

ELUCIDATION OF THE FACTORS TO BE CONSIDERED IN AYURVEDIC CLINICAL PRACTICE

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ABSTRACT: The theory and practice of Ayurveda are based on the doctrine of *tridosha*, according to which disease states spring from the disturbance of the three factors *vata*, *pitta* and *kapha*. Being a wholistic medical system Ayurveda considers several variables in the diagnosis and treatment of diseases. This report identifies these variables in detail and highlights their clinical significance.

Introduction

The Indian medical system of Ayurveda differs from other extant medical practices on several important points. Ayurvedic theory and practice are exclusively based on the doctrine of *tridosha* (three humours), which is derived from the six schools of Indian philosophy namely *nyaya*, *vaisesika*, *samkhya*, *yoga*, *mimamsa* and *vedanta*¹. Observation (*darsana*), palpation (*sparsana*) and interrogation (*prasna*) of the patient are the only diagnostic tools recommended in Ayurveda for collecting information on the pathological state. This fundamental difference between Ayurveda and Western medicine is poorly appreciated in present day clinical testing of ayurvedic medicine which employs invariably Western diagnostic protocols. The results of such studies are of controversial nature and consequently the relevance of Ayurveda is often a subject of debate^{2,4}. We had outlined in an earlier report the variables to be considered in ayurvedic clinical practice⁵. These factors

are identified in detail in this communication. Attempt has also been made to highlight their clinical significance.

The *tridosha* Concept

According to the doctrine of *tridosha*, the body remains in a healthy state as long as the *tridosha* (*vata*, *pitta* and *kapha*) are in undisturbed steady state and disease is a result of their imbalance⁶. The *tridosha* produce specific symptoms when the constituent humours are in "high" or "low" stages of activity⁷. Clear understanding of the various aspects of the humoral imbalance is pivotal to effective treatment⁸.

The *tridosha* doctrine makes it possible to obtain an approximate estimate of the primary cause of pathology in an individual. The utility of this approach is exemplified by Caraka's statement that as long as a physician can understand the nature of the humoral imbalance, he need not feel inferior, even if he fails to assign a name to the disease⁹.

As a first step in the diagnosis and selection of appropriate therapeutic protocol the functional states of *vata*, *pitta* and *kapha* in the patient's body are to be assessed. Judicious use of food, measures and drugs which have qualities antagonistic to those of the humour(s) in question brings back the destabilised *tridosas* to their normal states⁶. For example, if *vata* is high in a body, the food, measures and drugs should possess qualities opposite to those of *vata*.

The Variables

Considering the fact that the human organism is part of the cosmos, Ayurveda insists upon the need to examine *minutely* ten factors for effective diagnosis and treatment of diseases⁹.

i. Physiological Constitution

The *tridosas* exist in varying degrees of dominance even during the state of health. Thus Ayurveda classifies individuals into seven *prakriti* (constitution) i.e., *vata* type, *pitta* type, *kapha* type, *vata-pitta* type, *pitta-kapha* type, *vata-kapha* type and *vata-pitta-kapha* type. These *prakriti* are said to result from dietary and behavioural patterns of the pregnant woman, dominance of *tridosas* in the female reproductive tract, the season in which conception occurs and genetic factors. The seven types can be identified by distinct physical, behavioural and psychological features¹⁰. It seems that the various animals like mouse, tiger, elephant etc assigned by Susruta to each *prakriti* are symbolic representations¹¹.

As individuals belonging to each *prakriti* are prone to disease arising out of the destabilisation of the corresponding

humour(s), food, measures and drugs should be selected to facilitate effective control of the humour(s) and to promote their steady state in disease as well as healthy state. For instance, *vata* and *pitta* are more likely to get destabilised in a person of *vata-pitta* constitution and naturally the food, measures and drugs should have strong *vata-pitta*-lowering property. Nevertheless, the *prakriti* should be clearly distinguished from the humoral imbalance (*dosakopam*). This point is amply discussed in *Rasavaisesikasutram* of Bhadanta Nagarjuna, a scholar of the pre-Vagbhata era¹².

ii. The Tissue Elements

The human body is made up of seven tissue elements or *dhatu* (*rasam* "tissue", *raktam* = "blood", *mamsam* = "muscle", *medas* = "adipose tissue", *ashti* = "bone", *majja* = "bone marrow" and *sukra* = reproductive element). The essential products of digestion are collectively called *rasam* which transforms sequentially into *raktam*, *mamsam*, *medas*, *ashti*, *majja* and *sukra*. The end product of this *dhatu* cycle is known as *ojas* which is said to circulate in the body imparting strength and vitality. *Ojaksaya* or diminution of *ojas* follows the disruption of the *dhatu* cycle and varying states of illness originate therefrom⁷. As it is mentioned that minute channels exist in the body for transporting each of the seven *dhatu*¹³, it is possible that the terms *rasam*, *raktam*, *mamsam* etc do not denote only the gross forms of these tissue elements.

While taking part in the *dhatu* cycle each *dhatu* gives out its characteristic *mala* (waste product). However, *purisam* (fe-

ces), *mutram* (urine) and *sveda* (sweat) are the three principal *mala* of clinical importance. An intelligent practitioner can accurately gauge the state of *dhatu* cycle by correlating symptoms and signs with the *dhatu*, *mala* and *tridosas*⁷. Caraka opines that one should also check the states of the *dhatu* cycle by assessing their "degrees of excellence" (*sara*)¹⁰. The sum of the eight *sara* is obviously an indicator of the *ojas* circulating in the individual.

iii. Digestive Efficiency

Metabolic activities of the human body are regulated by the omnipresent *agni* (fire) which, for the sake of convenience is classified into thirteen varieties. The ingested food is first digested by *jadharagni* (abdominal fire) followed by five *bhutagni* (fires of the five elements), one *agni* assigned to *bhuta* present in matter. The essential products of digestion (*rasam*) enter the *dhatu* cycle, each step of which is catalysed by a *dhatvagni* corresponding to each *dhatu*¹⁴.

Authorities of Ayurveda consider *jadharagni* as the prime regulator of metabolism. It is classified into four types depending on the "intensity". *Visamagni* (irregular) is observed in *vata prakriti*. Predominance of *pitta* gives rise to *tiksnagni* (sharp). *Mandagni* (dull) results from the influence of *kapha*. *Samagni* (regular) is experienced by individuals in whom there is steady state of *tridosas*^{10,15}.

Malfunctioning of any part of the digestive system is certain to reflect in the general physiology. Accordingly, it is not surprising to find symptoms like anorexia,

dryness of mouth, increased salivation, vomiting, indigestion, constipation etc included in ayurvedic nosological literature¹⁶. It is thus obvious that *jadharagni* is a broad term used to describe the state of the entire alimentary tract and not the stomach alone as erroneously believed by many.

The Concept of *ama*

The essential products of digestion (*rasam*) are prevented from entering the *dhatu* cycle in individuals possessing sub-normal *jadharagni*. This in turn causes the liberation of toxic substances collectively called *ama*, which spread to various parts of the body disturbing the steady state of *tridosas*¹⁷. Descriptions of the various signs and symptoms associated with *ama* are available¹⁸.

Before starting the main line of treatment, the *ama* present in the body should be eliminated using appropriate drugs and *pancakarma* techniques. The *jadharagni* should thereupon be regulated and food, measures and drugs adopted to keep the entire alimentary tract in good tone devoid of tendency to constipate.

iv. Circadian and Circannual Rhythms

The *tridosas* exhibit circadian and circannual rhythms. Day and night start with *kapha* and end with *vata*, the intermediate period being characterised by predominance of *pitta*⁶. Similarly, the *tridosas* fluctuate during the seasons of the year¹⁰. The chronological aspects of *tridosas* are to be considered in diagnosis and selection of medicines and time of their

administration. Vagebhata recommends ten different schedules for administering medicines¹⁷.

The physician is also expected to review the various aspects of the humoural pathology like *caya*, *prakopa* etc as they are important in treatment and prognosis.

v Age

If the life span of an individual is divided into three equal parts (childhood, adulthood, old age), the first part will be dominated by *kapha*, followed by *pitta* and *vata* respectively⁶. The age of the patient helps the physician to make prognosis. It is also helpful in deciding the dosage of medicines.

vi Stamina

Caraka Samhita states that stamina (*balam*) is of three types. Due to genetic factors an individual possesses inherent strength. The season of the year and the age of the individual, by virtue of their *tridosha*-modulating qualities, alter the strength and so does the adoption of food and measures¹⁹. The constitutional and temporal aspects of *balam* should be considered in the selection of such food and measures which help the body to regain the state of health. For instance, strong purgatives and emetics are not to be administered to children and the elderly. It is said that the term *balam* also connotes the intensity of the disease (*rogabalam*).

vii The Type of Country.

Depending on climatic and geographical features a land (*desam*) is divisible into *jangala* (arid), *anupa* (wet, marshy, syl-

van) and *sadharana* (mixed) varieties. *Vata* is predominant in the first one and *kapha* in the second. The third type is favourable for maintenance of steady state of *tridosha*⁶. Caraka describes in detail the characteristics of the three types of land²⁰.

The type of country has its own clinical importance. For example, if a *vata* disease manifests in one individual each of the *jangala* and *anupa* areas, the drug should be administered to the former in the medium of clarified butter and the latter should receive only a plain aqueous extract.

It is suggested in recent times that the electromagnetic field changes of the environment can have profound effects on the electromagnetic fields of living creatures causing alterations in their physiology²¹. Protagonists of the self-regulating (Gaia) hypothesis argue that life and the environment are a coupled feedback system, where changes in one element will affect the other and this in turn feeds back on the original change²².

Basing on the diverse meanings of Sanskrit words, some practitioners remark that the term *desam* also means the site of manifestation of the disease (*rogadesam*).

viii. Homologation

Getting used to wholesome food, drinks and measures is called *satmya* (homologation). Unwholesome victuals and measures will be injurious in the long run though they do not evoke any immediate adverse reactions. The habits and addictions of a patient need to be understood for achieving homologation. The

patient should be instructed to adopt in slow degrees appropriate food and habits which are wholesome and conducive to maintaining steady state of the *tridosas*. For example, a patient used to the unhealthy practice of eating late in the night is to be educated on the necessity to have an early dinner preferably at dusk so as to be more in tune with the endogenous humoral rhythms. Similarly, medicated wines are to be prescribed to an individual habituated to drinking alcoholic beverages. Gradually he should free himself from the addiction and resort to food, drinks and habits acceptable to his physiological constitution²³. As the various aspects of dietetics are treated separately (vide infra), the term *satmya* means all efforts to achieve comprehensive homologation.

ix Food

Ayurveda states that the physical and mental characteristics of a person are influenced by the type of food. Consequently, proper dietetics is essential to maintain health²³. The time of administration of the medicine with reference to the meals and post-prandial drinks (*anupana*) are to be specified according to the nature of the disease and the medicines prescribed.

x Emotional Status

Fear, anxiety and other psychological stresses aggravate the illness. The patient is therefore expected to be optimistic and fearless to undergo treatment^{6,24}. The physician should explain the need for meticulously obeying the instructions and boost

the morale with kind and encouraging words. These suggestions are supported by the recent discovery that healing process is positively influenced by an optimistic outlook²⁵. Similar advice is given by yogis specialising in suggestive healing²⁶.

Conclusions

It is obvious from this brief review that a "personal" approach is required for the treatment of each patient on account of the several variables. After all, an ayurvedic physician treats (corrects) the *pancabhuta* structure of individuals and not the disease. It is in this context that the ten factors outlined above assume much significance.

As ayurvedic theory correlates qualities of matter, seasons symptoms of diseases and several other factors with *vata*, *pitta* and *kapha*, introduction of any new parameter into ayurvedic practice calls for establishing its relationship with the *tridosas*. For example, clinical data obtained through instrumental techniques like spectrophotometry, electrocardiography, electromyography and the like are to be rationally correlated with *tridosas* before they are integrated into Ayurveda. However, as such an exercise seems to be a difficult task in the light of the present state of affairs, it will be more appropriate to use Western medical knowledge and investigation technology for evaluating the success of ayurvedic diagnosis and treatment. Well-controlled comparative clinical trials are essential in this regard. It is certain that such an approach will, in addition to standardising ayurvedic clinical practice itself, contribute many novel ideas to Western medicine in its fight against disease²⁷.

Advances in scientific research have proved the existence of biological rhythms and a "brain-gut axis"²⁸⁻³⁰. Interestingly, recent studies of psychoneuroimmunologists implicates the "mind" in the causation of diseases^{31,32}. That such phenomena are already recognised by Ayurveda speaks of the scientificity of the ancient medical philosophy of *tridosas*. Therefore, it will be in the interest of global health care to study dispassionately and systemati-

cally the ayurvedic approach to health and disease.

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