

REVIEW ARTICLE

The *Anushastra* in *Shalya Tantra*: Clinical Usage

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ABSTRACT

Anushastra refers to a category of parasurgical procedures. These operations differ from major surgeries, particularly for patients who are sensitive to *shastra karma*. The objective is to investigate traditional parasurgical techniques used across various conditions, alongside surgical methods. The present theoretical study examines the application of parasurgical techniques found in contemporary literature, known as *Anushastra*. This article outlines the approaches for executing three key parasurgical procedures. The various types of *Anushastra* hold significant relevance in the classical texts of *Ayurveda* and continue to be employed in treatments for various health issues. Specific anorectal conditions are suitable for *shastra* interventions, involving the application of energy to treat different ailments. Two techniques are described: *shastrakrita siravedha* and *prachana* methods for *ajashakrit*, *danta*, *shalaka* (samples), and *ghrita Raktamokshana*. In addition, *ghati* and *ashastrakrita* techniques are also included – *Anushastra* is becoming more recognized in the management of chronic illnesses.

1. INTRODUCTION

The *Ayurvedic* discipline known as *Shalya Tantra* covers topics such as *Yantrakriya*, *Shastra Kriya*, and *Shalyakriya*, among others. Besides these key functions, *Shalya Tantra* also elaborates on several minor or parasurgical procedures referred to as *anushastra*. In addition to numerous surgical techniques that differ from the primary *karma* procedures, various other surgical methods distinct from the major *ashtvidhashastra karma*, or parasurgical operations, are documented in *Ayurveda*'s classical texts. These techniques are termed *anushastra karma*. The *anushastra* techniques represent the essential surgical methodologies, which include *Kshara karma*, *Agnikarma*, *Jalaukavacharana*, and others.

A number of 15 different types of *Anushastra* were explained by *Acharya Sushruta*, such as *Twakasara*, *Sphatika*, *Kancha*, *Kuruvind*, *Jalauka*, *Agni*, *Kshara*, *Nakha*, *Goji*, *Shephalika*, *Shaka-Patra*, *Kareera*, *Bala*, and *Anguli*.^[1] Three additional *Anushastras* are described in addition to the 15 that are stated in the *Aṣṭāṅgasaṅgraha*. These are *Śuśkagomaya* (dried cow dung), *Samudraphena* (cuttlefish bone) for scraping processes, and *Sūryakānta* (converging glass) for cauterizing the skin.

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While each kind of *Anushastra* is significant, *Kshara karma*, *Agnikarma*, and *Jalaukavacharana* are prominent technique that uses *Jalauka*, *Agni*, and *Kshara Sutra* for a variety of therapeutic objectives. These are recommended for youngsters who are sensitive or afraid, as well as when surgical instruments are not available.^[2] The three most significant *anushastra karmas* found in *shashti upakrama* – *Kshara karma*, *Agni karma*, and *Jalaukavacharana* – are applied significantly in the treatment of wounds.

Anushastra is a beneficial tool for treating a variety of surgical problems. *Eshan Karma* is equally helpful in diagnosing the various kinds of sinuses and fistulas. Nowadays, we typically utilize various types of probes (*eshani*) for the diagnosis of *Nadi* (sinus), *Shalya yukta* (wound with foreign body), *Unmargi* (fistula), and *utsangi* (wounds with cavity). We can substitute *bala*, *anguli*, or *kareer naal*^[1] for *eshani*. *Sushruta* counts these as part of *anushastra*. The respected father of surgery, *Acharya Sushruta*, has detailed a number of surgical and parasurgical therapeutic procedures and protocols. Among these parasurgical modalities, *Agnikarma*, depending on the doctor's exposure and expertise, has been widely used in a variety of clinical settings. In recent years, there has been an increasing demand for parasurgical techniques such as *Agnikarma*, *Kshara Karma*, and *Jalaukavacharana*, which are primarily used to try to heal ailments of different kinds. *Agnikarma* is a parasurgical technique; however, it is recommended as the preferred treatment for a variety of illnesses,

with formal indications in *vata* and *kapha*-related morbidities. In addition, this treatment's reach is expanded to include conditions that are discovered to be resistant to the traditional *sheeta-ushana snigdha-rooksha* style of care. The last characteristic of *Agnikarma* is its amazing preventative capacity to cure specific illnesses and its development as a forerunner to the "cauterization" of the present era. *Kshara* is a medication made from several plant ashes. There are primarily two forms of *Kshara*: *Pratisarniya Kshara* and *Paneeya Kshara*.^[3] Out of all the *shastra* and *anushastra*, *Kshara* is the greatest. *Pratisaraniya kshara* is primarily used to treat wounds and a number of anorectal conditions, including *guda bhramsha* (rectal prolapse) and *arsha* (hemorrhoids). *Kshara sutra* and *Kshara Varti* are also practiced in a wide range of contexts. The father of surgery, *Acharya Sushruta*, has categorized surgery scientifically in a systematic way, and his management ideas are still relevant today. *Sushruta Samhita*'s remarkable concepts in contemporary science include the classification of traumatic wounds, their prognostic evaluation and management through 60 procedures,^[4] the insistence on primary suturing in clean wounds, the prevention of sepsis, the removal of extruded omentum, and the careful suturing of intestinal perforation in the management of perforating abdominal wounds. *Apatarpana*, *Alepa*, *Parisheka*, *Abhyanga*, *Svedana*, *Vimlapana*, *Visravana*, and other techniques are among the 60 processes. Among them, he additionally mentioned that the *Karma* (actions) carried out by *Anushastra* are referred to as *Anushastra Karma* refers to parasurgical techniques carried out without the use of surgical instruments using non-surgical tools or supplies.

2. METHODS

The present research paper is a review of the literature on *Anushastra Karma*, with a focus on the processes of *Agnikarma*, *Jalaukavcharana*, and *Kshara Karma* as explained by *Sushruta*, the ancient *Acharya*, in the *Sushruta Samhita*. According to *Sushruta*, there are 15 different kinds of *anushastra*.

These are a few that are currently widely used and accessible:

1. *Agnikarma*
2. *Jalaukavcharana*, and
3. *Kshara karma*.

2.1. Kshara Karma

Ash from many medicinal plants is used to make *Kshara*, a medication. The two primary varieties of *Kshara* are *Pratisarneeya Kshara* and *Paneeya Kshara*. *Kshara* is superior to both *Shastra* and *Anushastra*. *Pratisaraniya Kshara* is primarily used to treat wounds and a number of anorectal conditions, including *guda bhramsha* (rectal prolapse) and *arsha* (hemorrhoids). It is primarily used for *shodhana* (debridement) in wound care. *Kshara's Ushna* and *Tikshna* properties are beneficial for debriding wounds. These *vraṇa lakshana-utsanna mansan* (higher margin and hypergranulation tissue) were explicitly addressed by *Sushruta*.

The primary management of chronic wounds is wound bed preparation, which can be accomplished with ease by cleaning unhealthy wounds, *kathinana* (hard consistency), *Kandu yukta* (severe itching), and *Chirothithan*^[5] (chronic wounds). *Pratisaraniya kshara* also aids in *Darana karma* in huge pus pockets that are closed off, particularly in cases when surgery is not an option, such as wounds on delicate or critical areas, in youngsters, the elderly, weak patients, women, or panic patients. The other two forms of *Kshara Karma*, *Kshara Sutra* and *Kshara Varti* are used to treat *Nadi* (sinus) and *Bhagandara* (fistulas). Other treatments for these illnesses are challenging. Its compromised

edge, unexposed infectious location, and difficulty in debriding wounds are the reasons for this. Both *Shastra Karma* and *Anushastra* (*Kshara Sutra* and *Kshara Varti*) are used to cure these disorders. *Sushruta* stated that *Kshara sutra*, not *chhedana*^[6] (surgery), should be used to cure *Nadi* (sinus) that is present over essential portions in patients who are weak, malnourished, and nervous. The *Kshara Sutra* treats *Bhagandara* in the same way. Another cleansing substance that efficiently cures *Nadi* is *Kshara Varti*, which is mentioned in all *Ayurvedic* books. In addition, *Kshara* is applied in situations where *Shastra* is ineffective and inappropriate.^[7]

2.2. Kshar karma (pratisarniya kshara)

2.2.1. Pre-operative care, or purva karma

A patient is assessed appropriate that a procedure is prepared appropriately. To help patients understand the course of treatment, they receive counseling and explanations regarding the procedure. *Agropaharaniya*: All necessary supplies, including *Pratisarniya kshara*, *Nimbu swarasa*, cotton, bowl, proctoscope, *Jatyadi ghrita*, or *taila*, are prepared before the procedure begins.

2.2.2. Operative procedure or pradhana karma

The patient is placed in the lithotomy position on the operating table. After washing, local anesthesia is given and anal dilation is done manually. *Pratisaarniya kshara* is applied to the pile mass or any other chosen region after being taken in a bowl. Until the color shifts to *Pakwajambu Phalavarna*,^[8] it is kept.

2.2.3. Post-operative care, or pashchata karma

Involves wiping the applied *kshara* with distilled water and then applying *Nimbu swarasa*. The process can be carried out twice. Three times, based on the disease's severity and indication. The process can be repeated for the second or third session at a 21-day gap if necessary.

2.3. Agni Karma

All *Acharyas* mention *Agni Karma*, the second significant *Anushastra* karma. There are numerous *Agnikarma* tools available. Known as *dahanupkarana*, such as *guda*, tail, *shalaka* (probes), *ghrita*, *pippali*, *ajashakrit*, and *godanta*.^[9]

2.4. According to Akriti^[10]

There are two types of *agnikarma*: *Bindu*, which resembles dots, and *Valaya*, which is circular. According to *Acharya Dalhana*, *shalaka* must have a sharp tip. *Vilekha* is in the process of creating various shapes with heated *shalaka*. *Acharya Dalhana* further distinguishes the three varieties of *Vilekha agnikarma* based on the line's direction: *Tiryaka* (oblique), *Riju* (straight), and *Vakra* (zigzag). *Pratisarana*: There is no defined shape, and hot *shalaka* is used to rub at the designated location.

2.5. There are Three Additional Forms of Agnikarma Based on Akriti, According to Ashtang Hridya

Ashtapada is a particular shape with eight limbs pointing in various directions, *Ardhachandra* is a crescent shape, and *Swastika* is a particular shape of the *Swastika Yantra*.

Various forms of *agnikarma* are performed according to bodily parts, including *asthi*, *sandhi dagdha*, *sira snau dagdha*, *mamsa dagdha*, and *twak dagdha*. Site-specific *Dahana Upkarana* are used. *Agnikarma* can, therefore, be categorized as:^[11]

2.5.1. Twakgata vyadhi

Skin-related diseases; drugs include *Pippali*, *Ajashakrita*, *Godanta*, *Shara*, and *Shalaaka*.

2.5.2. Mamsagata vyadhi

Panchadhaatu Shalaaka Khaudra and *Jambavaushtha* are utilized for illnesses affecting the muscles.

2.5.3. Sira snayu asthisandhi

Madhu (Kshaudra), *Guda* (Jaggery), and *Sneha* are utilized for *Sira*, *Snaayu*, *Sandhi*, and *Marma* illnesses.

2.6. Agnikarma Technique

2.6.1. Poorva karma

A patient who is thought to be suitable for the procedure must be prepared properly. The patients are counseled and given an overview of the process to help them understand the treatment process. The *Agropaharaniya* before the operation is started. There is a gas stove, *shalaka*, *madhuyashti churna*, and *ghritkumari* on hand. The area is designated and cleaned.

2.6.2. Pradhana karma

For a certain illness, *Panchdhatu Shalaka* or any other *dahanopkarana* is chosen. *Panchdahatu shalaka* is cooked to a red-hot temperature on the gas burner and spread around the chosen region. The procedure is repeated based on the need and indication. *Guda*, *Sneha*, or *Madhu* are chosen as *Upkarana* for *Agnikarma* since frozen shoulder is *snayusandhigata vikara*. *Madhuyashti churna* is administered to the area immediately after the operation is finished, followed by the pulp of *ghritkumari majja*. The patient is closely monitored for any unintended problems throughout the treatment. Patients are recommended to avoid trauma, effort, and unhealthy eating, as well as to keep the region dry and clean. Depending on the illness and its severity, the same process may be repeated.

2.7. Jalaukavacharana (Leech Therapy)^[12]

According to ancient *acharyas*, *Jalaukavacharana* is the third most significant *anushastra karma*. One of *Raktamokshana*'s techniques is *Jalaukavacharana*. *Sushruta Samhita* and *Ashtang Hridaya* both describe *Raktamokshana*. *Shastrakrita* and *Ashastrakrita* are its two approaches. In addition, *Shastrakrita* employs two techniques: *pracchana* and *siravedha*. With the following instruments, the *Ashastrakrita* method can be accomplished: *shringa*, *jalauka*, *alabu*, and *ghati*. There are six *jalauka* in each of the two primary categories of *Jalauka*: *Savish* and *Nirvisha*. *Nirvisha jalauka* has medicinal properties. Numerous illnesses, such as *twak roga*, *raktaja roga*, and *Dushta Vrana*,^[13] are indicated by them. *Jalauka* is typically used in the early stages of a wound's progression. *Raktamokshana* lessens discomfort and inhibits the suppurative of early edema. *Raktamokshana* treats wounds that are itchy, hard, reddish-black in hue, painful, and have an uneven surface.

2.8. Jalauka Application (Jalaukavacharana)^[14]

As further steps, *Jalaukavacharana* is separated into three sections:

2.8.1. Pre-operative care, or purva karma

- Jalauka* purification: *Jalauakas* are housed in *Haridra Jala*, which has *Haridra Churna* in a kidney tray that is partially filled with fresh water
- Patient preparation: For the best results from *jalaukavacharana*, the patient should receive appropriate counseling before applying *jalauka*. The patient should ideally be in a supine position. An

antiseptic solution is used to clean the area where *jalauka* is to be applied.

2.8.2. Pradhana karma (operative care)

First, the bodily part where the *jalauka* indication is to be applied is decided. The chosen location is carefully disinfected. Above the

Nirvisha jalaauka, a chosen portion, is retained.

Jalauka stays within this segment. Apply *jalauka* after puncturing the area with a sterile needle if it does not adhere. *Jalauka* draws blood through its anterior sucker, which is connected to the base by a posterior sucker. To shield the leech from the blood's intense heat, a cold, damp cotton swab should be placed over the *jalauka* while it is sucking. The severity and overall state of the disease determine how many leeches are used.

2.8.3. Pashchata karma (post-operative care)

- Jalauka* care: The *jalauka* is removed from the site by sprinkling it with *haridra churna* or *saindhava*, or if it is completely sucked, it leaves the site alone. The *jalauka* is induced to vomit so that the sucked blood is drained from the mouth by the *haridra churna*, squeezing it slowly and gently from tail to mouth and then holding it in fresh water. The *jalauka* can be applied again after a week; if it does not move freely in water, it is diseased and is referred to by *Sushruta* as *durvanta*.
- Patient care: Because *triphalakashaya*, *haridrachurna*, and *madhu* are hemostatic, antiseptic, and analgesic, they should be applied to the afflicted area. To reduce the chance of rebleeding, tight bandaging should be used once the bleeding has stopped. The patient is instructed to observe blood leaking from the site for 1–8 h.

2.8.4. Jalaukavacharana's contraindication

Include treating hemorrhagic conditions such as hemophilia, severe anemia, coagulopathy, hypotension, active tuberculosis, high-grade fever, and immunocompromised people.

3. DISCUSSION

The fundamental process of *Shalya Tantra* is called *Shashtra Karma*, but in addition to *Shashtra Karma*, several *Anushastra Karmas* are equally significant and potent in the therapy of surgical diseases. Since *Acharya* has indicated several *anushastra* with *shastra karma*, we must employ alternate tools in situations where we are unable to execute *ashtvidha shastra karma* due to certain illnesses or locations, or when we do not have the needed *shastra* on hand. This is where *anushastra karma* comes into play. Three primary *anushastra karmas* – *kshara*, *agni karma*, and *jalauka karma* – are becoming more and more well-liked in the modern era due to their efficacy. *Arsha* (hemorrhoids), *gudabhramsa* (rectal prolapse), and *kshara sutra* (applied to sinuses and fistulas) can all be effectively treated with *kshara karma*. According to *Sushruta* and *Samyaka Dagdh Lakshana*, when *kshara* is applied, it should be maintained until 100 *matra kala*, at which point it manifests as *pakwajambuphala varna*. To avoid the further caustic effect of *kshara*, it should then be cleaned with *nimbu swarasa*. *Pratisarneeya Kshara*'s likely mechanism of action involves burning the prolapsed rectal mucosal folds chemically, which results in cicatrization (a process that aids in wound healing) and may fortify the anorectal ring in cases of rectal prolapse. Its action is what makes it significant since it can treat illnesses that the *bheshaja* and *shastra* are unable to treat. Because *Agnikarma*'s *Ushna guna* is the opposite of the *Vata* and *Kapha dosha*'s *sheeta guna*, it relieves all *Vataja* and *Kaphaj illnesses*. *Ayurveda* holds that each *Dhatu* (tissue) has a unique *Dhatvagni*, and that

illnesses appear as it falls. By providing external heat in this situation, *Agnikarma* raises *Dhatvagni*, which calms the agitated *dosha* and so lessens the illness. The management of *Dushta Vrana* is better handled by *Jalauka*. Chemicals that operate on the afflicted part 16 include the following: bdellins (trypsin plasmin inhibitor), hyaluronidase, hirudin, carboxypeptidase-A inhibitors, and many more that are present in leech saliva. It has been discovered that bdellins reduce inflammation at the location of the incision. Hyaluronidase possesses antibacterial qualities. Inhibitors of carboxypeptidase-A improve blood flow at the location of the wound. It has been discovered that the histamine and acetylcholine-like compounds found in *Jalauka* saliva work as vasodilators on the microvasculature surrounding the application site. These qualities, which include anti-inflammatory, antibacterial, and vasodilatation, all improve blood flow and are highly beneficial for wound healing. In terms of oxygen supply, increased blood flow eventually eliminates harmful substances from the afflicted area.

4. CONCLUSION

In surgical practice, *Anushastra* is just as significant as *Shastrakarma*. *Kshara* is extensively discussed in many *Ayurvedic* scriptures on wound care. The *Pratisarniya Kshara* is used to debride wounds that don't heal over time. With very few and insignificant post-operation consequences, *kshara karma* is a cost-effective, convenient, daycare technique that may be carried out under local anesthesia. For *sthanika vata* participation in *vata kaphaja* diseases, *agnikarma* therapy is goal-oriented. The average person may afford this ambulatory therapy method. *Agnikarma* is used to treat wounds that are hard and discharge. *Jalaukavacharana* has proven to be highly cost-effective in treating a variety of skin conditions, including chronic non-healing ulcers.

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6. AUTHORS' CONTRIBUTIONS

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9. CONFLICTS OF INTEREST

Nil.

10. DATA AVAILABILITY

This is an original manuscript, and all data are available for only review purposes from the principal investigators.

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