

**EMERGENCY CARE THROUGH AYURVEDA: A REVIEW****Trilok Kumar Yogi<sup>1\*</sup>, Ravi Sharma<sup>2</sup> and Mahesh Dixit<sup>3</sup>**P. G. Scholar<sup>1</sup>, Prof. & H.O.D.<sup>2</sup>, Principal<sup>3</sup>

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Ayu. College, Udaipur (Raj.)**ABSTRACT**

Medical emergency is an injury or illness that is acute and poses an immediate risk to persons life or long term health. It is termed to Aatyayik chikitsa in traditional system. Emergency is a condition requiring immediate treatment where the patient with this is either conscious or unconscious. 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.<sup>[1]</sup> It is not true to say that ayurvedic texts are not having description of emergency management. Ancient Acharyas have used various terms like sadhya<sup>[1]</sup> Ashu<sup>[2]</sup> Twarita<sup>[3]</sup> in emergency condition

where quick management is needed. 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 the right place to mention the reference of sushruta samhita in which acharya has prescribed to use specific methods in emergency condition.<sup>[2]</sup>

**KEYWORDS:** *Ayurveda, emergency, medicine, sadhya, ashu, twarita.***INTRODUCTION**

Ayurveda is oldest holistic system of medical science developed 5000 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. 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. Some texts of ayurveda discussed about emergency conditions.

The literature of daruna and ashukari diseases need to be elaborated with respect of current scenario.

However the primarily approach of ayurvedic systems resides around to manage balances of three doshas vata, pitta, and kapha for management of any disease.

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.<sup>[3]</sup>

"TWARAYA JAYET" mentioned in ayurveda as approach of prompt treatment for management of medical emergencies such as hyperthermia; intense fever; acute diarrhea; trauma; 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.<sup>[4]</sup>

## Medical Emergencies

### Jvar (Fever)

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

- |                             |                      |
|-----------------------------|----------------------|
| 1. Tandrika sannipat jwara  | Typhoid state.       |
| 2. Pralepaka sannipat jwara | Febrile delirium.    |
| 3. Akshapaka sannipat jwara | Febrile convulsions. |

- |                                 |                     |
|---------------------------------|---------------------|
| 4. Teevra sannipat jwara        | Hyperpyrexia.       |
| 5. Swasa-santamaka or pratamaka | Dyspnea with fever. |
| 6. Shoola                       | Painful condition.  |
| 7. Anidra                       | Sleeplessness.      |

### MANAGEMENT

1. In hyperpyrexia cold sponging along with mrutyunjaya ras made the fever to control very fast. Along with soap water enema.

### The following Quath was given repeatedly every 3 hrs

2. (1) Tagara (2) Musta (3) Katuki (4) Dashamool<sup>[5]</sup> 4) Sudarshan churna 5) Tribhuvan kirti rasa 6) Godanti bhasm 7) Patoladi Kashaya<sup>[6]</sup>

### Chardi or vomiting

1. Chardi -Vomiting
2. Rakta chardi - 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:
  - Haritaki churna<sup>[7]</sup>
  - Hridaya dravya as like cow milk & alcohol<sup>[8]</sup>
  - Vallifala is considered as mridu vaman<sup>[9]</sup>
  - Myurpichchha bhasm
  - Vrihat vata chintamani ras

### Hrid roga (Diseases of heart)

- |                       |                              |
|-----------------------|------------------------------|
| 1) Hrid upaghata      | Myocardial infarction        |
| 2) Hrid Bheda         | Heart failure or Heart block |
| 3) Raktachapa vridhhi | Hypertension                 |

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.

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.

### **Management**

Treatment is based on bringing these imbalances back to normal. In the treatment of hypertension; nutrition, exercise, pranayama, yoga, meditation

### **Some useful medicines in cardiac emergency**

1. In Hrid upaghata Hridaya drug is the drug of choice, more over drugs that are increasing ojas, srotas cleaners & rejuvenators are of choice.
2. Hingu churna + lavana+ gokshura panchamula.  
along with various herbs and minerals are prescribed.
3. Hingu churna + Bilvadi panchamula. are drug of choice.
4. Pathyadi kalka
5. pushkarmuladi kwath & kalka
6. chyavanprash, Agastya haritaki , shilajit, amalaki rasayana & brahm rasayan <sup>(10)</sup>

### **Swasa or breathlessness**

- |                 |                      |
|-----------------|----------------------|
| 1) Tamaka swasa | Bronchial asthma     |
| 2) Pratata kasa | 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 sukhoshna matra  
vasti makes the patient to get relief.<sup>[11]</sup>
3. Shatyadi churna, dashmooladi ghrita, madhukadi yoga, hemagarbha pottali rasa, bharangi-nagar yoga.<sup>[12]</sup>

**Vata-Vyadhi (Diseases of nervous system)**

- |                        |                    |
|------------------------|--------------------|
| 1) Pakshaghata         | 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 6<sup>th</sup> 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 pittaavrita vata stage of disease. Mridu virecana karma, Swedana, abhyanga and basti were done for treating kaphaja and vataja stage of the disease and restore dosha balance.<sup>[13]</sup>

**SUMMARY**

There are many more situations drive physicians into emergency. All Situations can not be recorded. We have to follow the needs of patients 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.

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