



Review Article

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SUSHRUTA'S CONCEPT OF SURGICAL ETHICS RELEVANT IN PRASUTI TANTRA AND STREE ROGA: A REVIEW

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ABSTRACT

The branch of obstetrics and gynecology require special conducts of behavior by doctors in counseling and treatment of women. Our ancient Acharyas had also considered such issues in their literature and to enlighten them present article is designed. Paying particular attention to ethical issues, medico legal problems and legal context of female doctors all the available Ayurvedic Samhitas and modern literature is studied. The moral, ethical and benevolent conduct of a doctor towards a female patient is described by Acharya Sushruta. Vaidya Vritti (autonomy of a female patient), Vaidya Nimitta Vyapad (no maleficence), Sadachar (justice to all female patient), consent taking, are the other ethical issues mentioned in our Samhitas. Medico legal aspects of MTP i.e. unqualified doctors, unrecognized place, negligence of complications (e.g. perforation) are instructed by our ancient gurus through Shishyupnayan, Vaidya Gunas, Yogya, Agrahoupharniya, Updrava, Sadhya Asadhyata, Krityaakrityavidhi, Yantra Shastra Gunas. The essence of ethical and medicolegal issues is given in whole Ayurveda literature though not described as a separate topic. The importance of preconception and genetic counseling is given under the concept of Garbhadhan Vidhi. Practitioner's duty for complete ANC is headed under Garbhini Paricharya and instructions are given for providing counseling of Garbhini to prevent fetus from being Pangu, Mook, Jad, Pramehi. The field Prasuti Tantra and Stree Roga is associated with ethical issues in every step which are well mentioned in our Ayurveda literature. This data should be detailed and utilized to prevent medico legal issues in present era.

Keywords: Vaidya Vritti, Yantra Shastra Gunas, Negligence, Sadhya Asadhyata

INTRODUCTION

Ethics are defined as the moral principles that govern a person's behavior of conducting an activity. Any and every action in a doctor patient relationship has ethical consideration. Ethically complex issues accompany obstetrician and gynecologist in her daily routine clinical practice. The concentration of doctors on earning money has spoiled their moral values. Highly specialized hospitals, nursing homes, drug industry, pathological labs all have developed a chain of business in medical field. Less emphasis is given on the general and systemic clinical examination in diagnosis of disease. Instead diagnostic tests and pathological labs play an important part in diagnosis as well as in earning money for the doctor. Pregnancy itself had become a nine months package of earning for a female doctors and a financial burden to the patients. All this economic development in clinical practice can raise many ethical issues which can drag a doctor to civil and criminal court. Here it is also necessary to mention that not only a doctor but the patients in the present era may also act over smartly to trap the doctor. The field of obstetrics and gynecology deals with preconception to menopause and to end of female life and thus requiring ethical consideration in every step by the doctor for his patient and for himself too.

The most ancient surgeon of India Acharya Sushruta had mentioned several moral principles beneficial to us doctors. His ethical values start right from the stage when a doctor enters to medical profession as a student. According to him a student should enter the medical profession leaving behind anger,

greediness, attachment, proud, jealousy, hardness, and lethargy.¹ As an obstetrician and gynecologist have to deal with a female patient he/she cannot deal them with anger and hard nature. Attachment to fetus patient should be avoided while removing it in case of harm to mother and for eugenic causes. Being proud and greedy hinders the doctor patient relationship which is of uttermost importance. Thus all these qualities should be induced in a doctor within his/her course of study. Various others ethical principles given by Acharya Sushruta relevant to Obstetrics and Gynecology are discussed in the present article.

Ethical values of right medical education and practical skills

Sushruta mentioned that a doctor having conceptual knowledge along with practical skills and is intelligent too is as successful in his practice as a cart with two wheels is successful in war². He compared a doctor having conceptual knowledge without its applied aspects with donkey carrying sandalwood on his back unaware of its smell.³ Applied aspects of anatomy of female and male reproductive system, abdominal wall, inguinal canal, and pelvis are relevant to obstetrics and gynecologists. Anatomical structure and their relation to each other is very much important e.g.: injury to ureters and bladder can occur while performing hysterectomy.

Sushruta gave us ethical right to study concepts of modern science by saying that the principles of any science cannot be understood by studying the concepts of one field only, so a doctor should study the concepts of another field too.⁴ It is necessary for a surgeon to be well trained and perfectly skilled

for which Acharya Sushruta described *Yogyasutriya Adhyaya*. According to him we should achieve perfection in Chedhan, Bhadhan, Aharan, Lekhan, etc procedures on various non-living things such as Alaabu, Trapus, Driti, Basti, etc.⁵

The four universal laws of ethics autonomy, beneficence, non-maleficence and justice are also valuable in the practice of obstetrics and gynecology and are included by Acharya Sushruta too in his *Samhita*.

Autonomy: It includes the right of patients to make decisions about their medical care without the influence of their medical care provider and to be treated on the grounds of humanity and social respect. It is the duty of health care provider to educate the patient but not to take decision on behalf of him. Patient must give consent after being informed properly before any minor or major surgery to be carried out. Regarding the feminists perspective of autonomy it is said by Sushruta to avoid close sitting laughing and taking anything from female patients.⁶ The ethical duty of surgeon of taking consent is described by Acharya Sushruta in *Mudgarbha Chikitsa* where he mentioned to do surgery *Udarpatan* for protecting *Garbha* and *Garbhini* after taking consent from attendant (Swami). Consent from *Adhipati /Swami* should also be taken before performing any procedure to remove *Mudhgarbha* like *Apkarshan*, *Utkarshan*, *Chedhan*, *Bhedhan*, *Daran* etc.⁷

Beneficence: It is the duty of the doctor to act in best interest of patient. His actions are expected to benefit others. This principle obliged us to weigh risk and benefit of any procedure to be carried out on patient and to explain the prognosis of disease to him. One of the common situations in gynecology where the female doctor has to face dilemma is while doing hysterectomy for fibroid and prolapse as removing uterus at early age may lead to other menopausal symptoms of health concern. Acharya Sushruta solved this problem by instructing us to do *AyuPariksha* first of all.⁸ The individual circumstances of each patient should be considered by a doctor for whom Acharya Sushruta gave the concept of *Sadhya Asadhyata* (prognosis). The treatment of different type of *Arshas* (cervical polyps and warts) is given according to their characteristics through *Aushadh*, *Kshar*, *Agni* and *Shastra Karma*. Instructions are given to avoid surgery in conditions where the disease can be treated by *Snehaadi Kriya* (medical treatment).⁹ Conservative management of *Prasarmsini Yonivayapad* (third degree uterine prolapse) through *KsheerSweda* and *Veshwaar Pind Dharan* till micturation¹⁰ has been described. He instructed to perform surgery only when the disease is *Ashadhya* as in *Jatilodayapratikhur* (compound presentation) and *Padjaanu Udaya Mudhgarbha* (foot and knee presentation)¹¹ and in emergency conditions when the heartbeat of foetus is felt in died mother (*bastmarvippanaya...*)¹². Regarding the beneficence of pregnant women Sushruta said to abort the foetus if the mother is suffering from an intolerable disease¹³ and to do efforts to save *Sthiti Yogy Garbha/Pariharya Garbha* (threatened abortion) through external and internal medicine instead of removing it through *Dilatation* and *Curettag*¹⁴.

Non maleficence: Non Maleficence means none harming or inflicting least harm possible to reach a beneficial outcome. It includes preventing harm and removal of harmful condition. The first step is to prevent harm to the patient undergoing any surgery by maintaining sterile field and aseptic conditions. Removal of infections from labor room and Operation Theater is necessary, failure to which may result in puerperial sepsis after delivery, pelvis inflammation following *Dilatation* and *Curettag*, abnormal discharges from the abdominal wound and many more complication. Sterilization through fumigation by

Commiphora wightii (*Guggulu*), *Aquillaria agalocha* (*Agar*), *Acaros calamus* (*Vacha*), *Brassica juncea* (*Sarshap*), salt (*Lavan*), *Azadirachta indica* (*Nimba Patra*) has been described by Sushruta.¹⁵ Recommendation are given to shift the pregnant woman at 9th month in a well sterilised and protected *Sutikagar* made up of *Aegle marmelos* (*bilwa*), *Ficus benghalensis* (*Nyogadhra*), *Diospyros peregrina* (*Tinduk*), *Semecarpus anacardium* (*Bhallatak*) woods.¹⁶

The *Guna* and *Doshas* of the instruments to be used on patient is also mentioned by him in separate chapter of *Yantravidhi* and *Shastraavacharniya*. Use of sharp instruments such as *Vridhipatra* (scalpel) is contraindicated in case of *Mudgarbha* as it can harm fetus.¹⁷

In context of management of obstructed labor, he said that it is mandatory to save the life of mother and to avoid caesarian section in case fetus is died in womb. More emphasis is given on delivery by vaginal route. Various methods such as *Daran*, *Apkarshan* to remove life fetus with abnormal presentation and to remove dead fetus through vaginal route by excision (*Chedhan*), incision (*Bhedhan*) etc. have been described.¹⁸

Sushruta had left no stone unturned of surgical procedures. He also marked out the precautions to be followed during the management of breast abscess. Incision on *Aamvidradhi* is contraindicated instead drainage of milk from the breast i.e. *Duhan Chikitsa* is prescribed. While draining *Pakwavidradhi* (full formed breast abscess) it is specified to protect *Stanvaahi Nadiya* (lactiferous ducts) and *Krishna Chuchuk* (*aereola*)¹⁹.

Justice: It includes right to be treated equally in the provision of care, medical resources and respect to for morally acceptable laws. The principles of diagnosis and the management mentioned by Sushruta are for all type of peoples based on individual conditions such as *habitat* (*Desh*), *age* (*Vaya*), *prognosis* (*Sadhya Asadhyata*). His instructions are based on prevention and removal of causative factors. Indirectly did justice to his fetus patient by giving instructing mother to prevent him from being *Pangu*, *Mook*, *Jad*, *Pramehi*. The acceptance of the ethical laws mentioned by Acharya Sushruta is the justice done by us to the patient.

DISCUSSION

Litigation against doctors is increased since the consumer protection act is passed. Thus it is expected by doctors to act defensively. The cases against obstetrician are more because two lives are at stake. Even in gynecological surgeries high alarming things can occur at any time. The causes of litigation for a female doctor can be: ignorance of concern laws, non-communication, misinterpretations, incomplete knowledge, lack of practical skills, etc. Whatever is the cause patient wants to sue the doctor for 'negligence'. Acharya Sushruta elaborated the principles to save us from litigation in his *Samhita* which are described above. The common areas of negligence and the precautions described by Sushruta are:

- Surgery without consent – to perform laparotomy (*Udarpatan*) after taking consent in obstructed labor (*Mudgarbha*).
- Non maintenance of sterilization – the procedures of sterilization is described in *Agarahupkarniya Adhyaya*.
- Untrained doctors and staff - training on non-living materials before performing any surgery on humans as in *Yogyasutriya Adhyaya*.

- Non access to adequate preoperative and postoperative care – Poorva Karma, Pradhan Karma, Pashchat Karma is well described.
- Lack of contribution in long term care of patient after abortion, delivery and caesarian section-Chikitsa after Garbhapatana , Sutikaparicharya and Mudhgarbha Niharan is given.
- In MTP i.e. unqualified doctors, unrecognized place, negligence of complications (e.g. perforation) –instructions are given through Shishyupnayan, Vaidya Gunas, Yogyasutriya, Updrava , Sadhya Asadhyata, Krityaakrityavidhi, Yantra Shastra Gunas.
- In cases of caesarian section (improper indication, timing, maternal and fetal morbidity and mortality): details instructions are given in context of Mudgarbha about the conditions in which to do Udarpatan and to give priority to saving life of mother.

CONCLUSION

Obstetrician And Gynecologists carries the burden of much litigation with him/her in the present era and in the ancient time too. Acharya sushruta on his practical experience includes do, and don't for a surgeon which can save him/her from legal matters. A doctor should be aware of mishaps. Prompt attention is essential. Indifference to the complaint of patient should never be shown. Updating the knowledge and maintaining practical skills is essential for both doctors and staff. Hospitals should be equipped with all necessary instruments in good condition. Labor room and operation theatre should be well sterilized. Acharya Sushruta gave emphasis on all these points and thus provides a valuable knowledge to today's surgeon. Taking precautions is always better than cure. Thus moving with the ethical principles mentioned in ancient literature can be a good choice for making distance from legal matters in the present world.

REFERENCES

1. Shastri A D. Sushruta Samhita with Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Su. 2/ 6 pg. 14.
2. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Su. 3/53, pg. 19.
3. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Su.4\4 pg. 20.
4. Shastri A D. Sushruta Samhita With Ayurveda Tatva Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Su.4\7 pg 21.

5. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Su.9\4 pg 40.
6. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Su.11\9 pg. 45.
7. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Su.Chi 15\3, pg.53
8. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Su.35\3 pg. 167
9. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Su.24\3 pg.129
10. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Utt. 38 \28-29 pg. 64
11. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Chi 15\9 pg. 12
12. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Ni 16\9 pg. 340
13. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Chi 15 \19 pg. 12
14. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Sharir 10/57 pg. 57
15. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010 Su a5 \18 pg. 25
16. Shastri A D. Sushruta Samhita with Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Sha 10\7 pg. 100
17. Shastri A D. Sushruta Samhita with Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Sha.10/16 pg. 12.
18. Shastri A D. Sushruta Samhita with Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010, Chi 15\12 pg. 180
19. Shastri A D. Sushruta Samhita With Ayurveda Tatva Sandipika Hindi Commentary Reprint Ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2010 Chi 18\47 pg. 103

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