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A REVIEW ON VRŚCIKA AND ITS TYPES

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ABSTRACT

Scorpion bite is a common global public health problem in many countries. The estimated annual number of scorpion stings is 1.2 million leading to 32,250 death per year. There are about 1500 species of scorpions worldwide, out of these 50 are dangerous to humans. In India among 86 species, *Mesobuthus tamulus* (Indian red scorpion) and *Heterometrus bengalensis* (Indian black scorpion) are commonly responsible for envenomation of medical importance. Ayurvedic classics have considered *Vṛścika* as one of the types of *kīṭa* which possess ability to produce fatal signs and symptoms just like *Sarpa. Vṛścika visa* has been described in detail in ayurvedic literature under *kīta viśa*. Severe pain, sharp burning sensation, swelling and erythema are the clinical manifestation in *Vṛścikadamśa*. Immediate acute pain at the site of the sting is an essential factor for the rapid search of medical care in *Vṛścikadamśa*. *Vṛścika* types along with its symptoms, severity is very well explained in our classics and *keraliya vishachiktsa grandhas* which remains unexplored.

Keywords: *Kīṭa, Kīta viśa, Vṛścika, Vṛścika visa,* Scorpion

INTRODUCTION

Envenomation caused by bites and stings from venomous animals cause a major public health problem in children and adults worldwide. Following snake bites, scorpion stings are a major public health problem in many underdeveloped tropical and subtropical countries, particularly in America, the Middle East, India and Africa. Globally, several thousands of people die each year from scorpion stings. More than 1.2 million cases are registered each year in the world. Agad Tantra, one among 8 branches of Ayurveda deals with animate, inanimate poisons and their management has given a special importance to *Vṛścika viśa* even though it is described under *kītaviṣa*. It is because, among all types of *kītaviṣa*. *Vṛścika viṣa* causes severe manifestation in humans. Severe pain, sharp burning sensation, swelling and erythema are the clinical manifestation in *Vṛścikadamśa*

REVIEW OF LITERATURE

Classical References

In Samhita period (200 BC to 400AD) which is considered as the golden age of Ayurvedic history, poisoning by *Vṛścika* is described in detail in the classical texts *Charaka* saṃhitā. Susrutha Saṃhitā and Ashtanga Hṛdaya mentioned under the jangama viṣa in kīta prakarana.

Charaka Saṃhitā (2 BC) has explained the origin, classification, symptoms and treatments of Vṛścika in detail in 23rd chapter of cikitsa sthana[1]. Sustrutha Saṃhitā (2AD) has given detailed explanation of Vṛścika in Kīta Kalpa Adhyaya (8th chapter) of Kalpa Sthana [2]. In Harita Saṃhitā (2BC), 55th chapter of 3rd sthana Mantha cikitsa has been mentioned for the management of Vṛścikadamśa. As per the present availability, sutra sthana (18th chapter) of Bhela Saṃhitā (1-2 BC) deals with some poisoning condition. But no direct reference of Vṛścika is available. In Kasyapa Saṃhitā also no portion deals with Vṛścika.

In Ashtanga samgraha (6 AD) Vriddha vagbhatacharya has narrated the details of Vṛścika in sarpa viṣa prathishedha adhyaya (42nd chapter), kīta viṣa pratishedha adhyaya (43rd chapter) and Vishopayogiya adhyaya (48th chapter) of uttarasthana [3]. While in

Ashtanga Hṛdaya (7 AD) of Vagbhatacharya describes about Vṛścika in 36th and 37th chapter of uttarasthana^[4].

In *Madhava nidana* (7AD), 69th chapter, *viṣa roga nidanam, Madhavakara* has explained the details about the signs and symptoms due to *Vṛścikadamśa*. The author of *kalyanakara* (9AD), *ugradityacharya* has included *Vṛścika* in *kīta* under 19th *parichchheda* and has mentioned common treatment principles. In *Gadanigraha* (12AD) *shodhala* has explained the consequences which appear after *Vṛścikadamśa* in *Jangama Viṣa nidana adikara*^[6]. Management of *Vṛścikadamśa* are described in *viṣadhikara* (64th chapter) of *chakradatta* (16 AD). *viṣadhikara* (67th chapter) of *Bhāvaprakasha* (16AD) deals with signs and symptoms, prognosis and treatment of *Vṛścikadamśa*^[7]. *Yogarathnākara* (17AD) also explained *Vṛścikadamśa* in *viṣadhikara* chapter. *Bhaishajyaratnāvali* (18AD), *viṣaroga cikitsa prakarana* (72nd chapter)^[8] describe some extra medications from other classical texts.

Keraleeya viśa Cikitsa References[9]

Kerala has made many unique contribution to ayurveda, especially to Agada tantra Keraleeya viṣa vaidya has an ancient and renowned background. In this system, both vedic and non vedic schools of thoughts were present. It is interesting to note that the single Ayurvedic subject in which maximum numbers of books are written on Malayalam is probably, Agad Tantra.

- *Viṣa Vaidya Jyotsnika* :- Classification, symptoms and treatment of *Vṛścikadamśa* are described in the 12th adhikara named '*Vṛścika visa vijñāna Pratisedham*'.
- *Prayoga Samucchaya* :- In *Saptama pariccheda* we get reference of origin, classification, signs and symptoms and treatments of *Vrścikadamśa*.
- - $N\bar{a}$ rayānīyam (Tantra Sara Samgraha): Different yogas used in Vrścikadamśa are explained in 10th patala of written by Narayanan.
- -Kriyā Kaumudi :- Sri.V.M. Kutti Krishna menon (author) given a detailed description about *vraṇa* which develops as a complication of *Vṛścikadamśa* etc, is available in *Kīta viṣa pratisedham adhyāyam*.

- *Viśacikitsa Tantram* :- By 'Balananda Swamikal' gives detailed description about *Vṛścika* and *dhātugatha visa laksanas*.
- Lakṣaṇāmṛtam:- The Malayalam translation of the book which is written in Sanskrit and is translated by Sri Oduvil Sankarankutty Menon, we can see the description about the Vṛścika in its 7^{th} patala.
- -Viṣa vaidyamrtam :-C.A Sankaranarayana Pillai, narrates about the signs and symptoms along with Vṛścikadamśa cikitsa.
- *Nīlakaṇdīyam*:-By V.K.V. Neelakandan Namboothiri we get references about treatment of *Vṛścikadamśa*
- *Viṣa Vaidyam*:- In this book a difference in opinion about the origin of *Vṛścika* and treatment of *Vṛścikadamśa* is mentioned in the 23rd chapter. The book is written by 'Kavi Kesari P. V. Krishna Varier'.
- -Viṣa Vaidya Taraṅgini: By 'Moodolil M. Kungirama Panikkar'. A different classification of Vṛścika is given in this book; ie. Sīta and Agnēya. Detailed description of treatment of Vṛścika is also available here.

Dosha Predominance of Vṛścika Visa According to Different āchāryas[11]

Ashtanga sangraha Vātolbana

Ashtanga hridaya Vatolbana

Sushruta Saṃhitā Did not mention specific dosh predominance for vrścika mentions vātakapha predominance for kīṭavisha

Prayoga samucchaya Mostly vātapittapradana, very few are kapha predominance,

Kriya koumudi Mostly vātapittapradana, Rarely of kapha predominance.

3. Classification of vrścika

A) According to its potency (S.S. Su. K and Ah.Ut) [12,13]

- 1. Manda Vișa. (Mild variety-12 types)
- 2. *Madhya Vişa*. (Moderate variety-3 types)
- 3. *Maha Visa*. (Virulent variety-15 types)

As per Kriya Kaumudi [14]

- 1. Alpa vișa vīrya Vṛścika
- 2. Ugra vişa vīrya Vṛścika

B) According to its orgin (S.S.Su.K and A.H.U)^[12,13]

- 1.Born from putrefied dung of the cow etc . (*Manda Vișa*)
- 2. Born from cadaver of the animals killed by the poisoned arrow or born from wood bricks (*Madhya Viṣa*)
- 3.Born from the cadaver of the snakes (*Maha Viṣa*)

C) Classification according to effect of poison (Ca.Ci)^[15]

- 1. Duśi visaja Vrścika
- 2. Prānahara or Asadya Vrścika

Detailed description on types of *Vrścika* is not available in *Caraka Samhitā*.

D) Classification according to dośa predominance (P.S and K.K)[16,17]

- 1. Vataja (Vayavya) 18 types
- 2. Pittaja (Agneya) 24 types
- 3. *Kaphaja (Saumya)* 13types
- 4. Sannipataja (Sankirna) 12 types

Table No.1, Morphological features of Vṛścika [18,19]

	Susrutha Saṃhitā (Su.K.8/59-64)	Aṣtāṅga Hridaya (A.H.U.37/8-10)
Manda Vișa	Black, blackish, variegated, pale, resembling cow's urine. rough, blue, yellow, smoky hairy, grass like and red. White abdomen. Many joints in tail.	Yellow, white and blue or of many colour shed of black. Dry, hairy. Abdomen may be red or pale having many joints
Madhya Vişa	Red, yellow brown. Smoke coloured abdomen. Three joints on their tail.	Brown, slight red or reddish brown spotted body variegated and resembling to the blood. Smoke coloured abdomen. Three joints
Maha Vişa	White, variegated, bluish, reddish, red white. Red and blue abdomen. Another yellow with slight red or blue yellow. One having no joints or with one or two joints. Many shapes and colours.	Appear like fire. Having one joint. Belly is red, black or white

4.Clinical features

According to *Aṣtāṅga Hridaya, vrścika viṣa* is penetrating. In the beginning it causes burning sensation just like that of the fire. After that it spreads upwards quickly and then gets stabilized at the site of the sting which results in, bluish discolouration, pricking and bursting pain at the site^[20]. Also, the bite may cause swelling of the tongue, rigidity of the body, fever, and black coloured blood comes out from all the orifices. There may be a loss of sensory perception also^[21]. Further, here is profuse sweating, fainting, dryness of the mouth, unsound mind, suffers from the discomforts, wasting of the muscles, and may lead to death ^[22].

According to *Suśrutācārya*, mild poisonous *Vṛścika* by their sting produces ain, trembling sensation, stiffness in body and outflow of black blood. If they stung the extremities, pain

rushes upward along with burning sensation, local swelling and fever. Moderately poisonous *Vṛścika* produces swelling of the tongue, obstruction difficulty in swallowing the food and severe fainting. When stung by the severely poisonous *Vṛścika*, one may feel the impulse of the snake poison; eruptive boils pear along with giddiness, burning sensation, fever and virulent discharge of black blood from all the orifices, due to which person dies soon^[18].

Table No.2, Severity of Vṛścika damśa

Sl.	Clinical manifestations	Mandavisa	Madhyavisa	Mahavisa
1	Pain	✓		
2	Stiffness of body	✓		✓
3	Outflow of black blood	✓		✓
4	Local swelling	✓		
5	Fever	✓		✓
6	Trembling sensation			
7	Swelling of tongue		√	
8	Fainting		✓	
9	Giddiness			✓
10	Eruptive boils			✓
11	Burning sensation			
12	Difficult to swallow		✓	

Apart from all the above mentioned signs and symptoms. *Vṛścikadamśa* can produce other manifestations according to the dominance of the specific dosa. It can be divided as *vatika paittika, kaphaja and tridosaja*.

Table no: 3, Vṛścikadamśa lakshana according to dośa predominance [21]

Vataja Vṛścikadamśa	Pittaja Vṛścikadamśa	Kaphaja Vṛścikadamśa
Pain in the heart region	Loss of consciousness	Vomiting
Stoppage of movement of the <i>vāta</i> in the upward direction	Warm expiration	Loss of taste or appetite
Engorgement	Burning sensation in the heart	Nausea
Dilatation/ the formation of the network of the veins.	Bitter taste in the mouth	Excess of salivation.
Pain in bones and joints	Scales in the muscles	Running nose
Rolling on the grounds	Reddish yellow coloured swelling	Feeling of the cold
Twisting pain in the calf muscle		Sweet taste in the mouth
Blue discolouration of the body		

The text *Prayoga Samucchaya* explains same symptoms described by *Vagbhatacharya* in *vataja* and *pittaja Vṛścikadamśa*. Little pain, oozing like *lasika* and oedema resembling *udumbara phala* are mentioned as the manifestation of *kaphaja Vṛścikadamśa*^[16].

Kriya Kaumudi has mentioned śirastoda, asthitodo, hridvyatha, fainting, urdhwa vayu and darkness of śira as the symptoms of vatholbana Vṛścikadamśa. Swasavridhi, raktapitta, moha and burning sensation are mentioned in pittadhika Vṛścikadamśa. Hrillāsa, chardi, śaitya, mukhamādhurya and praseka are mentioned in the kaphaja Vṛścikadamśa [14].

Prayoga Samucchaya mentions about *sannipätaja Vṛścikadamśa laksana*, in which all the manifestations mentioned in *vataja*, *pittaja and kaphaja* predominant *Vṛścikadamśa* can

be seen. The prognosis is said to be *asadhya*. The symptoms like gradual increase in the oedema, *raktha durgandha*, heaviness of the head and eyes, *murccha, bhrama, karnika, jwara* and *agnimāndya* are mentioned in *sannipataja Vṛścikadamśa*^[16]. In *Kriya Kaumudi* also *sannipatika Vṛścika* is mentioned but no symptoms are explained^[14].

In *Bhāvaprakāśa*, symptoms are explained as severe burning sensation in the beginning followed by spreading upward as though splitting and after sometime becoming confined to the site of sting only are symptoms of scorpion poison. In this text *asadhya Vṛścikadamśa lakṣaṇas* are mentioned. It can be considered as *sannipataja Vṛścika viṣa lakṣaṇa*, which includes severe pain at *hridaya*, *nasika* and *jihwa*; patient may feel that these organs have stopped functioning. Skin at the site of the sting starts to necroses and shed, and patient may die due to severe symptoms [23].

The text *Kriya Kaumudi* has mentioned the symptoms due to highly potent *Vṛścikadamśa* [14]. In such condition, there will be no pain; patient may feel cold (rigor), profuse oedema, numbness of the tongue, convulsions, *mamsasosa*, vomiting and death. In pregnant ladies this may lead to *garbhapata*.

Dhatugata lakśana of Vrścikadamśa

Prayoga Samucchaya and Kriya Kaumudi explained signs and symptoms of Vṛścikadamśa in step by step as it enters deeper and deeper in subsequent dhātus. It is referred as vega of Vṛścikadamśa

According to *Prayoga Samucchaya*, when *Vṛścika viṣa* enter into *twak dhātu*, sudden occurance of severe pain will result. When *viṣa* enter into *raktha dhātu* then severe burning sensation will occur, when it enter into *māmsa dhatu*, *hidhma* and *grandhi* will occur, when it enter into *medas greevabhaṅga* will result. As well as when the *viṣa* enter into *asthi dhātu*, *jwara* will manifest and when it reaches in *majja dhātu*, the visa cause *manasthāpa* and after entering into *śukla dhātu*, will be red in colour and finally the patient dies.

Table no. 4, Vega lakśana of Vrścikadamśa[24,25]

Sl	Dhātu	P. S.	К. К.
1	Twak	Severe pain (repeated)	Pricking Pain, Vomiting, Delirium, Convulsions etc
2	Rakta	Severe burning sensation	Symptoms of <i>twakgata</i> and Fatigue. Burning sensation, <i>Jwara. Atisara</i> etc
3	Mamsa	Hidhma, Oedema	Granthi all over the body
4	Meda	Grivabhanga	Hīdhma, galasośa
5	Asthi	Jwara	Jwara
6	Мајја	Manastapaapa, Dukha	Vyasana, manastapana
7	Śukra	Raktanetrata, Death	Raktanetrata, Death

SCORPION

Scorpions are member of Scorpionidae family, class Archinida with head and thorax united, pincers, four pairs of legs and a segmented abdomen including a long tail with sting. Except for *Hemiscorpius Lepturus*, all venomous scorpion species, belong to the large family *Buahidae*.

Classification

Kingdom : Anamalia Phylum : Arthropoda

Subphylum : Chelicerata

Class : Arachnida Order : Scorpions

Superfamilies⁽²⁶⁾

1. Family Buthidae: - About 598 species widely distributed, even into temperate regions. Include some of the most dangerously venomous creatures. It is one of the oldest living family; often with a spine under the stinger.

- 2. **Family Chaeriloidae**: 18 species found in southern Asia and continental Southeast Asia. Female reproductive system includes an ovary, uterus, with yolk-rich ova developing within.
- 3. **Family Chactoidae**: 129 species found from Mexico to northern South America. 2 lateral eyes on each side.
- **4. Family Iuroidae**: -21 species found in arid regions of the Americas as well as Turkey and Greece. Female reproductive system includes an ovary uterus. with yolk-poor ova developing within. Hadrurus is the largest species in the United States.
- 5. **Family Scorpionoidae**: 119 species found mostly in tropics and subtropics of Africa, Asia, and Australia. It includes the largest species, the emperor scorpion.
- 6. Family Pseudochactoidae: 1 species of Central Asia; first described in 1998.

Table No.5, Key to identify a scorpion family⁽²⁶⁾

Sl No	Character	Family
1	Tail very thick, thicker than chela Chela slender and round in cross section	Buthidae
2	Tail thinner than chela. Chela large and flattened in cross section	Scorpionoidae
3	Tail similar to legs in thickness	Ischnuridae
4	Body extremely flattened dorsoventrally. Legs and tail flattened. Dark brown scorpion occurs in rocky habitat	Hadogenes
5	Body slightly flattened or not flattened. Blackish coloured scorpions occur in forest and moist regions.	Opisthacanthus
6	Chela much thicker than tail, yellow to brown coloured scorpions appears in burrows	Opistophthalmus
7	Chela only slightly thicker than tail.	Bothriuridae Lisposoma.

Envenomation⁽²⁷⁾

The causes of scorpion envenomation are primarily accidental. A clinical effect of the envenomation depends upon the scorpion species, lethality and dose of venom injected at the time of sting and also on the victim's physiological reactions to venom. Commonly scorpion sting produces severe pain that radiates upwards. Then the pain localize at the sting spot. Slight discolouration with severe pain will be seen. The poisonous apparatus of the scorpion is the sting and associated venom glands. They bear at the tail end of the animal. The dilated basal part is called the ampulla or vesicle. The sting contains a pair of sac like venom glands that open individually by pear shaped apparatus, one on each side. The sting is movably articulated on the tail and is controlled by a pair of dorsal and ventro-lateral muscles, those originate on the last tail segment and function antagonistically to each other.

Scorpions use their pincers to grasp their prey; then, they arch their tail over body to drive their stinger into the prey to inject their venom, sometimes more than once. The scorpion can voluntarily regulate how much venom to inject with each sting. The striated muscles in the stinger allow regulation of the amount of venom ejected, which is usually 0.1-0.6 mg. If the entire supply of venom is used, several days must elapse before the supply is replenished. Furthermore, scorpions with large venom sacs, such as the Parabuthus species, can even squirt their venom.

The venom glands are located on the tail lateral to the tip of the stinger and are composed of 2 types of tall columnar cells. One type produces the toxins, while the other produces mucus. The potency of the venom varies with the species, with some producing only a mild flu and others producing death within an hour. Generally, the venom is distributed rapidly into the tissue if it is deposited into a venous structure. Venom deposited via the intravenous route can cause symptoms only 4-7 minutes after the injection, with a peak tissue concentration in 30 minutes and an overall toxin elimination half-life of 4.2-13.4 hours through the urine. The more rapidly the venom enters the bloodstream, the higher the venom concentration in the blood and the more rapid the onset of systemic symptoms.

Common symptoms of a scorpion sting

Pain, tingling or burning sensation at the sting site

- Malaise, sweating, nausea and vomiting
- Salivation, numbness, muscle twitching
- Abnormal neck, eye and head movements/twitching
- Palpitations, breathing difficulties.

Grading of scorpion envenomation (28)

The grading of scorpion envenomation depends on whether or not neurological signs predominate and is as follows:

- Non neurological predominance
 - > Mild Local signs
 - ➤ Moderate Ascending local signs or mild systemic signs
 - > Severe Life-threatening systemic signs
- Neurological predominance
 - Grade I Local pain or paresthesia at the sting site
 - Grade II Pain or paresthesia that has travelled from the sting site
 - Grade III Either cranial nerve or somatic neuromuscular dysfunction
 - Grade IV Both cranial nerve and somatic neuromuscular dysfunction

DISCUSSION AND CONCLUSION

Ayurvedic classics have considered Vṛścika as one of the type of $k\bar{t}$ which possess ability to produce fatal signs & symptoms just like Sarpa. Severe pain, sharp burning sensation, swelling and erythema are the clinical manifestation in Vrścikadamśa. Immediate acute pain at the site of the sting is an essential factor for the rapid search of medical care in Vrścikadamśa. Vrścika viśa is vata predominant in nature. Different types of Vrścika are explained in classic with specific signs and symptoms. It is important to known the type of Vrścikadamśa in order for proper management of the condition. In depth knowledge in this will help to manage the condition appropriately by choosing the concern treatment procedures and medicine

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