

To explore the emergency management methods through Panchakarma and Ayurvedic medicine- A review.

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ABSTRACT –

Emergency is a sudden or unforeseen crisis that requires immediate action. Emergency medicine is the branch of medicine concerned with the prompt diagnosis and treatment of injuries or trauma or sudden illness. Emergency in *Ayurveda* might be like pain, stiff neck, accident, anxiety, stroke, heart attack, asthma, haemorrhage etc. *Ayurveda* enlist the disease crisis status as *Upadrava* and *Arishta lakshana*. The upadrava may lead the patient into unforeseen troublesome conditions where the arishta lakshan are the symptoms denoting the bad prognosis. Even *Ayurveda* do explain emergencies of all the categories. But to handle the emergency, the availability of medicine and awareness is required. *Charaka* has long ago stated that the lack of equipment and attendants, patients incapability, lack of awareness, non-availability of management and delayed treatment schedules makes the curable disease as incurable and crisis establishes.

Keywords: *Panchakarma, Ayurvedic medicine, Emergency management*

INTRODUCTION-

Medical emergency is the state that needs possible immediate care from physician, nurse or any nearby person who deal with the condition by his intellectual awareness and wisdom. These activities may include A-airway, B-Breathing, C-Circulation, D-Deformities. These types of medical emergencies can be caused due to various alertness in the body like acid-base imbalance, disturbed homeostasis, endocrinal crisis that mankind should be relieve from diseases. It is believed that emergency treatment in *Ayurveda* is not present and has limited role to play in chronic ailments only. It is not true to say that ayurvedic texts are not having description of emergency management. Ancient Acharyas have used various terms like sadhya, ashu, twarita etc in emergency condition where quick management is needed. Nidan, dosha and dushyas if vitiates very strongly; rapidly and altogether then these diseases may

have strong manifestations and called acute diseases or emergency. Ayurveda suggest few routes of drug administration that bypass the digestion and act in emergency e.g. Basti, vaman, virechan, raktamokshan, nasya, lepa etc. All the rasa-aushadh used in sub-lingual route are meant for emergency medical practice.

Panchakarma-

In all the eight branches of Ayurveda, Panchakarma has an indispensable contribution and it is recognized traditional system of Medicines as per W.H.O specifications. Five Basic Shodanas: (removing toxins from body) are Vamana: therapeutic vomiting or emesis, *Vaman* is very effective in *Kaphaj vikara* (patients of *Tamak Swas*-bronchial asthma) and is the ultimate therapy to make the patients totally free from bronchial asthma. Virechan: purgation, it acts on the *Pitta dosha* from half part of the duodenum to the ileocecal junction or till the umbilicus, that is, the small intestine; Basti: enema, *Basti* is the best solution for pain as it removes the cause of pain by eliminating the vitiated *vata* which may irritate the nervous system; Nasya: it breaks this pathology by lubricating the nasopharyngeal tract, and thus it not only removes the sticky *Kapha*, but also subdues the vitiated Vata by its Oleating quality. Such a miraculous action was also observed in the treatment of DNS, Sinusitis and Allergy; Rakta Mokshan: detoxification of the blood. e.g. Psoriasis and other skin disorders.

There is a proven detoxification potential of Panchakarma therapy. Scientific validation of purification treatments to

eliminate the environmental toxic substances such as polychlorinated biphenyl (PCB's) and pesticides from the body is there. A study was conducted by the Institute of Science, Technology and Public Policy at Mahirishi University of Management in Fairfield, Iowa in collaboration with a special laboratory at Colorado University. This study has revealed the fact that classical Panchakarma treatment has the potential to eliminate detectable toxins circulating in blood to a significant extent of 50%.

Aims and Objectives-

1. To study the emergency management methods through Panchakarma and Ayurvedic medicine

Materials and Methods-

Literatures of Ayurveda-

1. Bruhatrayee and Laghutrayee,
2. Modern textbook of emergency medicine,
3. Research papers and articles from journals

OBSERVATION-

Some of the diseases are described below-

1. Migraine/Ardhavabhedaka-

- Snehana karma- Use of Uttam matra of Chatur sneha/jeerna ghrita paana.
- Shiro abhyanga with Dashmoola taila/kanaka taila/rudra taila.
- Swedan karma- Nadi sweda/Upanaha sweda(esp Jangala mamsa upanaha)/Parisheka(esp aushadha siddha ksheerdhara).
- Virechan karma- Acharya Charaka and Yogratnakara indicated Virechan karma with

drugs according to utklishta dosha.

- Basti karma- Sneha Basti and Aushadh siddha ksheera Basti can be planned.
- Nasya karma- shiro virechaneeya nasya. (Formulations are- Sirasamuladi avapida nasya, Vacha-magdhī avapida nasya, Madhukadi avapida nasya, Shirishbeejadi nasya, Nirgundiadi nasya, Vayavidangadi pradhanan nasya, girikarnaphaladi nasya, Dashmoola kvatha nasya, Ksheera nagra nasya, Shadbindu taila, Anu taila).
- Shirolepa- Sariva-Utpaladi shirolepa/Sarivadi shirolepa/Vayavidangadi lepa/Tiladi lepa.
- Agnikarma- In Lalata and shankha pradesha at two angular area. If rakta and pitta elevated then it should not be done.

With above medications following shaman aushadhas should be given 1.Ardhavabhedakahara yoga 2gm TDS with milk, 2.Pathyadi kvatha 25ml BD or TDS with 6gm jaggery, Shirorogahara yoga 500mg 2 tab TDS with water.

2. Guillain-Barre syndrome/ Sarvangagatavatyadhi-

It is a rapidly evolving a reflexic motor paralysis with or without sensory disturbances. According to Ayurveda, Vata disorder affecting all parts of the body which is apatarpana in nature. Hence the choice of treatment is Santarpana chikitsa (nourishing treatment).

- Santarpana bahyopakramas (nourishing external treatment modalities) such as chandanabalalaksadi tailam abhyanga 2.Nadisvedana by nirgundi and dashamula siddha kvatha
- Sastikasalipinda sveda with combination of balamula churna, ashvagandha churna and shatavari churna (application of warm processed rice)
- Karma basti (pittaghna drugs processed in ksheera),
- Shirodhara (gentle pouring of medicated liquid over forehead) with tila taila. Along with medicines such as Brihatvatachintamani 1gm/day, guduchi satva 30gm/day, rajatabhasma 5gm/day and sutasekhar rasa 30 tab each of 250mg powdered together and divided into 60 divided doses BD.

3. Tandrika Sannipat Jwara bhava/Typhoid-

An acute bacterial infectious disease. According to Ayurveda shirashoola, daha, gaurav, nabhiparshvapeeda, antragatrakta srava etc are the symptoms.

- Amapachan- Amapachak kashay, shuntisiddha kvath etc
- Snehapana- with Indukanta ghrita at morning starting with 30ml and increasing 30ml every successive days for 3-5 days or according to agnibala with hot water.
- Sarvanga Abhyanga Svedana for 2 days
- Virechana with Trivrittavaleham with warm water.

4. Tamak shwas/ Bronchial Asthma-

Pathologically it involves obstruction of Vata movement by kapha which further vitiates prana, udaka and anna in the chest region and produces svasa which originated from the stomach. Asthmatic attack possess symptoms such as non-productive cough, chest tightening, shortness of breath, cough, wheezing, expectorating mucus, tachycardia and sweating.

- Dashamool tail 25ml or Dhanwantari taila 25ml salavan sukhoshna Matra Basti.
- Sadyah Vaman or Vaman with vata kapha doshaghna dravyas such as dashmool, madanphala etc.
- Swaskaschintamani with mallasindoor with tamaal patra swaras sublingually

Along with some herbs like - Bala- bronchodilator effect; Herbal tea of ajwain, tulsi, pepper and ginger- Natural expectorant; Vasa- in pittaj tamak shwas; Ephedra, thyme, pepper, ginger, cayenne- in kaphaj asthma; Yashtimadhu- prevents airway obstruction; Combination of pepper, honey and onion juice; Formulations- Sitopaladi churna- reduces chest congestion, Kantakari avaleha- reduces frequency of attack, Talisadi churna- allergic bronchitis, Vasarishta- expectorant, Padmapatradi yoga- in increased peak expiratory flow rate etc.

5. Pakshaghat/ Paralysis- It is Nanatmaja vatvyadhi and results because of vataprakopa.

- Teekshna nasya karma to reverse mada, murcha, sanyas.

- Nasya with teekshna aushadhi dravya 8 drops in each nostril
- Virechan with Gandharva hasta eranda taila 1030ml with 30ml dugdha
- Anuvasan 80ml with Brihat saindhav taila followed by niruha 500ml with mahamanjisthadi kashay

6. Jwara/ Aute febrile illness- It is rasapradoshaj vyadhi.

- Langhan- first line of treatment (excluding some exceptions like bhayaj, krodhaj, shoka etc)
- Pachana- In case of Taruna Jwara, swedana, tikta rasa Pradhan dravyas like yavagu are said to be pachak.
- Vamana- Kapha pradhana jwara and Amashaya sthita doshas, utklishta doshavastha in such cases doshas should be eliminated by Vamana.
- Ghritpaan- with tikta rasatmak ghrit in case of manda (alpa) kapha, vatapittottara jwara, paripakwa doshavastha in such conditions ghrita pana acts like nector (excluding kaph Pradhan conditions).
- Virechana- If fever does not subsided even by above said measures one should pacify it by Virechan karma in patients who have unimpaired bala, mamsa and agni
- Nirooha Basti- Enema with Cold water is found effective and enema with Jvaraghna kvath according to utklishta doshas is also proven effective

- Nasya with stanya- In case of loss of consciousness with fever or less involvement of kapha, stanya is used in nasya karma. As it possess considerable anti-infection property, absorbed through nasal mucosa in nano-particulate form along with drugs used very quickly through arachnoid matter sleeve extending along the olfactory nerve. Immuno- modulatory action of cytokines and lactoferrin, and anti-microbial activities of k-casein, lacto peroxidase defends against micro organisms.
- Kulatha Pinda Sweda (sudation with potali made of horse gram), which is hot in potency is advised of fever associated with complications like heaviness.

7. Chardi/Vomitting-

- An adhaaraneeya vega in which body tries to expel out the toxic materials.
- The first line of treatment is Langhana i.e. fasting.
- Vaman- to remove the toxins and indigested material from upper GIT. Sadyah vaman could be performed according to conditions.
- Virechan- to remove toxins and indigested material from lower GIT. Aushadhi dravya is chosen according to utklishta doshas. It is followed ghrita and lavan sevan.

8. Apasmar/ Epilepsy-

Apasmara is defined by charaka as Apagama of smriti associated with Bibhatsa cheshta due to derangement of

Dhi and satva. The line of treatment is as follows-

- Udavartana with yava-Triphalachurna for continuous 7 days,
- Deepan Pachan with Trikatu churna 2gm TDS for 3 days
- Snehapana with Panchagavyaghrita- Vardhaman matra for 5 days
- Sarvanga Abhyanga-Bashpa Swedana with Bala oil for 3 days
- Virechan karma- with trivrittaavaleha 60gm at a time
- Sansarjan karma followed by Nasya- 2 drops in each nostril for 1 month

Along with internal medicines like Mansyadikwath 40ml BD, Aampachanavati 500mg TDS, Erandbhritha Haritaki churna 3gm at bed time

9. Visha peeta(Ingested poison)-

- Induced emesis with 3litre decoction of 10gm Ikshvaku seeds(lagenaria siceraria)
- In case of poison situated in Pakwashaya(large Intestine), 100ml decoction of 10gm Niliniphala(Indigofera tinctoria) with 10gm for induced purgation.

-After decontamination of poisonous material from GIT, Dushivishari agad given 5gm twice a day for 21 days

RESULT-

In this paper, an effort is made towards the isolation or collection of the emergency medicine databases and panchakarma methods from ancient literature which is used and proven by

different ayurveda practicing physicians all over world.

DISCUSSION-

Application of Chikitsa depends on Avastha of Doshas, Dhatus, kala, Bala etc. The normal, healthy state of a being is described as a state of equilibrium or balance of Doshas and Dhatus in the body. In alpa bala condition Langhana is advised, in madhyama dosha condition Langhan pachana, in Bahudoshavastha condition Shodhana is indicated which depends on Roga and Rogibala.

CONCLUSION- By the practice of panchakarma, not only the purificative goal, but the facilitation of desired pharmacokinetic effect of therapeutic remedies administered is also achieved. Panchakarma works at various levels viz., somatic level, psychic level and neuro-endocrine level as well. Without deviating the Ayurveda principles, whatever it suggest we follow with situational dosage and intake methods- we can tackle the emergencies through Ayurveda medicines.

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