

THE ROLE OF SIRAVEDH IN THE MANAGEMENT OF HYPERTENSION - A CASE STUDY

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ABSTRACT

Hypertension is an important public health challenge in both economically developing and developed countries. As per WHO report of Prevention and Control for Cardio vascular diseases, 2001-2002, it is estimated that 600 million people are affected worldwide with Hypertension. Persistent Hypertension is one of the risk factors for strokes, many heart diseases and is a leading cause for chronic renal failure. Hypertension is also called as *Uchcha Raktachapa* which is neither denoted in *Samhita* nor in any *Samgraha Granthas*, but it is stated that every disease cannot be given nomenclature every time. *Sira vedhan* is *chikitsaardh* (half of the treatment), it most efficient method of *rakt mokshan* (Bloodletting). *Acharya shushrut* has mentioned many diseases and their treatment by *sira vedhan*. The given known case of Hypertension after performing a *siravedh* (Bloodletting) a highly significant result has been found with range of blood pressure measurement.

Keywords: Hypertension, *Uchcha Raktachapa*, *Siravedh*, *Raktamokshana*, etc.

INTRODUCTION

High blood pressure is called the "silent killer" because it often has no warning signs or symptoms. About 33% urban and 25% rural Indians are hypertensive. Of these, 25% rural and 42% urban Indians are aware of their hypertensive status. Only 25% rural and 38% of urban Indians are being treated for hypertension. [1] The disease hypertension is an abnormality of *Rakta Dhatu* (blood) and is popularly known as *Rakta Dusti* (vitiated blood). [2] To clear the concept vitiation of

Rakta Dhatu (vitiation of blood) may cause different group of illness pertaining to different *Srotas*(channels). *Hetu* explained in *Vidhishonitiya Adhyaya* are responsible for quantitative increase of *Raktadhatu* which impedes the *Gati* of *Vata Dosha* hence normal *Parivahan* is hampered. *Raktaavritta Vata* is a process of pathogenesis wherein *raktavridhi* (quantitative increase of *rakta*) impedes the *gati* of *vata*.

Rakta-mokshana means to let out the *Dushitha Rakta* (vitiated blood). This is one among the treatments mentioned in *Ayurveda* and practiced by *Ayurveda* surgeons now a days. This has got its own clinical importance in practice especially in conditions where *Rakta* is vitiated by *Doshas*. As Hypertension is also *Rakta Dushtigata Vyadhi*, it can be the treatment module for elimination of *Dushit rakta* from the body and relives from *Rakta Vriddhi* like condition.

Concept of ‘Raktamokshana’ (Bloodletting):

Like three *Doshas* (*Vata Pitta* and *Kapha*) of body, *Sushruta* given importance to *Rakta* with *Doshas* as he was expert of handling surgical diseases. He said in his text *Sushruta Samhita* that *Rakta* should also to be eliminated from the body when it is vitiated. Why because this vitiated *Rakta* leads lots of disorders in the body. [3]

Prakruta Rakta is called as *Dhatu* that is one among seven *Dhatu*s of human body. *Rakta* is ‘*Jeeva*’; this itself is life, loss of which leads to immediate death (*kshanamruthyuhu*). Therefore, such an important component of body if vitiated leads to

Name- xyz
Age- 50 years
Sex- male
Addiction -None
Bowel habit- Irregular

Ashtavidha Pariksha

Nadi (pulse)	80/min
Mala (stool)	Constipation
Mutra(urine)	Normal
Jivha(tounge)	Saam
Shabda(speech)	Spashtha
Sparsha(touch)	Anushnasheeta
Druka(eyes)	Pallor +
Akruti(built)	Madhyama

loss of health. Such vitiated *Rakta* should be removed out by different methods. Methods of eliminating *Dooshitharakta* are called *Raktamokshana*. ‘*Sushruta*’ ancient Indian surgeon elaborately explained this technique of *Raktamokshana* in his text.

Case Report

The present case study is successful Ayurvedic management of a case of *Hypertension*. A 50-year-old male patient with Registration no 1603090038 came to MGACH&RC with known case of Hypertension for 15 years and still on Antihypertensive drug.

History of present illness

The patient was normal before 15 year. But then patient was accidentally diagnosed with Hypertension during routine checkup. Patient was also psychological upset since last few years. For which he is on Antihypertensive drug. But there was no any significant relief. Hence, he came to Mahatma Gandhi Ayurved College and Hospital for better management.

Past History: - Not significant.

Personal History-

Marital status- Married
Occupation- private service

Appetite-Poor
Sleep-Inadequate

Other

BP	164/96 mmHg
Bala	Madhyama
Prakriti	Pitta Vata
Height	163cm
Weight	60kg

Treatment plan- Patient was treated on OPD basis.

Place of study- Mahatma Gandhi Ayurved College, Hospital & Research centre, Wardha, Maharashtra.

Methodology:

Pre-procedure preparations:

Patient should be counseled and explained the procedure with due written informed consent in an ideal place with pleasant atmosphere, with gathered materials like gauze piece, dressing pads, swabs, bandages, tourniquet, steel trays, measuring beaker, disposable needle no 18, antiseptic solutions, examination or patient cot/ table, with drinking sugar water.

The patient should undergo whole body *Snehan* (full body massage) and *Swedan* (fomentation) and *Snigdha Yavagu* (liquid diet or gruel) should be given 1 *muhurtha* (approximately 45 minutes) prior to the procedure followed by measuring 3 consequent reading of blood pressure with the interval of 10 minutes. [4]

1 st Reading	164/96 mmHg
2 nd Reading	158/98 mmHg
3 rd Reading	160/100 mmHg

Vyadhana Pramana (Size of venepuncture):

In muscular areas, puncturing should be of the size of the *Yava* (barley grain) and in other areas it should half of *Yava* (barley grain). Veins on the bones should be punctured to the size of half of *Yava* (barley grain).

Vyadhana Kala (ideal time) for Siravyadha: *Siravedh* should be done on the day which is neither very cold nor very hot, neither before

fomentation nor after too much of fomentation.

Procedure: The patient is made to sit on a stool at height of a *Aratani* (distance of elbow from the tip of finger) in erect posture; then he should be tied at two figure above the elbow with either by tourniquet or bandage cloth, controlled/restrain from movement neither very tightly nor very loosely; so as to make vein prominent. Then search of the site of puncture for prominent and visible vein. The *Sira* of *Vama Kurpuramadhya* (Cubital fossa) was chosen [5] and part was disinfected with spirit swab so as to protect against any pathogens. Then with the help of large bore scalp vein set, puncture prominent indicated *Sira* or vein. Proper puncturing yields forceful stream of blood. In practice, up to 250ml of blood may allow letting out depending on patient general condition. But in the text, it is mentioned up to 640ml blood is allowed to let out. Here we got proper stream of blood and Average 40 –60 ml of blood was collected till the signs of proper (*Samyak*) *Siravedh* is obtained. During the procedure patient was carefully observed for any untoward complication. Generally, after proper *Vyadhana*, once complete *Dosha* let out, it will stop of its own. Hence after stoppage of bloodletting, needle get remove. [6] Then proper bandaging is done over the site with *Haridra* and *Yash-timadhu*. [7] Then again 3 consequent reading of blood pressure with the interval of 10 minutes was taken.

1 st Reading	146/86 mmHg
2 nd Reading	142/84 mmHg
3 rd Reading	136/90 mmHg

Post Siravyadha regimen:

Patient should be treated with food which are not very cold, easily digestible stuff,

little oily, which promote blood formation and either slightly sour or devoid of sour. After *Siravyadha*, the patient should be asked for avoid exercise, copulation, cold breeze, day sleep, use of alkalis, pungent substances in food, grief, much conversation and indigestion till he attains good strength. [8] And Patient should be re-assessed on every 3 consequent weeks as a follow up for the measuring the blood pressure.

DISCUSSION

Hypertension is the one of the member of group of so-called “non-communicable diseases” and a leading contributory cause of death worldwide. Blood pressure is the force of blood against the artery walls as it circulates through the body. High blood pressure or hypertension is the constant pumping of blood through blood vessels with excessive force. Behavior and lifestyle-related factors can put people at a higher risk for developing high blood pressure. This includes eating too much salt (sodium), not eating enough potassium (from fruits and vegetables), being overweight, not getting enough exercise, as well as drinking too much alcohol and smoking. Hypertension as a disease is not described in *Ayurvedic* literature; however, its pathophysiology and symptomatology can be traced in many parallel conditions described in the classics. Depending on involvement of *Dosha* (*Vata-Pitta*) and *Dushya* (*Rasa, Rakta, Meda*) the spectrum of hypertension is interpreted in terms of *Raktavata* or *Raktagata Vata* and in recent years as *Vyana Bala Vaishamy*. This study shows the effect of *raktamokshana* by *siravedh* and to elaborate the effective management of hypertension in today’s era. As *Acharya* says vitiation of *Rakta Dhatu* by any

of *Doshic* impairment in the body it hampers the normal functioning of *Rakta*. Hence it is necessary to pacify the vitiated *Dosha* out of the body with the help of *Siravedh*. So as the normal amount of blood is letting out significantly give better result in lowering the blood pressure.

Acharya Sushruta in *Sharirsthana* ‘*siravyadhidhi*’ *adhyaya*, given full description about the *Siravedh*. He explained disease wise distribution of sites of *Siravedh*. [9] *Raktamokshana*, a Para surgical procedure gaining popularity around the globe, is being widely practiced. Bloodletting removes vitiated *Doshas* which cause the ailment. *Hetu* explained in *Vidhishonitiya Adhyaya* are responsible for quantitative increase of *Rakta dhatu* which impedes the *Gati* of *Vata Dosha* hence normal *Parivahan* is hampered. So as to decrease the *Gati* of *Vata* some amount of *Rakta dhatu* was removed. As up to 40-60 ml of blood let out from the *sira*, I give good result in the *vata* functioning, which directly result in the lowering the blood pressure. It can be seen by the change in the blood pressure values, which calculated before and after the procedure. These readings may constant after few weeks. So, that patient should be re-assessed on every 3 consequent weeks as a follow up for the measuring the blood pressure.

CONCLUSION

Siravedh is the one of the best form of *Raktamokshana*. This study shows *siravedh* gives effective result in the management of Hypertension. That’s why it is one of the useful methods to treat Hypertension. And as we give proper *Raktmokshan* to the patient, it gives more over effective results to minimize its complication.

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