RAKTAMOKSHANA IN GRIDHRASI

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ABSTRACT

In ayurveda gridhrasi (sciatica) is explained as one among 80 types of Vata imbalance disorders. It is a painful condition afflicting the lower limbs called ‘Gridhrasi ’wherein the pain along with stiffness, sensation of pins and needles, gripping and pulsations start in the spik or the buttocks [gluteal region] initially and gradually encroach the regions of the posterior aspect of kati (pelvis and lumbo sacral regions), ooru (thigh), jaanu (behind the knee), jangha (leg) and pada (foot) in that order. Gridhrasi can be compared with the ‘Sciatica’ explained in the modern texts due to a close resemblance in the manifestations of both the conditions. Raktamokshana is considered one among Shodhana procedures. Raktamokshana means letting of blood which is mainly indicated in certain disease state especially when there is Rakta-dushti and also during Physiological condition.

INTRODUCTION

‘Gridhra’ means vulture, Vulture is fond of bird, and has a particular fashion of eating meat. It pierces its beak deeply in the flesh and then draws it forcefully, causing severe pain. The pain in gridhrasi is also of the same kind hence the name is given. Also, because of the persisting severe pain in the patient has a typical gait i.e., slightly titled towards the affected side and affected leg in flexed position and another leg extended this is resembles with that of vulture.

According to Acharya Charaka ‘Gridhrasi’ is one among the ‘Nanatmaja Vata Vyadhi’ which is characterized by Stambha (stiffness), Ruka (pain), Toda (pricking pain) and Spandana (frequent tingling). These symptoms initially affect Sphika (buttock) as well as posterior...
aspect of Kati (waist) and then gradually radiates to posterior aspects of Uru (thigh), Janu (knee), Jangha (calf) and Pada (foot).

According to Acharya Sushruta, two Kandara i.e. ligament of heel and all the toes are affected by vitiated Vata. So movement of the lower limb get restricted; it is known as Gridhrasi.

**RAKTAMOKSHANA**
The term “Raktamokshana” comprises of two words, ie., ‘Rakta’ & ‘Mokshana’.

**Rakta**
Mokshana: The word ‘Mokshana’ is derived from the root ‘moksha’ means ‘to relieve’ or ‘to let out’. Therefore letting out of blood is known as Raktamokshana.

**CLASSIFICATION OF RAKTAMOKSHANA**
Depending on various factors, the media used for bloodletting varies. In absence of specific media any one of above said can be used for the purpose.

In case of blood being vitiated by vata dosha, it should be let out by Shringa. Similarly ‘Pitta vitiated rakta’ should be let out by Jalauka and ‘Kapha vitiated rakta’ should be let out by Alabu. In cases of vitiation by two/all the three doshas together, Siravyadha or Pracchanna are to be adopted for letting out the blood.

Application of Shringa can bring out blood from an area of ten angulis around; Jalauka can suck from an area of one hasta, the Alabu from an area of twelve anguli, Pracchanna from an area of one anguli, while Siravyadha can purify the entire body.

In deep seated pathology, Jalauka is preferable; in pindita rakta ‘Pracchanna’ is useful. In case of generalized vitiation of rakta, Siravyadha is advised, while Shringa and Alabu should be used, if pathology is superficial / uttthana.

**Indications for Raktamokshana**
Bloodletting as a method of treatment is indicated in Sotha, daha, paka, raktavarna, asrusruti, Vatarakta, kushta, vata diseases having severe pain, pani roga, slipada, blood vitiated with poisons, granthi, arbuda, apachi, ksudraroga, raktadhimantha, vidari, stanaroga, debility and heavity of the body, raktabhisyanda, tanda, putigraha, putiasya, putideha, yaktu-pliha roga, visarpa, vidradhi, pidaka, paka of karna, oshta, ghrana, vaktra, sironuja, upadamsa
and raktapitta. In all diseases, bloodletting can be done either by *Shringa, Jalauka* or by *Siravyadha*.

**Contraindications of Raktamokshana**
In the following cases, bloodletting is contraindicated: Generalised swelling, swelling in debilitated persons, caused by sour diet and that in those suffering from Pandu, Arshas, Udara, Shosha and in Garbhini.

**5 Different Methods of Raktamokshana**

**Jalaukacharana:** It is the method of blood letting by using leeches. This is a simple procedure.

**Prachanna:** Incising the diseased part with different instruments is called prachanna.

**Sringa:** Impure blood is drawn with the help of cow's horn by applyig it over the incised area is called sringa.

**Siravyadha:** Siravyadha is excising a particular blood vessel.

**Alabu:** In this procedure dried bottle is used. First incision is made on the skin, then alabu is placed tightly. Before placing the alabu, a small cotton swab is ignited inside it. Due to negative pressure the blood will flow to the surface. After the removal of 30-60ml blood, alabu is pulled out and wound is covered with drugs to heal.

**SITES OF RAKTMOKSHANA**
According to acharya Sushrata: 4 angula above or below from janu sandhi.
According to acharya Charak: In between the Kandara and gulf.

**PROCEDURE OF SIRAVDHYA**

**Purva Karma (Pre Procedure)**
- Indications of ‘Siravyadha’: For ‘Swastha’ (Healthy individual) and ‘Aatura’ (Diseased one).
- Contraindications of ‘Siravyadha’
- Proper Instrumentations
- To make the patient fit for ‘Siravyadha’
- Take written inform consent.
**Pradhana Karma (Main Procedure)**
- Position of patient or healthy individual
- Consideration of correct vein according to disease
- Locking of the vein
- Venepuncture
- Observation

**Pashchat Karma (Post Procedure)**
- Proper dressing and tight bandaging
- Diet and advice
- Follow up

**Proper Instrumentations**
Following material should be arranged prior to the ‘Siravyadha’ (Ayurvedic venepuncture) procedure i.e. proper place (atmosphere of room where ‘Siravyadha’ would be carried out must be pleasant), water container, hot water, cold water, gauze piece, swabs, bandages, tourniquet, sphygmomanometer, kidney trays, marking glass beaker, bard parker’s knife handle, surgical blades no. 11/12, scalp vein (no. 20), Ayurvedic massage oil, hot fomentation machine, aseptic and antiseptic solutions, chairs, dressing table etc.

**Make patient fit for ‘Siravyadha’ (Ayurvedic venepuncture)**
- Temperature, pulse, respiration and blood pressure should be taken as prior to ‘Siravyadha’ (Ayurvedic venepuncture).
- Routine blood investigations, blood group, blood sugar etc. should be carried out as pre-operative assessment of the patient.
- *Sharirika bala* (physically strength) and *Manasika bala* (psychological state of the patient) should be assessed.
- The patient should be duly fomented and anointed with oily preparations. Liquid diet or gruel should be given prior to the entire procedure.

**Take inform consent**
It is more advisable to take written inform consent of the patient before going to ‘Siravyadha’ (Ayurvedic venepuncture) as it gives information regarding the procedure to the patient and also it is useful in medico-legal cases in favor of the physician.
‘Siravyadha’ (Ayurvedic venepuncture) procedure
Bloodletting should be done by the physician on the day which is neither very cold nor very hot, neither before fomentation nor after too much of fomentation. It should be adopted after the patient has been satisfied with a drink of thin gruel. (Ref: Su. Su. 14/31). The patient should be asked to sit nearby (the physician) in erect posture; then he should be tied with either tourniquet or band of cloth, leather, inner bark of trees, creeper or any other material without endangering his life; controlled/restrain from movement neither very firmly nor very loosely; then search of the site of puncture with the appropriate instrument. (Ref: Su. Sha. 8/6).

Amount of blood to be collected
- According to acharya Sushruta one prastha is advocated as the maximum limit of bloodletting with excessively vitiated Dosash.
- According to acharya Dalhana:
  - Uttam matra - 1 Prastha
  - Madhyam matra - 1/2 Prastha
  - Awar matra - 1/4 Prastha

Complications of venepuncture
One of the major complications which lead up to sudden death is unconsciousness due to psychogenic shock.

If patient become unconscious while performing ‘Siravyadha’ (Ayurvedic venepuncture), the following points should be considered –
- Immediate removal of the instrument from the wound.
- Cold sponging.
- Proper ventilation and aeration.
- Consolation and assurance to the patient.
- Further venepuncture done immediately after the management of unconsciousness.
- If the unconscious reappear then the patient should be called for venepuncture after 2 – 3 days.
Post procedure review

Proper Massage & Dressing: After completion of procedure whenever blood flow stops automatically, proper dressing with the help of Ayurvedic dressing oil should be carried out and tight bandaging should be applied on the wound.

Diet and Advice

By the depletion of tissue due to bleeding, the Agni (digestive power) becomes weak and Vata becomes aggravated; hence the patient should be treated with food which are not very cold, which are light (easily digestible), unctuous, which promote blood formation and either slightly sour or devoid of sour. (Ref: Su. Su. 14/37-38).

After bloodletting, the patient should be asked for avoid exercise, copulation, cold breeze, day sleep, use of alkalis, pungent substances in food, grief, much conversation and indigestion till he attains good strength.

PROBABLE MODE OF ACTION OF RAKTAMOKSHAN IN GRIDHRASI

Kandra is updhatu of rakta and kandra is dushya in gridhrasi. As gridhrasi is vataj nanatmaj disease and gridhrasi is due to vyan vayu prakopa and this vyan vayu is related to blood circulation. So the aama which obstruct the srotas or channels and gets eliminated and vayu gets regulated (vatanulamana).

CONCLUSION

Raktamokshana can cure the disease when other treatment does not have the effect on disease/ when other treatment fails. It gives immediate relief in pain of Gridhrasi.

The symptoms of samyak siravedha are Laghavam, Vedanashanti, visravit rakta, it means the pain arising from a disease condition get subsided followed by decrease in the symptoms of the disease so siravedha can be used in pain predominant diseases.