IJMPR 2024, 8(9), 60-62

International Journal of Modern Pharmaceutical Research

www.ijmpronline.com

ISSN: 2319-5878 IJMPR Review Article

SJIF Impact Factor: 6.669

ROLE OF AGNIKARMA IN PAIN MANAGEMENT: A REVIEW ARTICLE

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Article Received on: 15/07/2024 Article Revised on: 05/08/2024 Article Accepted on: 25/08/2024



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ABSTRACT

Pain has consistently been regarded as a troubling sensation, encompassing both unpleasant physical and emotional experiences. The aspiration for a life devoid of pain is a universal desire, presenting a significant challenge for medical professionals today in their quest for effective pain management solutions. Contemporary medicine offers a range of analgesic medications that are highly effective for short-term relief; however, prolonged use often leads to a variety of adverse effects. Therefore, it is imperative to explore methods of alleviating pain that minimize patient suffering. Acharya Sushruta is known as the father of Surgery has described various surgical as well as para surgical procedures. Agnikarma is one of the para surgical procedures described. Agni-Karma that is agni is been used for the karma. In Agnikarma therapeutic burning is done with special instruments like shalakas etc. In Sushruta samhita agnikarma treated diseases has special place as it has never shown any recurrence making it more better measure as compared to other measures. In modern science Agnikarma is used under the name of cauterization or therapeutics burn.

KEYWORDS: Agnikarma is one of the para surgical procedures described.

INTRODUCTION

Agnikarma is one of the para surgical procedures. In Agnikarma therapeutic burning is done with special instruments like shalakas etc Agnikarma effectively disrupts the disease's pathology while simultaneously alleviating pain. Agnikarma is particularly important for pain relief in musculoskeletal conditions such as Parshnishool (calcaneal spur, plantar fasciitis), Sandhigatavata, and Avbahuka (frozen shoulder), among others. Furthermore, the principles of Agnikarma have been referenced in relation to conditions such as Arsha, Arbuda, Bhagandar, Sira, Snayu, Asthi, Sandhigata Vata Vikara, and Gridhasi. This technique represents a contemporary interpretation of the traditional cauterization procedure.

Agnikarma are used by various methods that is for skin diseases pipalli (Piper longum), aja shakrit (Faeces of goat), godanta(teeth of cow), shara(arrow), shalaka(probes), varti (wicks), suryakanta (variety of stone) etc. likewise for diseases of muscles loha(iron), suvarna(gold), tamra(copper) and kamsya(bronze) are used. For bones, ligaments, tendons, vessels etc madhu(honey), guda(jaggery), vasa(fat), ghrita(ghee), taila(oil), madhucchishta(beewax) are used.

Dahana Vishesha^[1]

The Akriti or shape formed by red hot Shalaka over the site while performing Agnikarma is known as Dahana Vishesha.

Acharya Sushruta mentioned four Dahana Prakara or Vishesha which are as follows.

- 1. Valaya: Circular shape
- 2. Bindu: Dotted shape, Acharya Dalhana explained that Shalaka should be of pointed shape.
- 3. Vilekha: Parallel line
- 4. Pratisarana: It means rubbing at site by heated Shalaka and without making any specific shape.

Site of application of Agnikarma

Sthanik: (local site) as in Vicharchika, Kadara, Arsha, **Sthanantariya:** (distal to site of disease): As in Visuchika, Apache, Gridhasi, etc.

Dhatugata Samayaga Dagdha Lakshana^[2]

- * Twaka Dagdha Lakshan: Shabdapradurbhavo (production of sound), Durgandhta (bad odour), Twak sankocha (contraction of skin).
- Mansa Dagdha lakshana: Kapotvranata (colour like pigeon ashy-grey), Alpa Swayathu and Vedna (mild swelling and pain), Shushka Sankuchit Vranata (dry contracted wound).
- * Sira-Snayu Dagdha Lakshana: Krishna-Unnata Vrana (blackish and elevated), Srava- Sannirodha (stoppage of discharge).
- * Asthi-Sandhi Dagdha Lakshana: Arunata (dark red colouration), Rukshata (dryness), Karkashata (roughness), Sthirata (stability)

Agnikarma Kala^[3]

According to Acharya Sushruta, Agnikarma can be done in all Ritu except for Grishma Ritu and Sharad Ritu (autumn season) as in both the Ritu Pitta gets aggravated and Agnikarma also does the same which further leads to production of various Pitta Dosharelated disorders. Only in emergency condition. Agnikarma can be performed in all Ritu.

Indications^[4]

Many diseases have been explained in the text where Agnikarma is indicated as a therapeutic measure. Few are Bhagandar, Charmakeel, Tilkalak, Granthi, Arbuda, Apachi Antarvidradhi, Shlipada, Nadivrana, etc. Also if there is intense pain in Twak, Mansa, Sira, Snayu, Sandhi, and Asthi, or there iscontinuous bleeding condition then Agnikarma shouldbe performed.

$Contraindications^{[5]} \\$

Agnikarma is not recommended for PittaPrakriti people, lean and thin, coward, pregnancy, internal bleeding, bleeding disorders, perforation, retained foreign body, etc.

Pre-operative Measures^[6]

Thorough evaluations must be conducted prior to the initiation of Agnikarma. It is essential to provide comprehensive patient counseling beforehand to ensure clarity and understanding. All necessary instruments for the procedure should be prepared in advance. Patients are advised to consume Picchila Anna prior to the procedure, with the exception of those suffering from conditions such as obstructed labor, urolithiasis, fistula, piles, abdominal diseases, and oral cavity diseases, who should remain fasting.

Operative Measures

Proper examination and cleaning of the site should be done. Site should be marked with a pen or marker and then Agnikarma should be performed. Agnikarma is done until the Samyak Dagdha Lakshana appears.

Post-operative Measures^[7]

Madhu and Ghrita should be applied to the Samyak Dagdha wound after procedure. According to Acharya Sushruta Madhuuchistha ghrita is considered as the best Ropak Ghrita in all kinds of Agnidagdha Vrana so this should be applied to the patient and proper diet should be taken.

Probable mode of action

The conditions for which Agnikarma is recommended arise from the imbalance of Vata and Kapha, making it an effective treatment for soothing these Doshas.

Additionally, the qualities of Agni—Ushana, Sukshama, Teekshana, and Ashukari—contribute to the pacification of Vata and Kapha Doshas. In Ayurveda, the principle of Dhatwagni is acknowledged, wherein each Dhatu has its unique Dhatwagni. When this Agni is diminished, the

onset of diseases occurs, and in such instances, Agnikarma proves to be highly effective. The application of external heat at the affected area using a red-hot Shalaka enhances the Dhatwagni, facilitating the digestion of the aggravated Doshas and thereby promoting recovery from the ailment.

Application of Agni or local heat increases the local temperature which enhances the perfusion and does efficient delivery of oxygen to the tissues. Because of the better blood perfusion ischemia and degeneration related tissue injury gets healed. There is clearance of local inflammatory mediators and so inflammation is resolved and finally pain is reduced. Agnikarma also stimulates DPI (descending pain inhibiting mechanism) which further stimulates CNS. After this there is release of endogenous opioids in proopiomelanocortin (POMC) cells in the arcuate nucleus and in the brain stem and thus reduction of pain occurs.

The probable mode of action of Agnikarma can also be explained through the gate control theory of pain. This theory explains that non-painful input closes the nerve gates to painful input which prevents pain sensation from travelling to the CNS. This theory explains how non-painful sensations can override and reduce painful sensations. The local heat act as touch stimulus which increases large fiber activity and it has inhibitory effect on pain signals. [8]

According to Vant Hoff's principle the basal metabolism of the body increases by certain percentage for every 1 degree rise in body temperature. Rise in temperature induces relaxation of muscles and hence muscle spasm with inflammation and pain gets reduced. Muscle relaxes most readily when tissues are warm which in turn reduces the spasm, inflammation and pain. [9]

DISCUSSIONS

Agnikarma is a notable parasurgical procedure that demonstrates remarkable efficacy in pain management while also addressing the underlying disease. In the context of Ayurveda, "Ruja," or musculoskeletal pain, is attributed to an imbalance in the Vata Dosha. Numerous painful conditions, such as Gridhasi, Avbahuka, Sandhivata, and Manyastambh, involve the disturbance of both Vata and Kapha Doshas, leading to the manifestation of Ruja. Agnikarma serves as a solution to these painful ailments, functioning through its properties of Ushna, Tikshna, Sukshma, Laghu, Vyavayi, and Vikasi. These characteristics effectively counteract the imbalances of Vata and Kapha Doshas, resulting in relief from pain and stiffness at the affected site.

CONCLUSIONS

The practice of Agnikarma, along with its applications, is detailed in Ayurveda and has been utilized by surgeons since ancient times. In contemporary medical science, this technique has evolved in terms of methodology and tools, yet it remains true to its foundational principles,

similar to how cauterization is employed to control significant bleeding, particularly during amputations. The Agnikarma procedure is straightforward, costeffective, and does not typically necessitate hospitalization. It yields remarkable outcomes for various conditions, particularly in pain management, when conducted under the supervision of experienced practitioners.

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