



Research Article

## Angda And Prannda Is Two Best Effective Herbal Medicines For Flight Crew

Vaidhshiromani Dheeraj Sharma<sup>1</sup>, Rajesh K. Mishra<sup>2</sup>, M. K. Yadav<sup>3</sup>, Ramakant Marde<sup>4</sup>

<sup>1</sup>B.A.M.S. Scholar, Patanjali Bhartiya Ayurvedyam Evum Anuushandhan Sansthan, Patanjali Yogpeeth Phase 1 Haridwar, Uttarakhand, India.

<sup>2</sup>Assistant Professor, Patanjali Bhartiya Ayurvedyam Evum Anuushandhan Sansthan, Patanjali Yogpeeth Phase 1 Haridwar, Uttarakhand, India

<sup>3</sup>HOD Of Ras shastra Department, Patanjali Bhartiya Ayurvedyam Evum Anuushandhan Sansthan, Patanjali Yogpeeth Phase 1 Haridwar, Uttarakhand, India

<sup>4</sup>HOD Of Dravyaguna Department, Patanjali Bhartiya Ayurvedyam Evum Anuushandhan Sansthan, Patanjali

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### ABSTRACT

Angda and Prannda is an excellent herbal Medicine which Proves to be very effective as a diet for Flight crew. thousands of years Ago, Indian Vedic scriptures have described the Medicinal diet taken by flight crew. Indian Vedic scriptures have systematically described the Medicine to be taken in space. Even the clothes Worm by flight crew are described in Indian Vedic Scriptures which is very useful for us. Angda and Prannda are the sum of such excellent medicines which Prove to grateful effect for the flight crew. this herbal medicine's plays an Important Role in making flight crew healthy, energetic and physically and mentally healthy and it makes flight crew stress free and its tongue is quickly absorbed in the Angda and Prannda is an excellent herbal Medicine which Proves to be very effective as a diet for Flight crew. thousands of years Ago, Indian Vedic scriptures have described the Medicinal diet taken by flight crew. Indian Vedic scriptures have systematically described the Medicine to be taken in space. Even the clothes Worm by flight crew are described in Indian Vedic Scriptures which is very useful for us. Angda and Prannda are the sum of such excellent medicines which Prove to grateful effect for the flight crew. this herbal medicine's plays an Important Role in making flight crew healthy, energetic and physically and mentally healthy and it makes flight crew stress free and its tongue is quickly absorbed in the stomach. The essence of divine medicines is stored in angda and prannda, which is full of different

\*Corresponding Author: Vaidhshiromani Dheeraj Sharma

Address: B.A.M.S. Scholar, Patanjali Bhartiya Ayurvedyam Evum Anuushandhan Sansthan, Patanjali Yogpeeth Phase 1 Haridwar, Uttarakhand, India.

Email : Thedheerajsharma1@gmail.com

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types of nutrients and minerals. this medicine's Prevents the damage in the body and these Functional, which strengthens the body and makes the body strong. Angda and Prannda increase the strength in the body of Flight crew and make them healthy and disease free. medicines play an important role in Preventing the degeneration that occurs in the body due to lack of oxygen in the space and it Pervades the energy in the entire body of the flight crew and protects their lives and keeps all the organs healthy. Angda and Pranda supply nutrition to all the cells and circulate blood Regularly in them and it controls the cell cycle. it increases the working efficiency of the body and makes all the organs

## **INTRODUCTION**

"Angda and Prannda are active medicinal Food Preparations made from different types of Active and efficient drugs, food Prepared for Flight crew an and also space member can achieve health and wellness by Consuming this medicinal diet and it can prove to be the best for the flight crew . Because it is quickly absorbed in the body, it Purifies the organs and systems and give strength to the body. Angda and Praanda it a Special kind of medicinal diet which can set a new Record to make Flight crew healthy and strong. It also provides Relief to flight crew in many heath Related Complication occurring in space and Provides them health. Flight crew can easily survive in space by consuming Angda and Praanda, this is the most important Quality of these medicines, and it can be easily Used daily in space. Flight crew can be made Strong, emergetic and healthy by Regular Consumption of Angda and prannda , and by Regular Consumption of these medicines, the deformity of the cells, organs and body is Removed and the body becomes healthy and energetic. and mental development also increases Smoothly. Angda and Prannda medicinal Food is Prepared from the methods of vedic Scripture which Proves to be very effective for living life in space. in this vedic classical medicine diet, Such medicines have been used which are defined by their main Properties. and it plays an important Role in Providing health and Wellness to the Flight crew. Indian vedic Scriptures state

that the health of Flight crew traveling in space depends on their diet. as long as the diet is full of nutrients, then the Body of the flight crew will be less diseased. Angda and Prannda vedic classical medicine was Prepared on the basis of this Principle. this medicine's also suppresses the Signs of aging and rejuvenates the body. and it strengthens the body by increasing the work efficiency of the body, it can Prove to be the best medicine for Flight crew.

## **HEALTH PROBLEMS OF AIR CREW :**

### **Circadian Disruption and Sleep Problems**

#### **Report Ad**

Circadian desynchronization commonly experienced by pilots may interfere significantly with human well-being and homeostasis [1]. During long-haul flights, the disruption of the body's circadian rhythms, which regulate various physiological functions, leads to the phenomenon known as "jet lag". This condition is marked by symptoms such as drowsiness, insomnia, exhaustion, irritability, and diminished cognitive performance [2]. Work-related perturbation of the sleep/wake cycle may result in several sleep-related problems, including sleepiness, impaired sleep quality, insomnia, fatigue, and obstructive sleep apnea (OSA). Growing evidence indicates that persistent sleep disorders are highly prevalent among pilots. On analyzing a sample of 435 Portuguese pilots, Reis et al. [3] found that the prevalence of sleep complaints and daytime sleepiness was 34.9% and 59.3%, respectively. In a study conducted by Alzhairi et al. [4] on 344 pilots in Saudi Arabia, approximately half of the sample was at risk for insomnia. They also found that older and more experienced pilots were less likely to report impaired sleep quality and sleepiness [4]. Another large study by Pellegrino et al. [5] investigating 1234 Brazilian commercial aviation pilots reported a 48.2% prevalence of poor sleep quality. The main predictors of impaired sleep quality included moderate and



great need for recovery after work, high frequency of technical delays, being insufficiently physically active and sleeping 6–8 hours and < 6 hours on days off, over five consecutive night shifts, and difficulty commuting to work [5]. These results were broadly confirmed by Sallinen et al. [6], who identified flight duty period timing and inadequate sleep as the main self-reported reasons for on-duty sleepiness among short- and long-haul pilots. OSA is another sleep-related condition that can have a negative impact on pilots' job performance as it involves recurring instances of apnea and hypopnea while sleeping [7]. In a study by Alhejaili et al. [8], OSA was identified by home sleep testing in 69% of Saudi-based airline pilots. On analyzing 103 pilots after a long-haul night-time flight using daytime polysomnography, Han et al. [9] found that 73 (70.9%) had moderate-to-severe daytime OSA despite no known previous history. Elevated body mass index and cumulative flight time were identified as independent predictors [9]. Pilots should be educated about the long-term importance for health of obtaining adequate sleep on off-duty days. Regular assessment by occupational physicians with robust and objective tools (apnea-hypopnea index, apnoeas and hypopnoeas/time in bed, oxygen desaturation index) should be implemented to detect and treat symptoms of insomnia or excessive sleepiness. Future research is also needed to investigate whether specific pharmacological and/or non-pharmacological sleep health interventions can have a positive effect on alertness and reduce on-duty sleepiness.

### **Fatigue**

Fatigue, a complex subjective phenomenon reflecting a high physical and mental load, is commonly reported by airline pilots, either alone or in combination with sleep-related issues [10]. In recent years, the number of fatigue related safety incidents has grown, with personnel sighting fatigue and sleep loss as the causation of

operational errors such as landing on incorrect runways or fuel miscalculations [11]. This may be further exacerbated by high workloads and unfavorable environmental conditions. On examining the prevalence and risk factors for fatigue in a large sample of 502 pilots, van Dongen et al. [12] reported that 29.5% met the criteria for being fatigued. The main risk factors included older age, moderate alcohol consumption, limited physical activity, poor work-life balance, more need for recovery, and a lower perceived health [12]. In a study that involved Portuguese airline pilots, Reis et al. [13] found that medium/short-haul pilots presented the highest levels of total and mental fatigue; this may possibly be explained by the fact that medium/short-haul pilots perform more take-offs and landings per duty period than long-haul pilots, resulting in a higher workload in the former group.

### **Psychological Distress and Psychiatric Conditions**

Fatigue and poor work-life balance are common sources of psychological distress in airline pilots. Persistent disruption of circadian rhythms and stressful working conditions may also lead to clinically significant mood disorders, including major depression [14]. In recent years, this has been further exacerbated by changes in job stability during the COVID-19 pandemic. By using the 12-item general health questionnaire (GHQ-12), Alaminos-Torres et al. [15] investigated psychological distress in Spanish airline pilots amid the COVID-19 aviation crisis. The mean total score on the GHQ-12 in the entire study sample (342 responders) was close to established cut-off point for clinically significant psychological distress. In addition, the presence of psychological distress was associated with a less favorable employment status (i.e., being unemployed or furloughed). Severe psychiatric conditions may also increase the probability of dangerous behaviors during piloting [15]. The



2015 Germanwings Flight 9525 disaster, in which the 27-year-old copilot may have locked the captain out of the cockpit and deliberately crashed the plane [16], has dramatically highlighted the sensitive subject of pilots' mental health, especially with respect to major depression and suicidal thoughts. In a review of 20 studies conducted after the Germanwings Flight 9525 crash, the prevalence of depression in commercial airline pilots was found to range between 1.9% and 12.6% [17]. Factors that negatively impact the mental health of pilots include substance abuse, experiencing verbal or sexual abuse, fatigue, and disruption in sleep circadian rhythms. Since fear of negative career impacts may prevent flying pilots from seeking help for high levels of psychological distress or psychiatric conditions, it is recommended that civil aviation authorities take measures to raise awareness and provide assistance for mental health treatment aimed at prevention [17].

#### **Lower Back Pain**

Physical factors in the cockpit, including prolonged seating postures, lifting, and whole-body vibration, impose postural strains on lumbar spines and can result in lower back pain (LBP) [18]. Albermann et al. [19] examined the prevalence of LBP in 698 German airline pilots using an anonymous online survey. The prevalence of chronic LBP was as high as 82.7%, with 51% reportedly having current LBP at the time of analysis. In addition, the prevalence rates of acute and subacute LBP were 8.2% and 2.4%, respectively. The main risk factor for acute nonspecific LBP was a total time spent flying greater than 600 h within the previous year, although causation was not firmly established. The presence of LBP was associated with more disability and lower functioning [19].

#### **Venous Thromboembolism**

Prolonged seated immobility during long-haul flights is a well-known risk factor for venous

thromboembolism (VTE) [20]. While this issue has received extensive attention among passengers, the published literature on commercial airline pilots remains limited. However, the effectiveness of prophylaxis critically depends on awareness of potentially life-threatening condition. Kilic and Soran [21] evaluated actionable awareness regarding the risk of VTE among a large cohort of 427 airline pilots using a dedicated questionnaire. Surprisingly, 63.9% of the study participants were unaware of flight-associated VTE, thereby leading to missing the window of opportunity for prevention. Pilots aged between 20 and 40 years were much less aware of VTE compared with pilots aged  $\geq 41$  years and may therefore be more vulnerable [21]. Improvement in prevention strategies for VTE may be achieved by providing expanded training and focusing on younger pilots in this field.

#### **Malignant Melanoma**

Malignant melanoma (MM) of the skin is thought to arise from different causal pathways and the potential causative role of cosmic and ultraviolet (UV) radiation has not been entirely elucidated [22]. Occupational radiation exposure in airline pilots and cabin crew have been repeatedly investigated in relation to the risk of MM. In general, exposure to UV in the cockpit is mainly related to flight duration and the presence of direct sunlight [22]. In terms of effective dose, the yearly radiation doses for airline crew from commercial flights are estimated to be less than 4-5 mSv, with a range between 0.2 and 5 mSv [23]. In a meta-analysis by Sanlorenzo et al. [24] conducted on 266431 participants, pilots and cabin crew were found to have approximately twice the incidence of MM compared with the general population. These results were largely confirmed by the recent systematic review and meta-analysis by Miura et al. [25], who showed that airline pilots and cabin crew have about twice the risk of MM and other non-melanoma skin cancers than the general

population, with pilots more likely to die from MM. A disproportionately elevated mortality from MM compared with the general population has also been reported in a cohort of USA commercial airline cockpit crew [23]. However, most of the evidence was collected several years ago and their relevance to contemporary levels of MM risk is uncertain. Future studies on the risk of developing MM in pilots should dissect the role of UV attenuation of aircraft windshields, cumulative flight time, and destinations [26]. Additionally, leisure and recreational outdoor time should be taken into account as these factors may act as potential confounders. In the future, setting the acceptable levels for occupational exposure of pilots to cosmic and UV radiation will require the identification of a reliable biomarker. Using a sample of 83 male airline pilots, Grajewski et al. [27] estimated median cumulative absorbed dose and the occurrence of chromosome translocations as a biological marker of cumulative exposure to ionizing radiation. They found a positive association between translocation frequency and the absorbed dose, which was limited to commercial flying [27].

### **Cardiovascular Diseases**

Airline pilots experience occupational exposures that are widely recognized as having strong connections to cardiovascular disease (CVD). In a recent systematic review of 48 studies conducted in 20 different countries, Wilson et al. [28] analyzed the distribution of physiological, behavioral, and psychological cardiometabolic health risk factors in a pooled sample of 36958 pilots. They found that, compared with the general population, airline pilots had high prevalence of overweight and obesity, metabolic syndrome, type 2 diabetes, insufficient physical activity, elevated psychological fatigue, insufficient fruit and vegetable intake, and regular alcohol consumption [28]. Addressing these highly prevalent risk factors for CVD may reduce occupational

morbidity, potentially reducing medical conditions causing medical incapacity and loss of license. Given the risk profile evidence of the airline pilot population, research has recently focused on biochemical markers of CVD. Increased levels of C-reactive protein and atherogenic lipids, including low-density lipoprotein cholesterol, have been reported in pilots [29]. However, the question as to whether job strain and chronic stress can have significant and direct influence on inflammatory markers and cholesterol levels remains unanswered. Efforts to alleviate the impact of cardiovascular disease (CVD) among pilots are crucial for the sustained well-being of the aviation sector. Consequently, regulatory bodies should strive to bridge any gaps between their recommendations for pilots and those for the general population with elevated cardiovascular risk, ensuring optimal preventive measures and support.

### **Tinnitus**

Tinnitus, a symptom characterized by an auditory perception unrelated with any physical source, is commonly reported by subjects with prolonged exposure to occupational noise [30]. Airline pilots with tinnitus may suffer several degrees of distress, being a source of distraction and interfering with communications in the cockpit and with air traffic control. In a study conducted among 418 male and 42 female pilots on duty in a Swedish airline, Lindgren et al. [31] showed that 40% of the respondents had experienced tinnitus for more than five minutes during the previous year. They also found that 18% had constant or severe tinnitus, whereas 12% had at some time visited a doctor for tinnitus-related problems. As expected, pilots with tinnitus were more likely to report themselves disturbed by noise in the cockpit. The main predictors of tinnitus included age, impulse noise, and hearing impairment at 3, 4, and 6 kHz. However, no association with

aircraft type or work as a military pilot was observed [31].

### **Gastrointestinal Disorders**

Meal times are important synchronizers of the human life and disruptions in circadian rhythms coupled with arduous working environment have been associated with gastrointestinal disorders (GIs) in airline pilots. In a USA study conducted from 2001 through 2013 in the population of active duty Air Force pilots, esophageal disease and dyspeptic conditions were the two most frequently encountered GIs [32]. In an investigation involving 354 pilots of a Swedish airline company, 9.9% reported poor appetite, 15.2% heartburn, 12.4% diarrhea, 62.1% bloating, 9.3% constipation, and 14.4% epigastralgia over a three-month period [33]. The main predictors of GI complaints included in-somnia, BMI, smoking, female sex, and milk consumption [33]. On analyzing 212 male pilots working for a Chinese large civil airline company, Li et al. [34] reported a 39.22% prevalence for functional GIs. In multivariable analysis, the flight level, high-salt food pattern, and sleep performance were identified as independent predictors [34].

### **Other Health Issues**

Owing to their exposure to increased levels of cosmic radiation [35], it has been hypothesized that airline pilots and flight attendants could be at higher risk of developing thyroid [36] or breast [35] malignancies. However, increased rates of breast cancer among flight attendants have been attributed to reproductive factors such as nulliparity [35]. Additionally, a recent meta-analysis [36] showed that airline crews do not have a significantly elevated risk of thyroid cancer incidence or mortality relative to the general population. In a study conducted on pilots in one Swedish commercial airline [37], work-related psychosocial risk factors have been related to a variety of musculoskeletal symptoms. In addition, pilots and airline crews can be exposed to a wide

range of potential chemical irritants and airborne pollutants, which may lead to dermatitis [38]. Finally, increased rates of cataract have been reported among pilots [39]. Even without a decrease in visual acuity, mild or early lens opacities can cause significant glare and haze and alter color vision, potentially compromising pilot performance [40]. A recent Australian study showed that cataracts in pilots  $\geq 60$  years was generally bilateral and of mild severity, whereas cataracts in pilots aged less than 60 years were more likely to be unilateral and of greater severity [41].

### **Health-Related Quality of Life**

Health-related quality of life (HRQOL) is a multi-dimensional indicator of overall health that captures information on a person's physical and mental health status, as well as on the impact of health status on quality of life [42]. The main advantage of HRQOL is that it expands upon traditional objective clinical measurements to provide subjective experiences and perceptions of health encompassing the physical, mental, and social dimensions [42]. There are limited published data on HRQOL in commercial airline pilots. Liu et al. [43] investigated HRQOL and its related factors in a sample of 373 pilots recruited from a Chinese commercial airline. Physical activity as well as fruit and vegetable intake were positively associated with HRQOL, whereas time-zone flights, smoking, alcohol drinking, and dyslipidemia showed a negative association. The overall perception of HRQOL in Chinese commercial airline pilots is therefore determined by individual-level lifestyle factors (i.e., physical activity, fruit and vegetable intake, smoking, and alcohol drinking), a health-related factor (i.e., dyslipidemia), and a work-related factor (time-zone flights) [43]. Albeit preliminary, these findings could serve as an initial guide for employment policymakers to implement measures that ensure a suitable HRQOL for airline pilot.

### Found health issue in aircrew :

Symptom	No answer	Occasionally	Some-times	Often	Long term	Never
Irritation of eyes, nose and throat	3	39	19	4	1	40
Blurred vision, tunnel vision	9	4	1	0	0	92
Respiratory distress difficulties	10	4	2	0	1	89
Headaches, light-headedness, dizziness	4	35	15	3	2	47
Balance/coordination difficulties	10	3	2	0	0	91
Disorientation	12	9	3	0	0	82
Memory impairment (short-term)	8	12	4	1	2	79
Numbness (head, limbs, lips, fingers)	5	13	3	1	0	84
Fatigue, weakness, decreased performance	7	32	18	5	1	43
Concentration difficulties, confusion	7	22	7	2	1	67
Skin irritations	10	8	7	6	0	75
Nausea, vomiting, gastrointestinal problems	9	16	5	0	1	75
Diarrhoea	12	17	11	2	1	63
Joint pain, muscle weakness	9	10	5	1	0	81
General increase in feeling unwell	6	29	7	2	3	59
Immune system disorders	10	3	2	0	0	91
Intolerance to foods/alcohol	10	4	4	1	2	85
Intolerance to chemicals/odours	10	4	11	1	0	80
Cancer (please state type)						

2 (1 basal cell carcinoma and 1 prostate)

### INGREDIENTS OF ANGDA :-



1. Emblica officinalis
2. Terminalia chebula
3. Desmodim gangeticam
4. Solanum indicum
5. Tribulus terrestris
6. Aegle marmelos
7. Uraria picta
8. Solanum surattense
9. Premma mucronate
10. Oroxylum indicum
11. Gmelina arborea
12. Stereospermum suaveolens
13. Boerhavia diffusa
14. Teramnus labialis

15. Sida Cordifolia
16. Ricinus Communis
17. Malaxis acuminata.
18. Malaxis muscifera
19. Polygonatum verticillatum
20. Leptadenia reticulate
21. Asparagus racemosus
22. Tripidium bengalense
23. Saccharum officinarum
24. Desmostachya bipinnata
25. Oryza sativa
26. Centella asiatica
27. Ficus religiosa
28. Convolvulus Pluricaulis
29. Cyperus rotundus
30. Emblica ribes
31. Petrocarpus marsupium
32. Aquilaria agallocha
33. Glycyrrhiza glabra
34. Curcuma longa
35. Acorus calamus
36. Mesua Ferrea
37. True cardmom
38. Cinnamomum cassia.

## INGREDIENTS OF PRANNDIA:



1. Emblica officinalis
2. Terminalia bellirica
3. Aegle marmelos
4. Premna serratifolia
5. Oroxyllum indicum
6. Gmelina arborea
7. Stereospermum suaveolens
8. Sida Cordifolia
9. Desmodium gangeticum.
10. Uraria picta
11. Vigna trilobata
12. Teramnus labialis
13. Piper longum
14. Tribulus terrestris
15. Solanum Xanthocarpum
16. Pistacia integerrima
17. Raphanus sativus
18. Phyllanthus niruri
19. Leptadenia reticulate
20. Inula racemose
21. Aquilaria agallocha
22. Microstylis muscifera
23. Microstylis wallichii
24. Hedychium spicatum
25. Cyperus scariosus
26. Boerhavia diffusa
27. Polygonatum verticillatum
28. Elettaria cardamomum
29. Pterocarpus santalinus
30. Nymphaea nouchali
31. Pueraria tuberosa

32. Justicia adhotoda
33. Roscoea Purpurea
34. Tinospora cordifolia

## INGREDIENTS OF OSO-RAS



1. Citrullus colocynthis
2. Mucuna Pruriens
3. Asparagus racemosus
4. Teramnus labialis
5. Withalia somnifera
6. Desmodium gangeticum
7. Nardostachys jatamansi
8. Sida cordifolia
9. Abutilon indicum
10. Tinospora cordifolia
11. Phyllanthus emblica
12. Leptadenia reticulate
13. Centella asiatica
14. Boerhavia diffusa
15. Clitoria ternatea

### Major benefits of Angda, Prannda and Oso Ras

These medicines provide maximum energy and strength in the body and remove physical and mental youth and make the body healthy. These medicines increase the age of flight crew and prove to be beneficial for the body, and by consuming these medicines, the work efficiency of the flight crew body increases. Angda, Prannda and Oso-Ras these three medicines play an important role in anti-aging and make the body energetic. These medicines make flight crew brilliant by giving them long life, memory, health and youth. By consuming these medicines in vacuum, it activates all the physical and mental



function and make the Body healthy. These medicines also purify the Body of flight crew and Provide Provide Rejuvenation and revival<sup>5</sup>. And these medicines make the body and organs strong and remove all the disorders of the Body. These medicines Provide nutrition to the body<sup>6</sup>. and harmonize all the organ system and it makes its special contribution in Physical and Mental development<sup>7</sup>. these medicines Properly.

Regulate the Body and Provide hearth by Removing the deformity arising from the lack of oxygen in Body<sup>8</sup>. Prevents cellular decay and tissue decay in the Body by supplying nutrients to the body these medicines also Prevent bacterial, viral and fungal infections occurring in the Body's Immune system<sup>9</sup>. And these medicines make the Body energetic By supplying nutrients in the Body and it does not harm the Body in any way but increases the strength in the Body<sup>10</sup>. These the three medicines, mentioned in the Indian vedic scriptures, contribute significantly to life in space these medicines Remove all the deformities of the body of flight crew and make them energetic and give them life in adverse Conditions of the Body<sup>11</sup>, Angda, Prannda and Osoras Protect the lives of flight crew , therefac because of this quality, these medicines Prove to be the ultimate and ideal medicines for the flight crew<sup>12</sup>.

## CONCLUSION

Angda, Prannda and Oso Ras this is the Main medicinal food for flight crew mentioned in Indian vedic scriptures. these medicines make the Body strong and energetic by supplying all the Nutrients in the body and it Remove the internal and External deformities of the Body, these medicines Repair our Body and make the Body disease free and Purify the Body, these medicines make the flight crew physically and mentally stress free and increase their work efficiency. these medicines also Remove the internal deformity and insomnia

arising from the continuous Stay of flight crew in space. and these medicines increase the Age of flight crew by Regularly Operating all the system of the body. These medicines are an absolute staple of flight crew lives. therefore, it is Proved from the above Properties that Angda Prannda and Oso Ras are the best and Important medicines for the space world and flight crew.

## Jai Hind Jai Vedic Sanskriti

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