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# Agnikarma in Ayurveda - A Review Article

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## ABSTRACT

Ayurveda is the everlasting supreme science of medicine because it deals with promotion of health and curing diseases. Sushruta known as father of surgery has described various surgical and para surgical measures. Sushruta has mentioned different methods of management of diseases, such as *Bheshaja Karma*, *Ksharkarma*, *Agnikarma* and *Shastrakarma*. In this fast lifestyle patients need instant result on all pain. *Agnikarma* is one such procedure and it is believed that disease treated with this never reoccurs. This *Agnikarma* is original idea of modern cauterization procedure. This review deals with various aspects of *Agnikarma*.

**Key words:** *Agnikarma, Ayurveda, Sushruta, Shalyatantra, Review*

## INTRODUCTION

*Shalyatantra* is one of the eminent branches of Ayurveda, which consists of major therapies. *Agnikarma* is superior among all of them and has proved to be boon where local involvement of *Vata* and *Kapha Doshas* are observed in diseases.

### Definition of *Agnikarma*

it is composed of two words - *Agni* and *Karma* (i.e., fire and procedure). In short, we can say a procedure done by using *Agni* for treating disease.<sup>[1]</sup>

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policy makers, private sector partners, medical professionals and the public at large to aware that obesity is predominantly a “social and environmental disease.”<sup>[2]</sup>

In Ayurveda it is explained as *Sthaulya* and *Medoroga* in all *Samhitas*. It is a *Rasa Nimittaja* and more so a *Santarpanajanya Vyadhi*. Its *Nidana*, *Samprapti*, *Lakshana*, *Upadhravas* are mentioned in detail.<sup>[3]</sup> Elaborative description of *Chikitsa* is also done by the *Acharyas*. Mainly it includes *Shodhana* and *Shamana* type of treatments. Among them *Udvartana Karma* which is having *Kaphahara* and *Medohara* property, is used frequently with *Rookshana Dravyas*. In this *Karma* powder of drugs is massaged against the hair follicles.<sup>[4]</sup>

In this study *Shaileyadi Churna* having *Rookshana*, *Laghu* and *Tridosahara* property is selected for *Udvartana*.<sup>[5]</sup>

Ayurveda explained about *Vyayama* in the context of *Dinacharya*. *Vyayama* is defined as *Visheshayama* of body that is attaining specific posture where in toughness and mobility of body parts are attained.

*Asana* is the first step of *Hatayoga*. One should practice *Asana's* to obtain *Sthairyra*, *Arogya* and *Laghuthva*.<sup>[6]</sup>

Many *Asanas* have been explained in various books with successful practise all around the globe. They are effective and easily practised in most of the life style disorders. *Sthoulya* is one such disease where *Asanas* are useful in reducing the weight and their complications.<sup>[7]</sup> Hence a study is planned to evaluate the effect of *Udvarthana* with *Shaileyadi Churna* and *Asana* in *Sthoulya*.

## MATERIALS AND METHODS

### Source of Data

40 Patients suffering of *Sthoulya* were selected from Department of Panchakarma OPD and IPD of Muniyal Institute of Ayurveda Medical Sciences by preset inclusion and exclusion criteria.

### Method of collection of the data

A special proforma was prepared incorporating all points of history taking, physical signs and symptoms of *Sthoulya* and lab investigations. Accordingly, the patients were selected and were subjected to a detailed clinical history and complete examination. Two group with 20 patients each will be randomly selected from above date.

**Study Design:** This was a comparative clinical study.

### Diagnostic criteria

- *Pratyatma Lakshana* of *Sthoulya* presenting with symptoms like *Chalaspik*, *Udara* and *Stana*, lack of *Utsaha*, *Svasa*, *Atinidra*, *Svedabadha*, *Daugandhya*, *Atipipasa*, *Atiksudha*, *Alpavyavaya*, *Gatrasada*.
- Value of BMI.

### Inclusion Criteria

- Patient aged of above 18 and below 60.
- Having BMI in between 27 to 33.
- Patient presenting with "*Pratyatmaka Lakshana*" of *Sthoulya* as explained in classics.

### Exclusion Criteria

- Patient having age of above 60 and below 18.

- Patient having Eczema, Psoriasis, Cuts, Burns, wounds, Pregnant women.
- Having BMI value above 33.

### Assessment Criteria

1. *Chala Sphik Udara*
2. *Kshudra Svasa*
3. *Nidradhikya*
4. *Ati-Kshudha*
5. *Daugandhya*

### Intervention

The simple procedure of massaging the whole body below neck with dry powder of *Shaileyadi Churna* in Group A with it mixing of *Dhaturo Patra Swarasa* and *Lepa* will be done on whole body. The *Lepa* is left to dry for few minutes. Massaging will be done opposite to the orientation of hair in the 7 postures of body. The duration of the procedure is 45 minutes and carried out for 14 days. Soon after the procedure patient is asked to take rest for about 15 minutes and then allowed to take bath.

- |                  |          |
|------------------|----------|
| 1. Sitting       | - 5 min  |
| 2. Supine        | - 10 min |
| 3. Left lateral  | - 5 min  |
| 4. Dorsal        | - 5 min  |
| 5. Right lateral | - 5 min  |
| 6. Supine        | - 10 min |
| 7. Sitting       | - 5 min  |

In group B Just after *Udwartana Karma* patient allow to take rest for 15 minutes then advised to do these *Asanas*.

### Asanas

Session of nine *Asanas Yogic* postures in sitting, standing, lying down, lying down on abdomen, forward bending will be conducted and all the *Asanas* will be done for five minutes for a total duration of 45 minutes. These are the *Asanas*.

1. *Trikonasna*

2. Parsvakonasana
3. Paripoorna Navasana
4. Virabhadrasana
5. Padahastasana
6. Dhanurasana
7. Jathara Parivartasana
8. Urdhva Prasrita Padasana
9. Janu Sirsana

## RESULT

**Table 1: Objective parameters overall effect of Group A on 20 patients of *Sthaulya*.**

Total Effect	Percentage	No of Pts	%
Cured	100%	0	0
Markedly Improved	76-99%	0	0%
Moderately Improved	51-75%	7	35%
Improved	26-50%	9	45%
Unchanged	<25%	4	20%

**Table 2: Objective parameters overall effect of Group B on 20 patients of *Sthaulya*.**

Total Effect	Percentage	No of Pts	%
Cured	100%	0	0
Markedly Improved	76-99%	1	5%
Moderately Improved	51-75%	6	30%
Improved	26-50%	9	45%
Unchanged	<25%	4	20%

## DISCUSSION

*Sthaulya* is considered as a burning problem of today's era caused due to sedentary life style, unwholesome food habits, lack of physical exercise, mental stress etc.

factors. Its importance lies in the fact that it is the doorway to other major health complications.

The *Sthaulya* was discussed with great importance since Vedic period itself, the references of *Sthaulya* could be seen in Ayurvedic classics like *Bruhatrayees* and *Laghutrayees*. It was considered as one among the *Astamahagadas*.

The management of this condition also seeks great importance. As an aid to this, the present study had been selected.

### Obesity

*Sthaulya* was referred to as Obesity in this context as the symptomatology, complications etc. of Obesity is very similar to *Sthaulya*.

The final result was drawn based on assessment of individual patients on various parameters and then finally inferences were drawn considering relevant statistical methods are presented here.

### Discussion on effect of Treatment

The assessments of results were made by adopting the standard methods of scoring and the signs and symptoms of *Sthaulya*.

### Effect of treatment on *Chala SphikUdara*, *Kshudra Svasa*, *Nidradhikya*, *Ati-Kshudha*, *Ksudrasvasa* and *Daurgandhya*

Absolutely no much improvement was found in both the groups. As the total duration of the treatment is only 14 days. This treatment modality with longer duration with internal medicines may give much better results.

### Probable mode of action

*Udvardhana* is having the *Gunas* of *Kapha-Meda Vilayana* property. Due to *Ushna* and *Teekshna Guna* of *Dravya* and forceful massage effect on *Romakupa*, the *Veerya* of drug enters into body through, there after it opens the *Mukha* of *Siras*, thereby making *Paka* of *Kapha* and *Medas*. Due to this, there will be *Dravata Vriddhi* of *Kapha* and *Medas* occurs, which is present in *Abaddha* form so it helps to proper formation of

*Medas*. It also helps to remove the *Avarodha* which is an important factor to get rid of *Sthaulya*.

**Twak Prasadakara:** By performing *Udvardhana*, the amount of blood circulation beneath the skin increases due to friction. Due to this change the cells of the skin are supplied with more oxygen, thereby changing the colour at least to some extent. In all 40 patients the investigator had observed no changes with respect to their skin colour, but if this procedure is conducted as a routine practice or in the form of *Utsadana* there are chances to prove above hypothesis.

**Anga Sthirakarana:** By performing *Udvardhana* fat cells get lipolysed then the cells get shrunken causing compactness. Thus one can appreciate the above benefit.

**Gauravahara:** *Gaurava* is a feature due to increase in *Kapha* and *Medas*. *Udvardhana* is having the *Gunas* of *Kapha* – *Meda Vilayana* property for *Gauravahara*.

**Tandrahara:** *Tandra* is due to *Tamo Guna*, which is increased by *Vikruta Kapha*. *Udvardhana* will reduce *Kapha*, hence relieves *Tandra*. All the patients who received *Udvardhana* got this benefit.

**Kanduhara:** One of the reasons for *Kandu* is obstruction in the *Swedavaha Srotas*. As *Udvardhana* clears the orifices of *Swedavaha Srotas* by its *Sira Mukha Vishodhana Guna*, it reduces itching.

**Vatahara:** In *Sthaulya*, *Medas* and *Kapha* obstruct *Vata*. *Udvardhana* reduces *Kapha* and *Medas* and thereby normalizing the movement of *Vata*.

### Rubbing

Rubbing helps in the absorption of effusions, relief of blood stasis and carrying away the morbid products in the system. Deep pressure massage helps the interchange of tissue fluids by increasing the circulation in the superficial veins and lymphatics. The pressure helps the contents of the vessels move towards the heart, if applied strongly and quickly, it has a stimulating effect. It increases nutrition in all tissues. It removes fatigue, carrying away the increased products of combustion. Also it assists the re-absorption of serous fluid.

The rubbing may be said to act both by pressure and by suction. Massage diminishes the blood pressure without increasing the activity of the heart. But the blood vessels are relaxed, distended and stretched by this. After a course of this treatment blood has been found to contain more red blood corpuscles and haemoglobin. These are not manufactured by rubbing, but bring them into circulation instead of them remaining dormant in the system. It influences the general metabolism when applied on large areas.

The rubbing helps to breakdown thickening and adhesions in sub acute and chronic conditions. Also helps in the re-absorption of inflammatory products and absorption of fat in fatty tissues.

### Effects of Asanas in Group B

These *Asanas* is an isotonic type of exercise it does not increase the tension but increases the metabolic rate. Dynamic stretches in forward and backward direction and rhythmic positive and negative pressure changes in viscera stimulate various vicerceptors. That is why all the systems work at optimum level. This increases the stamina and cardiovascular endurance. It mobilizes the stored or accumulated fat by increasing the blood circulation. So, the weight loss and other objective, subjective parameter had seen good result in Group B compare to Group A.

### CONCLUSION

The conclusion drawn from the scientific discussion on present study are as follows; *Sthoulya* is a *Santarpana Janya Vikara* having unique *Samprapti*. *Madhura Rasa Bhojana* and *Avayama* are the prime causative factors along with *Beeja Dosha*. *Guru* and *Apatarpana* is the line of treatment to conquer *Teekshnagani* and *Medovruddi* respectively. *Vataghna* and *Shleshma Medohara Ahara Aushadhi*, *Rukshoshna Udvardhana* are the modalities of *Sthoulya*. Among those *Shailayadi Churna* having *rukshana* and *medohara* effect is the best remedy for *Sthoulya*. The present study establishes that 14 days regular practice of these Nine *Asanas* with *Udvardhana* helped obese person to reduce their weight. Treatment response of all objective parameters were highly significant in both the groups



but compared to group A, group B has shown better results. Hence further continuation of the treatment is justified or else this study will pave way for more clinical trials in this regard with more prolonged course.

## REFERENCES

1. Anant Ram Dharma. Sushruta Samhita edited with 'Susrutavimarsini' hindi commmentary, Sutrasthan, Agnikarma Adhyaya chapter.12/1-2 (dalhan). Varanasi, Chaukhambha Orientalia. 1<sup>st</sup> edition.
2. YG Joshi. Charak Samhita Chakrapanitika. 5<sup>th</sup> edition. Chikitsasthan 23/46.
3. Anant Ram Dharma. Sushruta Samhita edited with 'susrutavimarsini' hindi commmentary Sutrasthan chapter.8/15. Varanasi, Chaukhambha Orientalia. 1<sup>st</sup> edition.
4. Shastri Kaviraj Ambikadutta. Sushruta Samhita. Chaukhamba Sanskrit Sansthan, Varanasi. edition 2011, Sutrasthan chapter 12/4.
5. Shastri Kaviraj Ambikadutta. Sushruta Samhita. Chaukhamba Sanskrit Sansthan, Varanasi. edition 2011, Sutrasthan chapter 12/11.
6. Shastri Kaviraj Ambikadutta. Sushruta Samhita. Chaukhamba Sanskrit Sansthan, Varanasi. edition 2011, Sutrasthan chapter 12/7.
7. Shastri Kaviraj Ambikadutta. Sushruta Samhita. Chaukhamba Sanskrit Sansthan, Varanasi. edition 2011, Sutrasthan chapter 12/10.
8. Shastri Kaviraj Ambikadutta. Sushruta Samhita. Chaukhamba Sanskrit Sansthan, Varanasi. edition 2011, Sutrasthan chapter 12/14.
9. Shastri Kaviraj Ambikadutta. Sushruta Samhita. Chaukhamba Sanskrit Sansthan, Varanasi. edition 2011, Sutrasthan chapter 12/5.
10. Shastri Kaviraj Ambikadutta. Sushruta Samhita. Chaukhamba Sanskrit Sansthan, Varanasi. edition 2011, Sutrasthan chapter 12/6.
11. Shastri Kaviraj Ambikadutta. Sushruta Samhita. Chaukhamba Sanskrit Sansthan, Varanasi. edition 2011, Sutrasthan chapter 12/12.
12. Shastri Kaviraj Ambikadutta. Sushruta Samhita. Chaukhamba Sanskrit Sansthan, Varanasi. edition 2011, Sutrasthan chapter 12/13.
13. Shastri Kaviraj Ambikadutta. Sushruta Samhita. Chaukhamba Sanskrit Sansthan, Varanasi. edition 2011, Sutrasthan chapter 12/3.
14. Shastri Kaviraj Ambikadutta. Sushruta Samhita. Chaukhamba Sanskrit Sansthan, Varanasi. edition 2011, Sutrasthan chapter 14/42.

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