

Advanced principles of Ayurveda: A concerned call from a stifled sneeze

Dear Editor,

Recently, for the first time, the whole world witnessed a case report of a 30-year-old male who was initially diagnosed with surgical emphysema of the neck and later with tracheal tear at the level between 3rd and 4th vertebrae along with the pneumomediastinum as a result of an episode of his stifled sneezes by pinching his nose and closing his mouth when he was driving his car with the seat belt on. As reported, he presented to the emergency department with severe neck pain and had no complaints of dyspnea, dysphonia, or dysphagia. When he was examined, his neck was bilaterally swollen, crepitus was present on palpation, and the range of movement of his neck was reduced. The need of immediate surgical interventions was ruled out. The patient was treated with symptomatic medical management on inpatient basis and was discharged later with advices. The cause for the perforation was provisionally reported due to a rapid buildup of air pressure in the trachea due to sneezing with a pinched nose and closed mouth.^[1]

Ayurveda, a 2000 year old Indian system of medicine, has a documented theory of similar clinical description resembling the above case report.

THEORY OF ADHARANEYYA VEGA (~NONSUPPRESSIBLE URGES) IN AYURVEDA

Vega (~natural urges) has the key role in maintaining the normal functioning of the human body. They maintain the equilibrium of body, mind, and soul through homeostatic mechanism. These are the natural urges of the body, which should not be suppressed in the view of its clinical importance. These are mainly controlled by *Vata dosha* (~*dosha* responsible for movement and cognition) with the support of other two *Pitta* and *Kapha dosha*.^[2] *Dharana* (~suppression) of these *Vega* leads to pathogenesis of *Vata dosha*, leading to abnormality in the functions of the body. *Adharaneeya vega* (~nonsuppressible urges) is a unique concept delineated exclusively in Ayurveda. *Adharaneeya vega* contributes to etiopathogenesis of the diseases in human body. Both *Adharaneeya vega* and *Dharaneeyavega* (~suppressible urges) are considered as essential for the promotion of health and maintenance

of homeostasis. The first is associated with physical or metabolism of the body and the latter is related to psychic or the limbic system of body.^[2]

THEORY OF KSHAVATHU (~SNEEZING) AS ADHARANEYYA VEGA IN AYURVEDA

Table 1 states the references of *Kshavathu* as *Adharaneeya vega* across Ayurveda literature. To achieve healthy longevity, one should not suppress the natural *Vega* that arises in the human body, which may move either upward or downward directions.^[3] *Kshavathu* (~sneezing) is considered one such nonsuppressible urges. *Kshavathu* has a key role in protecting our body through the protective reflux. It forcefully expels out the body by-products through the nose and mouth. Physiologically, it is due to upward movement of *Apanavata* (~a subtype of *Vatadosha*)^[2] and pathologically its suppression leads to *Udavarta* (~upward movement of *Vayu* with retention of stool and urine) group of serious disorders of respiratory system.^[3] The Ayurveda classical texts Charaka Samhita, Astanga Hridaya, Bhavaprakasha, Bhela Samhita quotes the opinion that suppression of *Kshavathu* leads to *Manyastambha* (~stiffness of neck), *Shirashoola* (~headache), *Ardita* (~facial paralysis), *Ardhavabhedaka* (~hemicranial headache) and weakness of *Jnanendriya* (~sense organs).^[4]

Acharya Sushruta of Sushruta Samhita states that the diseases of *Shira* (~head), *Akshi* (~eyes), *Nasa* (~nasal cavity), *Shravana* (~ears), signs of fullness at *Kanta* (~throat), *Mukha* (~mouth), *Toda* (~pricking) type of pain with a small sound in *Kantha* and obstruction in respiration arouses when *Kshavathu* is suppressed.^[5]

POSSIBLE PERSPECTIVE

Ayurveda is an ancient science of Indian medicine, originated more than 2000 years ago which is still practiced. Currently, it is often referred as complementary or alternative medicine system or pseudoscientific.^[6] Ayurveda has numerous theories and principles regarding preventive and curative health concerns of human beings. Due to the lack of acceptance of Ayurveda globally, many modern medical system and its newer researches are gaining importance. Although it can be said that all those researches may have not gone through the ancient Ayurveda theories or principles, it

Table 1: Classical references of Kshavathu as Adharaneeya vega

Classical texts	References	
	Part	Chapter
Charaka Samhita	Sutrasthana	7
Sushruta Samhita	Uttarasthana	22
	Uttarasthana	55
Astanga Hridaya	Sutrasthana	4
Bhavaprakasha	Madhyama – Uttarakhanda	31
Bhela Samhita	Sutrasthana	6

is a fact that if we look into those deeper, Ayurveda has quoted it 1000 years back itself. For the expediency of proving this statement and commenting, there is a need for observation at the above-mentioned case report.

Firstly, in the present case the prime triggering factor was “a stifled sneeze by pinching the nose by closing the mouth”. This factor can be correlated exclusively as ‘suppression or withholding’ of his natural urge of sneeze. This can be directed toward the references of *Adharaneeya vega* of *Kshavathu* and the principles of pathogenesis of *Udavarta* pathway as per Ayurveda. The pathway contains localization of *Vata dosha*, manifesting the *Marma* (~vital points), at nasopharynx region, leading to a disease condition.^[7] This theory of Acharya Sushruta can be considered as similar to the pathogenesis of above case’s description i.e., ‘A rapid buildup of air pressure in the trachea causing its tear due to sneezing with a pinched nose and closed mouth’. *Vata dosha* is responsible for all the major activities of the human body like movement at all the levels of the physiology, excretion of waste, cognition, cell division, its signaling, and regulating the other two *Pitta* and *Kapha dosha*.^[8] The rapid buildup of air is to be considered as abnormal operation of *Vatadosha* causing tear of the trachea, pneumomediastinum, and surgical emphysema at the respective site. Second, the complaints of severe neck pain without dyspnea, dysphonia, or dysphagia and clinical presentation of crepitus and bilaterally swollen neck with its reduced range of movements can be considered with the description of similar *Lakshana* (~signs and symptoms) of *Toda*, sound and fullness in *Kantha* with *Manyastambha*, respectively. Based on these similarities, it can be inferred that clinical observations and interpretations resembling the above mentioned case were documented around two millennia ago.

THE CONCERN

The modern medical system is globally accepted due to its approach with the valid research trends and standard protocols that Ayurveda lacks. In order to make Ayurveda globally accepted, an upgrading of existing theories of Ayurveda is currently essential. With the base of the current research trends and standard

protocols, the need of recognition of Ayurveda can be fulfilled. Two years’ back, a similar clinical model related to an Ayurveda theory had gained a prestigious award, leaving behind that theory of Ayurveda astonished and deserted.^[9] We the fraternity of Ayurveda has to work on the concealed theories of Ayurveda and make them globally accepted. There is a need for interaction, standardization, and its documentation of Ayurveda with a well-built research base. This clears the misconceptions about the theories of Ayurveda and aids in establishing their validation and efficacy, making Ayurveda globally accepted. If these developments are pursued without bias, there is a chance of acceptance globally by proving that the Ayurveda and its theories are neither alternative nor complementary and not at all a pseudoscientific. If these are not monitored, definitely the concepts of Ayurveda will be disregarded and will be accounted with someone else’s credit.

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