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**Published paper's title : Evidence
based Principles for Promotion of
Panchakarma in General Practice- A
systematic review**

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Review Paper

Evidence based Principles for Promotion of Panchakarma in General Practice- A systematic review

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Declaration

The Declaration of the author for publication of Research Paper in Asian Journal of Modern and Ayurvedic Medical Science (ISSN 2279-0772) I Dr Ramnihor Tapsi Jaiswal the author of the research paper entitled Evidence based Principles for Promotion of Panchakarma in General Practice- A systematic review declare that , I take the responsibility of the content and material of my paper as I myself have written it and also have read the manuscript of my paper carefully. Also, I hereby give my consent to publish our paper in ajmams , This research paper is my original work and no part of it or it's similar version is published or has been sent for publication anywhere else.I authorise the Editorial Board of the Journal to modify and edit the manuscript. I also give my consent to the publisher of ajmams to own the copyright of my research paper.

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ABSTRACT: Promotion of Panchakarma is overall more important, so the literacy about Panchakarma in common people will increase and people will live healthy and quality of life and will not suffer major illness. Even the treatment of frustrating diseases like Asthma , Arthritis, Skin diseases, Infertility, Abdominal disorders etc is possible with the contemporary techniques and knowledge of the Panchakarma. The result of Panchakarma are variable according to the physician`s skill and procedure adopted, management of complications.

By adopting evidenced based principles we can definitely promote our general practice of Panchakarma. If any modifications required in Panchakarma treatment we can modify according to need and situation because Charak says , *the intelligent physician should not determine treatment according to letter of directions exclusively mentioned as indication and contraindication in second chapter of siddhistan but, must use his own direction , rational thinking and reasoning in arriving at treatment decisions.* In other word we can say intelligent physicians should not blindly copy all the procedures mention in the text but he



should think on practical applicability or applied part, his or her experiences, evidences and logic and then decides treatment and its procedure.

There may arise situations according to place, time and strength in which non-prescribed measures become applicable and the prescribed one is contra-indicated. Hence in spite of instructions given in classical text, one should act by thinking with his own intellect. Success without reasoning is a mere chance.

INTRODUCTION

The Panchakarma-therapy is an integral part of Ayurveda. The Panchakarma-therapy (a long recognized therapeutic procedure of Ayurveda) occupied a very important in the treatment of diseases by Principles, methods and drugs. In earlier days this therapy is a part of Kayachikitsa but now a day it is a separate subject in academic.

Pancha

means five and *karma* means therapy. These five therapies are used for bio purification or detoxification of body so they are collectively known as Panchakarma. Other name for therapy is *Samshodhana*. *Aushadha* (therapy) is, in brief, of two kinds *Shodana* (purification process) and *Shamana* (palliative). *Shodhana* is the method of eliminating the aggravated *dosha* from the body forcibly, thus purifying it. *Shaman*, on the other hand, is to mitigate the aggravated doshas within the body itself.

The five-detoxification/purification measures according to **Charaka**,

Sarangdhara and **Bhavamishra** are

1. *Vamana* (Emetic Therapy)
2. *Virechana* (Purgation Therapy)
3. *Asthapana Basti/Niruha Basti* (Decoction Enema Therapy)
4. *Anuvasana Basti/Sneha Basti* (Oily Enema Therapy)
5. *Nasya* (Errhine Therapy)

On the other hand Sushrut , the first surgeon says *Raktamokshana* (Blood Letting) as Fifth Panchakarma He assumed *Rakta* as Fourth *Dosha*(*Vata*,*Pitta*,and *Kapha* are three basic

Doshas) Hence according to him and Vagbhata Panchakarma are as follows

1. *Vamana*
2. *Virechana*
3. *Basti*
4. *Nasya*
5. *Raktamokshana*

Indication of Panchakarma therapy:

The indication of Panchakarma therapy may be divided in the following three groups

- 1) In healthy individuals, it is to done in *i) as Dincharya ii) Ritu-charya* and *iii) in conditions caused by Vegaavrodha.*
- 2) To obtain maximum result of *Rasayana* and *Vajikarna* therapy.
- 3) According to diseases for their management.

Panchakarma is always performed in three stages:

- I. *Purva Karma* (Preliminary-treatment): This we are going to discuss in evidence based principles as role of *purva karma*. It is very important preliminary treatment which we can modify according need and situations.
- II. *Pradhana Karma* (Actual or main treatment): It is of five types *i) Vamana, ii) Virachana. iii) Basti, iv) Nasya v) Raktamokshana*
- III. *Paschat Karma* (Post - treatment): Procedure which is adopted after the *pradhana karmas* are known as *Paschat karma*. Another name of *paschat karma* is *Samsarjana Krama*.*Samsarjana krama* is indicated in *Vamana* and



Virechana. This we also going to discuss in evidence based principles as role of *Samsarjana krama*.

We can make procedure of Panchakarma simpler in General practice or Private practice by contemporary procedures and treatment with the help of some simple evidence based principles.

Evidence based Principles contains

1. Selection of the patient and Laboratory Investigations
2. Role of *Purvakarma*
3. Skills to win over the patient for Panchakarma
4. Raw material required for the successful Panchakarma Practice.
5. Promotion of Panchakarma
6. Importance of Panchakarma
7. Special precautions while performing the procedures in general practice.
8. Procedures possible in clinic with and without Toilet
9. Power of Team work
10. Panchakarma in unknown etiological diseases.
11. Role of presentations
12. Role of *Samsarjana Krama*

1. SELECTION OF PATIENT:

Proper selection of patient plays major role in the success of Panchakarma. Patients which are having following characteristic should not be taken up for treatment. The physician who treats such cases invites many difficulties upon himself. According to Acharya Charaka these are the general characteristic of exclusive patient; special characteristic are not given here.

1. Fierce tempered, physically violent and frightening
2. Race or careless
3. Cowardly
4. Ungratefulness or fickle

5. One who is a hater of good persons, kings and physicians or he who hated by them
6. One who is afflicted with grief
7. Agnostic or atheist
8. One doomed to death
9. Devoid of means for treatment
10. Treatment angry or enemy
11. Imposter
12. One devoid of faith
13. A confirmed skeptic
14. One who is not following physician advice
15. Non affordable and attendant less
16. Pose themselves to be a physician
17. Lost strength and blood
18. Suffering from incurable diseases

Laboratory

Investigations required for selection of patient for Panchakarma treatment.

1. Hemoglobin,
2. Total Leucocytes Count,
3. Differential Count,
4. Erythrocyte Sedimentation Rate,
5. Fasting Blood Sugar
6. Postprandial glucose test
7. Bleeding Time
8. Clotting Time
9. Serum Cholesterol
10. Platelet Count,
11. Serum Triglycerides
12. X-ray Chest PA View
13. ECG
14. LFT
15. Serum Alkaline phosphate
16. Serum-Albumin, Serum-Globulin, Serum-Bilirubin Direct and Indirect etc.

2. ROLE OF PURVA KARMA: It is emphatically stated in Ayurveda that without previous administration of *snehana karma* and *swedana karma*, *Samsodhana karma* (i.e. *vamana*, *virechana*, *basti*, *nasya*) should not be done. If a man takes *Samsodhana* treatment without administration of *snehana* and *swedana* karmas, his body persists just like a dry stick,



which breaks down when it is bent without proper lubrication and heating.

If the *doshas* are removed from their places by *sneha* and *sweda karmas*, and are propelled by the administration of *snigdha rasa*, they come to the *koshtha* (from *sakhas*) from which, it is easy to extract them out by *shodhana karmas*.

Hence, *snehana* and *swedana karma* have very important role in the Ayurvedic treatment. Treatment given during the *Chhaya to sthan samsraya* state is called as *purva karma*. (Dalhan-Su.Su.5/1)

Purva

karma includes three steps viz, *Pachana, Snehana, Swedana* The first step is used only in the *Ama* state. The other two (used in *Nirama* state) are usually considered as the *Purva karma* of Panchakarma.

Snehana: The process which makes the body *snigdha* is known as *snehana*. Or the process which produces *sneha, vishyandana, mriduta*(softness), *kledana*(smoothness) in the body is known as *snehana*. Caraka has elaborately described it in the chapter 13th of *sutra-sthana* and has specially mentioned the clearance or elimination of *doshas(malas)* which has been accumulated in the body.

Swedana: *Swedana* is a fomentation therapy given to whole or part of body depending on diseases. *Swedana* is said to dilate channels (*Shrotus*) in body to facilitate movements of imbalanced *doshash* towards *koshtha* (abdomen)

3. SKILLS TO WIN OVER THE PATIENT FOR PANCHAKARMA:

We required some special skills to win over the patients. Some skills are as follows;

1. Convincing power
2. Knowledge of 2-3 languages
3. Skills of explanation and skills of answering.

4. Belief in complete work done
Ask patient: Do you want to get treated completely or you want relief for some time?

Please do

1. Complete examination of the patient as per fitness case paper – so you are treating the patient not only the disease
2. Always explain nature of illness and show how you will treat him – this will increase faith in you.
3. Talk in patient`s language (lucid language) at his education level.

4. RAW MATERIAL REQUIRED FOR SUCCESSFUL PANCHAKARMA PRACTICE:

With the help of following we can develop our general practice gradually

- a) Knowledge i.e. technique of Panchakarma (practical experience) and correct line of treatments (theoretical knowledge), this will treat patient completely.
- b) Keep the knowledge updated and work with the time (time management) and according to people`s mentality (trend)

5. PROMOTION OF THE PANCHAKARMA BY ADOPTING EVIDENCE BASED METHODS :

1. Arrange seasonal camps
2. Get references from classical text
3. Give lectures in common people.
4. Attend nearest charitable trust polyclinic or hospital – we will get quality of patient.
5. Write articles in news papers and magazines (write concept not medicine)

6. IMPORTANCE OF

PANCHAKARMA: With the help of following benefits, we are selecting Panchakarma as main (prime) treatment in Ayurveda.



1. Metabolism becomes optimized or appetite increases.
2. Disorders disappears
3. Normal health returns
4. Sense organs, mind, intellect, understanding, and complexion becomes clear.
5. Strength, plumpness (nourishment), healthy off springs, potency.
6. Hardly gets aged and lives long
7. Life free from disease.

Two main objective of this therapy are

1. In healthy person example of servicing the vehicle and
 2. In patient curing the disease
- Acharya Charak has described first *Shodhana* and then *Shamana*.

7. SPECIAL PRECAUTIONS WHILE PERFORMING PANCHAKARMA:

We should take some special precautions to improve our practice.

1. Think of the practical dose of the patient –According to *Agni, Rugnabal, Vyadhibal, koshtabal, Aushadhibal*.
2. Simplify the procedure and the *Samsarjana krama*.
3. Put cotton in ears after *Swedana, Nasya, Vamana, Virechana* to avoid *Vata-Prokop* (as ear is the nearest sense organ from brain)
4. Always check dehydration in *Vamana* and *Virechana* . Give two glasses of

liquid (coconut water, *mosambi* juices, plain water, Electral powder etc) after each motion while *virechana*.

8. PROCEDURES POSSIBLE IN CLINIC: If toilet is there in clinic, we can perform all the Panchakarma procedures and if there is no facility of toilets then we can perform following procedures

- i) *Snehana*
- ii) *Swedana (sarwanga, nadi, pind)*
- iii) *Anuvashana Basti, Raktamokshana*
- iv) *Shirodhara, ShiroBasti, Nasya, Uttarbasti, Netrabasti, Katibasti*

09. POWER OF TEAMWORK: As we all knew together everybody achieves more. Teamwork is required for exchange and uniformity of knowledge. Team leader or physician must have Planning, Organizing, Controlling, Leading and Staffing skills for better work environment.

Main aim and objectives of team work is to do the feasibility of given work. For this purpose can use, SWOT – a management tool evaluating Strengths, Weakness, Opportunities and Threats analysis regarding feasibility of Panchakarma.

SWOT ANALYSIS: SWOT analysis with its four elements in a 2x2 matrix. Table No. 1

Origin	Helpful	Harmful
Internal origin	STRENGTH	WEAKNESS
External origin	OPPORTUNITIES	THREATS

Setting the objective should be done after the SWOT analysis has been performed. This would allow

achievable goals or objectives to be set for the Panchakarma team.

Strengths: Characteristics of updated knowledge and



contemporary technique of Panchakarma that give it an advantage over others

Weaknesses: are characteristics that place the team at a disadvantage relative to others.

Opportunities: external chances to improve performance of Panchakarma in the common environment e.g. arrange seasonal camps of Panchakarma, give lecturer to common peoples, show slide presentation of patients treated by you.

Threats: external elements in the environment that could cause trouble for the Panchakarma practice. Example complication and side effects of drugs used in the management of disorders

So finally team can apply SWOT analysis for improvement and development of Panchakarma with innovative ideas. Team work is essential for all procedure of Panchakarma.

10. PANCHAKARMA IN UNKNOWN ETIOLOGICAL DISEASES:

Panchakarma is even possible in unknown etiological diseases like psoriasis. As we all know psoriasis is auto immune disease but still there is some temporarily relief from *Vamana* therapy. In this way at least patient

Following table explained about preparation of *Kalpana*

Table No.2

S.No.	Name of the Kalpana	Parts of Ingredients	Reduce by heating
1	<i>Peya</i>	<i>Dravya</i> (rice): 1 part <i>Jala</i> : 14 parts	Liquid
2	<i>Vilepi</i>	<i>Dravya</i> (rice): 1 part <i>Jala</i> :4 parts	Semi-liquid
3	<i>Yusha</i>	<i>Dravya</i> (pulses): 1 part <i>Jala</i> : 10 parts	Liquid

will be free from toxicity and feel healthy.

11. ROLE OF PRESENTATION:

Present slide show of successfully treated patients by you to common peoples in simple manner and in lucid language. This will increase awareness and curiosity in common people regarding Panchakarma therapy.

12. ROLE OF SAMSAJRANA KRAMA

Samsarjana Krama is post eliminative procedure used to restore normal appetite. After inducing *Vamana* , the patient may not be allowed to normal diet. Because due to *Sanshodhana* the digestion power becomes very weak and if during this stage normal diet is taken, it cannot be digested properly. Therefore, the patient should be given *peyadi* first and then gradually brought to normal diet and this dietary regimen is known as *Samsarjana Krama*. The detailed dietary regimen of *Samsarjana krama* is in the table 3. This is standard table for administration of *Anna* which can be given according to *Shuddhi* of Panchakarma.

This Regimen includes

1. *Peya*
2. *Vilepi*
3. *Yusha*
4. *Mansa rasa*
- 5.



Krita Yusha: Ghrita bharjana with Lavana, Sunthi, Jeeraka etc **Akrita Yusha:** when it taken as such without adding anything, then it is termed as *Akrita Yusha*.

Mansa Rasa (Meat Soup): The clean meat cut into small pieces is taken and meat juice is prepared by adding water and then by cooking it

properly. **Akrita Mansa Rasa:** When it is taken as such without adding anything, then it is termed as *Akrita Mansa Rasa*. **Krita Mansa Rasa:** When added with salt and condiment as well as fried with ghee then it is termed as *Krita Mansa Rasa*.

Table of *Samsarjana Krama* (Table no. 3)

Days	Time of Anna(food)	Pradhana Shuddhi	Madhyam Shuddhi	Hina Shuddhi
1	Morning	-	-	-
	Evening	<i>Peya</i>	<i>Peya</i>	<i>Peya</i>
2	Morning	<i>Peya</i>	<i>Peya</i>	<i>Vilepi</i>
	Evening	<i>Peya</i>	<i>Vilepi</i>	<i>Kritaakrita Yusha</i>
3	Morning	<i>Vilepi</i>	<i>Vilepi</i>	<i>Kritaakrita Mansa Rasa</i>
	Evening	<i>Vilepi</i>	<i>Akrita Yusha</i>	Normal Diet
4	Morning	<i>Vilepi</i>	<i>Krita Yusha</i>	Normal Diet
	Evening	<i>Akrita Yusha</i>	<i>Akrita Mansa Rasa</i>	Normal Diet
5	Morning	<i>Krita Yusha</i>	<i>Krita Mansa Rasa</i>	Normal Diet
	Evening	<i>Krita Yusha</i>	Normal Diet	Normal Diet
6	Morning	<i>Akrita Mansa Rasa</i>	Normal Diet	Normal Diet
	Evening	<i>Krita Mansa Rasa</i>	Normal Diet	Normal Diet
7	Morning	<i>Krita Mansa Rasa</i>	Normal Diet	Normal Diet
	Evening	Normal Diet	Normal Diet	Normal Diet

CONCLUSION:

The result of Panchakarma are variable according to the physician's skill and procedure adopted, management of complications. By adopting above principles we can definitely promote our general practice of Panchakarma. If any modifications required in Panchakarma treatment we can

modify according to need and situation because Charak says , *the intelligent physician should not determine treatment according to letter of directions exclusively mentioned as indication and contraindication in second chapter of siddhistan but, must use his own direction , rational thinking and reasoning in arriving at treatment decisions*. In other world we can say

intelligent physicians should not blindly copy all the procedures mention in the text but he should think on practical applicability or applied part, his or her experiences, evidences and logic and then decides treatment.

There may arise situations in view of nature of the place, time and the vitality of a particular patient, when what is contra indicated in a patient, may be necessary for him and what is indicated may have to be avoided.

Hence, despite the directions laid down, therapeutic measures should be decided upon by the physician, with the use of his own direction and thinking. So we can modify the treatment with help of evidence based Principles to make our general practice successful.

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