



Review Article

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ROLE OF UNDERSTANDING AVASTHAANURUPA PANCHAKARMA CHIKITSA IN CLINICAL PRACTICE WITH SPECIAL REFERENCE TO JWARA

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ABSTRACT

Vaidya might go a miss in clinical practice due to improper selection of panchakarma therapies. As a result practicing Ayurvedic fraternity is facing a huge difference between the scenario Shastra speaks of and the current scenario around us. This may be due to the difference in the method of study, teaching, research and practice. Understanding shastra plays a vital role in vaidya's life e.g. A Vaidya with good intellect but without sound knowledge of the Shastra cannot perform proper chikitsa. Similarly, Chikitsa performed by a Vaidya with sound knowledge of Shastra but without good intellect might fail to be a honed physician. Hence a vaidya who possess all the significant abilities understanding basic principles in clinical practice will emerge as a skill full practitioner. The presentation provides a better picture for developing guidelines based on classical references for identifying vyadhi avastha, as it is rightly mentioned by Acharya charaka "rogam aadou pareeksheta tato anantaram aoushadham" and thus accordingly selection of avasthanurupa panchakarma therapies in Jwara. Hence an effort is made to know how and when to select which particular panchakarma procedure, through the methods of diagnosing diseases in classical Ayurvedic practice by providing guidelines, applying Ayurvedic classical parameters, dimensions, requisites, targets; values etc. The presentation mainly focus on, proper way of selecting the vyadhi avasthaanurupa panchakarma chikitsa with an example of Jwara, which will positively reflect to the clinical practice of a vaidya. Hence an attempt is made to understand concepts as per classics on basis of Avastha.

Keywords: Avasthaa, Panchakarma, Guidelines, Parameters, Jwara

INTRODUCTION

Acharya Charaka mentioned about application of Panchakarma at the stage of Upasthita Dosahvasta (Prakupita and nearest to outlet) keeping into consideration of Matra and Kala.¹ Avastha of Dosha, Bsheshaja, kala Desha, Bala, Sharira, Ahara, Satva, Satmya, Prakruti, Vaya are said to be very minute in nature². To understand these minute factors one should have thorough knowledge in Shastra and Karma (Practical approach).³ Doshas might aggravate even after treatment with Langhana, Pachana but they never recur if they subsided with evacuative therapies. It may be understood by an example that "in case of Dosha as well as Plants if the root is not strike at reappearance of gone disorders and sprouts is certain.⁴ Question is when to treat the disease with evacuative therapies (Panchakarma). Acharya charaka clearly mentioned that shodana should be applicable in case of Bahu Doshavasta.⁵

Doshik Avasta Anusara Chikitsa

Doshas get vitiated and causes different diseases at different sites; doshavasthas are of two types:

1. Nirama (Kupita Dosha)
2. Sama avastha (Kupita Dosha + Ama)

In case of Samavastha, ama spreads all over the Sharira which is lurking in the dhatus and not moving out of their places in such condition these doshas should not be forced to let out by attempting the Panchakarma procedures. If one try to let it out its an attempt to take out juice from unripe fruit which destruct the dwelling place like-wise it's difficult to take out Doshas in Sarva Deha Pravrutata ama avastha. Treatment comprises of two stages:

1. Parishkarana (Processing) - Any one or all among Pachana, Deepana, Snehana and Swedana Should be suitably used.
2. Shodana (elimination) - Should be done using Shodana Dravyas in the proper way through nearest route in accordance with Dosha bala, Kala, etc at proper time.⁶

Avastanusara Panchakarma Chikitsa in Jwara

Here an example of Jwara chikitsa is taken to understand the concept of Avastanusara selection of Panchakarma treatment.

Langhana

First and foremost treatment mentioned for Jwara is Langhana. Only exception in case of Kshayaja, Anilaja, Bhayaja, Krodhaja, Kama, Shoka, Shrama janya jwara one should not go for langhana.⁷

Pachana

In case of Taruna Jwara Langhana, Swedana, Tikta rasa yukta yavagu or Tikta rasa paniya are said to be dosha Pachaka.⁸

Vamana

Kapha pradhana jwara, and Amashaya sthita doshas, utklita doshavastha in such condition patient who is fit for Vamana in such cases Doshas should be eliminated by Vamana karma.⁹

Ghrita Pana

In case of manda (alpa) kapha, vatapittottara jwara, paripakwa doshavastha in such conditions Ghrita pana acts like nector.

Contra indication

In case even after ten days kapha is predominant and patient does not have langhana samyak laxana in such conditions ghruta pana is contra indicated¹⁰

Virechana

If fever does not subsided even by above said measures one should pacify it by Virechana Karma in patients who have unimpaired Bala, Mamsa and Agni.¹¹

Nirooha Basti

In jwara ksheena persons neither Vamana nor the Virechana is beneficial. In such condition excrements should be eliminated by adequate intake of milk or by Nirooha Basti. When doshas are paripakwa avastha by administering Nirooha basti it gives strength to Agni, freedom from fever, happiness and relish quickly.¹²

Anuvasana Basti

In jeerna jwara when kapha pitta are reduced, appetite is good, hard stool and constipated in such condition Anuvasana Basti should be applied.¹³

Nasya

In Jeerna Jwara if patient feel heaviness and pain in Shiras (head) and senses are blocked in such condition Nasya should be administered.¹⁴

Bahya Upachara

In case of Jeerna jwara physician can advise for Abhyanga, Pradeha, Parisheka, and Avagaha by all these Bahir marga gata jwara pacified and gives strength to Agni, increases Bala and Varna. The cases of jeerna jwara having remnant only in Twak and where there is some association of some extrinsic factor get relief from application of Dhupana and Anjana.¹⁵

Understanding the Concept

Application of Shodhana chikitsa depends on Avastha, as mentioned in our classics one should apply those in Bahudoshavastha condition keeping into consideration about Upasthita doshavastha means dhoshas which already move from Shaka to Kosta.¹⁶ Treatment should cure the disease condition and it should not lead to other complications such treatment known as Vishuddha chikitsa, one which leads to other complications known as Avishuddha chikitsa.¹⁷ Hence for the reason while selecting treatment one should have thorough knowledge about Dosha, Bala, Abala. In alpa bala condition Langhana is advised, In Madhyama Dosha condition Langhna Pachana, In Bahudoshavastha condition Shodhana is indicated which depends on Roga and Rogi bala.¹⁸ Jwara comes under Rasa Pradoshaja vyadhi¹⁹, Treatment advised for Rasa Pradoshaja vyadhi is Sarvam Langhana.²⁰ Hence in Jwara chikitsa sutra first line of treatment given is Langhana. Here one should understand that Langhana is not only restricted to Upavasa but also gives the meaning about Dasha vida Langhana.²¹ Chatuspraka shodana also considered under Langhana. One should apply those according to the condition. In case of Kshayaja jwara we may consider as Rajayakshma and in case of Anilaja (Vata) means Dhatu kshyajanya kupita Anila. In case of Bhaya, Krodha, Kama, Shoka where Manasika dohsa involved in such conditions one should not go for Shodana line of management²². In case of Avipakwa Doshavstha one should go for Pachana line of treatment.²³ Vamana should be indicated in case of Kapha pradhana utklita. Doshavastha means Hrullasadina Bahirgamanonmukha (which have tendency to let out), Doshas should be in Amashya (Nabhi Sthanatara Madyagam Amashayam), screening for vama avama one should go for Vamana Karma. Here most important thing is to understand that it's Sadhyo Vamana which should be done without Snehana and Swedana or with Alpa Sneha Swedana²⁴. If in case of Anupasthita Doshavastha Vamana is given it will leads to the complications like Hrudroga, Swasa, Anaha and Moha. Also one should not go for Vamana in Sarva deha Sama Avastha condition as it will leads to Ashaya Nasha.²⁵ In case of Manda Kapha avastha and vata pitta vruddi as a result of Langhana in such condition Ghruta Pana act like a Nector but in case even after ten days if it is not achieved Langhna sidda lakshana and Kapha is dominant in such condition so better to do Pachana by Kashaya later on for Balartha Mamsa rasa prayoga is given.²⁶ In case Jwara not subsided by any measures and patient is fit for shodana in such condition one should go for Virecha. Here Virechana does not mean for only purgation it gives

both meaning of Vamana as well as Virecha, as both do the mala rechana. One should apply yukti and select the proper line of management.²⁷ In case of Jwara ksheena avastha one should go for Ksheera pana or Nirooha prayoga. As Ksheera does Dosha anulomana, also gives bala pusti to Dhatus, Sramsana does shodhana of pittashyastha Pitta or Pitta-Kapha where Nirroha Does Shodana of Tridoshas, also gives strength to Agni.²⁸ In case of Jeerna Jwara if purisha is rooksha and baddha in such condition go for Anuvasana Basti where Kapha-Pitta are in Ksheena Avastha and Agni is stable.²⁹ Bahya karmas like abhyanga, pradeha, parisheka, avagaha should be done as per condition that in case of sheeta utpanna Ushna kriya and in case of Ushna utpanna Sheeta Kriya is advised.³⁰

CONCLUSION

Before selecting the line of treatment one should have thorough knowledge about Doshik condition, Sama Nirama avastha, Rogi and Roga Bala. If all the conditions are favourable then select shodana line of management as per doshik predominance. Most important thing is to consider that for shodana, Doshas should be in the shodana marga i.e. in Kosta. In case of Tiryak gata doshavastha one should not go for shodana line of management first do the shaman and bring those to Kosta and later let it through the nearest route. Select the line of management on bases of Sthana (Ashaya) not only on bases of Dosha. Vamana is indicated in Kapha Dosha and Amashayastha Kapha pitta condition. Virechana is indicated in Pitta Dosha as well as Pakwashayastha Doshik condition. Vangasena contributed many practical aspects in the field of Panchakarma; he had mentioned the dose of Vamana virechana dravyas clearly and for the first time contributed the dose pattern of the Anuvasana Basti.³¹ One should always remember that

“Prayogaha Shamayet vyadhim yo anyam na udiryet na assou vishuddha Shuddastu Shamayet yon a kopayet”

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