



Conceptual Study on Trividha Karma in Ayurveda

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Abstract: For a surgical or parasurgical procedure to be done successfully, it is highly intended and essential to follow all standard protocols suggested by various *acharyas* through different *samhitas*. In case of surgical branches while performing any *shastra*, *kshar* or *agni karma* it is mandatory to prepare well in advance so that there won't be any troubles in *Pradhan karma* or main operative procedures as well for better outcomes and no complications. *Acharya sushruta* was well known to this fact in that era too, so he emphasized on *Trividha karma viz Purva karma, Pradhan karma and Pashchat karma*. Here *purva karma* refers to the pre-operative preparation of patient along with collection of tools, accessories and make OT ready to operate in which main task has to be done i.e *Pradhan karma* which includes *ashtavidhashastra karma*. And *pashchat karma* includes post-operative care of patient. It is necessary to follow this *trividh karma* for better results and outcome in surgery. That is why it has got tremendous importance in surgery since ancient times.

Keywords: Purva karma, Pradhan karma, Pashchat karma, Shastra, Kshar, Agni

INTRODUCTION:

Sushrut samhita predominately comprises of all surgical branches and procedures which deals with removal of different kinds of foreign bodies i.e *shalya* from human body which might be grass, wood, stone, sand, iron, bone, hair, nail, pus, matrix of contaminated wound, foetus either dead or abnormal, description of *yantra's shastra's*, and diagnosis of *vrana* or wound^[1]. For successful outcome of any surgical or parasurgical procedures there should not be any complications, *sushruta* was well aware of this fact so he emphasized *Trividha karma* to minimize it which includes a) *Purva karma* i.e Preoperative preparations b) *Pradhan karma* i.e Operative Procedures and c) *Pashchat karma* i.e post-operative procedures^[2].

A) PURVA KARMA (PRE OPERATIVE PREPERATIONS):

In this section first of all it has been told to follow pre-operative ethics i.e *purvakarma sadvritta* by surgeon or *shastra vaidya* by diagnosing of disease properly and examining the patient thoroughly. Get all medical and surgical history of patient by *Pratyaksha*, *anumaan* and *aaptopadesh pramannas*^[3]

तस्माद् भिषक कार्ये चिकित्सुः प्राक् कार्यसमारम्भात् परिक्षया केवलं परिक्षयं परिक्ष्य कर्म समारंभेत कर्तुम् ॥
च. वि. ८ / ७९

It should be decided by *Vaidya* himself that whether to treat or not according to *saadhya-asaadhyatva* i.e prognosis of disease and avoid to those patients who are doubtful and hides information^[4]. Moreover *Vaidya* should judge his own capabilities whether he can treat this disease or not properly^[5] Here in *purva karma* it refers to preparation of patient as well as collection of all necessary instruments and related all accessories needed in surgery and also those which will be required later in *paschat karma*. And *Sushruta* explained about instruments and other necessary materials required in surgical precedures. These includes sharp and blunt instruments, caustic alkali, cautery, rod, horn, leeches, gourd, *jambavaushtha*, cotton, pieces of clothes, leaves, thread, materials of bandaging, honey, muscle fat, *ghrita*, *tail*, *dugdha*, etc. and water to mitigate thirst, ointment, decoctions i.e *kashay*, pastes, fan, cold and hot water, frying pan and other earthen vessels, bedding and seats, obedient, steady and strong muscular *paricharak* should be kept ready to assist and hold the patient during surgery^[6]. later on a auspicious day, *karan*, *nakshatra* and *muhurta*, after worshipping god of fire, bramha, and physician surgeons with curd barley, food, drinks and gems and after making offerings, precious festivity and reciting hymns of blessings, the patient should be given light diet as per need and required in that surgery and be seated facing eastward with all his movements being restrained and the surgeon facing westwards. But now a days patients have been kept nil by mouth i.e NBM, one day prior to the surgery. In ancient era it was provision of giving light diet due to some anaesthesia related differences with few exceptions as in *Arsha*, *bhagandara*, *ashmari*, *udarroga*, and *mukh roga* related surgeries^[7]. All *yantra*'s and *shastra*'s, all accessories related to surgery along with OT, surgical ward and *vranitagaar* etc should be sterilized i.e *nirjantukikaran* of all surgery related aspects should have been done to keep patient away from infections and complications created by invisible creatures i.e microorganisms^[8].

B) PRADHAN KARMA (OPERATIVE PROCEDURES):

It includes all ethics i.e *sadvritta* of operative procedures in details. *Acharya sushruta* described eight chief surgical procedures i.e *ashtavidha shastrakarma* that a surgeon should know in details and he should have done *yogya vidhi* too. The basic surgical procedures which even today being performed in any surgery by modern surgeons includes eight types of *shastra karmas* as follows. a) *Chhedan* i.e Excision b) *Bhedan* i.e Incision c) *Lekhan* i.e Scrapping d) *Vedhan* i.e Puncturing or Paracentesis e) *Eshan* i.e Probing f) *Aaharan* i.e Extraction g) *Vistravan* i.e bloodletting h) *Seevan* i.e Suturing.

a) *Chhedan karma* (Excision) : It includes excision of diseased or an abnormal part of body by using multiple *yantra shastra*'s suggested by *Acharya sushrut* like *Mandalagra*, *kharpatra*, *mudrika*, *vruddhipatra*, etc. following are some diseases can be treated by excision or *chhedan* method as *Bhagandara*, *Granthi*, *Tilkalak*, *Vranavartma*, *Arbuda*, *arsh*, *Charmakila*, foreign bodies lodged in bones and muscles, *jatumani*, fleshy growth, enlarged uvula, necrosed ligaments, muscles and vessels, *valmika*, *shatponaka*, *adhrusha*, *mamskandi* etc.

b) *Bhedana karma* (Incision) : This implises when there is a need to open a cavity or tapping a cavity to drain out the pus formed in it, *rakta* and to remove the calculus etc. by using *vruddhipatra*, *nakhashastra*, *mudrika*, *utpalpatrak*, and *ardhdhaar*. Chief indications are the diseases like all abcesses except those caused by *sannipataj doshas*, three types of *granthi* (cysts), three types of *visarp* (erysepalis), *vruddhi* (hydrocele and hernias), *vidarika*, carbuncles, inflammatory swellings, breast diseases, *kumbhika*, sinuses.

c) *Lekhan karma* (Scrapping) : *Lekhan yogya vyadhis* are scrapped by using *Mandalagra*, *vruddhipatra*, *kharapatra*, etc. diseases includes are four types of *Rohini*, *arsha* i.e haemorrhoids, patches on skin, keloids, and hypertrophied muscles etc.

d) *Vedhana karma* (Puncturing or Paracentesis) : It is done by *kutharika*, *eshani*, *aara*, and needle in the puncturable diseases like diseased blood vessels, hydrocele and ascites etc.

- e) *Eshana karma* (Probing): It is done by using *aishani* to trap the tracks of sinuses, fistulas, and wounds with oblique course or extensions and foreign bodies are subjected for probing.
- f) *Aharana karma* (Extraction): It includes extraction of calculus, foreign bodies, confounded foetus which is in abnormal position, faces accumulated in rectum using *anguli*, *nakha*, badish etc.
- g) *Vistravan karma* (Bloodletting): Bloodletting and drainage of pus like act done by needle, *kushyantra*, *trikurchak*, *shararimukh*, *antarmukh*. Draining should be done in five types of abscesses, leprosy, localized inflammatory swellings, diseases of pinna, elephantiasis, tumors, three types of cysts.
- h) *Seevan karma* (Suturing): It is done by the help of various sized and shaped needles and threads to join the incised fresh wounds and to achieve haemostasis too. Suturing should not be done in wounds affected by caustics, burn or poison, carrying air, and infected blood or foreign bodies inside. In such cases first of all wounds should be cleaned by removing dusts, hairs, nails, bone pieces from it to avoid suppuration and pain. Suturing types are i) *Vellitak*, ii) *Goparnika*, iii) *Tunnasevani*, iv) *Rujugranthi*.

Blood loss is often a common happening during surgeries, so haemostasis i.e raktastambhan should be achieved by proper ways suggested by *Acharya sushruta* as i) *sandhaan*, ii) *skandan*, iii) *pachan*, iv) *dahan*^[9]

चतुर्विधं यदेतद्धि रुधिरस्य निवारणम् ।

सन्धानं स्कन्दनं चैव पाचनं दहनं तथा ॥ सु. सु १४ / ३९.

Marmaaghaat i.e shock should be corrected first by balancing fluid chart and *marmapariksha*.

C) PASHCHAT KARMA (POST OPERATIVE MEASURES):

As soon as surgery gets over the patient should be assured by sprinkling cold water on his mouth and feet. The wound should be irrigated and pressed slowly all around, it should be massaged and washed with wound healing decoctions, then decoction remained in wound should be wiped out by using a cotton swab and a wick containing thick pastes of sesame, honey and *ghrita*, neither too unctuous nor too rough, be inserted therein. After covering with paste of wound healing and antiseptic drugs, then putting a piece of gauze it should be bandaged as per *bandhvidhi*. *Dhoopan* drugs are used to disinfect the wound and less the pain by *guggulu*, *agaru*, *vacha*, *sarjras*, *saindhava*, *nimbpatra* etc^[10]. patient should be kept in post-operative care unit i.e *vranitagaar* for 10 days. Moreover it includes *pathyapathya palan*, *aaharvihaar palan* and wound care by patient, and follow the advices given by *Vaidya* to patient. *Vranitaggat* plays an important role in post-operative phase of patient. It should be pleasant, on well and safe ground, well furnished, well fumigated, compiled with all instruments so that any complications can be handled uninterruptedly. Patients should be given *bruhan chikitsa* to achieve *bala* again by saving his *jatharagni*.

DISCUSSION:

Any surgical or parasurgical procedure can't get successful if not followed by *Trividha karma* properly. *Purva karma* includes all basic and necessary preparations required to perform any procedure conveniently with no troubles at all and with more superiority is expected in operative *Pradhan karma* if *purva karma* is done well. Similarly *pashchat karma* is very important in which proper *pathyapathya palan*, *aahar vihaar palan*, proper wound care will give credit to pre-operative and operative plannings.

CONCLUSION:

From this we can understand how our ancient *acharyas* had deep knowledge and a broad vision of surgical protocols in that era too which is not only compete this modern protocols but also gives some natural, herbal, economical, less hazardous ways to follow in these phases. All these procedures are very essential and mandatory to follow for better results and successful outcome of a surgery.

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