

The Agnikarma(Cauterization): A Mastery Procedure in Susruta Samhitha

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ABSTRACT

Ayurveda is the ancient science of human civilization. Sushruta Samhita is the most important literature in surgery. Maharshi Sushruta, known as the father of surgery has also explained the Para-surgical procedures in different diseases among them Agnikarma as the greatest/superior curative treatment to avoid recurrence. We can observe Susruta has explained in detail the importance of Agnikarma, varieties and criteria of successful cauterization, specific sites, indications, patterns, and pre and post-cautery management. Agnikarma has its Ushna Guna and Sookshma Guna it pacifies the vata and Kapha and burns the unwanted tissue done by the different materials such as Shalaka (gold, silver, panchadhatu, etc), Ajashakrut, Godanta, Madhu, Guda, Sneha (oil, Ghrita). In the present study humble attempt was made for Ayurvedic surgical practice. This study concludes that Agnikarma(cauterization) is a very effective and simple, non-occurrence and minimal invasive procedure able to be conducted at the Out Patient Department(OPD) level.

KEYWORDS: Agnikarma, Para-surgical, different materials, management

INTRODUCTION:

Ayurveda is the oldest origin of life sciences. Ayurveda is upaveda of Atharvana Veda also known as Pancham Veda. Ayurvedic texts like Brihatrayee (Charak, Susrutha & Vagbhata) widely explained Agnikarma in different contexts for different diseases as a curative treatment. Maharshi Susruta, known as the father of surgery has also explained the Para-surgical procedure Agnikarma as the greatest/superior curative treatment moreover those which are incurable by Bheshaja (medicines), Shastra (operations) and ksharakarma (caustics) also yield to it that's the importance of Agnikarma^[1]. Maharshi Susruta has explained different aspects of Agnikarma do`s & don'ts such as different material instruments for application, Suitable seasons, preparation of the patient, varieties, criteria for successful, specific sites, indications, pattern, post-cautery management, contraindication, Virya (Potency) in the sutrasthana of



chapter Twelve^[2]. Besides this in the chapter 9 given Experiments hand demonstrated on soft muscle pieces^[3]. In Chapter 14, *Maharshi Susruta* also explained in the treatment perspective in Haemostasis like *Dahan* as a last choice^[4]. In the Chapter 27. The operative procedure of foreign body removal advised Haemostasis with dry heat or hot *ghrita* application^[5]. In the chapter 40. related to the *Dravya* has *Ushna Virya* (Potency) to use as the most important factor for *Agnikarma*^[6]. e.g. - *Pippali, Ajashakrut, Godanta, Suryakanta, Madhu, Guda, Sneha* (tail, *Ghrita*).

AIMS AND OBJECTIVES:

To study and discuss the various basic concepts of *Agnikarma* of *Susruta Samhita*. To collect the data at a one-point structure to understand easily.

MATERIAL AND METHODS:

The *Agnikarma* references were collected and compiled from *Susruta Samhita Tika*. We also referred to various English-translated textbooks of *Susruta Samhita*. The various methods of *Agnikarma* are discussed and their importance in Ayurvedic surgical practice.

OBSERVATION:

In the phenomena of *Agnikarma*(~cauterization), we will see the concepts explained by the *Acharya Susruta* to achieve the Mastery Procedure completely in a step-by-step manner^[7].

Importance of Cauterization -

क्षारादग्निर्गरीयान् क्रियासु व्याख्यातः, तद्दग्धानां रोगाणामपुनर्भावाद्भेषजशस्त्रक्षारैरसाध्यानां तत्साध्यत्वाच्च ||

Agnikarma treatment is superior then *Kshara* (Caustics) having capacity of *Apunarbhava* of diseases^[8]. **Instruments applying Cautery** -

तद्यथा- पिप्पल्यजाशकृद्गोदन्तशरशलाकाजाम्बवौष्ठेतरलौहाः क्षौद्रगुडस्नेहाश्च|तत्र, पिप्पल्यजाशकृद्गोदन्तशरशलाकास्त्वग्गतानां, जाम्बवौष्ठेतरलौहा मांसगतानां, क्षौद्रगुड

स्नेहाः सिरास्नायुसन्ध्यस्थिगतानाम् ||

Materials useful for skin lessions(*Twak Dagdha*) are: *Pippali* (Piper longum), *Ajashakrut* (faecal pellets of a goat), *Godanta* (Moonstone), *Shara* (arrow-like device), *Shalaka* (rod of metal)^{[9].}

Muscular lesions (*Mamsa Dagdha*) are *Jambaustha* (device/stone resembling *Jambu*) and other metallic instruments.

For Vessels (Sira), ligaments (*Snayu*), bones (*Asthi*) and joints (*Sandhi*) are *Madhu* (honey), *Guda* (jaggary), and *Sneha*(fats-oil/ghee).

Sr.	Site/ dhatu	Material useful	
No.			
1.	skin lessions(Twak Dagdha)	Pippali (Piper longum), Ajashakrut (faecal pellets of a	
		goat), Godanta (Moonstone), Shara (arrow-like device),	
		Shalaka (rod of metal).	
2.	Muscular lessions(Mamsa	Jambaustha (device/stone resembling like Jambu) and	
	Dagdha)	other metallic instruments.	
3.	Vessels (Sira), ligaments (Snayu),	Madhu (honey), Guda (jaggary), Sneha(fats-oil/ghee).	
	bones (Asthi) and joints (Sandhi)		

Table 1: Area of Dhatu & useful material for Agnikarma.



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Suitable seasons -

तत्राग्निकर्म सर्वर्तुषु कुर्यादन्यत्र शरद्ग्रीष्माभ्यां; तत्राप्यात्ययिकेऽग्निकर्मसाध्ये व्याधौ तत्प्रत्यनीकं विधिं कृत्वा ||

Contraindicated in *Sharad rutu* & *Grishma rutu* but if emergency with counter measures can perform^[10].

Patient preparation –

सर्वव्याधिष्वृतुषु च पिच्छिलमन्नं भुक्तवतः; मूढगर्भाश्मरीभगन्दरोदरार्शोमुखरोगेष्वभुक्तवतः कर्म कुर्वीत ||

Feed with slimy diet and empty stomach in *mudagarba* (mal presentation), calculous diseases, fistula-in-Ano, abdominal diseases, piles and oral cavity^[11].

Varieties & criteria of successful Cauterization -

तत्र, शब्दप्रादुर्भावो दुर्गन्धता त्वक्सङ्कोचश्च त्वग्दग्धे, कपोतवर्णताऽल्पश्वयथुवेदना शुष्कसङ्कुचितव्रणता च मांसदग्धे; कृष्णोन्नतव्रणता स्रावसन्निरोधश्च सिरास्नायुदग्धे

, रूक्षारुणता कर्कशस्थिरव्रणता च सन्ध्यस्थिदग्धे ||

Skin cauterization - crackling sound, bad odour & contraction of skin.

Muscle cauterization - Pigeon/Ash-like discolouration, mild inflammation & pain, lesion gets dried up & shrivelled.

Vessel & Ligament cauterization - Black discolouration, swelling & cessation of discharge.

Bone & joint cauterization - Dryness, redness, hardness & fixity of lesion^[12].

Sr. No.	Site of Cauterization	Sucessesful criteria Cauterization	
1.	Skin cauterization	crackling sound, bad odour & contraction of skin	
2.	Muscle cauterization	Pigeon/Ash-like discolouration, mild inflammation &	
	pain, lesion gets dried up & shrivelled.		
3.	Vessel & Ligament	Black discolouration, swelling & cessation of	
	cauterization	discharge.	
4.	Bone & joint	Dryness, redness, hardness & fixity of lesion	
	cauterization		

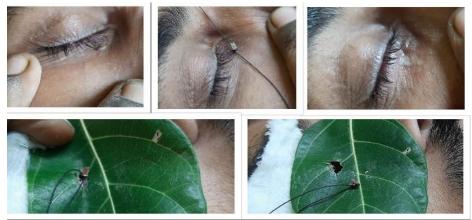
Table 2: Showing Varieties & criteria of successful Cauterization

Specific site of cauterization -

तत्र शिरोरोगाधिमन्थयोर्भ्रुललाटशङ्खप्रदेशेषु दहेत्, वर्त्मरोगेष्वार्द्रालक्तकप्रतिच्छन्नां दृष्टिं कृत्वा वर्त्मरोमकूपान् ||

Disease of head & in Glaucoma, eyebrows, frontal-temporal, diseases eyelids, roots of eyelashes, should perform *Agnikarma* with wet cloth covered^[13].

Table 3: Image showing Agnikarma with Protection near eye region.





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Indications-

त्वङ्गांससिरास्नायुसन्ध्यस्थिस्थितेऽत्युग्ररुजि वायावुच्छ्रितकठिनसुप्तमांसे व्रणे ग्रन्थ्यशोऽर्जुदभगन्दरापचीश्ठीपदचर्मकीलतिलकालकान्त्रवृद्धिसन्धिसिराच्छेदनादिषु नाडीशो

णितातिप्रवृत्तिषु चाग्निकर्म कुर्यात् ||

Vitiated *vayu* afflicts skin, muscle, vessels, ligaments, Joints & bones with severe pain in ulcers with excessive granulations indurated tissues & anaesthetic patches, in lymph nodes, piles, tumours, fistula-in-Ano, lymphadenitis, elephantiasis, warts, pigmented moles, inguinoscrotal hernias, diseases of vessels & joints, in excision, track of sinuses in case of excessive bleeding^[14].

Pattern of cauterization-

तत्र वलय-बिन्दु-विलेखा-प्रतिसारणानीति दहनविशेषाः ||

Circular, Dotted, Linear & Flat^[15].



Pre & Post cautery management –

रोगस्य संस्थानमवेक्ष्य सम्यङ्नरस्य मर्माणि बलाबलं च |

व्याधिं तथर्तुं च समीक्ष्य सम्यक् ततोऽव्यवस्येद्भिषगग्निकर्म ||तत्र सम्यग्दग्धे मधुसर्पिर्भ्यामभ्यङ्गः ||

Apply the cautery treatment after thorough examination of the shape of lesions, vital parts of the body, the strength of the patient, the disease and the season.

Honey & *ghrita* should be applied after the successful *Agnikarma* done according to strength and not affecting *marma*^[16].

Contraindication of Agnikarma -

अथेमानग्निना परिहरेत्- पित्तप्रकृतिमन्तःशोणितं भिन्नकोष्ठमनुद्धृतशल्यं दुर्बलं बालं वृद्धं भीरुमनेकव्रणपीडितमस्वेद्यांश्चेति ||

Agnikarma procedures should avoid in *Paittika* constitution, internal bleeding, ruptured viscera, unextracted foreign body & in weak, very young & very old, timid multiple lesions, fomentation^[17]. Beside this all *Acharya Sushruta* had explained were to perform experiments of *Agnikarma* in *sutrasthan adhyay* 9/4 मृदुषु मांसखण्डेष्वग्निक्षारयोग्या; i.e on soft muscle pieces^[18]. Also, in some emergency & operative conditions explained Haemostasis achievement with *Agnikarma* is best in *sutrasthan adhyay* 14 –

अस्कन्दमाने रुधिरे सन्धानानि प्रयोजयेत् |सन्धाने भ्रश्यमाने तु पाचनैः समुपाचरेत् ||कल्पैरेतैस्त्रिभिर्वैद्यः प्रयतेत यथाविधि |असिद्धिमत्सु चैतेषु दाहः परम इष्यते ||

During operative procedure specially in foreign body removal and to achieve haemostasis use *Agnikarma* with dry heat or hot *ghrita*^[19].

DISCUSSION:

In current ayurvedic practice, *Agnikarma* has very good results in some chronic conditions like plantar fasciitis, calcaneal sprue, sciatic pain, periarthritis in shoulder joint, frozen shoulder, removing warts, plantar corn etc. Plantar fasciitis is a chronic degenerative inflammation of the plantar fascia. Here the *Bindu* type of *Agnikarma* is employed. The mode of action of *Agnikarma* can be explained as follows, the *guna* of *Agni* are *Sookshma*, *tikshna*, and *ushna*. By these *guna Agni* entering the different small channels (strotas) of the body, the *prakopaka* of *vata* is neutralized. Other theory is that *Ushna Guna Agni* improves



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the *dhatvagni* that pacifies the *Aam dosha* and reduces the pain. By this means as *vata shaman* occurs the pain subsides spontaneously. Here *Agnikarma* works by its *Guna* but in some places, it works by mechanical degeneration of tissue. *Agnikarma* works by its mechanical power of destroying the tissue by heat (Unhealthy granulation tissue in chronic nonhealing hyper granulated wound, unhealthy granulation tissue in track of chronic sinus (*Nadivrana*), fistulous track (*Bhagandar*), and malignant cells in the case of *Arbuda*). In diseases with Hyper keratinised tissue like *Kadar* and *Charmakila*, it is both mechanical power and effects of *Guna* which are acting. Here by *Bindu* or *vilekha*, the hypergranulated tissue is removed by direct burn through *loha tapta Shalaka* then due to its *Guna* it destroys the deep-seated root cells of *Kadar*. *Agnikarma* explained by *Acharya Susruta* in many diseases can be understood, but it's very difficult to understand and explain how the *Agnikarma* works in *Aantravrudhi*.

CONCLUSION:

We can see *Acharya Susruta* has explained *Agnikarma* in so depth in *sutrasthana* itself covered completely. This gives importance to performing *Agnikarma* though it is known to be a para-surgical procedure that can be called a Mastery procedure if followed with all perspective knowledge. *Acharya Susruta* has mentioned all do's and don'ts, it's a call for *Shalya chikitsa* (surgeon) to make skilled by applying *yukti* to perform *Agnikarma* properly.

Site	Instruments	criteria	Pattern
<i>Twaka</i> (Skin)	Pippali, Ajashakrut, Godanta, Shara, Shalaka,	crackling sound, bad odour & contraction of skin	विलेखा
<i>Mausa</i> (Muscle)	Jambaustha, metallic instruments	Pigeon/Ash-like discolouration, mild inflammation & pain, lesion gets dried up & shrivelled.	बिंदु विलय
Sira Snayu(Vessel & ligament)	Madhu, Guda, Sneha	Black discolouration, swelling & cessation of discharge.	
Asthi Sandhi(Bone & Joint)	Madhu, Guda, Sneha	Dryness, redness, hardness & fixity of lesion.	प्रतिसारण

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