

A REVIEW OF ROLE OF *PANCHAKARMA* PROCEDURES IN THE MANAGEMENT OF *PARKINSON'S DISEASE*

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ABSTRACT

The term '*Panchakarma*' refers to a set of specialized therapeutic procedures that are meant for Bio-purification. They possess multidimensional effect on the body and play key role in both preventive and curative aspect of management. Classical *Panchakarma* refers to 5 types of *Sodhana* procedures i.e. 1. *Vamanam*, 2. *Virechanam*, 3. *Vasti*, 4. *Nasyam*, 5. *Raktmokshanam*. External *Panchakarma* procedures include *Abhyangam*, *Nadiswedam*, *Shirodhara*, *Shirovasti*, *Pizhichil* etc. *Parkinson's disease* is typically considered a chronic progressive neurodegenerative movement disorder. It is disease of extrapyramidal motor system characterized by rigidity, tremor and hypokinesia, bradykinesia, akinesia with secondary manifestation like defective posture abnormal Gait and mask face. According to *Ayurveda* it is correlated with *Kampavata*. It is described under *Vatananatamaj vyadhi*. *Kampavata* being *Vatavyadhi*, mainly need *Snehana* and *Swedana* to pacify *Vata dosha*. *Virechana* causes *Vatanulomana* and eliminates *Pakvasayagata Vata* very effectively. *Vasti* is important *sodhana* treatment intended to alleviate *Vata dosha* and with its multidimensional effect, help in systematic management of *Parkinson's disease*. External *Panchakarma* procedures are aimed for the symptomatic relief of rigidity, gait etc. Thus by the rational prescription of both internal and external *Panchakarma* procedures, *Parkinson's disease* will be managed in both system and local levels.

Keywords: *Panchakarma*, Bio-Purification, *Parkinson's disease*, *Vatanulomana*.

INTRODUCTION

Parkinson's disease is typically considered a chronic progressive neurodegenerative movement disorder. It affects individuals worldwide. Incidence of *Parkinson's disease* 4.5-19/100,000 persons per year. It is progressive disorder characterized by insidious onset. The first clinical sign occurs when about 60%

of the dopamine-producing cells in the substantia nigra have degenerated¹.

The condition occurs in all ethnic groups and there is a 1.8times greater risk of *Parkinson's disease* in men. The cause of disease remains uncertain but it is likely to be due to a combination of genetic risk factors and environmental agents.

It is disease of extra pyramidal motor system characterized by rigidity, tremor, and hypokinesia, bradykinesia, akinesia with secondary manifestation like defective posture abnormal Gait and mask face.

The non motor symptoms are of crucial importance since they have a major impact on quality of life. Neuropsychiatric symptoms are anxiety disorders, apathy, depression, psychosis, visual hallucinations, and dementia and sleep disturbances.

The autonomic disturbances are urinary dysfunction, constipation, sexual dysfunction, postural hypotension, weight loss, dysphagia, sweating and excessive salivation.

According to *Ayurveda Kampavata* is a *Vata Nanatmaja vyadhi* explain by Acharya Charaka Sutra *Sthan* (20)². As a separate clinical entity *Kampavata* was first narrated by Acharya Madhavakar under the name of *Vepathu*³. *Basavarajeeyam* explained the symptoms of *Kampavata* are *Karapadtalkampa* (tremors in hands and legs), *Dehabramana* (postural instability), *nidrabhagna* (insomnia) and *Matiksheen* (dementia)⁴. The symptom like *Stambha* (rigidity), *Cestahani* (slowness of the movement), *Vinaman* (flexed posture), *Vakvikriti* (speech disorders) have been mentioned in other pathological conditions of *Vatavyadhi* which can also be grouped under the feature of *Kampavata*. In *Kampavata Avarana* of *Vata* and *Dhatukshaya* are the chief pathological processes. There are depletion of *rakta dhatu* and *avarana* of *prana*, *vyana* and *udana vata*. In elderly, *apan vayu* get vitiated. Acharya Charaka has mentioned *Asthapana vasti* for *Vepana*⁵. *Charaka* has stressed on *Srotoshuddhi*, *Vatanulomana* and *Rasayana* in general management of *Avarana*. *Vangasena* has clearly mentioned the treatment of *Kampavata* as *Swedana*, *Abhyanga*, *Anuvasana vasti*, *Niruha vasti*, *Shirovasti*, *Virechana* and *Shamanaushadhi*⁶.

MATERIALS AND METHODS

Here, the sources of data's for conceptual study are taken from Ayurvedic text like *Charak Samhita*,

Astang Hridya, *Madhava Nidanam*, *Vangasena samhita*, *Basvarajiyam Basavraj*.

Parkinson's disease review is done with the help of Harrison's Principle of Internal medicine and Internet browsing from Pub Med.

ROLE OF PANCHAKARMA PROCEDURES IN THE MANAGEMENT OF PARKINSON'S DISEASE:

No satisfactory treatment is seen in contemporary system of medicine for *Parkinson's disease*. Its conventional treatment includes Levodopa preparations, anticholinergic drugs etc. A current priority is to move beyond symptom control to neuroprotective therapies. Unfortunately, no such therapy is yet available⁷. So a multi-modality treatment in the form of *Panchkarma* procedures is boon for *Parkinson's disease* Patient by giving satisfactory results in the treatment of disease.

Abhyanga:

Abhyanga is best therapeutic module for pacify the *vata*. It helps the promotion and regulation of proper functioning of *vata*. It helps in nourishment of the *dhatu*. It stimulates the sensory nerve endings and provides strength to the muscles.

Svedana:

It is useful in pacifying *vata*. *Svedana* relives *Stambha* (Stiffness). *Vyana vayu*, *Shleshaka kapha*, *Amarasa*, *Mams*, *Meda* are mainly responsible for *Stambha*. *Vata* by *Ruksha guna* absorbs *snigdhatu* and so causes *stambha*. *Svedana* is *snigdha* and *ushna guna* so it relieves *stambha* in *Parkinson's* patient. *Svedana* enhance local microcirculation, by increasing the diameter and blood flow velocity of peripheral arterioles, delivering higher level of oxygen and nutrients to the injured cells.

Vasti:

Among the *Panchakarma*, *Vasti* is important *Shodhana* type of treatments intended to alleviate *vata dosha* and also plays nourishing action on the nervous system. Acharya Charaka has mentioned *Asthapana vasti* for *Vepana*. Acharya Vangasena has also mentioned *Anuvasana*, *Niruha vasti* for treatment of *Kampavata*. *Vasti* especially alleviates

Avarana of *Vata* by *Kapha*, reduction in this *Avarana* was seen as there was improvement in symptomatology of *Kaphavrita Vyana* and *Kaphavrita Udana* was evident. *Vasti* having *Rasayana*, *Balya* and *Dhatu Vriddhikara* properties. The effect of *Vasti* on *Stambha*, *Gatisanga* and *Smriti*, may be due to improvement in the function of *Prana*, *Udana* and *Vyana*. Thus role of *vasti* is crucial in the management of *Kampavata* (Parkinson's disease).

Virechana:

Among the *Panchakarma*, *Virechana* is important *Shodhana* type of treatments intended to alleviate *pitta dosha*. Though the *Virechana* is a specific purification for *pitta* disorders, but it is also advised in various *vata* diseases to bring the *vata dosha* into *Anulomavasta*. *Virechana* is also indicated for the treatment of *Kaphavrita Vata*⁸. That's why *Virechana* is given in the management *Kampavata* (Parkinson's disease).

Shirovasti:

In *Shirovasti* the oil is made to retain on the scalp for a prescribed time. It is beneficial in *vata* disease. It promotes the sleep and calm the mind. It nourishes the brain. Thus role of *Shirovasti* is crucial in the management of *Kampavata* (Parkinson's disease).

Shirodhara:

Shirodhara with *Til tail* (lukewarm) has found to have anxiolytic, and tranquilizing effects resulting into kind of relaxation response. It calms down the hyper action of vitiated *Vyana vata dosha*. *Shirodhara* showed significant improvement in *Kampa* (tremor).

Nasya:

Nasya is most important therapy as it is used for treatment of *urdhvajatrugata* disease but it is also used in some systematic diseases such as *Kampavata*, *Hikka* etc. Acharya Vagbhata described *Snigdha Nasya* is indicated in *Shirokampa* disease⁹. It is capable to normalize *Vatadosha*.

CONCLUSION

Parkinson's disease can be lessened with early *Panchakarma therapy* as gains are made in musculo-skeleton flexibility, alignment and functional movements. It also suggests that *Panchakarma therapy* offer a cure for Parkinson's disease and help to ease symptoms and make coping with disease easier. Patients with Parkinson's disease may often turn to *Panchakarma therapy* with the hope of improving their quality of life.

REFERENCES

1. Booij J, Tissingh G, Winogrodzka A, van Royen EA. (1999). Imaging of the dopaminergic neurotransmission system using single-proton emission tomography and positron emission tomography in patients with Parkinsonism. *Eur J Nucl Med*, 26:171-82.
2. Agnivesha, Charaka samhita, edited with Vidyotini teeka by Kashinatha Sastri and Gorakhanatha Caturvedi, vol-2, Sutra sthana-20, verse no.-11, Chaukham babharti publication, Varanasi- 2008 edition page no.-399.
3. Madhavkara, Ed Dr. Brahmanand Tripathi; Madhava Nidanam with Madhukosha teeka; Chaukambha publications Vol. 1, Chapter. 22, page no.- 551.
4. Shastry RD editor, Basvarajiyam Basavraj. Chapter 6, Chaukhamba Sanskrit Series, Varanasi, 1987.
5. Agnivesha, Charaka samhita, edited with Vidyotini teeka by Kashinatha Sastri and Gorakhanatha Caturvedi, vol-2, Siddhi sthana-2, verse no.-16, Chaukhamba bharti publication, Varanasi- 2011 edition, page no.-983.
6. Vangasena, Vangasena samhita, with English translation by Dr. Nirmal Saxena, chapter- 60, Versa no.-155. Chaukhamba Sanskrit series office, Varanasi-2014 edition, page no. 409
7. Anthony S. Fauci (M.D) Eugene Braunwald, Kurt J. Jean D, Joseph B, Martin, Dennis Kasper, Stephen L-Harrison's Principle of Internal medicine 16th edition 1998. McGraw Hill, Health profession division printed in Singapore. page no.-2409
8. Agnivesha, Charaka samhita, edited with Vidyotini teeka by Kashinatha Sastri and Gorakhanatha Caturvedi, vol-2, Chikitsa sthana-28, verse no.-187, Chaukhamba bharti publication, Varanasi- 2011 edition, page no.-808.

9. Laghu Vagbhata, Astanga Hridya, edited with Vidhyotini teeka by Atrideva Gupta, Uttar sthana-24, verse no.-4/1, Chaukhamba Prakashan, Varanasi-2011 edition, page no.-729

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