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Panchakarma: Cleaning and Rejuvenation Therapy for Curing the Diseases

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Ayurveda's origin is critical to the development of its medical assumption. India has a rich scientific history, Ayurveda in particular dates back 3500 to 5000 years ago. It is the most ancient form of medicine in India and traces back to Lord Brahma (the Hindu God of Creation), according to Hindu mythology. Panchakarma is the cornerstone to Ayurvedic management of disease. Panchakarma is the process, which gets to the root cause of the problem and re-establishes the essential balance of 'Tridosha' (three doshas: Vata, Pitta and Kapha) in body. Panchakarma is not only good for alleviating disease but is also a useful tool in maintaining excellent health. Ayurveda advises undergoing Panchakarma at the seasonal changes in order to clean the body and improve the digestion and metabolic processes. Panchakarma is the cornerstone to Ayurvedic management of disease. Panchakarma is the process, which gets to the root cause of the problem and re-establishes the essential balance of 'Tridosha' (three doshas: Vata, Pitta and Kapha) in body. Panchakarma is not only good for alleviating disease but is also a useful tool in maintaining excellent health. Ayurveda advises undergoing Panchakarma at the seasonal changes in order to clean the body and improve the digestion and metabolic processes.

Keyword: Panchakarma, Ayurveda, Rejuvenation Therapy

1. Introduction

Ayurveda's origin is critical to the development of its medical assumption. India has a rich scientific history, Ayurveda in particular dates back 3500 to 5000 years ago. It is the most ancient form of medicine in India and traces back to Lord Brahma (the Hindu God of Creation), according to Hindu mythology. Charaka Samhita, written in the first century AD, is the oldest text that exists in Ayurveda. Additionally, there are two other main texts that are studied today Susruta Samhita, and Ashtanga Hridayam. The latter is a compilation of the Charaka and Susruta Samhita, which have different approaches to Ayurvedic treatment.

Charaka Samhita is known as the school of physicians. It compares more of the

physiological, anatomical, and pathogenic interpretations and treatment for disease. Similar to a General Practitioner in allopathic medicine, Charaka Samhita is the text associated with noninvasive treatment. Alternatively, Susruta Samhita is known as the school of surgeons. This text contains details of surgical techniques for amputations, fractures, wounds, etc. It also discusses the importance of specific points on the body known as marma. When injured, these points can be severely damaging to the body, even causing immediate death. These texts were very detailed in their methods of treatment and are thus still applicable today. The importance of a physician understands of the patient's mind, body, and soul when interpreting the cause of a disease is emphasized in Charaka Samhita. It claims that this knowledge is more important than

being able to identify the disease using a specific nomenclature, as done in modern medicine.

1.1 The Eight Branches of Ayurveda

1. Kaya Chikitsa (General medicine)
2. Shalya Tantra (Surgery)
3. Shalakya Tantra (Diseases of Eye, Ear, Nose & Throat)
4. Kaumarbhritya (Children diseases, obstetrics and Gynecology)
5. Agada Tantra (Toxicology)
6. Bhuta Vidya (Psychiatry)
7. Rasayana (Rejuvenation), and
8. Vajikarana (Aphrodisiac/sexology)

It is when one's Agni deviates from its normalcy in samagni that disease is formed. In Ayurveda, disease is created when Agni cannot effectively digest food. The lack of transformation of food into the bhutas (elements) or dhatus (tissues) causes undigested food to accumulate in the system. Ama is the term referring to undigested food that remains in the body. When the concentration of undigested food increases without being converted to the appropriate form to be used by the body, its accumulation results in disease; disease is a result of ama gathering in the body. The modern eye may view this explanation as too simple to explain the complexities of disease. However, ama is an extremely inclusive term which is the basis of vitiations in the doshas, dhatus, agni, etc. Each of these aspects of the body is interdependent; a change in one will affect another. Because food is medicine, changes in the body eventually trace back to food, and how, if at all, it is processed.

1.2 Panchakarma

Panchakarma is the cornerstone to Ayurvedic management of disease. Panchakarma is the process, which gets to the root cause of the problem and re-establishes the essential balance of 'Tridosha' (three doshas: Vata, Pitta and Kapha) in body. Panchakarma is not only good for alleviating disease but is also a useful tool in maintaining excellent health. Ayurveda advises undergoing Panchakarma at the seasonal changes in order to clean the body and improve the digestion and metabolic processes.

Panchakarma is a Sanskrit word that means "five act ions" or "five treatments". This science of purifying the body is an ancient branch of Ayurveda. The Treatment in Ayurveda consists of two main types.

One is Shaman Chikitsa, used to Subdues the vitiated Doshas, which may cause any ailments. It is administered by using various medicinal herbomineral preparations.

However, if the Doshas are vitiated beyond a particular level, they give rise to various toxins, which have a tendency to be accumulated in the minute channels. These are beyond the level of pacification and hence need to be eliminating from the body. In such cases, the second type of treatment, which is Shodhan Chikitsa or cleansing therapy, is indicated.

Since it consists of the five types of main therapies, it is known as the Panchakarma.

Panchakarma has been given a special place in all ancient Ayurvedic texts. Acharya Charak, the author of the most important ancient text on internal medicine, has described a wide use of Panchakarma therapy in almost all major diseases. Two separate sections, Kalpa Sthanam, and Siddhi Sthanam in Charak Samhita describe in details special decoct ions and other preparations used for Panchakarma therapy.

Panchakarma includes three parts namely:

Poorva Karma (Preparatory Methods), which includes:

- Paachana (Digest ion)
- Snehana (Internal and external oleation)
- Swedana (Fomentation)

Pradhan Karma (Main methods), which includes:

- Vamana (Induced vomiting)
- Virechana (Induced purgation)
- Anuvasana (Medicated oil enema)
- Asthapana (Medicated decoction enema)

Nasya (Drug administration through nose)

1.3 Research Methodology

The research methodology is based on literature review, and the data collected from the Panchakarma clinics/Spa. By the literature

reviewing the basic methodology about the Ayurveda and the literature required for the Panchakarma therapy and procedures involved in it are studied. The aim in research methodology is to find out the effectiveness of the Panchakarma therapy and the various procedures involved in it.

2. Discussion

One of the fundamental concepts of Ayurvedic management of diseases is to eliminate toxic materials (vitiated dosas) from the body in order to cure a disease.

2.1 Panchakarma Therapy

(PKT) is designed to eliminate the toxic materials. It is postulated that the toxic materials of the body need to be eliminated radically before a palliative therapy is given. The palliative therapy in the form of drugs and diets may not be effective unless the body channels are properly cleansed and toxic materials are eliminated. PKT is believed to purify or cleanse all the body tissues and to bring about the harmony of neurohumors (tridosas) (i.e. vata, pitta, kapha, and manasa dosas (i.e. satva, raja, and tama) and to obtain long-lasting beneficial effects. PKT is not merely a therapeutic regimen, but it may be considered a management tool when used at certain tissue and body parts. It promotes and preserves the individual's normal health.

PKT is an important component of Ayurvedic management of diseases. It is the comprehensive method of internal purification of the body through emesis (vaman karma), purgation (virechana karma), enema (vasti karma), errhines (nasya karma), and bloodletting (raktamokshana). This chapter will review the ancient classical concepts, traditional practices, and recent advances made in this important field with proper evaluation and rational assessment. Evidence obtained at our hospitals and at other research institutes in treating a variety of diseases with PKT is discussed along with its possible use as an adjunct to allopathic therapies.

PKT is indicated in arthritis, paralysis, neuromuscular diseases and in respiratory, gastrointestinal, ENT, and several blood-related disorders with great benefits. PKT is

contraindicated in certain conditions like acute fevers, in various debilitating diseases, and in certain tumors and cancers of different organs; it is also contraindicated in children, the elderly, and pregnant women. PKT is indicated for both the healthy and diseased. The five elimination procedures are usually advised in the sequence of emesis, purgation, enema, errhines, and bloodletting, although it is not mandatory. Either one or all five procedures are advised as per the need and condition of the person undergoing PKT.

Based on the health of the individual and stage and type of the disease, only one of the five procedures may be done without following a sequence. However, proper preparation and follow-up treatment are implemented for even one cleansing procedure.

The classical PKT is done in three stages:

1. Preparatory procedures (PREP) (purvakarma) — these procedures are done to prepare the body to undergo a proper and thorough cleansing. They involve applying as well as ingesting oils and fats, sweating, and also advising which herbs to use to improve the digestion and metabolism in tissues.
2. Main cleansing procedures (MCP) (pradhana karma)- These procedures consist of five purification procedures especially designed to eliminate toxic materials from the imbalanced dosas of the body. They are emesis, purgation, enema, errhines, and bloodletting.
3. Post procedures (pashchatya karma) - These procedures consist mainly of recuperative measures in the form of diet, lifestyle changes, and rejuvenating herbs.

2.2 Panchakarma Therapy Procedures

2.2.1 Preparatory Procedures

PREP is used to facilitate PKT effectiveness. They include

- (a) Digestive juice stimulants (dipana)
- (b) Digestant (pachana)
- (c) Oleation (snehana) and
- (d) Sudation (swedana)

All the procedures are discussed below:

a. Digestive Juice Stimulants (Dipana) and Digestants (Pacana)

Digestive juice stimulants are agents that directly stimulate biofire (Agni) and allow undigested food to be processed without stimulating digestive enzymes. Administration of digestants and digestive juice stimulants is an essential prerequisite of PKT; the objective is to improve the digestion both at the cellular and gastrointestinal tract level.

Normal digestion is achieved with the administration of medicated dehydrated butter (ghee) mixed with digestants and digestive juice stimulants. Dehydrated butter is a potent biofire stimulant agent. Commonly used digestants and digestive juice stimulants are:

- Panchakoladi churna
- Hingwashtak churna
- Lavana bhaskara churna
- Chitrakadi vati
- Arka vati
- Agnitundi vati
- Shunthi ghrita
- Pippalyadi ghrita
- Dashmoolarishta

Any preparation is usually administered for 3 to 7 days, depending on the age, disease, and condition of the patient. Signs and symptoms of satisfactory stimulation of digestion are (1) feeling of lightness in the body, (2) improved appetite, (3) feeling of thirst, and (4) well-formed stool without any mucus.

b. Oleation Therapy (Snehana Karma)

Any procedure or substance that increases the availability of lubricants, which produce lubrication in the body externally or internally, is called oleation therapy (OT). It is often used as an independent therapeutic procedure for disorders of vata as well as PREP for PKT. It is essential to administer OT to an individual before subjecting him or her to MCP to mobilize the toxic materials from their respective sites.

OT may be given externally by applying the oily materials on the skin or internally via ingestion,

enema, or nasal route. External application consists of massage, application as a thin layer on the skin, application on the scalp, as ear drops, holding the oily material in the mouth for a few minutes, applying on the feet, etc.

2.2.2 Classification of Oleating Drugs and Agents

OT materials may be of animal or vegetable origin. Examples of animal origin materials include dehydrated butter, animal fat, bone marrow, fish oil, and milk. Vegetable origin materials include sesame oil and mustard oil.

OT is indicated prior to sudation as PREP, dry skin, vata dominance, excessive loss of blood, and eye disorders. It is contraindicated in patients with aggravated kapha and all conditions where PKT is contraindicated. Internally medicated ghee is given for 3 to 7 days at the break of dawn (6 to 7 AM) based on the person's constitution and digestive power (Agni and kostha).

List of Commonly Used Digestants and Digestive Stimulant Drugs

- Panchakoladi churna
- Hingwashtak churna
- Lavana bhaskara churna
- Chitrakadi vati
- Arka vati
- Agnitundi vati
- Shunthi ghrita
- Pippalyadi ghrita
- Dashmoolarishta
- Drakshasava

c. Sudation and Fomentation Therapy (Swedana Karma)

The therapeutic production and induction of sweat by a variety of methods is termed sudation therapy (ST). It relieves stiffness, heaviness, and coldness of the body and induces sweating. It is administered to liquefy the oleate toxic materials (brought about by OT), which are spread throughout the body, and direct them to the alimentary canal for elimination by any one of the four cleansing procedures.

ST is administered after OT and it precedes emesis therapy in the sequence of PKT. Besides

being the principal PREP of PKT, ST may also be a specific treatment for a number of disorders, especially in vata-dominant diseases where it may be a main treatment.

2.3 Main Cleansing Procedures (Pradhana Karma)

2.3.1 Biopurificatory Therapeutic Emesis - Emesis Therapy (Vamana Karma)

Emesis therapy (ET) is a process by which the contents of the stomach including kapha and pitta dosas are expelled out of body through the mouth. It is one of the MCPs that eliminates toxic materials from upper parts of the body.

Herbs used in PKT as emetics are:

Medicinal Plant	Botanical Name
Madanaphala	<i>Randia dumetorum</i>
Madhuka	Sapotaceae
Kututumbi	<i>Lagenaria vulgaris</i>
Nimba	<i>Azadirachta indica</i> A.
Bimbi	<i>Coccinia grandis</i> (L.) Voigt
Visala	<i>Citrullus colocynthis</i> Schrad
Trapusa	<i>Cucumis sativus</i> Linn.
Kutaja	<i>Holarrhena antidysenterica</i> Linn.
Murva	<i>Celosia cristata</i> Linn.
Devdali	<i>Luffa echinata</i>
Vidanga	<i>Embelia ribes</i> Burm
Viduli	<i>Salix caprea</i> Linn.
Dahana	<i>Toddalia asiatica</i> Linn.
Citra	<i>Ipomea remiformis</i> Chois
Kosavati	<i>Luffa aegyptiaca</i> Mill-Hock
Karanja	<i>Pongamia pinnata</i> Pierre

ET is indicated for patients of asthma, respiratory disorders, sinusitis, rhinitis, anorexia, dyspepsia, peptic ulcers, and skin diseases and in healthy individuals in different states where kapha dosha is aggravated within normal limits (e.g., in the spring season for preserving normal health and preventing diseases). It is contraindicated in patients of hematemesis, cardiovascular diseases, and cachexia and in children and the elderly.

2.3.2 Procedure of Emesis Therapy

ET is usually the first main procedure of PKT done after a proper preparation of the body. After the PREP, OT and ST are done; the out-of-balance kapha is further increased in the body by giving oily food, fatty food, animal meat, milk,

and curd for the next 24 hrs before the induction of emesis. On the morning of ET (between 7 and 8 AM) a gruel mixed with ghee in large quantities or 2.5 l of milk or decoction of *Glycyrrhiza glabra* or sugarcane juice is given to the patient. After 10 min, emesis is induced by administering a certain combination of emetic herbs made into a paste mixed with ghee. Milk or decoction of *Glycyrrhiza glabra* or sugarcane juice is used as a vehicle to push the paste down.

2.3.3 Purificatory Purgation — Purgation Therapy (Virechana Karma)

Purgation therapy (PT) is a specific process for elimination of pitta dosa. PT procedure involves elimination of pitta dominating dosas and toxins of the body through the rectal route. PT is indicated mainly in patients suffering with hemorrhage from the upper parts of the body, poisoning, chronic jaundice, various gastrointestinal tract disturbances, asthma, skin disorders, epilepsy, insanity, and other pitta disorders. PT is contraindicated in patients with anorectal injury, prolapse of the rectum, bleeding from lower parts of the body, diarrhea, emaciating chest diseases, excessive oleation, and after enema. It is also contraindicated in children, the elderly, and patients who are weak, tired, have fasted, pregnant women, or persons desirous of coitus and pregnancy.

2.4 Procedures of Purgation Therapy

Internal oleation is done prior to PT. A diet containing fatty materials, liquid, warm/hot liquid or solid food, and meat soups is given to the patient. General instructions to be followed in ET are also to be followed in PT.

2.5 Herbs Used in PKT as Purgatives

The dose of the drug to be administered for purgation is decided according to both the nature of the purgative drug and the patient.

2.6 Criteria for Proper Purgation Therapy

A proper purgation induces a feeling of lightness in the body and abdomen with improved appetite. The sequence of expulsion in proper PT is urine, stool, pitta, drug, kapha, and vata. If the patient

has dyspepsia, heaviness in the abdomen or body, vomiting, and constipation, this suggests inadequate purgation. Signs and symptoms of excessive purgation include pain in the abdomen, blood-mixed serous discharge through the anus, syncope, weakness, and drowsiness. The physician should constantly monitor the subject and stop the whole process at the right time.

2.7 Biopurificatory Therapeutic Enema — Enema Therapy (Vasti Karma)

Enema therapy (ENT) is a procedure in which medicated oils, decoctions, and decoctions with pastes of herbs or oils are introduced into the large intestines through the rectum with the help of an enema apparatus.

Herbs Used in PKT to Make Decoctions for Enema

Medicinal	Plant Botanical Name
Madanaphala	<i>Randia dumetorum</i>
Kutaja	<i>Holarrhena antidysenterica</i> Linn.
Kustha	<i>Saussurea costus</i>
Devadali	<i>Luffa echinata</i>
Vaca	<i>Acorus calamus</i>
Dasmula	Group of ten drugs
Devadaru	<i>Cedrus deodara</i> (Roxb)
Rasna	<i>Acampe papillosa</i>
Yava	<i>Hordeum vulgare</i>

2.8 Classification of Enema Therapy

ENT can be classified in different groups on the basis of drugs that are used in an enema, such as

- (1) a decoction-based enema in which drugs used for the enema contain decoction in a larger quantity, or
- (2) An oil-based enema in which oil is the main ingredient. Usually, a combination of decoction and oil enema is given; decoction alone is not indicated at any time. According to therapeutic actions of the drugs, the enema can be an oleation enema that produces oleation of the body, a roborant enema that improves strength and general status of health, a purifying enema that removes toxic materials from the body, or a depleting enema that reduces fat content of the body tissue leading to sound health.

ENT may also be classified according to the number of enemas administered during the full course of therapy:

- Karma vasti — Total of 30 enemas, 12 decoction-based and 18 oil-based enemas administered on alternate days
- Kala vasti — Total of 16 enemas, 6 decoction-based and 10 oil-based
- Yoga vasti — Total of 8 enemas, 3 decoction-based and 5 oil-based

ENT is indicated in various gastrointestinal tract disorders, helminthiasis, urogenital disorders, lithiasis, neuromuscular disorders, articular diseases, venereal diseases, convulsions and paralytic disorders, and anorectal disorders. ENT is contraindicated in patients with intestinal obstruction, perforation, ascites, cholera, dysentery, anal inflammation, anemia, and anasarca.

2.9 Procedure of Enema Therapy

A decoction-based enema is given on an empty stomach between 5 and 7 P.M. after subjecting the patient to gentle massage and mild fomentation. An oil-based enema is administered 15 to 30 min after having a light diet in the evening. In both types of ENT. Duration of elimination of the enema should be a maximum of 48 min. If expulsion does not occur within the stipulated time, the following complications may occur: tympanitis, distention of abdomen, painful abdomen, renal colic, reverse peristalsis, and pressing pain in the chest region; these complications should be managed accordingly. Proper release of fecal matter and flatus, a feeling of lightness in the abdomen, suggests proper ENT. It is considered inadequate if the patient has few urges for evacuation, gripping pain, flatulence, and dyspnea.

After resting, the patient may take a bath with warm water. Lukewarm water, milk, gruel made of rice, meat soup, or another light diet is given. Excess of physical and mental exertion is avoided during ENT.

2.10 Errhine Therapy (Nasya Karma)

Errhine therapy (ErT) refers to administration of medicines in various forms through the nostrils (i.e., instilling medicated oil in the nose or administering paste, powder, or fumes of errhine drugs in the nostrils). There are two types of ErT: (1) Pratimarsha nasya and (2) old.

ErT is indicated in various diseases of the supraclavicular region such as stiff neck and jaw, headache, migraine, graying of hair, baldness, facial palsy, aphonia, stammering or alteration of voice, hoarseness of voice, corrhyza, tonsillitis, sinusitis, rhinitis, and earache. ErT should be avoided in patients who have acute fevers or acute corrhyza or have had purgation or ileus enema, had fasted, and had indigestion.

There are five methods of ErT:

1. Inunction (navana)
2. Instillation of nasal drops (avapeedana)
3. Insufflation (dhammapada)
4. Inhalation (dhuma nasya)
5. Topical application (marsha and prati marsha)

When the oil is being instilled, the head should not be shaken; the patient should not lose his or her temper, speak, sneeze, or laugh. The unctuous material should not be swallowed and should be expectorated properly so that no part of it remains inside. The patient should be instructed to avoid talking, becoming angry, laughing, and swallowing of errhine drugs during the ErT procedure.

2.11 Herbs Used in PKT for Nasal Medication (Nasya)

Medicinal	Plant Botanical Name
Vidanga	<i>Embelia ribes</i> Burm
Apamarga	<i>Achyranthes aspera</i> Linn.
Darvi	<i>Berberis aristata</i>
Surala	<i>Vateria indica</i> Linn.
Brihati	<i>Solanum anguivi</i> Lam.
Shigru	<i>Moringa oleifera</i>
Madhusarkara	<i>Dolichos biflorus</i> Linn.

Adequate ErT produces lightness in the body and head and sensorial happiness. ErT is inadequate if the patient has excessive secretions from the nose, eyes, and mouth and heaviness in the body.

Complications such as headache, confusion, and salivation may occur in uncontrolled excessive ErT. The physician should constantly monitor the subject to avoid complications.

After ErT; the patient is given mild sudation over the throat, cheeks, face, and forehead and a soft massage on the feet, palms, and back of the neck; hot water gargling of the mouth and medicated smoking (dhumapana) is advised to the patient to clear the mouth and throat of residual kapha dosa.

2.12 Bloodletting Therapy (Raktamokshana)

Bloodletting therapy (BLT) may be performed with or without the help of metallic instruments. In the latter type, BLT may be administered by application of leech, cow's horn, dried bitter gourd, or coupling glass.

BLT is practiced to remove toxic materials in blood in blood-borne diseases; in pitta predominant diseases; and also in a few vata disorders like erysipelas, boils and carbuncles, abscesses, blue and black pigmentation on the face, moles, eczema, leucoderma and vitiligo, scabies, red patches, anorectal inflammation, splenomegaly, jaundice, dyspepsia, anorexia, stomatitis, halitosis (foul-smelling mouth), gingivitis, and gout. It is contraindicated in patients with bleeding disorders, general anasarca, cachexia, anemia, piles, and all conditions where venepuncture is contraindicated.

3. Results

3.1 Age Distribution

The data obtain from various Panchkarma clinics/Spa, from 20-70 all age persons are coming there for treatment, among them persons from the age group 40-50 is of higher percentage of 35%.

Table: Age Distribution of 80 Panchakarma Subjects:

Age	Number of subjects	Percentage
20 – 30 years	13	16.5 %
30 – 40 years	15	18.75 %
40 – 50 years	26	32 %
50 – 60 years	19	23%
60 – 70 years	9	11.25 %

3.2 Gender Distribution of 80 Panchakarma subjects

Table: Among the 80 patients 72.5% are women.

Gender	Number of subjects	Percentage
Male	25	31.25 %
Female	55	68.75

3.3 Panchakarma Therapies Distribution among 80 Panchakarma subjects

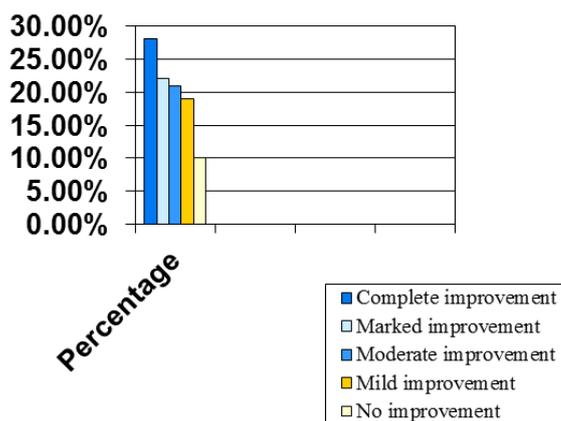
Name of Panchakarma Therapies	Number of subjects	Percentage
Snehana	80	100.0 %
Abhyanga	61	76.5 %
Vishesha	64	81.75 %
Udvardhana	59	72.25 %
Swedana	80	100.0 %
Vamana	13	15.25%
Virechana	80	100.0 %
Basti – Asthapana (Matra)	80	100.0 %
Basti – Niruha (Kashaya)	47	59.50 %
Shiro Pichu	24	31.00 %
Pizhichil	27	34.00 %
Gandoosha	15	17.50 %
Shirodhara with Takra	20	24.00 %
Shirodhara with Oil (Taila dhara)	73	91.00 %

3.4 Duration of Panchakarma Distribution among 80 Panchakarma subjects

Duration of therapy	Number of subjects	Percentage
5 days	47	58.75 %
7 days	24	31.00 %
10 days	9	11.25 %

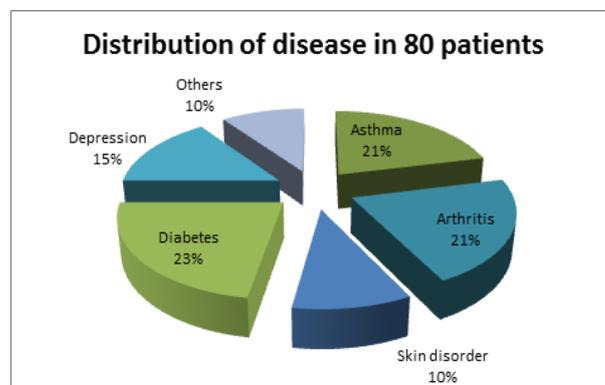
3.5 Overall Improvement in Physical Health Distribution among 80 Panchakarma subjects

Improvement	Percentage
Complete improvement	28 %
Marked improvement	22 %
Moderate improvement	21 %
Mild improvement	19 %
No improvement	10 %



2.6 Distribution of disease among the 80 Panchakarma Subjects

Name of disease	Number of Patients
Asthma	17
Arthritis	17
Skin disorder	8
Diabetes	18
Depression	12
Others	8



3. Conclusion

Any type of main cleansing procedure of PKT is believed to affect the cleansing of microcirculatory channels by eliminating the toxic metabolites from the body. This helps in the process of curing a disease. Scientific studies indicate that cleansing procedures appear to help in eradicating chronic diseases more effectively. It was observed by the author in a case study that when PKT was administered as an adjuvant therapy along with the allopathic system of

medicines, the results were better than the PKT or allopathic system of medicines given alone.

3.1 Beneficial Effects of Panchakarma Therapy

The beneficial contribution of PKT is that it removes the toxic materials from the body and provides purification of the body at two levels: (1) the gross level, where various organs and systems of the body are thoroughly cleansed (e.g., cardiovascular system, gastrointestinal tract, chest, etc.) and (2) the cellular level, where purification and cleansing of the body is produced at the level of cells, cell membranes, and molecules. PKT helps bring the whole body to normalcy; starts rejuvenation and revitalization of all body tissues; potentiates the pharmacological actions of various drugs and medicines administered after PKT; removes waste products, unwanted materials, various toxins, and stagnant dosas; and potentiates physiological functions of all the body systems (e.g. gut absorption improves considerably and metabolism is also corrected). The prognosis of various diseases that are difficult to treat with simple administration of medicines becomes significantly improved (good prognosis) after administration of PKT. PKT not only is a prerequisite for all the therapeutic procedures and medications but also has a full therapeutic role in promoting preventive, curative, and rehabilitative procedures.

If properly performed, PKT does not produce any serious complications. If any minor complications are produced, they are easily manageable. Specialized techniques of PKT are simple to perform and can be carried out at both the outdoor patient and indoor patient (OPD and IPD) levels. There is no need to carry out all PKT practices at one sitting; specific techniques of PKT (any of the MCP) can be recommended to the patient after proper preparation. The toxic materials are eliminated from the body mainly through the alimentary canal.

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