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"PAKSHAGHATE VIRECHANAM" - A REVIEW

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ABSTRACT

Pakshaghata is one among the 80 vatajananatmajavikaras. It is a condition in which one half of the body is affected leading to loss of function, pain, loss of speech and loss of sensation. Symptoms developed by the association of other doshas along with vata are also explained in the textbooks of Ayurveda. Hemiplegia is the condition which is correlated with pakshaghata in the current era. Though there are different causes for hemiplegia, the most common correlation is made with CVA. Margavarana and dhatukshaya are two reasons for any vatavyadhi which are understood as ischemic and hemorrhagic strokes respectively. The line of treatment explained by different Ayurveda texts includes snehana, swedana and virechana. Basti is the best treatment for vatadosha and the half treatment in vatavyadhi. But virechana is given with the priority in the treatment of pakshaghata. This can be justified by various facts based on the nidanapanchaka, lakshana and chikitsa of pakshaghata. The current paper focuses on understanding virechana as the treatment in pakshaghatabased on explanations available in Ayurveda texts and modern view.

Keywords: pakshaghata, vatavyadhi, virechana

INTRODUCTION

Ayurveda, the ancient science of life has its two intentions as protecting the health of healthy individual and curing the diseases of the ill.^[1] On the basis of this, a number of texts are written on Ayurvedic understanding of various principles of health, disease and treatments. Any derangements in the *tridosha* cause diseases and their normalcy is the state of wellbeing.^[2] Diseases are caused by the *dosha* either alone or in association with other *dosha* and *dushya.Vata dosha* is

the most potent among the three and it can take other *doshas* from their normal site to different places to cause various disorders.^[3] Similarly there are 80 disorders explained which are caused by *vatadosha*, 40 and 20 by *pitta* and *kapha* respectively.^[4]

Vatavyadhi is included among the ashtamahagadas.^[5] Two main reasons for any vatavyadhi are; avarana to vata marga and dhatu kshaya.^[6]Pakshaghata is one among these. It is a disease of the madhyamaroga-

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marga.^[7] The *nidanasevana* leads to *vataprakopa* and the vitiated vata resides in one half of the body causing the vishoshana of sira and snavu develop into pakshaghata.[8] One half of the body is affected with symptoms like loss of function, pain, loss of speech and sensation. [9][10] The symptoms of association of and are also explained kapha texts.[11]Margavaranajanya dhatukshayajanand yapakshaghatas are correlated with ischemic and hemorrhagic strokes respectively.

Chikitsasutra of pakshaghata by different Acharyas include snehana, swedana and virechana. Virechana is one among the panchakarma. The oushadha is taken through the mouth and the dosha are eliminated through the anal route in virechana. [12] Basti is the main line of treatement advised for vatavyadhi [13] but virechana is given the priority in pakshaghata.

Here in, the various facts explained in Ayurveda texts justifying *virechana* as the treatment for *pakshaghata* are discussed.

Pakshaghatachikitsa sutra: Pakshaghatachikitsa sutra explained by all Acharyas includes virechana. As per Charaka, snehana-swedana-virechana are the main treatments for pakshaghata. Susruta describes the selection criteria of pakshaghata patient suitable for treatment and he says the initial line of management of pakshaghata is through snehana, swedana and mrudu shodhana (mrudu virechana). He also advices particular duration for chikitsa and gaping between each course of treatment. Snigdha virechana is advised by Vagbhata in pakshaghata. [16]

Vatasya Upakrama: As pakshaghata is a vatavyadhi, the vatasya upakrama told by Vagbhata can be applied in the management of pakshaghata. Mridu shodhana after snehana and swedana is advised as vatasyaupakrama. [17] Teekshnashodhana is contraindicated as it may provoke vatadosha. [18]

Pakwashaya is vatasthana: The normal abode of *vatadosha* is *pakwashaya*.^[19] The first *chikitsa* for *pakwashayagatavata* is *snehavirechana*^[20] and it should be followed by *basti* and other line of treatments. The normal pathway of *pakwashayasthavata* will be obstructed due to the association of other *dosha*. This can be corrected by giving *mru*-

dusnehavirechana with tilwkasarpi, sathalaghrita or erandataila with milk. After shodhana, obstructions to vata will be removed and vatadosha will be pacified.^[21]

Involvement of sira and snayu: In the samprapti of pakshaghata, the vitiated vayu resides in one half of the body and causes the drying of sira and snayu of that side. [22] Sira and kantara are the upadhatus of raktadhatu. [23] Kantara is also considered to be the sthulasnayu. [24] The treatments advised for the saptadhatudushti are also applicable for their upadhatu also. In raktadhatudushti, virechana is explained as one of the treatments. [25] So virechana can be given in the dushti of sira and kantara which in turn is applicable in pakshaghatachikitsa.

Involvement of *majja*: The *adhishtana* of *pakshaghata* is *masthishka* or *mastulunga*. *Mastulunga* is considered as the "*avileena ghritakara mastaka majja*"^[26]. Dalhana says *pittadhara* and *majjadharakala* are same. ^[27] The treatment advised for *pittadharakalavikriti* is *virechana*. In *majjadushti*"*kaaleshuddhi*"^[28] (timely purification) is advised as the treatment.

Concept of avarana – anubandha: One among the main pathology behind pakshaghata is margavarana to vata. It is correlated with the ischemic stroke which accounts for 87% of all stroke cases. Pakshaghata may present with symptoms of the avarakadosha along with vatajalakshanas. Visheshalakshanas of pakshaghata are also explained based on the association with pitta and kaphadoshas. Mridushodhana is indicated for the removal of avarana to vata. [29] Virechana in common is explained in pittavruta and kaphavrutavata conditions. [30] Whenever pitta and kapha are together associated with vata, the prior treatment should be given to pittadosha. [31] The main treatment for pitta is again virechana.

Prana vatavikriti: Pakshaghata is generally compared with CVA stroke, ischemic being the most common. It is caused due to the lack of oxygen supply to the brain tissue leading to cell death. This can be compared with the obstruction to *pranavata*. The normal pathway of *pranavata* is from above downwards. Virechana has anulomana effect and thus it can re-

move the obstructions to *pranavata* to bring it in natural pathway.

Virechanaphala: Virechana is the elimination of the *dosha* through the lower passage (anal route). *Virechana*, when carried out in the proper manner with all its precautions yields multifaceted effects to the person. It improves the intelligence, strength, stability of *dhatu*, *agnibala* and it can delay the ageing process. ^[32] Through *virechana*, *shareerashudhi* occurs which in turn leads to *manashudhi* and then *buddhiprasada*; improvement in the intelligence. ^[33]

Modern view: Normal fluid homeostasis plays a vital role in maintaining the health of cells and tissues. Changes in the vascular volume can alter the endothelial function leading to various morbidities. Endothelial cells regulate several aspects of homeostasis and cytokines have highest effect over endothelium. During *virechana* cytokines are produced which stimulate the endothelium and thereby improve the fluid homeostasis. Thus, the deranged cellular elements are brought back by an action like *koshtagati* of *shakhagata dosha*.^[34]

Different neuropeptides and hormones of gut are found in brain. They have great effects on neurons, smooth muscles and glands. *Virechana* can improve the number of neuropeptides by cleansing the gastrointestinal tract, as a result it may affect the brain and modify its various functions. Hence *virechana* can be used in the disorders of brain.^[34]

Hydropic degeneration is a type of cellular degeneration caused by the increased water content in the cells damaging the mitochondria. *Virechana* checks this situation by causing fluid loss. Similarly, *virechana* helps in the treatment of disorders due to ischemia and vacuolar degeneration.^[34]

DISCUSSION

Virechana karma is one among the panchakarma which is mainly advised for pitta dosha and pittaja vikara. But it has a good role in the management of diseases caused by other two dosha also. One among such conditions is pakshaghata, where virechana is explained to be the main line of management by Ayurveda texts. Pakshaghatachikitsa and general

management of all vatavyadhi include virechana. Pakswashaya is vatasthana and virechana is advised in pakswashayasamutthanavyadhi as it is the nearest route of expulsion of dosha. The involvement of siraand snayu in the samprapti of pakshaghata accounts to the role of raktadhatu in pakshaghata for which virechana is the treatment. Masthishkamajja is the adhishtana of pakshaghata and virechana holds good in treating majjadhatudushti and majjadharakalavikara. Avarana to vatamarga plays big role in the development of pakshaghata and associated symptoms of other dosha are also expressed in it. Virechana is advisable in both conditions. Virechana brings the pranavata in its normal pathway hence it is useful in pranavatadushti taking place in pakshaghata. As the main pathology in pakshaghata takes place in masthishka, there is mental and physical impairment to the patient. Budhiprasadana and dhatusthiratwa are the benefits of virechanakarma. Thus, virechana can act improve the mental and physical conditions of the patient.

Virechana can improve the cellular functions and correct the tissue damage through fluid homeostasis. It helps in the proper brain functions and can be used in the disorders of the brain. Hydropic degeneration is prevented by *virechana*, so it is useful in ischemic disorders like stroke.

CONCLUSION

Being a vatavyadhi, the description of virechana as the line of management in pakshaghata can be disputable. Basti is the main treatment for vatadosha but virechana has been given the priority in pakshaghata. All such questions are answered by the analysis of various facts explained here justifying the selection of virechana in pakshaghata. Though direct points are not available in the texts, a thorough evaluation of the etiopathogenesis, lakshana, anyadoshasamsrushtalakshana and chikitsasutra support the role of virechana in pakshaghata. Virechana not only counteracts avarana but improves dhatuposhana also. So, it is useful in both margavaranajanya dhatukshayajapakshaghata. Research works tried to explain the action of *virechana* in modern perspective where the results shown the ability of virechana in the management of nervous system disorders. Currently

the use of *virechana* in *pakshaghata* is not so widely practiced. Further clinical trials and standardizations are necessary on this topic.

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