



Ayurvedic Approach in Emergency Care: A Review

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Abstract

Emergency is a condition requiring immediate treatment where the patient with this is either conscious or unconscious. Medical emergency is an injury or illness that is acute and poses an immediate risk to persons life or long term health. These emergencies may require assistance from another person who should ideally be suitably qualified to do so; although some emergencies can be dealt with by the victim themselves. It is believed that emergency treatment in ayurveda is not present and in emergency one need to take only allopathic medicines, and ayurveda has limited role to play in chronic ailments only. It is not true to say that ayurvedic texts are not having description of emergency management. Ancient Acharyas have used various terms like sadhya[1] Ashu[2] Twarita [3] in emergency condition where quick management is needed. It is the right place to mention the reference of sushruta samhita in which acharya has prescribed to use specific methods in emergency condition.

Keywords: Ayurveda, emergency, medicine, sadhya, ashu, twarita.

Introduction

Ayurveda has been criticised for no availability of emergency management; which is mere a belief. They may be aroused whether there was no emergency in ancient times and people were suffering only from chronic ailments? The answer to this question is no and people were managed in life threatening conditions too.

Ayurveda is oldest holistic system of medical science developed 1000 years ago in India. The treatment approaches of ayurveda for particular disease follow specific protocol depending upon severity of disease and prakruti of diseased person. However the primarily approach of ayurvedic systems resides around to manage balances of three doshas vata, pitta, and kapha for

management of any disease. some texts of ayurveda discussed about emergency conditions. The literature of daruna and ashukari diseases need to be elaborated with respect of current scenario. Nidan; dosha and dushyas if vitiates very strongly; rapidly and altogether then these diseases may have strong manifestations and called acute diseases or emergency. Charaka describe that upadrava which is more troublesome conditions and occur when a diseased person affected by another disease, emergency conditions arises due to lack of resistance power. "TWARAYA JAYET" mentioned in ayurveda as approach of prompt treatment for management of medical emergencies such as hyperthermia; intense fever; acute diarrhea; severe migraine;

trauma; gynecological emergencies; burns; poisoning; cardiac arrest etc; Ayurveda suggest few routes of drug administration that bypass the digestion and act in emergency-eg: vasti, nasya, lepa, etc. All the Rasa-Aushadha used in sub-lingual route are meant for emergency medical practice.

Medical Emergencies

Here, list of the diseases, which require prompt and careful treatment, is given below with the name in ayurveda, the reference from where the description is taken and its nearest modern interpretation. There are certain embarrassing symptoms in fever. They may occur as symptom or as complication with or without fever. They have been classified as a special type of 'Sannipat Jwara'. It may be clearly understood that Bhava Mishra has narrated 3 sets of 13 types of 'Sannipat Jwara'. These types of sannipat jwara require special treatment, though they may be symptoms according to the modern science or ayurveda.

These conditions are:^[13]

(1) Tandrika sannipat jwara Bhava	Typhoid state.
(2) Pralepaka sannipat jwara Bhava	Febrile delirium.
(3) Akshapaka sannipat jwara Bhava	Febrile convulsions.
(4) Teevra sannipat jwara Bhava	Hyperpyrexia.
(5) Swasa-santamaka or pratamaka	Dyspnea with fever.
(6) Shoola	Painful condition.
(7) Anidra	Sleeplessness.S

Management

- 1) In hyperpyrexia cold sponging along with mrutyunjaya ras made the fever to control very fast. Along with soap water enema.
- 2) The following Quath was given repeatedly every 3 hrs.

- (1) Tagara (2) Musta (3) Katuki (4) Dashamool

Atisara and Pravahika :

(1) Teevra Atisara		Severe diarrhea
(2) Pakta Atisara	cha.chi-18	Bleeding per rectum
(3) Apkshaya		Dehydration
(4) Mootraphat	cha.chi-18	Retention of urine
(5) Vishoochika	cha.vi-2	Gastric-enteritis

Management

Atisara is not such emergency unless the person goes in dehydration. Along with the measures of controlling diarrhea, treatment for dehydration should be started.

1. In dehydration immediately treatment is started. Karpoora Rasa- 1 Pill 3 times a day
2. Lemon juice+ honey+ water just like syrup was given for drinking. At a time not more than 1/4 glass i.e. about one to one and half water should be taken. Shanka bhasma 250 mg to be taken 3 to 4 times with lemon syrup.^[13]

Swasa Or Breathlessness

(1) Tamaka swasa	cha.chi.1	Bronchial asthma
(2) Pratata kasa	cha.chi.19	Asthmatic Bronchitis
(3) Hrid-Shwasa		Cardiac asthma

Management

1. Status asthmaticus is bad situation for patient & Doctor. Swasakasachintamani+ malla sindhura with tamala patra swarasa makes instantaneous relief.
2. 25 ml of Dashamoola taila or Dhanwantara taila Salwana sukshosha matra vasti makes the patient to get relief immediately.

Chardi or Vomiting

(1) Chardi	cha.chi.20	Vomiting
(2) Rakta chardi	cha.chi.2	Hemetemesis

Management

1. All types of chardi(vomiting) occur due to amashaya utklesha (irritability and provocation in the stomach). The initial line of treatment obviously lies in allowing the stomach to settle down. Relaxation to

stomach should be given in the form of Langhana(Fasting).

2. After vamana and virechana; Ghrita pana(oral intake of medicated ghee)-ghrita mixed with saindhava lavana(Rock salt) would help if the heart has become weak after vomiting.

3. Medications which are fruitful in chardi:

- * Sarpiguda.
- * Kalyana ghrita.
- * Tryushana ghrita
- * Jeevaneeya ghrita.
- * Mamsa rasa.

Hrid Roga (Diseases of heart)

- | | | |
|------------------------|------------|------------------------------|
| (1) Hrid upaghata | ch.indriya | Myocardial infarction |
| (2) Hrid Bheda | ch.indriya | Heart failure or Heart block |
| (3) Raktachapa vriddhi | | Hypertension |

Concept of cardiogenic emergency is dealt by charaka in Indria 6; chikitsa 26 & siddhi 9, that patient certainly dies due to hridshoola it is usually presented with symptoms of compression type of chest pain; gastric motility is grossly disturbed due to circulatory disturbances; decrease in physical strength(Bala decreases) & excessive thirst (Trishna). This description of Hridshoola is very much similar to massive cardiac arrest.

Management

1. In Hrid upaghata Hridaya drug is the drug of choice, more over drugs that are increasing ojas, srotas cleaners & rejuvenators are of choice.^[10]

- * Hingu churna + lavana+ gokshura panchamula.
- * Hingu churna + Bilvadi panchamula. are drug of choice.
- * Virechana & raktamokshana are methods of cleansing.This is to be utilised after emergency.

2. According to ayurveda, high blood pressure involves all the doshas, the heart and the blood vessels. Derrangement of 'Vyana Vayu' is seen along with pitta. Treatment is based on bringing these imbalances back to normal. In the treatment of hypertension; nutrition, exercise, pranayama, yoga, meditation,

along with various herbs and minerals are prescribed.

Vata-Vyadhi (Diseases of nervous system)

- | | | |
|-------------------------|-----------|--------------------|
| (1) Pakshaghata | ch.chi.28 | Paralysis |
| (2) Shoola | | painfull condition |
| (3) Akshepa & Apatanata | | Convulsions |

Management

- 1) Tackling pakshaghata as emergency 1tab Brihatvata chintamani along with Ekangaveer Ras for every 4th hourly for 24 hours and regulated the dose to 6th hourly on second day and 3rd continue same medicine twice daily; continue same medicine daily once for 21 days.
- 2) Patient manifested with in the initial stage, treatment followed was teeksna nasya karma, as mentioned by Acharya susruta and astanga sangraha for the purpose of reversing mada, murcha or sanyasa which is the pittaavrta vata stage of disease. Mrudu virecana karma, Swedana, abhyanga and basti were done for treating kaphaja and vataja stage of the disease and restore dosha balance.

Nasya 8 drops in each nostril, Virechana Gandharva Hasta Eranda taila 1030ml + 30ml Dugda, Agni alepa, basti anuvasana 80 ml Brihat saindhava taila, Niruha 500 ml mahamanjistadi kashaya.^[11] After course of treatment which lasted 15 days there was considerable reversal of symptoms.

Udara Roga

- | | | |
|-------------------------|-----------|---------------------|
| (1) Teevra udara shoola | ch.chi.13 | Acute Abdomen |
| (2) Adhmana | | Flatulance |
| (3) Ashmari | | Renal colic |
| (4) Antar Lohita | | Internal hemorrhage |

Management

1. In udara shoola patient should take takra with pippali, maricha, sunthi, yavakshara, saindhavalavana. Probiotics and prebiotics combined maintain growth of bacteria in the colon. Buttermilk has probiotic qualities that help to regulate the functions of gastrointestinal system. We are having

ayurvedic formulation Takrarista as a probiotic & prebiotic cocept to treat udara roga.

2. In Ashmari for diuresis-trunapanchamoola, gokshura etc drugs in the form of yavagu is given 2-3 times a day. Kshara karma advised by sushruta.

These are the medical emergencies, which physician comes across in daily practise. Some of the conditions can be treated by ayurvedic treatment.

Surgical Emergencies

There are certain emergencies, which require surgical treatment. But it becomes the duty of physician to start preliminary treatment and relieve the symptoms upto the time the patient is in the hands of an okpert.

- | | |
|-----------------|---------------------------|
| (1) Sadhyovrana | Ulcers and wounds |
| (2) Bhagna | Fractures and dislocation |
| (3) Viserpa | Cellunis & crysepelas |

Management

1. Sadhyovrana treated with application of kampillakadi taila followed by Patolyadi kwath prakshalan and dressed with sterile dressing materials for 7 days.^[12]
2. Asthi Bhagna is considered as vrana according to charaka.

In the condition Asthi Bhagna (fracture) or Asthi Chyuta (dislocation), the bones should be placed in the original anatomical position properly (Reduction of the fracture). With the cotton pads (kavalikaa) and Kushikaa, using abundant ghee (Ghrita); the bones should be placed properly and stabilized so that the reduced bone ends do not undergo displacement and result in non or malunion. Followed by Lepana, Bandhana, Parisechana, Pradeha. Kalpa used are Gandha taila, Trapusaadi yamaka etc.

Gynecological Emergencies

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|---------------------------------|-----------|------------------------|
| (1) Abrijdara | ch.chi.30 | Menorrhagia |
| (2) Gharbhashrava & Gharbhapata | ch.sha.8 | Abortion & miscarraige |
| (3) Moodha-Garbha | sus.ni | Difficult labour |

Management

1. Garbhasrava-In the initial few months, the miscarriage happens with the expulsion of soft tissues of the foetus.
2. Garbhapata-miscarriage after 3-4months of pregnancy.

To prevent this our acharyas put forward some regimen.

In first few weeks after Pregnancy Confirmation

1. Decoction (kashaya) or medicated milk (ksheerapaka) prepared with yastimadhu (Glyccirrhiza glabra), shaka bheeja (Tectona grandis), ksheera vidari (Ipomea tuberosa) and Devadaru (Cidrus deodara) is administered in dose of 50-100ml in single or divided dose per day.

During Second Month of Pregnancy

1. Kashaya or ksheerapaka prepared with sesame seeds, Bala (sida cardifolia) and shatavari (Asparagus racemosus).

In Third Month of Pregnancy

1. The decoction/medicated milk made out of ksheera vidari(ipomea tuberosa), Neelotpala (Nymphaea stellata) and Sariva (Hemidesmus indicus).

In Fourth Month of Pregnancy

1. The decoction/medicated milk made of Dhanvayasa (Fagonia cretica), sariva (Hemidesmus indicus), Rasna(Alpinia galanga), Padma(Nelumbo nucifera) and Yastimadu(Glyccirrhiza glabra).

In Fifth Month of Pregnancy

1. The decoction/medicated milk made out of Brihati (solanum indicum), kantakari (solanum xanthocarpum), kashmari (Gmelina arborea) and cows ghee.

In Sixth Month of Pregnancy

1. The decoction/medicated milk made of Prishniparni (uraria picta), Bala shigru (Moringa oleifera), Gokshura (Tribulus terrestris) and yashtimadhu (Glyccirrhiza glabra).

In Seventh Month of Pregnancy

1. The decoction /medicated milk made out of Raisins, yashtimadhu (Glyccirrhiza glabra) and sugar candy are taken in quantity of 12gm each and rubbed well with cold water and administered along with 50 ml of milk.

Medico-Legal Emergencies

(1) Agni-dagda	Burns & Seals
(2) Visha-peeta	Poisoning
(3) sarpa-Damsha	Snake bite
(4) Vrischika damsha	Scorpion bite

Management

1. In acute ingested poisoning induced emesis is essential indication. The induced emesis should be given 3lit decoction of 10 gm ikshvaku seeds (lagenaria siceraria) frequently till the poisonous material ended in vomitus matter.
2. In case of poison situated in pakwasaya (intestine) 100ml decoction of 10gm Niliniphala (indigofera tinctoria) along with 10gm ghee for induced purgation.
3. After decontamination of poisonous material from gastrointestinal tract dushivishari agad should be given 5gm twice a day.

The patients of acute ingested poisoning can be managed by using induced emesis; purgation and dushivishadi agad.

If patient come in early phase.

4. In all cases of snake bites ligatures of cloth, skin, soft fibre or any other soft article (consecrated with the proper mantras), should first of all be bound four fingers apart above the seat of the bite in

the event of its occurring in the extremities in as much as such a proceeding would arrest the further(upward) course of the poison in the body.

5. As an alternative the seat of bite should be incisioned, bled and cauterised where such a ligature would be found to be impossible.

Incision, cauterization and sucking(of poisoned blood from the seat of the bite) should be highly recommended in all cases of snake bite.

Discussion

Out of tridoshas, vata is said as driver and performs all functions & the rest two are lame. Vata 5 types, includes different level of body functions and create emergency. Impairment of 13 srotas along with sanjna & chesta vaha srotas may lead to either structural or functional anomalies .Charaka says, Occurance or suppression of disease occurs as a result of variations in Nidana(chronological factors), intensity of doshas and susceptibility of Dhatus. When these 3 factors viz. Nidan, Dosha, and Dushyas unite or associate super strongly, produce diseases very rapidly or with strong manifestations of diseases or with all the signs and symptoms of the diseases. This condition leads to acute disease or emergency. Ayurveda can also be usefull in emergency conditions and life threatening conditions. Some examples are cited in the paper to justify that ayurveda can also be usefull in emergency conditions.

Summary

There are many more situations drive physician in to emergency. .All situations cannot be recorded, we have to follow the needs of patient demands the situation with the equipment we have with us. Without deviating ayurvedic principles whatever it suggest we follow the situational dosage and intake methods. We can tackle the emergencies through ayurvedic medicines. We require the parental route ayurveda medicines to bring in to practice Ayurveda in tradition and in scientific.

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