

EFFECT OF *VAMANA AND VIRECHANA KARMA* ON SERUM ELECTROLYTES - A RETROSPECTIVE STUDY

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ABSTRACT

Panchakarma therapy aims at the elimination of excessive *Doshas* from the body to maintain the state of health for a longer duration. *Vamana* and *Virechana* is one of the *Panchakarma* therapies wherein vomiting and purgation is induced by drugs and it specifically aims at the elimination of excessive *kapha* and *Pitta Dosh*a from the body respectively. Normally, after *Vamana* and *Virechanakarma*, patient does not complain of having any untoward like those present after vomiting and diarrhea due to dehydration. This study was conducted to evaluate the effect of *Vamana* and *Virechanakarma* on serum electrolyte levels and to ascertain the safety of therapeutic vomiting and purgation. This study involved estimation of serum electrolyte levels before and after *Vamana* and *Virechana* in 89 patients and the results are suggestive of safe application of the *Vamana* and *Virechana* therapy as the deviation in electrolyte levels were within the normal range.

Keywords: Electrolytes level, *vamana karma*, *Virechana karma*

INTRODUCTION

Vitiated *Dosha* is the basic factor in the manifestation and progress of any disease. *Panchakarma* therapy, specifically the *Samshodhana* like *Vaman* and *Virechana*, aims at the elimination of vitiated *Doshas* from the body. So, the disease could be prevented. *Vamana* & *Virechana karma* are widely used *Panchakarma* therapies. *Vamana* is an *urdhvabhaga*

shodhana & *Virechan* is an *adhobhaga shodhana* of the body. *Vamana* and *virechana* are useful for diseased as well as healthy individuals for preservation of health & prevention of disease. Both *Vamana* and *virechana* can be given according to the *dosha* predominant stage in any season but if it is given in *Vasant ritu* (*Kaphaprakopa*) and *Sharada ritu*

(*pittaprakopa*) respectively gives wonderful results. Under normal circumstances, if a patient suffers from vomiting and purgation, then certainly there is loss of electrolytes from the body resulting in weakness; development of cramps due to dehydration, and sometimes low blood pressure and renal failure. However, if vomiting and purgation is induced through *vamana karma* and *virechana karma* respectively and if *Samyakshuddhi* (features of proper *Virechana*) occurs, no such symptoms occur. The assessment of *Vamana* and *virechana* is based on various parameters termed as *Shuddhi* (cleansing) criteria like *Vaigiki* (number of bouts of stool passed), *Manaki* (quantitative measurement of stools), *Laingiki* (symptoms based assessment), and *Antyaki* (assessment based on end point of purgation) *Shuddhi*. The *Doshas* eliminated are classified on the basis of number of bouts of evacuation as low, medium, and high quantities (i.e., *Hina*, *Madhyama*, and *Uttamshuddhi*). These are 6, 8, and 10 times respectively in *vamana karma* and 10, 20 and 30 in *virechana karma*. After vomiting and purgation in such high numbers, if there is an electrolyte imbalance, it needs to be evaluated and the levels are to be compared before and after *vamana karma* and *virechana karma*.

RESULTS:

SERUM ELECTOYTES	BT	AT	P valve	Summary
Na ⁺	143.05±6.65	144.05±6.25	.261	ns
K ⁺	4.42±0.61	4.20±0.47	.377	ns
Cl ⁻	110.25±18.82	111.38±19.17	.004	ns

AIM AND OBJECTIVES:

The present study was aimed at ascertain the safety of *vamana* and *virechana karma* on certain subjective and objective parameters and to evaluate the serum electrolyte levels before and after *Vamana* and *Virechan* karma.

MATERIALS AND METHODS:

A retrospective analysis of serum electrolytes of 89 patients undergoing *Vaman* and *virechana karma*, the patients fit for *sodhana karma* irrespective of Age, Sex, Disease condition were included in the study. The patients undergoing *sadyovaman* and *sadyovirechana* were excluded from the study. The study was conducted as follows: 89 cases were enrolled for *vamana* and *Virechanakarma* at the P.G. Department of *Panchakarma*. KLEU’s Ayurveda Hospital & Medical Research Centre, Belagavi, Karnataka

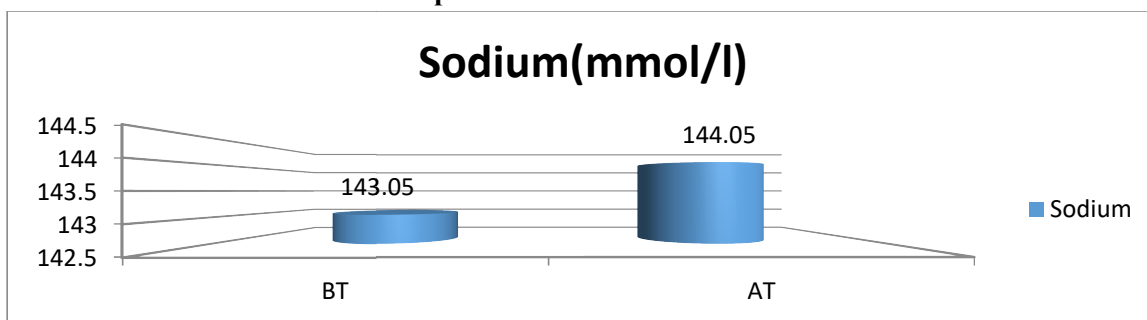
All the registered cases were evaluated for:

- Serum sodium levels,
- Serum potassium levels,
- Serum chloride levels before and after *Vaman* and *Virechanakarma*.

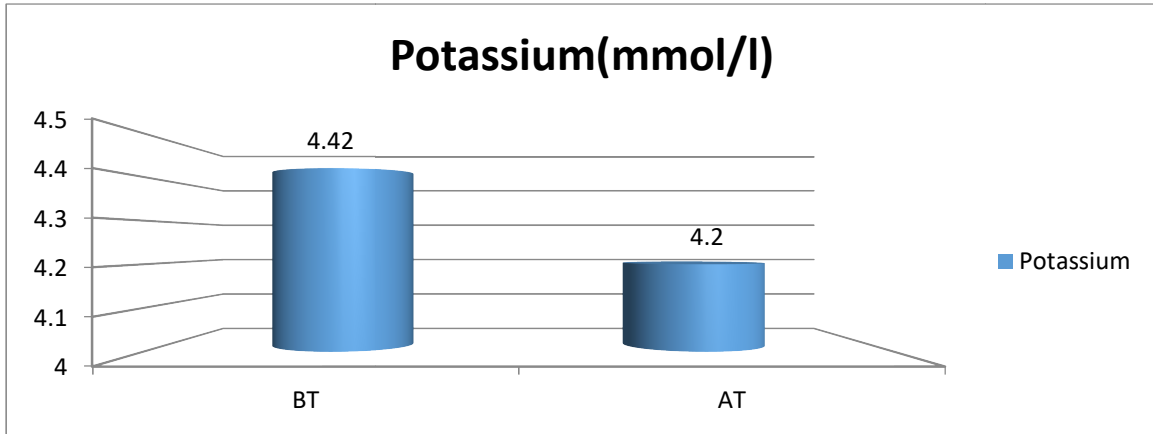
ASSESSMENT CRITERIA:

The patients undergoing *Vamana* and *virechana karma* were assessed for serum electrolytes before and after *vaman* and *virechana* on same day in evening.

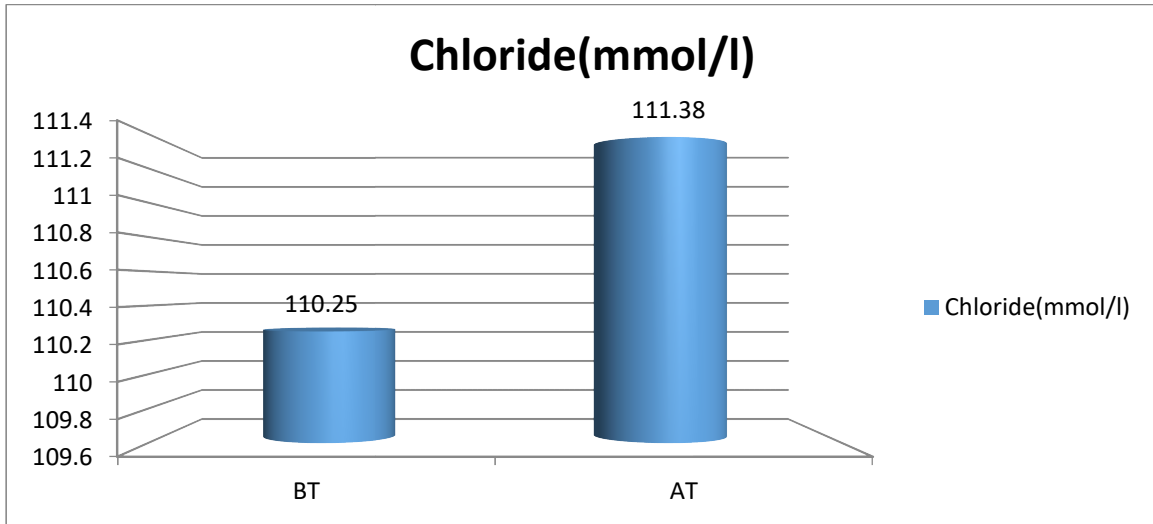
Graph 1: Sodium level BT & AT



Graph 2: Potassium level BT & AT



Graph 3: Chloride level BT & AT



DISCUSSION

The modern day literature suggests that purgation leads to dehydration, electrolyte imbalance and loss of electrolytes, hypotension, and shock. Certain *Vyapada's* (complications) of *vamana* and *Virechana karma* and signs and symptoms of excessive *vamana* and *Virechana* are described in Ayurveda which are similar to the features of dehydration and associated complications. Hence *vamana* and *Virechana* being therapeutically induced vomiting and purgation needs to be evaluated for its safety. Thus, the present study was conducted to establish the safety profile of *sodhanakarma* if conducted as per the classical guidelines starting with *Poorvakarma*, followed by

Pradhanakarma, and finally completing with *Samsarjanakrama*.

To support this hypothesis, the electrolyte study was undertaken before and after the treatment, it is clear that the deviation is within normal range. The clinical features of hyponatremia, hypokalemia, hypocalcemia were not reported in any of the 89 patients after *vamana* and *Virechanakarma*. Statistically, the results showed insignificant change in levels of serum sodium, potassium and significant change in chloride levels. But all, the changes were within normal limit.

CONCLUSION

The present work was a retrospective study aimed to ascertain the safety of *vamana* and *Virechanakarma*, which was performed keeping in mind that the *Panchakarma* procedure though efficacious and safe needed an assessment of its safe application in this modern era. Serum electrolytes values were well within the normal ranges in all the 89 patients after the therapeutic vomiting and purgation. The study was helpful in establishing the safety of therapeutic vomiting and purgation, i.e. *vamana* and *Virechanakarma* subjectively and statistically as well without causing any adverse effects. Further scope of study will be application of other *Panchakarma* therapies can also be conducted using various parameters.

REFERENCES

1. Sharma P. Vol. 2. Varanasi: Choukhambha Bharati Publications; 2005. Katuki, Dravyaguna Vijnana; p. 442.
2. Sen GD. Udavarta Aanaha Rogadhikara, SiddhiPrada on Bhaishajya Ratnaavali. In: Siddhi NM, editor. Varanasi: Chowkhambha Surbharati Publication; 2009. p. 646.
3. Agnivesha, Charaka, Dridhabala. Charaka Samhita, Sutra Sthana, Chikitsaprabhritiya Adhyaya, 16/5-6. In: Acharya Vaidya Yadav ji., editor; Acharya Vikram ji., editor. reprint edition. Varanasi: Chowkhambha Surbharati Publication; 2011. p. 93.
4. Ibidem. Charaka Samhita, Siddhi Sthana, Kalpasiddhi Adhyaya, 1/17. :680.
5. Fauci, Braunwald, Kasper, Hauser, Longo, Jameson, et al., editors. 17th ed. Appendix-4, Appendix-7. Vol. 2. USA: McGraw Hill Publication; 2008. Harrison's Principles of Internal Medicine.
6. Murray R, Kennelly P, Bender D, Rodwell V, Anthony PW, Kathleen MB. 28th ed. Appendix-1. USA: McGraw Hill Publication; 2009. Harper's Illustrated Biochemistry; p. 647.
7. Fauci, Braunwald, Kasper, Hauser, Longo, Jameson, et al., editors. Principles of Internal Medicine. 17th ed. Vol. 1. USA: McGraw Hill Publication; 2008. Harrison's Principles of Internal Medicine. Fluid and electrolyte disturbances; p. 278.
8. Ibidem. Harrison's Principles of Internal Medicine, Fluid and electrolyte disturbances. 1:282.
9. Ibidem. Harrison's Principles of Internal Medicine, Fluid and electrolyte disturbances. 1:287.

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