



(dryness in mouth & palate – excessive thirst), Apasmara (convulsion or fits – usually these are due to compensated blood supply to brain leading to production of convulsions, Ayurved believes Apasmara to be resulting from the vitiation of Mano Buddhi Vaha Srotos, Hridaya to be the seat of the Srotos thus in Hrid Abhigata, leads to the symptoms of Apasmara as well as Unmad. It is more commonly seen if the cause of the Hrid Abhigata is thrombus or embolus) [22], Unmad (Insanity, etc), Pralap (delirium), Chit Nasha (loss of consciousness) [23].

It is required that the patient must be examined by the diagnostic measures so as the diagnosis is confirmed & management may be carried out. As best known today, ECG investigation is quite valuable, STT changes i.e. ST-segment elevation (with compatible history, it is having specificity of 91%, sensitivity of 46%), in many cases changes in ECG are not evident and may appear normal. Serum markers like CPK-MB, Troponin T & I, Myoglobin, Glycogen phosphorylase isoenzyme BB, may be done. Even the simplest ESR also provides useful information for diagnosing the condition. Other investigations include angiography, histopathology, etc.

Ayurvedic Principle for Managing Cardiac Emergency

It is usually believed that, if the patient is presented with these symptoms, he is subjected to reference to the ICCU. Here an attempt is made to look out for the Ayurvedic management for the condition. It is evident from the text the condition is narrated with almost all the details Pathogenesis, Symptoms and the management. Thus the utility is discussed here.

As discussed above the condition is primarily due to vitiation of Vayu, usually due to Avarana or obstruction so the first and foremost requirement is to correct Avarana or obstruction. It is required because, before eliminating Avarana, the condition will not be corrected, vitiation of Vayu will remain and thus may create complications [24].

The second goal management is to protect heart, as the localization of Doshas is in the heart, thus the drugs and management needed for the same may be employed [25]. Hridaya drug is the drug of choice. Moreover drugs that are increasing Ojas, Srotas cleaners and rejuvenators are of choice. It is also required to indulge Prasam (mental peace), and Gyana (knowledge) [26].

Drug Management

Drug management of the cardiac emergencies may be summarized as follows:

1. Hingu churna+Lavana+lemon juice or other sour material
2. Hingu churna+Lavana+other hridaya aushadha
3. Hingu churna+Lavana+Gokshru Panchamula
4. Hingu churna+Bilvadi Panchamula [27]
5. These four formulations may be taken collectively and can be prescribed, the drug is to be consumed at regular interval orally (muhu-muhu). As on today the combination of Hingvastak Churna (an Ayurvedic formulation) along with Dashmula Kwath may be the drug of choice.
6. Haritaki+Nagar+puskarmula+hibera+hingu
7. Puskarmula+shunthi+Shati+Kshra+lavana with sarpi
8. Decoction of puskarmula, Matulung, Palasha, Shati, Shunthi, Kshra, Vacha, Yavaani [28]

After the emergency condition other Hridaya, and Ojus increasers may be prescribed like Ashwagandha, Shatavari, Loha Bhasma, Abhakra

Bhasma, Prabhakar, Swarna Bhasma, etc. Paachan and Anulomana if included with the drugs helps in correcting Vata activity and decreases chances of reoccurrence of the condition like Shankhavati, Hingvastak Churna, Shivakshara Churna, etc.

Meditation and pacification is necessary in post MI, IHD. It may be done by doing meditation; it is evident from the studies that meditation has positive effects on general health as well as heart. It is observed that in one study that patients receiving and doing Yogic and meditative activities compensated well after CABG and lesser chances of devolving the occlusion in coronary vessels.

Virechana and Raktamoksha are the methods of cleansing. It is to be utilized after emergency i.e. MI. Basti may also be useful for cleansing the Srotos (micro channels of the body)

It is also known that heart has compensative mechanism i.e. collaterals are formed in cases of blockage in cardiac vessels. If any medicine can restore the blood supply by this means, and if the cardiac activity is restored then one can be saved from going to costly, painful and life threatening surgery may be prevented.

Here it is attempt to understand role of Ayurveda in cardiac emergency also. This article is based on theoretical evidences, which may be examined by doing experimental and clinical trials.

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