ROLE OF AGNIKARMA IN THE MANAGEMENT OF VARIOUS DISEASES

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ABSTRACT

Agnikarma means application of Agni directly or indirectly with the help of different materials to relieve the patient from disease. Agnikarma means treatment with the help of Agni. Sushruta indicated ‘Agnikarma’ in various disorders of skin, muscles, vessels, ligaments joints and bones. The disease which are treated with the help of Agnikarma therapy, do not reoccur. The approach of Agnikarma has been mentioned in the context of diseases like Arsha, Arbuda, Bhagandara, Sira, Snayu, Asthi, Sandhigata Vata Vikara and Gridhrasi. In Agnikarma therapy part or tissue is burned with the help of various special materials called Dahanopakarana like drugs, articles and substance used to produce therapeutic burns (samyakadagdha) during Agnikarma chikitsa. With the advancements of medical science many techniques have been designed for pain management which work on the principle of Agnikarma for pain relief e.g. Transcutaneous electrical nerve stimulation(TENS), Therapeutic ultrasound, Pulsed electromagnetic Field therapy(PEMF), Interferential Therapy(IFT) Electrical muscle stimulator (EMS) Radiation therapies like Infra-red therapy Diathermy, Electro cautery, Cauterization.

Keywords: Agnikarma, Dagdha, Dahana, Radiations, Cauterization.

INTRODUCTION

Sushruta has mentioned different methods of management of diseases, such as Bheshaja karma, Kshar karma, Agnikarma, Shastra karma and Rak tamokshana in medical science.
The word Agnikarma consists of Agni and karma i.e. heat and procedure. When samyaka dagdha vrana produced by Agni with the help of various Dravyas called as Agnikarma.

Agnikarma means application of Agni directly or indirectly with the help of different materials to relieve the patient from disease. Dalhana, commentator of Sushruta classified Agnikrita as karma or action carried out by Agni. Sushruta indicated ‘Agnikarma’ in various disorders of skin, muscles, vessels, ligaments joints and bones. Sushruta has also explained that the diseases treated with Agnikarma modality will be not reoccur.3 Yogaratnakara has explained the Agnikarma regarding the disease Gridhrasi Sharangdhara, Gadaniagrah, Vangasena, Bhavaprakash also mentioned Agnikarma Chikitsha in the management of various disease.
The approach of Agnikarma has been mentioned in the context of diseases like Arsha, Arbuda, Bhagandara,
Sira, Snayu, Asthi, Sandhigata Vata Vikara and Gridhrasi. In Agnikarma therapy part or tissue is burned or heat is applied with the help of various special materials called dahanopakarana. Dahanopakarana are various accessories like drugs, articles and substance used to produce therapeutic burns (Samyakadagdha) during Agnikarmachikitsa.

Methods: Study is literary review emphasizing on procedure of agnikarma as described by ancient acharya, Sushruta in Sushruta samhita. The study also includes critical study of various treatment modalities related to agnikarma (heat therapy) available as per classical literature of ayurveda and use of the principle of agnikarma in present era. Critical study of multiple heat therapies available and effective in the management of arthropathies and musculo-skeletal disorders especially in pain management[6].

Classification of Agni Karma: During describing the Agni Karma there is no description available regarding its classification, but it can be classified on various basis as below.

1- According to Dravyas used.
2- According to the Site.
3- According to the Disease.
4- According to Akriti.
5- According to Dhatu to be cauterised.

According to Dravya used – Snigdh Agnikarma - performed by means of madhu, grith, tailam used for Agnikarma to treat diseases situated in Sira, Snayu, Sandhi, Asthi- Ruksa Agnikarma - performed by means of pippali, shara, shalaka, godanta used for Agnikarma to treat diseases situated in Twak and Mamsa dhatu.

According to the Site used- Sthanika (Local-) As in Vicharchika, Arsha etc. Sthanantariya (Distal to the site of disease)-as in Visuchikta, Apachi etc.

According to the Disease- There are so many types of Agni Karma e.g. In the disease like Arsha, Kandara etc. it should be done after surgical excision. In Sinus, fistula in ano etc. it should be done after incision. In Krimidanta it should be done after filing the cavity by Jaggery, Madhuchhista etc.

According to Akriti- Regarding Akriti, Acharya Sushruta have mentioned four types of Agni Karma. Valaya, Bindu, Vilekha, Pratisarana. Acharya Vagbhata has added more three types of Agni karma - Ardha Chandra, Asapada, Swastika. Here Akriti should be taken as shape of Dahanopakarana and final shape produced after actual Agni Karma both.

Acharya Dalhana have given explanation regarding the shapes of Agni Karma in his commentary.

According to Dhatu- According to Acharya Sushruta and Vagbhata the Agni Karma should be done as per involvement of the Dhatu such as-

Agnikarma is divided in four types on the basis of part involved e.g. twaka dagdha, mamsa dagdha, sira snayu dagdha and sandhi asthi dagdha.[5] After studying the literature available related to Agnikarma, it is clarified that various pain management therapies which use heating process as their basic principle are based on the principle as described in Ayurvedic literatures. They are modified and advanced techniques suitable in the context of time. In present time there are various treatment modalities are available which work on the principle of Agnikarma for pain relief e.g. therapeutic ultrasound TENS, Interferential therapy, Radiation therapies like Infra-red therapy Diathermy, PEMF, Electro cautery, Cauterization.

Agni Karma in Modern Perspective- After the detailed description of Agni Karma from Ayurvedic viewpoint, a brief description in modern perspective of the same therapy has been presented in following paragraphs.

There are two procedures like Agni Karma are available in modern Science.

1. Electrocautery
2. Diathermy

(1) Electrocautery- Electrocautery is one of the most useful instruments for surgical procedure. It consists essentially of a platinum wire which, can be heated to red hot by means of an electric current.

Application of the red-hot wire to tissues will either cut them or seal any bleeding points by coagulation. It is thus ideal for removing small skin tags and pappilomata etc. and for controlling the bleeding following curetting works, granulomas and similar lesions. The earliest Electrocauterers used a standard battery, and rheostat to control the temperature of the tip. Subsequently
with the change in domestic electricity supplies from D.C. to A.C. It was possible to use step down transformers and rheostats and it avoided flat batteries. Most recently with the introduction of nickel cadmium rechargeable batteries with their ability to with stand high current drain without damage.[8]

A variety of different shaped Platinum tips are produced for different applications, but for general use simply a wire is all that is needed, with careful handling. It will last for many years, does not corrode, and can be immediately sterilised merely switching on the current and heating the tip for a few seconds.

(2) Diathermy-
It is a bi-polar apparatus being used in most of operative procedures. In this a very high frequency current is passed through the patient’s body and generates heat. Three types of diathermy are available.

1-Medicinal diathermy- It is mild degree and does not cause destruction of tissues.

2-Short wave diathermy- It is used as a therapeutic elevation of temperature in the tissue by means of an oscillating electric current of extremely high frequency (10-100 million cycles/seconds) and a short wavelength of 3-30 meters.

3-Surgical diathermy-In this diathermy, a very high frequency current is passed through the patient’s body and generated heat. By making one electrode relatively large and strapping it firmly to one limb and making the other electrode a pointed moveable tip, enough heat is generated at the tip to coagulate or cut tissue. The effect is localised because the current from live electrode spreads out in the patient’s body and travels to the ‘In-different’ electrode which is a large electrode placed in contact with the patient’s body. A high density of current occurs only immediately beneath the live electrode because further away the current density is too small to have any heating effect.

Advantage: - Absence of bleeding; it’s effect is very similar to that of the electrocautery, and the heat generated automatically sterilises the area treated, a sterile dry dressing or no dressing at all is, therefore, all that is needed to promote healing.

Disadvantage-
1-Histological examination of the treated lesion is not usually possible due to the distortion of the cells from the heat, thus a preliminary biopsy needs to be done, where the diagnosis is in doubt.

2-Current is likely to cause ventricular fibrillation and can cause probable death of the patients.

Procedure of Agni Karma:
Regarding the procedure of Agni Karma, there is a detailed description available in Astang Samgraha (A.S. Su. 40/5) i.e., before doing the procedure of Agni Karma, benediction chanting and collection of related materials and instruments should be done, the patient kept in suitable position by keeping head in the East direction and held by expert assistants to avoid movement. After this the surgeon should make the different shapes of Agni Karma viz. Valaya, Ardhchandra, Swastika, etc. as per need by heated Jambvostha or Shalaka in a smoke free fire of Khadira or Badara with the help a blower or a fan. During this period if patients feels discomfort then keep them satisfies by courageous, consolating talks, give cold water for drink and sprinkle cold water. But procedure of Agni Karma should be done till production of complete cauterisation, anoint the Madhu, Ghrita, and followed by cold and lubricating Drayas applications.[2][4]

DISCUSSION

In Ayurveda, treatment by heating of tissue was well known tool as early as the 1500-1000 years BC with the advancement of science techniques of Agnikarma improved by introduction of electricity. The use of electricity in medicine began in the 18th century. Agnikarma alleviates all the Vataja and Kaphaj disorders as Ushma guna of Agnikarma is opposite to Sheeta Guna of Vata and Kapha dosha. According to Ayurveda, every Dhatu (tissue) have its own Dhatvagni and when it becomes low, diseases begins to manifest. In this condition, Agnikarma works by giving external heat there by increasing the Dhatvagni which helps to pacify the aggravated dosha and hence alleviate the disease.[3]

-All the pain management equipments mainly use heat/energy in some or other form as a basic principle.
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For example, therapeutic ultrasound is most traditionally known as a deep heating modality. It yields its effect by increased collagen extensibility, increased clearance of oedema and exudates, increased pain threshold, decreased joint stiffness and decreased muscle spasm. All these are effects of deep heating system. In the same way TENS (Transcutaneous electrical nerve stimulation is the use of electric current produced by a device to stimulate the nerves for therapeutic purposes. The main forms of cauterization used today are electrocautery and chemical cauterity. Electrocautery-Electro surgery has been described as high-frequency electrical current passed through tissue to create a desired clinical effect. Electrocautery is useful in haemostasis and in the treatment of various small benign skin lesions, although only lesions that do not require histological review should be treated with electrocautery. With the use of many new techniques and devices such as Transcutaneous electrical nerve stimulation(TENS), Therapeutic ultrasound, Pulsed electromagnetic Field therapy (PEMF), Interferential Therapy (IFT) Electrical muscle stimulator (EMS) etc. in the pain management and musculo-skeletal disorders have proven to be much beneficial and brought revolution in the field of physiotherapy especially in chronic pain management. Though Agnikarma therapy been described thousands of years ago yet its principle is being used nowadays in many forms. These ne modern techniques/ equipments described above are need of today’s generation. Older agnikarma therapy as described in classics are performed using limited dahaamukparana, as it is not possible to use all of them in present era. With these limitations modern techniques are well accepted in the society as they are easy to handle, and modernized machines are used.

CONCLUSION

Agnikarma and its uses are described in Ayurveda much earlier than its utility was discovered by surgeons of rest medicine branches. However, the technique and equipments have become advanced and sophisticated, but the basic principles are still the same as that of Agnikarma i.e. use of energy- heat or current in the management of various diseases.

REFERENCES


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