A Conceptual and Applied Study of Trividha Karma in Shalya tantra

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ABSTRACT:
All types of Ayurvedic treatments are described under Ashtang Ayurveda which means eight branches of Ayurveda. Shalya tantra is one of them and Sushruta Samhita is the oldest text available on Shalya Tantra (surgery). The Sushruta Samhita acts as a training manual and educative text for surgery, and enabled a move away from the more primitive forms of surgery practiced beforehand. Many procedures and methods of surgery were described and in some way acts as a basic manual from which surgery in the modern day has grown from. Sutra Sthana of Sushruta Samhita deals with basic concepts of surgery, surgical instruments and appliances, practical training, duties of the surgeon, Sandhan Karma, causes and classification of diseases etc. Being a surgeon Acharya Sushruta was well aware about the complications of surgery so before talking anything about the surgery first he told about the concept of Trividh Karma i.e. poorva karma means accessories to be obtained before the commencement of main surgical procedure, pradhan karma means main surgical procedure, paschat karma means measures that should be taken to cure the patient after main surgical procedure until the patient is discharged.

Keywords- Trividha Karma, Poorva Karma, Pradhan Karma, Paschat Karma, Astavidha Shastra Karma.

INTRODUCTION
Every Shastra Karmas consists of Trividha Karma. Trividha means three types and word Karma means procedure. Acharya Sushruta has classified all the surgical procedure in three major steps-
1. Poorva karma
2. Pradhan karma
3. Paschat karma
Poorva karma means preparation of the patient along with collecting all the materials needed during the Pradhan karma. Ashtavidha Shastra karmas are included in Pradhan karma and Paschat karma included all post-operative care. In every surgical procedure these three karma are essential. Modern science also accepts this fact that a good surgeon is required for a good surgery, but the better outcome also depends upon the preoperative diagnosis and preparation i.e. done before surgery and good postoperative care. Because it reduces the rate of mortality and postoperative complications.
AIM AND OBJECTIVE
To evaluate, elaborate and discuss the concept of Trividh Karma in Shalya Tantra. The aim of study is to establish those principles (Trividh Karma) which are very useful for human being that were contributed by the great ancient surgeon Acharya Sushruta.

MATERIALS AND METHODS
All sorts of references has been collected and compiled from Ayurvedic classics and available commentaries on Sushruta Samhita, Charak Samhita, AshtangHridaya etc. we have also referred the modern text books of surgery and searched and referred various websites to collect the relevant information’s on the topic.

(1) Poorva Karma (Pre Operative Procedure)
Pre-operative management consisting of diagnosis of disease, admission, consent & counseling , fasting, enema and part preparation etc. are described all over Sushruta Samhita . Some of these have been described under heading of Mudhagarbha, some under topic of Shastra Karma, and some points are described under heading of Arsha, Ashmari, Mukharoga, Bhagandar etc. Poorva Karma should be done properly before any surgical procedure. Intra-operative and post-operative results will be better and complication free if pre-operative management has been done properly.

First of all Sushruta emphasized on the importance of collecting all the materials needed during the operative procedure and for postoperative care. He had given a list of appliances required in surgical operations e.g. Blunt Instruments, Sharp Instruments, Leeches, Cotton, Pieces of Cloth, Thread, Leaves, Materials of bandage, Honey, Ghee or Clarified Butter, Suet, Milk, Oils, Decoctions, Cold and Hot Water, Iron Pans and other Earthen Vessels; Beddings and Seats, Obedient, Steady and Strong Servants (Paricharak) etc. Then Acharya Sushruta said to decide the proper day and date (tithi), subh muhurta and nakashatra . The patient should be specially interrogated from the patient, residence, climate of the locally concerned, caste and race. The patient is then given light food and made to sit facing east; surgeon should sit opposite to patient and perform the procedure1. Before doing any surgery a written consent of guardian or attendant must be obtained. In case of surgery in Ashmari, Acharya Sushruta clearly indicated about the consent by saying that without surgery death is inevitable and even after performing surgery there is doubt about the successful procedure, so a wise surgeon must take consent from the higher authority2 (or even patient’s relative’s). Sushruta indicated the diseases in which the patients should be kept empty stomach before operation are Moola garbha, Udana, Ashmari, Arshas, Bhagandara and Mukha roga3. It has been mentioned that aseptic precautions before any surgical procedure all instruments should be heated up to red hot to prevent infection and the surgeon should cut short his hair, nails and should wear white sterilized clothes4. Acharya Dalhan also throws light upon cleansing measure and special preparatory method which described under shasti vrana upkarams( first 12 of shasti upakramas) should be taken as poorva karmas before pradhan karma i.e. aptarpana, alepa, parisheka, abhyanga, swedan karma, vimlapana, upnaha, pachan, raktamokshana, snehapana, virachan and vaman karma5. Poorva karma is described as a pre-operative preparation to overcome the operative and post-operative complications. Pre-Operative period runs from the time the patient is admitted to the hospital to the time the surgery begins. A pre-operative preparation contains several measures such as history taking of the patient, examination, investigation of patient, pre operative treatment, consent, OT preparation with sterilization of the instrument, preparation of part and administrations of anaesthetics etc6.

(2)Pradhan Karma (Operative Procedure)
This includes mainly Ashtavidha Shastra Karma. These eight specific surgical techniques are considered as the basic surgical procedure useful in the management of all the diseases which require surgical intervention. Acharya Sushruta has described eight types of shashtrakarma, Acharya Charaka has described six type of shashtra karma, Acharya Yoga ati in Ashtang Hridaya has described thirteen type of shashtra karma and twelve type of shasra karma in Ashtang Samgrah. (Table 1) Among all these shasra karmas, ashtavidha shasra karmas are the procedures or the steps which are always the soul of any surgery, because almost all surgeries performed today by modern surgeon are included in these eight techniques of Sushruta’s. According to Acharya Sushruta separate indication of astavidh shasra karma are as follows11. Chedan karma is indicated in the following diseases- Bagandara, Kaphaja Granthi ,Tilakalaka, VranaVartma,Arshas Charmakeela Asthi Mamsagatha Shalya, Jatumani, Mamsa Sanghata , Snaya Mamsa Sira Kota Valmika, Sataponaka, Adhrusa etc. Instruments used are Mandalagra, Karpatra, Vridhipatra, Nakhasatra, Mudrika, Utpala Patra and Ardhadhara.
Bhedan karma is indicated in the following diseases- all vidradhis except samnipatik, vataj granthi, pittaj granthi, kphaj granthi, three types of visarpa, vidhiroga, vidarika, pramehapidika, vranshopha, stan vidradhi, avamanthak, kumbhika, anusayi, nadivrana, vrindaroga, pushkarika, alaji, kshudraroga, taluppputa, dantapuppata, tundikeri, gilayu, ashmari and medajroga etc. Instruments used are Vriddhipatra, Nakhasatra, Mudrika, Upalapatra and Ardhadhara.

Lekhan karma is indicated in the following diseases- four types of Rohini, Kilasa, Upjihivika, Dantvaiderbh, MedajaGranthi, Vartmagranthi, Adhijihvika, Arshas, Mandala (Kusta), Mamsakanda and Mamsonnati etc. Instruments used are Mandalaagra, Karapatra.

Vyadhan karma is indicated in following diseases- Sira Vyadh, Mutra Vridddhi (Hydrocele), Dakodara (Ascites). Instruments used are Katharka, Vrihimukha, Aara, Vetasapata and Suc.

Eshana karma is indicated in following diseases- Nadi Vrana (Sinuses), Sasalya Vrana and Unmargi Vrana (ulcers with any extraneous or foreign body lodged in their inside), and those which follow abnormal (lateral or oblique) directions. Instrument used is eshani.

Aharan karma is indicated in- Extraction of sharkara (i.e tarter of teeth, paadsharkara and muttrashkara), Dantamala, Karnamala, Ashmari, Salya, Mudha Garbha and faeces accumulated in rectum. Instruments used are Badisa and Dantasanku.

Seevan karma is indicated in- Diseases which are due to vitiation of Medas, cut wounds, Sulekhitha Vrana, Sadyovrana and diseases localized on Chala Sandhi. In the case of an uncomplicated Sadyovrana it is clearly mentioned that the wound should be sutured at the same day.

Dalhana in his commentary on Sushruta has elaborated this principle as wounds over head, forearm, face, ears, lips, nose, cheek, neck, upper extremities, abdomen, glutal region, reproductive organs, penis, scrotum etc. are to be sutured immediately. Acharya Vagbhata stated that immediate suturing should be done in excised or hanged out tissues. Charakacharya described that the flanks, bowels, abdomen etc which are subjected to deep surgery should be sutured.

It is important to note that ashtavidha shastra karmas are not the eight surgical procedures; rather these are the eight basic principles of all the surgical procedures which can be used for any surgery. These Karmas contain a short but full description of all the surgeries. Each and every surgical procedure comprises either one or more of them and more interestingly, no surgery till date contains any step which is beyond the scope of Ayurvedic Shastra Karmas.

(3) Paschat Karma (Post Operative Procedures)

After the operative procedure, the patient is to be assured. The operative wound is to be cleaned and dressed with Vikeshika (medicine impregnated pad) or proper medicated oil, emulsion, paste or dusting powder etc. The operative wound portion is to be fumigated with germicidal and air purifier medicines to avoid the pus formation. Raksha Karma (protective rites) for patient has been given. A detailed account of utilization of bandages in post operative care of the wound and in fracture management is noteworthy. After Pradhana Karma, the area has to be bandaged with or without medicated dressing. It protects the Vrana from flies, dust, cold, wind etc and thus prevents its from becoming infected. Acharya Sushruta has described 14 types of Bandh i.e. Kosha, Dama, Anuvellita, Swastika, Yamaka, Mutoli, Mandal, Sthagika, Cheen, Khatva, Vibandha, Vitana, Vithana, Panchangi and Vaghabhata described one extra bandha i.e Utsangibandha hence, there are total 15 types of Bandha in Ayurveda. He explained different materials that can be used for Bandhana, how to bandage, how much pressure it should exert, when to change the bandage and which type of Bandha is to be bandaged. This knowledge is essential for post operative care of Vrana and its proper healing. Sushruta directs that there should be a particular room provided for patients who have undergone surgical operation. This room should be a clean house, situated in a wholesome locality, free from dirt-sunlight and heavy breeze. The bed of the patients should be soft, spacious, and well arranged with head towards east and weapons alongside (for protection from enemies, animals etc.). Room should have some affectionate friends/attendants of patient with him. A gathering of friends and family members is mandatory, which so ever the patient prefers, as they provide moral support and encourage the patient to fight against the disease and help to overcome the pain of trauma. This also provides him the strength to combat with the feeling of fear and loneliness, which is very much there in the environment of hospital. Fumigation of the patient’s room should be done for ten days, twice a day, using sarsapa, nimb leaves added with ghrit and lavan.

Sushruta in Vraniotpasiya adhyay of sutra sthana in Sushruta Samhita has given do’s and don’ts for the patient, dietary instructions, proper wound management and medication.
DISCUSSION
In Ayurvedic literature Pooray Karma, Pradhan and Paschat Karma has been explained in different context but Acharya Sushrut has explained poorva and paschat karma mainly pertaining to shastra karma. In Agropaharaniya Adhyaya, the collection of material required before and after surgery has been explained by Sushrut. In ashmari chikitsa, Acharya Sushruta has explained significances of taking consent before performing surgery. Acharya Sushruta has explained regarding to the position of patient i.e. east direction, so that there is proper focus of light at the operating part during the surgery. Acharya Sushruta also mentioned regarding vrana dhoopana and vraniitagara dhoopan which help in sterilization and helpful for faster wound healing. Raksha karma is also explained by Acharya Sushruta in reference to vrana chikitsa, before performing the main procedure and for the patient who has gone through the surgical procedure. It is done to destroy witch called kritya and removes the fear of Rakshas. The aim of this procedure is also to make the patient psychologically strong. Shushruta samhita is the oldest text of shalya tantra, and Acharya Sushruta being a surgeon has explained astavidha shastra karma as pradhan karma specifically and poorva karma and paschat karma with special reference to astavidha shastra karma i.e. surgical procedure. Here, it is important to note that Trividh Karmas are basic principles of all the surgical procedures which should be used with every surgery. Description of these karmas contains the full description of surgery in short. This is why Sushruta is considered truly as the “Father of Surgery”. It is extremely essential that we put his principles into practice and preserve the dignity of our noble profession.

CONCLUSION
In the management of patients going through the surgical procedures, the overall outcome of the operative procedure mainly depends on the pre-operative diagnosis the surgical procedure and post operative care. Good preoperative assessment of patients is a fundamental requirement of the practice of surgery. Surgery is a process always associated with risks so thorough study of the case before surgical procedure; lesser down the risk of complications. So proper pre-operative management which includes physical examination, interrogation, collection of material, preparation of patient if done properly give fruitful result after pradhan karma. Also the patient’s recovery after surgery highly depends on the postoperative care given, and anticipation with early diagnosis and management of postoperative complications.

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Table 1 shows Various Shastra Karma By different Acharya’s

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<th>Astang Sangrah&lt;sup&gt;9&lt;/sup&gt;</th>
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