Application of Panchakarma in Shalya Tantra a Review

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ABSTRACT

Panchakarma is a unique and versatile therapy of Ayurveda useful to remove the morbid Doshas of the body. And hence, plays an important role to clean the various systems of body. Broad spectrum of its applicability extends to the field of Shalya Tantra as well. Many acute and chronic surgical conditions like Vrana (wound), Bhagna (musculo-skeletal injuries), Arsha (hemorrhoids), Bhagandara (fistula in ano), Arbuda (tumours), Shlipada (filariasis), Shopha (swellings), and Vidradhi (abscess) etc. get managed by the five purificatory therapies of Panchakarma, which contains Vamanai.e therapeutic vomiting or emesis, Virechanaí.e therapeutic purgation, Bastií.e therapeutic enema, Nasyai.e elimination of toxins through the nose / errhine therapy and Rakmatokshana karmaí.e therapeutic bloodletting. In the classical texts of Ayurveda, a very detailed description of Panchakarma is available, with special relevance in the management of various surgical pathologies. In this article, an effort has been made to explore the applied concepts of Panchakarma in the field of Shalya Tantra in various ways.

KEYWORDS: Panchakarma, Shalya Tantra, Doshas, Ayurveda

INTRODUCTION

Panchakarma is an integral part of Ayurveda. It is chiefly constituted of specially designed five procedures for detoxification of body. These includes a) Vamanai.e therapeutic vomiting or emesis, b) Virechana (purgation therapy), c) Basti (therapeutic enema), d) Nasya (errhine therapy) and e) Rakmatokshana karma (bloodletting therapy)[1]. Rakmatokshana procedure is directly related to the practice of Shalya Tantra. It is carried out with the help of different surgical instruments like Yantra, Shashtra and Anushastra. Panchakarma is not only a bio-purificatory process, but involves a wide range of therapeutics such as replenishing, depleting and rejuvenating therapies. It has broad spectrum of applications in the practice of Shalya Tantra as Ayurvedic discipline of surgery. Numerous textual references are available where the procedures of Panchakarma have been adopted as an important measure along with institution of surgical intervention.

Effect of Panchakarma Therapy

Panchakarma has an indispensable contribution in all eight branches of ayurveda. Many pathologies related to Shalya Tantra requires Panchakarma procedures to get rid from them. In Shalya Tantra, Panchakarma has a very primorole to play. The principle objective of treatment as expounded by Acharya Sushruta is replenishing the deficiency, reducing the exaggerated levels, and preservation of equilibrium of doshas[2]. It becomes difficult to manage chronic pathologies conservatively. Advanced states of many pathologies usually require surgical intervention. In chronic diseases it results in gross vitiation of channels i.e Strotodushti, weakness of digestive power i.e Agnimandya, improper nourishment of tissues and decreased immunity Le Ojokshaya. Later for wellbeing, body needs to get purified.

Panchakarma therapy application has not only the purificative aim, but the facilitation of desired pharmacokinetic effect of therapeutic remedies administered is also achieved. It eliminates toxins, stagnated excreta and metabolites from the body, cleanses the macro and micro channels, maximizes the absorption and metabolism of nutrients and drugs, and helps in minimizing their dose and toxicity[3].

Role of Panchakarma in the field of Shalya tantra

Acharya Dalhan has predominantly explained that Langhana (desaturation) to Virechana karma (purification) are the main pre-operative measures that include important Panchakarma procedures like Snehana (unction), Svedana (fomentation), Vistravana (bloodletting), Vaman (therapeutic emesis) and Virechana (therapeutic purgation)[4]. The chief objective of Shalya Tantra is meant for extraction of various foreign substances out of the body. Not only the foreign bodies, but all those which cause painful disorders have been termed as Shalya[5] such as excessive
accumulation of mala (excreta/toxins) and dosha (Vata, Pitta, Kapha). Acharya Sushruta has elaborated the procedures of Panchakarma in ChikitsaSthana along with pre-procedure preparations, complications and management. Major surgical conditions requiring Panchakarma procedures are described as under:

Vrana (Wounds): Wound management is the most vital part of practice of Shalya Tantra. Etiological classification of vrana (wounds) constitutes Nija/Shareeravrana (intrinsic wounds–caused by vitiation ofdosha) or Agantujavrana (exogenous wounds or traumatic wounds)6.Panchakarma procedures have a significant place in the management of both these types of wounds. In case of many casualties due to severe haemorrhage in case of Chhinna (excised), Bhinnna (ruptured), Vidhha (punctured) and Khata (lacerated) wounds, vatadoshagets aggravated resulting in severe pain. For this vitiatedvatadoshav, Sneha-pana (unction therapy), SnigdhaPanapanahana (local application of unctuous poultices), Snehabasti (medicated unctuous enemas) are specifically indicated17 All the Panchakarma procedures have been included under ‘Shashti Upkrama’ (sixty modalities) of wound management as described by Sushruta. More specifically the indications for individual procedures includes as,

Snehana Karma (Unction Therapy): Consumption of Sneha processed with specified drugs has been indicated in patients who have complications due to wound. In all such conditions, there is gross aggravation of Vatadoshav, that gets cured easily by Snehana karma.

Svedana Karma (Sudation Therapy): Different types of fomentations has been indicated in inflammatory swellings for local application which are painful, hard.9

Vaman Karma (Therapeutic Emesis): It is an excellent therapy for minimisation of vitiated Kapadoshav. In case of wounds having inflammation along with granulation tissue and vitiated darkish blood, vanama karma is useful particularly in that caused by vitiated Kapadoshav10

VirechanaKarma (Therapeutic Purgation: Virechana karma is choice of treatment in wounds vitiated with pitta associated with vata and which are chronic in duration11

Basti Karma (Medicated Enema): The wounds which are rough, severely vitiated by vata and is particularly situated in the lower part of the body, basti is indicated in such cases12

Uttar Basti Karma (Douches): This is particularly applied through urinary path mostly in retention of urine, disorders of urine and semen, wounds caused by calculus and in menstrual disorders; administration of Uttarbasti is helpful13

Shiro-virechana Karma (Errhine Therapy):The wounds and swellings which are located in supraclavicular region i.e urdhava-jatragatavarna requires special management with Shiro-virechana karma14

Raktamokshana Karma (Therapeutic Bloodletting): In acute inflammatory swellings, Raktamokshana karma is certainly effective in reducing pain and to prevent suppuration. It is particularly indicated in the wounds with inflammation, hardness, dark-red discoloration, pain i.e. in DushaVrana. In poisoned wounds as well, bloodletting has been prescribed with leeches15 While describing the management of wounds, Acharya Charaka has explained that evacuation with Vanama, Virechana, Shastra karma and Basti karma are the main treatment modalities that should be adopted; because the wounds get pacified quickly16

Component of Infection: In Surgical practice, the infection is of vital importance. Prevention of wound from infection and management of infected wounds is a potential challenge to the surgeons of modern times as well. Ayurveda has special way of management of Dushatavana (infected wound) that chiefly incorporates the procedures of Panchakarma.

ArshaChikitsa (Haemorrhoids): Arsha is one of the main and common pathologies related to the field of Shalya Tantra. The Nidanamosaprati (aetio-pathogenesis) of Arsha includes Manda-agni.espression of digestive fire and Malavashtambhai.excessive accumulation of excrements17 Panchakarma is absolute indication for its effective management. In the context of VatajArsha, snehan, viredana, virechana, anuvasana and asthapanabasti have been indicated. Also in Pittaj Arsha, virechana karma has been mentioned as one of the main treatments18.

Parikartika (Anal Fissures): Pichhabasti and snehabasti i.e Anuvasnabasti have been indicated in Parikartikai.e. anal fissures19.Local soothing and wound healing is certainly achieved by medicated enemas. And ultimately by its beauty of action, it is effective in relieving the condition as well.

Bhagandara (Fistula in Ano): Various Svedana karma and Virechana have been indicated in Bhagandara (fistula in ano). The glory of pancakarma reflects here by helping in Sampraptibhangha (breaking the chain of pathogenesis at its root) and helps to remove the vitiateddoshav. Specifically, in Kapaj type (ParistraviBhagandra), mild virechana followed by Tikshavirechana have been advised to be administered20

Gud-Bhransha (Prolapse of Rectum): Administration of Pichhabasti (slimy enema) has the indication in rectal prolapse and bleeding per anum.21 In Charak and SushrutSamhita, the varieties of PichhBasti have been mentioned.

AshmariChikitsa (Urinary Calculus) : Post-operative Svedana Karma (sudation), Uttar Basti (urethral douche), Asthapana (medicated enema) and AnuvasanaBasti (unctuous enemas) are the main Panchakarma procedures indicated in management of this illness.22 These procedures help in preventing and relieving the post-operative pain and complications.

Shopha (Oedema): By monitoring the level of vitiation of Doshas, and mode of Samprapti (pathogenesis)Snehana, Svedana, Upnahanaaalong with frequent Sira-vedha definitely give the good results23

Bhagna (Musculo-Skeletal Injuries): As mentioned in Samhitas, Asthi (bones and cartilages) are one of the main seats of Vatadoshav. Aaghat (Trauma)at these sites result in
aggravation of local Vata. The Panchakarma procedures have a good role to play here. Dhara (allowing oil to flow in to and fro manner from certain distance with certain velocity), Abhyang (gently application of oil) and Basti karma in the management of Bhagana (fractures). AnuvasaBasti gives fascinating results inprashakhabhagna (fractures of extremities). Application of Nasya karma in fractures and dislocations involving the parts above neck helps fast recovery, Svedana and Nasya karma in dislocation of Hanu (mandible) is also helpful[24]

PramehaPidika (Diabetic Boils): Management of this by the treatment with Vamana,Virechana and Siravedha has been prescribed along with surgical intervention. In the patients suffering from Madhumeha (Diabetes mellitus), for easy excretion of vitiating doshas, the administration of drastic purgatives has been advised[25]

Apachi (Scrofula), Granthi, Arbuda (Tumours): Ghritapana, Tailapana,oral administration of medicated ghee and oil, svedana karma along with main Panchakarma procedures constitute the general management of all these conditions[26] In advanced scrofula, medicated ghee should be administered to the patient to eliminate vitiating Doshas from both ways (emesis and purgation). Shirovirechana karma has also been included[27]

GranthiRoga (Cystic Lesions): In vatajigranthis, different types of poultices are useful to minimise the local symptoms. In Ptitajigranthis, bloodletting with leeches plays a vital role[28]

ShlipadaRoga(Elephantiasis) Raktamokshana by Siravyadha has been indicated to get rid of impurities in the blood and in the management of all the three types of Shlipada[29]

PranashaShalya (Retained Foreign Bodies): Out of total 15 methods of extraction of retained foreign bodies, vaman, virechana, dhmapanaare the procedures are helpful[30]

Vidradh (Abscess): In addition to the surgical interventions like incision and drainage, Panchakarma procedures are also beneficial.[31] Acharya Sushrutahas prescribed Panchakarma therapies according to stage and involvement of Dosha.

UdaraRoga (Abdominal Enlargements): For the management of aggravated Vata and accumulated Mala (excrements) in all types of Udarakogofrequent purgation is very useful[32] The administration of medicated enemas is particularly helpful in getting rid of waste deposits in the body.

Yakridityodara(Enlargement of Liver) and PleehodaraRoga (Spleenmegaly) Siravedha (venepuncture) has been indicated after Snehana and Svedana[33] Both Yakrut (liver) and Pleeha (spleen) are the seat of Rakta-vahastrotasa. Bloodletting directly corrects the vitiating Rakta.

Vridhhi/Bradhna (Hernias): Acharya Sushrutahas indicated Raktomokshana by Siravedha (venepuncture), although its effects are still undetermined[34] Similarly, in the context of Bradhna (inguinal hernia), Virechana and Niruhabasti have been mentioned as the main treatment[35]

AtyayikaChikitsa (Emergency Management): Emergency management is an integral part of Surgery. Acharya Sushruta has indicated the procedure of Siravyadha (venepuncture) to relieve acute conditions by its fast action. Raktamokshany Siravyadha has been said to contribute as half of the total surgical management.[36] In the management of excessive blood loss, Rakta-basti (enema with blood) has been indicated as an effective major[37] In the management of Dhoom-op-hata (suffocation by smoke), vaman and shirovirechana help to evacuate the accumulated toxins[38] For managing the condition of ‘Bahrurajy-lata pasha kanthapeedana’ (throating), there has been a prime indication for Shirovirechana[39] Intake of incompatible food has been described to be treated by Panchakarma, mainly by vamanand virechana. Similarly in poisoning cases, the unique management method is Panchakarma. In Dushivisha or poisons situated in blood, venepuncture along with all the five evacuative measures of Panchakarma have been advised by Acharya Charaka[40]

CONCLUSION:

Panchakarma has an international recognition as major and unique therapy in the preservation, maintenance and conservation of health, along with promotion of longevity. In the field of Shalya Tantra, the procedures of Panchakarma plays a very important role. Successful peri-operative management of numerous surgical conditions requires adjuvant therapies of Panchakarma. By adopting these procedures, the practice of Shalya Tantra is sure to be benefitted with improved outcomes.

REFERENCES:


