

# Role of *Sadyovamana* as Emergency Procedure in *Panchakarma*: A Review

## Review Article

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### Abstract

Over the last few decades, common people have a belief that *Ayurveda* can treat only chronic diseases. In the acute condition, we generally preferred modern medicine. But in that era also, a description of acute diseases suggested the availability of emergency treatment. *Panchakarma chikitsa* plays a vital role in ayurvedic treatment line, but in emergency cases, due to lack of time, it is not possible to carry out *purvakarma*, *pradhankarma*, and *pashchat karma* of *vamana*, *virechana* procedures. In such a condition concept of *sadyovamana* can be used as emergency treatment. So, to describe the procedure and importance of *sadyovamana* in comparison with classical *vamana* procedure critical analysis of literature has been done. It was found that *sadyovamana* can be used in various *atyayika* conditions of diseases. In an emergency, as *purvakarma* is not mandatory to carry out *sadyovamana*. This procedure can be conducted in a single day. There is no requirement of *vishram kala* (gap period). Even consideration of *kala* (time) does not matter many more. It is cost-effective, less time consuming and has an immediate effect, but it lasts for a short period. So, we can use the *sadyovamana* in the case of *atyayika chikitsa* of various diseases whenever classical *vamana* is not possible.

**Key Words:** *Atyayika chikitsa*, *Ayurveda*, *Panchakarma*, *Sadyovamana*.

### Introduction

Over the last few decades, common people have a belief that *Ayurveda* can treat only chronic diseases. In the acute condition, we generally preferred modern medicine. But in that era also, a description of acute (*ashukari*) diseases suggests the availability of emergency treatment. *Ayurveda* describes the two different methods of treating disease *shodhana* and *shamana* (pacification of *dosha*). *Shodhana* means detoxification and cleansing of the body. Detoxification of the body done with *panchakarma* procedures. *Panchakarma* term indicates the five procedures of *shodhana* of body channels. These five procedures are *vamana* (therapeutic emesis) performed to vomit the aggravated *kapha dosha*. *Virechana* (purgation) is performed to expelled out aggravated *pitta*. *Nasya* (nasal oleation) is carried out to clean channels of the head, neck region mainly. *Basti* (herbal enema) is the most important procedure, also known as *ardha chikitsa* (half treatment) of whole *Ayurveda*, performed to manifest the vitiated *vata dosha* of the body. *Raktamokshana* (blood-letting) is performed to treat blood impurity (*rakta dushti*). These five procedures play a vital role in *Ayurveda*, treatment of person but

need some time to carry out. Each procedure requires *purvakarma* (pre-procedure), *pradhan karma* (main procedure), and *pashchat karma* (post-procedure) so need in time. But if there are emergency arises, on the spot we can't perform classical *vamana*, *virechana*, in such condition there is a provision of *sadyovamana* instead of classical *vamana*.

The word *sadyovamana* is a combination of two words *sadyo* and *vamana*. According to *Shabdikalpadruma*, *sadya* means on the same day, in the very moment, or immediately. According to *Amarkosha* the meaning of these two words is instantly or at once.

*Sadyovamana* means to attain an immediate or quick elimination of vitiated *doshas* through the oral route. It is the instant therapeutic emesis (purificatory procedure) conducted without internal oleation (*abhyantara snehapana*) and sudation (*sweda*) in aggravated *kapha* conditions. In an emergency (*atyayik chikitsa*) when *doshas* are in aggravated (*utklishta*) stage, instead of classical *vamana karma*, *sadyovamana* can be given irrespective of *kala*. This procedure is less time consuming, cost-effective, and beneficial in acute conditions. So, the objective of this review is to describe the meaning and purpose of *sadyovamana* procedures as an emergency treatment.

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#### Aim and Objectives

- To highlight the concept of *sadyovamana* used in an emergency (*atyayika chikitsa*).
- To describe the procedure of *sadyovamana*.

#### Review of Literature

*Ayurveda* describes the use of *sadyovamana* in various diseases. The term *sadyo vamana* is not directly

described in compendia but we find the traces of these in various classical texts. In *Charak Samhita*, *Acharya* has described the procedure of *sadyovamana* in *jwara chikitsa*. *Jwara* (fever) is dominated by *kapha* and is located in *aamashaya* in the stage of *utklesha* (aggravated). It should be removed by the administration of *vamana* therapy(1). In *Vangasena Jwara chikitsa*, it is mentioned that in the case of *aamjwara*, *jwara* caused due to *ama* (toxins), soon after the ingestion of food causes *amajwara*. *Sadyovamana* can be given in such a situation. In the case of *amajwara*, *vamana* should be given with *lawanambu*(2) (saltwater). In *Pittaj jwara* patients with excessive thirst should be given plenty of water and honey for *vamana*(3).

In *Shwasa samprapti*, *strotas* involved is *pranvaha stotas*. Obstruction in *strotas* is due to *kapha*. As there is an *utklesha* of *kapha dosha*, *sadyovamana* can be given(4). *Chakrapani* in his commentary says that *swasa* is *pitta sthana samudbhava*, which refers to the involvement of the *pitta* with *urdhwasthana*, through *kapha*, and *vata* is responsible for initiating the disease. In the same commentary it is said that *pittasthana* can be taken as *aamashaya*. As there is involvement of the *utkleshta kapha* and the disease is *aamashaya samudbhava*, *sadyovaman* can be given(5). *Vaman* brings *strotoshudhi* and *kaphavarodha* will be removed(6). *Madatyaya* is caused due to excessive consumption of *madya*. Due to *teekshna*, *ushna* and *ruksha* property of *madya*, *utklesha* of the *kapha- pitta* occurs. In *Madatyaya* patient should take *ikshu rasa* and *madya* till his throat (*akantha pana*) and then made to vomit immediately(7). In the case of *Visha*, in an emergency (*atyayik*) condition needs immediate care. *Vamana* indicated in the *visha vegas* need not require *snehapana* or *swedana*. Hence here we can probably say that the *sadyo vamana* is mentioned. *Acharya Charaka* has mentioned *vamana* in the *sthavara visha chikitsa* (8). In *Gara visha chikitsa*, *Chakrapani* advised giving *vamana* immediately(9). There is no other treatment better than *vamana* in case of *sthavara visha chikitsa*. In *Chhardi vyadhi*, *nidanasevana* leads to *prakopa* of *vata*. *Vata* gets located in *udara* which produces *utkleshana* of undigested particle. Expels these through the *koshtha* and *agnibala* is reduced(10). In *Chhardi*, *agni* is in *mandavastha*, it may not be able to digest the medicine also. *Vamana* may bring up the *utkleshta dosha*, then undigested substances located in the *aamashaya* along with the *vamana aushadha*. Moreover, *pravruddha kapha* will act like *shalya* if not expelled outside, so here *sadyo vamana* can be carried out because usage of *snehana*, *swedana* will further worsen the condition of *dosha* is in *aamashaya* and *pravruddha avastha*. In *Madhav Nidan*, *Acharya* explained in *Kotha chikitsa* that, *kotha* is a disease that arises due to the improper administration of the *shodhana chikitsa* or due to *avastha* of *pitta*, *kapha* and *anna*(11). *Acharya Vangsen* has mentioned *vamana* should be induced very quickly. He suggested *sadyo vamana* in *kotha* by *patolanimbavasa kwatha*(12). In *Alasaka* disease *utkleshta dosha* is present. Hence there is no need to produce the *utklesha* of *doshas* further so

*sadyovamana* can be performed. In *Charak Vimansthana*, *acharya* has mentioned the disease called *Amavisha*. In *amavisha* condition emergency treatment should be given (its mentioned as *ashukaryitya virudhopakrama cha*). In *samadosh* conditions, made to vomit with lukewarm water with salt followed by *sweda*(13). *Visuchika* is a condition that occurs in *ajeerna* which is characterized by pain which is similar to pricking pain(14). In *Vangsen Ajeerna chikitsa*, it is described that *vamana* should be done with lukewarm salt water(15). While performing *virechana* even after attaining the *suddhi lakshana*, the medicines remain in the *koshtha*. *Acharya Charaka* has advised performing the *vamana* to bring out excess medicine from the *koshtha*(16). According to *Acharya Sushruta*, *Sadyovamana* can be given to those persons who affiliated with *kapha*, persons suffering from *Ajeerna*, and *Visha*. *Acharya Sushruta* has mentioned that conditions, where medicine administered for *vamana* and *virechana*, does not produce the desired results. Thereby resides in the *koshtha* and causing the obstructing of the *dosha*. In such conditions associated with *trishna*, *shula*, *chhardi* etc *vamana* has to be induced by *ushna jala*(17)(warm water). *Vangsen* has described the disease *upadamsha* that, the excessive of *dosha* in *upadamsha* should be expelled out by both routes immediately. Pain and odema of patient subside soon(18). *Ajeerna* is the condition in which *acharya charaka* said that the person suffering from the disease, should not be given normal *vamana* drugs to induced *vamana*. Lukewarm saltwater is advised in this situation(19). *Acharya Kashyapa* has mentioned that no liquid medicines should be administered suddenly in case of *amlapitta*, other than the *vamanoaushadha*(20)

## Materials and Methods

The concept of *sadyovamana* is studied through classical text of Ayurveda *Charak Samhita*, *Sushrut Samhita*, *Ashtang hridaya*, *Madhava Nidana*, *Sharangdhara Samhita*, *Vangsen samhita*, *Bhaishajya ratnavali* were studied. Along with this literature available from various search engines were also studied, then analysis of literature has been done.

## Result and Discussion

### Procedure of Sadyovamana

Criteria for *sadyovamana* are, *utkleshta dosha*, *atyayika avastha* (emergency condition) and *vamya rogi*(21). To perform *sadyovamana*, *kapha* and *pitta dosha* must be in *utkleshta* stage. *Acharya Chakrapani* has mentioned *utkleshta avastha* means *dosha* are detached and ready to come out from *amasaya*(22). *Acharya Sushruta* has mentioned that when irritated food associated with salivation, spitting and does not come out but produces pain in the cardiac region it is known as *utklesha*(23) *Vamana* should be performed in the morning i.e. *kapha kala*. However, in *atyayika vikara* (when the disease in the emergency stage) there is no need to consider *kala* while performing any *panchakarma* procedure, as *dosha* is in *utkleshta* stage so consideration of time does not matter many more.

The necessity of *purvakarma* in *sadyovamana* is to mobilize the *doshas* from the discrete parts of the body to *koshtha*, for easier *vamana* process with minimum strain, to prevent *vata prakopa* and for softening and liquifying the *doshas*. In the case of an acute attack of a disease where *sadyovamana* is to be administered for instant management, it is not mandatory to do *abhyanga* (massage) and *swedana* (sudation). *Purvakarma* procedure of *sadyovamana* may vary from disease to disease. E.g. in the case of *visha*, *ajirna*, etc emergency conditions directly *vamana dravya* is given to remove the *visha* and undigested food without *abhyanga* and *swedana*. But in acute attack of *shwasa*, *lavana taila abhyanga* and *swedana* are essential to liquefy the *kapha*, bring the *kapha* to *amashaya* from *pranavaha strotas* thus helps in easy elimination(24).

*Yavagu* (rice mixed with a small quantity of ghee) should be given before *sadyovamana*. *Vamana* should not be administered to patients with an empty stomach.

### Pradhana Karma

The procedure of *Sadyovamana* is as of classical *vamana*. Since there is *utklistha avastha* of *dosha*, the drug which is used in the procedure is *vamanopaga* like *lawanambu*. Different drugs can be used in different diseases as shown in table no.1

**Table no.1: Dravya used to perform Sadyovamana**

Sr. no.	Compendia	Disease	S a d y o v a m a n dravya
1	Charaka	Amajwara	Lawanambu
2	Charaka	Alasak	Ushna lawanambu
3	Sushruta	Pittaj jwara	Lawanambu
4	Sushruta	Madatyaya	Ikshurasa, Madya
5	Vagbhata	Jwara	Sura, Tittira mansarasa
6	Kashyapa	Amlapitta	L a w a n a m b u , kshira, ikshurasa
7	Vangsen	Visuchika	Ushna lawanambu
8	Vangsen	Visha	Madanphala, Sunthi
9	Bhaishajya ratnavali	Ajirna	Vacha, lawanambu

### Pashchat karma

After achieving *samyak shuddhi lakshana* patient is asked to take rest, *dhumpan*, and *peyadi sansarjana krama* (diet regimen).

### Mode of action of classical vamana

According to *Acharya Charaka*, the emetic drug has *ushna*, *teekshna*, *sukshma*, *vyavayi* and *vikasi guna*. By their potency, it reaches to the heart and circulates through vessels. Because of their *agneya* nature, they liquify the compact *doshas*. *Teekshna guna*

separated the adhered *doshas* located in gross and subtle channels of the body (*sthula* and *sukshma strotas*). These separated *doshas* are brought to *amashaya* due to *anupranav bhava*. *Doshas* get stimulated by *udan vayu* as *vamak* drug have *urdhwabhaghara prabhava* due to *agni* and *vayu* predominance which ultimately leads to migration of *doshas* towards mouth from *amashaya*(25).

Mode of action of *sadyovamana* is also the same as that of classical *vamana* except *purvakarma* is not done in *sadyovamana*. The *doshas* expelled from localize tissue. The *dravya* use for *sadyovamana* is *vamanopaga dravya* ( drug helps for *vamana* ). Some basic difference in classical *vamana* and *sadyovamana* showing in table no. 2.

**Table no.2: Difference between Sadyo Vamana and Classical Vamana:**

Sr. No.	Sadyo Vamana	Classical Vamana
1	<i>V a m a n a</i> is conducted immediately in a single day.	<i>Vamana</i> conducted by <i>arohana krama Sneha pana</i> upto <i>samyak snigdha lakshana</i> .
2	<i>Purva karmas</i> like <i>ama pachana</i> , <i>snehana</i> , <i>swedana</i> are not mandatory to carry out <i>Sadyovamana</i> (26).	<i>Purva karmas</i> like <i>pachana</i> , <i>snehana</i> , <i>swedana</i> are mandatory.
3	The <i>doshas</i> are expelled out from localise tissue.	The <i>doshas</i> are expelled out from the system, i.e deep tissue.
4	Not require <i>vishram kala</i> (gap period).	Require <i>vishram kala</i> (gap period)(27).
5	The person who is not co-operative, don't have much time and <i>dosha</i> are in <i>utklista avastha</i> , <i>s a d y o v a m a n a</i> carried out.	Patients should be co-operative, have ample time to take treatment, and <i>bhishak vashya</i> (obedient).
6	Short-acting effect	Long-lasting effect.

In *sadyovamana* we are not following increasing order of oletion (*arohana krama snehpana*) and the *vishram kala* etc as per the guidelines by the *Acharyas*. Because of these, we are not eliminating *prabhuta dosha* from the deeper tissue. *Sadyovamana* has minimal efficacy and instant relief like as *ajeerna*.

*Sadyovamana* is carried out when *dosha utklistha lakshnas* like *hrullas*, *lala praseka*, *shiro gourava*, *kapha sthivana*, *bhakta dwesha* etc are present. *Purvakarma* like *ama pachana*, *snehna*, *swedana* are not mandatory for *sadyo vamana*. Otherwise the *dosha utklistha avastha* is reduced. *Sadyo vamana* may be practised instantly in conditions like *tamaka swasa*(28)(2)(bronchial asthma), *urdhwaga*

*amlapitta, ajeerna* etc. It can be practiced in various emergency conditions *kapha utklesha avastha* in disease, *visha pana, ajeerna, amlapitta*, and dental caries(29)as an emergency treatment.

### Benefits of *sadyovamana*

It is cost-effective as we can perform it without *snehapana*. It is less time consuming as classical *vamana* requires a minimum of 15 days. *Sadyovamana* can carry out according to the situation instantly. And we can observe the immediate effect of *sadyovamana* as good as classical *vamana*.

### Conclusion

*Sadyovamana* is an important *panchakarma* process which is least practiced. It is a tool that can be used in various emergency diseased conditions. It gives instant relief in *utklishhta doshavastha*. It is a cost-effective, less time consuming, and easy to carry out.

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