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, pradhankarma, 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 doṣha). 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 ardhā 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, virechaana, 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 Shabdālpadrama, 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 doṣhas 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 doṣhas are in aggravated (utkliśtha) 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 sadhyovamana in jwara chikitsa. Jwara (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 Jwara chikitsa, it is mentioned that in the case of aamjwara, jwara caused due to ama (toxins), soon after the ingestion of food causes amajwara. Sadyovamana can be given in such a situation. In the case of aamajwara, vamana should be given with lawanambu(2) (saltwater). In Pittaj jwara patients with excessive thirst should be given plenty of water and honey for vamana(3).

In Shwas samprapti, strotas involved is pranvaha stotases. 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 urdhwasthaktha, through kapha, and vata is responsible for initiating the disease. In the same commentary it is said that pittasthana can be taken as aamashaya. As there is involvement of the utklisha kapha and the disease is aamashaya samudbhava, sadyovaman can be given(5). Vaman brings strostoshuddhi and kaphavarodha will be removed(6). Madatyaya is caused due to excessive consumption of madya. Due to teeksha, ushna and ruksha property of madya, utklesha of the kapha-pitta occurs. In Madatyaya patient should take ikshu rasas and madya till his throat (akanka panam) 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 snehapanas or swedanas. Hence here we can probably say that the sadyo vamana is mentioned. Acharya Charaka has mentioned vamana in the sthavara visha chikitsa (8). In Gara visha chikitsa, Chakrapani advised giving vamana immediately(9). There is no other treatment better than vamana in case of sthavara visha chikitsa. In Chhardi vyadhi, nidanasevana leads to prakopa of vata. Vata gets located in udara which produces utkleshana of undigested particle. Expels these through the koshtah and agnibala is reduced(10). In Chhardi, agni is in mandavashas, it may not be able to digest the medicine also. Vamana may bring up the utklisha 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 Vangasen has mentioned vamana should be induced very quickly. He suggested sadyo vamana in kotha by patolanimbavasa kwatha(12). In Alasaka disease utklisha dosha is present. Hence there is no need to produce the utklisha 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 ashukaryitya virudhopakrama cha). In samadosa conditions, made to vomit with lukewarm water with salt followed by sweda(13). Visuchika is a condition that occurs in ajeerna which is characterized by pain which is similar to pricking pain(14). In Vangasen Ajeerna chikitsa, it is described that vamana should be done with lukewarm salt water(15). While performing virechana even after attaining the suddhi 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 oedema 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 vamanoaushadha(20)

Materials and Methods

The concept of sadyo vamana is studied through classical text of Ayurveda Charak Samhita, Sushrut Samhita, Ashtanga hridaya, Madhava Nidan, Sharangdhar Samhita, Vangasen 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, utklishha dosha, atyayika avastha (emergency condition) and vamya rogi(21). To perform sadyo vamana, kapha and pitta dosha must be in utklishha stage. Acharya Chakrapani has mentioned utklishha avastha means dosha are detached and ready to come out from amasaya(22). Acharya Sushruta has mentioned that when irritated food associated with salvation, 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 utklishha stage so consideration of time does not matter many more.
The necessity of purvakarma in sadyovamana is to mobilize the doshas from the discrete parts of the body to koshtha, for easier vanama 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 sadyovamana is to be administered for instant management, it is not mandatory to do abhyanga (massage) and swedana (sudation). Purvakarma procedure of sadyovamana may vary from disease to disease. E.g. in the case of visha, ajirna, etc emergency conditions directly vanama dravya is given to remove the visha and undigested food without abhyanga and swedana. But in acute attack of shwasan, 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 sadyovamana. Vanama should not be administered to patients with an empty stomach.

**Pradhana Karma**

The procedure of Sadyovamana is as of classical vanama. 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.

| Sr. No. | Compendia   | Disease                        | Sadyovamana dravya                  |
|---------|-------------|--------------------------------|-----------------------------------|
| 1       | Charaka     | Amajvarya                      | Lawanambu                         |
| 2       | Charaka     | Alasak                         | Ushna lawanambu                    |
| 3       | Sushruta    | Pittaj jwara                   | Lawanambu                         |
| 4       | Sushruta    | Madatayya                      | Ikshurasas, Madya                  |
| 5       | Vagbhata    | Jwara                          | Sura, Tittira mansarasa           |
| 6       | Kashyapa    | Amlapitta                      | La w a n a m b u , kshira, ikshurasas |
| 7       | Vangsen     | Visuchika                      | Ushna lawanambu                    |
| 8       | Vangsen     | Visha                          | Madanphala, Sunthi                |
| 9       | Bhaiashjaya | Ajirna                         | Vacha, lawanambu                   |

**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 vanama**

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 liquefy 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 udhwaabhaghara prabhava due to agni and vayu predominance which ultimately leads to migration of doshas towards mouth from amashaya (25).

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

| Sr. No. | Sadyo Vanama | Classical Vanama |
|---------|--------------|------------------|
| 1       | Vamana is conducted immediately in a single day. | Vanama conducted by arohana krama |
| 2       | The doshas are expelled out from localise tissue. | Purva karmas like a ma pachana, snehana, swedana are mandatory. |
| 3       | Not require vishram kala (gap period). | Require vishram kala (gap period) (27). |
| 4       | The person who is not co-operative, don’t have much time and dosha are in utklisha avastha, sadyovama carried out. | Patients should be co-operative, have ample time to take treatment, and bhisak vashya (obedient). |
| 5       | Short-acting effect | Long-lasting effect. |

In sadyovamana 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. Sadyovamana has minimal efficacy and instant relief like as ajeerna.

Sadyovamana is carried out when dosha utklisha lakshna like hrullas, lala praseka, shiro gourava, kapha sthivana, bhakta dwesha etc are present. Purvakarma like ama pachana, snehana, swedana are not mandatory for sadyo vanama. Otherwise the dosha utklisha avastha is reduced. Sadyo vanama 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 diseased conditions. It gives instant relief in *utklishtha doshavastha*. It is a cost-effective, less time consuming, and easy to carry out.

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