



Evaluating Vamana Shuddhi through Analytical Methods: A Pilot Study

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Introduction: Panchakarma, comprises various detoxification and rejuvenation procedures, among which Vamana plays a vital role in eliminating excess Kapha Dosha. Vamana Sudhi, a therapeutic practice, is recognized for its effectiveness in cleansing the body and restoring balance. This study provides a comprehensive review of analytical methods used to assess the efficacy and safety of Vamana Sudhi, including hay tests, fat presence tests, pH meter analysis, and pH strip methods.

Materials and Methods: This study aimed to analyse pH levels, fat content, and the presence of bile salts in vomitus collected at every Vega during the Vamana procedure, regardless of the subject's disease conditions. A total of 15 participants underwent preparatory procedures, including Deepana-Pachana, Snehapana, Abhyanga, and Swedana, followed by Vamana using Madanaphala Pippali as the emetic agent.

Results: The Vamana procedure was conducted as per classical Ayurvedic texts. Subjects with Mandagni required more days for Deepana-Pachana compared to those with Madhyamagni. A significant correlation was observed between the duration of Snehapana and the type of Koshta, suggesting that the duration of oleation therapy depends largely on gut characteristics. A notable pH changes in the last two Vegas indicated a shift in vomitus composition, suggesting that pH serves as an indicator of Pittanta. Additionally, a significant pH difference before and after treatment, as observed using pH strips, confirmed immediate gastrointestinal changes post-Vamana. The presence of bile in the vomitus further indicated successful expulsion of toxins.

Conclusion: Physical analysis of vomitus suggests that pH can serve as a reliable indicator for determining the endpoint of Vamana (Antiki Shuddhi). Measuring drug inputs and outputs (vomitus analysis) is crucial for assessing purification effectiveness (Maniki Shuddhi) and gaining insights into therapeutic outcomes. The study confirms the movement of Doshas from Shakha to Koshta and identifies fat presence in vomitus as a result of Snehapana and Kapha-Utkleshakara Ahara. This analytical approach provides a new perspective on evaluating the Vamana process.

Keywords: Vamana, Pittanta, Hay's test, fat analysis, pH analysis

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Introduction

Pancasodhana, the five purification therapies of *Ayurveda*, play a crucial role in disease prevention, health promotion, and curative treatments. Among them, *Vamana Karma* is considered the primary procedure, specifically designed to induce therapeutic emesis.

This process facilitates the elimination of accumulated *Kapha* and *Pitta Doṣhas* from the body, particularly from the *Ūrdhva Bhāga*, through oral expulsion. Classical texts emphasize the administration of *Vamana* during *Vasant Rutu* to maintain health and prevent *Kaphaja Vyādhis*.^[1] To ensure efficacy and minimize complications, the procedure must strictly adhere to classical guidelines.

The fundamental principle of *Vamana* is described as:

"*Tatra Dosha Haranam Urdhwa Bhagam Vamana Sangyakam*"^[2] a process where vitiated *Doṣhas* are expelled through the upper channels of the body. The therapy is particularly beneficial in treating conditions like rhinitis, sinusitis, and various skin disorders (e.g., psoriasis and acne vulgaris), which are linked to *Kapha* aggravation. It is also effective in cases where *Kapha* interacts with *Pitta* or when *Vata* disturbs *Kapha* sites. The accumulation of metabolic waste and free radicals in the body can contribute to various disorders, making *Srotoshodhana* (channel purification) essential, which is effectively achieved through *Vamana* therapy.^[3]

The classical preparatory measures, *Purvakarma* of *Vamana* include *Abhyantara Sneha*, *Bahya Sneha*, and *Swedana*. These procedures help mobilize *Doṣhas* from the *Śākha* to the *Koṣṭha*, facilitating their elimination through emesis. However, limited research has been conducted on the assessment of *Śuddhi* and the movement of *Doṣhas* during *Vamana* therapy.^[4]

This pilot study aims to evaluate *Vamana Shuddhi* through analytical methods by assessing *Antiki Shuddhi*, including indicators such as the presence of *Pitta* and fat, to validate the movement of *Doṣhas* from *Sakha* to *Koṣṭha*. Through this analytical approach, the study seeks to enhance the scientific understanding of *Vamana* and its physiological impact.

Materials and Methods

A pilot study involving 15 subjects from the *Panchakarma* Department of Alva's Ayurveda Medical College conducted, with vomitus samples analysed through pH testing^[5], lipid tests^[6], and Hay's test^[7] for bile salts. The results will determine the statistical significance of *Vamana Shuddhi* parameters, contributing to a scientific understanding of the procedure.

Observations and Results

The study observed a predominant presence of individuals with *Madhyama Agni* and *Madhyama Koshtha*, which are essential factors influencing the effectiveness of *Vamana*. The duration of *Deepana-Pachana*, a preparatory procedure, varied according to *Agni*, with subjects having *Mandagni* requiring more days. Statistical analysis confirmed a significant difference in *Deepana-Pachana* duration based on *Agni* levels ($P > 0.05$). Similarly, most subjects required three days of *Deepana-Pachana* before *Snehapana*, aligning with *Ayurvedic* principles. Gender-wise distribution revealed a higher number of female participants in the study.

During *Vamana* procedure, most subjects experienced an average of 7-8 *Vega*, and the majority achieved *Antiki Shuddhi*, with visible *Pittanta* in final stages. Analysis of input-output volumes showed a mean difference of 292.84 ml, confirming that most administered medications were expelled, validating *Samyak Shuddhi*. A significant change in pH levels before and after treatment was observed ($P < 0.001$), indicating a clear gastrointestinal transformation post-*Vamana*. Further, Hay's test revealed presence of bile in later *Vega*, even in cases where *Pittanta* was not visually evident, highlighting its role in detecting purification markers and preventing excessive *Vamana* (*Atiyoga*). Fat analysis across different *Vega* showed a statistically significant difference, with fat content increasing in later *Vega*, reinforcing *Ayurvedic* concept of *Dosha* movement from *Shakha* to *Koshtha*. The *Vega*-wise pH analysis demonstrated a significant difference between 1st and later *Vega* ($P < 0.001$), supporting notion that pH shifts indicate transition to *Pittanta*. The relationship between *Snehapana* duration and *Koshtha* type was also statistically significant ($P = 0.035$), affirming that *Vamana* procedures were conducted per classical *Ayurvedic* guidelines.

Overall, these findings validate the effectiveness of *Vamana* through measurable physiological and biochemical markers. The study supports *Ayurveda*'s traditional principles while providing scientific data to enhance its clinical applications. Further research with larger sample sizes and advanced vomitus analysis can refine these observations and establish more concrete parameters for assessing *Shuddhi Lakshana* in *Vamana* therapy.

Discussion and Conclusion

Vamana plays a crucial role in the treatment of diseases caused by *Kapha* aggravation or its combination with *Pitta* and *Vata*, such as rhinitis, sinusitis, and skin conditions like psoriasis and acne. It helps eliminate metabolic waste, which otherwise leads to free radical formation and tissue damage. The process of *Srotoshodhana* (purification of bodily channels) through *Panchakarma*, particularly *Vamana*, is essential in restoring balance. Observations in the study showed that most subjects had *Madyamagni* and *Madhyama Koshta*, factors crucial for determining the effectiveness of *Vamana*. The duration of *Deepana-Pachana* was largely dependent on *Agni*, with *Mandagni* subjects requiring more days for preparation.

The study highlighted key physiological responses during *Vamana*. Most subjects experienced *Pravara Shuddhi*, with an average of 7-8 *Vega*. The presence of bile in the final stages of vomiting (*Pittanta*) was confirmed through pH analysis, indicating a shift in gastric composition. Hay's test further confirmed *Pittanta*, even in cases where it was not visibly apparent, providing an additional marker for assessing the completion of the purification process. Additionally, input-output analysis revealed that nearly all administered medications were expelled by the end of the procedure, reinforcing the effectiveness of *Vamana* in achieving *Samyak Shuddhi* (proper purification).

The pharmacodynamics of *Vamana* drugs were also explored, emphasizing their properties - *Uṣṇa*, *Tikṣṇa*, *Sūkṣma*, *Vyavāyi*, and *Vikāṣi* - which facilitate the breakdown and mobilization of *Doshas*. These properties help liquefy and expel toxins by directing them toward the stomach, from where they are eliminated under the influence of *Udāna Vāyu*. pH analysis before and after treatment showed a significant rise in pH levels,

Suggesting a clear impact on gastrointestinal function. The presence of fat in vomitus confirmed the movement of *Doshas* from *Shakha* to *Koshta*, validating classical Ayurvedic concepts.

Overall, this analytical study underscores the efficacy of *Vamana* in disease management, particularly in *Kapha*-related disorders. It provides scientific validation for traditional Ayurvedic principles through physiological and biochemical markers.

Further research, including advanced vomitus analysis and larger sample sizes, could deepen our understanding of *Vamana*'s impact, making it a more refined therapeutic approach in modern *Ayurveda*.

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