

ROLE OF VAMANA KARMA IN THE MANAGEMENT OF MEDOJ GRANTHI

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ABSTRACT

Medoj Granthi is comparatively large, fatty swellings associated with itching and slight pain. They usually grow very slowly in proportion to body growth. It splits ghee (clarified butter) like discharge.^[1] *Aacharya Sushruta* has mentioned that in *Medoja Granthi*, prime vitiation is of *Kapha* and *Meda*. As per classics, *Vaman* is best treatment for *Kaphaj Vikara*. So it can be conducted for the management of various *Kaphaj Vikara* in *Ayurveda*. Here, a single case study of a 26 years old male is being presented, who came with complaints of Swelling around left elbow joint, mild pain and itching. Considering the signs and symptoms, according to *Acharya Charak Vaman karma* was selected as treatment of *Medoj Granthi*. Marked improvement in signs and symptoms of *Medoj granthi* were found.

KEYWORDS: *Medoja Ganthi, Vamana karma, Kaphaj Vikara.*

INTRODUCTION

Vaman Karma

When vitiated *Doshas* are eliminated or expelled out through the upper channels i.e. through the mouth, it is called as '*Vamana*'. When *Apakwa pitta* and *Kapha* are forcibly expelled out

through the upward route, it is called *Vamana*. As per classics *Vaman* is best treatment for *Kaphaj Vikara*. *Vamana* is the unique procedure of eliminating the dosha from the body through the oral route by way of inducing vomiting. *Vamana Karma* stands at the peak place among all the elimination therapeutic procedures. According to *Acharya Sushruta*, the flowers, fruits and branches, which are destroyed at once as soon as the mother tree is rooted out; the diseases originated due to excessive *Kapha* are subdued after the elimination of *Kapha* through the process of *Vamana*.

Disease review

The word *Granthi* is derived from word *Grathitha* which literally means knotted. The etiological factors constitute the vitiated doshas which in turn affect the blood, muscular tissue and fatty tissue. *Kapha* slowly accumulates at the site where muscular and fatty tissue are vitiated and gives rise to round, elevated and slightly nodular swelling which is termed as *granthi*.^[2] *Granthi* undergoes two states.^[3]

1. *Ama* stage. This is unripe stage and
2. *Pakwa* stage. This is ripe stage.

All *Granthis* do not become *Pakwa*. The *Granthis* takes weeks or months before it becomes *pakwa*.

Ama stage – In the *Ama* stage, oil or ghee medicated with *Prasarini* and *Dashamula*^[4] should be given to drink. Later the patient should be given emetics like *Madana phala choorna* to induce vomiting and give purgative. The physicians should see that the patient does not become weak while carrying out these procedures. Then *Granthis* should be fomented and massaged.

Pakwa stage – when the *Granthi* is *pakwa* it should be completely removed by *Chhedana*. The wound should be washed with decoction of *Triphala*. After washing the wound, the paste of ghee medicated with *Yavakshara* and honey should be applied. Many *Granthis* remain in *Ama* stage and keep on increasing and never becomes ripe. They should be removed in *Ama* stage as early as possible. Later til taila medicated with *Vidanga*, *Patha* and *haridra* should be sprinkled on the wound and gauze pieces dipped in the same oil should be applied over the wound and it should be bandaged.^[5] *Jatyadi* oil or ghee is also helpful for healing the wound.

Treatment of Medoj Granthi

According to *Aacharyas* in *Medoja Granthi* there is vitiation of *Kapha* and *Meda*. *Vaman Karma* can be conducted for the management of various *Kaphaj Vikara* in *Ayurveda*. Considering above facts *Vaman Karma* was selected for the study.

CASE REPORT

Name: -Vijaybhai patel

Religion: - Hindu

Age: - 26 yrs

O.P.D. no: - 1024

Address: - Narol, Ahmedabad

D.O 1st arrival: - 9 Jan 2017

CHIEF COMPLAINTS

Sr. No	Chief complaints (Present history)	Time duration	Severity of the symptoms
1.	Swelling around left elbow joint	2 years	Moderate
2.	Pain	2 Month	Mild
3.	Itching	2 Month	Moderate

HISTORY OF PRESENT ILLNESS

Patient was asymptomatic before 2 years. Then gradually he developed Swelling around left elbow joint. He felt Itching and also felt mild pain at site. So for proper treatment he came here in Govt. Akhandanand Ayurved hospital.

PAST HISTORY: - No relevant past history was found.

TREATMENT HISTORY: -Patient had not taken any kind of medication elsewhere.

NIDANA^[6] FOUND IN THE PATIENT**Aaharaj Nidana**

Most of the *Nidans* mentioned by *Aacharya Charak* were found in the dietary history of the patient like excessive consumption of *Drava*, *Snigdha* and *GuruAhara*, *Pishtanna*, *Kshir* and occasionally *Viruddhaahara*.

Viharaj Nidana

Vyayam and *Atisantap sevan* after consumption of food, *Diwa swap*, irregular *Shitaushna sevan*,

ADDICTION: Addiction of tobacco, smoking since 3 years.

FAMILY HISTORY: No relevant family history was found.

TREATMENT PROTOCOL

Karma – *Vaman karma* was selected.

Vaman Karma

Shodhana: *Vaman karma* is divided into 3 parts.

(A)*Purva Karma*

1) *Deepana and Pachana*

- Drug – *Trikatu Churna*
- Dose: 6 gm. per day
- Duration: 3 days (As per *Aatur Agni*)

2) *Aabhyantar Snehan*

Pure *Goghrita* (Ghee)

- Dose: 40 ml starting dose, in *Vardhmana Karma* (As per *Aatur-Koshtha* and *Agni*).
- Duration: 7 days (Depending upon the *Samyak-Snigdha Lakshana*)
- *Anupan: Ushna Jal*

3) *Abhyanga and Swedana*: After obtaining *Samyak Snigdha Lakshanas*, *Abhyanga* with *Nirgundi Taila* was done followed by *Sarvanga Swedana* (*Bashpa Sweda*) in *Vishram Kal* (For 1 day) and on the day of *Vaman Karma*, prior to *Vamana* procedure.

(B)*Pradhana Karma*

Aakanthpan - By *Dugdha*

VAMAN DRAVYA:- *Madanphali Yoga* (*MadanPhala, Vacha, Saindhav*).^[7]

NO.	DRUGS	LATIN NAME	PARTS USED	PARTS
1	<i>Madan Phala</i>	<i>Randia dumetorum</i>	<i>Pippali</i>	4 gm.
2	<i>Vacha</i>	<i>Acorus calamus</i>	<i>Mula</i>	2 gm.
3	<i>Saindhav</i>	Rock salt	<i>Churna</i>	1 gm.
4	<i>Madhu</i>	<i>Mal depuratum</i>	Itself	30 ml.

Vamanopaga Dravya: *Yastimadhu Phanta*.

Time of procedure: early morning.

(C) Paschata Karma**SAMSARJANA KRAMA**

As per the observations during the *Vamana* process, *Pravra Shuddhi* was and the *Samsarjana Krama* of 7 days was decided according to the *Pravara Shudhhi*. The sequence of *Peya*, *Vilepi*, *Akrita Mudga Yusha*, *Krita Mudga Yusha*. *Peya* etc. was served for 2 *Aahar Kala*.

ASSESSMENT CRITERIA

Assessment was done on the basis of the criterias like size of *Granthi*, pain, and itching.

1. Size

Size	Score
0-1cm	0
1.5-2cm	1
2.5-3cm	2
>3cm	3

2. Itching

Itching	Score
No Itching	0
Mild(Bearable)	1
Moderate (moderate and irregular)	2
Severe (severe and continuous)	3

3. Pain

Pain	Score
No Pain	0
Mild pain(Bearable pain)	1
Moderate pain(moderate and irregular pain)	2
Severe pain(severe and continuous pain)	3

ASSESSMENT

Sr. No	Chief complaints (Present history)	B.T. Score	A.T. Score
1.	Swelling around left elbow joint	2.5cm	2 cm
2.	Pain	1	0
3.	Itching	2	0

DISCUSSION

- *Medoj Granthi* is described by all 3 major classics (*Bruhatrayi*) of *Ayurved-Charak Samhita, Sushrut samhita and Astang hridaya*.
- According to *Acharya Sushrut* it occurs in the 6th layer of the skin which is *Rohini*.^[8]
- *Granthi* in abdomen, neck and vital areas are difficult to cure. Big and rough *Granthi* are also difficult to cure. *Granthi* in children, old and weak people prove to be difficult to cure. Painless, immobile and *Granthi* affecting vital areas are incurable.^[9]
- *Aacharyas* has described 2 types of *Chikitsa* for Treatment of Disease, i.e. *Shodhan* and *Shaman*.
- According to *Aacharya Charak* when Disease having *Bahudosha* the treatment should be *Shodhana*.^[10]
- Many *Acharyas* have described *Vaman karma* for the treatment of *Kaphaj Vikar*. *Medoj Granthi* is one type of *Kaphaj vikar*,^[11] hence *Vaman Karma* was selected for the eliminations of *Doshas*.
- In this case the Chronicity was found so *Vamana karma* was preferred. Total treatment schedule was of two and half months. Proper follow up of the patient was taken for 1 month after completion of the treatment.
- Marked improvement in disease was found in the patient as he followed the *Pathya Apathya* also very strictly.
- Patient got completely relief in symptoms like pain and itching.
- There was decrease in size of *Granthi* was found.

CONCLUSION

- In this case *Kapha Dushti* was predominant in comparison to other *Doshas*.
- Hence *Vaman Karma* was preferred and Marked Improvement was obtained.

REFERENCES

1. *Acharya Sushruta, Sushruta Samhita*, Kaviraja Ambikadutta Shastri, published by Chaukahmbha Sanskrit Sansthan Varanasi, part-1, Edition- 2008 *Nidanasthana* 11/7.
2. Vagbhata. *Astangahrdayam* In: Vaidya HHP (eds.) Varanasi: Chaukahmbha Sanskrit Sansthan; Vol 3. 9th Ed. 2005. P (881-887) 2-13, 1-7. *Uttarastanam* 29, 30.
3. *Acharya Charak, Charak Samhita*, *Acharya vidhyadharshukla.*, published by Chaukahmbha Sanskrit pratisthan Varanasi, part-2, Edition- 2008 *Chikitsasthana* 18/16.

4. *Acharya Sushruta, Sushruta Samhita*, Kaviraja Ambikadutta Shastri, published by Chaukahmbha Sanskrit Sansthan Varanasi, part-1, Edition- 2008 *Chikitsasthana* 18/4.
5. *Acharya Sushruta, Sushruta Samhita*, Kaviraja Ambikadutta Shastri, published by Chaukahmbha Sanskrit Sansthan Varanasi, part-1, Edition- 2008 *Chikitsasthana* 18/16.
6. *Acharya Charak, Charak Samhita*, Acharya vidhyadhar Shukla, published by Chaukahmbha Sanskrit pratisthan Varanasi, part-2, Edition- 2008 *Chikitsasthana* 18.
7. *Ayurvediya Panchkarma Vigyanaby* Shreedhara Kasture, published by baidhnath ayurved bhavan pg. 244.
8. *Acharya Sushruta. Sushruta Samhita*, Kaviraja Ambikadutta Shastri, published by Chaukahmbha Sanskrit Sansthan Varanasi, part-1, Edition- 2008, *Sharirsthana* 5 pg.no. 133.
9. Ibidem ref 1 *Nidanasthana* 11/9.
10. *Acharya Charak, Charak Samhita* Acharya vidhya dhar shukla., published by Chaukahmbha Sanskrit pratisthan Varanasi, part-2, Edition- 2008 *Sutrasthana* 16/19.
11. *Acharya Charak, Charak Samhita* Acharya vidhya dhar shukla., published by Chaukahmbha Sanskrit pratisthan Varanasi, part-2, Edition- 2008 *Chikitsasthana* 26.
12. Sri Madhavakara., Madhava nidanam, In: Dr. Tripathi B (eds.) Varanasi: published by Chaukahmbha Sanskrit Sansthan; vol 2. 1st ed. P (86-90) 11-17.
13. Sharngadhar Samhita, Acharya Sharngadhar. In: Dr. Srivastava S (eds.) published by Chaukahmbha Sanskrit Sansthan; Varanasi: 3rd ed. 2003. P (88) 67. Poorvakanda 7.
14. Bhavaprakasa Sri Bhavamisra. Chikithsa 44. In: Misra PSBS (eds.) published by Chaukahmbha Sanskrit Sansthan; Varanasi: part 2. 11th ed, 2010; (445-446) 11-17.
15. Vrddha Vagbhata, Astangasangraha In: Dr. Sharma S (eds). Published by Chaukahmbha Sanskrit Sansthan; Varanasi: 1st ed. Uttara kanda 34. P (803-805) 1-13.
16. Bhela Samhita. Dr. Krishnamurthy KH. In: Prof. Sharma PV (eds.) Published by Chaukahmbha Sanskrit Sansthan; 1st ed. Varanasi: 2008. Chikithsa 17. P (408-411) 1-19.
17. Acharya vidhyadhar shukla. *Charak Samhita*, published by Chaukahmbha Sanskrit pratisthan Varanasi, part-2, Edition- 2008 *Chikitsa sthana* 12.
18. Yogaratnakara. Sastri VL. In: Sastri BB (eds.) 7th Ed. Published by Chaukahmbha Sanskrit Sansthan; Varanasi: 1999. Uttarakhanda Galagandanidana P, (153-155) 1-10.