୍କୁ ଭେଟି ପ୍ରାର୍ଥନା ପତ୍ରଟି ମା'ଙ୍କ କୋଠରୀରେ ପହଞ୍ଚିବା ପ୍ରୟାସ କରିବା ପାଇଁ ଅନୁରୋଧ କଲି। ବିଳମ୍ବିତ ରାତିରେ କେବଳ ମେସେଜ୍ ହିଁ ପଠାଇ ହେବ, ଫୋନ୍ ବାର୍ତ୍ତାଳାପ ଶିଷ୍ଟାଚାର ବହିର୍ଭୂତ— ଏସବୁ ମନକୁ ଆସୁଥାଏ। ପୁଣି ବିଳମ୍ବ ହେଲେ ମା'ଙ୍କୁ ଜଣାଇବା ଓ ତାଙ୍କ ସ୍ୱୀକୃତି ପତ୍ର ପାଇବା ନିଶ୍ଚୟ ଅସୁବିଧାଜନକ। ୪ ତାରିଖ ସକାଳୁ ସକାଳୁ ଆମ ସୋନପୁରସ୍ଥିତ ଶ୍ରୀତନୁ ସମାଧି ମନ୍ଦିରରେ ପହଞ୍ଚି ମନକଥା ଜଣାଇଲି, ପ୍ରାର୍ଥନା କଲି ସକାଳେ ତାଙ୍କ ନିକଟକୁ ବିନା ବାଧାରେ ଯେପରି ପ୍ରାର୍ଥନା ପତ୍ରଟି ପହଞ୍ଚି ତାଙ୍କ ସ୍ୱୀକୃତି ଲାଭ କରୁ। ପ୍ରାୟ ସକାଳ ୮ଟାରେ ଫୋନ୍ ବାଜିଲା ଓ ସେପଟୁ ଆଶ୍ରମବାସୀ ଚିତ୍ରକର ବନ୍ଧୁ ଜଗତ ମେହେର ଭାଇ ଜୟନ୍ତୀ ଅପାଙ୍କ ସହ ଥାଇ କହୁଥା'ନ୍ତି। ଏଣୁ ମୋର ଅନୁରୋଧଟି ଜଣାଇଦେଲି ସେଇଦିନ ଯେପରି ମାଆଙ୍କ ନିକଟକୁ ମୋର ପ୍ରାର୍ଥନା ପତ୍ରଟି ପହଞ୍ଚାଇଦେବାକୁ। ଜୟନ୍ତୀ ଅପା

ମଧ୍ୟ କାର୍ଯ୍ୟାନୁଷ୍ଠାନ ପାଇଁ ପ୍ରତିଶ୍ରୁତି ଦେଲେ ଆଗ୍ରହର ସହ । ମୁଁ କେବଳ କହୁଥାଏ ସେଇଦିନ (୪ ତାରିଖ) ପ୍ରାର୍ଥନାଟି ଯେପରି ମା'ଙ୍କ ପାଖରେ ପହଞ୍ଚିଯାଉ।

ଆଶ୍ଚର୍ଯ୍ୟର କଥା, ଏହା ପରେ ପରେ ଆମର ସବୁ ପ୍ରସ୍ତୁତି ବେଶ୍ ସହଜ ହୋଇଉଠିଲା। ମନେପଡ଼ିଲା ବ୍ୟକ୍ତିଗତ ଇଚ୍ଛା ଯେବେ ଦିବ୍ୟ ସଂକଳ୍ପ ସହ ଯୋଡ଼ି ହୋଇଯାଏ, ସେଠି ଆଉ ବ୍ୟକ୍ତିଗତ ପ୍ରୟାସ ଫିକା ପଡ଼ିଯାଏ। ମା'ଙ୍କ ଶକ୍ତି ହିଁ କାର୍ଯ୍ୟକାରୀ ହୁଏ। ଆବଶ୍ୟକ ହେଲା ଆମେ ଅଳସୁଆ ହୋଇ ଯେପରି ବିଳମ୍ବ ନ କରୁ। ମା'ଙ୍କ କୃପା ଆବାହନ କରିବା କିନ୍ତୁ ସକ୍ରିୟ ପ୍ରୟାସ ଜାରି ରଖିବା। ଏ ବର୍ଷ ଆମେ ବିଶେଷ କରି ସହଯୋଗୀ ଶ୍ୟାମସୁନ୍ଦର ପଣ୍ଡାଇ(ସୁବର୍ଣ୍ଣପୁର SAMA ଜିଲ୍ଲା ଆବାହକ) ଆଲୋଚନାପୂର୍ବକ ସ୍ଥିର କରିଥିଲୁ ଆମ କାର୍ଯ୍ୟକ୍ରମରେ ତାତ୍ତ୍ୱିକ ଆଲୋଚନା ପରିବର୍ତ୍ତେ ଛାତ୍ରଛାତ୍ରୀମାନଙ୍କ ଦୈନନ୍ଦିନ ଜୀବନରେ ସମ୍ମୁଖୀନ ହେଉଥିବା ସ୍ୱାସ୍ଥ୍ୟର ସମସ୍ୟାଗୁଡ଼ିକୁ ଆଲୋଚନା ବିଷୟବସ୍ତୁ ରୂପେ ରଖିବା ପାଇଁ। ଯଦ୍ୱାରା ଶିକ୍ଷକ ଅପା-ଭାଇମାନେ ପ୍ରଶିକ୍ଷିତ ହୋଇ ତାହା ପ୍ରୟୋଗ କରିପାରିବେ। ସେଇ ପ୍ରକାରର ବିଷୟବସ୍ତୁକୁ ନେଇ ଏ ବର୍ଷର ଶାନ୍ତି ମଣ୍ଡଳସ୍ତରୀୟ କାର୍ଯ୍ୟକ୍ରମ ସଞ୍ଚାଳିତ ହେଲା।

ପୂର୍ବନିର୍ଦ୍ଧାରିତ ସମୟ ନିର୍ଘଣ୍ଟ ଅନୁସାରେ ଅଗଷ୍ଟ ୮ ତାରିଖ ଦିନ ସନ୍ଧ୍ୟାରେ ପରିଚୟ ସମ୍ପର୍କ ପରେ ହେଲ୍‌ଥ କାର୍ଡର ଆବଶ୍ୟକତା ଓ ତାର ପ୍ରୟୋଗ ବିଷୟରେ ବିଶଦ ଆଲୋଚନା ଶ୍ରୀ ଶ୍ୟାମସୁନ୍ଦର ଭାଇ କରିଥିଲେ। ଦ୍ୱିତୀୟ ଦିନ ସକାଳେ ଶାରୀରିକ ବ୍ୟାୟାମ, ଯୋଗ ପ୍ରଶିକ୍ଷଣ ଓ ବିଶେଷ କରି ବର୍ଷା ଋତୁରେ ଶ୍ରେଣୀଗୃହ କୋଠରି ବା ବାରଣ୍ଡାରେ କିପରି ବ୍ୟାୟାମ କ୍ରୀଡ଼ା ଦ୍ୱାରା ଛାତ୍ରଛାତ୍ରୀମାନଙ୍କୁ ଉତ୍ସାହିତ ଉଲ୍ଲସିତ କରାଯାଇ ପାରିବ, ଏହା ଦିଲ୍ଲୀ ଶ୍ରୀଅରବିନ୍ଦ ଆଶ୍ରମରୁ ପ୍ରଶିକ୍ଷିତ ପାଟଣାଗଡ଼ ଶିକ୍ଷା କେନ୍ଦ୍ରର ଅଧ୍ୟକ୍ଷ ଅଜିତ୍ ଦଳପତି ଭାଇ ସଞ୍ଚାଳନ କରିଥିଲେ।

ଆଲୋଚନା କାର୍ଯ୍ୟକ୍ରମର ପ୍ରାରମ୍ଭରେ ଶ୍ରୀ ନିକୁଞ୍ଜ ବିହାରୀ କଦମ (ପାଟଣାଗଡ଼ ଶିକ୍ଷା କେନ୍ଦ୍ରର ସଭାପତି) ସମସ୍ତଙ୍କୁ ସ୍ୱାଗତ ଜଣାଇଥିଲେ। ଶେଖ୍ ଅବଦୁଲ୍ କାଶମ୍ ଭାଇ 'ପୂର୍ଣାଙ୍ଗ ସ୍ୱାସ୍ଥ୍ୟ, ରୂପାନ୍ତର ନିମିତ୍ତ ସ୍ପିଙ୍ଗ ବୋର୍ଡ। ଏ ବିଷୟରେ ଏକ ଗଭୀର ଓ ଭାବ ଉଦ୍ଦୀପକ ଆଲୋଚନା କରିଥିଲେ। କାଶମ୍ ଭାଇଙ୍କ ଭାଷାରେ ପୂର୍ଣାଙ୍ଗ ସ୍ୱାସ୍ଥ୍ୟ ହେଉଛି ଶରୀର, ମନ, ଆତ୍ମା ଓ ପ୍ରାଣର ଏକ ଅପୂର୍ବ ସମନ୍ୱୟ। ସାଧନାର ମାର୍ଗରେ ଅଗ୍ରସର ହେବା ପାଇଁ ଶରୀରଚର୍ଚ୍ଚା, ଆସନ, ବ୍ୟାୟାମ ଓ ପ୍ରାଣାୟାମ ଦ୍ୱାରା ଶରୀରକୁ ସୁସ୍ଥ ତଥା ନିରାମୟ ରଖିବା ଏକାନ୍ତ ଆବଶ୍ୟକ। ଶରୀରରେ ଥିବା କାମନା, ବାସନା, କ୍ରୋଧ ଓ ଲୋଭ ଭଳି ପ୍ରବୃତ୍ତିଗୁଡ଼ିକୁ ଅତିମାନସ ଶକ୍ତିର ଆବାହନ ଦ୍ୱାରା ରୂପାନ୍ତରିତ କରି ଭଗବତ ପ୍ରାପ୍ତି କରିବା ହିଁ ମାନବ ଜୀବନର ପରମ ଲକ୍ଷ୍ୟ; ଯେପରି ଶ୍ରୀଅରବିନ୍ଦ କହିଥିଲେ, 'ସମଗ୍ର ଜୀବନ ହିଁ ଯୋଗ'। ତେଣୁ ମନରୁ ଭୟ, ଗ୍ଲାନି, ଆତଙ୍କ ଓ ମାନସିକ ଚାପକୁ ସମ୍ପୂର୍ଣ ରୂପେ ଦୂର କରି ଦିବ୍ୟ କୃପା ଉପରେ ଅତୁଟ ବିଶ୍ୱାସ ରଖିବା ଉଚିତ। ନିଜକୁ ମା'ଙ୍କ ହାତର ଏକ ନିଷ୍ପାପର ଉପକରଣ ଭାବରେ ସମର୍ପଣ କରି, ସମସ୍ତ ଦାୟିତ୍ୱ ତାଙ୍କ ଉପରେ ନ୍ୟସ୍ତ କରି ସର୍ବଦା ଶାନ୍ତ ଓ ଅବିଚଳିତ ରହିବା ହିଁ ପ୍ରକୃତ ଜୀବନ ଜୀଇଁବାର କଳା।

ପିଲାଙ୍କ ଖାଦ୍ୟାଭ୍ୟାସ ଓ ସ୍ୱାସ୍ଥ୍ୟ ସଚେତନତା : ଡ଼ାକ୍ତର ମଧୁସ୍ମିତା ପ୍ରଧାନଙ୍କ ପରାମର୍ଶ

ଡ଼ାକ୍ତର ମଧୁସ୍ମିତା ପ୍ରଧାନ ବୁଝାଇଥିଲେ ଯେ, ପିଲାମାନେ କଞ୍ଚା ମାଟି ସଦୃଶ, ଯାହାଙ୍କୁ ସହଜରେ ଉପଯୁକ୍ତ ମାର୍ଗଦର୍ଶନ ଓ ସୁଅଭ୍ୟାସ ଦେଇ ଗଢ଼ିହେବ; ତେଣୁ ସେମାନଙ୍କ ଉତ୍ତମ ସ୍ୱାସ୍ଥ୍ୟ ଓ ଖାଦ୍ୟାଭ୍ୟାସ ଗଠନ ଦିଗରେ ଅଭିଭାବକ ତଥା ଶିକ୍ଷକମାନଙ୍କର ଗୁରୁତ୍ୱପୂର୍ଣ୍ଣ ଦାୟିତ୍ୱ ରହିଛି। ଆଜିକାଲିର ବଜାରରେ ମିଳୁଥିବା ବିସ୍କୁଟ୍, ଚିପ୍ସ, କେକ୍, ଇନଷ୍ଟାଣ୍ଟ ନୁଡଲ୍ (ମ୍ୟାଗି) ଏବଂ ପ୍ରିଜରଭେଟିଭ୍ ଯୁକ୍ତ ପ୍ୟାକେଟ୍ ଜୁସ୍ ଭଳି ଖାଦ୍ୟକୁ ସେ ତୀବ୍ର ସମାଲୋଚନା କରିଥିଲେ। ସେ ସ୍ପଷ୍ଟ ଭାବରେ ଦର୍ଶାଇଥିଲେ ଯେ, ଏହିସବୁ ଖାଦ୍ୟର ମୁଖ୍ୟ ଉପାଦାନ ଭାବରେ ମଇଦା, ଅତ୍ୟଧୀକ ଚିନି, ତେଲ, ଲୁଣ, କୃତ୍ରିମ ରଙ୍ଗ ଓ କ୍ଷତିକାରକ ରାସାୟନିକ ପ୍ରିଜରଭେଟିଭ୍ ରହିଥାଏ, ଯାହା ମାନବ ଶରୀର ପାଇଁ ବିଷ ସଦୃଶ। ନିଜ ପେଟକୁ ଡଷ୍ଟବିନ୍ ନ ଭାବି ଏହିସବୁ ଅପମିଶ୍ରିତ ଖାଦ୍ୟରୁ ଦୂରେଇ ରହିବା ସହ ଯେକୌଣସି ଖାଦ୍ୟ କିଣିବା ପୂର୍ବରୁ ତାହାର ଉପାଦାନ ତାଲିକା (Ingredients Label) ପଢ଼ିବା ଶିଖୁବାକୁ ସେ ପରାମର୍ଶ ଦେଇଥିଲେ ।

ପ୍ରକ୍ରିୟାକୃତ ଖାଦ୍ୟ ବଦଳରେ ପାରମ୍ପରିକ ତଥା ଘରେ ପ୍ରସ୍ତୁତ ଖାଦ୍ୟ ଗ୍ରହଣ କରିବା ଉପରେ ସେ ବିଶେଷ ଗୁରୁତ୍ୱାରୋପ କରିଥିଲେ। ପିଲାଙ୍କ ଜଳଖିଆରେ ରୁଟି-ତରକାରୀ, ଚକୁଳି, ଇଡଲି, ଉପମା ଓ ପୋହା ଭଳି ପୃଷ୍ଟିକର ଖାଦ୍ୟ ସାମିଲ କରିବା ପାଇଁ ସେ ଅଭିଭାବକମାନଙ୍କୁ ଆହ୍ୱାନ ଦେଇଥିଲେ। ଏହା ସହିତ ସ୍ଥାନୀୟ ବାଡ଼ିବଗିଚାରେ ପ୍ରାକୃତିକ ଭାବେ ଉତ୍ପାଦିତ ସଜନା ଶାଗ, ସଜନା

ଛୁଇଁ, ପିଜୁଳି, ଅମୃତଭଣ୍ଡା ଏବଂ କଦଳୀ ଭଳି ଋତୁକାଳୀନ ପନିପରିବା ଓ ଫଳ ଖାଇବାକୁ ସେ ଉତ୍ସାହିତ କରିଥିଲେ। ପିଲାମାନଙ୍କର ହାଡ଼ ଓ ଦାନ୍ତର ସୁଦୃଢ଼ତା ପାଇଁ ଦୈନିକ କ୍ଷୀର, ଦହି ବା ଛେନାରୁ କ୍ୟାଲସିୟମ୍ ଏବଂ ଉତ୍ତମ ଶାରୀରିକ ବିକାଶ ପାଇଁ ବିରି କିମ୍ବା ଅଣ୍ଡାର ଧଳା ଅଂଶରୁ ପ୍ରୋଟିନ୍ ଶିଶୁର ସାମଗ୍ରିକ ସ୍ୱାସ୍ଥ୍ୟ ପାଇଁ ଅତ୍ୟନ୍ତ ଅପରିହାର୍ଯ୍ୟ ବୋଲି ସେ ମତପ୍ରକାଶ କରିଥିଲେ।

ଏହାପରେ ପାଟଣାଗଡ଼ର ବରିଷ୍ଠ ମେଡିସିନ ବିଶେଷଜ୍ଞ ଡକ୍ଟର ହେମନ୍ତ କୁମାର ମେହେର ବ୍ୟାୟାମର ତତ୍ତ୍ୱ, ମାନସିକ ସ୍ୱାସ୍ଥ୍ୟ ଓ ଚାପ ତଥା ନିଦ୍ରା ଓ ସ୍ୱାସ୍ଥ୍ୟକର ଅଭ୍ୟାସ ବିଷୟରେ ଆଲୋଚନା କରିଥିଲେ। ଆମ ଅଜାଣତରେ ନଖ ଦ୍ୱାରା ମଇଳା କିପରି ଆମ ଶରୀର ମଧ୍ୟକୁ ପ୍ରବେଶ କରେ, ବିଶଦ ଭାବେ ବୁଝାଇଥିଲେ ଯାହା ଅତ୍ୟନ୍ତ ପ୍ରଭାବଶାଳୀ ହୋଇଥିଲା। ମୋଟାପଣ, ଡାଇବେଟିସ୍, ହୃଦ୍‌ଘାତ ଓ ଉଚ୍ଚ ରକ୍ତଚାପ ଭଳି ବିଭିନ୍ନ ରୋଗର ଏକ ପ୍ରମୁଖ କାରଣ ବା ବିପଦ କାରଣ। ତେଣୁ ଆମେ ମୋଟାପଣକୁ କିପରି ନିୟନ୍ତ୍ରଣ କରିବା, ସେହି କୌଶଳଗୁଡ଼ିକ ଶିଖିବା ଆବଶ୍ୟକ ବୋଲି ସେ ପରାମର୍ଶ ଦେଇଥିଲେ। ଆଜିକାଲି ଛାତ୍ରଛାତ୍ରୀମାନେ ଶାରୀରିକ କାର୍ଯ୍ୟକଳାପ ଅପେକ୍ଷା ମାନସିକ କାର୍ଯ୍ୟକଳାପରେ ଅଧିକ ବ୍ୟସ୍ତ ରହୁଛନ୍ତି। ତେଣୁ ସେମାନେ ପ୍ରତିଦିନ, ଅଥବା ସପ୍ତାହରେ ଅତି କମ୍‌ରେ ପାଞ୍ଚ ଦିନ, ୩୦ ମିନିଟ୍ ଚାଲିବା ଉଚିତ ବୋଲି ସେ ମତାମତ ଦେଇଥିଲେ। ଆମେ ଆମର ଖାଦ୍ୟ ଅଭ୍ୟାସକୁ ମଧ୍ୟ ନିୟନ୍ତ୍ରଣ କରିବା ଆବଶ୍ୟକ। ସମସ୍ତେ ନିଜ ସ୍ୱାସ୍ଥ୍ୟକୁ ଅନେକ ସମୟରେ ଅବହେଳା କରୁଛନ୍ତି। ତେଣୁ ଏବେଠାରୁ ଆମକୁ ଠିକ୍ ଭାବରେ ଶୋଇବା, ନିୟମିତ ବ୍ୟାୟାମ କରିବା, ସୁସ୍ଥ ଖାଦ୍ୟ ଖାଇବା ଏବଂ ଭଲ ଅଭ୍ୟାସ ଗଢ଼ିବା ଉପରେ ବିଶେଷ ଗୁରୁତ୍ୱ ଦେବା ଆବଶ୍ୟକ ବୋଲି ଡକ୍ଟର ମେହେର ଆଲୋଚନା କରିଥିଲେ ।

ଦ୍ୱିତୀୟ ପର୍ଯ୍ୟାୟରେ ଡକ୍ଟର ମଧୁସ୍ମିତା ଅପା ସାଧାରଣ ଅସୁସ୍ଥତା, କିଶୋର-କିଶୋରୀ ଅବସ୍ଥାରେ ସ୍ୱାସ୍ଥ୍ୟ, ଫୋନ-କମ୍ପ୍ୟୁଟରର ଅତ୍ୟଧିକ ବ୍ୟବହାର, ଜଙ୍କ୍ ଫୁଡରୁ କିପରି ଦୂରେଇ ରହିବା – ଏସବୁ ବିଷୟ ବିସ୍ତୃତ ଆଲୋଚନା କରିଥିଲେ।

ଏହି ଦୁଇ ଦିବସୀୟ କାର୍ଯ୍ୟକ୍ରମର ବାସ୍ତବ ଉପଯୋଗ ଆଗାମୀ ଦିନରେ ଶିକ୍ଷା କେନ୍ଦ୍ରଗୁଡ଼ିକରେ ଉଚିତ ପ୍ରୟୋଗ ଉପରେ ନିର୍ଭର କରେ। ଆଶା, ଏହି କାର୍ଯ୍ୟକ୍ରମ ଫଳପ୍ରଦ ହେବ ଓ ଶିକ୍ଷକମାନଙ୍କୁ ମାର୍ଗଦର୍ଶନ ପୂର୍ବକ ଆମ ଛାତ୍ରଛାତ୍ରୀମାନଙ୍କୁ ପୂର୍ଣାଙ୍ଗ ସ୍ୱାସ୍ଥ୍ୟ ପାଇଁ ଉତ୍ସାହିତ କରିବ। ଏହି କାର୍ଯ୍ୟକ୍ରମରେ ସର୍ବମୋଟ ୧୪ଟି ଶିକ୍ଷା କେନ୍ଦ୍ରର ୨୩ ଜଣ ଶିକ୍ଷକ ପ୍ରତିନିଧି ଏବଂ ପ୍ରାୟ ୨୧ ଜଣ ଛାତ୍ରଛାତ୍ରୀ ଅଂଶଗ୍ରହଣ କରିଥିଲେ। ଏଲିନା ଅପା ଏବଂ ସୌଦାମିନୀ ଅପା ମାତୃ ସଙ୍ଗୀତ ପରିବେଷଣ କରିଥିଲେ। ପରିଶେଷରେ ଶ୍ରୀ ଅଜୟ କୁମାର ମଲ୍ଲିକ ଭାଇ ସମସ୍ତଙ୍କୁ କୃତଜ୍ଞତା ଜ୍ଞାପନ କରିଥିଲେ। ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର, ପାଟଣାଗଡ଼ର ସମସ୍ତ ଅପାଭାଇ ଏହି କାର୍ଯ୍ୟକ୍ରମରେ ସକ୍ରିୟ ଅଂଶ ଗ୍ରହଣ କରି ମା'ଙ୍କ କାମକୁ ଆଗେଇ ନେଇଥିଲେ।

Through repeated, daily experiences, I am convinced more and more that every disorder in the body and all illnesses are the result of doubt in the cells or a certain group of cells. They doubt the concrete reality of the Divine, they doubt the Divine Presence in them, they doubt that they are divine in their very essence, and this doubt is the cause of all disorders.

As soon as you succeed in infusing into them the certitude of the Divine, the disorder disappears almost instantly, and it recurs only because, not having been definitively driven away, the doubt reappears.

(Integral Healing) - The Mother

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REPORT OF ZONAL CONFERENCE OF NISTHA ZONE HELD ON 14TH DECEMBER, 2025

The second zonal conference of SRI AUROBINDO MEDICAL ASSOCIATION, NISTHA ZONE held on 14 th December 2025 at Sri Aurobindo Institute of Integral Education, MATRUVIHAR, Khandagiri.

The theme of Conference was "Integral Health Spring board for Transformation

The morning session was on SUMAN, presided by Prof Shyama Kanungo.

Sri Soroj Panigrahi of Health and FW Department of Govt. of Odisha and Manorama apa discussed on responsibility of Study Circle members as Suman Volunteers.

Sukant Kumar Jena, Convenor of Nistha zone reported on the activities of Suman programme in the zone This followed by Inagural session on the chairmanship of Prof. Prafulla Kumar Mishra, president of Sri Aurobindo Sanskruti Sansad. Welcome address by Dr Brahma, followed by the talk of Prof Shyama Kanungo on the theme of the conference.

A session on Integral Health for School Children chaired by Dr Bipin Mishra and Dr Alekha Sahoo. Expert doctors of different faculties like Dental, Eye, ENT, Skin. Reproductive problems, Mental Health discussed vividly on their fields in respect to school children. Ananda Chandra Pradhan conveyed gratitude to learned doctors.

The after noon session presided by Sri Mahendra Nath Swain.In this session very eminent speakers spoke on Yoga, Pranayama, Meditation, Namajapa, Dream, Sleep, Food, Consciousness and discussed how these help sadhaka on the way of Transformation.Dr Madan Pradhan spoke, how to sensitise the community for Integral Health.

The important evening programme presided by Babuli bhai(Prasad Tripathy) and speaker was Sanjay Mahapatra of Kalupadaghat. Both Sanjay bhai and Babuli bhai discussed vividly on the subject and our participation on this Yoga of Transformation of Prabhu SRI AUROBINDO AND THE DIVINE MOTHER.

This was the whole day programme, organised by Dr Bijoy Kumar Sahoo and Binod Kumar Sahoo with full cooperation from Dr Brahma and all staffs of Khandagiri School specially Prncipal Rabi bhai, Aparti bhai, Ramakant bhai, Krupasindhu bhai and others and with full guidance by Shymi apa.

(Prof Shyama Kanungo)



ଜୋନାଲ୍ ସ୍ତରୀୟ ଶ୍ରୀଅରବିନ୍ଦ ମେଡ଼ିକାଲ୍ ଆସୋସିଏସନ କାର୍ଯ୍ୟକ୍ରମ ବିବରଣୀ

ସତ୍ୟ ଜୋନ୍ (କଟକ, କେନ୍ଦ୍ରାପଡ଼ା, କେନ୍ଦୁଝର, ଯାଜପୁର, ଜଗତ୍‌ସିଂହପୁର)

ସ୍ଥାନ: ମାତୃଶିକ୍ଷା କେନ୍ଦ୍ର, ତାହାରପୁର, ଯାଜପୁର

କରୁଣାମୟୀ, ଦିବ୍ୟଜନନୀଙ୍କ ଅଶେଷ କୃପାରୁ ଜୋନ୍ ସ୍ତରୀୟ ୨ୟ କାର୍ଯ୍ୟକ୍ରମ ସତ୍ୟଜୋନ୍‌ସ୍ଥ ଯାଜପୁର ଜିଲ୍ଲା, ମାତୃଶିକ୍ଷା କେନ୍ଦ୍ର, ତାହାରପୁର ଠାରେ ୮.୧୧.୨୦୨୫ଅନୁଷ୍ଠିତ ହୋଇଯାଇଛି। ଏଥିରେ ସତ୍ୟଜୋନ୍‌ର ପ୍ରତ୍ୟେକ ଜିଲ୍ଲାର ସ୍ୱାସ୍ଥ୍ୟ ବିଭାଗରେ ଥିବା ସଙ୍ଗଠକ ଓ ମାତୃକର୍ମୀମାନେ ଯୋଗଦାନ କରିଥିଲେ।

ପ୍ରଥମେ ସକାଳ ୯ରୁ ୧୦ଟା ମଧ୍ୟରେ ଯୋଗଦାନକାରୀ ମାନଙ୍କର ନାମ ପଞ୍ଜିକରଣ କରାଯାଇ ସ୍ୱାସ୍ଥ୍ୟ ଓ ଖାଦ୍ୟ ସମ୍ବନ୍ଧରେ ଏକ ପ୍ରଦର୍ଶନୀ ଉଦ୍‌ଘାଟନ କରାଯାଇଥିଲା। ସକାଳ ୧୦.୩୦ରେ ପ୍ରଥମ ଅଧିବେଶନ ଆରମ୍ଭ ହେଲା। ଡାକ୍ତର ଶ୍ୟାମା କାନୁନ୍‌ଗୋଙ୍କ ପ୍ରେରଣାଦାୟକ ଉଦ୍‌ବୋଧନ ପରେ ଶ୍ରୀଯୁକ୍ତ ବିପିନ ବିହାରୀ କର ପ୍ରାଥମିକ ଚିକିତ୍ସା ବିଷୟରେ ପ୍ରୋଜେକ୍ଟର ମାଧ୍ୟମରେ ଦର୍ଶାଇବା ସହ ହୃଦଘାତ, ସର୍ପାଘାତ ଓ ଘଡ଼ଘଡି ଜନିତ ଆଘାତର ଅପମୃତ୍ୟୁ ସମ୍ପର୍କରେ ଆଲୋଚନା କରିଥିଲେ। ଏ ସମ୍ପର୍କରେ ସେ ଆଣିଥିବା ବିଭିନ୍ନ ଉପକରଣ ଓ ପ୍ରତ୍ୟକ୍ଷ ପରୀକ୍ଷା ମାଧ୍ୟମରେ ତାଲିମ୍ ପ୍ରଦାନ କରିଥିଲେ। ମାତୃଭବନରୁ ଆସିଥିବା ମନୋରମା ନାୟକ ସୁମନ ସେଚ୍ଛାସେବୀ ସଙ୍ଗଠନର ଆବଶ୍ୟକତା ସମ୍ପର୍କରେ ସୂଚନା ଦେବା ସଙ୍ଗେ ସଙ୍ଗେ ଆମ ପାଠଚକ୍ର ମାଧ୍ୟମରେ ମା'ଙ୍କ କାର୍ଯ୍ୟ "ପାଠଚକ୍ର ପ୍ରତି ଗାଁରେ ଓ ମା'ଙ୍କ ବାଣୀ ପ୍ରତ୍ୟେକ ଘରେ" କିପରି ସହଜ ହେବ ଏ ସମ୍ପର୍କରେ ପ୍ରତ୍ୟକ୍ଷ ଅନୁଭୂତି ଉପସ୍ଥାପନ କରିଥିଲେ।

ଅଧିବେଶର ଉଦ୍‌ଘାଟନ ଉତ୍ସବରେ ନବଜୀବନ ଶିକ୍ଷା ସଂସଦର ସମ୍ପାଦକ ଶ୍ରୀଯୁକ୍ତ ପ୍ରସାଦ ତ୍ରିପାଠୀ ମେଡ଼ିକାଲ, ଡାକ୍ତର ଓ ଆଧ୍ୟାତ୍ମିକତାର ସମନ୍ୱୟ କିପରି ଆସିପାରିବ ଓ ଦିବ୍ୟଜୀବନ ଲାଭ ଦିଗରେ ଏମାନେ କିପରି ସହାୟକ ହେବେ ଏ ସମ୍ପର୍କରେ ସୂଚନା ଦେଇଥିଲେ। ଦ୍ୱିତୀୟ ଅଧିବେଶନର ଆରମ୍ଭରେ ଡା: ଗୌରାଙ୍ଗ ଚରଣ ପୃଷ୍ଟି ଆଧ୍ୟାତ୍ମିକତାର ଭିତ୍ତିଭୂମି ଉପରେ କିପରି ଡାକ୍ତରୀ ଚିକିତ୍ସା ହୋଇପାରିବ ସେ ସମ୍ପର୍କରେ ସୂଚନା ପ୍ରଦାନ କରିଥିଲେ। ଏଥିରେ ଆଲୋଚ୍ୟ ବିଷୟ ଥିଲା "ବିବର୍ତ୍ତନ ପାଇଁ ଉତ୍ତମ ସାସ୍ଥ୍ୟ।" ଉକ୍ତ ଅଧିବେଶନକୁ ସତ୍ୟ ଜୋନ୍‌ର ସଞ୍ଜୋଜକ ଶ୍ରୀ ମାୟାଧର ସାହୁ ପରିଚାଳନା କରିଥିଲେ।

- ବିଶ୍ରାମ ଓ ନିଦ୍ରା ବିଷୟରେ କଟକ ମାତୃଭବନର ପଦ୍ମଲୋଚନ ପୋଥାଳ ବହୁ ଆକର୍ଷଣୀୟ ଭିଡ଼ିଓ ପ୍ରଦର୍ଶନ କରିଥିଲେ।

- ବ୍ୟାୟାମ ଓ ଯୋଗ ମାଧ୍ୟମରେ ଶରୀର ରୂପାନ୍ତର ସମ୍ପର୍କରେ କେନ୍ଦ୍ରାପଡ଼ା ଜିଲ୍ଲାର ଶ୍ରୀମତୀ ଅଞ୍ଜନା ପ୍ରଧାନ ଆଲୋଚନା ସହିତ କିଛି କାର୍ଯ୍ୟକ୍ରମ ଦେଖାଇଥିଲେ।

- କର୍ମ ଓ ଶିକ୍ଷା ସମ୍ପର୍କରେ ଆଲୋଚନା କରିଥିଲେ କେନ୍ଦୁଝରର ଭାବପ୍ରିୟା ସାହୁ।

- ଖାଦ୍ୟ ସମ୍ପର୍କରେ ଯାଜପୁର ଜିଲ୍ଲାର ଧରିତ୍ରୀ ରାଉତ ଆଲୋଚନା କରିଥିଲେ। ସଚେତନଭାବରେ ମନ୍ତ୍ର ପାଠ ସହିତ ଭଗବାନଙ୍କୁ ଅର୍ପଣ କରି ଖାଦ୍ୟ ଗ୍ରହଣ କରିବା।

ତୃତୀୟ ଅଧିବେଶନରେ "ପୂର୍ଣ୍ଣାଙ୍ଗ ସାସ୍ଥ୍ୟ ହେଉଛି ରୂପାନ୍ତର ଦିଗକୁ ଏକ ଲମ୍ଫ" ଶୀର୍ଷକରେ ଡା: ଧନେଶ୍ୱର ପ୍ରଧାନ ଆଲୋଚନା କରିଥିଲେ। ଏହି କାର୍ଯ୍ୟକ୍ରମକୁ ବାଦ ପରେ ଜିଲ୍ଲା ସଙ୍ଗଠକ କୈଳାସ ଚନ୍ଦ୍ର କୁଅଁର ପରିଚାଳନା କରିଥିଲେ। ଦନ୍ତର ସୁରକ୍ଷା ସମ୍ପର୍କରେ ଡା: ହେମାମାଳିନୀ ରଥ ଅନ୍‌ଲାଇନ୍ ରେ ଆଲୋଚନା କରିଥିଲେ।

ଶେଷ ପର୍ଯ୍ୟାୟରେ ଶ୍ରୀଅରବିନ୍ଦ ଆଶ୍ରମ, ପଣ୍ଡିଚେରୀର ବିଶିଷ୍ଟ ସାଧକ ଡ: ଆଲୋକ ପାଣ୍ଡେ ପ୍ରସଙ୍ଗଟି ଉପରେ ଅନ୍‌ଲାଇନ୍ ଭିଡ଼ିଓରେ ଆଲୋକପାତ କରିଥିଲେ। ଏହି ଅଧିବେଶନଟିକୁ ପରିଚାଳନା କରୁଥିବା ଯାଜପୁର ଜିଲ୍ଲାର ଅନ୍ୟତମ ପାଠଚକ୍ର ସଙ୍ଗଠକ ତଥା ମାତୃଶିକ୍ଷାକେନ୍ଦ୍ରର ସମ୍ପାଦକ ଶ୍ରୀ ସଦାଶିବ୍ ନାୟକ କାର୍ଯ୍ୟକ୍ରମର ଉପସଂହାର କରିବା ସହିତ ଦିବ୍ୟଜନନୀଙ୍କ ପାଦପଦ୍ମରେ କୃତଜ୍ଞତା ଜ୍ଞାପନ କରିଥିଲେ।




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8TH SRI AUROBINDO




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ଶ୍ରୀଅରବିନ୍ଦ ମେଡିକାଲ୍ ଆସୋସିଏସନ (SAMA) ଆନୁକୂଲ୍ୟରେ କୃପାଜୋନ୍ (ଅନୁଗୁଳ ଓ ଚୌଦ୍ୱାର) ଦ୍ୱାରା ଆୟୋଜିତ ହୋଇଥିବା ମେଡିକାଲ୍ ସମ୍ମିଳନୀ, ୨୦୨୬ର ବିବରଣୀ

ସ୍ଥାନ: ଶ୍ରୀ ଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର, ଡେରା

Theme: "Integral health Spring board to transformation'

ତାଳଚେରସ୍ଥିତ ଡେରା ଶ୍ରୀଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ରଠାରେ ଆୟୋଜିତ ହୋଇଥିବା ମେଡିକାଲ ସମ୍ମିଳନୀ ତା.୧୦.୦୧.୨୦୨୬ ଓ ୧୧.୦୧.୨୦୨୬ ଦୁଇଦିନ ଧରି ଚାଲିଥିଲା। ଏଥିରେ ଅନୁଗୁଳ ଓ କଟକ ଜିଲ୍ଲାରେ ଥିବା ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ରମାନଙ୍କରୁ ଦୁଇ ଜଣ ଲେଖାଏଁ ଶିକ୍ଷକ/ଶିକ୍ଷୟିତ୍ରୀ ଯୋଗ ଦେଇଥିଲେ। ଛାତ୍ର/ଛାତ୍ରୀମାନଙ୍କର ସ୍ୱାସ୍ଥ୍ୟ ସମସ୍ୟା ଓ ସେଗୁଡିକର ନିରାକରଣ ସମ୍ବନ୍ଧରେ ଏହି ସମ୍ମିଳନୀରେ ଆଲୋଚନା କରାଯାଇଥିଲା ଏବଂ ସରକାରଙ୍କ ସ୍ୱାସ୍ଥ୍ୟ ବିଭାଗ ଦ୍ୱାରା ଛାତ୍ର/ଛାତ୍ରୀମାନଙ୍କୁ ମିଳୁଥିବା ସ୍ୱାସ୍ଥ୍ୟସେବା ସମ୍ବନ୍ଧରେ ସମସ୍ତଙ୍କୁ ଅବଗତ କରାଯାଇଥିଲା।

ଦୁଇ ଦିନିଆ ସମ୍ମିଳନୀର ପ୍ରଥମ ଦିନର ଆରମ୍ଭରେ ସକାଳ ୭.୩୦ ଘଟିକା ସମୟରେ ବାରଦା ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ରର ଭାଇ ନିରଞ୍ଜନ ମହାପାତ୍ରଙ୍କ ଦ୍ୱାରା ମାତୃ ପତାକା ଉତ୍ତୋଳନ କରାଯାଇଥିଲା। ଏଥିସହ ଅଷ୍ଟମ ବାର୍ଷିକ ମେଡିକାଲ ସମ୍ମିଳନୀର ଶୁଭାରମ୍ଭ କରାଯାଇଥିଲା। ଡେରା ଶିକ୍ଷାକେନ୍ଦ୍ରର ଛାତ୍ରଛାତ୍ରୀ ମାନେ ମାତୃ ସଙ୍ଗୀତରେ ଭାଗ ନେଇଥିଲେ।

ଆମର କାର୍ଯ୍ୟସୂଚୀ ଅନୁଯାୟୀ ଉଦ୍‌ଘାଟନୀ ଉତ୍ସବ ସକାଳ ୧୦ ଘଟିକା ସମୟରେ ଆରମ୍ଭ କରାଯାଇଥିଲା। ଏହି ସଭାରେ ଉପସ୍ଥିତ ଥିବା ବିଶିଷ୍ଟ ବ୍ୟକ୍ତିମାନେ ହେଲେ ଡାକ୍ତର ଶ୍ୟାମା କାନୁନଗୋ (ପୂର୍ବତନ ଅଧ୍ୟକ୍ଷ SCB Medical College), ଶ୍ରୀଯୁକ୍ତ ବ୍ରଜକିଶୋର ପ୍ରଧାନ (ବିଧାୟକ, ତାଳଚେର), ଡାକ୍ତର କୀର୍ତ୍ତିରେଖା ମହାପାତ୍ର (ଅଧ୍ୟକ୍ଷ, PMM College, ତାଳଚେର), ଡାକ୍ତର ମଦନମୋହନ ପ୍ରଧାନ (C.D.M.O, ଅନୁଗୁଳ), ଡାକ୍ତର ଚୈତନ୍ୟ ସାହୁ, ଏବଂ ଏଥିରେ ଡାକ୍ତର ମଦନ ମୋହନ ପ୍ରଧାନ ସଭାପତିତ୍ୱ କରିଥିଲେ। ତାଳଚେର ବିଧାୟକ ଏକ ପୂର୍ଣ୍ଣାଙ୍ଗ ବିଶ୍ୱବିଦ୍ୟାଳୟ ସ୍ଥାପନା ପାଇଁ ପ୍ରସ୍ତାବ ରଖିଥିଲେ। ଏହି ଅଧିବେଶନରେ ସ୍ୱାସ୍ଥ୍ୟ ପତ୍ରିକା ଉନ୍ମୋଚନ କରାଯାଇଥିଲା। ଅବସରପ୍ରାପ୍ତ ପ୍ରଧାନ ଶିକ୍ଷୟିତ୍ରୀ ଦୀପ୍ତି ଘୋଷଙ୍କ ଦ୍ୱାରା ଏହା ସମ୍ପାଦିତ ହୋଇଥିଲା। ପୂର୍ବ ବର୍ଷର ବିବରଣୀ ଶ୍ରୀମତୀ ରଞ୍ଜିତା ସାହୁ ପାଠ କରିଥିଲେ। ଶ୍ରୀଯୁକ୍ତ ଗିରିଶ ଚନ୍ଦ୍ର ସାହୁ ଓ ଶ୍ରୀଯୁକ୍ତ ପ୍ରଦୀପ ସାହୁ ମଞ୍ଚ ପରିଚାଳନା କରିଥିଲେ।

ପ୍ରଥମ ଦିନର ଦ୍ୱିତୀୟ ଅଧିବେଶନ (technical session)ରେ ଡାକ୍ତର ଶ୍ୟାମା କାନୁନଗୋ ସଭାପତିତ୍ୱ କରିଥିଲେ ଓ ସହଯୋଗୀ ଭାବେ ଡାକ୍ତର କୀର୍ତ୍ତିରେଖା ମହାପାତ୍ର ଦାୟିତ୍ୱ ନିଭାଇଥିଲେ। ଡାକ୍ତର କିଶୋରୀ ଦାଶ ଓ ଡାକ୍ତର ପ୍ରଶାନ୍ତ ପାତ୍ର Moderator ଭାବେ କାର୍ଯ୍ୟକ୍ରମକୁ ଆଗେଇ ନେଇଥିଲେ।

ଏହି ଅଧିବେଶନରେ Panelist ମାନେ ହେଲେ:

୧. ଡାକ୍ତର ସୁଜାତା ଦାସ - ସ୍ତ୍ରୀ ରୋଗ ବିଶେଷଜ୍ଞ

୨. ଡାକ୍ତର କଳ୍ପନା ଜେନା - ଶିଶୁ ରୋଗ ବିଶେଷଜ୍ଞ

୩. ଡାକ୍ତର ବିଶ୍ୱଜିତ୍ ସାମଲ - ଚର୍ମ ରୋଗ ବିଶେଷଜ୍ଞ

୪. ଡାକ୍ତର ସୁଧର୍ମା ପାତ୍ର - ଚକ୍ଷୁ ରୋଗ ବିଶେଷଜ୍ଞ

୫. ଡାକ୍ତର ରଶ୍ମିତା ଭଞ୍ଜଦେଓ - ମାନସିକ ରୋଗ ବିଶେଷଜ୍ଞ

୬. ଡାକ୍ତର ଶକ୍ତିପ୍ରସାଦ ସାହୁ - ଦାନ୍ତ ରୋଗ ବିଶେଷଜ୍ଞ

୭. ଡାକ୍ତର ସନତ ନଳିନୀ ରାୟ - ଭୌତିକ ଚିକିତ୍ସକ (Physiotherapist)

୮. ଡାକ୍ତର କୀର୍ତ୍ତିରେଖା ମହାପାତ୍ର - ସ୍ତ୍ରୀ ଓ ପ୍ରସୂତି ରୋଗ ବିଶେଷଜ୍ଞ

୯. ଶ୍ରୀମତୀ ମନୋରମା ନାୟକ

ସର୍ବଶେଷରେ ଡାକ୍ତର ଶ୍ୟାମା କାନୁନଗୋ ତାଙ୍କର ଉପସଂହାର ଭାଷଣ ରଖିଥିଲେ। ଏହା ସହ ଦ୍ୱିତୀୟ ଅଧିବେଶନ ସମାପ୍ତ ହେଲା ଓ ମଧ୍ୟାହ୍ନ ଭୋଜନ ପାଇଁ ବିରତି ହେଲା।

ପ୍ରଥମ ଦିନର ତୃତୀୟ ଅଧିବେଶନ ଅପରାହ୍ନ ତିନି ଘଟିକା

ସମୟରେ ଆରମ୍ଭ ହୋଇଥିଲା । ଏହି ଅଧିବେଶନରେ ଶ୍ରୀଯୁକ୍ତ ସରୋଜ ପାଣିଗ୍ରାହୀ (Mental & Child Health state Consultant) ଛାତ୍ରଛାତ୍ରୀମାନଙ୍କ ପାଇଁ ସରକାରଙ୍କ ତରଫରୁ ଥିବା ସ୍ୱାସ୍ଥ୍ୟ ସୁବିଧା ସମ୍ବନ୍ଧରେ ପୁଙ୍ଖାନୁପୁଙ୍ଖ ଭାବେ ବୁଝାଇଥିଲେ । ଏହା ଛଡା ସେ SUMAN ସ୍ୱେଚ୍ଛାସେବୀମାନଙ୍କର କାର୍ଯ୍ୟଧାରାର କର୍ତ୍ତବ୍ୟ ସମ୍ବନ୍ଧରେ ସୂଚନା ଦେଇଥିଲେ ।

ଏହି ଅଧିବେଶନରେ ଡାକ୍ତର ତୋଫାନ ପତି ଛାତ୍ର ଛାତ୍ରୀ ଓ ଅଭିଭାବକଙ୍କ ସହ ଆଲୋଚନା କରି ମାନସିକ ସ୍ୱାସ୍ଥ୍ୟ ସମ୍ପର୍କିତ ପ୍ରଶ୍ନ ଗୁଡିକର ଉତ୍ତର ଦେଇଥିଲେ । ତାଙ୍କୁ ସହଯୋଗ କରିଥିଲେ ଡାକ୍ତର ରଶ୍ମିତା ଭଞ୍ଜଦେଓ ।

ଡେରା ଶ୍ରୀ ଅରବିନ୍ଦ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ରର ଛାତ୍ରଛାତ୍ରୀଙ୍କ ଦ୍ୱାରା ସନ୍ଧ୍ୟାବେଳେ ମନଛୁଆଁ ସାଂସ୍କୃତିକ କାର୍ଯ୍ୟକ୍ରମ ପ୍ରଦର୍ଶନ କରାଯାଇଥିଲା । ରାତ୍ରିଭୋଜନ ସହ ପ୍ରଥମ ଦିନର ଅଧିବେଶନ ଶେଷ ହେଲା ।

ଦ୍ୱିତୀୟ ଦିନ ପୂର୍ବାହ୍ନରେ ଡାକ୍ତର ମଦନ ମୋହନ ପ୍ରଧାନ, ସକାରାତ୍ମକ ଜୀବନ ଆଚରଣ ଦ୍ୱାରା କିପରି ଆରୋଗ୍ୟ ଲାଭ କରିହେବ - ସେହି ସମ୍ବନ୍ଧରେ ପାୱାର ପଏଣ୍ଟ ମାଧ୍ୟମରେ ଉପସ୍ଥାପନ କରି ସମସ୍ତ ଅଂଶଗ୍ରହଣକାରୀଙ୍କୁ ବୁଝାଇଥିଲେ ।

ଏହା ପରେ ଶ୍ରୀଯୁକ୍ତ ଦୀନବନ୍ଧୁ ପ୍ରଧାନଙ୍କ ନେତୃତ୍ୱରେ Saint John Ambulance କର୍ମକର୍ତ୍ତାଙ୍କ ଦ୍ୱାରା ଆଶୁ ଚିକିତ୍ସା ଓ FIRST AID ସମ୍ବନ୍ଧରେ ଶିକ୍ଷା ପ୍ରଦାନ କରାଯାଇଥିଲା । Audio-Visual (AV) ମାଧ୍ୟମରେ ହୃଦ୍‌ରୋଗ ଆକ୍ରାନ୍ତଙ୍କୁ କିପରି ଆଶୁ ଚିକିତ୍ସା ଦିଆଯାଇପାରିବ ତାହା ବୁଝାଇଥିଲେ ।

ଦ୍ୱିତୀୟ ଅଧିବେଶନରେ ଛାତ୍ରଛାତ୍ରୀମାନଙ୍କ ସ୍କୁଲ/ସ୍ୱାସ୍ଥ୍ୟ କାର୍ଡ ଉପରେ ଆଲୋଚନା କରାଯାଇଥିଲା ଓ ସ୍ୱାସ୍ଥ୍ୟ କାର୍ଡ କିପରି ପୂରଣ କରାଯିବ ସେ ବିଷୟରେ ବୁଝାଯାଇଥିଲା ।

ସର୍ବଶେଷରେ ଅପରାହ୍ନ ଘ. ୪.୩୦ ମିନିଟ୍ ସମୟରେ ମାତୃପତାକା ଡାକ୍ତର ଦିଲ୍ଲୀପ ପଟ୍ଟନାୟକ (DMO-MS, ଅଙ୍ଗୁଳ)ଙ୍କ ଦ୍ୱାରା ଅବତରଣ କରାଯାଇ ସମ୍ମିଳନୀର ଉଦ୍‌ଯାପନ କରାଯାଇଥିଲା ।

ସମ୍ମିଳନୀ ପରେ ଜିଲ୍ଲା ସଙ୍ଗଠନ ତରଫରୁ ବିଭିନ୍ନ ପୂର୍ଣ୍ଣାଙ୍ଗ ଶିକ୍ଷାକେନ୍ଦ୍ର ସହ ଯୋଗାଯୋଗ ରଖି ପିଲାଙ୍କ ସ୍ୱାସ୍ଥ୍ୟ ସମ୍ବନ୍ଧରେ ସଚେତନ କରାଯାଉଅଛି । ସରକାରୀ ସୁବିଧା ଉପଲବ୍ଧି ପାଇଁ ସମସ୍ତଙ୍କୁ ସଜାଗ ରଖାଯାଇଛି ।

ଡେରା ଶ୍ରୀଅରବିନ୍ଦ ଶିକ୍ଷାକେନ୍ଦ୍ରରେ ଋତୁସ୍ରାବ ସମୟରେ ଛାତ୍ରୀମାନେ କିପରି ଯତ୍ନଶୀଳ ହେବେ, ସେ ସମ୍ବନ୍ଧରେ ଏକ ସ୍ୱତନ୍ତ୍ର ପ୍ରଶିକ୍ଷଣ କାର୍ଯ୍ୟକ୍ରମ କରାଯାଇଛି । ଏହି କାର୍ଯ୍ୟକ୍ରମଟି ଅନୁଗୁଳର ଚେତନା ମିଶନ ସହାୟତାରେ ସଂଗଠିତ କରାଯାଇଥିଲା ।

ବନ୍ଦେ ମାତରମ୍ ।











REPORT OF LAST YEAR'S ACTIVITIES

This is the 37th Annual Conference of Sri Aurobindo Medical Association(SAMA). This association has evolved since 1976 out of the Sri Aurobindo Students' Association of SCB Medical College, Cuttack. The subset Sri Aurobindo Health Squad has come into existence since the year 2000. SAMA is one of the ten Karma Dharas, aspiring to enter into the society with the Force and Consciousness of the New World, in the field of Integral Health, envisioned by Sri Aurobindo and The Mother. Gadadhar Mishra the, Convenor of All Orissa Sri Aurobindo Study Circle Committee, first conceived the idea of 'Karma Dharas'.

The first State Level Conference of SAMA was in 1980. The second was after a gap of 9 years was held in 1989. From then on, every year a State Level Conference was held with a theme every year. Many illustrious individuals have participated; Prof.Jyotsna Dei, Dr. Sudhakara Acharya have been its past Presidents. Prof.Sharat Chandra Mishra,Sri Manoj Das, Prof. J.M.Senapaty, Prof.Kabi Prasad Mishra have participated in the past. The events were held in the past at SCB Medical College; several at Matrubhaban and last three at Sarala Bhaban.

Last year the theme was "Integral Health-springboard for Transformation".

On day 1 there were two panel discussions prior to the inaugural session entitled:

(a)*"Integral Health Consciousness in School children"*. The moderators were Dr. Prashanta Kumar Patra and Dr. Subhakanta Sahoo. The experts were Sri Prasad Tripathy,Dr.Seema Parija,Dr.Sanghamitra Panda. The panelists were Dr. Jyotiranjan Champatiray, Dr. Hemanalini Rath, Dr.Ramamani Dalai, Dr. Smruti Swain, Dr.Lagnajit Dash, Dr.Bijay Kumar Sahoo.

(b) *" Integral Health Consciousness in the Community by SUMAN VOLUNTEERS"*. The moderators were Dr. Madan Mohan Pradhan and Dr. Kishore Chandra Mohapatra. The experts were Dr.Bijayeeni Mohapatra and Dr. Bipinananada Mishra. The panelists were Dr. Subhakanta Sahoo, Sri Saroj Kumar Panigrahi, Dr.Madhusmita Pradhan, Dr.Latika Behera.

In the Inaugural Session a pre-recorded video message of Sri Pramahansa Prajnanananda ji was played. Welcome Address was given by the President of SAMA Dr. Sudhir Brahma. Report of the previous year was presented by Dr. Shyama Kanungo. Dr. Badal Mohanty spoke on 'Our Association SAMA'. Introduction of the theme as well as the guests was done by Dr. Jayanta Kumar Panda. The Souvenir was released by the Chief Guest Dr. Soumitra Basu followed by his inaugural address. The vote of thanks was offered by Vice President of SAMA, Dr. Prashanta Kumar Nanda.

The post lunch session was a symposium entitled 'Living healthy to evolve' to which a foreword was given by Dr.Yogesh Mohan. The paticipants were Nishith Ranjan Rout who spoke on "Food-what,when,how to eat to evolve", Er. Padmacharan Pothal who spoke on " Rest-how to rest consciously", Dr.Subhakanta Sahoo spoke on "Exercise- with consciousness to evolve", "Conscious Sleeping" was rendered by Dr.Jijnasa

Sahani, "Analysing dreams to evolve" was explained backed with research by Dr. Shraddha Shataparba Dash, Jasaswini Roy spoke on "Meditation and Nama Japa to evolve" Dr.Ambujaksha Behera spoke on "Yogasan and Pranayam to evolve". Summing up was done by Dr.Soumitra Basu.

In the evening session Oration on the theme of the conference was given by Dr.Soumitra Basu which was chaired by Dr.Tophan Pati and Dr.Sampadananda Mishra

On Day 2 from 6.00-8.00 am Dr. Yogesh Mohan conducted a 'Guided activity on "Opening to Consciousness of Integral Health.

The first post breakfast session was on ' Physical Health-holistic approach' in which Dr. Sampdananda Mishra was the speaker. It was chaired by Dr. Pratap Ch. Rath, Dr. Dhaneswar Pradhan and Dr. Radhakanta Mishra.

Next followed a panel discussion on ''Concept of Integral Health and Transformation for the Medico''. The moderators were Dr. Bhalendu Vaishnav and Dr. Yogesh Mohan. The panelists were Dr. Biranchi Narayan Mohapatra, Dr. Arpita Priyadarshini, Dr. Smruti Vaishnav, Dr. Lucy Das, Dr. Tophan Pati, Dr. Akshay Kumar Mishra. The Experts were Dr. Jayanta Kumar Panda, Dr. Sampadananda Mishra and Dr. Lal Mohan Naik.

The post lunch talk was on "Integral Health of Women" by Dr. Sindhu Nandini Tripathy; it was chaired by Dr. Jayashree Patnaik,Dr. Sanjaya Kumar Swain.

The following two talks were ' Mechnics of School Health Benefits and Training for Suman Volunteers' by Sri Saroj Kumar Panigrahi NHM Consultant on RMNCHAN and 'How to identify Sri Aurobindo Study Circle Workers for Suman Volunteers' by Smt. Manorama Nayak, Zonal Convenor Satya Zone.

The final session on 'Way Forward' was chaired by Prasad Tripathy, Dr. Sudhir Brahma, Dr. Prashant Kumar Patra Dr.Radhakanta Mishra and Dr. Dyuman Naik. The participants were the Zonal Convenors of all nine zones viz: Sashikanta Bhoi of Astha, Akshay Kumar Biswal of Krupa, Dambarudhar Sahoo of Samata, Madan Mohan Dani of Shanti, Suresh Mishra of Samarpan, Prafulla Kumar Panda of Sangati, Mayadhar Sahoo of Satya, Sukanta Kumar Jena of Nistha and Aspruha Zone was represented by Sri Rabidra Padhi(pharmacist)

All nine Zonal SAMACONs adopted the same theme of "Integral Health-Springboard for Transformation"

1. Samarpan Zone had one day online session on 3rd Sunday October 2025, by Free Conference Call; Dr. Yogesh Mohan as well as Dr. Alok Pandey joined live. The detail report is there in this Souvenir.
2. Satya Zone SAMACON was held on 8th November 2025 at Taharpur.
3. Astha Zone had a physical event on 3rd Saturday and Sunday of November 2025
4. Nishtha Zone had its two day event on 13th and 14th of December, 2025 at the premises of Matruvihar, Khandagiri, organised by Dr. Bijoy Sahoo and Dr. Sudhir Brahma
5. The Krupa Zone SAMACON was a two day offline event held at Sri Aurobindo Integral Education at Dera Talcher on 10th and 11th January 2026
6. The Samata Zone held its 13th Zonal SAMACON at SAYM premises on 7th and 8th February, 2026
7. The Aspruha Zone 2nd Zonal SAMACON was held on 14th March 2026 at Ankuli Road.
8. The Shanti Zone had a two day event at SAIEC,Patnagarh on 8th and 9th August 2026

9. The Sangati Zone had a day long online event on 9th August ,2026.

The 23rd SAHS training (Sri Aurobindo Health Squad) was held from 3rd to 23rd May, 2026. We focussed on prospective SUMAN Volunteers and provided them major components of the SAHS training. It was mutually a learning experience. Sri Sridhar Behera was instrumental in identifying majority of the trainers. The resource persons were Prasad Tripathy, Secretary,NLET, Anjali Tripathy,Samarendra Rout,Jasaswini Roy,Nishith Ranjan Rout and Padmalochan Pothal all faculty of SAIHSR, Nirupama Parida, Katak Dist SASC Organiser, and Smt Manorama Nayak (Zonal Convenor,Satya Zone) Dr.Akshay Mishra, Sri Saumeetra Das,Smt Lina Sahoo, Dr.Madan Mohan Pradhan(CDMO, Anugul), Dr.Renubala Samal(Retd Officer Pollution Control Board) ,Dr.Ramamani Dalai(HoD Ophthalmology ,SCB MC, Dr. Shubhra Ghosh HoD OBGYN,SCB MC, Dr.Yogesh Mohan,CEO Savitha Medical College,Chennai, Dr. Abhay Patnaik, Retd.Superintendent DHH , Kandhamal, Sri Bipin Bihari Kar,St.John Ambulance First Aid Trainer. Dr. K.C.Mohapatra,Deputy Director SVNIRTAR, Dr.Hemamalini Rath,HoD, Public Health Dentistry, SCB Dental College, Dr. Sanghamitra Panda, CDMO, Deogarh, Ms. Abha Kanungo, Sri Saroj Kumar Panigrahi, RMNCHA N Consultant, NHM Odisha, Dr.Soumitra Basu, Psychiatrist, Dr.Tophan Pati ,HoD Psychiatry,High Tech Medical Colleg, Sri Sridhar Sahoo, State Convenor SAHS, Sridhar Behera, Kausalya of Sreema Welfare Foundation.

The field visit with first hand experience was given to trainees two VHSNDs Karanji and Jamana under Tangi CHC under supervision of Sri Bijay Kumar Sahoo, MPHS

Dr.Geetanjali Rath, CDMO, Katak gave away the certificates and addressed the SUMAN Volunteers who participated in the SAHS training.

Apart from this SUMAN VOLUNTEERS training has been given to Sri Aurobindo Study Circle Workers in all CHCs of Cuttack District thanks to efforts of Manorama Nayak, Dr. Sarat Chandra Mishra, Nirupama Parida, Ashalata Pani, Kishori Behera and others of Cuttack.

Many CHCs of Puri District have been covered by Sri Sudarshan Dikshit, Sridhar Behera and Dillip Kumar Parida. Sri Sukanta Jena, Zonal Convenor has accompanied most of the training sessions and also helps in organising Sri Aurobindo Study circles amongst the Suman Volunteers as well as Health Care providers.

Thus by the Divine Mother's Will and Force SAMA in convergence of the Karmadharas of Sri Aurobindo Study Circle and Sri Aurobindo Mahila Pathachakra, Army Of Light as well as Sri Aurobindo Unit of Educational Research we are entering into the community to sow the seeds of a New Life that wants to make life perfect with a divine perfection. For the first time the Govt is engaging in this activity through us. This has not happened in any other province of the Nation. We take it as the Divine Mother's Grace and Blessings for Odisha.

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STATE LEVEL HEALTH SQUAD
TRAINEES - 2026

1 Dukhu Sahu
At-Ranipur Block - khariar Dist-Nuapada
Mo-9040153801

2 Bharati Sahoo
Jatni, Gandhi Nagar Dist- Khordha
Mo- 8260970571

3 Dibyabharati Gouda
At/Po: Jhadabhumi, Dist- Ganjam-761120
Mo-8457043562

4 Rupashree Sahoo
At/Po: Indupur, Dist- Kendrapada
Mo-7735018860

5 Gouri Gouda
At/Po: Kosagumuda, Dist- Nabarangpur
Mo-8455027007

6 Soni Bhoi
At/Po: Gobindpur, Dist: Sambalpur
Pin768991
Mo: 8249138256

7 Sunita Lenka
At/Po: Galadari, Dist- Jagatsinghpur
Mo: 8307253325

8 Sulekha Guru
At/PO- Bhuban, Dist- Dhenkanal
Mo-7205390133

9 Kuntala Kusulia
At- Podabai, Dist-Rayagada
Mo- 8917235567

10 Chinchui Silpa
At- Bhramarpur, Block- Nuagad
Dist- Gajapati
Mo-8280994024

11 Priya Guru
At-Balikiari, Block-Hindol
Dist- Dhenkanal-759021
Mo-8114852002

12 Holeswari Hans
At-Ranipur, Block- Khariar
Dist- Nuapada
Mo-981996265

13 Subhasree Pal
AT/Po- Taharpur, Dist- Jajpur
Mo-9938746182

14 Pinkina Behera
At- Panimura, Dist- Baragad-768033
Mo- 7436821285

15 Rani Nayak
Jamopalli, Kandhasahi, Dist- Kandhamal
Mo-7208290554

16 Tapaswini Prusty
At/Po- Kishorprasad Dist- Nayagad-752085
Mo-8658436977

17 Rashmi Parida
At/Po-Balipur, Dist- Puri
Mo:6372838997

18 Kousalya Samal
At/Po- Nimapada, Dist- Puri-752106
Mo-9090253203

19 Gitanjali Pradhan
At/Po-Simulia/ Markona Dist- Baleswar-756126
Mo- 8455840870

20 Lipi Nayak
At- Bisra, Dist- Sundargad-770036
Mo-9556537283

21 Kalpana Nayak
At- Bantala, Dist- Anugul-759129
Mo- 8260067833

22 Jagyasini
At/Po-Hirapur, Dist- Kalahandi
Mo- 9668475319

23 Dipa Das
At/Po- Baranga, Nandapur Dist- Keunjhar-758743

24 Biswabanta Bag
At/Po- Barijhola, Halwa Dist- Rayagada
Mo- 9556106064

25 Gitanjali Das
At-Khandasahi, Po-Tilottamadeipur
Dist- Bhadrak
Mo-9692637076

26 Gayatri Das
At/Po- Badanga, Dist- Mayurbhanaj
Mo- 9337690342

27 Reetanjali Bhatta
At- Atabira, Dist - Jharsuguda
Mo-955674887

28 Bipin Bihari Das
At- Gobindapada, Po- Amenakuda Dist- Cuttack
Mob-7684065410

29 Ila Sahani
At/Po- Gurudijhatia, Dist- Cuttack
Mo-7077656859

30 Sujata Sarangi
At- Santipali, Po- Jogindrapur Dist-Boudh-762016
Mo- 9937392973

PROGRAM FOR 37th STATE LEVEL SAMACON
12th & 13th SEPTEMBER 2026
Masters of Ceremony : Dr. Madhusmita Pradhan, Dr. Abhipsa Rath

DAY 1 & 2: 12 & 13.09.2026 (Venue: Matrubhaban)

8.00-9.00 am	:	Registration and breakfast
Masters of Ceremony	:	Dr. Madhusmita Pradhan, Dr.Abhipsa Rath
9.30-10.30 am	:	COMMON DISEASES AND CAUSES OF ILL HEALTH in School Children
Moderators	:	Dr. Nirmalya Pradhan, Dr. Subhakanta Sahu
Panelists	:	Dr. Jyoti Ranjan Champatiray Dr. Hemamalini Rath, Dr. Ramamani Dalai, Dr. Smruti Swain, Dr. Seema Parija, Dr. Madhusmita Pradhan
Experts	:	Dr. Bijay Kumar Mohapatra, Dr. Bijoy Kumar Sahoo, Dr. Madan Mohan Pradhan, Dr. Nirupama Mohapatra
10.30 am- 11.30 am	:	**IDENTIFYING MAJOR CAUSES OF ILLHEALTH IN PREGNANT MOTHERS AND NEWBORN IN THE COMMUNITY**
Moderators	:	Dr. Abhipsa Rath, Sri Saroj Kumar Panigrahi,
Panelists	:	Smt.Manorama Nayak, Dr. Amaresh Sahoo (SUPERINTENDENT Subarnapur CHC), Niharabala Mishra BPM(Niali),Itishree Barik CHO(Bentkar block), Minakshi Nayak ANM (Karanji SC,Tangi Block), Gitarani Bhoi ASHA (Block,Mahidharpada), Bijay Kumar Sahu, MPHS(M) Tangi CHC, Bhakti Priyadarshini Jena (SUMAN VOLUNTEER)
Experts	:	Dr. Bijay Ku. Mohapatra, Dr. Bijayeeni Mohapatra, Dr. Sujata Das, Dr. Sanghamitra Panda
12.00- 1.30 pm	:	**INAUGURAL SESSION**
Welcome Address	:	Dr. Sudhir Brahma
Report of previous year	:	Dr. Shyama Kanungo
Our Association-SAMA	:	Dr. Badal Kumar Mohanty
Introduction of this year's Theme	:	Dr. Tophan Pati
Opening of Souvenir	:	Chief Guest
Address by Guest of Honour	:	Dr. Sampadananda Mishra
Address by Chief Guest	:	Dr. Bijay Kumar Mohapatra
Vote of Thanks	:	Dr. Prasanta Nanda
1.30- 2.30 pm	:	**LUNCH**
3.00- 6.00 PM	:	CAPSULES: Erroneous lifestile and Health Risks
Chairpersons	:	Dr. Latika Behera, Dr. Nityananda Swain

i) Inimical food habits – Sri Nisith Ranjan Rout
ii) Microbes and Illness - Dr. Reba Kanungo
iii) Abuse of Mobile and Media - Dr. Soumitra Basu
iv) Sleep disorders and illhealth - Dr. Arpita Priyadarshini
v) Cluttering of home and workplace- and illhealth- Dr.Lincon
vi) Fear – as cause of ill health- Dr. Karunakar Padhy
vii) Disequillibrium of the being and ill health – Dr. Nikhil Kharod
viii) Adverse Forces and ill health- Dr. Utpala Kharod

5.30- 6.00 PM - TEA
6.30- 8.30 - PLENARY SESSION:

Chairpersons : Dr.Prashant Kumar Patra, Dr.Biranchi Narayan Mohapatra,
Dr. Kishore Ch.Mohapatra
Dr. Sampdananda Mishra-"Illness in Integral Yoga"-
Dr. Asutosh Mishra- "Mystery of Sri Jew's illness in Devasnana Purnima"

8.30 pm : **Dinner**

DAY 2 - 13.09.2026 (Sunday)

6.30-8.00 am : Guided activity: For cleansing the subconscient and inconscience - Dr. Soumitra Basu

8.00-9.00 am : Breakfast

9.00 am- 11 am : Syposium: WHY DISEASE AND DISORDER - VIEWS OF DIFFERENT DISCIPLINES

Chairpersons : Dr.Madan Mohan Pradhan, Dr. Alekh Sahoo, Dr. Bipinananda Mishra

1.) Dr. Sumana Panda, (Homoeopathy)
2.) Dr. Surendra Pradhan (Yoga)
3.) Dr. Deba Prasad Dash (Ayurveda)
4.) Dr. Gopal Ch.Dash (Karma & Astrology),
5.) Sri Milind Parasar (Naturopathy)

11.00 am - 1.00 pm: SYMPOSIUM: RISK FACTORS FOR COMMON DISEASES

Chairpersons : Dr. Dhaneswar Pradhan, Dr. Rajeev Lochan Jena,
Dr. Akhaya Kumar Mishra

HYPERTENSION : Dr. Prabhat Kumar Thatoi

DIABETES : Dr. Jayanta Kumar Panda

CARDIAC DISEASES : Dr. Dipak Kumar Das

SKIN DISEASES : Dr. Pratap Rath

LIVER DISORDERS : Dr. Parthasarathi Mishra

MENTAL DISORDERS : Dr. Soumitra Basu

1.30-2.30 pm : LUNCH

3.00-3.30pm – Chairpersons : Dr. Hemalata Swain Dr. Jayashree Patnaik, Dr: Lilavati Guru

Topic : **'Causes of common gynaecological diseases'**

Speaker : Dr.Sindhu Nandini Tripathy

3.30-4.30 pm- WORK AT HAND

Chairpersons : Dr. Sanjay Swain, Sri Sridhar Behera, Er.Padmalochan Pothal

Topic : Mechanics of getting School Health Benefits & Training for SUMAN VOLUNTEERS- By Saroj Kumar Panigrahi

Topic : How to recruit Sri Aurobindo Study Circle Workers for SUMAN VOLUNTEERS - By Smt. Manorama Nayak

4.30-5.30 pm : Theme: Venue,Dates & Organisation of Zonal Level SAMACONs (Off-line/Online):

Chairpersons : Sri Prasad Tripathy, Sri Sridhar Sahoo, Dr. Prashant Kumar Patra, Dr.Bijoy Sahoo
Sri Lalatendu Samant, Sri Laxmi Charan Dash, (ASPRUHA), Sri Sashikant Bhoi (ASTHA), Sri Akshay Kumar Biswal(KRUPA),Sri Sukanta Kumar Jena (NISTHA),Sri Dambarudhar Sahoo(SAMATA) Sri Suresh Chandra Mishra (SAMARPANA), Sri Upendra Kumar Mohapatra, Dr. Dyuman Nayak (SANGATI), Sri Madan Mohan Dani (SHANTI), Sri Mayadhar Sahoo (SATYA)

5.30 - 6.00 : Tea & Snacks and disperse

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