

# Agni Karma and Raktamokshana in Shoola Pradhana Vyadhi: A Comparative Classical Analysis

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**Abstract-** Shoola (pain) is one of the most frequent and troubling symptoms encountered in Ayurvedic practice, largely attributed to aggravation of *Vata Dosha*, often together with blood vitiation (*Rakta Dushti*), channel obstruction (*Srotorodha*), and inflammatory changes. Among the para-surgical measures described in *Shalya Tantra*, *Agni Karma* (therapeutic cauterization) and *Raktamokshana* (bloodletting) are regarded as very effective for pain relief. This paper offers a comprehensive conceptual and classical comparison of these two procedures in managing *Shoola Pradhana Vyadhi* (pain-predominant disorders). A systematic review of classical texts—*Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*—along with modern literature on pain was carried out. Each modality has its own specific indications, working mechanisms, and therapeutic benefits based on which *Dosha* is dominant and the nature of the disease pathology. *Agni Karma* is indicated for chronic, degenerative pain where *Vata* and *Kapha* are the main offenders, providing immediate relief and low recurrence, while *Raktamokshana* is more suitable for acute, inflammatory pain linked to *Pitta* and blood vitiation, offering gradual but sustained reduction in inflammation and burning sensation. Choosing the right procedure according to *Dosha* and tissue involvement is key to achieving good clinical results in pain management, and this study underscores the value of individualized treatment selection rooted in Ayurvedic principles.

**Keywords:** *Agni Karma*, *Raktamokshana*, *Shoola*, *Vata Vyadhi*, *Rakta Dushti*, *Pain Management*

## I. INTRODUCTION

Pain, or *Shoola*, is a core symptom that appears in a wide variety of diseases in Ayurveda and serves as an important clue to the underlying imbalance. Classical texts repeatedly stress that *Vata Dosha* plays the leading role in producing pain. As the *Charaka Samhita* states:

"वातादृते न शूलं हि दृश्यते किञ्चिदपि क्वचित्" (Without *Vata*, no pain whatsoever is seen anywhere) [1].

*Vata* is also considered the prime mover behind all bodily activities and pathological processes. Its qualities like *Ruksha* (dry), *Sheeta* (cold), and *Laghu* (light) directly contribute to the development of *Shoola* [2]. Yet, pain is not always a pure *Vata* disorder. In many conditions, vitiated blood (*Rakta Dushti*) and *Pitta* aggravation play a major part, especially when there is inflammation. Similarly, obstruction of body channels (*Srotorodha*) can produce pain through the mechanism called *Avarana* (covering/obstruction) [6]. Therefore, *Shoola* is best understood as a multi-factor problem involving *Dosha*, affected tissues (*Dushya*), and channels (*Srotas*).

Among the many treatment options available, *Agni Karma* and *Raktamokshana* stand out as specialized para-surgical techniques that offer fast and targeted pain relief. *Agni Karma* is praised as one of the best among these procedures because it can provide immediate pain relief and prevent the disease from coming back at the treated site [4]. It is especially indicated in conditions dominated by *Vata* and *Kapha*, particularly those affecting ligaments (*Snayu*), joints (*Sandhi*), and bones (*Asthi*). On the other hand, *Raktamokshana* is a primary purification (*Shodhana*) therapy meant for diseases caused by blood vitiation and *Pitta* excess. It works by removing the contaminated blood, thus lowering inflammation, congestion, and the associated pain [5].

In contemporary clinical practice, long-term use of painkillers and anti-inflammatory drugs often leads to unwanted side effects, these ancient Ayurvedic procedures offer a safer, effective, and minimally invasive alternative. Hence, a clear comparative understanding of *Agni Karma* and *Raktamokshana* is necessary for accurate clinical decisions, personalized care, and better treatment outcomes.

## II. AIM AND OBJECTIVES

### 2.1 Aim

To conduct a comparative classical analysis of *Agni Karma* and *Raktamokshana* in *Shoola Pradhana Vyadhi*.

### 2.2 Objectives

- To examine classical references on *Agni Karma* and *Raktamokshana* from major Ayurvedic works.
- To evaluate how each procedure works in different types of *Shoola* based on *Dosha* dominance.
- To compare their indications, proposed mechanisms, and therapeutic results.
- To develop a practical framework for selecting the appropriate therapy based on clinical presentation.

## III. MATERIALS AND METHODS

- Type of Study: Conceptual review based on classical and modern literature.
- Source Materials:
  - *Charaka Samhita* with Chakrapani commentary
  - *Sushruta Samhita* with Dalhana commentary
  - *Ashtanga Hridaya* with Arunadatta and Hemadri commentaries
  - Contemporary Ayurvedic textbooks on *Shalya Tantra*
  - Modern scientific papers on pain mechanisms and management (retrieved from PubMed, Google Scholar)
- Methodology: A systematic review and side-by-side comparison of classical descriptions was carried out, followed by logical interpretation and correlation with modern concepts of pain, inflammation, heat therapy, and bloodletting.

## IV. THE CONCEPT OF SHOOLA (PAIN)

*Shoola* is defined as a form of unpleasant sensation (*Vedana*) that varies in intensity and character depending on which *Dosha* is involved. It is not just a symptom but an important diagnostic marker.

### 4.1 *Dosha*-wise Presentation of *Shoola*

- *Vataja Shoola*: Severe, pricking (*Toda*), intermittent, and wandering pain due to the mobile and dry qualities of *Vata* [2].
- *Pittaja Shoola*: Burning pain along with a sensation of heat (*Daha* and *Ushnata*) because of *Pitta*'s fiery nature [3].
- *Kaphaja Shoola*: Dull, heavy, and fixed pain, resulting from the heavy and oily qualities of *Kapha* [3].
- *Sannipataja Shoola*: Mixed features with changing intensity and generally a worse outlook.

### 4.2 *Samprapti* (How *Shoola* Develops)

The formation of *Shoola* involves several pathways:

1. Direct *Vata* aggravation: Triggered by causes such as fasting, overexertion, or excessive dryness, leading to tissue degeneration and pain.
2. Channel obstruction (*Srotorodha*): When *Kapha* or fat tissue (*Meda*) blocks the channels, *Vata* becomes trapped and irritated, producing severe, often colicky pain [6].
3. Blood vitiation (*Rakta Dushti*): Leads to inflammation, redness, and a burning quality of pain, as seen in conditions like gout or cellulitis.

## V. AGNI KARMA (THERAPEUTIC CAUTERIZATION)

### 5.1 Definition and Importance

*Agni Karma* is a para-surgical technique that applies controlled heat for therapeutic purposes. The *Sushruta Samhita* states:

"अनिकर्म हि श्रेष्ठं सर्वकर्मसु उच्यते । दधे पुनर्न सम्भवो रोगाणां इति निश्चयः" (*Agni Karma* is considered the best among all para-surgical procedures. It is certain that diseases do not recur at the site that has been cauterized) [4].

### 5.2 Indications and Contraindications

- Indications: Conditions dominated by *Vata* and *Kapha*, chronic muscle-skeletal pain, *Sandhigata Vata* (osteoarthritis), *Gridhrasi* (sciatica), and disorders of ligaments, joints, and bones [4].
- Contraindications: *Pitta*-dominant diseases, pregnancy, very young children, the elderly, and individuals with a fearful disposition [4].

### 5.3 Types and Instruments

Based on the instrument used, we have *Panchadhatu Shalaka* (alloy probe), *Loha Shalaka* (iron probe), and *Tamra Shalaka* (copper probe). The patterns of cauterization—dot (*Bindu*), line (*Vilekha*), or smearing (*Pratisarana*)—are chosen according to the shape and location of the lesion [4].

### 5.4 Mechanism of Action

- Ayurvedic view: The hot (*Ushna*) and sharp/piercing (*Tikshna*) qualities of fire calm *Vata* (by opposing its cold nature) and *Kapha* (by opposing its heavy, unctuous nature). It clears channel blockages and boosts tissue metabolism (*Dhatwagni*).
- Modern understanding: Thermal stimulation causes local blood vessel widening, activates the pain gate control system (where non-painful heat signals override pain signals), reduces muscle spasm, and encourages the release of endorphins [11,12].

### 5.5 Therapeutic Effects

Immediate pain reduction, better local blood flow, decreased stiffness, and little chance of disease returning at the treated site.

## VI. RAKTAMOKSHANA (BLOODLETTING)

### 6.1 Definition and Importance

*Raktamokshana* means removing vitiated blood to cure disease. *Sushruta* highlights its value:

"दुष्टं रक्तं हि देहस्य रोगाणां कारणं स्मृतम् । तस्य मोक्षणमित्युक्तं श्रेष्ठं तद्व्याधिनाशनम्" (Vitiating blood is remembered as the cause of many diseases. Its removal is said to be the best way to destroy those diseases) [5].

### 6.2 Indications and Contraindications

- Indications: Diseases involving blood vitiation and *Pitta* excess, such as inflammatory skin conditions

(*Visarpa, Daha*), gout (*Vatarakta*), abscesses, and painful inflammatory states [5,8].

- Contraindications: Anemia, very weak patients, pregnancy, generalized edema, and *Vata-Kapha* dominant disorders without blood involvement [5].

### 6.3 Types

- *Siravyadha* (venesection): Puncturing a vein with a sharp instrument.
- *Jalaukavacharana* (leech therapy): Applying medicinal leeches, especially useful in *Pitta*-rich inflammatory conditions.
- *Shringa* (horn) and *Alabu* (bottle gourd): Suction-based methods [5].

### 6.4 Mechanism of Action

- Ayurvedic view: Physically taking out contaminated blood reduces *Pitta* (since blood is the seat of *Pitta*), clears the micro-channels (*Srotas*), and eases inflammation and burning pain.
- Modern understanding: Bloodletting removes pro-inflammatory mediators (cytokines, histamine) and excess iron. Leech saliva contains hirudin (an anticoagulant), calin (anti-platelet), and natural pain-relieving substances, which collectively lower inflammation, improve microcirculation, and reduce pain [14].

### 6.5 Therapeutic Effects

Decreased local inflammation and swelling, relief of burning pain, better tissue healing and micro-circulation.

## VII. COMPARATIVE ANALYSIS

The table below directly compares *Agni Karma* and *Raktamokshana* for managing *Shoola*.

Parameter	<i>Agni Karma</i>	<i>Raktamokshana</i>
Primary <i>Dosha</i> target	<i>Vata-Kapha</i>	<i>Pitta-Rakta</i>
Nature of pain	Chronic, degenerative, deep-seated, shifting	Acute, inflammatory, burning, well-localized
Primary <i>Dushya</i> (tissue)	<i>Asthi</i> (bone), <i>Snayu</i> (ligament), <i>Sandhi</i> (joint)	<i>Rakta</i> (blood), <i>Mamsa</i> (muscle)
Mode of action	Thermal stimulation ( <i>Ushna, Tikshna</i> )	Removal of vitiated blood and inflammatory mediators
Onset of relief	Immediate	Gradual (over hours to a day)

Risk of recurrence	Minimal (prevents at the cauterized site)	Moderate (needs lifestyle and dietary correction)
Classic indications	<i>Gridhrasi</i> (sciatica), <i>Manyastambha</i> (neck stiffness), <i>Sandhigata Vata</i> (osteoarthritis) [4]	<i>Vatarakta</i> (gout), <i>Visarpa</i> (herpes/cellulitis), <i>Pittaja</i> abscesses [5,8]
Modern correlation	Thermotherapy, gate control theory, neuromodulation [12]	Anti-inflammatory effect, cytokine reduction, leech therapy [14]

### VIII. DISCUSSION

The above comparison shows that both *Agni Karma* and *Raktamokshana* are powerful para-surgical options for pain-predominant diseases, but choosing the right one depends entirely on the dominant *Dosha* and the stage of the disease.

*Agni Karma* is the preferred treatment for *Vata-Kapha* dominant conditions, especially chronic, degenerative, and neuropathic pain. Its hot and sharp qualities directly oppose the cold and dry nature of *Vata*, thus relieving pain, increasing circulation, and reducing stiffness. The classical claim that the disease does not recur at the cauterized spot points to a long-lasting effect on local tissue metabolism (*Dhatwagni*) [4,10].

On the other hand, *Raktamokshana* is more appropriate for *Pitta-Rakta* dominant conditions, particularly those with acute inflammation, redness, swelling, and burning pain. By physically eliminating the contaminated blood, it strikes at the root cause of inflammatory pain. Among its forms, *Jalaukavacharana* (leech therapy) is especially valuable because leech saliva contains natural anticoagulants and pain-relieving substances, making it safer than venesection in sensitive areas or when bleeding risk is a concern [14].

The concept of *Avarana* (obstruction) adds another layer of understanding. In *Avaranajanya Shoola*, where an obstructive factor (like *Kapha* or fat) traps and aggravates *Vata*, *Agni Karma* can break the obstruction and calm the *Vata* directly. Meanwhile, *Raktamokshana* addresses the blood and *Pitta* component in mixed conditions like *Vatarakta* (gout), where both *Rakta* and *Vata* are involved.

From a modern viewpoint, *Agni Karma* aligns well with thermotherapy and the gate control theory of pain, where non-harmful heat signals can reduce the brain's perception of pain [12]. *Raktamokshana* fits with anti-inflammatory and detoxification strategies, as removing blood lowers the local concentration of inflammatory chemicals [11]. A sensible clinical approach includes the following steps:

1. Assess *Dosha*: Is the pain severe, dry, and shifting (*Vata*); burning and hot (*Pitta*); or dull and heavy (*Kapha*)?
2. Identify *Dushya*: Is there clear blood involvement (redness, inflammation) or bone/ligament involvement?
3. Determine the stage: Is the illness acute/inflammatory or chronic/degenerative?

In certain complex cases, a sequential or combined approach may work well. For instance, in *Vatarakta* (gout), one could perform *Raktamokshana* first to calm the acute inflammatory (*Pitta-Rakta*) phase, followed later by *Agni Karma* to stabilize the chronic *Vata* component and prevent flare-ups.

### IX. CONCLUSION

*Agni Karma* and *Raktamokshana* are two highly effective para-surgical procedures for managing *Shoola Pradhana Vyadhi*. Their success depends on correctly matching the therapy to the dominant *Dosha*, the tissues involved, and the stage of the disease. *Agni Karma* is superior for *Vata-Kapha* dominant chronic, degenerative, and neuropathic pain, offering immediate relief and low recurrence. *Raktamokshana* works better for *Pitta-Rakta* related acute inflammatory pain with a burning quality. A personalized, *Dosha*-driven approach is essential for achieving the best possible clinical results while avoiding harm. Integrating these classical principles with modern understanding of pain mechanisms can lead to more evidence-based, holistic pain management.

### X. FUTURE SCOPE

- Well-designed clinical trials comparing the two procedures for specific conditions like *Gridhrasi*, *Sandhigata Vata*, and *Vatarakta*.
- Standardization of the procedures to improve consistency and reproducibility.

- Mechanistic studies measuring inflammatory markers before and after *Raktamokshana*, or using brain imaging (fMRI) during *Agni Karma* to map pain pathway changes.
- Exploring how these techniques can be integrated into mainstream pain management protocols.

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