

ROLE OF VIRECHANA KARMA IN THE MANAGEMENT OF THE ISCHEMIC HEART DISEASE: A CONCEPTUAL STUDY

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ABSTRACT

Ischemic Heart Disease (IHD) is a condition in where heart does not compensate myocardial oxygen supply and demand. It occurs due to regional reduction in myocardial blood flow and inadequate perfusion of O₂ in myocardium tissue. The most common cause is atherosclerotic disease. The ischemic heart disease is very dangerous and high rate of mortality in world. Old age is major risk factor for IHD. In IHD the episodic chest pain takes human life in danger. In allopathic the medication Nitroglycerin, Isosorbide Dinitrate, Isosorbide Mononitrate and Pentaerythriol Tetranitrate are used. In very serious cases, surgery coronary artery bypass graft (CABG) may require. *Virechana* purifies macro and micro channels of the body by the *shrotoshodan kriya*. *Virechana* also breaks down fat and triglyceride and it decreases chances of chest pain or IHD.

Keywords: Ischemic heart disease, *Virechana Karma*

INTRODUCTION

Ischemic means that an organ is not getting enough blood and O₂. Ischemic heart disease is a condition of recurrent chest pain or discomfort that occurs when a part of the heart does not receive enough blood. This condition occurs most often during exertion or excitement. Life threatening illness in the United States, where 13 million persons have IHD, >6 million have angina pectoris, and >7 million have sustained a myocardial infarction. Old age is major increase risk factor of IHD due to hardening and narrowing of the blood vessels. IHD or cardiovascular disease develops 7 to 10 yr later in women than men. Sedentary life style and fat rich energy diet is factor to develop Ischemic heart diseases. Life style management, low fat diet, exercise and yoga decreases risk of IHD.

Nitroglycerin, Isosorbide dinitrate, Isosorbide mononitrate, Pentaerythriol tetra nitrate are given in modern medicine. Nitroglycerine dilates blood vessels and Isosorbide nitrates treat angina attack in IHD. Ischemic heart disease is most common of the cardiovascular disease. It is also known as coronary artery disease. IHD is caused when there is decrease O₂ and blood supply in myocardial tissue that causes ischemia. When area of ischemic zone increases the severity also increases and it may develop MI and may causes death. Accumulation of high blood cholesterol specifically, serum LDL and triglyceride concentrations play a role in binging of IHD.

In IHD main symptoms are heaviness, tightness and pressure in chest, behind the breast bone, extreme

fatigue, pain radiating towards arm, shoulder, jaw and neck, heart palpitation, dizzy sensation. The group of these symptoms called angina pectoris. In *Ayurveda Acharya Shsusruta* said suppression of natural urge, Excessive intake of *Ruksha Anna, Virrudhha anna, Adhayanshan, Ajirna, Asatamaya anna* causes *dusti* of *rasa dhatu*. *Rasa dhatu dusti* causes pathology of heart (*hridhaya*) and causes *hridhya gati badha* (interpreting heart beat). *Hridhay* is *pradhana marm* in *Trimarm*. Any pathology in heart (*hridhya*) may cause mortality. *Acharya Charak* also gives same concept in *hridaya roga*. Cholesterol lowering medications, beta-blockers, nitroglycerin, and calcium channel blockers are given in this stage etc. IHD in advance condition may require surgical procedure angioplasty for removing mechanical obstruction.

PATHOPHYSIOLOGY

The normal coronary circulation is dominated and controlled by the heart's requirements for oxygen. There is (in healthy vessels) coronary vascular resistance change by the changing with oxygen demand such condition is exercise, exertion, and excitement. Other stimulants are which effects in change of resistance is Coffey, emotional stress, shock. This is the normal physiology. Old age, obesity, fatty diet intake damages normal physiology and may cause IHD. In diseased condition or when narrowing of the coronary vessels occur the vessels cannot dilate properly so there is less O₂ supply than O₂ demand by the myocardium cell. Overall it develops ischemia. Recurrent ischemia means the obstruction is not present in major level but there is narrowing of artery that causes chest pain. The episodic chest pain occurs whenever the narrowing increases due to taking of high cholesterol diet or excitement, exertion and shock which mainly occurs due to atherosclerosis. Atherosclerosis is the inflammatory disease in which artery narrows due to plaque formation. Atherosclerosis in later stage leads to hemorrhage and thrombus formation and causes condition worse. The fundamental pathophysiological defects are inadequate perfusion. There is also reduction of nutrition and inadequate removal of metabolic end product. The causes that may complicate the IHD are Type 2 Diabetes,

hypertension, dyslipidemia, and smoking, any congenital deformity, depression and genetic cause also. IHD may be associated condition with isolated hypoxemia and preserved perfusion such as cyanotic heart disease, severe anemia or advance lung disease.

LITERATURE REVIEW CORRELATION

Ischemic heart disease can be correlated with *Vataj Hridya roga*. In IHD there is main *dusti* of *meda dhatu* that causes *dhorbalaya*. Heart fails to pump blood in all over the body that causes chest pain. The *meda dhatu* are fat and adipose tissue. When vitiation of *vyan vayu* and *pran vayu* occurs that causes lack of O₂ in circulatory system & myocardial cell. There is *sanga* of *meda dhatu* with *kapha* in *dhamni* causes hardening of blood vessels *or dhamni pratichaya*. There is *mandagni* in level of *rasagni*, and *medagni* that causes *rasdhatu dusti*, *raktadusti* and *medadhatu dusti*. In *meda dhatu dusti* quantity of LDL increases, that means the bad fat (LDL) formation increases which gets stuck in arteries. Normally *meda dhatu* gives *bala*. But in *meda dhatu dusti* there is lack of energy (*glani, dorbalay*) and dyspnea at slight exertion due to decrease O₂ or *prana vayu* vitiation. *Acharya Shsusruta* and *Acharya Charak* described *Vatik hridya roga*. *Vata prokop* causes pain in heart (*Hridya shoal*). We can correlate it with *ghanata* of *raktavahini* (thrombosis or atherosclerosis of vessels). The main or beginning of pathology is *Kapha* and *meda* (atherosclerosis) stagnation in vessels causes *avarana* of *vata* and that causes *Vataprakop*. The main symptom of IHD resembles with symptoms of *Vataj Hridaya roga*.

DISCUSSION

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हृद्यमुपेत्यधमनीरनुसृत्यस्थुलाणुस्रोतोभ्यःकेवलंशरीरगतं
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च्छिन्नः| (च.क. १/५)

The *Virechana aushadi* has *ushana, tikashana, suksham, vyavayi* and *vikasi guna*. The drug due to *virya* or *suksham guna* first reaches to heart' (*hridaya*) and circulates in vein, arteries and reaches micro and macro channels, small capillaries. *Usana*

guna liquefies the *dosha* by the process of *dosha sanghat*. *Tikashana guna* breaks down *dust meda dhatu* or unwanted disease causing material. *Virechana dravya* brings *dosha, mala* and disease causing material into *koshatha* and eliminates through *adhobhag* or anal rout due to *prabhav* of *prithivi* and *jala mahabhut* and *Saraguna*. In *Virechana* processes in *sneha pana* there is no formation of bad lipid (LDL) so there is no contribution in development of atherosclerosis. *Virechana* purifies *pitta* from the *pachayamanasya* or 2nd part of duodenum. By the *Virechana* bile elimination occurs by the liver more rapidly so excess cholesterol gets excreted through the bile. Study shows *Virechana* decreases fatty acid from the other organs by increases the insulin sensitivity to insulin receptor.

SAMPRAPTI GHATAK

Dosha – Tridhosha vata pradhana

Dushya – Ras

Srotas – Rasvashrotas, Pranavaha shrotas

Adhhisthan - Hridaya,

Srotodusti prakar – Sang

Agni – Vishamagni, Mandagni

Sawabhav – Darun

Sadhayata Asadhayata – Krichhasadhayata /yapya

MANAGEMENT

In IHD management of the patient's life style and treatment are required such as complete rest (mental and physical rest), Fat rich diet control, Careful assessment of other disease (HTN, Diabetes, and hyperlipidemia) that may complicate IHD, Avoid smoking, and improve life style. Daily mild to moderate healthy routine exercise, deep breathing, yoga (meditation) can prevent IHD.

Panchakarma – Panchakarma chikitsa is a *sanshodhan chikitsa* means whole treatment of disease and *shodhan* (purification) of *dosha* or disease causing material. IHD is mainly causes by *shroto dusti* and *sang* so there is need of *shodan chikitsa*. *Panchakarma* purification of the *dosha* eliminates metabolic waist material which can cause damage to the body organ. It not only treats disease but it increases strength of the body by using *rasayana chikitsa*.

In ayurveda, *Virechana* is the main treatment for *rasajvikar, raktaja vikar* and *medajvikar*. *Virechana* also purifies all *pitta, kapha, vata dosha*. It acts very fast due to direct elimination of *dosha* without much effort. *Kapha* is *mala* of *meda* and *Virechana* is best treatment for both *vikar*. *Virechana* eliminates *dosha* fat from the micro channels (artery and veins) due to *sukshma guna* of *Virechana* drug. So *Virechana* increases the blood supply to the heart, by increasing elasticity of blood vessels. *Virechana* increases capacity of changing resistance of vessels according to myocardial O₂ supply and demand. *Virechana* normalizes *vyana vayu* and *prana vayu* vitiation by treating *kapha* and *meda dhatu dusti*.

CONCLUSION

Virechana karma plays important role in the management in ischemic heart disease by multiple effects. *Virechana* prevents the increase sequence of atherosclerosis formation and decreases LDL from the vessels by biopurification method or *shrotoshodan kriya*. *Shrotoshodan chikitsa* is mentioned in the *case of Avarana* of *vata* without causing *kapha vridhi* by the *Charak*.

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