

 <p>ISSN NO. 2320-5407</p>	<p>Journal Homepage: -www.journalijar.com</p> <h2 style="text-align: center;">INTERNATIONAL JOURNAL OF ADVANCED RESEARCH (IJAR)</h2> <p>Article DOI:10.21474/IJAR01/ 9399 DOI URL: http://dx.doi.org/10.21474/IJAR01/9399</p>	
---	---	---

RESEARCH ARTICLE

REVIEW ARTICLE ON SIRA VEDHAN (VENA OF PUNCTURE) AS A ONE OF THE AYURVEDIC METHOD OF BLOOD LETTING.

Dr. Ajinkya suresh Gite, Dr. Mukund Dhule and Dr. Hemant D. Toshikhane.

Manuscript Info

Manuscript History

Received: 17 May 2019

Final Accepted: 19 June 2019

Published: July 2019

Key words:-

Sira vedhan, Chikitsardh, Raktmokshan,
Parm-praman.

Abstract

Siravedha is one of the methods of blood letting. It is a kind of Para surgery directed for a treatment of specially raktaj roga (blood born disease) along with other many surgical diseases.

Ayurveda is the science preventive as well as a curable approach. The Acharya Sushruta is one of the lines of treatment is *sira vedha* a type of *raktmokshan-chikitsa* (blood letting) used for healing many diseases. *Sira vedhan* is useful in the treatment of vitiation of rakta. There are many types of blood letting methods (ref) eg. Venous puncture, application of horn, application of leeches, scarification etc. the *sira vedha* may be performed on the basis of experience and discretion in all those diseases which are curable by *raktmokshan*.

Copy Right, IJAR, 2019,. All rights reserved.

Introduction:-

Ayurvedic therapy is based on two main principles; Sodhan and Saman Chikitsa. The one in which direct elimination of these vitiated or increased Dosha is done is known as a Sodhan Chikitsa whereas when the increased Dosha are not directly eliminated but brought into an equilibrium with the help of various medicines, then it is called as Saman Chikitsa. Among different types of Sodhan therapies, Raktamokshana is considered as best for Pitta and Rakta Pradoshaj Vyadhi. Siravedha is one of the types of Raktamokshana by Shastravacharana especially used for Sarvangagata Rakta Dushtijanya Vikara.

Definition of sira:

According to Acharya Charaka they are called Sira (vessels) because they conduct (the blood etc) from one place to another. Hridaya spreads Rasa (Rakta) in the whole body and from there it returns back to heart by Sira. So Sira are called "Hritprabhava" because they spread throughout the body originating from Hridaya. (bhel). (REF)

Formation of sira:

According to Acharya Sushruta, Vayu (Vata) combined with Usma (Pitta) entering into muscle tissue and divide the muscle into Pesi (individual muscles). From the unctuous portion of Meads (fat), both Sira (veins) and Snayu (ligaments) are formed; Sira (veins) arise from mild heating and Snayu (ligaments) from hard heating. [REF]

Structure Of Sira 124

By these Sira entire body is nourished constantly, kept lubricated to perform actions such as flexion, extension etc, similar to a large field being nourished by small channels of water their spreading is like the ribs in a leaf; Nabhi is their Moola; and from there, these spread upwards, downwards and side wards.

Sira

The Mula (root) Sira are 10 in number, which are connected to Hridaya and from there they spread upwards, downwards, and sideward and transport Ojas (essence of Dhatus). All the functions of body (Kaya, Vaka, Manas) are carried out by these Sira. There are total 700 Sira in human body.[REF] There are 400 veins present in the Sakha, 136 are present in the Koshta and 164 are present in the head and neck region. 700 in number out of these 602 VedhyaSira, 98AvedhyaSira, in human body.[REF]

Contraindications For Siravedhya

Sira vedhya should not be undertaken in the balyavastha (very young), and the sthavir (very old), ruksha(perched man), kshata (wounded), kshina (debilitated person), bhiru(timid), parisharnt(tired), Madhya padhwa(excessive drinking), stri karshit(emaciated due to excessive indulgence in sex), in person who have undergone vaman (emesis) or virechan (purgasis) anuwasan and asthapan vasthi(who have been administered enemas), in person who has spent sleepless nights, in impotents, in very weak persons pregnant women's, in persons suffering from kapha, asthma, fasting, thirst and unconsciousness. sira vedhya is contra indicated in insensible siras and even if visible but cannot be stabilized (slippery) or even if stabilized but cannot be made prominent. siravedhya

Indication For Siravedhya [123]

in pada-daha(burn), pada harsha(tingling sensation in foot), avbahuk, chippa, visarpa, vata shonata, vatkantaka, vicharchika and padadari disease- sira vedhan should be performed at the distance of two fingers above the site of shipra marma with brihi mukha instrument.

krostuk shirsa, khanj ,pangu, etc. vata disease-sira vedh should be performed four finger above the gulf sandhi(ankle joint) with brihi-mukh instrument.

Apachi-sira vedhan is done two angul blow the inderbasti marma.

Gridhrasi (sciatica)-sira vedhan should be done two angul above the janu sandhi (knee joint).

Galghand(goiter)-sira vedhan should be done in uru-mool sira or in the root of thigh.

pleeha disease (splenic disorders)-sira vedh should be done specially at the middle of the medial side of the left arm near the kurper sandhi(elbow joint) or between the kanistika (little) and anamika (ring) fingers.

yakritodar (hepatomegaly) evam kaphodar evam kas –swas(cough and asthma)-similar as above in right arm.

viswachi-similar to the gridhrasi.

pravahika(dysentery) with shool(pain)-sira vedhan of the area within two fingers around the shroni(pelvis).

parivartika(phymosis), updansh(shancer), shook dosha, evam shukra dosha(seminal disorders)-sira vedhan should be performed medhra madhye(in middle of the penis).

dakodar(ascites)-sira vedhan should be performed four finger blow the nabhi on the left lateral side of sevani.

antarvidradi(internal abcess) and parshav shool(painful conditions of the lateral of chest)-siras between kaksha(axilla) and stan(breast) on the left side of the body should be opened.

Bahu-shosh (atrophy of the arm) Evam Av-bahuka-siravedh should be done between two ansa(shoulders).

tritiyak jvar(tertian fever)-siras of trik sandhi(sacral joint) should be punctured.

chaturthak jvar(quarterly fever)-siras lies below the ansa –sandhi(shoulder joint) should be opened.

apasmar (epilepsy)-in middle of hanu sandhi (temporo mandibular joint).

unmad(insanity)-in siras between shankh (temple) and keshant(hair margin) and veins between apanga (outer canthus) and lalat(fore head) should be opened.

jiwha rog and dant roga-veins on the undersurface of tounge should be opened.

talv roga(disease of palate)-sira vedhya of talv sira(veins of palate) should done.

karan-shool(earache)-siras of above and near the ear should punctured.

Gandh aghrahan(loss of smell) evam nasa roga-sira vedh should be performed of nasa sira.

timira roga(blindness) akshi paka (panophthalmitis) and other eye diseases,siro roga, adhimantha(glaucoma)-siras near the nose,fore head ,and of outer canthus should be punctured.

Siravedhan Vidhi (Method Of Venue Puncture)[125]

a patient who has undergone the process of snehan (oleation) and swedan (fomentation),who has taken a liquid diet and yayagu(gruel) which act as an antidote against body doshas, should be brought to the surgeon at the proper season (not in rainy or winter season) and made to sit or lie down in a position which does not hinder the vital functions. the part chosen for the venue puncture should not be tied too hard nor too loose by any cloth ,skin the inner fibers of the bark or creepers .then the sira should be opened with proper instruments.

Suitable timings for sira vedhan[126]:

the sira vedhan should not be performed on too cold , too hot wind or cloudy day.it should also forbidden on any healthy persons.

Raktamokshana Yogya Kala[127]

Generally the Pitta Dosha vitiated in the Sharad (autumn) Ritu. Rakta vitiation is induced by Pitta provocation. So that in the autumn Raktamokshana should be carried out. Sushruta has further specified that blood-letting should be performed on a patient not in an extremely hot or cold season, neither on one who is too much heated or improperly heated.

Rakta Visravana Pramana[128]

As Rakta Dhatu is very important for life hence, Acharya already decided the quantity of bloodletting for Raktamokshana. As per Acharya view 1 Prastha (640ml) is prescribed as the maximum volume of bloodletting / per sitting of blood. This volume is indicated in patients having strong built, appropriate age and having fully vitiated Rakta.

Conclusion:-

Sira vedha is one of the initial line of treatment in the Management of Shopha, Vedana, Ruja etc. In Ayurved Shiravedhana used in the Sarvadehika dushthi of Dosha thet means Vitiation of Dosha all over the Body. In the Shalyatantra Shiravedhana has play very Important role in the Management of Various Shakhagata Roga. But Siravedhana has plays main role in the management of disease caused by vitiation of Pitta and Rakta Dusthi Vikarara. Therefore In Ayurveda especially in the Shalyatantra Shravedhana Called the Ardhachikitsa.

Refrance:-

1. 123 D.G Thatte ,shushrut samhita of shushrut ,sharir sthan ,sira varan vibhakti sariram,chapter 8,verse no.3, 2nd edition ,choukhamba publications varansi, 2005: 150.
2. 124. Sushutra, Ambika Dutta Shastri, Sushutra Samhita with Elaborated Ayurveda Tatva Sandipika Hindi Commentary, Reprint. Varanasi: Choukhambha Sanskrit Sansthan, Volume 1, Sharir Sthan Chapter, 2009; 7(3): 78.
3. 125 D.G Thatte ,shushrut samhita of shushrut ,sharir sthan ,sira varan vibhakti sariram,chapter 8,verse no.6, 2nd edition ,choukhamba publications varansi, 2005: 152.
4. 126 D.G Thatte ,shushrut samhita of shushrut ,sharir sthan ,sira varan vibhakti sariram,chapter 8,verse no.8, 2nd edition ,choukhamba publications varansi, 2005: 153.

5. 127 Sushutra, Ambika Dutta Shastri, Sushutra Samhita with Elaborated Ayurveda Tatva Sandipika Hindi Commentary, Reprint. Varanasi: Choukhambha Sanskrit Sansthan, Volume 1, Sutra Sthan Chapter, 2009; 14(27): 70.
6. 128 Sushutra, Ambika Dutta Shastri, Sushutra Samhita with Elaborated Ayurveda Tatva Sandipika Hindi Commentary, Reprint. Varanasi: Choukhambha Sanskrit Sansthan, Volume 1, Sharir Sthan Chapter, 2009; 8(16): 87.