

REVIEW ON CONTRA-INDICATED VEINS FOR VEIN PUNCTURE
(AVEDHYA SIRAS) IN AYURVEDA

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ABSTRACT

Ayurveda is the science of healthy life. In Ayurveda texts there are brief description of body & it's Anatomical structures. In that order *Acharya Sushruta* has described the *Sira* in *sharir sthana* chapter seven. *Charaka* has defined the *Sira* as “*Sarnat sira*” in *Sutra sthan* chapter thirty. *Sushruta* has mentioned four type of *Sira* –*Aruna* , *Neela*, *Sweta* , *Lohita* . These are relevant respectively with the *Dosha Vatta*, *Pitta*, *Kapha*, *Rakta*. We can regard “*neela sira*” as the veins which collect impure blood from all over the body towards the Heart. The blood flow in these *Sira* by slow velocity is called *Saran kriya*. These *Sira* are basically of two types –one of them can be punctured for curing the disease are called *Vedhya siras* , 602 in number. Another type of *Siras* are *Avedhya siras*, 98 in number, which are strictly prohibited for puncturing, if by mistake or by stupidity of the *Chikitsak* these are punctured it leads to harmful results. There are several examples of disease those are cured by that Venue-puncture or *Sira Vedhan* process like *Gradharasi*, *Vishvachi*, *Unmad* , *Apasmar* etc. In this paper *Avedhya Sira* are very well discussed W.S.R. to the anatomical structures involved in modern medical science. These are divided in three regions *Shakhagat-16*, *Kosthagat-32*, and *Urdhavjatrugat-50*.

Key words: *Sira*, *Avedhya*, *Raktamokshana*, Bloodletting, Vein puncture, Venesection.

INTRODUCTION:

*Sarnat Sira*¹ denotes back flow of blood towards the heart without any force. *Sira* can be considered as veins or *Neela sira*. These *Sira* drains impure blood all over the body in to the heart. *Sira* have many valves for guard the blood direction. According to *acharya Sushruta* the origin of *Sira* is *Nabhi*² (umbilicus). The number of Principal *Sira* is forty. *Sira* carries all the *Doshas* that's why considered as “*Sarva-vaha*”. Some *Sira* is contra- indicated for venesection called *Avedhy*. *Siravedhan* is ancient method of treatment. *Acharya Sushruta* has said it as half treatment. So today how we can consider it as a treatment

method, how we can elaborate it for that purpose this subject is choose. Our aim is to identify all the contra indicated *sira* mentioned by our text comparing with modern anatomical structures ,So that we can avoid the venesection of the contra-indicated veins.

Total number of the *sira*³ - 700 in number out of these 602 *Vedhya sira* ,98 *Avedhya sira*, in human body.

Sira vedhan- *Siravedhan* is a type of *Rakt –mokshan*, in this process deeply rooted *doshas* in impure blood are removed in order to treat the disease, in a specific disease a specific *Sira* is to be puncture. *Sushrut* are *gards Siravedhan* as “*Chikit-*

sard” means half treatment. Sushruta has compared it as Basti in Kaya chikitsa.

Avedhya siras – In these Sira, Sira Vedhan should not conduct. Due to the puncturing of them harmful results can be seen in our body. These Avedhya sira contains specific anatomical structure will be discussed one by one. Total numbers of these avedhya sira are ninety eight, out of them Sixteen(16) are in extremities, thirty two(32) in Kosta, fifty(50) in Urdhyjatrugata⁴.

Avedhya Siras in normal Regimen- In normal regimen avedhya sira are the veins by puncturing them the harm full effect can be seen due to severe blood loss. Due to puncturing the dorsal Venus plexuses there is casualty can be seen. Any venesection which is direct cause of severe blood loss or falling of blood pressure can cause of death. To avoid these miss happenings acharya has mentioned these ninety eight restricted veins for the venesection in particular places.

Avedhya Siras in contemporary thought-The Anatomical structure considered with

particular Avedhya sira⁵ –

A) In the extramities- 4 in each , total 16.

1. *Jaldhara*- one in number in each extremities; in the upper limb we can consider cephalic vein and in lower limb it can be considered as great saphenous vein. These both veins drained blood from dorsal venus arch.

2. Two *Urvi*- In the upper limbs it can be considered as brachial vessels. In lower limb it can be considered as femoral vessels.

3. One *Lohitaksh*- In upper limbs Axillary vessels in lower limbs profunda femoris and other deep branches of femoral artery.

B) Avedhya sira in kosta-

1. *Shroni Pradesh*- Two *Vitap* and two *Katiktaran*;

Two *Vitapa*- Testicular or Ovarian vessels/vessels of the gonads.

Two *katiktaran*- Gluteal Vessels

2. **Avedhya sira in parshav-** The concept of *urdhavgata* means vessels which go

upward from lateral side *Parshav sandhigata* means the vessels of laterally situated at the meeting point of abdomen and thorax.

3. **Avedhya sira of pristha-** Two *Vrihati* - Subscapular vessels.

4. **Avedhya siras in the abdomen (udar) - Medhropari Romrajimubhyato** -These can be regard as epigastric vessels.

C) Avedhya sira in the thorax (vaksh)⁶ - *Apalap, Apsthamb, Stanmul, Stanrohita*-these can be considered as Coronary vessels, Internal mammary vessels, Intercostal vessels, lateral thoracic vessels.

Urdhvjatrugata Avedhya siras-

Marma sangya- Internal and external Carotid arteries & Juglar veins.

Krikatika -Occipetal vessels *Vidhur*- Post Auricular arteries and veins

Avedhya sira in hanu-Sandhidhamanyau- Internal maxillary vessels.

Avedhya sira in tounge (jivyah)- *Rasvahe, Vagvahe*, these can be regard as Profunda linguae vessels.

Avedhya sira of nose (Nasa)- four *Aupnasikaschya*; these can be consider as Angular artery & veins

Talugat avedhya sira- *mriddavud-desh*(soft palate)

Avedhya sira of eye's (netra) - *Apangyorekek* (Outer canthus); Considered as zygomaticotemporal artery.

Avedhya sira of ear (karan) – *Sabdvahini* ;Posterier Auricular and tympanic vessels.

Avedhya sira of Nose & Eyes (netranasagatatu)- *Kesanugataschya*- Supra orbital & Termination of the frontal branch of the superficial vessels.

Aavart- Tthe frontal branch of the superficial vessels.

Sthapanyam- Nasal branch of frontal veins Avedhya sira of temporal joint (*sankhsandhigata*)-

Superficial temporal vessels

Avedhya sira of head (murdha)-*Utksheparital* branch of superficial temporal *Simant & Adhipati*- Occipital &superficial temporal

DISCUSSION:

1. In upper extremity *jaldhara* is considered as cephalic vein it is contraindicated because cephalic vein is the principal vein of the upper extremities and due to severe blood loss there can be a severity
2. In lower extremities it is considered as great saphenous vein which is also an important vein continuation with the dorsal venous plexuses. Due to venesection of this it can cause severe blood loss and lead to harm full conditions.
3. *Urvi* is considered as brachial and femoral veins those can cause of severe blood loss and again there may be seen a causality by puncturing them .
4. *Lohitaksh* is considered as axillary vein and profunda femoris vessels.in *Sushruta samhita* for this is quoted “*lohitkshayen marnam*”
5. *Vitap* and *Katiktarun* are the veins for the gonads and the gluteal region by venesection of these there may be necrosis of gonads and the gluteus muscles.
6. *Vrihiti* is regarded as the sub scapular vessel by venesection of this there may be the complication of nerve injury and lead to the paralysis and blood loss also.
7. *Aplap*, *Apsthamb*, *Stanmul*, *Stanrohit* these can be considered as Coronary vessels, Internal mammary vessels, Intercostal vessels, lateral thoracic vessels these are the vein nearer to heart, by venesection them there may be adverse effect to the heart.
8. *Marma sangya*- Internal and external Carotid arteries & Juglar veins. *Krikatika*- Occipetal vessels *Vidhur* – Post-auricular arteries and veins. These are also the vein contra indicated for venesection because of closer to the heart and related to the vital component of the body.
9. *Sandhidhamanyau*- Internal maxillary vessels by puncturing them it lead to *Manyastambh* due to the lack of blood in the Hanu.
10. *Rasvahe*, *Vagvahe* these can be regard as Profunda linguae vessels by the venesection of these vessels necrosis of tongue may be seen.

11. *Aupnasikaschya* these can be considered as Angular artery & veins there may be severe blood loss in the little's area so it is contra indicated for venesection.
12. *Apanga* (Outer canthus) considered as zygomaticotemporal artery by venesection there may be vision loss or another complication being a delicate organ.
13. *Shabdvahini* - Posterior Auricular and tympanic vessels these vessels also contraindicated for venesection because of related to the delicate organ.
14. *Kesanugataschya*- Supra orbital & Termination of the frontal branch of the superficial vessels contra indicated for venesection due to being more superficial.
15. *Aavart*- the frontal branch of the superficial vessels. *Sthapani*- nasal branch of frontal veins are also contraindicated due to situation on more sensitive part face.
16. *Utkshep*- parital branch of superficial temporal, *Simant* & *Adhipati*-Occipetal & superficial temporal are contra indicated for venesection due to avoid the poor drainage of scalp⁷.

CONCLUSION:

Avedhya sira are the Anatomical structures which are either deep vessels or the vessels which can lead the harmful effects by puncturing them⁸. So these are the perfect guidelines for physician to avoid *Vedhan* (puncturing) of these *Avedhya sira*.

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Journal of Ayurveda and Holistic Medicine | April, 2014 | Volume 2 | Issue 4 48
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Source of support:Nil

Conflict of Interest:None

Declared