



Madhavbaug™

A journey to the hearts!





A journey to the hearts!



Heart disease is now the world's leading causes of death, claiming 17.3 million lives each year. A century earlier very few people used to die of heart diseases. In due course of time, heart diseases have become the number one global killer. Today, the average age of a person suffering with heart disease has come down drastically. These diseases are a global health problem with no geographic, gender, or socio-economic boundaries. Despite the tremendous advances in cardiac care made recently, including drugs, devices, and diagnostic innovation; many patients continue to die from heart diseases or live with significant morbidity.

Madhavbaug has understood the need of the hour and now completely focused on researching, innovating and implementing heart remedies and also to extend preventive strategies to control the risk factors such as diabetes, hypertension, smoking, stress and Obesity.

Madhavbaug is working with a vision of reducing the mortality and morbidity due to heart disease in India. Madhavbaug has also started a preventive cardiology chair in Maharashtra University of Health Sciences. Madhavbaug has chalked out a five year plan to get rid of this dreadful disease through public health initiatives, Screening and researched based innovative treatment Programs based on Ayurveda.

I am pleased to reaffirm Madhavbaug's strong commitment to effectively address the rising burden of cardiovascular diseases in our country.

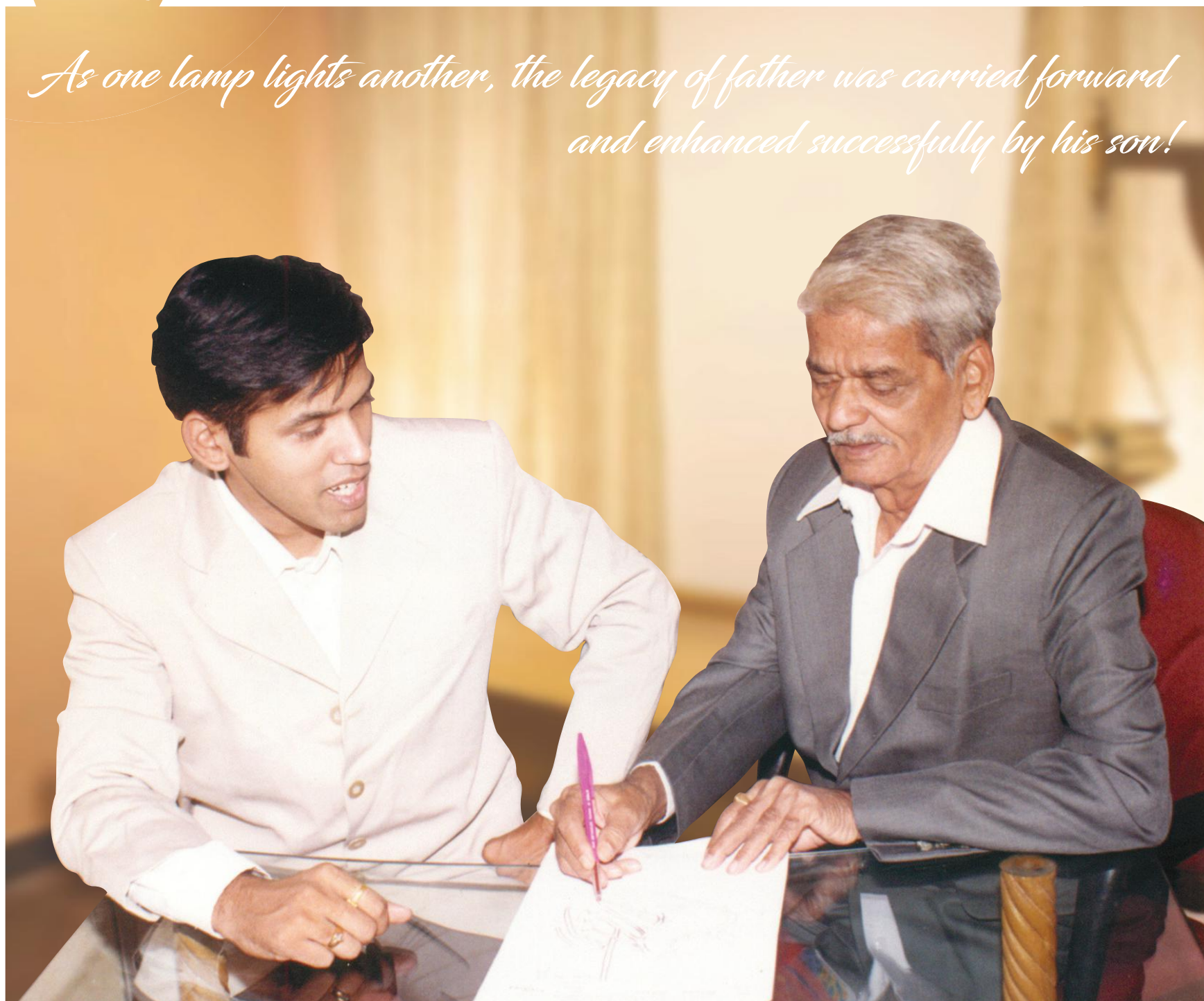


Dr. Rohit Madhav Sane CEO, Madhavbaug





*As one lamp lights another, the legacy of father was carried forward
and enhanced successfully by his son!*



The Journey Begins...

Mr. Rohit Sane, son of the famous Ayurvedic Vaidya Shri Madhav Sane, in keeping with the wishes of his father, deviated from the Ayurvedic tradition of his family and achieved an MBBS degree in modern medicine. Despite being keen to pursue a specialization in surgery and having an opportunity for higher studies, he chose to serve the patients as per Ayurvedic methods under the guidance of his father. While pondering over options for surgery (medical intervention) in Ayurveda, he learnt about Panchakarma. He started personally practising Panchakarma on patients. The patients showed improved results.

The seeds of future success of Madhavbaug were sown by this research of Dr. Rohit Sane. Thus copyrighted “Sampurna Hriday Shuddhikaran” therapy which included SNEHAN, SWEDHAN, HRIDHAY DHAARA and BASTI was put in place. The novel application of the traditional Ayurvedic treatment resulted in a healthy heart for many patients.



Inauguration of Madhavbaug Hospital, Khopoli



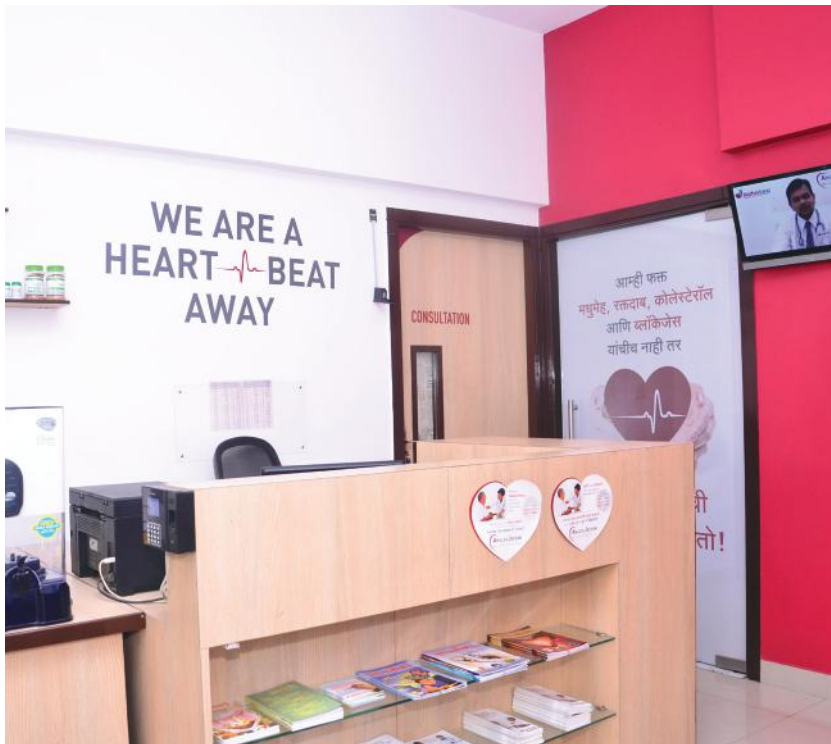
A journey to the hearts...

The success of “TOTAL HEART TREATMENT PROCESS” with heart patients, spurred Dr. Madhav Sane and Dr. Rohit Sane with a revolutionary idea. If they could have an exclusive residential Ayurvedic treatment facility for heart patients, then they could offer them a combination of PANCHKARMA, correct daily routine, yoga, exercise and controlled diet which could be the best medically guided routine for a healthy lifestyle. This would further improve their health. With this in mind, the father-son duo purchased 3.5 acres of naturally endowed land at Khopoli, near Mumbai-Pune highway. Unfortunately, while the further plans were being worked out, Dr. Madhav Sane passed away. Though it was a deep personal loss, Dr. Rohit Sane, braced himself up to fulfill his father’s dream. Working tirelessly, alone, he got the residential hospital work at Khopoli completed. In the memory of late Vaidya Madhav Sane, this facility was named Madhavbaug. Thus came into existence the world’s first residential hospital treating heart ailments without an invasive procedure like surgery.



A journey to the hearts...

The Madhavbaug Hospital at Khopoli soon started receiving a continuous stream of heart patients from far and wide. These patients would have benefited had there been a Madhavbaug hospital in the vicinity of their residence and could have been treated for not just the heart but other ailments also. With this thought Dr. Rohit Sane and his associates decided to take up a new initiative, which was to set up a Madhavbaug Clinic in Dombivli.



The clinic received overwhelming response from the very beginning. Encouraged by this initial success, similar clinics were opened at Thane and Vile Parle. Realizing the benefits of these clinics to the heart patients, it became imperative to set up such facilities on a large scale. At this juncture, the novel concept of employing the franchise model in medical field came up and thus the first franchisee at Goregaon, Mumbai came into existence.

Starting the R & D Centre of Madhavbaug

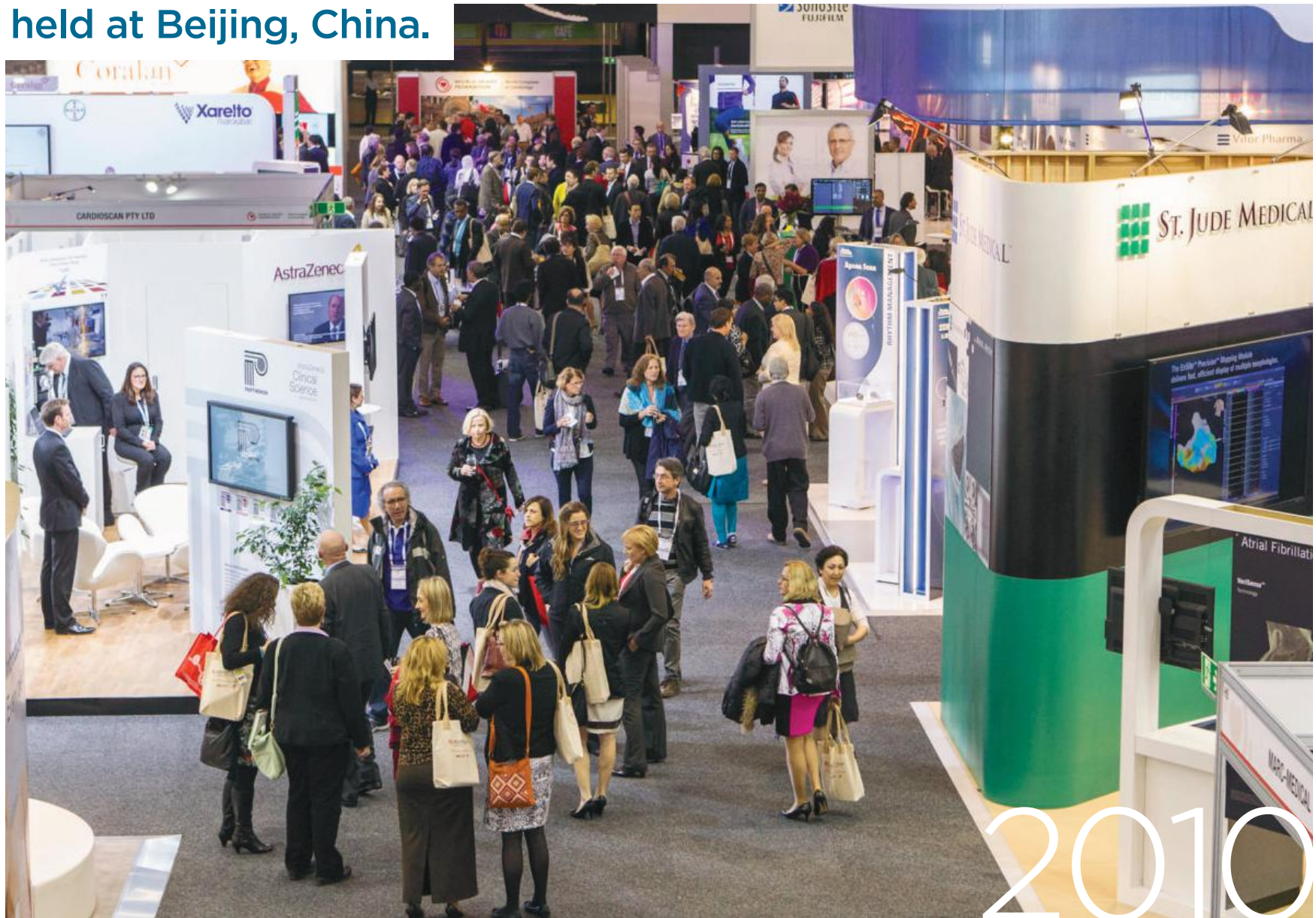




Dr. Madhav Sane and Dr. Rohit Sane both had a strong leaning towards knowledge based and research oriented work. Because of the increasing workload of Madhavbaug hospital and clinics, Dr. Rohit decided to set up an independent research center. Fortunately, he found a very competent ally for this activity in Dr. Milind Hanchate at the right time. And thus started the Madhavbaug Research Center, which catapulted the name of both Ayurveda and Madhavbaug in the medical field in India and abroad.



The Madhavbaug flag flies high at the World Cardiology Congress held at Beijing, China.



World Cardiology Congress - where the eminent heart specialists from all over the world converge. In this medical congress held at Beijing, China, the research papers from Madhavbaug on the utility of total heart purification treatment were accepted and published. Dr. Rohit Sane and Dr. Hanchate were present in this medical congress.

A NOVEL AYURVEDIC APPROACH FOR MANAGEMENT OF CHRONIC HEART FAILURES.

Rohit M Sane*, Milind Hanchate and P M Dongre¹

Madhavbaug Ayurvedic Rehabilitation Centre, Raigad (Khopoli), 410203, India
Department of Biophysics, University of Mumbai, Vidyanaigari, Santacruz (E), Kalina, Mumbai 400 098

ABSTRACT: Ayurved, a traditional Indian medicine remains the most ancient yet living traditions. There has been increased global interest in traditional medicine. It has proved to be effective in most of the heart diseases and can be a total cure for chronic heart failure. The present investigations has been carried out in 120 (male- 84, female- 36) chronic heart failure patients using novel approach of ayurved based model i.e. *Sampurna Hridaya Suddhikaran* (a complete heart cleaning). The results shows that there is improvement in the 6 Minute walk test (MWT, $r=0.74$), Stress (ST, $r=0.85$) and METS ($r=0.73$) after intervention. However, it indicates a highly significant ($p<0.001$).
*Corresponding author

Key words, Sampurna Hridaya Suddhikaran (SHS), Chronic heart failure (CHD).

INTRODUCTION:

Throughout the developed world, heart disease is worldwide problem affecting people in all communities. A recent study mentioned that India bear 60 percent of the world's heart disease burden in the next two years¹. In India prevalence heart disease is reported to be 2.3 times higher in urban population as compared to rural population². The causes and magnitude may vary geographical location and socioeconomic status. To a great extent, the disease is lifestyle-related, and results from a kapha-provoking sedentary lifestyle, coupled with excess consumption of fatty foods, especially trans-fats, insufficient intake of fruits and vegetables. factors such as stress and overwork are also known to play a major role. "Metabolic syndrome", as it is currently described, is the precursor to heart disease³. Consisting of abdominal obesity, elevated serum cholesterol and triglycerides, elevated blood pressure, insulin resistance and a prothrombotic state (sticky blood clots too easily), metabolic syndrome could more accurately be called kapha syndrome.

present there is no economical treatment available for cardiac failures. However, the ayurved may provide beneficial and promising treatment for cardiac failures/hypertension.

ayurvedic treatment referred as the use of herbal preparations, diet, meditations, yoga, pranayam etc. There is no any promising report shows the ayurvedic is effective treatment for chronic heart diseases of any cardiac ailments. Many herbs used by Ayurvedic practitioners show promise and could appropriate for larger

randomized trials. *Yoga* and *Pranayam* an integral part of Ayurveda, has been shown to be useful to patients with heart disease and hypertension. Both reduces anxiety, promotes well-being, and improves quality of life. Its safety profile is excellent. Its use as a complementary therapeutic regimen under medical supervision is appropriate and could be worth considering.

The present investigations have been carried out in 128 chronic heart patients including male and females. A novel ayurvedic approach *Sampurna Hridaya Suddhikaran* (SHS) is used for the management of them. The results suggest that SHS is very effective low cost intervention in improving the exercise tolerance of heart in Chronic Heart Failure; however this improvement was independent of age, sex and Body Mass Index (BMI).

MATERIALS AND METHODS:

Pre diagnosed 128 (male- 84, female, 36) patients of chronic heart failure were selected for the present investigation. The left ventricular ejection fraction was 30% and the mean age of the patient was 51.17 (SD= 10.73). As per WHO guidelines, the informed consent was given to patient. The exclusion criteria was - age more than 80 years, severe heart failure (NYHA grade IV), history of myocardial infarction in last 2 weeks severe joint disability which limits activity, hepatic or renal insufficiency (serum creatinine 2.5 mg/dL), Pregnancy or lactation, patients with the presence of specific medical disorders which require immediate treatment (e.g. fractures, infectious diseases, etc.)



Dr. Rohit Sane & Dr. Milind Hanchate at Poster Presentation at World Congress of Cardiology Beijing, China.



Madhavbaug organizes International Conference.

While presenting their research papers at various conferences, Madhavbaug had the opportunity to organize such a conference. This conference held at Khopoli for two days, was attended by medical professionals from India and abroad.

2010



The 101st clinic of Madhavbaug becomes operational.



If the treatment process of Ayurveda and Madhavbaug without surgery is to reach more and more heart patients, they should have the treatment facility nearer to their residence. With this thought in mind, a network of the Madhavbaug clinics was established all over Maharashtra. In just five years, the number of clinics crossed the 100 mark and reached 101.

World Cardiology Congress, Dubai



The acceptance of a research paper at an international medical conference is considered to be a matter of great prestige. To present one's research paper in such a conference, to answer the queries raised by the medical professionals who have come from all the corners of the world, is considered to be a special honour. Dr. Sane got this opportunity at the conference in Dubai.

WCC 2012 Oral Abstract Presentations

0249

Improving cardiac effort tolerance in chronic heart failure: role of noninvasive herbal procedure Sampurna Hriday Shuddhikaran

Rohit M. Sane^{1,*}, Milind S. Hanchate²¹Cardiology, ²Preventive Cardiology, Madhavbaug Cardiac Center, Mumbai, India

Introduction: Heart disease is a worldwide problem affecting people in all communities. India will bear 60% of the world's heart disease burden in the next two years and the average age of patients with heart disease is lower among Indian people who belong to the economically productive group. **Objectives:** (1) to study the exercise tolerance capacity of the chronic heart failure patient and (2) to study the effect of the *Sampurna Hriday Shuddhikaran* (SHS) model in improving the exercise tolerance capacity of chronic heart failure patients. **Methods:** A novel herbal procedure SHS which combines a four-pronged intervention of *Snehan* (oil massage to reduce vascular tone), *Swedan* and *Hrid Dhara* (thermal therapy to reduce salt and water retention), and *Basti* (rectal herbs to increase cardiac contractility) was used in each patient who received twice daily sessions of 90 min each for six consecutive days. Symptomatic patients (age 17–80 years) with congestive heart failure (grade 1–3 of New York Heart Association classification), of either sex, with an ejection fraction more than 25% and who provided written informed consent were included in study. Patients with a history of myocardial infarction in the previous 2 weeks, uncontrollable hypertension (systolic blood pressure ≥ 180 mm Hg and diastolic blood pressure ≥ 110 mm Hg). Evaluation parameters used were exercise tolerance capacity (measured by the standard 6-min walk test [6MWT] and improvement in stress test [ST]), improvement in grade of symptoms (GOS), improvement in maximum oxygen uptake ($\text{VO}_2 \text{ max}$), and improvement in metabolic equivalents (METs) taken on day 1 (preintervention) and on day 6 (postintervention). **Results:** A total of 500 patients were evaluated. Mean age = 57 ± 6 years; mean BMI = 23.5 ± 3 kg/m²; pre-existing diabetes mellitus on treatment = 32%; and past history of coronary angiography or bypass = 8%. The mean improvement in exercise tolerance as measured by 6MWT and ST postintervention was 72.6 m in 6 min and 136.1 ± 45.2 s in 9 min ($p=0.03$), respectively. The corresponding improvement in $\text{VO}_2 \text{ max}$ and METs was 3.8 ± 2.84 L/min and 2.53 ± 1.3 METs. Patient symptoms also improved. Vital parameters were stable. No significant adverse events were seen in any patient. **Conclusion:** *Sampurna Hriday Shuddhikaran* using a novel MCRP protocol was effective in improving the exercise tolerance and oxygen uptake in symptomatic chronic heart failure patients, and this improvement was independent of age, sex, and body-mass index.



“Improving Cardiac effort tolerance in chronic heart failure: Role of non invasive herbal procedure Sampurana Hriday Shudhikaran”
- Oral presentation by Dr. Rohit Sane at World Congress of Cardiology, Dubai (2012)

THE LANCET

Sampurna Hriday Shuddhikaran: an interventional health model to improve quality of life in chronic heart failure.

Rohit Sane, Milind Hanchate

Madhavbaug cardiac Rehabilitation center, Raigad, India

Background: Heart disease is a worldwide problem affecting people in all communities. The burden of cardiovascular disease in India is immense. India will bear 60% of the world's heart disease burden in the next two years and the average age of patients with heart disease is lower among Indian people who belong to the economically productive group. It is not only the lack of resources but also the inability to continue with the costly treatment that further adds to the woes of the patients. Ayurveda has not only proved beneficial in chronic heart failure but also has helped to improve the quality of life of such patients.

The objectives of this study were:

- (1) to study the exercise tolerance capacity of the chronic heart failure patient and
- (2) to study the effect of the Sampurna Hriday Shuddhikaran (SHS) model in improving the exercise tolerance capacity of chronic heart failure patients.

Methods: Novel Ayurveda-based Madhavbaug Ayurvedic Cardiac Rehabilitation Centre (MCRC) protocol that combines a four-pronged intervention of Snehana (oil massage to reduce vascular tone), Swedan and Hrid Dhara (thermal therapy to reduce salt and water retention), and Basti (rectal herbs to increase cardiac contractility) was used in each patient who received twice daily sessions of 90 min each for six consecutive days. Symptomatic patients (age 17-80 years) with congestive heart failure (grade 1-3 of New York Heart Association classification), of either sex, with an ejection fraction more than 25% and who provided written informed consent were included in study. Patients with a history of myocardial infarction in the previous 2 weeks, uncontrollable hypertension (systolic blood pressure ≥ 180 mm Hg and diastolic blood pressure ≥ 110 mm Hg), severe hepatic/renal insufficiency, or pregnancy or lactating were excluded. Evaluation parameters used were exercise tolerance capacity (measured by the standard 6-min walk test [6MWT] and improvement in stress test [ST]), improvement in grade of symptoms (GOS), improvement in maximum oxygen uptake (VO2 max), and improvement in metabolic equivalents (METs) taken on day 1 (preintervention) and on day 6 (postintervention).

Findings: A total of 200 patients were evaluated. Mean age = 55 ± 9 years; mean BMI = 24.5 ± 3 kg/m²; pre-existing diabetes mellitus on treatment = 40%; and past history of coronary angiography or bypass = 7%. The mean improvement in exercise tolerance as measured by 6MWT and ST postintervention was 70.6 min vs 5 min and 132.1 ± 85.4 s in 9 min ($p=0.03$), respectively. The corresponding improvement in VO2 max and METs was 3.1 ± 3.44 L/min and 2.23 ± 1.9 METs. Patient symptoms also improved. Vital parameters were stable. No significant adverse events were seen in any patient.

Interpretation: Sampurna Hriday Shuddhikaran using a novel MCRC protocol was effective in improving the exercise tolerance and oxygen uptake in symptomatic chronic heart failure patients, and this improvement was independent of age, sex, and body-mass index. Further studies are required to confirm these results on a large sample size.

Conflicts of interest: The authors have declared no conflicts.

The Lancet / JACC 1st Asia Pacific Cardiovascular Summit

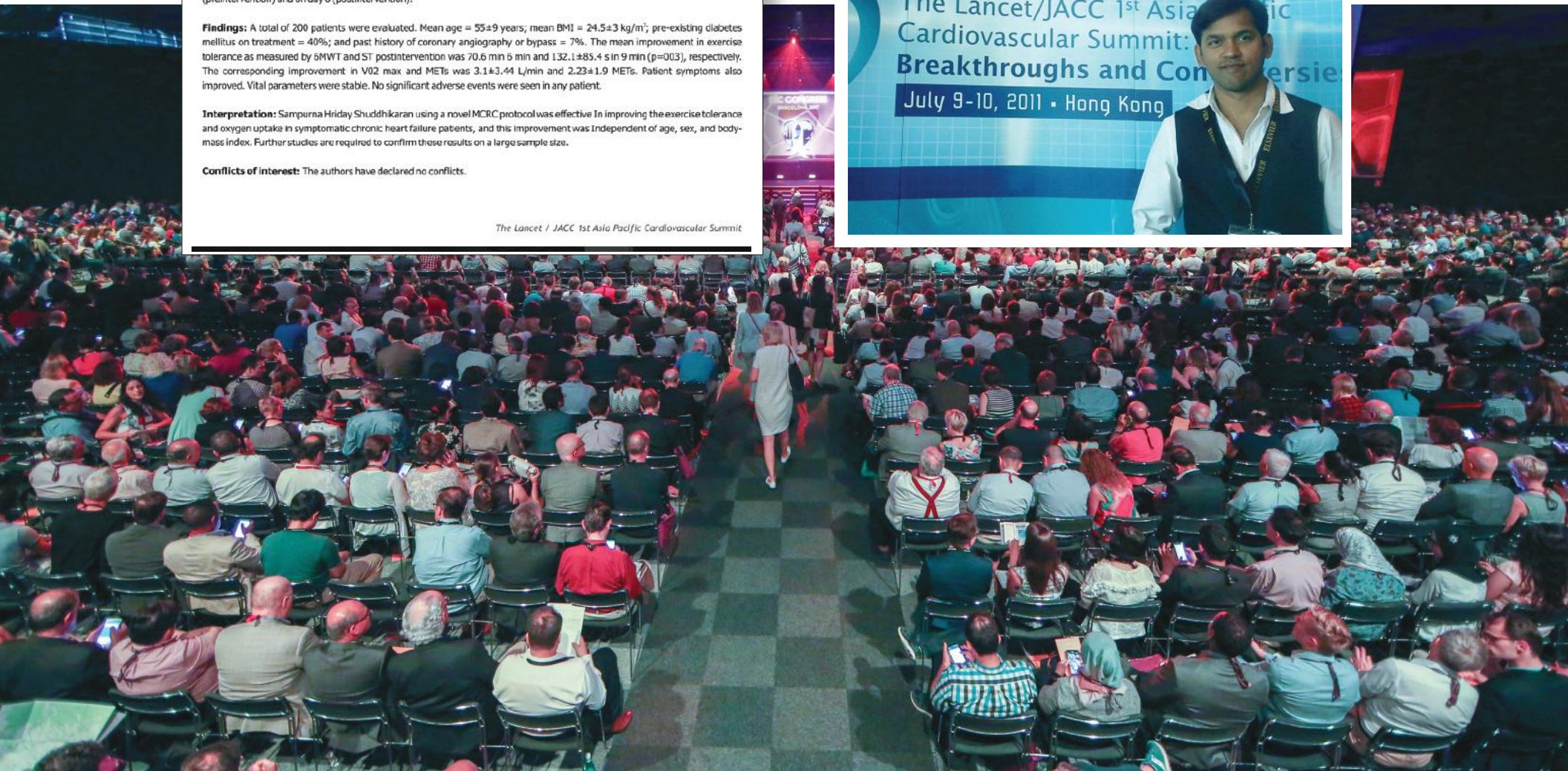
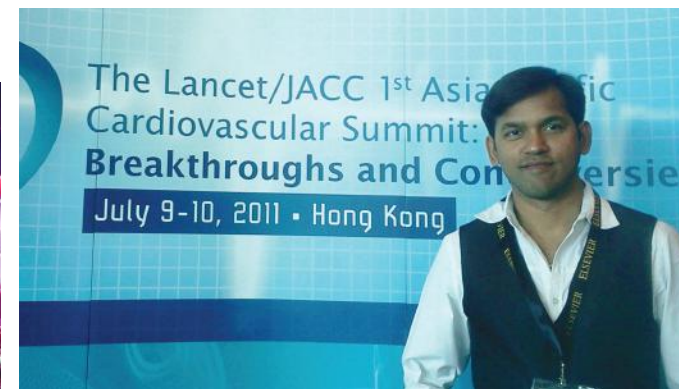
Sampurna Hriday Shuddhikaran:

An Interventional Health Model to Improve Quality of Life in Chronic Heart Failure.

[Published in The Lancet]

- Poster Presentation at JACC (Journal of American College of Cardiology) 1st Asia Pacific Summit (2011).
- Published in Journal of US-China Medical Science, USA (Nov – 2011)

LANCET is the most prestigious publication in the medical world. At the seminar organized by them, the research papers submitted by Madhavbaug were accepted. Here, Madhavbaug Research Centre achieved something that can be likened to a century on debut.



Circulation

JOURNAL OF THE AMERICAN HEART ASSOCIATION

Sampurna Hriday Shuddhikaran: An Interventional Health Model to Improve Quality of Life in Chronic Heart Failure

- Rohit Madhav Sane and Milind Sudhakar Hanchate
Madhavbaug Cardiac Rehabilitation Center, Raigad, India

Abstract: Background: Heart disease is a worldwide problem affecting people in all communities. The burden of cardiovascular disease in India is immense. India will bear 60% of the world's heart disease burden in the next two years. Average age of heart patients is lower among Indian people who belong to the economically productive group. It is not only the lack of resources but also the inability to continue with the costly treatment that further adds to the woes of the patients. Method: Present investigations has been carried out in 200 chronic heart failure patients (Mean age = 55 ± 9 years) using novel approach of Sampurna Hriday Shuddhikaran (SHS), an interventional health model. Preintervention & post interventional cardiac effort tolerance measured and compared. Results: Mean post intervention improvement in exercise tolerance measured by 6MWT (6 Minute walk test) in meters and ST (stress test) in seconds was 70.6 m in 6 min and $132.1 \pm 85.4 \text{ s}$ in 9 min ($p = 0.03$), respectively. The corresponding improvement in $\text{VO}_2 \text{ max}$ and METs was $3.1 \pm 3.44 \text{ L/min}$ and $2.23 \pm 1.9 \text{ METs}$. Conclusion: Sampurna Hriday Shuddhikaran (SHS) model is very much effective in improving the exercise tolerance of Chronic Heart Failure patients and this improvement is independent of Age, Sex and BMI of the study participants.

Key words: Sampurna Hridaya Shuddhikaran (SHS), Exercise Tolerance (ET), Chronic Heart Failure (CHF).

1. Introduction

Throughout the developed world, heart disease is worldwide problem affecting people in all communities. A recent study mentioned that India will bear 60 percent of the world's heart disease burden in the next two years [1]. In India prevalence of heart disease is reported to be 2.3 times higher in the urban population as compared to rural population. The causes and magnitude may vary with geographical location and socioeconomic status. To a great extent, the disease is lifestyle-related, and results from a kapha-provoking sedentary lifestyle, coupled with excess consumption of fatty foods, especially trans-fats, and insufficient intake of fruits and vegetables. Pitta factors such as stress and overwork are also known to play a major role.

"Metabolic syndrome", as it is currently described, is the precursor to heart disease [3]. Consisting of abdominal obesity, elevated serum cholesterol and triglycerides, elevated blood pressure, insulin resistance and a prothrombotic state (sticky blood that clots too easily), metabolic syndrome could more accurately be called kapha syndrome. So whatever may be the cause patients ultimately lands up in chronic heart failure. Chronic Heart Failure (CHF) is a condition in which the heart's function as a pump to deliver oxygen rich blood to the body is inadequate to meet the body's needs. CHF due to systolic or diastolic dysfunction resulting from ischemic

heart disease, Myocardial Infarction (MI) leads to reduced Cardiac Output (CO). This generates neurohumoral responses resulting in activation of sympathetic system and secretion of ADH (Anti-diuretic hormone), BNP (Brain Natriuretic Peptide) and Renin angiotensin system stimulation. Consequently the blood volume increases due to salt and water retention and vasoconstriction increasing the peripheral resistance.

Average age of patients with heart disease is lower among Indian people who belong to the economically productive group. It is not only the lack of resources but also the inability to continue with the costly treatment that further adds to the woes of the patients.

At present there is no economical treatment available for cardiac failures. A comprehensive herbal therapy named Sampurna Hriday Shuddhikaran (SHS) was planned to reverse the effect of above pathophysiology.

Its use as a complementary therapeutic regimen under medical supervision is appropriate and could be worth considering. The present investigations have been carried out in 200 chronic heart patients including male and females. A novel herbal procedure Sampurna Hriday Shuddhikaran (SHS) is used for the management of them. The results suggest that SHS is very effective low cost intervention in improving the exercise tolerance of heart in Chronic Heart Failure; however this improvement was independent of age, sex and Body Mass Index (BMI).

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Successful presentation of paper
**‘Sampurna Hriday Shuddhikaran:
An Interventional Health Model to Improve
Quality of Life in Chronic Heart Failure’**
at the seminar organised by American
Heart Association and paper publication in
Circulation - Journal of the American Heart
Association 2013



Inauguration of Kondhali Hospital

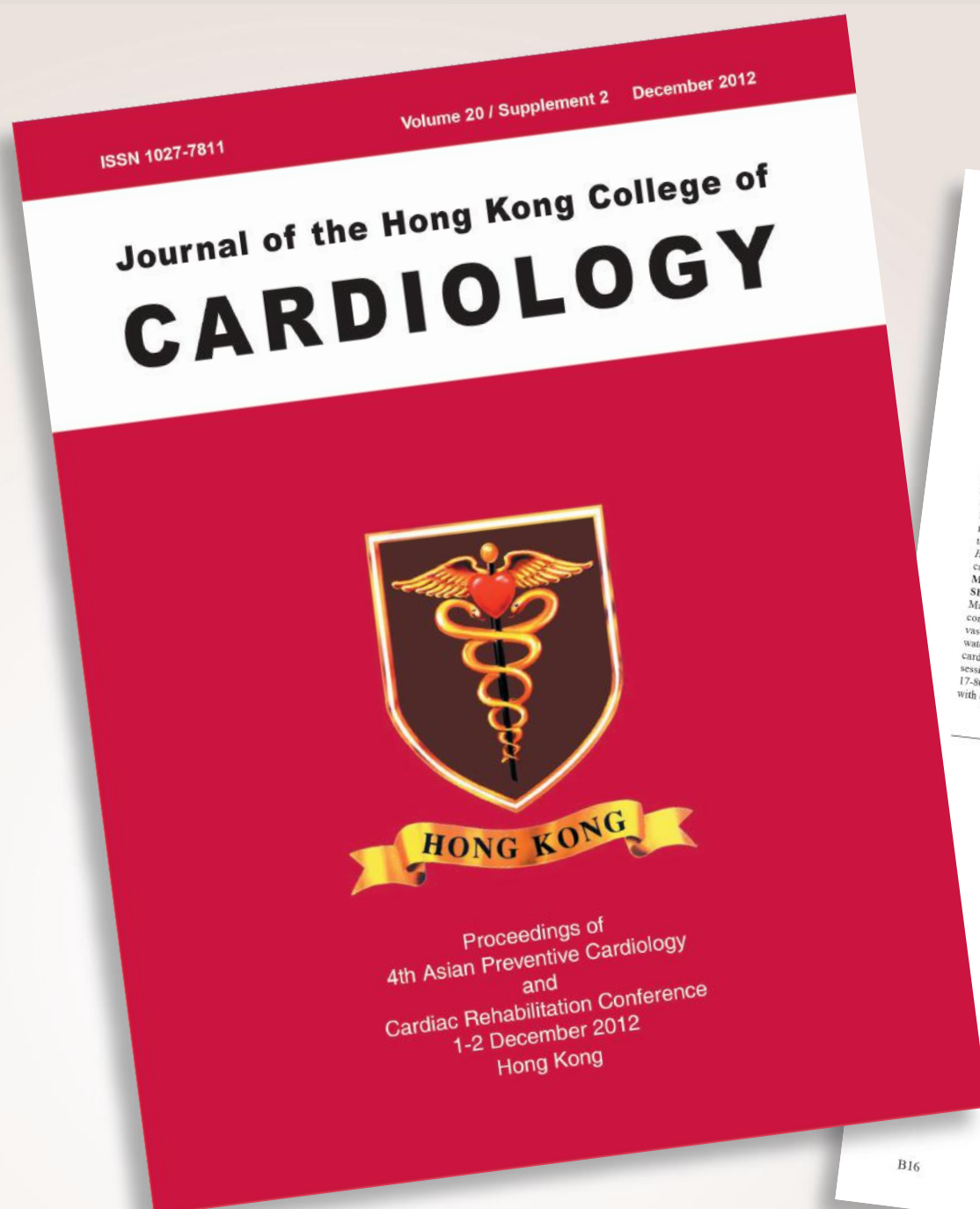


Not only from India but heart patients from different parts of the world started coming to Madhavbaug at Khopoli for treatment. When this hospital started operating to its limits, the need for another such facility was strongly felt. Nagpur being the geographical center of the country, it was decided to open a clinic there. This hospital is on the Nagpur-Amravati Highway near the Kondhali village, on a sprawling 6 acre plot.



“Role of non-invasive herbal procedure Sampurna Hriday Shudhikaran”

Oral presentation by Dr. Rohit Sane at 4th Asian Preventive Cardiology and Cardiac Rehabilitation Conference, Hong Kong (2012)



4TH ASIAN PREVENTIVE CARDIOLOGY AND CARDIAC REHABILITATION CONFERENCE

ABSTRACTS
Abstracts Presentation (Oral):

31.
Sampurna Hriday Shudhikaran (SHS): A Novel Noninvasive Herbal Procedure to Improve Effort Tolerance in Chronic Heart Failure
R.SANE, M.HANCHATE
Madhavbaug Ayurvedic Cardiac Rehabilitation Center, Raigad, India

Objective: Heart disease is a worldwide problem affecting people in all communities. India will bear 60% of the world's heart disease burden in the next two years and the average age of patients with heart disease in the is not only the lack of resources but also the inability to continue with the costly treatment that further adds to the woes of the patients. Inadequate pumping of heart leads to chronic heart failure which causes effort intolerance. Conditions like coronary artery disease, hypertension, post myocardial infarction, Cardiomyopathy, heart valve disease ultimately leads to CHF. Present study was carried out to evaluate the effect of the *Sampurna Hriday Shudhikaran* (SHS) model in improving the exercise tolerance capacity of chronic heart failure patients.

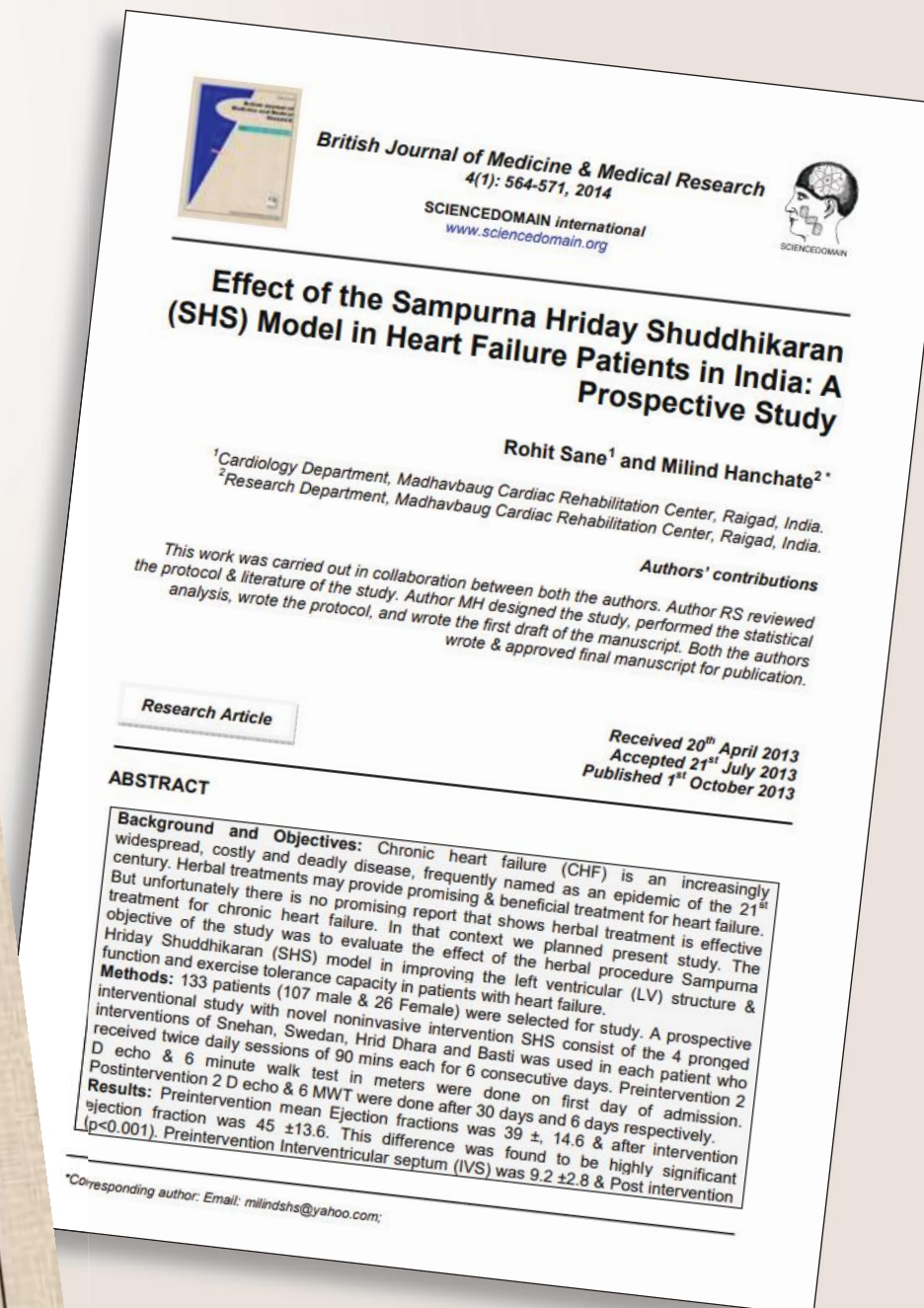
Methods: Novel noninvasive interventional health model *Sampurna Hriday Shudhikaran* (SHS) procedure was used to treat CHF patients at Madhavbaug Cardiac Rehabilitation Centre, Mumbai (INDIA). SHS combines the 4 pronged interventions of *Sheehan* (oil massage to reduce water retention and causing vasodilatation) and *Basti* (rectal herb to increase cardiac contractility) was used in each patient who received twice daily sessions of 90 mins each for 6 consecutive days. Symptomatic patients (age 17-80 years) with CHF (Grade 1-3 of NYHA classification), of either gender, with ejection fraction more than 25% & provided written informed consent were included in study. Patients with history of Myocardial infarction in last 2 weeks, uncontrollable hypertension (SBP ≥ 180 & DBP ≥ 110 mmHg), severe hepatic/renal insufficiency, pregnancy/lactating were excluded. Evaluation parameters used were – Exercise Tolerance capacity [as measured by standard 6 minute walk test (6MWT)], Improvement in Stress test (ST); Improvement in Grade of Symptoms (GOS), Improvement in maximum oxygen uptake (VO₂max) & Improvement in metabolic equivalents (METs), which were taken on day 1 (pre-intervention) and on day 7 (post-intervention).

Results: A total of 1200 patients were evaluated. Mean age–55±9 years; Mean BMI–24.5±3.4 kg/m². Preexisting Diabetes Mellitus on treatment–40%; Past history of coronary angiography/bypass–7%. The mean improvement in exercise tolerance as measured by in 6MWT & ST post-intervention was 70.6 meters/8 mins & 132.1±85.4 seconds/9 mins (p<0.05) respectively. The corresponding improvement in VO₂max & METs was 3.1±3.44 lt/min & 2.23±1.9. Patient symptoms also improved. Vital parameters were stable. No significant adverse events were seen in any patient.

Conclusions: Novel noninvasive *Sampurna Hriday Shudhikaran* procedure was effective in improving the exercise tolerance & oxygen uptake in symptomatic chronic heart failure patients and this improvement was independent of age, gender and BMI.

Effect of the Sampurna Hriday Shuddhikaran (SHS) Model in Heart Failure Patients in India: A Prospective Study.

Published in British Journal of Medicine & Medical Research
(Oct - 2013)



Madhavbaug counted among the Top 100 Franchisee Unions in India

2013



Considering the spectacular progress made by Madhavbaug in the field of medical services in such a short time and the new business opportunities it created, FRANCHISEE INDIA selected Madhavbaug as one of the top 100 companies having the best Franchisee union in India.

Availability of Stress Test Facility at all Madhavbaug Clinics

2014



In order to reach a perfect diagnosis, taking the help of modern medical test facilities is a clear objective at Madhavbaug. To ascertain the efficiency of the patient's heart the Stress Test Equipment is primarily used all over the world. As such, all the Madhavbaug clinics are equipped with the computerized Stress Test equipment.



Aarogyam

Healthy Heart
Healthy Living

Hriday Sampada

TM

First step of the elderly towards a Healthy Heart!

The increasing number of aging population and the ever increasing proportion of the incidences of heart diseases among them is an alarming reality in India. There is a lot of misunderstanding and fear about the heart diseases among the common people. To overcome this, Madhavbaug took up an initiative named AROGYAM HRIDAY SAMPADA which was an important health awareness program. Hundreds of programs were held all over Maharashtra under this initiative, where Stress Tests were conducted absolutely free of charge for the elderly.

Aarogyam Hriday Sampada





First step of the elderly towards a Healthy Heart!



Doctors taking oath...



Patient education & awarness activities







जगत प्रकाश नड्डा
Jagat Prakash Nadda



MESSAGE

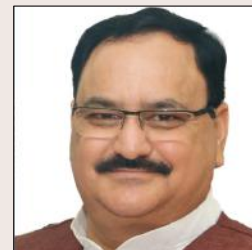
As the Health Minister of India I sincerely welcome Vd. Sane Trust and Madhavbaug's initiative 'Arogyam Hriday Sampada'.

In view of the World Health Organization's prediction that India is going to become the heart disease capital of world in 2020. We the Health Department are committed to help people achieve and maintain good health in every respect. This makes the world of Vd. Sane Trust and Madhavbaug all the more significant from our perspective. 'Arogyam Hriday Sampada's aim to reach three lakh people in both urban and rural areas of the state of Maharashtra and Goa, screen one lakh senior citizens in the next one year and create awareness about heart health in the vast general public through the 6000 seminars and workshops is highly commendable. The Health Ministry on its part will provide all possible cooperation to 'Arogyam Hriday Sampada' in their efforts through all the relevant government mechanisms.

I wish Arogyam Hriday Sampada and Madhavbaug a great success.

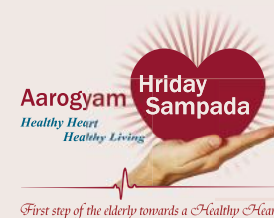
(J. P. Nadda)

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HON. JAGAT PRAKASH NADDA

Minister of Health & Family Welfare,
Government of India



A journey to the hearts...



श्रीपाद नाईक
SHRIPAD NAIK

राज्य मंत्री (स्वतंत्र प्रभार)
आयुर्वेद, योग व प्राकृतिक चिकित्सा, यूनानी सिद्ध एवं
होम्योपैथी (आयुष) एवं
राज्य मंत्री (स्वास्थ्य और परिवार कल्याण)
भारत सरकार
MINISTER OF STATE (INDEPENDENT CHARGE) FOR
AYURVEDA, YOGA & NATUROPATHY
UNANI, SIDDHA AND HOMOEOPATHY (AYUSH)
AND MINISTER OF STATE FOR HEALTH & FAMILY WELFARE
GOVERNMENT OF INDIA

10TH March, 2015

Health of the Senior citizen is a major indicator of wellness of a family and in turn, of the society. A healthy and happy senior citizen in the family, naturally helps maintain good physical and emotional health in the family environment just as collectively, they do in the society.

In that respect, I welcome the idea of Madhavbaug and Vaidya Sane Trust to especially choose senior citizens for health screening. Reaching three lack people and screening one lakh senior citizens for heart health in one year is a tremendous task and my department will be happy to extend all possible help to them in their endeavor.

My best wishes to Madhavbaug and Arogyam Hriday Sampada !

(Shripad Naik)

Dr. Rohit Madhav Sane
Madhavbaug.

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HON. SHRIPAD NAIK

Minister of State
(Health & Family Welfare & AYUSH Dept.)



मुख्य मंत्री
महाराष्ट्र



Chief Minister
Maharashtra

१७ मार्च २०१५

शुभेच्छा

हृदयविकाराबाबत जनजागृती करण्यासाठी वैद्य साने ट्रस्टतर्फे आरोग्यम हृदयसंपदा ही मोहीम राबविण्यात येत असल्याचे समजून आनंद झाला.

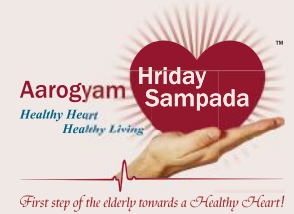
सध्या देशातच नव्हे तर जगभरात हृदयविकाराचे प्रमाण वाढते असून आरोग्यविषयक एक मोठी समस्या म्हणून तिचा सर्वांनाच गांभिर्याने विचार करावा लागत आहे. राज्याच्या सर्वांगीण विकासासोबतच निरामयी महाराष्ट्रासाठी राज्य शासन प्रयत्नशील आहे. शासकीय पातळीवर याबाबत सुरु असलेल्या प्रयत्नांना विविध स्वयंसेवी संस्थांची जोड मिळाल्यास अधिक व्यापक व प्रभावी कार्य होऊ शकेल. त्यादृष्टीने वैद्य साने ट्रस्टची ही मोहीम उपयुक्त ठरेल, असा मला विश्वास वाटतो.

आरोग्यम हृदयसंपदा या मोहिमेस मनःपूर्वक शुभेच्छा !

(देवेंद्र फडणवीस)



HON. DEVENDRA PHADANVIS
Chief Minister, Maharashtra



First step of the elderly towards a Healthy Heart!

A journey to the hearts...



मंत्री
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महाराष्ट्र शासन
मंत्रालय, मुंबई ४०० ०३२.
www.maharashtra.gov.in

दिनांक : १७.०३.२०१५

- : शुभेच्छा संदेश :-


वैद्य साने ट्रस्ट आणि माधवबाग यांनी हृदयरोग आणि मधुमेहीसाठी “आरोग्यम् हृदयसंपदा ” ही चळवळ सुरू करण्याचा संकल्प केला असल्याची माहिती मिळाली. या उपक्रमाच्या शुभारंभास आपण मला निमंत्रित केले त्याबद्दलही धन्यवाद.

जागतिक आरोग्य संघटनेच्या अंदाजानुसार सन-२०२० पर्यंत जगातील सर्वात जास्त हृदयरुग्ण आणि मधुमेही भारतात असतील. हे आरोग्य व्यवस्थेपुढील फार मोठे आव्हान आहे. राज्याची सार्वजनिक आरोग्य यंत्रणा यासाठी सक्षम करणे हे शासनाचे कर्तव्य असल्याने सर्वसामान्य गरीब रुग्ण, दुर्गम व डोंगराळ भागातील आदिवासी बांधव यांच्यापर्यंत आरोग्य सेवा पोहोचविणे यासाठी शासनाने, “ऑपरेशन कायापालट” हा आरोग्य सेवा सुधारणेचा उपक्रम हाती घेतला आहे.

तथापि, लोकसंख्येची घनता, सामाजिक, आर्थिक व भौगोलिक परिस्थिती व समाजातील आरोग्य विषयक जाणीवा लक्षात घेता चांगल्या आरोग्य सेवेचे शिवधनुष्य एकट्या शासनाने पेलणे अवघड आहे. म्हणून आरोग्य सेवेतील खाजगी ट्रस्ट, एन.जी.ओ. आणि औद्योगिक घराण्यांची सामुहिक जबाबदारी शासनासाठी मोलाची ठरेल.

वैद्य साने ट्रस्ट आणि माधव बाग यांनी स्वतः पुढाकार घेऊन हृदयरोग टाळण्यासाठी मुंबई, पुणे, नाशिक, नागपूर अशा महानगरांपासून ते शिरपूर-धुळे, साकोली-भंडारा, उदगीर-लातूर, कुडाळ-सिंधुदुर्ग अशा लहानमोठ्या गावांपर्यंत जाणीव जागृतीची स्वास्थ्य चळवळ हाती घेतली आहे, याबद्दल या चळवळीतील सर्वांचेच अभिनंदन.

आपल्या या स्तुत्य उपक्रमास माझ्या हार्दिक शुभेच्छा !

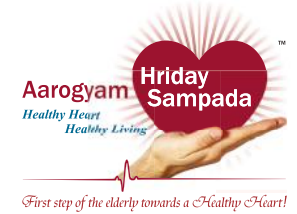

(डॉ.दीपक सावंत)

डॉ.रोहित माधव साने,
संस्थापक संचालक, वैद्य साने ट्रस्ट,
नौपाडा, ठाणे.



HON. DR. DEEPAK SAWANT

Minister of Health & Family Welfare,
Government of Maharashtra





विनोद तावडे

मंत्री

शालेय शिक्षण व क्रिडा, उच्च व तंत्र शिक्षण, वैद्यकीय शिक्षण, मराठी भाषा, सांस्कृतिक कार्य
महाराष्ट्र राज्य

दिनांक : १७ मार्च, २०१५

शुभसंदेश

वैद्य साने ट्रस्ट आणि माधवबाग संस्थेच्या आरोग्य क्षेत्रातील कार्याबद्दल जाणून घेतल्यानंतर समाधान वाटले. आपली संस्था 'आरोग्य हृदयसंपदा' या स्वास्थ्य चळवळीच्या माध्यमातून आरोग्यविषयक जाणिवांचा विस्तार साधणार आहे, ही निश्चितच अभिनंदनीय बाब आहे.

हृदयरोग आणि मधुमेह यांचे प्रमाण वेगाने वाढत असताना मोठ्या शहरांसह ग्रामीण भागातही आपण पोहोचणार आहात हे कौतुकास्पद आहे. जागतिकीकरण आणि अन्य संबंधित घटकांमुळे जीवनशैलीवर विपरीत परिणाम होत आहेत. संपूर्ण समाजाचे यामुळे प्रत्यक्ष व अप्रत्यक्षरीत्या अनेक अर्थानी नुकसान होत आहे. या परिस्थितीत आपले आरोग्यविषयक कार्य समाजाला आरोग्य, उर्जा व प्रेरणा देणारे ठरो, ही सदिच्छा!

वैद्य साने ट्रस्ट आणि माधवबागला पुढील कार्यासाठी आणि या माहितीपुस्तिकेसाठी माझ्या मनःपूर्वक शुभेच्छा!

आपला

(विनोद तावडे)

(विनोद तावडे)

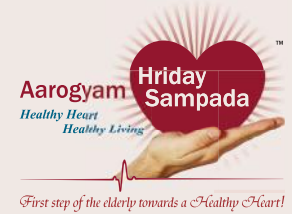
१०८, पहिला मजला, विस्तारीत इमारत, मंत्रालय, मुंबई-४०००३२.

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HON. VINOD TAWADE

Minister of Higher & Technical Education
Marathi Bhasha Cultural Affairs
Government of Maharashtra



A journey to the hearts...



HON. DR. K. R. KOHLI

Director of Ayurved,
Maharashtra State



सत्यमेव जयते

Dr. K. R. Kohli

M.D.(Ay) Ph.D
Director of Ayurved,
Maharashtra State

The human cardiovascular system is a masterpiece of networking inherently timed to precisely perform the vital task of circulating the oxygenated nutrient rich blood to each and every cell of the human body. The human heart beats 35 million times a year without ever making a stop for repairs, each heartbeat symbolising the continuity of life.

No wonder the Heart or Hridayam is termed as a Pradhan Marma (most vital organ), Pranaytanam (the abode of life or vitality) and Chetanasthanam (seat of consciousness and mind) in ancient Ayurvedic treatises.

The cardiovascular diseases are amongst the most prominent Non Communicable Diseases that result in significant morbidity and mortality and therefore merit prompt preventive and curative therapeutic interventions.

The major risks for cardiovascular disease are– smoking, diabetes, high blood pressure, elevated cholesterol, unfavourable genetics, age, and gender.

Most cardiovascular diseases can be prevented by addressing behavioural risk factors such as tobacco use, unhealthy diet and obesity, physical inactivity and harmful use of alcohol using population-wide strategies. People with cardiovascular disease or who are at high cardiovascular risk (due to the presence of one or more risk factors such as hypertension, diabetes, hyperlipidaemia or already established disease) need early detection and management using counselling and medicines, as appropriate.

Under the leadership of the WHO, all Member States (194 countries) agreed in 2013 on global mechanisms to reduce the avoidable NCD burden including a "Global action plan for the prevention and control of NCDs 2013-2020". This plan aims to reduce the number of premature deaths from NCDs by 25% by 2025 through nine voluntary global targets. Two of the global targets directly focus on preventing and controlling CVDs.

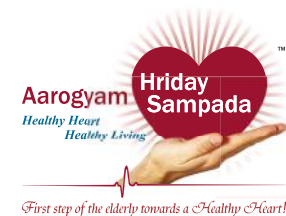
Current W.H.O. recommendations for primordial prevention of cardiovascular diseases include a balanced diet, regular physical activity, smoking cessation and stress management.

Ayurved mentions specific curative and preventive treatment modalities for Heart diseases prominent amongst which are the Panchakarma therapies periodically for Generalised cleansing of body channels, localised therapeutic procedures like Uro Basti and Hrud Basti to improve cardiac blood supply, intake of medicinal formulations containing Hridya Dravyas or cardiac tonics and comprehensive stress management with procedures like Shiro Dhara accompanied by proper meditation and Yoga.

Thus Ayurved provides for a composite management not only for prevention but even for cure of early heart diseases whether circulatory or conductive in nature.

Sane Care Madhavbaug, inspired by the principles of the visionary and eminent Ayurvedic physician Late Vaidya Madhav Sane and currently guided by renowned Physician Dr. Rohit Sane, is a well known name in Ayurvedic fraternity spread across the breadth and length of Ayurved with cardiac centers, Ayurvedic Clinics, Herbal Plantation Projects, and it is rendering yeomen services in the field of Preventive Cardiology.

I sincerely applaud their novel health initiative or movement called "Arogyam Hridayasampada" to help people avert heart ailments and wish this venture a grand success.





क्र. मंत्री/सा.बां.(सा.ऊ.)/वि.आच.पी./कि.न./१३८/२०१५

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(सार्वजनिक उपक्रम),
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दिनांक: २२.०३.२०१५

शुभेच्छापत्र

आपल्या भारत देशामध्ये हृदयरुग्ण आणि मधुमेहरुग्ण यांचे प्रमाण झपाट्याने वाढत आहे. महाराष्ट्रामध्ये हि आकडेवारी लक्ष वेधून घेणारी आहे हे सत्य आहे. अशा परिस्थितीत हृदयरोगाविषयी जनसामान्यांमध्ये असलेले गैरसमज दूर करून हृदय रोग टाळण्यासाठी जागृती करण्याकरीता वैद्य साने ट्रस्ट व माधवबाग आरोग्य संपदा हि स्वास्थ चळवळ आपण हाती घेऊन २५०तज्ञ डॉक्टरांमार्फत मार्गदर्शन कार्यक्रम हाती घेतला आहे. हा उपक्रम अतिशय स्तुत्य असा आहे.

आपल्या या उपक्रमामुळे जेष्ठ नागरीकांच्या आरोग्य रक्षणाबरोबरच जनजागृती होणार आहे. आपल्या यासारख्या उपक्रमाची समाजामध्ये नितांत आवश्यकता आहे.

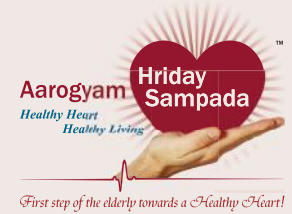
आपल्या या स्तुत्य उपक्रमास मी मनःपूर्वक शुभेच्छा देतो.

(एकनाथ शिंदे)



HON. EKNATH SHINDE

Cabinet Minister - PWD
Maharashtra State Government



First step of the elderly towards a Healthy Heart!

Inception of New Treatment Methods



Treating heart ailments is the identity of Madhavbaug. It occurred to Dr. Sane that in order to curb the incidences of heart ailments, it is very important to regulate the main contributing factors like diabetes, hypertension and obesity. Therefore, after considerable research on them, new treatment methods were introduced. Similarly, specific treatment methods were introduced for various types of heart ailments.

New Treatments:

Heart Failure Reversal
Treatment (HFRT)

Ischemia Reversal Program (IRP)

Plaque Stabilisation Therapy (PST)

CAD Complication
Management Program
(PRE-FAILURE)

CAD Complication
Management Program
(PRE-ISCHEMIA)

Blood Pressure
Management Program

Blood Pressure Complication
Management Program
(PRE-FAILURE)

Blood Pressure Complication
Management Program
(PRE-ISCHEMIA)

Comprehensive Diabetic
Care Program

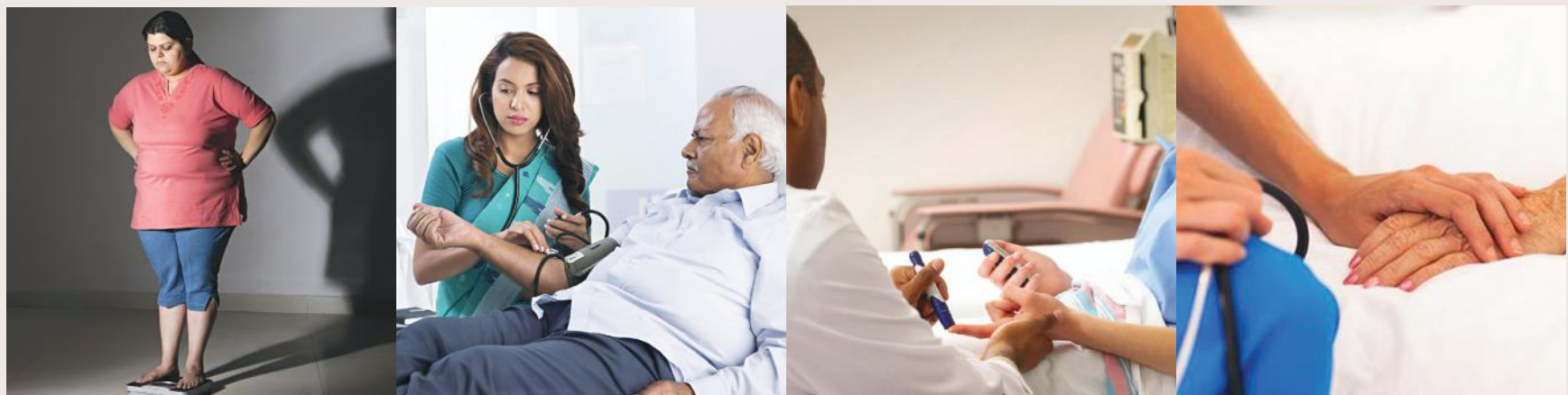
Diabetes Complication
Management Program
(PRE-FAILURE)

Diabetes Complication
Management Program
(PRE-ISCHAEMIA)

Obesity Care Plan (OCP)

Endoprotector Therapy

Cardioprotective Therapy



5th International Conference on Clinical & Experimental Cardiology, USA

Evaluation of the efficacy of the Ischemia Reversal Program (IRP) as add on therapy to conventional treatment in patients with Stable Ischemic Heart Disease (IHD)

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Rohit Sane et al., J Clin Exp Cardiol 2015, 6:4
http://dx.doi.org/10.4172/2155-9880.S1.024

5th International Conference on

Clinical & Experimental Cardiology

April 27-29, 2015 Philadelphia, USA

Evaluation of the efficacy of the Ischemia Reversal Program (IRP) as add on therapy to conventional treatment in patients with Stable Ischemic Heart Disease (IHD)

Rohit Sane, Rohul Mandale
Madhavrao Sane Care Mumbai, India

Introduction: CVD (Cardiovascular diseases) affects Indians with greater frequency and at a younger age than counterparts in developed countries, as well as many other developing countries. CVD manifests here almost 10 year earlier on an average than other countries in the world, resulting in substantial number of deaths in working age group. This calls for the need to develop effective and economical treatment measures to address the issue. In classical Ayurvedic texts there is mention of various therapeutic procedures which can be adopted for improving the functional capacity and quality of life in patients with cardiovascular diseases.

The present study has been planned to evaluate the efficacy of IRP (Ischemia reversal program), a combination of Snehana (Oleation), Swedana (fomentation) and Basti (medicated enema) on improving the functional capacity and quality of life in patients with Ischemic heart disease (IHD).

Materials and Methods: Inclusion and Exclusion criteria: Patients of either sex, between 25 to 65 years of age with clinical diagnosis of Stab and time of onset of ischemia with stress test by M. Bruce protocol in between 60 to 600 seconds, significant occlusion in branches of coronary artery seen in CAG report were recruited in the study. Pregnant or lactating females or females planning to become pregnant during the course of the study, those with acute heart failure, acute decompensated heart failure attack within last 3 months were excluded from the study. Patients who were not on stable dose of standard treatment of chronic heart failure since last 3 months and needed upward dose titration, patients with uncontrolled hypertension (Systolic blood pressure (SBP) more than 150 and Diastolic blood pressure (DBP) more than 90) & blood sugar level (fasting below 60 and Post Prandial above 250) and patients with anemia (Haemoglobin less than 10gm%) were also excluded from the study.

Ischemia Reversal Program (IRP): The IRP therapy consists of three steps:

- Snehana (Oleation) which involves oil massage with Sesame oil. The procedure was carried out for 20 minutes with 15 to 30 strokes, followed by Swedana (fomentation).
- The Swedana was done by asking the patient to lay down in supine position in a wooden box with his/her neck outside the box for 15-20 minutes or till the patient was able to tolerate the procedure.
- Further Basti (per rectal drug administration) of 100 ml decoction of medicated herbs (Tribulus terrestris, Curcuma longa, Phyllanthus emblica) was administered to the patient by the rectal route.

Dose and Duration of treatment:

- The IRP therapy was administered as 1 therapy daily for 7 Days i.e. 7 IRP therapies & 23 days of follow up. The therapy was administered at 10 am in the morning, maintaining a gap of at least 24 hours in between two therapies.

Methods of Evaluation: The detail history of the patient along with demographic information such as age and sex of the patient was recorded on Day 1. Further the patients were classified based on the cardiac functional capacity as per NYHA (New York Heart Association) classification before and after treatment. The stress test was conducted on Day 1, Day 7 and day 30 to evaluate the effect of IRP on the stress test duration, metabolic equivalents (METs) and Time of onset of ischemia. The patients were also assessed for improvement in the symptoms of IHD and overall health, any other associated complaints and requirement of concomitant drug usage before and after the study.

Results: The IRP therapy was administered to 29 patients, of whom 26 were male and 3 were female. The mean age of the patients recruited in the study was 58.93 ± 7.61 years. At the baseline the average weight of the patients was 73.03 ± 14.20 Kg which was decreased to 70.84 ± 13.46 Kg at the end of IRP therapy (Day 7). Mean time of onset of Ischemia at day 1 was 562.13 sec which was improved to 733.35 sec hence time to onset of ischemia was improved by 171.22 sec ($p < 0.05$) at end of day 30.

CONCLUSION: Ischemia Reversal Program (IRP) when administered as add on therapy to conventional treatment may improve blood supply to myocardium & reduced symptoms of angina to improve quality of life in patients with stable Ischemic Heart Disease (IHD).

Biography

Rohit Sane, Pioneer of Ayurvedic non-invasive cardiology in India with those 200+ Ayurvedic physicians team treated more than 20,000 CHD patients.

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J Clin Exp Cardiol 2015
ISSN: 2155-9880 JCEC, an open access journal

Cardiology-2015
April 27-29, 2015

Volume 6, Issue 4



Padmashree Dr. Cherian, first Cardiologist
to perform open heart surgery in India in 1975.



Madhavbaug's CMO Dr. Gurudatta Amin &
Sr. Research Associate Dr. Rahul Mandole at AICCCON,
New Delhi 2016.

5th International Conference on Clinical & Experimental Cardiology, USA

A Retrospective cohort to study the mortality and survival rate amongst Chronic Heart Failure (CHF) patients after Ayurvedic Sampurna Hruday Shudhikaran (SHS) therapy



A Retrospective Cohort To Study The Mortality And Survival Rate in Chronic Heart Failure (CHF) Patients After Multidisciplinary Heart Failure Reversal Therapy (HFRT)

Dr. Rohit Sane, Dr. Gurudatta Amin, Dr. Rahul Mandole
Madhavbaug Multidisciplinary Cardiac Care Clinics & Hospital

Introduction

India will have nearly 61 million coronary heart disease (CHD) cases which would lead to 3.4 million of deaths by year 2015. So we thought that Heart Failure Reversal Therapy (HFRT), a Multidisciplinary non-interventional therapy, can provide convincing beneficial outcomes in long term chronic heart failure (CHF) patients. Therefore, present study was aimed to assess the effectiveness of HFRT retrospectively in CHF patients after 3 years.

HFRT consisting of four major procedures – Snehan (Centripetal Oleation), Swedan (Thermal Vasodilation), Hridhara (Herbal decoction thoracic drip), Basti (Per rectal medication).

Methods

In this retrospective cohort study, 690 patients who were admitted in Madhavbaug centres across Maharashtra during the year 2010 - 2011, were contacted by phone, out of which 542 patients were willingly to participate in this survey and were consented verbally. Primary data was collected using a tailored questionnaire over phone and analyzed for mortality, survival and re-hospitalization rates.

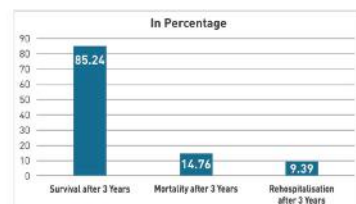
Bibliography

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Dr Rahul Mandole Clinical Research Associate Madhavbaug Multidisciplinary Cardiac Care Clinics & Hospitals

For details log on to www.madhavbaug.org

Results

HFRT showed remarkable improvement in study population where 72.32% patients improved from NYHA Class II and III to NYHA Class I, 12.96% still possessed NYHA Class II, III and IV symptoms and 14.76% were dead. The re-hospitalization rate was 9.39% which covered elderly age group 50-59 years.



Conclusions

This treatment has proven to reduce the drug dependency and improved quality of life in CHF patients to a significant extent. Positive cardiovascular health outcomes even after three years indicates long lasting effects of HFRT.



2015

Dr. Cherian shared his thought that non Invasive clinical cardiology practice is you going to be 'Future of Cardiology'.

OMICS International
conferenceseries.com

Rahul Mandole et al., J Clin Exp Cardiol 2015, 6:4
<http://dx.doi.org/10.4172/2155-9880.S1.024>

5th International Conference on Clinical & Experimental Cardiology

April 27-29, 2015 Philadelphia, USA

A Retrospective cohort to study the mortality and survival rate amongst Chronic Heart Failure (CHF) patients after Ayurvedic Sampurna Hruday Shudhikaran (SHS) therapy

Rahul Mandole, Rohit Sane
Madhavbaug Sane Care Mumbai, India

Introduction: In India, by 2015, the cases of Coronary Heart Disease detected will be rising to 61,522,343 and the deaths due to Coronary Heart Dis-eases are predicted to reach 3,420,752. [1]. These figures seem to be really alarming. Cardiac diseases are seen affecting majority of population these days irrespective of age. Many modern drugs like beta blockers, inotropes, diuretics, along with upcoming interventional therapies like Cardiac resynchronization therapy (CRT), Implantable cardiac defibrillator (ICD) are currently ceasing the worsening of cardiac conditions. But these methods bring in lifetime dependency in patients, and so the affordability of treatment becomes a major concern [2]. In such scenarios, a novel Ayurvedic Non-interventional therapy Sampurna Hruday Shudhikaran therapy (SHS) of six days can be believed to bring in genuinely promising and convincing results. The present study was conducted to assess the effectiveness of SHS treatment among CHF patients after! Three years of completion of therapy.

Materials and Methods: In this retrospective cohort study, 690 patients who were admitted in Madhavbaug centres across Maharashtra during the year 2010-2011, were contacted by phone, out of which 542 patients were willingly to participate in this survey and were consented verbally. Primary data was collected using a tailored questionnaire over phone and analyzed for mortality, survival and re-hospitalization rates. Secondary data analysis was done for outcomes like 6 Minute's Walk Test (6MWT) in meters and Metabolic Equivalents (METs) done before and after the patients were treated with SHS therapy.

Results: Figure 1 explains that 72% had a remarkable improvement measured using New York Heart Association Class (NYHA). These 72.32% patients improved from NYHA Class II and III to NYHA Class I, 12.96% still possessed NYHA Class II, III and IV symptoms and 14.76% were dead.

SHS 4-step procedure: The re-hospitalization rate was 9.39% which covered elderly age group 50-59 years. The mean improvement after six days of SHS therapy was found to be 65 meters in 6MWT and 1.6 METs value.

Conclusions: SHS is a therapeutic Ayurvedic treatment consisting of four major steps of Snehan, Swedan, Hridhara, Basti followed in same order. This procedure is carried out twice on patients for six consecutive days. Highly efficacious naturally medicated oils and other formulations are used only on external basis for this treatment. This treatment has proven to reduce the drug dependency and improved quality of life amongst Chronic Cardiac Failure patients to a significant extent. The results were found positive even after three years of treatment showing the sustainability of SHS treatment.

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2015

Standardisation of
Clinic Design Treatment





Along with the fast spreading network of clinics, and the surging number of patients, benchmarking of the quality, class and standardization became crucial. As such, uniformity in the physical appearances of all the clinics was given importance.

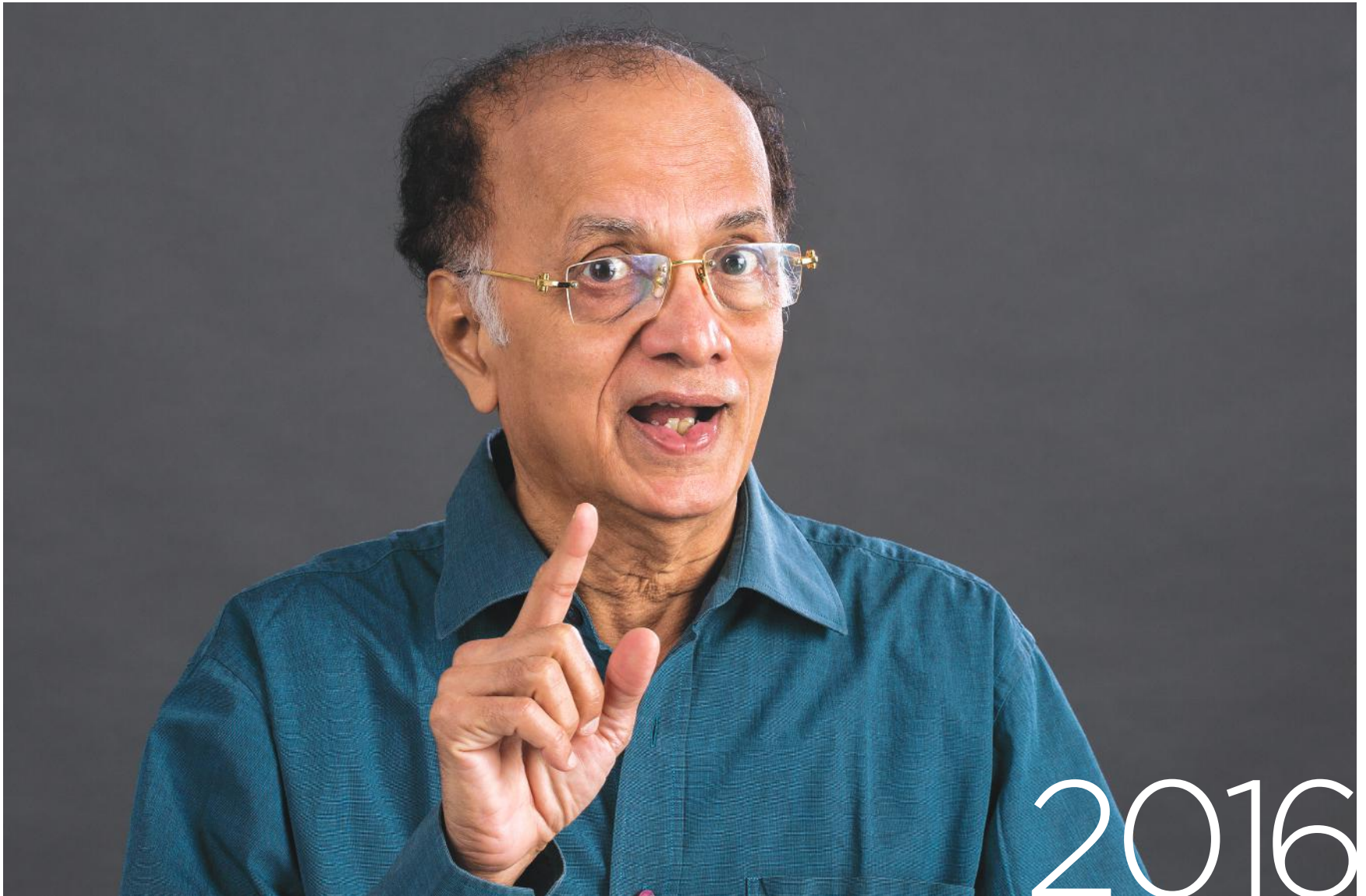


Madhavbaug Institute of Preventive Cardiology



If the growing menace of heart diseases is to be tackled successfully, the number of expert doctors too will have to increase, Dr. Rohit Sane realized. One sure way of achieving that goal was to educate and train young doctors appropriately yourself. Establishment of Madhavbaug Institute of Preventive Cardiology at Maharashtra Arogya Vigyan Vidyapeeth with the support of Vaidya Sane Trust was an honor and an acknowledgement of Madhavbaug's work. This the first inter-pathy chair in India. Prominent cardiologist Dr. Jagdish Hiremath has through this venture become a part of the Madhavbaug family. A syllabus in preventive Cardiology is being offered to the practitioners of Ayurveda, Modern Medicine and Homoeopathy.

Appointment of the popular Actor Shri Dilip Prabhawalkar as the Goodwill Ambassador of the Public Awareness Program of Madhavbaug



To curtail the spread of heart diseases it is necessary to create public awareness on a large scale. For this public awareness program a popular and trustworthy face was required. Popular Marathi actor and writer Shri Dilip Prabhawalkar was contacted for this purpose. He graciously agreed to this proposal.

Publication of Research Book



Research is an ongoing activity at Madhavbaug Research Centre. These research papers are objectively presented and discussed at various medical seminars held in India and abroad. From this, selected research papers are published in the form of a book.

Cardiology Society Award



Cardiology Society of India is the prominent organization of the heart specialists in India. In a seminar organized by them at Cochin, two of the research papers by Madhavbaug were selected. The chief of Research at Madhavbaug Dr. Rahul Mandol's presentation was felicitated.

An article about the Efficacy of Madhavbaug's treatment in the Indian Heart Journal



By now, it had become necessary to get a stamp of approval for the research of the tried and tested treatment techniques followed at Madhavbaug. Therefore, two independent heart specialists conducted Madhavbaug's treatment methods on their patients and invented the process called Randomized Control Trial. They sent their inference to the Indian Heart Journal, the leading journal in the field of medicine in India and their conclusions were published in the journal.

Launch of 'Hrudaysparshi Madhavbaug'



2016

'Hrudaysparshi Madhavbaug' based on experiences of Dr. Rohit Sane and Mr. Kiran Bhide on creating 'Madhavbaug' written by Mr. Sumed Wadawala. Launched in the presence of Social worker Dr. Vikas Amte and dignitaries like Padmabhushan Dr. Ramchandra Dattatray Lele and renowned actor and writer Mr. Dilip Prabhavalkar made the occasion even more gracious. Published by Granthali Publications.

A journey to the hearts...



Launch of 'Save My Heart' App



Save My Heart App launched by Padma Bhushan Anna Hazare. This App believes that with timely interventions, heart diseases are preventable. A healthy diet, regular check- ups, stress reduction and regular exercise can lower the risk and help keep you heart healthy. Save my heart app will help you to stay on top of heart disease.

Save My Heart App was highly appreciated and was covered across various medias:





Dr Rohit Sane receiving the "Outstanding Achievement in Healthcare and Social Cause" at Pride of Maharashtra Awards 2017 for Aarogyam Hruday Sampada Social Cause.

A journey to the hearts...



Dr Rohit Sane, Founder Director of Madhavbaug received Ayurveda Distinguished Scientist Award by renowned Biochemist scientist Prof S P Singh, Banaras Hindu University in International Conference sponsored by ICMR-Govt of India, in BHU, Varanasi

All India Association of Industries Felicitation



Gen. Dr. V K Singh, Ex-Army Chief and Present Honourable Minister of State for External Affairs Central Ministry felicitated Dr. Rohit Sane for his immense contribution in the field of Preventive Cardiology at World Trade Centre in Mumbai. Present Dignitaries: Shri. Anandrao Adsul, MP from Amravati, Shri. Vijay Kalantri, President of All India Association of Industries.

A journey to the hearts...

MINISTRY OF AYUSH & CII AYURVEDA CONCLAVE

VISION 2022: WIDENING HORIZON OF AYURVEDA
FOR THREE-FOLD GROWTH OF MARKET SIZE

16 October 2017 : New Delhi



Dr Rohit Sane was invited by ministry of AYUSH and CII AYURVEDA CONCLAVE New Delhi for a special session on How Ayurveda Can Play A Big Role in Cardiovascular Disease. Eminent leaders in Health Ministry from top brands like Dabur and Himalaya were present.



On the occasion of World Heart Day, Dr Rohit Sane has been felicitated for his Immense Contribution in the Field of Preventive Cardiology by Dr Deepak Sawant, Minister of Public Health and Family Welfare, at The Economic Times World Heart Week Event held in Mumbai.

A journey to the hearts...



Dr Rohit Sane's Session on "Evidence Based Clinical Cardiology Practice with Ayurveda" was attended by India's Top Cardiologists that included Dr. Naresh Trehan, Founder - Medanta Hospital, Dr Ashwin B Mehta, Director of Cardiology - Jaslok Hospital, Dr Lekha Pathak, Head Cardiology - Nanavati Hospital, Dr Dev Pahlajani, Head of Interventional Cardiology - Breach Candy Hospital, Dr B K Goyal, Interventional Cardiologist - Bombay Hospital & Medical Research Centre, Dr Tiny Nair, Chief Consultant Cardiologist - PRS Hospital among others, at The Economic Times World Heart Week Event Held In Mumbai.

Clinic started at Satara Diagnostic



Dr. Sane believed that Ayurveda and modern medicine, rather than being competitors, should work hand in hand for the betterment of the patient. Hence, when a proposal from Satara Diagnostic – a ultra modern hospital, to start a Madhavbaug clinic at their premises, it was given a positive response and for the first time, the heart patient had both the facility at his disposal.



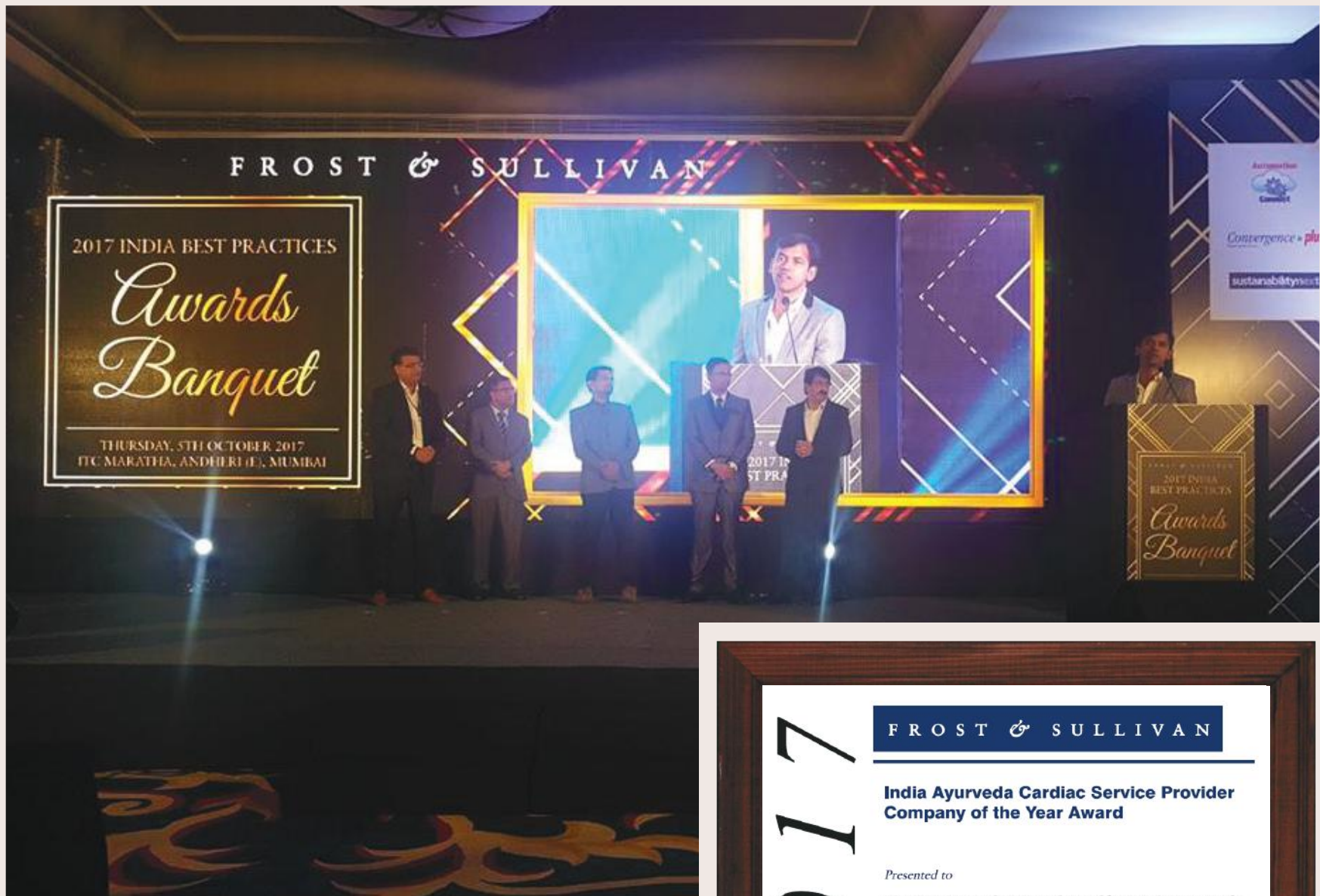
A prestigious moment
for Madhavbaug
Dr Rohit Sane awarded with
Icons of Thane 2017 for his
immense contribution
for fight against heart disease



Felicitated by 'Frost & Sullivan' Award



A journey to the hearts...



Dr. Rohit Sane, CEO, Madhavbaug receiving 'India Ayurveda Cardiac Service Provider Company of the Year' Award from Dr. Tarang Gianchandani, CEO, Jaslok Hospital in the presence of Y.S Shashidhar, Managing Director & Partner at Frost & Sullivan's 2017 India Best Practices Awards Banquet in Mumbai.



Madhavbaug Call Centre
Jambhli Naka,
Compliance & Adherence
Call centre at Hari Niwas,
Thane





Most Impactful Healthcare Leaders at Nashik Healthcare Leadership Award 2017, by 25th Business School, Affaire, Taj Gateway Hotel Ambad, Nashik.



Clinic expansion at Madhya Pradesh on a war footing...



In Maharashtra, Madhavbaug has established a wide reach across its districts. Besides Maharashtra, Madhavbaug had also opened clinics in Goa and Belgaum. Considering the epidemic proportion of increase in the heart ailments in India, it was inevitable that Madhavbaug stepped out of Maharashtra. Taking the ease of understanding of the language of communication and the number of patients into consideration, Madhavbaug expanded its operations in Madhya Pradesh and opened its clinics in places like Indore and Dewas in the first phase.

A journey to the hearts...





CONCEPT AND OUTCOME

Felicitation, recognition and experience sharing is a great way to inspire confidence and participation which are the key aspects of patient improvement and engagement.

- We are conducting an event : Win Diabetes - Sohala Madhumeha Mukticha, that will drastically improve the compliance and adherence of DM Patients towards their own care plans and Madhavbaug's DM reversal ideology.
- 100 Improved Patients will be felicitated and many will share their DM reversal experience, hence this event will be the source of inspiration to all further Patients to engage in their care plans with dedication and will also create a deep awareness within the society regarding DM reversal.
- 10 Doctors with highest number of improved patients, Dietitians and Patient Compliance Telecare executives will be felicitated - This will boost the workforce engagement of our team and provide them a with Higher social purpose.



KOLHAPUR







DADAR



Diet Kit



Food is an important factor in the health of an individual. Similarly, wrong food habits lead to bad health. The doctor has no control over the fact whether the patient follows the diet do's and don'ts at his home. Therefore, a special DIET KIT was created at Madhavbaug. The food intakes from the morning breakfast to the night supper which would last for a month are provided in this diet kit. This diet kit is giving excellent benefits to the diabetics.

Agreement with Abbott for the test of C.G.M.S.



Often, the sugar level in the blood of diabetics keeps fluctuating. In order to find out the reason for this, it was necessary to have an accurate and systematic testing method instead of the prevailing blood test methods. In collaboration with Abbot, a multinational corporation, Continuous Glucose Monitoring System (C.G.M.S.) a new method of testing sugar levels was included in the treatment process for diabetes at Madhavbaug.



7th World Ayurveda Kolkatta, 2016



Dr Gurudatta Amin and Dr Rahul Mandole presented Madhavbaugs research papers at WNCD Conference PGI Chandigarh 2017



We Authors...



A lot of people would like to move mountains, but few of them are willing to practice on small hills.
Congratulations on being the WE TOPPER!



Constygo

22% of Indian adults suffer from constipation Madhavbaug has come up with a solution in the form of Constygo.

Swasthyam

Swasthyam Diet Kit is way to reduce your body weight by balancing your hormones. It contains natural fat burner that helps in fat loss by providing good satiety control weight.





Madhavbaug™



Gram Sanjeevani Yojana

Empowering Doctors to Serve Rural Health

The World Health Organization has predicted that by 2020 India will have the largest number of heart patients in the world. Unfortunately, our society is speeding towards that direction. 60% of Indians live in Villages. The number of senior citizens is larger in villages, and they are more prone to heart diseases. The necessary tools and equipments to medically meet the needs of their heart diseases is not available. Therefore, Madhavbaug started an Out Patient Department – OPD CENTRE. The Kurudwadi village at Sholapur has the first such OPD Center by Madhavbaug.



Smile, it is the key that fits the lock of everybody's heart!





Madhavbaug has launched Mission Smile with clear objective of creating an organisation of smiling care givers and patients. Madhavbaug has taken a single mission to create 1 million smiles by bringing health and happiness in the lives of people.





NEW ARRIVALS



Madhavbaug is working hard for disease reversal in non communicable diseases like diabetes, hypertension, coronary artery disease etc. In this mission of disease reversal our medicines and treatment kits plays very important role. Thanks to our ancient science which has offered us this treasure of highly effective medicines. But to practice it in best possible way sound knowledge of its use in particular condition is essential. Madhavbaug has evolved over a time of a decade and so has its medicine. With broadening range of medicines and Treatment programs there was a need for a guide to know the best possible and judicious prescription medicine available to us. Madhavbaug's Medicines handbook is a basic guide to help you achieve your patient's expectations. Learn, prescribe and serve the best to live up the hopes of your patients.



Media

Many prominent dailies, TV networks and newspapers had supported the efforts that Madhavbaug™ group undertook as social responsibility...

Aarogya Sanskar Mobile App



Overall Health Awareness App for whole Family Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity
- World Health Organization

YouTube /Madhavbaug





Exercise Lifestyle Disorders
Advance Ayurveda Panchakarma
Preventologist Cardiac Clinics
Blood Modern Diagnosis Expert Care
Pressure Non-invasive Treatments
Obesity Management MIPC
Preventive Heart Care Shirodhara
ECG MISSION 2025 Holistic Yoga
Heart Disease Reversal Cardiac Hospital
PAN India Diabetes Management
Physiotherapy 1 Lakh+ Patients
Heart Failure Reversal
OPD Stress Test
Research Diet
Therapy Oral

Mission 2025



Madhavbaug's Mission 2025 is in line with the World Health Organization's (WHO) and World Heart Federation's commitments of reducing mortality due to non-communicable diseases (NCDs) like Cardiovascular diseases (CVDs) and diabetes by 25% by 2025.

CVDs account for 31% of global deaths: this amounts to 17.5 million people losing their lives every year. Over three quarters of CVD deaths take place in low and middle-income countries, which carry heavy socio-economic burdens associated with CVD. India is a developing country with about 68.84% population living in rural region with limited access to healthcare resources.

Therefore, to reduce the global burden of NCDs and achieve the World Heart Federations target of "25by25" (25% reduction in NCDs by 2025), Madhavbaug has aligned to the objectives of WHO and World Heart Federation to address the risk of CVDs in all strata of society.

We aim to achieve our mission through a detailed strategy by keeping WHO recommendations in view.

These include:

- Developing national multisectoral NCD action plan
- Establishing high-level multisectoral mechanisms that facilitate and endorse the prevention and control of NCDs – Through integration of technology and Madhavbaug's 10 years of operational experience.
- Creating and strengthening surveillance and monitoring systems for patients that qualify for high risk of CVDs.
- Strengthening and training of health workforce and the scientific basis for decision-making through NCDrelated research and partnerships.
- Mobilizing and tracking domestic and external resources for NCD prevention and control, including through innovative financing mechanisms
- Financing and implementing cost-effective interventions for each voluntary target at the national level, according to country needs and priorities.
- Researching novel products for disease reversal

And the journey continues....





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