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Review Article

MECHANISM OF SIRAVEDHANA KARMA IN VATARAKTA (GOUT): A CRITICAL REVIEW

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ABSTRACT

Vatarakta is a condition where both *Vata* and *Rakta* are afflicted by *Marga avarana*. The incidence rate of this disease is increasing day by day due to today's sedentary lifestyle. It is a very painful condition affecting the joints of the body and can be correlated with the clinical condition of Gout. *Siravedhana Karma* (venesection) is very beneficial in this condition and indicated frequently by *Acharya*. But now a days this procedure is not in practice though it is very much effective. Due to its suspicious mode of action and the site for the procedure. In this article scholar has explained pathogenesis of *Vatarakta* and mode of action of *Siravedhana Karma*, both locally and systematically. So physicians can use this procedure more effectively in *Vatarakta*.

Keywords: *Vatarakta*, *Siravedhana*, Gout

INTRODUCTION

The ancient scholar of *Ayurveda* dwells on the fact that without involvement of *Dosha* disease wont manifest in the body and among the three *Dosha*, *Vata Dosha* was given the prime importance. *Vata* supports the body by performing functions like movement, perception, filling, separation and retaining¹ but when *Vata* is vitiated it produces various diseases. At the same regards, in *Ayurvedic* texts *Rakta* is also given prime important as describing *Rakta* as the life of living being². *Vatarakta* is a condition where both *Vata* and *Rakta* are afflicted by *Margavarana*³. When aggravated *Vata* is obstructed by aggravated *Rakta*, this obstructed *Vata* again aggravates *Rakta* which ultimately ends up in pathological condition called *Vata Rakta*⁴.

It is of two type 1. *Uttana Vatarakta* 2. *Gambhir Vatarakta*⁵. *Acharya Sharangdhara* has described 8 type of *Vatarakta* depending on dominancy of *Dosha*. 1. *Vataja Vatarakta* 2. *Pittaja Vatarakta* 3. *Kaphaja Vatarakta* 4. *Raktaja Vatarakta* 5. *Vatapittaja Vatarakta* 6. *Vatakaphaja Vatarakta* 7. *Kaphapittaja Vatarakta* 8. *Sannipataja Vatarakta*⁶.

As in *Vatarakta*, *Rakta Dosha* is involved *Acharya Charaka* has suggested *Siravedhana Karma* for its treatment. *Acharya Sushruta* has also suggested the *Siravedhana* in *Vatarakta* and indicate site for the procedure. But this procedure is not in use for this disease due to the suspicious anatomical location of *Siravedhana*.

VATARAKTA

In *Vatarakta* the vitiation of *Vata* and *Rakta* emerge due to *Vata Marga Avrodha* by *Rakta*. It is also known as *Vatashonitam*, *Khuda*, *Vatabalas* and *Aadhyavata*⁷.

Nidana (Etymology)

Generally people of tender health who indulges in sweet food,

leisurely eating and sedentary habits get afflicted by *Vata-Rakta*⁸ because of the following factors:

Factors vitiates the *Rakta*⁹

- Regular consumption of saline, sour, pungent, alkaline, unctuous, hot and uncooked food.
- Regular intake of putrefied or dry substances.
- Meat of aquatic or marshy land inhabiting animal.
- Intake of mutually contraindicated food.
- Eating during indigestion.
- Anger
- Sleeping during daytime, and awakening during night
- Due to injuries and avoidance of the bio purification therapies when needed.
- Improper purification of the body.

Factors aggravates the *Vata*¹⁰

- Intake of less food or abstinence from food.
- Great indulgence in vegetable which posses qualities like penetration.
- Riding over elephant, horses, camel or on vehicles drawn by them for long periods.
- Exhaustion by heat due to excessive wayfaring in hot seasons.
- Indulgence in sexual intercourse.
- Exposure to cold breeze.
- Excessively intake of saline, sour, pungent, alkaline taste.
- Excessive intake of unctuous and hot potency food.
- Intake of mutually contradictory-incompatible foods.
- Improper administration of oleation and other purificatory therapies.
- Excessive consumption of curd, Shukta, buttermilk and alcohol.

Samprapti -(Pathogenesis)

Due to indulgence in *Nidanas* (*Aharaja* and *Viharaja*) which results in vitiation of *Vata* and *Rakta* there will be quantitative increase of these *Doshas* (*Vata* and *Rakta*) but the vitiated *Vata*

further gets obstructed by *Rakta* and vitiates it again further this vitiation will spread to all parts of the body through the vessels because of subtle pervasive nature of *Vata* and *Rakta*, due to tortuous nature of these *Doshas* they get obstructed in joints. Dominancy of *Vata* will be seen in this hence it is named as *Vatarakta*¹¹.

Rogadhithana (Parts of body affected by Vatarakta)

The sites where *Vatarakta* is manifested are hands, feet, fingers including toes and all the joints. In the beginning, the hands and feet are afflicted. From this base, it spreads to all the other parts of the body¹².

Lakshana (Symptoms)¹³

- Inability to tolerate touch
- Pricking and cutting pain
- Wasting
- Loss of sensation
- Severe burning sensation
- Profound heat and redness and soft swelling.

GOUT

The clinical condition of *Vatarakta* can correlated with the gout. The term gout is used to describe the constellation of clinical features that result from deposition of micro-crystals of sodium urate monohydrate or uric acid from hyper-uricemic body fluids. These includes acute arthritis, tenosynovitis, bursitis or cellulites, tophaceous deposits, renal diseases and urolithiasis¹⁴.

Pathogenesis of Gout

In all patients serum urate concentration is the major determinant of risk of developing gout.

Uric acid is the end product of purin metabolism in humans, who lack the enzyme uricase. The miscible body pool of urate in normal individuals is about 1gm, and about 60% of this is replenished daily from catabolism of newly synthesized and dietary proteins. Two-third of urate formed each day is excrete by the kidneys and one-third from GI tract. Due to reducing excretion of uric acid and/or increased production of uric acid the serum uric acid level gets high and produce the disease¹⁴.

Clinical features

- The involvement may be non-articular or poly-articular, but often big joints are affected. It has abrupt onset particularly pain, swelling, tenderness, temperature of first meta-tarsal joints.
- Urate crystals are actually irritating and result in acute pain.
- Frequent attacks disrupt sleep,
- The skin is overlapping red, warm oedematous.
- Sometimes inflammation is of gross that it may resemble cellulites.
- Crystals of sodium biurate may be deposited in bone, in cartilage and joints.
- Mild attacks resolve spontaneously within two days. Severe attacks may last for seven to ten days.

SIRAVEDHANA SITE IN VATARAKTA

Acharya Charaka has suggested *Raktamokshana Karma* in *Vatarakta* and also indicate different modalities for *Raktamokshana* in different condition. He stated that when the symptoms of disease is not steady at one site and changes its locations then *Raktamokshana* should be done through *Siravedhana*.

According to *Acharya Sushruta* in *Padadaha, Padaharsha, Chippa, Visarpa, Vataashonita, Vatakantaka, Vicharchika* and *Padadari Roga Siravedhana* should be done two *Angula* (approx 4cm) above the *Kshipra Marma*¹⁵.

DISCUSSION

In *Vatarakta* vitiated *Vata* and *Rakta* obstructs one another's path. When the vitiated and aggravated *Vata* is obstructed then it becomes more infuriated and deteriorate the *Rakta*. Hence *Vata* is spreading the pathogenesis in the body and the symptoms of the disease may not remain localised and the diseases is also afflicted the other joints of the body. As the fire in the forest is spreads by intensity of wind, the vitiated *Rakta* is spreading by the vitiated *Vayu* in the body and affect almost all the joints of the body. So the first aim of the treatment modalities of *Vatarakta* is to reduce the *Margavrodha* of *Vata*, so it becomes unruffled and the spreading of the disease should be stop.

When *Siravedhana* is performed at the local site of the pathogenesis, it let out the vitiated *Rakta* along with the vitiated *Dosha*, so the obstruction of *Vata* get reduce and the principal aim of the treatment is achieved. Before *Siravedhana* procedure *Snehana, Swedana Karma* are performed, which are very effective for *Vatasaman*. Thus *Siravedhana* procedure is most effective in the management of *Vatarakta* by acting on both the *Vata* and *Rakta Dosha*.

The condition to be correlated by Gout in which purine metabolism is impaired and serum uric acid is high.

When venesection is done, certain amount of urea, uric acid might have oozed out from the local circulation. Due to venesection systemic hypotension occurs so the baroreceptors sense these changes and cells of the kidney's juxtaglomerular apparatus get involved. Detecting by one or both of these mechanisms leads juxtaglomerular cells in the kidney to release renin, causing the transformation of angiotensinogen to angiotensin hormone which has got renal and adreno- cortical stimulatory effect providing excretion of urea, uric acid by the kidneys, this system is called Renin Angiotensin Aldosterone System (RAAS). So, local *Siravedhana* at the site of the vitiation can also help in systemically by helping in excretion of the excessive uric acid and help in the condition of gout.

CONCLUSION

Obstruction of the vitiated *Vata* by vitiated *Rakta* is the main cause of the pathogenesis of *Vatarakta*. Through *Siravedhana Karma* the vitiated *Dosha* are expelled out the body and thus the Mool (root) of the disease is no further and obstruction of the *Vata* is also relieve. Thus by *Siravedhana Karma* physician can demolish the pathogenesis of *Vatarakta* and should manage the disease.

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