



THE CONCEPT OF AN IDEAL SURGICAL WARD (VRANITAGARA): AN INTEGRATION OF AYURVEDIC AND MODERN PERSPECTIVES

Dr. Suneel Kumar Rajpoot^{1*}, Dr. Bhaskar Soni², Dr. Durgesh Kumar³, Dr. RatanSingh⁴

^{1*}Assistant Professor, Department of Shalya Tantra, Institute of Ayurveda ,Major SD Singh University Farukhabad Uttar Pradesh 209749, Email:- Mahan.suneel72@gmail.com

²Assistant Professor, Department of Shalya tantra, Sri Ganganagar college of Ayurvedic Science and Hospital, Sri Ganganagar, Rajasthan 335002, Email.id –sonibhaskar1994@gamil.com

³Assistant Professor, Department of Shalya Tantra, Institute of Ayurveda ,Major SD Singh University Farukhabad Uttar Pradesh 209749, Email:-Durgeshsaini776@gmail.com

⁴Associate Professor, Department of Swasthavritta Evam Yoga, Institute of Ayurveda Major SD Singh University, Farrukhabad ,U.P., 209749, Email ID-singh.ratan21685@gmail.com, Orchid ID-0000-0002-6938-575X

***Corresponding Author:** Dr. Suneel Kumar Rajpoot

*Assistant Professor, Department of Shalya Tantra, Institute of Ayurveda ,Major SD Singh University Farukhabad Uttar Pradesh 209749, Email:- Mahan.suneel72@gmail.com

Abstract

The concept of an ideal surgical ward has evolved from the ancient Ayurvedic description of Vranitagara to the modern evidence-based hospital unit. Vranitagara, described in the Sushruta Samhita, emphasized hygiene, ventilation, psychological support, diet, and spiritual well-being—principles that align closely with current standards for surgical wards. This article explores the traditional design and management of Vranitagara and integrates it with modern surgical ward requirements to create a holistic model of patient-centered care.

KEYWORDS:- Vranitagara, ideal surgical ward, Vranitopasaniya

Introduction

Ayurveda, India's ancient system of medicine, provides detailed insights into surgical care through texts such as the Sushruta Samhita. The Vranitopasaniya Adhyaya (Sutrasthana, Chapter XIX) elaborates on the Vranitagara—a specialized chamber for treating the wounded (Vranita)¹. This concept mirrors the objectives of modern surgical wards: maintaining asepsis, facilitating rapid recovery, and ensuring patient comfort. Integrating these time-tested principles with contemporary evidence-based design can help redefine the standards of surgical care.

Design and Environment

According to Sushruta, the Vranitagara should be located in a clean, well-ventilated area, protected from wind, dust, and excessive sunlight². Modern design echoes this principle through controlled ventilation, natural lighting, and infection control architecture. Current guidelines recommend spacing beds 2.5–3 meters apart to prevent cross-infection and ensure patient privacy³. Both systems recognize that an ideal environment promotes healing and psychological well-being.

Hygiene and Infection Control

Ayurveda prescribes fumigation of the Vranitagara twice daily with mustard, neem, ghee, and salt to maintain asepsis—an early form of sterilization⁴. Similarly, modern surgical wards implement strict infection control protocols including hand hygiene, sterilization, PPE use, and antibiotic stewardship programs^{5,6}. Isolation facilities in both systems underscore the emphasis on preventing the spread of infection.

Staffing and Organization

In ancient practice, the physician supervised the wounded directly, ensuring discipline and personal hygiene⁷. Modern surgical wards employ multidisciplinary teams comprising surgeons, anesthetists, nurses, and physiotherapists. A recommended nurse–patient ratio of 1:4 during the day and 1:6 at night promotes efficient care delivery⁸. Both approaches stress the importance of supervision, discipline, and standardized care.

Psychological and Emotional Well-being

Sushruta emphasized the presence of affectionate companions to encourage morale and recovery⁹. Modern patient-centered care also prioritizes communication, emotional support, and privacy to maintain dignity and psychological comfort¹⁰. The integration of these concepts highlights the enduring importance of compassion and empathy in surgical recovery.

Diet, Lifestyle, and Spiritual Care

Ayurvedic guidelines recommend light, digestible foods, avoidance of alcohol and heavy meals, and regulation of sleep and activity to prevent dosha aggravation¹¹. Modern wards adopt similar dietary care through nutrition therapy and early mobilization. Rituals such as Raksha Karma—protective spiritual practices—symbolize holistic healing, corresponding to today’s focus on psychosocial and spiritual health.

Equipment and Facilities

Modern surgical wards are equipped with handwashing stations, dressing trolleys, oxygen and suction units, and emergency resuscitation systems¹². Digital monitoring and electronic records further enhance safety and efficiency¹³. While Vranitagara relied on simplicity and cleanliness, the spirit of preparedness and order remains consistent.

Discussion

Both Ayurvedic and modern concepts of surgical wards share common foundations—cleanliness, ventilation, diet, hygiene, emotional support, and patient safety. The Vranitagara serves as an early prototype of patient-centered care that integrated physical, mental, and spiritual well-being. Merging these ancient and modern principles can yield a comprehensive framework for contemporary surgical wards emphasizing holistic healing.

Conclusion

The Vranitagara of Ayurveda and the modern surgical ward embody a shared philosophy: healing through cleanliness, comfort, discipline, and compassion. Incorporating classical wisdom with modern scientific design can create sustainable, efficient, and healing hospital environments.

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