

International Research Journal of Ayurveda & Yoga

An International Peer Reviewed Journal for Ayurveda & Yoga



Siravyadhana in Parivartika – A scientific review

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ICV-70.44- ISRA-1.318

VOLUME 4 ISSUE 5

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Article revised on 4th May 2021

Article Accepted 23rd May 2021

Article published 31st May 2021

ABSTRACT: -

Parivartika or paraphimosis is a very painful emergency condition. Here vitiation of *Vyanvayu* at *Medra Charma* (prepuce skin) that is why circulation of penis hampered. And then gradually *Kapha* And *Pitta* vitiation may occur and symptoms like *Kandu* (Itching), *Daha* (burning sensation), *Paka*, *Sotha* (inflammation) appears. The *Siravyadhana* releases the polluted *Vyan Vayu* as well as *Pitta* and *Kapha* that's why Acharya Sushruta advocated this minimum invasive procedure. In modern science dorsal slit or multiple puncturing is done to reduce oedema which creates more exposure to infections. By seeing these two *Sira Vyadhana* (single minimum invasion) can be effective in case of *Parivartika*

Keywords:- . *Sira Vyadhana*, *Parivartika*, paraphimosis



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How to cite this article: Dr.Sayantana Chakraborty, Dr.Debasis Kundu, Dr.Leena Nayak "*Siravyadhana in Parivartika – A scientific review*" IRJAY, May: 2021, Vol-4, Issue-5;148-151 ; DOI: <https://doi.org/10.47223/IRJAY.2021.4502>

INTRODUCTION:

According to *Acharya Sushruta Sira Vyadhana* (venesection) is *Ardha Chikitsa* Of *Shalyatantra* Like *Vasti Karma* (medicated enema) which is half of *kaya chikitsa*.¹As the pure blood is one of the important factor for *Bala* (strength), *Varna*(colour), *Sukha* and *Arogya* (good health) it is our responsibility to maintain it.²*Acharya Sushruta* as well as *Acharya Vagbhata* opines that *Rakta* (blood) is the main *Dushya* to create any disease process.³ *Sira vyadhana* (venesection) is one of the procedures of *Rakta Mokshana* (bloodletting) and being *Ardha Chikitsa* Of *Shalya Tantra* *Sira Vyadhana* (venesection) should be done to get faster relief. *Acharya Sushruta* mentioned total 700 *Siras* (veins) in human body⁴ and he divides it into 2 categories *Vedyā* or which can be punctured and *Avedya* or which cannot be punctured. In human body 98 *siras*⁵ are *Avedya* and remaining's can be puncture. According to *Sushruta Medra Madhya sira* can be punctured in case of *Parivartika* (paraphimosis), *Upadamsa*(Syphilis), *Sukadosha* (disease affecting the genital (penis) And *Sukra Roga*.⁶

AIMS & OBJECTIVES:

- 1-Importance of *Sira Vyadhana* (venesection) in *Parivartika* (paraphimosis).
- 2-To evaluate the specific anatomical demarcation for *SiraVyadhana* In *Parivartika*.

MATERIAL & METHODS:

Acharya Sushruta specifically mentioned the site of *Sira Vyadhana* (venesection) in *Parivartika* (paraphimosis).under the title of *Vyadhya Siras* in *Sira Vyadh Vidhi Sharir Adhyaya*. Other *acharyas* like *Charaka*, *Vagbhata* etc did not mention such type of specific site.

For literary material related to *Sira* (veins) and *Parivartika* (paraphimosis) various *Ayurvedic* text book like *Charaka Samhita*, *Sushruta*

Samhita, *Astanga Hridaya* etc. and some modern anatomy books like B.D. Chaurasia, surgery books like SRB'S manual of surgery, A concise text book of surgery (S.Das) and some article related to *Sira Vyadhana* are critically reviewed and correlated to modern terms.

Disease review:

Parivartika is a condition where retraction prepucial skin and a *Granthi* (knot) like structure hangs down from glans penis. Here due to excessive massage, pressure or trauma causes vitiation of *Vata* At *Medra Charma* (prepuce), that cause *Vedana* (pain), *Daha* (burning sensation) and *Paka* (suppuration) occasionally. Then due to *Kapha Prakopa Kandu* (itching sensation) and hardness of the knot may be takes place.⁷

Parivartika can be correlated with paraphimosis. It is the condition where inability to place back the retracted prepucial skin over glans penis⁸. Here formation of constriction band of prepucial skin over corona gland is causes obstruction of venous out flow, leads to oedema and congestion of glans penis which causes more difficulty in retracting back the prepucial skin and this cycle repeats. It is an emergency condition where the patient presents with pain & swelling of glans penis. The gangrene may form if the constriction band is not released.⁹

Parivartika is a disease caused by vitiation of *Vata* so *Snehana* (oleation) *Swedana* (sudation) is done then *Avyanga* by *Ghrita* should be done followed by *Upanaha Sweda* (poultice) by *Vata Ghna Dravyas*. *Vataghna vasti* may be given.¹⁰ In the treatment of paraphimosis firstly manual reduction of prepucial skin can be tried. Then multiple puncture by needle over edematous part or one dorsal slit can be made to reduce the oedema. Lastly circumcision can be done. So the main aim is to reduce the oedema.

Anatomy of penis:

Two corpora cavernosa (right & left)

goes parallel upto glans penis. These two muscles are bounded by a fibrous envelop tunica albuginea. Ventrally another erectile tissue comes parallel to corpora cavernosa, and then its terminal part expanded to form conical glans penis. Throughout its whole length it carries the urethra which is surrounded by a fibrous sheath. The skin covers the penis which is loosely connected with the fascial sheath of the organ. The skin is folded at the neck which covers the glans penis, called prepuce or foreskin. On the under surface of this skin there is a median fold, called frenulum.¹⁰

Superficial fascia covers the penis superficially which is continuous with superficial fascia of abdomen and it contains superficial dorsal vein of the penis. Deep layer of superficial fascia called deep fascia of penis, surrounds all the three erectile tissue and it contains deep dorsal vein, dorsal artery, and dorsal nerves.¹¹

The Deep artery which supplies corpora cavernosum. The dorsal artery supplies glans penis, distal part of corpus spongiosum, prepuce and the frenulum. Artery to the bulb of penis supplies the bulb. Superficial external pudendal artery which is a branch of femoral artery supplies to skin and fascia of penis.¹²

Superficial dorsal vein drains the prepuce and penile skin. Deep dorsal vein drains the blood from corpora cavernosa and glans penis.¹³

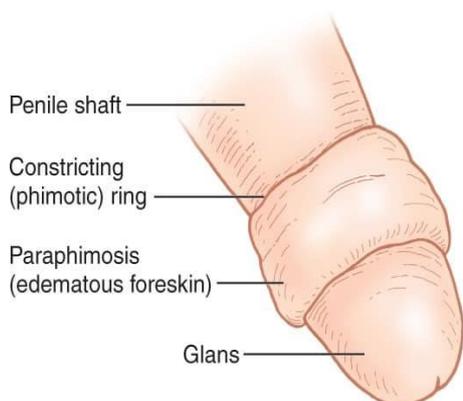
DISCUSSION:

In the *Samprapti* (Pathogenesis) we can see that the pain, *Paka* (suppuration) and hardness, *Kandu* (Itching) is due to *Vata*, *Pitta* and *Kapha* vitiation respectively. As we know in case of *Tridosha* vitiation *Sira Vyadhana* (venesection) can be done. Acharya *Sushruta* and Acharya *Vagbhata* advised *Medra Madhya Sira Vyadhana* (venesection) in case of *Parivartika*. The prominent superficial dorsal vein situated on the dorsal aspect of the penis is most suitable for *Sira vyadhana* (venesection).¹⁴

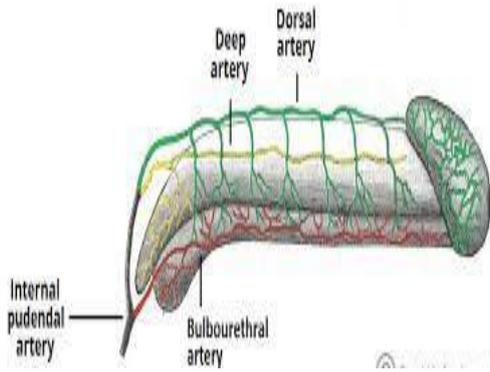
On the other hand the main aim is to reduce oedema. Main venous drainage of prepuce skin is superficial dorsal vein which drains the blood from penile skin and prepuce. In case of *Parivartika* or paraphimosis there is venous congestion and oedema takes place and patient unable to place back the retracted, oedematous prepuce skin. So if *Sira Vyadhana* is done in this vein oedema will be reduced gradually. By this procedure the patient gets relief with minimum invasion and exposure.

CONCLUSION:

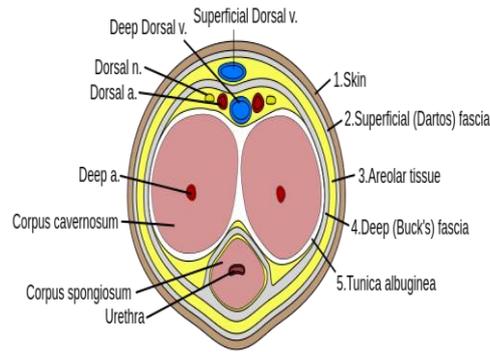
So from the above discussion it is very much logical and may be effective procedure of *Sira Vyadhana* (venesection) in case of *Parivartika*. And by this procedure the patient can get relief with minimum invasion and exposure.



Dorsal slit



Blood supply of penis



Cross section of penis

Acknowledgment: Nil.

Financial Support: Nil.

Conflict of Interest: Nil

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