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Review Article

A critical analysis on need of standardization of doses in Panchakarma

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ABSTRACT:

In today's modern era standardization has gained great importance. Efforts are being made to standardize everything in each field. Ayurveda is also not an exception for that. In Panchakarma various researches are going on for standardization of equipments, procedure and aushadhi matra used in different karma etc. Ayurveda is Shashwata Shastra then whether there is any need of standardization? Ancient Acharya described matra (Medicinal dose) for Panchakarma. Those matra framed on the basis of Dashavidha pariksha bhava, Koshtha, Sharir pramana etc. Among these Agni, bala, Aatur bala and Vyadhi bala are preferably considered. Ayurveda has described matra as Prasruta for Basti, Prastha for Raktamokshana, Bindu for Nasya, Angulee pramana for measurement of various body parts, Anjalee pramana for measuring quantity of body fluids. They have given parameter such as Prasruta, Prastha, Bindu, Angulee praman, Anjalee pramana which are already standardized. There is no need of standardization of matra, as the parameter for taking matra are standardized according to Agni bala, Sharir bala, Vyadhi bala, Sharir rachana of each person. By means of this standard dose can be derived for each person according the parameter.

KEY WORDS: Standardization, Panchakarma, Matra, Bala, Agni.

INTRODUCTION:

In Ayurveda two types of chikitsa described namely Samshodhana and Samshamana. Samshodhana includes Panchakarma therapies which are Vamana, Virechana, Nasya, Basti, and Raktamokshana¹. Panchakarma is comprehensive and integral part of Ayurvedic treatment and has its role in almost all therapeutic uses. Panchakarma therapy is useful in maintaining health of individuals and before administration of rasayana and vajikarana therapy. Ancient Acharya described matra of various dravya used in Panchakarma procedure's which are described on the basis of dashavidha pariksha bhava, agni bala, aatur bala, vyadhi bala, koshtha etc.

योगमासां तु यो विद्यादेशकालोपपादितम्। पुरुषं पुरुषं वीक्ष्य स ज्ञेयो भिषगुतमः ॥ (च.स्. १/१२३)

The vaidya who thinks that each person is different from another person and gives proper treatment on the basis of *desha*, *kaal*, *satmya*, *bala*, *prakruti*, *vaya* etc. known as " *Uttam bhishak.*" Ayurveda has different parameter (*matra*) for different procedures such as *Prasruta* for *Basti*, *Bindu* for *Nasya*, *Prastha* for *Raktamokshana*. Those *matra* derived from such parameter are standard in that period.

In today's era standardization needed everywhere. There are various researches going on which compare classical dose with routinely practiced dose for standardization of *matra*. But *Acharya* mentioned that those *matra* will change according to the *Agni bala*, *Aatur bala*, *Vyadhi bala* of person³. It means that standardization derives minimum and maximum limit of any dose according to condition.

Charaka has mentioned that matra of dravya, which is useful to obtain Samyak yog lakshana by expelling vitiated dosha's by avoiding ayoga and atiyoga are considered as proper matra for Shodhana of that

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person and it varies according to person⁴. Thus *matra* are considered as standard based on parameter such as *dashavidha pariksha bhava, agnibala, aatur bala, vyadhi bala* and *koshtha*.

In *Panchakarma* therapy if proper *matra* is not used in recommended indication it may lead to hazardous effects. So that selection of *matra* has very important role in *Panchakarma* and it cannot be fixed or standardized.

Standardization:

"Standardization" word is brought forward by the science. To standardize means average out, equalize, systematize. Where noun 'standard' stands for meaning like grade, measurement, average, mean, level.

In present scenario doses are standardized on the basis of body mass index and age. But in Ayurveda doses are described on the basis of dashavidha pariksha bhava, agni bala, sharir bala, sharir rachana, koshtha etc. Charaka explains regarding dashavidha bala pariksha, which is combination of rogi pariksha and roga pariksha. Prakrutyadi nine fold examinations except vikrititaha are for aatur bala pramana, Vikrutitaha pariksha is for vyadhi bala pramana.

Charaka while explaining the pariksha by anumana pramana mentioned that bala should be assessed by vyayam Shakti.

Dashavidha aatur bala pariksha 5 -

- 1. Prakruti If the person is of vata prakruti then he is having alpa bala, if Pitta prakruti then madhyam bala and if Kapha prakruti then balavan.
- 2. Vikruti Here roga is assessed through dosha, dushya, bala, kala, prakruti, desha.
- 3. Sarata To know the bala of purusha dhatu sarata is explained. If the person is having few sarata lakshana then he is having heen bala, if the person has maximum dhatu sarata then he has madhyama bala and if the person is sarva dhatu sarata then he has uttam bala.
- 4. Samhanana The compactness is explained as well demarcated bones, well bound joints, well formed muscles and blood. If the person's compactness is good then he is balavan, if not then alpabala and if compactness is moderate

then he is madhyama bala.

- 5. *Praman* It is measured by one's own *Angulee pramana*. It is used for the measurement of various body parts.
- 6. Satmya If the person is Sarvarasa satmya then he is balavan, if the person is ekarasa satmya then he is of alpabala and if madhyam satmya then madhyama bala.
- 7. Satva Satva means mano bala. It is of three types pravar satva, madhyam satva and avara satava. Avar satva people are contra indicated for Samshodhana therapy, they cannot tolerate pain and they are predominent in tamoguna.
- 8. Aahar Shakti This is examined on the basis of abhyavaharan shakti and jaran Shakti. Strength and life depends upon Ahar Shakti.
- 9. *Vyayam Shakti* If the person can perform more physical work then he is of *pravara bala*, if moderately then *madhyama bala* and if less then *avara bala*.
- 10. Vaya -

Balyavastha - up to 30 years alpa bala.

Madhyamavastha - 30 - 60 years are uttam bala.

Jeernavastha - 60-100 years are alpa bala.

Thus from above explanation, It is very clear that multiple factors play role in deriving the "*Matra*", and it is not wise to give same dose for everyone just because of similar body weight or age group.

Now the question arises regarding the *matra* of *Panchakarma* treatments. How the *matra* 4000 years back, will be relevant today? How it can be justified that Ayurveda is *Shashwata*.

From following references and explanation it may be justified.

Matra Vichar In Panchakarma -

In Ayurvedic Samhita matra of dravya's used in Panchakarma are mentioned. Charaka has stated that dravya which bring the samyak yog by expelling vitiated doshas by avoiding ayoga and atiyoga is considered as proper dose of Shodhana for that person and it changes according to person. Chakrapani commented on this that Samshodhana matra should be decided on the basis of prakruti, bala, satmya, vyadhi avastha, dosha, satva etc. of each person.

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1.Vaman karma -

In Vamana karma matra of vamak dravya madanaphala pippali is described as antarnakhamushti ⁶. Sharir rachana of each person is different from other. That's why matra of antarnakhamushti dravya differs from person to person.

Practically *antarnakhamushti matra* is near about 3 - 5 gm. It reveals that *matra* described in ancient *samhita* can be taken as minimum and maximum limit which vary according to subjective factor like *Vaya*, *vyadhibala*, *aatur bala*, *agni* etc.

2. Basti -

Matra of dravya used in basti is described as Prasruta. Acharya Charaka, Sushruta and Vagbhata described matra of niruha basti on the basis of vaya. Acharya Charaka have given matra of niruha basti as 12 prasruta⁷. Acharya Sushruta has mentioned that ½ of niruha basti matra is of snehabasti⁸. Matra of snehabasti, anuvasan basti and matra basti are half of each other in descending order respectively ⁹.

Matra of niruha basti = 12 prasruta = 96 karsha = 960 ml.

Matra of snehabasti = 6 pala = 240 ml.

Matra of anuvasan basti = 3 pala = 120 ml.

Matra of matrabasti = 1 ½ pala = 60 ml.

Sharangadhara described matra of niruha basti as follows¹⁰.

Uttam matra – 1 ¼ prastha = 10 prasruta [80 karsha] Madhyam matra – 1 prastha = 8 prasruta [64 karsha] Heen matra – 3 kudav = 6 prasruta = [48 karsha]

But practically *Prasruta matra* of each person is different from other.

 ${\it Dalhanacharya}$ has given the definition of ${\it prasruta}$ as follows. 11

प्रसृतोऽत्र कुञ्चिताङ्गुलिः पाणिः,न तु पलद्वयमिति ॥ (गयादास टीका सु.चि. ३५/७).

Eg. If Prasruta pramana of one's hand is 40 ml.

Then $40 \times 12 = 480$ ml is the *matra* of *niruha* for that person. This can be given 2-3 times to obtain *samyak lakshana*.

Sharangadhara mentioned that heen matra of niruha basti is 3 kudav = 48 karsha = 480 ml.

Depending upon this matra of sneha basti also

changes.

Snehabasti is $\frac{1}{4}$ of niruha basti. Then it will be $480 \div 4$ = 120 ml.

Anuvasan basti is of 60 ml and

Matrabasti is of 30 ml for that person.

Acharya Charaka has stated that *hrasva matra* of *snehapana* is *matra* of *matra basti*¹².

ह्रस्वायाः स्नेहमात्राया मात्राबस्ति समो भवेत ॥ (च.सि.४/५३)

Matra of *snehapana* depends upon *agni bala* of patient hence it can be postulated that *matra* of *sneha basti* also depends on *agni bala*.

If *hrasva matra* of *snehapana* is considered as 30 ml then *matra* of *matra basti* can be considered as *hrasva matra* of *snehapana*. Hence *matra* of *anuvasan* and *sneha basti* will be considered double of *matra* of *matra basti* i.e. 60 ml and 120 ml respectively. *Niruha basti matra* is four times of *sneha basti matra*.

Then it will be like, $120 \text{ ml} \times 4 = 480 \text{ ml}$. This is the heen matra of niruha basti according to Sharangadhara. As sharir pramana and agni changes matra of niruha basti also changes.

3. Nasya karma-

Bindu is unit of measurement for the dose of dravya to be used for nasya. Bindu is defined as quantity of drava that dribbles down when the first two part of index finger are dipped into it and taken out ¹³. From this it is clear that quantity of bindu varies according to drava dravya used for nasya as well as Angulee pramana of person. Vagbhata has mentioned three different doses for Marsha nasya depending upon dosha and bala of patient.

Acharya	Uttam	Madhyam	Heen
	matra	matra	matra
Vagbhata ¹⁴	10 Bindu	8 Bindu	6 Bindu
Sharangadhar ¹⁵	8 Shaan	4 shaan	2 shaan
Sushrut ¹⁶	8 Bindu	Shukti	Panishukti

According to *Sharagadhara* 1 *Shaan* = 4 *masha*, 4 *masha* = 4gm = 4ml.

Thus, $8 \ bindu = 1 \ shaan = 4 \ ml$ and $1 \ bindu = 0.5 \ ml$. According to Ayurvedic Formulatory of India,

> 1 drop = 0.05 ml 10 drops = 0.5 ml and 1 bindu = 10 drops.

A research study has been carried out for the standardization of quantity of 1 *bindu*. It was observed that mean Bindu is 0.49 ml. Thus it was established that Sharangadhara's bindu 0.5 ml is relevant in the present period¹⁷.

5. Raktamokshana-

Prastha is parameter used for measuring quantity of blood drawn from body. Acharya Sushruta has stated that maximum matra of raktamokshana in balavan vyakti, bahudosha avastha and vayvastha purusha should be 1 prastha¹⁸. Dalhana mentioned that in case of vamana, virechan and raktamokshana 1 prastha = 13 ½ pala¹⁹ and has given Uttam matra - 1 prastha, Madhyam matra - ½ prastha and Heen matra as ardhaschatra karshaadhikshatapalan depending upon the bala, dosha of person²⁰.

Uttam matra = 1 prastha = $13 \frac{1}{2}$ pala, 1 pala = 4 karsha. Then $13 \frac{1}{2}$ pala = 54 karsha = 540 ml.

 $Madhyam\ matra = \frac{1}{2}\ prastha = 27\ karsha = 270\ ml.$

Heen matra = ardhaschatra karshaadhikshatapalani = 1/4 prastha = 125 ml.

Practically up to 120 ml of *raktamokshana* is carried out depending upon the *bala* of person. From above explanation it is clear that *matra* described in *samhita* can be taken in the range of minimum and maximum limit which may vary person to person respectively.

CONCLUSION:

Matra described in Panchakarma depends on subjective factors like dasha vidha pariksha, koshtha, sharir rachana etc.

Minimum and maximum range of *matra* can be derived from the references mentioned in *samhita* but it is not possible to fix same *matra* for all as each person varies from one another.

The parameter described as *prasruta, prastha, bindu* are already present in standard form hence there is no need of standardization as it may vary according to each person.

Thus, it can be safely claimed that if classical references are analysed properly, the standard parameter has been given and from that standard dose for a particular person can be derived based on the scientific logic.

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