

EFFECT OF SUCHIVEDHAN KARMA ON JANU SANDHI SHOOL WITH RESPECT TO PHYSIOLOGY OF PAIN: A CASE STUDY

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ABSTRACT:

Suchivedhana, known as Viddhakarma in classical Ayurvedic texts like Sushruta Samhita, is a prominent treatment method for pain management. It is increasingly popular as an alternative therapy for musculoskeletal disorders such as low backache, knee joint pain, and cervical pain. Pain is a prevalent symptom in musculoskeletal disorders, and the demand for effective pain management strategies is rising to enhance cost-effectiveness. In Ayurvedic literature, vatadushti leading to ruja (pain) and shoola (discomfort) can be effectively addressed through Suchivedhana (Viddhakarma), a parasurgical procedure aimed at alleviating vata and kapha doshas. Suchivedhana is believed to alleviate vatavarodha (obstruction of vata) and thereby reduce pain. Due to its efficacy and cost-effectiveness, Suchivedhana is recommended for various musculoskeletal disorders. Ayurvedic Viddhakarma involves the use of needles on tender points and utilizes knowledge of pressure points (marmasthana) to target specific areas of pain. This case study focuses on patients with Janu Sandhi Shula (knee joint pain) who underwent Suchivedhana therapy, achieving satisfactory pain relief.

KEYWORDS: Suchivedhana, Viddhakarma, Knee Joint Pain, Vata dushti.

INTRODUCTION:

Ayurveda, known as "The Science of Life," is a comprehensive system that addresses both the physiological and pathological aspects of the human body. It is considered an Upaveda of Atharvaveda, one of the four Vedas that encompass various disciplines including health, astrology, spiritual practices, poetry, and ethical living. Pain is universally recognized as a signal of underlying disease, prompting individuals to seek medical attention. It encompasses physical sensations that can also be influenced by emotional or spiritual distress.

In modern medicine, pain relief often involves the use of drugs or injections such as NSAIDs and steroids. While these medications provide temporary relief, they can adversely affect organs like the liver and kidneys (Raktavaha and Mutravahasrotas). They may cause hyperacidity and peptic ulceration by irritating the gastric mucosa. Moreover, managing pain typically requires ongoing exercises and physiotherapy visits, which can be both time-consuming and costly.

Ayurvedic texts describe pain, referred to as Shool or Vedna, as closely associated with vitiated Vata humor localized in areas like bones (Asthi), joints (Sandhi), waist (Kati), and back (Prushtha), causing discomfort. Vata vitiation leads to dryness in joint ligaments and constriction of Snayu (tendons), resulting in joint pain.

Ayurveda offers various treatments for different types of pain, such as shoulder pain and knee joint pain, which are simple, safe, effective, and economically feasible for patients. These treatments include methods like Siravedha (venesection), Agnikarma (therapeutic heat application), Basti (medicated enema), Snehana (oleation therapy), Swedana (sudation therapy), and oral medications. Addressing pain associated with various disorders is integral to Ayurvedic treatment protocols, aiming to improve patient outcomes through holistic care.

REVIEW OF LITERATURE

In the Sushruta Samhita, joints (Sandhi) are classified into two types: Chal (movable) and Achal (immovable). Chal Sandhi includes joints with a wide range of movements such as the joints of the limbs (Shakhas), temporomandibular joint (Hanu), and vertebral joints (Kati Sandhi), while all other joints are categorized as Achal (immovable). Sushruta Samhita further describes eight types of joints: Kor, Samudga, Tunnasevni, Mandala, Ulukhala, Pratar, Vayastund, and Shankhavarta.

DOSHA PRESENT IN SANDHI:

Shleshaka Kapha, present in the joints, acts as a lubricant that aids in the protection and movement of the Sandhi.

PHYSIOLOGY OF PAIN:

Pain is a subjective sensation that occurs when tissues are damaged, prompting the individual to remove the pain stimulus. It serves as a protective mechanism of the body. Receptor organs for pain are distributed throughout the body, and the neuroanatomical basis of pain involves specialized pathways identified within the spinal nerve roots and medullary pathways dedicated to pain perception. These pathways relay through the reticular formation of the brainstem, leading to the perception of pain at cortical and subcortical levels.

Pain stimuli can be thermal, chemical, or electrical, often accompanied by emotional elements such as fear, discomfort, and autonomic changes.

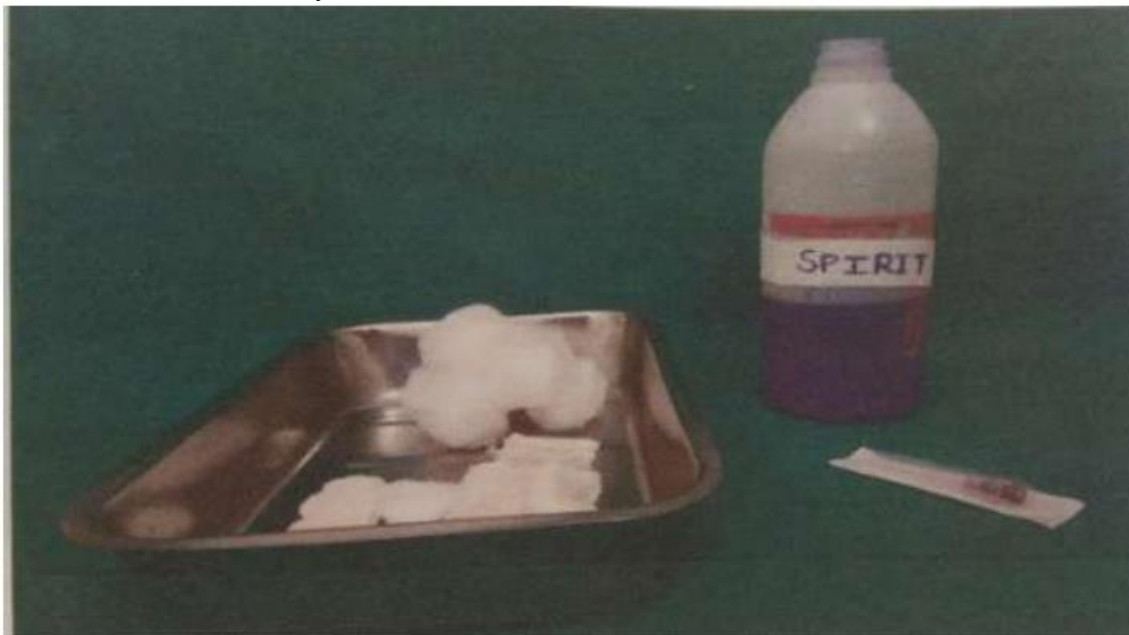
Types of Pain:

1. **Superficial/Cutaneous Pain:** This type results from structural damage, with relatively accurate localization. It includes:
 - Epicritic pain: Low threshold, requiring lighter stimuli.
 - Protopathic pain: High threshold, necessitating stronger stimuli.
2. **Deep Pain:** Originating from deep structures like muscles, bones, joints, and ligaments, deep pain may be due to ischemia or injury. Localization is more precise when the origin site is closer to the surface.
3. **Visceral Pain:** Compared to somatic pain, visceral pain is diffuse, less easily localized, and often referred. It may be accompanied by fluctuations in blood pressure (BP), muscular rigidity, and hyperesthesia.
4. **Referred Pain:** Deep pain, whether visceral or somatic, can be misinterpreted as originating from a different part of the body than the actual site of origin. Examples include cardiac pain referred to the left shoulder or diaphragmatic pain referred to the shoulder.

DISPOSABLE NEEDLES:



Duration of treatment- 3 days:



MATERIALS USED IN SUCHIVEDHAN

OBSERVATION AND RESULTS

The study involved 10 patients of varying sexes aged between 30 and 60 years. These patients were randomly allocated into two groups as follows:

Figure: Procedure and number of patients in each group

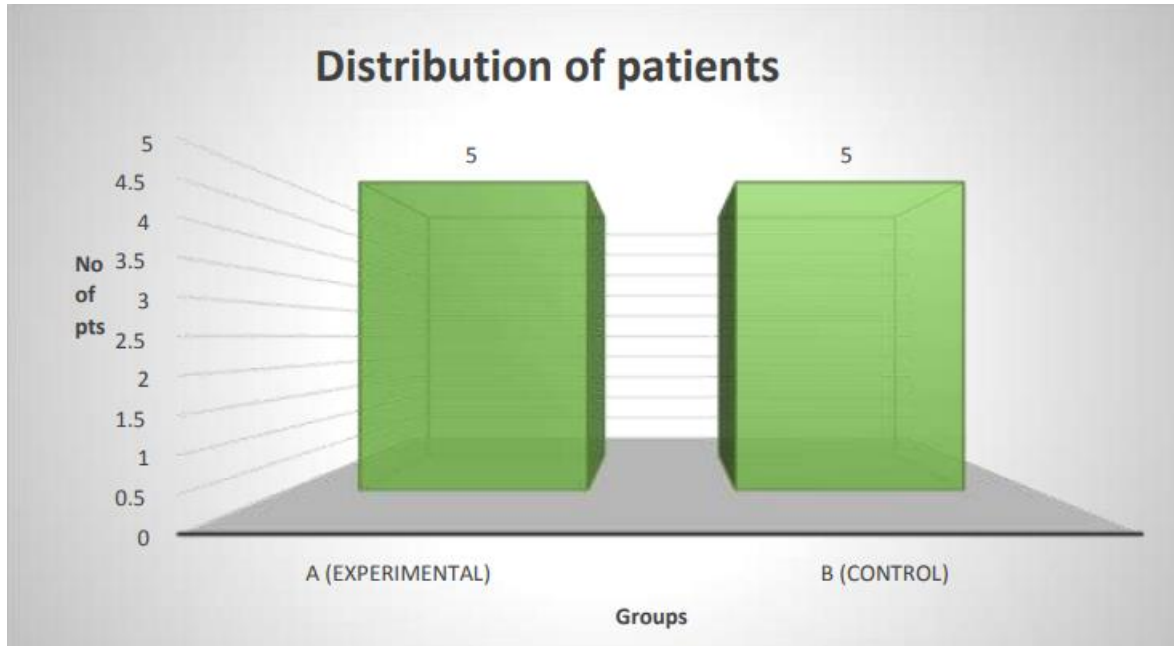


Table: Procedure and number of patients in each group

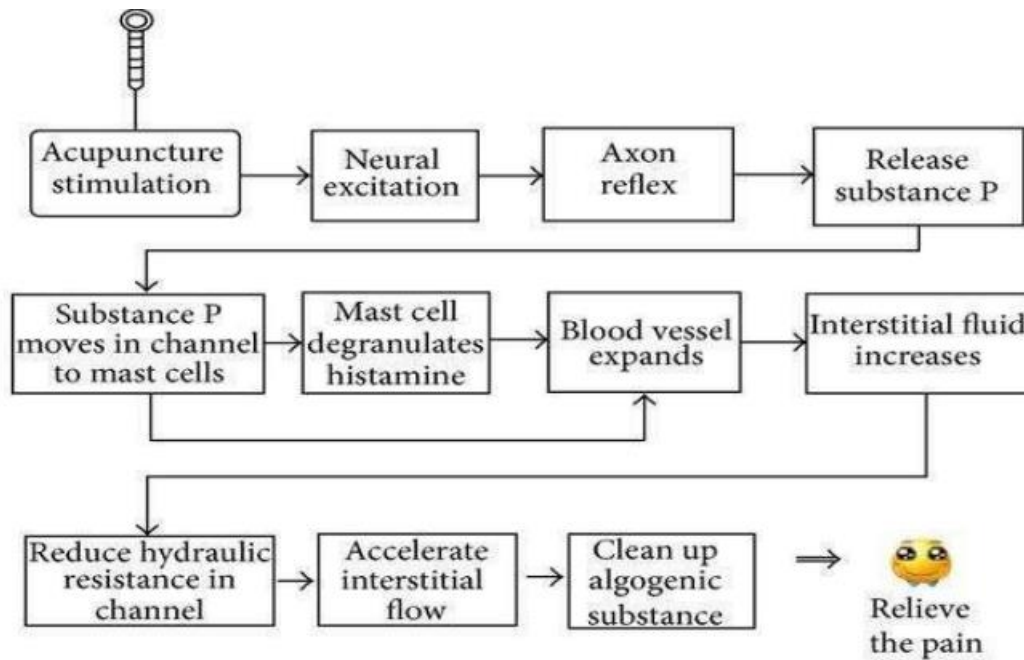
Group	No. of patients	Procedure
A (Experimental)	5	SnehanSwedan and Suchivedhan
B (Control)	5	SnehanSwedan

The discussion is a crucial aspect of any study, providing new perspectives that enhance understanding. The present study, titled "Effect of Suchivedhan Karma in Janu Sandhi Shool W.S.R. To physiology of pain," involved 10 patients divided into two groups: Group A (experimental) treated with SnehanaSwedana and Suchivedhana, and Group B (control) treated with SnehanaSwedana alone.

Pain Relief: The visual analogue scale showed significant improvement in pain for the experimental group following treatment, whereas the control group, treated only with SnehanaSwedana, did not show significant improvement. Suchivedhana, combined with SnehanaSwedana, significantly reduced pain by blocking nociceptor pathways.

Ayurvedic Perspective: In Ayurveda, Vedhan and Visravan are described as distinct procedures. Suchivedhan, akin to Siravedha, involves the expulsion of vitiated doshas through minor blood oozing, alleviating Vata-related pain by releasing doshas from the joints.

Modern Insights: Modern science suggests that pain, a protective mechanism, involves receptors like free nerve endings responding to mechanical, thermal, and chemical stimuli. Pain signals are transmitted via fast and slow pathways to the CNS. The analgesia system, mediated by neurotransmitters like enkephalins and serotonin, inhibits pain pathways, thereby suppressing pain signals effectively.



CONCLUSION

The following conclusions can be drawn from the study:

- Ayurveda, often perceived as slow in pain management, includes effective instant pain relief methods such as Suchivedhan Karma.
- Patients in the experimental group responded favorably to Suchivedhan Karma treatment.
- Snehana Swedana alone did not provide significant relief for severe pain and restricted joint movements within 3 days of treatment, contrasting with the instant relief observed with Suchivedhan Karma.
- Suchivedhan Karma induces chemical stimulation leading to the production of endogenous morphine, which blocks pain pathways by inhibiting nociceptors.
- Suchivedhan Karma demonstrates rapid action, with significant pain relief often observed within one to two days of treatment, highlighting Ayurveda's capability for fast-acting procedures.
- Suchivedhan Karma is cost-effective and offers immediate relief compared to conventional therapies.
- By utilizing Suchivedhan Karma, the potential side effects associated with prolonged use of NSAIDs and steroids can be avoided.
- Further research with larger sample sizes and extended follow-up periods is essential to validate the efficacy of Suchivedhan Karma comprehensively in pain management.

REFERENCES

1. Paul AJ Hardy. 1997 London, chronic pain management: The Essentials p. 1
2. Davidson's principles and practice of medicine, edited by Nicholas A. Boon, Nicki R. Colledge, Brian R. Walker, John A. A. Hunter, Elsevier Ltd., 20th edition 2006, p. 1080
3. Kashinath shastri and Dr. Gorakhnathchaturvedi, Charaksamhita, Volume 2, Varanasi; Choukhambabharti academy; 2012 (Chikitsa 28/59) p. 304
4. Dr. Brahmanandtripathi. Sharangdhara samhita Varanasi; ChoukhambaSurbharti Prakashan,2013 (5/41), p. 42
5. AmbikaDutt Shastri. Sushrut Samhita, Volume 1, Varanasi; Choukhamba Sanskrit sansthan; 2011 (Sharir 8/23), p. 91

6. AmbikaDutt Shastri. Sushrut Samhita, Volume 1, Varanasi; Choukhamba Sanskrit sansthan; 2011 (Sharir 8/7), p. 85
7. Dr. R. B. Gogate. Viddha and Agnikarma Chikitsa, third edition, 2017, Pune; GogatePadmanabhRamchandra 102, Ramprasad chambers; p. 12
8. AmbikaDutt Shastri. Sushrut Samhita, Volume 1, Varanasi; Choukhamba Sanskrit sansthan; 2011 (Sharir 8/7), p. 87
9. AmbikaDutt Shastri. Sushrut Samhita, Volume 1, Varanasi; Choukhamba Sanskrit sansthan; 2011 (Sharir 5/26), p. 60
10. AmbikaDutt Shastri. Sushrut Samhita, Volume 1, Varanasi; Choukhamba Sanskrit sansthan; 2011 (Sharir 5/26), p. 60
11. AmbikaDutt Shastri. Sushrut Samhita, Volume 1, Varanasi; Choukhamba Sanskrit sansthan; 2011 (Sharir 5/31), p. 61