

## Role of Ayurveda in Emergency Treatment

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### Abstract

It is believed that emergency treatment in ayurveda is not present and in emergency one need to take only allopathic medicines, and ayurveda has limited role to play in chronic ailments only. This belief in society and ayurvedic physicians has arrested development of ayurveda, and limiting its role as adjuvant therapy. Ayurveda to become main line of medicine needs to have emergency management. The emergency management was described in ayurveda, which needs only enlightenment.

In this paper an attempt has been made to understand ayurvedic basics of emergency management. It includes understanding emergency condition according to ayurveda and management accordingly. It is important to note that mild to moderate emergency can very well be managed according to ayurveda.

The concept of emergency, management, etc. is discussed in full paper.

**Keywords:** Atyaayik chikitsa; Ayurveda; Jwara; Hrid ghata; Sanyasa

### Introduction

It is a belief in common public that Ayurveda can treat only chronic diseases and not acute diseases. This belief is wrong, misguiding and devaluating Ayurveda. From the Ayurvedic texts it is very clear that even emergency diseases or acute diseases were very well treated by Ayurvedic treatment.

Ayurvedic has been criticized for no availability of emergency management, which is mere a belief. The may be aroused whether there was no emergency in ancient times and people were suffering only from chronic ailments? The answer to this question is no and people were managed in life threatening conditions too. There is documentation in the literature of daruna and ashukari (emergency) diseases, which implies that emergency was managed using ayurvedic medicines.

### Aims and Objective

The paper was written to fulfill following aims and objectives

1. To study the ayurvedic basis of emergency management
2. To study the text for necessary reference that describes emergency management

### Material and Methods

To fulfill the discussed aims and objective following material are required

1. Relevant ayurvedic and modern literature is the material of the paper
2. Old ayurvedic treatises

The comparative study of both the literature and correlational method is adopted in the study.

### Review of Literature

There is a big gap observed in ayurvedic literature. This gap may be due to dark medieval period which was approximately of 2000 years. During this time period there were many invasions, and probably this is the reason of break to the development of Ayurvedic science. All the ancient literature we get is outrageous work of a few scholars.

Many books were destroyed during the medieval period and the references from other books opines their contribution to the science. Here an example can be given of Bhavprakasha, there is description

of 33 types of sannipat jwara, which are described in other Ayurvedic texts that are not available today. The description of sannipat Jwara is the description and treatment of acute febrile emergencies, which will be dealt with further.

Pathogenesis of acute emergencies in General How acute emergencies take place or arise is a question which is not solved in modern science. Ayurvedic has thought of emergencies in general and in diseases also. While dealing with "VIKARA-VIGHAT-BHAVA-ABHAVA" i.e. incidence or non incidence or suppression of diseases, charaka has dealt with emergencies. Charaka says, 'Occurrence or suppression of diseases occurs as a result of variations in Nidan (Chological factors) intensity of Doshas and susceptibility of Dhatus [1].

Further Charaka says, 'If these three factors do not mutually associate or if they do so after a long lapse of time or in a mild form, either there occurs no manifestation of diseases at all or the disease takes a long period to evolve or appears in an ambulatory or abortive form. Under the contrary conditions, there occur contrary results.' Chakrapani commencing on the 2<sup>nd</sup> phase clear that when these 3 factors viz. Nidan (etiological factors), Doshas and Dushyas (body elements) unite or associates, rapidly associate super strongly, produce diseases very rapidly or with strong manifestations of diseases or with all the signs and symptoms of the diseases. This condition is called acute diseases or emergency [2].

Thus when the etiological factor is powerful, the association or morbiding of doshas is also very great. Both these factors vitiate the body, elements or Dhatus rapidly. This rapid morbiding is called emergency or acute condition of disease.

### Understanding Emergency as a Complication

Charaka, explaining 'Upadrava' (complication) says' complication is more troublesome than the main disease itself because it appears

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in the later stages of disease, when the body is already weakened by the previous disease. Hence the physician should be prompt in the treatment of upadravas (Complications) [3].

This sutra also clears the condition of emergency. This means that due to lack of resistance powerful complications arise and emergency treatment should be started.

Charaka, in the Chapter 'Roganeeka' Viman 6, divides diseases in many different ways like effect, intensing, seat of affection, cause, seat of origin etc. In these divisions, one of the groups is Mrida (mild) and Daruna (severe) 4. Here Daruna means acute condition or emergency [4].

Regarding the classification of Mrida (mild) and Daruna (severe) Charaka has a clear concept of curabiling or incurabiling. Mrida, Daruna and Sadhya, Asadhya are different. He uses the term Daruna where the disease is acute or requires prompt treatment. Daruna does not mean incurable. That is why charaka says 'There are many such diseases which though acute and severe are yet curable. They may kill the patient if they are either not treated at all or wrongfully treated.' This clearly states the condition of emergency which requires prompt and accurate treatment [5].

Acharyas have often warned the treating physicians to start prompt treatment by using the terms 'Twaraya Jayet'. All having the meaning of prompt treatment. Not only this, Bhava-Mishra has given a special tribute to the physician [6]. 'The physician who saves a patient, drowning in the ocean of sannipat, what religion he has not performed (He has done all the religious duties) and what praise he is not fit for (He is praise worthy in all respects) because the physician has to fight against death. He who conquers such an emergency is really the conqueror of all diseases'. With this expression Bhava-Mishra has not only appreciated the physician but has placed the physician in the position of God of Health. Ayurveda has, thus, given top priority for treating emergency conditions.

### Emergency Conditions in Day to Day General Practice

There are 3 types of emergencies viz. medical emergency in which the treatment can be given with only medicines. Certain are surgical where surgical interference is necessary and third are Gynecological emergencies. One more emergencies may be added with these types of emergencies and that may lead to medico-legal complication burns, poisoning etc. unless authorized, a General practitioner is advised not to treat such cases because that may lead to medico-legal complications.

The duty of an Ayurvedic Physician in emergencies Ayurveda deals with the subject of emergencies in detail. The physician should be well – conversant with the present condition and also for the prognosis; he should explain everything to the satisfaction of the patient and his relatives and start treatment with courage and confidence. In surgical and gynecological emergencies, if the physician is trained handle the patient, he can do so; but if is not trained to surgical and gynecological operations; it is the duty of the physician to diagnose the disease, refer to the proper surgeon or gynecologist. But he should give preliminary treatment so that the condition may not be deteriorated and the patient may feel relief.

### Emergencies Management of Diseases

Here, list of the diseases, which require prompt and careful treatment, is given below with the name in Ayurveda, the reference from where the description is taken and its nearest modern interpretation. It is not exhaustive. Even more diseases can be added. This is given

with the idea that it may prove to be a guideline for further studies. Charaka also says 'This is quite adequate for the average physicians for the practical purpose of treatment; for the highly intelligent, who are proficient in the art of inference; it will serve as a guiding principal for the comprehensive knowledge, not mentioned here.

### Medical Emergencies

There are certain embarrassing symptoms in fever. They may occur as a symptom or as a complication with or without fever. They have been classified as a special type of 'Sannipat Jwara'. It may be clearly understood that Bhava Mishra has narrated 3 sets of 13 types of 'Sannipat Jwara'. Some of them are coming for treatment to a physician. These types of sannipat Jwara require special treatment, though they may be symptoms according to the modern science or Ayurveda. These conditions are:-

- |                                     |                                    |
|-------------------------------------|------------------------------------|
| (1) Tandrika Sannipat Jwara Bhava   | Typhoid state                      |
| (2) Prelapaka Sannipat Jwara Bhava  | Febrile delirium                   |
| (3) Akshapaka Sannipat Jwara Bhava  | Febrile Convulsions                |
| (4) Karnika Sannipat Jwara Bhava    | Infective Parotifisa Mumps         |
| (5) Teevre Sannipat Jwara Bhava     | Hyperpyrexia                       |
| (6) Sheetanja Sannipat Jwara Bhava  | Subnormal Temperature<br>or Crisis |
| (7) Swasa-santamaka or<br>Pratamaka | Dyspnea with fever                 |
| (8) Shoola                          | Painful condition                  |
| (9) Anidra                          | Sleeplessness                      |
| (10) Antarlohita and many other     |                                    |

Symptoms sec.chi. 2 associated Internal Hemorrhage with or without fevers. There are certain emergencies, where fever is generally not present. If fever is associated in those condition, secondary infection or even very grave condition should be suspected.

These conditions are:-

II Atisara & Pravashika:-

- |                    |  |
|--------------------|--|
| (1) Teevra Atisara | Severe diarrhea  |
| (2) Pakta atisara  | Ch.chi-18<br>Bleeding per rectum<br>eg. Ulcerative colitis, bacillary, dysentery |
| (3) Apkshaya       | Dehydration  |
| (4) Mootraphat     | Ch.chi-18<br>Retention of urine  |
| (5) Vishoochika    | Ch. Vi-2<br>Gastic – enteritis   |

III Swasa or Breathlessness:-

- |                      |             |                         |
|----------------------|-------------|-------------------------|
| (1) Tamaka Shwasa    | Ch. Chi-1   | Br. Asthma              |
| (2) Pratata Kasa     | Ch. Chi. 19 | Asthmatic<br>Bronchitis |
| (3) Status asthmatic |             |                         |
| (4) Hrid – Shwasa    |             | Cardiac asthma          |
| (5) Whooping Cough   |             |                         |

III Chhordi or Vomiting			(1) Sadhovrana	
(1) Chhardi	Ch. Chi.20	Vomiting	(2) Bhagna	Fractures & dislocation
(2) Rakta Chhardi	Ch. Chi.2	Hemetemesis	(3) Antra-Vriddhi	Irsedulstid hernia
IV Hrid Roga (Diseases of Heart)			(4) Agantu and Stangulstid hernia	
(1) Hrid upaghata	Ch. Indriya	Myocardial infarcation Coronary heart disease Anjina	Pranasta Shalya	Foreign bodies
(2) Hrid Bheda	Ch. Indriya	Heart failure Heart Block	(5) Visarpa	Cellunis & crysepelas
(3) Raktachapa Vriddhi		Hypertension	(6) Diseases of nose	Foreign body in nose mogets
V Vata – Vyadhi (Diseases of nervous system)			Nosa Shalya	
(1) Paksha – Va	(1) Paksha – Vadha	Ch. Chi.	Nasa Krimi	
28 Paralysis of Sudden onset as in cerebral thrombosis			(7) Karna Roga (Diseases of ear)	Foreign body
		Cerebral Embolism	Shalya	Shoola
		Cerebral Hemorrhage	(8) Netra Roga (Diseases of eyes)	Foreign body
(2) Shoola	Painful conditions		Shalya	Conjunctivitis
(3) Akshepa & apatanata	Convulsion		Abhishyenda	Gleucoma
VI Mada, Moorcha, Sangasa			Adhimantha	
(1) Moorcha	Ch. Sk.	Unconsciousness	Other conditions which are painful and require immediate relief	
(2) Balrama	Giddiness or	Vertigo	<b>Gynecological Emergencies</b>	
(3) Sanyasa	Ch.	Coma – Diabetic Uremia Hepatic	(1) Abrijdara	Ch.Chi.30 Menorrhagia & metrorlegha
<b>Udar Roga</b>			(2) Gharbhasharva & Garbhapata	Ch. Sha. 8 Abortion & Misearraige
(1) Teevra Udar Shool	Ch.Chi 13	Acute abdomen	(3) Pushpa – darshan	Ch. Sha. 8 Threatened abortion
(2) Adhmana		Flatulance	(4) Garbhini Rogas	Ch. Sha. 8 Diseases during Pregnancy
(3) Shoola – Tooni	Prati Tooni	Renal Colic Biliary colic	(5) Moodha – Garbha	Su. Ni. Difficult labour
	Udar Shoola	Appendicular and intestinal colic	<b>Medico-legal Emergencies</b>	
(4) Antar Lohita		Internal Hemorrhage	As suggested, it is advisable not to treat the cases where medico-legal complications may arise, unless authorized, still a physician may have to attend such cases. In this condition, a physician should be careful to inform proper authorities and should be careful in history – taking and examination of the patient because he may have to be present before the court of law for evidence, such emergencies are :-	
(5) Chhidrodara		Perforation	(1) Agni – dagdha	Burns and seals

These are the medical emergencies, which a physician comes across in daily practice. Some of the conditions can be treated easily by Ayurvedic treatment. In some, modern technique may be required. For example, oxygen may be required in cases of status asthmaticus or heart failure. But majority of the above can be treated by Ayurvedic means and medicines (Table 1).

### Surgical Emergencies

There are certain emergencies, which require surgical treatment. But it becomes the duty of a physician to start Preliminary treatment and relieve the symptoms upto the time the patient is in the hands of an Okpert. The surgical emergencies are:-

- (1) Sadhovrana  
Ulcers and wounds mostly accidental

NAME	REFERENCE	MODERN NAME
Santata Jwara	All books	Continuous fevers like Typhoid etc.
Karkataka Sannipat or Swasanaka Jwara	Bhava – Mishra	Pneumonia
Abhinijasa Jwara	Swashrat and Bhavprakash	Cerebro-spinal fevers like maningins encapphalin's etc.
Kanthakalya Sannipat	Bhavaprakash	Dyphoria
Sandhija Jwara (Sandhika Jwara)	Bhavaprakash	Ruametic fever
Jwaratisara	Bhavaprakash	Fever with Diarrhea
Kotha – Jwara	Bhavaprakash	Eruptive fevers

Table 1: Different types of Jwara (Pyroxies).

These are the different types of emergencies; an Ayurvedic physician may have to treat. Ayurveda gives a detailed symptom trilogy, description and treatment which require being studied thoroughly in the light of modern advancements and treating the patients with confidence. An attempt is done here to give a description of some of the diseases from Ayurvedic text.

### Sandhiga – Jwara

Kaviraj Gananath Sen Saraswati has named this disease as Sandhiga Jwara. The name Sandhiga Jwara is from Bhava Prakash. Bhava Mishra gives the following description :-

That fever in which there is inflammation with severe pain in joints, loss of sleep, cough, and pain in the whole body, excessive salivation is called Sandhiga Jwara. Along with these symptoms the symptoms of Sannipat Jwara and Ama-bata are present.

For Dyptheria, the description resembles ‘Kanthkabja Sannipat Jwara’.

### Symptoms of this disease

The Sannipat Jwara in which the treat is Choked up with hundreds of particles, there may be breathlessness, delirium, anorexia, burning & restlessness, pain all over the body, excessive thirst & dryness of throat, Lock Jaw, lead giddiness & semi consciousness, Homors; all these symptoms together is called ‘Kantha – Kubya Sannipat Jwara’. Perhaps all the symptoms of dyptheria are noted here. Treatment also has been narrated in Bhava Prakasha.

### Certain symptoms in Sannipat Jwara

**Typhoid state:** This term should not be mistaken for Typhoid fever. Typhoid means ‘Clowding of brain; Typhoid fever is an independent fever while typhoid state is a symptom in fever. The description of this state resembles ‘Tandrika Sannipat Jwara’ described by Bhavmishra as follows: That tridosha Jwara in which there is severe drowsiness super thirst, loose motions, breathlessness cough, pain in the body, high fever throat inflammation, pruritis, the becomes cyanosed hearing difficulty, burning in the body etc. is called Pandrika Jwara.

Here Bhava mishra has given a vivid description of Typhoid state.

In the same way subnormal temperature of fall by crisis is a grave symptoms or complication of fever. The condition resembles ‘Sheetanga Sannipat Jwara’ described in Bhavaprakasha. The symptoms are patient suffering from Sannipat Jwara. Suffers from coldness of the body like ice, associated with breathlessness cough, Hiccough, giddiness or semi consciousness, tremors or rigors delirium, exhaustion, excessive kapha and vata provocation, internal burning vomiting, pain in limbs and body, change of voice is called ‘Sheetagatra or Sheetanga Sannipat Jwara’.

Thus Ayurveda has dealt with the diagnosis and treatment not only of the diseases but also its complications.

### My Experiences in Practice

**Case No. 1: Pralapaka – sannipat jwara:** A patient suffering from Typhoid suffered from semi consciousness and also muttering delirium. My diagnosis was ‘Pralapaka Jwara’.

The following quath was given repeatedly every 3 hrs. & his delirium subsided.

- |                    |     |            |
|--------------------|-----|------------|
| (1) Tagar          | (7) | Aswagandha |
| (2) Pitta – Papada | (8) | Brahmi     |

- |               |      |              |
|---------------|------|--------------|
| (3) Amaltas   | (9)  | Daksha       |
| (4) Musta     | (10) | Chandana     |
| (5) Katuki    | (11) | Dashmoola    |
| (6) Lamajjaka | (12) | Shankhapuspi |

The kanslation is from Hariharprasad Pandya. Latin names from Dravyaguna by Yadavji T. Acharya. The result of this quath was very good; the delirium subsided; the patient had a sound sleep and the fever also came down to normal within 2 to 3 days.

### Case No.2: Dehydration

A patient suffering from severe diarrhea and vomiting was admitted in the Ayurvedic P. G. Hospital. He was passing 10 motions a day for the last 3 to 4 days with vomiting one or two times. No food he could take. Even water was vomited. He was having moderate dehydration also.

Immediately treatment was started. The treatment was –

- (1) Karpoor Rasa – 1 Pill 3 times a day
- (2) Lemon juice + Honey + Water – Just like syrup was given for drinking. At a time not more than ¼ glass i.e. about 1 to 1½ of water should be taken. Shankh bhasma 250 mg to be taken 3 to 4 times with lemon syrup.

Within 1 day the frequency of stool was controlled. Gradually the stool was formed and vomiting subsided. His diarrhea was controlled with 4 to 5 days.

Many more examples can be cited. The ancient physicians were treating such cases. But since last few years, this question has been raised.

### Discussion

Ayurveda can also be useful in emergency conditions and life threatening conditions. Some examples are cited in the paper to justify that ayurveda can also be useful in emergency conditions. The study of literature reveals that ayurvedic scholars were aware of medical, surgical and gynecological emergencies are the appropriate management is prescribed.

### Conclusion

Here it may be concluded that ayurvedic medicine is useful in management of emergency conditions

### Suggestions

In the end I would like to request the practitioners of Ayurveda and specially the teachers in Ayurvedic Institutions & Colleges and also those working in charitable and research institutes.

- (1) To try to understand thoroughly the sutras of Ayurveda in the modern light
- (2) To put them in practice and keep a thorough follow up
- (3) To publish whatever has been gained in practice. Never mind if failure is marked
- (4) To have faith in Ayurveda
- (5) To work with courage and confidence

I am sure an Ayurvedic physician will get name fame and wealth by practicing in Ayurveda.

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