A REVIEW ON THE CONCEPT OF AGNIKARMA

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ABSTRACT

Acharya Sushruta who is worshipped as the 'Father of surgery' has described various modalities relating to both Surgical and parasurgical procedures. Agnikarma or thermal cauterization is one among the Anushastras (substitute of surgical instrument) or para-surgical technique mentioned in Ayurveda. It has widely been practiced in the various clinical settings depending on the training and exposures of the physician. With renewed interest in the parasurgical procedures in the recent times Agnikarma has gained foremost appraisal to attempt treatment to diseases of various categories. Agnikarma though is a parasurgical procedure yet is indicated as a therapy of choice in many diseases. it is indicated in the disease caused by Vata and Kapha related morbidities because of its Tikshna (quick action), Ushna (Hotness), Sookshma (subtle), Vyavayi (Quick spreading), Vikashi (works without being metabolised) proporties to remove Srotorodha (obstruction in channels of body) Moreover, the scope of this therapy is further extended to diseases that are found to be refractory to conventional Sheeta-Ushana-Snigdha-Rooksha kind of treatment. The final attribute of Agnikarma can be considered on its tremendous prophylactic potential to do away certain diseases and also has developed as a precursor to ‘cauterization’ of modern era.

Keywords: Agni Karma, Acharya Sushruta, Dagdha, Cauterization, Para surgical procedure.

INTRODUCTION

In the present day of practice there are set of disorders which do not respond to medical treatment. If at all they respond, palliative relief is found and after sometime chance of recurrence does exist. In surgery, a set of minor surgical procedures like Agnikarma (Thermal cauterization), Raktamokshana (Bloodletting) is prescribed in addition or substitute for major surgical procedures.

As Ayurveda has always emphasized the necessity for the elimination of doshas over the conventional treatment to treat numerous diseases, Aacharya Sushruta has also mentioned prevention of recurrence of various disorders by advocating the parasurgical procedures like Agnikarma which has emerged as an integral part of the Ayurvedic therapeutics.

Acharya Sushruta has mentioned different methods of management of diseases such as Breshaja karma, Shastra karma, Kshara karma and Agnikarma. While he mentioned Yantra and its classification Agni was considered as an Upyantra.1

The word Agnikarma is made up of two words i.e.,
Agni and Karma. Agni, the masculine word derived from the root “Agigatau agyati agnayamna prapyanti”. i.e. it gives the rebirth, is utilized to cure and prevent the diseases.

Agnikarma means procedure done with fire. References about Agnikarma are available in almost all Ayurvedic classics. It’s preventive, curative and haemostatic properties were unveiled even centuries back. These same principles are adopted in advanced technologies like cauterization, diathermy, radiation therapy, laser therapy, statorion device etc. Agni karma means the application of Agni or heat directly or indirectly to the affected part with the help of different materials to save the patient from a disease or complication. It holds a special place in surgery by Sushruta as it is believed that a disease once treated by Agnikarma does not reoccur and does not get infected easily.

Even today, the modern science takes Agnikarma into practice by advocating cauterization in almost every surgical procedure to ensure sterilization and asepsis. The medical practice or technique of cauterization is the burning of part of a body to remove or close off a part of it in a process called Cautery, which destroys some tissue, in an attempt to mitigate damage, remove an undesired growth, or minimize other potential medical harmful possibilities such as infections.

Mere utilization of Agnikarma, which is counted in Amushastra, Upayatra and Shashti upakrama, provides Shalyatantra the unique position among the eight branches of Ayurveda. Agnikarma can be utilized as preventive measure, as curative measure, as postoperative procedure, and as haemostatic measure.

SYNONYMS
- Agni karma
- Agni chikitsa
- Damsha kriya
- Pachana chikitsa
- Dagdha chikitsa
- Dagdha karma
- Vahnidadgha
- Dahana karma
- Dahakarma,

Agnikarma kala
Agnikarma can be done in all seasons except Sharadh (autumn) and Grishma (summer) due to the increase in Pitta, which generated out of the excessive hot climate.

Dalhana opines, in an emergency, even in any season it can be done. But precautions like covering the site with moist clothes, having cold foods and smearing cold pastes over the body has to be adopted, so that the Pitta vitiation can be countered by the cold applications

Dahanopakrana3 - Materials Used for Agnikarma
- Pippali (pipper longum)
- Ajasakrut (goats excreta)
- Godantha (cow’s tooth)
- Shara (arrow)
- Shalaka (metal Rods)
- Kshoudra (honey)
- Guda (jaggery)
- Sneha (oil/fat) etc. The use of these materials has been told according to the site of application.

Dahana of Twaka (skin) in superficial disorders - Pippali, Ajashakrida, Godanta, Shara, Shalaka are used
- Mamsa dagdha or in muscle related disorders - Jambavoshtha and other dhatu are used.
- In Sira (veins), Sanayu (ligaments), Sandhi (joints) and Asthi (bones) - Kshoudra, Guda and Sneha padartha are used.

DAHANA PRADESHA4 - Disease specific sites for Agnikarma (Thermal cauterization)
- Arshas (haemorrhoids) vata and kapha - Site of Arshas
- Antra vrudhi (inguinal hernia) - Inguinal region
- Nadi Antra vrudhi (inguinal hernia) - Inguinal region
- Dushta vrana (chronic non-healing ulcers) - Agnikarma can be done by filling the wound
- Shiroroga(head diseases) Adhimantha (glaucoma) Anga shaidhilya - Bhru, lalaata,shankha (eyebrow, forehead or temple)
**Types**

- Based on the Akriti (shapes)
  1. Valaya (encircling the root of the diseased portion)
  2. Bindu (dots made with the tip of salaka)
  3. Vilekha (straight curved or horizontal lines drawn with salaka)
  4. Pratisarana (rubbing with the side of salaka)

- Acharya Vagbhata in Ashtanga sangraha, mentions that it can also be of:
  1. Ardhchandra (semilunar)
  2. Swastika (swastik sign shaped)
  3. Ashtapada (directed in eight directions).

**Sthanika** - It can be done at the site of disease e.g.; Kadara

**Sthanantariya** - at a different site e.g.; Gridhrasi

- Due precautions should also be taken when the burn extends beyond skin, hence it is classified clinically on the basis of involvement of tissue as

  1. Twak dagdha (Skin burn)
  2. Mamsa dagdha (muscle burn)
  3. Sira-snayu dagdha (burn of tendon and vessels)

- On the basis of Dahanopkarana:
  1. Snigdha: performed with Madhu, Ghrita, Taila on Sira, Sanayu, Asthi and Sandhi.
  2. Rooksha: performed with Godanta, Shara, Shalaka, Ajashakrida, Pippali on Twaka and mamsa

**Indications**

- Disorders involving Twaka, Mamsa, Sira, Sanayu, Asthi and Sandhi
- Due to Vata causing severe pain in the areas especially in utchhrita, kathin and supa mamsa (where muscles are functioning adequately).
- Diseases like Granthi, Arsha, Bhagandara, Arbuda, Apachi, Shlipada, Charamkila, Tilkalaka, Antra vridhi, Nadi vrana etc
- In emergency conditions where Sira (veins) are cut, discharging sinuses and acute or chronic hemorrhage (rakta strava) 8
- It can be carried out in all kinds of pain like Gridhrasi (Sciatica) due to Vata, after excision of cysts, mass, warts, tumor, fistula, and also Shiroroga.9

**Contraindications**

- Nishedha Kala (unfavorable time) - refers to the period or environmental condition during which Agnikarma cannot be performed on any patient except in a case of an emergency. Aacharayas have referred to Sharad ritu and Grishma ritu unfavorable for carrying out the procedure.10
- Rogi Nishedha (unfavorable patient) - refers to the patients who stand rejected for the procedure due to their vulnerability of the increase in the intensity of disorder based on their prakriti or body constitution like
  - Pitta prakriti people
  - Raktapitta
  - Atisari (diarrhoea)
  - Durbala (weak)
  - Bala (child)
  - Bhiru (one who is afraid to get the procedure done)
  - Vrani (one who is inflicted with many wounds).11
  - Person who are unfit for Swedana therapy.
- Medical Contraindication includes:
  - Sensitive skin,
  - Acute trauma,
  - Venous obstruction
  - Arterial insufficiency.

**PROCEDURE**

After careful analysis of the disorder and patient Agnikarma is carried out till the symptoms indicating favorable and desired Dagdha appears.

1. **Poorva karma (pre-operative)**
   - Patient should be cheked for he is fit for
procedure
• Necessary equipments have to be kept ready
• it has been mentioned that pichilla anna (lubricated food) be given to the patient prior to Agnikarma procedure since it is jivaniya, balya, sandhana and guru. 12 (This means that such a food provides adequate strength to the patient to undergo the procedure)
• The conditions where Agnikarma has to be carried out empty stomach are Arsha, Ashmari, Bhagandara, Mukha-roga, Mudh-garbha and Udar-roga.13

2. Pradhana karma (operative)
The extent of the disorder at the site should be grossly evaluated and Agnikarma to be performed depending on the tissue that has to be cauterised, Upakarana has to be selected and according to the strength of the patient and the site at which it is being performed, the climatic condition and the necessity14. then the Upakarana (material) is heated to red hot and placed over the site for a specific period of time.

3. Paschat karma (post-operative)
The Dagdha pradesha has to be protected from moisture and is smeared with Ghrita and Madhu15 to reduce the burning sensation and promote healing.

Samyak dagdha lakshanas-Assessment of Agnikarma
Assessed according to the site where Dagdha karma was performed.16 It includes:
Twaka dagdha lakshana:
• Shabda pradurbhava - Skin crackle like sound originate
• Twaka sankocha - Retraction of skin
• Dourgandhya - Foul odor at the site.
Mamsa dagdha lakshana:
• Kapot varnta - Pigeon like color
• Alpa shavyathu - Less inflammation
• Alpa vedna - Less pain
• Shushka - Dry
• Sankuchita - Wrinkled mamsa.
Sira sanayu dagdha lakshana:

   • Krishna unnat - Ulcer is black and elevated
   • Srava sannirodha - Discharging sites are arrested.

Sandhi asthi dagdha lakshana:
• Rooksha- dry
• Arunta- slight red
• Karkasha-rough
• Sthira vranta-stable wound.

DISCUSSION
Pain is an entity caused mainly due to abnormal Vata Dosha. Agnikarma acts directly on Vata Kapha Dosha mitigating the causative factor of pain. Thus, pain is reduced significantly with lowest recurrence rates. Agnikarma is performed by a special pointed metallic instrument known as Shalaka. This is heated and applied on the most tender points marked with a marker. As per research on Agnikarma, there is a transfer of heat energy (Proton-neutron-electron theory).

Probable mode of action of Agnikarma
Agni possesses Ushna, Tikshna, Sukshma and Aashu kari Gunas. Physical heat from red hot Shalaka is transferred as therapeutic heat to Twakdhatu by producing Samyak Dagdha Vrana. From Twakdhatu following are the different postulates on this therapeutic heat which may act in subsiding the diseases.
• First, due to Ushna, Tikshna, Sukshma, Ashukari Guna it may removes the Srotavarodha, pacifies the vitiated Vata and Kapha Dosha and maintains their equilibrium.
• Secondly, the heat may increases the Rasa Rakta Samvahana (blood circulation) to affected site. The excess blood circulation to the affected part flushes away the pain producing substances and patient gets relief from symptoms.
• Third, therapeutic heat may increase the Dhatwagni, so metabolism of Dhatu becomes proper and digests the Amadosha from the affected site and promotes proper nutrition from Purva Dhatu.
Further it can be endorsed that the therapeutic heat goes to the deeper tissue like *Mamsa Dhatu* and neutralizes the *Sheeta Guna* of *Vata* and *Kapha Dosha* and in this way vitiated *Doshas* come to the phase of equilibrium and patients may get relief from the symptoms.

**Probable mode of action of thermal heat**

It has been found that mild degree of heating (180 °C) is effective in relieving pain, possibly as a result of the sedative effect on the sensory nerves. However, strong superficial heating (350 °C) procedure has been observed to have potential to relieve pain due to counter irritation effect. Our hypothesis here is that the released heat could have caused irritation on the superficial sensory nerve endings thereby relieving pain from the concept of ‘counter irritation’. It has been suggested that pain may be possibly caused as a result of the accumulation of metabolic waste products in the tissues, and an increased flow of blood in the region is the possible mechanism that is responsible to remove these substances and relieve pain. Another possibility is that the pain releasing mechanism is associated with muscle relaxation. Pain due to acute inflammation or recent injury is relieved most efficiently by mild heat. In this paper an insightful review on *Agnikarma* has been compiled and presented systematically.

**CONCLUSION**

*Agnikarma* is a potent and minimally invasive parasurgical procedure which has wide application in chronic conditions as well as in emergency management. It has been explained as one among the *Anushastras*. Almost all, Ayurvedic classics have described the use of *Agnikarma* for curing different disorders as *Pradhanakarma* and in some disorders as *Paschathkarma* to cure the complications. Its importance lies in its action, because of its ability to cure those diseases which can’t be cured by the *Bheshaja, Shastra* and *Ksharakarma*. Agnikarma acts directly on *Vata Kapha Dosha* mitigating the causative factor of pain. It has been suggested that pain may be possibly caused as a result of the accumulation of metabolic waste products in the tissues, and an increased flow of blood in the region is the possible mechanism that is responsible to remove these substances and relieve pain. Another possibility is that the pain releasing mechanism is associated with muscle relaxation. Pain due to acute inflammation or recent injury is relieved most efficiently by mild heat. In this paper an insightful review on *Agnikarma* has been compiled and presented systematically.

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