

Agnikarma - Answer to an Agony**Dr Shubada V I**

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Abstract:

Agnikarma is an effective para surgical procedure in clinical practice, especially in the pain management of painful joint pathologies. Agnikarma by virtue of its actions and extensive range of Agnikarma upakaranas, is a well proven technique with long-term effect.

Key words: Agnikarma, Shalaka, Upakaranas.

Introduction:

Agnikarma, an Upayantra in classics and a wellknown para surgical procedure in clinical practice is one among the strong area of Shalyatantra. Agnikarma is superior than any other procedures like Ksharakarm ,shastrakarma and Lepadi karmas and chosen when all the measures fail for the particular ailment.1 Agnikarmas has vivid indications and promisable results .

Agnikarmasya karmukata: Agnikarma is considered superior than ksharakarma in its actions and not in its properties. The diseases which are treated by Agnikarma never recur (Apunarbhava)2 ,the special property of Agnikarma what makes it supreme than any other procedures. Dalhana defines or clarifies Apunarbhava concept by quoting— Saadhyanam samyak dagdanam meaning the condition/vyadhi should come under the category of sadhya vyadhi and the approach to the procedure should be as per classical protocol – samyakdagdha.

Classifications:3

Agnikarma is broadly classified into 2 types

- Twachadagda
- Mamsadagda

Sira ,Snayu , Sandhi and Asthi dagdas are not contra-indicated, means they are indicated only during Atyayika Avastha.(in emergency)As Agnikarma is indicated as a last resort in arresting bleeding when sandhana, skandana etc have failed to control bleeding. Bhadrashonaka opines that Twachadagda is sufficient for Twacha and Mamsasrita vayu and Mamsadagda is an answer to sira snayu, asthi and sandhigata vayu .Classical

lakshanas of samyak dagdas have been listed for twacha, mamsa , sira , snayu, asthi and sandhi.

Upakaranas:

Instruments choosen for Agnikarma depends upon their rate of penetration of thermal energy or temperature into the tissues and also based on the site of pathology for e.g.: mamsasrita vyadhi, asthyasrita vyadhi etc. For Twacha dagda Pippali, Ajashakrit, Shalaka Suchi, Godanta etc, for Mamsadagda Loha shalakas like Hema, Roupya, Tamra and Kamsya are selected. The therapeutic heat to reach still deeper sneha dravyas like Ghrita, Taila and Madhu are indicated, as these sneha dravyas have the property of sookshmasiranusaritwa.4

Aakara vishesha:

Agnikarma is also understood on the basis of Aakara of dahanasadya roga Valaya ,Bindu ,Vilekha and Pratarisana as per Sushruta and Ardhachandra, Swasthika and Ashtapada are added by Vagbhata.

The rationale behind choosing each shape inter depends upon vyadhi itself. For eg:If the vyadhi is rujapradhana ,pain can be mostly pinpointed so Bindu type of Agnikarma ,if vaguely distributed Pratarisana type of Agnikarma is preferred.

Yogyayogyas:

Agnikarma has many elective and emergency indications and contra indications. Elective indications like Arsha, Bhagandara, Rujapradhana vatavyadhis like asthi sandhigata shoola and many Shalakyas vyadhis such as Adhimanta, vartmagata vyadhis, painful vatavyadhis like ghrudhrasi,sandhigatavata etc.

Agnikarma has emergency indications like Raktasrava5 (uncontrolled) sadyovrana.

Agnikarma is contra indicated in Bhinnakoshta, Antah shalya, Multiple injuries Dourbalyadi general contra indications.

Agnikarma can be done in all the seasons except Sharad and Greeshma, but if emergency and the vyadhi is treatable only by Agnikarma then the Agnikarma can be done with certain modifications.

Certain Principles⁶ of Agnikarma.....

- Sheeta, Mrudu and Pichila guna pradhana Aahara should be given to the patient before Agnikarma as these have Pittaghna properties.
- Based on Vyadhi, Avastha, Dosha, Rogibala and Ritu, Aakara and Upakaranas of Agnikarma are decided otherwise it results in Pramadadagda which in turn leads to many vyapads including fatal complications.
- Vata and kaphaja vyadhis and balavan rogi are the adhikara of Agnikarma. Rakta and pittaja vyadhis are contraindicated.
- Marma points need to be avoided or protected and special care should be taken during Agnikarma.
- After Samyadagda lakshanas Madhu and Ghrita should be applied.⁷

Vagbhata opines the same and adds that Yastimadhu and Shalimoola also can be chosen for Pralepa after Agnikarma.

In all kinds of Dagdas

Ropana ghrita⁸ is an exceptional formulation in all types of Dagda vrana which consist of Yastimadhu, Madhuka, Lodhra, Sarjarasa, Manjishta, Chandana and Moorva.

Mode of action of Agnikarma:

- Agnikarma is efficient in Vataja and Kaphaja rogas as this therapy has Ushna, Teekshna, Sukshma and Aashukari gunas, which are contrary to vata and kaphadosha.
- By its properties Agnikarma removes srotorodha and increase the Dhatwagni there by relieving the symptoms.
- Therapeutic Heat increases the blood circulation locally and flushes away the Pain producing P substance .
- The increased local temperature increases local metabolism resulting in reduction of intensity of pain

Other relevant / related data⁹:

Moxibustion therapy is found to be a form of heat therapy in Traditional Chinese Medicine (TCM) usually selected to relieve pain. In this therapy dried

plant materials are burned near or on the body surfaces. This therapy was usually practised on Dysmenorrhoea, urinary incontinence, to relieve the pain of Knee secondary to Osteo arthritis and heel pain etc.

This heat therapy was intended primarily to relieve pain. Heat produces Vasoconstriction at burning point and Vasodilatation around the part. Heat increases the peripheral arterial blood flow and microvascular permeability.

Conclusion:

Agnikarma is the treatment modality where Therapeutic heat is given to the pre determined sites with appropriate Dahanakarma upakaranas. As the procedure is completely under the control of an Ayurveda vaidya chances of mishaps are uncommon. In Ayurveda system of medicine Shalya tantra has been globally recognized by Ksharasutra, Ksharakarma, Raktamokshana and also by Agnikarma. Instantaneous relief of pain by Agnikarma is observed in pain dominant conditions like Gridharsi, vatakantaka and Greevahundana etc where patient is primarily concerns about his pain. Agnikarma according to its indications should be properly followed as per the classical instructions. As rightly quoted by Sushruta that- Ksharakarma, Shastra karma and Agnikarma should be cautiously performed if neglected results in fatal issues.

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