Role of Sadhyovamana as Emergency Procedure in Panchakarma: A Review

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Abstract

Over the last few decades, common people have a belief that Ayurveda can treat only chronic diseases. In the acute condition, we generally preferred modern medicine. But in that era also, a description of acute diseases suggested the availability of emergency treatment. Panchakarma chikitsa plays a vital role in ayurvedic treatment line, but in emergency cases, due to lack of time, it is not possible to carry out purvakarma, pradhan karma, and pashchat karma of vamana, virechana procedures. In such a condition concept of sadyovamana can be used as emergency treatment. So, to describe the procedure and importance of sadyovamana in comparison with classical vamana procedure critical analysis of literature has been done. It was found that sadyovamana can be used in various atyayika conditions of diseases. In an emergency, as purvakarma is not mandatory to carry out sadyovamana. This procedure can be conducted in a single day. There is no requirement of vishram kala (gap period). Even consideration of kala (time) does not matter many more. It is cost-effective, less time consuming and has an immediate effect, but it lasts for a short period. So, we can use the sadyovamana in the case of atyayika chikitsa of various diseases whenever classical vamana is not possible.

Key Words: Atyayika chikitsa, Ayurveda, Panchakarma, Sadyovamana.

Introduction

Over the last few decades, common people have a belief that Ayurveda can treat only chronic diseases. In the acute condition, we generally preferred modern medicine. But in that era also, a description of acute (ashukari) diseases suggests the availability of emergency treatment. Ayurveda describes the two different methods of treating disease shodhana and shamana (pacification of dosha). Shodhana means detoxification and cleansing of the body. Detoxification of the body done with panchakarma procedures. Panchakarma term indicates the five procedures of shodhana of body channels. These five procedures are vamana (therapeutic emesis) performed to vomit the aggravated kapha dosha. Virechana (purgation) is performed to expelled out aggravated Pitta. Nasya (nasal oleation) is carried out to clean channels of the head, neck region mainly. Basti (herbal enema) is the most important procedure, also known as ardhha chikitsa (half treatment) of whole Ayurveda, performed to manifest the vitiated vata dosha of the body. Raktamokshana (blood-letting) is performed to treat blood impurity (rakta dushti). These five procedures play a vital role in Ayurveda, treatment of person but need some time to carry out. Each procedure requires purvakarma (pre-procedure), pradhan karma (main procedure), and pashchat karma (post-procedure) so need in time. But if there are emergency arises, on the spot we can’t perform classical vamana, virechana, in such condition there is a provision of sadyovamana instead of classical vamana.

The word sadyovamana is a combination of two words sadyo and vamana. According to Shabdkalpadruma, sadya means on the same day, in the very moment, or immediately. According to Amarkosha the meaning of these two words is instantly or at once. Sadyovamana means to attain an immediate or quick elimination of vitiated doshas through the oral route. It is the instant therapeutic emesis (purificatory procedure) conducted without internal oleation (abhyantarana snehapanama) and sudation (sweda) in aggravated kapha conditions. In an emergency (atyayik chikitsa) when doshas are in aggravated (utklishtha) stage, instead of classical vamana karma, sadyovamana can be given irrespective of kala. This procedure is less time consuming, cost-effective, and beneficial in acute conditions. So, the objective of this review is to describe the meaning and purpose of sadyovamana procedures as an emergency treatment.

Aim and Objectives

- To highlight the concept of sadyovamana used in an emergency (atyayika chikitsa).
- To describe the procedure of sadyovamana.

Review of Literature

Ayurveda describes the use of sadyovamana in various diseases. The term sadyo vamana is not directly
described in compendia but we find the traces of these in various classical texts. In Charak Samhita, Acharya has described the procedure of sadyovamana in jvara chikitsa. Jvara (fever) is dominated by kapha and is located in aamashaya in the stage of utklesha (aggravated). It should be removed by the administration of vamana therapy(1). In Vangasen Jvara chikitsa, it is mentioned that in the case of aamajwara, jvara caused due to ama (toxins), soon after the ingestion of food causes amajwara. Sadyovamana can be given in such a situation. The case of aamajwara, vamana should be given with lawanambu(2) (saltwater). In Pitaj jwara patients with excessive thirst should be given plenty of water and honey for vamana(3).

In Shwas samprapti, strotas involved is pranvaha stotas. Obstruction in strotas is due to kapha. As there is an utklesha of kapha dosha, sadyovamana can be given(4). Chakrapani in his commentary says that swasa is pitta sthana samudbhava, which refers to the involvement of the pitta with urdhwasthakta, through kapha, and vata is responsible for initiating the disease. In the same commentary it is said that pitasthana can be taken as aamashaya. As there is involvement of the utklipta kapha and the disease is aamashaya samudbhava, sadyovanman can be given(5). Vaman brings strotoshuddhi and kaphavaroadha will be removed(6). Madatayya is caused due to excessive consumption of madya. Due to teeksha, ushna and ruksha property of madya, utklesha of the kapha-pitta occurs. In Madatayya patient should take ikshu rasas and madya till his throat (akantha pana) and then made to vomit immediately(7). In the case of Visha, in an emergency (atyayik) condition needs immediate care. Vamana indicated in the visha vegas need not require snehapana or swedana. Hence here we can probably say that the sadyo vamana is mentioned. Acharya Charaka has mentioned vamana in the stavhara visha chikitsa (8). In Gara visha chikitsa, Chakrapani advised giving vamana immediately(9). There is no other treatment better than vamana in case of stavhara visha chikitsa. In Chhardi vyadh, nidanasevana leads to prakopa of vata. Vata gets located in udara which produces utkleshana of undigested particle. Expels these through the koshtha and agnibala is reduced(10). In Chhardi, agni is in mandavashya, it may not be able to digest the medicine also. Vamana may bring up the utklihta dosha, then undigested substances located in the aamashaya along with the vamana aushadha. Moreover, pravruddha kapha will act like shalya if not expelled outside, so here sadyo vamana can be carried out because usage of snehana, swedana will further worsen the condition of dosha is in aamashaya and pravruddha avastha. In Madhav Nidan, Acharya explained in Kotha chikitsa that, kotha is a disease that arises due to the improper administration of the shodhana chikitsa or due to avastha of pitta, kapha and anna(11). Acharya Vangsa has mentioned vamana should be induced very quickly. He suggested sadyo vamana in kotha by patolanimbavana kwatha(12). In Alasaka disease utklihta dosha is present. Hence there is no need to produce the utklihta of doshas further so sadyo vamana can be performed. In Charak Vimansthana, acharya has mentioned the disease called Amavisha. In amavisha condition emergency treatment should be given (its mentioned as ashukaryita virudhopakrama cha). In samadosha conditions, made to vomit with lukewarm water with salt followed by sweda(13). Visutchika is a condition that occurs in ajeerana which is characterized by pain which is similar to pricking pain(14). In Vangsa Ajeerna chikitsa, it is described that vamana should be done with lukewarm salt water(15). While performing virechana even after attaining the sudhi lakshana, the medicines remain in the koshtha. Acharya Charaka has advised performing the vamana to bring out excess medicine from the koshtha(16). According to Acharya Sushruta, Sadyovamana can be given to those persons who affiliated with kapha, persons suffering from Ajeerna, and Visha. Acharya Sushruta has mentioned that conditions, where medicine administered for vamana and virechana, does not produce the desired results. Thereby resides in the koshtha and causing the obstructing of the dosha. In such conditions associated with trishna, shula, chhardi etc vamana has to be induced by ushna jala(17)(warm water). Vangasena has described the disease upadamsa that, the excessive of dosha in upadamsa should be expelled out by both routes immediately. Pain and odema of patient subside soon(18). Ajeerna is the condition in which acharya charaka said that the person suffering from the disease, should not be given normal vamana drugs to induced vamana. Lukewarm saltwater is advised in this situation(19). Acharya Kashyapa has mentioned that no liquid medicines should be administered suddenly in case of amlapitta, other than the vamanaoashadha(20)

Materials and Methods

The concept of sadyo vamana is studied through classical text of Ayurveda Charak Samhita, Sushrut Samhita, Ashtanga hridaya, Madhava Nidana, Sharangdhara Samhita, Vangsa samhita, Bhaishajya ratnavali were studied. Along with this literature available from various search engines were also studied, then analysis of literature has been done.

Result and Discussion

Procedure of Sadyovamana

Criteria for sadyo vamana are, utklihta dosha, atyayika avastha (emergency condition) and vamya rogi(21).To perform sadyo vamana, kapha and Pitta dosha must be in utklihta stage. Acharya Chakrapani has mentioned utklihta avastha means dosha are detached and ready to come out from amasaya(22). Acharya Sushruta has mentioned that when irradiated food associated with salivation, spitting and does not come out but produces pain in the cardiac region it is known as utklesha(23) Vamana should be performed in the morning i.e. kapha kala. However, in atyayika vikara (when the disease in the emergency stage) there is no need to consider kala while performing any panchakarma procedure, as dosha is in utklihta stage so consideration of time does not matter many more.
The necessity of purvakarma in sadvyamana is to mobilize the doshas from the discrete parts of the body to koshtha, for easier vamana process with minimum strain, to prevent vata prakopa and for softening and liquefying the doshas. In the case of an acute attack of a disease where sadvyamana is to be administered for instant management, it is not mandatory to do abhyanga (massage) and swedana (sudation). Purvakarma procedure of sadvyamana may vary from disease to disease. E.g. in the case of visha, ajirna, etc emergency conditions directly vamana dravya is given to remove the visha and undigested food without abhyanga and swedana. But in acute attack of shwasa, lavana taila abhyanga and swedana are essential to liquefy the kapha, bring the kapha to amashaya from pranavaha strotas thus helps in easy elimination(24).

Yavagu (rice mixed with a small quantity of ghee) should be given before sadvyamana. Vamana should not be administered to patients with an empty stomach.

Pradhana Karma

The procedure of Sadvyamana is as of classical vamana. Since there is utklisha avastha of dosha, the drug which is used in the procedure is vamanopaga like lawanambu. Different drugs can be used in different diseases as shown in table no.1

Table no.1: Dravya used to perform Sadvyamana

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Compedia</th>
<th>Disease</th>
<th>S a d y o v a m a n a d r a v y a</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Charaka</td>
<td>Amajvara</td>
<td>Lawanambu</td>
</tr>
<tr>
<td>2</td>
<td>Charaka</td>
<td>Alasak</td>
<td>Ushna lawanambu</td>
</tr>
<tr>
<td>3</td>
<td>Sushruta</td>
<td>Pittaj jwara</td>
<td>Lawanambu</td>
</tr>
<tr>
<td>4</td>
<td>Sushruta</td>
<td>Madatyaya</td>
<td>Iksurasa, Madya</td>
</tr>
<tr>
<td>5</td>
<td>Vagbhata</td>
<td>Jwara</td>
<td>Sura, Tittira mansarasa</td>
</tr>
<tr>
<td>6</td>
<td>Kashyapa</td>
<td>Amlapitta</td>
<td>L a w n o m a n b u , kshira, iksurasa</td>
</tr>
<tr>
<td>7</td>
<td>Vangsen</td>
<td>Visuchika</td>
<td>Ushna lawanambu</td>
</tr>
<tr>
<td>8</td>
<td>Vangsen</td>
<td>Visha</td>
<td>Madanphala, Sunthi</td>
</tr>
<tr>
<td>9</td>
<td>Bhaishajya ratnavali</td>
<td>Ajirna</td>
<td>Vacha, lawanambu</td>
</tr>
</tbody>
</table>

Pashchat karma

After achieving samyak shuddhi lakshana patient is asked to take rest, dhumpan, and peyadi sansarjana krama (diet regimen).

Mode of action of classical vamana

According to Acharya Charaka, the emetic drug has ushna, teekshna, sukshma, vyavayi and vikasi guna. By their potency, it reaches to the heart and circulates through vessels. Because of their agneya nature, they liquify the compact doshas. Teekshna guna separated the adhered doshas located in gross and subtle channels of the body (sthula and sukshma strotas). These separated doshas are brought to amashaya due to anupranav bhava. Doshas get stimulated by udan vayu as vamak drug have urdhvabhaira prabhava due to agni and vayu predominance which ultimately leads to migration of doshas towards mouth from amashaya(25).

Mode of action of sadvyamana is also the same as that of classical vamana except purvakarma is not done in sadvyamana. The doshas expelled from localize tissue. The dravya use for sadvyamana is vamanopaga dravya ( drug helps for vamana ). Some basic difference in classical vamana and sadvyamana showing in table no. 2.

Table no.2: Difference between Sadyo Vamana and Classical Vamana:

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Sadyo Vamana</th>
<th>Classical Vamana</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Vamana is conducted immediately in a single day.</td>
<td>Vamana conducted by arohana krama Sneha pana upto samyak snigdha lakshana.</td>
</tr>
<tr>
<td>2</td>
<td>Purva karmas like ama pachana, snehana, swedana are not mandatory to carry out Sadyovamana(26).</td>
<td>Purva karmas like pachana, snehana, swedana are mandatory.</td>
</tr>
<tr>
<td>3</td>
<td>The doshas are expelled out from localise tissue.</td>
<td>The doshas are expelled out from the system, i.e deep tissue.</td>
</tr>
<tr>
<td>4</td>
<td>Not require vishram kala (gap period).</td>
<td>Require vishram kala (gap period)(27).</td>
</tr>
<tr>
<td>5</td>
<td>The person who is not co-operative, don’t have much time and dosha are in utklisha avastha, sadyo vamana carried out.</td>
<td>Patients should be co-operative, have ample time to take treatment, and bhisak vashya (obedient).</td>
</tr>
<tr>
<td>6</td>
<td>Short-acting effect</td>
<td>Long-lasting effect.</td>
</tr>
</tbody>
</table>

In sadvyamana we are not following increasing order of oletion (arohana krama snehpana) and the vishram kala etc as per the guidelines by the Acharyas. Because of these, we are not eliminating prabhuta dosha from the deeper tissue. Sadvyamana has minimal efficacy and instant relief like as ajeerna.

Sadvyamana is carried out when dosha utklisha lakshnas like hrullas, lala praseka, shiro gourava, kapha shivana, bhakta dwesha etc are present. Purvakarma like ama pachana, snehana, swedana are not mandatory for sadyo vamana. Otherwise the dosha utklisha avastha is reduced. Sadyo vamana may be practised instantly in conditions like tamaka swasa(28)(2)(bronchial asthma), urdhwaga
amlapitta, ajeerna etc. It can be practiced in various emergency conditions kapha utklesha avastha in disease, visha pana, ajeerna, amlapitta, and dental caries(29)as an emergency treatment.

Benefits of sadyovamana
It is cost-effective as we can perform it without snehapana. It is less time consuming as classical vamana requires a minimum of 15 days. Sadyovamana can carry out according to the situation instantly. And we can observe the immediate effect of sadyovamana as good as classical vamana.

Conclusion
Sadyovamana is an important panchakarma process which is least practiced. It is a tool that can be used in various emergency diseases conditions. It gives instant relief in utklshta doshavastha. It is a cost-effective, less time consuming, and easy to carry out.

References


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