Int J Ayu Pharm Chem

REVIEW ARTICLE

www.ijapc.com

e-ISSN 2350-0204

Scientific Interpretation of Vaman

Praveen Lendal^{1*}, C.D. Vaikos², P.G. Sali³

^{1,2,3} Sharir Rachana Department, Government Ayurvedic College, Nanded, (MH), India

Abstract

Vaman is sanshodahan chikitsa (biopurification treatment) in which vitiated doshas (toxins) are eliminated from body through kaphamoola sthan. It is useful in healthy as well as ailing persons. It is neglected due to fear of complication. The present paper endeavor to interpretation of Vaman karma (procedure) in a scientific way which helps the physician to propagate vaman as treatment on a large scale for respiratory disorders, skin disorders, obesity, prediabetic and much more.

Keywords

Vaman, Kaphamoola Sthan, Vaman Karmukta, Vaman



Received 17/10/15 Accepted 29/10/15 Published 10/11/15

INTRODUCTION

Ayurveda is well known to entire world because of its unique method of treatment. (Government of Russia has given legal recognisation to profession of Doctor of Ayurveda medicine).

A striking feature of sanshodhan chikitsa is brought to notice by Acharya Charak. He mentioned that Vaman Apunarbhavatav¹ chikitsa (means recurrence of disease). Vaman is one of the five pradhan karmas of the Panchkarma Kaphai disorders².Vaman used to treat eliminates the vitiated kapha dosha from our body likewise in modern medical science stomach wash is used to eliminate toxins in some cases of poisoning. This may be comparable to vaman mentioned ayurvedic texts. The success of this or any therapeutic procedure depends upon the of karma³ administration proper (procedure). The administration of *Vaman* followed by appropriate principles as stated by Acharyas will help to minimize the pre and post procedural complications very effectively. This scientific interpretation also provides anatomical, physiological pharmacological evidences to prove the principle postulated by *Charak*.

AIM

Critical study of the *vaman karma* and its *karmukta* (mechanism of action) in relation with modern medical science

OBJECTIVES

- 1. To consider *vaman karma* in terms of modern medical sciences.
- 2. To recognize *vaman* as a safe treatment.
- 3. To determine the biochemical changes before and after *vaman* karma.

MATERIALS AND METHODS

- 1. A detailed literary review of *VAMAN* and EMESIS mentioned in all classics of *Ayurveda* and modern sciences. References are logically analyzed.
- 2. Scientific studies carried out in the recent past by some research scholars.

REVIEW OF LITERATURE

Vaman is carried out in three steps —poorva karma (pre-procedure), pradhankarma (chief procedure) and paschat karma (post procedure).

1. POORVA KARMA

Snehapan (internal oleation) should be done for 3 to 7 days. Even if the lipid level increases during snehapan it is transient and comes to normal after *samyak shodhan*⁴.

Swedan (steam) and kaphotkleshkar ahar (for utkleshan of dosha) for example Dadhi (curd), maans (meat) is given to the patient on previous day of vaman. It fascinates vitiated doshas to collect in koshtas (stomach), so that it can be removed by vaman karma. If these doshas remain in imbalanced state in body they can causes various diseases.

2. PRADHAN KARM (CHIEF PROCEDURE) OF VAMAN

After bath patient is made to sit on a janusam aasan⁵ (chair of knee height). Now dravdravya for example milk, ikshuras (sugarcane juice) is given to the patient for aakanthpaan (till he feels full upto his throat). This will cause distension of stomach and oesophagus which in turn stimulates vagus nerve . Vagus nerve stimulates vomiting centre and emesis occurs. Before administering the vaman aoushdhi, vaidya should enchant the verses mentioned in the siddhi sthan. Now wait for one muhurta (nearly 48 min) for Vegas (actual event of vomiting). Vaman aoushdhi has following gunas⁶ (properties).

- Asatmya (unsuitable)
- *Beebhtsa* (aversive)
- *Durgandha* (unpleasant smell)
- Durdarshana (ugly looking)

Cerebral cortex has vomiting centre which is stimulated by psychic stimuli such as nauseatic odor, sight or noise⁷. Due to *beebhtsa* and *durdarshana guna* visual sensory impulse goes to vomiting centre and vomiting reflex occurs.

It has following *gunas* (properties)

- Ushna swedane ushna⁸
- Tikshna shodhane tikshna⁸
- Sukshma vivrane sukshma⁸
- *Vyavayi* spread all over the body without being digested⁹
- Vikasi sandhibandh shaithilya⁹
- 3. PASCHAT KARMA (POST PROCEDURE)
- After *samyak prayog*, clean the limbs and face
- Rest for one *muhurta kal*
- Suitable *dhumapan*
- Tambul sevana
- Nivatgrihe shayan
- snehokta acharvidhi
- Sansarjan karma

SAMYAK YOGA

Doshas are eliminated in sequence firstly kapha then pitta and lastly vata (anil). Pittante vaman is considered shreshta (proper). Hridaya shuddhi, Murdha shuddhi, laghutva are achieved.

DISCUSSION AND SCIENTIFIC INTERPRETATION

Hridaya have two meanings10 viz., Heart and Brain. Here hridaya may be heart or brain because both are able to carry dravya all over the body in a short duration by using their circulatory or nervous system, respectively. Ooushdhi above have mentioned gunas towards Hridaya because of its swavirya. Here Swavirya may be vascular path (veins) or sensory stimuli by nerve (chemo- receptor and baro- receptors) which are connected to heart and brain, respectively. Now it goes to all sthool(macro) and sukshma(micro) strotas through various dhamanis. Here dhamanis may be vascular path (arteries) or motor impulses by nerve. At this place (srotas) liquification of doshas takes place by virtue of Aagneya guna and break down into several particles by Tikshna guna. Due to anupravanbhav these doshas enter into Aamashaya (stomach). These doshas are stimulated by *Udan vayu* .

Vaman aousadhi has urdhabhag prabhav due to its agni and vayu mahabhut pradhaanya. Combined effect of both of the above facts is that doshas move towards oral cavity and are finally removed through mouth. Here urdhvabhag prabhav can be

related to ability of certain drugs that direct induce chemoreceptor trigger zone (CTZ). If *vegas* (urges) do not occur, patient should be guided to use *Erandnal* (small stick of *errand* plant) or fingers to induce *vegas*. It can be correlated with mechanical stimulation of pharynx¹¹. It is one of the causes of vomiting which eventually it leads to vomiting reflex. *Vaman karmukta* (mechanism of action) can be best illustrated by flow diagram no.1

According to modern sciences drugs act on

- Vomiting centre of medulla
- Chemo Receptor Trigger zone (CTZ) VOMITING REFLEX¹²:

Sensory impulses for vomiting due to irritated or distended part of GI tract. These impulses are transmitted to vomiting center through vagus and sympathetic afferent fibres.

Vomiting center lies bilaterally in medulla oblongata near the nucleus tractus solitaries. Motor impulses from the vomiting center are transmitted through V, VII, IX, XII cranial nerves to the upper part of GI tract and through spinal nerves to diaphragm and abdominal muscles.

PRECAUTIONS ¹³TO BE TAKEN DURING VAMAN Lalatpratigrahe - support patient's forehead

Parshwa apgrahane - support patient's waist

Nabhi prapidane - rubbing of umbilical region

Prushta mardane – massage over back region in pratilom gati (upward direction)

- Support to patient's forehead and waist, prevents damage that may occur due to fall or imbalance during procedure.
- Rubbing of umbilical region and massage over back region facilitates *vegas*. It also relives pain by stimulating the release of opoid peptides for example enkephalin, dynorphin and endorphin from pituitary which close the gate and block the pain signals. It is based on gate control theory¹⁴ for pain proposed by psychologist Ronald Melzack and anatomist Patric wall.
- In association with ACTH, endorphin is secreted. Under normal condition endorphin is not secreted in enough quantity to have effect on body¹⁵.
- It means that whenever endorphins are secreted ACTH is also secreted. But ACTH may cause mild increase in B.P
- Patients advised for *vaman* should do exercises which put pressure on abdominal muscles for at least seven days prior to the

vaman karma. So that post procedural abdominal pain can be minimized.

- Vitals- B.P. must be noted before, during and after *vaman*. Patients with hypertension take special precautions and should not massage back during *vaman*.
- Doctors should keep in mind that there is mild increase in Blood pressure, pulse and sweating during *vaman*.

OBSERVATIONS

Table no.1 shows observation¹⁶ indicate the stages of *doshas* in *vaman karma*.

• Sweating may be attributed to sympathetic motor action.

Table 1 Observation¹⁶ indicates the stages of *doshas* in *vaman karma*

Sr.	Observation	Stages of Doshas
no.		
1.	Sweating	Doshas pravilayan
		(liquidifies the
		doshas/toxins)
2.	Lomharshan	Doshas are detached from
		their site
3.	Kukshi Aadhman	Reach to kukshi (stomach)
	(distension of	
	stomach)	
4.	Hrullas (nausea)	Urdvamukhi (towards
	and	mouth)
	Aasyasravan	
	(salivation)	

When *doshas* reach the stomach, they affect gastric mucosa which stimulates vagal and enteric nervous system. Vagus and enteric nervous plexus carry impulse to vomiting centre and emesis occurs. Nausea is unpleasant sensation which induces the desire of vomiting .It is characterized by

secretion of large amount of saliva containing more quantity of mucus. Salivation attributed be may nervous parasympathetic system. Mild elevation of B.P. (systolic and Diastolic), pulse, temperature and respiration may be attributed to sympathetic stimulation¹⁷.

STRUCTURAL PATHWAY OF VAMAN¹⁸ (EMESIS)

- Anatomically vaman is highly integrated and complex reflex involving both autonomic and neural pathway.
- Beginning of antiperistalssis, this runs from ileum towards the mouth through intestine. Velocity of antiperistalsis is about 2 to 3cm/second.
- Deep inspiration followed by temporary cessation of breathing.
- Closure of glottis
- Closure of glottis and cessation of breathing restricts entry vomitus into lung.
- Upper and forward movement of larynx and hyoid bone.

- Elevation of soft palate restricts entry of vomitus into nasopharynx.
- of Synchronous contraction diaphragm, intercostal muscles and abdominal muscles with characteristic leads into jerk, elevation of intra abdominal pressure.
- Compression of the stomach between diaphragm and abdominal wall resulting into intragastric pressure.
- Relaxation of oesophageal sphincter.
 Epiglottis is closed and larynx is raised to open the upper oesophageal sphincter.
- Opening of oesophageal sphincter results in emesis.

NEUROGENIC PATHWAY OF VAMAN KARMA

Table no.2 shows the action of various nerves on respective organs during emesis.

Table2 Neurogenic Pathway of Vaman Karma
Sr. NERVE ACTION ON STRUCTI

Sr. No.	NERVE	ACTION ON STRUCTURES
1.	VAGUS	Oesophagus, Lower & upper sphincters, Body of stomach, Pyloric antrum
2.	SPINAL NERVES	Respiratory muscles-inspiration, Abdominal Muscles -

contraction

3. PHRENIC Diaphragm descends ,Increased intra-abdominal pressure

VOMITING ACT-PHASES

- In the retching phase, the abdominal muscles undergo a few rounds of coordinated contractions together with the diaphragm and the muscles used in respiratory inspiration. For this reason, an individual may confuse this phase with an episode of violent hiccups. In this retching phase nothing has yet been expelled
- In the expulsive phase, intense pressure is formed in the stomach brought about by enormous shifts in both the diaphragm and the These shifts abdomen. are, essence, vigorous contractions of these muscles that last for extended periods of time - much longer than a normal period of muscular contraction.
- The pressure is then suddenly released when the upper oesophageal sphincter relaxes resulting in the expulsion of gastric contents. Individuals who do not regularly

exercise their abdominal muscles may experience pain in those muscles for a few days.

SAMYAK YOGA¹⁹

Doshas are eliminated in sequence firstly kapha then pitta and lastly *vata* (anil). Pittante vaman is considered *shreshta* (proper). *Hridaya shuddhi*, *Murdha shuddhi*, *laghutva* are achieved.

Acharya describe vaman result into indriyasamprasad (All the five sense organ functions properly). *Hridaya* is site of all the *gyanendriyas*²⁰. Here *hridaya* may be brain. Only brain can control all the five senses.

Laghutva (lightness of the body) is due to removal of doshas in imbalance state. Doshas (toxins) in case of vaman are mostly fatty substances because recent studies revealed that there is decrease in LDL, Triglycerides, serum cholesterol after vaman²¹.

CONCLUSION

According to this study we can conclude that:

1. Vaman vidhi (procedure) and vaman karmukta (mechanism of action) described by Acharya Charak has scientific base in Ayurveda and Modern medical sciences also.

2. Vaman is a safe treatment if we follow guidelines stated by Acharyas and precautions mentioned in this study.

REFERENCES

- 1 Acharya Priy Vrata Sharma (2002), Carak samhita of Agnivesha, Chaukhamba Sanskrit pratisthan, Delhi (sutrasthan 16/20) page no.252
- 2. Dr.Ganesh Garde (2009), Sarth Vagbhata, Ashtang Hridaya, Chowkhambha Surbharati publication, Varanasi (sutrasthana 1/25) page no.5
- 3. Acharya Priy Vrata Sharma (2002), Carak samhita of Agnivesha, Chaukhamba Sanskrit pratisthan, Delhi (sutrasthan 15/4) page no.232
- 4. Dr. Vasant patil, (2009), Effect of snehapan (Internal oleation) on Lipids: A critical review, Ancient Science of life, vol.29, No. 2, Page no.40-47
- 5. Acharya Priy Vrata Sharma (2002), Carak samhita of Agnivesha, Chaukhamba Sanskrit pratisthan, Delhi (sutrasthan 15/11) page no.242
- 6. Anantram Sharma (2010), Sushruta samhita, Chowkhambha Surbharati publication, Varanasi
- 7. K. Sembulingum (2013), Essentials of Medical physiology 6th edition, Jaypee publication, page no.277
- 8. Acharya Priy Vrata Sharma (2002), Carak samhita of Agnivesha, Chaukhamba

- Sanskrit pratisthan, Delhi (sutrasthana 1/18) page no.3
- 9. Brahmanand Tripathi (2012), Sharangdhar Samhita, Chowkhambha Surbharati publication, Varanasi, page no.50 10. Dr. Vaikos C.D. (2013), Concepts of Hriday(Ayurved) in the sense of Heart and Brain, IJRAP, vol.4, Issue1, Page no.92-95
- 11. K. Sembulingum (2012), Essentials of Medical physiology, 6th edition, Jaypee publication page no.276
- 12. K. Sembulingum (2012), Essentials of Medical physiology, 6th edition, Jaypee publication page no.276
- 13. Acharya Priy Vrata Sharma (2002), Carak samhita of Agnivesha, Chaukhamba Sanskrit pratisthan, Delhi (sutrasthan 15/11) page no142
- 14. K. Sembulingum (2012), Essentials of Medical physiology, 6th edition, Jaypee publication Page no.841
- 15. A.C. Guyton (1991), Textbook of Medical Physiology, 8th edition, W.B. Saunders publication, Philadelphia. Page no.851
- 16. Acharya Priy Vrata Sharma (2002), Carak samhita of Agnivesha, Chaukhamba Sanskrit pratisthan, Delhi (sutrasthan 15/11) page no.242

- 17. Dr. Bharati Gupta *et.al*, (2012), Physiological and biochemical changes in Vaman procedure, Ayu, vol. 33, issue3, Page no.348-355
- 18. K. Sembulingum (2012), Essentials of Medical physiology 6th edition, Jaypee-publication page no.276
- 19. Acharya Priy Vrata Sharma (2010), Carak samhita of Agnivesha, Chaukhamba Sanskrit pratisthan, Delhi (kalpsthan 1/15) 20. Acharya Priy Vrata Sharma (2002)
- 20. Acharya Priy Vrata Sharma (2002), Carak samhita of Agnivesha, Chaukhamba Sanskrit pratisthan, Delhi (sutrasthan 30/4) page no.440
- 21. Dr. Bharati Gupta *et.al*, (2012), Physiological and biochemical changes in Vaman procedure, Ayu, vol. 33, Issue 3, Page no.348-355