

## CONCEPTUAL FRAMEWORK OF SIRAVYADHA IN AYURVEDA: A THEORETICAL REVIEW

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### ABSTRACT

Shodana and Shamana Chikitsa are two core principles of Ayurvedic medicine. Rakta is the body's root (originating factor), and as blood is what keeps the body alive, it must be properly preserved. Blood is life. Because Pitta Dosha and Rakta Dhatu have an Ashraya Ashrayi relationship, changes in Pitta Dosha are correlated with changes in Rakta Dhatu. Pitta Dosha vitiation is the main cause of Rakta Pardoshaja Vikara. Rakthamokshana is thought to be the most effective of the several Shodhan remedies for Pitta and Rakta Pradoshaja Vyadhi. Siravedhana is employed in Ayurveda's Sarvadehika dushthi of Dosha, which refers to the body's overall Dosha vitiation. Siravyadhana has been crucial to the administration of several Shakhagata Rogas in the Shalyatantra. However, Siravyadhana is the primary treatment for illnesses brought on by Pitta and Rakta Dushti Vikara vitiation. Thus, in Ayurveda, particularly in the Shalyatantra known as the Ardhachikitsa. All

of the prerequisites for Siravedhan as mentioned by Acharyas are covered in this topic since Acharya Sushruta gave a comprehensive explanation of Pracchan and Siravedhan as well as their significance in Raktagata Vikara.

**KEYWORDS:** Ardhachikitsa, Raktamokshana, Raktadushti, Shodhana, Shamana, Sira, Siravyadhana.

## INTRODUCTION

### Rakta

The term Rakta originates from the root word Ranjane, which signifies its characteristic red colour and inherent staining property.<sup>[1]</sup> Synonyms of Rakta are Rudhira, Shonita, Asrik, Lohita.<sup>[2]</sup> Acharya Sushruta have stated that “Dehashya Rudhiram Mulam Rudhireneva Dharyte” meaning Rakta is the root and sustaining factor of the body. Hence, Blood is life and every effort should be made to protect it.<sup>[3]</sup> Rasa reaches yakrita and pleeha and takes the form of Rakta.<sup>[4]</sup> Rasa is the pure essence of food, which gets processed with ranjaka pitta gets transformed into rakta.<sup>[4]</sup>

Rakta is considered panchabhoutika in nature, being composed of all five elements. Its qualities are described as visrata (diffusibility), dravata (fluidity), raga (imparting color), spandana (pulsation), and laghuta (lightness).<sup>[5]</sup> The natural colour of Rakta is red, resembling that of Indragopa insect or Gunja phala.<sup>[6]</sup> Although Rakta Dhatu is composed of all five Mahabhutas, it is predominantly governed by Tejas and Jala Mahabhutas. Its total quantity is considered to be 8 Anjali.<sup>[7]</sup> The Upadhatus (subsidiary tissues) of Rakta are the Sira (veins) and Kandara (tendons/ligaments),<sup>[8]</sup> while Pitta is regarded as the Mala (waste product) of Rakta Dhatu.<sup>[9]</sup>

Rakta, when vitiated, can act as a causative factor for various diseases. Hence, Acharya Sushruta, who regarded Rakta as the fourth dosha,<sup>[10]</sup> emphasized different methods of Raktamokshana (bloodletting) to eliminate its vitiation. By doing so, Rakta is restored to its natural state, functioning as the “supporter of life” rather than turning into a “destroyer of life” through the manifestation of disorders.<sup>[11]</sup>

### RAKTHAMOKSHANA

त्वग्दोषा ग्रन्थयः शोफा रोगाः शोणितजाश्च ये ।

रक्तमोक्षणशीलानां न भवन्ति कदाचन ॥३४॥

A person who undergo rakthamokshana, will not suffer from any kind of twak dosha granthi sophia roga due to dushta raktha.

Raktamokshana (Bloodletting) is a procedure by which the vitiated Rakta (blood) is removed by several procedures (either by using sharp surgical instruments or by means of parasurgical measures) in disease caused by Rakta or Pitta.<sup>[12]</sup>

**TYPES OF RAKTHAMOKSHANA**

a) Shastra – 1) Pracchana

2) Siravyadha

b) Ashastra – 1) Jalouka

2) Shringa

3) Alabu

**SIRAVYADHA**

सिराव्यधश्चिकित्सार्थं शल्यतन्त्रे प्रकीर्तितः ।

Siravyadha is the medical practice of puncturing a vein to release blood. It is especially recommended for Rakta-prakopaja vyadhis (diseases resulting from irritated blood), especially in illnesses that are otherwise curable but do not improve with treatments like sheeta (cold), snigdha (unctuous), ruksha (dry), or ushna (hot). It is considered "Chikitsardha," which translates as "half of all therapeutic measures in the management of diseases within Shalyatantra," much like Basti when correctly administered. In Kayachikitsa, basti chikitsa is regarded as half of all therapeutic measures.

**IMPORTANCE OF SIRAVYADHANA**

Among all the treatment methods for Sadhya rogas, siravyadha is the best, just like how the paddy and other crops die out completely by removing the bunds of the field, this procedure helps to eliminate the disease completely.<sup>[13]</sup>

When other treatments fail, siravyadha has to be done for raktaprakopaja vikaras<sup>[14]</sup>

स्नेहादिभिः क्रियायोगैर्न तथा लेपनैरपि ।

यान्त्याशु व्याधयः शान्तिं यथा सम्यक् सिराव्यधात् ॥२२॥

The conditions which do not subside with snehana, lepana etc those conditions will subside with proper siravyadha.<sup>[15]</sup>

Rakta is the adhishtana for all vikaras, there is no other dushya like rakta. Hence siravyadha is the first / important procedure.<sup>[16]</sup>

सिराव्यधश्चिकित्सार्थं शल्यतन्त्रे प्रकीर्तितः ।

यथा प्रणिहितः सम्यग्बस्तिः कायचिकित्सिते ॥२३॥

Siravyadha is considered as the Ardha chikista in shalya tantra.<sup>[17]</sup>

**INDICATIONS AND CONTRAINDICATIONS OF SIRAVYADHA****Indications<sup>[18]</sup>**

साव्या विद्रधयः पञ्च भवेयुः सर्वजादते ॥१२॥

कुष्ठानि वायुः सरुजः शोफो यश्चैकदेशजः ।

पाल्यामयाः श्लीपदानि विषजुष्टं च शोणितम् ॥१३॥

अर्बुदानि विसर्पाश्च ग्रन्थयश्चादितश्च ते ।

त्रयस्तयश्चोपदंशाः स्तनरोगा विदारिका ॥१४॥

सु(शु)षिरो गलशालूकं कण्टकाः <sup>[३]</sup> कृमिदन्तकः ।

दन्तवेष्टः सोपकुशः शीतादो दन्तपुष्पुटः ॥१५॥

पित्तासृक्कफजाश्चौष्ठ्याः क्षुद्ररोगाश्च भूयशः ॥१६॥

Visarpa, Vidradhi, Pleea, Gulma, Agnimandya, Jwara, Mukharoga, Netra roga, Shiroroga, Mada, Trishna, Lavana asyata (Salty taste in mouth), Kushtha, Vatarakta, Raktapitta, Katuamla udgara and Bhrama.

**Contraindications<sup>[19]</sup>**

Sarvanga shopha (generalised edema), Kshina (emaciated due to excessive intake of sour food), Pandu (Anemia), Arsha (Piles), Udara roga (Abdominal enlargement), Pregnancy, In children, aged, emaciated due to trauma to chest, cowards, exhausted, alcoholic, Who has undergone shodhana, Kasa (Cough), Jwara (Fever), Bhiru, Parishranta, kliba, Krisha, Akshepaka, Pakshaghata, Upvasita, Pipasa.

**KALA MARYADA FOR SIRAVYADHA**

नैवातिशीते नात्युष्णे न प्रवाते न चाभ्रिते ।

सिराणां व्यधनं कार्यमरोगे वा कदाचन ॥७॥

व्यभ्रे वर्षासु विध्येत्तु ग्रीष्मकाले तु शीतले ।

हेमन्तकाले मध्याह्ने शस्त्रकालास्त्रयः स्मृताः ॥१०॥

Siravyadha is advised to be performed in moderate seasons, avoiding periods of extreme heat or cold. It should not be performed in a patient who has undergone excessive svedana (sudation) or who has been overexposed to the sun.

Varsha rutu – when the sky is clear

Grishma rutu – when it is cool

Hemantha rutu – during afternoon

The procedure is ideally carried out after the person has been adequately nourished with Yavagu (thin gruel). Siravyadha should never be done in a healthy individual.<sup>[20]</sup>

### PROCEDURE OF SIRAVYADHA

तत्र स्निग्धस्विन्नमातुरं यथादोषप्रत्यनीकं द्रवप्रायमन्नं भुक्तवन्तं यवागूं पीतवन्तं<sup>[3]</sup> वा यथाकालमुपस्थाप्या सीनं स्थितं वा प्राणानबाधमानो वस्त्रपट्टचर्मन्तर्वल्कललतानामन्यतमेन यन्त्रयित्वा नातिगाढं नातिशिथिलं शरीरप्रदेशमासाद्य प्राप्तं शस्त्रमादाय<sup>[3]</sup> सिरां विध्येत् ॥६॥

For performing Siravyadha, veins suitable for puncture should be carefully chosen, stabilized, and made prominent by applying a tourniquet above the site before pricking. Although there are certain contraindications for this procedure.

### POORVAKARMA

The patient should first undergo snehana (oleation) and swedana (sudation).

- A diet opposite to the aggravated dosha is advised, preferably light and liquid preparations such as yavagu (thin gruel).
- At the appropriate time, the patient is positioned either sitting or standing, depending on comfort and suitability for the procedure.
- A tourniquet made of cloth, leather, soft bark, creeper, or any suitable material is tied above the chosen site, ensuring it is neither too tight nor too loose.
- Finally, Siravyadha (venepuncture) is carried out with the proper instrument.

### PRADHANA KARMA

- The selected vein is punctured with a suitable instrument.
- Blood flows out in a continuous stream for some time and then ceases either spontaneously or upon checking (usually after one muhurta).
- Just as the puncture of kusumbha flowers first releases a yellowish sap, in humans too, the initial flow from punctured veins is the vitiated blood.
- In individuals who are unconscious, extremely frightened, exhausted, or excessively thirsty (in shock), the required quantity of blood may not flow out.
- Inadequate blood flow also occurs when veins are neither engorged nor properly stabilized before puncture.

- If excessive dosha is present or if the patient loses consciousness during the procedure, Siravyadha should be stopped and may be resumed later either the same afternoon, the next day, or after three days.
- Complete removal of vitiated blood is not advised; it must be monitored carefully, as excessive elimination can lead to rakta kshaya (depletion of blood).
- Any remaining vitiated dosha should then be addressed through alternative therapeutic measures/shamana aushadhis.

### QUANTITY OF BLOOD CAN BE WITHDRAWN

In adults with strong vitiated doshas and good physical strength, the upper limit of bloodletting is one prastha, equivalent to about thirteen and a half pala, which is approximately 640 ml.<sup>[21]</sup>

### PASCHAT KARMA

- After the blood stops flowing, the area is bandaged and kept elevated for some time.
- Once his vitals are checked and monitored for its normal valve.
- He should then avoid anger, exertion, cohabitation, daysleep, excessive speech, exercise, travelling in vehicles, studying, standing, sitting, walking, exposure to cold, wind; incompatible foods, unsuitable foods, having food during indigestion etc, at least for a period of one month.

### PROPER ADMINISTRATION OF SIRAVYADHA PROCEDURE

When blood has oozed out and ceases to flow on its own, then it should be understood that the procedure has been carried out correctly. The following signs should appear

- Lightness in the body and freedom from the signs and symptoms of vitiated Rakta.
- Cessation of pain/discomfort (vedana shanti).
- Reduction in severity of disease.
- Happiness or a state of cheerfulness (happiness because of reduction in pain/ disease condition).<sup>[22]</sup>

### PATHYA AND APATHYA

The patient should be treated with food which are not very cold, which are light (easily digestible), unctuous, which promote blood formation and either slightly sour or devoid of sour. When recovering from bloodletting, the patient should refrain from physical activity,

sexual contact, cold weather, eating only one meal a day, sleeping all day, using alkalis, eating spicy foods, being upset, talking a lot, and experiencing dyspepsia until he is well.(23)

## COMPLICATIONS

During Siravyadha, if there is excessive bleeding, it may lead to complications such as headache, temporary blindness or darkness before the eyes (andhya), glaucoma and other visual disorders, depletion of vital strength (dhatu kshaya), convulsions (akshepaka), burning sensations, hemiplegia (pakshaghata), localized diseases, hiccups, cough, breathlessness, anemia, and in severe cases, even death (resembling features of hemorrhagic shock). These adverse effects are more likely to occur when the procedure is performed on a very hot day, after excessive sweating, or when the puncture is made too wide.

## MANAGEMENT OF EXCESSIVE HAEMORRHAGE DURING SIRAVYADHA<sup>[24]</sup>

Hemorrhage needs to be managed by four main methods:

1. Sandhana- Unification
2. Skandana- Coagulation
3. Pachana- Suppuration
4. Dahana- Cauterisation To control bleeding,

चतुर्विधं यदेतद्धि रुधिरस्य निवारणम् ।

सन्धानं स्कन्दनं चैव पाचनं दहनं तथा ॥३९॥

Skandana is applied first, followed by sandhana and then pachana measures. If all three methods prove ineffective, dahana is employed as the final step to stop haemorrhage. Astringent (kashaya rasa) drugs are applied in the form of lepa or parisheka to aid tissue union. Hima (cold applications) help in coagulation, bhasma used as a dusting powder supports pachana, and agnikarma (cauterization) causes vein contraction, thereby assisting in arresting haemorrhage. To stop bleeding, powders of Madhuka, Priyangu, Gairika, Sarja, Arjuna, Laksha, and similar drugs may be applied at the site of haemorrhage along with pressure. Tight bandaging also helps in controlling the flow, while kshara karma serves as another effective measure to arrest haemorrhage.

## DISCUSSION

Rakta is an entity as important as the doshas.

Rakthamokshana is a type of shodhana and shamana concerned with the removal of dushita rakta and pacifying the symptoms.

Raktamokshana is indicated in various shalya tantra vyadhis like dushta vrana, vranashotha, granthi, arshas, vidhradhi, and kshudra rogas like indralupta, accordingly it can be used in various other conditions also.

For localised conditions raktamokshana can be done by pracchana, jaloukavacarana, shringa and alabu, where as siravyadha is said to be sarvangashodini.<sup>[25]</sup>

## CONCLUSION

देहस्य रुधिरं मूलं रुधिरेणैव धार्यते ।

तस्माद्यत्नेन संरक्ष्यं रक्तं जीव इति स्थितिः ॥४४॥

In people who undergo raktamokshana, twakdosha, granthi, sophia and rogas due to dushta rakta will not occur.<sup>[26]</sup>

Siravyadha, regarded as chikitsardha in Ayurveda, offers a systematic and safe approach for managing a wide range of rakta-prakopaja and related disorders. Its classical foundation, clinical utility, and parallels with modern venesection highlight its enduring therapeutic relevance and potential for integration into contemporary healthcare.

Siravyadha is simple cost effective OPD procedure which has miraculous effect. It is recommended for both prophylactic and therapeutic. It is capable of providing relief in many health problems and hence should be practice on more and more number of patients with the aim of standardizing and promoting it as one of the better treatment modality.

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