



## AN AYURVEDIC VIEW ON GUDA SHAREERAM- A REVIEW ARTICLE

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## ABSTRACT

*Sushruta Samhita* is the ancient text of surgery, which provides a thorough explanation of the anatomy and physiology of various organs. *Guda* (ano-rectum) is one of the most important organs among them. The embryological development of *guda* and its complete evolution have been elucidated by different *acharyas*. Which is explained in terms of functions, complications as a result of the surgical relevance of these structures. The consequences due of the damage to the *guda* have also been explained besides the various diseases occurring in *guda*.

**Keywords:** *Guda, Ano-rectum, Sushruta Samhita, etc.*

## INTRODUCTION

The term *guda* is derived from the term *apana vayu* and *mala*, which signifies the organ that excretes the *apana vayu* and *mala*. *Guda* is a name that can be used to describe the last part of the digestive system. The word *guda* refers to the organ that evacuates the *apana vayu*, according to the *ayurvedic Shabdakosha*. *Guda* is a term used in *ayurvedic* writings to describe the ano-rectum. This phrase has been utilised by al-

most all *acharyas* to refer to an organ that performs the real function of defecation. In *Charak Samhita Sharira Sthana*, they've even discussed the embryological origins and development of *guda* and other body organs. According to *Bhadrashounak guda* is the first developed organ during fetal life<sup>1</sup>. It demonstrates their inventiveness and depth of knowledge of

the human body and its organs during a time when resources were scarce.

**Synonyms:** *Amarkosa: Aapanam, Payu, Jatadharam: Guhyam, Gudavartma, Vijayaraksita: Apanah, Mahatsrotas, Gangadhara: Bradhanam, Vachaspati: Vidmarga, Charaka: Uttaraguda, Adharaguda, Sthulaguda, Gudamukha, Sushruta: Gudamandala, Gudavalaya, Payuvalaya, Gudaustha., Vagbhata: Gudamarga, Dalhana: Gudantram*

### Embryological Development:

In the fourth month of intrauterine life, all the major and minor parts become clearly delineated, as indicated by Acharya Sushruta in the *Sushruta Samhita's sharira sthana*. The distinction between all main and minor parts becomes evident in the seventh month of intrauterine life. *Guda* is a *mridu avayava*, hence it's known as the '*Matruja avayava*'. *Pitta* acts on the minute essence of *rakta dhatu* and *kapha*, followed by *vata's* activity, and *guda* is created. The growth of the anal canal is delineated by *Vayu* and *Pitta*<sup>3</sup>.

### Structures and functions of guda:

**Location** - Four bones are in close vicinity to *guda* (in *shroni*, referring to the public and ischial bones) And there are *sandhis* of the *Samudga* kind nearby<sup>4</sup>. *Guda* is attached to *Sihoolantra*, i.e., the terminal portion of the big intestine, according to Acharya Sushruta in *nidana sthan*.

**Size** - Four and half *angula*<sup>5</sup>.

**Relations** - As Acharya Sushruta explained to approach *ashmari* via *guda* in *ashmari chikitsa adhyaya*, *basti* is close to *guda* (in front). *Garbhashaya* is situated above and in front of the *guda*. The opinion of Acharya Sushruta can be used to get the inference. *Garbhashaya* is found behind *basti* in females, according to Acharya Sushruta. According to Dalhanacharya, the location of *garbhashaya* is near *basti* and *maha srotasa*, citing Acharya Vaitarana. This refers to the area between the bladder and the rectum. *Guda* explains the approach to *basti*. In the framework of *Mutrasravi vrana*, the proximity of *basti mukha* to *guda* is explained. Injury to the structures near the *basti mukha* is thought to be the cause of *Mutrasravi vrana* after *ashmari nirharana*<sup>6</sup>. It

could be damage to the urethra's membranous component.

**Siras and Dhamanis-** Sushruta mentioned *Pradhana dhamani (Pureeshavahinee)* when explaining the *samprapti* of *arsha roga*. Dalhanacharya coined the term *Pureeshavahinee*. In *guda*, there are four *siras*. Which are thought to be *vata*, *pitta*, and *kapha*, *rakta* carriers. According to Acharya Sushruta's *Dhamani Vyakarana*, these are among the *adhogami dhamanis*<sup>7</sup>.

**Sroto Moola** - *Guda* and *Pakwashaya* are the *moola* of *Pureeshavaha srotasa*<sup>8</sup>.

**Guda Marma-** *Guda marma* is classified as *mamsa marma* by Acharya Sushruta and *dhamani marma* by Acharya Vagbhata<sup>9</sup>. It is considered as *Sadyoprana-hara marma*<sup>10</sup>. Sepsis is the most common complication in large perineal injuries involving the destruction of the lower rectum, anus, soft tissue, and sphincter. Reduced complications and improved fatality rates in such cases are undoubtedly due in major part to the shorter time between damage and definitive treatment, the ready availability of blood replacement, widespread use of antibiotics, and post-operative management should be approached quickly. Death from post-operative infections and uncontrolled haemorrhage have been linked to *mamsa* and *dhamani marma* involvement and injury respectively.

**Features-** *Pravahanee*, *Visarjanee*, and *Samvaranee* are the three *valis* found in *guda*. The innermost *vali* is *Pravahanee*, the middle *vali* is *Visarjanee*, and the outermost *vali* is *Samvaranee*. The *valis* are the same colour as an elephant's palate (*gajatalunibha*)<sup>11</sup>. *Pravahani*: One and a half *angula* in length. The function of *Pravahanee* is to produce *pravahana* (straining). *Visarjanee*: One and a half *angula* in length. The function of *Visarjanee* is to carry out the process of *visarjana* (expel the faeces). *Samvaranee*: One and a half *angula* in length. The function of *Samvaranee* is to *samvarana* (to constrict or close) During excretion of faeces, the act of propulsion, expulsion, and closer is performed in a synchronised manner.

## AIMS AND OBJECTIVES-

1. To understand the concept of *guda shareeram* in *ayurvedic view*.
2. To explore the anatomical relation of *guda* mentioned in *samhita*.
3. To evaluate and discuss the physiological functions of *guda* explained in our classical *ayurvedic* texts by various *acharyas*.
4. To know the surgical relevance of *guda*.

## MATERIALS AND METHOD

All the references are collected from classical *ayurvedic texts* and commentaries viz. *Sushruta Samhita*, *Charak Samhita*, *Astanga Hridaya*, *Vidyotini Teeka*, *Dalhana Teeka*. The study is performed at the University College of Ayurveda, DSRRAU, Jodhpur.

## DISCUSSION

We get various references of *guda* mentioned in our *ayurvedic* texts, but *Acharya Sushruta* has given the description of *guda* in an extensive way in *Sushruta Samhita*. It is considered to be the soft organ or *mridu-anga* formed from *matrija bhava* in intra-uterine life. According to *Bhadrashounak guda* is the *adhithan* of *maruta*<sup>12</sup>. It is a vital point in the human body as it is one of our *sadyopranahara marmas*. Any injury to this may lead to death immediately or within seven nights. Hence, *guda* plays an important role in our *shareera*.

## CONCLUSION

The above study can conclude that *guda* plays a vital part in the excretory process of the human body. It helps in the excretion of *mala* and *apan vayu* or excretory products of our body. Along with these functions, it has significant surgical importance in the human body. Its structural relevance should be kept

in mind while performing any surgical or para-surgical procedures. Otherwise, it can be a life-threatening condition.

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