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Role of Upanaha as a Component of Pain Medicine

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ABSTRACT

Ayurveda, the traditional medicine of India has emphasised on various modalities of treatments. This includes both the internal and external treatments explained for different diseases. "A fired building is best saved by pouring water", in the same way tropical problems are successfully managed by tropical treatment rather than systemic treatment. Upanaha, poultice is a kind of topical application. It helps in reducing vatadosha, sheeta (coldness), shola (pain), sthambha (stiffness), gourava (heaviness). Pain medicine is one of the emerging areas of research and development. Upanaha is proved effective in the management of pain and other inflammatory conditions mainly of Locomotor System. An attempt has been made to collect references about upanaha from the classics of Ayurveda and reviewed systematically.

KEYWORDS

Ayurveda, Upanaha, Topical application, Pain medicine.



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INTRODUCTION

The treatment modality in *Ayurveda* which understands the human being and the disease in him in a holistic perspective are rationally designed in three categories¹.

Daivya Vyapaashrayachikitsa- Destiny or to be healed in its appropriate time. Yukti The Vyapashrayachikitsaphysician's planning and execution of the treatment in the given context; yukti vyapaashraya chikitsa further includes planning of Systemic medicines(*AntahParimarjana*); Topical or External Therapies (Bahir Parimarjana) and Surgical Intervention *Pranidhana*) (Shastra and lastly, Satwavajayachikitsa-Controlling the mind/stress management/taking the patient into confidence².

Bahir Parimariana-Topical/external therapies includes therapies like abhyanga, swedana, parisheka etc using twak as the route of administration of medicine. Upanaha is a local treatment where in a combination of *churna* (powdered herbs) are made into paste using snehadravya (unctuous materialsoils/ghee/fat/bone marrow), kinva (fermented liquid), made hot and applied over the required site. This is meant to reduce the local inflammation of the site and also to act as a topical/local analgesic.

Due to increased awareness of side effects of NSAIDs and analgesics, use of natural remedies especially topical applications are being explored due to their relative safety. Topical agents in the form of creams, ointments, gels, lotions, solutions, pastes, and sprays are widely used in practice since due to their instant action. ages Traditionally used topical analgesic agents includes various NSAIDs, capsaicin, local anaesthetics (e.g. lidocaine), rubefacients or counterirritants (e.g. menthol, camphor, others), and herbal products (e.g. arnica, comfrey and others) which are used in routine practice as an alternative to combat many acute and chronic painful conditions.

ETYMOLOGY AND DEFINITION

The word 'upanaha' is split as upa + naha, in which *upa* is *upasarga*(prefix) which means near, *naha-bandhane* means to tie or bind³. The meaning of *upanaha* are bandage⁴, bandage with warm paste of medicaments like *charma*(leather) $pata(cloth)^{5,6}$, bandage applied for vranapaka(suppuration of wound). Most of the classical texts have considered *upanaha* as bandhana and lepa.AcharyaCharakahas mentioned the duration ofupanahainsagnitype of upanahasweda. To prevent the burning sensation the *upanaha*



that is applied at night should be removed in the morning and vice versa. In winter, this duration can be increased⁷. This type of fomentation is without involvement of direct contact with fire, so it is niragni sweda⁸. Acharya Charak has mentioned this under niragni swedan, while Chakrapani commented this kind of fomentation under both sagni and niragniswedan.Sagni upanaha is termed as sankarasweda. Niragni Upanhacauses fomentation by obstructing the radiation of heat from the body due to thickness of the paste used for poultice. Practically, after few hours the of upanahaconverts sagni type niragnitype of upanaha because the hot dravya remains hot for few hours after which it prevents loss of body's internal heat and acts as *niragnisweda*.

Three perspective of *upanaha* is perceived by *Sushruta* in different context,

- 1. Saptopakrama: (seven folds of treatment for inflammatory swelling): For the purpose of converting amasopha into pakvashopha.
- 2. Shasthiupakrama: The aamashopha gets regressed with upanaha and kinchitpakwashopha will be become pakva depending on the condition.

There are three types of *upanaha sweda*. They are as mentioned below⁹

1. *Pradeha*: In this the vatahara drugs are made into paste with amlakanji etc. and

then added with lavana and sneha is applied to the affected.

- 2. Sankara or Pindasweda: Here the drugs of Kakolyadi, Surashadi, Eladi Gana are selected along with other drug Atasi, Tila, Sarshapa etc. and made to kalka,krisara, vesavara form and then pottali is being prepared for swedana.
- 3. *Bandhgana*: The required drugs are made into paste and then heated. This material is then kept in a cloth and tied to the affected part.

The action of *upanaha* on our body can be understood at different biological level. Each level is depicted below -

Effect of Upanaha on Dosha

Upanahasweda is VataShamak, by virtue of its ushna, snigdhaguna. It combats with the properties of vatadosha like sheeta, ruksha, laghuguna. The associated symptoms due to prakopa of kapha dosha are also reduced due to properties like ushna, tikshna properties of swedan dravyas. Thus at the same time, the symptoms produced by the vata and kapha are being reduced by upnaha swedana.

Effect of Upanaha on Dushya

Upanaha swedayogya drugs are mainly of guru, ushna, tikshna and sukshma quality. By virtue of these qualities drug enters the dhatus one by one i.e. rasa, rakta, mamsa, medaasthi,majja and sukra. Because of increased temperature, the waste products



are removed from the *dhatus* through increased blood circulation and sweating.

Effect of *Upanaha* in *Agni*

Ushna, *tikshna gunas* of drug intensify the *dhatwagni*. It helps in local tissue metabolism thushelps in removal of waste products from the body.

Effect of Upanaha on Srota

The *swedan karma* itself clears the *srotas* of the body. *Ushna*, *tikshna*, *sara* and *sukshma* properties of drugs opens up the *srotas* which are under obstruction. By virtue of *pachana* properties the *dosha* liquefies and finally removes the *upalepa* of the *srotas*.

Modification of *Upanaha*

Upanaha chkitsa is not only used as a part of pain medicine, it also does langhana, brimhana etc. karma on the body itself. Some modifications of upanaha are being made in recent days for easy to use purpose in OPD/IPD level.

A) Raping method: In this method upanaha dravyas are prepared in liquid consistency. Then to keep two/three bandage roles for soaking in that upanaha. After proper soaking, one can use it for bandaging or raping in a particular part of the body.

Advantage

- 1. Easy to apply in different parts of the body.
- 2. Proper pressure can be maintained.

- B) ShiroUpanaha: Application of upanaha on shiro is called shiro upanaha. It is used for headache, facial palsy etc. diseases. Shiroupanaha is technically difficult in women due to long hairs
- C) Sthoulyahara upanaha: Application of upanahato abdomen in obese patients. Here lekhana dravys are main the ingredients. The upanahadravyas are applied to the abdomen uniformly followed by tight covering by cloth which helps in reduction of belly fat.

DISCUSSION

"A fired building is best saved by pouring water", in the same way tropical problems are successfully managed by tropical treatment rather than systemic treatment¹⁰. The action of *upanaha* is based on two factors. One is its karma, i.e. swedankarma, vestanakarma and another is based on the drug used. Vatadosha and ruja is best treated with *upanaha*. The ingredient of upanaha is for alleviating vatadosha. The karma i.e. bandhanaor vestana (tying of cloth) treats vata dosha¹¹.Ushnata of drugs helps in alleviating coldness, pain, stiffness. This therapy is administrated to prolong thermoregulation to the affected area by radiation effect. The bioavailability of the drugto the affected site increases by regulation of the heat effect. Out of four



Tiryakdhamanis, each one is divided into hundred and thousand times thus become innumerable. These supply the body like network and their openings are attached to roomakupa. Virya of abhyanga, parisheka, alepa etc. enter into the body after undergoing paka by bhrajak pitta in the skin.

Effect of *Upanaha* on pain regulation through neural pathway:

The action of the skin is coordinated with the functions of other excretory organs. The secretion of sweat is under autonomous control. The tactile sensation in the skin including hairs and its secretion produces some nervous changes. Thus, sudation can bring about changes indirectly on the autonomic nervous system and the heat can bring about changes in conduction of nerve stimuli, by changing sodium ion concentration.

Secretion of sweat is produced by direct or reflex stimulation of the centres in the spinal cord, medulla, hypothalamus or cerebral cortex.

Sweat secretion is increased with the rise of external body temperature. This is also called thermal sweating. This thermal sweating is produced in two ways;

By the rise of body temperature directly affecting the hypothalamus and reflex from the stimulated 'warm' nerve endings in the skin. Thus by exposing the small area of skin to the heat, for example by exposing hands to the heat not only the hand, entire body sweats, because the spinal segments innervating the given area of the skin and of the other segments. This thermoregulatory system indirectly reduces pain in the affected part.

Biophysical effect of temperature on pain regulation

Circulatory effect- there is stimulation of superficial capillaries and arteriole causing local hyperaemic and reflex vasodilatation.

Metabolic reaction- temperature will rise the chemical activity in cell and metabolic rate will increase. The energy expenditure will increase and protein denaturizing will occur in human tissue.

Vascular effect- there are three factors that cause vasodilatation — an axon reflex release of chemical mediators, secondary to temp elevation, local spinal cord reflex.

Neuro-muscular effect- heat is effective to provide analysesic and assist resolution of pain muscle guarding spasm. Heating of peripheral nerve elevate pain threshold remarkably reduce muscle spasm.

Connective tissue effect- temperature elevation in combination with a stretch can alter elastic properties of connective tissues. The elastic properties of connective tissues result in plastic elongation

Oral anti-inflammatory drugs act by inhibiting the COX pathway and



prostaglandins, thus reducing the pain and inflammation. *Upanaha* also have the similar therapeutic action, but with local effect. The exogenous opioid such as morphine applied on the skin act similar with the endogenous opioids¹². But, here the important thing is that in local application the adverse effects of morphine is not noted. *Upanaha* can also be applied as a easy to use and effective *Panchakarma* procedure in different sorts of pain management.

Drug delivery

The primary barrier to absorption of exogenous substances through stratum corneum. Rate of absorption is directly proportional to concentration of drug in vehicle, partition co-efficient, diffusion co-efficient and thickness of the stratum corneum. Physiological factors that affect per coetaneous absorption include hydration, occlusion, age, intact versus disrupted skin, temperature and anatomic site.

Among vehicles, greases are anhydrous preparations that are either waste insoluble or fatty. Fatty agents are more occlusive than water soluble. They restrict transepidermal water loss and hence preserve hydration of stratum corneum.

Absorption depends upon lipid solubility of the drug since the epidermis act as lipid barrier. The dermis however is freely permeable to many solutes. Suspending the drug in an oily vehicle can enhance absorption through the skin. Because hydrated skin is more permeable than dry skin.

Application of medicaments, heat and massage definitely helps in eliminating the number of noxious elements through skin. The application of heat promotes the local circulation and metabolic activities and open the pores of the skin to permit transfer of medicaments and nutrients towards o needed sites. Thus *upanaha* can help in the field of pain management of locomotor and musculoskeletal system.

CONCLUSION

Upanaha is an effective treatment for Vata Dosha and in the management of pain of musculo skeletal and locomotor system. It can be modified according to the patient need like Brimhana Upanaha, Langhana Upanaha, Pachana Upanaha based on dravya used and different techniques according to the part to be. Upanaha is fast acting local application with nearly no side effect. This Panchakarma therapy is a ray of hope in the field of pain medicine



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