

A CASE STUDY ON EFFECT OF RAKTAMOKSHAN IN ACCELERATED HYPERTENSION ACCORDING TO SAMANYA- VISHESH SIDDHANT

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Article Received on
26 July 2021,

Revised on 16 August 2021,
Accepted on 06 Sept. 2021

DOI: 10.20959/wjpr202112-21688

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ABSTRACT

In the current era of development hypertension is an important public health issue. According to WHO, Hypertension is the serious medical condition. It is the major cause of premature death worldwide i.e 1 in 4 male and 1 in 5 female suffered with hypertension. Persistent hypertension increases the risk of heart failure, stroke, renal failure, blindness etc. In ancient times, in ayurved samhita, acharya explained the Samanya-Vishesh siddhant, according to this siddhant acharya says 'Vruddhi samane sarvesham, viparyastu viparyaha. That means likewise things increases the same and opposite action decreases. With reference of above siddhant we started the treatment of hypertension

with Raktamokshan by siravedh, briefly explained by acharya sushruta. In this study we found significant results of raktamokshan with application of samanya-vishesh siddhant.

KEYWORDS: Hypertension, Siravedh, Raktamokshan etc.

I. INTRODUCTION

Persistent high blood pressure is like silent killer, because sometimes it has no warning signs and symptoms. In hypertension, there is abnormalities in Raktadhatu i.e raktadushti (vitiated blood). In Vidhishonit adhyay, acharya explained the hetu which is responsible for increasing the dushit raktadhatu, who disturbs the normal gati of vata, so that normal parivahan is hampered. Raktavrut vata is the main cause of increase in blood pressure. Hetu explained in Vidhishonit adhyay are responsible for quantitative increase of Raktadhatu which impedes the Gati of Vata Dosha, hence normal Parivahan is hampered. With quantitatively increase in

dushit raktadhatu, in this condition acharya explained the importance of Raktamokshan with through study of Samanya-vishesh siddhant and its applications. Raktamokshan means let out the dushit rakta from the body. There is 3 types of Raktamokshan mentioned in ancient samhitas i.e through Shrung, through Alabu and through Siravedh which practiced according to dushit doshas. Like when there is Pitta pradhan doshas we can use Shrung, when there is Kaph pradhan dosh Alabu used and in Vata pradhan doshas Siravedh is practiced.

II. Concept of samanya-vishesh siddhant

There is a fundamental principle in Ayurveda, often referred as the principle of *Samanya* (similarity) and *Vishesh* (difference). In samanya-vishesh siddhant, acharya clearly quoted that 'vrudhi samane sarvesham, viparyastu viparyaha' that means Same thing increases same and 'Hras hetushch viparyaha' means opposite action decreases. Every disease occurs due to disturbance in state of equilibrium state of body's dosha, dhatu or mala i.e either increase or decrease in their state. In simple terms if we transfuse the blood product to the patient it increases the blood component of patient in the same way if we withdraw the blood i.e raktamokshan (bloodletting) decreases the blood volume. In another example, if we give mans (meat) to the person, in same way it increases the mans I.e muscle mass of the person.

Samanya is the reason for vrudhi and vishesh for hras of the bhavpadarth quantitatively and quantitatively. But the main aim behind this siddhant is to achieve prakrut state of that bhavpadarth i.e in normal state.

III. Case study

The study was done at svnh ayurved rugnalaya, rahuri. A 63 years female patient having history of hypertension since 3 years, she's taking antihypertensive medicine regularly, but blood pressure not controlled significantly, so the patient came svnh ayurved rugnalaya for further treatment. Patient having history of habit of oily food, junk food eating, sedentary lifestyle, no exercise, poor Appetite, disturbed sleep, unsatisfactory Bowel Habit.

Past History- HTN since 3 years

Personal History-

Age/Sex – 63 years/female

Weight- 74 kg

Matital status- Married

Occupation- Housewife

Appetite- Poor

Sleep- Inadequate

Addiction- Misri

Bowel Habit- Unsatisfactory

Ashtavidh Pariksha-

Nadi	90/min
Mal	Unsatisfactory
Mutra	Prakrut
Jivha	Saam
Shabda	Spashta
Sparsh	Anushana
Druk	Prakrut
Akruti	Madhyam

On Examination

Conscious, Oriented

BP – 190/100 mm of hg

PR – 90/min

SpO₂ – 97% on RA

Place of study

SVNH Ayurved Mahavidyalaya and Rugnalaya, shrishivajinagar, Rahuri (Maharashtra)

Pre-Procedure

Patient and relatives are counseled about the procedure, written and informed consent taken, sthanik snehan and swedan given to the patient at left cubital fossa. Before procedure patient advised for light diet i.e Yavagupan. Blood pressure is measured with manual sphygmomanometer, 3 consequent reading taken with 10 min intervals. All the material gathered which is required for Siravedh eg. Scalp set, disinfectant Swab, gauz etc.

1 Reading	185/95mm of hg
2 Reading	185/100mm of hg
3 Reading	190/100 mm of hg

Procedure

Siravedh karma is done on the day on which there is neither so cold nor too hot. Patient is asked to sit on chair. Then he's tied with tourniquet 2 finger above the left cubital fossa so that the vein become tortious and easily palpable. In left cubital vein is chosen for

veinapuncture. Then part is disinfected with alcohol Swab, then with the help of scalp vein set, prick taken to left cubital vein got proper blood stream. Blood glow stops itself when all dushit rakta is removed. An average 60-70 ml of blood let out. Patient is carefully observed for any sign of complications throughout the procedure. After the procedure scalp is removed and Haridra powder is applied. Bandaging done. Above procedure is done in 3 settings. Again 3 consequent blood pressure reading taken. Patient was advised for weekly follow up.

1 Reading	180/100mm of hg
2 Reading	168/100mm of hg
3 Reading	140/90mm of hg

IV. DISCUSSION

Hypertension is the one of leading disease in the world. Patient having Hypertension has to take medicine long life. Hypertension is nothing but the pressure exerted by the blood on the wall of Artery. This will happen due to decrease in lumen of the Artery. There is so many causes of hypertension. For example obesity, smoking, high salt intake, lack of exercise, improper food habits, stress, improper sleep etc. In persistent hypertension there is hypertrophy of heart muscle with excessive accumulation of blood in heart chamber with decreased cardiac output.

According to samanya-vishesh siddhant, acharya clearly mentioned that if there is increase in dushit raktadhatu i.e vitiated blood then raktamokshan is the line of treatment. In sharirsthana, acharya sushruta in siravyadhividhi adhyay acharya given the detailed explanation regarding raktamokshan by siravedh.

In ayurveda, no acharyas explained hypertension but with parallel study we get that if there is increased volume of blood then the increased blood exert the pressure on the wall of Artery. If we withdraw the some quantity of blood by raktamokshan there is effectively decrease in blood pressure. This para-surgical procedure is gaining popularity and it is widely used by vaidyas. In above case we recorded before and after blood pressure of patient by 3 consequent reading with 10 min time interval. It shows significant decrease in blood pressure. Patient is advised for weekly follow up as after the procedure weekly blood pressure monitoring is important.

V. CONCLUSION

Looking back on this case study, the overall outcome of results to be observed. This can be evaluated by looking at how we controlled the high blood pressure. This study shows siravedh gives effective result in management of hypertension with the help of samanya-vishesh siddhant.

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