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CONCEPT OF TRIVIDHA KARMA W.S.R TO POORVA KARMA IN SHALYA TANTRA VYADHIS

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ABSTRACT

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: Trividha karma, Poorva karma, Preoperative measures, Shalya Tantra Vyadhis.

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]

Sequence 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,

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sarjarasa, vacha, gourasarsapa. Fumigate with these dravyas and then mixed with salt and nimba leaves added with ghee.

4. Shastra Payana^[7]

This is to be done to improve the tensile strength, hardness of the *Shastras*.

3 materials are used

Kshara payana – Used for chedana of shara, shalya and asthi.				
<i>Udaka payana</i> – 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, Sushruta 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 well-wisher or relative priorly.

7. Sanghyaharana^[10]

Sushruta mentioned that before surgical operation, the patient should have hitakara and Pathya ahara 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.

Steps Under Preoperative Care

- Preoperative procedure
- Preoperative assessment
- Preoperative laboratory investigations
- Preoperative treatment
- Preparation of Operation Theatre
- Consent
- Preparation of patient
- Administration of Anaesthesia
- Preparation of skin

Poorvakarma In Specific Shastra Karma

SL. NO	Shastra karma	indication	Poorvakarma
1.	Chedana	Arbuda	Vatika – Upanaha Paittika – Swedana, Upanaha Kaphaja – Vamana, Raktamokshana Medaja - Swedana
2.	Bhedana	Bahya vidradhi	Vatika – lepa, Tarpana, Swedana Paittika – Jaloukavacharana Kaphaja - Swedana
3.	Lekhana	Arshas	If there is <i>Vata dushti</i> , <i>Lekhana</i> is to be done
4.	Vyadhana	Dakodhara	Snehana Swedana
5.	Eshana	Nadivrana	Upanaha
6.	Aaharana	Ashmari	Snehana, Swedana Eshana
7.	Visravana	Visarpa	Lepa
8.	Seevana	Sadyovrana	Vishodana of Vrana Lekhana

Poorvakarma In Sashastra Raktamokshana^[12]

- 1. *Snehana Sthanika abhyanga* is done with suitable *taila* to the part where *siravyadha* is to be done.
- 2. Swedana Nadi sweda is given after abhyanga
- 3. A liquid diet of yavagu has to be given
- 4. Patient is made to sit comfortably
- 5. Yantrana to be done 2 angula above the site of siravyadha.

Poorva Karma In Anushastra Karma

1. Jaloukavacharana^[13]

Poorvakarma for patients	Poorvakarma for jalouka	
The patient having a disorder to be treated with <i>jalouka</i> should be asked to sit or lie down and the part if not injured then should be roughened with the powder of <i>mrut</i> , <i>gomaya</i> .	Preparation of <i>jalouka</i> by keeping in vessel containing turmeric powder and mustard mixed with water for about one <i>muhurtha</i> . <i>Jalouka</i> will be activated by this. After this <i>jalouka</i> should be applied to the disease spot, there it should be covered with smooth, white and moistened cotton swab; in case it doesnot suck the blood a drop of milk or blood should be put, if then also it is unable to suck another <i>jalouka</i> should be applied.	

2. Pratisaraneeya Kshara Karma^[14]

The patient to be treated by *kshara* should be made to sit in a spacious place free from wind and sun while all the required materials should be arranged. Then after locating the spot, it should be rubbed / *avagrushya* in *pittadushti*, Scraping / *avalikhya* in *vatadushti*, Scarified / *prachayitva* in *kaphadushti*.

3. Agnikarma^[15]

In all the diseases and seasons, *Agni karma* should be performed after having *picchila anna*. Surgeon should perform *agni karma* after considering well regarding the shape and size of the lesion, vital spots and strength of the patient, disease and season.

Poorvakarma In Shalya Tantra Vyadhis

1. Vrana

Dalhana opines that,

Langhanadi virekantam as Poorva karma in the context of Vrana chikitsa.

Ekadasha upakramas are

 Apatarpana, Alepa, Parisheka, Abhyanga, Sweda, Vimlapana, Upanaha, Pachana, Visravana, Sneha, Vamana, Virechana.^[16]

5. *Granthi*^[20]

2. Arshas

The patient with *Arshas* who is strong should undergo *Snehana*, *Swedana* and then should give *snigdha*, *ushna*, *alpa ahara* to pacify aggravated *vata*. [17]

3. Bhagandara

Here, if the abscess is not suppurated, it should be treated with *Ekadasha Upakramas*. If abscess suppurated, after *Snehana* and *Swedana* the patient should take position on examination table and should examine whether the fistula has internal opening or external opening by inserting probe. [18]

4. Ashmari

The patient who underwent *Vamana*, *virechana* and reduced weight should undergo *Snehana* and *Swedana* then after taking food, offerings, auspicious rites and recitation of *mantras* should be performed, with arrangement of all required equipments and the patient should be assured.^[19]

SL. NO.	TYPES OF GRANTHI	<i>POORVAKARMA</i>
1.	Vataja Granthi	Swedana Upanaha Lepa
2.	Pittaja Granthi	Jaloukavacharana
3.	Kaphaja Granthi	Swedana Vimlapana
4.	Medaja Granthi	Swedana

DISCUSSION

- For every Pradhana karma, Poorvakarma is mandatory for the successful completion of Pradhana karma.
- 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.
- In few conditions *shastra karma* is considered as *Poorvakarma* for other *shastra karma*.
- The preoperative care mentioned in contemporary science is similar to the *Poorva karma* explained in Samhita.

CONCLUSION

- Poorvakarma can be corelated with preoperative measures.
- *Poorvakarma* is very much essential for every surgical intervention.
- Final result of surgical case mainly depends upon proper preoperative procedure and management; and also depends on psychological and physical preparation of patient.

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