



ROLE OF SADYOVAMANA IN SHITAPITTA : A CASE REPORT

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(Published Online: December 2022)

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Article Received: 02/11/2022 - Peer Reviewed: 23/11/2022 - Accepted for Publication: 28/11/2022



ABSTRACT

The word "allergy" comes from the ancient Greek word *allos* meaning "other" and *ergon* meaning "work". Allergy is one of four forms of hypersensitivity and is formally called type I (or immediate) hypersensitivity. Allergic reactions occur due to excessive activation of certain white blood cells called mast cells and basophils by a type of antibody called Immunoglobulin E (IgE). This results in an inflammatory response that can range from mild discomfort to grave consequences. In *Urticaria Vata* and *Kapha* are two *doshas* that are primarily vitiated and mixed with *pitta* (*Pittena Saha Sambhooya*) spreads internally and Externally (*Bahir Aantah Visarpah*) and result in '*Shittapitta-Udarda-Kotha*'[1]. Due to *Pitta dosha*, they create redness, swelling of the skin, and moderate to severe itching on the skin.[2] *Ayurveda* Herbo minerals preparation cures urticaria by balancing Tridoshas in the body A case with classical symptoms of *Shitpitta* was visited in *Panchkarma* OPD of *Ayurved Hospital* Patient was treated successfully with *Sadyovamana* treatment.

INTRODUCTION

The word *sadyovamana* is a combination of two words *Sadyo* and *vamana*. According to *Shabda-*

kalpadruma, *sadya* means on the same day, in the very moment, or immediately. According to

Amarkosha the meaning of these two words is instantly or at once. *Sadyovamana* means to attain an immediate or quick elimination of vitiated doshas through the oral route. It is the instant therapeutic emesis (purificatory procedure) conducted without internal oleation (*abhyantara snehapana*) and sudation (*sweda*) in aggravated *kapha* conditions In *Ayurveda Sheetapitta* is described as *Tridoshaj Vyadhi* (Disease), but *Vata* and *Pitta dosha* is predominant and *Ras* and *Rakta* are main dusyaflare' cutaneous lesions involving only the superficial portion of the dermis.¹ The lesion varies in size from 1mm to several centimeters. It is defined as evanescent discrete areas of dermal oedema, often centrally white due to the masking of local blood supply by fluid.[3]The *chikitsa* is the procedure by which *Dosha, Dhatu, and Mala* are kept in a balanced state[4]. Application of *chikitsa* depends on *Avastha* (state) of *upasthita Dosha, Dhatu, Malas, Bala, Kala*, etc. *Acharya Sushruta* has described the *siddhanta* of *doshavastha* and their *upkrama* which has to be done, i.e., if *doshas* are in the *vridhhi* stage it should be eliminated while *doshas* are in the *kupitha* stage means in the aggravated stage it should be pacified [5]

Aim and Objectives

- To highlight the concept of *sadyovamana* in *Shitapitta chikitsa*

- To describe the procedure of *sadyovamana*

A case with classical symptoms of *Shitpitta* was visited in *Swastha Rakshna* OPD of *Ayurved Hospital* Patient was treated successfully with ayurvedic treatment. Further, we will discuss this case in detail.

CASE DETAILS -

General information of patient Name – ABC

Age - 33 yrs.

Gender – female

Chief complaints-

Irregular erythematic patches on the whole body with severe itching in

the past 10 days, sudden onset with unknown cause.

The episode of Erythematic patches starts with itching in *vataja*

kala around 5 pm and erupts after scratching. Remain over night

with severe itching and vanish in the morning.

Anxiety in the past 13 days.

Insomnia due to severe itching at night.

Constipation (2-3 times a week in the past 1 year)

History of present illness

The above symptoms started suddenly with an unknown cause, the patient became irritable due to severe itching and rashes. As symptoms started in the evening and remained overnight. The patient had disturbed sleep and anxiety in the past 13 days. The patient was using Tab. cetirizine 10mg od for symptomatic relief for the last 6 days before visiting the Ayurvedic OPD.

Examinations –

General examination

Pulse- 78 beats/min

BP- 130/80 mm of Hg

Weight- 50.4 kg

Systemic examination CVS- S1S2 normal, CNS- Conscious well oriented

RS- Air entry clear bilateral

Per Abdominal examination Soft, non-tender abdomen

Ashtavidha Prakisha

- Nadi-Pittaj Kaphaj • Mala- Vibandh • Mutra- Samanya Matra, Shukla Varna, Saha Pravritti • Jivha- Shweta varna, Sama Malaavritta • Shabda-Spasta • Sparsha-Anushnoshita but Ushna at the site of rashes • Drik- Rakta varna, Kanduyukta Prakriti • Aakriti- Madhyam

- Dashwidha Prakisha • Prakriti- Sharirik- Pittak-kaphaj Mansika-Rajasika • Vikriti- Prakriti samasamvaya • Saara-Rakta • Samhanana-Madhyama • Pramaanana-Madhyam • Satmya- Sawarasa • Satva-Madhyam Ahara shakti-Abhyav Aharana shakti-Madhyam, Jaran shakti-Madyama

Local examination

- Irregular, raised reddish rashes on the body, especially on the hand, leg, and back. • Shotha (Remarkable Swelling on the skin) • Temperature elevated at the site of the rashes

Diagnosis

The patient's present complaints resemble the symptoms of Shitapitta as mentioned in the classical text.

Treatment given sadyovamana: *Sadyovamana dravya - Lavanambu* Preparation of *Lavanambu* - 15 gm of *Saindhav* was mixed in 1 lit of warm water and stirred till *saindhav* got dissolved in warm water. During this duration, the patient had 2 *bruhat*, 3 *madhyam*, and 4 *alpa vegas*. After the symptoms like *anga* and *Udar*, *shiro laghava*, *kshudhaprachiti* were observed, the patient was given *dhoompana* of *Vacha*, *Haridra*, and *Guggula varti*. All the necessary vitals were observed during the procedure. 2. Diet – the patient was advised to take only *peya* on

kshudhaprachiti. 3. *Jalapana* – The patient was advised to take *koshna jala* (lukewarm water) whenever she feels thirsty. 4. *Pathya* – the patient was advised to avoid bathing, exercising, sleeping during the daytime, indulgence in heavy food and chilled water, and direct exposure to wind and sunlight for the next 3 days

OBSERVATION AND RESULT

Table1: Parameters of assessment

{Mild(occasionally)-
+,Moderate(disturbingnormalactivity)-
++,Severe(disturbingsleep) -+++

Parameters of assessment	Before treatment	Aftertreatment
1. <i>Shotha</i> (edema)	++	+
2. <i>Toda</i> (pricking sensation)	+++	+
3. <i>Kandu</i> (itching)	+++	+
4. <i>Daha</i> (burning sensation)	++	-
5. No wheals	(11to30)	(<10)
6. Size of lesions	(>3cm)	(1-3cm)
7. Frequency of appearance	(2-3times a week)	Once a week
8. Frequency of use of antihistamines	(2-3times a week)	Not required

DISCUSSION

Mode of action of classical *vamana*

According to *Acharya Charaka*, the emetic drug has *ushna*, *teekshna*, *sukshma*, *vyavayi*, and *vikasi guna*. By their potency, it reaches the heart and circulates through vessels. Because of their *agneya* nature, they liquify compact *doshas*. *Teekshna* *guna* separated the adhered *doshas* located in gross and subtle channels of the body (*sthula* and *sukshma strotas*). These separated *doshas* are brought to *amashaya* due to *anupranav bhava*. *Doshas* get stimulated by *udan vayu* as *Vamak* drug have *urdhwabhaghara prabhava* due to *agni* and *vayu* predominance which ultimately leads to migration of *doshas* towards mouth from *amashaya*[6]. The mode of action of *sadyovamana* is also the same as that of classical *vamana* except *purvakarma* is not done in *sadyovamana*. The *doshas* are expelled from localized tissue. The *dravya* use for *sadyovamana* is *vamanopaga dravya* (a drug that helps with *vamana*).In *sadyovamana*, we are not following the increasing order of olotion (*arohana krama snehpana*) and the *Vishram kala*, etc as per the

guidelines by the *Acharyas*. Because of these, we are not eliminating *prabhuta dosha* from the deeper tissue. *Sadyovamana* has minimal efficacy and instant relief like *ajeerna*. *Sadyovamana* is carried out when *dosha*. *Utklishta lakshnas* like *hrullas*, *Lala praseka*, *shiro gourava*, *kapha shtivana*, *bhakta dwesha* etc are present. *Purvakarma* like *ama pachana*, *snehan*, *swedana* are not mandatory for *Sadyo vamana*. Otherwise, the *dosha Utklishta avastha* is reduced. *Sadyo vamana* may be practiced instantly in conditions like *tamaka swasa*[7](bronchial asthma), *urdhwagaamlapitta*, *ajeerna*, etc. It can be practiced in various emergency conditions *kapha utklesha avastha* in disease, *visha pana*, *ajeerna*, *amlapitta*, and dental caries[8]as an emergency treatment

CONCLUSION

Shitapitta is an important one among the disease. It is important to assess the *dosha* predominance and *avastha* by looking at the *lakshanas* to treat the *Shitapitta*. *Kapha pradhanya*, *utklesha avastha*, *doshas* residing in *amashaya*, *balwan rugna*, *upasthit doshas*, and symptoms are the indications of pan-

chakarma treatment, *sadyovamana*. If the doshas are in *utklishta avastha* already then there is no need to perform *snehana* and *swedana* as a *purvakarma*. After a *samyak* or even after *asamyak vamana* if there are recurrence symptoms then it should be assumed that there are still some vitiated *doshas* that might be stuck to the *kosha* forming the *Upalepa*. These remaining *doshas* are treated with *laghu ahara* and *kashaya pana* for *Shesha dosha pachana* and *shama-na*

Sadyovamana is an important *panchakarma* process that is least practiced. It is a tool that can be used in various diseased conditions. It gives instant relief in *utklishta doshavastha*. It is cost-effective, less time consuming, and easy to carry out.

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Source of Support: Nil

Conflict of Interest: None Declared

How to cite this URL: Gokarna Ankushrao Chavan: Role of Sadyovamana in Shitapitta: A Case Report. International Ayurvedic Medical Journal {online} 2022 {cited December 2022} Available from: http://www.iamj.in/posts/images/upload/3470_3473.pdf