Ayurvedic Review Article on Anushastra

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ABSTRACT: Ayurveda is the ancient science of health and well being, routed through several distinguish branches, these branches of ayurveda meant for particular purposes. Shalya Tantra is one of them which involves uses of various techniques or Karma to facilitate surgical or parasurgical interventions and Anushastra Karma is one of them. Anushastra Karma means uses of nonsurgical instruments to perform surgical procedure. Agnikarma, Kshara Sutra, Jalukavacharana and Siravyadaha, etc. are some approaches of Anushastra Karma which mainly employed for the management of pathological conditions like; fistula, fissure and pilonidal sinus, etc. Anushastra are gaining popularity in the modern time because of their effectiveness in treating chronic diseases, therefore in this article the various aspects related to the Anushastra Karma presented. in modern medical science. In kamala vyadhiaacharyas has explained virechana karma.

KEYWORDS: Anushastra Karma, Agnikarma, Kshara Sutra, Jalukavacharana

INTRODUCTION

Ancient surgical science was known as Shalyatantra(surgical science).Shalya Tantra is one of the important branches of Ayurveda in which surgical and parasurgical techniques has described for management of various diseases. It embraced all processes aiming at the removal of factors responsible for producing pain or misery to the body or mind. Sushruta - The father of surgery has scientifically classified it in a systemic manner whose wealth of clinical material and the principles of management are valid even today. Anushastra Karma means surgical procedure performed by non surgical items or instruments in absence of surgical instruments. Acharya Sushruta described different Anushastra, these are twakasara (bamboo bark) ,sphatika, Kancha (led), kuruvind, jalauka(leech), agni (flame), kshara (alkali), nakha (nails), goji(govivha), shephalika(harasringar leave), shaka patra(sagaun leave), kareera, bala(hair) and anguli(finger) etc (Su.Su 8/15). Anushastras are effectively used in management of different surgical conditions. It is equally useful to diagnose the different types of sinuses and fistulas (Su. Chi.-1/41). For the diagnosis of Nadi Vrana (sinus), Shalya yukta vrana (wound with foreign body), Unmargi vrana(fistula) and utsangi vrana (wounds with cavity), now a days we used generally different kind of probes (eshani). In place of probes we can use Bal anguli (kid's fingure) or kareer naal. These two are counted under anushastra by Sushruta.

METHODS

The present study is a literary review of anushastra karma, which emphasizes the procedure of kshara karma, agnikarma and jalaukavcharana as described in Sushrutasamhita by ancient Acharya Sushruta. As described by Sushruta, there are 15 types of anushastra. The following are among them popular and practically available at the moment. 1. Kshara karma, 2. Agnikarma, 3. Jalaukavcharana

Kshara Karma

Kshara is a drug from various medicinal plants ash. Kshara is primarily of two types-Paaneeyakshara and ksharapratisarneeya. Betweenshastra and anushastras, Kshara is strongest. Pratisaraniyakshara is mainly used in wound management, various anorectal disorders such as Arsha(Haemorrhoids), gudabhramsha (Rectal Prolapse). In wound management it is mainly used for shodhana(debridement). Ushna and tikshna properties of ksharaare helpful in wound debridement. Sushruta clearly mentioned those vranalakshana utsannamansan(elevated margin and hyper granulation tissue), kathinana (hard consistency), Kanduyukta(severe itching), Chirotthitan[1] (chronic wounds) and unhealthy wounds can be cleaned easily i.e. help in wound bed preparation, which is the principal management in chronic wound. Pratisaraniyaksharaalso help in Darana karma in the large pus pockets having no opening especially in those where one cannot perform surgical intervention, like wounds in children, elder patient, weak patient, panic patients, ladies and wounds over sensitive and vital portion. Kshara Sutra & Ksharavarti are other two variants of kshara karma which are used in the management of Nadi (Sinus) and Bhagandara

(fistulas). These diseases are difficult to treat otherwise. This is because of its undermined edge and unexposed infective site and difficult in wound debridement. These conditions are treated by both methods- Shastra karma and anushastra(kshara sutra & ksharavarti). Sushruta mentioned that Nadi(sinus) present in emaciated, weak, anxious patient and present over vital parts should be treated by Kshara sutra, not by chhedana (surgery). [2] Bhagandara is also treated by kshara sutra in same manner. Ksharavarti is another cleansing agent which treats Nadieffectively described in all Ayurvedic texts. Kshara is also used on that places where Shastra cannot be effective and appropriate. [3]

Procedure of Kshara Karma (PratisaarniyaKshara)

Purva karma (Pre-Operative Care):

A patient who is considered fit for treatment is prepared accordingly., Patients are advised and given explanation of the procedure in order to make them aware of the treatment process., Agropaharaniya-Before starting the required procedure material such as Pratisarniyakshara, nimbuswarasa,spatula, cotton, bowl, proctoscope, Changerighrita / Jatyadighrita or tailais kept ready.

Pradhana karma (Operative Procedure):

In the lithotomy place, the patient is placed on the operating table. Local anesthesia is given after cleaning and manual anal dilatation is performed. Pratisaarniyakshara is taken in a bowl and spread over the mass of the pile or any other area picked. It remains until the color shifts to the phalavarnaof Pakwajambu. [4]

Pashchata karma (Post-operative Care):

Applied kshara is wiped, followed by nimbuswarasa with distilled water. The procedure can be repeated for 2, 3 times depending on disease indication and severity. The procedure can be repeated at 21 days' intervals for 2nd or 3rd sessions if required.

Agni Karma

Agni karma is the second important karma of anushastra that all Acharya identify. There are so many devices called dahanupkarana for Agnikarma such as pippali, ajashakrit, godanta, shalaka (samples) ghrita, tail and guda.[5] According to Akriti[6] agnikarma may be of following types Valaya - Circular shape., Bindu - Dot like shape. According to Acharya Dalhanashalaka should be of pointed tip. Vilekha - Making of different shapes by heated shalaka. Vilekha type of agnikarmais further subdivided by Acharya Dalhana into three types according to the direction of line- Tiryaka(Oblique), Riju (Straight), Vakra (Zigzag)Pratisarana- Rubbing at indicated site by heated shalaka and there is no specific shape.

Procedure of Agnikarma

Poorva Karma:

A patient who is considered fit for procedure is prepared accordingly., Patients are counselled and given explanation about the procedure in order to make them aware about the process of treatment., Agropaharaniya- Gas cooker, shalaka, madhuyashtichurna, and ghritkumari are kept ready before starting the procedure. The area is marked and cleaned.

Pradhana Karma:

For a specific disease, panchdhatushalaka or any other dahanopkarana is selected. Panchdahatushalaka, the shalaka on the gas burner is heated red hot and applied over the chosen area. The process is repeated according to indication and need. As frozen shoulder is snayusandhigatavikara, thus guda, sneha or madhu is selected as upkarana for Agnikarma. Pulp of ghritkumarimajja is applied in the area immediately after completion of the procedure followed by madhuyashtichurna. Patient is carefully monitored during the procedure for any untoward complications. It is advised that patients keep the area dry, clean, prevent exertion, pain and unhealthy diet. Depending on disease and disease severity, the same procedure can be repeated.

Jalaukawacharana (Leech therapy)[7]

Jalaukawacharana, illustrated by ancient acharya, is the third most important anushastra karma. Jalaukavacharana is Raktamokshana's method. In sushrutasamhita and Ashtanghridya, Raktamokshana has been described. It has two shastrakrita and ashastrakrita methods. Shastrakrita further have two methodssiravedha and pracchana. Ashastrakrita method can be achieved with following tools- shringa, jalauka, alabu and ghati. There are mainly two types of Jalauka- Savish and nirvisha having six jalauka in each type. Nirvishajalauka is of therapeutic use. They are indicated in various diseases e.g. twakroga, raktajaroga, dushtaVrana. [8] In wound management Jalauka is generally applied in initial phase of wound progress. Raktamokshan reduces pain and prevents premature swelling from being suppressed. Raktamokshana is used to treat wounds with inflammation, hardness, reddish black colour, tenderness and uneven surface.

Application of Jalauka (Jalaukavacharana) [9]

Jalaukavacharana is divided into 3 parts as other procedures

Purvakarma (Pre-operative Care)

a) Purification of Jalauka: Jalauakais kept in Haridra Jala, in a kidney tray half filled with fresh water, containing HaridraChurna. b) Preparation of Patient: Before applying jalauka, proper counselling for better outcome of jalaukavacharana should be done by the patient. Patient should be in a position to lie down preferably. The part to applyjalauka is cleaned with antiseptic solution.

Pradhana karma (Operative Care):

First, part of the body is selected where the indication of jalauka is to be applied. The selected site is carefully cleaned. Over the selected part, Nirvishajalaauka is kept. Jalauka sticks to this section. If a jalauka does not stick, use a sterile needle to puncture the site and apply jalauka. Jalauka sucks the blood through its anterior sucker that is attached by a posterior sucker to the base. During sucking of blood jalauka should be covered with cold and wet cotton swab to protect the leech from excessive heat of blood. Number of application of leeches depends on severity and general condition of the disease.

Pashchata karma (Post-operative Care)

a. Jalauka Care: The jalauka is removed from the site by sprinkling haridrachurna or saindhava or, if completely sucked, jalauka leaves the site alone. Vomiting is induced into jalauka so that sucked blood is drained from the mouth by haridrachurna and slowly and gently squeezing from tail to mouth and then holding it in fresh water. Jalauka can be applied again after a week's period. The jalaukashould move freely in water otherwise it is diseased jalauka, called durvanta by sushruta.

CONCLUSION

Anushastra are important in surgical practice related to Shastrakarma. Agnikarma and Kshara karma are most valuable approaches which offer several health benefits in many diseases that require surgical or parasurgical care. Kshara is used for the management of

chronic wounds, it is easy to use, economic and minimal invasion required. Antiseptic and analgesic properties of Kshara Sutra cure bleeding, discharge, pain and no severe complications observed with therapy. Similarly Agnikarma is very important therapy which offers benefits in Vatakaphaja disorders. Agnikarma involves use of Agni in direct or indirect manner to cure Arsha, Arbuda, Gridhrasi and Agnikarma impartseffect Bhagandar, etc. of sterilization thus prevent microbial infections and kills pathogens effectively thus prevent diseases to reoccur. Shalaka, Pippali, Godanta, Ghrita, Tail and Ajashakrit are materials used for Agnikarma. Anushastra not only cure diseases but also provide benefits of minimal surgical interventions and offers long term benefits in chronic illness.

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