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CONCEPT OF TRIVIDHA KARMA W.S.R POORVAKARMA PRADHANKARMA AND PASHCHATKARMA IN SHALYATANTRA VYADHIS

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ABSTRACT

Ayurveda is an ancient science of life since the time of immemorial. In Ayurvedic classics, there is two types of treatment for all diseases, either with use of Aushadhi (medicines) or by use of surgery. In Ayurveda the 3 phases of Surgical procedure explained in the name of Trividha karma namely, Poorva karma or Preoperative measures, Pradhana karma or Operative procedures, Paschat karma or postoperative care. [1] Karma refers to all the procedures and also indicates the timing of the surgical operations. Every shastra karma has definite Preoperative procedure called as Poorva karma, Operative procedure called as Pradhana karma, Postoperative procedure called as Paschat karma. The word Poorva karma means a former action. The therapeutic procedure which are adopted before the commencement of Pradhana karma. Pradhana karma is the second step under Trividha karma. It refers to therapeutical or surgical procedures. Paschat karma indicated the measures taken after the therapeutical or surgical procedure. The vyadhis which are treated using Yantra, Shastra, Kshara and Agni are known as Shalya tantra vyadhis. [2]

KEYWORDS: Ayurveda, poorvakarma, pradhankarma, paschat karma, Shalya Tantra Vyadhis,Trividha karma.

INTRODUCTION

Trividha karma is base and necessary part of all shalya tantra procedure. Trividha karma, the classification of surgical treatment as *Poorva karma* or Preoperative, Pradhana karma or Operative and Paschat karma or Postoperative which is very important principle in Ayurveda and Modern surgery explained by Sushruta in Agropaharaniya adhyaya. Agropaharaniya adhyaya is the most outstanding contribution regarding Trividha karma in the history of surgery. Agropaharaniya means preparation of patient along with the collecting all the required materials needed during any surgical procedure. A preoperative assessment is essential to gather all information, optimize co morbidities and then organize anaesthetic, surgical and postoperative care before surgery begins. Surgery cannot be made risk free, but risks must be known so that the patient can make an informed decision. Lack of preoperative assessment increases the risk assosciated with anaesthesia and surgery. Dalhana in his commentary says that in Vrana chikitsa, Langhana to virechana is considered as Poorva karma, Patana to ropana is considered as Pradhana karma and Restoration of bala, varna and agni is considered as Paschat karma.[3]

Steps of *Poorvakarma*

Sambhara sangraha; Thiti, Karana, Muhurtha & Nakshatra; Dhoopana; Shastra payana; Abhuktavata; Consent; Sanghyaharana.

1. Sambhara Sangraha, [4] Collection of materials

Yantra, Shastra, Kshara, Agni, Shalaka, Shringa, Jalouka, Alabu, Jambavoushta, Pichu, Protha, sutra, Patra, Patta. Collection of Medicines: Madhu, Grhita, Vasa, Payasa, Taila, Tarpana, Kashaya, Aalepana, Kalka, Vyajana, Sheethoshna, Udaka. Paricharaka: Should be affectionate, firm and strong.

2. Thiti, Karana, Muhurtha & Nakshatra^[5]

After collecting all the required things, one has to confirm the date by seeing *Thiti*, *karana*, *muhurtha* and *nakshatra*. Then has to get blessings from the elders and god. This is considered as auspicious.

3. Dhoopana^[6]

Acharya Sushruta has mentioned Dhoopana as a raksha vidhi for Vranitagara, Sutikagara, Kumaragara, for aatura, as a krimighna by using certain dhoopana dravyas or rakshogna dravyas like guggulu, agaru, sarjarasa, vacha, gourasarsapa. Fumigate with these

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dravyas and then mixed with salt and nimba leaves added with ghee.

4. Shastra Payana^[7]

Table 1: This is to be done to improve the tensile strength, hardness of the Shastras.

Kshara payana	Used for chedana of shara, shalya and asthi.
Udaka payana	Used for mamsa chedana and patana.
Taila payana	Used for siravyadana, snayuchedana.

5. Abhuktavata^[8]

In case of *Moodagarbha*, *Udara*, *Arshas*, *Ashmari*, *Bhagandara* and *Mukharoga* patient should be operated upon empty stomach. Earlier it is said that the patient should take light diet but now exception for the same in these conditions. Because, if the patient with full stomach may feel pain or die by inserting the instruments and also due to aggravation of *vata*. In case of *Mukharoga*, if the food is vomited due to pressure of fingers, it obstructs the surgery. *Dalhana* says, if shastra karma done after having food there may be chances of getting *hikka*, *shwasa*. So, *Sushrut*a mentioned *snigdha* and *alpa ahara* before 1/2/3/4/5 days before surgery.

6. Consent^[9]

Sushruta says that if there is any doubt between life and death of patient while performing operation then doctor should inform and take consent from patient's wellwisher or relative priorly.

7. Sanghyaharana^[10]

Sushruta mentioned that before surgical operation, the patient should have hitakara and Pathyaahara because by taking food patient doesnot faint and if intolerant to pain should be give teekshna madya which helps to overcome pain.

In Atyayika Avastha^[11]

In case of emergency, all *Poorvakarma* procedures cannot be adopted, rather than the surgery should take immediate action like fire authority.

Pradhan Karma (Main operative procedure)

This includes mainly ashtavidhashastra Karma (eight surgical procedures) and every surgeon must be familiar with these eight surgical procedures. Al-most all surgeries performed today are conducted by modern surgeons with these eight techniques of Sushruta. These ashtavidhashastra Karma are as follows-

Table 2: Ashtavidhashastra Karma (Eight surgical procedures). [12]

Sr. No.	Ashtavidhashastra Karma	Eight surgical procedures		
1.	Chhedana	Excision, Amputation or extraction.		
2.	Bhedana	Incision for opening a cavity or taping of cavity.		
3.	Vedhana	Paracentesis or puncturing.		
4.	Lekhana	Scraping.		
5.	Eshana	Probing.		
6.	Aharana	Extraction.		
7.	Vistravana	Bloodletting or drainage of pus.		
8.	Seevan	Suturing.		

- 1. Chhedana Karma (Excision, Amputation or extraction): It means abnormal or dis- eased part should be excised from the nor- mal body part with the help of mandalagra, karpatra, vrudhipatra, mudrika, utpalpatraka etc. The following are treatable by excision- fistula in ano, cyst caused by kapha, mole, margin of ulcer, tumors, hemorrhoids, wart, foreign body situated in bone and muscle, jatumani, fleshy growth, necrosed ligament, muscle and vessel, valmika, shataponaka, adhrusa, soft chancre, mamsakandi and muscular hypertrophy.
- 2. Bhedana Karma (Incision): It means incision taken for opening a cavity or taping of cavity to drain out pus, rakta, removing calculus etc. with the help of vrudhipatra, nakhgashastra, utpalpatrak etc. The following disorders are treatable by incision-abscesses except those caused by sannipata, three types of cyst, the first (three) types of erysipelas, scrotal enlargements, vidarika, carbuncles,
- inflammatory swellings, breast diseases, avamanthaka, kumbhika, two types of vrinda, puskarika, alaji, most of the minor diseases, talupupputa, dantapupputa, tundikeri, gilayu, aforesaid diseases which are suppurating, urinary bladder for extracting calculus and diseases caused by medas.
- 3. *Vedhana* (Paracentesis or Puncturing): It means puncturing or paracentesis with the help of needle, *kutharika*, *eshani*, *aara* etc.Puncturable are different types of vessels, hydrocele, ascitesetc.
- 4. *Lekhana* (Scrapping): It means scrapping with the help of *mandalagra*, *vrudhipatra*, *karapatra* etc. Those treatable by scraping are as follows –four types of *rohini*, vitiligo, *upajihvika*, *dantavaidarbha* caused by *medas*, cyst, ulcer margin, *adhijihvika*, hemorrhoids, and patches on skin, keloid and hypertrophied muscle.
- 5. Eshana (Probing): It means probing with the help of

- *eshani*. Sinuses and wounds, with oblique course and foreign body are subjected to probing.
- 6. Aharana (Extraction): It means extraction with the help of badish, dantashanku, nakha, anguli etc. The following are to be extracted- three types of sharkara, tartar of teeth, ear wax, calculus, foreign bodies, confounded foetus (in abnormal position) and faeces accumulated in rectum.
- 7. Vistravana (Bloodletting or draining of pus): It means bloodletting or draining of pus with the help of needle, trikurchak, shararimukh, aatimukh etc. Draining is to be applied in five types of abscess, leprosy, localized inflammatory swelling, diseases of pinnae, elephantiasis, poisoned blood, tumors, erysipelas, first three types of cyst and soft cancre, breast diseases, vidarika, sushira, galashaluka, kantaka, caries, pyorrhea, spongy gums, upakusha, dantapupputa, disorders of lips caused by pitta, rakta and kapha.
- 8. Seevan (Suturing): It means suturing with the help of different types of needles and threads. Sutures are applied in disorders caused in *medas* (fatty tissue), incised and well scraped lesions, fresh wounds and those situated in moving joints. Suturing should not be done in wounds affected with caustics, cauterization or poison, carrying air and having inside blood or foreign body. In such cases, the wound should be cleaned properly. If dust, hairs, nails etc. and bone pieces are not removed they may

cause severe suppuration of wound along with various types of pain. Hence theses should be cleaned.

Table 3: Types of suture. [13]

Sr. No.	Seevan types	Suture types
1.	Rhujugranthi	Interrupted suturing.
2.	Anuvellit	Continuous suturing
3.	Gofanika	Blanket or button-hole suturing.
4.	Tunnasevani	Halstead`s subcuticular suturing.

Pashchat karma (Post-operative procedure)

Means post-operative interventions, wrapping and bandaging wounds should be fumigated with drugs after the surgical procedure- aguru, white mustard, saindhava and leaves of the Neem, soaked in clarified butter. The residue of the clarified butter should be rubbed over the region of the heart and other vital parts of the patient. [34] The patient is held in the postoperative *vranitagar* ward. Vranitagar fumigation should also take place for 10 days, Twice a day. The care should be taken until the patient is discharged. Post-operative care is an important in the prognosis of the disease. Careful monitor of vitals and general condition of the patient should be under the normal values. Hospital stay varies from patient to patient and even condition to condition until complete recovery of the patient, should be under the supervision of the surgeon. [14]

Table 4: Trividha karma in Anushastra.

Sr. No.	Name	Poorvakarma	Pradhankarma	Paschatkarma
1		uninjured roughned with powdered earth and cowdung. For <i>jalaoka</i> - Preparation of jalouka by keeping in vessel containingturmeric powder and mustard mixedwith water for about one muburtha Jalouka	After this <i>jalouka</i> should be applied tothe disease spot, there it should be covered with smooth, white and moistened cotton swab; in case it doesnot suck the blood a drop of milkor blood should be put, if then also it is unable to suck another	If at the biting site, needling pain and itching appear it indicates that it is sucking pure bloodand then it should be removed. For patient- ointment should apply with <i>ghee</i> washed 100 times or put cotton swabsoaked therewith bitten part should be rubbed with honey, sprinkled with cold water or bandaged astringent, sweet, unctuous and cold paste should be apply For <i>jalouka</i> - it make to vomate
2.	Pratisarneeya ksharakarma ^[16]	free from wind and sun while all the required materials should be arranged. Then after locating the spot, it should be rubbed / avagrushya in	be rubbed / avagrushya in pittadushti, Scraping / avalikhya in vatadushti, Scarified / prachayitva in kaphadushti and caustic	clean with group of sour dravya Amla ras parisheka. Sesamum and madhuka and gheelepa and bahya- abhyantar shitopachar

	Scarified /prachayitva in kaphadushti.	
3. Agnikarma ^[17]	In all the diseases and seasons, <i>Agni karma</i> should be performed after having <i>picchila anna</i> . Surgeon should perform <i>agni karma</i> after considering well regarding the shapeand size of the lesion, vital spots and strength of the patient, disease andseason. Burn area sho protected for he site for specific period of time burn	moisture. adhu and

Table 5: Poorva Karma, Pradhan karma, Paschat karma in shalya tantra vyadhi.

Sr.No.	Vyadhi	Poorvakarma	Pradhan karma	Paschat karma
1.	Vrana ^[18]	Poorva karma in the	Procedures from lekhana to	Procedures from sandhana to Raksha karma as paschat karma in context of vrana chikitsa
2.	Arsha ^[19]	The patient with <i>Arshas</i> who is strongshould undergo <i>Snehana</i> , <i>Swedana</i> and then should give <i>snigdha</i> , <i>ushna</i> , <i>alpa ahara</i> to pacify aggravated <i>vata</i> . [17] Patient should be take in lithotomy position	Using tal yantra kshara applied over pile mass.it	Ghee and yashtimdhuare applied to the site. Avgaha sweda. Patient shifted to vranitagar. Patient has to follow Diet andregimen chart.
3.	Bhagandara ^[20]	land Swedana the nationt	Track is laid open using instruments (udhharet sastrena) or alternatively kshara can be use toremove	Operated area should.
4.	Ashmari ^[21]	The nations who underwent	Barley grain incisiosn	Patient should be given tub bath and sedated, thus bladderdoes not get filled up with blood. The decoction of milky

Trees should be administered through urerthral douche it flushes out the calculus immediately along with blood collected in bladder. Warm gruel with Swedana then after taking mixed ghee for 3 days, milk food, offerings, auspicious with plentyof jaggery 10 rites and recitation of days, after 10 days he should mantras should be be served withmeat of performed, with acquatic animals and then arrangement of all required again for days he should be equipments and thepatient sudated carefully with senha should be assured.consent and liquid sudation. should be taken Wound should be washed with decoction of milky tree, paste of *rodhra*, madhuka,manjishta and *prapaundrika*, haridra oil and ghee.

DISCUSSION

For every procedure, *trividha karma* is mandatory for the successful completion of *Procedure*.

Sushruta in Agropaharaniya as explained collection of materials required before, during and after surgery which is essential for successful surgical procedure and in the management of complications.

In Atyayika avastha, Poorvakarma should be done swiftly as any delay will detoriate the condition of the patient.

The preoperative procedure, main operative procedure, post-operative procedure mentioned in contemporary science is similar to the *trividha karma* explained in *Samhita*.

CONCLUSION

Poorva karma, Pradhan karma, paschat karma can be corelated with preoperative, main operative, post-operative measures.

Trividha karma is very much essential for every surgical intervention.

Final result of surgical case mainly depends upon proper preoperative procedure, main operative procedure and post management; and also depends on psychological and physical preparation of patient.

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