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AYURVEDIC INJECTIONS: MYTH AND REALITY

Jain Pankaj

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Jain Pankaj (Gujarat Ayurved University, Jamnagar, Gujarat, India.)

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ABSTRACT: Hetu (causes), Ling (sign and symptom), and Aushadh (medicine) are three fundamental factors of Ayurveda treatment known as Trisutra. Aushadh (medicine) included drugs, techniques, process and even counseling, but normally the word medicine is used as the meaning of Aushadh. These medicines are used from different routes for curing diseases. From the very beginning man has been thinking about giving medicine through a quick and comfortable way. The parenteral route drug administration is a result of this research. Every science needs modification as a new era so Ayurveda needs advancements to compete from other systems of medicine. In the difficulty of taking medicines through the oral route, parenteral administrations are important in the solution, so Ayurveda injections are started to be manufactured. But after a short period, the government has banned the making of Ayurvedic injections by amending the drug and cosmetic act. The main reason for this restriction may be the pressure of allopathic pharmaceutical companies and indifference to Ayurveda. The present article is an attempt to re-think this topic and to remove the myth that has arisen against Ayurveda injection.

INTRODUCTION

It is a vivid issue that can give Ayurveda medicine in the form of injections to work quickly. The presented article is just an attempt to make awareness of the history of Ayurvedic injections.

It is a reality that the injection or injecting any drug through the parental route is a way of an effective and quick treatment. Ayurveda injection can be used as a better alternative when the GIT does not respond, and needs some quick symptomatic relief.

Before 1983; some Ayurveda pharmacies were manufacturing different Ayurveda injections in India. But after the amendment to the drug and cosmetic act, the scenario changed and the manufacturing of Ayurveda injection was banned. According to pharmaceutical companies and



Ayurveda doctors, Ayurveda injections worked very well without any side effects.

ROUTES OF DRUG ADMINISTRATION

There are various routes of administration available, each of which has associated advantages and disadvantages. All the routes of drug administration need to be understood in terms of their implications for the effectiveness of the drug therapy and the patient's experience of drug treatment.

1. Enteral administration

Enteral administration is administration that involves any part of the gastrointestinal tract (enteric system). Terms are used according to different parts of gastro intestinal tract.

1. Oral -

By mouth, many drugs as tablets, capsules, or drops, Swarasa (juice) kwath (decoction), etc. Kashaya Kalpnaye.

1. Sublingual -

The sublingual mucosa offers a rich supply of blood vessels through which drugs can be absorbed. This is not a common route of administration but it offers rapid absorption into the systemic circulation. The entire oral cavity mucosa involve in absorption of medicine of Kaval and Gandush. Kaval and Gandush mainly used in the treatment of Mukha Roga (Oral cavity disease) Dant Roga (Dental problem) and Gal Roga (disease of throat) etc. .

1. Rectal -

The rectal route has considerable disadvantages in terms of patient acceptability and unpredictable drug absorption but it does offer a number of benefits. It offers a valuable means of localised drug delivery into the large bowel, for example the use of rectal steroids in the form of enemas or suppositories in the treatment of inflammatory bowel disease. Antiemetics can be administered rectally for nausea and vomiting and paracetamol can be given to treat patients with a pyrexia who are unable to swallow. various drugs used by this rout in the form of Varti (suppository), Basti (enema)

1. Gastric feeding tube:



A gastric feeding tube is typically a short-term solution (usually less than 4 weeks) for patients who have a functional gastrointestinal tract but cannot swallow safely.

1. Duodenal feeding tube:

Also known as a Nasoduodenal (ND) tube, this is a "post-pyloric" feeding method, meaning the tube bypasses the stomach entirely.

1. Gastrostomy:

A gastrostomy is a long-term feeding solution (intended for use longer than 4-6 weeks) for patients with chronic swallowing difficulties or neurological impairments.

Disadvantages of oral route administration:

Many drugs are having very bad taste and smell, such cases careful consideration should be given to the option of switching to alternative route of administration

Many times this route cannot be used in an emergency when the patient is not conscious. The oral route is nevertheless problematic because of the unpredictable nature of gastrointestinal drug absorption. For example the presence of food in the gastrointestinal tract may alter the gut pH, gastric motility and emptying time, as well as the rate and extent of drug absorption.

Due to the incompatibility of many drugs and food, do not possible to give together through the oral rout but they can give them different routes.

2. Topical administration

The topical application has clear advantages in the management of local diseases. This drug can be made available for near-direct action at the site of the disease, and because very little fraction of the drug reaches the circulation, the risk of side effects on the whole body reduced.

Some example in Ayuveda text : Neta Tarpan (eye drops), Karn Puran (ear drops), Nasya (nasal application), Lepa (drug coating), Udvertan (Dusting), Uttar Basti (Dush), Yoni Verti (Vaginal suppository) or pessaries etc.



3. Parenteral administration

Any route that is not enteral (par + enteral), called Parenteral. Parenteral drug administration can be taken literally to mean any non-oral means of drug administration, but it is generally interpreted as relating to injection directly into the body, by-passing the skin and mucous membranes. According to needle insertion approach for 4 types of parenteral administration of medication: intramuscular (I.M.), subcutaneous, intravenous (I.V.) and intradermal injection.

1. Intramuscular and subcutaneous injection:

In general the injection of drugs into the muscle or the adipose tissue beneath the skin allows a deposit or 'depot' of drug to become established that will be released gradually into the systemic circulation over a period of time. By altering the formulation of the drug, the period over which it is released can be influenced.

1. Intravenous injection

In many respects the administration of medicines via the intravenous route is an admission that the use of other routes will not allow for an intended therapeutic outcome or goal of the treatment to be met. Not only is the intravenous route inconvenient for the patient and practitioner, but it carries the greatest risk of any route of drug administration. By administering directly into the systemic circulation either by direct injection or infusion, the drug is instantaneously distributed to its sites of action.

1. Other form of Parenteral administration:

Intra-arterial - Drug insert into an artery

Intra-osseous infusion - Drug insert into the bone marrow.

Intra-cerebral - Drug insert into the brain parenchyma.

Intra-cerebroventricular- Drug insert into cerebral ventricular system.

Intra-theal - Drug insert through an injection into the spinal canal.



Advantages of parenteral administration:

Drugs that are poorly absorbed, inactive or ineffective if given orally can be given by this route. The intravenous route provides immediate onset of action. The intramuscular and subcutaneous routes can be used to achieve slow or delayed onset of action. Patient compliance problems are largely avoided.

Disadvantages of parenteral administration:

- Requires trained staff to use medicine by this route.
- Parenteral administration may be expensive.
- This method or route needs aseptic techniques.
- This route can be painful but other routes like Suchi Bharan and other treatment processes like Raktamokshan, Shalya Karma etc. also painful.
- May require supporting equipment for example, programmable infusion devices
- The correct administration of parenteral doses requires the use of appropriate injection technique. If performed incorrectly, for example using the wrong sized needle it can cause damage to nerves, muscle and vasculature and may adversely affect drug absorption.

Parenteral route theory in Ayurveda

The historical and theoretical framework of Ayurveda demonstrates a sophisticated understanding of drug delivery systems that bypass the digestive tract (*Amashaya*). While oral administration is common, the classical texts detail numerous routes that align with modern parenteral and non-oral delivery methods.

In Ayurvedic pharmacology, the effectiveness of these routes is often explained through the rapid spread of the drug's *Veerya* (potency) through the *Srotas* (channels) and *Dhamanis* (vessels) without undergoing the "Digestive" process of *Jatharagni* (central digestive fire).

Example of other routes are *Basti* and *Varti* (rectal and vaginal), *Nasya* (nasal), *Suchikabharan* (parenteral routes), *Aashchyotan* (ophthalmic), *Lapa*, *Abhyanga* (massage), etc.

1. Suchikabharan (Parenteral/Injectable)

- **Method:** Administration of potent *Rasa Aushadhi* via needle-piercing or small incisions.
- **Action:** Bypasses GIT digestion, delivering medicine directly into the **Rakta** (blood) for



near-instantaneous systemic effect.

2. Nasya (Intranasal)

- **Method:** Delivery through the nasal passage, the "doorway to the head."
- **Action:** Utilizes the olfactory mucosa to bypass the blood-brain barrier, affecting the Central Nervous System and endocrine glands.

3. Basti & Varti (Rectal & Vaginal)

- **Method:** Medicated enemas (*Basti*) or suppositories (*Varti*).
- **Action:** The highly vascularized rectal/vaginal mucosa allows rapid absorption of lipid and water-soluble active ingredients into the systemic circulation.

4. Transdermal (Lepa, Abhyanga, Upanaha)

- **Method:** Application of medicated oils or pastes to the skin.
- **Action:** Facilitated by Bhrajaka Pitta, lipophilic formulations penetrate skin layers to reach deeper tissues like muscle (*Mamsa*) and bone (*Asthi*).

5. Ophthalmic (Aashchyotan & Tarpana)

- **Method:** Medicated eye drops or pooling of ghee.
- **Action:** Powered by Alochaka Pitta, drugs permeate the cornea and conjunctiva to directly access nerves and the eye's vascular system.

So, we say easily "the Ayurveda drugs are also administrated through other than oral route".

Name of some Ayurvedic injection and their making companies

List of some Ayurvedic injection made by Bundelkhand Ayurvedic Unani Pharmastical works, Jawahar Chowk, Jhansi, U.P., India. (published April 1978)

1. Anaar- Use in enteric worm (Enteric Nematodes) due to constipation, fever, Kanth Daha and constipation.
2. Adhrakh- loss of appetite, Anorexia, chill
3. Agnimantha- Yakrua Vikar, Shotha, (Sandhi Shoth).
4. Aparajeeta- inflammation, burning sensation, and Jvara.
5. Arjuna - cardiac problem
6. Ashoka- Pradar, Rakta Pradar, Rajasravadhikya, bleeding after delivery, Garbhashaya Shool.



7. Ajavayan - diseases of digestive system, convulsion, Prasavottar Shul, anidra.
8. Arkmool- Shwas, pleeha, Upadansh
9. Anantmool- It was used as a diuretic in kidney diseases, Updansh, Sukha Roga.
10. Abhark - physical mental weakness, Mandagni, Jirna Jvar, Kasa-swas, Pandu, Amlpitta, Sangrahani.
11. Ambar- Shigrapatan,
12. Indryava- muscular pain Visham Jvara.
13. Indrayan- Jalodar, Andakosh Vrudhi, delivery pain, Yoni shul.
14. Usava- blood purifier
15. Erand - Pleehodar, Yakrutodar, Jalodar, Aamvat, Kamala, Kativat, aakshep and shool.
16. Kanchnar- Galganda, Kanthmala, burning sensation, Jvar
17. Katseriya- simple Jvara, Kasa
18. Kak Jangha- Sukha Roga
19. Kanak Sundar- Atisaar, Jvaratar, Sangrahani
20. Kuchala- Digestive disease
21. Kalyansundar - Pratishyaya, Nimoniya, vomiting, heart tonic
22. Kukur Bhangara- syncope, Dhatushtankar
23. Keshar- Dhtu kshinata, neurasthenia
24. Kalajaar- chronic Visham Jvara, Kalajar
25. Kasturi -pneumonia, Sannipat
26. Kasya Bhasham - Rakta Vikar, Netra Vikar, Udar Vikar, Visham Jvara
27. Kaphi-Kapha Shwasa, Kasa, Nadi Dorbalya, opium toxicity
28. Kantkari-Pratishaya, Jvara, Kasa, Shwas, Kasa, Raktapitta, Mutra Krucha
29. Sp. Cholera- cholera
30. Khadira- Skin diseases, Rakta Vikar,
31. Gokharu - Mutrakruch, Stone, kidney diseases
32. Gandhak- skin disease
33. Guduchi - diuretic, Ringworm, Prameha
34. Gangadhar Rasa-Atisaar, Aamaatisaar, jvaratar
35. Garbhpal Rasa- useful for safe pregnancy.
36. Ghrutkumari - Udar Vikar, irregular menstrual cycle.
37. Chobchini- Sujak, Bhagandar, skin disease, Unmaad, Apasmaar
38. Chirayata-Jvara, Daha, Trushana
39. Chndrodaya- Use in emergency
40. Chalmogara- skin disease
41. Jamikanda- constipation, fistula
42. Jaymangal Rasa- Jirna Jvara
43. Javahar Mohara -heart tonic
44. Tamra Bhasham- Udar Roga, Yakruta, Pleeha Shoola Roga, Parinaam Shool, Amlapitta,



- Kapha, Shotha, Mandagni, and Kushtha
45. Tambaku- Pain killer and Vishnashak, Danta Sholadi Danta Vikar
 46. Talpatra-Tandra, obesity
 47. Talsindur- Pama, Vivarchi,
 48. Triphala - Mandagni, Agirna, Gastric troubles and Netra Roga, Shiro Roga
 49. Tal Sindur -Pama, Vicharchika, Vatrakta, skin diseases
 50. Tamra Sindur- Kasa, Shwas, Pleeha Vrudhi
 51. Dhashmool- Sutika Jvar, Sangrahani, Mandagni, Udar Roga, Kasa,
 52. Duralabha- Atisar, Shwas, Bahumutrata,
 53. Dugda- protein deficiency, viverchika
 54. Durva (swet)- syncope, nervine tonic
 55. Dhatura - Kasa, Shwas.
 56. Nirgundhi-Mutrakrucha, Swpan Dosha, headache, skin disease.
 57. Nilika- use in nervous system, convulsion, pain
 58. Nimbu- blood purifier, skin disease.
 59. Nag Bhasm- Dhatu Kshinata, Swapndosh, Prameha, Vivrchika, leprosy
 60. Nag Sindoor-Prameha, Pradar, Dhatu Kshinata, infertility
 61. Purnava-Pandu, Kamala, Shoth,Swash
 62. Pipal- Pratishyaya, Jvar, Kasa, Atisar, Raktatar, disease of Dantobhed in children
 63. Pashan Bheda- obstruction of urine, Asmary(Stone), Vrikkasmari(kidney Stone),
Mutraghat, urethra pain
 64. Panchkol- Mandagni, Agirna, Gulma, Pleeha Vrudhi, Shool, Atisar, Amatar, Grahani.
 65. Praval Bhasm- Pittaja Vikara, Jirna Jvara, Kasa, Raktapitta, Prameha, Pandu, Pradar
 66. Patol- Vamak, Rechak, Kruminashak, Kapha Nissarak, indigestion, Mandagni
 67. Pittapapada- Kasa, Shwas Daha, Trushana,
 68. Palash- Madhumeha, Prameha, Shukrakshaya,
 69. Pravalpanchamrita- Udar Roga, Ampitta, Gulma, Yakruta-Pleeha Vrudhi, Asmari, Ajirna,
 70. Sp. Paralisan- blood purifier, Pakshaghat, Ekangvat, paralysis, Vat Vikar.
 71. Phalsarkara- anemia, jaundice, Kamala, general weakness.
 72. Vasa- Pratishyaya, Jvara, Kasa, Shwas, whopping cough
 73. Vantulsi- Hikka, Jvara, Asmari, Visham Jvar
 74. Bhramhi- Nervine tonic, Unmad, Apsmaar
 75. Vangobhi- Mutra Daha, Vrukka Shool, Vrikkasmari.
 76. Binola- use after delivery for uterus contractor, bleeding, antidote for Dhatura Vish
 77. Betal Rasa- Sannipat, Vat Jvara, Shwas, shleshmic Jvara, Shoth, Sanyaas
 78. Vang Bhasm- Prameha, impotency, Pandu, Shwas, Krumi Roga
 79. Basnant Kusmakar- use as a Rasayan, Sukrameha, Madhumeha, all 20 types of Prameha.
 80. Vay Vidang- Krumi, Sukha Roga
 81. Bel - Atisar, Aamatar, Jvaratar



82. Varun - Kanthamala Shoth, Rakta Vikara.
83. Bavachi- Switra
84. Vatvinashak- Joint pain, Vata Vyadhi
85. Bavasir- useful in piles
86. Vishsaar- skin disease
87. Bhumyamlki- skin diseases
88. Bhang- use for Stambhan.
89. Makardvaja- impotency
90. Majitha- Garbhashaya Shotha, Rakta Vikar
91. Mallsindur - useful in Sannipat, Updansh,
92. Mrugank Rasa- Kshaya, Kasa, Jirna Jvara
93. Maalkangni-antidote opium, Snayu Vikar
94. Muli -Pachak, Kabjanashak, useful in Piles
95. Mrugshrung bhashm- Kasa, Parsva Shool, Pratisyaya, pneumonia, Jvar, Influenza.
96. Mukta Pisthi- Tuberculosis, Kasa, Typhoid, tonic for heart and brain

List of some Ayurvedic Injection made by Pratap pharma privet limited, 167, Rajpur road, Deharadoon U.P., India. 248001 before 1983

1. Pratap Arjuna - useful for cardiac problems, heart tonic, trauma, syncope, bone fracture, useful in ascites due to diuretic properties.
2. Pratap Ashoka - useful for Pradar and irregular menstrual, Rakta Viakr, Gulma, Udar Roga
3. Adson- Useful in Vatik pain, Gradhasi (sciatica), Udar shool (Abdomial pain), Vata Gulma, Aam Vat, Mandagni etc. Vat and Kapha Roga.
4. Dashmool- Sutika Jvara, useful in post delivery problems, AamVat, digestive power improver, bronchodilator
5. Dugdha- Useful in Calcium deficiency, Skin diseases, Pama, Kandu, Seetpitta. It also useful in Anda Vrudhi and Punravartak Jvar
6. Ghrith Kumari- Visham Jvara, Sutika Jvar, Yakrut vrudhi and Pleeha Vrudhi, Kasa , Pratisyaya, Kapha Vrudhi, Aamavat, Vatarakta, Garbhashaya Shotha, Dysmenorrhea. (Don't use in prregnancy.
7. Gonora- Ushana Vata, Mutra Daha, Mutra Krucha
8. Gurmar- Madhumeha, Prameha, Basti Shotha, Bahumutrata, Trusha
9. Guruchi- chronic Visham Jvara, Kamala, Back pain, headache, Angasada, Pitta Vaman,
10. Gandha Karpur - Vishuchika, it also useful in heart weakness and Grudhasi.
11. Gold with Munga- Pandu, Mashtiska Durbalata, Snayu Durbalata, Gand Vrudhi, Aamavat, Vatarakta, Yakruta Vikar.



12. Kanaka Kalpa- Swas Roga, excessive sweating and excessive milk production.
13. Kutja - Antra Vikara, Grahani, Udar shool, Malashaya Shool, Arsha (Rakta Shravi)
14. Kushthar - Switra, Pama, Kandu and other skin diseases.
15. Mrugnabhi- Hridayasada, Manda Naadi, pneumonia like conditions, Sannipat Jvara.
16. Munga- Useful in Calcium deficiency, Gandmala, Shoth in kids, Hridaya Dorbalya, Kshaya, irregular secretions of glands.
17. Pamar - Pama, Kandu, Khujali and Ring worm like other skin diseases.
18. Praswa - Use for easy delivery. It also stop false labor and menstrual irregularity.
19. Pradarari - Pradar, irregular menstrual cycle.
20. Shulhar - Useful for intestine's worms, Udar Shul, Aafara, Shotha. It work as a tonic for Pranavaha Shrotas.
21. Shanta - Unmad, hypertension.
22. Sudha- Shoth, Yakruta Vikar and Pleeha Vikar. It works in Pleurisy and Jalodhar (Ascites) due to diuretic properties.
23. Shakti - work in loss of libido, Vajikaraka.
24. Updandsh-har - Upadasnh, skin disease
25. Vishmant - acute and chronic Visham Jvara.
26. Khatik - Pradar, Raktapitta, and internal bleedings.
27. Praval - Pradar, irregular menstrual cycle, Pradar due to Calcium deficiency
28. Rason - Nadi shool, Gradhasi, Sandhi Shoth, Aamavat,

All the above-mentioned medicines could be very promising for patients after research, but due to prejudice, any of the Ayurveda agencies on these drugs would have rarely researched.

DISCUSSION

It is not advisable to restrict Ayurvedic injections only on the basis that in the texts of Ayurveda, the process of injection is not explicitly described. It has always been a matter of controversy that there is no description of the injection method in Ayurvedic texts. Because the topics described in Ayurveda texts are written in very mysterious language, require of professional Ayurveda scholars to understand the topics mentioned in Ayurveda texts.

It is also natural to raise this question whether Ayurveda has no right to develop?

Some people who want to prove this restriction through the Honorable Supreme Court's decisions, they forget about their other decisions, where the Honorable Supreme Court also says that Ayurveda has the right to adopt modern resources.



Then the restriction on Ayurvedic injection is beyond understanding. Despite this, it is a positive fact that in the form of answers to health problems the global population expects Ayurveda.

At the same time, Ayurveda is getting international recognition based on its overall view of social and personal life as well as for accurate personal medical approach to treatment.

It is a bitter truth that India's knowledge possessions are recognized by other names but not by Indian names, Ayurveda drugs are used by allopathic physicians in the name of herbal medicine. These allopathic doctors use Ayurveda drugs, but they do not accept the truth.

Modern biological scientists are making new projects to verify Ayurvedic principles. Such modifications and experiments will help to overcome the opponents of Ayurveda who are trying to prove Ayurveda a world of unscientific, empirical and irrational system. But if the Ayurvedic physician does not get the opportunity to do research in its own system, then it will take a different conclusion of these modifications, citing the inability of the Ayurvedic system against Ayurvedic medicine. These people will submit their own claims on research done on Ayurvedic medicines. So need to improve this science under supervision of ayurveda scientists.

CONCLUSION

It is time to change old mindset and strategies about Ayurveda injections. India needs a clear policy for the development of Ayurveda, which can maximize the universal acceptance of Ayurvedic medicines. In this direction, developing the injection of Ayurveda will be a pragmatic step.

In today's era efforts are needed to establish and validate pharmaco-epidemiological evidence concerning the safety and practice of Ayurvedic medicines.

Need to understand the drug and cosmetic act 1940 and its amendments very clearly. According to many legal advisors, this act not prohibited the use of ayurvedic injection in research. So related agencies should clarify these amendments of drug & cosmetic act 1940 and also mention reason for prohibited the use of Ayurvedic injection in research.



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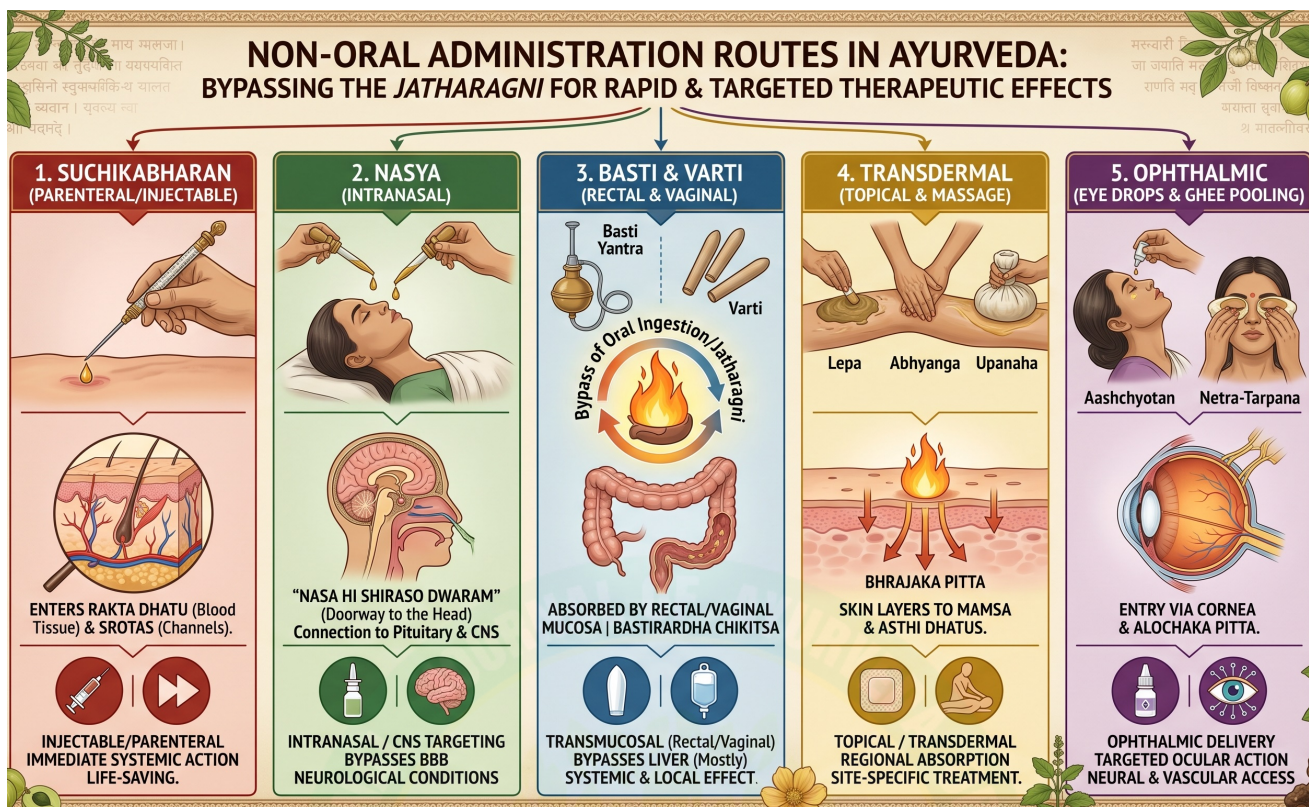


Figure 1: Non-oral routes according Ayurveda

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