

आरोग्यमंदिर

धृतापेक्षर

पत्रिका

October 2012

AROGYAMANDIR PATRIKA



Vyadhipareeksha Visheshank

Editorial

Today 70% of the patients consulting the Ayurvedic physician for the treatment often share with the Chikitsak, the history of their disease and the type of the treatments they have taken in the quest of finding a cure for their disease.



Some patients carry files of examination reports, saying that they have gone through complete check up and have not yet found desired relief through medicines of other pathies and therefore have now come to an Ayurvedic physician.

In such situation, the upcoming Vaidyas, many a times, find themselves in dilemma. In the case of senior and renowned Vaidyas, the patients are mentally prepared to hear whatever the Vaidyas say but the upcoming Vaidya may find it difficult to examine the patient and the disease only by Ayurvedic Padhatti and ignore the reports that might be kept in front of them.

Here, we have tried to put forth our views on the way in which the Ayurvedic physician should handle such situations and how we can approach the disease and the diseased for the purpose of Chikitsa, without completely ignoring the modern test reports. All of these topics will be discussed in this issue of Arogyamandir Patrika Vyadhipareeksha Part -1 which is being published as per the suggestions received from your side.

We hope this endeavour of ours will come upto your expectations.

Yours faithfully
Vd. Shailesh Nadkarni

Vishaya Pravesh

Every Physician surely wants to be successful in ones Medical practice and therefore uses best of the best medicines for treating every patient. Often the patient, who goes to the Ayurvedic Physician has already gone through various treatments & examination procedures alongwith Allopathic treatment before opting for Ayurvedeeya Chikitsa and Chikitsak. Even after so many years of Ayurveda having being recognized as 'Bharateeya Chikitsa Padhati', it wouldn't be wrong to say that patient prefer going through modern treatment & examination procedures before coming for Ayurved. In other words, even though looking at the geographic diversity of India, this may not be applicable to all the places, more or less similar condition is seen across the country. The patient usually carries various examination reports with him while visiting Ayurvedeeya Physician.

In such condition, it is apt for the Chikitsak to take as much benefit of those reports as possible, but at the same time Ayurvedic Physician should not completely depend on them. These reports should be used to confirm the diagnosis or Nidaan done on the basis of Ayurvedic Principles. The topic 'Vyadhi Pareeksha' has been selected for this issue keeping these points in mind.

Parichay

व्याधेःपरिक्षा

Vyadhipareeksha means examination of the disease i.e. Vyadhi. It would be appropriate to include all the tools or means of Vyadhipareeksha used to gather the information related to the Vyadhi and are helpful in the Diagnosis of the Vyadhi. Vyadhipareeksha helps procure the knowledge regarding the Hetu, Lakshan and Samprapti of the Vyadhi which is very important for the precise or accurate treatment of any disease. To understand the meaning behind any word, it is important & necessary to understand its 'Nirukti' or its evolution. Following 'Nirukties' of the word 'Pareeksha' are found in the Ayurvedic Texts.

लक्षितस्य यथालक्षणमुपपद्यते न वेति
प्रमाणैरवधारणम्। वस्तुस्वरूपनिर्णयः।

आयुर्वेदीय शब्दकोश ८३१

'Pareeksha' is the process to see if the Lakshanas are present in the same form as they have been described and examine their nature with the help of Praman and Tarka.

परीक्ष्यते व्यवस्थाप्यते वस्तुस्वरूपमनयेति
परीक्षा प्रमाणात्। चक्रपाणि

The tool or the medium with which the nature of a substance is examined is known as Pareeksha.

Any type of Pareeksha in relation to the Vyadhi which proves to be helpful in understanding, the nature of the Vyadhi is known as 'Vyadhipareeksha'. Vyadhipareeksha can be successful only when the person examining or the person using it, is skillful and wise enough. Acharya Charak has described the qualities of the Pareekshak or the examiner as follows:-

श्रुतं बुद्धिः स्मृतिर्दाक्ष्यं
धृतिर्हितनिषेवणम्।
वाग्विशुद्धिः शमो धैर्यमाश्रयन्ति
परीक्षकम्॥

चरक सूत्रस्थान २८/३७

Pareekshak i.e. the Chikitsak should have complete Knowledge of the Shastra, should be intelligent, earnest with very good memory.

He should be ready to accept Hitakari things, should be soft spoken with clear speech, should be very patient by nature. Chikitsak with such qualities can successfully diagnose and treat the Vyadhi.



2 Vyadhi Pareeksha

परीक्षायास्तु खलु प्रयोजनं प्रतिपत्तिज्ञानम्। चरक विमानस्थान ८ / १३२
 The purpose of Pareeksha Vidhi is to understand reasons behind the Vyadhi & the body parts/organs affected by it. It is clear that the above statement is made in relation to Vyadhi and Rogi Pareeksha. Further Acharya has defined Pratipatti as

प्रतिपत्तिर्नाम यो विकारो यथा प्रतिपत्तव्यस्तस्य तथाऽनुष्ठानज्ञानम्।

चरक विमानस्थान ८ / १३२

To understand and treat any Vyadhi according to its Utpatti and Lakshan described in Ayurved is known as Pratipatti. Vyadhipareeksha is the means to procure the above mentioned knowledge. Hence, Vyadhipareeksha is of exceptional importance in Ayurved Shastra. Vyadhipareeksha is the basis for successful treatment and its knowledge is mandatory for every Vaidya. Importance of Vyadhipareeksha is highlighted in the undermentioned verse by Acharya Sushruta.

आमं विपच्यमानं च सम्यक् पक्वञ्च यो भिषक्।

जानीयात् स भवेद्वैद्यः शेषास्तस्करवृत्तयः ॥ सु. सू. १७/११

A physician, who can clearly distinguish between Ama, Vipachyaman and Pakwavastha of Shophavyadhi or Vranashopha should be considered as Vaidya the rest should be considered as fraudulent or bogus. Here, Vranashopha is taken as an example. In reality this verse depicts the importance of Vyadhipareeksha in procuring detailed information and identification of the Avastha of Vyadhi.

इह खलु व्याधीनां निमित्त.....क्रियायाः । च. वि. १/३

The importance of Vyadhipareeksha has been highlighted in this Shloka, which is followed by Rogi Pareeksha (also known as Vyadhit Pareeksha). The explanations of other examinations like Roga - Rogi Pareeksha has been explained in quite elaborately. As the examination of both Vyadhi and Vyadhit needs to be prioritized before actual treatment, Viman Sthana precedes Chikitsa Sthana.

तस्माद् दोषादिमानज्ञानार्थं विमानस्थानमुदेक्ष्यामोऽग्निवेश! ॥३॥

चरक विमानस्थान १/३

Vimansthana has been designed specially for the detailed knowledge of the Maana of various aspects of health and disease, Maana here means measure.

In Charak Samhita, Acharya Charak has clearly stated while quoting the purpose of Vimansthana that person should be well equipped with the knowledge of Poorvaroop, Roopa, Upashaya, Sankhya, Pradhanya, Vidhi, Vikalpa, Bala, Kala Bheda of any of the Vyadhi and only after that the Chikitsak should gather information of Maana of Vatadi Dosh, Aushadhi, Desha, Kala, Bala, Sharir, Sara, Ahara, Satmya, Satva, Prakruti, Vayu as 'दोषादिमानज्ञानायत्तत्वात् क्रियायाः।' In simple terms, the Chikitsa is expected to depend on Maana of Doshadi constituents of the body and thereby the appropriate Maana of Aushadhi Dravyas.

सर्वेषां व्याधीनां वातपित्तश्लेष्माणं एवं मूलं । सु. सू. २४/९

All types of diseases be it Nija or Agantuja, Sharirik or Manasik, they are in no way independent from Tridoshas like Vata, Pitta, Kapha. In other words, Tridoshas are the causative factors of all the diseases. Hence, Vyadhi Chikitsa is possible only when the

Vaidyas can properly identify the Tridosha Sthiti. Vyadhipareeksha not only tells us about the Tridosha Sthiti and Avastha but also educates us on the effect of Tridoshas on the Sharirik Dhatu, Mala and Srotas etc. Vyadhipareeksha tells us about the Vyadhi Samprapti which helps Vaidya to treat the disease successfully.

Various Vyadhi Pareekshas

Acharya Charak has mentioned Trividha Vyadhipareeksha in the Vimanasthana. According to us, this type of method of Pareeksha Vidhi should be considered as the chief method of Vyadhipareeksha because this method incorporates all the aspects of examination. All the other methods of Vyadhipareeksha can be included under this broad and robust method. Hence, we will start the topic with Trividha Vyadhipareeksha.

त्रिविधं खलु रोगविशेषविज्ञानं भवति; तद्व्यथा - आप्तोपदेशः, प्रत्यक्षम् अनुमानं चेति ॥

चरक विमानस्थान ४

The three main resources of knowledge of the Roga or Vyadhi are 1. Aptopadesh 2. Pratyaksh 3. Anuman Amongst these, Aptopadesh holds the foremost position. Pareeksha is carried out with the help of Pratyaksh and Anuman on the basis of the knowledge acquired from Aptopadesh. In practice, the knowledge that we gather from Ayurvedeeya Grantha is known as Aptopadesh. The person who has this knowledge can examine the Vyadhi with the help of Pratyaksha and Anuman. Hence Acharya Charak has said

तस्माद् द्विविधा परीक्षा ज्ञानवतां प्रत्यक्षम्; अनुमानं च:.....च.वि. ४/५

For knowledgeable individual – one who knows & follows the teachings of Aptopadesh, there are only two types of examinations.

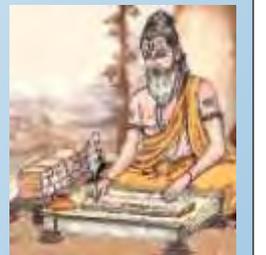
A. Pratyaksha and B. Anuman

Ayurved is a vast ocean of knowledge. Therefore, every time it is not possible for most of the well-read Vaidyas, even scholars to have detailed knowledge of all the Vyadhis. In such situations, it is not a wrong thing at all to refer to the Ayurvedic texts for Vyadhi Nidan and Pareeksha. Therefore, according to us today Trividha Vyadhipareeksha should be considered fundamentally appropriate and extremely useful. Further, we have discussed these three in detail.

Aptopadesh-

तत्राप्तोपदेशो नाम आप्तवचनम्.. चरक वि. ४

Apta are those individuals whose statements are found to be true on every ground, who have elephantine memory, who can true on every ground, who have elephantine memory, who can distinguish between Yogya – Ayogya and has precise knowledge of Uchit – Anuchit and doesn't get affected by the feelings like love and hatred. Statements made by Aptas are known as Aptopadesh. As their statements are complete with the above mentioned qualities, they are reliable and it is appropriate to accept them in the form of fundamental principle.



रोगमेकैकमेवंप्रकोपण..... चरक विमानस्थान ४/६

Aptopadesh conveys to us the Dosha Prakopadi Avastha in each Vyadhi, Roga Prakruti or Swabhava, Roga Utthana, Roga Akrti, Roga Sthana, Pain due to the Vyadhi tells us about Roga Lakshan, Roga Vishista Shabda, Sparsh, Roopa, Rasa and Gandha, Roga Upadrava and Anishta Lakshan conveys the stages and conditions like, Roga Vruddhi, Udarka etc. Alongwith this, Aptopadesh also throws light on the type of Chikitsa and Sadhyasadyata of the Vyadhi. In day to day practice, we all use and should use the knowledge that we get from 'Aptopadesh'. It is said that our eyes see only those things which are already known to our mind or brain.

The same point has been stressed and highlighted by Aptopadesh. For example, if the Vaidya has Granthokta Knowledge of Kamala Vyadhi Swaroop, Sthana, Lakshan etc., then he can diagnosed the Kamala Vyadhi Rugna by observing him/her. The Chikitsak will be able to treat the Vyadhi successfully because of his/her knowledge of Vyadhi Samprapti and Granthokta Chikitsa.

The knowledge acquired from the Granthas and the reference books holds its own importance even in Modern Science. The books like Gray's Anatomy, Gyton's Physiology etc are of great use & even today hold their position in medical curriculum. But these cannot be included in the Aptopadeshjanit Dnyan because Aptopadesh is Trikalabadhit and it stands true in Bhuta, Vartamaan and Bhavishya Kala. Even after thousands of years the principle in the Ayurvedic Granthas stand true whereas the discoveries of the Modern Science dated ten years back are found to be outdated today.



Pratyaksh -

प्रत्यक्षं तु खलु तद् यत् स्वयमिन्द्रियैर्मनसा चोपलभ्यते।

चरक विमानस्थान ४

The general notion is that the knowledge which is Indriya Gochar, acquired with the help of Dnyanendriyas is called as Dnyan. But the truth is that all the Dyan or knowledge cannot be procured through Pratyaksh. Charakacharya has aptly described this in few words as "प्रत्यक्षं हि अल्पं अप्रत्यक्षं अनल्पम्", The knowledge that is acquired with the help of Indriya and Mana is known as Pratyaksh. The five Dnyanendriyas Chakshurendriya, Shrotrendriya, Ghranendriya, Rasanendriya and Sparshanendriya are the sources for acquiring knowledge of Roopa, Shabda, Gandha, Rasa and Sparsha respectively. However, this is possible only with the union between Indriya and Mana.

Mana is of extraordinary importance in the process of Yathartha Dnyan.

आत्मा मनसा संयुज्यते, मनः इन्द्रियेण, इन्द्रियः अर्थेन, ततः ज्ञानम् । चरक

Indriyas are incapable of Dnyangrahan without the presence of Mana. There is equal importance of the Indriya and Mana in the process of Dnyangrahan through Pratyaksh.

Acharya Charak has mentioned Vyadhi Pareeksha with the help of Panchanendriya in Vimanasthana Adhyay 4 in Sootras, which is being presented in a tabular form below –

Indriya	Pareekshya Vishaya
Shrotrendriya	Antrakujan (Peristalsis), Sounds during the joint movements, Disorders related to vocal cords eg. Swarabhed, other sounds related to the body.
Chakshurendriya	Colour, Quantum, Shape, Complexion, Normal and Abnormal conditions of the body and all other things visible to eyes.
Ghanendriya	Normal & Abnormal smell or odour arising from the body of the patient.
Sparshanendriya	Identifying through touch the Prakrut and Vikrut Sparsha of the body.

Here Acharya Charak has mentioned in the beginning itself.

सर्वैरिन्द्रियैः सर्वानिन्द्रियार्थानातुरशरीरगतान् परीक्षेत् अन्यत्र रसज्ञानात्;

चरक विमान ४

As a rule, knowledge can be acquired directly with the help of all Indriyas, the exception being Rasanendriya. All the substances, known or unknown cannot be brought in contact with Rasanendriya for obvious reasons therefore, such information that is necessary but cannot be procured through Rasanendriya can be gathered with the help of Prashnan Pareeksha i.e. by formulations and posing appropriate questions to the patients. On the basis of Pratyaksh Dnyan, Rasa is the Vishaya of Rasna or Rasanendriya but it is not possible always to examine every component with Rasna for the purpose of Rasagrahan i.e. it is not convincing to actually taste every component for Pratyaksh Dnyan. Hence, it can be done only by taking detail history from the patient and then can be extrapolated to the known knowledge which can be classified under Anuman. For e.g. – Yukka or lice leaving the body suggest Sharir Vairasya and flies getting attracted to the body suggest rise in the Sharir Madhurya.

Shadvidha Pareeksha described by Sushruta and can again be considered as another type of Pratyaksha Pareeksha.

षड्विधो हि रोगाणां विज्ञानोपायः ।

तद्यथा - पञ्चभिः श्रोत्रादिभिः प्रश्नेन चेति। सु. सू. १०/४

Panchadnyanendriya and Prashna (History-taking) are the six means of gathering information of any disease. Vaidya has to procure information regarding Desha, Kala, Satmya, Vyadhi Hetu, type of pain, Bala, Agni, Vata, Mootra, Mala, duration of the disease through detailed history-taking. Although Acharya Charak has not mentioned 'Prashna' individually, he has mentioned it during Rasa Pareeksha.

After seeing the similarity between the Pratyaksha Pareeksha by Acharya Charak and Shadvidha Pareeksha by Sushrutacharya, it can be easily seen that they compliment each other.

In addition, Acharya Sushruta has mentioned a special thing, which is not seen in any other text.

4 Vyadhipareeksha by Panchendriya

आत्मासदृशेषु विज्ञानाभ्युपायेषु तत्थानीयैर्जानीयात्। सु. सू. १०/५

If Vaidya is devoid of any one of the Indriyas, then he should get the information related to that Indriya by questioning the relatives of the patient. Acharya Sushruta had taken complete care that handicaps of a Vaidya should not hamper the Vyadhipareeksha. This is the reason why history taking is considered to be of great importance alongwith Panchendriya Pareeksha.

The following verse clearly depicts the importance of Indriya & Prashna :-

मिथ्यादृष्टा विकारा हि दुराख्यातास्तथैव च।
तथा दुष्टरिमृष्टाश्च मोहयेयुश्चिकित्सकम् ॥६॥ सु.सू. १०/६

In case the patients have not been perfectly examined on the basis of Panchendriya Pareeksha or if the information provided to the Vaidya during history taking by the patient himself and/or his relatives is incomplete, the Vaidya would be in confused state of mind while treating such patients.

Following are the examples of the clinical diagnosis with the help of Panchendriya and Prashna Pareeksha –

Shrotrendriya	- Auscultation
Grahndendriya	- Various smells emanating from body wounds etc. e.g. gangrene
Sparshandendriya	- Checking dryness, laxity of the skin in dehydration.
Chakshurendriya	- Yellowish discolouration in eyes & urine in case of jaundice
Prashna	- History taking

Anuman - अनुमानं खलु तर्को युक्त्यपेक्षः । च. वि. ४ /४

The knowledge that is acquired on the basis of reasoning is known as Anumanjanya Dnyan. The things that can not be actually seen or examined should be judge on the basis of Anuman. Aptopadesh tells us as to which of the things and how should be understood by the means of Anuman or reasoning.

Acharya Charak has given detailed explanation on the things that should be learnt by Anuman. For e.g. Agni Pareeksha has to be conducted on the basis of Jaranshakti or digestion power, Bala Pareeksha on the basis of the capacity to exercise and Buddhi Pareeksha on the basis of Grahanshakti or intelligence etc.

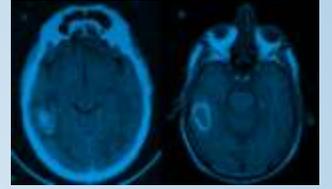
It is a real test of a Chikitsak to examine the disease on the basis of Anuman as it is a way to verify his knowledge both Shruta (things learnt from Apta or from teachers) and Anubhut Dnyan. The verse 'प्रत्यक्षं ही अल्पं अप्रत्यक्षं अनल्पम्' clearly states that Pratyaksh which means the things that are seen or experienced through any of the Dnyanendriyas or are Dnyanendriya Gochar are very few whereas the things that are not Dnyanendriya Gochar are huge in number. Therefore, Anuman Praman is of unique importance for the accurate diagnosis of the disease. Most of the Psychological disorders are diagnosed on the basis of Anuman Pareeksha. History taking is extremely important in gaining information through Anuman Praman. Anuman of the Vyadhi can be done only after questioning the patient. For e.g. Agni Pareeksha can be done by questioning and understanding



the digestion power of the individual. In Modern Science too, Anuman or presumption plays important role in the process of Vyadhipareeksha. Today due to availability of Modern equipments and technologies the information that is acquired on the basis of Pratyaksh has got enhanced manifold and the deformity of any part of the body can be actually seen with the help of X-ray, CT – Scan, MRI, Ultrasound / Sonography etc. However, even today there are Chikitsaks, who diagnose the disease

only on the basis of Anuman, especially in the rural region, where the Modern amenities or equipments may still not be available. For e.g. Appendicitis or Antrapocchashotha is diagnosed on the basis of pain in the right iliac fossa (Rovsing's sign), Rebound tenderness etc.

From the above explanation, it is clear that in the diagnosis of any disease, all the three - Aptopadesh, Pratyaksh and Anuman are equally important. e.g. on the basis of information of Granthokta Lakshan and Samprapti of Kamala Vyadhi as per Aptopadesh, Chikitsak can observe signs like Haridranetra, Haridratvak, Shwetabh Nakha, Aanan etc. by Pratyaksha Pareeksha and Lakshanas like Hatendriyata, Avipak, Aruchi etc by Anuman Pareeksha and can precisely diagnose and treat the Kamala Vyadhi.



Therefore, Acharya Charak says

ज्ञानबुद्धिप्रदिपेन यो नाविशति तत्त्वित् ।

आनुरस्यान्तरात्मानं न स रोगाश्चिकित्सति ॥ च. वि. ४ / ११

The Chikitsak, who fails to examine the patient with the help of Vyadhipareeksha is incapable of understanding the Roga and all the Roga Lakshan as a result of which he fails in treating the Patient. Therefore, its the duty of a Physician or Chikitsak to examine the Vyadhi with the help of Trividha Pareeksha and begin with the treatment only after Vyadhi Vinishchaya or Diagnosis is completed. By following this Principle, the Chikitsak will definitely be successful in treating the disease.

While studying the various methods or tools of Pareeksha from Ayurveedya Granthas, one can observe that at many places, the Acharyas have described the Vyadhi Pareeksha and Rogi Pareeksha together. The Dashavidha, Ekadashavidha, Dwadashavidha Pareeksha by Acharya Charak and Dwadashavidha Pareeksha by Acharya Sushruta are the best examples of this. Although Acharya Charak has mentioned Dashavidha Pareeksha in reference to Rogi Paeerksha in Vimansthana, the Vikruti Pareeksha described in it points towards Vyadhipareeksha.

Therefore, many Chikitsaks find it confusing as at some places Acharyas have explained Vyadhi Pareeksha and Rogi Pareeksha separately while at other points, they have mentioned them together. According to us, this is not a sign of confusion. On the contrary it emphasizes the comprehensive view of our Acharyas. For the complete and proper treatment of the Vyadhi both Vyadhipareeksha and Rogi Pareeksha are

necessary. Both have their own importance. To highlight their individual importance, they have been described separately. However, in practice i.e. while actually examining the patient for treatment, it is important that both of them are concurrently put to use. It is only to emphasize this point that they have taken help of Dashavidha, Ekadashavidha, Dwadashavidha Pareekshas etc.

Knowledge of Ayurved should be useful to both intelligent & average individuals. To deliver this aspect well the Granthas have been carefully designed by our seers. The description of Vyadhipareeksha and Rogi Pareeksha in Ashtang Sangraha is very good example of it. In the first Chapter they have described Vyadhipareeksha and Rogi Pareeksha separately and briefly and further in twelfth Chapter they have described it together. This explanation not only makes it easy to understand but also from the point of view of practice it proves to be useful in Pratyaksha Chikitsa. Further, we will have discussion on the basis of Vyadhipareeksha.

दर्शनस्पर्शनप्रश्नैः परीक्षेताथ रोगिणम् ।

अ. सं. सू. १/२२

The patient should be examined by means of Darshan, Sparshan and Prashnan. The examination like the colour of Mala, Mootra etc, Shotha, Shape & size of the organs and so on can be accomplished through Darshan Pareeksha. The examination like Ushnata in Jwara, Kathinya and Ghanatva in Gulma, Vidradhi etc. can be done using Sparshan Pareeksha. The history of the disease, pain, Kshudha etc. can only be obtained through detailed questioning of the patient i.e. through Prashna Pareeksha.



Out of these, the Darshan and Sparshan Pareekshas are clubbed in Pratyaksha Pareeksha and Prashna Pareeksha is included in Anuman Pareeksha.

Although these are called as 'Rogi Pareeksha', according to us these should be considered as a tool of examination of the Rogi and the Vyadhi he is suffering from. This view is based on the fact that the Roga Pareeksha described by Charkacharya is also conducted with the help of these three means of examination. Though Acharya Vagabhat has described different means of Roga Pareeksha, they are all based on Darshan, Sparshan and Prashnan Pareeksha. The disease invades the Sharir & Mana of the Rogi or both the Sharir and Mana at a time. Hence, Vyadhi Pareeksha should be done by examining the patient i.e. Rogi. Without the patient, Vyadhipareeksha is absolutely impossible. This is the only reason why the Acharyas have described Rogi Pareeksha. In the following verse, Vagbhatacharya has described Vyadhipareeksha and the means or the aids of Vyadhipareeksha together.

रोगं निदानप्रागुपलक्षणोपशयाप्तिभिः ।

अ. सं. सू. १/२२

In other words Nidaan, Poorvarupa, Lakshan, Upashaya and Samprapti are the five means useful in Roga Pareeksha. The same has been described by Madhavnidan more implicitly as

निदानं पूर्वरूपाणि रूपाण्युपशयस्तथा ।

संप्राप्तिश्चेति विज्ञानं रोगाणां पञ्चधा स्मृतम् ॥

मा. नि. १/४

Such being the clarity with respect to Nidan Panchak as seen in Madhavnidan. We will be discussing the Niadan Panchak mainly on the basis of Madhav Nidan.

Nidan

Nidan is the means to know the causative factors of the Roga. **सेतिकर्तव्यता को रोगोत्पादक हेतुः निदानम् ।** In other words, the things that cause the Vyadhi are known as Nidan. Here 'things' includes the food articles (Aahar), the daily regimen and activities (Vihar) and the mental setup (Manas Bhava). Depending on consumption of these causative factors - Nidan/Hetu, the Doshas get vitiated. The excessive vitiation leads to Prakopa - a stage where vitiated Doshas spread all over the body through Srotas - the channels available in the body and can lead to diseases hence, are also known as Rogotpadak Nidan. Acharya Harishchandra in his commentary has described the following four types of Nidan.

1) Sannikrushta Hetu - The immediate factors that are responsible for the disease are called Sannikrushta Hetu. For e.g. Atisar caused due to Mithya (improper) Aahar (diet). Here Mithya Aahar is the Sannikrushta Hetu.

2) Viprakrushta Hetu - These Hetus do not cause immediate disease generation but over a period of time with continuous addition to the stage of vitiation get exhibited after a while leading to Rogotpatti. Such Hetus are known as Viprakrushta Hetu. For e.g. the Kapha accumulated in the body during Hemant - Shishir Rhuu gets aggravated during Vasant Rhuu leading to Kaphaj Vikars.

3) Vyabichari Hetu - These causative factors or Roga Nidan being Durbala or weak are incapable of causing disease on their own but have definite capacity to cause disease. For e.g. strong individual hardly gets affected due to Mithya Aahar - Vihar.

4) Pradhanik Hetu - The causative factors or Nidan that cause diseases irrespective of the Dosh Sanchaya, Prakopa etc. are known as Pradhanik Hetu. Here we find that the time elapsed between the consumption/coming in contact with these Hetus and their effect on the body is direct and immediate. For e.g. Fatal effects of Visha or Poison can be seen immediately.

Apart from these, Acharya Charak has mentioned,

1) Asatmendriyarth Sanyoga 2) Pradnyaparadha 3) Parinaam as the root cause of all the diseases (Sharirik & Manasik)

Nidan can also be differentiated in the following manner

1) Dosh Hetu - Nidan, which are mainly responsible for the Dosh Sanchaya Prakopadi Avastha. e.g. Vataprakopa seen in Varsha Rhuu.

2) Vyadhi Hetu - Nidan, which are mainly responsible for any Vyadhi or are causative factors of Vyadhi. e.g. Mruttika Bhakshan is the Hetu of Pandu Vyadhi.

3) Ubhaya Hetu - Nidan, which are responsible for both the Dosh Prakopa and the Vyadhi Utpatti. e.g. Riding camel/ horse or any other similar carriage (in which lower limbs stay in hanging and dangling position), leads to Vataprakopa and Raktadushti at a time resulting in Vatarakta Vyadhi.

Nidan is also classified as Utpadak/Vyanjak & Bahya/ Abhayantar by some scholars. Anubandhya means Pradhan or Prime Hetu and Anubandha means Gauna or secondary Hetu.

6 Nidan Panchak - Poorvarupa & Roopa

Nidan in this manner has been classified in two important types while, some scholars have considered Anubandha i.e. secondary Hetu as Upadrava.

Importance of Nidan – Nidan is a important tool for Vyadhi Pareeksha. 'Nidanparivarjan' itself, can be considered as the primary/most important first step of Chikitsa - the treatment and hence finding out or understanding the Nidan is extremely important निदान परिवर्जनमेव चिकित्सा। This has been exemplified in the text in a different ways. However, it needs to be confirmed firmly as to the 'Nidan being the correct one before it is to be discarded or avoided. Knowledge of different types of Hetus prove to be helpful in reaching at the precise diagnosis of the disease.

Poorvarupa –

Acharya has described following features of Poorvarupa.

स्थानसंश्रयिणः क्रुद्धा भाविव्याधिप्रबोधकम्।

दोषा कुर्वन्ति यल्लिङ्गं पूर्वरूपं तदुच्यते।।

When Doshas get aggravated due to Roga Utpadak Karan (the disease causative factors) and arrive at the site of Srotovaigunya, they get lodged at that site. In other words, they get Sthanasanshrit at the site of Kha Vaigunaya giving rise to the symptoms which indicate the developing disease. This group of symptoms is known as Poorvarupa.

The symptoms that are seen as Poorvarupa are most of the times vague or unclear. This is so because even though the Poorvarupa develops after the Nidan followed by Dosh Prakupana, the Roga Samprapti, i.e. the vitiated Doshas getting Sthanasanshrit at the level of site of the disease doesn't get completed till this stage. As mentioned earlier, Poorvarupa develops at the stage of Sthanasanshrit by Dosh but the Roga or disease is not completely manifested. Therefore, if the Vaidya is able to identify the Vyadhi or disease that could develop on the basis of Poorvarupa's itself, it can be stopped from developing further and disband it at this stage itself.

Poorvarupa are divided into following two types:

1) Samanya Poorvarupa – Usually are very unclear in nature, as they can only indicate the diseases like Jwara etc. which can get developed/manifested. It is difficult to judge the Dosh Pradhanya from this type of Poorvarupa. E.g. Shrama, Arati etc are the Samanya Poorvarupa of the Jwara.

2) Vishesh Poorvarupa – Dosh Pradhanya of the Vyadhi can be judged from Vishesh Poorvarupa. E.g. – excessive Jumba or yawning indicates Vataj Jwara, Pittaj Jwara can be identified by Netradaha & Kaphaj Jwara from Gaurav. These are more clear and specific than Samanya Poorvarupa and are able to give the physician an idea as to which of the Tridoshas have got involved in Samprapti.

Although a few Poorvaroopa are actually seen, knowledge of the disease that develops from these can be obtained based on Anuman or judgement. Every Vaidya should have knowledge of Granthokta Poorvarupas of every Vyadhi, which can be had only through Aptopadesh and the best Apta is naturally the Granthas - the treatises.

Roopa-

तदेव व्यक्ततां यातं रूपमित्यभिधीयते।

मा. नि. १

When Poorvarupa gets completely manifested, it is known as Roopa. However, there is no such definite rule that all the Poorvaroopas would get exhibited in Roopa. Sometimes few symptoms are seen only in the stage of Poorvarupa and the actual symptoms or Roopa of the Vyadhi are very different from them some times they being exactly opposite. Some scholars have defined the Roopa as the Vyakta Swaroop of the Vyadhi.

One thing that should be kept in our mind is that most of the times all the symptoms of the Vyadhi may not get exhibited at a given time. Some of them may be seen immediately and some may get exhibited at a later stages of the disease. Therefore, we can not consider the Roopa or group of symptom as disease. These may be the reasons for the difference of opinion between the Acharyas regarding the Roopa.

According to us, the Doshadoosha Sammoorcchana that gets manifested after the Sthanasanshrit, should be known as Roopa. Hence, from Roopa we can deduce information of Dosh Pradhanya, their Gati, their effect on the Dhatu, Mala etc. For eg. Drava Mala Pravrutti is the Pratyatma Linga of Atisar, and hence it is described as 'सरत्यतीवासारं' मा.नि. ३। The Arun Varna of the Mala, Phenil, Rooksha Swaroop, Alpamatra, Vedanayuktata, Sashabdata and repeated Malapravrutti after short intervals of time are the symptoms of Vataj Atisar. Here the specific colour and consistency of the Malapravrutti indicates the Vata Dosh Dushti. In Pittaj Atisar the Malapravrutti of Neela/Lohit Varna and Dahayukta, which clearly suggests Pitta Dosh Pradhanya in the Samprapti.

Importance of Roopa in Vyadhipareeksha

Knowledge of Roopa is of great importance in Vyadhipareeksha. It would not be wrong to consider Roopadnyan as the preliminary stage of diagnosis and treatment of the Vyadhi. As mentioned earlier, Poorvaroopa can many of the times be Vague or unclear and therefore, it is not always possible to obtain information of Dosh Pradhanya from them. Roopa on the other hand are Vyakta and clear and therefore are sure indicators of the disease. They also indicate the Dosh Pradhanya in the Samprapti clearly. Hence, Vaidya can begin the treatment on the basis of Roopa and Lakshan.

Often a particular symptom may be seen in one or many diseases, while another disease can have many symptoms. Therefore, it is essential for a Vaidya to have knowledge of all the symptoms of any given disease. If the Vaidya is unfamiliar with these symptoms, he would be in a confused state of mind while treating the disease. Therefore, it is necessary for a Vaidya to have complete knowledge of Granthokta Lakshan of a Roga from the Aptopadesh on the basis of which he could examine the patient and do the differential diagnosis to arrive at precise treatment.

In Modern Science, 'Roopa' is known as 'signs & symptoms' which are considered very important in diagnosis and treatment. But most of the times in Modern Science, the treatment is begins on the basis of these signs and symptoms which can be termed as 'Symptomatic treatment'. This may provide relief to the patient for a short time but would not completely cure the disease which in due course may turn into a chronic one. Therefore, according to Ayurveda for the purpose of Vyadhipareeksha, Nidanpanchak should be followed completely and not till the stage of Roopa.

Roopadyan can be acquired and information gathered by examining the patient using Darshan, Sparshan and Prashnan - the three very important means of eliciting specific information from the person being examined.

Upashaya

Upashaya holds its unique position in Nidanpanchak and many a times during Vyadhipareeksha, it proves to be an important tool in understanding the Vyadhi or Vyadhi Avastha. Acharyas has described it in the following way –

हेतुव्याधिविपर्यस्तविपर्यस्तार्थकारिणाम् ।

औषधान्नविहारणामुपयोगं सुखावहम् ॥८॥

माधव निदान १/८

Any Aushadh, Anna and Vihar that pacifies the disease is known as Upashaya.

Acharyas have described following different types of Upashaya.

1. Hetu Viparit Aushadh, Anna and Vihar
2. Vyadhi Viparit Aushadh, Anna and Vihar
3. Hetuvyadhi Viparit Aushadh, Anna and Vihar
4. Hetu Viparyastarthkari Aushadh, Anna and Vihar
5. Vyadhi Viparyastarthkari Aushadh, Anna and Vihar
6. Hetuvyadhi Viparyastarthkari Aushadh, Anna and Vihar

In short, it can be said that some Aushadh, Anna & Vihar are contrary to Hetu or Vyadhi or both and therefore when used provide relief from the disease. But some Aushadh, Anna and Vihar even after being on equal terms with Hetu, Vyadhi or both are capable of pacifying the disease due to their Guna, Karma and Prabhav. Such items can also be known as Upashaya. Amongst these, the first type of Aushadh, Anna and Vihar is known as Viparit and the second type is known as Viparitarthkari. Acharya Charak has stated Upashaya as a synonym of Satmya 'सात्म्यार्थो ह्युपशयार्थः' । (च. नि. १). A thing that Vaidya should always keep in mind while learning Upashaya is that measure or remedy that provides momentary or short term relief should not be considered as Upashaya. For example, in case of Vataj Trushna, the patient gets instant relief and feels better after drinking cold water but this (i.e. cold water) cannot be considered as a Upashaya. The means by which an individual can stay healthy for a long period of time is known as Upashaya. Not only Aushadh, Anna and Vihar but it would be apt to also include Dosha and Kala within the Upashaya.

Importance of Upashaya

Upashaya can be used with great efficacy for the differential diagnosis of some of the Vyadhis. Sometimes even after using different tools or means of Vyadhipareeksha, it is not possible to successfully diagnose the Vyadhi. In such situations, Vyadhipareeksha should be done by Upashaya – Anupashaya. After giving specific Aushadh, Anna and/or Vihar to the patient & examining its/their effect on the patient, the Vaidya can evaluate the predominance of Doshas in the Vyadhi. For e.g. if patient feels better after following Rookshoshna Aahar - Vihar then Vaidya should presume Kapha dominance in the Vyadhi.

The understanding of Upashaya is not only useful in diagnosis but it is also helpful in treatment. A few remedial measures being similar to the Hetus as far as Gunas of the Hetu though are similar to Vyadhi still prove to be beneficial in treating the Vyadhi due to their specific Guna, Karma and Prabhav. For e.g. in

Pittapradhan Shotha, Ushna Upanaha helps resolve the swelling. Hence, it is necessary for the Vaidya to have knowledge of both theoretical as well as practical use of Viparit and Viparitarthkari Upashaya. In case of lack of information, Vaidya finds himself in a confused state while treating rare or diseases with similar symptoms.

गूढलिङ्गं व्याधिं उपशयानुपशयाभ्यां परीक्षेत् ।

च.वि.अ.४

In Amavastha of disorders like Sandhigata Vata & Amavata, symptoms like Teevra Sandhi Vedhana with Ushna Sparsha are observed. In such situation, Sthanik Snehan would aggravate these symptoms whereas Rooksha Swedan (Valuka Sweda) would provide Upashaya. In this way Upashaya or Anupashaya prove to be helpful in understanding the Vyadhi Avastha.

Samprapti

This can be considered as the final tool of Vyadhipareeksha described in Nidanpanchak. Without understanding the Samprapti or etiology of a disease, it is not possible to diagnose the disease, to understand the stage or condition of the disease and also treat the disease properly. Hence, Samprapti is very important aspect in Vyadhipareeksha. Dosha Sanchaya, Prakopa, Prasar, Sthanasanshraya, Vyakti and Bheda all these conditions are included in Samprapti. Acharyas have described Samprapti as -

यथा दुष्टेन दोषेण यथा चानुविसर्पता ।

निवृत्तिः आमयस्यासौ संप्राप्तिर्जातिरागतिः ॥१०॥ मा. नि. १/१०

The process by which the Vatadi Doshas get vitiated which are the Dhatus, Malas or other components like Lasika etc. they vitiate and how they get the symptoms exhibited is explained by the term Samprapti. Jati and Aagati are the synonyms of Samprapti.

From Samprapti one can understand the type of a Vyadhi, Anshansha Kalpana of the vitiated Doshas, dominance of the Dosha in the Vyadhi, Vyadhi Swaroopa as Swatantra (Anubandhya) / Paratantra (Anubandha), Vyadhi Bala, Kala etc. On the basis of this Samprapti is divided into following 5 types 1.Sankhya 2.Vikalpa 3.Pradhanya 4.Bala 5.Kala. It is necessary for the Vaidya to have knowledge of all these types for the best and accurate diagnosis as well as for deciding the condition of the Dosha and Doosha etc.

Importance of Samprapti Dnyan

Samprapti Dnyan is of exceptional importance in the treatment of any disease especially the Nija once. Even after using the first four tools of Nidanpanchak for Vyadhipareeksha, the accurate diagnosis and treatment is possible only after appropriate knowledge of Samprapti. We have tried to explain this in a simple manner with the help of example of Jwara Vyadhi. The knowledge of the following diseases described by seers is comparatively easy, once Jwara is thoroughly understood in all respect.

- Types of Jwara (Which type of Jwara is this among the eight types?)
- Anshansha Kalpana of Dosha in Jwara (If it is Pittaj Jwara then Pitta is being aggravated or vitiated by which Guna viz. Ushna, Teekshna etc?)

8 Samprapti & Vyadhi Bala

- It is Swatantra Vyadhi or Anubandha Swaropa of an other Vyadhi? (e.g. Jwara is a symptom in Pittaj Shotha)
- How much is the Vyadhi Bala? (If all the Poorvarupas of the Jwara are completely expressed then it is considered as Balavan Vyadhi and Asadhya / Krucchrasadhya to treat)
- Vyadhi Kala – Conditions like Rhutu, Ahoratra, Pachyamaan etc are included in it. (e.g. In the last Prahar of night or after the digestion of the food or if there is rise in the symptoms of the disease during Varsha Rhutu, all these indicate Vata dominance in the disease).

It is clear now that the Vaidya can successfully diagnose and treat the disease best after complete Samprapti Dnyan. If the treatment is planned and initiated without understanding the chain of events from Nidan Sevan to Utpatti of Lakshan then the chances of the patient getting a few symptoms relieved for a short duration and the original disease remaining with the patient is extremely high. Cure of the disease can be expected only if the Chikitsa is based on complete understanding of the disease and not otherwise.

All the five aspects of Nidanpanchak are interdependent and all the five are equally important for complete examination of the Vyadhi. Hence, it is necessary for every Vaidya to have detailed knowledge of Nidanpanchak using the entire information obtained with the help of the five aspects if Nidanpanchak leads to the correct understanding of the disease and hence, even today Nidanpanchak is of great importance in Vyadhipareeksha.

As mentioned earlier, the Chikitsak or Physician is able to diagnose and treat the disease on the basis of Vyadhipareeksha. But one thing that should be understood is that Vyadhi Vinischya doesn't mean giving a name to that disease. Most of the times Vaidya obtains information of the Doshasthiti and Samprapti by Vyadhipareeksha but he is unable to determine the name of the disease. In such situation the Vaidya should not feel embarrassed as the treatment depends on the Doshasthiti and Samprapti of the Vyadhi and not on its name.

Hence Acharya Vagbhat has said –

विकारनामाकुशलो न जिहियात् कदाचन ।

न हि सर्वविकाराणां नामतोऽस्ति ध्रुवा स्थितिः ॥ अष्टांग हृदय १२/६४

Therefore for the perfect diagnosis of the Vyadhi, Vaidya must have complete knowledge of Vyadhipareeksha.

Acharya Charak has given detailed information of Dashavidha Rogi Pareeksha in Viman Sthana

तस्मादातुरं परीक्षेत प्रकृतितश्च, विकृतितश्च, सारतश्च, संहननतश्च;

प्रमाणतश्च, सात्न्यतश्च, सत्त्वतश्च, आहारशक्तिश्च, वयस्तश्चेति,

बलप्रमाणविशेषग्रहणहेतोः ॥

चरक विमानस्थान ८/१४

We do not consider the Dashavidha Pareeksha by Charakacharya as only a Vyadhipareeksha as it is a means of both - Vyadhi as well as Vyadhit Pareeksha.

Acharya Charak has described Vikruti Pareeksha as follows –

विकृतितश्चेति विकृतिरुच्यते विकार । तत्र विकारं हेतु-दोष-दूष्य-प्रकृति-देश-काल-बलविशेषैलिङ्गितश्च परीक्षेत...

च. वि. ८/१०१

Vikruti means 'Vikar'. Vikar or Vyadhi should be examined with help of factors like Vatadi Dosha, Raktadi Dooshya, Prakruti,

Desha, Kala, Bala. The accurate Vyadhi Bala (severity) can only be judged if the strength of these factors is known. In a condition where Hetu, Dosha – Dooshya, Prakruti, Desh, Kala, Bala are with similar qualities, that disease needs to be considered Balavan or severe and the diseases where these factors are of different qualities, the disease is of Heenabala or less severe. The Vyadhi Bala is Madhyam in those cases where few factors are similar and few are dis-similar.

This proves to be helpful in determining the Vyadhi Bala or Vyadhit Bala. After completing the diagnosis and Samprapti by Pratyakshadi Trividha Pareeksha and Nidanpanchak, Vyadhi Bala is to be understood by Vikruti Pareeksha.

The knowledge of both Rogi Bala and Vyadhi Bala is very important for proper treatment of the disease. Hence, has been described alongwith Rogipareeksha.

In this issue of Arogyamandir Patrika Visheshank Part – 1 we have tried to present the means and process of Vyadhi Pareeksha as per the Bruhatrayee in a simple way. After describing these fundamental principles of Vyadhi Pareeksha, in the Vyadhi Pareeksha Visheshank Part – 2 we will discuss the Asthavidha Pareeksha by Yogaratnakar.

Is it not necessary to think ?

Ayurveda is a complete Chikitsa Pranali or science. Ayurveda has always advocated detailed and precise Vyadhipareeksha and Rogipareeksha before starting the treatment. Various methods of Vyadhi and Rogipareeksha are described in detail, in Ayurveda Shastra. But now a days it is commonly seen that often Vaidyas follow Ayurvedic principles and have tendency towards complete Ayurvedeeya Chikitsa, but they use modern techniques for the purpose of Vyadhi Pareeksha. We are not completely against it, but is it not necessary that alongwith modern techniques or should we say the even before that, the Ayurvedeeya Vyadhipareeksha Vidhis mentioned in the text be employed or used? It we are going to treat on the basis of Ayurved, then why shouldn't we use Ayurvedeeya Principles for diagnosis of the disease? Many times Vaidyas blindly follow modern physicians and start the treatment on the basis of symptoms.

Is it not necessary to have complete knowledge of Nidanpanchak to examine the Vyadhi on Ayurvedic basis? While giving Ayurvedic treatment, shouldn't we consider principles of Ayurvedeeya Nidan alongwith the Ayurvedic medicines?

Is it not necessary for us, the Physicians to think about it?



For more details please contact:
Health Care Services

Shree Dhootapapeshwar Ltd.

135, Nanubhai Desai Rd., Khetwadi, Mumbai - 400 004

Tel. No: 91-22-3003 6300 Fax: 91-22-2388 1308

e-mail: healthcare@sdindia.com

website: www.sdindia.com