

AYURVEDIC CONCEPT OF AVEDHYA SIRA; CLINICAL AND ANATOMICAL PERSPECTIVES IN CONTEXT TO INJURY

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ABSTRACT

Ayurvedic scriptures explain human anatomy comprehensively as well as the anatomical partition of *Sira*. *Sushruta Acharya* elucidated the term "*Sira*" in *Sharira Sthana* while the term "*Saranat Sira*" is mentioned in *Sutra Sthana*, which refers to the vessels through which blood flows through the process of *Sarana Kriya*. *Sira* are classified into four categories i.e. *Aruna Sira*, *Sweta Sira*, *Lohita Sira* and *Neela Sira* which correspond to the three *Doshas* as well as *Rakta*. Based on the criteria of suitability for venesection (*Siravyadha*), *Sira* can also be divided into two categories, i.e. *Vedhya Sira* and *Avedhya Sira*. According to *Sushruta Acharya*, there are 700 *Sira* found in human body out of which 602 *Sira* are really *Vedhya* and 98 *Sira* are *Avedhya*. Though *Vedhya Sira* can be punctured for bloodletting purpose, puncturing *Avedhya Sira* can cause serious or even fatal complications. Since *Siravyadha* is indicated in the treatment of many disorders, therefore understanding of *Avedhya Sira* is essential in order to perform *Siravyadha* safely. Present article explains the clinical and anatomical importance of *Avedhya Sira*, also discusses modern correlation of these concepts.

KEYWORDS: *Ayurveda*, *Siravyadha*, *Vedhya Sira*, *Avedhya Sira*, *Bloodletting*.

INTRODUCTION

Sira is defined as the blood vessels of the body that are similar to veins and are believed to transport blood throughout the body as per Ayurvedic texts. Among such vessels, *Neela Sira* is said to facilitate the flow of impure blood towards the heart. *Acharya Sushruta* described *Nabhi* as the main source of *Sira*, where they are thought to carry the *Doshas* to every part of the body, thus, acquiring the name of *Saravaha Sira*. The movement of blood in these vessels is described in light of the theory of *Sarana Kriya*.^[1-3]

Siravyadha, in reference to venesection, is an important parasurgical treatment spoken of in the context of *Raktamokshana*, in which a blood vessel is perforated to remove the pathological blood, vitiated *Doshas* and treatment of various diseases like *Unmada*, *Vishvachi* and *Apasmara*, etc. *Acharya Sushruta* categorizes *Sira* as depicted in **Figure 1**, based on their susceptibility of venesection.^[3-5]

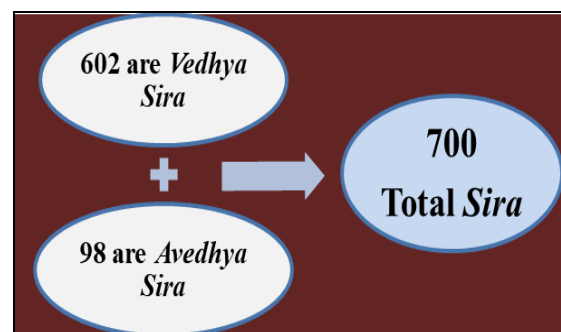


Figure 1: Numbers of *Vedhya* and *Avedhya Sira*.

There are 700 *Sira* in the human body, of which 602 are *Vedhya Sira* and 98 are *Avedhya Sira*. Only *Vedhya Sira* should undergo therapeutic venesection; puncturing an *Avedhya Sira* is strictly forbidden because of serious complications, heavy bleeding, and damage to important structures or even death. *Siravyadha* to be practiced safely, *Avedhya Sira* must be accurately identified. *Avedhya Sira* found in various parts of the body, their

anatomical position and therapeutic importance offer crucial assistance during surgical interventions. A thorough knowledge of these vessels helps to prevent unintentional harm. *Acharya* stressed that the basis for safe and efficient surgical and parasurgical procedures is a thorough understanding of anatomy. *Sushruta Sharira Sthana's* chapters *Sira Sharira* and *Siravyadha Vidhi* emphasize the significance of anatomical accuracy in venesection.^[4-6]

Anatomical View on Avedhya Sira

Shakha, *Koshtha* and *Urdhvajatrugata* are the main anatomical regions into which the 98 *Avedhya Sira* are divided as follows.

- ✓ There are 50 *Avedhya Sira* in the *Urdhvajatrugata* region.
- ✓ There are 32 *Avedhya Sira* in the *Koshtha*.
- ✓ There are 16 *Avedhya Sira* in the extremities.

The abundance of *Avedhya Sira* in the head and neck emphasizes the existence of several important neurovascular and vascular structures where unintentional damage could have serious or fatal repercussions. According to traditional Ayurvedic texts, puncturing an *Avedhya Sira* during *Siravyadha* might result in severe bleeding, loss of feeling, neurological

damage, deformity, unconsciousness, paralysis, or even death. As a result, during therapeutic bloodletting, these veins need to be properly recognized and shielded.^[5-7]

The contemporary anatomical understanding of main arteries, veins, venous sinuses, and neurovascular bundles that are meticulously preserved throughout surgical treatments bears a striking resemblance to the Ayurvedic philosophy of *Avedhya Sira*. Modern surgery now acknowledges that damage to these structures may result in fatalities, neurological impairments, ischemia, catastrophic hemorrhage, or permanent disability. As a result, the traditional idea of *Avedhya Sira* shows exceptional anatomical relevance and enhances contemporary concepts of surgical and vascular anatomy. The safety and accuracy of *Siravyadha* during *Raktamokshana* and other parasurgical procedures can be enhanced through the deep understanding of anatomical positioning of *Avedhya Sira*.^[4-6]

Distribution of Avedhya Sira and Related Complication

The *Avedhya Sira* are found all over the body and are connected to particular anatomical areas as mentioned in **Table 1**.

Table 1: Distribution of Avedhya Sira.

Region	Number of Avedhya Sira	Description
<i>Urdhvajatrugata</i>	50	Blood vessels located in the head and neck region
<i>Koshtha</i>	32	Critical blood vessels situated in the thorax, abdomen, and pelvic region
<i>Shakha</i>	16	Important blood vessels present in the upper and lower limbs

There are sixteen *Avedhya Sira* in the extremities (*Shakha*), including *Jaldhara*, which corresponds to the big saphenous vein in the lower limb and the cephalic vein in the upper limb. Damage to these vessels may result in significant blood loss because of draining from the dorsal venous arch. *Urvi Sira*, symbolized by the femoral vessels in the lower leg and the brachial vessels in the upper limb, which are linked to severe bleeding and can be lethal when damaged. *Lohitaksha Sira*, which includes the profunda femoris in the lower limb, the axillary vessels in the upper limb, and the deep branches of the femoral artery in the lower limb, are regarded as extremely vital, and puncturing them might cause fatal blood loss (*Lohitakshayena Maranam*).

There are 32 *Avedhya Sira* have been described in the *Koshtha*, damage to *Vitapa Sira*, which is associated with the ovarian or testicular vessels, may result in gonadal necrosis. Necrosis of the gluteal muscles may result from *Katiktaruna Sira*, which corresponds to the gluteal vessels. Severe bleeding and poor venous drainage are linked to *Parshva Sira*, which is located along the lateral thoracoabdominal area. Nerve damage and paralysis may result from injury to *Pristha Sira*,

which correspond with the subscapular vessels. While damage to *Vaksha Sira*, which corresponds to the coronary, internal mammary, intercostal, and lateral thoracic vessels, may negatively impact cardiac function and thoracic circulation, *Udara Sira*, which is represented by the epigastric vessels, is prone to excessive bleeding.^[2-4]

Due to the abundance of important neurovascular structures in this area, the *Urdhvajatrugata* (head and neck) region has the maximum number of *Avedhya Sira* (50). Because of their intimate connection to important organs, *Marma Sangya Sira*, which correspond to the internal and external carotid arteries and jugular veins, are regarded as extremely vital. Damage to these vessels can be fatal. Puncturing the *Krikatika Sira* (occipital vessels), *Vidhura Sira* (post-auricular vessels), and *Sandhidhamani Sira* (internal maxillary vessels) might result in serious problems, such as stiff neck (*Manyastambha*).^[3-5]

If damaged, *Rasavaha* and *Vagvaha Sira*, which are symbolized by the profunda linguae vessels, may result in tongue necrosis. The angular artery and vein, or

Aupanasika Sira, are prone to severe bleeding, especially in Little's area. After an injury, *Apanga Sira*, symbolized by the zygomaticotemporal artery, are linked to visual impairment. Delicate auditory structures may be impacted by damage to *Shabdavahini Sira*, which corresponds to the posterior auricular and tympanic vessels. The superficial vessels of the forehead, scalp, and temporal region are represented by *Kesanugata*, *Avarta*, *Sthapani*, *Utkshepa*, *Simanta*, and *Adhipati Sira*. These vessels are clinically significant because damage to them can cause severe bleeding, impaired scalp drainage, and damage to delicate cranial structures.^[5-7]

Modern View

By identifying corresponding structures such as major arteries, vital veins, venous sinuses, and neurovascular bundles that must be protected during invasive procedures to prevent massive hemorrhage, neurological deficits, ischemia, or fatal outcomes, modern anatomical and surgical knowledge strongly supports these ancient principles. The carotid arteries, internal jugular veins, facial artery branches, and pterygoid venous plexus are in close proximity to the forbidden *Sira* in the head and neck (*Urdhvajatrugata*) region, where an unintentional puncture could result in serious bleeding, stroke, cerebral ischemia, or deep tissue hematoma. In a similar vein, Ayurveda forbids puncturing veins close to *Marma* points and joints (*Sandhi*), including the ankle and wrist. These locations correspond to the brachial artery, median nerve, and deep palmar arterial arches in the upper limb, where damage may cause irreparable ischemic hand damage or nerve paralysis. Because of the possibility of harming the saphenous nerve, delayed wound healing, and ulcer formation in the gaiter area, contemporary vascular surgeons likewise avoid cannulating this area. The Ayurvedic ban in the thoracic and abdominal regions is similar to the contemporary avoidance of the internal mammary, intercostal, coronary, and other major thoracoabdominal vessels because damage to these structures can result in potentially fatal consequences like hemothorax or cardiac tamponade. Furthermore, the current understanding of arteries, veins, capillaries, and the lymphatic system is quite similar to the Ayurvedic notions of *Raktavaha Sira* and *Srotas*, which stand for blood-carrying vessels and fluid-conducting channels.^[8-10]

Clinical Importance

Unintentional punctures of *Avedhya Sira*, which correspond to important arterial and neurovascular systems, can cause significant bleeding, neurological impairments, functional impairment, deformity, or even death. The requirement for careful anatomical expertise while undertaking therapeutic operations is very important. Modern concept of main arteries, veins, and neurovascular bundles that need to be protected during surgical procedures show a striking resemblance with the traditional description of *Avedhya Sira*. Therefore, the safe practice of *Siravyadha*, *Raktamokshana* and other parasurgical techniques requires a full understanding of

both modern and Ayurvedic anatomy. Ayurvedic surgical practice can be made safer, less complicated, and more scientifically relevant by combining traditional anatomical concepts with contemporary surgical understanding.^[10-12]

CONCLUSION

Ayurvedic literature describes *Sira* in detail in *Sharira Sthana* and uses the idea of *Saranat Sira* in *Sutra Sthana* to explain their practical relevance. *Aruna*, *Neela*, *Shweta*, and *Lohita* are the four forms of *Sira* that correspond to *Vata*, *Pitta*, *Kapha*, and *Rakta*, respectively. Precise understanding of the anatomical position of *Avedhya Sira*, where venesection is strictly contraindicated, is necessary for the successful and safe execution of *Siravyadha*.

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